

Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

# **Review of Niacinamide**

Mr. Ashkan Shaikh<sup>1</sup>, Ms. Pooja Rai<sup>2</sup>, Mr. Shahabaz Shaikh<sup>3</sup>, Ms. Rajani Mhatr<sup>4</sup>, Ms. KokatePradnya<sup>5</sup>, Dr. Suvarna Bhadane <sup>6</sup>\*, Dr. Smita Takarkhede<sup>7</sup>

1,2,3,4,5 Research Scholar, Ideal College of Pharmacy and Research, Kalyan 6 Research Guide, Ideal College of Pharmacy and Research, Kalyan 7 Principal, Ideal College of Pharmacy and Research, Kalyan

Submitted: 15-05-2023 Accepted: 30-05-2023

Submitted: 13-03-2025 Accepted: 50

#### **ABSTRACT**

Niacinamide (otherwise called nicotinamide, 3pyridinecarboxamide) is the physiologically dynamic type of niacin or vitamin B3, the lack of which brings about the healthful illness pellagra with particular cutaneous indications. Since its revelation and confinement, a large group of dermatological helpful advantages and systems have likewise been credited to this fundamental water-solvent nutrient when utilized as an effective specialist. These incorporate its evident job as an enemy of skin inflammation dynamic, an upcontroller of epidermal sphingolipid blend, an upcontroller of markers of epidermal separation and dermal expansion (with simultaneous layer corneum hindrance benefits), and as a mediator of photoimmunesuppression and going with growth beginning. All the more as of late, new proof focuses to a job in changing the restorative appearance of skin through concealment of epidermal melanosome move with resulting impact on skin pigmentation and a job in altering epidermal surface geography. The components for these cutaneous impacts are as yet muddled. Notwithstanding, since niacinamide is a significant forerunner of NADH and NADPH, it has been proposed that effective utilization of niacinamide can advance this detailed wide range of action through nearby amendment of homeostatic equilibrium of these two nucleotide coenzymes. As there has been a sensational expansion in examination into and utilization of niacinamide as of late, this survey will cover the ongoing extent of information on this significant nutrient, including unthinking comprehension and cutaneous physiological movement.

# INTRODUCTION

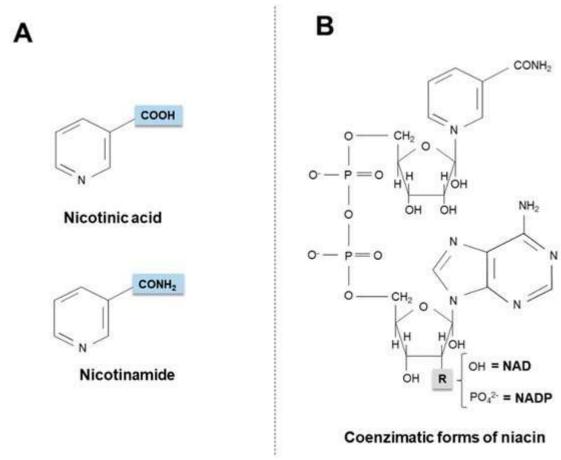
Staying aware of the most recent priority healthy skin fixings can be extreme — however it merits requiring the investment to look further into niacinamide. While this fixing doesn't stand out as individual skin-maturing warriors like retinoids or glycolic corrosive, you might have spotted it while looking at your Instagram feed or TikTok for You page. Curious in the event that this fixing has a spot in your skin health management routine? Peruse on to figure out what you really want to be aware of this excellence sponsor. [1,2]

Chemical structure:

Niacin

Niacin (otherwise called "vitamin B3" or "nutrient PP") is the nonexclusive descriptor for two vitamers, nicotinic corrosive (pyridine-3carboxylic corrosive) and nicotinamide (nicotinic corrosive amide), that bring about the naturally dynamic coenzymes, nicotinamide dinucleotide (NAD) and its phosphate simple, the nicotinamide adenine dinucleotide phosphate (NADP) [1] (Figure 1). (What could be compared to a proton and two electrons), hence going about as an electron transporter. In any case, NAD and NADP assume different metabolic parts in the cytosol: the NADH/NAD+ proportion is little (around  $8 \times 10-4$ ), subsequently leaning toward oxidative catabolism, while the NADPH/NADP+ proportion is higher (around 75), hence giving an unequivocally lessening climate to biosynthetic responses [2][3].

Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781



**Figure 1.** Chemical structures of niacin vitamers (**A**) and active coenzymatic forms (**B**). NAD: nicotinamide adenin dinucleotide. NADP: nicotinamide adenin dinucleotide phosphate.

Upkeep of the intracellular NAD pool isn't simply critical to fuel redox digestion, yet additionally to help NAD-subordinate, non-redox flagging pathways. NAD is without a doubt a substrate of ADP-ribosyltransferases that catalyze ADP-ribose move responses, hence separating NAD to nicotinamide and ADP-ribosyl items, which assume a key part in cell flagging fountains managing quality articulation, cell movement, insulin emission, DNA fix, apoptosis and maturing [4][5][6]. At last, NAD has additionally been perceived as an endogenous agonist of purinergic P2Y1 and P2Y11 film subtype receptors, through which it hinders neurotransmission in instinctive smooth muscles [7] and enacts resistant cells [8][9], separately.

### What Is Niacinamide?

With regards to healthy skin, niacinamide is an effective variant of vitamin b3. Nicotinamide has a long legacy of purpose in dermatology. Notwithstanding its part in rankling sicknesses and

skin break out vulgaris, late interest in its utilization has centered around its chemo deterrent job in nonmelanoma skin malignant growth (NMSC) and corrective applications.

