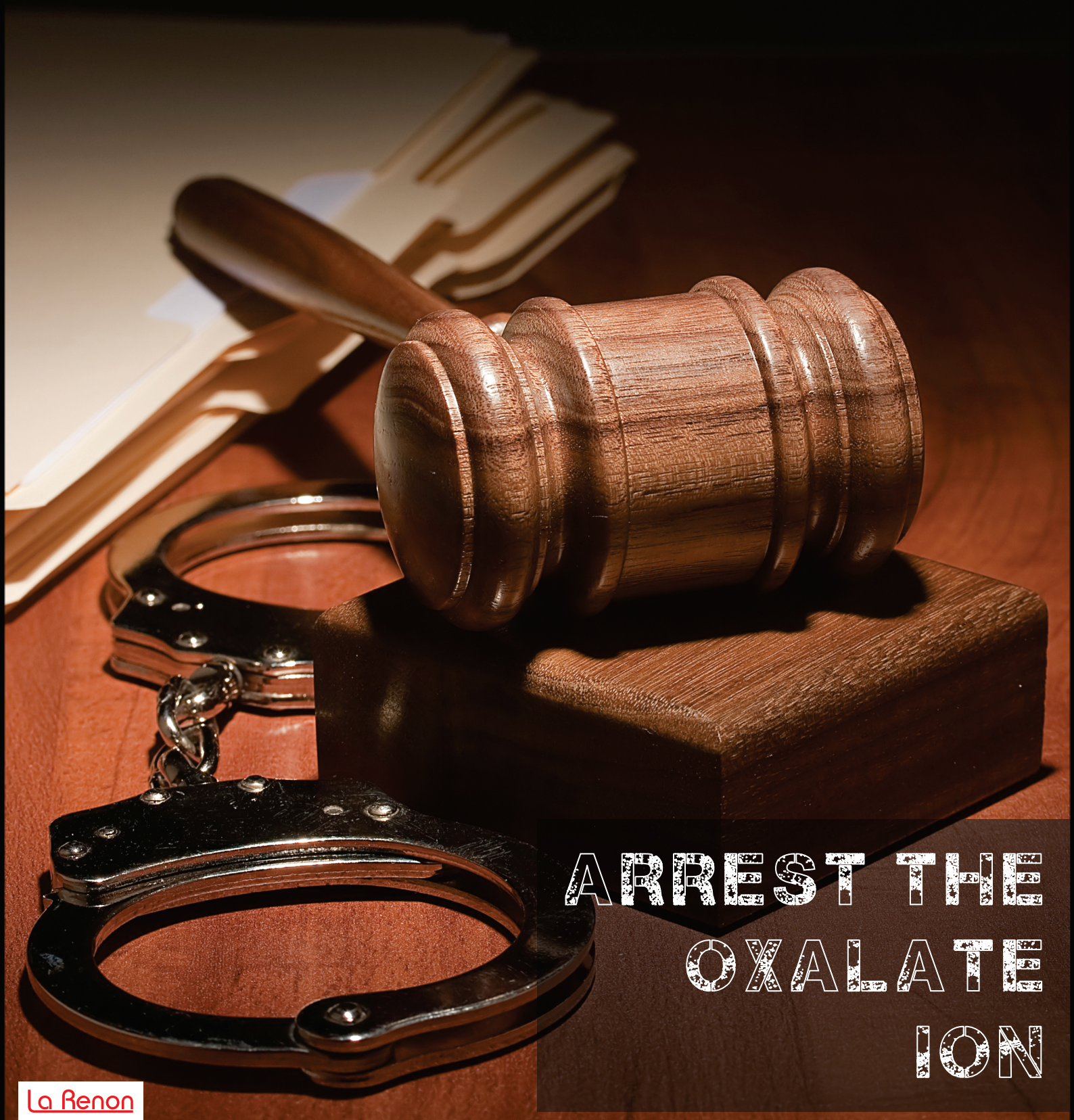
OXASTOP

Capsules of Oxalobacter, Lactobacillus & Bifidobacterium with FOS



ARREST THE OXALATE ION

La Renon

OXASTOP™

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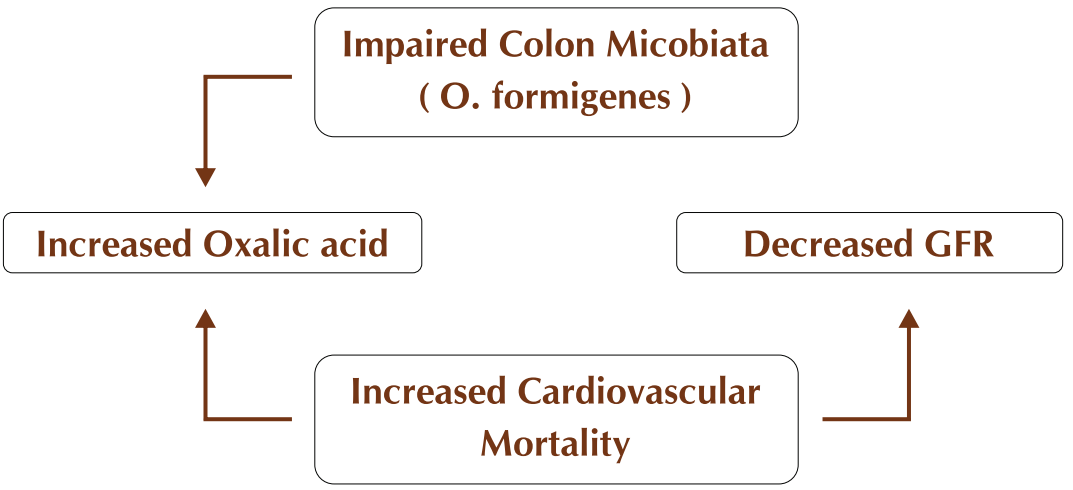
BACKGROUND

- Kidney stones are hard deposits of minerals and acid salts that stick together in concentrated urine.
- The stone-forming chemicals are calcium, oxalate, urate, cysteine, xanthine, & phosphate. Most kidney stones are composed primarily of calcium oxalate. Up to 80% of kidney stones are predominantly composed of calcium oxalate.
- Urinary oxalate is a major risk factor for CaOx stone formation.[2]
- Oxalobacter formigenes is a Gram negative, anaerobic bacterium that metabolizes oxalate in the intestinal tract and is present in a large proportion of the normal adult population.
- The absence of O. formigenes could permit more absorption of dietary oxalate in the colon and decreased secretion from endogenous sources, resulting in higher oxalate excretion in the urine and thus predisposition to CaOx calculus formation.[2]

WHY OXASTOP ?

- O. formigenes is a gram-negative, anaerobic bacterium that both degrades and secretes ingested oxalate via feces in normal circumstances.[4]
- The colonization with O. formigenes is associated with a 70% reduction in the risk for being a recurrent calcium oxalate stone former.[2]
- O. formigenes administration is safe, that it transiently colonizes the intestinal tract, and that it exerts its metabolic activity to enhance the non-urinary removal of endogenous oxalate through enteric elimination.[3]

The relation between colo–reno–cardiac axis[4]-



OXALOBACTER FORMIGENES : OPENING THE DOOR TO PROBIOTIC THERAPY FOR THE TREATMENT OF HYPEROXALURIA[1]

OBJECTIVE

The aim of this study was to determine the early effect of the administration of Oxalobacter formigenes on the metabolic pattern of patients with calcium oxalate stones, comparing it with potassium magnesium citrate (KMgCit).

