PRESENIUS KABI PONSFEED

Summer 2023

Welcome to the latest edition of Fresenius Kabi NewsFeed.

Fresenius Kabi NewsFeed contains brand information and promotional content.



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Click for Parenteral Nutrition prescribing information







Welcome to the latest edition of Fresenius Kabi NewsFeed

The newsletter that provides you with a window into Fresenius Kabi Enteral and Parenteral Nutrition.

Our Clinical Nutrition Scientific Affairs team have come together to offer a newsletter to disseminate clinical updates and provide a window into Fresenius Kabi enteral and parenteral nutrition, directly to healthcare professionals who deliver nutritional care. The aim is to provide both educational and product updates around clinical nutrition, including oral nutritional supplements, dysphagia, enteral tube feeds and feeding tubes, and parenteral nutrition products.

In this edition we look at our new sample service for oral nutritional supplements, using Fresubin® 3.2kcal Drink as a shot, as well as an update on the new label design for tube feeds and oral nutritional supplements and the information on the reuse of Amika® giving sets. We also take a look at the 'United for Clinical Nutrition; Euro PN' study, and provide details for our upcoming Parenteral Nutrition Study Day be sure to save the date in your calendar.

Adverse events should be reported.
Reporting forms and information can be found at https://yellowcard.mhra.gov.uk Adverse events should also be reported to Fresenius Kabi Limited.
Email: Pharmacovigilance.GB@fresenius-kabi.com

Do you know a colleague who would like to receive these updates?

Please ask them to contact us and provide us with their contact details and we will add them to the mailing list.

Please get in touch via

Scientific.AffairsUK@fresenius-kabi.com







Ordering patient samples just got simpler!

With our brand new website for ordering Oral Nutritional Supplements



Easy and convenient delivery service to your patient's home

- Choose samples
- Add samples to cart
- · Add patient details & confirm
- Samples delivered to patient

Healthcare professionals can follow their patient's order with order tracking

Select samples by product and by flavour reducing wastage and supporting patient compliance

Easy registration & sample request process allows for a seamless customer experience with the option to provide your patient with a free recipe book!

*Free delivery in 24 hours for UK mainland (including Isle of Wight and Isle of Man) and 48 hours Scottish Highlands, and

Order Fresubin® samples

Scan me or <u>click here</u> To Order Fresubin patient samples



Consider Fresubin® 3.2 kcal Drink

as a shot

When you're looking for a low volume, energy dense ONS*, why not choose one that's also high in protein?

3x







Actual dosage is at the recommendation of the healthcare professional

Fresubin 3.2 kcal Drink is a high protein oral nutritional supplement for the dietary management of patients with or at risk of malnutrition, with increased energy and protein needs, providing concentrated energy and protein for when compliance is a challenge.

Fresubin 3.2kcal Drink offers flexibility for patients, in a study of elderly patients¹ (n=20) looking at gastrointestinal tolerance, palatability and compliance, dispensing Fresubin 3.2kcal Drink 3 times daily was well tolerated and demonstrated good compliance. Participants received 40 ml Fresubin® 3.2 kcal Drink 3 times daily, corresponding to 400 kcal and 20 g protein, for 7 days. The ONS was consumed in the morning, midday, and evening at least 1 hour before meals. Distribution was coordinated with medication rounds. In total, 95% of the prescribed ONS was consumed.

Fresubin® 3.2 kcal Drink, a high energy, high protein ONS, consumed in 3 low volume shots daily by elderly patients was well tolerated and accepted. Dispensing lower volumes of this energy dense ONS provided a convenient way to supplement calories and protein and was associated with high compliance in older residents in need of oral nutritional support.¹

Fresubin 3.2 kcal Drink, a low volume (125ml) energy dense ONS (3.2kcal/ml, 400kcal per bottle), with 20% energy from protein (20g protein per bottle).

Available in 3 great flavours!

- Hazelnut
- Vanilla-Caramel
- Mango





Fresubin

*oral nutritional supplement

1. ESPEN 2017, 09-12th September, 2017, The Hague: MON-P244









In addition to the new label design, we have also made some changes to the information provided on labels, this reflects minor product optimisations as well as legislative requirements that have been included as part of the label redesign project.

You will start seeing our new labels appearing in the coming months, the update will be done gradually throughout 2023 and into 2024. During the transition period, you and your patients may still be supplied with products in the old label design.

