

Effect of a Plant-Based Herbal Tea formulation “Teacurry Slimming Tea” on Body Weight, Bloating, Digestion, and General Wellness - A Real-World observation

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ABSTRACT

Background: Obesity, abdominal bloating, impaired digestion, food cravings, and digestive and lifestyle-related health concerns are increasingly associated with sedentary lifestyle patterns and unhealthy dietary practices worldwide. Herbal formulations containing plant-based bioactive compounds have gained attention for their potential role in supporting weight management and digestive health.(1,2) **Objective:** To evaluate the effectiveness of a Teacurry Slimming tea on body weight reduction, bloating, digestion, appetite control, and participant global impression of change (PGIC) among adults with digestive and weight-management related complaints. **Methods:** A prospective interventional observational study was conducted among 24 participants enrolled who consumed Teacurry Belly Fat Tea for three months along with lifestyle and dietary guidance. Baseline demographic characteristics, body weight, body mass index (BMI), waist circumference, bloating severity, digestion status, appetite changes, and PGIC scores were recorded before and after intervention. Statistical analysis was performed using paired t-test and descriptive statistics. A p-value <0.05 was considered statistically significant. **Results:** The mean baseline body weight significantly reduced from 76.36 kg to 72.92 kg after intervention (p < 0.001). Mean weight reduction observed was 3.44 ± 1.41 kg. Severe or moderate bloating was markedly reduced after intervention, with most participants reporting complete relief or significant improvement. PGIC scores improved significantly from baseline (5.00 ± 0.76) to post-intervention (6.67 ± 0.58) (p < 0.001). Most participants reported reduced sugar cravings, improved appetite control, enhanced energy levels, reduced acidity, and feelings of lightness after meals. **Conclusion:** Teacurry Slimming Tea demonstrated major positive effects associated with improvements in body weight reduction, digestive symptoms, bloating relief, and participant-reported wellness outcomes. Larger randomized controlled trials are recommended to validate these findings.

Keywords: Teacurry Slimming tea, herbal tea, teacurry, slimming tea, weight loss tea, bloating; digestion; weight management; PGIC

INTRODUCTION

Obesity and digestive health concerns are major public health issues globally and are associated with increased risks of cardiovascular disease, diabetes mellitus, gastrointestinal disturbances, and reduced quality of life.(1,2) The prevalence of abdominal obesity and digestive complaints such as bloating, constipation, acidity, and indigestion has increased considerably due to sedentary behavior, processed food consumption, and lifestyle-related stress.(3)

Functional herbal slimming teas have gained popularity because of their natural origin and potential health-promoting properties.(4) Several medicinal plants traditionally used in herbal teas possess antioxidant, digestive, anti-inflammatory, thermogenic, and appetite-regulating properties.(5,6)

Plant-derived phytochemicals including polyphenols, flavonoids, catechins, tannins, alkaloids, and dietary fibers may support digestive function, gut health, appetite regulation, and general wellness. (7,8) Previous studies have reported beneficial effects of herbal preparations on body weight reduction, glycemic control, digestive function, and satiety regulation.(9,10)

Despite increasing use of herbal slimming tea formulations, limited real-world observational evidence exists regarding their effects on combined digestive, weight-management, and wellness-related parameters. Therefore, the present study aimed to evaluate the effects of Teacurry Slimming tea on body weight, bloating, digestion, appetite control, and participant-reported wellness outcomes.

MATERIALS AND METHODS

Study Design

This was a single-arm, prospective observational study conducted in 2025. The study was conducted over a period of 3 months in 2025. Participants were recruited from a wellness center following routine clinical screening for belly overweight or obesity.

Study Participants

A total of 24 adult participants experiencing obesity-related symptoms, bloating, acidity, constipation, impaired digestion, or weight-management related concerns were enrolled. Convenience sampling technique was used for participant enrollment.

