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Darmmicrobiota en metabole gezondheid
Ellen Blaak



AOAC Lowlands Symposium Darmgezondheid, gezondheid zit in de darmen Breda, 21th Sept 2017

Professor in Physiology of fat metabolism, Department of Human Biology
NUTRIM School of Nutrition and Translational Research in Metabolism
Maastricht University Medical Centre+
The Netherlands



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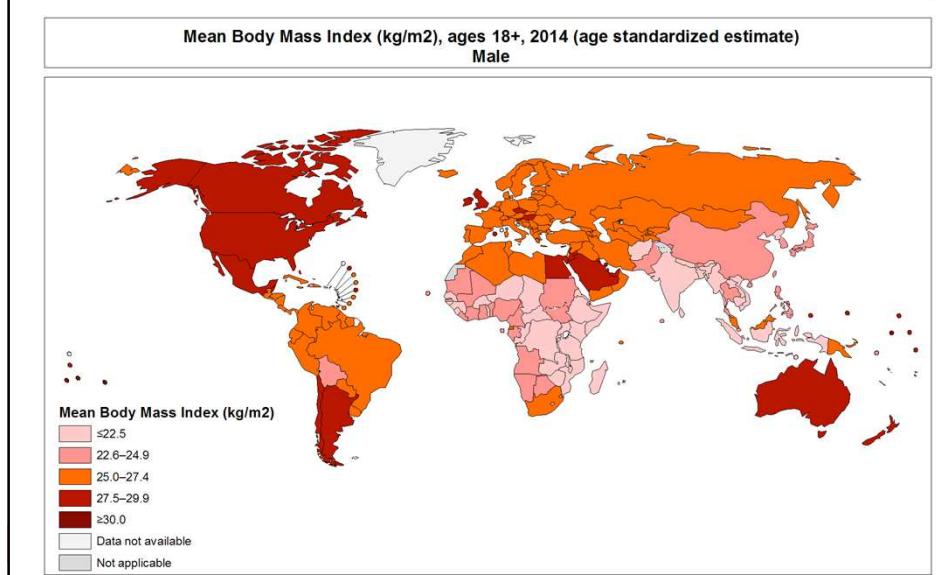
Overview van de presentatie

- Inleiding obesitas en microbiota
- Modulatie van microbiota en metabole gezondheid
 - Feces transplantatie
 - Antibiotica
- De rol van korte keten vetzuren (SCFA) in metabole gezondheid
- Modulatie van microbiota met voeding
- Conclusies

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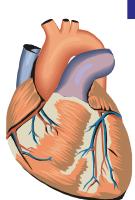
Obesitas – pandemie van 21^{ste} eeuw



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Obesitas: een belangrijke risicofactor voor chronische ziekten

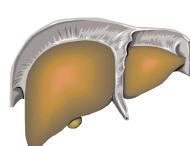
OBESITY



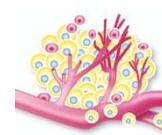
Cardiovascular disease



Type 2 diabetes



Liver steatosis



Cancer

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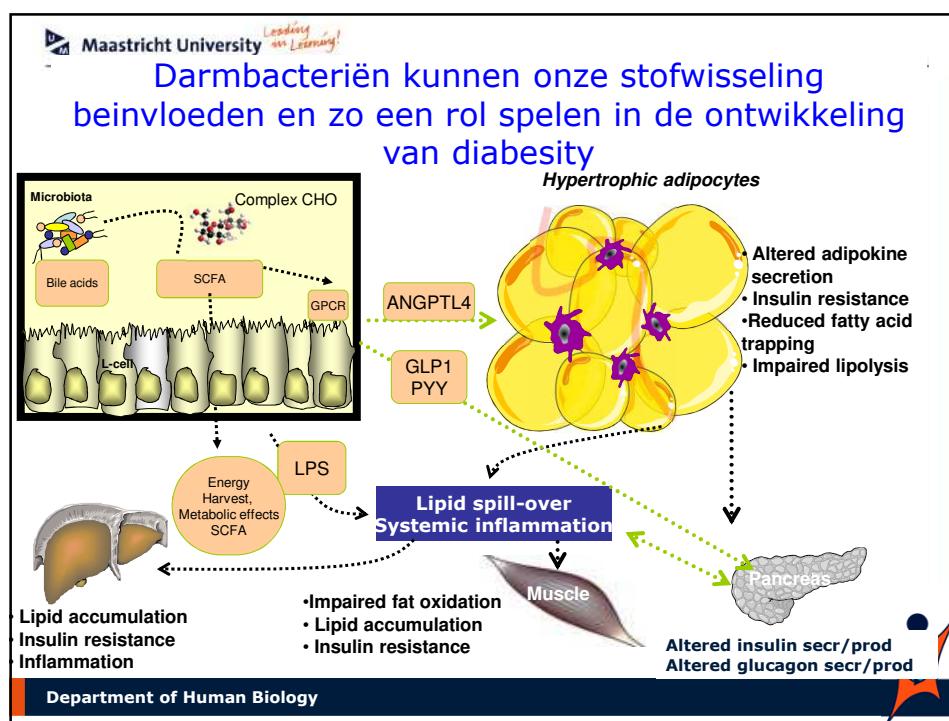
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Obesitas en diabetes en microbiota

- Wereldwijd bereikt obesitas een epidemische prevalentie
- De obesitas pandemie wordt niet verklaard door de meest voorkomende gen-omgevingsinteracties
- Darm microbiota geven producten die ons metabolisme kunnen beïnvloeden en kunnen zo een rol spelen bij obesitas en diabetes
- Obesitas en Type 2 diabetes mellitus gaan gepaard met minder microbiele diversiteit en een andere microbiotasamenstelling
- Interventies die de darm microbiota manipuleren kunnen een gunstig effect hebben op diabetes risico (resultaten niet consistent)

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Microbiota is individual specific

► Is there a normal microbiota?

Qin *et al.* Science, 2010

• 57 species common >90% individuals
 • ~ 250.000 genes (at least 50% of the individuals)

► Compositional vs. functional differences

Relative abundance (%)

Legend: Firmicutes (blue), Bacteroidetes (orange), Proteobacteria (green), Actinobacteria (red), Other (purple)

Turnbaugh *et al.* Nature, 2009

Adapted from:
Miguel Gueimonde

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Microbiota is individual specific

► Challenge: definition of a normal/healthy microbiota

- Inter-individual variation

Daessner *et al.* PNAS, 2010.

- Geographical differences

Mueller *et al.* AEM, 2006.

Adapted from:
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Human gut microbes associated with obesity

Ruth E. Ley, Peter J. Turnbaugh, Samuel Klein Jeffrey I. Gordon

Beïnvloed door voeding, populatie, etniciteit, leeftijd, geslacht, glucometabole status

that this proportion increases with weight loss on two types of low-calorie diet. Our findings indicate that obesity has a microbial component, which might have potential therapeutic implications.

Trillions of microbes live in the human gut, helping to break down otherwise indigestible foods¹. Transplanting the gut microbiota from normal mice into germ-free recipients increases their body fat without any increase in food consumption², raising the possibility that the composition of the microbial community in the gut affects the amount of energy extracted from the diet³.

