

Prolact CR®
Human Milk Caloric Fortifier



Now with 48-HOUR expiration* and SIMPLIFIED PREPARATION INSTRUCTIONS. Easy to use. Less waste. No more complicated measuring.

Human milk caloric fortifier is ideal for neonatal infants receiving low caloric content. Data show that 65% of the time, term mother's own milk (MOM) is less than 20 Cal/fl oz.¹ Prolact CR® human milk caloric fortifier can meet the need for additional calories.

- Intended for use with MOM or donor milk (DM) to increase lipids and achieve adequate growth
- Formulated to deliver at least 2.5 Cal/mL
- Available frozen in 30 mL bottles containing 10 mL of product (4 bottles per unit carton)

Prolact CR® Macronutrient Information

Formulated to deliver a minimum of 2.5 Cal/mL.
Samples averaged 2.6 Cal/mL as shown below:

	Fat	Carbohydrate	Protein
Averages	25% (w/v) 0.25 g/mL (x9 Cal/g = 2.25 Cal/mL)	7% (w/v) 0.07 g/mL (x4 Cal/g = 0.28 Cal/mL)	0.8% (w/v) 0.01 g/mL (x4 Cal/g = 0.04 Cal/mL)
Total: 2.57 Cal/mL			



Prolacta®
BIOSCIENCE
Advancing the Science of Human Milk

*In-use expiration, once the thawing process begins

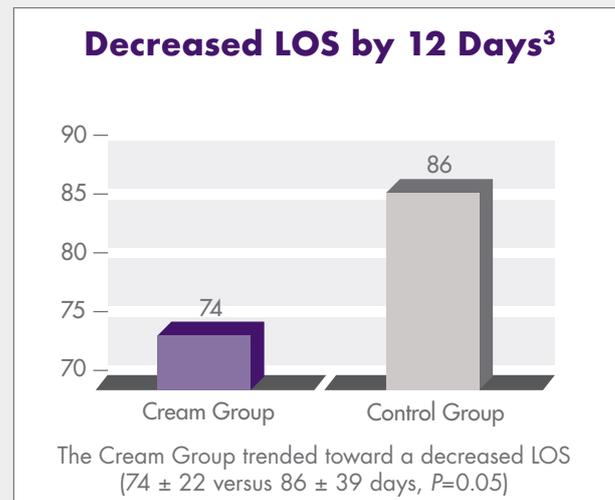
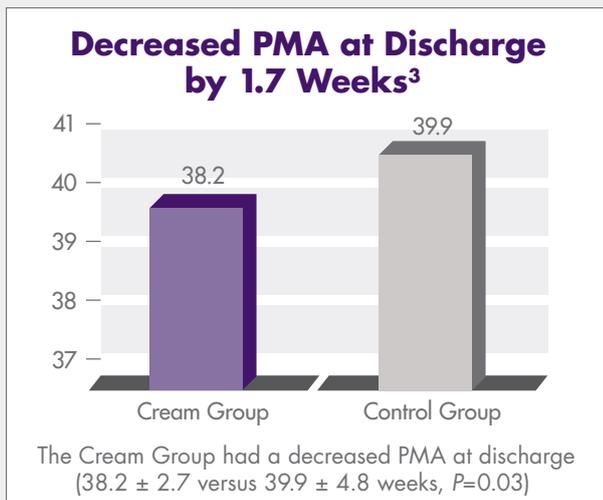
Prolacta CR® human milk caloric fortifier is the only completely human solution created to add calories to MOM or DM without substantially increasing volume and without introducing a non-human milk-based nutritional product.

A randomized clinical trial found that premature infants who received an exclusive human milk diet (EHMD) with Prolacta CR fortifier had superior length and weight velocity compared to infants who received an EHMD without Prolacta CR fortifier.²

Comparison of Growth Velocities			
	Control Group (n=39)	Cream Group (n=39)	P Value
Length Velocity (cm/week)	0.83 ± 0.41	1.03 ± 0.33	0.02
Weight Velocity (g/kg/day)	12.4 ± 3.9	14.0 ± 2.5	0.03

Table is adapted from a 2014 study by Hair et al in *The Journal of Pediatrics*.²

Preterm infants who received Prolacta CR fortifier had a significantly earlier post-menstrual age (PMA) at discharge and trended toward decreased length of stay (LOS) when compared to those who did not receive Prolacta CR fortifier.^{3,*}

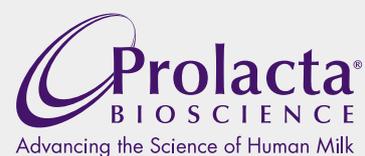


This study is a subset analysis of data originally published in 2014 by Hair et al in *The Journal of Pediatrics*.

References:

1. Wojcik K, et al. Macronutrient analysis of a nationwide sample of donor breast milk. *J Am Diet Assoc.* 2009;109(1):137-140. doi:10.1016/j.jada.2008.10.008.
2. Hair AB, et al. Randomized trial of human milk cream as a supplement to standard fortification of an exclusive human milk-based diet in infants 750-1250 g birth weight. *J Pediatr.* November 2014;165(5):915-20. doi:10.1016/j.jpeds.2014.07.005.
3. Hair AB, et al. Premature infants 750-1250 g birth weight supplemented with a novel human milk-derived cream are discharged sooner. *Breastfeed Med.* 2016;11(3):133-137. doi:10.1089/bfm.2015.0166.

* Results were significant after adjusting for whether the baby had BPD, their gestational age, and their birth weight.



For complete information on Prolacta's Human Milk Caloric Fortifier call 1-888-PROLACT (1-888-776-5228) www.Prolacta.com/human-milk-caloric-fortifier