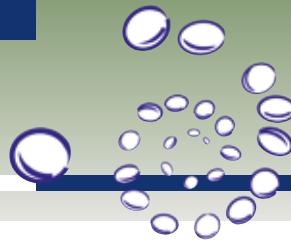


Phenylalanin⁵⁰ minis



In Short

- Phenylalanin⁵⁰ minis are a Food for Special Medical Purposes (FSMP) for use in the dietary management of rare metabolic disorders, e.g. Tyrosinemia, Alkaptonuria or FARS2 Deficiency, when supplementation with L-Phenylalanine is indicated
- highly concentrated, pressed and coated L-Phenylalanine – in tablet form
- easy to swallow – easy application
- neutral in smell and taste
- 50 mg (0,3 mmol) L-Phenylalanine per tablet – 100 g tin at 500 tablets
- Cave: Phenylalanin⁵⁰ minis must not be confused with XPhen minis

Product Profile

Phenylalanin⁵⁰ minis are highly concentrated L-Phenylalanine in tablet form – pressed and coated.

Phenylalanin⁵⁰ minis allow a tasteless intake of this L-amino acid.

Due to their dosage form they offer a convenient alternative, flexible and easy to take and simple to measure out.

Phenylalanin⁵⁰ minis are not fortified with micronutrients.

Indication Phenylalanin⁵⁰ minis are used in the dietary management of e.g. Tyrosinemia, in order to avoid too low Phe levels caused by the low Phenylalanine and low Tyrosine diet. Decreased Phe levels can lead to e.g. impaired growth or neurocognitive deficits (e.g. in Tyrosinemia type I).

Cave: Phenylalanin⁵⁰ minis are not to be confused with XPhen minis, because XPhen minis do not contain L-Phenylalanine and they are intended for use in the dietary management of PKU/HPA.

Dosage The daily dosage depends on age, body weight and individual medical condition and is, just as the right time for the daily intake, determined under medical supervision.

Phenylalanin⁵⁰ minis can easily be combined with the products of the ZeroTP-system.

Important Notice Must only be used under medical supervision. Not for use as a sole source of nutrition. For enteral use only. Only for people with rare metabolic disorders, e.g. Tyrosinemia, Alkaptonuria or FARS2 Deficiency. Phenylalanin⁵⁰ minis are not suitable for infants in the first year of life.

References:

- de Laet et al. (2013) Recommendations for the management of tyrosinaemia type 1; Orphanet Journal of Rare Diseases (8):8. doi: 10.1186/1750-1172-8-8.
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- Konolova et al. (2013) Mitochondrial aminoacyl-tRNA synthetases in human disease; Molecular Genetics and Metabolism 108(4):206-11. doi: 10.1016/j.ymgme.2013.01.010. Epub 2013 Jan 26.
- Oswald et al. (2023) Treatment of Mitochondrial Phenylalanyl-tRNA-Synthetase Deficiency (FARS2) with Oral Phenylalanine; Neuropediatrics 54(5):351-355. doi: 10.1055/a-2008-4230. Epub 2023 Jan 5.
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- van Vliet et al. (2015) Infants with Tyrosinemia Type 1: Should phenylalanine be supplemented? Journal of Inherited Metabolic Disease reports 2015:18:117-24. doi: 10.1007/8904_2014_358. Epub 2014 Sep 26.
- Wilson et al. (2000) Phenylalanine supplementation improves the phenylalanine profile in tyrosinaemia; Journal of Inherited Metabolic Disease 23(7):677-83. doi: 10.1023/a:1005666426079.

Function Phenylalanin⁵⁰ minis are suitable for prevention or correction of disease related L-Phenylalanine deficiencies.

NUTRITION INFORMATION			
Phenylalanin ⁵⁰ minis			
	100 g	0,20 g (1 tablet)	
Energy	kJ 1419	3	
	kcal 336	0,7	
Fat	g 1	<0,1	
of which saturates	g 1	<0,1	
Carbohydrate	g 53	0,1	
of which sugars	g 3	<0,1	
Fibre	g 17	0,03	
Protein eqv.	g 21	0,04	
of which L-Phenylalanine	g 25	0,05	
	mmol 0,3		
Salt	g 0	0	

INGREDIENTS

Maltodextrin, L-phenylalanine, bulking agent: microcrystalline cellulose, anti-caking agent: calcium silicate & magnesium stearate & magnesium carbonate & calcium phosphate, glazing agents: E 464 & E 463.

Delivery Unit	tin 500 tablets = 100 g
Article Number	xx-001-31796
Delivery to	Pharmacies, clinics
Storage	Store in a cool, dry place.