COMPLEMENTARY SUPPLY REQUEST FORM

Please indicate the samples you would like to receive.

NUMBER	PRODUCT PACK (25 SAMPLES/BROCHURES PER PACK)
_____	Omega-3
_____	CardioDaily (multivitamin)
_____	CardioSterol
_____	CardioTea
_____	CardioGT (glucose tolerance)
_____	Patient Brochure (with order form)
_____	Acrylic Brochure Holder (for countertop)

Please return this form to:

FAX: (816) 753-0688

MAIL: CardioTabs
3101 Broadway, Suite 305
Kansas City, Missouri 64111

E-MAIL: info@cardiotabs.com or call 1-800-811-1007 to place your order by phone

Please send to:

Company: _____

Attention: _____

Address 1: _____

Address 2: _____

City, State, ZIP: _____

Telephone _____ Fax: _____

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For a Healthy Heart

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The Clinician's Report
CardioTabs
For a Healthy Heart

Shedding Some Light on Fish Oil Claims

Shedding Some Light on Fish Oil Claims

All fish oil is not the same.

Fish oil varies in quality and concentration of essential fatty acids (DHA and EPA) based on the manufacturing process and type of fish selected for use. The best source of fish oil comes from sardines and anchovies, which are short-lived and low on the food chain. They also have the highest concentration of DHA and EPA, ranging from approx. 16%-21% EPA and 10%-16% DHA. Most of the sardines and anchovies used in quality fish oil are caught off the coast of South America, principally Peru. By contrast, salmon oil, which is usually produced from farm-raised salmon, is typically 6%-9% DHA. Larger fish, such as shark and tuna, are generally considered a poor choice for fish oil. Due to their longer lives, they have more time to absorb contaminants such as PCBs and heavy metals. Also, larger fish get their essential fatty acids second-hand by eating the smaller fish that subsist on algae, which is the original source.

The gold standard in manufacturing process is called molecular distillation, a refinement process for the concentration and purification of EPA and DHA from starter fish oil material. As in any distillation process, it is based on molecular weight fractionation. Molecular distillation is the only method that removes PCBs, heavy metals (such as methylmercury, lead, and cadmium), DDT, and other contaminants to below detectable levels for human consumption. This process is also used to increase the concentration of DHA, EPA, and total omega-3s in fish oil to 50% and higher, which is well above the standard 18% EPA and 12% DHA found in most fish oils on the market today.

GOED Voluntary Monograph

Because of concerns over quality and inconsistency in fish oil products, the major manufacturers came together a few years ago under the auspices of the Council for Responsible Nutrition (CRN), a Washington, D.C.-based trade association, for the purpose of establishing quality standards for the industry. In 2002, the group issued their first Voluntary Mongraph establishing quality standards for oxidation and purity of fish oil. In 2006, the group formed the Global Organization for EPA and DHA (GOED) and, in March of that year, issued a final version, which expanded the standards and set assay requirements to make sure everyone was following the same testing protocols.

As a result of these efforts, the overall quality of fish oil produced by manufacturers complying with GOED standards has vastly improved in recent years. As evidence of this progress, ConsumerLab.com conducted tests on 50 fish oil products in 2008, finding all were free from heavy metal and other contamination. Moreover, the products, which contained between 16 mg to over 1,000 mg per serving, all met label claims for EPA and DHA, without any signs of spoilage. (CardioTabs requires and independently tests for compliance with these standards in its Omega-3 fish oil.)

A word about LOVAZA®

LOVAZA®, a registered trademark of Reliant Pharmaceuticals, a subsidiary of GlaxoSmithKline, markets a prescription formulation of omega-3 containing 465 mg/g
EPA and

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375 mg/g DHA, which is one of the highest concentrations available. In 2004, the FDA approved LOVAZA® capsules as a lipid-lowering agent to be used in conjunction with diet for the reduction of severe hypertriglyceridemia in adults. Undoubtedly, Reliant spent millions to gain FDA approval for this claim. Because the American Heart Association recommends EPA and DHA intake of 2-4 g/day for this condition, patients have to take fewer LOVAZA® capsules than they would with lower concentrated products.

