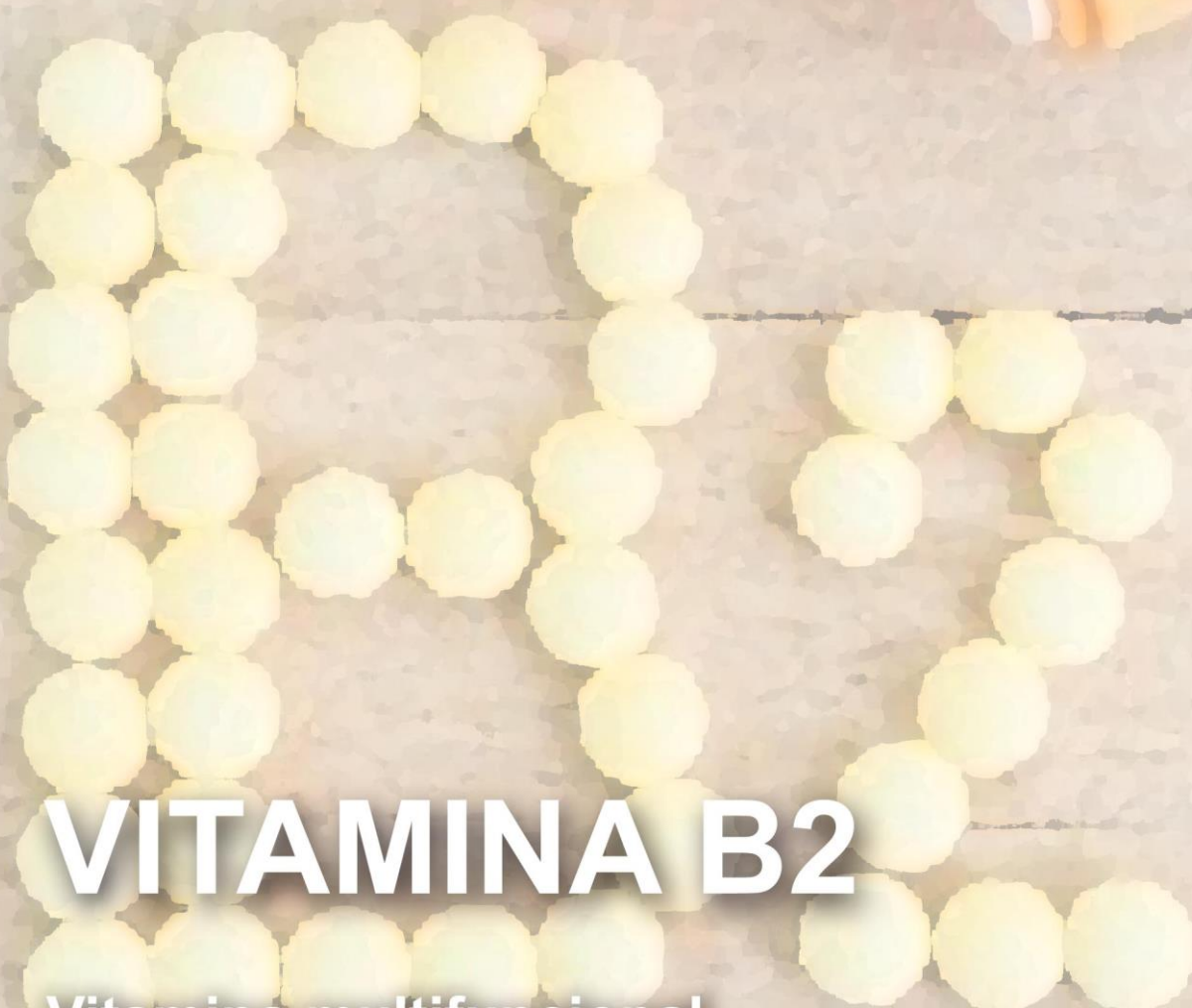
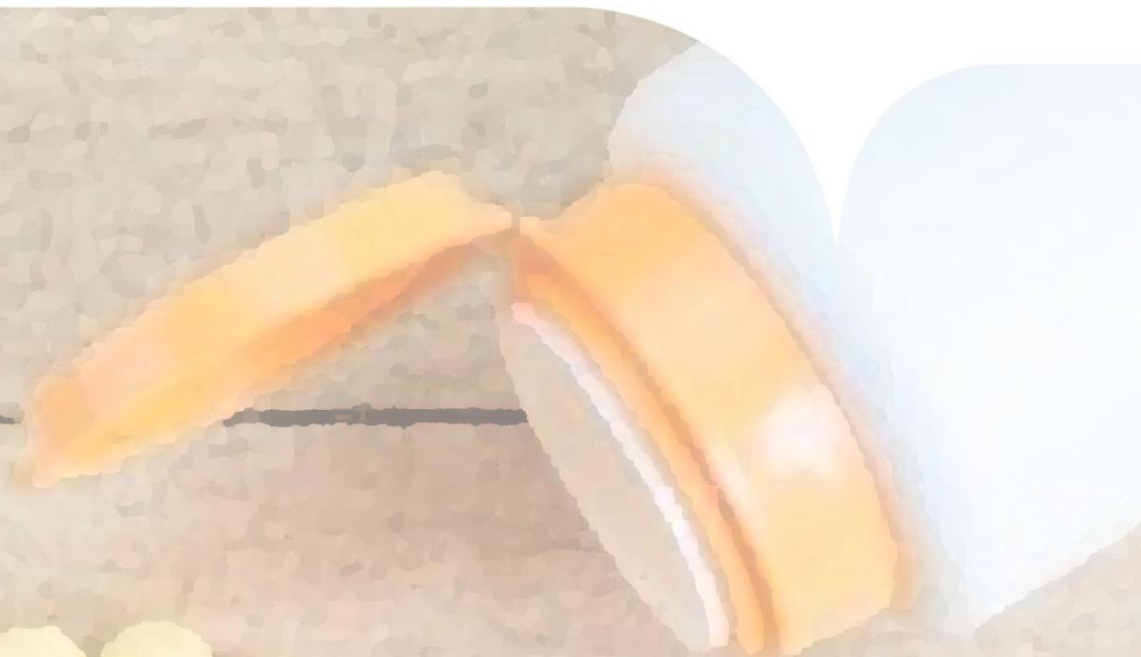


