



**Nutrition
Centre**

By TATE & LYLE

Soluble Corn Fibre: The science behind the health benefits

Innovating to meet nutrition, health,
and wellness needs every day

Key points

- Research indicates that diets higher in fibre are associated with improved health and reduced risk of certain diseases, including cardiovascular diseases and type 2 diabetes.
- Even though many consumers say that they are making efforts to consume diets higher in dietary fibre, current fibre intakes remain low.
- While the promotion of traditional sources of fibres like whole grains, fruits and vegetables should be actively encouraged, fibre fortification can help bridge the gap to meet global dietary fibre recommendations.
- Emerging scientific evidence indicates that prebiotic soluble fibres may play a role in metabolic and immune health and cognitive function.
- Tate & Lyle's **PROMITOR® Soluble Fibre** is a soluble corn fibre (SCF) ingredient that manufacturers can use in the development of new and innovative products.
- **PROMITOR® Soluble Fibre** provides health benefits including helping to maintain healthy postprandial (after-meal) blood glucose and supporting gastrointestinal health through prebiotic effects, as well as enhancing calcium absorption which may support bone health. All without sacrificing taste, texture, or enjoyment.



Introduction

Decades of research point to the health benefits of dietary fibre, including supporting cardiovascular health, tempering spikes in blood sugar, aiding weight management, and promoting a healthy gut.¹⁻⁷

Yet, across the globe, average intakes are well below the recommended amount despite

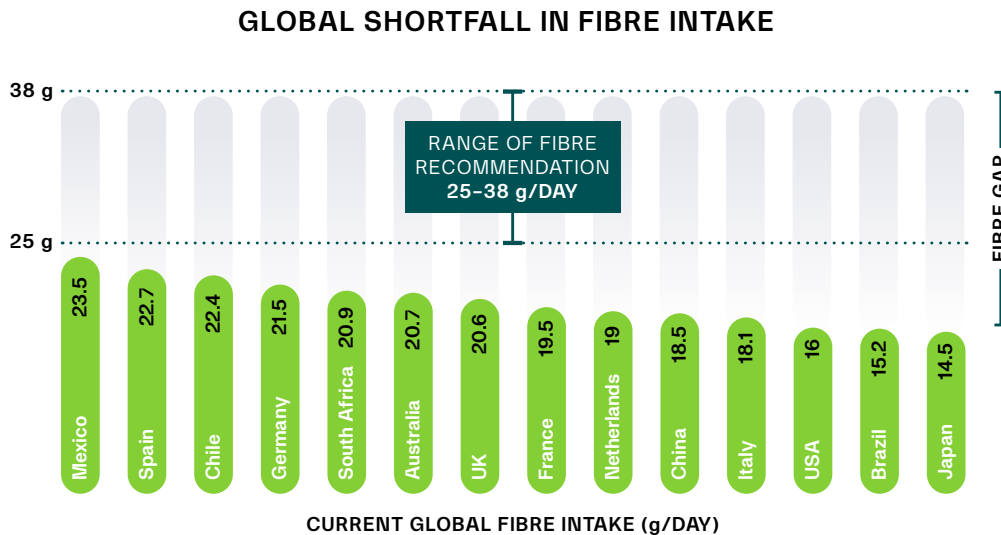
the widespread knowledge of fibre's role in a healthy diet.^{1,3} An abundance of research continues to demonstrate that added fibres, also known as "functional fibres", provide similar benefits to fibres inherent in whole foods and could play a role in bridging the "fibre gap".

Dietary fibre gap: Intakes vs. recommendations

Recommendations for fibre intakes range from 25–38 g/day depending on country specific guidelines.^{2,3,6} The World Health Organization suggests worldwide recommendations of greater than 25 g/day,⁵ but fibre intakes in most countries are well below this level (Figure 1).⁸⁻¹⁷ In the United States (US), for most age and gender groups, only 6% meet the dietary recommendations despite consistent messaging to the public to increase dietary fibre intake.¹

Recommendations within individual European countries vary but average intakes for adult males in Europe range from 18 to 24 g/d and for females 16 to 20 g/d, below the 25 g/day established by the European Food Safety Authority to support normal laxation.⁷ Fibre intakes in children and teenagers also fall short of recommendations in westernized countries.³

Figure 1. Average adult fibre intakes by country and fibre gap compared to recommendations.⁸⁻¹⁷



Fibre sources and the role of fortification

Dietary fibres are non-digestible carbohydrates in the diet that, when consumed, pass through the small intestine into the large intestine where they may be partially or completely fermented by the colonic microbiota.² Added fibres, also known as “functional fibres,” are non-digestible carbohydrates that are either isolated from a food source, or synthesized non-digestible carbohydrates that have beneficial physiological effects in humans.^{2,6}

These fibres can be extracted from one food source and added to another (e.g., bran added to grain-based foods); manufactured from grains like corn or wheat (e.g., **STA-LITE® Polydextrose** and **PROMITOR® Soluble Fibre**) obtained from fruit, vegetables, legumes, nuts, and seeds; or the fibres can be modified forms of traditional fibres.^{2,6}

Adding fibre to new or commonly consumed foods is one strategy to help bridge the gap between usual intakes and recommended

intakes. The benefit of reformulation and fortification is that it generally requires minimal behaviour change so methods like these can be useful adjuncts to recommendations that do require a change in dietary habits.

