

## Guillermou

A necessary combination of vitamin D, K2 and magnesium. Vitamin K1 (VitK1) and vitamin K2 (VitK2), two important natural micronutrients found, respectively, in green leafy plants and algae (VitK1) and animal and fermented foods (VitK2). The present review explores the multiple biological functions of VitK2, including promoting osteogenesis, preventing calcification, alleviating menopausal symptoms, improving mitochondrial energy release, hepatoprotective and neuroprotective effects, cancer and the treatment of coronavirus disease. Several aspects of these VitK2 activities are discussed in the first report (Figure 2), and Table 1 summarizes the studies analyzed in this review that link VitK2 and health.

[onlinelibrary.wiley.com/.../fsn3.3213](https://onlinelibrary.wiley.com/doi/10.1111/fsn3.3213) (2023).-- Additionally, this report reviews K2-7-mediated growth suppression in cancer cells through cell cycle arrest, autophagy, and apoptosis. The mechanistic basis of the disease modulatory effects of K2-7 is mediated by various signal transduction pathways such as PI3K/AKT, MAP Kinase, JAK/STAT, NF-B, etc.

[www.frontiersin.org/journals/pharmacology/articles/10.3389/fphar.2022...](https://www.frontiersin.org/journals/pharmacology/articles/10.3389/fphar.2022...) (2023).--- It is important to note that statins can prevent the conversion of vitamin K, ultimately affecting the functionality of vitamin K-dependent proteins.

Unlike fat-soluble vitamins A and D, there is no specific plasma carrier protein for vitamin K. vitamin K. Instead, it is transported mainly in plasma by lipoproteins. Studies suggest a potential link between high-dose statin treatment and increased vascular calcification. One possible explanation is that statins may interfere with vitamin K-dependent protein synthesis, which plays a role in preventing calcification.

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Additionally, certain studies have indicated that vitamin K supplementation has the potential to control hyperlipidemia, which could open a new avenue for controlling hyperlipidemia through the use of vitamin K dietary supplements. Overall, understanding the close relationship between vitamin K and lipids will provide better direction for studying and using vitamin K and may also offer a new intervention for hyperlipidemia. [link.springer.com/.../s12986-023-00779-4](https://link.springer.com/.../s12986-023-00779-4) (2024).--- Menaquinone-7 (MK-7 or K2-7) remains in the bloodstream longer and acts as an important cofactor in numerous biological processes. Furthermore, it is clinically proven to have numerous health benefits in the treatment of various diseases.

Energy metabolism involves a complex biochemical process that produces energy from nutrients. This energy is necessary to perform different physiological functions, cellular processes, thermal homeostasis and organ function. Nutrients go through a series of metabolic pathways such as glycolysis, citric acid cycles, -oxidation and oxidative phosphorylation to produce energy in the form of adenosine triphosphate. These energy pathways are regulated by hormones and enzymes. Additionally, recent clinical studies have shown that K2-7 has been helpful in fat loss, suggesting the role of K2-7 in metabolism. [openurl.ebsco.com/EPDB%3Agcd%3A1%3A22203233/detailv?sid=ebsco%3Aplink..](https://openurl.ebsco.com/EPDB%3Agcd%3A1%3A22203233/detailv?sid=ebsco%3Aplink..) (2024).---

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## juststeve

Gui, here in the States it's never-ending attacks on alternative methods of healing and health. A Legacy Media report on the dangers of overdose Vit D while making a mention of a D and a D3 and not much more, went on to describe enormous levels of D causing problems. Completely unmentioned was the role of m7K2 and Magnesium and how important the m7K2 is in preventing the very things they described. Another recent article was touting don't take the potassium, magnesium or calcium together as they bind each other up, but again no mention of the combined action of D3 and m7K2 preventing such things.

The usual Machiavellian Rockefeller Method of Look at This, Don't Look at That. The long-established Research trick of we will only test for one compound, one molecule and if we see something we can patent and own to call a medicine. They rarely if ever pay for research for things shown in the article where different compounds used together and work extremely well. Especially if they are found in nature can't be patented.

This can explain the C-19 attacks on the Ivermectin along with D, zinc, and others were in stopping the need for hospitalizations and unnecessary deaths to follow. If outside interest does the research they are condemned as quacks, fake research, not to be included in the exclusive club of Rockefeller Medicine. This all keeps blinders in place so those who haven't been knocked hard enough, or have someone close enough to them to see and dig further to realize the fix is in.

