



Multi-Minerals

- Provides Broad Spectrum Mineral Support for a Variety of Protocols
- Supports Any Bone Building Protocol
- Increases Skeletal Strength and Promotes Healthy Bone Density

This product provides an ideal balance of highly-absorbed minerals combined with the benefits of betaine HCl to prime digestion and improve the absorption of vitamins and minerals. This product provides mineral amino acid chelates in optimal ratios to help the body maintain mineral balance and avoid competition between minerals for absorption.

Overview

Numerous studies have reported that adequate mineral levels play an essential role in maintaining optimal health by supporting bone, muscle and cardiovascular health. It is a challenge for most individuals to consume the perfect variety of minerals through their daily diets and maintain mineral balance. Supplementation of a high quality daily multimineral may provide benefit for those wishing to meet their recommended daily requirements of important macrominerals and trace minerals.

Bioavailability – The Mineral Chelate Difference†

The importance of bioavailability is obvious. If consuming a calcium supplement has little effect on improving the body's calcium balance, there is no reason to ingest it. Signs of inferior mineral supplements include the use of cheap, poorly absorbed, rock-salt minerals like calcium carbonate and magnesium oxide (See Figure 1). These mineral forms slow and limit absorption, relying on adequate stomach acid to release calcium ions which then enter the body via passive diffusion. And, because they tend to remain in the intestines longer, these forms of mineral supplements can cause intestinal distress such as constipation (calcium carbonate) or diarrhea (magnesium oxide).

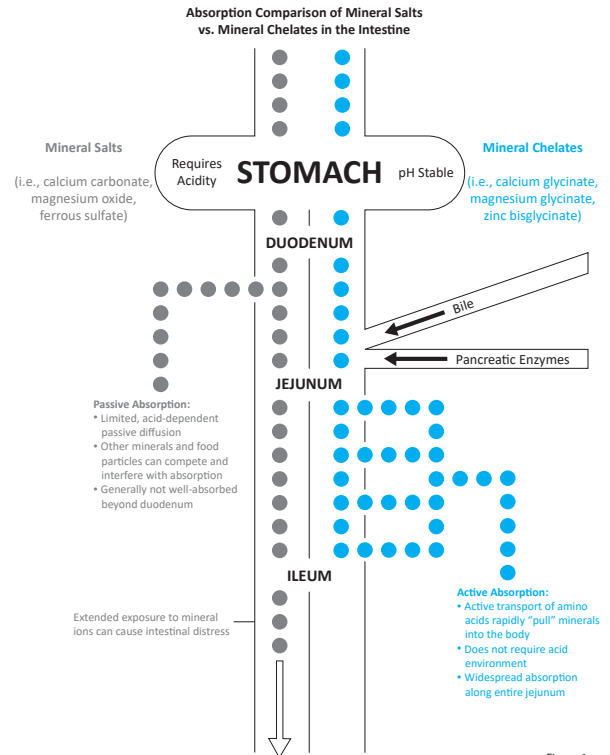


Figure 1

bioavailable mineral chelates, a specialized form of minerals bound to amino acids. This patented process creates organic mineral compounds which use active absorption mechanisms in the gastrointestinal tract to greatly enhance mineral absorption. Comparison studies have shown significantly superior absorption of mineral chelates compared to other mineral forms. In a clinical study specifically comparing calcium absorption in humans, Albion®'s patented calcium chelate delivered the greatest absorption of all calcium sources tested (See Figure 2).¹

- Calcium from calcium carbonate is often absorbed at very low levels (less than 10%)¹
- In a human clinical study, Albion®'s patented calcium chelate formulation averaged 44% absorption of the dose without the benefit of meal enhancement.¹ No other calcium form has an equivalent or higher rate of absorption

This product provides the benefit of highly-absorbed, Albion® mineral chelates. Albion® is the world leader in manufacturing highly



† 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.

