

# Investigating age related changes in taste and affects on sensory perceptions of oral nutritional supplements

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1	Investigating age related changes in taste and affects on sensory perceptions of
2	oral nutritional supplements.
3	
4	Background: Sip feeds are oral nutritional supplements (ONS) that are commonly
5	prescribed to malnourished patients to improve their nutritional and clinical status.
6	However, ONS are poorly consumed and frequently wasted, with sweetness being
7	identified as one of the factors leading to patients' dislike of ONS.
8	Objectives: To investigate if age affects sweetness thresholds and if this impacts upon
9	perceived sweetness intensity, hedonic (sweetness and overall) and ranked preference
10	of ONS products.
11	Design: prospective, observational.
12	Subjects: Thirty six young adults (18-33 years) and 48 healthy older adults (63-85
13	years).
14	Setting: Dept. of Food & Nutritional Sciences and the Clinical Health Sciences at the
15	University of Reading.
16	Methods:
17	Detection and recognition threshold levels, basic taste identification and 'just about
18	right' level of sweetness were examined. Three ONS (chocolate, vanilla, strawberry)
19	and sucrose solutions were evaluated for hedonic sweetness, overall hedonic liking,
20	sweetness intensity and rank preference.

# 21 Results

22	Significant differences were found in both sweetness detection and recognition
23	thresholds (P=0.0001) between young and older adults, with older adults more likely
24	to incorrectly identify the taste (P=0.0001). Despite the deterioration in sweetness
25	sensitivity among the older adults, there were no significant differences found in
26	sweetness intensity perceived for the ONS products presented (P>0.05) when
27	compared to the young adults. However, across both groups sweetness intensity was
28	found to be correlated with overall product dislike across all flavour variants tested
29	(R= 0.398, p=0.0001).
30	Conclusions: Sweetness appears to be one of many factors contributing to the dislike
31	of ONS. Manufacturers are encouraged to reconsider the formulations of these
32	products so that beneficial effects of ONS can be delivered in a more palatable and
33	acceptable form and wastage reduced.
34	
34 35	Keywords: oral nutritional supplement, taste, acceptability, preference

50

37

#### 39 Introduction

40

41 In the United Kingdom the population is ageing with 16% of the population aged 65 42 and over [1]. Healthy ageing is essential to maintain a high quality of life and is 43 defined by World Health Organisations (WHO) as the state of complete physical, mental and social well being [2]. However, malnutrition among older adults 44 45 diminishes quality of life by contributing to serious illness, decreased functional 46 capability and altered self-perception of health and chronic disability [3]. The 47 prevalence of malnutrition in older adults is widespread across the U.K. and varies geographically, with higher prevalence in the North (19.4%) than the South (11.2%) 48 49 of England [4]. Recent statistics from National Institute for Health and Clinical 50 Excellence [5] suggested that more than 10% of over 65's in the general population 51 are at medium or high risk of malnutrition, and that this figure rises to 60% in the 52 hospital setting. The 2008 British Association for Parenteral and Enteral Nutrition 53 (BAPEN) Nutrition screening survey found that one in three adults admitted to 54 hospitals was malnourished and that those aged 65 plus, had 40% greater risk of 55 malnutrition than those <65 years [6].

56 Many authors, including early work by McWhirter and Pennington [7], have 57 suggested that the earlier nutritional intervention is started, the greater the clinical 58 benefit to patients. This will in turn lower the total cost of treating malnutrition to the

59	UK National Health Service (NHS), estimated at £7.4 billion [8] and to the UK; £13
60	million per annum [9]. Nutritional intervention therapies such as dietary supplements
61	are commonly used to treat malnutrition, and can be given enterally or parenterally
62	[10]. Oral supplements such as ONS ready to drink supplements available in cartons,
63	cans, bottles and cups, can be provided on prescription to patients and used in addition
64	to normal food consumption to increase nutrient intake. The typical nutritional content
65	of an ONS is 1.5 Kcal per ml and consists of 14-20% protein, 25-35% fat, 50%-60%
66	carbohydrates; the vitamin and mineral content generally supplies a proportion of the
67	Recommended Nutrient Intake (RNI) in a 200ml pack [11]. Much previous research
68	and reviews have examined the prevention/treatment of malnutrition using products
69	such as these. [10, 13, 14].
70	However, it is reported that the use of ONS is associated with high wastage,
71	therefore, the benefit of ONS cannot be delivered if they are not consumed. Gosney
72	[13] investigated the palatability and consumption of ONS and the reasons for
73	wastage. Wastage in four wards (96 patients) within a 24 hour period was as much as

63% and this wastage was further extrapolated to a net loss of £18,924 on ONS per
year our elderly care wards in the 1990's. Sweetness was given as one of the reasons
leading to dislike of these products.

