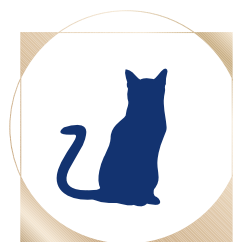




PRODUCT Book

— Document exclusively aimed at veterinarians and vet clinics. —



Canine & Feline

CHECK WITH YOUR LOCAL REGULATORY BEFORE USE

JANUARY 2019

VETERINARY DIET

FELINE



Index of health issues

Monofunction diets

Multifunction diets

Analysis tables



Index of health issues



PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

A	Adverse Food Reactions (AFR: Food allergy/Food intolerance)		-HYPOALLERGENIC feline		
			-SENSITIVITY CONTROL feline		
			-ANALLERGENIC feline		
	Ascites	With heart failure		-RENAL feline	
		With hypoproteinemia	Lymphangiectasia (protein losing enteropathy)	-SATIETY feline	
					-OBESITY feline
			Liver disease		-HEPATIC feline
	Protein losing nephropathy		-RENAL feline		
Atopy			<i>see dermatitis</i>		

C	Cachexia		-CONVALESCENCE SUPPORT
			-RECOVERY feline
			-GASTRO-INTESTINAL feline
			-RECOVERY LIQUID 1 Kcal/ML
	Cancer		<i>see neoplasia</i>
	Chronic Kidney Disease (CKD)		-RENAL feline
			-RECOVERY LIQUID 1 Kcal/ML
	Concomitant with Adverse Food reactions		-MULTIFUNCTION feline GFR-AFR
Colitis			<i>see diarrhea</i>

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

C	Constipation	Responsive to dietary fibre	-FIBRE RESPONSE feline
		Non responsive to dietary fibre	-GASTRO-INTESTINAL feline
			-CONVALESCENCE SUPPORT
	Convalescence		-CONVALESCENCE SUPPORT
			-RECOVERY
			-GASTRO-INTESTINAL feline
			-REHYDRATION SUPPORT
			-RECOVERY LIQUID 1 Kcal/ML
D	Dermatitis	Cutaneous Adverse Food Reactions (CAFR)	-HYPOALLERGENIC feline
			-SENSITIVITY CONTROL feline
		Concomitant with Chronic Kidney Disease	-MULTIFUNCTION feline GFR-AFR
		Concomitant with urolithiasis	-MULTIFUNCTION feline S/O-AFR
		Atopic dermatitis	-HYPOALLERGENIC feline
			-ANALLERGENIC feline
			-MULTIFUNCTION feline S/O-AFR
	Diabetes mellitus		-DIABETIC feline
		If weight loss is sought	-SATIETY feline
			-OBESITY feline



PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

D	Diarrhea	Acute diarrhea		-GASTRO-INTESTINAL feline		
				-GASTRO-INTESTINAL HIGH ENERGY LIQUID		
				-REHYDRATION SUPPORT		
		Chronic diarrhea	Non-specific or unknown etiology	-GASTRO-INTESTINAL feline		
				-GASTRO-INTESTINAL HIGH ENERGY LIQUID		
			Group of chronic enteropathies / inflammatory bowel disease	Food responsive diarrhea	-HYPOALLERGENIC feline	
					-ANALLERGENIC feline	
					-SENSITIVITY CONTROL feline	
				Antibiotic responsive diarrhea: (in adjunction to adequate antibiotherapy)	-GASTRO-INTESTINAL feline	
					Immunosuppressive drug responsive diarrhea : (in adjunction to anti-inflammatories/ immunosuppressors)	-GASTRO-INTESTINAL feline
						-HYPOALLERGENIC feline
				-SENSITIVITY CONTROL feline		
				Lymphangiectasia (protein losing enteropathy)	-SATIETY feline	
		-OBESITY feline				
		Small intestinal bacterial overgrowth (SIBO)	-GASTRO-INTESTINAL feline			
Enteritis associated with hepatitis/pancreatitis		see triaditis				
E	Enteropathies (chronic enteropathies)		see diarrhoea (chronic diarrhoea)			
	Exocrine pancreatic insufficiency (EPI): (in adjunction to digestive enzyme treatment)		-GASTRO-INTESTINAL feline			
			-HYPOALLERGENIC feline			
			-GASTRO-INTESTINAL HIGH ENERGY LIQUID			

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

F	FIC (Feline Idiopathic Cystitis) (together with environmental measures)			-MULTIFUNCTION feline S/O-Biopeptide dry or wet
				-URINARY S/O wet feline
	Food allergies/ Food intolerances			see Adverse Food Reactions
	Food elimination trial			-HYPOALLERGENIC feline -SENSITIVITY CONTROL feline
G	Gastric disorders	Delayed gastric emptying		-GASTRO-INTESTINAL feline Moderate Calorie
				-GASTRO-INTESTINAL LOW FAT LIQUID
	Gastritis, gastric and/or duodenal ulcer			-ANALLERGENIC feline
				-HYPOALLERGENIC feline
				-SENSITIVITY CONTROL feline
				-GASTRO-INTESTINAL feline
				-GASTRO-INTESTINAL LOW FAT LIQUID
				-GASTRO-INTESTINAL HIGH ENERGY LIQUID
	Gastro-enteritis			see diarrhea
H	Heart disease/failure			-RENAL feline
	Hepatic disease	Hepatitis	Acute hepatitis	-CONVALESCENCE SUPPORT
			Chronic hepatitis	-HEPATIC feline
			If associated with enteritis/pancreatitis	see triaditis
		Portosystemic shunt		-HEPATIC feline
		Hepatic encephalopathy		-HEPATIC feline -RENAL LIQUID 1.5 KCAL/ML
		Hepatic lipodosis		-RECOVERY
				-CONVALESCENCE SUPPORT
			If signs of encephalopathy	-HEPATIC feline

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H	Hyperlipidemia (fasting hyperlipidemia)		-SATIETY feline
			-OBESITY feline
	Hyperthyroidism (in adjunction to antithyroid treatment/ Radioactive iodine)	With chronic kidney disease (CKD)	No specific therapeutic diet VCN Senior Consult Stage 2 High Cal
	Hypertension		-RENAL feline
I	Idiopathic cystitis (FIC: Feline Idiopathic Cystitis)		<i>see Cystitis</i>
K	Kidney disease		<i>see CKD (Chronic Kidney Disease)</i>
L	Liver disease		<i>see Hepatic disease</i>
M	Malabsorption/ Maldigestion		-GASTRO-INTESTINAL feline
			-HYPOALLERGENIC feline
			-GASTRO-INTESTINAL HIGH ENERGY LIQUID
			-ANALLERGENIC feline
	Malnutrition		<i>see Cachexia</i>
	Megacolon		-FIBRE RESPONSE feline (with cautious follow-up)
			-GASTRO-INTESTINAL feline
	Megaoesophagus	Gastrotomy tube	-CONVALESCENCE SUPPORT
			-RECOVERY
		Oral feeding	-CONVALESCENCE SUPPORT
			-RECOVERY
			-GASTRO-INTESTINAL wet feline

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

N	Neoplasia (optimal nutrition during cancer treatment)		-CONVALESCENCE SUPPORT
			-GASTRO-INTESTINAL feline
O	Obesity/Overweight (weight loss and weight maintenance after weight loss)		-SATIETY feline
		Cases where high fibre is disadvised (eg: chronic constipation)	-OBESITY feline
		Associated with urolithiasis	-MULTIFUNCTION feline S/O-Kcal Control
	Oesophagitis		-CONVALESCENCE SUPPORT
			-RECOVERY feline
			-RECOVERY LIQUID
	Oral hygiene		-DENTAL feline
	Osteo-articular disorders		-MOBILITY feline
P	Pancreatitis	Acute pancreatitis	-GASTRO-INTESTINAL feline Moderate Calorie
		Chronic pancreatitis	-GASTRO-INTESTINAL feline Moderate Calorie
			-SATIETY feline
			-OBESITY feline
		If complicated with diabetes	-DIABETIC feline
		If associated with enteritis/hepatitis	<i>see triaditis</i>
	Poor appetite		-CONVALESCENCE SUPPORT
			-GASTRO-INTESTINAL feline
			-RECOVERY



PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

P	Pre/post-surgery: (including digestive surgery)		-CONVALESCENCE SUPPORT
			-GASTRO-INTESTINAL feline
			-RECOVERY
			-GASTRO-INTESTINAL HIGH ENERGY LIQUID
			-REHYDRATION SUPPORT
			-RECOVERY LIQUID
R	Renal disease/failure		see CKD (Chronic Kidney Disease)
S	Stress-and anxiety-related disorders		-CALM feline
	When associated with urinary signs		-MULTIFUNCTION feline S/O-Biopeptide
			-CALM feline
T	Tartar and dental plaque		-DENTAL feline
	Triaditis (combination of enteritis, cholangitis or cholangiohepatitis, and pancreatitis)	Stable cats/ long-term management	-HYPOALLERGENIC feline
			-ANALLERGENIC feline
			-SENSITIVITY CONTROL feline
			-GASTRO-INTESTINAL feline
		Cats with dysorexia and/ or needing intensive care or convalescence	-CONVALESCENCE SUPPORT feline
			-RECOVERY
			-RECOVERY LIQUID
		Except in case of hepatic encephalopathy, then	-HEPATIC feline

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

T	Tube feeding	Tube with diameter <10Fr		-CONVALESCENCE SUPPORT instant
				-RECOVERY
				-RECOVERY LIQUID
		For tube with diameter >10Fr	Non-specific condition	-CONVALESCENCE SUPPORT instant
				-RECOVERY
		Specific condition	corresponding specific diet mixed with water and blended (wet diet with same volume of water, or kibbles soaked with water*)	

U	Urolithiasis	Struvite urolithiasis (prevention & dissolution)		-URINARY S/O feline	
			Associated with Adverse Food Reactions	-MULTIFUNCTION feline S/O-AFR	
			Associated with overweight/obesity	-MULTIFUNCTION feline S/O-Kcal Control	
			Associated with stress-related disorders	-MULTIFUNCTION feline S/O-Biopeptide	
		Calcium oxalate and calcium phosphate urolithiasis (prevention)		-URINARY S/O feline	
			Associated with Adverse Food Reactions	-MULTIFUNCTION feline S/O-AFR	
			Associated with overweight/obesity	-MULTIFUNCTION feline S/O-Kcal Control	
			Associated with stress	-MULTIFUNCTION feline S/O-Biopeptide	
			Calcium oxalate nephroliths associated with Chronic Kidney Disease [CKD]	-RENAL feline	
		Purine (Urate, xanthine) urolithiasis (prevention)			-HYPOALLERGENIC dry feline and try to increase water consumption**
		Cystine urolithiasis (prevention)	-RENAL feline wet loaf or chunks in gravy beef or tuna		
			-HYPOALLERGENIC dry and try to increase water consumption**		

* Kibbles rehydration for blending

- mix one volume of kibbles with 3 volumes of hot tap water (around 60°)

- let the kibbles absorb water for about 15 min before blending

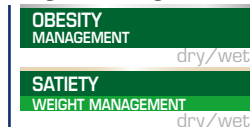
** Increasing water consumption in cats (cats being less prone than dogs to consume rehydrated kibbles)

Water-related factors to consider include freshness, taste, movement (water fountains, dripping faucets, bowl with pump-bubbled air...), and shape of the container.

Monofunction diets



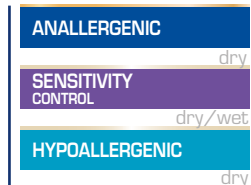
Weight management



Diabetes mellitus



Adverse reaction to food



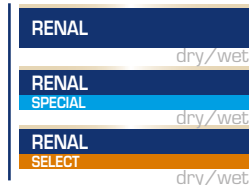
Gastro-intestinal disorders



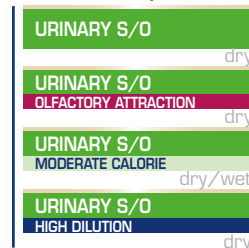
Liver disease



Renal disease



Lower urinary tract disease



Mobility



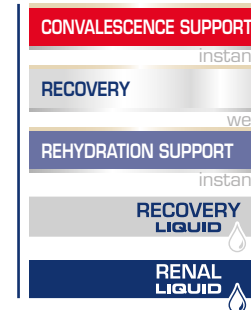
Period of adaptation



Oral hygiene



Convalescence



Monofunction diets



- SATIETY WEIGHT MANAGEMENT dry (bag and sachets) /wet
- OBESITY MANAGEMENT dry/wet



SATIETY

SAT 34

WEIGHT MANAGEMENT



WEIGHT MANAGEMENT



Supports safe weight loss and helps avoid weight regain. 97% of cats lost weight over a 3 month period.



High natural fibre level helps keep cats satisfied between meals. Helped control begging in 82% of cats during weight loss.



High protein content helps support healthy weight loss while maintaining muscle mass.



Enriched with nutrients to ensure optimal intake of protein, minerals and vitamins during a weight loss programme.

RECOMMENDED FOR:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus type II

NOT RECOMMENDED IN CASE OF:

- Condition were high fibre content is not recommended (eg: chronic constipation, severe arthritis making defecation difficult)
- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry protein, vegetable fibres, tapioca, wheat flour, wheat gluten*, maize gluten, hydrolysed animal proteins, animal fats, chicory pulp, minerals, psyllium husks and seeds, fish oil, marigold extract (source of lutein), hydrolysed crustaceans (source of glucosamine), hydrolysed cartilage (source of chondroitin).

**L.I.P. (Low Indigestible Protein): protein selected for its very high digestibility.*

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 25500 IU, Vitamin D3: 1000 IU, E1 (Iron): 31 mg, E2 (Iodine): 3.1 mg, E4 (Copper): 10 mg, E5 (Manganese): 41 mg, E6 (Zinc): 85 mg, E8 (Selenium): 0.05 mg - Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	34g
Fat content	9g
Carbohydrate	19.4g
NFE	29g
Dietary fibre	23.6g
Crude fibre	14g
Omega 6	1.88g
Omega 3	0.45g
EPA+DHA	0.2g
Calcium	1.34g
Phosphorus	1.17g
Sodium	0.55g
L-carnitine	20mg
Chondroitin+glucosamine	50mg
Metabolisable energy (C)*	307.5kcal

*NRC2006 TDF

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN SATIETY WEIGHT MANAGEMENT

- Bissot T. & al. Novel dietary strategies can improve the outcome of weight loss programmes in obese client-owned cats, J of Fel Med and Surgery, 2009, 12(2):104-112.
- Tvarijonavičiute A. & al. Effects of weight loss in obese cats on biochemical analytes related to inflammation and glucose homeostasis. Domestic Animal Endocrinology 2012; 42: 129-141.
- Deagle G. & al. Long term follow up after weight management in obese cats. Journal of Nutritional Science [2014] vol 3, e25.
- Serisier S. & al. Weight loss and post weight loss maintenance energy requirement of obese colony cats. Proc. 21th ECVIM Congress. Sevilla 2011: 209-210.
- Flanagan J. & al. Weight loss in client-owned cats significantly improves quality of life, begging score and activity levels: an international weight loss study. Proc. of WINSS; Chicago (USA)-2016.
- Hours & al. Comparison of voluntary food intake and palatability of commercial weight loss diets in healthy dogs and cats. BMC Veterinary Research (2016) 12:274.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT CAT	TARGET BODY WEIGHT OF CAT	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		grams	grams	grams
	2.5kg	33	26	35
	3kg	38	30	40
	3.5kg	42	33	44
	4kg	46	37	49
	4.5kg	50	40	53
	5kg	54	43	57
	5.5kg	58	46	61
	6kg	62	49	65
	6.5kg	65	52	69

*If the cat did not lose weight

Individual target weight is determined and then feeding amount established.

The recommended daily intake is based on the pet's ideal weight.

The starting ration may need to be adjusted during follow-up visits, based on each individual's response and the rate of weight loss. An objective of losing 1-3% bodyweight per week is generally achievable over the first 3 months, and of 0.5-2% afterwards.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of cats that have never been obese.

Based on most recent scientific data (Serisier & al. 2011), our maintenance after weight loss rations are calculated by increasing the weight loss ration by +33%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

Serisier S. & al. Weight loss and post weight loss maintenance energy requirement of obese colony cats. Proc. 21th ECVIM Congress. Sevilla 2011: 209-210.

SATIETY WEIGHT MANAGEMENT



SATIETY

SAT 34

WEIGHT MANAGEMENT



Available in box: 28x20g sachets

WEIGHT MANAGEMENT



Supports safe weight loss and helps avoid weight regain. 97% of cats lost weight over a 3 month period.



High natural fibre level helps keep cats satisfied between meals. Helped control begging in 82% of cats during weight loss.



High protein content helps support healthy weight loss while maintaining muscle mass.



Enriched with nutrients to ensure optimal intake of protein, minerals and vitamins during a weight loss programme.



RECOMMENDED FOR:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus type II

NOT RECOMMENDED IN CASE OF:

- Cases where high fibre content is not recommended (eg: chronic constipation, severe arthritis making defecation difficult)
- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry protein, vegetable fibres, tapioca, wheat flour, wheat gluten*, maize gluten, hydrolysed animal proteins, animal fats, chicory pulp, minerals, psyllium husks and seeds, fish oil, marigold extract (source of lutein), hydrolysed crustaceans (source of glucosamine), hydrolysed cartilage (source of chondroitin).

*L.I.P. (Low Indigestible Protein): protein selected for its very high digestibility.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 25500 IU, Vitamin D3: 1000 IU, E1 (Iron): 31 mg, E2 (Iodine): 3.1 mg, E4 (Copper): 10 mg, E5 (Manganese): 41 mg, E6 (Zinc): 85 mg, E8 (Selenium): 0.05 mg - Preservatives - Antioxidants.

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	4kg	46	37	49
	4.5kg	50	40	53
	5kg	54	43	57
	5.5kg	58	46	61
	6	62	49	65
	6.5kg	65	52	69

*If the cat did not lose weight

Individual target weight is determined and then feeding amount established.

The recommended daily intake is based on the pet's ideal weight.

The starting ration may need to be adjusted during follow-up visits, based on each individual's response and the rate of weight loss. An objective of losing 1-3% bodyweight per week is generally achievable over the first 3 months, and of 0.5-2% afterwards.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of cats that have never been obese.

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Please note that maintenance rations may need to be adjusted based on individual evolution.

Serisier S & al. Weight loss and post weight loss maintenance energy requirement of obese colony cats. Proc. 21th ECVIM Congress. Sevilla 2011: 209-210.

SATIETY WEIGHT MANAGEMENT



SATIETY

SAT 34

WEIGHT MANAGEMENT

WEIGHT MANAGEMENT



Nutritional concept that helps keep cats satisfied between meals.



Helps provide safe weight loss and reduces the risk of weight being regained.



Helps ensure optimal nutrient intake during weight loss.



High protein content helps maintain muscle mass during weight loss.

RECOMMENDED FOR:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus type II

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.



Available in box: 12x85g pouch

COMPOSITION

Poultry by-products, pork by-products, rice flour, pork blood products, powdercellulose, dried albumen, minerals, caramelised sugars, dextrose, marigold extract (source of lutein), hydrolysed crustaceans (source of glucosamine), hydrolysed cartilage (source of chondroitin).

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 235 IU, E1 (Iron): 7 mg, E2 (Iodine): 0,23 mg, E4 (Copper): 1,9 mg, E5 (Manganese): 2 mg, E6 (Zinc): 20 mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	7.5g
Fat content	2.2g
Carbohydrate	3.15g
NFE	3.3g
Dietary fibre	1.45g
Crude fibre	1.3g
Omega 6	0.5g
Omega 3	0.05g
EPA+DHA	0.004g
Calcium	0.27g
Phosphorus	0.22g
Sodium	0.16g
L-carnitine	3.2mg
Chondroitin+glucosamine	7.5mg
Metabolisable energy (C)*	60.7kcal

*NRC2006 TDF

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN SATIETY WEIGHT MANAGEMENT

- German AJ & al. Changes in body composition during weight loss in obese client owned cats: loss of tissue mass correlates with overall percentage of weight lost. *Journal of Feline Medicine and Surgery* (2008); 10: 452-459.
- Deagle G. & al. Long term follow up after weight management in obese cats. *Journal of Nutritional Science* (2014) vol 3, e25.
- Flanagan J. & al. A means for differentiation of the degree of satiety of low-energy, high-fiber wet products in cats. *Proc. Of AAVN symposium; Denver [USA]-2017.*

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT CAT	TARGET BODY WEIGHT OF CAT	START		AFTER 4 WEEKS*		MAINTENANCE AFTER WEIGHT LOSS	
		g/days	pouch/day	g/days	pouch/day	g/days	pouch/day
	2kg	142	1 3/4	113	1 1/4	150	1 3/4
	3kg	190	2 1/4	150	1 3/4	200	2 1/4
	4kg	233	2 3/4	184	2 1/4	245	3
	5kg	273	3 1/4	216	2 1/2	290	3 1/2
	6kg	311	3 3/4	246	3	330	4
	7kg	347	4	275	3 1/4	365	4 1/4
	8kg	381	4 1/2	302	3 1/2	405	4 3/4
	9kg	414	4 3/4	328	3 3/4	440	5 1/4
	10kg	447	5 1/4	354	4 1/4	470	5 1/2

*If the cat did not lose weight

Individual target weight is determined and then feeding amount established.

The recommended daily intake is based on the pet's ideal weight.

The starting ration may need to be adjusted during follow-up visits, based on each individual's response and the rate of weight loss. An objective of losing 1-3% bodyweight per week is generally achievable over the first 3 months, and of 0.5-2% afterwards.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of cats that have never been obese.

Based on most recent scientific data (Serisier & al. 2011), our maintenance after weight loss rations are calculated by increasing the weight loss ration by +33%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

Serisier S & al. Weight loss and post weight loss maintenance energy requirement of obese colony cats. Proc. 21th ECVIM Congress. Sevilla 2011: 209-210.

For the mixed feeding table please see the end of the section Weight management.

SATIETY WEIGHT MANAGEMENT



OBESITY MANAGEMENT

DP 42



Available in 400g, 1,5kg,
3,5kg and 6kg bag

WEIGHT MANAGEMENT OBESITY



A high protein content (118g/1000kcal ME) helps maintain muscle mass during a weight loss programme.



Enriched with nutrients (protein, minerals and vitamins) to compensate for the effect of energy restriction during a weight loss programme.



Nutrients help support healthy bones and joints placed under stress by excess body weight.



Essential fatty acids (Omega 3 and Omega 6) and trace elements (Cu, Zn) support healthy skin and coat.

RECOMMENDED FOR:

- Overweight/obesity:
-weight loss
-weight maintenance after weight loss
- Diabetes mellitus type II

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry meat, wheat, wheat gluten*, vegetable fibres, maize gluten, hydrolysed animal proteins, animal fats, beet pulp, minerals, fish oil, psyllium husks and seeds, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein), hydrolysed cartilage (source of chondroitin).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 25000IU, Vitamin D3: 1000IU, E1 (Iron): 39mg, E2 (Iodine): 3.9mg, E4 (Copper): 3mg, E5 (Manganese): 51mg, E6 (Zinc): 152mg, E8 (Selenium): 0.07mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed
Protein	42g
Fat content	10g
Carbohydrate	19.8g
NFE	28.1g
Dietary fibre	14.7g
Crude fibre	6.4g
Omega 6	2.22g
Omega 3	0.43g
EPA+DHA	0.16g
Linoleic acid	1.98g
Arachidonic acid	0.07g
Calcium	1.32g
Phosphorus	1.21g
Sodium	0.5g
L-carnitine	20mg
Chondroitin+glucosamine	50mg
Metabolisable energy*	355.9kcal

*NRC2006 TDF

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN OBESITY MANAGEMENT

- German AJ & al. Changes in body composition during weight loss in obese client owned cats: loss of tissue mass correlates with overall percentage of weight lost. *Journal of Feline Medicine and Surgery* [2008]; 10: 452-459.
- Bissot T. & al. Novel dietary strategies can improve the outcome of weight loss programmes in obese client-owned cats. *J of Fel Med and Surgery*, 2009, 12[2]:104-112.
- Tvarijonavičiute A. & al. Effects of weight loss in obese cats on biochemical analytes related to inflammation and glucose homeostasis. *Domestic Animal Endocrinology* 2012; 42: 129-141.
- Deagle G. & al. Long term follow up after weight management in obese cats. *Journal of Nutritional Science* [2014] vol 3, e25.

RECOMMENDED DAILY INTAKE & FEEDING DURATION				
ADULT CAT	TARGET BODY WEIGHT OF CAT	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		grams	grams	grams
	2.5kg	29	23	30
	3kg	33	26	34
	3.5kg	36	29	38
	4kg	40	32	42
	4.5kg	43	34	46
	5kg	47	37	49
	5.5kg	50	40	53
	6kg	53	42	56
	6.5kg	56	45	60
	7kg	59	47	63
	7.5kg	62	49	66
	8kg	65	52	69
	8.5kg	68	54	72
	9kg	71	56	75
	9.5kg	74	58	78
	10kg	77	61	81

*If the cat did not lose weight

Individual target weight is determined and then feeding amount established. The recommended daily intake is based on the pet target weight. The optimal weight loss rate is 0.5 to 2% bodyweight per week to reduce loss of muscle mass. These are only initial indications. The amount of food restriction necessary to induce weight loss can vary between individuals. This is why a close monitoring is required to regularly adapt the ration and ensure continued weight loss. If the cat refuses to eat or loses weight too rapidly, there is a risk of hepatic lipidosis.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of cats that have never been obese.

Based on most recent scientific data (Serisier & al. 2011), our maintenance after weight loss rations are calculated by increasing the weight loss ration by +33%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

Serisier S & al. Weight loss and post weight loss maintenance energy requirement of obese colony cats. Proc. 21th ECVIM Congress. Sevilla 2011: 209-210.

OBESITY MANAGEMENT



OBESITY MANAGEMENT



Available in 100g pouch

WEIGHT MANAGEMENT OBESITY



Low energy density for maintaining the meal volume.



A high protein content (116g/1000kcal ME) helps maintain muscle mass during a weight loss programme.



Reduced starch level, lower post-prandial hyperglycaemia.



Chondroitin sulphate and glucosamine help to maintain normal mobility in the highly stressed joints of obese pets.

RECOMMENDED FOR:

- Overweight/obesity:
-weight loss
-weight maintenance after weight loss
- Diabetes mellitus type II

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Pig meats, poultry meats, rice flour, egg whites dried, cellulose, minerals (including chelated minerals), taurine, gelling agent, Fructo-Oligo-Saccharides (FOS), L-carnitine, hydrolysed crustacean (source of glucosamine), hydrolysed cartilage (source of chondroitin), marigold meal (source of lutein), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 190IU, E1 (Iron): 6.4mg, E2 (Iodine): 0.2mg, E4 (Copper): 1.7mg, E5 (Manganese): 2mg, E6 (Zinc): 20mg.

Technological additives: Calcium sulphate: 1.2g.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	100g dry matter
Protein	7.5g	46.9g
Fat content	2g	12.5g
Carbohydrate	3.1g	19.4g
NFE	3.1g	19.4g
Dietary fibre	1.5g	9.4g
Crude fibre	1.5g	9.4g
Omega 6	0.25g	1.6g
Omega 3	0.03g	0.2g
Calcium	0.27g	1.7g
Phosphorus	0.22g	1.4g
Sodium	0.16g	1g
L-carnitine	3.2mg	20mg
Chondroitin+glucosamine	7.5mg	46.9mg
Metabolisable energy*	64.4kcal	402.5kcal

*NRC2006 TDF

RECOMMENDED DAILY INTAKE & FEEDING DURATION						
ADULT CAT	TARGET BODY WEIGHT OF CAT	START		AFTER 4 WEEKS*		MAINTENANCE AFTER WEIGHT LOSS
		grams	pouch	grams	pouch	
	2.5kg	160	1 1/2	125	1 1/4	165
	3kg	180	1 3/4	140	1 1/2	190
	3.5kg	200	2	160	1 1/2	210
	4kg	220	2 1/4	175	1 3/4	235
	4.5kg	240	2 1/2	190	2	255
	5kg	260	2 1/2	205	2	275
	5.5kg	275	2 3/4	220	2 1/4	290
	6kg	295	3	235	2 1/4	310
	6.5kg	310	3	245	2 1/2	330
	7kg	330	3 1/4	260	2 1/2	345
	7.5kg	345	3 1/2	275	2 3/4	365
	8kg	360	3 1/2	285	2 3/4	380
	8.5kg	375	3 3/4	300	3	400
	9kg	395	4	310	3	415
	9.5kg	410	4	325	3 1/4	430
	10kg	425	4 1/4	335	3 1/4	445

*If the cat did not lose weight

Individual target weight is determined and then feeding amount established. The recommended daily intake is based on the pet target weight. The optimal weight loss rate is 0.5 to 2% bodyweight per week to reduce loss of muscle mass. These are only initial indications. The amount of food restriction necessary to induce weight loss can vary between individuals. This is why a close monitoring is required to regularly adapt the ration and ensure continued weight loss. If the cat refuses to eat or loses weight too rapidly, there is a risk of hepatic lipidosis.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of cats that have never been obese. Based on most recent scientific data (Serisier & al. 2011), our maintenance after weight loss rations are calculated by increasing the weight loss ration by +33%. Please note that maintenance rations may need to be adjusted based on individual evolution.

Serisier S & al. Weight loss and post weight loss maintenance energy requirement of obese colony cats. Proc. 21th ECVIM Congress. Sevilla 2011: 209-210.

For the mixed feeding table please see the end of the section Weight management.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN OBESITY MANAGEMENT

- Gorman AJ & al. Changes in body composition during weight loss in obese client owned cats: loss of tissue mass correlates with overall percentage of weight lost. *Journal of Feline Medicine and Surgery* [2008]; 10: 452-459.
- Bissot T. & al. Novel dietary strategies can improve the outcome of weight loss programmes in obese client-owned cats. *J of Fel Med and Surgery*, 2009, 12[2]:104-112.
- Tvarijonavičiute A. & al. Effects of weight loss in obese cats on biochemical analytes related to inflammation and glucose homeostasis. *Domestic Animal Endocrinology* 2012; 42: 129-141.
- Deagle G. & al. Long term follow up after weight management in obese cats. *Journal of Nutritional Science* [2014] vol 3, e25.



OBESITY MANAGEMENT



OBESITY MANAGEMENT		1 WET POUCH+DRY (OBESITY MANAGEMENT)	
CAT'S WEIGHT	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
	GRAMS DRY		
2.5kg	10	5	12
3kg	14	8	16
3.5kg	18	11	20
4kg	22	14	24
4.5kg	25	16	28
5kg	29	19	31
5.5kg	32	22	35
6kg	35	24	38
6.5kg	38	27	41
7kg	41	29	45
7.5kg	44	31	48
8kg	47	34	51
8.5kg	50	36	54
9kg	53	38	57
9.5kg	56	40	60
10kg	58	43	63

OBESITY MANAGEMENT		1 WET POUCH OBESITY MANAGEMENT +SATIETY WEIGHT MANAGEMENT DRY		SATIETY WEIGHT MANAGEMENT
CAT'S WEIGHT	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS	
	GRAMS DRY			
2.5kg	12	5	14	
3kg	17	9	19	
3.5kg	21	12	24	
4kg	25	16	28	
4.5kg	29	19	32	
5kg	33	22	36	
5.5kg	37	25	40	
6kg	41	28	44	
6.5kg	44	31	48	
7kg	48	34	52	
7.5kg	51	36	56	
8kg	55	39	59	
8.5kg	58	42	63	
9kg	61	44	66	
9.5kg	65	47	70	
10kg	68	49	73	

*If the cat did not lose weight

SATIETY WEIGHT MANAGEMENT		1 WET POUCH+DRY (SATIETY WEIGHT MANAGEMENT)	
CAT'S WEIGHT	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
	1 POUCH / DAY + GRAMS DRY / DAY		
2kg	11	6	13
3kg	21	13	23
4kg	29	20	32
5kg	37	26	40
6kg	45	32	48
7kg	52	38	56
8kg	59	43	63
9kg	66	48	70
10kg	72	54	77

*If the cat did not lose weight

Monofunction diets



■ DIABETIC dry/wet



DIABETIC

DS 46



Available in 400g, 1,5kg and 3,5kg bag

DIABETES MELLITUS



Cereals of low glycaemic index in conjunction with the gelling action of psyllium mucilages reduces postprandial hyperglycaemia.



A high protein content helps reduce the net energy supply and also ensures a prolonged and progressive glucose supply (gluconeogenesis).



A low carbohydrate intake helps control postprandial blood glucose to facilitate global diabetes mellitus management.



A moderate energy intake promotes an optimal body composition and minimises insulin resistance associated with being overweight.

RECOMMENDED FOR:

- Diabetes mellitus

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Dehydrated poultry protein, barley, wheat gluten*, maize gluten, tapioca, soya protein isolate*, animal fats, hydrolysed animal proteins, vegetable fibres, chicory pulp, fish oil, psyllium husks and seeds, minerals, Fructo-Oligo-Saccharides (FOS), soya oil, marigold extract (source of lutein).

**L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation*

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 6300IU, Vitamin D3: 1000IU, E1 (Iron): 23mg, E2 (Iodine): 2.3mg, E4 (Copper): 3mg, E5 (Manganese): 29mg, E6 (Zinc): 88mg, E8 (Selenium): 0.02mg.
Preservatives - Antioxidants.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES		Per 100g as fed
Protein	_____	46g
Fat content	_____	12g
Carbohydrate	_____	18.8g
NFE	_____	26.7g
Dietary fibre	_____	11.5g
Crude fibre	_____	3.6g
Omega 6	_____	2.69g
Omega 3	_____	0.62g
EPA+DHA	_____	0.3g
Calcium	_____	0.92g
Phosphorus	_____	0.89g
Sodium	_____	0.4g
Arginine	_____	2.6g
L-carnitine	_____	20mg
Metabolisable energy*	_____	387kcal

*NRC2006 TDF

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	TARGET BODY WEIGHT OF CAT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	39	3/8	33	3/8		
	3kg	53	5/8	44	4/8		
	4kg	65	6/8	54	5/8		
	5kg	76	7/8	63	6/8	50	4/8
	6kg	86	1	72	6/8	57	5/8
	7kg			80	7/8	64	6/8
	8kg			88	1	70	6/8
	9kg			96	1	77	7/8
	10kg			103	1 1/8	83	7/8

It is recommended to feed DIABETIC for the cat's lifetime.

PLEASE NOTE: The use of this food may affect the cat's sensitivity to insulin. **It is highly recommended that blood glucose and insulin response are monitored when starting the diet so that insulin dosage can be adapted.**

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN DIABETIC

- Coradini M. & al. Effects of two commercially available feline diets on glucose and insulin concentrations, insulin sensitivity and energetic efficiency of weight gain. Br J Nutr 2011 106 (Suppl 1): S64-77.
- Mimura K. & al. Impact of Commercially Available Diabetic Prescription Diets on Short-Term Postprandial Serum Glucose, Insulin, Triglyceride and Free Fatty Acid Concentrations of Obese Cats. J. Vet. Med. Sci. 75(7): 929-937, 2013.

DIABETES MELLITUS



DIABETIC



Available in 100g pouch

DIABETES MELLITUS



Mixing cereals of low glycaemic index (barley, corn) in conjunction with the gelling action of psyllium mucilages reduces postprandial hyperglycaemia.



A high protein content helps reduce the net energy supply and also ensures a prolonged and progressive glucose supply (gluconeogenesis).



A moderate energy intake promotes an optimal body composition and minimises insulin resistance associated with being overweight.



A low carbohydrate intake helps control postprandial blood glucose to facilitate global diabetes mellitus management.

RECOMMENDED FOR:

- Diabetes mellitus

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Pork protein, poultry protein, poultry and pork liver, maize flour, vegetable fibre, fish oil, minerals, gelling agents, taurine, marigold extract (source of lutein), L-carnitine, vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 220IU, E1 (Iron): 3.5mg, E2 (Iodine): 0.1mg, E4 (Copper): 0.9mg, E5 (Manganese): 1mg, E6 (Zinc): 11mg.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	9g	51.4g
Fat content	3g	17.1g
Carbohydrate	2.3g	13.1g
NFE	2.8g	16g
Dietary fibre	2g	11.4g
Crude fibre	1.5g	8.6g
Omega 6	0.6g	3.4g
Omega 3	0.15g	0.9g
EPA+DHA	0.11g	0.6g
Calcium	0.35g	2g
Phosphorus	0.25g	1.4g
Sodium	0.20g	1.1g
Arginine	0.5g	2.9g
L-carnitine	12g	69g
Metabolisable energy*	71kcal	406kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	TARGET BODY WEIGHT OF CAT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	185	1 3/4	155	1 1/2		
	3kg	275	2 3/4	230	2 1/4		
	4kg	365	3 3/4	310	3	255	2 1/2
	5kg	460	4 1/2	385	3 3/4	315	3 1/4
	6kg	550	5 1/2	465	4 3/4	380	3 3/4
	7kg	640	6 1/2	540	5 1/2	445	4 1/2
	8kg	730	7 1/4	620	6 1/4	505	5
	9kg			695	7	570	5 3/4
	10kg			775	7 3/4	635	6 1/4

It is recommended to feed DIABETIC for the cat's lifetime.

PLEASE NOTE: The use of this food may affect the cat's sensitivity to insulin. **It is highly recommended that blood glucose and insulin response are monitored when starting the diet so that insulin dosage can be adapted.**

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Hewson-Hugues AK et al. The effect of dietary starch level on postprandial glucose and insulin concentrations in cats and dogs. British Journal of Nutrition 2011; 106, S105-S109 WCPN study.



DIABETES MELLITUS





Monofunction diets



- ANALLERGENIC
- HYPOALLERGENIC dry
- SENSITIVITY CONTROL dry
- SENSITIVITY CONTROL Chicken & Rice wet



ANALLERGENIC

AN 24



Available in 2kg and 4kg bags

Actual size

ADVERSE REACTION TO FOOD



Formulated with feather protein hydrolysate, a protein source containing exclusively free amino acids and very low molecular weight oligopeptides.



Formulated with starch instead of whole cereals and a specially designed palatability enhancer; manufactured in a production line designed to minimise contamination.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.



RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
- diagnosis: food elimination trial
- management
- Feline Atopic Dermatitis (CAD) associated with AFR
- Inflammatory Bowel Disease (IBD)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation and lactation

COMPOSITION

Maize starch, feather hydrolysate with low molecular weight (source of L amino acids and oligopeptides), copra oil, soya oil, vegetable fibres, minerals, animal fat, fish oil, chicory pulp, fructo-oligo-saccharides, maltodextrin, mono and diglycerides of palmitic and stearic acids esterified with citric acid, dextrose, marigold extract (source of lutein), source of protein: feather hydrolysate with low molecular weight (source of L-amino acids and oligopeptides), source of carbohydrate: maize starch.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 26000 IU, Vitamin D3: 800 IU, E1 (Iron): 40 mg, E2 (Iodine): 3,6 mg, E4 (Copper): 15 mg, E5 (Manganese): 52 mg, E6 (Zinc): 190 mg, E8 (Selenium): 0,3 mg - **Technological additives:** Clinoptilolite of sedimentary origin: 10 g - Preservatives - Antioxidants.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed
Protein	24.6g
Fat content	17g
Carbohydrate	37g
Dietary fibre	8g
Crude fibre	3.7g
Omega 6	3.51g
Omega 3	1.02g
EPA+DHA	0.45g
Linoleic acid	3.25g
Calcium	0.6g
Phosphorus	0.68g
Sodium	1g
Metabolisable energy*	390kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	39	3/8	33	3/8		
	3kg	52	4/8	43	4/8		
	4kg	64	5/8	53	4/8	43	4/8
	5kg	75	6/8	62	5/8	50	4/8
	6kg	85	7/8	71	6/8	57	5/8
	7kg	95	1	79	7/8	63	5/8
	8kg	105	1+1/8	87	7/8	70	6/8
	9kg	114	1+1/8	95	1	76	6/8
	10kg	122	1+2/8	102	1+1/8	82	7/8

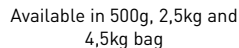
When a food allergy or a food intolerance is suspected, the cat's diet should be changed without any food transition. Nutritional management with Anallergenic may be continued for the pet's lifetime.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Boutigny L et al. Preliminary study with Anallergenic Feline to evaluate clinical benefits in AFR and AFR-suspected cats. Royal Canin, data on file 2016.
- Olivry T. et al. Extensive protein hydrolysis is indispensable to prevent IgE-mediated food allergen recognition. Short communication at WCVD Bordeaux 2016. Vet Dermatology, 27 (Suppl. 1), 60121.
- German A. Management of the cat with chronic diarrhoea. Proceedings of the Southern European Veterinary Conference & Congreso Nacional AVEPA, 2012 - Barcelona, Spain.
- Verlinden A., M. Hesta, S. Millet & G. P.J. Janssens (2006) Food Allergy in Dogs and Cats: A Review. Critical Reviews in Food Science and Nutrition, 46:3, 259-273.

ANALLERGENIC





Actual size



*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

Rice, hydrolysed soya protein isolate, animal fats, vegetable fibres, minerals, hydrolysed poultry liver, soya oil, beet pulp, fish oil, Fructo-Oligo-Saccharides (FOS), borage oil, marigold extract (source of lutein).

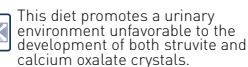
Nutritional additives: Vitamin A: 25300IU, Vitamin D3: 800IU, E1 (Iron): 41mg, E2 (Iodine): 3mg, E4 (Copper): 10mg, E5 (Manganese): 55mg, E6 (Zinc): 206mg.
Preservatives - Antioxidants:

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
 - diagnosis: food elimination trial
 - management
- Atopic dermatitis
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



KEY VALUES		Per 100g as fed
Protein	25.5g	
Fat content	20g	
Carbohydrate	34.5g	
NFE	39.1g	
Dietary fibre	8.2g	
Crude fibre	3.6g	
Omega 6	4.74g	
Omega 3	0.83g	
EPA+DHA	0.32g	
Linoleic acid	4.56g	
Calcium	0.73g	
Phosphorus	0.7g	
Sodium	0.6g	
Copper	1.5mg	
Zinc	25.9mg	
Vitamin A	2500IU	
Biotin	0.33mg	
Pantothenic acid	14.9mg	
Niacin	50mg	
Arginine	1.84g	
Metabolisable energy*	410kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	37	3/8	31	2/8		
	3kg	50	4/8	41	3/8		
	4kg	61	5/8	51	4/8	41	3/8
	5kg	71	6/8	59	5/8	47	4/8
	6kg	81	6/8	68	5/8	54	4/8
	7kg	90	7/8	75	6/8	60	5/8
	8kg	99	1	83	6/8	66	5/8
	9kg	108	1	90	7/8	72	6/8
	10kg	117	1 1/8	97	1	78	6/8

When a food allergy or a food intolerance is suspected, the cat's diet should be changed without any food transition. Nutritional management with Hypoallergenic may continue for the cat's lifetime.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HYPOALLERGENIC

- Mandigers PJ & al. Efficacy of a commercial hydrolysate diet in eight cats suffering from inflammatory bowel disease or adverse reaction to food. Tijdschr Diergeneeskd 2010; 135, 668-72.



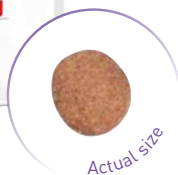
HYPOALLERGENIC



SENSITIVITY^{SC 27} CONTROL



Available in 400g, 1,5kg and 3,5kg bag



ADVERSE REACTION TO FOOD



Duck and rice are easily digestible.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Eicosapentaenoic and docosahexaenoic acids, which are omega 3 long chain fatty acids, modulate cutaneous reactions and help maintain the integrity of the intestinal mucosa.



Contains a combination of highly digestible proteins (L.I.P.* proteins), prebiotics, beet pulp, rice and fish oil to ensure maximum digestive security.

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation



RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
 - diagnosis: food elimination trial
 - management
- Chronic diarrhea

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, dehydrated duck protein, vegetable fibres, hydrolysed poultry proteins, animal fats, minerals, fish oil, soya oil, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 29700IU, Vitamin D3: 800IU, E1 (Iron): 40mg, E2 (Iodine): 3.6mg, E4 (Copper): 7mg, E5 (Manganese): 53mg, E6 (Zinc): 192mg, E8 (Selenium): 0.1mg. Preservatives - Antioxidants.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	27g	
Fat content	11g	
Carbohydrate	37.6g	
NFE	41.7g	
Dietary fibre	10.1g	
Crude fibre	6g	
Omega 6	2.78g	
Omega 3	0.73g	
EPA+DHA	0.35g	
Calcium	1.65g	
Phosphorus	1.17g	
Sodium	0.8g	
Biotin	0.31mg	
Pantothenic acid	14.64mg	
Niacin	49mg	
Metabolisable energy*	352kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	43	4/8	36	3/8		
	3kg	58	5/8	48	4/8		
	4kg	71	6/8	59	5/8		
	5kg	83	7/8	69	6/8	55	5/8
	6kg	95	1	79	7/8	63	5/8
	7kg			88	7/8	70	6/8
	8kg			97	1	77	6/8
	9kg			105	1 1/8	84	7/8
	10kg			113	1 2/8	91	1

When a food allergy or a food intolerance is confirmed, the cat's diet should be changed.

Continue nutritional management for the pet's lifetime.

Sensitivity Control Feline is suitable for feeding to both adult cats and kittens.

Sensitivity Control Feline can be used without any food transition.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Roudebush P. Ingredients and foods associated with adverse reactions in dogs and cats. Veterinary Dermatology 2013; 24(2): 293–294



SENSITIVITY CONTROL



SENSITIVITY CONTROL

Chicken & Rice



Available in 100g pouch

ADVERSE REACTION TO FOOD



Chicken and rice are easily digestible.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Eicosapentaenoic and docosahexaenoic acids, which are omega 3 long chain fatty acids, modulate cutaneous reactions and help maintain the integrity of the intestinal mucosa.



Contains a combination of highly digestible proteins, prebiotics, rice and fish oil to ensure maximum digestive security. This food is gluten- and lactose-free.

RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
 - diagnosis: food elimination trial
 - management
- Chronic diarrhea

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Chicken meat, chicken liver, rice, cellulose, sunflower oil, fish oil, minerals, taurine, fructo-oligosaccharides (FOS), DL-methionine, marigold meal (source of Lutein), trace elements, vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 334UI, E1 (Iron): 35mg, E2 (Iodine): 0.4mg, E4 (Copper): 3.8mg, E5 (Manganese): 4 mg, E6 (Zinc): 38mg.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	7.2g	36g
Fat content	6.5g	32.5g
Carbohydrate	3.65g	18.3g
NFE	3.8g	19g
Dietary fibre	1.15g	5.8g
Crude fibre	1g	5g
Omega 6	1.5g	7.5g
Omega 3	0.23g	1.2g
EPA+DHA	0.12g	0.6g
Calcium	0.2g	1g
Phosphorus	0.19g	1g
Sodium	0.17g	0.9g
Potassium	0.16g	0.8g
Vitamin D	34IU	170IU
Metabolisable energy*	96.2kcal	481.0kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	150	1 1/2	125	1 1/4	100	1
	3kg	200	2	165	1 3/4	130	1 1/4
	4kg	245	2 1/2	205	2	160	1 1/2
	5kg	285	2 3/4	240	2 1/2	190	2
	6kg	325	3 1/4	270	2 3/4	215	2 1/4
	7kg	360	3 1/2	300	3	240	2 1/2
	8kg	400	4	330	3 1/4	265	2 3/4
	9kg	435	4 1/4	360	3 1/2	290	3
	10kg	465	4 3/4	390	4	310	3

Sensitivity Control Feline may be used in case of chronic pruritic dermatosis with an allergic component such as miliary dermatitis.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Roudebush P. Ingredients and foods associated with adverse reactions in dogs and cats. Veterinary Dermatology 2013; 24(2): 293–295.



SENSITIVITY CONTROL





Monofunction diets



-  GASTRO INTESTINAL dry/wet
-  GASTRO INTESTINAL MODERATE CALORIE dry/wet
-  FIBRE RESPONSE dry





Available in 400g, 2kg
and 4kg bag



GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins (L.I.P.* proteins), prebiotics, sugar beet pulp, rice and fish oil to ensure maximum digestive security.



The high energy density responds to the cat's energy requirements while helping reduce the amount of food given per meal, thus decreasing the digestive workload. It also facilitates convalescence and recovery.



Cats suffering from digestive troubles often show a decreased appetite and weight loss. A fine palatability fosters spontaneous consumption thus facilitating convalescence and recovery.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, contribute to the health of the digestive system.



RECOMMENDED FOR:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery

NOT RECOMMENDED IN CASE OF:

- Lymphangiectasia, exsudative enteropathy⁽¹⁾

⁽¹⁾ In these cases Gastro Intestinal Moderate Calorie would be more appropriate. For pancreatitis, Gastro Intestinal Moderate Calorie may be more appropriate.



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry protein, rice, animal fats, maize gluten, vegetable fibres, wheat gluten*, hydrolysed animal proteins, minerals, egg yolk powder, beet pulp, fish oil, yeasts, soya oil, Fructo-Oligo-Saccharides (FOS), psyllium husks and seeds, hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 21900IU, Vitamin D3: 800IU, E1 (Iron): 35mg, E2 (Iodine): 2.7mg, E4 (Copper): 6mg, E5 (Manganese): 46mg, E6 (Zinc): 150mg, E8 (Selenium): 0.06mg.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		32g
Fat content		22g
Carbohydrate		20.9g
NFE		26.8g
Dietary fibre		11.1g
Crude fibre		5.2g
Omega 6		4.31g
Omega 3		0.75g
EPA+DHA		0.31g
Calcium		1.04g
Phosphorus		1.01g
Sodium		0.6g
Metabolisable energy*		407.6kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	37	3/8	31	2/8		
	3kg	50	4/8	42	3/8		
	4kg	61	5/8	51	4/8	41	3/8
	5kg	72	5/8	60	5/8	48	4/8
	6kg	82	6/8	68	5/8	54	4/8
	7kg	91	7/8	76	6/8	61	5/8
	8kg	100	1	84	6/8	67	5/8
	9kg	109	1	91	7/8	73	6/8
	10kg	117	1 1/8	98	7/8	78	6/8

In case of acute disease, regeneration of the intestinal villi requires the nutritional management to last for at least three weeks. Lifetime feeding may be necessary/beneficial in case of chronic disease. *In order to optimise digestive function, the recommended daily intake should be divided into several small meals.*

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary Fiber for Cats- In Vitro Fermentation of Selected Fiber Sources and their blends. J anim Sci 1995;73,2329-2339
- Hesta M. & al. The effect of oligofructose on urea metabolism and faecal odour components in cats. J Anim Physiol Anim Nutr 2005; 89(3-6):208-14.



GASTRO INTESTINAL



GASTRO INTESTINAL



Available in 100g pouch

GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins, prebiotics, fibres and fish oil to ensure digestive security.



The high energy density responds to the cat's energy requirements while helping reduce the amount of food given per meal, thus decreasing the digestive workload. It also facilitates convalescence and recovery.



Cats suffering from digestive troubles often show a decreased appetite and weight loss. A fine palatability fosters spontaneous consumption thus facilitating convalescence and recovery.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, contribute to the health of the digestive system.



RECOMMENDED FOR:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery

NOT RECOMMENDED IN CASE OF:

- Lymphangiectasia, exsudative enteropathy¹
- (¹) In these cases Gastro Intestinal Moderate Calorie would be more appropriate. For pancreatitis, Gastro Intestinal Moderate Calorie may be more appropriate.



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Pig and poultry meats, poultry liver, corn flour, fish oil, minerals, taurine, sugars, yeast hydrolysate (source of Mannan-Oligo-Saccharides), cellulose, marigold meal (source of Lutein), trace elements (included chelated minerals), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 295IU, E1 (Iron): 11mg, E2 (Iodine): 0.4mg, E4 (Copper): 2.7mg, E5 (Manganese): 3.3mg, E6 (Zinc): 33mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	7.6g	38g
Fat content	5.6g	28g
Carbohydrate	4.63g	23.2g
NFE	4.4g	22g
Dietary fibre	0.57g	2.9g
Crude fibre	0.8g	4g
Omega 6	1g	5g
Omega 3	0.2g	1g
EPA+DHA	0.1g	0.5g
Calcium	0.4g	2g
Phosphorus	0.3g	1.5g
Sodium	0.11g	0.6g
Potassium	0.14g	0.7g
Metabolisable energy*	93.1kcal	465.5kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	150	1 1/2	115	1 1/4		
	3kg	225	2 1/4	175	1 3/4		
	4kg	300	3	235	2 1/4	190	2
	5kg	370	3 3/4	295	3	240	2 1/2
	6kg	445	4 1/2	350	3 1/2	285	2 3/4
	7kg	520	5 1/4	410	4	335	3 1/4
	8kg	595	6	470	4 3/4	385	3 3/4
	9kg			525	5 1/4	430	4 1/4
10kg			585	5 3/4	480	4 3/4	

In case of acute disease, regeneration of the intestinal villi requires the nutritional management to last for at least three weeks. Lifetime feeding may be necessary/beneficial in case of chronic disease.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary Fiber for Cats- In Vitro Fermentation of Selected Fiber Sources and their blends. J anim Sci 1995;73,2329-2339.
- Hesta M. & al. The effect of oligofructose on urea metabolism and faecal odour components in cats. J Anim Physiol Anim Nutr 2005; 89[3-6]:208-14.



GASTRO INTESTINAL

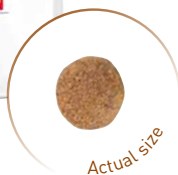


GASTRO
INTESTINAL
MODERATE CALORIE

GIM 35



Available in 400g, 2kg
and 4kg bag



GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins (L.I.P.* proteins), prebiotics, sugar beet pulp, rice and fish oil to ensure maximum digestive security.



Indicated in the management of pancreatitis, a reduced fat content also helps limit weight gain in neutered cats or those with a tendency to overweight.



Cats suffering from digestive troubles often show a decreased appetite and weight loss. A fine palatability fosters spontaneous consumption thus facilitating convalescence and recovery.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, contribute to the health of the digestive system.

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation



RECOMMENDED FOR:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery
- Pancreatitis
- Lymphangiectasia, exsudative enteropathy

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, dehydrated poultry protein, wheat gluten*, maize gluten, vegetable fibres, hydrolysed animal proteins, animal fats, minerals, soya oil, beet pulp, egg yolk powder, fish oil, yeast, Fructo-Oligo-Saccharides (FOS), psyllium husks and seeds, hydrolysed yeast [source of Mannan-Oligo-Saccharides, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 22600IU, Vitamin D3: 800IU, E1 (Iron): 35mg, E2 (Iodine): 2.7mg, E4 (Copper): 6mg, E5 (Manganese): 46mg, E6 (Zinc): 152mg, E8 (Selenium): 0.06mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		35g
Fat content		13g
Carbohydrate		27.3g
NFE		33.4g
Dietary fibre		11.1g
Crude fibre		5g
Omega 6		3.09g
Omega 3		0.64g
EPA+DHA		0.3g
Calcium		1.04g
Phosphorus		0.99g
Sodium		0.5g
Metabolisable energy*		371.9kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	41	3/8	34	3/8		
	3kg	55	5/8	46	4/8		
	4kg	67	6/8	56	5/8	45	4/8
	5kg	79	7/8	66	6/8	52	4/8
	6kg	89	7/8	75	6/8	60	5/8
	7kg	100	1	83	7/8	67	6/8
	8kg	110	1 1/8	92	1	73	6/8
	9kg	119	1 2/8	100	1	80	7/8
10kg	129	1 3/8	107	1 1/8	86	7/8	

In case of acute disease, regeneration of the intestinal villi requires the nutritional management to last for at least three weeks. Lifetime feeding may be necessary/beneficial in case of chronic disease.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary Fiber for Cats- In Vitro Fermentation of Selected Fiber Sources and their blends. J anim Sci 1995;73,2329-2339.
- Hesta M. & al. The effect of oligofructose on urea metabolism and faecal odour components in cats. J Anim Physiol Anim Nutr 2005; 89(3-6):208-14.



GASTRO INTESTINAL



GASTRO INTESTINAL MODERATE CALORIE



Available in 100g pouch

GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins, prebiotics, and fish oil to ensure digestive security.



Indicated in the management of pancreatitis, a reduced fat content also helps limit weight gain in neutered cats or those with a tendency to overweight.



Cats suffering from digestive troubles often show a decreased appetite and weight loss. A fine palatability fosters spontaneous consumption thus facilitating convalescence and recovery.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, contribute to the health of the digestive system.

RECOMMENDED FOR:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery
- Pancreatitis
- Lymphangiectasia, exsudative enteropathy



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Poultry and pork meat, poultry liver, corn flour, maize gluten, cellulose, egg whites dried, minerals (including chelated trace-elements), fish oil, gelling agents, hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of Lutein), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 220IU, E1 (Iron): 7mg, E2 (Iodine): 0.02mg, E4 (Copper): 0.01mg, E5 (Manganese): 2mg, E6 (Zinc): 20mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	Per 100g dry matter
Protein	7g	40g
Fat content	2.7g	15.4g
Carbohydrate	4.6g	26g
NFE	5.5g	31.4g
Dietary fibre	2g	11.4g
Crude fibre	1g	5.7g
Omega 6	0.5g	2.9g
Omega 3	0.06g	0.3g
EPA+DHA	0.05g	0.3g
Calcium	0.38g	2.2g
Phosphorus	0.24g	1.37g
Sodium	0.1g	0.6g
Potassium	0.11g	0.6g
Metabolisable energy*	70.8kcal	404.6kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	195	2	155	1 1/2		
	3kg	295	3	235	2 1/4		
	4kg	395	4	310	3	255	2 1/2
	5kg	495	5	390	4	315	3 1/4
	6kg	590	6	465	4 3/4	380	3 3/4
	7kg	690	7	545	5 1/2	445	4 1/2
	8kg	790	8	620	6 1/4	510	5
	9kg			700	7	570	5 3/4
10kg			775	7 3/4	635	6 1/4	

In case of acute disease, regeneration of the intestinal villi requires the nutritional management to last for at least three weeks. Lifetime feeding may be necessary/beneficial in case of chronic disease.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary Fiber for Cats- In Vitro Fermentation of Selected Fiber Sources and their blends. J anim Sci 1995;73,2329-2339.
- Hesta M. & al. The effect of oligofructose on urea metabolism and faecal odour components in cats. J Anim Physiol Anim Nutr 2005; 89(3-6):208-14.



GASTRO INTESTINAL



FIBRE RESPONSE



Available in 400g, 2kg
and 4kg bag



GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins (L.I.P.* proteins), prebiotics, chicory pulp, rice and fish oil to ensure maximum digestive security.



Enriched in soluble fibres and psyllium to ease digestive transit and obtain softer stools in cats suffering from constipation, slowed down transit and colonic discomfort.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, contribute to the health of the digestive system.



The synergistic antioxidant complex reduces oxidative stress and fights free radicals.

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

RECOMMENDED FOR:
- Acute or chronic constipation - Megacolon of non obstructive origin* *with close follow-up
NOT RECOMMENDED IN CASE OF:
- Obstipation - Obstructive megacolon



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry protein, rice, maize, wheat gluten*, animal fats, maize gluten, psyllium husks and seeds, hydrolysed animal proteins, chicory pulp, minerals, egg yolk powder, fish oil, yeasts, soya oil, Fructo-Oligo-Saccharides (FOS), hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 22000IU, Vitamin D3: 800IU, E1 (Iron): 39mg, E2 (Iodine): 3mg, E4 (Copper): 7mg, E5 (Manganese): 51mg, E6 (Zinc): 168mg, E8 (Selenium): 0.07mg.
Preservatives - Antioxidants.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		31g
Fat content		15g
Carbohydrate		28.9g
NFE		37.7g
Dietary fibre		11.7g
Crude fibre		2.9g
Omega 6		2.77g
Omega 3		0.61g
EPA+DHA		0.32g
Calcium		1.06g
Phosphorus		1g
Sodium		0.5g
Metabolisable energy*		388.6kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	39	3/8	33	3/8		
	3kg	52	4/8	44	4/8		
	4kg	64	5/8	54	5/8	43	4/8
	5kg	75	6/8	63	5/8	50	4/8
	6kg	86	7/8	71	6/8	57	5/8
	7kg	95	1	80	7/8	64	5/8
	8kg	105	1 1/8	88	1	70	6/8
	9kg	114	1 2/8	95	1	76	6/8
10kg	123	1 3/8	103	1 1/8	82	7/8	

3-4 weeks for a first presentation.

For recurrent cases of constipation, consider long-term use of FIBRE RESPONSE Feline.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN FIBRE RESPONSE

- Freiche V. & al. Uncontrolled study assessing the impact of a psyllium-enriched extruded dry diet on faecal consistency in Cats with constipation. Journal of Feline Medicine and Surgery (2011); 13(12):903-11.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary Fiber for Cats- In Vitro Fermentation of Selected Fiber Sources and their blends. J anim Sci 1995;73,2329-2339.
- Hesta M. & al. The effect of oligofructose on urea metabolism and faecal odour components in cats. J Anim Physiol Anim Nutr 2005; 89(3-6):208-14.



FIBRE RESPONSE





GASTRO-INTESTINAL DISORDERS



GASTRO-INTESTINAL WET & DRY			
CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day		
2	14		
3	27	19	
4	38	28	18
5	49	37	25
6	59	45	31
7	68	53	38
8	77	60	44
9	86	68	50
10	94	75	55

GASTRO-INTESTINAL MODERATE CALORIE WET & DRY			
CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day		
2	22	15	
3	36	27	
4	48	37	26
5	60	46	33
6	70	56	41
7	81	64	48
8	91	72	54
9	100	80	61
10	110	88	67



Monofunction diets



■ HEPATIC dry



HEPATIC

HF 26



LIVER DISEASE



The high energy density responds to the cat's energy requirements while helping reduce the amount of food given per meal, thus decreasing digestive workload. It also facilitates convalescence and recovery.



Cats suffering from hepatic disease often show a decreased appetite. High palatability fosters spontaneous consumption, thus facilitating convalescence and recovery.



A low copper content minimises both copper accumulation in the hepatocytes and intracellular lesions caused by cholestasis.



Free radicals play a key role in the pathogenesis and progression of hepatic lesions. The synergistic antioxidant complex helps slow down hepatocyte deterioration.



RECOMMENDED FOR:

- Cholangitis/Cholangiohepatitis
- Portosystemic shunt
- Hepatic encephalopathy
- Copper storage disease

NOT RECOMMENDED IN CASE OF:

- Hepatic lipidosis* [except if associated with hepatic encephalopathy]
 - Growth, gestation/lactation
- * in case of hepatic lipidosis, the recommended product is Recovery



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, animal fats, maize, wheat gluten*, dehydrated pork protein*, maize gluten, vegetable fibres, hydrolysed animal proteins, minerals, chicory pulp, fish oil, soya oil, Fructo-Oligo-Saccharides (FOS), hydrolysed yeast [source of Mannan-Oligo-Saccharides], marigold extract [source of lutein].

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15600IU, Vitamin D3: 800IU, E1 (Iron): 12mg, E2 (Iodine): 5.8mg, E4 (Copper): 5mg, E5 (Manganese): 57mg, E6 (Zinc): 225mg, E8 (Selenium): 0.41mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	26g	
Fat content	22g	
Carbohydrate	28.6g	
NFE	34.6g	
Dietary fibre	11g	
Crude fibre	5g	
Omega 6	4.81g	
Omega 3	0.9g	
EPA+DHA	0.35g	
Calcium	0.65g	
Phosphorus	0.59g	
Sodium	0.3g	
Copper	0.5mg	
Zinc	25mg	
Metabolisable energy*	411kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	37	3/8	31	2/8		
	3kg	49	4/8	41	3/8		
	4kg	61	5/8	51	4/8	40	3/8
	5kg	71	6/8	59	5/8	47	4/8
	6kg	81	7/8	68	5/8	54	4/8
	7kg	90	7/8	75	6/8	60	5/8
	8kg	99	1	83	7/8	66	5/8
	9kg	108	1 1/8	90	7/8	72	6/8
	10kg	116	1 1/8	97	1	78	6/8

Feeding duration may vary depending on the pathology. Initially, a feeding duration of up to 6 months is advised but for chronic conditions, lifelong feeding may be necessary.

In order to decrease postprandial hepatic load, it is recommended to divide the daily allowance into several small meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HEPATIC

- Proot S. & al. Soy protein isolate versus meat-based low-protein diet for dogs with congenital portosystemic shunts. J Vet Intern med 2009, 23: 794-800.



HEPATIC





Monofunction diets



- RENAL dry
- RENAL SPECIAL dry
- RENAL SELECT dry
- RENAL Chicken wet
- RENAL Beef wet
- RENAL Tuna wet
- RENAL wet (can)





Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents



Designed aromatic profile helps answer to cat's specific preference

RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)
- Management of calcium oxalate urolith recurrence in cats with impaired renal function
- Prevention of recurrence of urolithiasis requiring urine alkalinisation: urate & cystine uroliths

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Maize flour, rice, animal fats, wheat gluten*, soja protein isolate*, vegetable fibres, maize, maize gluten, hydrolysed animal proteins, minerals, chicory pulp, dehydrated poultry protein, fish oil, soya oil, fructo-oligo-saccharides, psyllium husks and seeds, marigold extract (source of lutein).

**L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation*

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 20800IU, Vitamin D3: 800IU, E1 (Iron): 48mg, E2 (Iodine): 4,8mg, E4 (Copper): 15mg, E5 (Manganese): 62mg, E6 (Zinc): 187mg. **Techological additives:** Clinoptilolite of sedimentary origin: 10g. Preservatives - Antioxidants.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES		Per 100g as fed
Protein	23g	
Fat content	17g	
Carbohydrate	38.1g	
NFE	44.1g	
Dietary fibre	10.7g	
Crude fibre	4.7g	
Crude ash	5.7g	
Omega 6	3.29g	
Omega 3	0.93g	
EPA+DHA	0.42g	
Calcium	0.6g	
Phosphorus	0.3g	
Sodium	0.4g	
Metabolisable energy*	392.4kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	39	3/8	32	3/8		
	3kg	52	4/8	43	4/8		
	4kg	64	5/8	53	4/8	42	4/8
	5kg	74	6/8	62	5/8	50	4/8
	6kg	85	7/8	71	6/8	56	5/8
	7kg	95	1	79	7/8	63	5/8
	8kg	104	1 1/8	87	7/8	69	6/8
	9kg	113	1 1/8	94	1	75	6/8
	10kg	122	1 2/8	102	1 1/8	81	7/8

The diet is prescribed for a 6-month minimum period, at the end of which a veterinary check-up must be performed.
This diet can be maintained for the cat's lifetime.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN RENAL

- Elliott J. & al. Survival of cats with naturally occurring chronic renal failure: effect of dietary management. J Small Anim Pract 2000; 41:235-242.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Ross LA & al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43(6): 1023-1026.
- Barber PJ & al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40(2): 62-70.
- Plantinga EA & al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157(7): 185-187.



RENAL



RENAL

SPECIAL

RSF 26



Available in 500g, 2kg
and 4kg bag



RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



Designed aromatic profile helps answer to cat's specific preference.



RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)
- Management of calcium oxalate urolith recurrence in cats with impaired renal function
- Prevention of recurrence of urolithiasis requiring urine alkalinisation: urate & cystine uroliths

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, dehydrated pork protein*, maize flour, maize, animal fats, maize gluten, vegetable fibres, hydrolysed animal proteins, minerals, wheat gluten*, chicory pulp, fish oil, soya oil, fructo-oligosaccharides, psyllium husks and seeds, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG) *

Nutritional additives: Vitamin A: 20800IU, Vitamin D3: 800IU, E1 (Iron): 47mg, E2 (Iodine): 4,7mg, E4 (Copper): 14mg, E5 (Manganese): 61mg, E6 (Zinc): 183mg. **Techological additives:** Clinoptilolite of sedimentary origin: 10g. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	26g	
Fat content	17g	
Carbohydrate	34.7g	
NFE	40.8g	
Dietary fibre	10.7g	
Crude fibre	4.6g	
Crude ash	6.1g	
Omega 6	3.27g	
Omega 3	0.91g	
EPA+DHA	0.41g	
Calcium	0.62g	
Phosphorus	0.44g	
Sodium	0.4g	
Metabolisable energy*	393.2kcal	

*Calculated according to NRC2006

ADULT CAT	RECOMMENDED DAILY INTAKE & FEEDING DURATION						
	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	39	3/8	32	3/8		
	3kg	52	4/8	43	4/8		
	4kg	63	5/8	53	4/8	42	4/8
	5kg	74	6/8	62	5/8	50	4/8
	6kg	85	7/8	71	6/8	56	5/8
	7kg	94	1	79	7/8	63	5/8
	8kg	104	1 1/8	87	7/8	69	6/8
9kg	113	1 1/8	94	1	75	6/8	
10kg	122	1 2/8	101	1	81	7/8	

The diet is prescribed for a 6-month minimum period, at the end of which a veterinary check-up must be performed.

This diet can be maintained for the cat's lifetime.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN RENAL

- Elliott J. & al. Survival of cats with naturally occurring chronic renal failure: effect of dietary management. J Small Anim Pract 2000; 41:235-243.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Ross LA & al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43(6): 1023-1026.
- Barber PJ & al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40(2): 62-70.
- Plantinga EA & al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157(7): 185-187.



RENAL SPECIAL



RENAL SELECT

RSE 24



Available in 500g, 2kg
and 4kg bag

RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalizing agents.



Designed aromatic profile helps answer to cat's specific preference.



RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)
- Management of calcium oxalate urolith recurrence in cats with impaired renal function
- Prevention of recurrence of urolithiasis requiring urine alkalinisation: urate & cystine uroliths

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Animal fats, rice, precooked wheat flour, dehydrated pork protein*, wheat flour, vegetable fibres, maize gluten, wheat gluten*, hydrolysed animal proteins, dehydrated fish, minerals, chicory pulp, fish oil, soya oil, fructo-oligo-saccharides, psyllium husks and seeds, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 20800IU, Vitamin D3: 800IU, E1 (Iron): 44mg, E2 (Iodine): 4,5mg, E4 (Copper): 14mg, E5 (Manganese): 58mg, E6 (Zinc): 173mg. **Techological additives:** Clinoptilolite of sedimentary origin: 10g. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		24.5g
Fat content		21.5g
Carbohydrate		32.4g
NFE		37.5g
Dietary fibre		9.7g
Crude fibre		4.6g
Crude ash		6.4g
Omega 6		3.56g
Omega 3		0.95g
EPA+DHA		0.41g
Calcium		0.7g
Phosphorus		0.41g
Sodium		0.45g
Metabolisable energy*		411.2kcal

*Calculated according to NRC2006

ADULT CAT	RECOMMENDED DAILY INTAKE & FEEDING DURATION						
	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	37	3/8	31	2/8		
	3kg	49	4/8	41	3/8		
	4kg	61	4/8	51	4/8	40	3/8
	5kg	71	5/8	59	4/8	47	3/8
	6kg	81	6/8	67	5/8	54	4/8
	7kg	90	7/8	75	5/8	60	4/8
	8kg	99	7/8	83	6/8	66	5/8
	9kg	108	1	90	7/8	72	5/8
	10kg	116	1	97	7/8	78	6/8

The diet is prescribed for a 6-month minimum period, at the end of which a veterinary check-up must be performed.
This diet can be maintained for the cat's lifetime.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN RENAL

- Elliott J. & al. Survival of cats with naturally occurring chronic renal failure: effect of dietary management. J Small Anim Pract 2000; 41:235-244.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Ross LA & al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43(6): 1023-1026.
- Barber PJ & al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40(2): 62-70.
- Plantinga EA & al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157(7): 185-187.



RENAL SELECT



RENAL

With Chicken



Available in 85g pouch

RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



Designed aromatic profile helps answer to cat's specific preference

RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)
- Management of calcium oxalate urolith recurrence in cats with impaired renal function
- Prevention of recurrence of urolithiasis requiring urine alkalinisation: urate & cystine uroliths

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Chicken meats, pork meats, wheat flour, sunflower oil, corn flour, minerals (including Calcium carbonate, Potassium citrate, zeolite), cellulose, fish oil, taurine, D-L methionine, fructo-oligosaccharides (FOS), marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 275IU, E1 (Iron): 4mg, E2 (Iodine): 0,11mg, E4 (Copper): 0,9 mg, E5 (Manganese): 1,4mg, E6 (Zinc): 14mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8g	34.8g
Fat content	8g	34.8g
Carbohydrate	5g	21.7g
NFE	5.3g	23g
Dietary fibre	0.8g	3.5g
Crude fibre	0.5g	2.2g
Omega 6	2.5g	10.9g
Omega 3	0.12g	0.5g
EPA+DHA	0.16g	0.7g
Calcium	0.14g	0.6g
Phosphorus	0.08g	0.3g
Sodium	0.1g	0.4g
Potassium	0.23g	1g
Vitamin D	45IU	195.7IU
Metabolisable energy*	118.2kcal	513.9kcal

*Calculated according to NRC2006

ADULT CAT	RECOMMENDED DAILY INTAKE & FEEDING DURATION						
	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	120	1 1/2	100	1 1/4		
	3kg	160	2	130	1 1/2		
	4kg	195	2 1/4	160	2	130	1 1/2
	5kg	230	2 3/4	190	2 1/4	150	1 3/4
	6kg	260	3	215	2 1/2	175	2
	7kg			240	2 3/4	195	2 1/4
	8kg			265	3	215	2 1/2
	9kg			290	3 1/2	230	2 3/4
	10kg			310	3 3/4	250	3

The diet is prescribed for a 6-month minimum period, at the end of which a veterinary check-up must be performed.
This diet can be maintained for the cat's lifetime.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN RENAL

- Elliott J. & al. Survival of cats with naturally occurring chronic renal failure: effect of dietary management. J Small Anim Pract 2000; 41:235-245.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Ross LA & al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43(6): 1023-1026.
- Barber PJ & al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40(2): 62-70.
- Plantinga EA & al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157(7): 185-187.



RENAL With Chicken



RENAL

With Tuna

With Beef



Available in 85g pouch tuna or beef

RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



Designed aromatic profile helps answer to cat's specific preference.

RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)
- Management of calcium oxalate urolith recurrence in cats with impaired renal function
- Prevention of recurrence of urolithiasis requiring urine alkalinisation: urate & cystine uroliths

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION TUNA

Pork meats, chicken meats, wheat flour, tuna meats, sunflower oil, cellulose, minerals (including Calcium carbonate, Potassium citrate, zeolite), fish oil, taurine, fructo-oligosaccharides (FOS), D-L methionine, marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 240IU, E1 (Iron): 4mg, E2 (Iodine): 0,17mg, E4 (Copper): 1,3mg, E5 (Manganese): 1,2mg, E6 (Zinc): 12mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

COMPOSITION BEEF

Chicken meats, beef meat, wheat flour, pork meats, sunflower oil, corn flour, minerals (including Calcium carbonate, Potassium citrate, zeolite), cellulose, fish oil, fructo-oligosaccharides (FOS), taurine, methionine, marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 230IU, E1 (Iron): 3mg, E2 (Iodine): 0,17mg/kg, E4 (Copper): 1,4mg, E5 (Manganese): 1mg, E6 (Zinc): 10mg.

TUNA	KEY VALUES	Per 100g as fed	100g dry matter
Protein		6.6g	33g
Fat content		6g	30g
Carbohydrate		4.9g	24.5g
NFE		5.2g	26g
Dietary fibre		1.5g	7.5g
Crude fibre		1.2g	6g
Omega 6		2.2g	11g
Omega 3		0.09g	0.5g
EPA+DHA		0.13g	0.7g
Calcium		0.12g	0.6g
Phosphorus		0.09g	0.45g
Sodium		0.08g	0.4g
Potassium		0.18g	0.9g
Vitamin D		40IU	200.0IU
Metabolisable energy*		94.3kcal	471.5kcal

*Calculated according to NRC2006

BEEF	KEY VALUES	Per 100g as fed	100g dry matter
Protein		6.8g	34g
Fat content		6.6g	33g
Carbohydrate		4.6g	23g
NFE		4.8g	24g
Dietary fibre		1g	5g
Crude fibre		0.8g	4g
Omega 6		2.4g	12g
Omega 3		0.09g	0.5g
EPA+DHA		0.13g	0.7g
Calcium		0.13g	0.7g
Phosphorus		0.08g	0.40g
Sodium		0.1g	0.5g
Potassium		0.19g	1g
Vitamin D		35IU	175IU
Metabolisable energy*		99.2kcal	496.0kcal

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN RENAL

- Elliott J. & al. Survival of cats with naturally occurring chronic renal failure: effect of dietary management. J Small Anim Pract 2000; 41:235-246.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Ross LA & al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43[6]: 1023-1026.
- Barber PJ & al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40[2]: 62-70.
- Plantinga EA & al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157[7]: 185-187.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT CAT	TUNA						BEEF					
	THIN		NORMAL		OVERWEIGHT		THIN		NORMAL		OVERWEIGHT	
	g	pouch	g	pouch	g	pouch	g	pouch	g	pouch	g	pouch
	CAT'S WEIGHT											
2kg	150	1 3/4	125	1 1/2			140	1 3/4	120	1 1/2		
3kg	200	2 1/4	165	2			190	2 1/4	155	1 3/4		
4kg	245	3	205	2 1/2	165	2	230	2 3/4	195	2 1/4	155	1 3/4
5kg	285	3 1/4	240	2 3/4	195	2 1/4	270	3 1/4	225	2 3/4	180	2
6kg			270	3 1/4	220	2 1/2	310	3 3/4	255	3	205	2 1/2
7kg			305	3 1/2	245	3			285	3 1/4	230	2 3/4
8kg			335	4	265	3			315	3 3/4	250	3
9kg			365	4 1/4	290	3 1/2			345	4	275	3 1/4
10kg			390	4 1/2	315	3 3/4			370	4 1/4	295	3 1/2

The diet is prescribed for a 6-month minimum period, at the end of which a veterinary check-up must be performed. This diet can be maintained for the cat's lifetime.



RENAL With Tuna / With Beef



RENAL

RENAL DISEASE



Available in 195g can



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



Designed aromatic profile helps answer to cat's specific preference.

RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)
- Management of calcium oxalate urolith recurrence in cats with impaired renal function
- Prevention of recurrence of urolithiasis requiring urine alkalinisation: urate & cystine uroliths

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Pork meats, chicken meats, corn flour, salmon, minerals (including Calcium carbonate, Potassium citrate, zeolite), cellulose, sunflower oil, taurine, fish oil, fructo-oligosaccharides (FOS), marigold meal (source of Lutein), D-L methionine, trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG) *

Nutritional additives: Vitamin D3: 350IU, E1 (Iron): 4mg, E2 (Iodine): 0,25mg, E4 (Copper): 2 mg, E5 (Manganese): 1,3mg, E6 (Zinc): 13mg.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	7.5g	33.3g
Fat content	6.5g	28.9g
Carbohydrate	5.5g	24.4g
NFE	6.3g	28g
Dietary fibre	2g	8.9g
Crude fibre	1.2g	5.3g
Omega 6	2.3g	10.2g
Omega 3	0.15g	0.7g
EPA+DHA	0.14g	0.6g
Calcium	0.15g	0.7g
Phosphorus	0.1g	0.4g
Sodium	0.09g	0.4g
Potassium	0.2g	0.9g
Vitamin D3	45IU	200IU
Metabolisable energy*	106.2kcal	472kcal

*Calculated according to NRC2006

ADULT CAT	RECOMMENDED DAILY INTAKE & FEEDING DURATION						
	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	can	grams	can	grams	can
	2kg	141	3/4	117	1/2		
	3kg	188	1	156	3/4		
	4kg	230	1 1/4	192	1	154	3/4
	5kg	270	1 1/2	225	1 1/4	180	1
	6kg	307	1 1/2	256	1 1/4	205	1
	7kg			286	1 1/2	229	1 1/4
	8kg			314	1 1/2	251	1 1/4
9kg			341	1 3/4	273	1 1/2	
10kg			368	2	294	1 1/2	

The diet is prescribed for a 6-month minimum period, at the end of which a veterinary check-up must be performed.
This diet can be maintained for the cat's lifetime.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN RENAL

- Elliott J. & al. Survival of cats with naturally occurring chronic renal failure: effect of dietary management. J Small Anim Pract 2000; 41:235-245.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Ross LA & al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43(6): 1023-1026.
- Barber PJ & al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40(2): 62-70.
- Plantinga EA & al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157(7): 185-187.



RENAL



RENAL WET CHICKEN + RENAL FELINE DRY DIET *							
CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT		THIN	NORMAL	OVERWEIGHT
	Grams of Renal Feline Dry + 1 pouch / Day				Grams of Renal Feline Dry + 2 pouches / Day		
2	11g						
3	23g	15g					
4	34g	24g	14g				
5	45g	33g	21g		18g		
6	54g	41g	28g		28g	15g	
7	64g	49g	34g		37g	22g	
8	73g	56g	40g		46g	30g	13g
9	81g	63g	46g		55g	37g	19g
10	90g	70g	51g		63g	44g	25g

RENAL WET TUNA + RENAL FELINE DRY DIET *							
CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT		THIN	NORMAL	OVERWEIGHT
	Grams of Renal Feline Dry + 1 pouch / Day				Grams of Renal Feline Dry + 2 pouches / Day		
2	16g	10g					
3	28g	20g	12g				
4	40g	29g	19g		18g	8g	
5	50g	38g	26g		29g	17g	
6	60g	46g	33g		39g	25g	12g
7	69g	54g	39g		48g	33g	18g
8	78g	62g	45g		57g	41g	24g
9	87g	69g	51g		66g	48g	30g
10	95g	76g	56g		74g	55g	35g

RENAL WET BEEF + RENAL FELINE DRY DIET *							
CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT		THIN	NORMAL	OVERWEIGHT
	Grams of Renal Feline Dry + 1 pouch / Day				Grams of Renal Feline Dry + 2 pouches / Day		
2	15g	9g	9g				
3	27g	19g	11g		5g		
4	38g	28g	18g		16g	6g	
5	49g	37g	25g		26g	15g	
6	59g	45g	32g		36g	23g	9g
7	68g	53g	38g		46g	31g	16g
8	77g	60g	44g		55g	38g	22g
9	86g	68g	50g		63g	45g	27g
10	94g	75g	55g		72g	52g	33g

RENAL WET (CAN 195G) + RENAL FELINE DRY*				
CAT'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		DRY (g)		
2	1/4	25	19	12
3	1/4	38	30	21
4	1/2	37	26	15
5	1/2	48	35	23
6	1/2	58	44	30
7	1/2	68	52	36
8	1/2	77	60	42
9	1	59	40	22
10	1	68	48	27

* All dry feline diet can be considered (the metabolisable energy levels of the three diets are similar).

Monofunction diets



- URINARY S/O dry
- URINARY S/O OLFACTORY ATTRACTION dry
- URINARY S/O MODERATE CALORIE dry/wet
- URINARY S/O HIGH DILUTION dry
- URINARY S/O Chicken wet
- URINARY S/O Beef wet
- URINARY S/O wet



URINARY S/O

LP 34



Available in 400g, 1.5kg, 3.5kg, 6kg and 9kg bag

LOWER URINARY TRACT DISEASE



Urinary S/O Feline effectively dissolves struvite uroliths.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Magnesium is a component of struvite (magnesium ammonium phosphate) uroliths.



RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavourable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, wheat gluten*, dehydrated poultry protein, maize flour, animal fats, maize gluten, hydrolysed animal proteins, wheat, minerals, vegetable fibres, beet pulp, fish oil, soya oil, fructo-oligo-saccharides, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG) *

Nutritional additives: Vitamin A: 21500 IU, Vitamin D3: 800 IU, E1 (Iron): 41 mg, E2 (Iodine): 4.1 mg, E4 (Copper): 13 mg, E5 (Manganese): 53 mg, E6 (Zinc): 159 mg, E8 (Selenium): 0.07 mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		34.5g
Fat content		15g
Carbohydrate		31.3g
NFE		35.7g
Dietary fibre		6.5g
Crude fibre		2.1g
Omega 6		3.46g
Omega 3		0.72g
EPA+DHA		0.26g
Calcium		0.8g
Phosphorus		0.7g
Magnesium		0.06g
Sodium		0.9g
Potassium		1g
Chloride		1.82g
Glucosamine		178.5mg
Metabolisable energy*		397kcal

*Calculated according to NRC2006

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.
- Houston DM & al. A Diet with a Struvite Relative Supersaturation Less Than 1 Is Effective in Dissolving Struvite Stones in Vivo. The British Journal of Nutrition 2011; 106 Suppl 1 [October]: S90–92.
- Sagols E. & al. In vitro dissolution of feline struvite stones with 2 diets showing different relative supersaturation values. In Proceedings of the European Congress on Veterinary Internal Medicine 2015. Lisbonne, Portugal.
- Reynolds BS & al. Effects of dietary salt intake on renal function: a 2-year study in healthy aged cats. J Vet Intern Med 2013 May-Jun;27(3):507-15 15:4.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Hawthorne AJ & al. Dietary Sodium Promotes Increased Water Intake and Urine Volume in Cats. The Journal of Nutrition 2004; 134 [8 Suppl] (August): 2128S–2129S.
- Queau Y. & al. Urinary pH affects urinary Calcium excretion but not calcium oxalate relative supersaturation in healthy cats. J Vet Intern Med 2013;27:738-739 [ACVIM abstract].
- Queau Y. & al. Effects of gradual increase of dietary sodium chloride on urinary parameters and relative supersaturation in healthy cats. In Proceedings of ACVIM forum 2015, 641. Indianapolis.

RECOMMENDED DAILY INTAKE & FEEDING DURATION						
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT
		grams	cups	grams	cups	grams cups
	2kg	38	4/8	32	3/8	
	3kg	51	5/8	43	4/8	
	4kg	63	6/8	52	5/8	42 4/8
	5kg	74	7/8	61	6/8	49 5/8
	6kg	84	1	70	6/8	56 5/8
	7kg	93	1 1/8	78	7/8	62 6/8
	8kg	103	1 2/8	86	1	69 6/8
	9kg	112	1 2/8	93	1 1/8	75 7/8
	10kg	120	1 3/8	101	1 1/8	80 7/8

5 to 12 weeks of dietary treatment are required to dissolve struvite uroliths. To avoid recurrence, the diet should be prescribed for a further 6 months minimum, followed by urinalysis. Once the cat has been successfully treated, diets from the **NEUTERED** Cat range may be recommended.

NOTE:

- **the wet version** of Urinary S/O Feline is recommended for recurrent idiopathic cystitis,
- **in older cats**, renal function should be checked before Urinary S/O Feline is prescribed.



URINARY S/O



URINARY S/O

LOWER URINARY TRACT DISEASE



Available in 100g pouch



Thanks to the high moisture content of wet food, Urinary S/O Feline increases urine dilution. Since nearly 64% of cases of FLUTD* are idiopathic cystitis, the wet diet should be preferred in cases of recurrent cystitis.



Urinary S/O Feline effectively dissolves struvite uroliths.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.

*FLUTD: Feline Lower Urinary Tract Disease

RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Feline idiopathic cystitis (FIC)

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Chicken and pork meats, chicken liver, maize flour, egg whites dried, sunflower oil, cellulose, fish oil, minerals, taurine, crustacean hydrolysate (source of glucosamine), marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 280IU, E1 (Iron): 5.6mg, E2 (Iodine): 0.2mg, E4 (Copper): 1.3mg, E5 (Manganese): 1.7mg, E6 (Zinc): 17mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	7g	35g
Fat content	5.3g	26.5g
Carbohydrate	5.05g	25.3g
NFE	5.9g	29.5g
Dietary fibre	1.45g	7.3g
Crude fibre	0.6g	3g
Omega 6	0.9g	4.5g
Omega 3	0.23g	1.15g
EPA+DHA	0.19g	1g
Calcium	0.15g	0.8g
Phosphorus	0.14g	0.7g
Magnesium	0.01g	0.1g
Sodium	0.08g	0.4g
Potassium	0.28g	1.4g
Chloride	0.3g	1.5g
Chondroitin+glucosamine	40mg	200mg
Metabolisable energy*	98.4kcal	469kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	155	1 1/2	130	1 1/4		
	3kg	205	2	170	1 3/4		
	4kg	255	2 1/2	210	2	170	1 3/4
	5kg	295	3	250	2 1/2	200	2
	6kg	340	3 1/2	280	2 3/4	225	2 1/4
	7kg	375	3 3/4	315	3 1/4	250	2 1/2
	8kg	415	4 1/4	345	3 1/2	275	2 3/4
	9kg	450	4 1/2	375	3 3/4	300	3
10kg	485	4 3/4	405	4	325	3 1/4	

4 to 12 weeks of dietary treatment are required to dissolve struvite uroliths or eliminate urinary tract infections. If a urinary tract infection is present, Urinary S/O Feline, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained.

IN OLDER CATS: renal function should be checked before Urinary S/O Feline is prescribed.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Markwell PJ & al. Clinical evaluation of commercially available urinary acidification diets in the management of idiopathic cystitis in cats. Journal of the American Veterinary Medical Association 1999; 214 (3): 361-65.
- Buckley CMF & al. Effect of Dietary Water Intake on Urinary Output, Specific Gravity and Relative Supersaturation for Calcium Oxalate and Struvite in the Cat. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S128-130.

URINARY S/O



URINARY S/O

LOWER URINARY TRACT DISEASE



Available in 100g pouch



Thanks to the high moisture content of wet food, Urinary S/O Feline increases urine dilution. Since nearly 64% of cases of FLUTD* are idiopathic cystitis, the wet diet should be preferred in cases of recurrent cystitis.



Urinary S/O Feline effectively dissolves struvite uroliths.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.

*FLUTD: Feline Lower Urinary Tract Disease

RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Feline idiopathic cystitis (FIC)

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Beef meats, pork and poultry meat, pork liver, corn flour, egg whites dried, sunflower oil, cellulose, fish oil, minerals, taurine, crustacean hydrolysate (source of glucosamine), marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 260IU, E1 (Iron): 2mg, E5 (Manganese): 0.6mg, E6 (Zinc): 6mg.
Technological additives: Pentasodium triphosphate: 1.3g.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	100g dry matter
Protein	7.5g	37.5g
Fat content	5g	25g
Carbohydrate	4.7g	23.3g
NFE	5.4g	27g
Dietary fibre	1.4g	6.8g
Crude fibre	0.6g	3g
Omega 6	0.9g	4.5g
Omega 3	0.24g	1.2g
EPA+DHA	0.2g	1g
Calcium	0.15g	0.75g
Phosphorus	0.14g	0.7g
Magnesium	0.01g	0.05g
Sodium	0.15g	0.75g
Potassium	0.27g	1.35g
Chloride	0.3g	1.5g
Chondroitin+glucosamine	40mg	200mg
Metabolisable energy*	96.7kcal	459kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	160	1 1/2	130	1 1/4		
	3kg	210	2	175	1 3/4		
	4kg	260	2 1/2	215	2 1/4	170	1 3/4
	5kg	300	3	250	2 1/2	200	2
	6kg	345	3 1/2	285	2 3/4	230	2 1/4
	7kg	385	3 3/4	320	3 1/4	255	2 1/2
	8kg	420	4 1/4	350	3 1/2	280	2 3/4
	9kg	460	4 1/2	385	3 3/4	305	3
10kg	495	5	415	4 1/4	330	3 1/4	

4 to 12 weeks of dietary treatment are required to dissolve struvite uroliths or eliminate urinary tract infections. If a urinary tract infection is present, Urinary S/O Feline, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained.

IN OLDER CATS: renal function should be checked before Urinary S/O Feline is prescribed.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Markwell PJ & al. Clinical evaluation of commercially available urinary acidification diets in the management of idiopathic cystitis in cats. Journal of the American Veterinary Medical Association 1999; 214 (3): 361-65.
- Buckley CMF & al. Effect of Dietary Water Intake on Urinary Output, Specific Gravity and Relative Supersaturation for Calcium Oxalate and Struvite in the Cat. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S128-130.

URINARY S/O



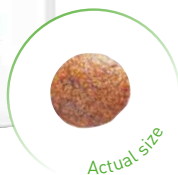
URINARY S/O

UOA 32

OLFACTORY ATTRACTION



Available in 400g, 1,5kg
and 3,5kg bag



LOWER URINARY TRACT DISEASE



Urinary S/O Olfactory Attraction is formulated to help obtain urine dilution and maintain slightly acidic urine, minimizing struvite crystal formation and promoting struvite stone dissolution.



Relative SuperSaturation (RSS) methodology predicts the crystallisation potential of urine. This diet is formulated with the following aims:

- Production of undersaturated urine for struvite crystals,
- Production of metastable urine for calcium oxalate crystals,
- Urine dilution, leading to flushing of the bladder and decreased residence time of minerals in the bladder because of the increased frequency of micturition.



The reduced calorie content of the diet makes it possible to limit weight gain in cats with a tendency to obesity.



To stimulate the individual preferences of cats attracted by scent, this diet is formulated with raw materials with a targeted aromatic profile.



RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated fish, rice, maize flour, vegetable fibres, wheat gluten*, animal fats, maize gluten, hydrolysed animal proteins, minerals, soya oil, Fructo-Oligo-Saccharides (FOS).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 31400IU, Vitamin D3: 800IU, E1 (Iron): 43mg, E2 (Iodine): 3.8mg, E4 (Copper): 11mg, E5 (Manganese): 56mg, E6 (Zinc): 197mg.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		32g
Fat content		11g
Carbohydrate		29g
NFE		34.8g
Dietary fibre		13.6g
Crude fibre		7.8g
Omega 6		2.3g
Omega 3		0.91g
EPA+DHA		0.5g
Calcium		0.9g
Phosphorus		0.9g
Magnesium		0.07g
Sodium		1.2g
Potassium		1.1g
Chloride		2.37g
Metabolisable energy*		346.7kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	44	4/8	37	3/8		
	3kg	59	5/8	49	5/8		
	4kg	72	7/8	60	6/8	48	4/8
	5kg	84	1	70	6/8	56	5/8
	6kg	96	1 1/8	80	7/8	64	6/8
	7kg	107	1 2/8	89	1	71	7/8
	8kg	118	1 3/8	98	1 1/8	78	7/8
	9kg	128	1 4/8	107	1 2/8	85	1
	10kg	138	1 5/8	115	1 3/8	92	1 1/8

5 to 12 weeks of dietary treatment are required to dissolve struvite uroliths. To avoid recurrence, the diet should be prescribed for a further 6 months minimum, followed by urinalysis. Once the cat has been successfully treated, diets from the VCN range may be recommended.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.
- Houston DM & al. A Diet with a Struvite Relative Supersaturation Less Than 1 Is Effective in Dissolving Struvite Stones in Vivo. The British Journal of Nutrition 2011; 106 Suppl 1 [October]: S90-92.
- Sagols E. & al. In vitro dissolution of feline struvite stones with 2 diets showing different relative supersaturation values. In Proceedings of the European Congress on Veterinary Internal Medicine 2015. Lisbonne, Portugal.
- Reynolds BS & al. Effects of dietary salt intake on renal function: a 2-year study in healthy aged cats. J Vet Intern Med 2013 May-Jun;27(3):507-15 15:4.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Hawthorne AJ & al. Dietary Sodium Promotes Increased Water Intake and Urine Volume in Cats. The Journal of Nutrition 2004; 134 [8 Suppl] (August): 2128S-2129S.
- Queau Y. & al. Urinary pH affects urinary Calcium excretion but not calcium oxalate relative supersaturation in healthy cats. J Vet Intern Med 2013;27:738-739 [ACVIM abstract].
- Queau Y. & al. Effects of gradual increase of dietary sodium chloride on urinary parameters and relative supersaturation in healthy cats. In Proceedings of ACVIM forum 2015, 641. Indianapolis.

URINARY S/O OLF. ATTRACTION



URINARY S/O^{UMC 34}

MODERATE CALORIE



Available in 400g, 1,5kg
3,5kg 6kg and 9kg bag

LOWER URINARY TRACT DISEASE



Urinary S/O Moderate Calorie effectively dissolves struvite uroliths.



The reduced calorie content of the diet makes it possible to limit weight gain in cats with a tendency to obesity.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.

RECOMMENDED FOR:

Cats with tendency to overweight in case of:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Poultry protein, rice, wheat gluten*, maize flour, vegetable fibres, maize gluten, minerals, animal fats, hydrolysed animal proteins, fish oil, soya oil, Fructo-Oligo-Saccharides (FOS), egg yolk powder, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 22300IU, Vitamin D3: 500IU, E1 (Iron): 41mg, E2 (Iodine): 3.2mg, E4 (Copper): 6mg, E5 (Manganese): 54mg, E6 (Zinc): 177mg, E8 (Selenium): 0.07mg.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	_____	34g
Fat content	_____	11g
Carbohydrate	_____	27.3g
NFE	_____	33.4g
Dietary fibre	_____	13.1g
Crude fibre	_____	7g
Omega 6	_____	2.59g
Omega 3	_____	0.52g
EPA+DHA	_____	0.26g
Calcium	_____	1g
Phosphorus	_____	0.95g
Magnesium	_____	0.05g
Sodium	_____	1.1g
Chloride	_____	1.89g
Metabolisable energy*	_____	350.5kcal

*Calculated according to NRC2006

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution In Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.
- Houston DM & al. A Diet with a Struvite Relative Supersaturation Less Than 1 Is Effective in Dissolving Struvite Stones in Vivo. The British Journal of Nutrition 2011; 106 Suppl 1 [October]: S90–92.
- Sagols E. & al. In vitro dissolution of feline struvite stones with 2 diets showing different relative supersaturation values. In Proceedings of the European Congress on Veterinary Internal Medicine 2015. Lisbonne, Portugal.
- Reynolds BS & al. Effects of dietary salt intake on renal function: a 2-year study in healthy aged cats. J Vet Intern Med 2013 May-Jun;27(3):507-15 15:4.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Hawthorne AJ & al. Dietary Sodium Promotes Increased Water Intake and Urine Volume in Cats. The Journal of Nutrition 2004; 134 [8 Suppl] [August]: 2128S–2129S.
- Queau Y. & al. Urinary pH affects urinary Calcium excretion but not calcium oxalate relative supersaturation in healthy cats. J Vet Intern Med 2013;27:738-739 [ACVIM abstract].
- Queau Y. & al. Effects of gradual increase of dietary sodium chloride on urinary parameters and relative supersaturation in healthy cats. In Proceedings of ACVIM forum 2015, 641. Indianapolis.

RECOMMENDED DAILY INTAKE & FEEDING DURATION					
ADULT CAT	CAT'S WEIGHT	NORMAL		OVERWEIGHT	
		grams	cups	grams	cups
	2kg	36	3/8		
	3kg	48	5/8		
	4kg	59	6/8	47	4/8
	5kg	70	7/8	56	5/8
	6kg	79	1	63	6/8
	7kg	88	1	71	7/8
	8kg	97	1 1/8	78	7/8
	9kg	106	1 2/8	84	1
10kg	114	1 3/8	91	1 1/8	

5 to 12 weeks of dietary treatment are required to dissolve struvite uroliths. To avoid recurrence, the diet should be prescribed for a further 6 months minimum, followed by urinalysis. Once treatment is complete, we recommend using Obesity Management or Satiety if the cat is overweight, or one of the diets from the **NEUTERED** Cat range if the animal has already attained its ideal weight.

NOTE: in older cats, renal function should be checked before Urinary S/O Moderate Calorie is prescribed.

URINARY S/O MODERATE CALORIE



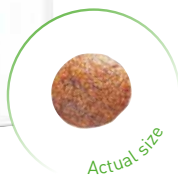
URINARY S/O

UHD 34

HIGH DILUTION



Available in 400g, 1,5kg
3,5kg and 6kg bag



LOWER URINARY TRACT DISEASE



Urinary S/O High Dilution Feline effectively dissolves struvite uroliths.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Magnesium is a component of struvite (magnesium ammonium phosphate) uroliths.



RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, wheat gluten*, dehydrated poultry protein, maize flour, animal fats, maize gluten, minerals, vegetable fibres, hydrolysed animal proteins, fish oil, soya oil, Fructo-Oligo-Saccharides (FOS), egg yolk powder, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 22200IU, Vitamin D3: 500IU, E1 (Iron): 45mg, E2 (Iodine): 3mg, E4 (Copper): 7mg, E5 (Manganese): 59mg, E6 (Zinc): 192mg.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		34.5g
Fat content		15g
Carbohydrate		28.8g
NFE		32.8g
Dietary fibre		6.8g
Crude fibre		2.8g
Omega 6		3.42g
Omega 3		0.71g
EPA+DHA		0.36g
Calcium		0.9g
Phosphorus		0.9g
Magnesium		0.05g
Sodium		1.3g
Potassium		1g
Chloride		2.38g
Chondroitin+Glucosamine		176.5mg
Metabolisable energy*		385.9kcal

*Calculated according to NRC2006

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.
- Houston DM & al. A Diet with a Struvite Relative Supersaturation Less Than 1 Is Effective in Dissolving Struvite Stones in Vivo. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S90-92.
- Sagols E. & al. In vitro dissolution of feline struvite stones with 2 diets showing different relative supersaturation values. In Proceedings of the European Congress on Veterinary Internal Medicine 2015. Lisbonne, Portugal.
- Reynolds BS & al. Effects of dietary salt intake on renal function: a 2-year study in healthy aged cats. J Vet Intern Med 2013 May-Jun;27(3):507-15 15:4.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Hawthorne AJ & al. Dietary Sodium Promotes Increased Water Intake and Urine Volume in Cats. The Journal of Nutrition 2004; 134 [8 Suppl] (August): 2128S-2129S.
- Queau Y. & al. Urinary pH affects urinary Calcium excretion but not calcium oxalate relative supersaturation in healthy cats. J Vet Intern Med 2013;27:738-739 [ACVIM abstract].
- Queau Y. & al. Effects of gradual increase of dietary sodium chloride on urinary parameters and relative supersaturation in healthy cats. In Proceedings of ACVIM forum 2015, 641. Indianapolis.

RECOMMENDED DAILY INTAKE & FEEDING DURATION						
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT
		grams	cups	grams	cups	grams cups
	2kg	39	4/8	33	3/8	
	3kg	53	5/8	44	4/8	
	4kg	65	6/8	54	5/8	43 4/8
	5kg	76	7/8	63	6/8	50 5/8
	6kg	86	1	72	7/8	57 6/8
	7kg	96	1 1/8	80	1	64 6/8
	8kg	106	1 2/8	88	1 1/8	70 7/8
	9kg	115	1 3/8	96	1 1/8	77 1
	10kg	124	1 4/8	103	1 2/8	83 1

5 to 12 weeks of dietary treatment are required to dissolve struvite uroliths. To avoid recurrence, the diet should be prescribed for a further 6 months minimum, followed by urinalysis. Once the cat has been successfully treated, diets from the VCN range may be recommended.

NOTE: - **the wet version** of Urinary S/O Feline is recommended for recurrent idiopathic cystitis,
- **in older cats**, renal function should be checked before Urinary S/O high Dilution is prescribed.



URINARY S/O HIGH DILUTION



URINARY S/O

LOWER URINARY TRACT DISEASE



Available in 195g can



Thanks to the high moisture content of wet food, Urinary S/O Feline increases urine dilution. Since nearly 64% of cases of FLUTD* are idiopathic cystitis, the wet diet should be preferred in cases of recurrent cystitis.



Urinary S/O Feline effectively dissolves struvite uroliths.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.

*FLUTD: Feline Lower Urinary Tract Disease

RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Feline idiopathic cystitis (FIC)

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Pork meats, chicken liver, corn flour, chicken meats, egg whites dried, sunflower oil, cellulose, fish oil, minerals, taurine, carrageenan, crustacean hydrolysate (source of glucosamine), trace-elements (including chelated trace elements), marigold meal extract (source of Lutein), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 300IU, E1 (Iron): 3.5mg, E2 (Iodine): 0.3mg, E4 (Copper): 2mg, E5 (Manganese): 1.1mg, E6 (zinc): 11mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8.2g	35.7g
Fat content	5.5g	23.9g
Carbohydrate	5.8g	25.2g
NFE	6.1g	26.5g
Dietary fibre	2g	8.7g
Crude fibre	1.7g	7.4g
Omega 6	1.5g	0.7g
Omega 3	0.4g	0.2g
EPA+DHA	0.12g	0.5g
Calcium	0.16g	0.7g
Phosphorus	0.14g	0.6g
Magnesium	0.02g	0.09g
Sodium	0.13g	0.6g
Potassium	0.2g	0.9g
Chloride	0.26g	1.1g
Chondroitin+glucosamine	46mg	200mg
Metabolisable energy*	100kcal	434kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	150	3/4	125	3/4	100	1/2
	3kg	205	1	170	3/4	135	3/4
	4kg	250	1 1/4	210	1	165	3/4
	5kg	290	1 1/2	245	1 1/4	195	1
	6kg	335	1 3/4	275	1 1/2	220	1 1/4
	7kg	370	2	310	1 1/2	250	1 1/4
	8kg	410	2	340	1 3/4	270	1 1/2
	9kg	445	2 1/4	370	2	295	1 1/2
	10kg	480	2 1/2	400	2	320	1 3/4

4 to 12 weeks of dietary treatment are required to dissolve struvite uroliths or eliminate urinary tract infections. If a urinary tract infection is present, Urinary S/O Feline, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained.

IN OLDER CATS: renal function should be checked before Urinary S/O Feline is prescribed.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Markwell PJ & al. Clinical evaluation of commercially available urinary acidification diets in the management of idiopathic cystitis in cats. Journal of the American Veterinary Medical Association 1999; 214 (3): 361-65.
- Buckley CMF & al. Effect of Dietary Water Intake on Urinary Output, Specific Gravity and Relative Supersaturation for Calcium Oxalate and Struvite in the Cat. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S128-130.

URINARY S/O



URINARY S/O

MODERATE CALORIE

LOWER URINARY TRACT DISEASE



Available in 100g pouch



Urinary S/O Moderate Calorie Feline effectively dissolves struvite uroliths.



The reduced calorie content of the diet makes it possible to limit weight gain in cats with a tendency to obesity.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.

RECOMMENDED FOR:

Cats with tendency to overweight in case of:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Feline idiopathic cystitis (FIC)

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavourable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Pork and poultry meats, salmon, pork liver, corn flour, corn gluten, cellulose, acidifying substances (calcium sulphate, methionine), fish oil, taurine, crustacean hydrolysate (source of glucosamine), L-carnitine, marigold meal (source of Lutein), vitamins.

ADDITIVES (KG) *

Nutritional additives: Vitamin D3: 230IU, E1 (Iron): 10mg, E5 (Manganese): 3.5mg, E6 (Zinc): 30mg.
Technological additives: Pentasodium triphosphate: 1g.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8g	44.4g
Fat content	3g	16.7g
Carbohydrate	4.4g	24.4g
NFE	5g	27.8g
Dietary fibre	1.4g	7.8g
Crude fibre	0.8g	4.4g
Omega 6	0.6g	3.3g
Omega 3	0.2g	1.1g
EPA+DHA	0.12g	0.67g
Calcium	0.19g	1.06g
Phosphorus	0.2g	1g
Magnesium	0.02g	0.09g
Sodium	0.1g	0.4g
Chloride	0.2g	0.8g
Metabolisable energy*	75.8kcal	421kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION					
ADULT CAT	CAT'S WEIGHT	NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch
	2kg	160	1 1/2		
	3kg	210	2		
	4kg	260	2 1/2	205	2
	5kg	305	3	245	2 1/2
	6kg	345	3 1/2	275	2 3/4
	7kg	385	3 3/4	310	3
	8kg	425	4 1/4	340	3 1/2
	9kg	460	4 1/2	370	3 3/4
10kg	495	5	400	4	

5 to 12 weeks of dietary treatment are required to dissolve struvite uroliths. To avoid recurrence, the diet should be prescribed for a further 6 months minimum, followed by urinalysis.

Once treatment is complete, we recommend using Obesity Management or Satiety Support if the cat is overweight, or one of the diets from the neutered Cat range if the animal has already attained its ideal weight.

IN OLDER CATS: renal function should be checked before Urinary S/O Moderate Calorie Feline is prescribed.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Markwell PJ & al. Clinical evaluation of commercially available urinary acidification diets in the management of idiopathic cystitis in cats. Journal of the American Veterinary Medical Association 1999; 214 (3): 361-65.
- Buckley CMF & al. Effect of Dietary Water Intake on Urinary Output, Specific Gravity and Relative Supersaturation for Calcium Oxalate and Struvite in the Cat. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S128-130.

URINARY S/O MODERATE CALORIE



URINARY WITH CHICKEN + URINARY S/O DRY

CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day		
2	15		
3	27	19	
4	39	29	18
5	50	38	25
6	60	46	32
7	70	54	39
8	79	62	45
9	89	70	51
10	97	77	57

URINARY WITH CHICKEN + URINARY HIGH DILUTION

CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day		
2	15	8	
3	28	19	
4	40	29	19
5	51	39	26
6	62	47	33
7	72	56	40
8	81	64	46
9	90	71	52
10	99	79	58

URINARY WITH BEEF + URINARY S/O DRY

CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day		
2	15	9	
3	28	20	
4	40	29	19
5	51	38	26
6	61	47	33
7	71	55	39
8	80	63	46
9	89	70	52
10	98	78	58

URINARY WITH BEEF + URINARY HIGH DILUTION

CAT'S WEIGHT	THIN	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day		
2	16	9	
3	29	20	
4	41	30	19
5	52	39	27
6	62	48	34
7	72	56	40
8	82	64	47
9	91	72	53
10	100	79	59

URINARY WITH CHICKEN + URINARY MODERATE CALORIE

CAT'S WEIGHT	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day	
2	9	
3	21	
4	32	20
5	42	29
6	52	36
7	61	44
8	70	51
9	78	57
10	87	64

URINARY MODERATE CALORIE + URINARY MODERATE CALORIE DRY

CAT'S WEIGHT	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day	
2		15
3		27
4	26	38
5	34	48
6	42	58
7	49	67
8	56	75
9	63	84
10	69	92

URINARY WITH BEEF + URINARY MODERATE CALORIE

CAT'S WEIGHT	NORMAL	OVERWEIGHT
	1 Pouch / day + grams Dry / day	
2	10	
3	22	
4	33	21
5	43	29
6	53	37
7	62	44
8	71	51
9	79	58
10	87	65

Monofunction diets



■ MOBILITY dry



MOBILITY

MC 28



Available in 500g, 2kg
and 4kg bag

MOBILITY



New Zealand Green-Lipped Mussel extract with cartilage precursors to help maintain healthy joints.



High levels of EPA/DHA for an extra support to help maintain joint health.



A moderate phosphorus intake to help support healthy kidney function.



The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.



ROYAL CANIN®

RECOMMENDED FOR:

- Help maintain mobility
- Help support the joints after an orthopedic surgery or a traumatism

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Maize flour, maize, rice, wheat gluten*, dehydrated poultry protein, maize gluten, animal fats, vegetable fibres, hydrolysed animal proteins, fish oil, soya oil, chicory pulp, minerals, Fructo-Oligo-Saccharides (FOS), psyllium husks and seeds, New Zealand green-lipped mussel extract (GLM 0.3%), hydrolysed yeast (source of Mannan-Oligo-Saccharides), hydrolysed crustaceans (source of glucosamine), hydrolysed cartilage (source of chondroitin), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected for its very high digestibility.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 20500IU, Vitamin D3: 700IU, E1 (Iron): 51mg, E2 (Iodine): 4mg, E4 (Copper): 8mg, E5 (Manganese): 66mg, E6 (Zinc): 218mg, E8 (Selenium): 0.1mg. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	28g	
Fat content	15g	
Carbohydrate	34.4g	
NFE	41g	
Dietary fibre	11.3g	
Crude fibre	4.7g	
Omega 6	3.81g	
Omega 3	1.2g	
EPA+DHA	0.73g	
Calcium	0.75g	
Phosphorus	0.62g	
Green-Lipped Mussel (GLM)	0.3g	
L-carnitine	5mg	
Chondroitin+glucosamine	100mg	
Metabolisable energy*	386kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	39	4/8	33	3/8		
	3kg	53	5/8	44	4/8		
	4kg	65	7/8	54	5/8	43	4/8
	5kg	76	1	63	6/8	50	5/8
	6kg	86	1 1/8	72	7/8	57	6/8
	7kg	96	1 2/8	80	1	64	6/8
	8kg	106	1 3/8	88	1 1/8	70	7/8
	9kg	115	1 4/8	96	1 2/8	77	1
10kg	124	1 5/8	103	1 2/8	83	1	

Maximum benefits are expected after 6 to 8 weeks feeding.

Nutritional management can then be continued for the pet's lifetime.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN MOBILITY

- Lascelles BDX et al. Evaluation of a therapeutic diet for feline degenerative joint disease. Journal of Veterinary Internal Medicine 2010; 24 (3): 487-95



MOBILITY





Monofunction diets



 CALM dry



CALM

CC 36



Available in 500g, 2kg
and 4kg bag

Actual size

PERIODS OF ADAPTATION



Trypsin hydrolysate of a milk protein (α -S1 casein), containing an active peptide with regulating properties: α -casozepine. L-tryptophan is a precursor of serotonin, which is a neurotransmitter that plays an essential role in the regulation of anxiety, sleep and appetite.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Contains a combination of highly digestible proteins (L.I.P.* proteins), prebiotics, beet pulp, rice and fish oil to ensure maximum digestive security.



A balanced ratio between fermentable fibre (beet pulp) and non-fermentable fibre (maize fibre) promotes hairball elimination. Psyllium, a poorly fermentable fibre, regulates the intestinal transit and facilitates stool elimination.



RECOMMENDED FOR:

- Management of stressful situations
- Management of associated digestive, urinary and dermatologic signs

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry protein, maize, rice, wheat gluten*, maize gluten, hydrolysed animal proteins, vegetable fibres, animal fats, beet pulp, minerals, fish oil, psyllium husks and seeds, soya oil, Fructo-Oligo-Saccharides (FOS), borage oil, hydrolysed milk protein**, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation. **Per kg: hydrolysed milk protein: 1.24g, Tryptophan: 2.8g

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 24900IU, Vitamin D3: 800IU, E1 (Iron): 40mg, E2 (Iodine): 2.8mg, E4 (Copper): 8mg, E5 (Manganese): 54mg, E6 (Zinc): 202mg, E8 (Selenium): 0.1mg, Tryptophan: 3.6g. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	_____	36g
Fat content	_____	11g
Carbohydrate	_____	28.8g
NFE	_____	35.6g
Dietary fibre	_____	10.8g
Crude fibre	_____	4g
Omega 6	_____	2.95g
Omega 3	_____	0.61g
EPA+DHA	_____	0.31g
Calcium	_____	1.15g
Phosphorus	_____	1.01g
Sodium	_____	0.7g
L-Tryptophan	_____	0.33g
Metabolisable energy*	_____	368.7kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	41	3/8	34	3/8		
	3kg	55	5/8	46	4/8		
	4kg	68	6/8	56	5/8	45	4/8
	5kg	79	7/8	66	6/8	53	4/8
	6kg	90	1	75	6/8	60	5/8
	7kg	101	1	84	7/8	67	6/8
	8kg	111	1 1/8	92	1	74	6/8
	9kg	120	1 2/8	100	1	80	7/8
10kg	130	1 3/8	108	1 1/8	86	7/8	

CALM should be used for a course of 2 to 3 months. Its total safety however enables it to be used for the animal's entire life if need be. It is recommended to feed CALM starting 10 days to 4 weeks before any foreseeable difficult event (going on holiday, moving house, arrival of a baby, home renovation, etc.) depending on the type of event.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN CALM

- Landsberg GM & al. Anxiety-reducing effectiveness of a therapeutic calming diet using an innovative non-invasive model of the assessment of fear and anxiety. Veterinary Behavior Symposium 2014 Proceedings: 19-20, Denver, Colorado (ahead of print).

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Beata C. & al. Effect of alpha-casozepine (Zylkene) on anxiety in cats. J Vet Beh. 2007; 2:40-46.



CALM





Monofunction diets



■ DENTAL dry



DENTAL



Available in 1,5kg
and 3kg bag

ORAL
HYGIENE

Sodium polyphosphate binds salivary calcium, making it unavailable for tartar formation.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Highly digestible protein (wheat gluten) limits fermentation processes in the intestine, thus reducing flatulence. Rice, a highly digestible source of starch, improves the overall diet digestibility. Prebiotics and beet pulp stimulate the growth of a beneficial intestinal flora.



Psyllium and dietary fibres facilitate hairball elimination and help prevent hairball-related problems such as vomiting and/or constipation.



RECOMMENDED FOR:

- Daily oral hygiene
- Dental plaque and tartar (to limit their development)
- Associated halitosis

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Cardiac disease*
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry protein, wheat gluten*, rice, maize, maize flour, animal fats, vegetable fibres, minerals, beet pulp, hydrolysed animal proteins, fish oil, Fructo-Oligo-Saccharides (FOS), soya oil, psyllium husks and seeds, hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 25100IU, Vitamin D3: 800IU, E1 (Iron): 43mg, E2 (Iodine): 3.4mg, E4 (Copper): 9mg, E5 (Manganese): 57mg, E6 (Zinc): 186mg, E8 (Selenium): 0.07mg.

Technological additives: Pentasodium triphosphate: 3.5g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	29g	
Fat content	15g	
Carbohydrate	31.7g	
NFE	38.6g	
Dietary fibre	12.4g	
Crude fibre	5.5g	
Omega 6	3.24g	
Omega 3	0.51g	
EPA+DHA	0.21g	
Calcium	0.84g	
Phosphorus	0.65g	
Sodium	0.7g	
Zinc	22mg	
Metabolisable energy*	380.9kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	40	4/8	33	3/8		
	3kg	53	6/8	44	5/8		
	4kg	65	7/8	55	6/8	44	5/8
	5kg	77	1	64	7/8	51	5/8
	6kg	87	1 1/8	73	1	58	6/8
	7kg	97	1 2/8	81	1	65	7/8
	8kg	107	1 3/8	89	1 1/8	71	7/8
	9kg	116	1 4/8	97	1 2/8	78	1
	10kg	126	1 5/8	105	1 3/8	84	1 1/8

This diet is recommended for any cat that is prone to developing tartar or after teeth have been descaled. This diet can be fed throughout the cat's life.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Clarke DE & al Effect of kibble size, shape and additives on plaque in cats. J Vet dentistry 2010,27,84-90.



DENTAL





Monofunction diets



■ CONVALESCENCE SUPPORT instant

■ REHYDRATION instant

■ RECOVERY wet

■ RECOVERY liquid

■ RENAL liquid



CONVALESCENCE SUPPORT



Available in box: 10x15g

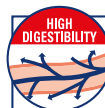
CONVALESCENCE



Convalescence Instant Diet has a high energy concentration. Easily diluted with water, it becomes an energy dense and complete liquid diet which is highly palatable and highly digestible.



The synergistic antioxidant complex reduces oxidative stress by helping neutralise free radicals.



Highly digestible ingredients compensate for the decreased activity of intestinal enzymes, ensuring an optimal nutrient supply.



RECOMMENDED FOR:

- Convalescence
 - Re-feeding after anorexia period
 - Malnutrition
 - Post-surgery and intensive care
 - Tube feeding*
- * even with tubes with diameter < 10Fr

NOT RECOMMENDED IN CASE OF:

- Hepatic encephalopathy⁽¹⁾

⁽¹⁾ Use Renal liquid

COMPOSITION

Milk proteins, soya oil, barley malt, minerals, egg yolk powder, vegetable fibres, Fructo-Oligo-Saccharides (FOS), marigold extract (source of lutein), lecithin, antioxidants, vitamins.

KEY VALUES	Reconstituted (per 100mL)	Powder (per 100 g as fed)
Protein	10.5 g	42 g
Fat content	6 g	24 g
Carbohydrate	4.65 g	18.6 g
NFE	5 g	20 g
Dietary Fibre	1.1 g	4.4 g
Crude Fibre	0.75 g	3 g
Omega 6	1 g	4 g
Omega 3	0.13 g	0.5 g
Calcium	0.38 g	1.5 g
Phosphorus	0.3 g	1.2 g
Metabolizable energy*	111 kcal	443.9 kcal

*Calculated according to NRC 2006-CF

Until restoration is achieved, according to the veterinarian's assessment.

Dissolve the content of 1 sachet (50g powder) into 200 ml of warm water (50°C) to make 200 ml of reconstituted diet. Let it cool down and feed at body or room temperature.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL & al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL & al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-272.

RECOMMENDED DAILY INTAKE & FEEDING DURATION					
ADULT CAT	BODYWEIGHT	CONVALESCING CATS CONFINED IN CAGE		CATS IN MAINTENANCE	
		mL/day	Sachet/day	mL/day	Sachet/day
	2 kg	106	1/2	115	1/2
	3 kg	144	3/4	155	3/4
	4 kg	178	1	185	1
	5 kg	211	1	220	1
	6 kg	242	1 1/4	250	1 1/4
	7 kg	271	1 1/4	280	1 1/2
	8 kg	300	1 1/2	305	1 1/2
	9 kg	328	1 3/4	335	1 3/4
	10 kg	355	1 3/4	360	1 3/4

2 energy levels are more and more described for hospitalised cats:

• Level 1: Convalescing cats confined in cage

It is advised to meet the Resting Energy Requirements (R.E.R) according to the formula: **RER (in kcal/day)= 70x(bodyweight in kg)^{0.75}**

• Level 2: In maintenance

It is advised to meet the Maintenance Energy Requirements (M.E.R) according to the formula: **MER (in kcal/day)= 77.6x(bodyweight in kg)^{0.711}**

The amount of food should be revaluated according to the clinical evolution of the pet.

In case of anorexia, a refeeding schedule is strongly recommended:

- **If anorexic for < 3 days:** plan to meet the requirements in 3 days: Day 1: 1/3 of requirements, day 2: 2/3 of requirements, day 3: Full requirements.
- **If anorexic for > 3 days:** plan to meet the requirements in 5 days: Day 1: 1/4 of requirements, day 2: 1/2 of requirements, day 3: 2/3 of requirements, day 4: 3/4 of requirements, day 5: Full requirements.

It is recommended to divide the daily intake into several small meals.



CONVALESCENCE SUPPORT



RECOVERY



Available in 195g can

CONVALESCENCE INTENSIVE CARE



The energy content of Recovery helps compensate the volume reduction of food intake with fussy pets.



Recovery texture makes it easier to use for periodic syringe feeding and tube feeding.

Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, modulate skin reactions and contribute to the intestinal mucosal integrity.

The synergistic antioxidant complex (Vit E, Vit C, taurine, lutein) reduces oxidative stress and helps neutralise free radicals



RECOMMENDED FOR:

- Convalescence
- Re-feeding after anorexia period
- Malnutrition
- Post-surgery and intensive care
- Hepatic lipidosis
- Tube feeding¹

⁽¹⁾ With tubes with diameter > 10 Fr. If tube ≤ 10 Fr, use Recovery liquid, or Convalescence Support Instant.

NOT RECOMMENDED IN CASE OF:

- Hepatic encephalopathy²
- ⁽²⁾ Use Renal liquid.

COMPOSITION

Poultry liver, poultry and pork meat, corn starch, cellulose, calcium caseinate, fish oil, minerals, egg whites dried, sunflower oil, taurine, carrageenan, Fructo-Oligo-Saccharides (FOS), marigold meal (source of Lutein), psyllium, yeast hydrolysate (source of Mannan-Oligo-Saccharides), DL-methionine, trace elements (incl. chelated trace elements), vitamins.

ADDITIVES (KG) *

Nutritional additives: Vitamin D3: 300IU, E1 (Iron): 15mg, E2 (Iodine): 0.16mg, E4 (Copper): 1mg, E5 (Manganese): 4.5mg, E6 (Zinc): 47mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	14g	50.9g
Fat content	6.2g	22.5g
Carbohydrate	2.6g	9.5g
Dietary fibre	3g	10.9g
Crude fibre	2g	7.3g
Glutamine/Glutamate	1.5g	5.4g
Arginine	0.7g	2.5g
Branched-chain aminoacids	1.47g	5.3g
Aromatic aminoacids	0.78g	2.8g
Omega 6	1.2g	4.4g
Omega 3	0.6g	2.2g
EPA+DHA	0.45g	1.6g
Zinc	6mg	21.8mg
Metabolisable energy*	120.5kcal	438.2kcal

*Calculated according to NRC2006

Until restoration is achieved, according to the veterinarian's assessment.

As for any other diets, respect a dietary transition when newly introducing Recovery in the pet diet.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL & al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL & al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.

RECOMMENDED DAILY INTAKE & FEEDING DURATION					
ADULT CAT	ANIMAL WEIGHT	LEVEL 1 Convalescing cats confined in cage		LEVEL 2 Active Cat in maintenance	
		grams	cans	grams	cans
	2kg	95	1/2	105	1/2
	3kg	130	3/4	140	3/4
	4kg	160	3/4	175	1
	5kg	190	1	205	1
	6kg	215	1	230	1 1/4
	7kg	240	1 1/4	260	1 1/4
	8kg	265	1 1/4	285	1 1/2
	9kg	290	1 1/2	310	1 1/2
10kg	315	1 1/2	330	1 3/4	

2 energy levels are more and more described for hospitalised cats:

• Level 1: Convalescing cats confined in cage

It is advised to meet the Resting Energy Requirements (R.E.R) according to the formula: **RER (in kcal/day)= 70x(body weight in kg)^{0.75}**

• Level 2: In maintenance

It is advised to meet the Maintenance Energy Requirements (M.E.R) according to the formula: **MER (in kcal/day)= 77.6x(body weight in kg)^{0.711}**

The amount of food should be revaluated according to the clinical evolution of the pet.

In case of anorexia, a **refeeding schedule** is strongly recommended:

- If anorexic for < 3 days: plan to meet the requirements in 3 days:

Day 1: 1/3 of requirements, day 2: 2/3 of requirements, day 3: Full requirements.

- If anorexic for > 3 days: plan to meet the requirements in 5 days:

Day 1: 1/4 of requirements, day 2: 1/2 of requirements, day 3: 2/3 of requirements, day 4: 3/4 of requirements, day 5: Full requirements.

It is recommended to divide the daily intake into several small meals.

RECOVERY

REHYDRATION SUPPORT



Available in box: 15x29g

CONVALESCENCE REHYDRATION



Rehydration Support Instant Diet formula has been designed to replace lost fluids and electrolytes in dehydrated dogs and cats. Sodium and chloride contents are approximately equivalent and compensate for losses.



RECOMMENDED FOR*:

- Moderate dehydration
- Post-surgery and intensive care
- Electrolyte losses secondary to vomiting and/or diarrhea

*in addition of daily ration of complete food

NOT RECOMMENDED IN CASE OF:

- Anuria
- Persistent vomiting

COMPOSITION

Maltodextrin, potassium chloride, sodium chloride, sodium citrate.

(Nutritional supplement)

KEY VALUES	reconstituted (per 100g)	per sachet of 50g
Protein	0.3g	1.45g
Fat content	0g	0g
NFE	4.7g	25g
Sodium	0.06g	0.3g
Potassium	0.06g	0.3g
Chloride	0.14g	0.7g
Metabolisable energy*	19kcal	100kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION		
ADULT CAT	ANIMAL WEIGHT	VOLUME
		SACHET (29G)
		approximately
	2kg	175
	4kg	300
	5kg	350
	10kg	600

According to the veterinarian's assessment.

Mix the contents of 1 sachet with 500ml water.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Garvey MS. Fluid and electrolyte balance in critical patients. Vet Clin North Am Small Anim Pract. 1989 Nov;19(6):1021-57.



REHYDRATION SUPPORT



RECOVERY LIQUID



CONVALESCENCE INTENSIVE CARE



High protein level to help maintain muscle mass during hospitalization and convalescence.



High energy density that provides daily energy requirements in a reduced feeding volume.



Complete and balanced liquid diet to support nutritional restoration and convalescence of dogs and cats requiring assisted enteral nutrition.



The synergistic antioxidant complex (including high levels of Vit E, Vit C, taurine & lutein) helps neutralise free radicals.



Liquid formula with adapted viscosity for an easy use whatever the tube size.



RECOMMENDED FOR:

- Convalescence
- Re-feeding after anorexia period
- Malnutrition
- Post-surgery and intensive care
- Hepatic lipidosis¹
- Acute and chronic diarrhea

NOT RECOMMENDED IN CASE OF:

- Hepatic encephalopathy¹
- Growth, gestation and lactation

¹in cases of hepatic encephalopathy use Renal liquid

COMPOSITION

Milk and milk derivatives, cereals, oils and fats, vegetable protein extracts, minerals, derivatives of vegetable origin. Highly digestible ingredients: low-lactose milk, caseinate, soya protein concentrate, maltodextrin.

ADDITIVES (KG) *

ADDITIVES (per l) : Nutritional additives: Vitamin A: 3660 IU, Vitamin D3: 280 IU, E1 (Iron): 28.5 mg, E2 (Iodine): 0.7 mg, E4 (Copper): 2.7 mg, E5 (Manganese): 2.4 mg, E6 (Zinc): 42 mg, E8 (Selenium): 0.14 mg.

KEY VALUES		Per 100ml as fed
Protein		8.2 g
Fat content		5.2 g
Carbohydrate		5.1 g
NFE		5.1 g
Dietary fibre		0 g
Crude fibre		0 g
Omega 6		1.14 g
Omega 3		0.29 g
EPA+DHA		0.12 g
Calcium		0.2 g
Phosphorus		0.17 g
Sodium		0.1 g
Metabolisable energy (C)*		105 kcal

*NRC2006 TDF

DAILY FEEDING RECOMMENDATION				
ADULT CAT	CURRENT BODY WEIGHT OF CAT	LIQUID	CURRENT BODY WEIGHT OF CAT	LIQUID
		ml/day		ml/day
	2 kg	112	5 kg	223
	2.5 kg	133	6 kg	256
	3 kg	152	7 kg	287
	3.5 kg	171	8 kg	317
	4 kg	189	9 kg	346
	4.5 kg	206	10 kg	375

CATS CONFINED IN CAGE

It is advised to meet the Resting Energy Requirements (R.E.R) according to the formula: **RER (in kcal/day)= 70x(body weight in kg)^{0.75}**

The amount of food should be reevaluated according to the clinical evolution of the pet.

In case of anorexia, a refeeding schedule is strongly recommended:

- **If anorexia < 3 days:** plan to meet the requirements in 3 days.

Day 1: 1/3 of requirements, day 2: 2/3 of requirements, day 3: Full requirements.

- **If anorexia ≥ 3 days:** plan to meet the requirements in 5 days.

Day 1: 1/4 of requirements, day 2: 1/2 of requirements, day 3: 2/3 of requirements, day 4: 3/4 of requirements, day 5: Full requirements.

It is recommended to divide the daily intake into several small meals.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL et al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL et al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.
- Corbee et al. Nutritional Support of Dogs and Cats after Surgery or Illness. Open Journal of Veterinary Medicine. 2014;04(04):44-57.



RECOVERY



RENAL LIQUID



CONVALESCENCE INTENSIVE CARE



Formulated to support renal function in case of renal insufficiency: high quality proteins and restricted levels of phosphorus. Contains EPA + DHA and antioxidants.



High energy density that provides daily energy requirements in a reduced feeding volume.



Complete and balanced liquid diet to support the renal function in case of renal insufficiency, for cats requiring assisted enteral nutrition.



The synergistic antioxidant complex (including high levels of Vit E, Vit C, taurine & lutein) helps neutralise free radicals.



Liquid formula with adapted viscosity for an easy use whatever the tube size.



RECOMMENDED FOR:

- Acute Kidney Injury (AKI)
- Chronic Kidney Disease (CKD)
- Hepatic encephalopathy

NOT RECOMMENDED IN CASE OF:

- Growth, gestation and lactation

COMPOSITION

Milk and milk derivatives, cereals, oils and fats, vegetable protein extracts, minerals, derivatives of vegetable origin. Source of protein: low-lactose milk, caseinate, soya protein concentrate.

ADDITIVES (KG) *

ADDITIVES (per l) : Nutritional additives: Vitamin A: 3330 IU, Vitamin D3: 320 IU, E1 (Iron): 30 mg, E2 (Iodine): 0.3 mg, E4 (Copper): 1.8 mg, E5 (Manganese): 2.4 mg, E6 (Zinc): 28 mg, E8 (Selenium): 0.15 mg.

KEY VALUES		Per 100ml as fed
Protein	_____	7 g
Fat content	_____	5.5 g
Carbohydrate	_____	6.6 g
NFE	_____	6.6 g
Dietary fibre	_____	0 g
Crude fibre	_____	0 g
Omega 6	_____	0.73 g
Omega 3	_____	0.3 g
EPA+DHA	_____	0.14 g
Calcium	_____	0.10 g
Phosphorus	_____	0.08 g
Sodium	_____	0.08 g
Metabolisable energy (C)*	_____	108 kcal

DAILY FEEDING RECOMMENDATION				
ADULT CAT	CURRENT BODY WEIGHT OF CAT	LIQUID	CURRENT BODY WEIGHT OF CAT	LIQUID
		ml/day		ml/day
	2 kg	109	5 kg	217
	2.5 kg	129	6 kg	248
	3 kg	148	7 kg	279
	3.5 kg	166	8 kg	308
	4 kg	183	9 kg	337
	4.5 kg	200	10 kg	364

*NRC2006 TDF

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL et al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL et al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.
- Ross LA et al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43(6): 1023-1026.
- Barber PJ et al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40(2): 62-70.
- Plantinga EA et al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157(7): 185-187.



RENAL





Multifunction diets



RENAL



HYPOALLERGENIC

GFR-AFR



URINARY



SATIETY

S/O-Kcal Control



URINARY



HYPOALLERGENIC

S/O-AFR



URINARY



CALM

S/O-Biopeptide

THERAPEUTIC DIET

Multifunction
diets

Multifunction diets



-  S/O-Kcal Control dry
-  S/O-AFR dry
-  GFR-AFR dry
-  S/O-Biopeptide dry/wet



URINARY



SATIETY



Available in 1,5kg bag

MULTIFUNCTION S/O-KCAL CONTROL



Contains the full benefits of Royal Canin Urinary and Satiety Feline, including:

Urine dilution: Urine dilution makes the urine less liable to form struvite and calcium oxalate stones.

