









# Fat & carb blocker(1)

ID-alG is a brown seaweed extract derived from Ascophyllum nodosum rich in long chain polyphenols called phlorotannins which inhibit the activity of the two main digestive enzymes(1):

- Lipase inhibition activity: up to 63%
- Amylase inhibition activity: up to 77%

### Demonstrated clinical results(2)

The latest clinical results highlighted unique weight management benefits of ID-alG for overweight women & more specifically for 45 years & over.

- Weight-loss closely correlated with fat mass
- Decreases fat assimilation lowering body fat mass and abdominal & visceral fat (see MRI)
- Decreases carbs assimilation lowering glycated hemoglobin index Hb1Ac
- Significant and lasting effect as early as 8 weeks after initial consumption
- Improves body shape

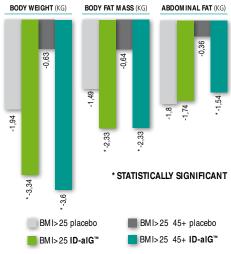
Significant circumference variation (16 weeks)	BMI>25	BMI>25 45+
Waist circumference (cm)	-3.0	-2.7
Hip circumference (cm)	-3.0	-2.9
Thigh circumference (cm)	-1.7	-1.3

# Consumers' satisfaction(3)

Preliminary clinical study questionnaires assessing the satisfaction of users:

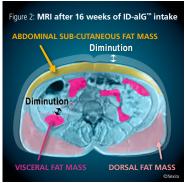
- **76**% believe ID-alG<sup>™</sup> induces weight-loss
- 72% would continue using ID-alG™
- 72% would buy ID-alG™

### **BODY COMPOSITION 16 WEEKS (KG)**



#### FAT MASS DECREASE





MRI: Magnetic Resonance Imaging

## NATURAL WEIGHT MANAGEMENT INGREDIENT

- Supported by clinical, published in vivo studies
- Guaranteed enzyme inhibition (≥ 50%)
- Guaranteed iodine content below RDI with 200 mg ID-alG™ twice daily (before main meals)(4)



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(2) Bicentric, randomized, placebo-controlled, in parallel double blind format study, run in 2014-2015 on 88 women using 200 mg ID-alG<sup>™</sup> twice daily during 16 weeks.
(3) Evaluation of ID-alG<sup>™</sup>s weight management effect on overweight women. Monocentric, randomized, placebo controlled clinical study run in March 2010, on 56 women using 400 mg of ID-alG<sup>™</sup> daily for 8 weeks.

(4) lodine Recommended Daily Intake = 150 μg/day according to regulations (EC) n°1169/2011 & (US) 21 CFR101.9

