DECA DURABOLIN -MUSCLE NANDROLONA DECANOATE Solución Oleosa Inyectable Vía Intramuscular Profunda USO ADUII TO

PRESENTATION 1

FORMULA

Each mL of injectable oily solution contains:

- 1	Nandrolone decanoate	J.
6	Excipients	
	c.s,p.	

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Each mL of injectable oily solution contains

c.s,p.

MECHANISM OF ACTION

Nandrolone decanate is gradually released from the IM depot and Nandrolone is hydrolyzed. Its effect on protein saving and anticatabolic has been demonstrated, as well as its favorable action on calcium metabolism in case of increased calcium excretion and in osteoporosis. The dissociation of anabolic and androgenic effects is related to the presence or absence of 5-reductase in tissues that contain androgen receptors. The 5-reduction of Nandrolone produces 5-dihydronandrolone, which binds to the androgen receptor less intensely than Nandrolone. This would explain the more intense effect of Nandrolone in tissues lacking 5-reductase. Nandrolone decanate is slowly released from the injection site into the blood with a half-life of 6 days. In blood, the ester is rapidly hydrolyzed into Nandrolone. with a half-life of one hour or less. Nandrolone is metabolized by the liver.

INDICATIONS:

Protein anabolism stimulant. Osteoporosis. For the palliative treatment of selected cases of disseminated breast carcinoma in women. As an adjuvant in specific therapeutics and dietary measures in pathological states characterized by a negative nitrogen balance. For an optimal therapeutic effect it is necessary to administer adequate amounts of vitamins, minerals and proteins in a high-calorie diet. **POSOLOCY**:

It should be administered by deep intramuscular injection. Osteoporosis: 50 mg. every 3 weeks. Palliative treatment in selected cases of disseminated breast carcinoma in women: 50 mg. every 2-3 weeks. As an adjuvant in specific therapies and dietary measures in pathological states characterized by a negative nitrogen balance: 25-50 mg. every 3 weeks.

CONTRAINDICATIONS:

Pregnancy. Known or suspected prostate carcinoma or mammary carcinoma in the male. It is contraindicated during pregnancy due to the possibility of masculinization of the fetus. There are insufficient data on the use of this medicinal product during lactation to establish potential harm to the infant or a possible influence on milk production.

ADVERSE REACTIONS:

High doses, prolonged treatment and/or too frequent administration can cause: Virilization manifested in sensitive women in the form of hoarseness, acne, hirsutism and increased libido; in males before puberty in the form of increased frequency of erections and phallic thickening and in boys as increased pubic hair and clitoral hypertrophy..

Hoarseness may be the first symptom of a vocal change that can lead to a sometimes irreversible castling of the voice. Amenorrhea. inhibition of spermatogenesis. Premature epiphyseal closure. Fluid retention.

PRECAUTIONS AND WARNINGS:

If signs of virilization develop, discontinuation of treatment should be considered. It is recommended to monitor patients with any of the following conditions: Latent or manifest heart failure, renal dysfunction, hypertension or migraine. Incomplete height growth as high-dose anabolic steroids can accelerate epiphyseal closure. Metastasis in the skeleton or mammary carcinoma. Liver failure. The misuse of anabolic steroids to improve skill in sports carries serious health risks and should be discouraged.

INTERACTIONS:

Anabolic steroids can improve glucose tolerance and reduce the need for insulin or other antidiabetic drugs in diabetic patients.

USE RESTRICTIONS:

Hypersensitivity to the drug. Pregnancy. Lactation.

OVERDOSE:

The acute toxicity of nandrolone decanate in animals is very low. There are no reports of acute overdosage with nandrolone in humans. For any symptom that occurs, even if it is not immediate, discontinue the medication.

PRESENTATION:

Box with vial with 10 mL. Box with 5 vials x 1 mL.

> Store at room temperature between 15°C - 30°C. Keep out of the reach of children.