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The estimate for adequate copper intake in inpatients with enteral liquid foods

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Abstract:

Hypocupremia occurred often by long-term administration of copper (Cu) — poor conventional liquid foods in elderly inpatients with cerebrovascular events. Therefore, new enteral liquid foods such as L-6PM plus and L-8 (Asahi Kasei Pharma) were administrated to improve hypocupremia. 10 inpatients (2 men, 8 women) aged 73 ± 15 years ($M \pm SD$) were recruited, who had received conventional enteral liquid foods. Of these 10 inpatients 6 ones showed hypocupremia and 4 ones showed normocupremia. For 6 ones with hypocupremia L-8 increased significantly to normocupremia during 2 to 6 months of observation (Fig. 1). For 4 ones with normocupremia L-8 made serum Cu within normal range during 6 months (Fig. 1). Serum ceruloplasmin (CEP) showed almost same tendency as serum Cu by administration of L-8 (Fig. 2). The inpatients with hypocupremia as base line ingested daily mean 950 kcal and mean 0.76 mg of Cu for 6 months, when ones with normocupremia ingested 975 kcal and 0.78 mg of Cu. However, serum zinc (Zn) and iron (Fe) did not change significantly for 6 months by L-8. From these above findings daily 0.8 mg of Cu per 1, 000 kcal was estimated to be adequate in elderly bedridden inpatients with cerebrovascular events.

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