



SHAPING THE GUT MICROBIOME DURING INFANCY

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CIHR IRSC
Canadian Institutes of Health Research
Institut de recherche en santé du Canada

ILSI NA Scientific Session, Bermuda, January 2018

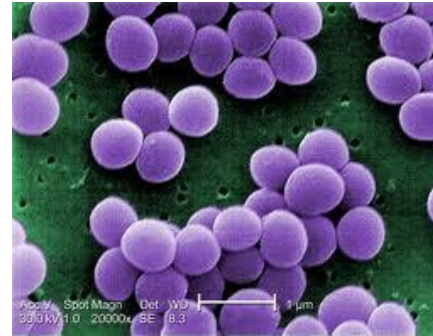
From growing microbes to.....



.....identifying them by their DNA

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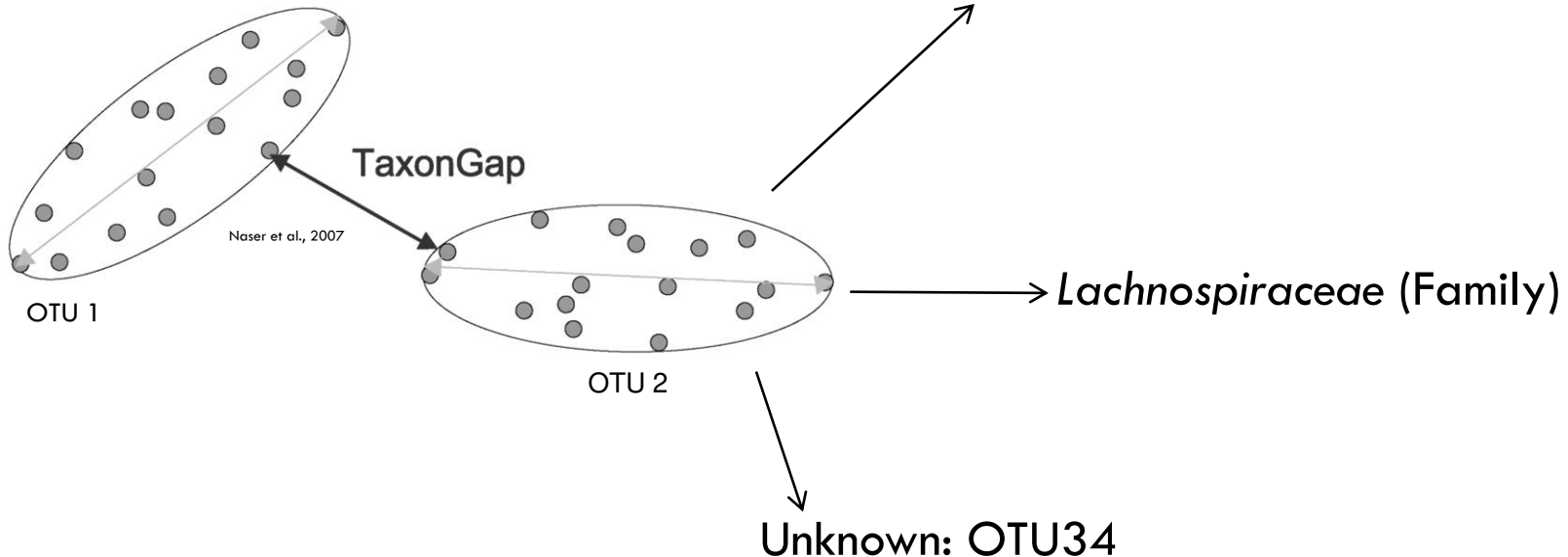
x80million



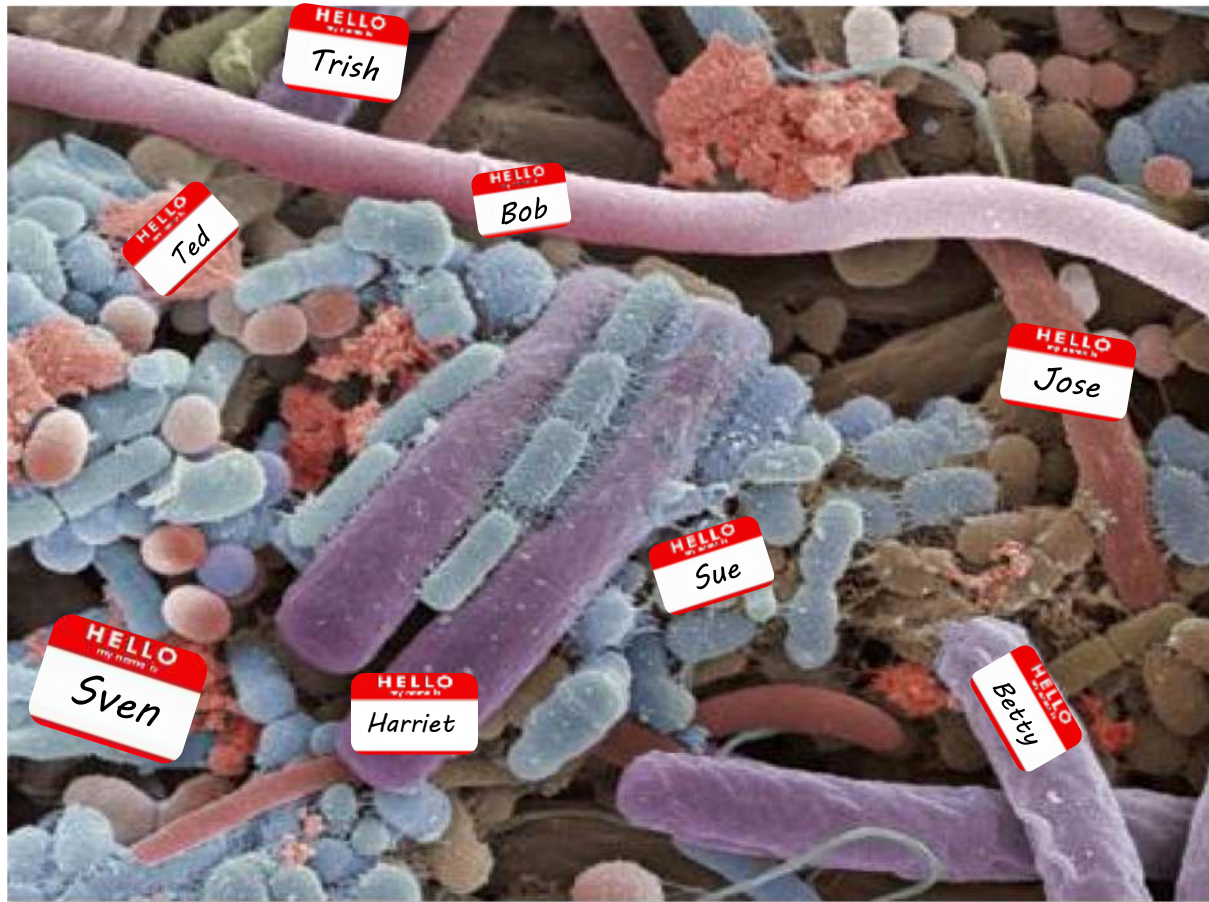
Streptococcus



Escherichia



More friends in the gut than you think



IMPACT OF EARLY LIFE EXPOSURES ON

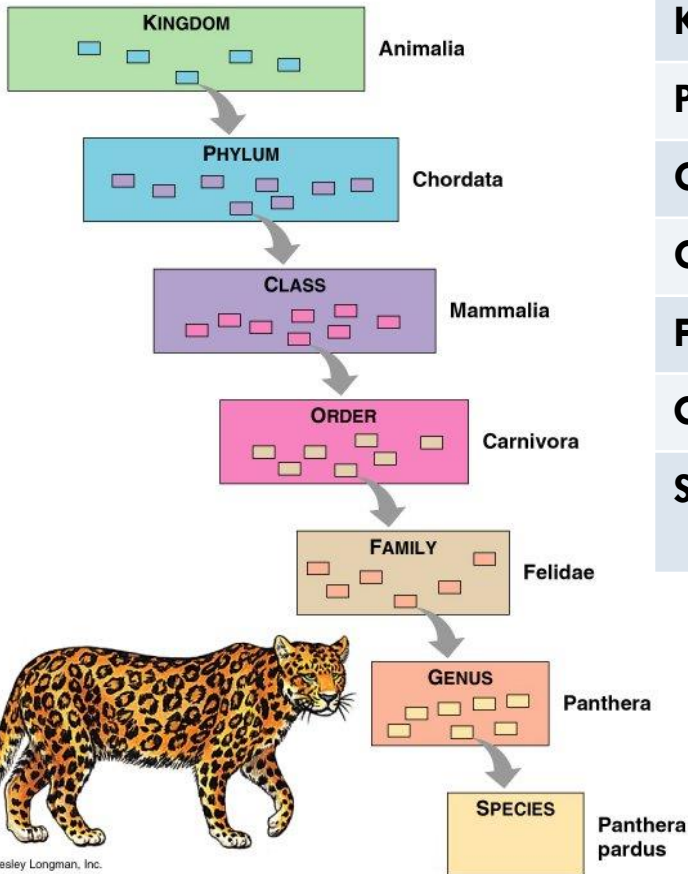


INFANT GUT MICROBIOTA

My session objectives are to:

- Introduce the SyMBIOTA (Synergy in Microbiota) research program & the CHILD (Canadian Healthy Infant Longitudinal Development) birth cohort
- Present findings on the maturation of the gut microbime over the 1st year of life and how this affected by early life exposures

Taxonomy 101 (Biological Classification)



	Human	<i>B. fragilis</i>	<i>C. difficile</i>
Kingdom	Animalia	Bacteria	Bacteria
Phylum	Chordata	Bacteroidetes	Firmicutes
Class	Mammalia	Bacteroidia	Clostridia
Order	Primates	Bacteroidales	Clostridiales
Family	Hominidae	Bacteroidaceae	Clostridiaceae
Genus	<i>Homo</i>	<i>Bacteroides</i>	<i>Clostridium</i>
Species	<i>Homo sapiens</i>	<i>Bacteroides fragilis</i>	<i>Clostridium difficile</i>



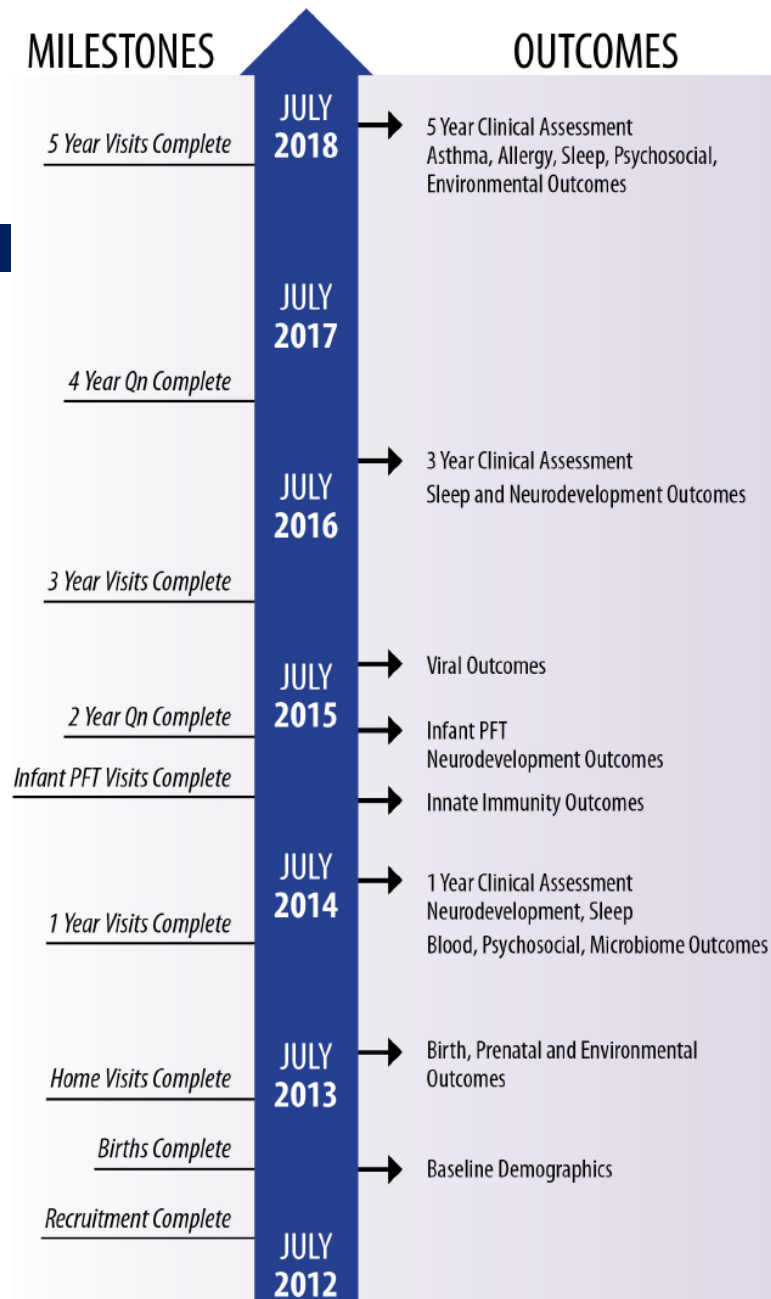
CHILD Study

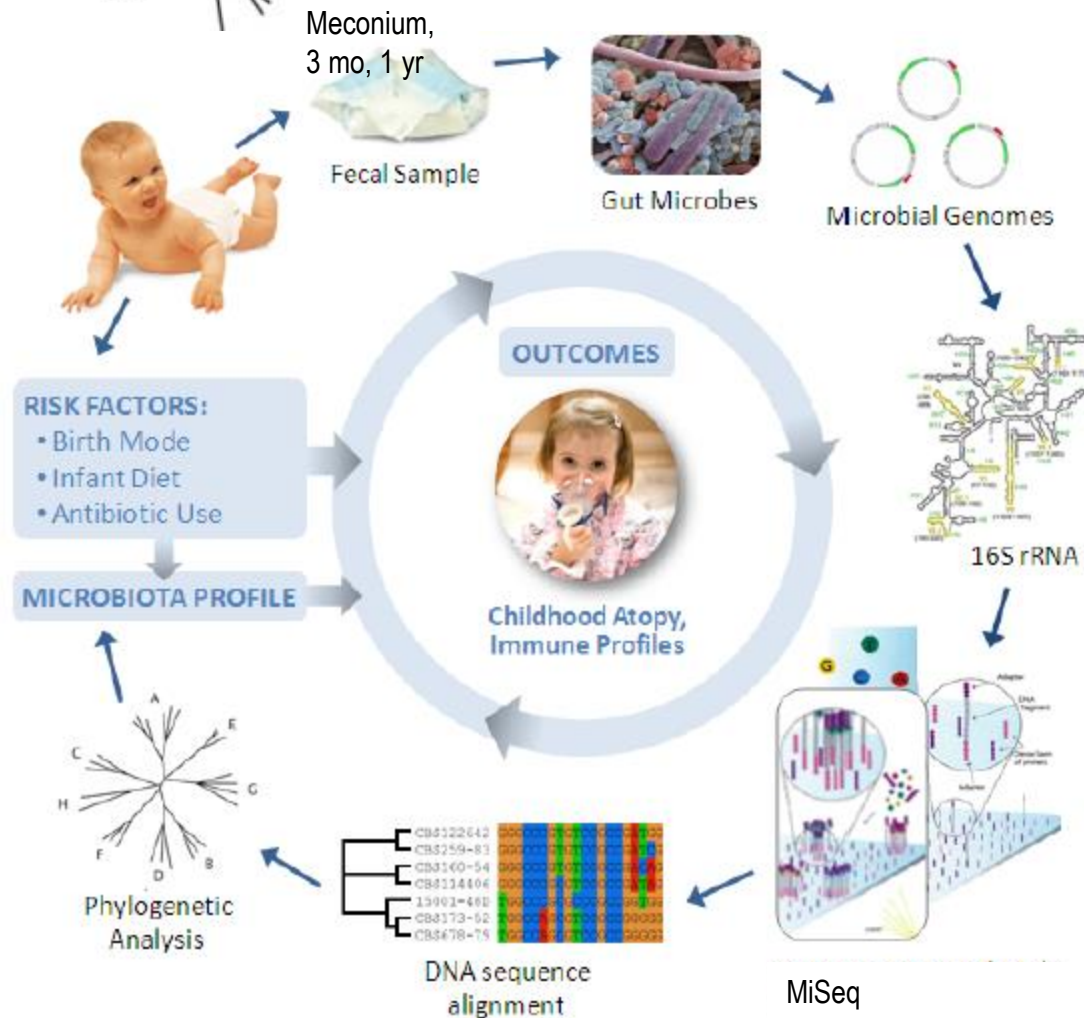
HELP CHILDREN GROW UP HEALTHY

\$30M Invested
500,000 Biological Samples Banked
200,000 Questionnaires Completed
3600 Families Participating
92% Retention at 1 year
40+ Senior Researchers
20+ Scientific Disciplines:

