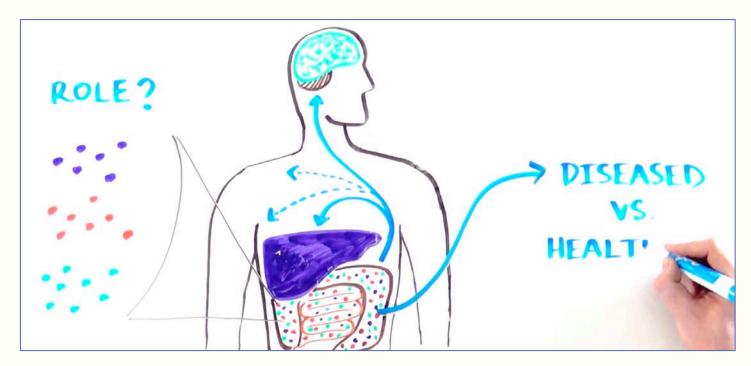


Microbioma intestinale e carcinogenesi



Maria Rosalia Pasca

Workshop "Genetica e neoplasie del colon-retto: il ruolo delle analisi molecolari all'interno del programma di screening" 10 Novembre 2016, Grand Hotel Mediterraneo, Firenze

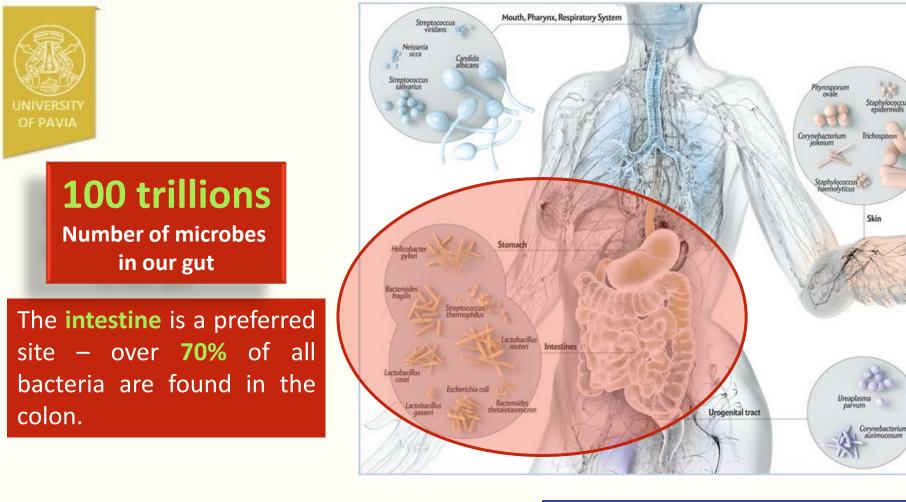




"...the ecological community of commensal, symbiotic, and pathogenic microorganisms that literally share our body space and have been all but ignored as determinants of health and disease"

> Joshua Lederberg The Scientist 15[7]:8, Apr. 2, 2001

- These microbes Mecrobiar communities of Microbiota:
- they are essential for maintaining health;
- they produce some <u>aitements</u> that we do not have the genes to make;
- break down our foodukaeytraet Mytribitange need to survive;
- teach our immune systems how to ecognize dangerous invaders.



90%

of cells in and on our body are bacterial cells.

10:1

Ratio of nonhuman cells to human cells in our body **22.000** Number of human genes in the human gene catalog

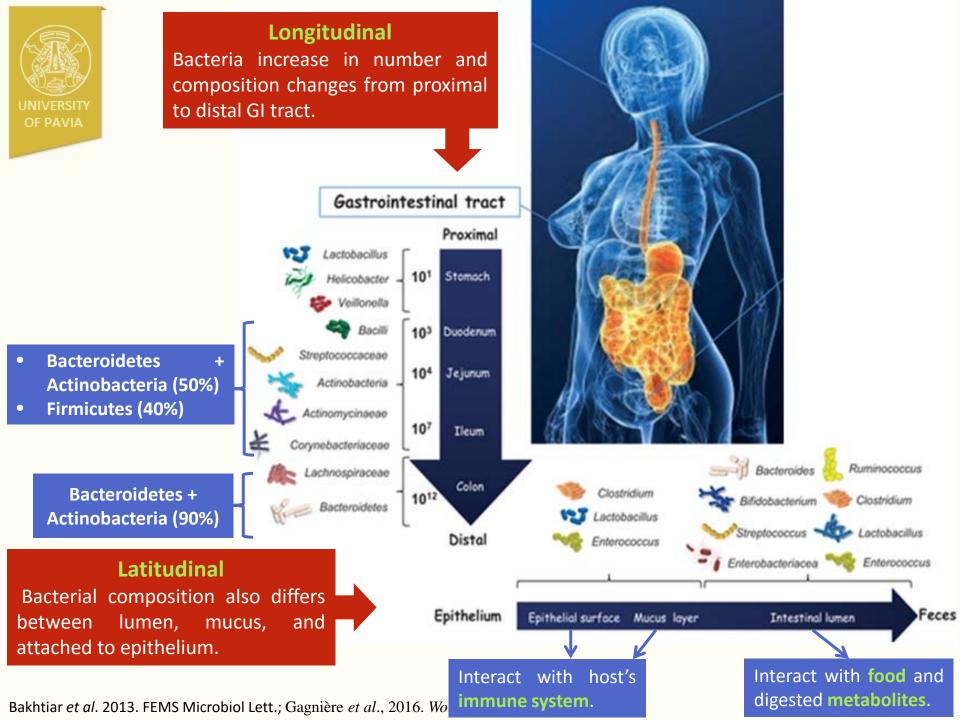
>1.000.000 Number of genes in our microbiome



