

Femova®

(Myoinositol + D-chiroinositol + Quatrefolic)

10 Sachets

SUPPLEMENT FACTS

Each sachet contains:

Myo Inositol..... 1100 mg
D-Chiroinositol..... 300 mg
Folate [Quatrefolic® 600 mcg as (6S)-5-MTHF, glucosamine salt]
(Vegetarian Source)..... 300 mcg
(PharmEvo Specs.)

DESCRIPTION

Inositol is a physiological compound belonging to the sugar family. The two inositol stereoisomers, Myo Inositol (MI) and D-chiroinositol (DCI) are the two main stereoisomers present in our body. Myo Inositol is the precursor of inositol triphosphate, a second messenger regulating many hormones such as TSH, FSH and insulin. D-chiroinositol is synthesized by an insulin dependent epimerase that converts Myo Inositol into D-Chiroinositol. Combination of Myo Inositol and D-Chiroinositol is considered as a therapeutic option in Polycystic Ovarian Syndrome (PCOS).

In addition, this product contains the glucosamine salt of (6S)-5-methyltetrahydrofolate (Quatrefolic) which is structurally analogous to the reduced and active form of folic acid. It represents the fourth generation folate with improved bioavailability and long term stability. Adding folate to inositol supplements has been shown to have positive effects on menstrual cycle regulation and ovulation

PHARMACOLOGICAL PROPERTIES

MECHANISM OF ACTION

Both Myo Inositol (MI) and D-chiro inositol (DCI) glycans administration has been reported to exert beneficial effects at metabolic, hormonal and ovarian level.

MI displays specific effects on ovary, chiefly by modulating glucose metabolism and FSH-signaling. Moreover, MI may also improve ovarian functions by modulating steroid metabolism through non-insulin-dependent pathways. DCI contributes in mediating insulin activity mainly on non-ovarian tissues.

Myo Inositol produces second messengers for FSH and glucose uptake, while D-chiroinositol provides second messengers promoting glucose uptake and glycogen synthesis.

As DCI and MI activity likely involves different biological mechanisms, both inositol isoforms have been synergistically integrated according to a multi-targeted design, by combining MI and DCI.

In addition to inositol components (MI/DCI); use of folate in expecting or pregnant females lowers the risk of recurrent spontaneous early pregnancy losses. Elevated homocysteine and reduced serum folate concentrations are risk factors for spontaneous abortions. Folate supplementation is expected to be beneficial in women with histories of early pregnancy loss. It also reduces homocysteine levels thereby improving pregnancy outcomes.

THERAPEUTIC USES

- Polycystic ovarian syndrome.
- Hyperandrogenism (Excess androgen production)
- Menstrual cycle disorders (such as Irregular periods)

DOSAGE AND ADMINISTRATION

Adult dosage

1 sachet once or twice daily, according to physician's judgment

It generally takes at least three months of daily inositol supplementation for the improvement in hormonal test results and/or the return of regular menstrual cycles

Administration requirements:

Empty the contents of the sachet into water or other beverage and drink.

CONTRAINDICATIONS

Hypersensitivity to inositol & folic acid/folate

WARNINGS AND PRECAUTIONS

Myoinositol/D-chiroinositol:

None known.

Folate:

- Folic acid supplementation can sometimes mask the symptoms of serious and dangerous deficiency of vitamin B12.
- Folate containing supplements should be used with caution in patients who have folate dependent tumors.
- Folic acid supplements might make seizures worse in people with seizure disorders, particularly in high doses

ADVERSE REACTIONS

Generally, MI and DCI are well tolerated but may cause low blood sugar, especially if

taking medications or other supplements that lower blood sugar. Nausea, fatigue, headache and dizziness may also occur.

Folate supplements may cause anorexia, nausea, abdominal distension and flatulence. Certain Immune system disorders such as allergic reactions, comprising erythema, rash, pruritus, urticaria, dyspnea, and anaphylactic reactions (including shock) have also been reported. Frequency is not known

DRUG INTERACTIONS

Myo Inositol:

- Calcium
- Iron
- Magnesium
- Zinc

Inositol strongly binds divalent minerals such as magnesium, iron, calcium, and zinc. Inositol supplements should be taken apart from dietary products and aforementioned mineral supplements.

Folate:

Folate may interfere with the efficacy of antiepileptic medications such as phenytoin, fosphenytoin, phenobarbital, primidone. It may also decrease the effectiveness of pyrimethamine and sulfasalazine.

Drugs such as sulfasalazine can reduce the absorption of folate

USE IN SPECIAL POPULATIONS

Pregnancy & Nursing mothers

Not enough is known about the use of inositol during pregnancy and breast-feeding. Its use should be avoided. However, folate is regarded as completely safe to use in pregnancy/lactation

Renal & Hepatic Impairment

No data for folate or inositol isomers is available. Avoid use in patients with renal or hepatic impairment.

OVERDOSAGE

No serious inositol adverse effects are known, for therapeutic dosages over 10 times the normal dietary intake, except for diarrhea in some cases of very high doses.

Data regarding over dosage reports of folate is lacking. In event of overdose, no special procedures or antidote are likely to be needed.

PRESENTATION

Pack of 10 Sachets.

INSTRUCTIONS

Keep out of the reach of children.

To be sold on the prescription of a registered medical practitioner only.

Protect from light, heat and moisture.

Store below 30°C.

ہدایات:
بچوں کی پہنچ سے دور رکھیں۔
صرف رجسٹرڈ ڈاکٹر کے نسخے پر ہی فروخت کی جائے۔
روشنی، گرمی اور نمی سے محفوظ، 30°C سے کم درجہ حرارت پر رکھیں۔

Manufactured by:

PharmEvo®

Our dream, a healthier society

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