

Trident SAP Liquid 90:60

Science-based omega-3 fish oil of exceptional purity for optimal health

Fish oil is an important source of essential fatty acids that can be derived only from the diet, especially omega-3 fatty acids. Since omega-6 fatty acids tend to be predominant in the western diet, supplementing with omega-3 fatty acids helps to mediate inflammatory pathways and maintain cell structure, fluidity, and function. Although there are several sources of omega-3 fatty acids available through a regular diet containing protein, plant oils, seeds, and nuts, fish oil is naturally able to provide a 2:1 ratio of eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) respectively, a ratio that has been used in majority of clinical trials and shown various health benefits. Due to their anti-inflammatory function, omega-3 fatty acids are beneficial in reducing the risk of cardiovascular diseases such as arrhythmias, hyperlipidemia, and thrombosis. Supplementation with EPA and DHA can improve symptoms of autoimmune diseases such as rheumatoid arthritis and asthma. DHA deficiency has been associated with impaired neurotransmission and synaptic activity, due to which DHA has been recommended for fetal development and through infancy. Omega-3 supplementation, especially EPA and DHA, can vastly improve reproductive health in men and women.

Trident SAP Liquid 90:60 provides the optimum dose and ratio of EPA and DHA in **triglyceride form (TG)** for overall maintenance of good health.

ACTIVE INGREDIENTS

Each teaspoon contains:

Fish oil (from wild, deep-sea whole anchovies [Engraulidae] and/or whole sardines [Clupeidae])	4,500 mg
Providing:	
Eicosapentaenoic acid (EPA)	900 mg
Docosahexaenoic acid (DHA)	600 mg

Other ingredients: Natural lemon oil, green tea (*Camellia sinensis*) and rosemary (*Rosmarinus officinalis*) extracts to prevent oxidation.

Contains no: Gluten, soy, wheat, corn, eggs, dairy, yeast, preservatives, artificial flavour or colour, starch, or sugar.

This product is non-GMO.

Trident SAP Liquid 90:60 contains 200 ml per bottle.

DIRECTIONS FOR USE

All ages above 1 year old: Take 1 teaspoon daily or as directed by your healthcare practitioner.

INDICATIONS

Trident SAP Liquid 90:60 can help:

- Promote cardiovascular health and improve inflammatory response.
- Support cognitive and mental health.
- Foster male and female reproductive health.
- Enhance development and function of brain, eyes, and nerves.
- Mitigate symptoms of autoimmune disorders such as multiple sclerosis and rheumatoid arthritis.

Refrigerate after opening and use within 60 days.

Do not use if seal is broken. Keep out of reach of children.

PURITY, CLEANLINESS, AND STABILITY

All ingredients listed for each **Trident SAP Liquid 90:60** lot number have been tested by an ISO 17025 accredited third-party laboratory for identity, potency, and purity.

Each lot of **Trident SAP Liquid 90:60** is tested for PCBs, dioxins, heavy metals, oxidative stability, and microbiological quality. **Trident SAP Liquid 90:60** contains a proprietary antioxidant blend to ensure freshness and oxidative stability.



Scientific Advisory Panel (SAP):
adding nutraceutical research
to achieve optimum health



351, Rue Joseph-Carrier, Vaudreuil-Dorion, Quebec, J7V 5V5
T 1 866 510 3123 • F 1 866 510 3130 • nfh.ca

WHAT ARE OMEGA-3 FATTY ACIDS?

Omega-3 fatty acids are long-chain polyunsaturated fatty acids and are considered essential fatty acids because they cannot be synthesized by humans, thus must be obtained from the diet.^[1] Fish and other marine life are rich sources of a special class of long-chain omega-3 fatty acids, eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA).^[1] Plant food and vegetable oils, such as flaxseed, canola, and soybean oil, lack EPA and DHA; however, they do contain the intermediate-chain omega-3 fatty acid α -linolenic acid (ALA). Over the last few decades, numerous health benefits have been attributed to the consumption of the omega-3 fatty acid family, ALA, EPA, and DHA.^[1]

THE OMEGA-6-TO-OMEGA-3 BALANCE

The contemporary Western diet is high in omega-6 fatty acids (omega-6 FAs) and deficient in omega-3 fatty acids (omega-3 FAs).^[2] This ultimately leads to an imbalance in the cellular concentration of omega-6-to-omega-3 FAs. Although omega-3 FAs are structurally and functionally distinct from the omega-6 FAs, each is metabolized competitively to form eicosanoids, such as thromboxanes (TX), prostaglandins (PG), and leukotrienes (LT).^{[2][3]} Eicosanoids have hormone-like effects and play an important role in cellular activity. Arachidonic acid (AA), a long-chain omega-6 FA, is the precursor for the harmful eicosanoids that promote inflammation (PGE₂, LTB₄), and stimulate platelet aggregation (TXA₂).^{[3][4]} Conversely, EPA is the precursor for the anti-inflammatory and antiaggregatory eicosanoids PGE₃, LTB₅, and TXA₃. By increasing omega-3 FA intake, EPA and DHA are incorporated into cell-membrane phospholipids at the expense of AA, and a balance between the omega-6 and omega-3 FAs is returned, thus promoting healthy cellular structure, fluidity, and activity.^{[3][4][5]}

