

La Renon

For a dialogue
with reality



OLAGRESS

Olanzapine Mouth Dissolving Tablets 2.5 mg, 5 mg, 7.5 mg and 10 mg

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BACKGROUND -

Bipolar disorder (BPD), also known as manic-depressive illness, is a brain disorder that causes unusual shifts in mood, energy, activity levels, and the ability to carry out day-to-day tasks. There are four basic types of bipolar disorder; all of them involve clear changes in mood, energy & activity levels. The different states of moods range from periods of extremely "up," elated, and energized behavior (known as manic episodes) to very sad, "down," or hopeless periods (known as depressive episodes). Less severe manic periods are known as hypomanic episodes.

Schizophrenia is a chronic and severe mental disorder that affects how a person thinks, feels, and behaves. People with schizophrenia may seem like they have lost touch with reality. Although schizophrenia is not as common as other mental disorders, the symptoms can be very disabling.

FACTS AND STATISTICS -

- BPD is responsible for the loss of more disability-adjusted life years (DALYs) than all forms of cancer or than major neurologic conditions such as epilepsy and Alzheimer's disease.¹
- Lifetime prevalence of BPD across the globe is approximately 1.2% and as per 2014 study affects 2.2% population of USA or approximately 5.3 million adults in the US aged 18 or older.^{1&2}
- The Prevalence of schizophrenia is approximately 1.1% of the population over the age of 18 or 51 million people worldwide suffer from schizophrenia, including.²
 - 6 to 12 million people in China (a rough estimate based on the population)
 - 4.3 to 8.7 million people in India (a rough estimate based on the population)
 - 2.2 million people in USA
 - 285,000 people in Australia
 - Over 280,000 people in Canada
 - Over 250,000 diagnosed cases in Britain

REFERENCES -

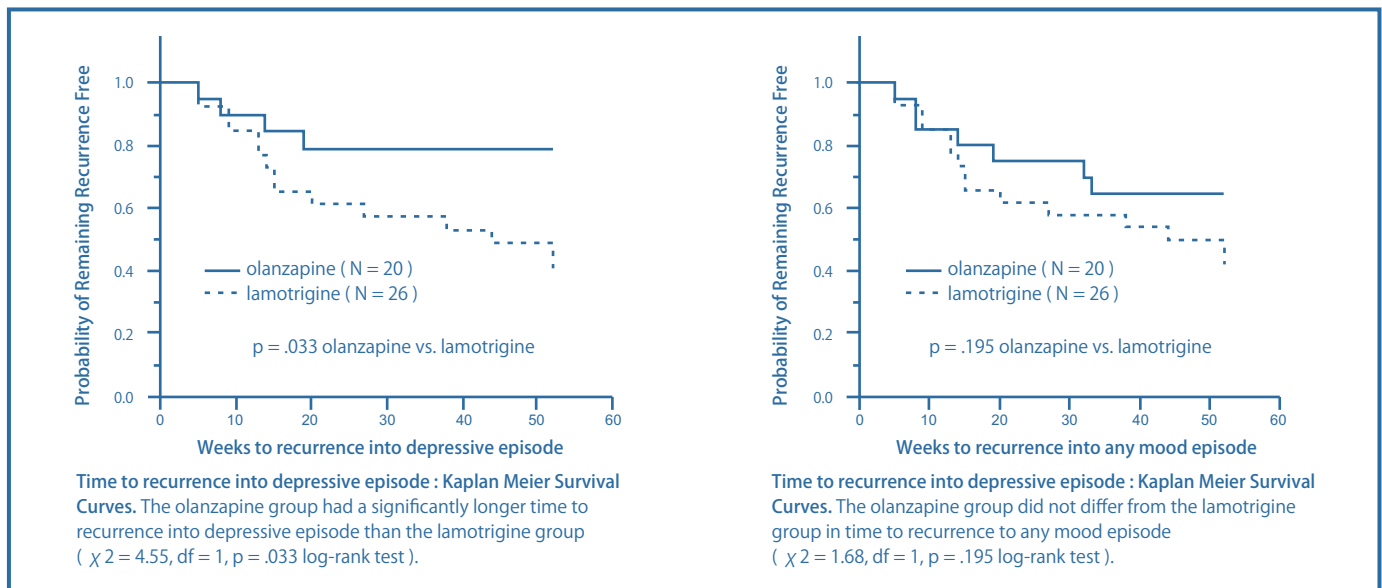
1 - Arch Gen Psychiatry; 2011 | 2 - J Indian Soc Periodontol.; 18(1): 69-73: 2014

CLINICAL EFFECTIVENESS -

As per BMC Psychiatry; 2014

"Olanzapine is superior to lamotrigine in the prevention of bipolar depression-a naturalistic observational study"

- Study on 51 patients, maintained with olanzapine (n = 22) & with lamotrigine (n = 29) for 12 months.
- Results: Olanzapine significantly reduces recurrence rate of depressive episodes than lamotrigine (20.0% vs. 57.7%, $\chi^2 = 6.62$, $p = .010$).
- Olanzapine is significantly superior to lamotrigine in the time to recurrence of depressive episodes ($\chi^2 = 4.55$, $df = 1$, $p = .033$).

