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JAST (Journal of Animal Science and Technology) TITLE PAGE
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ARTICLE INFORMATION	Fill in information in each box below
Article Type	Research article
Article Title (within 20 words without abbreviations)	Supplemental effects of rumen-protected L-tryptophan at various levels on starch digestion, melatonin and gastrointestinal hormones in Holstein steers
Running Title (within 10 words)	Rumen-protected L-tryptophan effects in Holstein Steers
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Competing interests	No potential conflict of interest relevant to this article was reported.
Funding sources State funding sources (grants, funding sources, equipment, and supplies). Include name and number of grant if available.	
Acknowledgements	This paper was supported by the KU Research Professor Program of Konkuk University.
Availability of data and material	Upon reasonable request, the datasets of this study can be available from the corresponding author.
Authors' contributions Please specify the authors' role using this form.	Conceptualization and hypothesis: Sang-Bum Lee, Hong-Gu Lee. Data curation: Sang-Bum Lee, Hong-Gu Lee. Statistical analysis: Sang-Bum Lee. Methodology and laboratory analyses: Sang-Bum Lee, Hong-Gu Lee. Writing first draft: Jalil Ghassemi Nejad. Writing, reviewing, and editing: Jalil Ghassemi Nejad, Hong-Gu Lee. Preparation, experiments, and discussion: Sang-Bum Lee, Hong-Gu Lee. Supervised the experiment, supporting the experiment financially: Hong-Gu Lee.
Ethics approval and consent to participate	All experimental procedures were in accordance with the "Guidelines for Care and Use of Experimental Animals" of Pusan National University (approval no.: PNU-2010-000152).

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9 **Supplemental effects of rumen-protected L-tryptophan at various levels on starch**
10 **digestion, melatonin and gastrointestinal hormones in Holstein steers**

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22
23 **Running Title:** Rumen-protected L-tryptophan effects in Holstein Steers

25 **Abstract**

26 **Objective:** The effects of different level of rumen-protected L-tryptophan (RPL-T) supplementation on
27 starch digestion, melatonin and gastrointestinal (GI) hormones secretion in Holstein steers were
28 evaluated.

29 **Methods:** Four Holstein steers (201 ± 24 kg) were employed in a 4×4 Latin square design. The dietary
30 treatments were the control (basal diet) and RPL-T groups of basal diet + 191.1 mg/kg BW, basal diet
31 + 95.6 mg/kg BW, and basal diet + 19.1 mg/kg BW groups. Blood samples were collected to measure
32 blood hormones on day 0, 1, 3, and 5 of the experiment to study serum melatonin (MEL) and
33 gastrointestinal tract and duodenal starch degradability. The design was 4×4 Latin square and the data
34 were analyzed using the ANOVA procedure by SPSS.

35 **Results:** The D-glucose content in the RPL-T treatment groups was significantly reduced ($p < 0.05$)
36 compared to the control group. The serum cholecystokinin (CCK) levels were increased in the RPL-T
37 treatment group compared to the control group. However, there was no significant difference between
38 all RPL-T treatment groups. The results of serum MEL were also similar to CCK results. The serum
39 secretin levels were not significantly different ($p > 0.05$) between all groups. The apparent starch
40 disappearance rates in GI track were lower ($p < 0.05$) in treatment groups compared with the control, and
41 there was no significant difference between all RPL-T treatment groups. Digestion was increased
42 ($p < 0.05$) in all treatment groups compared to the control.

43 **Conclusion:** Overall, there were significant differences in starch digestibility, CCK, and MEL
44 compared to the control group, but there were no significant differences in concentration of RPL-T.
45 Therefore, considering the economic purpose, 19.1mg/kg BW is recommended as an appropriate level
46 of addition to increase the productivity of beef cattle.

