

Give soon-to-be moms peace of mind with plant-based omega-3s

New clinical practice guidelines and solutions
to support a healthy full-term pregnancy

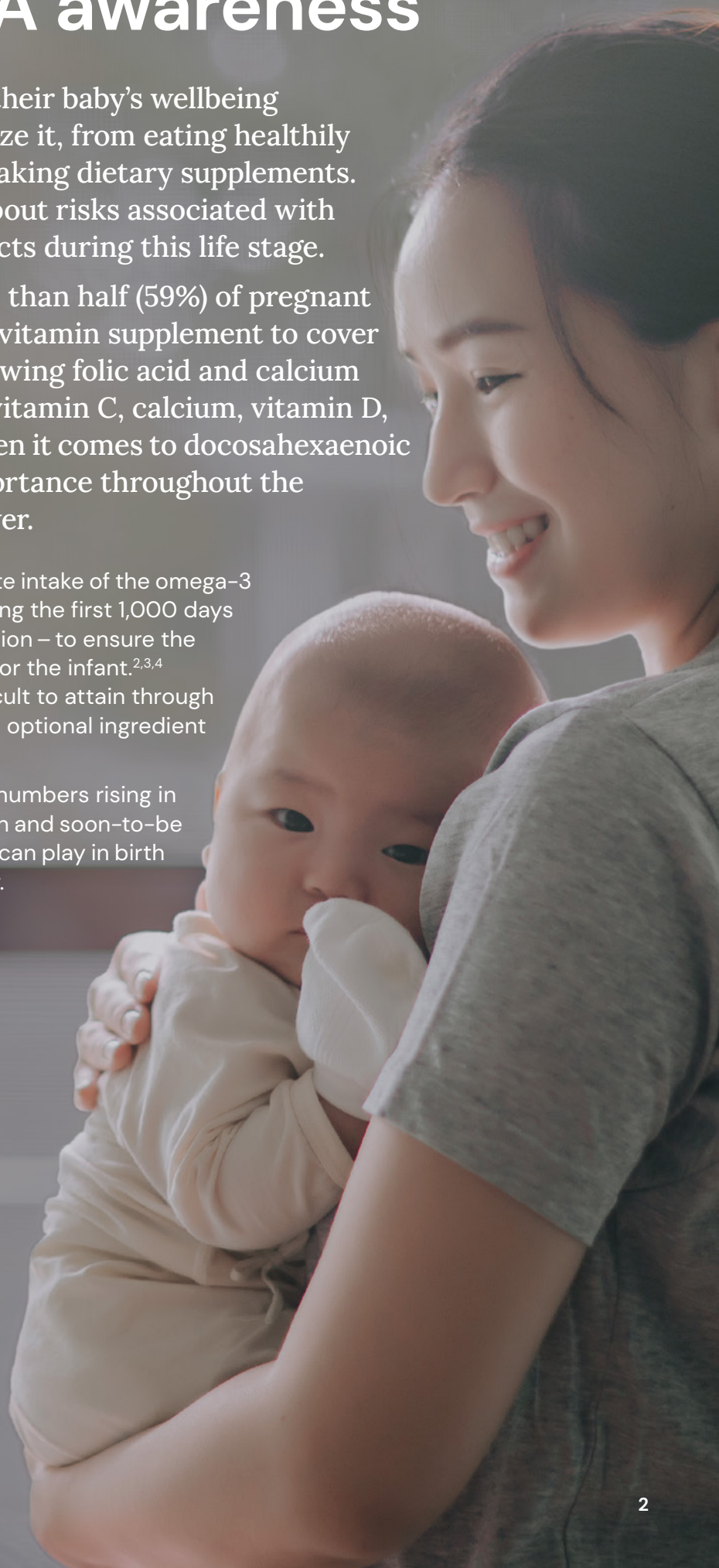
Nourish the future by elevating DHA awareness

Mothers-to-be are conscious of their baby's wellbeing and many take actions to prioritize it, from eating healthily and staying physically active to taking dietary supplements. Women are especially worried about risks associated with adverse birth outcomes and defects during this life stage.

To address these concerns, more than half (59%) of pregnant women look for a complete multivitamin supplement to cover their daily nutritional needs – viewing folic acid and calcium to be key nutrients, followed by vitamin C, calcium, vitamin D, iron and vitamin E.¹ However, when it comes to docosahexaenoic acid (DHA), awareness of its importance throughout the motherhood journey is much lower.

Mounting evidence suggests that adequate intake of the omega-3 fatty acid, DHA, is particularly critical during the first 1,000 days of a baby's life – and even before conception – to ensure the best development and health outcomes for the infant.^{2,3,4} However, optimal DHA status can be difficult to attain through diet alone – and is still only considered an optional ingredient for maternal supplementation.

With **1 in 10 babies born too soon**⁵ – and numbers rising in many regions – it's time to educate women and soon-to-be moms about the significant role that DHA can play in birth outcomes, especially full-term pregnancy.