RECOMMENDED OMEGA-3 INTAKES

Healthy Adults: ^[6]	
Fish oil	1–2 g/d
Coronary Disease Patients: ^[7]	
EPA+DHA	~1 g/d
Hypertriglyceridemia: ^[7]	
EPA+DHA	2–4 g/d
Neurological Disorders: ^[8]	
EPA	1–2 g/d
Inflammatory Disorders (rheumatoid arthritis): ^[4]	
EPA+DHA	3 g/d

SAFETY OF OMEGA-3 SUPPLEMENTATION

In 2012 the European Food Safety Authority has advised that a dose of up to 5g/day of EPA and DHA for a period of 16 weeks in supplement form is considered safe for adults and not associated with any lipid peroxidative changes or adverse events in relation to CVD risk. Omega-3 FAs are thus safe and well-tolerated, and can be taken with a wide variety of other supplements.^{[7][10]} Since omega-3 FAs are natural blood thinners, patients taking high dosages of aspirin or medicinal blood thinners should consult their healthcare professional before use.^[10]

NATURAL RATIO AND FORM

The majority of scientific literature that reports the health benefits of omega-3 FAs is based on fish-oil research in which the oils provide their natural fatty acid ratios and form.^[11] Fish oils are most commonly available in a standard 18:12 ratio (18% EPA and 12% DHA) or a concentrated 2:1 ratio, and supplied in triglyceride or ethyl ester form. Both triglyceride and ethyl ester forms are highly bioavailable and stable.^[11]

OMEGA-3 FATTY ACIDS AND NUTRITION RESEARCH

Cardiovascular Disease

Main mechanisms through which EPA and DHA reduce the risk of cardiovascular disease (CVD) and sudden death include reduction in malignant ventricular arrhythmias, suppression of blood clotting and atherosclerosis, improvement in arterial wall tone, and anti-inflammatory effects.^{[1][12]} Intake of 1 g/day of EPA+DHA in CVD patients can exert antiarrhythmic, hypolipidemic and antithrombotic effects, and at least 500 mg/day in patients without CVD can have cardioprotective effects.^[13]

Inflammation and Autoimmune Diseases

EPA and DHA have important implications in the prevention and treatment

of chronic inflammatory conditions, such as rheumatoid arthritis and asthma.^[3] EPA produces the eicosanoids PGE₃ and LTB₅, which reduce the duration and intensity of inflammation. DHA reduces transcription of the proinflammatory cytokines, interleukin 1 β , and tumour necrosis factor- α , C-reactive protein (CRP), serum amyloid A.^{[3][4]} New scientific evidence suggests that intake of fish oils may reduce rheumatoid arthritis risk and positively impact blood lipid profile in rheumatoid arthritis patients.

Cancers of the Breast, Prostate, and Colon

Both epidemiological and experimental evidence that the omega-3 FAs EPA and DHA may reduce the risk of breast, colon, and prostate cancer.^[5] The possible chemoprotective mechanisms through which fish oils act are suppression of neoplastic transformation, cell-growth inhibition, and enhanced apoptosis and antiangiogenicity.^[5] These biological effects are associated with the inhibition of omega-6 FAs (AA)-derived eicosanoids during omega-3 FA supplementation.^{[5][15]}

Central Nervous System Health and Mental Disorders

The central nervous system (CNS) is highly concentrated with long-chain fatty acids, specifically DHA and AA. A deficiency of DHA markedly affects neurotransmission, membrane-bound enzymes and ion channel activities, gene expression, intensity of inflammation and immunity, and synaptic plasticity.^[16] Increased intake of fish oils may help to improve signal transduction processes and reduce neuronal changes, symptoms and risk of schizophrenia, depression, stroke, and Alzheimer's disease.^[16] During pregnancy and lactation, DHA supplementation is crucial for optimal fetal neuronal development and visual acuity through to infancy.^[6]

Sexual and Reproductive Health

Recent evidence from clinical trials has shown positive effects of omega-3 fatty acids on reproductive health in men and women. A prospective cohort study of 100 women undergoing assisted reproductive techniques (ART) showed a positive association between serum long chain omega-3 fatty acid levels and probability of live birth.^[17] Supplementation of 1500 mg per day of omega-3 fatty acids for 6 months improved insulin resistance and hirsutism in PCOS patients.^[18] A significant improvement in seminal antioxidant status and reduced sperm DNA fragmentation was observed in participants supplemented with 1500 mg of DHA enriched oil for 10 weeks.^[19]

