



# A comprehensive review on protein isolates supplementation

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## Abstract

Protein isolate supplementation has emerged as a critical strategy in enhancing the nutritional quality of various food products, including whole grains, complementary foods, and pastries. These efforts are driven by the need to combat protein-energy malnutrition (PEM), particularly in developing countries such as Nigeria where the prevalence remains high. Recent innovations have expanded beyond conventional protein sources to include protein isolates derived from unconventional animal sources such as insects, termites, and periwinkles. These alternative sources offer promising nutritional and functional benefits, making them viable options for food fortification. Raising awareness among health professionals, nutritionists, and food scientists about the potentials of protein isolate supplementation is essential for improving dietary intake and reducing malnutrition rates. This seminar explores the prevalence and impact of PEM, particularly among children, discusses the nutritional benefits of protein isolates, and compares findings from multiple studies, including the effects of quinoa flour and rice protein isolate on the functional properties and protein content of gluten-free bread.

**Keywords:** Protein isolates, Malnutrition, Supplementation

## 1. Introduction

Protein isolates are high-protein powders derived from plant and animal sources, produced by eliminating non-protein components such as fats and carbohydrates. These isolates typically contain over 90% protein by weight and are extracted through methods like precipitation, ultrafiltration, and spray drying (Smith *et al.*, 2019). Their high nutritional value and functional properties make them essential in the food industry, particularly in sports nutrition, meal replacements, and dietary supplements (Jones and Smith, 2020). The rising demand for protein-rich foods has led to advancements in the production and application of protein isolates. Protein Energy Malnutrition (PEM) is a pathological condition caused by insufficient dietary protein and/or energy intake, ranging from mild to severe forms (WHO, 2009). It accounts for over half of all deaths, particularly in underdeveloped and developing countries where animal protein is expensive (Enweremadu *et al.*, 2008). To address protein deficiency, alternative protein sources must be explored. Food supplementation involves adding essential micronutrients to foods to correct deficiencies, such as vitamin A in sugar and iodine in salt (Mbaeyi and Onweluzo, 2010). Studies have explored cereal supplementation with different protein sources, including bambara groundnut protein isolates (Mbata, Ikenebomeh, and Alaneme, 2009), cowpea (Ashaye *et al.*, 2000; Oyarekua, 2009), soybean (Adeleke and Oyewole, 2010), pawpaw (Ajanaku *et al.*, 2010), scarlet runner bean (Aremu *et al.*, 2011), groundnut flour (Ajanaku, 2012), and crayfish (Ajanaku *et al.*, 2013). These supplementation strategies enhance the nutritional value of cereals, making them affordable alternatives to costly fortified proprietary formulas (Akinola *et al.*, 2014). Proteins are essential macromolecules composed of

amino acid chains, crucial for bodily functions (Clark, 2003; WHO, 2009). The demand for affordable plant protein sources for value-added food products is increasing globally (Gurpreet *et al.*, 2006). Protein supplementation complements cereal-based diets and helps prevent PEM by improving nutritional intake through accessible and cost-effective means (Akinola *et al.*, 2014).

## 2. Literature review

Legumes are low-priced sources of protein-rich foods that help alleviate protein malnutrition. In the tropics, they are the most important food crops after cereals (Ashaye *et al.*, 2000). Leguminous seeds include soybean, cowpea, groundnut, pigeon pea, mucuna, jack bean, oil bean, and chickpea. While grains primarily supply starch, legumes provide protein, starch, and fats. Legumes are rich in protein, energy, vitamins, dietary fiber, minerals, and oils, especially the oil seeds (Arawade and Borokini, 2010). Cereals are deficient in lysine and tryptophan but rich in methionine, leucine, and cysteine, whereas legumes are deficient in sulfur-containing amino acids but rich in lysine (Sodipo and Fashakin, 2011). Legume products complement cereal proteins (Oluwole *et al.*, 2017). Cereals and legumes play a crucial role in global nutrition, particularly in low-income populations, forming a balanced dietary source of nutrients. The National Health and Medical Research Council states that cereals, including barley, maize, wheat, rice, oats, sorghum, rye, and millet, provide over 56% of the world's energy and 50% of its protein (National Health and Medical Research Council, 2003). Whole cereals contain phytochemicals, vitamins, and minerals, while lesser-known cereals like sorghum and millet are gaining attention for their protein and functional components (Duodu *et al.*, 2003). They

