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Institute Science ◀ Health ◀  
Food ◀ Innovation

# NCDs and personalised nutrition: The role of the microbiome

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# *...Treasure your exceptions...*

“If your results don’t make physiological sense, think and think again! You may have made a mistake (in which case own up to it) or you may have made a discovery. Above all, **treasure your exceptions**. You will learn more from them than all the rest of your data.”

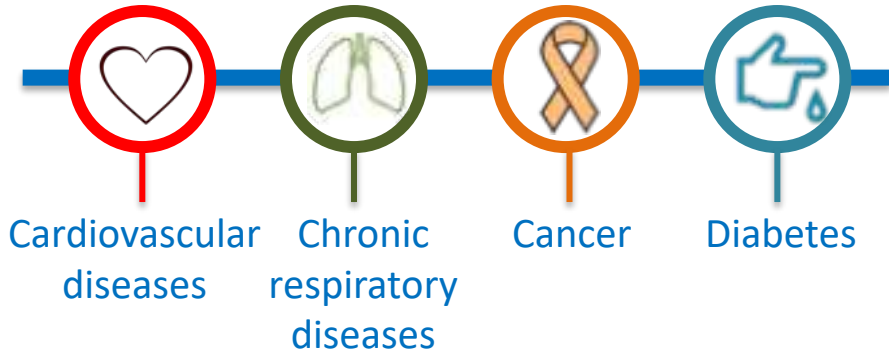
—Elsie Widdowson, 1906-2000



This is very true when we try to understand why people respond differently to diets

Forms the basis for personalized nutrition in the prevention of NCDs

# NONCOMMUNICABLE DISEASES (NCDs)



NCDs are responsible for

**71%**

of all deaths worldwide  
(41 million people)



Every **2 seconds**

someone aged 30 to 70 years  
**dies prematurely** from NCDs





**4.7 million**  
people in the UK have diabetes<sup>1</sup>.

**4 million**  
people in England have diabetes.



By 2035

**more than 5 million**

people will be diagnosed with  
diabetes in England.<sup>11</sup>

Compared to people without diabetes, people with  
**Type 2 diabetes** are



**nearly 2.5 times**  
more likely to have  
a heart attack



**more than 2.5 times**  
more likely to experience  
heart failure



**2 times**  
more likely to  
have a stroke.

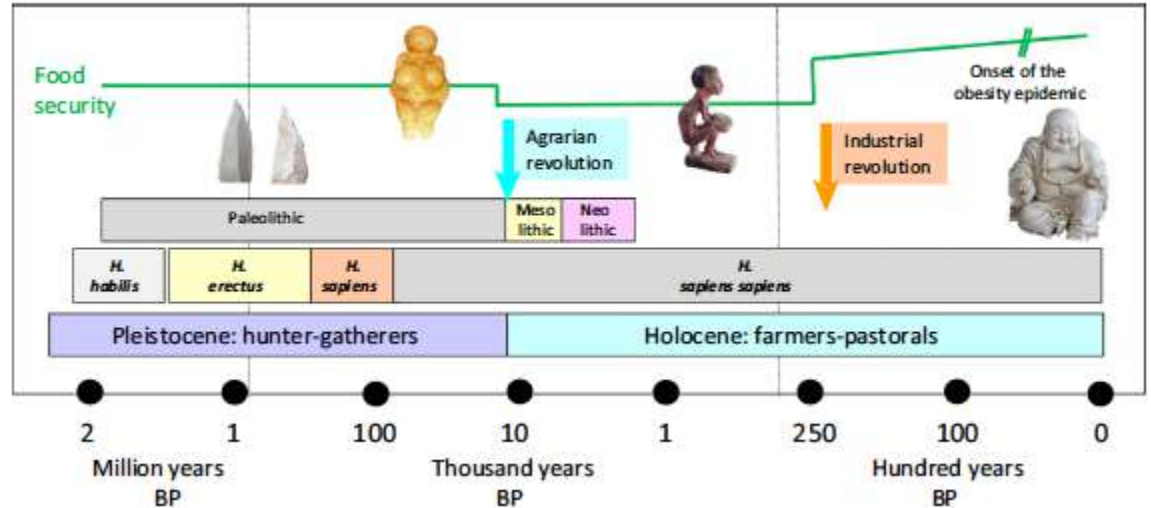
**Over 10 million**

people are at increased risk of  
Type 2 diabetes in England.<sup>23</sup>



# Diet & Lifestyle changes through human evolution

- Over nutrition with foods high in fat, processed meat, sugars, salt and refined grains
- Low in fruit and vegetables
- Limited physical activity
- Starting in the early 1980s, rapid increases in the prevalence of overweight and obesity began in high income countries.



