Regional variation in the gut microbiome and its implications for colorectal cancer screening

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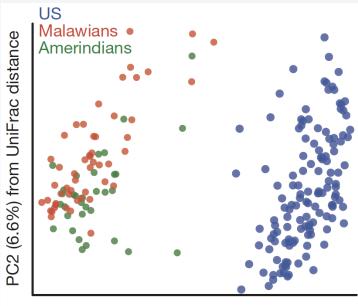
Key facts about the gut microbiome

- 10^{14} microbes residing in the human gut, with >2,000 unique species.
- Higher inter-individual variation than intra-individual variation.
- Function more conserved than taxonomy functional redundance.
- Microbiome structure established by around age 3 years.
- Environment dominates over host genetics in shaping the microbiome.
- Diet can rapidly change the gut microbiome, but the core patterns and functions are shaped by long-term diet/lifestyle regional variation.



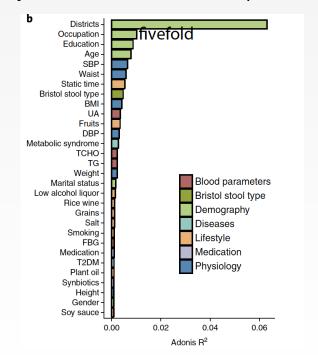
Regional variation of the gut microbiome

31 Malawians, 35 Amerindians, 136 US residents



PC1 (25%) from UniFrac distance

7,009 subjects from 14 districts in 1 province in China



He Y. Nat Med. 2018

Yatsunenko T. Nature. 2012





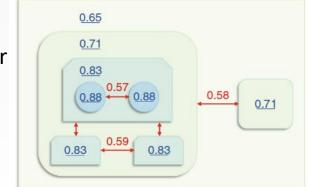
Corrected: Author Correction

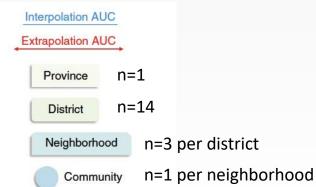
Regional variation limits applications of healthy gut microbiome reference ranges and disease models

Yan He^{1,16}, Wei Wu^{2,3,16}, Hui-Min Zheng^{1,2,16}, Pan Li^{1,2,16}, Daniel McDonald⁴, Hua-Fang Sheng¹, Mu-Xuan Chen¹, Zi-Hui Chen³, Gui-Yuan Ji³, Zhong-Dai-Xi Zheng², Prabhakar Mujagond⁵, Xiao-Jiao Chen¹, Zu-Hua Rong^{1,2}, Peng Chen⁶, Li-Yi Lyu⁷, Xian Wang⁷, Chong-Bin Wu⁷, Nan Yu¹, Yan-Jun Xu⁸, Jia Yin⁹, Jeroen Raes^{10,11,12}, Rob Knight (1) 4,13,14, Wen-Jun Ma^{3*} and Hong-Wei Zhou (2) 1,2,15*

variations. Microbiota-based metabolic disease models developed in one location failed when used elsewhere, suggesting that such models cannot be extrapolated. Interpolated models performed much better, especially in diseases with obvious microbiota-related characteristics. Interpolation efficiency decreased as geographic scale increased, indicating a need to build localized baseline and disease models to predict metabolic risks.

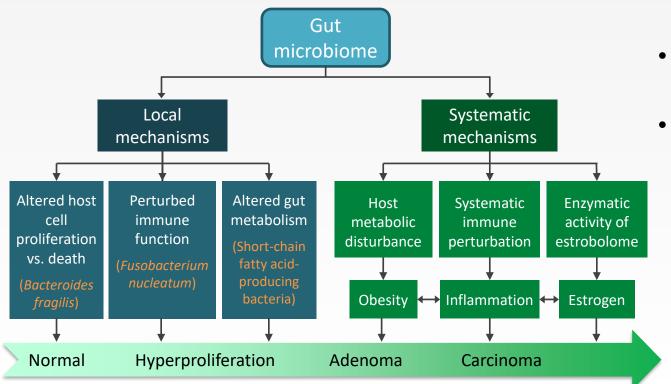
Prediction accuracy for metabolic syndrome







Mechanisms and clinical implications for the link b/t gut microbiota and CRC



- Prediction
 - Screening tool
- Chemoprevention
 - Microbiota modification
 - Combinational approach

