

Breast Milk ^{is} the **Best**



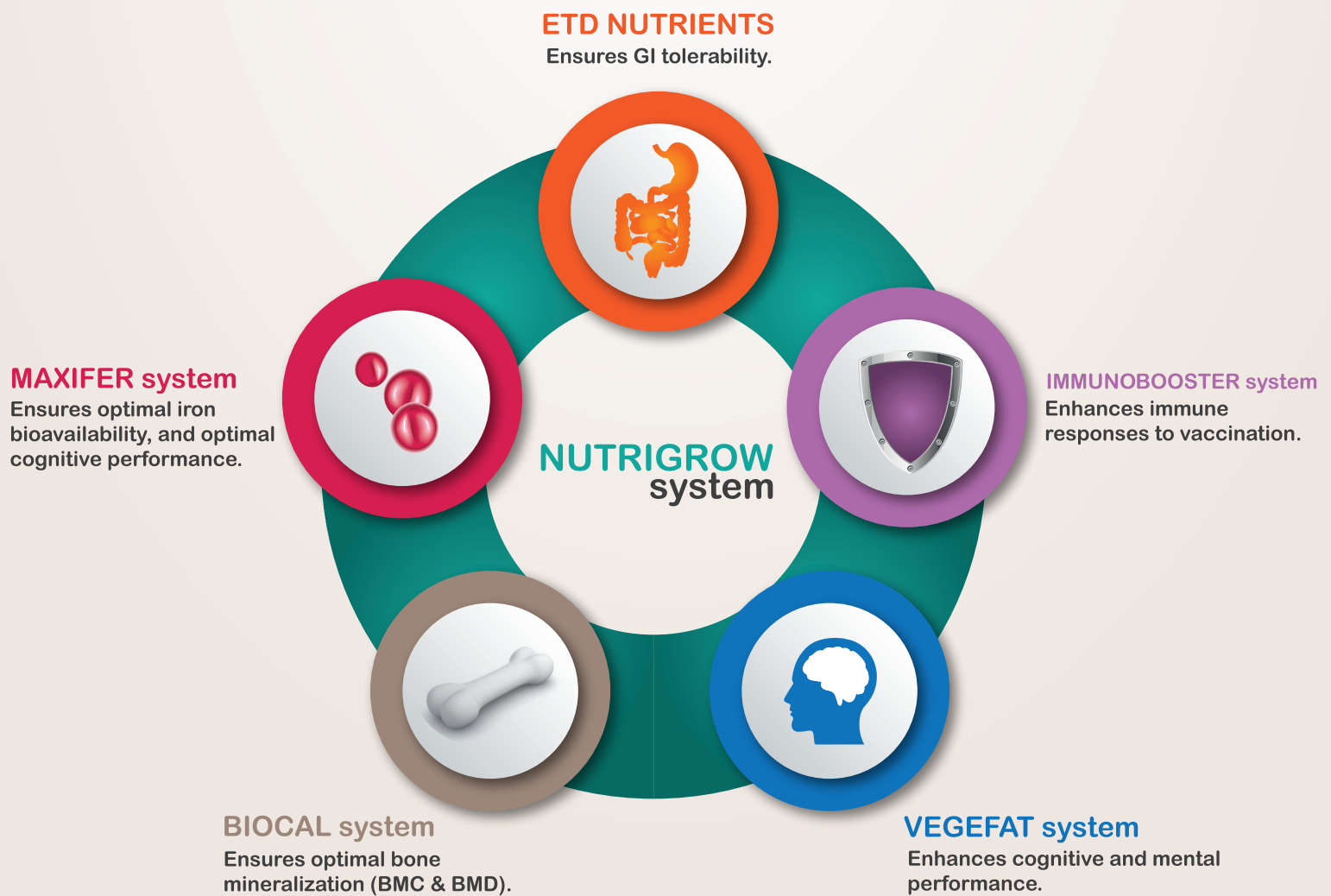
 **Ronesca**

However if it isn't available - Ronalac, closer than ever to Breast Milk.

