When the treatment goal is rapid and effective pain relief, choose CELEBREX® (CELECOXIB CAPSULES)

Effective pain relief[1–4]

Rapid onset of action

Powerful pain relief

Faster recovery

Acute pain

- CELEBREX® acts as early as **22 minutes** with sustained pain relief up to 24 hours[1]
- CELEBREX® offers **similar efficacy to diclofenac** in relieving acute low back pain[2]
- CELEBREX® provided **sustained pain relief comparable to naproxen** in patients with acute shoulder tendinitis/bursitis[3]
- With CELEBREX®, normal function was achieved in **5 days** in patients with acute ankle sprain[4]

Well-established safety profile[5–8]

Favourable GI safety

Similar CV safety

- Favourable **GI safety** vs numerous ns-NSAIDs[5–7]
- Similar **CV safety** compared to naproxen or ibuprofen in >24,000 patients in the PRECISION study[8]
- CELEBREX® is not contraindicated in patients with Hypertension[12]

Flexible dosing[12]

Day 1 Loading dose

400 mg

200 mg
(if needed)

then

Day 2 Onwards

200 mg

200 mg
(if needed)

Set a treatment goal to achieve symptom control

EFFICACY

Effective and powerful control of pain and inflammation[1,10,11]

CV SAFETY

Evidence of similar CV incidences to ibuprofen and naproxen in PRECISION[8]

GI RISK

Significantly lower GI risk vs ns-NSAID with or without PPI[5,6]

ns-NSAID: Non-selective non-steroidal anti-inflammatory drug; PRECISION: Prospective Randomized Evaluation of Celecoxib Integrated Safety vs. Ibuprofen Or Naproxen; GI: Gastrointestinal; CV: Cardiovascular; PPI: Proton pump inhibitors

References:

1. Cheung R, et al. Analgesic efficacy of celecoxib in postoperative oral surgery pain: A single-dose, two-center, randomized, double-blind, active- and placebo controlled study. Clin Ther. 2007;29:2498–510. **2.** Ralha LV, et al. Efficacy and tolerability of celecoxib versus diclofenac: Results of a multicenter, randomized, double-blind, non-inferiority study in subjects with acute low back pain. Rev Bras Med. 2008;65(11):378–87. **3.** Petri M et al. Celecoxib effectively treats patients with acute shoulder tendinitis/bursitis. J Rheumatol. 2004;31:1614–20. **4.** Ekman EF, et al. Efficacy of celecoxib versus Ibuprofen in the treatment of acute pain: A multicenter, double-blind, randomized controlled trial in acute ankle sprain. AM J Orthop. 2002;31(8):445–61. **5.** Chan FKL, et al. Celecoxib versus omeprazole and diclofenac in patients with osteoarthritis and rheumatoid arthritis (CONDOR): A randomized trial. Lancet. 2010; 376:173–9. **6.** Cryer B, et al. GI-REASONS: A novel 6-month, prospective, randomized, open-label, blinded-endpoint (PROBE) trial. Am J Gastroenterol. 2013; 108:392–400. **7.** Scarpignato C, et al. Safe prescribing of non-steroidal anti-inflammatory drugs in patients with osteoarthritis – An expert consensus addressing benefits as well as gastrointestinal and cardiovascular risks. BMC Medicine. 2015; 13:1–22. **8.** Nissen SE, et al. Cardiovascular safety of celecoxib, naproxen, or ibuprofen for arthritis. N Engl J Med. 2016; 375:2519–29. **9.** Data On File (20 Years). **10.** Bensen WG et al. Treatment of osteoarthritis with celecoxib, a cyclooxygenase-2 inhibitor: A randomized controlled trial. Mayo Clin Proc. 1999;74:1095–105. **11.** Strand V et al, Treatment of osteoarthritis with continuous versus intermittent celecoxib. J Rheumatol. 2011;38:2625–34. **12.** CELEBREX® Malaysia Prescribing Information dated 6 July 2022.

Scan QR Code for CELEBREX® Abbreviated Prescribing Information

http://viatrismyapi-celebrex.com

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For Healthcare Professionals only.

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