

Gut – microbiome interactions; implications for human health



Knut E. A. Lundin, MD, PhD, Ass. Professor, FACP, FEFIM
Dept of Gastroenterology, Oslo University Hospital Rikshospitalet
Centre for Immune Regulation, University of Oslo



www.cir.no



Some key elements

- Textbooks
 - Colon absorbs water and propels feces
- Historical aspects
 - Ancient Egypt
 - Methnickoff and Arbuthnot-Lane
 - Hurst
- Today's understanding
 - Microbiome
 - Development of immune system
 - Implications for human health

The systemic effect of whdw – the putrefactive principle of faeces

PAPYRUS BERLIN, XIII, 3-7:

[illegible]

Another [prescription] against a pool [of whdw] generating fever ;

his [the patient's] body is heavy, his 13 lb (cardia? pylorus?) is sick;

his heart is hot, it pulsates;

his covers are heavy on him ;

he cannot stand many covers;

he suffers thirst at night

and he tastes [feels] his heart oppressed

like [that of] a man who has eaten fruits of the sycamore(?) tree;

his flesh is weak like [that of] a man whom the road has found.

If he crouches in order to evacuate

(then) his intestines are under pressure

(but) he is not getting along with the evacuation.

Thou shouldst say to him [i.e., concerning such a case];

This is one who is under a pool of whdwn in his body;

he tastes [feels] his heart;

he is sick [and] I shall act (on his behalf).

Should it rise in him and become an occlusion

you will have to apply [to him]

remedies against whd^w, together with remedies to destroy whd^w.²⁹



"The bird which is called the ibis and wich is a native of Egypt, by means of its hooked beak, laves the inside of its body by introducing water into the channel by which it is specially necessary for health that the residuous food shoold be discharged"

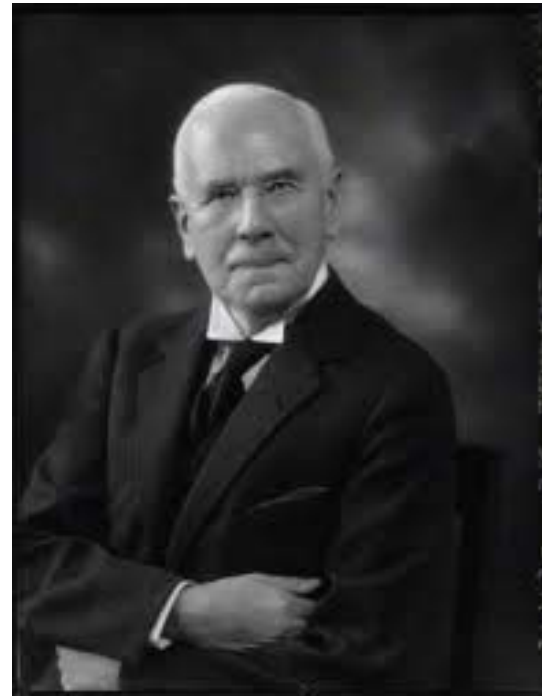
Plinius (23-79 A.D.)

Intestinal intoxication

**Elie Methnikoff
(1845-1916)**



**Sir William Arbuthnot-Lane
(1856-1943)**



**Methnikoff: Bacterial toxins from colon responsible for ageing.
The colon is a redundant organ and will soon disappear.**

Lane: I can take it out!

Knut E. A. Lundin

ADDRESSES AND O

THE UNHAPPY COLON *

BY ARTHUR F. HURST, D.M. Oxon., F.R.C.P. Lond.

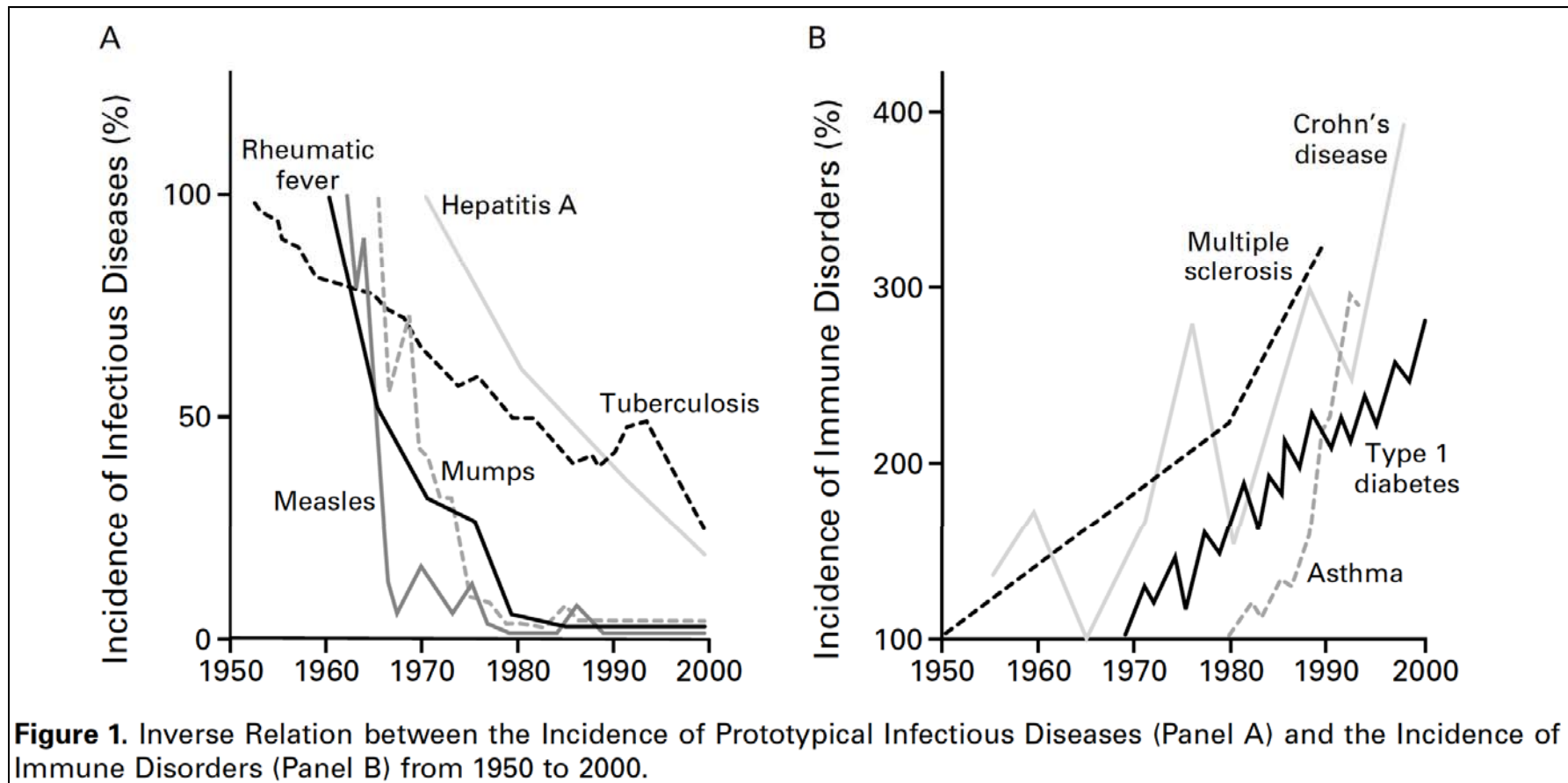
SENIOR PHYSICIAN TO GUY'S HOSPITAL, LONDON

No organ of the body is so misunderstood, so slandered, and so maltreated as the colon. Text-books of anatomy are apt to describe it as it is found in the dissecting-room, not as it occurs in a living man. Text-books of physiology describe its motor functions as seen under experimental conditions in animals, and rarely pay sufficient attention to the results of observations made on healthy human beings, and they ignore more or less completely its secretory functions. The colon is slandered every day in the advertising columns of the popular press, which accuse it of sins it never commits, and the mass suggestion which results from constantly reading about the disastrous effects of intestinal intoxication results in most of the lay public and many of the medical profession joining in these slanders. By promoting the sale of purgatives and encouraging the use of various other methods of irritating the colon, these slanders result in maltreatment. No wonder that the colon is unhappy.

Intestinal autointoxification

Many physicians will today laugh of these old theories – but are they completely to be rejected?

The changing pattern of diseases



Bach JF. NEJM 2002

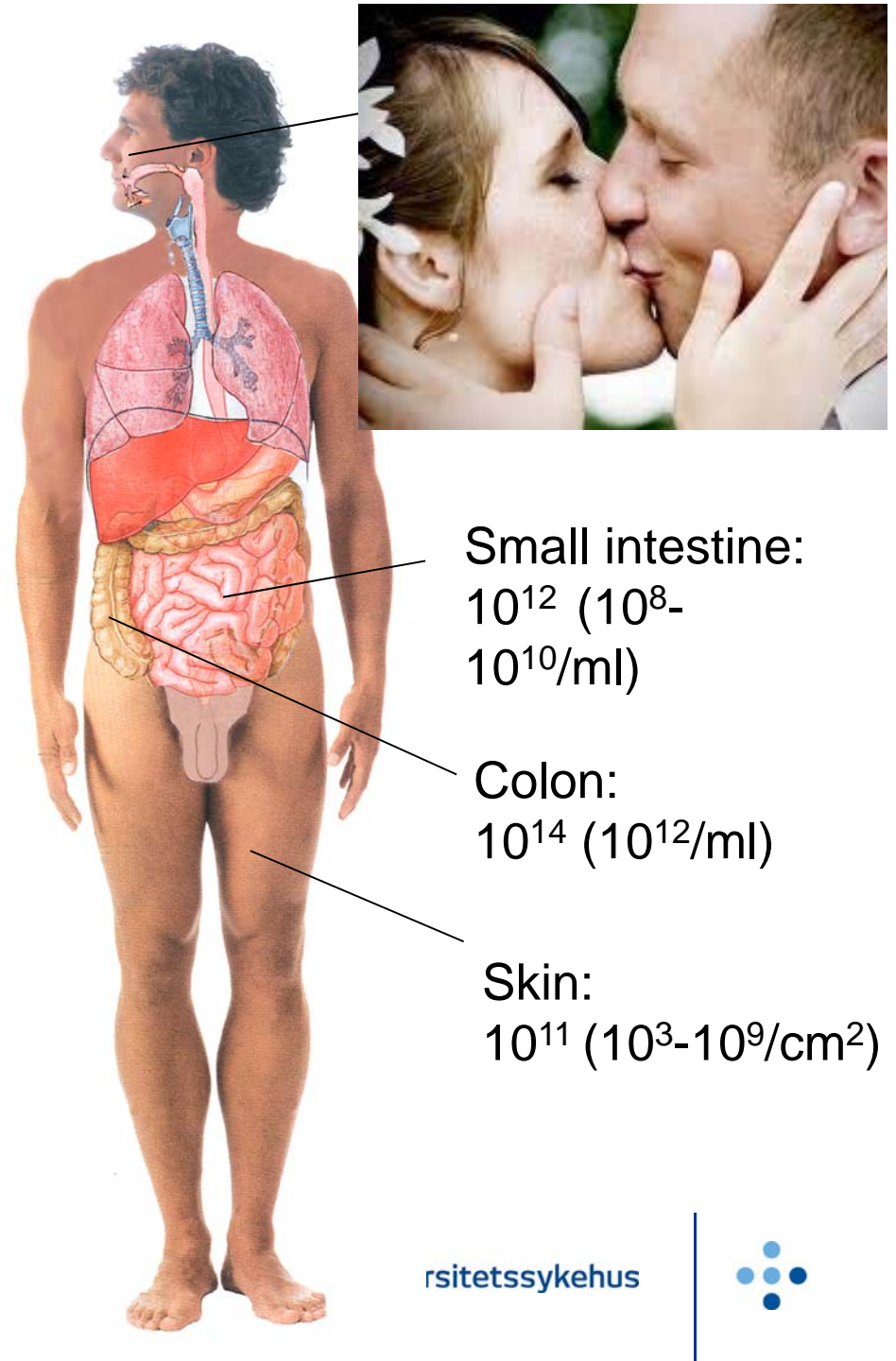
Anatomy of mucosal surfaces

- Skin 1 ½ - 2 m².
- Airway mucosa 100 m².
- Intestinal mucosa 3-400 m².
- The mucosal immune system by far the largest compartment.
- 2000 + bacterial species
- Outnumbers own cells by 100
- Large interindividual differences
- 6-7000 kg faeces in a lifetime
- Digests carbohydrates