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## meehan2661

Thanks as usual Gui. This very subject is why I started reading here over a decade ago. The good Doctor recommended reading kates book k 2 paradox way back. Couple of things I would recommend for those that may be showing signs of heart disease. 1. Get a cone beam scan to eliminate the possibility that your heart disease isn't related to your mouth. 2. Look into proteolytic enzymes daily.. They make a world of difference. Nattokinase included. 3. Ip 6 to keep your ferritin levels in check and it is also a metal chelator. 4. Take a look here for some information [heartfixer.com/IndexCHC.htm](http://heartfixer.com/IndexCHC.htm) 5. Cleerly Health reads your ccta scan.. it identifies the exact location of your plaque and what kind of plaque you have. 6. New kid on the block you will probably never hear of. <https://www.cavadex.com/>

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## juststeve

Duley noted Gui the impact of Statins. Seen what is called anecdotal, one person after another fairly young, decent or good shape feeling little if not much to complain about get the, you have High Blood Pressure, you have High Cholesterol. BP and Statins to follow and then just one fast slide downhill in health and productivity after that. The Statins in particular seeing people waste away right in front of your eyes. Along with this an increasing loss of activity throwing fuel on the muscle loss. When the statins along with the restrictive diets started back in the sixty's, seventies all those old timers would push back with what are they talking about?

We've ate, lived this way further back than anyone can remember and now it is poison? Our bodies are suffering a Statin Shortage when our bodies don't produce statins? Important to remember in the rural areas this once was in those years, the little family farms and most of those businesses who serviced them were very, highly physically active too. It was the bankers, the little shop owners who suffered the most illness, and even that was not anything like we see today. What does it take to reform this backward treat the symptoms, never address the cause Medical System?

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## cedricpermaculture

Hi Gui and everybody, Most of vit. K is K1(90 -95%). Recycling v.K requires lipoate and CO2. Hypothyroid people produce less CO2. Vit.K are quinones like CoQ10. They derive from phenylalanine. Glyphosate inhibits shikimate pathway. All steps of v.D3 proceeding require magnesium. Thrombus due to K1 fights endotoxin. There are high levels of K1 in heart muscle. AD patients have lower K1 in their brains. Osteocalcin supports stress management at first line. Phylloquinone (K1) can replace CoQ10 .

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## Guillermou

Thank you Just, for very correctly expressing the great evils of the legacy of Rockefeller Medicine and underlining the danger of statins: "it is important to note that statins can prevent the conversion of vitamin K, ultimately affecting the functionality of proteins dependent on vitamin K. Statins decrease Q10 and in this meta-analysis the appearance of acute pancreatitis induced by statins has been observed from hours to years after treatment. Due to the variation in the latency period, the mechanism may be related to a direct toxic effect on the pancreas and the accumulation of a toxic metabolite.

Other mechanisms of action of statin-induced acute pancreatitis are speculated to be associated with rhabdomyolysis, myalgia, and/or metabolic or drug interactions through cytochrome P-450 3A4 (CYP3A4). [www.ncbi.nlm.nih.gov/.../PMC4365846](http://www.ncbi.nlm.nih.gov/.../PMC4365846) (2015) It is evident that statins are not the way to overcome the great pandemic of cardiovascular diseases. The way is to avoid obesity, diabetes and all the metabolic and stressful disorders that are causing deaths from multiple pathologies including COVID-19. We must avoid high levels of sugar and ferritin in the blood.

We must take care of dehydration, stress hormones such as cortisol and the curse of anti-inflammatory drugs. To reduce ferritin, you must reduce iron intake or avoid its absorption or use chelators. Green tea, fiber, exercise, calcium, zinc, manganese, curcumin, anthocyanins and other substances reported in these links reduce iron absorption.

[www.sciencedirect.com/.../S2405844021008239](http://www.sciencedirect.com/.../S2405844021008239) (2021)

[articles.mercola.com/sites/articles/archive/2017/05/31/managing-iron-l..](http://articles.mercola.com/sites/articles/archive/2017/05/31/managing-iron-l..) Serum Ferritin and GGT – Two Potent Health Indicators You Need to Know

[articles.mercola.com/sites/articles/archive/2017/09/20/monitoring-seru..](http://articles.mercola.com/sites/articles/archive/2017/09/20/monitoring-seru..)

