



Estrovera®

A unique, clinically researched rhubarb extract
ERr 731® for menopause symptom relief.

- Non-hormonal alternative for menopause-associated symptoms.¹
- Clinically proven to relieve 8 common symptoms of menopause.¹⁻⁵
- Recommended by healthcare practitioners globally for over 30 years.
- Safe for long-term use.⁷

Each Tablet Contains:

<i>Rheum raphonticum</i> , dry root extract	4mg
from dry root ERr 731®	84mg

Directions for use:

- Take 1 mini tablet daily with food.



Convenient
One-A-Day
Dose



Plant-derived



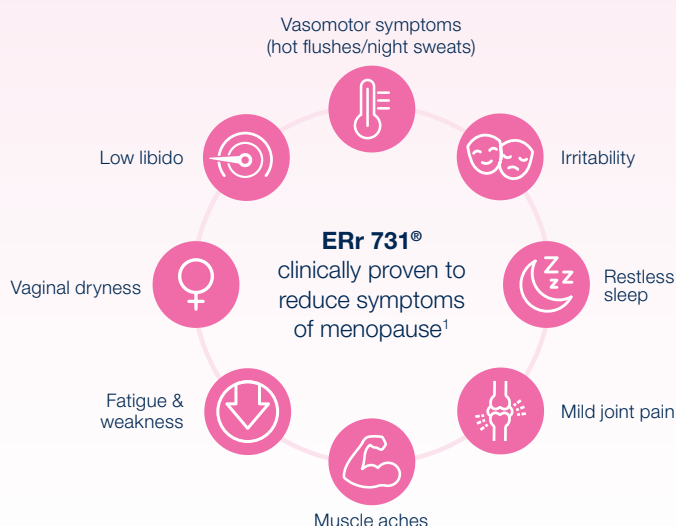
Relieves the
Symptoms of
Menopause



Scientifically
Researched

Whole-body, all-in-one menopause care

- ERr 731® is a clinically researched extract of the herb *Rheum raphonticum*.
- Hormone-free and effective for reducing hot flashes in as little as 4 weeks.⁵
- Reduces 8 of the most common symptoms associated with menopause, including irritability and sleep disturbances^{1,4}, supporting whole-body health.
- For women preferring a plant-derived option for a natural process.



Clinically proven ingredient

A 2024 systematic review and meta-analysis of clinical trials has found multiple benefits of ERr 731® over 12 weeks to support women's health and wellbeing throughout perimenopause.¹

Data shows that 12 weeks of supplementation of ERr 731® significantly reduced the Menopause Rating Scale scores and improved quality of life in peri and postmenopausal women.²

Backed by Science

Oestrogen receptors alpha (ERα) and beta (ERβ) are present throughout the body for oestrogen to initiate important biological functions, including reproductive, cardiovascular, musculoskeletal, and brain functions. However, excessive ERα activation may enable cell proliferation and inflammation, especially in oestrogen-sensitive tissues such as the breast and uterus.⁵ In contrast, activation of ERβ promotes anti-inflammatory processes and down-regulates ERα expression, helping to balance these effects.⁶ **ERr 731® selectively targets ERβ to alleviate menopausal symptoms.⁹** Its high affinity for ERβ is associated with a reduction in menopausal symptoms while minimising potential side effects, providing a safe and effective solution for peri and postmenopausal women.⁷



Vegan
Friendly



Dairy Protein &
Lactose Free



Egg
Free



Gluten, Wheat
& Yeast Free



Nut Free



Soy Protein
Free



Corn Free



Artificial Colour,
Sweeteners, Flavour
& Preservative Free

Always read the label and follow the directions for use.

Disclaimer: In the interest of supporting Healthcare Practitioners, all safety information provided at the time of publishing is in accordance with Natural Medicine Database (NATMED PRO), renowned for its professional monographs which include a thorough assessment of safety, warnings, and adverse effects.

