



*Thank you
Doctor*



 ***Indo-French***
Healthcare Limited

To restore Calcium deficiency states

Need is a supplement

Effective



Efficient

Choose the most trusted brand since 1938

Rejuicalcium[®]

Since 1938

(Calcium Carbonate 625 mg, Zinc Sulphate Monohydrate 40 mg, Magnesium Hydroxide 25 mg, Manganese Sulfate 0.1 mg, Copper Sulfate 0.1 mg , Colecalciferol 200 I.U, Pyridioxide Hydrochloride 1.5 mg, Cyanocobalamin 5 mcg, Folic Acid 0.5 mg Tablets)

2E powered Calcium Restoration

Traditional in combination Contemporary in technology

Effective

- Magnesium neutralises the acid and aids calcium an alkaline environment to pass through to the post duodenal area
- Zinc sulphate aids enzyme synthesis for calcium absorption and utilisation
- Copper and manganese help in collagen synthesis to bond bone tissues strong
- Folic acid, B6 & B12 control hyperhomocystenemia thereby preventing osteoporosis



Efficient

- Ensures maximum absorption
- First micronized calcium by which more than 70% absorption is ensured, the special polymer coating ensures the action to take place in the post duodenum stage

Convenient

- Small size pearl shape - Easy to swallow

Compliance

- Very Less GI disturbances

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2E powered Calcium Restoration

- Ensures maximum Calcium absorption
- Quick and effectively restores deficiency states
- Prevents complications
- Well tolerated

Indications

- Pregnancy
- Lactation
- Post menopausal bone loss
- Osteoporosis
- Low back pain



For overall growth and development in Children

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2E powered Calcium Restoration

Helps in bone mineral accrual in adolescence & prevents long term consequences of BMC¹

Zinc reduces shunting & improves linear growth²

Magnesium ensures optimal pre & post pubertal skeletal growth in females by attainment of BMC & BMD bone mineral density³



Indications

- Hypocalcemia
- Overall growth and development
- Softening of bones in children
- Fracture recovery
- Prepubertal & Postpubertal skeletal growth

PAE/GP

Low levels of
Vitamin K
in plasma

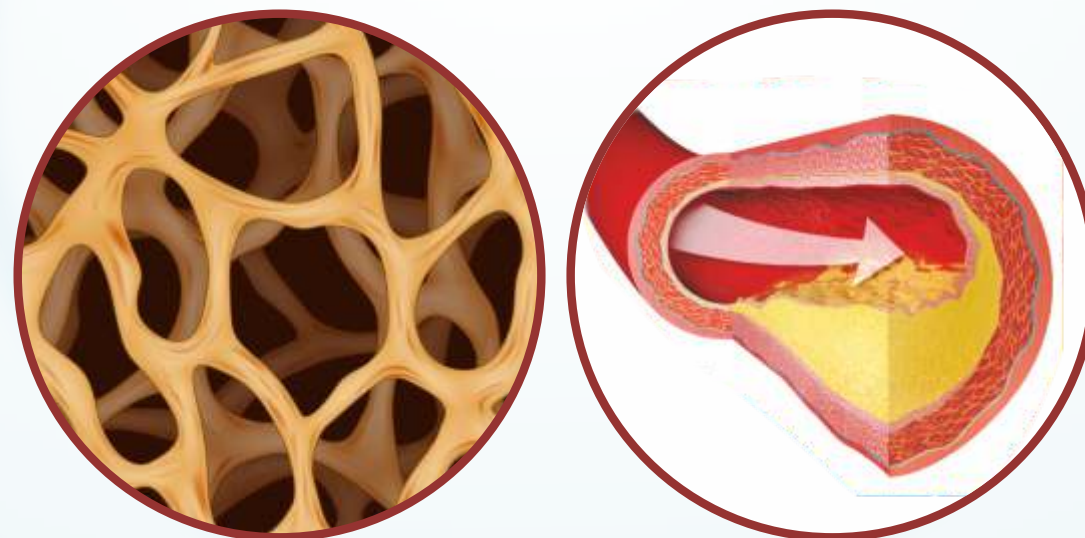
Osteocalcin is not carboxylated
and is inactive

