**DIARRHOEA: LEADING KILLER IN YOUNG CHILDREN**

Diarrhoea kills 2.1 million children every year - more than AIDs, malaria, and measles combined. 1 in 3 children worldwide survives due to diarrhoea, making it the 2nd leading cause of mortality in children under 5 years of age.

**MORTALITY DUE TO DIARRHOEA IN INDIA**

India contributes significantly to the global burden.

3rd leading cause of child deaths in children under 5 years of age.

Most diarrhoeal deaths are preventable using simple & effective low cost interventions.

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**BOUGIS** (SACCHAROMYCETES BOULARDII) - SALIENT FEATURES

- India’s 1st **DSME** approved probiotic yeast.
- Manufactured in stringent, world-class QMF facility.
- Assured Billon live yeast per packet.
- Parade of forms, highly palatable & specially designed for children.
- Assured high quality with strictness flushed out at each step.
- On the PDA’s approved probiotic products, **BOUGIS** is a therapeutic grade product.

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**SACCHAROMYCETES BOULARDII (S. BOULARDII) FOR DIARRHOEA**

- S. bovisdii is a non-pathogenic probiotic.
- It has a unique ability to survive in varied gut environment.
- Proven to be stable, highly effective when co-administered with antibiotics like tetracycline and bacitracin.
- Lactic acid probiotic hence preferred choice for antibiotic-induced diarrhoea.

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**5. BOULARDII - MECHANISM OF ACTION (MOA)**

1. Anti-bacterial effect - arrests water secretion
2. Anti-microbial safety - adhere to bacteria & diarrhoea microbes
3. Increases synbiotic ratio over normal colonic function, protects intestinal flora
4. Hyaluronic presence & promote enteroepithelial monolayer
5. Increases diarrhoea-related issues - prevents viral diarrhoea
6. Increases in TGF - increase immune defense in the gut
7. Decrease cytokine levels - anti-inflammatory effect

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**PUBLISHED STUDIES ON S. BOULARDII IN ACUTE DIARRHOEA**

Various published studies authenticated effectiveness of S. bovisdii in diarrhoea treatment outcome.

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**S. BOULARDII IN ANTIBIOTIC-ASSOCIATED DIARRHOEA (AAD)**

- S. bovisdii reduced the AAD risk from 18.7% to 5.6% when compared with placebo or no treatment groups.
- In children, S. bovisdii reduced the AAD risk from 20.9% to 6.8%.
- Analyses show a reducer in the role of diarrhoea associated with antibiotic treatment, regardless of the reason for which the antibiotic was used.

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**GUIDELINES**

- **Recommendations:**
  - Adult patients taking antibiotics for diarrhoea treatment.
  - Pediatric patients taking antibiotics for diarrhoea treatment.

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**PUBLISHED STUDIES ON S. BOULARDII IN ANTIBIOTIC-ASSOCIATED DIARRHOEA**

- **Authors**:
  - Kajiwara et al. (2016)
  - Ohtsuka et al. (2017)
  - Bienenstock et al. (2015)
  - Ohtsuka et al. (2016)
  - Bienenstock et al. (2017)
  - Ohtsuka et al. (2017)
  - Bienenstock et al. (2015)
  - Ohtsuka et al. (2016)

- **Age group & Condition**:
  - Adult patients: 18-65 years
  - Pediatric patients: 0-12 years

- **Results**:
  - S. bovisdii reduces the AAD risk in patients taking antibiotics.
  - S. bovisdii reduces the AAD risk in pediatric patients taking antibiotics.
  - S. bovisdii reduces the AAD risk in adult patients taking antibiotics.

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**5-7 CURED children with respiratory tract infections**

- Diarrhoea prevalence in child 29.7%.
- Diarrhoea prevalence in adult 11.3%.
- Milder duration of diarrhoea in child 6.7%.
- Milder duration of diarrhoea in adult 4.7%.

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