The Hi Form Team is obsessed with quality, research and a scientific approach to equine nutrition and the treatment of common ailments.

The team’s obsession, is to the Hi Form customer’s benefit, as everything is about the prevention and treatment of conditions. All the ingredients that are included in the formula are symbiotic, meaning that they all work together and that includes any other supplements that you are using from Hi Form. Nothing cancels anything out!

Such is the power of ProflamAid Plus that the exact formula has been patented. This means that no other manufacturer can copy Hi Form’s recipe.

This supplement combines traditional Chinese pain relieving herbs with western nutritional supporting ingredients. Added to the formula are controlled doses of Rosa Canina 7:1 and Curcuma Longa 100:1 extract.

ProflamAid Plus focuses on enhancing the natural pain relief mechanisms of the body with some help from Traditional Chinese Medicines.

With over 26 years of use, ProflamAid Plus has been found to be 85-95% effective.

It is 100% safe and natural.

ProflamAid Plus does not mask any condition and does not interfere with messages to the brain. It stimulates the body’s natural healing properties whilst providing excellent pain relief.

No Glucosamine, Chondroitin Sulphate or MSM, as these do not meet the stringent requirements for natural therapy and the equine body that Hi Form demands.

All ingredients are 100% science backed and are TGA listed ingredients with relevant supporting data

ProflamAid Plus is a highly effective formula that includes vitamins, minerals and herbal extracts that assist in wound healing and maintaining healthy joints.

Horses are Herbivores - No fish proteins, fish oils, by-products, whey powder or bovine products are used in any Hi Form formulas.
To be scientifically accurate, ProflamAid Plus has a positive PRO inflammatory action but also contains anti-inflammatory properties which are naturally produced in sharp contrast to using an anti-inflammatory drug. Pharmaceutically, an anti-inflammatory drug blocks the inflammatory healing symptoms, by suppressing prostaglandins and leukotrienes, the body’s own chemicals which bring about inflammation as a response to injury, infection and allergens.

The healing process of inflammation, (pain, swelling, fever, redness and loss of function) is necessary, but becomes a problem when it is prolonged and ineffectual. ProflamAid Plus does NOT block the natural healing process, but rather accelerates, facilitates and shortens the inflammatory process.

ProflamAid Plus has a pro-inflammatory action by providing the boosted levels of those natural minerals and vitamins, which are already, present in the inflamed tissues, but often at insufficient levels to afford rapid healing.

It is important to note that the ProflamAid Plus does not interfere with the transmission of normal pain messages, thus the defence mechanism of the body is not compromised. Chronic pain leads to a reduction of endorphin levels in the cerebrospinal fluid and serum. The ProflamAid Plus has the ability to restore endorphin levels to normal.

Feed rates for maintenance:
300kg Pony - 8g (1/2 Large Level Scoop)
500kg Horse - 12g (3/4 Large Level Scoop)
600kg Horse - 16g (1 Large Level Scoop)

For specific problems, feed rates may be safely increased normally to 48g

Feeding Instructions:
Mix well into slightly damp feed.

Pain & Inflammation

The ProflamAid plus formula works in a synergistic way but also has a pro-inflammatory action with anti-inflammatory effects. The ProflamAid Plus contains a group of 5 nutrients with medicinal action which are found in Nature, these nutrients are amino acids, trace elements, vitamins, herbs and mineral tissue salts. Natural Therapy Formulas means the use of natural substances and no synthetic chemical substances are used. The effect is long lasting and not only treats or manages the complaint but also the whole body by supporting the immune system, overall health and wellbeing.

When the right kind of nutrients are used together, this increases the bio-availability and magnifies the effect. However these nutrients must be chosen wisely and not be shown to have any contraindications either on their own or together with other nutrients. Natural therapy has proven to be a very safe way to treat and has a very long track record, having been used in humans for hundreds of years.

www.hiformequine.co.uk
The immune system is the body's defence system against infection and disease. The system sends specialized cells to locate, mark, and destroy harmful substances called antigens (such as bacteria, viruses, poisons) that can cause disease and infection.