Composition of gut microbiota

- There is wide spatial and temporal variation within the same intestine and between individuals, ages, cultures, diet (e.g.: vegetarian, vegan, etc.) and sexes.
- Although 4 phyla (Firmicutes, Bacteroidetes, Actinobacteria, and Proteobacteria) dominate the human microbiota, the makeup of a person's microbiota can be considered as individual fingerprint.

Phyla	Genera				
Bacteria					
	Ruminococcus				
	Clostridium				
Firmicutes (30-50%)	Peptostreptococcus				
	Lactobacillus				
	Enterococcus				
Bacteroidetes (20-40%)	Bacteroidetes				
Actinobacteria (3-15%)	Bifidobacterium				
	Desulfovibrio				
Proteobacteria (1-10%)	Escherichia				
	Helicobacter				
Verrucomicrobia (0.1%)					
Archea					
Euryarchaeota	Methanobrevibacter smithii				





From microbiome characterization to health impact

• Modification in the bacterial composition of microbiome could be alter our state of health.

Healthy associated typical profile

EUBIOSIS

- Bacterial groups are protective against pathogens;
- The intestinal microbial ecosystem is in balance.

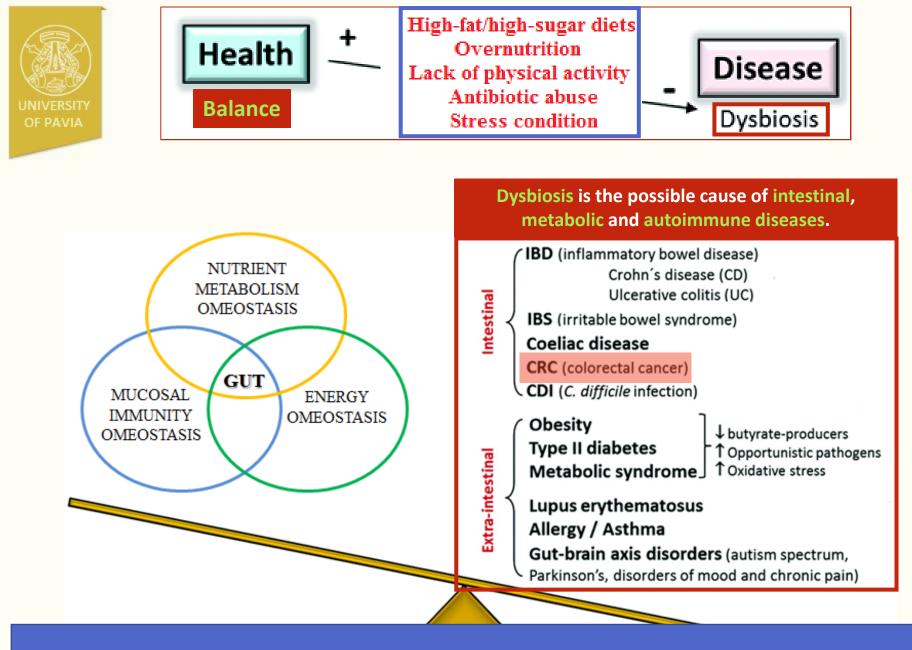


Disease associated typical profile

DYSBIOSIS

- Bacterial groups are associated to several pathological conditions;
- There are qualitative and quantitative changes in the intestinal flora.