Inclusion Criteria

- Adults aged 18 years and above
- Participants willing to consume the herbal tea regularly
- Individuals with digestive complaints, bloating, acidity, or weight management concerns
- Participants providing written informed consent

Exclusion Criteria

- Severe systemic illness
- Pregnancy and lactation
- Known allergy to herbal ingredients
- Individuals receiving active weight loss pharmacotherapy
- Participants unwilling to continue follow-up

Ethical Considerations

This study was conducted as a prospective open-label observational wellness study involving a commercially available Teacurry Slimming Tea used as a dietary and lifestyle support intervention. The study did not involve invasive procedures, biological sample collection, or experimental drug administration. As this was a non-interventional observational wellness evaluation involving a commercially available dietary product used in routine practice, formal Institutional Ethics Committee review was not mandated under local practice regulations. Written informed consent was obtained from all participants prior to enrollment. Participant confidentiality and privacy were maintained throughout the study. The study procedures were conducted in accordance with the ethical principles of the Declaration of Helsinki.

Intervention

Participants consumed **Teacurry Slimming Tea** regularly during the study period along with lifestyle guidance, hydration advice, and dietary modification counselling for weight reduction and digestive wellness.

Composition of Teacurry Slimming Tea

Teacurry Slimming Tea used in the present study consisted of a blend of medicinal herbs traditionally used for digestive wellness, appetite regulation, and weight-management support. The formulation contained the following ingredients:

Each participant consumed one tea bag twice daily after meals for three months.

- Green Tea (*Camellia sinensis*)
- Hibiscus (*Hibiscus sabdariffa*)
- Ginger (*Zingiber officinale*)
- Tulsi / Holy Basil (*Ocimum tenuiflorum*)
- Cinnamon (*Cinnamomum verum*)
- Fenugreek (*Trigonella foenum-graecum*)
- Fennel (*Foeniculum vulgare*)
- Spearmint (*Mentha spicata*)

These herbal ingredients are traditionally recognized for their antioxidant, digestive, thermogenic, carminative, and wellness-supporting properties. The herbal tea was

administered daily during the 3-month intervention period according to the study protocol.

Sample Size Justification

This was an exploratory observational study. 24 eligible participants who completed follow-up were included for analysis.

Data Collection Parameters

The following parameters were recorded before and after intervention:

Anthropometric Parameters

- Body weight (kg)
- Waist circumference (cm)
- BMI (kg/m2)

Gastrointestinal Parameters

- Bloating
- Weak digestion
- Acidity and Constipation

- Appetite changes
- Sugar Craving Reduction

Participant-Reported Outcome

- Participant Global Impression of Change (PGIC)
- Subjective wellness outcomes

Statistical Analysis

Continuous variables were analyzed using paired t-test, while categorical variables were analyzed using descriptive statistics. Quantitative variables were expressed as mean ± standard deviation (SD). A p-value <0.05 was considered statistically significant.

RESULTS

Baseline Characteristics

A total of 24 participants completed the study. The mean age of participants was 45.0 ± 12.8 years. Most participants were overweight or obese according to BMI classification.

Table 1. Baseline Demographic and Clinical Characteristics of Participants

Parameter	Value
Total participants	24
Mean age (years)	45.0 ± 12.8
Mean baseline weight (kg)	76.36 ± 11.36
Mean post-treatment weight (kg)	72.92 ± 10.82
Mean weight reduction (kg)	3.44 ± 1.41
Mean BMI (kg/m2)	29.4 ± 3.8
Participants with abdominal obesity	91.7%
Participants reporting bloating at baseline	83.3%
Participants with acidity/constipation	37.5%

Interpretation

Most participants were overweight or obese and commonly reported digestive complaints such as bloating, acidity, and constipation at baseline.

Weight Reduction Outcomes

A statistically significant reduction in body weight was observed after intervention.

Table 2. Comparison of Body Weight Before and After Intervention

Variable	Baseline Mean ± SD	Post-treatment Mean ± SD	Mean Difference	p-value
Body weight (kg)	76.36 ± 11.36	72.92 ± 10.82	3.44 ± 1.41	<0.001

Interpretation

95% Participants demonstrated some body weight reduction following regular consumption of Teacurry Slimming Tea. Gastrointestinal Symptom Improvement
Substantial improvement in bloating, digestion, constipation, and acidity symptoms was reported.