Song M. Gastroenterology. 2020 Tilg H, Cancer Cell. 2018



Microbiome as a screening tool for CRC

Study	microbes	Country	AUC for CRC	AUC for adenoma
Zeller, 2014	4 species (2 <i>Fusobacterium</i> species, <i>Porphyromonas</i> asaccharolytica, <i>Peptostreptococcus stomatis</i>)	France	0.84	
Zackular, 2014*	5 OTUs (Clostridiales, Clostridium, Lachnospiraceae, Bacteroides)	USA	0.80 (0.69-0.91)*	0.84 (0.74-0.94)*
Feng, 2015	10 metagenomic groups (Bacteroides massiliensis, Bacteroides xylanisolvens, Bifidobacterium animalis, Paraprevotella clara, Streptococcus mutans, 5 unclassified)	Austria	0.96 (0.88-1.00)	0.60 (0.38-0.82)
Baxter, 2016	34 OTUs (most belong to <i>Clostridales</i> order and some to <i>Bacteroides</i>)	USA	0.85	0.67
Wong, 2017	1 species (F. nucleatum)	China	0.89 (0.80-0.98)	0.58 (0.49-0.67)
Liang, 2017	4 species (<i>F. nucleatum, Bacteroides clarus, Roseburia intestinalis, Clostridium hathewayi</i> , and one undefined)	China	0.76	
Thomas, 2019	16 species (e.g., Peptostreptococcus stomatis, F. nucleatum, Parvimonas spp., Porphyromonas asaccharolytica, Gemella morbillorum, Clostridium symbiosum and Parvimonas micra)	Multi	0.81	0.54

^{*}No validation was performed. The AUC was calculated in the training set.





ARTICLES

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Meta-analysis of fecal metagenomes reveals global microbial signatures that are specific for colorectal cancer

Jakob Wirbel (1), 131, Paul Theodor Pyl (1), 23, 31, Ece Kartal (14, Konrac Alessio Milanese (1), Jonas S. Fleck', Anita Y. Voigt'), Albert Passio Milanese (1), Jonas S. Fleck', Anita Y. Voigt', Albert Passio Milanese (1), Jonas S. Fleck', Anita Y. Voigt', Albert Passio Milanese (1), Jonas S. Fleck', Anita Y. Voigt', Albert Passio Milanese (1), Jonas S. Fleck', Anita Y. Voigt', Albert Passio Milanese (1), Jonas S. Fleck', Albert Passio Milanese (1), Jonas S. Fleck',

Table 1 | Fecal metagenomic studies of CRC included in this meta-analysis

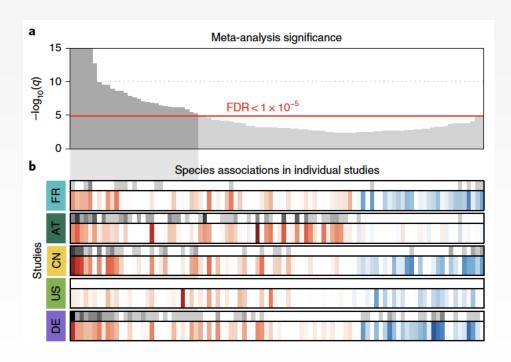
					10
- 1	Country code	Reference	No. of cases	No. of controls	Da pet
Sa					ta
	France	Zeller et al. ⁸	53	61	N
М	Austria	Feng et al.9	46	63	r©
	China	Yu et al. ¹¹	74	54	Гet
	United States	Vogtmann et al. ¹⁰	52	52	:ol
	Germany	The current study	60	60	
	External validation c	ohorts			
	Italy 1	Thomas et al.27	29	24	
	Italy 2	Thomas et al.27	32	28	
	Japan	Courtesy of T. Yamada et al.	40	40	

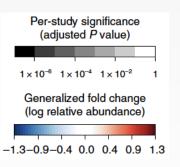
Metagenomic analysis of colorectal cancer datasets identifies cross-cohort microbial diagnostic signatures and a link with choline degradation

Paolo Manghi^{1,32}, Francesco Asnicar[®]¹, Edoardo Pasolli¹, fo [®]¹, Francesco Beghini[®]¹, Serena Manara¹, Nicolai Karcher¹, Davide Serrano⁴, Sonia Tarallo [®]⁵, Antonio Francavilla [®]⁵, petto⁷, Giulio Ferrero [®]⁸, Sayaka Mizutani^{9,10}, Hirotsugu Shiroma⁹, ta [®]^{11,12}, Shinichi Yachida^{11,13}, Takuji Yamada^{9,14}, Jakob Wirbel [®]¹⁵, M. Ulrich¹⁷, Hermann Brenner^{16,18,19}, Manimozhiyan Arumugam [®]^{20,21}, r [®]¹⁵, Francesca Cordero ⁸, Emmanuel Dias-Neto [®]^{3,25}, Fett¹, Barbara Pardini [®]^{5,27}, Maria Rescigno²⁸, Levi Waldron [®]^{29,30,33}, cola Segata [®]^{1,33*}