To investigate the potential benefit of food fortification with fibre, a health and nutrition modelling study was undertaken based on current UK dietary patterns. It showed that increasing the fibre content of a selection of everyday foods including baked goods, dairy products, soups, smoothies, and dressings, would enable 50% more adults to achieve the recommended daily amount of fibre in their diets and could lower the risk of heart disease and type 2 diabetes for the majority of UK adults (Figure 2). The overall mean increase in fibre intake from fortifying a selection of foods was 2.2 g/day showing that even modest improvements could be beneficial.¹⁸

Figure 2. Tate & Lyle modelling study showing potential public health gains of adding fibre to everyday foods.¹⁸



Fibre fortification would enable **50% more UK adults** to consume the recommended amount of fibre.



6% of population would achieve a **weight reduction** because of fortification.



72% of population would achieve a reduction in **cardiovascular risk** and **type 2 diabetes risk** with fibre fortification.

Fibre Innovation For Health

Physiological functions and benefits of fibre

The **physical and chemical structure** of dietary fibre and its **fermentation capacity** are partially responsible for the many physiological benefits associated with dietary fibre consumption.

Increased dietary fibre has been associated in epidemiological studies with a reduced risk of coronary heart disease, stroke, hypertension, obesity, prediabetes, type 2 diabetes, certain gastrointestinal disorders, and some cancers.¹

Evidence indicates that consumption patterns high in certain fibres are associated with lower total and LDL cholesterol, blood pressure, blood glucose in healthy individuals and in those with prediabetes and type 2 diabetes; can help with both weight loss and maintenance; and can improve bowel regularity, laxation, and gastrointestinal health.^{1-7,19}

Scientific understanding also continues to build for additional health benefits of fibre consumption in the areas of immune modulation and cognitive health.¹⁹⁻²¹

PROMITOR[®] Soluble Fibre

Characterisation and labelling of PROMITOR[®] Soluble Fibre

PROMITOR[®] Soluble Fibre is used in foods and beverages across the Americas, Europe, and the Asia Pacific as a potential solution to increase fibre intake. It is available in different formats:

- ▲ **PROMITOR[®] Soluble Fibre 70** provides a minimum of 70% dietary fibre and contains less than 10% sugar with a caloric content of 1.9 kcal/g.*
- ▲ **PROMITOR[®] Soluble Fibre 85** provides a minimum of 85% dietary fibre and contains less than 2% sugar with a caloric content of 1.1 kcal/g.*
- ▲ **PROMITOR[®] Soluble Fibre 90** provides a minimum of 90% dietary fibre and contains less than 2% sugar with a caloric content of 1.1 kcal/g.*
- ▲ **PROMITOR[®] Soluble Fibre 85** and **PROMITOR[®] Soluble Fibre 90** are therefore suitable for products requiring more fibre.



PROMITOR[®] products are low in viscosity, water-soluble and very stable to heat, pH and processing stresses. On a product's ingredient listing, **PROMITOR[®] Soluble Fibre 70, 85 or 90** can be listed as soluble corn fibre, maltodextrin or resistant maltodextrin.† Its contribution to the product's overall fibre would be included in the fibre listing on the Nutrition Facts or Information Panel.†

* These caloric values reflect US labelling only. Caloric labelling varies based on global regulations.

† Specific label names and nutrition labelling may vary in different countries or regions. Check with your local regulatory expert to determine appropriate labelling.

Resists digestion and is fermented in the large intestine

Fermentation of fibre in the large intestine by microorganisms is linked to the health benefits of fibre. **PROMITOR® Soluble Fibre** contains a mixture of linkages including α 1-6, α 1-4 as well as α 1-2 glucosidic linkages that contribute to the low digestibility of the ingredient in the small intestine as detailed in the research below. While changes in faecal short-chain fatty acids (SCFAs), pH, and breath hydrogen are useful indicators that gut fermentation is taking place in the large intestine (colon), SCFAs are quickly absorbed in humans, so animal and *in vitro* models are better for understanding colonic fermentation of fibre.

Animal, *in vitro* and human intestine simulator trials

- ▲ A study in pigs observed that at least 70% of **PROMITOR® Soluble Fibre** resists digestion in the small intestine and passes into the large intestine for fermentation.²²
- ▲ Two *in vitro* evaluations using human faecal inoculum from healthy adults found that SCFA levels (acetate, propionate, and butyrate) were elevated with the addition of SCF.^{23,24}
- ▲ An *in vitro* simulation of gastric digestion/large intestine fermentation using animal faecal material showed that SCF was the most fermented ingredient, followed by pullulan, polydextrose, soluble fibre dextrin, and resistant starch.²⁵
- ▲ The Simulator of Human Intestinal Microbial Ecosystem (SHIME) model simulates the gastrointestinal tract of an adult human. Research has shown that **PROMITOR® Soluble Fibre** is well fermented in the distal colon and leads to positive effects on the activity of the gut microbiota and its composition with potential impact in strengthening the gut barrier.²⁶