Air Quality	Infectious Disease	Physiology
Biostatistics	Molecular Biology	Population Health
Endocrinology	Neonatology	Psychology
Environmental Health	Neuroimmunology	Respirology
Epidemiology	Nutrition	Sociology
Genetics	Obstetrics	Toxicology
Immunology	Pediatrics	Microbiome

MILESTONES





Metadata and infant fecal samples from the Canadian Healthy Infant Longitudinal cohort (www.childstudy.ca)



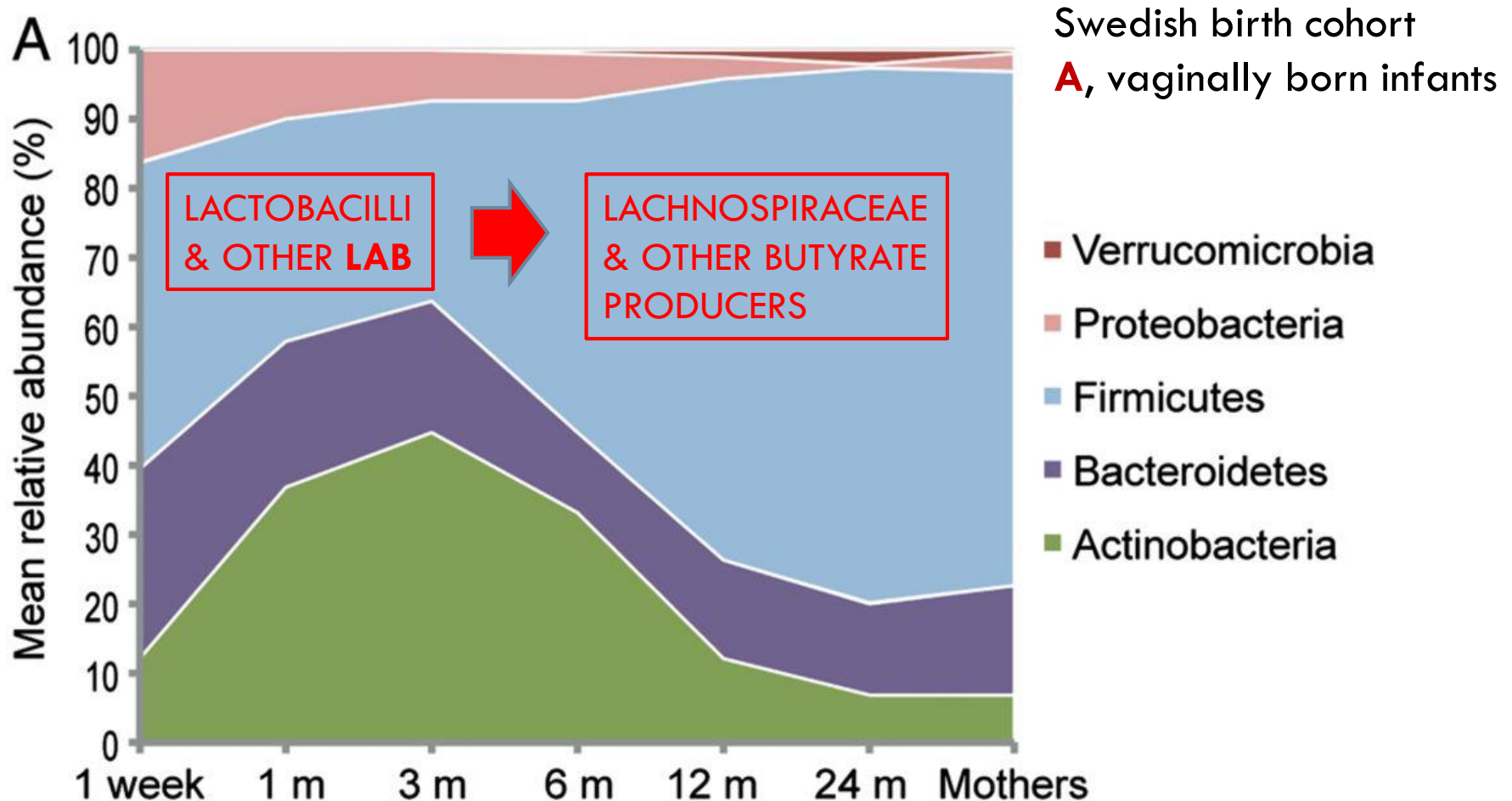
**CIHR CDN MICROBIOME INITIATIVE
TEAM GRANT, \$2.5 million/5 yr**

GUT MICROBIOME MATURATION IN FULL TERM INFANTS

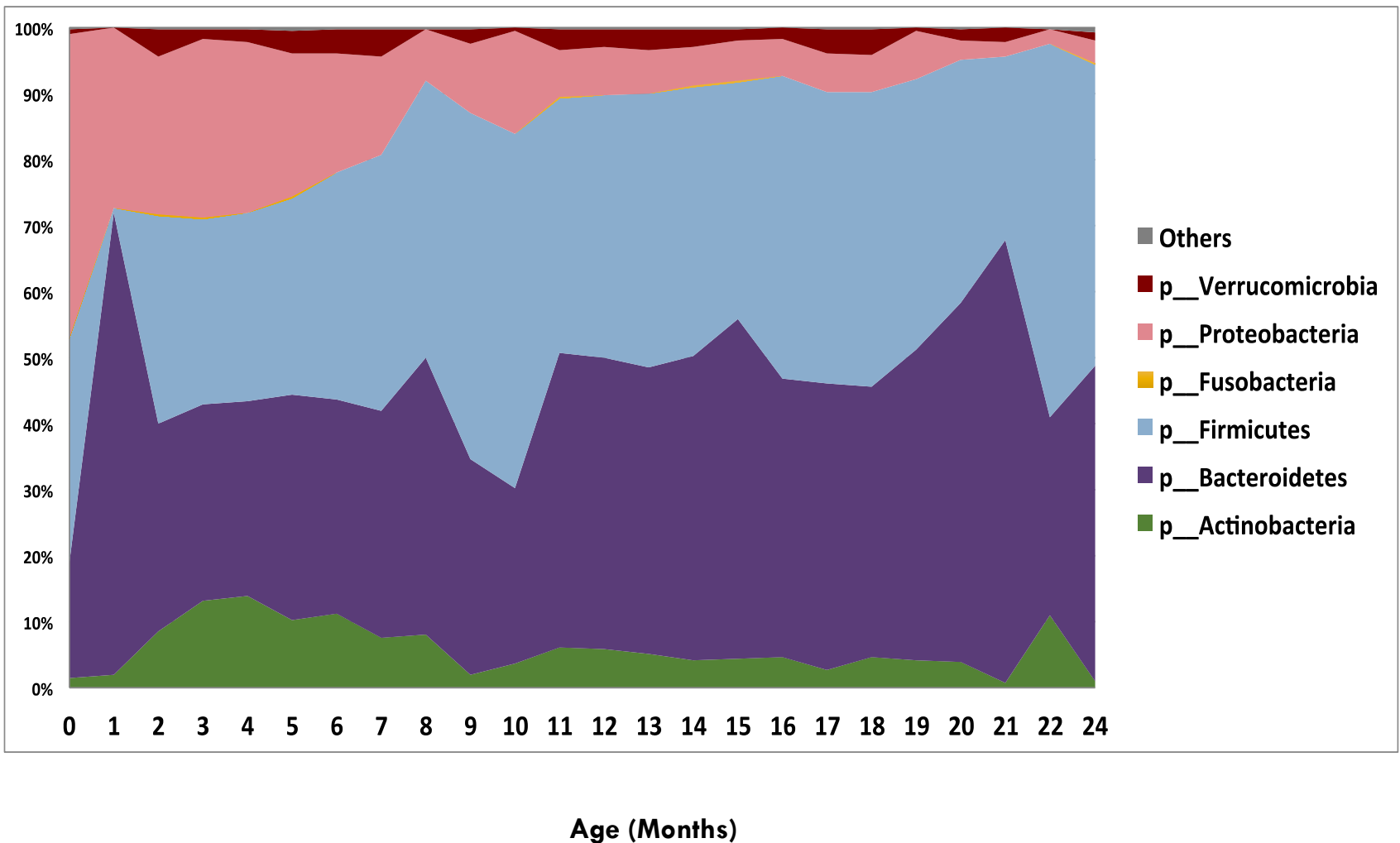


Canadian Healthy Infant Longitudinal Development
(CHILD) cohort

Development of gut microbiota over the first years of life (Jakobsson al. Gut 2014; 63)

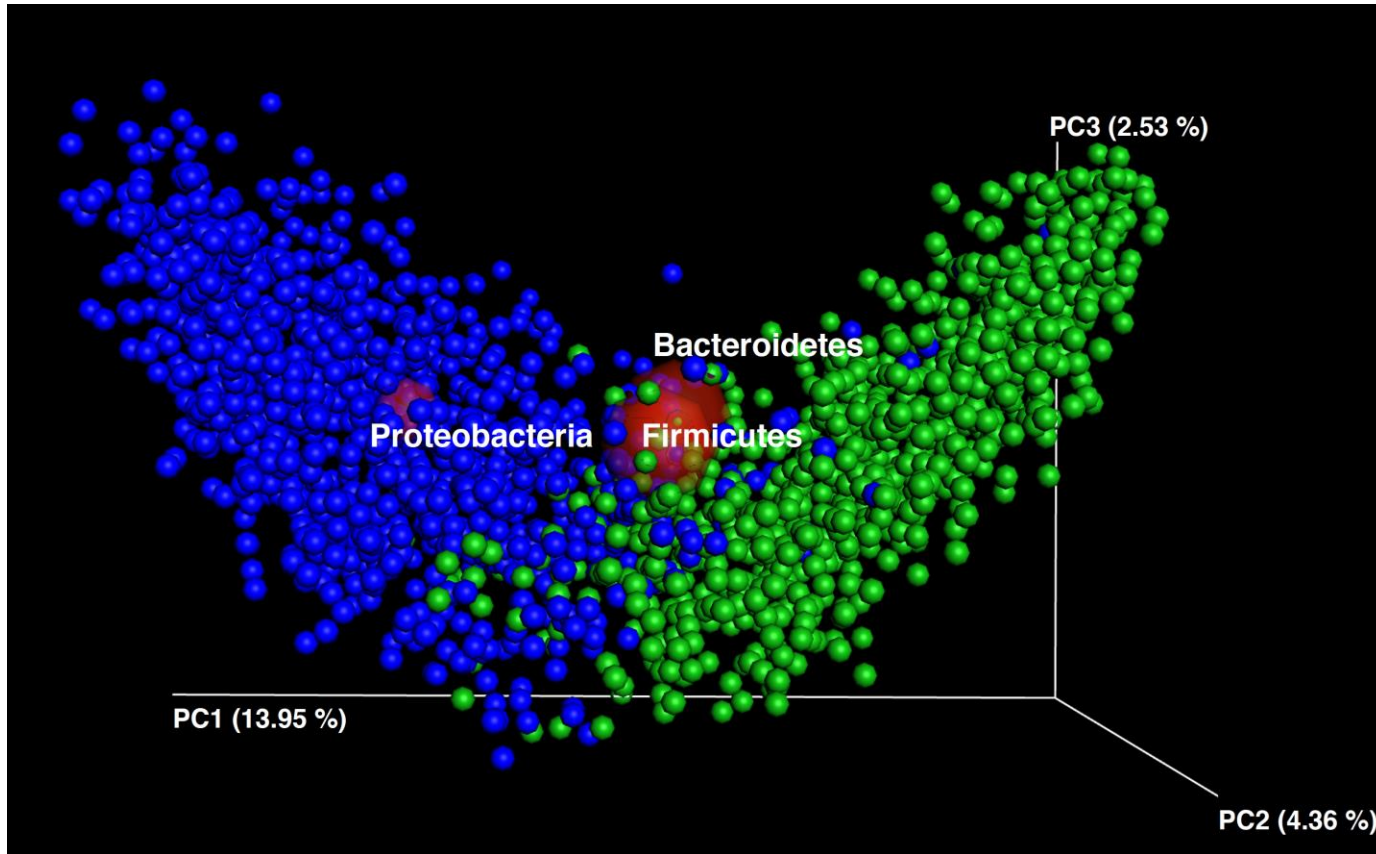


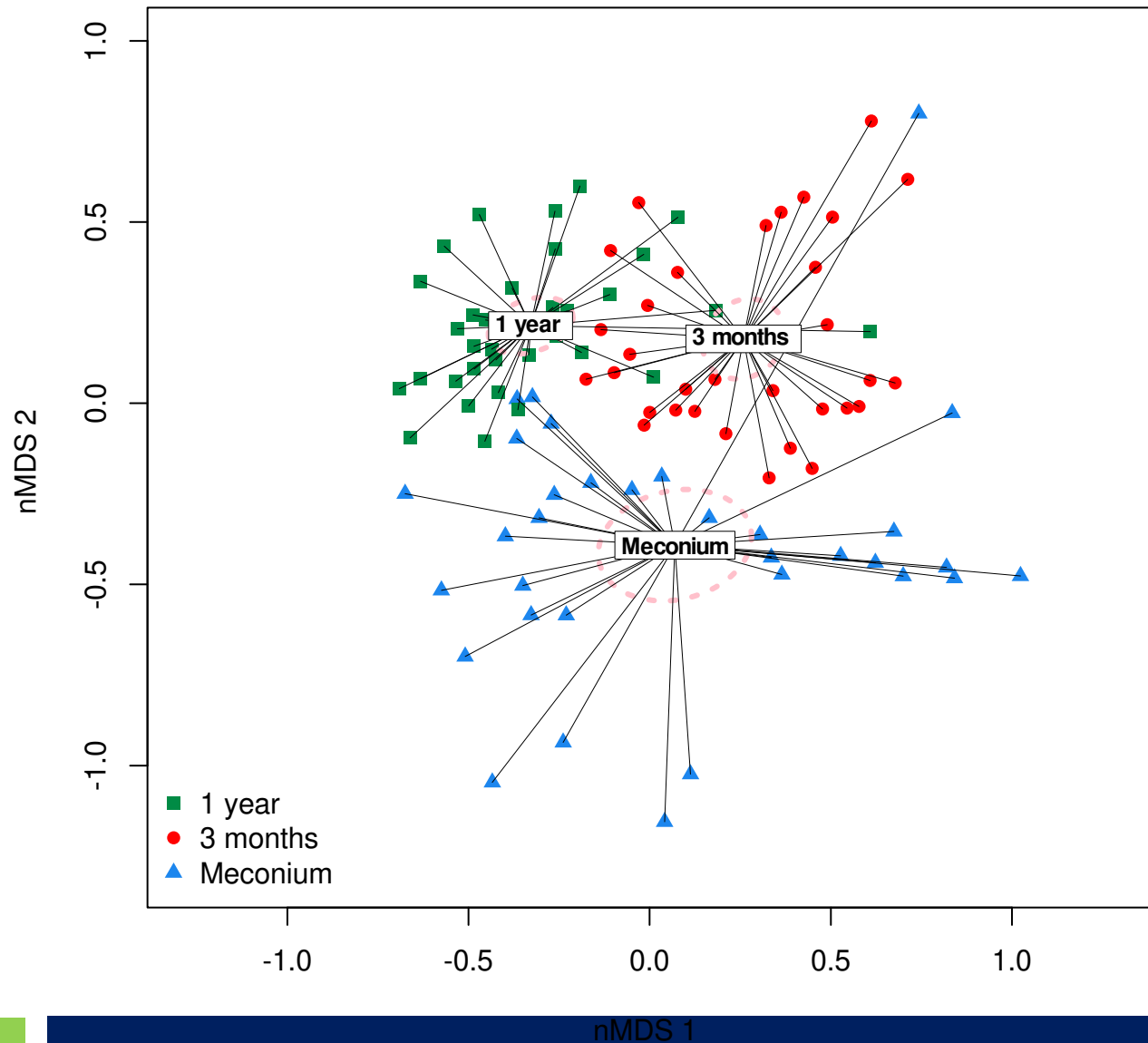
Mean relative abundance (%) of microbial phyla



