

I N N A T E

RESPONSE FORMULAS®

V i s m e d i c a t r i x n a t u r a e

Prenatal Trimester I & II

100% Whole Food Targeted Response Dietary Supplement

Formula Rationale

Formulated by Cynthia Pileggi, Herbalist, Nutritional Consultant

FOR PROFESSIONAL USE ONLY
©2006 BioSan Laboratories, Inc.
Permission Required for Reprint

The statements in this brochure are not intended
to diagnose, treat, cure or prevent any disease.

Formula Rationale of Prenatal Trimester I & II

Disclaimer: The information within is for professional use only and is not intended as medical advice.

The authors and Innate Response Formulas®, a division of BioSan Laboratories, Inc. disclaim any liability arising directly or indirectly from the use of the information within.

Copyright © 2006

It is our mission to craft efficacious formulations to help harness the innate healing response that is within every patient. In the time-honored traditions of *vis medicatrix naturae* (the healing power of nature), we select only the most nourishing whole foods and botanicals.

Pregnancy and birth are natural processes that can be effectively supported with good nutrition, avoidance of unhealthy substances, adequate rest and moderate low-impact exercise. During pregnancy a woman's hormones go through cycles that cause both physical and emotional changes. As her metabolism and biochemistry change, so do her nutritional requirements. The importance of prenatal nutrition is widely recognized in scientific, medical and holistic circles. Most physicians and researchers now recommend supplementation. Research indicates that few American diets supply adequate levels of vitamins and minerals for both proper fetal development and nourishment for the mother-to-be. Studies have found that the diets of pregnant women tested were lacking in adequate intakes of iron, Vitamin D, B-6, folic acid, calcium, magnesium and zinc. Since the 1950's scientists have been suggesting a link between neural tube birth defects and diet. It wasn't until 1991 that British researchers found the link with folic acid deficiencies. Several studies have shown the importance of adequate folic acid and the need for supplementation.

A mother's diet through all stages of pregnancy has been shown to affect her well-being as well as the baby's. The growing fetus will pull the nutrition it needs from the mothers supply and the mothers' needs come second. The mother's body can suffer if her needs as well as the babies are not met. A nutritious diet and supplement program can help support the health of the mother, reduce chances of non-genetic miscarriage, reduce chances of birth defects and can affect the health of the child throughout life.

A recent study in England indicates that antioxidants may stop miscarriages. This study found that "the amount of oxygen fetuses receive tripled between the 8th and 15th week of pregnancy and that this change could account for a significant number of miscarriages." (ref. 1)

Never has it been more important for a women to eat a well balanced, nutrient rich variety of whole foods and supplement with a FoodState® prenatal. With that in mind, Innate Response Formulas® has created two 100% TrueActive™ FoodState® formulas for pregnancy, Prenatal Trimester I & II and Pre & Post Natal Trimester III & Post Partum. The primary difference is the use of tonic herbs to support the pregnancy in our original Pre & Post Natal Trimester III & Post Partum formula and Prenatal Trimester I & II does not include the tonic herbs for those who wish to create their own herbal support program or who choose to not use tonic herbs while pregnant.

Pre & Post Natal Trimester III & Post Partum was carefully created to provide a complete spectrum of the essential nutrients to supplement the diet of a pregnant woman. As this is not a time to megadose, Pre & Post Natal Trimester III & Post Partum supplies all vitamins and minerals in their ideal TrueActive™ FoodState®, in potencies

based on RDI's to supplement the diet. Several key nutrients have been found to help prevent birth defects and to reduce chances of non-genetic miscarriage especially Folic Acid, Iron, Calcium and Antioxidants. Some nutrients are required in higher than usual levels, such as Iron, Folic Acid and Calcium. Other nutrients require more moderate levels such as Vitamin A and Vitamin C. Research has found that supplemental nutrition can be important for women of childbearing age who wish to conceive. Both Pre & Post Natal Trimester III & Post Partum and Prenatal Trimester I & II are designed to use throughout pregnancy and lactation as well as being suitable for use prior to pregnancy.

