



## VitaWave

Stock #3332-3 (32 fl. oz.)

A nutritious, balanced diet is essential for preventing disease and chronic illness. An "unbalanced" diet (i.e. one that is lacking sufficient vitamins, minerals and trace elements) is considered a primary risk factor for several chronic disease conditions, and growing evidence suggests that malnutrition is one of the main underlying causes for increased susceptibility to infections. Fortunately, dietary supplements can help fill the gaps in our daily nutritional needs, especially for individuals with a smoking history or other unhealthy lifestyle—several large-scale trials of dietary supplements indicate that these individuals appear to have more to gain or lose from taking dietary supplements, particularly in regards to cancer prevention. Furthermore, as one medical journal article summarized, "Nutrition is the foundation to good health, and dietary supplements may prove to be some of the most powerful medicines ever discovered."<sup>1-4</sup>

NSP's **VitaWave** liquid multi-vitamin and mineral supplement contains a powerful blend of 17 essential vitamins and minerals, combined with an incredible nutritional arsenal of amino acids, antioxidants, herbs, phytonutrients, and plant-derived trace minerals. VitaWave is ideally suited for those who need help meeting their daily nutritional needs or who have trouble swallowing tablets or capsules. Plus, VitaWave is naturally sweetened with stevia and naturally flavored with blackberry, raspberry, orange and mango fruits. Each serving of VitaWave contains:

**Asian ginseng root** (*Panax ginseng*) is an important tonic herb that enhances physical performance, promotes vitality and increases resistance to stress and aging. Laboratory and clinical analyses have confirmed ginseng's anti-hyperglycemic (the ability to counteract high levels of glucose in the blood), anti-stress and immunomodulatory activities, as well as potential anti-tumor properties.<sup>5,6</sup>

**Damiana leaf** (*Turnera diffusa*) is a tonic herb for the nervous system and has been used for anxiety, mild to moderate depression, fatigue and nervous exhaustion. Damiana's tonic action is partly due to the constituent, thymol, which acts as a thymoleptic—a substance having a life-enhancing and stimulating action on the body and mind. Damiana also provides diuretic and urinary antiseptic properties. In addition, damiana has a long-standing reputation as an aphrodisiac and has been used to treat frigidity in women and male impotence.<sup>7-10</sup>

**Oat straw** (*Avena sativa*) is recommended for general debility and convalescence, and to strengthen a weakened constitution. Oat straw offers mild antidepressant effects, gently increases energy levels, and acts as a restorative nerve tonic for an over-stressed nervous system. Clinical studies show oat straw also stimulates immune function.<sup>10-13</sup>

**Stevia leaves** (*Stevia rebaudiana*) are a natural, unrefined, non-caloric sweetener that can be used by both diabetics and hypoglycemics. Stevia does not affect blood sugar metabolism, nor does it promote the growth of microorganisms such as bacteria and yeasts. Preliminary research indicates that stevia may also help reduce blood sugar and blood pressure levels.<sup>7,14-17</sup>

**Saw palmetto fruit** (*Serenoa repens*) has shown remarkable results in the treatment of BPH (benign prostate hypertrophy or enlarged prostate), alleviating the pain and inflammation associated with this condition. In fact, saw palmetto has demonstrated nearly a 90% success-rate in clinical trials, typically within a 4- to 6-week period. In addition, saw palmetto contains a variety of phytosterols, including beta-sitosterol, which have been shown to improve immunity and help prevent some types of cancer, including breast cancer.<sup>11,18-22</sup>

**Stinging nettle leaf** (*Urtica dioica*) appears to be an effective anti-allergy herb for reducing congestion, coughs, runny noses, sneezing and other respiratory allergy symptoms. Stinging nettle is also reported to be helpful as an expectorant and has been used to treat bronchial and asthmatic conditions, coughs and tuberculosis. In addition, numerous research studies conducted in Germany, Japan, and the United States have substantiated the medicinal value of stinging nettle for treating prostate enlargement (BPH).<sup>10,13,14,23-26</sup>