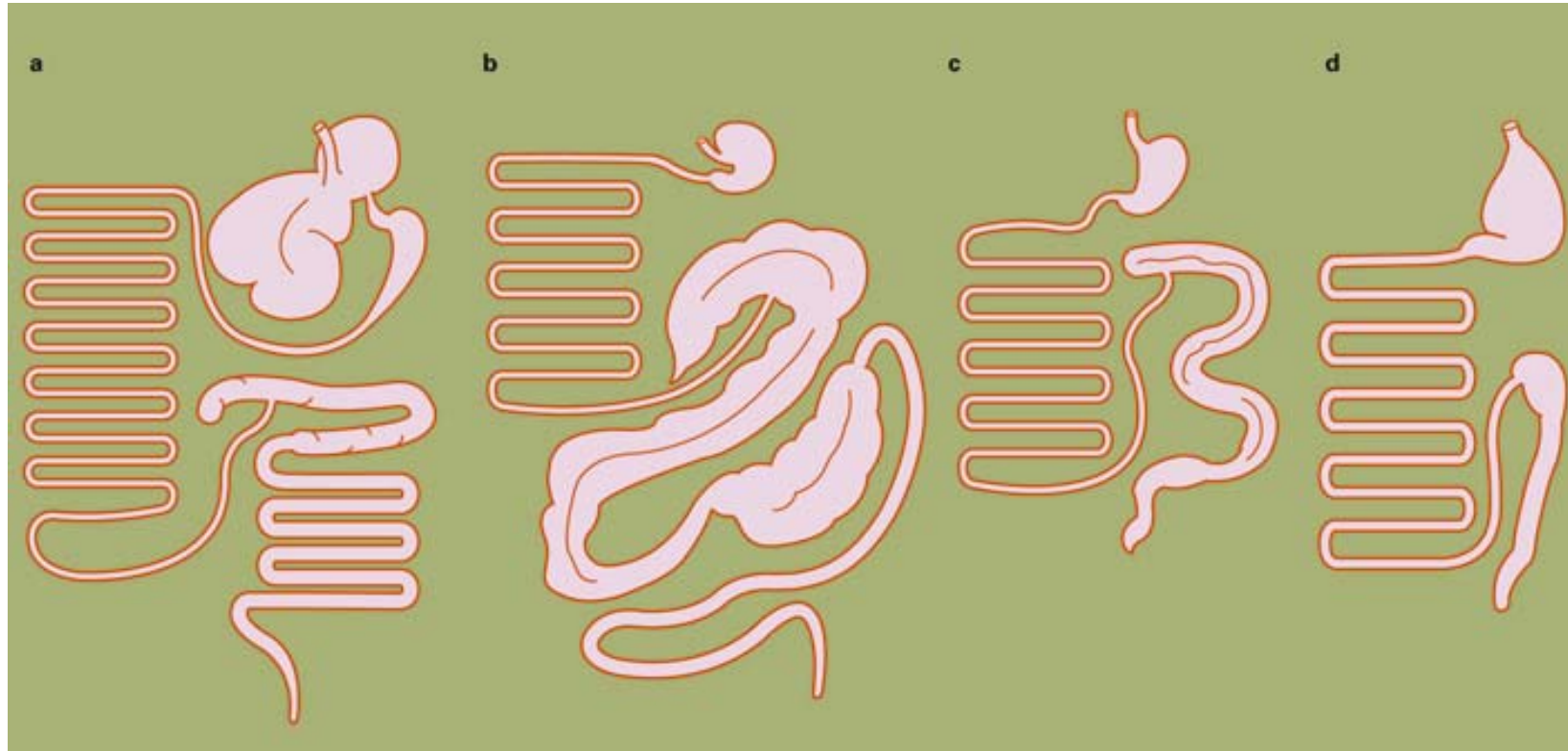


Human organisms is the home of billions and billions of bacteria, in total one hundred thousand billions (10^{14})

(Norways Oil Fortune (which is saved) is now NOK 4000 billions)



Mammalian digestive system



Valeur and Berstad 2008

Ruminating
herbivores
(sheep)

Non-ruminating
herbivores
(horse)

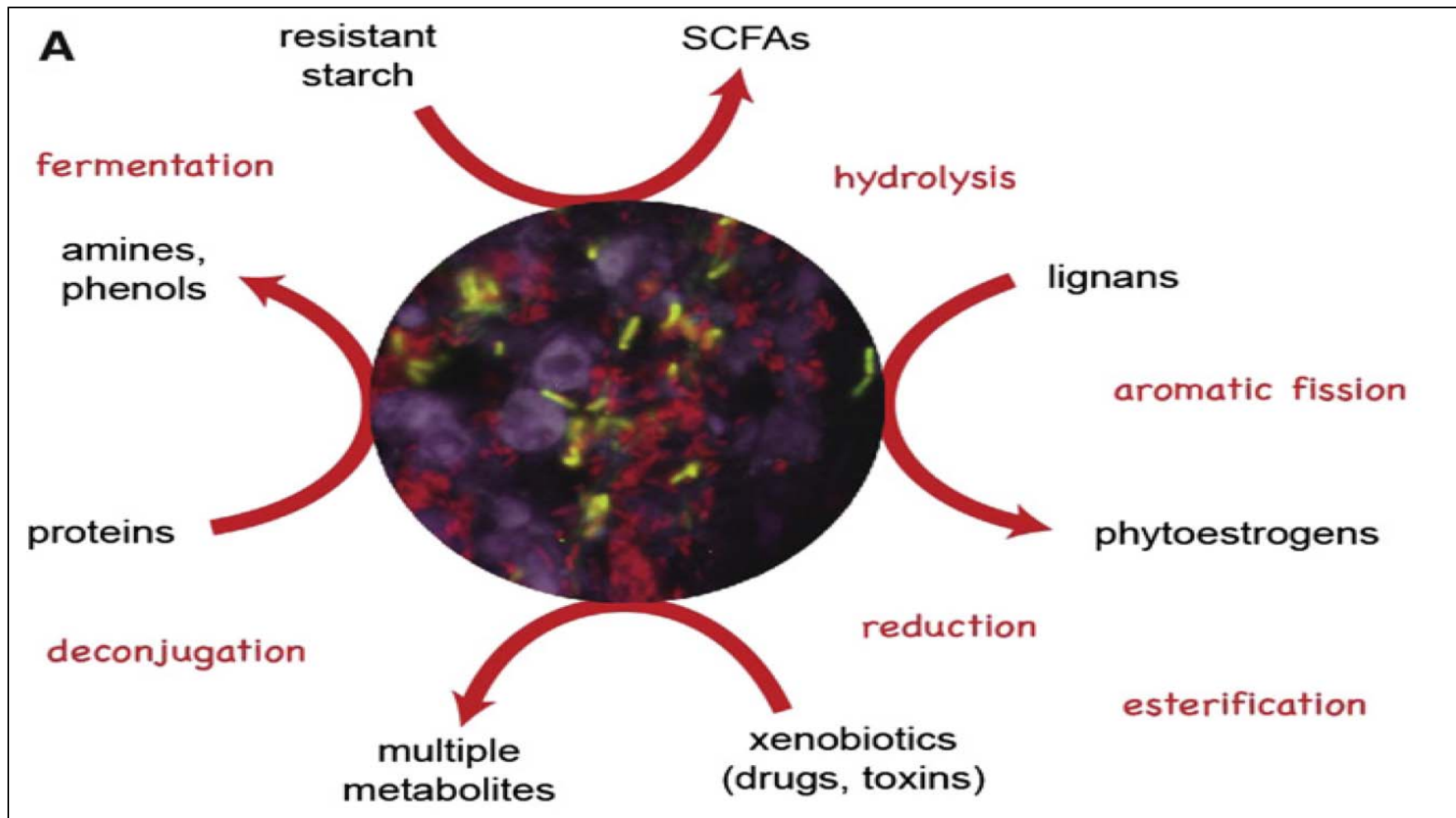
Omnivores
(humans)

Carnivores
(dog)

Why do we have a colon?

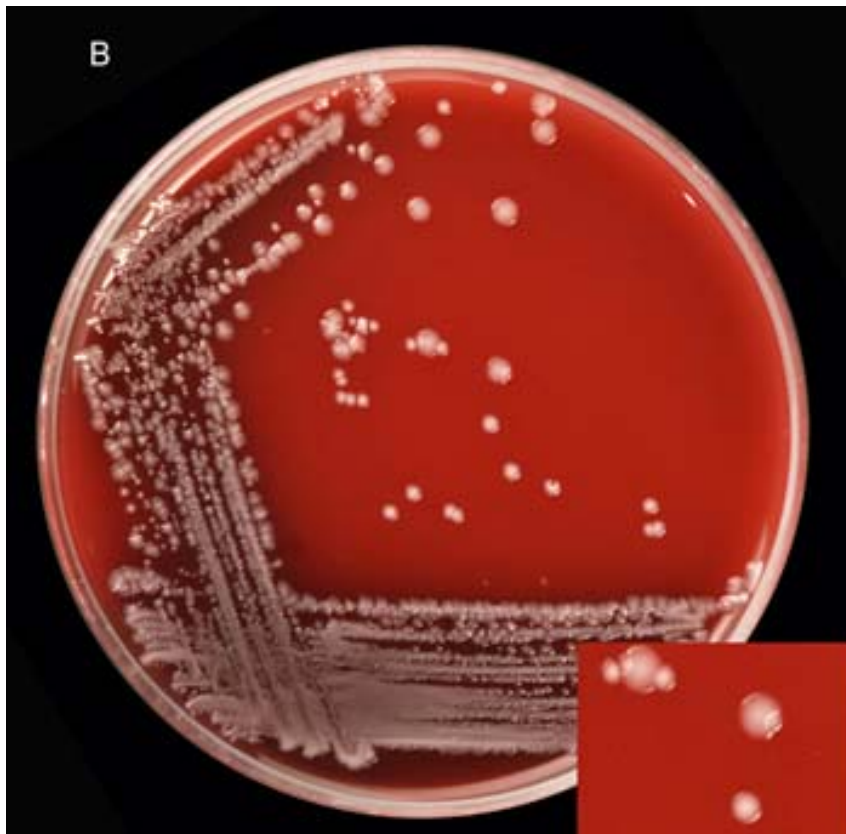
- Proteins, fat and mono- and disaccharides readily absorbed (ex lactase-deficiency)
- Complex carbohydrates passes to colon
 - Structural fibre are not fermented
 - Water soluble fibre fermented giving gases (H_2 , CO_2 , CH_4) and short-chain fatty acids (SCFA)
- Bacterial fermentation gives
 - 5-10 % of human calories, 30-40 % in non-ruminating herbivores and 60-90 % in ruminating

Most metabolites in human plasma is derived from gut bacteria!



Mikrobiology

Classic culture

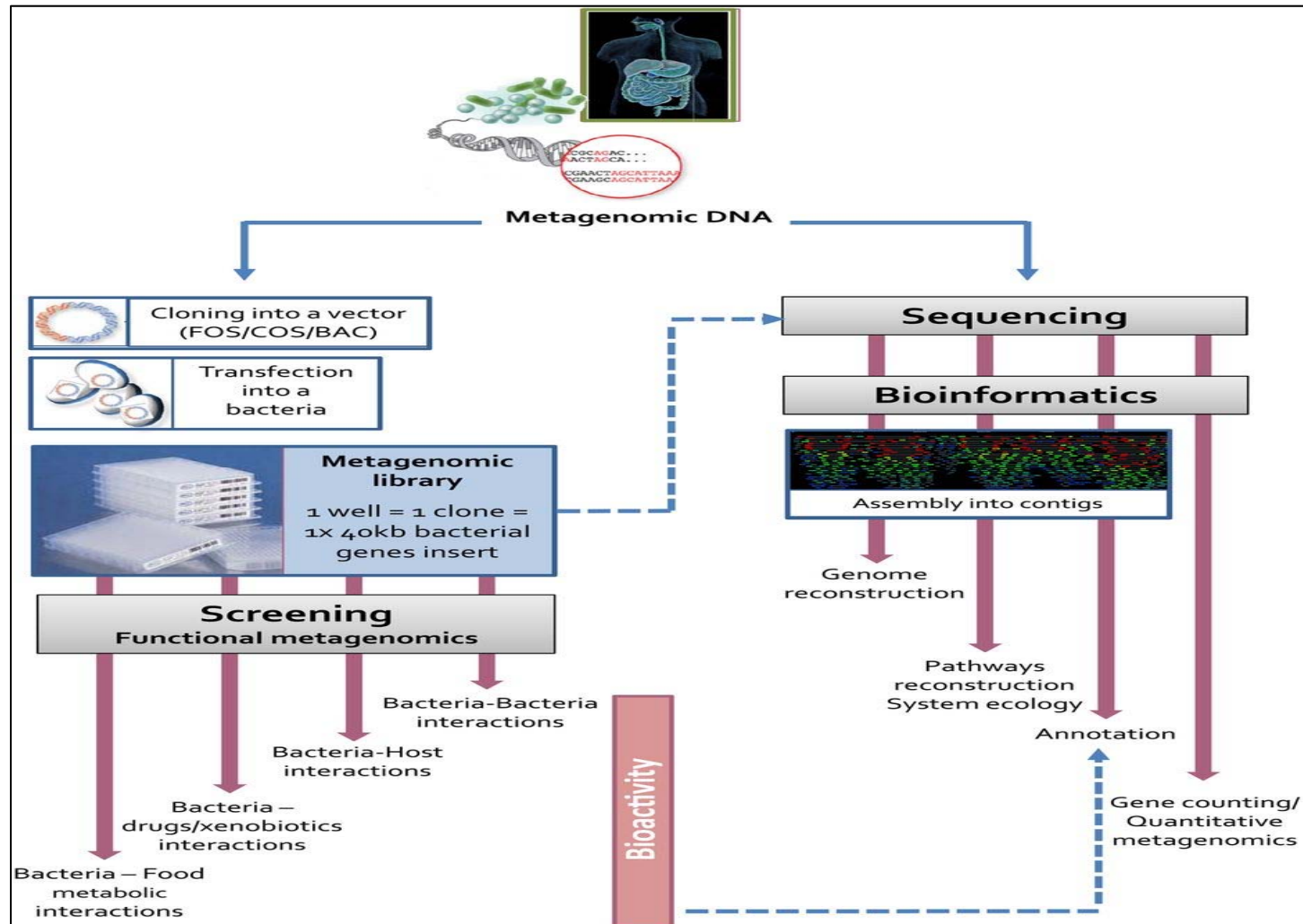


Microbiomics

- “Genomics” studies of mikrobiology, primarily by means of sequencing (of bakterial-DNA)
- Microbiota: Totality of microbes in a milieu (e.g. intestine)
- Microbiome: Totality of genes in the mikrobiota