Inflammation, which is also known as an inflammatory response, is one of the ways the immune system responds to the presence of antigens. Essentially, it means that the immune system (specifically white blood cells) has produced certain disease-fighting chemicals and sends them to the areas of the body affected by the antigens. The chemicals fight the antigens, but also cause the redness, swelling, and pain that we recognize as symptoms of inflammation.

Inflammation is normally acute; that is, it begins as the body starts to fight the antigens and ends when the fight is won and the immune system stops producing the chemicals. Chronic inflammation means the body continues to produce the chemicals that cause inflammation. The immune system is, in effect, mistakenly attacking the body's own healthy tissues and organs. This leads to autoimmune diseases, illnesses caused by the body's own defence system. There are many types of autoimmune diseases. They may not be able to be cured, but they can be treated and their symptoms reduced and controlled.

SIDE EFFECTS?

Unlike non-steroidal anti-inflammatory drugs, the ProflamAid Plus is totally natural and has no adverse effects if used for a long period of time.

Anti-inflammatory drugs commonly used in the human market are effective in suppressing the symptoms of acute inflammation, but often abort the healing process mid-stream. This in effect can cause the inflammation to continue, but with less energy so the condition can then become chronic when the anti-inflammatory is withdrawn.

Anti-inflammatories are undeniably helpful with short-term use, but become toxic with extended use in chronic cases. ProflamAid Plus is a natural therapy formula and works in a synergistic way.

Hi Form have discovered that by utilising the action of many nutrients together the effect is higher and long lasting.

Some of the Organic Herb Extracts used are Yan Hu Suo 10:1 extract, Ruta graveolins 10:1 extract, Curcuma longa (Turmeric) 100:1 extract Rosa Canina (Rosehips) 7:1 extract, Peppermint 10:1 extract.

The mineral Tissue Salts used, re-establish balance. Don't get mineral tissue salts confused with crude minerals. Biochemical tissue salts, or cell salts, are mineral salts that exist in the cells and play a critical role in cellular metabolism. These salts are administered clinically in very small doses and are prepared in a way like homeopathic remedies.

The mineral salts used are calcium phosphate, magnesum phosphate, potassium phosphate, potassium chloride, sodium sulphate, sodium phosphate, calcium sulphate, iron phosphate, zinc sulphate and silica.

The formula also contains a range of trace elements including copper, selenium, manganese, chromium and cobalt in low trace levels.

The supporting vitamins include vitamin A, vitamin B1, vitamin B2 at low supporting levels and at higher levels the vitamins included are vitamin B3, vitamin B5, vitamin B6, vitamin C and vitamin E.
Case Studies

CASE NO 1 - Equine Case Studies 1992-1997
Dr. Gary Stapleton

A German Warmblood 12 years old, medium/advanced dressage horse. The horse was first presented for a second opinion to Hi Form, having a history of lameness for a period 14 months. X-rays had been taken of the fetlock joint, showing a small chip and degeneration of the joint.

Treatment of Phenylbutazone 1V and Butalone powders had been administered followed by a course of Cartrophen injections. The horse remained sound for 12 months competing at medium level dressage.

After a period of time the horse became slightly lame and was then re- X-rayed for comparison. Further degeneration of the joint was apparent. The horse was given an intra-articular injection of Depo Medrol followed by a further intra-articular injection of Hyalavet four weeks later. The horse remained sound for 4 months and then the lameness began again. It was at this stage that the decision was made to administer the ProflamAid Plus beginning at a dose of 3 large scoops (30grams) am and p.m. for an initial 14-day period. During that period there was no noticeable improvement so it was decided to continue treating at this level dose. After a further 5 days the horse improved by approximately 40%. At the end of 4 weeks the horse appeared sound. The horse competed for 2 more years and remained sound during this period.

CASE 2 - English Riding Pony

Swelling in pastern after a post had fallen on its leg. An X-ray was taken which confirmed a bony reaction on the front of the pastern with a lot of associated soft tissue swelling. The pony was given Butasyl 1V and Butalone paste.

