InosiCare





CLINICAL APPLICATIONS

- Supports Healthy Hormone Balance
- Promotes Optimal Metabolic and Blood Sugar Regulation
- Enhances Insulin Sensitivity and Promotes Ovulatory Function
- · Maintains Normal Inflammatory Balance
- Supports Positive Mood



ENDOCRINE HEALTH

InosiCare is a unique formula designed to support metabolic, hormonal and gut health through a combination of targeted ingredients. By focusing on key pathways involved in energy metabolism, blood sugar regulation, and hormone balance, it provides a comprehensive solution for individuals seeking natural support for metabolic efficiency and overall wellbeing. At the heart of InosiCare is a powerful blend of myo-inositol and D-chiro inositol in a 40:1 ratio, a clinically researched combination shown to improve insulin sensitivity, promote regular ovulation, and support healthy hormone balance. Complementing this are essential minerals like zinc, copper, and chromium, which aid in glucose regulation and hormonal support, along with Solnul® resistant potato starch (RPS) to optimize gut health and support metabolic efficiency.

Overview

Hormonal and metabolic imbalances can affect multiple aspects of wellbeing, influencing everything from energy levels and mood to weight management and glucose control. InosiCare is designed to target these interconnected systems, offering comprehensive support for healthy insulin function, balanced glucose levels, and optimal gut microbiome health. The combination of myoinositol and D-chiro inositol (40:1 ratio), resistant starch, and essential trace minerals has been extensively studied for its role in improving metabolic and hormonal health. Together, these ingredients create a synergistic effect, helping individuals achieve balanced energy, enhanced insulin sensitivity, and better overall metabolic function.

Inositol (Myo-inositol and D-Chiro Inositol, 40:1 Ratio)

Inositol is a naturally occurring compound essential for cellular signaling, particularly in pathways related to insulin sensitivity and metabolic function. The 40:1 ratio of myo-inositol to D-chiro inositol, which reflects the body's natural ratio, has been extensively researched for its ability to support metabolic and hormonal balance.^{1,2} Studies have shown that this specific combination is effective in improving ovulation, reducing insulin resistance, and lowering androgen levels, which can help alleviate symptoms like unwanted hair growth and acne.3 Research consistently highlights the role of myo-inositol and D-chiro inositol in enhancing insulin sensitivity and promoting healthy glucose metabolism, making it a valuable tool for those seeking better metabolic balance.⁴ Additionally, inositol has been shown to play a key role in maintaining hormonal equilibrium, particularly in relation to reproductive health and metabolic efficiency.⁵ In a double-blind, placebo-controlled study, women who took myo-inositol and D-chiro inositol in a 40:1 ratio daily for six months, experienced significant improvements in insulin sensitivity and hormone levels associated with menstrual cycle regularity compared to those who received placebo.⁶ Another study reported similar results as well as improvement in ovulation rates among participants using the same dosage.7

Solnul® and Resistant Starches

Solnul® resistant potato starch (RPS) is a type II resistant starch that functions as a prebiotic, feeding beneficial gut bacteria and promoting a healthy digestive environment. Resistant starch has been shown to slow glucose absorption, which helps regulate blood sugar levels and improve insulin



sensitivity over time.⁸ Research shows that resistant starch can help reduce blood sugar spikes after meals and improve how the body responds to insulin.⁹ Furthermore, resistant starch is associated with enhanced production of short-chain fatty acids, such as butyrate, which contribute to gut health and normal inflammatory balance.¹⁰ Specifically, Solnul[®] RPS has been shown to have a prebiotic effect at a 3.5 g daily dose and to significantly increase *Bifidobacterium* and *Akkermansia* levels and improved bowel movements compared to placebo.¹¹ In a systemic review and meta-analysis, resistant starch supplementation improved insulin sensitivity and lipid parameters in overweight adults, making it a promising adjunct therapy for those with metabolic challenges.¹²

