



Elevit Frequently Asked Questions

SEPTEMBER 2025

Dear healthcare professionals

Elevit is the world's most clinically researched pregnancy multivitamin brand and is trusted by millions of mothers across the globe.

The pregnancy journey brings unique nutritional needs, and women want to make the best choices for their health and their baby's development. Healthcare professionals play a vital role in guiding those decisions, offering trusted advice based on evidence and experience.

At Elevit, we recognise the importance of supporting you in that role. This FAQ has been created to provide clear, relevant and up-to-date information about the Elevit range, so you can feel confident in your recommendations and in answering the questions your patients may have at every stage of their journey - from preconception through to breastfeeding.

We hope you find this material useful!



Click on a question to start. Abridged answers to each question can be accessed via the clock icons.

QUESTION 1



There are so many options for pregnancy and breastfeeding multivitamins – what is it that makes Elevit different from other brands?

QUESTION 2

The data around many pregnancy and breastfeeding multivitamins are limited. How is Elevit different?

QUESTION 3



My patients are already following the guidelines for folic acid and iron supplementation. Is it really necessary to take something more comprehensive beyond this?

QUESTION 4



My patients are already taking supplements during the 1st trimester. Is it really necessary to take something during the 2nd and 3rd trimesters?

QUESTION 5



A lot of my patients feel they get adequate nutrition through their diets – how can I educate them on the need for supplementation?

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Other multivitamins offer a simpler solution to take throughout pregnancy and breastfeeding. I'm worried the Elevit portfolio will be too complicated for my patients

QUESTION 7



Staging sounds like a way to sell more products!

QUESTION 8

Does Elevit support fertility and improve the chances of conception?

There are so many options for pregnancy and breastfeeding multivitamins – what is it that makes Elevit different from other brands?

Elevit is the world's most clinically researched prenatal multivitamin brand and is recommended by HCPs worldwide for its innovative, evidence-based approach to maternal nutrition.

With safety and efficacy proven by 22 clinical studies supported by 30 scientific publications spanning over 30 years, Elevit's tailored, stage-specific formulations have been designed by experts to support the nutritional needs that evolve from preconception through to breastfeeding.¹⁻⁶

Elevit, which is available over the counter in many markets, delivers a combination of nutrients – including folic acid, vitamin D, iron, iodine and omega-3 fatty acids – at optimised doses in alignment with WHO and EFSA recommendations.⁷⁻⁹

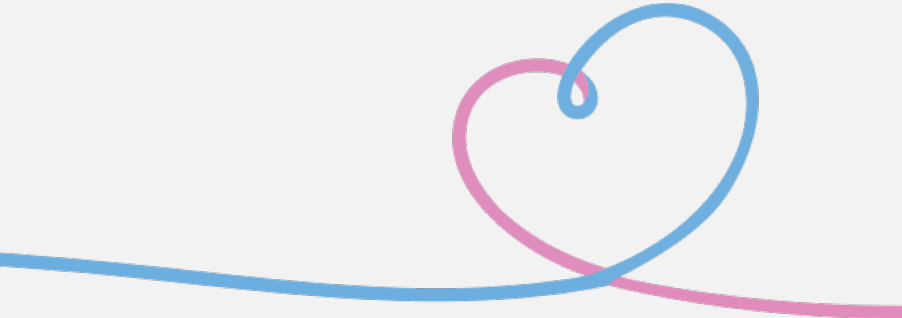
Additionally, the formulations contain higher levels of vital ingredients like folic acid and iron compared to competitors*, ensuring mothers and babies receive the right levels of nutrition to support healthy development.⁵

*Appropriate steps should be taken to ensure this statement complies with regulations in your respective country.

Abbreviations: EFSA, European Food Standards Agency; WHO, World Health Organization.

References: 1. Liu J et al. *Nutrition Reviews*. 2025. Online ahead of print: <https://doi.org/10.1093/nutrit/nuaf079>. 2. Schaefer E et al. *Vitam Miner* 2016;5:1. 3. Czeizel AE. *Int J Med Sci* 2004;1(1):50-61. 4. Massari M et al. *Nutrients* 2020;12(8):2432. 5. Bayer data on file. 6. Schaefer E et al. *Nutrients* 2020;12(12):3849. 7. WHO. Daily iron and folic acid supplementation during pregnancy. Available at: <https://www.who.int/tools/elena/interventions/daily-iron-pregnancy>. Accessed June 2025. 8. EFSA. *EFSA Journal* 2010;8(3):1461. 9. EFSA. Dietary reference values. Available at: <https://www.efsa.europa.eu/en/topics/topic/dietary-reference-values>. Accessed June 2025. 10. McAlpine JM et al. *PHN* 2020;23(13):2434-2444.

Given that the market is saturated with prenatal multivitamins that lack strong scientific evidence and contain combinations that are not clinically tested, it's clear why Elevit has been trusted by millions of mothers worldwide as a source of nutritional support from preconception through pregnancy and breastfeeding.^{5,10}



There are so many options for pregnancy and breastfeeding multivitamins – what is it that makes Elevit different from other brands?