47 **Keywords:** Cholecystokinin, rumen protected tryptophan, ruminants, starch degradability, melatonin

48

49

50 INTRODUCTION

51 Previous studies in our laboratory provide documentations of promising role of L-tryptophane (L-T) in
52 improving performance, yields, and stress relief in both forms of rumen non-protected [1] and rumen
53 protected L-T in beef [2,3,4] and in dairy cows [5]. The L-T supplementation in ruminants has been
54 studied for its potential to improve growth performance, feed efficiency, and nitrogen utilization [1,2].
55 L-T is an essential amino acid that plays a role in protein synthesis and is a precursor to serotonin, which
56 has been linked to various physiological functions, including appetite regulation and stress response
57 [3,5]. Some studies suggest that L-T supplementation may improve nutrient digestibility, increase
58 microbial protein synthesis, and reduce ammonia emissions from manure, which could have
59 environmental benefits [4,5]. However, the exact mechanisms by which L-T supplementation affects
60 ruminant metabolism are still not fully understood and require further research. Given these,
61 supplementation of L-T at an optimum level could help the animals to outperform and to be cost-
62 effective. In a recent *in vitro* investigation, Ronel et al., [6] concluded that L-T could increase protein
63 synthesis in MAC-T cells by stimulating the genes, proteins, and protein synthesis-related pathways
64 involved in energy and protein syntheses.

65 Given that 58 to 82% of starch is digested in the rumen by ruminant microorganisms, while 18 to 42%
66 of undigested starch enters the small intestine [7]; induced starch digestion in rumen (Lee et al. 2020)
67 and small intestine [1,4] is an aimed scenario to acquire high meat yield and quality particularly in the
68 late stage of fattening period in steers. It is while the small intestine is capable of a 42% higher
69 absorption rate than the rumen, the secretion and vitality of the starch-degrading enzyme α -amylase is
70 low (35 to 60%) [8]. Owens et al., [7] suggested four possible reasons for this limitation; 1) restriction
71 of enzyme activity for starch digestion, 2) limitation of the amount of glucose absorbed from the small
72 intestine, 3) insufficient time to complete starch digestion, and 4) insufficient enzyme approach in starch
73 granules. Tryptophan in form of rumen-protected has been practiced inducing starch digestion in small
74 intestine in very few studies [2]. In a previous study [2], 191.1mg/kg BW was added to improve the
75 digestibility of starch in the small intestine. However, due to the cost of rumen-protected L-T (RPL-T),
76 the optimum low dosage which can be beneficial for both purposes of being cost-effectively profitable

77 and highly influential and possible physiological and hormonal reasons leading to the phenomenon
78 requires further investigation.

79 L-T is known as a precursor or stimulator of serotonin, melatonin (MEL), and cholecystokinin
80 (CCK) [1,2,4]. L-T is believed to induce gastro-intestinal hormones (GIH) and MEL in not only humans
81 [9], but also chicken [10], rat [11], cow [5,12], and goat [13].

82 Hence, we aimed to find out the lowest optimum level of RPL-T showing the highest possible
83 effectiveness in Holstein steers and for economical perspective. Therefore, this study designed to
84 evaluate the different dosage of RPL-T which could induce starch digestion and stimulate gastro-
85 intestinal tract (GIT) hormones in Holstein steers for the purpose of higher beef yield and quality.

86

87 **MATERIALS AND METHODS**

88 **Animals, feed, and housing conditions**

89 All experimental procedures were in accordance with the “Guidelines for Care and Use of Experimental
90 Animals” of Pusan National University (approval no.: PNU-2010-000152).

91 The experimental animals used in this study were four Holstein steers (average body weight (BW)
92 = 201±24 kg). The animals were housed in a 4 × 5 m fenced and concrete-floored barn where individual
93 specifications were possible, and water was provided *ad libitum* throughout the experiment. In order to
94 minimize the effect of light on the secretion of MEL, all passages in the barn were closed the day before
95 each period to block the light. Animals were weighed before each treatment period, and the basic feed
96 was fed by calculating the daily intake of steers according to the NRC [14] standard, which specifies
97 the daily nutrient requirements according to the BW and daily gain. Feed amount by metabolic energy
98 intake was determined to convert by dry matter (DM kg) value, crude protein content (%) and total
99 digestible nutrients (TDN) content (%) of forage feed (timothy) and concentrated feed to meet the
100 maintenance requirements for cattle [14]. The chemical composition of the basal feed is shown in Table
101 1, and the ratio of forage to concentrate feed was supplied at an average ratio of 41.8:58.2. The basal
102 feed was fed twice a day at 9:30 am and 5:30 pm.

