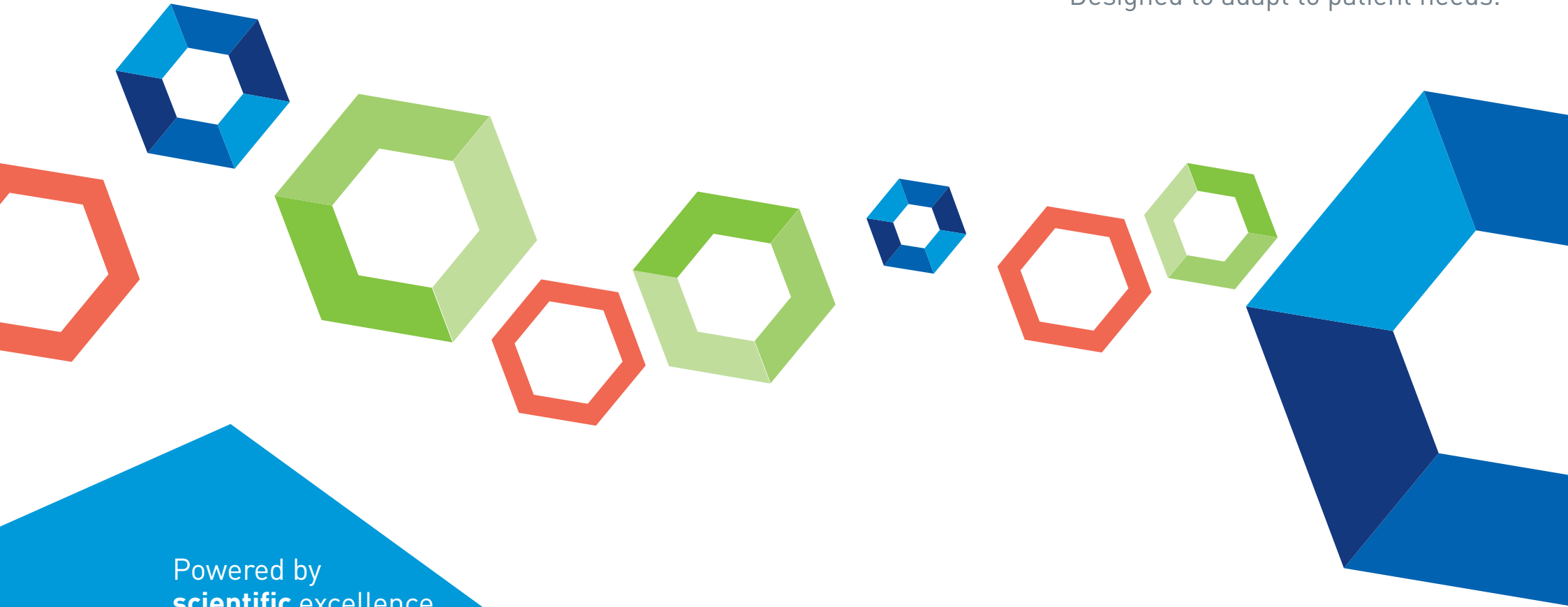


# Adult **Enteral Nutrition** Portfolio

Designed to adapt to patient needs.



Powered by  
**scientific** excellence



**PEPTAMEN**<sup>®</sup>

**NOVASOURCE**<sup>®</sup>

**ISOSOURCE**<sup>®</sup>

# Contents

---

About Nestlé Health Science

---

Adult Enteral Nutrition Portfolio

---

Navigating our portfolio

---

**Peptamen**<sup>®</sup> For complex needs and reliable tolerance

---

**Novasource**<sup>®</sup> Specialised yet flexible

---

**Isosource**<sup>®</sup> Reliable core nutrition

---

Prescription guidance

---

References

---



# Reliable + Flexible

---

**Nestle Health Science has been providing best in class Adult Enteral Nutrition solutions for decades.**

---

**Powered by scientific excellence** we continue to build on our technical know-how, constantly evolving our comprehensive product range. We demonstrate our commitment to enhancing patient outcomes through collaboration with health care professionals in the generation of **scientific research and clinical evidence.**

Nestle Health Science is a compelling forerunner in the provision of complete nutritional solutions world wide for patients who cannot take food by mouth. We are dedicated experts in research, development, innovation, manufacture and distribution and have skill in local product adaptation to encompass clinical and cultural differences.

Nestle Health Science Adult Enteral Nutrition Portfolio follows patients' nutritional journey **from hospital treated critical illness adapting formulas for more stable patients who recover at home.**



# Product range

The **three distinct product families** each have individual characteristics which enables you to adapt specialised products for different needs of patients.



Specialised nutritional needs

General nutritional needs

## PEPTAMEN®

For complex needs and reliable tolerance

Peptamen® family with hydrolysed 100% whey protein and medium chain triglycerides which are very well tolerated to facilitate absorption.

## NOVASOURCE®

Specialised yet flexible

Novasource® family addresses disturbances of the lower Gi tract with PHGG fibre and includes products to help manage certain pathologies, such as blood glucose abnormalities.

