

## II. Digestion and absorption of carbohydrates. Small pull

- digestion occurs in mouth and Intestine. upto 10 feet & heat not
- cooking helps in breaking of glycosidic linkages in polysaccharides.
- The hydrolysis of glycosidic bonds are carried out by the enzyme \_\_\_\_\_.
- In the diet carbohydrates are available as polysaccharides (starch, glycogen) & as disaccharides {sucrose & lactose}.

# These are hydrolysed to monosaccharides units in g.i tract.

- digestion in the mouth.
- digestion begins with salivary alpha amylase
- inhibited by gastric HCl.

In pancreas.

- pancreatic juice contains another alpha amylase which will hydrolyse alpha-1,4 glycosidic linkage.
- Subunits formed are maltose, isomaltose, dextrans & branched / unbranched oligosaccharides.

In small intestine.

- The final digestion of disaccharides & oligosaccharides by disaccharidases & oligosaccharidases to monosacch. occurs.
- Important disaccharidases are sucrase, maltase, isomaltase & lactase.  
(depending on specific substrate).
- monosaccharides are then absorbed.

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<u>Enzyme</u>	<u>Substrate</u>	<u>Products</u>
Sucrase	Sucrose	Glucose, Fructose.
Lactase	Lactose	Glucose, Galactose.
Maltase	Maltose	Glucose
Isomaltase	Isomaltose.	Glucose.

### Lactose Intolerance.

- deficiency of lactase, which hydrolyses lactose to glucose & galactose.
- Lactase is present in the brush border of enterocytes.
- Lactose accumulates in gut.
- Bacterial action produce organic acid.
- Water into bowels by osmotic effect.
- Causes Irritant diarrhoea.
- due to presence of lactose in stool {reducing sugar}
- It shows positive Benedict's test.

2 types.

Congenital.

- due to congenital absence of lactase enzyme.

Acquired.

may be sudden change into milk based diet,  
{ lactase is an Inducible  
diet enzyme } malnutrition

Treatment.

- avoid milk & milk products.
- curd is given (lactobacilli contain lactase).