

Table 1 A brief study schedule at every visit.

| | Screening Visit 1 | Baseline Visit 2 | Visit 3 | Visit 4 | Visit 5 | Follow up (Visit 6) |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|
| | D-21 ~D-1 | Week 0 D0 | Week 4 D28 | Week 8 D56 | Week 12 D84 | Week 16 D112 |
| Informed consent form | <input type="radio"/> | | | | | |
| Demographic information taking ¹ | <input type="radio"/> | | | | | |
| Medical history taking | <input type="radio"/> | | | | | |
| Inclusion/exclusion criteria check | <input type="radio"/> | <input type="radio"/> | | | | |
| Physician examination ² | <input type="radio"/> | | | | <input type="radio"/> | |
| Drinking/smoking taking status ³ | <input type="radio"/> | | | | <input type="radio"/> | |
| Vital sign measurement | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Concomitant drugs check | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Electrocardiogram(ECG) | <input type="radio"/> | | | | <input type="radio"/> | |
| Histamine skin prick test | <input type="radio"/> | | | | <input type="radio"/> | |
| Laboratory test ⁴ | <input type="radio"/> | | | | <input type="radio"/> | |
| Histamine & ECP | | <input type="radio"/> | | | <input type="radio"/> | |
| Study product distribution | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | |
| Compliance checking | | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Adverse event monitoring | | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Diet, physical exercise counseling ⁵ | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | |

○ : Item need to be perform during the visit

¹ Sex, date of birth, age, contact address and phone number

² Include present illness, past history taking

^{3,5} Risk factors such as alcohol drinking, smoking, severe exercise and other dietary supplement intake will be managed

⁴ Blood test(WBC, RBC, hemoglobin, hematocrit, platelets count, AST, ALT, ALP, gamma-GTP, , albumin, BUN, creatinine, glucose, total bilirubin, total protein, total-cholesterol, triglyceride, LDL-C, HDL-C, IgE), urine test(specific gravity, pH, Protein, Ketone, Glucose, bilirubin, urobilinogen, nitrite, microscopic (RBC, WBC))