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## Guillermou

Interesting references meehan. The risk factors for cardiovascular diseases are mediated by inflammation and nutritional deficiencies, which in turn are related to metabolic diseases and stress. Above all, a healthy diet, rich in polyphenols and healthy fats and absence of toxins. Epidemiological studies reveal that the intake of vegetables, berries, nuts and cereals could reduce the risk of CVD, and their antioxidants are considered the main contributors. Furthermore, experimental studies showed that some antioxidant natural products and their bioactive compounds exert beneficial effects on the cardiovascular system, such as polyphenols, polysaccharides, anthocyanins, epigallocatechin gallate, quercetin, rutin, and puerarin.

The mechanisms of action mainly included reducing blood pressure, improving lipid profile, improving oxidative stress, mitigating inflammation, and regulating intestinal microbiota. What's more, clinical trials confirmed the cardiovascular protective effect of some natural antioxidant products, such as soursop, beet, garlic, almond and green tea. Take care of your diet with oily fish (sardines, salmon), nuts (walnuts, almonds), raw olive oil, coconut oil, saturated fats from animals raised on grass.

foods with powerful antioxidants rich in polyphenols, robes, green vegetables, allium, etc. Everything organic, pesticides are poisons to health. . Smoking lowers HDL levels, especially in women, and increases LDL and triglyceride levels. Be careful with omega 6 polyunsaturated oils that are pro-inflammatory and easily oxidized, promoting cholesterol oxidation. This review summarizes the literature and provides possible mechanistic links between CVD and AD.

[www.ingentaconnect.com/content/ben/cn/2021/00000019/00000002/art00007](http://www.ingentaconnect.com/content/ben/cn/2021/00000019/00000002/art00007) (2021)

[www.mdpi.com/.../htm](http://www.mdpi.com/.../htm) (2021)

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Interesting reference doctor cedricpermaculture. In the present study, the role of vitamin K2 (MK-7) in the cognitive impairment associated with intestinal dysbiosis is shown. Behavioral observations are then correlated with proinflammatory, oxidative, and brain and intestinal histopathological changes in animals treated with antibiotics with or without vitamin K2 administration. When vitamin K2 was added to the drug, its levels were restored. Cognitive decline was observed in behavioral assays in the antibiotic group, but this decline was restored in mice given vitamin K. Myeloperoxidase levels in the colon and brain increased due to intestinal dysbiosis, which vitamin K2 prevented.

Acetylcholine esterase and markers of oxidative stress caused by antibiotics were also decreased with vitamin K2. In addition, vitamin K2 protected against alterations in the ultrastructure of the intestine caused by the use of antibiotics and preserved hippocampal neurons. Therefore, it can be concluded that vitamin K2 improved cognitive abilities, prevented hippocampal neuronal damage caused by antibiotics, and reduced gut and brain inflammation and oxidative stress.

[www.sciencedirect.com/science/article/abs/pii/S0031938423001774](http://www.sciencedirect.com/science/article/abs/pii/S0031938423001774) (2023)

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## ale558281

Kime in his book (The sun is not evil) Sunlight explains why taking Vitamin D which is a synthetic hormone is bad for us. Calcitriol is made from cholesterol in the epidermis with the sun. The hormones Calcitonin and parathyroid hormone work together with calcitriol to regulate calcium, magnesium, and other ions in our bodies. A synthetic form of calcitriol disrupts this balance and kidney stones and calcium deposits in joints and blood vessels may occur. Raising calcium levels in the blood has been linked to many disorders including osteoporosis.

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## **str5454**

So since older people do not absorb sunshine very well I assume they are destined to always be deficient.

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## **DocTwinkle**

Ale - this is why it is essential to supplement with the co-factors of fat-soluble vitamin A, K2, magnesium and some zinc and boron to support the body's ability to metabolize the synthetic cholecalciferol (a.k.a. "rat poison") in our bodies. Taken correctly, vitamin D3 (cholecalciferol) doesn't do mischief and isn't toxic. The studies that show toxicity do NOT administer these co-factors.

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## **Happiertoday**

I don't have the study at hand, but it was shown that vitamin K2 does NOT have any effect of blood clotting. Only vitamin K1.

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## **Segstar**

Surely you know that a bird in hand is worth 2 in the bush, smile :)

Posted On 03/05/2024

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**janFarb0730**

Yes! Exactly correct. Unfortunately, most mainstream doctors and medical personal have no clue about all that.