In a recent review paper published in the Journal of the American College of Nutrition, authors affiliated with Reliant make a case for the superiority of LOVAZA® primarily based on its having gone through FDA approval. As a pharmaceutical, LOVAZA® is held to FDA's "good manufacturing practices" (GMPs), which the authors claim are superior to the GMPs followed by supplement manufacturers under The Dietary Supplement Health and Education Act (DSHEA).

CardioTabs is constantly working to provide the highest quality Omega-3 Fish Oil at an affordable price for your patients.

Regulatory changes will require all dietary nutritional/herbal products to be manufactured under FDA GMPs by June 2009. However, most suppliers are already complying with these requirements. Industry manufacturers claim the difference is primarily in paperwork, not in the quality of the manufacturing process. Reliant did have to perform clinical trials to prove the efficacy of LOVAZA® for the treatment of hypertriglyceridemia. Because nutritional products can only make structure function claims for their use as opposed to pharmaceuticals, which claim to prevent, treat, cure, mitigate, or diagnose disease, clinical trials are not required for the former. However, it is worth noting that the real difference between LOVAZA® and other high quality fish oil, such as CardioTabs, is in the concentration, not the quality of the products.

It comes down to cost vs. convenience. Efforts to market the use of costly prescription formulation as a preventive is not supported by an examination the benefit.

A word about "Pharmaceutical Grade"

Many fish oil products now claim to be "pharmaceutical grade". Please note that this is marketing terminology having no accepted meaning or definition. Arguably, pharmaceutical grade would imply production in accordance with FDA GMPs. However, the term is not recognized by any standardization authorities, such as the United States Pharmacopeia (USP). Anyone can, and many do, make this claim without any objective basis to do so.

A final word about CardioTabs Omega-3 fish oil

We are extremely proud of the quality and efficacy of our molecularly-distilled omega-3 fish oil. Each 550 mg softgel contains 350 mg of total omega-3 including 235 mg of DHA and 90 mg of EPA. This ratio is important because most commonly consumed oily fish, such as salmon, have DHA to EPA ratios of 2:1 whereas most standard fish oils have a ratio of 2:3. CardioTabs fish oil is intended to come as close as possible to what would be found in a Mediterranean diet rich in oily fish. In addition to meeting all GOED monograph standards, CardioTabs added lemon flavor and enteric-coated our softgel capsules to virtually eliminate the common complaint of fishy aftertaste or burps. Also, the higher concentration means they are a smaller size and easier to swallow. CardioTabs is constantly working to provide the highest quality at an affordable price for your patients.

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with Seasonal Affective Disorder, as well.

With all the advances we have made in medicine over the past 20 years, it is disturbing to know that Vitamin D deficiency and its' disease states are once again on the rise in this country. Even rickets (weakening of bone in children) and osteomalacia (vague aches, pains and weakening of bones in adults) are back on the rise. Researchers are also discovering strong links between Vitamin D deficiency and fibromyalgia.

Fibromyalgia was basically unknown until about 15-20 years ago. Sypmptoms of fibromyalgia include muscle pain and weakness. The condition is usually diagnosed when providers can't find anything else to explain the vague muscle and bone aches. There is no specific test to confirm a fibromyalgia diagnosis.

Guess what folks? Check your Vitamin D levels. Michael F. Holick, PhD, MD, Professor of Medicine, Physiology and Biophysics, Director of the General Clinical Research Center, Director of the Vitamin D, Skin and Bone Research Laboratory, Director, and Biologic Effects of Light Research Center at Boston University Medical Center, reports that between 40-60% of people who come to his clinic with fibromyalgia actually have Osteomalacia due to Vitamin D deficiency. There's a lot to be learned from this. Holick recommends everyone get at least 10-15 minutes of raw exposure to the sun two to three times per week. More time may be needed for those with very dark skin or for those who are obese. The key is not to burn. Because it is impossible to get enough Vitamin D from the sun in areas north of Atlanta, GA during the fall to spring, I recommend the CardioDaily multivitamin with 2000 IU of Vitamin D3. I encourage you to check your own Vitamin D levels – you may be surprised!

