

BETTER DELAY THAN NEVER



Recommend. THE MOST TRUSTED BRAND OF ALPHA-KETO AMINO ACID TABLETS

RENOLOG

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RENOLOG®

Background

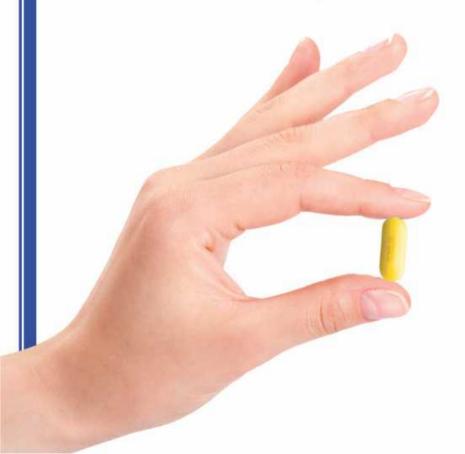
Chronic Kidney Disease is the slow loss of kidney function over time. With loss of kidney function, there is an accumulation of water; waste; and toxic substances, in the body, that are normally excreted by the kidney. Low-protein diets have been one of the cornerstones in the management of chronic kidney disease (CKD) for more than five decades. Apart from mitigating the accumulation of nitrogenous wastes and metabolic disturbances, both of which are characteristic of advanced stages of CKD, such diets also reduce the quantities of sulfates, phosphates, potassium, and sodium ingested, thus leading to a more favorable metabolic profile. Several meta-analyses have indicated the beneficial effect of low-protein diets in retarding the progression of CKD. A low protein diet (0.6 G/Kg BW) and a very low protein diet (0.3 G/Kg BW) supplemented with keto analogues have been shown to be even more efficacious in further improving the benefits of a low protein diet in CKD patients. A keto acid is a compound containing two functional groups, a carboxylic acid group, and a ketone group. It is used as a supplement to LPD and VLPD for patients suffering from CKD.

Introduction

A keto acid is a compound containing two functional groups, a carboxylic acid group, and a ketone group. It is used as a supplement to LPD and VLPD for patients suffering from CKD.

RENOLOG*, the keto acid of La Renon offers the following notable advantages:

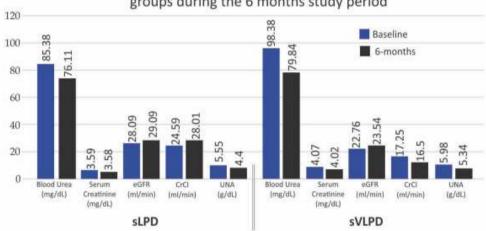
- Reduction of uremic symptom
- Prevents degradation of body protein
- Reduction of proteinuria
- Decreased secondary hyperparathyroidism and renal osteodystrophy
- Normalization of carbohydrate metabolism
- •Improvement of the disturbed serum lipid profile
- Improvement of endocrine disturbances
- Increases the intervals between two dialysis



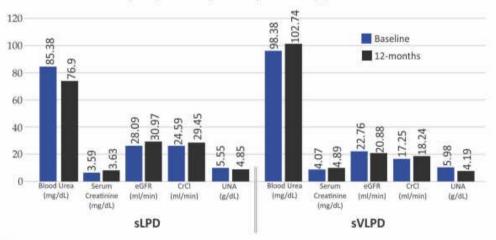
The comprehensive clinical study of RENOLOG® has been done in a total of 178 adult patients with CKD Stages 3-5 (predialysis) and was assessed for 1 year. A total of 122 patients were in the KA-supplemented low-protein diet (sLPD) group and were prescribed 0.6 g/kg body weight (BW) of dietary proteins supplemented with one KA tablet for every 10 kg BW. The remaining 56 patients were in the KA-supplemented very-low-protein diet (sVLPD) group and received 0.3 g/kg BW of dietary protein supplemented with one KA tablet for every 5 kg BW. Renal, metabolic, and nutritional parameters and anthropometric assessments were performed for all patients.

	Parameter	Baseline	6 months	12 months
	Blood Urea (mg/dL)	85.38 ± 40.08	76.11 ± 37.55	76.90 ± 42.90
	Serum Creatinine (mg/dL)	3.59 ± 1.83	3.58 ± 1.87	3.63 ± 2.07
sLDP	eGFR (ml/min)	28.09 ± 15.09	3.58 ± 1.87 29.09 ± 17.76 28.01 ± 20.16	30.97 ± 21.30
	CrCl ((ml/min)	24.59 ± 16.13		29.45 ± 28.16
	UNA (g/dL)	5.55 ± 2.14	4.40 ± 1.54	4.85 ± 1.99

Change in renal function and UNA in the sLPD and sVLPD groups during the 6 months study period



Change in renal function and UNA in the sLPD and sVLPD groups during the 1-year study period



Conclusion

The CrCl showed a marginal increase at the end of 1 year, but this increase was not statistically significant. There was a decrease in urinary protein excretion in both groups. Anthropometric measurement, including Subjective Global Assessment, showed nutritional improvement in both groups. Pearson correlation coefficient between protein intake and urinary nitrogen appearance showed positive correlation between the two groups.

Our study shows clear benefits for the CKD population treated with KAs in delaying and retarding disease progression with stabilization and improvement in nutritional status.

Reference: Hong Kong Journal of Nephrology (2014)16,34-41

RENOLOG®

Description:

RENOLOG® is a golden yellow, pearl coated tablet containing a combination of 5 alpha keto amino acids and 5 essential amino acids. The alpha keto amino acids or hydroxyanalogues are in the form of calcium salts. Therefore allowing reduction in the nitrogen supply and also provides calcium.

Indication:

RENOLOG is indicated for preventing and treating renal damages due to protein metabolism disorder in chronic kidney disease. The results are proven to be better with the intake of low protein diets or very low protein diets. It is usually applied to those that have glomerular filtration rate (GFR) less than 25ml/min and the standard of low-protein diet is 40g/day or less for adults.

Composition:

Each tablet of 686 mg of RENOLOG® contains:

Alpha keto amino acid	S	Essential amino aci	ds
Aka to isoleucine	67mg	L-Lysine HCL	75mg
Aka to leucine	101mg	L-Histidine	38mg
Aka to Phenylalanine	68mg	L-Threonine	53mg
Aka to Valine	86mg	L-Tryptophan	23mg
Aka to methionine	59mg	L-Tyrosine	30mg
Total Nitrogen	36mg/tab		
Total Calcium	50mg/tab		

Mechanism of Action:

RENOLOG® allows the intake of essential amino acids while minimizing the amino-nitrogen intake. Following ingestion, the ketoanalogues are transaminated by taking nitrogen from non-essential amino acids, thereby decreasing the formation of urea by re-using the amino group. The levels of accumulating uremic toxins are decreased. Keto-and/or hydroxy-acids do not elicit hyperfiltration of residual nephrons.

Dosage:

The recommended dose of RENOLOG® is 1tab/5kg body wt. /day. A person weighing 60 kg will require 12 tabs/day.

Presentation:

RENOLOG® is presented as a strip of 10 tablets in Alu-Alu Blister packing.



La Renon Healthcare Pvt. Ltd.