EnBraceHR® **Rx**

**EnLyte for Women**

Small Gel Cap | All-Natural | Root Cause Management

# INNOVATIONS IN **WOMEN'S MENTAL & REPRODUCTIVE HEALTH**

Women of All Ages and their HCPs, Desire Treatment Options Designed to Address their Unique Mental and Reproductive Health Needs Effectively and Safely

*References can be found at the end of this presentation*

## Clinically Proven Effectiveness for:

- Depression and Anxiety
- Including in and Around Pregnancy
- PMS/PMDD & Menopause
- High or Low Risk Prenatal Vitamin

EnBrace HR Small Gel Cap

# INGREDIENTS

"EnBrace HR contains the exact clinically recommended vitamin coenzymes, mineral cofactors and omegas needed to normalize uterine and CNS intracellular methylation for normal mental and reproductive clinical outcomes."

Towny Robinson, CEO JayMac Pharmaceuticals
Inventor of EnBrace HR

**Most Diverse Natural Folates: FDA 15mg DFE**

| | |
|---|---|
| L-Methylfolate Magnesium | 7mg |
| Folinic Acid | 2.5mg |
| Folic Acid | 1mg |

**B Vitamins in their Bioactive Coenzyme Form**

| | |
|---|---|
| B12 (Adenosylcobalamin) | 50mcg |
| B6 (Pyridoxal-5-Phosphate) | 25mcg |
| B1 (Thiamine Pyrophosphate) | 25mcg |
| B2 (Flavin Adenine Dinucleotide) | 25mcg |
| B3 (Nicotinamide Adenine Dinucleotide) | 25mcg |
| Piperine (B Vitamin Bioenhancer) | 500mcg |

**Minerals in their Bioactive Cofactor Form**

| | |
|---|---|
| Magnesium Ascorbate | 24mg |
| Magnesium L-Threonate | 1mg |
| Zinc Ascorbate | 1mg |
| Iron (Ferrous Glycine Cysteinate) | 1.5mg |

**Phospholipid Form – Brain Ready**

| | |
|---|---|
| PS-Omega-3 (Phosphatidylserine, EPA, DHA) | 20mg |

**Absorption Enhancer**

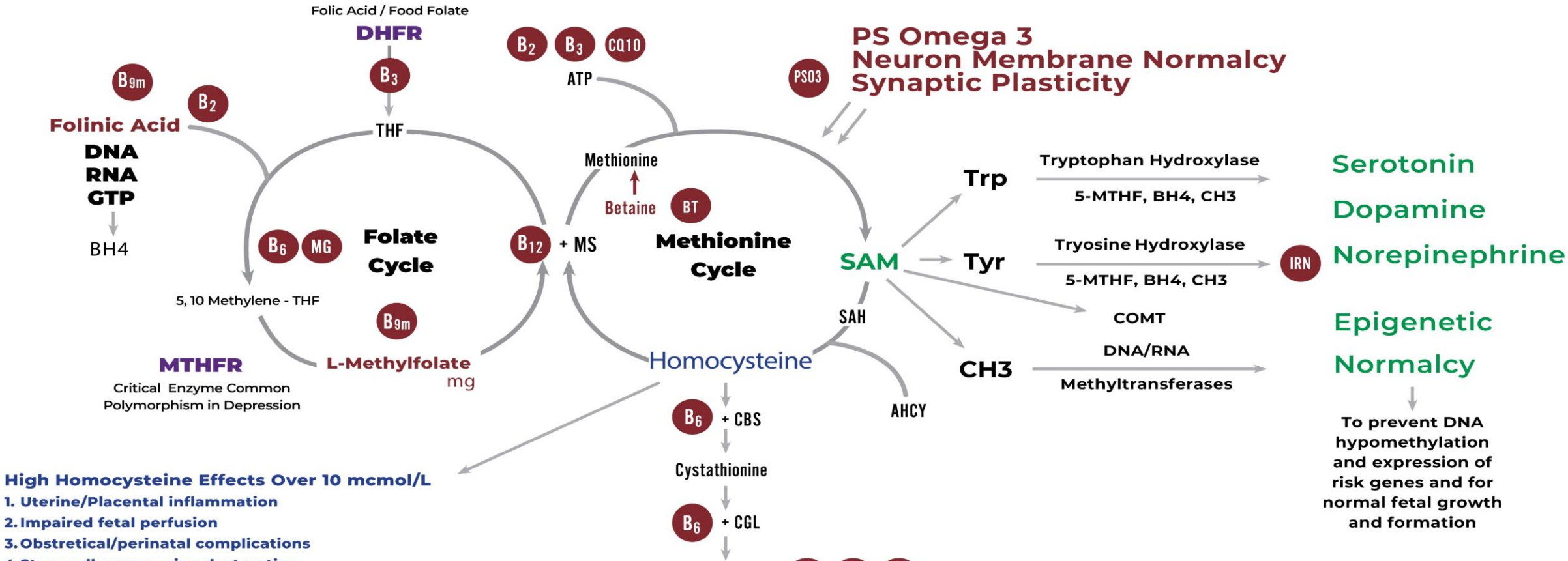
| | |
|---|---|
| Sodium Citrate | 10mg |

