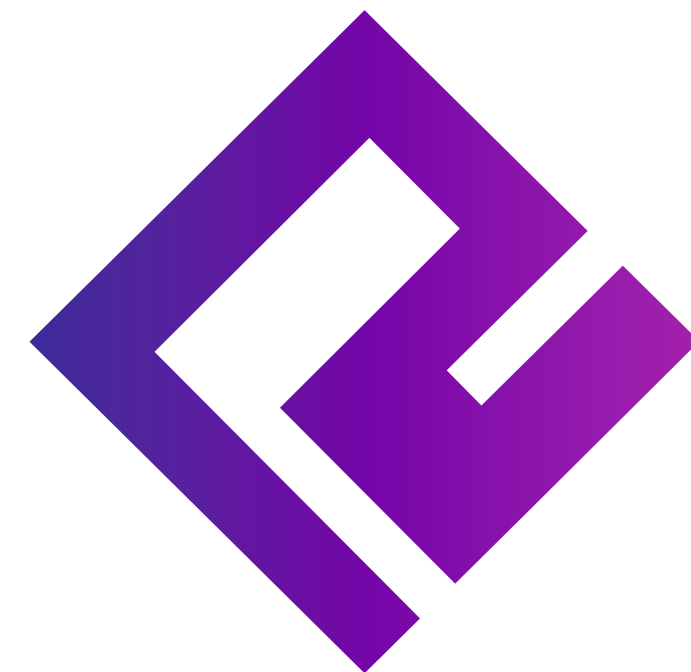


Thank You Dr...



ReSante
Life Sciences Pvt Ltd



**Resante Niche Products designed and manufactured
in cGMP Compliant manufacturing facilities
approved by USFDD.**



Decreases Acid Load and Preserves Kidney Function

AciCarb - 650/1000

Sodium Bicarbonate 650mg / 1000mg **Enteric Coated** Tablets

ACI

Benefits of EC Sodium Bicarbonate

- ❁ Prevents dose dumping in the stomach
- ❁ Better patient Compliance
- ❁ No GI irritation
- ❁ Improves kidney function

The Right
Dose Soda
Bicarbonate



Dosage

650 mg
Twice daily

1000 mg
Twice daily

Initial Dosage

650 mg

TDS

Maximum Dose: Up to 3 Tablets Thrice Daily.

American Journal of Kidney Disease Recommended Dosing

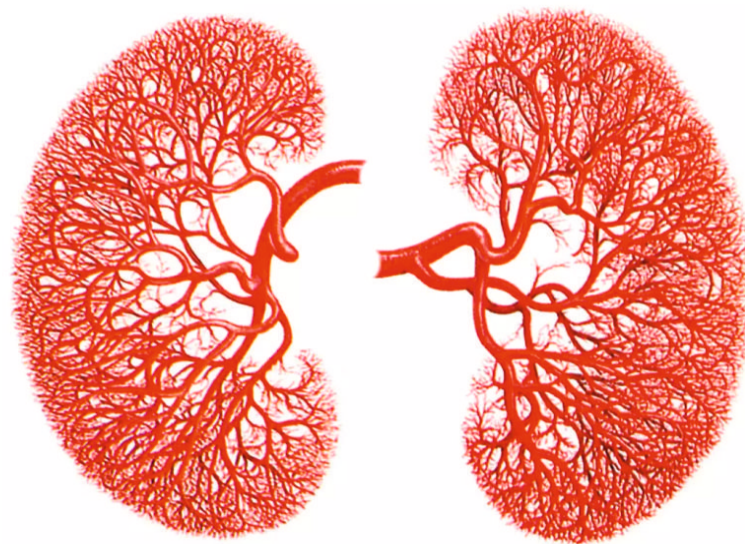
NACSAVE

N-Acetylcysteine 300 mg + Taurine 500 mg Tablet

EXTRA
NAC DOSAGE
FOR EXTRA
PROTECTION

Odour masked by special Technology

Innovative Approach to Treat
Microalbuminuria



Dosage:

1 Tablet two to three times a day

Dose - Enhanced Renal Anti Oxidant

- ★ Preserves renal function by preventing deterioration due to microalbuminuria
- ★ Taurine in combination with acetylcysteine prevents diabetes associated microangiopathy
- ★ Reduces Microalbuminuria and TGF-B Level by 50%
- ★ Improves Residual Renal Function (RRF) in Patients treated with chronic hemodialysis