Human trials

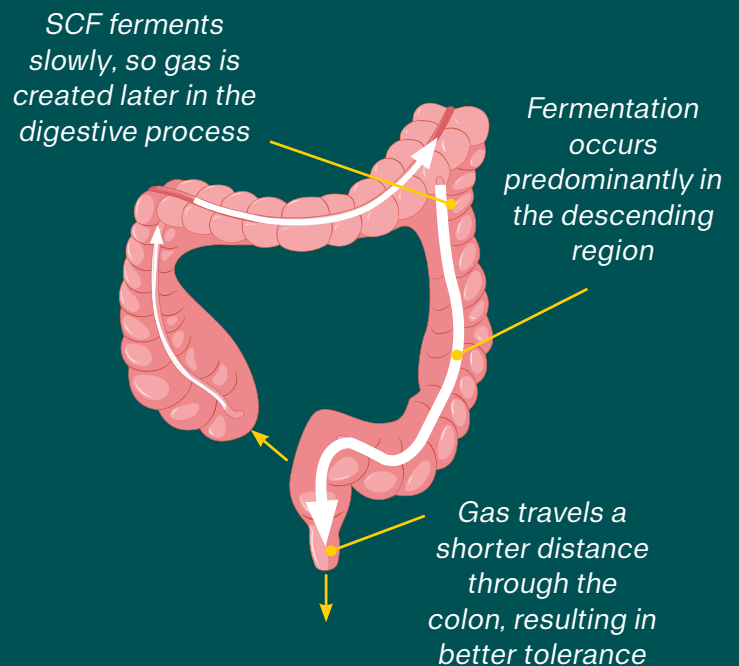
- ▲ In a randomised, controlled, single-blind, crossover study, 24-hour breath hydrogen was found to be significantly increased (indicating colonic fermentation) after 18 overweight adults consumed breakfast and lunch foods in which 30% of the available carbohydrate was replaced with 55 g of **PROMITOR® Soluble Fibre**.²⁷
- ▲ In a randomised controlled, double-blind, crossover trial that investigated the effects of 21 g/day of SCF from **PROMITOR® Soluble Fibre** in 21 overweight, healthy adult men, faecal pH was significantly lowered.²⁸



PROMITOR® Soluble Fibre is well tolerated

It is well known that a sudden increase in dietary fibre may cause mild gastrointestinal disturbances, but these are generally transient and improve with adaptation to the dietary fibre source. In a trial of 20 healthy adult volunteers, a **single dose at 40 g of SCF or multiple doses reaching 65 g of SCF** over the day were well-tolerated.²⁹ Longer-term studies conducted over a minimum period of one to three weeks using **PROMITOR® Soluble Fibre** have shown doses of 12–25 g/day of fibre to be well tolerated.^{28–32} A recent study in children aged 3 years to 9 years has shown that moderate intakes of **PROMITOR® Soluble Fibre** (5 g for very young children and 8 g for older children) were well tolerated. Fibre fortification at realistic levels of up to 8 g/day of SCF could help close the fibre gap in children without meaningful GI discomfort and can be important reformulation tool in a variety of food products.³³

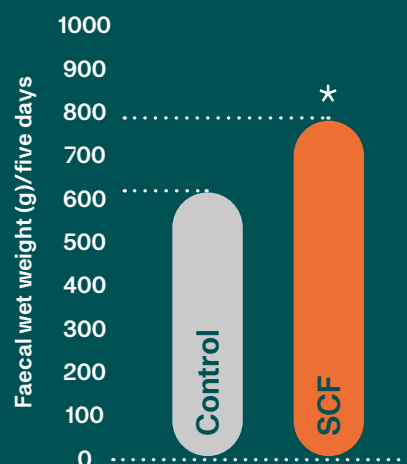
Figure 3. Location and transit of PROMITOR® Soluble Fibre through the colon to promote tolerance.



Improves bowel function

PROMITOR® Soluble Fibre helps maintain digestive health through its effect on laxation. Thirty-six healthy adults who consumed 20 g/day of fibre from SCF in breakfast cereal and muffins for ten days in a randomised placebo-controlled, double-blind crossover study experienced an increase in faecal wet weight (Figure 4).³⁴ Increased faecal wet weight was also observed in another randomised, placebo-controlled, double-blind, crossover study of 21 healthy overweight men who ingested 21 g/day of fibre from SCF for 21 days.²⁸

Figure 4. Five-day faecal wet weight (g) of control vs. soluble corn fibre.³⁴



*Significantly different from control. $P < 0.0007$

Prebiotic effects: Modulation of gut microflora and bone health benefits

While the term 'probiotic' refers to live microorganisms, a 'prebiotic' essentially refers to substances that act as fuel for beneficial microbes in the gut. The International Scientific Association for Probiotics and Prebiotics (ISAPP) define a prebiotic as "a substrate that is selectively utilized by host microorganisms conferring a health benefit".³⁵ **PROMITOR® Soluble Fibre** may induce a prebiotic effect by promoting the growth of beneficial bacteria increasing SCFA production, which has been associated with increased calcium absorption.

Gut microflora changes

After the consumption of 21 g/day of SCF for 21 days, there was a 1 log increase in *Bifidobacterium spp.* in 21 healthy men compared to a no fibre control.²⁸ The significant increase in beneficial bacteria observed in human studies has been supported by *in vitro* studies that have used human faecal inoculum under conditions that simulate the human gastrointestinal tract.^{23,24}

In a small double-blind, randomised, parallel pilot study numbers of bifidobacteria were significantly higher when 6 g/day of SCF was given over 14 days compared to baseline.³⁶



Increased calcium absorption and bone calcium retention

Adequate calcium consumption is important throughout the lifespan, particularly for building strong bones, optimising bone mass, and reducing the risk of osteoporosis.³⁷ Calcium intakes usually fall below the recommended levels, hence any attempts to increase calcium absorption and retention are of critical significance.³⁷

