

Univan

VALSARTAN

Selective Angiotensin II Receptor Blocker



Put your blood pressure into control
and continue your normal life..



Quality is our Priority

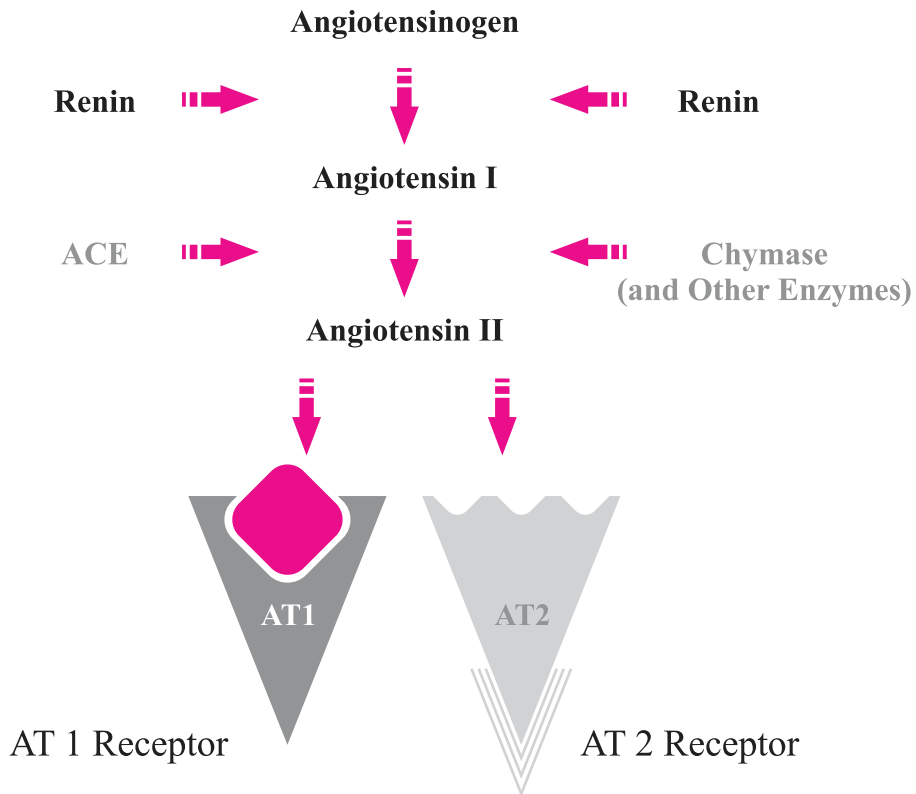
UNICHIMA Pharmaceuticals

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UNIVAN (Valsartan) is a ,non peptide ,orally active, and specific angiotensin II antagonist acting on the (AT1) receptor subtype.

The Renin - Angiotensin System



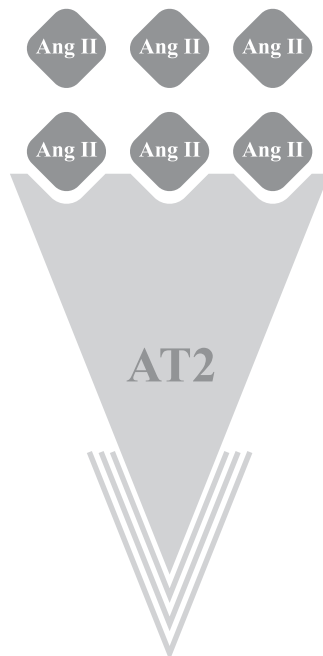
UNIVAN acts at the receptor site to selectively block angiotensin II.
ACE inhibition blocks only one pathway in the production of angiotensin II.

- **UNIVAN** is significantly superior to Losartan in lowering high blood pressure.
- **UNIVAN** provides dose -responsive efficacy and excellent blood pressure control.
- **UNIVAN** provides prompt and sustained blood pressure control, reducing blood pressure significantly within 2 weeks of starting therapy.
- **UNIVAN** demonstrates positive effects on male sexual activity, and it is the only AT1 blocking agent to exhibit this response in clinical trials.
- **UNIVAN** has a PROTECTIVE property beyond its blood pressure reduction:
 - Cardiac protection via proven efficacy in LVH (left ventricular hypertrophy) compared to β -blockers.
 - Renal protection via reduction in microalbuminuria compared to Captopril.



Decreases blood pressure
Decreases Sympathomimetic effects
Decreases Salt and water retention
Decreases Synthesis of aldosterone

Univan prevents the negative effects of angiotensin II at the AT1 receptor



Increases Coronary flow
Increases Myocardial oxygenation
Increases Antiproliferative effects
Increases Myocardial tissue protection during ischaemic events

Univan preserves the beneficial effects of angiotensin II at the AT2 receptor

Dosage and administration

The recommended starting dose of **Univan** is 80 mg once daily when used as monotherapy in patients who are not volume-depleted. **Univan** may be used over a dose range of 80 mg to 320 mg daily, administered once-a-day.

The antihypertensive effect is substantially present within 2 weeks and maximal reduction is generally attained after 4 weeks. If additional antihypertensive effect is required, the dosage may be increased to 160 mg or 320 mg or a diuretic may be added.

No initial dosage adjustment is required for elderly patients, for patients with mild or moderate renal impairment, or for patients with mild or moderate liver insufficiency. Care should be exercised with dosing of **Univan** in patients with hepatic or severe renal impairment.

Univan may be administered with other antihypertensive agents.

Univan may be administered with or without food.

Clinical trials were carried out to add new therapeutic benefits to **Univan** (Valsartan) Indications.

Val-HeFT

Valsartan Heart Failure Trial

Val-HeFT was a double – blind, randomized clinical trial(5005 patients , 20 countries, 3 years) that compared **UNIVAN** to placebo in heart failure patients who were taking usual therapy, including ACE inhibitors, beta blockers, diuretics, and digoxin. The results established that **UNIVAN**, by exerting a highly selective blockade of angiotensin II at the angiotensin (AT1) receptor, has positive, protective effects on patients with heart failure. These positive effects of **UNIVAN** are incremental to the established benefits observed with usual heart failure therapy.

VALUE

Valsartan Antihypertensive Long-Term Use Evaluation Trial

For the same level of BP control **UNIVAN** will achieve a greater reduction in cardiac morbidity and mortality than amlodipine in high risk hypertensive patients (14.400 patients, 30 countries, 6 years).

VALIANT

Valsartan In Acute Myocardial Infarction Trial

Valiant is a randomized, active controlled multinational trial(14500 patients , 25 Countries, 4 years) that is carried to prove that long term administration of **UNIVAN** alone or in combination with Captopril , is more effective than Captopril monotherapy in reduction of mortality after acute myocardial infarction

ABCD-2V

Appropriate Blood Pressure Control in Diabetes Trial –Part 2 with

Valsartan

772 patients, 5 years

Intensive BP control with **UNIVAN** is superior to moderate BP control in delaying or preventing diabetic complications such as nephrotherapy , cardiovascular disease and related death; and diabetic retinopathy in patients with type 2 diabetes.

References :

1. Novartis Pharma AG – www.diovan.com
2. P.D.R . 2005