EB-A7DR

Delayed Release

CHRONIC INFLAMMATION AND OSTEOARTHRITIS

The active ingredients in EB-A7DR work synergistically for the metabolic management of deficiencies associated with the pain and inflammation of osteoarthritis without compromising the body's immune system, unlike NSAIDs.

EB-A7DR

Turmeric curcumin 95%..... 750 mg
SAM-e (S-adenosyl methionine)..... 600 mg
Hyaluronic acid.....200 mg
Boswellia extract 65%.....100 mg
Hydrolyzed Type II collagen..... 40 mg
Bioperine®..... 5 mg

Dosage:
Adult dose is 3 capsules daily or as directed by physician.

Each vegan capsule is allergen and dye free.
Actual product size and color may vary.

Therapeutic Active Pharmaceutical Ingredient Guide

ACTIVE INGREDIENT	DESCRIPTION
Turmeric curcumin 95%	– Inflammation, pain, and stiffness
SAM-e (S-adenosyl methionine)	– Inflammation, pain, and stiffness
Hyaluronic acid	– Inflammation; slows the progression of osteoarthritis
Boswellia extract 65%	– Inflammation and pain
Hydrolyzed Type II collagen	– Pain and stiffness
Bioperine®	+ Absorption of curcumin

+ increase – decrease

Manufactured in compliance with current Good Manufacturing Practices [cGMP].
*Products feature delayed-release capsules for targeted delivery to promote tolerability.

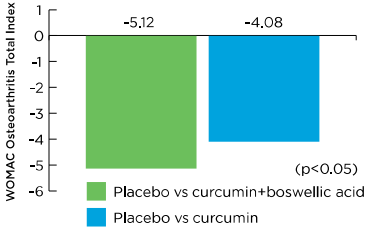
METABOLIC CORRECTION AND OPTIMIZATION OF PAIN AND INFLAMMATION ASSOCIATED WITH OSTEOARTHRITIS [OA]

Current osteoarthritis treatments rely on analgesics, NSAIDs, and cortisone, which manage pain and inflammation but have a wide range of adverse effects, drug interactions, and contraindications, and fail to restore the imbalances that underlie OA pathogenesis.[36]

WOMAC Total Score Comparisons

Efficacy and safety of curcumin and its combination with boswellic acid in osteoarthritis: a comparative, randomized, double-blind, placebo-controlled study.[36]

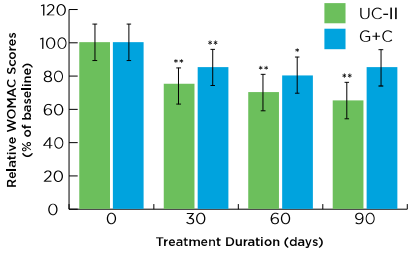
Twelve-week use of curcumin (500mg) or its combination with boswellic acid (350mg/150mg) reduces pain-related symptoms in patients with OA. Curcumin in combination with boswellic acid is more effective.



Safety and Efficacy of Undenatured Type II Collagen

Safety and efficacy of undenatured type II collagen in the treatment of osteoarthritis of the knee: a clinical trial.[37]

The current study indicated that type II collagen was found to be more effective than glucosamine and chondritin in reducing WOMAC scores (33% vs. 14%) after 90 days.

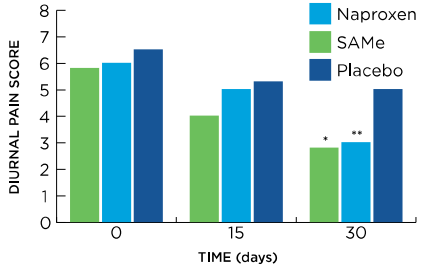


Changes in WOMAC scores at Day 90 from baseline. WOMAC scores from each treatment group were compared to baseline value at specified time points. Each bar represents mean ± SEM. *p<0.05, **p<0.005 indicate significant difference from baseline.

Diurnal Pain Score Comparisons

Double-blind multicenter study comparing SAMe, naproxen, and placebo in the treatment of degenerative joint disease.[38]

In the current double-blind study comparing SAMe, naproxen, and placebo, SAMe has been shown to possess clinically important analgesic activity in patients with hip and knee osteoarthritis.

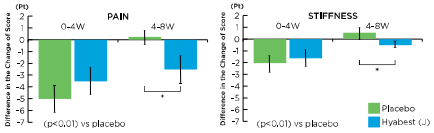


Multiple studies have demonstrated SAMe to be as effective as NSAIDS with fewer side effects in the management of symptomatic OA.[38-40]
*p <0.01 versus placebo; **p <0.05 versus placebo.

Hyaluronic Acid Effectiveness Study

An effectiveness study of hyaluronic acid in the treatment of osteoarthritis of the knee.[41]

High-purity hyaluronic acid (200mg) for eight weeks demonstrated efficacy in the reduction of pain in the knee joints as assessed by the changes in WOMAC.



Difference in the change of score for each category of the subjects with not less than 10 score of "pain."

BioPerine is an active component in EB-A7 that has been shown to increase the bioavailability of other nutrients by at least 30%.[42]