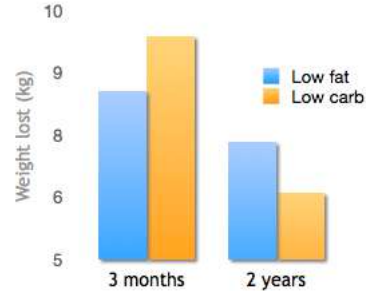
# Ensuring the message is out



- Campaigns have successfully made people aware of healthy eating (reached 99% of mothers with children <10y)
- But the message is generalised (eg healthy vs unhealthy foods)

Successful in educating, but does it translate to effect?

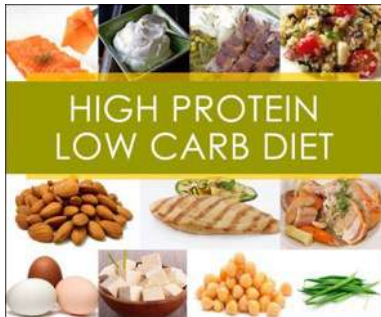
# Is there a clear message for consumers?



Foster *et al.* (2010) *Ann Intern Med.* 153(3):147-57

**Effect of Low-Fat vs Low-Carbohydrate Diet on 12-Month Weight Loss in Overweight Adults and the Association With Genotype Pattern or Insulin Secretion: The DIETFITS Randomized Clinical Trial.**

Gardner *et al.* (2018) *JAMA.* 2018;319(7):667-679.



**A carbohydrate-reduced high-protein diet acutely decreases postprandial and diurnal glucose excursions in type 2 diabetes patients**

Samkani *et al.* (2018) *British Journal of Nutrition*, 119: 910–917

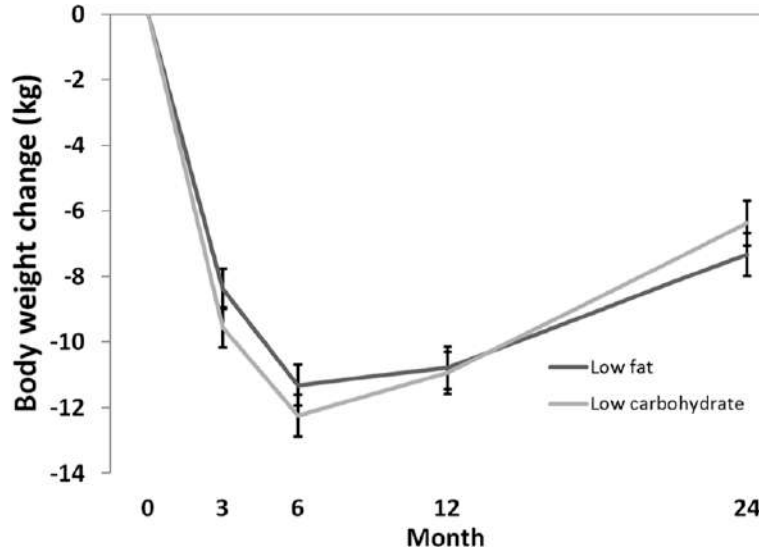


No grains or legumes (**low fibre**)

**Increased satiety** in healthy (Bligh *et al.*, 2015)/**improved glucose tolerance** in obese (Frassetto *et al.*, 2009)

**Iodine deficiency** (Manousou *et al.* 2018, *Eur J Clin Nutr.* 72:124-129)

# Does a clear message even exist?



N=307 obesity patients

- 2y later **no difference in weight loss**

...**BUT**

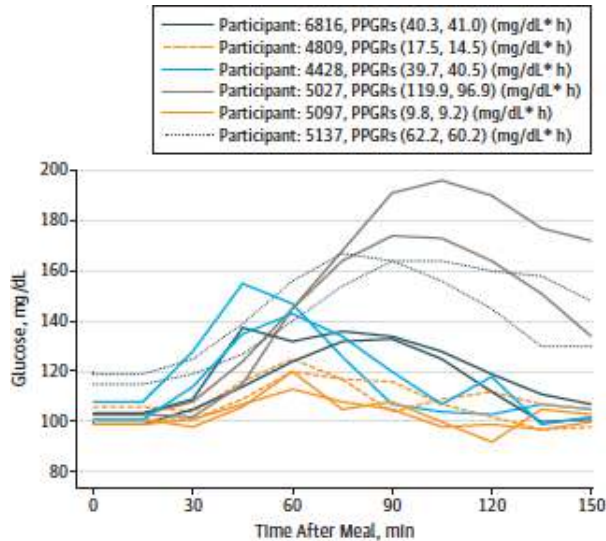
Baseline fasting plasma glucose and insulin were strong predictors of weight loss

