



GENESTRA  
BRANDS®



# Femagen PMS Tablets

## Dietary Supplement

### Multivitamin, mineral, herbal and glandular support for menstrual comfort<sup>‡</sup>

- Moderates cramps, bloating, breast tenderness and fatigue associated with the menstrual cycle<sup>‡</sup>
- Helps to maintain proper muscle function and red blood cell formation<sup>‡</sup>
- Includes ovary, adrenal and brain glandular extracts
- Improved
  - Now offers activated forms of vitamins, including pyridoxal 5'-phosphate, Metafolin® calcium L-5-methyltetrahydrofolate and methylcobalamin

Femagen PMS Tablets were specifically formulated with nutrients, botanicals and glandular extracts to support normal premenstrual syndrome (PMS) symptoms in healthy women. Approximately 30-80% of women experience mild to moderate symptoms of PMS each month. These symptoms may result from imbalances in hormones or decreased levels of vitamins and minerals. Preclinical evidence suggests that chasteberry supports hormonal balance through dopamine-mediated modulation of prolactin secretion. Supplementation with chastetree extract for three months has been shown to provide significant support for breast comfort and positive mood, while relieving cramps, bloating and fatigue associated with the menstrual cycle. In addition to hormonal fluctuations, the concentrations of vitamins and minerals, such as magnesium, calcium and zinc, can vary during the menstrual cycle. Femagen PMS Tablets offer magnesium as bioavailable magnesium citrate to support proper muscle function, along with activated forms of B vitamins to support energy metabolism. Iron, a necessary component of the hemoglobin present in red blood cells, is also lost during menstrual bleeding. Femagen PMS Tablets include iron to help maintain healthy iron stores, which is provided alongside ovary, adrenal and brain glandular extracts.<sup>‡</sup>

#### Supplement Facts

Serving Size 1 Tablet  
Servings per Container 90

	Amount Per Serving	% DV
Vitamin A (as 100% beta-carotene)	600 mcg	67%
Vitamin E (as <i>d</i> -alpha tocopheryl acid succinate)	34 mg	227%
Thiamin (as thiamin mononitrate)	10 mg	833%
Riboflavin	10 mg	769%
Niacin (as nicotinic acid)	15 mg	94%
Vitamin B <sub>6</sub> (as pyridoxal 5'-phosphate)	50 mg	2941%
Folate (as calcium L-5-methyltetrahydrofolate, Metafolin®)	50 mcg DFE (150 mcg folate)	63%
Vitamin B <sub>12</sub> (as methylcobalamin)	25 mcg	1042%
Pantothenic Acid (as calcium <i>d</i> -pantothenate)	10 mg	200%
Choline (as choline bitartrate)	15 mg	3%
Calcium (as calcium citrate)	50 mg	4%
Iron (as ferrous bisglycinate)	10 mg	56%
Magnesium (as magnesium citrate)	100 mg	24%
Zinc (as zinc citrate)	5 mg	45%
Ox ( <i>Bos taurus</i> ) Ovary	50 mg	*
Ox ( <i>Bos taurus</i> ) Adrenal	25 mg	*
Pig ( <i>Sus scrofa</i> ) Brain	25 mg	*
Chastetree ( <i>Vitex agnus-castus</i> ) Fruit Extract (7-10:1) 350-500 mg Dried Equivalent	50 mg	*
Dandelion ( <i>Taraxacum officinale</i> ) Leaf	10 mg	*

\*Daily value (DV) not established

Other ingredients: Cellulose, hypolose, crosscarmellose sodium, silica, magnesium stearate, hypromellose, glycerin

Metafolin® is a registered trademark of Merck KGaA, Darmstadt, Germany

#### Recommended Dose

Adult Women: Take 1 tablet daily with a meal, a few hours before or after taking medications or other supplements, or as recommended by your healthcare practitioner.

Product Size: 90 Tablets

Product Code: 10514



**seroyal.com | 1.888.737.6925**

© 2018 Seroyal. All rights reserved.

The information contained herein is for informational purposes only and does not establish a doctor-patient relationship. Please be sure to consult your physician before taking this or any other product. Consult your physician for any health problems.

<sup>‡</sup> 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.

# Femagen PMS Tablets

## Dietary Supplement

### Scientific Rationale:

Premenstrual syndrome (PMS) is characterized by physical and behavioural symptoms typically occurring in the luteal phase of the female cycle and disappearing with the onset of menstrual bleeding.<sup>1</sup> These symptoms, which often include abdominal pain, irritability, headache, increased appetite, breast tenderness and insomnia, affect more than 75% of women during their reproductive years.<sup>1</sup>

PMS may be caused by a variety of factors, including hormonal imbalances, vitamin or mineral deficiencies, impaired prostaglandin metabolism, and low neurotransmitter levels.<sup>1</sup> Specifically, elevated levels of estrogen or prolactin, and a decreased ratio of progesterone to estrogen have been associated with PMS.<sup>1</sup> Low levels of vitamin B<sub>6</sub>, magnesium and calcium have also been implicated in the development of PMS.<sup>1</sup>