VITAMIN D STATUS
What the Numbers Mean

Serum 25-Hydroxyvitamin D (ng/ml)	Vitamin D Status
< 10	Severe Deficiency
10-20	Deficiency
21-29	Insufficiency
> 30	Sufficiency
>150	Toxicity

Source: Lee, JH, O'Keefe, JH, et al. Vitamin D Deficiency and CV Risk. JACC. 2008:52:1949-56.

Where to Find Us

CardioTabs representatives plan to exhibit at the following medical meetings/conferences this year:

Heart Failure: The Path from Prevention to Recovery; Overland Park, KS; April 3-4, 2009

SCAN (American Dietetic Association); Phoenix, Arizona; April 17-19, 2009

American Osteopathic Association; New Orleans, Louisiana; November 1-5, 2009

American Heart Association Scientific Sessions; Orlando, Florida; November 15-19, 2009

If you would like to suggest an exhibit opportunity or would like to visit with a representative about our products, please call us at 1-800-811-1007 or send email to info@cardiotabs.com.

FOOD AND ACTIVITY JOURNALS NOW AVAILABLE

We are excited to offer Food and Activity Journals to you and your patients/clients. Food and Activity Journals are sold in packages of six with enough pages for about one year of journaling. They are about the size of your checkbook and are light and easy to use anywhere.

Research shows that people who keep track of their daily food intake and activities lose more weight and keep it off longer than those who do not. The CardioTabs Food and Activity Journal was developed with assistance from Joan O'Keefe, RD, author of The Forever Young Diet and Lifestyle. Users can record food and drink, hunger index, supplement usage, sleep and mood patterns, waist circumference and weight, as well as physical activity.

Call us at 1-800-811-1007 or send email to info@cardiotabs.com to request your free journal today!

CARDIODAILY - MORE OF THE D YOU NEED

Need more proof that CardioDaily is the best multivitamin for your patients? The chorus of pleas from experts to increase recommended intakes of Vitamin D continues to build. Recently, two consensus statements from experts in the field have called for an increase in suggested daily intake to 2,000 IU of Vitamin D3, for both adults and children. Not coincidentally this is the exact dose and variety of vitamin D in CardioDaily. University of California researchers issued one such call to action. "The consensus among UC scientists who signed this statement is that 2000 IU per day of vitamin D3, a form of vitamin D, is the appropriate intake for most adult Americans," said Anthony Norman, leader of the UC Scientist group.

In a review published in December's Journal of the American College of Cardiology (JACC), authors discuss Vitamin D deficiency (traditionally associated with bone and muscle weakness) as a risk factor for cardiovascular disease (CVD). A growing body of evidence links low vitamin D levels to common CVD risk factors such as hypertension, obesity and diabetes, as well as major cardiovascular events, including stroke and congestive heart failure.

"Vitamin D deficiency is an unrecognized, emerging cardiovascular risk factor, which should be screened for and treated," said James H. O'Keefe, MD, one author of the review, cardiologist and director of Preventive Cardiology at the Mid America Heart Institute, Kansas City, MO and Unpaid Scientific Advisor to CardioTabs. "Vitamin D deficiency is easy to assess, and supplementation is simple, safe and inexpensive."

The authors of the JACC review issued practical recommendations to screen for and treat low vitamin D levels, especially in patients with risk factors for established heart disease or diabetes.

It is estimated that up to half of U.S. adults and 30 percent of children and teenagers have vitamin D deficiency, which is defined as a 25(OH)D level of <20ng/ml. Low vitamin D levels activate the renin-angiostensin-aldosterone system and, in doing so, predispose patients to hypertension and a stiffening and thickening of the heart and blood vessels. Vitamin D deficiency also alters hormone levels and immune function, which can increase the risk of diabetes, a major contributor to CVD.

Recent data from the Framingham Heart Study suggest patients with vitamin D levels below 15 mg/ml were twice as likely to experience a heart attack, stroke or other CV event within the next 5 years compared to those with higher levels. This risk remained even when researchers adjusted for traditional CV risk factors.

