



TO IMPROVE PATIENT OUTCOMES IN THE ICU

Feed early and adequately with PEP uP

PEPUP

Increased protein and energy delivery



NestléHealthScience
NOURISHING PERSONAL HEALTH

Caloric and protein deficits are prevalent in critically ill patients¹

Inadequate provision of nutrition in ICU patients is associated with increased overall complications, prolonged length of stay (LOS), and increased mortality.^{2,3}

Deferring enteral nutrition (EN) is far too common: 40% to 60% of eligible patients do not receive EN within 48 hours of admission to the ICU.⁴

Caloric deficit is associated with more days on mechanical ventilation, more complications, and longer stays in the ICU.^{3,5,6}



**GREATER RISK OF MORTALITY
IN CRITICALLY ILL PATIENTS
WHO DID NOT RECEIVE
ENTERAL NUTRITION WITHIN
THE FIRST 24 HOURS²**

Critically ill patients need the right nutrition at the right time to improve recovery.

Protect patients from caloric and protein deficit with early EN

Reduce complications and risks

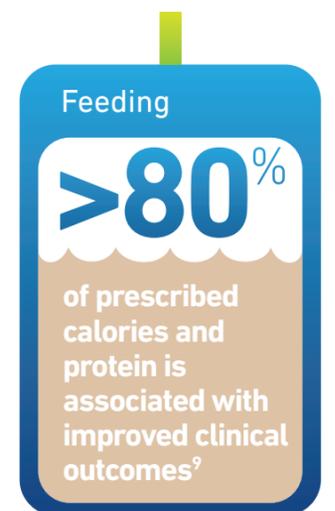
- Early EN is associated with reduced infectious complications and reduced risk of mortality^{2,7}
- ICU patients who received early EN had a 56% reduced risk of mortality⁸

Meet nutrition goals with early EN protocols

- Protocols that call for the early introduction of specialized nutrition help patients achieve caloric and protein goals^{4,6}

Increase feeding flexibility

- Switching to a volume-based feeding schedule allows nurses to help each patient reach their individual caloric goals⁶



Validated EN protocols can help patients receive early and adequate nutrition.



GASTRIC FEEDING FLOW CHART

Objective:

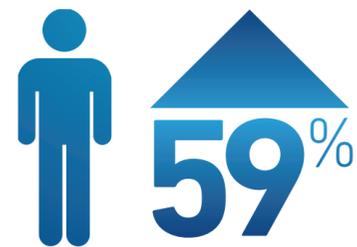
PEP uP Study

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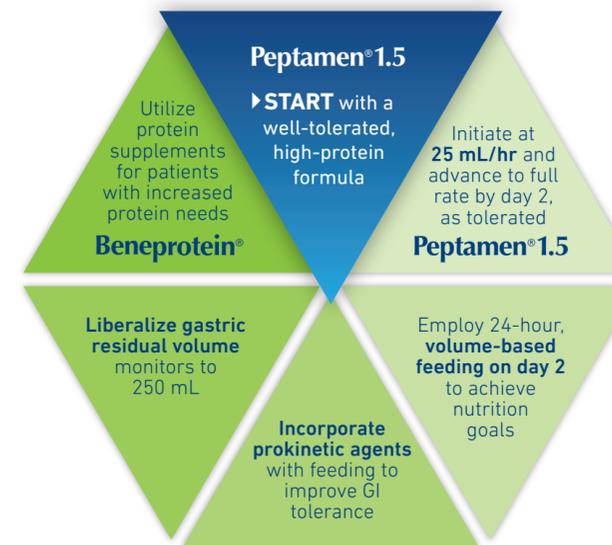
Caloric deficit is associated with more days on mechanical ventilation, more complications, and longer stays in the ICU.^{3,5,6}



GREATER RISK OF MORTALITY IN CRITICALLY ILL PATIENTS WHO DID NOT RECEIVE ENTERAL NUTRITION WITHIN THE FIRST 24 HOURS²

Support early EN from day 1 with the PEP uP* protocol

6 ELEMENTS OF IMPLEMENTATION:



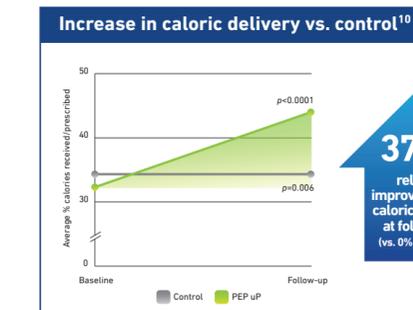
*Enhanced Protein-Energy Provision via the Enteral Route in Critically Ill Patients (PEP uP).
†Prospective, randomized trial of 1059 mechanically ventilated, critically ill patients from 18 ICUs.¹⁰

PEPTAMEN® 1.5 formula and BENEPROTEIN® Instant Protein Powder supplements were recommended for the intervention group in the PEP uP study.^{6†}

Critically ill patients need the right nutrition at the right time to improve recovery.

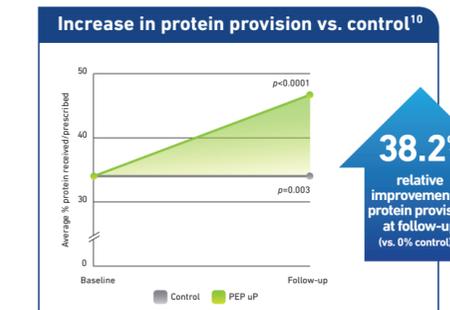
Feed early and adequately with the PEP uP protocol¹⁰

SIGNIFICANT INCREASE IN CALORIC AND PROTEIN DELIVERY¹⁰



Greater mean caloric delivery vs. control¹⁰

- Intervention sites (PEP uP): 32% at baseline, 44% at follow-up
- Control sites: 34% at baseline, 34% at follow-up



Greater mean protein provision vs. control¹⁰

- Intervention sites (PEP uP): 34% at baseline, 47% at follow-up
- Control sites: 34% at baseline, 34% at follow-up

Increased delivery of vital nutrients in ICU patients can have a positive effect on recovery.³

Providing the right nutrition right from the start. That's the **N**FACTOR



PEPTAMEN® formulas can help make the early enteral nutrition (EN) connection. Scan to see the mechanism of action.



BENEPROTEIN® Instant Protein Powder is made with high-quality whey protein to support increased protein needs.

FACTOR IN NUTRITION

- ▶ **A**ssess the risks associated with delayed EN
- ▶ **C**hoose a formula that supports tolerance and successful early EN
- ▶ **T**ransition to a studied protocol that promotes early EN

References: 1. Heyland DK et al. *Crit Care Med.* 2011;39:2619-2626. 2. Doig GS et al. *Intensive Care Med.* 2009;35:2018-2027. 3. Villet S et al. *Clin Nutr.* 2005;24:502-509. 4. Heyland DK et al. *J Parenter Enteral Nutr.* 2010;34:675-684. 5. Dickerson RN. *Nutr Clin Pract.* 2011;26:48-54. 6. Heyland DK et al. *Crit Care.* 2010;14:R78. 7. Marik PE et al. *Crit Care Med.* 2001;29:2264-2270. 8. Barr J et al. *Chest.* 2004;125:1446-1457. 9. Heyland DK. *Curr Opin Clin Nutr Metab Care.* 2013;16:176-181. 10. Heyland DK et al. Poster 56; A.S.P.E.N. Clinical Nutrition Week 2012.

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