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1	Postprandial suppression of appetite is more reproducible at a group
2	than an individual-level: implications for assessing inter-individual
3	variability
4	
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26

27 Abstract

28 Individual differences in appetite are increasingly appreciated. However, the 29 individual day-to-day reliability of appetite measurement is currently 30 uncharacterised. This study aimed to assess the reliability of appetite following 31 ingestion of mixed-macronutrient liquid meals at a group- and individual-level. 32 Two experiments were conducted with identical protocols other than meal 33 energy content. During each experiment, 10 non-obese males completed four 34 experimental trials constituting high- and low-energy trials, each performed 35 twice. Experiment one employed 579 kJ (138 kcal) and 1776 kJ (424 kcal) liquid 36 meals. Experiment two employed 828 (198 kcal) and 4188 kJ (1001 kcal) liquid 37 meals. Visual analogue scales were administered to assess appetite for 60 min 38 post-ingestion. The typical error (standard error of measurement) of appetite 39 area under the curve was 6.2 mm·60 min⁻¹ (95%CI 4.3 to 11.3 mm·60 min⁻¹), 6.5 40 mm (95%CI 4.5 to 11.9 mm·60 min⁻¹), 7.1 mm·60 min⁻¹ (95%CI 4.9 to 12.9 mm·60 41 min⁻¹) and 6.5 mm·60 min⁻¹ (95%Cl 4.5 to 11.8 mm·60 min⁻¹) with the 579, 828, 42 1776 and 4188 kJ meals, respectively. A systematic bias between first and 43 second exposure was detected for all but the 4188 kJ meal. The change in 44 appetite with high- vs. low-energy meals did not differ at a group level between 45 first and second exposure (mean difference: -0.97 mm 60 min-1; 95%CI -6.48 to 46 4.53 mm·60 min⁻¹), however, ~50% of individuals differed in their response with 47 first vs second exposure by more than the typical error. Appetite responses are more reliable when liquid meals contain a higher- vs lower-energy content. 48 49 Appetite suppression with high- vs low-energy meals is reproducible at the

- 50 group- but not individual-level, suggesting that multiple exposures to an
- 51 intervention are required to understand true individual differences in appetite.
- 52 **Key words:** Reliability; Hunger; Fullness; Personalized; Responder

53 Introduction

54 Understanding the regulation of appetite in humans can assist in the 55 development of strategies to prevent and/or treat disorders of energy balance 56 such as obesity. Subjective sensations of appetite are commonly captured using visual analogue scales (VAS), typically comprised of questions 57 58 attempting to assess perceptions of hunger, fullness, satisfaction and 59 prospective food consumption [1]. The methodology of administering these 60 scales before, and at regular intervals after the consumption of 61 meals/beverages, is supported as a standard and accepted tool to substantiate 62 claims relating to the effects of foods on feeling states and motivations to eat 63 [1]. In addition to assessing the effects of meal composition on appetite [2-6], 64 these methods have also been applied more widely, to assess the effects of 65 other interventions (such as acute [7-10] or chronic exercise [11], food 66 restriction [7, 9] and environmental conditions [12]) on the subjective appetite 67 response to a standard food or beverage.

68

69 Quantifying the day-to-day variability of a measure provides greater confidence 70 on whether an intervention is the cause of an observed effect, as opposed to 71 random (biological or behavioural) variability, measurement error or systematic 72 bias [13, 14]. The day-to-day reliability of appetite perceptions in response to a 73 meal - expressed as a coefficient of variation - has previously been reported to 74 be in the range of 7 to 28%, in healthy, lean men [15-17]. The typical error 75 (standard error of measurement) has been reported to be in the range of 8 to 76 13 mm·120 min⁻¹[17].

77

78 Mixed-macronutrient liquid meals are commonly used in appetite research as 79 "preloads" prior to ad libitum test meals, and covert manipulation of their energy 80 content is used to assess the "sensitivity" of appetite regulation [18]. Moreover, 81 liquid meals may produce more reliable appetite responses than semi-82 solid/solid meals [15-17]. Therefore, understanding the reliability of liquid meals 83 with differing energy content is required in order to prescribe an appropriate 84 preload energy content to detect subtle differences in appetite perceptions. 85 However, it cannot necessarily be assumed that a measure shown to be reliable 86 under one condition results in a reliable change in response to an intervention. 87 For example, the measurement of appetite could be reproducible in response 88 to a meal with a given energy content, but this does not provide insight into the 89 reliability of the *suppression* of appetite with high-vs low-energy preloads.