103

104 **RPL-T characteristics**

105 RPL-T used in this study was RPL-T (42% L-Tryptophan, Beijing Feeding Feed Science Technology
106 CO., Beijing, China), which is a rumen protection L-T preparation. The RPL-T was a granular product
107 in the form of wrapped 42% amino acids (AAs) in a resin material, which 37.7% fat and 20.3%
108 carbohydrates are composed of complex organic acids and their derivatives. In the control group, an
109 excipient consisting of 65% fat and 35% carbohydrate was used to eliminate the effect of the remaining
110 37.7% fat and 20.3% carbohydrate, not 42% RPL-T in the treatment group. After applying the body
111 weight of 57.8 mg/kg BW [2], 42% of RPL-T was converted to 100%, and in addition the average
112 absorption rate 72% [15] of AAs in the small intestine in ruminants was converted to 100%. Therefore,
113 the amount of 42% RPL-T (treatment group) was added by calculating to the BW of 191.1 mg/kg BW.
114 The amount of excipient (control group) added was calculated as 58% of the value obtained by
115 converting 42% of RPL-T into 100% and was added after converting the average AA absorption rate
116 of 72% in the small intestine in the same way as in the treatment group. Table 2 shows the chemical
117 compositions of RPL-T used in this study.

118

119 **Experimental design and treatments**

120 The design was 4×4 Latin square using four Holstein steers, and only basic feed was fed for 7 days
121 before given treatment as a feeding adaptation period. After adaptation, the control was added to the
122 basic feed (41.8% timothy + 58.2% concentrate) at excipient and the treatment (42% RPL-T) was added
123 to the basic feed at 191.1mg/kg BW (100%), and 95.6mg/kg BW (50%), and 19.1mg/kg BW (10%).
124 The treatment groups were treated for 5 days in each period, and a total of 4 periods were performed.

125

126 **Sampling**

127 *Blood sample*

128 Blood samples were taken from the jugular vein for analysis of serum intestinal hormones, synthetic
129 hormones, and metabolite profile. The 0 days not processed for analysis, and 9:00 (-30 min), 11:00 (90
130 min), 13:00 (210 min), 15:00 (330 min) for each hour on days 1, 3, and 5 of treatment at 17:00 (450

131 min), sampling was performed 5 times at 2 h intervals to confirm the change pattern by date. Blood
132 collection at 09:00 was performed 30 min before morning feed. Blood was collected and placed in the
133 serum tube (BD Vacutainer, BD, USA) and the serum was obtained by blood centrifuging at 3500 rpm
134 for 15 min. The serum supernatant was dispensed in 1.5 ml each tube and stored at -80°C until analysis.

135

136 *Feces sampling*

137 Feces samplings were performed 5 times on the 5th d at 9:00 (feeding before 30 min), 11:00 (after
138 feeding 90 min), 13:00 (after feeding 210 min), 15:00 (after feeding 330 min), 17:00 (after feeding 450
139 min), the same as blood collection; and to analyze the digestibility, the weight of the feces was measured
140 for 12 h.

141

142 **Analyses methods**

143 *Analysis of the hormones in intestinal tract and in the blood*

144 Serum concentrations of secretin and CCK-8 were determined by enzyme immunoassay of secretin
145 (EK-067-05) and CCK-8 (EK-069-04) (Phoenix Pharmaceuticals, USA) using a plate with secondary
146 antibody attached thereto. MEL analysis was performed using the MEL human ELISA Kit (RE54021)
147 (IBL, Germany), which can be quantitatively measured on a plate by enzyme immunoassay.

