Sir,

**Use of Intravenous Fat Emulsions in Adult Critically ill Patients: Does omega 3 make a difference?: Response letter to the editor**

We have read with interest the letter to the editor by Norbert Nagel and Anna Harder from B Braun Melsungen AG, commenting on Table 2: “Charactertistics of commercially available intravenous lipid emulsions used in reported randomized controlled trials”.

We acknowledge the amount of EPA and DHA for SMOFlipid and Lipoplus 20% is a controversial topic as different values have been published by various authors as alluded to by Nagel and Harder. Kreymann et al. 20171 also documented the variations in EPA and DHA values in the different lipid emulsions and chose to report a range, as opposed to absolute values, due to the variation in the fish oils used for production. This variation was also demonstrated in the Driscoll et al. 2009 publication2.

In order to obviate such controversies in the literature, we agree that it might be preferable to report ranges rather than absolute values.



2. Driscoll, DF, Ling, P-R, Bristrian BR. Pharmacopeial compliance of fish oil-containing

parenteral lipid emulsions mixtures: Globule size distribution (GSD) and fatty acid analyses.

International Journal of Pharmaceutics. 2009:379:125-130

1. Kreymann KG, Heyland DK, de Heer G, Elke G. Intravenous fish oil in critically ill and surgical patients - Historical remarks and critical appraisal. Clin Nutr. <http://dx.doi.org/10.1016/j.clnu.2017.07.006>

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