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For Sustained Synergistic Bactericidal Effects

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ANG Healthcare India Pvt. Ltd., 14; Tilak Nagar Industrial Area, Near Subash Nagar Metro Station, N Delhi- 110018.

Head Office:
ANG Healthcare India Pvt. Ltd., Sco 113, 1st Floor, Darbara Complex, Ranjit Avenue, B-Block, Amritsar-143001

Contact us:
sales.admin@anghealthcare.in / pmt@anghealthcare.in
Web: http://www.anghealthcare.in/

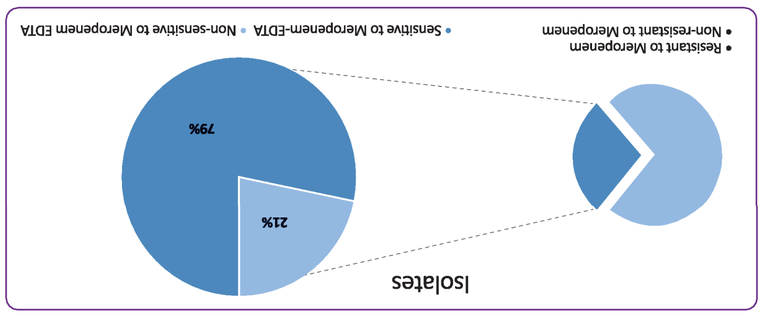

Figure 6: Division of pathogens sensitive to Meropenem and Meropenem-EDTA combination

RESULT: The MIC value of Meropenem-EDTA (0.25) was less than 50% of that of Meropenem (2.45) in sensitive isolates.

CONCLUSION: Meropenem in unification with EDTA can exhibit more potent antimicrobial activity against ESBL producing pathogens than just Meropenem or EDTA alone.

1. Clinical Infectious Diseases: 2016;63(6): 754-762

The carbapenem sparing Treatment

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Linked In: https://www.linkedin.com/in/ang-healthcare-395492221 | Twitter: https://twitter.com/Anghealthcare

Methods: Hospitalized adults with suspected or microbiologically confirmed cUTI/acute pyelonephritis were randomized 1:1 to Ceftazidime-Avibactam (KEFUZID-AV) 2000 mg/500 mg every 8 hours or doripenem 500 mg every 8 hours.

In Results: Of 1033 randomized patients, 393 and 417 treated with ceftazidime-avibactam (KEFUZID-AV) and doripenem, respectively, were eligible for the primary efficacy analyses; 19.6% had ceftazidime-nonsusceptible baseline pathogens.

Noninferiority of Ceftazidime-Avibactam (KEFUZID-AV) vs. doripenem was demonstrated for the US Food and Drug Administration co-primary endpoints of (1) patient-reported symptomatic resolution at day 5: 276 of 393 (70.2%) vs 276 of 417 (66.2%) patients and (2) combined symptomatic resolution/microbiological eradication at test of cure (TOC): 280 of 393 (71.2%) vs 269 of 417 (64.5%) patients. Microbiological eradication at TOC occurred in 304 of 393 (77.4%) ceftazidime-avibactam (KEFUZID-AV) vs 296 of 417 (71.0%) doripenem patients. Both treatments showed similar efficacy against ceftazidime-nonsusceptible pathogens. Ceftazidime-avibactam (KEFUZID-AV) had a safety profile consistent with that of Ceftazidime alone.

Conclusions: Ceftazidime-Avibactam (KEFUZID-AV) was highly effective for the empiric treatment of cUTI (including acute pyelonephritis), and may offer an alternative to carbapenems in this setting

For infections caused by ESBL-producing pathogens

NOVOMERO™ EDTA

(Meropenem 1000 mg/Disodium EDTA 37.5 mg)

OBJECTIVE: To understand the outcomes of patient with various agents in the treatment of ESBL-producing bacteremia and to evaluate the efficacy of meropenem and ethylenediaminetetraacetic acid (EDTA) combination against ESBLs

For serious and difficult-to-treat infections

KEFUZID®-AV

(Ceftazidime 2g + Avibactam 0.5g)

FDA APPROVED | EMA Approved

The phase 3 RECAPTURE program compared the efficacy and safety of Ceftazidime-Avibactam (KEFUZID-AV) and doripenem in patients with complicated urinary tract infection (cUTI), including acute pyelonephritis.

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First glycylcycline for cSSSI, cIAIs, HAP

TIGEPOS-50

(Tigecycline 50 mg Inj., as lyophilized cake)

Complicated Urinary tract infections (cUTIs) are a substantial cause of global morbidity, mortality, and healthcare expenditure

The global emergence of carbapenem-resistant Enterobacteriaceae and P. aeruginosa is undermining the effectiveness of the carbapenems, and highlights the urgent need for new antimicrobial treatments

BMC Infect Dis 2015; 15:313

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  - Ensures Strict Quality control
  - In turn, better Patient outcomes
- Primary Packing Material: Vials, seals, Rubber stoppers are sourced from reputed international suppliers which further prevents degradation of Tigecycline

Unsurpassed Quality

TIGECYCLINE POWDER: Hygroscopic and Prone to Oxidation	TIGEPOS lyophilized cake
↓	↓
Hence, Unstable	Imparts stability, minimizes oxidation & other degradation Process
↓ Prevailing climatic conditions may accelerate oxidation	↓ Suitable for long term storage
Many brands' Tigecycline may deteriorate over time.	Efficacy maintained over Prolonged Period

One of most powerful expanded spectrum antibiotic

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