"Restoring vitamin D levels to normal is important in maintaining good musculoskeletal health, and it may also improve heart health and prognosis," said Dr. O'Keefe. "We need large randomized controlled trials to determine whether vitamin D supplementation can actually reduce future heart disease and deaths, but these won't be easy to get funded…, [because] there are no substantial financial incentives or patents to be had."

Vitamin D Basics

Vitamin D deficiency is more prevalent than once thought, and greater attention to its treatment is warranted, according to O'Keefe. For millennia, most of the body's vitamin D requirements come from sun exposure, but indoor lifestyles and use of sunscreen, which eliminates 99% of vitamin D synthesis by the skin, means many people aren't producing enough.

"We are outside less than we used to be, and older adults and people who are overweight or obese are less efficient at making vitamin D in response to sunlight," said Dr. O'Keefe. "A little bit of sunshine is a good thing, but the use of sunscreen to guard against skin cancer is important if you plan to be outside for more than 15 to 30 minutes of intense sunlight exposure."

Vitamin D can also be consumed through supplements and food intake. Natural food sources of vitamin D include
salmon,

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sardines, and cod liver oil and vitamin D fortified foods, including milk and some cereals.

Are You at Risk?

Major risk factors for vitamin D deficiency include: older age, darkly pigmented skin, increased distance from the equator, winter season, smoking, obesity, renal or liver disease and certain medications. Researchers say that it is nearly impossible for those living above 37 degrees latitude (North of Atlanta, GA) to get enough Vitamin D from the sun during the late fall, winter and early spring.

SUN WORSHIPERS TO SUN PHOBES: AN EDITORIAL

by Becky Captain RN, MSN, CLS, BC, FNP-C

What happened? One minute we were worshipping the sun, building solariums in our hospitals, gagging down cod liver oil, literally baking in the sun, and now in the 21st Century we are scared to death of sun exposure. Why is that? Unfortunately, over the past 20 years the relationship between sunlight and skin cancer has been blown out of proportion. As is typical of Americans, we go to extremes when it comes to our health. So from Sun Worshipers to Sun Phobes we went. Wearing long sleeves, long pants, floppy hats, and slathering every inch of our bodies with sunscreen every time we go out in the sun. The cosmetic arena of the pharmaceutical industry helped us in our beliefs, too, as the once anti-sunburn cream turned into the new cancer-prevention cream.

Make no mistake – sunburns are dangerous. But, sunburn is much different than a tan. The redness of sunburn is caused from increased blood flow to the skin so that it can attend to cells that have been damaged by the sun. When damaged enough, squamous and basal cells in the skin cannot repair themselves. They die off so that they won't replicate in a mutated state and cause cancers. Severely damaged melanocytes stay alive, however. These cells replicate in a mutated way and present themselves later in life as cancer-melanoma. So the key here is not avoid the sun; but, to welcome the sun…just don't burn.

Let's look at the Skin Cancer facts (The UV Advantage 2003- Authors Holick and Jenkins):

Non-Melanoma (caused by long term sun exposure)

- Fewer than one-half of one percent die
- Claims 1,200 lives annually

Melanoma (seen more often in people who do NOT receive regular sun exposure)

- Comprises ten percent of all skin cancers
- 85% of skin cancer deaths are Melanoma
- Kills 7,000 annually

Yes, sunburn is very dangerous. But, let's compare the risk of moderate sun exposure with the risks for diseases that can be prevented by regular, moderate sun exposure:

Colon and Breast Cancers:

- 20-65% mortality rates
- Kill 138,000 annually

Osteoporosis:

- Affects 25 million Americans.
- Annually, 1.5 million people with osteoporosis suffer broken bones, which can be fatal when the person is elderly.

Research shows that sun exposure can reduce the risk of these cancers and osteoporosis.

The risk of sun exposure pales in comparison to the sun's benefits. Sun exposure can not only result in fewer cases of internal cancers (breast, ovaries, colon, prostate, stomach to name a few) but can reduce fractures from osteoporosis and reduce rates of depression associated

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