

Ferro Supreme



1 Vegetarian
Hard Capsule

Aids healthy red blood cell production

OVERVIEW

- > Provides 24 mg iron from Iron Bisglycinate per capsule
- > Contains 180 mg ascorbic acid to facilitate iron absorption
- > Supports haemoglobin synthesis
- > Supports oxygen transport to body tissues
- > Supports blood health
- > Maintains energy production

Active Ingredients

Iron (II) Glycinate	120 mg
Equiv. iron	24 mg
Calcium ascorbate dihydrate	219.08 mg
Equiv. Calcium ascorbate	200 mg
Equiv. ascorbic acid (vitamin C)	180 mg

Directions for Use

Adults: Take one capsule daily with a meal, or as directed by your health professional.

Allergen Information

No added: Gluten, nuts, soy, dairy, or lactose.

Serving form

Vegetarian Hard Capsules

Serving per pack

30

Excipients

Maltodextrin	Citric acid
Microcrystalline cellulose	Hypromellose
Magnesium stearate	Purified Water
Colloidal anhydrous silica	

Warning

Not for the treatment of iron deficiency conditions.

Prescribing Considerations

Levodopa: Iron might decrease levodopa levels by reducing its absorption, separate doses of iron and levodopa as much as possible.

Levothyroxine: Iron might decrease levothyroxine levels by reducing its absorption. Advise patients to separate levothyroxine and iron doses by at least 2 hours.

Methylidopa: Iron might decrease methylidopa levels by reducing its absorption. Advise patients to separate methylidopa and iron doses by at least 2 hours.

Antibiotics (Quinolone, Tetracycline): Iron might decrease levels of tetracycline antibiotics by reducing their absorption. Advise patients to separate quinolone antibiotics and iron doses by at least 2 hours. Separate 2 hours before or 4 hours after tetracycline antibiotics.

Calcium: Calcium can decrease iron absorption. It is recommended to take calcium and iron supplements at different times of the day.

Zinc: Iron and zinc can interfere with each other's absorption when taken on an empty stomach. When high supplemental doses of zinc are taken on an empty stomach there is a measurable reduction in iron absorption, and high supplemental doses of non-heme iron taken on an empty stomach can reduce zinc absorption, especially when dietary mineral intake is low.

Achlorhydria: Decreased stomach acidity may impair iron absorption.

Hemodialysis: Supplemental iron absorption is decreased in people requiring chronic hemodialysis.

Hemoglobin diseases: Iron overload is likely to occur in people with hemoglobinopathies or other refractory anemias erroneously diagnosed as iron deficiency anemia.

Designed and packed in Australia from local and imported ingredients.



No Added
Gluten



No Added
Dairy



No Added
Soy



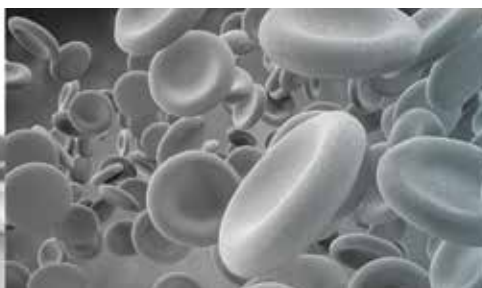
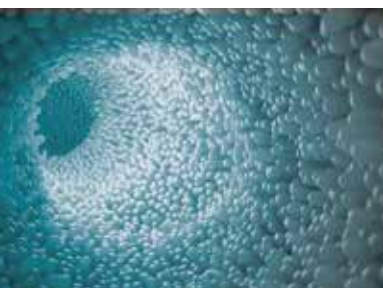
No Added
Nuts



No Added
Preservatives



Free from
Flavours, Colours
& Sweeteners





EDUCATION:

Iron is an essential mineral functioning mainly in the transport and storage of oxygen throughout the body. Around 2-4 gm of iron exists in the body, the majority in haemoglobin (65%), in storage in the liver and macrophages (20%), and in storage in myoglobin (10%). The remainder resides functionally in enzyme complexes.¹

