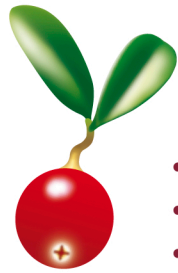


Cranberry: Nature's relief



- American cranberry (*Vaccinium Macrocarpon*) was used by Native Americans to treat bladder and kidney ailments.⁹
- In 17th century, cranberries were used as medicine to relieve blood disorders, stomach ailments, liver problems, vomiting, appetite loss, scurvy and cancer.⁹
- Before discovery of antibiotics, cranberry was a popular treatment for urinary tract infections (UTI).⁹
- A rich source of hippuric acid, the antioxidant-enzyme proanthocyanidin, vitamin C and calcium.
- Widely considered to have multiple medicinal applications.

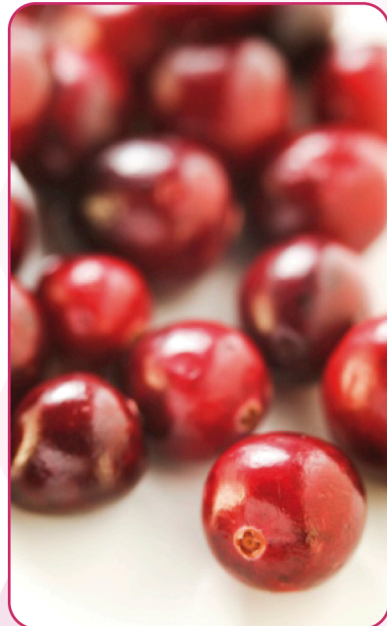
How does CranUT Cranberry Supplement work against UTI?

- One capsule of CranUT Cranberry Supplement contains 350mg of pure cranberry extract, equivalent to approximately 300ml of 100% cranberry juice.
- Cranberries contain hippuric acid and the antioxidant-enzyme proanthocyanidin both of which exhibit potent anti-adhesion activity against both sensitive and resistant strains of P-fimbriated *E. coli*.¹⁶
- Anti-adhesive property of cranberries may help prevent UTI in 2 ways:
 - It directly prevents *E. coli* from adhering to uroepithelial cells
 - It selects for less adherent bacterial strains in the stool.¹⁷
- In vitro studies have observed potent inhibition of bacterial adherence of *Escherichia coli* and other gram-negative uropathogens.

Cranberry has been found to specifically inhibit hemagglutination of *E. coli* by expression of types 1 and P adhesin through the component compounds fructose and proanthocyanidins.⁹

- "The potential of cranberry products to act as a non-antibiotic alternative for preventing UTI, thereby reducing the total amount of antibiotics prescribed for UTI, could have great public health significance."⁹

Nature's relief, scientifically and clinically proven



In a randomized, placebo-controlled trial of 150 women over a 12-month period:

- Both cranberry juice and cranberry tablets statistically and significantly decreased the number of patients experiencing at least 1 symptomatic UTI/year (to 20% and respectively) compared with placebo (to 32%) (p<0.05).
- Total antibiotic consumption was less annually in both treatment groups compared with placebo.¹⁸

In a trial of 150 women who were randomized to cranberry/lingonberry juice, probiotic *Lactobacillus* supplementation or no intervention for 12 months:

- Cranberry juice resulted in a statistically significant 20 percent reduction in absolute risk of infection, compared with no effect in the probiotic-supplementation and no-intervention groups.⁹

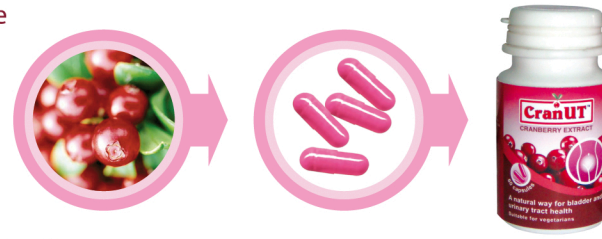
In a randomized double-blind, placebo controlled trial in 376 older patients in hospital, daily ingestion of 300 ml of cranberry juice resulted in:

