

# LOSS OF APPETITE

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# HAPENZ

SYRUP

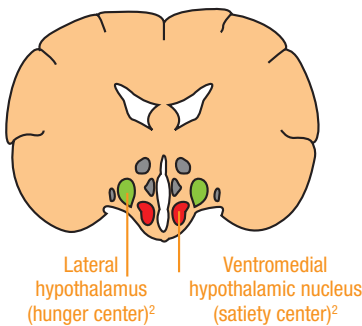
## The All-Natural Appetite Booster

### Loss of appetite can be worrisome<sup>1</sup>

A 'healthy appetite' has always been perceived as a sign of good health, especially in children. When we send our kids off to school, knowing they've had a hearty breakfast, we feel confident that we're giving them a head start to a successful day. But what exactly is 'appetite', and how does the body regulate it?

### Appetite in a nutshell<sup>1</sup>

Appetite is a desire and a need for food. It is controlled by the hypothalamus, an area in the brain. The one part of the hypothalamus controls appetite, and the other part controls satiety (fullness).



Appetite is mainly regulated by the stomach, the tone and movement of the gastro-intestinal tract, and the secretion of bile and digestive enzymes.<sup>1</sup>

### When appetite decreases<sup>3</sup>...

A decreased appetite is when your desire to eat is reduced. The correct medical term is anorexia, not to be confused with anorexia nervosa, an eating disorder. Appetite loss is common, especially in children, and there could be many reasons. Some children are just fussy eaters and grow out of their poor appetite. In some instances loss of appetite is due to emotional stress.

### Why appetite decreases<sup>1</sup>...

Sometimes there is no specific reason why one's appetite decreases. However, some common causes may include:

- **Illnesses/disease**

These include, among others: TB (tuberculosis), bacterial infections and worm infestations.

- **Medication**

Certain medications can reduce appetite, including: anti-asthmatics, anti-TB medicines, anti-cancer medicines and medicines for the treatment of attention deficit disorders.

## Appetite loss: the consequences<sup>1</sup>

When a child or adult is not hungry, they tend to eat less, inadequate food intake may lead to malnutrition and reduced immunity, sometimes resulting in increased bouts of illness. Childhood is a time of rapid growth and when the body doesn't get the nutrients it needs, physical and mental development and performance could be affected.

## Is there a natural, effective solution?<sup>1</sup>

Yes! All-natural Hapenz Syrup is scientifically formulated to assist in the following:

- Stimulate appetite
- Increase food intake
- Improve assimilation

## What does Hapenz Syrup contain?

Hapenz contains the following herbs, with specific benefits as listed below:

### **Alpinia galanga<sup>4,5,6,7</sup>**

A digestive tonic that is useful in the treatment of loss of appetite, flatulence, vomiting, upper abdominal pain, indigestion and sluggish digestion. It is also useful in the treatment of colic.

### **Trikatu<sup>8,9,10,11</sup>**

Trikatu combines three well-known herbs in equal quantities: Ginger, Black Pepper and Long Pepper. Trikatu is useful in the treatment of loss of appetite, flatulence, intestinal colic, indigestion, spasms and stomach ache.

### **Foeniculum vulgare (Fennel)<sup>12,13,14</sup>**

Fennel has the ability to promote weight gain. It has been used to aid digestion and improve appetite.

### **Emblica officinalis (Amla)<sup>15,16</sup>**

Amla is an anti-oxidant, and strengthens defence mechanisms against damage by free radicals in times of stress. It is also useful in treating loss of appetite.

### **Bacopa monnieri (Brahmi)<sup>17,18,19</sup>**

Brahmi assists in improving intellectual and cognitive functioning, increases the speed of learning and sharpens concentration. Brahmi also decreases the rate of forgetting newly acquired information and facilitates improved retention of information. A wonderful addition for adults and children from the age of three, upwards, who have poor appetites and may not be getting adequate all-round nutrition.

### **Withania somnifera (Ashwagandha)<sup>20,21,22</sup>**

This ingredient stimulates the activation of the immune system, improves nutrition and strength of children and increases food consumption and body weight.

## Dosage and directions for use

**Children aged 3-12:** 1 teaspoon (5 ml) three times daily, one hour before meals

**Adolescents (12-18):** 1-2 teaspoons three times a day one hour before meals

**Adults:** 2 teaspoons three times a day one hour before meals.



**References:** 1. DATA on FILE: [www.tilhealthcare.com](http://www.tilhealthcare.com) 2. <http://www.diabetesy.eu/honours.htm> 3. <https://www.nlm.nih.gov/medlineplus/ency/article/003121.htm> 4. The Wealth of India, Vol-1-A, pp.196-197. 5. Nadkarni, K.M. (1976), The Indian Materia Medica 3rd Edition, Vol 1. pp. 77-79 6. Qureshi, S. et al (1992), Plant Medica, Vol – 58 (2), pp.124-127. 7. The complete German Commission 'E' Monographs: (1998), Therapeutic Guide to Herbal Medicines. 8. Patel, K. et al (2002), Nahrung Vol – 46(6), pp. 394-398. 9. Yamahara, J. et al (1985), Journal of Ethnopharmacology, Vol-13 (2), pp. 217-225. 10. Ganesh Bhat, B. et al (1987), Nahrung; Vol – 31 (9), pp. 913-916. 11. Ernst, E. et al (2000), Brit. Journal of Anaesthesiology Vol – 84(3), pp 367-371. 12. Shah, A.H. et al (1991), Journal of Ethnopharmacology, Vol-34, (2-3), pp. 167-172. 13. The Wealth of India (1948), Vol-IV, F-G, pp.52-55. 14. Tanira, M.O.M. et al (1996), Phytotherapy Research, Vol-10, pp.33-36. 15. Indian Herbal Pharmacopoeia (1999), Vol II, pp. 50 – 57. 16. Nadkarni, K.M. (1976), The Indian Materia Medica 3rd Edition, Vol-1, pp.481-484. 17. Stough, C. et al (2001), Psychopharmacology, Vol 156 (4), pp.481-484. 18. Roodenrys, S. et al (2002), Neuropsychopharmacology, Vol 27(2), pp.279-281. 19. Singh, H.K. & Dhawan, B.N.(1982), Journal of Ethnopharmacology, Vol 5(2), pp.205-214. 20. Wagner, H. et al (1994), Phytomedicine, Vol 1, pp. 63-76. 21. Nadkarni, K.M. (1976), The Indian Materia Medica 3rd Edition, Vol-1, pp.1293-1294. 22. Aphale, A.A. et al (1998), Indian Journal of Physical Pharmacol. Vol 42 (2), pp.299-302.

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