

NEW PRODUCT NEWSLETTER

An overview of new products
launched in **2nd Quadruple, 2026**



Opsonin Pharma
Ideas for healthcare

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Abstract

Mineralocorticoid Receptor Antagonists: A Comprehensive Review of Finerenone

Dr. Juan Simon Rico,

Johns Hopkins Medicine in Baltimore, Maryland, USA.

We aim to review the mechanism of action and safety profile of mineralocorticoid receptor antagonists (MRAs) and discuss the differences between selective and non-selective MRAs. More specifically, finerenone is a new medication that is currently under investigation for its promising cardiovascular and nephrological effects. Recent Findings MRAs are well known for their utility in treating heart failure, refractory hypertension, and diverse nephropathies, namely, diabetic nephropathy. As their name denotes, MRAs inhibit the action of aldosterone at the mineralocorticoid receptor, preventing receptor activation. This prevents remodeling, decreases inflammation, and improves proteinuria. There are not significant differences in outcomes between selective and non-selective MRAs. A new selective MRA named finerenone (originally BAY 94-8862) has shown promising results in several trials (ARTS-HF and ARTS-DN) and smaller studies. Finerenone may have a dose-dependent benefit over older MRAs, decreasing rates of albuminuria and levels of BNP and NTProBNP without causing a significant increase in serum potassium levels. This medication is not yet approved as it is still in phase 3 clinical trials (FIGARO-DKD and FIDELIO-DKD trials). MRAs are beneficial in several disease states. Newer medications, such as finerenone, should be considered in patients with heart failure and diabetic nephropathy who may benefit from a reduction in albuminuria and BNP/NT-ProBNP. Data surrounding finerenone are limited to date. However, results from ongoing clinical trials, as well as new trials to evaluate use in other pathologies, could validate the implementation of this medication in daily practice.

Opsonin Introduces

Once Daily
Finera[®]
Finerenone

10 mg Tablet
20 mg Tablet



*A savior of diabetic CKD patients
with cardiac benefits*



Recommended by



Abstract

Oral Administration of S-acetyl-glutathione: Impact on the Levels of Glutathione in Plasma and in Erythrocytes of Healthy Volunteers

Sergio Fanelli,

Clinical Research Associate (CRA) at Merck & Co., Inc. (MSD) in Rome, Italy.

Glutathione (GSH) is an antioxidant involved in many metabolic and cell cycle-associated cell functions. Increasing its plasma levels may have beneficial systemic effects and may be of therapeutic relevance. GSH intake via the oral route does not successfully enhance GSH in plasma, due to its metabolism in the gut. Hence, many attempts have been made to develop GSH derivatives able to easily cross the cell membranes and to enhance its oral bioavailability. S-Acetyl-glutathione (SAG) is a GSH precursor which is more stable in plasma, it is taken up directly by the cells and later converted to GSH. In this work we have performed a single dose, randomised, open-label, two-sequence, two-period, cross-over bioavailability study of SAG compared to GSH, as reference product, in healthy volunteers. 18 male and female subjects were randomly allocated to one of two sequences of products (GSH and SAG) in the two study periods according to randomisation and cross-over design. The primary endpoint of the study was to describe the pharmacokinetic profile of GSH in plasma after a single oral administration of SAG or GSH. Plasma levels of GSH, SAG, γ Glu-Cys and Cys-Gly were determined by UPLC/MS at different time intervals within 24 hours of oral administration. The safety and tolerability profile of SAG and GSH was excellent. SAG was not quantifiable in any plasma sample, suggesting that deacetylation of SAG occurs rapidly. The levels of plasma γ Glu-Cys and Cys-Gly did not differ significantly between the two treatments, whereas GSH concentrations showed an increase and a low peak both in plasma and in erythrocytes followed by a decline up to 24 h post-dose. Rate (C_{max}) and extent (AUC_{0-t}) of GSH absorption of plasma were higher after single dose of SAG powder than after the reference product. T_{max} of GSH in plasma or in erythrocytes was not significantly different between treatments.

Opsonin Introduces

Glothion®

100 mg Capsule

S-Acetyl Glutathione

For A Flawless, Glowing Skin & Anti-Aging

1st time in Bangladesh

US FDA GRAS Approved



- Clinically Proven
- Highest Bioavailability
- Patented Crystalline form

Patented Raw Materials from Italy



Italy Bangladesh

Reference: Cavallaro et al., Int J Clin Nutr Diet 2018, 4: 134



Abstract

Efficacy, tolerability and comfort of a 0.3% hypromellose gel ophthalmic lubricant in the treatment of patients with moderate to severe dry eye syndrome

Dr. Joseph Tauber,

Tauber Eye Center, Kansas City, MO, USA.

