

# Histailief™



Support Healthy Histamine Levels & Mast Cell Stability | VA-162 / VA-985

## Key Features:

- Synergistic Actions to **Modulate Histamine Release & Provide Relief for IgE-Mediated Allergic Symptoms\***
- Featuring **Highly Concentrated (2,585 mg DHE\*/cap) Anti-Allergy Herbal Extracts - Tinospora, Perilla, and Stinging Nettle**
- Fortified with **Quercetin, NAC, and Vitamin C**

## Indications:

- *Allergic rhinitis*
- *Mast cell activation syndrome (MCAS)*
- *Histamine intolerance*

## Description:

**Histailief** is a powerful combination of high potency herbal extracts and key antioxidants formulated to relieve seasonal allergy symptoms and support the immune response in allergic conditions.

- **Prevents mast cell degranulation and reduces histamine levels**
- Modulates the immune system and helps **improve Th1/Th2 balance**
- Provides **anti-inflammatory and anti-oxidant support**

## Tinospora cordifolia

Commonly known as Guduchi, *Tinospora cordifolia* has a rich history in ayurvedic medicine. Owing to its diverse array of active constituents, it has also been shown to be anti-allergic, anti-diabetic, anti-inflammatory, anti-oxidant, hepatoprotective, immunomodulatory, and anti-neoplastic.<sup>[1]</sup>

A double-blind, placebo-controlled RCT<sup>[2]</sup> looked at the effects of *Tinospora cordifolia* (TC) extract in patients with allergic rhinitis. Seventy-five patients were randomized to receive TC extract or placebo for 8 weeks. **The treatment group experienced 100% relief from sneezing in 83% of patients, in 69% for nasal discharge, in 61% for nasal obstruction, and in 71% from nasal pruritus.** This was significantly greater improvement than was seen in the placebo group, where the majority of patients experienced no relief in symptoms. The researchers also looked at objective effects of TC extract on nasal smear cytology and leukocyte count, and found that **eosinophil and neutrophil counts decreased and goblet cells were absent in nasal smears following TC treatment.** The same was not observed in the placebo group.

## Perilla frutescens

*Perilla frutescens* has been used as a medicinal herb in China for thousands of years. The herb contains more than 100 compounds and has been shown to possess **anti-inflammatory, anti-oxidant, anti-microbial, and anti-allergic effects.**<sup>[3]</sup>

**Quantity: 84 Vegetarian Capsules**

### Ingredients (per capsule):

Quercetin (from quercetin dihydrate)	150 mg
Guduchi Extract ( <i>Tinospora cordifolia</i> ) (10:1) (aerial parts)	83.5 mg (835 mg DHE*)
Perilla Extract ( <i>Perilla frutescens</i> ) (10:1) (leaf)	100 mg (1,000 mg DHE*)
Stinging Nettle Extract ( <i>Urtica dioica</i> ) (10:1) (herb top)	75 mg (750 mg DHE*)
N-Acetyl-L-Cysteine	75 mg
Vitamin C (from ascorbic acid & ascorbyl palmitate)	50 mg

\*DHE - Dried Herb Equivalent

**Non-medicinal Ingredients:** Silicon dioxide, microcrystalline cellulose, hypromellose (capsule)

**Suggested Use:** Adults – Take 2 capsules, 3 times per day, or as directed by the health care practitioner. Consult a health care practitioner for use beyond 12 weeks.

In a small double-blind RCT, 29 patients with seasonal allergic rhinoconjunctivitis were randomized to receive either treatment with *Perilla frutescens* extract (50 mg or 200 mg) or placebo for 21 days. **The treatment group experienced a significant reduction of symptoms such as itchy nose, watery eyes, and total symptoms compared to placebo.** The treatment group also experienced a significant decrease in the number of neutrophils and eosinophils in nasal lavage fluid.<sup>[4]</sup>