**Green tea leaf extract** (*Camellia sinensis*) contains many antioxidants whose role in cancer prevention has been supported by numerous epidemiological studies. Japanese studies have confirmed an inverse association between green tea consumption and distal gastric cancer in women, as well as a lower incidence of coronary artery disease—the leading cause of death in the United States in both men and women. In other words, the higher the green tea consumption, the lower the relative risk of cancer or coronary artery disease.<sup>27-30</sup>

**Bilberry fruit extract** (*Vaccinium myrtillus*) contains anthocyanoside flavonoids (anthocyanins)—potent antioxidants that exhibit a particular affinity for the eye and vascular tissues. Bilberry anthocyanosides have been found to enhance microcirculation to the eyes and strengthen the optical portion of the retina. Clinical studies have credited

anthocyanosides with improving visual acuity and eye disorders such as macular degeneration, poor night vision, diabetic retinopathy, glaucoma and cataracts. Studies have shown that supplementing with standardized bilberry extract can improve visual acuity and the ability to adapt to changes in ambient light, as well as enlarge visual field.<sup>31-37</sup>

**Grape seed extract** (*Vitis vinifera*) is a powerful antioxidant that protects the body from premature aging, disease and decay. Grape seeds contain a class of naturally occurring antioxidants known as proanthocyanidins, which have been shown to help protect the body from sun damage; enhance vision; improve flexibility in joints, arteries and body tissues such as the heart; and improve blood circulation by strengthening capillaries, veins and arteries. Grape seed extract has also been shown to inhibit platelet aggregation (formation of blood clots), which is a risk factor for coronary artery disease.<sup>38,39</sup>

**Amino acid blend-** Amino acids are the chemical units or "building blocks" that make up proteins. They are essential in order for the body to function properly. For example, amino acids are necessary for the formation of enzymes, hormones, neurotransmitters, etc. Amino acids also facilitate the functions of vitamins and minerals. Research indicates that amino acids can enhance certain physiological functions, including brain function (through neurotransmitter stimulation), detoxification of heavy metals, immune response, and modification of free radical activity.<sup>40-44</sup>

**Vitamin C** (ascorbic acid) is an important anti-stress antioxidant and vital nutrient for adrenal function. Experimental and clinical evidence suggests that supplemental vitamin C in levels significantly greater than the RDA (recommended dietary allowance) can support adrenal function and decrease high cortisol levels—elevated cortisol levels suppress the immune system. In addition, research indicates that a majority of patients with heart disease (70-80%) exhibit very low blood levels of vitamin C. Furthermore, several studies have shown that vitamin C improves the maintenance of bone mineral density in postmenopausal women.<sup>45-51</sup>

**Alpha-lipoic acid** is often referred to as a universal antioxidant. Alpha-lipoic acid is found inside every cell in the body, where it functions as an essential component of energy production. Alpha-lipoic acid neutralizes a wide variety of free radicals, many of which are believed to play a significant role in disease processes such as cancer, cataract formation, diabetes, glaucoma, heart disease, and various brain and neurological (nerve) disorders—alpha-lipoic acid readily crosses the blood-brain barrier. In addition, alpha-lipoic acid is capable of regenerating other antioxidants such as vitamins C and E, thereby prolonging their antioxidant activity. Alpha-lipoic acid may even assist in slowing the aging process.<sup>50,52-57</sup>

**Citrus bioflavonoids** are highly-effective antioxidants that prevent free-radical cellular damage to blood vessel walls, reduce the tendency of blood clotting, and inhibit oxidation of LDL cholesterol. Multiple research studies confirm a diet high in bioflavonoids contributes to a reduced risk of heart disease. Bioflavonoids also facilitate the absorption and function of vitamin C.<sup>49,58,59</sup>

**Inositol**, considered part of the B-vitamin complex, is needed by the neurotransmitter acetylcholine for healthy cognitive and memory function. Inositol is also required for the proper function of the neurotransmitter serotonin—a decrease in brain levels of inositol may induce depression, as shown by low levels of inositol in individuals suffering from depression.<sup>58,60</sup>

