

Niacin

100 mg Vitamin B-3 for Cardiovascular Health

DESCRIPTION

Niacin tablets provide 100 mg of pure niacin in a scored uncoated tablet which can be broken in half when lower dosage is desired.

FUNCTIONS

Niacin (vitamin B3) occurs in the body as two metabolically active coenzymes, NAD (nicotinamide adenine dinucleotide) and NADP (NAD phosphate). The niacin coenzymes NAD and NADP have pervasive roles in energy-related and biosynthetic metabolic processes. At least 200 enzymes depend on these niacin cofactors. The NAD-dependent enzymes are involved in mostly catabolic, oxidative reactions that release energy from carbohydrate, fat, and protein, whereas the NADP-dependent enzymes more commonly function in biosynthetic pathways of such compounds as fatty acids and steroid hormones.

Independent of its functions as NAD or NADP, niacin is also involved in the regulation of normal blood lipoprotein and cholesterol levels.

Dietary niacin is generally well absorbed and taken up by the liver which converts it to NAD and NADP. Any excess niacin is metabolized by the liver and excreted by the kidneys.

INDICATIONS

Niacin tablets may be a useful nutritional adjunct for individuals who wish to increase their intake of niacin.

FORMULA (WW #10113)

1 Vegetarian Tablet Contains:

Niacin 100 mg
Other Ingredients: May contain one or more of the following: magnesium stearate, cellulose, vegetable stearin, dicalcium phosphate and silica.

This product contains NO added sugar, salt, dairy, yeast, gluten, wheat, corn, soy, preservatives, artificial colors or flavors.

SUGGESTED USE

As a dietary supplement, adults take one (1) tablet daily with meals, or as directed by a healthcare professional.

SIDE EFFECTS

No adverse effects have been reported.

STORAGE

Store in a cool, dry place, away from direct light. Keep out of reach of children.

REFERENCES

- Alderman JD et al. Effect of a modified, well-tolerated niacin regimen on serum total cholesterol, high density lipoprotein cholesterol and the cholesterol to high density lipoprotein ratio. *Am J Cardiol* 1989;64:725-729.
- Canner PL et al. Fifteen year mortality in Coronary Drug Project patients: long-term benefit with niacin. *J Am Coll Cardiol* 1986;8:1245-1255.
- Colletti RB et al. Niacin treatment of hypercholesterolemia in children. *Pediatrics* 1993;92:78-82.
- Keenan JM et al. Niacin revisited: a randomized, controlled trial of wax-matrix sustained-release niacin in hypercholesterolemia. *Arch Intern Med* 1991;151:1424-1432.
- Lavie CJ et al. Marked benefit with sustained-release niacin therapy in patients with 'isolated' very low levels of high-density lipoprotein cholesterol and coronary artery disease. *Am J Cardiol* 1992;69:1083-1085.
- Probstfield JL. Nicotinic acid as a lipoprotein-altering agent: therapy directed by the primary physician. *Arch Int Med* 1994;154:1557-1559.

These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.