PCCA SubMagna™ SL HMW

An innovative, anhydrous sublingual base that accommodates a variety of drug molecular weights.

PCCA # **30-5224**

PCCA EXCLUSIVE

SubMagna™ SL HMW

ANHYDROUS SUBLINGUAL SUSPENSION VEHICLE

Delivery of APIs — Sublingually

Designed to efficiently deliver a wide range of drugs with varying molecular weights — including high molecular weight (HMW) substances — SubMagna SL HMW is a state-of-the-art, anhydrous, self-emulsifying and permeation-enhancing sublingual suspension vehicle.

SubMagna was initially developed as an alternative dosing form for commercially available semaglutide† and tirzepatide† in nonsterile compounded preparations. However, it also accommodates a broad range of active pharmaceutical ingredients (APIs), including, but not limited to, progesterone, testosterone, sildenafil, tadalafil, oxytocin and melatonin.

After administering under the tongue, SubMagna forms an emulsion when exposed to saliva, improving the solubility and dispersibility of APIs. Its permeation-enhancing and unique mucoadhesive properties help drive molecules, including those with HMWs, into mucosal tissues and prolong contact time to potentially provide greater absorption. And because the anhydrous formulation offers the potential for longer beyond-use-dates (BUDs)*, SubMagna delivers greater efficiencies and more opportunities for nonsterile compounding pharmacies.

KEY FEATURES & BENEFITS

- Sublingual route of administration provides the opportunity to circumvent gastrointestinal factors that can influence the bioavailability of APIs.
- Developed to provide an alternative dosing delivery system for commercially available semaglutide†, tirzepatide† and a broad range of other APIs.

** USP 795 establishes BUD limits by type of preparation in the absence of a USP–NF Compounded Preparation Monograph or CNSP-specific stability information.*

† Commercially available semaglutide tablets or tirzepatide injection solutions.

PCCA SubMagna™ SL HMW

PCCA FORMULATIONS

- **PCCA Formula #15045**
  Sublingual Suspension – General Formula
  (SubMagna™ SL HMW)
- **PCCA Formula #15028**
  Ketamine 100 mg/mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15026**
  Melatonin 5 mg/mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15025**
  Oxytocin 100 Units/0.1 mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15027**
  Progesterone 100 mg/mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15038**
  Semaglutide 0.75 mg/mL (CADP*) Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15043**
  Semaglutide (CADP*) 1 mg/mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15042**
  Semaglutide (CADP*) 2 mg/mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15041**
  Semaglutide (CADP*) 3 mg/mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15029**
  Sildenafil 20 mg/0.25 mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15030**
  Tadalafil 20 mg/0.25 mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15031**
  Testosterone 1 mg/0.1 mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15032**
  Testosterone 10 mg/0.1 mL Sublingual Suspension
  (SubMagna™ SL HMW)
- **PCCA Formula #15040**
  Tirzepatide (CADP*) 0.25 mg/mL Sublingual Suspension
  (SubMagna™ SL HMW)

**CADP (commercially available drug product) formula uses Semaglutide 14 mg Tablets – Pharmacy Stock as the source of the active pharmaceutical ingredient (API) or Tirzepatide 25 mg/0.5 mL Injection Solution – Pharmacy Stock as the source of the active pharmaceutical ingredient (API).*

For more information, scan the QR codes below:

PRODUCT INFORMATION

STUDIES

PLEASE NOTE

Always make sure you have checked the PCCA formula database and are following the most up-to-date version of a formula, as changes are continually made to existing formulations to provide the highest quality. The formulas and/or statements listed are provided for educational purposes only. They are compounding ideas that have commonly been requested by physicians and have not been evaluated by the Food and Drug Administration. Formulas and/or material listed are not to be interpreted as a promise, guarantee, or claim of therapeutic efficacy or safety. The information contained herein is not intended to replace or substitute for conventional medical care or encourage its abandonment. Every patient is unique, and formulas should be adjusted to meet their individual needs.