Elevit is the world's most clinically researched pregnancy multivitamin brand. It offers mothers evidence-based, stage-specific nutritional support, backed by 22 clinical studies and over 30 scientific publications.¹⁻⁶

Elevit, which is available over the counter in many markets, offers a tailored, evidence-based approach that has been designed by experts to meet the evolving nutritional needs of the different stages of pregnancy, from preconception to breastfeeding. Each of the three product formulations, which contain a combination of ingredients including folic acid, vitamin D, iron, iodine and omega-3 fatty acids, contain doses that align with WHO and EFSA recommendations and are designed to meet stage-specific nutritional demands, with proven efficacy and safety.⁷⁻⁹

Given that the market is saturated with prenatal multivitamins that lack strong scientific evidence and contain combinations that are not clinically tested, it's clear why Elevit has been trusted by millions of mothers worldwide as a source of nutritional support during every stage of pregnancy.^{5,10}

Abbreviations: EFSA, European Food Standards Agency; WHO, World Health Organization.

References: 1. Liu J et al. Nutrition Reviews. 2025. Online ahead of print: <https://doi.org/10.1093/nutrit/nuaf079>. 2. Schaefer E et al. *Vitam Miner* 2016;5:1. 3. Czeizel AE. *Int J Med Sci* 2004;1(1):50-61. 4. Massari M et al. *Nutrients* 2020;12(8):2432. 5. Bayer data on file. 6. Schaefer E et al. *Nutrients* 2020;12(12):3849. 7. WHO. Daily iron and folic acid supplementation during pregnancy. Available at: <https://www.who.int/tools/elena/interventions/daily-iron-pregnancy>. Accessed June 2025. 8. EFSA. *EFSA Journal* 2010;8(3):1461. 9. EFSA. Dietary reference values. Available at: <https://www.efsa.europa.eu/en/topics/topic/dietary-reference-values>. Accessed June 2025. 10. McAlpine JM et al. *PHN* 2020;23(13):2434-2444.



The data around many pregnancy and breastfeeding multivitamins are limited. How is Elevit different?

Elevit is a brand backed by extensive clinical research demonstrating its efficacy in supporting fertility and improving pregnancy outcomes. It has been proven to increase the chances of and shorten the time to conception, while also reducing the risk of congenital abnormalities, including NTDs, and maternal pregnancy outcomes, including iron-deficiency anaemia and pre-eclampsia.¹⁻⁶

In fact, Elevit is the world's most clinically researched pregnancy multivitamin brand, with its three products supported by 22 clinical studies and over 30 scientific publications, involving >50,000 women and spanning 30+ years.³ This means that unlike other pregnancy and breastfeeding multivitamins, **Elevit's expertly formulated combinations are backed by extensive scientific evidence.**^{3,7}



Abbreviation: NTD, neural tube defect.

References: 1. Czeizel A et al. *Int J Vitam Nutr Res* 1996;66. 2. Czeizel AE. *Int J Med Sci* 2004;1(1):50-61. 3. Liu J, et al. *Nutrition Reviews*. 2025. Online ahead of print: <https://doi.org/10.1093/nutrit/nuaf079>. 4. Lin S et al. *Chin J Pract Gynaecol Obstet* 2020;36(2). 5. Dudás M et al. *Arch Gynecol Obstet* 1995;256:115-123. 6. Luddi A et al. *Reprod Biol Endocrinol* 2016;14:57. 7. McAlpine JM et al. *PHN* 2020;23(13):2434-2444.

My patients are already following the guidelines for folic acid and iron supplementation. Is it really necessary to take something more comprehensive beyond this?

While supplementing with folic acid and iron is a great start, the nutritional requirements during pregnancy extend well beyond these nutrients. For example:

**B6
+
B12**

There is a surge in demand for vitamins B6 and B12, which work with folate to facilitate one-carbon metabolism, essential for DNA synthesis and normal cell growth during pregnancy.^{1,2} B12 also works with folate to support homocysteine metabolism, which when disrupted has been associated with NTDs, pre-eclampsia, spontaneous abortion and placental abruption³

I

The need for iodine increases, and adequate intake can help support fetal neurological development and protect against hypothyroidism, which can cause pre-eclampsia, low birth weight, preterm birth and spontaneous abortion⁴

Zn

There is a rise in demand for zinc, which is essential for cell division, protein synthesis and growth, and adequate intake can help protect against congenital malformations, low birth weight, impaired fetal growth and preterm delivery⁵

C

Vitamin C demands increase, supporting the absorption of iron and helping reduce the risk of placental abruption, PROM, pre-eclampsia, orofacial clefts and maternal UTIs^{1,5,6}

Furthermore, clinical evidence shows that taking a comprehensive micronutrient supplement like Elevit – beyond just folic acid and iron – is **associated with a greater reduction in the risk of NTDs** compared with folic acid alone (92% vs 46–70%, respectively).^{7,8}

Abbreviation: NTD, neural tube defect; PROM, premature rupture of membranes; UTI, urinary tract infection.

References: 1. Adams JB et al. *Matern Health Neonatal Perinatal* 2022;8(4). 2. Pentieva K et al. *Proc Nutr Soc* 2024;1-15. 3. Refsum H. *Br J Nutr* 2011;85(Suppl 2): S109-S113. 4. Obican SG et al. *Birth Defects Res A Clin Mol Teratol* 2012;94(9):677-682. 5. Jouanne M et al. *Nutrients* 2021;13(2):692. 6. Rumbold A et al. *Cochrane Database Syst Rev* 2015;9:CD004072. 7. Czeizel A. *Paediatr Drugs* 2000;2(6):437-449. 8. Blencowe H et al. *Int J Epidemiol* 2010;39:i110-121.