**P-aminobenzoic acid (PABA)**, part of the vitamin B-complex family, functions as a coenzyme in the breakdown and utilization of proteins and in the production of red blood cells. PABA has also been shown to enhance fertility in previously infertile women. In addition, PABA may be helpful in the treatment of skin disorders such as Peyronie's disease (accumulation of abnormal fibrous tissue in the penis) and scleroderma (an abnormal build-up of tough, scar-like fibrous tissue in the skin).<sup>14,61-63</sup>

**Choline bitartrate** is a precursor to acetylcholine, an important neurotransmitter believed to facilitate concentration and memory function. Insufficient production and release of acetylcholine is a contributing factor in declining cognitive and memory function associated with aging and Alzheimer's disease. In addition, researchers have found that choline plays an important role in cardiovascular health. Choline helps to metabolize homocysteine and supplementation with choline has been shown to lower elevated homocysteine levels.<sup>14,64-66</sup>

**Lutein**, a carotenoid concentrated in the retina of the eye, acts as a protective pigment and is essential for maintaining human vision. Lutein appears to play a central role in protecting against the development of age-related macular degeneration, and may also help prevent cataracts and glaucoma. Lutein has also been shown to help reduce the risk of various cancers such as ovarian cancer. For example, high plasma lutein is associated with the increased presence of estrogen receptors in breast cancer cells and, consequently, with greater survival rates. Other studies have demonstrated an evident increase in breast cancer risk for decreasing blood levels of lutein, especially

in premenopausal women.<sup>67-73</sup>

**Lycopene**, a member of the carotenoid family found predominantly in tomatoes, exhibits significant antioxidant activity, as well as anti-cancer and chemopreventive effects against various cancers. Lycopene intake is significantly associated with a reduced risk of lung cancer, as well as significantly and inversely associated with risk for ovarian cancer, predominantly in premenopausal women. An inverse association has also been observed between dietary intake of lycopene and risk of prostate cancer. In addition, lycopene has been shown to help reduce the risk of heart disease, cortical cataracts and age-related macular degeneration.<sup>74-81</sup>

**Vitamin D3** (cholecalciferol), is one of two forms of vitamin D used for nutritional supplementation. The most important function of vitamin D is to maintain sufficient blood levels of calcium. To this end, vitamin D promotes calcium absorption by stimulating the production of calbindin (a protein necessary for intestinal absorption of calcium), by facilitating calcium transport, and by reducing urinary calcium loss in order to keep calcium in the body and spare calcium stores in the bones. Vitamin D is also required for the proper utilization of magnesium. Recent research shows that low levels of vitamin D contribute to the progression of osteoarthritis. Vitamin D participates in other body functions as well, including normal blood clotting, cardiac function, immune system activity and blood cell formation. In addition, vitamin D is necessary for healthy blood levels of insulin and has been reported to assist the body in processing sugar. It is important to note that bile acid sequestrants—a class of cholesterol-lowering drugs that include cholestyramine and colestipol—reduce the absorption of fat-soluble vitamins such as vitamin D.<sup>14,62,82-85</sup>

**Folic acid**, a B-vitamin, has been shown to provide cardioprotective effects. Most importantly, folic acid decreases blood levels of the amino acid homocysteine, which can damage the lining of the arteries and contributes to blood clotting. Studies have consistently revealed a correlation between homocysteine levels and the risk of coronary artery disease and heart attack. Research suggests that folic acid may be the most important single nutrient in providing protection against homocysteine—researchers estimate that a minimum of 13,500 deaths from cardiovascular disease could be prevented each year by increasing folic acid intake. It is important to note that B-vitamin deficiencies are a common consequence of the conventional treatments for congestive heart failure (i.e. high-dose diuretic therapy, etc.).<sup>14,45,86-93</sup>