results in higher ucMGP

cannot bind to the hydroxyapatite
in the bone matrix

Enhanced calcification of vasa media
and vasa intima

Bone loss



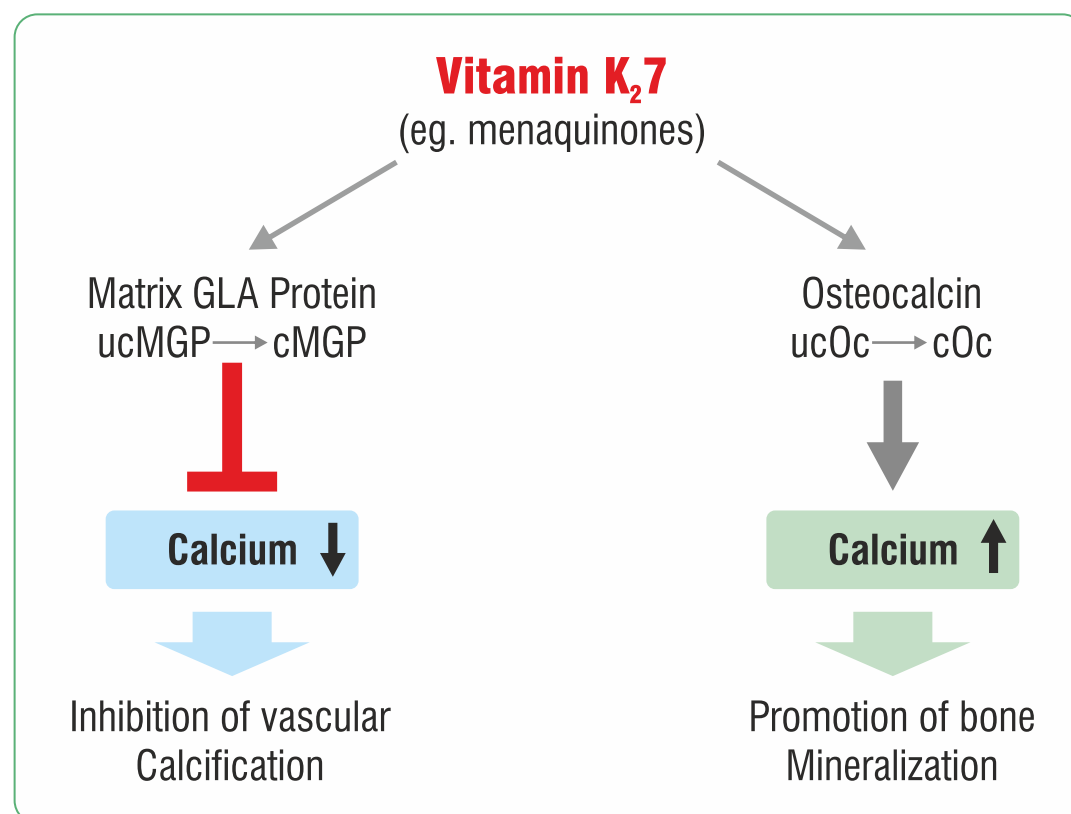
CAD

Fortify the Bones for all >45

Prophylactic & Therapeutic agent

R_x Rejucalcium+[®]

(Calcium Carbonate 625 mg, Vitamin K₂-7 45 mcg, Zinc Sulphate Monohydrate 40 mg, Magnesium Hydroxide 25 mg, Manganese Sulfate 0.1 mg, Anhydrous Copper Sulfate 0.1 mg, Colecalciferol (Vitamin D₃) 200 I.U, Pyridioxide Hydrochloride (Vitamin B₆) 1.5 mg, Cyanocobalamin (Vitamin B₁₂) 5 mcg, Folic Acid 0.5 mg.)