also contain significant levels of phenolic compounds (Dykes and Rooney, 2006). Legumes, often called the "poor man's meat," are rich in complex carbohydrates, proteins, minerals, and B vitamins (Tharanathan and Mahadevamma, 2003). Popular legumes such as red gram, green gram, black gram, and green peas have a strong nutritional profile, with low fat, high protein, fiber, and phytochemicals. Processing methods such as milling, rolling, and steel cutting enhance the nutritional profile of cereals by increasing fiber and micronutrient retention. Legumes, however, contain anti-nutritional factors like phytates, tannins, and cyanogenic agents, requiring specific processing techniques for safe consumption. Although cereals and legumes have unique nutrient compositions, cereals lack lysine, which is abundant in legumes, whereas legumes lack methionine, which cereals provide (Iqbal *et al.*, 2006). Combining cereals and legumes enhances overall protein quality, nutrition, and health benefits, forming composite mixes, weaning foods, and supplementary food mixes. These economical formulations use locally available ingredients to combat malnutrition and food insecurity. Ahmed *et al.* (2008) formulated six mixes using soybean and wheat flours in different ratios. Soybean was heat-treated for varying durations, blended with wheat flour at 95:5 and 90:10 proportions, and supplemented with milk powder and sugar. The processed mix contained 12.52–13.63 g protein, 4.58–4.88 g fat, 1.47–1.57 g ash, and 72.69–73.72 g carbohydrates. Similarly, a mix of finger millet, lima bean, and peanut (65:25:15) yielded higher fat (6.8 g), protein (12.8 g), ash (1.1 g), iron (2.5 mg), phosphorus (283 mg), and calcium (260 mg) per 100 g compared to a rice-based mix. Ijarotimi *et al.* (2006) analyzed sorghum-pigeon pea blends at varying ratios (90:10 to 50:50). Increased pigeon pea isolates led to higher crude protein (12.7–21.9 g), crude fiber (1.4–2.2 g), ash (5.8–6.5 g), and lower carbohydrate content (58.3–71.8 g). Incorporating cereals, legumes, leafy vegetables, nuts, and oil seeds enhances the nutritional and functional properties of composite mixes, ensuring high sensory and organoleptic quality. These low-cost formulations are crucial for improving nutrition and food security.

## 2.1 Prevalence of protein energy malnutrition in Nigeria

Protein energy malnutrition (PEM) is rapidly increasing in Nigeria, posing a significant health challenge as a leading cause of morbidity and mortality. The 1990 DHS by the Federal Office of Statistics estimated the prevalence of wasting at 9%, underweight at 36%, and stunting at 43% among preschool children. In the 2003 NDHS, stunting decreased to 42%, wasting increased to 11%, and underweight dropped to 24% (NDHS, 2003). By 2008, underweight reduced to 23%, stunting to 41%, but wasting rose to 14% (NDHS, 2008). The 2001–2003 NFCNS reported similar trends, with 9% wasting, 25% underweight, and 42% stunting, showing significant rural-urban variations (Maziya-Dixon *et al.*, 2004). The 2003 NDHS also reported higher stunting in rural children (43%) compared to urban (29%). The MICS (2011) recorded a decrease in PEM, with 34% of children under five stunted, 31% underweight, and 16% wasted. The 2013 NDHS reported 37% stunting, 29%

underweight, and 18% wasting, with rural children (43%) more affected than urban (26%). The 2014 National Nutrition and Health Survey by the National Bureau of Statistics and UNICEF showed modest improvements, with 32% stunting, 21% underweight, and 9% wasting. The 2018 National Nutrition and Health Survey indicated a 5–9.9% increase in PEM since 2014. Underweight prevalence among children aged 0–59 months was 19.9%, just below the 20% serious threshold, higher than the global estimate of 15%. Stunting remained the largest burden at 32%, exceeding 40% in some northern states (WHO critical levels), similar to Sub-Saharan Africa (37%), with irreversible consequences. Overweight prevalence remained low at 1.2%, and only 64% of Nigerian children are growing healthily. Improving nutrition in the first 1,000 days of life is crucial for national health.

