

HYACYST®

(Sodium Hyaluronate) 120mg/50ml Pre-Filled
Ready-To-Use Syringes


MEDİKAL TIBBİ CİHAZ VE SANAYİ TİCARET ANONİM ŞİRKETİ

Sodium Hyaluronate First Line GAG Replacement Therapy



APPROVED IN UK
& EU COUNTRIES

Hyacyst® PFS range is ideal for
Self-Instillation at home

Hyacyst® 120 PFS is as effective as
combination GAG layer therapy (iAluRil®)¹

Hyacyst® PFS - Proven
Effect for the treatment of
Intercystitis &
Recurrent Bacterial Cystitis

A woman with her hair in a bun, wearing a black sports bra and leggings, is sitting in a yoga pose (Padmasana) on a wooden deck. She has her hands raised above her head in a prayer position (Anjali Mudra). In the background, there is a lush green forest with a waterfall cascading over rocks. A wooden post is visible in the foreground on the left.

Make that Change

HYACYST[®]

The Hyacyst[®] Pre-Filled Syringe range offers convenience for you and your patients

*"We identified a group of patients successfully managed by intravesical glycosaminoglycan (GAG) replacement therapy we thought would benefit clinically and psychologically from self-administration of their treatment. These patients were taught to perform clean intermittent self-catheterisation, and subsequently self-administer Hyacyst[®] (pre-filled Sodium Hyaluronate syringes). This has proved to be successful and has empowered these patients to manage their own symptoms within their home environment, thus setting them free from the constraints of hospital based clinical settings."*²

Kay Willard, Urology Advanced Nurse Practitioner, University Hospitals of North Midlands NHS Trust, UK

INTENDED USE OF HYACYST

- Interstitial cystitis
- Painful bladder syndrome
- Glycosaminoglycan (GAG) layer deficiency
- Hemorrhagic cystitis
- Recurrent bacterial cystitis
- Radiation cystitis
- Chemotherapy induced Cystitis

HYACYST[®] 120 PFS

- Hyacyst[®] 120 PFS is as effective as combination GAG layer therapy (iAluRil[®])¹ in a convenient syringe
- Higher concentration option when increased replenishment of the GAG layer is required



Hyacyst[®] 120mg PFS

Clinical comparison of intravesical Hyaluronic Acid and Hyaluronic Acid-Chondroitin Sulphate therapy for patients with Painful Bladder Syndrome/Interstitial Cystitis.¹

In this published study, Hyacyst® 120mg was proven to be as effective as combination treatment (iAluRil®) in reducing symptoms in patients with IC/PBS.¹

Methods

53 patients with Painful Bladder Syndrome/Interstitial Cystitis (PBS/IC) were randomised and treated with weekly instillations of sodium hyaluronic acid (Hyacyst®) or combination of hyaluronic acid-chondroitin sulphate therapy (iAluRil®) during the first month, followed by one instillation every 15 days in the second month and once monthly during the third and fourth months, for a total of 8 doses. Patients were evaluated using a visual analogue pain scale (VAS), interstitial cystitis symptom index (ICSI), interstitial cystitis problem index (ICPI), voiding diary for 24-hour frequency/nocturia, cystometric bladder capacity and mean voided volume at the beginning and at 6 months.

Results

The primary outcome VAS of pain decreased significantly at 6 months in both groups ($p = 0.001$). Secondary outcomes, including 24-hour frequency/nocturia, ICSI and ICPS, decreased significantly in both treatment arms ($p < 0.05$). Cystometric bladder capacity and mean voided volume increased, yet these results were not statistically significant ($p > 0.05$).

No statistically significant differences in primary and secondary outcomes were seen between the two groups ($p > 0.05$). (see Figure 1).

