Cold-EEZE® cold remedy is clinically proven to reduce the severity and duration of the common cold. But what exactly is Cold-EEZE? It’s a natural cold remedy made with zinc gluconate glycine. Zinc is an essential mineral the human body needs in small quantities to help support its disease-fighting immune system and other natural processes. Zinc gluconate glycine is the formula that has been clinically proven to shorten your cold.

Scientific theory suggests that the human cold virus causes infection by attaching to ICAM-1 receptors in the throat. It is also believed that Zinc ions compete for these same ICAM receptors and block the cold virus from attaching to the cells preventing the cold virus from replicating.

Zinc Gluconate Glycine lozenges dissolve slowly in the mouth so that zinc ions can be released over time and fight the cold virus. The formula and the delivery are critical for great results and have demonstrated strong clinical evidence in several scientific studies including one at the prestigious Cleveland Clinic.

Cold-EEZE zinc gluconate glycine has been proven to shorten colds by 3-4 days. It reduces some of the worst, nagging symptoms of a cold – coughs, sore throat, stuffy nose, sneezing, hoarseness and post-nasal drip. And Cold-EEZE won’t make you sleepy or agitated like many over-the-counter cold remedies sold in pharmacies.

Cold-EEZE has been proven safe for adults and children 12 and older, including people with high blood pressure and diabetes. The best time to take Cold-EEZE is at the first sign of cold symptoms. So when a cold is threatening, take Cold-EEZE right away so that you get well sooner.

THE ALL-TOO COMMON COLD

Why is it called the “common” cold? Probably because colds are the single most common infectious viral disease humans have ever encountered. And the figures are staggering. Each
year, people in the U.S. alone suffer from more than a billion colds\(^1\).

The main reason there are so many cases of infection is because of the variety of cold virus strains. More than two hundred different viruses can trigger a cold - with around 100 varieties of one specific type, called the rhinovirus, causing about a third of all colds each year\(^2\).

Because there are so many different viruses, our immune systems are constantly playing catch-up. They must first react and then adapt to defeat new varieties of cold viruses they have never encountered before.

And then there’s the ease of transmission. You can quickly get another person’s cold if they sneeze or cough near you. It’s an ugly thought but the tiny mucus droplets they expel from coughing and sneezing are loaded with cold virus.

Or you can get a cold through contact. Every time a cold sufferer coughs, sneezes, or even breathes on their hands, they’re adding a little cold virus. If they don’t wash immediately, that virus can be passed on as soon as they touch something or someone. If you touch a surface that is carrying a cold virus and then touch a vulnerable part of your body, such as your mouth, nose or eyes, you can become infected.

It does not take a large amount of the cold virus to become susceptible. A little bit can go a long way because once the cold virus lands on the warm, damp tissues of the mouth, eyes and nose, it quickly finds its way to the back of its latest victim’s throat.

There the virus settles on the adenoids (tissues that trap viruses and germs) and does what viruses do best – it replicates.

In about 12 hours, cells infected with the virus burst, releasing thousands more virus particles. The victim’s immune system reacts and someone new has officially come down with a cold.

Children are especially susceptible to colds. Research shows they get many more colds than adults, mainly because their immune systems are less developed. According to recent studies, kids suffer an average of six to eight colds a year through kindergarten and five to six colds annually as they get older. Another study found that in one year some 52 million kids’ colds were bad enough to require medical treatment\(^3\).

That’s a lot of trips to the pediatrician.

\(^1\) “Common Cold Overview” U.S. Dept. of Health & Human Services, National Institutes of Health


\(^3\) “An Open-Label, Single Center, Phase IV Clinical Study of the Effectiveness of Zinc Gluconate Glycine Lozenges (Cold-EEZE) in Reducing the Duration and Symptoms of the Common Cold in School-Aged Subjects,” American Journal of Therapeutics, Vol. 10 No. 5, September 2003 Betty Howell McElroy, MD, PA, Shelley Porter Miller, MMS, PA-C
ENTER ZINC GLUCONATE GLYCINE

The fundamental ingredient in Cold-EEZE is zinc gluconate glycine.

Zinc is a micronutrient – a mineral that’s essential to human health. It’s found in many parts of the human body including bones, teeth, hair, skin, liver, muscles and testes.

But as important as it is to our wellbeing, our bodies can’t store zinc. The recommended daily allowance of zinc is 11 milligrams for adult men and 8 milligrams for adult women. But when a person has a cold, more zinc, specifically zinc gluconate glycine can make a big difference.