We give a contemporary survey of the utilizations of nicotinamide in dermatology, and assess the proof basic these purposes. Just investigations on people are incorporated. Nicotinamide (niacinamide) is the water-dissolvable, amide isotype of vitamin B3; niacin (nicotinic corrosive) is the comparing corrosive isotype.[10][11]

Nicotinamide is obtained from the eating regimen, and an absence of this nutrient can cause pellagra, giving the ternion of dementia, dermatitis and the runs. Dietary wellsprings of nicotinamide incorporate meats, liver, yeast, dairy items, vegetables, beans, nuts, seeds, green verdant vegetables, sustained bread, cereals, espresso and tea.[13]

Nicotinamide gives powerful calming properties without the gamble of bacterial



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

skin break out vulgaris, sums up the significant distributed articles, and examines what studies are expected to move this new way to deal with such a typical illness into far and wide clinical practice. Niacinamide, otherwise known as vitamin B3 or niacin, is a water-dissolvable substance that has been displayed to emphatically affect the skin as per various clinical examinations. It is much of the time utilized in water-based serums.[16]

opposition and foundational secondary effects and addresses a potential treatment methodology for skin break out vulgaris. Nicotinamide, otherwise called niacinamide, is a type of vitamin B3, which is a fundamental water-solvent supplement present in various food sources. Nicotinamide is the amide type of nicotinic corrosive (niacin) and is indistinguishable in nutrient capability; nonetheless, it doesn't convey the equivalent vasodilatory, hypolipidemic, and gastrointestinal activities.

Besides, nicotinamide has exhibited a low occurrence of secondary effects and harmfulness at oral portions as much as 3 grams each day for as long as five years. Nicotinamide is a forerunner for nicotinamide adenine dinucleotide (NAD) and the phosphorylated subsidiary NADP.11 NAD gives a substrate to atomic compound poly ADP-ribose polymerase (PARP-1), which fixes harm from genotoxic stresses, like UV radiation.[14]

Having satisfactory cell energy and appropriately working PARP-1 is significant for various skin conditions, for which nicotinamide may make helpful impacts. Nicotinamide seems to play various possible jobs in the treatment of skin break out vulgaris.

2% effective nicotinamide brought about a critical decrease in sebum discharge rate in a Japanese report bunch and diminished relaxed sebum levels (sebum on the skin surface) in a Caucasian report bunch more than about a month.

Furthermore, effective nicotinamide safeguards the regular boundary of the skin against contamination and may bacteriostatically affect acnes.[15]

In conclusion, nicotinamide diminishes the in vitro emission of interleukin-8, a cytokine emitted by keratinocytes in light of microbes (counting P. acnes), accordingly applying a mitigating impact through restraint of leukocyte chemotaxis.18 Extra calming activity might happen by means of hindrance of lysosomal chemical delivery and pole cell degranulation. Nicotinamide for use in dermatologic sicknesses has shown guarantee in clinical examinations however has not yet turned into a standard therapy choice. This survey looks at the likely job of nicotinamide in

### **History Of Niacinamide**

Niacinamide is the amide of vitamin B3, additionally known by the pen name PP that is Pellagra-Preventive. The name isn't without importance. The main instance of pellagra was accounted for in the U.S. in 1902; forty years of a pellagra plague followed during which, in states south of the Potomac and Ohio streams, exactly 3 million cases and 100,000 passings were accounted for. Pellagra patients gave different incapacitating side effects including, essentially, a range of cutaneous injuries. Sadly, this prompted the public prohibition of thousands of casualties, who came solely from poor, rustic, common families who took care of themselves on a dull staple eating regimen of cornmeal, molasses and fatback. Joseph Goldberger, a Hungarian exiled person who set up a good foundation for himself as an eminent clinical disease transmission expert, switched enduring clinical assessment that pellagra was an irresistible, transferable sickness. He demonstrated that straightforward dietary supplementation could both forestall and fix pellagra. In 1927, following 13 years of work, Goldberg convinced the American Red Cross to convey dried yeast to Mississippi flood casualties and, in this manner, forestalled a further destroying pandemic. It was only after 1937 that nicotinic corrosive and its subordinates (counting niacinamide) demonstrated to be the subtle »PP« factor. By 1945, Goldberger's heritage was extremely durable; government funded training had changed perpetually the less than stellar eating routine of the South and pellagra was wiped out in the US.[17][18]

Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

### Physiology of niacinamide

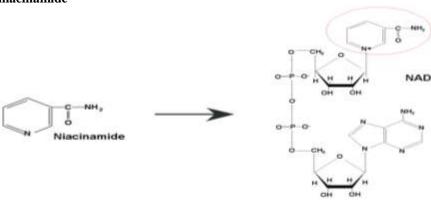


Fig 2: Structure of niacinamide and inclusion within NAD molecule

The subbed pyridine subordinate niacinamide is a fundamental constituent of the oxidoreduction coenzymes nicotinamide adenine dinucleotide (NAD) and nicotinamide adenine dinucleotide phosphate (NADP) (Fig. 2). During glycolysis and the TCA cycle, 10 particles of NAD+ (per atom of glucose) are diminished to 10 NADH by the exchange of a hydride particle to the 4-position of the niacinamide ring. The hydride particle of NADH serves successfully as an energy stockpiling unit, surrendering a couple of highenergy electrons to the mitochondrial electron transport chain when required. In this course of oxidative phosphorylation, electron matches are moved from NADH to a last acceptor (oxygen) by means of a progression of electron transporters. This exchange of electrons is thermodynamically good, i.e.,  $\Delta G$  is negative, and is coupled to the siphoning of protons out of the mitochondrial lattice. The progression of protons back into the lattice, thusly, catalyzes the creation of ATP by F0F1 ATP-synthase. Complete energy yield (ΔG') for this cycle is high (- 52.7kcal). Though NADH is engaged with catabolism, NADPH will in general act as an electron (hydride particle) benefactor in anabolic cycles, or at least, biosynthesis. For instance, NADPH is the decreasing co-factor utilized by unsaturated fat synthetase in lipid biosynthesis and by desmolases and hydroxylases in steroid biosynthesis.[19]

# **Niacin Sources**

People acquire niacin from both endogenous and exogenous sources. Just 2% of dietary tryptophan (Trp) is changed over into niacin through a multistep pathway (see in next segments), happening for the most part in the liver [20]. Diet gives the nutrient as nicotinic corrosive,

nicotinamide and Trp, as well as the dynamic coenzymatic types of niacin.

### 2.1. Exogenous Sources

Niacin is tracked down in creature and vegetable food sources. In meat and fish, the nutrient is available as NAD(P), whose sums are higher in ill-equipped food sources contrasted with handled food varieties (enzymatic hydrolysis of the coenzymes can happen during food planning).[21]

In mature oat grains (especially in corn), niacin is to a great extent present as niacinglycoside and, in a minor extent, peptide-bound niacin, compounds all things considered named "niacinogens" [22]. When complexed in niacinogens, niacin is ineffectively accessible (just ~ 30%), as gastrointestinal proteins can't free niacin; in any case, salt treatment of the grain increments niacin bioavailability [23].

