<u>La Renon</u>



EMPOWERING CONSISTENT CARE

VONOHENZ

Vonoprazan 10 mg and 20 mg Tablets

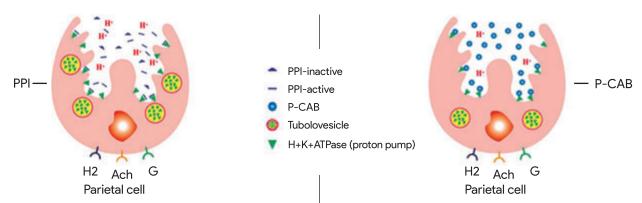
WONOHENZ

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BACKGROUND:

- Over time, GERD has become common globally. Despite PPI treatment, many patients remain dissatisfied. Notably, H.pylori infection inversely correlates with GERD. Global prevalence of GERD is 20% and H. pylori is 50%. 1.2.3
- Vonoprazan (VPZ), a novel potassium-competitive acid blocker (PCAB), provides stronger, faster, and longer acid suppression than PPIs, showing superior efficacy against GERD, H. pylori, and ulcers, addressing therapy limitations.¹

MECHANISM OF ACTION OF PPIs AS COMPARED WITH P-CABS4:



- PPIs convert to their active form in acid milieu within the secretory canaliculi and bind covalently to H+ /K+-ATPases in a stimulated parietal cell
- P-CABs accumulate in high concentrations in secretory canaliculi and bind reversibly to H+/K+-ATPases without requiring an acidic environment for activation.

VONOPRAZAN FULL & FAST EFFECT FROM FIRST DOSE5:

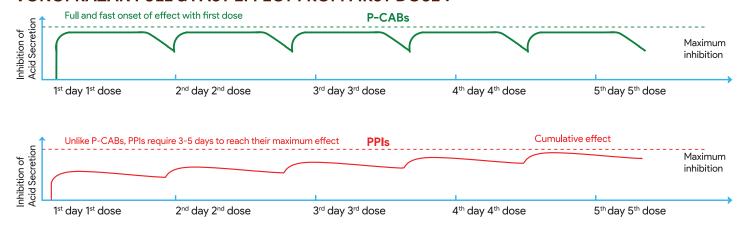


Fig. Time course of acid inhibition by P-CABs and PPIs.

CLINICAL RESEARCH

1 EFFICACY OF VONOPRAZAN FOR PROTON PUMP INHIBITOR-RESISTANT REFLUX ESOPHAGITIS (RE)⁶

Total Patients: 24 PPI-resistant RE patients

Duration: 4 Weeks

Dose: Vonoprazan 20 mg

Result:

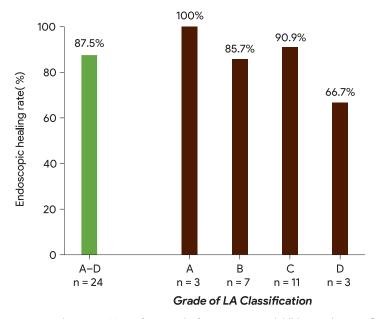


Fig. Endoscopic healing rate of vonoprazan therapy at 20 mg for 4 weeks for proton pump inhibitor-resistant reflux esophagitis. LA: Los Angeles.

Conclusion: Vonoprazan effectively treats most PPI-resistant RE patients. Among these patients, a 4-week, 20 mg VPZ course resulted in a 90% endoscopic healing rate.

COMPARATIVE REVIEW OF FIRST-LINE H. PYLORI ERADICATION THERAPIES

VPZ-Based Regimen		PPI-Based Regimen	
Regimen	Eradication Rate	Regimen	Eradication Rate
VPZ: 20 mg bid AMX: 750 mg bid CLR: 200 or 400 mg bid	95.8%	LPZ: 30 mg bid or RPZ: 20 mg bid AMX: 750 mg bid CLR: 200 or 400 mg bid	69.6%
VPZ: 20 mg bid AMX: 750 mg bid CLR: 200 or 400 mg bid	95.8%	RPZ: 10 mg bid or ESO: 20 mg bid AMX: 750 mg bid CLR: 200 or 400 mg bid	72.8%



VONOHENZ

Vonoprazan 10 mg and 20 mg Tablets

DESCRIPTION:

VONOHENZ tablets contain Vonoprazan, a potent inhibitor of gastric acid secretion, available in 10 mg and 20 mg strengths. Vonoprazan (VPZ) offers superior symptomatic relief through its innovative mechanism and sustained therapeutic effectiveness.

INDICATION:

- Treatment of Reflux esophagitis (RE), gastric ulcer (GU) & duodenal ulcer (DU)
- Prevention of reoccurrence of gastric ulcer or duodenal ulcer during low-dose aspirin administration/ NSAIDs administration
- Adjunct to Helicobacter pylori (H. pylori) eradication

MECHANISM OF ACTION:

Vonoprazan is a potassium-competitive acid blocker (PCAB) that inhibits the H+, K+-ATPase enzyme system in a potassium-competitive manner.

VONOHENZ

It suppresses basal and stimulated gastric acid secretion at the secretory surface of gastric parietal cells.

KEY FEATURES:

Faster Onset:	A faster onset of action than PPIs. ⁸
Non-Acid Activation:	Doesn't require stomach acid for effectiveness.8
Meal independent:	Vonoprazan effect is not influenced by meals.4
Stronger Suppression:	Provides potent and sustained inhibition of gastric acid secretion. ¹
Long Lasting Effect:	Stable and persists in the stomach, exerting a long-lasting effect.8
Potassium Competitive:	Competes with potassium for proton pump binding, boosting efficacy.8
Higher Efficacy:	$SuperioreffectivenessintreatingconditionslikeGERDandH.pyloriinfectioncomparedtoPPIs.^{^{1.6}}$
Reduced Resistance:	Suitable alternative for patients with PPI resistance or intolerance.

DOSAGE:

The recommended dose of vonoprazan is 10-20 mg OD or as suggested by the healthcare professional.

PRESENTATION:

VONOHENZ-10/20 available as a strip of 10 tablets.

REFERENCES:

Scan for more Prescribing Information



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