**Dead sea salt & plant-derived trace minerals-** The effect of trace minerals on human well-being is enormous—certain trace minerals are considered essential in very small amounts to maintain health and ensure proper functioning of the body. Increasing evidence supports the role of trace minerals in the maintenance of immune function and their causal role in secondary immunodeficiency. In addition, trace minerals are involved in normal skeletal metabolism and the nutritional prevention of osteoporosis. Furthermore, vitamins, trace minerals and a variety of other phytochemicals with antioxidant properties have chemopreventive potential against cancer development.<sup>94-99</sup>

**Boron** (from boric acid) appears to increase the amount of calcium absorbed from food and lower the amount excreted by the body. These effects may help to keep bones strong. Recent animal and human studies also suggest that boron may be important for brain function and performance and hormone regulation, as well as prevention of osteoporosis and osteoarthritis. Boron may also strengthen the immune system, boost energy utilization, and affect cholesterol production.<sup>95,100</sup>

Other Ingredients: Purified water, natural fruit flavoring (blackberry, raspberry, orange and mango), citric acid, potassium benzoate and potassium sorbate as preservatives, xanthan gum, and natural coloring.

#### References:

- <sup>1</sup>Thiele S, et. al. "Determinants of diet quality." *Public Health Nutrition*; 2004, 7(1):29-37.
- <sup>2</sup>Ambrus, J.L. Sr, Ambrus, J.L. Jr. "Nutrition and infectious diseases in developing countries and problems of acquired immunodeficiency syndrome." *Experimental Biology and Medicine (Maywood, N.J.)*; 2004, 229(6):464-472.
- <sup>3</sup>Moyad, M.A. "Results and lessons from clinical trials using dietary supplements for cancer: direct and indirect investigations." *Seminars in Urologic Oncology*; 2001, 19(4):232-246.
- <sup>4</sup>Massey, P.B. "Dietary supplements." *The Medical Clinics of North America*; 2002, 86(1):127-147.
- <sup>5</sup>Nocerino, E., et. al. "The aphrodisiac and adaptogenic properties of ginseng." *Fitoterapia*; 2000, 71 Suppl 1:S1-5.
- <sup>6</sup>Chang, Y.S., et. al. "Panax ginseng: a role in cancer therapy?" *Integrative Cancer Therapies*; 2003, 2(1):13-33.
- <sup>7</sup>Murray ND, M. & Pizzorno ND, J. *Encyclopedia of Natural Medicine, 2nd ed.* Prima Publishing, 1998.
- <sup>8</sup>*PDR for Herbal Medicines, 1st Ed.* Montvale, NJ: Medical Economics Company, 1998.
- <sup>9</sup>Newall, C., et. al. *Herbal Medicines.* London, England: The Pharmaceutical Press, 1996.
- <sup>10</sup>Chevallier, A. *The Encyclopedia of Medicinal Plants.* NY, NY: Dorling Kindersley, 1996.
- <sup>11</sup>Presser PharmD, A. *Pharmacist's Guide to Medicinal Herbs.* Petaluma, CA: Smart Publications, 2000.
- <sup>12</sup>Santillo ND, H. *Natural Healing with Herbs.* Prescott, AZ: Hohm Press, 1993.
- <sup>13</sup>*Herbal Medicine: Expanded Commission E Monographs.* Integrative Medicine Communications, 2000.
- <sup>14</sup>Lininger DC, S., et al. *The Natural Pharmacy, 2nd ed.* Rocklin, CA: Prima Health, 1999.

