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## Hydrocolloids in human digestion

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## **Accepted Manuscript**

Hydrocolloids in human digestion: Dynamic *in-vitro* assessment of the effect of food formulation on mass transfer

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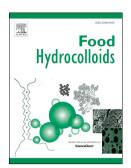
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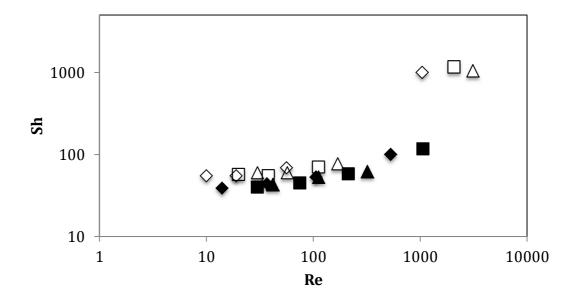
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An increasing Reynolds number (i.e decreasing viscosity) results in an increase of observed mass transfer coefficient

2 3 4	effect of food formulation on mass transfer
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27	Abstract
28	Over the last decade the effect of food formulation on digestion in healthy adults has
29	increasingly gained interest within the scientific community. The area requires
30	multidisciplinary skills from a wide range of fields including medical, chemical, and
31	engineering. In this work, we aim to develop simplified in-vitro intestinal models to study the
32	effect of mass transfer on food digestibility and nutrient bioaccessibility for a range of food
33	hydrocolloids. The models developed aim to mimic intestinal motility and focus on describing
34	phenomena occurring during digestion in the mm scale. Results indicate that hydrocolloids
35	have a significant effect in retarding simulated glucose accessibility, and the effects are
36	seemingly more pronounced (fivefold reduction in mass transfer and simulated glucose
37	absorption) at viscosities around 0.01Pa s. This indicates the potential to modulate glucose
57	

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40	1. Introduction
41	It is estimated that the food sector is currently responsible for one third (of a \$15 million total
42	market) of hydrocolloid applications worldwide [Seisun 2012]. Although primarily used as
43	texturing agents [Dickinson 2003; 2009; Saha & Bhattacharya, 2010; Funami 2011; Ramirez,
44	Uresti, & Velazquez, 2011], food hydrocolloids are increasingly being associated with a
45	number of important health benefits, including glycaemic and insulinaemic control in type-2
46	diabetes, weight management, and cardiovascular disease prevention [Jenkins, Wolever,
47	Leeds, Gassull, Haisman, Kilawari, Goff, Metz, & Alberti, 1978; Slavin 2005; Edwards & Garcia
48	2009; Dettmar, Strugala, Richardson, & 2011; Kendall, Esfahani, & Jenkins, 2010; Mills,
49	Spyropoulos, Norton, & Bakalis, 2011; Norton, Cox, & Spyropoulos, 2011; Gidley 2013;
50	Fiszman & Varela 2013; Bradbeer, Hancocks, Spyropoulos, & Norton, 2014]. These
51	functionalities are typically linked with the thickening, gelling, water sequestering, and
52	prebiotic properties of food hydrocolloids and their effect on food digestion [Doublier &
53	Cuvelier 2006; Edwards & Garcia 2009; Douaire & Norton 2013]. A possible mechanism of
54	action involves the resistance in mass transfer in the gut in the presence of hydrocolloids due
55	to the increased viscosity of the digested food. This may result in slower gastric emptying and
56	modulated nutrient absorption. However, the detailed mechanisms affecting nutrient
57	bioaccessibility and in particular the impact of hydrocolloids on mass transfer and food
58	digestion are currently not well understood [Gidley 2013; Fiszman & Varela 2013].
59	Quantifying human digestion is a challenging research area. Although the importance of
60	"artificial digestion" has long been appreciated [Sheridan Lea 1890], it is in the last decade
61	that there has been a significant increase in the use of <i>in-vitro</i> techniques [Guerra, Etienne-
62	Mesmin, Livrelli, Denis, Blanquet-Diot, & Alric, 2012; Hur, Lim, Decker, & McClements, 2011;
63	Woolnough, Morno, Brennan, & Bird, 2008]. <i>In-vitro</i> systems have been broadly classified into
64	'batch' and 'dynamic', depending on whether the temporal profile of in-vivo digestion (e.g.
65	fluid mixing, addition of simulated gut secretions and the removal of resulting digestion
66	products) is taken into account [Vieira,, Kirby, Ragueneau-Majlessi, Galetin, Chien, Einolf,
67	Fahmi, Fischer, Fretland, Grime, Hall, Higgs, Plowchalk, Ridley, Seibert, Skordos, Snoeys,
68	Venkatakrishnan, Waterhouse, Obach, Berglund, Zhang, Zhao, Reynolds, & Huang, 2013;
69	Guerra et al., 2012; Thomas, Herouet-Guichenev, Ladics, Bannon, Cockburn, Crevel,
70	Fit`Patrick, Mills, Privalle, & Vieths, 2007]. The typical 'batch' model consists of a series of
71	vessels, each of which simulates the digestive conditions (e.g. pH, enzymes, temperature,

