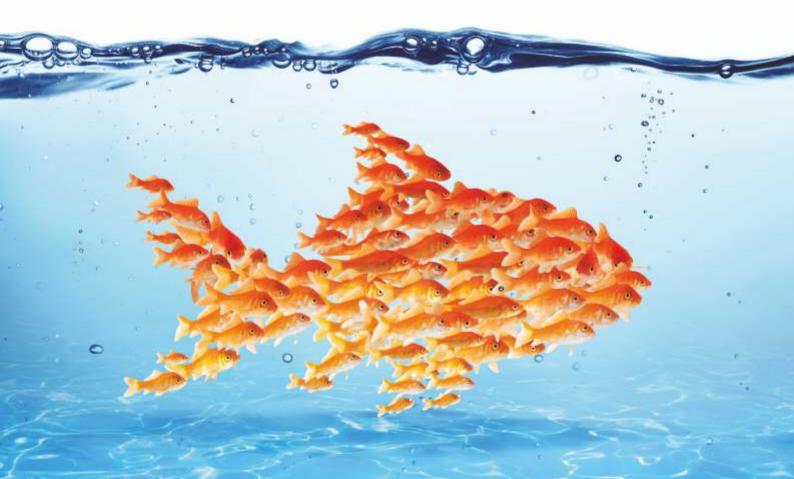
Roslaren-B 40

Rosuvastatin 40 mg and Bempedoic Acid 180 mg Tablets

Better, Safer, Faster Together



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Background:

Patients who have an inadequate response on maximally tolerated statin therapy represent an unmet need in the clinical management of hypercholesterolemia. Furthermore, it is recognized that residual cardiovascular risk remains in high-risk patients despite optimized statin therapy and therefore new therapies are needed to address this risk. Bempedoic acid added to maximally tolerated statins was associated with higher decreased in LDL-C levels in patients with hypercholesterolemia with an acceptable safety profile.

Description:

Roslaren-B 40 is a combination of Bempedoic acid 180 mg and Rosuvastatin 40 mg. It is available as a Film Coated Tablet. Bempedoic acid is a once-daily, oral, first-in-class - adenosine triphosphate-citrate lyase (ACL) inhibitor. Rosuvastatin is in a class of medications called HMG- CoA reductase inhibitors (statins).

Indication:

As adjunct to diet and maximally tolerated statin therapy for patients with ASCVD and/or heterozygous familial hypercholesterolemia who require additional LDL-C lowering.

Mechanism of Action:

Bempedoic acid acts by inhibiting adenosine triphosphate-citrate lyase (ACL) and consequently cholesterol biosynthesis, leading to increased expression of LDL receptors and increasing low- density lipoproteins (LDL-C) plasma clearance.

Rosuvastatin competitively inhibits HMG-CoA reductase enzyme selectively and reversibly. This enzyme converts HMG-CoA to mevalonic acid in the cholesterol biosynthetic pathway which is the rate limiting step in cholesterol synthesis.

Dosage:

The recommended dosage of Roslaren-B 40 is orally once daily with or without food.

References: 1. Can Investig Arterlasder: 2021 May: 33 Suppl 153-57. 2. Can Med Insights Cerdiol. 2012; 6: 17-33. 3. Am J Cardiol. 2016; 17:1928-1923.

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