- Fewer cases of symptomatic UTI in cranberry group (7/187) compared with placebo (14/189).
- Significantly fewer infections with *Escherichia coli* in the cranberry group (13 versus 4).¹⁶



Summary Benefits: CranUT Cranberry Supplement vs. UTI

- Contains hippuric acid and the antioxidant-enzyme proanthocyanidin which exhibit potent anti-adhesion activity against both sensitive and resistant strains of P-fimbriated *E. coli*.¹⁶
- Significantly reduces risk of infection.⁹
- Significantly decreased the number of patients experiencing at least 1 symptomatic UTI/year compared with placebo.¹⁸
- Significantly lessens infections with *Escherichia coli*.
- Lowers total annual antibiotic consumption compared with placebo.¹⁸



Other health benefits of CranUT Cranberry Supplement



- ✓ 100% natural and sugar-free
- ✓ A rich source of hippuric acid and the antioxidant-enzyme proanthocyanidin which prevents *E. coli* and other UTI-causing bacteria from sticking to the urinary tract.
- ✓ Helps relieve symptoms of UTI, including lower abdominal pain, burning or stinging during urination and some difficulties experienced during urinating.
- ✓ Assists with improving bladder control.
- ✓ Deodorizes urine odor.
- ✓ Helps increase the body's defense against viral and fungal infection.
- ✓ Helps reduce low-density lipoproteins (LDL), promoting healthy cholesterol levels for a healthy heart.¹⁹
- ✓ Increasing evidence to support anti-carcinogenic properties of cranberry.²⁰⁻²⁷
- ✓ Contains powerful antioxidants that combat cell damage and aging.
- ✓ Helps combat dental plaque build-up²⁸, inhibits *S. mutan* formation²⁹ and relieve inflammation from periodontitis.³⁰
- ✓ Source of vitamin C and calcium. Helps improve overall well-being.
- ✓ One capsule of CranUT Cranberry Supplement is equivalent to approximately 300ml of pure cranberry juice without dilution, sugar, colorings, flavorings or preservatives.



For more info visit www.cranut.com

Distributed by:



DKSH Singapore Pte Ltd
34 Boon Leat Terrace
Singapore 119866
Tel: +65 6471 0888

Made in the Philippines from ingredients imported from Australia and the U. S. A.

CranUT™ is a global brand exported & marketed by: Whealth Inc.
Metro Manila, Philippines
Tel: +63 2 524 6549 Fax: +63 2 521 8311
www.whealth.com.ph

Cranberry effectively prevents UTI and a whole lot more!



Information for Doctors, Women's Health Specialists and other Health Professionals

²⁴ Verma, A.K., et al. Inhibition of 7,12-dimethylbenz(a)anthracene- and N-nitrosomethylurea-induced rat mammary cancer by dietary flavonol quercetin. Cancer Res. 1988;48(20):5754-5758

²⁷ Guthrie, N. Effect of cranberry juice and products on human breast cancer cell growth. FASEB J. 2000;14(4):A771

²² Labrecque, J., Bodet, C., Chandad, F., Grenier, D. Effects of a high-molecular-weight cranberry fraction on growth, biofilm formation and adherence of *Porphyromonas gingivalis*. The Journal of Antimicrobial Chemotherapy. 2006 August;58(2):439-43

²⁴ Duarte S, Gregoire S, Singh AP, Vorsa N, Schaich K, Bowen WH, Koo H. Inhibitory effects of cranberry polyphenols on formation and acidogenicity of *Streptococcus mutans* biofilms. FEMS Microbiol Lett. 2006 Apr;257(1):50-6

²⁸ Bodet, C., Chandad, F., Grenier, D. Anti-inflammatory Activity of a High-molecular-weight Cranberry Fraction on Macrophages Stimulated by Lipopolysaccharides from Periodontopathogens. J Dent Res 85(3):235-239, 2006