Linahenz-DM 500

Linagliptin 5 mg + Dapagliflozin 10 mg + Metformin (SR) 500 mg Tablets

Linahenz-DM 1000

Linagliptin 5 mg + Dapagliflozin 10 mg + Metformin (SR) 1000 mg Tablets

BACKGROUND:

Patients with type 2 diabetes often require multiple antidiabetic agents to achieve and maintain glycemic control, because of the progressive nature of the disease. Most patients receive traditional stepped-up therapy with metformin as the initial therapy, followed by the sequential addition of single oral antidiabetic drugs (OADs) as glycemic control worsens. Adding or initiating a single therapy when HbA1c levels are substantially elevated may not achieve glycemic goals. Several guidelines recommend the use of dual or triple therapy based on glycated hemoglobin (HbA1c) levels, but clinical trial evidence defining the optimal use of available pharmacologic options, especially in dual or triple combinations. The efficacy, tolerability and safety of dapagliflozin/linagliptin FDC make it a key contender to treat patients with a background of metformin monotherapy.

DESCRIPTION:

Linahenz-DM 500: Contains Triple combination of Linagliptin 5 mg + Dapagliflozin 10 mg + Metformin (SR) 500 mg Tablets

Linahenz-DM 1000: Contains Triple combination of Linagliptin 5 mg + Dapagliflozin 10 mg + Metformin (SR) 1000 mg Tablets

INDICATION:

Linahenz-DM 500/1000 is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus when treatment with Linagliptin, Dapagliflozin and Metformin is appropriate.

MECHANISM OF ACTION:

Linagliptin selectively inhibits the action of DPP-4, the primary enzyme degrading the incretin hormones, allowing glucagon-like peptide-1 and glucose-dependent insulinotropic peptide to facilitate glucose regulation in response to a meal.

Dapagliflozin inhibiting SGLT2 and blocks reabsorption of filtered glucose in the kidney, increasing urinary glucose excretion and reducing blood glucose levels. This excretion allows for better glycemic control and potentially weight loss in patients with Type 2 diabetes mellitus.

Metformin decreases blood glucose levels by decreasing hepatic glucose production (also called gluconeogenesis), decreasing the intestinal absorption of glucose, and increasing insulin sensitivity by increasing peripheral glucose uptake and utilization.

DOSAGE:

One tablet a day orally or as prescribed by the Doctor.

References

1. Diabetes Care 2015;38(3):376-383



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La Renon Healthcare Private Limited

207-208 Iscon Elegance, Circle P, Prahlad Nagar Cross Roads, S.G. Highway, Ahmedabad-380015, Gujarat, India. Phone: 91-79-66168998 / 26936656 | Fax: +91-66168998 E-mail:info@larenon.com | Web: www.larenon.com





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