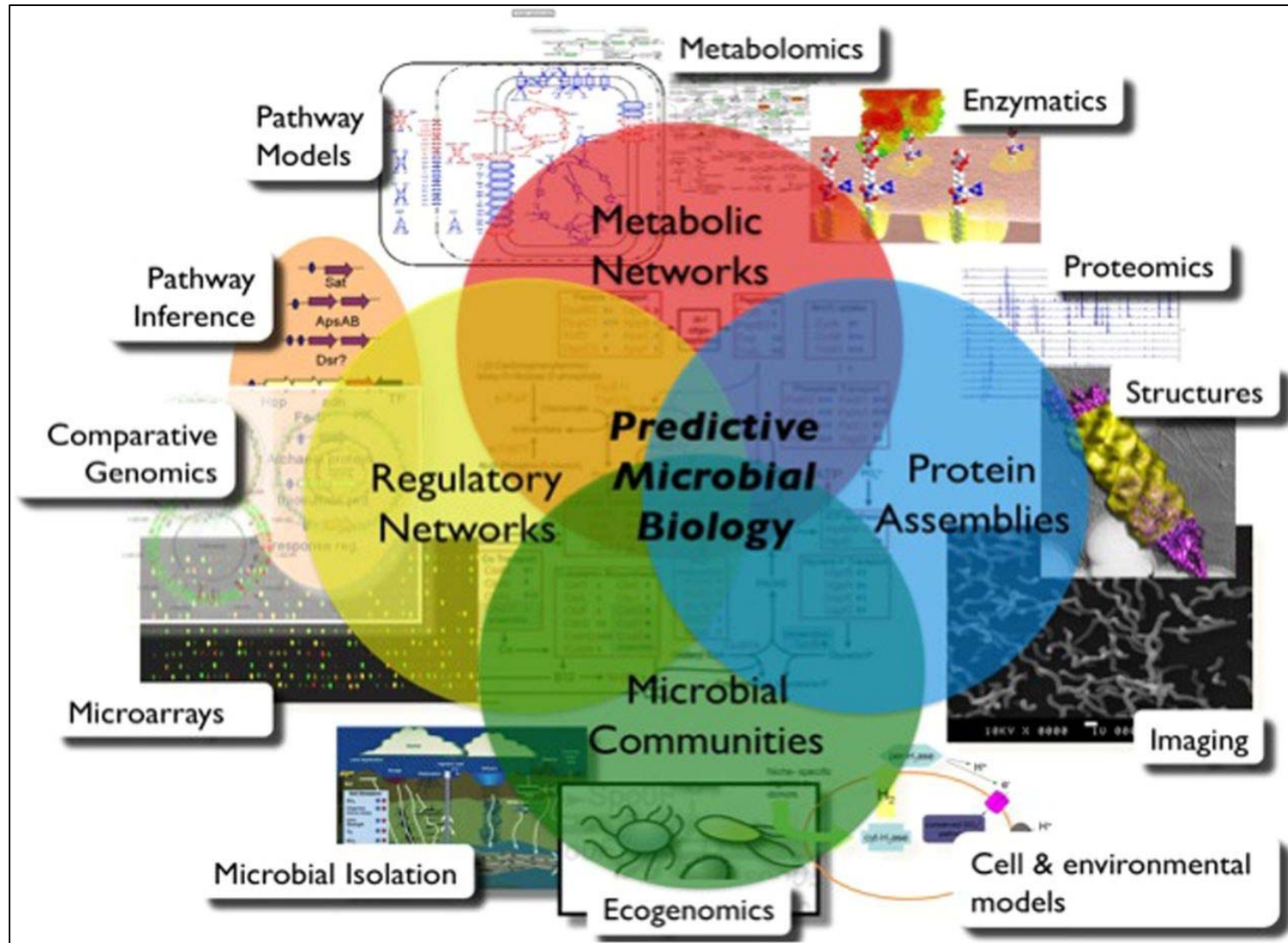
<30% of the bacteria in the intestines are cultivable

Main metagenomics applications, from the metagenomic libraries construction and screening, until next generation sequencing, gene count and genome reconstruction.



Lepage P et al. Gut 2013;62:146-158

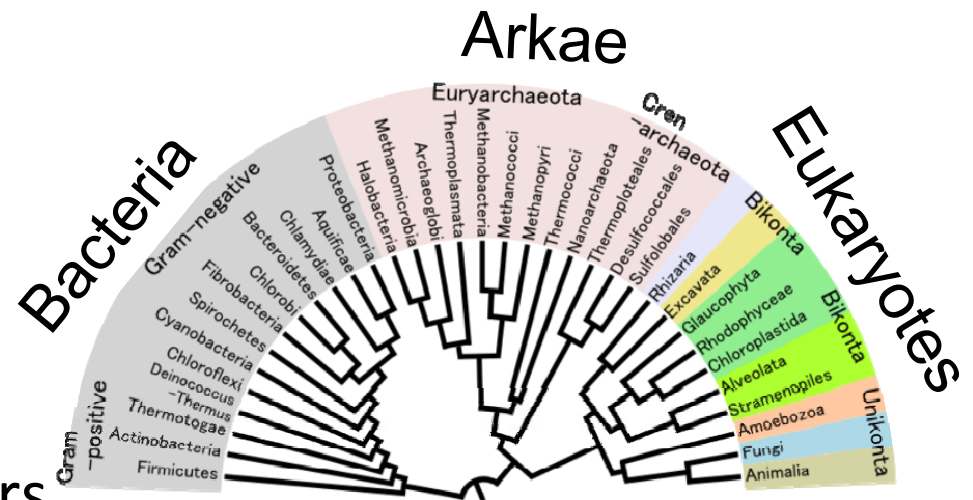
An integrative approach to study microbial



Lepage P et al. Gut 2013;62:146-158

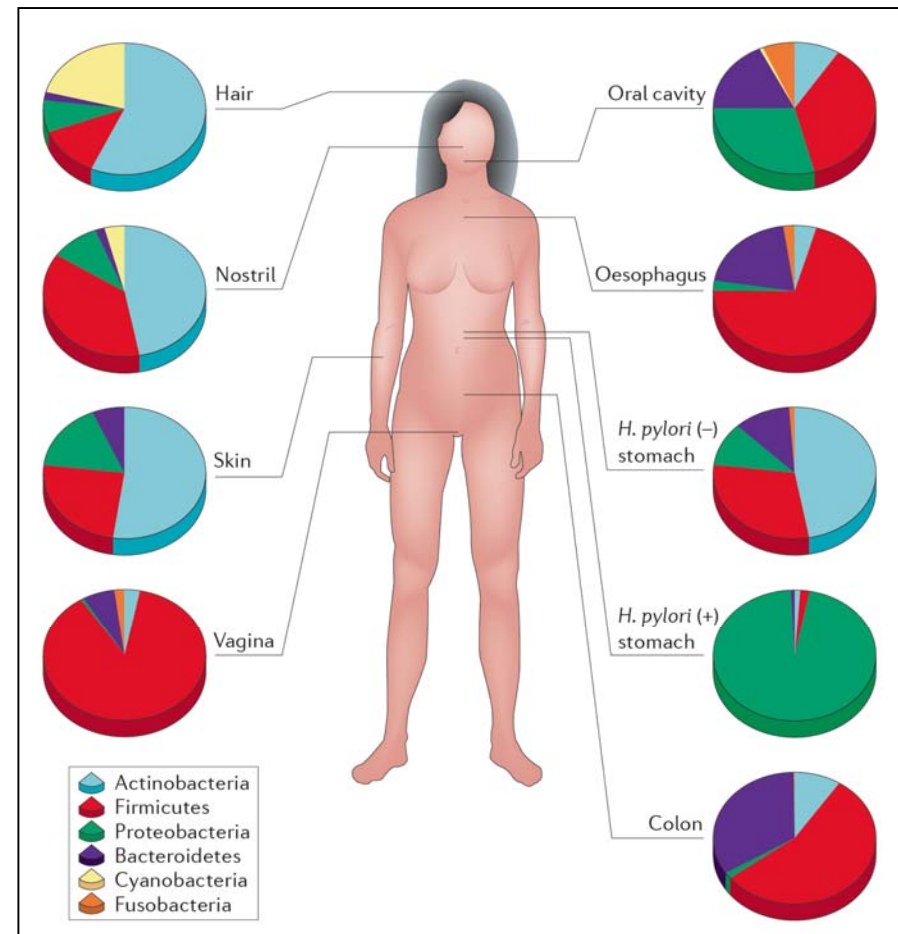
The diverse forms of life

- Life on earth impossible without bacteria
- Bacteria has been around for 2,5 billion years
- All multicellular organisms live in close collaboration with bacteria
- The modern humans developed for approximately 200 000 years ago
- Co-evolved with bacteria



Microbiota = “Normal flora”

- 10^{14} bacterier – 10x more than human cells
- J.Lederberg:
 - “...think of each host and its parasites as a superorganism...”
 - “Teach war no more”(Science 2000)



Cho and Blaser 2012

Human intestinal microbiome



Nature 2010, 464:59-65

A human gut microbial gene catalogue established by metagenomic sequencing

Qin, Li, Raes, et al (MetaHIT consortium)

- Metagenome
 - 2000 different species, each with 4000 genes
 - Equals ~ 8 millioner gener, that means more than 400 times no of genes in human genome
 - Microbiome large inter-individual differences
- Recently shown 3 stable enterotypes
 - Prevotella
 - Bacteroides
 - Ruminococcus
- Influenced by food
- Enterotypes assosiated with lean body and with obesity

Table 1. Dysbiosis Associated with Intestinal and Systemic Diseases

Dysbiosis-Associated Diseases or Conditions

Obesity

Metabolic syndrome

Nonalcoholic steatohepatitis

Inflammatory bowel diseases (Crohn's disease, ulcerative colitis, pouchitis)

Irritable bowel syndrome, functional bowel disorders

Atherosclerosis

Type 1 diabetes

Autism

Allergy

Asthma

Celiac disease

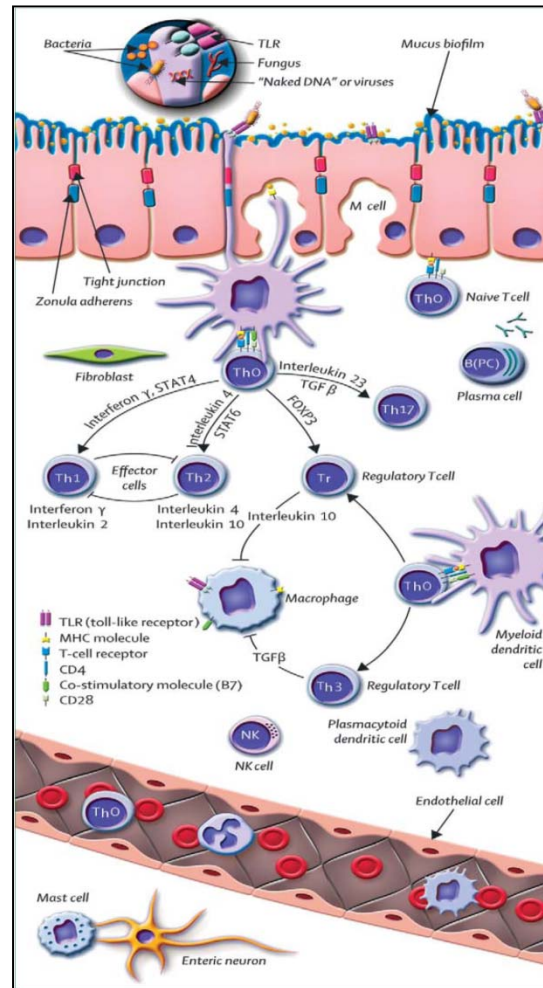
See reviews by Bäckhed et al. (2005), Honda and Littman (2012), Ringel and Carroll (2009), and Sartor (2008, 2010).

