

Tolerability and Safety of a Semi-Elemental Enteral Formula with Partially Hydrolyzed Guar Gum (PHGG) in Tube-Fed Children Aged 1–4 Years:

An Open-Label, Single-Arm Study*

Materials & methods

A multicenter, open-label, single-arm study was conducted in three pediatric gastroenterology centers.

Administered formula for the study:

Continous or bolus feeding via a nasogastric tube or feeding gastrostomy Partially hydrolyzed whey formula 12g/L of PHGG fiber

24 children For 7

1 to 4 years

requiring tube feeding to provide ≥80% of their nutritional needs All children

had underlying neuro-developmental disabilities 70.8%

requiring treatment for constipation

66.7%

requiring treatment for gastro-esophageal reflux

Main results

- 82.6% of subjects tolerate the fomula well
- 103.5% energy intake across the 7-day period
- 139.5% protein intake across the 7-day period
- Weight remained stable over the 7-day period (p=0.43)
- Shift towards softer and more frequent stools
- Pre-existing constipation was generally well controlled
- 18.7% subjects ceased laxatives during the study
- Stool characteristics

Starting from Day 4, no participant experienced very hard or hard stools (Bristol Stool Scale type 1 or 2). The percentage of subjects with normal stools went from 21.8% on Day 1 to 38.9% on Day 7.

Discussion

Constipation was well controlled in all children within **3 days of formula intake**. PHGG increases fecal moisture and output, 1,2,3,4 which promotes colonic peristalsis and facilitate defecation. 5

PHGG intake in the present study, which averaged 12 g/day, is aligned with the recommendations. The study product has one of the **highest fiber contents**, **among currently available pediatric enteral nutrition formulas**. Fiber-naïve children, or those usually consuming low-fiber diets, may benefit from a **gradual introduction of fiber**, including PHGG. This approach may **facilitate progressive gastrointestinal adaptation** and **less risk** for developing gastrointestinal intolerance symptoms.⁶

Conclusions

This is the first study to assess the safety and tolerability of a PHGG-enriched formula in young tube-fed children aged 1–4 years. The study formula was generally well tolerated and provided adequate nutrition. The formula was associated with a shift towards softer and more frequent stools in a population with a high prevalence of constipation. Therefore, the formula may have a role in the clinical management of chronic constipation and may enable a reduction in laxative treatment in some patients. A gradual introduction of the formula may reduce the risk of gastrointestinal intolerance symptoms, especially among 'fiber-naïve' patients.

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