Green Tea

Draxer Teas · Green tea leaf, 3 g pyramid bags · 20 bags · Contains caffeine

INDICATION

Adults who want a daily antioxidant drink for heart, metabolic and weight support; patients with raised cholesterol, blood pressure or blood sugar as part of lifestyle change; and anyone who wants a gentler lift than coffee.

23%
fewer deaths in women drinking 5+ cups a day (9)

36%
lower odds of stroke at 1 to 3 cups a day (10)

16%
more fat burned over 24 hours with catechins and caffeine (5)

1–3 cups
a day, between meals

01 COMPOSITION AND DOSE

Green tea (*Camellia sinensis*) leaf, unfermented	**3 g per bag**
Caffeine, per cup	**about 25 to 35 mg**
Catechins, mostly EGCG, per cup	**up to 200 mg**

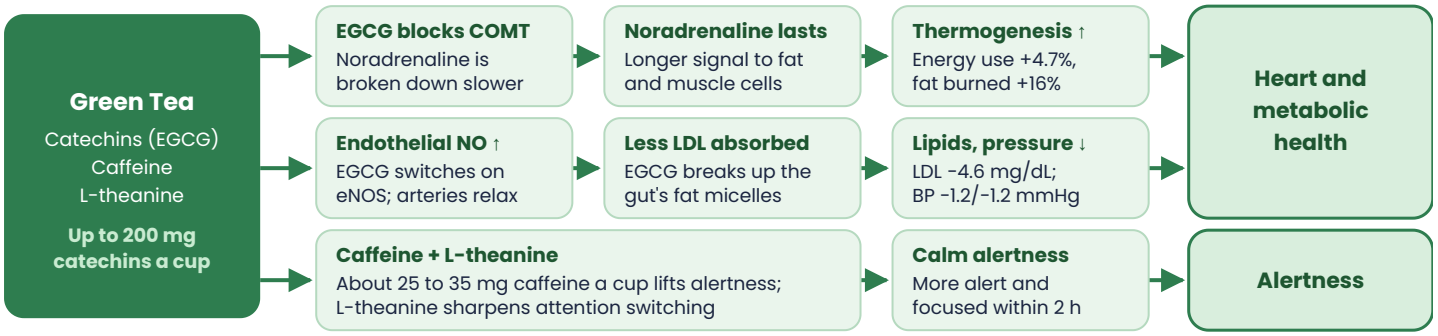
Plain leaf; no flavourings or sugar. A cup has about a third of the caffeine of a cup of coffee (1, 2). **Preparation:** one bag in 150 ml of water at 80 to 85°C, not boiling, for 2 to 3 minutes. **Dose:** 1 to 3 cups a day, between meals and not after mid-afternoon. **Label use:** provides a natural source of antioxidants and supports healthy metabolism.

HOW IT WORKS

EGCG, the main green tea catechin, blocks COMT, the enzyme that breaks down noradrenaline (3). The signal to fat and muscle lasts longer: 24-hour energy use rose 4% and urinary noradrenaline 40% (4), and across trials catechins with caffeine raised fat burning by 16% (5).

In blood vessels, EGCG switches on endothelial nitric oxide synthase, so arteries relax (6). In the gut, it breaks up the micelles that carry fat and cholesterol, so less is absorbed (7).

Caffeine and L-theanine together improve alertness and attention within 2 hours (8).



02 EVIDENCE, WITH REFERENCES

Study	Design and people	Intervention	Main result
Kuriyama 2006 (9)	11-year cohort, 40,530 Japanese adults	5+ cups a day vs under 1	Deaths from any cause 23% lower in women, 12% in men; cardiovascular deaths 31% and 22% lower
Pang 2016 (10)	Meta-analysis, 9 studies, 259,267 people	1–3 cups a day vs under 1	Heart attack 19% and stroke 36% less likely (RR 0.81, 0.64)
Xu 2020a (11)	Meta-analysis, 31 RCTs, 3,321 people	Green tea or its extract vs control	Total cholesterol down 4.7 mg/dL and LDL down 4.6 mg/dL
Xu 2020b (12)	Meta-analysis, 24 RCTs, 1,697 people	Green tea or its extract vs placebo	Systolic down 1.2 mmHg and diastolic down 1.2 mmHg
Liu 2013 (13)	Meta-analysis, 17 RCTs, 1,133 people	Green tea, extract or catechins vs control	Fasting glucose down 0.09 mmol/L; HbA1c down 0.3%; fasting insulin lower
Hursel 2011 (5)	Meta-analysis, 6 studies, 18 conditions, 24-hour chamber	Catechins with caffeine vs placebo	Energy use up 4.7% (428 kJ); fat oxidation up 16% (12 g)
Hursel 2009 (14)	Meta-analysis, 11 studies, 15 comparisons	Catechins with caffeine vs control	1.3 kg more weight lost, or less regained
Alexopoulos 2008 (15)	Crossover trial, 14 healthy adults	6 g green tea vs caffeine 125 mg vs hot water	Artery dilation (FMD) up 3.9% at 30 minutes; caffeine alone had no effect
Camfield 2014 (8)	Meta-analysis, 11 placebo-controlled studies	L-theanine with caffeine, single dose	Alertness and attention switching better within 2 hours (moderate effect)

Guideline: the EU herbal monograph recognises green tea leaf infusion for the relief of fatigue and sensation of weakness (16). **Evidence base:** the mortality and heart data are observational; trial effects on lipids, pressure and weight are modest (17).