148

149 *Analysis of D-glucose in feces*

150 For the analysis of the D-glucose content in the feces, the anthrone method of Roe [16] and McCready
151 et al., [17], in which D-glucose is colored with anthrone using a standard reagent, were used.

152

153 *Starch digestibility analysis*

154 In order to check the amount excreted from the amount of feed consumed per day, the amount of
155 excreted over 2 days was averaged and measured. Based on the NRC [14] standard, which specifies the
156 daily nutrient requirements, the daily intake was calculated by calculating the coarse and concentrated
157 feed.

158 Starch digestibility analysis for economic evaluation was analyzed by the following calculation formula:

159

160 (1) Starch (Fecal flow, g/d) = (D-glucose, ug/ml) * 1,000,000 (g/ml) / 1,000 (g/kg) * (Fecal flow, g/d)

161 (2) Starch (Disappearance, g/d total tract) = (Starch feed intake, g/d) – (1)

162 (3) Starch (Disappearance, % total tract, of intake) = (2) / (Starch feed intake, g/d) * 100

163 (4) Starch (Profit g/d) = (2) Treatment – (2) Control

164 (5) Starch (Profit won/d) = (4) * 0.5won (Starch/g)

165

166 **Statistical analysis**

167 Data obtained through the experiment were analyzed for using ANOVA procedure by SPSS (version
168 16 SPSS, Chicago, IL, USA). In addition, Duncan's New multiple range test was used to test the
169 significance of multiple treatment intervals. The significance level was evaluated when $p < 0.05$.

170

171 **RESULTS and DISCUSSION**

172 The GI hormones including CCK, secretin and MEL concentration by day (0, 1, 3, 5) and time (9:00,
173 11:00, 13:00, 15:00, 17:00) in serum of Holstein steers fed diets are presented in Fig. 1 (Table S-1). The
174 GI related hormones that stimulate the rate of feed digestion including CCK, MEL and secretin are
175 known to be associated with L-T [1-3,5]. The CCK was the highest in the group treated with RPL-T
176 191.1 mg/kg BW on the 3rd d ($p < 0.05$), while the groups of 95.6 mg/kg and 19.1 mg/kg were equally
177 significantly higher than the control group ($p < 0.05$). However, on the 5th d, 191.1 mg/kg treated with
178 RPL-T showed a decreasing pattern, and with respect to the 95.6 mg/kg and 19.1 mg/kg treatment
179 groups, the concentration continued to increase. Regarding secretin, the concentration was not changed
180 according to the treatments. As a result of analyzing the pattern by time (Fig. 1; (Table S-1)), in the
181 case of CCK, the group treated with 191.1 mg/kg was significantly higher at 11:00 and 15:00 than the
182 control group ($p < 0.05$), and 95.6 mg The /kg treatment group showed a higher value than the control
183 group at 13:00 ($p < 0.05$). However, secretin could not confirm the pattern by time and the difference
184 between the treatment groups were not significant. According to Jaworek et al., [18], high-dose

185 intraperitoneal injection of L-T in rats may play a protective role against severe pancreatic injury and
186 significantly increased plasma MEL levels. The endocrine hormone CCK, which directly affects the
187 secretion of pancreatic enzymes, is also related to the intake level of uncyclized amino acids [19]. Leja-
188 Szpak et al., [20], reported that L-T supplementation to rats led to an increased production of α -amylase
189 and had an increased effect on the synthesis of MEL, a pineal hormone, and MEL. The endocrine
190 hormone, CCK, reported to have a close relationship with L-T. In the pancreatic islet of Langerhans
191 cells, the effect of MEL is regulated through a specific MEL MT2 receptor [21] and increases duodenal
192 bicarbonate secretion by exogenous MEL produced endogenously from L-T [22], where it stimulates
193 the secretion of pancreatic amylase. They suggested that the mechanism MEL function in the pancreas
194 is indirect and dependent on the secretion of CCK and the activation of afferent vagus nerve initiating
195 pancreatic reflexes in the intestine [1,10,11]. CCK appears to serve as a neurotransmitter and
196 neuromodulator and is abundantly distributed throughout the mammalian brain [20]. CCK suppresses
197 feeding behavior and stomach function by acting as a paracrine modulator of vagal afferents in the
198 periphery, particularly in the duodenum [20,18]. CCK may function directly within the CNS to
199 stimulate central vagal afferent terminal inputs to the solitary nucleus, according to current research
200 [20]. CCK mediates pancreatic enzyme secretion via cholinergic pathways, according to recent
201 experimental findings in animals and humans. These findings suggest that CCK's ability to promote
202 pancreatic secretion is dosage dependent. As a result of intestinal hormone analysis, there was no
203 difference between RPT-L treatment groups. Therefore, from an economic point of view, it should be
204 considered as a recommended level of 19.1 mg/kg BW addition.

