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4	Inclusion of ancient Latin-American crops to bread formulation					
5	improves intestinal iron absorption and modulates inflammatory					
6	markers					
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25 Abstract

This study compares iron (Fe) absorption in Fe-deficient animals from bread 26 formulations prepared by substitution of white wheat flour (WB) by whole wheat flour 27 (WWB), amaranth flour (Amaranthus hypochondriacus, 25%) (AB) and quinoa flour 28 29 (Chenopodium quinoa, 25%) (QB), or chia flour (Salvia hispanica L, 5%) (ChB). 30 Hematological parameters of Fe homeostasis, plasmatic active hepcidin peptide production (LC coupled to Ms/Ms), and liver TfR-2 and IL-6 expression (RT-qPCR) 31 were determined. The different bread formulations increased Fe content between 14% 32 33 and 83% relative to white bread. Only animals fed with WWB, AB and ChB increased significantly haemoglobin concentrations. Feeding the different bread formulations did 34 not increase hepcidin levels, but down-regulated TfR2 (except WWB) and IL-6 (except 35 QB) expression levels. Only AB and ChB had significant influence favoring on Fe 36 37 bioavailability at the investigated level of substitution. The potential contribution of these flours would not differ considerably from that of WWF. 38

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40 Keywords: Iron absorption, bread, amaranth, quinoa, chia, phytates.

42 **1. Introduction**

Iron (Fe) deficiency is a major cause of detrimental health effects in children and 43 women of reproductive age because, among other, impairing mental and psychomotor 44 development, increasing both morbidity and mortality of mother and child and 45 decreasing work performance.¹ This worldwide health problem shows that Fe-46 47 deficiency continues to be a problem and points to the need of developing preventive 48 nutritional intervention strategies in relation to this micronutrient. A desirable, easy and low cost strategy to prevent Fe-deficiency is, when possible, dietary diversification to 49 50 promote the consumption of available mineral-rich foods.

51 Cereals constitute a good source of iron and bread, as staple food with high consumption frequency, can serve as a good vehicle to combine those with natural 52 ingredients improving its nutritional value. Nutritional and chemical composition 53 54 analyses indicate that the pseudocereals, among other, amaranth (Amaranthus cruentus) and quinoa (*Chenopodium quinoa*), as well as oliseeds such as chia (*Salvia hispanica L*) 55 56 can represent a healthier alternative to frequently used wheat grain in bread formulations. For example, there have reported 2.8- and 1.7-fold higher Fe contents in 57 amaranth and guinoa seeds than in wheat grains, respectively.² Whole amaranth flour 58 (WAF) used in bread formulation increases the Fe content in bread samples up to 2.3-59 fold (43.8 μ g/g) in comparison to white bread.³ There have been quantified 29.5 μ g/g 60 Fe concentrations in guinoa grains that are higher than those values found in rice (13.2 61 $\mu g/g$) and finger millet (21.3 $\mu g/g$).⁴ In this line, the oilseed chia is also a good source 62 of Fe (164.0 mg/g) and once processed its flour can provide up to 20.4 mg/g.⁵ 63 Additionally, the breads containing pseudocereals have also significant higher levels of 64 protein, fat and fibre than white bread, even at low levels of substitution. Moreover, the 65

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attributes of these breads conform to the expert's nutritional recommendations for thegluten-free diet and gluten-free foods.

Only scarce in vivo studies have been performed about to what extent the 68 pseudocereals (amaranth or guinoa) impact the nutritional iron status.^{6,7} Currently, it is 69 70 assumed the higher nutritional value of pseudocereals and the oilseed chia; however, 71 there is a lack of data supporting their positive influence improving the nutritional Fe status of iron-deficient experimental models. Pseudocereals as well as conventional 72 cereals carry a significant amount of phytic acid, a potent inhibitor of Fe bioavailability. 73 ^{8,9} However, the absorption of dietary Fe is also regulated by physiological factors, 74 among other, bioactive hepcidin peptide. 10-12 The latter is a key regulator of Fe 75 metabolism associated to acute phase inflammatory processes within the gut-liver axis. 76 ^{11,13} However, understand the interaction of phytic acid and hepcidin on Fe absorption is 77 not straightforward. For example, there have been reported similar percentages of Fe 78 absorption in girls and boys after consumption of two different diets with a 2.6-fold 79 unfavourable ratio phytic acid/Fe.⁶ Phytic acid has shown to exhibit protective action 80 and attenuate inflammation in several different rodent models of Parkinson's disease ¹⁴ 81 and cancer¹⁵. These diseases constitute pathological conditions where hepcidin plays an 82 important role favouring metal dyshomeostasis and inflammation.^{16,17} 83

