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Duphaston advertisement.

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50 nurses with incapacitating dysmenorrhea...

and what
a double-blind study
demonstrated*

*Aydar, C. K., M.D., FA.C.O.G., and Coleman, B., M.D.: From the Department of Obstetrics and Gynecology, Medical College of Georgia, Augusta, Georgia. Treatment of Primary Dysmenorrhea. A Double-Blind Study. To be published.





The Study: The subjects were 50 nurses and student nurses at the Medical College of Georgia hospitals. Each had severe symptoms of dysmenorrhea causing absence from duty. Medications, consisting of 10 mg. tablets of DUPHASTON (dydrogesterone) and tablets of placebo, all identical in appearance, were dispensed in a randomized manner in a double-blind procedure. One tablet was taken in the morning, and one at bedtime, from the 5th to the 25th day of the cycles. The degree of symptomatic relief was reported as: none, some, or complete. There were 148 cycles for the DUPHASTON (dydrogesterone) group, and 150 cycles for the placebo group available for analysis. Patients were permitted to take an analgesic if they felt they needed it.

The Results:

Medication	Complete Relief	Number of Cycles Some Relief	No Relief
Placebo	10	31	109
DUPHASTON (dydrogesterone)	85	62	1

There was greater relief of symptoms with DUPHASTON (dydrogesterone) with each succeeding cycle, while there was a decreasing response in the placebo group. The cycles became regular in the DUPHASTON (dydrogesterone) group, and an analgesic agent was taken during only three out of 148 cycles. In the placebo group, an analgesic was taken during 122 out of 150 cycles prior to or during menses.

The Conclusions: "It is the authors' experience that severe primary dysmenorrhea may be treated effectively by dydrogesterone alone as described above ... particularly, in those instances when the patient cannot tolerate estrogens and other progestational agents because of their more severe side effects."

Supplied: In 10 mg. scored tablets.

Dosage: 10 mg. in the morning, and 10 mg. at bedtime, from day 5 through day 25.

Precautions: Before hormonal treatment is contemplated in patients with excessive or abnormal uterine bleeding, the cause of such bleeding should be determined.

Contraindications and Side Effects: There are no known contraindications. There have been no adverse effects on the hepatic, renal, or hemopoietic systems. Nausea, diarrhea, and constipation have rarely been reported, and have not required withdrawal of the drug. No corticosteroid activity has been reported.

Oral **Duphaston**[®] Tablets
(Dydrogesterone)

"First with the Retro-Steroids"

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