

Multi #2 Vitamins & Minerals

Code: FE0391 – 180 tablets; FE1243 – 60 tablets



MULTI #2 is a complex of 26 vitamins and minerals in an herbal base. This new formula is iron-free, because different studies as well as professional experience advises iron supplementation only in cases of deficiency. It is therefore preferable not to include this mineral in formulas that are taken daily in order to avoid an excess of this mineral in the body. Another characteristic of this new formula is vitamin B₁₂ in the form of methylcobalamin instead of cyanocobalamin because it is more active and has shown better absorption.

Ingredients: Bulking agent: microcrystalline cellulose, HVP from rice** (magnesium chelate), calcium salts of orthophosphoric acid (dicalcium phosphate), L-ascorbic acid (vit. C), calcium salts of citric acid (calcium citrate), D-*alpha*-tocopheryl acid succinate (vit. E), potassium chloride, D-pantothenate calcium (vit. B5), anticaking agent (magnesium salts of fatty acids) HVP from rice** (zinc chelate), choline bitartrate, thiamin hydrochloride (vit. B1), riboflavin (vit. B2), inositol, *para*-aminobenzoic acid (PABA), pyridoxin hydrochloride (vit. B6), nicotinic acid (vit. B3), nicotinamide (vit. B3), HVP from rice** (selenium chelate), carrier: carboxymethylcellulose, HVP from rice** (copper chelate), HVP from rice** (chromium chelate), **soy** lecithin (*Glycine max*), rose hips fruit (*Rosa canina*), licorice root (*Glycyrrhiza glabra*), chamomile flower (*Matricaria chamomilla*), cayenne fruit (*Capsicum annuum*), uva ursi leaf (*Arctostaphylos uva-ursi*), cholecalciferol (vit. D3), D-biotin, anticaking agent (silicon dioxide), calcium-L-methylfolate (folate), methylcobalamin (vit. B12), HVP from rice** (manganese chelate), potassium iodide, glazing agents: polyvinyl alcohol, talc, polyethylene glycol, polysorbate 80.

Nutritional information:

2 tablets

Vitamin B ₁ (thiamin) (from 20 mg thiamin hydrochloride)	17,8 mg (1 618%*)
Vitamin B ₂ (riboflavin)	20 mg (1 429%*)
Niacin (vit. B ₃) (from nicotinic acid and nicotinamide)	20 mg (125%*)
Pantothenic acid (vit. B5) (from 30 mg D-pantothenate calcium)	27,5 mg (458%*)
Vitamin B6 (from 14,6 mg pyridoxin hydrochloride)	12 mg (857%*)
Folate (from calcium L-methylfolate)	140 µg (70%*)
Vitamin B ₁₂ (methylcobalamin)	30 µg (1 200%*)
Vitamin C (L-ascorbic acid)	400 mg (500%*)
Vitamin D ₃ (cholecalciferol) (300 IU)	7,5 µg (150%*)
Vitamin E (D- <i>alpha</i> -tocopheryl acid succinate) (130 IU)	87 mg <i>alpha</i> -TE (725%*)
Biotin	30 µg (60%*)
Calcium (from dicalcium phosphate)	260 mg (33%*)
Magnesium (HVP chelate)	130 mg (35%*)
Zinc (HVP chelate)	5 mg (50%*)
Copper (HVP chelate)	1 mg (100%*)
Iodine (from potassium iodine)	80 µg (53%*)
Chromium (HVP chelate)	50 µg (125%*)
Selenium (HVP chelate)	50 µg (91%*)
Choline	20 mg
Inositol	20 mg
PABA	20 mg
Lecithine (from soy)	3 mg
Rose hip (<i>Rosa canina</i>)	3 mg
Licorice (<i>Glycyrrhiza glabra</i>)	3 mg
Chamomile (<i>Matricaria chamomilla</i>)	3 mg
Cayenne (<i>Capsicum annuum</i>)	3 mg
Uva ursi (<i>Arctostaphylos uva-ursi</i>)	3 mg

*NRV: Nutrient Reference Value in %

**HVP = Hydrolysed vegetable protein

Size and format:

180 and 60 tablets

Recommended daily dose:

1 tablet twice daily with a meal.

Do not exceed the stated recommended daily dose.

Cautions:

Consult a health-care practitioner before use if you are pregnant or breast-feeding, if you are treated with medication, or if you have a special medical condition.

Keep in mind that fibre can decrease mineral absorption, so fibre and minerals should be taken at different times.

People with nicotinic acid sensitivity may experience reddening of the skin which is generally mild and transitory in nature.

