

A STEP UP IN COQ10 SUPPLEMENTS!

Benefit	Ubiquinol Prime with Kaneka Ubiquinol	CoQ10 (Ubiquinone)
Superior bioavailability	✓	
Replenishes Ubiquinol in your body to protect and provide cellular energy for the heart	✓	
Functions as an antioxidant to protect cells from free-radicals	✓	
May reduce blood pressure for additional protection against heart disease	✓	✓
Required for 95% of your cellular energy production	✓	
Supports anti-aging by protecting cells from the free-radical damage	✓	
Naturally regenerates other antioxidants, such as Vitamins A, C and E	✓	
Replaces CoQ10 levels depleted by statins	✓	✓



INTRODUCING

UBIQUINOL PRIME



with Kaneka QH™

In 2007, Kaneka Nutrients developed Kaneka Ubiquinol®, making ubiquinol available in supplement form for the first time. Studies suggest that Kaneka Ubiquinol® has superior absorption and can replenish the normal CoQ10 plasma concentration. In several studies, Kaneka Ubiquinol® was shown to increase ubiquinol levels in the blood by an average of four times among healthy people taking 150-300 mg per day. In a healthy adult, 95 percent or more of the total CoQ10 in the body is in the ubiquinol form. In addition, ubiquinol is required for 95 percent of cellular energy production by cellular mitochondria and is found in every cell in the body. The highest concentration of this nutrient is in the heart. Taking a ubiquinol supplement helps to maintain healthy, natural levels of ubiquinol in the body and prevents oxidative stress and damage from free radicals. The ubiquinol form of CoQ10 is beneficial for people who may have increased needs for CoQ10 or who are at high risk for decreased conversion of ubiquinone to ubiquinol, such as those on statins or other CoQ10 depleting medications, older individuals, and those with certain health conditions, especially heart disease.

- **60 mg of Kaneka Ubiquinol® per softgel**
- **Ubiquinol is the fully active form of CoQ10**
- **Superior absorption**
- **Supports cellular energy production**
- **Soy free**
- **Softgels are vegetarian** (not vegan due to white beeswax)

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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.



**ANABOLIC
LABORATORIES**

Pharmaceutical Made Nutritional Products Since 1924

UBIQUINOL PRIME



with Kaneka QH™

Indications

- Promotes cardiovascular and brain health
- Is a key component in the body's energy production
- Helps protect against oxidative stress

Background and Application

Ubiquinol is a form of the essential nutrient coenzyme Q10 (CoQ10). CoQ10 occurs naturally in the body, and predominately high levels are found in the heart, liver, kidneys, and pancreas. It exists in our body in three forms: 1) fully oxidized (ubiquinone), 2) partially reduced, and 3) the fully reduced active form (ubiquinol). Ubiquinol is a lipid-soluble antioxidant, and is found in nearly every cell, tissue, and organ in plants and mammals. It is acquired through biosynthesis, the natural formation of chemical compounds in a living organism.

Mechanisms of Action

In mammals, energy production takes place predominantly in the mitochondria. Mitochondria are responsible for the production of nearly 95% of the energy your body needs for development, growth, and a robust metabolism. This energy production works in unison with ubiquinol, which actively protects cells from "free radicals" that can steal electrons and cause irreparable damage. As an antioxidant, ubiquinol naturally restores vitamin C and vitamin E in our body.

Ubiquinol and Statin Drugs

Statin drugs are very effective in lowering cholesterol; however, statins are indiscriminate and will also disrupt the synthesis of ubiquinol and a host of other essential nutrients and vitamins. Ubiquinol deficiency can cause fibromyalgia pain, fatigue, leg cramps, spasms, memory loss, and even liver problems. CoQ10 and ubiquinol are two of the most popular adjunct heart health supplements used by people taking statin medications.

Heart Health

In patients undergoing surgery for cardiopulmonary bypass, those receiving CoQ10 treatment were significantly less likely to require inotropic drugs after surgery and to develop ventricular arrhythmias. Also, a randomized controlled multicenter trial evaluated CoQ10 as adjunctive treatment in 420 patients with chronic heart failure. Long-term CoQ10 treatment was found to be safe, improve symptoms, and reduce major adverse cardiovascular events. In another study, the administration of CoQ10 to heart transplant candidates led to significant improvements in functional status, clinical symptoms, and quality of life.

Finally, improvement in plasma CoQ10 was correlated with both clinical improvements and improvement in left ventricular function in heart failure patients.

Brain & Neurological Health

Rodents treated with CoQ10 (both ubiquinone and ubiquinol forms) had significantly less formation of alpha synuclein aggregates, which is a major pathological hallmark found in Parkinson's disease patients.

Antioxidants & Aging

Individuals with liver disease demonstrate that as the level of oxidative stress increases, the ratio of ubiquinol to ubiquinone in the body declines. This is an indication that these types of physical states (hepatitis, cirrhosis, and hepatoma) particularly require ubiquinol. Also, research demonstrates that oxidative stress in diabetics may cause the conversion of ubiquinol to ubiquinone, the less active form. Finally, scientists found that aged subjects not only have reduced CoQ10 biosynthesis, but also their ability to convert ubiquinone to ubiquinol is diminished.

Side Effects / Precautions

Rarely, CoQ10 may cause mild gastrointestinal upset, vomiting, diarrhea or constipation. If pregnant or lactating, consult your physician before taking this product.

Drug Interactions

Patients taking blood thinning agents should consult their physician before taking this product.

Suggested Use

Take one or more capsules daily with food.

References

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6. Yamamoto Y, et al. Plasma ubiquinone to ubiquinol ratio in patients with hepatitis, cirrhosis, and hepatoma, and in patients treated with percutaneous transluminal coronary revascularization. *Biofactors.* 1999;9(2-4):241-6.

