

La Renon

**RELIEVE** Pain,  
**RESTORE** Balance



**Elagohenz**

Elagolix 150 mg / 200 mg Tablets

## ENDOMETRIOSIS- INTRODUCTION:

- Endometriosis is a painful condition where tissue similar to the lining of the uterus grows outside of the uterus.
- Endometriosis is found in 45% - 82% of women with chronic pelvic pain and in 2.1%-78% of infertile women.

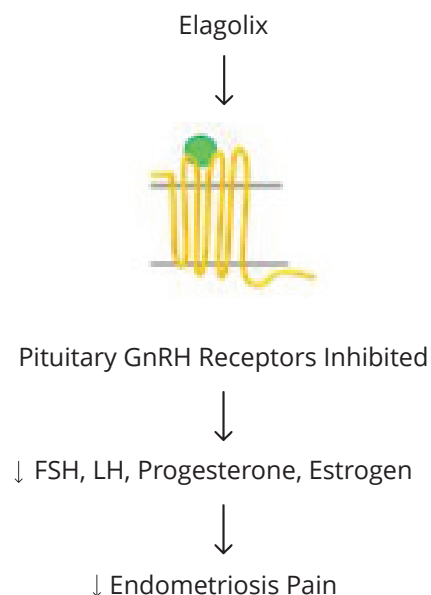
INTRODUCING

# Elagohenz

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## MECHANISM OF ACTION:

- Elagolix is an orally administered, nonpeptide small molecule GnRH antagonist that inhibits endogenous GnRH signaling by binding competitively to GnRH receptors in the pituitary gland.
- Administration of Elagolix results in dose-dependent suppression of luteinizing hormone (LH) and follicle-stimulating hormone (FSH), leading to decreased blood concentrations of the ovarian sex hormones, estradiol and progesterone.
- In women, inhibition of FSH and LH prevents the production of estrogen by the ovaries. Inhibition of GnRH signalling may treat or prevent symptoms of sex hormone-dependent disease states.



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## **CLINICAL STUDY:**

### **AIM:**

To evaluate the effects of two doses of elagolix — 150 mg once daily (lower-dose group) and 200 mg twice daily (higher-dose group) — as compared with placebo in women with endometriosis associated pain.

### **STUDY TYPE:**

Double-blind, Randomized.

### **NO. OF PATIENTS:**

872 women underwent randomization in Elaris EM-I and 817 in Elaris EM-II.

### **DOSE:**

150 mg once daily and 200 mg twice daily.

### **STUDY DURATION:**

6 months.

## **RESULTS:**

As compared with placebo, each elagolix dose resulted in a significant reduction from baseline to 3 months in endometriosis-associated pain and significant reductions from baseline to 6 months in scores with respect to dysmenorrhea and nonmenstrual pelvic pain.

Study group	Outcome	% of Women (Lower-Dose Elagolix)	% of Women (Higher-Dose Elagolix)	Placebo (%)
Elaris EM-I	Dysmenorrhea	46.4%	75.8%	19.6%
	Nonmenstrual Pelvic Pain	50.4%	54.5%	36.5%
Elaris EM-II	Dysmenorrhea	43.4%	72.4%	22.7%
	Nonmenstrual Pelvic Pain	49.8%	57.8%	36.5%

Table : Reduction in Dysmenorrhea and Nonmenstrual Pelvic Pain.

## **CONCLUSION:**

Both higher and lower doses of elagolix were effective in improving dysmenorrhea and nonmenstrual pelvic pain during a 6-month period in women with endometriosis-associated pain.

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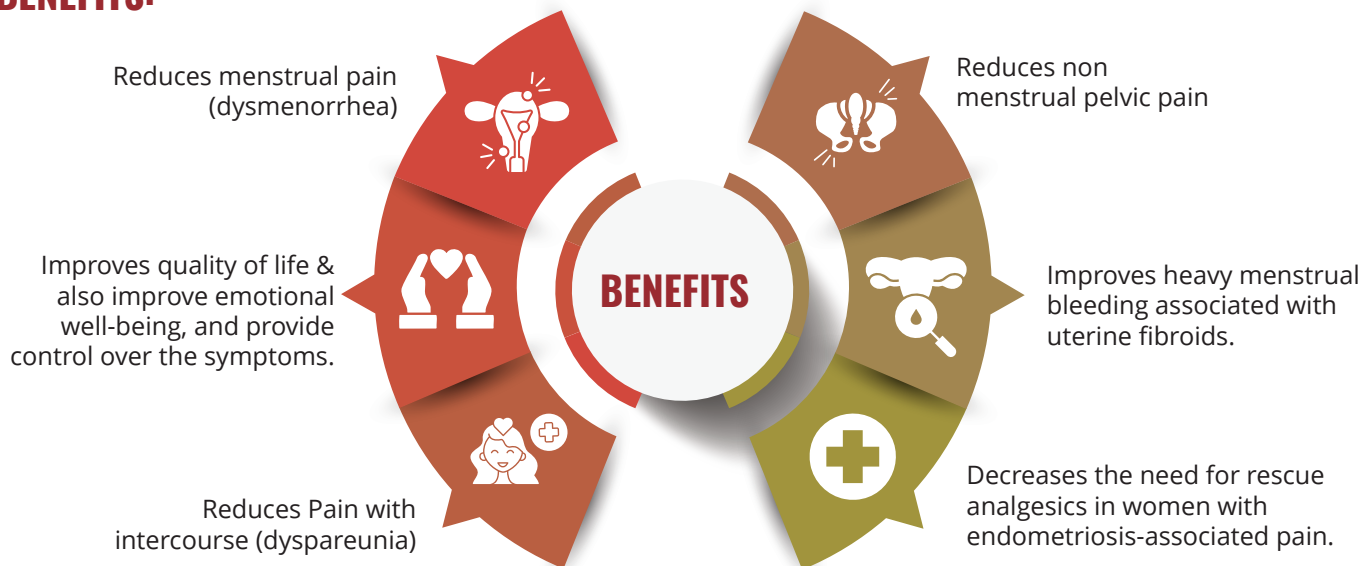
## DESCRIPTION:

Elagolix is an oral, short-acting, nonpeptide, gonadotropin-releasing hormone (GnRH) receptor antagonist that suppresses ovarian estrogen production in a dose-dependent manner.

## INDICATION:

Endometriosis associated pelvic pain (Moderate to Severe).

## BENEFITS:



## DOSAGE AND ADMINISTRATION:

150 mg once daily for up to 24 months or 200 mg twice daily for up to 6 months.

### REFERENCES:

1) N Engl J Med 2017;377:28-40 2) J Clin Diagn Res. 2015 Jun 1;9(6):QC01-QC03. 3) Menopause. 2020 Feb;27(2):238-242. 4) Clin Pharmacokinet. 2019 Nov 21;59(3):297-309. 5) ACOG.ORG



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