NAC

The Game Changer in Hyperuricemia Management

Uric Acid – The Invisible Killer

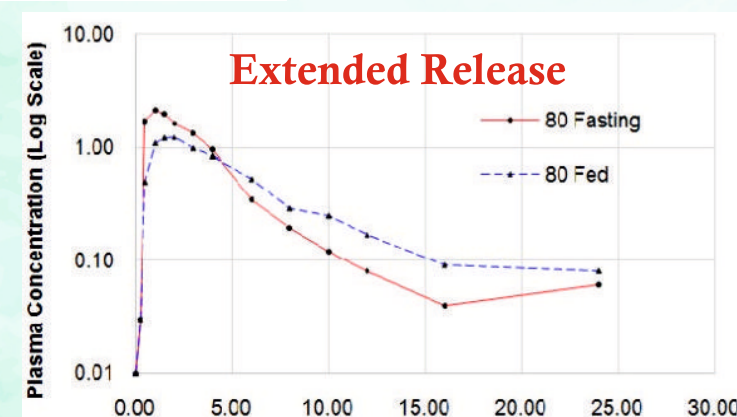
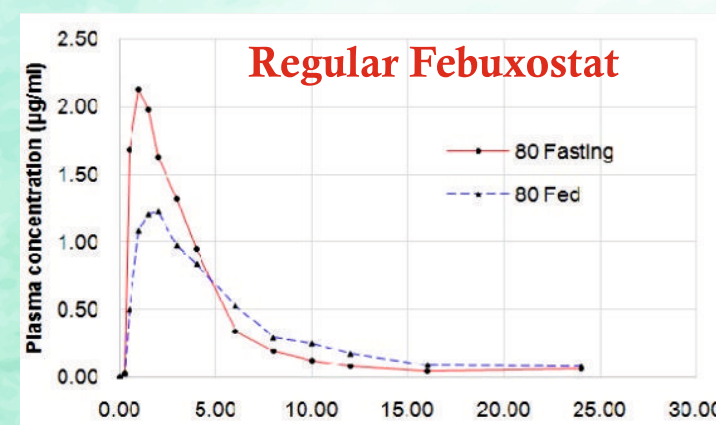
Fixuric-ER 40

(Febuxostat 40mg Extended Release Tablets)

For 24 Hours
Sustained
Uric acid Reduction

FIX

Difference between Conventional & Extended release Febuxostat in maintaining Plasma drug levels



- ★ Effective in reducing serum UA in Hyperuricemia.
- ★ Proven cardiovascular Safety when Compared with Allopurinol
- ★ Extended release Febuxostat tends to maintain sustained serum levels over a 24 hour period
- ★ Febuxostat (ER and IR) formulations are effective and well tolerated in patients with gout and even with severe renal impairment

Initial Dosage: 40mg/day

Maintenance Dose 40 - 80mg/day

The Ideal CCB has Arrived

AZELGUARD - 16

Azelnidipine 16 mg Scored Tablets

- **Highly selective for L-Channels**
- **Causes a gradual and prolonged fall in blood pressure in hypertensive patients and no reflex tachycardia.**
- **Well Tolerated**
- **Lesser incidence of pedal edema**
- **Azelnidipine reduces uric acid levels - Promising anti hypertensive in patients with hyperuricemia**
- **Azelnidipine can be useful to preserve insulin signaling by suppressing oxidative stress.**

