



NUZINC- Zinc 10 mg Tablet

INDICATED CLAIMS:

- Helps in connective tissue formation.
- Helps to maintain healthy skin.
- Helps the body to metabolize carbohydrates, fats and proteins.
- Helps to maintain immune function.

GENERAL INFORMATION :

Zinc is an essential element in human and animal nutrition with a wide range of biological roles. Zinc plays catalytic, structural or regulatory roles in the more than 200 zinc metalloenzymes that have been identified in biological systems. These enzymes are involved in nucleic acid and protein metabolism and the production of energy, among other things. Zinc plays a structural role in the formation of the so-called zinc fingers. Zinc fingers are exploited by transcription factors for interacting with DNA and regulating the activity of genes. Another structural role of zinc is in the maintenance of the integrity of biological membranes resulting in their protection against oxidative injury, among other things.

Physiologically, zinc is vital for growth and development, sexual maturation and reproduction, dark vision adaptation, olfactory and gustatory activity, insulin storage and release and for a variety of host immune defenses, among other things. Zinc deficiency can result in growth retardation, immune dysfunction, increased incidence of infections, hypogonadism, oligospermia, anorexia, diarrhea, weight loss, delayed wound healing, neural tube defects of the fetus, increased risk for abortion, alopecia, mental lethargy and skin changes.

Several diseases and situations predispose to zinc deficiency, including the autosomal recessive disease acrodermatitis enteropathica, alcoholism, malabsorption, thermal burns, total parenteral nutrition (TPN) without zinc supplementation and certain drugs, such as diuretics,

For Accidental Overdose (such as child ingesting formula)

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penicillamine, sodium valproate and ethambutol. Zinc intake in many of the elderly may be suboptimal and, if compounded with certain drugs and diseases, can lead to mild or even moderate zinc deficiency.

Zinc may have immunomodulatory activity. It may also have antioxidant activity. Zinc has putative antiviral, fertility- enhancing and retinoprotective activities.

PHARMACOKINETICS

Zinc is absorbed all along the small intestine. Most ingested zinc appears to be absorbed from the jejunum. Zinc is transported to the liver via the portal circulation. Much of the pharmacokinetics of zinc in humans is unknown. Research is ongoing.

NUZINC- Zinc 10 mg Tablet

Product information

Available as 90 tablets ,

Each tablet contains:

Zinc 10mg

Non-medicinal ingredients: Microcrystalline Cellulose, Magnesium Stearate, povidone.

Directions for use: adult: take 1 tablet daily with water or as directed by a health care practitioner.

Benefits

- Functions as an antioxidant.
- Promotes normal growth and development.
- Aids wound healing
- Promotes normal fetal growth.
- Helps synthesize RNA and DNA.
- Promotes cell division, cell repair and cell growth.
- Plays a part in the immune system.

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CONTRAINDICATIONS

Zinc is contraindicated in those who are hypersensitive to any component of a zinc-containing supplement.

PRECAUTIONS

Pregnant women and nursing mothers should avoid zinc doses higher than RDA amounts (15 milligrams/day for pregnant women, 19 mg/day for lactating women during the first six months and 16 mg/day for lactating women during the second six months).

ADVERSE REACTIONS

Doses of zinc up to 30 milligrams daily are generally well tolerated. Higher doses may cause adverse reactions. The most common adverse reactions are gastrointestinal and include nausea, vomiting and gastrointestinal discomfort. Other adverse reactions include a metallic taste, headache and drowsiness. There are some reports of decreased HDL - cholesterol in those taking high doses of zinc. Chronic intake of high doses of zinc can lead to copper deficiency and hypochromic, microcytic anemia secondary to zinc-induced copper deficiency.

High doses of zinc may be immunosuppressive.

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INTERACTIONS DRUGS

Bisphosphonates (alendronate, etidronate, risedronate): Concomitant intake of a bisphosphonate and zinc may decrease the absorption of both the bisphosphonate and zinc.

Quinolones (ciprofloxacin, gatifloxacin, levofloxacin, lomefloxacin, moxifloxacin, norfloxacin, ofloxacin, sparfloxacin, trovafloxacin): Concomitant intake of a quinolone and zinc may decrease the absorption of both the quinolone and zinc.

Penicillamine: Concomitant intake of penicillamine and zinc may depress absorption of zinc.

Tetracyclines (doxycycline, minocycline, and tetracycline): Concomitant intake of a tetracycline and zinc may decrease the absorption of both the tetracycline and zinc.

NUTRITIONAL SUPPLEMENTS

Copper: Concomitant intake of copper and zinc may depress the absorption of copper. Intake of large doses of zinc can negatively affect the copper status of the body. This is the basis for the use of high doses of zinc for the treatment of Wilson's disease. It is thought that high intakes of zinc induce synthesis of the copper-binding protein metallothionein in the gastrointestinal mucosal cells. Metallothionein can sequester copper. This makes copper unavailable for copper absorption.

L-cysteine: Concomitant intake of L-cysteine and zinc may enhance the absorption of zinc.

L-histidine: Concomitant intake of L-histidine and zinc may enhance the absorption of zinc.

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Inositol Hexaphosphate: Concomitant intake of inositol hexaphosphate and zinc may depress the absorption of zinc.

Iron: Concomitant intake of iron and zinc may depress the absorption of both iron and zinc.

L-methionine: Concomitant intake of L-methionine and zinc may enhance the absorption of zinc.

N-acetyl-L-cysteine (NAC): Concomitant intake of NAC and zinc may enhance the absorption of zinc.

Phosphate Salts: Concomitant administration of zinc and phosphate salts may decrease the absorption of zinc.

FOODS

Caffeine: Concomitant intake of coffee, caffeinated beverages or caffeine and zinc may depress the absorption of zinc.

Cysteine-containing Proteins: Foods rich in cysteine-containing proteins (e.g., animal muscle tissue) may increase the absorption of zinc if ingested concomitantly.

Oxalic Acid: Concomitant intake of zinc with foods rich in oxalic acid (spinach, sweet potatoes, rhubarb and beans) may depress the absorption of zinc.

Phytic Acid: Concomitant intake of zinc with foods rich in phytic acid (unleavened bread, raw beans, seeds, nuts and grains and soy isolates) may depress the absorption of zinc.

Tea: Concomitant intake of tea (tannins) and zinc may cause decreased absorption of zinc.

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