



Tri-Magnesium™

Serving Size 1 capsule
Servings Per Container 120

Amount Per Serving

Magnesium (Citrate, Malate, Glycinate)	100 mg
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SUGGESTED DOSE: As a dietary supplement, take 1-2 capsules, twice per day, or as directed by your healthcare professional.

REFERENCES:

1. PDR for Nutritional Supplements. Medical Economics/Thomson Healthcare. 2001; p.288-295.
2. Britton J, Pavord I, Richards K, et al. Dietary magnesium, lung function, wheezing, and airway hyper-reactivity in a random adult population sample. *Lancet*. 1994; 344:357-362.
3. Cassels W. Magnesium and myocardial infarction. *Lancet*. 1994; 343:807-809.
4. Christiansen CW, Rieder MA, Silverstein EL, Gencheff NE. Magnesium sulfate reduces myocardial infarct size when administered before but not after coronary reperfusion in a canine model. *Circulation*. 1995; 92:2617-2621.
5. Lim R, Herzog WR. Magnesium for cardiac patients: is it a valuable treatment supplement? *Contemp Int Med*. 1998; 10:6-9.

TRI-MAGNESIUM™

THREE HIGHLY ABSORBABLE FORMS OF MAGNESIUM

- Supports bone health
- Beneficial effect on heart and cardiovascular systems
- Aids in healthy blood sugar metabolism
- Important for muscle health

When choosing a magnesium supplement for your patient, consider the use of Tri-Magnesium. Tri-Magnesium is formulated with the best carrier compounds available. By using Citrate, Malate, and Glycinate carriers you can be sure Tri-Magnesium may have the highest level of absorption currently possible. Another added benefit of this product is the avoidance of alkaline carriers such as oxides or carbonates. These forms of magnesium tend to be less absorbable and can interfere with healthy digestion by blocking the normal action of stomach acids on proteins.

Bone Health is positively benefited with supplemental magnesium. A two-year study on postmenopausal women showed that magnesium significantly protected from bone loss. Magnesium's ability to regulate calcium transport has made its role in bone health apparent. In this study women were dosed between 250-750 mg per day. The supplemented group was compared to the age-matched unsupplemented control group. Women on magnesium had significantly increased bone density by the end of the study, while the control did not. Follow up is needed.

Cardiovascular Health: There is considerable epidemiological data associating low magnesium intake with an increased incidence in the decline of cardiovascular health.

Blood Sugar Metabolism: Magnesium deficiency has been implicated in increased insulin resistance and a higher incidence of cardiovascular disease in patients with elevated blood sugar metabolism. In patients with chronic elevation of blood sugar not requiring insulin, magnesium at 2 grams per day



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was shown to support normal insulin response and action compared with placebo. Further study is warranted.

Muscle Health: Smooth muscle, cardiac muscle, and skeletal muscle have all been shown to be adversely affected in states of magnesium deficiency. Magnesium supplementation has been shown to reduce airway resistance and improve pulmonary function. Magnesium supplementation may be beneficial for those with constrictive airway conditions. The smooth muscles of the blood vessels are also affected by magnesium. Those suffering from vascular related head pain have been shown to benefit from supplemental magnesium. These conclusions were drawn from two recent double-blind studies.

REFERENCES:

6. Martini LA. Magnesium supplementation and bone turnover. *Nutr Rev.* 1999; 57:227-229.
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9. Paolisso G, Sgamabato S, Pizza G, et al. Improved insulin response and action by chronic magnesium administration in aged NIDDM. *Diabetes Care.* 1989; 12:265-269.
10. Saris N-EL, Mervaala E, Karppanen H, et al. Magnesium. An update on physiological, clinical and analytical aspects (review). *Clinica Chimica Acta.* 2000; 294:1-26.
11. Sojka JE. Magnesium supplementation and osteoporosis. *Nutr Rev.* 1995; 53:71-80.
12. Tosiello L. Hypomagnesemia and diabetes mellitus. A review of clinical implications. *Arch Intern Med.* 1998; 156:1143-1148.
13. Werbach MR. Nutritional Influences on Illness: A sourcebook of clinical research, 2nd Edition. *Third Line Press, Tarzana, CA.* 1993.

*These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.