Nutritional support of disease-related malnutrition with impaired glucose metabolism can significantly reduce healthcare costs and resources⁶

When used in malnourished type II diabetes patients ...



... nutritional support with highcaloric diabetes-specific formulas results in net cost savings:



	9 ,
Reduction in hospital costs	-40%
Reduced use of healthcare resources	-65%
Fewer hospital admissions	-55%
Fewer days spent at hospital	-64%
Fewer emergency visits	-58%

Diben product portfolio





- Significantly improved glycaemic control without adverse effects on lipid metabolism
- Significantly reduced postprandial hyperglycaemia
- Significantly improved long term glycaemic control (HbA1c)
- Safe, well tolerated and well accepted in patients with impaired glucose tolerance in need of nutritional support

*compared to a standard food for special medical purposes (FSMP)

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Specific enteral nutrition for disease-related malnutrition & impaired glucose metabolism

Beneficial and cost saving



Professionals only

FRESENIUS KABI caring for life

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patients with a new enteral formula low in ted fatty acids: a randomised controlled truly is Kabi Deutschland GmbH

Certain malnourished patient groups are more susceptible to an impaired glucose metabolism



Prediabetes1

- Blood glucose concentrations are higher than normal, but not meeting the absolute definition of diabetes.
- It is characterised by impaired fasting glucose and/or impaired glucose tolerance in the presence of insulin resistance.
- Patients with prediabetes are at increased risk for type II diabetes mellitus.



- Also known as diabetes of injury.
- It is an adaptive immuneneurohormonal response to physiological stress in an attempt to increase metabolic substrates to struggling organs during a time of crisis.
- Occurs in patients without prediagnosed diabetes

of hospitalised older

patients are admitted with

unrecognised diabetes4

14%

of hospitalised older patients are admitted

with type II diabetes4

The prevalence of diabetes in older hospital patients is significant.

33%

of diabetic

patients are older than 65 years³

Stress-induced hyperglycaemia²

It is a chronic, metabolic disease characterised by elevated levels of blood glu-

cose, which leads over time to serious damage to the heart, blood vessels, eyes, kidneys and nerves.

Types:

- > Type I diabetes is a chronic condition in which the pancreas produces little or no insulin by itself.
- Type II diabetes occurs when the body becomes resistant to insulin or does not produce enough insulin.

39%

of hospitalised diabetic

older patients are at

risk of malnutrition⁵

21%

of hospitalised

diabetic older

patients are malnourished⁵

Specific enteral nutrition for disease-related malnutrition with impaired glucose tolerance in hospital patients shows economic and nutritional benefits*

Specific enteral nutrition for disease related-malnutrition and impaired glucose metabolism provides safe, efficacious and cost-effective support for hospitals managing malnourished patients.



Approximately 80% of critically ill hospitalised patients experience hyperglycaemia^{7,8}

Cost savings in ICU originate from management of patients with type II diabetes with or at risk of malnutrition:9

-2 days



- Reduced LoS in ICU
- Reduced ICU cost by US\$2,500 (~€2,115) per patient

-9% insulin prescription



 Reduced need for insulin and diabetes-related medications at ICU discharge

Additional cost savings are seen after discharge from ICU:9

~€25** per patient per day



 Reduced cost of care in general ward

Nutrition support for disease-related malnutrition with impaired glucose tolerance **reduces overall costs** by improving nutritional status.

LoS = Length of Stay

* for type II diabetes patients

** 12 month average 28 May 2018 to 29 May 2019, US\$1 = €0.8736, www.ecb.europa.eu

The Diben range provides additional nutritional benefits to meet the needs of malnourished patients with impaired glucose metabolism*



High in MUFA

Improves glycaemic control and insulin sensitivity



Modified carbohydrate profile with low glycaemic index Counteracts high postprandial glucose & minimises blood

glucose fluctuations



With MCT** Contributes to blood lipid control



Well-balanced fatty acid profile including fish oil (Diben DRINK, Diben 1,5 kcal HP, Diben Crème)

EPA + DHA in the amounts recommended for daily intake and for a balanced fat profile



For improved alycaemic control



(Diben DRINK, Diben 1,5 kcal HP, Diben Crème) Content supporting higher

protein requirements



MUFA = monounsaturated fatty acids; MCT = medium chain triglycerides; EPA = eicosapentaenoic acid; DHA = docosahexaenoic acid * for the dietary management of patients with or at risk of malnutrition with impaired glucose metabolism such as impaired glucose tolerance, stress-induced

Diben products are foods for special medical purposes, that should be used under medical supervision