



Evaluation of the quality of the parenteral nutrition prepared at the neonatal unit

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Background

Parenteral nutrition (PN) is crucial for hospitalized premature infants. The **quality of the preparations** has a direct impact on the patient's safety.

In our hospital, individualized PN bags for preterm infants are prepared until now partially in the central pharmacy (~2500 per year) and partially at the neonatal unit (~6000 per year).

Purpose

Evaluation of the physicochemical and microbiological quality of the **bags prepared on the ward**.

Material and Methods

- 1. Test for bacterial **endotoxin** by kinetic coloration of LAL (limulus amebocyte lysate)
- 2. Test for **sterility** according to Ph.Eur.(2.6.1)
- Assay of electrolytes (K⁺, Na⁺, Ca²⁺, Mg²⁺) by capillary electrophoresis and glucose by UV (enzymatic method of hexokinase)¹

Results

Para-

meter

K⁺

Na⁺

Ca²⁺

Mg²⁺

Glucose

No perfusion among the 110 PN tested contained **endotoxins** (limit: 2.25 EU/ml). All 78 PN tested were **sterile**.

34% (37 PN) were **not conform** to their medical prescription (90% - 110%).

14% (15 PN) from these 34% were **not acceptable** from a clinical perspective.

Mean

value

97.2%

99.4%

97.5%

95.8%

96.3%

Number

analysis

34/110

14/110

66/110

4/110

110/110

of

Conclusions

- PN bags compounded by nurses of the neonatal unit were quite frequently not accurate on electrolyte or glucose concentrations (14% ≈ 840 bags per year)
- PN bags were sterile and nonpyrogenic
- The **preparation of PN bags** at the **pharmacy** with physicochemical controls before administration seems **unavoidable**





References

J Pharm Biomed Anal. 2010 Oct 10;53(2):130-6: "Determination of potassium, sodium, calcium and magnesium in total parenteral nutrition formulations by capillary electrophoresis with contactless conductivity detection" Nussbaumer et al.

± SD

 $\pm 8.0\%$

 $\pm 11.7\%$

 $\pm 13.7\%$

± 4.5%

 $\pm 8.6\%$