45 mcg/day of vit K₂7^{1,2}

- 50% reduction of CHD mortality & aortic calcification¹
- 25% reduction in all cause mortality¹
- Reduces fractures significantly (14.4% in the low vitamin K group compared to 4.2% in the high vitamin K group)²

Fortify the Bones for all >45

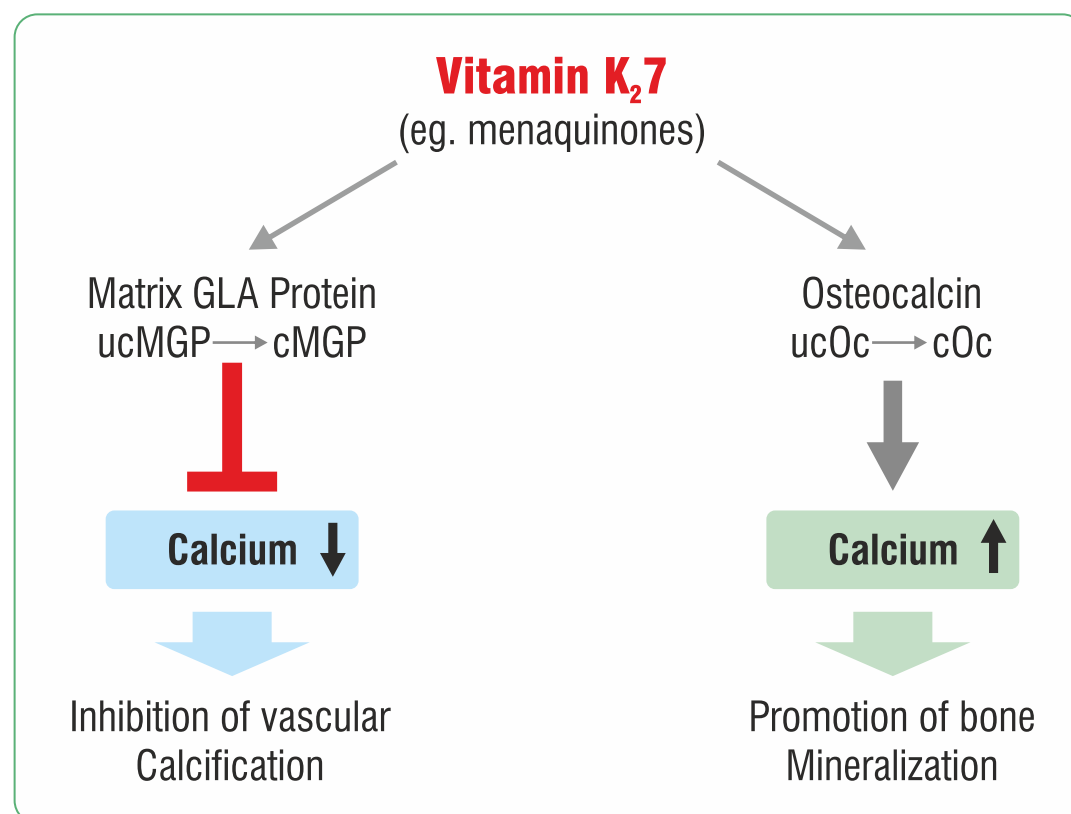
Indications

+ Osteoporosis + Osteomalacia + Decreased activity of the parathyroid gland + Hypocalcemia + Fracture recovery + Tetany

Prophylactic & Therapeutic agent

R_x Rejuicalcium+[®]

(Calcium Carbonate 625 mg, Vitamin K2-7 45 mcg, Zinc Sulphate Monohydrate 40 mg, Magnesium Hydroxide 25 mg, Manganese Sulfate 0.1 mg, Anhydrous Copper Sulfate 0.1 mg, Colecalciferol (Vitamin D3) 200 I.U, Pyridoxine Hydrochloride (Vitamin B6) 1.5 mg, Cyanocobalamin (Vitamin B12) 5 mcg, Folic Acid 0.5 mg.)



45 mcg/day of vit K₂7 to low estrogen group

- 15-20% increase in bone formation markers¹
- 20-25% decrease of bone resorption markers¹
- 50% reduction of CHD mortality & aortic calcification²
- 25% reduction in all cause mortality²

Fortify the Bones for all >45

Indications

- + In early postmenopausal Women
- + Postmenopausal women
- + Women with severe osteoporosis