SUPPLEMENT FACTS

Serving Size 6 Tablets

Servings per Container 30

Calories 20

Total Fat	150	mg
Total Carbohydrate	1257	mg
Dietary Fiber	248	mg
Sugars	0	mg
Protein	3778	mg

SOURCE; FOODSTATE® AMOUNT

Vitamin A	(<i>Daucus sativus</i> *; 10 mg)	2500	IU
Vitamin C	(<i>Citrus sinensis</i> *; 336 mg)	80	mg
Vitamin D3	(<i>S. cerevisiae</i> *; 8 mg)	400	IU
Vitamin E	(<i>Oryza sativa</i> ; 126 mg)	30	IU
Vitamin K1	(<i>Spinacia oleracea</i> *; 7 mg)	65	mcg
Thiamine (B-1)	(<i>S. cerevisiae</i> *; 6 mg)	1.5	mg
Riboflavin (B-2)	(<i>S. cerevisiae</i> *; 17 mg)	1.6	mg
Niacinamide	(<i>S. cerevisiae</i> *; 71 mg)	17	mg
Vitamin B-6	(<i>S. cerevisiae</i> *; 16 mg)	3	mg
Folate	(<i>Brassica oleracea</i> *; 84 mg)	800	mcg
Vitamin B-12	(<i>S. cerevisiae</i> *; 1 mg)	5	mcg
Biotin	(<i>Oryza sativa</i> *; 63 mg)	300	mcg
Pantothenate	(<i>S. cerevisiae</i> *; 13 mg)	3	mg
Calcium	(<i>S. cerevisiae</i> *; 4000 mg)	200	mg
Iron	(<i>S. cerevisiae</i> *; 360 mg)	18	mg
Iodine	(<i>S. cerevisiae</i> *; 10 mg)	150	mcg
Magnesium	(<i>S. cerevisiae</i> *; 1500 mg)	75	mg
Zinc	(<i>S. cerevisiae</i> *; 300 mg)	15	mg
Selenium	(<i>S. cerevisiae</i> *; 50 mg)	50	mcg
Copper	(<i>S. cerevisiae</i> *; 50 mg)	500	mcg
Manganese	(<i>S. cerevisiae</i> *; 40 mg)	2	mg
GTF** Chromium	(<i>S. cerevisiae</i> *; 12 mg)	25	mcg
Molybdenum	(<i>S. cerevisiae</i> *; 22 mg)	45	mcg

ADDITIONAL FOODSTATE® NUTRIENTS

Beta Carotene	2500	IU
Choline	20	mg
Inositol	20	mg
Potassium	10	mg

ADDITIONAL FOODS

Rice Bran	100	mg
-----------	-----	----

PHENOLICS

Phenolic Concentrate (<i>Citrus sinensis</i> , <i>Vaccinium angustifolium</i> , <i>Vaccinium macrcarpon</i>)	62	mg
--	----	----

NATURALLY OCCURRING FOOD CONSTITUENTS

Bioactive Peptides, Enzymes, Chlorophyll, SOD, Glutathione, Beta Glucans, Lipoic Acid, Essential Trace Minerals, GABA, Glutamic Acid, Polysaccharides, CoQ10 and other Compounds.

OTHER INGREDIENTS

Vegetable Lubricant, Silica, Food Glaze.

* **FoodState®** 100% Food Concentrates.

** Glucose Tolerance Factor.

Vitamin A (*Daucus sativus*) and Beta Carotene

Beta-Carotene (Provitamin A) and fat-soluble Vitamin A (Retinol, preformed vitamin A) are both important to the physiology. Some people (those with diabetes, liver dysfunction, etc.) do not efficiently convert beta-carotene to Vitamin A. The addition of both provides maximum coverage and optimal safety. Carotenoids are the red, yellow, orange and dark green color pigments in food. They provide antioxidant and free radical scavenging activity to protect several types of tissue including lung, colorectal, breast, uterine, and prostate. They are a factor in cardiovascular health and promote general health.