Effective once daily dosing

Initial Dose - 8mg to 16mg

Scored Tablet

Economical & Patient friendly

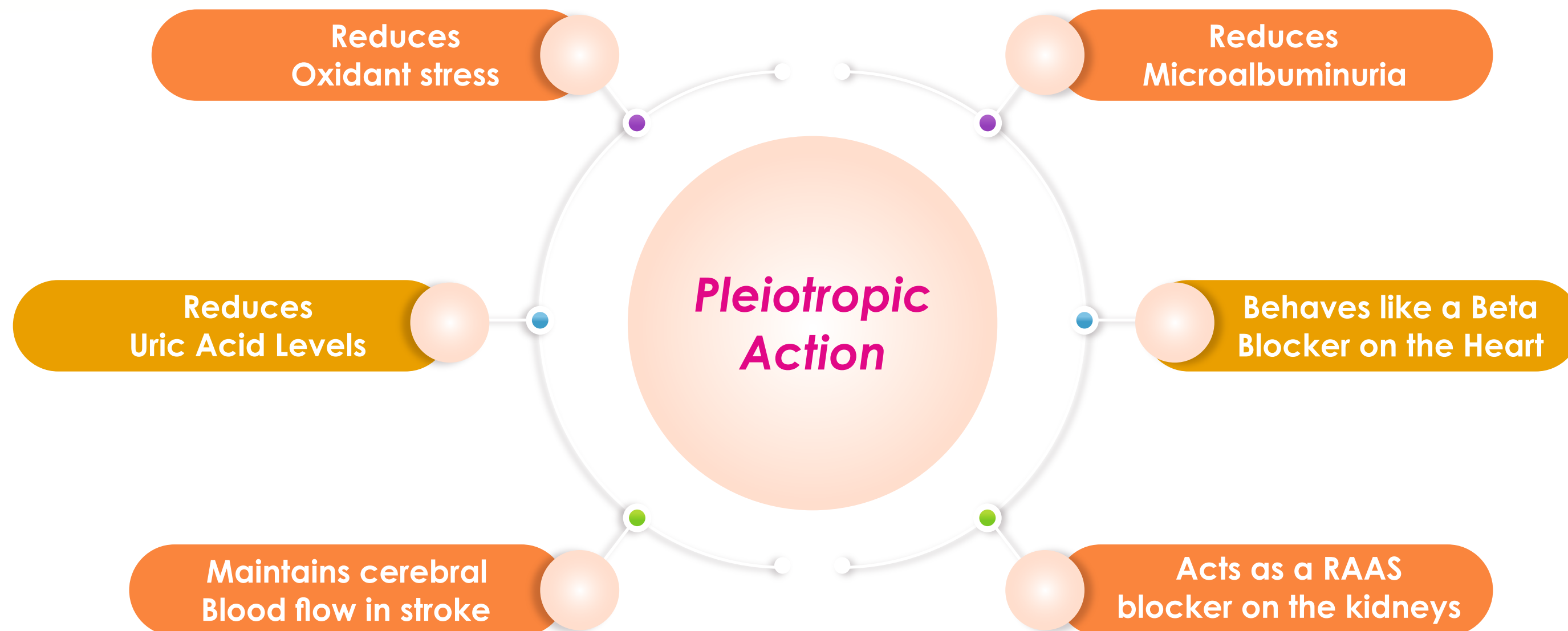
AZE



The Ideal CCB has Arrived

AZELGUARD - 16

Azelnidipine 16 mg Scored Tablets



Proren HP

Ready to Drink Protein Formula

Zero Potassium

Zero Sugar

Low Phosphorus

**ONLY RENAL SUPPLEMENT
PROTEIN POWDER
WITH DIGESTIVE ENZYMES**

- 👉 70% High Quality Protein
- 👉 Ideal blend of soy and whey Protein
- 👉 All essential nutrients and trace elements are added

Why digestive enzymes are must in Protein Powder?

- 👉 Papain is known for breaking down particularly large and tough protein in fibers. It stimulates digestion, aids in skin and wound healing, supports the immune system and acts as an antioxidant.
- 👉 Studies have shown that the addition of digestive enzymes to protein blends have shown to increase time to peak and peak concentrations of amino acids in the blood.