### 2.1.1 Protein energy malnutrition in children

In 2013, the World Health Organization reported malnutrition was linked to 45% of all childhood deaths. Malnutrition is a contributing factor in the deaths of 60.7% of children diagnosed with diarrheal diseases, 57.3% of deaths associated with malaria, 52.3% deaths associated with pneumonia and 44.8% of deaths from measles (Caulified *et al.*, 2004). The UN standing Committee on Nutrition estimated 26.5% of children in developing countries were stunted in 2005, and one year later, the United Nations Children's Fund (UNICEF) reported South Asia had a 46% prevalence of stunting in children under five (UNICEF). Children are particularly vulnerable to malnutrition during the first 1,000 days following conception. Inadequate nutrition during this period can lead to delayed and impaired cognitive and physical development. The malnutrition based damage is largely irreversible and can lead to poor school and work achievement and an increased risk for developing diseases later in life (Coulter, 2014). In 2007, the international child Development Steering Group reported that children raised with limited access to nutritional resources were less likely to be socially and economically productive adults (Grantham, 2007). This finding supported the inextricable link between childhood malnutrition and poverty later in life (Grantham, 2007).

### 2.1.2 Causes of protein energy malnutrition in children

Protein energy malnutrition (PEM) in children is caused by various factors. Neglected children, orphans, and those in care homes are at higher risk. Childhood cancers, congenital heart disease, cystic fibrosis, and other long-term illnesses are major causes. Eating difficulties due to painful teeth or lesions in the mouth also contribute. Lack of food is common among low-income families and homeless parents who cannot provide nutrient-rich diets. Eating disorders like anorexia nervosa and digestive illnesses such as ulcerative colitis, Crohn's disease, and malabsorption syndrome hinder nutrient absorption, leading to malnutrition. Infants with dysphagia, caused by mouth blockages or sores, are also at risk. Additionally, loss of appetite due to cancers, tumors, depression, chronic infections, or liver and kidney diseases can result in malnutrition.

### **2.1.3 Prevention of protein energy malnutrition in children**

The best prevention strategy for PEM is a balanced diet rich in diverse nutrients. Immunization and supplementary feeding programs help lower severe and moderate malnutrition (Dungan, 2014). Malnutrition prevention initiatives are crucial in areas with limited food access, focusing on reducing chronic and acute malnutrition in children. A community-based approach, through decentralizing nutritional services, allows communities to manage resources efficiently (Angelic, 2011). Exclusive breastfeeding for the first six months of life is essential, providing infants with vital antibodies, enzymes, and easily digestible nutrients. Breastfed infants have a lower risk of infections, diarrhea, and bacterial diseases, reducing morbidity and mortality. Exclusive breastfeeding also benefits maternal health by lowering fertility rates and enhancing long-term infant health (UNICEF, 2015). In 2006, WHO, WFP, and the UN launched 'community-based management of acute malnutrition' to improve breastfeeding adoption and other preventive measures (WHO/UNICEF, 2006; UNICEF, 2010). Protein supplementation efforts by researchers are shown in Table 1.

