



A BETTER MOVE



Levigress

Levetiracetam 250 mg, 500 mg, 750 mg Tablets, 1000 mg PR Tablets
100 mg/ml Syrup and 500 mg / 5 ml Injection

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BACKGROUND:

- Epilepsy is a chronic disorder, the hallmark of which is recurrent, unprovoked seizures. Many people with epilepsy have more than one type of seizure and may have other symptoms of neurological problems as well.
- The human brain is the source of human epilepsy. Although the symptoms of a seizure may affect any part of the body, the electrical events that produce the symptoms occur in the brain. The location of that event, how it spreads and how much of the brain is affected, and how long it lasts all have profound effects. These factors determine the character of a seizure and its impact on the individual.
- A person is diagnosed with epilepsy if they have one or more seizures that were not caused by some known and reversible medical condition like alcohol withdrawal or extremely low blood sugar. The seizures in epilepsy may be related to a brain injury or a family tendency, but often the cause is completely unknown. The word "epilepsy" does not indicate anything about the cause of the person's seizures or their severity.¹

PREVALENCE:

- Epilepsy is the fourth most common neurological disorder and affects people of all ages
- **65 MILLION:** Number of people around the world who have epilepsy.
- **3 MILLION:** Number of people in the United States who have epilepsy.
- **1 IN 26 people** in the United States will develop epilepsy at some point in their lifetime.
- **BETWEEN 4 AND 10 OUT OF 1,000:** Number of people on earth who live with active seizures at any one time.
- **ONE-THIRD:** Number of people with epilepsy who live with uncontrollable seizures because no available treatment works for them.
- **6 OUT OF 10:** Number of people with epilepsy where the cause is unknown.

CLINICAL EFFECTIVENESS:

Epilepsy Research and Treatment; 2015 Journal:

“Efficacy and Safety of Levetiracetam and Carbamazepine as Monotherapy in Partial Seizures”

- The study was undertaken to compare the efficacy and safety of Levetiracetam (LEV) and Carbamazepine (CBZ) in partial epilepsy.
- This was a randomized, prospective, open label, comparative mono-therapy study conducted on 60 patients.

RESULTS:

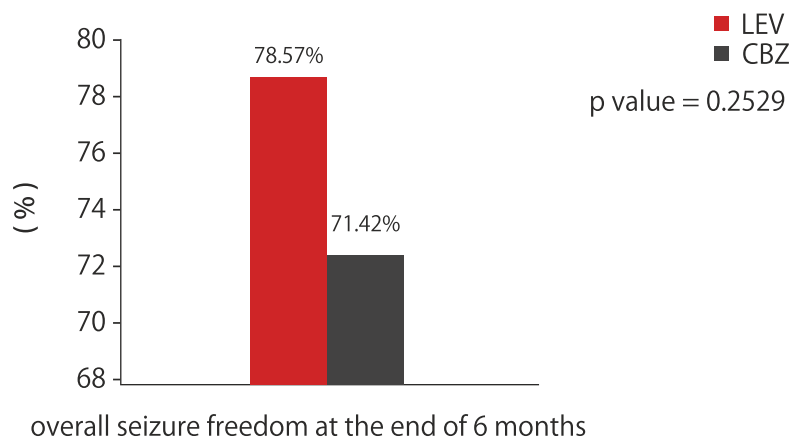
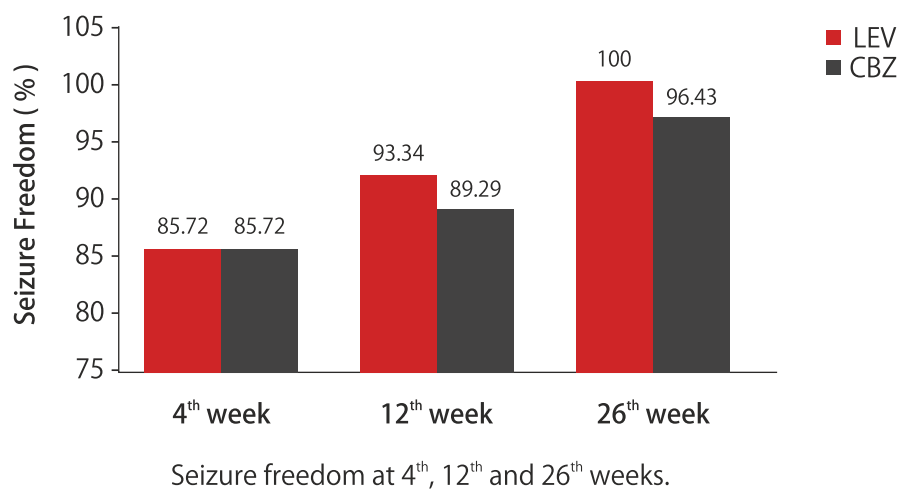


