



Mother/Child

# BabyCare Prenatal Chelated Mineral

A comprehensive mineral supplement for pregnant women and their developing babies



ITEM #102

**DIRECTIONS:** TAKE TWO (2) TABLETS TWICE DAILY WITH FOOD.

## SUPPLEMENT FACTS

SERVING SIZE: 2 TABLETS

AMOUNT PER SERVING		%DV*
CALCIUM (AS CALCIUM CITRATE AND CALCIUM CARBONATE)	135 mg	10%
IODINE (AS POTASSIUM IODIDE)	150 µg	100%
MAGNESIUM (AS MAGNESIUM CITRATE AND MAGNESIUM AMINO ACID CHELATE)	150 mg	35%
ZINC (AS ZINC CITRATE)	10 mg	70%
COPPER (AS COPPER GLUCONATE)	1 mg	50%
IRON (AS FERROUS FUMARATE USP)	14 mg	80%
%DV FOR PREGNANT WOMEN		

**OTHER INGREDIENTS:** MICROCRYSTALLINE CELLULOSE, HYDROXYPROPYL CELLULOSE, CROSCARMELOSE SODIUM, ASCORBYL PALMITATE, MANGANESE GLUCONATE, SELENIUM AMINO ACID COMPLEX, PREGELATINIZED STARCH, SILICON DIOXIDE, DEXTRIN, L-SELENOMETHIONINE, CALCIUM SILICATE, HYDROLYZED RICE PROTEIN, VANADIUM CITRATE, MOLYBDENUM CITRATE, DEXTROSE, SOY LECITHIN, CHROMIUM POLYNICOTINATE, ULTRA TRACE MINERALS, VANILLA EXTRACT, SODIUM CARBOXYMETHYL CELLULOSE, SODIUM CITRATE.

CONTAINS SOY.

CONSULT YOUR PHYSICIAN IF YOU ARE PREGNANT, NURSING, TAKING A PRESCRIPTION DRUG, OR HAVE A MEDICAL CONDITION.

**DO NOT USE IF SAFETY SEAL UNDER CAP IS BROKEN OR MISSING.**

**STORAGE:** STORE BELOW 25° C.

**QUESTIONS OR COMMENTS?** FOR INFORMATION, CONTACT

1-800-950-9595.

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**WARNING:** ACCIDENTAL OVERDOSE OF IRON-CONTAINING PRODUCTS IS A LEADING CAUSE OF FATAL POISONING IN CHILDREN UNDER 6. KEEP THIS PRODUCT OUT OF REACH OF CHILDREN. IN CASE OF ACCIDENTAL OVERDOSE, CALL A DOCTOR OR POISON CONTROL CENTER IMMEDIATELY.

### References

- Bath S, Steer C, Golding J, Emmett P, Rayman MP. Maternal iodine status during pregnancy and the impact on cognitive outcomes in the offspring. 2011. Proceedings of the Nutrition Society 70(OCE6): E386.
- Zimmermann MB. The adverse effects of mild-to-moderate iodine deficiency during pregnancy and childhood: a review. *Thyroid* 2007;17(9): 829–35.
- Zimmermann MB. The effects of iodine deficiency in pregnancy and infancy. *Paediatr Perinat Epidemiol.* 2012 Jul;26 Suppl 1:108-17.
- Yip R. Significance of an abnormally low or high hemoglobin concentration during pregnancy: special consideration of iron nutrition. *Am J Clin Nutr.* Jul 2000;72(1 Suppl):272S-279S.
- Mori R, Ota E, Middleton P, Tobe-Gai R, Mahomed K, Bhutta ZA. Zinc supplementation for improving pregnancy and infant outcome. *Cochrane Database Syst Rev.* 2012 Jul 11;7.
- Mannion CA, Lindop RJ. Vitamin/mineral supplements and calcium-based antacids increase maternal calcium intake. *J Am Coll Nutr.* 2009 Aug;28(4):362-8.

Designed to complement **BabyCare Prenatal Mega Antioxidant**, **BabyCare Prenatal Chelated Mineral** supplies pure, high-quality minerals at safe levels to help support a healthy pregnancy for mothers and healthy growth and development for babies.\*

### THE BENEFITS OF BABY-CARE PRENATAL CHELATED MINERAL

One half of the **BabyCare Prenatal Essentials™**, **BabyCare Prenatal Chelated Mineral** provides essential minerals, such as iron and iodine, which you need to support the healthy growth and development of your baby—before, during, and after pregnancy. Plus, it will provide the nutrition you need to keep feeling good and to help support your body after giving birth.\*

**BabyCare Prenatal Chelated Mineral** is also an excellent source of magnesium, which is needed to support healthy fetal growth and support calcium absorption for strong bones and teeth.\*

This supplement also contains copper, which aids in the production of red blood cells, along with supporting fetal development.\*

### THE SCIENCE OF BABY-CARE PRENATAL CHELATED MINERAL

Because maternal blood volume increases by nearly 50 percent during pregnancy, iron supplementation beginning by the second trimester is important for supporting the production of red blood cells, which help transport oxygen and nutrients to the baby. Maternal iron is also needed during pregnancy and lactation to provide the infant with sufficient iron stores to last through the first four to six months of life, after which supplementary feeding is usually recommended. **BabyCare Prenatal Chelated Mineral** is an excellent source of iron.

Calcium is important for a healthy pregnancy and maintaining the mother's bone density, which is especially important as calcium is transferred to the baby for developing bones, teeth, and muscles.\*

A woman's need for iodine increases considerably during pregnancy and while nursing. It is needed for maternal thyroid hormone production, which plays a role in fetal neurocognitive development. Deficiency of iodine is accepted as the most common cause of preventable brain damage in the world. Iodine deficiency during pregnancy can negatively impact cognitive function. **BabyCare Prenatal Chelated Mineral** contains high potency iodine.

Zinc deficiency has been linked to low birth weight and an increased risk of developing delivery complications, so maintaining adequate levels is especially important for a healthy pregnancy. Zinc also supports healthy fetal cell growth.\*

### THE USANA DIFFERENCE

Carefully formulated by a team of nutritional-science experts using safe levels of the purest ingredients, and made to the same high standards as pharmaceutical products, **BabyCare Prenatal Chelated Mineral** provides excellent potency and quality. It is also formulated with additional minerals, such as selenium, chromium, and manganese, which may not be found in other prenatal supplements. Make sure to complement **BabyCare Prenatal Chelated Mineral** with **Active Calcium™ Chewable**, as needed, to increase your daily calcium and magnesium intake to recommended levels (see page 32). When taken together with **BabyCare Prenatal Mega Antioxidant**, you will have balanced and comprehensive nutritional support for the health of your future family.\*

\*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.