The PENTA Synergy of NUTRIGROW system

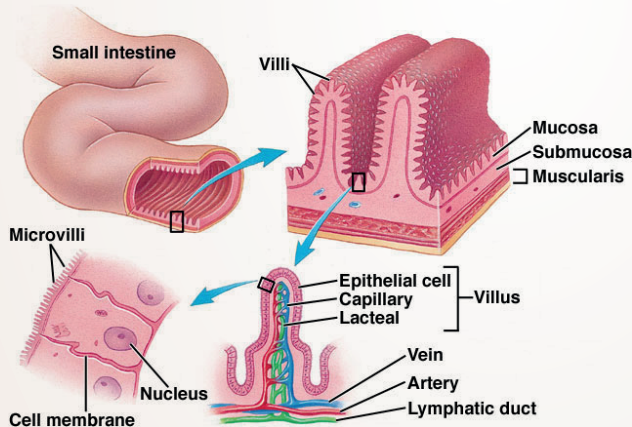
Breast feeding is the optimal source of infant nutrition, ⁽¹⁾

RONALAC with NUTRIGROW system provides optimal choice for growth and development



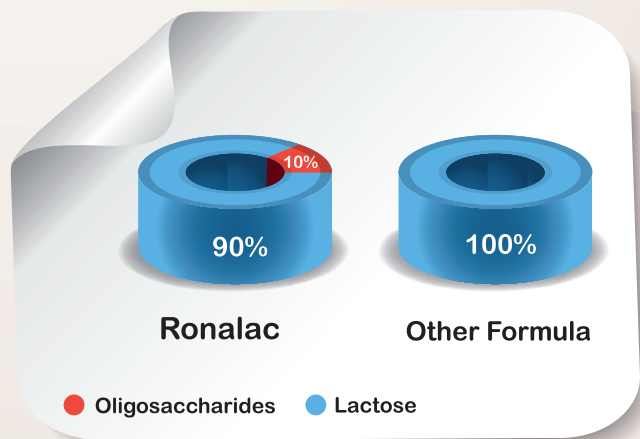
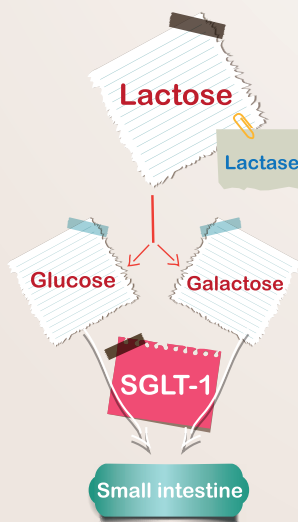
Ronalac, Ensures Optimal GI tolerability

Lactose is the predominant carbohydrates in breast milk, and lactose mal-absorption is a very common condition characterized by intestinal lactase deficiency.

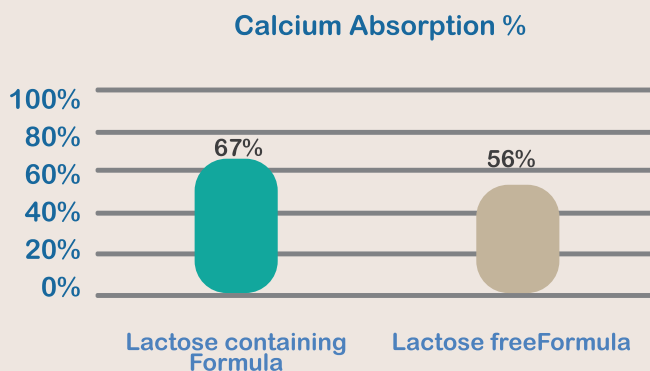


Due to GI immaturity, lactase isn't sufficient to digest lactose and results in abdominal discomfort. (2)