The relative abundance of the two predominant bacterial divisions (deep evolutionary lineages or superkingdoms) in mice differs between lean and obese animals: mice that

NATURE | Vol 444 | 21 December 2006

BRIEF COMMUNICATIONS

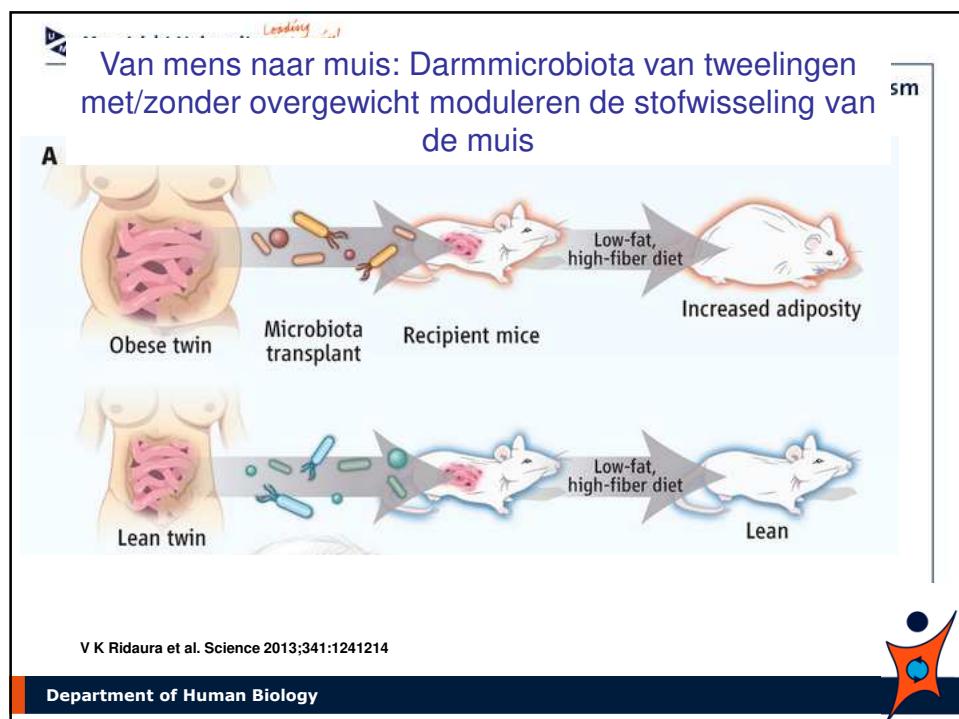
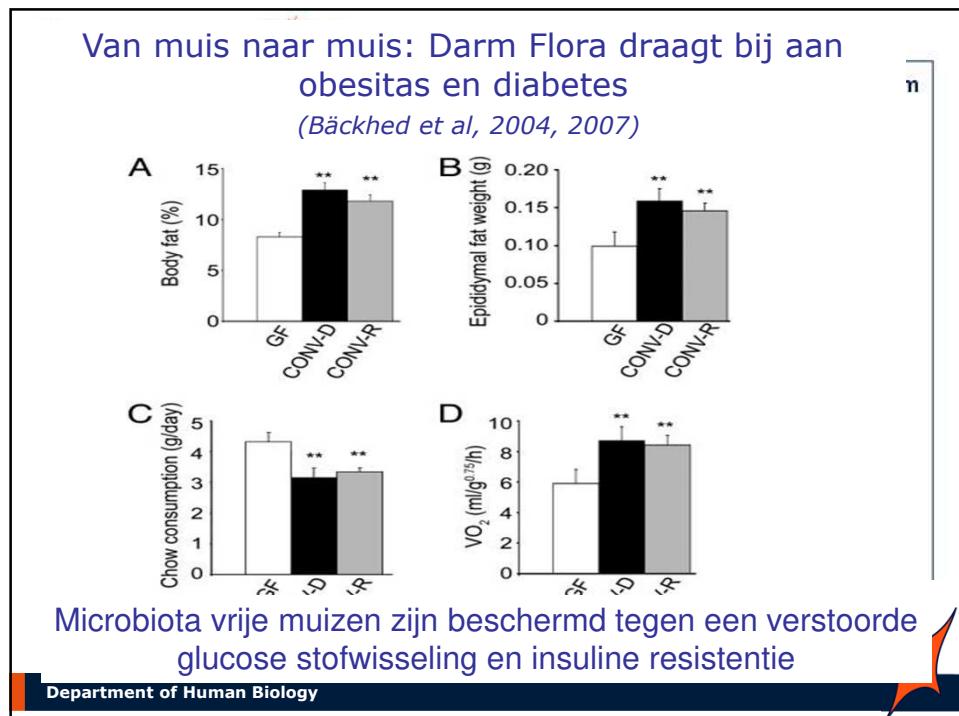
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Feces transplantatie van muis naar muis

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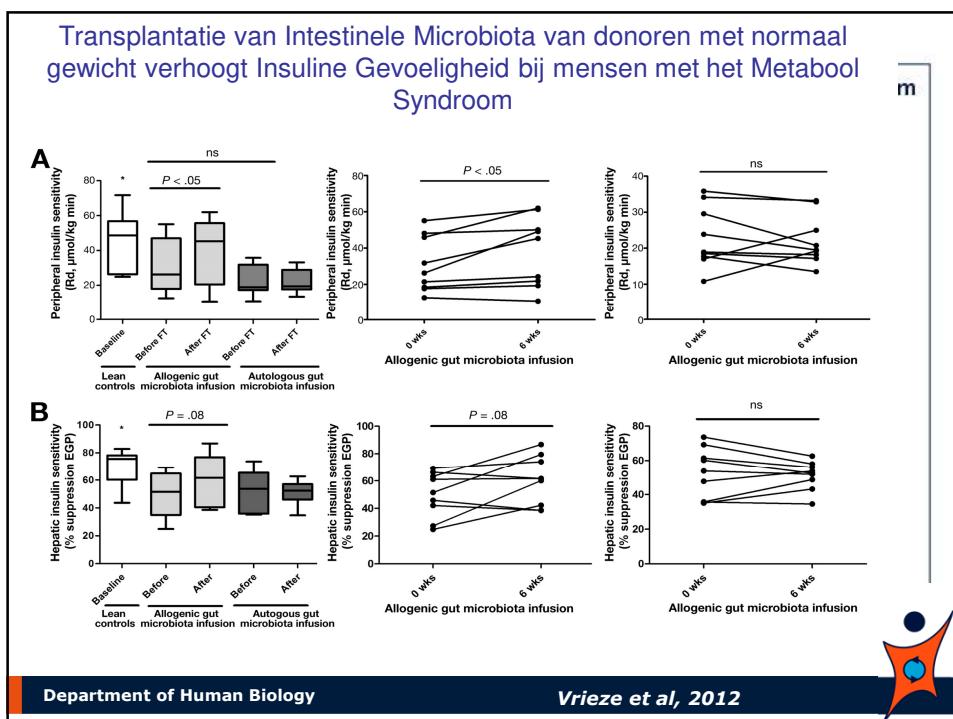
Van mens naar mens: feces transplantatie en stofwisseling

FECAL TRANSPLANT



NASAL CAVITY
TRACHEA
ESOPHAGUS
STOMACH
NASOGASTRIC TUBE

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Transplantatie van microbiota tussen

- normale en microbiota vrije muizen,
- mensen en muizen
- mensen en mensen

heeft een rol van intestinale microbiota bij de ontwikkeling van obesitas en insuline resistantie aangetoond

Effecten bij de mens zijn klein!

