**More than 75% of the people over age 65 have OA[1]**

*Marie,*

65 years old,
former florist,
suffers from

**knee osteoarthritis**

# OA IS NOT A REASON TO CHANGE HER LIFE

## PIASCLEDINE®300

300 mg AVOCADO AND SOYBEAN UNSAPONIFIABLES

**Symptomatic slow-acting treatment of osteoarthritis of hip and knee**

EXPANSCIENCE® LABORATOIRES

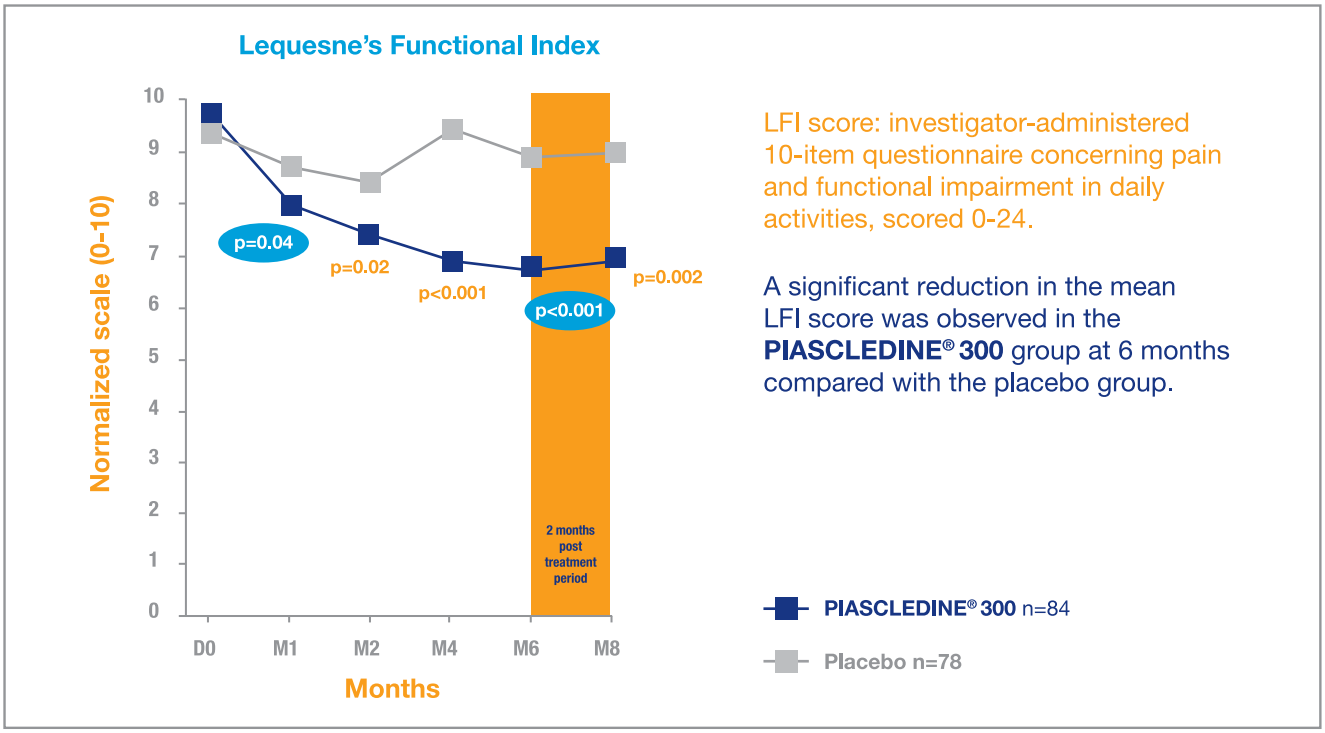
*Protecting your health through innovation*

# CLINICAL BENEFIT
# TO IMPROVE MOBILITY

*Marie,*

65 years old,
former florist,
**suffers from knee and recent hip osteoarthritis**

