

SAFETY AND EFFICACY OF AN OLIVE OIL-BASED TRIPLE-CHAMBER BAG FOR PARENTERAL NUTRITION: A PROSPECTIVE, RANDOMIZED, MULTI-CENTER CLINICAL TRIAL IN CHINA.

OLIVE oil-based lipid emulsion was associated with fewer infections and was easier to use than SOYBEAN oil-based lipid emulsion in the largest parenteral nutrition (PN) study of its kind.

Jia et al. *Nutr J.* 2015;14:119.

STUDY DESIGN

An open-label, prospective, randomized (1:1), comparative, multi-center, active-controlled, parallelgroup investigational trial

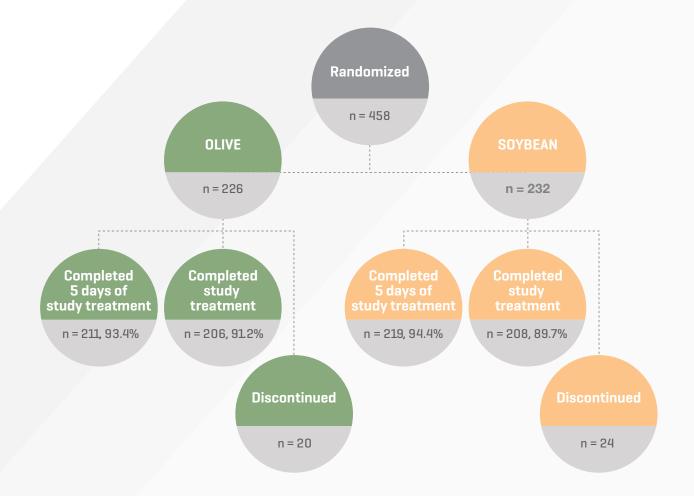
- Conducted between December 2011 and November 2012 in 18 centers across China
- Patients aged ≥18 to ≤80 years old; inpatients who were hospitalized ≤14 days before enrollment; required PN because oral or enteral nutrition was not possible, insufficient, or contraindicated
- Treatments were administered for a minimum of 5 days up to 14 days (to achieve approximately 25 kcal/kg/day, 0.9 g/kg/day amino acids, 0.8 g/kg/day lipid)

HYPOTHESES UNDERLYING THIS STUDY WERE:

• Evaluate the incidence of infections using 2 different lipid emulsions:

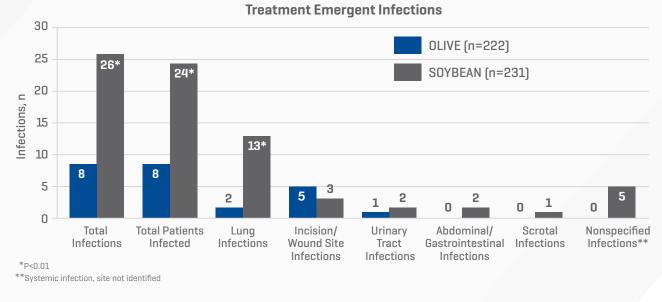
OLIVE: containing amino acid solution, glucose, and 10% lipid emulsion containing olive oil 80%+soybean oil 20% **SOYBEAN:** containing amino acid solution, glucose solution, and 10% lipid emulsion containing 100% soybean oil

 Assess the delivery, efficacy, and safety of an OLIVE oil-based lipid PN regimen compared with a compounded SOYBEAN oil-based lipid PN regimen in Chinese adults for whom oral or enteral nutrition was not possible, insufficient, or contraindicated.



RESULTS

In adult patients who required PN and were hospitalized for ≤14 days, the OLIVE group experienced significantly fewer infections compared to the SOYBEAN group.



- Significantly more patients experienced infections or infestations in the SOYBEAN group (10.4% [24/231]) than the OLIVE group (3.6% [8/222])
- The most common infections were lung infections, which were higher in the SOYBEAN group

In adult patients who required PN and were hospitalized for ≤14 days, serum prealbumin levels were significantly higher in the OLIVE group compared with the SOYBEAN group at Day 5.

Population	OLIVE	SOYBEAN	LSGM ⁺ Ratio (95% CI)	P Value			
mITT* Population	15.7 ± 5.1	14.0 ± 5.1	11 (11,1.2)	0.0002			
Age <65	16.0 ± 5.1	14.5 ± 5.1	11 (10, 12)	0.003			
Age ≥65 Years	14.9 ± 5.2	12.1 ± 4.6	13 (11, 14)	<0.001			
Male	16.2 ± 5.0	13.4 ± 4.9	12 (11, 1.3)	< 0.001			
Female	14.9 ± 5.2	14.9 ± 5.2	10 (0.9, 11)	0.860	⊢ ∮ − 1		
No Surgery	17.1 ± 6.1	14.2 ± 5.7	11 (0.9, 14)	0193			
Medium-Complexity Surgery	15.3 ± 5.6	13.3 ± 5.2	12 (10, 14)	0.036			
High-Complexity Surgery	15.4 ± 4.7	14.0 ± 4.6	11 (10, 12)	0.026			
*mITT=modified intention-to-treat *Least-squares geometric mean				Favo	0.5 10 15 rs SOYBEAN Favors OLIV		
<u>-</u>					LSGM (95% CI)		

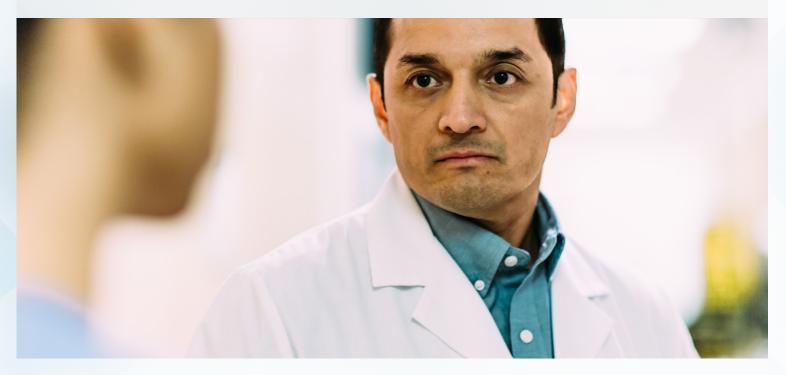
Prealbumin Day 5 (Mean ± SD)

Olive efficacy in the modified intention-to-treat population and prespecified subgroups



In the largest prospective, randomized, open-label, controlled, multi-center study to date that compares 2 lipid emulsions:

• OLIVE oil-based PN regimen improved nutritional outcomes, was associated with fewer infections, was well tolerated, and was easier to use compared with a compounded soybean oil-based PN regimen.



Open Access Link: https://nutritionj.biomedcentral.com/articles/10.1186/s12937-015-0100-6

REFERENCE

1. Jia ZY, Yang J, Xia Y, Tong DN, Zaloga GP, Qin HL. Safety and efficacy of an olive oil-based triple-chamber bag for parenteral nutrition: a prospective, randomized, multi-center clinical trial in China. *Nutr J.* 2015 Nov 14;14[1]:119.

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