Vitamin A, Retinol, is fat-soluble and is essential for vision and for reproduction. Vitamin A is important to immune function believed to stimulate the activity of interferon and enhance thymus gland function. Vitamin A and carotenes are important to the skin. Research indicates levels should be moderate during pregnancy, especially the preformed Vitamin A.

Food & Herbal Sources: Sweet potato, carrot, spinach, orange, yellow and red vegetables & fruits, peppers, dried apricots, alfalfa, dandelion root, elderberries, seaweed, spirulina, barley grass, red raspberry leaves, yellow dock root, alfalfa and lamb's quarters.

Food Sources: Fish liver oils, liver, butter, kidney, whole and fortified milks.

B Vitamin Complex

Support metabolic functions related to energy production, fat, carbohydrate and protein metabolism. Necessary to the functioning of the nervous system, muscles in the GI tract, health of the hair, skin, eyes, mouth and liver. The levels in this formula are based at RDI's.

Food Sources: Brewer's yeast, rice, whole grains, blackstrap molasses, legumes, and meats.

Thiamine (B-1) – Thiamine is important to function of the Krebs cycle, which enables the body to manufacture energy from glucose. Shown to effect emotional well being.

Food & Herbal Sources: Peas, bell peppers, sunflower seeds, dandelion, fenugreek, alfalfa, red raspberry leaf, red clover, seaweed, spirulina, barley grass, wheat germ

Riboflavin (B-2) - Riboflavin functions within enzymes involved in metabolism of carbohydrates, fats and proteins. Important to cell respiration and to regenerating glutathione.

Food & Herbal Sources: Brown rice, watercress, dandelion, seaweed, parsley, rose hips, fenugreek, barley grass, alfalfa, spirulina and onion.

Niacinamide – Niacinamide is involved in all functions of the B complex. Found to benefit insulin secretion and cholesterol management.

Food & Herbal Sources: Wheat germ, fish, garlic, alfalfa, burdock, dandelion, parsley, red raspberry leaves, chamomile flowers, red clover blossoms, peppermint leaves and barley grass.

Pantothenate- Pantothenate is a component in the production of coenzyme A (CoA) and acyl carrier protein (ACP) two compounds important to the utilization of fats and carbohydrates for the production of energy and in the manufacture of adrenal hormones and red blood cells. (ref. 7)

Vitamin B-6 – Pyridoxine is important to formation of the body's proteins and structural compounds, chemical transmitters in the nervous system, prostaglandins and red blood cells. Assists in modulating hormonal balance and immune function.

Food Sources: Wheat germ, whole grains, egg yolks, peas and carrots.

Vitamin B-12- Important to prevent pernicious anemia. Works with folic acid in production of DNA, red blood cells, and the myelin sheath that surrounds the nerves, so it is important to have adequate supplies during pregnancy.

Food & Herbal Sources: Some fermented soybean products, legumes, seaweed and spirulina.

Biotin – Functions in fat and amino acid production and utilization. Has a beneficial effect on the scalp, hair and nails.

Food Sources: Cheese, brewer's yeast, soybeans, whole grains, cauliflower, eggs, mushrooms, nuts, legumes, whole wheat and organ meats.

Folate (*Brassica oleracea*)

Folic acid (folate) has been deemed critical for a healthy pregnancy. Research in the 1990's has found that folic acid is needed both before and during pregnancy and can help reduce the risk of a common type of birth defect called neural tube defects, including anencephaly and spina bifida, which affect the brain and spinal cord. The National Centers for Disease Control estimate that about 2,500 infants are born with these defects each year. Folic acid works with B-12 in many vital functions including DNA synthesis and cellular division. Before pregnancy 400 mcg are recommended daily. During pregnancy the dose of 800 mcg is recommended.

