IronCatch™

THE FIRST IRON-FREE TREATMENT FOR IRON DEFICIENCY

MADE IN ITALY
KNOW THE FACTS

Iron deficiency is the most common and widespread nutritional disorder in the world. As well as affecting a large number of children and women in developing countries, it is the only nutrient deficiency which is also significantly prevalent in Industrialized Countries.

The numbers are staggering: 2 billion people – over 30% of the world’s population – are anaemic, many due to iron deficiency, and in resource-poor areas, this is frequently exacerbated by infectious diseases. Malaria, HIV/AIDS, hookworm infestation, schistosomiasis, and other infections such as tuberculosis are particularly important factors contributing to the high prevalence of anaemia in some areas.

Iron deficiency distribution in the population

<table>
<thead>
<tr>
<th>Group</th>
<th>Iron Deficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescents</td>
<td>14%</td>
</tr>
<tr>
<td>Women of fertile age</td>
<td>23%</td>
</tr>
<tr>
<td>Endurance sports participants</td>
<td>15%</td>
</tr>
<tr>
<td>Women at the end of pregnancy</td>
<td>70%</td>
</tr>
</tbody>
</table>

Approximately 14% of all women of fertile age suffer from iron deficiency due to menstruation

<table>
<thead>
<tr>
<th>Group</th>
<th>Iron Deficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women who use oral contraception suffer from iron deficiency</td>
<td>13%</td>
</tr>
<tr>
<td>Women who do not use oral contraception suffer from iron deficiency</td>
<td>23%</td>
</tr>
<tr>
<td>Sterile women suffer from iron deficiency</td>
<td>28%</td>
</tr>
</tbody>
</table>

15% of people who participate in endurance sports suffer from iron deficiency

<table>
<thead>
<tr>
<th>Sport</th>
<th>Iron Deficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Athletes</td>
<td>25%</td>
</tr>
<tr>
<td>Cyclists</td>
<td>12%</td>
</tr>
<tr>
<td>Runners</td>
<td>8%</td>
</tr>
</tbody>
</table>

Iron in food: 6-7 mg/1000 Kcal (almost ubiquitous)
- Meat and fish: 40% heme, 60% non-heme iron
- Other food: 100% non-heme iron.

Generally, food is never deficient in iron!
TWO BILLION PEOPLE ARE ANEMIC

30% of the world population. Anaemia contributes to 20% of all maternal deaths. In developing countries every second pregnant woman and about 40% of preschool children are estimated to be anaemic.

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adverse reactions
iron therapy

- Proinflammatory cytokines
- Inflammation
- Lipid peroxidation
- Aggravate the situation of ulcerated areas

Oral administration
- Diarrhea
- Nausea / vomiting
- Hypercromia of feces
- Possible recrudescence of rheumatoid arthritis

Parenteral administration
- Hypersensitive reactions, even anaphylactic shock
- Myalgia
- Tachycardia
- Dysgeusia “alteration in taste”
- Strong prespiration

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By now the common oral supplementation with iron can produce only limited results, and visible not before 90-120 days.
IronCatch®

**THE FIRST IRON-FREE TREATMENT FOR IRON DEFICIENCY**

IronCatch® unique composition increases efficiency and magnitude of intestinal iron absorption by 3-5 folds. Making the iron content of normal daily food a rich source for iron.

It is made from specific fish oligosaccharides that promote absorption of non-heme iron. It also contains Vitamin C, Vitamin E, Zinc, Copper and Folic acid.

**Very fast action and fully effective within just 30 days**

**A product that is free from all side effects associated with products containing iron**

**The contraindications of oral treatments constitute the elective indication of IronCatch®**

- **Within 30 days:**
  - The only one that allowing significant results within 30 days. +50 - 70% on ferritinemia and sydermia in all patients affected by iron deficiency.
  - Within 120 days:
    - Significant increase in Hemoglobin.
  - Increases from 3 to 5 times the absorption of dietary iron (7mg iron / 1000 Kcal in food)
  - It works no matter what the diet is as both heme iron and non-heme iron are absorbed

- **Within 120 days:**
  - Significant increase in Hemoglobin.

- **Also in the following cases:**
  - Patients undergoing anti-cancer chemotherapy, suffering from cirrhosis, renal insufficiency, gastritis, gastric or duodenal ulcers, colitis, ulcerative colitis, Crohn’s disease, hemolytic anemia, celiac disease.
  - Ideal for patients suffering from IBD (inflammatory bowel disease)
  - Indispensable when following a vegetarian diet or taking part in endurance sports
  - Ideal in pregnancy
  - Also in the following cases:
    - Patients undergoing anti-cancer chemotherapy, suffering from cirrhosis, renal insufficiency, gastritis, gastric or duodenal ulcers, colitis, ulcerative colitis, Crohn’s disease, hemolytic anemia, celiac disease.
    - Just after one week, the subject will get dynamism and energy back
IronCatch® is ideal in:
- Gynaecology
  - Pregnancy
  - Lactation
  - Abundant menstruations
  - IUD

Also indicated for patients affected by iron deficiency with particular needs:
- Anticancer chemotherapy
- Thalassemia
- Renal insufficiency
- Hemolytic anemia
- Rheumatoid arthritis
- Spotmen
- Vegetarians

Gastroenterology
- Cirrhosis
- Crohn’s disease
- Gastritis
- Gastric ulcer
- Colitis
- Ulcerative rectocolitis
- Celiac disease

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INGREDIENTS PER 2 TABLETS
- 800 mcg Oligosaccharides of specific hydrolized fish cartilage
  - Rapid iron absorption demonstrated by in-vitro studies on Caco-2 cells
- 200 mcg Vitamin B9 (Folic acid)
  - Prevent megaloblastic anemia and abnormalities in fetal nervous system
- 90 mg Vitamin C
  - Promotes iron absorption and works as an antioxidant
- 30 mg Vitamin E
  - Powerful antioxidation properties
- 5 mg Zinc
  - Iron fixation
- 1.2 mg Copper
  - Iron fixation

Dosage (to be taken before meals):
- Attack: 2 tablets/day for 2 months
- Maintenance: 1 tablet/day

No side effects typical of the iron supplementation
Hydrolized fish cartilage is rich in glycosaminoglycans, which are source of oligosaccharides, able to promote iron absorption from food.

In a study on 49 patients of fertile age with iron deficiency anemia to evaluate the efficacy of IronCatch®


Another study to assess IronCatch® in patients suffering from IBD (Crohn’s disease and Ulcerative colitis) with iron deficiency and chronic anemia

World J Gastroenterol. 2007 March 14;13(10):1575-1578
Andrea Belluzzi, Giulia Roda, Francesca Tonon, Antonio Scolati, Alessandra Caponi, Anna Tuci, Aldo Roda, Enrico Roda. (A new iron free treatment with oral fish cartilage polysaccharide for iron deficiency chronic anemia in inflammatory bowel disease. A placebo controlled study in 16 patients with IBD, Crohn’s disease or Ulcerative colitis)