Zinc, Chromium and Copper

These essential minerals are crucial for maintaining metabolic health and supporting a wide range of vital bodily functions. Zinc plays a key role in insulin function, hormone balance and immune support, as well as cellular repair. Studies have shown that zinc supplementation helps optimize insulin sensitivity and glycemic control in individuals with metabolic health challenges.¹³ Zinc also helps reduce oxidative stress, which contributes to balancing hormone levels and improving metabolic function, particularly in women experiencing metabolic wellness concerns. 14,15,16 Chromium, a trace mineral, enhances insulin action and promotes efficient glucose utilization. Research indicates chromium can increase insulin sensitivity and maintain healthy glucose metabolism. In a clinical trial, women who supplemented with chromium $showed\,enhanced\,in sulin\,sensitivity.^{17}\,Studies\,have\,consistently$ demonstrated chromium's ability to optimize blood sugar regulation by increasing insulin sensitivity in individuals with metabolic function concerns.¹⁸ Copper is another essential mineral that supports energy production, antioxidant defense and overall metabolic health. As a cofactor for enzymes involved in energy production and iron metabolism, copper plays an important role in maintaining hormone balance and protecting cells from oxidative damage. It also supports cardiovascular health, which can be compromised in individuals with metabolic imbalances due to the increased risk of metabolic syndrome and insulin resistance. 19,20

Directions

1 scoop (7 grams) per day or as recommended by your health care professional.

Does Not Contain

Gluten, yeast, artificial colors or flavors.

Cautions

If you are pregnant or nursing, consult your physician before taking this product

Supplement Facts Serving Size 1 Scoop (7 Grams) Servings Per Container About 30		
	Amount Per Serving	% Daily Value
Calories	25	
Total Carbohydrate	6 g	2%*
Dietary Fiber	2.5 g	9%*
Zinc (as Albion® Zinc Bisglycinate Chelate)) 2 mg	18%
Copper (as Albion® Copper Bisglycinate Chelate	0.2 mg	22%
Chromium (as O-polynicotinate) (ChromeMate®)	100 mcg	286%
Resistant Potato Starch (Solnul®)	3.5 g	**
Inositol Blend 40:1	2.05 g	
Myo Inositol		**
D-Chiro Inositol		**
* Percent Daily Values are based on a 2,000 calorie diet.		

Other Ingredients: Resistant Tapioca Dextrin, Lemon Juice, Citric Acid and Rebaudioside M.

ID# 167030 Powder 7.4 oz (210 Grams)

** Daily Value not established.



References

- Nordio M, Basciani S, Camajani E. The 40:1 myo-inositol/ D-chiro-inositol plasma ratio is able to restore ovulation in PCOS patients: comparison with other ratios. *Eur Rev Med Pharmacol Sci.* 2019;23(12):5512-5521. doi:10.26355/eurrev_201906_18223
- 2. Roseff S, Montenegro M. Inositol Treatment for PCOS Should Be Science-Based and Not Arbitrary. *Int J Endocrinol*. 2020;2020:6461254. Published 2020 Mar 27. doi:10.1155/2020/6461254
- 3. Greff D, Juhász AE, Váncsa S, et al. Inositol is an effective and safe treatment in polycystic ovary syndrome: a systematic review and meta-analysis of randomized controlled trials. *Reprod Biol Endocrinol*. 2023;21(1):10. Published 2023 Jan 26. doi:10.1186/s12958-023-01055-z
- 4. Unfer V, Facchinetti F, Orrù B, Giordani B, Nestler J. Myo-inositol effects in women with PCOS: a meta-analysis of randomized controlled trials. *Endocr Connect*. 2017;6(8):647-658. doi:10.1530/EC-17-0243
- Kiani AK, Donato K, Dhuli K, Stuppia L, Bertelli M. Dietary supplements for polycystic ovary syndrome. J Prev Med Hyg. 2022;63(2 Suppl 3):E206-E213. Published 2022 Oct 17. doi:10.15167/2421-4248/jpmh2022.63.2S3.2762
- 6. Nordio M, Proietti E. The combined therapy with myoinositol and D-chiro-inositol reduces the risk of metabolic disease in PCOS overweight patients compared to myoinositol supplementation alone. *Eur Rev Med Pharmacol Sci.* 2012;16(5):575-581.
- 7. Benelli E, Del Ghianda S, Di Cosmo C, Tonacchera M. A Combined Therapy with Myo-Inositol and D-Chiro-Inositol Improves Endocrine Parameters and Insulin Resistance in PCOS Young Overweight Women. *Int J Endocrinol*. 2016;2016:3204083. doi:10.1155/2016/3204083
- 8. Higgins JA. Resistant starch: metabolic effects and potential health benefits. *J AOAC Int*. 2004;87(3):761-768.
- Bojarczuk, A, Skapka LS, Mousavi Khaneghah A, Marszalek K. Health benefits of resistant starch: A review of the literature. *Journal of Function Food*. 2022. Volume 93, 105094, ISSN 1756-4646. https://doi.org/10.1016/j. jff.2022.105094.
- 10. Slavin J. Fiber and prebiotics: mechanisms and health benefits. *Nutrients*. 2013;5(4):1417-1435. Published 2013 Apr 22. doi:10.3390/nu5041417
- 11. Bush JR, Baisley J, Harding SV, Alfa MJ. Consumption of Solnul™ Resistant Potato Starch Produces a Prebiotic Effect in a Randomized, Placebo-Controlled Clinical Trial. *Nutrients*. 2023;15(7):1582. Published 2023 Mar 24. doi:10.3390/nu15071582

