

# LANDMARK STUDY HIGHLIGHTS

## The Study

Gladys Block, Ph.D., renowned researcher and Professor of Epidemiology and Public Health Nutrition at the University of California, Berkeley, School of Public Health, helped lead the research team in its efforts to conduct the first-of-its-kind study on a unique population of long-term users of a broad array of a single brand of dietary supplements.

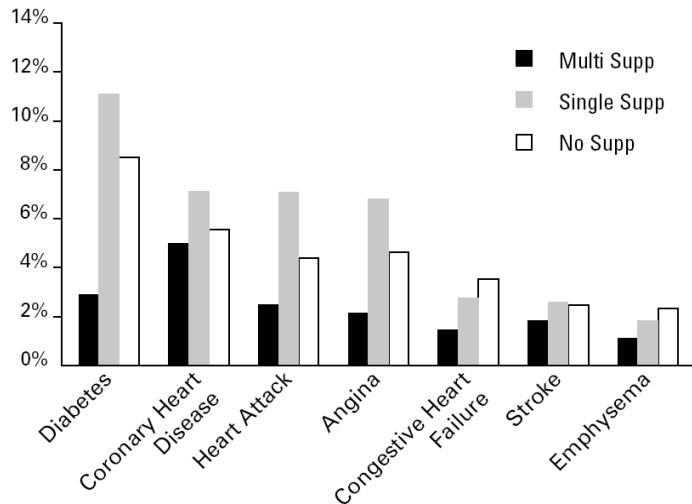
## Risk of Prevalent Disease

In all cases, **disease prevalence was lower** in Shaklee multi-supplement users as compared to Single Multivitamin and No Supplement users (Graph 1).

In addition, when researchers controlled for differences between groups in variables such as age, sex, education, income, and body mass index, they found **the risk of diabetes was 73% lower** and **the risk of elevated blood pressure was 39% lower** in Shaklee multi-supplement users than in No Supplement users.

Also, Shaklee multi-supplement users were **four times more likely** to describe their health as “very good” or “excellent” compared to No Supplement users.

**Graph 1. Disease prevalence in long-term users of multiple dietary supplements (Multi Supp), multivitamin users (Single Supp), and nonusers (No Supp).**



## Blood Biomarkers

Multi Supp users had higher blood levels of HDL cholesterol and lower blood levels of triglycerides, both consistent with **lower heart disease risk**.

Increased supplement use was also associated with more favorable concentrations of serum homocysteine and C-reactive protein (CRP), a marker of low-grade inflammation (Table 2). Of note, **none** of the 278 Shaklee Multi Supp study participants had an elevated CRP level (>3.0 mg/L), identified as "high risk" by the American Heart Association.

Shaklee Multi Supp study participants also had better blood nutrient levels, and a much lower usage of prescription drugs.

To learn more, visit [www.LandmarkStudy.com](http://www.LandmarkStudy.com)

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