## Quercetin

Quercetin is a naturally occurring polyphenol bioflavonoid found in foods such as apples, onions, and tea leaves. It is one of the most potent dietary antioxidants, providing protection from free radical damage and inhibiting lipid oxidation. Quercetin is also **anti-inflammatory** and can **inhibit platelet aggregation and capillary permeability.**<sup>[5]</sup>

Quercetin is well known for its use in allergic disorders, mainly due to its ability to **stabilize mast cells to prevent the degranulation and release of histamine.**<sup>[6]</sup> It's been shown in clinical trials to **deliver more efficacious effect than cromolyn, a pharmaceutical mast cell 'stabilizer', for contact dermatitis and photosensitivity skin conditions**, by inhibiting mast cell cytokine release.<sup>[7]</sup>



## Allergic Rhinitis

Allergic rhinitis is a chronic inflammatory hypersensitivity disorder, largely mediated by IgE. It is predominantly a Th2 disorder, and exposure to the offending allergen results in widespread release of inflammatory cytokines.

Animal models of AR have shown that oral administration of quercetin for 5-7 days **significantly reduced the symptoms of AR such as sneezing.**<sup>[8]</sup>

## Allergic Asthma

Asthma is a chronic inflammatory lung diseases in which immune hyperactivity to allergens results in inflammation, increased mucus secretion, and airway edema.

In vitro studies have shown that quercetin inhibits mucus secretion from respiratory epithelial cells, while still maintaining normal nasal ciliary movement. Animal models demonstrated that **the benefit of quercetin in allergic asthma was similar to that of medications such as cromolyn sodium and dexamethasone.**<sup>[9]</sup>

## Urtica dioica

Stinging nettle is a ubiquitous plant, and is equally well-known for its distinctive skin contact irritation (hence the name stinging), as well as its use in the treatment of seasonal allergies. In vitro studies have shown that **nettle extract inhibits a number of key inflammatory sequences that lead to the symptoms of seasonal allergies**, including acting as a Histamine-1 receptor antagonist and preventing the release of pro-inflammatory mediators such as histamine by inhibiting mast cell tryptase. It also inhibits prostaglandin formation through inhibition of the pro-inflammatory COX-1 and COX-2 enzymes.<sup>[10]</sup>

In a double-blind RCT, 74 patients with allergic rhinitis and a positive skin prick test were randomized to receive Urtica dioica extract (150mg) or placebo for 4 weeks. While both the treatment and placebo groups experienced a significant improvement in clinical symptom severity, the treatment group also experienced a statistically significant reduction in nasal smear eosinophil count.<sup>[11]</sup>

## N-Acetyl-Cysteine

N-Acetyl-Cysteine (NAC) is itself a potent antioxidant as well as the precursor to glutathione production. NAC is also a **powerful mucolytic** and has a history of use for chronic bronchitis and asthma.<sup>[12]</sup> The mucolytic effects of NAC may therefore be useful in reducing symptoms of allergic conditions in which excess mucus is produced.

## Vitamin C

Vitamin C is known for its role in reducing allergic symptoms by combating oxidative stress and inflammation. Vitamin C has an acute role in mitigating the allergic effects of histamine, as demonstrated in a study in which patients with allergic rhinitis were exposed to inhaled histamine. The researchers found that oral administration of 2g Vitamin C significantly improved bronchial responsiveness, as opposed to no improvement with in the placebo group.<sup>[13]</sup> An observational study of 4,554 children in Korea found that **children with increased Vitamin C consumption had fewer allergic rhinitis symptoms** compared to their peers with lower intake.<sup>[14]</sup>

In a placebo controlled trial of allergic rhinitis, oral Vitamin C (1g per day) or placebo was administered for 1.5 years. All of the patients who showed improvement in allergic rhinitis symptoms had an increase in plasma ascorbic acid levels.<sup>[15]</sup>

