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FERTIL-PRO FOR WOMEN WITH VITAMIN D3

NPN	80035639	**FORMAT**	90 tablets
INDICATIONS	Fertil-Pro for women with vitamin d is designed to optimize female fertility. it is indicated for all women in the pre-conceptional period.	**DOSAGE**	1 tablet per day, for 3 to 6 Months

COMPOSITION

Magnesium	120 mg	Iron.....	22 mg
Folic Acid.....	1 mg	Vitamin B12	0.28 mcg
Zinc	20 mg	Copper	2 mg
Vitamin B6.....	2 mg	Vitamin D3	1000 IU

DOCUMENTATION

Fertil-Pro for Women with Vitamin D is an all natural, non-prescription formula supplement. Fertil-Pro for Women with Vitamin D is a unique combination designed to modulate oxidative stress to increase fertility and improve reproductive health. Fertil-Pro for Women with Vitamin D was formulated on the basis of established scientific literature to help optimize fertility safely and naturally as part of a healthy diet and lifestyle.

Many people don't realize their body might be missing important nutrients.

Although human studies are scarce, and conclusive evidence is provided solely for periconceptional folate and prevention of neural tube defects (NTDs), the overall data indicate that micronutrients may affects fertility, embryogenesis and placentation, and the prophylactic use of some micronutrients may be useful in preventing several adverse pregnancy outcomes. Efforts to increase awareness of a healthy diet should be strengthened not only throughout pregnancy but also before.

MAGNESIUM: MAGNESIUM HVP CHELATE 20% MG

Magnesium is an essential mineral for ATP generation and DNA synthesis. Magnesium and copper are important for normal uterine function.

IRON: FERROUS FUMARATE 60%, 19.72% FE

Iron is a necessary trace element (component of Hemoglobin). Anemia can lead to infertility. Women who bleed heavily (during menses) may become anemic. Iron and zinc deficiency can produce cognitive and growth impairment of the fetus. Worldwide, iron deficiency represents the most common nutritional deficit (Scholl, 2005), that can exist with or without anemia. Although iron deficiency is a common cause of anemia, anemia may also result from other causes (i.e. deficiencies of folate, vitamin B12 and vitamin B6). Studies in both humans and animals have shown that iron-deficient anemia in early life is linked to altered behavioral and neural development, and is suggested to result in irreversible effects on neurochemistry and neurobiology (reviewed by Beard, 2003, 2007). This may be explained by considering alterations in morphology, neurochemistry and biogenetics within the central nervous system.

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FOLIC ACID: FOLATE, VITAMIN B9

Folic acid is an essential B-complex vitamin required for DNA synthesis and cell growth. It is important for oocyte quality, implantation and fetal growth. Folic acid reduces the risk of neural tube defect (e.g. spina bifida). It is essential to supplement both before and during pregnancy.

All of the B vitamins are essential during the pre-conceptual period. Research has shown that giving B6 to women who have trouble conceiving increases fertility.

VITAMINE B12: COBALAMIN

Vitamin B12 is an essential B-complex vitamin required for DNA synthesis and cell growth. B12 must be added to folic acid (high folic acid levels may mask B12 deficiency).

Folic acid together with vitamin B12, folic acid works to ensure that baby's genetic codes are intact.

ZINC: GLUCONATE, 13.3% ZN

Zinc is an essential trace element involved in multiple biological functions. It generally functions as an antioxidant. Iron and zinc deficiency can produce cognitive and growth impairment of the fetus.

Zinc is the most widely studied nutrient in terms of fertility for both men and women. It is an essential component of genetic material and a zinc deficiency can cause chromosome changes, leading to reduced fertility and an increased risk of miscarriage. Zinc is necessary for the body to 'attract and hold' the reproductive hormones, oestrogen and progesterone.

COPPER: COPPER HVP CHELATE, 10% CU

Copper is an essential trace element involved in multiple biological functions. Magnesium and copper are important for normal uterine function.

Copper exhibits several biological roles being involved in connective tissues formation, iron metabolism, cardiac function, immune function (Turnlund, 2006) and central nervous system development (Prohaska, 2000; Gybina and Prohaska, 2003). Interestingly, new insights are emerging into the role of iron and copper in neurocognitive and neurobehavioral development during the last two thirds of gestation, and in long-term consequences of their perinatal deficiency (Beard et al., 2003; Penland and Prohaska, 2004; Gybina and Prohaska, 2006; Beard, 2008).

VITAMINE B6: PYRIDOXINE HYDROCHLORIDE

Vitamin B6 is an essential B-complex vitamin required for DNA synthesis and cell growth. Vitamin B6 is important for normal uterine function.

VITAMIN D3: CHOLECALCIFEROL

Vitamin D has been well-known for its function in maintaining calcium and phosphorus homeostasis and promoting bone mineralization. There is evidence that vitamin D exerts some effects on female reproduction including IVF outcome, PCOS, and endometriosis. In PCOS women, low 25-hydroxyvitamin D (25(OH)D) levels are associated with obesity, metabolic, and endocrine disturbances and vitamin D supplementation might improve menstrual frequency and metabolic disturbances in those women. Moreover, vitamin D might influence steroidogenesis of sex hormones (estradiol and progesterone) in healthy women and high 25(OH)D levels might be associated with endometriosis.

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