## PIASCLEDINE® 300, SIGNIFICANTLY REDUCES KNEE AND HIP OA SYMPTOMS BY DECREASING PAIN AND IMPROVING DISABILITY[2]




**Significant benefits after 1 month and continued for 2 months post treatment**

### Study design[2]

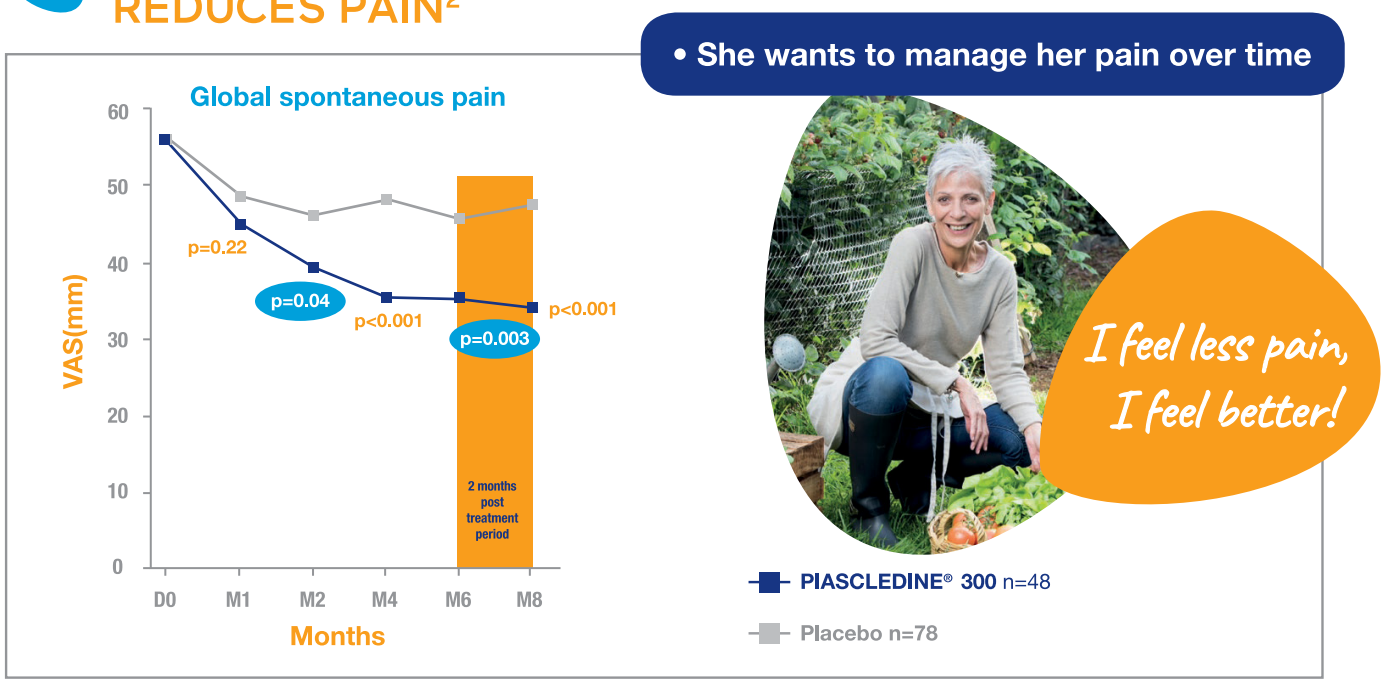
Prospective, randomised, double-blind, placebo-controlled, parallel groups, multicentre 8-month trial with a 6-month treatment period followed by 2-month post-treatment follow-up-164 patients with knee or hip OA were included.