- 12. Wang Y, Chen J, Song YH, et al. Effects of the resistant starch on glucose, insulin, insulin resistance, and lipid parameters in overweight or obese adults: a systematic review and meta-analysis. *Nutr Diabetes*. 2019;9(1):19. Published 2019 Jun 5. doi:10.1038/s41387-019-0086-9
- 13. Chausmer AB. Zinc, insulin and diabetes. *J Am Coll Nutr*. 1998;17(2):109-115. doi:10.1080/07315724.1998.10718735
- 14. Hosseini R, Ferns GA, Sahebkar A, Mirshekar MA, Jalali M. Zinc supplementation is associated with a reduction in serum markers of inflammation and oxidative stress in adults: A systematic review and meta-analysis of randomized controlled trials. *Cytokine*. 2021;138:155396. doi:10.1016/j.cyto.2020.155396
- 15. Nasiadek M, Stragierowicz J, Klimczak M, Kilanowicz A. The Role of Zinc in Selected Female Reproductive System Disorders. *Nutrients*. 2020;12(8):2464. Published 2020 Aug 16. doi:10.3390/nu12082464
- Jamilian M, Foroozanfard F, Bahmani F, Talaee R, Monavari M, Asemi Z. Effects of Zinc Supplementation on Endocrine Outcomes in Women with Polycystic Ovary Syndrome: a Randomized, Double-Blind, Placebo-Controlled Trial. Biol Trace Elem Res. 2016;170(2):271-278. doi:10.1007/s12011-015-0480-7
- 17. Lydic ML, McNurlan M, Bembo S, Mitchell L, Komaroff E, Gelato M. Chromium picolinate improves insulin sensitivity in obese subjects with polycystic ovary syndrome. *Fertil Steril*. 2006;86(1):243-246. doi:10.1016/j. fertnstert.2005.11.069
- 18. Georgaki MN, Tsokkou S, Keramas A, Papamitsou T, Karachrysafi S, Kazakis N. Chromium supplementation and type 2 diabetes mellitus: an extensive systematic review. *Environ Geochem Health*. 2024;46(12):515. Published 2024 Nov 14. doi:10.1007/s10653-024-02297-5
- 19. Chen J, Jiang Y, Shi H, Peng Y, Fan X, Li C. The molecular mechanisms of copper metabolism and its roles in human diseases. Pflugers Arch. 2020;472(10):1415-1429. doi:10.1007/s00424-020-02412-2
- 20. Ding J, Liu Q, Liu Z, Guo H, Liang J, Zhang Y. Associations of the Dietary Iron, Copper, and Selenium Level With Metabolic Syndrome: A Meta-Analysis of Observational Studies. Front Nutr. 2022;8:810494. Published 2022 Feb 1. doi:10.3389/fnut.2021.810494