Low RSS: Helps lower the concentration of ions contributing to struvite and oxalate crystal formation.

Satiatogenic effect: Contains a special blend of fibres which have a satiating effect on dogs.

High protein: A high protein content (111 g/1000 kcal ME) helps maintain muscle mass throughout the weight loss period.

RECOMMENDED FOR:

Urinary disorders:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence



Weight management:

- Overweight/obesity
- Diabetes mellitus type II

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Conditions where high fibre content is not recommended
- Growth, gestation/lactation

* when sodium restriction is sought

COMPOSITION

Dehydrated poultry protein, vegetable fibres, tapioca, wheat gluten*, maize gluten, wheat flour, hydrolysed animal proteins, minerals, animal fats, chicory pulp, fish oil, psyllium husks and seeds, hydrolysed crustaceans (source of glucosamine), hydrolysed cartilage (source of chondroitin).

* L.I.P. (Low Indigestible Protein): protein selected because of its very high digestibility.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 23800IU, Vitamin D3: 900IU, E1 (Iron): 29mg, E2 (Iodine): 2.9mg, E4 (Copper): 9mg, E5 (Manganese): 37mg, E6 (Zinc): 112mg, E8 (Selenium): 0.04mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	34g
Fat content	9g
Carbohydrate	18.4g
NFE	27.9g
Dietary fibre	23.5g
Crude fibre	14g
Omega 6	1.89g
Omega 3	0.37g
EPA+DHA	0.14g
Calcium	1.26g
Phosphorus	1.15g
Sodium	1.1g
L-Carnitine	20mg
Chondroitin sulphate + Glucosamine	50mg
Metabolisable energy*	304.6kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT CAT	CAT'S WEIGHT	START		AFTER 4 WEEKS*		MAINTENANCE	
		grams	cups	grams	cups	grams	cups
	2kg	28	3/8	23	2/8	30	3/8
	2.5kg	33	3/8	26	3/8	35	3/8
	3kg	38	4/8	30	3/8	40	4/8
	3.5kg	42	4/8	34	3/8	45	4/8
	4kg	47	5/8	37	4/8	49	5/8
	4.5kg	51	5/8	40	4/8	54	5/8
	5kg	55	5/8	43	4/8	58	6/8
	5.5kg	58	6/8	46	5/8	62	6/8
	6kg	62	6/8	49	5/8	66	6/8
	6.5kg	66	6/8	52	5/8	70	7/8
	7kg	69	7/8	55	5/8	73	7/8
	7.5kg	73	7/8	58	6/8	77	1
	8kg	76	7/8	60	6/8	81	1
	8.5kg	80	1	63	6/8	84	1
	9kg	83	1	66	6/8	88	1 1/8
	9.5kg	86	1	68	7/8	91	1 1/8
	10kg	89	1 1/8	71	7/8	95	1 1/8

*If the cat did not lose weight

For nutritional management of cats with struvite urolithiasis and excessive bodyweight: feed the diet for 5-12 weeks and re-evaluate based on clinical assessment of the response. To avoid recurrence of struvite uroliths, the diet should be prescribed for a further 6 months minimum followed by urinalysis. For detailed guidance on weight reduction please see product information for Satiety Feline. S/O-Kcal Control Feline can be maintained for the cat's lifetime. Water should be available at all times.

CLINICAL CLINICAL TRIALS OR STUDIES ABOUT ROYAL CANIN MULTIFUNCTION S/O-KCAL CONTROL

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution In Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.
- Houston DM & al. A Diet with a Struvite Relative Supersaturation Less Than 1 Is Effective in Dissolving Struvite Stones in Vivo. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S90-92.
- Reynolds BS & al. Effects of dietary salt intake on renal function: a 2-year study in healthy aged cats. J Vet Intern Med 2013 May-Jun;27(3):507-15 15-4.
- Bissot T. & al. Novel dietary strategies can improve the outcome of weight loss programmes in obese client-owned cats. J of Fel Med and Surgery, 2009, 12(2):104-112.
- Tvarijonavičute A. & al. Effects of weight loss in obese cats on biochemical analytes related to inflammation and glucose homeostasis. Domestic Animal Endocrinology 2012; 42: 129-141.
- Deagle G. & al. Long term follow up after weight management in obese cats. Journal of Nutritional Science [2014] vol 3, e25.
- Serisier S. & al. Weight loss and post weight loss maintenance energy requirement of obese colony cats. Proc. 21th ECVIM Congress. Sevilla 2011: 209-210.

MULTIFUNCTION S/O-KCAL CONTROL



URINARY



HYPOALLERGENIC

MULTIFUNCTION S/O-AFR



Available in 2kg bag

Contains the full benefits of Royal Canin Urinary and Hypoallergenic Feline, including:

Urine dilution: Urine dilution makes the urine less liable to form struvite and calcium oxalate stones.

aLow RSS: Helps lower the concentration of ions contributing to struvite and oxalate crystal formation.

Hydrolysed protein: hydrolysed protein with low molecular weight to help ensure very low allergenic potential.

Skin barrier: Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.

RECOMMENDED FOR:

Urinary disorders:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence



Dermatological/GI conditions:

- Adverse Food Reactions (AFR)
- Atopic dermatitis
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation

* when sodium restriction is sought

COMPOSITION

Rice, hydrolysed soya protein isolate, animal fats, vegetable fibres, minerals, hydrolysed poultry liver, chicory pulp, soya oil, fish oil, fructo-oligo-saccharides, borage oil.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 26000IU, Vitamin D3: 700IU, E1 (Iron): 34mg, E2 (Iodine): 3mg, E4 (Copper): 12mg, E5 (Manganese): 44mg, E6 (Zinc): 160mg, E8 (Selenium): 0.25mg.

Technological additives: Clinoptilolite of sedimentary origin: 5g, sodium, bisulphate (Urine acidifying substance): 5g. - Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein		27g
Fat content		16g
Carbohydrate		32.8g
NFE		37.3g
Dietary fibre		9.8g
Crude fibre		5.3g
Omega 6		4.39g
Omega 3		0.95g
EPA+DHA		0.32g
Calcium		0.71g
Phosphorus		0.7g
Sodium		1.3g
Potassium		0.8g
Vitamin D3		70IU
Metabolisable energy*		376.6kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	40	3/8	34	3/8		
	3kg	54	4/8	45	4/8		
	4kg	66	5/8	55	4/8	44	4/8
	5kg	78	6/8	65	5/8	52	4/8
	6kg	88	7/8	74	6/8	59	5/8
	7kg	99	1	82	7/8	66	5/8
	8kg	108	1 1/8	90	7/8	72	6/8
	9kg	118	1 2/8	98	1	79	6/8
10kg	127	1 2/8	106	1 1/8	85	7/8	

For nutritional management of cats with struvite urolithiasis and Adverse Food Reaction: feed the diet for 5-12 weeks and re-evaluate based on clinical assessment of the response. To avoid recurrence of struvite uroliths, the diet should be prescribed for a further 6 months minimum followed by urinalysis. S/O-AFR Feline can be maintained for the cat's lifetime. Water should be available at all times.

CLINICAL CLINICAL TRIALS OR STUDIES ABOUT ROYAL CANIN MULTIFUNCTION S/O-AFR

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas
- Houston DM & al. A Diet with a Struvite Relative Supersaturation Less Than 1 Is Effective in Dissolving Struvite Stones in Vivo. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S90-92
- Reynolds BS & al. Effects of dietary salt intake on renal function: a 2-year study in healthy aged cats. J Vet Intern Med 2013 May-Jun;27(3):507-15 15:4.
- Mandigers PJ & al. Efficacy of a commercial hydrolysate diet in eight cats suffering from inflammatory bowel disease or adverse reaction to food. Tijdschr Diergeneesk 2010; 135, 668-72.

MULTIFUNCTION S/O-AFR



RENAL



HYPOALLERGENIC

MULTIFUNCTION GFR-AFR



Available in 2kg bag



Contains the full benefits of Royal Canin Renal and Hypoallergenic Feline, including:

CKD dietary management: Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low level of phosphorus.

Reduce renal workload: Increased kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.

Hydrolysed protein: hydrolysed protein with low molecular weight to help ensure very low allergenic potential.

Skin barrier: Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.

RECOMMENDED FOR:

Renal disease:

- Chronic Kidney Disease (CKD)



Dermatological/GI conditions:

- Adverse Food Reactions (AFR)
- Atopic dermatitis
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, hydrolysed soya protein isolate, animal fats, chicory pulp, hydrolysed poultry liver, vegetable fibres, minerals, soya oil, fish oil, fructo-oligo-saccharides, borage oil, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 26000IU, Vitamin D3: 800IU, E1 (Iron): 40mg, E2 (Iodine): 3.6mg, E4 (Copper): 15mg, E5 (Manganese): 53mg, E6 (Zinc): 190mg, E8 (Selenium): 0.25mg.

Technological additives: Clinoptilolite of sedimentary origin: 5g.

Preservatives - Antioxidants.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	26g	
Fat content	20g	
Carbohydrate	33.7g	
NFE	39.1g	
Dietary fibre	9.4g	
Crude fibre	4g	
Omega 6	5.2g	
Omega 3	1.16g	
EPA+DHA	0.4g	
Calcium	0.6g	
Phosphorus	0.41g	
Sodium	0.35g	
Potassium	0.9g	
Vitamin D3	80IU	
Metabolisable energy*	411.7kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT CAT	CAT'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	37	3/8	31	2/8		
	3kg	49	4/8	41	3/8		
	4kg	61	5/8	51	4/8	40	3/8
	5kg	71	6/8	59	5/8	47	4/8
	6kg	81	6/8	67	5/8	54	4/8
	7kg	90	7/8	75	6/8	60	5/8
	8kg	99	1	83	7/8	66	5/8
	9kg	108	1 1/8	90	7/8	72	6/8
	10kg	116	1 1/8	97	1	77	6/8

For nutritional management of cats with Chronic Kidney Disease and management of Adverse Food Reaction: initially feed the diet for 3-8 weeks and re-evaluate based on clinical assessment of the response. When an Adverse Food Reaction is suspected, the cat's diet should be changed without any food transition. GFR-AFR Feline can be maintained for the cat's lifetime.

It is recommended to divide the daily intake into 2 meals. Water should be available at all times.

CLINICAL CLINICAL TRIALS OR STUDIES ABOUT ROYAL CANIN MULTIFUNCTION GFR-AFR

- Elliott J. & al. Survival of cats with naturally occurring chronic renal failure: effect of dietary management. J Small Anim Pract 2000; 41:235-244.
- Mandigers PJ & al. Efficacy of a commercial hydrolysate diet in eight cats suffering from inflammatory bowel disease or adverse reaction to food. Tijdschr Diergeneeskd 2010; 135, 668-72.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Ross LA & al. Effect of dietary phosphorus restriction on the kidneys of cats with reduced renal mass. Am J Vet Res 1982; 43(6): 1023-1026.
- Barber PJ & al. Effect of dietary phosphate restriction on renal secondary hyperparathyroidism in the cat. J Small Anim Pract 1999; 40(2): 62-70.
- Plantinga EA & al. Retrospective study of the survival of cats with acquired chronic renal insufficiency offered different commercial diets. Vet Rec 2005; 157(7): 185-187.

MULTIFUNCTION GFR-AFR



URINARY



CALM



Available in 2kg bag

MULTIFUNCTION S/O-BIOPEPTIDE



Contains the full benefits of Royal Canin Urinary Moderate Calorie and Calm Feline, including:

Moderate calorie: Moderate calorie content to help maintain ideal weight. Overweight is a risk factor for FLUTD.

Urine dilution: Urine dilution makes the urine less liable to form struvite and calcium oxalate stones.

Calming support: Contains hydrolysed casein (milk protein) and L-tryptophan to help manage exposure to increased environmental challenges.

Struvite dissolution: Helps dissolve struvite stones.

RECOMMENDED FOR:

- Management of risk factors for Feline Lower Urinary Tract Disease: tendency to overweight, insufficient water intake and exposure to increased environmental challenges
- Feline Idiopathic Cystitis (FIC)
- Struvite uroliths and urethral plugs: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation

* when sodium restriction is sought

COMPOSITION

Dehydrated poultry protein, rice, wheat gluten*, maize, wheat, vegetable fibres, hydrolysed animal proteins, maize gluten, minerals, chicory pulp, fish oil, animal fats, fructo-oligo-saccharides, psyllium husks and seeds, soya oil, hydrolysed milk protein⁽¹⁾, marigold extract (source of lutein).

* L.I.P. (Low Indigestible Protein): protein selected because of its very high digestibility.

ADDITIVES (KG)⁽¹⁾

Nutritional additives: Vitamin A: 28100IU, Vitamin D3: 800IU, E1 (Iron): 34mg, E2 (Iodine): 3.4mg, E4 (Copper): 10mg, E5 (Manganese): 44mg, E6 (Zinc): 131mg, E8 (Selenium): 0.07mg - Tryptophan: 4g. Preservatives - Antioxidants.

⁽¹⁾**NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein: 34% - Fat content: 11% - Crude ash: 9.1% - Crude fiber: 5.6% - ⁽¹⁾Alpha-S1 casein trypsin hydrolysate: 0.94g/kg - Taurine (total): 0.22% - Calcium: 1.08% - Phosphorus: 0.98% - Sodium: 1.15% - Magnesium: 0.07% - Potassium: 0.8% - Chloride: 1.89% - Sulphur: 0.8% - Urine acidifying substances: calcium sulfate: 1.4% - DL-Methionine.

Protein	34g
Fat content	11g
Carbohydrate	27.4g
NFE	34.8g
Dietary fibre	13g
Crude fibre	5.6g
Omega 6	2.25g
Omega 3	1.18g
EPA+DHA	0.67g
Calcium	1.08g
Phosphorus	0.98g
Sodium	1.15g
L-Tryptophan	0.4g
Hydrolyzed milk protein	94mg
Metabolisable energy*	356.5kcal

*Calculated according to NRC2006

⁽¹⁾**NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

CLINICAL TRIALS OR STUDIES ABOUT ROYAL CANIN MULTIFUNCTION S/O-KCAL CONTROL

- Houston DM & al. A Diet with a Struvite Relative Supersaturation Less Than 1 Is Effective in Dissolving Struvite Stones in Vivo. The British Journal of Nutrition 2011; 106 Suppl 1 (October): S90-92.
- Sagols E. & al. In vitro dissolution of feline struvite stones with 2 diets showing different relative supersaturation values. In Proceedings of the European Congress on Veterinary Internal Medicine 2015. Lisbonne, Portugal.
- Reynolds BS & al. Effects of dietary salt intake on renal function: a 2-year study in healthy aged cats. J Vet Intern Med 2013 May-Jun;27(3):507-15 15:4.
- Landsberg GM & al. Anxiety-reducing effectiveness of a therapeutic calming diet using an innovative non-invasive model of the assessment of fear and anxiety. Veterinary Behavior Symposium 2014 Proceedings: 19-20, Denver, Colorado [ahead of print].

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT CAT	CAT'S WEIGHT	NORMAL		OVERWEIGHT	
		grams	cups	grams	cups
	2kg	36	3/8		
	3kg	48	4/8		
	4kg	58	5/8	47	4/8
	5kg	68	5/8	55	4/8
	6kg	78	6/8	62	5/8
	7kg	87	7/8	69	5/8
	8kg	95	7/8	76	6/8
	9kg	104	1	83	7/8
	10kg	112	1 1/8	89	7/8

For nutritional management of cats with struvite urolithiasis and excessive bodyweight: feed the diet for 5-12 weeks and re-evaluate based on clinical assessment of the response. To avoid recurrence of struvite uroliths, the diet should be prescribed for a further 6 months minimum followed by urinalysis. Water should be available at all times.

MULTIFUNCTION S/O-BIOPEPTIDE



URINARY



CALM

MULTIFUNCTION S/O-BIOPEPTIDE



Available in 12 x 85g pouches

Contains the full benefits of Royal Canin Urinary Moderate Calorie and Calm Feline, including:

Moderate calorie: Moderate calorie content to help maintain ideal weight. Overweight is a risk factor for FLUTD.

Urine dilution: Urine dilution makes the urine less liable to form struvite and calcium oxalate stones.

Calming support: Contains hydrolysed casein (milk protein) and L-tryptophan to help manage exposure to increased environmental challenges.

Struvite dissolution: Helps dissolve struvite stones.

RECOMMENDED FOR:

- Management of risk factors for Feline Lower Urinary Tract Disease: tendency to overweight, insufficient water intake and exposure to increased environmental challenges
- Feline Idiopathic Cystitis (FIC)
- Struvite uroliths and urethral plugs: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation

* when sodium restriction is sought

COMPOSITION

Meat and animal derivatives, fish and fish derivatives, cereals, derivatives of vegetable origin, minerals, oils and fats, various sugars, milk and milk derivatives (including hydrolysed casein 0.03%).

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 240IU, L-tryptophan: 0.2g, E1 (Iron): 2mg, E2 (Iodine): 0.07mg, E4 (Copper): 0.5mg, E5 (Manganese): 0.7mg, E6 (Zinc): 7mg.

Technological additives: Clinoptilolite of sedimentary origin: 0.4g.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8g	44.4g
Fat content	3g	16.7g
Carbohydrate	4.25g	23.6g
NFE	4.5g	25g
Dietary fibre	1.15g	6.4g
Crude fibre	0.9g	5g
Omega 6	0.6g	3.3g
Omega 3	0.25g	1.4g
EPA+DHA	0.14g	0.78g
Calcium	0.2g	1.11g
Phosphorus	0.19g	1.06g
Magnesium	0.01g	0.06g
Sodium	0.23g	1.28g
Potassium	0.12g	0.67g
Chloride	0.3g	1.67g
L-Tryptophan	0.2g	1.11g
Hydrolyzed milk protein	30mg	167mg
Metabolisable energy*	74kcal	411kcal

*Calculated according to NRC2006

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Tournier C. & al. Struvite Relative Supersaturation: a Good Predictor of Struvite Stones Dissolution in Vitro. In Research Abstract Program of the 26th Annual ACVIM Forum 2008, San Antonio, Texas.
- Landsberg GM & al. Anxiety-reducing effectiveness of a therapeutic calming diet using an innovative non-invasive model of the assessment of fear and anxiety. Veterinary Behavior Symposium 2014 Proceedings: 19-20, Denver, Colorado (ahead of print).

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Markwell PJ & al. Clinical evaluation of commercially available urinary acidification diets in the management of idiopathic cystitis in cats. Journal of the American Veterinary Medical Association 1999; 214 (3): 361-65.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT CAT	CAT'S WEIGHT	NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch
	2kg	160	2	125	1 1/2
	3kg	210	2 1/2	170	2
	4kg	260	3	210	2 1/2
	5kg	305	3 1/2	245	3
	6kg	345	4	280	3 1/4
	7kg	385	4 1/2	310	3 3/4
	8kg	425	5	340	4
	9kg	465	5 1/2	370	4 1/4
	10kg	500	6	400	4 3/4

For nutritional management of cats with struvite urolithiasis: feed the diet for 5-12 weeks and re-evaluate based on clinical assessment of the response. To avoid recurrence of struvite uroliths, the diet should be prescribed for a further 6 months minimum followed by urinalysis. Water should be available at all times.

MULTIFUNCTION S/O-BIOPEPTIDE





Analysis tables



per 1000g as fed (Dry)
per 100kcal (Dry)
per 1000g as fed (Wet)
per 100g dry matter (Wet)
per 100kcal (Wet)
per 100kcal (Dry & wet)

ANALYSIS TABLE

dry

	SATIETY ¹ WEIGHT MANAGEMENT	OBESITY ² MANAGEMENT	DIABETIC ³	ANALLERGENIC ⁴	HYPOALLERGENIC ⁵	SENSITIVITY ⁶ CONTROL	DARTING ⁷ INTESTINAL	GLUTEN ⁸ INTESTINAL	FIBRE ⁹ FIBROLYSE	HEPATIC ¹⁰	RENAL ¹¹	RENAL ¹²	RENAL ¹³	URINARY S/O
Moisture %	5.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5
Proteins %	34	42	46	24.6	25.5	27	32	35	31	26	23	26	24.5	34.5
Fat content %	9	10	12	17	20	11	22	13	15	22	17	17	21.5	15
Carbohydrate %	29	19.8	18.8	37	34.5	37.6	20.9	27.3	28.9	28.6	38.1	34.7	32.4	31.3
NFE %	29	28.1	26.7	41.3	39.1	41.7	26.8	33.4	37.7	34.6	44.1	40.8	37.5	35.7
Dietary fibre %	23.6	14.7	11.5	8	8.2	10.1	11.1	11.1	11.7	11	10.7	10.7	9.7	6.5
Crude fibre %	14	6.4	3.6	3.7	3.6	6	5.2	5	2.9	5	4.7	4.6	4.6	2.1
Crude ash %	8.5	8	6.2	8	6.3	8.8	8.5	8.1	7.9	6.9	5.7	6.1	6.4	7.2
Arginine %	1.78	2.2	2.62	1.57	1.84	1.73	1.73	1.76	1.59	1.68	1.6	1.41	1.67	1.59
Taurine %	0.25	0.2	0.21	0.28	0.21	0.24	0.21	0.22	0.21	0.21	0.23	0.24	0.26	0.2
EPA+DHA %	0.2	0.16	0.3	0.45	0.32	0.35	0.31	0.3	0.32	0.35	0.42	0.41	0.41	0.26
Calcium %	1.34	1.32	0.92	0.6	0.73	1.65	1.04	1.04	1.06	0.65	0.6	0.62	0.7	0.8
Phosphorus %	1.17	1.21	0.89	0.68	0.7	1.17	1.01	0.99	1	0.59	0.3	0.44	0.41	0.7
Magnesium %	0.09	0.08	0.07	0.07	0.07	0.06	0.06	0.07	0.07	0.05	0.07	0.05	0.08	0.06
Sodium %	0.55	0.5	0.4	1	0.6	0.8	0.6	0.5	0.5	0.3	0.4	0.4	0.45	0.9
Potassium %	1.1	1	0.9	0.6	0.8	0.8	1	0.8	1	0.8	0.9	0.9	0.9	1
Chloride %	1.1	1	0.63	1.08	0.54	1.29	1.04	0.78	0.97	0.85	0.99	0.79	0.91	1.82
Iron mg/kg*	146	211	184	164	125	182	203	193	140	247	154	146	170	127
Copper mg/kg*	15	15	15	15	15	15	15	15	15	5	15	15	15	15
Zinc mg/kg*	130	207	139	226	259	233	189	194	207	250	205	205	205	193
Selenium mg/kg	0.4	0.4	0.3	0.3	0.1	0.3	0.32	0.3	0.1	0.5	0.1	0.2	0.2	0.3
Vitamin A IU/kg	28500	28000	27000	26000	25000	32000	24000	25000	25000	18000	22000	23000	22000	24000
Vitamin D3 IU/kg	1000	1000	1000	800	800	800	800	900	800	800	800	800	800	800
Vitamin E mg/kg	710	700	500	590	600	600	600	600	600	600	600	600	600	500
Vitamin C mg/kg	300	300	300	200	200	200	200	200	200	200	300	200	300	200
Vitamin B1 mg/kg	18	17	16.9	27	27.8	27.3	14.3	14.8	14.3	14.2	13.5	13.5	13.5	14.2
Vitamin B2 mg/kg	68	61.2	61	49	50.1	49.1	51.3	53.3	51.3	51.1	48.6	48.6	48.6	51.2
Vitamin B6 mg/kg	48	47	46.8	76	77.9	76.4	42.3	43.4	42.5	23.4	40.3	40.3	40.3	41.5
Niacin mg/kg	231	189.7	188.8	482	500	487	162.6	168.6	162.5	161.8	150.5	150.5	150.5	158.6
Pantothenic acid mg/kg	69	66.3	66	145	149.3	146.4	57.1	58.9	57.1	47.5	54.1	54.1	54.1	56.5
Vitamin B12 mg/kg	0.2	0.2	0.2	0.1	0.1	0.1	0.15	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Folic acid mg/kg	13	12.9	12.9	13.6	14	13.7	12.1	12.4	12.2	3.8	11.6	11.6	11.6	11.8
Biotin mg/kg	4	3.5	3.5	3.1	3.2	3.1	3.22	3.3	3.2	1.5	3.1	3.1	3.1	3.1
Choline mg/kg	3200	3400	2500	3000	2800	2500	2300	1900	1900	2500	3100	3100	3200	3100
L-carnitine mg/kg	200	200	200	*	-	-	-	-	-	300	-	-	-	-
Chondroitin+glucosamine mg/kg	500	500	-	*	-	-	-	-	-	-	-	-	-	1785
Polyphenols mg/kg	-	-	-	*	-	-	-	-	-	-	-	-	-	-
Metabolisable energy kcal/kg**	3075**	3559**	3867	3903	4102	3520	4076	3719	3886	4107	3924	3932	4112	3968

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE

dry

	URINARY S/O ^{***} LOW ACTIVITY ATTRACTION	URINARY S/O ^{***} MODERATE CAPTURE	URINARY S/O ^{***} HIGH DILUTION	MOBILITY	CALM	DENTAL	CONVALESCENCE SUPPORT	REHYDRATION SUPPORT
Moisture %	9.5	5.5	9.5	5.5	5.5	5.5	4	4
Proteins %	23	34	25	28	36	29	42	5
Fat content %	15	11	20	15	11	15	24	-
Carbohydrate %	37	27.3	32.4	34.4	28.8	31.7	18.6	86.5
NFE %	40.7	33.4	37.0	41	35.6	38.6	20	86.5
Dietary fibre %	7.1	13.1	6.2	11.3	10.8	12.4	4.4	-
Crude fibre %	3.4	7	1.6	4.7	4	5.5	3	-
Crude ash %	8.4	9.1	6.9	5.8	7.9	6.4	7	4.5
Arginine %	1.52	1.64	1.65	1.26	1.8	1.41	2.86	-
Taurine %	0.46	0.21	0.2	0.21	0.33	0.2	0.65	-
EPA+DHA %	0.6	0.26	0.30	0.73	0.31	0.21	0.02	-
Calcium %	1.2	1	1.14	0.75	1.15	0.84	1.5	-
Phosphorus %	1	0.95	0.99	0.62	1.01	0.65	1.2	-
Magnesium %	0.08	0.05	0.09	0.05	0.08	0.06	0.05	-
Sodium %	0.4	1.1	0.4	0.4	0.7	0.7	0.4	1
Potassium %	0.8	1	0.7	0.8	0.8	0.6	0.7	1
Chloride %	0.6	1.89	0.54	0.83	1.2	1.09	0.5	2.5
Iron mg/kg*	222	167	185	129	147	157	190	-
Copper mg/kg*	15	15	15	15	15	15	22	15
Zinc mg/kg*	238	219	224	250	243	220	143	-
Selenium mg/kg	0.3	0.15	0.3	0.2	0.2	0.2	0.2	-
Vitamin A IU/kg	32000	24000	19000	23000	28000	25000	24000	-
Vitamin D3 IU/kg	800	500	1000	700	800	800	1815	-
Vitamin E mg/kg	600	500	600	600	600	600	700	-
Vitamin C mg/kg	200	50	300	300	300	400	250	-
Vitamin B1 mg/kg	27.4	9.4	4.2	12.8	27.3	14.4	14.9	-
Vitamin B2 mg/kg	49.3	33.9	3.8	46.2	49.1	51.7	13.1	-
Vitamin B6 mg/kg	76.7	51.3	8.2	40.4	76.4	51.6	10	-
Niacin mg/kg	490	107.3	15	146.4	490	163.6	93	-
Pantothenic acid mg/kg	147	49.2	25.3	52.5	146.5	61.9	49	-
Vitamin B12 mg/kg	0.1	0.1	0.1	0.1	0.1	0.1	0.1	-
Folic acid mg/kg	13.8	18.4	0.8	11.9	13.7	16.3	1	-
Biotin mg/kg	3.1	4.26	1.1	3.1	3.1	4.1	2	-
Choline mg/kg	2000	2000	1500	2500	2500	2200	4000	-
L-carnitine mg/kg	-	200	-	50	50	-	50	-
Chondroitin+glucosamine mg/kg	-	1785	-	1000	-	-	-	-
Polyphenols mg/kg	-	-	-	-	-	-	-	-
Metabolisable energy kcal/kg**	3648	3505	4074	3860	3687	3809	4439	3329

RENAL + HYPOALLERGENIC	URINARY + HYPOALLERGENIC	URINARY + SAFETY	URINARY + CALM
5.5	5.5	5.5	5.5
26	27	34	34
20	16	9	11
33.7	32.8	18.4	27.4
39.1	37.3	27.9	34.8
9.4	9.8	23.5	13
4	5.3	14	5.6
5.4	8.9	9.6	9.1
1.82	1.91	1.76	1.73
0.25	0.15	0.26	0.22
0.4	0.32	0.14	1.18
0.6	0.71	1.26	1.08
0.41	0.7	1.15	0.98
0.04	0.04	0.07	0.07
0.35	1.3	1.1	1.15
0.9	0.8	1	0.8
0.78	2	1.96	1.89
109	145	156	135
15	15	15	15
207	178	157	171
0.3	0.3	0.3	0.3
28500	27500	26500	31000
800	700	900	800
590	500	700	600
220	-	-	-
27	22.7	16.2	25.8
48.6	40.8	58.3	46.4
75.6	63.5	44.7	72.4
481.5	404.5	180.6	461.3
144.9	121.7	63.2	138.7
0.1	0.1	0.2	0.1
13.6	11.4	12.3	13
3.1	2.6	3.3	2.9
3100	3200	3000	2900
-	-	200	200
-	-	500	-
-	-	-	-
4117	3766	3046	3565

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

dry

	SATIETY MANAGEMENT	OBESITY MANAGEMENT	DIABETIC	ANALLERGENIC	HYPOALLERGENIC	SENSITIVITY CONTROL	DARTING INTESTINAL	GLUCOSE INTESTINAL	FIBRE RESPONSE	HEPATIC	RENAL	RENAL	RENAL	URINARY S/O
Proteins g	11.1	11.8	11.9	6.3	6.2	7.7	7.9	9.4	8	6.3	5.9	6.6	6	8.7
Fat content g	2.9	2.8	3.1	4.4	4.9	3.1	5.4	3.5	3.9	5	4.3	4.3	5.2	3.8
Carbohydrate g	9.4	5.6	4.9	9.5	8.4	10.7	5.1	7.3	7.4	6.9	9.7	8.8	7.9	7.9
NFE g	9.4	7.9	6.9	10.6	9.5	11.9	6.6	9	9.7	8.4	11.2	10.4	9.1	9
Dietary fibre g	7.7	4.1	3	2.0	2	2.9	2.7	3	3	3	2.7	2.7	2.4	1.6
Crude fibre g	4.6	1.8	0.9	0.9	0.9	1.7	1.3	1.3	0.7	0.9	1.2	1.2	1.1	0.5
Crude ash g	2.8	2.2	1.6	2.0	1.5	2.5	2.1	2.2	2	1.6	1.5	1.6	1.6	1.8
Arginine g	0.58	0.6	0.7	0.4	0.5	0.5	0.4	0.5	0.4	0.7	0.4	0.4	0.4	0.4
Taurine g	0.08	56	54	72	51	68	52	59	54	50	59	61	63	50
EPA+DHA g	0.07	0.04	0.08	0.12	0.08	0.1	0.08	0.08	0.08	0.08	0.11	0.10	0.1	0.07
Calcium g	0.44	0.37	0.24	0.15	0.18	0.47	0.26	0.28	0.27	0.24	0.15	0.16	0.17	0.2
Phosphorus g	0.38	0.34	0.23	0.17	0.17	0.33	0.25	0.27	0.26	0.23	0.08	0.11	0.1	0.18
Magnesium g	0.029	22	18	18	17	17	15	19	18	20	18	13	19	15
Sodium mg	0.18	0.14	0.1	0.26	0.15	0.23	0.15	0.13	0.13	0.1	0.10	0.10	0.11	0.23
Potassium g	0.36	0.28	0.23	0.15	0.2	0.23	0.25	0.22	0.26	0.23	0.23	0.23	0.22	0.25
Chloride g	0.36	0.3	0.16	0.28	0.13	0.37	0.3	0.2	0.2	0.16	0.3	0.2	0.2	0.5
Iron mg*	4.75	5.9	4.8	4.2	3.1	5.2	5	5.2	3.6	4.8	3.92	3.71	4.13	3.2
Copper mg*	0.49	0.42	0.39	0.38	0.37	0.43	0.37	0.4	0.39	0.39	0.4	0.4	0.4	0.38
Zinc mg*	4.23	5.8	3.6	5.8	6.3	6.6	4.6	5.2	5.3	3.4	5.2	5.2	5	4.9
Selenium mg	0.013	11	7.5	7.7	2.4	7.4	8	8	3	10	3	6	5	7
Vitamin A IU	926.83	787	698	666	609	909	589	672	643	698	567	585	535	605
Vitamin D3 IU	32.52	28.1	26	20	20	23	19.6	24.2	20.6	25.9	20.4	20.3	19.5	20.2
Vitamin E mg	23.09	19.7	13	15	15	17	14.7	16.1	15.4	12.9	15.3	15.3	14.6	12.6
Vitamin C mg	9.76	8.4	8	5	5	6	4.9	5.4	5.1	7.8	7.6	5.1	7.3	5
Vitamin B1 mg	0.59	0.5	0.44	0.7	0.68	0.78	0.4	0.4	0.4	0.44	0.3	0.3	0.3	0.4
Vitamin B2 mg	2.2	1.7	1.6	1.3	1.2	1.4	1.3	1.4	1.3	1.6	1.2	1.2	1.2	1.3
Vitamin B6 mg	1.55	1.3	1.2	1.9	1.9	2.2	1	1.2	1.1	1.2	1	1	1	1
Niacin mg	7.51	5.3	4.9	12.3	12.2	13.8	4	4.5	4.2	4.9	3.8	3.8	3.7	4
Pantothenic acid mg	2.25	1.9	1.7	3.7	3.6	4.2	1.4	1.6	1.5	1.7	1.4	1.4	1.3	1.4
Vitamin B12 mg	0.006	4.8	4.4	3.6	3.4	4	3.7	4	3.9	3.7	3.6	3.6	3.4	3.8
Folic acid mg	0.42	0.36	0.33	0.35	0.34	0.39	0.3	0.33	0.31	0.33	0.30	0.30	0.28	0.3
Biotin mg	0.12	98.9	91	79	77	88	79	88.5	83.4	90	78.2	78.1	74.7	79.1
Choline mg	104.07	96	65	77	68	71	56	51	49	64.9	79	79	78	78
L-carnitine mg	6.5	5.62	52	*	-	-	-	-	-	7.3	-	-	-	-
Chondroitin+glucosamine mg	16.26	14	-	*	-	-	-	-	-	-	-	-	-	45
Polyphenols mg	-	-	-	*	-	-	-	-	-	-	-	-	-	-
Metabolisable energy calculated kcal/kg**	3075**	3559**	3867	3903	4102	3520	4076	3719	3886	4107	3924	3932	4112	3968

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

dry

	URINARY S/O ^{***} OLEFACTORY ATTRACTION	URINARY S/O ^{***} MODERATE OLEFACTION	URINARY S/O ^{***} HIGH OLEFACTION	MOBILITY	CALM	DENTAL	CONVALESCENCE SUPPORT	REHYDRATION SUPPORT
Proteins g	9.2	9.7	8.9	7.3	9.8	7.6	9.1	1.15
Fat content g	3.2	3.1	3.9	3.9	3	3.9	5.2	-
Carbohydrate g	8.4	7.8	7.5	8.9	7.8	8.3	4	25
NFE g	10	9.5	8.5	10.6	9.7	10.1	4.3	25
Dietary fibre g	3.9	3.7	1.8	2.9	2.9	3.3	1	-
Crude fibre g	2.2	2	0.73	1.2	1.1	1.4	0.6	-
Crude ash g	2.6	2.6	2.4	1.5	2.1	1.7	1.5	1.3
Arginine g	0.5	0.47	0.42	0.3	0.49	0.4	0.6	-
Taurine g	75	59.9	54.4	54	89.5	53	140	-
EPA+DHA g	0.14	0.07	0.09	0.19	0.08	0.06	-	-
Calcium g	0.26	0.29	0.23	0.19	0.31	0.22	0.32	-
Phosphorus g	0.26	0.27	0.23	0.16	0.27	0.17	0.26	-
Magnesium g	20	14.3	13	13	21.7	16	11	-
Sodium g	0.35	0.31	0.34	0.1	0.19	0.18	0.09	0.28
Potassium g	0.32	0.29	0.25	0.21	0.22	0.16	0.15	0.28
Chloride g	0.7	0.54	0.62	0.2	0.33	0.3	0.2	0.7
Iron mg*	3.4	4.8	4.3	3.3	4	4.1	4.1	-
Copper mg*	0.43	0.43	0.39	0.39	0.41	0.39	0.47	0.45
Zinc mg*	7.1	6.3	6	6.5	6.6	5.8	3.1	-
Selenium mg	16	4.3	3.6	6	6.5	6	5	-
Vitamin A IU	1010	684.8	621.9	596	759.4	656	519	-
Vitamin D3 IU	34.6	14.3	13	18.1	21.7	21	39.3	-
Vitamin E mg	17.3	14.3	13	15.5	16.3	15.8	15.1	-
Vitamin C mg	-	1.4	1.3	7.8	8.1	10.5	5.4	-
Vitamin B1 mg	0.8	0.27	0.24	0.3	0.74	0.4	0.3	-
Vitamin B2 mg	1.5	0.97	0.88	1.2	1.3	1.4	0.3	-
Vitamin B6 mg	2.3	1.5	1.3	1	2.1	1.4	0.2	-
Niacin mg	14.8	3.1	2.8	3.8	13.3	4.3	2	-
Pantothenic acid mg	4.5	1.4	1.3	1.4	4	1.6	1.1	-
Vitamin B12 mg	4.3	2.9	2.6	3.4	3.8	3.9	3.2	-
Folic acid mg	0.42	0.52	0.47	0.31	0.37	0.43	0.02	-
Biotin mg	94.6	121.5	110.1	80.6	84.1	106.9	36.7	-
Choline mg	72	57.1	59.6	65	68	58	87	-
L-carnitine mg	5.77	5.7	-	1.3	1.4	-	1.08	-
Chondroitin+glucosamine mg	-	50.9	45.7	26	-	-	-	-
Polyphenols mg	-	-	-	-	-	-	-	-
Metabolisable energy calculated kcal/kg**	3467	3505	3859	3860	3687	3809	4439	3329

RENAL + HYPOALLERGENIC	URINARY + HYPOALLERGENIC	URINARY + SAFETY	URINARY + CALM
6.3	7.2	11.2	9.5
4.9	4.2	3	3.1
8.2	8.7	6	7.7
9.5	9.9	9.2	9.8
2.3	2.6	7.7	3.6
1	1.4	4.6	1.6
1.3	2.4	3.2	2.6
0.4	0.5	0.6	0.5
61	40	85	62
0.1	0.08	0.05	0.33
0.15	0.19	0.41	0.3
0.1	0.19	0.38	0.27
10	11	23	20
0.09	0.35	0.36	0.32
0.22	0.21	0.33	0.22
0.19	0.53	0.64	0.53
2.6	3.9	5.1	3.8
0.36	0.4	0.49	0.42
5	4.7	5.2	4.8
6.6	7.2	10.8	8.4
692	730	870	870
19	19	30	22
14	13	23	17
5	-	-	-
0.7	0.6	0.5	0.7
1.2	1.1	1.9	1.3
1.8	1.7	1.5	2
11.7	10.7	5.9	12.9
3.5	3.2	2.1	3.9
3.4	2.9	5.6	3.6
0.33	0.3	0.4	0.36
75	69	110	82
75	85	98	81
-	-	7	6
-	-	16	-
-	-	-	-
4117	3766	3046	100

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE

wet

	SATIETY Wet Weight Management	OBESITY	DIABETIC	SENSITIVITY Chol & Bile	GASTRO INTESTINAL	ESTRO INTESTINAL Wet Weight Basis	RENAL Wet Choline	RENAL Wet Bile	RENAL Wet Taurine	RENAL	URINARY S/O Choline Pouch	URINARY S/O Bile Pouch	URINARY S/O Choline	URINARY S/O Bile	RECOVERY	URINARY CASH
Moisture %	84	84	82.5	80	80	82.5	77	80	80	77.5	80	80	77	82	72.5	82
Proteins %	7.5	7.5	9	7.2	7.6	7	8	6.8	6.6	7.5	7	7.5	8.2	8	14	8
Fat content %	2.2	2	3	6.5	5.6	2.7	8	6.6	6	6.5	5.3	5	5.2	3	6.2	3
Carbohydrate %	3.3	3.1	2.3	3.65	4.63	4.55	5	4.6	4.9	5.5	5.1	4.65	5.8	4.4	2.6	4.3
NFE %	3.3	3.1	2.8	3.8	4.4	5.5	5.3	4.8	5.2	6.3	5.9	5.4	6.1	5	3.6	4.5
Dietary fibre %	1.5	1.5	2	1.15	0.57	1.95	0.8	1	1.5	2	1.5	1.35	2	1.4	3	1.2
Crude fibre %	1.3	1.5	1.5	1	0.8	1	0.5	0.8	1.2	1.2	0.6	0.6	1.7	0.8	2	0.9
Crude ash %	1.7	1.9	1.2	1.5	1.6	1.3	1.2	1	1	1	1.2	1.5	1.5	1.2	1.7	1.6
Arginine %	0.4	0.4	0.5	0.4	0.42	0.38	0.4	0.35	0.35	0.4	0.4	0.4	0.4	0.45	0.7	0.5
Taurine %	0.12	0.18	0.14	0.13	0.12	0.1	0.17	0.14	0.13	0.14	0.13	0.13	0.14	0.12	0.2	0.1
EPA+DHA %	0.004	-	0.11	0.12	0.1	0.05	0.16	0.13	0.13	0.14	0.19	0.2	0.12	0.12	0.45	0.14
Calcium %	0.27	0.27	0.35	0.2	0.4	0.38	0.14	0.13	0.12	0.15	0.15	0.15	0.16	0.19	0.32	0.2
Phosphorus %	0.22	0.22	0.25	0.19	0.3	0.24	0.08	0.08	0.09	0.1	0.14	0.14	0.14	0.18	0.29	0.19
Magnesium %	0.01	0.02	0.01	0.01	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.009
Sodium %	0.16	0.16	0.2	0.17	0.11	0.1	0.1	0.1	0.08	0.09	0.08	0.15	0.13	0.08	0.16	0.23
Potassium %	0.17	0.16	0.14	0.16	0.14	0.11	0.23	0.19	0.18	0.20	0.28	0.27	0.2	0.17	0.21	0.12
Chloride %	0.14	0.2	0.2	0.24	0.1	0.06	0.15	0.14	0.13	0.11	0.3	0.3	0.26	0.15	0.2	0.3
Iron mg/kg*	30	30	47	40	30	25	35	30	30	30	27	60	60	30	80	38
Copper mg/kg*	3	3	5	4	4	1.7	2.5	2.5	3	3	2.4	3.5	3.2	6	5	1.8
Zinc mg/kg*	30	30	25	40	40	27	25	20	20	24	25	19	31	40	60	20
Selenium mg/kg	0.1	0.1	0.15	0.13	0.1	0.1	0.1	0.1	0.25	0.16	0.1	0.09	0.2	0.05	0.04	0.08
Vitamin A IU/kg	50000	8500	12600	3000	20000	11200	70000	52000	70000	21000	4000	6000	6000	20000	2000	60000
Vitamin D3 IU/kg	260	220	250	340	350	230	450	350	400	450	300	300	300	380	320	400
Vitamin E mg/kg	75	80	93	125	125	93	160	135	130	145	125	125	125	95	140	96
Vitamin C mg/kg	29	30	38	60	50	40	65	50	55	60	-	-	-	65	40	
Vitamin B1 mg/kg	2	2	10	2	30	45	10	10	10	10	10	10	29.2	30	53	5
Vitamin B2 mg/kg	1	2	2	2	3.8	3	2	2	2	2	3	3	5.6	2	5	1
Vitamin B6 mg/kg	1	1.9	1	3	3	2	1.5	1	1	1.5	2	2	2.3	1	3	1.5
Niacin mg/kg	20	22	15	250	35	25	20	20	20	20	30	30	40	20	56	15
Pantothenic acid mg/kg	2	5	5	40	5	7	3	3	3	3	10	05	12	3	3	2
Vitamin B12 mg/kg	0.01	0.01	0.01	0.02	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.01	0.05	0.005
Folic acid mg/kg	0.6	0.6	0.2	0.5	0.8	0.7	0.5	0.3	0.3	0.3	0.7	0.5	0.5	0.4	1.3	0.2
Biotin mg/kg	0.02	0.08	0.05	0.05	0.08	0.06	0.04	0.03	0.03	0.03	0.1	0.05	0.01	0.05	0.12	0.02
Choline mg/kg	600	470	500	800	630	510	850	800	700	810	600	600	700	500	700	570
L-carnitine mg/kg	32	32	12	-	-	-	-	-	-	-	-	-	-	40	-	40
Chondroitin+glucosamine mg/kg	80	75	-	-	-	-	-	-	-	-	400	400	460	400	-	-
Metabolisable energy kcal/kg**	607**	644**	711	962	931	708	1182	992	943	1062	984	967	998	758	1205	740

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100g dry matter

wet

	SATIETY WEIGHT MANAGEMENT	OBESITY MANAGEMENT	DIABETIC	SENSITIVITY CORREL	GASTRO MANAGEMENT	GASTRO INTESTINAL WEIGHT LOSS	RENAL With Salt	RENAL With Taurine	RENAL	RENAL Without PLOCH	URINARY S/O With PLOCH	URINARY S/O With PLOCH	URINARY S/O With PLOCH	URINARY S/O With PLOCH	RECOVERY	URINARY CASH
Moisture %	84	84	82.5	80	80	82.5	77	80	80	77.5	80	80	77	82	72.5	82
Proteins %	46.9	46.9	51.4	36	38	40	34.8	34	33	33.3	35	37.5	35.7	44.4	50.9	44
Fat content %	13.8	12.5	17.1	32.5	28	15.4	34.8	33	30	28.9	26.5	25	23.9	16.7	22.5	16.7
Carbohydrate %	20.6	19.4	13.1	18.3	23.2	26	21.7	23	24.5	24.4	25.3	23.3	25.2	24.4	9.5	23.6
NFE %	20.6	19.4	16	19	22	31.4	23	24	26	28	29.5	27	26.5	27.8	13.1	25
Dietary fibre %	9.4	9.4	11.4	5.8	2.9	11.1	3.5	5	7.5	8.9	7.3	6.8	8.7	7.8	10.9	6.4
Crude fibre %	8.1	9.4	8.6	5	4	5.7	2.2	4	6	5.3	3	3	7.4	4.4	7.3	5
Crude ash %	10.6	11.9	6.9	7.5	8	7.4	5.2	5	5	4.4	6	7.5	6.5	6.7	6.2	8.9
Arginine %	2.5	2.5	2.9	2	2.1	2.2	1.7	1.8	1.8	1.8	2	2	1.7	2.5	2.5	2.9
Taurine %	0.8	1.1	0.8	0.65	0.6	0.57	0.74	0.70	0.65	0.62	0.63	0.65	0.6	0.67	0.56	0.6
EPA+DHA %	0.03	-	0.6	0.6	0.5	0.3	0.7	0.7	0.7	0.6	0.95	1	0.5	0.7	1.6	0.8
Calcium %	1.7	1.7	2	1	2	2.2	0.6	0.7	0.6	0.7	0.75	0.8	0.7	1.1	1.2	1.1
Phosphorus %	1.4	1.38	1.43	0.95	1.5	1.37	0.35	0.40	0.45	0.44	0.7	0.7	0.6	1	1.05	1.1
Magnesium %	0.08	0.09	0.05	0.05	0.1	0.06	0.07	0.05	0.08	0.04	0.05	0.05	0.09	0.09	0.07	0.05
Sodium %	1	1	1.1	0.9	0.6	0.6	0.4	0.5	0.4	0.4	0.4	0.8	0.6	0.4	0.6	1.3
Potassium %	1.1	1	0.8	0.8	0.7	0.6	0.1	0.9	1	0.9	1.4	1.4	0.9	0.9	0.8	0.7
Chloride %	0.9	1.3	1.1	1.2	0.5	0.3	0.7	0.7	0.7	0.5	1.5	1.5	1.1	0.8	0.7	1.7
Iron mg*	18.8	19	27	20	15	14	15.2	15	15	15.3	14	30	26	17	29	21
Copper mg*	1.9	1.9	2.9	2	2	1.0	1	1	2	1	1.2	1.8	1.4	3.3	1.8	1
Zinc mg*	18.8	18.8	14.3	20	20	15.4	10.9	10	10	10.7	12.5	9.5	13.5	22.2	21.8	11
Selenium mg	0.1	0.06	0.09	0.07	0.05	0.06	0.04	0.05	0.13	0.07	0.05	0.05	0.09	0.03	0.01	0.04
Vitamin A IU	31250	5313	7200	1500	10000	6400	30434.78	26000	35000	9333.34	2000	3000	2609	11111	727	33333
Vitamin D3 IU	162.5	138	143	170	175	131	196	175	200	200	150	150	130	211	116	222
Vitamin E mg	46.9	50	53	63	63	53	70	68	65	64	62.5	63	54	53	51	53
Vitamin C mg	18.1	19	22	30	25	23	28	25	28	27	-	-	-	-	24	22
Vitamin B1 mg	1.3	1	6	1	15	26	4	5	5	4	5	5	13	17	19.3	3
Vitamin B2 mg	0.6	1	1	1	2	2	1	1	1	1	1.5	2	2	1	2	1
Vitamin B6 mg	0.6	1.2	0.6	1.5	1.5	1.1	0.7	0.5	0.5	0.7	1	1	1	0.6	1.1	1
Niacin mg	12.5	14	9	125	18	14	9	10	10	9	15	15	17	11	20	8
Pantothenic acid mg	1.3	3	3	20	3	4	1	2	2	1	5	3	5	2	1	1
Vitamin B12 mg	0.01	6.3	8	10	10	6	4.35	5	5	4.44	5	5	9	6	16	3
Folic acid mg	0.4	0.38	0.11	0.25	0.4	0.4	0.22	0.15	0.15	0.13	0.35	0.25	0.22	0.22	0.47	0.11
Biotin mg	0.01	50	29	25	40	34	17.39	15	15	13.33	30	25	4	28	44	11
Choline mg	375	294	286	400	315	291	370	400	350	360	300	300	304	278	255	317
L-carnitine mg	20	20	7	-	-	-	-	-	-	-	-	-	-	22.2	-	22
Chondroitin+glucosamine mg	46.9	47	-	-	-	-	-	-	-	-	200	200	200	222.2	-	-
Metabolisable energy kcal/kg**	607**	64.4**	71.1	96.2	93.1	70.8	118.2	99.2	94.3	106.2	98.4	96.7	99.8	75.8	120.5	74

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

wet

	SATIETY Wet (NRC2006)	OBESITY Wet (NRC2006)	DIABETIC	SENSITIVITY Oxide & Red	GLUTAMINE INTESTINAL	GLUTAMINE INTESTINAL	RENAL Wet (NRC2006)	RENAL Wet (NRC2006)	RENAL Wet (NRC2006)	RENAL Wet (NRC2006)	URINARY S/O Wet (NRC2006)	URINARY S/O Wet (NRC2006)	URINARY S/O Wet (NRC2006)	URINARY S/O Wet (NRC2006)	RECOVERY	URINARY S/O Wet (NRC2006)
Proteins g	12.4	11.6	12.7	7.5	8.2	9.9	6.8	6.9	7	7.1	7.1	7.8	8.2	10	11.6	10.8
Fat content g	3.6	3.1	17.1	6.8	6	3.8	6.8	6.7	6.4	6.1	5.4	5.2	5.5	3.7	5.1	4.1
Carbohydrate g	5.4	4.8	13.1	3.8	5	6.4	4.2	4.6	5.2	5.2	5.1	4.8	5.8	5.1	2.2	5.7
NFE g	5.44	4.8	16	4	4.7	7.8	4.5	4.8	5.5	5.9	6	5.6	6.1	5.9	3.0	6.1
Dietary fibre g	2.5	2.3	2.8	1.2	0.6	2.8	0.7	1	1.6	1.9	1.5	1.4	2	1.7	2.5	1.6
Crude fibre g	2.1	2.3	2.1	1.04	0.86	1.41	0.42	0.81	1.27	1.13	0.61	0.62	1.7	1	1.66	1.2
Crude ash g	2.8	3	1.7	1.6	1.7	1.8	1.0	1	1.1	0.9	1.22	1.6	1.5	1.9	1.4	2.2
Arginine g	0.66	621	700	416	451	537	338	353	371	377	407	414	401	561	0.58	0.7
Taurine g	0.2	280	197	135	129	141	144	141	138	132	127	134	135	149	129	135
EPA+DHA g	0.007	-	150	125	107	71	135	131	138	132	193	207	120	150	0.38	0.19
Calcium g	0.44	0.42	0.49	0.21	0.43	0.54	0.12	0.13	0.13	0.14	0.15	0.16	0.16	0.24	0.27	0.27
Phosphorus g	0.36	0.34	0.35	0.20	0.32	0.34	0.07	0.08	0.10	0.09	0.14	0.14	0.14	0.22	0.24	0.26
Magnesium g	0.02	23	13	10	21	14	13	10	16	9	10	10	16	20	16.6	-
Sodium g	0.26	0.25	0.28	0.18	0.12	0.14	0.08	0.10	0.08	0.08	0.08	0.16	0.13	0.1	0.13	0.31
Potassium g	0.28	0.25	0.2	0.17	0.15	0.16	0.19	0.19	0.19	0.19	0.28	0.28	0.2	0.21	0.17	0.16
Chloride g	0.23	0.31	0.28	0.25	0.11	0.08	0.13	0.14	0.14	0.10	0.3	0.31	0.26	0.19	0.17	0.41
Iron mg*	4.94	4.7	6.6	4.1	3.2	3.5	2.96	3.02	3.18	2.82	2.7	6.2	6	3.7	6.6	5.1
Copper mg*	0.49	0.5	0.7	0.4	0.4	0.2	0.2	0.3	0.3	0.3	0.24	0.4	0.3	0.7	0.4	0.24
Zinc mg*	4.94	4.7	3.5	4.2	4.3	3.8	2.1	2	2.1	2.3	2.5	2	3.1	5	5.0	2.7
Selenium mg	0.02	14	21	14	11	14	8	10	27	15	9	9	20	6	3.3	10.8
Vitamin A IU	8237.23	1320	1771	312	2148	1582	5922	5242	7423	1977	407	620	601	2494	166	8108
Vitamin D3 IU	42.83	34.2	35	35.3	37.6	32.5	38.1	35.3	42.4	42.4	30.5	31	30	47.4	26.6	54
Vitamin E mg	12.36	12.4	13	13	13.4	13.1	13.5	13.6	13.8	13.7	12.7	12.9	12.5	11.8	11.6	13
Vitamin C mg	4.78	4.7	5	6.2	5.4	5.6	5.5	5	5.8	5.6	4.1	4.1	-	5	5.4	5
Vitamin B1 mg	0.33	0.3	1.4	0.2	3.2	6.4	0.8	1	1.1	0.9	1	1	2.9	3.7	4.4	0.7
Vitamin B2 mg	0.16	0.3	0.28	0.2	0.4	0.4	0.2	0.2	0.2	0.3	0.3	0.6	-	0.4	0.1	0.1
Vitamin B6 mg	0.16	0.3	0.14	0.3	0.3	0.3	0.1	0.1	0.1	0.1	0.2	0.2	0.2	0.1	0.2	0.2
Niacin mg	3.29	3.4	2.1	26	3.8	3.5	1.7	2	2.1	1.9	3	3.1	4	2.5	4.6	2
Pantothenic acid mg	0.33	0.8	0.7	4.2	0.5	1	0.3	0.3	0.3	0.3	1	0.5	1.2	0.4	0.2	0.3
Vitamin B12 mg	0.002	1.6	1.4	2.1	2.1	1.4	0.8	1	1.1	0.9	1	1	2	1.2	3.7	0.7
Folic acid mg	0.1	93	37	52	86	99	42	30	32	28	71	52	50	50	0.11	27
Biotin mg	0.003	12.4	7	5.2	8.6	8.5	3.4	3	3.2	2.8	6.1	5.2	5	6.2	10.0	3
Choline mg	98.85	73	70	83	68	72	72	81	74	76	61	62	70	62	58.1	77
L-carnitine mg	5.27	4.97	1.69	-	-	-	-	-	-	-	7.11	7.24	-	4.99	-	5.4
Chondroitin+glucosamine mg	12.36	12	-	-	-	-	-	-	-	-	41	41	46.1	50	-	-
Metabolisable energy calculated NRC2006 kcal/kg	607**	644**	711	962	931	708	1182	992	943	1062	984	967	998	758	1205	740

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

1 - Weight management

dry	wet	
	SATIETY ^{100%} weight management	OBSESITY ^{100%} management
Proteins g	11.1	11.8
Fat content g	2.9	2.8
Carbohydrate g	9.4	5.6
NFE g	9.4	7.9
Dietary fibre g	7.7	4.1
Crude fibre g	4.6	1.8
Crude ash g	2.8	2.2
Arginine g	0.58	0.6
Taurine g	0.08	56
EPA+DHA g	0.07	0.04
Calcium g	0.44	0.37
Phosphorus g	0.38	0.34
Magnesium g	0.029	22
Sodium g	0.18	0.14
Potassium g	0.36	0.28
Chloride g	0.36	0.3
Iron mg*	4.75	5.9
Copper mg*	0.49	0.42
Zinc mg*	4.23	5.8
Selenium mg	0.013	11
Vitamin A IU	926.83	787
Vitamin D3 IU	32.52	28.1
Vitamin E mg	23.09	19.7
Vitamin C mg	9.76	8.4
Vitamin B1 mg	0.59	0.5
Vitamin B2 mg	2.2	1.7
Vitamin B6 mg	1.55	1.3
Niacin mg	7.51	5.3
Pantothenic acid mg	2.25	1.9
Vitamin B12 mg	0.006	4.8
Folic acid mg	0.42	0.36
Biotin mg	0.12	98.9
Choline mg	104.07	96
L-carnitine mg	6.5	5.62
Chondroitin+glucosamine mg	16.26	14
Polyphenols mg	-	-
Metabolisable energy kcal/kg**	3075**	3559***

wet

SATIETY ^{100%} weight management	OBSESITY ^{100%} management
12.4	11.6
3.6	3.1
5.4	4.8
5.44	4.8
2.5	2.3
2.1	2.3
2.8	3
0.66	621
0.2	280
0.007	-
0.44	0.42
0.36	0.34
0.02	23
0.26	0.25
0.28	0.25
0.23	0.31
4.94	4.7
0.49	0.5
4.94	4.7
0.02	14
8237.23	1320
42.83	34.2
12.36	12.4
4.78	4.7
0.33	0.3
0.16	0.3
0.16	0.3
3.29	3.4
0.33	0.8
0.002	1.6
0.1	93
0.003	12.4
98.85	73
5.27	4.97
12.36	12
-	-
607***	644***

2 - Diabetes mellitus

dry	wet
DIABETIC ^{100%}	DIABETIC ^{100%}
11.9	12.7
3.1	17.1
4.9	13.1
6.9	16
3	2.8
0.9	2.1
1.6	1.7
0.7	0.7
54	197
0.08	0.15
0.24	0.49
0.23	0.35
18	13
0.1	0.28
0.23	0.2
0.16	0.28
4.8	6.6
0.39	0.7
3.6	3.5
7.5	21
698	1771
26	35
13	13
8	5
0.44	1.4
1.6	0.28
1.2	0.14
4.9	2.1
1.7	0.7
4.4	1.4
0.33	0.04
91	7
65	70
52	1.69
-	-
-	-
3867	711

dry

DIABETIC ^{100%}
11.9
3.1
4.9
6.9
3
0.9
1.6
0.7
54
0.08
0.24
0.23
18
0.1
0.23
0.16
4.8
0.39
3.6
7.5
698
26
13
8
0.44
1.6
1.2
4.9
1.7
4.4
0.33
91
65
52
-
-
3867

wet

DIABETIC ^{100%}
12.7
17.1
13.1
16
2.8
2.1
1.7
0.7
197
0.15
0.49
0.35
13
0.28
0.2
0.28
6.6
0.7
3.5
21
1771
35
13
5
1.4
0.28
0.14
2.1
0.7
1.4
0.04
7
70
1.69
-
-
711

3 - Adverse reaction to food

dry			wet
ANALLERGENIC ^{100%}	HYPHOALLERGENIC ^{100%}	SENSITIVITY ^{100%} control	SENSITIVITY ^{100%}
6.3	6.2	7.7	8
4.4	4.9	3.1	5.5
9.5	8.4	10.7	4.5
10.6	9.5	11.9	5.8
2.0	2	2.9	1.8
0.9	0.9	1.7	0.5
2.0	1.5	2.5	2.2
0.4	0.5	0.5	0.3
72	51	68	130.5
0.12	0.08	0.1	0.25
0.15	0.18	0.47	0.45
0.17	0.17	0.33	0.35
18	17	17	18.1
0.26	0.15	0.23	0.22
0.15	0.2	0.23	0.17
0.28	0.13	0.37	0.2
4.2	3.1	5.2	2.5
0.38	0.37	0.43	0.4
5.8	6.3	6.6	2.8
7.7	2.4	7.4	90
666	609	909	301.2
20	20	23	40.2
15	15	17	13.1
5	5	6	5
0.7	0.68	0.78	7
1.3	1.2	1.4	0.4
1.9	1.9	2.2	0.3
12.3	12.2	13.8	25.1
3.7	3.6	4.2	4
3.6	3.4	4	2
0.35	0.34	0.39	0.08
79	77	88	50.2
77	68	71	70.3
*	-	-	-
*	-	-	-
*	-	-	-
3903	4102	3520	996

dry

ANALLERGENIC ^{100%}	HYPALLERGENIC ^{100%}	SENSITIVITY ^{100%} control
6.3	6.2	7.7
4.4	4.9	3.1
9.5	8.4	10.7
10.6	9.5	11.9
2.0	2	2.9
0.9	0.9	1.7
2.0	1.5	2.5
0.4	0.5	0.5
72	51	68
0.12	0.08	0.1
0.15	0.18	0.47
0.17	0.17	0.33
18	17	17
0.26	0.15	0.23
0.15	0.2	0.23
0.28	0.13	0.37
4.2	3.1	5.2
0.38	0.37	0.43
5.8	6.3	6.6
7.7	2.4	7.4
666	609	909
20	20	23
15	15	17
5	5	6
0.7	0.68	0.78
1.3	1.2	1.4
1.9	1.9	2.2
12.3	12.2	13.8
3.7	3.6	4.2
3.6	3.4	4
0.35	0.34	0.39
79	77	88
77	68	71
*	-	-
*	-	-
*	-	-
3903	4102	3520

wet

SENSITIVITY ^{100%} control
8
5.5
4.5
5.8
1.8
0.5
2.2
0.3
130.5
0.25
0.45
0.35
18.1
0.22
0.17
0.2
2.5
0.4
2.8
90
301.2
40.2
13.1
5
7
0.4
0.3
25.1
4
2
0.08
50.2
70.3
-
-
-
996

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

4 - Gastro-intestinal disorders

dry

	GAstro INTESTINAL	GAstro INTESTINAL MODERATE CALORIE	FIBRE RESPONSE
Proteins g	7.9	9.4	8
Fat content g	5.4	3.5	3.9
Carbohydrate g	5.1	7.3	7.4
NFE g	6.6	9	9.7
Dietary fibre g	2.7	3	3
Crude fibre g	1.3	1.3	0.7
Crude ash g	2.1	2.2	2
Arginine g	0.4	0.5	0.4
Taurine g	52	59	54
EPA+DHA g	0.08	0.08	0.08
Calcium g	0.26	0.28	0.27
Phosphorus g	0.25	0.27	0.26
Magnesium g	15	19	18
Sodium g	0.15	0.13	0.13
Potassium g	0.25	0.22	0.26
Chloride g	0.3	0.2	0.2
Iron mg*	5	5.2	3.6
Copper mg*	0.37	0.4	0.39
Zinc mg*	4.6	5.2	5.3
Selenium mg	8	8	3
Vitamin A IU	589	672	643
Vitamin D3 IU	19.6	24.2	20.6
Vitamin E mg	14.7	16.1	15.4
Vitamin C mg	4.9	5.4	5.1
Vitamin B1 mg	0.4	0.4	0.4
Vitamin B2 mg	1.3	1.4	1.3
Vitamin B6 mg	1	1.2	1.1
Niacin mg	4	4.5	4.2
Pantothenic acid mg	1.4	1.6	1.5
Vitamin B12 mg	3.7	4	3.9
Folic acid mg	0.3	0.33	0.31
Biotin mg	79	88.5	83.4
Choline mg	56	51	49
L-carnitine mg	-	-	-
Chondroitin+glucosamine mg	-	-	-
Polyphenols mg	-	-	-
Metabolisable energy kcal/kg**	4076	3719	3886

wet

GASTRO INTESTINAL	GASTRO INTESTINAL MODERATE CALORIE
8.2	9.9
6	3.8
5	6.4
4.7	7.8
0.6	2.8
0.86	1.41
1.7	1.8
0.45	0.54
129	141
0.11	0.07
0.43	0.54
0.32	0.34
21	14
0.12	0.14
0.15	0.16
0.11	0.08
3.2	3.5
0.4	0.2
4.3	3.8
11	14
2148	1582
37.6	32.5
13.4	13.1
5.4	5.6
3.2	6.4
0.4	0.4
0.3	0.3
3.8	3.5
0.5	1
2.1	1.4
0.09	0.1
8.6	8.5
68	72
-	-
-	-
-	-
931	708

5 - Liver disease

dry

HEPATIC
6.3
5
6.9
8.4
3
0.9
1.6
0.7
50
0.08
0.24
0.23
20
0.1
0.23
0.16
4.8
0.39
3.4
10
698
25.9
12.9
7.8
0.44
1.6
1.2
4.9
1.7
3.7
0.33
90
64.9
7.3
-
-
4107