Food Sources: Brewer's yeast, green leafy vegetables, legumes, nuts, asparagus, broccoli, beans, root vegetables, watercress, parsley, dandelion and whole grains.

Choline

This accessory nutrient is essential to the manufacture of the vital neurotransmitter acetylcholine, phosphatidylcholine and other components of cell membranes. Choline is essential to fat metabolism and without it, fats would be trapped in the liver. Choline acts as a methyl donor supporting liver function.

Food Sources: Liver, eggs, banana, cauliflower, grape juice, peanut butter and lecithin.

Inositol

Inositol functions closely with choline in production of cell membranes and in supporting liver function. Inositol and choline are lipotropics that assists the liver in fat utilization and removal.

Food Sources: Brewer's yeast, citrus fruits, whole grains, nuts, seeds, legumes, meat, and dairy products.

Vitamin C (*Citrus sinensis*)

Vitamin C plays a primary role in collagen creation. Collagen is the key protein in connective tissue, bone and car-

tilage. Vitamin C is important to the functioning of the immune and nervous systems and adrenal function. Supports the gums and provides antioxidant protection for the body. Promotes wound healing and red blood cell formation. Plays a role in both protein and calcium metabolism. Important to get food sources with the active flavonoids, which support the functions of the Vitamin C complex.

Food & Herb Sources: All fruits, especially citrus fruits, peppers, cabbage, cucumbers, tomatoes, honey, alfalfa, dandelion leaves, nettle leaves, elderberries, rose hips and parsley.

Phenolic Concentrate

“Nature’s biological response modifiers”, bioflavonoids have the ability to modify the body’s reaction to allergens, viruses and carcinogens. Important for strengthening capillaries and veins. Function as powerful antioxidants. Research has shown them to be anti-inflammatory, liver protective, anti-tumor, antimicrobial, antioxidant, antiviral, supportive to the immune system, and strengthening to the entire cardiovascular system. They also have a mild estrogenic effect.

Food Sources: Citrus fruit, all berries, grapes, peppers, onions and tomatoes.

Vitamin D3 (*S. cerevisiae*)

Adequate levels are needed as Vitamin D is important to the regulation of calcium absorption and utilization. The absorption of Vitamin D may be enhanced during pregnancy so it is important to be moderate when supplementing and to use the best form- Vitamin D3. D3 is the active form of vitamin D.

Food Sources: Cod liver oil, cold-water fish, butter, egg yolks and dark green leafy vegetables, alfalfa, nettle leaf and fortified milk. Sunlight on the skin is another important source. (ref. 5)

Vitamin E (*Oryza sativa*)

Primary function is that of cellular antioxidant. Vitamin E protects cell membranes from free radical damage. Important to immune function as it protects the thymus gland, white blood cells and cell membranes. During pregnancy, Vitamin E has long been associated with supporting cardiovascular health.

Studies indicate that low levels have been associated with increased risks of pre-eclampsia (the early stage of pregnancy induced hypertension). Vitamin E supplementation has been found useful in holistic programs to assist in reducing habitual or chronic abortion. (ref. 5, 12) Vitamin E works with other nutrients especially selenium and vitamin C and improves the body’s use of Vitamin A. Protects essential fatty acids, enhancing their utilization.

Food & Herbal Sources: Poly-unsaturated fats in vegetable and seed oils, seeds, nuts, brown rice dandelion, red raspberry leaf, whole grains and seaweed and alfalfa.

