KETOANALOGUES + ESSENTIAL AMINO ACIDS

KETORELS

Renal Nutrition Therapy



ATION:

L-Tyrosine USP

L-Tryptophan USP ...

Each min-coaled tablet contains.	
Calcium-4-methyl-2-oxo-valerate (α-ketoanalogue to leucine, calcium salt)	101 mg
Calcium-3-methyl-2-oxo-butyrate (α-ketoanalogue to valine, calcium salt)	86 mg
Calcium-2-oxo-3-phenylpropionate (α-ketoanalogue to phenylalanine, calcium salt)	68 mg
Calcium-3-methyl-2-oxo-valerate (α-ketoanalogue to isoleucine, calcium salt)	67 mg
Calcium-DL-2-hydroxy-4-(methylthio) butyrate (α-hydroxyanalogue to methionine, calcium	
L-Lysine Acetate USP	105 mg
L-Threonine USP	53 mg
L-Histidine USP	38 mg

Total nitrogen content per tablet: 36 mg Calcium content per tablet: 1.25 mmol= 50 mg

Actionalogues + Essential amino acids tablet contains all amino acids essential for uraemic patients; five of them are ketoanalogues in the form of calcium salts. The Ketoanalogues + Essential amino acids tablet contains all amino acids essential for uraemic patients; five of them are ketoanalogues in the form of calcium salts. The acid of the results of the salt of the sal

.30 mg

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Ketoanalogues Essential amino acids allows the intake of essential amino acids while minimizing the aminonitrogen intake. Following ingestion, the ketoanalogues are transaminated by taking nitrogen from non-essential amino acids, hereby decreasing the formation of urea by re-using the amino group.

The levels of accumulating urenit cions are decreased. Keto- and/or hydroxy-acids do not left lityperfiltation of residual neptrons. Ketoacid-containing supplements have a positive influence on the renal hyperphosphatemia and secondary hyperparatylyroidism and can improve renal osteodystom. The use of Refoaralogues + Essential amino acids in association with a very low protein diet allows a reduced intake of nitrogen while avoiding the deletions consequences of inadequate dietary. protein intake and malnourishment

PHARMACOKINETICS:

In normal individuals, there is an increase in the plasma level of ketoanalogues, 10 minutes after oral ingestion. These levels reach values that are approximately 5 times higher than the initial level. Peak levels are reached within 20-80 mins, and normal levels are reached again after 90 mins. Gastrointestinal absorption is thus very rapid. In the plasma, a simultaneous increase in levels of the ketoanalogues and the corresponding amino add 5-how that transamination the ketoanalogues and very rapid. Under the plasma, a simultaneous increase in levels of the ketoanalogues and the corresponding amino add 5-how that transamination ketoanalogues are very rapid. Under the natural pathways of disposal of \(\alpha\) two simultaneous increases are the casted and into acids. In the organism, it is probable that exogenous intakes are very rapidly integrated into metabolic cycles. Ketoacids follow the same catabolic pathways as the classical amino acids.

THERAPEUTIC ACTION:

Normalizes metabolic processes, promotes recycling product exchange, reduces ion concentration of potassium, magnesium and phosphate,

INDICATIONS:

For prevention and therapy of damages due to faulty or deficient protein metabolism in chronic renal insufficiency in connection with a limited protein food of 40 g/day (for adults) and less, i.e. generally in patients with glomenular filtration rate (GFR) below 25 mL/min.

DOSAGE AND ADMINISTRATION:

For oral use.

Four to eight tablets, three times a day

1 tablet / 5 kg body weight/day Should be taken with food (swallow whole, do not chew/crush) or as prescribed by the physician.

DURATION OF TREATMENT:

The product is administered as long as the glomerular filtration rate (GFR) is below 25 mL/min, and concomitantly, dietary protein is restricted to 40 g/day or less (adults).

CONTRAINDICATIONS:

- Allergy and hypersensitivity to any content of this drug Hypercalcemia
- Disturbed amino acid metabolism
- Caution use for patient with phenylketonuria

Ketoanalogues + Essential amino acids contains phenylalanine. It should be used with caution in phenylketonuria patients.

PREGNANCY AND LACTATION:

No experience has been made so far with the administration of Ketoanalogues + Essential amino acids during pregnancy and lactation.

ADVERSE EFFECTS:

Hypercalcemia may develop. In this case, it is recommended to decrease vitamin D intake.

If the hypercalcemia persist, reduce the dosage of Ketoanalogues + Essential amino acids as well as any source of calcium.

DRUGINTERACTIONS:

DRUGIN TEXACTIONS:

The simultaneous administration of medicaments containing calcium (e.g., acetolyte) maylead to pathological increase of the serum calcium level or intensification.

As the unsernic symptoms improve under Ketonalogues + Essential amino acids, a possible administration of aluminum hydroxide should be reduced. Pay attention to a reduction of serum phosphate. In order not to interfere with absorption, do not take drugs together with Ketonalogues + Essential amino acids that from sparingly soluble compounds with calcium (e.g., tetracyclines), quindones (e.g., ciprofloxacion, norfloxacin), from, fluoride, and estramustin-containing drugs. Between the intake of Ketonandogues + Essential amino acids from the mentioned categories a period of at least 2 hours should pass. The susceptibility towards heart/cardiac-active glycosides and hence, also the risk of arrhythmia increase with the rise of the blood calcium concentration.

PRECAUTIONS:

Keloanatogues + Essential amino acids should be taken during meals to allow proper absorption and metabolism into the corresponding amino acids. The serum calcium level should be monitored regularly. Ensure sufficient supply with lactation.

No symptoms have been observed to date.

CAUTION:

Foods, Drugs, Devices, and Cosmetics Act prohibits dispensing without prescription.

For suspected adverse drug reaction, report to the FDA: www.fda.gov.ph. Seek medical attention immediately at the first sign of any adverse drug reaction

STORAGE CONDITION:

OVERDOSE AND TREATMENT:

Store at temperatures not exceeding 30°C.

KEEPALL MEDICINES OUT OF CHILDREN'S REACH.

AVAILABILITY:

Alu/Alu Blister Pack x 10's (Box of 10's & 100's)

DRP-5901-03

Date of First Authorization: April 13, 2016 Date of Renewal of Authorization: September 16, 2019

Date of Revision of Package Insert: April 21, 2020

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