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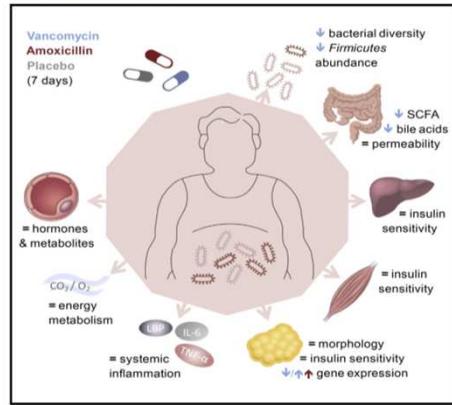


Clinical and Translational Report

Cell Metabolism

Effects of Gut Microbiota Manipulation by Antibiotics on Host Metabolism in Obese Humans: A Randomized Double-Blind Placebo-Controlled Trial

Graphical Abstract



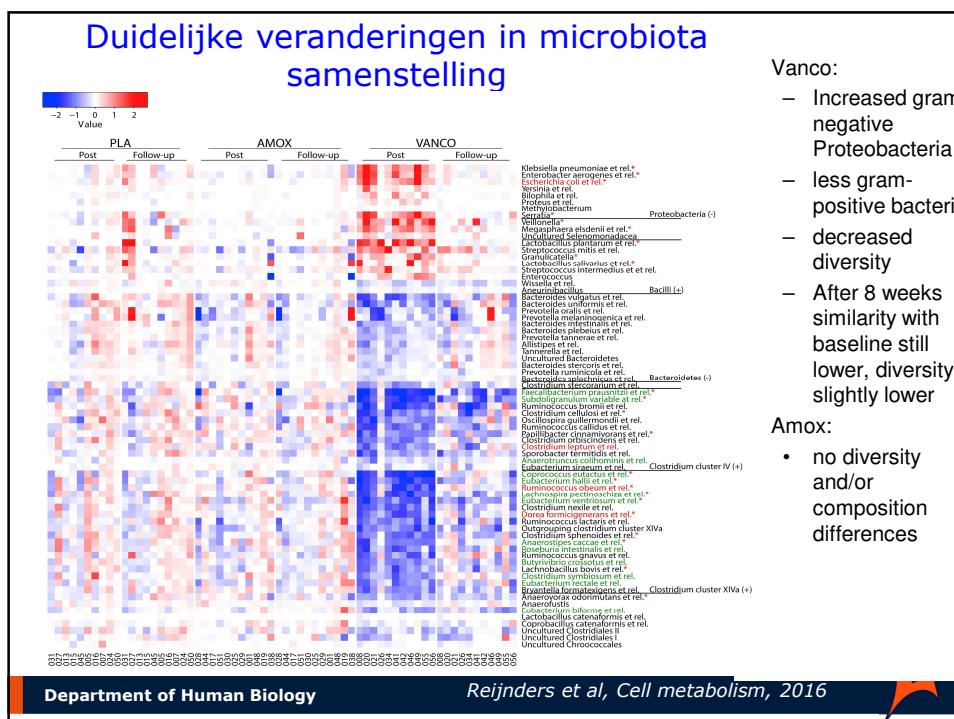
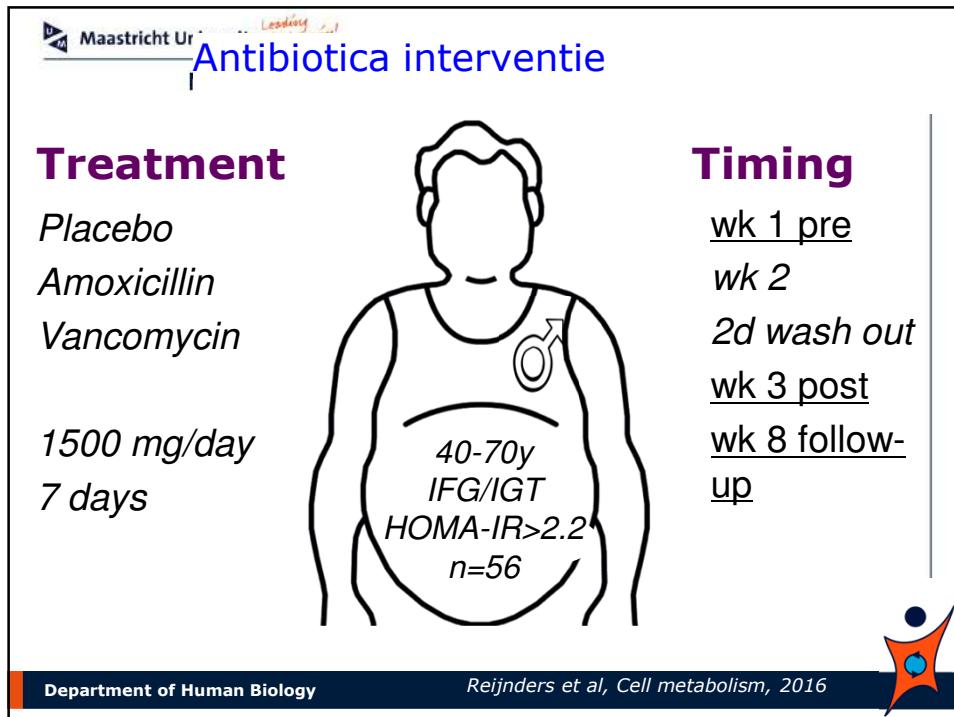
Authors
Dorien Reijnders, Gijs H. Goossens, Gerben D.A. Hermes, ..., Erwin G. Zoetendal, Cornelis H.C. Dejong, Ellen E. Blaak

Correspondence
e.blaak@maastrichtuniversity.nl

In Brief
Reijnders et al. show that a 7-day antibiotic treatment (amoxicillin/vancomycin) has no clinically relevant impact on host metabolism in obese humans, both directly after treatment cessation and at 8-week follow-up, despite profound changes in gut microbiota, short-chain fatty acid, and bile acid concentrations induced by vancomycin.

Highlights

Accession Numbers



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Geen effect op insuline gevoeligheid

- Two-step hyperinsulinemic-euglycemic clamp
 - Endogenous Glucose Production

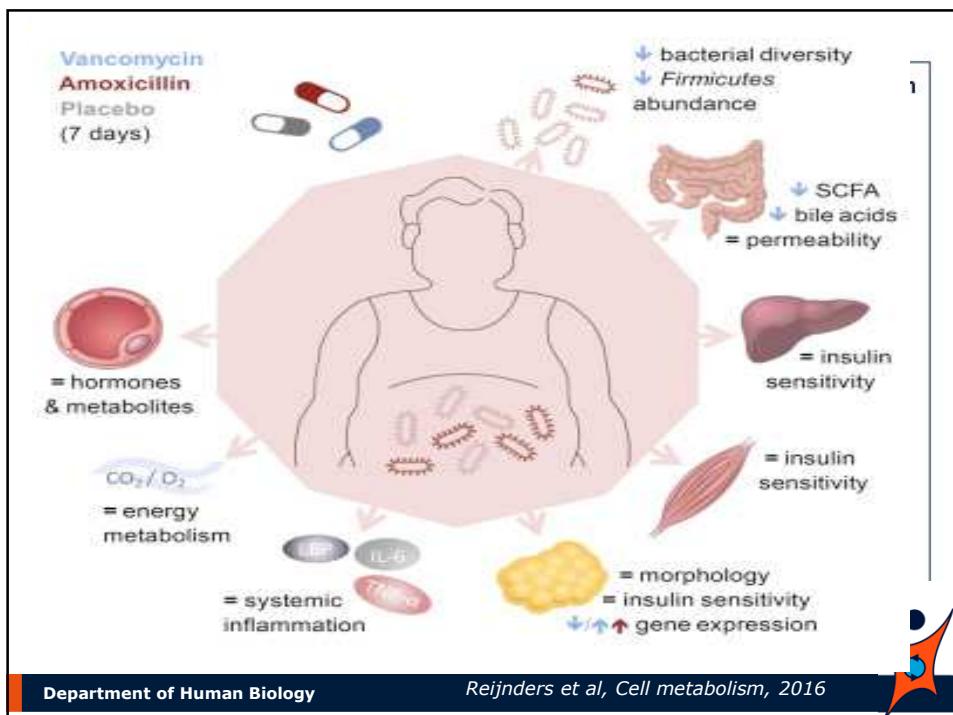
Geen effect op insuline gevoeligheid 8 wk na het stoppen van de interventie

Group	% EGP suppression
Placebo	~50
Amox	~45
Vanco	~45

Group	($\mu\text{mol/kgmin}$)
Placebo	~25
Amox	~25
Vanco	~25

Group	% suppression FFA
Placebo	~50
Amox	~45
Vanco	~45

Department of Human Biology *Reijnders et al, Cell metabolism, 2016*



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Perspectief

- Modulatie van de microbiota door een 7-daagse antibiotica kuur heeft geen effect op de stofwisseling, ook niet 8 wk na het stoppen van de interventie
- In tegenspraak met veel dierstudies!
- Meer frequent antibiotica gebruik, lange termijn dieet effecten?
- Speelt het metabole fenotype een rol?

