



Presents for your consideration:

PainX

- ◆ Reduction of pain and inflammation
- ◆ Recommended use for acute and chronic conditions

DL Phenylalanine (DLPA): has putative antidepressant and analgesic (pain relieving) properties. Pain reduction may occur by limiting enkephalin degradation by the enzyme carboxypeptidase A. The LPA portion acts as a precursor to the synthesis of norepinephrine and dopamine. This effect may explain DLPA's putative antidepressant activities. **DLPA is contraindicated in those with phenylketonuria, and those taking nonselective MAO inhibitors.**

Boswellia: has been used in traditional Indian medicine for chronic rheumatic inflammation. Boswellic acids have been shown to inhibit 5-lipoxygenase the enzyme in leukotriene biosynthesis. It is this property along with its ability to inhibit both the classical and alternative complement pathways that accounts for its anti-inflammatory properties.

Curcumin: the yellow pigment from the plant *Curcuma longa*, has been used traditionally to treat sprains and inflammation. Studies show that curcumin inhibits leukotriene synthesis, platelet aggregation, neutrophil inflammatory response, blocks activation of NF Kappa B and promotes fibrinolysis. Curcumin may potentiate endogenous corticosteroids, thus having indirect anti-inflammatory actions as well. Curcumin was as effective as cortisone or phenylbutazone in models

of acute inflammation, but only half as effective in chronic models. However, while phenylbutazone and cortisone are associated with significant toxicity, curcumin displayed virtually no toxicity.

Pain X	Amounts per serving
Serving size	3 capsules
Number of servings per container	30
DL Phenylalanine	200 mg
Boswellia PE 65%	200 mg
Curcumin PE 95%	200 mg
Bromelain 2'400 BDU	200 mg
White Willow PE 15%	300 mg
White Willow Bark	500 mg
Guggul PE 2.5%	100 mg
Bioflavonoids 50%	100 mg
Ginger PE 5%	100 mg
Papain	100 mg
Trypsin 1:75	100 mg
Rosemary PE 4:1	100 mg
Alpha Chymotrypsin 1:25	3 mg
Homeopathic Base	10 mg
Suggested Dose: As a dietary supplement, take 1-2 capsules without food three times per day or as directed by a health care professional.	

Bromelain: was introduced as a medicinal agent in 1957, and since that time over 400 scientific papers on its therapeutic applications have appeared. Bromelain has been reported in these studies to exert a wide variety of beneficial effects, including reducing inflammation in cases of joint disease, sports injury or trauma, and preventing swelling after trauma or surgery. Bromelain selectively stimulates the production of the anti-inflammatory Prostaglandin E₁ and inhibits the production of the pro-inflammatory Prostaglandin E₂.

Note: Bromelain may enhance the anticoagulant activity of such drugs as warfarin and aspirin.

White Willow Bark: is traditionally used to treat pain. The efficacy of this botanical is due mainly to the proportion of salicin present. The salicin which is a precursor to salicylic acid works as an antipyretic, antiphlogistic and as an analgesic.

Guggal: has been used traditionally for inflammation of the mouth and pharynx. Currently guggal is recommended for chronic inflammatory conditions.

Bioflavonoids: have been shown to possess antioxidant, anti-inflammatory, anti-allergic, and vasoprotective actions. Hesperidin appears to inhibit phospholipase A2, lipoxygenase and cyclo-oxygenase inflammatory mediators as well as inhibit histamine release.

Ginger: inhibits platelet thromboxane formation, lipoxygenase, Arachidonic acid metabolism, leukotriene and inflammatory prostaglandin production. Ginger has anti-inflammatory actions. In one small study, consisting of 10 patients, complaining of chronic muscular pain and discomfort, ginger relieved the pain and swelling in 100% of the patients. These patients were evaluated for periods ranging from 3 months to 2.5 years.

Rosemary: has a traditionally been recommended for muscular rheumatism. Rosemary has antioxidant actions.

Papain, Trypsin and Alpha Chymotrypsin: are proteolytic enzymes. Administration of proteolytic enzymes may speed healing of injuries. Proteolytic enzymes have allowed athletes to return to performance sooner than control groups. Chymotrypsin, and trypsin have been shown to reduce edema and inflammation.

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These statements have not been evaluated by the Food and Drug Administration. These products are not intended to diagnose, treat, cure, or prevent any disease.

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