- ▲ In a randomised, double-blind, placebo-controlled, crossover study of 24 adolescents, calcium absorption was increased by 12% when 12 g/day of fibre from SCF was consumed over 3 weeks, compared to a control with the background diet controlled to contain 600 mg/day of calcium.³⁸ When the adolescents consumed SCF, there was an increase in specific strains of beneficial gut bacteria, namely the phylum Bacteroidetes, and these increases were positively correlated with increases in calcium absorption. If the adolescents in this study had continued to consume SCF, allowing for increased calcium absorption, the researchers estimated that this would lead to an additional 41 mg/day of retained calcium, and if persistent over a year, would account for an additional 15 g of calcium, or about 1.8% of total body calcium.³⁸
- ▲ Similar increases in calcium absorption were reported in a four-week, randomised, double-blind, placebo-controlled, crossover study in 26 free-living adolescent females who consumed 10 g and 20 g/day of fibre from **PROMITOR® Soluble Fibre** with their habitual diet containing ≤ 800 mg/day of calcium.³⁹
- ▲ A third randomised, placebo-controlled double-blind, cross-over study in 14 healthy, free-living postmenopausal women demonstrated that bone calcium retention significantly increased in a dose-dependent manner with consumption of **PROMITOR® Soluble Fibre** at 10 g/day and 20 g/day over 50-day treatment periods with 5% and 7% increases in bone calcium retention, respectively (Figure 5).^{40,41}

While these human studies assessed calcium absorption and bone calcium retention, a 12-week study conducted in rats found that SCF improved total bone mineral content (BMC), total bone mineral density (BMD), trabecular BMC and BMD, cortical BMC, and cortical area and thickness in the distal femur compared to cellulose control (Figure 6). Bone strength of the distal femur was also significantly improved by the ingestion of SCF.⁴¹

While additional long-term studies in humans are needed to assess the potential impact on bone indices, these data suggest that SCF may help support bone health by increasing calcium absorption and bone calcium retention while providing a source of fibre. Both of these are critical nutrition issues for various segments of the population, especially adolescents and postmenopausal women.



Figure 5. PROMITOR® Soluble Fibre increases bone calcium retention in postmenopausal women.⁴⁰

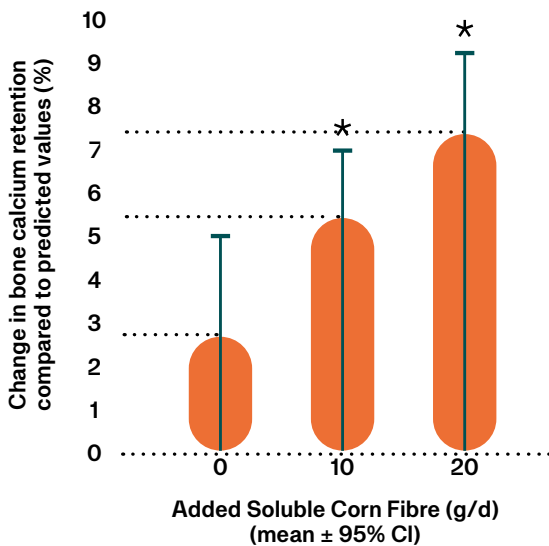
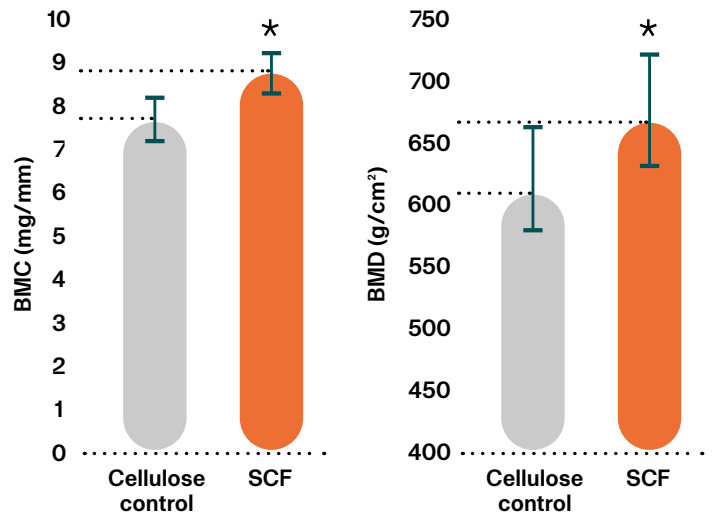


Figure 6. Effects of soluble corn fibre on bone mineral density and bone mineral content in Sprague-Dawley rats.⁴¹



*Significantly different from baseline, P<0.05

“ PROMITOR® Soluble Fibre may help support bone health by increasing calcium absorption and bone calcium retention while providing a source of fibre. ”

Favourable blood glucose and insulin response

PROMITOR® Soluble Fibre elicits a low glycaemic response and is valuable for use in products for individuals with diabetes and in products intended to reduce glycaemic load. Three clinical studies and one animal study have evaluated the glycaemic effects of SCF to date.^{27,42-44}

- ▲ The postprandial glycaemic response to SCF was compared to the glycaemic response to glucose in 12 healthy adults in a randomised, controlled, crossover study (Figure 7). SCF had a significantly lower incremental glucose and insulin response than the glucose control.⁴²
- ▲ Similar findings were found when replacing 50% of the total carbohydrate in 50 g carbohydrate test rice meals and drinks with **PROMITOR® Soluble Fibre** in 22 healthy Chinese men. A significantly lower mean iAUC* for both insulin and glucose was found with partial **PROMITOR®** replacement in the 2 hours post-meal compared to glucose and maltodextrin comparisons (Figure 8).⁴³

* iAUC: incremental area under the curve.