## Reference:

1. Saha, S., & Ghosh, S. (2012). *Tinospora cordifolia: One plant, many roles. Ancient science of life*, 31(4), 151.
2. Badar, V. A., Thawani, V. R., Wakode, P. T., Shrivastava, M. P., Gharpure, K. J., Hingorani, L. L., & Khiyani, R. M. (2005). Efficacy of *Tinospora cordifolia* in allergic rhinitis. *Journal of ethnopharmacology*, 96(3), 445-449.
3. Yu, H., Qiu, J. F., Ma, L. J., Hu, Y. J., Li, P., & Wan, J. B. (2017). Phytochemical and phytopharmacological review of *Perilla frutescens* L. (Labiatae), a traditional edible-medicinal herb in China. *Food and Chemical Toxicology*, 108, 375-391.
4. Takano, H., Osakabe, N., Sanbongi, C., Yanagisawa, R., Inoue, K. I., Yasuda, A., ... & Yoshikawa, T. (2004). Extract of *Perilla frutescens* enriched for rosmarinic acid, a polyphenolic phytochemical, inhibits seasonal allergic rhinoconjunctivitis in humans. *Experimental Biology and Medicine*, 229(3), 247-254.
5. Jafarinia, M., Sadat Hosseini, M., Kasiri, N., Fazel, N., Fathi, F., Ganjalikhani Hakemi, M., & Eskandari, N. (2020). Quercetin with the potential effect on allergic diseases. *Allergy, Asthma & Clinical Immunology*, 16, 1-11.
6. Mlcek, J., Jurikova, T., Skrovankova, S., & Sochor, J. (2016). Quercetin and its anti-allergic immune response. *Molecules*, 21(5), 623.
7. Weng et al. Quercetin is more effective than Cromolyn in blocking human mast cell cytokine release and inhibits contact dermatitis and photosensitivity in humans. *PLoS One*. 2012; 7(3): e33805.
8. Kashiwabara et al. (2016). Suppression of neuropeptide production by quercetin in allergic rhinitis model rats. *BMC Complementary and Alternative Medicine*, 16(1), 1-9.
9. Moon et al. (2008). Quercetin inhalation inhibits the asthmatic responses by exposure to aerosolized ovalbumin in conscious guinea-pigs. *Archives of pharmacal research*, 31(6), 771-778.
10. Roschek Jr, B., Fink, R. C., McMichael, M., & Alberte, R. S. (2009). Nettle extract (*Urtica dioica*) affects key receptors and enzymes associated with allergic rhinitis. *Phytotherapy Research: An International Journal Devoted to Pharmacological and Toxicological Evaluation of Natural Product Derivatives*, 23(7), 920-926.
11. Bakhsheee, M. (2017). Efficacy of supportive therapy of allergic rhinitis by stinging Nettle (*Urtica dioica*) root extract: A randomized, double-blind, placebo-controlled, clinical trial. *Iranian journal of pharmaceutical research: IJPR*, 16(Suppl), 112.
12. Grassi, C. (1980). Long-term oral acetylcysteine in chronic bronchitis. A double-blind controlled study. *Eur. J. Respir. Dis.*, 61, 93-108.
13. Bucca, C., Rolla, G., Oliva, A., & Farina, J. C. (1990). Effect of vitamin C on histamine bronchial responsiveness of patients with allergic rhinitis. *Annals of allergy*, 65(4), 311-314.
14. Seo et al. (2013). Association of antioxidants with allergic rhinitis in children from seoul. *Allergy, Asthma & Immunology Research*, 5(2), 81-87.
15. Munjal et al. (2020). Study of vitamin C therapy in allergic rhinitis. *International Journal of Otorhinolaryngology and Head and Neck Surgery*. 6. 1951.

**For Education Purpose Only:** The entire contents are not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of something you have read in this presentation. All statements in this article have not been evaluated by the Food and Drug Administration and are not intended to be used to diagnose, treat, or prevent any diseases.

Manufactured by Naturo Aid Pharmaceutical Inc. in accordance with Good Manufacturing Practices | NHPD-GMP site license #300391

#302-20285 Stewart Crescent, Maple Ridge, BC, V2X 8G1, Canada

Canada & US: 1-800-490-1738 | Fax: 1-604-465-1299

Email: info@vitaaid.com | For more information, please visit our website: www.vitaaid.com