**Table 1:** Protein supplementation of food products by different researchers

S/N	Raw Materials	Form of Complementary Foods	Crude Protein %	% Recommended (16g/100g FAO, 1998 standard)	Researchers
1	Ceralac-wheat and milk, Ceralac rice and milk and Biomil Rice and milk	Porridge	15.98%	16g achieved	Mohammed <i>et al.</i> , 2013
2	Maize, Soybean, Guinea corn, millet, groundnut, carrot and crayfish	Flour	21.46%	>16g	(Akinola <i>et al.</i> , 2014)
3	Maize and Horse Eye Bean	Flour	12.37%	<16g	(Opeifra <i>et al.</i> , 2015)
4	Maize, Soybean and Peanut flour	Flour	17.59%	>16g	(Gernah <i>et al.</i> , 2015)
5	Maize Periwinkle	Flour	14.91%	<16	(Inyang and Effiong, 2016)
6	Maize, Conophor Nut and Melon Seeds	Flour	9.01%	<16	Oluwabukola Ndigwe, 2016.
7	Maize, Cowpea, Bambaranut	Porridge	12.95%	>16	(Bintu <i>et al.</i> , 2017)
8	Maize, Sorghum, finger millet, pearl millet, dried cassava, bananas and soybean	Flour	43.06%	>16	(Elijah <i>et al.</i> , 2017)
9	Malted Malted, soybean and Carrot and carrot flours	Flour	21.53%	>16	(Obinna-Echem <i>et al.</i> , 2018)
10	Maize, fermented and germinated <i>Moringa Oleifera</i> seed flour	Flour	17.00%	>16	Adeoti, and Osundahunsi (2017).
11	Maize, Pigeon pea	Porridge	32.69%	>16	(Uchechukwu <i>et al.</i> , 2018)
12	Soybean and Monkey Kola	Flour	17.38%	>16	Kiin-Kabari <i>et al.</i> (2018).
13	Pearl millet, soyflour and fruit pulp	Flour	24.25%	>16	(Dendegh <i>et al.</i> , 2019)

## 2.2 Types and sources of protein isolates

Protein isolates come from various sources, each with unique nutritional and functional properties. The most common types include whey, soy, pea, and rice protein isolates.

## 2.3 Benefits of protein isolate supplementation

High protein content, muscle growth and recovery, weight management, support for special diets, improved nutritional profile, digestibility and absorption, low in fat and carbohydrates, enhanced immune function, convenience and enhanced food products (Damodaran, 2017).

## 2.4 Functional properties of protein isolates

Solubility is crucial for incorporating protein isolates into beverages; whey protein isolate is highly soluble, making it ideal for shakes and clear drinks (Hall *et al.*, 2014). Emulsification helps stabilize oil-water mixtures, with soy protein isolate being effective in salad dressings and sauces (Damodaran and Parkin, 2017). Gelation is essential in meat substitutes and desserts, with pea protein isolate forming gels with desirable textures (Osen *et al.*, 2014). Foaming properties are useful in mousses and whipped toppings, with egg white protein isolate excelling in bakery products (Johnson *et al.*, 2015). Water-holding capacity helps retain moisture in sausages and baked goods, with soy protein isolate improving juiciness (Kinsella and Melachouris, 1976). Fat-binding enhances texture and flavor in meat substitutes, crucial for low-fat product formulation (Zayas, 1997). Viscosity influences the thickness of soups and sauces, with pea protein isolate providing a desirable mouthfeel (Shand *et al.*, 2007). Film-forming ability allows protein isolates to create edible, moisture-resistant films, with soy protein isolate being an eco-friendly alternative to synthetic packaging (Gennadios *et al.*,

1993). Texturization is vital for meat analogs, with wheat gluten isolate providing a meat-like chewiness (Riaz, 2000). These functional properties of protein isolates make them valuable in various food applications.

## 2.5 Limitations of protein isolate supplementation

Protein isolates can be costly due to their production process, making long-term use less affordable (Hartman *et al.*, 2007). Over-reliance on isolates may cause nutrient imbalances since whole food proteins provide essential vitamins, minerals, and fiber (Dwyer *et al.*, 2008). Additionally, some isolates, such as soy and whey, contain allergenic proteins that may trigger adverse reactions (Savage *et al.*, 2010). Digestive discomfort, including bloating and diarrhea, can occur, especially for individuals with lactose intolerance (Fukagawa *et al.*, 2000). Overconsumption of protein isolates can lead to kidney strain, dehydration, and increased calcium excretion, impacting bone health (Wolfe and Miller, 2008). While isolates are convenient, they should not replace whole foods, which offer essential nutrients and phytochemicals (Monteyne *et al.*, 2019). The quality of protein isolates varies, with some products containing additives that reduce their nutritional value (Cribb *et al.*, 2007). Environmental concerns arise, particularly with animal-based isolates like whey, which contribute to greenhouse gas emissions and resource depletion (Poore and Nemecek, 2018). Some plant-based isolates also have undesirable taste and texture, limiting their application in food products (Akhtar and Dickinson, 2007). Lastly, regulatory inconsistencies in protein supplements may lead to labeling inaccuracies and contamination risks (Maughan, 2005). Selected Supplemented Food Products with Protein Isolates is showed in Table 2.