a fórmula



# VITAMINA B2

Vitamina multifuncional  
no tratamento da migrânea  
e na arriboflavinose

Estudos



<http://aformulabr.com.br/qrcode/vitaminab2afv01.pdf>



# VITAMINA B2

Vitamina multifuncional no tratamento da migrânea e na arriboflavinose

## DESCRIÇÃO

A **Vitamina B2**, também conhecida como riboflavina, é uma vitamina hidrossolúvel, de coloração amarela, fluorescente, encontrada no leite, carne, peixes e principalmente em vegetais folhosos de cor escura.

## MECANISMO DE AÇÃO

A **Vitamina B2** é precursora de diversas coenzimas essenciais que participam da cadeia transportadora de elétrons, originando as flavinas que atuam na catálise de importantes reações, como as relacionadas ao reparo do DNA, fazem o transporte e liberação controlada de fármacos, diminuindo os impactos causados pelo uso de medicamentos, participa do metabolismo de lipídios e outras vitaminas do complexo B, além de regular o relógio biológico, estando presente em diversas reações metabólicas. Estudos relatam a importância da riboflavina como fator de proteção contra doenças cardiovasculares, neoplásicas, e na profilaxia da migrânea, onde doses elevadas de **Vitamina B2** reduz a dor e a frequência das crises. Como componente das lentes oculares apresenta atividade fotossensibilizadora no qual os fotorreceptores dependentes de riboflavina desempenham função na adaptação ao escuro e, logo, sua deficiência influenciaria na adaptação ao escuro, além de acarretar no aparecimento da arriboflavinose e outros distúrbios do metabolismo.

## INDICAÇÕES

- ✓ Migrânea;
- ✓ Profilaxia da arriboflavinose.
- ✓ Estomatite angular;
- ✓ Quilose; dermatite seborreica.

## DOSE USUAL

Recomendação oral de 2 a 30 mg de **Vitamina B2** ao dia. No tratamento de migrânea recomenda-se dose oral de 400 mg ao dia.

## SUGESTÕES DE FÓRMULAS

**Vitamina B2**..... 400 mg  
Magnésio..... 600 mg  
Coenzima Q10..... 150 mg

**Modo de uso:** 1 dose ao dia.

**Indicação:** migrânea.

Vitamina B1..... 30 mg  
**Vitamina B2**..... 30 mg  
Vitamina B3..... 20 mg  
Vitamina B5..... 30 mg  
Vitamina B6..... 80 mg  
Vitamina B7..... 500 mcg  
Vitamina B9..... 1 mg  
Metilcobalamina..... 200 mcg  
Vitamina C revestida..... 200 mg

**Modo de uso:** 1 dose 2 vezes ao dia longe das refeições.

**Indicação:** suplementação vitamínica, suplementação para o 1º trimestre gestacional.

## PRINCIPAIS REFERÊNCIAS

GAUL et al. Improvement of migraine symptoms with a proprietary supplement containing riboflavin, magnesium and Q10: a randomized, placebo-controlled, double-blind, multicenter trial. The Journal of Headache and Pain, 2015. DOI 10.1186/s10194-015-0516-6. Disponível em: <<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4393401/>>. Acesso em: 07/03/2017.

BATISTUZZO, J.A.O. ITAYA, M. ETO, Y. Formulário Médico Farmacêutico. 5ª Edição. São Paulo: Editora Atheneu, 2015.



