NOREA®

Beyond menstrual pain relief

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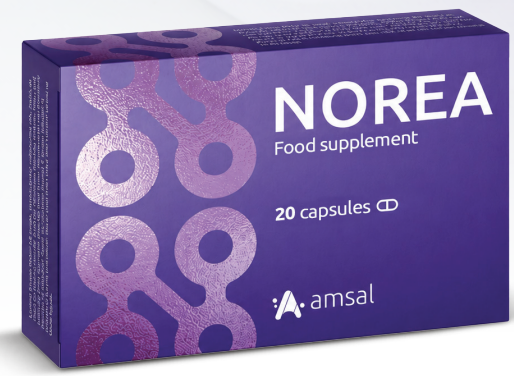
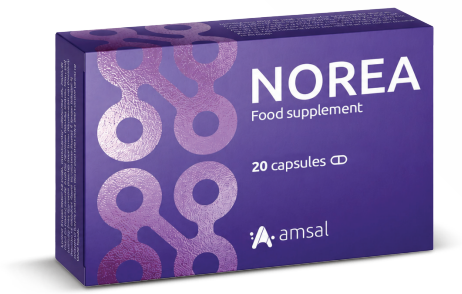


NOREA®



Beyond menstrual pain relief

- **Menstrual pain associated with primary dysmenorrhea**
- **Pelvic and lower back pain associated with the menstrual cycle**
- **Fatigue and exhaustion during the menstrual cycle**
- **Supporting hormonal balance and emotional well-being**
- **Women seeking comprehensive support throughout the menstrual cycle**
- **PMS symptoms (irritability, tension, mood swings)**

A unique multi-target formula combining Levagen+ (palmitoylethanolamide - PEA), standardized ginger extract, fully chelated magnesium bisglycinate, and vitamin B6 **provides comprehensive support for women throughout the menstrual cycle**, helping relieve menstrual pain, cramps and PMS symptoms.

NOREA 20 capsules	One capsule contains:
Ginger rhizome dry extract *(Zingiber officinale)* standardized to a minimum of 10% gingerols gingerols, at least	100 mg 10 mg
Magnesium bisglycinate ≥11% (fully chelated) providing elemental magnesium at least	200 mg 22 mg
Levagen+	175 mg
Vitamin B6 (Pyridoxine hydrochloride)	5 mg

Dosage

2 capsules twice daily

Maximum daily dose: 4 capsules. Start taking at the onset of PMS symptoms or menstrual pain and continue until the symptoms subside.

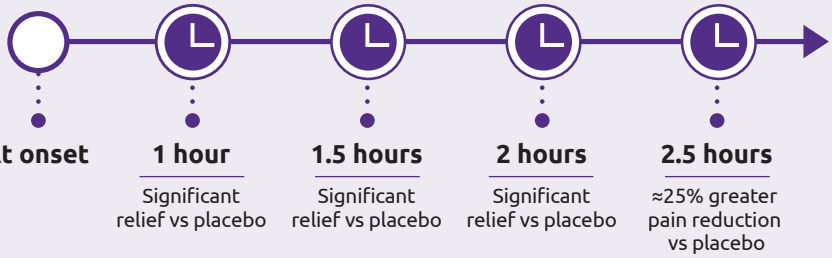
NOREA is recommended for women seeking comprehensive support to help relieve menstrual pain, discomfort and PMS symptoms.

Ginger extract exhibits anti-inflammatory and analgesic properties, helping to relieve menstrual pain. Its active compounds may help reduce the synthesis of prostaglandins and leukotrienes, inflammatory mediators involved in menstrual pain and cramping. Thanks to its antispasmodic effects, ginger helps relax the uterine muscles and reduces cramping. In addition, its antioxidant properties help reeduce oxidative stress associated with dysmenorrhea.
A double-blind comperative clinical trial found that ginger provided menstrual pain relief comparable to ibuprofen and mefenamic acid in women with primary dysmenorrhea (1).

Magnesium bisglycinate helps relax the uterine muscles, reducing cramps and discomfort during menstruation. By supporting calcium metabolism and regulating prostaglandin levels, magnesium contributes to reducing the intensity of menstrual pain. Clinical evidence suggests that magnesium supplementation may relieve lower abdominal and lower back pain associated with dysmenorrhea (2) and may also be beneficial in PMS and menstrual migraine (3).

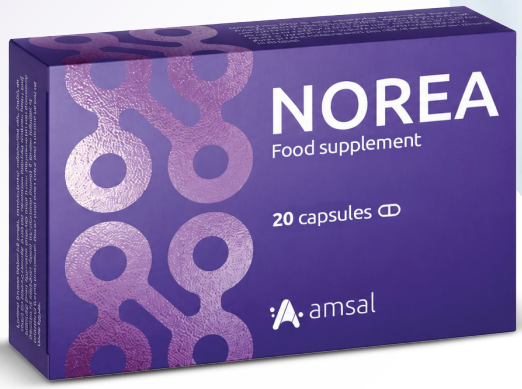
Vitamin B6 contributes to the regulation of hormonal activity and, together with magnesium, supports the normal function of the nervous system. It also contributes to normal psychological function and helps reduce tiredness and fatigue.

Levagen+ contains palmitoylethanolamide (PEA), an endogenous lipid mediator involved in the regulation of inflammatory processes and pain perception. By modulating neuroinflammatory pathways, it supports the body's natural pain-control mechanisms.
Levagen+ is a superior form of PEA with increased bioavailability and format versatility utilizing award-winning LipiSperse technology.



A randomized, double-blind, placebo–controlled crossover study showed that Levagen+ significantly reduced acute menstrual pain, with relief observed from the first hour after intake and sustained for up to 2.5 hours (4).

RELIABLE SUPPORT FOR WOMEN THROUGHOUT THE MENSTRUAL CYCLE



Why NOREA?

NOREA combines carefully selected, quality-controlled ingredients in a multi-target formula designed to provide comprehensive support throughout the menstrual cycle. Each ingredient contributes through a complementary mechanism, addressing menstrual pain, cramping, PMS symptoms, fatigue, and emotional well-being.

- Quality-controlled ingredients
- Complementary mechanisms of action
- Comprehensive menstrual cycle support

1. Ozgoli G, Goli M, Moattar F. Comparison of effects of ginger, mefenamic acid, and ibuprofen on pain in women with primary dysmenorrhea. J Altern Complement Med. 2009;15(2):129-132. doi:10.1089/acm.2008.0311
2. Fontana-Klaiber H, Hogg B. Therapeutische Wirkung von Magnesium bei Dysmenorrhöe [Therapeutic effects of magnesium in dysmenorrhea]. Schweiz Rundsch Med Prax. 1990;79(16):491-494.
3. Parazzini F, Di Martino M, Pellegrino P. Magnesium in the gynecological practice: a literature review. Magnesium in the gynecological practice: a literature review. Magnes Res. 2017;30(1):1-7. doi:10.1684/mrh.2017.0419
4. Rao A, Erickson J, Briskey D. Palmitoylethanolamide (Levagen+) for acute menstrual pain: a randomized, crossover, double-blind, placebo-controlled trial. Women Health. 2025;65(3):237-245. doi:10.1080/03630242.2025.2458243

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