Dosing Regimen for Hyacyst®

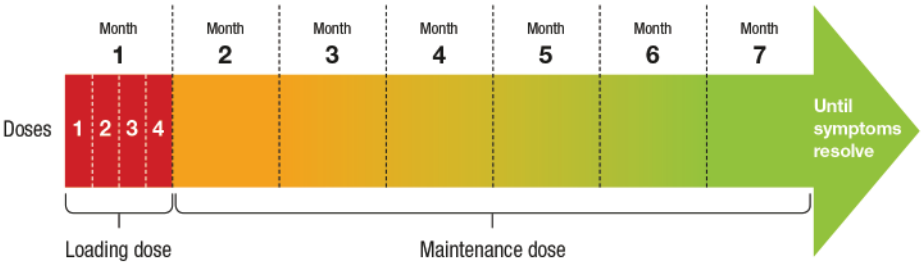


Figure 2. Recommended dosing regimen for Hyacyst®⁵

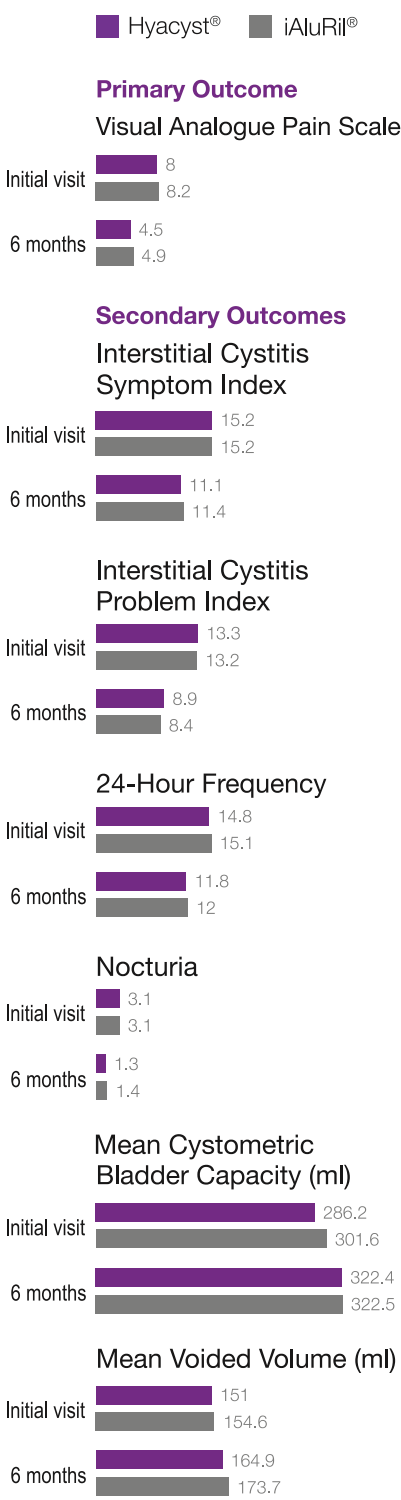


Figure 1. Pre-treatment and 6 months findings of the patients treated with Hyacyst® and iAluRil® (n=53).



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Hyacyst® is indicated for the temporary replenishment of the GAG layer in the following bladder conditions: Painful Bladder Syndrome (PBS) / Interstitial Cystitis (IC), Recurrent Bacterial Cystitis; Radiation Induced Cystitis, Haemorrhagic Cystitis and Chemotherapy Induced Cystitis.⁵

- **Hyacyst® PFS range** is ideal for Self-Instillation at home
- **Hyacyst® 120 PFS** is as effective as combination GAG layer therapy (iAluRil®)¹
- **Hyacyst® 120 PFS** - Proven Effect for the treatment of Intercystitis & Recurrent Bacterial Cystitis

REFERENCES:

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HYACYST® ABBREVIATED PRESCRIBING INFORMATION

Refer to Package Information Leaflet

Active Ingredient (quantities, qualitative) Each pre-filled syringe contains a sterile solution of highly purified Sodium Hyaluronate (120mg/50mls) of non-animal origin. **Presentation:** Clear Solution for bladder instillation. **Indication:** Replenishment of deficient glycosaminoglycan (GAG) in the bladder. The GAG layer lines the epithelium in the bladder. It acts as a protective barrier, shielding the bladder wall from microorganisms, toxins

and urine components that may adversely affect the bladder. Deficiency or injury to this layer results in increased permeability of the bladder wall and is a leading explanation for the aetiology of Interstitial Cystitis and Painful Bladder Syndrome. **Dosage and administration:** weekly instillation of Hyacyst 40mg/ 120mg for 4-6 weeks followed by monthly instillation until symptoms resolve. **Contraindications:** Hypersensitivity to Sodium Hyaluronate. **Legal category:** Class IIa Medical Device, CE 2292.



Medical Device Class IIa

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