

**Results:** The mean total quantities of SCFA in the portal blood were, respectively, for PoS, HS and RHS:  $131.4 \pm 25.8$ ,  $85.0 \pm 13.3$  and  $163.0 \pm 35.5$  mmol with HS statistically different from PoS and RHS. The mean total quantities of nC4 measured in the portal vein varied significantly between starches: PoS ( $15.2 \pm 2.8$  mmol) versus HS ( $0.2 \pm 0.2$  mmol) and RHS ( $3.1 \pm 1.1$  mmol).

**Conclusion:** The mean total quantities of SCFA measured in the portal vein agree with previous studies. The nC4 produced from HS and RHS fermentation seems to be completely used up by the colonic mucosa. On the other hand, after consumption of the PoS diet, a part of the nC4 appears in the portal blood. This result could indicate a saturation of its utilization by the colonocytes when a large amount of nC4 is produced, as previously observed *in vitro*.

#### **Measurement of the colonic acetate production after lactulose ingestion in humans – using isotopic dilution.**

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Lactulose is a disaccharide which is not digested or entirely degraded by colonic fermentation. This results in an exogenous acetate supply. Our aim was to evaluate quantitatively this colonic acetate production following lactulose ingestion. Six healthy volunteers (24–38 years,  $21.7 \pm 1.5$  kg·m<sup>-2</sup>) were given a low fiber diet for 3 days ( $< 5$  g·d<sup>-1</sup>). They then received a prime of [<sup>1-13</sup>C] acetate ( $33 \pm 10$  μmol·kg<sup>-1</sup>) intravenously and were infused with the same tracer ( $1.0 \pm 0.1$  μmol·kg<sup>-1</sup>·min<sup>-1</sup>) for 7 h. At  $t = 60$  min, the subjects received an oral dose of 20 g of lactulose. Breath samples and arterial blood samples were collected every 15

min throughout the study. The isotopic enrichment levels and the concentrations were measured by gas chromatography/mass spectrometry. The acetate turnover was calculated, after being validated, with the steady state equation at each sample point. During the initial period, the hydrogen and methane levels were  $7 \pm 2$  and  $10 \pm 4$  ppm, respectively. The concentration and the acetate turnover were  $141 \pm 14$  μmol·L<sup>-1</sup> and  $6.0 \pm 0.7$  μmol·kg<sup>-1</sup>·min<sup>-1</sup>, respectively. At  $t = 195$  min, the hydrogen and acetate concentrations reached  $63 \pm 15$  ppm and  $313 \pm 25$  μmol·L<sup>-1</sup>, the methane level remained unchanged. Simultaneously, the whole body acetate turnover increased to  $9.8 \pm 1.5$  μmol·kg<sup>-1</sup>·min<sup>-1</sup> and then decreased, to close to the initial value, at the end of the study. The area under the curve of the whole body acetate turnover variations minus the constant initial turnover, supposed to be endogenous, represents the colonic exogenous acetate supply. It was  $140 \pm 12$  mmol, which was 86 % of the expected stoichiometric amount. This approach is unique. It made it possible to quantitatively estimate the colonic acetate production and thus the colonic fermentation, *in vivo*, in humans.

#### **In vitro fermentation of Acacia gum by human fecal flora: effects on the bacterial populations and on the production of short-chain fatty acids.**

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Several carbohydrates have been identified as prebiotics. They are not digested in the small intestine but are highly fermented in the colon where they specifically promote the growth of lactic acid bacteria. Although prebiotics are mainly oligosaccharides, high molecular weight polymers are likely to exert similar effects. This study aimed to determine the effects