

"PUT A PA||SE TO PRICKLE !! "



Mirapause

S-Equol 5 mg Tablets

Background

- World Health Organization (WHO) defined natural menopause as the “Permanent cessation of menstruation resulting from the loss of ovarian follicular activity”
- Menopause is prompted by decline in oestrogen and progesterone production, and rising follicle stimulating hormone (FSH) and luteinizing hormone (LH) levels.
- Hot flashes are the classic sign of menopause. Hot flashes is a sudden feeling of warmth that is generally more intense over the face, neck and chest. Hot flashes can be accompanied by sweating, flushing, palpitations, anxiety, irritability and even panic and are often followed by chills and shivering.
- It cause arousal from sleep which leads to sleep disturbances and thus may lead to insomnia, irritability and difficulties with memory and concentration.

MIRAPAUSE – The Natural Hormone Therapy

Equol Decreases Hot Flashes in Postmenopausal Women: A Meta-analysis of Randomized Clinical Trials

- The efficacy of soy isoflavones and equol for alleviating menopausal symptoms, especially vasomotor symptoms, in postmenopausal women.
- In this meta-analysis 5 studies total 728 subjects were included.
- The primary outcome was the effect on hot flashes. The severity of hot flashes was determined by the scores, and sensitivity and risk of bias analyses were conducted.
- There were two types of interventions in the RCTs: one type was to give S-equol or placebo in equol nonproducing subjects and the other type provided isoflavones instead of equol to subjects who were or were not equol producers.
- Meta-analysis revealed a significant benefit of equol for lowering hot flash scores and revealed a generally low risk of bias.

Conclusion: The study found that supplementing S-Equol significantly lowered the incidence and severity of hot flashes in equol nonproducers menopausal women.



Clinical Evidence

Objective:
To examine the efficacy of a supplement containing natural S--equol (a Daidzein metabolite) in reducing menopausal symptoms.

Study Design:
Multicenter, double-blind placebo-controlled trial

Total No. of Patient: 160

Group A
N=83 (placebo group) lactose

Group B
N=77 (S- equol group)10 mg/day

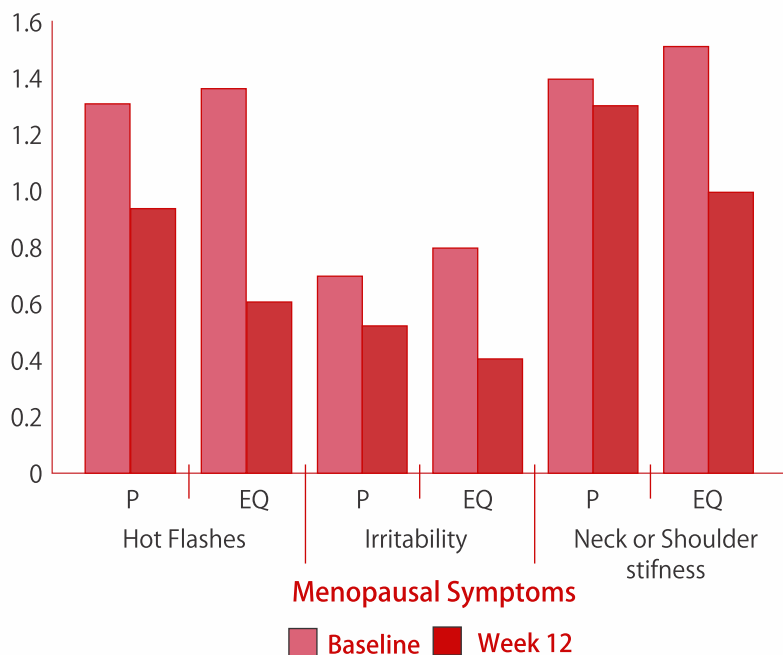
Duration:
12 weeks

Results:

Evaluation of menopausal symptoms by modified climacteric symptoms evaluation form checklist at changes from baseline to end of intervention period in placebo group (P) and S(-) Equol Group (EQ)

Symptom Score						
Menopausal Symptoms	Group	N	Baseline	Week 12	Changes From baseline to week 12	% Improvement
Hot flashes	P	60	1.3±0.5	0.9±0.6	-0.5±0.6	45.0
	EQ	66	1.3±0.5	0.6±0.6	-0.7±0.6	61.2
Irritability	P	60	0.7±0.8	0.5±0.7	-0.2±0.5	20.0
	EQ	66	0.8±0.7	0.4±0.6	-0.4±0.7	34.8
Neck or Shoulder muscle stiffness	P	58	1.4±0.8	1.3±0.8	-0.1±0.6	24.1
	EQ	62	1.5±0.8	1.0±0.7	-0.5±0.8	39.4

Evaluation of Menopausal Symptoms



Conclusion:
After 12-week intervention, S - equol group showed a greater decrease in Hot flashes & Neck or shoulder muscle stiffness frequency as compared to Placebo group.

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Background

MIRAPAUSE contains Equol, (S)-3-(4-Hydroxyphenyl) chroman-7-ol or commonly known S-Equol orally bioavailable, non-steroidal Oestrogen naturally produced by the metabolism of the isoflavonoid Daidzein by human intestinal microflora.

Indication

MIRAPAUSE is indicated for reducing the frequency of Hot Flashes & for relieving muscle discomfort associated with menopause.

Mechanism of Action

MIRAPAUSE binds to the oestrogen receptors with a stronger affinity for the oestrogen beta receptor. On binding to these receptors, S-equol mimics some activities of endogenous oestrogen. Because of these actions, MIRAPAUSE alleviates symptoms of menopause that is hot flashes which is caused by diminished oestrogen production during menopause.

Pharmacokinetics

In an evaluation of the pharmacokinetics of MIRAPAUSE given to 12 healthy postmenopausal women, the average peak plasma concentration was observed after 1–2 h when taken without a meal with terminal elimination half-life of 7–8 h in healthy adults and, therefore, steady-state levels will be more readily attained by dosing twice daily to minimize peaks and troughs in circulating concentrations. Further, in practice, the maximal effect of MIRAPAUSE is more likely to occur if it is administered before a meal.

Dosage & Administration

MIRAPAUSE should be taken twice in a day or as suggested by Healthcare Professionals.



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