Patogenesis of inflammatory bowel disease

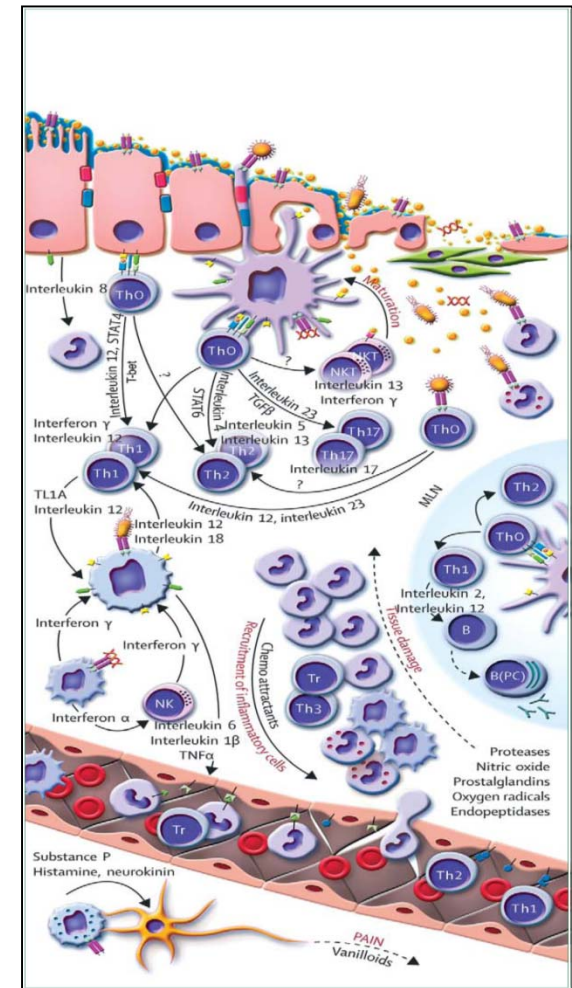
Major differences
healthy - diseases
gut

- Adaptive immune system
- Innate immune system

Many possibilities
for biomarkers
(and intervention)



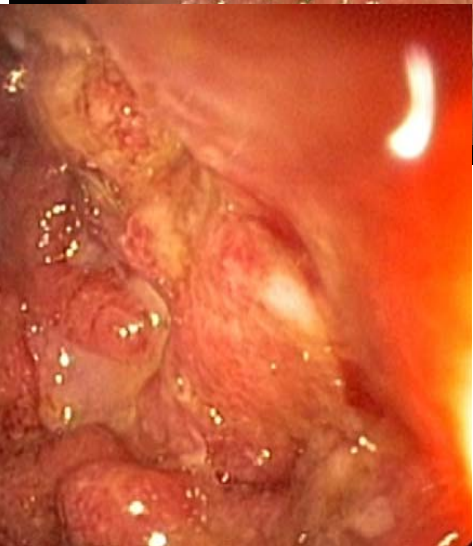
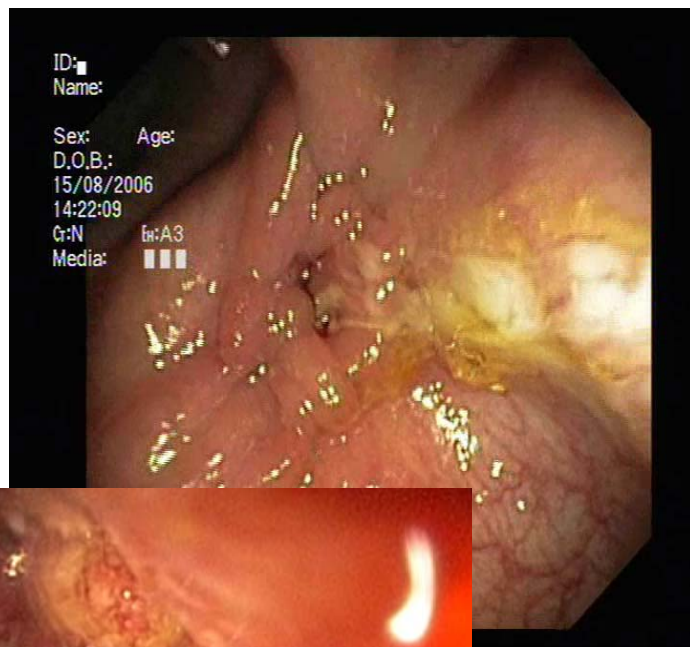
Healthy



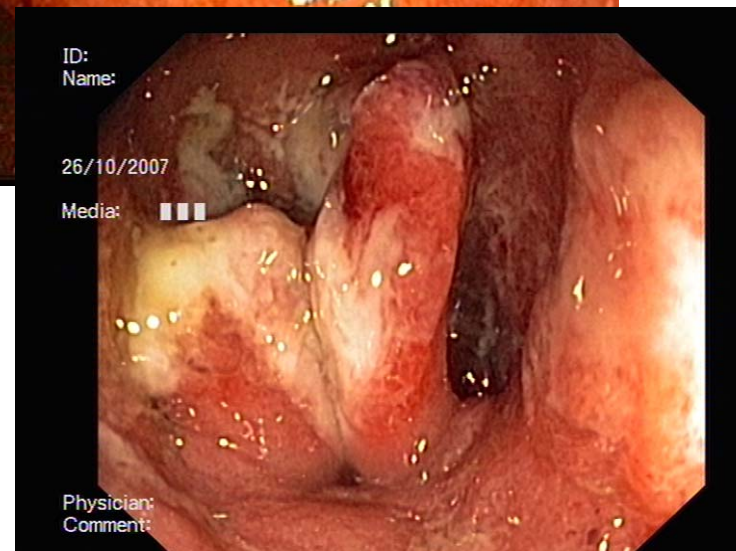
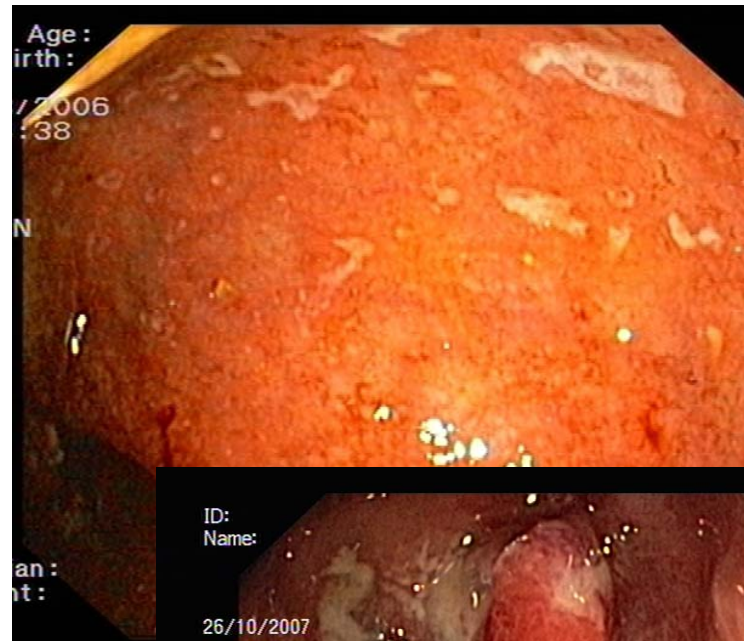
Disease