ETD DICARB ensures optimal lactose digestion and abdominal comfort



ETD DICARB ensures optimal calcium absorption

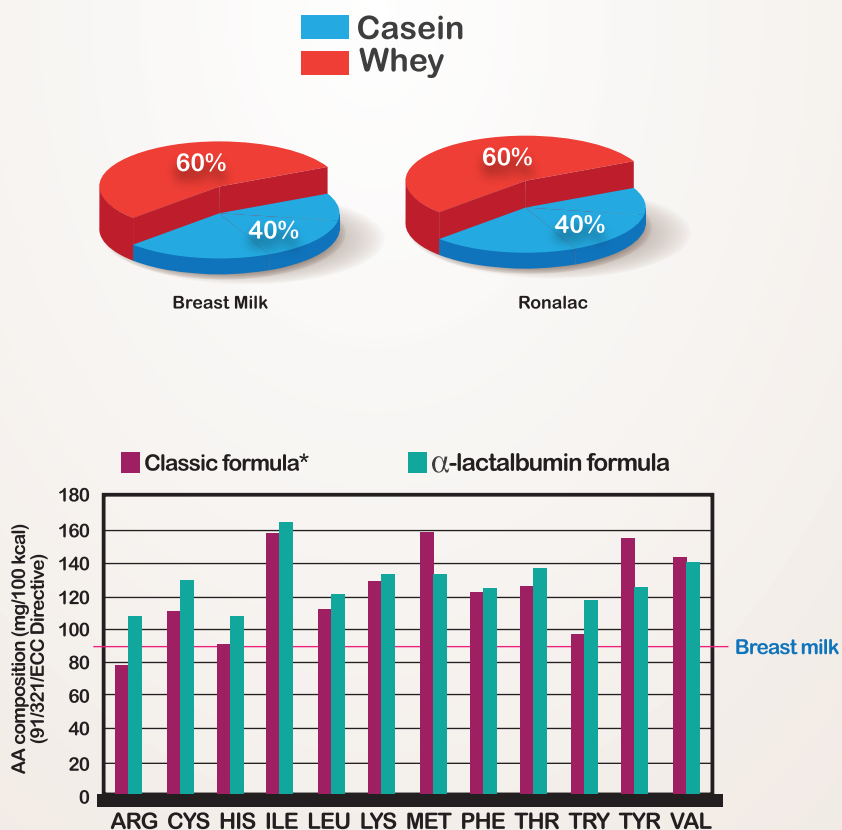


Calcium absorption was significantly greater in lactose-containing formula more than lactose-free formula. (3)

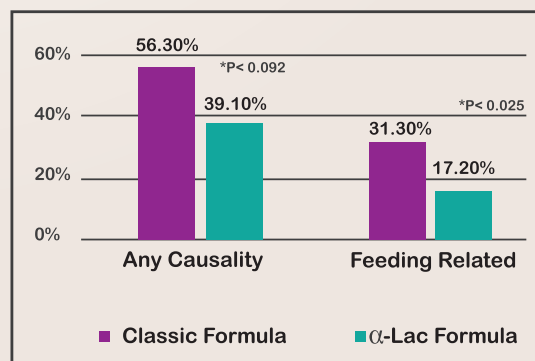
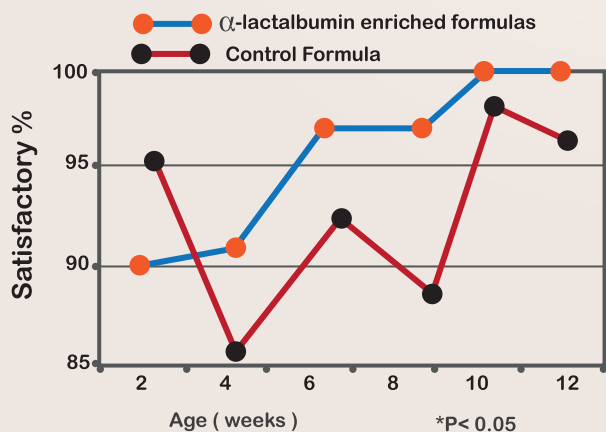


Ronalac, Ensures Optimal & Unique Protein Profile

ETD α -PRO ensures optimal protein digestion, EAA profile, and GI tolerability. (4,5)



ETD α -PRO with α -lactalbumin reduces renal stress on immature kidney (6,7)



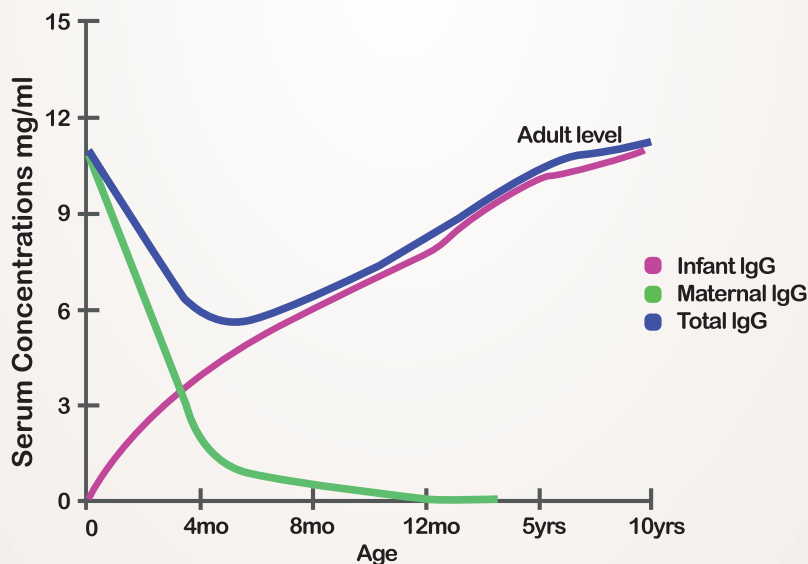
α -lactalbumin enriched formula had higher acceptability.