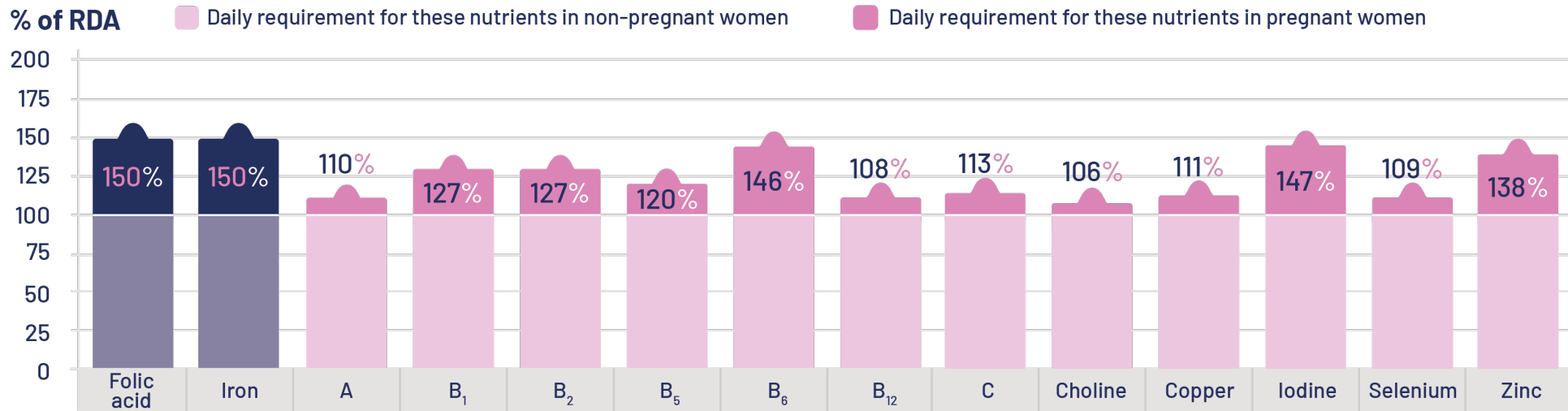
Question 3



My patients are already following the guidelines for folic acid and iron supplementation. Is it really necessary to take something more comprehensive beyond this?



During pregnancy there is an increased need for many nutrients to support growth and development¹⁻³



Did you know?

69% of women of reproductive age worldwide have micronutrient deficiencies, and more than half of infertile women have insufficient levels of vitamin B12^{4,5}

Elevit formulations are rich in high-quality micronutrients like those listed above, along with other necessary micronutrients, ensuring mothers and babies have the best chance for a healthy pregnancy and birth.

Abbreviation: RDA, recommended daily allowance.

References: 1. National Academies Press. Dietary Reference Intakes for vitamin C, vitamin E, selenium and carotenoids. 2000. Available at: <https://nap.nationalacademies.org/9810>. Last accessed August 2025. 2. Dietary Reference Intakes for vitamin A, vitamin K, arsenic, boron, chromium, copper, iodine, iron, manganese, molybdenum, nickel, silicon, vanadium and zinc. 2001. Available at: <https://nap.nationalacademies.org/10026>. Last accessed August 2025. 3. Dietary Reference Intakes for thiamine, riboflavin, niacin, vitamin B6, folate, vitamin B12, pantothenic acid, biotin, and choline. 1998. Available at: <http://nap.nationalacademies.org/6015>. Last accessed August 2025. 4. Stevens GA et al. *Lancet Glob Health* 2022;10(11):e1590–e1599. 5. Schaefer E, Nock D. *Clin Med Insights: Women's Health* 2019;12:1

My patients are already following the guidelines for folic acid and iron supplementation. Is it really necessary to take something more comprehensive beyond this?

Nutritional needs in pregnancy extend beyond iron and folic acid.

**B6
+
B12**

More **vitamin B6 and B12** are needed, since these interact with folate to provide the building blocks for DNA synthesis and normal cell growth^{1,2}

I

Iodine supports fetal neurological development and prevents maternal hypothyroidism^{3,4}

Zn

Zinc helps prevent congenital malformations, low birth weight, impaired fetal growth and preterm delivery⁴

C

Vitamin C supports the absorption of iron and helps reduce the risk of placental abruption, PROM, orofacial clefts and maternal UTIs^{4,5}



Clinical evidence shows that taking a comprehensive micronutrient– beyond just folic acid and iron – is **associated with a greater reduction in the risk of NTDs** compared with folic acid alone (92% vs 46–70%, respectively).^{6,7}

Elevit offers a comprehensive combination of micronutrients, supporting a healthy pregnancy and baby.

Abbreviations: NTD, neural tube defect; PROM, premature rupture of membranes; UTI, urinary tract infection.

References: 1. Adams JB et al. *Matern Health Neonatal Perinatol* 2022;8(4). 2. Pentieva K et al. *Proc Nutr Soc* 2024;1–15. 3. Obican SG et al. *Birth Defects Res A Clin Mol Teratol* 2012;94(9):677–682. 4. Jouanne M et al. *Nutrients* 2021;13(2):692. 5. Rumbold A et al. *Cochrane Database Syst Rev* 2015;9:CD004072. 6. Czeizel A. *Paediatr Drugs* 2000;2(6):437–449. 7. Blencowe H et al. *Int J Epidemiol* 2010;39:i110–121.

My patients are already taking supplements during the 1st trimester. Is it really necessary to take something during the 2nd and 3rd trimesters?

As pregnancy progresses from the 1st into the 2nd and 3rd trimesters, nutritional demands change significantly.

