



Directions for Use

B. Braun Melsungen AG · 34209 Melsungen, Germany

Composition

1000 ml of solution contain

Active substances:

Isoleucine	2.55	g
Leucine	4.45	g
Lysine hydrochloride (equivalent to lysine 2.80 g)	3.50	g
Methionine	1.90	g
Phenylalanine	2.55	g
Threonine	2.05	g
Tryptophan	0.90	g
Valine	2.40	g
Arginine	4.60	g
Histidine	2.60	g
Glycine	3.95	g
Alanine	6.85	g
Proline	4.45	g
Aspartic acid	0.65	g
Asparagine monohydrate (equivalent to asparagine 1.64 g)	1.86	g
Acetylcysteine (equivalent to cysteine 0.25 g)	0.34	g
Glutamic acid	2.30	g
Ornithine hydrochloride (equivalent to ornithine 1.25 g)	1.60	g
Serine	1.20	g
Tyrosine	0.30	g
Acetyltyrosine (equivalent to tyrosine 0.35 g)	0.43	g

Sodium acetate trihydrate	3.95	g
Potassium acetate	2.45	g
Magnesium acetate tetrahydrate	0.56	g
Sodium dihydrogen phosphate dihydrate	1.40	g
Sodium hydroxide	0.20	g
Malic acid	1.01	g

Electrolyte concentrations:

Sodium	43	mmol/l
Potassium	25	mmol/l
Magnesium	2.6	mmol/l
Acetate	59	mmol/l
Chloride	29	mmol/l
Phosphate	9.0	mmol/l
L-Malate	7.5	mmol/l

Total amino acids	50	g/l
Total nitrogen	8.0	g/l

Excipients:

Disodium edetate, water for injections

Pharmaceutical form

Solution for infusion

Clear, colourless or faintly straw-coloured aqueous solution

Caloric value	835	kJ/l $\triangle$ 200 kcal/l
Osmolarity	590	mOsm/l
Acidity (titration to pH 7.4) approx.	18	mmol/l
pH	5.0 – 7.5	

Pharmaco-therapeutic group

Solutions for parenteral nutrition, combinations

ATC code: B05B A10

Aminoplasmal – 5 % E

Solution for Infusion

Indications

Supply of amino acids as a substrate for protein synthesis in parenteral nutrition, when oral or enteral nutrition is impossible, insufficient or contraindicated.

In parenteral nutrition, amino acid infusions should always be combined with adequate calorie supply, e. g. in the form of carbohydrate solutions.

Contraindications

- hypersensitivity to any of the ingredients present in the solution
- congenital abnormalities of amino acid metabolism
- severe circulatory disorders with vital risk (e.g. shock)
- hypoxia
- metabolic acidosis
- advanced liver disease
- severe renal insufficiency without access to haemofiltration or haemo-dialysis
- high and pathological plasma concentration of one of the electrolytes contained in the product
- uncompensated cardiac insufficiency
- acute pulmonary oedema
- hyperhydration.

This solution should not be administered to neonates, infants or children up to the completed 2<sup>nd</sup> year as the nutrient relations do not properly meet the special paediatric requirements.

Special warnings and precautions for use

This solution should only be administered after careful benefit-risk assessment in the presence of disorders of amino acid metabolism of other origin than stated under section 'contraindications'.

Care should be exercised in the administration of large volume infusion fluids to patients with cardiac insufficiency.

In patients with hepatic or renal insufficiency, the dose must be adjusted according to individual requirements.

Caution is to be exercised in patients with increased serum osmolarity.

Electrolyte and fluid imbalances such as hypotonic dehydration and hyponatraemia, should be corrected by adequate supply of fluid and electrolytes prior to parenteral nutrition.

Serum electrolytes, blood glucose, fluid balance, acid-base balance and renal function (BUN, creatinine) should be monitored regularly.

Monitoring should also include serum protein and liver function tests.

Aminoplasmal – 5 % E is applicable as part of a total parenteral nutrition regimen in combination with adequate amounts of energy supplements (carbohydrate solutions, fat emulsions), vitamins and trace elements.

If the solutions are administered in combination with other nutrient solutions, the possibility of peripheral venous infusion depends on the osmolarity of the resulting mixture.

The site of infusion should be checked daily for signs of inflammation or infection.

Pregnancy and lactation

Studies in pregnant or breast-feeding women have not been conducted with this medicinal product. There are no pre-clinical data regarding the administration of Aminoplasmal – 5 % E during pregnancy.

Aminoplasmal – 5 % E should therefore be administered with caution during pregnancy and lactation and only if deemed clearly indicated after assessment of its benefits and possible risks.