Vitamin K1 (*Spinacia oleracea*)

Vitamin K is necessary for the manufacture of blood clotting factors such as prothrombin and clotting factors VII, IX, and X. Research demonstrates that Vitamin K1 plays a vital role in bone building. There are three types of Vitamin K: K1 (phylloquinone) the natural form from plants, (which is used in this formula); K2 (menaquinone) created by intestinal bacteria; and K3 (menadione) a synthetic form. (ref. 7) The 3 forms of Vitamin K have sim-

ilar functions in relationship to blood clotting factors. In bone building and calcium utilization, Vitamin K 1 is substantially superior and Innate Response Formulas® uses only TrueActive™ FoodState® Vitamin K1 in all formulas. Vitamin K1 helps convert the non-collagen protein, osteocalcin, into its active form. When active, it facilitates osteocalcin securing the calcium into place within the bone matrix. K also has antioxidant properties.

Food & Herbal Sources: Fat-soluble chlorophyll, green leafy vegetables, alfalfa, nettles, broccoli, green tea, asparagus, oats, brown rice, whole wheat, green peas and cabbage.

Calcium (*S. cerevisiae*)

The most abundant mineral in the body, calcium is vital to building and maintaining the structure of the bones and teeth. Calcium functions in the contraction of muscles, enzyme activity, regulation of the heartbeat, release of neurotransmitters and clotting of the blood. Recent research indicates that a woman's metabolism of calcium changes when pregnant. These changes enable increased calcium absorption and mobilization of calcium to the fetus and breast milk. Adequate levels are important through diet and supplementation. Research indicates that a woman's dietary calcium requirements are not increased by pregnancy or lactation as was once thought. (ref.12,13,14)

Excessive amounts of calcium can cause leakage into the urine and kidney stones. The form of the calcium is important for efficiency and safety, so TrueActive™ FoodState® calcium is ideal.

Food & Herbal Sources: Asparagus, dairy products, dark green leafy vegetables (kale, collard greens, cabbage, turnip greens, etc.), sesame seeds, tofu, nettle leaf, red raspberry leaf, sea weeds and spring horsetail herb. Depending on diet and individual needs, a pregnant woman may require additional calcium beyond the 200 mg found in Prenatal Trimester I & II, such as the TrueActive™ FoodState® Calcium by Innate Response Formulas®.

Magnesium (*S. cerevisiae*)

Magnesium deficiencies are associated with pre-eclampsia. Studies suggest the importance of supplementing with magnesium during pregnancy. "The results suggest that supplementing pregnant women with magnesium has a significant influence on fetal and maternal health both before and after delivery." (ref. 5) Primary function is that of enzyme activation, with participation in more than 300 enzymatic reactions in the body. Magnesium plays a critical role in energy production, bone structure and muscle structure and function. Magnesium functions in the relaxation of the muscles and is an important factor in the sodium and potassium pump and in the metabolism of calcium. The Institute of Medicine has set an upper tolerance level for supplemental calcium (outside of food and drink) during pregnancy at 350 mg/day. (ref.10)

Food & Herbal Sources: Almonds, barley, dried fruits, honey, alfalfa, dandelion, dulse, tofu, legumes, seeds, nuts, whole grains, potatoes, brewer's yeast, oat straw herb, nettle leaves, pumpkin seeds and green leafy vegetables.

Depending on diet and individual needs, a pregnant woman may require additional magnesium beyond the 75 mg found in Prenatal Trimester I & II, such as Magnesium by Innate Response Formulas®.

Zinc (*S. cerevisiae*)

Zinc is essential to many functions in a growing fetus including fetal brain development, skeletal formation, DNA replication, proper weight gain, and the growth of tissue and development of immunity. It is important to sensory function and skin health. Zinc functions in over 200 enzymes and is necessary for the activity of many hormones.

Deficiencies may be associated with some types of birth defects.

Food & Herbal Sources: Beets, broccoli, fish, lentils, oysters, pumpkin seeds, wheat bran and germ, nuts, meats, bilberry and seeds.

GTF Chromium (*S. cerevisiae*)

GTF (Glucose Tolerance Factor) Chromium is important to blood sugar control mechanisms. It works with insulin in facilitating the uptake of glucose into cells and is important to insulin functioning properly. It also plays a role in the regulation of cholesterol and triglyceride levels.

