



CALCIUM OROTATE

LOGIC™ RANGE

Count Size:

- 100 Tablets
- 200 Tablets

Each tablet contains:

Calcium Orotate (51.8mg elemental calcium) 500mg

Magnesium (as magnesium L-aspartate and as magnesium hydrogen phosphate trihydrate) 112.3mg

Other Ingredients: Provsolv, Pure Food Glaze, Avicel, Ac-Di-Sol, Compritol, Magnesium Stearate

Directions for use

- General Health and Well-being: As an addition to the daily diet, take 2 – 3 tablets with evening meal, or as directed by a health care professional.

Dr. Nieper's general treatment protocols

- Arterial Spasms: 1 tablet twice a day
- Arthritis: 1-2 tablets three times a day
- Back Pain: 2 tablets twice a day
- Bone Fractures: 2 tablets twice a day
- Bruising: 2 tablets three times a day
- Bursitis and tendonitis: 2 tablets twice a day
- Capillary Fragility: 2-3 tablets twice a day
- Carpal Tunnel Syndrome: 1 tablet twice a day
- Chronic Inflammation of the Liver and Atrophied Liver: 1 tablet 3 times a day, always to be combined with 1-2 tablets of 120 mg Lithium Orotate



- Friedreich's Ataxia (FA): 1 tablet 3 times a day
- Inflammation: 1 tablet 3 times a day Leg Cramps: 2 tablets in the morning
- Osteoporosis: 1-3 tablets 3 times a day Psoriasis: 2 tablets twice a day
- Thrombophlebitis: 1 tablet 3 times a day

Technical information

During Dr. Nieper's preliminary work with 'Electrolyte Carriers' based on aspartic acid, he discovered that orotic acid was also an appropriate 'carrier' molecule. It was already known that orotic acid penetrates very easily into the cell and, as an aromatic substance, it possesses high chemical-complexing power enabling the creation of stable mineral compounds (orotates). He found that the orotates pass through the cell's double-layered outer membrane and are decomposed for utilization only by the inner components of the cell, such as the microsomes and the mitochondria.

Biochemist Arthur D. Alexander III, Ph.D., describes the mitochondrial organelles as the cell's "furnace" where sugars and fats are broken down to produce cellular energy. Furthermore he reports that "the mineral orotates are effective mineral transporters because of their chemical stability and their unique ability to seek out specific cells, penetrating both the outer and inner membrane layers, and delivering essential minerals to the cellular interior where they are metabolized. Orotate 'Mineral transporters,' discovered and introduced in 1968 by Dr. Hans Nieper, have been used world-wide and have been reported as a highly effective Eumetabolic therapy. Orotates have the ability to transport nutrient substances into the cells, maintaining healthy cell growth and averting damage to the mitochondria and other important metabolic structures.

Clinical applications

Dr. Nieper reports from his treatments of osteoporosis "the orotate carrier molecule has great affinity for the bone cells, penetrating the interior of the bone cells while transporting critically needed calcium to the depleted bone cells." In addition, "clinical trials and electron microscopic research (Nieper, Moenninghoff, 1971) indicate the Orotates have specific affinity toward cells of the heart, blood vessels, blood brain barrier and cartilage."



Calcium orotate is a mineral transporter where calcium is bound to orotic acid, a natural component of whey. It is well absorbed with 70-90% of the compound entering the blood stream in an intact state. This compound is attracted to bone, cartilage, liver, brain and the circulatory system where the molecule can enter the cells of these tissues releasing calcium inside the cell avoiding the hypercalcemia common to other calcium supplements. It is the intracellular delivery of calcium that makes this mineral transporter so powerful in the treatment of: bone and cartilage degeneration, bone fractures, spinal pain, periodontal disease, muscle cramps, inflammation in the liver and autoimmune diseases.

Clinical uses of calcium orotate:

1. For reduction of the side effects of cortisone.
2. When cartilage degeneration is present.
3. Strengthening of bones such as the hips.
4. For periodontal disease.
5. For muscle-cramping secondary to low calcium.
6. For individuals with asthma.

Calcium orotate should be considered in the following conditions:

1. Any decalcification disease (osteoporosis).
2. Bone fractures, especially of the spine.
3. Immune system dysfunctions and inflammation.
4. Cartilage problems caused by rheumatoid arthritis, effects of cortisone or birth control pills.
5. Generalized bone pain.
6. Dorsal spine pain and slipped discs.
7. Hip degeneration (arthrosis).
8. For recalcifying bone metastases.

Calcium orotate is useful instead of nonspecific calcium supplements, which create hypercalcemia in the blood, but do not necessarily get into tissues that require calcium.



Dosage and Administration with other Products

Calcium orotate may temporarily cause a heat reaction. A bad taste in the mouth may occur if calcium is mixed with Magnesium orotate. They are best given in separate doses at least 2 hours apart. According to Dr. Nieper, Magnesium orotate when given with bromelain, potassium-magnesium aspartate and B6 facilitates cleansing of coronary arteries, reduces angina and decreases the risk of myocardial infarction. Calcium also has a role in weight loss.

Calcium supplements in the future may become an essential component of weight control programs. Advances in genetic research have identified one of the genes in human fat cells that control how fast the body burns fat. This fat controlling gene called the agouti gene is activated by calcium. This gene has a strong influence on whether fat cells are burnt or stored. Researchers have determined that low calcium diets fool the body into thinking it is starving even though adequate calories are available. The body responds to low calcium states by slowing metabolism and storing fat instead of burning it. Therefore an adequate calcium intake cues the body that nutrition is adequate and storing fat is unnecessary.



References

1. Nieper, Hans A., Eagle-Oden, G. S. and Alexander III, Arthur D. "THE MINERAL TRANSPORTERS" The Curious Man (1999): 58 – 59.
2. Alexander III, Ph.D., Arthur D. THE HEALTHY CELL: Its Structure and Functions that are so Essential to Disease Prevention and Treatment (June, 1997)
3. Alexander III, Ph.D., Arthur D. Calcium 2-AEP & Calcium Orotate Found Essential in the Prevention and Treatment of Osteoporosis (June, 1997)
4. Nieper HA. The anti-inflammatory and immune-inhibiting effects of calcium orotate on bradytrophic tissue. Aggressologie 1969;1 0:4.
5. Nieper HA. Recalcification of bone metastases by calcium- diorotate. Aggressologie 1970;11(6):495-503.
6. Nieper HA The clinical effect of calcium- diorotate on cartilaginous tissue, the specific function dependent upon the pentose- metabolism of bradytrophic tissue. Geriatrie, 1973;3(4):82-89.
7. Nieper HA. Liver orotate: The curative effect of a combination of calcium- orotate and lithium orotate on primary and secondary liver cirrhosis lecture before; The International Academy of Preventive Medicine, Washington Hilton, March 9, 1974.

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