To evaluate efficacy, safety and comfort of a 0.3% hypromellose (HM) eye gel with a sodium perborate preservative system and carbomer gelling agent, in patients with dry eye. Patients with moderate-to-severe dry eye syndrome were enrolled in this open label study and assessed at three visits; a screening consultation (baseline) and two follow-up visits on day 14 (± 4 days) and day 28 (± 4 days). All screening, evaluation and follow-up visits were carried out at the Tauber Eye Center (formerly the Hunkeler Eye Center), Kansas City. Patients were treated with the product over a 4-week period. They were instructed to use the product at least two times daily, more if necessary, with one drop instilled into the conjunctive sac of both eyes. Efficacy was measured by ocular symptoms (burning, stinging, foreign body sensation, dryness, pain/soreness and photophobia), ocular signs (eyelid erythema, bulbar conjunctival injection and corneal superficial punctate keratitis score), tear breakup time and global assessment of ocular comfort. Tolerability measures were change from baseline in best corrected Snellen visual acuity and monitoring of adverse events. Thirty-seven patients completed this study. The mean sum symptom score at each visit was significantly lower compared with baseline with approximately 30% reduction in the sum symptom score at 2 weeks and approximately 33% at 4 weeks after treatment initiation ($p < 0.001$). Mean individual symptom scores for dryness, stinging and foreign body sensation decreased by approximately 40% at the end of the study ($p < 0.02$). Tear breakup time increased from baseline by 53% and 59% at 2 and 4 weeks, respectively ($p < 0.001$). The proportion of patients reporting a global evaluation of slightly better or much better was approximately 74% at 2 weeks and 78% at 4 weeks after treatment initiation. The product was well tolerated, with one related adverse event reported. In a small, open-label study, this 0.3% HM eye gel showed statistically significant effects in relieving ocular symptoms and provides a well-tolerated formula that effectively reduced symptoms and improved ocular comfort in patients with dry eye syndrome.

Hypromellose gel is ideal for severe or chronic dry eye syndrome.

Opsonin Introduces

Hyl[®]gel
Hypromellose USP 0.3%

10 gm
Sterile Eye Gel

LONG-LASTING relief from Dry Eye



- Longer retention time on ocular surface
- Enhanced night-time protection
- Reduced frequency of application



Opsonin Introduces

Imeg[®] 500 mg tablet

Imeglimin Hydrochloride INN

Manages diabetes with organ protection

At a glance

- ◆ Treats & control diabetes by innovative mode of action
- ◆ Exceptionally effective as monotherapy & add-on therapy
- ◆ Protects vital organs along with glycemic control
- ◆ Increases insulin secretion & reverses pancreatic β -cell dysfunction
- ◆ Less or no chance of drug-drug interaction



Drug used in Epilepsy

For the effective and immediate management of Convulsive Status Epilepticus (CSE)

Opsonin Introduces

Levefix[®] 500 mg/5 ml Injection

Levetiracetam USP

Ceases the sequence of Seizures



- Effective injectable in Convulsive Status Epilepticus (CSE) emergency
- Does not affect normal synaptic transmission
- Safe & well tolerated

Opsonin Introduces

Spirium[®]

Tiotropium 18 mcg

Respicap

*First line treatment
for Asthma & COPD*

- Significantly reduces disease severity
- Exhibits diverse modes of action
- Better than Glycopyrronium
- Safer than Indacaterol

Indications

- Asthma
- COPD
- Bronchospasm

Dosage Guideline

The recommended dose for 18 years & above is 1 capsule once-daily

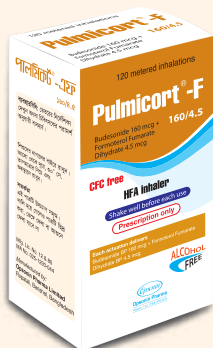


Opsonin Introduces

Pulmicort[®] -F

Budesonide 160 mcg + Formoterol Fumarate 4.5 mcg

Privilege to breath, to be alive



HFA Inhaler

Moreover:

- Relief breathing difficulty within just 5 minutes
- More effective than Salmeterol/Fluticasone combination
- Can be used from 6 years of age
- Budesonide has approximately 200 fold higher affinity for the glucocorticoid receptor and 1000 fold higher anti-inflammatory potency than hydrocortisone

Opsonin Introduces

Spirolac[®]

Spironolactone BP

25 mg
50 mg
100 mg

Tablet

Prevents remodeling, prolongs survival

- US FDA approved MRA (Mineralocorticoid Receptor Antagonist) for the treatment of HFrEF
- Increases survival rate than other diuretics
- Prevents remodeling beyond diuresis
- Most affordable MRA for heart failure management