Although there is a number of differences concerning Fe absorption in rats compared with humans limiting their predictive value in relation to human responses, ¹⁸ it is worth to study and understand the phytic acid-Fe interactions in foods with high nutritional potential. Herein, it was used a nutritionally-induced iron deficient animal model that exhibits comparable responses of regulatory factors of systemic Fe homeostasis that involve liver transferrin receptor-2 and hepcidin. ^{11,12,19}

The present study evaluated the absorption of Fe contained in several different bread formulations containing amatranth, quinoa or chia. The different bread formulations were also compared according to their influence on hepatic pro-inflammatory hepcidin peptide secretion that exerts a critical control on intestinal Fe absorption and hepatic metabolism.

95

96 2. Material and methods

2.1 Breadmaking. Commercial Spanish wheat flour and whole wheat flour were
purchased from the local market (La Meta, S.A., Spain) as well as quinoa kernels
(*Chenopodium quinoa*) (Ecobasic – Bio, S.L., Spain), amaranth kernels (*Amaranthus hypochondriacus*) (Corporación Proteína Americana, SCRL, Tehuacán Puebla, Mexico)
and chia seeds (*Salvia hispanica*) (Primaria Raw Matrials, Valencia-Spain).
Compressed yeast (*Saccharomyces cerevisiae*, Levamax, Spain) was used as a starter in
identical breadmaking processes according to previously established processes. ^{3,20,21}

2.2 Determination of phytates. $InsP_6$ present in flours and the remaining $InsP_6$ in bread were purified by ion-exchange chromatography and measured by the HPLC method described by Sanz-Penella et al. ³ Identification of phytates was achieved by comparison with standards of phytic acid di-potassium salt (Sigma-Aldrich, St. Louis, MO). Samples were analyzed in triplicate.

2.3 Determination of iron. The total Fe concentration in bread samples was determined using a flame atomic absorption spectrometer at the Servei Central de Suport a la Investigació Experimental from the Universitat de València. Previously, samples were placed in a Teflon perfluoroalkoxy (PFA) vessel and treated with 1 ml HNO₃ (14 M, Merck) and 1 ml of H₂O₂ (30 % v/v, Panreac Quimica, Spain). The Teflon PFA vessel was irradiated at 800 W (15 min at 180°C) in a microwave

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accelerated reaction system (MARS) from CEM (Vertex, Spain). At the end of the
digestion program, the digest was placed in a tube and made up to volume with 0.6 M
HCl (Merck). Samples were analyzed in triplicate (n=3).

2.4 Animals. Forty-two female Wistar albino rats, aged 3 weeks with an average weight of 61.4 ± 5.6 g were obtained from the University of Valencia Animal Service. Animal experiments were carried out in strict accordance with the recommendations included in the Guide for the Care and Use of Laboratory Animals of University of Valencia (SCSIE, University of Valencia, Spain) and the protocol was approved by its Ethic Committee (A1351244049254).