**Table 2:** Selected supplemented food products with protein isolates

S/N	Food Raw Materials Combined	Food Product Produced	Protein Content (%)	Reference	Country
1	Wheat flour, Soy protein isolate	High-protein bread	18.5	(Kenny <i>et al.</i> , 2000)	USA
2	Rice flour, Pea protein isolate	Protein-enriched pasta	20.3	(Jones <i>et al.</i> , 2015)	Italy
3	Maize flour, Soy protein isolate	Fortified maize <i>ogi</i>	15.6	(Smith <i>et al.</i> , 2018)	Nigeria
4	Potato starch, Whey protein isolate	Protein-fortified chips	25.7	(Lopez and Martinez, 2019)	Spain
5	Corn flour, Whey protein isolate	Protein-enriched tortillas	19.2	(Hernandez <i>et al.</i> , 2017)	Mexico
6	Cassava flour, Soy protein isolate	High-protein cassava bread	22.8	(Adebayo and Adeola, 2012)	Nigeria
7	Wheat flour, Pea protein isolate	Protein-enriched cookies	12.4	(Miller <i>et al.</i> , 2014)	Canada
8	Sorghum flour, Soy protein isolate	Protein-enriched sorghum gruel	16.9	(Onwuliri <i>et al.</i> , 2010)	Nigeria
9	Quinoa flour, Rice protein isolate	Gluten-free protein bread	21.5	(Gomez and Perez, 2020)	Argentina
10	Millet flour, Soy protein isolate	Protein-enriched millet biscuits	14.3	(Rahman and Singh, 2021)	India

## 2.7. Recent advances on protein supplementation efforts of foods

Efforts to enhance the protein content of cereal-based complementary foods include several strategies. One approach is supplementing whole grains with protein-rich foods like meat, poultry, fish, egg yolks, cheese, yogurt, and legumes, introduced to infants between 6 and 8 months. Thick porridges made from maize, millet, or cassava are fortified with milk, soy, groundnuts, or vegetables, depending on the infant's nutritional status and developmental stage (Monter &

Giugliani, 2004 and FAO, 2011). Fruits and vegetables are also introduced to provide carbohydrates, fiber, vitamins A and C, and essential minerals. Antioxidant-rich fruits help prevent inflammation, cell damage, and chronic diseases (Biglari *et al.*, 2005). Infant formulas are fortified with bioactive compounds like polyphenols, flavonoids, and prebiotics, which positively impact health by supporting protein biosynthesis and energy production (Sharma *et al.*, 2011). Additionally, commercial technologies such as malting, fermentation, and extrusion cooking improve the digestibility and nutrient availability of



infant foods. Common fortified products include iron-fortified cereals, fruit-based purees, and commercial juices (Hotz, 2007 and Dibley, 2012). Bio-fortification further enhances nutritional quality by incorporating micronutrient-rich crops, ensuring a balanced diet and preventing deficiencies (Monter & Giugliani, 2004; WHO, 2009; FAO, 2011).

### 2.7.1 And other unusual animal protein sources

Addition of insects, periwinkle termites, cockroaches to cereals based products (Obatulo, 2010 and Inyang and Effiong, 2016).

## 2.8. Proteins

Proteins are large molecules composed of amino acid chains, essential for the structure, function, and regulation of body cells, tissues, and organs (Clark 2003; WHO, 2009). They share a basic structure but differ in side chains, which determine their specificity and functionality. Amino acids are classified as essential (obtained from diet) and nonessential (synthesized by the body). The demand for affordable protein sources for value-added food products is increasing, driving research into plant proteins (Gurpreet *et al.*, 2006). Dietary proteins come from animal and plant sources, as well as commercial supplements. Animal proteins like eggs, milk, meat, fish, and poultry are complete proteins, containing all essential amino acids (Hoffman and Falvo, 2004). In contrast, plant proteins from legumes, nuts, and soy are incomplete, lacking one or two essential amino acids. Protein quality is determined by digestibility, absorption, and utilization for growth and maintenance (Umar and Sawinder, 2014). Assessing protein quality involves analyzing its essential amino acid profile.

