

METHANDIENONE

METHANDIENONE USP 10 mg

Presented as 10mg capsules in blister packs of 15 capsules - 6 blisters per box (90 capsules)

DESCRIPTION

Methandienone is a man-made steroid, similar to the naturally occurring Steroid- testosterone

CLINICAL PHARMACOLOGY

Endogenous androgens such as testosterone or derivatives are responsible for the development and growth of the male sexual organs and post-adolescent secondary sex characteristics. Androgen effects include the maturation of the penis, scrotum, prostate, seminal tubules ,laryngeal enlargement, vocal cord thickening, changes in muscle mass and fat distribution, and the development and distribution of male hair (facial, pubic, chest, back, axillary). Androgens have been linked to increased protein anabolism and consequent decreased protein catabolism. Androgens increase retention of sodium, potassium, and phosphorus. Androgens decrease urinary excretion of calcium. Androgens are responsible for the growth spurt of adolescence and the aromatization of androgens to estrogens for the eventual termination of linear growth, which is brought about by fusion of the epiphyseal growth centers. In children, exogenous androgens accelerate linear growth rates but may cause a disproportionate advancement in bone maturation.

INDICATIONS AND USAGE

Males: Androgen Replacement Therapy.

Methandienone is used to promote weight gain following extensive surgery, chronic infection, or severe trauma, and in other cases that result in inadequate weight gain or maintenance. is also used to decrease muscle loss caused by treatment with corticosteroids and to reduce bone pain associated with osteoporosis.

PRECAUTIONS

Any nausea, vomiting, changes in skin color or ankle swelling should be monitored by a qualified physician, particularly in patients with a history of severe heart, liver and kidney disease. Androgen therapy patients receiving concurrent warfarin treatment may present with unexpected increases in the INR and/or pro- thrombin time (PT). When administered to these patients, the dosing of warfarin may need to be reduced significantly to maintain the desired INR level and reduce the risk of serious bleeding.

Because androgens may alter serum cholesterol concentration, caution should be used when administering these drugs to patients with a history of myocardial infarction or coronary artery disease.

DRUG INTERACTIONS

Anti-diabetic drugs and Insulin: In diabetic patients, the metabolic effects of androgens may reduce blood glucose, insulin, and anti-diabetic medication requirements.

Adrenal steroids or ACTH: May exacerbate edema in patients on concurrent adrenal-cortical steroids or ACTH therapy. Anticoagulants: Patients on anticoagulants such as warfarin should be carefully monitored during androgen therapy as androgens may increase sensitivity to oral anticoagu lants which may require a concomitant reduction in anticoagu lant dosage to achieve a desirable prothrombin time (PT). Concurrent use of anti-diabetic agents, insulin, cyclosporines, hepatotoxic medications, and/or human growth hormone (somatropin) has been reported to decrease anticoagulant requirements.

Anticoagulant patients should be monitored regularly during androgen therapy, particularly during initiation and termination of therapy.

Oxyphenbutazone: Elevated serum levels of oxyphenbutazone may result.

PRESENTATION

10mg capsules in blister packs of 15 capsules - 6 blisters per box (90 capsules)

STORAGE

Store below 25°C. Store in the original package