**Energizer**

| | |
|---|---|
| CoQ10 | 500mcg |

# Intracellular Biochemical Root Cause Methylation Chart

EnBrace HR Normalizes All Co-Enzyme/Cofactor Deficiencies and Methylation Disruption, No Matter the Cause and Converts to Normal Mental and Reproductive Health Outcomes Based on Well-Controlled Clinical Trials.




**High Homocysteine Effects Over 10 mcmol/L**

1. Uterine/Placental inflammation
2. Impaired fetal perfusion
3. Obstretical/perinatal complications
4. Stem cell suppression destruction
5. Small vascular toxicity
6. Impaired myelination

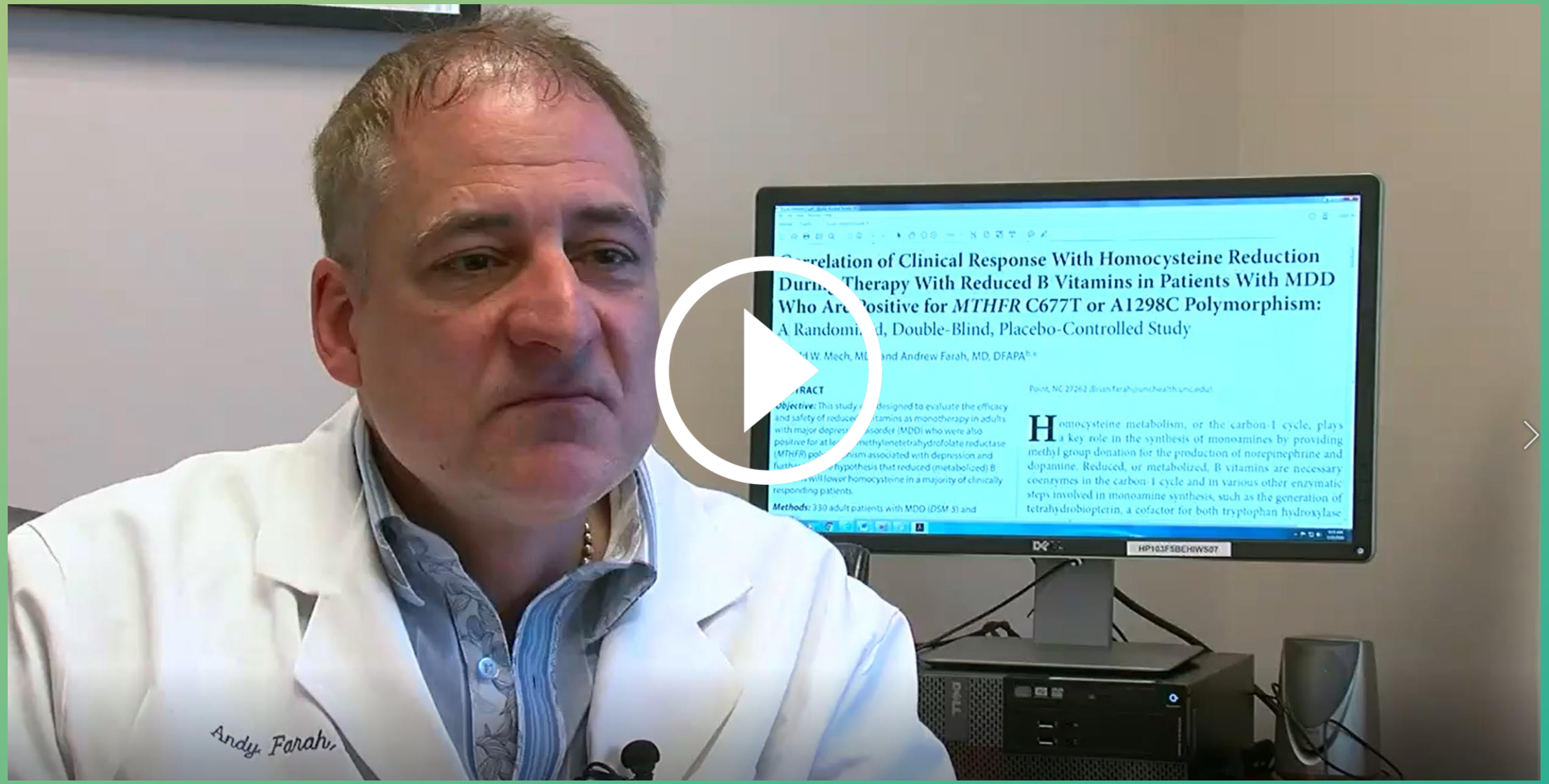
**NOTE:**

EnBrace HR Product Ingredients - Maroon

End Point Benefits - Green

*Kennedy, David O., B vitamins and the Brain: Mechanisms, Dose and Efficacy – A Review, Figure 2. The interlinked folate and methionine cycles.

# CLINCAL STUDY OVERVIEW



# THE JOURNAL OF CLINICAL PSYCHIATRY

## 330 ADULT PATIENT
## RANDOMIZED DOUBLE BLIND PLACEBO CONTROLLED STUDY

**OBJECTIVE:**
This 8-week study was designed to evaluate the efficacy and safety of EnLyte/EnBrace HR as monotherapy in adults with major depressive disorder (MDD) who were also positive for at least 1 methylenetetrahydrofolate reductase (MTHFR) polymorphism associated with depression and further test the hypothesis that EnLyte/EnBrace HR will lower homocysteine in a majority of clinical responding patients.

MAY 2016
Correlation of Clinical Response With Homocysteine Reduction During Therapy With EnLyte/EnBrace HR in Patients With MDD Who Are Positive for MTHFR C677T or A 1298C Polymorphism - Andrew Farah, MD