When ingested, free niacin can be adsorbed in the stomach, albeit the small digestive tract assimilates it quicker. The system of transport across the enterocyte brush line film isn't completely explained at this point. A few carriers, for sure, have all the earmarks of being engaged with digestive niacin take-up; among them, the most widely recognized are the human natural anion carrier 10 (hOAT-10, a proton-driven transporter that likewise intervenes the vehicle of urate and p-aminohippurate) [24], liable for niacin take-up at physiological fixations [25], and the sodium-coupled monocarboxylate carrier (SMCT1 or SLC5A8, a carrier for lactate, pyruvate and short-chain unsaturated fats), explicitly dynamic at high pharmacological dosages of nicotinic corrosive [26][27].

NAD and NADP are immediately hydrolyzed, by digestive mucosa and liver glycohydrolases, to nicotinamide that is

# W.

### **International Journal of Pharmaceutical Research and Applications**

Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

consequently shipped to tissues, where it is changed over into coenzymatic structures as required. It appears to be critical that nicotinamide moves unreservedly into or out of the cerebrum [28] and, as examined in the following segments, such a property has significant neurobiological ramifications.

### **MECHANISM OF ACTION: -**

Niacin plays out various capabilities in the body thus has numerous components, not all of which have been completely described.3 Niacin can diminish lipids and apolipoprotein B (apo B)-containing lipoproteins by adjusting fatty substance amalgamation in the liver, which corrupts apo B, or by tweaking lipolysis in fat tissue.[29]

Niacin represses hepatocyte diacylglycerol acyltransferase-2.3 This activity forestalls the last step of fatty oil union in hepatocytes, restricting accessible fatty substances for exceptionally low thickness lipoproteins (VLDL).3 This movement additionally prompts intracellular debasement of apo B and diminished creation of low thickness lipoproteins, the catabolic result of VLDL.[30]

Niacin likewise represses a high thickness lipoprotein (HDL) catabolism receptor, which builds the levels and half existence of HDL.

### **METABOLISM**

The digestion of niacin is inadequately depicted in the writing, yet the metabolites niacinamide, niacinamide N-oxide, nicotinuric corrosive, N1-methyl-2-pyridone-5-carboxamide, N1-methyl-4-pyridone-5-carboxamide, and trigonelline have been distinguished in human pee.[31]

The laid out physiological capability of niacin is as a forerunner of the nicotinamide nucleotide coenzymes, NAD and NADP. The traditional view is that tryptophan can 'fill in' for niacin when the dietary admission of the nutrient is deficient, since the amino corrosive can lead to the nicotinamide nucleotides via quinolinic corrosive, a middle of the road in the oxidative pathway of tryptophan digestion. There are a few clinical circumstances where pellagra results from upset tryptophan digestion notwithstanding an obviously sufficient admission of niacin.[32]

### **SYNTHESIS:**

# **Endogenous Synthesis**

Beginning from dietary Trp, niacin is blended through the kynurenine pathway (KP) (Figure 2), happening principally in the liver and, less significantly, in extrahepatic tissues (particularly upon safe cell enactment) [17][18][19].



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

**Figure 3.** Anew amalgamation of NAD(P) from tryptophan, nicotinamide and nicotinic corrosive. (1) Two iron porphyrin metalloproteins, tryptophan 2,3 dioxygenase (TDO, in the liver) and indolamine-pyrrole 2-3 dioxygenase (IDO, in extrahepatic tissues), oxidize the pyrrole moiety of Tryptophan (Trp), subsequently framing N-Lformylkynurenine. (2) Arylformamidase (AFMID) hydrolytically eliminates the formyl bunch delivering kynurenine and is then, at that point (3) hydroxylated to 3-hydroxykynurenine kynurenine-3 monooxygenase (KMO), mitochondrial flavo-protein that involves O2 as a substrate and NADPH as a cofactor. The activity of (4) kynureninase B (KYNU, a vitamin B6subordinate chemical) and (5) 3-hydroxyanthranilic dioxygenase (HAAO, a nonheme iron-subordinate dioxygenase) prompts creation of 2-amino-3carboxymuconic-6-semialdehyde corrosive, unsound item that (6) immediately condensates and revises to frame quinolinic corrosive; then, (7) quinolinic corrosive is decarboxylated switched over completely to nicotinic corrosive mononucleotide by quinolinic corrosive phosphoribosyltransferase (QPRT). Nicotinic corrosive mononucleotide is likewise delivered through the "rescue pathway", by means of the activity of (8) nicotinic corrosive phosphoribosyltransferase (NPRT). The resulting activity of (9) nicotinamide/nicotinic corrosive mononucleotide-adenylyltransferases (NMNAT1-3) and (10) NAD synthetase (NADSYN1) prompts the age of NAD, which is then, at that point (11) phosphorylated to create NADP. NAD can likewise get straightforwardly from nicotinamide through activity the of (12)nicotinamide phosphoribosyltransferase (NAMPT) and (13) nicotinamide/nicotinic corrosive mononucleotideadenylyltransferase (NMNAT1-3). Red edges: dietary antecedents of NAD(P). Ala: alanine; Gln: glutamine; Glu: glutamate; PLP pyridoxal

phosphate; PRPP: 5-phosphoribosyl-1-pyrophosphate.[33]

Tryptophan 2,3 dioxygenase (TDO), catalyzing the main response, is the rate-restricting protein. A few nourishing, hormonal and physioneurotic elements influence the effectiveness of this anabolic pathway. Lacks of vitamin B6, riboflavin, iron and heme (all fundamental cofactors for explicit catalysts), as well as of vitamin B1 and Trp itself, slow the response rate. Generally speaking: (I) a protein-enhanced diet (especially, utilization of food varieties with high groupings of leucine, like maize or sorghum) diminishes niacin biosynthesis; (ii) unsaturated fat improved diet increments it, while soaked unsaturated fats apply no impact; (iii) the change proportion is higher in eats less carbs containing starch concerning sucrose-rich weight control plans; (iv) caloric limitation radically smothers biosynthesis.[34] Among chemicals, estrogens, glucorticoids and thyroxine are the best described modulators of the KP. Estrogens upgrade TDO action; protein action is triplicated in ladies who are pregnant or are taking oral contraceptives. Glucocorticoids invigorate once more union, by instigating TDO through a component potentiated by glucagon and restrained by insulin and adrenaline. The impacts of thyroxine on TDO movement are as yet questionable, as certain investigations recommended a positive activity, while others noticed no impact.[35]