DHA plays a vital role in healthy brain function and eye development, particularly during the 2nd and 3rd trimesters when neuronal and retinal tissues undergo exponential growth.¹⁻³ It also protects against preterm birth – for this reason, international clinical guidelines recommend DHA supplementation during later pregnancy.^{4,5}

Adequate folic acid intake continues to be crucial. Continued supplementation can increase maternal and cord blood folate status, preventing the increase in homocysteine that otherwise occurs in late pregnancy, thereby helping protect against pre-eclampsia.⁶

Vitamin D and calcium work synergistically to support fetal bone formation, and iodine, which plays a crucial role in thyroid hormone synthesis, is vital for supporting fetal brain development.^{7,8}



Adequate nutritional intake during the 2nd and 3rd trimesters is also crucial for maternal health. Maternal blood volume increases, **resulting in reduced serum concentrations of vitamin A and iron.**^{9,10} This puts mothers at an increased risk of deficiency in these nutrients, which can result in anaemia.^{9,11}

Adequate **vitamin B6 intake has been shown to reduce nausea and vomiting, and calcium supplementation can significantly reduce the risk of pre-eclampsia and pregnancy-induced hypertension**, which both typically occur in the second trimester and beyond.¹²⁻¹⁶



Elevit delivers expertly formulated combinations of essential high-quality micronutrients, helping ensure mothers and babies receive optimal nutrition across every stage of pregnancy.

*Recommendation from EFSA (250 mg/day EPA & DHA for adults; +100–200 mg DHA for pregnant women) and the World Association of Perinatal Medicine (at least 200 mg/day DHA for pregnant women).

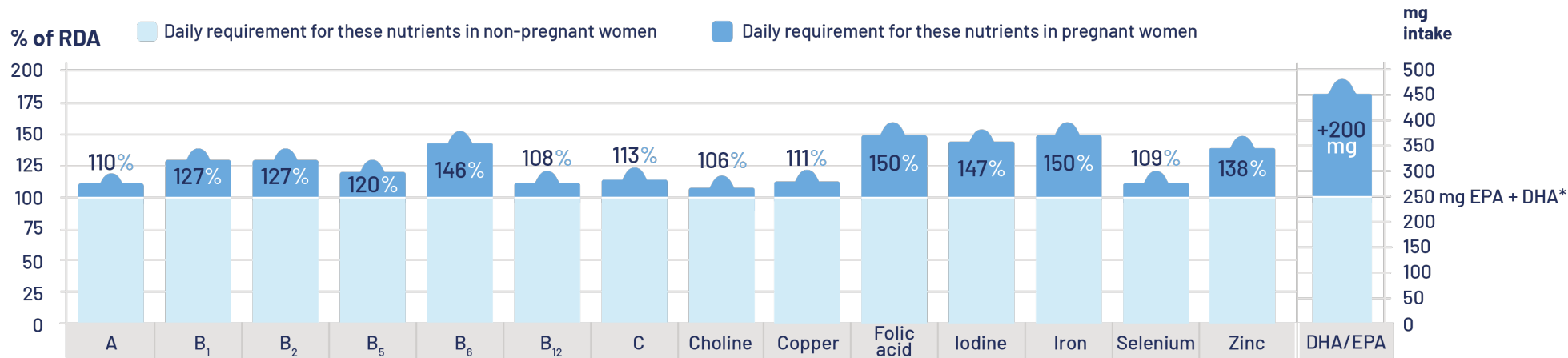
Abbreviations: DHA, docosahexaenoic acid; EPA, eicosapentaenoic acid.

References: 1. EFSA. Scientific Opinion on Dietary Reference Values for fats, including saturated fatty acids, polyunsaturated fatty acids, monounsaturated fatty acids, trans fatty acids, and cholesterol. *EFSA Journal* 2010; 8(3):1461. 2. Morse N et al. *Nutrients* 2012;4:799-840. 3. Archie JG et al. *Am J Clin Pathol* 2006;126:256-65. 4. Olsen SF, et al. *BJOG* 2000;107:382-395. 5. Cetin I et al. *AJOG MFM* 2024;6:101251. 6. McNulty B et al. *Am J Clin Nutr* 2013;98:92-98. 7. Diogenes EL, et al. *J Nutr* 2015;145:1515-1523. 8. Pan L et al. *BMC Pregnancy Childbirth* 2025;25(323). 9. Maia SB, et al. *Nutrients* 2019;11(681). 10. Georgieff MK et al. *BJOG* 2023;130(Suppl. 3):92-98. 11. WHO. Anaemia. Available at: <https://www.who.int/news-room/fact-sheets/detail/ANAEMIA?utm>. Accessed July 2025. 12. Sahakian V et al. *Obstet Gynecol* 1991;78(1):33-6. 13. Hofmeyr GJ et al. *CDSR* 2018;10:CD001059. 14. Sanchez-Ramos L et al. *Obstet Gynecol* 1994;84(3):349-353. 15. Luger RK, Kight BP. Hypertension in Pregnancy. 2022. StatPearls [Internet]. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK430839/>. Accessed June 2025. 16. Karrar SA et al. Preeclampsia. 2024. StatPearls [Internet]. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK570611/>. Accessed June 2025.

My patients are already taking supplements during the 1st trimester. Is it really necessary to take something during the 2nd and 3rd trimesters?



During pregnancy there is an increased need for nutrients to support growth and development¹⁻⁴



Did you know?

Evidence shows that taking an MMS provides superior risk reductions in various maternal and infant outcomes vs folic acid and iron alone. A meta-analysis also showed that consistent supplementation with an MMS throughout pregnancy is associated with superior risk reductions in low birth weight, preterm birth and still birth vs inconsistent supplementation.⁵

Elevit delivers expertly formulated combinations of essential high-quality micronutrients, helping ensure mothers and babies receive optimal nutrition across every stage of pregnancy.