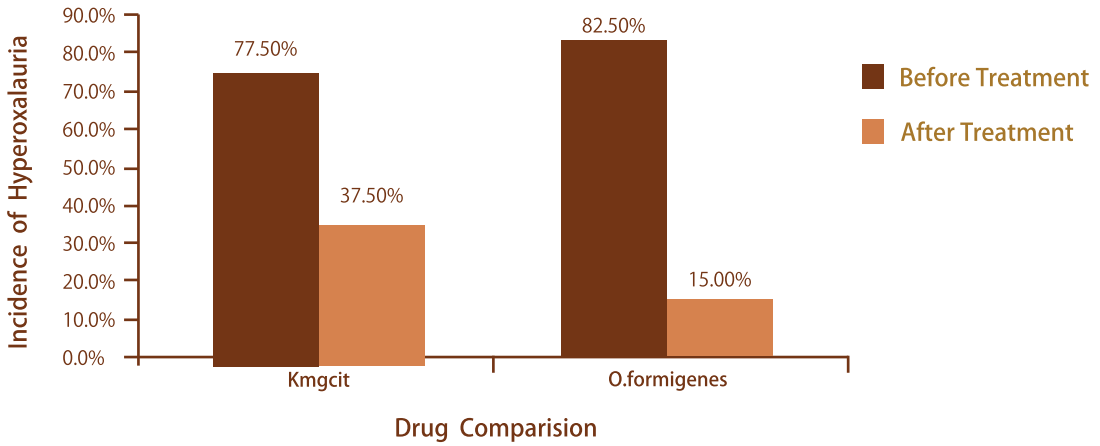
MATERIALS AND METHODS

Eighty patients were randomized to receive either 30 mEq of KMgCit or 700 million O. formigenes, both twice a day. Serum creatinine, serum urate, serum calcium and phosphorus, serum intact parathyroid hormone (if serum calcium >10.5 mg/dl) and 24 h urine metabolic evaluation for various metabolites (e.g. oxalate, calcium, phosphorus, citrate, magnesium, urate and creatinine) were evaluated at baseline and 1 month after starting the treatment.

RESULTS

In both groups hyperoxaluria was the most common abnormality, followed by hypercalciuria. The incidence of hyperoxaluria decreased at 1 month compared to baseline in both KMgCit (77.5% vs 37.5%) and O. formigenes preparation (82.5% vs 15%) groups, while other urinary metabolic abnormalities were similar at baseline and 1 month in both groups. Three patients in the KMgCit had mild self-limiting secondary symptoms.

EFFICACY OF O.FORMIGENES



CONCLUSION

Compared with KMgCit, O. formigenes preparation is more effective in decreasing the incidence of hyperoxaluria, opening the door to probiotic therapy as a potential new weapon against hyperoxaluria.

References - 1. Scand J Urol: 1–4: 2015 | 2. J Am Soc Nephrol. 2008 Jun; 19 (6): 1197–1203.
3. Kidney International (2006) 70, 1305–1311 | 4. K. Turkmen, F.M. Erdur / Medical Hypotheses 84 (2015) 273–275

OXASTOP™

Capsules of Oxalobacter, Lactobacillus & Bifidobacterium with FOS

DESCRIPTION

- Probiotics are live microorganisms that may confer a health benefit on the host.
- Probiotics may beneficially affect the host by augmenting its intestinal microbial population beyond the amount already existing, thus possibly inhibiting pathogens.
- OXASTOP™ is a high quality unique composition of Probiotics & Prebiotic, intended to reduce the load of oxalate in the body.

COMPOSITION

- Each capsule of OXASTOP™ contains four specific probiotic species namely Oxalobacter formignes in 700 Million CFU, Lacotbacillus acidophilus in 400 Million CFU, Lactobacillus rhamnosus in 300 Million CFU and Bifidobacterium longum in 300 Million CFU with Fructo oligosaccharide as the prebiotic ingredient.
- Note –CFU means Colony Forming Units and is a unit to estimate the number of viable microorganisms.

INDICATION

- OXASTOP™ is indicated to lower down the concentration of oxalate in the body and either decrease the further formation of oxalate stones or stop the recurrence of oxalate stones in the body.

MECHANISM OF ACTION

- Oxalobacter formigenes is a gram negative anaerobic bacterium that metabolizes oxalate in the intestinal tract.
- The colonization with O. formigenes is associated with a 70% reduction in the risk for being a recurrent calcium oxalate stone former.

DOSAGE

The preferred dosage of OXASTOP™ is two capsules a day for a period of minimum three months.

PRESENTATION

- OXASTOP™ is available as a strip of 10 capsule in Alu-Alu strip packing.

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