Because of individual contrasts, it has been assessed that, in human sound people, Trp is switched over completely to niacin with a typical transformation effectiveness of 60:1. Hence, niacin admissions are communicated as niacin counterparts (NE; 1 mg NE = 1 mg niacin or 60 mg Trp): Suggested Dietary Recompense for grownups is 16 mg NE/day for men and 14 mg NE/day for ladies, with an Okay Upper Admission Level of 35 mg/day, in light of flushing as the basic unfavorable impact. [36]

Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

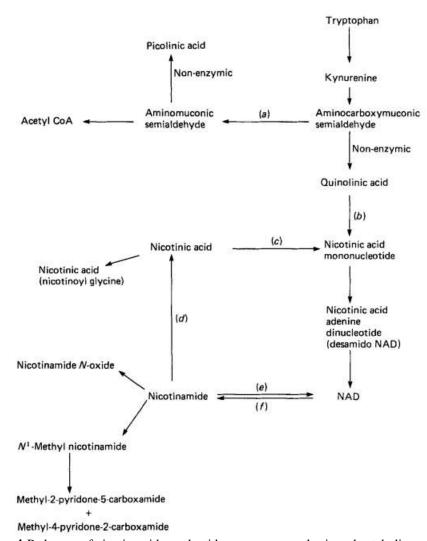


Figure 4:Pathways of nicotinamide nucleotide coenzyme synthesis and catabolism.

# Pharmacological Effects of Niacin

When enhanced at physiological sums, (15-20 nicotinic mg/day) corrosive nicotinammide (300 mg/day) are successful in treating conventional pellagra; in any case, at higher focuses, they show separate extra pharmacological exercises, going from hostile to dyslipidemic to mitigating activity. The main proof of lipid-changing impacts of niacin traces all the way back to 1955, when Altschul and associates revealed the capacity of 3000 mg/day nicotinic corrosive (however not nicotinamide) to lessen serum cholesterol in people. Each developing collection of exploratory information focuses to valuable impacts of nicotinic corrosive as an enemy of hyperlipidemic specialist. It is presently deeply grounded that nicotinic corrosive effectively: (I)

hinders free unsaturated fat preparation and lipolysis; (ii) lessens hepatic fatty oil amalgamation and exceptionally low thickness lipoprotein (VLDL) emission; (iii) restrains VLDL change into low thickness lipoprotein (LDL); (iv) increments serum high-thickness lipoprotein (HDL) levels; (v) triggers LDL transformation from little, thick particles to huge, low thickness particles, (vi) decreases serum lipoprotein fixations; and (vii) increments apolipoprotein A1.[36]

Until this point in time, the hidden components are as yet speculative; specifically, nicotinic corrosive (at levels higher than those accomplished with diet) has been accounted for to tie to and enact GPR109A and GPR109B, two G0/Gi-coupled film receptors exceptionally communicated in fat tissue; regardless, these

# W.

# **International Journal of Pharmaceutical Research and Applications**

Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

receptors are missing, or present just at low levels, in the liver. Accordingly, it is possible that nicotinic corrosive could apply its bringing down lipid impacts through receptor-free and -subordinate instruments.[37]

Because of the previously mentioned beneficial outcomes, in 2008, nicotinic corrosive was economically accessible as Trevaclyn®, Tredaptive® or Pelzont®, at the portion of 1.0 g (in blend with laropipram, an enemy of flushing specialist); this solution item has been utilized to treat blended dyslipidemic and additionally essential hypercholesterolemic grown-ups getting results statins. In any case, from Atherothrombosis Mediation in Metabolic Disorder with Low HDL/High Fatty substances: Effect on Worldwide Wellbeing Results (Reach skyward) preliminary [44], along with the Heart Assurance Study 2-Treatment of HDL to Diminish the Frequency of Vascular Occasions (HPS2-Flourish) preliminary [45][46], detailed no clinical advantages (i.e., decreased hazard of coronary failure and stroke) from the dependable utilization of niacin. An absence of viability, along with the beginning of repetitive serious secondary effects (gastrointestinal, outer muscle, and skin-related), has prompted drug withdrawal from the EU market.[38]

In vitro and in vivo examinations have likewise shown that nicotinic corrosive (or enactment of its sub-atomic targets) applies critical calming, hostile to oxidant and hostile to apoptotic exercises in various cells and tissues, in this way being possibly advantageous for the administration of a few neurotic circumstances, including type-2 diabetes, heftiness, atherosclerosis, kidney and lung injury, and hyperalgesia.[39]

Likewise, nicotinamide at high portions can apply explicit pharmacological exercises, especially those connected with disease the board. For sure, a few exploratory and clinical examinations have shown the capacity of nicotinamide to sharpen growths to radiation or chemotherapy. Such an action relies upon enactment of poly(ADP-ribose)- subordinate apoptosis overflow, as well as on hindrance of myosin light chain kinase that, thusly, upgrades microvascular stream, in this way further developing medication conveyance and cancer oxygenation.[40]

# Uses & Effectiveness Likely Effective for

- Unusual degrees of cholesterol or blood fats (dyslipidemia). Taking niacin remedy items by mouth in portions of 500 mg or more further develops cholesterol levels in individuals with strange cholesterol. Dietary enhancement types of niacin generally come in lower dosages and don't appear to further develop blood fat levels.
- An infection brought about by niacin inadequacy (pellagra). Niacin solution items are US FDA endorsed for forestalling and treating pellagra.[41]

### **Possibly Effective for**

- Unusual degrees of blood fats in individuals with HIV/Helps. Taking remedy niacin items by mouth appears to further develop levels of cholesterol and blood fats called fatty substances in individuals with this condition. It is muddled assuming that niacin supplements are useful.
- A gathering of side effects that increment the gamble of diabetes, coronary illness, and stroke (metabolic condition). Taking remedy niacin items by mouth appears to build levels of highthickness lipoprotein (HDL or "great") cholesterol and diminish levels of blood fats called fatty substances in individuals with metabolic condition. It is indistinct assuming that niacin supplements are useful.[42]

# Side Effects

When taken by mouth: Niacin is reasonable safe for the vast majority when utilized properly. Solution items containing niacin are protected when taken as coordinated. Niacin-containing food sources or niacin supplements are protected when taken in portions lower than 35 mg everyday.

