

In this example, the protein source comprises essentially 100% hydrolysed whey protein. The carbohydrate source preferably includes approximately 70% to 95% maltodextrin, from about 5% to 15% corn starch, and up to about 20% sucrose; all % being on the basis of energy. Lastly, the lipid source preferably includes approximately 70% MCTs, approximately 17% soybean oil; approximately 8% residual milk fats; and approximately 5% soy lecithin; all % being on the basis of weight.

EXAMPLE 2

The composition of example 1 is evaluated in a group of severely traumatised patients requiring early enteral feeding. Patients are fed by small bowel feeding tubes. The goal of this early feeding is to supply at least 60% of their calculated energy needs. The primary data collected to evaluate this early feeding is to determine the tolerance to early and fairly aggressive feeding. Gastrointestinal symptoms such as diarrhoea, bloating and cramping are tabulated and evaluated. Actual intake as a percentage of calculated energy requirements is calculated for each patient on each day of feeding for five consecutive days. The nutritional goals set are 25 kcal/kg of estimated body weight/day and 1.6 grams of protein/kg/day.

Eighteen (18) patients are entered into the study and 16 of these patients complete the 5 days of feeding. For the first 24 hours of feeding, the average intake for the 16 patients is $65 \pm 12\%$ of the calculated nutritional requirement. The intake over the first 48 hours of feeding is $68 \pm 8\%$ of requirements. Over the first 72 hours of feeding, the average intake is $73 \pm 6\%$ of requirements and for the first 96 hours of feeding, the mean intake typically rises to $87 \pm 6\%$ of requirement. Over the full five days of feeding evaluation, the average intake is $92 \pm 7\%$ of the calculated energy requirements for the 16 patients who completed the fall study period. Diarrhoea develops in only one patient in the group and this generally persists for approximately 18 hours. No other gastrointestinal symptoms would typically be reported during the study period.

It should be understood that various changes and modifications to the presently preferred embodiments described herein will be apparent to those skilled in the art. Such changes and modifications can be made without departing from the spirit and scope of the invention and without diminishing its attendant advantages. It is therefore intended that such changes and modifications be covered by the appended claims.

What is claimed is:

1. An enteral composition designed for metabolically stressed patients comprising:

a protein source consisting essentially of whey and providing about 15% to about 20% of the energy of the composition, and wherein said protein source is the sole protein source of the composition;

a carbohydrate source; and

a lipid source including a mixture of medium and long chain triglycerides, the enteral composition having a caloric density of at least about 1.4 kcal/ml.

2. The enteral composition of claim 1 wherein the protein source consists essentially of partially hydrolysed whey proteins.

3. An enteral composition for a metabolically stressed patient comprising a protein source providing about 15% to about 20% of the energy of the composition, the protein source consisting essentially of partially hydrolysed whey protein, and wherein said protein source is the sole protein source of the composition;

a carbohydrate source; and

a lipid source including a mixture of medium and long chain triglycerides;

the composition having an energy density of about 1.5 kcal/ml and a ratio of non-protein calories per gram of nitrogen of at least about 90:1.

4. The enteral composition of claim 3 wherein the lipid source provides about 20% to 50% of the energy of the composition.

5. The enteral composition of claim 3 which includes at least about 100% of U.S. RDA of vitamins and minerals in about 1500 kcal.

6. The enteral composition of claim 3 wherein the composition includes per 1500 kcal of composition:

a zinc source providing from approximately 28.5 to 43.5 mg;

a vitamin C source providing from approximately 405 to 615 mg;

a selenium source providing from approximately 60 to 90 mg;

a taurine source providing from approximately 120 to 180 mg; and

a L-carnitine source providing from approximately 120 to 180 mg.

7. The enteral composition of claim 3 further including a source of β -carotene.

8. The enteral composition of claim 3 which has an energy density of about 1.4 to about 1.8 kcal/ml.

9. A method for providing nutrition to a metabolically stressed patient comprising the step of administering to the patient a therapeutically effective amount of a composition comprising:

a protein source consisting essentially of whey and comprising approximately 15% to about 20% of the energy of the composition, and wherein said protein source is the sole protein source of the composition;

a carbohydrate source; and

a lipid source including a mixture of medium and long chain triglycerides, the enteral composition having a caloric density of at least about 1.4 kcal/ml.

10. The enteral composition of claim 1 wherein the lipid source provides about 20% to 50% of the energy of the composition.

11. The enteral composition of claim 1 which includes at least about 100% of U.S. RDA of vitamins and minerals in about 1500 kcal.

12. The enteral composition of claim 1 wherein the composition includes per 1500 kcal of composition:

a zinc source providing from approximately 28.5 to 43.5 mg;

a vitamin C source providing from approximately 405 to 615 mg;

a selenium source providing from approximately 60 to 90 mg;

a taurine source providing from approximately 120 to 180 mg; and

a L-carnitine source providing from approximately 120 to 180 mg.

13. The enteral composition of claim 1 further including a source of β -carotene.

14. The enteral composition of claim 1 which has an energy density of about 1.4 to about 1.8 kcal/ml.