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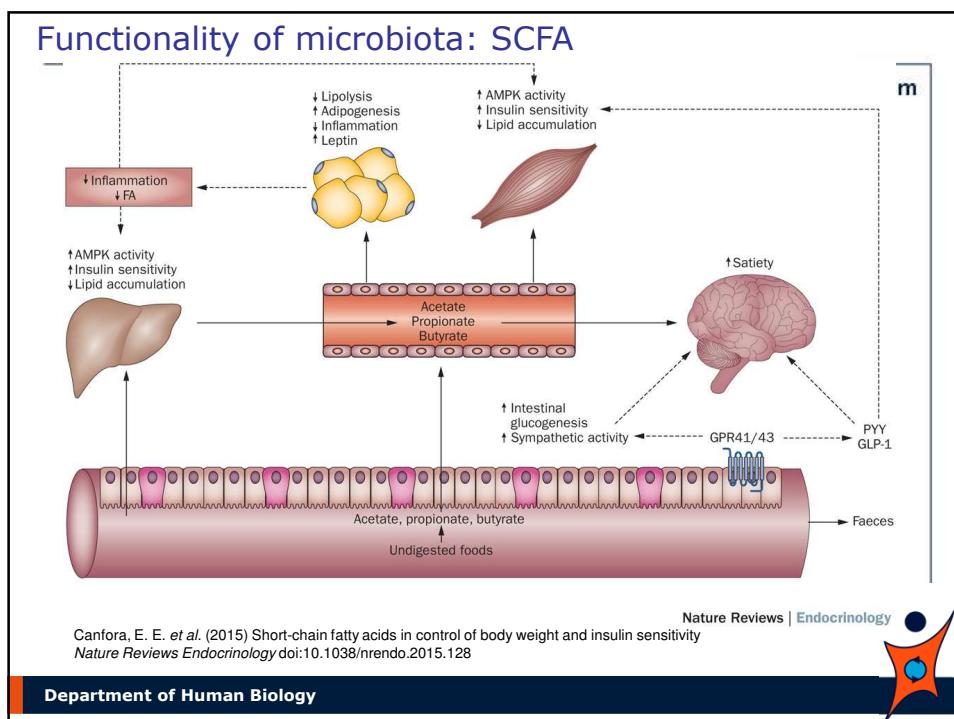
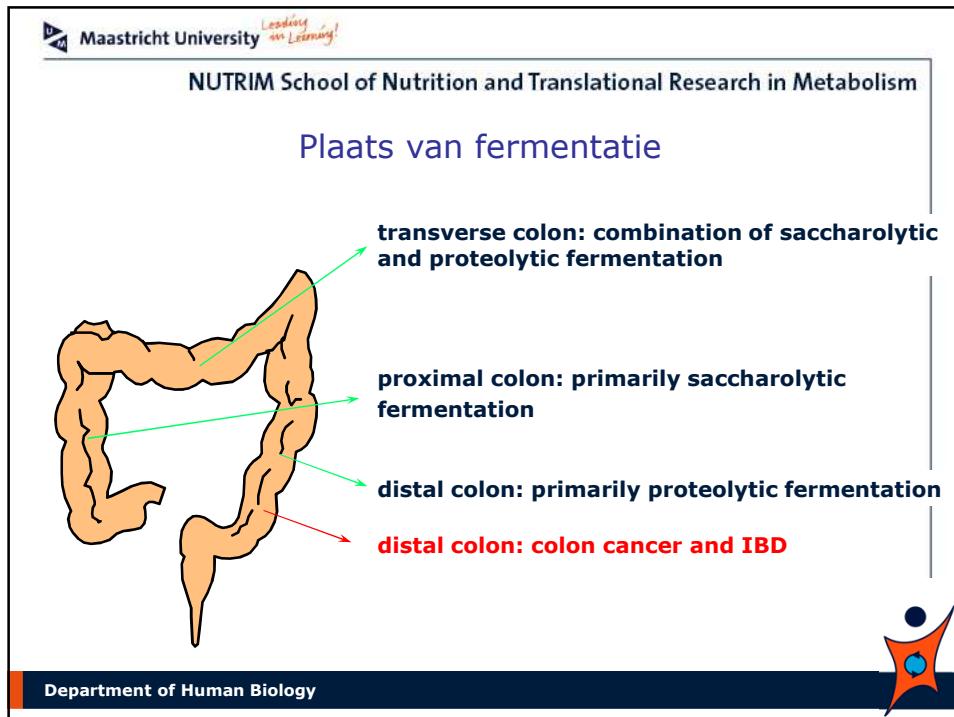
Functie microbiota: saccharolytische en proteolytische activiteit

