



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



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

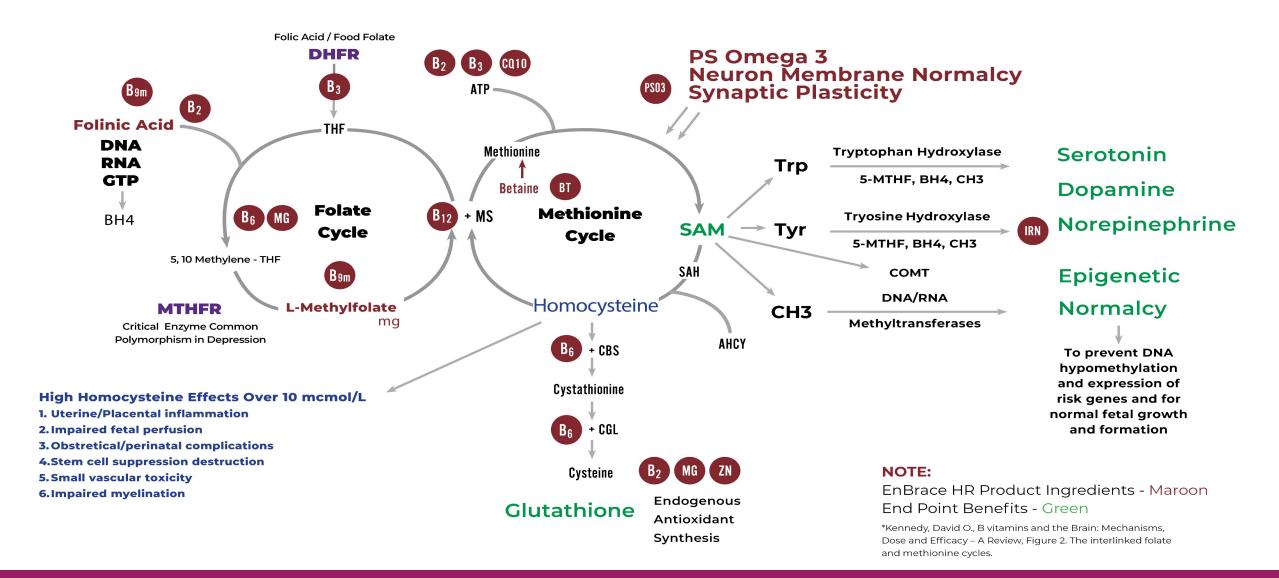
"EnBrace HR contains the exact clinically recommended vitamin coenzymes, mineral cofactors and omegas needed to normalize uterine and CNS intracellular methylation for normal mental and reproductive clinical outcomes."

Towny Robinson, CEO JayMac Pharmaceuticals Inventor of EnBrace HR

Most Diverse Natural Folates: FDA 15mg DFE L-Methylfolate Magnesium Folinic Acid Folic Acid Polic Acid	7mg 2.5mg 1mg
B Vitamins in their Bioactive Coenzyme Form	F O 100 0 01
B12 (Adenosylcobalamin)	
B6 (Pyridoxal-5-Phosphate)	
	25mcg
B2 (Flavin Adenine Dinucleotide)	25mcg
B3 (Nicotinamide Adenine Dinucleotide)	25mcg
Piperine (B Vitamin Bioenhancer) ————————————————————————————————————	500mcg
Minerals in their Bioactive Cofactor Form	
Minerals in their Bioactive Cofactor Form Magnesium Ascorbate ————————————————————————————————————	24mg
	24mg Img
Magnesium Ascorbate ————————————————————————————————————	
Magnesium Ascorbate Magnesium L-Threonate	lmg
Magnesium Ascorbate ————————————————————————————————————	lmg lmg
Magnesium Ascorbate Magnesium L-Threonate Zinc Ascorbate Iron (Ferrous Glycine Cysteinate)	lmg lmg
Magnesium Ascorbate Magnesium L-Threonate Zinc Ascorbate Iron (Ferrous Glycine Cysteinate) Phospholipid Form – Brain Ready	lmg lmg 1.5mg
Magnesium Ascorbate Magnesium L-Threonate Zinc Ascorbate Iron (Ferrous Glycine Cysteinate) Phospholipid Form – Brain Ready PS-Omega-3 (Phosphatidylserine, EPA, DHA)	lmg lmg 1.5mg
Magnesium Ascorbate Magnesium L-Threonate Zinc Ascorbate Iron (Ferrous Glycine Cysteinate) Phospholipid Form – Brain Ready PS-Omega-3 (Phosphatidylserine, EPA, DHA) Absorption Enhancer	lmg lmg 1.5mg 20mg

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.



