

## SARSDG 2.34 g

**For the use of a Registered Medical Practitioner or a Hospital or a Laboratory Only**

Abbreviated Prescribing information for SARSDG

(2-Deoxy-D-Glucose oral powder 2.34 g)

[Please refer the complete prescribing information for details].

### PHARMACOLOGICAL PROPERTIES:

**Mechanism of Action:** The mechanism of action of SARSDG in the treatment of COVID-19 is unknown. Enhanced glycolysis is a basic need for viral replication in host cells. Based on this fact, intervention at the level of virus-induced host cell metabolism is a promising target to inhibit the viral reproduction and progression of disease. SARSDG is a synthetic analogue of glucose, which blocks glycolysis at the initial stage and causes depletion of ATP as well as glucose derivatives required for protein glycosylation. It also inhibits anabolic reprogramming of host cells, which is essentially required for fast viral multiplication. SARSDG-induced inhibition of viral envelope biosynthesis and virion assembly due to blocked glycosylation of membrane proteins also appear to be alternate mechanisms for virus attenuation. Moreover, this molecule selectively accumulates more in virally infected cells due to high glucose demand of these cells.

**INDICATIONS:** SARSDG is indicated as an adjunct therapy only in moderate to severe COVID-19 patients.

**DOSAGE AND ADMINISTRATION:** The recommended total daily dosage of SARSDG is 90 mg/kg body weight/given orally in two equally divided doses with an interval of at least 12 hours between doses. Dissolve entire content in 100 ml of drinking water and administer to patient as per body weight and instruction provided.

**CONTRAINDICATION:** Patients with known hypersensitivity to SARSDG or any of its analogs such as fluoro deoxy glucose should not take SARSDG. Other contraindications include pregnancy and lactation.

**WARNINGS & PRECAUTIONS:** *Hyperglycaemia:* The blood glucose level has been observed to increase after SARSDG administration, in clinical trials. The blood glucose level returned to normal within 4 to 6 hours post administration, as observed in phase III clinical trial in patients with Glioblastoma Multiform. Hence, caution should be exercised while administering SARSDG in diabetic patients and anti-diabetic medication may need adjustment. Daily random blood sugar monitoring is recommended as long as patient receives SARSDG. *Patients with Hepatic or Renal Impairment:* In Phase III clinical trial in patients with Glioblastoma Multiform, a few patients had altered levels of AST (SGOT) and ALT (SGPT) though not clinically significant. There were no cases with abnormal values in serum creatinine and serum urea. It is advisable to exercise caution while administering SARSDG to patients with hepatic or renal impairment. *Pregnancy and Lactation:* Safety of SARSDG administration in pregnant and lactating women has not been established. Therefore, SARSDG is not indicated for use in pregnant and lactating women.

**DRUG INTERACTIONS:** Insufficient data available to conclude on drug-drug interactions of SARSDG with other drugs.

**ADVERSE REACTIONS:** Palpitations, Sinus tachycardia, Pain, Electrocardiogram QT prolonged, Electrocardiogram T wave inversion, Limb discomfort, Ageusia, Headache, nausea, vomiting, dizziness, hyperglycemia, abdominal pain, diarrhea and fatigue, Acute respiratory distress syndrome, Cough, Hypoxia, Nasal congestion, Hyperhidrosis, Skin and subcutaneous tissue disorder.

**MARKETED BY:**



**TORRENT PHARMACEUTICALS LTD.**

Torrent House, Off Ashram Road,  
Ahmedabad-380 009, INDIA

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(Additional information is available on request)