205 The D-glucose content in the RPL-T treatment groups was significantly reduced ($p < 0.05$)
206 compared to the control group from the 3rd d of treatment, and there was no difference ($p > 0.05$) between
207 the RPL-T treatment levels on the 3rd d (Figure 2a). D-glucose content was significantly decreased at
208 191.1 mg/kg BW and 95.6 mg/kg BW compared to 19.1 mg/kg BW on the 5th d (Figure 2-a). As a result
209 of examining the average D-glucose content in the feces after treatment with RPL-T for 5 d, the D-
210 glucose content was significantly decreased by RPL-T treatment than the control ($p < 0.05$); however,
211 no difference ($p > 0.05$) was observed by the treatment dosage. (Figure 2-b), which favors the lower level

212 of supplementation for economical purposes. It has been reported that ghrelin, MEL, and tryptophan
213 increase the secretion of CCK and starch in mono-gastric animals [18,20,23], and ruminants [2,3]. In
214 general, MEL is endogenously produced from L-T and is known to strongly promote pancreatic
215 secretion [11,20]. The following research in mono-gastric animals (dogs and rats) and ruminants
216 (Hanwoo steers) is consistent with the obtained results in this study. In dogs, L-T strongly stimulates
217 exocrine pancreatic secretion in most cases when jugular vein infusion or duodenum is supplied,
218 whereas when this amino acid enters the ileum and when applied, pancreatic secretion is significantly
219 inhibited [24]. In rats, dose-dependent administration of L-T significantly increased plasma MEL
220 concentrations and pancreatic enzyme secretion [11,23], suggesting that endogenous MEL produced
221 from L-T in the intestine may also promote pancreatic exocrine function [11,18]. In ruminants,
222 administration of L-T significantly increased serum MEL, CCK concentrations [2,3] and the
223 digestibility of starch in the small intestine was improved [2]. Secretion of intestinal CCK which
224 observed in this study following RPL-T supplementation, eventually enhanced the activity of pancreatic
225 α -amylase and decreased fecal D-glucose contents [20]. Li and Owyang [25] showed that CCK
226 secretion can stimulate acinar cells in the pancreas by the afferent pathway of the pneumogastric nerves
227 to stimulate the secretion of pancreatic fluids which results in higher digestion of peptides, amino acids
228 and starch in small intestine. As a result of the starch degradation analysis in Fig. 2b, there was no
229 difference between the RPT-L treatment sections. Therefore, from an economic point of view, it should
230 be considered as a recommended level of 19.1 mg/kg BW addition.

231 Table 3 shows the apparent starch disappearance rates in GI track in Holstein steers fed basal
232 diet and different concentrations of RPL-T. The control group was fed $6,940 \pm 199.1$ g/d (DM) and
233 excreted a total of $7,075 \pm 462.1$ g/d (wet matter). RPL-T 191.1 mg/kg fed $7,660 \pm 141.6$ g/d of feed and
234 excreted $5,600 \pm 556.5$ g/d, so the proportional value was $0.73 \pm 0.076\%$, which was significantly lower
235 than that of the control group ($p < 0.05$). However, for RPL-T 95.6 mg/kg and 19.1 mg/kg, the feed
236 intake-proportional excretion values were $0.89 \pm 0.034\%$ and $0.91 \pm 0.056\%$, respectively which were
237 tended to decrease compared to the control group. The total daily intake of starch was $4,164 \pm 119.5$ in
238 the control group, while in RPL-T 191.1 mg/kg was $4,596 \pm 85.0$, in 95.6 mg/kg was $4,686 \pm 53.9$, and in