Food & Herbal Sources: Brewer's yeast, meat, whole grains, potatoes, hibiscus flowers, oatstraw herb, nettles leaves and red clover blossoms.

Manganese (*S. cerevisiae*)

Many enzyme systems require manganese, including blood sugar control, thyroid hormones, SOD and energy metabolism. Research indicates that manganese deficiency may result in impaired growth, skeletal defects and metabolism imbalances.

Food & Herbal Sources: Nuts, whole grains, dried fruits, legumes, green leafy vegetables, red raspberry leaves, bilberry and ginger root.

Iron (*S. cerevisiae*)

Iron is essential to the hemoglobin molecules of red blood cells where it functions in transportation and metabolism of oxygen. Iron is a component involved in the synthesis of heme proteins and enzymes. Important iron-sulfur proteins include electron transfer proteins that function in energy production in the mitochondria of the cells. Iron plays a role in the synthesis of DNA. How much Iron a pregnant woman requires will vary with diet and individual body chemistry. Prenatal Trimester I & II supplies 18 milligrams of TrueActive™ FoodState® Iron. The RDA and RDI suggested levels range from 18 to 30 mgs with the latest US Governmental advisory board setting a limit at 45 mgs daily. (ref. 16, 17, 18). Additional iron, such as in the Hematic Response™, can be added as recommended by a health care professional.

Food & Herbal Sources: Brewer's yeast, almonds, beet roots and greens, egg yolks, kelp, black strap molasses, pumpkin seeds, organ meats, dried fruits, dark leafy greens, alfalfa, nettles, dandelion root and leaf, bilberry, red raspberry leaves and sunflower seeds.

Selenium (*S. cerevisiae*)

Selenium is an essential trace mineral and its primary function is as a component of the vital antioxidant and liver detoxifying enzyme glutathione peroxidase. Selenium works with vitamin E to prevent free radical damage to cell membranes. This antioxidant mineral plays an antagonistic role with heavy metals such as lead, mercury, cadmium and aluminum and is useful in detoxification processes. Selenium plays an important role in supporting immune system functions including the creation of white blood cells and supporting thymus function. The production of thyroid hormones also requires selenium.

Food Sources: Brewer's yeast, food grown in selenium rich soil, brazilian nuts, wheat germ, whole grains and hibiscus flowers.

Molybdenum (*S. cerevisiae*)

Molybdenum is an important component of several detoxification enzymes including those functioning in alcohol detoxification, uric acid formation and sulfur metabolism. Molybdenum supports cavity and cancer prevention and sulfite sensitivity.

Food & Herbal Sources: Legumes, whole grains, lentils, brewer's yeast, wheat germ and garlic (levels depend on the levels of Molybdenum in the soil).

Potassium

An essential electrolyte that functions in the maintenance of water balance, heart, muscle, kidney, adrenal and nerve function. The sum of the potassium content in the diet and the balance of sodium and potassium are important to health and to reducing risks of cardiovascular disease and cancer. Sodium, potassium and chloride are electrolytes- the mineral salts that conduct the electrical impulses in the body. The balance of potassium to sodium in most American diets is often (K:Na) 1: 2. Researchers recommend a K:Na ratio of at least 5:1 with some research indicating ideal ratios ranging from 50:1 to 100:1. These higher potassium to sodium ratios are found in diets rich in natural fruits and vegetables and low in animal products and added sodium. Imbalanced ratios of potassium to sodium can lead to edema and possibly hypertension during pregnancy. (ref. 5)

Food & Herbal Sources: Celery, cabbage, parsley, dandelion, barley grass, sage leaves, dulse, peppermint leaves, red clover blossoms, carrots, bananas, oranges, broccoli and asparagus.