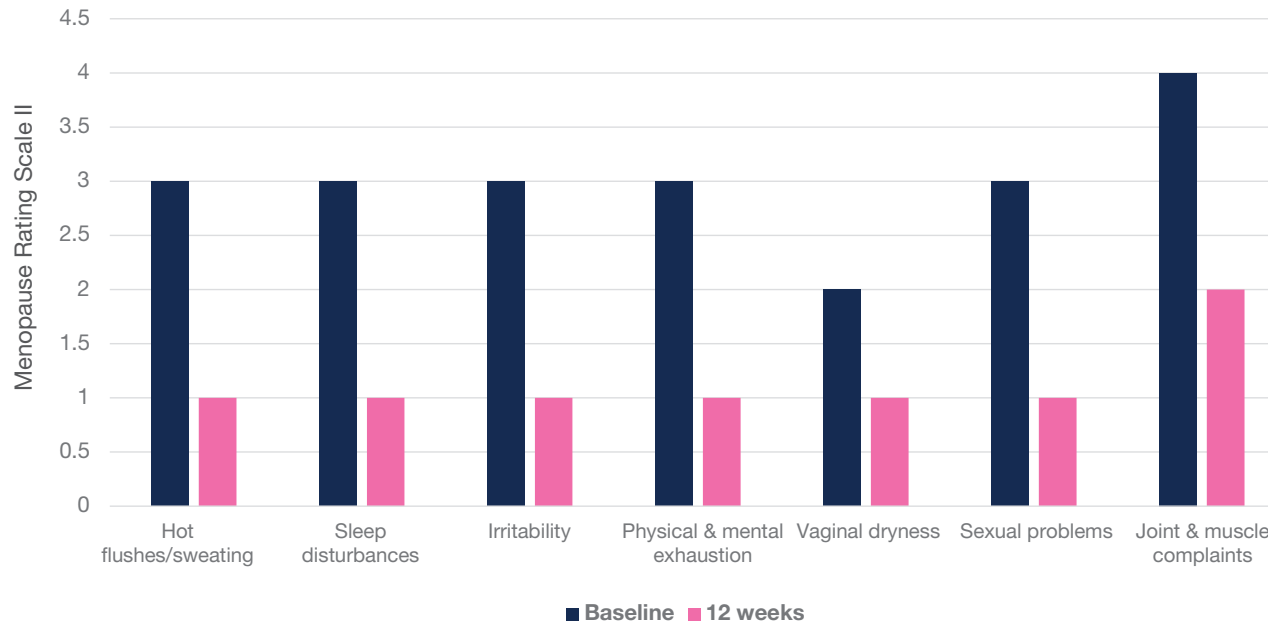
For further information on specific interactions with medications, please contact Clinical Support on 1800 777 648, or via email, anz_clinicalsupport@metagenics.com

Estrovera® Multi-Symptom Menopause Relief

Estrovera® relieves menopause symptoms in 12 weeks

109 women aged 45-55 years took 1 tablet of ERr 731® for 12 weeks²

80%
of
Australian
women
experience
perimenopausal
symptoms



Heger M, et al. et al. Efficacy and safety of a special extract of *Rheum rhaponticum* (ERr 731) in perimenopausal women with climactic complaints: a 12-week randomized, double-blind, placebo-controlled trial. *J Nth Am Men Soc.* 2006; 13(5): 744-59. doi:10.1097/01.gme.0000240632.08182.e4

Relief from hot flushes from 4 weeks

Relief from
hot flushes in just
1 bottle*

- 90%** noticed improvements in hot flushes after starting Estrovera®
- 70%** experienced improvement in sleep disturbances
- 52%** noticed improvements with vaginal dryness

2023 survey conducted by Metagenics in 446 women taking Estrovera® for 12 weeks.

*1 bottle of 90 tablets.

LONG-TERM SAFETY: After 2 years continuous use, women experienced up to 80% reduction in menopause symptoms, with no side effects found.⁴

1. Dubey VP et al. *J Biomed Res.* 2024 Apr 18;38(3):278-286. doi: 10.7555/JBR.37.20230219.
2. Heger M, et al. *Menopause.* 2006; 13(5):744-59. doi:10.1097/01.gme.0000240632.08182.e4
3. Kaszkin-Bettag M et al. *Menopause.* 2007 Mar-Apr;14(2):270-83. doi:10.1097/01.gme.0000251932.48426.35.

4. Hasper I et al. *Menopause.* 2009;16(1):117-131. doi:10.1097/GME.0b013e3181806446
5. Wilson, M et al. *Int J Mol Sci.* 22, 1032 (2021). doi:10.3390/ijms22031032
6. Jia M et al. *Best Pract Res Clin Endocrinol Metab.* 2015;29(4):557-568. doi:10.1016/j.beem.2015.04.008
7. Hasper I et al. *Menopause.* 2009;16(1):117-131. doi:10.1097/GME.0b013e3181806446

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