A typical symptom of niacin is a flushing response. This could cause consuming, tingling, and redness of the face, arms, and chest, as well as migraines. Beginning with little dosages and taking 325 mg of anti-inflamatory medicine before each portion of niacin might help. This response generally disappears as the body becomes acclimated to niacin.[43]

# Cosmetic Benefits and Side Effects of Topical Niacinamide

In beauty care products, niacinamide is for the most part planned at a grouping of 4 to 5% andis utilized to control skin maturing and pigmentation. A few clinical preliminaries have shown thatthe plan containing niacinamide eases



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

skin maturing, for example, kinks, versatility, and skin tone, contrasted with the control definition that doesn'tcontain nicotine. While niacinamidecontaining beauty care products are utilized in a well-plannedroutine, you can expect a skinmaturing letting impact similar to that free from retinolitems. Certainly, you can expect a decent impact with mix of niacinamidefurthermore, retinol While items containing niacinamide are applied hyperpigmentedregions, skin-easing up impacts can be anticipated. The facial skin-easing up adequacy of4% niacinamide is practically similar to that of 4% hydroquinone. The underarmskin-easing up viability of 4% niacinamide is somewhat more fragile than 0.5% desonide. Niacinamide-containing items can be utilized along with sunscreen itemsto weaken sun-actuated skin maturing pigmentation. The skin-easing up viability of niacinamide can be anticipated to increment with the utilization of a gadget that makes a differencetransdermal retention of the dynamic fixing Niacinamide can be joined withother dynamic elements for added skin-easing up viability. If niacinamide plays ajob in repressing melanosome move in forestalling pigmentation, consolidating it withother dynamic fixings that assume an alternate part would expand the impact. Potentialcontender for mix with niacinamide for this reason might incorporate substances thathinder the declaration of proteins engaged with melanin amalgamation, that repress thereactant movement of a protein, as well as that diminish the general proportion of eumelaninto pheomelaninIn spite of the fact that niacinamide is viewed as an extremely protected supplement, its drawn out use at veryhigh portions might make secondary effects the liver or different organs. Serious metabolic andepigenetic changes were seen in rodents took care of with high portions of over alongperiod. When niacinamide niacinamide was applied to the skin, human subjects didn'tfeel stinging sensation or flushing, and bothering didn't show up in a solitary utilize essentialbothering test or a total disturbance test for 21 days with 5% item. Hence, niacinamide is very much endured by the skin at the typically utilized fixations (<5%) By the by, the skin response to niacinamide can shift contingent upon the skin conditionof every person; in this manner, it is important to counsel a specialist on the off chance

that serious secondary effects exist.[44]

### Special Precautions and Warnings

When taken by mouth: Niacin is logical safe for a great many people when utilized suitably. Solution items containing niacin are protected when taken as coordinated. Niacin-containing food varieties or niacin supplements are protected when taken in dosages lower than 35 mg day to day.

A typical result of niacin is a flushing response. This could cause consuming, tingling, and redness of the face, arms, and chest, as well as cerebral pains. Beginning with little dosages and taking 325 mg of headache medicine before each portion of niacin might help. This response for the most part disappears as the body becomes acclimated to niacin.[45]

**Pregnancy and breast-feeding**: Niacin is probable safe when taken by mouth while pregnant and bosom taking care of. The most extreme suggested measure of niacin while pregnant or bosom taking care of is 30 mg day to day in those under 18 years old, and 35 mg everyday for those 19 years and more established.

**Children:** Niacin is reasonable safe when taken by mouth in portions beneath the mediocre upper admission level (UL) by age. The UL is 10 mg for youngsters 1-3 years old, 15 mg for kids 4-8 years old, 20 mg for youngsters 9-13 years old, and 30 mg for kids 14-18 years old.[46]

**Allergies**: Niacin could deteriorate sensitivities by making receptor be delivered. Receptor is the synthetic answerable for hypersensitive side effects.

**Chest pain (angina)**: Niacin ought to be utilized carefully in individuals with angina.

**Diabetes**: Niacin could increment glucose. Individuals with diabetes who take niacin ought to check their glucose cautiously.

**Gallbladder disease**: Niacin could exacerbate gallbladder.

Gout: A lot of niacin could expand the gamble for gout.

**kidney disease**: Niacin could aggregate in individuals with kidney sickness. This could really hurt.

**Liver disease**: Taking high dosages of niacin could increment liver harm. Try not to utilize enormous sums assuming you have liver illness.

**Low blood pressure**: Taking niacin in high dosages could bring down blood pressure and deteriorate this condition.

**Stomach or intestinal ulcers**: Niacin could exacerbate ulcers. Try not to utilize enormous sums on the off chance that you have ulcers.

**Surgery**: Niacin could impede glucose control during and after medical procedure. Talk with your medical services supplier about whether you ought to quit



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

taking niacin before a booked a medicalprocedure.

Fatty deposits around tendons (tendon xanthomas): Niacin could build the gamble of diseases in xanthomas.

**Thyroid disorders**: Thyroxine is a chemical created by the thyroid organ. Niacin could bring down blood levels of thyroxine. This could demolish side effects of specific thyroid problems.

### Interactions[47]

Moderate Interaction

- Be wary of this blend
- Alcohol (Ethanol) interacts with NIACIN AND NIACINAMIDE (VITAMIN B3)

Niacin can cause flushing and irritation. Drinking liquor alongside niacin could aggravate the flushing. There is additionally some worry that polishing off liquor with niacin could expand the possibility having liver harm.

 Allopurinol (zyloprim) interacts with niacin and niacinamide (vitamin b3)

Allopurinol is utilized to treat gout, taking enormous portions of niacin could deteriorate gout and lessening the impacts of allopurinol

 Medications for diabetes (antidiabetic drugs) interacts with niacin and niacinamide (vitamin b3)

High portions of niacin could increment glucose levels. taking niacin alongside diabetes drugs could decrease the impacts of these prescriptions.