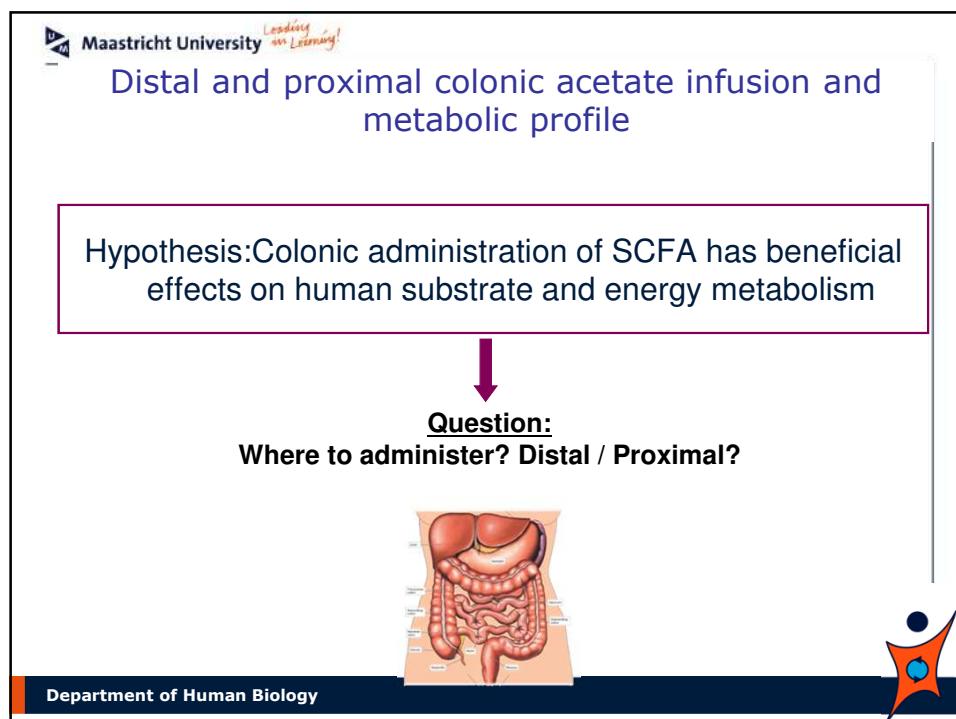
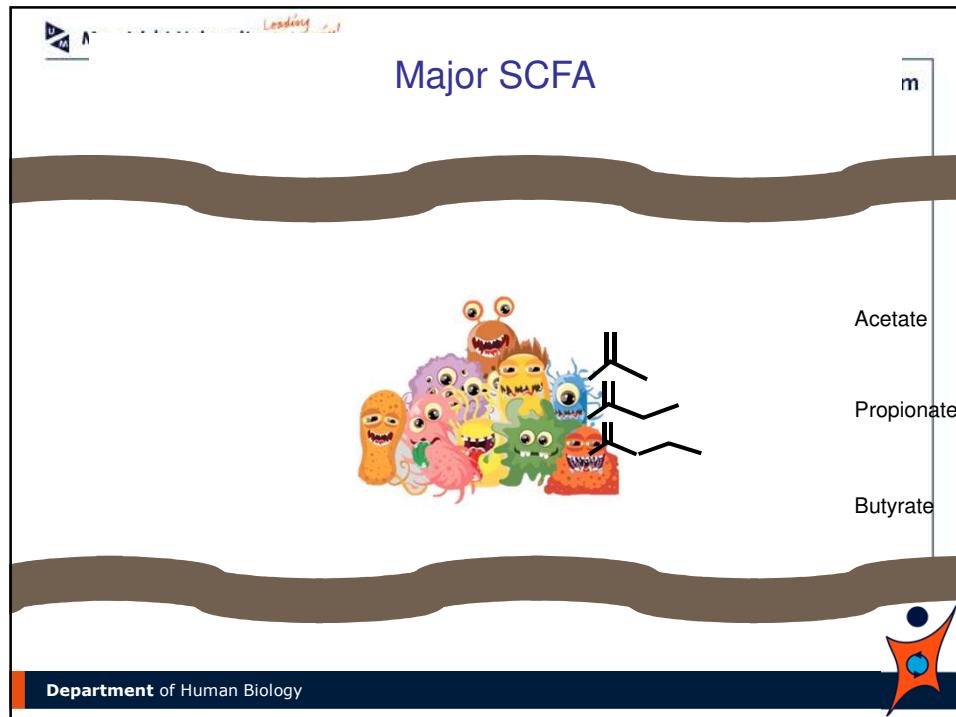
- Saccharolysis leads primarily to SCFA and gasses
 - SCFA: acetate, propionate, butyrate
 - lactate -> only accumulates when there is a **fast** fermentation
 - CO_2 , CH_4 , H_2
- Proteolysis in addition leads to toxic metabolites
 - BCFA: iso-butyrate, iso-valerate
 - ammonia
 - phenolics: phenol, indol, *p*-cresol, skatol
 - H_2S , CH_3SH , etc

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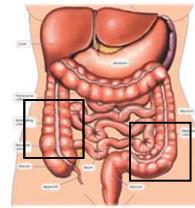
Distal and proximal colonic acetate infusion and metabolic profile

Aim:

To investigate differential effects of proximal and distal colonic infusions with sodium acetate on human fat oxidation, energy expenditure and circulating metabolic markers

Study design

- Double blind, placebo controlled, randomized crossover study
- Six healthy overweight males (BMI 25 – 34.9 kg/m²)
Aged 20 – 50 years;
Weight stable for at least 3 months (\pm 2 kg)
No use of antibiotics, pre- or probiotics



Intervention

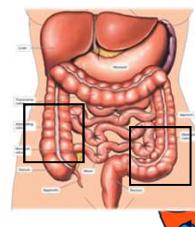
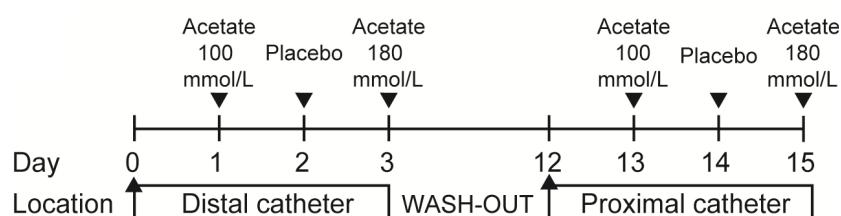
1. Sodium acetate 100mmol/L (12mmol in 120mL water)
2. Sodium acetate 180mmol/L (21.6mmol in 120mL water)
3. Placebo (0.9% NaCl) in 120mL

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Van der Beek et al, Clin Sci 2017

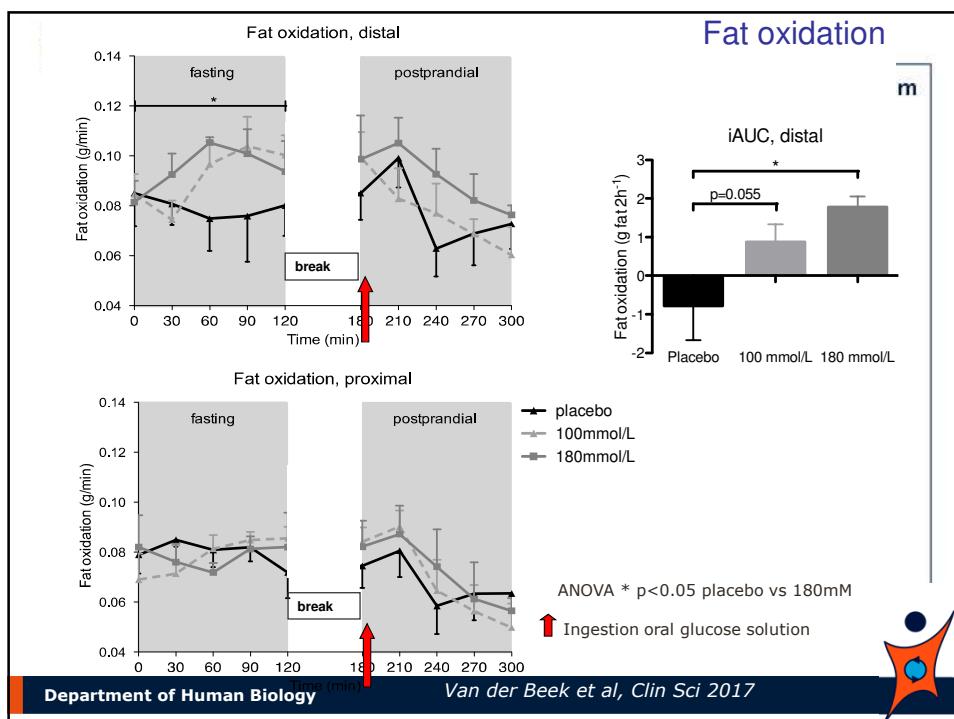
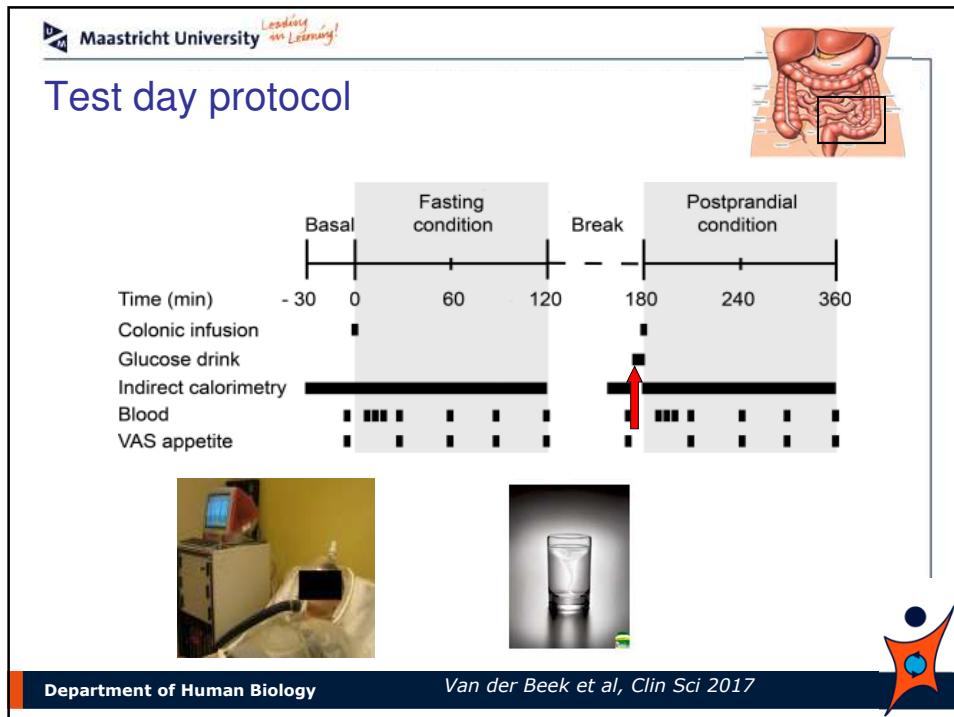