*Recommendation from EFSA (250 mg/day EPA & DHA for adults; +100-200 mg DHA for pregnant women) and the World Association of Perinatal Medicine (at least 200 mg/day DHA for pregnant women).

Abbreviations: DHA, docosahexaenoic acid; EFSA, European Food Standards Agency; EPA, eicosapentaenoic acid; MMS, multiple micronutrient supplement; RDA, recommended daily allowance.

References: 1. National Academies Press. Dietary Reference Intakes for vitamin C, vitamin E, selenium and carotenoids. 2000. Available at: <https://nap.nationalacademies.org/9810>. Last accessed August 2025. 2. Dietary Reference Intakes for vitamin A, vitamin K, arsenic, boron, chromium, copper, iodine, iron, manganese, molybdenum, nickel, silicon, vanadium and zinc. 2001. Available at: <https://nap.nationalacademies.org/10026>. Last accessed August 2025. 3. Dietary Reference Intakes for thiamine, riboflavin, niacin, vitamin B6, folate, vitamin B12, pantothenic acid, biotin, and choline. 1998. Available at: <http://nap.nationalacademies.org/6015>. Last accessed August 2025. 4. Cetin I et al. *Am J Obstet Gynecol* 2024;6:101251. 5. Smith ER et al. *Adv Nutr* 2025;16:100455.

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As pregnancy progresses from the 1st into the 2nd and 3rd trimesters, nutritional demands increase significantly to support healthy fetal growth, including the development of bones and vital organs.



- DHA plays a vital role in the development and functioning of the fetal brain and eyes, particularly during the 2nd and 3rd trimester when neuronal and retinal tissues undergo exponential growth.¹⁻³ It also protects against preterm birth^{4,5}
- Adequate folic acid intake prevents the increase in homocysteine that otherwise occurs in late pregnancy, thereby helping protect against NTDs and pre-eclampsia⁶
- Vitamin D and calcium work synergistically to support fetal bone formation and mineralisation; and iodine, which plays a crucial role in thyroid hormone synthesis, is vital for supporting fetal brain development^{7,8}



- Adequate nutritional intake during the 2nd and 3rd trimesters is also crucial for maternal health. Increased maternal blood volume increases the risk of vitamin A and iron deficiency, which is associated with increased risk of anaemia⁹⁻¹¹
- Vitamin B6 can reduce nausea and vomiting, and calcium supplementation can significantly reduce the risk of preeclampsia and pregnancy-induced hypertension¹²⁻¹⁴



Elevit delivers expertly formulated combinations of essential high-quality micronutrients, helping ensure mothers and babies receive optimal nutrition across every stage of pregnancy.

Abbreviations: DHA, docosahexaenoic acid; NTD, neural tube defect.

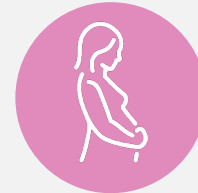
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A lot of my patients feel they get adequate nutrition through their diets – how can I educate them on the need for supplementation?

Pregnancy requires a nutrient-rich diet to support maternal and fetal needs, yet many pregnant women, in both high- and low-income countries, do not consume sufficient nutrients.^{1,2} For example, approximately 28% of pregnant women in the US are estimated to be vitamin D deficient, about 38% globally are deficient in iron, and studies from various countries report DHA and EPA deficiency rates ranging from 90% to 98%.²⁻⁵ Additionally, despite food fortification, only 8% of women of childbearing age in the US consume the recommended 400 µg/day of folic acid.^{6,7}

Nutritional demands evolve from the first trimester through to breastfeeding, making it difficult for many women to consistently adapt their diet.⁸ Factors such as severe morning sickness, dietary restrictions (e.g., vegetarianism, veganism or food intolerances) and multiple gestations can further elevate risk of deficiencies.^{9,10}

Elevit's comprehensive formulations have been clinically proven to support maternal and fetal outcomes across the different stages of pregnancy, from preconception to breastfeeding.¹¹⁻¹⁴ Each micronutrient combination has been expertly designed to deliver stage-specific nutrition, offering high-quality nutritional support, delivered through a convenient, once-daily tablet that can be taken at any time of the day.



This means that with Elevit, mothers can be confident that they are consistently achieving optimal nutrition levels every day of every stage.