 Medications used for lowering cholesterol (bile acid sequestrants) interacts with niacin and niacinamide (vitamin b3)

A few prescriptions called bile corrosive sequestrants can diminish how much niacin the body ingests. this could diminish the impacts of niacin. take niacin and these prescriptions somewhere around 4-6 hours separated.

 Medications used for lowering cholesterol (statins) interacts with niacin and niacinamide (vitamin b3)

Taking niacin alongside statins could build the gamble for muscle harm in certain individuals. use with alert.

• Probenecid (benemid) interacts with niacin and niacinamide (vitamin b3)

Probenecid is utilized to treat gout, taking huge portions of niacin could deteriorate gout and reduction the impacts of probenecid.

• Sulfinpyrazone (anturane) interacts with niacin and niacinamide (vitamin b3)

sulfinpyrazone is utilized to treat gout. taking enormous portions of niacin could demolish gout and decline the impacts of sulfinpyrazone.

• Medications for high blood pressure (antihypertensive drugs) interacts with niacin and niacinamide (vitamin b3)

Niacin could bring down circulatory strain, taking niacin alongside meds that lower pulse could cause circulatory strain to go excessively low, screen your circulatory strain intently.

 Medications that can harm the liver (hepatotoxic drugs) interacts with niacin and niacinamide (vitamin b3)

Niacin could hurt the liver. a few prescriptions can likewise hurt the liver. taking niacin alongside a medicine that can hurt the liver could expand the gamble of liver harm.

• Medications that slow blood clotting (anticoagulant / antiplatelet drugs) interacts with niacin and niacinamide (vitamin b3)

Niacin could slow blood thickening. taking niacin alongside drugs that additionally sluggish blood coagulating could build the gamble of swelling and dying.

• Thyroid hormone interacts with niacin and niacinamide (vitamin b3)

The body normally creates thyroid chemicals. niacin could diminish thyroid chemical levels. taking niacin with thyroid chemical pills could diminish the impacts of thyroid chemical.

• Gemfibrozil (lopid) interacts with niacin and niacinamide (vitamin b3)

taking niacin alongside gemfibrozil could build the gamble for muscle harm in certain individuals. use with alert.

• Nicotine patch (nicoderm) interacts with niacin and niacinamide (vitamin b3)

niacin can once in a while cause flushing and discombobulation. nicotine patches can likewise cause flushing and wooziness. taking niacin and utilizing a nicotine fix might build the gamble of flushing and unsteadiness.

### **Minor Interaction**

• Aspirin interacts with niacin and niacinamide (vitamin b3)

ibuprofen is much of the time used to decrease the flushing brought about by niacin. these low portions of ibuprofen don't appear to cause any issues when taken with niacin. yet, taking higher dosages of ibuprofen, like 1 gram every day, could diminish how quick the body disposes of niacin. this could make there be an excessive amount of niacin in the body and perhaps lead to secondary effects. stay with lower portions of ibuprofen, like 325 mg or less.



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

### **BENEFITS [48]**

- It fortifies the skin hindrance, in this manner holding dampness and protecting the face from ecological harm.
- Niacinamide advances the normal creation of keratin (a primary protein tracked down in your hair, skin, and nails), which keeps your skin feeling and looking energetically firm.
- Forestalls (and even blurs!) hyperpigmentation before dinnertime out your complexion and holding your skin's normal daintiness.
- Limits any redness on your skin.
- Directs sebum creation.
- Revamps solid skin cells.
- Lessens the presence of barely recognizable differences and kinks.
- Safeguards against oxidative pressure and helps fix harmed DNA.
- Treats imperfections.
- Limits enormous pores, and fixes loosened up poreS.
- It keeps your skin hydrated.
- It assists with scarcely discernible differences and kinks.
- It can forestall skin disease.
- It fixes your skin.
- It is viable with most skincare items and skin types.

### How to Apply Niacinamide: [49]

How you apply niacinamide will especially rely upon the niacinamide item being utilized - obviously, the manner in which you apply a niacinamide toner isn't equivalent to you would apply a serum or cream. Our recommendation is to constantly allude to the directions that accompany the item to guarantee that you are receiving the rewards.

As indicated by ensured dermatologists, the most ideal way to accomplish results is to utilize leave-on niacinamide items; like toners, serums or creams, and apply them two times every day. As referenced before, the niacinamide items you decide to utilize will differ contingent upon your skin type. Keep in mind, you can utilize more that one niacinamide skin health management item in your everyday practice!

You might decide to utilize a hydrating toner with niacinamide just

subsequent to purging and wiping your skin off, trailed by a niacinamide serum as well as cream, prior to securing everything in which an oil of your decision. The significant thing to recollect is the request wherein the items are applied - cleaning agent, toner, serums, lotions, oil. Most slender to thickest, and get done with oil as the last move toward your skincare schedule.

### Dosing [50]

In supplements, niacin is recorded on the mark in niacin reciprocals (NE). 1 mg of niacin is equivalent to 1 mg NE. At the point when niacin is recorded as NE, it could incorporate different types of niacin, including niacinamide, inositol nicotinate, and tryptophan.

Niacin is likewise tracked down in numerous food sources, including meat, fish, milk, eggs, vegetables, and cereals. The sum that ought to be consumed consistently is known as the suggested dietary remittance (RDA). In guys 14 years and more established, the RDA is 16 mg NE. In females 14 years and more established, the RDA is 14 mg NE. While pregnant, the RDA is 18 mg NE. While bosom taking care of, the RDA is 17 mg NE. In kids, the RDA relies upon age. Talk with a medical care supplier to figure out what portion may be best for a particular

### REFERENCE

- [1]. Falsini, B., Piccardi, M., Iarossi, G., Fadda, A., Merendino, E., and Valentini, P. Influence of short-term antioxidant supplementation on macular function in agerelated maculopathy: a pilot study including electrophysiologic assessment. Ophthalmology 2003;110(1):51-60.
- [2]. Amengual JE, Clark-Garvey S, Kalac M, Scotto L, Marchi E, Neylon E, Johannet P, Wei Y, Zain J, O'Connor OA. Sirtuin and pan-class I/II deacetylase (DAC) inhibition is synergistic in preclinical models and clinical studies of lymphoma. Blood. 2013 Sep 19;122(12):2104-13.
- [3]. Anon. Niacinamide Monograph. Alt Med Rev 2002;7:525-9.
- [4]. Bissett DL, Oblong JE, Berge CA. Niacinamide: A B vitamin that improves aging facial skin appearance. Dermatol Surg. 2005;31(7 Pt 2):860-5; discussion 865.
- [5]. Bourgeois BF, Dodson WE, Ferrendelli JA. Interactions between primidone,



