

P-4**ENTERAL INFUSION OF GLUCOSE OR ALANINE PLUS GLYCINE, BUT NOT GLUTAMINE, INCREASES THE LYMPHATIC ABSORPTION OF ¹⁴C-TRIOLEIN AND α -TOCOPHEROL (α TP). THE INCREASE IS ASSOCIATED WITH A RISE IN LYMPHATIC GLUCOSE OUTPUT.**

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The efficacies of enteral glucose (GLU), glutamine (GLN), and alanine plus glycine (A+G) in improving intestinal lipid absorption and the relationships between lymph glucose and lipid outputs were compared in male rats. After lymph duct cannulation, rats were infused via a duodenal catheter with a PBS buffer (pH 6.4) containing GLU (138.7 mM), GLN (171.1 mM), or alanine (171.1 mM) plus glycine (171.1 mM) at 3.0 ml/h for 48 h. Each rat was then infused at 3.0 ml/h for 8 h with lipids (565 μ mol ¹⁴C-labeled triolein, 3.6 μ mol α TP, and 396 μ mol Na-taurocholate/24 ml) emulsified into one of the respective solutions above. The lymphatic outputs of ¹⁴C, α TP, phospholipid (PL), and glucose were measured hourly. The total ¹⁴C-lipid absorptions (% dose) for 8 h were 46.6% with GLU, 38.0% with GLN, 47.3% with A+G, and 39.8% with PBS only. GLU or A+G infusion increased the absorption of ¹⁴C compared with GLN and PBS only. The absorption of α TP also was improved similarly with GLU and A+G infusion. Lymph glucose outputs were increased in parallel with the amounts of ¹⁴C or α TP appearing in the lymph. The total outputs of glucose with GLU, GLN, and A+G infusion were 164, 126, and 176 μ mol/ 8 h, respectively. When PBS without lipids was infused, glucose output was reduced to 71.1 μ mol/ 8 h. GLN or A+G increased the lymphatic output of PL (35.5 μ mol/ 8 h) compared with GLU (29.1 μ mol) and with PBS only (29.0 μ mol). The finding shows that enteral GLU and certain glucogenic amino acids improve fat absorption. Whether dietary or endogenous glucose serves as a regulatory signal for lipid absorption remains to be understood. (Supported in part by KAES).