



OMAPONE®

OMAPONE® provides various options considering individual patient's condition.

OMAPONE® Composition

Composition (per 1,000 mL)		OMAPONE® Inj.			OMAPONE® Peri Inj.					
Total Volume		986 mL	1477 mL	1970 mL	362 mL	500 mL	724 mL	952 mL	1448 mL	1904 mL
Glucose	% in compartment	42%	42%	42%	13%	13%	13%	13%	13%	13%
	% after mixing	13%	13%	13%	7%	7%	7%	7%	7%	7%
	Volume (ml)	298	446	595	197	272	394	518	788	1036
	Glucose Anhydrous(Dextrose) (g)	125	187	250	26	52	68	103	135	
Approx. Calories (kcal)		500 kcal	748 kcal	1,000 kcal	103 kcal	142 kcal	206 kcal	270 kcal	412 kcal	540 kcal
Lipid	% in compartment	20%	20%	20%	20%	20%	20%	20%	20%	20%
	% after mixing	4%	4%	4%	3%	3%	3%	3%	3%	3%
	Volume (ml)	188	281	375	51	70	102	134	204	268
	Lipid (g)	37.6	56.3	75.1	10.2	14.1	20.4	26.8	40.8	53.6
	SO – Soybean oil, refined (g)	11.3	16.9	22.5	3.1	4.2	6.2	8.1	12.3	16.1
	MCT – Medium-chain triglycerides (g)	11.3	16.9	22.5	3.1	4.2	6.2	8.1	12.3	16.1
	OO – Olive oil, refined (g)	9.4	14.1	18.8	2.5	3.5	5.1	6.7	10.1	13.4
	FO – Fish oil, rich in ω-3 (g)	5.6	8.4	11.3	1.5	2.1	3.1	4.0	6.1	8.0
	Purified egg phospholipid (g)	2.3	3.4	4.5	0.6	0.8	1.2	1.6	2.4	3.2
	Glycerol (g)	4.7	7.0	9.4	1.275	1.76	2.55	3.35	5.10	6.70
	α-Tocopherol (g)	0.036	0.055	0.073	0.010	0.014	0.020	0.026	0.040	0.052
Approx. Calories (kcal)		378 kcal	565 kcal	754 kcal	102 kcal	142 kcal	205 kcal	269 kcal	410 kcal	538 kcal
Amino acids	% in compartment	10%	10%	10%	10%	10%	10%	10%	10%	10%
	% after mixing	5.1%	5.1%	5.1%	3.2%	3.2%	3.2%	3.2%	3.2%	3.2%
	Volume (ml)	500	750	1000	114	158	228	300	456	600
	Amino acids (g)	50.1	75.1	100.1	11.4	15.8	22.8	30.0	45.6	60.0
	Nitrogen (g)	8	12	16	1.9	2.6	3.7	4.9	7.4	9.8
	Approx. Calories (kcal)	200 kcal	300 kcal	400 kcal	46 kcal	63 kcal	91 kcal	120 kcal	183 kcal	240 kcal
	EAA/**TAA (%)	41%	41%	41%	41%	41%	41%	41%	41%	41%
	BCAA/TAA(%)	19%	19%	19%	19%	19%	19%	19%	19%	19%
	BCAA/EAA(%)	45%	45%	45%	46%	46%	46%	46%	46%	46%
	Alanine (g)	7.0	10.5	14.0	1.6	2.2	3.2	4.2	6.4	8.4
	Arginine (g)	6.0	9.0	12.0	1.4	1.9	2.8	3.6	5.5	7.2
	Glycine (g)	5.5	8.2	11.0	1.3	1.7	2.6	3.3	5.1	6.6
Electrolytes (mmol)	Histidine (g)	1.5	2.2	3.0	0.3	0.5	0.7	0.9	1.3	1.8
	Isoleucine (g)	2.5	3.8	5.0	0.6	0.8	1.2	1.5	2.3	3.0
	Leucine (g)	3.7	5.6	7.4	0.8	1.2	1.7	2.2	3.4	4.4
	Lysine (g)	3.3	5.0	6.6	0.8	1.0	1.5	2.0	3.0	4.0
	Methionine (g)	2.2	3.2	4.3	0.5	0.7	1.0	1.3	1.9	2.5
	Phenylalanine (g)	2.6	3.9	5.1	0.6	0.8	1.2	1.6	2.3	3.1
	Proline (g)	5.6	8.4	11.2	1.3	1.7	2.6	3.4	5.1	6.7
	Serine (g)	3.2	4.9	6.5	0.8	1.0	1.5	2.0	3.0	3.9
	Taurine (g)	0.50	0.75	1.00	0.12	0.2	0.23	0.30	0.46	0.60
	Threonine (g)	2.2	3.3	4.4	0.5	0.7	1.0	1.3	2.0	2.6
	Tryptophan (g)	1.0	1.5	2.0	0.2	0.3	0.5	0.6	0.9	1.2
	Tyrosine (g)	0.2	0.3	0.4	0.04	0.1	0.09	0.12	0.18	0.24
Osmolarity (mosm/l)	Valine (g)	3.1	4.6	6.2	0.7	1.0	1.5	1.9	2.9	3.7
	Sodium (Na ⁺)	40	60	80	9	12	18	24	36	48
Electrolytes (mmol)	Potassium (K ⁺)	30	45	60	7	10	14	18	28	36
	Magnesium (Mg ²⁺)	5.0	7.5	10.0	1.2	1.6	2.3	3.0	4.6	6.0
Electrolytes (mmol)	Calcium (Ca ²⁺)	2.5	3.8	5.0	0.6	0.8	1.2	1.5	2.3	3.0
	Phosphate (PO ₄ ³⁻)	12.0	19.0	25.0	3.0	4.1	6.0	7.8	11.9	15.6
Electrolytes (mmol)	Chloride (Cl ⁻)	35	52	70	8.0	11.2	16.0	21.0	32.0	42.0
	Acetate (CH ₃ COO ⁻)	104	157	209	24.0	32.8	48.0	62.5	96.0	125.0
Electrolytes (mmol)	Sulfate (SO ₄ ²⁻)	5.0	7.5	10.0	1.2	1.6	2.3	3.1	4.6	6.1
	Zinc (Zn ²⁺)	0.04	0.06	0.08	0.01	0.01	0.02	0.03	0.03	0.05
Electrolytes (mmol)	¹ NPC (kcal)	878	1,313	1,754	205	282	411	539	822	1,078
	¹ NPC/N	110	109	110	111	111	111	110	111	110
Electrolytes (mmol)	Osmolarity (mosm/l)	1,500	1,500	1,500	850	850	850	850	850	850
	pH	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6
Total Calories (kcal)		1,078	1,613	2,154	251	345	502	659	1,004	1,318
Approx. Total Calories (kcal)		1,100	1,600	2,200	250	350	500	650	1,000	1,300