#### 78 Aim of this study

This aim of the study was to investigate if a difference in sweetness perception as indicated by threshold and detection levels exist between young and older adults and to examine if this was related to differences, if any, in the perception of sensory attributes, acceptability and hedonic liking of ONS. Our null hypothesis is that differences in sweetness thresholds between young and older adults are so small that they will not relate to the perception of sensory attributes, acceptability and hedonic liking of ONS.

86

#### 87 Methods and materials.

88 The study was approved by the Research and Ethics Committee at the University of89 Reading, UK prior to recruiting the study participants.

90

#### 91 Recruitment of young and older adult participants

The young adults were recruited by advertising through email and posters from students and staff at the University of Reading. Older adults were recruited via postal communication with those on the older adults' database held by Clinical Health Sciences at the University of Reading. All self selected respondents who met the inclusion criteria were invited to participate in the study; therefore a convenience sampling strategy was employed. Thirty-six young adults age 18-33 (mean age 23)

- 98 and forty-eight healthy older adults age 63-85 (mean age 74.4) participated in this
- 99 study.
- 100
- 101 Sensory tests
- 102 Stimuli for sweetness threshold tests

103 The series of sucrose solutions for testing were prepared according to British Standard

- 104 ISO 3972:1991[15]. Commercially available spring water (Harrogate Spa) was used
- 105 throughout the study. All solutions were prepared within 24-hours prior to each test in
- 106 order to retain freshness and to prevent separation.
- 107
- 108 Stimuli for preference tests
- 109 Ensure Plus a commercially available nutritional sip feed was chosen for this study as

110 it was identified to be the most often prescribed brand within the elderly care wards at

111 the local NHS Trust Three ONS flavours; vanilla, strawberry and chocolate, were

112 chosen as these were chosen as these were the most commonly prescribed product

- 113 variants. All had identical nutritional values and sweetness levels.
- 114
- 115 Procedures

116 All the sensory sessions for the young adults took part in a dedicated sensory 117 laboratory, and the sensory tests for the older adults took place at the Clinical Health

118	Sciences, both located at the University of Reading. Participants in both groups	
119	completed two sets of tests on each of three separate occasions; a series of threshold	
120	tests and a series of sensory attribute intensity, hedonic liking and rank preference	
121	tests. Each sample in each test was coded with a randomised 3 digit code and samples	
122	in the second set of tests were presented in randomised order. Water and crackers	
123	(Carr's brand) were provided as palate cleansing tools to minimise carry over effects.	
124		
125	Threshold tests	<b>Comment [OBK1]:</b> Suggest that this goes into supplementary information as will
126	Participants compared each of nine solutions with the reference sample(water) and	take the words to below 2500
127	identified the point where they could detect a difference (detection threshold) and the	
128	point where they could identify the taste (recognition threshold) which they had	
129	perceived. Detection threshold is a sensory term used to describe the concentration (or	
130	level) at which an individual (or group of individuals) can detect the existence of a	
131	signal from the background noise. To calculate a threshold the participant is given a	
132	series of increasing stimuli (in this case concentrations of sucrose in water), the	
133	detection threshold is calculated as the geometric mean between two samples, the	
134	highest concentration at which the participant could not detect the signal and the	
135	lowest concentration at which they could.Both thresholds enable the study to identify	
136	the sensitivity of sweetness in each participant. Participants were also required to	
137	choose the Just About Right (JAR) concentration of the presented solutions.	
138	Sensory attribute & preference tests	

- 139 Volunteers were presented with three flavours of the sip feeds and a sucrose solution140 containing the equivalent sugar content (28.8g in 500ml/5.76g in 100ml), presented
- 141 using a random balanced order design. The sucrose solution acted as a control,

