

MenoVive

BROAD-RANGE SUPPORT FOR MENOPAUSAL HEALTH AND COMFORT[†]

MenoVive is a dietary supplement providing clinically studied HMRLignan™ and Lifenol® hops extracts to help moderate common menopausal symptoms, including hot flashes, together with adaptogens to moderate occasional stress during the menopausal transition. This formula also supports breast, uterine, cervical and cognitive health.[†]



Supports the body's resilience when faced with occasional stress[†]



Supports menopausal comfort[†]



Promotes breast, uterine, cervical and cognitive health[†]



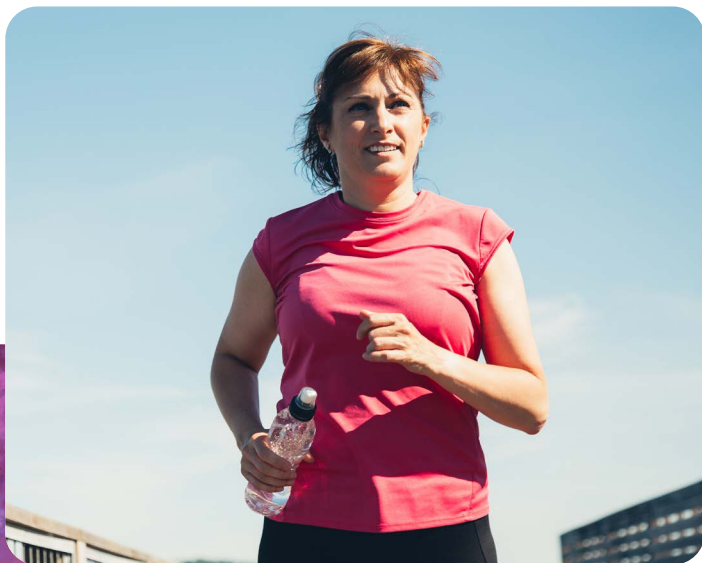
Supports relaxation during times of occasional stress[†]



Supports healthy estrogen-to-progesterone ratio[†]

WHO IS THIS SUPPLEMENT FOR?

- Women experiencing menopausal symptoms, including hot flashes



MECHANISMS OF ACTION

Ashwagandha, Rhodiola rosea and maca extracts are adaptogens that support the hypothalamic-pituitary-adrenal (HPA) axis to support relaxation during times of occasional stress.[†]

Preliminary evidence indicates that Rhodiola rosea, also an adaptogen, may support menopausal comfort by acting as a selective estrogen receptor modulator.[†]

Lignans have demonstrated supportive roles in moderating hot flashes as well as promoting breast, uterine, cervical, bone and cognitive health. Lignans belong to a class of compounds called phytoestrogens, which are plant-derived compounds with mild modulating effects on estrogen receptor function. When consumed orally, gut bacteria convert lignans into enterolignans, such as enterolactone. HMRLignan™ contains the lignan 7-hydroxymatairesinol, a precursor to enterolactone, which supports a healthy estrogen-to-progesterone ratio.[†]

Lifenol® hops extract contains a mild phytoestrogen, 8-prenylnaringenin (8-PN), which supports menopausal comfort, antioxidant defenses and bone health.[†]

[†]This statement has not been evaluated by the Food & Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.

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RESEARCH HIGHLIGHTS†

In a 16-week randomized, double-blind, placebo-controlled, cross-over study, 36 menopausal women receiving 100 mg standardized Lifenol® hops extract showed significant reductions in menopausal discomforts, with notable improvements in the Kupperman Index and Visual Analogue Scale after 16 weeks, suggesting its potential for relief of mild vasomotor symptoms.¹

In a 12-week randomized, double-blind, placebo-controlled study with 67 menopausal women who received Lifenol® hops extract (100 or 250 mg/day, providing 100 ug or 250 ug 8-prenylaringenin/day, respectively) exhibited significant reduction in menopausal discomforts after 6 weeks compared to placebo. Both doses led to significant reductions in mean self-reported hot flash scores (Figure 1).¹

In a clinical study involving 22 postmenopausal women, supplementation with 36 mg/d or 72 mg/day of HMRlignan for 8 weeks led to a significant reduction in weekly hot flashes (Figure 2). In the group receiving 72 mg, there was a 55% reduction in the number of hot flashes after 4 weeks, and these subjects continued to report a 50% reduction in hot flashes through the 8-week duration of the study. Further, the frequency of intense hot flashes decreased by 80% in the group receiving 72 mg/day after 8 weeks (Figure 2).³