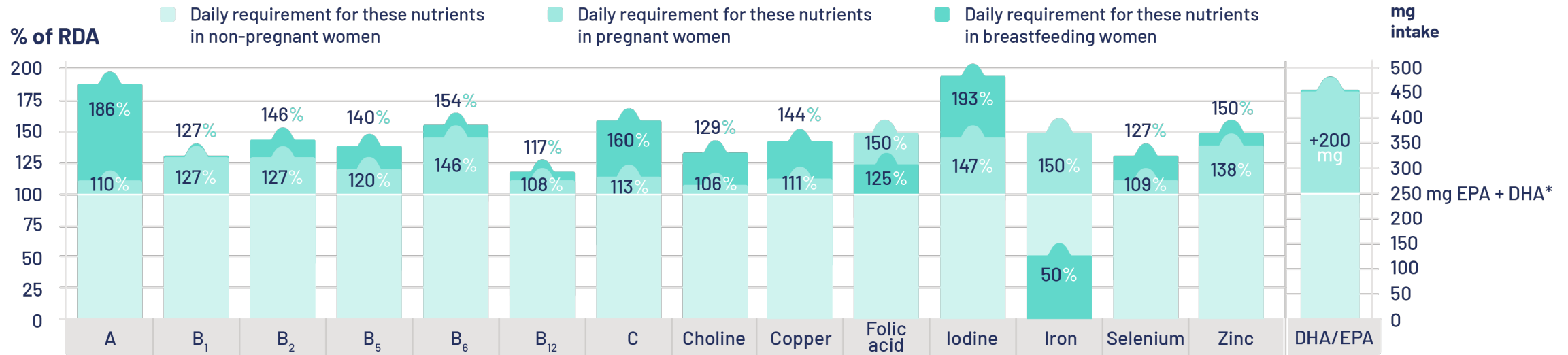
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References: 1. FIGO. Toxic chemicals and environmental contaminants in prenatal vitamins. Available at: <https://www.figo.org/resources/figo-statements/toxic-chemicals-and-environmental-contaminants-prenatal-vitamins>. Accessed June 2025. 2. Gernand AD et al. *Nat Rev Endocrinol* 2016;12(5):274-289. 3. Derman RJ, Patted A. *Int J Gynecol Obstet* 2023;162(Suppl 2):78-82. 4. Mishra VJ et al. *Int J Reprod Contracept Obstet Gynecol* 2023;12:3548-3554. 5. Granot E et al. *Mediators Inflamm* 2011;2011:493925. 6. Yang QH et al. *Am J Clin Nutr* 2007;85:1409-1416. 7. National Academies Press. Dietary Reference Intakes for Thiamin, Riboflavin, Niacin, Vitamin B6, Folate, Vitamin B12, Pantothenic Acid, Biotin, and Choline. 1998. Available at: <http://nap.nationalacademies.org/6015>. 8. Adams JB et al. *Matern Health Neonatal Perinatal* 2022;8(4). 9. Maslin K et al. *EJOG* 2021;257:76-83. 10. Nutrition During Pregnancy: Part I Weight Gain: Part II Nutrient Supplements. Assessment of nutrient needs. National Academies Press. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK235239/>. Accessed June 2025. 11. Schaefer E et al. *Vitam Miner* 2016;5:1. 12. Czeizel AE. *Int J Med Sci* 2004;1(1):50-61. 13. Massari M et al. *Nutrients* 2020;12(8):2432. 14. Schaefer E et al. *Nutrients* 2020;12(12):3849.

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During pregnancy there is an increased need for nutrients to support growth and development¹⁻⁴



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*Recommendation from EFSA (250 mg/day EPA & DHA for adults; +100-200 mg DHA for pregnant women) and the World Association of Perinatal Medicine (at least 200 mg/day DHA for pregnant women).

Abbreviations: DHA, docosahexaenoic acid; EFSA, European Food Standards Agency; EPA, eicosapentaenoic acid; RDA, recommended daily allowance.

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Question 5 (Abridged)

A lot of my patients feel they get adequate nutrition through their diets – how can I educate them on the need for supplementation?

Dietary intake of micronutrients in pregnant women is often insufficient.^{1,2} For example, it is estimated that around 28% of pregnant women in the US are deficient in vitamin D, and around 38% globally are deficient in iron.^{2,3} Nutritional demands evolve from the first trimester through to breastfeeding, making it difficult for many women to consistently adapt their diet.⁴ Factors such as severe morning sickness, dietary restrictions (e.g., vegetarianism, veganism or food intolerances), multiple gestations and busy schedules can further elevate risk of deficiencies.^{5,6}

Elevit has been clinically proven to improve nutritional status of pregnant women and to support maternal and fetal outcomes across all stages of pregnancy.⁷⁻¹⁰ Each formulation has been expertly designed to deliver stage-specific nutrition, delivered through a convenient, once-daily tablet/capsule that can be taken at any time of the day. This means that with Elevit, mothers can be confident that they are consistently achieving optimal nutrition levels every day of every stage.

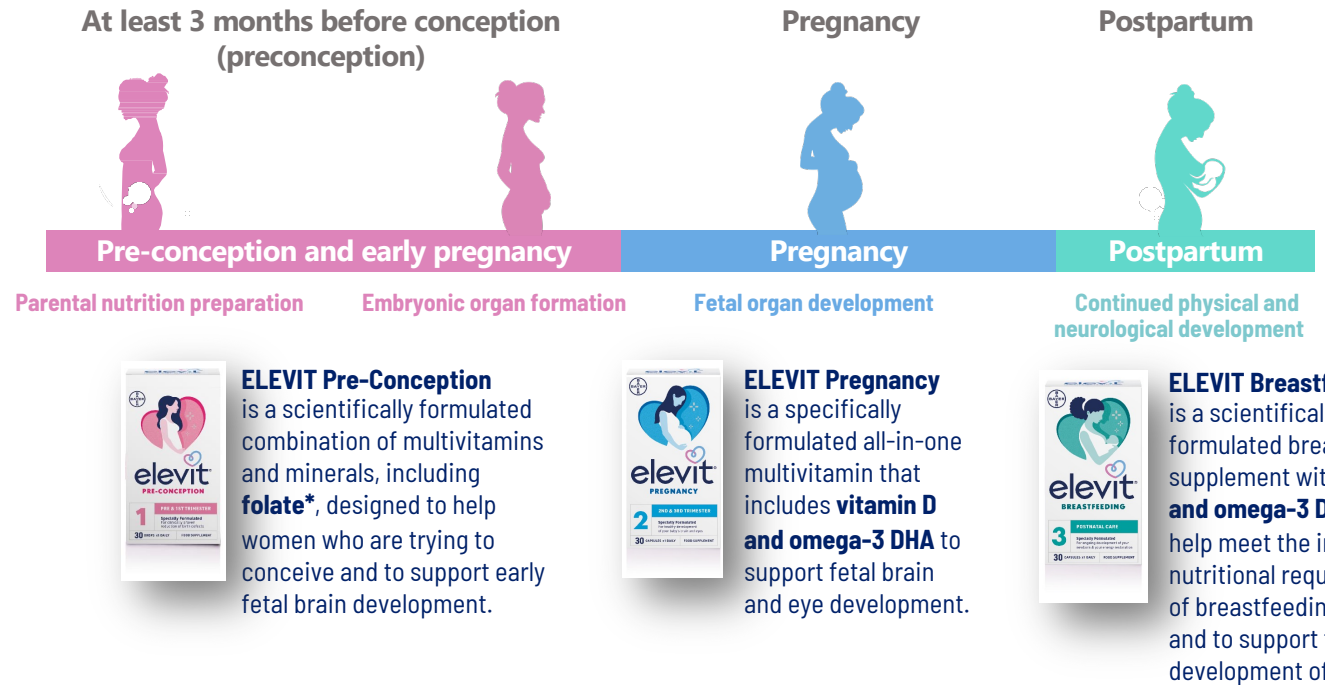
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Other multivitamins offer a simpler solution to take throughout pregnancy and breastfeeding. I'm worried the Elevit portfolio will be too complicated for my patients