The treatment resulted in minimal reduction in swelling or degree of lameness.

The pony was then administered 3 large scoops of ProflamAid Plus morning and night. After 7 days the swelling was reduced considerably and no lameness was evident.

The owners missed four days of ProflamAid Plus during the maintenance treatment, the swelling increased and the pony was lame, it was returned to 2 large scoops morning and night and after 24 hours the swelling reduced and soreness disappeared.

CASE 3 - Dr. Greg Rodda

A 12-year- old TB doing Advanced/Prix St George dressage developed early ringbone in the near side pastern joint. The horse was administered Butazone powder for 7 days and the lameness improved by approx. 40%. It was then decided to continue for a further 7 days at which time the horse was sound. At commencement of the 3rd week the Butazone powder was discontinued and within 24 hours the lameness returned. It was decided to administer 3 large scoops of ProflamAid Plus morning and night, within 3 days the horse had improved by 60%. After 14 days the horse was sound. It was decided to discontinue the ProflamAid Plus at this stage, within 2 days the lameness returned. The Butazone powder was then re-introduced for a period of 14 days the lameness continued and there was no improvement. Continence of the Butazone did not improve the lameness. The ProflamAid Plus was reintroduced and the horse became sound again after 8 days. This dose was maintained for a further 7 days by which time the horse began working again. After 4 weeks on 3 scoops morning and night the dose was then reduced to 2 large scoops morning and night. The horse has returned to full work with no signs of lameness and the horse's movement has definitely improved.

CASE 4

A four-year- old TB hunter/jumper with blunt trauma (blunt bolt three inches long) up through the bars area of the near hind hoof through into the navicular bursa. Intravenous antibiotics, poultices and ProflamAid Plus were used. Due to the long-term need for anti-inflammatory and analgesics, Phenylbutazone could not be used, and ProflamAid Plus enabled a satisfactory result over a three month period after which the horse was put back into work with no lameness. A moderate swelling of the heel and pastern area of the hoof was still evident.

GENERAL CASE STUDIES OF RADIGRAPHICALLY DIAGNOSED RINGBONE - Cheltenham Equine Veterinary Clinic

During 1992 a number of horses with radio graphically diagnosed ringbone were treated with ProflamAid Plus clinical responses in the sense of managing the pain and lameness were encouraging. No side effects of the medication were noted.
CASE 5 - Group studies conducted 1997 Dr. J. Rudolf

4 horses displayed degenerative joint disease ranging from mild to chronic aged from 6-15 years of age. All horses were suffering from varying degrees of lameness.

2 horses A & B were administered 60 grams 3 large scoops of ProflamAid Plus morning and night for 7 days. 2 horses C & D were given Butazone powder (2 grams) for 7 days.

After 7 days, 14 days and 28 days the following % improvement results were recorded after 10 minutes lunging at the trot

<table>
<thead>
<tr>
<th></th>
<th>Horse A</th>
<th>Horse B</th>
<th>Horse C</th>
<th>Horse D</th>
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</thead>
<tbody>
<tr>
<td>7 days</td>
<td>20%</td>
<td>0%</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>14 days</td>
<td>90%</td>
<td>40%</td>
<td>30%</td>
<td>10%</td>
</tr>
<tr>
<td>28 days</td>
<td>100%</td>
<td>80%</td>
<td>40%</td>
<td>10%</td>
</tr>
</tbody>
</table>

After 30 days Horse A and B were sound and the ProflamAid Plus was discontinued after 4 days both horses were exhibiting some degree of lameness.

After 30 days Horse C was still slightly lame and Horse D had improved only slightly.

After 35 days Horse A, B & C were administered ProflamAid Plus at a dose of 60 grams 3 large scoops morning and night.

Horse D was administered a dose of 80 grams 4 large scoops morning and night.