The key changes include:

- The nutrient circle has been removed from the tube feeds, ONS EasyBottles and
 ONS outer sleeves. Instead, you will now see a change in the positioning of the
 product name on all tube feeds to give improved readability whilst being stored or
 in use, and the addition of key nutrition information (energy and protein per pack
 size) on the front of the pack on all ONS labels.
- New colour-coding on all ONS products to highlight key product categories e.g. high protein, dysphagia, paediatrics. ONS flavour and texture are also prominently displayed for easier visualisation.
- New colour-coding for the EasyBag tube feeds; including darker colours for more energy-dense products and a dedicated colour code for every product, providing improved product differentiation.
- Allergens from ingredients are now clearly displayed on the individual ONS bottles.
 - Please note, there is a new addition of a precautionary allergen warning for Calshake® on the outer sleeve, which states: 'May also contain egg, celery, mustard and soya'. Although these raw materials are not used in the Calshake POWDER recipes, raw materials with the mentioned allergens are at the manufacturing site, so Precautionary Allergen Labelling is now included.
- Minor changes to the wording in relation to the product description.
- Minor changes to the formulation and nutritional declaration.

We are confident that the new labels will help make product recognition and selection easier for healthcare professionals. With the change in the labels, there will be a product code change which will be communicated as each new product becomes available.

If you have any queries or would like to discuss any of the above further, your Fresenius Kabi Account Manager will be happy to assist.

IDDSI Framework and Fresubin® Oral Nutritional Supplements

Fresenius Kabi have aligned all their Fresubin® Oral Nutritional Supplements (ONS) with the International Dysphagia Diet Standardisation Initiative (IDDSI) Framework.¹

Standard ONS are not designed specifically for use in dysphagia and their consistency may be more sensitive to temperature and variation in syringe/funnel nozzle dimensions. We would advise extra clinical attention to ensure patients are safe with the chosen ONS.

As standard ONS are not labelled with a specific IDDSI level, it is the responsibility of the Clinician to ensure their suitability and these results should only be used as a guide. It is important to bear in mind that it can sometimes be difficult to predict serving temperature and suitability may also vary between different patients.

Each product has been evaluated with respect to the IDDSI framework.¹ Products were tested at chilled ($6\pm1^{\circ}$ C) and room temperature ($25\pm1^{\circ}$ C). For liquids the IDDSI flow test was performed using an IDDSI funnel, and at least three individual samples were tested. For dessert style puddings the IDDSI framework fork-drip and spoon-tilt tests was used.

<u>Click here</u>

For full details regarding our ONS range and their IDDSI classification - please contact your local Account Manager or visit the Scientific Affairs Resource Section on our website

1. Cichero JA et al. Development of International Terminology and Definitions for Texture- Modified Foods and Thickened Fluids Used in Dysphagia Management: The IDDSI Framework. Dysphagia. 2017;32(2):293-314. https://iddsi.org/framework/







Thick & Easy™ Original



We would like to reassure you that the production of Fresenius Kabi's starch-based thickener, Thick & EasyTM Original, will continue and this product remains available to order via the usual channels.

We understand that some patients may benefit, or prefer, to stay on a starch-based thickener instead of switching to a gum-based alternative.

Thick & Easy™ Original can be used to alter the consistency of hot and cold food and drinks to help ensure a safe swallow. Thick & Easy™ Original encourages oral intake, thereby reducing the risk of dehydration and malnutrition.

The following product codes can be used to order:

Product Description	Order code
Thick & Easy™ Original 225g tin	7931333
Thick & Easy™ Original 4.54kg catering pack	7931334





Information on the use of Amika® Enteral Feeding Administration Sets

All enteral feeding giving sets in the UK are labelled for single use only, this includes the Fresenius Kabi Amika® enteral feeding giving sets.



This symbol is used on medical device packaging to indicate 'do not reuse'.

Single use devices are not intended to be reprocessed i.e. disinfected, cleaned or sterilised and then used on another patient or even the same patient. The reuse of single use devices can affect their safety, performance and effectiveness.

The Amika® enteral feeding giving sets are disposable devices labelled for single use only, and are valid for up to 24 hours duration of use.

The term 'single use' device means a device that is intended to be used on one individual during a single procedure. The term 'single procedure' is not further defined. This would depend on the individual patient situation. Enteral nutrition can be administered with one or a combination of the following methods: continuous, cyclic, intermittent and bolus feeding. It is in the responsibility of the healthcare professional (HCP) to decide the best feeding method, and how a single procedure should be defined, throughout the duration of use.