ANALYSIS TABLE per 100kcal

6 - Renal disease

dry

	RENAL 100 g	RENAL 100 g	RENAL 100 g
Proteins g	5.9	6.6	6
Fat content g	4.3	4.3	5.2
Carbohydrate g	9.7	8.8	7.9
NFE g	11.2	10.4	9.1
Dietary fibre g	2.7	2.7	2.4
Crude fibre g	1.2	1.2	1.1
Crude ash g	1.5	1.6	1.6
Arginine g	0.4	0.4	0.4
Taurine g	59	61	63
EPA+DHA g	0.11	0.10	0.10
Calcium g	0.15	0.16	0.17
Phosphorus g	0.08	0.11	0.10
Magnesium g	18	13	19
Sodium g	0.10	0.10	0.11
Potassium g	0.23	0.23	0.22
Chloride g	0.3	0.2	0.2
Iron mg*	3.92	3.7	4.1
Copper mg*	0.4	0.4	0.4
Zinc mg*	5.2	5.2	5
Selenium mg	3	6	5
Vitamin A IU	561	585	535
Vitamin D3 IU	20.4	20.3	19.5
Vitamin E mg	15.3	15.3	14.6
Vitamin C mg	7.6	5.1	7.3
Vitamin B1 mg	0.3	0.3	0.3
Vitamin B2 mg	1.2	1.2	1.2
Vitamin B6 mg	1	1	1
Niacin mg	3.8	3.8	3.7
Pantothenic acid mg	1.4	1.4	1.3
Vitamin B12 mg	3.6	3.6	3.4
Folic acid mg	0.30	0.30	0.28
Biotin mg	78.2	78.1	74.7
Choline mg	79	79	78
L-carnitine mg	-	-	-
Chondroitin+glucosamine mg	-	-	-
Polyphenols mg	-	-	-
Metabolisable energy kcal/kg**	3924	3932	4112

wet

RENAL	RENAL	RENAL	RENAL
6.8	6.9	7	7.1
6.8	6.7	6.4	6.1
4.2	4.6	5.2	5.2
4.5	4.8	5.5	5.9
0.7	1	1.6	1.9
0.42	0.81	1.27	1.13
1	1	1.1	0.9
338	353	371	377
144	141	138	132
135	131	138	132
0.12	0.13	0.13	0.14
0.07	0.08	0.10	0.09
13	10	16	9
0.08	0.10	0.08	0.08
0.19	0.19	0.19	0.19
0.13	0.14	0.14	0.10
3	3	3.2	2.8
0.2	0.3	0.3	0.3
2.1	2	2.1	2.3
8	10	27	15
5922	5242	7423	1977
38.1	35.3	42.4	42.4
13.5	13.6	13.8	13.7
5.5	5	5.8	5.6
0.8	1	1.1	0.9
0.2	0.2	0.2	0.2
0.1	0.1	0.1	0.1
1.7	2	2.1	1.9
0.3	0.3	0.3	0.3
0.8	1	1.1	0.9
42	30	32	28
3.4	3	3.2	2.8
72	81	74	76
-	-	-	-
-	-	-	-
-	-	-	-
1182	992	943	1062

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

7 - Lower urinary tract disease

dry					wet				
	URINARY S/O	URINARY S/O	URINARY S/O	URINARY S/O	URINARY S/O	URINARY S/O	URINARY S/O	URINARY S/O	URINARY S/O
	CHICKEN POUCH	BEAF POUCH	MEDIUM CALORIE	HIGH CALORIE	CHICKEN POUCH	BEAF POUCH	MEDIUM CALORIE	HIGH CALORIE	HIGH CALORIE
Proteins g	8.8	9.2	9.7	8.9	7.1	7.8	8.2	10	
Fat content g	3.8	3.2	3.1	3.9	5.4	5.2	5.5	3.7	
Carbohydrate g	7.8	8.4	7.8	7.5	5.1	4.8	5.8	5.1	
NFE g	8.9	10	9.5	8.5	6	5.6	6.1	5.9	
Dietary fibre g	1.7	3.9	3.7	1.8	1.5	1.4	2	1.7	
Crude fibre g	0.63	2.2	2	0.73	0.61	0.62	1.7	1	
Crude ash g	1.9	2.6	2.6	2.4	1.22	1.6	1.5	1.9	
Arginine g	0.42	0.5	0.47	0.42	0.41	0.41	0.4	0.56	
Taurine g	50.7	75	59.9	54.4	127	134	135	149	
EPA+DHA g	0.07	0.14	0.07	0.09	0.19	0.21	0.12	0.15	
Calcium g	0.2	0.26	0.29	0.23	0.15	0.16	0.16	0.24	
Phosphorus g	0.18	0.26	0.27	0.23	0.14	0.14	0.14	0.22	
Magnesium g	12.7	20	14.3	13	10	10	16	20	
Sodium g	0.23	0.35	0.31	0.34	0.08	0.16	0.13	0.1	
Potassium g	0.25	0.32	0.29	0.25	0.28	0.28	0.2	0.21	
Chloride g	0.48	0.7	0.54	0.62	0.3	0.31	0.26	0.19	
Iron mg*	4.1	3.4	4.8	4.3	2.7	6.2	6	3.7	
Copper mg*	0.38	0.43	0.43	0.39	0.24	0.4	0.3	0.7	
Zinc mg*	5.9	7.1	6.3	6	2.5	2	3.1	5	
Selenium mg	7.4	16	4.3	3.6	9	9	20	6	
Vitamin A IU	608.7	1010	684.8	621.9	407	620	601	2494	
Vitamin D3 IU	20.3	34.6	14.3	13	30.5	31	30	47.4	
Vitamin E mg	12.7	17.3	14.3	13	12.7	12.9	12.5	11.8	
Vitamin C mg	5.1	-	1.4	1.3	4.1	4.1	-	5	
Vitamin B1 mg	0.36	0.8	0.27	0.24	1	1	2.9	3.7	
Vitamin B2 mg	1.3	1.5	0.97	0.88	0.3	0.3	0.6	-	
Vitamin B6 mg	1.1	2.3	1.5	1.3	0.2	0.2	0.2	0.1	
Niacin mg	4.1	14.8	3.1	2.8	3	3.1	4	2.5	
Pantothenic acid mg	1.5	4.5	1.4	1.3	1	0.5	1.2	0.4	
Vitamin B12 mg	3.8	4.3	2.9	2.6	1	1	2	1.2	
Folic acid mg	0.31	0.42	0.52	0.47	0.07	0.05	0.05	0.05	
Biotin mg	81.9	94.6	121.5	110.1	6.1	5.2	5	6.2	
Choline mg	63.4	72	57.1	59.6	61	62	70	62	
L-carnitine mg	-	5.77	5.7	-	7.11	7.24	-	4.99	
Chondroitin+glucosamine mg	45.3	-	50.9	45.7	41	41	46.1	50	
Polyphenols mg	-	-	-	-	-	-	-	-	
Metabolisable energy kcal/kg**	3943	3467	3505	3859	984	967	998	758	

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

8 - Mobility		9 - Periods of adaptation		10 - Hygiene		11 - Convalescence		
dry		dry		dry		instant	wet	
	MOBILITY		CALM		DENTAL	CONVALESCENCE SUPPORT	REHYDRATION SUPPORT	RECOVERY
Proteins g	7.3	9.8		7.6		9.1	1.15	11.6
Fat content g	3.9	3		3.9		5.2	-	5.1
Carbohydrate g	8.9	7.8		8.3		4	25	2.2
NFE g	10.6	9.7		10.1		4.3	25	3.0
Dietary fibre g	2.9	2.9		3.3		1	-	2.5
Crude fibre g	1.2	1.1		1.4		0.6	-	1.66
Crude ash g	1.5	2.1		1.7		1.5	1.3	1.4
Arginine g	0.3	0.49		0.4		0.6	-	0.58
Taurine g	54	89.5		53		140	-	129
EPA+DHA g	0.19	0.08		0.06		-	-	0.38
Calcium g	0.19	0.31		0.22		0.32	-	0.27
Phosphorus g	0.16	0.27		0.17		0.26	-	0.24
Magnesium g	13	21.7		16		11	-	16.6
Sodium g	0.1	0.19		0.18		0.09	0.28	0.13
Potassium g	0.21	0.22		0.16		0.15	0.28	0.17
Chloride g	0.2	0.33		0.3		0.2	0.7	0.17
Iron mg*	3.3	4		4.1		4.1	-	6.6
Copper mg*	0.39	0.41		0.39		0.47	0.45	0.4
Zinc mg*	6.5	6.6		5.8		3.1	-	5.0
Selenium mg	6	6.5		6		5	-	3.3
Vitamin A IU	596	759.4		656		519	-	166
Vitamin D3 IU	18.1	21.7		21		39.3	-	26.6
Vitamin E mg	15.5	16.3		15.8		15.1	-	11.6
Vitamin C mg	7.8	8.1		10.5		5.4	-	5.4
Vitamin B1 mg	0.3	0.74		0.4		0.3	-	4.4
Vitamin B2 mg	1.2	1.3		1.4		0.3	-	0.4
Vitamin B6 mg	1	2.1		1.4		0.2	-	0.2
Niacin mg	3.8	13.3		4.3		2	-	4.6
Pantothenic acid mg	1.4	4		1.6		1.1	-	0.2
Vitamin B12 mg	3.4	3.8		3.9		3.2	-	3.7
Folic acid mg	0.31	0.37		0.43		0.02	-	0.11
Biotin mg	80.6	84.1		106.9		36.7	-	10.0
Choline mg	65	68		58		87	-	58.1
L-carnitine mg	1.3	1.4		-		1.08	-	-
Chondroitin+glucosamine mg	26	-		-		-	-	-
Polyphenols mg	-	-		-		-	-	-
Metabolisable energy kcal/kg**	3860	3687		3809		4439	3329	1185

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

Multifunction

	dry				wet
	RENAL	URINARY	URINARY	URINARY	URINARY
	HYPOALLERGENIC	HYPOALLERGENIC	SATETY	CRAM	CRAM
Proteins g	6.3	7.2	11.2	9.5	10.8
Fat content g	4.9	4.2	3	3.1	4.1
Carbohydrate g	8.2	8.7	6	7.7	5.7
NFE g	9.5	9.9	9.2	9.8	6.1
Dietary fibre g	2.3	2.6	7.7	3.6	1.6
Crude fibre g	1	1.4	4.6	1.6	1.2
Crude ash g	1.3	2.4	3.2	2.6	2.2
Arginine g	0.4	0.5	0.6	0.5	0.7
Taurine g	61	40	85	62	135
EPA+DHA g	0.1	0.08	0.05	0.33	0.19
Calcium g	0.15	0.19	0.41	0.3	0.27
Phosphorus g	0.1	0.19	0.38	0.27	0.26
Magnesium g	10	11	23	20	-
Sodium g	0.09	0.35	0.36	0.32	0.31
Potassium g	0.22	0.21	0.33	0.22	0.16
Chloride g	0.19	0.53	0.64	0.53	0.41
Iron mg*	2.6	3.9	5.1	3.8	5.1
Copper mg*	0.36	0.4	0.49	0.42	0.24
Zinc mg*	5	4.7	5.2	4.8	2.7
Selenium mg	6.6	7.2	10.8	8.4	10.8
Vitamin A IU	692	730	870	870	8108
Vitamin D3 IU	19	19	30	22	54
Vitamin E mg	14	13	23	17	13
Vitamin C mg	5	-	-	-	5
Vitamin B1 mg	0.7	0.6	0.5	0.7	0.7
Vitamin B2 mg	1.2	1.1	1.9	1.3	0.1
Vitamin B6 mg	1.8	1.7	1.5	2	0.2
Niacin mg	11.7	10.7	5.9	12.9	2
Pantothenic acid mg	3.5	3.2	2.1	3.9	0.3
Vitamin B12 mg	3.4	2.9	5.6	3.6	0.7
Folic acid mg	0.33	0.3	0.4	0.36	27
Biotin mg	75	69	110	82	3
Choline mg	75	85	98	81	77
L-carnitine mg	-	-	7	6	5.4
Chondroitin+glucosamine mg	-	-	16	-	-
Polyphenols mg	-	-	-	-	-
Metabolisable energy kcal/kg**	4117	3766	3046	100	740

*Part of these trace elements is chelated
 calculated [NRC2006] - *NRC2006 TDF

ANALYSIS TABLE AS FED

LIQUID

RECOVERY LIQUID



RENAL LIQUID



Moisture (g/100 mL)	85	85
Proteins (g/100 mL)	8.2	7
Fat content (g/100 mL)	5.2	5.5
Carbohydrate (g/100 mL)	5.1	6.6
NFE (g/100 mL)	5.1	6.6
Crude fibre (g/100 mL)	0	0
Dietary fibre (g/100 mL)	0	0
Crude ash (g/100 mL)	1	0.9
Arginine (g/100 mL)	0.5	0.3
Taurine (g/100 mL)	0.15	0.14
EPA + DHA (g/100 mL)	0.12	0.14
Calcium (g/100 mL)	0.2	0.1
Phosphorus (g/100 mL)	0.17	0.08
Magnesium (g/100 mL)	0.013	0.012
Sodium (g/100 mL)	0.1	0.08
Potassium (g/100 mL)	0.21	0.2
Chloride (g/100 mL)	0.13	0.1
Iron* (mg/1000mL)	28.5	30
Copper* (mg/1000mL)	2.7	1.8
Zinc* (mg/1000mL)	42	28
Selenium (µg/1000mL)	140	150
Vitamin A (IU/1000 mL)	3660	3330
Vitamin D3 (IU/1000 mL)	280	320
Vitamin E (mg/1000 mL)	160	170
Vitamin C (mg/1000 mL)	150	60
Vitamin B1 (mg/1000 mL)	1.6	2.2
Vitamin B2 (mg/1000 mL)	1.3	1.5
Vitamin B6 (mg/1000 mL)	1.3	1.4
Niacin (mg/1000 mL)	20	20
Pantothenic acid (mg/1000 mL)	4	3.2
Vitamin B12 (µg/1000mL)	10	12
Folic acid (mg/1000 mL)	0.8	0.5
Biotin (µg/1000mL)	30	39
Choline (mg/1000 mL)	750	840
Metabolisable energy** kcal/L	1051	1080

*Part of these trace elements is chelated - **NRC2006 TDF

ANALYSIS TABLE PER 100KCAL **

LIQUID

RECOVERY LIQUID



RENAL LIQUID



Proteins g	7.80	6.48
Fat content g	4.95	5.09
Carbohydrate g	4.85	6.11
NFE g	4.85	6.11
Crude fibre g	0	0
Dietary fibre g	0	0
Crude ash g	0.95	0.83
Arginine g	0.48	0.28
Taurine g	0.14	0.13
EPA + DHA g	0.11	0.13
Calcium g	0.19	0.09
Phosphorus g	0.16	0.07
Magnesium g	0.012	0.01
Sodium g	0.1	0.07
Potassium g	0.2	0.19
Chloride g	0.12	0.09
Iron mg	2.71	2.78
Copper mg*	0.26	0.17
Zinc mg*	4	2.59
Selenium mg	13.32	13.89
Vitamin A IU	348.24	308.33
Vitamin D3 IU	26.64	29.63
Vitamin E mg	15.22	15.74
Vitamin C mg	14.27	5.56
Vitamin B1 mg	0.15	0.2
Vitamin B2 mg	0.12	0.14
Vitamin B6 mg	0.12	0.13
Niacin mg	1.9	1.85
Pantothenic acid mg	0.38	0.3
Vitamin B12 mg	0.95	1.11
Folic acid mg	0.08	0.05
Biotin mg	2.85	3.61
Choline mg	71.36	77.78

*Part of these trace elements is chelated - **NRC2006 TDF







CANINE



Index of health issues

Monofunction diets

Multifunction diets

Analysis tables



Index of health issues



PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

A	Adverse Food Reactions (AFR: Food allergy/Food intolerance)		-HYPOALLERGENIC canine	
			-SENSITIVITY CONTROL canine	
			-ANALLERGENIC canine	
	Anorexia	Poor appetite	-GASTRO-INTESTINAL canine	
		Tube feeding	-CONVALESCENCE SUPPORT	
			-RECOVERY	
			-RECOVERY LIQUID	
	Ascites	With heart failure	-CARDIAC canine	
		With hypoproteinemia	Lymphangiectasia (protein losing enteropathy)	-GASTRO-INTESTINAL canine Low Fat
			Liver disease	-HEPATIC canine
Protein losing nephropathy			-RENAL canine	
Atopy (CAD: Canine atopic dermatitis)		see dermatitis		

C	Cachexia		-CONVALESCENCE SUPPORT
			-RECOVERY
			-RECOVERY LIQUID
			-GASTRO-INTESTINAL canine (except moderate calorie or low fat)
	Cancer		<i>see neoplasia</i>
	Chronic Kidney Disease (CKD)		-RENAL canine
			-RENAL LIQUID
	Concomitant with Adverse Food reactions		-MULTIFUNCTION canine GFR-AFR
	Colitis		<i>see diarrhea</i>
	Constipation		-GASTRO-INTESTINAL canine

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

C	Convalescence		-RECOVERY
			-RECOVERY LIQUID
			-CONVALESCENCE SUPPORT
			-GASTRO-INTESTINAL canine (except moderate calorie or low fat)
	Cushing's syndrome (hyperadrenocorticism)		<i>No specific therapeutic diet, it depends on patient and associated conditions</i>
D		With diabetes mellitus	-DIABETIC canine
		With chronic kidney disease	-RENAL canine
	Cystitis		<i>see Urinary Tract Infection</i>
	Dermatitis	Atopic dermatitis	-SKIN SUPPORT canine
			-SKIN CARE canine
		Associated with Adverse Food Reaction	-HYPOALLERGENIC canine
			-SENSITIVITY CONTROL canine
			-ANALLERGENIC canine
		Cutaneous Adverse Food Reactions (CAFR)	-HYPOALLERGENIC canine
			-SENSITIVITY CONTROL canine
			-ANALLERGENIC canine
		Concomitant with Chronic Kidney Disease	-MULTIFUNCTION canine GFR-AFR
		Concomitant with urolithiasis	-MULTIFUNCTION canine S/O-AFR
		Flea Bite Allergic Dermatitis (in adjunction to flea treatment)	-SKIN SUPPORT canine
			-SKIN CARE canine
		Pyodermatitis (in adjunction to adequate antibiotic therapy)	-SKIN SUPPORT canine
			-SKIN CARE canine

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D	Diabetes mellitus (in adjunction to insulin therapy)	With optimal body condition		-DIABETIC canine
		With overweight/obesity		-SATIETY canine
	Diarrhea	Acute diarrhea		-GASTRO-INTESTINAL canine
		Chronic diarrhea	Non-specific or unknown aetiology:	-GASTRO-INTESTINAL canine
			Group of chronic enteropathies/ Inflammatory Bowel Disease	-HYPOALLERGENIC canine
			Food responsive diarrhea	-GASTRO-INTESTINAL canine
			Antibiotic responsive diarrhea (in adjunc- tion to adequate antibiotherapy)	-GASTRO-INTESTINAL canine
			Immunosuppressive drug responsive diarrhea (in adjunction to anti-inflammatories/ immunosuppressors)	-GASTRO-INTESTINAL canine
				-HYPOALLERGENIC canine
			Lymphangiectasia (protein-losing enteropathy)	-GASTRO-INTESTINAL canine Low FAT
			Small intestinal bacterial overgrowth (SIBO)	-GASTRO-INTESTINAL canine
			Fibre responsive colitis (including stress diarrhea)	-FIBRE RESPONSE canine

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E	Enteropathies (chronic enteropathies)		see diarrhoea (chronic diarrhoea)
	Exocrine pancreatic insufficiency (EPI) (in adjunction to digestive enzyme treatment)		-GASTRO-INTESTINAL canine
			-HYPOALLERGENIC canine
			-GASTRO-INTESTINAL LOW FAT
			-GASTRO-INTESTINAL MODERATE CALORIE
			-HYPOALLERGENIC MODERATE CALORIE
			-GASTRO-INTESTINAL LOW FAT LIQUID
			-GASTRO-INTESTINAL HIGH ENERGY LIQUID
F	Food allergies/ Food intolerances		see Adverse Food Reactions
	Food elimination trial		-ANALLERGENIC canine
			-HYPOALLERGENIC canine
		-SENSITIVITY CONTROL canine	
G	Gastric disorders	Delayed gastric emptying	-GASTRO-INTESTINAL canine Low Fat
			-GASTRO-INTESTINAL LOW FAT LIQUID
		Gastritis, gastric and/or duodenal ulcer	-HYPOALLERGENIC canine
			-SENSITIVITY CONTROL canine
			-GASTRO-INTESTINAL canine
			-GASTRO-INTESTINAL HIGH ENERGY LIQUID
	Gastro-enteritis		see diarrhea



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H	Heart disease/failure			-CARDIAC canine
	Hepatic disease	Hepatitis	Acute hepatitis	-CONVALESCENCE SUPPORT
			Chronic hepatitis	-HEPATIC canine
		Copper storage disease		-HEPATIC canine
		Portosystemic shunt		-HEPATIC canine
		Hepatic encephalopathy		-HEPATIC canine
	Hyperadrenocorticism			<i>see Cushing's syndrome</i>
	Hyperlipidemia (fasting hyperlipidemia)	Severe	-GASTRO-INTESTINAL canine Low Fat	
			-GASTRO-INTESTINAL LOW FAT LIQUID	
		Moderate	-SATIETY canine	
			-OBESITY canine	
	Hypertension			-CARDIAC canine
Hypothyroidism			<i>No specific therapeutic diet, focus on associated signs</i>	
I	Inflammatory bowel disease			<i>see Diarrhea (chronic diarrhea)</i>
K	Kidney disease			<i>see CKD (Chronic Kidney Disease)</i>
L	Leishmaniasis	Prevention of xanthine urolithiasis secondary to allopurinol treatment		-URINARY U/C low purine canine
		If secondary renal disease (glomerulonephritis)		-RENAL canine
	Liver disease			<i>see Hepatic disease</i>
	Lymphangiectasia			<i>see Diarrhea (chronic diarrhea)</i>

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

M	Maldigestion/ Malabsorption		-GASTRO-INTESTINAL canine
			-GASTRO-INTESTINAL HIGH ENERGY LIQUID
			-HYPOALLERGENIC canine
			-ANALLERGENIC canine
	Malnutrition		see Cachexia
	Megacolon		-GASTRO-INTESTINAL canine
	Megaoesophagus	Gastrostomy feeding tube	-CONVALESCENCE SUPPORT
			-RECOVERY
		Oral feeding (depending on individual response to liquid, gruel or balls form)	-CONVALESCENCE SUPPORT
			-RECOVERY
			-GASTRO-INTESTINAL canine
N	Neoplasia (optimal nutrition during cancer treatment)		-CONVALESCENCE SUPPORT
			-RECOVERY
			-GASTRO-INTESTINAL canine (except Moderate calorie or Low fat)
O	Obesity/Overweight (weight loss and weight maintenance after weight loss)		-SATIETY canine
		Cases where high fibre is not recommended (eg: chronic constipation)	-OBESITY canine
		Associated with urolithiasis	-MULTIFUNCTION canine S/O-Kcal Control
		Associated with osteo-articular disorders	-MULTIFUNCTION canine Mobility C2P+-Kcal Control
	Oesophagitis		-CONVALESCENCE SUPPORT
			-RECOVERY
		-GASTRO-INTESTINAL canine Low Fat	

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

O	Oral hygiene		-DENTAL canine	
	Osteo-articular disorders		-MOBILITY C2P+ canine	
			-MULTIFUNCTION C2P+-KCAL CONTROL	
	Otitis (Atopic Dermatitis and/or Adverse Food Reaction with otitis externa)		-SKIN SUPPORT canine	
			-SKIN CARE canine	
			-HYPOALLERGENIC canine	
P	Pancreatitis	Acute pancreatitis		-GASTRO-INTESTINAL canine Low Fat
				-GASTRO-INTESTINAL LOW FAT LIQUID
		Chronic pancreatitis	Severe	-GASTRO-INTESTINAL canine Low Fat
				-GASTRO-INTESTINAL LOW FAT LIQUID
			Moderate	-SATIETY canine
			-OBESITY canine	
			If complicated with diabetes	-DIABETIC canine
	Perianal fistula			-HYPOALLERGENIC canine
				-ANALLERGENIC canine
	Poor appetite			-CONVALESCENCE SUPPORT
-RECOVERY				
-GASTRO- INTESTINAL canine (except Moderate calorie or Low fat)				

PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

P	Pre/post-surgery: (including digestive surgery)		-RECOVERY
			-RECOVERY LIQUID
			-CONVALESCENCE SUPPORT
			-GASTRO-INTESTINAL canine
			-GASTRO-INTESTINAL HIGH ENERGY LIQUID
	Protein-losing enteropathy		see <i>Diarrhea (chronic diarrhea)</i>
R	Renal disease/failure Acute Kidney Injury (AKI)		see <i>CKD (Chronic Kidney Disease)</i>
			-RENAL LIQUID
S	Small intestinal bacterial overgrowth (SIBO)		see <i>Diarrhea (chronic diarrhea)</i>
	Stress-and anxiety-related signs		-CALM canine
T	Tartar and dental plaque		-DENTAL canine
	Tube feeding	Tube with diameter <10Fr	-CONVALESCENCE SUPPORT instant
		Tube with diameter >10Fr Non-specific condition	-CONVALESCENCE SUPPORT instant
			-RECOVERY
		Specific condition	-CONVALESCENCE SUPPORT canine wet mixed with same volume of water and blended
			corresponding specific diet mixed with water and blended (wet diet with same volume of water, or kibbles soaked with water*)



PLEASE NOTE: The following are recommendations only. The veterinary diets should be used under veterinary supervision.

U	Urolithiasis	Struvite urolithiasis (prevention & dissolution)	-URINARY S/O canine
		Associated with Adverse Food Reactions	-MULTIFUNCTION canine S/O-AFR
		Associated with overweight/obesity	-MULTIFUNCTION canine S/O-Kcal
		Calcium oxalate or calcium phosphate urolithiasis (prevention)	-URINARY S/O canine
		Associated with Adverse Food Reactions	-MULTIFUNCTION canine S/O-AFR
		Associated with overweight/obesity	-MULTIFUNCTION canine S/O-Kcal Control
		Purine urolithiasis (urate, xanthine) (prevention)	-URINARY U/C low purine canine dry, kibbles soaked with water*
			-URINARY U/C Low Purine
		Urate stones associated with porto-systemic shunt	- HEPATIC canine dry, kibbles soaked with water*
		Purine urolithiasis associated with Adverse Food Reactions	-ANALLERGENIC canine dry, kibbles soaked with water*
		Cystine urolithiasis (prevention)	-URINARY U/C low purine canine dry, kibbles soaked with water*
			-URINARY U/C Low Purine
		-RENAL canine wet chunks in gravy	
	Urinary Tract Infection (UTI) (dissolution of struvite concomitant with UTI) (in adjunction to adequate antibiotherapy)	-URINARY S/O canine	
	Urolithiasis	Purine (Urate, xanthine) urolithiasis (prevention)	-URINARY U/C Low PURINE
	Cystine urolithiasis (prevention)	-URINARY U/C Low PURINE	

* Kibbles rehydration

- mix one volume of kibbles with 3 volumes of hot tap water (around 60°)

- let the kibbles absorb water for about 15 min before serving to the dog (dogs generally appreciate warm rehydrated kibbles)



Monofunction diets



Weight management



Diabetes mellitus



Adverse reaction to food



Dermatosis and hair loss



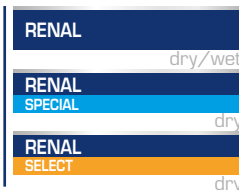
Gastro-intestinal disorders



Liver disease



Renal disease



Lower urinary tract disease



Heart failure



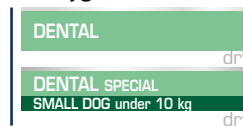
Mobility



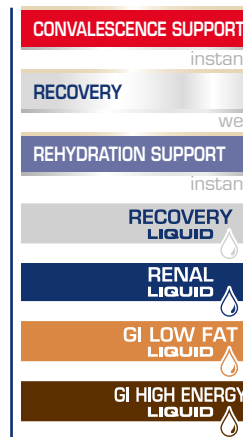
Period of adaptation



Oral hygiene



Convalescence



VETERINARY DIET

Monofunction diets



- SATIETY WEIGHT MANAGEMENT dry/wet
- SATIETY SMALL DOG dry
- OBESITY MANAGEMENT dry/wet
- WEIGHT CONTROL dry



SATIETY

SAT 30

WEIGHT MANAGEMENT



Available in 1.5kg, 6kg
and 12kg bag

WEIGHT MANAGEMENT



Supports safe weight loss and helps avoid weight regain. 97% of dogs lost weight over a 3 month period.



High natural fibre level helps keep dogs satisfied between meals. Helped control begging in 83% of dogs during weight loss.



Nutrients help support healthy bones and joints placed under stress by excess bodyweight.



High protein content helps support healthy weight loss while maintaining muscle mass.

ROYAL CANIN®

RECOMMENDED FOR:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus with overweight/obesity
- Hyperlipidemia with overweight/obesity

NOT RECOMMENDED IN CASE OF:

- Condition where high fibre content is not recommended (eg: chronic constipation, severe arthritis making defecation difficult)
- Growth, gestation/lactation

COMPOSITION

Vegetable fibres, dehydrated poultry protein, wheat gluten*, tapioca, maize gluten, hydrolysed animal proteins, wheat, maize, animal fats, beet pulp, fish oil, minerals, fructo-oligo-saccharides, psyllium husks and seeds, soya oil, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein), hydrolysed cartilage (source of chondroitin).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 20000 IU, Vitamin D3: 1000 IU, E1 (Iron): 35 mg, E2 (Iodine): 3.5 mg, E4 (Copper): 11 mg, E5 (Manganese): 46 mg, E6 (Zinc): 137 mg, E8 (Selenium): 0.06 mg - Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	30g
Fat content	9.5g
Carbohydrate	17.1g
NFE	28.4g
Dietary fibre	28.1g
Crude fibre	16.8g
Omega 6	2.03g
Omega 3	0.78g
EPA+DHA	0.4g
Calcium	0.9g
Phosphorus	0.71g
Sodium	0.3g
L-carnitine	325mg
Chondroitin+glucosamine	200mg
Metabolisable energy (C)*	267.8kcal

*NRC2006 TDF

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	TARGET BODY WEIGHT OF DOG**	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		grams	grams	grams
	10kg	147	126	139
	12kg	169	144	159
	14kg	189	162	178
	16kg	209	179	197
	18kg	228	196	215
	20kg	247	212	233
	25kg	292	250	276
	30kg	335	287	316
	35kg	376	322	355
	40kg	416	356	392
	45kg	454	389	428
	50kg	491	421	463
	60kg	564	483	531
	70kg	633	542	596
	80kg	699	599	659
	90kg	764	655	720

*If the dog did not lose weight

**For dogs less than 10kg it is recommended to use Satiety Small Dog

Individual target weight is determined and then feeding amount established.

The recommended daily intake is based on the pet's ideal weight.

The starting ration may need to be adjusted during follow-up visits, based on each individual's response and the rate of weight loss. An objective of losing 1-3% bodyweight per week is generally achievable over the first 3 months, and of 0.5-2% afterwards.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of dogs that have never been obese.

Based on most recent scientific data (German & al. 2011), our maintenance after weight loss rations are calculated by increasing the weight loss ration by +10%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

German AJ & al. Low-maintenance energy requirements of obese dogs after weight loss. British Journal of Nutrition (2011), 106, S93-S96

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN SATIETY DIETS

- Flanagan J. & al. (2017). Success of a weight loss plan for overweight dogs: the results of an international weight loss study. PLoS ONE 12 (9): e0184199
- Hours & al. Comparison of voluntary food intake and palatability of commercial weight loss diets in healthy dogs and cats. BMC Veterinary Research (2016) 12:274
- German AJ & al. (2015). Cohort Study of the Success of Controlled Weight Loss Programs for Obese Dogs. J Vet Intern Med, 29, 1547-55.
- German AJ & al. Long-term follow-up after weight management in obese dogs: the role of the diet in preventing regain. Vet J 2012;192, 65-70.
- German AJ & al. Quality of life is reduced in obese dogs but improves after successful weight loss. Vet J 2012, 192, 428-434.
- German AJ & al. Improvement in insulin resistance and reduction in plasma inflammatory adipokines after weight loss in obese dogs. Domestic Animal Endocrinology 2009, 37, 214-216.
- Weber M. & al. A high protein, high fiber diet designed for weight loss improves satiety in dogs. J Vet Intern Med. 2007 Nov-Dec;21(6):1203-8.
- German AJ & al. A high protein high fibre diet improves weight loss in obese dogs. Vet J. 2010 Mar;183(3):294-7.



SATIETY WEIGHT MANAGEMENT



SATIETY

WEIGHT MANAGEMENT

WEIGHT MANAGEMENT



Helps provide safe weight loss and reduces the risk of weight being regained.



Nutritional concept that helps keep dogs satisfied between meals.



High protein content helps maintain muscle mass during weight loss.



Nutrients help support healthy bones and joints placed under stress by excess bodyweight.

RECOMMENDED FOR:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus with overweight/obesity
- Hyperlipidemia with overweight/obesity

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.



Available in 410g and 195g can

COMPOSITION

Meat and animal derivatives, cereals, derivatives of vegetable origin, minerals, oils and fats, molluscs and crustaceans.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 140 IU, E1 (Iron): 5 mg, E2 (Iodine): 0,2 mg, E4 (Copper): 1,9 mg, E5 (Manganese): 1,7 mg, E6 (Zinc): 17 mg.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES Per 100g as fed

Protein	8.5g
Fat content	2g
Carbohydrate	1.8g
NFE	3g
Dietary fibre	3.2g
Crude fibre	2g
Omega 6	0.4g
Omega 3	0.09g
EPA+DHA	0.06g
Calcium	0.14g
Phosphorus	0.12g
Sodium	0.08g
L-carnitine	7mg
Chondroitin+glucosamine	85g
Metabolisable energy*	60.2kcal

*NRC2006 TDF

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN SATIETY DIETS

- Flanagan J. & al. [2017]. Success of a weight loss plan for overweight dogs: the results of an international weight loss study. PLoS ONE 12 (9): e0184199
- Weber M. & al. A high protein, high fiber diet designed for weight loss improves satiety in dogs. J Vet Intern Med. 2007 Nov-Dec;21(6):1203-8.
- German AJ & al. A high protein high fibre diet improves weight loss in obese dogs. Vet J. 2010 Mar;183(3):294-7.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	TARGET BODY WEIGHT OF DOG	START			AFTER 4 WEEKS*			MAINTENANCE AFTER WEIGHT LOSS		
		grams	200g	400g	grams	200g	400g	grams	200g	400g
	2kg	196	1	1/2	168	3/4	1/2	184	1	1/2
	3kg	265	1 1/4	3/4	227	1 1/4	1/2	250	1 1/4	1/2
	4kg	329	1 3/4	3/4	282	1 1/2	3/4	310	1 1/2	3/4
	5kg	389	2	1	333	1 3/4	3/4	367	2	1
	6kg	446	2 1/4	1	382	2	1	420	2 1/4	1
	7kg	500	2 1/2	1 1/4	429	2 1/4	1	472	2 1/2	1 1/4
	8kg	553	2 3/4	1 1/4	474	2 1/2	1 1/4	522	2 3/4	1 1/4
	9kg	604	3	1 1/2	518	2 3/4	1 1/4	570	3	1 1/2
	10kg	654	3 1/4	1 1/2	560	2 3/4	1 1/4	617	3 1/4	1 1/2
	15kg	886	4 1/2	2 1/4	760	4	1 3/4	836	4 1/4	2
	20kg	1100	5 3/4	2 3/4	943	4 3/4	2 1/4	1037	5 1/4	2 1/2
	25kg	1300	6 3/4	3 1/4	1114	5 3/4	2 3/4	1226	6 1/4	3
	30kg	1491	7 3/4	3 3/4	1278	6 1/2	3	1405	7 1/4	3 1/2
	35kg	1673	8 1/2	4	1434	7 1/4	3 1/2	1578	8	3 3/4
	40kg	1849	9 1/2	4 1/2	1585	8 1/4	3 3/4	1744	9	4 1/4
	50kg	2186	11 1/4	5 1/4	1874	9 1/2	4 1/2	2061	10 1/2	5

*If the dog did not lose weight

Individual target weight is determined and then feeding amount established.

The recommended daily intake is based on the pet's ideal weight.

The starting ration may need to be adjusted during follow-up visits, based on each individual's response and the rate of weight loss. An objective of losing 1-3% bodyweight per week is generally achievable over the first 3 months, and of 0.5-2% afterwards.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of dogs that have never been obese.

Based on most recent scientific data [German & al. 2011], our maintenance after weight loss rations are calculated by increasing the weight loss ration by +10%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

German AJ & al. *Low-maintenance energy requirements of obese dogs after weight loss. British Journal of Nutrition (2011), 106, S93-S96*

For the mixed feeding table please see the end of the section Weight management.



SATIETY WEIGHT MANAGEMENT



SATIETY

SSD 30

SMALL DOG



Available in 1.5kg, 3kg
and 8kg bag

WEIGHT MANAGEMENT



Supports safe weight loss and helps avoid weight regain. 97% of dogs lost weight over a 3 month period.



High natural fibre level helps keep dogs satisfied between meals. Helped control begging in 83% of dogs during weight loss.



High protein content helps support healthy weight loss while maintaining muscle mass.



Adapted formula to meet the specific digestive, dental and urinary sensitivities of small dogs.

ROYAL CANIN®

RECOMMENDED FOR:

Adult small breed dogs (<10kg) in case of:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus with overweight/obesity
- Hyperlipidemia with overweight/obesity

NOT RECOMMENDED IN CASE OF:

- Condition where high fibre content is not recommended (eg: chronic constipation, severe arthritis making defecation difficult)
- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Dehydrated poultry protein, vegetable fibres, wheat gluten*, tapioca, chicory pulp, hydrolysed animal proteins, maize gluten, wheat, maize, animal fats, minerals, psyllium husks and seeds, fish oil, fatty acid salt, fructo-oligo-saccharides, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein), hydrolysed cartilage (source of chondroitin).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 18000 IU, Vitamin D3: 1000 IU, E1 (Iron): 35 mg, E2 (Iodine): 3,5 mg, E4 (Copper): 11 mg, E5 (Manganese): 46 mg, E6 (Zinc): 138 mg, E8 (Selenium): 0,06 mg - Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	30g
Fat content	9.5g
Carbohydrate	16.3g
NFE	28.2g
Dietary fibre	27.8g
Crude fibre	15.9g
Omega 6	1.81g
Omega 3	0.62g
EPA+DHA	0.3g
Calcium	0.92g
Phosphorus	0.75g
Sodium	0.7g
L-carnitine	325mg
Chondroitin+glucosamine	100mg
Metabolisable energy*	266.2kcal

*NRC2006 DFF

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN SATIETY DIETS

- Flanagan J. & al.(2017). Success of a weight loss plan for overweight dogs: the results of an international weight loss study. PLoS ONE 12 (9): e0184199
- Hours & al. Comparison of voluntary food intake and palatability of commercial weight loss diets in healthy dogs and cats. BMC Veterinary Research (2016) 12:274
- German AJ & al. (2015). Cohort Study of the Success of Controlled Weight Loss Programs for Obese Dogs. J Vet Intern Med, 29, 1547-55.
- German AJ & al. Long-term follow-up after weight management in obese dogs: the role of the diet in preventing regain. Vet J 2012;192, 65-70.
- German AJ & al. Quality of life is reduced in obese dogs but improves after successful weight loss. Vet J 2012, 192, 428-434.
- German AJ & al. Improvement in insulin resistance and reduction in plasma inflammatory adipokines after weight loss in obese dogs. Domestic Animal Endocrinology 2009, 37, 214-216.
- Weber M. & al. A high protein, high fiber diet designed for weight loss improves satiety in dogs. J Vet Intern Med. 2007 Nov-Dec;21(6):1203-8.
- German AJ & al. A high protein high fibre diet improves weight loss in obese dogs. Vet J. 2010 Mar;183(3):294-7

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	TARGET BODY WEIGHT OF DOG**	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		grams	grams	grams
	2kg	44	38	42
	3kg	60	51	57
	4kg	74	64	70
	5kg	88	75	83
	6kg	101	86	95
	7kg	113	97	107
	8kg	125	107	118
	9kg	137	117	129
	10kg	148	127	139

*If the dog did not lose weight

**For dogs more than 10kg we recommend to use Satiety support dog

Individual target weight is determined and then feeding amount established.

The recommended daily intake is based on the pet's ideal weight.

The starting ration may need to be adjusted during follow-up visits, based on each individual's response and the rate of weight loss. An objective of losing 1-3% bodyweight per week is generally achievable over the first 3 months, and of 0.5-2% afterwards.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of dogs that have never been obese.

Based on most recent scientific data (German & al. 2011), our maintenance after weight loss rations are calculated by increasing the weight loss ration by +10%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

German AJ & al. Low-maintenance energy requirements of obese dogs after weight loss. British Journal of Nutrition (2011), 106, S93-S96



SATIETY SMALL DOG



OBESITY MANAGEMENT

DP 34



WEIGHT MANAGEMENT OBESITY PROGRAMME



A high protein content (109g/1000kcal ME) helps maintain muscle mass during a weight loss programme.



Enriched with nutrients (protein, minerals and vitamins) to compensate for the effect of energy restriction during a weight loss programme.



Nutrients help support healthy bones and joints placed under stress by excess body weight.



Essential fatty acids (Omega 3 and Omega 6) and trace elements (Cu, Zn) support healthy skin and coat.

RECOMMENDED FOR:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus with overweight/obesity
- Hyperlipidemia with overweight/obesity

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Dehydrated poultry meat, wheat, vegetable fibres, beet pulp, maize gluten, wheat gluten*, hydrolysed animal proteins, animal fats, minerals, fish oil, psyllium husks and seeds, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein), hydrolysed cartilage (source of chondroitin).

**L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation*

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 21700IU, Vitamin D3: 1100IU, E1 (Iron): 40mg, E2 (Iodine): 4mg, E4 (Copper): 5mg, E5 (Manganese): 52mg, E6 (Zinc): 156mg, E8 (Selenium): 0.06mg. Preservatives - Antioxidants.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES Per 100g as fed

Protein	34g
Fat content	10g
Carbohydrate	20.8g
NFE	31.4g
Dietary fibre	18.2g
Crude fibre	7.6g
Omega 6	2.23g
Omega 3	0.4g
EPA+DHA	0.14g
Calcium	1.42g
Phosphorus	1.02g
Sodium	0.5g
L-carnitine	33mg
Chondroitin+glucosamine	100mg
Metabolisable energy*	311.6kcal

*NRC2006 TDF

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	TARGET BODY WEIGHT OF DOG	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		grams	grams	grams
	2kg	38	32	36
	4kg	64	54	60
	6kg	86	74	81
	8kg	107	92	101
	10kg	126	108	119
	12kg	145	124	137
	14kg	163	139	153
	16kg	180	154	169
	18kg	196	168	185
	20kg	212	182	200
	25kg	251	215	237
	30kg	288	247	272
	35kg	323	277	305
	40kg	357	306	337
	45kg	390	335	368
	50kg	422	362	398
	60kg	484	415	457
	70kg	544	466	513
	80kg	601	515	567
	90kg	656	563	619

*If the dog did not lose weight

Individual target weight is determined depending on individual pet and breed.

The recommended daily intake is based on the pet's target weight. The optimal weight loss rate is 1 to 3% bodyweight weekly. The amount of food restriction necessary to induce weight loss can vary between individuals. This is why a close monitoring is required to regularly adapt the ration and ensure continued weight loss.

It is recommended to divide the daily intake into 2 meals.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of dogs that have never been obese.

Based on most recent scientific data [German & al. 2011], our maintenance after weight loss rations are calculated by increasing the weight loss ration by +10%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

German AJ & al. Low-maintenance energy requirements of obese dogs after weight loss. British Journal of Nutrition (2011), 106, S93-S96

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN OBESITY MANAGEMENT

- German AJ & al. Changes in body composition during weight loss in obese client owned cats: loss of tissue mass correlates with overall percentage of weight lost. Journal of Feline Medicine and Surgery (2008); 10: 452-459.
- Bissot T. & al. Novel dietary strategies can improve the outcome of weight loss programmes in obese client-owned cats. J of Fel Med and Surgery, 2009, 12(2):104-112.
- Tvarijonavičiute A. & al. Effects of weight loss in obese cats on biochemical analytes related to inflammation and glucose homeostasis. Domestic Animal Endocrinology 2012; 42: 129-141.
- Deagle G. & al. Long term follow up after weight management in obese cats. Journal of Nutritional Science (2014) vol 3, e25.



OBESITY MANAGEMENT



OBESITY MANAGEMENT

WEIGHT MANAGEMENT OBESITY PROGRAMME



Low energy density for maintaining the meal volume.



A high protein content (124g/1000kcal ME) helps maintain muscle mass during a weight loss programme.

Enriched with nutrients (protein, minerals and vitamins) to compensate for the effect of energy restriction during a weight loss programme.

The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.

RECOMMENDED FOR:

- Overweight/obesity:
 - weight loss
 - weight maintenance after weight loss
- Diabetes mellitus with overweight/obesity
- Hyperlipidemia with overweight/obesity

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.



Available in 410g and 195g can

COMPOSITION

Pork and poultry meats, pork liver, egg whites dried, rice, gelling agent, minerals, fish oil, sugar beet pulp, taurine, crustacean hydrolysate (source of glucosamine), L-carnitine, marigold meal (source of Lutein), cartilage hydrolysate (source of chondroitin), trace elements (including chelated elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 95IU, E1(Iron): 7mg, E5 (Manganese): 2.2mg, E6 (Zinc): 22mg.
Technological additives: Cassia gum: 4g.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	Per 100g dry matter
Protein	7g	50g
Fat content	2g	14.3g
Carbohydrate	2.1g	15g
NFE	2.5g	17.9g
Dietary fibre	1.4g	10g
Crude fibre	1g	7.1g
Omega 6	0.3g	2.1g
Omega 3	0.1g	0.7g
EPA+DHA	0.1g	0.7g
Calcium	0.2g	1.4g
Phosphorus	0.16g	1.1g
Sodium	0.1g	0.7g
L-carnitine	7mg	21.4mg
Chondroitin+glucosamine	8.5mg	50mg
Metabolisable energy*	56.3kcal	402.1kcal

*NRC2006 TDF

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	TARGET BODY WEIGHT OF DOG	START			AFTER 4 WEEKS*			MAINTENANCE AFTER WEIGHT LOSS		
		grams	410g	195g	grams	410g	195g	grams	410g	195g
	2kg	209	1/2	1	179	1/2	1	197	1/2	1
	3kg	283	3/4	1 1/2	243	1/2	1 1/4	267	3/4	1 1/4
	4kg	352	3/4	1 3/4	301	3/4	1 1/2	332	3/4	1 3/4
	5kg	416	1	2 1/4	356	3/4	1 3/4	392	1	2
	6kg	477	1 1/4	2 1/2	409	1	2	449	1	2 1/4
	7kg	535	1 1/4	2 3/4	459	1	2 1/4	504	1 1/4	2 1/2
	8kg	591	1 1/2	3	507	1 1/4	2 1/2	558	1 1/4	2 3/4
	9kg	646	1 1/2	3 1/4	554	1 1/4	2 3/4	609	1 1/2	3
10kg	699	1 3/4	3 1/2	599	1 1/2	3	659	1 1/2	3 1/2	
15kg	948	2 1/4	4 3/4	812	2	4 1/4	894	2 1/4	4 1/2	
20kg	1176	2 3/4	6	1008	2 1/2	5 1/4	1109	2 3/4	5 3/4	
25kg	1390	3 1/2	7 1/4	1192	3	6	1311	3 1/4	6 3/4	
30kg	1594	4	8 1/4	1366	3 1/4	7	1503	3 3/4	7 3/4	
35kg	1789	4 1/4	9 1/4	1534	3 3/4	7 3/4	1687	4	8 3/4	
40kg	1978	4 3/4	10 1/4	1695	4 1/4	8 3/4	1865	4 1/2	9 1/2	

*If the dog did not lose weight

Individual target weight is determined depending on individual pet and breed.

The recommended daily intake is based on the pet's target weight. The optimal weight loss rate is 1 to 3% bodyweight weekly. The amount of food restriction necessary to induce weight loss can vary between individuals. This is why a close monitoring is required to regularly adapt the ration and ensure continued weight loss.

It is recommended to divide the daily intake into 2 meals.

How is the energy allocation for maintenance after weight loss calculated?

Energy requirements to maintain stable body weight after weight loss are lower than those of dogs that have never been obese.

Based on most recent scientific data [German & al. 2011], our maintenance after weight loss rations are calculated by increasing the weight loss ration by +10%.

Please note that maintenance rations may need to be adjusted based on individual evolution.

German AJ & al. Low-maintenance energy requirements of obese dogs after weight loss. *British Journal of Nutrition* (2011), 106, S93–S96

For the mixed feeding table please see the end of the section Weight management.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN OBESITY MANAGEMENT

- German AJ & al. Dietary Energy Restriction and Successful Weight Loss in Obese Client-Owned Dogs. *J Vet Intern Med* 2007;21:1174–1180.



OBESITY MANAGEMENT



WEIGHT CONTROL

DS 30



Available in 1.5kg, 5kg
and 14kg bag

WEIGHT MANAGEMENT



Rich in protein and containing L-carnitine to help combat excess weight gain.



A reduced calorie content helps limit weight gain in dogs with a tendency to overweight.



Chondroitin sulphate and glucosamine help to maintain joint mobility.



The synergistic antioxidant complex helps maintain healthy DNA, promotes health of the immune system and neutralises free radicals.



RECOMMENDED FOR:

- Overweight/Obesity: dogs prone to gain weight
- Overweight/Obesity: weight maintenance after weight loss

COMPOSITION

Dehydrated poultry protein, barley, maize flour, maize gluten, vegetable fibres, beet pulp, hydrolysed animal proteins, animal fats, minerals, yeasts, fish oil, Fructo-Oligo-Saccharides (FOS), psyllium husks and seeds, hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein), hydrolysed cartilage (source of chondroitin).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 17600IU, Vitamin D3: 1000IU, E1 (Iron): 34mg, E2 (Iodine): 3mg, E4 (Copper): 4mg, E5 (Manganese): 44mg, E6 (Zinc): 147mg.
Preservatives - Antioxidants.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed
Protein	30g
Fat content	10g
Carbohydrate	26.9g
NFE	37.5g
Dietary fibre	17.3g
Crude fibre	6.7g
Omega 6	2.08g
Omega 3	0.41g
EPA+DHA	0.2g
Calcium	1.1g
Phosphorus	0.8g
Sodium	0.5g
L-carnitine	20mg
Chondroitin+glucosamine	50mg
Metabolisable energy*	329kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	56	6/8	49	5/8	41	5/8
	4kg	95	1 3/8	82	1 1/8	69	1
	6kg	128	1 6/8	111	1 4/8	93	1 2/8
	8kg	159	2 2/8	138	1 7/8	116	1 5/8
	10kg	188	2 5/8	163	2 2/8	137	1 7/8
	15kg	255	3 4/8	220	3	186	2 5/8
	20kg	317	4 3/8	274	3 6/8	230	3 2/8
	25kg	374	5 2/8	323	4 4/8	272	3 6/8
	30kg	429	6	371	5 1/8	312	4 3/8
	35kg	482	6 6/8	416	5 6/8	350	4 7/8
40kg	533	7 3/8	460	6 3/8	387	5 3/8	
50kg	630	8 6/8	544	7 4/8	458	6 3/8	
60kg	722	10	623	8 5/8	525	7 2/8	
70kg	810	11 2/8	700	9 6/8	589	8 1/8	
80kg	896	12 4/8	774	10 6/8	651	9	

For dogs that are prone to being overweight (neutered, breed predisposition, etc.), Weight Control Canine should be fed for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Blanchard G. & al. Rapid weight loss with a high-protein low-energy diet allows the recovery of ideal body composition and insulin sensitivity in obese dogs. J Nutr 2004; 134[8 Suppl]: 2148S-2150S.



WEIGHT CONTROL





WEIGHT MANAGEMENT MIXED FEEDING RATION TABLE



OBESITY MANAGEMENT		CAN (195G)+DRY (OBESITY MANAGEMENT)		
TARGET BODY WEIGHT OF DOG	CAN+	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		dry (g)	dry (g)	dry (g)
2kg	1/2	20	15	18
3kg	1/2	34	26	31
4kg	1	28	19	25
5kg	1	40	29	36
6kg	1	51	39	46
7kg	1	61	48	56
8kg	1	72	56	66
9kg	1	81	65	75
10kg	1	91	73	84

OBESITY MANAGEMENT		CAN (195G)+DRY (OBESITY MANAGEMENT)		
TARGET BODY WEIGHT OF DOG	CAN+	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		dry (g)	dry (g)	dry (g)
2kg	1/4	19	14	17
4kg	1/2	27	17	23
6kg	1/2	49	37	44
8kg	1/2	70	55	64
10kg	1	52	34	45
15kg	1	97	73	87
20kg	1	138	108	126
25kg	1	177	141	163
30kg	1	214	173	197
35kg	1	249	203	231
40kg	1	283	232	263
50kg	1	348	288	324
60kg	1	410	341	383
70kg	1	470	392	439
80kg	1	527	441	493

*If the dog did not lose weight

SATIETY WEIGHT MANAGEMENT		CAN (195G)+DRY (SATIETY WEIGHT MANAGEMENT)		
TARGET BODY WEIGHT OF DOG	CAN+	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		dry (g)	dry (g)	dry (g)
10kg	1	103	82	95
15kg	1	155	127	144
20kg	1	203	168	189
25kg	1	248	207	232
30kg	1	291	243	272
35kg	1	332	279	311
40kg	1	372	313	348
50kg	1	448	377	420
60kg	1	520	439	487
70kg	1	589	498	553
80kg	1	655	555	615

SATIETY WEIGHT MANAGEMENT		SATIETY WEIGHT MANAGEMENT CAN (195G)+SATIETY SMALL DOG DRY		SATIETY SMALL DOG
TARGET BODY WEIGHT OF DOG	CAN+	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		dry (g)	dry (g)	dry (g)
2kg	1/2	22	16	20
3kg	1/2	38	29	34
4kg	1	30	20	26
5kg	1	44	31	39
6kg	1	57	42	51
7kg	1	69	53	63
8kg	1	81	63	74
9kg	1	93	73	85
10kg	1	104	83	95

*If the dog did not lose weight

SATIETY WEIGHT MANAGEMENT		CAN (400G)+DRY (SATIETY WEIGHT MANAGEMENT)		
TARGET BODY WEIGHT OF DOG	CAN+	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		dry (g)	dry (g)	dry (g)
10kg	1	55	34	46
15kg	1	107	79	96
20kg	1	155	120	141
25kg	1	200	158	183
30kg	1	243	195	224
35kg	1	284	230	262
40kg	1	324	264	300
50kg	1	399	329	371
60kg	1	471	391	439
70kg	1	540	450	504
80kg	1	607	507	567

SATIETY WEIGHT MANAGEMENT		SATIETY WEIGHT MANAGEMENT CAN (400G)+SATIETY SMALL DOG DRY		SATIETY SMALL DOG
TARGET BODY WEIGHT OF DOG	CAN+	START	AFTER 4 WEEKS*	MAINTENANCE AFTER WEIGHT LOSS
		dry (g)	dry (g)	dry (g)
2kg	1/4	21	15	19
3kg	1/4	37	28	33
4kg	1/2	28	17	24
5kg	1/2	42	29	37
6kg	1/2	54	40	49
7kg	1/2	67	51	60
8kg	1/2	79	61	72
9kg	1/2	90	71	82
10kg	1	55	34	47

*If the dog did not lose weight



Monofunction diets



- DIABETIC dry
- DIABETIC SPECIAL LOW CARBOHYDRATE wet



DIABETIC

DS 37



Available in 1.5kg, 7kg
and 12kg bag

DIABETES MELLITUS



Mixed cereals of low glycaemic index enables control of postprandial hyperglycaemia.



High protein level promotes lean muscle mass and helps limit postprandial glycemia. Enriched with L-carnitine.



A low carbohydrate intake helps control postprandial blood glucose to facilitate global diabetes mellitus management.



Diabetes mellitus increases oxidative stress, which in turn favours the development of diabetes-associated chronic complications. A high level of antioxidants helps combat this.

RECOMMENDED FOR:

- Diabetes mellitus

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Dehydrated poultry protein, barley, wheat gluten*, maize gluten, vegetable fibres, animal fats, tapioca, beet pulp, hydrolysed animal proteins, fish oil, psyllium husks and seeds, Fructo-Oligo-Saccharides (FOS), minerals, marigold extract (source of lutein).

**L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation*

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15900IU, Vitamin D3: 1000IU, E1 (Iron): 30mg, E2 (Iodine): 3mg, E4 (Copper): 4mg, E5 (Manganese): 39mg, E6 (Zinc): 118mg, E8 (Selenium): 0.03mg. Preservatives - Antioxidants.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES		Per 100g as fed
Protein	37g	
Fat content	12g	
Carbohydrate	19.1g	
NFE	29.9g	
Dietary fibre	17.2g	
Crude fibre	6.4g	
Omega 6	2.23g	
Omega 3	0.57g	
EPA+DHA	0.3g	
Calcium	0.9g	
Phosphorus	0.71g	
Sodium	0.3g	
L-carnitine	20mg	
Metabolisable energy*	345kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	61	5/8	54	5/8	46	4/8
	4kg	103	1 1/8	90	1	78	7/8
	6kg	139	1 4/8	122	1 3/8	106	1 1/8
	8kg	172	1 7/8	152	1 5/8	131	1 3/8
	10kg	204	2 2/8	179	1 7/8	155	1 5/8
	15kg	276	3	243	2 5/8	210	2 2/8
	20kg	343	3 6/8	302	3 2/8	261	2 7/8
	25kg	405	4 3/8	357	3 7/8	308	3 3/8
	30kg	465	5	409	4 3/8	353	3 7/8
	35kg	522	5 5/8	459	5	397	4 2/8
	40kg	577	6 2/8	508	5 4/8	438	4 6/8
	50kg	682	7 3/8	600	6 4/8	518	5 5/8
	60kg	782	8 4/8	688	7 4/8	594	6 3/8
	70kg	878	9 4/8	772	8 3/8	667	7 2/8
	80kg	970	10 4/8	854	9 2/8	737	8

For dogs that have diabetes mellitus Diabetic Canine should be fed for the pet's lifetime.

PLEASE NOTE: The use of this food may affect the dog's sensitivity to insulin. **It is highly recommended that blood glucose and insulin response are monitored when starting the diet so that insulin dosage can be adapted.**

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Elliott KF & al. A diet lower in digestible carbohydrate results in lower post prandial glucose concentrations compared with a traditional canine diabetes diet and an adult maintenance diet in healthy dogs. Res Res Vet Sci. 2012 Aug;93(1):288-95.
- Blanchard G. & al. Rapid weight loss with a high-protein low-energy diet allows the recovery of ideal body composition and insulin sensitivity in obese dogs. J Nutr 2004; 134(8 Suppl): 2148S-2150S.



DIABETIC



DIABETIC SPECIAL

LOW CARBOHYDRATE

DIABETES MELLITUS



A low carbohydrate intake lowers postprandial blood glucose.



Mixed cereals of low glycaemic index (corn) enables control of postprandial hyperglycaemia.

Dietary fibre slows small intestinal digestion and improves glycaemic control in diabetic dogs.

Diabetes mellitus promotes oxidative stress, which in turn favours the development of the diabetes-associated chronic complications. **A high level of antioxidants** helps combat this.

RECOMMENDED FOR:

- Diabetes mellitus

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.



Available in 410g and 195g can

COMPOSITION

Pork and poultry meat, poultry liver, vegetable fiber, corn, minerals, carrageenan, sugar beet pulp, sunflower oil, taurine, trace elements (including chelated trace elements), marigold extract (source of Lutein), L-carnitine, vitamins.

ADDITIVES (KG) *

Nutritional additives: Vitamin D3: 120IU, E1(Iron): 5mg, E2 (Iodine): 0.017mg, E4 (Copper): 0.1mg, E5 (Manganese): 1.7mg, E6 (Zinc): 16mg.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	100g dry matter
Protein	9g	45g
Fat content	4g	20g
Carbohydrate	1.7g	8.5g
NFE	3.1g	15.5g
Dietary fibre	3.9g	19.5g
Crude fibre	2.5g	12.5g
Omega 6	0.7g	3.5g
Omega 3	0.03g	0.15g
EPA+DHA	0.01g	0.05g
Linoleic acid	0.7g	3.5g
Calcium	0.3g	1.5g
Phosphorus	0.25g	1.25g
Sodium	0.1g	0.5g
Metabolisable energy*	72.7kcal	363.5kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	410g	195g	grams	410g	195g	grams	410g	195g
	2kg	289	3/4	1 1/2	254	1/2	1 1/4	220	1/2	1 1/4
	3kg	392	1	2	345	3/4	1 3/4	298	3/4	1 1/2
	4kg	486	1 1/4	2 1/2	428	1	2 1/4	370	1	2
	5kg	575	1 1/2	3	506	1 1/4	2 1/2	437	1	2 1/4
	6kg	659	1 1/2	3 1/2	580	1 1/2	3	501	1 1/4	2 1/2
	7kg	740	1 3/4	3 3/4	651	1 1/2	3 1/4	562	1 1/4	3
	8kg	818	2	4 1/4	720	1 3/4	3 3/4	622	1 1/2	3 1/4
	9kg	893	2 1/4	4 1/2	786	2	4	679	1 3/4	3 1/2
10kg	967	2 1/4	5	851	2	4 1/4	735	1 3/4	3 3/4	
15kg	1311	3 1/4		1153	2 3/4		996	2 1/2		
20kg	1626	4		1431	3 1/2		1236	3		
25kg	1922	4 3/4		1692	4 1/4		1461	3 1/2		
30kg	2204	5 1/2		1940	4 3/4		1675	4		
35kg	2474	6		2177	5 1/4		1880	4 1/2		
40kg	2735	6 3/4		2407	5 3/4		2078	5		

For dogs that have diabetes mellitus Diabetic Canine should be fed for the pet's lifetime.

PLEASE NOTE: The use of this food may affect the dog's sensitivity to insulin. **It is highly recommended that blood glucose and insulin response are monitored when starting the diet so that insulin dosage can be adapted.**

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Elliott KF & al. A diet lower in digestible carbohydrate results in lower post prandial glucose concentrations compared with a traditional canine diabetes diet and an adult maintenance diet in healthy dogs. Res Res Vet Sci. 2012 Aug;93(1):288-95.
- Blanchard GP & al. Rapid weight loss with a high-protein low-energy diet allows the recovery of ideal body composition and insulin sensitivity in obese dogs. J Nutr 2004; 134(8 Suppl): 2148S-2150S.



DIABETIC





Monofunction diets



- ANALLERGENIC *dry*
- HYPOALLERGENIC *dry/wet*
- HYPOALLERGENIC MODERATE CALORIE *dry*
- HYPOALLERGENIC SMALL DOG under 10kg *dry*
- SENSITIVITY CONTROL *dry*
- SENSITIVITY CONTROL Chicken & Rice *wet*
- SENSITIVITY CONTROL Duck & Rice *wet*



AN 18 ANALLERGENIC



Available in 3kg and 8kg bag

ADVERSE REACTION TO FOOD



Formulated with feather protein hydrolysate, a protein source containing exclusively free amino acids and very low molecular weight oligopeptides.



Formulated with starch instead of whole cereals and a specially designed palatability enhancer; manufactured in a production line designed to minimise contamination.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.



RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Inflammatory Bowel Disease (IBD)

NOT RECOMMENDED IN CASE OF:

- Pancreatitis
- Growth, gestation/lactation

COMPOSITION

Maize starch, feather hydrolysate with low molecular weight (source of L-amino acids and oligopeptides), copra oil, soya oil, minerals, vegetable fibres, chicory pulp, Fructo-Oligo-Saccharides (FOS), fish oil, mono- and diglycerides of fatty acids esterified with citric acid, animal fat, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 30600IU, Vitamin D3: 800IU, E1 (Iron): 42mg, E2 (Iodine): 3.7mg, E4 (Copper): 13mg, E5 (Manganese): 55mg, E6 (Zinc): 198mg, E8 (Selenium): 0.1mg. **Preservatives - Antioxidants.**

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES		Per 100g as fed
Protein	18g	
Fat content	16.5g	
Carbohydrate	44.2g	
NFE	48g	
Dietary fibre	6g	
Crude fibre	2.2g	
Omega 6	3.91g	
Omega 3	0.6g	
EPA+DHA	0.2g	
Linoleic acid	3.65g	
Calcium	1.01g	
Phosphorus	0.8g	
Sodium	1g	
Metabolisable energy*	388kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	54	5/8	48	4/8	41	4/8
	4kg	91	1	80	7/8	69	6/8
	6kg	123	1 3/8	109	1 2/8	94	1
	8kg	153	1 5/8	135	1 4/8	116	1 2/8
	10kg	181	2	159	1 6/8	138	1 4/8
	15kg	245	2 5/8	216	2 3/8	186	2
	20kg	304	3 6/8	268	3	231	2 4/8
	25kg	360	4	317	3 4/8	273	3
30kg	413	4 4/8	363	4	314	3 4/8	
35kg	463	5 1/8	408	4 4/8	352	3 7/8	
40kg	512	5 5/8	450	4 7/8	389	4 2/8	
50kg	605	6 5/8	533	5 7/8	460	5	
60kg	694	7 5/8	611	6 3/8	527	5 6/8	
70kg	779	8 4/8	685	7 4/8	592	6 4/8	
80kg	861	9 4/8	758	8 2/8	654	7 1/8	

When a food allergy or a food intolerance is suspected, the dog's diet should be changed without any food transition. Nutritional management with Anallergenic may be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN ANALLERGENIC

- Mougeot I. & al. Clinical efficacy of a highly hydrolyzed poultry feather protein-based diet for canine AFR diagnosis and dietary management: a 12 case pilot study. Poster presented at WINSS 2013; October 1-4, Portland, Oregon (USA).
- Freiche V. & al. A Very Low Molecular Weight Poultry Feather Hydrolyzed-Based Extruded Diet Allows Idiopathic Canine IBD Clinical Management Without Immunosuppressive Treatment: A 13-Case Prospective Pilot Study. Short communication presented at ECVIM congress 2014; Sept 4-6, Mainz (Germany).



ANALLERGENIC



HYPOALLERGENIC

DR 21



Available in 2kg, 7kg
and 14kg bag

ADVERSE REACTION TO FOOD



Hydrolysed soya protein isolate, which is composed of low molecular weight peptides, is highly digestible and of very low allergenicity.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, modulate skin reactions and contribute to the intestinal mucosal integrity.



Contains a combination of highly digestible proteins, prebiotics, beet pulp, rice and fish oil to ensure maximum digestive health.



RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastrointestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Pancreatitis
- Gestation/lactation

COMPOSITION

Rice, hydrolysed soya protein isolate, animal fats, minerals, hydrolysed poultry liver, beet pulp, soya oil, Fructo-Oligo-Saccharides (FOS), fish oil, borage oil, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 24800IU, Vitamin D3: 800IU, E1 (Iron): 40mg, E2 (Iodine): 3mg, E4 (Copper): 11mg, E5 (Manganese): 53mg, E6 (Zinc): 202mg.
Preservatives - Antioxidants.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	21g
Fat content	19g
Carbohydrate	36.6g
NFE	41.1g
Dietary fibre	5.5g
Crude fibre	1g
Omega 6	4.24g
Omega 3	0.81g
EPA+DHA	0.34g
Linoleic acid	4.07g
Calcium	1.01g
Phosphorus	0.8g
Sodium	0.5g
Metabolisable energy*	400kcal

*Calculated according to NRC2006

When a food allergy or a food intolerance is suspected, the dog's diet should be changed without any food transition. Nutritional management with Hypoallergenic may be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HYPOALLERGENIC

- Biourge V. Diagnosis of adverse reactions to food in dogs: efficacy of a soy-isolate hydrolyzate-based diet. J Nutr 2004; 134: 2062S-2064S.
- Biourge V. Exocrine pancreatic insufficiency and adverse reaction to food in dogs: a positive response to a high-fat, soy isolate hydrolysate-based diet. J Nutr 2004; 134: 2166S-2168S.
- Mandigers PJ & al. A randomized, open-label, positively-controlled field trial of a hydrolyzed protein diet in dogs with chronic small bowel enteropathy. J Vet Intern Med 2010; 24: 1350-7.
- Mandigers PJ & al. Efficacy of a Soy Hydrolysate Based diet in the management of chronic Canine Gastroenteritis: A controlled Study. Proceedings of ESVN 2004, Budapest, Hungary; 8 (8): 128-129.
- Horvath-Ungerboeck C. & al. Efficacy of a hydrolysed diet in 80 pruritic dogs: a prospective study. Proceedings of the 27th annual ESVD-ECVD congress, Salzburg (Austria), 11-13 September 2014, p18.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	53	5/8	46	4/8	40	4/8
	4kg	88	1	78	7/8	67	6/8
	6kg	120	1 3/8	105	1 2/8	91	1
	8kg	149	1 6/8	131	1 4/8	113	1 2/8
	10kg	176	2	155	1 6/8	133	1 4/8
	15kg	238	2 6/8	210	2 3/8	181	2 1/8
	20kg	295	3 3/8	260	3	225	2 5/8
	25kg	349	4	307	3 4/8	265	3 1/8
	30kg	400	4 5/8	352	4 1/8	304	3 4/8
	35kg	449	5 2/8	396	4 5/8	342	4
	40kg	497	5 6/8	437	5	378	4 3/8
	50kg	587	6 6/8	517	6	446	5 1/8
	60kg	673	7 6/8	593	6 7/8	512	5 7/8
	70kg	756	8 6/8	665	7 6/8	574	6 5/8
	80kg	836	9 5/8	735	8 4/8	635	7 3/8

RECOMMENDED DAILY INTAKE & FEEDING DURATION

PUPPY	ADULT WEIGHT	PUPPY AGE							
		2 MONTHS		4 MONTHS		7 MONTHS		10 MONTHS	
		grams	cups	grams	cups	grams	cups	grams	cups
	2kg	37	3/8	43	4/8	41	4/8	40	4/8
	4kg	60	6/8	71	7/8	69	6/8	67	6/8
	6kg	79	7/8	96	1 1/8	94	1 1/8	91	1
	8kg	95	1 1/8	118	1 3/8	117	1 3/8	113	1 2/8
	10kg	112	1 2/8	140	1 5/8	140	1 5/8	135	1 5/8
	15kg	149	1 6/8	189	2 1/8	190	2 2/8	184	2 1/8
	20kg	180	2 1/8	233	2 6/8	237	2 6/8	229	2 5/8
	25kg	204	2 3/8	271	3 1/8	281	3 2/8	271	3 1/8
	30kg	211	2 4/8	300	3 4/8	324	3 6/8	312	3 5/8
	35kg	224	2 5/8	337	3 7/8	363	4 2/8	352	4 1/8
	40kg	247	2 7/8	370	4 2/8	402	4 5/8	391	4 4/8
	45kg	278	3 2/8	405	4 5/8	439	5 1/8	429	5
	50kg	326	3 6/8	443	5 1/8	475	5 4/8	465	5 3/8
	55kg	342	4	473	5 4/8	511	5 7/8	502	5 7/8
	60kg	355	4 1/8	501	5 6/8	545	6 2/8	537	6 2/8

HYPOALLERGENIC



HYPOALLERGENIC

ADVERSE REACTION TO FOOD



Soy protein hydrolysate, which is composed of low molecular weight peptides, is highly digestible and of very low allergenicity.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.

Enriched with linoleic acid, EPA and DHA, essential and non-essential fatty acids known to modulate cutaneous reactions and help maintain skin health.

The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.

RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastrointestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Pancreatitis
- Growth, gestation/lactation



Available in 200g and 400g can

COMPOSITION

Pea starch, soya protein hydrolysates, sunflower oil, cellulose, fish oil, minerals, hydrolysed chicken liver, lecithin, taurine, marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 5000IU, Vitamin D3: 340IU, E1 (Iron): 25mg, E2 (Iodine): 2mg, E4 (Copper): 6mg, E5 (Manganese): 32 mg, E6 (Zinc): 120mg.
Technological additives: Pentasodium triphosphate: 3g.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	100g dry matter
Protein	6g	23.5g
Fat content	3.5g	13.7g
Carbohydrate	11.1g	43.5g
NFE	12.4g	48.6g
Dietary fibre	3.3g	12.9g
Crude fibre	2g	7.8g
Omega 6	1.7g	6.7g
Omega 3	0.28g	1.1g
EPA+DHA	0.2g	0.8g
Calcium	0.19g	0.7g
Phosphorus	0.18g	0.7g
Sodium	0.2g	0.8g
Potassium	0.22g	0.9g
Magnesium	0.02g	0.1g
Metabolisable energy*	95kcal	372.5kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	400g	200g	grams	400g	200g	grams	400g	200g
	2kg	220	1/2	1 1/4	195	1/2	1	170	1/2	3/4
	3kg	300	3/4	1 1/2	265	3/4	1 1/4	230	1/2	1 1/4
	4kg	370	1	2	330	3/4	1 3/4	285	3/4	1 1/2
	5kg	440	1	2 1/4	385	1	2	335	3/4	1 3/4
	6kg	505	1 1/4	2 1/2	445	1	2 1/4	385	1	2
	7kg	565	1 1/2	3	500	1 1/4	2 1/2	430	1	2 1/4
	8kg	625	1 1/2	3 1/4	550	1 1/2	2 3/4	475	1 1/4	2 1/2
	9kg	685	1 3/4	3 1/2	600	1 1/2	3	520	1 1/4	2 3/4
10kg	740	1 3/4	3 3/4	650	1 3/4	3 1/4	560	1 1/2	2 3/4	
15kg	1005	2 1/2		885	2 1/4		760	2		
20kg	1245	3		1095	2 3/4		945	2 1/4		
25kg	1470	3 3/4		1295	3 1/4		1120	2 3/4		
30kg	1685	4 1/4		1485	3 3/4		1280	3 1/4		
35kg	1895	4 3/4		1665	4 1/4		1440	3 1/2		
40kg	2095	5 1/4		1840	4 1/2		1590	4		

When a food allergy or a food intolerance is suspected, the dog's diet should be changed without any food transition. The hypoallergenic nutritional management will be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

For the mixed feeding table please see the end of the section Adverse reaction to food.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HYPOALLERGENIC

- Biourge V. Diagnosis of adverse reactions to food in dogs: efficacy of a soy-isolate hydrolyzate-based diet. J Nutr 2004; 134: 2062S-2064S.
- Horvath-Ungerboeck C. & al. Efficacy of a hydrolysed diet in 80 pruritic dogs: a prospective study. Proceedings of the 27th annual ESDV-ECVD congress, Salzburg (Austria), 11-13 September 2014, p18.



HYPOALLERGENIC



HYPOALLERGENIC

MODERATE CALORIE



Available in 1,5kg, 7kg
and 14kg bag

ADVERSE REACTION TO FOOD



Hydrolysed soya protein isolate, which is composed of low molecular weight peptides, is highly digestible and of very low allergenicity.



A reduced calorie content helps limit weight gain in dogs with a tendency to overweight.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



A restricted phosphorus intake is key to help maintain renal function with age.



RECOMMENDED FOR:

Dogs with tendency to overweight in case of:

- Adverse Food Reactions (AFR) with dermatologic and/or gastrointestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Acute pancreatitis*
 - Gestation/lactation
- *may be fed in case of chronic pancreatitis

COMPOSITION

Rice, hydrolysed soya protein isolate, animal fats, hydrolysed poultry liver, minerals, beet pulp, soya oil, fish oil, Fructo-Oligo-Saccharides (FOS), borage oil, marigold extract [source of lutein].

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 28800IU, Vitamin D3: 700IU, E1 (Iron): 38mg, E2 (Iodine): 2.7mg, E4 (Copper): 11mg, E5 (Manganese): 50mg, E6 (Zinc): 190mg, E8 (Selenium): 0.1mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	23g	
Fat content	12g	
Carbohydrate	42.4g	
NFE	46.9g	
Dietary fibre	5.6g	
Crude fibre	1.1g	
Omega 6	3.33g	
Omega 3	0.77g	
EPA+DHA	0.37g	
Linoleic acid	3.19g	
Calcium	0.8g	
Phosphorus	0.6g	
Sodium	0.4g	
Metabolisable energy*	370kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION					
ADULT DOG	DOG'S WEIGHT	NORMAL		OVERWEIGHT	
		grams	cups	grams	cups
	2kg	43	4/8	36	3/8
	4kg	73	7/8	61	6/8
	6kg	98	1 1/8	83	1
	8kg	122	1 3/8	103	1 1/8
	10kg	144	1 5/8	121	1 3/8
	15kg	195	2 2/8	165	1 7/8
	20kg	242	2 6/8	204	2 3/8
	25kg	287	3 2/8	241	2 6/8
30kg	329	3 6/8	277	3 1/8	
35kg	369	4 2/8	311	3 4/8	
40kg	408	4 5/8	343	3 7/8	
45kg	445	5 1/8	375	4 2/8	
50kg	482	5 4/8	406	4 5/8	

When a food allergy or a food intolerance is suspected, the dog's diet should be changed without any food transition. Nutritional management with Hypoallergenic Moderate Calorie may be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HYPOALLERGENIC

- Biourge V. Diagnosis of adverse reactions to food in dogs: efficacy of a soy-isolate hydrolyzate-based diet. J Nutr 2004; 134: 2062S-2064S.
- Biourge V. Exocrine pancreatic insufficiency and adverse reaction to food in dogs: a positive response to a high-fat, soy isolate hydrolysate-based diet. J Nutr 2004; 134: 2166S-2168S.
- Mandigers PJ & al. A randomized, open-label, positively-controlled field trial of a hydrolyzed protein diet in dogs with chronic small bowel enteropathy. J Vet Intern Med 2010; 24: 1350-7.
- Mandigers PJ & al. Efficacy of a Soy Hydrolysate Based diet in the management of chronic Canine Gastroenteritis: A controlled Study. Proceedings of ESVCN 2004, Budapest, Hungary; 8 [8]: 128-129.
- Horvath-Ungerboeck C. & al. Efficacy of a hydrolysed diet in 80 pruritic dogs: a prospective study. Proceedings of the 27th annual ESVD-ECVD congress, Salzburg (Austria), 11-13 September 2014, p18.



HYPOALLERGENIC MOD. CALORIE



HYPOALLERGENIC

HSD 24

SMALL DOG under 10 kg



Available in 1kg
and 3,5kg bag

ADVERSE REACTION TO FOOD



Hydrolysed soya protein isolate, which is composed of low molecular weight peptides, is highly digestible and of very low allergenicity.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Pentasodium triphosphate binds salivary calcium, making it unavailable for tartar formation.



RECOMMENDED FOR:

Adult small breed dogs <10kg in case of:

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Pancreatitis
- Gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, hydrolysed soya protein isolate, animal fats, minerals, hydrolysed poultry liver, soya oil, beet pulp, Fructo-Oligo-Saccharides (FOS), fish oil, borage oil, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 24900IU, Vitamin D3: 800IU, E1 (Iron): 40mg, E2 (Iodine): 2.8mg, E4 (Copper): 10mg, E5 (Manganese): 54mg, E6 (Zinc): 199mg, E8 (Selenium): 0.1mg.
Technological additives: Pentasodium triphosphate: 3.5 g.
Preservatives - Antioxidants.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES		Per 100g as fed
Protein	_____	24g
Fat content	_____	16g
Carbohydrate	_____	36.4g
NFE	_____	40g
Dietary fibre	_____	4.3g
Crude fibre	_____	0.7g
Omega 6	_____	3.8g
Omega 3	_____	0.79g
EPA+DHA	_____	0.35g
Linoleic acid	_____	3.66g
Calcium	_____	1g
Phosphorus	_____	0.8g
Sodium	_____	1g
Metabolisable energy*	_____	384kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	55	5/8	48	4/8	42	4/8
	3kg	74	6/8	65	5/8	56	5/8
	4kg	92	1	81	7/8	70	6/8
	5kg	109	1 1/8	96	1	83	7/8
	6kg	125	1 2/8	110	1 1/8	95	1
	7kg	140	1 4/8	123	1 2/8	106	1 1/8
	8kg	155	1 5/8	136	1 3/8	118	1 2/8
	9kg	169	1 6/8	149	1 4/8	129	1 3/8
10kg	183	1 7/8	161	1 5/8	139	1 4/8	

When a food allergy or a food intolerance is suspected, the dog's diet should be changed without any food transition. Nutritional management with Hypoallergenic Small Dog may be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HYPOALLERGENIC

- Biourge V. Diagnosis of adverse reactions to food in dogs: efficacy of a soy-isolate hydrolyzate-based diet. J Nutr 2004; 134: 2062S-2064S.
- Biourge V. Exocrine pancreatic insufficiency and adverse reaction to food in dogs: a positive response to a high-fat, soy isolate hydrolyzate-based diet. J Nutr 2004; 134: 2166S-2168S.
- Mandigers PJ & al. A randomized, open-label, positively-controlled field trial of a hydrolyzed protein diet in dogs with chronic small bowel enteropathy. J Vet Intern Med 2010; 24: 1350-7.
- Mandigers PJ & al. Efficacy of a Soy Hydrolyzate Based diet in the management of chronic Canine Gastroenteritis: A controlled Study. Proceedings of ESVN 2004, Budapest, Hungary; 8 (8): 128-129.
- Horvath-Ungerboeck C. & al. Efficacy of a hydrolysed diet in 80 pruritic dogs: a prospective study. Proceedings of the 27th annual ESVD-ECVD congress, Salzburg (Austria), 11-13 September 2014, p18.



HYPOALLERGENIC SMALL DOG



SENSITIVITY^{SC 21} CONTROL



ADVERSE REACTION TO FOOD



Duck and tapioca reduce the risk of allergic reaction because they are rarely used in canine food preparations.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, modulate skin reactions and contribute to the intestinal mucosal integrity.



Contains a combination of highly digestible proteins, prebiotics, beet pulp and fish oil to ensure maximum digestive security. This food is gluten and lactose-free.



RECOMMENDED FOR:

- Adverse Food Reactions [AFR] with dermatologic and/or gastrointestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Chronic diarrhea

NOT RECOMMENDED IN CASE OF:

- Acute pancreatitis*
- *may be fed in case of chronic pancreatitis

COMPOSITION

Tapioca, dehydrated duck meat, hydrolysed poultry proteins, vegetable fibres, animal fats, beet pulp, fish oil, soya oil, psyllium husks and seeds, minerals, Fructo-Oligo-Saccharides (FOS), marigold extract (source of lutein).

ADDITIVES [KG]*

Nutritional additives: Vitamin A: 25000IU, Vitamin D3: 800IU, E1 (Iron): 41mg, E2 (Iodine): 2.8mg, E4 (Copper): 10mg, E5 (Manganese): 54mg, E6 (Zinc): 203mg, E8 (Selenium): 0.1mg. Preservatives - Antioxidants.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES		Per 100g as fed
Protein	21g	
Fat content	9g	
Carbohydrate	43.5g	
NFE	48.9g	
Dietary fibre	9.8g	
Crude fibre	4.4g	
Omega 6	1.98g	
Omega 3	0.68g	
EPA+DHA	0.35g	
Biotin	1.89g	
Linoleic acid	1.48g	
Phosphorus	0.91g	
Zinc	23.8mg	
Biotin	0.31mg	
Pantothenic acid	14.7mg	
Niacin	49mg	
Metabolisable energy*	346kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	63	6/8	55	5/8	48	4/8
	4kg	106	1 2/8	93	1	80	7/8
	6kg	143	1 5/8	126	1 3/8	109	1 2/8
	8kg	178	2	156	1 6/8	135	1 4/8
	10kg	210	2 3/8	185	2 1/8	160	1 6/8
	15kg	285	3 2/8	251	2 7/8	217	2 4/8
	20kg	354	4	311	3 4/8	269	3
	25kg	418	4 6/8	368	4 1/8	318	3 5/8
30kg	479	5 3/8	422	4 6/8	364	4 1/8	
35kg	538	6	473	5 3/8	409	4 5/8	
40kg	595	6 6/8	523	5 7/8	452	5 1/8	
50kg	703	7 7/8	619	7	534	6	
60kg	806	9 1/8	709	8	612	6 7/8	
70kg	905	10 2/8	796	9	688	7 6/8	
80kg	1000	11 2/8	880	9 7/8	760	8 4/8	

When a food allergy or a food intolerance is suspected, the dog's diet should be changed without any food transition. The nutritional management should be continued for the pet's lifetime. Sensitivity Control Canine is suitable for feeding to both adult dogs and puppies.

It is recommended to divide the daily intake into 2 meals.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Roudebush P. Ingredients and foods associated with adverse reactions in dogs and cats. Veterinary Dermatology 2013; 24(2): 293-294.



SENSITIVITY CONTROL



SENSITIVITY CONTROL Chicken & Rice



Available in 420g can

ADVERSE REACTION TO FOOD



Chicken and rice are rarely involved in food allergy and are highly digestible. This approach reduces the risk of allergic reaction in the dog.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.

Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, modulate skin reactions and contribute to the intestinal mucosal integrity.

Fermentable fibres promote healthy digestive flora and contribute to the intestinal mucosal integrity.



RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Chronic diarrhea

NOT RECOMMENDED IN CASE OF:

- Acute pancreatitis *
- *may be fed in case of chronic pancreatitis

COMPOSITION

Chicken meats, chicken liver, rice, fish oil, sunflower oil, cellulose, minerals, taurine, Fructo-Oligo-Saccharides (FOS), marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG) *

Nutritional additives: Vitamin A: Vitamin D3: 135IU, E1 (Iron): 14mg, E2 (Iodine): 0.65mg, E4 (Copper): 4.5mg, E5 (Manganese): 4.5mg, E6 (Zinc): 44mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8.5g	30.4g
Fat content	6g	21.4g
Carbohydrate	9.5g	33.9g
NFE	10.5g	37.5g
Dietary fibre	2g	7.1g
Crude fibre	1g	3.6g
Omega 6	1.7g	6.1g
Omega 3	0.4g	1.4g
EPA+DHA	0.28g	1g
Calcium	0.42g	1.5g
Phosphorus	0.32g	1.1g
Sodium	0.1g	0.4g
Potassium	0.23g	0.8g
Zinc	6.4g	22.9g
Biotin	0.05g	0.2g
Metabolisable energy*	122kcal	435.7kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cans	grams	cans	grams	cans
	2kg	172	1/2	152	1/4	131	1/4
	5kg	343	3/4	301	3/4	260	1/2
	10kg	576	1 1/4	507	1 1/4	438	1
	15kg	781	1 3/4	687	1 3/4	594	1 1/2
	20kg	969	2 1/4	853	2	736	1 3/4
	25kg	1146	2 3/4	1008	2 1/2	871	2
	30kg	1313	3 1/4	1156	2 3/4	998	2 1/2
	35kg	1474	3 1/2	1297	3	1121	2 3/4
	40kg	1630	4	1434	3 1/2	1239	3

When a food allergy or intolerance is suspected, the dog's diet needs to be changed without any food transition period. Nutritional management with Sensitivity Control Canine should be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Roudebush P. Ingredients and foods associated with adverse reactions in dogs and cats. Veterinary Dermatology 2013; 24(2): 293–295.



SENSITIVITY CONTROL



SENSITIVITY CONTROL Duck & Rice



Available in 420g can

ADVERSE REACTION TO FOOD



Duck and rice are rarely involved in food allergy and are highly digestible. This approach reduces the risk of allergic reaction in the dog.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.

Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, modulate skin reactions and contribute to the intestinal mucosal integrity.

Fermentable fibres promote healthy digestive flora and contribute to the intestinal mucosal integrity.



RECOMMENDED FOR:

- Adverse Food Reactions (AFR) with dermatologic and/or gastro-intestinal signs:
 - diagnosis: food elimination trial
 - management
- Canine Atopic Dermatitis (CAD) associated with AFR
- Chronic diarrhea

NOT RECOMMENDED IN CASE OF:

- Acute pancreatitis*
 - Growth, gestation/lactation
- *may be fed in case of chronic pancreatitis

COMPOSITION

Duck meats, rice, fish oil, sunflower oil, cellulose, marigold meal (source of Lutein), minerals, taurine, Fructo-Oligo-Saccharides (FOS), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 200IU, E1 (Iron): 11mg, E2 (Iodine): 0.65mg, E4 (Copper): 4.5mg, E5 (Manganese): 3.5mg, E6 (Zinc): 33mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	9g	28.1g
Fat content	7g	21.9g
Carbohydrate	11.7g	36.6g
NFE	13.5g	42.2g
Dietary fibre	2.3g	7.2g
Crude fibre	0.5g	1.6g
Omega 6	1.2g	3.8g
Omega 3	0.35g	1.1g
EPA+DHA	0.23g	0.7g
Calcium	0.48g	1.5g
Phosphorus	0.4g	1.3g
Sodium	0.15g	0.5g
Potassium	0.22g	0.7g
Zinc	5.2g	16.3g
Biotin	0.06g	0.19g
Metabolisable energy*	146kcal	456.3kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cans	grams	cans	grams	cans
	2kg	144	1/4	127	1/4	109	1/4
	5kg	286	3/4	252	1/2	218	1/2
	10kg	481	1 1/4	424	1	366	3/4
	15kg	653	1 1/2	574	1 1/4	496	1 1/4
	20kg	810	2	713	1 3/4	615	1 1/2
	25kg	957	2 1/4	842	2	727	1 3/4
	30kg	1097	2 1/2	966	2 1/4	834	2
	35kg	1232	3	1084	2 1/2	936	2 1/4
	40kg	1362	3 1/4	1198	2 3/4	1035	2 1/2

When a food allergy or intolerance is suspected, the dog's diet needs to be changed without any food transition period. Nutritional management with Sensitivity Control Canine should be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Roudebush P. Ingredients and foods associated with adverse reactions in dogs and cats. Veterinary Dermatology 2013; 24(2): 293–296.



SENSITIVITY CONTROL





ADVERSE REACTION TO FOOD MIXED FEEDING RATION TABLE



HYPOALLERGENIC		CAN (200G)+DRY (HYPOALLERGENIC)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	40	34	28
3kg	1/4	59	50	42
4kg	1/4	76	65	55
5kg	1/2	80	68	55
6kg	1/2	95	81	67
7kg	1/2	110	94	78
8kg	1/2	124	106	89

HYPOALLERGENIC		CAN (400G)+DRY (HYPOALLERGENIC)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	29	22	16
4kg	1/4	64	54	43
6kg	1/4	95	81	67
8kg	1/4	124	106	89
10kg	1/4	151	130	109
15kg	1/2	190	161	133
20kg	1/2	247	211	176
25kg	1/2	300	258	217
30kg	1	304	256	208
35kg	1	352	299	245
40kg	1	400	340	281
50kg	1	490	419	349
60kg	1	575	495	414
70kg	1	657	567	477
80kg	1	736	637	537

HYPOALLERGENIC		HYPOALLERGENIC CAN (200G)+ HYPOALLERGENIC MOD. CALORIE DRY		HYPOALLERGENIC MODERATE CALORIE
TARGET BODY WEIGHT OF DOG	CAN+	NORMAL	OVERWEIGHT	
		dry (g)	dry (g)	
2kg	1/4	30	24	
4kg	1/4	60	48	
6kg	1/2	73	57	
8kg	1/2	96	77	
10kg	1/2	119	96	

HYPOALLERGENIC		HYPOALLERGENIC CAN (200G)+ HYPOALLERGENIC SMALL DOG DRY		HYPOALLERGENIC SMALL DOG under 10 kg
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	42	36	29
4kg	1/4	80	69	58
6kg	1/2	100	85	70
8kg	1/2	130	111	93
10kg	1/2	158	136	114

HYPOALLERGENIC		HYPOALLERGENIC CAN (400G)+ HYPOALLERGENIC MODERATE CALORIE DRY	
TARGET BODY WEIGHT OF DOG	CAN+	NORMAL	OVERWEIGHT
		dry (g)	dry (g)
2kg	1/4	18	11
4kg	1/4	47	35
6kg	1/4	73	57
8kg	1/4	96	77
10kg	1/4	119	96
15kg	1/2	144	113
20kg	1/2	191	153
25kg	1/2	236	190
30kg	1/2	278	226
35kg	1	267	208
40kg	1	306	241
50kg	1	380	304
60kg	1	451	363
70kg	1	519	421
80kg	1	584	476

HYPOALLERGENIC		HYPOALLERGENIC CAN (400G)+ HYPOALLERGENIC SMALL DOG DRY		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	30	23	17
4kg	1/4	67	56	45
6kg	1/4	100	85	70
8kg	1/4	130	111	93
10kg	1/4	158	136	114



Monofunction diets



- SKIN CARE *dry*
- SKIN CARE SMALL DOG *dry*
- SKIN CARE JUNIOR SMALL DOG *dry*
- SKIN SUPPORT *dry*



SKIN CARE



DERMATOSIS AND HAIR LOSS



A combination of essential fatty acids from Linseed, Soya, Borage and fish oils enhances the skin's natural strength and help reduce the signs of skin disease.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Contains a combination of highly digestible proteins (L.I.P.* proteins), prebiotics, beet pulp, rice and fish oil to ensure maximum digestive security.



The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.

RECOMMENDED FOR:

- Atopic dermatitis (skin lesions and otitis externa)
- Skin and hair support in case of other dermatitis*:
 - Flea Bite Allergic dermatitis
 - Pyodermatitis

* in association with antiparasitic/antibiotic treatment

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Maize, wheat gluten*, rice, tapioca, animal fats, maize gluten, minerals, soya oil, beet pulp, fish oil, vegetable fibres, flax seed, hydrolysed animal proteins, Fructo-Oligo-Saccharides (FOS), mono- and diglycerides of fatty acids esterified with citric acid, borage oil, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES [KG]*

Nutritional additives: Vitamin A: 30100IU, Vitamin D3: 800IU, E1 (Iron): 56mg, E2 (Iodine): 5.6mg, E4 (Copper): 11mg, E5 (Manganese): 73mg, E6 (Zinc): 220mg, E8 (Selenium): 0.13mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	23g
Fat content	16g
Carbohydrate	38.4g
NFE	43.9g
Dietary fibre	7.4g
Crude fibre	1.9g
Omega 6	3.64g
Omega 3	1.04g
EPA+DHA	0.41g
Calcium	0.76g
Phosphorus	0.58g
Sodium	0.3g
Metabolisable energy*	390kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	11kg	194	1 7/8	170	1 5/8	147	1 3/8
	15kg	244	2 2/8	215	2	186	1 6/8
	20kg	303	2 7/8	267	2 4/8	230	2 1/8
	25kg	358	3 3/8	315	3	272	2 5/8
	30kg	411	3 7/8	362	3 3/8	312	3
	35kg	461	4 3/8	406	3 7/8	351	3 3/8
	40kg	510	4 7/8	449	4 2/8	387	3 5/8
	45kg	557	5 2/8	490	4 5/8	423	4
	50kg	603	5 6/8	530	5	458	4 3/8
	55kg	647	6 1/8	570	5 3/8	492	4 5/8
	60kg	691	6 4/8	608	5 6/8	525	5
	65kg	734	7	646	6 1/8	558	5 2/8
	70kg	776	7 3/8	683	6 4/8	589	5 5/8
	75kg	817	7 6/8	719	6 6/8	621	5 7/8
	80kg	857	8 1/8	754	7 1/8	652	6 1/8
	85kg	897	8 4/8	790	7 4/8	682	6 4/8
	90kg	937	8 7/8	824	7 6/8	712	6 6/8
	95kg	975	9 2/8	858	8 1/8	741	7
	100kg	1014	9 5/8	892	8 4/8	770	7 2/8

As soon as the first signs of skin disease appear, the diet should be prescribed for a 2-month period to obtain visible results. For chronic disease, the dermatological diet can be maintained for the dog's entire lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Watson AL & al. Dietary constituents are able to play a beneficial role in canine epidermal barrier function. *Experimental Dermatology* 2006; 15: 74–81.
- Van Beeck FL & al. The effect of long term feeding of skin barrier fortified diets on the two year incidence of atopic dermatitis symptoms in labrador retrievers. *Proc. of the WINSS 2013*; October 1-4, Portland, Oregon (USA), 66.



SKIN CARE



SKIN CARE

SKS 25

SMALL DOG



Available in 2kg
and 4kg bag



DERMATOSIS AND HAIR LOSS



A combination of essential fatty acids from Linseed, Soya, Borage and fish oils enhances the skin's natural strength and help reduce the signs of skin disease.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.



Small breed dogs have an increased risk of suffering from dental disease in maturity. The size and texture of Skin Care Small dog encourages crunching, and pentasodium triphosphate decreases the build-up of tartar for overall dental health.



RECOMMENDED FOR:

Adult small breed dogs (<10kg) in case of:

- Atopic dermatitis (skin lesions and otitis externa)
- Skin and hair support in case of other dermatitis*:
 - Flea Bite Allergic dermatitis
 - Pyodermatitis

* in association with antiparasitic/antibiotic treatment

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Maize, wheat gluten*, rice, tapioca, animal fats, maize gluten, hydrolysed animal proteins, minerals, chicory pulp, soya oil, fish oil, flax seed, Fructo-Oligo-Saccharides (FOS), mono- and diglycerides of fatty acids esterified with citric acid, borage oil, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 30100IU, Vitamin D3: 800IU, E1 (Iron): 55mg, E2 (Iodine): 5.5mg, E4 (Copper): 11mg, E5 (Manganese): 72mg, E6 (Zinc): 215mg, E8 (Selenium): 0.1mg.
Technological additives: Pentasodium triphosphate: 3.5g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	25g	
Fat content	16g	
Carbohydrate	37.3g	
NFE	42.3g	
Dietary fibre	6.3g	
Crude fibre	1.3g	
Omega 6	3.77g	
Omega 3	1.05g	
EPA+DHA	0.41g	
Linoleic acid	3.59g	
Calcium	0.7g	
Phosphorus	0.58g	
Sodium	0.4g	
Metabolisable energy*	395kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	53	5/8	47	4/8	40	3/8
	3kg	72	6/8	64	5/8	55	5/8
	4kg	90	1	79	7/8	68	6/8
	5kg	106	1 1/8	93	1	81	7/8
	6kg	121	1 2/8	107	1 1/8	92	1
	7kg	136	1 4/8	120	1 2/8	104	1 1/8
	8kg	151	1 5/8	133	1 3/8	115	1 2/8
	9kg	165	1 6/8	145	1 4/8	125	1 3/8
	10kg	178	1 7/8	157	1 5/8	135	1 4/8

As soon as the first signs of skin disease appear, the diet should be prescribed for a 2-month period to obtain visible results. For chronic disease, the dermatological diet can be maintained for the dog's entire lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Watson AL & al. Dietary constituents are able to play a beneficial role in canine epidermal barrier function. Experimental Dermatology 2006; 15: 74–81.
- Van Beeck FL & al. The effect of long term feeding of skin barrier fortified diets on the two year incidence of atopic dermatitis symptoms in labrador retrievers. Proc. of the WINSS 2013; October 1-4, Portland, Oregon (USA), 66.



SKIN CARE



SKIN CARE

SKJ 29

JUNIOR SMALL DOG



Available in 2kg
and 4kg bag



DERMATOSIS AND HAIR LOSS



A combination of essential fatty acids from Linseed, Soya, Borage and fish oils enhances the skin's natural strength and help reduce the signs of skin disease.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



For the care of growing puppies, Skin Care Junior contains highly digestible sources of protein and starch, as well as a blend of fibre that enhances the health of the digestive tract and promotes well-formed stools.



An association of prebiotics with a patented synergistic antioxidant complex including high contents of Vitamin E, Vitamin C, Taurine & Lutein to support the natural defences of growing dogs.



RECOMMENDED FOR:

Junior small breed dogs (adult weight <10kg) in case of:

- Atopic dermatitis (skin lesions and otitis externa)
- Skin and hair support in case of other dermatitis*:
- Flea Bite Allergic dermatitis
- Pyodermatitis

* in association with antiparasitic/antibiotic treatment

COMPOSITION

Rice, wheat gluten*, animal fats, maize, maize gluten, minerals, hydrolysed animal proteins, soya protein isolate*, beet pulp, soya oil, vegetable fibres, fish oil, flax seed, Fructo-Oligo-Saccharides (FOS), borage oil, hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 24800IU, Vitamin D3: 800IU, E1 (Iron): 40mg, E2 (Iodine): 2.8mg, E4 (Copper): 11mg, E5 (Manganese): 53mg, E6 (Zinc): 202mg, E8 (Selenium): 0.1mg.

Technological additives: Pentasodium triphosphate: 3.5g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	29g
Fat content	20g
Carbohydrate	27.2g
NFE	32.2g
Dietary fibre	6.9g
Crude fibre	1.9g
Omega 6	4.21g
Omega 3	1.08g
EPA+DHA	0.4g
Linoleic acid	4g
Calcium	1.2g
Phosphorus	0.9g
Sodium	0.4g
Metabolisable energy*	405kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

PUPPY	ADULT WEIGHT	2 MONTHS		3 MONTHS		4 MONTHS		5 MONTHS		6 MONTHS	
		g	cups	g	cups	g	cups	g	cups	g	cups
	1kg	29	2/8	32	2/8	33	2/8	33	2/8	29	2/8
	2kg	49	3/8	55	4/8	56	4/8	56	4/8	48	3/8
	3kg	64	4/8	72	5/8	75	5/8	76	5/8	69	5/8
	4kg	79	5/8	89	6/8	93	6/8	93	6/8	85	6/8
	5kg	94	6/8	106	7/8	111	7/8	111	7/8	101	7/8
	6kg	104	7/8	120	1	126	1	127	1	126	1
	7kg	114	1	133	1 1/8	141	1 1/8	143	1 2/8	142	1 1/8
	8kg	125	1	147	1 2/8	156	1 2/8	158	1 3/8	157	1 2/8
	10kg	147	1 2/8	173	1 4/8	184	1 4/8	187	1 4/8	186	1 4/8
	ADULT WEIGHT	7 MONTHS		8 MONTHS		9 MONTHS		10 MONTHS		11 MONTHS	
		g	cups	g	cups	g	cups	g	cups	g	cups
	1kg	24	2/8	24	2/8	23	2/8	23	2/8		
	2kg	40	3/8	40	3/8	39	3/8	39	3/8		
	3kg	62	4/8	54	4/8	54	4/8	54	4/8		
	4kg	76	5/8	67	4/8	67	4/8	66	4/8		
	5kg	90	6/8	80	5/8	79	5/8	78	5/8		
	6kg	114	1	102	7/8	91	6/8	90	6/8		
	7kg	128	1 1/8	115	1	102	7/8	101	7/8		
	8kg	142	1 1/8	127	1	113	1	112	7/8		
	10kg	168	1 3/8	151	1 2/8	134	1 1/8	134	1 1/8	132	1 1/8

As soon as the first signs of skin disease appear, the diet should be prescribed for a 2-month period to obtain visible results. For chronic disease, the dermatological diet can be maintained for the dog's entire lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Watson AL & al. Dietary constituents are able to play a beneficial role in canine epidermal barrier function. Experimental Dermatology 2006; 15: 74–81.
- Van Beeck FL & al. The effect of long term feeding of skin barrier fortified diets on the two year incidence of atopic dermatitis symptoms in labrador retrievers. Proc. of the WINSS 2013; October 1-4, Portland, Oregon (USA), 66.



SKIN CARE JUNIOR SMALL DOG



SKIN SUPPORT

SS 23



Available in 2kg
and 7kg bag



DERMATOSIS AND HAIR LOSS



Synergistic action of the patented complex (turmeric, aloe vera, vitamin C and taurine) improves the skin's natural defences and promotes healing.



Eicosapentaenoic and docosahexaenoic acids, long-chain omega-3 fatty acids, regulate skin reactions.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.



RECOMMENDED FOR:

- Atopic dermatitis
- Wound healing
- Skin and hair support in case of other dermatitis*:
 - Flea Bite Allergic dermatitis
 - Pyodermitis

** in association with antiparasitic/antibiotic treatment*

NOT RECOMMENDED IN CASE OF:

- Gestation/lactation

COMPOSITION

Rice, dehydrated poultry protein, animal fats, vegetable fibres, hydrolysed animal proteins, minerals, fish oil, beet pulp, soya oil, borage oil, aloe vera extract, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 25000IU, Vitamin D3: 800IU, E1 (Iron): 41mg, E2 (Iodine): 2.8mg, E4 (Copper): 11mg, E5 (Manganese): 54mg, E6 (Zinc): 203mg, E8 (Selenium): 0.1mg. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	23g
Fat content	15g
Carbohydrate	37g
NFE	40.7g
Dietary fibre	7.1g
Crude fibre	3.4g
Omega 6	3.09g
Omega 3	1.01g
EPA+DHA	0.6g
Linoleic acid	2.87g
Calcium	1.2g
Phosphorus	1g
Sodium	0.4g
Metabolisable energy*	365kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	58	5/8	51	4/8	44	3/8
	4kg	97	1	85	7/8	74	6/8
	6kg	131	1 2/8	116	1 1/8	100	1
	8kg	163	1 5/8	143	1 3/8	124	1 2/8
	10kg	193	1 7/8	170	1 5/8	146	1 4/8
	15kg	261	2 5/8	230	2 2/8	198	2
	20kg	324	3 2/8	285	2 7/8	246	2 4/8
	25kg	383	3 6/8	337	3 3/8	291	2 7/8
	30kg	439	4 3/8	387	3 7/8	334	3 3/8
	35kg	493	4 7/8	434	4 2/8	375	3 6/8
	40kg	545	5 3/8	480	4 6/8	414	4 1/8
	50kg	644	6 3/8	567	5 5/8	490	4 7/8
	60kg	739	7 3/8	650	6 4/8	561	5 5/8
	70kg	829	8 2/8	730	7 2/8	630	6 2/8
	80kg	917	9 1/8	807	8	697	6 7/8

As soon as the first signs of skin disease appear, the diet should be prescribed for a 2-month period to obtain visible results. For chronic disease, the dermatological diet can be maintained for the dog's entire lifetime.

PRECAUTION FOR USE: Turmeric, a major component of SKIN SUPPORT, is a natural colouring agent (yellow) used in the human food industry. On direct contact, the food can stain clothes and hands. We recommend using a measuring cup and washing your hands after use.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Internal study supporting patent publication WO/2002/096221: «Skin diet: The present invention provides a foodstuff comprising vitamin C, taurine, curcumin and aloe vera, its use in the control of skin disorders and methods for controlling skin disorder».



SKIN SUPPORT





Monofunction diets



-  GASTRO INTESTINAL JUNIOR dry
-  GASTRO INTESTINAL dry/wet
-  GASTRO INTESTINAL MODERATE CALORIE dry
-  GASTRO INTESTINAL LOW FAT dry/wet
-  FIBRE RESPONSE dry



GASTRO INTESTINAL JUNIOR

GIJ 29



Available in 1kg, 2,5kg
and 10kg bag

Actual size

GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins (L.I.P.* proteins), prebiotics, sugar beet pulp, rice and fish oil to ensure maximum digestive security.



The high energy density responds to the growth energy requirements of puppies while helping reduce the amount of food given per meal, thus decreasing the digestive workload.



Puppies suffering from digestive trouble can be really weak and their appetite decreased and/or fussy. Those kibbles are designed (size, texture and shape) to be easily rehydrated, thus facilitating food intake in those puppies.



Formulated and designed to take into account the nutritional needs of growing puppies.



RECOMMENDED FOR:

Dogs below 1 year of age in case of:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/Malabsorption
- Dysorexia, re-feeding after surgery

NOT RECOMMENDED IN CASE OF:

- Pancreatitis or history of pancreatitis¹
- Hyperlipidemia¹
- Lymphangiectasia, exsudative enteropathy¹

⁽¹⁾ In these cases the recommended product is Gastro Intestinal low fat.

COMPOSITION

Rice, dehydrated poultry protein, animal fats, maize, dehydrated pork protein, wheat gluten*, hydrolysed animal proteins, beet pulp, minerals, egg yolk powder, soya oil, fish oil, yeasts, psyllium husks and seeds, Fructo-Oligo-Saccharides (FOS), hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 11400IU, Vitamin D3: 1000IU, E1 (Iron): 43mg, E2 (Iodine): 3.3mg, E4 (Copper): 10mg, E5 (Manganese): 56mg, E6 (Zinc): 183mg, E8 (Selenium): 0.08mg. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	29g
Fat content	22g
Carbohydrate	26.7g
NFE	31.6g
Dietary fibre	6.1g
Crude fibre	1.2g
Omega 6	4.21g
Omega 3	0.74g
EPA+DHA	0.31g
Calcium	1.2g
Phosphorus	1g
Sodium	0.4g
Metabolisable energy*	422.4kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

PUPPY	DOG'S WEIGHT	2 MONTHS		4 MONTHS		6 MONTHS		10 MONTHS		12 MONTHS	
		g	cups	g	cups	g	cups	g	cups	g	cups
	2kg	47	3/8	54	4/8	46	3/8	38	3/8		
	4kg	76	6/8	89	7/8	81	6/8	63	5/8		
	6kg	99	7/8	121	1 1/8	121	1 1/8	86	1 1/8		
	8kg	120	1 1/8	149	1 3/8	150	1 3/8	107	1		
	10kg	141	1 2/8	176	1 5/8	178	1 5/8	128	1 1/8		
	15kg	188	1 6/8	238	2 2/8	242	2 2/8	174	1 5/8	171	1 5/8
	20kg	227	2 1/8	293	2 6/8	301	2 6/8	217	2	213	2
	25kg	237	2 1/4	316	2 7/8	356	3 1/4	257	2 3/8	253	2 3/8
	30kg	248	2 1/4	339	3 1/8	407	3 3/4	322	3	291	2 3/4
	35kg	259	2 3/8	362	3 3/8	457	4 1/4	364	3 3/8	329	3
	40kg	270	2 1/2	385	3 5/8	505	4 5/8	415	3 7/8	364	3 3/8

In cases of acute disease, regeneration of the intestinal villi requires nutritional management to last for at least three weeks.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

REHYDRATION:

- Use warm water.
- Add water up to just above the kibbles.
- Wait 10-15' for adequate texture and temperature.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary fiber for dogs - In vitro fermentation of fiber sources by Dog fecal inoculum and in vivo digestion with supplemented diets, J Anim Sci 1995;73, 1099-1109.
- Middelbos IS & al. Evaluation of fermentable oligosaccharides in diets fed to dogs in comparison to fiber standards. Journal of animal science 2007; 85(11) : 3033-44.
- Swanson KS & al. Supplemental fructooligosaccharides and mannanoligosaccharides influence immune function, ileal and total tract nutrient digestibilities, microbial populations and concentrations of protein catabolites in the large bowel of dogs. J Nutr 2002; 132(5): 980-9.
- Barry KA & al. Low-level fructan supplementation of Dogs enhances nutrient digestion and modifies stool metabolite concentrations, but does not alter fecal microbiota populations. J Anim Sci 2011; 87 (10): 3244-3252.



GASTRO INTESTINAL JUNIOR



GASTRO INTESTINAL

GI 25



GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins, prebiotics, sugar beet pulp, rice and fish oil to ensure maximum digestive security.



The high energy density allows covering the dogs' energy requirements while helping reduce the amount of food given per meal, thus decreasing the digestive workload. It also helps promote weight regain during a convalescence period.



Dogs suffering from digestive troubles often show a decreased appetite and weight loss. A fine palatability fosters spontaneous consumption thus facilitating convalescence and recovery.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids, contribute to the health of the digestive system.



RECOMMENDED FOR:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery

NOT RECOMMENDED IN CASE OF:

- Pancreatitis or history of pancreatitis¹
- Hyperlipidemia¹
- Lymphangiectasia, exsudative enteropathy¹

⁽¹⁾ In these cases the recommended product is Gastro Intestinal low fat.

COMPOSITION

Rice, dehydrated poultry protein, animal fats, maize, hydrolysed animal proteins, yeasts, egg yolk powder, beet pulp, soya oil, minerals, vegetable fibres, fish oil, Fructo-Oligo-Saccharides (FOS), psyllium husks and seeds, hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 11400IU, Vitamin D3: 1000IU, E1 (Iron): 42mg, E2 (Iodine): 3.3mg, E4 (Copper): 8mg, E5 (Manganese): 55mg, E6 (Zinc): 181mg, E8 (Selenium): 0.08mg. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	25g
Fat content	20g
Carbohydrate	32.4g
NFE	37g
Dietary fibre	6.2g
Crude fibre	1.6g
Omega 6	3.52g
Omega 3	0.7g
EPA+DHA	0.3g
Calcium	1.14g
Phosphorus	0.99g
Sodium	0.4g
Metabolisable energy*	407.4kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	52	4/8	45	4/8	39	3/8
	4kg	87	7/8	76	6/8	66	6/8
	6kg	118	1 2/8	104	1 1/8	89	7/8
	8kg	146	1 4/8	128	1 3/8	111	1 1/8
	10kg	173	1 6/8	152	1 5/8	131	1 3/8
	15kg	234	2 4/8	206	2 1/8	178	1 7/8
	20kg	290	3	255	2 5/8	221	2 2/8
	25kg	343	3 5/8	302	3 1/8	261	2 6/8
	30kg	393	4 1/8	346	3 5/8	299	3 1/8
	35kg	442	4 5/8	389	4	336	3 4/8
	40kg	488	5 1/8	429	4 4/8	371	3 7/8
	50kg	577	6	508	5 2/8	438	4 5/8
	60kg	661	6 7/8	582	6 1/8	503	5 2/8
	70kg	743	7 6/8	653	6 6/8	564	5 7/8
	80kg	821	8 4/8	722	7 4/8	624	6 4/8

In cases of acute disease, regeneration of the intestinal villi requires nutritional management to last for at least three weeks. Lifetime feeding may be necessary/beneficial in case of chronic disease.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary fiber for dogs - In vitro fermentation of fiber sources by Dog fecal inoculum and in vivo digestion with supplemented diets. J Anim Sci 1995;73: 1099-1109.
- Middelbos IS & al. Evaluation of fermentable oligosaccharides in diets fed to dogs in comparison to fiber standards. Journal of animal science 2007; 85(11) : 3033-44.
- Swanson KS & al. Supplemental fructooligosaccharides and mannanoligosaccharides influence immune function, ileal and total tract nutrient digestibilities, microbial populations and concentrations of protein catabolites in the large bowel of dogs. J Nutr 2002; 132(5): 980-9.
- Barry KA & al. Low-level fructan supplementation of Dogs enhances nutrient digestion and modifies stool metabolite concentrations, but does not alter fecal microbiota populations. J Anim Sci 2011; 87 (10): 3244-3252.



GASTRO INTESTINAL



GASTRO INTESTINAL

GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins, prebiotics, fibres and fish oil to ensure digestive security.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids may contribute to the health of the digestive system.

The energy density allows covering the dogs' energy requirements while helping reduce the amount of food given per meal, thus decreasing the digestive workload. It also helps promote weight regain during a convalescence period.

The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.

RECOMMENDED FOR:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery

NOT RECOMMENDED IN CASE OF:

- Pancreatitis or history of pancreatitis¹
- Hyperlipidemia¹
- Lymphangiectasia, exsudative enteropathy¹

⁽¹⁾ In these cases the recommended product is Gastro Intestinal low fat.



Available in 200g and 400g can

COMPOSITION

Pork and poultry meats, salmon, rice, vegetable fibres, sunflower oil, minerals, gelling agents, taurine, fish oil, yeast hydrolysate (source of Mannan-Oligo-Saccharides), marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 380IU, E1 (Iron): 7mg, E2 (Iodine): 0.35mg, E4 (Copper): 2.3mg, E5 (Manganese): 2mg, E6 (Zinc): 21mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8.5g	34g
Fat content	6.5g	26g
Carbohydrate	6.1g	24.4g
NFE	6.5g	26g
Dietary fibre	1.9g	7.6g
Crude fibre	1.5g	6g
Omega 6	0.95g	3.8g
Omega 3	0.48g	1.92g
EPA+DHA	0.08g	0.32g
Calcium	0.35g	1.4g
Phosphorus	0.28g	1.12g
Sodium	0.09g	0.36g
Potassium	0.26g	1.04g
Magnesium	0.03g	0.14g
Metabolisable energy*	109kcal	436kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	400g	200g	grams	400g	200g	grams	400g	200g
	2kg	193	1/2	1	170	1/2	3/4	147	1/4	3/4
	3kg	262	3/4	1 1/4	230	1/2	1 1/4	199	1/2	1
	4kg	325	3/4	1 3/4	286	3/4	1 1/2	247	1/2	1 1/4
	5kg	384	1	2	338	3/4	1 3/4	292	3/4	1 1/2
	6kg	440	1	2 1/4	388	1	2	335	3/4	1 3/4
	7kg	494	1 1/4	2 1/2	435	1	2 1/4	376	1	2
	8kg	547	1 1/4	2 3/4	481	1 1/4	2 1/2	415	1	2
	9kg	597	1 1/2	3	525	1 1/4	2 3/4	454	1	2 1/4
10kg	646	1 1/2	3 1/4	569	1 1/2	2 3/4	491	1 1/4	2 1/2	
15kg	876	2 1/4		771	2		666	1 1/2		
20kg	1087	2 3/4		956	2 1/4		826	2		
25kg	1285	3 1/4		1130	2 3/4		976	2 1/2		
30kg	1473	3 1/2		1296	3 1/4		1119	2 3/4		
35kg	1653	4		1455	3 1/2		1256	3		
40kg	1827	4 1/2		1608	4		1389	3 1/2		

The feeding duration varies depending on the severity of gastrointestinal symptoms.

In order to optimise digestive function, the recommended daily intake should be divided into several meals.

For the mixed feeding table please see the end of the section Gastro-intestinal disorders.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary fiber for dogs - In vitro fermentation of fiber sources by Dog fecal inoculum and in vivo digestion with supplemented diets. J Anim Sci 1995;73, 1099-1109.
- Middelbos IS & al. Evaluation of fermentable oligosaccharides in diets fed to dogs in comparison to fiber standards. Journal of animal science 2007; 85[11] : 3033-44.
- Swanson KS & al. Supplemental fructooligosaccharides and mannanoligosaccharides influence immune function, ileal and total tract nutrient digestibilities, microbial populations and concentrations of protein catabolites in the large bowel of dogs. J Nutr 2002; 132[5]: 980-9.
- Barry KA & al. Low-level fructan supplementation of Dogs enhances nutrient digestion and modifies stool metabolite concentrations, but does not alter fecal microbiota populations. J Anim Sci 2011; 87 [10]: 3244-3252.

INTESTINAL



GASTRO
INTESTINAL
MODERATE CALORIE

GIM 23



Available in 2kg, 7,5kg
and 14kg bag



GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins, prebiotics, beet pulp, rice and fish oil to ensure maximum digestive security.



A reduced calorie content helps limit weight gain in neutered dogs or those with a tendency to overweight.



Dogs suffering from digestive troubles often show a decreased appetite and weight loss. A fine palatability fosters spontaneous consumption thus facilitating convalescence and recovery.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids contribute to the health of the digestive system.



RECOMMENDED FOR:

Dogs with tendency to overweight in case of:

- Acute and chronic diarrhea
- Gastritis
- Inflammatory Bowel Disease (IBD)
- Colitis
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery
- Moderate chronic pancreatitis

NOT RECOMMENDED IN CASE OF:

- Acute or severe chronic pancreatitis¹
- Hyperlipidemia¹
- Lymphangiectasia, exsudative enteropathy¹

⁽¹⁾ In these cases the recommended product is Gastro Intestinal low fat.

COMPOSITION

Rice, dehydrated poultry protein, maize, hydrolysed animal proteins, animal fats, beet pulp, egg yolk powder, vegetable fibres, minerals, yeasts, soya oil, fish oil, Fructo-Oligo-Saccharides (FOS), psyllium husks and seeds, hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 11600IU, Vitamin D3: 1000IU, E1 (Iron): 43mg, E2 (Iodine): 3.3mg, E4 (Copper): 9mg, E5 (Manganese): 56mg, E6 (Zinc): 185mg, E8 (Selenium): 0.08mg. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed
Protein	23g
Fat content	11g
Carbohydrate	43.2g
NFE	47.9g
Dietary fibre	7g
Crude fibre	2.3g
Omega 6	2.3g
Omega 3	0.44g
EPA+DHA	0.21g
Calcium	1g
Phosphorus	0.89g
Sodium	0.4g
Metabolisable energy*	361.1kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	51	4/8	44	4/8	37	3/8
	4kg	86	7/8	74	6/8	63	5/8
	6kg	117	1 2/8	101	1 1/8	85	7/8
	8kg	145	1 4/8	125	1 3/8	105	1 1/8
	10kg	171	1 7/8	148	1 5/8	124	1 3/8
	15kg	232	2 4/8	200	2 1/8	169	1 6/8
	20kg	288	3 1/8	248	2 5/8	209	2 2/8
	25kg	340	3 5/8	294	3 1/8	247	2 5/8
	30kg	390	4 1/8	337	3 5/8	284	3
	35kg	438	4 5/8	378	4	318	3 3/8
	40kg	484	5 1/8	418	4 4/8	352	3 6/8
	50kg	572	6 1/8	494	5 2/8	416	4 4/8
	60kg	656	7	566	6	477	5 1/8
	70kg	736	7 7/8	636	6 6/8	535	5 6/8
	80kg	814	8 6/8	703	7 4/8	592	6 3/8

In cases of acute disease, regeneration of the intestinal villi requires nutritional management to last for at least three weeks. Lifetime feeding may be necessary/beneficial in case of chronic disease.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary fiber for dogs - In vitro fermentation of fiber sources by Dog fecal inoculum and in vivo digestion with supplemented diets. J Anim Sci 1995;73: 1099-1109.
- Middelbos IS & al. Evaluation of fermentable oligosaccharides in diets fed to dogs in comparison to fiber standards. Journal of animal science 2007; 85(11) : 3033-44.
- Swanson KS & al. Supplemental fructooligosaccharides and mannanoligosaccharides influence immune function, ileal and total tract nutrient digestibilities, microbial populations and concentrations of protein catabolites in the large bowel of dogs. J Nutr 2002; 132(5): 980-9.
- Barry KA & al. Low-level fructan supplementation of Dogs enhances nutrient digestion and modifies stool metabolite concentrations, but does not alter fecal microbiota populations. J Anim Sci 2011; 87 (10): 3244-3252.



GASTRO INTESTINAL



GASTRO INTESTINAL LOW FAT



GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins, prebiotics, sugar beet pulp, rice and fish oil to ensure maximum digestive security.



A low fat concentration improves digestive function in dogs with hyperlipidaemia or with acute pancreatitis.



Low level of soluble fibres to help limit colic fermentations. Low level of insoluble fibre to avoid energy dilution and limit possibly negative impact on palatability in a low fat diet.



The synergistic antioxidant complex reduces oxidative stress and fights free radicals.

RECOMMENDED FOR:

- Diarrhea
- Acute and chronic pancreatitis
- Hyperlipidemia
- Lymphangiectasia, exsudative enteropathy
- Gastritis, oesophagitis
- Exocrine Pancreatic Insufficiency (EPI)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, dehydrated poultry protein, wheat, barley, hydrolysed animal proteins, beet pulp, yeasts, animal fats, minerals, Fructo-Oligo-Saccharides (FOS), psyllium husks and seeds, fish oil, hydrolysed yeast (source of Mannan-Oligo-Saccharides), marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 11700IU, Vitamin D3: 1000IU, E1 (Iron): 43mg, E2 (Iodine): 3.4mg, E4 (Copper): 9mg, E5 (Manganese): 57mg, E6 (Zinc): 186mg, E8 (Selenium): 0.08mg. **Preservatives - Antioxidants.**

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	22g
Fat content	7g
Carbohydrate	46.3g
NFE	53.2g
Dietary fibre	8.6g
Crude fibre	1.7g
Omega 6	1.24g
Omega 3	0.25g
EPA+DHA	0.14g
Calcium	1.09g
Phosphorus	0.83g
Sodium	0.4g
Metabolisable energy*	345.6kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	54	6/8	46	5/8	39	4/8
	4kg	90	1 1/8	78	1	65	7/8
	6kg	122	1 5/8	105	1 3/8	89	1 1/8
	8kg	151	2	131	1 6/8	110	1 3/8
	10kg	179	2 3/8	155	2	130	1 6/8
	15kg	243	3 1/8	210	2 6/8	176	2 2/8
	20kg	301	3 7/8	260	3 3/8	219	2 7/8
	25kg	356	4 5/8	307	4	259	3 3/8
	30kg	408	5 3/8	352	4 5/8	297	3 7/8
	35kg	438	6	396	5 1/8	333	4 3/8
	40kg	506	6 5/8	437	5 6/8	368	4 6/8
	50kg	598	7 6/8	517	6 6/8	435	5 5/8
	60kg	686	8 7/8	593	7 6/8	499	6 4/8
	70kg	770	10	665	8 5/8	560	7 2/8
	80kg	851	11 1/8	735	9 5/8	619	8

The feeding duration varies depending on the severity of gastrointestinal signs.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN GI LOW FAT

- Xenoulis PG & al. Effect of a low-fat diet on serum triglyceride, cholesterol, and pancreatic lipase immunoreactivity concentrations in miniature Schnauzers with hypertriglyceridemia. ACVIM 2011 Proceedings: 687, Denver, Colorado.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary fiber for dogs - In vitro fermentation of fiber sources by Dog fecal inoculum and in vivo digestion with supplemented diets. J Anim Sci 1995;73: 1099-1109.
- Middelbos IS & al. Evaluation of fermentable oligosaccharides in diets fed to dogs in comparison to fiber standards. Journal of animal science 2007; 85(11) : 3033-44.
- Swanson KS & al. Supplemental fructooligosaccharides and mannanoligosaccharides influence immune function, ileal and total tract nutrient digestibilities, microbial populations and concentrations of protein catabolites in the large bowel of dogs. J Nutr 2002; 132(5): 980-9.
- Barry KA & al. Low-level fructan supplementation of Dogs enhances nutrient digestion and modifies stool metabolite concentrations, but does not alter fecal microbiota populations. J Anim Sci 2011; 87 (10): 3244-3252.



GASTRO INTESTINAL LOW FAT



GASTRO INTESTINAL LOW FAT

GASTRO-INTESTINAL DISORDERS



A combination of highly digestible proteins and starches, prebiotics, beet pulp, and fish oil helps support digestive health.



A low fat concentration improves digestive function in dogs with hyperlipidaemia or with acute pancreatitis.

Adjusted levels of soluble/insoluble fibres to help limit fermentations and promote good stools quality.

The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.

RECOMMENDED FOR:

- Diarrhea
- Acute and chronic pancreatitis
- Hyperlipidemia
- Lymphangiectasia, exsudative enteropathy
- Gastritis, oesophagitis
- Exocrine Pancreatic Insufficiency (EPI)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



Available in 410g and 200g can

COMPOSITION

Pork liver, pork meats, corn, rice, minerals, cellulose, sugar beet pulp, taurine, yeast hydrolysate (source of Mannan-Oligo-Saccharides), fish oil, marigold meal (source of Lutein), trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 200IU, E1 (Iron): 8mg, E2 (Iodine): 0.15mg, E4 (Copper): 1mg, E5 (Manganese): 2.5mg, E6 (Zinc): 24mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	7.5g	28.8g
Fat content	1.7g	6.5g
Carbohydrate	12.4g	47.7g
NFE	13.6g	52.3g
Dietary fibre	2.9g	11.2g
Crude fibre	1.7g	6.5g
Omega 6	0.3g	1.2g
Omega 3	0.03g	0.1g
EPA+DHA	0.02g	0.1g
Calcium	0.24g	0.9g
Phosphorus	0.13g	0.5g
Sodium	0.06g	0.2g
Potassium	0.14g	0.5g
Metabolisable energy*	92kcal	353.8kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	410g	200g	grams	410g	200g	grams	410g	200g
	2kg	230	1/2	1 1/4	202	1/2	1	174	1/2	3/4
	3kg	311	3/4	1 1/2	274	3/4	1 1/4	236	1/2	1 1/4
	4kg	386	1	2	340	3/4	1 3/4	293	3/4	1 1/2
	5kg	456	1	2 1/4	402	1	2	347	3/4	1 3/4
	6kg	523	1 1/4	2 1/2	460	1	2 1/4	398	1	2
	7kg	587	1 1/2	3	517	1 1/4	2 1/2	446	1	2 1/4
	8kg	649	1 1/2	3 1/4	571	1 1/2	2 3/4	493	1 1/4	2 1/2
	9kg	709	1 3/4	3 1/2	624	1 1/2	3	539	1 1/4	2 3/4
	10kg	767	1 3/4	3 3/4	675	1 3/4	3 1/2	583	1 1/2	3
	15kg	1040	2 1/2		915	2 1/4		790	2	
20kg	1291	3 1/4		1136	2 3/4		981	2 1/2		
25kg	1526	3 3/4		1343	3 1/4		1160	2 3/4		
30kg	1749	4 1/4		1539	3 3/4		1329	3 1/4		
35kg	1964	4 3/4		1728	4 1/4		1492	3 3/4		
40kg	2170	5 1/4		1910	4 3/4		1650	4		

The feeding duration varies depending on the severity of gastrointestinal signs.

In order to optimise digestive function, the recommended daily intake should be divided into several small meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN GI LOW FAT

- Xenoulis PG & al. Effect of a low-fat diet on serum triglyceride, cholesterol, and pancreatic lipase immunoreactivity concentrations in miniature Schnauzers with hypertriglyceridemia. ACVIM 2011 Proceedings: 687, Denver, Colorado.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Sunvold GD & al. Dietary fiber for dogs - In vitro fermentation of fiber sources by Dog fecal inoculum and in vivo digestion with supplemented diets. J Anim Sci 1995;73: 1099-1109.
- Middelbos IS & al. Evaluation of fermentable oligosaccharides in diets fed to dogs in comparison to fiber standards. Journal of animal science 2007; 85(11) : 3033-44.
- Swanson KS & al. Supplemental fructooligosaccharides and mannanoligosaccharides influence immune function, ileal and total tract nutrient digestibilities, microbial populations and concentrations of protein catabolites in the large bowel of dogs. J Nutr 2002; 132(5): 980-9.
- Barry KA & al. Low-level fructan supplementation of Dogs enhances nutrient digestion and modifies stool metabolite concentrations, but does not alter fecal microbiota populations. J Anim Sci 2011; 87 (10): 3244-3252.



GASTRO INTESTINAL LOW FAT



FIBRE RESPONSE

FR 23



Available in 2kg, 7,5kg
and 14kg bag

GASTRO-INTESTINAL DISORDERS



Combination of highly digestible proteins (L.I.P.* proteins), prebiotics, sugar beet pulp, rice and fish oil to ensure maximum digestive security.



High fibre content to address fibre responsive diarrhoea and colitis.



Eicosapentaenoic and docosahexaenoic acids, omega-3 long chain fatty acids contribute to the health of the digestive system.



The synergistic antioxidant complex reduces oxidative stress and fights free radicals.

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation



RECOMMENDED FOR:

- Fibre responsive colitis
- Conditions requiring a high fibre level

NOT RECOMMENDED IN CASE OF:

- Obstipation
- Obstructive megacolon

COMPOSITION

Rice, vegetable fibres, dehydrated poultry protein, animal fats, maize, maize gluten, wheat, hydrolysed animal proteins, minerals, dehydrated pork protein, wheat gluten*, beet pulp, soya oil, fish oil, yeasts, psyllium husks and seeds, Fructo-Oligo-Saccharides (FOS), hydrolysed yeast (source of Mannan-Oligo-Saccharides), egg yolk powder, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 11300IU, Vitamin D3: 1000IU, E1 (Iron): 42mg, E2 (Iodine): 3.3mg, E4 (Copper): 8mg, E5 (Manganese): 55mg, E6 (Zinc): 180mg, E8 (Selenium): 0.08mg. **Preservatives - Antioxidants.**

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	23g	
Fat content	16g	
Carbohydrate	23.7g	
NFE	33.1g	
Dietary fibre	20.5g	
Crude fibre	11.1g	
Omega 6	3.1g	
Omega 3	0.65g	
EPA+DHA	0.3g	
Calcium	1.08g	
Phosphorus	0.89g	
Sodium	0.3g	
Metabolisable energy*	316.9kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	66	6/8	58	5/8	50	5/8
	4kg	112	1 2/8	98	1 1/8	85	1
	6kg	151	1 6/8	133	1 4/8	115	1 2/8
	8kg	188	2 1/8	165	1 7/8	143	1 5/8
	10kg	222	2 4/8	195	2 2/8	169	1 7/8
	15kg	301	3 3/8	265	3	228	2 5/8
	20kg	373	4 2/8	328	3 6/8	284	3 2/8
	25kg	441	5	388	4 3/8	335	3 6/8
	30kg	506	5 6/8	445	5	384	4 3/8
	35kg	568	6 3/8	499	5 5/8	431	4 7/8
	40kg	627	7	552	6 2/8	477	5 3/8
	50kg	742	8 3/8	653	7 3/8	564	6 3/8
	60kg	850	9 5/8	748	8 3/8	646	7 2/8
	70kg	955	10 6/8	840	9 4/8	725	8 1/8
	80kg	1055	11 7/8	929	10 4/8	802	9

The feeding duration varies depending on the severity of gastrointestinal signs.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Lewis LD & al. Stool characteristics, gastrointestinal transit time and nutrient digestibility in dogs fed different fiber sources. J Nutr. 1994 Dec;124(12 Suppl):2716S-2718S.



FIBRE RESPONSE



GASTRO-INTESTINAL DISORDERS

MIXED FEEDING RATION TABLE

GASTRO INTESTINAL		CAN (200G)+DRY (GASTRO INTESTINAL)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	38	32	26
3kg	1/2	43	35	26
4kg	1/2	60	50	39
5kg	1/2	76	64	51
6kg	1	64	50	36
7kg	1	79	63	47
8kg	1	93	75	58

GASTRO INTESTINAL LOW FAT		CAN (200G)+DRY (GASTRO INTESTINAL LOW FAT)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/2	34	27	20
3kg	1/2	56	46	36
4kg	1/2	76	64	51
5kg	1	68	53	39
6kg	1	86	69	52
7kg	1	103	84	65
8kg	1	119	98	78

GASTRO INTESTINAL		CAN (400G)+DRY (GASTRO INTESTINAL)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	25	19	13
4kg	1/4	60	50	39
6kg	1/2	64	50	36
8kg	1/2	93	75	58
10kg	1/2	119	98	78
15kg	1	127	99	71
20kg	1	183	149	114
25kg	1	236	195	154
30kg	1	286	239	192
35kg	1	335	282	229
40kg	1	381	323	264
50kg	1	470	401	332
60kg	1	555	475	396
70kg	1	636	547	457
80kg	1	714	615	517

GASTRO INTESTINAL LOW FAT		CAN (410G)+DRY (GASTRO INTESTINAL LOW FAT)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	34	26	19
4kg	1/4	75	63	51
6kg	1/2	84	68	51
8kg	1/2	118	97	76
10kg	1/2	149	125	100
15kg	1	167	134	101
20kg	1	233	192	151
25kg	1	296	247	199
30kg	1	355	299	244
35kg	1	412	349	287
40kg	1	467	398	329
50kg	1	571	490	408
60kg	1	671	578	484
70kg	1	767	662	557
80kg	1	859	743	627

Monofunction diets



■ HEPATIC dry/wet



HEPATIC

HF 16



Available in 1,5kg, 6kg
and 12kg bag



Actual size

LIVER DISEASE



Highly digestible vegetable proteins (soy protein isolate) are better tolerated in dogs with hepatic encephalopathy.