- **High FI** : lost more on low-fat diet
- **Low FI**: lost more on low-carb



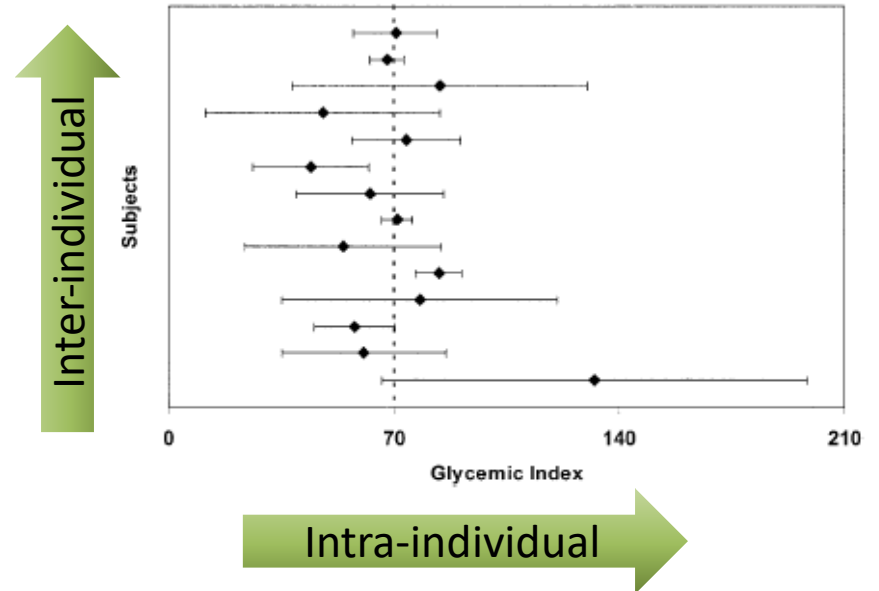
# A personalized approach... is it necessary?

**Inter-individual** variability in glycemic response to the same meal



Mendes-Soares *et al.* (2019) JAMA Network Open. 2:e188102

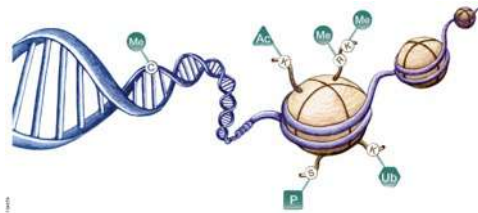
**Inter- & intra- individual** variability in glycemic response to the same food



Vega-Lopez *et al.* (2007) Diabetes Care 30:1412–1417

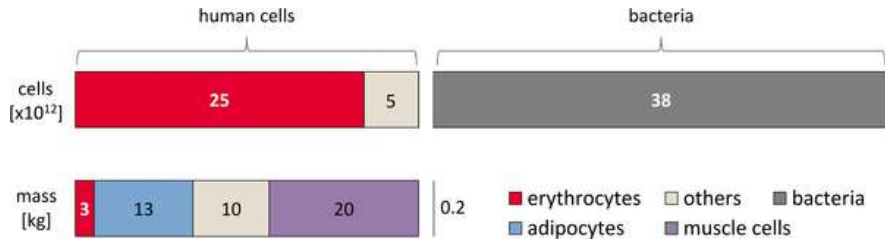
# Sources of variability

- **GENETICS** (SNPs, Mutations, CNVs)
  - **EPIGENETICS**
    - **ENVIRONMENT & LIFESTYLE** (Exercise, Sleep, Stress)
      - **GUT MICROBIOTA**

