

What is Infantile Colic?

Infantile colic is a common condition that is frustrating for parents and caregivers. Colic can be considered a behavioral phenomenon and involves long periods of inconsolable crying and hard-to-calm behavior.¹ The fact that crying occurs for no apparent cause is one of the main reasons it is distressing and worrisome for parents.^{1,2}



Colicky Babies Have a Less Diverse Microbiota

Why babies have colic is not fully understood, but it has been postulated that it is caused by various factors such as a disturbance of pathways in the central nervous system, psychosocial causes (e.g. parental anxiety) or gastrointestinal discomfort.^{1,3-9}

Over the past decades, the role of the gut microbiota has come into focus as studies have shown that babies with colic have lower counts of intestinal lactobacilli as well as increased concentrations of coliform compared to babies without colic.^{10,11}

Interest in the role of the microbiome in the pathophysiology of infant colic has rapidly increased. It has been suggested that altered microbiota affect gut motility and gas production, leading to colicky behavior.^{1,12}

The Only Probiotic with Evidence in Colic

Until now, available remedies for colic have been limited. BioGaia's *L. reuteri* Protectis is a probiotic originally isolated from human breast milk with a proven safety and efficacy profile.* *L. reuteri* Protectis is the only probiotic with scientific evidence in infantile colic.*

Study	Reduction in Crying Time by Day 7	Reduction in Crying Time by Day 21
Mi 2015	YES	YES
Chau 2014	YES	YES
Szajewska 2013	YES	YES
Savino 2010	NS	YES
Savino 2007†	YES	YES

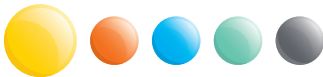
YES: Significant compared to placebo NS: Non-significant † Significant compared to simethicone

*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.



Back by Popular Demand!

The Original BioGaia Baby Probiotic Drops



References: 1. Zeevenhooven J, et al. *Pediatr Gastroenterol Hepatol Nutr.* 2017;20: 1-13. 2. Barr R, et al. New Evidence on Unexplained Early Infant Crying: Its Origins, Nature and Management. In: Skillman N, editor. *Johnson & Johnson Pediatric Institute*, 2001. 3. Barr RG, et al. *Pediatrics.* 1999;103: e68. 4. Lester B, et al. *Infant Ment Health J.* 1990;11: 321-333. 5. DeSantis A, et al. *Infant Ment Health J.* 2004;25: 522-539. 6. Milidou I, et al. *Paediatr Perinat Epidemiol.* 2014;28: 138-145. 7. Douglas P, Hill P. *BMJ.* 2011;343: d7772. 8. Talge NM, et al. *J Child Psychol Psychiatry.* 2007;48: 245-261. 9. van den Berg MP, et al. *Pediatrics.* 2009;124: e96-103. 10. Savino F, et al. *Acta Paediatr.* 2004;93: 825-829. 11. Savino F, et al. *Pediatr Allergy Immunol.* 2005;16: 72-75. 12. Gupta SK. *Curr Opin Pediatr.* 2002;14: 588-592. 13. Chau K, et al. *J Pediatr.* 2015;166: 74-78. 14. Cruchet S, et al. *Paediatr Drugs.* 2015;17: 199-216. 15. Mi GL, et al. *Antonie Van Leeuwenhoek.* 2015;107: 1547-1553. 16. Szajewska H, et al. *J Pediatr.* 2013;162: 257-262. 17. Savino F, et al. *Pediatrics.* 2010;126: e526-533. 18. Savino F, et al. *Pediatrics.* 2007;119: e124-130. 19. Indrio F, et al. *JAMA Pediatr.* 2014;168: 228-233. 20. Savino F, et al. *Benef Microbes.* 2015;6: 245-251. 21. Anabrees J, et al. *BMC Pediatr.* 2013;13: 186. 22. Sung V, et al. *JAMA Pediatr.* 2013;167: 1150-1157. 23. Urbanska M, Szajewska H. *Eur J Pediatr.* 2014;173: 1327-1337. 24. Cabana M. Abstract 2710.4. *E-Pas2016:2710.4. Pediatric Academic Societies.* Baltimore, MD, 2016. 25. Schreck Bird A, et al. *J Pharm Pract.* 2016. 26. Harb T, et al. *J Pediatr Gastroenterol Nutr.* 2016;62: 668-686. 27. Sung V. *Curr Opin Clin Nutr Metab Care.* 2015;18: 307-311. 28. Xu M, et al. *PLoS ONE.* 2015;10: e0141445. 29. Casas I, Dobrogosz W. *Microecology and Therapy.* 1997;26: 221-223. 30. Rosander A, et al. *Appl Environ Microbiol.* 2008;74: 6032-6040. 31. Sinkiewicz W. *Microb Ecol Health Dis.* 2008;20: 122-126. 32. Valeur N, et al. *Appl Environ Microbiol.* 2004;70: 1176-1181. 33. Chung T, et al. *Microb Ecol Health Dis.* 1989;2: 137-144. 34. de Weerth C, et al. *Pediatrics.* 2013;131: e550-558. 35. Liu Y, et al. *Am J Physiol Gastrointest Liver Physiol.* 2012;302: G608-617. 36. Mayer EA, Tillisch K. *Annu Rev Med.* 2011;62: 381-396. 37. Preidis GA, et al. *J Pediatr Gastroenterol Nutr.* 2012;55: 299-307. 38. Preidis GA, et al. *Faseb J.* 2012;26: 1960-1969. 39. Schaefer L, et al. *Microbiology.* 2010;156: 1589-1599. 40. Wu RY, et al. *Neurogastroenterol Motil.* 2013;25: e205-214. 41. Perez-Burgos A, et al. *J Physiol.* 2015;593: 3943-3957.

