Increased protein and energy delivery

TO IMPROVE PATIENT OUTCOMES IN THE ICU
Feed early and adequately with PEP uP

PEP uP
Increased protein and energy delivery
Caloric and protein deficits are prevalent in critically ill patients\textsuperscript{1}

Inadequate provision of nutrition in ICU patients is associated with increased overall complications, prolonged length of stay (LOS), and increased mortality.\textsuperscript{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.\textsuperscript{4}

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

Greter risk of mortality in critically ill patients who did not receive enteral nutrition within the first 24 hours\textsuperscript{2}

59%

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\textsuperscript{2,7}
- ICU patients who received early EN had a 56% reduced risk of mortality\textsuperscript{8}

Meet nutrition goals with early EN protocols

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

Increase feeding flexibility

- Switching to a volume-based feeding schedule allows nurses to help each patient reach their individual caloric goals\textsuperscript{6}

Validated EN protocols can help patients receive early and adequate nutrition.
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Critically ill patients need the right nutrition at the right time to improve recovery.

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

6 ELEMENTS OF IMPLEMENTATION:

- **Peptamen 1.5**
  - START with a well-tolerated, high-protein formula
  - Include at full rate to day 2

- **BeneProtein**
  - Liberalized gastric residual volume
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  - Incorporate protein supplements with feeding to improve GI tolerance
  - Employ 24-hour, volume-based feeding on day 2 to achieve nutrition goals

- **Liberalization of Enteral Nutrition**
  - Liberalization of Enteral Nutrition

- **Incorporate prokinetic agents with feeding to improve GI tolerance**

Increased delivery of vital nutrients in ICU patients can have a positive effect on recovery.\textsuperscript{7}

Increased mean caloric delivery vs. control\textsuperscript{10}

- 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. control\textsuperscript{10}

- Intervention sites (PEP uP): 34\% at baseline, 47\% at follow-up
- Control sites: 34\% at baseline, 36\% at follow-up

PEPTAMEN\textsuperscript{®} 1.5 formula and BENEPROTEIN\textsuperscript{®} Instant Protein Powder supplements were recommended for the intervention group in the PEP uP study.\textsuperscript{10}

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Providing the right nutrition right from the start. That’s the FACTOR IN NUTRITION

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.

Assess the risks associated with delayed EN
Choose a formula that supports tolerance and successful early EN
Transition to a studied protocol that promotes early EN


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