Evidence shows that a woman's nutritional needs evolve throughout pregnancy and breastfeeding as her body changes and her baby grows – requiring her to adjust her intake accordingly.^{1,2}

The Elevit portfolio comprises a series of products that contain expertly formulated combinations of vitamins and minerals, designed to meet a woman's nutritional needs from preconception through pregnancy and breastfeeding, and ensure that mothers and babies receive the necessary nutrition at the time it's needed most.



Each Elevit product clearly states what stage it is for and requires patients to take just one tablet a day, offering a simple solution to meet the critical nutritional demands at every day of every stage.

*Elevit 1 is available in different formulations to meet different regulatory needs. In some instances, Metafolin (methylfolate) may not be included. Countries should adapt this statement accordingly. *Metafolin (L-methylfolate) is a form of folate that is biologically active and thus independent of MTHFR metabolism.

Abbreviation: DHA, docosahexaenoic acid; MTHFR, methylenetetrahydrofolate reductase.

References: 1. Adams JB et al. *Matern Health Neonatal Perinatol* 2022;8(4). 2. Jouanne M et al. *Nutrients* 2021;13(2):692.

Staging sounds like a way to sell more products!

The Elevit range has been innovated with one purpose: to provide mothers with an evidence-based, simple, stepwise solution for achieving optimal nutrition during pregnancy and breastfeeding. Each product contains a comprehensive combination of micronutrients, supported by clinical evidence for its use at each respective stage.¹⁻⁶



Stage 1: Elevit Preconception and Pregnancy contains a comprehensive combination of folate, iodine and copper, as well as vitamins B6, B12, D and more, and has been clinically proven to help women reach NTD-protective folate levels twice as fast compared to 400 µg folic acid monosupplementation.^{1*} It is also based on a formulation proven to reduce the risk of NTDs by up to 92%, superior to folic acid alone.^{2,3*}

Stage 2: Elevit Pregnancy contains DHA, iron, iodine, vitamins C and D, and other essential micronutrients. It is backed by clinical evidence showing that it significantly increases maternal and fetal DHA and vitamin D levels and reduces the risk of iron-deficiency anaemia and pre-eclampsia vs folic acid alone.^{4,5}

Stage 3: Elevit Breastfeeding, which contains DHA, calcium, lutein, iodine and selenium, as well as vitamins A and B12 and other vital ingredients, has been clinically proven to significantly increase maternal milk and blood DHA and β-carotene levels, helping support brain and eye development, and protecting against oxidative stress.⁶⁻⁸

Abbreviations: DHA, docosahexaenoic acid; NTD, neural tube defect.

*Applies to the Elevit Preconception containing 800 µg folic acid as available in China, Japan, Australia and Mexico.

1. Wang Y et al. *Reprod Med* 2017;26:1196-1206. 2. Czeizel A. *Paediatr Drugs* 2000;2(6):437-449. 3. Blencowe H et al. *Int J Epidemiol* 2010;39:i110-121. 4. Lin S et al. *Chin J Pract Gynaecol Obstet* 2020;36(2). 5. Massari M et al. *Nutrients* 2020;12(8):2432. 6. Schaefer E et al. *Nutrients* 2020;12(12):3849. 7. EFSA. Scientific Opinion on Dietary Reference Values for fats, including saturated fatty acids, polyunsaturated fatty acids, monounsaturated fatty acids, trans fatty acids, and cholesterol. *EFSA Journal* 2010;8(3):1461. 8. NIH. Beta-Carotene. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK501906/>. Accessed July 2025.