To reduce the risk of microbial contamination of enteral feeds and feeding systems, minimal handling and an aseptic non-touch technique to connect systems should be used. 2,3

The transfer of a giving set between feed bags and water bags over a 24-hour period can be written into a local enteral feeding policy, with the guidance of the local infection control team.^{4,5}

1.Medicines and Healthcare Products Regulatory Agency. Single-use medical devices: Implications and Consequences of Reuse. January 2021 V 2.4. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/956268/Single_use_medical_devices.pdf. Accessed June 2023 2. National Institute for Health and Clinical Excellence (NICE). Prevention of healthcare associated infections in primary and community care. 2012 https://www.nice.org.uk/guidance/cg139. Accessed June 2023 3. Parenteral & Enteral Nutrition Specialist Group (PENG). Pocket guide to Clinical nutrition. Microbiological control. 2018 5th edition. 4. Portsmouth Hospitals University NHS Trust. Enteral feeding administration policy – adults. November 2022. Enteral Feeding Administration Policy.pdf (porthosp.nhs.uk). Accessed June 2023 5. Adult hospital enteral feeding policy and procedure. Maidstone Hospital and Tunbridge Wells NHS Trust. January 2021. https://www.formularywkccgmtw.co.uk/media/1760/enteral-feeding-policy.pdf. Accessed June 2023











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European countries



77

Intensive care units



1172

Patients analysed

Results >>

United For Clinical Nutrition EuroPN Survey^{1,2}

Characterising the current use of medical nutrition and its impact on clinical outcomes

The EuroPN study was instigated, sponsored, funded, and logistically supported by Fresenius Kabi. Fresenius Kabi had no influence over the data collection and/or its interpretation.



Study Design[†]

The largest known data collection initiative in the field of medical nutrition therapy in critically ill adults¹

This prospective, observational cohort study represents the largest known data collection initiative for gathering real world evidence about medical nutrition and its association with the clinical outcomes of critically ill adult patients with an ICU LOS ≥ 5 days^{1,2}



†Critically ill adults with a BMI of 18.5 and 45kg/m2, median APACHE II 18.5, median SOFA 7.0, number of patients on IMV between days 1-3 of ICU admission was 813. Primary outcome - median calorie and protein balances as a percentage deviation from ESPEN targets until ICU discharge, death or maximum day 15 of ICU stay. Intakes calculated from all nutritional sources. Associations modelled between three categories of daily calorie and protein intake (low: <10kcal/kg, <0.8g/kg; moderate: 10-20kcal/kg, 0.8-1.2g/kg; high: >20kcal/kg, >1.2g/kg) and timevarying hazard ratios of 90-day mortality and successful weaning from IMV. Early nutrition: days 1-4 of ICU stay, late nutrition: days 5-15².









Medical nutrition* therapy was progressively increased as suggested by the ESPEN ICU guideline**



Day 2



83%



65%

Median Start

Parenteral and/or Enteral Nutrition Therapy were started on median day 2 after ICU admission.

Calorie Targets

average 83% of calorie targets suggested by ESPEN.

Protein Targets

Patients received on average **65% of protein** targets suggested by ESPEN.

Results of associations between nutritional intakes and clinical outcomes:



Survival: Daily calorie intake of 10-20kcal/kg was associated with longer survival time on day 19 compared to 'low' calorie intake (Min HR 0.15; 95% CI: 0.05; 0.39)



Mechanical Ventilation: A daily caloric intake of 10-20kcal/kg irrespective of time was associated with shorter time on IMV on day 12 (maximum HR 4.59 [95% CI: 1.5;14.09]



Protein intake of 0.8-1.2g/kg on days 1-15 was associated with earlier weaning from IMV on day 12 than any 'low' intake period (Max HR 2.60; 95% CI: 1.09;6.23)

References

1. Hiesmayr M, Csomos A, Dams K, et al. Protocol for a prospective cohort study on the use of clinical nutrition and assessment of long term clinical and functional outcomes in critically ill adult patients. Clinical Nutrition ESPEN 2021; 43:104-110. 2. Matejovic, M, Huet, O, Dams, K, et al. Medical nutrition therapy and clinical outcomes in critically ill adults: a European multinational, prospective observational cohort study (EuroPN). Critical Care. 2022;26(143).

Abbreviations

ICU: Intensive care unit

LOS: Length of stay

ESPEN: European Society for Clinical Nutrition and Metabolism APACHE II Score: Acute Physiology and Chronic Health Evaluation

SOFA: Seguential Organ Failure Assessment

IMV: Invasive Mechanical Ventilation BMI: Body mass index

HR: Hazard Ratio







^{*}Macronutrient intake from enteral and parenteral nutrition and non-nutritional sources were analysed.Intakes were calculated from 15 days of data, with imputations if patients were discharged from ICU prior to day 15

^{**}Targets set as: progressive increase in calories until estimated daily energy expenditure 25kcal/kg; protein 0.6g/kg on day 1, 0.9g/kg days 2 and 3, and 1.3g/kg days 4-15.



