

Calm-Pro® – The Green Tea Serenity Factor

About Calm-Pro

- Calm-Pro uses Suntheanine®, produced via a patented enzymatic process resulting in pure L-isomer theanine.
- L-theanine is a natural source amino acid found in green tea.¹
- L-theanine may support the production of alpha brain waves, which help support a feeling of serenity and relaxation without drowsiness.^{*2}
- Calm-Pro may help support a relaxed mood, which may also support quality sleep.^{*3,4,5}
- Helps keep stress cortisol levels within the normal range.^{*6}
- L-theanine in combination with caffeine may help maintain alertness and support mental performance.^{*7,8}
- Eases mood-related symptoms associated with normal premenstrual syndrome.^{*9}

How to Use Calm-Pro

- Chew 1–2 tablets 3 times per day or as directed by a health care professional.

Cautions and Contraindications

- While no specific contraindication exists or is predicted, information is lacking for use during pregnancy, breastfeeding, and in children, and the dosage may need to be reduced for those less than 18 years of age. Keep out of reach of children.

Drug Interactions

- May increase the uptake of certain types of chemotherapy drugs such as doxorubicin.¹⁰

Quick Tips for Reducing Everyday Stress

- Getting only four hours of sleep, instead of eight hours, may increase cortisol by up to 37% the next day.¹¹
- Balancing stress is a way to balance your immunity.¹²
- Exposure to music, instead of just resting, can have big benefits in reducing occasional stress.¹³
- Regular exercise is associated with emotional resilience to occasional stress in healthy adults.¹⁴
- Reducing your salt intake may help manage tension and maintain a calm mood.^{*15}
- In a high-stress job, 15 minutes of gentle back massage per week may help reduce both physical and mental stress.¹⁶

USER NAME: _____

PROFESSIONAL NOTES:

PROFESSIONAL CONTACT INFORMATION:

*This statement has not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.

References

1. Nobre, A.C., Rao, A., Owen, G.N. (2008). *Asian Pacific Journal of Clinical Nutrition*, 17 Suppl 1, 167-8.
2. Ito, K., Nagoto, Y., Aoi, N., et al. (1998). *Nippon Nogei Kagaku Kaishi*, 72(2), 153-7. (Japanese).
3. Juneja, L.R., Chu, D., Okubo, T., et al. (1999). *Trends in Food Science & Technology*, 10, 199-204.
4. Ozeki, M., Juneja, L.R., Shirakawa, S. (2004). *Jpn J Physiol Anthropol*, 9, 143-50.
5. Ozeki, M., Juneja, L.R., Shirakawa, S. (2008). *Jpn J Physiol Anthropol*, 13, 9-15.
6. Miodownik, C., Maayan, R., Ratner, Y., et al. (2011). *Clinical Neuropharmacology*, 34, 155-60.
7. Higashiyama, A., Htay, H.H., Ozeki, M., et al. (2011). *J Funct Foods*, 3, 171-8.
8. Giesbrecht, T., Rycroft, J.A., Rowson, M.J., et al. (2010). *Nutrition Neuroscience*, 13(6), 283-90.
9. Timmcke, J.Q., Juneja, L.R., Kapoor, M.P. (2008). *FASEB Journal*, 22, 1b760.
10. Sugiyama, T., & Sadzuka, Y. (1998). *Cancer Letters*, 133, 19-26.
11. Leproult, R., Copinschi, G., Buxton, O., et al. (1997). *Sleep*, 20(10), 865-70.
12. Irwin, M., McClintick, J., Costlow, C., et al. (1996). *FASEB Journal*, 10(5), 643-53.
13. Christaki, E., Kokkinos, A., Costarelli, V., et al. (2013). *Journal of Human Nutrition and Dietetics*, 26 Suppl 1, 132-9.
14. Childs, E. & de Wit, H. (2014). *Frontiers in Physiology*, 5, 161.
15. Torres, S.J. & Nowson, C.A. (2012). *Nutrition*, 28(9), 896-900.
16. Bost, N., & Wallis, M. (2006). *Australian Journal of Advanced Nursing*, 23(4), 28-33.