Copper (*S. cerevisiae*)

Copper is an essential trace mineral that functions in several key enzymatic reactions in the body, including SOD. The highest concentrations are in the brain and liver. Deficiencies of copper may contribute to birth defects. Excess iron can inhibit copper absorption, and copper is important to iron utilization. Copper functions in anti-inflammatory response and supports cardiovascular health .

Food & Herbal Sources: Brewer's yeast, brazilian nuts, almonds, nuts, legumes, pumpkin seeds and sage leaves.

Iodine (*S. cerevisiae*)

Iodine is important to proper fetal development and its primary function is in the production of thyroid hormones. It's also important to health of breast tissue.

Food & Herbal Sources: Kelp, bladderwrack (*Fucus vesiculosus*), seaweed, seafood and iodized salt.

Rice Bran is a natural fiber used in Prenatal Trimester I & II to assist in tablet disintegration.

The information in this document is for professional use only and the statements included in this document have not been evaluated by the Food and Drug Administration. This product is not intended to treat, cure or prevent any disease.

Reproduction of this document is prohibited without prior consent from BioSan Laboratories, Inc.

References

1. "Study: Antioxidants May Stop Miscarriages", Michael Holden, Reuters, July 6, 2000© 2000 Reuters Limited
2. "Mom's diet in early pregnancy affects baby health", Reuters, 9-20-2000© 2000 Reuters Limited
3. "Iron needs during pregnancy: do we need to rethink our targets?" G. H. Beaton, *Am J Clinical Nutr* (Jul 2000) 72 (1 Suppl): 265S-271S
4. The Natural Pregnancy Book, Aviva Jill Romm, © 1997 The Crossing Press, CA
5. Women's Encyclopedia of Natural Medicine, Tori Hudson, N.D. © 1999 Keats Publishing
6. Biochemical and Physiological Aspects of Human Nutrition, Martha H. Stipanuk W. B. Saunders Company © 2000
7. Encyclopedia of Nutritional Supplements Michael T. Murray, N.D. © 1996 Prima Publishing
8. "Iron requirements in pregnancy and strategies to meet them." T. H. Bothwell, *Am J Clinical Nutr* (Jul 2000) 72 (1 Suppl): 257S-264S
9. "How Folate Can Help Prevent Birth Defects" Paula Kurtzwell", FDA Consumer July 1996, and revised Feb 1999
10. Krause's Food, Nutrition, & Diet Therapy, L. Kathleen Mahan, Sylvia Escott-Stump, 10th Ed. Chapter 7, © 2000 W. B. Saunders Company
11. Botanical Safety Handbook, McGuffin, Hobbs, Upton, Goldberg © 1997 CRC Press
12. "Women's dietary calcium requirements are not increased by pregnancy or lactation." L.H. Allen, *Am J Clin Nutr* 1998;67:591-2
13. "Bone changes after 3 mo of lactation: influence of calcium intake, breast-milk output, and vitamin D-receptor genotype." M A Laskey, A Prentice, et.al., *Am J Clin Nutr* 1998;67:685-92
14. "A longitudinal study of calcium homeostasis during human pregnancy and lactation and after resumption of menses." L D Ritchie, E B Fung, et.al, *Am J Clin Nutr* 1998;67:693-701
15. "Critical appraisal of the therapeutic value of alpha-tocopherol." J. Marks, *Vit Horm* 1962; 20:573-98
16. "Recommended dietary allowances." National Research Council 10th ed. Washington, DC: National Academy Press, 1989
17. "New U.S. recommendations released on vitamins." Maggie Fox, Washington, *Institute of Medicine Report*, Jan 9, 2001, © 2001 Reuters Limited
18. FDA Register Jan 6, 1993, Nutrition Labeling for Foods, pg. 33
19. "Plasma lipoproteins as carriers of phylloquinone (vitamin K1) in humans." S Lamon-Fava, et. al, *Am J Clin Nutr* 1998;67:1226-31
20. Nutritional Herbiology, Mark Pedersen, © 1987 Pedersen Pub