ZINC GLUCONATE GLYCINE VS. THE COMMON COLD

In 1979, researcher George Eby’s three-year-old daughter Karen was undergoing chemotherapy and radiation treatments for acute lymphocytic leukemia when she came down with a cold. Because the chemotherapy had severely compromised her immune system, doctors warned Eby that Karen’s cold could potentially go on – anywhere from three months to three years.

Eby and his wife had already started Karen on a program of vitamin and mineral supplements as an adjunct to her treatment – a program that included zinc as an immune system booster. There seemed nothing new one night when Eby gave Karen a zinc gluconate tablet before bedtime.

Except for one thing - Karen’s condition made it impossible for her to actually swallow a pill.

“Her throat was so sore and so swollen she couldn’t swallow,” Eby said in a 2006 interview. “She couldn’t swallow food. She could hardly swallow water. And she just took that zinc gluconate tablet.”

According to Eby, it only took a few hours for Karen to recover from the cold after consuming the zinc tablet.

Inspired by Karen’s recovery from the cold (the cancer later went into remission), Eby and a research team investigated the potential effects of zinc lozenges on colds and published the results in the journal of the American Society for Microbiology in 19844. Eby’s group set up a test using adults and children who ranged in age from 11 to 63, all patients who’d been suffering with colds for three days or less.

Thirty-seven cold patients were given zinc gluconate lozenges while twenty-eight received a placebo. Neither group knew which lozenge they’d received. This type of procedure is known as a double blind test. Both groups were told it was important to let the lozenges dissolve slowly in their mouths for them to take effect.

The results were dramatic.

Nearly a quarter of the patients who received the zinc gluconate lozenges reported a major decline in their cold symptoms within 24 hours or less after starting the treatment. None of the patients who received the placebo noticed any improvement in their colds during the same period.

Of the remaining patients who received zinc gluconate lozenges, half saw significant improvements in their colds in another three days. By contrast, no one who got the placebo felt better until they’d suffered for more than a week.

On average, the patients who got the zinc lozenges were symptom free in a little less than four days. The patients who got the placebos struggled with their colds an average of nearly eleven days. The patients lucky enough to be in the zinc group were able to live a healthy, cold-free life an entire week earlier.

You can’t say that for chicken soup.

CLINICAL STUDIES

For any potential medication to be judged effective, it has to be demonstrated to work repeatedly in a majority of patients in carefully controlled clinical tests. The gold standard in clinical research is the sort of double-blind study Eby’s group used in their tests where one group gets the medication, the other gets a placebo, and neither the patients nor the clinicians knows who received which.

This allows the clinicians to isolate the real effect of the potential medication they’re examining and determine whether it works.

Dartmouth Study

After three later studies had put Eby’s results in question, scientists at Dartmouth College designed a study that sought to replicate the results of the Eby group’s 1984 experiment that showed zinc gluconate could be effective against colds. This Dartmouth study was published in The Journal of International Medical Research in 1992. These researchers suspected that the questionable follow-up studies showed results different than Eby’s because the lozenges used in these other studies included additives or sweeteners that made the zinc gluconate inactive.

So the Dartmouth team added glycine to the formula, which seems to have made the difference. That’s because the glycine in zinc gluconate lozenges (such as Cold-EEZE) helps reduce the bad taste while still allowing for the release of 93 percent of the zinc into the patient’s saliva. The released zinc was now available to coat the adenoids and throat, blocking the rhinovirus and so reducing or eliminating the threat of further infection, supporting the way the zinc is believed to work.
The researchers selected a total of 73 cold patients from the Dartmouth Health Service, ranging in age from 18 to 40, who were then divided into four groups. Two groups were treated with up to eight zinc gluconate glycine lozenges per day for seven days. The other two groups received placebos.

To see if the treatment was just as effective if applied as soon as symptoms appeared or shortly after, the patient groups began using their zinc gluconate glycine lozenges or placebo lozenges either one day or one and a third days after falling ill.

When the results were in and the numbers crunched, patients given zinc gluconate glycine lozenges one and a third days after their cold symptoms appeared saw their symptoms disappear a little more than four days (4.9 days) after starting their treatment. By comparison, the placebo group saw their symptoms last a little more than six days (6.1 days).

The comparison was even more dramatic for patients who were given the lozenges just a day after their symptoms started. On average, those patients saw their colds clear up in four and a third days (4.3 days). The unhappy placebo groups suffered with their colds, on average, for more than nine days (9.2 days).

**Cleveland Clinic Study**

A second double-blind study using zinc gluconate glycine lozenges in 100 volunteers was conducted at the prestigious Cleveland Clinic, with the results published in the Annals of Internal Medicine in 1996. This study used actual Cold-EEZE lozenges to see if they were effective at reducing the symptoms and duration of episodes of the common cold.

