Characteristics of HiPP ORS 200 Apple:

- ✓ suitable for infants from 4 months and toddlers
- ✓ pleasant taste of natural ingredients
- ✓ no added sweeteners and flavouring
- √ no added lactose
- ✓ no added milk protein
- ✓ gluten-free
- ✓ ready to drink convenient use





HiPP ORS 200 Apple was developed according to ESPGHAN criteria for ORS:

	HiPP ORS 200 Apple	ESPGHAN ORS ^{2,3,4}
Osmolarity (mOsm/l)	240	225 - 260
Sodium (mmol/l)	60	50-60
Glucose (mmol/l)	78	74 - 111
Potassium (mmol/l)	20	20
Citrate (mmol/l)	9	10
Chloride (mmol/l)	61	60



HiPP ORS 200 Apple is an alternative to our established product HiPP ORS 200 Carrot and Rice.

Literature:

- 1 Pieścik-Lech et al. Acta Paediatrica 2012; 101:e458-e464
- 2 Guarino et al. J Pediatr Gastroenterol Nutr 2014; 59: 132-152 3 Sandhu. J Pediatr Gastroenterol Nutr 2001:33: S36-39
- 4 Guarino et al. J Pediatr Gastroenterol Nutr 2001:33: S2-12



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To compensate loss of liquid and electrolytes in case of diarrhoea

HiPP ORS 200 Apple

Apple-based Oral Rehydration Solution

Information for health care professionals



Acute gastroenteritis (AGE) is a common problem in infants and toddlers.

- The incidence is between 0.5 to 2 episodes per child and year in children <3 years in Europe².
- The course of the disease is usually mild in Europe².
- It is associated with a substantial number of hospitalizations².



ESPGHAN/ESPID* recommends²

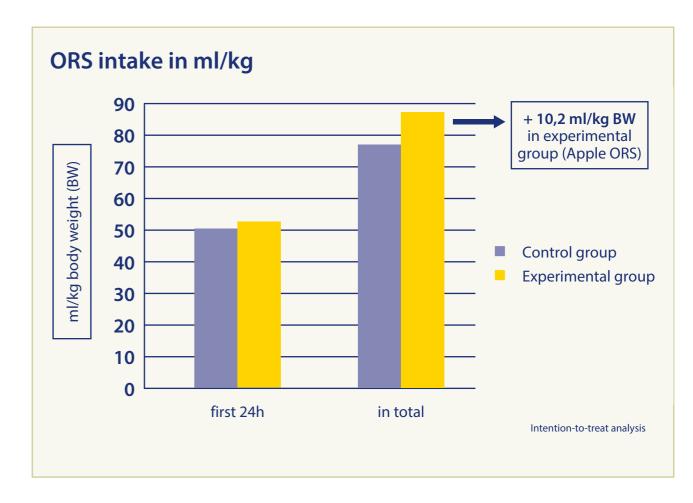
- oral rehydration as a "first-line therapy" in children with AGE.
- hypo-osmolar ORS with sodium 50-60 mmol/l (ESPGHAN ORS).
- rehydration should be started as soon as possible.

Study Apple ORS

Efficacy and safety of the Apple ORS ¹		
Design	double-blind, randomised, controlled	
Participants	n = 147 Children with AGE with mild to moderate dehydration (3 - 9 % loss of body weight)	
Age of children	4 to 48 months	
Intervention period	7 days after AGE was diagnosed	
Control group	Standard ESPGHAN ORS	
Experimental group	Apple-based ORS	
Outcomes	Primary: Proportion of successfully rehydrated children (including the following parameters: resolution of signs of dehydration, adequate weight gain and production of urine) Secondary: ORS intake, weight gain, vomiting, unscheduled intravenous therapy, return to the emergency department within a week, duration of diarrhoea, hospitalization, adverse events	

Result: The Apple ORS is as safe and effective as the established standard ESPGHAN ORS¹.

The experimental group (Apple ORS) had the tendency to consume higher amounts of ORS.



Apple ORS as a attractive variety of flavour.