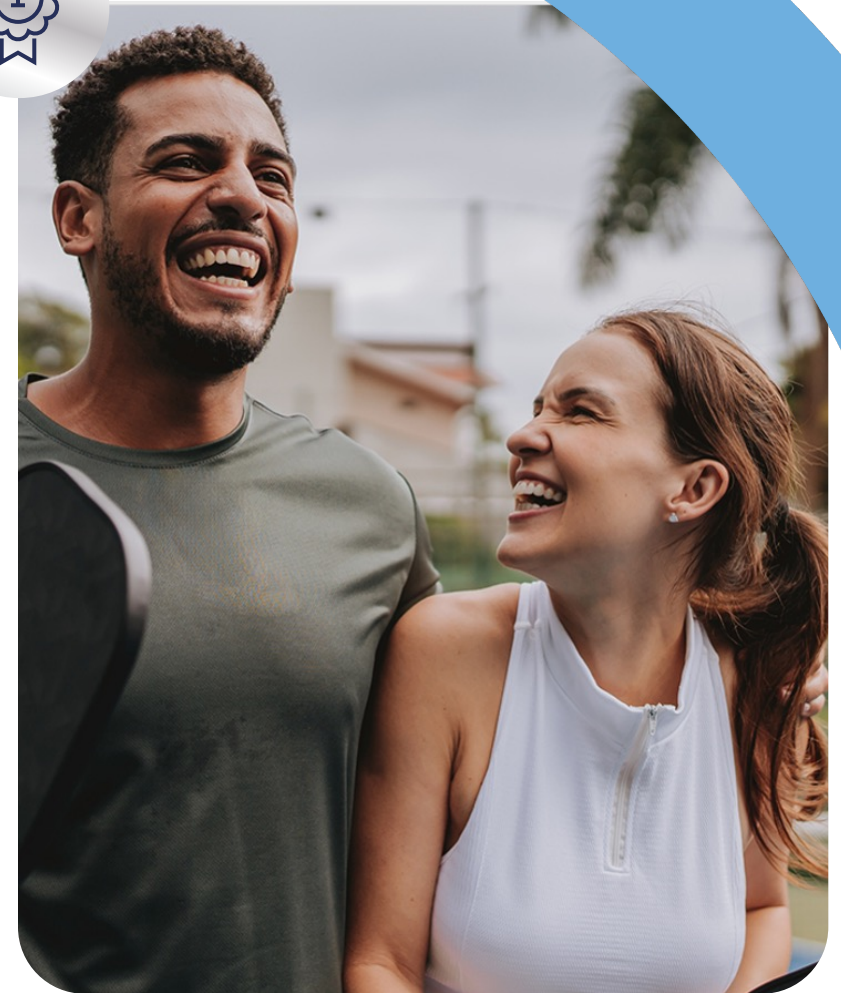
The staged approach isn't about selling more products – **it's about recognising that a woman's nutritional needs change significantly at each stage** and providing mothers with reassurance that they are meeting these shifting demands.

Staging sounds like a way to sell more products!

The Elevit range has been innovated with one purpose: to provide mothers with an evidence-based, simple, stepwise solution for achieving optimal nutrition during pregnancy and breastfeeding.

As well as delivering essential micronutrients, the specific formulations have been clinically proven to significantly reduce the risk of iron-deficiency anaemia, pre-eclampsia and congenital abnormalities - including NTDs - while also enriching breastmilk with DHA and β -carotene.¹⁻⁶

The staged approach isn't about selling more products - it's about recognising that a woman's nutritional needs change significantly at each stage and providing mothers with reassurance that they are meeting these shifting demands.



Abbreviations: DHA, docosahexaenoic acid; NTD, neural tube defect.

1. Wang Y et al. *Reprod Med* 2017;26:1196-1206. 2. Czeizel A. *Paediatr Drugs* 2000;2(6):437-449. 3. Blencowe H et al. *Int J Epidemiol* 2010;39:i110-121. 4. Lin S et al. *Chin J Pract Gynaecol Obstet* 2020;36(2). 5. Massari M et al. *Nutrients* 2020;12(8):2432. 6. Schaefer E et al. *Nutrients* 2020;12(12):3849.

Question 8



Does Elevit support fertility and improve the chances of conception?

It's extremely important for women who are planning to become pregnant to maintain adequate nutrient intake. This is because various vitamins and minerals play key roles in maintaining female fertility, and low folate levels during the preconception period have been linked to an increased risk of NTDs.¹⁻⁴

Despite this, many women don't get enough micronutrients – in fact, 69% of women of reproductive age worldwide are deficient in iron, zinc and/or folate.⁵

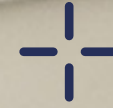
Elevit 1, is an expertly-formulated combination of micronutrients that has been designed to support all women – including those undergoing IVF – who are hoping to become pregnant. It has been clinically proven to increase the chances of conception, shorten the time to conception, and reduce the likelihood of miscarriage by supporting hormonal regulation, improving menstrual cycle regularity, enhancing the health of eggs by protecting them from oxidative stress, and counteracting elevated homocysteine levels.⁶⁻⁸

By recommending Elevit, you are supporting women planning a pregnancy by giving them the best possible chance of success.

Abbreviations: IVF, in-vitro fertilisation; NTD, neural tube defect.

1. Gaskins AJ, Chavarro JE. *Am J Obstet Gynecol* 2019;218:379–389. **2.** Tulenheimo-Silfvast A et al. *Acta Obstet Gynecol Scand* 2025;104:738–745. **3.** Schaefer E, Nock D. *Clin Med Insights: Women's Health* 2019;12:1. **4.** Wald NH et al. *J Med Screen* 2022;29(3):138–146. **5.** Stevens GA et al. *Lancet Glob Health* 2022;10(11):e1590–e1599. **6.** Czeizel A et al. *Int J Vitam Nutr Res* 1996;66:55–58. **7.** Luddi A et al. *Reprod Biol Endocrinol* 2016;14:57. **8.** Skoracka K et al. *Adv Nutr* 2021;12:2372–2386.





Thank You