12	biosurfactants, etc.) in different regions of the gut (e.g. mouth, stomach, small intestine, and
73	colon). Such systems have been used by Englyst, Veenstra, & Hudson [1996] to measure the
74	rapidly available glucose in plant foods and by Oomen, Tolls, Sips, & Van den Hoop [2003] to
75	assess the metabolism of lead into the digestive tract. Similar systems also include the
76	multiple-step pH-stat method that simulates a four-step digestion (oral, gastric, small, and
77	large intestinal phases) [McClements & Li, 2010] and De Boever, Deplancke & Verstraete's
78	[2000] five-step digestive model consisting of five double-jacketed vessels. Although these
79	models provide valuable information, they do not account for actions of the mechanical forces,
80	flow and mixing that might have an effect on the digestion kinetics.
81	Models with dynamic elements are typically application specific, and may include oral, gastric,
82	or intestinal digestion. Oral digestion is complex and difficult to mimic [Le Reverend, Gouseti,
83	& Bakalis, 2013]. Many investigators simplify this step and use commercial meat mincers to
84	simulate oral processing [Bornhorst & Singh 2013; Hoebler, Lecannu, Belleville, Deneaux,
85	Popineau, & Barry, 2002]. Others have developed models to study the effect of chewing
86	[Salles, Tarrega, Mielle, Paratray, Gorria, Liaboeuf, & Liodenot, 2007], tongue action
87	[Benjamin, Silcock, Beauchamp, Buettner, & Everett, 2012; Benjamin, Silcock, Kieser, Waddell,
88	Swain, & Everett, 2012], shearing [Lvova, Denis, Barra, Mielle, Salles, Vergoignan, Di Natale,
89	Paolesse, Temple-Boyer, & Feron, 2012] and compression [De Loubens, Panouille, Saint-Eve,
90	Deleris, Trelea, & Souchon, 2011; Mills et al., 2011] on oral digestion.
91	Dynamic gastric digestion models typically consider mechanical mixing of the bolus alongside
92	choosing the required physiological conditions (pH, mixing and flow, enzyme concentrations,
93	etc.). In the model of Kong and Singh [2008] mixing is achieved by the motion of small plastic
94	beads, which provide the required mechanical stresses on the food samples. In Chen, Gaikwad,
95	Holmes, Murray, Povey, Wang, & Zhag's [2011] model, mixing is generated using a spherical
96	probe with controlled vertical movement, positioned in the axial centre of a jacketed vessel.
97	The Dynamic Gastric Model (DGM), an apparatus that simulates gastric digestion using a
98	conical flexible walled vessel and a cylinder that processes the food at representative shear
99	rates, has recently been developed at the Institute of Food Research in Norwich UK [Lo Curto,
100	Pitino, Mandalari, Daintry, Fauls, & Wickham, 2011; Mercuri, Lo Curto, Wickham, Craig, &
101	Barker, 2008; Vardakou, Mercuri, Barker, Craig, Faulks, & Wickham, 2011; Wickham & Faulks
102	2012]. The DGM replicates the physical mixing, transit and breakdown forces in the stomach,
103	as well as the relevant physiological conditions (pH gradient and enzymes).

104	Intestinal models in which mixing conditions (segmentation and peristalsis) are an integral
105	part of the process are scarce in the literature. One such model has been reported by
106	Tharakan, Rayment, Fryer, & Norton [2007] and Tharakan, Norton, Fryer, & Bakalis [2010],
107	where segmentation is simulated by squeezing the flexible dialysis tube used to represent the
108	gut wall with the aid of two pneumatically controlled rubber cuffs. In this model, flow
109	conditions have shown to significantly affect simulated absorption rates of chemicals in water
110	as well as in guar gum solutions. The flow characteristics of a shear thinning fluid during
111	simulated peristaltic motion (squeezing of an elastic tube) have been experimentally
112	investigated by Nahar, Jeelani, & Windhab [2012].
112	In the mid 1000s TNO in the Notherlands introduced TNO intestinal model (TIM) s
113	In the mid-1990s, TNO in the Netherlands introduced TNO intestinal model (TIM), a
114	computer-controlled <i>in-vitro</i> digestive system, which represents the different sections of the
115	digestive tract (stomach, duodenum, jejunum, ileum, and colon) using different compartments
116	[Blanquet, Marol-Bonnin, Beyssac, Pompon, Renead, & Alric, 2001; Marteau, Minekus,
117	Havenaar, & Huis in't Veld, 1997; Minekus, Marteau, Havenaar, & Huisintveld,, 1995; Minekus,
118	Smeets-Peeters, Bernalier, Marol-Bonnin, Havenaar, Marteau, Alric, Fonty, & Huis in't Veld,,
119	1999]. Each compartment is equipped with a flexible membrane where simulated digestion
120	takes place, and two outer glass jackets that allow for both temperature and pressure control.
121	Today, two TIM models exist: TIM1 (stomach & small intestine) [Minekus et al.1995; Marteau
122	et al. 1997] and TIM2 (large intestine) [Minekus et al. 1999; Blanquet et al. 2001].
123	Models with both 'batch' and 'dynamic' elements have also been described in the literature.
124	For example, 'batch' gastric digestion has been combined with dialysis membranes in cell
125	wells [Argyri, Birba, Miller, Komaitis, & Kapsokefalou, 2009; Argyri, Theophanidi, Kapna,
126	Staikidou, Pounis, Komaitis, Georgiou, & Kapsokefalou, 2011] or dialysis bags [Bouayed,
127	Deuber, Hoffmann, & Bohn, 2012] to simulate absorption of chemicals through the small
128	intestinal wall. In some other systems, peristaltic pumps have been used to control flow of
129	digested foods and related secretions for adults [Mainville, Arcand, & Farnworth, 2005;
130	Savalle, Miranda, & Pelissier, 1989] and infants [Menard, Cattenoz, Guillemin, Souchon,
131	Deglaire, Dupont, & Picque, 2014].
132	Overall, there is evidence that the dynamic nature of human digestion is important in
133	determining digestibility of foods. In particular, flow and mixing in the gut may significantly
134	affect digestive processes, however the link between mass transfer and food digestion is still a