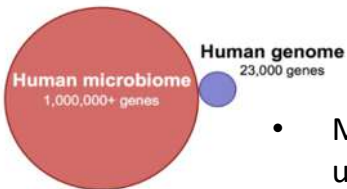
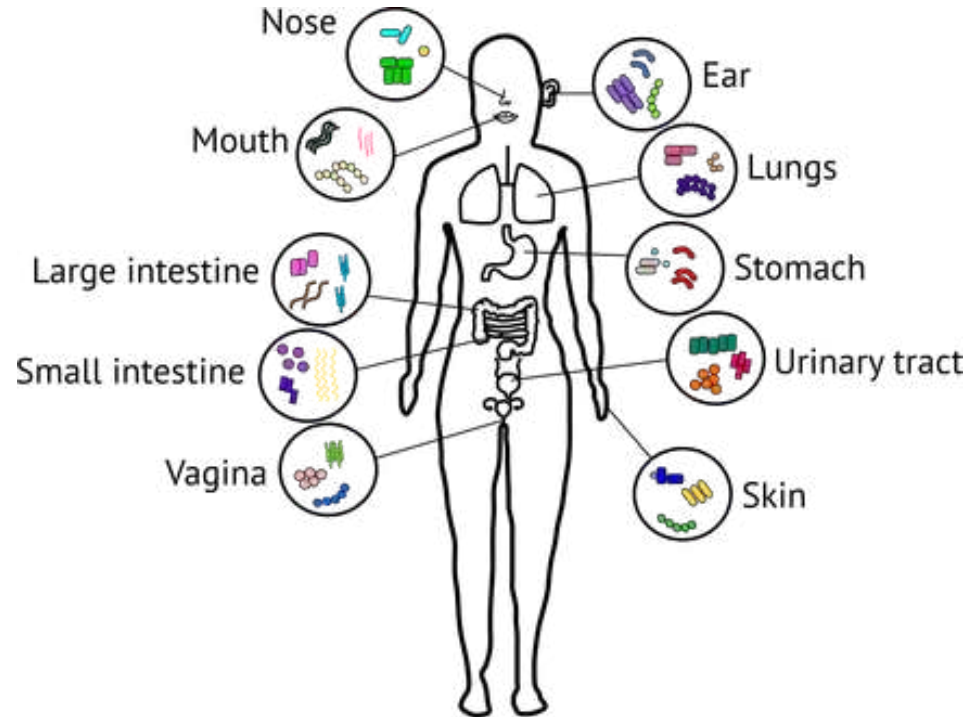


# The human microbiota: we are home to highly diverse and dynamic microbial communities

- Are we more human or microbial?
  - 1:1 ratio
  - 10:1 ratio (nucleated cells)



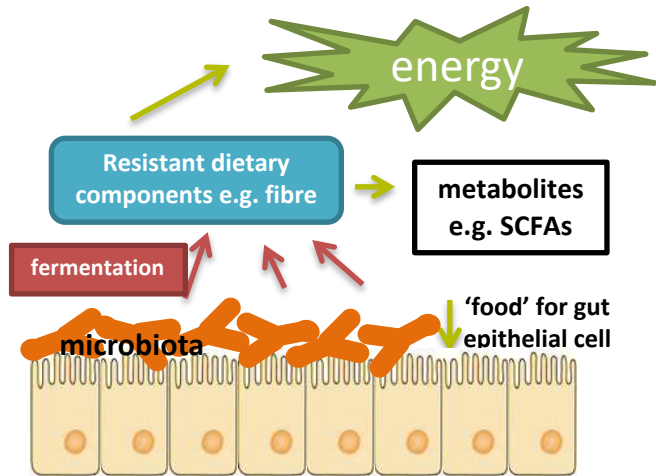
Sender et al, 2016. PLOS Biology 14(8): e1002533.



- Microbiome contains **150X** more unique genes than human genome

## Nutrient metabolism

- Fermentation of CHO and glycans such as resistant starch, inulin, lignin, pectin, cellulose and fructo-oligosaccharides



### Butyrate

- main **energy** source for human colonocytes
- activates intestinal **gluconeogenesis** | beneficial effects on glucose and energy homeostasis
- prevents gut microbiota **dysbiosis**

### Propionate

- regulates **gluconeogenesis** and satiety signalling through interaction with the gut fatty acid receptors

### Acetate

- essential metabolite for the **growth** of other bacteria
- reaches peripheral tissues where it is used in **cholesterol metabolism and lipogenesis**
- plays a role in central **appetite regulation**

