Vitaniom

24 vitamins, minerals and trace elements · 60 film-coated tablets · Food supplement

INDICATION

Adults and adolescents from 16 who eat irregularly or little meat, fish or dairy; women with heavy periods or tiredness; recovery from illness; and the daily base under any targeted Draxer product.

41%
of Ghanaian women aged 15 to 49 are anaemic (1)

54%
of non-pregnant Ghanaian women are folate deficient (2)

2 years
less cognitive ageing with a daily multivitamin (7)

1 tablet
once daily, after a meal

01 COMPOSITION AND DOSE

BLOOD AND ENERGY	
Iron (ferrous fumarate)	10 mg
Vitamin C	40 mg
Copper	1.7 mg
Folic acid	120 mcg
Vitamin B12	1 mcg

B VITAMINS	
Vitamin B1	1.4 mg
Vitamin B2	1.6 mg
Vitamin B3	18 mg
Vitamin B5	5 mg
Vitamin B6	2 mg
Biotin	30 mcg

IMMUNITY AND THYROID	
Vitamin A (acetate)	300 mcg
Beta-carotene	24 mcg
Vitamin D2	400 IU
Vitamin E	10 mg
Zinc	12 mg
Selenium	40 mcg
Iodine	150 mcg

OTHER MINERALS	
Calcium	50 mg
Magnesium	6 mg
Manganese	4 mg
Chromium	50 mcg
Molybdenum	45 mcg
L-glutamic acid	50 mg

Per tablet; most at 100% of daily needs. **Dose:** 1 tablet daily after a meal, from 16 years; 60 tablets last 60 days. **Label use:** daily multivitamin and mineral supplement.

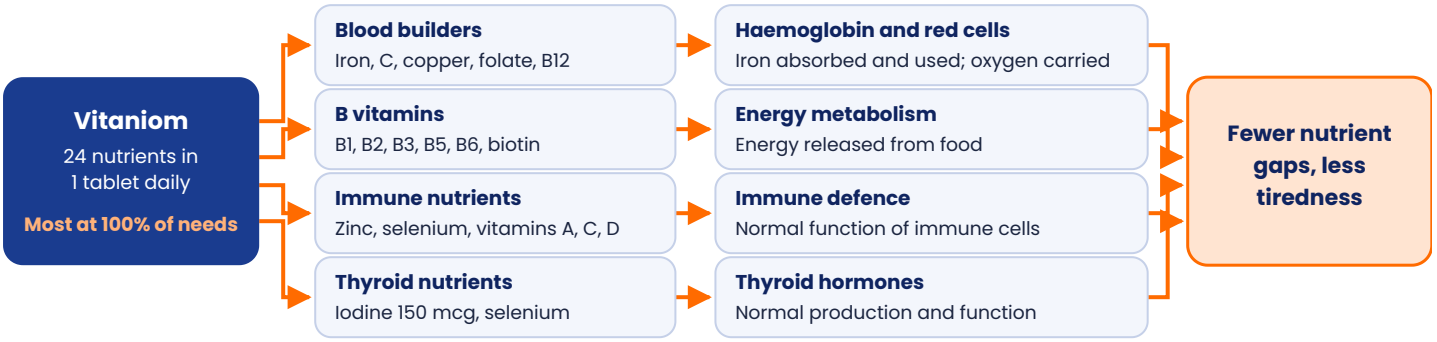
HOW IT WORKS

Iron builds haemoglobin. Vitamin C multiplies non-haem iron absorption and offsets the phytate in cereal meals (5, 10); copper carries iron round the body, and folate and B12 are needed to make red cells (9).

B vitamins release energy from food. Iodine is needed to make thyroid hormones and selenium for normal thyroid function; zinc, selenium and vitamins A, C and D support normal immune function (9).

Vitamin C sits in the same tablet as the iron, so every dose comes with its absorption partner (5).

Doses sit near daily needs and target the gaps found in Ghana: folate above all, then iron (2).



02 EVIDENCE, WITH REFERENCES

Study	Design and people	Intervention	Main result
GDHS 2022 (1)	National survey, women 15 to 49	Blood haemoglobin testing	41% anaemic; 51% in pregnancy
Wegmüller 2020 (2)	National survey, non-pregnant women	Blood micronutrient testing	Folate deficiency 54%, iron 14%, B12 7%
Low 2016 (3)	Cochrane review, 67 RCTs, 8,506 menstruating women	Daily oral iron vs control	Anaemia down 61% (RR 0.39); haemoglobin up 5.3 g/L
Houston 2018 (4)	Meta-analysis, 18 RCTs, 1,170 adults	Iron, low iron without anaemia	Less fatigue (SMD −0.38); haemoglobin up 4.0 g/L
Cook 1977 (5)	Iron absorption study, healthy adults	Vitamin C 25 to 1,000 mg with a meal	Iron absorption 1.65× higher with just 25 mg
Baker 2023 (6)	COSMOS-Mind RCT, 2,262 older adults	Daily multivitamin, 3 years	Global cognition better: about 1.8 years less cognitive ageing
Vyas 2024 (7)	COSMOS meta-analysis, over 5,000 adults	Daily multivitamin, 2 to 3 years	Memory and global cognition better: about 2 years less ageing
Gaziano 2012 (8)	PHS II RCT, 14,641 male doctors, 11 years	Daily multivitamin vs placebo	Total cancer 8% lower (HR 0.92)

Authorised claims: iron, folate, vitamins B2, B3, B5, B6, B12 and C, and magnesium contribute to the reduction of tiredness and fatigue; vitamins A, C, D, B6, B12, folate, zinc, selenium, copper and iron to normal immune function (9). **Evidence base:** the iron trials tested iron alone, mostly at higher doses; Vitaniom itself has not been trialled.