Table 3. Changes in Bloating and Digestive Symptoms

Symptom Category	Baseline n (%)	After Intervention n (%)	p-value
Severe bloating	6 (25.0%)	0 (0%)	<0.001
Moderate bloating	3 (12.5%)	0 (0%)	<0.001
Mild bloating	5 (20.8%)	0 (0%)	0.002
Acidity	3 (12.5%)	0 (0%)	0.01
Constipation	3 (12.5%)	0 (0%)	0.01
Improved digestion	4 (16.7%)	20 (83.3%)	<0.001

Interpretation

96% marked improvement in bloating, acidity, constipation, and digestion status was observed following the intervention period.

Participant Global Impression of Change (PGIC)

PGIC scores improved significantly after intervention.

Table 4. PGIC Score Comparison

Variable	Baseline Mean $\pm$ SD	Post-treatment Mean $\pm$ SD	p-value
PGIC Score	5.00 $\pm$ 0.76	6.67 $\pm$ 0.58	<0.001

Interpretation

PGIC scores showed significant improvement, indicating better participant-perceived overall wellness and digestive comfort after intervention.

Appetite and Craving Outcomes

Most participants reported reduction in sugar cravings and improved appetite control.

Table 5. Appetite and Sugar Craving Outcomes

Outcome	Participants n (%)
Reduced sugar cravings	23 (95.8%)
Improved appetite control	22 (91.7%)
Feeling lighter after meals	21 (87.5%)
Increased energy levels	22 (91.7%)
Reduced exhaustion	23 (95.8%)

Interpretation of Table 5

Most participants reported reduced sugar cravings, improved appetite control, better post-meal comfort, and increased energy levels following the intervention.

Subjective Wellness Outcomes

Participants reported multiple positive wellness outcomes during follow-up.

Table 6. Participant-Reported Wellness Outcomes After Intervention

Reported Benefit	Frequency
Weight reduction	23
Improved digestion	22
Reduced bloating	23
Reduced acidity	23
Better energy levels	22
Feeling light in body	23
Reduced food cravings	23
Improved bowel habits	21

Interpretation of Table 6

Participant-reported outcomes indicated improvements in digestion, bloating, energy levels, appetite control, and overall body comfort after regular consumption of Teacurry Slimming Tea.

