

Effective relief from dry mouth

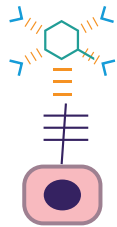
Mucosamin® forms a soothing layer to hydrate the oral mucosa and relieve symptoms of dry mouth.

mucosamin
Sodium hyaluronate + amino acids
glycine, L-proline, L-leucine and L-lysine HCl



Adhesion

- Hyaluronic acid (HA) has mucoadhesive properties and binds to proteoglycans on the surface of oral epithelial cells through the formation of hydrogen bonds and electrostatic interactions¹.



Hydration

- HA binds to water in the mouth through the formation of hydrogen bonds with water molecules^{2,3}
- Increased levels of HA associated with greater saliva production⁴
- HA modulates tissue hydration and osmotic balance²

KEY



epithelial cell



proteoglycan



hydrogen bond



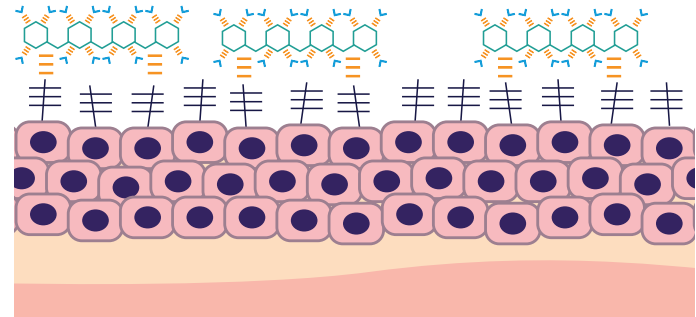
HA



water

Relief

- Due to the mucoadhesive and hydrating properties of HA, moisture is retained in the mouth to provide relief of symptoms.



Supporting Evidence

- Studies have indicated that low levels of hyaluronic acid are linked to less production of saliva. Therefore an increase in hyaluronic acid may initiate saliva production⁴.
- Hyaluronic acid is a hygroscopic molecule, meaning it readily absorbs water².

Mucosamin® Mouthwash and Mucosamin® Oral spray



The Oral Health Foundation recognises that Mucosamin® Mouthwash and Oral Spray are useful in helping to relieve the symptoms of dry mouth and oral mucositis, and promote the healing of the oral mucosa.

Soothing mouthwash to help coat and hydrate the oral mucosa as part of your daily dental routine.



Convenient spray for hydration and relief when, and where it's needed. Also for targeted relief of lesions caused by oral dryness.

Mucosamin® Mouthwash and Mucosamin® Oral Spray can be used together for convenient and effective relief.

Mucosamin® Mouthwash and Mucosamin® Spray (Sodium hyaluronate and synthetic amino acids - glycine, L-Proline, L-Leucine, L-Lysine HCL) Prescribing Information

Presentation: Mouthwash Topical oral solution Spray Topical fluid gel **Indications:** Mouthwash At start of radiological therapy or chemotherapy to help reduce incidence of oral mucositis; treatment of oral mucositis due to radiotherapy or chemotherapy; ulcerative pathologies of oral cavity (e.g. pemphigus, pemphigoid, erosive lichen planus); recurrent aphthous stomatitis; following surgical operations on tongue and oral mucosa; burning mouth syndrome. Spray Oral mucositis due to radiotherapy or chemotherapy. **Dosage and method of use:** Mouthwash Pour 5-10 ml into mouth, distributing product evenly throughout oral cavity and keeping in mouth for at least one minute. Use 3 or 4 times a day. Do not rinse after treatment. For rear sections of oral cavity, product can be gargled. May be diluted with water, according to severity of symptoms. Spray Apply uniform layer into oral cavity by repeatedly spraying until the entire affected area is covered, 3 or 4 times a day according to severity of symptoms. **Contraindications:** Known hypersensitivity to ingredients. No reports of side effects or interactions with drugs or medicinal substances. No known secondary effects during pregnancy and breastfeeding; use at physician's discretion. **Legal category:** Class IIa Medical Device.

Cost: Mouthwash £19 for 250ml bottle. Spray £19 for 30ml spray nozzle bottle. **CE number:** CE 0373. **Manufacturer:** Professional Dietetics S.p.A. - Via Ciro Menotti, 1/A - 20129 Milan - Italy **Distributor:** Aspire Pharma Ltd, Unit 4, Rotherbrook Court, Bedford Road, Petersfield, Hampshire GU32 3QG, UK. **Date last reviewed:** October 2020. **Version number:** 1010461476 v 2.0

References

1) Walicova, V. et al. (2016) The influence of hyaluronan addition on thickness, weight, uniformity of mass and water content of mucoadhesive films. Czech and Slovak Pharmacy, 65(3); 94-98. 2) Mariggio MA et al. Enhancement of fibroblast proliferation, collagen biosynthesis and production of growth factors as a result of combining sodium hyaluronate and amino acids. Int J Immunopathol Pharmacol 22: 485-492, 2009. 3) Manasa, M. et al. (2012) A Review of Hyaluronic Acid. Int. J. Res. Chem. Environ, 2(4); 6-11. 4) Higuchi, Y. et al. (2009) Salivary levels of hyaluronic acid in female patients with dry mouth compared with age-matched controls: a pilot study. Biomedical Research, 30(1): 63-68

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Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Aspire Pharma Ltd on 01730 231148.

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