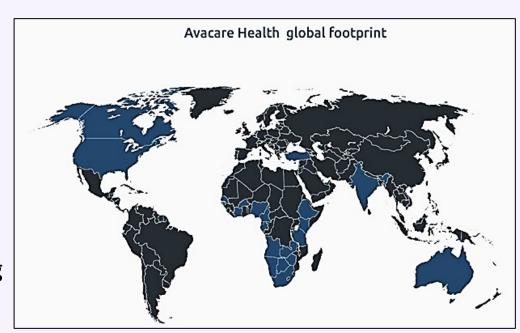


## **About us:**

Augusta was formed in 2002 as Sky Pharmaceuticals (Zambia) limited. Augusta pharmaceuticals has earned a reputable household name for housing the industry's most extensive and specialized services & specializes in the supply of pharmaceuticals drugs, medical devices, medical equipment's and other medical consumables. Our endeavor is to reach & provide the best services to further empower the medical institutions in our nations

Augusta is a part of the Avacare Health Group,
Avacare Health is an integrated healthcare group serving
the African region and beyond, The inception of
Avacare Health was done in 1996 with the vision
to make a difference to the people of Africa.

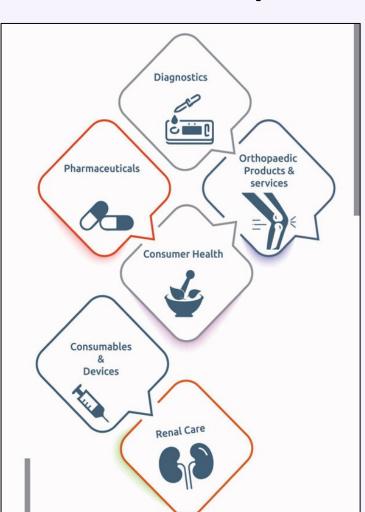
Our panoramic approach enables us to focus on a wider Out-reach while maintaining the quality of our service including installations, training, maintenance & product delivery



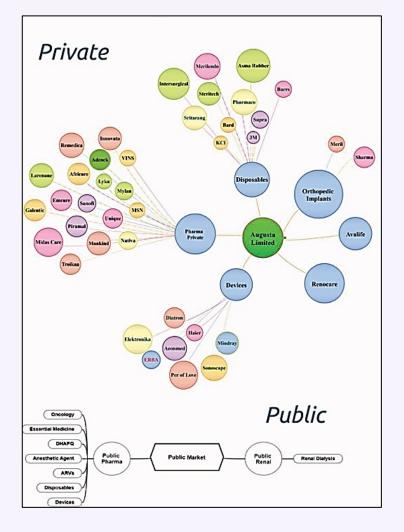
# provides Integrated Innovative & Holistic Health Solutions in

# **Various Disciplines**

augusta



# & Key Partners





with



an avacarehealth company

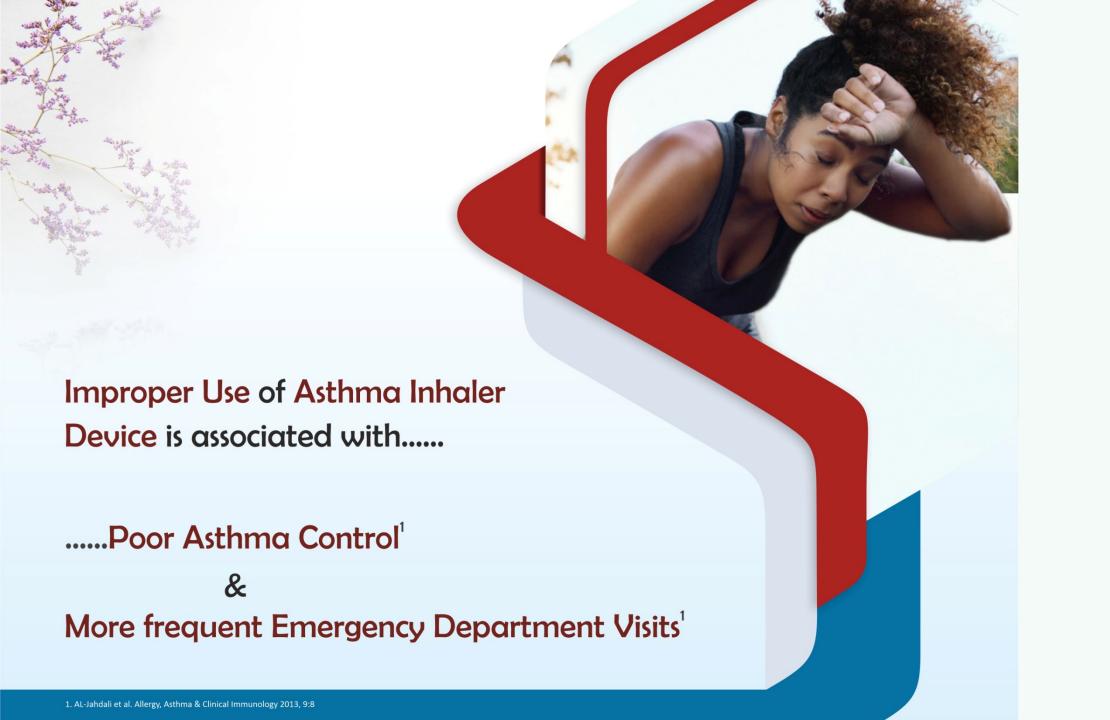
Presents to You

# Avacort-BF

Budesonide 100 mcg + Formoterol 6 mcg Budesonide 200 mcg + Formoterol 6 mcg Budesonide 400 mcg + Formoterol 12 mcg



Now Available for the First Time in Zambia...



