

## Safety is our most important ingredient

HiPP

combiotic<sup>®</sup> **10** 

**YEARS** 

HiPP ORGANIC COMBIOTIC® Rounded off with Metafolin®



## Science and nature hand in hand

Information for healthcare professionals



## Safety through research, innovation and experience

#### Our milestones in developing our formulae:

- 2002: pioneering use of **probiotic lactic acid cultures** originally obtained from human milk\*\*
- since 2011: development of HiPP ORGANIC COMBIOTIC<sup>®</sup> with a unique combination of Limosilactobacillus fermentum and GOS
- 2021: only from HiPP HiPP ORGANIC COMBIOTIC<sup>®</sup> rounded off with Metafolin<sup>®</sup>



UNIQUE

a unique composition

of pro- and prebiotics

inspired by nature



#### **TRIED-AND-TESTED**

a concept to support intestinal microbiota, tried-and-tested for 10 years



#### **ROUNDED OFF**

with a bioactive folate form that is also found in human milk



#### HiPP Research Group on Human Milk: understanding nature's example.

- Running for over 10 years
- In partnership with specialists from around the world
- 2007: pre- and probiotics identified as key factors influencing intestinal health

For more information, including reports from the research group, visit <u>hcp.hipp.com</u> Section: Studies



\* Metafolin<sup>®</sup> is a registered trademark of Merck KGaA, Darmstadt, Germany. \*\* Human milk contains a large number of natural lactic acid cultures that can vary from mother to mother.

## A safe and proven composition

### HiPP ORGANIC COMBIOTIC®

support

intestinal flora

Science and nature hand in hand





A triad and totad

A tried-and-tested concept for **proven safety**  Support of baby's





### The safe next step in our human milk research





**DNA synthesis** 



**Cell division** 



formation

Blood

Protein synthesis





While trying to get pregnant and during pregnancy

Birth



While breastfeeding

Preventing neural tube defects: 5-MTHF supplementation

Ideal infant development: 5-MTHF in human milk

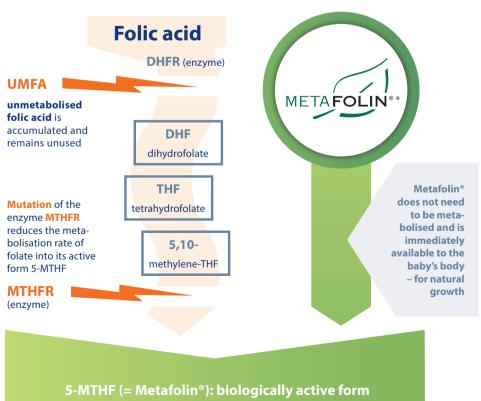
## **HiPP ORGANIC COMBIOTIC® with Metafolin®**

Natural folate form (5-MTHF) as found in human milk: immediately available and safe.

Safety is the top priority at HiPP: Metafolin<sup>®</sup> is safe for use in formula<sup>2</sup>!

Until 2021: fortifying formulae with synthetic folic acid was the standard

As of 2021: only in HiPP **ORGANIC COMBIOTIC®** 



For our HiPP ORGANIC COMBIOTIC<sup>®</sup> we use the most advanced folate form - Metafolin®:

- ✓ a calcium salt of 5-MTHF
- ✓ it is a bioactive form of folate
- ✓ it corresponds to the main folate form in human milk, making it ideally suitable for use in formula<sup>3</sup>

For more information on Metafolin<sup>®</sup>, scan:



\* Metafolin® is a registered trademark of Merck KGaA, Darmstadt, Germany



# The safe choice for a healthy intestinal microbiota

Building up the intestinal microbiota from day one is vital, as over 80% of immunocompetent cells are located in the intestine.

A well-developed intestinal microbiota provides optimum protection:

- promotes the development of the immune system<sup>4, 5</sup>
- protects against intestinal infections<sup>4</sup>

#### What influences the intestinal microbiota?

- type of birth (vaginal or caesarean section)
- · whether the child is breastfed or bottle-fed
- composition of formula (standard, prebiotic, probiotic or synbiotic)

As a natural, synbiotic substance, human milk provides your child with everything they need for an ideal composition of their intestinal microbiota. Caesarean-born infants had an intestinal microbiota that more closely resembled the maternal skin microbiota rather than the maternal vaginal flora.<sup>6</sup>



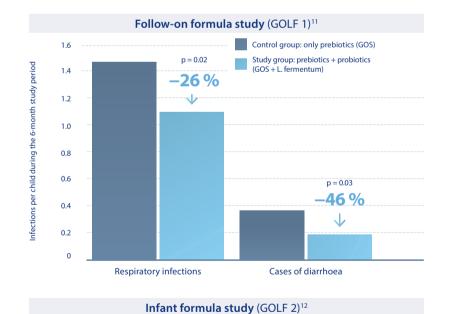
Effective support for a healthy intestinal microbiota

## A safe and effective composition

#### **HiPP ORGANIC COMBIOTIC®**

with its synbiotic composition of pre- and probiotics – galacto-oligosaccharides (GOS) and Limosilactobacillus fermentum – promotes a healthy intestinal microbiota and increases tolerability.