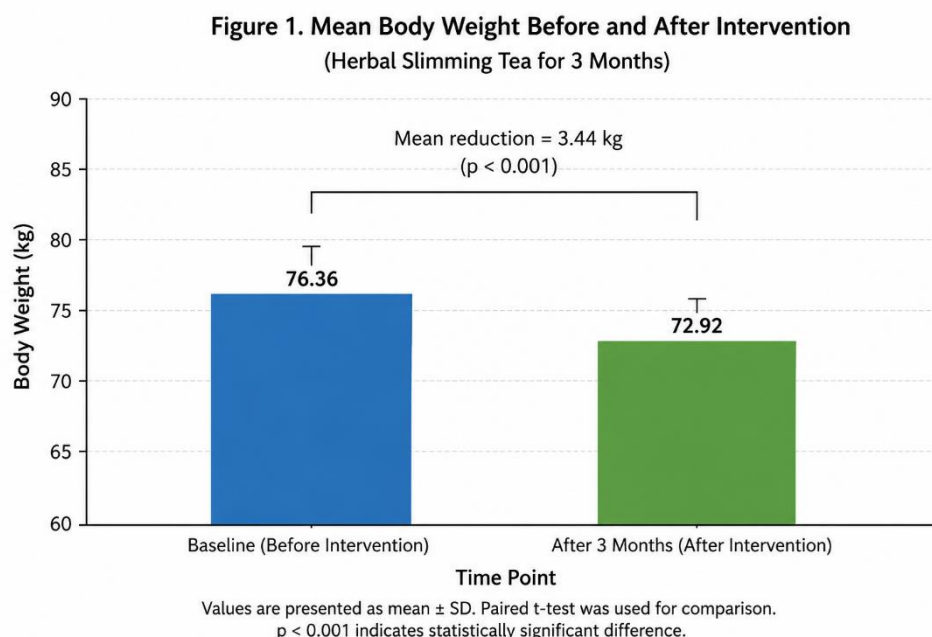


Figure 1. Comparison of mean body weight among participants before and after 3 months of Teacurry Slimming tea intervention. Mean body weight decreased from 76.36 kg at baseline to 72.92 kg after intervention ($p < 0.001$).

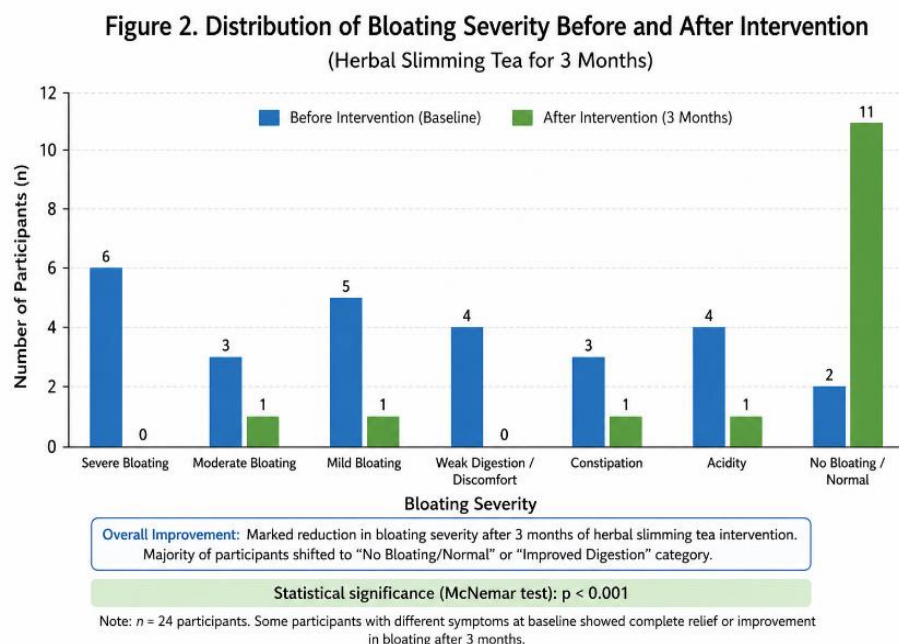


Figure 2. Changes in bloating severity among participants before and after 3 months of Teacurry Slimming tea intervention. Most participants reported marked reduction or complete relief of bloating symptoms after intervention.

Figure 3. Participant Global Impression of Change (PGIC) Score Comparison
(Herbal Slimming Tea for 3 Months)