3 Months

12 Months



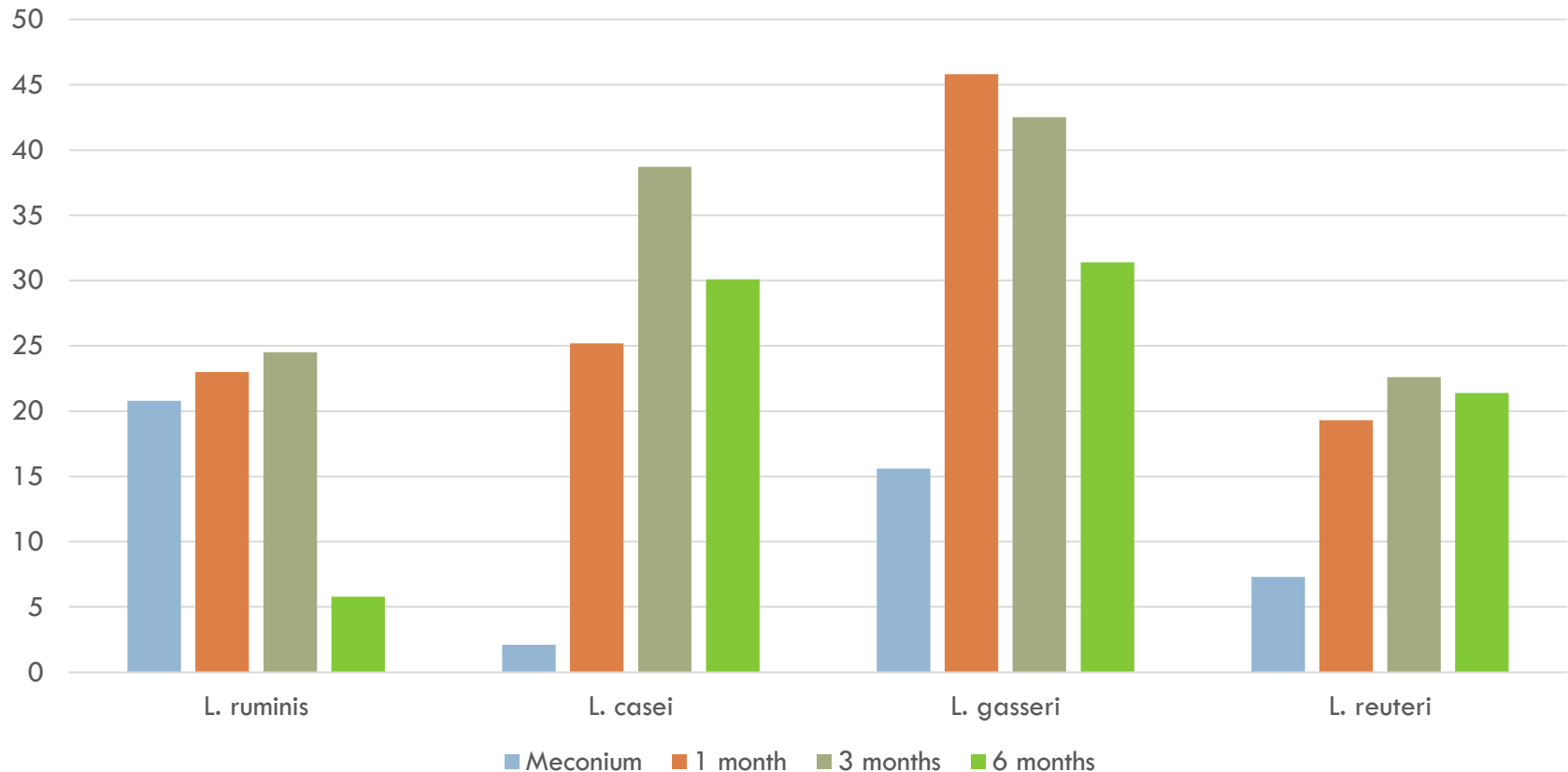


Important Role of Pioneer Gut Microbes

- Days after birth, facultative anaerobes, *LAB (lactic acid bacteria, eg. lactobacilli, streptococci) and Enterobacteriaceae*
 - ▣ create an anaerobic environment allowing strict anaerobes, such as *bifidobacteria, Clostridium* and *Bacteroides* species, to thrive
- Early microbial composition determines future composition
 - ▣ Heavier colonization with *Enterobacteriaceae* within 3 days of birth = greater abundance of *bifidobacteria* 6 months later (Dogra et al. 2015)

Lactobacilli (of Firmicutes) decline in gut microbiota with advancing infant age

Percent colonization with Lactobacillus species



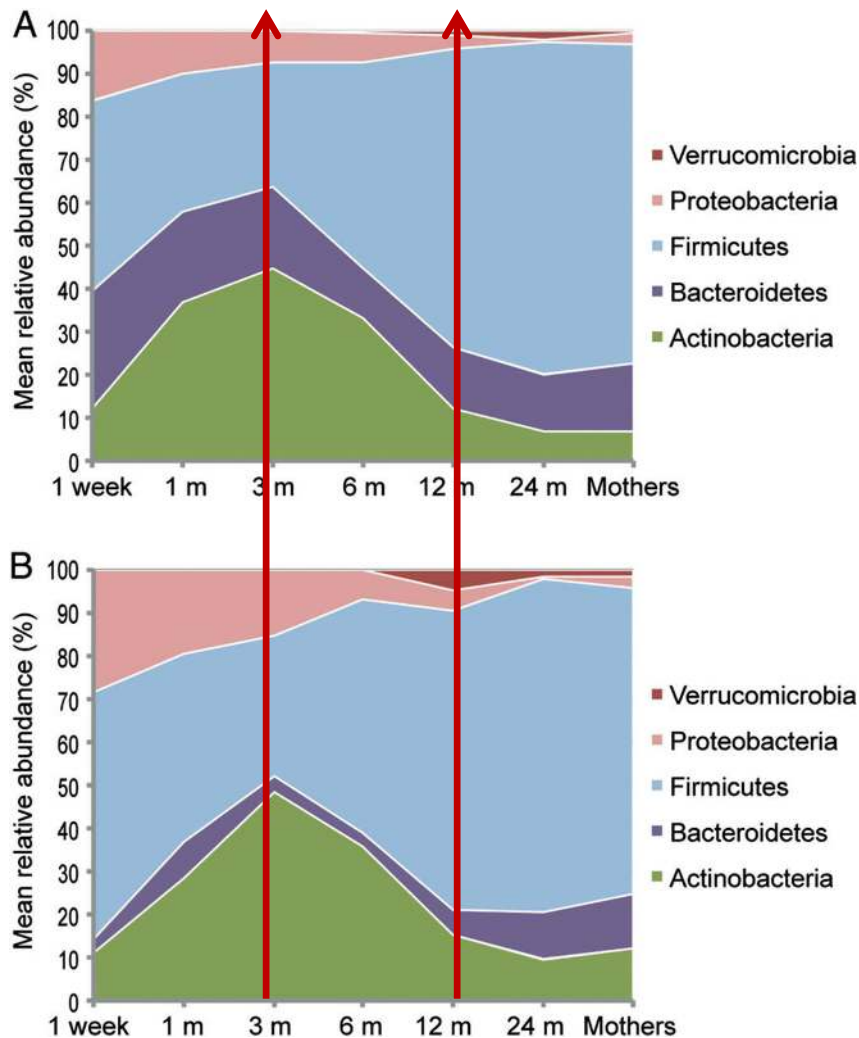
Martin et al. Early-Life events, including mode of delivery and type of feeding, siblings and gender, shape the developing gut microbiota. PLOS One 2016; 11

CESAREAN BIRTH & GUT DYSBIOSIS IN EARLY INFANCY



Canadian Healthy Infant Longitudinal Development
(CHILD) cohort

Development of infant gut microbiota over the first years of life (Jakobsson al. Gut 2014; 63)



Swedish birth cohort

A, vaginally born infants

B, cesarean born infants

DELAYED Bacteroides colonization



Breastfeeding and a Vaginal Birth Healthier, Study Says

By: [Kylie McConville](#)

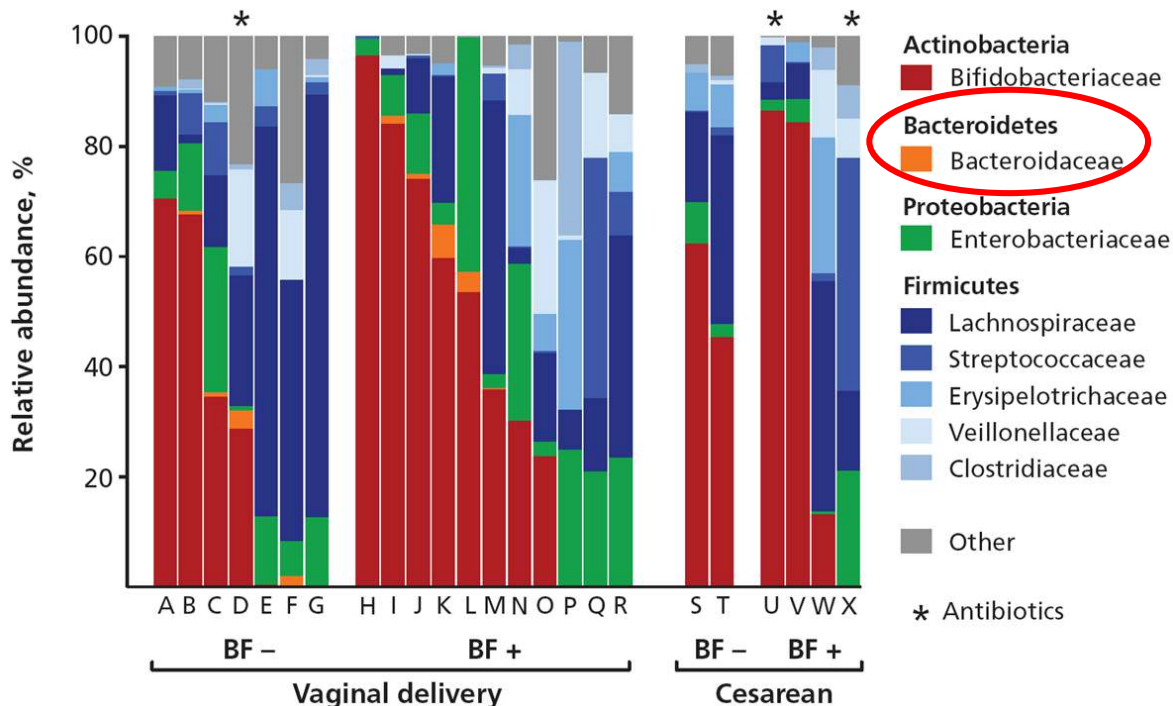


Photo: Thinkstock / The Bump

diabetes, cancer and even obesity, but they didn't know *how*. Their recent work suggests that at least part of that risk may be due to the microbes forming inside baby.

Gut microbiota of healthy Canadian infants: profiles by mode of delivery and infant diet at 4 months

Meghan B. Azad PhD, Theodore Konya MPH, Heather Maughan PhD, David S. Guttman PhD, Catherine J. Field PhD, Radha S. Chari MD, Malcolm R. Sears MB, Allan B. Becker MD, James A. Scott PhD, Anita L. Kozyrskyj PhD, on behalf of the CHILD Study Investigators



Researchers studied 24 babies and compared the bacteria found in *baby poop* samples collected when each infant was just 3 months old. They knew, prior to the study, that C-section deliveries could result in a higher risk of asthma,

BABIES 
everything
for **baby**
REGISTRY SWEEPSTAKES
One lucky registrant

Contributing emerging microbiome evidence to clinical practice

- Kozyrskyj AL, Bridgman SL, Tun MH. Impact of Pre and Postnatal Medical Interventions on Infant Gut Microbiota in: **Microbiota in Health and Disease: From Pregnancy to Childhood**, Browne P, Claassen E, Cabana M (eds). Wageningen Academic Publisher, 2017. **THIS CHAPTER IS OPEN ACCESS**
- Kozyrskyj AL, Tun HM, Bridgman SL. The Microbiome and Control of Weight Gain in: **Pediatric Obesity: Etiology, Pathogenesis & Treatment**, Freemark M (ed). Springer Publisher, USA, 2018

Chapter 4: Birth & Postnatal Interventions

- **Chapter 4 is organized by 4 themes:**
 - ▣ Birth mode (vaginal birth vs scheduled or emergency cesarean)
 - ▣ Intrapartum maternal antibiotic prophylaxis (IAP for GBS)
 - ▣ Extended hospitalization post birth
 - ▣ Postnatal infant IV and oral antibiotic treatment

- **Chapter table** organized by the same themes plus
 - ▣ Taxon category of major changes ie. *Enterobacteriaceae*,
Bacteriodaceae,

Chapter 4: TAKE HOME MESSAGE

- All 4 main early life exposures during infancy
 - ↓ Bacteroidetes species (see Rutayisire E et al systematic review), required for the maintenance of the gut mucin barrier
 - ↓ bifidobacteria
 - ↑ staphylococci
 - ↑ Clostridium (difficile)
 - ↑ Proteobacterial species
- Emergency cesarean and infant antibiotic use
 - ↑ enterococci