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

- carbamazepine, and nicotinamide. Neurology 1982;32:1122-6.
- [6]. Brooks-Hill RW, Bishop ME, Vellend H. Pellagra-like encephalopathy complicating a multiple drug regimen for the treatment of pulmonary infection due to Mycobacterium avium-intracellulare (letter). Am Rev Resp Dis 1985;131:476.
- [7]. Cabrera-Rode E, Molina G, Arranz C, Vera M, et al. Effect of standard nicotinamide in the prevention of type 1 diabetes in first degree relatives of persons with type 1 diabetes. Autoimmunity. 2006;39(4):333-40.
- [8]. Cannizzaro MV, Dattola A, Garofalo V, Del Duca E, Bianchi L. Reducing the oral isotretinoin skin side effects: efficacy of 8% omega-ceramides, hydrophilic sugars, 5% niacinamide cream compound in acne patients. G Ital Dermatol Venereol. 2018;153(2):161-164.
- [9]. Centre for Clinical Practice at NICE (UK). Hyperphosphataemia in Chronic Kidney Disease: Management of Hyperphosphataemia in Patients with Stage 4 or 5 Chronic Kidney Disease. National Institute for Health and Care Excellence: Clinical Guidelines. Manchester: National Institute for Health and Care Excellence (UK); 2013 Mar.
- [10]. Connell NJ, Grevendonk L, Fealy CE, et al. NAD+-Precursor Supplementation With L-Tryptophan, Nicotinic Acid, and Nicotinamide Does Not Affect Mitochondrial Function or Skeletal Muscle Function in Physically Compromised Older Adults. J Nutr 2021;151(10):2917-2931.
- [11]. De Moraes CG, John SWM, Williams PA, Blumberg DM, Cioffi GA, Liebmann JM. Nicotinamide and Pyruvate for Neuroenhancement in Open-Angle Glaucoma: A Phase 2 Randomized Clinical Trial. JAMA Ophthalmol 2022;140(1):11-18.
- [12]. DeBoer MD, Platts-Mills JA, Elwood SE, et al. Effect of scheduled antimicrobial and nicotinamide treatment on linear growth in children in rural Tanzania: A factorial randomized, double-blind, placebocontrolled trial. PLoS Med 2021;18(9):e1003617.
- [13]. Elliott RB, Pilcher CC, Fergusson DM, Stewart AW. A population based strategy to prevent insulin-dependent diabetes using

- nicotinamide. J Pediatr Endocrinol Metab1996;9:501-9.
- [14]. Eustace A, Irlam JJ, Taylor J, Denley H, Agrawal S, Choudhury A, Ryder D, Ord JJ, Harris AL, Rojas AM, Hoskin PJ, West CM. Necrosis predicts benefit from hypoxiamodifying therapy in patients with high risk bladder cancer enrolled in a phase III randomised trial. Radiother Oncol. 2013 Jul;108(1):40-7.
- [15]. Fabbrocini G, Cantelli M, Monfrecola G. Topical nicotinamide for seborrheic dermatitis: an open randomized study. J Dermatolog Treat. 2014 Jun;25(3):241-5.
- [16]. Fatigante L, Ducci F, Cartei F, et al. Carbogen and nicotinamide combined with unconventional radiotherapy in glioblastoma multiforme: a new modality treatment. Int J Radiat Oncol Biol Phys 1997;37:499-504.
- [17]. Ferreira ER, Miola AC, Lima TRR, Schmitt JV, Abbade LPF, Miot HA. Efficacy of intermittent topical 5-fluorouracil 5% and oral nicotinamide in the skin field cancerization: a randomized clinical trial. An Bras Dermatol 2021;96(6):784-787.
- [18]. Food and Nutrition Board, Institute of Medicine. Dietary Reference Intakes for Thiamin, Riboflavin, Niacin, Vitamin B6, Folate, Vitamin B12, Pantothenic Acid, Biotin, and Choline (2000). Washington, DC: National Academy Press, 2000. Available at: https://books.nap.edu/books/0309065542/ht ml/.
- [19]. Gale EA, Bingley PJ, Emmett CL, Collier T; European Nicotinamide Diabetes Intervention Trial (ENDIT) Group. European Nicotinamide Diabetes Intervention Trial (ENDIT): a randomised controlled trial of intervention before the diabetes. onset of type 1 Lancet. 2004;363(9413):925-31.
- [20]. Gale EA. Theory and practice of nicotinamide trials in pre-type 1 diabetes. J Pediatr Endocrinol Metab1996;9:375-9.
- [21]. Greenbaum CJ, Kahn SE, Palmer JP. Nicotinamide's effects on glucose metabolism in subjects at risk for IDDM. Diabetes 1996;45:1631-4.
- [22]. Hakozaki T, Minwalla L, Zhuang J, et al. The effect of niacinamide on reducing cutaneous pigmentation and suppression of melanosome transfer. Br J Dermatol. 2002 Jul;147(1):20-31.