### Primary endpoint

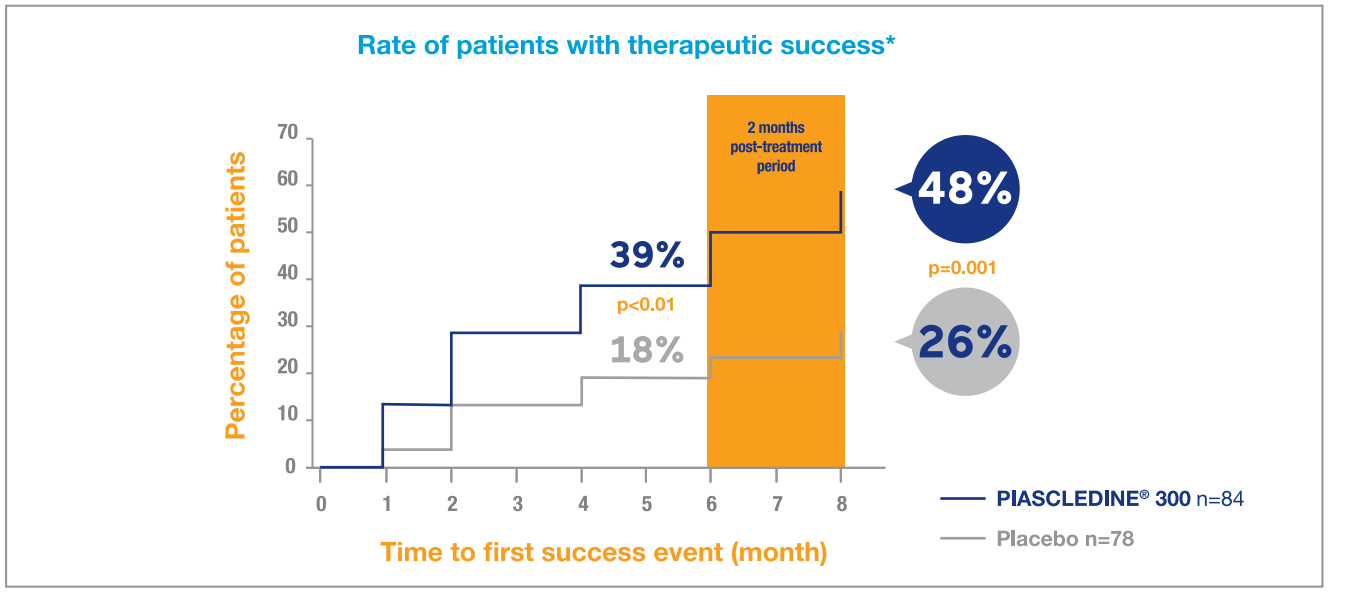
Change in Lequesne Functional Index (LFI) from baseline to month 6 between groups.

# CLINICAL BENEFIT TO RELIEVE PAIN

## PIASCLEDINE® 300, SIGNIFICANTLY REDUCES PAIN[2]




**Significant benefits after 2 months and continued for 2 months post treatment**




* Success defined as ≥50% improvement in pain and ≥30% improvement on Lequesne Functional Index versus baseline

**Success* rate : Significantly more patients treated with PIASCLEDINE® 300 experienced a relevant clinical improvement of their pain and disability**