Eye Preparation

Opsonin Introduces

Lotepin[®]

Loteprednol 0.5%

5 ml Sterile Eye Drop
5 gm Sterile Eye Ointment



For a Daily
Protection

Against Hyperacidity

Opsonin Introduces

1st Time in Bangladesh Alginate Based Buffered
Rabeprazole MUPS Formulation

finix[®] **MUPS** 20 mg Tablet
Rabeprazole Sodium BP

The Fastest Acting
Proton Pump Inhibitor in the World



Opsonin Introduces

Crezyme[®] Pro Capsule
Pancreatin BP 325 mg

Triple enzyme for healthy digestion

- Contains essential triple enzyme: amylase, protease and lipase, which effectively digests starch, protein & fat in the gastrointestinal tract.
- Faster breakdown in the stomach than tablet formulation
- Ensures maximum protection of sensitive ingredients
- Diminishes the fullness of the stomach after a high-fat meal
- Significantly reduces bloating



*NVD= New Castle Disease Virus

Abstract

Use of Topical Steroids in Dermatology: A Questionnaire Based Study

Dr. Sonali R. Karekar,

Galderma Mumbai, Maharashtra, India.

Topical steroids, the most widely prescribed drugs in dermatology are being increasingly misused. This study was conducted to assess knowledge and practices regarding the use of topical steroids and to analyze prescriptions containing topical steroids. Following approval from the institutional ethics committee, participants were recruited as per the selection criteria and divided into those treated in the institution and those having outside prescription. They were administered a pre validated questionnaire to assess knowledge and practices regarding the use of topical steroids. Comparison of awareness between two patient categories was done using Chi square test. Prescription variables were analyzed using descriptive statistics. Significance of P value was set at 0.05. Results: Out of 400 patients, 167 had external prescriptions whereas 233 were institutional patients. Only 5.5% of all patients knew about the type of drug prescribed whereas 31.25% were aware of the indication. A total of 33.75% of the patients knew topical steroids required a prescription and 5.6% said they were aware that topical steroid use was associated with side effects. Side effects were reported by 96 patients. Awareness regarding knowledge, indication, and need for prescription were significantly better in institutional patients whereas knowledge about side effects was lacking in both groups. Psoriasis was the most common indication overall whereas tinea was the most common indication (51.5%) among externally prescribed. Although this study showed that institutional patients had comparatively better knowledge than community treated patients, there is a need to create more awareness among patients overall and implement measures to stop irrational prescribing practices in the community.

For the treatment of mixed inflammatory dermal infections

Opsonin Introduces



Combimax[®]

Clobetasol Propionate BP 0.05% + Ofloxacin USP 0.75 % +
Ornidazole INN 2% + Terbinafine Hydrochloride BP 1%



15 gm Cream



One - Stop solution for Mixed Inflammatory Dermal Infections

**Super
potent steroid**

**Broad spectrum
antibiotic**

**Anti-anaerobic antibiotic
& Anti-protozoal**

Anti-fungal

Dosage guidelines

Apply to the affected area and rub evenly onto the skin twice daily
(for 15 days or as directed by the physicians).



Opsonin Introduces

Cildip[®]
Cilnidipine INN

1st Time in Bangladesh
5 & 10 mg Tablet



An innovative dual L & N-type Calcium Channel Blocker



Opsonin
Opsonin Pharma
Ideas for healthcare

Anti-oxidant & Minerals

To treat Hypertension, Angina, Congestive Heart Failure (CHF) & Statin Induced Muscle Pain

Opsonin introduces

Ultra-Q[®] Capsule

Ubidecarenone (Co-enzyme Q10) 150 mg,
Magnesium 150 mg & Vitamin D₃ 1000 IU

1st Time in Bangladesh

Stronger Approach for
Strengthening Cardiac Function



Opsonin Herbal & Nutraceuticals
Gateway to Nature's Remedy

Opsonin Introduces

Retifer[®]

Ferric Iron (as Ferric Citrate INN) 210 mg

210 mg
Tablet



*Comprehensive Therapy for
IDA & Hyperphosphatemia*



Excellent **Vanilla Flavor**

With **Opadry EZ Film Coating System**

Opsonin
Opsonin Pharma
Ideas for healthcare

Opsonin Introduces

Nosomist[®]

25 ml
Sterile solution

Sodium Chloride BP 0.9%

Nasal irrigation for respiratory complications

- Washes inflammatory mediators
- Suitable for inhalation with bronchodilators
- Ensures comfortable breathing
- Liquefies nasal crusts and thick mucus
- Safe for pregnant women and children



**Sterile
Solution**

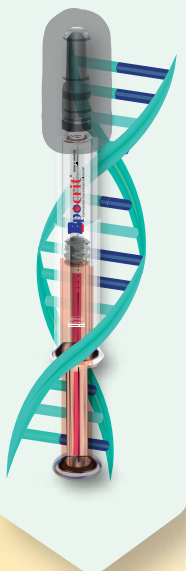
Abstract

ERYTHROPOIETIN THERAPY

Dr. LAWRENCE T. GOODNOUGH,

Stanford University School of Medicine, Stanford, California, USA.