135	largely unexplored area. In this framework, we have developed <i>in-vitro</i> models that simulate
136	gut wall contractions with the aim to investigate the effect of gut motility on the accessibility
137	of glucose from model solutions, using a range of food hydrocolloids (guar gum, CMC, pectin).
138	We have analysed our data using engineering principles and dimensionless numbers that
139	characterise the flow (Reynolds number) and mass transfer (Sherwood number) in the gut.
140	We have found that irrespective of the hydrocolloid used or the segmentation patterns
141	applied, the relationship between Reynolds and Sherwood numbers of all investigated
142	digestive conditions and for all model chyme solutions superimposes to a single line. As
143	Reynolds number increased and the flow became less laminar, mass transfer was enhanced.
144	The transition of flow regime was observed at solutions with viscosities of the order of 0.1Pa
145	s, which correlates well with results reported by Tharakan et al. [2010]. This viscosity value is
146	within the range of luminal viscosities reported from animal studies [Ellis, Roberts, Low, &
147	Morgan, 1995]. Systems with lower viscosities (higher Reynolds number) showed enhanced
148	mass transfer levels. It is noted that guar gum is a commonly used, relatively inexpensive
149	(\$0.83/lb; \$1.83/kg [Seisun 2012]) and highly acceptable by consumers [Varela & Fiszman
150	2013] hydrocolloid, which has been shown to reduce postprandial blood glucose levels in-vivo
151	[Jenkins et al. 1978].

## 2. MATERIALS AND METHODS

## 2.1 Sample preparation

Model 1% wt/vol (55mM) glucose (D-(+)-glucose by Sigma-Aldrich, UK) solutions of different viscosities were used in this study to evaluate the effect of mass transfer in simulated glucose absorption. This concentration approximates the glucose content of a cup of coffee with half a sachet of sugar added and it is 10 times higher than the homeostatic blood glucose levels. Viscosity was adjusted by addition of different hydrocolloids (guar gum, pectin, carboxymethyl cellulose (CMC)). Distilled water was used in all experiments. Guar gum (105008, ICN Biomedicals, USA for the SIM experiments and Sigma-Aldrich, UK for the DDuo experiments) and pectin (degree of esterification 7680) by Fluka, UK were added slowly into stirred glucose solutions and heated to 80°C for 5min. CMC (Sigma-Aldrich, UK, C5013) was also added slowly into stirred glucose solutions but was more moderately heated (60°C for 10min). Mixtures were left to fully hydrate overnight at room temperature under mixing with

166	an overhead stirrer and were further used within 24h. Viscosity was measured using
167	rotational rheometer with cone/plate geometry prior to the experiments (Figure 1).
168	2.2 In-vitro Models: SIM and DDuo
169	2.2.1 Model description
170	The Small Intestinal Model (SIM) used in this work has been developed at the School of
171	Chemical Engineering, University of Birmingham and has been described in detail elsewhere
172	[Tharakan 2008; Jaime Fonseca 2011]. The model (schematic of Figure 2) consists of an inner
173	dialysis tube (Spectre/Por 7®, MWCO 8kDa) that represents the intestinal lumen (diameter of
174	32mm, characteristic of the average adult human small intestine [Schmutz, Le Pennec, Dede, &
175	Perdriel,, 2005]), and an outer, concentric, impermeable silicone tube (Flexible Hose supplies,
176	UK, 50mm diameter, 3mm thickness) that borders the outer (recipient) zone. Large pore size
177	(8kDa) was selected to minimise the resistance of mass transfer incurred by the membrane. In
178	a typical experiment, chyme enters from one end of the lumen (feed) and may recirculate with
179	the aid of a peristaltic pump. The recipient fluid (initially distilled water) is also re-circulating
180	and passes through a collection jar, which allows sampling as required. Gut motility is
181	simulated by the pneumatically controlled inflating-deflating motion of two rubber cuffs. Cuff
182	inflation causes squeezing of the tubes, which simulates gut wall contractions. Deflation
183	releases the squeezing pressure and allows the tubes to retrieve their initial cylindrical shape.
184	In the present work, $1\%$ wt/vol ( $55$ mM) glucose solutions with or without the addition of
185	hydrocolloids (guar gum, CMC, pectin) were used as model 'chyme' systems and the glucose
186	collected in the recipient zone was measured (DNS method, section 2.3) over time.
187	A second, improved in-vitro model (Dynamic Duodenum, DDuo) has recently been developed
188	and initial results are also presented here. The new model implements a more automated and
189	flexible design, with the aim to allow for a more systematic investigation of the effect of
190	peristaltic and segmentation motions on digestion. The DDuo (schematic of Figure 3) uses the
191	same twin tube concept as the SIM, where the small active chemical passes through the pores
192	of a dialysis membrane from the chyme (lumen) to the recipient zone. A fixed secretions port
193	designed for injection of intestinal secretions (such as pancreatic and hepatic fluids) is located
194	100mm away from the feeding end. This is representative of the average distance between the
195	pylorous and the emptying of the pancreatic duct (at the major duodenal papilla) in humans
196	[Kong, Kim, Hyun, Cho, Keum, Jeen, Lee, Chun, Um, Lee, Choi, Kim, Ryu, & Hyun, 2006].

