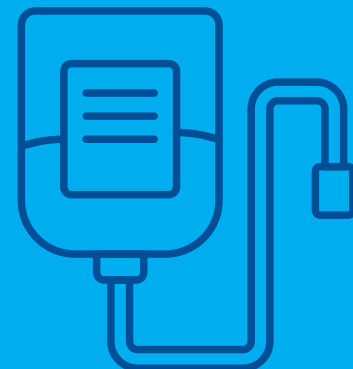


International  
Conference *for*  
Advancing  
Nutrition

## NEONATOLOGY

At this exclusive online educational event participants will learn to leverage nutritional strategies to help improve patient outcomes



This program is intended for health care professionals.

# YOU ARE INVITED TO AN EXCLUSIVE ONLINE EVENT

Thursday, 10 November 2021 | 17:00-19:30 CET / 18:00-20:30 EET

Please Register Today: <https://icanlive.baxter.com/NEOGO>

### iCAN is dedicated to helping improve patient care through advancing parenteral nutrition education around the world.

The International Conference for Advancing Nutrition (iCAN) is a global education program designed to deliver the most up-to-date information available on a wide range of relevant nutritional topics. The program curriculum was developed by a diverse panel of renowned international physicians with specific expertise in nutrition and is offered at no cost to health care professionals. Attendees will leave the program with a greater scientific and clinical understanding of parenteral nutrition applications along with useful nutritional strategies to help improve their patients' well-being.

#### The iCAN program includes:

#### LECTURES

Importance of Parenteral Nutrition  
Fluid, Electrolyte, and Micronutrient Needs  
Safe Preparation and Delivery of Parenteral Nutrition

Lipids for Growth

Practical PN:  
Integrating a Paediatric 3CB into Your Practice

*Products from Baxter's portfolio will be discussed as part of the Practical PN lecture.*

#### EXPERT PANEL DISCUSSION

#### INTERACTIVE POLLING QUESTIONS

### PRESENTERS

Faculty members convened at the iCAN Faculty Advisory Board to share their nutrition expertise and develop the content being presented. Renowned international experts for this iCAN program include:



#### Steve Tomlin, BPharm, FFRPS, FRPharmS

Great Ormond Street Hospital  
NHS Foundation Trust  
London, England



#### Chris van den Akker, MD, PhD

Consultant Neonatal Paediatrician  
Amsterdam UMC - Emma Children's Hospital  
Amsterdam, Netherlands



#### Dirk Wackernagel, MD

Department of Neonatology  
Astrid Lindgrens Children's Hospital  
Karolinska University Hospital  
Stockholm, Sweden

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## Numeta G13E emulsion for infusion

**COMPOSITION** Three-chamber bag. Each bag contains a sterile non-pyrogenic combination of a glucose solution, a pediatric amino acids solution, with electrolytes, and a lipid emulsion. Numeta G13E: Container size 300 ml, 50% glucose solution: 80 ml, 5,9% amino acid solution with electrolytes: 160 ml, 12,5% lipid emulsion: 60 ml. **THERAPEUTICAL INDICATIONS** Numeta G13E is indicated for parenteral nutrition in preterm newborn infants when oral or enteral nutrition is not possible, insufficient or contraindicated. **POSODOLOGY** Numeta G13E: Maximal volume/kg/day of Numeta G13E with lipids 127,9 ml/kg and Numeta G13E without lipids 102,3 ml/kg. Max infusion rate [ml/kg/h] of Numeta G13E with lipids 6,4 ml/kg/h and of Numeta G13E without lipids 5,1 ml/kg/h. **ADMINISTRATION** Administered through a central vein. However, sufficient dilution of Numeta G13E with water for injection lowers the osmolality and allows peripheral infusion. **CONTRAINDICATIONS** Numeta G13E without lipids: Hypersensitivity to egg, soy or peanut proteins, or to any of the active substances, excipients, or components of the container. Congenital abnormality of the amino acid metabolism. Pathologically elevated plasma concentrations of sodium, potassium, magnesium, calcium and/or phosphorus. Concomitant treatment with ceftriaxone even if separate infusion lines are used. Severe hyperglycaemia. Numeta G13E with lipids: Severe hyperlipidaemia, or severe disorders of lipid metabolism characterized by hyper triglyceridaemia. **UNDESIRABLE EFFECTS Clinical Trial and Post-marketing experience Adverse Reactions Metabolism and nutrition disorders. Common:** Hypophosphataemia, Hyperglycaemia, Hypercalcaemia, Hypertriglyceridaemia, Hyponatraemia. **Uncommon:** Hyperlipidaemia. Hepatobiliary disorders **Uncommon:** Cholestasis. Skin and subcutaneous tissue disorder **Not known:** Skin necrosis, Soft tissue injury. General disorders and administration site condition **Not known:** Extravasation. Fat overload syndrome: reduced ability to remove the lipids contained in Numeta G13E may result in a "fat overload syndrome" which may be caused by overdose and/or infusion rate higher than recommended and is associated with a sudden deterioration in the patient's clinical condition. It is characterized by hyperlipidemia, fever, liver fatty infiltration, hepatomegaly [deteriorating liver function], anemia, leukopenia, thrombocytopenia, coagulation disorders and central nervous system manifestations [e.g. coma]. The syndrome is usually reversible when the infusion of the lipid emulsion is stopped. Pulmonary vascular precipitates [pulmonary vascular embolism and respiratory distress]. **PRECAUTIONS Cardiovascular:** Use with caution in patients with pulmonary edema or heart failure. Fluid status should be closely monitored. **Renal:** Use with caution in patients with renal insufficiency. Fluid and electrolyte status, including magnesium, should be closely monitored in these patients. Severe water and electrolyte equilibration disorders, severe fluid overload states, and severe metabolic disorders should be corrected before starting the infusion. **Hepatic/Gastrointestinal:** Use with caution in patients with severe liver insufficiency, including cholestasis, or elevated liver enzymes. Liver function parameters should be closely monitored. **Endocrine and Metabolism:** Metabolic complications may occur if the nutrient intake is not adapted to the patient's requirements, or the metabolic capacity of any given dietary component is not accurately assessed. Adverse metabolic effects may arise from administration of inadequate or excessive nutrients or from inappropriate composition of an admixture for a particular patient's needs. **Hematologic:** Use with caution in patients with severe blood coagulation disorders. Blood count and coagulation parameters should be closely monitored. For the detailed posology, special warnings and precautions for use, interactions, pharmacological properties and pharmaceutical particulars, please refer to the full SPC. Medicinal products are subject to medical prescription. Latest approved SPC: 09/2020.

### COUNTRY SPECIFIC INFORMATION:

**Denmark:** Udlevering: B. Tilskud: Ikke tilskudsberettiget. For prices see: [www.medicin.priser.dk](http://www.medicin.priser.dk).

**Norway:** Reseptgruppe: C. Blå resept: Nei.

For prices, see: [www.legemiddelsok.no](http://www.legemiddelsok.no).

**ATC code:** B05BA10.

This abbreviated summary of product characteristics

[SmPC] is intended for international use. Please note that it may differ from the licensed SmPC in the country where you are practicing.

Therefore, please always consult your country specific SPC available at [www.produktresume.dk](http://www.produktresume.dk) in Denmark; [www.fimea.fi](http://www.fimea.fi) in Finland,

[www.felleskatalogen.no](http://www.felleskatalogen.no) in Norway or [www.fass.se](http://www.fass.se) in Sweden.

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