Let's break the cycle of suffering and stigma around menopause.

Efficacy of Cimidona® Ze 450 13 mg was largely rated as "good" or "very good".[8]

The data captured below comes from observational studies. It should be interpreted cautiously as it is not a randomized-controlled trial.

83.1% by physicians in **83.1% of their patients (309/372)**

81.5% by patients **81.5% of the time (303/372)**

Weliva™ Cimidona® does not have any known drug-drug interactions.[7]
Black cohosh (*Actaea racemosa*) has been shown in several human clinical trials to have no clinically important effects on multiple metabolic enzymes. However, there is a potential concern for interactions with certain transporters in the liver, which could reduce the effectiveness of such drugs as amiodarone, fexofenadine (Allegra), glyburide, and many statin medications.

#1 Selling Menopause Relief Product in Switzerland†

Cimidona® Ze 450 was generally safe and well tolerated.[2,8]

- Treatment-related adverse events were uncommon and non-serious
- Most common complaints were gastrointestinal in nature (e.g., nausea and stomach pain)

Cautions and warnings: Patients should consult a doctor if symptoms persist or worsen, or they have a liver disorder or develop symptoms of liver trouble.

Contraindications: Do not use in patients who are pregnant or breastfeeding.

†IQVIA, national sales data Switzerland, sell-in (pharmacy, drugstore, self-dispensing Doctors), turnover (ex-factory) in CHF, MAT June 2023.

Helping to improve the quality of life in women.[6]

A class 3 natural health product authorized for sale by Health Canada.[6*]

Weliva™ Cimidona® reduces the frequency and severity of menopausal symptoms, including:[2]

- **Hot flashes**
- **Night sweats**
- **Fatigue**
- **Irritability**
- **Nervousness**
- **Sleeplessness**
- **Mild joint pain**
- **Headache**

- For adult women in any stage of menopause
- Available as 13-mg tablets
- One tablet once a day

*Natural Product Number (NPN) 80125992.

#1 Selling Menopause Relief Product in Switzerland*

*IQVIA, national sales data Switzerland, sell-in (pharmacy, drugstore, self-dispensing Doctors), turnover (ex-factory) in CHF, MAT June 2023.

Weliva™ Cimidona® (Ze 450) is a naturally sourced extract of *Actaea racemosa* authorized for use by Health Canada.[6]

13 MG

Offered as 13-mg tablets, **Weliva™ Cimidona®** reduces the frequency and severity of menopausal symptoms, including hot flashes, night sweats, and fatigue.[2,6]

1-9 MONTHS

Clinical trials have demonstrated the efficacy and general safety of **Weliva™ Cimidona®** for up to 9 months of treatment.[2,8]

Patients can expect to see the effects of Weliva™ Cimidona® after a minimum of 6 weeks of use.[7]

REFERENCES:
1. Menopause Foundation of Canada. The Silence and the Stigma: Menopause in Canada. October 2022. 2. Schellenberg R, *et al.* Dose-Dependent Effects of the Cimicifuga racemosa Extract Ze 450 in the Treatment of Climacteric Complaints: A Randomized, Placebo-Controlled Study. *Evid Based Complement Alternat Med.* 2012;2012:260301. 3. Friederichsen L, *et al.* Effect of CIMicifuga racemosa on metaBOLIC parameters in women with menopausal symptoms: a retrospective observational study (CIMBOLIC). *Arch Gynecol Obstet.* 2020;301:517–523. 4. Garita-Hernandez M, *et al.* The growth inhibitory activity of the *Cimicifuga racemosa* extract Ze 450 is mediated through estrogen and progesterone receptors-independent pathways. *Planta Med.* 2006;72:317–323. 5. SFI Health. Black cohosh (Actaea racemosa). 2024. Available at: https://au.sfihealth.com/ingredients/actaea-racemosa/. Accessed: February 22, 2024. 6. Government of Canada. **Weliva™ Cimidona®** Product Information. October 17, 2023. 7. MAX Zeller Söhne AG. Cimidona® Product Information. November 2021. 8. Drewe J, *et al.* The Effect of a Cimicifuga racemosa Extracts Ze 450 in the Treatment of Climacteric Complaints – An Observational Study. *Phytomedicine.* 2013;20:659–666.

NORWELL™ CONSUMER HEALTHCARE

WELIVA™

CIMIDONA®

46% of women feel unprepared for menopause[1]

Help end the cycle of suffering through
MENOPAUSAL SYMPTOMS

It's time to break the cycle

Menopause has always been a highly taboo topic, which leaves women to suffer in silence.[1]

According to the Menopause Foundation of Canada:

4 IN 10 WOMEN (38%) FEEL ALONE DURING MENOPAUSE

60%

60% OF WOMEN DO NOT SEEK MEDICAL ADVICE

4 IN 10 WOMEN (38%) FEEL THEIR SYMPTOMS ARE UNDERTREATED

Naturally-sourced & hormone-free solution **Weliva™ Cimidona®**: Understanding Ze 450.[2]