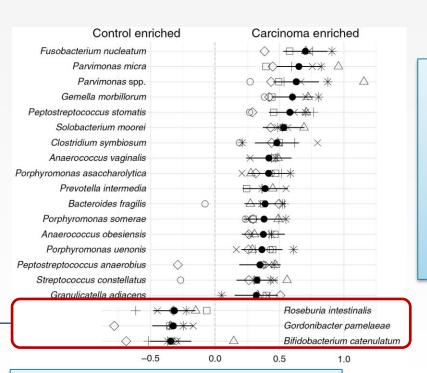
The core set of gut microbes associated with CRC is relatively consistent across studies



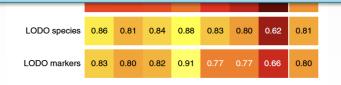




Individual microbes consistently associated with CRC Validation set

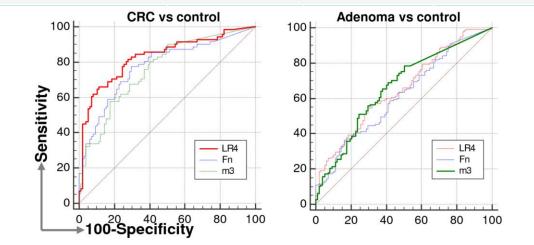


- Using as few as 16 species achieved cross-validation AUC > 0.8 for most of the datasets, with little increase in AUC (~2%) from using other species.
- No dataset could accurately discriminate adenomas from controls (average AUC=0.54).





Microbiome improves the accuracy of FIT-based test for adenoma detection



Variables	CRC		Adenoma			
	Fn	m3	LR4	Fn	m3	LR4
AUROC	0.776	0.759	0.830	0.616	0.662	0.652

Fn: Fusobacterium nucleatum

m3: Lachnoclostridium sp.

LR4: Fn+m3+*Bacteroides clarus*

Remains to be validated in other populations

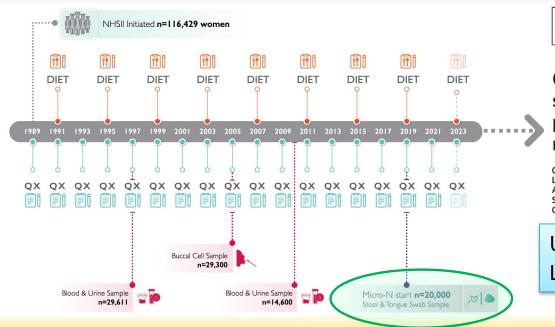
Liang JQ. Gut 2019.



A prospective microbiome study



- Microbiome among Nurses Study (Micro-N): n=20,000
 - To interrogate causes vs. consequences
 - To identify early changes in microbiome during carcinogenesis





Check for updates

Overview of the Microbiome Among Nurses study (Micro-N) as an example of prospective characterization of the microbiome within cohort studies

Christine Everett^{1,2,19}, Chengchen Li^{1,3,19}, Jeremy E. Wilkinson^{1,3,19}, Long H. Nguyen^{1,4,5}, Lauren J. McIver^{1,3}, Kerry Ivey^{6,7,8}, Jacques Izard^{9,10}, Natalia Palacios^{1,6,11}, A. Heather Eliassen^{1,2,12}, Walter C. Willett^{1,2,6,12}, Alberto Ascherio^{1,2,6,12}, Qi Sun^{1,2,6}, Shelley S. Tworoger^{1,2,13}, Andrew T. Chan^{1,2,4,5,14,15,19}, Wendy S. Garrett^{1,14,15,16,17,18,19}, Curtis Huttenhower^{1,3,14,15,19}, Eric B. Rimm^{1,2,6,12,19} and Mingyang Song^{1,4,5,6,12,19}

U01CA261961: "The Gut Microbiome, Lifestyle, and Colorectal Neoplasia"

Everett C, et al. Nat Protoc, 2021.



Summary

- There is substantial regional variation in the gut microbiome.
- A consistent gut microbial signature has been identified across regions to differentiate CRC from non-CRC.
- Microbial features predict poorly for adenomas but may help improve the accuracy of FIT test.
- Prospective studies are needed to assess the potential of the gut microbiome for early detection of colorectal neoplasia.



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