Baumgart and Carding Lancet 2007

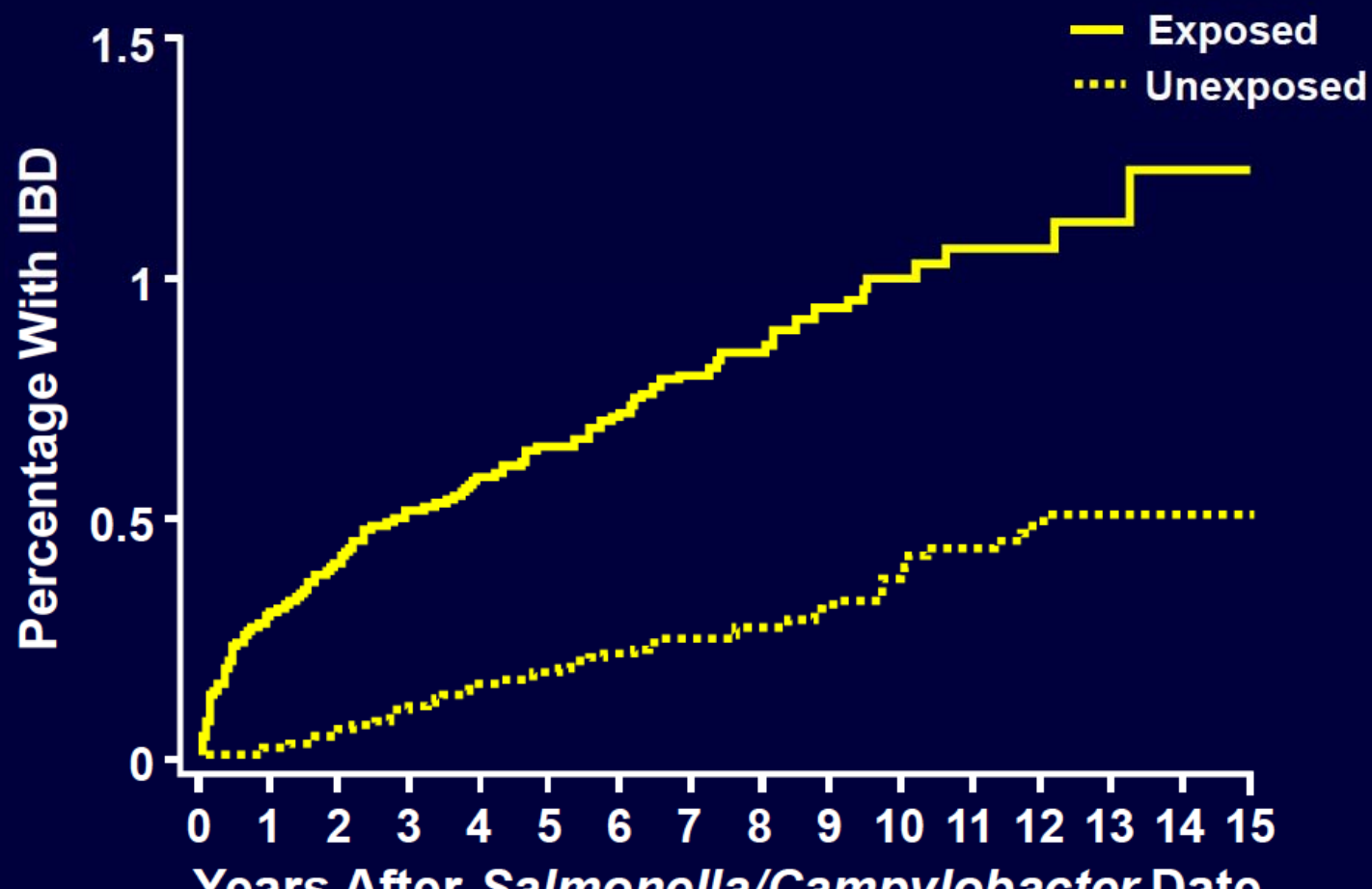
Crohn



Ulcerative colitis



Increase in IBD Incidence for Patients Exposed to *Salmonella/Campylobacter*



Induction of Inflammation Changes the Microbiota: The Chicken-and-Egg Problem



DSS



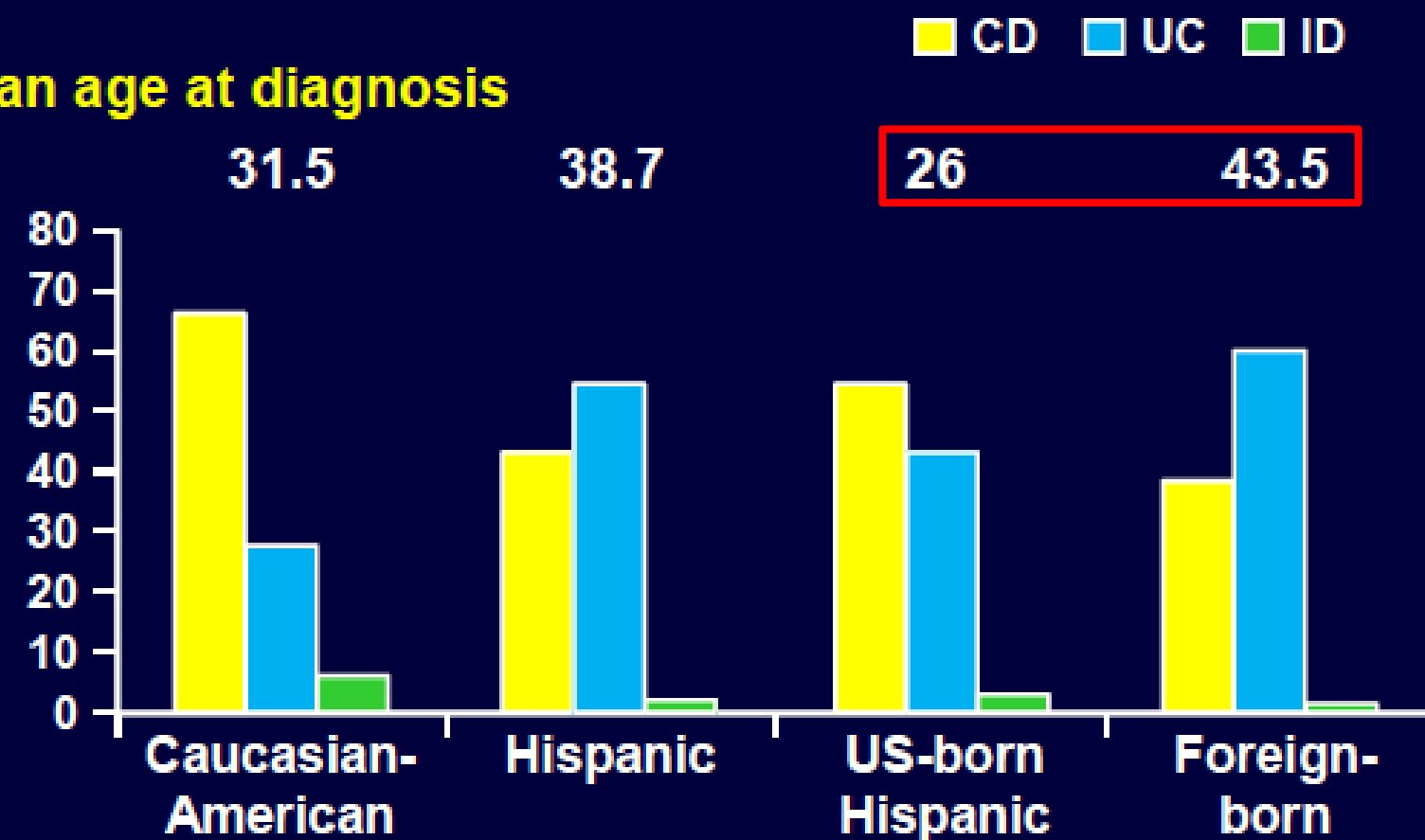
Colitis!!

DSS disrupts epithelial barrier

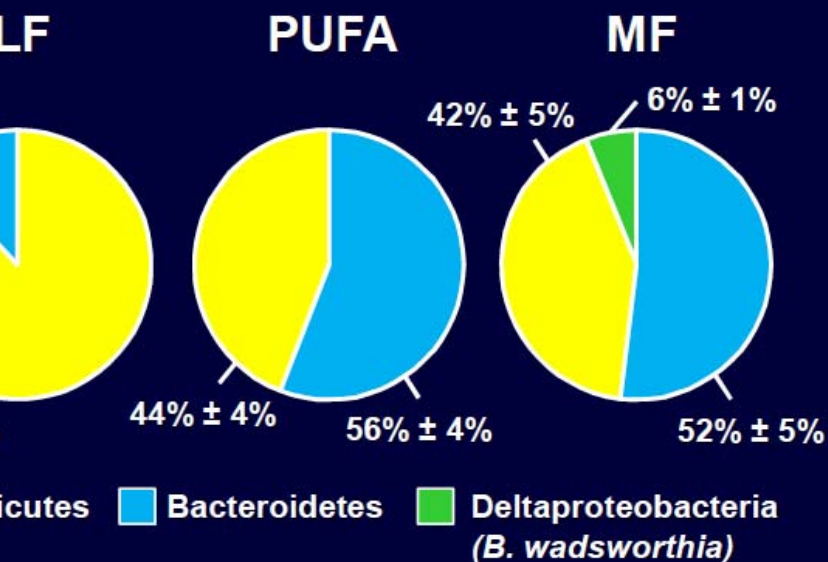
DSS-induced colitis causes a shift in the intestinal microflora towards pro-inflammatory Gram-negative bacteria

During acute colitis *E. coli* increased in wt and TLR-deficient mice ($P < 0.05$)

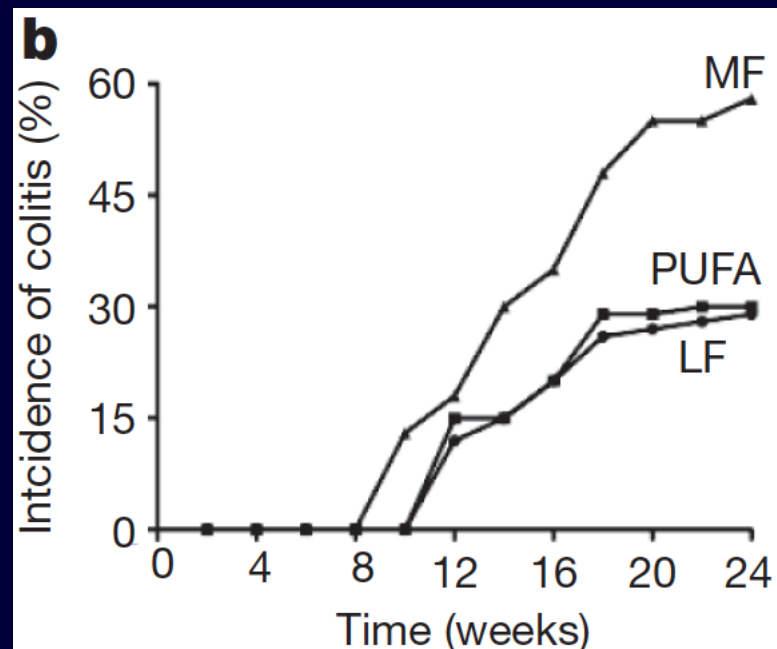
Environmental Factors Determine Disease Expression



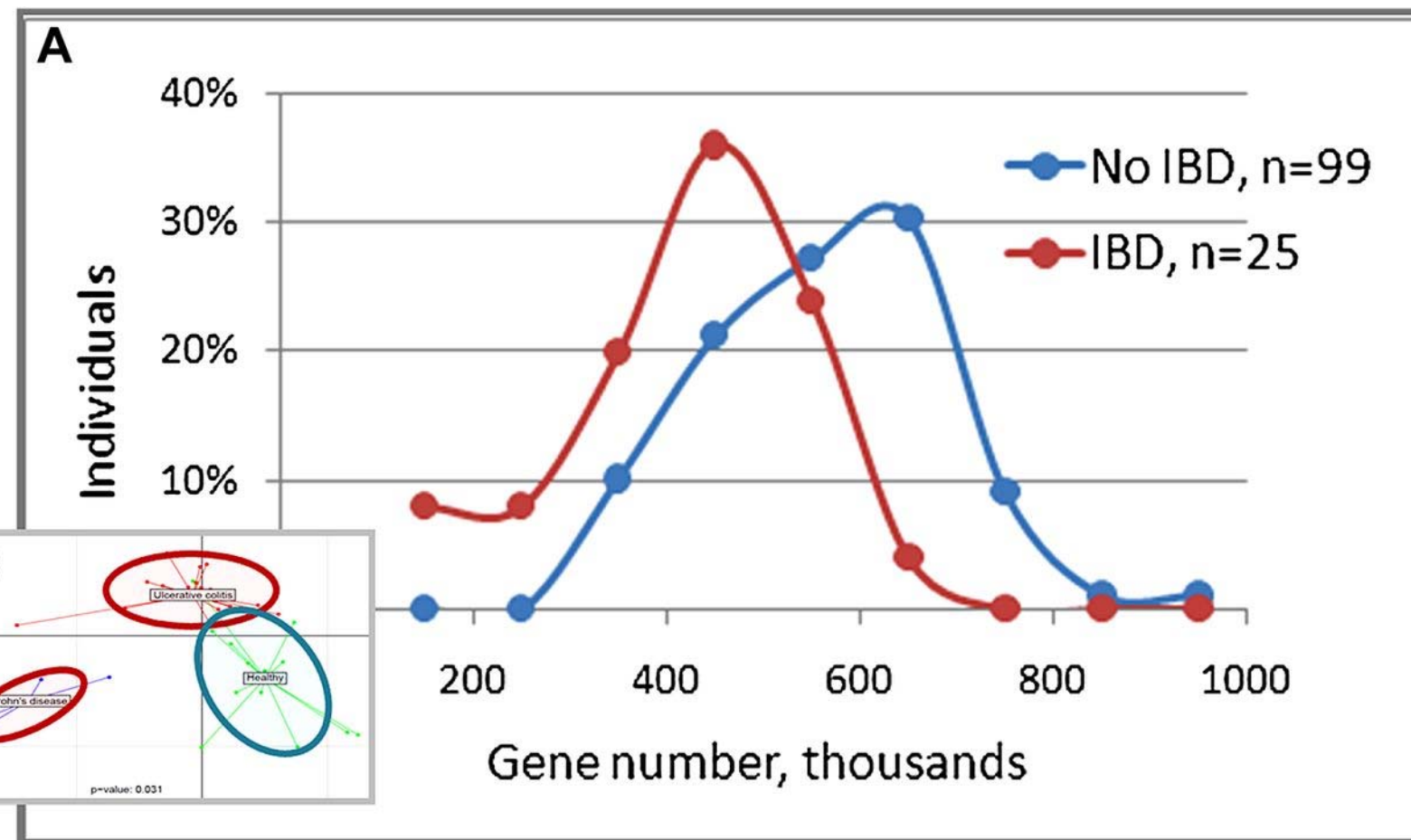
The type of fat intake may increase inflammation in the IBD-susceptible host



Saturated high fat diet increased
alphite-reducing sulphite-reducing
pathobiont, *Bilophila wadsworthia*



Metagenomic analysis of the human gut microbiota in healthy individuals and IBD



Our new health threat

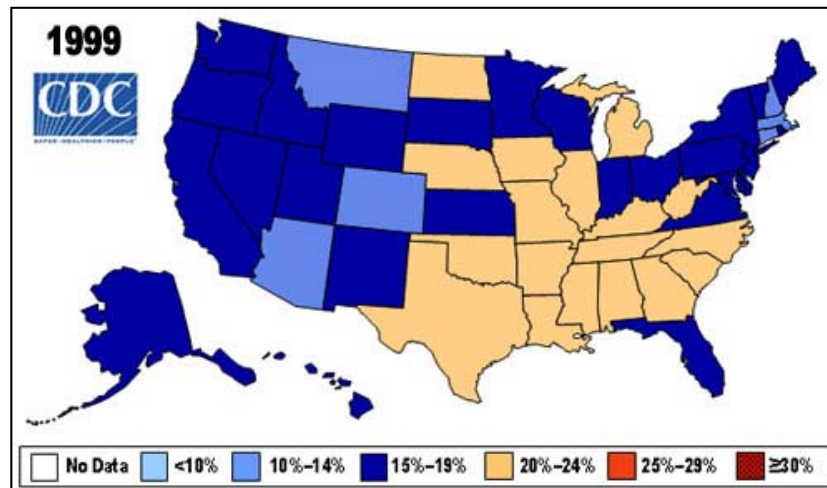


2010

CDC
SAFER • HEALTHIER • PEOPLE

Legend:

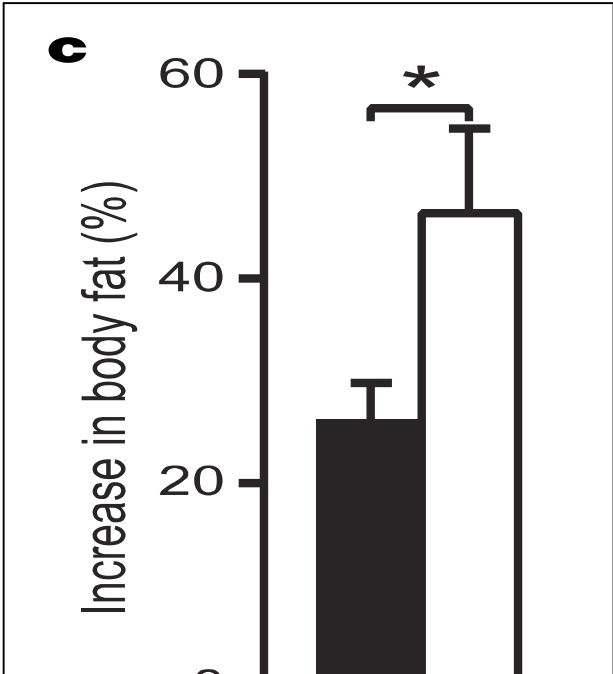
- No Data
- <10%
- 10%–14%
- 15%–19%
- 20%–24%
- 25%–29%
- ≥30%