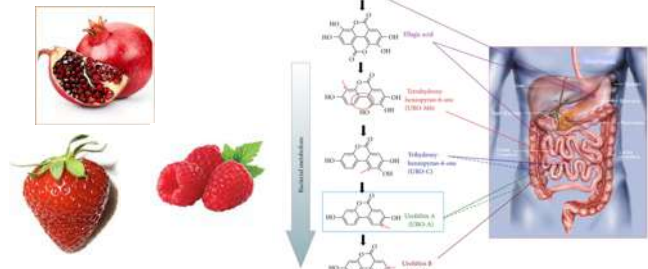
# Function of the gut microbiota – other

## Nutrient metabolism

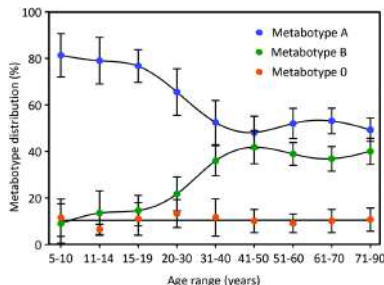
- Protein metabolism (eg conversion of L-histidine to histamine)
- Synthesis of vitamin K and several components of vitamin B

## Non-nutrient metabolism

### Polyphenols



Espin *et al.* (2019) Evidence-Based Complementary and Alternative Medicine. Article ID 270418



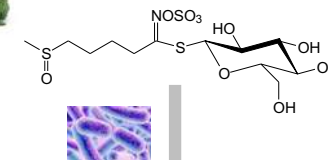
Cortes-Martin *et al.* (2018) Food & Function

### Glucosinolates



4-methylsulphonylbutyl glucosinolate –

#### Glucoraphanin



4-methylsulphonylbutyl isothiocyanate –

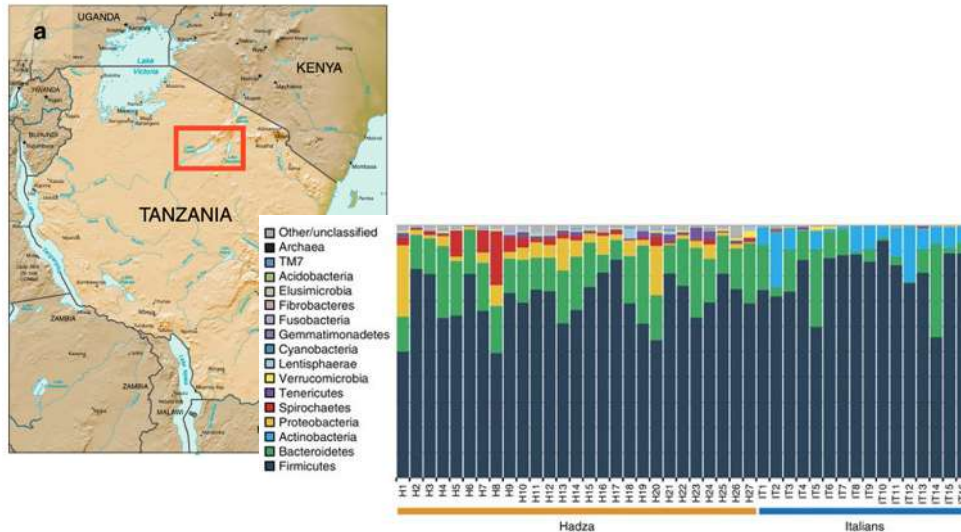
#### Sulforaphane

Traka *et al.* (2014) Drug Discovery Today

# Diet modifies gut microbiota

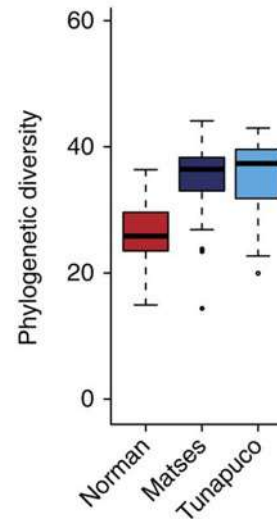
## Hadza community of hunter-gatherers

- wild foods (meat, honey, baobab, berries and tubers)
- High fibre



Schnorr *et al.* (2014). Nat Communications, 5:3654

- **Matses** | remote hunter-gatherer population from the Peruvian Amazon | **tubers, plantain, fish, limited game**
- **Tunapuco** | traditional agricultural community from the Andean highlands | **stem tubers (potatoes, oka, mashua), fruit, meat**
- **Norman, Oklahoma, US** | typical US urban-industrialized lifestyle | **processed foods, bread and prepackaged meals**