## The prebiotic GOS supports the developing digestive system and leads to:<sup>7-10</sup>

- less colic
- increased stool frequency
- softer stool consistency and a stool colour similar to that of breastfed children





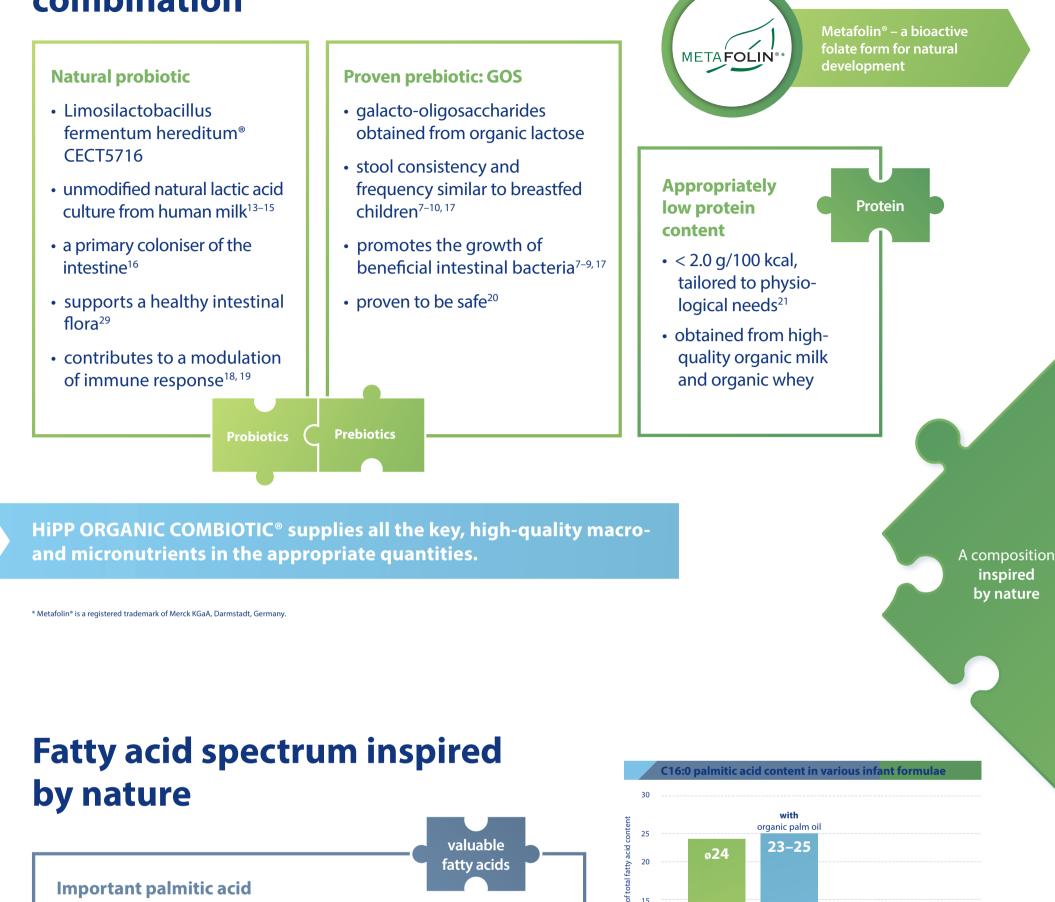
Clinical studies prove that the synbiotic combination of prebiotics and probiotics in HiPP ORGANIC COMBIOTIC®:

significantly reduces gastrointestinal infections<sup>11, 12</sup>

✓ is significantly better than only using prebiotics (GOS)<sup>11, 12</sup>

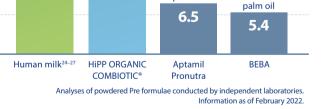


## **Definitely the ideal** combination



- the predominant saturated fatty acid in human milk
- important for good tolerability of formula<sup>22</sup>
  - less watery and more yellowy stools (similar to those of breastfed children)

Omega-3 and omega-6 LCPs



without

palm oil

without

- evidence-based and recommended<sup>23</sup>
- important for brain and nerve tissue development, as well as visual development
- optimum ratio of omega-3 and omega-6 LCPs (DHA and ARA)

Our unique mixture of fats in HiPP ORGANIC COMBIOTIC® is made from sustainable and organic sunflower, palm and rapeseed oil in order to produce a fatty acid spectrum close to that of human milk.