WHO BENEFITS MOST

Raised cholesterol or blood pressure
Making lifestyle changes and want a daily drink that supports them.
Start: 2–3 cups a day; lipids at 3 months

Weight and blood sugar
Overweight, prediabetes or insulin resistance, alongside diet and activity.
Expect: modest extra weight loss with diet

Coffee drinkers wanting a gentler lift
Focus for work or study on a third of the caffeine of coffee.
Expect: alert within 2 hours

A heart-healthy habit
Adults over 40, or with a family history of heart disease or stroke.
Start: 1 to 3 cups every day

HOW TO USE IT IN PRACTICE

- **Starting:** one bag, 150 ml water at 80 to 85°C, 2 to 3 minutes; 1 to 3 cups a day between meals, last by mid-afternoon.
- **Monitoring:** weight, waist, blood pressure; lipids and fasting glucose or HbA1c where available; ask about sleep and palpitations.
- **Review:** at 3 months with lipids and glucose; then continue daily.
- **With prescribed treatment:** can be drunk alongside most heart and diabetes medicines; check the interactions list first.
- **With Draxer products:** Berberine for marked insulin resistance; Ubiquinone for statin users; GynoEssence in PCOS/PMOS; Chamomile Tea for a caffeine-free evening cup.
- **Caffeine budget:** count coffee, cola and energy drinks; adults under 400 mg a day (18).

SIDE EFFECTS AND SPECIAL GROUPS

Common	Mild stomach upset if drunk strong on an empty stomach.
Uncommon	Caffeine effects in sensitive people: restlessness, palpitations, poor sleep.
Liver	Injury reported with concentrated extract supplements, not with brewed tea (2).
Overdose	Over 400 mg caffeine a day (about 11+ cups) can cause anxiety, tremor and fast heartbeat (18).
Age 12 to 17	Caffeine up to 3 mg per kg a day (18): 1 to 2 cups.
Kidney, liver	Brewed tea in usual amounts; no green tea extract supplements in liver disease (2).

03 INTERACTIONS AND CAUTIONS

- **Iron:** tea with a meal cut iron absorption by 37%; an hour later, by 18% (19). Separate from iron tablets and from Vitaniom.
- **Nadolol:** two weeks of green tea cut nadolol levels by about three quarters and blunted its effect (20).
- **Warfarin:** very large intakes lowered INR (21). Ordinary cups are fine; keep intake steady.
- **Bortezomib:** EGCG blocks its action; avoid green tea during treatment (22).
- **Stimulants, sedatives:** caffeine adds to the first and opposes the second (16).

04 PREGNANCY AND BREASTFEEDING

Suitable in moderation. Caffeine up to 200 mg a day in pregnancy raises no safety concern (EFSA), and WHO advises staying under 300 mg (18, 23); that is 1 to 2 cups of green tea a day, counting other sources. Breastfeeding: the same limit. The label precaution is the standard one.

05 WHEN NOT TO RECOMMEND

- Children under 12 years and anyone sensitive to caffeine
- Active gastric or duodenal ulcer, uncontrolled hypertension, arrhythmia or hyperthyroidism (16)
- Iron-deficiency anaemia under treatment, unless taken well away from iron (19)
- Patients on bortezomib (22)
- Unexplained palpitations, tremor or weight loss: refer

PATIENT COUNSELLING CHECKLIST

- ☐ Water just off the boil, 2 to 3 minutes
- ☐ 1 to 3 cups a day, between meals
- ☐ Last cup by mid-afternoon for good sleep
- ☐ Keep it an hour away from iron tablets
- ☐ Count coffee, cola and energy drinks too
- ☐ Pregnant: no more than 1 to 2 cups a day
- ☐ Palpitations or poor sleep: cut down
- ☐ On warfarin: keep the amount steady

Product details. 20 pyramid bags of 3 g, 60 g net (7 to 20 days at 1 to 3 cups a day). Store below 30°C in a dry place, away from direct light; keep the pack closed. Shelf life 24 months from manufacture; see pack for expiry. Herbal tea packed for Draxer Teas by a partner manufacturer. Keep out of reach of children.

References

1. USDA FoodData Central. Beverages, tea, green, brewed, regular. FDC 171917.
2. EFSA ANS Panel. Safety of green tea catechins. EFSA J 2018;16:5239.
3. Lu H, et al. Drug Metab Dispos 2003;31:572–9.
4. Dulloo AG, et al. Am J Clin Nutr 1999;70:1040–5.
5. Hursel R, et al. Obes Rev 2011;12:e573–81.
6. Lorenz M, et al. J Biol Chem 2004;279:6190–5.
7. Koo SI, Noh SK. J Nutr Biochem 2007;18:179–83.
8. Camfield DA, et al. Nutr Rev 2014;72:507–22.
9. Kuriyama S, et al. JAMA 2006;296:1255–65.
10. Pang J, et al. Int J Cardiol 2016;202:967–74.
11. Xu R, et al. Nutr J 2020;19:48.
12. Xu R, et al. Medicine (Baltimore) 2020;99:e19047.
13. Liu K, et al. Am J Clin Nutr 2013;98:340–8.
14. Hursel R, et al. Int J Obes 2009;33:956–61.
15. Alexopoulos N, et al. Eur J Cardiovasc Prev Rehabil 2008;15:300–5.
16. EMA/HMPC. EU herbal monograph, green tea leaf. EMA/HMPC/283630/2012.
17. Jurgens TM, et al. Cochrane Database Syst Rev 2012;(12):CD008650.
18. EFSA NDA Panel. Safety of caffeine. EFSA J 2015;13:4102.
19. Ahmad Fuzi SF, et al. Am J Clin Nutr 2017;106:1413–21.
20. Misaka S, et al. Clin Pharmacol Ther 2014;95:432–8.
21. Taylor JR, Wilt VM. Ann Pharmacother 1999;33:426–8.
22. Golden EB, et al. Blood 2009;113:5927–37.
23. WHO. Recommendations on antenatal care for a positive pregnancy experience. Geneva, 2016.