Pilot study evaluating the efficacy, tolerance and safety of a peptide-based enteral formula versus a high protein enteral formula in multiple ICU settings (medical, surgical, cardiothoracic)

Study Design

- Fifty patients were enrolled from among multiple adult intensive care units (Medical, Surgical, Cardiothoracic)
- Group A: Twenty-five patients received a peptide-based, high protein, high omega-3 fat enteral formulation (Vital AF 1.2 cal®)
- Group B: Twenty-five patients received a high protein standard enteral formula (Osmolite® 1.2)

Results

Forty-nine patients completed the trial (25 Group A, 24 Group B).
Adverse events and undesired gastrointestinal events at baseline and mean intake post baseline were not different between the groups.

There were significantly fewer days with adverse events (p=0.0336) and undesired gastrointestinal events (p=0.048) in patients who were fed the peptide-based formula (Group A).

Nutrition Conclusion

This pilot study suggests that feeding a peptide-based formula (Vital AF 1.2 cal®) to ICU patients was associated with a significant reduction in the number of days during which adverse events occurred as compared to a standard enteral formula.