

When 'More' Stops Working

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STORY AT-A-GLANCE

- › The supplement aisle runs on a single promise — that bigger numbers are better — but past a point, “more” stops translating into more that your body actually keeps
- › The neon-yellow urine after a big multivitamin is mostly riboflavin passing straight through; it’s a daily receipt for the part you paid for and didn’t absorb
- › Absorption is dose-dependent: the fraction your body takes up tends to fall as the dose climbs, so doubling the dose doesn’t double what reaches your cells
- › With some nutrients the body actively limits how much it admits at once, so how and when you take a supplement can matter as much as the amount
- › The form a nutrient comes in can change how much you absorb, which is why the delivery method often matters more than how much you take

Walk any supplement aisle and you're basically walking through a contest of numbers; 1,000 milligrams of this, 5,000 units of that. High potency. Extra strength. Mega dose. The entire pitch rests on a single unspoken promise: that more is better, and the biggest number on the bottle wins.

Most people sense, somewhere, that this can't be the whole truth. And there's an everyday clue. Take a high-potency multivitamin or B-complex in the morning, and an hour later your urine has turned a vivid, almost neon yellow. The joke writes itself — you're just making expensive pee. That neon color comes almost entirely from riboflavin,¹ that your body didn't need at that moment.

You flooded your system, your body took the small amount it could use right then, and the rest went straight through. The bright color isn't proof your B vitamins are "working." It's a "receipt" for the part you paid for and your body couldn't use.

Riboflavin just happens to be one of the few nutrients whose surplus you can actually see leaving the body. It belongs to the family of water-soluble vitamins — the B vitamins and vitamin C — which, with a few exceptions, the body holds onto only in small amounts. Take in more than you can use in the moment and there's nowhere to put the surplus, so it's filtered out and sent on its way.

The glow in the bowl is simply the most colorful version of something that happens, invisibly, with much of what's packed into a high-dose supplement.

Why More Stops Working

A recurring theme across nutrition research is diminishing returns: your body takes up a smaller relative percentage of a nutrient as the dose climbs. You may still absorb a little more in total from a bigger dose, but it's not proportional. Double the dose and you're left with a much larger pile from which a shrinking fraction is actually used, and a growing share is simply wasted.

In a systematic review of magnesium supplements, for example, the proportion absorbed depended on the dose rather than holding steady.² But past a certain point, piling on milligrams simply inflates the bill you pay without raising the amount your body can use.

Follow that logic and the mega-dose promise falls apart. Doubling the size of the labeled dose doesn't double what your body absorbs. Past a certain point it mostly enlarges the share that gets wasted — you spend more, swallow more, yet little changes in terms of your health. Too often, the "more is better" mindset makes you pay for nutrients your body may never receive.

Your Body Pushes Back

With some nutrients, the body doesn't just passively let the excess go — it actively limits how much it will admit at once. Iron is the clearest example. Using stable-isotope tracers and the body's own iron-regulating hormone, hepcidin, researchers have shown that a large oral dose of iron triggers a protective rise in hepcidin that throttles how much of the next dose can be absorbed — an effect that lingers for the better part of a day.³

The practical consequence runs almost opposite to the label logic: past a threshold, taking iron in large daily amounts, or splitting it into several doses through the day, can actually lower the fraction you take up from any given dose. Smaller amounts — or the same amount spaced out to alternate days — tend to be absorbed more efficiently and to cause fewer digestive complaints.⁴

That is the whole principle in miniature. Your body is not a bucket you can fill faster simply by pouring more into it. It has gates, transporters, and feedback loops that decide how much to let in and when. Flooding the system doesn't override those controls; it mostly overwhelms them, and the difference ends up in the toilet rather than in you.