- ▲ Another acute study observed a significant lowering effect on peak postprandial blood glucose and insulin at a dose of 55 g of SCF (given with breakfast and lunch) in a randomised, single-blind, crossover study in 18 overweight adults compared to a full-calorie control.²⁷

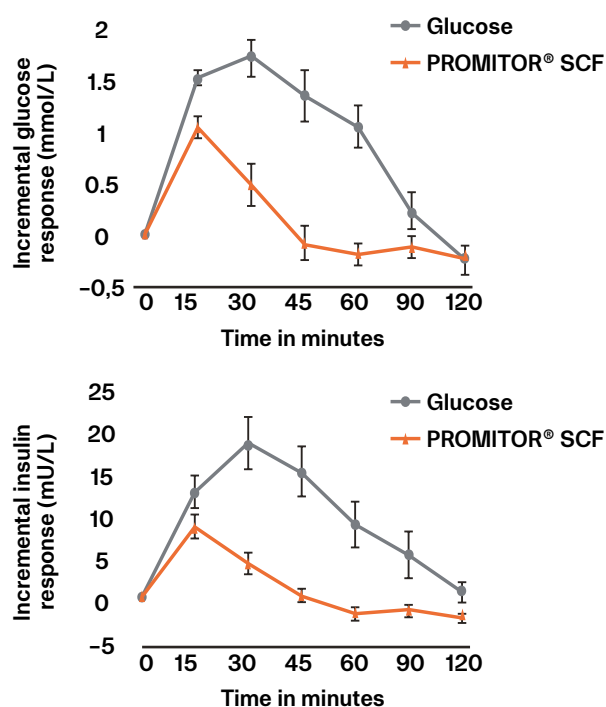
A series of SCF formulations investigated in an animal study were found to yield significantly lower postprandial blood glucose and insulin responses than a maltodextrin control.⁴⁴ To date, the data on SCF supports a blood glucose and insulin lowering effect when replacing carbohydrate. Thus, this ingredient can not only serve as a source of fibre, but may also lower blood glucose response, a desirable feature for healthy individuals as well as those with diabetes.

For those who need to manage their weight, **PROMITOR® Soluble Fibre** may assist with healthy weight management by providing minimal calories. Determining the energy (calorie) value of dietary non-digestible fibres that are fermented to varying degrees

by intestinal microbes and metabolised to short chain fatty acids (that can provide energy) is important. In a randomised, double-blind, crossover study in 19 healthy men and women (18-34 years) breath hydrogen was quantified following consumption of beverages consisting of water with either inulin or **PROMITOR® Soluble Fibre**. From this, the available energy of the fibre portion of **PROMITOR®** SCF products was determined to be 0.2 kcal/g in this study.⁴⁵¥

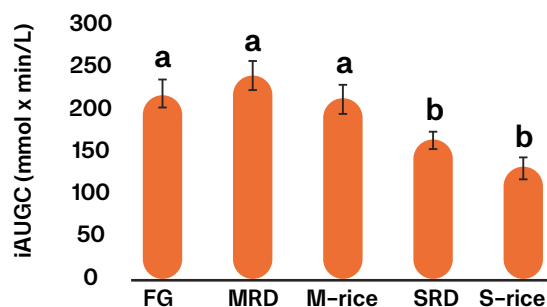
¥ Caloric labelling varies based on global regulations.

Figure 7. Effect of PROMITOR® Soluble Fibre on glucose and insulin response.⁴²



*Significant difference between treatments at each timepoint at P<0.05

Figure 8. Comparison of mean incremental area under the curve for plasma glucose concentration.⁴³



FG (glucose drink), SRD (SCF replaced drink), S-rice (SCF with rice), MRD (maltodextrin drink), M-rice (maltodextrin with rice). The error bars represent the SEM. For all plots, different alphabets represent statistically different mean values.

Emerging research: Synbiotic and immune health effects

Ageing is associated with a decline in immune function (immune-senescence) and adversely affects the gut microbiota. The effects of synbiotics (combinations of probiotics and prebiotics) is an area of increasing interest with the latter providing a potential food source for the probiotic.

A double-blind, placebo-controlled, randomised, crossover study in 40 healthy elderly subjects (60–80 years) was carried out to investigate the effects of **PROMITOR® Soluble Fibre** (12 g/day) with or without a probiotic *Lactobacillus rhamnosus* GG versus placebo (maltodextrin) during 3-week intervention periods.²⁰ All treatments, except for the placebo provided significant changes in gut microbiota (Figure 9). *L. rhamnosus* GG combined with SCF increased the genus *Parabacteroides* and *L. rhamnosus* GG combined with SCF, and SCF alone, increased concentrations of *Ruminococcaceae Incertae Sedis*. The synbiotic combination of *L. rhamnosus* GG with SCF showed a tendency to promote innate immunity by increasing Natural Killer (NK) cell activity in elderly women and 70 to 80-year-old volunteers compared to baseline. The use of SCF led to a significant decrease in the proinflammatory cytokine IL-6 compared to placebo (Figure 10).²⁰

In an animal model, SCF was found to improve disease conditions of interleukin-10-deficient mice with inflammatory bowel disease by decreasing cytokines production and upregulating the suppressor of cytokine signalling 3.⁴⁵

A study in mice fed a high-fat diet supplemented with or without soluble corn fibre demonstrated that the fibre reduced body weight gain, inhibited the development of fat mass and reduced certain markers of inflammation in subcutaneous adipose tissue.⁴⁶

Further research is needed to better understand the effect of fibres on specific aspects of the immune system and to explore the effect on clinical outcomes across the lifespan.

Additional research is also needed before a claim regarding immunity benefits can be substantiated for **PROMITOR® Soluble Fibre**.