Actaea racemosa (also known as black cohosh) is a perennial medicinal plant that has traditionally been used to treat various conditions, including menopause-related symptoms.[2]

While the mechanism of action of *Actaea racemosa* has yet to be fully elucidated, data shows that it exerts its effects without estrogenic activity.[2,3]

Weliva™ Cimidona® uses Ze 450, an exclusive extract of *Actaea racemosa*. *In vitro* studies have shown that the Ze 450 does not mediate any estrogenic effects, thus suggesting that it could be considered a suitable non-hormonal alternative to menopausal hormone therapy (MHT).[4]

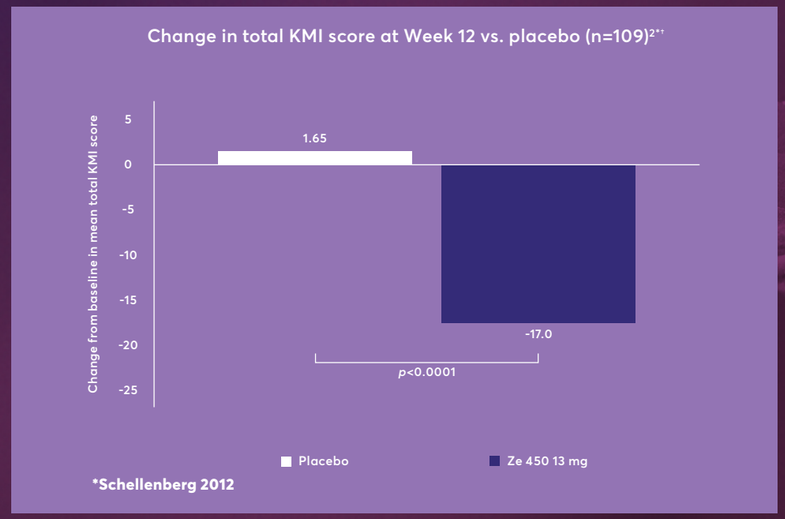
This exclusive Ze 450 extract is manufactured using a proprietary processing method with strict control at each step of **growing, cultivating, extracting, and producing.** This ensures consistent levels of active ingredients between batches.[5]

Cimidona® Ze 450 has been extensively studied in multiple clinical studies.

STUDY	DESIGN	TREATMENT*	MAIN OUTCOME ANALYZED
Schellenberg 2012[2]	12-week, multicentre, randomized, double-blind, placebo-controlled, parallel-group trial **n=109**	Cimidona® Ze 450 13 mg Placebo	**Primary Endpoint** Difference in menopausal symptom severity as assessed by a modified total Kupperman Menopausal Index (KMI) score from baseline to Week 12
Drewe 2013[8]	12-week, multicentre, open-label, prospective, observational study with an additional 6-month extension **n=228**	Cimidona® Ze 450 13 mg	**Primary Endpoint** Difference in menopausal symptom severity as assessed by a modified total (KMI) score from baseline to Week 12
Friederichsen 2019[3]	Monocentric, retrospective, observational cohort study **n=174**	Cimidona® Ze 450 13 mg Menopausal hormone therapy (MHT)	Metabolic serum parameters, body weight, and menopausal symptoms as assessed by the Menopause-Rating-Scale (MRS-II)

***Schellenberg (2012):** Cimidona® Ze 450 at a dose of 6.5 mg dry extract was also a treatment arm. **Drewe (2013) and Friederichsen (2019):** Cimidona® Ze 450 at doses of 1x 6.5 mg or 2x 13 mg dry extract were also used. Only **Weliva™ Cimidona®** 13 mg is approved for use in Canada.

Cimidona® Ze 450 13 mg significantly reduced the symptoms of menopause.†



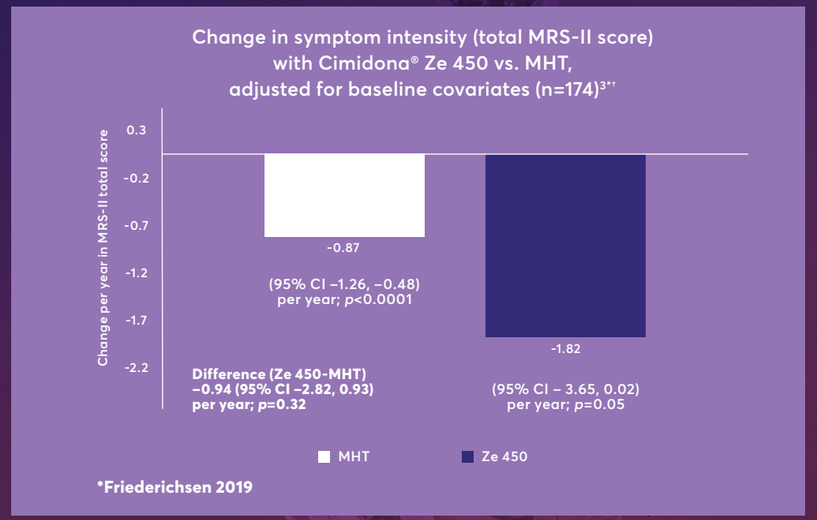
***Schellenberg 2012**

Ze 450 is superior to placebo in decreasing the overall menopausal symptom severity (vasomotor and somatic).[2]