PHP

Proren HP

Ready to Drink Protein Formula

Zero Potassium

Zero Sugar

Low Phosphorus

READY TO DRINK
ORAL SUPPLEMENT TO PREVENT PROTEIN
LOSS IN DIALYSIS PATIENTS



Digestive Enzyme Papain Added

Reasons Why Protein
Powder Should Include
DIGESTIVE ENZYMES

Energy & Strength

The body needs high concentration levels of proper nutrients to produce energy

Healing & Health

Improving digestive health can help improve gut health

Meal Replacements

Protein powders that have digestive enzymes make for better meal replacements

Enhance Workouts

Protein powders with digestive enzymes help to quickly enhance muscle growth

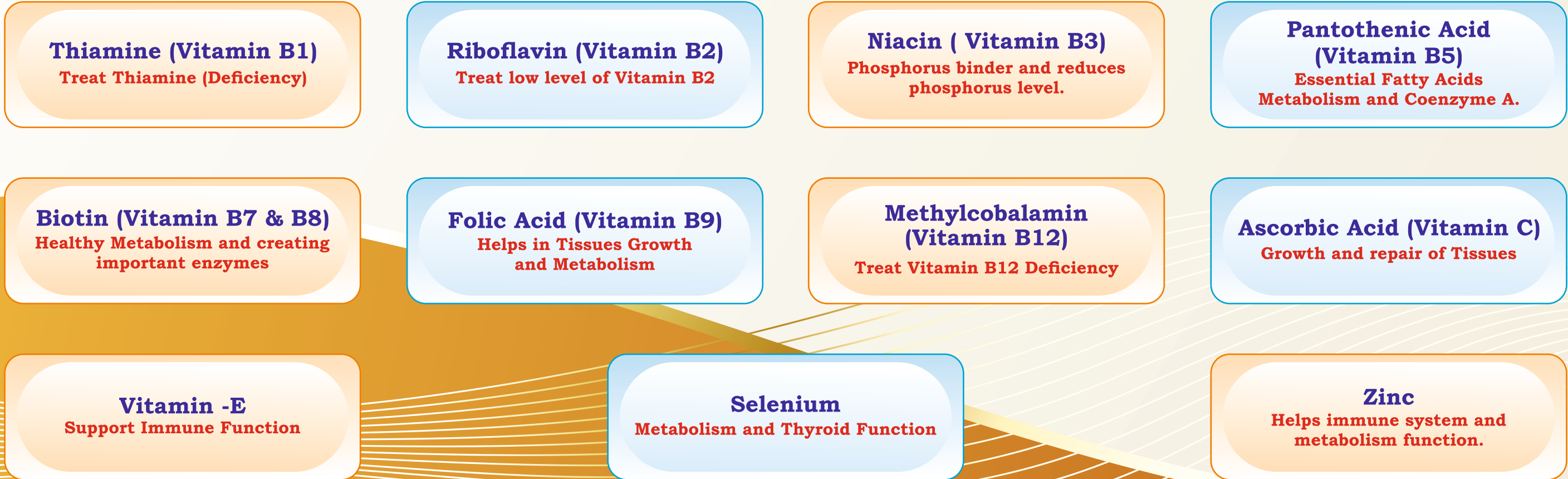


Suitable For Diabetic, ICU Patients & Chronic illness

Unique Dosage and Combination Aimed at Replacing vitamin deficiency
in Renal Failure & Dialysis Patients

Refervit Tab

Ascorbic Acid (Vit C) 50mg + Nicotinamide (Vit B3) 15mg + Folic Acid (Vit B9) 10mg
Pyridoxine Hcl (Vit B6) 10mg + Pantothenic Acid (Vit B5) 6mg + Riboflavin (Vit B2) 3mg + Thiamine Hcl (Vit B1) 10mg
Methylcobalamin (Vit B12) 500mcg + Biotin (Vit B7) 300 mcg + Vit E 50 IU + Zinc 12mg + Selenium 40mcg



RET

Different from Conventionally Available Combinations



In patients with multiple risk factors for Heart Disease

SANTORVA - 10/20

Atorvastatin 10 / 20 mg Tablets

In risk factors such as

- 📍 Family History
- 📍 High Blood Pressure
- 📍 Age
- 📍 Low HDL (Good Cholesterol)
- 📍 Smoking
- 📍 Well tolerated even in renal failure
- 📍 No dose adjustment needed in renal failure

REDUCES RISK OF HEART ATTACK BY



SAN

In Iron Deficiency Anaemia

REFEROL

Each film coated tablet contains Ferrous Ascorbate eq to Elemental iron 100mg,
Folic acid 1500 mcg, Zinc sulphate Monohydrate 61.8 mg eq to elemental zinc 22.5mg