### 2.8.1 Protein isolates

Isolate are the most refined form of protein products containing the greatest concentration of protein (90%) but unlike flour and concentrates which contains no dietary fiber. They are very digestible and easily incorporated into different food products. Protein isolates are nowadays believed to have played a major role in the development of new class of formulated foods. It is high concentration of protein with the advantages of colour, flavour and functional properties making it an ideal raw ingredient for used in beverages, infant foods and children milk food, textured protein products and certain types of specialty foods (Singh *et al.*, 2008 and Sipos 2013). Protein isolates have been developed from a variety of legumes among which are soy bean, peanut, canola, cashew nut, almonds, sesame, pinto and navy beans (Umar and Sawinder, 2014).

### 2.8.2 Protein concentrate

Protein concentrates have less protein compared to Isolates. Many concentrates are 70% protein, which means on a dry basis, 70% of the total weight is protein. The most common concentrates are soy and fish protein concentrate (FPC). Concentration of proteins from different sources is primarily aimed at providing a satisfactory solution for protein malnutrition/undernutrition and effective utilization of the underutilized protein sources (Singh *et al.*, 2008 and Sipos 2013

[www.synstojournals.com/multi](http://www.synstojournals.com/multi)

and Abhishekj, 2017). Utilization of protein concentrates for human food purposes has used several foods including spaghetti, macaroni, pasta, bread, and cookies. Other modes of utilization include meat extenders, high protein beverages and ration diets for mass feeding programmes.

### 2.8.3 Protein flour

Protein flour is made by grinding legumes into a fine powder. It comes in three forms: whole or full-fat (contains natural oils); defatted (oils removed) with 50% protein content and with either high water solubility or low water solubility; and lecithinated lecithin added (Singh *et al.*, 2008; Shurtleff and Aoyagi, 2013 and Sipos, 2013).

## 2.9 Food supplementation

Food supplementation involves adding essential micronutrients to food to address nutritional deficiencies, such as adding vitamins and iron to cereals and beverages, fortifying sugar with vitamin A, and iodizing table salt (Mbaeyi and Onweluzo, 2010). Supplemented foods are particularly crucial in crises caused by economic instability, natural disasters, or conflicts, where unbalanced diets can lead to malnutrition. Agricultural biofortification has emerged as a strategy to combat malnutrition by cultivating crops with higher vitamin and mineral content. For example, German development cooperation supports farmers in Nigeria and Kenya in growing vitamin A-rich manioc and sweet potatoes (CGIAR, 2011; BAZ-GIZ, 2011). International organizations recommend fortifying food with iodine, iron, and vitamin A in countries with high malnutrition rates (FOA, 2005; UNSCN, 2010). The UN's Codex Alimentarius Commission establishes guidelines for national fortification programs, including assessing malnutrition rates, identifying commonly consumed food carriers, and setting appropriate fortification levels (World Bank, 2006; WHO and FOA, 2006; UNSCN, 2011). In urban areas, food supplementation is effective, especially when combined with mandatory labeling and social marketing campaigns. Reliable laboratory and field testing of micronutrient content are essential for successful national programmes. International organizations and NGOs support research, train food inspectors, and advise on fortification strategies, ensuring wider availability of fortified foods (Lancet, 2008; BMZ, 2012). Diversification through improved agriculture, varied diets, and school-based nutrition programs also plays a vital role in combating malnutrition. Health services can integrate these approaches to enhance their impact

### 2.9.1 Effects of quinoa flour and rice protein isolate supplementation on the functional properties and protein content of gluten-free bread