Figure 9. Synbiotic combination of PROMITOR® Soluble Fibre with lactobacilli strain on changes in gut microbiota.²⁰ (p<0.001 in comparison to placebo)

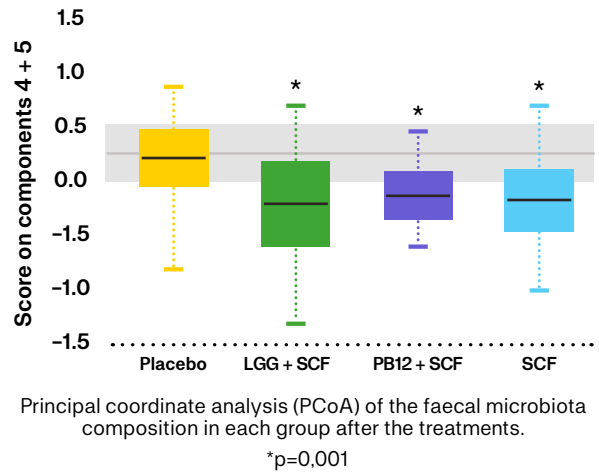
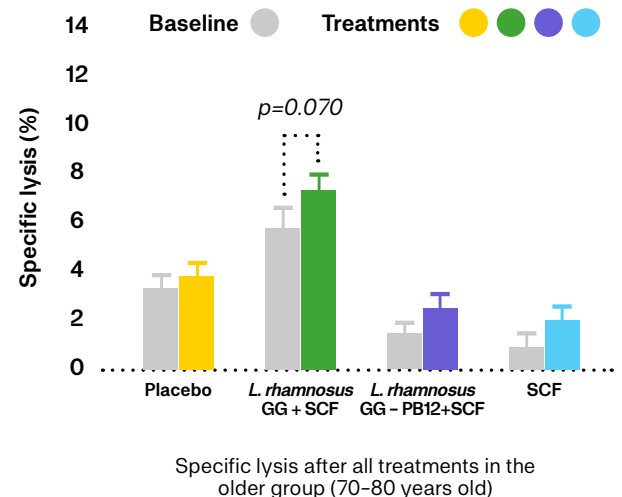
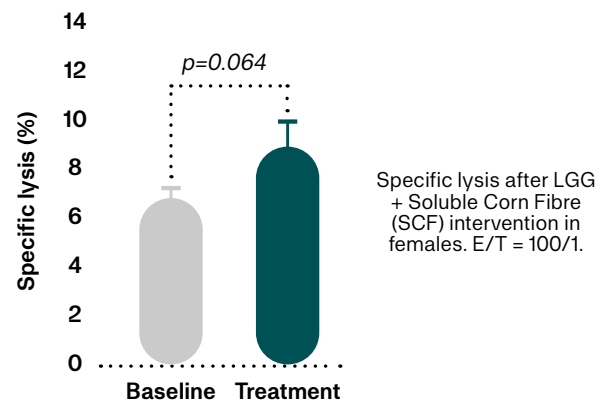


Figure 10. Effect of PROMITOR® Soluble Fibre/LGG Synbiotic on NK cell activity.²⁰



Consumer Insight on Fibre

Consumers want to eat more products with fibre, but struggle to find them. In fact, 22% of global consumers claim they are not eating more fibre because of the insufficient availability of products with fibre on the market.⁴⁷

As people try to reach their recommended daily intake of fibre, they look to specific food and beverage categories to fill the gap. For example, an average of 64% of global consumers say they obtain fibre through cereals, 56% through baked goods and 63% through dairy.⁴⁷

Adding small amounts of fibre to foods that contain some dietary fibre or to foods traditionally low in dietary fibre could help individuals meet their fibre requirements without exceeding calorie needs, which is a practical way to help address global public health concerns.⁴⁸ **PROMITOR® Soluble Fibre** can be used in a wide variety of prepared foods, beverages, and condiments including cereals, baked goods, candy, dairy products, frozen foods, soups, salad dressings, fruit drinks, carbonated beverages, meal replacement drinks, and flavoured water. Simple substitutions of similar foods made with SCF can help to close the fibre intake gap.



Conclusion

PROMITOR® Soluble Fibre has been tested by a number of independent researchers to validate its effectiveness and to demonstrate physiological health benefits. The following are some highlights of the research on the health benefits of **PROMITOR® Soluble Fibre**:

- ▲ Promotes **healthy laxation**^{28,34} and produces fewer negative faecal metabolites²⁸
- ▲ Is **well-tolerated**, even at high intake levels (40 g/day bolus and 65 g/day multiple doses), and has better overall tolerance than certain fructans such as inulin²⁸⁻³³
- ▲ Has **prebiotic properties**,^{23,24,28,38,39} that stimulate the growth of specific bacteria, producing short-chain fatty acids and is associated with improved calcium absorption and bone calcium retention. Calcium is needed to support normal **bone health**
- ▲ Supports **healthy blood glucose** levels by decreasing postprandial glycaemic response^{27,42-44}
- ▲ May assist with healthy **weight management** by providing minimal calories (1.2-2 kcal/g)^{22,45}

While individuals should increase their consumption of dietary fibre from sources such as pulses, vegetables, fruits, and whole grains, the incorporation of added fibres like Tate & Lyle's **PROMITOR® Soluble Fibre** into new and innovative food products as part of a well-balanced diet can help close the intake gap between recommended and actual intakes.