Truly XT ra Special Care

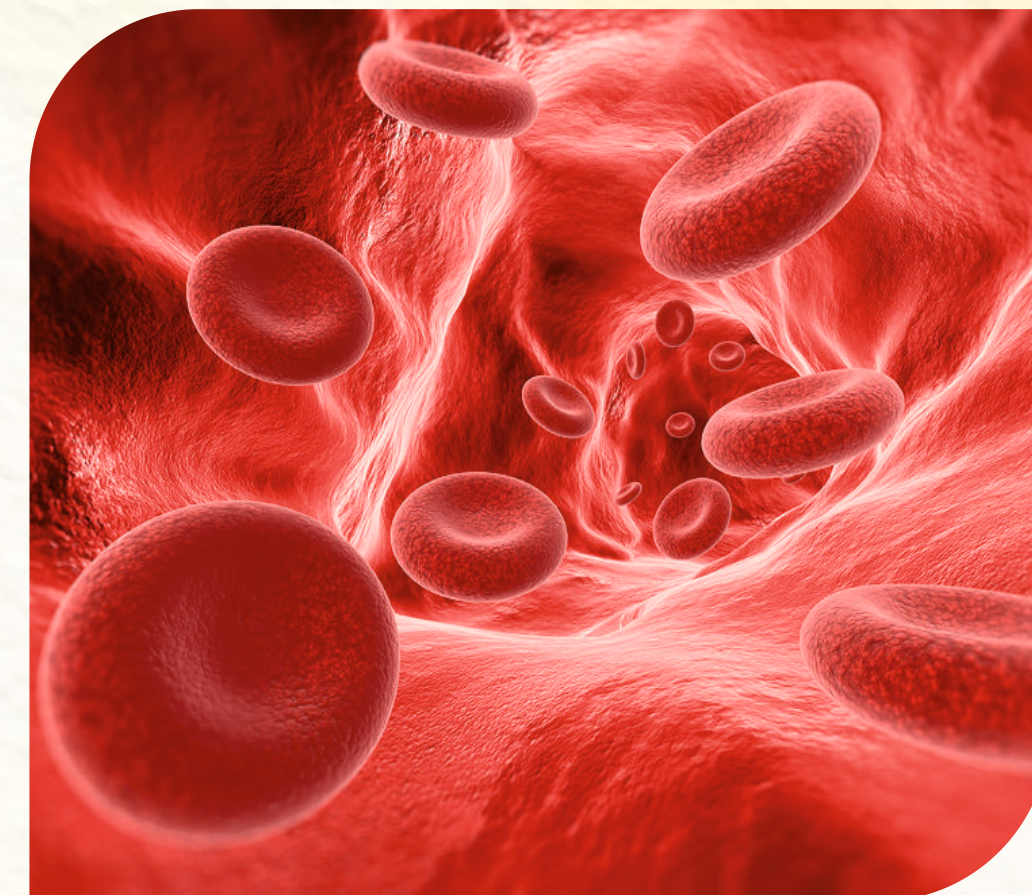
- Ensures rapid Hb rise - 2.73 g/dl in 45 days
- High bioavailability (26.4 - 50.4%)
- Increased iron absorption and iron utilization
- Minimal GI adverse effects

Superior Haematinic

Ascorbic Acid Enhances Absorption of Iron

Better Tolerated As Compared To Ferrous Sulphate

Absorbed Thrice As Much As Ferric Form of Iron



REF

In Conditions of Hyperphosphatemia

Sevimate - 400

Sevelamer Carbonate 400mg Tablets

NEW AGE PHOSPHATE BINDER



- ✦ Significantly lowers serum phosphorus levels
- ✦ Effective and well tolerated therapy for the control of phosphorus levels in hyperphosphatemia
- ✦ Significantly decreases total cholesterol and LDL cholesterol

Dosage:

400-800mgTID

SEV

Manufactured in USFDA Approved Plant

The Demand of **Burning Stomach** is **Rera - D**

Rabeprazole 20mg + Domperidone 30mg Capsules

- A potent proton-pump inhibitor effectively improves quality-of-life of ulcer patients
- Very much effective in acid dyspepsia
- Highly appreciable efficacy in active uncomplicated and complicated ulcers
- Prophylaxis and maintenance therapy of complicated and uncomplicated ulcers