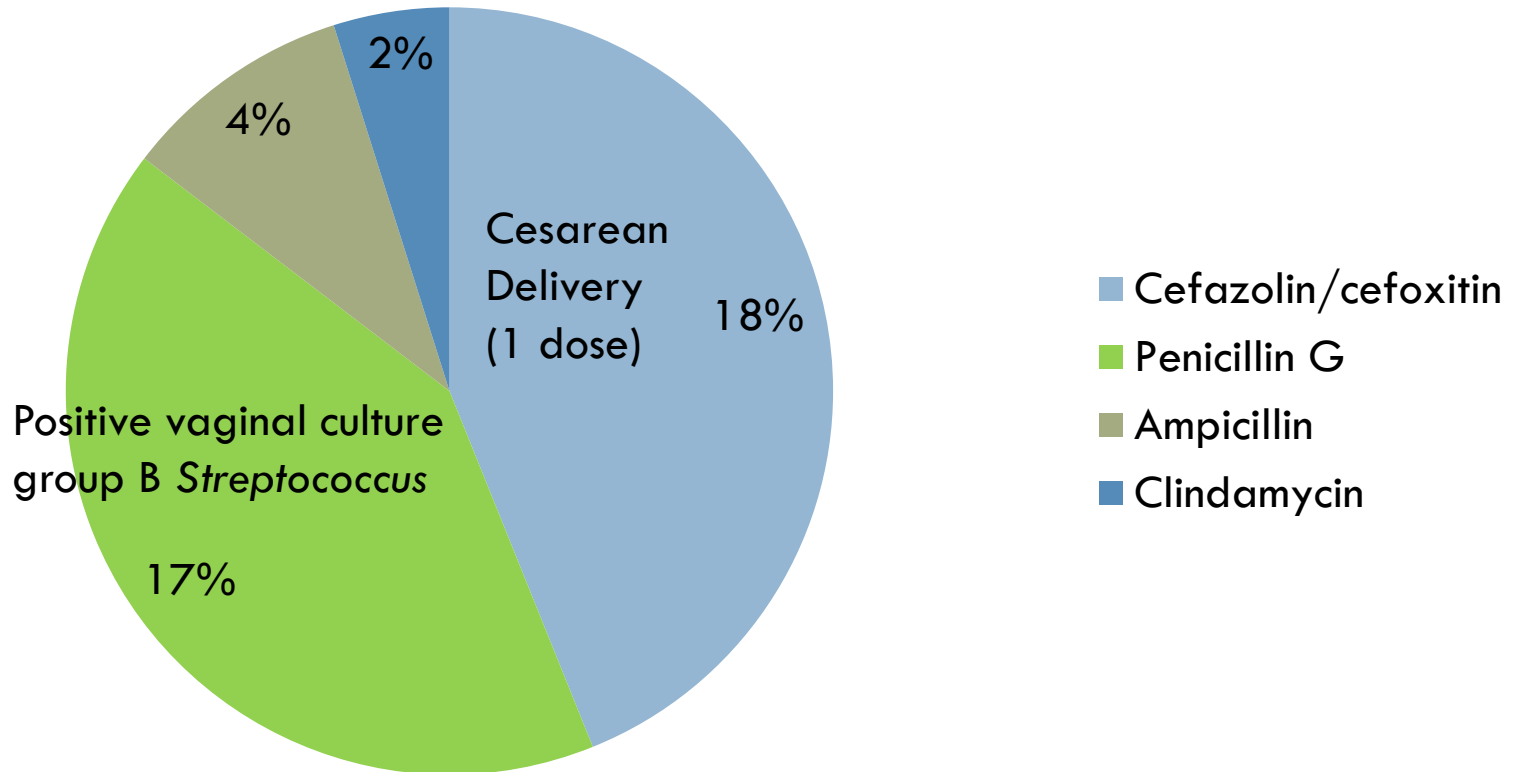
IAP, CESAREAN BIRTH & INFANT GUT DYSBIOSIS AT 3 MONTHS OF AGE

Azad et al. Impact of maternal intrapartum antibiotics, method of birth and breastfeeding on gut microbiota during the first year of life: a prospective cohort study. *BJOG* 2016;123(6):983-93



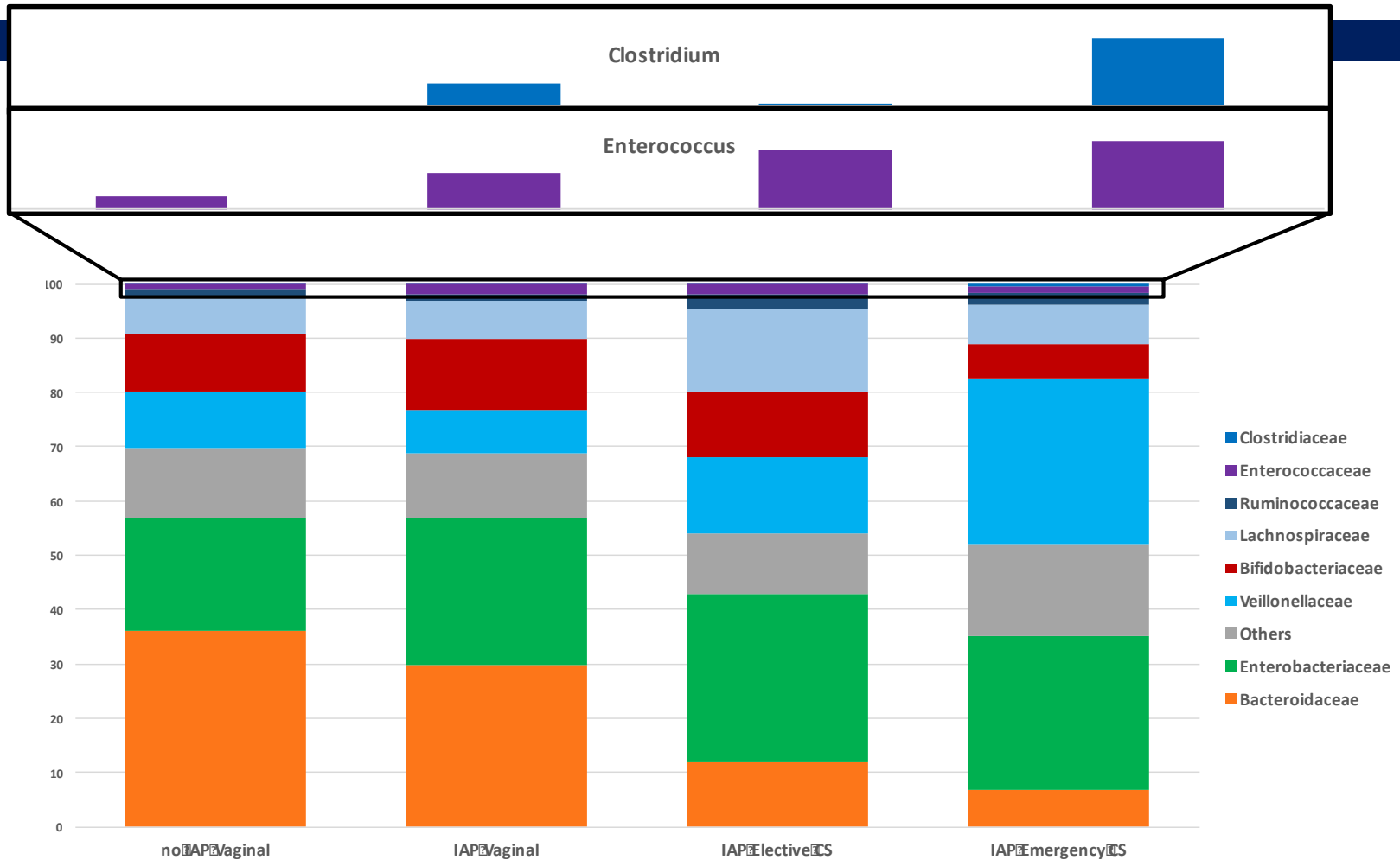
Canadian Healthy Infant Longitudinal Development
(CHILD) cohort

Almost 40% of infants are exposed to an antibiotic by the time they are born



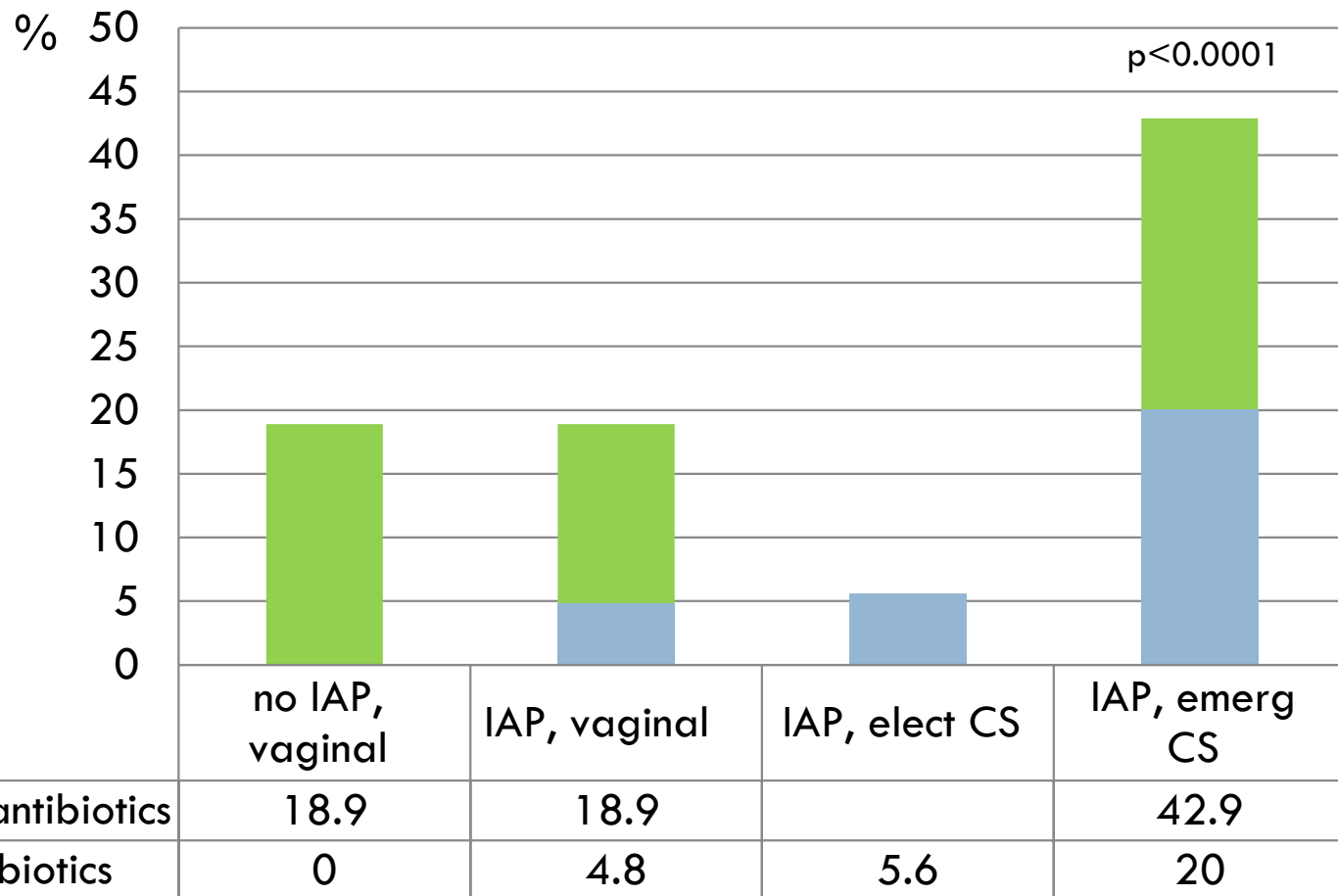
Persaud RR et al. Perinatal antibiotic exposure of neonates in Canada and associated risk factors: a population-based study. J Matern Fetal Neonat Med 2014: 1-6.

Bacteroidaceae abundance (orange) is reduced with IAP and CS. Other ↑s typical of antibiotic resistance.



Azad et al. Impact of maternal intrapartum antibiotics, method of birth and breastfeeding on gut microbiota during the first year of life: a prospective cohort study. BJOG 2016;123

The special case of emergency CS; mothers and newborns were more likely to receive antibiotics

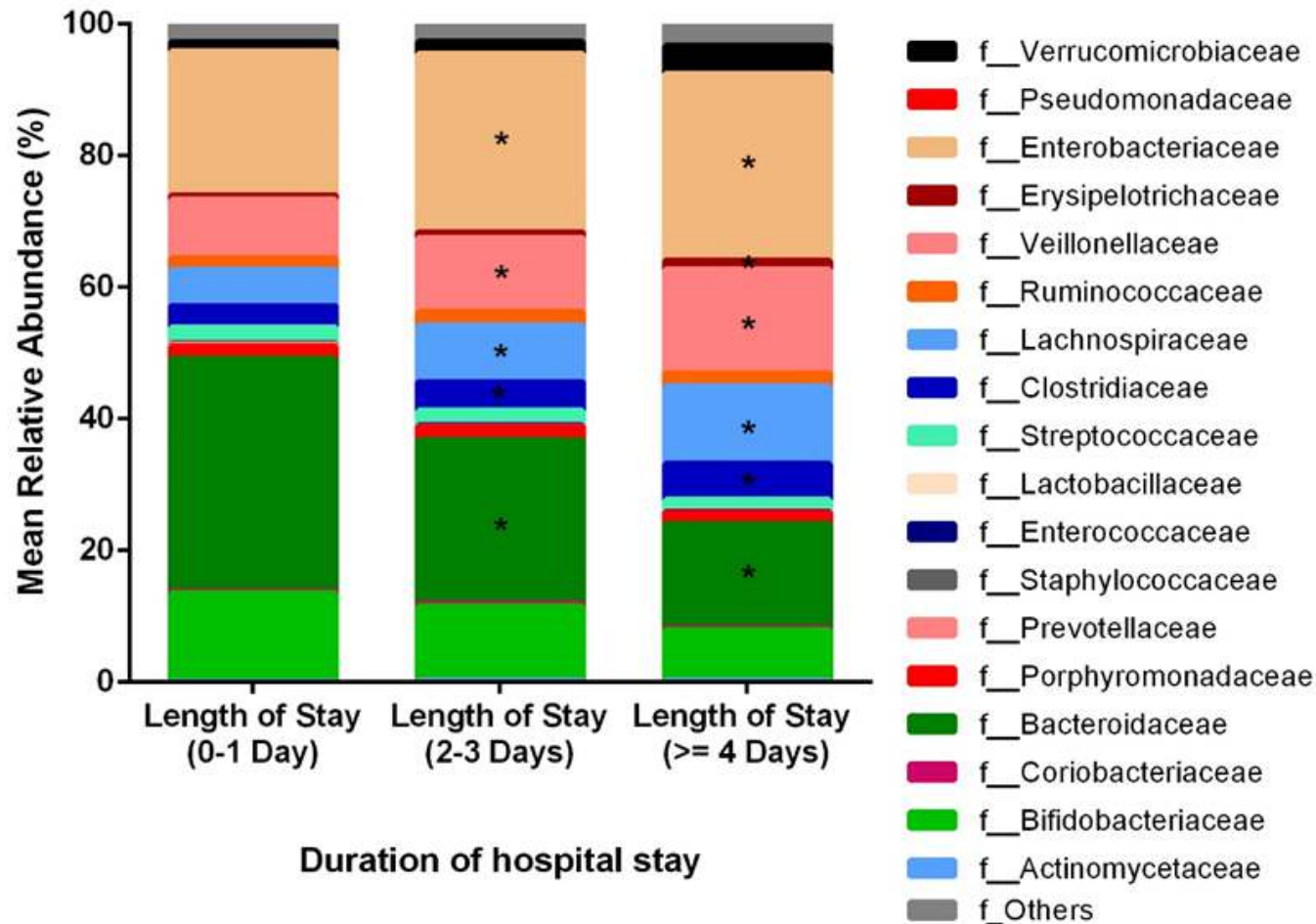


HOSPITALIZATION POST BIRTH & GUT DYSBIOSIS AT 3-4 MONTHS OF AGE



Canadian Healthy Infant Longitudinal Development
(CHILD) cohort

Prolonged hospital stay after birth: ↓ Bacteroidaceae but ↑ Lachnospiraceae, Enterobacteriaceae