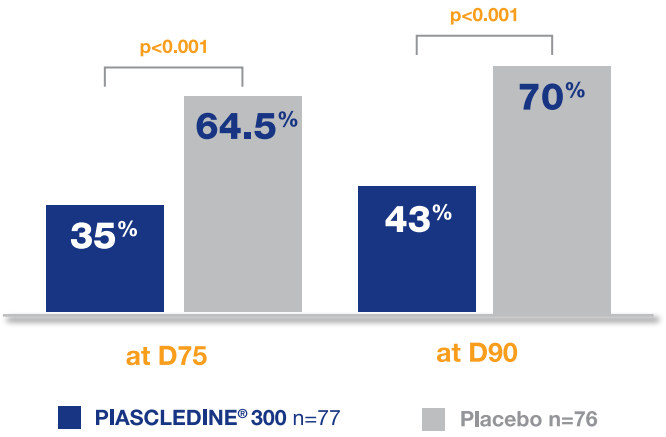
### Main secondary endpoints

Success rate*, overall spontaneous pain (VAS), overall functional disability (VAS) and safety.
Significantly more patients treated with **PIASCLEDINE® 300** experienced a relevant clinical improvement of their disability and pain.
Beneficial effects on pain and functional disability were significantly higher in **PIASCLEDINE® 300** group *versus* placebo group from month 2 and month 4 respectively up to month 6, increased overtime and persisted after treatment discontinuation (between months 6 and 8).

# CLINICAL BENEFIT TO REDUCE NSAIDs CONSUMPTION

## PIASCLEDINE® 300, SIGNIFICANTLY REDUCES THE USE OF NSAIDs[3]

**Rate of patients resuming NSAIDs (after the initial discontinuation at D45):**




**In PIASCLEDINE® 300 group, significantly fewer patients resumed NSAIDs**

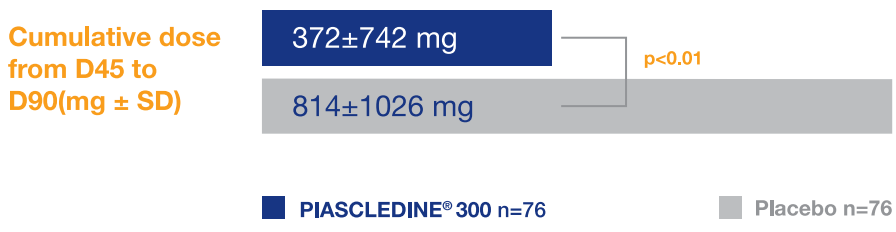
### Study design[3]

Prospective, phase III, multicenter, randomized, double-blind, placebo-controlled, parallel-group study. A total of 164 patients with knee or hip OA were included-all patients took 1 of 7 predefined oral NSAIDs during the first half of the study (D0-D45), were asked to stop at D45 and allowed to retake it if needed during the second half (D45-D90).

### Primary endpoint

Proportion of patients at D90 who resumed NSAID therapy after the first half of the study (D45). Significantly fewer patients resumed NSAIDs between D60 and D90 in the **PIASCLEDINE® 300** group than in the placebo group.