# Avacort-BF

Budesonide 100 mcg + Formoterol 6 mcg Budesonide 200 mcg + Formoterol 6 mcg Budesonide 400 mcg + Formoterol 12 mcg

## "The Patented Device"

Which offers Ease of Use<sup>1</sup>

Higher Preference<sup>3</sup> & Greater Patient Satisfaction<sup>1</sup>



Demonstrates
Lowest Number of
Critical Handling
Errors<sup>1</sup>

Backed with

Extensive Real World Clinical Evidence

1



Budesonide 400 mca + Formoterol 12 mca

GINA\* guideline recommends ICS# — Formoterol in Asthma
As Preferred Controller & Reliever to Reduce Risk of Serious Exacerbations & Control of Symptoms¹

Budesonide/formoterol delivered via the Avacort-BF Elpenhaler®

### Offers Ease of Use



- Easy to use Does not require coordination between inhalation & device actuation unlike Pressurized Metered Dose Inhalers (pMDI)<sup>2</sup>
- Easy to count remaining dose by counting the Strips<sup>2</sup>
- Unique dual verification Visual & Taste for dose uptake<sup>2</sup>



<sup>1.</sup> Global Initiative for Asthma. Global Strategy for Asthma Management and Prevention, 2022. Available from : www.ginasthma.org 2.Bouros D. et al., J Pulm Respir Med 2016, 6:4



Budesonide 100 mcg + Formoterol 6 mcg Budesonide 200 mcg + Formoterol 6 mcg Budesonide 400 mcg + Formoterol 12 mcg

GINA\* guideline recommends ICS# — Formoterol in Asthma
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Budesonide/formoterol delivered via the Avacort-BF Elpenhaler®

According to,

Critical Steps Real Life Study - Compared to other DPIs\*\* devices<sup>2</sup>



Demonstrates Lowest Number of Critical Handling Errors<sup>2</sup>

Offers better adherence to therapy...Leads to improved disease control<sup>2</sup>



<sup>1.</sup> Global Initiative for Asthma. Global Strategy for Asthma Management and Prevention, 2022. Available from : www.ginasthma.org 2.Bouros D. et al., J Pulm Respir Med 2016, 6:4



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According to,

**PAIR - Real Life Study** - Compared to other DPIs\*\* devices



Has Higher Preference<sup>2</sup>





Budesonide 100 mcg + Formoterol 6 mcg Budesonide 200 mcg + Formoterol 6 mcg Budesonide 400 mcg + Formoterol 12 mcg

GINA\* guideline recommends ICS# — Formoterol in Asthma
As Preferred Controller & Reliever to Reduce Risk of Serious Exacerbations & Control of Symptoms¹

Budesonide/formoterol delivered via the Avacort-BF Elpenhaler®

According to,

ANASA Real Life Study - Compared to other DPIs\*\* devices



Has Greater Patient Satisfaction<sup>2</sup>

Consistent Higher Score in FSI##10—Questionnaire<sup>2</sup>



<sup>1.</sup> Global Initiative for Asthma. Global Strategy for Asthma Management and Prevention, 2022. Available from: <a href="https://www.ginasthma.org">www.ginasthma.org</a>

<sup>2.</sup> Zervas et al. Intern. J. COPD, 2016; 11:1845-1855



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GINA\* guideline recommends ICS# — Formoterol in Asthma
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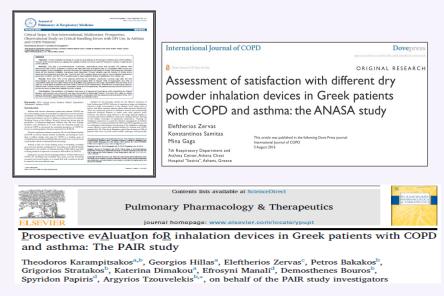
## Budesonide/formoterol delivered via the Avacort-BF Elpenhaler®

Avacort-BF Elpenhaler \*-Backed with Extensive Clinical Research Studies1



| Elpenhaler <sup>®</sup> Evidence from<br>Real life Studies |                   |
|--|-------------------|
| 1. CRITICAL STEPS STUDY                                    | 2. ANASA STUDY    |
| 3. PAIR STUDY  | 4. AEOLOS STUDY   |
| 5. BOREAS STUDY  | 6. COMPLETE STUDY |
| 7. RETRIEVE STUDY  | 8. SKIRON STUDY   |
| 9. AHEAD STUDY   |                   |

