

HOW HELIOCARE WORKS TO TURN BACK THE SUN

- It helps increase tolerance to the sun
- Skin changes are lessened after chronic exposure to the sun
- It helps maintain the skin's elasticity
- It provides cell protection in the epidermis
- It helps protect skin cell DNA



NATURAL ANTIOXIDANTS

Store below 30°C KEEP OUT OF REACH OF CHILDREN Do not keep/use Heliocare Oral after its expiry date.

DOUGLAS D DERMATOLOGY

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www.heliocare.co.nz





UV RAYS CAUSE SIGNIFICANT SKIN DAMAGE

We are all aware of the damaging effects UVR (ultraviolet radiation) from the sun can have. The skin ages and the effects of sun damage become more obvious.

UV [from the sun or from a sun lamp] has many detrimental effects on the skin: it can directly cause DNA damage and it can create so-called "reactive oxygen species" (ROS) or "free radicals". ROS are high energy molecules that collide with proteins and lipids in the cell and cause direct cellular damage. This damage is responsible for the clinical effects of UV on skin.

Currently the most widely accepted method of protection of human skin is the use of high SPF (Sun Protection Factor) topical sunscreens containing UVA and UVB blockers or absorbers.

However the SPF factor is not always a reliable indicator of true protection. Commonly, it is lessened by several factors such as improper application, poor quality of cream in the application, and the fact that SPF degrades over time upon exposure of skin to the sun's rays.

AN IDEAL PROTECTANT

Heliocare works as a potent oral antioxidant. UV [from the sun or from a sun lamp] has many detrimental effects on the skin: it can directly cause DNA damage, and it can create so-called "reactive oxygen species" (ROS) or "free radicals". ROS are high energy molecules that collide with proteins and lipids in the cell and cause direct cellular damage. This damage is responsible for the effects of UV on skin: premature aging.

PHOTOPROTECTIVE

Scientists have long searched for a photoprotective agent that does not degrade through UV radiation and that does not cause any skin sensitisation.

NATURAL FERN, GREEN TEA & BETA-CAROTENE

The answer has been found in a natural fern product used by the South American Mayans over centuries. Polypodium leucotomos (Fern) extract (PLE) combined with Green tea and Beta-carotene has a remarkable antioxidant and free-radical quenching properties.

STUDIES

Studies reveal that the antioxidants in Heliocare work against the harmful effects of ultraviolet radiation to decrease sunburn response. The number of ultraviolet induced sunburn cells is lessened as is DNA damage.

RESEARCH

Importantly, over 12 years of research has confirmed the antioxidant and photoprotectant properties of Heliocare. It has shown that the agent is effective when taken in capsule form or used on the skin. And it confirmed that the capsule form has no known harmful side effects.

Oral photoprotection is now the focus of much attention, and has been hailed as the 'photoprotection of the future'.

WHAT IS HELIOCARE?

Heliocare is a capsule that contains Green tea extract, Beta-carotene and an extract of the plant Polypodium leucotomos (a kind of fern) (PLE). The plant has been used for generations in South America as a folk remedy for skin conditions. Interest in PLE grew out of a desire to find substances that limited the toxicity of ultraviolet on skin. This fern extract was found to decrease the negative effects of UV and this effect would be valuable in protecting normal skin.

WHAT PROTECTION DOES HELIOCARE OFFER?

Heliocare works as a potent oral antioxidant. UV [from the sun or from a sun lamp] has many detrimental effects on the skin: it can directly cause DNA damage, and it can create so-called 'reactive oxygen species' (ROS) or 'free radicals'. ROS are high energy molecules that collide with proteins and lipids in the cell and cause direct cellular damage. This damage is responsible for the effects of UV on skin: premature aging.

Heliocare contains antioxidants which are shown to mop up free radicals before they damage important cellular proteins. Heliocare is taken daily. It is active within 2 hours of the first dose (unlike many oral antioxidants which take months to build up sufficient levels). Also, because Heliocare is taken orally it is effective in protecting cells deep in the skin - topical antioxidants are usually ineffective in protecting cells at this level. Damage to these deeper cells is responsible for many of the signs of photoaging (e.g. wrinkles.)

WHY USE HELIOCARE?

Heliocare brings together the unique properties of Polypodium leucotomos fern extract in combination with other powerful natural antioxidants - Green Tea Extract and Beta-carotene. As a result it offers significant antioxidant properties to care for the skin;

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USING HELIOCARE: FREQUENTLY ASKED QUESTIONS

Does Heliocare do away with regular sunscreen and sun barriers (like hats & sunglasses)?

Heliocare is definitely NOT a substitute for good sunscreens, hats and other protective clothing. It is particularly useful for someone who is known to have sensitive skin, who has had skin treatments or who wishes to minimise the aging effects of the sun. It is simply another "layer" of protection. It does not reverse damage.

Who should or shouldn't take it?

After 12 years of trial and 20 years of use in hot climates like Spain no adverse effects have been reported. Heliocare has a high safety profile. No specific study in patients under 18 has been undertaken.

Are there any side effects associated with Heliocare taken as a dietary supplement?

There are NO known side effects associated with Heliocare taken as a dietary supplement. Heliocare has been used for over 20 years in Europe.

Should I take Heliocare if I am pregnant?

No. Do not use Heliocare during pregnancy.

Who should or shouldn't take Heliocare? Can infants take it, and if so at what age? If the mother takes them, does she transfer the benefits to the baby through breast milk?

Heliocare has been on the market for more than 20 years in Europe without any known adverse effects being reported.

It has not been carefully studied in patients less than 18 years of age. The excretion of active metabolites in breast milk has not been established.