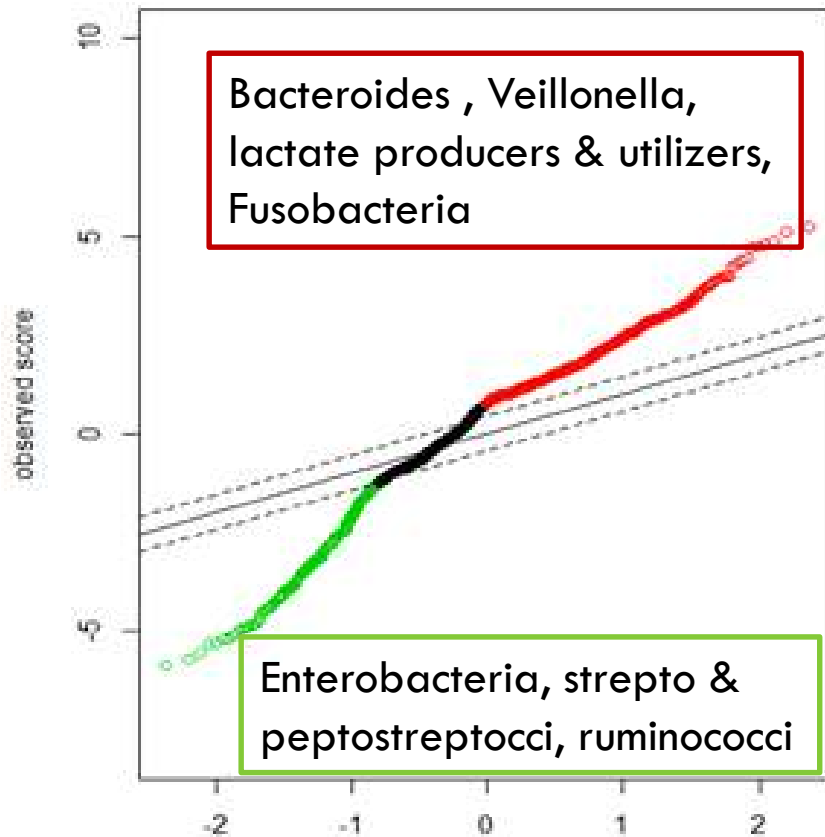
DEVIATION IN GUT MICROBIAL DEVELOPMENT IN LATER INFANCY WHEN NOT BORN VAGINALLY OR BREASTFED



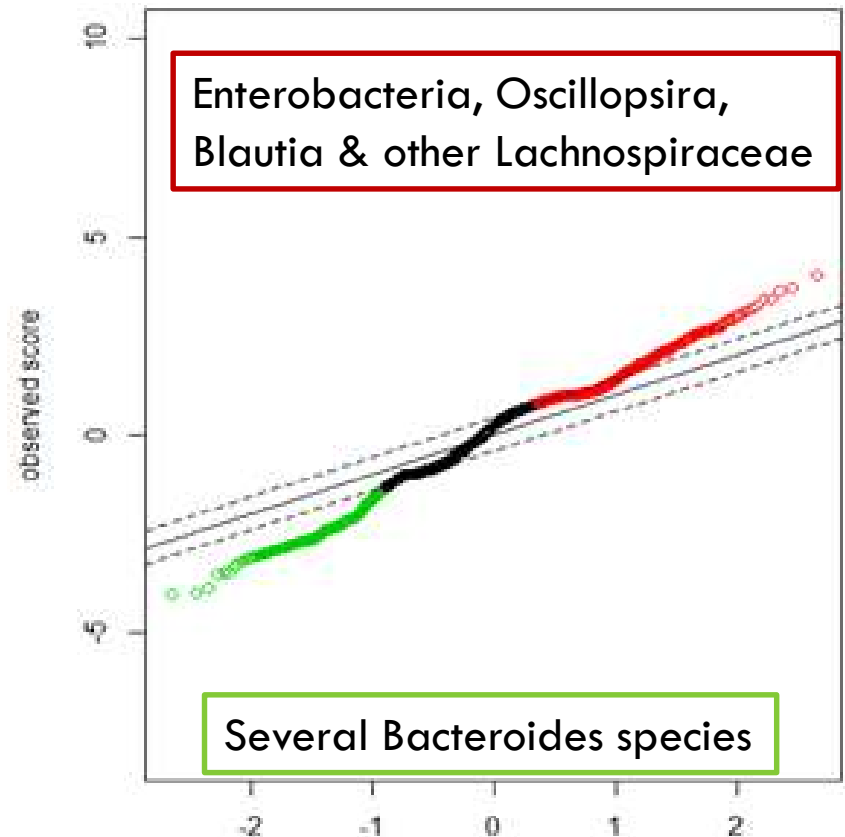
Canadian Healthy Infant Longitudinal Development
(CHILD) cohort

Few taxon ↓ or ↑ between 3 months -1 year of age in infants not breastfed = higher risk for food sensitization

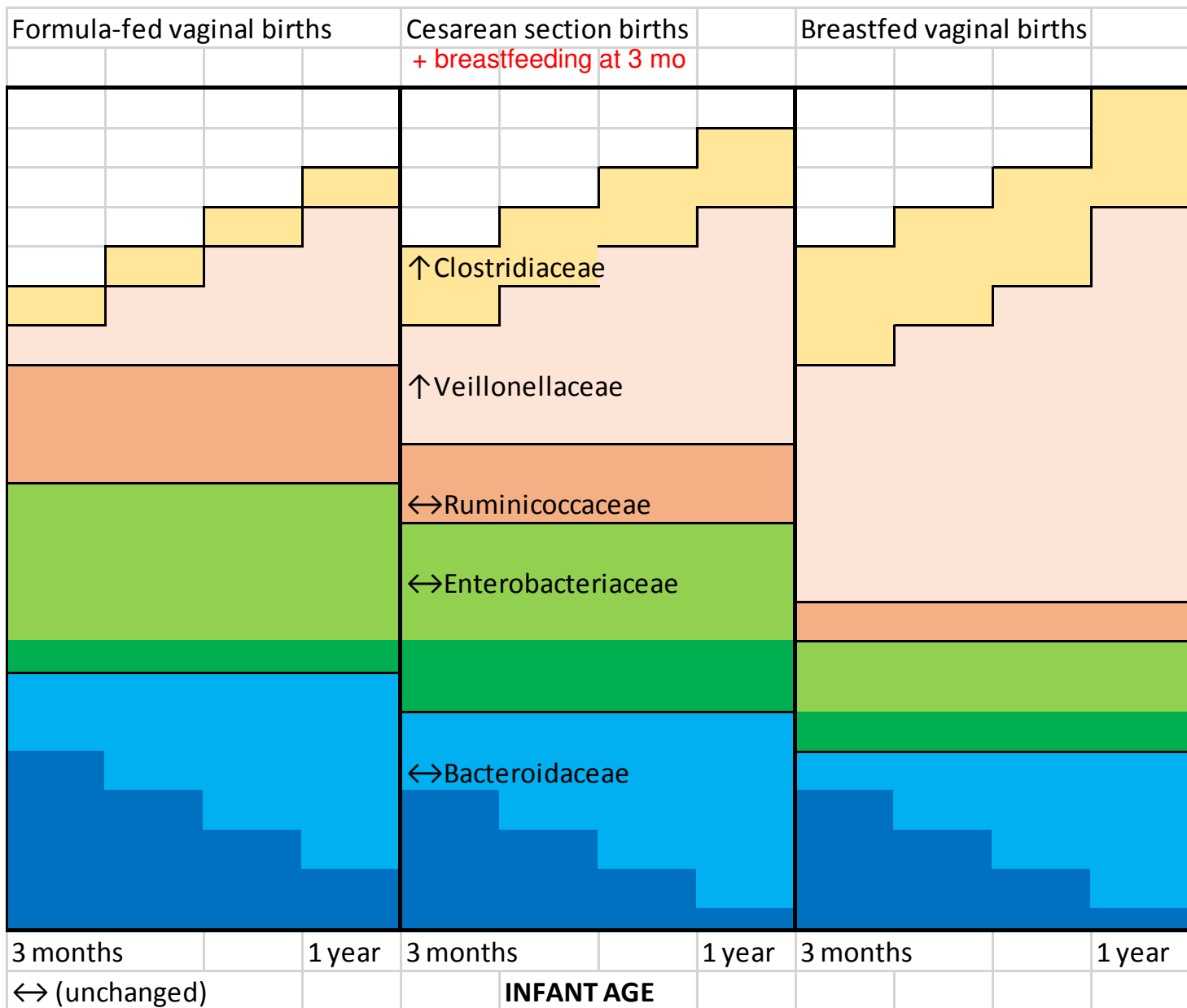
Vaginal-Breastfed-noAntibiotic use



Vaginal **noBreastfed** noAntibiotic use



Yasmin et al. Cesarean Section, Formula Feeding, and Infant Antibiotic Exposure: Separate and Combined Impacts on Gut Microbial Changes in Later Infancy. *Frontiers Pediatr* 2017

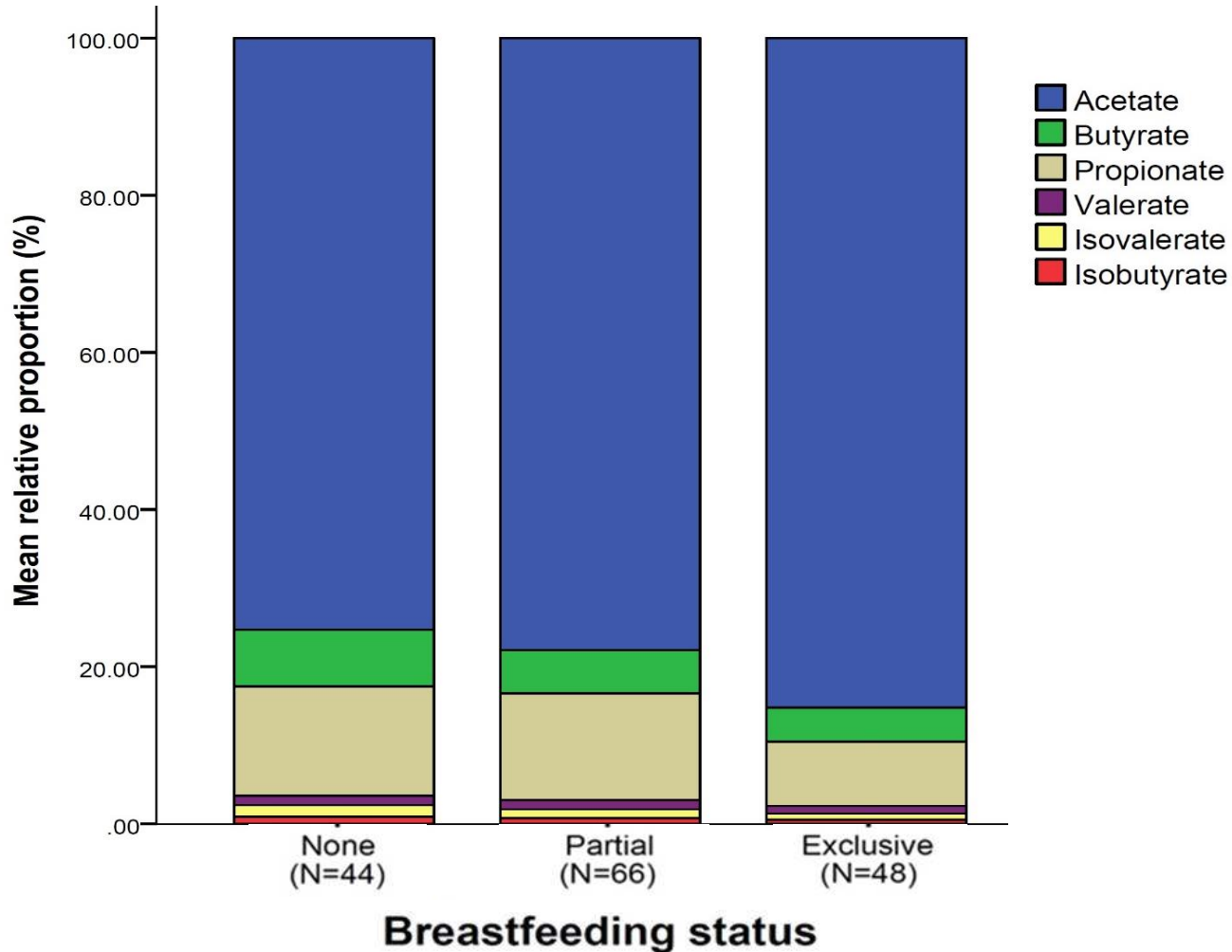


MODERATING EFFECT OF EARLY BREAST FEEDING IN CESAREAN DELIVERY



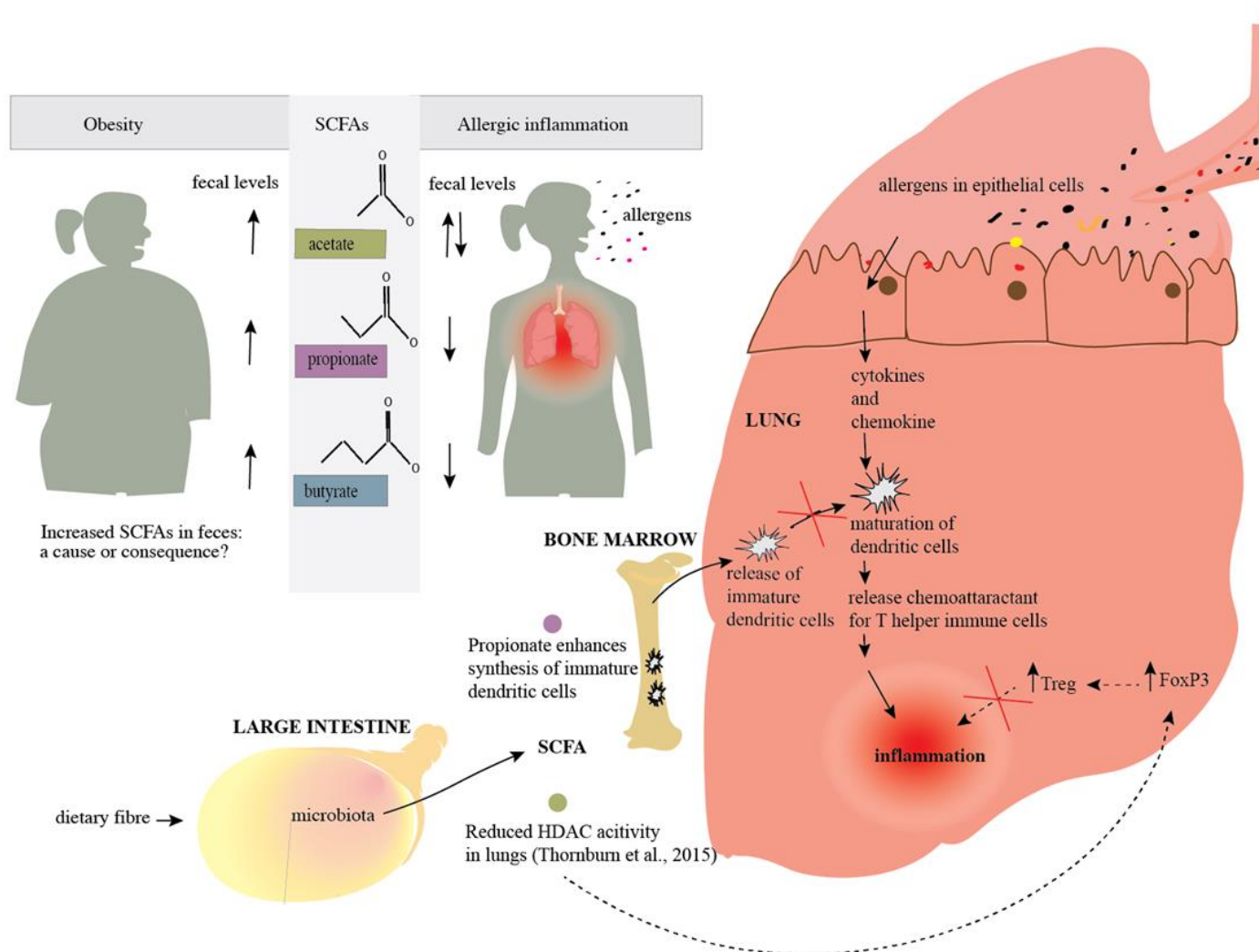
Canadian Healthy Infant Longitudinal Development
(CHILD) cohort