*A double-blind, placebo-controlled, randomized, multicentre study where women (N=180; mean age 51.7 years) with climacteric complaints were randomized to 6.5 mg Ze 450, 13.0 mg Ze 450, or placebo. They received treatment as 2 tablets a day with a meal for 12 weeks as placebo + 6.5 mg Ze 450 (n=57); 6.5 mg Ze 450 + 6.5 mg Ze 450 (n=57); or placebo + placebo (n=54), respectively. The primary outcome was the difference in menopausal symptoms (vasomotor and somatic), as assessed by the modified KMI between baseline and Week 12. Secondary endpoints included self-assessments of quality of life, responder rates, and safety. N = number of patients randomized; n = number of patients for whom there was a follow-up for both safety and efficacy.
†Data are shown for those who received Ze 450 13 mg only. Only **Weliva™ Cimidona®** 13 mg is approved for use in Canada.

Cimidona® Ze 450 13 mg reduced menopausal symptom severity with no evidence of difference vs. MHT.

The data captured below comes from observational studies. It should be interpreted cautiously as it is not a randomized-controlled trial.



***Friederichsen 2019**

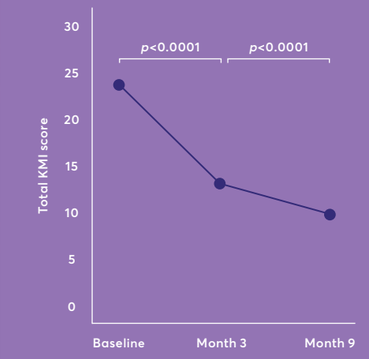
Both Ze 450 and MHT reduced menopausal symptom severity with no evidence of between-group difference.[3]

*A monocentric, retrospective, observational cohort study of 174 women (median age 53.0 years) presenting for first-time consultation at the Menopause Centre of the Department of Obstetrics and Gynecology, Inselspital Bern, and treated with either Ze 450 (Cimifemin® forte=13 mg dry extract, Cimifemin® uno=6.5 mg dry extract, or Climavita® forte=13 mg dry extract) (n=32) or any MHT (n=142), having at least one follow-up visit with blood tests. The main outcome measures were metabolic serum parameters (lipids, glucose, insulin, and HOMA-IR), body weight, and menopausal symptoms (MRS-II), and the median time to first follow-up was 12 months.
†The data shown include Ze 450 6.5 mg and Ze 450 13 mg. Only **Weliva™ Cimidona®** 13 mg is approved for use in Canada.

Long-term menopausal symptom relief and improved quality of life with Cimidona® Ze 450.

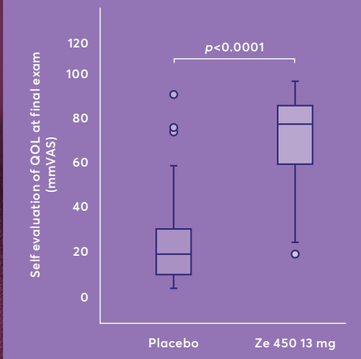
The data captured below comes from observational studies. It should be interpreted cautiously as it is not a randomized-controlled trial.

Significant decrease in symptom severity after 3 months of treatment further decreased by the continuation of treatment with Cimidona® Ze 450 13 mg up to 9 months.*†



***Drewe 2013**

Decrease in menopausal symptom severity inversely correlated with QoL improvement after 12 weeks treatment with Cimidona® Ze 450 13 mg.‡†



‡**Schellenberg 2012**

*A multicentre, open-label, prospective, observational study with additional 6-month extension that included 442 select ambulatory outpatients (mean age 52.3 years) with menopausal complaints. Patients were treated with Ze 450 13 mg for 3 months and then either continued with Ze 450 13 mg (n=228) or switched to Ze 450 6.5 mg (n=102) for an additional 6 months. The outcomes were symptom relief as assessed by reduction of total KMI symptom score and the Kupperman sub-item symptom scores, tolerability, and patient satisfaction with the treatment.
†Data are shown for those who received Ze 450 13 mg only. Only **Weliva™ Cimidona®** 13 mg is approved for use in Canada.
‡A double-blind, placebo-controlled, randomized, multicentre study where women (N=180; mean age 51.7 years) with climacteric complaints were randomized to 6.5 mg Ze 450, 13.0 mg Ze 450, or placebo. They received treatment as 2 tablets a day with a meal for 12 weeks as placebo + 6.5 mg Ze 450 (n=57); 6.5 mg Ze 450 + 6.5 mg Ze 450 (n=57); or placebo + placebo (n=54), respectively. The primary outcome was the difference in menopausal symptoms (vasomotor and somatic), as assessed by the modified KMI between baseline and Week 12. Secondary endpoints included self-assessments of quality of life, responder rates, and safety. N = number of patients randomized; n = number of patients for whom there was a follow-up for both safety and efficacy.