Reference 1. Mayer K et al. *Curr Opin Clin Nutr Metab Care* 2006 Mar; 9(2): 140–8. 2. Grimm H et al. *JUN* 2006; 45: 55–60. 3. Mertes N et al. *Ann Nutr Metab*, 2006; 50(3): 253–259. 4. Grecu I et al. *Clin Nutr* 2003; 22 (Suppl): S23. 5. Jiang ZM et al. *Br J Surg*. 2010 Jun; 97(6): 804–809. 6. Weiss G et al. *Br J Nutr*. 2002 Jan; 87 (Suppl 1):S89–94. 7. Schadei J et al. *Crit Care* 2008; 12 (Suppl 2):S56–57. 8. Antebi H et al. *JPNEN* 2004; 28: 142–148. 9. Goulet O et al. *Curr Opin Organ Transplant* 2010; 14(3): 256–261. 10. Celini L et al. *Journal of Pediatric Gastroenterology and Nutrition* 2010; 51: 514–521. 11. Celini L et al. *Crit Opin Clin Nutr Metab Care* 2008 May; 11(3): 297–302. 12. Cooper A et al. *J Pediatr Surg*. 1984 Aug; 19(4): 462–466. 13. Wang WY et al. *JPNEN* 1994; 15(3): 294–297. 14. Redmond HP et al. *Nutrition* 1998 Jul–Aug; 14(7–8): 599–600. 15. Rostan EF et al. *Int J Dermatol*. 2002 Sep; 41(9): 606–611. 16. Carpenter Y in: Sobotta L. "Basis in Clinical Nutrition", 3rd edition. Galen 2004; 153–154. 17. Singer P et al. *Clin Nutr*. 2009 Aug; 28(4): 387–400. 18. Braga M et al. *Clin Nutr*. 2009 Aug; 28(4): 378–386. 19. Morlon M et al. *Clin Nutr*. 2003; 16: 49. 20. Furst P et al. *Clin Nutr*. 2000 Feb; 19(1): 7–14. 21. Adolph M et al. *Clin Nutr*. 2001; 20: 11–14. 22. Grimm H et al. *Clin Nutr*. 1994; 13: 417–421. 23. Grimm H et al. *Langerbecks Arch Surg* 2001; 368: 369–376. 24. Medje M et al. *Gastroenterology*. 1981 Jan; 80(1): 103–107. 25. Tulkoura I et al. *Scand J Gastroenterol*. 1982 Mar; 17(2): 177–185. 26. Tappy L et al. *Crit Care Med*. 1998 May; 26(5): 860–867. 27. Stoner HB et al. *Br J Surg*. 1983 Jan; 70(1): 32–35.

