

Ketosteril® Research Award 2010



Ketosteril® Research Award 2010
Grant : 40,000 Euro

Research creates progress

Fresenius Kabi announces a Ketosteril® Research Award and invites investigators to apply for this grant of 40,000 Euro. The grant may cover basic or applied research on topics directly related to the field of the therapeutic relevance of keto/amino acids and protein restriction in the scope of chronic kidney disease (CKD). A selection committee consisting of established investigators will select the award recipient. The winner of this research grant will be officially announced at the occasion of the XV International Congress on Nutrition and Metabolism in Renal Disease in Lausanne, Switzerland, May, 2010.

For further information, contact:
Fresenius Kabi Deutschland GmbH
Else-Kröner-Straße 1
D-61352 Bad Homburg v.d.H
Germany
Phone: +49 (0) 6172 686-7710
Anja.Markant@fresenius-kabi.com

 XV International Congress
on Nutrition and Metabolism
in Renal Disease - 2010

Ketosteril® Product Characteristics: One film-coated tablet contains: Calcium 3-methyl-2-oxovaleric acid, L-ketosteril® of isoleucine, Ca salt 67 mg, Calcium-methyl-2-oxovaleric acid, L-ketosteril® of leucine, Ca salt 101 mg, Calcium-2-oxo-3-phenylisopropionic acid, L-ketosteril® of phenylalanine, Ca salt 88 mg, Calcium-3-methyl-2-oxobutyric acid, L-ketosteril® of valine, Ca salt 85 mg, Calcium-DL-2-hydroxy-4-methylthiobutyric acid, L-ketosteril® of methionine, Ca salt 59 mg, Lysine acetate (L-lysine) 23 mg, L-tyrosine 53 mg, L-tyrosine 23 mg, L-tyrosine 38 mg, L-tyrosine 30 mg. Total leucine content per tablet 36 mg, Calcium content 1.25 mmol = 0.05 g. **Other ingredients:** Corn starch, croscopolone, polydione (K-value 29-32), talc, highly dispersed silicon dioxide, magnesium stearate, macrogol 6000, colouring agents E 104, E 111, alkaline polyacrylate, glycerol triacetate. **Indications:** Prevention and therapy of damages due to faulty or deficient protein metabolism in chronic renal insufficiency in connection with limited protein in food of 40 g per day for adults and less, i.e. generally in patients with a glomerular filtration rate (GFR) below 25 ml/min. **Contra-indications:** Hypercalcaemia, disturbed amino acid metabolism. In case of hereditary phenylketonuria it has to be taken into account that this product contains phenylalanine. **Precautions for use and warnings:** No experience has been made so far with the application in pregnancy and paediatrics. Ketosteril® should be taken during meals to allow proper absorption and metabolism into the corresponding amino acids. The serum calcium level should be monitored regularly. An adequate supply of calories should be ensured. **Undesirable effects:** Hypercalcaemia may develop. In this case, it is recommended to decrease vitamin D intake. If the hypercalcaemia persists, reduce the dosage of Ketosteril® as well as any other source of calcium. **Dosage instructions:** In general, unless prescribed otherwise, four to eight tablets are swallowed or one three times daily during meals. This dosage applies to adults (70 kg body weight) in 1-tablet (5 kg body weight). **Presentation:** Pack containing 100 film-coated tablets in blister. **Instructions for use:** **Handling/storage:** Do not use Ketosteril® after expiry date! Keep out of the reach of children! Do not store above 25°C. Protect from moisture. **Interaction with other drugs:** Simultaneous administration of medicinal products that contain calcium (e.g. antacids) may, begin or worsen, a pathological increase in the serum calcium level. As the osmotic symptoms improve under therapy with Ketosteril® tablets, the dose of aluminium hydroxide administered should be reduced, as appropriate. The patient should be monitored for reduced levels of serum phosphate. In order not to interfere with absorption, an appropriate interval should be observed between administration of Ketosteril® tablets and medical products which form poorly soluble compounds with calcium (e.g. tetracyclines, quinolones such as ciprofloxacin and norfloxacin, preparations that contain iron, fluoride and strontium). An interval of at least 2 hours should be observed between the intake of Ketosteril® tablets and such preparations. If administration of Ketosteril® tablets leads to increased blood levels of calcium, the sensitivity to medicinal products which increase heart action (cardiac glycosides) and thus also the risk of cardiac arrhythmia is increased.

**FRESENIUS
KABI**
caring for life

**KVBI
LABORING**

The Ketosteril® Research Award 2010 initiated by Fresenius Kabi was presented at the XV International Congress on Nutrition and Metabolism in Renal Disease in Lausanne, Switzerland, May 25-28 2010.

The research grant supports research projects with focus on keto/and amino acid metabolism and protein restriction in chronic kidney disease characterized by their novelty, importance and feasibility.

The international selection committee of well-known nephrologists (Prof. Fouque, Prof. Aparicio, Prof. Mitch, Prof. Lin, Prof. Teplan, Dr. Chauveau) selected the winners of the Ketosteril® Research Award 2010.

This year, the high quality of papers submitted for the Research Award has led Fresenius Kabi Deutschland GmbH to sponsor two projects with 40,000 € each.

Both winners are from scientifically established medical institutions in China:

Prof. Weijie Yuan

First People's Hospital
Shanghai Jiao Tong University, China

Project: 'Study Mechanisms of Low Protein Diet Supplemented with Ketoanalogues on Reducing Proteinuria and Maintaining Nutritional Status in Type 2 Diabetic Nephropathy'

Dr. Jie Dong

Peking University First Hospital
Peking, China

Project: 'Effects of Low Protein Diet Supplemented with Keto Acid on Insulin Resistance in Peritoneal Dialysis Patients'