RER

Indicated in:

- 🌀 GERD
- 🌀 NSAID's and steroid therapy related ulcers
- 🌀 Ulcer dyspepsia
- 🌀 Treatment of H.pylori infection
- 🌀 Stress-related ulcers
- 🌀 Zollinger Ellison syndrome

Manufactured in a quality house "Hetero Labs Ltd" - Approved by US-FDA

Sanrock - D

Calcium Carbonate 500mg + Vitamin D3 250IU Tablet

Controls Hypocalcemia, Osteopenia & Osteoporosis

Phosphate Binder

Calcium Carbonate

- Helps in the prevention & treatment of osteoporosis
- Offers faster & better absorption

Vitamin D3

- Controls calcium and phosphate homeostasis & bone mineralization
- Enhances calcium absorption

Also Indicated

- Cardiovascular Disorders Hyperphosphatemia
- Premenstrual syndrome Osteopenia & Osteoporosis

Dosage:
Once to
Thrice Daily

Calcium Deficiency &
Associated Disorders



SAN

Only Vitamin Injection to have all B-Complex
Vitamins with enhanced B12 Dosage

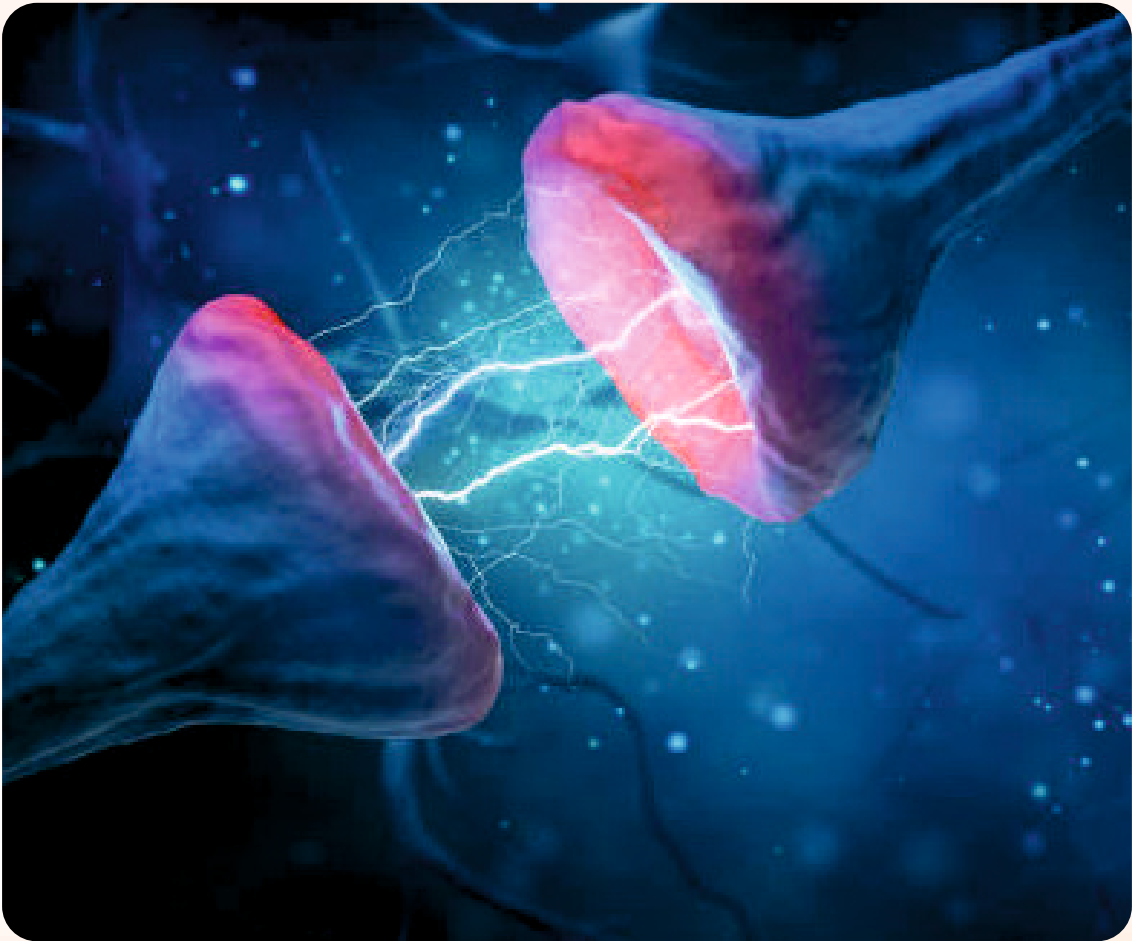
Refervit Inj

**Methylcobalamin 1500mcg + Thiamine 10mg + Pyridoxine 3mg + Folic Acid 10mg
Niacinamide 48mg + D-Panthenol 50mg Injection**

Methylcobalamin