## ISOSOURCE®

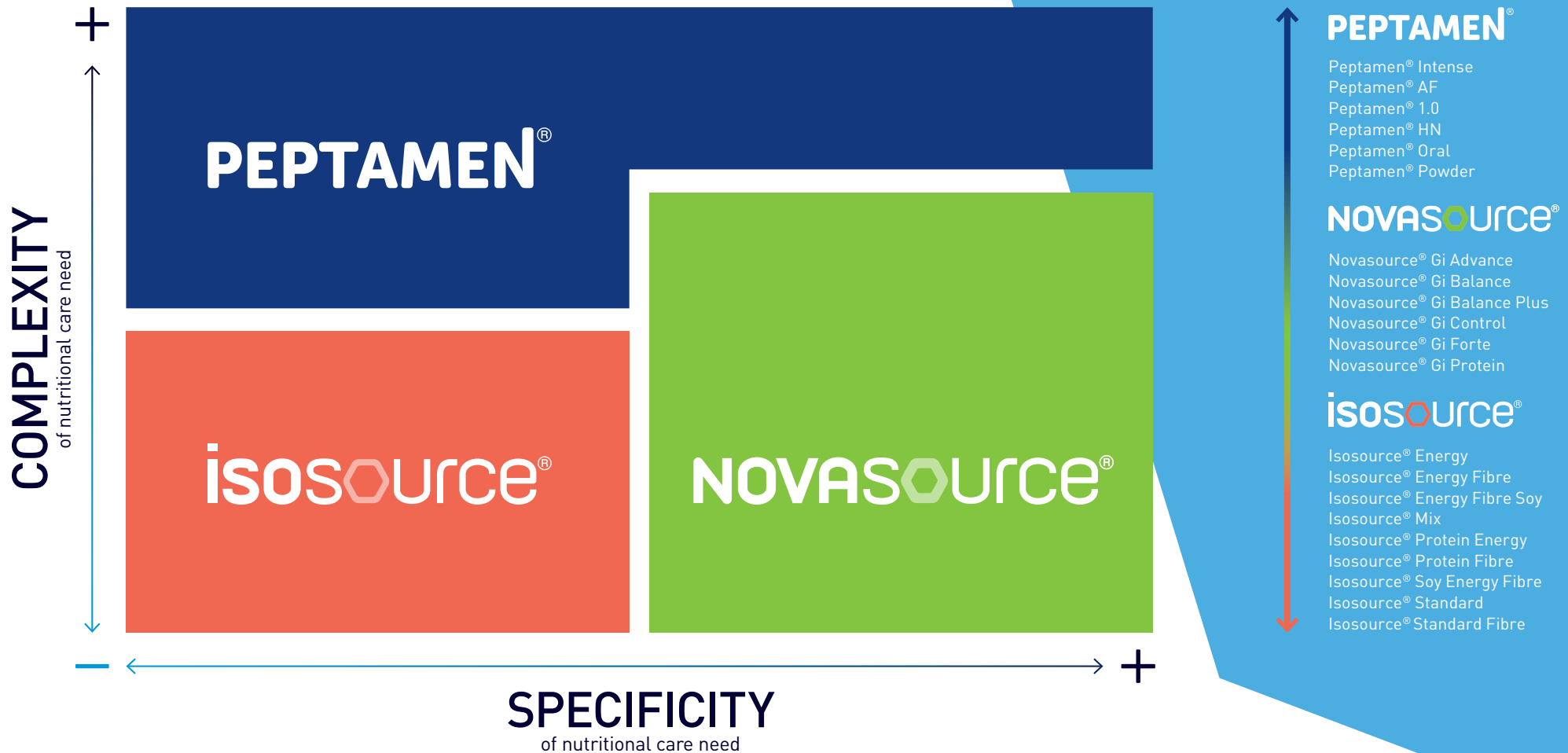
Reliable core nutrition

Isosource® family offers a wide range of core solutions, with variations in protein energy and fibre combinations.





# A portfolio built for **easy navigation**



# PEPTAMEN<sup>®</sup>

## Powered by science

PEPTAMEN<sup>®</sup> is the only family of 100% whey formulas supported by over 25 years of clinical experience and more than 60 published studies.

Studies in a variety of conditions show that Peptamen<sup>®</sup> formulas:

- Are well-tolerated and associated with improvement in diarrhoea, vomiting and abdominal pain<sup>1-3</sup>
- Promote progression to goal feeding<sup>4-7</sup>
- Are associated with superior protein repletion, weight gain and improvement in nutritional status<sup>4,8-9</sup>





The Peptamen® Family of products are widely used from hospital to homecare.

Key features and benefits of the Peptamen® range:

PEPTAMEN® product	Energy	Protein		Fat	
	Kcal/ml	Hydrolysed 100% whey	Total Energy %	Omega 3	≥ 50% MCTs
Intense	1.0	✓	37	✓	✓
AF	1.5	✓	25	✓	✓
1.0	1.0	✓	16	✓	✓
HN	1.3	✓	20	✓	✓
Oral	1.0	✓	16	✓	✓
Powder	1.0	✓	16	✓	✓

Conditions and pathologies where Peptamen® products have been observed to have an impact in the clinical setting include:

**Conditions:**

- GI intolerance<sup>12</sup>
- Malabsorption syndrome
- Chyle leaks<sup>10</sup>
- Inflammation<sup>11</sup>
- Weight gain or maintenance<sup>8</sup>
- Achievement of feeding goals<sup>4-7</sup>
- Stress hyperglycaemia

**Pathologies:**

- Critically ill
- Crohn's disease
- Cystic Fibrosis
- Short bowel syndrome
- Pancreatitis
- Stroke
- Neurological disorders

# PEPTAMEN®

## For complex needs and reliable tolerance

All Peptamen® products are built around the pillars of hydrolysed **100% whey protein** and **medium chain triglycerides**, which represents at least 50% of the total fat.

With a broad product offering the Peptamen® family includes different combinations of Total Energy (TE) coming from proteins and carbohydrates. Peptamen also comes in flavoured oral and powder formulations.

The Peptamen® Family offers a wide range of solutions enabling Health Care Professionals to appropriately choose Peptamen® for complex needs and reliable tolerance across a range of scenarios.

---

### Whey

---

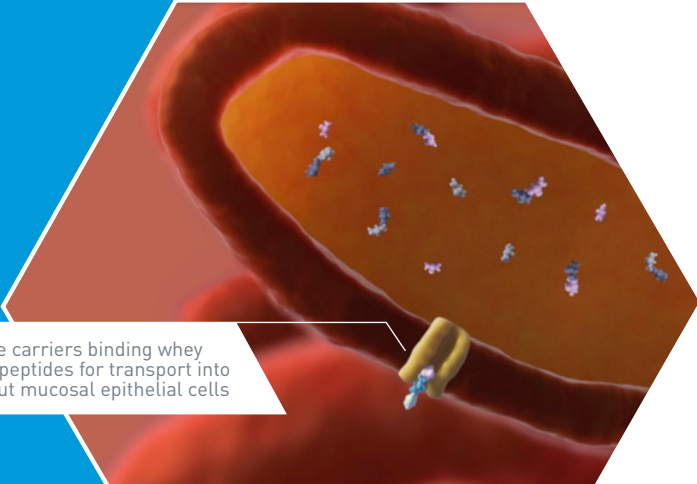
- Whey protein is a high quality protein containing all essential amino acids with a PDCAAS\* score of 1
- Whey proteins are classified as 'rapid release' proteins<sup>13-16</sup>, because they empty from the stomach and are metabolized faster than many other proteins
- Whey remains in a liquid form, while casein coagulates. This coagulation alters the kinetics of the stomach so contents are more slowly released as a solid rather than the efficient rapid emptying of liquids

---

### Hydrolysis

---

- Hydrolysis means that the proteins are broken into smaller peptide chains facilitating absorption and digestion. These whey protein peptides contain branched-chain amino acids which stimulate protein synthesis and help maintain lean body mass
- Peptides are easily absorbed even when the gut is impaired. They bind to peptide carriers, are transported into the mucosal epithelial cells and are further broken down into simple amino acids where absorption into the bloodstream occurs



