

Cystitis?

Effective prevention – complementary treatment

FEMANNOSE® N



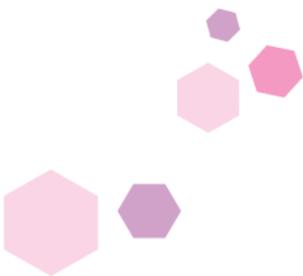
**Active support:
Tips for the prevention of and
supplementary treatment of cystitis.**

¹ YouGov report 2018 – Report for MCM Klosterfrau Vertriebsgesellschaft mbH, user study FEMANNOSE® N.

Contents

This brochure provides you with important information about cystitis. You can also find out about the prevention of cystitis and its supplementary treatment – with FEMANNOSE® N.

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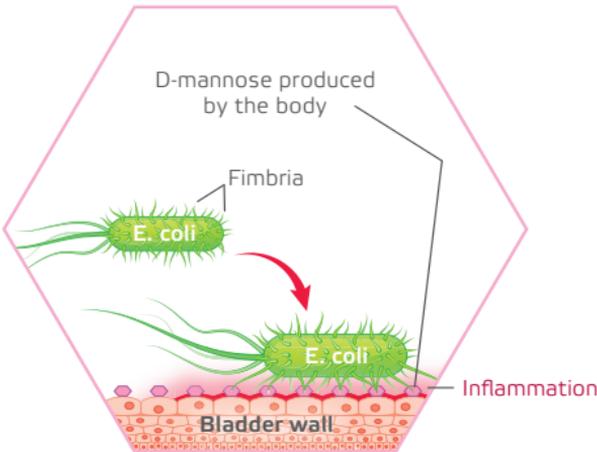
Cystitis

Cystitis is one of the most common bacterial illnesses. In around 90% of cases, cystitis is caused by the intestinal bacterium *Escherichia coli*, or *E. coli* for short.

Women are much more frequently affected than men. The reason for this is that women have a shorter urethra. The bacteria therefore do not have as far to travel and find it easier to reach the bladder in women than in men.

What happens if *E. coli* bacteria enter the bladder?

The surface of the mucous membrane in the bladder is made up of natural sugar-containing structures that contain such components as D-mannose. There, the tiny, hair-like structures (fimbria) on the surface of the *E. coli* bacteria attach easily to the bladder wall. The body's immune response to the bacteria is what causes the inflammation.



Typical symptoms

- Pain and a burning sensation when urinating
- More frequent urination, potentially with incontinence
- Abdominal pain
- Cloudy urine, or urine with an unpleasant odour

If there is pain in the kidney area and/or fever or blood in the urine, please consult a doctor.

Risk factors

Even if cystitis is a bacterial infection, there are factors that may increase the risk of cystitis.

Factors that may weaken the immune system

- Stress and lack of sleep
- Cold feet in the winter
- Wet clothing/swimwear
- Excessive intimate hygiene
- Diseases such as cancer, diabetes mellitus, acute infections, urological conditions

Hormonal fluctuations, which may affect the mucous membranes in the bladder

- Pregnancy and breast-feeding
- Menopause (perimenopause/postmenopause)





Other factors that irritate the mucous membranes and make it easier for bacteria to enter the bladder

- Frequent sexual intercourse
- Some forms of contraception, e.g. spermicidal creams/ gels, diaphragms, cervical caps
- Drinking too little

The many risk factors show that women of all ages may be affected, particularly when they are living life to the full. After all, if you are busy with family, career and a social life, sooner or later this may be stressful or you may suffer from a lack of sleep.

As a result, around 10% of women experience cystitis at least once a year. Around one third of these women suffer from recurrent cystitis.

This is because once you have already had cystitis, you are more likely to have it again.