90

91 With the growth of personalised approaches to nutrition and medicine [19], an 92 increasing number of studies in the area of energy balance and appetite have 93 attempted to understand the inter-individual differences in response to an 94 intervention [20-25]. Whilst there is an increasing acknowledgement that 95 measurement error needs to be considered in the interpretation of individual 96 responses, there is still a common assumption that these individual responses 97 are replicable. For example, an individual described as a "low responder" upon 98 the first exposure to an intervention will remain a "low responder" upon repeated 99 exposure to an intervention. It has therefore been suggested that to directly 100 assess within-subject variability in response to an intervention, repeated 101 exposure with an adequate washout is required [26]. Indeed, this appears to be 102 relevant for appetite measurement, as the individual appetite response to a bout of exercise is not consistent enough to classify "compensators" and "noncompensators" [27]. The reliability of individual appetite responses to preloads
(inducing appetite suppression by nutrition) has never been documented.

106

The present study aimed to investigate the day-to-day reliability of appetite perceptions in response to mixed-macronutrient liquid meals differing in energy content. In addition, by capitalising on repeated exposure to high and lowenergy containing meals, it was also possible to assess both inter-individual variability and within-subject variability in appetite suppression with high-energy meals.

113

114 Methods

115 Study design

116 The data reported in this investigation are taken from two experiments 117 previously described [28], which were both conducted according to the 118 guidelines in the Declaration of Helsinki.

119

120 Both experiments involved a preload study design to investigate the influence 121 of ad libitum meal composition on the compensatory energy intake response to 122 different energy preloads. Both studies followed identical procedures, other 123 than the energy content of the preloads. Here, the individual data have been 124 rearranged to visit order to assess the day-to-day variability in appetite 125 responses to mixed-macronutrient meals differing in energy content but 126 matched for macronutrient composition and ingredients used. As previously 127 described [28], experiment one was conducted at the University of Bath (UK) 128 and utilised liquid meals containing a low (579 kJ; 138 kcal) and a moderate-129 energy content (1776 kJ; 424 kcal). Experiment two was conducted at Leeds 130 Beckett University (UK) and utilised liquid meals containing a low- (828 kJ; 198 131 kcal) and a high-energy content (4188 kJ; 1001 kcal). The use of different energy contents enabled comparisons to be made regarding the reliability of 132 133 subjective appetite measures in response to liquid meals of increasing energy 134 content. Each experiment was approved by the respective Institutional Ethics 135 Advisory Committee for the university at which experimental testing was 136 performed, and informed written consent was obtained from all participants.

137

138 **Participants and standardisation**

139 All participants were non-smokers, weight stable for at least six months before 140 participation and were not dieting or taking any medication. Participants had no 141 known history of cardiovascular or metabolic disease, were classified as 142 unrestrained eaters [29] and self-reported as recreationally active (engaging in 143 structured exercise or sport ≥ 3 times/week). Participant characteristics have 144 been previously reported [28] and are repeated for clarity. In experiment one the mean age, stature, body mass and body mass index were $22 \pm 1 y$, $1.80 \pm 100 y$ 145 0.06 m, 81.1 \pm 7.9 kg and 24.8 \pm 1.6 kg/m², respectively. In experiment two, the 146 147 mean age, stature, body mass and body mass index were 21 ± 4 y, 1.80 ± 0.05 m, 77.2 \pm 6.4 kg and 24.2 \pm 2.3 kg/m², respectively. 148

149

150 Diet and physical activity were standardised for 24 h prior to all trials by self-151 report and food diaries. Participants were asked to refrain from alcohol, caffeine and strenuous physical activity during this period. All trials commenced between 0800 and 0900 following an overnight fast (\geq 10 h).

154

155 **Experimental protocol**

At each testing location, 10 healthy men completed four experimental trials in a randomized (using online software: randomizer.org), double-blind, crossover design separated by ≥72 h. The four trials consisted of the low- or moderate/high-energy liquid meals each consumed on two occasions. Anthropometric measures, screening for eating behaviours [29] and selfreported habitual physical activity levels were obtained immediately before the first experimental trial.

163

164 Upon arriving at the laboratory for experimental trials, participants completed baseline visual analogue scales (VAS) to assess subjective appetite ratings 165 166 before consuming the mixed-macronutrient liquid meal within a 5 min period. 167 During the 60 min post-consumption, participants remained in the laboratory (seated and permitted to read or listen to music) whilst further VAS were 168 169 administered every 15 min to assess appetite sensations. Whilst participants 170 were not in isolation, any cues that could be seen to distort appetite perceptions 171 were prohibited, e.g. discussions or radio/television programmes about 172 food/appetite.