- <sup>15</sup>Richard, D. *Stevia Rebaudiana: Nature's Sweet Secret*. Bloomington, IL: Vital Health Publ., 1999.
- <sup>16</sup>Elkins, R. *Stevia: Nature's Sweetener*. Pleasant Grove, UT: Woodland Publ., 1997.
- <sup>17</sup>Cirigliano MD, M. "Stevia as a Natural Sweetener, Hypoglycemic, and Antihypertensive." *Alternative Medicine Alert*; 2000, 3:13-17.
- <sup>18</sup>Alschuler ND, L. "Saw Palmetto: Effective BPH Symptom Relief." *Nutrition Science News*; September, 2000.
- <sup>17</sup>McCaleb, R. "Phytochemicals Outperform Synthetics In Treating Enlarged Prostate." *HerbalGram*; 1997, 40(16).
- <sup>19</sup>"Saw Palmetto Breakdown." *Nutrition Science News*; September, 2000.
- <sup>20</sup>Broadhurst PhD, C. L. "Phytochemicals: The Ties That Bind." *Nutrition Science News*; July, 2001.
- <sup>21</sup>O'Brien, C. "Sterols: Formidable Disease Fighter." *Functional Foods & Nutraceuticals*; March, 2002.
- <sup>22</sup>Awad, A.B., et. al. "Effect of phytosterols on cholesterol metabolism and MAP kinase in MDA-MB-231 human breast cancer cells." *Journal of Nutritional Biochemistry*; 2003, 14(2):111-119.
- <sup>23</sup>Sheehan, J. "Ease Spring Sneezing." *Delicious! Magazine*; April, 2000.
- <sup>24</sup>Wolfson ND, D. "Solving Sinusitis." *Nutrition Science News*; April, 2000.
- <sup>25</sup>Fetrow, C. & Avila, J. *Professional's Handbook of Complementary & Alternative Medicines*. Springhouse, PA: Springhouse Corp., 1999.
- <sup>26</sup>Mills, S. & Bone, K. *Principles and Practice of Phytotherapy*. London: Churchill Livingstone, 2000.
- <sup>27</sup>Pillai, S.P., et. al. "Antimutagenic/antioxidant activity of green tea components and related compounds." *Journal of Environmental Pathology, Toxicology & Oncology*; 1999, 18(3):147-158.
- <sup>28</sup>Sasazuki, S., et. al. "Green Tea Consumption and Subsequent Risk of Gastric Cancer by Subsite: The JPHC Study." *Cancer Causes & Control*; 2004, 15(5):483-491.
- <sup>29</sup>Sano J, et. al. "Effects of green tea intake on the development of coronary artery disease." *Circulation Journal*; 2004, 68(7):665-670.
- <sup>30</sup>"What Is Coronary Artery Disease?" *National Heart, Lung & Blood Institute*.  
<[http://www.nhlbi.nih.gov/health/dci/Diseases/Cad/CAD\\_WhatIs.html](http://www.nhlbi.nih.gov/health/dci/Diseases/Cad/CAD_WhatIs.html)>. Accessed July, 2004.
- <sup>31</sup>Gladstar, R. "Q&A: Slowing Macular Degeneration." *Herbs For Health*; 1999, 4(5):14-18.
- <sup>32</sup>Stansbury ND, J. "Q&A: Slowing Macular Degeneration." *Herbs For Health*; 1999, 4(5):14-18.
- <sup>33</sup>—. "Natural Therapies for Ocular Disorders, Part Two: Cataracts and Glaucoma." *Alternative Medicine Review*; 2001, 6(2):141-166.
- <sup>34</sup>"Natural remedies for healthy eyes." *Herbs For Health*; 2003, 7(6):64
- <sup>35</sup>"Vaccinium myrtillus." *Alternative Medicine Review*; 2001, 6(5):500-504.
- <sup>36</sup>Broadhurst PhD, C.L. & Duke PhD, J.A. "Inside plants: Berries for better eyesight, antiaging benefits, and more." *Herbs For Health*; 1999, 4(4):24.
- <sup>37</sup>Erlund, I., et. al. "Consumption of black currants, lingonberries and bilberries increases serum quercetin concentrations." *European Journal of Clinical Nutrition*; 2003, 57(1):37-42.
- <sup>38</sup>Shi, J., et. al. "Polyphenolics in grape seeds-biochemistry and functionality." *Journal of Medicinal Food*; 2003, 6(4):291-299.