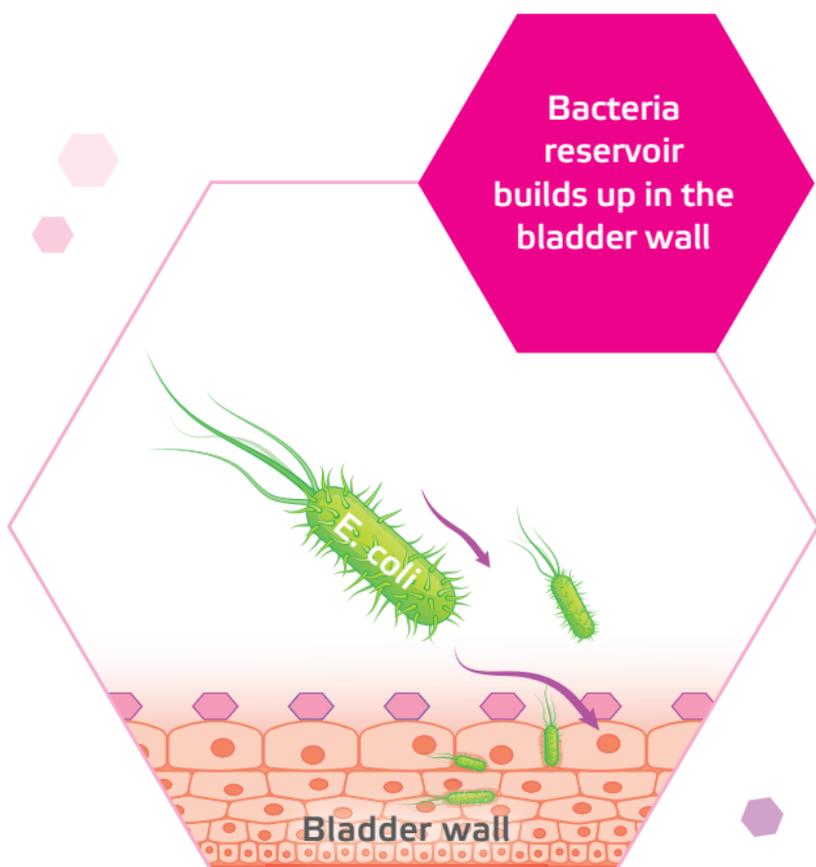
Recurrent cystitis

When cystitis keeps coming back, experts speak of recurrences.

This does not necessarily mean that new bacteria enter the body each time. It may also be a flare-up of a case of cystitis that was presumed to have cleared up.

This is because *E. coli* bacteria are able to protect themselves from the body's immune response or from the initial treatment by penetrating the tissues of the bladder wall, turning it into a bacteria reservoir.

If they emerge from the bacteria reservoir later, the cystitis will flare up again with its characteristic symptoms.



FEMANNOSE® N helps to prevent cystitis by blocking any bacteria released later, too.

How D-mannose works

Femannose[®] N is a granulated drink mix and contains the optimum dose of 2g D-mannose per sachet.

1

After taking FEMANNOSE[®] N, D-mannose is transported to the bladder via the blood.

2

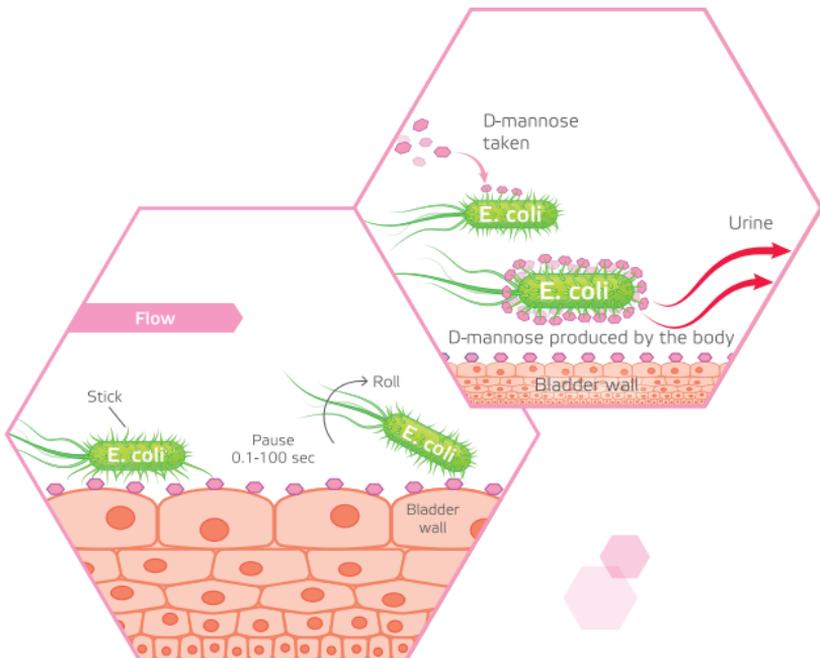
There, it attaches to the tiny hairs of the E. coli bacteria and neutralises them.