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# VITAMINA B2

## ESTUDOS CLÍNICOS

### **Improvement of migraine symptoms with a proprietary supplement containing riboflavin, magnesium and Q10: a randomized, placebo-controlled, double-blind, multicenter trial.**

Background: Non-medical, non-pharmacological and pharmacological treatments are recommended for the prevention of migraine. The purpose of this randomized double-blind placebo controlled, multicenter trial was to evaluate the efficacy of a proprietary nutritional supplement containing a fixed combination of magnesium, riboflavin and Q10 as prophylactic treatment for migraine. Methods: 130 adult migraineurs (age 18 – 65 years) with  $\geq$  three migraine attacks per month were randomized into two treatment groups: dietary supplementation or placebo in a double-blind fashion. The treatment period was 3 months following a 4 week baseline period without prophylactic treatment. Patients were assessed before randomization and at the end of the 3-month-treatment-phase for days with migraine, migraine pain, burden of disease (HIT-6) and subjective evaluation of efficacy. Results: Migraine days per month declined from 6.2 days during the baseline period to 4.4 days at the end of the treatment with the supplement and from 6.2 days to 5.2 days in the placebo group ( $p = 0.23$  compared to placebo). The intensity of migraine pain was significantly reduced in the supplement group compared to placebo ( $p = 0.03$ ). The sum score of the HIT-6 questionnaire was reduced by 4.8 points from 61.9 to 57.1 compared to 2 points in the placebo-group ( $p = 0.01$ ). The evaluation of efficacy by the patient was better in the supplementation group compared to placebo ( $p = 0.01$ ). Conclusions: Treatment with a proprietary supplement containing magnesium, riboflavin and Q10 (Migravent® in Germany, Dolovent® in USA) had an impact on migraine frequency which showed a trend towards statistical significance. Migraine symptoms and burden of disease, however, were statistically significantly reduced compared to placebo in patients with migraine attacks.

### **Riboflavin: a multifunctional vitamin**

ABSTRACT: Riboflavin, a component of the B2 vitaminic complex, plays important roles in biochemistry, especially in redox reactions, due to the ability to participate in both one- and two-electron transfers as well as acting as a photosensitizer. Accordingly, low intakes of this vitamin have been associated with different diseases, including cancer and cardiovascular diseases. Riboflavin is thought to contribute to oxidative stress through its capacity to produce superoxide but, interestingly, it can also promote the reduction of hydroperoxides. This peculiar and multifunctional behavior allows riboflavin to take part in various biochemical pathways as a nucleophile and an electrophile, turning it into a versatile and important biological compound.

### **Role of magnesium, coenzyme Q10, riboflavin, and vitamin B12 in migraine prophylaxis.**

Abstract: Migraine is a neurovascular syndrome characterized by recurrent headache associated with other symptoms, eventually preceded by aura. This chapter reviews the involvement of some mineral, coenzyme, and vitamin defects in the pathogenesis of migraine headaches and focuses on their potential therapeutic use in the preventive treatment for migraine. The therapeutic potential of magnesium, coenzyme Q(10), riboflavin, and vitamin B(12) can be cautiously inferred from some published open clinical trials; it should, however, be considered that double-blind randomized larger studies are needed to correctly estimate the impact of the placebo effect in these promising therapies.

## REFERÊNCIAS

GAUL et al. Improvement of migraine symptoms with a proprietary supplement containing riboflavin, magnesium and Q10: a randomized, placebo-controlled, double-blind, multicenter trial. The Journal of Headache and Pain, 2015. DOI 10.1186/s10194-015-0516-6. Disponível em: <<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4393401/>>. Acesso em: 24 de março de 2017.

SOUZA, Ana Carolina Santos de et al. Riboflavina: uma vitamina multifuncional. Quím. Nova, São Paulo, v. 28, n. 5, p. 887-891, Oct. 2005. Disponível em: <[http://www.scielo.br/scielo.php?script=sci\\_arttext&pid=S0100-40422005000500028](http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0100-40422005000500028)>. Acesso em: 24 de março de 2017.

BIANCHI, A.; SALOMONE, S.; CARACI, F.; PIZZA, V.; BERNADINI, R.; D'AMATO, C.C. Role of magnesium, coenzyme Q10, riboflavin, and vitamin B12 in migraine prophylaxis. Vitam Horm. 2004;69:297-312. Disponível em: <<https://www.ncbi.nlm.nih.gov/pubmed/15196887>>. Acesso em: 24 de março de 2017.

BATISTUZZO, J.A.O. ITAYA, M. ETO, Y. Formulário Médico Farmacêutico. 5ª Edição. São Paulo: Editora Atheneu, 2015.

OLSZEWER, Efrain. Formulação magistral na prática ortomolecular. São Paulo. Editora Fapes, 2010.

ANVISA. Portaria nº 40 de 1998

