1	Resveratrol plus carboxymethyl- $\beta$ -glucan for children with respiratory diseases
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13	Keywords: Respiratory Tract Infections; Children; Resveratrol; beta-Glucans; Nutraceutical.

#### 14 **POINT OF VIEW**

#### 15 Introduction

Respiratory infections, ranging from common colds to more severe respiratory illnesses, can impact the 16 17 child's well-being, leading to symptoms, such as nasal congestion, coughing, and fever. Moreover, respiratory infections can contribute to school absences and medical visits, creating a substantial socio-18 economic burden for families[1]. Resveratrol, a natural polyphenol found in various plant sources like 19 grapes, berries, and peanuts, has emerged as a subject of considerable scientific interest. This compound 20 has garnered attention not only for its antioxidant properties but also for its potential anti-inflammatory and 21 antiviral effects[2,3]. Studies have suggested that resveratrol may play a crucial role in modulating immune 22 23 responses, with a particular emphasis on its ability to attenuate inflammatory processes[4]. The compound has been associated with the stimulation of phagocytosis by professional phagocytes, direct activation of 24 natural killer (NK) cells, and the release of cytokines[5]. B-Glucans, derived from fungi, cereals, and 25 bacteria, are large polysaccharides known as "biological response modifiers". They stimulate the immune 26 system, offering benefits like anticancer, antiviral, and wound healing effects[6]. They enhance resistance 27 to infections by the stimulation of phagocytosis, the direct activation of NK cells, and the release of 28 29 cytokines[7]. Used in pharmaceuticals for drug delivery, the introduction of carboxymethylation to these biopolymers enhances their solubility in aqueous environments without compromising their biological 30 31 activities[8]. The stability of resveratrol can be enhanced by combining it with a modified version of βglucan, specifically carboxymethyl-β-glucan (CM-glucan), in a water-based solution while preserving its 32 biological properties [3,8]. Recent research explores the antiviral potential efficacy of a solution containing 33 resveratrol and carboxymethyl-β-glucan in children with respiratory diseases, revealing synergistic anti-34 inflammatory effects through cytokine modulation[4,9]. 35

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#### 37 Materials and Methods

A comprehensive literature review was conducted to evaluate the clinical evidence supporting the action of
 resveratrol and carboxymethyl-β-glucan in children with respiratory diseases. Our research specifically

sought out randomized clinical trials in children that explored the utilization of solutions incorporating
resveratrol and carboxymethyl-β-glucan (Linfovir® plus spray and nasal drops, Noos srl) in the
management of respiratory diseases among children. Through this search, five randomized clinical trials
were identified.

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## 45 **Results**

A study conducted by Varricchio et al. employed a real-life, randomized design and involved 82 children 46 (49 boys, with an average age of  $8.1 \pm 2.6$  years) who were dealing with acute rhinopharyngitis and 47 recurrent respiratory infections (RRIs). After a 10-day course of anti-infective and anti-inflammatory 48 49 treatment for acute rhinopharyngitis, participants were randomly assigned (ratio 1:1) to receive either resveratrol plus carboxymethyl-β-glucan or a saline isotonic solution. The treatments were administered 50 over 20 days, and assessments were conducted for days with respiratory symptoms, fever, medication use, 51 medical visits, and school absences. Follow-up visits occurred at 30, 60, and 90 days after treatment 52 initiation. The results indicated that the active compound significantly decreased the number of days with 53 54 nasal congestion (p < 0.001), runny nose (p < 0.001), sneezing (p < 0.001), coughing (p = 0.002), fever (p< 0.001), medication usage (p < 0.001), medical visits (p < 0.001), and school absence (p < 0.001). This 55 preliminary real-life study suggests that an aerosolized mixture comprising resveratrol and carboxymethyl-56 57 β-glucan could potentially offer preventative benefits for children with RRIs[10]. In a study conducted by Baldassare et al., eighty-nine infants with respiratory infection symptoms were randomly assigned to either 58 the group receiving the nasal resveratrol/carboxymethyl- $\beta$ -glucan solution or the group receiving the nasal 59 saline solution. Physicians and parents assessed all patients using the Canadian Acute Respiratory Illness 60 and Flu Scale (CARIFS) at enrollment, after 48 hours, seven days, and 30 days. Additionally, nasal swabs 61 62 were collected at enrollment, after 48 hours, and after one week. The results indicated an improvement in the CARIFS score in both groups. Notably, the study group reported reduced episodes of sneezing and 63 coughing after seven days of follow-up (p < 0.05)[11]. In a study by Indolfi et al., the researchers aimed to 64 assess the effectiveness of nasal solutions containing resveratrol and carboxymethyl-β-glucan in reducing 65 3