Supplement Facts^{v4}

Serving Size 4 Capsules
Servings Per Container 30

4 capsules contain	Amount Per Serving	% Daily Value
Calcium (as TRAACS® Calcium Bisglycinate Chelate)	300 mg	23%
Magnesium (as DiMagnesium Malate, 150 mg TRAACS® Magnesium Lysinate Glycinate Chelate)		36%
Zinc (as TRAACS® Zinc Bisglycinate Chelate)	25 mg	227%
Selenium (as Selenium Glycinate Complex)	190 mcg	345%
Manganese (as TRAACS® Manganese Bisglycinate Chelate)	5 mg	217%
Chromium (as O-polynicotinate)†	190 mcg	543%
Molybdenum (as TRAACS® Molybdenum Glycinate Chelate)	45 mcg	100%
Potassium (as Potassium Glycinate Complex)	90 mg	2%
Betaine Hydrochloride USP	45 mg	*
Vanadyl Sulfate Hydrate	3 mg	*
Boron (as Bororganic™ Glycine)	45 mcg	*

* Daily Value not established

References

1. Heaney, RP. Carbonate Milk Albion Chelate Citrate Hydroxyapatite. *Calcif Tiss Int* 1990;46:300-4.
2. Roussouw J, Brummelen R. The bioavailability of four magnesium preparations. Publication pending.
3. Committee to Review Dietary Reference Intakes for Vitamin D and Calcium, Food and Nutrition Board, Institute of Medicine. Dietary Reference Intakes for Calcium and Vitamin D. Washington, DC: National Academy Press, 2010.
4. Institute of Medicine (IOM). Food and Nutrition Board. Dietary Reference Intakes: Calcium, Phosphorus, Magnesium, Vitamin D and Fluoride. Washington, DC: National Academy Press, 1997.
5. Rude RK. Magnesium. In: Coates PM, Betz JM, Blackman MR, Cragg GM, Levine M, Moss J, White JD, eds. Encyclopedia of Dietary Supplements. 2nd ed. New York, NY: Informa Healthcare; 2010:527-37.
6. Rude RK. Magnesium. In: Ross AC, Caballero B, Cousins RJ, Tucker KL, Ziegler TR, eds. Modern Nutrition in Health and Disease. 11th ed. Baltimore, Mass: Lippincott Williams & Wilkins; 2012:159-75.
7. Sandstead HH. Understanding zinc: recent observations and interpretations. *J Lab Clin Med* 1994;124:322-7.
8. Institute of Medicine, Food and Nutrition Board. Dietary Reference Intakes for Vitamin A, Vitamin K, Arsenic, Boron, Chromium, Copper, Iodine, Iron, Manganese, Molybdenum, Nickel, Silicon, Vanadium, and Zinc. Washington, DC: National Academy Press, 2001.
9. Solomons NW. Mild human zinc deficiency produces an imbalance between cell-mediated and humoral immunity. *Nutr Rev* 1998;56:27-8.
10. Prasad AS. Zinc: an overview. *Nutrition* 1995;11:93-9.
11. Heyneman CA. Zinc deficiency and taste disorders. *Ann Pharmacother* 1996;30:186-7.
12. Simmer K, Thompson RP. Zinc in the fetus and newborn. *Acta Paediatr Scand Suppl* 1985;319:158-63.
13. Fabris N, Mocchegiani E. Zinc, human diseases and aging. *Aging (Milano)* 1995;7:77-93.
14. Maret W, Sandstead HH. Zinc requirements and the risks and benefits of zinc supplementation. *J Trace Elem Med Biol* 2006;20:3-18.
15. Prasad AS, Beck FW, Grabowski SM, Kaplan J, Mathog RH. Zinc deficiency: changes in cytokine production and T-cell subpopulations in patients with head and neck cancer and in noncancer subjects. *Proc Assoc Am Physicians* 1997;109:68-77.
16. Rink L, Gabriel P. Zinc and the immune system. *Proc Nutr Soc* 2000;59:541-52.
17. Weaver CM. Potassium and health. *Adv Nutr*. 2013 May 1;4(3):368S-77S.



† 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.