Intervention protocol

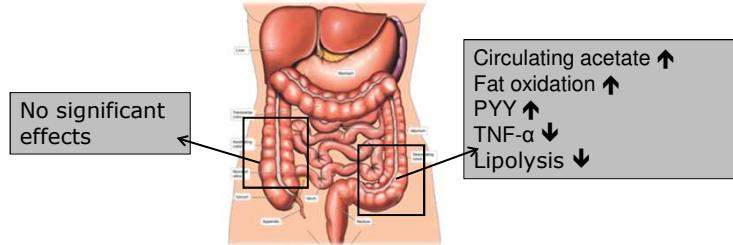


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Van der Beek et al, Clin Sci 2017



Distal, not proximal, colonic acetate infusion improves metabolic profile



- Increasing colonic and systemic acetate beneficially affect the metabolic profile
- Validated distal colonic infusion as a good model to study SCFA effects on metabolism

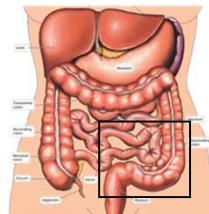
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Van der Beek et al, Clin Sci 2017

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Combinations of SCFA and metabolic profile

To investigate acute effects of distal colonic infusions of SCFA combinations on substrate and energy metabolism



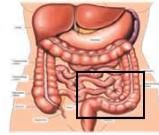
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Canfora et al, Scientific reports, 2017



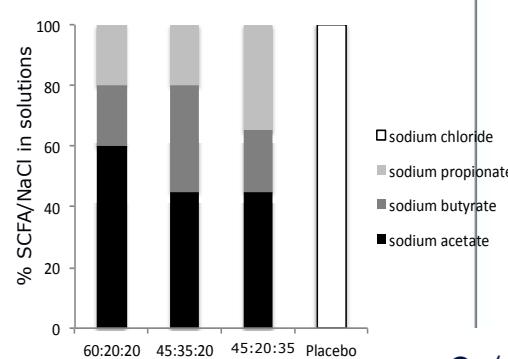
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Intervention protocol (1)