Treatment of dysbiosis \rightarrow Reduction of the risk of the disease

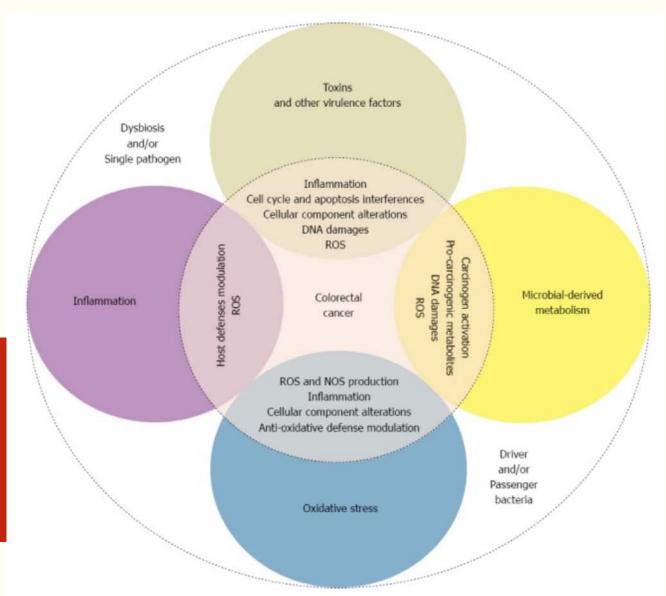


Colorectal Cancer (CRC) and microbiome dysbiosis



- Virulence factors
- Metabolites
- ROS and NOS production

- Induction of DNA damage,
- genome instability,
- inflammation;
- interferences of apoptosis and cellular cycle;
- alterations of cellular components.





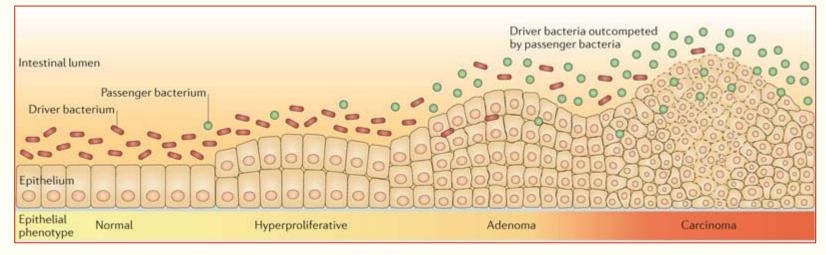
Putative bacterial species involved in colorectal carcinogenesis

Table 1 Summary of 16S rRNA sequencing and gPCR analyses of colonic microbiota variations in colorectal cancer

Variation in CRC Phyla	Genus/species	Increase of Enterotoxigenic
 Increase of <i>Escherichia</i> (phylogroups: B2 and D) in C particular III and IV stage prognostic factor? 	E) → Bacteroides fragilis Bacteroides/Prevotella	 Bacteroides fragilis in CRC; It was demonstrated <i>in vitro</i> and in murine model that BFT toxin increased cell proliferation and DNA damage.
 B2 <i>E. coli</i> toxin (colibactin) intervite with cell eukaryotic cycle and in DNA damage and genomic inst (in mouse model). 	Anaerococcus/Slakia/Paraprevotella Anaerotruncus/Collinsella/Desulfovibric Eubacterium/Porphyromonas Atopobium/Porphyromonas	 Increase of <i>Enterococcus faecalis</i> in CRC; It could produce pro-oxidative reactive oxygen species (ROS).
 D E. coli could be pote pathogenic via downregulation DNA mismatch repair system. 	on of Bacteroides/Fusobacterium Alistipes <mark>/Escherichia/</mark> Parvimonas/Bilophi Faecalibacterium prauznitsii	 Increase of <i>Fusobacterium nucleatum</i> in adenomas and CRC (> 80%) → CRC promotion. This effect may be mediated by FadA
Dacteroidetes	Bacteroides vulgatus/Bacteroides uniform Roseburia/Butyrate-producing bacteria	adhesion and activates the Wnt- β -
↓ ↓ Firmicutes (clostridia)	Faecalibacterium prauznitsii/Roseburia Ruminococcus	catenin pathway (in mouse model).
Ļ	Ruminococcus/Bifidobacterium/Streptococc	us 46 CRC/63 C [214]



Driver and Passenger Bacteria



Driver bacteria → iperproliferation and neoplastic transformation
 Passenger bacteria → last neoplastic transformation

Specific microbial associations

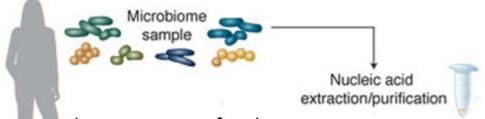
can be potentially used as biomarkers during neoplastic progression

Sears and Garrett. 2014. Cell Host Micr.; Tjalsma et al. 2012 Nature Rev. Microbiol.

