



Actazin® - Enhances well-being through bowel regularity and digestive comfort

Everyone has times when they might feel a bit 'backed up'. Travel, changes in diet, stress, work overload, poor sleep, medications, hormone levels and lack of exercise can all contribute to disruption of normal bowel habits.

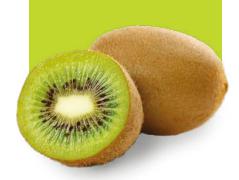
FAST FACTS

Whole New Zealand green kiwifruit (Actinidia deliciosa var. Hayward) powder and puree

Clinically proven to improve stool form and increase complete spontaneous bowel movements by > 1 per week

Over 50% improvement in GI symptoms

Gently promotes bowel movements with no unwanted side effects such as bloating or discomfort



Made from whole New Zealand green kiwifruit (*Actinidia deliciosa* var. Hayward), Actazin® is clinically proven to promote bowel regularity.

Clinically Proven

In two clinical studies, consumption of Actazin resulted in significant increases in weekly bowel movements. In the first clinical (Ansell, et al., 2015), a randomised, double-blind, crossover study, 2,400 mg of Actazin powder promoted laxation in healthy participants with up to 20% more bowel movements in a responder subgroup (Figure 1).



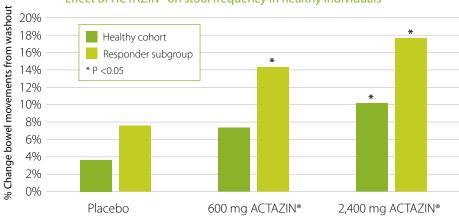


Figure 1: Effect of ACTAZIN® on stool frequency in healthy individuals, as a whole group and a subgroup of responders.

In a second, larger study using a parallel design (Graham et al, publication pending), 600 mg of Actazin powder significantly increased the number of complete spontaneous bowel movements (CSBM) by approximately 160% over baseline in healthy participants with constipation. A corresponding statistically significant increase in stool consistency (as measured by the Bristol Stool Score) was observed over baseline and placebo control (Figure 2).

Improvements were also reported for spontaneous bowel movements, constipation symptoms and quality of life.

Actazin showed superior improvement in Bristol Stool Score (BSS)

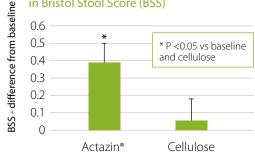


Figure 2: Least square means for a repeated measures analysis of BSS (difference from baseline) for Actazin and cellulose (placebo control). Error bars represent standard error of the mean.



Natural, Gentle Support

Actazin® is a unique blend of natural kiwifruit components which naturally and gently support the digestion process (Figure 3). In a recent clinical study (Chey, Chey, Jackson, & Eswaran, 2021), kiwifruit was found to be more satisfactory than prunes or psyllium for the relief of constipation due to its effectiveness, great taste and lack of unwanted side effects.

Source of protein-digesting enzyme, actinidin

Actazin® contains high levels of the kiwifruitunique proteolytic enzyme, actinidin. Actinidin has been shown to enhance the digestion of proteins in the upper GI tract and increase the rate of gastric emptying. It has particular potency towards dairy proteins (casein), meat proteins and wheat gluten.

Due to this protein digesting action, Actazin® may assist with:

- reducing bloating and gastric discomfort.
- releasing amino acids rapidly for absorption and utilisation in muscle building.

Reccomended Dosage

To support bowel regularity and digestive comfort, take 600 mg of Actazin powder or 5 g of Actazin Puree daily. The dosage can be increased to 2,400 mg powder or 20 g puree for additional digestive support.

Key features of ACTAZIN®

- Natural, whole fruit ingredient
- Non-GMO
- · NZ grown and produced
- Free from added sugars and preservatives
- Gently supports the digestive system without any uncomfortable side effects
- · FODMAP-friendly

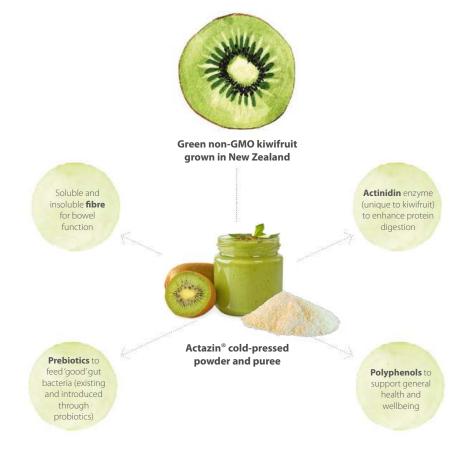


Figure 3: Unique components in Actazin® and their benefits.



REFERENCES

Ansell, J., Butts, C. A., Paturi, G., Eady, S. L., Wallace, A. J., Hedderley, D., & Gearry, R. B. (2015). Kiwifruit-derived supplements increase stool frequency in healthy adults: a randomized, double-blind, placebo-controlled study. *Nutrition Research*, 401-408.

Chey, S. W., Chey, W. D., Jackson, K., & Eswaran, S. (2021). Exploratory comparative effectiveness trial of green kiwifruit, psyllium, or prunes in US patients with chronic constipation. *American Journal of Gastroenterology*, 00: 1-9.



