

NUTRISON CONCENTRATED

A nutritionally complete, very high energy, low mineral, ready-to-use enteral tube feed.

FEATURES

- Suitable as a sole source of nutrition[^]
- 2kcal/ml: for patients with increased energy requirements and fluid/volume restrictions.
- Whey-dominant P4 protein blend: in line with international recommendations on protein quality/ amino acid profile and for gastro-intestinal tolerance benefits. ¹⁻⁸
- **Reduced mineral content:** in line with recommendations for chronic renal disease.⁹
- Enriched with carotenoids: reflecting general health recommendations for their antioxidant properties and positive effect on immune function.¹⁰
- Fish oils: to provide Docosahexaenoic acid (DHA) and Eicosapentaenoic acid (EPA).
- Fibre-free: for patients requiring residue-restricted diets.
- **500ml OpTri bottle:** suitable for closed or open system feeding via ISO compliant flip-top screw cap.
- Flocare Two Pack Connector (69915) compatible: for connecting two packs (2 x 500ml) for simultaneous delivery.

Indications

For use in the dietary management of:

- Disease related malnutrition.
- Conditions requiring a fluid or volume restriction e.g. liver or renal disease, heart failure.
- Conditions requiring a select mineral restriction e.g. renal disease.

Important Notice

- Not for parenteral use.
- Not suitable for patients with galactosaemia.
- Not suitable for use in patients with cow's milk protein allergy.
- Not suitable for infants under 1 year of age.
- Use with caution in children aged 1-6 years of age.
- Use with caution in individuals with a seafood allergy.

Directions for Use

- Shake well before use.
- Use at room temperature.
- Handle aseptically to ensure product remains sterile.
- Usage to be determined by a healthcare professional.

Storage

- Store in a cool, dry place.
- Once opened, store in the refrigerator.
- Discard unused content after 24 hours.

Ordering Information

To order contact Nutricia Customer Care 1800 889 480

Nutrison Concentrated	Product code	Units per carton
500ml OpTri bottle	132376	12

Ingredients

Nutrison Concentrated: Water, maltodextrin, vegetable oils (sunflower oil, rapeseed oil, MCT oil: coconut oil, palm kernel oil), whey protein (from cow's milk), cow's milk protein caseinate, pea protein, soy protein, potassium citrate, fish oil, emulsifier (soy lecithin), potassium hydroxide, calcium carbonate, magnesium chloride, sodium citrate, carotenoids (contains soy) (β -carotene, lutein, lycopene oleoresin from tomatoes), choline chloride, acidity regulator (citric acid), magnesium hydrogen phosphate, sodium L-ascorbate, magnesium hydroxide, ferrous lactate, potassium chloride, zinc sulphate, nicotinamide, retinyl acetate, DL- α -tocopheryl acetate, copper gluconate, sodium selenite, manganese sulphate, cholecalciferol, calcium D-pantothenate, D-biotin, chromium chloride, riboflavin, sodium molybdate, sodium fluoride, potassium iodide, phytomenadione, cyanocobalamin.

Allergen & Cultural Information

- Contains: cow's milk protein, soy, fish oil.
- Does not contain: wheat, egg, nuts,* lupins.
- Halal certified.
- No Kosher forbidden ingredients.
- No gluten containing ingredients. No detectable gluten when tested to a sensitivity level of less than 5 parts per million (<5 ppm i.e. <5mg/kg).
- Low lactose (lactose <2g/100g).



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NUTRITION INFOR	MATION	Per 100ml	Per 500ml
Energy	kcal	200	1000
	kJ	840	4200
Protein	9	7.5 (15% E)	37.5
Casein	9	1.9	9.5
Whey	9	2.6	13
Soy	9	1.5	7.5
Pea	9	1.5	7.5
Carbohydrate	9	20.1 (40% E)	100.5
Sugars	9	1.3	6.5
as Lactose	9	<0.025	<0.125
Fat	9	10 (45%E)	50
Saturates	9	2.5	12.5
- of which MCT^{\dagger}	9	1.7	8.5
Monounsaturates	9	5.8	29
Polyunsaturates	9	1.7	8.5
DHA	mg	20.4	102
EPA	mg	30.0	150
ω6 / ω3 ratio		2.94:1	2.94:1
Fibre	9	<0.1	<0.5
Water	ml	70	350
Minerals		Per 100ml	Per 500ml
Sodium	mg	100	500
	mmol	4.3	21.5
Potassium	mg	180	900
	mmol	4.6	23
Calcium	mg	80	400
Phosphorus	mg	76	380
Magnesium	mg	35	175
Chloride	mg	80	400
Ca:P ratio		1.1:1	1.1:1

у	mOsmol/ kgH20	525	525
	mg	15	202

In accordance with Australia New Zealand Food Standards Code - Standard 2.9.5

† Medium-chain triolycerides.