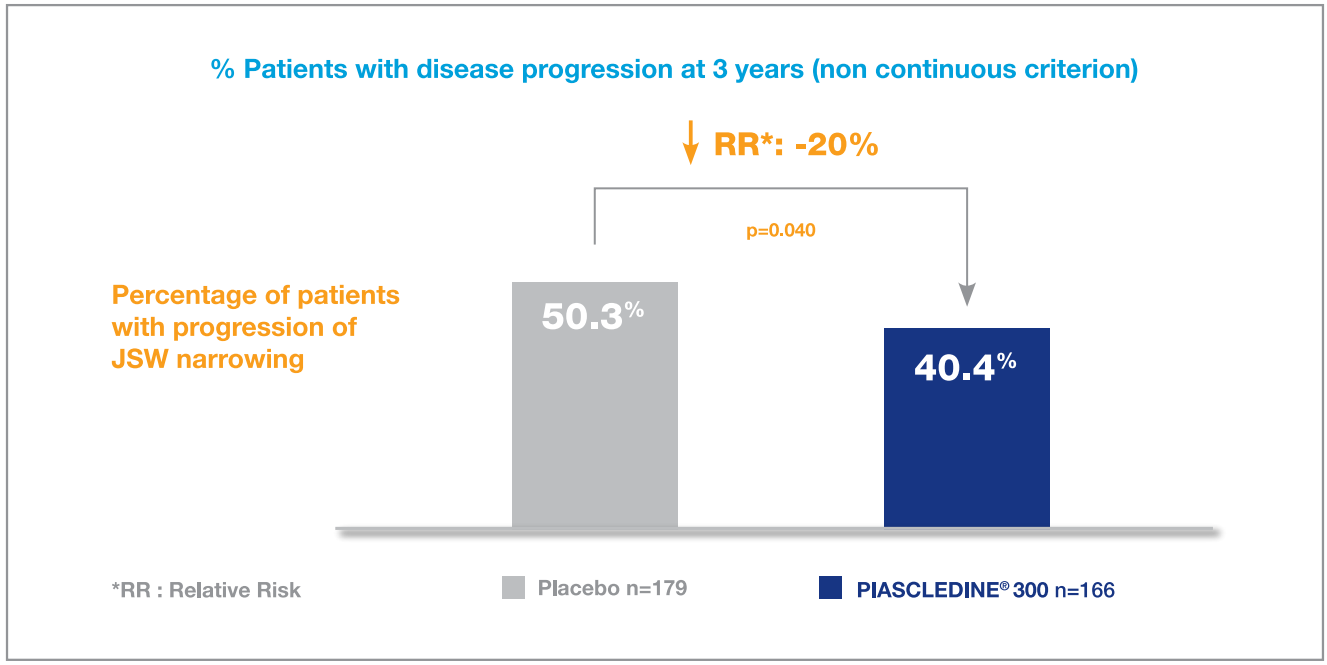
**Dose of NSAIDs**




Overall assessment of efficacy by patients and investigators on D90 were significantly better in the **PIASCLEDINE® 300** group compared to the placebo group.

# CLINICAL BENEFIT TO DELAY DISEASE PROGRESSION

## PIASCLEDINE® 300, SIGNIFICANTLY REDUCES DISEASE PROGRESSION[4]




**20% less patients with disease progression**

### Study design[4]

Prospective, multicentre, randomised, double-blind, parallel groups, placebo-controlled study-399 patients with hip OA were randomised to receive either **PIASCLEDINE® 300** or placebo once daily for 3 years.

### Primary outcome measurement

- Measurement of joint-space narrowing (JSW) on anteroposterior (AP) target hip were made respecting standardized protocol. Three views were taken at selection and then early: a pelvic front AP view, a target hip AP view and a target hip oblique view (false profile).
- All radiographic measurements of JSW were centralized.

### Primary endpoint

Change in hip JSW (target hip) between baseline and 3 years as measured on standard radiographs.

# PIASCLEDINE® 300, A UNIQUE ANSWER TO ALL YOUR THERAPEUTIC BENEFITS

- Unique composition
- Reduces pain[2]
- Improves mobility[2]
- Reduces concomitant NSAIDs consumption[3]
- Slows OA progression[4]
- Good safety profile[2,3,4]



The registration conditions of **PIASCLEDINE® 300mg** could differ internationally.
Please refer to your local SmPC of **PIASCLEDINE® 300mg** in force and approved by your local health authorities.

**1.** JA. Buckwalter, JA. Martin. Osteoarthritis. Advanced Drug Delivery Reviews 2006;58:150 - 167. **2.** Maheu E, *et al*. Symptomatic efficacy of avocado / soybean unsaponifiabes in the treatment of osteoarthritis of the knee and hip: A prospective, randomized, double-blind, placebo-controlled, multicenter clinical tril with a six-month treatment period and a two-month follow-up demonstrating a persistent effect. Arthritis Rheum 1998;41:81-91. **3.** Blotman F, *et al*. Efficacy and safety of avocado / soybean unsaponifiables in the treatment of symptomatic osteoarthritis of the knee and hip. A prospective, multicenter, three-month, randomized, double - blind, placebo-controled trial. Rev Rhum (Engl Ed) 1997;64:825-34. **4.** Maheu E, *et al.* Randomised, controlled tral of avocado / soybean unsaponifable (Piascledine) effect on structure modification in hip osteoarthritis: the ERADIAS study. Ann Rheum Dis 2014;73:376-84.

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