VOGLIGRESS TM 0.2 0.3

Voglibose 0.2 mg / 0.3 mg Tablets

DESCRIPTION:

VOGLIGRESS is an orally available tablet contains Voglibose 0.2 mg / 0.3 mg. which belongs to class of competitive α -glucosidase inhibitors, used in the management of Diabetes mellitus.

COMPOSITION:

Each Film coated Tablet contains VOGLIGRESS 0.2: Voglibose 0.2 mg VOGLIGRESS 0.3: Voglibose 0.3 mg

INDICATIONS:

Type 2 Diabetes Mellitus Glycogen Storage disease

VOGLIGRESS is used in NIDDM (Non-Insulin-Dependent Diabetes Mellitus) in combination with sulfonylurea or metformin when proper inadequate glycemic control i.e. post-prandial glucose level is not achieved with monotherapy with OHAs (Oral Hypoglycemic Agents).

MODE OF ACTION:

Voglibose is an alpha glucosidase inhibitor which reduces intestinal absorption of starch, dextrin, and disaccharides by inhibiting the action of α -glucosidase in the intestinal brush border. Inhibition of this enzyme catalyzes the decomposition of disaccharides into monosaccharides and slows the digestion and absorption of carbohydrates; the post-prandial rise in plasma glucose is blunted in both normal and diabetic subjects resulting in improvement of post prandial hyperglycemia and various disorders caused by hyperglycemia.

Voglibose do not stimulate insulin release and therefore do not result in hypoglycemia. These agents may be considered as monotherapy in elderly patients or in patients with predominantly post prandial hyperglycemia. α -Glucosidase inhibitors are typically used in combination with other oral antidiabetic agents and/or insulin. Voglibose should be administered at the start of a meal as it is poorly absorbed.

DOSAGE:

Vogligress 0.2 : One tablet t.i.d Vogligress 0.3 : One tablet t.i.d

PRESENTATION:

Vogligress is available as a strip of 10 tablets

La Renon Healthcare Pvt. Ltd.

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Introducing,

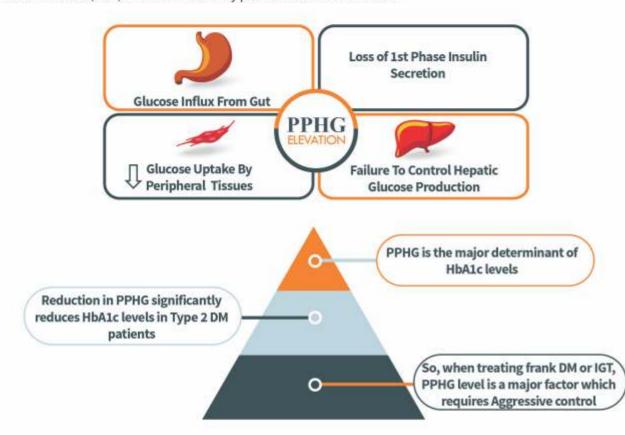
VOGLIGRESS™ 0.2 0.3

Voglibose 0.2 mg / 0.3 mg Tablets

La Renon

Diabetes Mellitus:

Diabetes Mellitus (DM) is a chronic metabolic disorder affecting people worldwide, with significant morbidity and mortality caused by its micro-vascular and macro-vascular complications, affecting various vital organs and structures in humans. In diabetic patients, PPHG (Post-Prandial Hyperglycemia) is a direct and independent risk factor for development of Cardiovascular Diseases (CVD) or stroke caused by premature atherosclerosis.



The United Kingdom Prospective Diabetes (UKPD) study showed that for every 1% reduction in HbA1c levels, there was an average reduction in micro-vascular complications of 21%, with a maximum reduction of 35%. The risk of myocardial interaction and sudden death were reduced by 16%. There has been an 18% reduction in fatal and non-fatal myocardial infections for every 1% reduction in HbA1c levels.

How Voglibose Works?

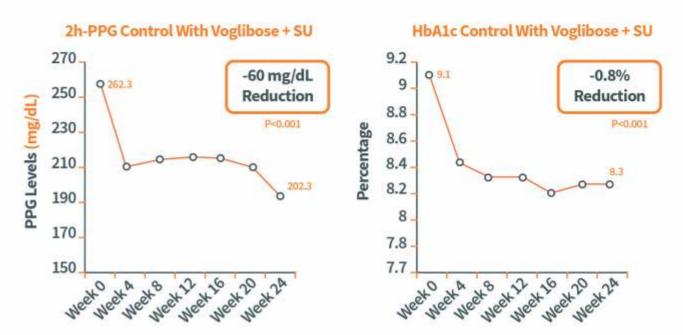
Voglibose belongs to class of competitive α-glucosidase inhibitors

- Voglibose is effective in reducing levels of 2h-PPG by around 20 mg/dl & HbA1c by 0.6%
- O Voglibose inhibits α-glucosidases like sucrase & maltase 190-270 times more than acarbose & 100 times more than miglitol



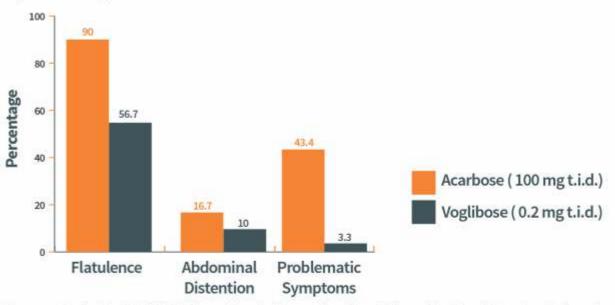
Clinical Studies

A) Addition of voglibose to SU (Sulfonylureas) leads to further improvement in glucose levels



(N=113 type 2 diabetics uncontrolled to SU(Sulfonylureas); Voglibose (0.6 mg/day) added before meals for 24 weeks)

B) Better Side-effect profile of Voglibose than Acarbose



(N=30, Type 2 diabetics uncontrolled to diet. All initially on 4 week observation Phase followed by 8 week treatment phase)

REFERENCES:

- 1) Journal of Clinical and Diagnostic Research. 2013 Dec, Vol-7(12): 3023-3027
- 2) Diabetes Res. Clin. Pract. 2005;67:204-10
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- Diabetes Res Clin Pract. 2002; 55: 99-103
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