



THE VALUE OF

Wobenzym[®] PRODUCTS



Oral enzyme combination with two proteases and a flavonoid specifically targeted at patients with signs of musculoskeletal inflammation

WOBENZYM[®] IS A SYSTEMIC ENZYME AND FLAVONOID FORMULA WITH ANTI-INFLAMMATORY PROPERTIES USED TO REDUCE COMMON SYMPTOMS (SUCH AS PAIN AND SWELLING) IN PATIENTS WITH CHRONIC AND ACUTE INFLAMMATORY CONDITIONS



CLINICALLY EFFECTIVE
Evidence-based alternative and/or complementary treatment for improving symptoms of inflammation



SAFE FOR LONG TERM USE
Natural ingredients in Wobenzym[®] are established as safe for long-term use, with solid clinical evidence demonstrating superior safety profile compared to NSAIDs



GASTRIC PROTECTION
Formulated with specific encapsulation materials to efficiently protect active compounds in the gastric environment

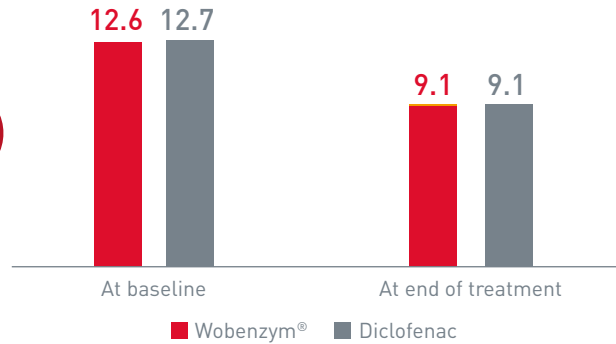


WOBENZYM® HAS COMPARABLE EFFICACY TO NSAID DICLOFENAC IN **CHRONIC** INFLAMMATORY CONDITIONS SUCH AS OSTEOARTHRITIS (OA), AND A SUBSTANTIALLY MORE FAVOURABLE SAFETY PROFILE,¹⁻⁵ MAKING IT PARTICULARLY SUITABLE FOR LONG-TERM USE



Wobenzym® demonstrated efficacy in reducing joint pain and functional disability in OA

Significant reduction in the LAFL score* with Wobenzym®,² comparable to diclofenac



- ✓ Significantly fewer patients with treatment-related adverse events vs diclofenac (p=0.021)
- ✓ Significantly less changes in key hepatic enzymes and hematocrit, hemoglobin and erythrocyte count vs diclofenac (p<0.001)
- ✓ Lower risk of treatment discontinuation compared to NSAID diclofenac (p=0.03)



Wobenzym® has superior tolerability, safety profile and lower risk of treatment-emergent adverse events compared to diclofenac²

Symptoms of inflammation in OA harm physical health⁶⁻¹¹

- ↑ Physical disability
- ↑ Risk of falls
- ↑ All-cause mortality

- ↑ Sleep disturbances
- ↑ Depression
- ↑ Anxiety

Symptoms of inflammation impair quality of life¹²⁻¹⁵

By significantly improving functional disability, mobility, and pain,² Wobenzym® has a role in improving quality of life of patients with OA

*The LAFL is an internationally used validated patient questionnaire for the self-assessment of OA-related joint pain and functional disability in daily life, comprising three sections on the severity of pain, walking ability, and physical function. A lower value corresponds to an improvement. Abbreviations: LAFL score, Lequesne-Algo functional index score; NSAIDs, non-steroidal anti-inflammatory drugs; OA, osteoarthritis



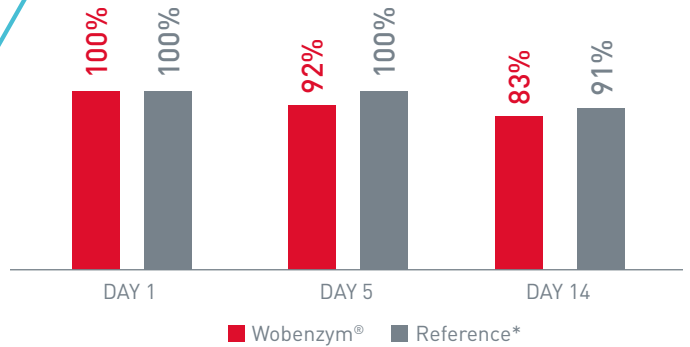
WOBENZYM® IS AN EFFECTIVE AND SAFE ADJUVANT TREATMENT OF THE SYMPTOMS ASSOCIATED WITH **ACUTE INFLAMMATION**