173

174 Liquid meals

175 Details of the mixed macronutrient liquid meals have been previously reported

in detail. Briefly, each meal contained an identical macronutrient composition,

177 but differed in energy content: 579 kJ (138 kcal) and 1776 kJ (424 kcal) in 178 experiment one and 828 kJ (198 kcal) and 4188 kJ (1001 kcal) in experiment two. The macronutrient distribution was 58% carbohydrate, 26% fat, 16% 179 180 protein comprised of single cream (Tesco, UK), maltodextrin (MyProtein, UK), whey protein isolate (MyProtein, UK), vanilla flavouring (MyProtein, UK) and 181 182 tap water. The mass of each liquid meal was 550 g. All meals were consumed 183 by participants in isolation. The meals were prepared by a third party external 184 to the experimental trials in an attempt to ensure blinding was successful. We 185 previously reported that participants were unaware of the energy content of the 186 liquid meals [28].

187

188 Appetite assessment

189 Appetite sensations (hunger, fullness, satisfaction and prospective food 190 consumption) were assessed at baseline and every 15 min following meal 191 ingestion using 100 mm VAS with descriptors anchored at each end describing 192 extremes (e.g. "I am not hungry at all" to "I have never been more hungry") [15]. 193 Participants rated their appetite by placing a vertical line intersecting each 194 horizontal line on paper and previous ratings were hidden to prevent the 195 influence of a prior rating on subsequent reporting. The VAS were analysed by 196 measuring the horizontal distance from the left-hand side of the scale to the 197 vertical line indicated by the participant. Each VAS was analysed twice to 198 maintain accuracy. A composite appetite score (herein referred to as "appetite" 199 alone) was calculated for each time-point as previously described [30].

200

201 Statistical analyses

Data were analysed using Prism v7 (Graphpad Software, CA) and Excel v14.6.6 (Microsoft, WA) and are presented as means \pm SD unless otherwise indicated. VAS ratings were converted into time-averaged area under the curve (AUC) values. Values are reported as 1) the absolute AUC, to compare the reliability across the different absolute energy content of meals; 2) as the satiety quotient (using µm rather than mm to equate to whole numbers [31]):

208 Satiety Quotient =
$$\frac{\text{baseline appetite } (\mu m) - \text{postprandial appetite AUC } (\mu m)}{\text{energy content of meal } (kJ)}$$

209 and 3) as the difference between the moderate/high energy meals compared 210 with the respective low-energy meals, to assess the reliability of appetite 211 suppression. Reliability at the group level was assessed using a variety of 212 statistical techniques [mean difference with 95% confidence intervals, typical 213 error (standard error of measurement) and Bland-Altman plots] [13, 14, 32]. 214 Coefficients of variation, expressed as a percentage (CV%) was also employed 215 to compare across meals of differing absolute energy content. To assess the 216 inter-individual variation in appetite suppression with high-energy vs low-energy 217 meals, the SD of the true individual response to high- vs low-energy meals 218 (SD_R) was used [33, 34]. This was calculated as:

$$SD_{R} = \sqrt{SD_{I}^{2} - SD_{C}^{2}}$$

where SD₁ is the SD of the difference between the high vs low-energy meals (intervention), and SD_c is the SD of the difference between the first and second exposure of the low energy meals (control). The SD_R was presented in both absolute units (mm \oplus 60 min⁻¹) with 95% CI [35], and also in text as standardised, using the baseline SD [34]. Paired t-tests were used to identify differences in means. Differences were considered significant when *p* < 0.05.

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226

227 Results

Absolute energy content of liquid meals

229 No differences in appetite perceptions were detected prior to ingestion of the 230 drinks in either study (70 \pm 12, 77 \pm 10, 72 \pm 11 and 74 \pm 10 mm for 579 kJ visit 231 one, 579 kJ visit two, 1776 kJ visit one and 1776 kJ visit two, and 72 \pm 9, 77 \pm 232 7, 72 \pm 10 and 74 \pm 9 mm for 828 kJ visit one, 828 kJ visit two, 4188 kJ visit one and 4188 visit two, respectively; p = 0.273 for between trial and p = 0.726233 234 for between testing site comparisons). A systematic bias between the first and 235 second exposure was detected for appetite AUC in response to meals with an 236 energy content of 579 kJ (138 kcal) (p = 0.02), 828 kJ (198 kcal) (p = 0.03) and 237 1776 kJ (424 kcal) (p = 0.02), whereby higher appetite ratings were reported 238 with the second exposure compared to the first exposure (Table 1; Figures 1A, 239 **1B and 1C**). In contrast, no systematic bias was apparent between the first and 240 second exposure with the 4188 kJ (1001 kcal) meal (p = 0.2; Table 1; Figure 241 **1D**). When expressed in absolute units, typical errors were comparable 242 between meals of different energy content (Table 1). However, when the satiety 243 quotient was employed, the typical errors were higher with low-energy meals, 244 compared to higher energy meals (Table 1).

