MyoSedate



Introducing a New Natural Muscle Relaxant Product From Designs for Health

By David Brady, ND, DC, CCN, DACBN & Suzanne Copp, MS

THIS INFORMATION IS PROVIDED FOR THE USE OF PHYSICIANS AND OTHER LICENSED HEALTH CARE PRACTITIONERS ONLY. THIS INFORMATION IS INTENDED FOR PHYSICIANS AND OTHER LICENSED HEALTH CARE PROVIDERS TO USE AS A BASIS FOR DETERMINING WHETHER OR NOT TO RECOMMEND THESE PRODUCTS TO THEIR PATIENTS. THIS MEDICAL AND SCIENTIFIC INFORMATION IS NOT FOR USE BY CONSUMERS. THE DIETARY SUPPLEMENT PRODUCTS OFFERED BY DESIGNS FOR HEALTH ARE NOT INTENDED FOR USE BY CONSUMERS AS A MEANS TO CURE, TREAT, PREVENT, DIAGNOSE, OR MITIGATE ANY DISEASE OR OTHER MEDICAL CONDITION.

- Helps maintain relaxed muscles even under stressful situations
- Provides a natural sedative effect without causing drowsiness
- May shorten muscle recovery from sports injuries and trauma
- Reduces acute and chronic muscle spasm, including myofascial trigger points
- Also serves as a sleep aid and general relaxant without causing sleep hangover
- Reduces generalized anxiety symptoms
- May increase pain tolerance in chronic pain syndromes

MyoSedate[™] is designed to help maintain calm and relaxed muscles even during times of stress. A blend of quality herbs and minerals has been combined in order to promote relaxation and provide a natural alternative for the management of acute and chronic muscle spasm. MyoSedate[™] will not cause the drowsiness common with the use of pharmaceutical muscle relaxants in the vast majority of patients. MyoSedate[™] can also serve as a generalized anti-anxiety formula and can promote better quality sleep without inducing sleep hangover.

MyoSedate™ contains valerian root (*Valeriana officinalis*), passion flower (*Passiflora incarnate*), lemon balm (*Melissa officinalis*), and skullcap (*Scutellaria laterifolia*), all safe nervine botanicals known for their relaxant properties. Valerian root (*Valeriana officinalis*) has demonstrated sedative effects due to its ability to induce the release of GABA from brain tissue. It has been suggested that the Passion flower (*Passiflora incarnate*) constituent apigenin binds to central benzodiazepines receptors, possibly causing anxiolytic effects without impairing memory, diminished motor skills or drowsiness. Lemon balm (*Melissa officinalis*) has been suggested to improve calmness via the inhibitory action of GABA, similar to benzodiazepines, but without the overt side-effects of these medications. The inclusion of Albion chelated minerals involved in muscular contraction and relaxation responses provides further comprehensive support for muscle spasm and myofascial tigger points.

Amount Per Serving	% Daily	Value
Calcium (as DimaCal® Di-Calcium Malato	75 mg e)	8%
Magnesium (as Di-Magnesium Malate)	150 mg	40%
Valerian	100 mg	×
(Valeriana officinalis)(root) [standardized to contain 0.8%	valerenic acid]	
Passion Flower	100 mg	*
(Passiflora incarnata)(flower) [standardized to contain 3.5%	flavonoids]	
Lemon Balm	75 mg	*

Other Ingredients: Microcrystalline cellulose, rice flour, vegetable

Uses for Myosedate

- Acute Muscle Spasm
- Chronic Muscle Spasm
- Insomnia
- Anxiety

- Sports Injuries
- Myofascial Pain Syndrome (Trigger Points)
- Stress Induced Muscle Tightness

Suggested Dosage

Take three capsules per day with meals, or as directed by your health care practitioner.

Research Abstracts

Passion Flower (Passiflora incarnata L.)--a reliable herbal sedative

Wien Med Wochenschr. 2002;152(15-16):404-6. Krenn L.

Extracts and fluid extracts from the aerial parts from Passiflora incarnata L. are widely used as components of herbal sedatives. Many pharmacological investigations confirm the sedative effects of Passiflorae herba. From some of the studies also anxiolytic effects can be deduced. As Passionflower is mainly used in combinations, clinical studies of the single drug are not available. Based on pharmacological data, the experiences of traditional use and the use in combinations Passiflora extracts are an important factor in the phytotherapy of tenseness, restlessness and irritability with difficulty in falling asleep.

An investigation into the efficacy of Scutellaria lateriflora in healthy volunteers.

Altern Ther Health Med. 2003 Mar-Apr;9(2):74-8. Wolfson P, Hoffmann DL.

Scutellaria lateriflora is an herbal medicine with long-standing traditional use as a relaxing nervine. There has been controversy in the literature with regards to its efficacy, and this study was designed to clarify its effectiveness in reducing anxiety, one of the phytotherapeutic indications. A double blind, placebo-controlled study of healthy subjects demonstrated noteworthy anxiolytic effects. The use of phytomedicines for the treatment of anxiety is reviewed, as is the published literature on S. lateriflora and its putative toxicity.

Phytochemical and biological analysis of skullcap (Scutellaria lateriflora L.): a medicinal plant with anxiolytic properties.