inno.N

OMAPONE® TPN

(Containing Fish Oil, 3rd Generation TPN)

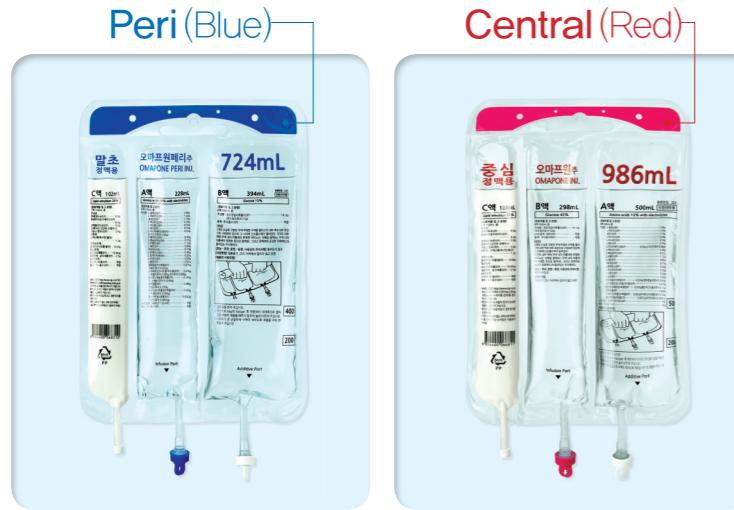


OMAPONE® is the safe and convenient 3rd generation of TPN which has been developed **with advanced technology of HK inno.N**

○ Innovation

HK inno.N's self developed Hanger Bar helps

- ✓ easily distinguish the uses for **peripheral veins** and **central veins**, thus prevent from administration error.
- ✓ the bag consistently maintain its shape, thus check any residual amount easily.

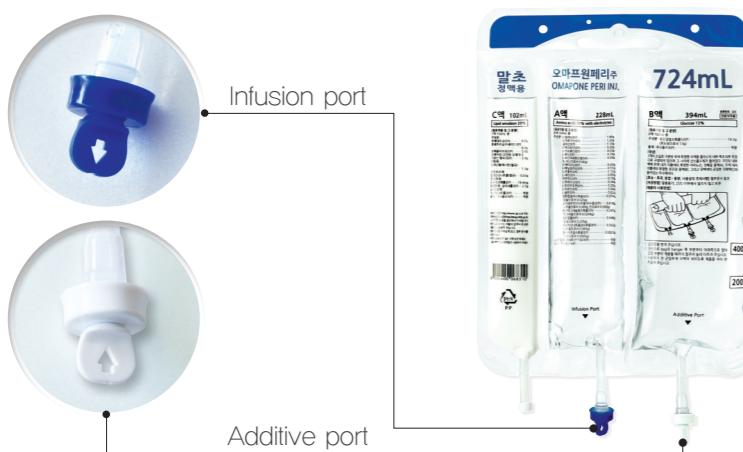


○ Safety

- ✓ With the application of "Safe-Flex® technology" developed by HK inno.N, sterilized tabs and ports make it safer to use without additional sterilization.
- ✓ With improved port functions, the liquid does not leak even when removing the needle.

○ Simplicity

- ✓ Users can easily identify the product through double sided transparent outer pouch design of the bag.
- ✓ Different color design and arrow directions of each port make it easier to distinguish between Infusion Port and Additive Port



○ Convenience

After removing the outer pouch, break up the partition of the chambers by rolling up from the hanger bar. Then mix and use.

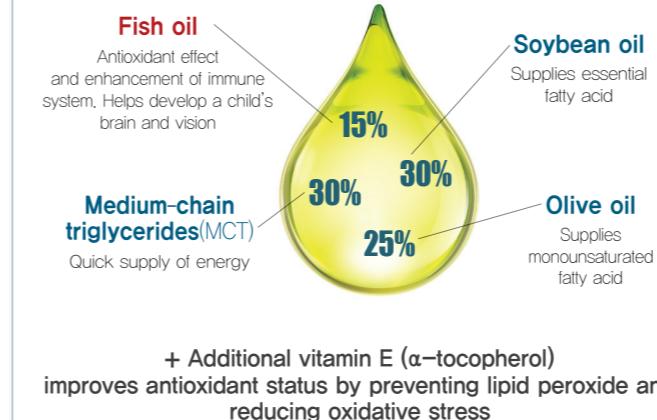


OMAPONE® is the 1st generic of SmofKaviben (3-in-1mix).