#### Why use palm oil in formulae?

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- ✓ Palm oil is the best source of palmitic acid.
- ✓ The aim is to achieve a palmitic acid content similar to that of human milk.
- ✓ ESPGHAN\* confirms that palm oil is suitable for use in formulae.<sup>28</sup>

\* ESPGHAN – European Society für Pediatric Gastroenterology, Hepatology and Nutrition



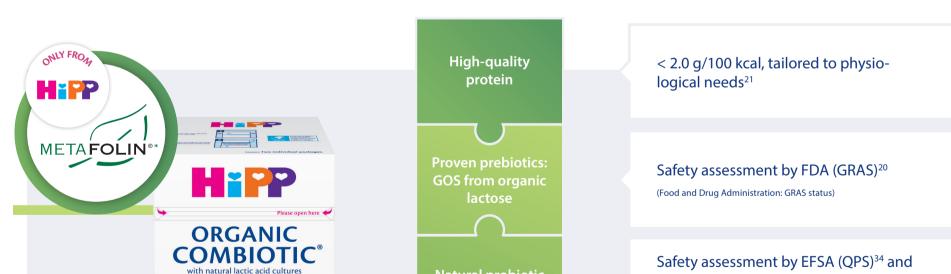
### **Babies' safety and wellbeing come first**

Multiple studies over a number of years prove that HiPP ORGANIC COMBIOTIC® represents the highest quality:

- long-term studies demonstrate that the combination of GOS + L. fermentum is safe<sup>29</sup>
- proven tolerability of the combination of GOS + L. fermentum
- with Metafolin<sup>®</sup> a bioactive folate source that is inspired by nature

	PROVEN BENEFICIAL EFFECT	STUDY
Natural probiotc L. fermentum	can <b>colonise the human intestine</b>	Severin AL et al. 2004 <sup>30</sup> ; Martín R et al. 2005 <sup>14</sup> ; Olivares M et al. 2007 <sup>18</sup>
	strengthens the integrity of the intestinal mucosa	Peran L et al. 2006 <sup>31</sup> ; Olivares M et al. 2006 <sup>32</sup>
	protects against intestinal infections	Olivares M et al. 2006 <sup>32</sup>
	contributes to <b>modulation of immune response</b>	Olivares M et al. 2007 <sup>18</sup> ; Perez-Cano FJ et al. 2010 <sup>19</sup>
Proven prebiotic GOS	promotes the growth of Bifidobacteria and Lactobacilli (bifidogenic effect)	Ben XM et al. 2004 <sup>7</sup> und 2008 <sup>17</sup> ; Fanaro S et al. 2009 <sup>8</sup> ; Sierra C et al. 2015 <sup>9</sup>
	helps produce stool consistency and frequency similar to breastfed children	Sierra C et al. 2015%; Fanaro S et al. 20098; Ben XM et al. 20047 und 200817; Ashley C et al. 201210
	helps <b>reduce the stool pH value</b>	Sierra C et al. 2015 <sup>9</sup>
	has a beneficial effect in preventing infant colic	Giovannini M et al. 2014 <sup>33</sup>
Proven prebiotic GOS L. fermentum	<b>positively influences the microbiota</b> by promoting the growth of Lactobacilli and Bifidobacteria	GOLF 1 (follow-on formula) Maldonado J et al. 2012 <sup>11</sup>
	helps <b>reduce the frequency of infections</b> compared to prebiotic (GOS) alone (diarrhoea and/or respiratory problems)	GOLF 1 (follow-on formula) Maldonado J et al. 2012 <sup>11</sup> ; GOLF 2 (infant formula) Gil-Campos M et al. 2012 <sup>12</sup>
Bioactive folate form Metafolin®	<b>Metafolin® is safe for use in formulae.</b> Compared to formulae with synthetic folic acid, infants with Metafolin® develop equally well.	Troesch B et al. 2019 <sup>2</sup>
	For more information, see our scientific dossier or visit <u>hcp.hipp.com</u>	

### A safe and ideal composition





Natural probiotic L. fermentum

Omega-3 and omega-6 LCP fatty acids

Metafolin<sup>®</sup> for natural development

A tried-and-tested concept for **proven safety**  FDA (GRAS)<sup>35</sup>

(EFSA: European Food Safety Authority, QPS: Qualified Presumption of Safety)

Docosahexaenoic acid (DHA) and arachidonic acid (ARA) as per current scientific recommendations<sup>23</sup>

Safety confirmed by clinical study  $^{2}$  and EFSA/EU.  $^{36}$ 

\* Metafolin® is a registered trademark of Merck KGaA, Darmstadt, Germany.