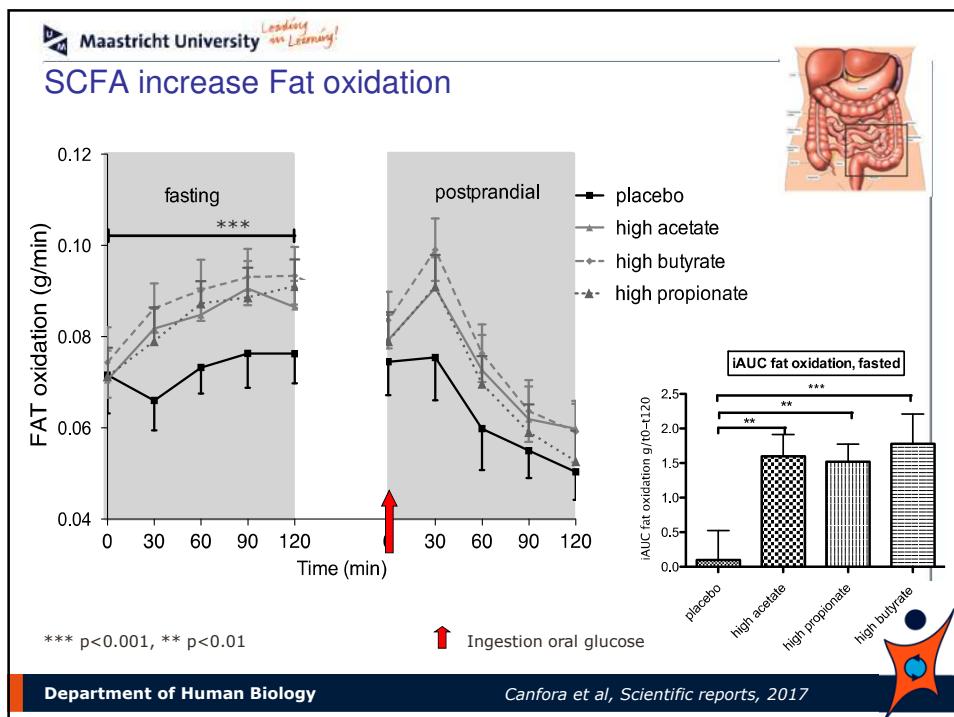


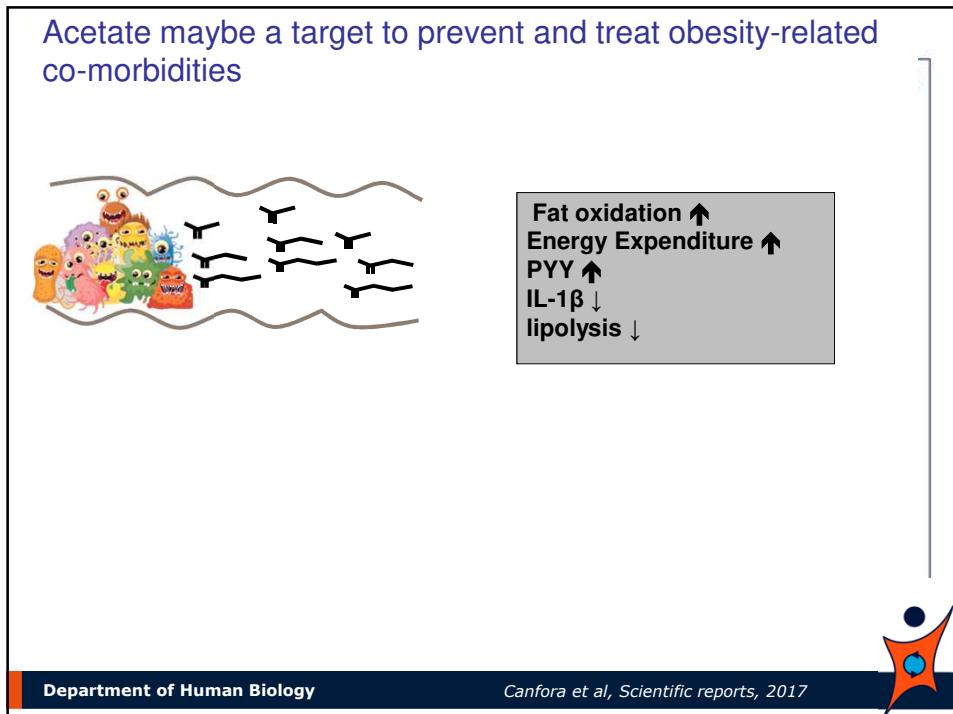
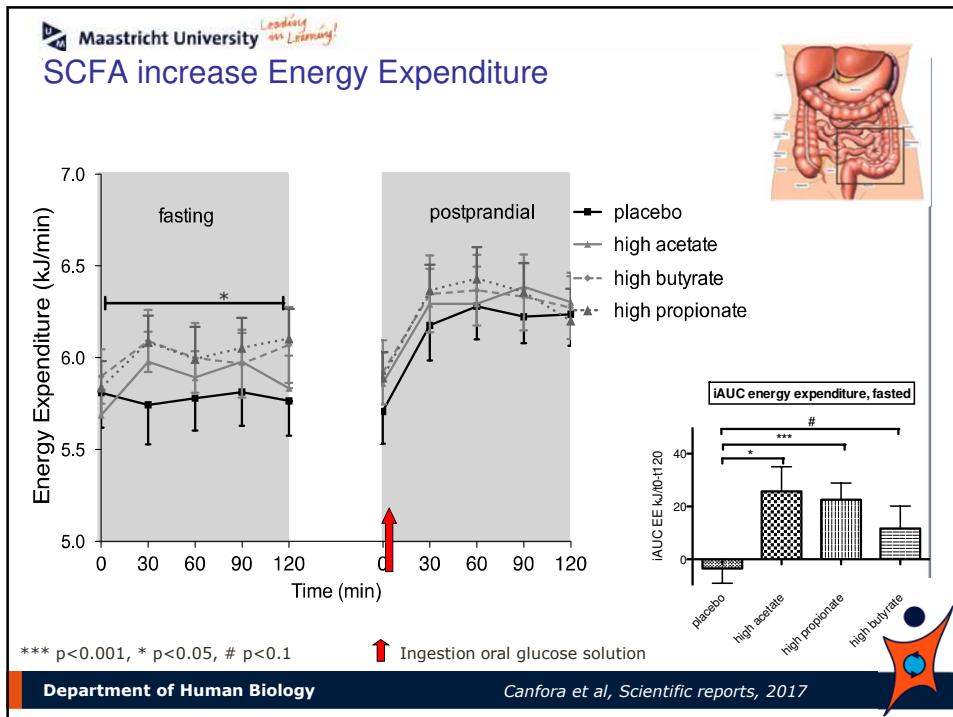
Double blind, placebo controlled, randomized crossover study with 4 distal infusions:

- Placebo:
40mmol NaCl
- High sodium acetate (60:20:20):
24mmol NaAc, 8mmol NaBu, 8mmol NaPr
- High sodium butyrate (45:35:20):
18mmol NaAc, 14mmol NaBu, 8mmol NaPr
- High sodium propionate (45:20:35):
18mmol NaAc, 8mmol NaBu, 14mmol NaPr
- All diluted in 200mL water



Department of Human Biology *Canfora et al, Scientific reports, 2017*





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Why do we hypothesize that the distal colon should be targeted?

Higher density of PYY-producing L-cells in the distal colon

Epithelia

SCFAs

FFA2 FFA3

Enteric nervous system

GLP-1/PYY release

To CNS via pelvic or vagus nerves

Kuwahara (2014), *Frontiers in Endocrinology*

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Increased fat oxidation and EE only after distal administration:

Acetate bypass the liver → circulating acetate↑ → uptake in oxidative tissues → pAMPK↑ → fat oxidation↑

Circulating Acetate ↑

Acetate → pAMPK↑ → fat oxidation↑^{1,2,3}

Acetate → pAMPK↑ → fat oxidation↑^{1,2,4}

¹Sakakibara et al., 2006; ²Yamashita et al., 2009; ³Kimura et al., 2013; ⁴den Besten et al., 2015

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Summary on acetate

- Abundant animal and limited human in-vivo data: a beneficial role of acetate in the control of body weight, glucose homeostasis, and insulin sensitivity.
- In contrast, some animal data suggest that acetate promotes the development of obesity and insulin resistance.
- Human studies are warranted to evaluate the 'acetate discrepancies' with respect to effects on metabolic health.



Department of Human Biology Canfora and Blaak, *Curr Opin Clin Nutr Metab Care* 2017



Towards dietary intervention study with galacto-oligosaccharides targeting colonic acetate

Study design

- Double blind, placebo controlled, randomized parallel study
- 46 volunteers:
- Males and postmenopausal females aged 45-70 years;
- BMI 28 – 40 kg/m²;
- Impaired glucose tolerance (IGT) and/or impaired fasting glucose (IFG);
- Weight stable for at least 3 months (\pm 2 kg);
- No use of antibiotics, pre- or probiotics for 3 months

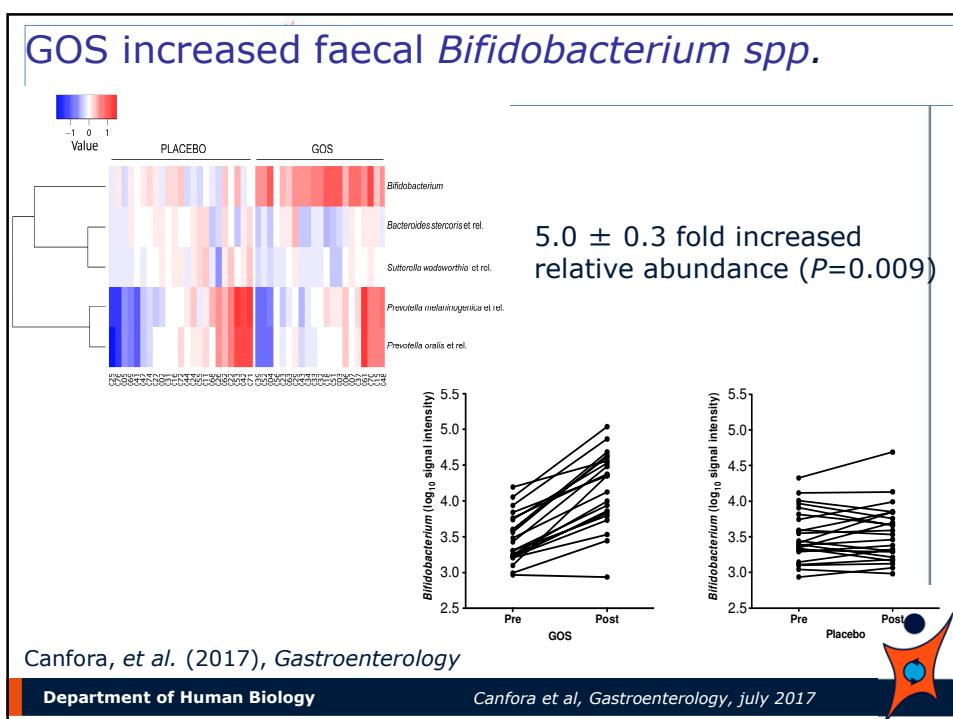
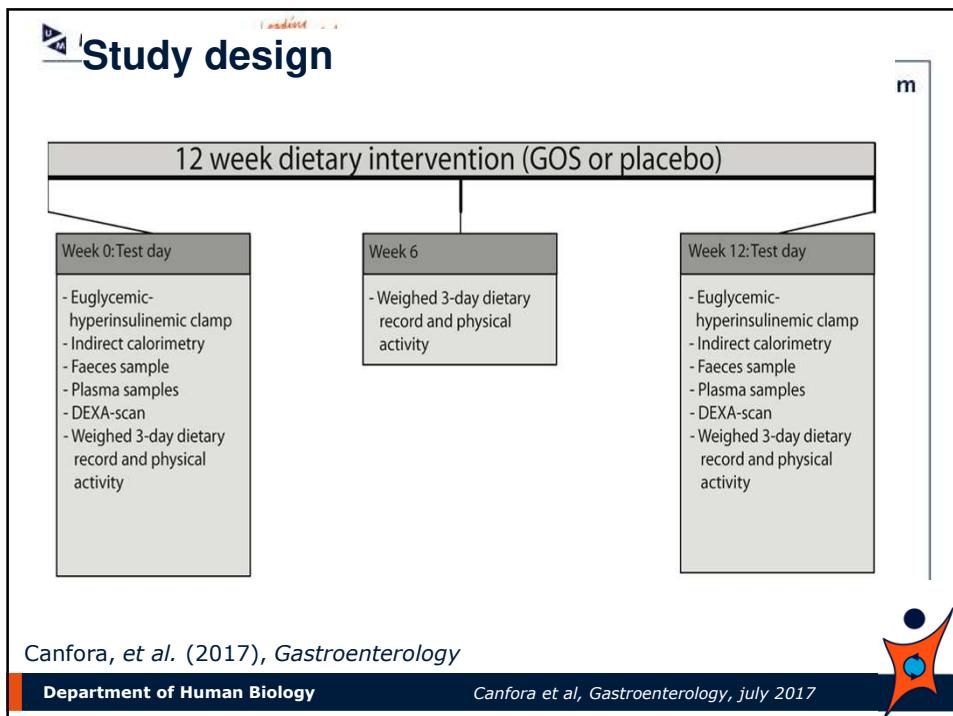
IGT: 2h plasma glucose during 75g OGTT
 7.8-11.1 mmol/l
 IFG: plasma glucose \geq 5.6 mmol/l

