

Changing Brands Can Change Your Life™

Your Health is Your Most Valuable Asset

A Summary of the University of California Berkeley Landmark First-of-its-Kind Study of the Benefits of Long-Term Multiple Dietary Supplementation

Recently the School of Public Health of the University of California at Berkeley in collaboration with Shaklee completed a study on the effects of long-term (20+ years) consumption of Shaklee dietary supplements. This was a landmark study and clearly showed that people who took multiple Shaklee supplements over an extended period of time had markedly better health than either single multivitamin-mineral users or those who used no supplements at all. No study like the Landmark study had ever been done before. The results turned out to be even better than Shaklee researchers had anticipated.

In the nutrition field, no company has had as wide a variety of nutritional products available for as an extended period of time as Shaklee. Also, no company here-to-fore had been willing to risk funding a completely independent study on their products. When Shaklee was approached to fund and cooperate in an independent study on the long term affects of using their products, they had full confidence in their products and agreed to do so even though they had no control over the study, its analysis or the publication of the results.

Nutrition researchers had long wanted to do a study of this kind. Most nutrition research is on a single ingredient for a limited time. Nutritional ingredients in-balance work in harmony but an excessive amount of one alone upsets the balance and skews the results. For example, we know we can not survive without both water and oxygen in balance but we also know that we can not survive without water or with excessive water consumption and/or in an atmosphere without or with excessive oxygen. We need both in appropriate amounts.

The study was under the direction of Dr. Gladys Block, Ph.D., a renowned nutrition researcher and Professor of Epidemiology and Public Health Nutrition at Berkeley. Regardless of the eventual results, UC Berkeley had complete control of the study, data analysis and publication.

Once the study was conceived, Shaklee issued an invitation to its members who had been using multiple Shaklee's nutritional supplements for twenty years or more to volunteer to participate in the study. More than a thousand persons responded. From these some 278 completed both an extensive questionnaire and provided blood samples. The closest data available for any sort of comparison were from NHANES (the Nationwide Health and Nutrition Examination Survey), the largest and longest running national health and nutrition survey sponsored by the National Center for Health Statistics Data. From the NHANES group, 602 nonusers and 176 single

"The study results were very impressive and support the potential benefits of long-term use of dietary supplements." – Dr Gladys Block Ph.D., renowned nutrition researcher and Professor of Epidemiology and Public Health Nutrition, University of California at Berkeley.

multivitamin users were matched and selected for comparison. The specific brands and completeness of the vitamin-mineral supplements of the 176 are not known. The tables and bar charts below show some of the comparisons.

NUTRIENTS	No Suppl	Single Suppl	Shaklee Suppl
RBC folate (nmol/L)	646.7	891.1	1153.4
Retinol (µg/dL)	59.2	64.3	65.0
Ascorbic acid (mg/dL)	0.66	0.94	1.62
Alpha tocopherol (mg/dL)	1.1	1.4	2.9
Alpha carotene (µg/dL)	4.5	5.9	27.5
Beta carotene (µg/dL)	18.5	27.0	62.7
Ferritin (µg/dL) male	198.2	205.2	117.6
Ferritin (µg/dL) female	101.7	74.9	117.4

Blood nutrient levels generally increased with dietary supplement use. Blood levels for folate, vitamin C (ascorbic acid), vitamin E (as alpha tocopherol) and both alpha and beta carotene were consistently found to be at optimal levels in the Shaklee group. The table above shows the average results. To address the safety of long term use of a broad array of supplements, the investigators looked at and found healthy and safe blood levels of vitamin D (as Retinol) and iron (as ferritin) in the Shaklee group, nutrients for which high intakes have been associated with possible adverse effects. Women tend to be low in iron and anemic while men tend to have excess iron. The nutrient table above shows equal and optimal levels of iron for both men and women in the Shaklee group.

Several blood biomarkers are widely used as measures of coronary health – high HDL cholesterol, the total cholesterol to HDL ratio, low triglycerides, low homocysteine and low C-reactive protein (CRP), the latter a measure of low grade heart inflammation. Of note is the fact that none of the 278 Shaklee participants had an elevated CRP level greater than 3.0 mg/L, the value identified by the

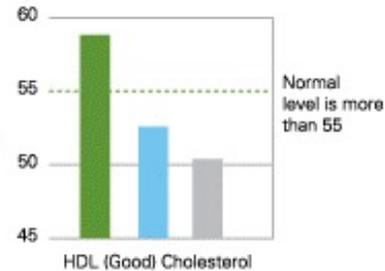
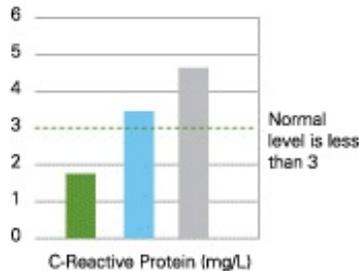
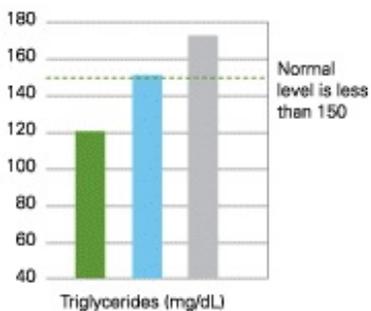
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We invite you to visit <http://aljeanread.myshaklee.com>,
www.aljeanread.com/Shak180Ref and
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American Heart Association as the beginning of high risk. The table below and the bar charts on the right show how Shaklee's long term multiple supplement users compared to the non-supplement users and the single vitamin-mineral users.