**1) Mean MADRS Symptom Score of EnBrace HR Versus Placebo**


**2) 30% Reduction in Homocysteine Levels (Compared to Placebo)**

**NO SIDE EFFECT WAS REPORTED AT GREATER RATE THAN PLACEBO**

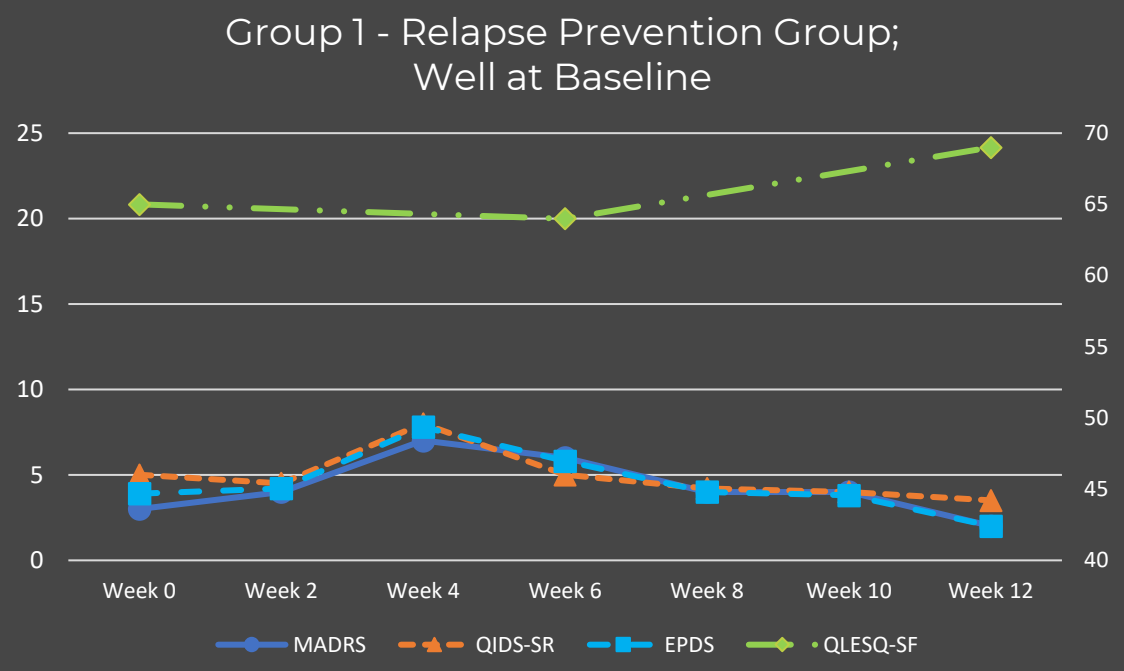
**ONSET OF ACTION: 2 WEEKS**

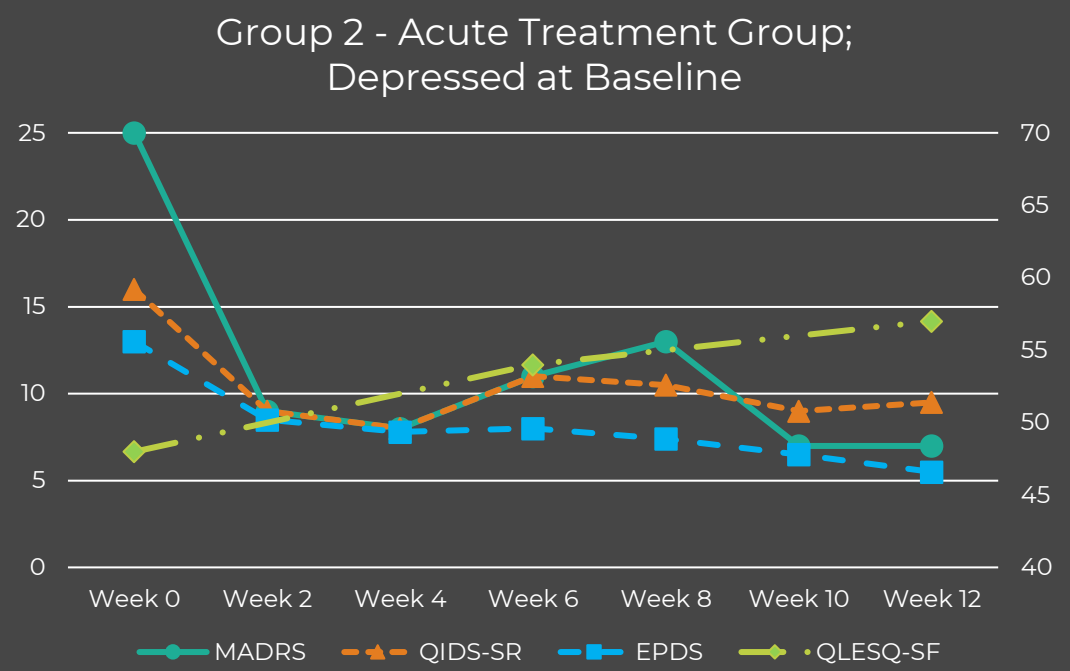
# ENBRACE HR STUDY

# EnBrace HR For The Treatment and Prevention of Depression in Women

## Trying to Conceive and During Pregnancy

Marlene P. Freeman, MD et al, Annals of Clinical Psychiatry February 2019




**CONCLUSION**

Study results suggest EnBrace HR is a novel and well tolerated intervention with efficacy for the prevention and treatment of depression among women planning pregnancy and who are pregnant.

Figure 1. The aim for Group 1 was to prevent depression relapse, and the aim for Group 2 was to improve depression symptoms, measured through several mood and quality of life questionnaires. Trends shown by group for the primary mood outcome measure, the MADRS (Montgomery-Asberg Depression Rating Scale) in dark blue; for secondary mood measures, the QIDS-SR (Quick Inventory of Depressive Symptomatology-Self Report) in orange and the EPDS (Edinburgh Postnatal Depression Scale) in light blue; and for a quality of life outcome, the QLESQ-SF (Quality of Life Enjoyment and Satisfaction Questionnaire -Short Form) in green. Group 1 experienced no significant changes in any of the four measures, and Group 2 experienced significant improvements in the mood questionnaires but not the quality of life questionnaire. All ANOVAs indicating significance are reported in Table 3.