Peptide carriers binding whey protein peptides for transport into the gut mucosal epithelial cells



\* Protein Digestibility Corrected Amino Acid Score (PDCAAS) is a measure of protein quality. A score of 1 means that the protein contains all essential amino acids in quantities that correspond to human requirements





---

## Medium Chain Triglycerides (MCTs)

---

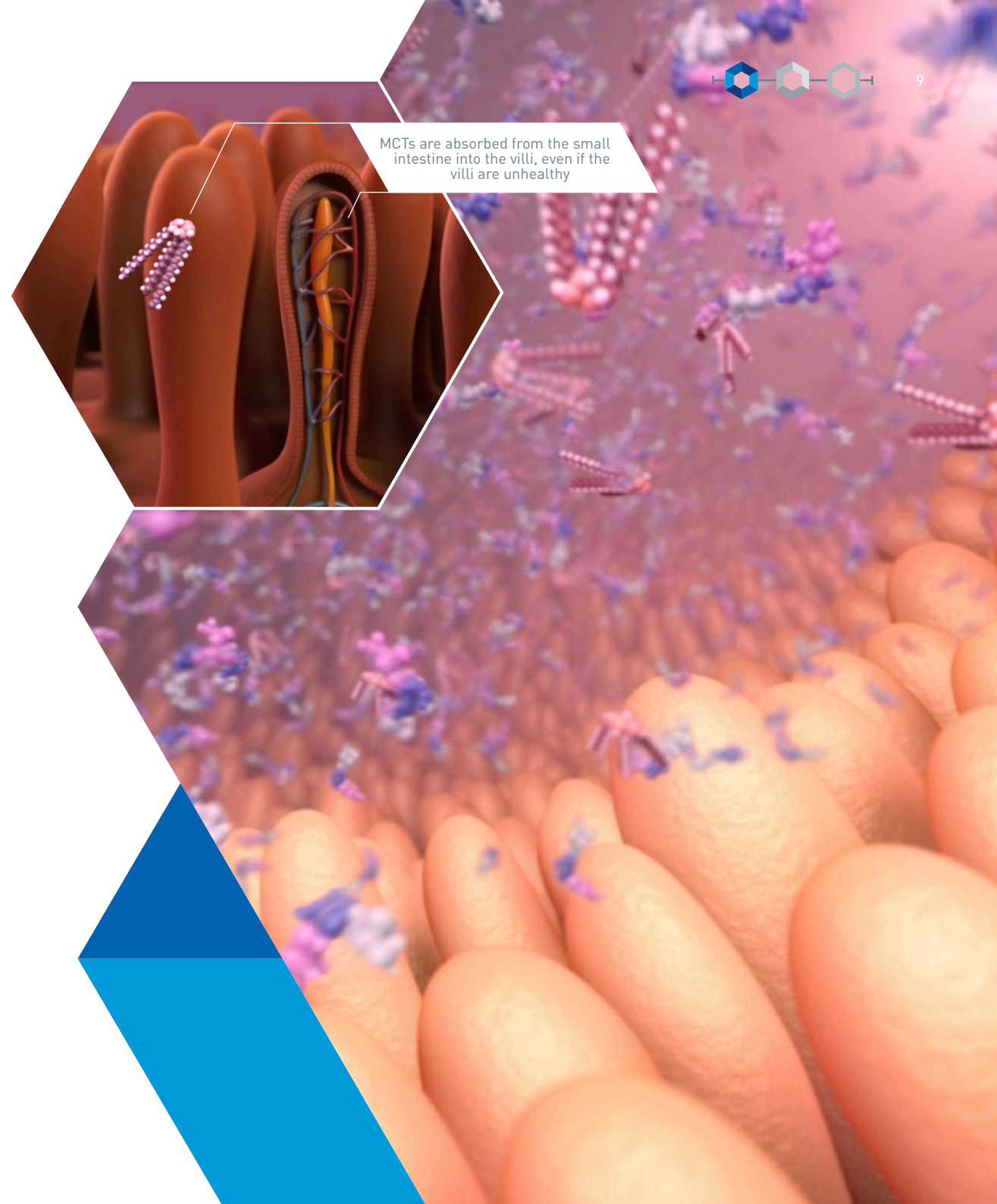
- In our normal diets we need to break down Long Chain Triglycerides (LCTs) to Medium Chain Triglycerides (MCTs) in order to absorb essential fatty acids
- MCTs provide a simpler metabolic process as they do not need breakdown from bile salts or pancreatic enzymes so travel directly from the gut mucosa to the liver where they are rapidly converted to energy
- MCTs are therefore useful in critical illness, liver or pancreatic dysfunction, and in pathologies where the enzymes needed for fat breakdown are compromised

---

## Insulinotropic

---

- Insulin resistance and hyperglycemia are common in the acute care setting and significantly increase the risk of complications and death<sup>17-19</sup>
  - Whey protein may have a positive effect on glycemic response and increases insulin sensitivity<sup>20</sup>
- 



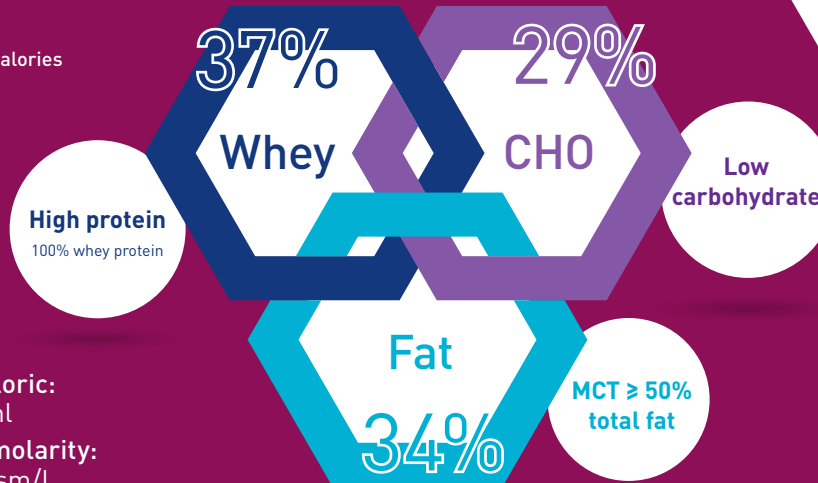
# PEPTAMEN<sup>®</sup> INTENSE

## High protein low carbohydrate enteral formula

Optimises delivery of protein and energy in critically ill patients.