- <sup>39</sup>Jiang, D.J., et. al. "Pharmacological effects of xanthones as cardiovascular protective agents." *Cardiovascular Drug Reviews*; 2004, 22(2):91-102.
- <sup>40</sup>Chaitow DO, L. *Thorsons Guide to Amino Acids*. Hammersmith, London: Thorsons, 1991.
- <sup>41</sup>Spehar, J. "Amino Acids." *Gale Encyclopedia of Alternative Medicine*; 2001.  
<[http://www.findarticles.com/p/articles/mi\\_g2603/is\\_0001/ai\\_2603000153](http://www.findarticles.com/p/articles/mi_g2603/is_0001/ai_2603000153)>. Accessed April 2005.
- <sup>42</sup>Fernstrom JD. "Dietary amino acids and brain function." *Journal of the American Dietetic Association*; 1994, 94(1):71-77.
- <sup>43</sup>Harding, K.L., et. al. "Outcome-based comparison of Ritalin versus food-supplement treated children with AD/HD." *Alternative Medicine Review*; 2003, 8(3):319-330.
- <sup>44</sup>Grimm, H. & Kraus, A. "Immunonutrition--supplementary amino acids and fatty acids ameliorate immune deficiency in critically ill patients." *Langenbeck's Archives of Surgery*; 2001, 386(5):369-376.
- <sup>45</sup>Ronzio PhD, R.A. "Nutritional support for adrenal function." *American Journal of Natural Medicine*; 1998, 5(5):12-17.
- <sup>46</sup>Kelly ND, G.S. "Nutritional and Botanical Interventions to Assist with the Adaptation to Stress." *Alternative Medicine Review*; 1999, 4(4):249-265.
- <sup>47</sup>Lavalle RPh, J.B. "Stress: The Hidden Factor For Weight Gain." *Nutrition Science News*; April, 2001.
- <sup>48</sup>Ghen DO, M.J. & Moore MD, C.B. "Implications of Adrenal Insufficiency." *International Journal of Integrative Medicine*; 2000, 2(6):30-35.
- <sup>49</sup>Wassef RPh, F. "Cardiovascular disease: Reading the correct road signs." *American Journal of Natural Medicine*; 5(7):12-17.
- <sup>50</sup>Pizzorno, J & Murray, M (eds). *A Textbook of Natural Medicine, 2nd ed*. London: Churchill Livingstone, 1999.
- <sup>51</sup>Simon JA, Hudes ES. "Relation of ascorbic acid to bone mineral density and self-reported fractures among US adults." *American Journal of Epidemiology*; 2001, 154(5):427-433.
- <sup>52</sup>Wolfson ND, D. "Lipoic Acid: The Universal Antioxidant." *Nutrition Science News*; October, 2000.
- <sup>53</sup>Nichols Jr MD, T.W. "a-Lipoic Acid: Biological Effects and Clinical Implications." *Alternative Medicine Review*; 1997, 2(3):177-183.
- <sup>54</sup>Joiner-Bey ND, H. "Alpha-Lipoic Acid." *International Journal of Integrative Medicine*; 2001, 3(2):38.
- <sup>55</sup>Packer, L., et. al. "Neuroprotection by the metabolic antioxidant alpha-lipoic acid." *Free Radical Biology and Medicine*; 1997;22(1-2):359-378.
- <sup>56</sup>Biewanga, G., et. al. "The pharmacology of the antioxidant lipoic acid." *General Pharmacology*; 1997, 29(3):315-331.
- <sup>57</sup>Packer, L., et. al. "Molecular aspects of lipoic acid in the prevention of diabetes complications." *Nutrition*; 2001, 17(10):888-895.
- <sup>58</sup>Murray ND, M. *The Encyclopedia of Nutritional Supplements*. Rocklin, CA: Prima Publ., 1996.
- <sup>59</sup>Podell, R. "Bioflavonoids Contribute To Heart Disease Risk." *Nutrition Science News*; August, 1996.
- <sup>60</sup>Badash, M. "Brain Nutrients: Food For Thought." *Nutrition Science News*; January, 1998.
- <sup>61</sup>Balch MD, J. & Balch CNC, P. *Prescription for Nutritional Healing*. Garden City Park, NY: Avery, 1990.
- <sup>62</sup>Dunne, L. *Nutrition Almanac, Third Edition*. McGraw-Hill Publishing, 1990.