245

246 Reliability of appetite suppression with moderate and large differences in

247 energy content

With a moderate difference in meal energy content (1197 kJ; 286 kcal), the change in appetite AUC was -1.1 ± 10.9 and -0.2 ± 6.9 mm·60 min⁻¹ with the first and second exposure, respectively. The mean difference in appetite AUC between the first and second exposure was 0.95 mm·60 min⁻¹ (95% CI -9.10 to
11.00 mm·60 min⁻¹), indicating that there was not a systematic bias with the first,
compared to the second exposure (Figure 2A). The typical error for appetite
AUC with a moderate difference in meal energy content was 9.9 mm·60 min⁻¹
(95% CI 6.8 to 18.1 mm·60 min⁻¹), which was similar to the typical error of
hunger, fullness, satisfaction and prospective consumption AUCs (Table 2).

257

With a large difference in meal energy content (3360 kJ; 803 kcal), the change 258 259 in appetite AUC was -8.3 ± 13.8 and -11.2 ± 14.8 mm·60 min⁻¹, with the first and 260 second exposure, respectively. The mean difference between the first and 261 second exposure was -2.90 mm·60 min⁻¹ (95% CI -9.53 to 3.73 mm·60 min⁻¹), 262 which suggests there was not a systematic bias between the first compared to 263 the second exposure (Figure 2B). The typical error with a large difference in meal energy content was 6.6 mm·60 min⁻¹ (95%CI 4.5 to 12.0 mm·60 min⁻¹), 264 265 which was similar to the typical error of hunger, fullness, satisfaction and 266 prospective consumption AUCs (Table 2).

267

268 Inter-individual variability

When data were combined from the two studies, the difference in the appetite AUC between moderate/high vs low energy liquid meals was -4.73 mm·60 min⁻¹ (95% Cl -10.66 to 1.21 mm·60 min⁻¹) with the first exposure (**Figure 3**). The SD_R for appetite AUC upon first exposure to high- vs low-energy meals was 9.4 mm·60 min⁻¹ (95% Cl 7.4 to 12.9 mm·60 min⁻¹; 1.1 in standardised units, 95% Cl 0.8 to 1.5). When participants were exposed to the two meals for a second time, the difference in appetite AUC between moderate/high- and low-energy meals 276 was -5.7 mm·60 min⁻¹ (95% CI -11.6 to 0.2 mm·60 min⁻¹), which at a group level 277 did not differ from the first exposure [mean difference = -0.97 mm·60 min⁻¹ 278 (95%Cl -6.48 to 4.53 mm·60 min⁻¹); p = 0.71) and the SD_R was similar to the first 279 exposure (9.2 mm·60 min⁻¹, 95% CI 7.3 to 12.7 mm·60 min⁻¹; standardized units: 280 1.0, 95% CI 0.8 to 1.4). However, when individual data are presented, there is 281 a large variability in individual responses to the first and second exposure 282 (Figure 3). For example, 10 of the 20 participants (50%) display a response to 283 the second exposure that differs from the first exposure by more than the typical 284 error.

285

286 Upon first exposure, the mean difference in ratings of hunger, fullness, 287 satisfaction and prospective consumption with high vs low energy meals were 288 -4.29 mm·60 min⁻¹ (95% CI -10.81 to 2.24 mm·60 min⁻¹), 5.72 mm·60 min⁻¹ (95% 289 CI -0.22 to 11.67 mm·60 min⁻¹), 2.83 mm·60 min⁻¹ (95% CI -5.6 to 11.26 mm·60 290 min⁻¹) and -6.09 mm·60 min⁻¹ (95% CI -12.04 to -0.15 mm·60 min⁻¹), respectively. With the second exposure, the mean difference in ratings of hunger, fullness, 291 292 satisfaction and prospective consumption were -7.03 mm·60 min⁻¹ (95% CI -293 14.64 to 0.59 mm 60 min⁻¹), 5.74 mm 60 min⁻¹ (95% CI -0.36 to 11.84 mm 60 min⁻¹ 294 1), -4.10 mm·60 min⁻¹ (95% CI -2.00 to 10.36 mm·60 min⁻¹) and -5.71 mm·60 min⁻¹ 295 ¹ (95% CI -11.26 to -0.16 mm·60 min⁻¹), respectively. The mean differences in 296 hunger, fullness, satisfaction and prospective consumption did not differ with 297 the first exposure compared with the second exposure (p = 0.4, >0.9, 0.7 and 298 0.9, respectively). However, there were large differences in the individual 299 responses between first and second exposure for all ratings, with 9-11 of the 300 20 participants (45-55%) displaying a response to the second exposure that differs from the first exposure by more than the typical error (Supplementary
Figures 3A, 3B, 3C and 3D).

303

304 **Discussion**

In the present study, we provide novel data demonstrating that the consumption of liquid meals with a higher energy content produces more reliable appetite responses compared with lower energy liquid meals. In addition, we demonstrate that the suppression of appetite by high- vs low-energy liquid meals is reproducible at the group level but not at an individual level. This suggests that repeated exposure to an intervention is required in order to assess true individual appetite responses.