- ✓ 12 publications in peer reviewed journals
- ✓ >31 posters in European conferences
- √ 3 oral presentations in International conferences (WAM-ERS)



# **Our Cardiac Range**





#### In

- Treatment of Deep Vein Thrombosis (DVT) & Pulmonary Embolism (PE)
- Prevention of recurrent Deep Vein Thrombosis (DVT) and recurrent Pulmonary Embolism (PE)
- Prophylaxis of DVT undergoing knee or hip replacement surgery & nonmajor orthopaedic surgery
- Prophylaxis of Venous Thromboembolism (VTE) in acutely ill medical patients

Presenting,



Rivaroxaban 10 mg Tablets Rivaroxaban 15 mg Tablets Rivaroxaban 20 mg Tablets

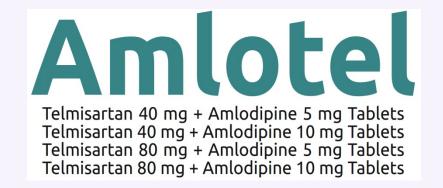
### Predictable pharmacokinetics and pharmacodynamics compared to Warfarin<sup>1</sup>

- No need for laboratory monitoring
- Wide therapeutic window
- Low drug—drug and food interactions No dietary restriction
- No risk for induced skin necrosis due to rapid onset can be initiated without LMWH
- Effective, safe, single-drug approach to the initial and continued treatment of Venous Thrombosis<sup>2</sup>
- Predictable pharmacokinetics and pharmacodynamics relative to warfarin<sup>1</sup>
- 1. Mekaj YH, et al. Ther Clin Risk Manag. 2015 Jun 24; 11:967-77.
- 2. EINSTEIN Investigators, Bauersachs R, et al. N Engl J Med. 2010 Dec 23; 363(26):2499-510.





# As first-line treatment, or for patients whose BP is not adequately controlled with Amlodipine alone





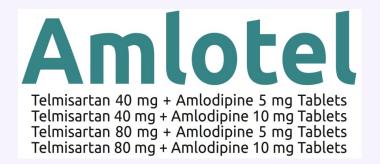












## Fixed Dose Combination provides

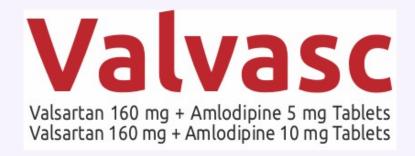
- ☐ Complementary and synergistic mode of action¹
- Significantly greater double-digit BP reductions than amlodipine monotherapy<sup>1</sup>
- ☐ Majority of the BP reduction observed within the first 2 weeks of treatment²
- ☐ Improved tolerability ensures patient compliance³
- ☐ Effective across hypertensive populations including those with high CV risk<sup>4</sup>







# In stage 2 hypertensives with high risk of stroke and MI In hypertensive patients with stroke, uncontrolled on monotherapy



### Protects against cardiovascular and renal Morbidity & Mortality

Indicated in hypertensives
uncontrolled on monotherapy or
patients stabilized on valsartan and
amlodipine as separate drugs









# In stage 2 hypertensives with high risk of stroke and MI In hypertensive patients with stroke, uncontrolled on monotherapy



### Gain the benefits of 2 highly effective and well-tolerated antihypertensives

### Valsartan & Amlodipine as individual drugs given as monotherapy:

- Reduces cardiac morbidity and mortality
- Lowers fatal strokes and non-fatal strokes & MI
- Reduces the risk of hospitalizations for heart failure
- Powerful BP lowering with dual action
- Favourable safety profile









## Patients with high risk of CVD\*



### Provides higher BP control rates

Indicated in patients whose blood pressure has been stabilized at the same dosage of the individual components given together

- Provides higher BP control
- Efficacious in a wide variety of patient subpopulations
- Well tolerated in hypertensive patients with CV risk
- Improves treatment adherence



# Benefits beyond optimal blood pressure control... cardioprotective effect

Indicated for the treatment of mild to moderate hypertension, either alone or in combination with hydrochlorothiazide

- Unique features compared to other ARBs
- Ensures sustained BP control
- Benefits beyond BP control
- Reduces CV risk
- Backed with strong clinical evidence

# **Our Pain Management Brand**









- **Acute Gouty arthritis**
- Osteoarthritis (OA) Rheumatoid arthritis (RA)
  - Primary Dysmenorrhea









### Offer distinct advantages

- Rapid onset of action (approx. 24 min)<sup>1</sup>
- Long Half-life Convenient once-daily regimen<sup>2</sup>
- Most selective COX-2-selective inhibitors<sup>2</sup>
- Lower rates of discontinuations due to GI adverse effects<sup>1</sup>
- Comparable CV risk with traditional NSAIDs<sup>2</sup>