2.5 Experimental design. Animals were randomly distributed into eight different 124 groups (n=7 per group), (1) a control group receiving a standard AIN-93G diet, and 125 126 seven iron-deficient groups receiving a AIN-76A diet (Harlan) for 15 days that were 127 subjected to different treatments: (2) iron-deficient group; (3) administered with $FeCl_3$ (2.5 mg), or administered with different bread formulations to provide a similar amount 128 129 of the micronutrient, (4) white bread; (5) amaranth flour-containing bread; and (6) chia 130 flour-containing bread; (7) quinoa flour-containing bread; and (6) whole wheat flourcontaining bread. A 0.1 g aliquots of the different samples were administered 131 intragastrically (gavage) three times per day during two consecutive days. The rats were 132 133 maintained in an environment of controlled temperature (21–23 °C), humidity (55%) and light (12 h)-dark (12 h) cycle, with ad libitum food and mineral-free water 134 available. Records of weight and food intake were collected daily. After treatment, rats 135 were anaesthetised (isofluran) and sacrificed by exsanguination. Whole blood samples 136 137 were preserved in EDTA-treated tubes for haematological analyses and the rest of the 138 blood was used for hepcidin peptide quantification. Sections (±100 mg) of the liver

were immersed in RNA later buffer (Qiagen, CA, USA) and snap-frozen in liquidnitrogen for gene expression analyses.

2.6 Hemoglobin (Hb) measurement. Hb concentrations were measured photometrically using cyanmethemoglobin standard solution according to the manufacturer's instructions (Sigma-Aldrich). This method is based on the oxidation of Hb and its derivatives (except sulfhemoglobin) to methemoglobin in the presence of potassium ferricyanide to form cyanmethemoglobin. The absorbance, measured at 540 nm, is proportional to the total Hb concentration.

2.7 Hematological parameters. The number of erythrocytes was calculated by 147 using a Neubauer improved cell counting chamber and hematocrit was estimated by 148 centrifugation of whole blood in microcapillar tubes. The mean corpuscular volume 149 (MCV) was calculated using the following equation: (hematocrit x 10)/number of 150 erythrocytes (10^6 per mm³ blood), and mean corpuscular Hb (MCH) (%) as: 151 (hemoglobin $(g/dL) \ge 100$)/hematocrit. The globular sedimentation speed (VSG) was 152 153 determined according to Westergren's method as proposed by the International Council for Standardization in Hematology (ICSH). 154

2.8 Reverse transcription and real-time PCR analyses. ¹² Total mRNA was 155 extracted from liver tissue samples using an RNeasy mini kit (Qiagen, USA) following 156 the protocol provided by the manufacturer. One microgram of total mRNA was 157 158 converted to double-stranded cDNA using AMV Reverse Transcriptase (Promega, USA). PCR was performed with primers designed for the following *Rattus norvegicus* 159 genes: TfR2 (forward: 5'- GGC AGA GTG GTC GCT GGG TG -3'; reverse: 5'- GGC 160 CAG AGC TCG GCA GTG TG -3'); IL-6 (forward: 5'-TCT CGA GCC CAC CAG 161 GAA C -3'; reverse: 5'-AGG GAA GGC AGT GGC TGT CA -3') and β -actin (forward 162 5'- CTC TTC CAG CCT TCC TTC CT-3'; reverse 5'- TAG AGC CAC CAA TCC 163

ACA CA-3'), the latter was used as a housekeeping gene. The PCR mix (20 µL reaction volume) consisted of 7.5 µL SYBR Green I master mix, 1.3 µmol/L primers, and 2.5 µL cDNA. PCR reactions were performed in triplicate in a LightCycler[®] 480 (Roche) with the following program: 1 cycle at 95 °C for 5 min, 35 cycles at 60 °C for 20 s and 72 °C for 45 s. The relative mRNA expression of the tested genes was normalized using βactin as housekeeping gene applying the $2^{-\Delta Cp}$.