All 100 volunteers were clinic employees who had reported having cold symptoms for 24 hours or less. Each had to show at least two symptoms from a list that included cough, headache, hoarseness, muscle ache, nasal drip, nasal congestion, scratchy throat, sore throat, sneezing or a fever.

The volunteers were each given packages of 120 lozenges, either Cold-EEZE or placebos, and told to dissolve one in their mouths every two hours while they were awake until the symptoms disappeared. They were also asked to keep logs of their symptoms, scoring them for severity, and to return to the clinic within one day after their symptoms had resolved.

As the authors stated in the results of the study, “The time to complete resolution of symptoms was significantly shorter in the zinc gluconate glycine group than in the placebo group.”

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Patients who received Cold-EEZE lozenges saw symptoms disappear, on average, in 4.4 days while patients given placebos were sick, on average, for 7.6 days.

The study also compared Cold-EEZE effects in resolving specific cold symptoms, measured in days. The following table lays out the results.

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Cold-EEZE</th>
<th>Placebo</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coughing</td>
<td>2.0</td>
<td>4.5</td>
</tr>
<tr>
<td>Headache</td>
<td>2.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Hoarseness</td>
<td>2.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Nasal Congestion</td>
<td>4.0</td>
<td>6.0</td>
</tr>
<tr>
<td>Nasal Drainage</td>
<td>4.0</td>
<td>7.0</td>
</tr>
<tr>
<td>Sore Throat</td>
<td>4.0</td>
<td>6.0</td>
</tr>
</tbody>
</table>

The researchers stated as part of their conclusion that “Zinc gluconate in the form and dosage studied significantly reduced the duration of symptoms of the common cold...”

The Heritage School Study

A third study, published in 2003 in the American Journal of Therapeutics (9), addressed two more important questions about Cold-EEZE:

Is Cold-EEZE safe and effective for school-age children as well as adults?

Can you take Cold-EEZE for prophylaxis – as a preventive to keep from coming down with a cold in the first place?

*It is important to note that Cold-EEZE is not indicated for prevention. There have been a number of studies of Cold-EEZE and zinc gluconate glycine that have interesting results even though the product is not indicated for use in those areas. This is one of those outside area studies.*

The research team focused on residents between the ages of 12 and 18 at The Heritage Center in Provo, Utah. Rather than use a double-blind placebo test, which would have required the two groups be segregated and kept sick kids from activities, the research team decided to compare their results with data collected from a previous year (1999) when zinc gluconate glycine lozenges weren’t used.

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A total of 134 children aged 12-18 met the study criteria for analysis. Each received one Cold-EEZE lozenge a day to see if they prevented colds. At the end of the cold season, researchers determined that a quarter of those kids never had a single cold while another two-thirds suffered from one cold at most. None of them suffered any adverse effects.

The children who did catch colds were treated with four Cold-EEZE a day as soon as they showed at least two symptoms from a list that included sneezing, sore throat, cough, post-nasal drip and stuffy nose.

On average their colds lasted 6.9 days (± 3.1) compared to children in the previous year, used as the control, whose colds lasted 9 days (± 3.5).

The researchers concluded that, “zinc gluconate [glycine] lozenges are (a) well tolerated and an easy-to-administer therapy that has the potential to substantially reduce cold-related school absences.”

To date, Cold-EEZE has demonstrated its value in a pair of double-blind tests and a so-called open-label methodology study.

The results speak to the effectiveness of the Cold-EEZE formula for easing the symptoms and shortening the duration of many cases of the common cold.

USING COLD-EEZE

Cold-EEZE is safe and effective for adults and patients 12-18 (at the recommended dose). There are no significant safety risks or adverse effects associated with Cold-EEZE lozenges, when taken as directed.

To avoid a possible upset stomach do not take Cold-EEZE on an empty stomach. Taking the lozenges after eating usually can help.

Zinc has been reported to make the antibiotics doxycycline, minocycline and tetracycline less effective, if taken together. If your doctor has prescribed those drugs, ask whether taking Cold-EEZE is good for you.

Standard and sugar-free Cold-EEZE lozenges provide 13.3 milligrams of ionic zinc per lozenge. Sugar-free Cold-EEZE tablets have 4.3 milligrams of ionic zinc per lozenge. You can take up to six (6) lozenges or sixteen (16) sugar-free tablets per day.

Maximum daily intake of zinc from all dietary sources should not exceed 150 milligrams a day. Taken as directed, Cold-EEZE typically results in an intake of up to 80 milligrams of zinc per day for three to seven days. This dosage is well within the safety limits.

After multiple clinical trials and much scientific data, the jury is in. Cold-EEZE – the natural cold fighter – is safe and effective in reducing the severity and duration of the common cold.