Form Changes the Equation

So, if piling on milligrams isn't the answer, what is? The far more useful lever is the one the numbers game ignores: the form the nutrient comes in, and how well your body can take it up. The same magnesium review mentioned earlier found that the form matters as much as the dose — organic forms were generally better absorbed than inorganic ones.⁵

A head-to-head clinical comparison made the point even more concretely: when several magnesium preparations were given to the same volunteers, the rise in blood levels differed markedly depending on which form was used, and a better-delivered form produced a higher, steadier increase.⁶ Same mineral — very different amounts actually reaching the bloodstream.

Some compounds make the point even more starkly. Curcumin, the pigment that gives turmeric its color, is notoriously hard to absorb in its raw form — so poorly that little of a plain dose survives the trip. In laboratory and animal studies, repackaging the very same curcumin into lipid- or nanoparticle-based delivery systems raised its absorption many times over compared with the unformulated powder.⁷

The molecule didn't change at all; only its packaging did. It's a vivid reminder that "how much is in it" tells you very little until you also ask how much of it can actually get absorbed.

When a nutrient is delivered in a form your body can genuinely take up and use, the entire equation changes. You stop needing a giant dose to compensate for everything that gets lost, because far less is being lost in the first place. The result is the opposite of the mega-dose strategy: the right amount, in a form that reaches the cells that need it, so you can take less and get more from it.

That's the premise we're now embracing for our own product line. In practice, that means choosing well-absorbed forms and sizing the dose to what the body can use rather than to what looks most potent on a label. It's a less flashy approach — there's no giant number to brag about. But it's more useful, and, frankly, better for your wallet. You're no longer paying for the overflow.

You're paying for what you actually keep. This also reframes what "potency" even means. Real potency is what can be used, and that's a question of form and delivery at least as much as the amount.

The Bottom Line

The old industry sold you on dosage amounts because it's easy to print on a label and easy to market. But your body doesn't read labels; it absorbs what it can, in the form it's given, throttles what it doesn't want, and lets the rest go — which is exactly what that neon-yellow urine is showing you.

We'd rather give you something more useful: less to take, less waste, and the simple confidence that what you're putting in is actually landing instead of getting flushed down the toilet. Not more. Just enough, in a form that your body can use best.

Frequently Asked Questions

Q: Why does my urine turn bright yellow after a multivitamin?

A: That color is largely riboflavin — passing through. In testing, B2 was the one vitamin of 16 tested that clearly altered urine fluorescence in the analysis. It's harmless, but it's also a visible sign that you took in more B2 than your body could use in that moment, so the excess got flushed out.

Q: Does a bigger dose mean I absorb more?

A: Not proportionally, and sometimes barely at all. As the dose rises, the fraction your body actually takes up generally falls. So, doubling the milligrams on the label doesn't double what reaches you — it often just increases the amount that's excreted.

Q: Does it matter how and when I take a supplement, not just how much?

A: Often, yes — sometimes as much as the dose itself. With iron, for instance, spacing the same total amount out rather than piling it on can improve how much your body actually absorbs and ease digestive side effects. Timing, the form a nutrient comes in, and what you take it alongside can all influence how much truly reaches the cells that need it, which is why we pay attention to forms and delivery and not just the dosage amount.

Q: If more isn't the answer, what is?

A: The form the nutrient comes in and how well it's delivered. Studies comparing different forms of the same mineral show meaningfully different amounts reaching the bloodstream. A well-absorbed form at a sensible dose can do more for you than a much larger dose of a poorly absorbed one.

Q: Isn't a smaller dose just "less"?

A: The number that matters isn't how much you swallow — it's what your body can absorb and use. Our aim is to provide the right amount in a form that reaches your cells best, not a big number for its own sake; most of which you pay for and then excrete.

These statements have not been evaluated by the U.S. Food and Drug Administration.

This article is for general education. The products described are dietary supplements intended to support normal health and wellbeing as part of a food-first lifestyle. They are not a substitute for a varied diet, a healthy lifestyle, or the advice of your physician. If you are pregnant, nursing, taking medication, or managing a health condition, talk with your healthcare provider before beginning any supplement.

This article is for informational purposes only and does not constitute medical advice. Consult a qualified healthcare provider before making changes to your health regimen.

Sources and References

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