- <sup>63</sup>Para-Aminobenzoic Acid (PABA)." *PDRhealth*. <[http://www.pdrhealth.com/drug\\_info/nmdrugprofiles/nutsupdrugs/par\\_0194.shtml](http://www.pdrhealth.com/drug_info/nmdrugprofiles/nutsupdrugs/par_0194.shtml)>. Accessed April, 2005.
- <sup>64</sup>Murray ND, M. *The Healing Power of Herbs*. Rocklin, CA: Prima Publishing, 1995.
- <sup>65</sup>Shuman RD, J. "Youthful Aging." *Health & Nutrition Breakthroughs*; October, 1997.
- <sup>66</sup>Canty PhD, D. "Lecithin and Choline Redeemed." *Nutrition Science News*; October, 1997.
- <sup>67</sup>Landrum PhD, J. & Bone PhD, R. "Carotenoid Nutrition and the Human Retina." *International Journal of Integrative Medicine*; 2000, 2(3):28-33.
- <sup>68</sup>Toniolo, P., et. al. "Serum carotenoids and breast cancer." *American Journal of Epidemiology*; 2001, 153(12):1142-1147.
- <sup>69</sup>Sardi, B. "A New Look at Eye Health." *Nutrition Science News*; April, 2001.
- <sup>70</sup>Seddon, J.M., et. al. "Dietary carotenoids, vitamins A, C, and E, and advanced age-related macular degeneration. Eye Disease Case-Control Study Group." *Journal of the American Medical Association*; 1994, 272(18):1413-1420.
- <sup>71</sup>Bertone, E.R., et. al. "A population-based case-control study of carotenoid and vitamin A intake and ovarian cancer (United States)." *Cancer Causes and Control*; 2001, 12(1): 83-90.
- <sup>72</sup>Rock, C.L., et. al. "Carotenoids, vitamin A, and estrogen receptor status in breast cancer." *Nutrition and Cancer*; 1996, 25(3):281-296.
- <sup>73</sup>Hulten, K., et. al. "Carotenoids, alpha-tocopherols, and retinol in plasma and breast cancer risk in northern Sweden." *Cancer Causes and Control*; 2001, 12(6):529-537.
- <sup>74</sup>Michaud, D.S., et. al. "Intake of specific carotenoids and risk of lung cancer in 2 prospective US cohorts." *American Journal of Clinical Nutrition*; 2000, 72(4):990-997.
- <sup>75</sup>Cramer, D.W., et. al. "Carotenoids, antioxidants and ovarian cancer risk in pre- and postmenopausal women." *International Journal of Cancer*; 2001, 94(1):128-134.
- <sup>76</sup>Bratman MD, S. & Kroll PhD, D. *Natural Health Bible*. Prima Publishing, 1999.
- <sup>77</sup>Kucuk, O., et. al. "Phase II randomized clinical trial of lycopene supplementation before radical prostatectomy." *Cancer Epidemiology, Biomarkers and Prevention*; 2001, 10(8):861-868.
- <sup>78</sup>Rissanen, T.H., et. al. "Low serum lycopene concentration is associated with an excess incidence of acute coronary events and stroke: the Kuopio Ischaemic Heart Disease Risk Factor Study." *British Journal of Nutrition*; 2001, 85(6):749-754.
- <sup>79</sup>Khachik, F., et. al. "Chemistry, distribution, and metabolism of tomato carotenoids and their impact on human health." *Experimental Biology and Medicine*; 2002, 227(10):845-851.
- <sup>80</sup>Gale, C.R., et. al. "Plasma antioxidant vitamins and carotenoids and age-related cataract." *Ophthalmology*; 2001, 108(11):1992-1998.
- <sup>81</sup>Mares-Perlman, J.A., et. al. "Serum antioxidants and age-related macular degeneration in a population-based case-control study." *Archives of Ophthalmology*; 1995, 113(12):1518-1523.
