



METHENOLONE ACETATE

METHENOLONE ACETATE USP 100mg
Oil Base q.s.
Presented as box with 10 ml vial (multidose)

DESCRIPTION

Methenolone Acetate is a man-made steroid, similar to the naturally occurring steroid testosterone.

INDICATIONS

Androgen Replacement Therapy:

Methenolone Acetate 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.

Methenolone Acetate is also used to decrease muscle loss caused by treatment with corticosteroids and to reduce bone pain associated with osteoporosis.

CONTRAINDICATIONS

1. Diagnosed or suspected carcinoma of the male breast or prostate.
2. Women who are pregnant or may become pregnant because of possible masculinization of the fetus. When administered to pregnant women, androgens cause virilization of the external genitalia of the female fetus. This virilization includes clitoromegaly, abnormal vaginal development, and fusion of genital folds to form a scrotal-like structure.
3. Patients with a history of hypersensitivity to Methenolone Acetate or any of its components.
4. Patients with serious renal, cardiac, or hepatic dysfunction.

DOSAGE AND DIRECTIONS FOR USE

Androgen Replacement Therapy: The dose of these medicines will be different for different patients. Follow your doctor's orders or the directions on the label. The following information includes only the average doses of these medicines. If your dose is different, do not change it unless your doctor tells you to do so.

SIDE EFFECTS AND SPECIAL PRECAUTIONS

Males: Frequent or persistent penile erections and increases in the appearance of acne vulgaris.

Females: Hoarseness of the voice, acne, changes in menstrual periods, or more facial hair.

All patients: Nausea, vomiting, changes in skin color, or ankle swelling.

Laboratory Tests and Patient Monitoring:

Examination of bone age by x-ray should be conducted during treatment of children to determine bone maturation rate and effect on epiphyseal centers.

Women with breast carcinoma should have frequent assays of serum and urine calcium throughout the course of treatment. Androgens have been associated with increases in low-density lipoproteins and reduction in high-density lipoproteins in serum.

Periodic serum lipid assays are recommended during treatment.

Serum assays for hematocrit and hemoglobin are recommended to screen for polycythemia in patients receiving large doses of androgens.

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.

PRESENTATION

100 mg/ml, 1 x 10 ml vial

STORAGE

Store in a cool dry place (30 °C E 2 °C). Protect from light.

Warming and rotating the ampoule between the palms of the hands will redissolve any crystals that may have been formed during storage at low temperatures