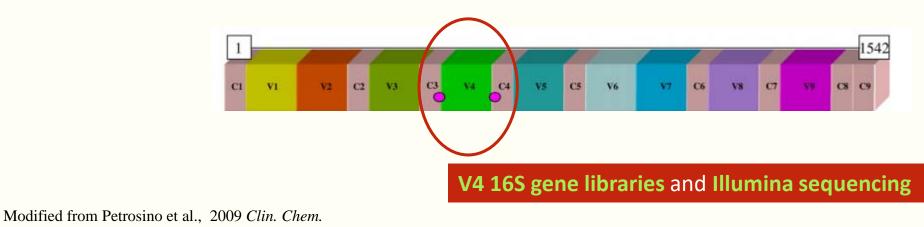


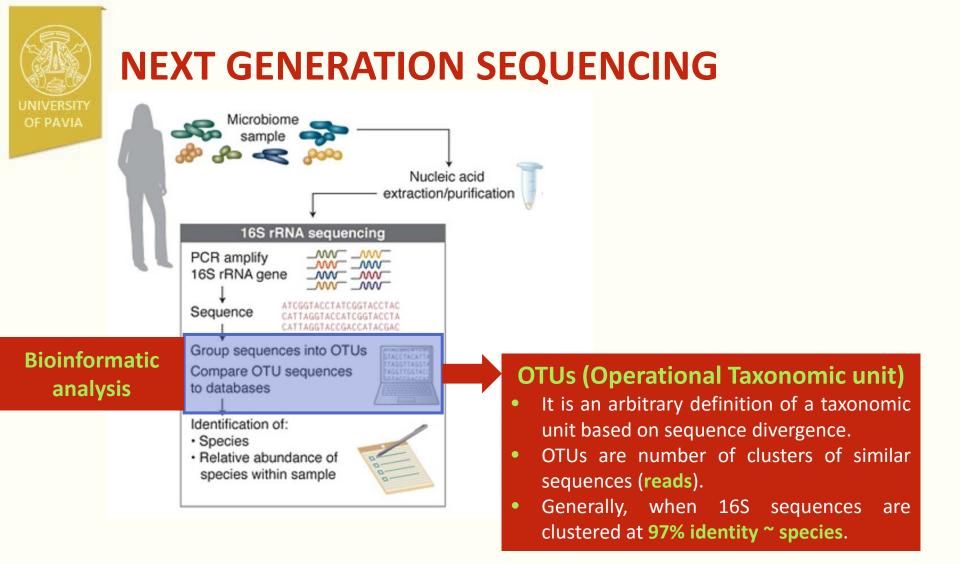
Studying microbiome: 16S rRNA gene sequencing

- First step is to obtain total bacterial DNA.
- DNA from all bacteria present in a sample (faeces, biopsies) need to be recovered.



- All the organisms possess at least one copy of such gene.
- Essential and conserved gene.
- The 16S sequence is known for every known bacterial species.
 - Large public databases available for comparison.
- It is characterized by 9 high conser 1 Seg RN Atgrages ed with 9 hypervariable regions (V1-V9).
- Variable sequence can be thought of as a molecular "fingerprint".
 The best phylogenetic marker for micropiota characterization
 - Can be used to identify bacterial genera and species.





			Samples		
CancerType	Healthy	CRC	CRC	Healthy (CRC
#OTU ID	SC255	SC131	SC276	SC104 S	SC250
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Actinomycetales;D_4_Actinomycetaceae;D_5_Actinomyces	0,0001865	0,00015	1,82E-05	0,0001	4E-05
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Actinomycetales;D_4_Actinomycetaceae;D_5_Actinotignum	0	0	0	0	0
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Actinomycetales;D_4_Actinomycetaceae;D_5_Arcanobacterium	0	0	0	0	0
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Actinomycetales;D_4_Actinomycetaceae;D_5_Mobiluncus	3,243E-05	0	0	9,6E-05	0
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Actinomycetales;D_4_Actinomycetaceae;D_5_Varibaculum	0	0	0	2,5E-05	0
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Actinomycetales;D_4_Actinomycetaceae;D_5_uncultured	0	4,7E-06	0	0	0
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Bifidobacteriales;D_4_Bifidobacteriaceae;D_5_Aeriscardovia	0	0	0	0	0
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Bifidobacteriales;D_4_Bifidobacteriaceae;D_5_Alloscardovia	1,621E-05	4,7E-06	0	0	0
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Bifidobacteriales;D_4_Bifidobacteriaceae;D_5_Bifidobacterium	0,0268425	0,04133	0,000249	0,10931	0,0093
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Bifidobacteriales;D_4_Bifidobacteriaceae;D_5_Gardnerella	0	9,5E-06	0	5E-05	5E-06
D_0_Bacteria;D_1_Actinobacteria;D_2_Actinobacteria;D_3_Bifidobacteriales;D_4_Bifidobacteriaceae;D_5_Pseudoscardovia	0	4,7E-06	0	0	0