wheezing in non-atopic children with RRIs. The prospective single-blind study involved 39 children, who 66 were randomized into two groups: one received the resveratrol plus carboxymethyl-β-glucan solution, while 67 the other received a saline placebo. The results demonstrated a significant reduction in the number and 68 69 severity of wheezing episodes in the resveratrol plus carboxymethyl-β-glucan group compared to the placebo group. Specifically, the resveratrol plus carboxymethyl-β-glucan group had fewer wheezing days 70 and episodes, reduced hospital visits, and less need for oral corticosteroids. These findings suggest that 71 72 nasal resveratrol could be a promising intervention for managing wheezing in non-atopic children when administered at the onset of upper respiratory tract infections (URTI) symptoms. The treatment was 73 generally well-tolerated, with only mild and transient nasal irritation reported as a side effect[12]. In a 74 75 research by Miraglia et al., 68 children diagnosed with allergic rhinitis caused by Parietaria pollen were enrolled. The participants were divided into two groups, with one receiving treatment through an intranasal 76 device containing a combination of resveratrol and carboxymethyl-β-glucan. In contrast, the other group 77 was administered a placebo over two months. The findings indicated a noteworthy decrease in nasal 78 symptoms, including itching, sneezing, rhinitis, and nasal congestion, among children who underwent the 79 80 resveratrol and carboxymethyl-\beta-glucan treatment, accompanied by a reduction in the usage of 81 antihistamines[13]. In an another study conducted by Miraglia et al., it was observed that the application of a nasal spray containing resveratrol and carboxymethyl-β-glucan to a cohort of 76 children with persistent 82 83 allergic rhinitis resulted in a notable reduction in nasal symptoms and respiratory infection-related effects compared to a placebo-treated control group[14]. The findings revealed a statistically significant decrease 84 in Total Symptom Score (TSS), severity of cough and wheezing,  $\beta$ 2-agonist usage, days with fever, and 85 school absences within the actively treated group in comparison to the placebo group. This outcome 86 suggests a potential efficacy of the nasal spray formulation containing resveratrol and carboxymethyl-β-87 88 glucan in mitigating both allergic symptoms and respiratory infections in children with persistent allergic rhinitis[14]. 89

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## 91 **Discussion**

In recent years, the exploration of novel therapeutic approaches for pediatric respiratory diseases has gained 92 significant attention. Among these, the combination of resveratrol and carboxymethyl-β-glucan has 93 emerged as a promising intervention, exhibiting potential anti-inflammatory and antiviral effects. The use 94 95 of formulations containing resveratrol and carboxymethyl-β-glucan shows promising results in children with respiratory diseases. These formulations, explored through a series of clinical trials, demonstrate a 96 significant reduction in symptoms related to respiratory infections and allergic rhinitis (Table 1). This 97 98 suggests potential benefits in both preventive and therapeutic contexts, indicating a potential role for 99 resveratrol in treating respiratory infections[15]. Despite these promising findings, it's important to acknowledge the limitations of current research. The studies are based on small sample sizes and single-100 101 center trials with a focus on short-term outcomes, which could introduce biases and limit the generalizability of the findings. The limited follow-up duration raises questions about the sustained efficacy 102 and safety of this combination therapy. For this reason, long-term studies are essential to determine whether 103 the benefits observed are maintained over time and to assess any delayed adverse effects. In addiction, 104 while the reviewed studies reported a positive safety profile with only mild and transient nasal irritation 105 reported as a side effect, none provided extensive data on adverse effects, necessitating caution in 106 interpreting the results. Moreover, the efficacy of resveratrol and CM-glucan was notable, but it is crucial 107 to compare these results with those of standard treatments for respiratory infections and allergic rhinitis. 108 109 For this reason, it's important to emphasize that this natural multi-component compound is not a pharmaceutical drug and should not replace established therapies for respiratory infections. Instead, it can 110 be considered an additional treatment, complementing standard approaches[2]. Future investigations 111 involving larger cohorts, multicenter studies, and comparative studies with standard treatments could 112 provide more robust evidence of effectiveness and help identify potential variations in treatment response 113 114 among diverse populations.