Figure: Seizure freedom at 4th, 12th, and 26th weeks. **Figure:** Overall seizure freedom at the end of 6 months.

CONCLUSION:

- The efficacy of LEV is comparable to CBZ as monotherapy in the treatment of partial seizures. Both drugs equally reduced the seizure frequency compared to pretreatment seizure frequency.
- LEV demonstrated better QOL after 6 months of therapy compared to CBZ.

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DESCRIPTION:

Levigress is an antiepileptic drug available as tablets / syrup / injection. The chemical name of levetiracetam, a single enantiomer, is (-)-(S)- α -ethyl-2-oxo-1-pyrrolidine acetamide. Levetiracetam is used as adjunctive therapy in the treatment of partial onset therapy.

MECHANISM OF ACTION:

Leviteracetam is thought to stimulate synaptic vesicle protein 2A (SV2A), inhibiting neurotransmitter release. Leviteracetam may selectively prevent hyper- synchronization of epileptic form burst firing and propagation of seizure activity.

INDICATION:

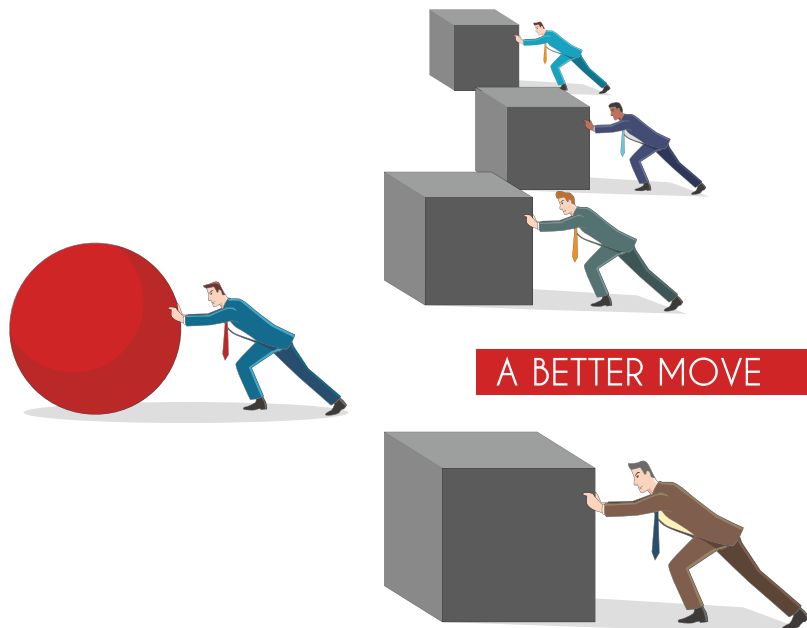
Levigress is indicated as adjunctive therapy in the treatment of seizures in patients greater than or equal to 16 years of age with epilepsy.

DOSAGE AND ADMINISTRATION:

Treatment should be started with 250 mg initially and gradually titrated to higher doses orally.

CONTRAINDICATION:

The product should not be administered to patients who have previously exhibited hypersensitivity to leviteracetam.



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