Active ingredients in Wobenzym® help shorten the sequelae of inflammation after surgery

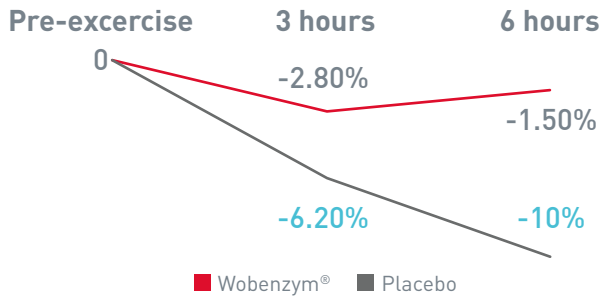
+ Supports faster decrease in swelling^{16,18-20}

+ Controls postoperative pain¹⁷

Continuous, faster edema reduction with Wobenzym®¹⁶



Physical performance returned to baseline at 24 hours with Wobenzym®²¹

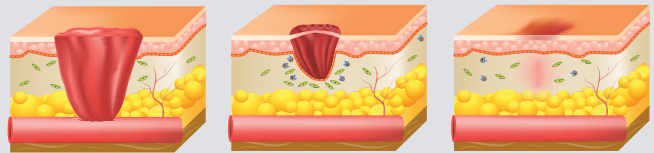


Wobenzym® use supports a faster recovery after accidental muscle or soft tissue trauma due to sports

+ Reduces muscle and soft tissue pain²²

+ Preserves muscle strength²¹

Proteolytic enzymes in Wobenzym® enhance and accelerate the natural immune response and inflammatory processes, strengthening the self-healing processes



SYMPTOMS OF ACUTE INFLAMMATION CAUSE LONG-LASTING DISCOMFORT, LOSS OF FUNCTION, AND DECREASED MOBILITY, WHICH HARM SOCIAL WELL-BEING AND DELAY RETURN TO WORK AND SPORTS²³⁻²⁸

BY REDUCING PAIN AND SWELLING, WOBENZYM® SUPPORTS A FASTER RETURN TO WORK AND TRAINING ACTIVITIES AFTER TRAUMA AND MAY IMPROVE QUALITY OF LIFE AND SOCIAL WELL-BEING^{16,18-20}

*Open trial conducted on Phlogenzym which has the same composition as Wobenzym® with regards to active ingredients. Reference comparator was a standard anti-oedematous drug based on aescin

NSAIDs ARE COMMONLY USED TO MANAGE THE SYMPTOMS OF CHRONIC AND ACUTE INFLAMMATION, BUT CAN BE ASSOCIATED WITH SEVERE SIDE-EFFECTS, PARTICULARLY WITH LONG-TERM USE

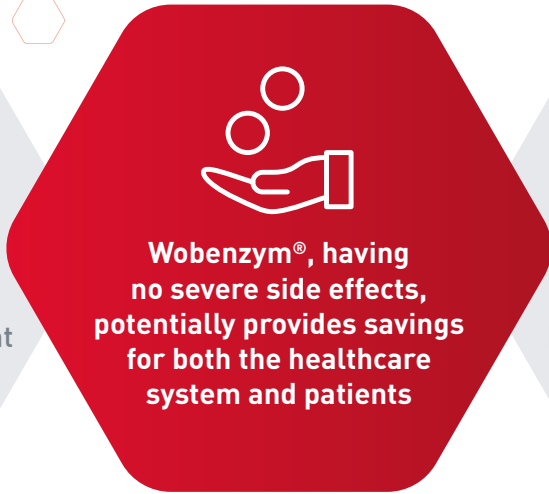


The chronic use of NSAIDs is associated with an increased risk of gastrointestinal and cardiovascular complications,²⁹⁻³² which are extremely costly to prevent and manage^{32,33}