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Infantile Colic

Less crying and more smiling

A proven solution to help colicky babies*

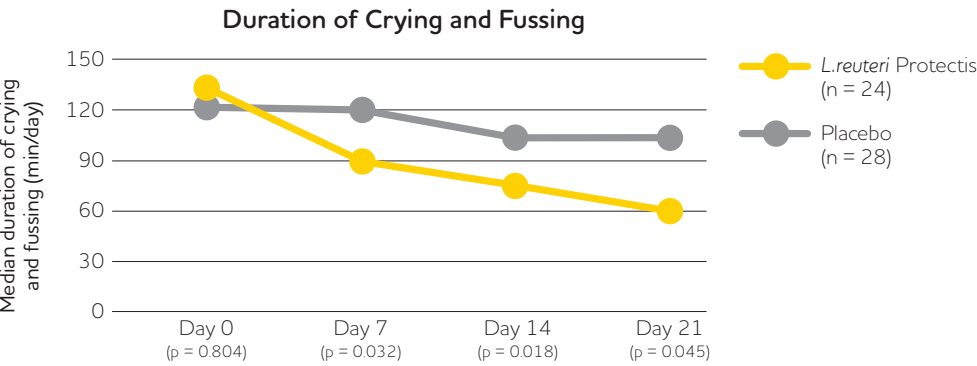


For Health Care Professionals

Less Crying and Fussing in Colicky Babies^{*13}

Compared to placebo, *L. reuteri* Protectis:*

- Significantly reduced daily crying and fussing time
- Reduced daily crying and fussing 54% versus 16% on day 21
- Resulted in a 71% success rate[†] versus 21% after 21 days



BioGaia Baby Helps Colicky Infants^{*}

- **5 independent studies** have shown a reduction in crying time in colicky infants^{*13,15-18}
- **2 preventive studies** have shown a reduced onset of colic as well as reduced crying time in healthy infants^{*19,20}
- **8 meta-analyses** have been conducted, all with the same conclusion: *L. reuteri* Protectis is the only probiotic with a proven efficacy in infantile colic, especially in breastfed and mixed fed infants^{*21-28}

How does *L. reuteri* work?

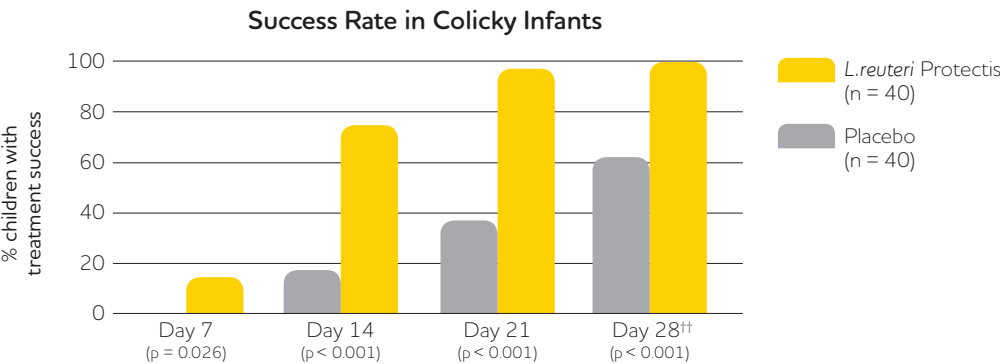
BioGaia's *Lactobacillus reuteri* Protectis is derived from human breast milk.²⁹⁻³¹ It is indigenous to the human digestive tract and one of the few probiotics that have co-evolved with humans since the beginning of time. *L. reuteri* Protectis.^{*32-41}

- Colonizes both the stomach and the small intestine
- Promotes the growth of good bacteria and inhibits pathogens
- Promotes healthy gut motility
- Releases effector molecules that promote healthy gut-brain communication

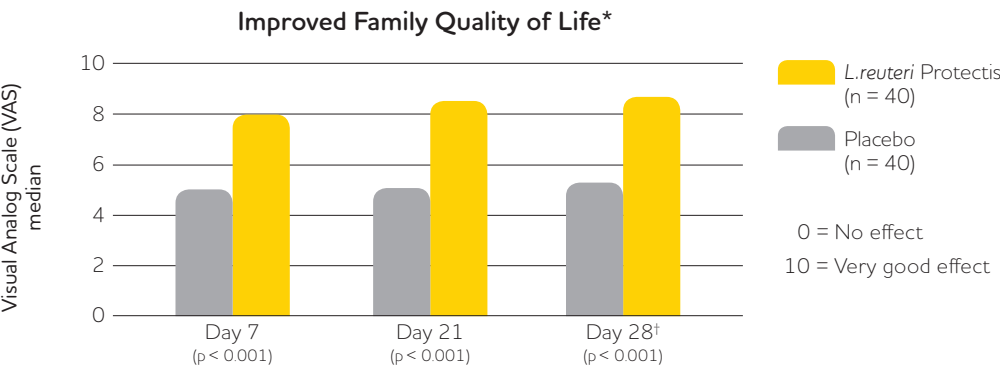
Reduced Excessive Crying and Improved Family Quality of Life^{*16}

Compared to placebo, *L. reuteri* Protectis:*

- Significantly reduced daily crying and fussing time
- Resulted in a 75% success rate[†] versus 18% after 14 days



75% success rate with BioGaia compared to 18% with placebo within 2 weeks^{*16}



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