

NOURISH YOUR POTENTIAL



SUGAR FREE ORANGE FLAVOR

LAMINO-BCAA

SACHET

BRANCHED CHAIN AMINO ACIDS WITH ZINC ORAL POWDER

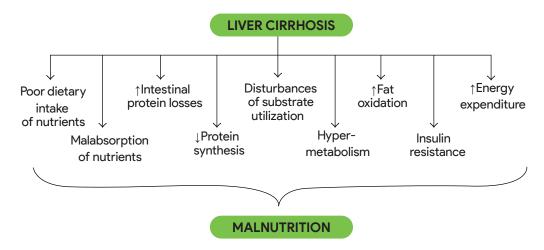


BRANCHED CHAIN AMINO ACIDS WITH ZINC ORAL POWDER

BACKGROUND:

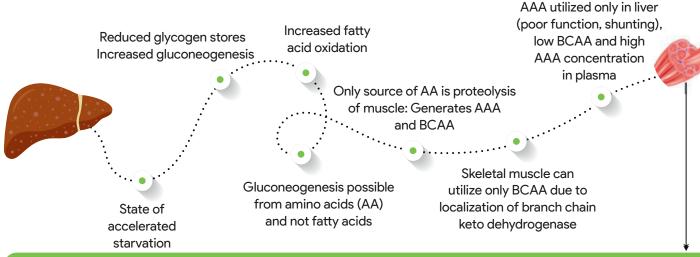
- The liver is a central organ for nutrient metabolism, cirrhotic patients may develop various metabolic complications. Cirrhosis and liver cancer account for 3.5% of all deaths worldwide.¹
- About 80% of visceral protein sources are depleted in malnourished cirrhotic patients.² Patients with cirrhosis often exhibit protein and energy deficiencies, leading to hypoalbuminemia, ascites retention, hepatic edema, reduced fat and muscle mass, muscle weakness, and decreased quality of life (QoL). However, significant improvement in QoL and prognosis in patients with cirrhosis can be achieved through the supplementation of BCAAs and zinc.³

FACTORS CONTRIBUTING TO MALNUTRITION IN END-STAGE LIVER FAILURE 1:



Malnutrition, prevalent in advanced liver disease, approximately 25% of patients experience hepatic encephalopathy (HE), more common in those with severe liver insufficiency and portal-systemic shunts.

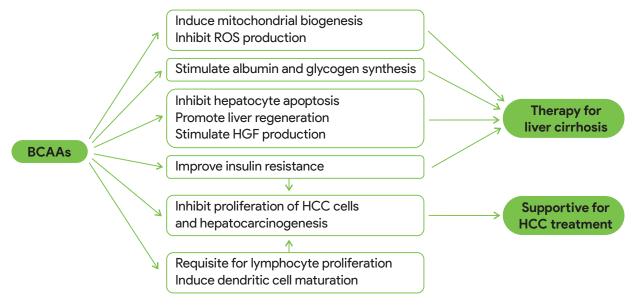
BCAAs IN HEPATIC ENCEPHALOPATHY5:



Hepatic failure reduces aromatic amino acids (AAA) and methionine metabolism, raising their blood levels, while muscle catabolism accelerates, reducing BCAA concentration.

This lowers fischer's ratio, increasing brain uptake of amino acids and neurotransmitter production, leading to encephalopathy.

MECHANISM OF ACTION OF BRANCHED CHAIN AMINO ACIDS IN LIVER DISEASES:7



BCAAs: Branched chain amino acids; ROS: Reactive oxygen species; HGF: Hepatocyte growth factor; HCC: Hepatocellular carcinoma.

CLINICAL EVIDENCE

EFFECTS OF BRANCHED-CHAIN AMINO ACIDS (BCAAs) SUPPLEMENTATION ON THE PROGRESSION OF ADVANCED LIVER DISEASE:⁸

TOTAL PATIENTS: 124

DOSE: 12.45 g of daily BCAAs granules or Regular Diet

DURATION: 6 months

RESULT:

Major cirrhosis-related events in the BCAAs and Control groups			
EVENT	BCAAs (n= 63)	CONTROL (n= 61)	p VALUES
Total events except HCC	14 (29)	37 (61)	0.001
Development or aggravation of ascites	6 (10)	17 (28)	0.017
Hepatic encephalopathy	6 (10)	15 (25)	0.046
Death	6 (10)	9 (15)	0.537

The BCAAs group showed significant improvement in both model for end-stage liver disease (MELD) score (p = 0.009) and Child-Pugh (CP) score (p = 0.011) compared to the control group.

Additionally, the BCAAs group had significantly better cumulative event-free survival compared to the control group (p < 0.001).

CONCLUSION:

Long-term supplementation with oral BCAAs potentially improves liver function and reduces major complications of cirrhosis in patients with advanced liver disease.

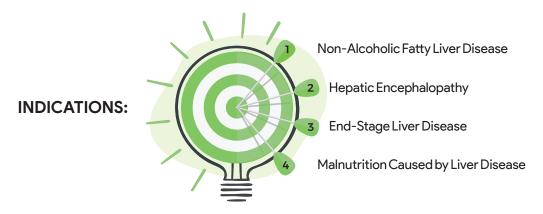
LAMINO-BCAA

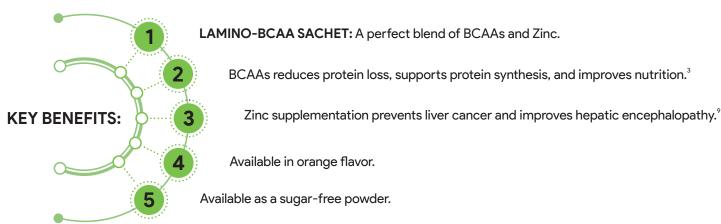
SACHET

BRANCHED CHAIN AMINO ACIDS WITH ZINC ORAL POWDER

DESCRIPTION:

LAMINO-BCAA SACHET, available as an oral powder in a refreshing orange flavor. Each 10 g serving of **LAMINO-BCAA SACHET** contains L-Leucine (2.5 g), L-Isoleucine (1.25 g), L-Valine (1.25 g), and Zinc (13.2 mg), crucial for promoting liver health and reducing cirrhosis complications.





DOSE:

The recommended dose of LAMINO-BCAA SACHET is one sachet per day or as directed by the physician.

PRESENTATION:

LAMINO-BCAA SACHET is available as a 10 gm sachet, such 10 sachets are packed in a carton.

References: 1. Euroasian journal of hepato-gastroenterology. 2020 Jan;10(1):1 | 2. Middle East Journal of Digestive Diseases/ Vol.5/ No.2/ April 2013 | 3. Transl Gastroenterol Hepatol 2018; 3:47 | 4. Journal of nutrition and metabolism. 2010;2010(1):489823 | 5. World J Gastroenterol 2021 August 14; 27(30): 4985-4998 | 6. World J. Med. Sci., 3 (2): 60-64, 2008 | 7. World J Gastroenterol 2013 November 21; 19(43): 7620-7629 | 8. Nutrients 2020, 12, 1429 | 9. Nutrients 2018, 10, 1955



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