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## 116 Conclusion

117 The combination of resveratrol and carboxymethyl-β-glucan has demonstrated significant efficacy in

118	reducing symptoms associated with respiratory infections and allergic rhinitis in children, highlighting its
119	potential both as a preventive and therapeutic option. While the treatment was generally well-tolerated,
120	with only minor side effects such as transient nasal irritation, the current data on adverse effects remains
121	limited, necessitating caution. Moreover, the existing research is constrained by small sample sizes and
122	studies conducted in single centers, focusing predominantly on short-term outcomes. This limitation raises
123	concerns about potential bias and restricts the generalizability of the findings. Consequently, there is a
124	critical need for long-term studies with larger, multicentric samples to confirm the treatment's efficacy and
125	safety over time and to compare it against standard therapies for respiratory infections and allergic rhinitis.
126	It is essential to emphasize that this nutraceutical is intended to complement, rather than replace, established
127	standard therapies for respiratory infections in children. Based on these concepts, the combination of
128	resveratrol plus carboxymethyl- $\beta$ -glucan could considered a valuable add-on strategy complementary to
129	pharmacological standard treatments.
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# **Table 1. Studies on resveratrol plus carboxymethyl-β-glucan.**

Study [ref,]	Study design	Patients	Treatments	Outcomes	Follow-up	Main results	Funding	Registr N°
Varricchio et al. [10]	RCT	82 children $(8.1 \pm 2.6 \text{ years})$ with acute rhinopharyngitis and recurrent respiratory infections	Resveratrol 0.05% and carboxymethyl-b-glucan 0.33% vs. saline isotonic solution nebulized (12 drops/day for 20 days).	nasal symptoms, medication use, medical visits, school absences	Follow-up at 30, 60, and 90 days	Reduction of symptoms in the active group (p < 0.001)	Not specified	Not specified
Baldassarre et al. [11]	RCT	100 infants (0 to 6 months), with acute respiratory illness	Resveratrol 0.05% and carboxymethyl-b-glucan 0.33% vs. saline isotonic solution (3 drops in each nostril, 4 times a day for 7 days)	sneezing and cough, nasal biomarkers	30 days follow-up	$\begin{array}{cc} Reduction & of \\ symptoms in the active \\ group (p < 0.05) \end{array}$	No	NCT 03683108
Indolfi et al. [12]	RCT	39 preschoolers with recurrent wheezing	Resveratrol 0.05% and carboxymethyl-b-glucan 0.33% vs. saline isotonic solution (two sprays per nostril, 3 times a day for 7 days)	wheezing, hospital visits, medications use	180 days follow-up	reduction of wheezing, hospital admissions, and drugs in the active group (p $<$ 0.001)	No	Not specified
Miraglia del Giudice et al. [13]	RCT	68 children (mean age 7.9 years) with seasonal allergic rhinitis	Resveratrol 0.05% and carboxymethyl-b-glucan 0.33% vs. saline isotonic solution (two sprays per nostril, 3 times/day for 2 months)	nasal symptoms, rescue medication use (cetirizine)	60 days follow-up	Reductionofsymptomsinactivegroup (p < 0.001)	Yes	NCT 02130440
Miraglia del Giudice et al. (2014)[14]	RCT	76 children (mean age 9.5 years) with persistent allergic rhinitis	Resveratrol 0.05% and carboxymethyl-β-glucan 0.33% vs. saline isotonic solution (two sprays per nostril 3 times/day for 2 months.	nasal symptoms, respiratory infections	Up to 2 months	reduction of TSS, cough and wheezing, $\beta$ 2- agonist use, days with fever, school absences in active group (p < 0.001)	Yes	NCT 02130440

150	Author Contributions
151	All authors have read and agreed to the published version of the manuscript.
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153	Ethics Approval and Consent to Participate
154	Not applicable
155	
156	Funding
157	This research received no external funding
158	
159	Conflict of Interest
160	The authors declare no conflict of interest.
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162	References
163	
164	1. Chiappini E, Santamaria F, Marseglia GL, Marchisio P, Galli L, Cutrera R, et al.
165	Prevention of recurrent respiratory infections: Inter-society Consensus. Ital J Pediatr. 2021 Dec
166	1;47(1). Available from: https://pubmed.ncbi.nlm.nih.gov/34696778/
167	2. Drago L, Ciprandi G, Brindisi G, Brunese FP, Dinardo G, Gori A, et al. Certainty and
168	uncertainty in the biological activities of resveratrol. Food Front. 2024; Available from:
169	https://onlinelibrary.wiley.com/doi/full/10.1002/fft2.375
170	3. Francioso A, Mastromarino P, Masci A, d'Erme M, Mosca L. Chemistry, Stability and
171	Bioavailability of Resveratrol.
172	4. Chen X, Song X, Zhao X, Zhang Y, Wang Y, Jia R, et al. Insights into the Anti-
173	inflammatory and Antiviral Mechanisms of Resveratrol. Mediators Inflamm. 2022;2022. Available

