



Pregنالife®



Nutritional support during pregnancy

30 Film Coated Tablets



Co-Enzyme Q10

CoQ-10 is a vitamin-like substance from ubiquinone family found throughout the body in every cell mitochondria where it is needed to generate energy in form of ATP. It involves in electron transport and energy production. It is a fat soluble antioxidant that helps stabilize cell membranes, preserving cellular integrity and function. It has immune stimulant activity. Supplementation with co-enzyme Q10, in second and three trimesters may reduce the risk of developing pre-eclampsia in women at risk for condition.

Contraindications

No contraindications have been reported to date.

Pregnancy and Lactation

Pregnant or lactating women should consult a physician before using.

Interaction

No interaction with other medicinal products has been reported to date.

Adverse effects

No adverse effects have been reported to date.

Storage

Keep in a cool (below 25° C) and dry place, away from direct sunlight.

References:

- L-Kathleen Mahan, Krause's food and the nutrition care process, 2012-105

Supplement Facts			
Composition per tablet		RDA%	UL
Vitamin B1	1.5 mg	107	ND
Vitamin B2	1.5 mg	107	ND
Vitamin B3	20 mg	111	35 mg
Vitamin B5	5 mg	83	ND
Vitamin B6	50 mg	>100	100 mg
Biotin	0.10 mg	>100	ND
Vitamin B12	0.050 mg	>100	ND
Vitamin C	500mg	>100	2000 mg
Vitamin D3	400 IU	67	4000 IU
Vitamin E	50 IU	>100	1210 IU
Zn (Zinc gluconate)	15 mg	136	40 mg
Iodine (Potassium iodide)	150 mcg	68	1100mcg
Ca (Calcium carbonate)	200 mg	20	2500 mg
Se (Selenomethionine)	80 mcg	133	400 mcg
Mg (Magnesium oxide)	200 mcg	55	350 mg
Co-Q10	50 mg	*	*

*Recommended daily allowance (RDA) not Stablished.

Presentation

30 Film Coated tablets

Administration

Take one tablet daily with meal.

Marketing Authorization Holder Darman Yab Darou
Under license of Vitex Pharmaceuticals pty Ltd (Golden Life) Australia



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body against free radical damages and boosts immune system. It also enhances the intestinal absorption of non-haem iron.

Vitamin D

It is essential for promoting the absorption and utilization of calcium and phosphorus and normal calcification of the skeleton. Vitamin D and its metabolites cross the placenta and appear in fetal blood in the same concentration as in maternal circulation. Vitamin D enhances immune function and brain development. Low vitamin D levels during pregnancy predispose to PET (pre-eclamptic toxemia), a hypertensive condition of pregnancy affecting up to 8% of pregnant women. Maternal Vitamin D deficiency is associated with neonatal hypocalcemia, which can manifest in inadequate fetal bone mineralization, hypoplasia of tooth enamel, or convulsions.

Vitamin E

It is an important lipophilic antioxidant. Vitamin E requirement increases during pregnancy. Although deficiency in pregnancy is speculated to cause miscarriage and preterm birth.

Calcium

Hormonal factors strongly influence calcium metabolism in pregnancy. Human chorionic somatomammotropin from the placenta, increases the rate of maternal bone turnover. Approximately 30 g of mother's body calcium is accumulated during pregnancy, almost all of it in the fetal skeleton. The remainder is stored in the maternal skeleton, held in reserve for the calcium demand of lactation.

Zinc

A zinc deficient diet does not result in the

effective mobilization of zinc stored in the maternal skeleton, therefore a compromised zinc status develops rapidly. Zinc deficiency is highly teratogenic and leads to congenital malformations, abnormal brain development in the fetus, and abnormal behavior in the newborn. Low level zinc adversely affects Vitamin A status. Women with low plasma zinc concentration are at 2.5 times greater risk for delivering an infant weighing less than 2000 g.

Iodine

It is a trace mineral, part of the thyroxine molecule with a critical role in the metabolism of macronutrients. Adequate gestational iodine is associated with a higher intelligence quotient in the child and attention deficit may be associated with milder iodine deficiency. In instances in which preconception iodine intake cannot be ensured, supplementation before the end of the second trimester protects the fetal brain from the effect of deficiency.

Magnesium

It is important in more than 300 chemical reactions that keep the body working properly including: energy production, protein synthesis, muscle and nerve function. The full-term fetus accumulates 1 g of magnesium during gestation. Magnesium supplementation during pregnancy reduces the incidence of PET (pre-eclamptic toxemia), edema and leg cramps.

Selenium

Thyroid function depends on selenium; it catalyzes the conversion of the prohormone thyroxine (T4) to the active form of triiodothyronine (T3). Selenium also protects cells against oxidative stress-induced pro-inflammatory gene expression.



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Optimal preconceptual nutrition supports successful conception, when it includes adequate amount of all of the required vitamins, minerals and energy-providing macronutrients. Supplementation during pregnancy should meet mother's increased needs over routine daily intake.

Indications

- Provides needed Vitamins and minerals during pregnancy
- Supports fetal growth and development
- Stimulates energy production and immune system health



Ingredients

B Vitamins

Play an important role in the metabolic processes of all living cells by serving as coenzymes in the

metabolism of carbohydrates, proteins and fats to produce energy. Also the normal function and maintenance of the nervous system relies on the presence of the B-group vitamins for the production of hormones and neurotransmitters.

Vitamins B6; functions as a cofactor in approximately 50 decarboxylase and transaminase enzymes. Also it catalyses a number of reactions involving neurotransmitter production and haemoglobin formation. It can help relieve nausea or vomiting during pregnancy.

Vitamins B12; Cobalamin is required for enzyme reactions and for generation of methionin and tetrahydrofolate. Vegetarian are at greater risk for B12 deficiency. Inadequate amount of this vitamin during fetal brain development, affecting infant cognitive and motor development.

Biotin; also known as vitamin H, is needed for the proper growth and development of the fetus. Many pregnant women might be at risk of biotin deficiency, according to a December 2008 article in "The Journal of Nutrition. The body breaks down biotin more quickly during this period. Approximately 50 % of pregnant women excrete a particular compound (3-hydroxyisovaleric acid or 3-HIA). 3-HIA is excreted in the urine when biotin status is low. A recent study showed that supplementing pregnant women with biotin (300 mcg/day) reduced the excretion of 3-HIA, presumably improving their biotin status. Biotin deficiency tends to raise the risk of birth defects during pregnancy.

Vitamin C

Ascorbic acid is involved in collagen synthesis and functions as an antioxidant. It Protects