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**tmr1591**

Same as I recall

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**janFarb0730**

I read the vitamin K1 is affecting the blood clotting while Vitamin K2 has no effect on it. However, K2 is the great inhibitor of arterial calcification and redirects calcium into the bones. So, no wonder that I am tacking blood thinner meds and I take about 150 mcg of K2 every day but my IRN stays the same. I have to take Warfarin because I have some degree of Atrial Fibrillation despite the fact that A-FiB creates the risk of stroke equals about only 3% according to my cardiologist.

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**tmr1591**

Yes I saw the same

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## DocTwinkle

JanFarb - Well my father pooh-poohed the fact that he had "mild" a-fib and has been incapacitated now for two years from a left hemispheric severe stroke leaving him paralyzed on his right side and unable to talk (he babbles on in gibberish - nothing understandable except occasional yes or no, both of which he confuses). FYI here is a relatively recent Orthomolecular News article on using magnesium and potassium at high doses to overcome a-fib.

[orthomolecular.activehosted.com/index.php?action=social&chash=34ed..](http://orthomolecular.activehosted.com/index.php?action=social&chash=34ed..) I note that the author, a medical doctor, also was on a medication but I am unfamiliar with the one he is on. My father takes metoprolol for his a-fib but it doesn't stop it, and he's on Eliquis as a blood thinner. I'm trying hard to unclog his coronary arteries...

for years he took tons of vitamin K -- he would have maybe 4 of the Life Extension Super K's each day and would take extra MK-7 to boot. It think too much K1 increased the chance of the clot forming which caused his stroke, and he may have been taking too much vitamin D3 relative to the amount of co-factors he was taking -- I don't think he took ANY fat-soluble vitamin A, for example. Also he was taking a LOT of fish oil. My brother believes he was taking some 5 grams/day of fish oil. Research shows that more than 1 gram/day of fish oil, in some people, can cause or worsen a-fib: [www.cedars-sinai.org/newsroom/omega-3-supplements-could-elevate-risk-o..](http://www.cedars-sinai.org/newsroom/omega-3-supplements-could-elevate-risk-o..) You CAN take too much of a good thing!

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## DocTwinkle

I thought Dr. Mercola used to sell the UVB lamps for vitamin D, but I can't seem to find them now. I recall they were very long tubes for whole-body exposure. I cannot seem to find anything like it online now. Seems like the safer way to get extra vitamin D in winter months.

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## **sch3369**

Here's what I want to know...I recently had my vitamin D checked...it was >150 (I'm in the states) That's well above Dr Mercola's recommended optimal level. Is this a problem with the level being that much higher? I live above the 45th parallel so sunlight is limited in the winter although I am outside skiing etc. I supplement in the winter with D3/K2 Don't seem to be having any problems...other than my magnesium is on the bottom of where it should be all my other numbers are fine. I don't want to hear what the internet has to tell me, I'd rather here from some people who have done more research

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## **dclavett**

Sch3369, I too had taken d3 in excess to result in levels greater than 100. Shortly after that developed calcification nodules in my lungs, sarcoidosis. I now how to lower my intake of d3 to get results below 50 so as not to create new nodules. Had to have pet scan to see if nodules were in other organs- heart, liver, etc. I was told to be cautious with my intake of d3 and sunlight. I live in northeast US, therefore supplement 3 seasons, outside all summer. The nodules caused scarring and inflammation, wheezing, pain. So I know I don't want that again. But also don't want levels too low so that my immune system can't fight off illness. Levels at 35 or below are not good. Best of luck to you!

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## **DocTwinkle**

sch - not sure how old you are but you may want to get a coronary artery calcium score done and/or other arterial scans to see if calcium's building up in your arteries. My father felt fine too. Now he's incapacitated. You DEFINITELY want to increase your magnesium levels! Co-factors for properly metabolizing vitamin D are fat-soluble vitamin A (e.g. cod liver oil), vitamin K2, magnesium, zinc and boron. A great resource on vitamin D research is at <https://vitamindwiki.com/> ... they have been having website difficulties recently though.

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**str5454**

Read or listened to info recently that a study from University of Texas said menaquinone-7 (MK-7) converts to menaquinone-4 (MK-4) which is the active form. Please understand I may not know what I am talking about - just sharing. Mercola recently stated that he recommends 30 milligrams 3 x day of MK-4. See: The Underappreciated Role of Carbon Dioxide in Health A Special Interview With Georgi Dinkov It's at the very last of the article/interview.

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