197	Segmentation and peristaltic motions are achieved by squeezing of the membrane at 8
198	independently controlled segmenting positions.
199	It is noted that the models have been specifically designed for studying engineering aspects
200	(mass transfer) of human digestion, which is scarce in the open literature. So far, the effects of
201	other physiological conditions, such as nutrient transportation through the gut membrane or
202	feedback mechanisms, are not represented.
203	2.2.2. Methods
204	Unless otherwise stated, the two cuffs of the SIM operated in sequence (one after the other),
205	in cycles of 6s (2s inflation time, 2s deflation time, 2s delay time), performing 10 cycles per
206	minute (cpm) in total. The effect of mixing (segmentation / no segmentation) on simulated
207	glucose absorption was studied for the systems detailed Table 1 (zero-shear viscosity also
208	shown). The ends of the dialysis tubing were closed and no chyme recirculation occurred
209	(closed configuration). Experiments were conducted in triplicates and the average with error
210	bars is shown in the graphs.
211	The effect of segmentation frequency on simulated glucose absorption was studied for the
212	systems detailed in Table 2 using the open configuration, where chyme re-circulated at
213	$1.6x10^{-4}m^3s^{-1}$ with the aid of a peristaltic pump. Cuffs operated at cycles of 3s, 6s, and 9s with
214	equal inflation, deflation, delay intervals of 1s (20cpm), 2s (10cpm) and 3s (5cpm),
215	respectively. Glucose increase in the recipient zone was determined using the DNS method,
216	described in section 2.3. Experiments were conducted in triplicates and the average with
217	error bars is shown in the graphs.
218	Initial experiments with the DDuo were performed using $1\%$ w/w glucose solutions with or
219	without addition of $1\%$ guar gum as model chyme systems. Unless otherwise stated,
220	segmentation occurred at 4 positions (blue arrows in Figure 3), alternating (with the black
221	arrows in Figure 3) every 10s. Although further work is required for conclusions to be
222	reached, initial results are included here to indicate the potential of the new model and how it
223	compares with the SIM.
224	2.3 Sample analysis: DNS
225	Samples from the recipient side were analysed using the dinitrosalicylic acid (DNS) method
226	for reducing sugars [Jaime-Fonseca, 2011; Miller 1959]. Equal volumes (1mL) of sample (or

- water as reference system) and DNS reagent (0.1% dinitrosalicylic acid; 30% w/w potassium sodium tartrate; 0.4M NaOH) were added in a test tube, mixed, and placed in boiling water for 5min. The resultant products were immediately cooled to room temperature and measured spectrophotomercially at 540nm.
- 231 **2.4. Data analysis**
- 232 2.4.1 Mass Transfer Coefficients
- 233 Mass transfer coefficients were determined as described previously [Tharakan *et al.*, 2007;
- Tharakan *et al.*, 2010; Jaime-Fonseca, 2011]. A typical graph of glucose absorption in the
- recipient zone over time is shown in Figure 4 and is used to estimate mass transfer in the
- 236 model gut. The molar flux across the membrane is calculated using equations 1 and 2. The
- overall mass transfer coefficient ( $K_{overall}$ ) is then obtained from equation 3.

$$239 A = 2 \cdot \pi \cdot r \cdot L (1)$$

$$240 M_T = \frac{mol_{glucose}}{A \cdot t} (2)$$

$$241 K_{overall} = \frac{M}{AC} (3)$$

- 242
- 243 where r is the membrane radius (m), L is the length (m), A is the total absorbing surface area
- $(m^2)$ ,  $mol_{glucose}$  is the glucose in the recipient side (mol),  $M_T$  the total molar flux  $(mol m^{-2}s^{-1})$ ,
- $\Delta C$  is the concentration difference (mol m<sup>-3</sup>) between the two sides of the membrane (taken as
- the initial concentration difference of 0.055M, assumed to change insignificantly within the
- 247 experimental time), and K<sub>overall</sub> is the overall mass transfer coefficient (m s<sup>-1</sup>).
- 248 Detection of a glucose molecule requires transportation from the lumen to the dialysis
- membrane, passing through the membrane, and transfer to the recipient fluid. This three-
- stage process is characterised by the luminal mass transfer coefficient, (K<sub>lumen</sub>, m s<sup>-1</sup>), diffusion
- (described by coefficient D<sub>membrane</sub>, m<sup>2</sup> s<sup>-1</sup>) through the membrane of thickness Z<sub>membrane</sub> (m),
- and the recipient side's mass transfer coefficient ( $K_{rec}$ , m s<sup>-1</sup>). Equation 4 gives the relationship
- between the local and overall transfer coefficients (K<sub>system</sub> is the combined mass transfer
- 254 through the membrane and the recipient zone, m s<sup>-1</sup>).

