

## **NANDROLONE DECANOATE**

NANDROLONE DECANOATE USP 250mg  
Oil Base q.s.  
Presented as box with 10 ml vial (multidose)

### **DESCRIPTION**

Nandrolone Decanoate is an injectable anabolic preparation. After injection, nandrolone decanoate is gradually released from the intramuscular depot and subsequently hydrolyzed into nandrolone. Nandrolone is indicated for Osteoporosis due to androgen deficiency in hypogonadal males. It will also cause the muscle cell to store more nitrogen than it releases so that a positive nitrogen balance is achieved. A positive nitrogen balance is synonymous with anabolism and assimilates a larger amount of protein than usual.

### **INDICATIONS**

As an anabolic steroid. Certain cases of disseminated breast cancer in women. Osteoporosis due to androgen deficiency in hypogonadal males.

### **CONTRAINDICATIONS**

Not intended for use in children. Known or suspected prostatic carcinoma and mammary carcinoma in the male. Not intended for use in female patients other than those with disseminated breast cancer. Contraindicated in nephrosis or the nephrotic phase of nephritis, cardiac and renal failure, hypercalcaemia, oedema, jaundice, liver disease with impaired bilirubin excretion, testicular and hepatic carcinoma.

### **DOSAGE AND DIRECTIONS FOR USE**

Nandrolone Decanoate injection should be administered by deep intramuscular injection.  
Adult dose: 100 mg to 250 mg every six weeks.

### **SIDE EFFECTS AND SPECIAL PRECAUTIONS**

Virilization which appears in sensitive women as hoarseness, acne, hirsutism and increased libido; in prepubertal boys as an increased frequency of erections and phallic enlargement, and in girls as an increase of pubic hair and clitoral hypertrophy.

Hoarseness may be the first symptom of vocal change which may end in a long-lasting, sometime irreversible deepening of the voice. Other adverse reactions may include:

Oligospermia and decreased ejaculatory volume. Suppression of ovarian activity, atrophy of the breasts. Inhibition of spermatogenesis.

Water and salt retention. Premature epiphyseal closure.

Increase in nitrogen retention and skeletal weight. Oedema Increased vascularity of the skin.

Increased growth of the bones.

Elderly males may become over stimulated.

Patients with the following conditions should be monitored: Latent or overt cardiac failure.

Renal dysfunction. Hypertension.

Epilepsy or migraine (or a history of these conditions), since anabolic steroids may induce salt and fluid retention.

Diabetes, since anabolic steroids may improve the glucose tolerance and decrease the need for insulin or other antidiabetic drugs.

Incomplete stature growth, since anabolic steroids may induce hypercalcemia and hypercalciuria in these patients.

Liver dysfunction.

### **DRUG INTERACTIONS**

Liver enzyme-inducing agents may reduce the effects of Nandrolone.

### **PRESENTATION**

250 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**