Peptamen<sup>®</sup> Intense contains a unique blend of nutrients.

Composition of total calories

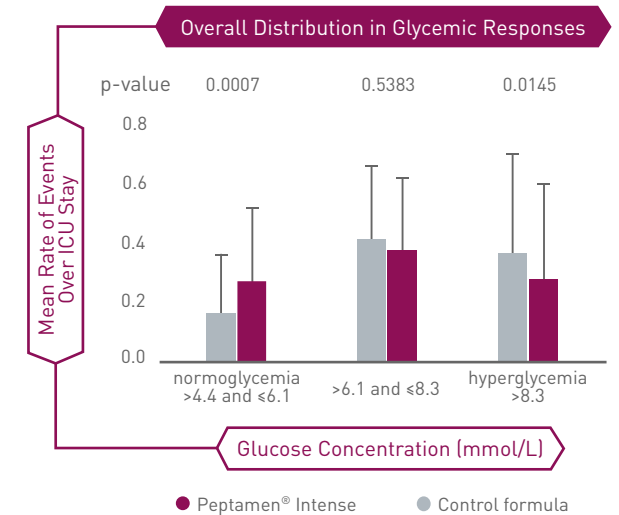


- Normocaloric: 1,0 kcal/ml
- Low osmolarity: 278 mOsm/l



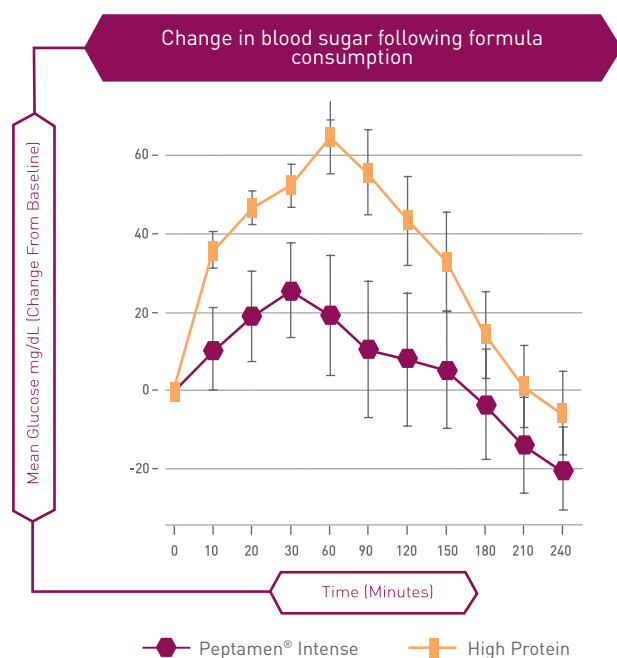
## Metabolic impact clinically demonstrated

Shown to facilitate **blood glucose** management in ICU patients<sup>24-25</sup>



- 13% reduction in incidence of hyperglycemia (p = 0.0145)
- 14% increase in incidence of normoglycemia (p < 0.01)
- 11% reduction in glycemic excursions (p = 0.01)
- 11% reduction in the frequency of insulin administration (p = 0.048)

Shown to provide **better control** of postprandial blood glucose when compared to whey/casein formulas



Better postprandial blood glucose with Peptamen® Intense:

- Lower peak blood glucose level
- Difference in blood glucose level remains significant at 180 min
- Clinical trends towards lower endogenous insulin production, as measured by serum insulin

The use of Peptamen® Intense allowed for **increased protein provision without increasing caloric intake** in adult critically ill patients receiving propofol.

	VHP EN group	STD EN group	p-value
Daily Propofol Dose	19.5 mL/hr (516.6 kcal/day)	19.0 mL/hr (492.0 kcal/day)	NS
Protein Intake	97.9 ± 28.6 g/day	81.7 ± 19.5 g/day	p=0.044
Caloric Intake (EN only)	1077.1 ± 314.7 kcal/day	1333.2 ± 329.2 kcal/day	p=0.016
Caloric Intake (Total)	1593.7 ± 393 kcal/day	1825.2 ± 398.1 kcal/day	p=0.072

- Propofol accounted for approx 500 kcal/day
- Protein intake was significantly higher in the Peptamen Intense (VHP EN) group (p=0.044)
- Daily caloric intake from enteral formula alone was significantly less in the Peptamen® Intense group (p=0.016)
- Peptamen® Intense allows for provision of nutrients in line with guidelines also in patients receiving substantial non-nutritional calories (e.g. from propofol)



# NOVASOURCE®

## Specialised yet flexible

Novasource® products are developed to offer nutrition for patients with disease specific needs.

- Proven to increase lower gastrointestinal tolerance due to the unique **partially hydrolysed guar gum fibre** (PHGG)
- Specific formulas available for **a range of chronic illnesses** such as kidney disease, diabetes and hyperglycaemia
- Can deliver a range of products according **patients' particular nutritional status**

Reliably flexible  
Novasource® products

The Novasource® portfolio contains products for your patients changing needs.

- Adapted carbohydrate blend
- High quality protein
- Adapted lipid blend
- Specialised PHGG fibre blend

Specialised nutritional needs in one streamlined and easy to navigate product range, so you can deliver optimal nutritional care across a range of ailments.



### Key features and benefits of the Novasource® range:

NOVASOURCE® product	Energy	Protein			Fat	Fibre
	Kcal/ml	Milk protein caseinates	Other	Total Energy %	MCTs ≥ 20% TE	PHGG
Gi Advanced	1.5	✓	Whey	25		✓
Gi Balance	1.07	✓		18		✓
Gi Balance Plus	1.5	✓		20		✓
Gi Control	1.1	✓		15	✓	✓
Gi Forte	1.5	✓		15	✓	✓
Gi Protein	1.17	✓		21	✓	✓
Renal	2.0	✓	Soy	18		



**NOVASOURCE®**

# Partially Hydrolysed Guar Gum

Many of the physiological effects of PHGG are due to its fermentation by colonic bacteria which leads to the production of Short Chain Fatty Acids, (SCFA) which exert various positive effects on colonic function.

