

Natural Supplementation Recommendations For Fertility / Preconception / Pregnancy

Supplement	Brief Description of Action	Dose For Him	Dose For Her
Multi-Vitamin	Maxi Mult <i>optimal potency</i> multiple vitamin/mineral/trace mineral formula for pre-conception and fertility enhancement: 1) Supplies therapeutic dose antioxidant nutrients 2) Increases rate of conception 3) Decreases congenital abnormalities.	3 capsules, 3 times a day with meals	3 capsules, 3 times a day with meals
Antioxidant	Maxi Flavone broad-spectrum herbal antioxidant formula decreases Radical Oxygen Species (ROS), lowers TNF- α , excess NK cell activity and inflammation. In men, ROS decrease sperm motility and concentration. In women, ROS are detrimental to both natural and assisted fertility.	1 capsule, two times a day with meals	1 capsule, one to two times a day with meals
EPA/DHA (fish oil)	Maxi Marine O-3 is ultra-pure, ultra high potency fish oil. EPA/DHA (which occur together in fish oils) decrease NK cell activity. EPA decreases TNF-alpha. Fish oil is anti-inflammatory.	1 or 2 caps, once a day with a meal	1 or 2 caps, once a day with a meal
Flavonoids	Maxi Greens is a Complete Green Food / Flavonoid / Phytonutrient-Rich Daily Herb Formula containing the same flavonoid herbs found in Maxi Flavone in addition to green food "Super Foods" such as wheat grass.	3 Capsules 2-3 times per day. (6-9 caps per day with meals).	3 Capsules 2-3 times per day. (6-9 caps per day with meals).
Mitochondrial Optimizer	Mitochondrial Energy Optimizer not only protects delicate cellular structures and enables cells to perform life-sustaining metabolic processes it also helps generate new mitochondria.	2 caps twice daily, preferably early in the day or as recommended by Dr. Braverman	2 caps twice daily, preferably early in the day or as recommended by Dr. Braverman
Melatonin	Melatonin improves oocyte quality and fertilization rates.	as recommended by Dr. Braverman	3-6mg at bed time
Myo-Inositol	Myo-inositol has found effective for PCOS-related causes of infertility and some non-PCOS egg quality improvement.	N/A	Daily dose of myo-inositol for improving egg quality is 2-4 grams per day. This can be taken as 2 grams, once or twice daily.
N-Acetyl Cysteine	When used in Infertility treatment as an adjuvant to clomiphene citrate in infertile patients with PCOS, NAC treatment results in higher ovulation and pregnancy rates, lower miscarriage rates and higher live birth rates.	N/A	600 to 1,200mg per day
DHEA Sublingual	DHEA improves ovarian function, increases pregnancy chances and, by reducing aneuploidy, lowers miscarriage rates. DHEA also appears to improve ovarian reserve.	50 mg DHEA per day	25 mg DHEA per day
Energizing Iron	Heme iron is the easiest-to-assimilate form of iron and helps build blood faster than taking many-times-higher doses of non-heme iron. Unlike elemental iron, it is not constipating.	Not recommended unless patient is clinically iron deficient	3-6 caps a day with meals. 2 caps of Energizing Iron is equivalent to 25mg of elemental iron
Vitamin K2	Vitamin K2 is a blood clotting factor that may be recommended for heavy menstrual cycles.	Not recommended unless patient is clinically deficient	1 or 2 capsules, once a day with a meal

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CoQ10	CoQ10 is a naturally-occurring antioxidant. It is vitally involved in cellular energy production. It is used in treating male infertility	200 mg a day to improve sperm kinetic features in idiopathic asthenozoospermia	50-100 mg per day for health maintenance
Vitamin D	Vit D decreases NK cell activity, and alters the TH1/TH2 cytokine ratio to anti-inflammatory. Its effects are very similar to the TH2 cytokine IL-10, one of the most important TH2 cytokines produced for the maintenance of pregnancy.	Daily adult dose range: 800-2,000 IU. Doses as high as 10,000 IU may be needed to normalize deficient vitamin D levels.	We recommend patients that require this therapy take between 2000 and 4000 IU /day.
Similase GFCF	Similase GFCF aids in the digestion of the proteins gluten and casein which can be inflammatory. Silent celiac disease should be considered in patients suffering from unexplained infertility. Even gluten-free / casein-free diets can contain hidden sources.		1-2 Capsules with each meal

Notes:

Doses provided here are general suggestions only – your specialist or Dr. Myatt may make different recommendations based on each patient's individual medical circumstance. Please follow all recommendations carefully and be sure to tell your doctor about any other supplements that you may be using.

Where doses are given as "capsules" and not specific amounts these doses are based on the capsule strength of the products recommended by Dr. Myatt. Full descriptions of these products **including full up-to-date medical and scientific references** can be found at www.DoctorMyatt.com.

If you choose to use products obtained elsewhere please be sure that the quality and potency are the same.

Please remember that in most cases you will continue your supplementation program after conception and up until approximately 2 weeks before delivery. You will also need to consider continuing supplementation after your baby arrives to ensure maximal maternal health and ability to support healthy breastfeeding.

Dr. Myatt is available for **Brief Telephone Consultations** to help you understand diet and supplementation issues, and to help you understand how your supplement recommendations may apply to your unique situation. If you have any concerns about diet or supplements a Brief Consultation is definitely in order.

For detailed information about these supplements including their actions and full scientific references, or to conveniently order, please visit www.DoctorMyatt.com and navigate to the **Fertility Restore / Dietary Supplements** area on the left-hand navigation bar. You may also call toll-free 1 800 376 9288 to order.

You can obtain your supplements elsewhere but please be sure that you check the label to ensure that you are getting the same potency and quality.

Sub-standard supplements are not a "bargain" - they are a waste of money!