CLINCAL STUDY OVERVIEW



THE JOURNAL OF CLINICAL PSYCHIATRY

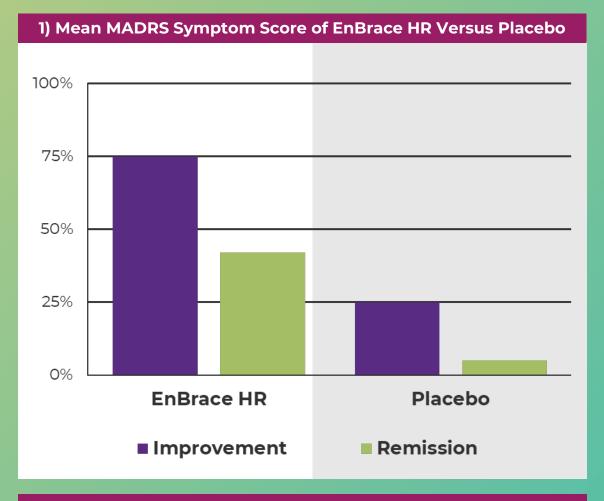
330 ADULT PATIENT RANDOMIZED DOUBLE BLIND PLACEBO CONTROLLED STUDY

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



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

www study included women with histories of MDD who were planning regnant <28 weeks. Group 1 participants were well (not in depressive episodes) and planned antidepressants for pregnancy. Group 2 participants were depressed at baseline. Primary bles included MDD relapse and depressive symptoms, verified with the Mini International is: Interview and the Montgomery-Asberg Depression Rating Scale (MADRS), respectively. folic acid metabolism and inflammation were collected.

» 1 participants (N=11; well at baseline) experienced no significant decreases in MADRS scores is of depressive relapse (27.3%; p=0.005) than expected when compared to historical controls. depressed at baseline) experienced significant improvements in MADRS scores (p=0.001), with improving >50% and one improving 33.3%. One adverse event occurred, a hospitalization for

Results suggest EnBrace HR is a well-tolerated intervention with potential efficacy for the id treatment of perinatal depression. Larger controlled trials are necessary.

uction

ssive Disorder (MDD) and Major Depressive Episodes (MDEs) in Women:

rs approximately twice as often in women compared to men. 12

gh risk for MDEs during pregnancy and the postpartum period.3

somen often discontinue standard antidepressant medications prior to or during pregnancy

few evidence-based alternatives to antidepressant medications for the treatment and prevention aring pregnancy, leaving pregnant women and clinicians with the clinical dilemma of weighing al exposure to medication against impact of untreated maternal depression.

suggests various folate forms including folic acid, folinic acid, and methylfolate may have asant effects. 3 13 These interconvertible foliate forms constitute the one-carbon cycle and are It to exert an antidepressant effect by impacting neurotransmitter synthesis. If

foliate must be converted to its active form, methylfoliate, for use in the body, polymorphisms I foliate methylation may limit the efficacy of foliate as an intervention targeting MDD. *** plate may be more readily absorbed in the brain than folate, and methylfolate has potential as a

iffoliate treatment in early trials has been found to induce significant improvement in depressive ms both when used as an adjunct to antidepressant therapy and when used as a monotherapy is a elated compounds reduce rates of neural tube defects and improve child neurodevelopments. estreet corresponded require rates or neural tube defects and improve child neurodevelopmental es, conferring benefits and minimizing potential risks of antidepressants during pregnancy?-18

e HR is a prescription prenatal/postnatal dietary management product that contains 5.53 mg L. foliate and other foliate derivatives (1 mg folic acid, and 2.2 mg folinic acid), optimal for a population

gh rates of polymorphisms that affect folic acid metabolism.