Chastetree has been used for many centuries to support hormone-related reproductive health in women.<sup>1‡</sup> A growing body of human clinical research also supports its efficacy for PMS.<sup>3‡</sup> Preclinical evidence suggests that chasteberry primarily works through dopamine-mediated modulation of prolactin secretion.<sup>1‡</sup>

Numerous clinical trials have reported that daily supplementation with chastetree extracts for the duration of three menstrual cycles provided significant menstrual cycle support.<sup>4-7‡</sup> In one randomized, double-blind, placebo-controlled trial, supplementation with 4.0 mg of dried chastetree extract per day significantly helped to relieve cramps, nervous tension, fatigue and abdominal bloating associated with the menstrual cycle when compared to the placebo.<sup>4‡</sup> Similarly, a randomized, double-blind, placebo-controlled trial reported that chastetree supplementation

significantly promoted well-being during the third menstrual cycle as measured by self-assessment scales.<sup>5‡</sup> Daily supplementation with chastetree extract was also found to significantly support normal prolactin levels in a randomized trial.<sup>7‡</sup>

The level of micronutrients can also vary during the menstrual cycle.<sup>2</sup> Estrogen affects magnesium and calcium metabolism, and research has observed an association between individuals with PMS and low levels of these minerals.<sup>2,8‡</sup> Magnesium participates in various cellular activities associated with PMS including proper muscle function and energy metabolism, as well as bone formation and normal electrolyte balance.<sup>2‡</sup> Iron is a necessary component of hemoglobin, and is important for the normal production and activity of red blood cells.<sup>8‡</sup> As iron is lost during menstrual bleeding, women require more iron than men.<sup>9‡</sup> Additionally, intake levels of B vitamins may be associated with PMS.<sup>10‡</sup> B vitamins are essential in the metabolism of energy and nutrients, and adequate intake levels are needed for the metabolism of neurotransmitter precursors, including the serotonin precursor tryptophan.<sup>10‡</sup>

In addition to providing botanicals such as chasteberry, Femagen PMS Tablets include a combination of more than 10 vitamins and minerals to help maintain good health.<sup>‡</sup> B vitamins are provided in their active forms, such as pyridoxal 5'-phosphate, methylcobalamin and Metafolin® calcium L-5-methyltetrahydrofolate.<sup>11,12‡</sup> Also included in this blend are iron, calcium and magnesium, which is offered in the bioavailable magnesium citrate form.<sup>2</sup> Furthermore, this formula offers a variety of glandular extracts, including ovary, adrenal and brain.

#### REFERENCES

1. Golmakani, N, Ebrahimzadeh Zagami, S. *Journal of American Science*. 2011; 7(5): 60-64.
2. Makara-Studzinska, M, Moryłowska-Topolska, J, Sztanke, M, Pasternak, K, J. *Elem. s*. 2011; 16: 659-664.
3. van Die, M, Burger, HG, Teede, HJ, Bone, KM. *Planta Medica*. 2013; 79: 562-575.
4. Ma, L, Lin, S, Chen, R, Zhang, Y, Chen, F, Wang, X. *Australian and New Zealand Journal of Obstetrics and Gynaecology*. 2010; 50: 189-193.
5. He, Z, Chen, R, Zhou, Y, Geng, L, Zhang, Z, Chen, S, Yao, Y, Lu, J, Lin, S. *Maturitas*. 2009; 63: 99-103.
6. Schellenberg, R, Zimmermann, C, Dreweb, J, Hoexter, G, Zahner, C. *Phytomedicine*. 2012; 19: 1325-1331.
7. Kilicdag, E, Tarim, E, Bagis, T, Erkanli, S, Aslan, E, Ozsahin, K, Kuscu, E. *International Journal of Gynecology and Obstetrics*. 2004; 85: 292-293.
8. Warhade, V, Shinde, A. *Paripex Indian Journal of Research*. 2014; 3(9): 122-123.
9. Fuqua, BK, Vulpe, CD, Anderson, GJ. *Journal of Trace Elements in Medicine and Biology*. 2012; 26: 115-119.
10. Chocano-Bedoya, PO, Manson, JE, Hankinson, SE, Willett, WC, Johnson, SR, Chasan-Taber, L, Ronnenberg, AG, Bigelow, C, Bertone-Johnson, ER. *Am J Clin Nutr*. 2011; 93(5): 1080-6.
11. Combs, GF. (2012). *The Vitamins* (4th ed.). USA: Elsevier.
12. Pietrzik, K, Bailey, L, Shane, B. *Clin Pharmacokinet*. 2010; 49(8): 535-48.

**Seroyal.com | 1.888.737.6925**



**GENESTRA**  
BRANDS®

© 2018 Seroyal. All rights reserved.

The information contained herein is for informational purposes only and does not establish a doctor-patient relationship. Please be sure to consult your physician before taking this or any other product. Consult your physician for any health problems.

<sup>‡</sup> 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.