312

313 Quantifying the day-to-day reliability of appetite perceptions in response to 314 liquid meal ingestion can assist in the study design of future trials and 315 interpretation of previous trials. The typical error of appetite AUC in response 316 to ingestion of mixed-macronutrient semi-solid meals (1859 kJ; 444 kcal) by 317 young healthy men has previously been reported to be in the region of 8.3 to 12.6 mm·120 min⁻¹ [17]. In the present study, the typical errors ranged from 6.2 318 319 to 7.1 mm·60 min⁻¹ between the liquid meals of differing energy content. It has 320 previously been suggested that, compared with the ingestion of solid/semi-solid 321 meals, the ingestion of liquid meals result in a more consistent metabolic and 322 appetite response due to fewer sites where biological variation can act [17]. The 323 energy content did not appear to influence the typical error in absolute terms, 324 although there was a systematic bias detected for low and moderate-energy 325 containing meals, whereby appetite ratings were higher upon second exposure

326 to the meals containing 579 kJ (138 kcal), 828 kJ (198 kcal) and 1776 kJ (424 327 kcal) energy, which could result in an order effect in intervention studies. In 328 contrast, there was no systematic bias detected between the first and second 329 exposure to the meal containing 4188 kJ (1001 kcal) energy. Due to matching 330 for total volume, the high-energy liquid meals would likely be more viscous than 331 lower-energy meals in this study. However, it has previously been 332 demonstrated that viscosity of liquid meals does not alter the subjective appetite 333 responses to ingestion [36], and therefore the differences in viscosity between 334 test-drinks are unlikely to have influence the findings in the present study. On 335 the other hand, the higher palatability of the highest-energy liquid meal [28] 336 could potentially explain the lack of systematic bias and greater reliability with 337 higher vs lower-energy meals by eliciting stronger cognitive responses upon 338 ingestion. Finally, the high-energy meal would likely perturb physiological 339 signals to a greater extent than lower energy meals which would be more 340 robustly detected by central appetite systems and manifest as more reliable 341 appetite responses. This suggests that interventions aiming to assess the 342 appetite response to a fixed preload should utilise a relatively high energy 343 content. If a low energy meal or preload is desired, then a familiarisation trial 344 may reduce or remove an order effect and researchers should ensure that the 345 trial order is counterbalanced.

346

The reliability of appetite suppression with higher- relative to lower-energy containing meals, often used to assess appetite sensitivity, appeared to be dependent on the difference in energy content between the meals. For example, the typical errors for components of appetite (hunger, fullness, satisfaction and prospective consumption) ranged from 10.0 to 15.2 mm·60 min⁻
¹ with a modest difference in energy content (1197 kJ; 286 kcal; Table 2),
compared to a range of 6.5 to 8.4 mm·60 min⁻¹ with a large difference in energy
content (3360 kJ; 803 kcal; Table 2). This was reflected in the typical error of
the composite appetite AUC which was ~33% higher with the modest difference
in energy content vs the large difference in energy content.

357

358 In order to assess the reliability of individual responses, data were combined 359 from the two experiments. The different energy content in the meals provided 360 by each experiment does not preclude this analysis, since this is still a within-361 subject comparison and the typical error to assess whether individual 362 responses were reliable was specific to each experiment. Therefore the overall conclusion of this approach (appetite responses were reliable at the group but 363 364 not individual level) is identical whether each experiment is considered in 365 isolation (Supplementary Figures 1 and 2), or in combination (Figure 3).

366

367 When data were combined from both experiments, the suppression of appetite 368 with higher- relative to lower-energy containing meals was reproducible at a 369 group level when comparing the first exposure to the second exposure, as 370 demonstrated by a small mean difference (<1 mm·60 min⁻¹) relative to the 371 magnitude of appetite suppression (~5 mm 60 min⁻¹). There was large inter-372 individual variation in the suppression of appetite (Figure 3), with the 373 characteristic spread of responses seen when normally-distributed data are 374 plotted in rank order [26, 33]. However, when individual responses to the 375 second exposure are presented, it is clear that individual responses of appetite