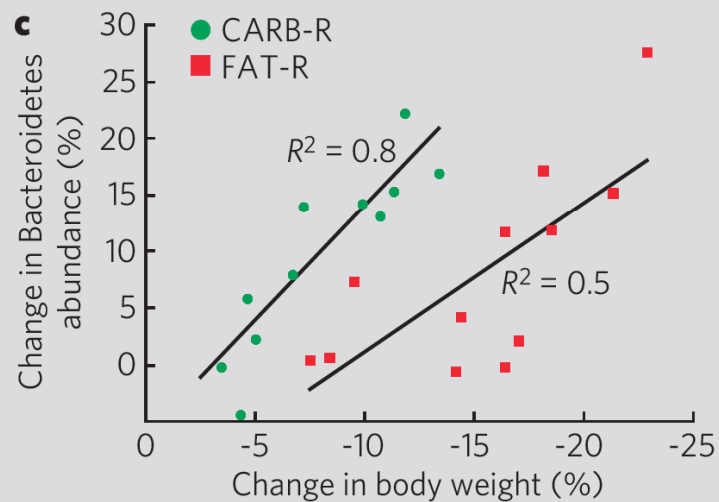
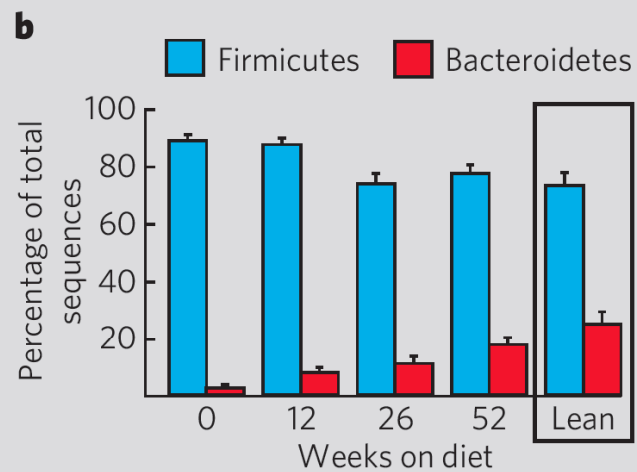
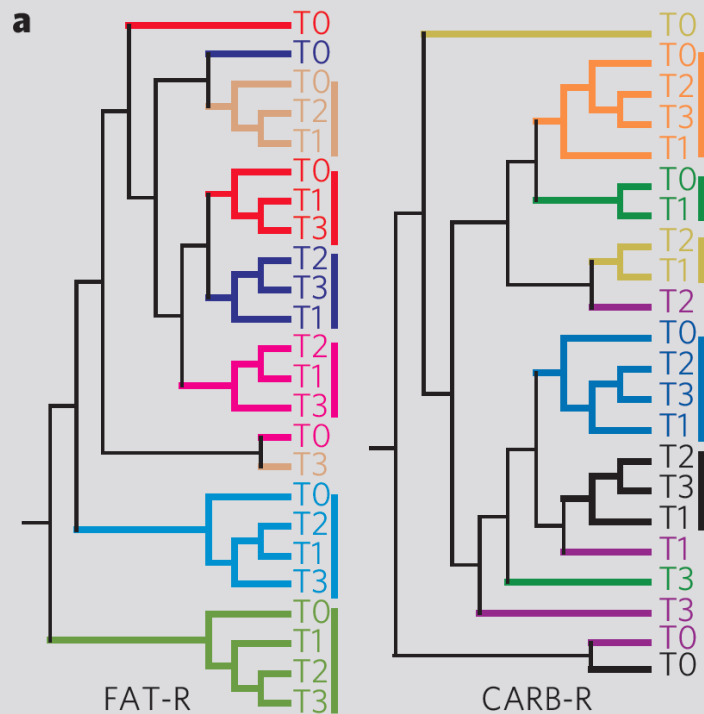
eat nothing but still gain weight”

An obesity-associated gut microbiome with increased capacity for energy harvest

Peter J. Turnbaugh¹, Ruth E. Ley¹, Michael A. Mahowald¹, Vincent Magrini², Elaine R. Mardis^{1,2} & Jeffrey I. Gordon¹



Manipulation with diet



Vancomycin treatment and obesity

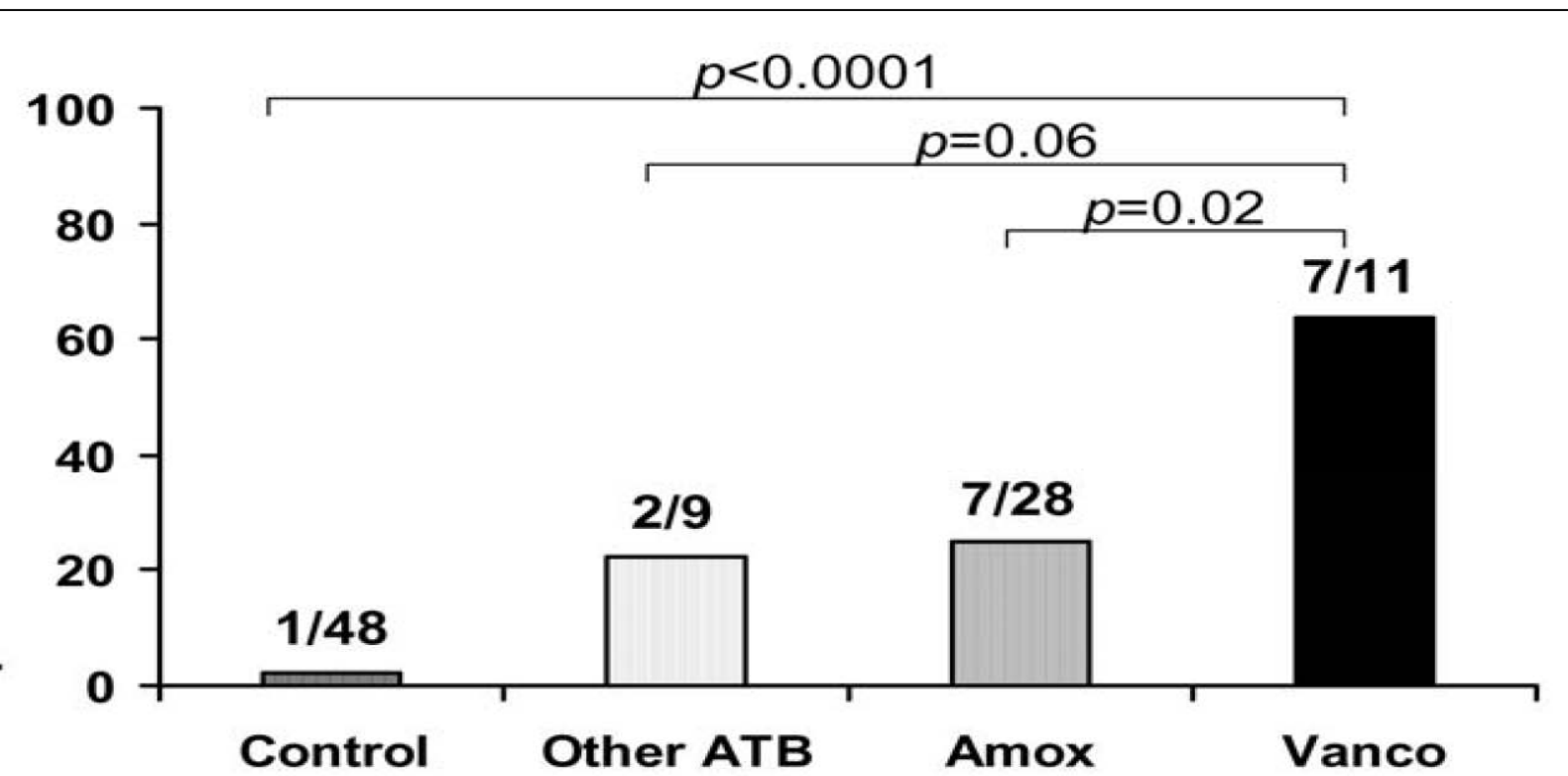
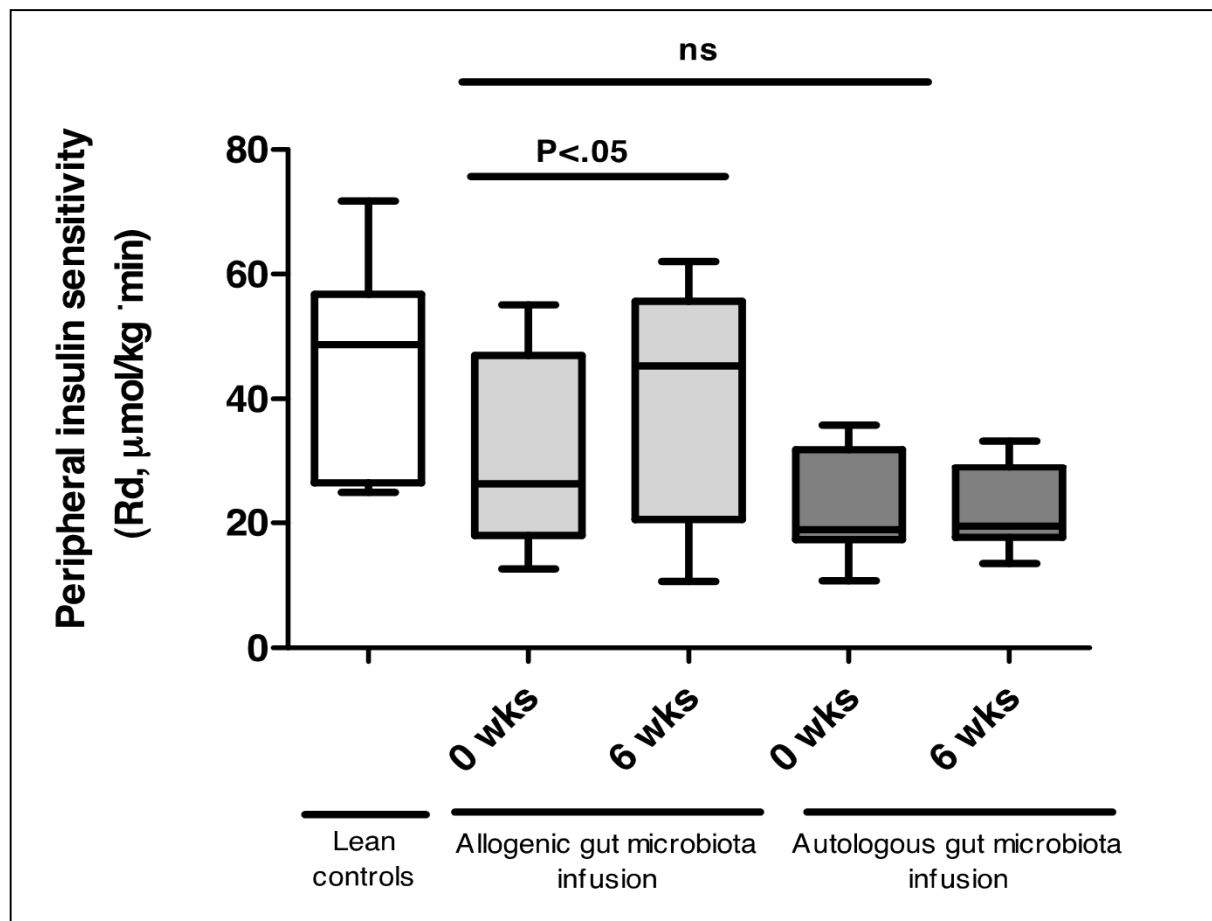


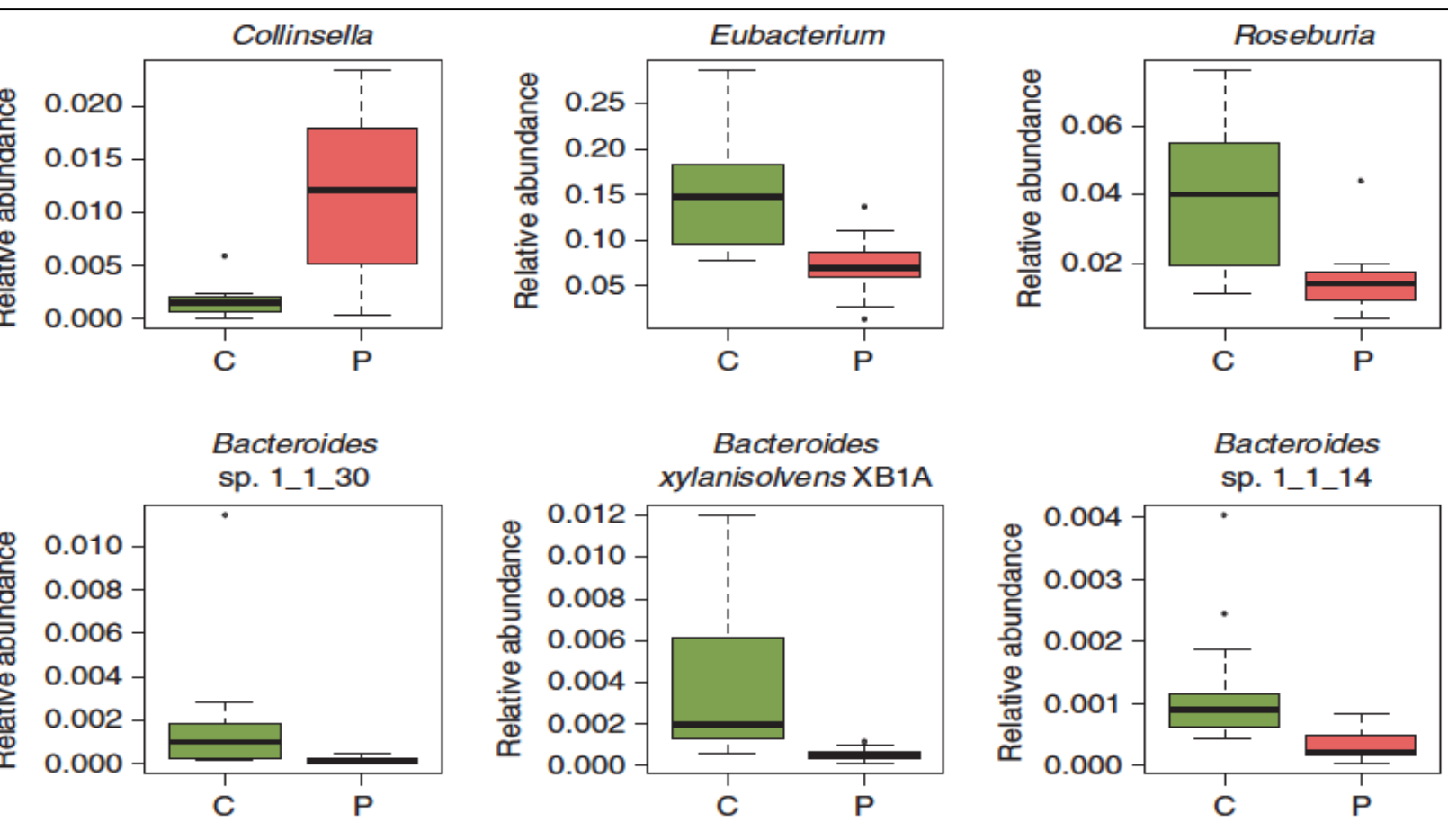
Figure 2. Percentage of patients with a major increase ($\geq 10\%$) body mass index (BMI), defined as an increase.