Short-chain fatty acid (SCFA) produced by gut microbes in infants breastfed vs not: Total SCFA ↓ ... **BUT** ↑ % acetate (Bridgman et al. *Frontiers Nutr* 2017;4)

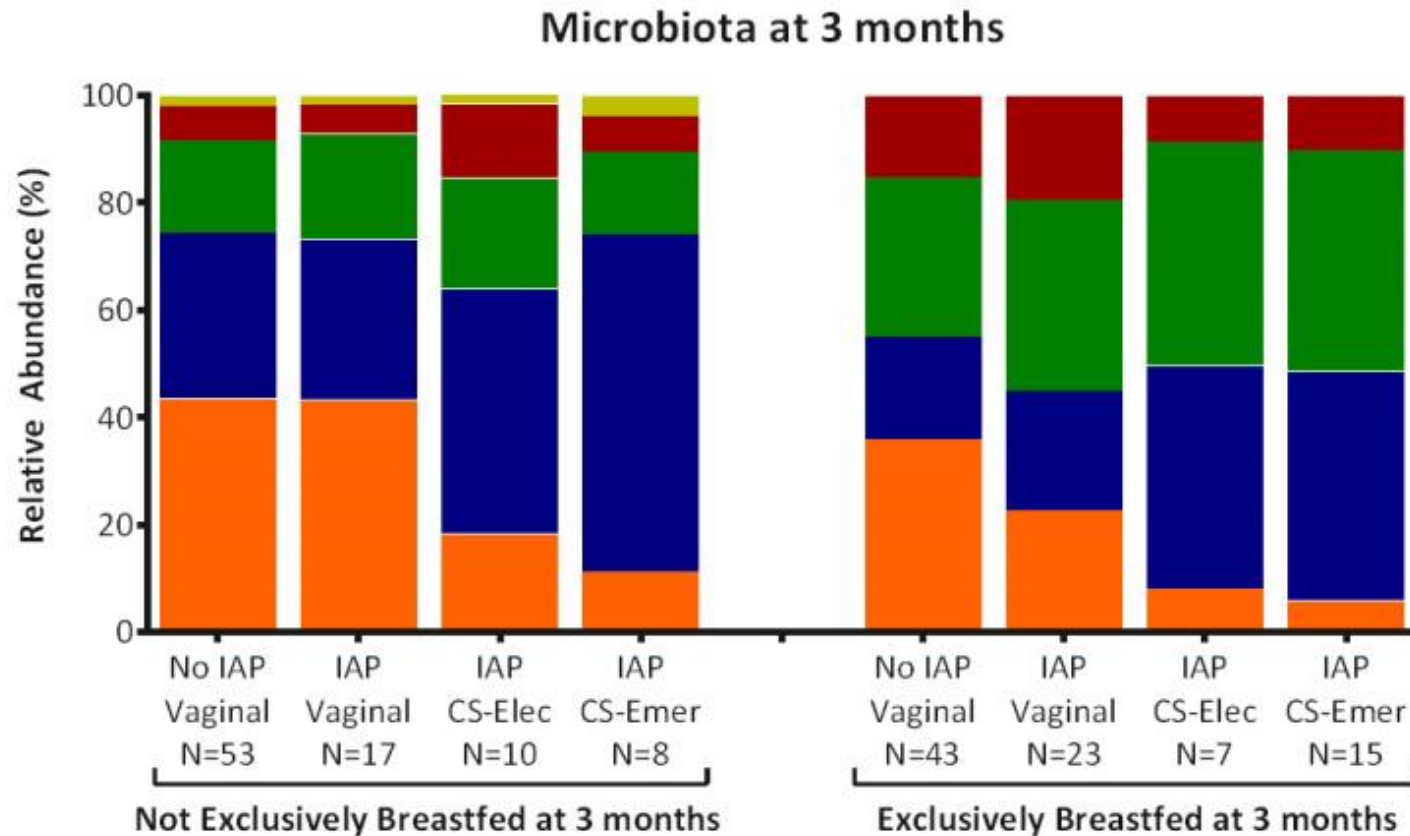


SCFA, acetate and propionate, reduce risk for allergic asthma in animal models

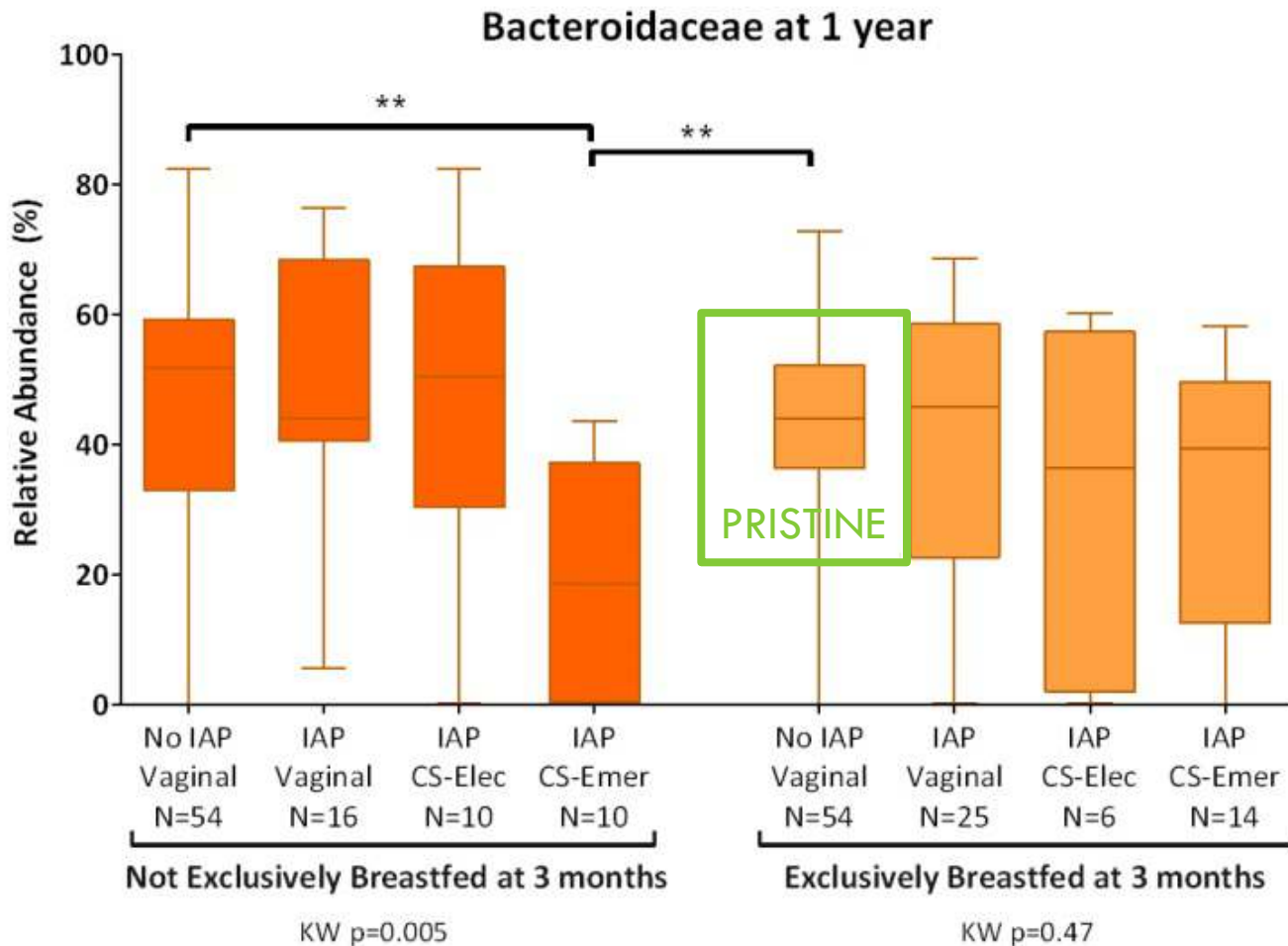
SCFA metabolites produced by gut microbes affect leptin & other satiety hormones, gluconeogenesis and lipid storage: [Kumari & Kozyrskyj. Obes Rev 2017; 18](#)



Cesarean section leaves an imprint (\downarrow Bacteroidetes in orange) at 3 months independent of breastfeeding

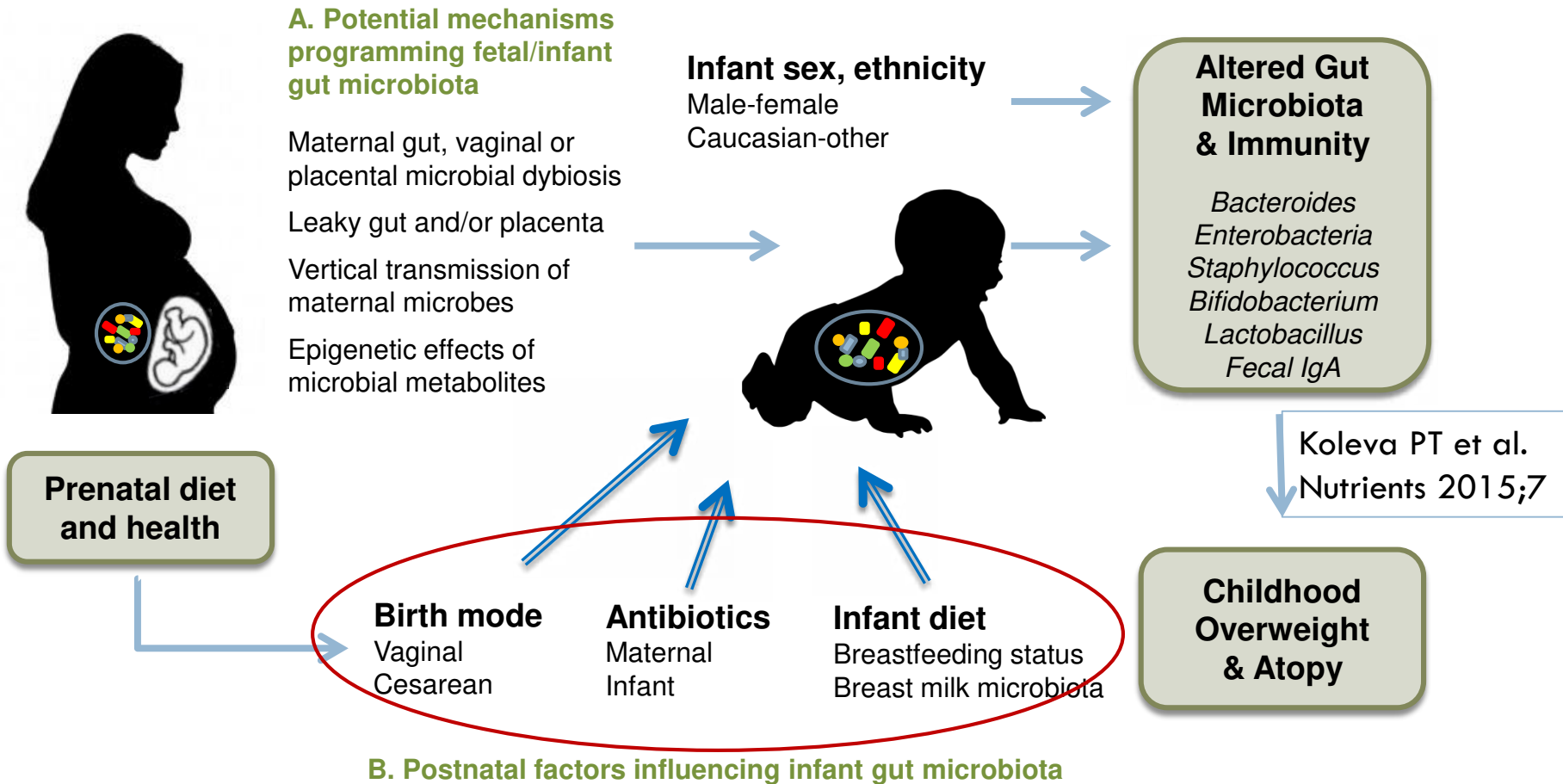


But in the absence of exclusive breastfeeding at 3 months
↓ Bacteroidaceae persists after emergency CS



AND Pregnancy matters.....

Kozyrskyj AL et al. Fetal programming of overweight through the microbiome: boys are disproportionately affected. J Dev Orig Health Dis 2016; 7: 25-34



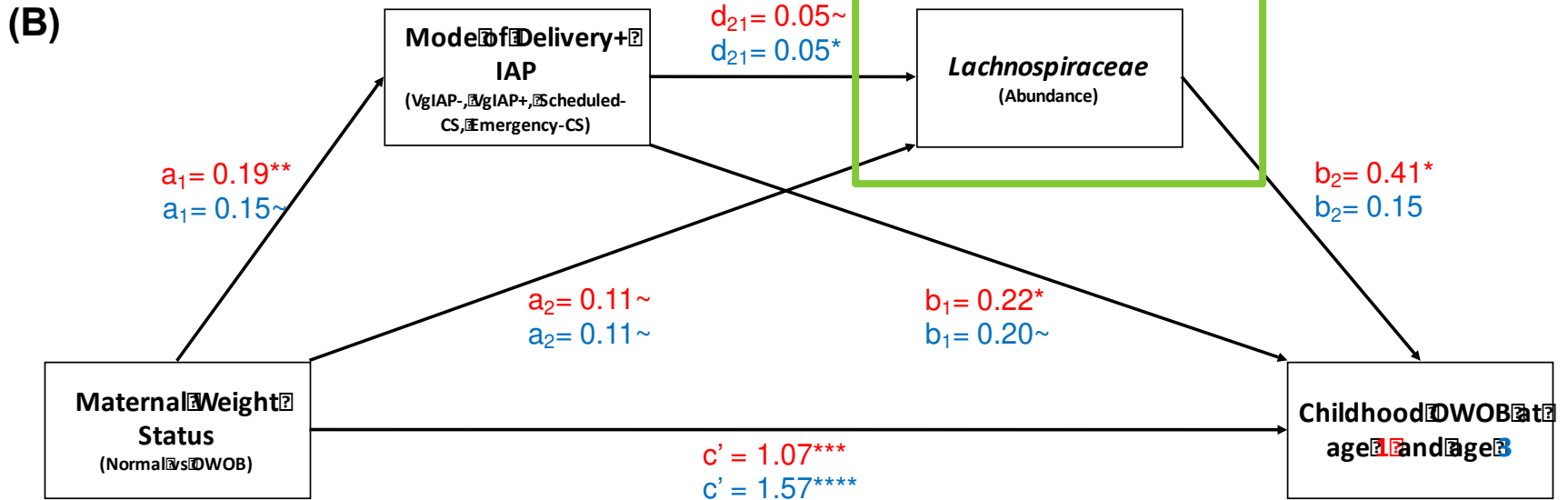
Koleva PT et al. Microbial programming of health and disease starts during fetal life. Birth Defects Res 2015; 105:265–277

PRENATAL INFLUENCE OF MATERNAL OVERWEIGHT, STRESS & ASTHMA



Canadian Healthy Infant Longitudinal Development
(CHILD) cohort

Birth mode and gut Lachnospiraceae JOINTLY mediate the association between maternal and child overweight



Bootstrap 95%CI for indirect effect ($a_1 d_{21} b_2$)

[0.0001, 0.0156]

[-0.0003, 0.0095]