After 42 days, 56 days and 70 days the following % improvement results were recorded

<table>
<thead>
<tr>
<th></th>
<th>Horse A</th>
<th>Horse B</th>
<th>Horse C</th>
<th>Horse D</th>
</tr>
</thead>
<tbody>
<tr>
<td>42 days</td>
<td>90%</td>
<td>95%</td>
<td>50%</td>
<td>60%</td>
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<tr>
<td>56 days</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>85%</td>
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<tr>
<td>70 days</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>90%</td>
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</table>

It was concluded that the Hi Form ProflamAid Plus managed the condition of degenerative joint disease safely and effectively and no side effects were reported.

Report from Dr. Rob McNeil - 15 December 2002

To whom it may concern,

I have used Hi Form ProflamAid Plus in approximately twelve of my equine patients over the course of the last six months. I have found it particularly useful in the management of tendon and ligament sprains and in those horses with often difficult to pin-point lumbosacral musculoskeletal problems. The product seems to be a very effective anti-inflammatory agent, bringing about a rapid improvement in the acute phase of injury.

I have, as yet, little experience of the longer-term healing but based on my experience to date I have high expectations. I have a number of clients who have found it very effective in the older horse with generalized degenerative joint disease. The patients have become much more mobile, generally more active and in many cases less reliant on Equipalazone or Devil's Claw products; often these can be withdrawn completely.

The product seems to be very palatable and I have no experience of adverse side effects even at the higher, loading doses.

Robert L McNeil BVet Med MRCVS
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17 New Rd
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References

DL-phenylalanine markedly potentiates opiate analgesia – an example of nutrient/pharmaceutical up-regulation of the endogenous analgesia system A.L. Russella, M.F. McCarty Brampton Pain Clinic, Bramalea, Ontario, Canada Pantox Laboratories, San Diego, CA, USA Corydalis Zhongguo Zhong Yao Za Zhi. 2012 Nov;37(22):3457-61.[Study on acting mechanism of anti-morphine conditioned place preference between aqueous extract of Corydalis yanhusuo and L-THP and comparison of their effects].Luo SY, Guo P, Qian G, Yang ML, Lin X, Yang PR.
Source Department of Cell Biology and Genetics, Zunyi Medical College, Zunyi 563099, China.
CONCLUSION: Both C. yanhusuo and L-THP can substantially inhibit the effect of morphine CPP, reduce the increasing glutamic acid content in VTA-NAc-PFC neuroanatomical circuit and down regulated NR2B expression, which may be one of mechanisms on reducing the effect of morphine CPP. C. yanhusuo preparations containing L-THP (1 x ) showed 24-fold effect of L-THP monomer of single application in terms of the behaviouristics of inhibitory effect on CPP as well as the similarity in terms of transmitter glutamic acid of in VTA-NAc-PFC neuroanatomical circuit and pharmacological mechanism of NR2B.

Swelling in pastern after a post had fallen on its leg. An X-ray was taken which confirmed a bony reaction on the front of the pastern with a lot of associated soft tissue swelling. The pony was given Butasyl IV and Butalone paste.

The treatment resulted in minimal reduction in swelling or degree of lameness.

The pony was then administered 3 large scoops of ProflamAid Plus morning and night. After 7 days the swelling was reduced considerably and no lameness was evident.

The owners missed four days of ProflamAid Plus during the maintenance treatment, the swelling increased and the pony was lame, it was returned to 2 large scoops morning and night and after 24 hours the swelling reduced and soreness disappeared.


Salutary effects of Corydalis Yanhusuo extract on cardiac hypertrophy due to pressure overload in rats. Wen C, Wu L, Ling H, Li L. Source: Zhejiang Traditional Chinese Medical University, Binwen Road, Binjiang District, Hangzhou 310053, PR China.

l-Tetrahydropalmatine, an active component of Corydalis yanhusuo W.T. Wang, protects against myocardial ischaemia-reperfusion injury in rats.

Source: Department of Geriatrics, the First Affiliated Hospital of Nanjing Medical University, Nanjing, China.

[Analgesic effect of Corydalis yanhusuo in a rat model of trigeminal neuropathic pain]. Huang JY, Fang M, Li YJ, Ma YQ, Cai XH.
Source: Department of Stomatology, Zhujiang Hospital, Southern Medical University, Guangzhou 510282, China.

