

Cold & Flu

- **Immune tonics: andrographis, astragalus, reishi, maitake**
- **Boosts antiviral immunity: echinacea, elderberry**
- **Antimicrobial effects: goldenseal, myrrh, rosemary**



Human Studies of Cold & Flu Ingredients

Ingredient	Design	Dose	Outcome	Ref.
Andrographis	Randomized, double-blind, placebo-controlled trial in 223 patients with uncomplicated upper respiratory tract infection (URTI).	Andrographis 200 mg per day or placebo	In both groups, symptoms improved from day 1 to day 3, but from day 3 to day 5, only patients receiving andrographis continued to improve, including cough, headache and earache, sore throat, and sleep disturbance. The overall efficacy of andrographis over placebo was approximately 2.1 times (52.7%) higher than placebo.	[1]
	A controlled three-arm trial in 130 children aged between 4 and 11 years with an uncomplicated cold over a period of 10 days.	1. Standard treatment including OTC meds 2. Standard treatment plus andrographis 3. Standard treatment plus echinacea	Cold symptoms were less severe in the andrographis group, and the improvement of nasal congestion and discharge was notably improved. Andrographis also accelerated the recovery time and decreased requirements for OTC meds.	[2]
Astragalus	A systematic review including data from two trials of astragalus in children with nephrotic syndrome.	Astragalus 2.25 g twice per day, at least for 3–6 months	The results showed that astragalus reduced URTI in children with nephrotic syndrome compared with prednisone treatment alone (23.9% versus 42.9%; RR = 0.56 and 95% CI = 0.33–0.93).	[3]
Echinacea	A meta-analysis of 14 human trials of echinacea in the prevention and treatment of the common cold.	N/A	Echinacea decreased the odds of developing the common cold by 58% (OR 0.42; 95% CI 0.25–0.71) and the duration of a cold by 1.4 days (weighted mean difference –1.44, –2.24 to –0.64).	[4]
Elderberry	Inhibitory activity of a standardized elderberry liquid extract against clinically relevant human respiratory bacterial pathogens and influenza A and B viruses.	Liquid cultures using the extract at concentrations of 5%, 10%, 15% and 20%	For the first time, it was shown that a standardized elderberry liquid extract possesses antimicrobial activity against both Gram-positive bacteria of <i>Streptococcus pyogenes</i> and group C and G <i>Streptococci</i> , and the Gram-negative bacterium <i>Branhamella catarrhalis</i> in liquid cultures.	[5]

The first company in the industry to have invested in an ISO 17025–accredited laboratory to test for identity, potency, oxidation, disintegration, purity, and more.



Ingredient	Design	Dose	Outcome	Ref.
Goldenseal	The effects of berberine on infections with influenza A in vitro.	Extracts were prepared in a solvent of 50:50 ethanol:nanopure water at a ratio of 1 ml solvent:5 g plant material	The experiments showed strong inhibition of the growth of H1N1 influenza A strains PR/8/34 or WS/33 in RAW 264.7 macrophage-like cells, A549 human lung epithelial-derived cells, and murine bone-marrow-derived macrophages, but not MDCK canine kidney cells.	[6]
Rosemary	Examine the in vitro antimicrobial and antioxidant activity of four oil- or water-soluble rosemary extract formulations.	The reaction mixture contained 200 ml of rosemary extract diluted in 96% ethanol, 125 ml of freshly prepared Folin-Ciocalteu reagent, and 125 ml of 20% sodium carbonate solution. The final mixture was diluted to 1 ml with deionized water.	Gram-positive bacteria were more sensitive than were Gram-negative bacteria, especially for oil-soluble extracts with carnosic acid as the major phenolic compound.	[7]
Myrrh	Not specified	0.3–1.2 g resin per day; 1 g resin 3×/day		

References

1. Saxena, R.C., et al. "A randomized double blind placebo controlled clinical evaluation of extract of *Andrographis paniculata* (KalmCold) in patients with uncomplicated upper respiratory tract infection." *Phytomedicine*, Vol. 17, No. 3–4 (2010): 178–185.
2. Spasov, A.A., et al. "Comparative controlled study of *Andrographis paniculata* fixed combination, *Kan Jang* and an *Echinacea* preparation as adjuvant, in the treatment of uncomplicated respiratory disease in children." *Phytotherapy Research*, Vol. 18, No. 1 (2004): 47–53.
3. Zou, C., et al. "Astragalus in the prevention of upper respiratory tract infection in children with nephrotic syndrome: Evidence-based clinical practice." *Evidence-Based Complementary and Alternative Medicine*, Vol. 2013 (2013): 352130.
4. Shah, S.A., et al. "Evaluation of echinacea for the prevention and treatment of the common cold: A meta-analysis." *The Lancet. Infectious Diseases*, Vol. 7, No. 7 (2007): 473–480.
5. Krawitz, C., et al. "Inhibitory activity of a standardized elderberry liquid extract against clinically-relevant human respiratory bacterial pathogens and influenza A and B viruses." *BMC Complementary and Alternative Medicine*, Vol. 11 (2011): 16.
6. Cecil, C.E., et al. "Inhibition of H1N1 influenza A virus growth and induction of inflammatory mediators by the isoquinoline alkaloid berberine and extracts of goldenseal (*Hydrastis canadensis*)."
7. Klancnik, A., et al. "In vitro antimicrobial and antioxidant activity of commercial rosemary extract formulations." *Journal of Food Protection*, Vol. 72, No. 8 (2009): 1744–1752.

Each vegetable capsule contains:

Common andrographis (<i>Andrographis paniculata</i>)	
aerial part extract, 30% andrographolides	200 mg
Astragalus (<i>Astragalus membranaceus</i>)	
root extract, 3% astragalosides	190 mg
European elderberry (<i>Sambucus nigra</i>)	
fruit extract, 13% anthocyanosides	50 mg
Echinacea (<i>Echinacea purpurea</i>) root extract, 4% polyphenols	30 mg
Myrrh (<i>Commiphora myrrha</i>) resin	30 mg
Rosemary (<i>Rosmarinus officinalis</i>)	
leaf extract, 5% carnosic acid	30 mg
Maitake (<i>Grifola frondosa</i>) extract, 40% polysaccharides	10 mg
Reishi (<i>Ganoderma lucidum</i>) extract, 40% polysaccharides	10 mg
Shiitake (<i>Lentinula edodes</i>) extract, 40% polysaccharides	10 mg
Berberine (from berberine hydrochloride)	1.58 mg

Nonmedicinal ingredients: Vegetable magnesium stearate and silicon dioxide in a non-GMO vegetable capsule composed of vegetable carbohydrate gum and purified water.

Directions of use: Adults 19+: Take 1 capsule daily with food, beginning at the onset of cold symptoms, or as directed by your health-care practitioner. Take for 4 to 5 days to see results.

Duration of use: Consult a health-care practitioner for use beyond 10 days.

Cautions and warnings: Discontinue use and consult a health-care practitioner if symptoms persist or worsen, or if new symptoms develop. Consult a health-care practitioner prior to use if you are taking prescription medications; if you have an autoimmune disorder; if you are taking immunosuppressants; if you have a progressive systemic disease such as tuberculosis, leukosis, collagenosis, multiple sclerosis, AIDS or HIV infection; if you have a kidney disorder or diabetes; if you have blood pressure problems; or if you are taking blood thinners.

Contraindications: Do not use if you are pregnant or breast-feeding.

Known adverse events: Hypersensitivity (e.g., allergy) has been known to occur; in which case, discontinue use.

Product #2205 - 30 vegetable capsules - NPN 80105918 - V0576-R6