α -lactalbumin enriched formula had higher tolerance satisfactory and showed 45% less GI adverse events.



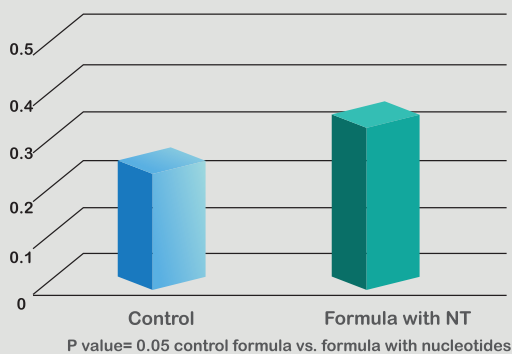
Ronalac, Ensures Optimal Immune Response

Antibodies are produced by the mother's immune system and then transported across the placenta to the fetus, then gradually go down after birth (6-8months).

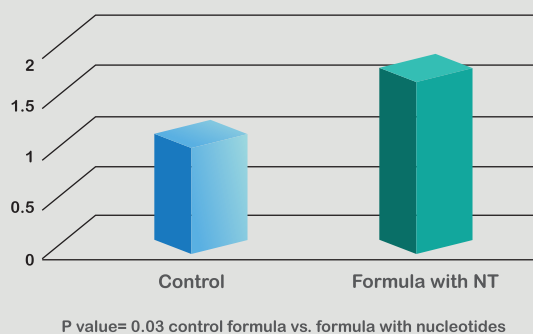


IMMUNOBOOSTER system enhances immune responses to vaccination.

Antibody (IgG) Conc. (IU/ml) to diphtheria toxoid at 7months (1 month after the 3rd dose)



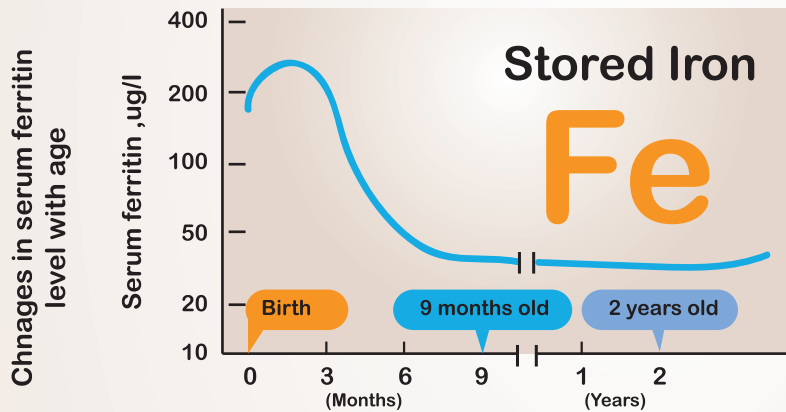
Antibody (IgG) Conc. (IU/ml) to tetanus toxoid at 7months (1 month after the 3rd dose)



"In this RCT, the antibody responses to tetanus and diphtheria toxoid vaccines were higher in the nucleotides supplemented group compared with control group." (8)