PHGG fermentation increases production of beneficial SCFA, including butyrate, compared to other fibre sources such as: inulin, polydextrose and psyllium.<sup>34</sup>

## PHGG and Diarrhoea

SCFAs help regulate water and electrolyte absorption in the colon which may help normalize stool consistency.<sup>30-31</sup>

Increased bacterial mass from fermentation increases fecal bulk, which also contributes to regularity of bowel movements.<sup>30</sup>

## PHGG and Microbiome

Butyrate is considered the most important SCFA for colonic health, and is the preferred fuel for colonic epithelial cells, which metabolize 60-70% of the SCFA produced.<sup>32</sup>

PHGG supports intestinal flora balance by promoting growth of beneficial bacterial strains, lactobacilli and bifidobacteria.<sup>33</sup>

## PHGG and Blood Glucose

PHGG has been shown to significantly reduce plasma glucose compared to a fiber-free formula in ICU patients.<sup>35</sup>

PHGG significantly reduced plasma and capillary glucose levels, and insulin requirements, in patients with diabetes or stress induced hyperglycemia.<sup>36</sup>





**Powered by PHGG** the Novasource® family of products, deliver multiple benefits\*

ESPEN recommends the use of PHGG to prevent enteral nutrition induced diarrhoea in post-surgical and in critically ill-patients<sup>39</sup>

PHGG is guideline-recommended for diarrhoea prevention<sup>40</sup>

ESPEN 2018 Guideline on clinical nutrition and hydration in geriatrics



PHGG is a 100% soluble dietary fibre, a highly viscous fibre extracted from the guar plant<sup>41</sup>

PHGG is a water-soluble fibre with strong clinical support in the management of diarrhoea<sup>40-44</sup>

“...fiber containing products for EN have been shown to contribute to normal bowel function and are, thus, generally recommended.

...enterally nourished patients should not be deprived of the well-known beneficial metabolic effects of dietary fiber.”

Daily amounts of 25g are considered adequate for normal laxation for adults of all ages and can be considered.<sup>45</sup>

Its special composition as native guar gum means that it ferments more slowly than short chain fibres (such as inulin and FOS\*\*)

This may influence tolerance as rapidly fermenting fibres are associated with increased gas



\* Novasource renal does not contain PHGG.  
 \*\*FOS, fructo-oligosaccharide.

# NOVASOURCE®

## Novasource Gi Balance and Novasource Gi Balance Plus

A sole source of nutrition with PHGG to further support **blood glucose management** and a **healthy gut microbiota**

Recent position statements and guidelines support the use of diabetes specific formulations for patients requiring support in the management of blood glucose.

Re-formulated to improve tolerance whilst addressing **specific needs of patients** facing abnormalities in blood glucose such as **diabetes** and **stress hyperglycemia**.

The key elements of Novasource® **Gi Balance/Balance Plus** compared to standard tube feeding are:

- Lower carbohydrate content; Total Energy (TE) 32-39% including slowly digestible carbohydrate, isomaltulose, to help manage blood glucose response<sup>46</sup>
- Inclusion of 100% soluble PHGG fiber 20-22g/L

- High quality protein TE 18-20%
- Higher Fat content, TE 39-45%, enriched in unsaturated fatty acids, especially monounsaturated fatty acids (MUFA)



Reduction in available carbohydrate content with simultaneous increase in the MUFA content has demonstrated positive outcome on lipid management and glucose control.

Novasource **Gi Balance** and Novasource **Gi Balance Plus** may be used as sole source nutrition.

\* Eicosapentaenoic acid and docosahexaenoic acid - omega 3 fatty acids

\*\*The PDCAAS method has been adopted by the United Nations Food & Agricultural Organization (FAO) and the World Health Organization (WHO) as the preferred method for evaluating food protein

## Powered by science

### Isomaltulose enriched carbohydrate blend

- Slowly hydrolysed by intestinal enzymes allowing for slow release of glucose
- Low glycemic response to help control blood glucose
- Naturally occurring in honey and sugar cane juice<sup>47</sup>

### Adapted Lipid Blend

- High amount of mono unsaturated fatty acids (MUFA)
  - known to improve glycaemic control and lipoprotein profiles in type II diabetes patients<sup>48</sup>
- Low Saturated Fatty Acids (SFA) and Trans fat
  - a diet with decreased SFA and increased MUFA, was shown to improve insulin sensitivity<sup>49</sup>
- Meets EPA/DHA\* requirements<sup>50-52</sup>

### High Quality Protein

- 100% milk protein
- Protein Digestibility Corrected Amino Acid Score (PDCAAS)\*\* = 1.0
  - meaning it contains all essential amino acids in quantities that correspond to human requirements at higher concentrations than in the reference scoring protein

### Partially Hydrolysed Guar Gum (PHGG)

- To prevent enteral nutrition induced diarrhoea in post surgical and in critically ill-patients supplementing enteral nutrition with PHGG is effective (Level A Recommendation)<sup>53</sup>
- PHGG can be used successfully in patients in enteral nutrition lowering the incidence of diarrhoea. PHGG has been proven to be safe and effective in promoting gut health<sup>54</sup>
- Has been shown to have an effect on plasma blood glucose



isosource®

# Reliable core nutrition

**Isosource® Adult Enteral Nutrition:**  
A reliable + flexible partner for short- and long-term stages of patient recovery.

The Isosource® family is composed of nutritionally complete formulas intended for the **dietary management of undernourished patients or those at risk of malnutrition**, allowing you to choose a formula that best meets your patient's specific requirements.

- These include products of different total energy and variations in their macro-nutrient content with choice of with or without fibre. Specialty products include soy protein and natural ingredients

Isosource® products provide high quality sole source nutrition including fish oils providing **Omega 3 fatty acids** and Medium Chain Triglycerides as **20% of fat composition**.

- Core solutions to meet the fundamental nutritional needs of a wide range of your more **stable patients**, from short- to long-term care, and from **hospital to home**





Key features and benefits of the Isosource® range:

isosource® product	Energy Kcal/ml	Protein			Fat		Fibre Soluble:insoluble 50:50	Natural Ingredients
		Milk protein caseinates	Other	Total Energy %	Omega 3	MCTs		
Standard	1.0	✓		16	✓	✓		
Standard Fibre	1.03	✓		15	✓	✓	✓	
Standard Energy	1.57	✓		16	✓	✓		
Standard Energy Fibre	1.6	✓		15	✓	✓	✓	
Protein	1.3	✓		21	✓	✓		
Protein Fibre	1.33	✓		20	✓	✓	✓	
Soy Energy Fibre	1.53		Soy	13		✓	✓	
Mix	1.09	✓		16	✓	✓	✓	✓

**isosource**<sup>®</sup>

# Powered by science

---

## Isosource<sup>®</sup> products can provide:

- High energy concentration for patients with increased energy requirements and/or fluid restriction
  - High protein concentration specifically for patients with increased protein needs
  - A 50:50 ratio of soluble and insoluble fibre
  - Prebiotics (acacia gum, inulin) to help improve gut health and reinforce immune protection during feeding and illness
  - The Isosource<sup>®</sup> Family contain raw materials that are naturally gluten free
  - Isosource<sup>®</sup> Soy Energy Fibre provides vegetable source of protein
- 



---

## Fibre

---

- Fibre-containing formulas within the Isosource® range are formulated with a blend composed of 50:50% soluble and insoluble fibres
  - This ratio was chosen to provide a dose of prebiotic fibres to optimise Gi tolerance
  - The soluble component of the fibre blend includes fructo-oligosaccharide/inulin and acacia gum, while the insoluble portion is composed of outer pea fibre
- 

---

## Micronutrients (vitamins, minerals, trace elements)

---

Essential to maintain normal health (inadequate supply can trigger unwanted clinical conditions).

