

Nutrini Multi Fibre

Description

Nutrini Multi Fibre is a Food for Special Medical Purposes for use under medical supervision. Nutrini Multi Fibre is a nutritionally complete 1 kcal/ml tube feed for the dietary management of disease related malnutrition in children aged 1-6 years or 8-20 kg in body weight. It is enriched with 0.8g/100ml Multi Fibre, providing 50% soluble and 50% insoluble fibre. Nutrini Multi Fibre is suitable as a sole source of nutrition.

Indications

For enteral use only. ACBS approved, prescribable on form FP10 (GP10 in Scotland) for the following indications: short bowel syndrome; intractable malabsorption; pre-operative preparation of undernourished patients; dysphagia; disease related malnutrition; growth failure; total gastrectomy.

Contraindications

Not for intravenous use. Not suitable for infants under 1 year of age. Not suitable for patients with galactosaemia, or patients requiring a fibre free diet.

Precautions

If a child at the lower end of the range for age and weight is prescribed only a small volume of feed, it may be necessary to give an additional vitamin/trace element supplement to achieve requirements for micronutrients.

Directions for use

Shake well before opening immediately prior to use at room temperature. Maximum hanging time 24 hours. Glass bottles can be attached directly to a Flocare Universal Giving Set. Clean bottle top and bottle opener with an alcohol swab before opening. Alternatively, feed can be decanted into a sterile reservoir, taking care to handle aseptically at all times. Flexible Packs can be attached directly to a Flocare Pack giving set.

Storage

Store in a cool, dry place (5-25°C) and away from direct sunlight. Once opened glass bottles should be stored in a refrigerator (<5°C) if not being used and any unused contents discarded after 24 hours.

Shelf life

Glass bottle: 12 months; Pack: 12 months. Best before date: see top of Pack or neck of bottle.

Ingredients

Water, maltodextrin, vegetable oils, whey protein concentrate (from milk), sodium caseinate (from milk), dietary fibres (soy polysaccharides, resistant starch, inulin, arabic gum, cellulose, oligofructose), emulsifier (soy lecithin), fish oil, acidity regulator (citric acid), di potassium hydrogen phosphate, sodium chloride, tri calcium phosphate, potassium chloride, calcium hydroxide, tri potassium citrate, sodium L-ascorbate, choline chloride, carotenoids (contains soy) (β-carotene, lutein, lycopene), magnesium hydroxide, potassium hydroxide, taurine, ferrous lactate, zinc sulphate, L-carnitine, nicotinamide, DL-α-tocopheryl acetate, retinyl acetate, copper gluconate, sodium selenite, cholecalciferol, manganese sulphate, D-biotin, calcium D-pantothenate, thiamin hydrochloride, chromium chloride, riboflavin, pyridoxine hydrochloride, pterolymonoglutamic acid, potassium iodide, sodium fluoride, sodium molybdate, phytomenadione, cyanocobalamin.

NUTRINI MULTI FIBRE IS GLUTEN AND LACTOSE FREE.

AVERAGE CONTENTS

	UNIT	per 100ml/100kcal
Energy:	kcal	100
	kJ	420
Protein:	g	2.8
nitrogen	g	0.4
NPC:N		206:1
% of total energy	%	11
Carbohydrate:	g	12.3
polysaccharides	g	11.4
sugars	g	0.8
- lactose	g	<0.025
% of total energy	%	49
Fat:	g	4.4
saturates	g	0.5
DHA	mg	35.5
EPA	mg	8.6
% of total energy	%	40
Dietary fibre:	g	0.8
soluble	g	0.4
insoluble	g	0.4
Minerals:		
sodium	mg (mmol)	60 (2.6)
potassium	mg (mmol)	110 (2.8)
chloride	mg (mmol)	95 (2.7)
calcium	mg (mmol)	60 (1.5)
phosphorus	mg (mmol)	50 (1.6)
magnesium	mg (mmol)	11 (0.5)
iron	mg	1.0
zinc	mg	1.0
copper	mcg	81
manganese	mg	0.15
fluoride	mg	0.07
molybdenum	mcg	4.0
selenium	mcg	3.0
chromium	mcg	3.5
iodine	mcg	10
Vitamins:		
vitamin A	mcg RE	41
vitamin D	mcg	1.0
vitamin E	mg α-TE	1.3
vitamin K	mcg	4.0
thiamin	mg	0.15
riboflavin	mg	0.16
niacin	mg NE	1.1
pantothenic acid	mg	0.33
vitamin B6	mg	0.12
folic acid	mcg	15
vitamin B12	mcg	0.25
biotin	mcg	4.0
vitamin C	mg	10
Others:		
carotenoids	mg (mcg RE)	0.10 (9)
L-carnitine	mg	2.0
choline	mg	20
taurine	mg	7.5
Water:	g	85
osmolality	mOsm/l	260
osmolality	mOsm/kg H ₂ O	310
potential renal solute load ¹	mOsm/l	251

¹method: Fomon SJ and Ziegler EE. (1999). J Pediatrics; 134: 11-14.

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