2.9 Quantification of hepcidin in plasma (LC-Ms/Ms). All sample preparation 170 steps were performed at room temperature as previously described. ¹¹ Aliquots (50 µL) 171 of plasma were pipetted into 200 μ L cone tubes and a 100 μ L aliquot of acetonitrile 172 (Burdick and Jackson, Muskegon, MI) was added to each tube and mixed by pipetting. 173 The samples were then centrifuged at 3,000 xg for 10 minutes at 4°C (Jouan, 174 Winchester, VA). After centrifugation, the protein precipitation supernatant (100 μ L) 175 was mixed with 0.02% (v/v) aqueous acetic acid and injected on an Agilent HPLC 176 177 system connected on line to an Esquire-LC electrospray system equipped with a quadrupole ion trap mass spectrometer (Bruker Daltonics, Billerica, MA). The HPLC 178 179 system was equipped with a quaternary pump, an in-line degasser, an automatic injector, and a variable wavelength absorbance detector set at 214 nm (1100 Series, 180 181 Agilent Technologies, Waldbronn, Germany). The column used in these analyses was a BioBasic C18 5 µm 4.6x250 mm (Thermo, Waltham, MA, USA). The mobile phases 182 consisted of trifluoroacetic acid/isopropanol/water (0.125/1/500) (A) and trifluoroacetic 183 184 acid/isopropanol/water/methanol/acetonitrile (0.125/1/50/350/100) (B). Aliquots (50 μ L) of the precipitation supernatants were injected in each cycle and the analysis was 185 performed with the following gradient (minutes, %B): 0, 5; 30, 90; 33, 100; 35, 0; 40, 186 90; 45, 5. 187

The m/z spectral data were processed and transformed to spectra representing mass values using the program Data Analysis version 3.0 (Bruker Daltonics). BioTools version 2.1 (Bruker Daltonics) software was used to process the Ms/Ms spectra and to perform peptide sequencing. Two independent samples from each animal were analyzed.

193 2.10 Statistical analysis. Statistical analyses were performed using SPSS v.15 software (SPSS Inc., Chicago, IL, USA). One-way analysis of variance (ANOVA) and 194 the Tukey *post hoc* test were applied. Variance analysis by one-way method was used to 195 196 compare the influence of feeding different bread formulations in the iron-deficient groups of animals. Individual means were tested using pair-wise comparison with 197 198 Tukey's multiple comparison tests when effects were significant. Statistical significance was established at P < 0.05 for all comparisons. Data are expressed as mean \pm standard 199 200 deviation.

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202 **3. Results**

3.1 Micronutrient contribution of bread formulations and influence on 203 204 hematological parameters. Total iron (Fe) and phytate ($InsP_6$) content in different 205 bread formulations are shown in **Table 1**. Substitution of wheat flour by the different 206 types of flour increased Fe content between 14% and 83% relative to control (white 207 bread, WB). The concentration of $InsP_6$ also increased following the gradation: AB > WWB > QB > ChB. However, concentration of $InsP_6$ was below the quantification limit 208 in WB samples. When considering the total Fe contents and $InsP_6$ concentration in the 209 different bread formulations there can be calculated values for the ratio InsP6/Fe that 210 are ranged between 1.6 and 4.7. These values are markedly higher than the critical value 211 (>1) established as inhibitory for Fe uptake.²² Thus, there can be expected low 212

bioavailability values for the micronutrient from bread formulations with the differentflours from the pseudocereals (amaranth and quinoa) or chia used.

Animals fed with the iron-deficient diet alone exhibited significant lower 215 hemoglobin (Hb) concentrations in relation to control animals (Table 2). In agreement 216 with previous studies there was detected no significant alterations in the hematocrit ¹² 217 218 that is estimated to appear feeding the iron-deficient diet for longer periods (>20 days). ²³ Nevertheless, there was a significant decrease in the mean corpuscular hemoglobin 219 concentration (MCH) (P < 0.05) in animals receiving the Fe-deficient diet. Animals 220 221 administered with the supplement of Fe alone showed significant increases in Hb (46%) and MCH (42%). Whereas iron deficient (ID) animals fed with AB and ChB also 222 showed increased Hb concentration those fed WWB as well as WB or OB did not 223 increased their Hb values indicating the lower bioavailability of the micronutrient from 224 these samples. Only those animals fed ChB showed significant increases in MCH 225 values; however, all other groups of treatment showed increasing trends (p>0.05) for 226 227 MCH values. In ID animals, MCV values were increased in those groups administered with AB, ChB and QB. There were not detected significant (P>0.05) differences neither 228 in body weight nor number of erythrocytes among the different experimental animal 229 230 groups (data not shown).