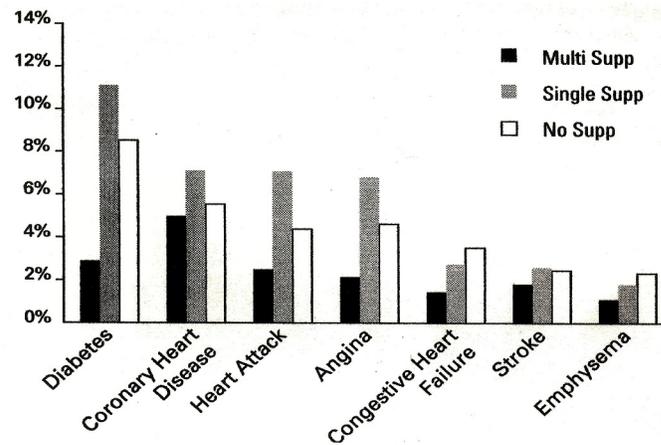
The lower bar chart on the right indicates the prevalence of disease among the Shaklee group compared with the others.

In addition when researchers controlled for the differences between groups in variables such as age, sex, education, income and body



■ Shaklee Supplement Users ■ A Multivitamin ■ No Supplement

BIOMARKERS	No Suppl	Single Suppl	Shaklee Suppl
Homocysteine (µmol/L)	9.6	9.1	6.1
C-reactive protein (mg/L)	4.6	3.2	1.9
Total cholesterol (mg/L)	211.5	212.1	203.1
LDL cholesterol (mg/L)	125.1	129.5	122.1
HDL cholesterol (mg/L)	50.9	53.3	57.5
Ratio total cholesterol to HDL	4.5	4.3	4.0
Triglycerides (mg/dL)	180.1	145.3	121.0



S.M.A.R.T. delivery system to release different ingredients at various points along the digestive track where they will provide the maximum benefit. **VITALIZER™** is a major part of the **Shaklee180™ Lean & Healthy Kit**.

mass index (BMI), they found the risk of elevated blood pressure was 39% lower for the Shaklee multiple supplement users than for nonusers and the risk of diabetes was 72% lower for the Shaklee multiple supplement users compared to nonusers. Besides what the charts indicate, Shaklee's long term supplement users were four times more likely to describe their health as "very good" or "excellent" compared to nonusers.

The average age of the Shaklee long term supplement users was 63.3. On average they were on less than one prescription drug. For comparison the USCDC (U.S. Center for Disease Control) has reported that the average 50-to-60 year old American is on 9 prescription drugs and the average over 65-year old on up to 19.

In view of the results of this study, you will have to decide if nutritional supplements are for you and your family and if Shaklee natural nutritional supplements are really "too expensive" compared to the cost other brands and the cost of sickness.

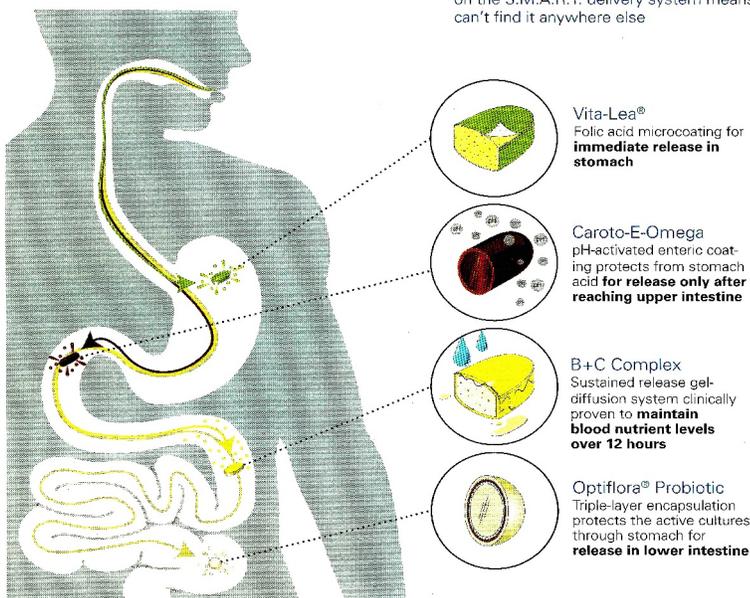
Shaklee Vitalizer™

Based on the results of the Landmark Study, 12 other studies and over 50 years of experience in premium nutrition manufacture, Shaklee formulated a new multivitamin-mineral supplement called **VITALIZER™**. **VITALIZER™** comes as six tablets (once a day every day) in a shrink-wrap. Together they contain 80 bio-optimized clinically proven nutrients everyone needs, the best spectrum of vitamins, minerals, antioxidants, anti-aging phytonutrients, omega-3 fatty acids, and probiotics of any product in the marketplace. To enhance utilization, Shaklee researchers also developed the

S.M.A.R.T.™ Shaklee Micronutrient Advanced Release Technology™

The right nutrients, to the right place, at the right time.

12 patents and 2 patents pending on the S.M.A.R.T. delivery system means you can't find it anywhere else



"The cost of just one of our delivery systems, the pH-activated release, is higher than the total cost of all vitamins and minerals in leading multivitamin products."

-Carsten R. Smidt, Ph.D., FACN,
Chief Scientific Officer, Shaklee Corporation