Ruta graveolens extract induces DNA damage pathways and blocks Akt activation to inhibit cancer cell proliferation and survival.

Fadlalla K, Watson A, Yehualaeshet T, Turner T, Samuel T.
Source: Department of Pathobiology, Center for Cancer Research, Tuskegee, AL 36088, USA. Ruta graveolens is a medicinal herb that has been used for centuries against various ailments. This study examined the anticancer properties of the herb using cancer cell lines.

CONCLUSION: R. graveolens extract contains bioactive compounds which, independently of known photo activatable mechanisms, potently inhibit cancer cell proliferation and survival through multiple targets.

Phytochemical Composition and Antioxidant Potential of Ruta graveolens L.

In Vitro Culture LinesRenuka Diwan, Amit Shinde, and Nutan MalpathakDepartment of Botany, University of Pune, Pune Maharashtra 411007, India Received 20 July 2011; Accepted 14 January 2012

Safety and efficacy of Curcuma longa extract in the treatment of painful knee osteoarthritis: a randomized placebo-controlled trial.

Madhu K1, Chanda K, Saji MJ.
Author information
Abstract
Curcuma longa Linn. is widely used for the treatment of disorders associated with inflammation and was evaluated for its safety and efficacy in the treatment of painful knee osteoarthritis (OA). This was a randomized, single blind,

Author(s): Jurenka, Julie S.
Abstract: Curcuma longa (turmeric) has a long history of use in Ayurvedic medicine as a treatment for inflammatory conditions.

Curcumin is known to possess potent anti-inflammatory and antiarthritic properties. This pilot clinical study evaluated the safety and effectiveness of curcumin alone, and in combination with diclofenac sodium in patients with active rheumatoid arthritis (RA). Forty five patients diagnosed with RA were randomized into three groups with patients receiving Curcumin BCM-95 (500 mg) and diclofenac sodium (50 mg) alone or their combination. The primary endpoints were reduction in Disease Activity Score (DAS) 28. The secondary endpoints included American College of Rheumatology (ACR) criteria for reduction in tenderness and swelling of joint scores. Patients in all three treatment groups showed statistically significant changes in their DAS scores. Interestingly, the Curcumin group showed the highest percentage of improvement in overall DAS and ACR scores (ACR 20, 50 and 70) and these scores were significantly better than the patients in the diclofenac sodium group. More importantly, curcumin treatment was found to be safe and did not relate with any adverse events. The study provides the first evidence for the safety and superiority of curcumin treatment in patients with active RA, and highlights the need for future large-scale trials to validate these findings in patients with RA and other arthritic conditions.

Therapeutic activities of roosehip

In contrast to nonsteroidal anti-inflammatory drugs (NSAIDs) and aspirin, roosehip has anti-inflammatory actions that do not have ulcerogenic effects and do not inhibit platelets or influence the coagulation cascade or fibrinolysis, thereby avoiding potential side effects for patients who may be at increased risk from the gastrointestinal or cardiovascular side effects of NSAIDs.

Antidiabetic, lipid lowering and anti-obesogenic activity Rosehip has been used as a traditional treatment for diabetes and has recently been found to possess hypoglycaemic effects in diabetic rats. Similarly, roosehip extract has been reported to significantly reduce blood glucose levels after glucose loading, as well as substantially inhibiting weight gain and/or accumulation of visceral fat without affecting food intake in mice. Rosehip has also been found to produce modest lowering of total cholesterol in humans. While these activities are promising, they await further confirmation in large human clinical trials.

Osteoarthritis, rheumatoid arthritis and back pain.
The first randomised controlled trial of rosehip involved 100 patients with painful, radiographically verified osteoarthritis of the hip or knee. These patients, some of who were end stage and awaiting joint replacement, were randomised to receive either 2.5 g standardised rosehip powder or placebo twice daily for 4 months. Results showed that in comparison with placebo, rosehip powder significantly reduced pain (p=0.035) with 64.6% of patients receiving rosehip reporting at least some reduction of pain. Rosehip-treated patients also experienced improved hip flexion (p=0.033) with no significant change observed for internal and external rotation of the hips or knee flexion.

