



HMF Fit For School

PROBIOTIC SUPPLEMENT

Children's Immune Support Formula

- Helps to reduce incidence of upper respiratory tract infection (URTI) symptoms
- Provides 12.5 billion CFU of live microorganisms that temporarily modify gut flora
- Includes 50 mg of vitamin C and 1000 IU of vitamin D per serving
- Chewable tablets with a delicious natural blackcurrant flavour

GENESTRA BRANDS HMF Fit for School includes a combination of research-driven probiotic strains and vitamin C that helps to reduce incidence of URTI symptoms in children. In a recent clinical trial, 57 schoolchildren were randomized to receive either a placebo tablet or HMF Fit for School's probiotic formula plus 50 mg of vitamin C daily for 6 months. Children in the probiotic plus vitamin C group had 33% less incidence of URTI, a significant decrease in the number of days with URTI symptoms, and a 30% decrease in school absenteeism.¹ HMF Fit for School also includes 25 mcg (1000 IU) of vitamin D per tablet to provide complementary immune support.²



EACH TABLET CONTAINS:

Vitamin C (ascorbic acid)	50 mg
Vitamin D ₃ (cholecalciferol)	25 mcg / 1000 IU

Probiotic Consortium

<i>Lactobacillus acidophilus</i> (CUL-21)	5 billion CFU
<i>Lactobacillus acidophilus</i> (CUL-60)	5 billion CFU
<i>Bifidobacterium animalis</i> subsp. <i>lactis</i> (CUL-34)	2.375 billion CFU
<i>Bifidobacterium bifidum</i> (CUL-20)	0.125 billion CFU

Non-Medicinal Ingredients: Xylitol, blackcurrant fruit extract, sorbitol, natural blackcurrant flavour, silica, magnesium stearate

Recommended Dose: Adolescents and Children (4 years and older): Chew one tablet daily, at least two to three hours before or after taking antibiotics, or as recommended by your healthcare practitioner. Immune support: Use for a minimum of four weeks to see beneficial effects.

Product Size: 30 Chewable Tablets

Product Code: 10497

NPN 80056039

GLUTEN FREE

DAIRY FREE

VEGETARIAN

NO FOS

Scientific Rationale:

Several clinical trials have observed an association between probiotic supplementation and reduced incidence of symptoms of common infectious respiratory diseases. A recent meta-analysis of twenty randomized control trials found that probiotic supplementation – particularly with *Lactobacillus* and *Bifidobacterium* strains – reduces the duration of respiratory illness in otherwise healthy children. Probiotic supplementation was linked with significantly fewer days of illness, shorter illness episodes and fewer numbers of days absent from day care/school, in comparison with placebo treatment.^{2,3}

In a 6-month-long, randomized, double-blind, placebo-controlled study, 57 preschool children aged 3-6 were randomized to either the placebo tablet group or the probiotic and vitamin C tablet group (12.5 billion CFU of *Lactobacillus acidophilus* CUL 60 and CUL 21, *Bifidobacterium animalis* subsp. *lactis* CUL34, and *Bifidobacterium bifidum* CUL 20). The URTI symptoms evaluated included sneezing, sore throat, cough, runny and blocked nose. Compared with the placebo group, the children in the probiotic group had

33% less incidence of URTI, a significant decrease in the number of days with URTI symptoms, a 30% decrease in school absenteeism incidence rate, and a significant reduction in cough medication usage.¹

Vitamin D supplementation has been shown to have beneficial effects on the function of a variety of immune cells, including dendritic cells, macrophages, and T cells.⁴ Low vitamin D status has also been associated with an increased risk of respiratory viral infection.^{5,6} In a recent controlled clinical trial conducted on children, daily supplementation with 1000 IU of vitamin D for 3 months was shown to significantly increase plasma vitamin D levels and to promote a healthy cytokine balance. Following vitamin D supplementation, levels of the pro-inflammatory cytokines IL-2, IL-4, IL-6, and IFN- γ were all significantly reduced.⁷ In addition to decreasing the pro-inflammatory immune response, vitamin D promotes the production of antimicrobial proteins from white blood cells to further support immune health.^{8,9}

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REFERENCES

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