## PMS
**(Premenstrual Syndrome)**
Mild/Moderate

## Menopause
Cyclic hormonal changes of the menstrual cycle causes fluctuations of serotonin levels leading to adverse symptomology
– Mayo Clinic –

## PMDD
**(Premenstrual Dysphoric Disorder)**
Severe (DSM-5)

**Tension/Anxiety, Depressed Mood – Irritability/Anger – Appetite Changes – Cravings – Insomnia – Social Conflict Withdrawal– Feeling overwhelmed – Hopelessness – Hot Flashes**

### Biochemical Wellness

EnBrace HR normalizes serotonin levels and is an effective, all-natural, safe, root cause monotherapy option or adjunct to SSRIs, oral contraceptives, NSAIDs, diuretics, and/or HRT in the prevention or treatment of PMS/PMDD/MENOPAUSE.

Dietary B Vitamin Intake and Incident of Premenstrual Syndrome. Manson et al. Am J Clin Nutr. 2011

### Clinical Result Example

A 17-year-old on Paxil for PMDD experienced side effects and withdrawal symptoms after discontinuing Paxil. She was hesitant to resume antidepressant medications after presenting again with PMDD depression, and a MADRS of 20. The patient elaborated she was “putting on a happy face”. She was prescribed EnBrace HR and within 4 weeks her MADRS dropped from 20 to 6.

