



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

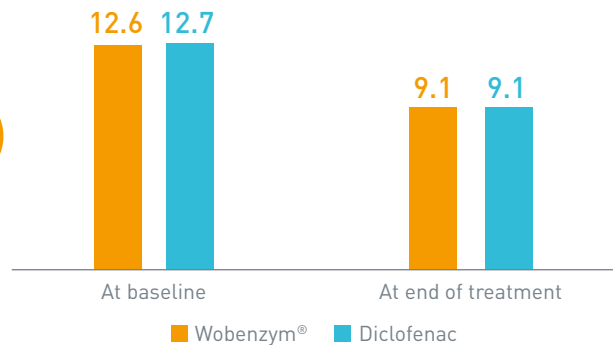


WOBENZYM® HAS COMPARABLE EFFICACY TO NSAID DICLOFENAC IN **CHRONIC INFLAMMATORY CONDITIONS SUCH AS OSTEOARTHRITIS (OA), AND A SUBSTANTIALLY MORE FAVOURABLE SAFETY PROFILE,¹⁻⁵ MAKING IT PARTICULARLY SUITABLE FOR LONG-TERM USE**



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

Significant reduction in the LAFI 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



↑ Physical disability

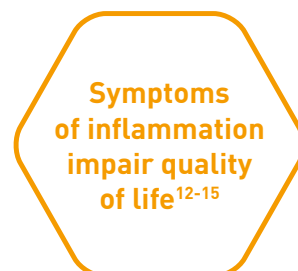
↑ Risk of falls

↑ All-cause mortality

↑ Sleep disturbances

↑ Depression

↑ Anxiety



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

*The LAFI 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: LAFI score, Lequesne-Algo functional index score; NSAIDs, non-steroidal anti-inflammatory drugs; OA, osteoarthritis



Acute
inflammation

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



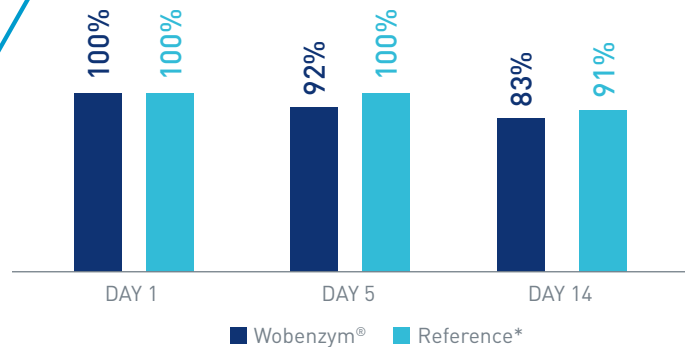
Supports faster
decrease in
swelling^{16,18-20}

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

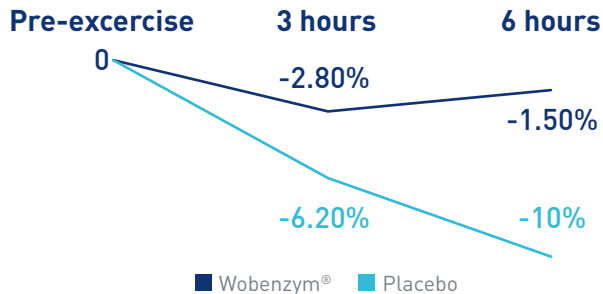


Controls
postoperative
pain¹⁷

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

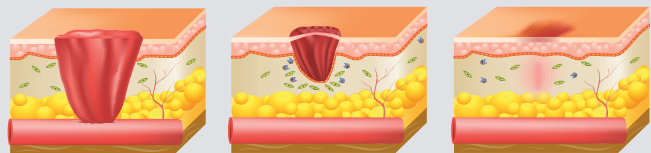


Reduces
muscle and soft
tissue pain²²



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}



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



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}

Gastric and duodenal ulcers

Stroke (€5,573)^{33**}

Myocardial infarction (€10,000)^{32*}

Gastrointestinal bleeding (€5,000)^{32*}

Increase in blood pressure

Dyspepsia (€153)^{32*}

*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
- Wolf 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.
- Kamenicek V, *et al.*, Acta Chir Orthop Cech. 2001;68(1):45-49.
- Tavares-Mendes *et al.*, Medi, patol og 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

July 2021
Wobenzym®



Valid Insight, Kemp House 152 City Road,
London, EC1V 2NX, United Kingdom

©2021 Nestlé Health Sciences

All rights reserved throughout the world and in all languages. No part of this publication may be reproduced, transmitted or stored in any form or by any means either mechanical or electronic, including photocopying, recording, or through an information storage and retrieval system, without the written permission of the copyright holder.

Although great care has been taken in compiling the content of this publication, Valid Insight is not responsible or in any way liable for information contained or for any errors, omissions or inaccuracies, or for any consequences arising therefrom. Provided as a service to healthcare professionals by Nestlé Health Science HQ, Switzerland.

Scientific information for Health Care Professionals only
www.nestlehealthscience.com