FATLOSE trial:

Faecal transplantation from lean subjects to cure metabolic syndrome



Gut microbiome and atherosclerosis



Karlsson et al Nature Comm 2012, shotgun sequencing of gut microbes

Metagenomics and Personalized Medicine

Herbert W. Virgin^{1,*} and John A. Todd^{2,*}

¹Department of Pathology and Immunology, Department of Molecular Microbiology, and Midwest Regional Center of Excellence for Biodefense and Emerging Infectious Diseases Research, Washington University School of Medicine, St. Louis, MO, 63110, USA

²Juvenile Diabetes Research Foundation/Wellcome Trust Diabetes and Inflammation Laboratory, Department of Medical Genetics, Cambridge Institute for Medical Research, University of Cambridge, Addenbrooke's Hospital, Hills Road, Cambridge CB2 0XY, UK

*Correspondence: virgin@wustl.edu (H.W.V.), john.todd@cimr.cam.ac.uk (J.A.T.)

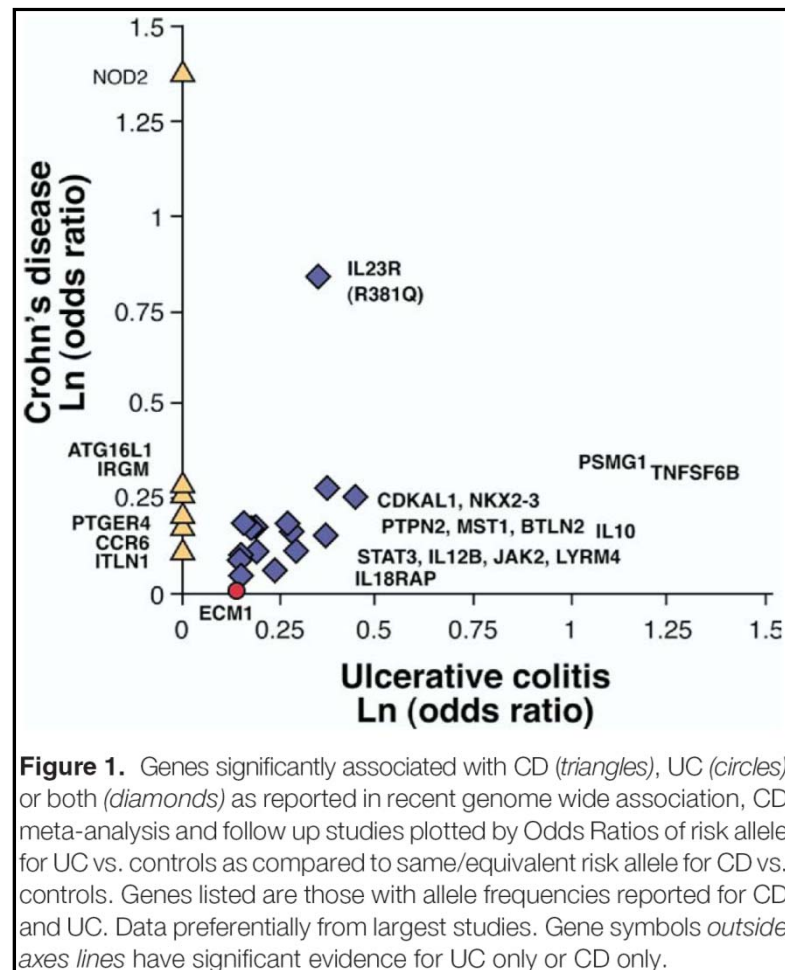
DOI 10.1016/j.cell.2011.09.009

Genetic studies

Actual explosion in understanding of genetics of IBD

IBD and Crohn

- 2001 two loci (NOD2 and 5q31)
- 2006 one locus (IL23R)
- 2007 seven loci (IRGM, ATG16L1 etc)
- 2008 thirty-two loci



GWAS
studies
complicate
previous
thoughts on
diseases as
"single
diseases"

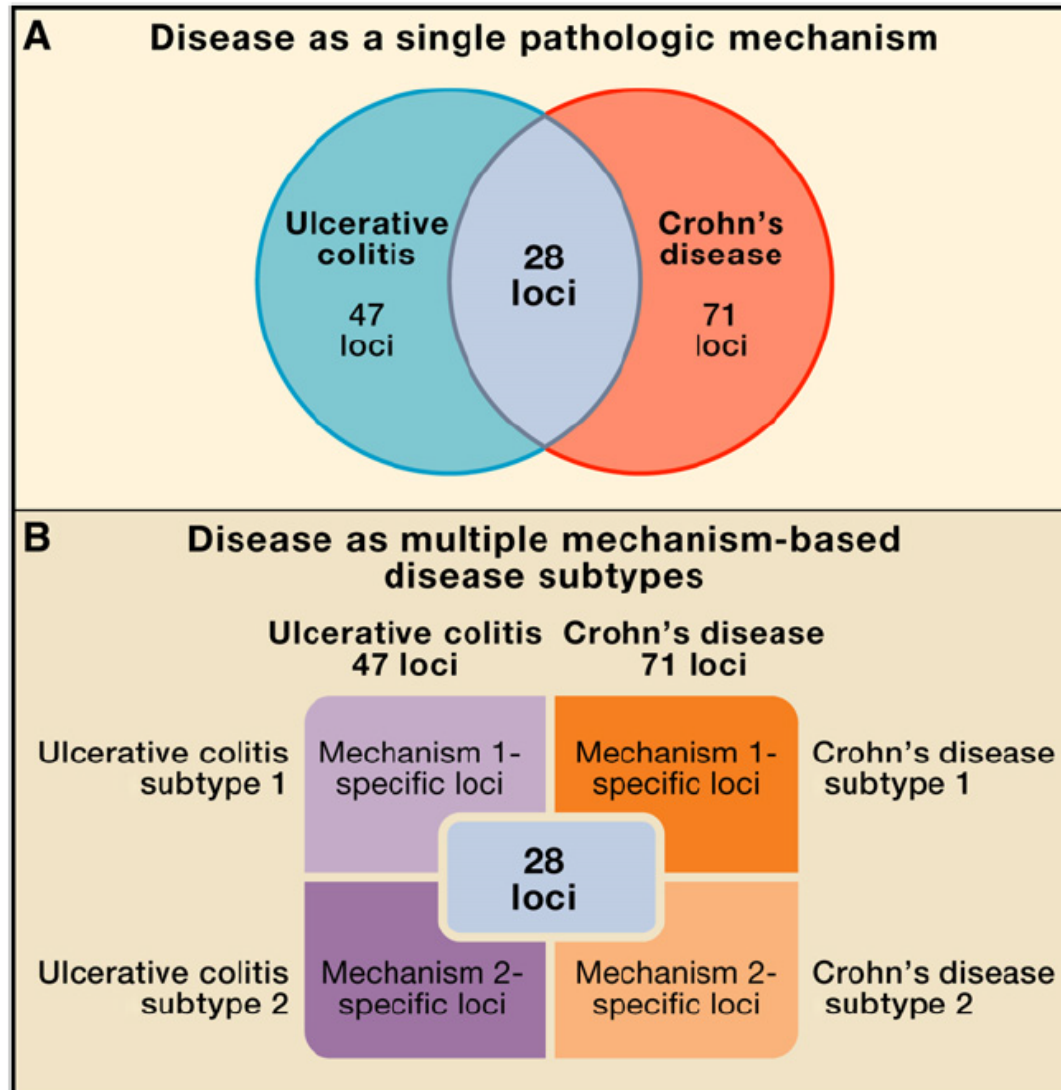
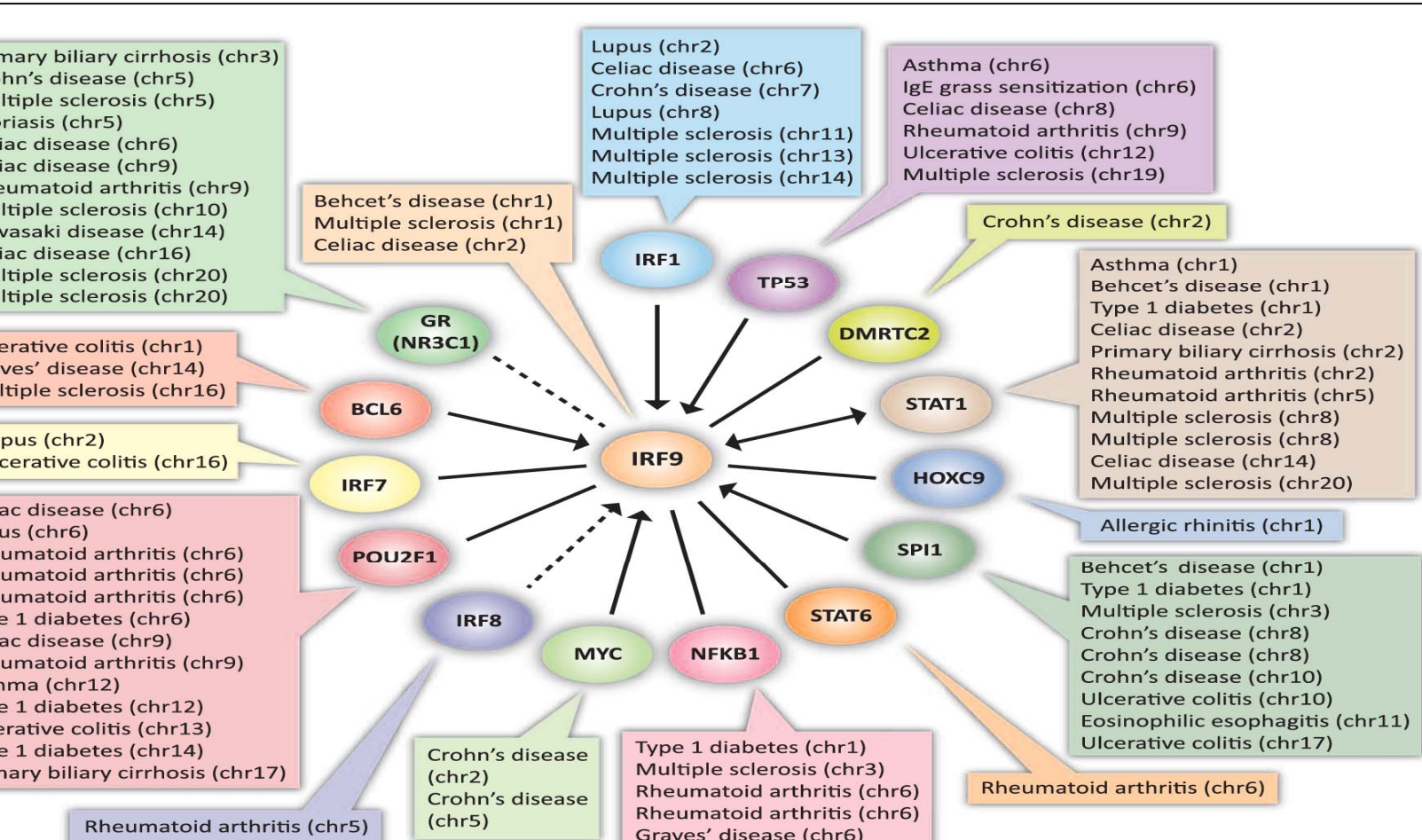
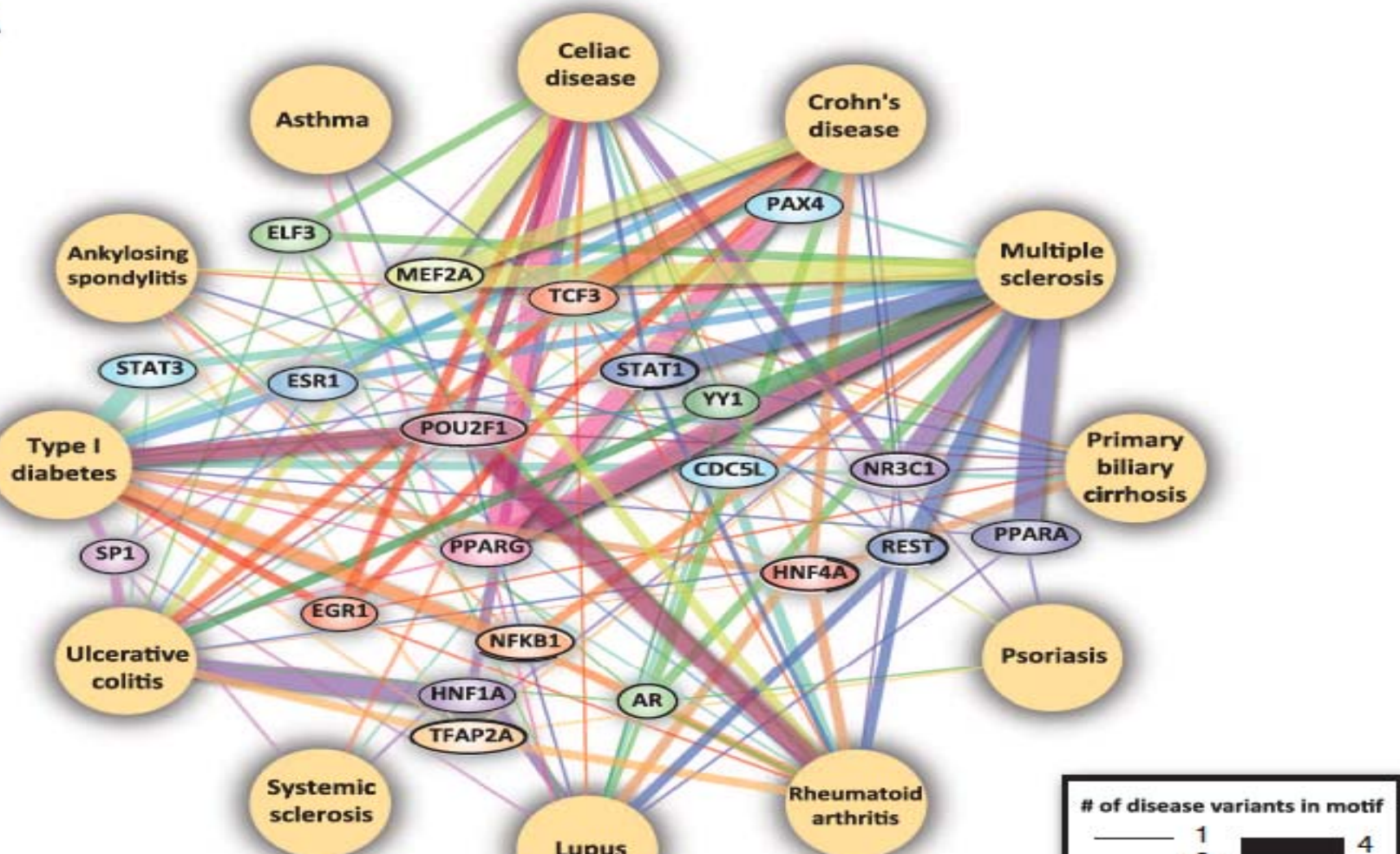


