

# *Polycystic Ovarian Syndrome (PCOS)*



*A Possible Cause of female infertility*

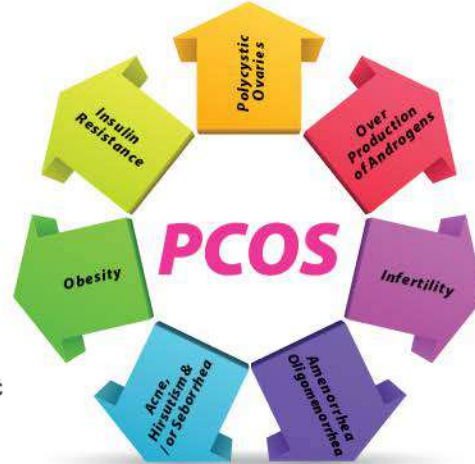
# Acnot

Cyproterone Acetate 2mg + Ethinylestradiol 0.035mg

*a true solution*

*PCOS  
A complex  
problem*

The fundamental clinical problems in PCOS are due to sterility and ANDROGENIC MANIFESTATIONS.(1)



*Acnot - Triple action anti androgenic effect*

- Central Inhibition of androgens by suppressing gonadotropins.
- Blocks androgen receptors at target organs.
- Increases production of SHBG which binds with free circulating androgens. Protein bounded androgen becomes inactive.

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## *Acnot - Benefits in PCOS<sup>(2)</sup>*

- Significant decrease in LH / FSH ratio
- Decrease in ovarian and adrenal androgen levels
- Significant decrease in ovarian volume
- Significant decrease in hirsutism score, acne & seborrhea
- Good control of menstrual cycle,
- Favorable profertility effect

### REFERENCES:

1. Falsetti L, Galbignani E, Long term Treatment with the combination Ethinyl Estradiol And Cyproterone Acetate In Polycystic Ovary Syndrome CONTRACEPTION 42,8:611-619 (1990)
- 2- Prelevic G M, Effects of Low Dose Oestrogen-Antiandrogen Combination in polycystic Syndrome Ann New York Acad Sci 887: (1993)



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## **DOSAGE: First treatment course:**

The patient is to take 1 tablet daily for 21 consecutive days beginning on day 1 of her cycle. (1st day of cycle = 1st day of menstrual bleeding.)

## **Subsequent courses:**

The patient begins her next and all subsequent 21-day course of tablets (following the same 21 days on, 7 days off) on the same day of the week that she began her first course. The length of use depends on the severity of the clinical picture.

## **Brief prescribing information:**

**COMPOSITION:** Contains 21 hormonal tablets, each with Cyproterone Acetate 2mg and Ethinylestradiol 0.035mg. **INDICATIONS:** Androgen-dependent acne, especially those forms which are accompanied by seborrhea or by inflammation or formation of nodes (acne papulopustulosa, acne nodulocystica), androgen-dependent alopecia and mild forms of hirsutism. Oral contraception in women requiring anti-androgen therapy. **CONTRA-INDICATIONS:** Pregnancy; lactation; severe disturbances of liver function; recurrent cholestatic jaundice; jaundice or persistent itching during a previous pregnancy; Dubin-Johnson syndrome; Rotor syndrome; previous or existing liver tumors; existing or previous thromboembolic processes in arteries or veins and states which predispose to such diseases (eg disturbances of the clotting system with a tendency towards thrombosis, certain heart diseases); severe migraine or cerebrovascular insufficiency; sickle-cell anemia; Strict medical supervision is required in patients with diabetes or a tendency to diabetes, high blood pressure, varicose veins, a history of phlebitis, otosclerosis, multiple sclerosis, epilepsy, porphyria, tetany, chorea minor, asthma, depression, or states in which fluid retention occurs. **SIDE EFFECTS AND SPECIAL PRECAUTIONS:** The incidence of diseases of the circulatory system in women using combined oral contraceptives is significantly greater than those of controls. Side effects such as nausea, vomiting, headaches, mood changes, changes in libido, weight gain, skin pigmentation, poor tolerance of contact lenses, vaginal candidiasis, gall-bladder disease, gastro-intestinal irritation, fluid retention, lightness and tenderness of the breasts may occur. Control examinations are recommended at about 6-monthly intervals during the use of Acnot. **Drug Interaction:** The efficacy of the contraceptive pill may be decreased in the case of irregular tablet-taking or when it is administered concomitantly with other medicines such as the anti-epileptic agents, antibiotics, barbiturates and rifampicin, and in patients with very rare individual metabolic disturbances (possible first symptom: intermenstrual bleeding). Mild laxatives do not impair the action of the tablets. Spotting and breakthrough bleeding are possible signs of diminished contraceptive effectiveness. With vomiting or diarrhoea, the absorption of oral contraceptives may be diminished and women should be advised to use additional methods of contraception at the time of such disorders in order to prevent a possible pregnancy, which would be a compelling reason for the discontinuation of Acnot treatment. Insulin and other hypoglycaemic requirements may change. **Effects on laboratory tests:** Oral contraceptives may interfere with some laboratory estimations, in particular hormones, glucose tolerance, thyroid function, blood coagulation, serum triglycerides and liver function tests. **PRESENTATION:** Arrow pack each containing 21 tablets.



**“Medicines For All”**



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