A low copper with increased zinc content minimises both copper accumulation in the hepatocytes and intracellular lesions caused by cholestasis.



The synergistic antioxidant complex slows hepatocyte degradation.



High energy provided from fat avoids excessive protein catabolism, limiting the risk of onset or the progression of hepatic encephalopathy.



RECOMMENDED FOR:

- Chronic hepatitis*
- Portosystemic shunt
- Hepatic encephalopathy
- Copper storage disease

* in case of acute hepatitis, the recommended product are Recovery or Convalescence Support Instant

NOT RECOMMENDED IN CASE OF:

- Pancreatitis
- Growth, gestation/lactation

COMPOSITION

Rice, maize, animal fats, soya protein isolate*, hydrolysed animal proteins, beet pulp, minerals, soya oil, vegetable fibres, fish oil, Fructo-Oligo-Saccharides (FOS), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 11600IU, Vitamin D3: 1000IU, E1 (Iron): 115mg, E2 (Iodine): 4.3mg, E5 (Manganese): 53mg, E6 (Zinc): 212mg, E8 (Selenium): 0.38mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	16g
Fat content	16g
Carbohydrate	46.8g
NFE	51.9g
Dietary fibre	7.1g
Crude fibre	2g
Omega 6	3.81g
Omega 3	0.59g
EPA+DHA	0.2g
Calcium	0.72g
Phosphorus	0.51g
Sodium	0.2g
Copper	0.4mg
Metabolisable energy*	391kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	54	6/8	47	5/8	41	4/8
	4kg	91	1 1/8	80	1	69	7/8
	6kg	123	1 5/8	108	1 3/8	93	1 2/8
	8kg	152	2	134	1 6/8	116	1 4/8
	10kg	180	2 3/8	158	2	137	1 6/8
	15kg	244	3 1/8	215	2 6/8	185	2 3/8
	20kg	303	4	266	3 4/8	230	3
	25kg	358	4 5/8	315	4 1/8	272	3 4/8
	30kg	410	5 3/8	361	4 6/8	312	4 1/8
	35kg	460	6	405	5 2/8	350	4 4/8
	40kg	509	6 5/8	448	5 7/8	387	5
	50kg	602	7 7/8	530	6 7/8	457	6
	60kg	690	9	607	7 7/8	524	6 7/8
	70kg	774	10 1/8	682	8 7/8	589	7 5/8
	80kg	856	11 1/8	753	9 6/8	651	8 4/8

Feeding duration varies depending on the pathology and on the regenerative ability of the hepatic tissue.

Lifelong feeding may be necessary in case of chronic disease.

In order to reduce the postprandial hepatic load, it is recommended to divide the recommended daily intake into several small meals.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HEPATIC

- Proot S. & al. Soy protein isolate versus meat-based low-protein diet for dogs with congenital portosystemic shunts. J Vet Intern med 2009, 23: 794-800.
- Hoffmann G. et al. Dietary Management of Hepatic Copper Accumulation in Labrador Retrievers J Vet Intern Med 2009; 23(5):957-963.
- Fieten H. & al. Nutritional management of inherited copper-associated hepatitis in the Labrador retriever. The Veterinary Journal [2014];199(3):429-3.
- Fieten H. & al. Dietary Management of Labrador Retrievers with Subclinical Hepatic Copper Accumulation. J Vet Intern Med. 2015;29(3):822-7.



HEPATIC



HEPATIC

LIVER DISEASE



A low copper with increased zinc content minimises both copper accumulation in the hepatocytes and intracellular lesions caused by cholestasis.



A low sodium intake decreases portal hypertension and reduces extravascular fluid loss.

Adapted energy level helps maintain bodyweight in dogs with hepatic failure. L-carnitine favours fat use in the liver avoiding excessive protein catabolism and limiting the risk of onset or the progression of hepatic encephalopathy.

The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.

RECOMMENDED FOR:

- Chronic hepatitis*
- Portosystemic shunt
- Hepatic encephalopathy
- Copper storage disease

* in case of acute hepatitis, the recommended product are Recovery or Convalescence Support Instant

NOT RECOMMENDED IN CASE OF:

- Pancreatitis
- Growth, gestation/lactation



Available in 420g and 200g can

COMPOSITION

Rice, corn grains and flour, poultry meats and livers, sunflower oil, egg whites dried, cellulose, sugar beet pulp, minerals, carrageenan, taurine, L-carnitine, Fructo-Oligo-Saccharides (FOS), trace elements (including chelated trace elements), marigold meal (source of Lutein), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 248IU, E1 (Iron): 30mg, E2 (Iodine): 1.5mg, E4 (Copper): 0.8mg, E5 (Manganese): 14mg, E6 (Zinc): 55mg.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	100g dry matter
Protein	6.5g	18.1g
Fat content	4.2g	11.7g
Carbohydrate	20.8g	57.8g
NFE	21.8g	60.6g
Dietary fibre	3g	8.3g
Crude fibre	2g	5.6g
Omega 6	1.6g	4.44g
Omega 3	0.01g	0.03g
Calcium	0.35g	0.97g
Phosphorus	0.24g	0.67g
Sodium	0.05g	0.14g
Potassium	0.27g	0.75g
Copper	0.17mg	0.47mg
Metabolisable energy*	138kcal	383.3kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	420g	200g	grams	420g	200g	grams	420g	200g
	2kg	152	1/4	3/4	134	1/4	3/4	116	1/4	1/2
	3kg	206	1/2	1	181	1/2	1	157	1/4	3/4
	4kg	256	1/2	1 1/4	225	1/2	1 1/4	194	1/2	1
	5kg	302	3/4	1 1/2	266	3/4	1 1/4	230	1/2	1 1/4
	6kg	347	3/4	1 3/4	305	3/4	1 1/2	264	3/4	1 1/4
	7kg	389	1	2	343	3/4	1 3/4	296	3/4	1 1/2
	8kg	430	1	2 1/4	379	1	2	327	3/4	1 3/4
	9kg	470	1	2 1/4	414	1	2	357	3/4	1 3/4
10kg	509	1 1/4	2 1/2	448	1	2 1/4	387	1	2	
15kg	689	1 3/4		607	1 1/2		524	1 1/4		
20kg	855	2		753	1 3/4		650	1 1/2		
25kg	1011	2 1/2		890	2		769	1 3/4		
30kg	1159	2 3/4		1020	2 1/2		881	2		
35kg	1302	3		1145	2 3/4		989	2 1/4		
40kg	1439	3 1/2		1266	3		1093	2 1/2		

Feeding duration varies depending on the pathology and on the regenerative ability of the hepatic tissue.

Lifetime feeding may be necessary in case of chronic disease.

In order to reduce the postprandial hepatic charge, it is recommended to feed several small meals up to the recommended daily intake.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN HEPATIC

- Proot S. & al. Soy protein isolate versus meat-based low-protein diet for dogs with congenital portosystemic shunts. J Vet Intern med 2009; 23: 794-800.
- Hoffmann G. et al. Dietary Management of Hepatic Copper Accumulation in Labrador Retrievers J Vet Intern Med 2009; 23(5):957-963.
- Fieten H. & al. Nutritional management of inherited copper-associated hepatitis in the Labrador retriever. The Veterinary Journal [2014];199(3):429-3.
- Fieten H. & al. Dietary Management of Labrador Retrievers with Subclinical Hepatic Copper Accumulation. J Vet Intern Med. 2015;29(3):822-7.



HEPATIC



LIVER DISEASE

MIXED FEEDING RATION TABLE

HEPATIC		CAN (200G)+DRY (HEPATIC)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	36	30	23
3kg	1/2	38	29	20
4kg	1/2	55	44	33
5kg	1/2	72	59	46
6kg	1/2	87	73	58
7kg	1/2	102	86	69
8kg	1	81	63	45

HEPATIC		CAN (420G)+DRY (HEPATIC)		
TARGET BODY WEIGHT OF DOG	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	17	10	4
4kg	1/4	53	43	32
6kg	1/4	86	71	56
8kg	1/2	78	60	41
10kg	1/2	106	84	62
15kg	1/2	170	140	111
20kg	1	154	118	81
25kg	1	209	166	123
30kg	1	262	212	163
35kg	1	312	257	201
40kg	1	360	299	238
50kg	1	453	381	309
60kg	1	541	459	376
70kg	1	626	533	440
80kg	1	707	605	502

Monofunction diets



- RENAL dry
- RENAL SPECIAL dry
- RENAL SELECT dry
- RENAL wet (can and pouch)
- RENAL SPECIAL wet



RENAL

RF 14



Available in 2kg, 7kg
and 14kg bag

Actual size

RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



Designed aromatic profile helps answer to dog's specific preference.



RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, maize flour, animal fats, maize gluten, maize, hydrolysed animal proteins, beet pulp, wheat gluten*, minerals, fish oil, vegetable fibres, soya oil, fructo-oligo-saccharides, psyllium husks and seeds, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15800IU, Vitamin D3: 1000IU, E1 (Iron): 40mg, E2 (Iodine): 4mg, E4 (Copper): 12mg, E5 (Manganese): 52mg, E6 (Zinc): 154mg.

Technological additives: Clinoptilolite of sedimentary origin: 5 g
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	14g
Fat content	18g
Carbohydrate	47.1g
NFE	52.2g
Dietary fibre	7.5g
Crude fibre	2.4g
Omega 6	4.23g
Omega 3	1.07g
EPA+DHA	0.47g
Calcium	0.4g
Phosphorus	0.2g
Sodium	0.35g
Potassium	0.6g
Vitamin D3	100IU
Metabolisable energy*	398.8kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	53	5/8	46	4/8	40	4/8
	4kg	89	1	78	7/8	67	6/8
	6kg	120	1 3/8	106	1 1/8	91	1
	8kg	149	1 5/8	131	1 3/8	113	1 2/8
	10kg	176	1 7/8	155	1 6/8	134	1 4/8
	15kg	239	2 5/8	210	2 2/8	182	2
	20kg	296	3 2/8	261	2 7/8	225	2 4/8
	25kg	350	3 7/8	308	3 3/8	266	2 7/8
	30kg	402	4 3/8	354	3 7/8	305	3 3/8
	35kg	451	5	397	4 3/8	343	3 6/8
	40kg	499	5 4/8	439	4 7/8	379	4 1/8
	50kg	589	6 4/8	519	5 6/8	448	4 7/8
	60kg	676	7 3/8	595	6 4/8	514	5 5/8
	70kg	759	8 3/8	668	7 3/8	579	6 3/8
	80kg	838	9 2/8	738	8 1/8	637	7

Provides dietary management in chronic renal disease including early stage. This diet can be maintained for the dog's lifetime. Regular veterinary checks are advised.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Finco DR & al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA & al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Brown SA & al. Beneficial effects of chronic administration of dietary omega-3 polyunsaturated fatty acids in dogs with renal insufficiency. J Lab Clin Med 1998; 131(5): 447-455.
- Bauer JE & al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.



RENAL



RENAL SPECIAL



Available in 2kg and
10kg bag



RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents;



Designed aromatic profile helps answer to dog's specific preference.



RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, maize flour, animal fats, maize, dehydrated poultry protein, hydrolysed animal proteins, beet pulp, wheat gluten*, minerals, fish oil, vegetable fibres, soya oil, fatty acid salt, fructo-oligo-saccharides, psyllium husks and seeds, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15700IU, Vitamin D3: 1000IU, E1 (Iron): 40mg, E2 (Iodine): 4 mg, E4 (Copper): 12mg, E5 (Manganese): 52 mg, E6 (Zinc): 154mg.

Technological additives: Clinoptilolite of sedimentary origin: 5 g

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	13.5g
Fat content	16g
Carbohydrate	48.7g
NFE	54.4g
Dietary fibre	8g
Crude fibre	2.3g
Omega 6	3.62g
Omega 3	1.03g
EPA+DHA	0.47g
Calcium	0.6g
Phosphorus	0.3g
Sodium	0.35g
Potassium	0.6g
Vitamin D3	100IU
Metabolisable energy*	388.6kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	54	5/8	48	4/8	41	4/8
	4kg	91	1	80	7/8	69	6/8
	6kg	123	1 3/8	109	1 2/8	94	1
	8kg	153	1 5/8	135	1 4/8	116	1 2/8
	10kg	181	2	159	1 6/8	137	1 4/8
	15kg	245	2 5/8	216	2 3/8	186	2
	20kg	304	3 3/8	268	3	231	2 4/8
	25kg	360	4	316	3 4/8	273	3
	30kg	412	4 4/8	363	4	313	3 3/8
	35kg	463	5 1/8	407	4 4/8	352	3 7/8
	40kg	512	5 5/8	450	4 7/8	389	4 2/8
	50kg	605	6 5/8	532	5 7/8	460	5
	60kg	693	7 5/8	610	6 6/8	527	5 6/8
	70kg	778	8 4/8	685	7 4/8	592	6 4/8
	80kg	860	9 3/8	757	8 2/8	654	7 1/8

Provides dietary management in chronic renal disease including early stage. This diet can be maintained for the dog's lifetime. Regular veterinary checks are advised.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Finco DR & al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA & al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Brown SA & al. Beneficial effects of chronic administration of dietary omega-3 polyunsaturated fatty acids in dogs with renal insufficiency. J Lab Clin Med 1998; 131(5): 447-455.
- Bauer JE & al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.



RENAL SPECIAL



RENAL

SELECT

RSE 12



Available in 2kg
and 10kg bag



RENAL DISEASE



Formula designed to support renal function in case of chronic kidney disease. Contains EPA/DHA, antioxidant complex and low phosphorus



Inadequate kidney workload may induce uremic crisis and renal proteinuria. High quality and adapted protein content helps reduce renal workload



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents



Designed aromatic profile helps answer to dog's specific preference

ROYAL CANIN®

RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, maize flour, animal fats, maize, dehydrated poultry protein, hydrolysed animal proteins, beet pulp, fish oil, minerals, wheat gluten*, vegetable fibres, soya oil, fructo-oligo-saccharides, psyllium husks and seeds, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15700 IU, Vitamin D3: 1000 IU, E1 (Iron): 46mg, E2 (Iodine): 4,6 mg, E4 (Copper): 14mg, E5 (Manganese): 59 mg, E6 (Zinc): 178mg.

Technological additives: Clinoptilolite of sedimentary origin: 5 g

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	_____	12.5g
Fat content	_____	18g
Carbohydrate	_____	47.4g
NFE	_____	53.1g
Dietary fibre	_____	8g
Crude fibre	_____	2.3g
Omega 6	_____	3.97g
Omega 3	_____	1.1g
EPA+DHA	_____	0.47g
Calcium	_____	0.58g
Phosphorus	_____	0.29g
Sodium	_____	0.35g
Potassium	_____	0.60g
Vitamin D3	_____	100IU
Metabolisable energy*	_____	396.4kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	53	5/8	47	4/8	40	4/8
	4kg	89	1	78	7/8	68	6/8
	6kg	121	1 3/8	106	1 1/8	92	1
	8kg	150	1 5/8	132	1 4/8	114	1 2/8
	10kg	177	2	156	1 6/8	135	1 4/8
	15kg	240	2 5/8	211	2 3/8	183	2
	20kg	299	3 2/8	262	2 7/8	227	2 4/8
	25kg	352	3 7/8	310	3 3/8	268	3
	30kg	404	4 3/8	356	3 7/8	307	3 3/8
	35kg	454	5	399	4 3/8	345	3 6/8
	40kg	501	5 4/8	441	4 7/8	381	4 1/8
	50kg	593	6 4/8	522	5 6/8	451	5
	60kg	680	7 4/8	598	6 4/8	517	5 5/8
	70kg	763	8 3/8	671	7 3/8	580	6 3/8
	80kg	843	9 2/8	742	8 1/8	641	7

Provides dietary management in chronic renal disease including early stage. This diet can be maintained for the dog's lifetime. Regular veterinary checks are advised.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Finco DR & al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA & al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Brown SA & al. Beneficial effects of chronic administration of dietary omega-3 polyunsaturated fatty acids in dogs with renal insufficiency. J Lab Clin Med 1998; 131(5): 447-455.
- Bauer JE & al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.



RENAL SELECT



RENAL

RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



Designed aromatic profile helps answer to dog's specific preference

RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



Available in 410g and 200g can

COMPOSITION

Rice, pork meats, chicken meats, sunflower oil, corn flour, minerals (including Calcium carbonate, Potassium citrate, zeolite), cellulose, fish oil, cassia gum, sugar beet pulp, carrageenan, taurine, fructo-oligosaccharides (FOS), marigold meal (source of Lutein), methionine, trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 250IU, E1 (Iron): 14mg, E2 (Iodine): 0,53mg, E4 (Copper): 4,2mg, E5 (Manganese): 4,3mg, E6 (Zinc): 43mg.

**NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.*

KEY VALUES	Per 100g as fed	100g dry matter
Protein	5.4g	15.9g
Fat content	9g	26.5g
Carbohydrate	16.3g	47.9g
NFE	17.1g	50.3g
Dietary fibre	2g	5.9g
Crude fibre	1.2g	3.5g
Omega 6	3.5g	10.3g
Omega 3	0.2g	0.6g
EPA+DHA	0.15g	0.4g
Calcium	0.17g	0.5g
Phosphorus	0.11g	0.3g
Sodium	0.08g	0.2g
Potassium	0.22g	0.6g
Vitamin D3	30IU	88.2IU
Metabolisable energy*	158.4kcal	465.9kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	410g	200g	grams	410g	200g	grams	410g	200g
	2kg	125	1/4	3/4	110	1/4	1/2	95	1/4	1/2
	3kg	170	1/2	3/4	149	1/4	3/4	129	1/4	3/4
	4kg	210	1/2	1	185	1/2	1	160	1/2	3/4
	5kg	249	1/2	1 1/4	219	1/2	1	189	1/2	1
	6kg	285	3/4	1 1/2	251	1/2	1 1/4	217	1/2	1
	7kg	320	3/4	1 1/2	282	3/4	1 1/4	243	1/2	1 1/4
	8kg	354	3/4	1 3/4	311	3/4	1 1/2	269	3/4	1 1/4
	9kg	387	1	2	340	3/4	1 3/4	294	3/4	1 1/2
10kg	418	1	2	368	1	1 3/4	318	3/4	1 1/2	
15kg	567	1 1/2		499	1 1/4		431	1		
20kg	704	1 3/4		619	1 1/2		535	1 1/4		
25kg	832	2		732	1 3/4		632	1 1/2		
30kg	954	2 1/4		839	2		725	1 3/4		
35kg	1071	2 1/2		942	2 1/4		814	2		
40kg	1183	3		1041	2 1/2		899	2 1/4		

Provides dietary management in chronic renal disease including early stage. This diet can be maintained for the dog's lifetime. Regular veterinary checks are advised.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Finco DR & al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA & al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Brown SA & al. Beneficial effects of chronic administration of dietary omega-3 polyunsaturated fatty acids in dogs with renal insufficiency. J Lab Clin Med 1998; 131(5): 447-455.
- Bauer JE & al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.



RENAL



RENAL

SPECIAL



Available in 410 can

RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Inadequate kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



Designed aromatic profile helps answer to dog's specific preference.



RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, chicken meats, pork meats, salmon, sunflower oil, minerals (including Calcium carbonate, Potassium citrate, zeolite), cellulose, cassia gum, sugar beet pulp, carrageenan, fish oil, taurine, fructo-oligosaccharides (FOS), marigold meal (source of Lutein), methionine, trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 210IU, E1 (Iron): 15mg, E2 (Iodine): 0,58mg, E4 (Copper): 4,6 mg, E5 (Manganese): 4,7mg, E6 (Zinc): 47mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	6g	17.1g
Fat content	9g	25.7g
Carbohydrate	16g	45.7g
NFE	16.8g	48g
Dietary fibre	2.3g	6.6g
Crude fibre	1.5g	4.3g
Omega 6	3g	8.6g
Omega 3	0.3g	0.9g
EPA+DHA	0.15g	0.4g
Calcium	0.25g	0.7g
Phosphorus	0.13g	0.4g
Sodium	0.09g	0.3g
Potassium	0.18g	0.5g
Vitamin D3	37IU	105.7IU
Metabolisable energy*	158.7kcal	453.4kcal

*Calculated according to NRC2006

ADULT DOG	RECOMMENDED DAILY INTAKE & FEEDING DURATION						
	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cans	grams	cans	grams	cans
	2kg	124	1/4	109	1/4	95	1/4
	3kg	169	1/2	148	1/4	128	1/4
	4kg	209	1/2	184	1/2	159	1/2
	5kg	247	1/2	218	1/2	188	1/2
	6kg	284	3/4	250	1/2	216	1/2
	7kg	318	3/4	280	3/4	242	1/2
	8kg	352	3/4	310	3/4	267	3/4
9kg	384	1	338	3/4	292	3/4	
10kg	416	1	366	1	316	3/4	
15kg	564	1 1/2	496	1 1/4	328	1	
20kg	700	1 3/4	616	1 1/2	532	1 1/4	
25kg	827	2	728	1 3/4	628	1 1/2	
30kg	948	2 1/4	834	2	721	1 3/4	
35kg	1064	2 1/2	937	2 1/4	809	2	
40kg	1176	2 3/4	1035	2 1/2	894	2 1/4	

Provides dietary management in chronic renal disease including early stage. This diet can be maintained for the dog's lifetime. Regular veterinary checks are advised.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Finco DR & al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA & al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Brown SA & al. Beneficial effects of chronic administration of dietary omega-3 polyunsaturated fatty acids in dogs with renal insufficiency. J Lab Clin Med 1998; 131(5): 447-455.
- Bauer JE & al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.



RENAL SPECIAL



RENAL



Available in 150 pouch

RENAL DISEASE



Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low phosphorus level.



Chronic kidney disease can lead to metabolic acidosis. Formulated with alkalinizing agents.



In the case of mixed feeding, the texture of chunks in gravy ease the blend with Royal Canin Renal dry range diets for dogs.



Helps stimulate the dog's appetite thanks to a palatable formula and the chunks in gravy texture

RECOMMENDED FOR:

- Chronic Kidney Disease (CKD)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Chicken meats, pork meats, wheat flour, corn flour, sunflower oil, minerals (including Calcium carbonate, Potassium citrate, zeolite), corn starch, sugar beet pulp, cellulose, vegetable lecithin, fish oil, corn gluten, taurine, fructo-oligosaccharides (FOS), marigold meal (source of Lutein), methionine, trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 120IU, E1 (Iron): 9mg, E2 (Iodine): 0,36mg, E4 (Copper): 2,9 mg, E5 (Manganese): 2,7mg, E6 (Zinc): 27mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	3.9g	19.5g
Fat content	6g	30g
Carbohydrate	7.65g	38.3g
NFE	8.2g	41g
Dietary fibre	1.25g	6.3g
Crude fibre	0.7g	3.5g
Omega 6	1.7g	8.5g
Omega 3	0.17g	0.9g
EPA+DHA	0.09g	0.5g
Calcium	0.15g	0.8g
Phosphorus	0.08g	0.4g
Sodium	0.12g	0.6g
Potassium	0.17g	0.9g
Vitamin D3	19IU	95IU
Metabolisable energy*	95.2kcal	476kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	210	1 1/2	185	1 1/4	160	1
	3kg	285	2	251	1 3/4	217	1 1/2
	4kg	354	2 1/4	311	2	269	1 3/4
	5kg	418	2 3/4	368	2 1/2	318	2
	6kg	479	3 1/4	422	2 3/4	364	2 1/2
	7kg	538	3 1/2	473	3 1/4	409	2 3/4
	8kg	595	4	523	3 1/2	452	3
	9kg	650	4 1/4	572	3 3/4	494	3 1/4
10kg	703	4 3/4	619	4 1/4	534	3 1/2	
15kg	953	6 1/4	838	5 1/2	724	4 3/4	
20kg	1182	8	1040	7	898	6	
25kg	1398	9 1/4	1230	8 1/4	1062	7	
30kg	1602	10 3/4	1410	9 1/2	1218	8	
35kg	1799	12	1583	10 1/2	1367	9	
40kg	1988	13 1/4	1750	11 3/4	1511	10	

Provides dietary management in chronic renal disease including early stage. This diet can be maintained for the dog's lifetime. Regular veterinary checks are advised.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Finco DR & al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA & al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Brown SA & al. Beneficial effects of chronic administration of dietary omega-3 polyunsaturated fatty acids in dogs with renal insufficiency. J Lab Clin Med 1998; 131(5): 447-455.
- Bauer JE & al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.



RENAL



RENAL DISEASE MIXED FEEDING RATION TABLE

RENAL		CAN (200G)+RENAL CANINE DRY DIET *		
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	32	26	19
3kg	1/4	51	42	33
4kg	1/2	47	36	25
5kg	1/2	63	50	38
6kg	1/2	79	64	50
7kg	1/2	93	77	61
8kg	1/2	108	90	72

RENAL		POUCH (150G) + RENAL CANINE DRY DIET *		
DOG'S WEIGHT	POUCH+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/2	34	28	21
4kg	1	51	41	30
6kg	1	83	69	54
8kg	1	112	94	76
10kg	1	139	118	97
15kg	1	203	174	145
20kg	1	260	225	189
25kg	1	315	272	230
30kg	1	366	318	269
35kg	1	416	361	307
40kg	1	464	404	343
50kg	1	555	484	413
60kg	1	642	560	479
70kg	1	725	634	542
80kg	1	806	704	603

* All dry canine diet can be considered (the metabolisable energy levels of the three diets are similar).

RENAL		CAN (410G) + RENAL CANINE DRY DIET *		
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	10	3	0
4kg	1/4	46	35	24
6kg	1/4	78	63	49
8kg	1/4	107	89	71
10kg	1/2	91	69	48
15kg	1/2	154	125	96
20kg	1/2	212	176	140
25kg	1	179	137	94
30kg	1	231	182	134
35kg	1	280	226	171
40kg	1	328	268	208
50kg	1	419	348	277
60kg	1	506	425	343
70kg	1	590	498	407
80kg	1	670	569	468

RENAL		CAN (410G) + RENAL CANINE DRY DIET *		
SPECIAL		THIN	NORMAL	OVERWEIGHT
DOG'S WEIGHT	CAN+	dry (g)	dry (g)	dry (g)
2kg	1/4	9	3	0
4kg	1/4	45	35	24
6kg	1/4	77	63	48
8kg	1/4	106	88	70
10kg	1/2	90	69	47
15kg	1/2	153	124	95
20kg	1/2	211	175	139
25kg	1	178	135	93
30kg	1	229	181	132
35kg	1	279	225	170
40kg	1	327	267	206
50kg	1	418	347	276
60kg	1	505	423	342
70kg	1	588	497	405
80kg	1	669	567	466

Monofunction diets



- URINARY S/O dry/wet (can and pouch)
- URINARY S/O SMALL DOG dry
- URINARY S/O MODERATE CALORIE dry
- URINARY U/C LOW PURINE dry



URINARY S/O

LP 18



Available in 2kg, 7,5kg
and 14kg bag



LOWER URINARY TRACT DISEASE



Urinary S/O Canine effectively dissolves struvite uroliths. An acidic urinary pH is unfavourable to the development of bacteria, which are frequently associated with struvite uroliths.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Magnesium is a component of struvite (magnesium ammonium phosphate) uroliths.



RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Bacterial cystitis: management of secondary struvite crystalluria*

* in association with appropriate antibiotic treatment

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavourable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, maize flour, animal fats, dehydrated poultry protein, maize gluten, hydrolysed animal proteins, minerals, vegetable fibres, soya oil, fish oil, Fructo-Oligo-Saccharides (FOS), marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 16200IU, Vitamin D3: 1000IU, E1 (Iron): 52mg, E2 (Iodine): 5.2mg, E4 (Copper): 10mg, E5 (Manganese): 67mg, E6 (Zinc): 202mg, E8 (Selenium): 0.08mg. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	18g	
Fat content	17g	
Carbohydrate	43.3g	
NFE	46.7g	
Dietary fibre	5.6g	
Crude fibre	2.3g	
Omega 6	3.67g	
Omega 3	0.58g	
EPA+DHA	0.2g	
Calcium	0.5g	
Phosphorus	0.5g	
Magnesium	0.05g	
Sodium	1.2g	
Chloride	2.21g	
Metabolisable energy*	387kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	54	5/8	48	4/8	41	4/8
	4kg	91	1	80	7/8	70	6/8
	6kg	124	1 3/8	109	1 2/8	94	1 1/8
	8kg	154	1 6/8	135	1 5/8	117	1 3/8
	10kg	182	2 1/8	160	1 7/8	138	1 5/8
	15kg	246	2 7/8	217	2 4/8	187	2 1/8
	20kg	306	3 4/8	269	3 1/8	232	2 5/8
	25kg	361	4 1/8	318	3 5/8	275	3 1/8
	30kg	414	4 6/8	365	4 2/8	315	3 5/8
	35kg	465	5 3/8	409	4 6/8	354	4 1/8
	40kg	514	6	453	5 2/8	391	4 4/8
	50kg	608	7	535	6 2/8	462	5 3/8
	60kg	697	8 1/8	613	7 1/8	530	6 1/8
	70kg	782	9	689	8	595	6 7/8
	80kg	865	10	761	8 6/8	657	7 5/8

5 to 12 weeks of dietary treatment are required to dissolve uroliths. If a urinary tract infection is present, Urinary S/O Canine, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained.

IN OLDER DOGS: renal function should be checked before Urinary S/O Canine is prescribed.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Allen HS & al. Associations of Diet and Breed with Recurrence of Calcium Oxalate Cystic Calculi in Dogs. Journal of the American Veterinary Medical Association 2015; 246 (10): 1098-1103.
- Sagols E. & al. A struvite RSS below 1 is predictive of in vitro struvite dissolution in dog urine. Poster presented at WSAVA 2015, Bangkok, Thailand.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Stevenson AE & al. Effect of Dietary Moisture and Sodium Content on Urine Composition and Calcium Oxalate Relative Supersaturation in Healthy Miniature Schnauzers and Labrador Retrievers. Research in Veterinary Science 2003; 74 (2) (April): 145-151.

URINARY S/O



URINARY S/O

LOWER URINARY TRACT DISEASE



Urinary S/O Canine is designed to induce struvite uroliths dissolution. An acidic urinary pH is unfavourable to the development of bacteria, which are frequently associated with struvite uroliths.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.

Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.

Low magnesium: Magnesium is a component of struvite (magnesium ammonium phosphate uroliths).

RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Bacterial cystitis: management of secondary struvite crystalluria*

* in association with appropriate antibiotic treatment

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Chicken meats, chicken liver, corn, corn gluten, sunflower oil, fish oil, cellulose, carrageenan, guar, taurine, minerals, cassia, acidifying substances (calcium sulfate, DL-methionin), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 190IU, E1 (Iron): 11mg, E2 (Iodine): 0.33mg, E4 (Copper): 2mg, E5 (Manganese): 3.5mg, E6 (Zinc): 33mg.

Technological additives: Cassia gum: 2.5g.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.



Available in 410g and 200g can

KEY VALUES	Per 100g as fed	100g dry matter
Protein	6g	21.4g
Fat content	8g	28.6g
Carbohydrate	10.2g	36.4g
NFE	11g	39.3g
Dietary fibre	2.3g	8.2g
Crude fibre	1.5g	5.4g
Omega 6	2.5g	8.9g
Omega 3	0.45g	1.6g
EPA+DHA	0.34g	1.2g
Calcium	0.24g	0.9g
Phosphorus	0.25g	0.9g
Magnesium	0.02g	0.1g
Sodium	0.15g	0.5g
Chloride	0.2g	0.7g
Metabolisable energy*	128kcal	457.1kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	420g	200g	grams	420g	200g	grams	420g	200g
	2kg	164	1/2	3/4	145	1/4	3/4	125	1/4	3/4
	3kg	223	1/2	1	196	1/2	1	169	1/2	3/4
	4kg	276	3/4	1 1/2	243	1/2	1 1/4	210	1/2	1
	5kg	327	3/4	1 3/4	287	3/4	1 1/2	248	1/2	1 1/4
	6kg	374	1	1 3/4	329	3/4	1 3/4	285	3/4	1 1/2
	7kg	420	1	2	370	1	1 3/4	319	3/4	1 1/2
	8kg	465	1 1/4	2 1/4	409	1	2	353	3/4	1 3/4
	9kg	507	1 1/4	2 1/2	447	1	2 1/4	386	1	2
	10kg	549	1 1/4	2 3/4	483	1 1/4	2 1/2	417	1	2
	15kg	744	1 3/4		655	1 1/2		566	1 1/2	
	20kg	924	2 1/4		813	2		702	1 3/4	
	25kg	1092	2 3/4		961	2 1/4		830	2	
	30kg	1252	3		1102	2 3/4		951	2 1/4	
	35kg	1405	3 1/2		1237	3		1068	2 1/2	
	40kg	1553	3 3/4		1367	3 1/4		1180	3	

5 to 12 weeks of dietary treatment are required to dissolve uroliths. If a urinary tract infection is present, Urinary S/O Canine, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Allen HS & al. Associations of Diet and Breed with Recurrence of Calcium Oxalate Cystic Calculi in Dogs. Journal of the American Veterinary Medical Association 2015; 246 (10): 1098-1103.
- Stevenson AE & al. Nutrient Intake and Urine Composition in Calcium Oxalate Stone-Forming Dogs: Comparison with Healthy Dogs and Impact of Dietary Modification. Veterinary Therapeutics: Research in Applied Veterinary Medicine 2004; 5 (3): 218-231.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Stevenson AE & al. Effect of Dietary Moisture and Sodium Content on Urine Composition and Calcium Oxalate Relative Supersaturation in Healthy Miniature Schnauzers and Labrador Retrievers. Research in Veterinary Science 2003; 74 (2) (April): 145-154.



URINARY S/O



URINARY S/O



Available in 150g pouch

LOWER URINARY TRACT DISEASE



Urinary S/O Canine effectively dissolves struvite uroliths. An acidic urinary pH is unfavourable to the development of bacteria, which are frequently associated with struvite uroliths.



The reduced calorie content of the diet makes it possible to limit weight gain in dogs with a tendency to obesity.

Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.

Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



RECOMMENDED FOR:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Bacterial cystitis: management of secondary struvite crystalluria*

* in association with appropriate antibiotic treatment

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Heart disease*
 - Concurrent use of urine-acidifying drugs
 - Growth, gestation/lactation
- * when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Chicken meat, pork meat, chicken liver, wheat flour, corn gluten, sunflower oil, cellulose, fish oil, minerals, taurine, acidifying substances (calcium sulphate, DL-methionin), trace elements (including chelated trace elements), marigold meal (source of Lutein), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 130IU, E1 (Iron): 4mg, E2 (Iodine): 0.2mg, E4 (Copper): 1.3mg, E5 (Manganese): 1.2mg, E6 (Zinc): 12mg.

Technological additives: Pentasodium triphosphate: 1.5g.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	6g	30g
Fat content	5.5g	27.5g
Carbohydrate	6.2g	31g
NFE	6.5g	32.5g
Dietary fibre	1.3g	6.5g
Crude fibre	1g	5g
Omega 6	1.8g	9g
Omega 3	0.06g	0.3g
EPA+DHA	0.05g	0.25g
Calcium	0.18g	0.9g
Phosphorus	0.18g	0.81g
Magnesium	0.025g	0.16g
Sodium	0.14g	0.7g
Chloride	0.18g	0.8g
Metabolisable energy*	91.8kcal	459kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	pouch	grams	pouch	grams	pouch
	2kg	285	2	230	1 1/2	170	1 1/4
	5kg	560	3 3/4	450	3	335	2 1/4
	10kg	930	6 1/4	740	5	555	3 3/4
	15kg	1245	8 1/4	1000	6 3/4	750	5
	20kg	1540	10 1/4	1230	8 1/4	925	6 1/4
	25kg	1810	12	1450	9 3/4	1085	7 1/4
	30kg	2070	13 3/4	1655	11	1240	8 1/4
	35kg	2315	15 1/2	1850	12 1/4	1390	9 1/4
40kg	2555	17	2040	13 1/2	1530	10 1/4	

5 to 12 weeks of dietary treatment are required to dissolve uroliths. If a urinary tract infection is present, Urinary S/O Canine, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Allen HS & al. Associations of Diet and Breed with Recurrence of Calcium Oxalate Cystic Calculi in Dogs. Journal of the American Veterinary Medical Association 2015; 246 (10): 1098-1103.
- Stevenson AE & al. Nutrient Intake and Urine Composition in Calcium Oxalate Stone-Forming Dogs: Comparison with Healthy Dogs and Impact of Dietary Modification. Veterinary Therapeutics: Research in Applied Veterinary Medicine 2004; 5 (3): 218-231.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Stevenson AE & al. Effect of Dietary Moisture and Sodium Content on Urine Composition and Calcium Oxalate Relative Supersaturation in Healthy Miniature Schnauzers and Labrador Retrievers. Research in Veterinary Science 2003; 74 (2) [April]: 145-155.



URINARY S/O



URINARY S/O^{USD 20}

SMALL DOG under 10 kg



Available in 1,5kg, 4kg
and 8kg bag



LOWER URINARY TRACT DISEASE



Urinary S/O Small Dog effectively dissolves struvite uroliths. An acidic urinary pH is unfavourable to the development of bacteria, which are frequently associated with struvite uroliths.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Small breed dogs have an increased risk of suffering from dental disease in maturity. The size and texture of Urinary S/O Small dog encourages crunching, and pentasodium triphosphate decreases the build-up of tartar for overall dental health.

ROYAL CANIN

RECOMMENDED FOR:

Adult small breed dogs (<10kg) in case of:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Bacterial cystitis: management of secondary struvite crystalluria*

* in association with appropriate antibiotic treatment

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation

* when sodium restriction is sought



This diet promotes a urinary environment unfavorable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, maize flour, dehydrated poultry protein, animal fat, maize gluten, hydrolysed animal protein, minerals, vegetable fibre, wheat gluten*, egg yolk powder, soya oil, fish oil, Fructo-Oligo-Saccharides (FOS), marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 11500IU, Vitamin D3: 1000IU, E1 (Iron): 46mg, E2 (Iodine): 3.5mg, E4 (Copper): 10mg, E5 (Manganese): 59mg, E6 (Zinc): 195mg, E8 (Selenium): 0.06mg.

Technological additives: Pentasodium triphosphate: 3g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	20g	
Fat content	17g	
Carbohydrate	40.6g	
NFE	44.1g	
Dietary fibre	5.7g	
Crude fibre	2.2g	
Omega 6	3.47g	
Omega 3	0.54g	
EPA+DHA	0.21g	
Calcium	0.7g	
Phosphorus	0.7g	
Magnesium	0.05g	
Sodium	1.2g	
Chloride	1.91g	
Metabolisable energy*	386kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	54	5/8	48	4/8	41	3/8
	3kg	74	6/8	65	5/8	56	5/8
	4kg	92	1	81	7/8	70	6/8
	5kg	108	1 1/8	95	1	82	7/8
	6kg	124	1 2/8	109	1 1/8	94	1
	7kg	139	1 4/8	123	1 2/8	106	1 1/8
	8kg	154	1 5/8	136	1 3/8	117	1 2/8
	9kg	168	1 6/8	148	1 4/8	128	1 3/8
	10kg	182	1 7/8	160	1 5/8	138	1 4/8

5 to 12 weeks of dietary treatment are required to dissolve uroliths. If a urinary tract infection is present, Urinary S/O Canine, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained.

IN OLDER DOGS: renal function should be checked before Urinary S/O Canine is prescribed.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Allen HS & al. Associations of Diet and Breed with Recurrence of Calcium Oxalate Cystic Calculi in Dogs. Journal of the American Veterinary Medical Association 2015; 246 (10): 1098-1103.
- Sagols E. & al. A struvite RSS below 1 is predictive of in vitro struvite dissolution in dog urine. Poster presented at WSAVA 2015, Bangkok, Thailand.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Stevenson AE & al. Effect of Dietary Moisture and Sodium Content on Urine Composition and Calcium Oxalate Relative Supersaturation in Healthy Miniature Schnauzers and Labrador Retrievers. Research in Veterinary Science 2003; 74 (2) (April): 145-152.

URINARY S/O SMALL DOG



URINARY S/O^{UMC 20}

MODERATE CALORIE



Available in 1,5kg, 6,5kg
and 12kg bag



LOWER URINARY TRACT DISEASE



Urinary S/O Moderate Calorie effectively dissolves struvite uroliths. An acidic urinary pH is unfavourable to the development of bacteria, which are frequently associated with struvite uroliths.



The reduced calorie content of the diet makes it possible to limit weight gain in dogs with a tendency to obesity.



Diluting urine decreases the urinary concentration of struvites and calcium oxalates. The larger urinary volume also ensures regular bladder wash-out.



Undersaturated urine is an environment where crystals cannot proliferate. Thus the urine is unfavourable to the development of struvite and calcium oxalate crystals.



RECOMMENDED FOR:

Dogs with tendency to overweight in case of:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Bacterial cystitis: management of secondary struvite crystalluria*

* in association with appropriate antibiotic treatment

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Growth, gestation/lactation

* when sodium restriction is sought



This diet promotes a urinary environment unfavourable to the development of both struvite and calcium oxalate crystals.

COMPOSITION

Rice, maize flour, dehydrated poultry protein, vegetable fibre, maize gluten, minerals, animal fats, hydrolysed animal proteins, chicory pulp, wheat gluten*, egg yolk powder, soya oil, fish oil, Fructo-Oligo-Saccharides (FOS), marigold extract [source of lutein].

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15400IU, Vitamin D3: 1400IU, E1 (Iron): 46mg, E2 (Iodine): 3.5mg, E4 (Copper): 10mg, E5 (Manganese): 59mg, E6 (Zinc): 194mg, E8 (Selenium): 0.11mg. Preservatives - Antioxidants.

*NOTE: Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	20g	
Fat content	11g	
Carbohydrate	40.1g	
NFE	46.2g	
Dietary fibre	12.2g	
Crude fibre	6.1g	
Omega 6	2.36g	
Omega 3	0.45g	
EPA+DHA	0.21g	
Calcium	0.57g	
Phosphorus	0.57g	
Magnesium	0.05g	
Sodium	1.2g	
Chloride	2.15g	
Metabolisable energy*	331kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION					
ADULT DOG	DOG'S WEIGHT	NORMAL		OVERWEIGHT	
		grams	cups	grams	cups
	2kg	48	5/8	41	4/8
	5kg	96	1 2/8	81	1
	10kg	161	2 1/8	136	1 6/8
	15kg	218	2 7/8	184	2 3/8
	20kg	271	3 4/8	228	3
	25kg	320	4 1/8	270	3 4/8
	30kg	367	4 6/8	309	4
	35kg	412	5 3/8	347	4 4/8
	40kg	456	6	384	5

5 to 12 weeks of dietary treatment are required to dissolve uroliths.

If a urinary tract infection is present, Urinary S/O Moderate Calorie, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result is obtained. Once treatment is complete, we recommend using Obesity Management or Satiety Support if the dog is overweight, or one of the diets from the **NEUTERED** dog range if the animal is at ideal weight.

IN OLDER DOGS: renal function should be checked before Urinary S/O Moderate Calorie is prescribed.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY S/O

- Allen HS & al. Associations of Diet and Breed with Recurrence of Calcium Oxalate Cystic Calculi in Dogs. Journal of the American Veterinary Medical Association 2015; 246 (10): 1098-1103.
- Sagols E. & al. A struvite RSS below 1 is predictive of in vitro struvite dissolution in dog urine. Poster presented at WSAVA 2015, Bangkok, Thailand.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Stevenson AE & al. Effect of Dietary Moisture and Sodium Content on Urine Composition and Calcium Oxalate Relative Supersaturation in Healthy Miniature Schnauzers and Labrador Retrievers. Research in Veterinary Science 2003; 74 (2) [April]: 145-153.

URINARY S/O MODERATE CALORIE



URINARY U/C

LOW PURINE



Available in 2kg, 7,5kg
and 14kg bag

Actual size

URATE AND CYSTINE UROLITHIASIS



Low purine proteins (e.g. wheat flour and egg) combined with production of alkaline urine lead to a reduced risk of urate stones.



A combination of moderate quantities of high quality proteins and restricted sodium levels contributes to reducing the formation of cystine stones.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



The synergistic antioxidant complex reduces oxidative stress and helps neutralise free radicals.



RECOMMENDED FOR:

- Metabolic uroliths (urate, xanthine, cystine): management of recurrence
- Hyperuricosuria
- Management of metabolic uroliths risk in dogs with leishmaniasis treated with xanthine oxidase inhibitors (eg allopurinol)*

* if they present with secondary kidney disease (protein losing nephropathy with or without azotemia), then switch to a Renal product

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, maize flour, wheat flour, egg yolk powder, animal fats, wheat gluten*, minerals, maize gluten, vegetable fibres, fish oil, soya oil, Fructo-Oligo-Saccharides (FOS), borage oil, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 25000IU, Vitamin D3: 800IU, E1 (Iron): 41mg, E2 (Iodine): 2.9mg, E4 (Copper): 12mg, E5 (Manganese): 55mg, E6 (Zinc): 207mg, E8 (Selenium): 0.1mg.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	18g	
Fat content	15g	
Carbohydrate	46.4g	
NFE	50g	
Dietary fibre	5.7g	
Crude fibre	2.1g	
Omega 6	2.73g	
Omega 3	0.56g	
EPA+DHA	0.3g	
Calcium	0.79g	
Phosphorus	0.59g	
Magnesium	0.07g	
Sodium	0.3g	
Chloride	0.58g	
L-carnitine	20mg	
Metabolisable energy*	383kcal	

* Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	55	5/8	48	4/8	42	4/8
	4kg	92	1	81	7/8	70	6/8
	6kg	125	1 3/8	110	1 2/8	95	1
	8kg	155	1 6/8	137	1 4/8	118	1 2/8
	10kg	183	2	161	1 6/8	139	1 4/8
	15kg	249	2 6/8	219	2 3/8	189	2 1/8
	20kg	309	3 3/8	272	3	235	2 5/8
	25kg	365	4	321	3 4/8	277	3
30kg	418	4 5/8	368	4	318	3 4/8	
35kg	470	5 1/8	413	4 4/8	357	3 7/8	
40kg	519	5 6/8	457	5	394	4 3/8	
50kg	614	6 6/8	540	5 7/8	466	5 1/8	
60kg	703	7 6/8	619	6 6/8	535	5 7/8	
70kg	790	8 5/8	695	7 5/8	600	6 5/8	
80kg	873	9 5/8	768	8 3/8	663	7 2/8	

The duration of dietary treatment is dependent on the cause of disease. For urate uroliths, dietary treatment should be prescribed for at least 6 months. In the case of irreversible uric acid metabolic disorders, lifelong feeding with this diet is possible. For cystine uroliths, Urinary U/C Low Purine can be prescribed for 1 year as a first-line treatment. Clinical re-assessment is essential before dietary treatment is extended.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN URINARY U/C

- Malandain E. & al. Quantification of end-products of purine catabolism in dogs fed diets varying in protein and purine content, ACVIM Forum, San Antonio, Texas, USA, June 4-7 2008, 803-804.
- Westropp JL & al. Evaluation of Urate urolithiasis Recurrence and Urinary uric acid and Allantoin Excretion in dogs consuming Royal Canin Veterinary diet Urinary U/C. Poster presented at the European Congress of veterinary Internal Medicine 2012, Maastricht, Netherlands.
- Mireaux M. & al. Canine Leishmaniasis and xanthine uroliths : interest of a reduced purine diet, preliminary study on 13 dogs. Proc. of the 16th ESVCN congress, September 2012, Bydgoszcz, Poland. p70.



URINARY U/C



LOWER URINARY TRACT DISEASE MIXED FEEDING RATION TABLE

URINARY S/O		CAN (200G)+DRY (URINARY S/O)		
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		dry [g]	dry [g]	dry [g]
2kg	1/4	38	31	25
3kg	1/2	41	32	23
4kg	1/2	58	47	36
5kg	1/2	75	62	49
6kg	1/2	91	76	61
7kg	1	73	56	40
8kg	1	88	69	51

URINARY S/O		CAN (410G)+DRY (URINARY S/O)		
DOG'S WEIGHT	POUCH+	THIN	NORMAL	OVERWEIGHT
		dry [g]	dry [g]	dry [g]
2kg	1/4	20	14	7
4kg	1/4	58	47	36
6kg	1/4	90	75	60
8kg	1/2	86	67	49
10kg	1/2	114	92	70
15kg	1/2	179	149	119
20kg	1	170	133	97
25kg	1	226	182	139
30kg	1	279	229	179
35kg	1	330	274	218
40kg	1	379	317	255
50kg	1	472	399	326
60kg	1	561	478	394
70kg	1	647	553	459
80kg	1	729	625	522

URINARY S/O		POUCH (150G)+DRY (URINARY S/O)		
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		dry [g]	dry [g]	dry [g]
2kg	1/2	43	35	27
4kg	1	65	52	40
6kg	1	103	86	68
8kg	1	138	116	95
10kg	1	171	145	120
15kg	1	246	211	177
20kg	1	315	272	230
25kg	1	380	330	279
30kg	1	442	384	326
35kg	1	501	436	371
40kg	1	558	486	414
50kg	1	668	583	497
60kg	1	772	674	576
70kg	1	871	762	652
80kg	1	967	846	725

URINARY S/O		URINARY CAN (200G)+ URINARY MOD. CALORIE DRY			URINARY S/O SMALL DOG under 10 kg
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT	
		dry (g)	dry (g)	dry (g)	
2kg	1/4	38	31	25	
4kg	1/4	75	64	53	
6kg	1/4	108	93	78	
8kg	1/2	121	102	84	
10kg	1/2	149	127	105	

URINARY S/O		URINARY S/O CAN (200G)+ URINARY S/O MODERATE CALORIE DR		URINARY S/O MODERATE CALORIE
TARGET BODY WEIGHT OF DOG	CAN+	NORMAL	OVERWEIGHT	
		dry (g)	dry (g)	
2kg	1/4	29	21	
4kg	1/4	62	49	
6kg	1/4	91	73	
8kg	1/4	117	96	
10kg	1/2	123	97	

URINARY S/O		URINARY S/O CAN (410G)+ URINARY S/O SMALL DOG DRY		
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	20	14	7
4kg	1/4	58	47	36
6kg	1/4	90	75	60
8kg	1/4	120	102	83
10kg	1/4	148	126	104

URINARY S/O		URINARY S/O CAN (410G)+ URINARY S/O MODERATE CALORIE DRY	
DOG'S WEIGHT	POUCH+	NORMAL	OVERWEIGHT
		dry (g)	dry (g)
2kg	1/4	9	1
4kg	1/4	41	29
6kg	1/4	70	53
8kg	1/4	97	75
10kg	1/4	122	96
15kg	1/4	179	144
20kg	1/4	232	189
25kg	1/2	241	191
30kg	1/2	288	230
35kg	1/2	333	268
40kg	1/2	377	305
50kg	1/2	460	375
60kg	1	460	362
70kg	1	535	426
80kg	1	608	487



Monofunction diets



 CARDIAC dry/wet



CARDIAC

EC 26



HEART FAILURE



Polyphenols contribute to vasodilatation and help neutralise free radicals.



The Cardiac diet has a moderate phosphorus content taking into account the associated risk of chronic renal failure.



Sodium restriction reduces workload on the heart. Potassium and magnesium levels are adapted to optimum clinical levels.



Taurine and L-carnitine are essential for myocyte function and they also enhance heart contractility.

RECOMMENDED FOR:

- Symptoms of heart disease
- Hypertension

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, dehydrated poultry protein, maize flour, animal fats, maize gluten, egg yolk powder, hydrolysed animal proteins, beet pulp, fish oil, vegetable fibres, minerals, soya oil, yeasts, Fructo-Oligo-Saccharides (FOS), green tea extracts (source of polyphenols), marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15100IU, Vitamin D3: 800IU, E1 (Iron): 37mg, E2 (Iodine): 2.8mg, E4 (Copper): 7mg, E5 (Manganese): 47mg, E6 (Zinc): 156mg, E8 (Selenium): 0.06mg. Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	26g	
Fat content	20g	
Carbohydrate	33.9g	
NFE	37.8g	
Dietary fibre	5.5g	
Crude fibre	1.6g	
Omega 6	3.75g	
Omega 3	0.78g	
EPA+DHA	0.38g	
Calcium	0.83g	
Phosphorus	0.55g	
Magnesium	0.15g	
Sodium	0.13g	
Potassium	0.8g	
L-carnitine	83mg	
Polyphenols	125mg	
Metabolisable energy*	414.3kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	51	4/8	45	4/8	39	3/8
	4kg	85	7/8	75	6/8	65	5/8
	6kg	116	1 1/8	102	1 1/8	88	7/8
	8kg	144	1 4/8	126	1 3/8	109	1 1/8
	10kg	170	1 6/8	149	1 4/8	129	1 3/8
	15kg	230	2 3/8	202	2 1/8	175	1 7/8
	20kg	285	3	251	2 5/8	217	2 2/8
	25kg	337	3 4/8	297	3 1/8	256	2 5/8
	30kg	387	4	340	3 4/8	294	3 1/8
	35kg	434	4 4/8	382	4	330	3 4/8
	40kg	480	5	422	4 3/8	365	3 6/8
	50kg	567	5 7/8	499	5 2/8	431	4 4/8
	60kg	650	6 6/8	572	6	494	5 1/8
	70kg	730	7 5/8	643	6 6/8	555	5 6/8
	80kg	807	8 3/8	710	7 3/8	613	6 3/8

The diet should be started from the onset of signs of cardiac disease. Nutritional management will then be continued for the pet's lifetime. It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Freeman LM & al. Effect of dietary modifications in dogs with chronic valvular disease. J Vet Intern Med 2006; 20: 1116-1126.



CARDIAC



CARDIAC

HEART FAILURE



Taurine and L-carnitine are essential for myocyte function and they also enhance heart contractility.



Low sodium diets reduce the retention of water and sodium which are associated with cardiac disease. This significant restriction enables the veterinarian to choose a reasoned sodium supplement when required.

Polyphenols contribute to vasodilatation and help neutralise free radicals.

Sodium restriction reduces workload on the heart. Potassium and magnesium levels are adapted to optimum clinical levels.

RECOMMENDED FOR:

- Symptoms of heart disease
- Hypertension

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation



Available in 410g and 200g can

COMPOSITION

Pork and poultry meats, pork and poultry livers, rice, fish oil, cellulose, tomato powder, carrageenan, cassia, taurine, L-carnitine, green tea extract (source of polyphenols), trace elements (including chelated elements), marigold meal (source of lutein), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 225IU, E1 (Iron): 12mg, E2 (Iodine): 0.5mg, E4 (Copper): 3.5mg, E5 (Manganese): 3.7mg, E6 (Zinc): 37mg.

Technological additives: Cassia gum: 3.3g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8.1g	30.6g
Fat content	7.1g	26.8g
Carbohydrate	8.4g	31.7g
NFE	9g	34g
Dietary fibre	1.6g	6g
Crude fibre	1g	3.8g
Omega 6	0.8g	3g
Omega 3	0.45g	1.7g
EPA+DHA	0.30g	1.1g
Calcium	0.24g	0.9g
Phosphorus	0.19g	0.7g
Magnesium	0.04g	0.2g
Sodium	0.05g	0.2g
Potassium	0.23g	0.9g
L-carnitine	24g	90.6mg
Polyphenols	37mg	139.6mg
Metabolisable energy*	124kcal	467.9kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION										
ADULT DOG	DOG'S WEIGHT	THIN			NORMAL			OVERWEIGHT		
		grams	410g	200g	grams	410g	200g	grams	410g	200g
	2kg	170	1/2	3/4	150	1/4	3/4	129	1/4	3/4
	3kg	231	1/2	1 1/4	203	1/2	1	175	1/2	1
	4kg	286	3/4	1 1/2	252	1/2	1 1/4	217	1/2	1
	5kg	338	3/4	1 3/4	298	3/4	1 1/2	257	1/2	1 1/4
	6kg	388	1	2	341	3/4	1 3/4	295	3/4	1 1/2
	7kg	435	1	2 1/4	383	1	2	331	3/4	1 3/4
	8kg	481	1 1/4	2 1/2	423	1	2	366	3/4	1 3/4
	9kg	526	1 1/4	2 3/4	462	1	2 1/4	399	1	2
10kg	569	1 1/4	2 3/4	500	1 1/4	2 1/2	432	1	2 1/4	
15kg	771	1 3/4		678	1 1/2		586	1 1/2		
20kg	956	2 1/4		842	2		727	1 3/4		
25kg	1131	2 3/4		995	2 1/4		859	2		
30kg	1296	3		1141	2 3/4		985	2 1/4		
35kg	1455	3 1/2		1281	3		1106	2 3/4		
40kg	1609	3 3/4		1416	3 1/4		1223	3		

The diet should be started from the onset of signs of cardiac disease. Nutritional management will then be continued for the pet's lifetime. It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Freeman LM & al. Effect of dietary modifications in dogs with chronic valvular disease. J Vet Intern Med 2006; 20: 1116-1127.



CARDIAC





HEART FAILURE MIXED FEEDING RATION TABLE



CARDIAC		CAN (200G)+DRY (CARDIAC)		
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	36	30	24
3kg	1/2	39	31	22
4kg	1/2	56	45	35
5kg	1/2	71	59	47
6kg	1/2	86	72	58
7kg	1	70	55	39
8kg	1	84	67	49

CARDIAC		CAN (410G)+DRY (CARDIAC)		
DOG'S WEIGHT	CAN+	THIN	NORMAL	OVERWEIGHT
		dry (g)	dry (g)	dry (g)
2kg	1/4	20	14	8
4kg	1/4	55	45	34
6kg	1/4	85	71	57
8kg	1/2	82	65	48
10kg	1/2	109	88	68
15kg	1/2	169	141	114
20kg	1	163	129	95
25kg	1	215	175	134
30kg	1	264	218	172
35kg	1	312	260	208
40kg	1	358	300	242
50kg	1	445	377	309
60kg	1	528	450	372
70kg	1	608	520	433
80kg	1	685	588	491



Monofunction diets



■ MOBILITY C2P+ dry/wet



MOBILITY C2P+

MC 25



Available in 2kg, 7kg
and 14kg bag

MOBILITY



Contains C2P+™ joint complex: an innovative synergistic combination of turmeric extract, hydrolysed collagen, and green tea polyphenols, known to support joints.



Contributes to the improvement of dogs' mobility and quality of life.



Thanks to a spontaneous food intake, it contributes to ease daily management of dogs' mobility.



Moderate calorie content to help support joints stressed by excess weight and maintain ideal weight.



RECOMMENDED FOR:

- Help maintain mobility
- Help support the joints after an orthopedic surgery or a traumatism

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Maize flour, dehydrated poultry protein, maize, rice, animal fats, vegetable fibres, hydrolysed animal proteins, wheat, maize gluten, fish oil, beet pulp, wheat gluten*, hydrolysed collagen (1,5%), minerals, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected for its very high digestibility.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 15500IU, Vitamin D3: 1000IU, E1 (Iron): 40mg, E2 (Iodine): 4mg, E4 (Copper): 12mg, E5 (Manganese): 51mg, E6 (Zinc): 154mg, E8 (Selenium): 0.1mg.

Technological additives: Clinoptilolite of sedimentary origin: 10g.

Sensory additives: Green tea extract (source of polyphenols): 3.1g, turmeric extract (Curcuma Longa L): 1.6g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed
Protein	25g
Fat content	12g
Carbohydrate	38.2g
NFE	43.8g
Dietary fibre	9.5g
Crude fibre	3.9g
Omega 6	1.9g
Omega 3	1.03g
EPA+DHA	0.6g
Calcium	0.8g
Phosphorus	0.5g
Turmeric extract (source of curcumin)	0.16g
Hydrolysed collagen	1.5g
Green tea polyphenols	78mg
Metabolisable energy*	3574kcal

*Calculated according to NRC2006

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	52	4/8	45	4/8	38	3/8
	4kg	87	7/8	75	6/8	63	5/8
	6kg	118	1 2/8	102	1 1/8	86	7/8
	8kg	146	1 4/8	126	1 3/8	106	1 1/8
	10kg	173	1 7/8	149	1 5/8	126	1 3/8
	15kg	235	2 4/8	203	2 1/8	171	1 7/8
	20kg	291	3 1/8	251	2 5/8	212	2 2/8
	25kg	344	3 5/8	297	3 1/8	250	2 5/8
	30kg	395	4 2/8	341	3 5/8	287	3 1/8
	35kg	443	4 6/8	382	4 1/8	322	3 4/8
	40kg	490	5 2/8	423	4 4/8	356	3 6/8
	50kg	579	6 1/8	500	5 3/8	421	4 4/8
	60kg	664	7 1/8	573	6 1/8	483	5 1/8
	70kg	745	8	643	6 7/8	542	5 6/8
	80kg	823	8 6/8	711	7 5/8	599	6 3/8

Maximum benefits are expected after 6 to 8 weeks feeding.

Benefits can be seen as soon as 2 weeks.*

Nutritional management can then be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

*Source: Multicentric study in veterinary clinics in Spain, UK, France, Netherlands, in 42 days N=50 dogs. Royal Canin 2015.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN C2P+ COCKTAIL

- Comblain F. & al. Curcuminoids Extract, Hydrolyzed Collagen and Green Tea Extract Synergically Inhibit Inflammatory and Catabolic Mediator's Synthesis by Normal Bovine and Osteoarthritic Human Chondrocytes in Monolayer. PlosOne 2015. DOI: 10.1371/journal.pone.0121654.



MOBILITY C2P+



MOBILITY C2P+



Available in 400g can

MOBILITY



Contains C2P+™ joint complex: an innovative synergistic combination of turmeric extract, hydrolysed collagen, and green tea polyphenols, known to support joints.



Contributes to the improvement of dogs' mobility and quality of life.

Thanks to a **spontaneous food intake**, it contributes to ease daily management of dogs' mobility.

Moderate calorie content to help support joints stressed by excess weight and maintain ideal weight.



RECOMMENDED FOR:

- Help maintain mobility
- Help support the joints after an orthopedic surgery or a traumatism

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Pork by-products, chicken by-products, maize flour, fish oil, vital wheat gluten, sunflower oil refined, powdercellulose, gelling agents, hydrolysed pork gelatin, calcium sulphate anhydrous, pork blood products, taurine, sodium triphosphate, potassium chloride, calcium carbonate, turmeric extract (Curcuma longa L.), dried beet pulp, tea extract (source of polyphenols), marigold extract (source of lutein), DL-methionine, trace elements (including chelated trace elements), vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 200IU, E1 (Iron): 7mg, E2 (Iodine): 0.27mg, E4 (Copper): 2.1mg, E5 (Manganese): 2.2mg, E6 (Zinc): 22mg.

Sensory additives: turmeric (curcuma longa L.) extract: 580mg, green tea extract (source of polyphenols: 228mg): 290mg.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	8g	36.4g
Fat content	5.7g	25.9g
Carbohydrate	5.24g	23.8g
NFE	6g	27.3g
Dietary fibre	1.76g	8g
Crude fibre	1g	4.5g
Omega 6	1.34g	6.1g
Omega 3	0.73g	3.3g
EPA+DHA	0.5g	2.3g
Calcium	0.18g	0.8g
Phosphorus	0.16g	0.73g
Turmeric extract (source of curcumin)	58mg	264mg
Hydrolysed collagen	0.45g	2g
Green tea polyphenols	22.8mg	103.6mg
Metabolisable energy*	100kcal	455kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	400g	grams	400g	grams	400g
	2kg	200	1/2	176	1/2	152	1/2
	3kg	271	3/4	239	1/2	206	1/2
	4kg	337	3/4	296	3/4	256	3/4
	5kg	398	1	350	1	303	3/4
	6kg	456	1 1/4	402	1	347	3/4
	7kg	512	1 1/4	451	1 1/4	389	1
	8kg	566	1 1/2	498	1 1/4	430	1
	9kg	619	1 1/2	544	1 1/4	470	1 1/4
	10kg	669	1 3/4	589	1 1/2	509	1 1/4
	15kg	907	2 1/4	798	2	690	1 3/4
	20kg	1126	2 3/4	991	2 1/2	856	2 1/4
	25kg	1331	3 1/4	1171	3	1012	2 1/2
	30kg	1526	3 3/4	1343	3 1/4	1160	3
	35kg	1713	4 1/4	1507	3 3/4	1302	3 1/4
	40kg	1894	4 3/4	1666	4 1/4	1439	3 1/2

Maximum benefits are expected after 6 to 8 weeks feeding.
Nutritional management can then be continued for the pet's lifetime.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN C2P+ COCKTAIL

- Comblain F. & al. Curcuminoids Extract, Hydrolyzed Collagen and Green Tea Extract Synergically Inhibit Inflammatory and Catabolic Mediator's Synthesis by Normal Bovine and Osteoarthritic Human Chondrocytes in Monolayer. PlosOne 2015. DOI: 10.1371/journal.pone.0121654.



MOBILITY C2P+





Monofunction diets



 CALM dry



CALM

CD 25



Available in 2kg and 4kg bag



PERIODS OF ADAPTATION



Trypsin hydrolysate of a milk protein (α -S1 casein), containing an active peptide with properties: α -casozepine. L-tryptophan is a precursor of serotonin, which is a neurotransmitter that plays an essential role in the regulation of anxiety, sleep and appetite.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Contains a combination of highly digestible proteins (L.I.P.* proteins), prebiotics, beet pulp, rice and fish oil to ensure maximum digestive security.



Small breed dogs have an increased risk of suffering from dental disease in maturity. The size and texture of Calm encourages crunching, and pentasodium triphosphate decreases the build-up of tartar for overall dental health.



RECOMMENDED FOR:

Dogs under 15kg for:

- Management of stressful situations
- Management of associated digestive and dermatologic signs

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, dehydrated poultry protein, maize, wheat flour, animal fats, hydrolysed animal proteins, chicory pulp, dehydrated pork protein*, wheat gluten*, minerals, soya oil, fish oil, Fructo-oligo-saccharides (FOS), hydrolysed milk protein**, borage oil, marigold extract (source of lutein).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation.

**Per kg: hydrolysed milk protein: 1.24g, Tryptophan: 2.8g

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 25000IU, Vitamin D3: 800IU, E1 (Iron): 41mg, E2 (Iodine): 2.8mg, E4 (Copper): 11mg, E5 (Manganese): 54mg, E6 (Zinc): 204mg, E8 (Selenium): 0.1mg, Tryptophan: 2.5g.