$$\frac{1}{K_{overall}} = \frac{1}{K_{lumen}} + \frac{Z_{membrane}}{D_{membrane}} + \frac{1}{K_{rec}} = \frac{1}{K_{lumen}} + \frac{1}{K_{system}}$$
(4)

2	_	7	
Z	ว	/	

- 258 To determine K<sub>lumen</sub> of the investigated chyme samples, it is first necessary to estimate K<sub>system</sub>, 259 which is assumed constant for all the experiments. This was achieved from experiments that 260 minimise resistance to mass transfer at the lumen side (maximise K<sub>lumen</sub>), so that 1/K<sub>lumen</sub> 261 would be much smaller than 1/K<sub>System</sub>. To minimise resistance in the luminal side, an 262 increasing flow rate was applied in the inner tube, which was filled with 1% glucose in water
- 263 until no significant increase in K<sub>overall</sub> was observed. This value (estimated at 5.3x10<sup>-7</sup> m s<sup>-1</sup>,
- 264 Tharakan, 2008) was taken as K<sub>system</sub>.
- 265 2.4.2 Reynolds and Sherwood numbers
- 266 The dimensionless Reynolds (Re) and Sherwood (Sh) numbers were estimated from
- 267 equations 5 and 6, to further characterise mass transfer and study the relative importance of
- 268 convective and diffusive processes in the model gut.

269

$$Re = \frac{\rho u(2r)}{\mu} \tag{5}$$

$$Sh = \frac{K_{lumen}r}{D_{glucose}} \tag{6}$$

272

- where  $\rho$  is the density of the fluid (kg m<sup>-3</sup>), u is the velocity of the fluid (m s<sup>-1</sup>), r is the radius of 273
- 274 the membrane (m),  $\mu$  is the viscosity of the solution (Pa s),  $D_{glucose}$  is the diffusion coefficient of
- glucose (6.9x10<sup>-10</sup> m<sup>2</sup> s<sup>-1</sup>). The velocity value used for u was estimated as follows. Each cuff 275
- 276 contraction was assumed to displace fluid of volume equal to the volume of a cylinder with
- 277 diameter 2r (the diameter of the membrane) and length L<sub>cuff</sub>, the length of each rubber cuff.
- 278 This was divided by the inflation time to calculate the volumetric flow rate, which was then
- 279 divided with the cross sectional area of the membrane to obtain the velocity value.

#### 3. RESULTS 280

- 281 3.1 Mass transfer in the SIM
- 282 Simulated glucose absorption from 1% glucose in aqueous, guar gum (0.1%), and CMC (0.1%)
- 283 and 0.5%) solutions with and without segmentation showed linear curves of the shape of
- 284 figure 4 without any plateaus (no lag time or converge limit, data not shown). The relevant
- 285 overall mass transfer coefficients were calculated from equation 3, and results are shown in
- 286 Figure 5 as a function of zero-shear viscosities. Figure 5 demonstrates increased glucose

287	absorption with application of segmentation movements, which can be attributed to enhanced
288	mass transfer to the membrane wall due to the squeezing motions of the cuffs. The effect was
289	more profound for the aqueous solution, where application of segmentation resulted in $30\%$
290	increase in mass transfer coefficient. More viscous solutions of 0.1% guar gum and 0.1% CMC
291	solutions showed maximum 20% increase in $K_{\text{overall}}$ on application of squeezing movements.
292	This is in good agreement with Tharakan et al. [2007; 2010], who reported reduced effect of
293	squeezing on mass transfer as viscosity increased. Figure 5 also indicates maximum overall
294	mass transfer coefficient for the lowest viscosity fluid on application of segmentation
295	movements, suggesting that at low viscosities there is minimal resistance to mass transfer.
296	Increasing chyme viscosity (above 2mPa s) resulted in reduction of mass transfer (by 15%
297	and 90% as viscosity increased from 1 to 20 and 200Pa s, respectively). Interestingly, at $0.5\%$
298	CMC (200mPa s zero viscosity), glucose transport to the recipient zone was practically
299	inhibited without segmentation within the timescale of the experiments.
300	These results correlate well with estimated K <sub>overall</sub> from <i>in-vivo</i> data of human volunteers who
301	consumed an oral glucose dose (250mL of $10\%$ by weight glucose drink) with or without
302	3.6% wt/vol guar gum [Blackburn, Redfem, Jarjis, Holgate, Hanning, Scarpello, Johnson, &
303	Read, 1984]. Although glucose and guar gum concentrations were different to those used in
304	the present work, it is encouraging to notice that both the present and the in-vivo data
305	resulted in $K_{overall}$ of the same order of magnitude (for aqueous solutions $5.35 \mathrm{x} 10^{-7}$ and
306	$5.47 \times 10^{-7}$ m/s, respectively) and that addition of the hydrocolloid prompted reduction of
307	$K_{overall}$ (from $5.47 \times 10^{-7}$ to $2.91 \times 10^{-7}$ m/s). The effect of guar gum in reducing postprandial
308	glucose levels was attributed to the inhibiting action on fluid convection by the intestinal
309	motility due to increased chyme viscosity.
310	Figure 6 shows the effect of segmentation frequency on mass transfer for guar gum and pectin
311	solutions. For all investigated conditions, increasing the viscosity resulted in a decrease in
312	mass transfer. Guar gum and pectin systems showed similar trends: an approximately
313	threefold reduction in $K_{\text{overall}}$ was observed as zero shear viscosity increased from $0.02\ \text{Pa}$ s to
314	$1.2~{\rm Pa~s}$ in systems containing guar gum (0.25% and 0.63%, respectively) and from 0.05Pa s to
315	1.9Pa s in pectin systems (10% and 30%, respectively). For the same systems, the effect of
316	segmentation frequency was found marginal and similar overall mass transfer coefficients
317	were estimated for all investigated protocols. Further increase in guar gum concentration (to