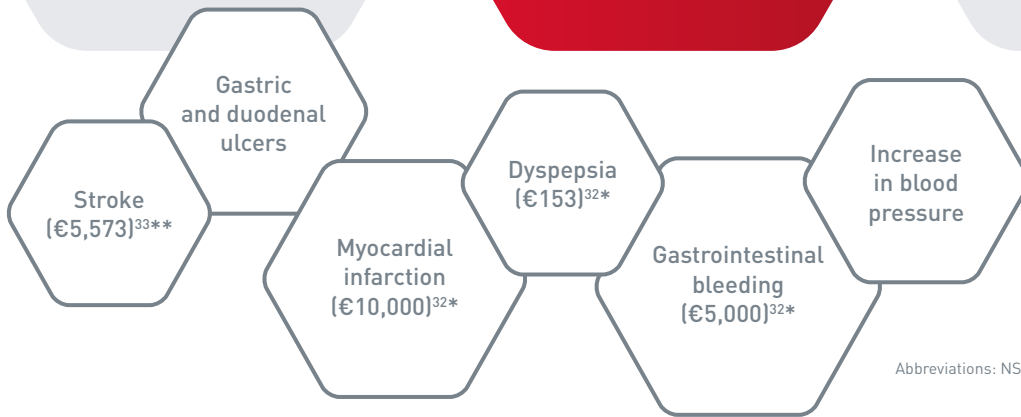


NSAIDs can be detrimental to the post-injury natural healing process^{26,34}

NSAIDs use may be associated with extended healing times in post-surgical settings^{21,35,36}



Wobenzym[®], having no severe side effects, potentially provides savings for both the healthcare system and patients



*Cost for event, Ireland, 2020
**Cost for event (hospitalization), Italy, 2012.
Abbreviations: NSAIDs, non-steroidal anti-inflammatory drugs

REFERENCES

- Bolten W.W., *et al.*, J. Arthritis 2015; p. 251521.
- Ueberall M.A., *et al.*, J. Pain Res.2016; 9:941-961
- Tilwe G. *et al.*, JAPI 2001;49: 617-621
- Akhtar N. *et al.*, Clin Rheumatol 2004;23(5) 410-5
- Klein G. *et al.*, Clin Exp Rheumatol, 2006;24(1):25-30
- Palazzo C *et al.*, Ann Phys Rehabil Med 2016; 59(3) 134-138
- Nuesch E *et al.*, Bmj 2011; 342
- Woolf A *et al.*, Bulletin of the who 2003;81 646-656
- Barbour K *et al.*, Arthritis Rheumatol 2015;67(7) 1798-805
- Gretebeck KA, *et al.*, J Phys Act Health. 2019;16(6):461-469.
- Boonen S, *et al.*, Osteoporos Int. 2004;15(2):87-94
- Litwic A *et al.*, British medical bulletin, 2013. 105(1): p. 185-199.
- Kolasinski *et al.*, Arthritis Care Res ,2020. 72(2): p. 149-162.
- Conaghan, P.G., *et al.*, Rheumatology, 2015. 54(2): p. 270-277.
- Gore, M. *et al.*, J Med Econ, 2011. 14(4): p. 497-507.
- Kameníček V, *et al.*, Acta Chir Orthop Cech. 2001;68(1):45-49.
- Tavares-Mendes *et al.*, Medi, patalog y cirugia 2019;24(1) 61
- Brown S. *et al.*, Plast Reconstr Surg 2019;114(1) 237-44
- Golezar S, Iranian Red Crescent Medical Journal 2016;18(3)
- Shetty V., J. of Oral and Maxill. Surgery 2013;71(1) 1261-1267
- Marzin,T. *et al.*, Esm. BMJ Open Sport & Ex. Medi.2017.2(1)
- Baumuller M, Prakt. Sport-Traumat. Sportmed 1994;10 171-178
- Phillips C *et al.*, J. oral and maxill. Surg. 2008;66(10) 2110-2115
- Yaedu R *et al.*, Edema-Diagnosis and Treatment 2018
- Stephens J. *et al.*, Rheumatology 2003;42(3)
- Guo S., Journal of dental research 2010;89(3) 219-229
- Moreira N. *et al.*, Apunts. Med.Esport 2014;49(184) 123-138
- Ardern C *et al.*, British j. of sports med.2016;50(14) 853-864
- Brooks P. Am J Med 1998;104(3a) 9S-13S; 21S-22S
- Roth S *et al.*, Arch Intern Med 1987;147(12) 2093-100
- Trelle S *et al.*, BMJ 2011;342 c7086
- Moriarty F *et al.*, BMJ open 2019;9(1)
- Fattore G *et al.*, BMC Neurol 2012;12 137
- Khalil H *et al.*, Inter. wound j. 2017;14(6) 1340-1345
- Urso M.I. J Appl Physiol 2013; 115(6) 920-8
- Tscholl P.M. Dtsch Z Sportmed 2014;65(2) 34-37

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