Variopepty 8 1 3.75 mg 0.1 mg

Triptorelin Acetate

Variopeptyl for Test & Treatment CPP

Swiss Made API



Central Precocious Puberty (CPP)

Central Precocious Puberty is defined as the onset of secondary sexual characteristics, before the age of eight years in girls and nine years in boys¹. CPP is caused by early activation of the hypothalamic-pituitary gonadal (HPG) axis which results in excess secretion of sex hormones. CPP is a rare condition that affects 1 in every 5,000 to 10,000 children². The GnRH agonists are the approved choice for CPP treatment.

Variopeptyl® 3.75 mg Triptorelin acetate

Variopeptyl® 3.75 mg is a GnRH agonist used to treat children with CPP. Variopeptyl® 3.75 mg for one month administration provides the effective suppression of gonadotropin and gonadal steroid secretion.

Leupromer® 3.75 and 7.5 mg Leuprolide acetate

Leupromer® is a GnRH agonist. Leupromer® 3.75 and 7.5 mg for one month administration are indicated in the treatment of children with central precocious puberty (CPP).

- One month administration
- Subcutaneous injection
- ► No surgery needed

During the early phase of therapy, gonadotropins and sex steroids rise above baseline because of the initial stimulatory effect of the drug. An increase in clinical signs and symptoms of puberty may be observed.

Psychiatric events have been reported in patients taking GnRH agonists. Events include emotional lability, such as crying, irritability, impatience, anger, and aggression. Monitor for development or worsening of psychiatric symptoms during treatment.

Confirm diagnosis of CPP

Variopeptyl® 0.1 mg

Prior to initiation of treatment, Varipeptyl® 0.1 mg is used as confirmation test for CPP. Before injection, measure serum concentrations of FSH, LH and estradiol, then measure serum concentrations of FSH and LH at 2 hours and estradiol at 24 hours after a SC injection of Variopeptul® 0.1 mg.







Leupromer® 3.75mg

Leuprolide Acetate

Leupromer 7.5mg is more Potent than Leupromer 3.75mg

Delivering Safety, Confidence and Complete Control Where It Matters

Swiss Made API



Dosing of different GnRH agonists in treatment of Central Precocious Puberty (CPP)

Dose adjustment according to www.uptodate.com, version 2020

GnRH agonist	Dose
Leuprolide acetate (Leupromer)	Starting doses vary among countries: ► US − 7.5 to 15 mg ► Europe and Asia − 3.75 mg every 28 days Weight-based dosing is no longer recommended³.
Triptorelin acetate (Variopeptyl)	3.75 mg every 28 days³

Dose adjustment according to www.uptodate.com, version 2019

GnRH agonist	Dose
Leuprolide acetate (Leupromer)	Depot injection given every 28 days: ≤ 25 kg: 7.5 mg >25 kg: 11.25 mg Titrate dose upward by 3.75 mg every 4 weeks (increase of approximately 10 mcg/kg /day) as needed to achieve clinical response. Starting doses in Europe are typically lower (eg. 3.75 mg/ dose).
Triptorelin acetate (Variopeptyl)	Initial dose by body weight: < 20 kg: 1.875 mg 20-30 kg: 2.5 mg >30 kg: 3.75 mg Initial three doses given at 14-day intervals with further doses every four weeks. More frequent injections may be needed in some

- 1. Boepple PA, Crowley WF Jr. Precocious puberty. In: Reproductive Endocrinology, Surgery, and Technology, Adashi EY, Rock JA, Rosenwaks Z (Eds), Lippincott-Raven, Philadelphia 1996. Vol 1, p.989.
- 2. Sultan C, Gaspari L, Maimoun L, Kalfa N, Paris F. Disorders of puberty. Best Practice & Research Clinical Obstetrics & Gynaecology. 2018 Apr 1; 48:62-89.
- 3. https://www.uptodate.com. Version 2020.