Parenteral Nutrition Study Day

Save The Date

Continuing our commitment to education, we are delighted to introduce:

Parenteral Nutrition Study Day Tuesday 3rd October 2023

Chair:

Dr Andrew Rochford MSc FRCP - Royal Free London

Location:

Radisson Blu Edwardian, London, Bloomsbury





Laurette's story is one example of the millions...

...of patients who have been prescribed SMOFlipid® (soya- bean oil, medium-chain triglycerides, olive oil, fish oil) as a supply of energy and essential fatty acids^{1,2}





Visit our website to find out more at https://multichamberbags.co.uk/smoflipid

1. SMOFlipid 200mg/ml emulsion for infusion Summary of Product Characteristics. Fresenius Kabi Limited. March 2020. 2. Fresenius Kabi Limited. Data on file







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Have you got a question relating to clinical nutrition? Just contact our Medical Information or Scientific Affairs teams who will be able to offer you support and advice.

Medical Information Team:

Medical Information

SUPPORT • EDUCATE • INNOVATE

Fresenius Kabi have a dedicated department with extensive practical knowledge and experience of parenteral nutrition

The team can provide the following information:

- Technical information (composition, shelf-life, etc.) on individual Fresenius Kabi IV Therapy products
- Stability assessment of parenteral nutrition regimens
- Over 95% of enquiries will be answered the same day. 5% may require formal stability testing or further expert assessment.
- Stability data on file for over 20,000 PN admixtures
- All stability information is supported by a printed stability statement signed by one of our nominated experts
- Comprehensive stability data available

When you have a parenteral nutrition enquiry, Call $us^{\ast}\,on$

Tel: 01928 533575

Between 9:00am and 5:00pm Monday to Friday

Email: Medical.Information-UK@fresenius-kabi.com

*if lines are engaged calls are automatically directed to the department voicemail which is checked regularly







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Scientific Affairs Team

Scientific Affairs

EDUCATE • SUPPORT • RESEARCH

Enteral Nutrition

Our Scientific Affairs team, include a team of Dietitians who have worked in the NHS, so they understand the challenges you face. Whatever your enteral nutrition needs, they have the knowledge and experience to provide you with a friendly and efficient response. The team can deliver education and training as well as provide clinical and technical support on the the Fresubin®, Thick & Easy™, Amika® and Freka® range, with access to accurate and up to date product information.

Please contact the team direct, with any questions relating to the Fresenius Kabi enteral nutrition product portfolio.

Monday to Friday 9:00 - 5:00 pm:

Tel: 01928 533516

(your call will be automatically directed to a voicemail which is checked regularly. We aim to respond to all enquiries within the same working day)

Email: scientific.affairsUK@fresenius-kabi.com

Parenteral Nutrition

Our Parenteral Nutrition Medical Scientific Liaison (MSL) team include a qualified pharmacist and a registered dietitian, and are responsible for delivering training, support and education in the field of parenteral nutrition. The team provide a balanced, high-level scientific and technical partnership to healthcare professionals for the benefit of patient care. The MSLs have extensive knowledge in the field of parenteral nutrition and aseptic services, and have lectured at university level in this field.

What the MSL can offer to you:

- Response to requests for clinical information and data in relation to disease specific states requiring clinical nutrition and parenteral nutrition products
- Deliver clinical education training for your Nutrition Support Teams
- Help to keep you involved with scientific developments and initiatives that may impact your professional practice

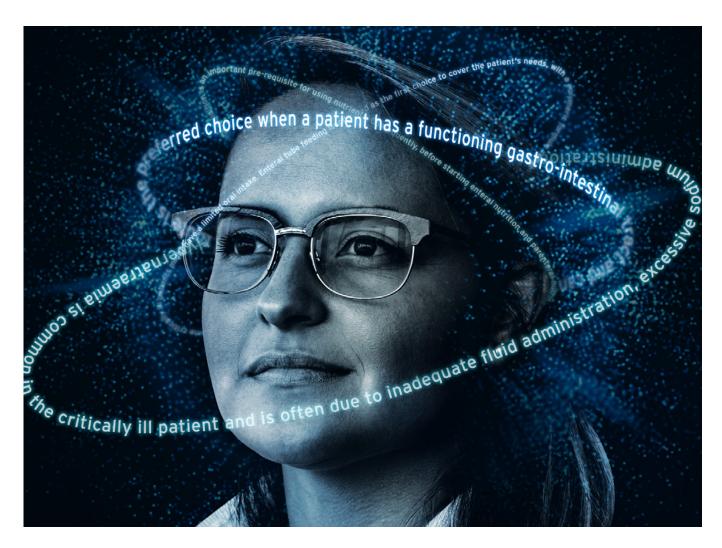
Email: parenteral-nutrition.msl@fresenius-kabi.com











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