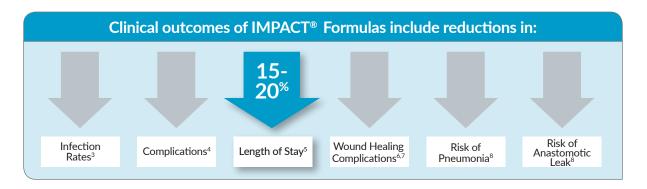
Reducing Length of Stay



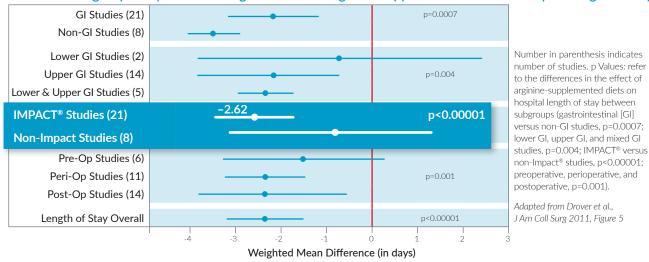
An analysis of 29 studies shows IMPACT® formula is proven to reduce post-op length of stay (LOS) vs. control in major elective surgery patients by 15-20%.⁵

Study Objective: To provide an up-to-date systematic and large review (n=3,487) of randomized clinical trials evaluating arginine-supplemented immunonutrition (IM) in major elective surgical patients.

Synopsis:

- Hospital LOS, aggregated across 29 surgical studies of IM vs. standard formula, showed a reduction of -2.38 WMD (95% CI, -3.39 to -1.36; p<0.00001). Of the 29 studies, 21 were in GI, 6 in head and neck cancer, 1 in cardiac and 1 in gynecological cancer surgery.
- A priori subgroup analyses compared studies that used IM containing supplemental arginine, omega-3 fatty acids and nucleotides (IMPACT® formula) with studies that used other arginine-supplemented IM formulas (non-IMPACT®).
 - Studies using IMPACT® formula found a 15-20% reduction in LOS vs. control (-2.62 WMD; 95% CI, -3.65 to -1.59; p<0.00001), whereas non-IMPACT® studies did not (-0.89 WMD; 95% CI, -3.21 to 1.44; p=0.45).
 Average LOS was 16.7 days and 20.1 days for patients receiving IMPACT® formula and control, respectively.
 - Likewise, studies using IMPACT® formula found a 51% reduction in risk of infectious complications (RR=0.49; 95% CI, 0.41–0.58; p<0.00001), whereas non-IMPACT® studies did not show significance (RR=0.95; 95% CI, 0.75–1.21; p=0.68).
- Additionally a prior sub-analysis found perioperative administration of IM yielded the most significant benefit in reduction of both LOS and risk of infection.

Results of subgroup analyses examining the effect of arginine-supplemented diets on hospital length of stay



IMPROVING SURGICAL OUTCOMES WITH

IMPACT Immunonutrition Formulas

Contains a unique blend of arginine, omega-3 fatty acids (EPA+DHA from fish oil), and nucleotides shown to reduce complications in major elective surgery patients³⁻¹¹

Consistent outcomes in over **80 publications** in major elective surgeries, including:
Upper GI, Lower GI, Cardiac, Head and Neck,
Bladder Cancer, Gyn-Oncology, Hip



Nutrition Information

- rustration in the contract of the contract o							
	IMPACT ADVANCED RECOVERY® Drink		IMPACT® Formula	IMPACT® Peptide 1.5 Formula			
Serving Size	Per 178 mL carton	Per 534 mL (3 cartons)	Per 1000 mL	Per 1000 mL			
Supplemental L-arginine (g)	4.2	12.6	12.5	18.7			
EPA + DHA (g)	1.1	3.3	1.7	4.9			
Nucleotides (g)	0.43	1.3	1.2	1.8			
Calories (kcal)	200	600	1,000	1,500			
Protein Ordering Inform	ation (35% of total kcal)	54 (35% of total kcal)	56 (22% of total kcal)	94 (25% of total kcal)			

PRODUCT	PRODUCT CODE	NDC FORMAT NUMBER	CASE UPC (GTIN)	PACKAGING
IMPACT® Unflavored	35810000	43900-0358-10	10043900358106	24-250 mL cartons/case
IMPACT® UltraPak® System	35810800	43900-0358-18	10043900358182	6-1000 mL bags/case
IMPACT ADVANCED RECOVERY® Vanilla	4390099291	43900-0992-90	00043900992914	15-178 mL cartons/case
IMPACT® Peptide 1.5 Unflavored	4390097400	43900-0973-99	10043900974009	24-250 mL cartons/case
IMPACT® Peptide 1.5 UltraPak® System	4390097371	43900-0973-70	10043900973712	6-1000 mL bags/case

NDC Formatted Numbers are not actual National Drug Codes (NDC). They are product codes adjusted according to standard industry practice to meet the format requirements of certain suppliers and payers. Nestlé HealthCare Nutrition submits product information including various product codes to the compendia including First Data Bank, RedBook and Medispan but cannot confirm that the NDC Formatted Numbers submitted have been published by the compendia.

References 1. Mauskopf JA et al. WJSO 2012;10:136. 2. Braga M et al. Nutrition 2005;21:1078-1086. 3. Braga M et al. Surgery 2002;132(5):805-814. 4. Braga M et al. Arch Surg 2002;137:174-180. 5. Drover JW et al. J Am Coll Surg 2011;212(3):385-399. 6. Farreras N et al. Clin Nutr 2005;24:55-65. 7. Rowan NR et al. Oral Onc 2016;54:42-46. 8. Waitzberg DL et al. World J Surg 2006;30:1592-1604. 9. Chapman JS et al. Gynecologic Oncology 2015;137:523-528. 10. Tepaske R et al. JPEN 2007;31(3):173-180. 11. Bertrand J et al. World J Urol 2014;32:233-237.

USE UNDER MEDICAL SUPERVISION. NOT INDICATED WHEN IMMUNE SUPPRESSION IS DESIRED.

www.NestleHealthScience.us • 1-800-422-ASK2 (2752)