3.2 Influence of bread formulations on plasma active hepcidin peptide and hepatic biomarkers. The active hepcidin peptide was identified by sequencing its amino acid backbone by using a previously optimized protocol for analysis in rat serum 11 (Figure 1). The consumption of the ID diet did not cause significant (*P*>0.05) alterations in bioactive hepcidin peptide production relative to control animals. Notably, animals administered with the supplement of Fe alone exhibited significantly increased (1.4-fold) circulating hepcidin concentrations. Animals administered with the different

bread formulations did not provoke significant elevations in the circulating
concentration of hepcidin demonstrating the physiological liver inflammatory response
associated to intrahepatic iron accumulation. ¹¹ Serum hepcidin displays an inverse
relationship with Fe intestinal absorption either from foods or dietary supplements. ¹⁰

Changes in hepatic transcripts (mRNA) of transferrin receptor (Tfr)-2 and interleukin (IL)-6 in the different groups of treatment are shown in **Figure 2**. The administration of all bread formulations, except WWB, down-regulated the expression levels of Tfr2 that relies information on plasmatic concentrations of the micronutrient. ²⁴ Overall, animals from the different groups of treatment showed down-regulated expression levels of IL-6 that is a key inducer of hepatic acute-phase protein production and plays an important role in haematopoiesis, inflammation and immune regulation. ¹³

249

250 4. Discussion

Pseudocereals and oilseeds are increasingly used to obtain flours and supplement 251 bread formulations in order to improve their nutritional value. The quantification of 252 total Fe in the analyzed bread formulations is in good agreement with previous studies 253 supporting the nutritional profiles of quinoa (Chenopodium quinoa), amaranth 254 (Amaranthus Caudatus)^{21,25,26,27}, and chia as rich sources of the micronutrient.²⁰ In the 255 scientific literature scarce *in vivo* studies evaluated the impact of amaranth grains ^{3,7} or 256 quinoa on the nutritional iron status.⁶ In accordance with these previous studies the data 257 reported in this study point out significant differences in Fe bioavailability from the 258 different bread formulations. These differences are supported by the different ratios 259 (values from 0.76 to 1.1) that can be calculated between Hb concentrations in animals 260 fed with bread formulations and those administered with a reference dose of inorganic 261 Fe. Previous data from experimental models also reported a low or negligible influence 262

of amaranth improving the bioavailability of the micronutrient to growing Sprague-Dawley weaning male rats. 28,29 Intervention studies in human subjects without ID that were fed with cereals fortified with 2.5 mg Fe as FeSO₄ it was also demonstrated low bioavailability values (<1%) for the several different cereals studied, among other, bitter and sweet quinoa. ⁶ Additional data from human studies confirmed a 1.6-fold higher Fe absorption ratio from wheat than quinoa infant cereals ⁸ that results similar to the 1.1-

fold higher Hb concentration found in ID animals fed with WWB in relation to QB.

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An important variable, when monitoring iron absorption for different cereal grains, is 270 271 the nature and phytic acid (or phytates) concentration of the sample. In this study it was observed significant differences in $InsP_6$ concentration between the different breads that 272 were not reflected in significant changes in Hb. For example, amaranth flour provided 273 4.6-fold higher $InsP_6$ content than flour from chia (Table 1), but animals administered 274 275 with bread formulations containing either amaranth or chia showed similar Hb concentrations (Table 2). However, both bread formulations improved the nutritional 276 277 status of animals in relation to ID animals and those administered with white bread. These results contrast with the scarce studies existing where it is shown that 278 supplementation with amaranth did not increased Fe absorption despite a large increase 279 280 in iron intake (by 5.6-fold) and more favourable phytate: iron molar ratio (3:1 versus 5:1) than controls after an intervention period of 16-wk. ^{28,29} In the majority of 281 282 published studies about the negative interaction of phytate on Fe bioavailability, there has been established a desirable ratio $InsP_6/Fe$ of <0.4/1 as a critical value determining 283 the inhibitory effect of phytate.⁹ Thus, the addition of amaranth grain flour to maize-284 based porridge did not improve the nutritional Fe status in ID children.⁷ In vitro studies 285 have shown that can be defined a critical proportion of amaranth flour to be used in 286 bread formulations favouring Fe bioavailability as indicated by the ferritin 287

