STUDY AND **R**ESEARCH

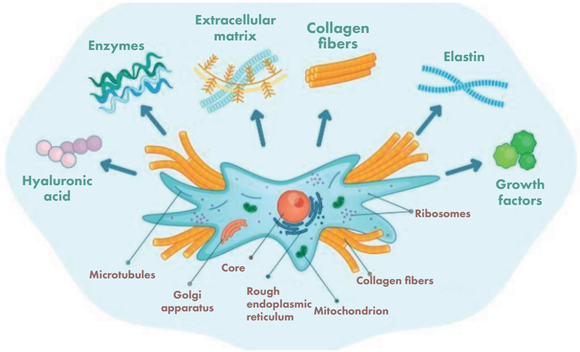
PLURIGIN® ovules Low molecular weight hydrolyzed collagen (3-6Kda)

Collagen is the main component of connective tissue, the property of strength, flexibility and elasticity also forms the support base for tendons and ligaments.

Zhang and coll. have described that 8.0% hydrolyzed collagen (PM 5-13 kDa) is able to penetrate the skin.

The use of hydrolyzed collagen, in 8 weeks, stimulates the synthesis of type 1 procol lagene and elastin (65% and 18%).

In conclusion, hydrolyzed collagen promotes fibroblast growth and stimulates the neosynthesis of type 1 collagen.



"Zhang, H; Pan, D; Dong, Y; Su, W: Su, H; Wei, X.; Yang, C; ling, L; Tang, X, Li X; et al. Transdermal permeation effect of collagen hydrolysates of deer sine'w on mouse skin, ex vitro, and antioxidant activity, increased type I collagen secretion of percutaneous proteine in NIH/3T3 cells 1. Cosmet. Dermatol. 2019

PRAEVENIO **P**HARMA **S**OLVES

S.O.S. Therapy

DAY 1 ➜ Vaginal solution in the morning

DAY 2 ➜ Ovule 1 in the evening for 10 evenings

DAY 12 ➜ Vaginal solution in the morning

- Hydrolyzed collagen
- Lactic acid PLURIGIN
- Equisetum arvense
- Glycerin
- PHMB

- Polyhexamethylenebiguanide (PHMB)
- E.D.T.A.
- Thymol
- Melaleuca
- Equisetum arvense
- Calendula