376 suppression are not reproducible with ~50% of participants displaying a 377 response to the second exposure that differs from the first exposure by more 378 than the typical error for that meal (Figure 3). This is a consistent observation 379 across hunger, fullness. satisfaction and prospective consumption (Supplementary Figures 3A, 3B, 3C and 3D) and also consistent with literature 380 381 on the effect of exercise on individual appetite responses [27]. It is noteworthy 382 that the individuals demonstrating the least reliable response with repeated 383 exposure tend to cluster at the ends of the rank order as the "highest" and 384 "lowest" responders, which supports the possibility that regression to the mean 385 is contributing to this lack of consistent individual response [37]. These data 386 suggest studying true individual variability in appetite regulation using mixed-387 macronutrient liquid meals is not possible without repeated exposure to the 388 same intervention/stimulus. This study assessed the acute individual reliability 389 of appetite responses, and therefore the sustained effect after repeated 390 exposure remains currently unknown. In a chronic intervention, a pre-post 391 comparison is (non-exclusively) influenced by 1) variability in measurement at 392 baseline; 2) variability in measurement at follow-up and 3) variability in the "true" 393 response to the intervention. The variability at each of these stages 394 independently influences the ability to detect the true effect of an intervention. 395 This study is representative of baseline testing in a chronic intervention and 396 therefore the lack of reliability at an individual-level would negatively impact on 397 the ability to identify true responders and non-responders to a longer-term 398 intervention and is, if anything, a conservative estimate on the variability with a 399 longer-term intervention. Accordingly, labeling individuals as responders vs 400 non-responders (or compensators versus non-compensators) and seeking investigations into the characteristics of these individuals warrants caution as
the participants may not respond to an intervention in the same direction with
repeated exposures.

404

In conclusion, liquid meals containing a high-energy content (4188 kJ; 1001 kcal) produce a more reliable appetite response compared to lower energy liquid meals (\leq 1776 kJ; \leq 424 kcal). The appetite suppression induced by higher vs lower energy meals is reliable at the group level, but not at the individual level. Therefore, in order to understand individual appetite responses, repeated exposure to a given intervention is required.

411

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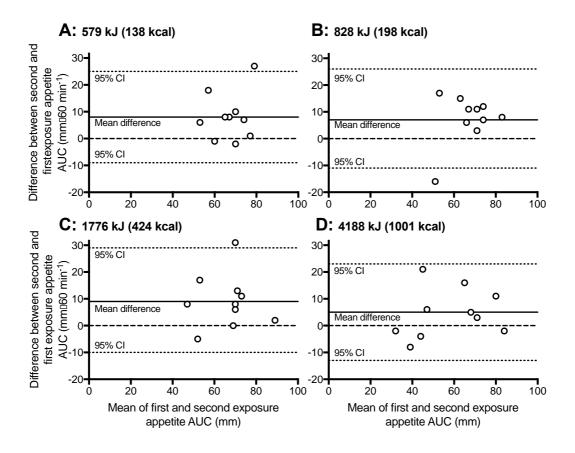


Figure 1. Bland and Altman plot of the composite appetite area under the curve (AUC) for 60 min following the ingestion of mixed-macronutrient liquid meals with an energy content of 579 kJ (A; 138 kcal), 828 KJ (B; 198 kcal), 1776 kJ (C; 424 kcal) and 4188 kJ (D; 1001 kcal).

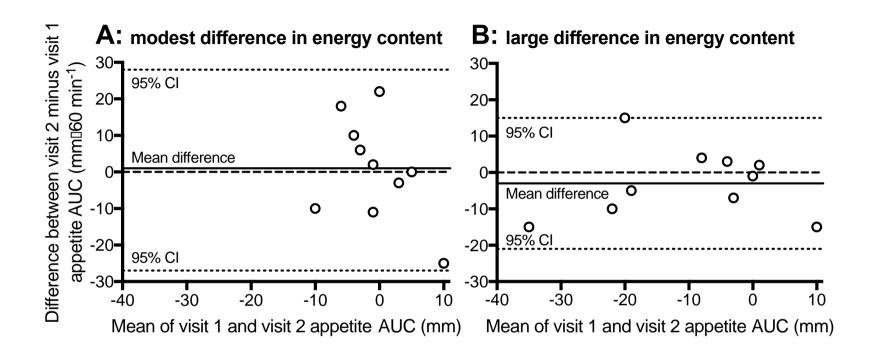


Figure 2. Bland and Altman plot of suppression of composite appetite area under the curve (AUC) for 60 min following the ingestion of mixed-macronutrient liquid meals differing in energy content by a modest (**A**; 1197 kJ; 286 kcal) or large (**B**; 3360 kJ; 803 kcal) degree.

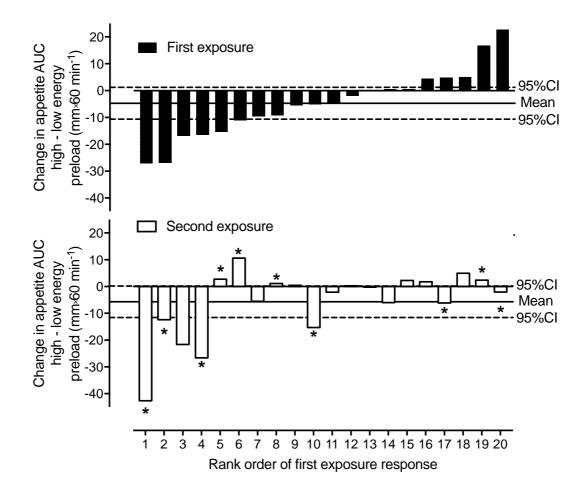


Figure 3. Individual responses in the change in composite appetite area under the curve (AUC) for 60 min following ingestion of mixed-macronutrient liquid meals with a higher- vs. a lower-energy content. *Response to second exposure differs from the first exposure by more than the typical error.