○ Composition

• Lipid emulsion

Composed of 4 optimized lipids



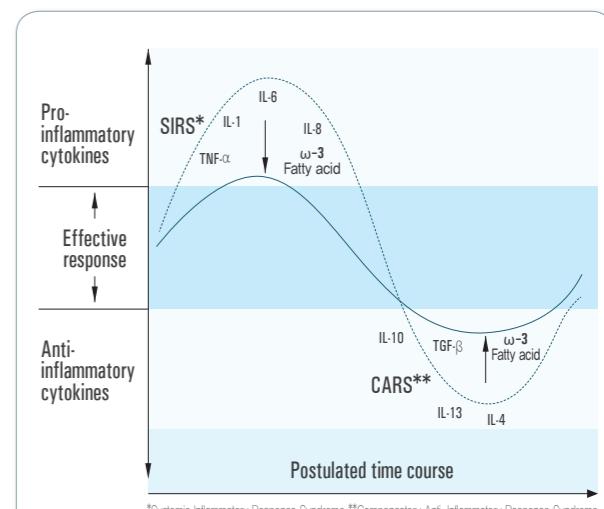
• Glucose

Supplies energy through an optimized glucose-lipid ratio¹⁰

• Amino acids with Electrolytes

- ✓ Supplies optimized content of amino acids.
- ✓ Contains Taurine, which promotes bile production and regulates immune system¹¹⁻¹⁴
- ✓ Contains Zinc, which is essential for injury recovery and immune response¹⁵

○ Effects of fish oil based ω-3 fatty acids on immune function¹⁻⁷

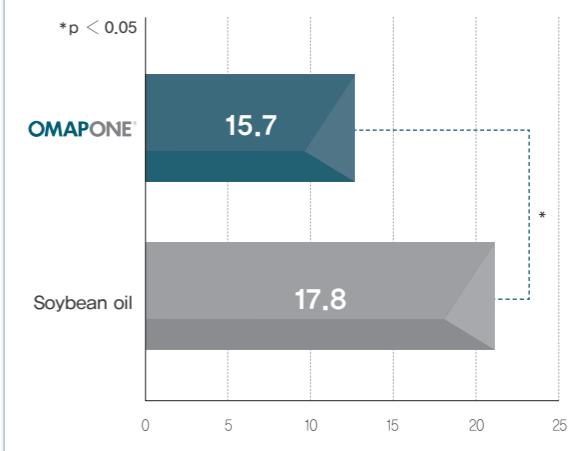


- ✓ Administration of ω-3 fatty acids from fish oil leads to more balanced immune response which may result in a faster resolution of inflammation and recovery

Pro-inflammatory cytokines ↓ Anti-inflammatory cytokines ↑

○ Favourable clinical outcome with the 3rd generation of lipid emulsion containing fish oil.¹⁻⁷

Length of hospital stay after 5 days of TPN in adult post operative patients²



✓ Significantly shorter length of hospital stay compared to a soybean oil emulsion^{4,6}

✓ Significantly reduce reoperation rates in post operative patients.^{5,6}

○ OMAPONE® is in line with recommendation for Parenteral Nutrition

OMAPONE with an ω-6:ω-3 fatty acid ratio of 2.5:1 perfectly meets the recommended range.

ESPEN* Guidelines on Parenteral Nutrition : Intensive Care⁷

- Lipids should be an integral part of PN for energy and to ensure essential fatty acid provision in long-term ICU patients. (Grade B)
- Addition of EPA and DHA to lipid emulsions has demonstrable effects on cell membranes and inflammatory processes. **Fish oil-enriched lipid emulsions probably decrease length of stay** in critically ill patients. (Grade B)

ESPEN* Guidelines on Parenteral Nutrition : Surgery¹⁸

- The optimal parenteral nutrition regimen for critically ill surgical patients should probably include supplemental ω-3 fatty acids. (GRADE C)

Expert opinions

- Experts recommend an ω-6:ω-3 fatty acid ratio of 4:1 to 2:1¹⁹⁻²³

* The European Society for Clinical Nutrition and Metabolism