Building the foundations for a healthy pregnancy: The role of DHA

Globally, premature birth is a leading cause of death among infants and children under the age of five, and survivors can face a lifetime of disabilities.⁵ An extensive – and expanding – body of evidence showcases that omega-3 supplementation during pregnancy, particularly DHA, can reduce the risk of preterm and early preterm birth.^{2,3,4}

A Cochrane Review, which examined data from 70 randomized controlled trials, revealed high quality evidence that the intake of omega-3 fatty acids during pregnancy reduced the risk of preterm birth by 11% and early preterm birth by 42%.² A recent revision of these meta-analyses confirmed the conclusions.⁴ In addition, two sizeable trials have highlighted the significance of baseline DHA levels early in pregnancy – with a low baseline omega-3 blood status linked to an elevated risk of preterm and early preterm birth.^{6,7}



42%

The intake of **omega-3 fatty acids** during pregnancy **reduced the risk of early preterm birth by 42%.**²



The first-ever global expert consensus on clinical recommendations for omega-3 fatty acid supplementation in pregnant women to reduce the risk of preterm and early preterm births was published in 2023.³ The worldwide panel included 24 specialists in the fields of obstetrics & gynecology, pediatrics and nutrition.

The experts agreed on the following conclusions:

1. Lower intakes and lower blood levels of fish and of the omega-3 fatty acids EPA and DHA is associated with a significantly increased risk of preterm birth.
2. Intakes of up to 1000 mg/day of EPA and DHA, or of up to 1000mg/day of DHA alone, do not raise safety concerns in the general population and in pregnant women.

Guidelines for omega-3 supplementation at each stage of the motherhood journey include:



Preconception

DHA intake during preconception is paramount as women with low early-pregnancy DHA levels or intakes are at higher risk of preterm birth. Considering this, women of childbearing age – particularly those trying to conceive – should ensure regular omega-3 intake either from diet or supplements providing a minimum of 250mg per day (EPA+DHA or DHA alone).



Pregnancy

Throughout pregnancy it is recommended that women supplement with an extra 100–200mg of DHA daily to reduce preterm birth risk (totaling at least 350–450mg EPA+DHA or DHA alone). These levels are higher than historical recommendations, however numerous prenatal supplements fall short of containing sufficient amounts of EPA+DHA or DHA aligned with the updated guidelines.⁸



High-risk cases

Women with low omega-3 (particularly DHA) intake or status early in pregnancy face an elevated risk of preterm birth. The guidelines suggest higher daily doses of 600–1000mg EPA+DHA or DHA alone for these women.³ Identifying women with low baseline intake or status can be achieved through a blood test or simple [food frequency questionnaire](#).⁹



Why DHA supplement adherence matters

Optimal DHA supplementation during pregnancy can be a challenge for expectant mothers – who often experience nausea and heartburn, are sensitive to specific aromas and may find it difficult to swallow large pills.

Nonetheless, the significance of incorporating DHA supplementation into daily routines has been clinically proven. The ADORE trial compared the benefits of high dose algal DHA supplementation (1000mg per day) with a lower dose of 200mg per day.⁷ It found that early preterm birth rates (<34 weeks gestation) were 50% lower among women with a low baseline DHA status who received the high dose DHA supplement (compared to low dose).

The study also explored differences in adherence to the supplement regimen by measuring the levels of DHA in the blood at the beginning and end of pregnancy. Among women with low DHA status at baseline and who were adherent to the high dose supplementation, early preterm births were reduced even more (by 65%). Early preterm birth rates for those who were not adherent to the high dose were similar to those who received the lower dose. This underscores the importance of providing DHA in formats that are easy to adhere to.¹⁰



50%

Early preterm birth rates were **50% lower** in women with **low baseline DHA** who received **high dose** supplementation.

Nurture full-term pregnancies with *life's*®

Dive into sustainable omega-3 innovation with our *life'sDHA*® and *life's*®OMEGA lipids – which offer maternal brand owners a variety of high-potency DHA levels delivering recommended daily intakes in minimal serving sizes. Our cutting-edge lipids portfolio also exhibits superior sensory properties, enabling product development in traditional soft gel capsules to alternative innovative formats.

For today's environmentally conscious and health-savvy mothers, our algal-based *life'sDHA*® and *life's*®OMEGA also present the perfect solution to assist moms-to-be in fostering a healthy future, not just for themselves and their baby but also the planet. Both solutions are derived from natural, non-GMO algae via a proprietary indoor process – guaranteeing quality ingredients that are free from ocean contaminants and 100% independent of the delicate marine environment.



Grow your sales with purpose-led products

dsm-firmenich's enhanced *life's*® portfolio offers fermented ingredients that deliver the health benefits of DHA – offering the essential building blocks needed to create a healthy future for mom and baby:

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- ✓ Zero impact on the marine ecosystem
- ✓ Clinically studied
- ✓ 100% vegan/vegetarian
- ✓ Free from environmental and marine contaminants
- ✓ Non-GMO
- ✓ Broad coverage of omega-3 profiles – from DHA only, to DHA & EPA, and DHA & EPA & DPA*

* *life's*® OMEGA only

***life's*DHA® portfolio for maternal nutrition**

Introducing high level, contaminant free, non-GMO & vegan* solutions

Product	Format	Forms of fatty acids	Min. DHA/EPA content TG	Maternal application	Regulatory coverage	Other certificates
<i>life's</i> DHA® B54-0100	Oil	Triglycerides	540-545 mg/g 80 mg/g	Capsules Soft gels	Extensive: Global	Kosher, halal
<i>life's</i> DHA® B31	Powder	Triglycerides	310 mg/g	Gummy Powders	Limited: US, LATAM, EMEA	Kosher

* B31 algal powder, due to the use of bovine geletine, cannot use a vegan claim. TG: Triglycerides.

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