Table 1. Day-to-day variability of composite appetite area under the curve (AUC) and the satiety quotient in response to

liquid meals of differing energy content.

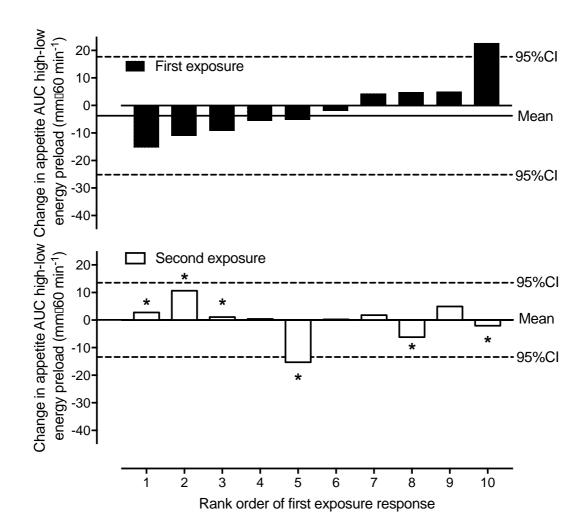
	Composite appetite AUC (mm·60 min ^{.1})				Satiety Quotient [[Baseline composite appetite (μm) - Composite Appetite AUC (μm)]/energy intake (kJ)]			
	579 kJ (138 kcal)	828 kJ (198 kcal)	1776 kJ (424 kcal)	4188 kJ (1001 kcal)	579 kJ (138 kcal)	828 kJ (198 kcal)	1776 kJ (424 kcal)	4188 kJ (1001 kcal)
First exposure Mean (SD)	63 (9)	64 (9)	62 (13)	55 (18)	16 (23)	10 (22)	6 (5)	4 (4)
Second exposure Mean (SD)	71 (10)	71 (12)	71 (13)	60 (20)	10 (21)	2 (23)	1 (4)	4 (4)
Mean difference first vs second exposure (95% CI)	8.3 (2.0 to 14.5)	7.5 (0.9 to 14.1)	9.2 (2.0 to 16.4)	4.6 (-2.0 to 11.1)	-6.7 (-24.3 to 10.9)	-7.1 (-18.6 to 4.3)	-4.3 (-7.5 to -1.1)	-0.5 (-2.8 to 1.7)
Typical error (95% CI)	6.2 (4.3 to 11.3)	6.5 (4.5 to 11.9)	7.1 (4.9 to 12.9)	6.5 (4.5 to 11.8)	17.4 (12.0 to 31.7)	11.3 (7.8 to 20.7)	3.1 (2.2 to 5.7)	2.2 (1.5 to 4.1)
CV% (95% CI)	9.3 (6.3 to 17.6)	12.6 (8.5 to 24.3)	11.8 (8.0 to 22.6)	14 (9.6 to 27.7)	-	-	-	-

AUC, area under the curve; CV%, coefficient of variation expressed as a percentage; n = 10.