---

---

## MCTs

---

Easily absorbed, providing a rapid source of energy.

- Contains at least 20% MCTs
  - For whole range, 20% of the total amount of fat are MCTs, which are easily absorbed to provide a rapid source of energy
- 

---

## EPA / DHA\*

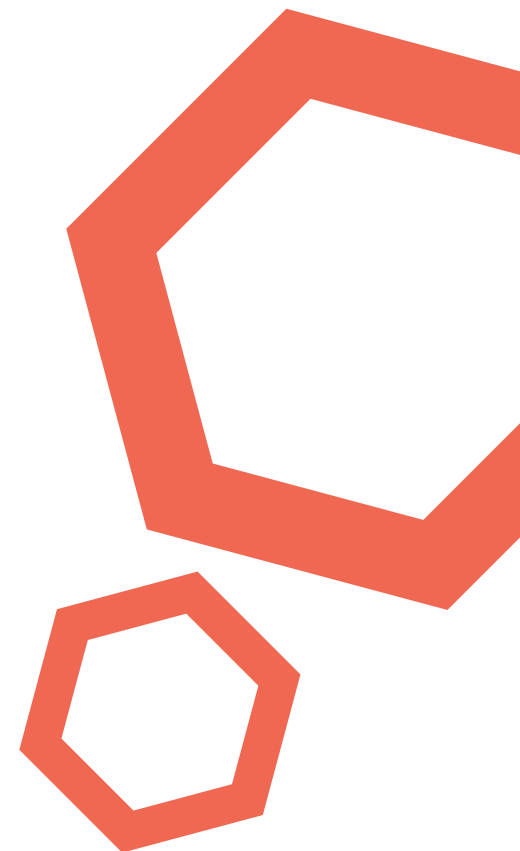
---

Known to support cardiovascular health with long-term use.

- 500 mg of EPA + DHA /1500 kcal complete daily feeding

Within World Health Organisation recommendations.

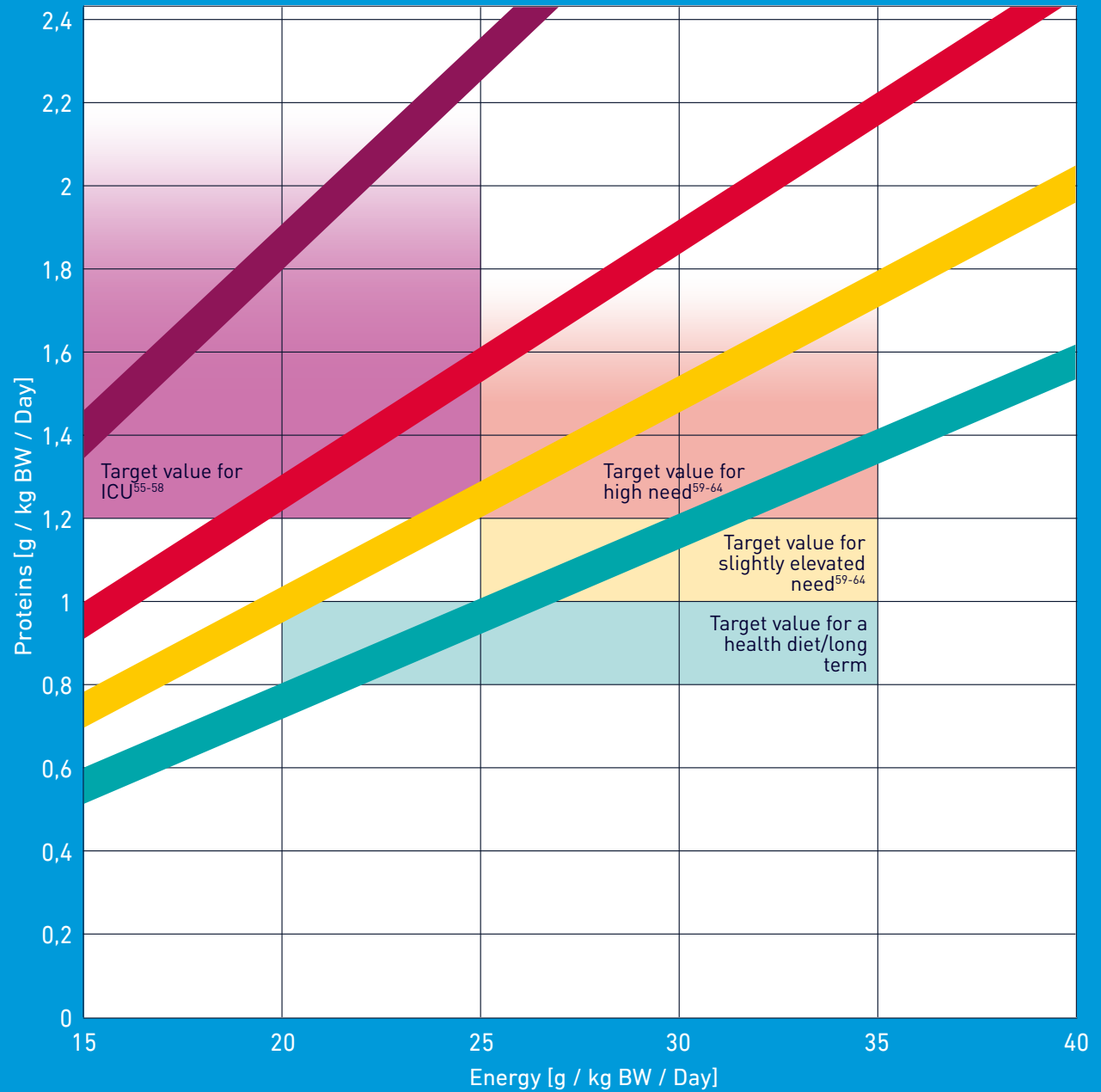
- Provides 3-6% total energy of omega-6, 1-2% of omega-3
- 