REFERENCES

- Holub, B.J. "Clinical nutrition: 4. Omega-3 fatty acids in cardiovascular care." *Canadian Medical Association Journal* Vol. 166, No. 5 (2002): 608–615.
- Simopoulos, A.P. "An increase in the omega-6/omega-3 fatty acid ratio increases the risk for obesity." *Nutrients*. Vol. 8, No. 3 (2016): 1–17.
- Calder P.C. "Omega-3 fatty acids and inflammatory processes: from molecules to man." *Biochem Soc Trans*. Vol. 45, No. 5 (2017):1105–1115.
- Gioxari, A., Kaliora A.C., Marantidou F., Panagiotakos D.P. "Intake of omega-3 polyunsaturated fatty acids in patients with rheumatoid arthritis: a systematic review and meta-analysis." *Nutrition*. Vol. 45 (2018):114–124.
- Abel, S., S. Riedel, and W.C. Gelderblom. "Dietary PUFA and cancer." *The Proceedings of the Nutrition Society*. Vol. 73, No. 3 (2014): 361–367.
- Simopoulos, A.P. "Omega-3 fatty acids and athletics." *Curr Sports Med Rep*. Vol. 6 No. 4 (2007):230–6.
- Kris-Etherton, P.M., W.S. Harris, and L.J. Appel; AHA Nutrition Committee. American Heart Association. "Omega-3 fatty acids and cardiovascular disease: new recommendations from the American Heart Association." *Arteriosclerosis, Thrombosis, and Vascular Biology* Vol. 23, No. 2 (2003): 151–152.
- Gören, J.L., and A.T. Tewksbury. "The use of omega-3 fatty acids in mental illness." *Journal of Pharmacy Practice*. Vol. 24, No. 5 (2011): 452–471.
- EFSA 2012: European Food Safety Authority. "Scientific opinion: Scientific opinion on the tolerable upper level of eicosapentaenoic acid (EPA), docosahexaenoic acid (DHA) and docosapentaenoic acid (DPA). EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA). EFSA Journal. Vol. 10, No. 7 (2012):2815
- Tajuddin, N., A. Shaikh, and A. Hassan. "Prescription omega-3 fatty acid products: Considerations for patients with diabetes mellitus." *Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy*. Vol. 9 (2016): 109–118.
- Dyerberg, J., et al. "Bioavailability of marine n-3 fatty acid formulations." *Prostaglandins, Leukotrienes and Essential Fatty Acids*. Vol. 83, No. 3 (2010): 137–141.
- Jones, P.J., and V.W. Lau. "Effect of n-3 polyunsaturated fatty acids on risk reduction of sudden death." *Nutrition Reviews*. Vol. 60, No. 12 (2002): 407–409.
- von Schacky, C. "Omega-3 index and sudden cardiac death." *Nutrients*. Vol. 2, No. 3 (2010): 375–388.
- Khawaja, O.A., J.M. Gaziano, and L. Djousse. "n-3 Fatty acids for prevention of cardiovascular disease." *Current Atherosclerosis Reports*. Vol. 16, No. 11 (2014): 1–7.
- Guz, Z., et al. "n-3 Polyunsaturated fatty acids and their role in cancer chemoprevention." *Current Pharmacology Reports*. Vol. 1, No. 5 (2015): 283–294.
- Weiser, M.J., C.M. Butt, and M.H. Mohajeri. "Docosahexaenoic acid and cognition throughout the lifespan." *Nutrients*. Vol. 8, No. 2 (2016): 1–40.
- Chiu Y.H., Karmon A.E., Gaskins A.J., Arvizu M., Williams P.L., Souter L., Rueda B.R., Hauser R., Chavarro J.E., EARST Study Team. "Serum omega-3 fatty acids and treatment outcomes among women undergoing assisted reproduction." *Hum Reprod*. Vol. 33, No. 1 (2018):156–165.
- Oner G., Muderris I.I. "Efficacy of omega-3 in the treatment of polycystic ovary syndrome." *Obstet Gynaecol*. Vol. 33, No. 3 (2013):289–91.
- Martinez-Soto J.C., Domingo J.C., Cordobilla B., Nicolas M., Fernandez L., Albero P., Gadea J., Landeras J. "Dietary supplementation with docosahexaenoic acid (DHA) improves seminal antioxidant status and decreases sperm DNA fragmentation." *Syst Biol Reprod Med*. Vol. 62, No. 6 (2016):387–395.