

# PRE-OP

A ready-to-drink, lemon flavoured carbohydrate drink for pre-operative dietary management of patients undergoing elective surgery.

## FEATURES

- **Suitable for use as part of Enhanced Recovery After Surgery (ERAS) programs:** carbohydrate loading before surgery is recommended to improve patient outcomes including shorter length of stay and reduced post-operative insulin resistance.<sup>1,2</sup>
- **Safe to use up until 2 hours prior to anaesthesia:** shortens pre-operative fasting period and improves patient wellbeing by reducing pre- and post-operative feelings of thirst, hunger and weakness.<sup>3,4</sup>
- **25.2g carbohydrate/bottle (100% energy):** induces insulin release during pre-operative carbohydrate feeding which promotes anabolic state and results in reduction in post-operative insulin resistance.<sup>5</sup>
- **Maltodextrin polymer composition:** lower osmolality than pure glucose or other monomer solutions and contributes to increased gastric emptying rate.<sup>6,7</sup>
- **100kcal/bottle (0.5kcal/ml).**
- **User-friendly bottle:** ergonomic plastic bottle, with resealable easy to open cap.

## Indications

For pre-operative dietary management of patients undergoing elective surgery.

## Important Notice

- Not suitable as a sole source of nutrition.
- Not for parenteral use.
- Not suitable for patients with delayed gastric emptying.
- Not suitable for emergency surgery patients.
- Not suitable for infants under 1 year of age.
- Use with caution in young children and patients with diabetes mellitus
- Must be used under medical supervision.

## Directions for Use

- Shake well before use.
- Best served chilled.
- Usage to be determined by a healthcare professional.
- **Recommended dosage:**
  - **Loading dose:** 4 x 200ml bottles the evening before surgery.
  - **Final dose:** 2 x 200ml bottles 2 hours prior to anaesthesia.

## Storage

- Store in a cool, dry place.
- Once opened, close the bottle and store in the refrigerator.
- Discard unused content after 24 hours.

## Ordering Information

To order contact Nutricia Customer Experience **0800 688 747**.

preOp	Presentation	Product code	Units per carton	Pharmacode
Lemon	200ml bottle	71500	24	2441268

## Ingredients

**preOp:** Water, maltodextrin, fructose, potassium citrate, sodium citrate, acidity regulator (citric acid), flavouring, sweeteners (acesulfame K, sodium saccharine)

## Allergen & Cultural Information

- Halal certified.
- Nutricia UK and/or Ireland have Kosher approval for this product.
- No gluten containing ingredients. No detectable gluten when tested to a sensitivity level of less than 5 parts per million (<5 ppm i.e. <5mg/kg).
- Low lactose (lactose <2g/100g).



NUTRITION INFORMATION		Per 100ml	Per 200ml
Energy	kcal	50	100
	kJ	215	430
Protein	g	0	0
Carbohydrate	g	12.6 (100% E)	25.2
Sugars	g	2.1	4.2
as Lactose	g	<0.006	<0.012
Fat	g	0	0
Fibre	g	0	0
Water	ml	92	184
Other		Per 100ml	Per 200ml
Osmolality	mOsmol/ kgH <sub>2</sub> O	260	260

Minerals		Per 100ml	Per 200ml
Sodium	mg	50	100
	mmol	2.2	4.4
Potassium	mg	122	244
	mmol	3.1	6.2
Calcium	mg	6	12
Phosphorus	mg	1	2
Magnesium	mg	1	2
Chloride	mg	6	12
Ca:P ratio		10:1	10:1

**Food for special medical purposes  
for use under medical supervision.**

For more information call the  
**Nutricia Clinical Care Line 0800 438 500**

**REFERENCES** 1. Weimann A, Braga M, Carli F, et al. ESPEN guideline: Clinical nutrition in surgery. Clin Nutr. 2017;36:623-650. 2. Ljungqvist O. Enhanced Recovery After Surgery: A Review. JAMA Surg. 2017;152:292-298. 3. Phillips S, Hutchinson S, et al. Preoperative drinking does not affect gastric contents. Br J Anaesth. 1993;70:6-9. 4. Nygren J, Thorell A. Safety and patient well-being after preoperative oral intake of carbohydrate rich beverage. Clin Nutr. 1996;15:30. 5. Soop M, Nygren J, Myrenfors P, et al. Preoperative oral carbohydrate treatment attenuates immediate postoperative insulin resistance. Am J Physiol Endocrinol Metab. 2001;280:576-583. 6. Foster C, Costill D. Gastric emptying characteristics of glucose and glucose-polymer solutions. Res Quart. 1980;51:299-305. 7. Sole C, Noakes T. Faster emptying for glucose-polymer and fructose solutions than for glucose in humans. Eur J Appl Physiol. 1989;58:183-186.