References

1. Dietary Guidelines Advisory Committee. Scientific Report of the 2020 Dietary Guidelines Advisory Committee on the Dietary Guidelines for Americans, 2020.
2. Institute of Medicine, Food and Nutrition Board. Dietary Reference Intakes: Energy, Carbohydrates, Fiber, Fat, Fatty Acids, Cholesterol, Protein and Amino Acids. Washington, DC: National Academies Press; 2002/2005.
3. Stephen AM, Champ MM-J, Cloran, SJ, et al. Dietary fibre in Europe: current state of knowledge on definitions, sources, recommendations, intakes and relationships to health. *Nutr Res Rev.* 2017 Dec;30(2):149-190..
4. Reynolds A, Mann J, Cummings J, Winter N, Mete E, Te Morenga L. Carbohydrate quality and human health: a series of systematic reviews and meta-analyses. *Lancet.* 2019 2;393(10170):434-445
5. World Health Organization Diet, Nutrition and the Prevention of Chronic Diseases. Geneva: WHO. 2003.
6. Jones JM. CODEX-aligned dietary fiber definitions help to bridge the 'fiber gap'. *Nutr J.* 2014;13:34.
7. EFSA Panel on Dietetic Products, Nutrition, and Allergies (NDA); Scientific Opinion on Dietary Reference Values for carbohydrates and dietary fibre. *EFSA Journal* 2010; 8(3):1462 [77 pp.].
8. Partula et al Associations between consumption of dietary fibers and the risk of cardiovascular diseases, cancers, type 2 diabetes, and mortality in the prospective NutriNet-Santé cohort. *Am J Clin Nutr.* 2020 Jul 1;112(1):195-207.
9. Mertens, E., et al., Geographic and socioeconomic diversity of food and nutrient intakes: a comparison of four European countries. *Eur J Nutr.* 2019 Jun;58(4):1475-1493.
10. Fayet-Moore F, Cassettari T, Tuck K, McConnell A, Petocz P. Dietary Fibre Intake in Australia. Paper I: Associations with Demographic, Socio-Economic, and Anthropometric Factors. *Nutrients.* 2018 May 11;10(5):599.
11. Auestad N, Hurley J, Fulgoni VL, et al. Contribution of Food Groups to Energy and Nutrient Intakes in Five Developed Countries. *Nutrients.* 2015 Jun 8;7(6):4593-618.
12. Murphy N, Norat T, Ferrari P, et al. Dietary fibre intake and risks of cancers of the colon and rectum in the European prospective investigation into cancer and nutrition (EPIC). *PLoS One.* 2012;7:e39361.
13. Wang HJ et al. Trends in dietary fiber intake in Chinese aged 45 years and above, 1991-2011. *Eur J Clin Nutr.* 2014 May; 68(5):619-22.
14. Flores M, Macias N, Rivera M, et al. Dietary patterns in Mexican adults are associated with risk of being overweight or obese *J Nutr.* 2010 Oct;140(10).
15. Dehghan M, Martinez S, Zhang X, Seron P, et al. Relative validity of an FFQ to estimate daily food and nutrient intakes for Chilean adults. *Public Health Nutr.* 2013 Oct;16(10):1782-8.
16. Sardinha AN, Canella DS, Martins AP, et al. Dietary sources of fiber intake in Brazil. *Appetite.* 2014 Aug;79:134-8.
17. Katagiri R, Goto A, Sawada N, Yamaji T, Iwasaki M, Noda M, Iso H, Tsugane S. Dietary fiber intake and total and cause-specific mortality: the Japan Public Health Center-based prospective study. *Am J Clin Nutr.* 2020 May 1;111(5):1027-1035.
18. Canene-Adams K, Laurie I, Karnik K, Flynn B, Goodwin W, Pigat S. Estimating the potential public health impact of fibre enrichment: a UK modelling study. *Br J Nutr.* 2022 Jan 7;128(9):1-7. .
19. Kaczmarczyk MM, Miller MJ, Freund GG. The health benefits of dietary fiber: beyond the usual suspects of type 2 diabetes mellitus, cardiovascular disease and colon cancer. *Metabolism.* 2012 Aug;61(8):1058-66. .
20. Costabile A, Bergillos-Meca T, Rasinkangas P, Korpela K, de Vos WM, Gibson GR. Effects of Soluble Corn Fiber Alone or in Synbiotic Combination with *Lactobacillus rhamnosus* GG and the Pilus-Deficient Derivative GG-PB12 on Fecal Microbiota, Metabolism, and Markers of Immune Function: A Randomized, Double-Blind, Placebo-Controlled, Crossover Study in Healthy Elderly (Saimes Study). *Front Immunol.* 2017 Dec 12;8:1443.
21. Prokopidis K, Giannos P, Ispoglou T, Witard OC, Isanejad M. Dietary Fiber Intake is Associated with Cognitive Function in Older Adults: Data from the National Health and Nutrition Examination Survey. *Am J Med.* 2022 Aug;135(8):e257-e262. 20.
22. Cervantes-Pahm SK, Kim BG, Stein HH. Digestible energy in resistant starch and dietary fiber sources fed to pigs. *J. Anim. Sci.* 2009;87, E-Suppl. 2.
23. Maathuis A, Hoffman A, Evans A, et al. The effect of undigested fraction of maize products on the activity and composition of the microbiota determined in a dynamic in vitro model of the human proximal large intestine. *J Am Coll Nutr.* 2009;28:657-66.
24. Titoria P, Gibson P, Komitopoulou E, et al. Understanding Prebiotics. Confidential Collaborative Project In House Final Report No. 120368. Leatherhead Food International. March 2007.
25. Hoffman AJ. In vitro Testing of Functional Dietary Fiber Ingredients at the University of Illinois. In House Report Jan 31, 2006.
26. Wallace TC, Marzorati M, Spence L, Weaver CM, Williamson PS. New Frontiers in Fibers: Innovative and Emerging Research on the Gut Microbiome and Bone Health, *J Am Coll Nutr.* 2017;36:3,218-222.