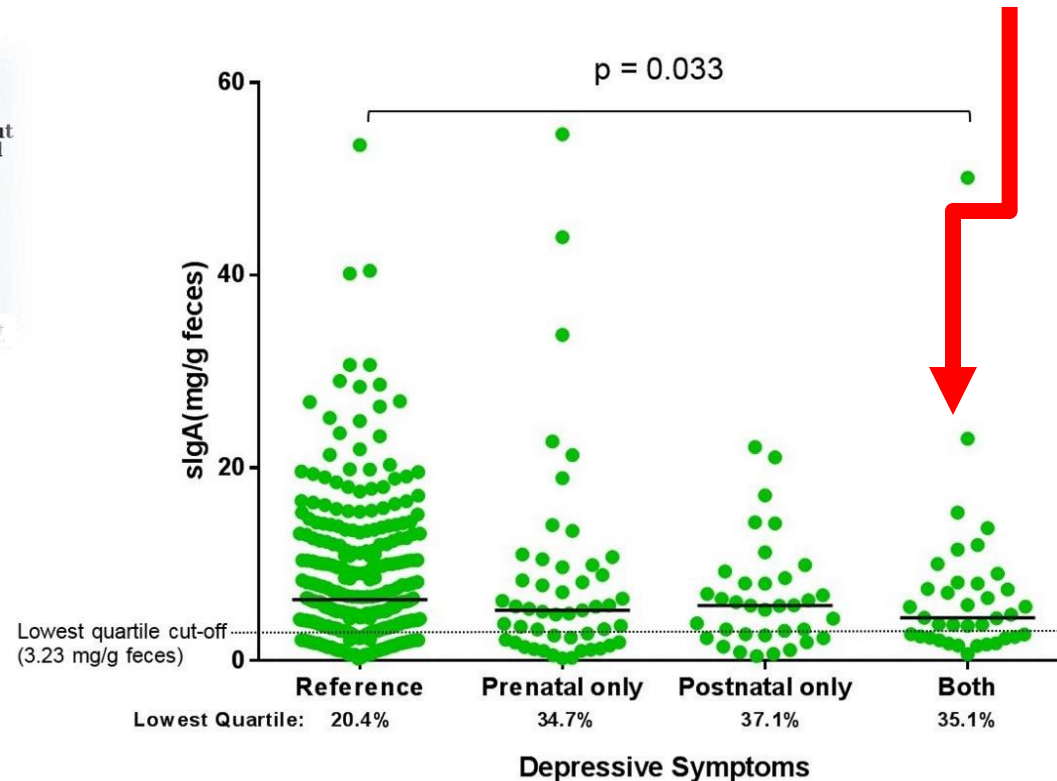
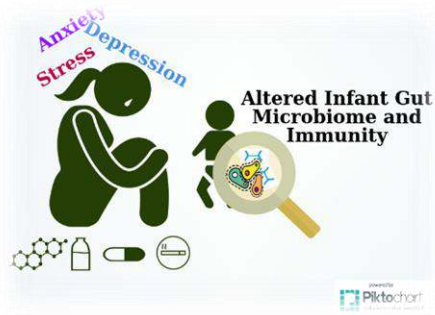
$\sim P < 0.1$, $*P < 0.05$, $**P < 0.01$, $***P < 0.001$, $****P < 0.0001$



Tun et al. Roles of birth mode and infant gut microbiota in intergenerational transmission of overweight and obesity from mother to offspring. JAMA Pediatr

Fecal sIgA at 3 months was lower in infants of mothers with distress during pregnancy and afterwards

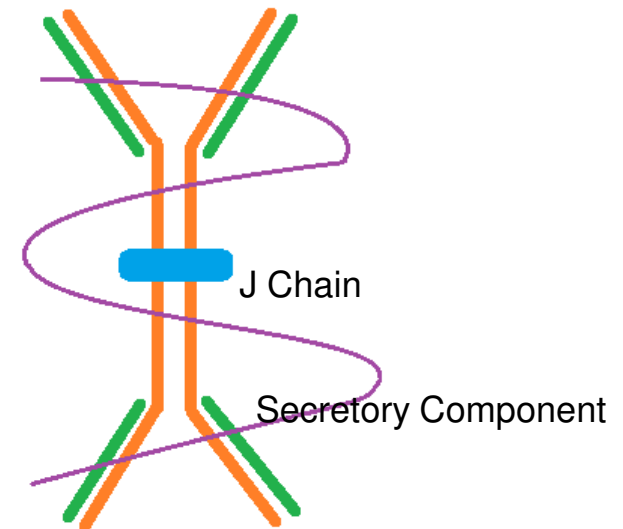
Kang et al. Maternal depressive symptoms linked to reduced fecal Immunoglobulin A concentrations in infants. *Brain Behav Immun* 2018;68:123-13



Secretory Immunoglobulin A measured in infant fecal samples at 3 months. It is critical to:

- Our gut immune defense system
- Immune system maturation in infants
- Induction of **oral tolerance** to food
- Reduced risk of **allergic diseases**

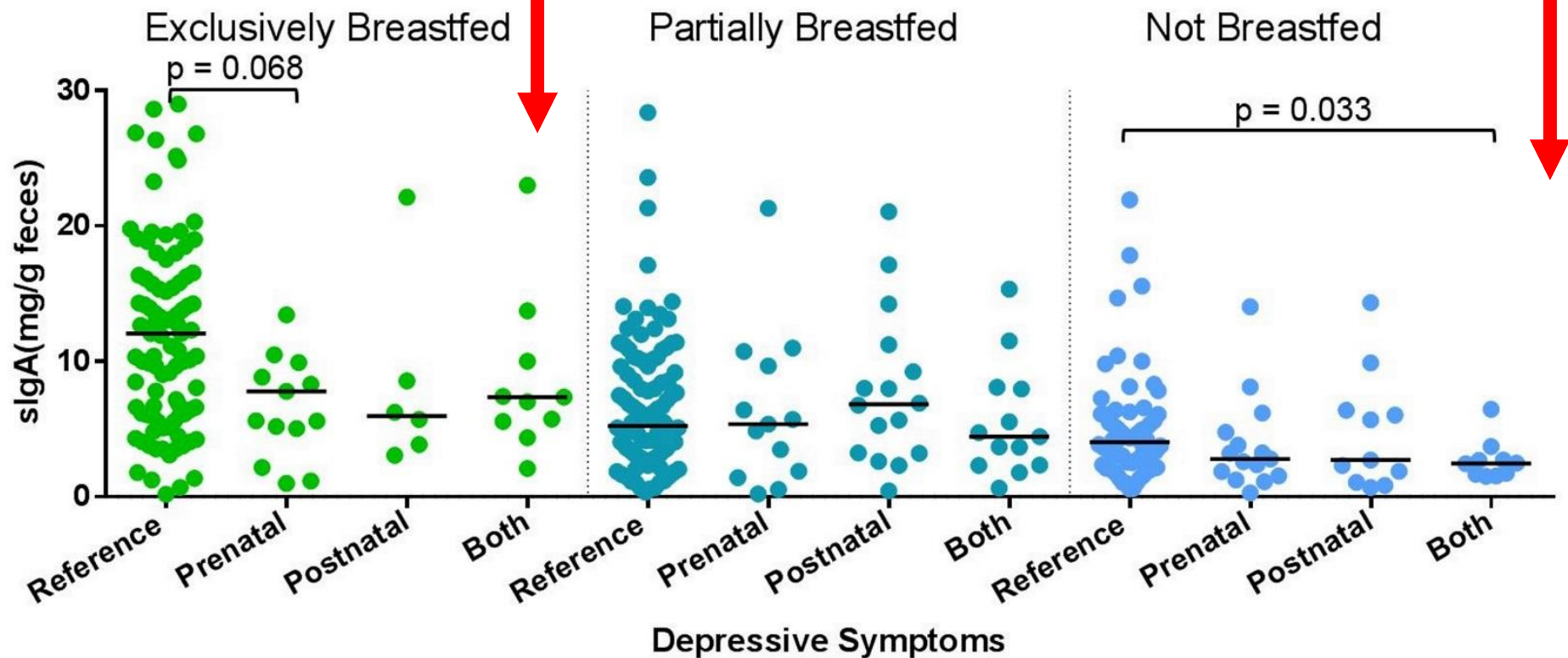
sIgA found in



Breast Milk

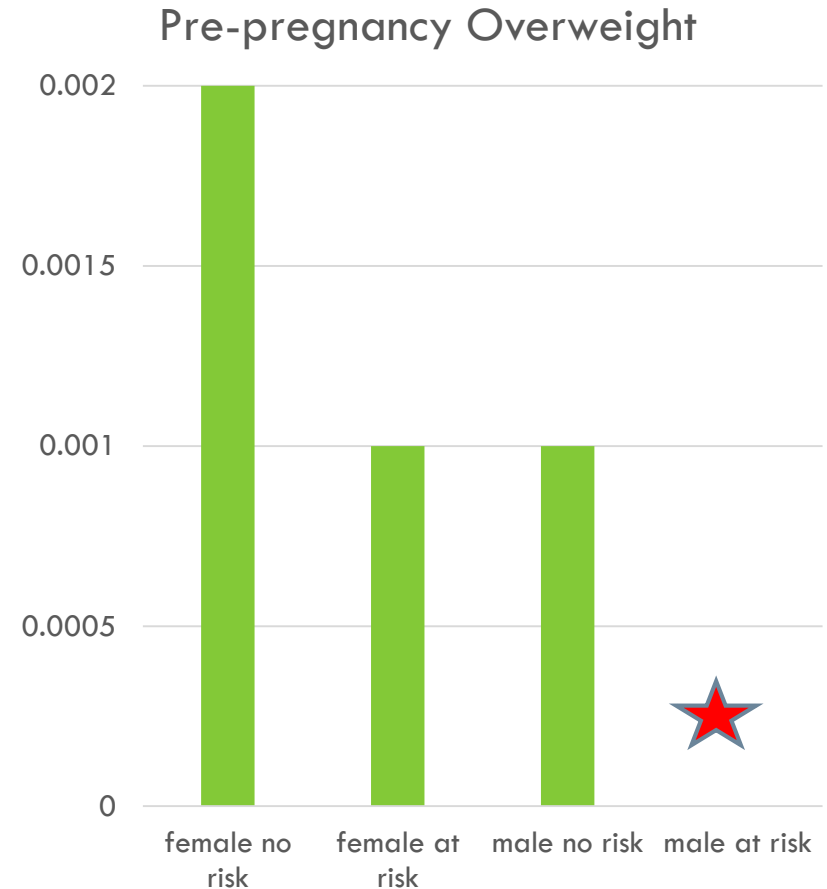
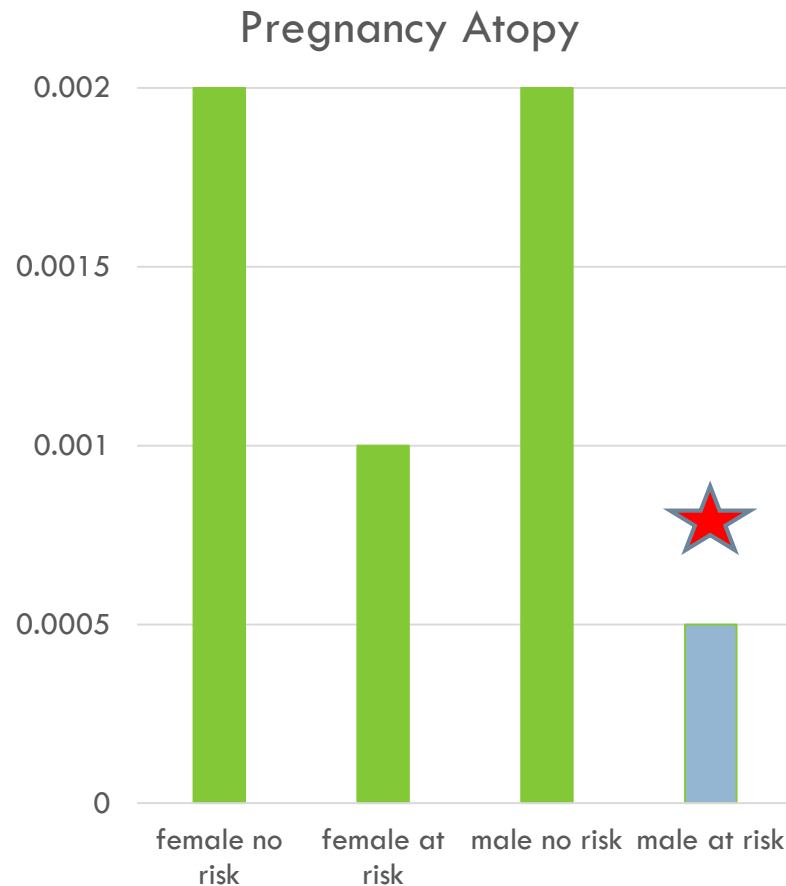
Bridgman et al. High fecal IgA is associated with reduced *Clostridium difficile* colonization in infants. *Microbes Infect.* 2016;18:543-9.

Especially among infants not breastfed but also seen in breastfed infants



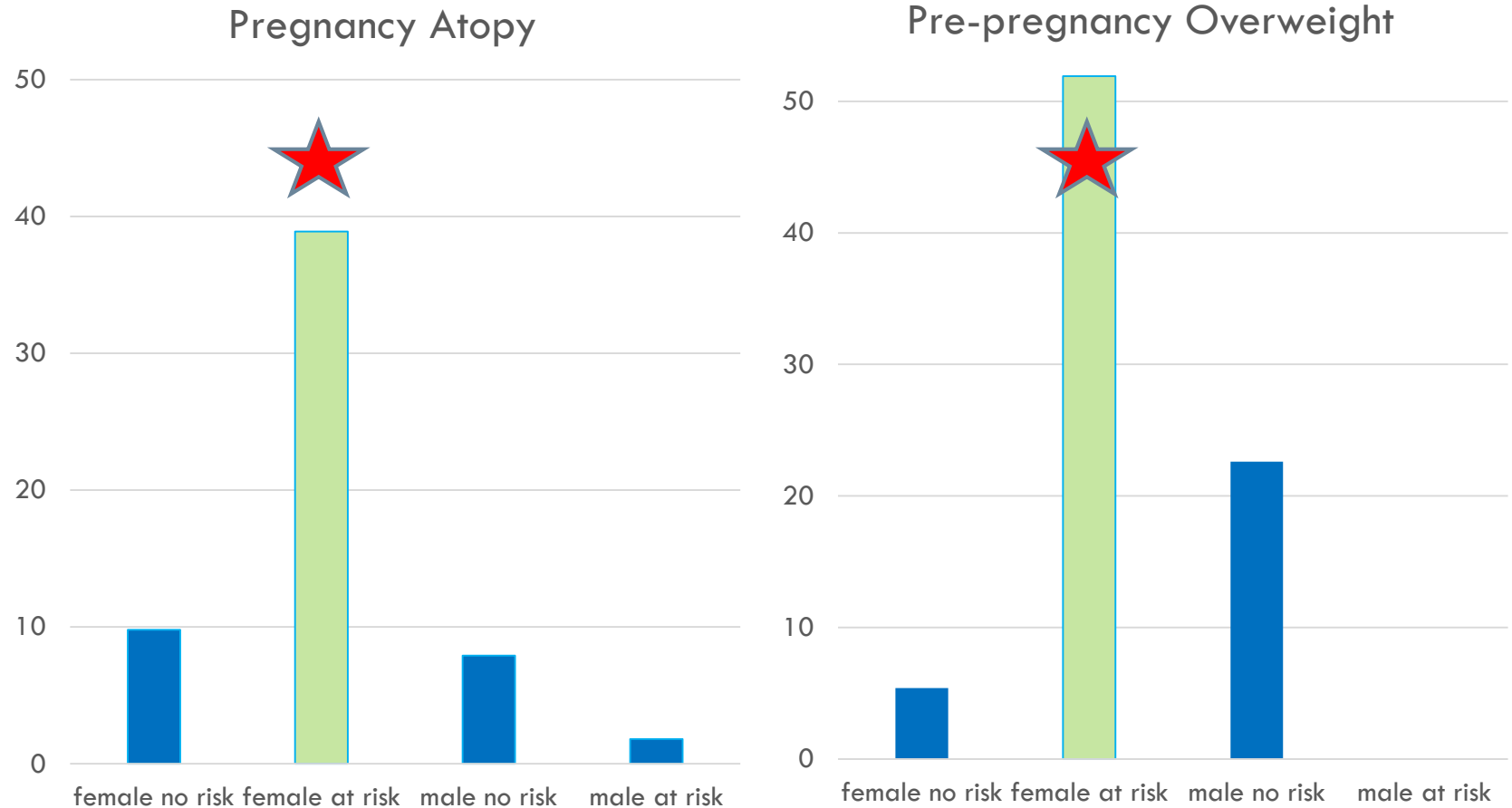
Kang et al. Maternal depressive symptoms linked to reduced fecal Immunoglobulin A concentrations in infants. *Brain Behav Immun* 2018;68:123-13

Independent of breastfeeding, ↓ fecal abundance of Lactobacillaceae at 3 months in **male** infants born to women with **asthma during pregnancy** (at risk for future asthma & overweight)



Koleva et al. Sex-specific impact of asthma during pregnancy on infant gut microbiota. Eur Resp J 2017;50

↑ fecal abundance of Bacteroidaceae at 3 months in **female** infants born to women with **asthma during pregnancy** (at risk for future asthma & overweight)



Koleva et al. Sex-specific impact of asthma during pregnancy on infant gut microbiota. Eur Resp J 2017;50

↓ BACTEROIDETES +
↑ ENTEROBACTERIA =
FOOD SENSITIZATION

Azad et al. Infant gut microbiota and food sensitization: associations in the first year of life. *Clin Exp Allergy* 2015; 45(3): 632-643.