#### **Important information**

**Breastfeeding is best for a baby.** A balanced diet during pregnancy and after birth promotes lactation. Women who do not wish to breastfeed should be informed that it is difficult to reverse that decision. It is important for women to know that the complementary feeding of formula could compromise their breastfeeding success.

Infant formulae should only be given upon the advice of independent experts. Advise parents on how to prepare the formula and note the important information and instructions on the packaging. Incorrect preparation of formula can be harmful to babies' health.

- <sup>1</sup> Bailey LB et al. J Nutr. 2015; 145: 1636–1680.
  <sup>2</sup> Troesch B et al. PLoS ONE 2019 14(8): e0216790.
  <sup>3</sup> Page R. et al. Am J Clin Nutr. 2017 May; 105(5): 1101–1109.
  <sup>4</sup> Houghteling PD et al. J PGN 2015; 60(3): 294–307.
  <sup>5</sup> Gensollen T et al. Science 2016; 352(6285): 539–544.
  <sup>6</sup> Dominguez-Bello MG et al. PNAS 2010 107 (26) 11971–11975.
  <sup>7</sup> Ben XM et al. Chinese Medical Journal 2004; 117(6): 927–931.
  <sup>8</sup> Fanaro S et al. J Pediatr Gastroenterol Nutr. 2009; 48: 82–88.
  <sup>9</sup> Sierra C et al. Eur J Nutr 2015; 54(1): 89–99.
  <sup>10</sup> Ashley C et al. 2012 Nutrition Journal 2012; 11: 38.
  <sup>11</sup> Maldonado J et al. J Pediatr Gastroenterol Nutr 2012; 54(1): 55–61.
  <sup>12</sup> Gil-Campos M et al. Pharmacol Res 2012; 65(2): 231–238.
  <sup>13</sup> Martin R et al. J Pediatr 2003; 143(6): 754–758.
- <sup>14</sup> Martin R et al. J Hum Lact 2005; 21(1): 8–17.
- <sup>15</sup> Lara-Villoslada F et al. Br J Nutr 2007; 98(suppl 1): 96–100.
- <sup>16</sup> Blaut M & Loh C in: Bischoff SC: Probiotika, Präbiotika und Synbiotika; Thieme 2009; 2–23.
- <sup>17</sup> Ben XM et al. World J Gastroenterol 2008; 14(42): 6564–6568.
  <sup>18</sup> Olivares M et al. Nutr 2007; 23(3): 254–260.
- <sup>19</sup> Perez-Cano FJ et al. Immunobiology 2010; 215(12): 996–1004.
- <sup>20</sup> FDA. 2008; GRAS Notices GRN No. 236.
- <sup>21</sup> Koletzko B et al. Am J Clin Nutr 2009; 89(6): 1836–1845.
- <sup>22</sup> Lloyd B et al. Pediatrics 1999; 103(1): e7.
- <sup>23</sup> Koletzko B et al. Am J Clin Nutr 2020; 111: 10–16.
- <sup>24</sup> EFSA. The EFSA Journal 2014; 12(7): 3760.
- <sup>25</sup> Breastfeeding: A Guide for the Medical Profession, 8th edition. Elsevier, Saunders, Mosby, Churchill, 2016.

- <sup>26</sup> Nutrition in Pediatrics: Basic Science, Clinical Applications. Volume 1, 2016.
- <sup>27</sup> Lee et al. Front Pediatr. 2018; 6: 313.
- <sup>28</sup> Bronsky J et al. J Pediatr Gastroenterol Nutr 2019; 68: 742–760.
- <sup>29</sup> Maldonado-Lobón JA et al. Pharmacol Res 2015; 95-96: 12–19.
- <sup>30</sup> Severin et al. FEMS Microbiol Rev. 2004; 28(4): 405–440.
- <sup>31</sup> Peran L et al. Int J Colorectal Dis 2006; 21(8): 737–746.
- <sup>32</sup> Olivares M et al. J Appl Microbiol 2006; 101(1): 72–79.
- <sup>33</sup> Giovannini M et al. J Am Coll Nutr 2014; 33(5): 385–393.
- <sup>34</sup> EFSA: The EFSA-Journal 2007; 587: 1–16.
- <sup>35</sup> FDA. 2015; GRAS Notices GRN No. 531.
- <sup>36</sup> COMMISSION DELEGATED REGULATION (EU) 2021/571 of 20 January 2021. Official Journal of the European Union, 8 April 2021. EFSA Journal, doi: 10.2903/j.efsa.2020.5947.

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