27. Konings E, Schoffelen PF, Stegen J, Blaak EE. Effect of polydextrose and soluble maize fibre on energy metabolism, metabolic profile and appetite control in overweight men and women. *Br J Nutr.* 2014 Jan 14;111(1):111-21.
28. Boler BM, Seroo MC, Bauer LL, Staeger MA, Boileau TW, Swanson KS, Fahey GC Jr. Digestive physiological outcomes related to polydextrose and soluble maize fibre consumption by healthy adult men. *Br J Nutr.* 2011 Dec;106(12):1864-71
29. Housez B, Cazaubiel M, Vergara C, et al. Evaluation of digestive tolerance of a soluble corn fibre. *J Hum Nutr Diet.* 2012
30. Sanders L, Kendall C, Maki K, et al. A novel maize-based dietary fiber is well tolerated in humans. *FASEB J.* 2008;22:1b761.
31. Stewart ML, Nikhanj SD, Timm DA, et al. Evaluation of the effects of four fibers on laxation, gastrointestinal tolerance and serum markers in health humans. *Ann Nutr Metabol.* 2010;56:91-98.
32. Klosterbuer AS, Hullar MA, Li F, Traylor E, Lampe JW, Thomas W, Slavin JL. Gastrointestinal effects of resistant starch, soluble maize fibre and pullulan in healthy adults. *Br J Nutr.* 2013 Sep 28;110(6):1068-74. doi: 10.1017/S0007114513000019. Epub 2013 Feb 7. PMID: 23388502.
33. Risso D, Kaczmarczyk M, Laurie I, Mah E, Blonquist T, Derrig L, Karnik K. Moderate intakes of soluble corn fibre or inulin do not cause gastrointestinal discomfort and are well tolerated in healthy children; *International Journal of Food Sciences and Nutrition*; 2022.
34. Timm DA, Thomas W, Boileau TW, et al. Polydextrose and soluble corn fiber increase five-day fecal wet weight in healthy men and women. *J Nutr.* 2013;143:473-478.
35. Gibson, G., Hutkins, R., Sanders, M. et al. Expert consensus document: The International Scientific Association for Probiotics and Prebiotics (ISAPP) consensus statement on the definition and scope of prebiotics. *Nat Rev Gastroenterol Hepatol* 14, 491-502 (2017).
36. Costabile A, Deaville ER, Morales AM, Gibon GR. Prebiotic Potential of a Maize-Based Soluble Fibre and Impact of Dose on the Human Gut Microbiota. *PLoS One.* 2016;11(1):e0144457. Published 2016 Jan 5.
37. Weaver CM et al. The National Osteoporosis Foundation's position statement on peak bone mass development and lifestyle factors: a systematic review and implementation recommendations. *Osteoporos Int.* 2016 Apr;27(4):1281-1386.
38. Whisner CM, Martin BR, Nakatsu CH, McCabe GP, McCabe LD, Peacock M, Weaver CM. Soluble maize fibre affects short-term calcium absorption in adolescent boys and girls: a randomised controlled trial using dual stable isotopic tracers. *Br J Nutr.* 2014;112:446-56.
39. Whisner CM, et al. Soluble Corn Fiber Increases Calcium Absorption Associated with Shifts in the Gut Microbiome: A Randomized Dose-Response Trial in Free-Living Pubertal Females. *J Nutr.* 2016;146:1298-306.
40. Jakeman SA, et al. Soluble corn fiber increases bone calcium retention in postmenopausal women in a dose-dependent manner: a randomized crossover trial. *Am J Clin Nutr.* 2016;104:837-43.
41. Weaver CM, Martin BR, Story JA, et al. Novel fibers increase bone calcium content and strength beyond efficiency of large intestine fermentation. *J Agri Food Chem.* 2010;58:8952-8957.
42. Kendall C, Esfahani A, Hoffman A, et al. Effect of novel maize-based dietary fibers on postprandial glycemia and insulinemia. *J Am Coll Nutr.* 2008;27:711-8.
43. Tan WSK et al. The role of soluble corn fiber on glycemic and insulin response. *Nutrients.* 2020;30;12(4):961.
44. Knapp B. Select Novel Carbohydrates Affect Glycemic and Insulinemic Response, Energy Value, and Indices of Gut Health as Measured Using Canine, Avian, Rodent, and in vitro Model Systems. Dissertation. Submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy in Animal Sciences. University of Illinois, Urbana-Champaign, 2010
45. Canene-Adams K et al. A Randomized, Double-Blind, Crossover Study to Determine the Available Energy from Soluble Fiber. *J Am Coll Nutr.* 2021 Jul;40(5):412-418
46. Bassaganya-Riera J et al. Soluble fibers and resistant starch ameliorate disease activity in interleukin-10-deficient mice with inflammatory bowel disease. *J Nutr.* 2011 Jul;141(7):1318-25.
47. Van Hul M et al. Comparison of the effects of soluble corn fiber and fructooligosaccharides on metabolism, inflammation, and gut microbiome of high-fat diet-fed mice. *Am J Physiol Endocrinol Metab.* 2020 Oct 1;319(4):E779-E791.
48. Internal research for Tate & Lyle conducted by Qualtrics; 8,800 global respondents (800 per country), 2015 (Turkey and Saudi Arabia 2016).

Nutrition Centre

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