142	enabling the investigation of how flavour type impacts on sweetness perception.
143	Sweetness liking/hedonic and the overall product liking of the samples using a 7 point
144	hedonic scale (like extremely (1) to dislike extremely (7)). Following this, participants
145	were asked to rank products in order of overall preference (1 most preferred to 3 least
146	preferred). Sweetness intensity was measured on a 100mm line scale with descriptors
147	'not at all sweet' (0mm) to 'extremely sweet' (100mm). Participants were required to
148	rate how much (quantitatively) they liked the sweetness intensity.
149	
150	Statistical analysis:
151	Data analysis was performed using Statistical Package for the Social Sciences (SPSS)
152	(Chicago, Illinois, Version 15.0). As no differences were found in intra-individual
153	results between test days (P>0.05), means of the triplicate test results were calculated
154	for each participant and were used throughout for analysis (to compare between age
155	groups and genders). A two way analysis of variance (ANOVA) was used to
156	examine the impact of age and gender on the variables measured with post hoc
157	analysis, the multiple pair-wise comparisons test used to compare samples was
158	Fishers least significant difference (LSD) (P<0.05).

161	No differences were found in intra-individual results between test days (P>0.05),
162	therefore means of the triplicate test results were calculated for each participant and
163	were used throughout for analysis (to compare between age groups and genders).
164	
165	Threshold tests-sweetness sensitivity differences in young and older adults.
166	A significant difference in detection threshold (P=0.0001), recognition threshold
167	(P=0.0001) and Just About Right (JAR) sweetness level (P=0.03) was found between
168	the young and older adults. The older adults were significantly less sensitive to
169	sweetness than the young adults. A significant difference in the older adults compared
170	to the younger group ability to identify the taste was found (P=0.0001 data not shown).
171	Gender did not affect any of the parameters measured.

172

#### 174 **Table 1**. Mean detection and recognition thresholds, Just About Right (JAR)

# sweetness levels by age and gender.

176

	Young adults	Older	Young males	Young	Older	Older
		adults		females	Males	females
Thresholds (g/L)	Mean	Mean	Mean	Mean	Mean	Mean
Detection	3.75 <sup>a</sup>	5.52 <sup>b</sup>	3.45 <sup>a</sup>	3.87 <sup>a</sup>	5.10 <sup>b</sup>	5.78 <sup>b</sup>
Recognition	5.94 <sup>a</sup>	6.89 <sup>b</sup>	5.77 <sup>a</sup>	6.00 <sup>a</sup>	6.79 <sup>b</sup>	6.95 <sup>b</sup>
JAR	6.34 <sup>a</sup>	6.87 <sup>b</sup>	5.92 <sup>a</sup>	6.51 <sup>b</sup>	6.76 <sup>b</sup>	6.94 <sup>b</sup>

177 Mean values within the same row with different superscripts are significantly different as determined

178 by Fishers least significant difference (LSD) (P<0.05).

179

#### 180 Product hedonic liking tests

181 In overall hedonic liking (both young and older adults), chocolate was the most liked 182 and the control sucrose solution was the least liked sample tested. This data is also 183 mirrored by the rank preference data where the chocolate variant was ranked more 184 preferred for both young and older adults.

186 **Table 2**. Mean product overall hedonic liking and sweetness intensity for all

# 187 products across all groups.

188

	Vanilla	Strawberry	Chocolate	Sucrose
	Mean	Mean	Mean	Mean
Overall hedonics\$	3.77 <sup>a</sup>	3.91 <sup>a</sup>	3.60 <sup>a</sup>	4.44 <sup>b</sup>
Sweetness intensity*	64.5 <sup>a</sup>	68.5 <sup>b</sup>	54.2 <sup>c</sup>	75.4 <sup>d</sup>

189 Mean values within the same row with different superscripts are significantly different as determined

190 by Fishers least significant difference (LSD) (P<0.05) \$ 7 point hedonic scale; \*100mm line scale