# Prescription guidance:

Key: Brand (proteins / 100ml)

- Peptamen® Intense (9.3g)
- Novasource® Gi Advance (9.6g)
- Peptamen® AF (9.4g)
- Novasource® Gi Balance Plus
- Isosource® Proteins (6.7g)
- Isosource® Proteins Fibre (6.7g)
- Peptamen® HN (6.6g)
- Novasource® Gi Forte (6g)
- Novasource® Gi Control (4.1g)
- Isosource® Standard (3.9g)
- Isosource® Standard Fibre (3.9g)
- Isosource® Energy (6.1g)
- Isosource® Energy Fibre (6.1g)
- Isosource® Mix (4.4g)
- Peptamen® (4g)



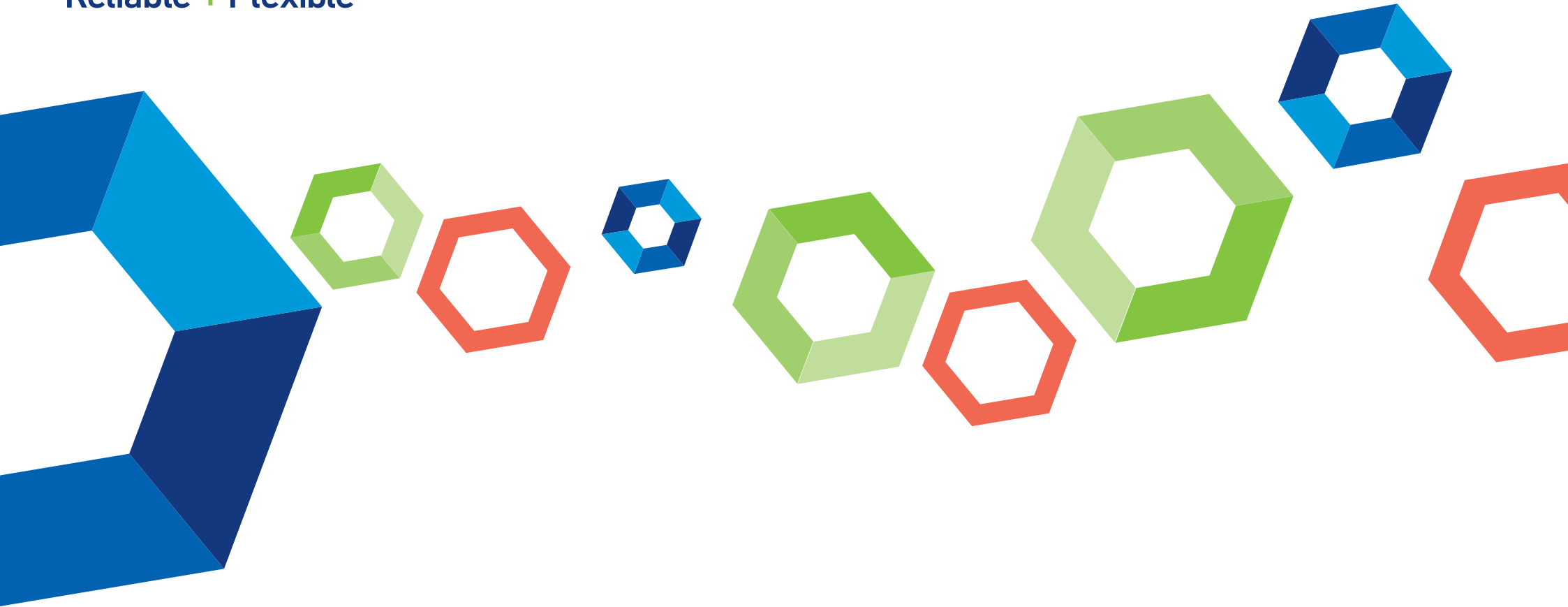


## References:

1. Fried MD, et al. Decrease in gastric emptying time and episodes of regurgitation in children with spastic quadriplegia fed a whey-based formula. *J Pediatr* 1992;120:569-572; 2. Shea JC et al. *Pancreatology* 2003;3:36-40; 3. Borlase BC et al. *Surg Gynecol Obstet* 1992;174:181-8; 4. Dylewski ML et al. *Nutrition Poster 72; ASPEN Clinical Nutrition Week 2006*; 5. Heyland DK et al. *Crit Care Med* 2013;41(12); 6. Heyland DK et al. *Crit Care* 2010; 14:R78; 7. Hopkins B, Alberda C. *DC Conference 2016 (Abstract)*; 8. Hussey TA et al. *J Pediatr Gastroenterol Nutr* 2003;37:341; 9. Polk DB et al. *JPEN* 1992;16:499-504; 10. Pakula et al. *World Journal of Emergency Surgery* 2011, 6:10 <http://www.wjes.org/content/6/1/10>; 11. Meredith JW, et al. Visceral protein levels in trauma patients are greater with peptide diet than with intact protein diet. *J Trauma, Injury, Infection and Crit Care*. 1990;30(7): 825-828; 12. Minor G, Storm H. *Clinical, Abst. 294; NASPGHAN, 2015*; 13. Pal S, Radavelli-Bagatini S: The effects of whey protein on cardiometabolic risk factors. *Obes Rev* 2013; 14:324-343. 14. Bendtsen LQ, Lorenzen JK, Bendtsen NT, Rasmussen C, Astrup A: Effect of dairy proteins on appetite, energy expenditure, body weight, and composition: a review of the evidence from controlled clinical trials. *Adv Nutr* 2013; 4: 418-438; 15. Salehi A, Gunnerud U, Muhammed SJ, Ost-man E, Holst JJ, Björck I, Rorsman P: The insulinogenic effect of whey protein is partially mediated by a direct effect of amino acids and GIP on  $\beta$ -cells. *Nutr Metab [Lond]* 2012; 9:48; 16. Stanstrup J, Schou SS, Holmer-Jensen J, Hermansen K, Dragsted LO: Whey protein delays gastric emptying and suppresses plasma fatty acids and their metabolites compared to casein, gluten, and fish protein. *J Proteome Res* 2014; 13:2396-2408; 17. Van Vught, et al. *Crit Care Med* 2016;44:1338-46; 18. Kar, et al. *World J Diabetes* 2015;Jun10;6(5):693-706; 19. Finfer, et al. *N Engl J Med* 2009;360:1283-1297; 20. Adams RL, Broughton KS. Insulinotropic effects of whey: Mechanism of action, recent clinical trials, and clinical applications. *Ann Nutr Metab* 2016;69(1):56-63; 21. Adams R. *Ann Nutr Metab* 2016;69:56-63. 22. Eckel R, et al. *Diabetes* 1992;41:641-647; 23. Meloni AR, et al. *Diabetes Obes Metab* 2013;15:15-27; 24. McClave S, et al. *ASPEN CNW 2015 (Abstract)* 25. Ochoa, et al. *JPEN* 2017;41(2):289; 26. Shogbon A, Levy S. *Am J Health-Sys Pharm* 2010;67:798-805; 27. Ochoa, et al. Hypocaloric high-protein enteral nutrition improves glucose management in critically ill patients *JPEN* 2017;41(2):289; 28. Finfer, et al. Intensive versus Conventional Glucose Control in Critically Ill Patients. *N Engl J Med* 2009;360:13; 29. Malesker, et al. An efficiency evaluation of protocols for tight glycemic control intensive care units. *American Journal of Critical Care* 2007;16:589-598; 30. Velázquez M., et al., Effect of Oligosaccharides and Fibre Substitutes on Short-chain Fatty Acid Production by Human Faecal Microflora. *Anaerobe* 2000 vol: 6 (2) pp: 87-92; 31. Alam N., et al., Partially hydrolyzed guar gum-supplemented oral rehydration solution in the treatment of acute diarrhoea in children. *Journal of pediatric gastroenterology and nutrition* 2000 vol: 31 (5) pp: 503-507; 32. Topping D. & Clifton P., Short-Chain Fatty Acids and Human Colonic Function: Roles of Resistant Starch and Nonstarch Polysaccharides. *Physiological Reviews* 2001 vol: 81 (3) pp: 1031-1064; 33. Yoon S., et al., Physiological Functions of Partially Hydrolyzed Guar Gum. *J. Clin. Biochem. Nutr.