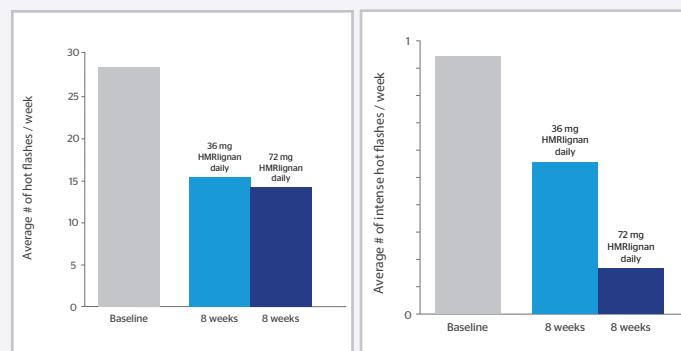


Figure 2. Supplementation with 36 mg/d or 72 mg/day of HMRlignan for 8 weeks reduced the number of weekly hot flashes (left). The group receiving 72 mg/day also experienced an 80% reduction in the frequency of intense hot flashes (right).³

In a clinical trial involving 130 participants, a standardized extract of *Withania somnifera* (Ashwagandha) (125 mg daily) for 60 days resulted in significant support for healthy stress responses.⁴

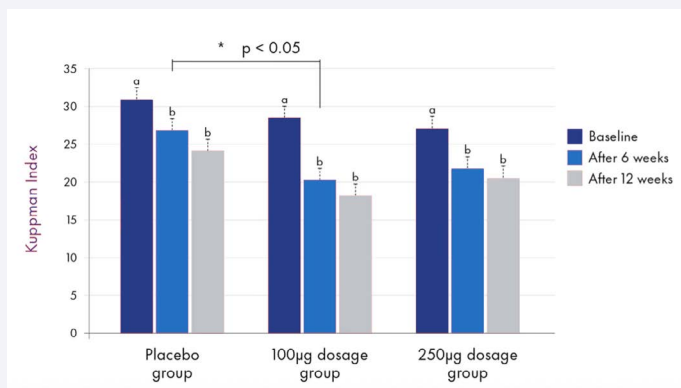


Figure 1. Supplementation with Lifenol® hops extract for 6 weeks significantly improved menopausal symptoms assessed via the Kupperman Index.²

Supplement Facts

1 capsule, twice daily, with meals.

Each (size 00) vegetarian capsule contains:

HMRlignan™ (containing 7-hydroxymatairesinol) (from Norway spruce knot wood)	36 mg
Lifenol® hops (<i>Humulus lupulus</i>) extract (female cone) (standardized to contain 0.15% 8-prenylaringenin)	42.5 mg
KSM-66 Ashwagandha® (<i>Withania somnifera</i>) extract (root)	125 mg
Maca (<i>Lepidium meyenii</i>) extract (tuber)	250 mg
Rhodiola (<i>Rhodiola rosea</i>) extract (root) (standardized to contain 3% total rosavins and 1% salidroside)	50 mg
Grape (<i>Vitis vinifera</i>) extract (seed) (standardized to contain 92% polyphenols)	50 mg
resVida® resveratrol (as trans-resveratrol)	12.5 mg
Other ingredients: vegetarian capsule (cellulose, water), hypoallergenic plant fiber (cellulose)	

Not to be taken by pregnant or lactating women.

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HMRlignan™ is a trademark of Linnea Inc.

Lifenol® is a trademark of Naturex.

resVida® is a trademark of DSM.

Women's Formulas



MenoVive	Quantity	Order Code
	60	MOV6

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POTENTIAL INTERACTIONS

Losartan. Rhodiola may interfere with CYP2C9-mediated metabolic activation of losartan, which could reduce drug efficacy. In a study of 13 healthy subjects, daily use of Rhodiola rosea resulted in a 21% decrease in circulating levels of the active metabolite of losartan following a single oral dose of the medication.⁶

Thyroid hormone medications. Limited evidence indicates that ashwagandha root extract may affect triiodothyronine (T3), thyroxine (T4) and thyroid stimulating hormone (TSH) levels. This could produce an additive effect if combined with levothyroxine or other thyroid hormone preparations.

To check whether a medication may have clinically significant interactions with [nutrients and] ingredients based on doses commonly used in dietary supplements, visit our [Drug-Nutrient Interaction Checker](#).



REFERENCES

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