Matses and Tunapuco are enriched in genus *Treponema*, an efficient carbohydrate metaboliser

Obregon-Tito *et al.* (2015). Nat Communications, 6:6505

## Indirect evidence

- Obese individuals show decreased bacterial diversity and gene richness
- Composition of the gut microbiota has the potential to affect energy harvest (capacity for fibre-utilization)
- Secretion of hormones affecting appetite (gut-brain axis)

How can we use information on gut microbiota to understand WHICH foods are doing WHAT to WHOM?

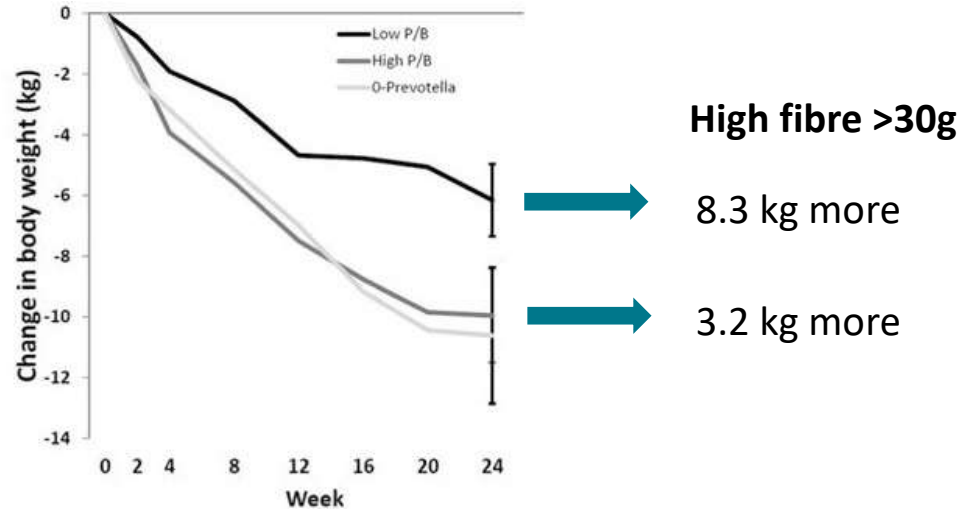
New sequencing technologies are revolutionising the field



# Evidence from human studies (RCTs) – Taxonomic information

Obese individuals stratified by **Prevotella**–to–**Bacteroides (P/B)** ratio (n=52) on low calorie diets (500 kcal/d) for 24w

- **Prevotella** | high CHO and fibre diets
- **Bacteroides** | high protein and animal fat

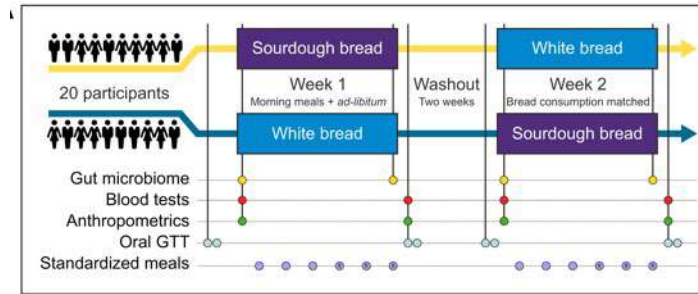




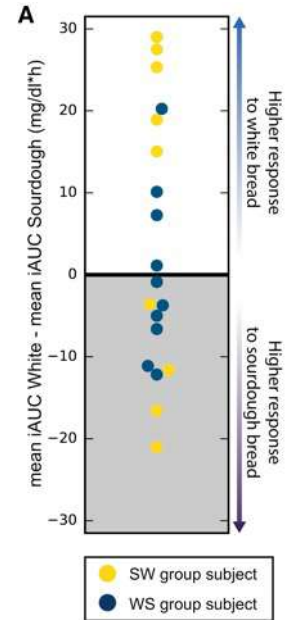
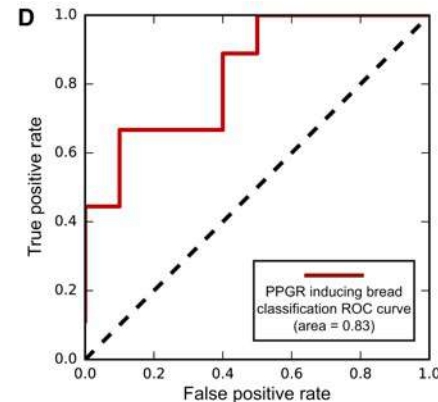
# Using taxonomic AND functional information