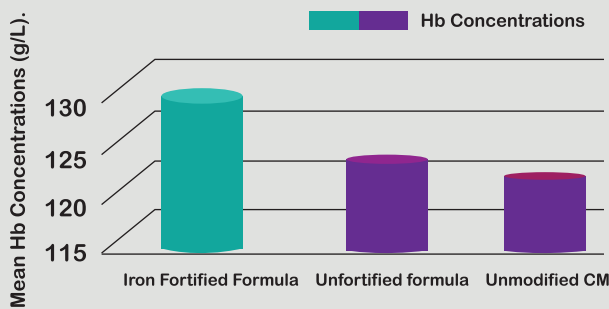


Ronalac, Ensures Optimal Minerals Absorption

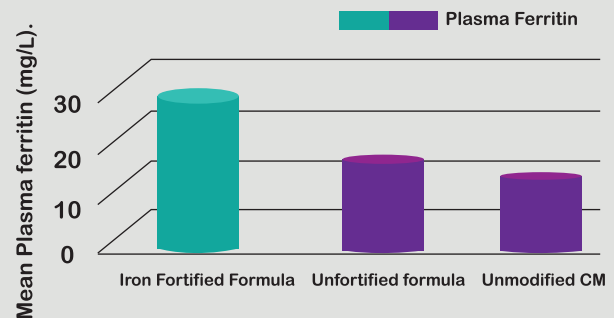


Baby's stores of iron runs low and iron deficiency can easily increase the risk of iron deficiency anemia during this period,

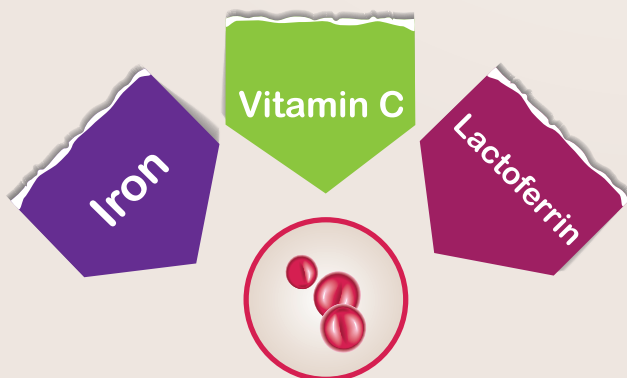
In a randomized trial by Morley et.al to compare the effects of iron fortified formulas on iron status at 18 months,



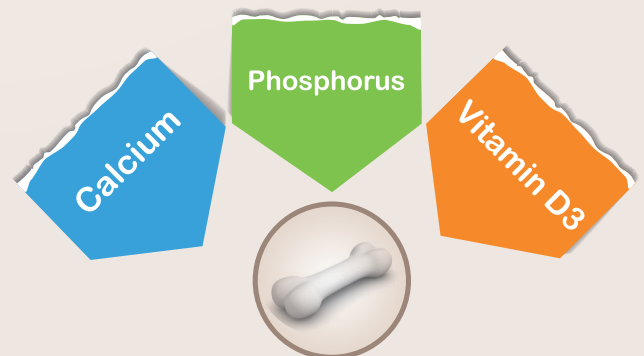
Mean Hb concentrations were significantly higher in the iron-fortified group compared to the other groups (9)



Mean plasma ferritin was significantly higher in the iron-fortified group compared to the other groups (9)



MAXIFER system ensures optimal iron bioavailability, and optimal cognitive performance.



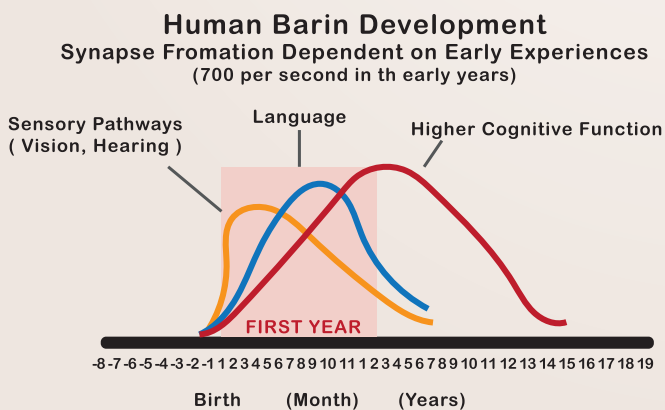
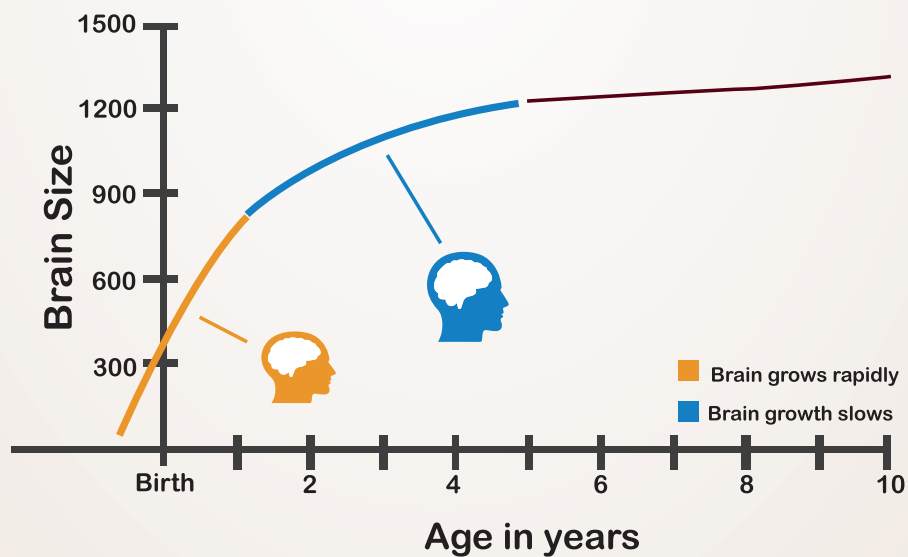
BIOCAL system ensures optimal bone mineralization (BMC & BMD).