3

Even E. coli bacteria that has already become attached to the tissues may still be encased because they travel along the urethra using what is known as a "stick and roll" motion, like a caterpillar vehicle. If the fimbria keep detaching from the bladder wall, this is when the D-mannose can attach itself to the tiny hairs. This means that E. coli bacteria that has already become attached to the bladder wall are gradually detached from it.

4

The encased bacteria can no longer attach themselves to the bladder wall and are excreted with the urine.



Supplementary treatment

FEMANNOSE® N is taken as follows as a supplementary treatment for cystitis:

- 3x1 sachet **days 1–3**
- 2x1 sachet **days 4–5**
- 1x1 sachet **every day**

**Important:
Take this
for at least
5 days**



Other fast-relief tips:

- Make sure you drink enough – around 2 litres of liquids per day – so that the bacteria are flushed out of the bladder and urethra.
- Apply a hot-water bottle or heat pad to the lower abdomen – this supports your own immune defences, promotes good circulation and soothes pain.
- Get plenty of rest and sleep – rest strengthens the immune system.

If your symptoms don't improve within 3 days, please consult a doctor.

Prevention

If you want to prevent (recurrent) cystitis, you can take FEMANNOSE[®] N prior to typical situations that may result in cystitis.

- **1x1 sachet every day**
- You can take this dosage for a period of 30 days.



Other prevention tips:

- Here, too, it is important to make sure you drink plenty of liquids
- Go to the toilet as soon as you need to urinate
- Urinate as soon as possible after sex
- Strengthen your immune system, for example, by eating a healthy diet, getting sufficient exercise and reducing stress

Proper use of antibiotics

Because they are so effective, antibiotics are often prescribed too hastily, which may lead to bacterial pathogens becoming resistant to antibiotics.

Good to know:

FEMANNOSE® N is not an antibiotic. This means that bacteria cannot become resistant to D-mannose.

One clinical study has shown that D-mannose is just as effective at preventing cystitis as the antibiotic nitrofurantoin but is very well tolerated.²

If you need to take an antibiotic to treat acute symptoms, taking FEMANNOSE® N at the same time may help you to get rid of the cystitis sooner and to soothe your symptoms.

FEMANNOSE® N has a synergistic effect, which means it supports the effect of the antibiotic.



²Kranjčec B et al., D-mannose powder for prophylaxis of recurrent urinary tract infections in women: a randomized clinical trial; World J Urol (2014) 32: 79–84.

The advantages of FEMANNOSE[®] N

- Suitable for the supplementary treatment and prevention of cystitis
- Very well tolerated
- D-mannose has no known interactions with other substances
- May also be used during pregnancy and when breastfeeding upon prior consultation with your doctor
- Vegan; free from gluten, lactose and preservatives



Swap

infection ...

... for

efficacy

Clear advantage: FEMANNOSE[®] N is well tolerated and easy to use.³

- **85%** of patients rated the effect of this supplementary treatment as good to excellent.
- Doctors rated the tolerability of FEMANNOSE[®] N as “excellent” or “good” for **88%** of patients.

³Non-interventional study of FEMANNOSE[®] N; evaluable patients: 97, observation period: until subjectively symptom-free, max. until day 7.

Cystitis?

Effective prevention – complementary treatment



Medical product only available from pharmacies

14 single-dose sachets: PZN 12828537

30 single-dose sachets: PZN 12894959

60 single-dose sachets: PZN 17977070

- ◆ D-mannose with its unique action
- ◆ D-mannose blocks E. coli bacteria in the bladder
- ◆ No antibiotics and very well tolerated

Read more about FEMANNOSE® N
at femannose.de