



RESEARCH SUMMARIES

EpiCor Impacts Cold and Flu Symptoms on Healthy Adults

Summary of two clinical trials:

Flu-Vaccinated Trial: Moyad, M. A., et al., Effects of a modified yeast supplement on cold/flu symptoms. *Urol Nurs* 2008, 28 (1), 50-5. Online reference: <https://www.ncbi.nlm.nih.gov/pubmed/18335698>

Non Flu-Vaccinated Trial: Moyad, M. A., et al., Immunogenic yeast-based fermentate for cold/flu-like symptoms in nonvaccinated individuals. *J Altern Complementary Med* 2010, 16(2), 213-8. Online reference: <https://www.ncbi.nlm.nih.gov/pubmed/20180695>



Introduction

These randomized double-blind placebo-controlled human clinical trials examined the effects of EpiCor® fermentate on the incidence and duration of cold and flu symptoms on non flu-vaccinated and flu-vaccinated subjects.

Flu-Vaccinated Trial: Key Findings

- Cold and flu-like symptom clinical occurrences, as recorded by subjects, were significantly lower with EpiCor vs placebo over 12 weeks (1.26 vs 1.42 days; $p=0.011$).
- Duration of cold and flu-like symptoms were significantly lower by 17% with EpiCor vs placebo (4.16 vs 5.01 days; $p=0.028$).
- Reduced symptoms of hoarseness, nasal stuffiness, and duration of feelings of weakness with EpiCor vs placebo ($p=0.008$).

Non Flu-Vaccinated Trial: Key Findings

- Cold and flu symptoms clinical occurrences, as recorded by subjects, were significantly lower with EpiCor vs placebo over 12 weeks (1.32 vs 1.5 days; $p=0.01$).
- There were no significant reductions in duration or severity of symptoms between intervention and placebo.

Method

Flu-Vaccinated Trial: This was a 12-week trial conducted during the cold and flu season: December 2006 through March 2007. The subjects were 130 healthy adults, ages 18-76 (mean 44 ± 11), who had been vaccinated against that season's influenza virus. 116 subjects finished the trial with 52 taking 500 mg/day EpiCor and 64 taking placebo.

Non Flu-Vaccinated Trial: This was a 12-week randomized, double-blind, placebo-controlled trial conducted during the cold and flu season: January through March. The subjects had not been vaccinated against that season's influenza virus. One hundred and sixteen healthy adult subjects were enrolled in the trial 58 (mean age 37.1) taking 500 mg/day EpiCor and 58 (mean age 39.6) taking placebo. There were two dropouts in the EpiCor group and one dropout in the placebo group due to lack of clinical protocol compliance.

In both trials the recording of common cold or influenza-like symptoms was primarily based on self-report diaries. The following symptoms were self-assessed on a 0-10 point scale for severity (0 = no symptom; 10 = most severe):

headache, general aches and pains, fatigue, weakness, nasal stiffness, nasal drainage, sore throat, cough, hoarseness, chest discomfort and chills; any fever, including the temperature, was also recorded. Incidence, duration and severity of these symptoms can be used to clinically define either a common cold or influenza infection (Centers for Disease Control and Prevention. 2007).

Incidence of symptoms was defined as the number of clinical occurrences self-reported during the entire 12-week study period. Duration of symptoms was defined as the number of consecutive illness days.

Results

Flu-Vaccinated Trial: The EpiCor group had statistically significantly reduced number of incidences of cold and flu symptoms compared to placebo ($p=0.011$) (Figure 1). The EpiCor group had 1.26 clinical occurrences (95% confidence interval (CI) 1.18 – 1.33) and placebo had 1.42 (95% CI 1.32 – 1.53).

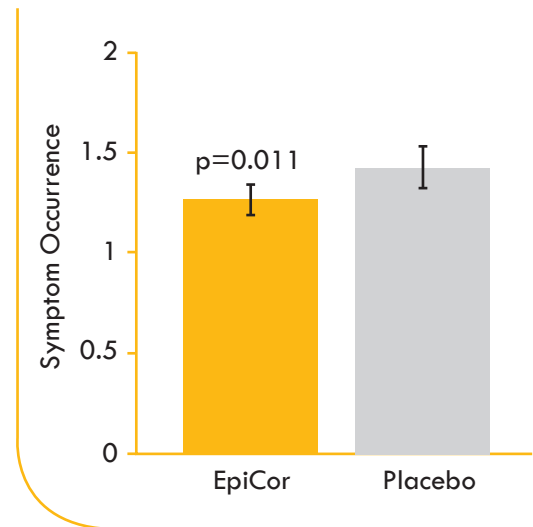
The average number of days with symptoms was significantly reduced by 17% ($p=0.028$), an average of 4.16 symptom days (95% CI 3.66 – 4.66) with EpiCor compared to the placebo average of 5.01 symptom days (95% CI 4.40 – 5.62).

Non Flu-Vaccinated Trial: The EpiCor group had statistically significantly reduced number of incidences of cold and flu symptoms compared to the placebo ($p=0.01$) over the course of the study. The EpiCor group had 1.32 clinical occurrences (95% CI 1.25 – 1.39); the placebo group had 1.51 (95% CI 1.37 – 1.65). There were no statistically significant reductions in duration or severity of symptoms between intervention and placebo.

Conclusion

These clinical studies suggest that daily supplementation with 500 mg EpiCor may reduce cold and flu symptom incidence.

FIGURE 1



Questions? Email EpiCorSales@cargill.com for more information.

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