318	0.75%) had an insignificant effect on mass transfer, in agreement with previous work
319	reported by Tharakan et al. [2007; 2010].
320	Interestingly, increased frequency of segmentation contractions (i.e. faster squeezing of the
321	membrane) is expected to result in increased mixing and therefore higher mass transfer
322	coefficients. It may also further enhance mass transfer by decreasing the "unstirred water"
323	layer adjacent to the gut wall, which further obstructs molecular diffusion and nutrient
324	absorption [Doublier & Couvelier 2006]. Similar conclusions would be made according to the
325	'surface-renewal' theory [Cussler 2000]. However, frequency of contractions did not have a
326	significant effect on the estimated $K_{\text{overall}}$ for both guar gum and pectin solutions in all
327	investigated concentrations. It is possible that the time scale of the perturbations induced by
328	the squeezing motions of the cuffs is smaller than the relaxation time of the system under
329	investigation. Any changes in the squeezing frequency would then be expected to have
330	marginal effect on mass transfer. This has been identified as a possible limitation of the SIM
331	and it has been addressed in the next generation (DDuo).
332	Overall figures 5 and 6 demonstrate the potential of both food formulation and segmentation
333	in controlling digestion processes. From those results one could conclude that the effect of
334	formulation on food digestibility is complex and rheological variables other than viscosity
335	may play an important role in determining nutrient bioaccessibility. In addition, food
336	formulation is believed to further impact <i>in-vivo</i> segmentation patterns (e.g. liquid foods are
337	said to stimulate deep contractions while highly viscous foods are generally associated with
338	shallow muscle movements) [Jaime-Fonseca, 2011].
339	Figure 7 shows the Reynolds and Sherwood numbers, calculated from equations (5) and (6).
340	As a general trend, convection becomes increasingly more important than diffusion (i.e. Sh
341	number increases) as Re number increases above 100. This indicates that higher Re enhances
342	convective mass transfer. Interestingly, a notable "step" towards convective processes
343	appears in Re numbers in the region of 1000 (low viscosity fluids, of about 20mPa s) for the
344	guar gum solutions. This could be the result of a change of the flow regime from laminar to
345	transitional-turbulent, resulting in increased mixing and mass transfer. At Re numbers below
346	100, the flow becomes fully laminar and an increase of Re does not result in a significant
347	increase of Sh (i.e. convection is not enhanced). The different segmentation patterns appeared
348	to influence the relationship between Sh and Re only marginally.

