

# Cal-Mag 2000



## DESCRIPTION:

Malabsorption of calcium by the body contributes to numerous health problems such as osteoporosis. In fact, more than 50% of the 50+ age group in America suffer from osteoporosis. That's why **CAL-MAG 2000** has been formulated with maximum calcium absorption in mind. This all-natural supplement utilizes the two most bio-available forms of calcium –MCHC and citrate—in an acidified formula to enhance the body's natural absorption of calcium. **CAL-MAG 2000** can actually enhance the body's ability to retain calcium. Studies indicate that the bio-dynamics of calcium may be the nutritional key to opposing osteoporosis. Osteoporosis is a major health problem that leads to lessening of bone density, thereby resulting in a higher incidence of bone fractures.

### Osteoporosis:

- Starts in mid 30's
- Affects over 28 Million Americans
- Causes over 1.3 Million fractures annually
- Costs over \$6 billion annually
- Hardest hit are white, northern European females
- 3<sup>rd</sup> most serious female disease
- Half of all women between 45 and 75 have signs of osteoporosis
- 1 out of every 3 women have full blown osteoporosis
- By age 75, 9 out of 10 women have extreme bone degeneration
- A report in the Journal of American Dietetic Assoc. in June of 1994 stated: "Scientists agree that adequate nutrition can reduce the impact of osteoporosis by 50%."

**Cal-Mag 2000** combines appropriate amounts of two forms of calcium (MCHC and citrate) with magnesium, vitamin D3, vitamin C and boron to produce a supplement that provides the nutritional requirements of individuals who need to increase their calcium retention.

### ACTIVES:

**Calcium-MCHC** (Microcrystalline hydroxyapatite compound)- Studies have shown that MCHC is well absorbed and does not have the disadvantages of other calcium forms. In addition, MCHC was found to actually restore bone.<sup>2</sup>

**Calcium Citrate**- Test comparing the calcium forms of citrate and carbonate show that there is a hyper-absorption of calcium in individuals taking calcium citrate. Additional tests, which also were conducted on individuals with low levels of stomach acid, found that those using calcium carbonate produced an antacid effect in the stomach that interfered with digestion and thus calcium absorption.<sup>1,3,4,5</sup>

**Boron**- Boron is a trace element, which is found in relatively high levels of apples, pears, grapes, nuts and leafy vegetables. A recent study has linked increased Boron levels to increased levels of estrogen. Estrogen replacement therapy has long been used as a means of preventing Calcium loss in postmenopausal women. The study confirms that 3.0 mg of Boron per day markedly reduces urinary excretion of Calcium, Magnesium, and Phosphorous.<sup>6,7</sup>

**Magnesium**- Collective studies indicate that magnesium in combination with boron, phosphorus, silicon, and of course calcium is needed to maintain healthy bones. A 500 mg dosage of elemental magnesium is a sufficient amount not only to aid in calcium absorption and utilization, but also in the reduction of muscle spasms and cramps.<sup>8,9,10</sup>

120 tablets per bottle

Four tablets provide:

Calcium (from 50% Microcrystalline Hydroxyapatite/50% Citrate)	1000 mg
Magnesium (from Magnesium Oxide/Citrate Complex)	500 mg
Vitamin C	200 mg
Vitamin D-3	400 IU
Boron (Citrate)	3 mg
Betaine HCl	30 mg
Glutamic Acid HCl	30 mg

Other ingredients: Base of Hydrolyzed Soy Protein, Cellulose, di-Calcium Phosphate and Magnesium Stearate.

### CLINICAL INDICATIONS:

- Osteoporosis • Bursitis • Nocturnal Cramping
- Restless Leg Syndrome • Sodium Induced Hypertension

### SUGGESTED USAGE:

Take 2 tablets with dinner and two tablets at bed time.

**CONTRAINDICATIONS:** None known

**DRUG INTERACTIONS:** None known

### REFERENCES:

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6. Chapin RE, Ku WW, Kenny MA, Mc Coy H, Gladen B, Wine RN, Wilson R, Elwell MR. The effects of dietary boron on bone strength in rats. *Fundam Appl Toxicol.* 1997; 35:205-215.
7. Nielsen FH, Gallagher SK, Johnson LK, Nielsen EI. Boron enhances and mimics some effects of estrogen therapy in postmenopausal women. *J Trace Elem Exp Med.* 1992; 5: 237-246.
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