191

# 193 **Table 3.** Overall hedonic liking of products rating by age group and gender.

# 194

203

		Young adults	Older	Young	Young	Older	Older
			adults	males	females	Males	females
	Hedonic liking*	Mean	Mean	Mean	Mean	Mean	Mean
	Vanilla	3.71 <sup>a</sup>	3.81 <sup>a</sup>	3.05 <sup>a</sup>	3.97 <sup>a</sup>	2.81 <sup>a</sup>	4.4 <sup>b</sup>
	Strawberry	3.88 <sup>a</sup>	3.92 <sup>a</sup>	3.35 <sup>a</sup>	4.08 <sup>a</sup>	2.98 <sup>a</sup>	4.49 <sup>b</sup>
	Chocolate	3.41 <sup>a</sup>	3.74 <sup>a</sup>	3.22 <sup>a</sup>	3.49 <sup>a</sup>	3.45 <sup>a</sup>	3.91 <sup>a</sup>
	Sucrose	4.07 <sup>a</sup>	4.71 <sup>a</sup>	4.85 <sup>a</sup>	3.76 <sup>b</sup>	4.31 <sup>a</sup>	4.97 <sup>a</sup>
	*7 point hedonic scale						
195	Mean values withir	n the same row wi	ith different superscrip	ots are sign	ificantly dij	fferent as d	etermined
196	by Fishers least sig	nificant differenc	e (LSD) (P<0.05)				
197							
198	Please see the t	ables 4 & 5 A	Appendix 2 in the	supplem	entary da	ta on the	e journal
199	website						
200	http://www.agein	ng.oxfordjourn	als.org/				
201							
202	Product sweetne	ss intensity					

The sweetness intensity of the sucrose solution perceived by the older adults was

204	significantly lower than ratings from the young group (P=0.03), and young males
205	perceived the solutions as significantly sweeter that all other groups (P< $0.05$ ). No
206	differences were found between other flavour variants in terms of sweetness intensity
207	ratings by either age or gender.

208

Despite the identical sweetness level across all samples, the sweetness intensity perceived by both groups (young and older adults) were significantly different for each product variant, with the chocolate flavour sweetness intensity perceived as significantly lower than all other variants and the sucrose solution as the highest sweetness intensity (P<0.05). This suggests that there is a strong taste and/ aroma interaction in perceptions of sweetness intensity. It is possible that coca would increase bitterness which may have suppressed the sweetness.

216

217 Relationship between sweetness intensity and hedonic measures

An inverse relationship was found for overall and individual product variants sweetness intensity and both hedonic liking of the product sweetness (R=0.399, P=0.001) and overall product characteristics (R=0.0.398, P=0.001). It may therefore be inferred that as the products perceived sweetness intensity increased, so too did product dislike.

#### 224 Discussion and conclusion.

Significant differences were found in both detection and recognition thresholds and the correct identification of the basic taste of sweetness between young and older adults, which reflects the findings of other researchers [16, 17, 18] who have reported that taste sensitivity decreases with age. It has been suggested that differences in taste recognition, such as those found in this study may be due to a time lag in the turnover of taste receptor cells [19] as work has shown that there is no decrease in the number of taste buds with age which earlier research had postulated [20,21].

Although previous work has demonstrated aged related changes in taste acuity, few studies have explored the interaction of this with real food systems such as ONS used in the current study. Work carried out in the Netherlands found older adults perceived sweet ingredients in chocolate drinks and vanilla waffles as less intense than the young [22, 23]. However no differences in perceived sweetness of dairy products [24] or custards [25] has been found.

In the current study, dislike of ONS was found, the degree of which varied across flavours, genders and age groups. The chocolate flavour ONS was found to be the most liked, and was perceived as less sweet than other product variants presented in this study. In general, all older adults who had significantly higher sweetness thresholds rated the ONS more negatively for liking (both sweetness and overall liking of the samples) although they perceived the sweetness intensity of the products

244	to be less intensive than the young adults. This infers that other product sensory
245	attributes in addition to sweetness are contributing to the dislike of these products.
246	Indeed, it has been suggested by others that the incongruence found between sensory
247	and hedonic modalities is due to different processing pathways for these in the brain
248	[26, 27).

It had been assumed in the past that age related sensory losses may lead to modifications of food pleasantness and food choice [28], however others suggest a habituation process to the decreased perception exists which may offer a compensatory mechanism to prevent decreases in food liking [29]. This may in part explain why significant differences in taste acuity found in the current study did not translate into significant differences in liking across the age groups.