349	3.2 Mass transfer in DDuo
350	Having established that both formulation and mixing conditions are significant in determining
351	mass transfer and nutrient bioaccessibility in the gut, a new model was built with improved
352	functionality and automation, as discussed in section 2.2.1. The new model aims at addressing
353	the limitations observed in the SIM and offers flexibility in reproducing gut motility: there are
354	8 segmentation positions (i.e. squeezing of the porous membrane), each of which is only 1cm
355	long (with respect to the 12cm long cuffs of SIM). The segmentation points can be controlled
356	separately, so that each moves at the required time and rate.
357	Initial data obtained with the DDuo are shown in Figures 8-10. Figure 8 shows the effect of
358	mixing conditions on glucose absorption from $1\%$ glucose in aqueous and $1\%$ guar gum
359	solutions. Mixing was induced by squeezing at alternating positions at either 4 locations
360	(gray/black arrows in Figure 3) or 1 location (positions 2 and 6 in Figure 3). The results are
361	comparable to those obtained from the SIM model. When mixing was reduced to one
362	segmenting point, a delay of 10min was observed for both water and guar gum solutions,
363	before determining glucose in the recipient zone. These results indicate that the way
364	intestinal motility is reproduced in the $\textit{in-vitro}$ models could affect the observed mass transfer
365	coefficient. The results from DDuo indicate that increasing the number of segmentation points
366	can result in a change of accessible glucose indicating an increase of mixing.
367	In Figure 9 the estimated overall mass transfer coefficients are shown for different
368	segmentation points. Results indicate that at 1 segmentation point (i.e. lower mixing) mass
369	transfer was reduced by 25% and 45% for aqueous and guar gum systems, respectively. In
370	addition, the effect of the number of segmentation points was more profound at higher
371	viscosity mixing (40% reduction of $K_{\text{overall}}$ for the 1% guar gum) when compared to low
372	viscosity (only 15% reduction on water).
373	Figure 10 shows the effect of mixing frequency (at 4 segmentation points) on K <sub>overall</sub> from 1%
374	glucose in aqueous and 1% guar gum systems. Results indicate that under investigated
375	conditions, increased segmentation frequency appears to enhance mass transfer. On all
376	occasions, the lower viscosity fluid resulted in higher (up to 30%) mass transfer. However, at
377	12cpm it appears that the difference between the aqueous and viscous systems was marginal
378	(<10%), indicating a nearly homogeneous mixing. Overall, Figures 8 - 10 demonstrate the
379	flexibility of DDuo and its potential as a more adaptable tool to understand the effect of

380	intestinal motility on glucose bioaccessibility. Further work is required to obtain an
381	understanding of the detailed effect of gut motility on mass transfer and food digestibility.
382	4. CONCLUSIONS
383	There is a growing interest in controlling the nutritional values of foods using hydrocolloids. A
384	mechanism of slowing glucose bioaccessibility has been attributed to reduction in mass
385	transfer through the gastrointestinal tract. This work presents in-vitro digestion studies using
386	novel models with the ability to simulate intestinal motility, and illustrates the importance of
387	mass transfer on simulated glucose absorption by using a range of food hydrocolloids. The
388	models simulate flow and mixing in the gut. Addition of guar gum, CMC, and pectin showed
389	reduction of glucose bioaccessibility by up to 30% compared with aqueous solutions in-vitro.
390	Further work is required to understand if this reduction of mass transfer could result
391	in/explain the significant delay of in-vivo post-prandial blood glucose observed by the
392	addition of hydrocolloids. Overall, obtained results indicate that the effects of hydrocolloids
393	on simulated digestibility are complex and for investigated hydrocolloid systems/conditions,
394	increasing viscosity appeared to reduce mass transfer coefficients. This implies the potential
395	of designing healthier foods by engineering the viscosity of the digested food.
396	
397	5. ACKNOWLEDGEMENTS
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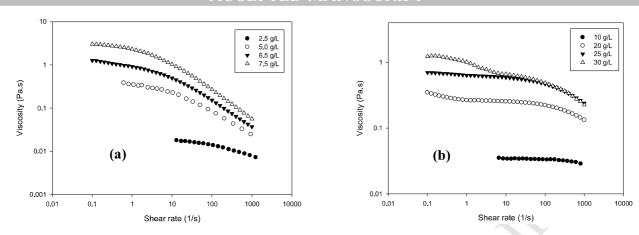


Figure 1: Shear viscosity of solutions (with concentrations) used in the experiments: (a) guar gum; (b) pectin.

P1 Tank
1 Spectrophotometer
P2 Tank
2

Figure 2: Schematic drawing of Small Intestinal Model (SIM). The investigated (red colour) and recipient (blue colour, initially water) fluids recirculate in the luminal and recipient sides of the model respectively, using peristaltic pumps P1 and P2. Segmentation is mimicked by squeezing the tubes radially, using two pneumatically controlled rubber cuffs (cuff 1 and cuff

2). The active compound passes through the porous inner membrane from the luminal to the

recipient side, where it is quantified spectrophotometrically.

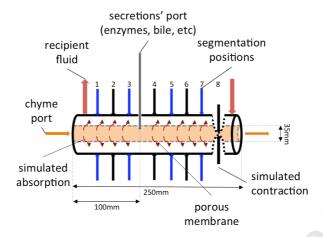


Figure 3: Schematic of Dynamic Duodenal Model (DDuo). The investigated fluid (orange coloured here for clarity) enters the luminal side of a porous membrane used to simulate intestinal wall. The recipient side is bordered by a non-permeable silicone tube. Enzymes and other secretions are injected through the secretions port, located at 100mm distance from the chyme entrance to represent physiological conditions. Segmentation and peristaltic movements are simulated by applying pressure at the membrane at 8 possible positions.

Motion can be controlled independently.

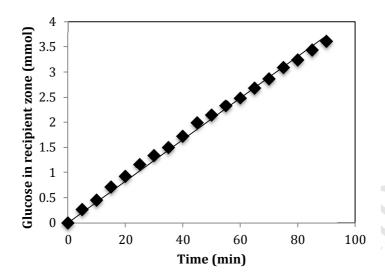


Figure 4: Typical plot of absorbed glucose in the recipient zone versus time (from 1% aqueous glucose solution).