239 19.1 mg/kg was $4,476 \pm 77.1$ found to be ingested ($p < 0.05$). However, the excreted total daily starch
240 content was the highest in the control group at 313 ± 48.9 g/d, and in the RPL-T 191.1 mg/kg was
241 160 ± 30.7 , which was significantly decreased compared to the control group ($p < 0.05$). As a result, the
242 total daily starch digestibility was $3,851 \pm 90.3$ g/d for the control, RPL-T 191.1 mg/kg $4,436 \pm 95.2$, 95.6
243 mg/kg $4,449 \pm 73.0$, and 19.1 mg/kg BW 4.232 ± 71.3 g/d. Digestion was increased in all treatment groups
244 compared to the control group ($p < 0.05$), and the total daily starch degradability was significantly
245 increased ($p < 0.05$) in RPL-T 191.1 mg/kg and 95.6 mg/kg compared to the control group. RPL-T 19.1
246 mg/kg did not increase significantly, but it was 94.58%, which showed higher starch degradability than
247 the control (92.53%). As a result, the RPL-T treated group showed higher starch degradability than the
248 control group ($p < 0.05$), so it was confirmed that the starch utilization and digestibility were improved
249 by the RPL-T treatment. In agreement with the above-mentioned mechanism, Richards et al., [26]
250 suggested that protein infusing when accompanied with starch into small intestine enhances starch
251 disappearance in small intestinal. This could be a phenomenon observed in this study by addition of
252 RPL-T in the treatment groups. Additionally, dietary supply of amino acids can lead to influx in lower
253 intestines resulting in higher growth in ruminants [27].

254

255 CONCLUSION

256 In summary, while the RPL-T 191.1 mg/kg BW feeding level showed significant influence in a previous
257 Hanwoo study, our Holstein study indicates that a reduced dosage of 19.1 mg/kg BW, representing
258 1/10th of the previous level, remains impactful. This reduced dosage promotes the secretion of
259 melatonin (MEL) and cholecystokinin (CCK) in the blood, resulting in comparable starch degradability.
260 Through analysis of intestinal hormones and starch degradation, no significant differences were
261 observed among the RPL-T treatment groups. Consequently, from both a biological and economic
262 perspective, we recommend the supplementation of RPL-T at 19.1 mg/kg BW as an optimal and
263 sustainable level.

264

265 CONFLICT OF INTEREST

266 We certify that there is no conflict of interest regarding the material discussed in this manuscript.

267

268 **ACKNOWLEDGEMENTS**

269 This paper was supported by the KU Research Professor Program of Konkuk University.

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353

ACCEPTED

354 **Table 1.** Proximate analysis of basal diets of study

	Moisture	Crude protein	Ether extract	Crude ash	TDN
Timothy	9.24±0.09	7.74±0.07	1.14±0.01	5.66±0.01	57.43±0.07
Concentrate	10.06±0.07	15.77±0.09	3.94±0.02	7.46±0.02	68.21±0.13

355 TDN = total digestible nutrients

356

ACCEPTED

357 **Table 2.** Proximate analysis of RPL-T (%)

	Moisture	Crude protein	Ether extract	Crude ash
RPL-T	0.58±0.00	35.81±0.09	50.81±0.02	0.37±0.00

358

ACCEPTED

359 **Table 3.** Effect of RPL-T on feed intake, duodenal starch degradability, and net profit in Holstein steers