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

- [23]. Hardman JG, Limbird LL, Molinoff PB, eds. Goodman and Gillman's The Pharmacological Basis of Therapeutics, 9th ed. New York, NY: McGraw-Hill, 1996.
- [24]. Haslam RH, Dalby JT, Rademaker AW. Effects of megavitamin therapy on children with attention deficit disorders. Pediatrics1984;74:103-11.
- [25]. Hoskin PJ, Rojas AM, Bentzen SM, Saunders MI. Radiotherapy with concurrent carbogen and nicotinamide in bladder carcinoma. J Clin Oncol. 2010 Nov 20;28(33):4912-8.
- [26]. Hoskin PJ, Rojas AM, Phillips H, Saunders MI. Acute and late morbidity in the treatment of advanced bladder carcinoma with accelerated radiotherapy, carbogen, and nicotinamide. Cancer. 2005;103(11):2287-97.
- [27]. Hoskin PJ, Stratford MR, Saunders MI, et al. Administration of nicotinamide during chart: pharmacokinetics, dose escalation, and clinical toxicity. Int J Radiat Oncol Biol Phys 1995;32:1111-9.
- [28]. Janssens GO, Rademakers SE, Terhaard CH, Doornaert PA, Bijl HP, van den Ende P, Chin A, Marres HA, de Bree R, van der Kogel AJ, Hoogsteen IJ, Bussink J, Span PN, Kaanders JH. Accelerated radiotherapy with carbogen and nicotinamide for laryngeal cancer: results of a phase III randomized trial. J Clin Oncol. 2012 May 20:30(15):1777-83.
- [29]. Janssens GO, Rademakers SE, Terhaard CH, Doornaert PA, Bijl HP, van den Ende P, Chin A, Takes RP, de Bree R, Hoogsteen IJ, Bussink J, Span PN, Kaanders JH. Improved recurrence-free survival with ARCON for anemic patients with laryngeal cancer. Clin Cancer Res. 2014 Mar 1;20(5):1345-54.
- [30]. Jonas WB, Rapoza CP, Blair WF. The effect of niacinamide on osteoarthritis: a pilot study. Inflamm Res 1996;45:330-4.
- [31]. Jorgensen J. Pellagra probably due to pyrazinamide: development during combined chemotherapy of tuberculosis. Int J Dermatol 1983;22:44-5.
- [32]. Kaewsanit T, Chakkavittumrong P, Waranuch N. Clinical Comparison of Topical 2.5% Benzoyl Peroxide plus 5% Niacinamide to 2.5% Benzoyl Peroxide Alone in the Treatment of Mild to Moderate Facial Acne Vulgaris. J Clin Aesthet Dermatol 2021;14(6):35-41.

- [33]. Kamal M, Abbasy AJ, Muslemani AA, Bener A. Effect of nicotinamide on newly diagnosed type 1 diabetic children. Acta Pharmacol Sin. 2006;27(6):724-7.
- [34]. Ketteler M, Wiecek A, Rosenkranz AR, et al. Efficacy and Safety of a Novel Nicotinamide Modified-Release Formulation in the Treatment of Refractory Hyperphosphatemia in Patients Receiving Hemodialysis-A Randomized Clinical Trial. Kidney Int Rep 2020;6(3):594-604.
- [35]. Khodaeiani E, Fouladi RF, Amirnia M, Saeidi M, Karimi ER. Topical 4% nicotinamide vs. 1% clindamycin in moderate inflammatory acne vulgaris. Int J Dermatol. 2013 Aug;52(8):999-1004.
- [36]. Kozan A, Guner RY, Akyol M. A retrospective assessment and comparison of the effectiveness of benzoyl peroxide; the combination of topical niacinamide, gallic acid, and lauric acid; and the combination of benzoyl peroxide and erythromycin in acne vulgaris. Dermatol Ther. 2020;33(4):e13534.
- [37]. Lampeter EF, Klinghammer A, Scherbaum WA, et al. The Deutsche Nicotinamide Intervention Study: an attempt to prevent type 1 diabetes. DENIS Group. Diabetes 1998;47:980-4.
- [38]. Lee DH, Oh IY, Koo KT, Suk JM, Jung SW, Park JO, Kim BJ, Choi YM. Reduction in facial hyperpigmentation after treatment with a combination of topical niacinamide and tranexamic acid: a randomized, double-blind, vehicle-controlled trial. Skin Res Technol. 2014 May;20(2):208-12.
- [39]. Lenglet A, Rahali MA, Sauvage FL, et al. Effect of Sevelamer and Nicotinamide on Albumin Carbamylation in Patients with End-Stage Kidney Disease. Drugs R D 2021;21(2):231-238.
- [40]. Martin AJ, Chen A, Choy B, et al. Oral nicotinamide to reduce actinic cancer: A phase 3 double-blind randomized controlled trial. J Clin Oncol 33, 2015 (suppl; abstr 9000).
- [41]. McCarty MF, Russell AL. Niacinamide therapy for osteoarthritis--does it inhibit nitric oxide synthase induction by interleukin 1 in chondrocytes? Med Hypotheses 1999;53:350-60.
- [42]. McKenney J. New perspectives on the use of niacin in the treatment of lipid disorders. Arch Intern Med 2004;164:697-705.



Volume 8, Issue 3 May-June 2023, pp: 1830-1843 www.ijprajournal.com ISSN: 2249-7781

- [43]. Miralbell R, Mornex F, Greiner R, et al. Accelerated radiotherapy, carbogen, and nicotinamide in glioblastoma multiforme: report of European Organization for Research and Treatment of Cancer trial 22933. J Clin Oncol 1999;17:3143-9.
- [44]. Niaspan [package insert]. Barcelona, Spain: AbbVie LTD; 2015.
- [45]. Nijkamp MM, Span PN, Terhaard CH, Doornaert PA, Langendijk JA, van den Ende PL, de Jong M, van der Kogel AJ, Bussink J, Kaanders JH. Epidermal growth factor receptor expression in laryngeal cancer predicts the effect of hypoxia modification as an additive to accelerated radiotherapy in a randomised controlled trial. Eur J Cancer. 2013 Oct;49(15):3202-9.
- [46]. Niren NM, Torok HM. The Nicomide Improvement in Clinical Outcomes Study (NICOS): results of an 8-week trial. Cutis. 2006;77(1 Suppl):17-28.
- [47]. Olmos PR, Hodgson MI, Maiz A, et al. Nicotinamide protected first-phase insulin response (FPIR) and prevented clinical disease in first-degree relatives of type-1 diabetics. Diabetes Res Clin Pract. 2006;71(3):320-33.
- [48]. Omidian M, Khazanee A, Yaghoobi R, Ghorbani AR, Pazyar N, Beladimousavi SS, Ghadimi M, Mohebbipour A, Feily A. Therapeutic effect of oral nicotinamide on refractory uremic pruritus: a randomized, double-blind study. Saudi J Kidney Dis Transpl. 2013 Sep;24(5):995-9.
- [49]. Papa CM. Niacinamide and acanthosis nigricans (letter). Arch Dermatol 1984;120:1281.
- [50]. Polo V, Saibene A, Pontiroli AE. Nicotinamide improves insulin secretion and metabolic control in lean type 2 diabetic patients with secondary failure to sulphonylureas. Acta Diabetol1998;35:61-4.