## Not just what is present but what they are doing

In healthy (n=20) **no difference** in metabolic or clinical parameters



When only gut microbiota were used in a classification algorithm they could predict the bread that induced lower glycemic response

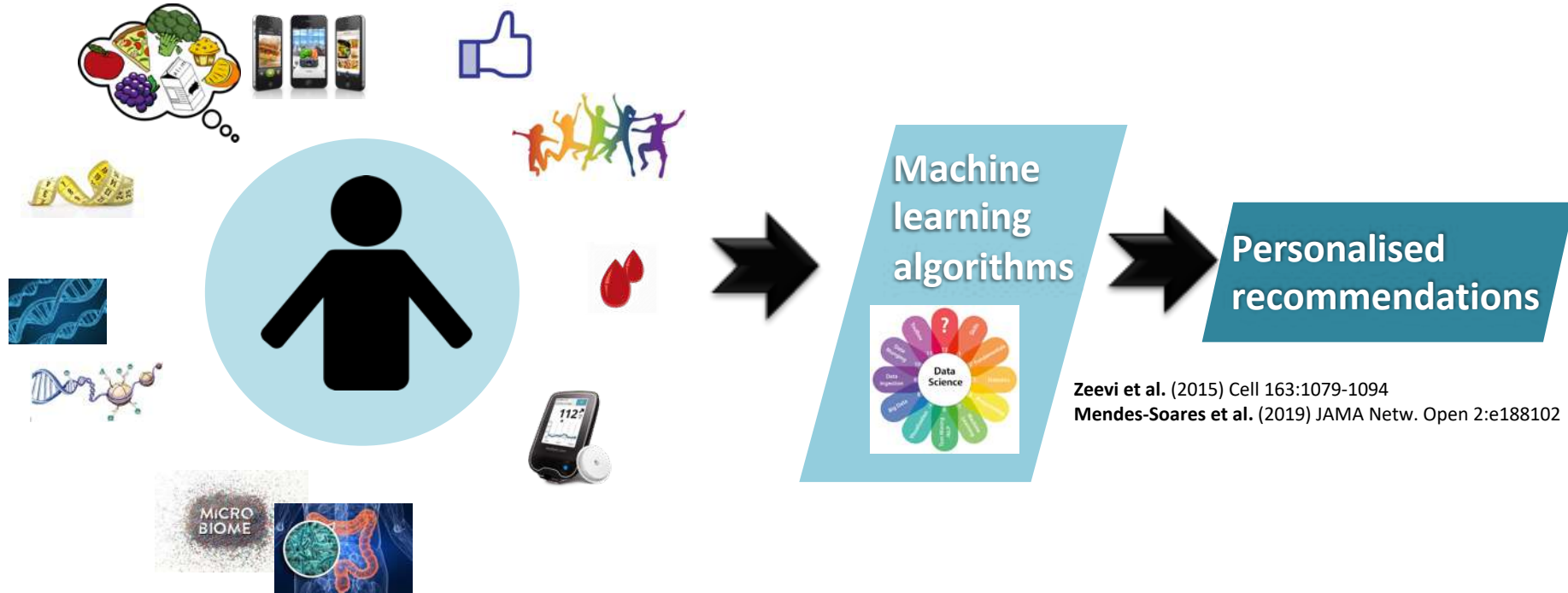


# Challenges for integrating gut microbiome in PN solutions

- Requires individuals to be engaged
- Multiple sample collection and analyses is costly
- RCTs are necessary to show efficacy above and beyond a existing personalised interventions (eg with a professional) – **REPRODUCIBILITY**
- Healthy vs diseased
- Evidence for sustained effect is yet to be demonstrated
- Requires multidisciplinary approaches – **DATA CONNECTIVITY**

**...just because we can measure all doesn't mean we should...**

# Clinical nutrition, big data and digital Health for PN



Opportunities for academia – industry collaborations



# Thank you for listening...

Quadram  
Institute



Paul Finglas



Jenny Plumb



Hannah Pinchen



Daniela Segovia Lizano

**Talk to me about opportunities to join us and the Quadram Institute...**