Item	Treatment ¹			
	RPL-T 0.0 mg/kg BW	RPL-T 19.1 mg/kg BW	RPL-T 95.6 mg/kg BW	RPL-T 191.1 mg/kg BW
Feed intake, g/d (DM)	6,940±199.1 ^b	7,460±128.5 ^a	7,810±89.8 ^a	7,660±141.6 ^a
Total Fecal flow, g/d (Wet)	7,075±462.1 ^a	6,800±462.9 ^{ab}	6,960±202.5 ^{ab}	5,600±556.5 ^b
Intake, g/d	4,164±119.5 ^b	4,476±77.1 ^a	4,686±53.9 ^a	4,596±85.0 ^a
Fecal flow, g/d	303± 34.9 ^a	264±19.5 ^{ab}	264±13.3 ^{ab}	212±20.9 ^b
Starch Disappearance, g/d	3,861± 93.5 ^b	4,212±68.5 ^a	4,422±66.1 ^a	4,384±89.4 ^a
Starch Disappearance, %	92.7±0.68 ^b	94.1±0.38 ^{ab}	94.4±0.34 ^a	95.4±0.47 ^a

360 Each value is presented as mean ± SE (n=4)

361 ^{a, b, c} p<0.05 (ANOVA; Duncan's)

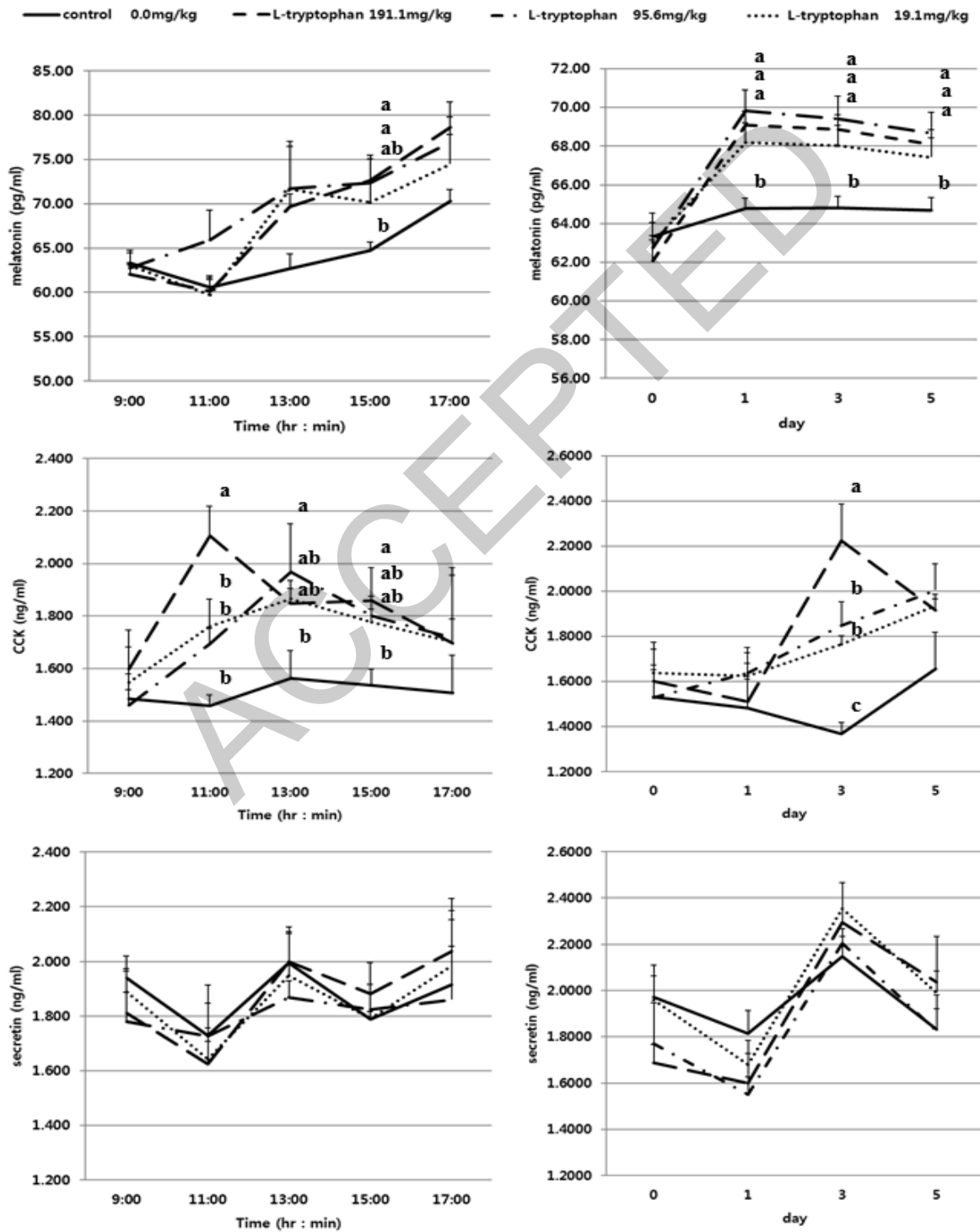
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ACCEPTED