Despite impressive advances in the safety of the blood supply, the search for therapeutic alternatives to blood continues. Erythropoietin (along with iron, vitamin B12, and folic acid) has been recommended as a specific medication “that should be used instead of blood transfusion if the clinical condition of the patient permits sufficient time for these agents to promote erythropoiesis. Therapy with recombinant human erythropoietin was first shown to correct the anemia caused by chronic renal failure in patients undergoing dialysis. Subsequently, erythropoietin (Procrit, OrthoBiotech, Raritan, N.J.) was also approved for the treatment of anemia caused by chronic renal insufficiency or by cancer or cancer therapy, as well as anemia in patients infected with the human immunodeficiency virus (HIV) who are undergoing zidovudine therapy. Knowledge of the scientific⁷ and physiologic⁸ bases for the pharmacologic use of erythropoietin has led to clinical trials in patients undergoing elective surgery in the United States. In addition, erythropoietin therapy has been approved in Japan, the European Union, and Canada for use in patients donating autologous blood before surgery and was recently approved in Canada and the United States for use in patients undergoing surgery. This article is intended to help clinicians who will have to decide whether to administer erythropoietin therapy to patients undergoing surgical procedures.



Opsonin Introduces

Recombinant Human Erythropoietin

Epocrit

3000 IU/0.75 ml

5000 IU/0.5 ml

Pre-filled Syringe Injection

Reliable Hb correction of CKD & Cancer patients




INDICATIONS: TREATMENT OF ANEMIA DUE TO:

- CHRONIC KIDNEY DISEASE (CKD) IN PATIENTS ON DIALYSIS AND NOT ON DIALYSIS.
- ZIDOVUDINE IN HIV-INFECTED PATIENTS.
- THE EFFECTS OF CONCOMITANT MYELOSUPPRESSIVE CHEMOTHERAPY



Opsonin Introduces

Itored[®]

50 mg Tablet

Itopride

The Smarter Prokinetic for GI Relief

- Unique dual mode of action
- 1st line treatment option in functional Dyspepsia
- Quickest onset of action (T_{max} 35 minutes)
- Does not cause QT prolongation & cardiac complications
- No drug-drug interaction due to metabolized by FMO3 pathway



Opsonin Pharma
Ideas for healthcare

Vitamin & Minerals

Opsonin Introduces

Natcoral-DK[®]

Tablet

Calcium (Coral source) USP 500 mg
Vitamin D₃ (Cholecalciferol) BP 1000 IU
Vitamin K₂ (Menaquinone-7) USP 75 mcg

**3-in-1 complete
for strong bones**



Ensures calcium deposition into bones and prevents its deposition in arteries and soft tissues

Keeps bones stronger than conventional calcium combined with vitamin D3

Ensures a daily dose of vitamin D3 (2000 IU)

Relieves nocturnal leg cramps (NLCs)

K₂ Raw materials
from **FRANCE**

Ca+D₃+K₂ combination
TGA Approved



Opsonin Herbal & Nutraceuticals
Gateway to Nature's Remedy

Anti-infective

Opsonin Introduces

Tobramycin USP[®]
Torcin

5 ml

Nebuliser
Solution

Target specific lung therapy



- ◆ Effectively inhibits causative pathogens
- ◆ Significantly improves respiratory symptoms
- ◆ Manufactured with World best Weiler BFS machine

Antihistamine

Opsonin Introduces

Xyрил[®]
Hydroxyzine HCl

10 & 25 mg Tablet
100 ml Syrup (10 mg / 5 ml)

**One stop solution for
pruritus & anxiety**

- Only antihistamine with anxiolytic activity
- Can be given from six month of age
- Quickest onset of action





We extend our sincere gratitude for your continued support and partnership in our journey of success. We remain committed to strengthening this valued relationship. Wishing your continued prosperity, growth and new opportunities ahead.

A. Momen

Mohammad Abdul Momen Talukder
Director, Sales & Marketing



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