* 2006 vol: 39 pp: 134-144; 34. Mesejo, A., et al., Comparison of a high-protein disease-specific enteral formula with a high-protein enteral formula in hyperglycemic critically ill patients. *Clinical Nutrition*, 2003. 22(3): p. 295-305; 35. Takahashi H., et al., Effect of partially hydrolyzed guar gum on fecal output in human volunteers. *Nutrition Research* 1993 vol: 13 (6) pp: 649-657; 36. Wells C. et al., Effect of fiber supplementation of liquid diet on cecal bacteria and bacterial translocation in mice. *Nutrition* 1992 vol: 8(4) pp: 266-71; 37. Takahashi H., et al., Influence of partially hydrolyzed guar gum on constipation in women. *Journal of nutritional science and vitaminology* 1994 vol: 40 (3) pp: 251-9; 38. Lochs H, et al. Introductory to the ESPEN Guidelines on Enteral Nutrition: Terminology, definitions and general topics. *Clin Nutr* 2006;25(2):180-186; 39. Meier R, Gassull M. Consensus recommendations on the effects and benefits of fibre in clinical practice. *Clin Nutr Suppl* 2004;1(2):73-80; 40. Meier R, Gassull M. Consensus recommendations on the effects and benefits of fibre in clinical practice. *Clin Nutr Suppl* 2004;1(2):73-80. 41. Lampe JW, et al. Gastrointestinal effects of modified guar gum and soy polysaccharide as part of an enteral formula diet. *J Parenter Enteral Nutr* 1992;16:538-544. 42. Rushdi RA et al. Control of diarrhoea by fibre-enriched diet in ICU patients on enteral nutrition: a prospective randomized controlled trial. *Clin Nutr* 2004;23:1344-1352. 43. Spapen H, et al. Soluble fibre reduces the incidence of diarrhoea in septic patients receiving total enteral nutrition: a prospective, double-blind, randomized, and controlled trial. *Clin Nutr* 2001; 20(4):301-305. 44. HomAnn et al. Reduction in diarrhoea incidence by soluble fibre in patients receiving total or supplemental enteral nutrition. *J Parenter Enteral Nutr* 1994;18:485-490. 45. HomAnn et al. Reduction in diarrhoea incidence by soluble fibre in patients receiving total or supplemental enteral nutrition. *J Parenter Enteral Nutr* 1994;18:485-490; 46. Holub I., et al., Novel findings on the metabolic effects of the low glycaemic carbohydrate isomaltulose (Palatinose). *Br J Nutr*, 2010. 103(12): p. 1730-7. Meier, R & Gassull, M.A., Consensus recommendations on the effects and benefits of fibre in clinical practice. *Clinical Nutrition Supplements* 2004. 1, 73-80; 47. Lina, B.A., et al., Isomaltulose (Palatinose): a review of biological and toxicological studies. *Food Chem Toxicol*, 2002. 40(10): p. 1375-81. 48. Garg A., High-monounsaturated-fat diets for patients with diabetes mellitus: a meta-analysis. *The American Journal of Clinical Nutrition* 1998 vol: 67 (3) pp: 577S-582S; 49. Vessby B., et al., Substituting dietary saturated for monounsaturated fat impairs insulin sensitivity in healthy men and women: The KANWU Study. *Diabetologia* 2001 vol: 44 (3) pp: 312-9; 50. EFSA Panel on Dietetic Products, N., and Allergies, Scientific Opinion on Dietary Reference Values for fats, including saturated fatty acids, polyunsaturated fatty acids, monounsaturated fatty acids, trans fatty acids, and cholesterol *EFSA Journal*, 2010. 8(3): p. 1461; 51. Bantle, J.P., et al., Nutrition recommendations and interventions for diabetes: a position statement of the American Diabetes Association. *Diabetes Care*, 2008. 31 Suppl 1: p. S61-78; 52. Mann, J.I., et al., Evidence-based nutritional approaches to the treatment and prevention of diabetes mellitus. *Nutr Metab Cardiovasc Dis*, 2004. 14(6): p. 373-94; 53. Meier, R & Gassull, M.A., Consensus recommendations on the effects and benefits of fibre in clinical practice. *Clinical Nutrition Supplements* 2004. 1, 73-80; 54. Quartarone, G., Role of PHGG as dietary fibre: a review article. *Minerva Gastroenterologica e Dietologica* 59, 2013. 329-340;

# Adult Enteral Nutrition Portfolio

Reliable + Flexible



**PEPTAMEN**<sup>®</sup>

**NOVASOURCE**<sup>®</sup>

**ISOSOURCE**<sup>®</sup>

Unless stated otherwise, all trademarks are owned by Société des Produits Nestlé S.A. or used with permission.  
©NHS 2019