Coenzyme Treatment of Childhood and Adolescent Depression: A Case Series. Farah et al. Clinical Psychiatry Vol 7 #5S3:93 April 2021

**“For the emotional dysregulation of PMS, PMDD, and Menopause we turned first-line to the natural, broad spectrum B vitamin coenzymes and mineral cofactor agent, EnBrace HR. This product has provided safe and effective relief for countless patients with female hormonal fluctuations or deficiency”**

Andrew Farah, MD
Attending Psychiatrist, Novant Health System, Winston-Salem, NC
Medical Director of Strategic Mental Health Interventions

EnBraceHR® **Rx**

## Provides the most diverse combination of folates and methylation vitamin coenzymes and mineral cofactors for maximum prevention of NTDs and other birth defects in low or high-risk pregnancies.

**An optimal serum folate level for birth defect prevention should be reached 4 weeks prior to conception, 50% of pregnancies are unplanned.**

### Mechanism of Cellular Action

Normalize impaired cellular “homocysteine/methionine” metabolism disorders than can lead to placental inflammation, impaired fetal perfusion, impaired nucleotide and DNA synthesis and faulty epigenetic expression.

# To Prevent or Reduce Risk For:

- All Neural Tube Defects
- Congenital Heart & Kidney Disorders
- Down Syndrome
- ADHD
- Autism Spectrum Disorders
- Orofacial Clefts
- Drug Related Birth Defects
- Pregnancy Complications
- Congenital Structural Malformation

# EnBrace HR Helps Eliminate the Risk for Adverse Pregnancy Outcomes, NTDs, and Other Birth Defects Associated with the effects of MTHFR Gene Variant

MTHFR gene variants prevent the production of the enzyme that converts folate to methylfolate leading to high homocysteine and low neurotransmitter production causing negative reproductive and CNS outcomes.

**60%** of women have the heterozygous form of MTHFR gene variant

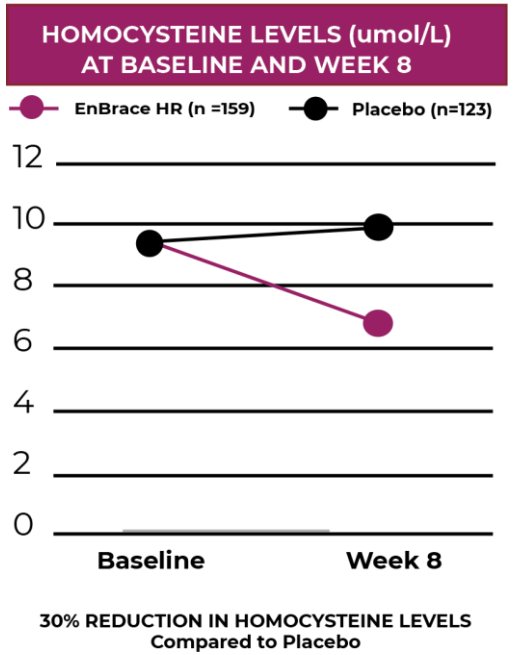
**25%** of women have the homozygous form of MTHFR gene variant

**50%** of folate related NTDs and other birth defects are linked to MTHFR

**85%** of depressed and addicted women have an MTHFR gene variant

## MTHFR Polymorphisms are Documented Risk Factors for these Adverse Pregnancy Outcomes:

- Miscarriage
- Perinatal/ Post-Partum Depression
- Pre-Term Delivery
- Low Birth Weight
- Pre-Eclampsia
- Placental Inflammation
- Impaired Fetal Perfusion
- Chromosomal Abnormalities




EnBrace HR is proven in a 330 patient, randomized, controlled trial in patients with an MTHFR variant to lower homocysteine 30% compared to placebo group.

Andrew Farah, MD et al.
Journal of Clinical Psychiatry, May 2016

# HOW TO PRESCRIBE

STEP 1

## USE OUR ONLINE PRESCRIBER FORM

Fill in prescriber and patient information and then hit “submit”

**CLICK HERE**

STEP 2

## WE WILL OFFER YOUR PATIENT THEIR FIRST 60 DAYS FOR $60

We will also provide them with the insurance steps and help determine the most cost-effective option moving forward

STEP 3

## IF IT’S COVERED ON INSURANCE, WE WILL CONTACT YOUR OFFICE WITH PRESCRIBING INFO

If your patient does not have coverage or has a high co-pay, we will offer our discounted cash-pay option for EnBrace HR. No further action is needed for your office.

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