For health professionals. This product is a food supplement and is not intended to diagnose, treat, cure or prevent any disease.

WHO BENEFITS MOST

Heavy periods or tiredness
Women with heavy menses, low iron stores or a diet low in meat.

Expect: more energy in 4 to 8 weeks

Irregular or limited diet
Skipped meals; little meat, fish, dairy or green vegetables; vegetarians.

Start: 1 tablet daily as a long-term base

Recovery from illness
After illness, surgery or a spell of poor appetite or stress.

Start: during recovery; review at 3 months

Older adults
Smaller appetites; a daily multivitamin slowed cognitive ageing in COSMOS.

Expect: memory benefit over 2 to 3 years

HOW TO USE IT IN PRACTICE

- **Starting:** 1 tablet daily after breakfast or lunch, with water.
- **Monitoring:** with tiredness or pallor, check a full blood count and ferritin before starting; repeat at 3 months.
- **Review:** energy at 4 to 8 weeks. If anaemic, add a treatment dose of iron and keep Vitaniom as the base.
- **With prescribed treatment:** fits alongside most long-term medicines; separate from levothyroxine and some antibiotics (section 03).
- **With Draxer products:** the daily base under GynoEssence, Vitex or Ubiquinol; Vitamin D3 + K2 when vitamin D is low. Keep total zinc below 25 mg a day (14).
- **Not a prenatal:** in pregnancy, use a prenatal product with iron 30 to 60 mg (section 04).

SIDE EFFECTS AND SPECIAL GROUPS

Common	Dark stools (iron) and bright yellow urine (riboflavin); both harmless (11).
Uncommon	Nausea, upset stomach or constipation from iron, mostly on an empty stomach; take after food (11).
Overdose	Each nutrient stays below its upper level: zinc 12 of 25 mg, vitamin A 300 of 3,000 mcg (14, 15). Iron overdose is dangerous to young children (11).
Age group	From 16 years; not for children under 16.
Kidney, liver	Not studied; minerals may build up in severe kidney disease. Use on the prescriber's advice.

03 INTERACTIONS AND CAUTIONS

- **Levothyroxine:** iron and calcium reduce absorption; take at least 4 hours apart (12).
- **Tetracyclines and quinolones (ciprofloxacin, levofloxacin):** iron and zinc bind them; separate by 2 to 4 hours (11).
- **Bisphosphonates, levodopa, penicillamine, mycophenolate:** iron reduces absorption; separate doses (11).
- **Antacids:** reduce iron absorption; 2 hours apart (11).
- **Phenytoin:** folic acid can lower levels (13).
- **Isotretinoin, acitretin:** avoid extra vitamin A.

04 PREGNANCY AND BREASTFEEDING

Suitable in pregnancy and breastfeeding, but not a prenatal. WHO recommends iron 30 to 60 mg and folic acid 400 mcg daily in pregnancy (16), so add these or use a prenatal product. Vitamin A is 300 mcg, a tenth of the upper limit (15); iodine is below the 250 mcg needed in pregnancy (17). The label precaution is the standard one.

05 WHEN NOT TO RECOMMEND

- Haemochromatosis or other iron overload; anaemia not due to iron deficiency (11)
- Hypercalcaemia (13)
- Children under 16 years
- With another multivitamin or iron product
- Tiredness with pallor, breathlessness or heavy bleeding: refer for a full blood count

PATIENT COUNSELLING CHECKLIST

- ☐ One tablet a day, after breakfast or lunch
- ☐ Swallow it whole with water
- ☐ Dark stools and yellow urine are harmless
- ☐ Give your energy 4 to 8 weeks to improve
- ☐ On a thyroid tablet? Keep 4 hours apart
- ☐ Do not add another multivitamin
- ☐ Pregnant or planning? Ask about a prenatal
- ☐ Keep away from children: iron harms them

Product details. 60 film-coated tablets (60 days). Store below 30°C in a dry place, away from direct light; keep the lid closed. Shelf life 24 months from manufacture; see pack for expiry. Food supplement made for Draxer Therapeutics by a partner manufacturer. Keep out of reach of children.

References

1. Ghana Statistical Service, ICF. Ghana Demographic and Health Survey 2022: Key Indicators Report. Accra, 2023.
2. Wegmüller R, et al. PLoS One 2020;15:e0228258.
3. Low MSY, et al. Cochrane Database Syst Rev 2016;(4):CD009747.
4. Houston BL, et al. BMJ Open 2018;8:e019240.
5. Cook JD, Monsen ER. Am J Clin Nutr 1977;30:235–41.
6. Baker LD, et al. Alzheimers Dement 2023;19:1308–19.
7. Vyas CM, et al. Am J Clin Nutr 2024;119:692–701.
8. Gaziano JM, et al. JAMA 2012;308:1871–80.
9. Commission Regulation (EU) No 432/2012: authorised health claims.
10. Hallberg L, et al. Am J Clin Nutr 1989;49:140–4.
11. Ferrous Fumarate 210 mg tablets. Summary of Product Characteristics. ADVANZ Pharma, 2025.
12. Eltroxin (levothyroxine) tablets. Summary of Product Characteristics. ADVANZ Pharma, 2023.
13. Forceval capsules. Summary of Product Characteristics. Alliance Pharmaceuticals, 2020.
14. EFSA. Summary of tolerable upper intake levels. 2024.
15. EFSA NDA Panel. Tolerable upper intake level for preformed vitamin A and β-carotene. EFSA J 2024;22:e8814.
16. WHO. Recommendations on antenatal care for a positive pregnancy experience. Geneva, 2016.
17. Andersson M, et al. Public Health Nutr 2007;10(12A):1606–11.