255 In Gosney's study [13], 38% of participants disliked the sweetness of ONS (not 256 flavour specific) which reflects the results of the current study where 27% of the older 257 adults disliking the sweetness, whereas in young adults this was more accepted as 258 only 6% disliked the sweetness. However in this study, 25% disliked that taste, 19% 259 the texture and a further 19% commented that they felt sick or bloated post consumption. Compliance was extremely low at only 37%. Although we did not find 260 261 that sweetness acuity directly related to liking of these products, we did find that 262 sweetness intensity is one of the factors leading to dislike of these products.

263 Even though the difference in results shown in table 3, may appear small and some 264 may question their clinical relevance, however in terms of consumer acceptability, 265 products with a value of <5, are unlikely to be available on the open market, these low 266 scores indicate poor liking of the products, but show that the degree of this was 267 moderated by flavour. In addition, the difference between liking scores of over 1 point 268 (on a 7 point scale) for some of the flavour variants between older males and females 269 is of interest and concern. Liking scores of <3, as a mean for older males, would 270 certainly be expected to lead to product rejection. It is also interesting to note, that in 271 general males across both age groups scored the products less favourably that females, 272 again increasing the likelihood of their rejection.

273 We acknowledge that we used a convenience sample of young and older adults, and 274 therefore our results may not be generalisable, however we feel that they are 275 important in pointing out some directions in which research could be focused in terms 276 of effective treatment of malnutrition. It has long been known that ONS are wasted 277 with the common reason been given that consumers/patients dislike the taste, our 278 research has sought to address what aspects taste are disliked, and examine if this is 279 related to sweetness thresholds and sweetness and flavour of the products. The 280 research which we have presented in this paper has used a multidisciplinary approach 281 involving sensory scientists, flavour chemists, dietitians, nutritionists and clinicians to

282	try and understand some of the 'taste' issues surrounding poor consumption and we
283	are currently using these finding to develop solutions to improve ONS acceptability.
284	We would suggest that more research is needed in this area as results of this study
285	indicate that ONS may need to be reformulated depending on target group (age and
286	gender) to increase acceptance and increase consumption. Reformulation will be
287	especially beneficial amongst malnourished older adults but also within all groups
288	where these products are used, so that required nutrients could be delivered in a more
289	palatable form, maximising the nutritional effects of ONS and in turn reducing
290	wastage.
291	
292	Acknowledgements
293	Abbott Nutrition are thanked for the supply of ONS used in this study.
294	
295	Key points
296	• Young and older adults possess significantly different sweetness threshold
297	levels.
298	• As perceived products sweetness increased, liking of the products decreased.
299	• Chocolate flavour ONS was the most preferred product tested.
300	

## 301 Conflict of Interest:

302 None declared.

303

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- 372
- 373

# 375 Supplementary data

**Table 4.** Flavour rank preference data according to age group.

	Most liked (came first in preference ranking)	Least liked
Young adults	Chocolate	Strawberry
Older adults	Chocolate	Vanilla

377

# 378 **Table 5.** Mean product sweetness intensity perception rating by age group and gender.

	Young adults	Older	Young	Young	Older	Older
		adults	males	females	Males	females
Sweetness intensity*	Mean	Mean	Mean	Mean	Mean	Mean
Vanilla	6.45 <sup>a</sup>	6.45 <sup>a</sup>	5.94 <sup>a</sup>	6.64 <sup>a</sup>	6.07 <sup>a</sup>	6.68 <sup>a</sup>
Strawberry	6.86 <sup>a</sup>	6.75 <sup>a</sup>	6.62 <sup>a</sup>	6.96 <sup>a</sup>	6.52 <sup>a</sup>	6.89 <sup>a</sup>
Chocolate	5.55 <sup>a</sup>	5.32 <sup>a</sup>	5.16 <sup>a</sup>	5.70 <sup>a</sup>	5.24 <sup>a</sup>	5.37 <sup>a</sup>
Sucrose	8.03 <sup>a</sup>	7.17 <sup>b</sup>	9.02 <sup>a</sup>	7.63 <sup>b</sup>	7.05 <sup>b</sup>	7.25 <sup>b</sup>

\*7 point hedonic scale

379 Mean values within the same row with different superscripts are significantly different as

380 determined by Fishers least significant difference (LSD) (P<0.05).