* Peanut (Arachis hypogaea), Almond (Amygdalus communis L .), Hazelnut (Corylus avellana), Walnut (Juglans regia), Cashew (Anacardium occidentale), Pecan nut (Carya illinoiesis (Wangenh.) K. Koch), Brazil nut (Bertholletia excelsa), Pistachio nut (Pistacia vera), Macadamia nut and Queensland nut (Macadamia ternifolia) and products thereof except those used for alcoholic distillates.

REFERENCES 1. Hurt RT, McClave SA, Martindale RG, et al. Summary Points and Consensus Recommendations From the International Protein Summit. Nutrition in Clinical Practice. 2017;32:142S-151S. 2. World Health Organization. Protein and amino acid requirements in human nutrition: report of a joint FAO/WHO/UNU expert consultation. 2007; WHO technical report series ; no. 935. **3.** Kuyumcu S, Menne D, Curcic J, *et al.* Noncoagulating enteral formula can empty faster from the stomach: A double-blind, randomized crossover trial using magnetic resonance imaging. Journal of Parenteral and Enteral Nutrition. 2015;39:544-551. 4. van den Braak CC, Klebach M, Abrahamse E, et al. A novel protein mixture containing vegetable proteins renders enteral nutrition products non-coagulating after in vitro gastric digestion. Clinical Nutrition. 2013;32:765-771. **5.** Klebach M, Hofman Z, Bluemel S, et al. Effect of protein type in enteral nutrition formulas on coagulation in the stomach in vivo: Post hoc analyses of a randomized controlled trial with MRI. Abstract presented at Clinical Nutrition Week, January 16–19; Austin, Tx. Journal of Parenteral and Enteral Nutrition. 2016;40:134(21). 6. Luttikhold J, van Norren K, Rijna H, *et* al. Jejunal feeding is followed by a greater rise in plasma cholecystokinin, peptide YY, glucagon-like peptide 1, and J clin leteoning is followed by a greater rise in plasma choice/stocknim, periode 11, glocagon-like peptide 1, and J Clin Nutr. 2016;103:435–43. **7**. Abrahamse E, van der Lee S, van den Braak S, *et al.* Gastric non-coagulation of enteral tube feed yields faster gastric emptying of protein in a dynamic in vitro model. Abstract presented at 34th ESPEN Congress. Sept 8-11; Barcelona, Spain. Clinical Nutrition Supplements. 2012;7:PP239(119). **8**. Liu J. Klebach M, Abrahamse E, et al. Specific protein mixture reduces coagulation: An in vitro stomach model study mimicking a gastric condition in critically ill patients. Poster presented at 38th ESPEN Congress. 17-20 September; Copenhagen, Denmark. Clinical Nutrition. 2016;35:MON-P182 (S220). 9. Dietitians Association of Australia, Nutrition & Dietetics (2006), Evidence based practice guidelines for the nutritional management of chronic kidney disease. **10.** Cooper DA, Eldridge AL, Peters JC. Dietary carotenoids and certain cancers, heart disease and age-related macular degeneration: A review of recent research. Nutrition Reviews 1999; 57: 201-214.

A food for special medical purposes; to be used under strict medical supervision.

For more information call the Nutricia Clinical Care Line 1800 060 051



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Vitamins	\sum	Per 100ml	Per 500ml
Vitamin A	µg-RE	164	820
Vitamin D	hð	2.7	13.5
Vitamin E	mg α -TE	2.5	12.5
Vitamin K	hð	11	55
Vitamin C	mg	20	100
Thiamin	mg	0.30	1.5
Riboflavin	mg	0.32	1.6
Niacin	mg NE	3.6	18
Vitamin B6	mg	0.34	1.7
Vitamin B12	hð	0.42	2.1
Folic Acid	hð	53	265
Pantothenic Acid	mg	1.1	5.5
Biotin	hð	8.0	40
Trace Elements		Per 100ml	Per 500ml
Iron	mg	3.2	16
Zinc	mg	2.4	12
Manganese	mg	0.66	3.3
Copper	hð	360	1800
lodine	hð	27	135
Molybdenum	þð	20	100
Selenium	hð	11	55
Chromium	hð	13	65
Fluoride	mg	0.20	1.0
Other		Per 100ml	Per 500ml
Carotenoids	mg	0.4	2.0
Choline	mg	73	365
Osmolality	mOsmol/ kgH20	525	525