Phytomedicine. 2003 Nov;10(8):640-9. Awad R, Arnason JT, Trudeau V, Bergeron C, Budzinski JW, Foster BC, Merali Z.

The phytochemistry and biological activity of Scutellaria lateriflora L. (American skullcap) which has been traditionally used as a sedative and to treat various nervous disorders such as anxiety was studied. In vivo animal behaviour trials were performed to test anxiolytic effects in rats orally administered S. laterifolia extracts. Significant increases in the number of entries into the center of an "open-field arena"; number of unprotected head dips, number of entries and the length of time spent on the open arms of the Elevated Plus-Maze were found. The identification and quantification of the flavonoid, baicalin in a 50% EtOH extract (40 mg/g) and its aglycone baicalein in a 95% EtOH extract (33 mg/g), as well as the amino acids GABA in H2O and EtOH extracts (approximately 1.6 mg/g) and glutamine in a H2O extract (31 mg/g), was performed using HPLC. These compounds may play a role in anxiolytic activity since baicalin and baicalein are known to bind to the benzodiazepine site of the GABA receptor and since GABA is the main inhibitory neurotransmitter.

Clinical thinking and decision making in practice. A young woman with muscle cramps.

Ned Tijdschr Geneeskd. 2001 Apr 28;145(17):818-21. Stevens M, Deinum J, Willems MH.

A 23-year-old woman with a history of episodic stiffening of the limbs since her early adolescence, reported attacks of muscle contraction accompanied by feelings of panic but without loss of consciousness. Epileptic seizures, e.g. progressive myoclonic epilepsy, metabolic encephalopathy, dystonia and tetany were suggested. During the examination, muscle contraction could be provoked whilst measuring the blood pressure. Tetany based on primary hypoparathyroidism was diagnosed from the medical history as well as the neurological examination. This was confirmed by laboratory tests. She was successfully treated with calcium and I-alpha-(OH)2 vitamin D3.

References:

- Hadley S, Petry JJ. Valerian. Am Fam Physician 2003;67:1755-1758.
- Wagner H, Jurcic K. On the spasmolytic activity of valeriana extracts (author's transl). Planta Med 1979;37:84-86. [Article in german]
- Monograph. Valeriana officinalis. Altern Med Rev 2004 Dec;9(4):438-41.
- Dhawan K, Dhawan S, Sharma A. Passiflora: a review update. J Ethnopharmacol 2004 Sep;94(1):1-23. Krenn L. [Passion flower (Passiflora incarnate L.)-a reliable herbal sedative. Wien Med Wochenschr 2002;152(15-16):404-6. [Article in German]
- Kennedy DO, Little W, Scholey AB. Attenuation of laboratory-induced stress in human after acute administration of Melissa officinalis (Lemon Balm). Psychosom Med 2004 Jul-Aug;66(4): 607-13.
- Carlini EA. Plants and the central nervous system. Pharmacol Biochem Behav 2003 Jun;75(3):501-12
- Patora J, Klimek B. Flavinoids from lemon balm (Melissa officinalis L., Lamiaceae). Acta Pol Pharm 2002 Mar-Apr;59(2):139-43.
- Awad R, Arnason JT, Trudeau V, et al. Phytochemical and biological analysis of skullcap (Scutellaria lateriflora L.): a medicinal plant with anxiolytic properties. Phytomedicine 2003 Nov; 10(8):640-9.
- Attygalle D, Rodrigo D. Magnesium as first line therapy in the management of tetanus: a prospective study in 40 patients. Anaesthesia 2002 Aug;57(8):811-7.
 Rossier P, van Erven S, Wade DT. The effect of magnesium oral therapy on spasticity in a patient with multiple sclerosis. Eur J Neurol 2000 Nov;7(6):741-4.
 Pizzorno JE, Murray MT. Textbook of Natural Medicine (2nd Ed.), Churchill Livingstone, New York, 1999.

- 13. Fetrow CW, Avila JR. Complimentary & Alternative Medicines: Professional's Handbook. Springhouse, Springhouse, PA, 1999.
- 14. Werbach MR, Murray, MT. Botanical Influences on Illness: A sourcebook of clinical research. Third Line Press, Tarzana, California, 1994.
- 15. Bascom A. Incorporating Herbal Medicine Into Clinical Practice. F.A. Davis Co., Philadelphia, 2002.
- 16. Cheallier A. Encyclopedia of Herbal Medicine. Dorling Kindersley, London, 2000.
- 17. Robbers JE, Speedie MK, Tyler VE. Pharmacognosy and Pharmacobiotechnology. Williams & Wilkins, Baltimore, 1996.
- 18. PDR for Nutritional Supplements, 1st Ed. Medical Economics/Thompson Healthcare, 2001.
- 19. PDR for Herbal Medicines, 1st Ed. Medical Economics/Thompson Healthcare, 1998.
- 20. Bone K. A Clinical Guide to Blending Liquid Herbs St. Louis, MO: Churchill Livingstone; 2003.
- Natural Medicines Comprehensive Database Stockton, CA: Therapeutic Research Facility; 2003.
- 22. Kennedy DO et al. Attenuation of laboratory-induced stress in humans after acute administration of Melissa officinalis (Lemon Balm). Psychosomatic Med. 2004;68(4):607-613.