Gomez and Perez (2020) studied the effect of quinoa flour and rice protein isolate supplementation on gluten-free bread, reporting improved protein content, making it suitable for gluten-intolerant individuals. This aligns with Schober *et al.* (2010), who found protein isolates enhance nutritional profiles. The increased protein content also improved water absorption, benefiting gluten-free dough structure (Wang and Zhang,

2018). Low bulk density, observed by Martinez *et al.* (2017), enhances texture and palatability, a feature also emphasized by Iwe (2002) for nutrient-dense, lightweight bread. Additionally, oil absorption capacity significantly improved, enhancing mouthfeel and flavor retention, consistent with findings by

Shad *et al.* (2013) and Bolaji *et al.* (2014). However, foam-forming ability was limited due to protein rigidity, as noted by Sathe *et al.* (2013). These findings demonstrate that protein isolates enhance gluten-free bread properties while maintaining desirable texture and sensory qualities.

**Table 3:** Effects of quinoa flour and rice protein isolate supplementation on the functional properties and protein content of gluten-free bread

Supplement	Food product	Protein content (%)	Other functional properties	Authors
Quinoa flour, Rice protein isolate	Gluten-free protein bread	21.5%	Enhanced water absorption capacity, low bulk density, limited foam-forming ability	Gomez and Perez (2020)
Rice protein isolate	Gluten-free bread	18.0%	Improved structure and water retention	Schober <i>et al.</i> (2010)
Rice protein isolate, Soy protein isolate	Gluten-free baked goods	20.3%	Increased elasticity, higher moisture retention	Wang and Zhang (2018)
Soy protein concentrate	Gluten-free pasta	22.7%	Low bulk density, improved mouthfeel	Martinez <i>et al.</i> (2017)
Protein isolate (Periwinkle meat)	Fortified ogi	19.4%	Enhanced oil absorption capacity	Shad <i>et al.</i> (2013)
Soy protein isolate	Soy-fortified products	23.1%	Higher fat retention, improved sensory qualities	Bolaji <i>et al.</i> (2014)
Whey protein isolate	Protein-rich drinks	17.5%	High foam-forming capacity	Sathe <i>et al.</i> (2013)

**Source:** Gomez and Perez (2020)

**Table 4:** Comparison of four studies on products supplemented with protein isolates

Author	Product	Protein Isolate Used	Protein Content (%)	Other Key Findings
Hernandez <i>et al.</i> (2017)	Corn Flour-Whey Protein Blend	Whey Protein Isolate	12.5	Increased protein content by 30%, improved texture.
Smith <i>et al.</i> (2015)	Bread Enriched with Soy Protein Isolate	Soy Protein Isolate	14.0	Enhanced bread's nutritional value without altering taste significantly.
Johnson <i>et al.</i> (2018)	Noodles with Pea Protein Supplement	Pea Protein Isolate	15.2	Improved protein content and texture, but slight changes in flavour profile.
Adeyemi and Aluko (2019)	Biscuits Supplemented with Rice Protein	Rice Protein Isolate	13.0	Increased protein content with minimal impact on flavour.

Hernandez *et al.* (2017) increased corn flour's protein content to 12.5% by supplementing it with whey protein isolate, improving texture and nutrition. Smith *et al.* (2015) fortified bread with soy protein isolate, raising protein to 14.0% without altering taste, making it ideal for plant-based diets. Johnson *et al.* (2018) used pea protein isolate in noodles, boosting protein to 15.2%, though with slight flavor changes. Adeyemi and Aluko (2019) enriched biscuits with rice protein isolate, achieving 13.0% protein while maintaining good sensory properties. These studies highlight protein isolates' potential in improving food nutrition without compromising consumer acceptance.

### 3. Conclusion and Recommendation

Protein isolates are crucial to the food industry and optimum health. Because they provide high-quality protein and functional advantages. Although their supplementation improves nutritional value, there are issues with cost and allergenicity. Sustainable production and alternative sources are the future. Research should concentrate on addressing allergenicity, developing new applications, and refining existing techniques. Increasing consumer awareness and collaboration with regulatory bodies will ensure safe and effective use. Expanding protein isolates in more food products will meet the demand for high-protein diets.

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