PLURIGIN®
10 VAGINAL OVULES

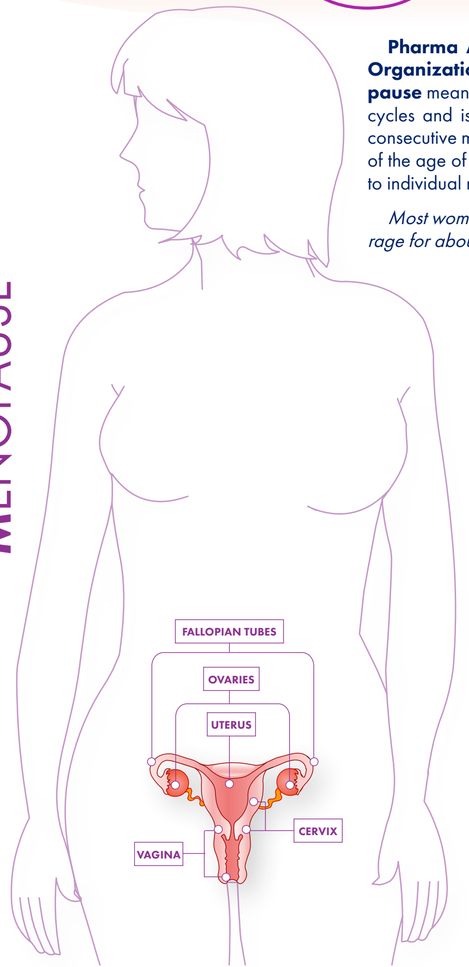
PLURIGIN®
GYNECOLOGICAL SOLUTION

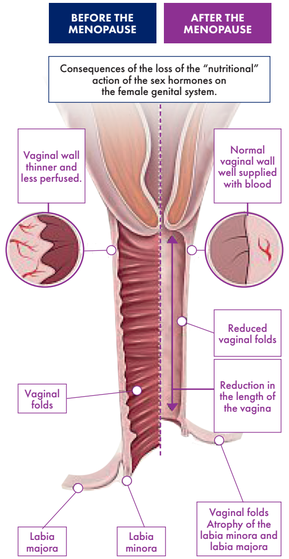
YOUR **S.O.S.** THERAPY

MENOPAUSE

Pharma According to the World Health Organization (WHO), (spontaneous) **menopause** means the definitive cessation of menstrual cycles and is diagnosed retrospectively after 12 consecutive months of amenorrhea. The beginning of the age of menopause changes from individual to individual ranging from 45 to 55 years.

Most women live with it for 1/3 of life, on average for about 30 years.

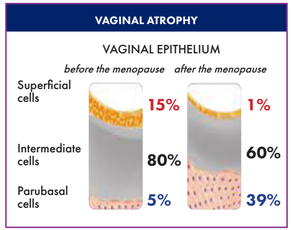




URO-GENITAL SYNDROME IN MENOPAUSE

With the cessation of ovarian activity and the consequent hormonal decline, the uro-genital organs undergo significant changes, resulting in:

URO-GENITAL SYNDROME IN MENOPAUSE



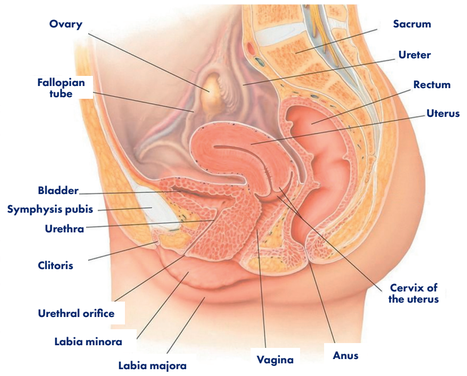
Symptoms

Vaginal dryness, dyspareunia, itching, burning, irritation and lower urinary tract symptoms such as dysuria and bladder tenesmus, as well as recurrent urinary and vaginal infections (post-coital cystitis, vaginitis), decreased sexual desire.

There is also a significant decrease in lactobacilli and alteration of the vaginal PH (usually 3.5 / 4.5) which then leads to values from 6 to 8 favoring the proliferation of pathogenic fungi and bacteria.

The altered epithelium of the vaginal mucosa, due to decreased production of glue, also compromises the function of support and support of the urinary tract, closely related to the vaginal morphology.

This condition influences the quality oi life of the woman only from all points of view, physical, psychological and social.



FEMALE REPRODUCER APPARATUS

OBSERVATIONAL STUDY

ATROPHY OF THE VAGINAL EPITHELIUM IN MENOPAUSE

Dr. Daniele Langella

The observational study was carried out by comparing the outcome of vaginal atrophy of the first THIN PREP with the outcome of a second THIN PREP performed in the fourth month after therapy with PLURIGIN ovules and PLURIGIN solution for three cycles of twelve days per month.

The sample of patients examined at the outpatient facility consisted of 70 postmenopausal women, married or cohabiting, aged between 55 and 65 years, complaining of vaginal disorders such as ***atrophy, dryness, dyspareunia, itching, burning, blood loss***. 58% of them avoided intimacy, 64% reported a loss of desire (libido), 64% reported feeling pain during intercourse.

The control with Pap Test in the liquid phase at the fourth month showed that 40% of patients obtained a significant improvement, from the ATROPHIC vaginal epithelium to the HYPOATROPHIC vaginal epithelium more suited to the chronological age, in addition to a significant improvement in all symptoms . Patients who were not diagnosed with a favorable evolution of genital trophism however reported zero blood loss, disappearance of burning pain and itching, in 56% of cases less painful sexual intercourse, in 41% a more satisfactory sex, in 29% a better sex life. For these patients it was recommended to continue the therapy for a further three months.

All patients were compliant.

OBSERVATIONAL STUDY THE CONCLUSIONS

The therapy based on **PLURIGIN ovules** and **PLURIGIN solution** significantly improves the disorders related to menopausal vaginal atrophy and intimate relationships of postmenopausal women.