



QUERCETIN, MADE BETTER

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NATURALI

HEALTH - FOOD

QUERCEFIT®

QUERCETIN PHYTOSOME

These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.

QUERCE®

Please note that the physiological activity of the ingredient described herein is supported by the referenced clinical trial reports. Marketers of finished products containing the ingredient described herein are responsible for determining whether the claims made for such products are lawful and in compliance with the laws of the country in which they will market the products.

WHAT IS QUERCEFIT®?

QUERCEFIT® is the patent pending¹ food grade delivery system of **quercetin** from *Sophora japonica* L., formulated with Phytosome proprietary technology to **optimize the biological absorption of the flavonoids**, supporting the overall wellbeing in many conditions. Compared to the unformulated quercetin, **bioabsorption and solubility are greatly optimized** so it can be used at lower dosages retaining its efficacy.²

IMMUNITY HEALTH, SENOLYTIC FUNCTION AND COVID-19

Human studies^{3,4} show that **QUERCEFIT®** helps maintaining immune system health and modulates cytokines cascade, thus **improving the conditions of those exposed to Covid-19, precisely thanks to its senolytic function**: the product supplementation **helps the health condition of people in the initial phases of SARS-CoV-2, without substituting the standard treatments envisaged by the medical protocols**. In fact, the severity of illness often depends by the way the initial phases are faced.

A recent human study⁵ involving 120 **high exposure healthcare** workers show that **QUERCEFIT®** supplementation helps **maintaining health conditions in 75% people working in a COVID-19 infectious environment**.

The completion of a preliminary investigation⁶ on human health support in case of Covid-19 infection - now performed on **100 subjects** - confirmed that just after one week, the administration of **QUERCEFIT®** in addition to the Standard Care significantly increased clearance of the virus (68% QUERCEFIT® vs 24% Standard Care), reduced symptoms occurrence (52% QUERCEFIT® vs 24% Standard Care), improved crucial biomarkers (great optimization in particular for LDH).

Such evidences show once more the efficacy of quercetin, formulated with Phytosome delivery system, in being a favourable supplementation in situations where **possible exposition to SARS-CoV-2 risks is higher**.

THE NATURAL REMEDY IN THE ALLERGY ERA

A recent **randomized, placebo-controlled, double-blind parallel-group** study⁷, aimed to investigate the **effects of a 4-week oral intake of quercetin Phytosome on physiological parameters and relative subjective feelings in Japanese adults who complained of discomfort in the eyes and nose**.

After the subjects were given **250 mg of QUERCEFIT®** twice daily or the placebo for 4 weeks they experienced a **favourable healthy status for their eyes and nose**. Furthermore, the **quality of life of these subjects significantly improved** and it has been proven a **beneficial effect on immune and inflammatory processes in the upper respiratory tract**, main way in for allergens and pathogens.

Taking inspiration from the interesting Japanese study outcomes , a **new investigation⁸ has been designed to deep dive the role of quercetin as a beneficial supplementation when allergic ocular discomfort may occur**.

The results show that **dietary supplements may play a relevant role in the future**

S P E C I F I C A T I O N S

- **34-42% quercetin** by HPLC • suggested dose: **250 mg once or twice a day**
- **yellow powder** for use in nutritional supplements
- **compliant** with main **worldwide markets food regulations** (BELFRIT, US, EU)
- **high tolerability** when assuming **antiplatelet agents, anticoagulants or living with diabetes**.⁹

treatment of allergic conjunctivitis, thanks to proved evidence of their effectiveness and safety.

In particular, there are evidences that **supplementation with QUERCEFIT® may favourably mitigate unbalanced ocular conditions and as stand alone supplementation to preserve eye health over time after allergic symptomatology**. In a controlled **human study on discomforts during allergy season, after 30 days of supplementation with QUERCEFIT® plus the standard management (SM) versus the SM alone**, it has been demonstrated:¹⁰

- up to **50% reduction of day intermittent discomforts frequency**
- up to **70% reduction of night intermittent discomforts frequency**
- **maintenance of breath function (Peak Expiratory Flow) at physiological levels in mild-persistent discomforts**

In another controlled **human study focussing on local skin discomforts**, **QUERCEFIT® was administrated for just 3 days**, then followed by a local histamine skin stimulus.

Compared to the control, only the **healthy volunteers administered with the extract** showed statistically significant:¹¹

- **dose-dependent control of all main local conditions;**
- **skin conditions amelioration and capillary filtration reduction**

BETTER PERFORMANCE, FASTER RECOVERY

In a **controlled human study**¹² on healthy triathlon athletes, **QUERCEFIT® demonstrated to support optimal physical performance and prompt recovery**:

- statistically significant **results in each single triathlon test** (swimming, biking, running);
- **higher triathlon time reduction (-11.3%)** compared to control [-3.9%] **after just 14 days of oral supplementation;**
- **reduced discomfort** related to sport activity;
- **lower oxidative stress (PFR) 1 hr after the final run**
- **healthy blood levels maintenance**, with a **reduced UBR and LDH** after prolonged sport activity.

References

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- ³ Di Piero *et al.*, International Journal of General Medicine 2021;14 2359-2366. ⁹ Cesarone, M. R., *et al.*, Minerva medica [2019].
- ⁴ Di Piero *et al.*, International Journal of General Medicine 2021;14 2807-2816. ¹⁰ Riva A. *et al.*, Minerva Cardioangiol. 2018 Sep 13. doi: 10.23736/S0026-4725.18.04795-3.
- ⁵ Rondanelli, M. *et al.* Life 12.1 (2022): 66. ¹¹ Manuscript submitted.
- ⁶ Di Piero *et al.*, Frontiers in Pharmacology DOI=10.3389/fphar.2022.1096853 ¹² Riva A. *et al.*, Minerva Medica 2018 august;109(4):285-9.



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