Technological additives: Pentasodium triphosphate: 3.5g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	25g	
Fat content	16g	
Carbohydrate	35.9g	
NFE	40.7g	
Dietary fibre	6.4g	
Crude fibre	1.6g	
Omega 6	3.56g	
Omega 3	0.68g	
EPA+DHA	0.3g	
Calcium	0.92g	
Phosphorus	0.66g	
Sodium	0.9g	
L-Tryptophan	0.28g	
Metabolisable energy*	387.5kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	54	5/8	48	4/8	41	3/8
	3kg	74	6/8	65	5/8	56	5/8
	4kg	91	1	80	7/8	69	6/8
	5kg	108	1 1/8	95	1	82	7/8
	6kg	124	1 2/8	109	1 1/8	94	1
	7kg	139	1 4/8	122	1 2/8	106	1 1/8
	8kg	153	1 5/8	135	1 3/8	117	1 2/8
	9kg	168	1 6/8	148	1 4/8	127	1 3/8
	10kg	181	1 7/8	160	1 5/8	138	1 4/8
	11kg	195	2	171	1 6/8	148	1 4/8
	12kg	208	2 1/8	183	1 7/8	158	1 5/8
	13kg	221	2 2/8	194	2	168	1 6/8
	14kg	233	2 3/8	205	2 1/8	177	1 7/8
	15kg	246	2 5/8	216	2 2/8	187	2

CALM should initially be used for a course of 2 to 3 months. Its total safety however enables it to be used for the animal's entire life if need be. It is recommended to feed CALM starting 10 days to 4 weeks before any foreseeable difficult event (going on holiday, moving house, arrival of a baby, home renovation, etc.) depending on the type of event.

It is recommended to divide the daily intake into 2 meals.

CLINICAL TRIALS OR STUDIES CARRIED OUT WITH ROYAL CANIN CALM

- Kato M & al. Effects of prescription diet on dealing with stressful situations and performance of anxiety-related behaviors in privately owned anxious Dogs. Journal of veterinary Behavior 2012; 7, 21-26.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Beata C & al. Effects of alpha-casozepine (zylkene) vs selegiline hydrochloride (Selgine, Anipryl) on anxiety disorders in dogs. J Vet Beh. 2007; 2:175-183.
- Palestini C. & al. Efficacy of a diet containing caseinate hydrolysate on signs of stress in dogs. J Vet Beh 2010; 5:309-317.



CALM





Monofunction diets



- DENTAL dry
- DENTAL SMALL DOG dry



DENTAL

DLK 22

ORAL HYGIENE



Available in 6kg
and 14kg bag



Actual size



The kibble's shape, texture and size help produce a mechanical brushing effect on teeth.



Nutrient that traps the calcium in saliva so reducing tartar deposits.



Balanced protein and mineral formula with inclusion of omega fatty acids particularly EPA & DHA to protect and nourish the bones and joints of mature dogs.



Combination of highly digestible proteins (L.I.P.* proteins), prebiotics, sugar beet pulp, rice and fish oil to ensure maximum digestive security.

RECOMMENDED FOR:

- Daily oral hygiene
- Dental plaque and tartar (to limit their development)
- Associated halitosis

NOT RECOMMENDED IN CASE OF:

- Growth, gestation/lactation

COMPOSITION

Rice, maize flour, dehydrated poultry protein, animal fats, wheat gluten*, hydrolysed animal proteins, beet pulp, vegetable fibres, fish oil, minerals, yeasts, soya oil, Fructo-Oligo-Saccharides (FOS), green tea extracts (source of polyphenols), hydrolysed crustaceans (source of glucosamine), marigold extract (source of lutein), hydrolysed cartilage (source of chondroitin).

*L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation

ADDITIVES [KG]*

Nutritional additives: Vitamin A: 17400IU, Vitamin D3: 1100IU, E1 (Iron): 53mg, E2 (Iodine): 5.3mg, E4 (Copper): 10mg, E5 (Manganese): 69mg, E6 (Zinc): 208mg, E8 (Selenium): 0.09mg.
Technological additives: Pentasodium triphosphate: 3.5g.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	22g	
Fat content	16g	
Carbohydrate	39.5g	
NFE	45.3g	
Dietary fibre	9.3g	
Crude fibre	3.5g	
Omega 6	2.84g	
Omega 3	0.77g	
EPA+DHA	0.4g	
Calcium	0.8g	
Phosphorus	0.6g	
Sodium	0.4g	
Zinc	24mg	
Green tea polyphenols	70mg	
Chondroitin+glucosamine	100mg	
Metabolisable energy*	385.2kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	10kg	182	2 2/8	161	2	139	1 6/8
	12kg	209	2 4/8	184	2 2/8	159	2
	14kg	235	2 7/8	207	2 4/8	178	2 1/8
	16kg	260	3 1/8	228	2 6/8	197	2 3/8
	18kg	284	3 4/8	250	3 1/8	216	2 5/8
	20kg	307	3 6/8	270	3 2/8	233	2 7/8
	25kg	363	4 4/8	319	3 7/8	276	3 3/8
	30kg	416	5 1/8	366	4 4/8	316	3 7/8
	35kg	467	5 6/8	411	5	355	4 3/8
	40kg	516	6 3/8	454	5 5/8	392	4 6/8
	45kg	564	6 7/8	496	6 1/8	428	5 2/8
	50kg	610	7 4/8	537	6 5/8	464	5 5/8
	60kg	700	8 5/8	616	7 4/8	532	6 4/8
	70kg	785	9 5/8	691	8 4/8	597	7 3/8
	80kg	868	10 5/8	764	9 3/8	660	8 1/8

This diet is recommended for dogs over 10kg prone to developing tartar or after teeth have been scaled. This diet can be fed throughout the dog's life.

For optimum results, it is recommended to divide the daily intake into 2 or 3 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Hennes P. & al. Effect of kibble size and polyphosphates in preventing calculus accumulation in dogs. Proc. 14th European Congress of Veterinary Dentistry. Ljubljana, Slovenia. 22-25 sept, 2005, 15-16.



DENTAL



DENTAL SPECIAL

SMALL DOG under 10 kg



Available in 2kg
and 3,5kg bag

ORAL HYGIENE



The kibble's shape, texture and size help produce a mechanical brushing effect on teeth.



Nutrient that traps the calcium in saliva so reducing tartar deposits.



Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.



Urine dilution makes the urine less liable to form struvite and calcium oxalate stones.



RECOMMENDED FOR:

Small breed dogs (<10kg) for:

- Daily oral hygiene
- Dental plaque and tartar (to limit their development)
- Associated halitosis

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
 - Cardiac disease*
 - Growth, gestation/lactation
- * when sodium restriction is sought

COMPOSITION

Rice, maize, dehydrated poultry protein, animal fats, maize gluten, wheat gluten*, vegetable fibres, beet pulp, hydrolysed animal proteins, minerals, fish oil, soya oil, Fructo-Oligo-Saccharides (FOS), green tea extracts (source of polyphenols), marigold extract (source of lutein).

**L.I.P. (Low Indigestible Protein): protein selected because of its very high assimilation*

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 27300IU, Vitamin D3: 1000IU, E1 (Iron): 41mg, E2 (Iodine): 2.8mg, E4 (Copper): 9mg, E5 (Manganese): 54mg, E6 (Zinc): 203mg, E8 (Selenium): 0.1mg.
Technological additives: Pentasodium triphosphate: 3g.
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	25g	
Fat content	16g	
Carbohydrate	32.9g	
NFE	39.6g	
Dietary fibre	11.2g	
Crude fibre	4.5g	
Omega 6	3.17g	
Omega 3	0.68g	
EPA+DHA	0.3g	
Calcium	0.7g	
Phosphorus	0.6g	
Sodium	0.7g	
Zinc	23.4mg	
Green tea polyphenols	70mg	
Metabolisable energy*	372.3kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	56	5/8	50	4/8	43	4/8
	3kg	77	7/8	67	6/8	58	5/8
	4kg	95	1	84	7/8	72	6/8
	5kg	112	1 2/8	99	1 1/8	85	7/8
	6kg	129	1 3/8	113	1 2/8	98	1 1/8
	7kg	144	1 5/8	127	1 3/8	110	1 2/8
	8kg	160	1 6/8	141	1 4/8	121	1 3/8
	9kg	174	1 7/8	154	1 6/8	133	1 4/8
	10kg	189	2 1/8	166	1 7/8	143	1 5/8

This diet is recommended for dogs over 10kg prone to developing tartar or after teeth have been scaled. This diet can be fed throughout the dog's life.

For optimum results, it is recommended to divide the daily intake into 2 or 3 meals.

CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Hennes P. & al. Effect of kibble size and polyphosphates in preventing calculus accumulation in dogs. Proc. 14th European Congress of Veterinary Dentistry. Ljubljana, Slovenia. 22-25 sept, 2005, 15-16.



DENTAL SPECIAL





Monofunction diets



■ CONVALESCENCE SUPPORT instant

■ RECOVERY wet

■ REHYDRATION instant

■ RECOVERY liquid

■ RENAL liquid

■ GI LOW FAT liquid

■ GI HIGH ENERGY liquid



CONVALESCENCE SUPPORT



Available in box: 10x50g

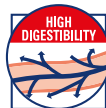
CONVALESCENCE



Convalescence Instant Diet has a high energy concentration. Easily diluted with water, it becomes an energy dense and complete liquid diet which is highly palatable and highly digestible.



The synergistic antioxidant complex reduces oxidative stress by helping neutralise free radicals.



Highly digestible ingredients compensate for the decreased activity of intestinal enzymes, ensuring an optimal nutrient supply.



RECOMMENDED FOR:

- Convalescence
- Re-feeding after anorexia period
- Malnutrition
- Post-surgery and intensive care
- Tube feeding*

* Even with tubes with diameter < 10Fr

NOT RECOMMENDED IN CASE OF:

- Pancreatitis¹
- Hepatic encephalopathy²

⁽¹⁾ Use Gastro Intestinal low fat liquid

⁽²⁾ Use Renal liquid

COMPOSITION

Milk proteins, soya oil, barley malt, minerals, egg yolk powder, vegetable fibres, Fructo-Oligo-Saccharides (FOS), marigold extract (source of lutein), lecithin, antioxidants, vitamins.

KEY VALUES	Reconstituted (per 100mL)	Powder (per 100 g as fed)
Protein	10.5 g	42 g
Fat content	6 g	24 g
Carbohydrate	4.65 g	18.6 g
NFE	5 g	20 g
Dietary Fibre	1.1 g	4.4 g
Crude Fibre	0.75 g	3 g
Omega 6	1 g	4 g
Omega 3	0.13 g	0.5 g
Calcium	0.38 g	1.5 g
Phosphorus	0.3 g	1.2 g
Metabolizable energy*	110.4 kcal	441.4 kcal

*Calculated according to NRC 2006-CF

Until restoration is achieved, according to the veterinarian's assessment.

Dissolve the content of 1 sachet (50g powder) into 200 ml of warm water (50°C) to make 200 ml of reconstituted diet. Let it cool down and feed at body or room temperature.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL & al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL & al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-272.

RECOMMENDED DAILY INTAKE & FEEDING DURATION				
ADULT DOG	BODYWEIGHT	CONVALESCING DOGS CONFINED IN CAGE		DOG ENDING HIS CONVALESCENCE PERIOD, OR IN MAINTENANCE
		mL/day	Sachet/day	mL/day
				Sachet/day
	2 kg	105	1/2	145
	4 kg	180	1	245
	6 kg	245	1 1/4	330
	8 kg	300	1 1/2	410
	10 kg	355	1 3/4	485
	15 kg	485	2 1/2	655
	20 kg	600	3	815
	25 kg	710	3 1/2	960
	30 kg	815	4	1 105
	35 kg	910	4 1/2	1 240
	40 kg	1 010	5	1 370
	50 kg	1 190	6	1 620
	60 kg	1 365	6 3/4	1 855

2 energy levels are more and more described for hospitalised dogs:

• Level 1: Convalescing dogs confined in cage

It is advised to meet the Resting Energy Requirements (R.E.R) according to the formula: **RER (in kcal/day)= 70x(bodyweight in kg)^{0.75}**

• Level 2: Dog ending his convalescence period, or in maintenance

It is advised to meet the Maintenance Energy Requirements (M.E.R) according to the formula: **MER (in kcal/day)= 95x(bodyweight in kg)^{0.75}**

The amount of food should be reevaluated according to the clinical evolution of the pet.

In case of anorexia, a refeeding schedule is strongly recommended:

- **If anorexic for < 3 days:** plan to meet the requirements in 3 days:

Day 1: 1/3 of requirements, day 2: 2/3 of requirements, day 3: Full requirements.

- **If anorexic for > 3 days:** plan to meet the requirements in 5 days:

Day 1: 1/4 of requirements, day 2: 1/2 of requirements, day 3: 2/3 of requirements, day 4: 3/4 of requirements, day 5: Full requirements.

It is recommended to divide the daily intake into several small meals.



CONVALESCENCE SUPPORT



RECOVERY

CONVALESCENCE INTENSIVE CARE



Available in 195g can



The energy content of Recovery helps compensate the volume reduction of food intake with fussy pets.



Recovery texture makes it easier to use for periodic syringe feeding and tube feeding.

EPA / DHA, omega-3 long chain fatty acids contribute to the health of the digestive system.

The synergistic antioxidant complex (Vit E, Vit C, taurine, lutein) reduces oxidative stress and helps neutralise free radicals

RECOMMENDED FOR:

- Re-feeding after anorexia period
- Malnutrition
- Post-surgery and intensive care
- Convalescence
- Tube feeding*

* with tubes with diameter > 10Fr. If tube ≤ 10Fr, then use Recovery liquid, or Convalescence Support Instant

NOT RECOMMENDED IN CASE OF:

- Pancreatitis¹
- Hepatic encephalopathy²

⁽¹⁾ use Gastro Intestinal low fat liquid

⁽²⁾ use Renal liquid

COMPOSITION

Poultry liver, poultry and pork meat, corn starch, cellulose, calcium caseinate, fish oil, minerals, egg whites dried, sunflower oil, taurine, carrageenan, Fructo-Oligo-Saccharides (FOS), marigold meal (source of Lutein), psyllium, yeast hydrolysate (source of Mannan-Oligo-Saccharides), DL-methionine, trace elements [incl. chelated trace elements], vitamins.

ADDITIVES (KG)*

Nutritional additives: Vitamin D3: 300IU, E1 (Iron): 15mg, E2 (Iodine): 0.16mg, E4 (Copper): 1mg, E5 (Manganese): 4.5mg, E6 (Zinc): 47mg.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES	Per 100g as fed	100g dry matter
Protein	14g	50.9g
Fat content	6.2g	22.5g
Carbohydrate	2.6g	9.5g
Dietary fibre	3g	10.9g
Crude fibre	2g	7.3g
Glutamine/Glutamate	1.5g	5.4g
Arginine	0.7g	2.5g
Branched-chain aminoacids	1.47g	5.3g
Aromatic aminoacids	0.78g	2.8g
Omega 6	1.2g	4.4g
Omega 3	0.6g	2.2g
EPA+DHA	0.45g	1.6g
Zinc	6mg	21.8mg
Metabolisable energy*	116kcal	421.8kcal

*Calculated according to NRC2006

Until restoration is achieved, according to the veterinarian's assessment.

As for any other diets, respect a dietary transition when newly introducing Recovery in the pet diet.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL & al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL & al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.

RECOMMENDED DAILY INTAKE & FEEDING DURATION					
ADULT DOG	ANIMAL WEIGHT	LEVEL 1 Convalescing dog, confined in cage		LEVEL 2 Active Dog ending his convalescence period, or in maintenance	
		grams	cans	grams	cans
	2kg	100	1/2	165	3/4
	3kg	135	3/4	225	1 1/4
	4kg	165	3/4	280	1 1/2
	5kg	195	1	330	1 3/4
	6kg	225	1 1/4	375	2
	8kg	275	1 1/2	465	2 1/2
	10kg	325	1 3/4	555	2 3/4
	15kg	435	2 1/4	750	3 3/4
20kg	540	2 3/4	930	4 3/4	
25kg	635	3 1/4	1100	5 3/4	
30kg	725	3 3/4	1260	6 1/2	
40kg	890	4 1/2	1565	8	

2 energy levels are more and more described for hospitalised dogs:

• Level 1: Convalescing dogs confined in cage

It is advised to meet the Resting Energy Requirements (R.E.R) according to the formula: **RER (in kcal/day)= 70x(body weight in kg)^{0.75}**

• Level 2: Active Dog ending his convalescence period, or in maintenance

It is advised to meet the Maintenance Energy Requirements (M.E.R) according to the formula: **MER (in kcal/day)= 95x(bodyweight in kg)^{0.75}**

The amount of food should be revaluated according to the clinical evolution of the pet.

In case of anorexia, a **refeeding schedule** is strongly recommended:

- If anorexic for < 3 days: plan to meet the requirements in 3 days:

Day 1: 1/3 of requirements, day 2: 2/3 of requirements, day 3: Full requirements.

- If anorexic for > 3 days: plan to meet the requirements in 5 days:

Day 1: 1/4 of requirements, day 2: 1/2 of requirements, day 3: 2/3 of requirements, day 4: 3/4 of requirements, day 5: Full requirements.

It is recommended to divide the daily intake into several small meals.



RECOVERY



REHYDRATION SUPPORT



Available in box: 15x29g

CONVALESCENCE REHYDRATION



Rehydration Support Instant Diet formula has been designed to replace lost fluids and electrolytes in dehydrated dogs and cats. Sodium and chloride contents are approximately equivalent and compensate for losses.



RECOMMENDED FOR*:

- Moderate dehydration
- Post-surgery and intensive care
- Electrolyte losses secondary to vomiting and/or diarrhea

*in addition of daily ration of complete food

NOT RECOMMENDED IN CASE OF:

- Anuria
- Persistent vomiting

COMPOSITION

Maltodextrin, potassium chloride, sodium chloride, sodium citrate.

(Nutritional supplement)

KEY VALUES	reconstituted (per 100g)	per sachet of 50g
Protein	0.3g	1.45g
Fat content	0g	0g
NFE	4.7g	25g
Sodium	0.06g	0.3g
Potassium	0.06g	0.3g
Chloride	0.14g	0.7g
Metabolisable energy*	18kcal	97kcal

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION			
ADULT DOG	ANIMAL WEIGHT	VOLUME	SACHET (29G)
		ml	approximately
	2kg	175	1/3
	4kg	300	1/2
	5kg	350	2/3
	10kg	600	1
	15kg	750	1
	20kg	900	2
	25kg	1050	2
	30kg	1200	2
	35kg	1350	3
	40kg	1500	3
	45kg	1650	3
	50kg	1800	3
	55kg	1950	4
	60kg	2100	4

According to the veterinarian's assessment.

Mix the contents of 1 sachet with 500ml water.

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Garvey MS. Fluid and electrolyte balance in critical patients. Vet Clin North Am Small Anim Pract. 1989 Nov;19(6):1021-57.



REHYDRATION SUPPORT



RECOVERY LIQUID



CONVALESCENCE INTENSIVE CARE



High protein level to help maintain muscle mass during hospitalization and convalescence.



High energy density that provides daily energy requirements in a reduced feeding volume.



Complete and balanced liquid diet to support nutritional restoration and convalescence of dogs and cats requiring assisted enteral nutrition.



The synergistic antioxidant complex (including high levels of Vit E, Vit C, taurine & lutein) helps neutralise free radicals.



Liquid formula with adapted viscosity for an easy use whatever the tube size.



RECOMMENDED FOR:

- Convalescence
- Re-feeding after anorexia period
- Malnutrition
- Post-surgery and intensive care

NOT RECOMMENDED IN CASE OF:

- Pancreatitis¹
- Hepatic encephalopathy²
- Growth, gestation and lactation

¹use Gastro Intestinal low fat liquid

²use Renal liquid

COMPOSITION

Milk and milk derivatives, cereals, oils and fats, vegetable protein extracts, minerals, derivatives of vegetable origin. Highly digestible ingredients: low-lactose milk, caseinate, soya protein concentrate, maltodextrin.

ADDITIVES [KG]*

ADDITIVES (per l) : Nutritional additives: Vitamin A: 3660 IU, Vitamin D3: 280 IU, E1 (Iron): 28.5 mg, E2 (Iodine): 0.7 mg, E4 (Copper): 2.7 mg, E5 (Manganese): 2.4 mg, E6 (Zinc): 42 mg, E8 (Selenium): 0.14 mg.

KEY VALUES Per 100ml as fed	
Protein	8.2 g
Fat content	5.2 g
Carbohydrate	5.1 g
NFE	5.1 g
Dietary fibre	0 g
Crude fibre	0 g
Omega 6	1.14 g
Omega 3	0.29 g
EPA+DHA	0.12 g
Calcium	0.2 g
Phosphorus	0.17 g
Sodium	0.1 g
Metabolisable energy (C)*	104 kcal

*NRC2006 TDF

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL et al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL et al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.
- Corbee et al. Nutritional Support of Dogs and Cats after Surgery or Illness. Open Journal of Veterinary Medicine. 2014;04(04):44-57.

DAILY FEEDING RECOMMENDATION				
ADULT DOG	CURRENT BODY WEIGHT OF DOG	LIQUID	CURRENT BODY WEIGHT OF DOG	LIQUID
		ml/day		ml/day
	2 kg	115	18 kg	590
	3 kg	155	20 kg	635
	4 kg	190	25 kg	755
	5 kg	225	30 kg	865
	6 kg	260	35 kg	970
	7 kg	290	40 kg	1070
	8 kg	320	45 kg	1170
	9 kg	350	50 kg	1265
10 kg	380	55 kg	1360	
12 kg	435	60 kg	1450	
14 kg	485	70 kg	1630	
16 kg	540	80 kg	1800	

DOGS CONFINED IN CAGE

It is advised to meet the Resting Energy Requirements (R.E.R) according to the formula: **RER (in kcal/day)= 70x(body weight in kg)^{0.75}**

The amount of food should be reevaluated according to the clinical evolution of the pet.

In case of anorexia, a refeeding schedule is strongly recommended:

- If anorexia < 3 days: plan to meet the requirements in 3 days.

Day 1: 1/3 of requirements, day 2: 2/3 of requirements,
day 3: Full requirements.

- If anorexia ≥ 3 days: plan to meet the requirements in 5 days.

Day 1: 1/4 of requirements, day 2: 1/2 of requirements,
day 3: 2/3 of requirements, day 4: 3/4 of requirements,
day 5: Full requirements.

It is recommended to divide the daily intake into several small meals.



RECOVERY



RENAL LIQUID



CONVALESCENCE INTENSIVE CARE



Formulated to support renal function in case of renal insufficiency: high quality proteins and restricted levels of phosphorus. Contains EPA + DHA and antioxidants.



Very high energy density that provides daily energy requirements in a reduced feeding volume.



Complete and balanced liquid diet to support the renal function in case of renal insufficiency, for dogs requiring assisted enteral nutrition.



The synergistic antioxidant complex (including high levels of Vit E, Vit C, taurine & lutein) helps neutralise free radicals.



Liquid formula with adapted viscosity for an easy use whatever the tube size.



RECOMMENDED FOR:

- Acute Kidney Injury (AKI)
- Chronic Kidney Disease (CKD)
- Hepatic encephalopathy

NOT RECOMMENDED IN CASE OF:

- Pancreatitis or history of pancreatitis
- Hyperlipidemia
- Growth, gestation and lactation

COMPOSITION

Milk and milk derivatives, cereals, oils and fats, minerals, derivatives of vegetable origin.
Source of protein: low-lactose milk, caseinate.

ADDITIVES (KG)*

ADDITIVES (per l) : Nutritional additives: Vitamin A: 6700 IU, Vitamin D3: 220 IU, E1 (Iron): 40 mg, E2 (Iodine): 1 mg, E4 (Copper): 4 mg, E5 (Manganese): 3 mg, E6 (Zinc): 63 mg, E8 (Selenium): 0.2 mg.

KEY VALUES Per 100ml as fed

Protein	5 g
Fat content	8 g
Carbohydrate	14 g
NFE	14 g
Dietary fibre	0 g
Crude fibre	0 g
Omega 6	2.4 g
Omega 3	0.63 g
EPA+DHA	0.17 g
Calcium	0.16 g
Phosphorus	0.11 g
Sodium	0.13 g
Metabolisable energy (C)*	150 kcal

*NRC2006 TDF

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL et al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL et al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.
- Finco DR et al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA et al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Bauer JE et al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.

DAILY FEEDING RECOMMENDATION

ADULT DOG	CURRENT BODY WEIGHT OF DOG	LIQUID	CURRENT BODY WEIGHT OF DOG	LIQUID
		ml/day		ml/day
	2 kg	80	18 kg	405
	3 kg	105	20 kg	440
	4 kg	130	25 kg	520
	5 kg	155	30 kg	595
	6 kg	180	35 kg	670
	7 kg	200	40 kg	740
	8 kg	220	45 kg	810
	9 kg	240	50 kg	875
	10 kg	260	55 kg	940
	12 kg	300	60 kg	1005
	14 kg	335	70 kg	1125
	16 kg	370	80 kg	1245

DOGS CONFINED IN CAGE

It is advised to meet the Resting Energy Requirements (R.E.R) according to the formula: $RER \text{ (in kcal/day)} = 70 \times (\text{body weight in kg})^{0.75}$

The amount of food should be reevaluated according to the clinical evolution of the pet.

In case of anorexia, a **refeeding schedule** is strongly recommended:

- If **anorexia < 3 days**: plan to meet the requirements in 3 days.

Day 1: 1/3 of requirements, day 2: 2/3 of requirements, day 3: Full requirements.

- If **anorexia ≥ 3 days**: plan to meet the requirements in 5 days.

Day 1: 1/4 of requirements, day 2: 1/2 of requirements, day 3: 2/3 of requirements, day 4: 3/4 of requirements, day 5: Full requirements.

It is recommended to divide the daily intake into several small meals.



RENAL



GI LOW FAT LIQUID



CONVALESCENCE INTENSIVE CARE



Formulated with low fat levels to help support dogs requiring fat restriction.



High energy density that provides daily energy requirements in a reduced feeding volume.



Complete and balanced liquid diet to support nutritional restoration and convalescence of dogs requiring assisted enteral nutrition.



The synergistic antioxidant complex (including high levels of Vit E, Vit C, taurine & lutein) helps neutralise free radicals.



Liquid formula with adapted viscosity for an easy use whatever the tube size.



RECOMMENDED FOR:

- Diarrhoea
- Acute and chronic pancreatitis¹
- Hyperlipidemia
- Lymphangiectasia, exsudative enteropathy
- Delayed gastric emptying
- Exocrine Pancreatic Insufficiency (EPI)
- Gastritis, oesophagitis

¹in case of associated diabetes mellitus, insulin adjustments may be required (due to quickly assimilable carbohydrates content)

NOT RECOMMENDED IN CASE OF:

- Growth, gestation and lactation

COMPOSITION

Milk and milk derivatives, cereals, oils and fats, vegetable protein extracts, minerals, derivatives of vegetable origin. Highly digestive ingredients: low-lactose milk, caseinate, soya protein concentrate, maltodextrin

ADDITIVES (KG)*

ADDITIVES (per l) : Nutritional additives: Vitamin A: 3700 IU, Vitamin D3: 224 IU, E1 (Iron): 29 mg, E2 (Iodine): 0.6 mg, E4 (Copper): 2.6 mg, E5 (Manganese): 1.7 mg, E6 (Zinc): 42 mg, E8 (Selenium): 0.1 mg.

KEY VALUES Per 100ml as fed	
Protein	9 g
Fat content	2 g
Carbohydrate	11.4 g
NFE	11.4 g
Dietary fibre	0 g
Crude fibre	0 g
Omega 6	0.4 g
Omega 3	0.12 g
EPA+DHA	0.12 g
Calcium	0.21 g
Phosphorus	0.18 g
Sodium	0.1 g
Metabolisable energy (C)*	104 kcal

*NRC2006 TDF

DAILY FEEDING RECOMMENDATION				
ADULT DOG	CURRENT BODY WEIGHT OF DOG	LIQUID	CURRENT BODY WEIGHT OF DOG	LIQUID
		ml/day		ml/day
	2 kg	115	18 kg	590
	3 kg	155	20 kg	640
	4 kg	190	25 kg	755
	5 kg	225	30 kg	865
	6 kg	260	35 kg	975
	7 kg	290	40 kg	1 075
	8 kg	320	45 kg	1 175
	9 kg	350	50 kg	1 270
	10 kg	380	55 kg	1 365
	12 kg	435	60 kg	1 460
	14 kg	490	70 kg	1 635
	16 kg	540	80 kg	1 810

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL et al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL et al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.
- Fascetti AJ & Delaney SJ 2012. Applied Veterinary Clinical Nutrition. Ed Wiley-Blackwell, Chapter 13:[221-233].
- Xenoulis PG, Suchodolski JS, Steiner JM. Effect of a low-fat diet on serum triglyceride, cholesterol and Spec cPL concentrations in Miniature Schnauzers with hypertriglyceridaemia. J Vet Intern Med 2011; 25:20-25.



GASTRO-INTESTINAL LOW FAT



GI HIGH ENERGY LIQUID



CONVALESCENCE INTENSIVE CARE



Highly digestible formula (including hydrolyzed proteins) to help support digestive health.



Very high energy density that provides daily energy requirements in a reduced feeding volume.



Complete and balanced liquid diet to support nutritional restoration and convalescence of dogs requiring assisted enteral nutrition.



The enhanced synergistic antioxidant complex (including high levels of Vit E, Vit C, taurine, lutein and beta-carotene) helps neutralise free radicals.



Liquid formula with adapted viscosity for an easy use whatever the tube size.



RECOMMENDED FOR:

- Acute and chronic diarrhoea
- Gastritis
- Colitis
- Exocrine Pancreatic Insufficiency (EPI)
- Maldigestion/ Malabsorption
- Dysorexia, re-feeding after surgery

NOT RECOMMENDED IN CASE OF:

- Pancreatitis or history of pancreatitis¹
- Hyperlipidemia¹
- Lymphangiectasia, exsudative enteropathy¹
- Growth, gestation and lactation

¹in these cases the recommended product is Gastro Intestinal low fat (liquid)

COMPOSITION

Milk and milk derivatives, cereals, oils and fats, derivatives of vegetable origin, minerals. Highly digestible ingredients: low-lactose milk, caseinate, hydrolyzed whey protein, maltodextrin.

ADDITIVES (KG)*

ADDITIVES (per l) : Nutritional additives: Vitamin A: 5000 IU, Vitamin D3: 480 IU, E1 (Iron): 40 mg, E2 (Iodine): 1 mg, E4 (Copper): 4.1 mg, E5 (Manganese): 3 mg, E6 (Zinc): 60 mg, E8 (Selenium): 0.3 mg.

KEY VALUES		Per 100ml as fed
Protein	_____	9 g
Fat content	_____	7 g
Carbohydrate	_____	9 g
NFE	_____	11.7 g
Dietary fibre	_____	2 g
Crude fibre	_____	2 g
Omega 6	_____	1.8 g
Omega 3	_____	0.52 g
EPA+DHA	_____	0.13 g
Calcium	_____	0.28 g
Phosphorus	_____	0.26 g
Sodium	_____	0.19 g
Metabolisable energy (C)*	_____	147 kcal

*NRC2006 TDF

DAILY FEEDING RECOMMENDATION				
ADULT DOG	CURRENT BODY WEIGHT OF DOG	LIQUID	CURRENT BODY WEIGHT OF DOG	LIQUID
		ml/day		ml/day
	2 kg	80	18 kg	415
	3 kg	110	20 kg	450
	4 kg	135	25 kg	530
	5 kg	160	30 kg	610
	6 kg	180	35 kg	685
	7 kg	205	40 kg	755
	8 kg	225	45 kg	825
	9 kg	245	50 kg	895
	10 kg	265	55 kg	960
	12 kg	305	60 kg	1 025
	14 kg	345	70 kg	1 150
	16 kg	380	80 kg	1 270

LITERATURE ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Chan DL et al. Nutrition in critical illness. Vet clin Small Pract 2006; 36(6):1225-41, v-vi.
- Chan DL et al. The role of nutrients in modulating disease. J Small Anim Pract 2008; 49: 266-273.
- Fascetti AJ & Delaney SJ 2012. Applied Veterinary Clinical Nutrition. Ed Wiley-Blackwell, Chapter 12:(175-219).



GASTRO-INTESTINAL HIGH ENERGY





Multifunction diets



RENAL



HYPOALLERGENIC

GFR-AFR



URINARY



SATIETY

S/O-Kcal Control



URINARY



HYPOALLERGENIC

S/O-AFR



MOBILITY C2P+



SATIETY

C2P+-Kcal Control

THERAPEUTIC DIET

Multifunction diets



-  S/O-Kcal Control dry
-  S/O-AFR dry
-  GFR-AFR dry
-  C2P+-Kcal Control dry



MULTIFUNCTION DIETS

URINARY



SATIETY



Available in 3,5kg
and 9kg bag



Actual size

MULTIFUNCTION S/O-KCAL CONTROL

Contains the full benefits of Royal Canin Urinary and Satiety Canine, including:

Urine dilution: Urine dilution makes the urine less liable to form struvite and calcium oxalate stones.

Low RSS: Helps lower the concentration of ions contributing to struvite and oxalate crystal formation.

Satiatogenic effect: Contains a special blend of fibres which have a satiating effect on dogs.

High protein: A high protein content (111 g/1000 kcal ME) helps maintain muscle mass throughout the weight loss period.



RECOMMENDED FOR:

Urinary disorders:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Bacterial cystitis: management of secondary struvite crystalluria*

** in association with appropriate antibiotic treatment*



Weight management:

- Overweight/obesity
- Diabetes mellitus or hyperlipidemia with overweight/obesity

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Condition where high fibre content is not recommended
- Growth, gestation/lactation

** when sodium restriction is sought*

COMPOSITION

Dehydrated poultry protein, cellulose powder, wheat gluten*, vegetable fibres, tapioca, wheat, hydrolysed animal proteins, chicory pulp, maize, animal fats, minerals, maize gluten, fish oil, psyllium husks and seeds, fatty acid salt, fructo-oligo-saccharides, soya oil, hydrolysed crustaceans (source of glucosamine), hydrolysed cartilage (source of chondroitin).

** L.I.P. (Low Indigestible Protein): protein selected because of its very high digestibility.*

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 19800IU, Vitamin D3: 1000IU, E1 (Iron): 40mg, E2 (Iodine): 4mg, E4 (Copper): 12mg, E5 (Manganese): 52mg, E6 (Zinc): 154mg, E8 (Selenium): 0.07mg.

Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	30g
Fat content	9.5g
Carbohydrate	16.9g
NFE	26.9g
Dietary fibre	26.7g
Crude fibre	16.7g
Omega 6	1.96g
Omega 3	0.61g
EPA+DHA	0.29g
Calcium	0.85g
Phosphorus	0.7g
Sodium	0.95g
L-Carnitine	30mg
Chondroitin sulphate + Glucosamine	100mg
Metabolisable energy*	269.9kcal

*Calculated according to NRC2006

ROYAL CANIN CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Allen HS & al. Associations of Diet and Breed with Recurrence of Calcium Oxalate Cystic Calculi in Dogs. Journal of the American Veterinary Medical Association 2015; 246 (10): 1098-1103
- Sagols E. & al. A struvite RSS below 1 is predictive of in vitro struvite dissolution in dog urine. Poster presented at WSAVA 2015, Bangkok, Thailand
- Weber M. & al. A high protein, high fiber diet designed for weight loss improves satiety in dogs. J Vet Intern Med. 2007 Nov-Dec;21(6):1203-8
- German AJ & al. A high protein high fibre diet improves weight loss in obese dogs. Vet J. 2010 Mar;183(3):294-7.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Stevenson AE & al. Effect of Dietary Moisture and Sodium Content on Urine Composition and Calcium Oxalate Relative Supersaturation in Healthy Miniature Schnauzers and Labrador Retrievers. Research in Veterinary Science 2003; 74 (2) [April]: 145-151.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	START		AFTER 4 WEEKS*		MAINTENANCE	
		grams	cups	grams	cups	grams	cups
	2kg	44	4/8	37	4/8	41	4/8
	4kg	73	7/8	63	6/8	69	7/8
	6kg	99	1 1/8	85	1	94	1 1/8
	8kg	123	1 4/8	106	1 2/8	116	1 3/8
	10kg	146	1 6/8	125	1 4/8	138	1 5/8
	12kg	167	2	143	1 6/8	158	1 7/8
	14kg	188	2 2/8	161	1 7/8	177	2 1/8
	16kg	207	2 4/8	178	2 1/8	196	2 3/8
	18kg	227	2 6/8	194	2 2/8	214	2 4/8
	20kg	245	2 7/8	210	2 4/8	231	2 6/8
	25kg	290	3 4/8	249	3	273	3 2/8
	30kg	332	4	285	3 3/8	313	3 6/8
	35kg	373	4 4/8	320	3 6/8	352	4 2/8
	40kg	413	4 7/8	354	4 2/8	389	4 5/8
	45kg	451	5 3/8	386	4 5/8	425	5
	50kg	488	5 6/8	418	5	460	5 4/8
	60kg	559	6 5/8	479	5 6/8	527	6 2/8
	70kg	628	7 4/8	538	6 3/8	592	7
	80kg	694	8 2/8	595	7 1/8	654	7 6/8
	90kg	758	9	650	7 6/8	715	8 4/8

*If the dog did not lose weight

For nutritional management of dogs at risk of struvite stone recurrence and reduction of excessive bodyweight: feed the diet up to 6 months and re-evaluate based on clinical assessment of the response. If a urinary tract infection is present S/O-Kcal Control Canine, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result has been obtained. For detailed guidance on weight reduction please see product information for Satiety Canine. Water should be available at all times.

MULTIFUNCTION S/O-KCAL CONTROL



URINARY



HYPOALLERGENIC

MULTIFUNCTION S/O-AFR



Available in 3,5kg
and 10kg bag

Contains the full benefits of Royal Canin Urinary and Hypoallergenic Canine, including:

Urine dilution: Urine dilution makes the urine less liable to form struvite and calcium oxalate stones.

Low RSS: Helps lower the concentration of ions contributing to struvite and oxalate crystal formation.

Hydrolysed protein: hydrolysed protein with low molecular weight to help ensure very low allergenic potential.

Skin barrier: Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.

RECOMMENDED FOR:

Urinary disorders:

- Struvite uroliths: dissolution and management of recurrence
- Calcium oxalate uroliths: management of recurrence
- Bacterial cystitis: management of secondary struvite crystalluria*

* in association with appropriate antibiotic treatment



Dermatological/GI conditions:

- Adverse Food Reactions (AFR)
- Canine Atopic Dermatitis (CAD)
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Chronic Kidney Disease (CKD)
- Heart disease*
- Concurrent use of urine-acidifying drugs
- Pancreatitis
- Growth, gestation/lactation

* when sodium restriction is sought

COMPOSITION

Rice, hydrolysed soya protein isolate, animal fats, minerals, chicory pulp, vegetable fibres, soya oil, fish oil, fructo-oligo-saccharides, fatty acid salt, borage oil.

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 28500IU, Vitamin D3: 800IU, E1 (Iron): 43mg, E2 (Iodine): 3.9mg, E4 (Copper): 15mg, E5 (Manganese): 57mg, E6 (Zinc): 205mg, E8 (Selenium): 0.25mg.

Technological additives: Clinoptilolite of sedimentary origin: 10g - Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	20g	
Fat content	15g	
Carbohydrate	40.4g	
NFE	44.9g	
Dietary fibre	6.9g	
Crude fibre	2.4g	
Omega 6	3.48g	
Omega 3	0.87g	
EPA+DHA	0.36g	
Calcium	0.51g	
Phosphorus	0.5g	
Sodium	1.3g	
Potassium	0.8g	
Vitamin D3	90IU	
Metabolisable energy*	371.6kcal	

*Calculated according to NRC2006

ROYAL CANIN CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Allen HS & al. Associations of Diet and Breed with Recurrence of Calcium Oxalate Cystic Calculi in Dogs. Journal of the American Veterinary Medical Association 2015; 246 (10): 1098-1103
- Sagols E. & al. A struvite RSS below 1 is predictive of in vitro struvite dissolution in dog urine. Poster presented at WSAVA 2015, Bangkok, Thailand
- Biourge V. Diagnosis of adverse reactions to food in dogs: efficacy of a soy-isolate hydrolysate-based diet. J Nutr 2004; 134: 2062S-2064S.
- Biourge V. Exocrine pancreatic insufficiency and adverse reaction to food in dogs: a positive response to a high-fat, soy isolate hydrolysate-based diet. J Nutr 2004; 134: 2166S-2168S
- Mandigers PJ & al. A randomized, open-label, positively-controlled field trial of a hydrolyzed protein diet in dogs with chronic small bowel enteropathy. J Vet Intern Med 2010; 24: 1350-7.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Stevenson AE & al. Effect of Dietary Moisture and Sodium Content on Urine Composition and Calcium Oxalate Relative Supersaturation in Healthy Miniature Schnauzers and Labrador Retrievers. Research in Veterinary Science 2003; 74 [2] (April): 145-152.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	50	5/8	43	4/8	41	4/8
	4kg	84	1	72	6/8	69	7/8
	6kg	113	1 2/8	98	1 1/8	94	1 1/8
	8kg	141	1 5/8	122	1 3/8	116	1 3/8
	10kg	166	1 7/8	144	1 5/8	138	1 5/8
	15kg	226	2 4/8	195	2 2/8	186	2 2/8
	20kg	280	3 1/8	242	2 6/8	231	2 6/8
	25kg	331	3 6/8	286	3 2/8	273	3 2/8
	30kg	379	4 2/8	328	3 6/8	313	3 6/8
	35kg	426	4 6/8	368	4 1/8	352	4 2/8
	40kg	471	5 2/8	407	4 5/8	389	4 5/8
	50kg	557	6 2/8	481	5 3/8	460	5 4/8
	60kg	638	7 1/8	551	6 2/8	527	6 2/8
	70kg	716	8 1/8	619	7	592	7
	80kg	792	8 7/8	684	7 6/8	654	7 6/8

For nutritional management of dogs with struvite urolithiasis and Adverse Food Reaction: feed the diet for 5-12 weeks and re-evaluate based on clinical assessment of the response. If a urinary tract infection is present S/O-AFR Canine, combined with an antibacterial agent, should be prescribed for at least one month after a negative urine culture result has been obtained. Water should be available at all times.



MULTIFUNCTION S/O-AFR



RENAL



HYPOALLERGENIC

MULTIFUNCTION GFR-AFR



Available in 4kg
and 10kg bag

Contains the full benefits of Royal Canin Renal and Hypoallergenic Canine, including:

CKD dietary management: Formulated to support renal function in case of chronic kidney disease. Contains EPA and DHA, a complex of antioxidants and a low level of phosphorus.

Reduce renal workload: Increased kidney workload may induce uremic crisis. An adapted content of high quality protein helps reduce kidney workload.

Hydrolysed protein: hydrolysed protein with low molecular weight to help ensure very low allergenic potential.

Skin barrier: Specially formulated complex of nutrients targeting the reduction of water loss through the skin to strengthen the barrier effect of the skin.

RECOMMENDED FOR:

Renal disease:

- Chronic Kidney Disease (CKD)



Dermatological/GI conditions:

- Adverse Food Reactions (AFR)
- Canine Atopic Dermatitis (CAD)
- Chronic diarrhea
- Inflammatory Bowel Disease (IBD)
- Exocrine Pancreatic Insufficiency (EPI)
- Small intestinal bacterial overgrowth (SIBO)

NOT RECOMMENDED IN CASE OF:

- Pancreatitis
- Growth, gestation/lactation

COMPOSITION

Rice, animal fats, hydrolysed soya protein isolate, chicory pulp fish oil, soya oil, vegetable fibres, minerals, fructo-oligo-saccharides, fatty acid salt, borage oil, marigold extract (source of lutein).

ADDITIVES (KG)*

Nutritional additives: Vitamin A: 28500IU, Vitamin D3: 800IU, E1 (Iron): 43mg, E2 (Iodine): 3.9mg, E4 (Copper): 15mg, E5 (Manganese): 56mg, E6 (Zinc): 203mg, E8 (Selenium): 0.25mg.

Technological additives: Clinoptilolite of sedimentary origin: 10g
Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES Per 100g as fed

Protein	14g
Fat content	19g
Carbohydrate	46.8g
NFE	51.1g
Dietary fibre	6.7g
Crude fibre	2.4g
Omega 6	4.21g
Omega 3	1.16g
EPA+DHA	0.5g
Calcium	0.3g
Phosphorus	0.16g
Sodium	0.35g
Potassium	0.6g
Vitamin D3	80IU
Metabolisable energy*	403kcal

*Calculated according to NRC2006

ROYAL CANIN CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Biourge V. Diagnosis of adverse reactions to food in dogs: efficacy of a soy-isolate hydrolyzate-based diet. J Nutr 2004; 134: 2062S-2064S.
- Biourge V. Exocrine pancreatic insufficiency and adverse reaction to food in dogs: a positive response to a high-fat, soy isolate hydrolyzate-based diet. J Nutr 2004; 134: 2166S-2168S.
- Mandigers PJ & al. A randomized, open-label, positively-controlled field trial of a hydrolyzed protein diet in dogs with chronic small bowel enteropathy. J Vet Intern Med 2010; 24: 1350-7.

OTHER CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Finco DR & al. Effects of dietary phosphorus and protein in dogs with chronic renal failure. Am J Vet Res 1992; 53(12): 2264-2271.
- Brown SA & al. Beneficial effects of dietary mineral restriction in dogs with marked reduction of functional renal mass. J Am Soc Nephrol 1992; 1(10): 1169-1179.
- Brown SA & al. Beneficial effects of chronic administration of dietary omega-3 polyunsaturated fatty acids in dogs with renal insufficiency. J Lab Clin Med 1998; 131(5): 447-455.
- Bauer JE & al. Effects of dietary fat and polyunsaturated fatty acids in dogs with naturally developing chronic renal failure. J Am Vet Med Assoc. 1999 Dec 1;215(11):1588-91.

RECOMMENDED DAILY INTAKE & FEEDING DURATION

ADULT DOG	DOG'S WEIGHT	THIN		NORMAL		OVERWEIGHT	
		grams	cups	grams	cups	grams	cups
	2kg	52	4/8	46	4/8	40	3/8
	4kg	88	7/8	77	6/8	67	6/8
	6kg	119	1 2/8	105	1 1/8	90	1
	8kg	148	1 4/8	130	1 3/8	112	1 1/8
	10kg	174	1 7/8	153	1 5/8	133	1 3/8
	15kg	236	2 4/8	208	2 1/8	180	1 7/8
	20kg	293	3	258	2 6/8	223	2 3/8
	25kg	336	3 4/8	296	3 1/8	256	2 5/8
	30kg	398	4 1/8	350	3 5/8	302	3 1/8
	35kg	446	4 5/8	393	4 1/8	339	3 4/8
	40kg	493	5 1/8	434	4 4/8	375	3 7/8
	50kg	583	6 1/8	513	5 3/8	443	4 5/8
	60kg	669	7	588	6 1/8	508	5 2/8
	70kg	751	7 7/8	661	6 7/8	570	6
	80kg	830	8 5/8	730	7 5/8	631	6 5/8

For nutritional management of dogs with Chronic Kidney Disease and Adverse Food Reaction: initially feed the diet for 3-8 weeks and re-evaluate based on clinical assessment of the response. When an Adverse Food Reaction is suspected, the dog's diet should be changed without any food transition. GFR-AFR Canine can be continued for the dog's lifetime. It is recommended to divide the daily intake into 2 meals. Water should be available at all times.



MULTIFUNCTION GFR-AFR





MULTIFUNCTION C2P+ -KCAL CONTROL

Contains the full benefits of Royal Canin Mobility and Satiety Canine, including:

Innovative C2P+ joint complex: Contains C2P+ (TM) joint complex: an innovative synergistic combination of turmeric extract, hydrolysed collagen, and green tea polyphenols, known to support joints.

Scientifically proven: Contributes to the improvement of dogs' mobility and quality of life.

Satietogenic effect: Contains a special blend of fibres which have a satiетogenic effect on dogs.

High protein: A high protein content (103 g/1000 kcal ME) helps maintain muscle mass throughout the weight loss period.



RECOMMENDED FOR:
Mobility management: • Helps maintain mobility in dogs. • Helps support the joints after an orthopedic surgery or a traumatism.

Weight management: • Overweight/obesity • Diabetes mellitus or hyperlipidemia with overweight/obesity
NOT RECOMMENDED IN CASE OF:
• Condition were high fibres is not recommended • Growth, gestation/lactation

COMPOSITION
Vegetable fibres, dehydrated poultry protein, wheat gluten*, tapioca, maize gluten, animal fats, wheat, hydrolysed animal proteins, maize, beet pulp, fish oil, minerals, hydrolysed collagen (1.2%), psyllium husks and seeds, fructo-oligo-saccharides, soya oil, marigold extract (source of lutein).

* L.I.P. (Low Indigestible Protein): protein selected because of its very high digestibility.

ADDITIVES (KG)*
Nutritional additives: Vitamin A: 15500IU, Vitamin D3: 1000IU, E1 (Iron): 38mg, E2 (Iodine): 3.8mg, E4 (Copper): 12mg, E5 (Manganese): 50mg, E6 (Zinc): 150mg, E8 (Selenium): 0.1mg. Sensory additives: Green tea extract (source of polyphenols): 2.4 g, turmeric extract (Curcuma Longa L.): 1.2 g - Preservatives - Antioxidants.

***NOTE:** Values reflect only levels added to the formula, not those naturally occurring in components of the diet. For total levels in the diet, refer to the Average Analysis pages.

KEY VALUES		Per 100g as fed
Protein	28g	
Fat content	12g	
Carbohydrate	17.2g	
NFE	29.1g	
Dietary fibre	28.2g	
Crude fibre	16.3g	
Omega 6	1.96g	
Omega 3	0.9g	
EPA+DHA	0.5g	
Calcium	0.79g	
Phosphorus	0.4g	
Curcumin (turmeric)	0.12g	
Hydrolysed collagen	1.2g	
Green tea polyphenols	61mg	
Metabolisable energy*	2781kcal	

*Calculated according to NRC2006

RECOMMENDED DAILY INTAKE & FEEDING DURATION							
ADULT DOG	DOG'S WEIGHT	WEIGHT LOSS FIRTS 4 WEEKS		WEIGHT LOSS		MAINTENANCE POST WEIGHT LOSS	
		grams	cups	grams	cups	grams	cups
	2kg	42	4/8	36	3/8	40	4/8
	4kg	71	7/8	61	6/8	67	6/8
	6kg	96	1 1/8	83	1	91	1 1/8
	8kg	120	1 3/8	103	1 2/8	113	1 3/8
	10kg	142	1 6/8	121	1 4/8	133	1 5/8
	12kg	162	1 7/8	139	1 5/8	153	1 7/8
	14kg	182	2 1/8	156	1 7/8	172	2
	16kg	201	2 3/8	173	2	190	2 2/8
	18kg	220	2 5/8	189	2 2/8	207	2 4/8
	20kg	238	2 7/8	204	2 3/8	224	2 5/8
	25kg	281	3 3/8	241	2 7/8	265	3 1/8
	30kg	323	3 7/8	277	3 2/8	304	3 5/8
	35kg	362	4 2/8	310	3 6/8	342	4 1/8
	40kg	400	4 6/8	343	4 1/8	377	4 4/8
	45kg	437	5 2/8	375	4 4/8	412	4 7/8
	50kg	473	5 5/8	406	4 7/8	446	5 2/8
	60kg	543	6 4/8	465	5 4/8	512	6 1/8
	70kg	609	7 2/8	522	6 2/8	574	6 7/8
	80kg	673	8	577	6 7/8	635	7 4/8
	90kg	735	8 6/8	630	7 4/8	693	8 2/8

For nutritional management of dogs at with joint sensitivity and reduction of excessive bodyweight. Maximum benefits on Mobility are expected after 6 to 8 weeks feeding.

For detailed guidance on weight reduction please see product information for Satiety Canine. Water should be available at all times.

ROYAL CANIN CLINICAL TRIALS OR STUDIES ON WHICH THE NUTRITIONAL SOLUTION IS BASED

- Comblain F. & al. Curcuminoids Extract, Hydrolyzed Collagen and Green Tea Extract Synergically Inhibit Inflammatory and Catabolic Mediator's Synthesis by Normal Bovine and Osteoarthritic Human Chondrocytes in Monolayer. PlosOne 2015. DOI: 10.1371/journal.pone.0121654.
- Weber M. & al. A high protein, high fiber diet designed for weight loss improves satiety in dogs. J Vet Intern Med. 2007 Nov-Dec;21(6):1203-8.
- German AJ & al. A high protein high fibre diet improves weight loss in obese dogs. Vet J. 2010 Mar;183(3):294-7.

MULTIFUNCTION C2P+-KCAL CONTROL







Analysis tables



per 1000g as fed (Dry)
per 100 kcal (Dry)
per 1000g as fed (Wet)
per 100g dry matter (Wet)
per 100kcal (Wet)
per 100kcal (Dry & wet)

ANALYSIS TABLE

dry

	SATIETY WEIGHT MANAGEMENT SMALL DOG	SATIETY SMALL DOG	OBESITY MANAGEMENT SMALL DOG	WEIGHT CONTROL SMALL DOG	DIABETIC SMALL DOG	ANALLERGENIC SMALL DOG	HYPOALLERGENIC SMALL DOG	HYPOALLERGENIC SMALL DOG	HYPOALLERGENIC SMALL DOG	SENSITIVITY CONTROL SMALL DOG	SKIN CARE SMALL DOG	SKIN CARE SMALL DOG	SKIN CARE SMALL DOG
Moisture %	9.5	9.5	9.5	9.5	9.5	6.5	9.5	9.5	9.5	9.5	9.5	9.5	9.5
Proteins %	30	30	34	30	37	18	21	23	24	21	23	25	29
Fat content %	9.5	9.5	10	10	12	16.5	19	12	16	9	16	16	20
Carbohydrate %	28.4	28.2	20.8	26.9	19.1	44.2	36.6	42.4	36.4	43.5	38.4	37.3	27.2
NFE %	28.4	28.2	31.4	37.5	29.9	48	4.1	46.9	40	48.9	43.9	42.3	32.2
Dietary fibre %	28.1	27.8	18.2	17.3	17.2	6	5.5	5.6	4.3	9.8	7.4	6.3	6.9
Crude fibre %	16.8	15.9	7.6	6.7	6.4	2.2	1	1.1	0.7	4.4	1.9	1.3	1.9
Crude ash %	5.8	6.9	7.5	6.3	5.2	8.8	8.4	7.5	9.8	7.2	5.7	5.9	7.4
Arginine %	1.46	1.51	2	1.7	1.93	1.08	1.52	1.69	1.76	1.38	0.86	0.93	1.21
Taurine %	0.2	0.2	0.27	0.2	0.2	0.21	0.21	0.2	0.21	0.3	0.21	0.2	0.21
EPA+DHA %	0.4	0.3	0.14	0.2	0.3	0.2	0.34	0.37	0.35	0.35	0.41	0.41	0.4
Calcium %	0.9	0.92	1.42	1.12	0.9	1.01	1.01	0.82	1.01	1.48	0.76	0.7	1.2
Phosphorus %	0.71	0.75	1.02	0.8	0.7	0.8	0.8	0.6	0.8	0.91	0.58	0.58	0.9
Magnesium %	0.14	0.12	0.1	0.08	0.08	0.05	0.08	0.05	0.07	0.05	0.05	0.05	0.07
Sodium %	0.3	0.7	0.5	0.5	0.3	1	0.5	0.4	1	0.4	0.3	0.4	0.4
Potassium %	0.9	0.8	1	0.7	0.7	1.2	1	0.8	0.9	0.7	0.7	0.7	1
Chloride %	0.9	1.32	0.9	0.84	0.64	1.04	0.53	0.46	1.16	0.63	0.6	0.56	0.51
Iron mg/kg*	138	132	207	214	207	222	184	215	196	204	132	124	114
Copper mg/kg*	15	15	15	15	15	15	15	15	15	15	15	15	15
Zinc mg/kg*	170	170	207	194	167	208	245	238	250	238	242	238	226
Selenium mg/kg	0.3	0.3	0.35	0.15	0.3	0.11	0.12	0.13	0.1	0.13	0.18	0.16	0.17
Vitamin A IU/kg	21500	20000	23000	25000	17000	31000	31000	30000	31000	33000	32000	32000	33000
Vitamin D3 IU/kg	1000	1000	1100	1000	1000	800	800	700	800	800	800	800	800
Vitamin E mg/kg	750	810	850	600	600	600	600	600	600	600	600	600	600
Vitamin C mg/kg	330	330	500	200	300	200	200	200	200	200	200	200	200
Vitamin B1 mg/kg	18.2	16.8	19.8	4.2	4.2	28.1	27.2	25.7	27.3	27.4	27.6	27.6	27.2
Vitamin B2 mg/kg	67.6	62.7	71.1	3.8	3.8	50.5	49	46.2	49.2	49.4	49.6	49.7	49
Vitamin B6 mg/kg	30.1	27.7	32.6	26.6	8.2	78.6	76.2	71.8	76.5	76.8	77.3	77.4	76.2
Niacin mg/kg	225	210.6	220.3	15.1	15	500.6	485	460	490	490	493	493.4	490
Pantothenic acid mg/kg	61	56.2	66.2	34.6	25.3	150.6	146.1	137.7	146.6	147.2	148.2	148.3	146
Vitamin B12 mg/kg	0.2	0.2	0.2	0.07	0.07	0.14	0.14	0.13	0.14	0.14	0.14	0.14	0.14
Folic acid mg/kg	4.9	4.5	5.3	9	0.8	14.1	13.7	12.9	13.8	13.8	13.9	13.9	13.7
Biotin mg/kg	1.9	1.8	2.1	2.76	1.08	3.19	3.09	2.92	3.1	3.12	3.14	3.14	3.09
Choline mg/kg	3400	3000	2000	1700	2000	2000	2100	2000	2100	2000	2000	2000	1800
L-carnitine mg/kg	325	325	330	200	200	-	-	-	-	-	-	-	50
Chondroitin+glucosamine mg/kg	2000	1000	1000	500	-	-	-	-	-	-	-	-	-
Polyphenols mg/kg	-	-	-	-	-	-	-	-	-	-	-	-	-
Metabolisable energy kcal/kg**	2678***	2662***	3116***	3285	3447	3884	4002	3703	3841	3344	3900	3945	4048

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE

dry

	SKIN SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT	SKIN INTESTINAL SUBJECT
Moisture %	9.5	8	9.5	9.5	9.5	9.5	9.5	9.5	9.5	9.5	9.5	9.5	9.5
Proteins %	23	29	25	23	22	23	16	14	13.5	12.5	18	20	20
Fat content %	15	22	20	11	7	16	16	18	16	18	17	17	11
Carbohydrate %	37	26.7	32.4	43.2	46.3	23.7	46.8	47.1	48.7	47.4	43.3	40.6	40.1
NFE %	40.7	31.6	37.0	47.9	53.2	33.1	51.9	52.2	54.4	53.1	46.6	44.1	46.2
Dietary fibre %	7.1	6.1	6.2	7	8.6	20.5	7.1	7.5	8	8	5.6	5.7	12.2
Crude fibre %	3.4	1.2	1.6	2.3	1.7	11.1	2	2.4	2.3	2.3	2.3	2.2	6.1
Crude ash %	8.4	8.2	6.9	6.3	6.6	7.3	4.6	3.9	4.3	4.6	6.6	7.2	7.2
Arginine %	1.52	1.8	1.65	1.55	1.45	1.27	1.14	0.58	0.73	0.68	0.97	1.15	1.06
Taurine %	0.46	0.21	0.2	0.2	0.21	0.2	0.21	0.19	0.19	0.19	0.21	0.21	0.21
EPA+DHA %	0.6	0.31	0.30	0.21	0.14	0.3	0.2	0.47	0.47	0.47	0.2	0.21	0.21
Calcium %	1.2	1.2	1.14	1	1.09	1.08	0.72	0.4	0.6	0.58	0.5	0.7	0.6
Phosphorus %	1	1	0.99	0.89	0.83	0.89	0.51	0.2	0.3	0.29	0.5	0.7	0.6
Magnesium %	0.08	0.08	0.09	0.09	0.10	0.08	0.08	0.09	0.1	0.1	0.05	0.05	0.06
Sodium %	0.4	0.4	0.4	0.4	0.4	0.3	0.2	0.35	0.35	0.35	1.2	1.2	1.2
Potassium %	0.8	0.9	0.7	0.7	0.7	0.8	0.9	0.6	0.6	0.6	0.8	0.8	0.8
Chloride %	0.6	0.56	0.54	0.59	0.63	0.49	0.47	0.94	0.72	0.9	2.21	1.91	2.15
Iron mg/kg*	222	247	185	172	183	186	164	110	124	139	137	139	133
Copper mg/kg*	15	15	15	15	15	15	4	15	15	15	15	15	15
Zinc mg/kg*	238	223	224	222	224	215	237	169	174	196	225	223	219
Selenium mg/kg	0.3	0.32	0.33	0.29	0.24	0.24	0.37	0.08	0.13	0.12	0.19	0.11	0.16
Vitamin A IU/kg	32000	19000	19000	19000	20000	19000	19000	17000	17000	16000	18000	21000	23000
Vitamin D3 IU/kg	800	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1400
Vitamin E mg/kg	600	600	600	600	600	600	600	600	600	600	600	100	200
Vitamin C mg/kg	200	300	300	300	300	300	200	200	300	300	200	-	-
Vitamin B1 mg/kg	27.4	4.2	4.2	4.2	4.3	4.1	4.2	4.1	4.1	4.1	4.2	4.2	5.7
Vitamin B2 mg/kg	49.3	3.8	3.8	3.9	3.9	3.8	3.9	3.8	3.8	3.8	3.9	3.9	5.2
Vitamin B6 mg/kg	76.7	8.2	8.2	8.3	8.4	8.1	8.3	8.1	8.1	8.1	8.3	8.3	11.1
Niacin mg/kg	490	15.1	15	15.3	15.4	14.9	15.2	14.9	14.8	14.8	15.2	15.2	20.4
Pantothenic acid mg/kg	147	25.5	25.3	25.8	25.9	25.2	25.7	25	25	25	25.7	25.7	34.4
Vitamin B12 mg/kg	0.14	0.07	0.07	0.07	0.07	0.07	0.07	0.07	0.07	0.07	0.07	0.07	0.09
Folic acid mg/kg	13.8	0.9	0.8	0.9	0.9	0.8	0.9	0.8	0.8	0.8	0.9	0.9	1.2
Biotin mg/kg	3.11	1.09	1.08	1.1	1.11	1.07	1.1	1.07	1.07	1.07	1.1	1.1	1.47
Choline mg/kg	2000	1600	1500	1500	1800	1500	2100	2400	2400	2400	2000	1600	1500
L-carnitine mg/kg	-	-	-	-	-	-	300	-	-	-	-	-	210
Chondroitin+glucosamine mg/kg	-	-	-	-	-	-	1100	-	-	-	-	-	-
Polyphenols mg/kg	-	-	-	-	-	-	-	-	-	-	-	-	-
Metabolisable energy kcal/kg**	3648	4224	4074	3616	3456	3169	3906	3988	3886	3964	3866	3859	3314

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE

dry

	URINARY U/C 100 g FRESH	CARDIAC	MOBILITY ^{COPI}	CALM	DENTAL	DENTAL SMALL COWS - 10 kg	CONVALESCENCE SUPPORT	REHYDRATION SUPPORT	RENAL HYPOALBEMIC	URINARY HYPOALBEMIC	URINARY SAFETY	MOBILITY ^{COPI} SAFETY
Moisture %	9.5	9.5	9.5	9.5	8	9.5	4	4	5.5	5.5	5.5	9.5
Proteins %	18	26	25	25	22	25	42	5	14	20	30	28
Fat content %	15	20	12	16	16	16	24	-	19	15	9.5	12
Carbohydrate %	46.4	33.9	38.2	35.9	39.5	32.9	18.6	86.5	46.8	40.4	16.9	17.2
NFE %	50	37.8	43.8	40.7	45.3	39.6	20	86.5	51.1	44.9	26.9	29.1
Dietary fibre %	5.7	5.5	9.5	6.4	9.3	11.2	4.4	-	6.7	6.9	26.7	28.2
Crude fibre %	2.1	1.6	3.9	1.6	3.5	4.5	3	-	2.4	2.4	16.7	16.3
Crude ash %	5.4	5.1	5.8	7.2	5.2	5.4	7	4.5	4	8.2	7.4	5.1
Arginine %	0.86	1.48	1.51	1.54	1.21	1.26	2.86	-	0.87	1.42	1.5	1.37
Taurine %	0.21	0.34	0.19	0.3	0.20	0.28	0.65	-	0.21	0.18	0.05	0.19
EPA+DHA %	0.3	0.38	0.6	0.3	0.4	0.3	0.02	-	0.5	0.36	0.29	0.5
Calcium %	0.79	0.83	0.8	0.92	0.8	0.7	1.5	-	0.3	0.51	0.85	0.79
Phosphorus %	0.59	0.55	0.5	0.66	0.6	0.6	1.2	-	0.16	0.5	0.7	0.4
Magnesium %	0.07	0.15	0.08	0.08	0.06	0.07	0.05	-	0.06	0.04	0.06	0.05
Sodium %	0.3	0.13	0.4	0.9	0.4	0.7	0.4	1	0.35	1.3	0.95	0.4
Potassium %	0.9	0.8	0.8	0.63	0.65	0.65	0.7	1	0.6	0.8	0.8	0.8
Chloride %	0.58	0.33	1.03	1.34	0.73	1.18	0.5	2.5	0.92	2.04	1.85	1.16
Iron mg/kg*	73	140	173	152	161	149	190	-	126	159	124	120
Copper mg/kg*	15	15	15	15	15	15	22	15	15	15	15	15
Zinc mg/kg*	230	191	188	240	239	234	143	-	215	221	186	179
Selenium mg/kg	0.24	0.14	0.27	0.2	0.23	0.16	0.24	-	0.25	0.25	0.28	0.25
Vitamin A IU/kg	25000	22000	17000	32000	19000	34000	24000	-	31500	31500	21000	17000
Vitamin D3 IU/kg	800	800	1000	800	1100	1000	1815	-	800	900	1000	1000
Vitamin E mg/kg	600	600	600	600	500	600	700	-	600	600	800	390
Vitamin C mg/kg	200	300	300	200	300	300	250	-	300	-	-	250
Vitamin B1 mg/kg	27.9	13.7	4.1	27.5	4.5	28.3	14.9	-	28.9	29.2	18	4.1
Vitamin B2 mg/kg	50.3	49.3	3.8	49.5	4.2	50.1	13.1	-	52	52.5	64.8	3.8
Vitamin B6 mg/kg	78.2	22.6	8.1	76.9	8.9	78.4	10	-	80.9	81.7	29.7	8.1
Niacin mg/kg	500	156.2	14.8	490	16.4	490	93	-	515.2	520.1	200.7	14.8
Pantothenic acid mg/kg	149.9	45.9	25	147.5	27.6	152.2	49	-	155.1	156.5	60.3	25
Vitamin B12 mg/kg	0.14	0.14	0.07	0.14	0.08	0.15	0.15	-	0.15	0.15	0.19	0.07
Folic acid mg/kg	14.1	3.7	0.8	13.8	0.9	14	1	-	14.6	14.7	4.8	0.8
Biotin mg/kg	3.18	1.45	1.07	3.12	1.18	3.33	1.7	-	3.28	3.31	1.9	1.07
Choline mg/kg	1500	1700	2500	2000	2000	1600	4000	-	2400	2200	2100	2900
L-carnitine mg/kg	200	830	-	-	-	50	50	-	-	-	300	-
Chondroitin+glucosamine mg/kg	-	-	-	-	1000	-	-	-	-	-	1000	-
Polyphenols mg/kg	-	1255	780	-	700	700	-	-	-	-	-	610
Metabolisable energy kcal/kg**	3831	4143	3574	3875	3852	3723	4414	3442	4030	3716	2699	2781***