Figure 2. Refining the Relationship between Genotype and Phenotype in Complex Inflammatory Diseases

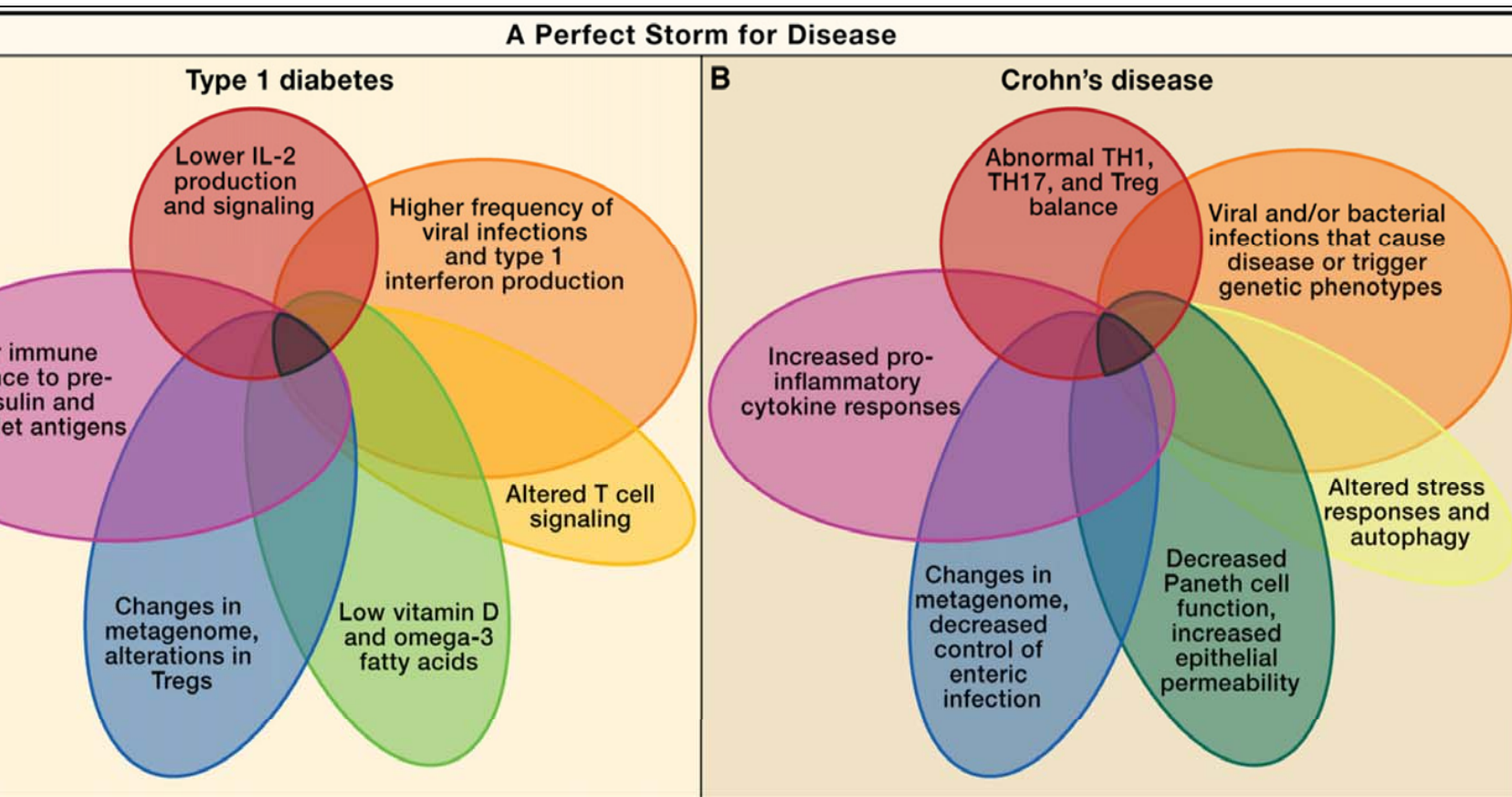
Common disease-associated variants cluster in pathways



Common disease networks



A perfect storm for disease



Perfect Storms for Developing Crohn's Disease and Type 1 Diabetes

overlapping events and phenotypes driven by metagenetic and environmental processes that, in sum, contribute to the development and pathogenesis of type 1 diabetes (A) and Crohn's disease (B).

Each step influenced by metagenomic interactions

Parental genotype, environment, fetal-maternal interactions, epigenetic effects

Infant

Establish normal viral,
parasitic, and bacterial
microbiome and metagenome

Failure to establish normal viral,
parasitic, and bacterial
microbiome and metagenome

Normal immune system
Immune tolerance
Regulated inflammation
Treg network

Inflammation &
autoimmunity-prone
immunity system

Bacteria

Virus

Other

Environmental
cofactors

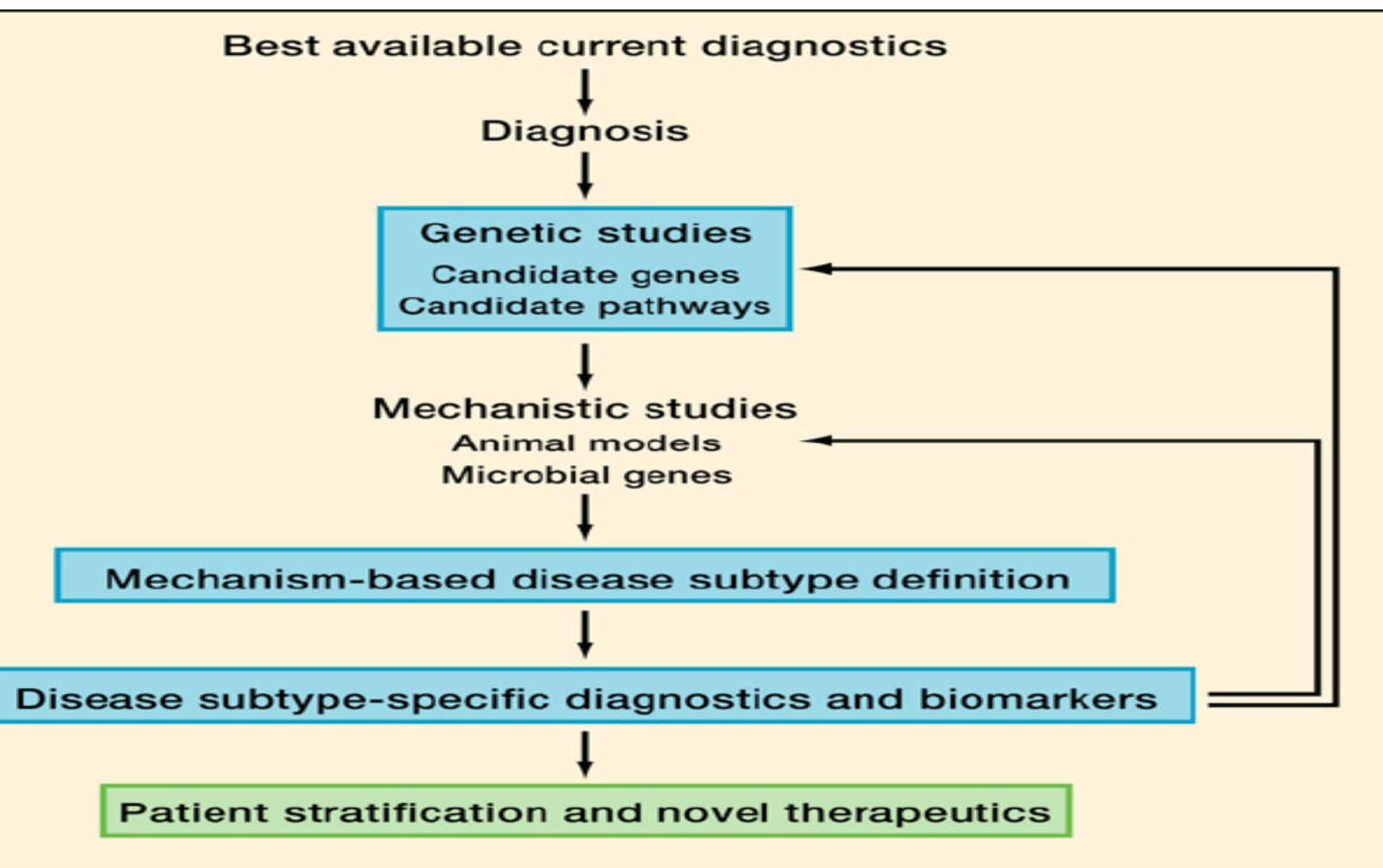
Infections, autoantigens

Microbial products
autoantigens

Type 1
diabetes

Crohn's
disease

Prospect for future personalized medicine



Can something be done?

Prebiotics

- Food and components promoting “good” intestinal microbiome

Probiotics

- Probiotics are living micro-organisms that, if intake is sufficient, will give a health effect *FAO/WHO*

Postbiotics

- Components produced by intestinal bacteria with possible health effects

A major breakthrough is
eagerly awaited!



Recommended reading

Baeckhed et al., Cell Host and Microbe 2012;
12: 611-622.

Cho & Blaser, Nature Rev Genetics
2012;13:260-270.

Flint et al. Nature Rev Gastro & Hepatol 2012;
9: 577-589.

Lepage et al., Gut 2013;62:156-158.

Virgin & Todd, Cell 2012; 147:44-56.