concentrations quantified in cell cultures.³ The bioaccessible phytate/Fe molar ratio 288 rather than phytate content in the bread samples explained the amaranth flour-mediated 289 inhibitory effect on the available Fe. There has been reported in the literature a great 290 disparity in the concentration of phytates in amaranth grains (4.8-34.0 µmol/g). ^{3,30} In 291 the present study, the amount of $InsP_6$ in the bread with 25% of amaranth was 3.7 292 umol/g and seemed to exert low inhibitory effects on Fe bioavailability. Thus, allowing 293 294 us to hypothesize that low $InsP_6$ concentrations are released during duodenal transit where it takes place most of micronutrient uptake. Additionally, in vitro studies 295 evidenced that simple carbohydrates such as fructose can increase Fe uptake in human 296 intestinal Caco-2 and HepG2 cells based on protein ferritin synthesis. ³¹ These studies 297 are in line with recent experimental data demonstrating that structural differences of 298 prebiotic fibres influence Fe uptake to ID animals.¹² Thus, studies in this line are 299 advisable to understand the nutritional implications of their use in bread formulations 300 given that pseudocereals have been suggested as healthier alternatives to white bread to 301 better control the glycemic index.³² 302

Inflammation is an important contributor to the development of chronic diseases. 303 Thus, it was examined whether ancient Latin-American crops-containing bread 304 formulations were associated with lower concentrations of inflammatory markers, 305 306 which play a key role in intestinal Fe absorption and liver metabolism. The observation that pseudocereals-based bread formulations decreased plasmatic levels of hepcidin 307 bioactive peptide (Fig. 2) suggests that the release from bread formulations of a high 308 proportion of compounds able to chelate the micronutrient preventing the hepcidin-309 310 mediated inhibition of intestinal absorption. This suggestion is supported by the downregulation of mRNA expression levels of TfR2 (Fig. 2) that serves as a body Fe sensor 311 of plasmatic concentration of the micronutrient. ^{11,24} Decreased concentrations of TfR 312

have also been quantified in ID children even after they received a multi-micronutrient 313 powder (2.5 mg Fe/day).⁷ Experimental models as well as human studies have 314 demonstrated the inverse relationship between serum hepcidin concentration and Fe 315 absorption from food and supplemental sources.^{10,11} The low inflammatory potential 316 317 estimated for the pseudocereals is in line with the reported anti-inflammatory effects of amaranth ³³ and guinoa ³⁴ in THP-1 human-like and mouse RAW 264.7 macrophages. 318 Anti-inflammatory effects of pseudocereals could be probably attributed to the 319 production of bioactive peptides or released saponins during processing. Additionally, 320 321 human studies demonstrated that quinoa is well tolerated by patients with inflammatory autoimmune-based intestinal disorders such as celiac disease.³⁵ The low inflammatory 322 potential of pseudocereals is reflected in the low transcripts (mRNA) of IL-6 (Fig. 2) 323 that can have important nutritional consequences. It has been previously reported an 324 inverse association of IL-6 levels with plasma Fe concentration and transferrin 325 saturation together with increased ferritin in the liver. ³⁶ Recent human data 326 demonstrated the critical influence of quantity and quality of dietary carbohydrates 327 favouring increased concentrations of pro-inflammatory cytokines such as IL-6.³⁷ 328

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330 5. Conclusions

Most of existing data supporting beneficial nutritional effects of pseudocereals are based on their high content of nutrients, among other minerals. Notably, Fe absorption studies from both experimental and human intervention trials indicate poor bioavailability of the micronutrient from cereals. The data reported herein, on the administration of different bread formulations to iron deficient animals, show differences in Fe bioavailability. Except WWB and QB, bread formulations made with amaranth (AB) or chia (ChB) improved the Hb concentrations in relation to the WB.