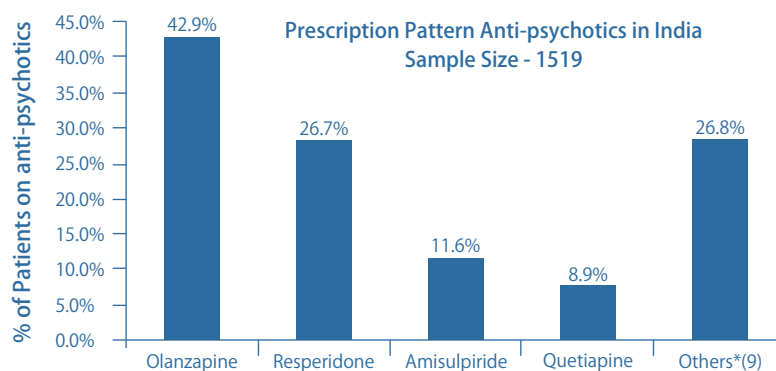


CONCLUSION -

- Olanzapine is more effective than lamotrigine in the prevention of the recurrence of bipolar depression.

As per Indian Journal Psychiatry; 2014

- Olanzapine is the most commonly prescribed antipsychotic in India.



OLAGRESS

Olanzapine Mouth Dissolving Tablets 2.5 mg, 5 mg, 7.5 mg, & 10 mg

DESCRIPTION -

OLAGRESS is a mouth dissolving uncoated tablets containing olanzapine. Available in the strength of 2.5 mg, 5 mg, 7.5 mg and 10 mg. Olanzapine is an atypical antipsychotic, approved by the FDA in 1996.

MECHANISM OF ACTION -

Olanzapine is a selective monoaminergic antagonist with high affinity binding to the following receptors : serotonin 5HT_{2A/2C}, 5HT₆, dopamine D₁₋₄, histamine H₁, & adrenergic α 1 receptors. Olanzapine is an antagonist with moderate affinity binding for serotonin 5HT₃ and muscarinic M₁₋₅. Olanzapine binds weakly to GABA_A, BZD, and β adrenergic receptors.

The mechanism of action of olanzapine, as with other drugs having efficacy in schizophrenia, is unknown. However, it has been proposed that this drug's efficacy in schizophrenia is mediated through a combination of dopamine and serotonin type 2 (5HT₂) antagonism. Olanzapine's antipsychotic activity is likely due to a combination of antagonism at D₂ receptors in the mesolimbic pathway & 5HT_{2A} receptors in the frontal cortex. Antagonism at D₂ receptors relieves positive symptoms while antagonism at 5HT_{2A} receptors relieves negative symptoms of schizophrenia.

INDICATION -

For the acute & maintenance treatment of schizophrenia and related psychotic disorders, as well as acute treatment of manic or mixed episodes of bipolar I disorder.

DOSAGE -

Schizophrenia in Adults -

Oral : start at 5 – 10 mg once daily.

Target : 10 mg/day

Bipolar I Disorder in Adults -

Oral : Start at 10 – 15 mg/day

Schizophrenia in Adolescents -

Oral : Start at 2.5 – 5 mg once daily

Target : 10 mg/day

Bipolar I Disorder in Adolescents -

Oral : Start 2.5 – 5 mg once daily

Target : 10 mg/day

An increase to a dose greater than the target dose of 10 mg / day (i.e., to a dose of 15 mg / day or greater) is recommended only after clinical assessment.

ADMINISTRATION - It comes as a tablet and to be taken by mouth.

PRESENTATION - It is available as strip of 10 Tablets.

STORAGE - Store below 30 °C. Keep in cool and dry place. Protect from light and moisture.

La Renon Healthcare Pvt. Ltd.

207-208 Iscon Elegance | Circle P | Prahlad Nagar Cross Roads | S.G. Highway Ahmedabad-380015, Gujarat, India.
Phone : + 91-79-6616 8998 | Fax : +91-6616 8998 | E-mail : info@larenon.com | Web : www.larenon.com