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

dry

	SATIETY NRC2006**	SATIETY NRC2006**	OBESITY NRC2006**	WEIGHT NRC2006**	DIABETIC NRC2006**	ANALLERGENIC NRC2006**	HYPOALLERGENIC NRC2006**	HYPOALLERGENIC NRC2006**	HYPOALLERGENIC NRC2006**	SENSITIVITY NRC2006**	SKIN CARE NRC2006**	SKIN CARE NRC2006**	SKIN CARE NRC2006**
Proteins g	11.2	11.3	10.9	9.1	10.7	4.6	5.3	6.2	6.3	6.3	5.9	6.3	7.2
Fat content g	3.5	3.6	3.2	3	3.5	4.3	4.8	3.2	4.2	2.7	4.1	4.1	4.9
Carbohydrate g	10.6	10.6	6.7	8.2	5.5	11.4	9.2	11.5	9.5	13	9.9	9.5	6.7
NFE g	10.6	10.6	10.1	11.4	8.7	12.4	10.3	12.7	10.4	14.6	11.3	10.7	8
Dietary fibre g	10.5	10.4	5.8	5.3	5	1.5	1.4	1.5	1.1	2.9	1.9	1.6	1.7
Crude fibre g	6.3	6	2.4	2	1.86	0.57	0.25	0.3	0.18	1.32	0.49	0.33	0.47
Crude ash g	2.2	2.6	2.4	1.92	1.51	2.27	2.1	2.03	2.55	2.15	1.46	1.5	1.83
Arginine g	0.55	0.57	0.6	0.52	0.56	0.28	0.38	0.46	0.46	0.41	0.22	0.24	0.3
Taurine g	0.07	0.08	87	60	60	54	52	54	55	90	54	51	52
EPA+DHA g	0.15	0.11	0.04	0.06	0.09	0.05	0.08	0.1	0.09	0.1	0.11	0.1	0.1
Calcium g	0.34	0.35	0.46	0.34	0.26	0.26	0.25	0.22	0.26	0.44	0.19	0.18	0.3
Phosphorus g	0.27	0.28	0.33	0.24	0.21	0.21	0.2	0.16	0.21	0.27	0.15	0.15	0.22
Magnesium g	0.05	0.05	32	20	20	13	20	14	18	15	13	13	17
Sodium g	0.11	0.26	0.16	0.15	0.09	0.26	0.12	0.11	0.26	0.12	0.08	0.1	0.1
Potassium g	0.34	0.3	0.32	0.21	0.2	0.31	0.25	0.22	0.23	0.21	0.18	0.18	0.25
Chloride g	0.34	0.5	0.3	0.26	0.19	0.27	0.13	0.12	0.3	0.19	0.15	0.14	0.13
Iron mg*	5.15	4.96	6.6	6.5	6	5.7	4.6	5.8	5.1	6.1	3.4	3.1	2.8
Copper mg*	0.56	0.56	0.48	0.46	0.44	0.39	0.37	0.41	0.39	0.45	0.38	0.38	0.37
Zinc mg*	6.35	6.39	6.6	5.9	4.9	5.4	6.1	6.4	6.5	7.1	6.2	6	5.6
Selenium mg	0.01	0.01	11	4.6	8.7	2.8	3	3.5	2.6	3.9	4.6	4.1	4.2
Vitamin A IU	802.84	751.31	738	761	493	798	775	810	807	987	821	811	815
Vitamin D3 IU	37.34	37.57	35.3	30	29	20	20	19	21	24	21	20	20
Vitamin E mg	28.01	30.43	27.3	18	17	15	15	16	16	18	16	15	15
Vitamin C mg	12.32	12.4	16.0	6	8.7	5	5	5	5	6	5	5	5
Vitamin B1 mg	0.68	0.63	0.6	0.13	0.12	0.72	0.68	0.69	0.71	0.82	0.71	0.7	0.67
Vitamin B2 mg	2.52	2.36	2.3	0.12	0.11	1.3	1.22	1.25	1.28	1.48	1.27	1.26	1.21
Vitamin B6 mg	1.12	1.04	1.0	0.81	0.24	2	1.9	1.94	1.99	2.3	1.98	1.96	1.88
Niacin mg	8.4	7.91	7.1	0.46	0.44	13	12.1	12.4	12.8	14.7	12.6	12.5	12.1
Pantothenic acid mg	2.28	2.11	2.1	1.05	0.73	3.9	3.7	3.7	3.8	4.4	3.8	3.8	3.6
Vitamin B12 mg	0.01	0.01	6.4	2.13	2	3.6	3.5	3.5	3.6	4.1	3.6	3.5	3.5
Folic acid mg	0.18	0.17	0.17	0.27	0.02	0.36	0.34	0.35	0.36	0.41	0.36	0.35	0.34
Biotin mg	0.07	0.07	67.1	84	31	82	77	79	81	93	81	80	76
Choline mg	126.96	112.7	64	51.8	58	51	52	54	55	60	51	51	44
L-carnitine mg	12.14	12.21	10.6	60	58	-	-	-	-	-	-	-	-
Chondroitin+glucosamine mg	74.68	37.57	32	152	-	-	-	-	-	-	-	-	-
Polyphenols mg	-	-	-	-	-	-	-	-	-	-	-	-	-
Metabolisable energy kcal/kg**	2678***	2662***	3116***	3285	3447	3884	4002	3703	3841	3344	3900	3945	4048

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

dry

	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT
	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT	SKIN SUPPORT
Proteins g	6.3	6.9	6.1	6.4	6.4	7.3	4.1	3.5	3.5	3.2	4.7	5.2	6
Fat content g	4.1	5.2	4.9	3	2	5	4.1	4.5	4.1	4.5	4.4	4.4	3.3
Carbohydrate g	10.1	6.3	8	11.9	13.4	7.5	12	11.8	12.5	12	11.2	10.5	12.1
NFE g	11.2	7.5	9.1	13.2	15.4	10.4	13.3	13.1	14	13.4	12.1	11.4	13.9
Dietary fibre g	2	1.4	1.5	1.9	2.5	6.5	1.8	1.9	2.1	2	1.45	1.48	3.68
Crude fibre g	0.93	0.3	0.4	0.6	0.5	3.5	0.5	0.6	0.6	0.6	0.59	0.57	1.84
Crude ash g	2.3	1.9	1.7	1.7	1.9	2.3	1.2	1	1.1	1.2	1.7	1.9	2.2
Arginine g	0.42	0.4	0.4	0.4	0.4	0.4	0.3	0.1	0.2	0.2	0.25	0.3	0.32
Taurine g	126	50	49	55	61	63	54	48	49	48	54	54	63
EPA+DHA g	0.16	0.07	0.07	0.06	0.04	0.09	0.05	0.12	0.12	0.12	0.05	0.05	0.06
Calcium g	0.33	0.28	0.28	0.28	0.32	0.34	0.18	0.10	0.15	0.15	0.13	0.18	0.17
Phosphorus g	0.27	0.24	0.24	0.25	0.24	0.28	0.13	0.05	0.08	0.07	0.13	0.18	0.17
Magnesium g	22	19	22	25	29	25	20	23	26	25	13	13	15
Sodium g	0.11	0.09	0.1	0.11	0.12	0.09	0.05	0.09	0.09	0.09	0.31	0.31	0.36
Potassium g	0.22	0.21	0.17	0.19	0.2	0.25	0.23	0.15	0.15	0.15	0.21	0.21	0.24
Chloride g	0.16	0.1	0.1	0.2	0.2	0.2	0.1	0.2	0.2	0.2	0.57	0.49	0.65
Iron mg*	6.1	5.8	4.5	4.8	5.3	5.9	4.2	2.8	3.2	3.5	3.5	3.6	4
Copper mg*	0.41	0.36	0.37	0.41	0.43	0.47	0.1	0.4	0.4	0.4	0.39	0.39	0.45
Zinc mg*	6.5	5.3	5.5	6.1	6.5	6.8	6.1	4.2	4.5	4.9	5.8	5.8	6.6
Selenium mg	8.2	8	8	8	7	8	9	2	3	3	4.9	2.9	4.8
Vitamin A IU	877	450	466	525	579	600	486	426	437	404	466	544	694
Vitamin D3 IU	22	23.7	24.5	27.7	28.9	31.6	25.6	25.1	25.7	25.2	26	26	42
Vitamin E mg	16	14.2	14.7	16.6	17.4	18.9	15.4	15	15.4	15.1	16	2.6	6
Vitamin C mg	8	7.1	7.4	8.3	8.7	9.5	5.1	5	7.7	7.6	5	-	-
Vitamin B1 mg	0.75	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.11	0.11	0.17
Vitamin B2 mg	1.35	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.16
Vitamin B6 mg	2.1	0.2	0.2	0.2	0.2	0.3	0.2	0.2	0.2	0.2	0.21	0.22	0.33
Niacin mg	13.4	0.4	0.4	0.4	0.4	0.5	0.4	0.4	0.4	0.4	0.39	0.39	0.62
Pantothenic acid mg	4	0.6	0.6	0.7	0.7	0.8	0.7	0.6	0.6	0.6	0.66	0.67	1.04
Vitamin B12 mg	3.8	1.7	1.7	1.9	2	2.2	1.8	1.8	1.8	1.8	1.8	1.8	2.7
Folic acid mg	0.38	0.02	0.02	0.02	0.03	0.03	0.02	0.02	0.02	0.02	0.02	0.02	0.04
Biotin mg	85	25.8	26.5	30.4	32.1	33.8	28.2	26.8	27.5	27	29	29	44
Choline mg	55	38	37	41	52	47	54	60	62	61	52	41	45
L-carnitine mg	-	-	-	-	-	-	7.68	-	-	-	-	-	63
Chondroitin+glucosamine mg	-	-	-	-	-	-	28	-	-	-	-	-	-
Polyphenols mg	-	-	-	-	-	-	-	-	-	-	-	-	-
Metabolisable energy kcal/kg**	3648	4224	4074	3616	3456	3169	3906	3988	3886	3964	3866	3859	3314

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

dry

	URINARY U/C LIVERPOOL	CARDIAC	MOBILITY CASH	CALM	DENTAL	DENTAL DENTAL CASH 10-15	CONVALESCENCE SUPPORT	REHYDRATION SUPPORT
Proteins g	4.7	6.3	7.0	6.5	5.7	6.7	9.1	1.4
Fat content g	3.9	4.8	3.4	4.1	4.2	4.3	5.2	-
Carbohydrate g	12.1	8.2	10.7	9.3	10.3	8.8	4	24.1
NFE g	13.1	9.1	12.3	10.5	11.8	10.6	4.3	24.1
Dietary fibre g	1.49	1.3	2.7	1.65	2.4	3	1	1
Crude fibre g	0.55	0.4	1.1	0.41	0.9	1.2	0.7	0.7
Crude ash g	1.4	1.2	1.6	1.9	1.3	1.5	1.3	1.5
Arginine g	0.22	0.4	0.4	0.4	0.3	0.3	0.6	-
Taurine g	55	82	53	77	52	75	140	-
EPA+DHA g	0.08	0.09	0.17	0.08	0.1	0.08	-	-
Calcium g	0.21	0.2	0.22	0.24	0.21	0.19	0.32	-
Phosphorus g	0.15	0.13	0.14	0.17	0.16	0.16	0.26	-
Magnesium g	18	36	22	21	16	19	11	-
Sodium g	0.08	0.03	0.11	0.23	0.1	0.19	0.09	0.27
Potassium g	0.23	0.19	0.22	0.16	0.17	0.17	0.15	0.27
Chloride g	0.15	0.1	0.3	0.35	0.2	0.3	0.1	0.7
Iron mg*	1.9	3.4	4.8	3.9	4.2	4	4.1	-
Copper mg*	0.39	0.36	0.42	0.39	0.39	0.4	0.47	0.41
Zinc mg*	6	4.6	5.3	6.2	6.2	6.3	3.1	-
Selenium mg	6.3	3	8	5.2	6	4	5	-
Vitamin A IU	653	531	476	826	493	913	522	-
Vitamin D3 IU	21	19.3	28.0	21	28.6	26.9	39.5	-
Vitamin E mg	16	14.5	16.8	15	13	16.1	15.2	-
Vitamin C mg	5	7.2	8.4	5	7.8	8.1	5.4	-
Vitamin B1 mg	0.73	0.3	0.1	0.71	0.1	0.8	0.3	-
Vitamin B2 mg	1.31	1.2	0.1	1.28	0.1	1.3	0.3	-
Vitamin B6 mg	2.04	0.5	0.2	1.98	0.2	2.1	0.2	-
Niacin mg	13.1	3.8	0.4	12.7	0.4	13.2	2	-
Pantothenic acid mg	3.9	1.1	0.7	3.8	0.7	4.1	1.1	-
Vitamin B12 mg	3.7	3.4	2.0	3.6	2.1	4	3.2	-
Folic acid mg	0.37	0.09	0.02	0.36	0.02	0.38	0.02	-
Biotin mg	83	35	29.9	81	30.6	89.4	36.9	-
Choline mg	39	41	70	52	52	43	87	-
L-carnitine mg	52	20	-	-	-	1.34	1.09	-
Chondroitin+glucosamine mg	-	-	-	-	26	-	-	-
Polyphenols mg	-	30.3	21.8	-	18.2	18.8	-	-
Metabolisable energy kcal/kg**	3831	4143	3574	3875	3852	3723	4414	3442

RENAL HYPOALBEMIC	URINARY HYPOALBEMIC	URINARY SAFETY	MOBILITY CASH SAFETY
3.5	5.4	11.1	10.1
4.7	4	3.5	4.3
11.6	10.9	6.3	6.2
12.7	12.1	10	10.5
1.7	1.9	9.9	10.1
0.6	0.6	6.2	5.9
1	2.2	2.7	1.8
0.2	0.4	0.6	0.5
52	48	19	68
0.12	0.1	0.11	0.18
0.07	0.14	0.31	0.28
0.04	0.13	0.26	0.14
15	11	22	18
0.09	0.35	0.35	0.14
0.15	0.22	0.3	0.29
0.23	0.55	0.69	0.4
3.1	4.3	4.6	4.3
0.37	0.4	0.56	0.54
5.3	5.9	6.9	6.4
6.2	6.7	-	9
782	848	778	611
20	24	37	36
15	16	30	14
7	-	-	9
0.7	0.8	0.7	0.1
1.3	1.4	2.4	0.1
2	2.2	1.1	0.3
12.8	14	7.4	0.5
3.8	4.2	2.2	0.9
3.7	4	7	2.5
0.36	0.4	0.18	0.03
81	89	70	38.5
60	59	78	104
-	-	-	-
-	-	-	-
-	-	-	21.9
4030	3716	2699	2781***

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE

wet

	SATIETY WEIGHT MANAGEMENT	OBESEITY MANAGEMENT	DIABETIC LOW CARBOHYDRATE	HYPOALLERGENIC	SENSITIVITY Osteo & Res	SENSITIVITY Dent & Res	GASTRO INTESTINAL	GIRO INTESTINAL LOW FAT	HEPATIC	RENAL	RENAL LOW FAT	RENAL	URINARY S/O
Moisture %	83	86	80	74.5	72	68	75	74	64	66	65	80	72
Proteins %	8.5	7	9	6	8.5	9	8.5	7.5	6.5	5.4	6	3.9	6
Fat content %	2	2	4	3.5	6	7	6.5	1.7	4.2	9	9	6	8
Carbohydrate %	3	2.1	1.7	11.1	9.5	11.7	6.1	12.4	20.8	16.3	16	7.65	10.2
NFE %	3	2.5	3.1	12.4	10.5	13.5	6.5	13.6	21.8	17.1	16.8	8.2	11
Dietary fibre %	3.2	1.4	3.9	3.3	2	2.3	1.9	2.9	3	2	2.3	1.25	2.3
Crude fibre %	2	1	2.5	2	1	0.5	1.5	1.7	2	1.2	1.5	0.7	1.5
Crude ash %	1.5	1.5	1.4	1.6	2	2	2	1.5	1.5	1.3	1.7	1.2	1.5
Arginine %	0.4	0.4	0.5	0.34	0.55	0.55	0.48	0.41	-	0.3	0.35	0.2	0.27
Taurine %	0.08	0.08	0.1	0.1	0.17	0.2	0.14	0.14	0.19	0.21	0.22	0.125	0.2
EPA + DHA %	0.06	0.1	0.01	0.2	0.28	0.23	0.08	0.02	-	0.15	0.15	0.09	0.34
Calcium %	0.14	0.2	0.3	0.19	0.42	0.48	0.35	0.24	0.35	0.17	0.25	0.15	0.24
Phosphorus %	0.12	0.16	0.3	0.2	0.3	0.4	0.28	0.13	0.24	0.11	0.13	0.08	0.3
Magnesium %	0.01	0.015	0.02	0.02	0.02	0.04	0.03	0.02	0.035	0.03	0.03	0.015	0.02
Sodium %	0.08	0.1	0.1	0.2	0.1	0.15	0.09	0.06	0.05	0.08	0.09	0.12	0.15
Potassium %	0.13	0.2	0.19	0.22	0.23	0.22	0.26	0.14	0.27	0.22	0.18	0.17	0.24
Chloride %	0.1	0.19	0.1	0.1	0.2	0.18	0.19	0.2	-	0.08	0.08	0.12	0.2
Iron mg/kg*	40	51	40	25	37	33	35	40	30	40	45	25	25
Copper mg/kg*	3	3.5	2.2	6	8	4.8	3	5	1.7	5	6	4	4
Zinc mg/kg*	30	34	30	130	64	52	30	35	60	55	58	35	40
Selenium mg/kg	0.3	0.18	0.3	0.06	0.1	0.09	0.1	0.1	0.14	0.1	0.15	0.09	0.05
Vitamin A IU/kg	35000	12000	5000	5000	20000	2100	5700	30000	5500	15000	53000	40000	3500
Vitamin D3 IU/kg	160	150	150	340	170	300	380	210	250	300	370	190	210
Vitamin E mg/kg	140	100	120	120	145	185	150	150	250	250	210	150	200
Vitamin C mg/kg	40	55	42	50	70	80	58	55	80	130	130	75	-
Vitamin B1 mg/kg	1	10	3	1	3	3	10	10	10	5	5	1	14
Vitamin B2 mg/kg	2	5	3	1.5	5	5	2	3	4	3	3	2	3
Vitamin B6 mg/kg	0.5	0.9	1	0.5	1	1.1	0.9	1	1.5	1	1	0.8	1
Niacin mg/kg	5	25	15	130	290	360	10	10	15	10	10	6	10
Pantothenic acid mg/kg	6	9	10	40	48	55	5	10	11	10	10	6	10
Vitamin B12 mg/kg	0.01	0.02	0.04	0.01	0.02	0.03	0.02	0.03	0.03	0.02	0.02	0.02	0.03
Folic acid mg/kg	0.1	0.5	0.5	0.1	0.2	0.14	0.1	0.35	0.3	0.2	0.2	0.1	0.3
Biotin mg/kg	0.03	0.07	0.1	-	0.5	0.55	0.06	0.1	0.12	0.05	0.1	0.05	0.09
Choline mg/kg	750	790	750	500	700	1060	500	450	700	950	990	600	550
L-carnitine mg/kg	70	30	45	-	-	-	-	-	120	-	-	-	-
Chondroitin mg/kg**	85	70	-	-	-	-	-	-	-	-	-	-	-
Polyphenols mg/kg	-	-	-	-	-	-	-	-	-	-	-	-	-
ME kcal/kg***	602****	563****	727	947	1220	1459	1088	916	1382	1584	1587	952	1280

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE

wet

	URINARY S/O	CARDIAC	MOBILITY CCP	RECOVERY
Moisture %	80	73.5	78	72.5
Proteins %	6	8.1	8	14
Fat content %	5.5	7.1	5.7	6.2
Carbohydrate %	6.2	8.4	5.24	2.6
NFE %	6.5	9	6	3.6
Dietary fibre %	1.3	1.6	1.76	3
Crude fibre %	1	1	1	2
Crude ash %	1	1.3	1.3	1.7
Arginine %	0.28	0.7	0.45	0.7
Taurine %	0.125	0.2	0.12	0.2
EPA + DHA %	0.05	0.3	0.5	0.45
Calcium %	0.18	0.24	0.18	0.32
Phosphorus %	0.18	0.2	0.16	0.29
Magnesium %	0.025	0.03	0.02	0.02
Sodium %	0.14	0.05	0.09	0.16
Potassium %	0.14	0.23	0.18	0.21
Chloride %	0.18	0.1	0.13	0.2
Iron mg/kg*	16	39	38	80
Copper mg/kg*	3	9	3.8	5
Zinc mg/kg*	18	50	36	60
Selenium mg/kg	0.03	0.1	0.21	0.04
Vitamin A IU/kg	3300	10300	50000	2000
Vitamin D3 IU/kg	140	280	195	320
Vitamin E mg/kg	130	200	200	140
Vitamin C mg/kg	-	68	90	65
Vitamin B1 mg/kg	0.6	10	1	53
Vitamin B2 mg/kg	1.5	4	2	5
Vitamin B6 mg/kg	0.5	1.3	1	3
Niacin mg/kg	5	18	5	56
Pantothenic acid mg/kg	7	10	5	3
Vitamin B12 mg/kg	0.01	0.03	0.015	0.05
Folic acid mg/kg	0.07	0.6	0.1	1.3
Biotin mg/kg	0.03	0.1	0.05	0.12
Choline mg/kg	430	580	610	700
L-carnitine mg/kg	-	240	-	-
Chondroitin mg/kg**	-	-	-	-
Polyphenols mg/kg	-	370	228	-
ME kcal/kg***	918	1236	1000	1156

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100g dry matter

wet

	SATIETY WEIGHT MANAGEMENT	OBESEITY MANAGEMENT	DIABETIC LOW CARBOHYDRATE	HYPOALLERGENIC	SENSITIVITY Osteo & Res	SENSITIVITY Diet & Res	GESTRO INTESTINAL	GESTRO INTESTINAL LOW FAT	HEPATIC	RENAL	RENAL LOW FAT	RENAL	URINARY S/O
Moisture %	83	86	83	74.5	72	68	75	74	64	66	65	80	72
Proteins %	50	50	50	23.5	30.4	28.1	34	28.8	6.5	15.9	17.1	19.5	21.4
Fat content %	11.8	14.3	11.8	13.7	21.4	21.9	26	6.5	4.2	26.5	25.7	30	28.6
Carbohydrate %	17.6	15	10.6	43.5	33.9	36.6	24.4	47.7	20.8	47.9	45.7	38.3	36.4
NFE %	17.6	17.9	17.6	48.6	37.5	42.2	26	52.3	21.8	50.3	48	41	39.3
Dietary fibre %	18.8	10	18.8	12.9	7.1	7.2	7.6	11.2	3	5.9	6.6	6.3	8.2
Crude fibre %	11.8	7.1	11.8	7.8	3.6	1.6	6	6.5	2	3.5	4.3	3.5	5.4
Crude ash %	8.8	10.7	8.8	6.3	7.1	6.3	8	5.8	1.5	3.8	4.9	6	5.4
Arginine %	2.4	2.9	2.4	1.3	2	1.7	1.9	1.6	-	0.9	1	1	1
Taurine %	0.4	0.6	0.4	0.47	0.61	0.63	0.56	0.54	0.19	0.62	0.63	0.63	0.68
EPA + DHA %	0.4	0.7	0.4	0.8	1	0.7	0.3	0.1	-	0.4	0.4	0.5	1.2
Calcium %	0.8	1.4	0.8	0.7	1.5	1.5	1.4	0.9	0.35	0.5	0.7	0.8	0.9
Phosphorus %	0.7	1.1	0.7	0.71	1.14	1.25	1.12	0.5	0.24	0.32	0.37	0.40	0.89
Magnesium %	0.08	0.11	0.08	0.06	0.07	0.13	0.14	0.09	0.035	0.09	0.09	0.08	0.07
Sodium %	0.5	0.7	0.5	0.8	0.4	0.5	0.4	0.2	0.05	0.2	0.3	0.6	0.5
Potassium %	0.8	1.4	0.8	0.9	0.8	0.7	1	0.5	0.27	0.6	0.5	0.9	0.9
Chloride %	0.6	1.4	0.6	0.4	0.7	0.6	0.8	0.8	-	0.2	0.2	0.6	0.7
Iron mg*	23.5	36	24	10	13	10	14	15	30	11.8	12.8	12.5	9
Copper mg*	1.8	2.5	1.8	2.4	2.9	1.5	1.2	1.9	1.7	1	2	2	1.4
Zinc mg*	17.6	24.3	17.6	51	22.9	16.3	12	13.5	60	16.2	16.6	17.5	14.3
Selenium mg	0.2	0.13	0.16	0.02	0.04	0.03	0.04	0.04	0.14	0.03	0.04	0.05	0.02
Vitamin A IU	20588	8571	20588	1961	7143	656	2280	11538	5500	4411.76	15142.86	20000	1250
Vitamin D3 IU	94	107	94	133	61	94	152	81	250	88	106	95	75
Vitamin E mg	82	71	82	47	52	58	60	58	250	74	60	75	71
Vitamin C mg	24	39	24	20	25	25	23	21	80	38	37	38	-
Vitamin B1 mg	0.6	7	1	0.4	1.1	0.9	4	3.9	10	1	1	1	5
Vitamin B2 mg	1.2	4	1	1	2	2	1	1	4	1	1	1	1
Vitamin B6 mg	0.3	0.6	0.3	0.2	0.4	0.3	0.4	0.4	1.5	0.3	0.3	0.4	0.4
Niacin mg	2.9	18	3	51	104	113	4	4	15	3	3	3	4
Pantothenic acid mg	3.5	6	4	16	17	17	2	4	11	3	3	3	4
Vitamin B12 mg	0.006	14	6	4	7	9	8	10	0.03	5.88	5.71	10	11
Folic acid mg	0.1	0.36	0.06	0.03	0.07	0.04	0.04	0.13	0.3	0.06	0.06	0.05	0.11
Biotin mg	0.01	50	18	12	179	172	24	38	0.12	14.71	28.57	25	32
Choline mg	441	564	441	196	250	331	200	173	700	279	283	300	196
L-carnitine mg	41	21	41	-	-	-	-	-	120	-	-	-	-
Chondroitin mg**	50	50	50	-	-	-	-	-	-	-	-	-	-
Polyphenols mg	-	-	-	-	-	-	-	-	-	-	-	-	-
ME kcal/kg***	602****	56.3****	60.2****	94.7	122	145.9	108.8	91.6	1382	158.4	158.7	95.2	128

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100g dry matter

wet

	URINARY S/O	CARDIAC	MOBILITY CCP	RECOVERY
Moisture %	80	73.5	78	72.5
Proteins %	30	30.6	36.4	50.9
Fat content %	27.5	26.8	25.9	22.5
Carbohydrate %	31	31.7	23.8	9.5
NFE %	32.5	34	27.3	13.1
Dietary fibre %	6.5	6	8.0	10.9
Crude fibre %	5	3.8	4.5	7.3
Crude ash %	5	4.9	5.9	6.2
Arginine %	1.4	2.6	2	2.5
Taurine %	0.63	0.83	0.55	0.56
EPA + DHA %	0.3	1.1	2.3	1.6
Calcium %	0.9	0.9	0.8	1.2
Phosphorus %	0.81	0.72	0.73	1.05
Magnesium %	0.16	0.15	0.09	0.07
Sodium %	0.7	0.2	0.4	0.6
Potassium %	0.7	0.9	0.8	0.8
Chloride %	0.8	0.4	0.6	0.7
Iron mg*	8	15	17	29
Copper mg*	1.5	3.4	1.7	1.8
Zinc mg*	9	18.9	16.4	21.8
Selenium mg	0.02	0.04	0.1	0.01
Vitamin A IU	1650	3887	22727	727
Vitamin D3 IU	70	106	89	116
Vitamin E mg	65	75	91	51
Vitamin C mg	-	26	41	24
Vitamin B1 mg	0.3	3.8	0.5	19.3
Vitamin B2 mg	1	2	1	2
Vitamin B6 mg	0.3	0.5	0.5	1.1
Niacin mg	3	7	2	20
Pantothenic acid mg	4	4	2	1
Vitamin B12 mg	5	11	6.82	16
Folic acid mg	0.04	0.23	0.05	0.47
Biotin mg	15	38	22.73	44
Choline mg	215	219	277	255
L-carnitine mg	-	90.6	-	-
Chondroitin mg**	-	-	-	-
Polyphenols mg	-	139.6	103.64	-
ME kcal/kg***	91.8	123.6	100	115.6

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

wet

	SATIETY WEIGHT MANAGEMENT	OBESEITY MANAGEMENT	DIABETIC LOW CARBOHYDRATE	HYPOALLERGENIC	SENSITIVITY Osteon & Res	SENSITIVITY Dent & Res	GASTRO INTESTINAL	GIRO INTESTINAL LOW FAT	HEPATIC	RENAL	RENAL LOW	RENAL	URINARY S/O
Proteins g	14.1	12.4	12.4	6.3	7	6.2	7.8	8.2	4.7	3.4	3.8	4.1	4.7
Fat content g	3.3	3.6	5.5	3.7	4.9	4.8	6	1.9	3	5.7	5.7	6.3	6.3
Carbohydrate g	5	3.7	2.3	11.7	7.8	8	5.6	13.5	15.1	10.3	10.1	8	8
NFE g	5	4.4	4.3	13.1	8.6	9.3	6	14.8	15.8	10.8	10.6	8.6	8.6
Dietary fibre g	5.3	2.5	5.4	3.5	1.6	1.6	1.7	3.2	2.2	1.3	1.4	1.3	1.8
Crude fibre g	3.3	1.78	3.44	2.11	0.82	0.34	1.38	1.86	1.45	0.76	0.95	0.74	1.17
Crude ash g	2.5	2.7	1.9	1.7	1.6	1.4	1.8	1.6	1.1	0.8	1.1	1.3	1.2
Arginine g	0.66	710	688	359	451	377	441	448	-	189	221	210	211
Taurine g	0.12	142	172	127	139	137	129	153	137	133	139	131	148
EPA + DHA g	0.1	178	14	211	230	158	74	22	-	95	95	95	266
Calcium g	0.23	0.36	0.41	0.2	0.34	0.33	0.32	0.26	0.25	0.11	0.16	0.16	0.19
Phosphorus g	0.2	0.28	0.34	0.19	0.26	0.27	0.26	0.14	0.17	0.07	0.08	0.08	0.2
Magnesium g	0.02	27	21	16	16	27	31	25	25	19	19	16	16
Sodium g	0.13	0.18	0.14	0.21	0.08	0.1	0.08	0.07	0.04	0.05	0.06	0.13	0.12
Potassium g	0.22	0.36	0.26	0.23	0.19	0.15	0.24	0.15	0.2	0.14	0.11	0.18	0.19
Chloride g	0.17	0.34	0.19	0.11	0.16	0.12	0.17	0.22	-	0.05	0.05	0.13	0.16
Iron mg*	6.64	9.1	5.5	2.6	3	2.3	3.2	4.4	2.2	2.5	2.8	2.6	2
Copper mg*	0.5	0.6	0.3	0.6	0.7	0.3	0.3	0.5	0.1	0.3	0.4	0.4	0.3
Zinc mg*	4.98	6	4.1	13.7	5.2	3.6	2.8	3.8	4.3	3.5	3.7	3.7	3.1
Selenium mg	0.05	32	41	6	8	6	9	11	10	6	9	9	4
Vitamin A IU	5813.95	2131	688	528	1639	144	524	3275	398	947	3340	4202	273
Vitamin D3 IU	26.58	26.6	20.6	35.9	13.9	20.6	34.9	22.9	18.1	18.9	23.3	20	16.4
Vitamin E mg	23.26	17.8	16.5	12.7	11.9	12.7	13.8	16.4	18.1	15.8	13.2	15.8	15.6
Vitamin C mg	6.64	9.8	5.8	5.3	5.7	5.5	5.3	6	5.8	8.2	8.2	7.9	-
Vitamin B1 mg	0.17	1.8	0.4	0.1	0.2	0.2	0.9	1.1	0.7	0.3	0.3	0.1	1.1
Vitamin B2 mg	0.33	0.9	0.4	0.2	0.4	0.3	0.2	0.3	0.3	0.2	0.2	0.2	0.2
Vitamin B6 mg	0.08	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Niacin mg	0.83	4.4	2.1	13.7	23.8	24.7	0.9	1.1	1.1	0.6	0.6	0.6	0.8
Pantothenic acid mg	1	1.6	1.4	4.2	3.9	3.8	0.5	1.1	0.8	0.6	0.6	0.6	0.8
Vitamin B12 mg	0.002	3.6	4.8	1.1	1.6	1.9	1.8	2.7	1.8	1.3	1.3	2.1	2.3
Folic acid mg	0.02	89	62	7	16	10	9	38	22	13	13	11	23
Biotin mg	0.005	12.4	9.6	3.2	41	37.7	5.5	10.9	8.7	3.2	6.3	5.3	7
Choline mg	124.58	140	103	53	57	73	46	49	51	60	62	63	43
L-carnitine mg	12	5.3	6.2	-	-	-	-	-	8.7	-	-	-	-
Chondroitin mg**	14	12.4	-	-	-	-	-	-	-	-	-	-	-
Polyphenols mg	-	-	-	-	-	-	-	-	-	-	-	-	-
ME kcal/kg***	602****	563****	727	947	1220	1459	1088	916	1382	1584	1587	952	1280

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

wet

	URINARY S/O	CARDIAC	MOBILITY CCPA	RECOVERY
Proteins g	6.5	6.6	8.0	12.1
Fat content g	6	5.7	5.7	5.4
Carbohydrate g	6.8	6.8	5.2	2.2
NFE g	7.1	7.3	6.0	3.1
Dietary fibre g	1.4	1.3	1.8	2.6
Crude fibre g	1.09	0.81	1.00	1.73
Crude ash g	1.1	1.1	1.3	1.5
Arginine g	305	566	450	606
Taurine g	136	178	120	134
EPA + DHA g	54	243	500	389
Calcium g	0.2	0.19	0.18	0.28
Phosphorus g	0.18	0.15	0.16	0.25
Magnesium g	33	32	20	17
Sodium g	0.15	0.04	0.09	0.14
Potassium g	0.15	0.19	0.18	0.18
Chloride g	0.18	0.08	0.13	0.17
Iron mg*	1.7	3.2	3.8	6.9
Copper mg*	0.3	0.7	0.4	0.4
Zinc mg*	2	4	3.6	5.2
Selenium mg	3	8	21	3
Vitamin A IU	359	833	5000	173
Vitamin D3 IU	15.3	22.7	19.5	27.7
Vitamin E mg	14.2	16.2	20.0	12.1
Vitamin C mg	-	5.5	9.0	5.6
Vitamin B1 mg	0.1	0.8	0.1	4.6
Vitamin B2 mg	0.2	0.3	0.2	0.4
Vitamin B6 mg	0.1	0.1	0.1	0.3
Niacin mg	0.5	1.5	0.5	4.8
Pantothenic acid mg	0.8	0.8	0.5	0.3
Vitamin B12 mg	1.1	2.4	1.5	3.9
Folic acid mg	8	49	0.01	112
Biotin mg	3.3	8.1	5.0	10.4
Choline mg	47	47	61	61
L-carnitine mg	-	19.4	-	-
Chondroitin mg**	-	-	-	-
Polyphenols mg	-	29.9	22.80	-
ME kcal/kg***	918	1236	1000	1156

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

1 - Weight management

dry				
	SATIETY LOW CHOLOS	SATIETY LOW CHOLOS	OBESEITY MANAGEMENT	WEIGHT CONTROL
Proteins g	11.2	11.3	10.9	9.1
Fat content g	3.5	3.6	3.2	3
Carbohydrate g	10.6	10.6	6.7	8.2
NFE g	10.6	10.6	10.1	11.4
Dietary fibre g	10.5	10.4	5.8	5.3
Crude fibre g	6.3	6	2.4	2
Crude ash g	2.2	2.6	2.4	1.92
Arginine g	0.55	0.57	0.6	0.52
Taurine g	0.07	0.08	87	60
EPA+DHA g	0.15	0.11	0.04	0.06
Calcium g	0.34	0.35	0.46	0.34
Phosphorus g	0.27	0.28	0.33	0.24
Magnesium g	0.05	0.05	32	20
Sodium g	0.11	0.26	0.16	0.15
Potassium g	0.34	0.3	0.32	0.21
Chloride g	0.34	0.5	0.3	0.26
Iron mg*	5.15	4.96	6.6	6.5
Copper mg*	0.56	0.56	0.48	0.46
Zinc mg*	6.35	6.39	6.6	5.9
Selenium mg	0.01	0.01	11	4.6
Vitamin A IU	802.84	751.31	738	761
Vitamin D3 IU	37.34	37.57	35.3	30
Vitamin E mg	28.01	30.43	27.3	18
Vitamin C mg	12.32	12.4	16.0	6
Vitamin B1 mg	0.68	0.63	0.6	0.13
Vitamin B2 mg	2.52	2.36	2.3	0.12
Vitamin B6 mg	1.12	1.04	1.0	0.81
Niacin mg	8.4	7.91	7.1	0.46
Pantothenic acid mg	2.28	2.11	2.1	1.05
Vitamin B12 mg	0.01	0.01	6.4	2.13
Folic acid mg	0.18	0.17	0.17	0.27
Biotin mg	0.07	0.07	67.1	84
Choline mg	126.96	112.7	64	51.8
L-carnitine mg	12.14	12.21	10.6	60
Chondroitin+glucosamine mg	74.68	37.57	32	15
Polyphenols mg	-	-	-	-
Metabolisable energy (C) kcal/kg**	2678***	2662***	3116***	3285

wet

SATIETY WEIGHT MANAGEMENT	OBESEITY MANAGEMENT
14.1	12.4
3.3	3.6
5	3.7
5	4.4
5.3	2.5
3.3	1.78
2.5	2.7
0.66	710
0.12	142
0.1	178
0.23	0.36
0.2	0.28
0.02	27
0.13	0.18
0.22	0.36
0.17	0.34
6.64	9.1
0.5	0.6
4.98	6
0.05	32
5813.95	2131
26.58	26.6
23.26	17.8
6.64	9.8
0.17	1.8
0.33	0.9
0.08	0.2
0.83	4.4
1	1.6
0.002	3.6
0.02	89
0.005	12.4
124.58	140
12	5.3
14	12.4
-	-
602***	563***

2 - Diabetes mellitus

dry

	DIABETIC LOW CHOLOS
Proteins g	10.7
Fat content g	3.5
Carbohydrate g	5.5
NFE g	8.7
Dietary fibre g	5
Crude fibre g	1.86
Crude ash g	1.51
Arginine g	0.56
Taurine mg	60
EPA+DHA g	0.09
Calcium g	0.26
Phosphorus g	0.21
Magnesium mg	20
Sodium g	0.09
Potassium g	0.2
Chloride g	0.19
Iron mg*	6
Copper mg*	0.44
Zinc mg*	4.9
Selenium µg	8.7
Vitamin A IU	493
Vitamin D3 IU	29
Vitamin E mg	17
Vitamin C mg	8.7
Vitamin B1 mg	0.12
Vitamin B2 mg	0.11
Vitamin B6 mg	0.24
Niacin mg	0.44
Pantothenic acid mg	0.73
Vitamin B12 µg	2
Folic acid mg	0.02
Biotin µg	31
Choline mg	58
L-carnitine mg	58
Chondroitin+glucosamine mg	-
Polyphenols mg	-
Metabolisable energy (C) kcal/kg**	3447

wet

	DIABETIC LOW CHOLOS
12.4	
5.5	
2.3	
4.3	
5.4	
3.44	
1.9	
0.69	
172	
0.01	
0.41	
0.34	
21	
0.14	
0.26	
0.19	
5.5	
0.3	
4.1	
41	
688	
20.6	
16.5	
5.8	
0.4	
0.4	
0.1	
2.1	
1.4	
4.8	
0.06	
9.6	
103	
6.2	
-	
-	
727	

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

3 - Adverse reaction to food

dry

	ANALLERGENIC	HYPOALLERGENIC	HYPOALLERGENIC SMALL DOGS	HYPOALLERGENIC SMALL DOGS under 10 kg	SENSITIVITY CONTROL
Proteins g	4.6	5.3	6.2	6.3	6.3
Fat content g	4.3	4.8	3.2	4.2	2.7
Carbohydrate g	11.4	9.2	11.5	9.5	13
NFE g	12.4	10.3	12.7	10.4	14.6
Dietary fibre g	1.5	1.4	1.5	1.1	2.9
Crude fibre g	0.57	0.25	0.3	0.18	1.32
Crude ash g	2.27	2.1	2.03	2.55	2.15
Arginine g	0.28	0.38	0.46	0.46	0.41
Taurine g	54	52	54	55	90
EPA+DHA g	0.05	0.08	0.1	0.09	0.1
Calcium g	0.26	0.25	0.22	0.26	0.44
Phosphorus g	0.21	0.2	0.16	0.21	0.27
Magnesium g	13	20	14	18	15
Sodium g	0.26	0.12	0.11	0.26	0.12
Potassium g	0.31	0.25	0.22	0.23	0.21
Chloride g	0.27	0.13	0.12	0.3	0.19
Iron mg*	5.7	4.6	5.8	5.1	6.1
Copper mg*	0.39	0.37	0.41	0.39	0.45
Zinc mg*	5.4	6.1	6.4	6.5	7.1
Selenium mg	2.8	3	3.5	2.6	3.9
Vitamin A IU	798	775	810	807	987
Vitamin D3 IU	20	20	19	21	24
Vitamin E mg	15	15	16	16	18
Vitamin C mg	5	5	5	5	6
Vitamin B1 mg	0.72	0.68	0.69	0.71	0.82
Vitamin B2 mg	1.3	1.22	1.25	1.28	1.48
Vitamin B6 mg	2	1.9	1.94	1.99	2.3
Niacin mg	13	12.1	12.4	12.8	14.7
Pantothenic acid mg	3.9	3.7	3.7	3.8	4.4
Vitamin B12 mg	3.6	3.5	3.5	3.6	4.1
Folic acid mg	0.36	0.34	0.35	0.36	0.41
Biotin mg	82	77	79	81	93
Choline mg	51	52	54	55	60
L-carnitine mg	-	-	-	-	-
Chondroitin+glucosamine mg	-	-	-	-	-
Polyphenols mg	-	-	-	-	-
Metabolisable energy (C) kcal/kg**	3884	4002	3703	3841	3344

wet

HYPOALLERGENIC	SENSITIVITY Chicken & Rice	SENSITIVITY Duck & Rice
6.3	7	6.2
3.7	4.9	4.8
11.7	7.8	8
13.1	8.6	9.3
3.5	1.6	1.6
2.11	0.82	0.34
1.7	1.6	1.4
0.36	0.45	0.38
127	139	137
0.21	0.23	0.16
0.2	0.34	0.33
0.19	0.26	0.27
16	16	27
0.21	0.08	0.1
0.23	0.19	0.15
0.11	0.16	0.12
2.6	3	2.3
0.6	0.7	0.3
13.7	5.2	3.6
6	8	6
528	1 639	144
35.9	13.9	20.6
12.7	11.9	12.7
5.3	5.7	5.5
0.1	0.2	0.2
0.2	0.4	0.3
0.1	0.1	0.1
13.7	23.8	24.7
4.2	3.9	3.8
1.1	1.6	1.9
0.01	0.02	0.01
3.2	41	37.7
53	57	73
-	-	-
-	-	-
-	-	-
947	1220	1459

4 - Dermatitis and hair loss

dry

SKIN CARE	SKIN CARE SMALL DOGS	SKIN CARE JUNIOR SMALL DOGS	SKIN SUPPORT
5.9	6.3	7.2	6.3
4.1	4.1	4.9	4.1
9.9	9.5	6.7	10.1
11.3	10.7	8	11.2
1.9	1.6	1.7	2
0.49	0.33	0.47	0.93
1.46	1.5	1.83	2.3
0.22	0.24	0.3	0.42
54	51	52	126
0.11	0.1	0.1	0.16
0.19	0.18	0.3	0.33
0.15	0.15	0.22	0.27
13	13	17	22
0.08	0.1	0.1	0.11
0.18	0.18	0.25	0.22
0.15	0.14	0.13	0.16
3.4	3.1	2.8	6.1
0.38	0.38	0.37	0.41
6.2	6	5.6	6.5
4.6	4.1	4.2	8.2
821	811	815	877
21	20	20	22
16	15	15	16
5	5	5	8
0.71	0.7	0.67	0.75
1.27	1.26	1.21	1.35
1.98	1.96	1.88	2.1
12.6	12.5	12.1	13.4
3.8	3.8	3.6	4
3.6	3.5	3.5	3.8
0.36	0.35	0.34	0.38
81	80	76	85
51	51	44	55
-	-	-	-
-	-	-	-
-	-	-	-
3900	3945	4048	3648

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

5 - Gastro-intestinal disorders

dry

	GAstro INTESTINAL dry 24	GAstro INTESTINAL dry 24	GAstro INTESTINAL dry 24	GAstro INTESTINAL dry 24	FIBRE dry 24
Proteins g	6.9	6.1	6.4	6.4	7.3
Fat content g	5.2	4.9	3	2	5
Carbohydrate g	6.3	8	11.9	13.4	7.5
NFE g	7.5	9.1	13.2	15.4	10.4
Dietary fibre g	1.4	1.5	1.9	2.5	6.5
Crude fibre g	0.3	0.4	0.6	0.5	3.5
Crude ash g	1.9	1.7	1.7	1.9	2.3
Arginine g	0.4	0.4	0.4	0.4	0.4
Taurine g	50	49	55	61	63
EPA+DHA g	0.07	0.07	0.06	0.04	0.09
Calcium g	0.28	0.28	0.28	0.32	0.34
Phosphorus g	0.24	0.24	0.25	0.24	0.28
Magnesium g	19	22	25	29	25
Sodium g	0.09	0.1	0.11	0.12	0.09
Potassium g	0.21	0.17	0.19	0.2	0.25
Chloride g	0.1	0.1	0.2	0.2	0.2
Iron mg*	5.8	4.5	4.8	5.3	5.9
Copper mg*	0.36	0.37	0.41	0.43	0.47
Zinc mg*	5.3	5.5	6.1	6.5	6.8
Selenium mg	8	8	8	7	8
Vitamin A IU	450	466	525	579	600
Vitamin D3 IU	23.7	24.5	27.7	28.9	31.6
Vitamin E mg	14.2	14.7	16.6	17.4	18.9
Vitamin C mg	7.1	7.4	8.3	8.7	9.5
Vitamin B1 mg	0.1	0.1	0.1	0.1	0.1
Vitamin B2 mg	0.1	0.1	0.1	0.1	0.1
Vitamin B6 mg	0.2	0.2	0.2	0.2	0.3
Niacin mg	0.4	0.4	0.4	0.4	0.5
Pantothenic acid mg	0.6	0.6	0.7	0.7	0.8
Vitamin B12 mg	1.7	1.7	1.9	2	2.2
Folic acid mg	0.02	0.02	0.02	0.03	0.03
Biotin mg	25.8	26.5	30.4	32.1	33.8
Choline mg	38	37	41	52	47
L-carnitine mg	-	-	-	-	-
Chondroitin+glucosamine mg	-	-	-	-	-
Polyphenols mg	-	-	-	-	-
Metabolisable energy (C) kcal/kg**	4224	4074	3616	3456	3169

wet

GAstro INTESTINAL wet 24	GAstro INTESTINAL wet 24
7.8	8.2
6	1.9
5.6	13.5
6	14.8
1.7	3.2
1.38	1.86
1.8	1.6
0.44	0.45
129	153
0.07	0.02
0.32	0.26
0.26	0.14
31	25
0.08	0.07
0.24	0.15
0.17	0.22
3.2	4.4
0.3	0.5
2.8	3.8
9	11
524	3 275
34.9	22.9
13.8	16.4
5.3	6
0.9	1.1
0.2	0.3
0.1	0.1
0.9	1.1
0.5	1.1
1.8	2.7
0.01	0.04
5.5	10.9
46	49
-	-
-	-
-	-
-	-
1088	916

6 - Liver disease

dry

	HEPATIC dry 24	HEPATIC wet 24
Proteins g	4.1	4.7
Fat content g	4.1	3
Carbohydrate g	12	15.1
NFE g	13.3	15.8
Dietary fibre g	1.8	2.2
Crude fibre g	0.5	1.45
Crude ash g	1.2	1.1
Arginine g	0.3	-
Taurine mg	54	137
EPA+DHA g	0.05	-
Calcium g	0.18	0.25
Phosphorus g	0.13	0.17
Magnesium mg	20	25
Sodium g	0.05	0.04
Potassium g	0.23	0.2
Chloride g	0.1	-
Iron mg*	4.2	2.2
Copper mg*	0.1	0.1
Zinc mg*	6.1	4.3
Selenium µg	9	10
Vitamin A IU	486	398
Vitamin D3 IU	25.6	18.1
Vitamin E mg	15.4	18.1
Vitamin C mg	5.1	5.8
Vitamin B1 mg	0.1	0.7
Vitamin B2 mg	0.1	0.3
Vitamin B6 mg	0.2	0.1
Niacin mg	0.4	1.1
Pantothenic acid mg	0.7	0.8
Vitamin B12 µg	1.8	1.8
Folic acid mg	0.02	0.02
Biotin µg	28.2	8.7
Choline mg	54	51
L-carnitine mg	7.68	8.7
Chondroitin+glucosamine mg	28	-
Polyphenols mg	-	-
Metabolisable energy (C) kcal/kg**	3906	1382

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

7 - Renal disease

dry	wet		
	RENAL	RENAL	RENAL
Proteins g	3.5	3.5	3.2
Fat content g	4.5	4.1	4.5
Carbohydrate g	11.8	12.5	12
NFE g	13.1	14	13.4
Dietary fibre g	1.9	2.1	2
Crude fibre g	0.6	0.6	0.6
Crude ash g	1	1.1	1.2
Arginine g	0.1	0.2	0.2
Taurine g	48	49	48
EPA+DHA g	0.12	0.12	0.12
Calcium g	0.10	0.15	0.15
Phosphorus g	0.05	0.08	0.07
Magnesium g	23	26	25
Sodium g	0.09	0.09	0.09
Potassium g	0.15	0.15	0.15
Chloride g	0.2	0.2	0.2
Iron mg*	2.8	3.2	3.5
Copper mg*	0.4	0.4	0.4
Zinc mg*	4.2	4.5	4.9
Selenium mg	2	3	3
Vitamin A IU	426	437	404
Vitamin D3 IU	25.1	25.7	25.2
Vitamin E mg	15	15.4	15.1
Vitamin C mg	5	7.7	7.6
Vitamin B1 mg	0.1	0.1	0.1
Vitamin B2 mg	0.1	0.1	0.1
Vitamin B6 mg	0.2	0.2	0.2
Niacin mg	0.4	0.4	0.4
Pantothenic acid mg	0.6	0.6	0.6
Vitamin B12 mg	1.8	1.8	1.8
Folic acid mg	0.02	0.02	0.02
Biotin mg	26.5	27.5	27
Choline mg	60	62	61
L-carnitine mg	-	-	-
Chondroitin+glucosamine mg	-	-	-
Polyphenols mg	-	-	-
Metabolisable energy (C) kcal/kg**	3988	3886	3964

wet

RENAL	RENAL	RENAL
3.4	3.8	4.1
5.7	5.7	6.3
10.3	10.1	8
10.8	10.6	8.6
1.3	1.4	1.3
0.76	0.95	0.74
0.8	1.1	1.3
189	221	210
133	139	131
95	95	95
0.11	0.16	0.16
0.07	0.08	0.08
19	19	16
0.05	0.06	0.13
0.14	0.11	0.18
0.05	0.05	0.13
2.5	2.8	2.6
0.3	0.4	0.4
3.5	3.7	3.7
6	9	9
947	3340	4202
18.9	23.3	20
15.8	13.2	15.8
8.2	8.2	7.9
0.3	0.3	0.1
0.2	0.2	0.2
0.1	0.1	0.1
0.6	0.6	0.6
0.6	0.6	0.6
1.3	1.3	2.1
13	13	11
3.2	6.3	5.3
60	62	63
-	-	-
-	-	-
-	-	-
1584	1587	952

8 - Lower urinary tract disease

dry

URINARY S/O	URINARY S/O	URINARY S/O	URINARY U/O	URINARY S/O	URINARY S/O
SMALL DOG <= 10 kg	MODERATE CALORIES	MODERATE CALORIES	LOW PURINE	URINARY S/O	URINARY S/O
4.7	5.2	6	4.7	4.7	6.5
4.4	4.4	3.3	3.9	6.3	6
11.2	10.5	12.1	12.1	8	6.8
12.1	11.4	13.9	13.1	8.6	7.1
1.45	1.48	3.68	1.49	1.8	1.4
0.59	0.57	1.84	0.55	1.17	1.09
1.7	1.9	2.2	1.4	1.2	1.1
0.25	0.3	0.32	0.22	0.21	0.31
54	54	63	55	148	136
0.05	0.05	0.06	0.08	0.27	0.05
0.13	0.18	0.17	0.21	0.19	0.2
0.13	0.18	0.17	0.15	0.2	0.18
13	13	15	18	16	33
0.31	0.31	0.36	0.08	0.12	0.15
0.21	0.21	0.24	0.23	0.19	0.15
0.57	0.49	0.65	0.15	0.16	0.18
3.5	3.6	4	1.9	2	1.7
0.39	0.39	0.45	0.39	0.3	0.3
5.8	5.8	6.6	6	3.1	2
4.9	2.9	4.8	6.3	4	3
466	544	694	653	273	359
26	26	42	21	16.4	15.3
16	2.6	6	16	15.6	14.2
5	-	-	5	-	-
0.11	0.11	0.17	0.73	1.1	0.1
0.1	0.1	0.16	1.31	0.2	0.2
0.21	0.22	0.33	2.04	0.1	0.1
0.39	0.39	0.62	13.1	0.8	0.5
0.66	0.67	1.04	3.9	0.8	0.8
1.8	1.8	2.7	3.7	2.3	1.1
0.02	0.02	0.04	0.37	0.02	0.01
29	29	44	83	7	3.3
52	41	45	39	43	47
-	-	63	52	-	-
-	-	-	-	-	-
-	-	-	-	-	-
3866	3859	3314	3831	1280	918

*Part of these trace elements is chelated - **calculated (NRC2006) - ***NRC2006 TDF

ANALYSIS TABLE per 100kcal

9 - Heart failure			10 - Mobility		11 - Periods of adaptation	12 - Oral hyg.		13 - Convalescence		
dry		wet	dry	wet	dry	dry		instant		wet
	CARDIAC	CARDIAC	MOBILITY CSP*	MOBILITY CSP*	CALM CSP*	DENTAL CSP** SMALL 200g powder 10 kg		CONVALESCENCE SUPPORT	REHYDRATION SUPPORT	RECOVERY
Proteins g	6.3	6.6	7	8	6.5	5.7	6.7	9.1	1.4	12.1
Fat content g	4.8	5.7	3.4	5.7	4.1	4.2	4.3	5.2	-	5.4
Carbohydrate g	8.2	6.8	10.7	10.2	9.3	10.3	8.8	4	24.1	2.2
NFE g	9.1	7.3	12.3	6	10.5	11.8	10.6	4.3	24.1	3.1
Dietary fibre g	1.3	1.3	2.7	1.8	1.65	2.4	3	1	1	2.6
Crude fibre g	0.4	0.81	1.1	1	0.41	0.9	1.2	0.7	0.7	1.73
Crude ash g	1.2	1.1	1.6	1.3	1.9	1.3	1.5	1.3	1.5	1.5
Arginine g	0.4	0.57	0.4	0.5	0.4	0.3	0.3	0.6	-	0.61
Taurine g	82	178	53	120	77	52	75	140	-	134
EPA+DHA g	0.09	0.24	0.17	0.5	0.08	0.1	0.08	-	-	0.39
Calcium g	0.2	0.19	0.22	0.18	0.24	0.21	0.19	0.32	-	0.28
Phosphorus g	0.13	0.15	0.14	0.16	0.17	0.16	0.16	0.26	-	0.25
Magnesium g	36	32	22	20	21	16	19	11	-	17
Sodium g	0.03	0.04	0.11	0.09	0.23	0.1	0.19	0.09	0.27	0.14
Potassium g	0.19	0.19	0.22	0.18	0.16	0.17	0.17	0.15	0.27	0.18
Chloride g	0.1	0.08	0.3	0.13	0.35	0.2	0.3	0.1	0.7	0.17
Iron mg*	3.4	3.2	4.8	3.8	3.9	4.2	4	4.1	-	6.9
Copper mg*	0.36	0.7	0.42	0.4	0.39	0.39	0.4	0.47	0.41	0.4
Zinc mg*	4.6	4	5.3	3.6	6.2	6.2	6.3	3.1	-	5.2
Selenium mg	3	8	8	21	5.2	6	4	5	-	3
Vitamin A IU	531	833	476	5000	826	493	913	522	-	173
Vitamin D3 IU	19.3	22.7	28	19.5	21	28.6	26.9	39.5	-	27.7
Vitamin E mg	14.5	16.2	16.8	20	15	13	16.1	15.2	-	12.1
Vitamin C mg	7.2	5.5	8.4	9	5	7.8	8.1	5.4	-	5.6
Vitamin B1 mg	0.3	0.8	0.1	0.1	0.71	0.1	0.8	0.3	-	4.6
Vitamin B2 mg	1.2	0.3	0.1	0.2	1.28	0.1	1.3	0.3	-	0.4
Vitamin B6 mg	0.5	0.1	0.2	0.1	1.98	0.2	2.1	0.2	-	0.3
Niacin mg	3.8	1.5	0.4	0.5	12.7	0.4	13.2	2	-	4.8
Pantothenic acid mg	1.1	0.8	0.7	0.5	3.8	0.7	4.1	1.1	-	0.3
Vitamin B12 mg	3.4	2.4	2	1.5	3.6	2.1	4	3.2	-	3.9
Folic acid mg	0.09	0.05	0.02	0.01	0.36	0.02	0.38	0.02	-	0.11
Biotin mg	35	8.1	29.9	5.0	81	30.6	89.4	36.9	-	10.4
Choline mg	41	47	70	61	52	52	43	87	-	61
L-carnitine mg	20	19.4	-	-	-	-	1.34	1.09	-	-
Chondroitin+glucosamine mg	-	-	-	-	-	26	-	-	-	-
Polyphenols mg	30.3	29.9	21.8	22.8	-	18.2	18.8	-	-	-
Metabolisable energy (C) kcal/kg**	4143	1236	3574	1000	3875	3852	3723	4414	3442	1156

*Part of these trace elements is chelated - **calculated [NRC2006] - ***NRC2006 TDF

AVERAGE ANALYSIS per 100kcal

Multifunction

dry

	RENAL +	URINARY +	URINARY +	MOBILITY CORP +
	HYPOALLERGENIC	HYPOALLERGENIC	SATIETY	SATIETY
Proteins g	3.5	5.4	11.1	10.1
Fat content g	4.7	4	3.5	4.3
Carbohydrate g	11.6	10.9	6.3	6.2
NFE g	12.7	12.1	10	10.5
Dietary fibre g	1.7	1.9	9.9	10.1
Crude fibre g	0.6	0.6	6.2	5.9
Crude ash g	1	2.2	2.7	1.8
Arginine g	0.2	0.4	0.6	0.5
Taurine g	52	48	19	68
EPA+DHA g	0.12	0.1	0.11	0.18
Calcium g	0.07	0.14	0.31	0.28
Phosphorus g	0.04	0.13	0.26	0.14
Magnesium g	15	11	22	18
Sodium g	0.09	0.35	0.35	0.14
Potassium g	0.15	0.22	0.3	0.29
Chloride g	0.23	0.55	0.69	0.4
Iron mg*	3.1	4.3	4.6	4.3
Copper mg*	0.37	0.4	0.56	0.54
Zinc mg*	5.3	5.9	6.9	6.4
Selenium mg	6.2	6.7	-	9
Vitamin A IU	782	848	778	611
Vitamin D3 IU	20	24	37	36
Vitamin E mg	15	16	30	14
Vitamin C mg	7	-	-	9
Vitamin B1 mg	0.7	0.8	0.7	0.1
Vitamin B2 mg	1.3	1.4	2.4	0.1
Vitamin B6 mg	2	2.2	1.1	0.3
Niacin mg	12.8	14	7.4	0.5
Pantothenic acid mg	3.8	4.2	2.2	0.9
Vitamin B12 mg	3.7	4	7	2.5
Folic acid mg	0.36	0.4	0.18	0.03
Biotin mg	81	89	70	38.5
Choline mg	60	59	78	104
L-carnitine mg	-	-	-	-
Chondroitin+glucosamine mg	-	-	-	-
Polyphenols mg	-	-	-	21.9
Metabolisable energy (C) kcal/kg**	4030	3716	2699	2781***

*Part of these trace elements is chelated

**calculated (NRC2006)

***NRC2006 TDF

ANALYSIS TABLE AS FED

LIQUID

RECOVERY LIQUID

RENAL LIQUID

GI LOW FAT LIQUID

GI HIGH ENERGY LIQUID

Moisture (g/100 mL)	85	79.2	84.2	77.9
Proteins (g/100 mL)	8.2	5	9	9
Fat content (g/100 mL)	5.2	8	2	7
Carbohydrate (g/100 mL)	5.1	14	11.4	11.7
NFE (g/100 mL)	5.1	14	11.4	11.7
Crude fibre (g/100 mL)	0	0	0	2
Dietary fibre (g/100 mL)	0	0	0	2
Crude ash (g/100 mL)	1	1	1.2	1.4
Arginine (g/100 mL)	0.	0.17	0.55	1
Taurine (g/100 mL)	0.15	0.2	0.15	0.2
EPA + DHA (g/100 mL)	0.12	0.17	0.12	0.13
Calcium (g/100 mL)	0.2	0.16	0.21	0.28
Phosphorus (g/100 mL)	0.17	0.11	0.18	0.26
Magnesium (g/100 mL)	0.013	0.025	0.019	0.021
Sodium (g/100 mL)	0.1	0.13	0.1	0.19
Potassium (g/100 mL)	0.21	0.17	0.21	0.29
Chloride (g/100 mL)	0.13	0.25	0.15	0.28
Iron* (mg/1000mL)	28.5	40	29	40
Copper* (mg/1000mL)	2.7	4	2.6	4.1
Zinc* (mg/1000mL)	42	63	42	60
Selenium (µg/1000mL)	140	200	100	300
Vitamin A (IU/1000 mL)	3660	6700	3700	5000
Vitamin D3 (IU/1000 mL)	280	220	224	480
Vitamin E (mg/1000 mL)	160	230	181	250
Vitamin C (mg/1000 mL)	150	150	150	200
Vitamin B1 (mg/1000 mL)	1.6	1.5	1.1	1.9
Vitamin B2 (mg/1000 mL)	1.3	3.5	2.8	4.5
Vitamin B6 (mg/1000 mL)	1.3	1	1	1.2
Niacin (mg/1000 mL)	20	20	20	20
Pantothenic acid (mg/1000 mL)	4	10	10	10
Vitamin B12 (µg/1000mL)	10	22	16	26
Folic acid (mg/1000 mL)	0.8	1	0.8	1.2
Biotin (µg/1000mL)	30	80	60	80
Choline (mg/1000 mL)	750	1000	750	1000
Metabolisable energy** (kcal/L)	1040	1504	1035	1474

*Part of these trace elements is chelated - **NRC2006 TDF

ANALYSIS TABLE per 100kcal**

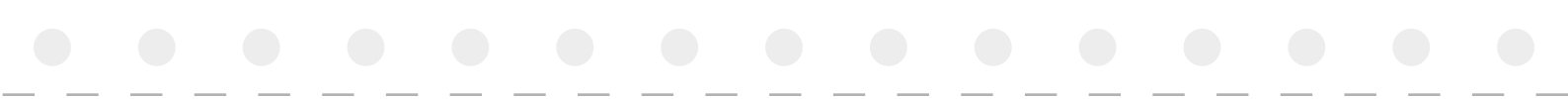
LIQUID

RECOVERY LIQUID	RENAL LIQUID	GI LOW FAT LIQUID	GI HIGH ENERGY LIQUID
--------------------	-----------------	----------------------	--------------------------

Proteins g	7.88	3.32	8.7	6.11
Fat content g	5	5.32	1,93	4.75
Carbohydrate g	4.9	9.31	11,01	7.94
NFE g	4.9	9.31	11,40	7.94
Crude fibre g	0	0	0	1.36
Dietary fibre g	0	0	0	1.36
Crude ash g	0.96	0.66	1,16	0.95
Arginine g	0.48	0.11	0,53	0.68
Taurine g	0.14	0.13	0,14	0.14
EPA + DHA g	0.12	0.11	0,12	0.09
Calcium g	0.19	0.11	0,20	0.19
Phosphorus g	0.16	0.07	0,17	0.18
Magnesium g	0.01	0.02	0,02	0.01
Sodium g	0.1	0.09	0,10	0.13
Potassium g	0.2	0.11	0,20	0.2
Chloride g	0.13	0.17	0,14	0.19
Iron mg*	2.74	2.66	2,80	2.71
Copper mg*	0.26	0.27	0,25	0.28
Zinc mg*	4.04	4.19	4,06	4.07
Selenium µg	13.46	13.3	10	20.35
Vitamin A IU	351.92	445.48	357,49	339.21
Vitamin D3 IU	26.92	14.63	21,64	32.56
Vitamin E mg	15.38	15.29	17,49	16.96
Vitamin C mg	14.42	9.97	14,49	13.57
Vitamin B1 mg	0.15	0.1	0,11	0.13
Vitamin B2 mg	0.12	0.23	0,27	0.31
Vitamin B6 mg	0.12	0.07	0,10	0.08
Niacin mg	1.92	1.33	1,93	1.36
Pantothenic acid mg	0.38	0.66	0,97	0.68
Vitamin B12 µg	0.96	1.46	0	1.76
Folic acid mg	0.08	0.07	0,08	0.08
Biotin µg	2.88	5.32	10	5.43
Choline mg	72.12	66.49	72,46	67.84

*Part of these trace elements is chelated - **NRC2006 TDF





This resource has been produced with the greatest care and incorporates the most up-to-date scientific information and research findings. We recommend that you refer to the data sheets and user instructions for drugs and diets, as they can change. Bearing in mind the diversity and complexity of clinical cases in dogs and cats, it is important to note that the suggestions in this resource for further tests and therapeutic options cannot be exhaustive. Under no circumstances should the treatments and dietary solutions suggested here replace examination by a veterinary surgeon.

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