Group 1: Well at Baseline; Relapse Prevention Group

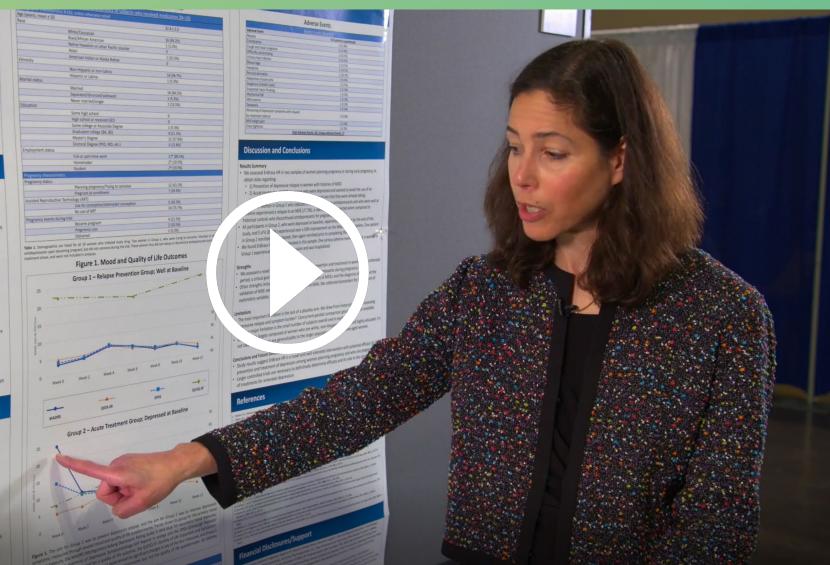
on Criteria

4DD as primary diagnosis flanning to conceive or <28 weeks pregnant at

Group 2: Depressed at Baseline; Acute Treatment Group

Inclusion Criteria:

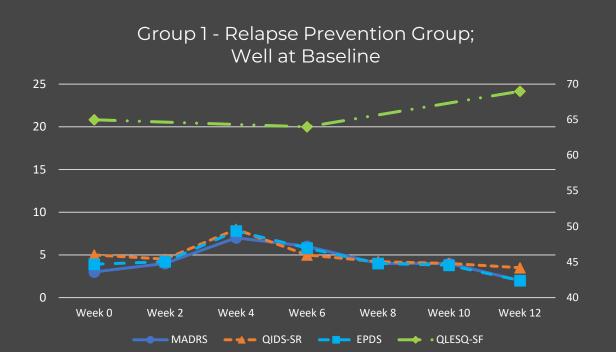
- MDD as primary diagnosis
- Planning to conceive or <28 weeks pregnant at



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.

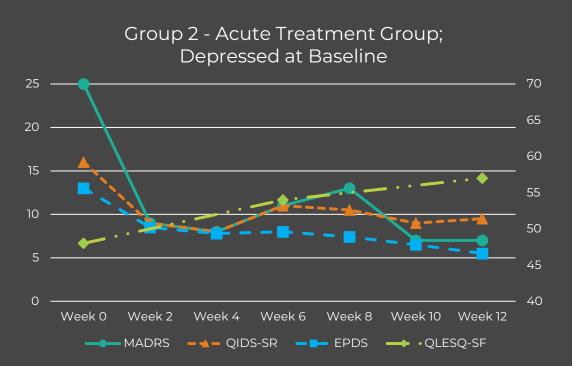


Figure 1. The aim for Group 1 was to prevent depression relapse, and the aim for Group 2 was to improve depression symptoms, measured through several mood and quality of life questionnaires. Trends shown by group for the primary mood outcome measure, the MADRS (Montgomery-Asberg Depression Rating Scale) 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 –



(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



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

of women have the homozygous form of MTHFR gene variant

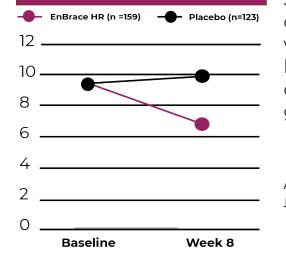
of folate related NTDs and other birth defects are linked to MTHFR

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

HOMOCYSTEINE LEVELS (umol/L) AT BASELINE AND WEEK 8



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

30% REDUCTION IN HOMOCYSTEINE LEVELS Compared to Placebo

HOW TO PRESCRIBE



STEP 2



SUBMIT OUR ELECTRONIC FORM

Visit www.enbracehr.com

- Click "Prescribe Now"
- Fill out the required information
- Click "Submit."

INFORM YOUR PATIENT

Let your patient know that a friendly customer care representative will contact them shortly to get started on EnBrace HR for just \$1 a day for the first 60 days.

WE TAKE CARE OF THE REST

A representative will contact your patient to arrange the initial **60-day trial for just \$60**, which will typically be shipped the same day.

REFILLS:

Our Medical Food Distributor will handle all refills to ensure uninterrupted care.

^{*}EnLyte and EnBrace HR will be available in your EMR, but the most cost-effective way to prescribe is by using the "Prescribe Now" button. This ensures your patients receive 60 days for just \$60, and the lowest price available moving forward.

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