Iron is found in dietary sources in both heme and non-heme forms. Heme iron exists as a complex with protoporphyrin and is available in animal products such as red meat, poultry and seafood. Non-heme iron is found in both animal and plant sources including green leafy vegetables, legumes and seeds, and is available as free or weakly bound iron. Non-heme iron has an affinity for binding complexes such as phytates or polyphenols. It is therefore less bioavailable than heme iron.⁵

Blood health

Iron is found largely in the haemoglobin protein of erythrocytes which functions as a carrier of oxygen throughout the system. As it is a crucial constituent of haemoglobin, iron is essential not only for its production, but also for optimal erythropoiesis.⁴

Energy production

Iron also functions as an iron-sulphur complex in enzymes involved in the electron transport chain and in the Krebs cycle, enabling optimal enzyme function and mitochondrial respiration. Iron therefore plays an essential role in energy production.^{2,6}

Immune Function

Iron is enzymatically involved in DNA synthesis making it a vital nutrient for cell growth and division. One of the major functions affected by this action is immune cell production, particularly of the T-lymphocytes.¹

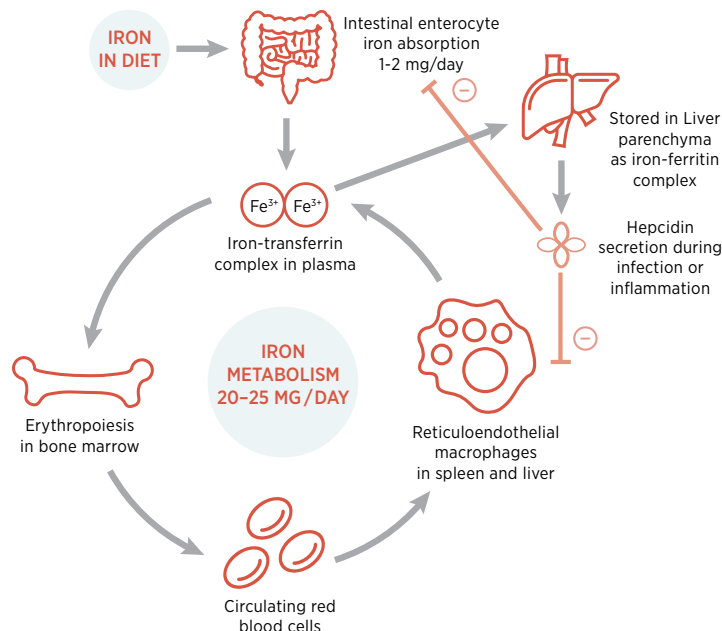
Iron Bisglycinate and Ascorbic Acid

Iron bisglycinate is an iron chelate that contains around 20% iron. It is water soluble and largely resistant to acidic fluctuations between pH 2-6. This retains the compound's solubility and protects it from dietary inhibitors such as phytates and polyphenols, ensuring high bioavailability of the compound.³

Vitamin C (in the form of ascorbic acid) is a nutrient that, when taken in combination, can improve the solubility and therefore bioavailability of non heme iron by up to 39%.¹

References supplied on request.

Fig. 1: Iron Metabolism



Designs for Health Quality Guarantee

Designs for Health medicines that are listed on the Australian Register of Therapeutic Goods will display an AUSTL number on the label. Listed medicines in Australia need to be manufactured according to legislated standards set out in Therapeutic Goods Order 101. TGO101 legislation sets out minimum quality standards for medicines supplied in Australia that display an AUSTL number. It mandates testing for:

- Impurities such as heavy metals (including lead, mercury, cadmium and arsenic), pesticides and residual solvents
- Dissolution (to ensure the capsule will dissolve once taken)
- Uniformity (to ensure that every capsule is the same)

Final assay testing is also performed to ensure that what we have on the label is in each capsule, and microbiological testing is performed to ensure that no microbial contamination has occurred during the encapsulation and packing process.