Ronalac, Ensures Optimal Mental & Visual Development

Early childhood is the most and rapid period of development in life.

Brain of a new born doubles in size at the first year, thus adequate nutrition positively affecting brain development and optimal cognitive performance.



“Many studies showed that infants received LCPUFA performed significantly better on the Verbal IQ subscale, and the differences were nearly significant for Full-Scale IQ”.

VEGEFAT system enriched with Ω -3 and Ω -6 LCPUFA

- Optimal fat digestion and GI tolerability.
- Optimal cognitive and mental performance.



Ronalac, with NUTRIGROW system ensures Optimal Growth, Development & Protection

Ronesca commits strictly to the regulations of ESPGHAN and CODEX, under the highest French standards of quality management and manufacturing experiences.

Ronesca maintains optimal quality from raw ingredients to finished products.

Ronalac ensures optimal growth and development

- Optimal Growth Rate.
- Optimal GIT Tolerability
- Optimal Bone Mineralization.
- Optimal Immune Response and Protection.
- Optimal Mental, Visual and Psychomotor Development.



MADE IN FRANCE

WHO recommends exclusive breastfeeding for the first six months of life, after which infants should receive nutritionally adequate and safe complementary foods while breastfeeding continues for up to two years of age or beyond.

References

1. World Health Organization. (2003). Global strategy for infant and young child feeding. Geneva, Switzerland: World Health Organization and UNICEF. ISBN 92-4-156221-8. 2. The carbohydrate composition of human milk. Kunizhev SM, Chepurno: IP, Ladodo KS, Gribakin SG, Khodzhibekova NA. Voprosy Pitaniia. 1985 Jul-Aug;(4):69-71.3. Steven A Abrams, Ian J Griffin, and Penni M Davila, Calcium and zinc absorption from lactose-containing and lactose free infant formulas. Am J Clin Nutr 2002;76:442-6.4. Kunz C, Lönnerdal B. Re-evaluation of the whey protein/casein ratio of human milk. Acta Paediatr 1992;81:107-12. 5. Lönnerdal B. Biochemistry and physiological functions of human milk proteins. Am J Clin Nutr 1985;42:1299-1317. 6. AM Davis, BJ Harris, EL Lien, K Pramuk and J Trabulsi, α-Lactalbumin-rich infant formulae fed to healthy term infants in a multicenter study: plasma essential amino acids and gastrointestinal tolerance, USA and Department of Food Science and Human Nutrition, University of Illinois, Urbana, IL, USA, European Journal of Clinical Nutrition (2008) 62, 1294–1301. 7. ESPGHAN guidelines in infant nutrition, recommendations for the composition of adapted formula, J Pediatr Gastro Nutr 2005. 8. JS Hawkes, RA Gibson D Robertson and M Makrides, Child Health Research Institute, Flinders Medical Centre and Flinders University, Bedford Park, SA, Australia; Child Health Research Institute, Women's and Children's Hospital, North Adelaide, SA, Australia and Department of Pediatrics, University of Adelaide, SA, Australia, Effect of dietary nucleotide supplementation on growth and immune function in term infants: a randomized controlled trial, European Journal of Clinical Nutrition (2006) 60, 254–264. 9. Morley R, et al. Iron fortified formula from 9 to 18 months improves iron status but not development or growth: a randomized trial. Arch Dis Child 1999;81:247–52.