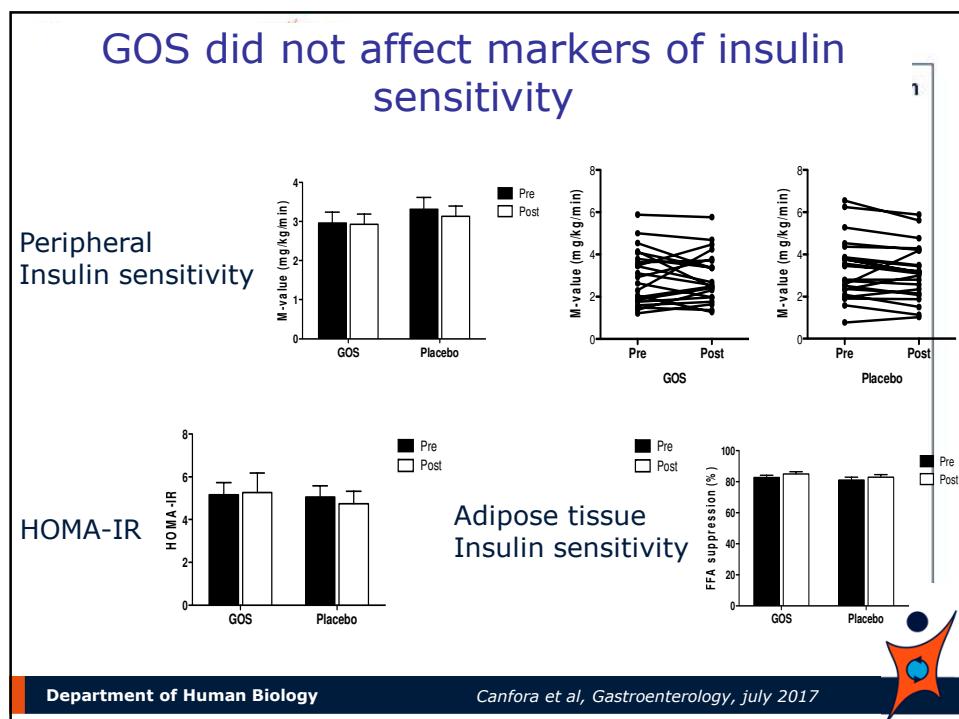
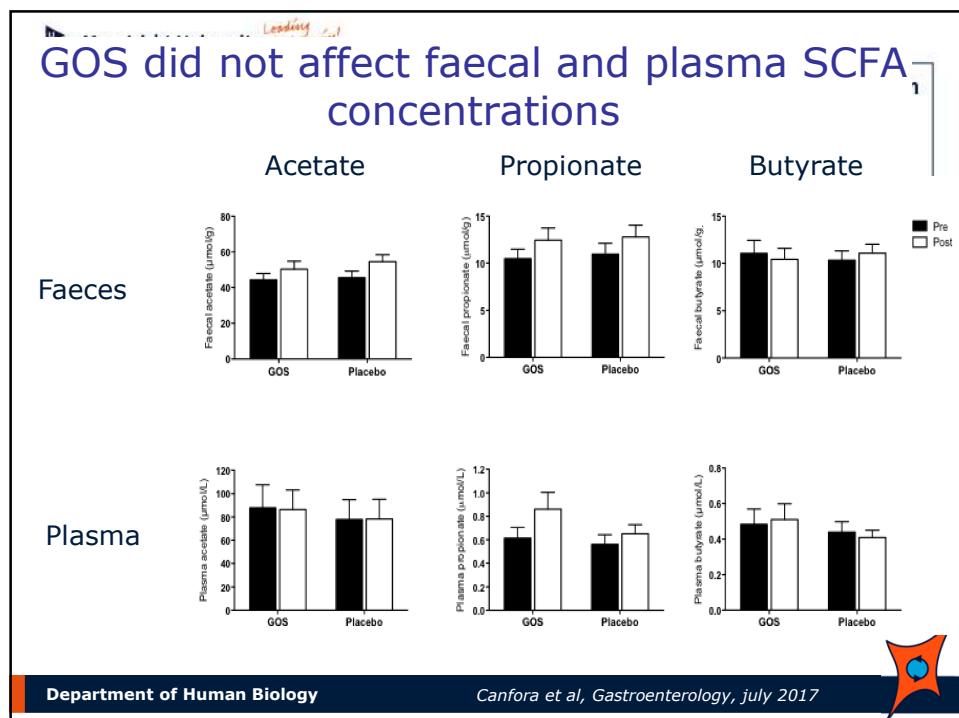
Intervention groups:

1. Vivinal GOS 3x 5 gram per day for 12 weeks
2. Maltodextrin 3x 4.4 gram per day for 12 weeks (isocaloric placebo)



Department of Human Biology Canfora et al, *Gastroenterology*, July 2017





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In Summary

- Modulation of microbiota by means of antibiotics did not affect metabolic health after 7 days and in the longer term
- SCFA may be an important link between gut microbiota and metabolic health
- Distal, but not proximal, acetate infusion may improve fat oxidation and metabolic profile
- Rectal infusion of SCFA combinations all increase fat oxidation, energy expenditure and metabolic profile
- We propose that acetate is the main driver of this effect
- GOS increased bifidobacteria but not insulin sensitivity in prediabetic individuals
- Dietary fiber intervention focussed on targeted production of SCFA may improve intervention outcome with respect to metabolic profile, but this requires further confirmation

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ZonMw

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NWO Collaborations/Acknowledgements

TIFOOD NUTRITION

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- Max Vogel
- Jasper Most
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- Yvonne Essers
- Nicole Hoebers

Dept Human Biolog




EFSD
 European Foundation for the Study of Diabetes