- <sup>82</sup>Torkos Phm, S. "Drug-Nutrient Interactions: A Focus On Cholesterol-Lowering Agents." *International Journal of Integrative Medicine*; 2000, 2(3): 9-13.
- <sup>83</sup>Bergner, P. *The Healing Power of Minerals, Special Nutrients and Trace Elements*. Rocklin, CA: Prima Publishing, 1997.
- <sup>84</sup>Spiller PhD, G. & Bruce DPH, B. *Calcium: Nature's Versatile Mineral*. NY, NY: Avery, 2000.
- <sup>85</sup>Vitamin D." *PDRhealth*. <[http://www.pdrhealth.com/drug\\_info/nmdrugprofiles/nutsupdrugs/vit\\_0265.shtml](http://www.pdrhealth.com/drug_info/nmdrugprofiles/nutsupdrugs/vit_0265.shtml)>. Accessed April 2005.
- <sup>86</sup>Lombardi ND, R. "3 B's Block Cardiovascular Disease." *Nutrition Science News*; July, 2000.
- <sup>87</sup>McCully MD, K. "Homocysteine and Prevention of Vascular Disease." *International Journal of Integrative Medicine*; 2001, 3(1):23-27.
- <sup>88</sup>Simon MD, H. (ed.) "What Are the Risk Factors for Heart Attack?" *Well-Connected Report*; September, 1999.
- <sup>89</sup>Stampfer, M.J., et. al. "A prospective study of plasma homocysteine and risk of myocardial infarction in US physicians." *Journal of the American Medical Association*; 1992, 268:877-881.
- <sup>90</sup>Glueck, C.J., et. al. "Evidence that homocysteine is an independent risk factor for atherosclerosis in hyperlipidemic patients." *American Journal of Cardiology*; 1995, 75(2):132-136.
- <sup>91</sup>Ubbink, J.B., et. al. "Vitamin B-12, vitamin B-6, and folate nutritional status in men with hyperhomocysteinemia." *American Journal of Clinical Nutrition*; 1993, 57(1):47-53.
- <sup>92</sup>—, et. al. "Vitamin requirements for the treatment of hyperhomocysteinemia in humans." *Journal of Nutrition*; 1994, 124(10):1927-1933.
- <sup>93</sup>Sinatra MD, S. "Nutritional Supplements for the Cardiac Patient." *International Journal of Integrative Medicine*; 2001, 3(1):31-43.
- <sup>94</sup>Baumgartner, T.G. "Trace elements in clinical nutrition." *Nutrition in Clinical Practice*; 1993, 8(6):251-263.
- <sup>95</sup>Annussek, G. "Boron." *Gale Encyclopedia of Alternative Medicine*; 2001. <[http://www.findarticles.com/p/articles/mi\\_g2603/is\\_0002/ai\\_2603000222](http://www.findarticles.com/p/articles/mi_g2603/is_0002/ai_2603000222)>. Accessed April, 2005.
- <sup>96</sup>Chandra, S. & Chandra, R.K. "Nutrition, immune response, and outcome." *Progress in Food & Nutrition Science*; 1986, 10(1-2):1-65.
- <sup>97</sup>Gur, A., et. al. "The role of trace minerals in the pathogenesis of postmenopausal osteoporosis and a new effect of calcitonin." *Journal of Bone and Mineral Metabolism*; 2002, 20(1):39-43.
- <sup>98</sup>Coxam, V. [New advances in osteoporosis nutritional prevention]. *Medical Science (Paris)*; 2005, 21(3):297-301.
- <sup>99</sup>Abdulla, M. & Gruber, P. "Role of diet modification in cancer prevention." *BioFactors*; 2000, 12(1-4):45-51.
- <sup>100</sup>"Boron." *Alternative Medicine Review*; 2004, 9(4):434-437.