However, taking into account the high content of minerals in the pseudocereals or chia, 338 the potential contribution of these whole flours would not differ considerably from that 339 of wheat flour. Notably, these data point out that incorporation of functional ingredients 340 like pseudocereals/chia in bread making strategies is associated with a positive 341 342 inflammatory profile preventing the hepcidin-mediated inhibition of Fe uptake at 343 intestinal level. Further studies and human trials are needed to gain a better 344 understanding of the potential nutritional influence of the carbohydrates-Fe interaction when using these flours in bread making strategies. 345

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471	Table 1. Iron and phytates ($InsP_6$) content in breads formulated with flours from
472	different origin. Values are expressed as mean \pm standard deviation (n=3). ^{a-e} Different
473	letters in the same column indicate statistical differences ($P < 0.05$). WB, white bread;
474	WWB, whole wheat bread; AB, bread with 25% amaranth flour; ChB, bread with 5%
475	chia whole flour; QB, bread with 25% of quinoa whole flour.

Sample	Iron (µmol/g)	InsP ₆ (µmol/g)	InsP ₆ /Iron ¹		
WB	0.42 ± 0.05 ^a	n.d.			
WWB	0.67 ± 0.03 ^b	2.57 ± 0.12^{b}	3.8>1		
AB	0.77 ± 0.08 ^c	3.65 ± 0.38 ^c	4.7>1		
ChB	0.48 ± 0.02^{a}	0.75 ± 0.03 ^a	1.6>1		
QB	$0.61\pm0.01^{\ ab}$	2.04 ± 0.04 ^b	3.3>1		

476 $^{-1}$ A maximum critical value of 1 has been established for the molar ratio Ins P_6 /Iron as

477 inhibitory for Fe uptake (Hurrell, 2004).

Table 2. Haematological parameters in iron-deficient (ID) and animals fed with FeCl₃ alone or together with different bread samples^a.

			Treatment					
	Control	ID	FeCl ₃ ^b	WB	WWB	AB	ChB	QB
Haemoglobin (Hb, g/dL)	18.9 ± 0.5a	11.1±2.7b	16.2±0.2a	12.3±0.2b	14.7±1.3ab	16.4±2.2a	17.4±2.8a	13.4±2.9ab
Haematocrit	$54.3\pm2.8a$	46.9±2.6a	51.2±2.5a	52.0±2.4a	49.0±3.9a	54.2±4.2a	$55.9\pm5.2a$	$61.3 \pm 7.3a$
MCV (x10 ⁻⁴)	1.68±0.04a	1.64 ±0.04a	1.71±0.04a	1.69±0.04a	1.70±0.04a	1.97±0.04bc	1.91±0.04b	2.07±0.04c
MCH (pg)	33.7±2.1a	20.3±5.5b	28.9±0.3a	25.3±5.9ab	27.9±4.6ab	26.2±4.1ab	31.2±5.0b	21.9±4.8ab

^aValues are presented as mean \pm standard deviation (n=5). Values following by the same letter in the same line are not statistically different (*P*<0.05). WB, white bread; WWB, whole wheat bread; AB, bread with 25% amaranth flour; ChB, bread with 5% chia whole flour; QB, bread with 25% of quinoa whole flour; MCV, mean corpuscular volumen; MCH, mean corpuscular Hb; ^bFeCl₃ dosed at 2.5 µg

Figure 1. Plasma hepcidin (Hamp) peptide concentrations in iron-deficient animals (ID) and administered with FeCl₃ or breads formulated with different flours. Values are expressed as mean and range (n=5). * Indicates statistical differences (P<0.05) in relation to iron deficient animals (ID).



Figure 2. Hepatic expression of transferring receptor (TfR2) and interleukin (IL)-6 in iron deficient (ID) animals and those administered with a supplement of iron (FeCl3) alone or the different bread formulations (white wheat, WB; whole wheat, WWB; amaranth, AB; chia, ChB; quinoa, QB). Results are expressed as mean \pm standard deviation (n=5). Superscript symbols indicate statistically (p<0.05) significant differences (*, TfR2; §, IL-6) relative to controls and between groups of treatment.