Niacinamide (Vit B3)

Pyridoxine (Vit B6)



Thiamine (Vit B1)

D-Panthenol (Vit B5)

Folic Acid (Vit B9)

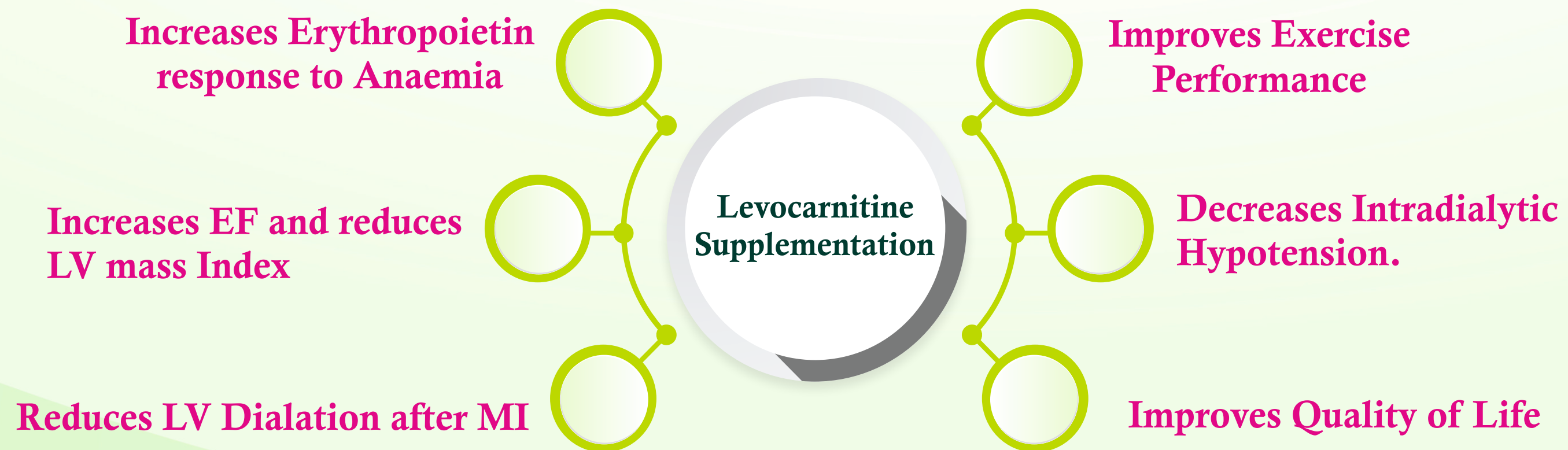
REI

The Metabolic energizer

CARNISANT

Levocarnitine 200mg / ml Injection

Plasma Levocarnitine levels are low in Hemodialysis patients



**Levocarnitine Supplementation in Dialysis patients
reduces Hospitalisation.**

The Metabolic energizer

CARNISANT

Levocarnitine 200mg / ml Injection



- *Orally administrated L-Carnitine is not recommended - High oral doses are required because of limited bioavailability. In addition, data on the efficacy of oral L-carnitine are limited.*
- *The US Food and Drug Administration(FDA)approved the use specifically of the intravenous (IV) formulation of L-carnitine in dialysis patients. A dose of 20mg /kg IV after dialysis has been employed in several controlled trials and has been recommended.*

References:

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3. S Ahmad . Semin Dial, May-Jun 2001.
4. Kidney Blood Press Res 2018; 43:1113-1120
5. Am J Kidney Dis 2007; 50:803.
6. Kidney Int 2004; 66:1527.