Indications and uses:

Different studies have shown that the ingredients in MULTI #2 can be of help for the following conditions:

Strengthening the immune system and increasing resistance to infection, protecting cells from free radicals, protection against environmental pollution, regulating blood pressure and blood sugar levels, promoting blood vessel elasticity, strengthening connective tissue, regenerating collagen, promoting the health of fingernails, hair and skin, and increasing bone mineral storage.

It is also of great help in cases of nutritional deficiency and is beneficial for premenstrual syndrome. It accelerates healing in the body and balances pH.

In general, it improves the different functions of the body.

With current lifestyles, eating habits, low or non-existent levels of nutrients in food, stress and environmental factors, a great majority of people have vitamin and mineral deficiencies, so a good supplement is recommended in order to cover these shortages.

Vitamins are essential for life. They contribute to good health, playing a very important role in metabolism, growth, maintenance and care of the body. They are classified into two groups: water soluble and liposoluble vitamins. The water soluble vitamins are the B vitamins and vitamin C. Once used by the body, any excess is expelled through the urine, so they need to be consumed daily.

The liposoluble vitamins are vitamins A, E, D and K, which are stored for longer in fat tissue and the liver. These are preferably taken with foods containing a little fat in order to favour their absorption or elimination in the case of excess^(1-4,10-13).

Minerals, like vitamins, allow the body to function correctly. They are necessary for the composition of bodily fluids and their balance, and for the maintenance of nerve function and muscle contraction. They also influence the production and secretion of hormones⁽⁶⁻⁹⁾.

The so-called macro minerals (calcium, magnesium, potassium, sodium and phosphorous) are needed in larger amounts than trace minerals (selenium, zinc, copper, iron, manganese, iodine, chrome, boron, cobalt, silica and sulfur) which are needed in small quantities⁽¹¹⁻¹³⁾.

References:

- 1) Fletcher, R. H., & Fairfield, K. M. (2002). Vitamins for chronic disease prevention in adults: clinical applications. *Jama*, 287(23), 3116-3126.
- 2) Hathcock, J. N. (1997). Vitamins and minerals: efficacy and safety. *The American journal of clinical nutrition*, 66(2), 427-437.
- 3) Sies, H., & Stahl, W. (1995). Vitamins E and C, beta-carotene, and other carotenoids as antioxidants. *The American journal of clinical nutrition*, 62(6), 1315S-1321S.
- 4) Koekkoek, W. A. C., & van Zanten, A. R. (2016). Antioxidant vitamins and trace elements in critical illness. *Nutrition in Clinical Practice*, 31(4), 457-474.
- 5) Kaplan, B. J., Crawford, S. G., Field, C. J., & Simpson, J. S. A. (2007). Vitamins, minerals, and mood. *Psychological bulletin*, 133(5), 747.
- 6) Yetley, E. A. (2007). Multivitamin and multimineral dietary supplements: definitions, characterization, bioavailability, and drug interactions. *The American journal of clinical nutrition*, 85(1), 269-276.
- 7) Millen, A. E., Dodd, K. W., & Subar, A. F. (2004). Use of vitamin, mineral, nonvitamin, and nonmineral supplements in the United States: the 1987, 1992, and 2000 National Health Interview Survey results. *Journal of the American Dietetic Association*, 104(6), 942-950.
- 8) Barnes, P. M., Powell-Griner, E., McFann, K., & Nahin, R. L. (2004). Complementary and alternative medicine use among adults: United States, 2002. *Advance data*, (343), 1-19.
- 9) McNeill, G., Avenell, A., Campbell, M. K., Cook, J. A., Hannaford, P. C., Kilonzo, M. M., ... & Vale, L. D. (2007). Effect of multivitamin and multimineral supplementation on cognitive function in men and women aged 65 years and over: a randomised controlled trial. *Nutrition journal*, 6(1), 10.
- 10) Cockle, S. M., Haller, J., Kimber, S., Dawe, R. A., & Hindmarch, I. (2000). The influence of multivitamins on cognitive function and mood in the elderly. *Aging & Mental Health*, 4(4), 339-353.
- 11) Stephen, A. I., & Avenell, A. (2006). A systematic review of multivitamin and multimineral supplementation for infection. *Journal of human nutrition and dietetics*, 19(3), 179-190.
- 12) Rock, C. L. (2007). Multivitamin-multimineral supplements: who uses them?. *The American journal of clinical nutrition*, 85(1), 277S-279S.
- 13) Murphy, S. P., White, K. K., Park, S. Y., & Sharma, S. (2007). Multivitamin-multimineral supplements' effect on total nutrient intake. *The American journal of clinical nutrition*, 85(1), 280S-284S.