363 **Fig. 1.** Effects of RPL-T on gastrointestinal hormones (CCK, secretin) and melatonin concentration of
 364 day (0, 1, 3, 5) and time (9:00, 11:00, 13:00, 15:00, 17:00) in serum of Holstein steers

365 Each value is presented as mean \pm SE (n=4). ^{a, b, c} p<0.05 (ANOVA; Duncan's). — Control, — — RPL-T
 366 191.1 mg/kg, —·— RPL-T 95.6 mg/kg, - - - RPL-T 19.1 mg/kg

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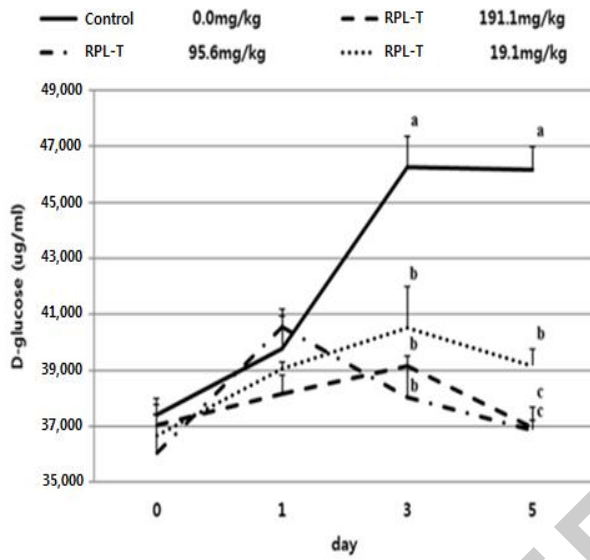


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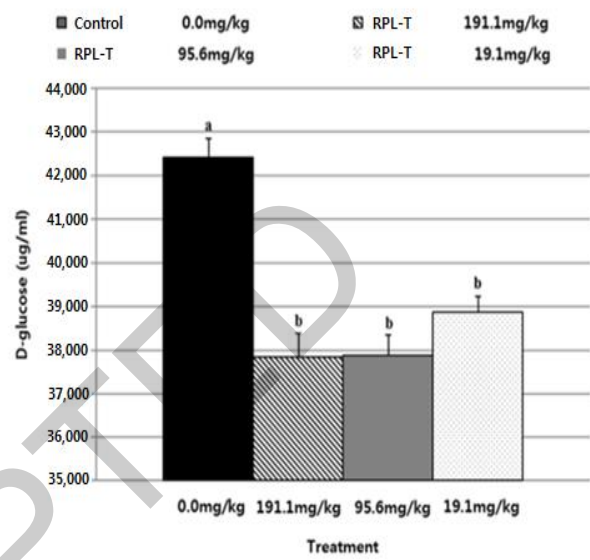
369 **Fig. 2.** Effects of RPL-T on D-glucose in feces of Holstein steers

370 ^{a, b, c} $p < 0.05$ (ANOVA; Duncan's). — Control, — — RPL-T 191.1 mg/kg, —• RPL-T 95.6 mg/kg, - - -
371 RPL-T 19.1 mg/kg

372 a)



b)



373

ACCEPTED