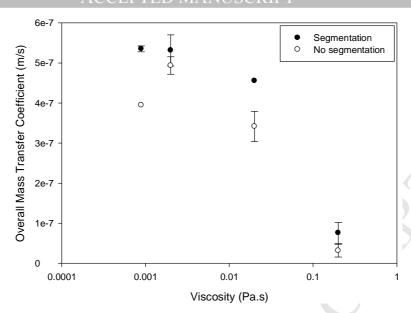


Figure 5: Overall Mass Transfer Coefficient with and without segmentation for systems of different zero-shear viscosities.

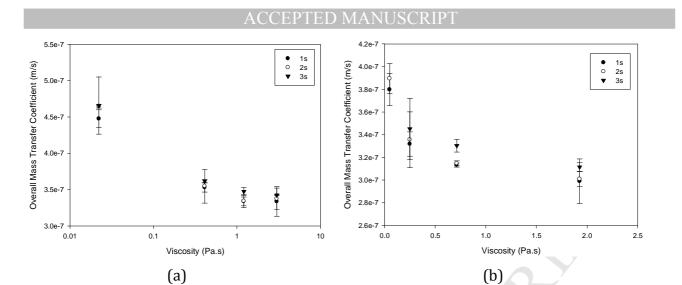


Figure 6: Effect of segmentation frequency on overall mass transfer rate from 1% glucose in (a) guar gum; (b) pectin solutions of different zero-shear viscosities.

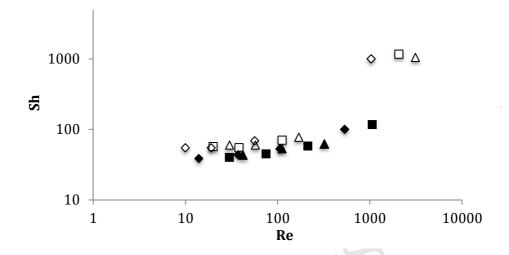


Figure 7: Correlation between Sherwood (Sh) and Reynolds (Re) numbers for guar gum

(white symbols) and pectin (black symbols) solutions at high (1s, rhombus), medium (2s, squares), and low (3s, triangles) mixing.

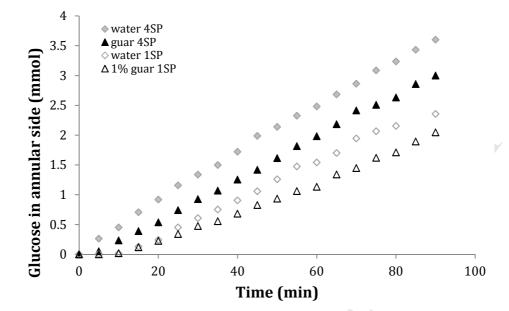


Figure 8: Simulated glucose absorption at high (4 segmenting positions) and low (1 segmenting position) mixing for 1% glucose in aqueous or 1% guar gum solutions, using Dynamic Duodenal model (DDuo).

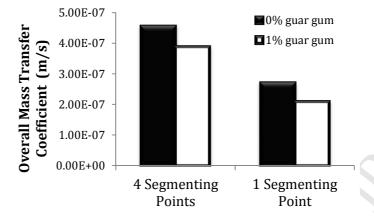


Figure 9: Overall mass transfer rates associated with the conditions of Figure 9 (initial lag time not considered in the calculations)

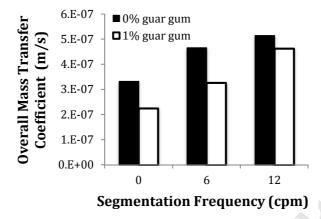


Figure 10: Overall mass transfer coefficient in Dynamic Duodenal model (DDuo) for 1% glucose in aqueous and 1% guar gum solutions at different segmentation frequencies (0, 6, and 12cpm)

Table 1: Hydrocolloid systems and zero-shear viscosities studied with and without segmentation movements in the Simulated Intestinal Model (SIM) and their respective viscosities.

System	$\eta_0$ (mPa s)
aqueous	$1.0 \pm 0.2$
Guar gum 0.1%	$2.0 \pm 0.4$
CMC 0.1%	$20.0 \pm 0.2$
CMC 0.5%	200.0 ± 0.1

Table 2: Hydrocolloid systems and zero-shear viscosities studied under different
 segmentation patterns in the Simulated Intestinal Model (SIM) (as described in section 2.2.2).

System	Concentration (g/L)	$\eta_0$ (Pa s)
Guar gum	2.50	0.0222 ± 0.0018
	5.00	0.4108 ± 0.0296
	6.25	1.2090 ± 0.0961
	7.50	$3.192 \pm 0.1982$
Pectin	10	0.0498 ± 0.0217
	20	$0.2530 \pm 0.0770$
	25	0.7133 ± 0.0607
	30	1.9265 ± 0.1039

Please find below 5 brief bullet points to convey the core findings of the work.

- Food formulation impacts mass transfer in simulated *in-vitro* model gut
- Flow regime affects mass transfer independently of formulation
- As flow becomes less laminar mass transfer increases in the model gut
- At increased mass transfer simulated glucose absorption is increased
- Preliminary data with improved *in-vitro* model agree with previous observations