from: https://pubmed.ncbi.nlm.nih.gov/35990040/ 174 5. Vestergaard M, Ingmer H. Antibacterial and antifungal properties of resveratrol. Int J 175 Antimicrob Agents. 2019 Jun 1;53(6):716-23. Available from: 176 https://pubmed.ncbi.nlm.nih.gov/30825504/ 177 Vetvicka V, Volny T, Saraswat-Ohri S, Vashishta A, Vancikova Z, Vetvickova J. Glucan 6. 178 and resveratrol complex--possible synergistic effects on immune system. Biomed Pap Med Fac Univ 179 Olomouc Palacky Czech Repub. 2007;151(1):41-6. Available from: 180 https://pubmed.ncbi.nlm.nih.gov/17690738/ 181 7. Costagliola G, Nuzzi G, Spada E, Comberiati P, Verduci E, Peroni DG. Nutraceuticals in 182 Viral Infections: An Overview of the Immunomodulating Properties. Nutrients. 2021 Jul 1;13(7). 183 Available from: https://pubmed.ncbi.nlm.nih.gov/34371920/ 184 Francioso A, Mastromarino P, Restignoli R, Boffi A, D'Erme M, Mosca L. Improved 185 8. stability of trans-resveratrol in aqueous solutions by carboxymethylated (1,3/1,6)- $\beta$ -D-glucan. J 186 Agric 2014 19;62(7):1520-5. Available Food Chem. Feb from: 187 https://pubmed.ncbi.nlm.nih.gov/24467639/ 188 9. Schwager J, Richard N, Widmer F, Raederstorff D. Resveratrol distinctively modulates 189 the inflammatory profiles of immune and endothelial cells. BMC Complement Altern Med. 2017 190 Jun 13;17(1). Available from: https://pubmed.ncbi.nlm.nih.gov/28610607/ 191 Varricchio AM, Capasso M, Della Volpe A, Malafronte L, Mansi N, Varricchio A, et al. 10. 192 Resveratrol plus carboxymethyl-β-glucan in children with recurrent respiratory infections: a 193 preliminary and real-life experience. Ital J Pediatr. 2014 Nov 23;40:93. Available from: 194 https://pubmed.ncbi.nlm.nih.gov/25416925/ 195

196	11. Baldassarre ME, Di Mauro A, Labellarte G, Pignatelli M, Fanelli M, Schiavi E, et al.
197	Resveratrol plus carboxymethyl- $\beta$ -glucan in infants with common cold: A randomized double-blind
198	trial. Heliyon. 2020 Apr 1;6(4). Available from: https://pubmed.ncbi.nlm.nih.gov/32322697/
199	12. Indolfi C, Mignini C, Valitutti F, Bizzarri I, Dinardo G, Klain A, et al. Effects of Nasal
200	Solution Incorporating Resveratrol and Carboxymethyl-B-Glucan in Preschool Non-Atopic Children
201	with Wheezing. Nutrients. 2024 Jul 10;16(14):2197.
202	13. Miraglia Del Giudice M, Maiello N, Capristo C, Alterio E, Capasso M, Perrone L, et al.
203	Resveratrol plus carboxymethyl-β-glucan reduces nasal symptoms in children with pollen-induced
204	allergic rhinitis. Curr Med Res Opin. 2014 Oct 1;30(10):1931-5. Available from:
205	https://pubmed.ncbi.nlm.nih.gov/24983742/
206	14. Miraglia Del Giudice M, Maiello N, Decimo F, Capasso M, Campana G, Leonardi S, et
207	al. Resveratrol plus carboxymethyl-β-glucan may affect respiratory infections in children with
208	allergic rhinitis. Pediatr Allergy Immunol. 2014 Nov 1;25(7):724-8. Available from:
209	https://pubmed.ncbi.nlm.nih.gov/25199647/
210	15. Rossi GA, Sacco O, Capizzi A, Mastromarino P. Can Resveratrol-Inhaled Formulations
211	Be Considered Potential Adjunct Treatments for COVID-19? Front Immunol. 2021 May
212	19;12:670955.
213	