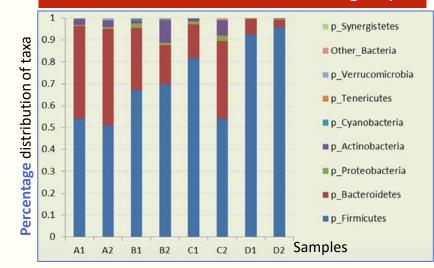
D0 = kingdom

- **D1** = phylum
- D2 = class
- D3 = order
- D4 = family
- D5 = genus

OTU Table

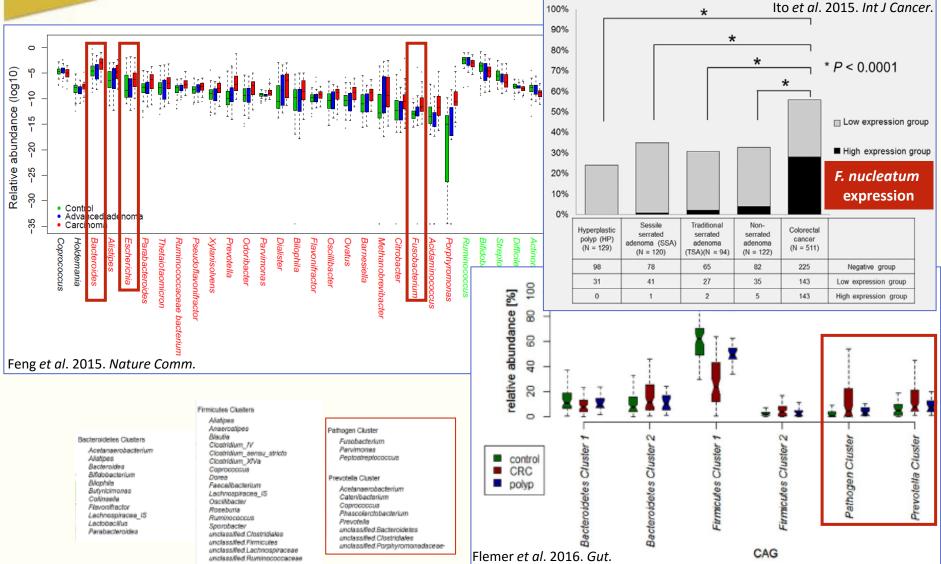
Bioinformatic and Statistical analysis

Taxonomy charts Relative abundance of taxonomic groups





Gut microbiome and colorectal adenomacarcinoma sequence





Study of gut microbiome dysbiosis in the progression of neoplasia in sporadic colorectal cancer (CRC)

	 Istituto Scientif Cura e lo Stu Meldola 	dio dei Tun	ori (IRST),	al complex
Stage of neoplas	 Department tic ppogressions University of Pav 	ia , patients	allanzani»,	ol samples
Healthy (negativ	e colonscopy Inte	grati <u>y</u> g Biol	ogy, CIBIO, Bactería	I DNA extraction
Hyperplastic r	University of Tre polyps (HPs)	<u>14</u>		
Low risk aden	omas (LRAs)	20	VA 100	
High risk aden	omas (HRAs)	21	V4 105	rRNA libraries
Carcinoma	as (ADKs)	13		
ADKs trea chemotherapy/		9	Illumi	ina sequencing
			Bioinfo	ermatic analysis



In progress...

- We are waiting for sequencing results and bioinformatic analysis of all samples.
- Microbiome composition will be characterized for entire colorectal cancerogenesis progression.
- We will put in correlation patients' microbiome with their clinical data.

FINAL GOALS

- To identify microbial population that are specific to early time points prior to disease development.
- Dysbiotic patients can be treated to **restore eubiosis (personalized medicine)**.

Future perspectives

- Metabolomics and mycobiome study.
- Correlation with **diet** and nutrition.
- Microbiome dysbiosis in colorectal cancer hereditary syndromes.



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