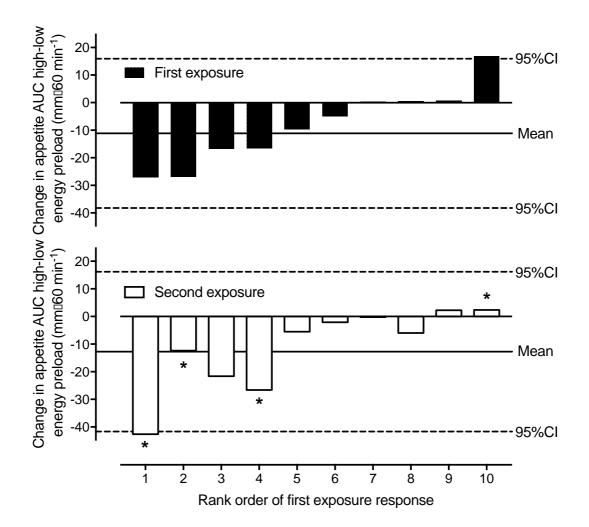
	Мос		meal energy con 286 kcal)	tent	Large difference in meal energy content (3360 kJ; 803 kcal)				
	⊿Hunger AUC (mm·60 min ⁻¹)	⊿Fullness AUC (mm⋅60 min⁻¹)	∆ Satisfaction AUC (mm·60 min ⁻¹)	AProspective consumption AUC	⊿Hunger AUC (mm·60 min⁻¹)	⊿Fullness AUC (mm·60 min ⁻¹)	∆ Satisfaction AUC (mm·60 min ⁻¹)	∆ Prospective consumption AUC	
			<u> </u>	(mm⋅60 min ⁻¹)	<u> </u>			(mm·60 min ⁻¹)	
First exposure Mean (SD)	-0.1 (11.3)	2.5 (12.0)	-3.2 (19.2)	-4.9 (8.8)	-8.4 (15.6)	8.9 (13.2)	8.9 (15.5)	-7.3 (16.1)	
Second exposure Mean (SD)	-1.2 (12.1)	1.5 (6.7)	-1.5 (5.6)	0.5 (9.7)	-12.9 (18.3)	10.0 (16.5)	9.9 (16.3)	-12.0 (10.8)	
Mean difference	-1.0	-1.1	1.7	5.5	-4.4	1.1	1.0	-4.7	
first vs second exposure (95% CI)	(-15.2 to 13.2)	(-11.2 to 9.1)	(-13.8 to 17.1)	(-5.41 to 16.3)	(-12.1 to 3.2)	(-5.5 to 7.7)	(-6.5 to 8.6)	(-13.2 to 3.8)	
Typical error	14.0	10.0	15.2	10.7	7.6	6.5	7.4	8.4	
(95% CI)	(9.7 to 25.6)	(6.9 to 18.2)	(10.5 to 27.8)	(7.4 to 19.6)	(5.2 to 13.8)	(4.5 to 11.9)	(5.1 to 13.6)	(5.8 to 13.4)	
First exposure	4.3	5.2	2.6	4.7	10.8	9.6	10.9	13.0	
SD _R	(3.2 to 4.3)	(3.8 to 8.5)	(1.9 to 4.4)	(3.4 to 7.7)	(7.9 to 17.7)	(7.0 to 15.8)	(7.9 to 17.9)	(9.5 to 21.5)	
(95%CI)	. ,	. ,	. ,	. ,	. ,	. ,		. ,	
Second exposure	6.2	11.3	18.0	6.1	14.4	13.9	11.9	5.3	
SD _R (95%CI)	(4.5 to 10.1)	(8.2 to 18.6)	(13.1 to 29.6)	(4.5 to 10.1)	(10.5 to 23.7)	(10.1 to 22.8)	(8.7 to 19.6)	(3.8 to 8.7)	

Table 2. Day-to-day variability of the change in subjective appetite ratings in response to high vs low-energy liquid meals.

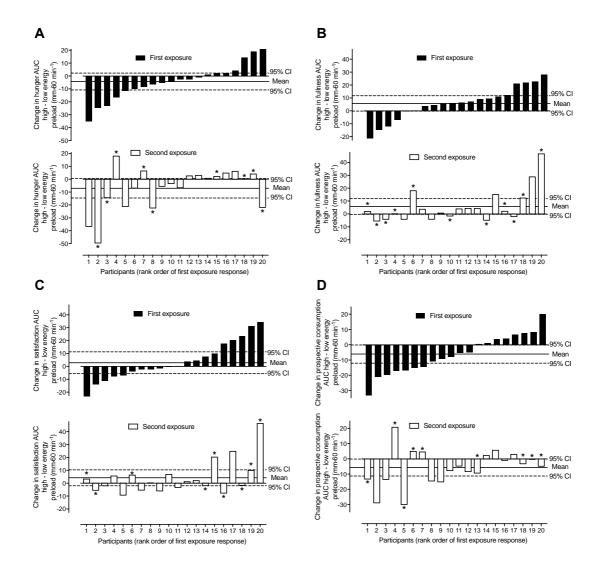
AUC, area under the curve. n = 10.



Supplementary Figure 1. Individual responses in the change in composite appetite area under the curve (AUC) following ingestion of mixedmacronutrient liquid meals with a moderate- vs. low-energy content. Data from experiment 1. *Response to second exposure differs from the first exposure by more than the typical error.



Supplementary Figure 2. Individual responses in the change in composite appetite area under the curve (AUC) following ingestion of mixed-macronutrient liquid meals with a high- vs. low-energy content. Data from experiment 2. *Response to second exposure differs from the first exposure by more than the typical error.



Supplementary Figure 3. Individual responses in the change in hunger (**A**), fullness (**B**), satisfaction (**C**) and prospective consumption (**D**) area under the curve (AUC) for 60 min following ingestion of mixed-macronutrient liquid meals with a higher- vs. a lower-energy content. *Response to second exposure differs from the first exposure by more than the typical error.