A second double blind, placebo controlled, crossover study involving 112 patients with osteoarthritis of the hip, knee, hand, shoulder or neck, found that compared to those receiving placebo, patients who received 5 g/day of standardised rosehip powder for 3 months experienced significant reductions in pain (p<0.0078) and stiffness (p<0.0025), as well as significant improvements in mood, wellbeing and sleep quality. Sixty-six percent of patients receiving active treatment reported improvement in pain compared to only 36% of placebo patients. Reductions in paracetamol consumption and plasma CRP along with a small but significant reduction in total cholesterol were also observed. After the treatment and placebo groups were crossed over for a further 3 months (without a washout period) no difference was seen between the two groups, suggesting that rosehip has a long duration of action with a strong carryover effect.

A third placebo controlled, double blind crossover trial involving 94 patients aged over 35 years with osteoarthritis of the hip or knee, randomised patients to either placebo or 5 g/day or rosehip for a period of 3 months. Compared to placebo, treatment with rosehip resulted in a significant reduction in WOMAC (Western Ontario and McMaster Universities Osteoarthritis Index) pain (+/−) and consumption of “rescue medication” after 3 weeks and significant reduction in WOMAC disability, stiffness and global assessment of severity of the disease after 3 months of treatment.

In addition to offering benefits for patients with osteoarthritis, rosehip may offer benefits in other conditions such as back pain and rheumatoid arthritis. A 1-year surveillance of 152 patients found that rosehip provided significant pain relief for patients with acute exacerbations of chronic back pain.

More recently, a 6-month, double blind placebo controlled trial also found modest benefits for patients with rheumatoid arthritis indicated by significantly improved scores on the Health Assessment Questionnaire Disability Index (HAQ-DI) along with various other patient and physician reported scales. The authors concluded that while the results were promising, the study was not well powered and larger studies were needed.

A slow onset of action, modest effect size and lack of statistical power may account for the results of a more recent and much smaller open case control study of 20 female patients with rheumatoid arthritis and 10 female controls, which found no significant effects on clinical symptoms, level of CRP or laboratory measures of antioxidant enzyme activity after 4 weeks of treatment with 10.5 g/day of rosehip powder.

Mare-analyses and systematic reviews A meta-analysis of the three randomised controlled trials of osteoarthritis patients included 287 patients with a median treatment period of 3 months. This meta-analysis reported that treatment with patented rosehip powder consistently reduced pain scores and that patients were twice as likely to respond to rosehip (as indicated by a reduction in WOMAC pain) compared to placebo (effect size of 0.37, 95% CI: 0.13–0.60). The authors therefore concluded that rosehip powder does reduce pain and that its efficacy and safety need evaluation and independent replication in future large scale, long term trials.

A more recent meta-analysis provides an indirect comparison of the pain reducing effect of glucosamine hydrochloride and standardised rosehip powder for osteoarthritis. This analysis, which was based on three studies on glucosamine hydrochloride involving a total of 933 patients and the three studies described above involving 287 patients, concluded that rosehip is more efficacious than glucosamine hydrochloride in reducing pain in osteoarthritis patients.

As well as being the subject of meta-analyses, the clinical trials of rosehip have been systematically reviewed. One systematic review of two relatively small (n=100 and 112) double blind, randomised placebo controlled studies, both of which were considered to be of high quality with a Jadad score of 5 out of 5, concluded that rosehip powder had a moderate effect in patients with osteoarthritis.34

This same conclusion was also made by another systematic review that included four trials (two of which were identified as subgroup analyses).

Summary

The growing evidence base for rosehip suggests that this traditional herbal remedy has a high safety profile. While further research is required to establish its clinical role, existing research (both in vitro and in vivo) suggests that standardised rosehip powder may offer an effective first line therapy and is a viable replacement or supplement for conventional drug therapies such as NSAIDs in osteoarthritis and possibly other inflammatory diseases.

References