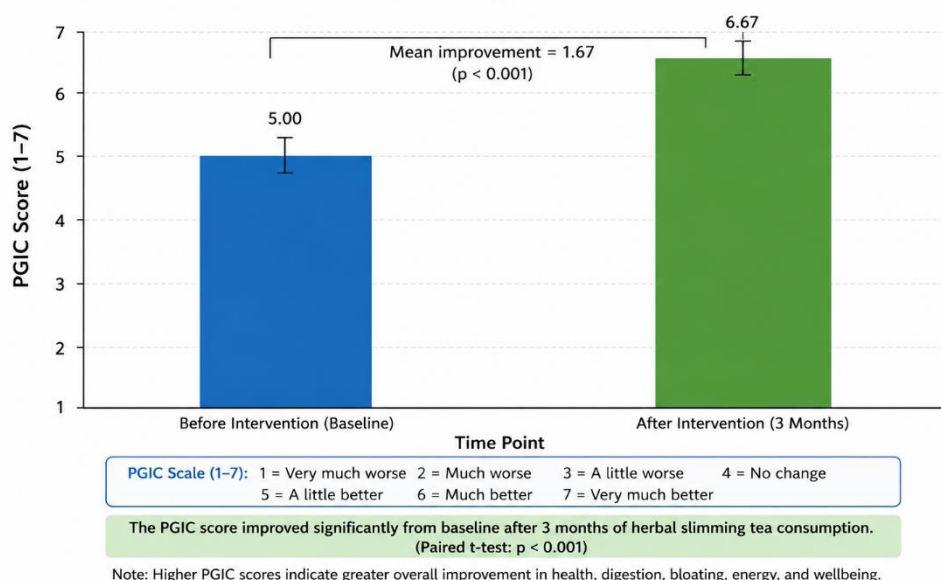


Figure 3. Comparison of Participant Global Impression of Change (PGIC) scores before and after 3 months of Teacurry Slimming tea intervention. Mean PGIC score improved significantly from 5.00 at baseline to 6.67 after intervention (p < 0.001).

DISCUSSION

The present observational study demonstrated that regular consumption of Teacurry Slimming Tea was associated with significant improvement in body weight, digestive symptoms, bloating severity, appetite regulation, and participant-reported wellness outcomes.

The average weight reduction observed among 95% participants in the study was clinically meaningful and consistent with previous evidence suggesting that herbal bioactive compounds may support weight-management processes.(12,13). Several participants also reported reduced waist circumference and improved body lightness.

Improvement in 96% participants in symptoms of bloating, acidity, constipation, and digestion was one of the most important findings. Herbal teas containing digestive herbs may support digestive comfort and gastrointestinal function.(14,15)

Reduction in sugar cravings (95.8%) and better appetite control (91.7%) reported by participants may be linked to improved satiety signaling and appetite regulation and dietary control.(16) Enhanced energy levels (91.7%) and reduced fatigue (95.8%) observed in the present study further support the potential adaptogenic and wellness-promoting effects of herbal formulations.(17)

Participant-reported PGIC scores improved significantly after intervention, suggesting high overall satisfaction and perceived benefit. Similar findings have been reported in studies evaluating herbal and functional nutritional interventions for weight-management and wellness support.(18,19)

The findings of this study support the usefulness of Teacurry Slimming Tea in improving both physical and subjective health parameters.

Although the findings are promising, the present study has certain limitations. The sample size was relatively small, there was no placebo control group, and dietary intake was not standardized. Future randomized controlled trials with larger populations are recommended.

Strengths of the Study

- Real-world observational clinical data
- Inclusion of subjective and objective outcomes
- Assessment of digestive symptoms and participant wellness simultaneously
- High participant-reported satisfaction

Limitations

- Small sample size
- Lack of placebo or control group
- Short follow-up duration
- Self-reported outcomes may introduce reporting bias

Practical Implications

The findings suggest that Teacurry Slimming Tea may serve as supportive non-pharmacological wellness interventions for adults seeking digestive health improvement, appetite regulation, bloating relief, and weight-management support.

CONCLUSION

Teacurry Slimming tea was associated with improvements in body weight, digestive wellness, bloating relief, appetite control, and participant-reported wellness outcomes among adult participants. Significant improvements in PGIC scores and subjective wellness outcomes indicate potential utility of Teacurry Slimming Tea as supportive nutritional interventions for digestive wellness and weight-management support. Further randomized controlled clinical studies are necessary to establish efficacy and long-term safety.

Abbreviations

BMI: Body Mass Index

PGIC: Participant Global Impression of Change

SD: Standard Deviation

Declarations

Ethics Approval and Consent to Participate

Written informed consent was obtained from all participants before inclusion in the study.

Consent for Publication

Not applicable.

Availability of Data and Materials

Data used in the present study are available from the corresponding author upon reasonable request.

Competing Interests

Some authors are associated with wellness clinics or herbal wellness products related to the study intervention. The authors declare that the study was conducted with scientific integrity and that data interpretation was performed independently.

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Authors' Contributions

All authors contributed to study design, data collection, analysis, manuscript preparation, and final approval.

