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Reply. Performance of in vitro blood flow models. In vitro models are used to study the pathogenesis of vascular disease, and facilitate investigations into molecular and cellular aspects of tissue remodelling. This study examines how well known and well accepted in vitro blood flow models perform. Newtonian and non-Newtonian viscosity coefficients were determined at different shear rates for both 3-D and 2-D models at cell culture densities. Shear rate sensitivities were similar in the majority of cases for both 2-D and 3-D models, but some models were slightly more sensitive. Models were found to be insensitive to flow rates over the range studied, but some models performed better with lower flow rates. Glycaemic and insulinemic responses to various glucose load regimens in normal human subjects. The use of meal replacement products may lead to nutritional deficiencies, particularly of essential nutrients, as a result of altered nutrient profiles. In order to better understand the influence of macronutrient composition on the metabolic response, the glycaemic and insulinaemic responses to different glucose load regimens were assessed in normal human subjects. This was a randomised, cross-over, single dose study. Sixteen healthy subjects received a carbohydrate-based meal replacement formula (CRF) and

a purified formula with the same energy and carbohydrate content (PUR). Each formula contained glucose, sucrose, lactose, maltodextrin, protein, fat, calcium, magnesium, vitamin D and zinc in a fixed ratio. Blood samples were taken at 30 and 60 min after the meal to assess blood glucose, plasma insulin, triglycerides and cholecystinin (CCK) levels. The CRF-induced changes in blood glucose were significantly higher than with the PUR-based formula. Insulin and CCK responses were similar between the 2 meals. CRF provided an approximately 30% faster gastric emptying compared with the PUR-based formula. The results of this study indicate that a carbohydrate-based meal replacement formula, compared with a purified formula, results in a greater blood glucose response following a meal. Further, the CRF-induced hypoglycaemia in these healthy subjects was significantly higher than with the PUR-based formula, indicating a significant risk of hypoglycaemia. The results of this study also indicate that, within the macronutrient requirements of normal healthy individuals, the bioavailability of carbohydrate and fat differs, which may have implications for designing dietary regimes.1. Field of the Invention c6a93da74d

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