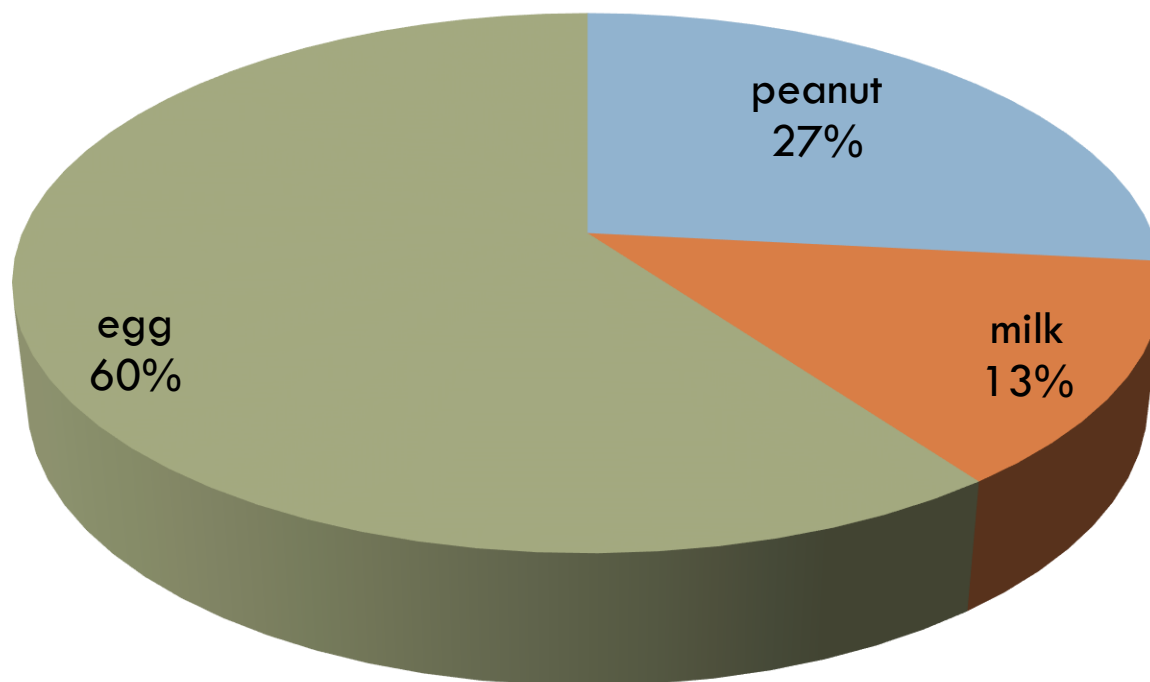
Cited in: US National Academies of Sciences, Engineering, and Medicine. 2016. *Finding a Path to Safety in Food Allergy: Assessment of the Global Burden, Causes, Prevention, Management and Public Policy*. Washington DC



Canadian Healthy Infant Longitudinal Development (CHILD) cohort

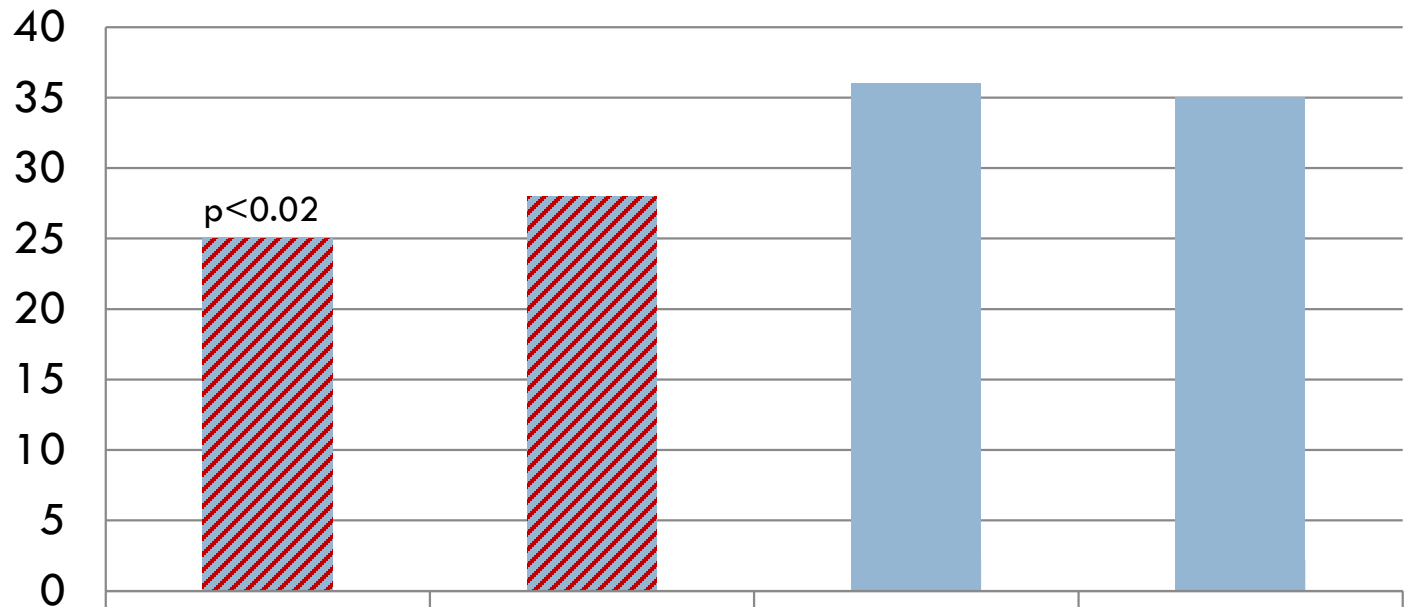
Food sensitization in infants is a 2-fold risk for asthma & allergic disease !

Food allergen



Species richness was significantly lower at 3 months but not 1 year in sensitized infants

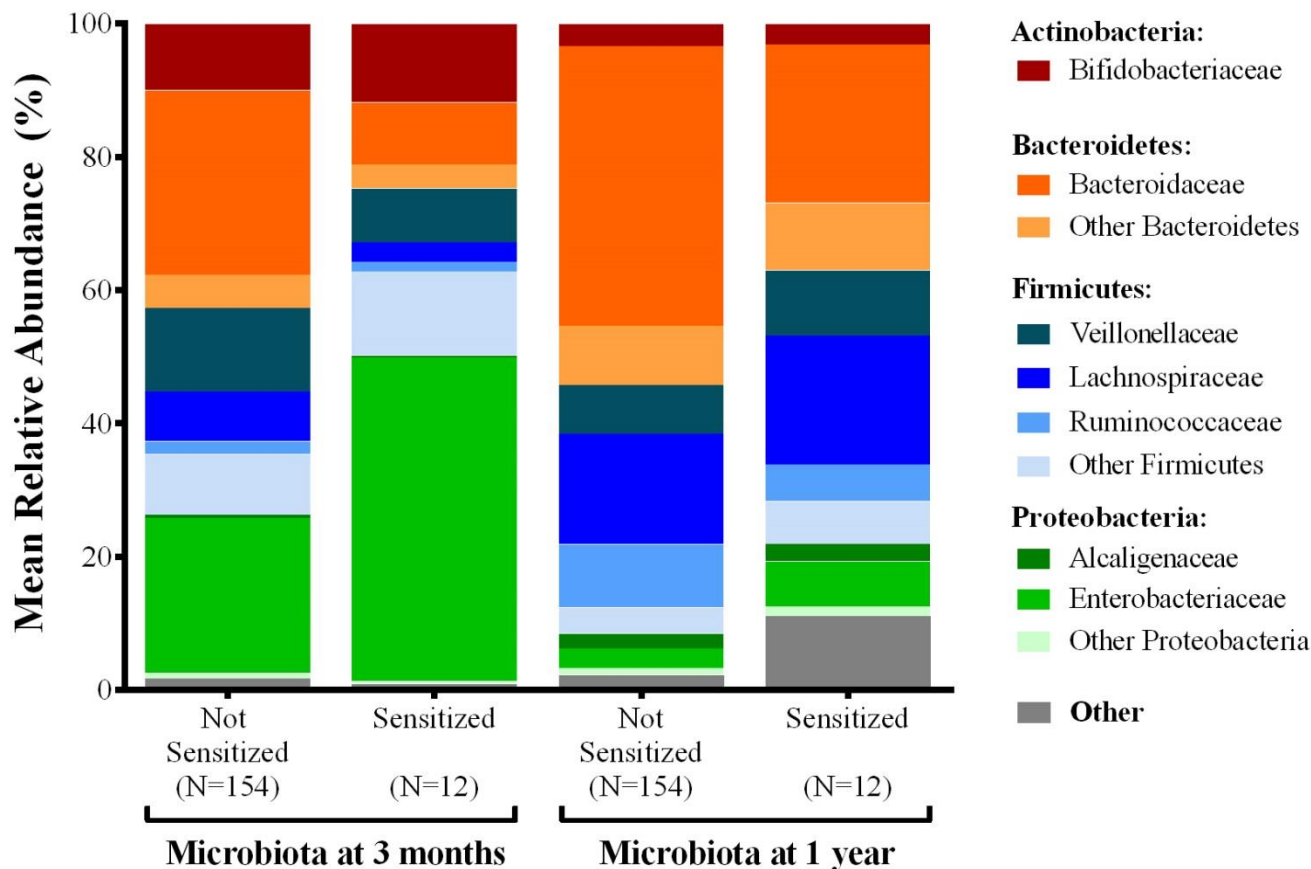
Chao1 species richness at 3 months



■ Shannon diversity	1.6	1.9	2.3	2.2
■ Chao1 richness	25	28	36	35

Fewer Bacteroidaceae/more Enterobacteria (\uparrow E/B) in food sensitized infants at 1 year

A) All Infants [N=166]



E/B ratio and low species richness associations with sensitization are independent of each other

Likelihood of Sensitization at 1 Year

Model Adjustments Microbiota Measure	Microbiota at 3 months	Microbiota at 1 year
	aOR (95% CI)	aOR (95% CI)
Mutual adjustment for microbiota only		
E/B Ratio (per quartile increase)	2.02 (1.07 - 3.80)*	4.14 (1.54 - 11.11)*
Chao1 Richness (per quartile increase)	0.45 (0.23 - 0.87)*	- -
Adjusted for any antibiotic exposure before sample		
E/B Ratio (per quartile increase)	2.13 (1.10 - 4.13)*	4.03 (1.50 - 10.82)*
Chao1 Richness (per quartile increase)	0.45 (0.23 - 0.87)*	- -
Adjusted for caesarean delivery		
E/B Ratio (per quartile increase)	2.21 (1.13 - 4.31)*	4.35 (1.57 - 12.11)*
Chao1 Richness (per quartile increase)	0.42 (0.21 - 0.85)*	- -
Adjusted for exclusive breastfeeding at 3 months		
E/B Ratio (per quartile increase)	1.80 (0.93 - 3.50)	4.02 (1.48 - 10.88)*
Chao1 Richness (per quartile increase)	0.46 (0.24 - 0.89)*	- -

Acknowledgements



Lead: Anita Kozyrskyj: kozyrsky@ualberta

Data & Sample Collection

CHILD Study Staff & Families

Project Management

Sarah Bridgman, Sylva Donaldson



DNA Extraction, Sequencing & Bioinformatics (Toronto)

Co-PI James Scott, Tedd Konya, David Guttman

Trainees & Research Assistants

Hein Tun, Liane Kang, Usha Rai, Brittany Matenchuk, Kelsea Drall

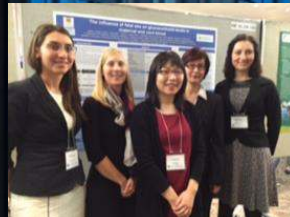
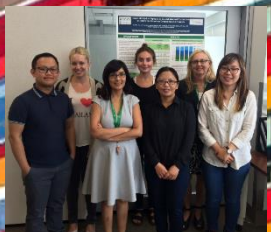
Funding (Postdoctoral Fellowships)

CIHR, Banting, AllerGen NCE, AIHS,
75th Anniversary FoMD



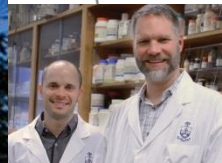
Toronto (microbial profiling): James Scott, Tedd Konya, Nadia Morales Lizcano, David Guttman, Sylva Donaldson, Julia Copeland

Edmonton: Sarah Bridgman, Hein Tun, Bolin Chen, Mon Tun, Liane Kang, Usha Rai, Brittany Matenchuk, Kelsea Drall, Cara McLean, Radha Chari, Catherine Field, Irina Dinu, Puish Mandhane, Andrea Haqq,



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LOOKING FOR NEW POSTDOCS





The Ladies of Canmore

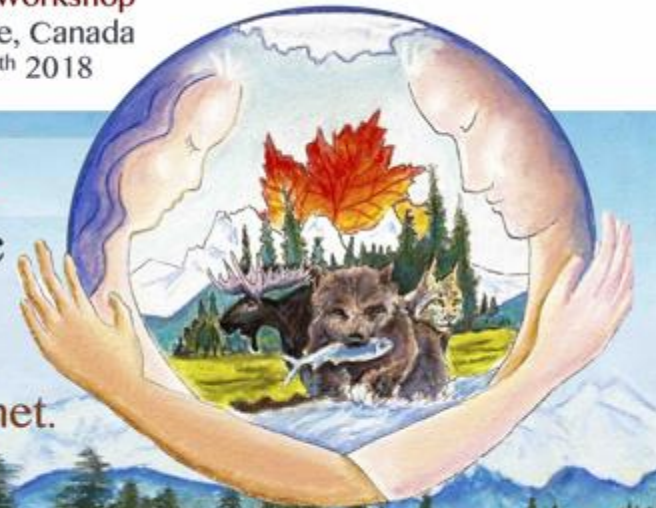
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GLOBAL NETWORK

7th Annual Workshop
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CHILD: Microbiota profiling methods

- Fecal samples at **3 months** from 1 000 full-term infants sequenced with MiSeq at V4
- Sequences clustered at 97% similarity against the Greengenes database (closed-picking) to identify Operational Taxonomic Units (OTUs)
- Rare OTUs (<0.0001 relative abundance) excluded
- Data were rarefied to 15,000 sequences per sample
- OTU relative abundance and diversity indices (Chao1, Shannon) were generated by the QIIME program