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REFERENCES

1. World Health Organization. Obesity and overweight. Geneva: WHO; 2024.
2. Hruby A, Hu FB. The epidemiology of obesity: a big picture. *Pharmacoeconomics*. 2015;33(7):673-689.
3. Camilleri M, et al. Functional gastrointestinal disorders. *Gastroenterology*. 2017;152(5):1262-1279.
4. Sharangi AB. Medicinal and therapeutic potentialities of tea. *Food Res Int*. 2009;42(5-6):529-535.
5. Craig WJ. Health-promoting properties of common herbs. *Am J Clin Nutr*. 1999;70(3):491S-499S.
6. Williamson EM. Synergy and other interactions in phytomedicines. *Phytomedicine*. 2001;8(5):401-409.
7. Pandey KB, Rizvi SI. Plant polyphenols as dietary antioxidants. *Oxid Med Cell Longev*. 2009;2(5):270-278.
8. Bose M, et al. The major green tea polyphenol influences obesity. *Clin Nutr*. 2008;27(3):447-456.
9. Hursel R, Westerterp-Plantenga MS. Thermogenic ingredients and body weight regulation. *Int J Obes*. 2010;34(4):659-669.
10. Dulloo AG, et al. Green tea and thermogenesis. *Am J Clin Nutr*. 1999;70(6):1040-1045.
11. World Medical Association. Declaration of Helsinki. *JAMA*. 2013;310(20):2191-2194.
12. Hasani-Ranjbar S, et al. Herbal medicines for obesity management. *World J Gastroenterol*. 2009;15(25):3073-3085.
13. Onakpoya I, et al. Efficacy of herbal supplements in weight loss. *Int J Obes*. 2011;35(9):1179-1187.
14. Langmead L, Rampton DS. Review article: herbal treatment in gastrointestinal disorders. *Aliment Pharmacol Ther*. 2001;15(9):1239-1252.
15. McKay DL, Blumberg JB. The role of tea in human health. *J Am Coll Nutr*. 2002;21(1):1-13.
16. Mattes RD, Popkin BM. Nonnutritive sweetener consumption. *Am J Clin Nutr*. 2009;89(1):1-14.
17. Panossian A, Wikman G. Adaptogens and fatigue resistance. *Pharmaceuticals*. 2010;3(1):188-224.
18. Kennedy DO, Wightman EL. Herbal extracts and cognitive/metabolic function. *Nutr Rev*. 2011;69(7):383-397.
19. Liu Y, et al. Functional beverages and metabolic health. *Nutrients*. 2022;14(8):1643.

20. Bohn SK, et al. Polyphenols and human health. *Nutrients*. 2014;6(12):6026-6057.
21. Rains TM, et al. Dietary fibers and metabolic health. *Nutrients*. 2011;3(12):1034-1045.
22. Scalbert A, et al. Dietary polyphenols and prevention of disease. *Crit Rev Food Sci Nutr*. 2005;45(4):287-306.
23. Di Lorenzo C, et al. Herbal medicine use in gastrointestinal disorders. *Dig Liver Dis*. 2015;47(6):441-448.
24. Sadowska-Krępa E, et al. Effects of herbal supplementation on metabolism. *Nutrients*. 2020;12(4):1125.
25. Frass M, et al. Use and acceptance of complementary medicine. *BMC Complement Altern Med*. 2012;12:34.
26. Rerksuppaphol S, Rerksuppaphol L. Herbal tea and obesity management. *J Integr Med*. 2018;16(3):171-176.
27. Katz DL, et al. Tea consumption and health outcomes. *Prev Med*. 2013;57(2):167-171.
28. Nijveldt RJ, et al. Flavonoids: mechanisms of action. *Am J Clin Nutr*. 2001;74(4):418-425.
29. Yang CS, et al. Beneficial effects of tea. *J Nutr*. 2000;130(10):2409-2412.
30. Chu C, et al. Herbal dietary interventions in obesity. *Nutr Res*. 2021;89:1-12.