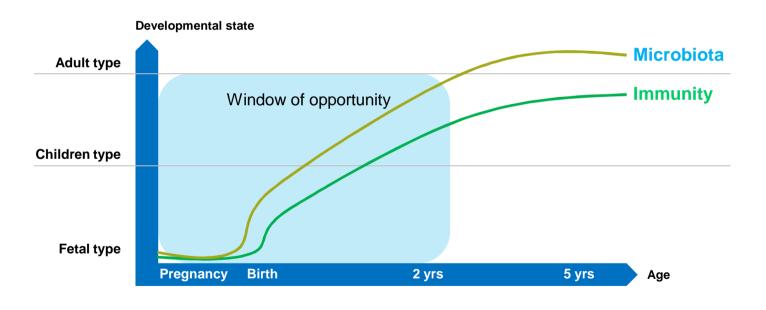


# Microbiota of infants and toddlers provide a window of opportunity

- Fetal and postnatal time up to 2-3 years of age are crucial for development of microbiota and immunity
  - Microbiota reaches adult type at 3 years of age and immunity at 12 years of age



# Early intervention with probiotics: Effect on the prevalence of eczema at 2, 4, and 6 years



### **AIM OF THE STUDY**

To understand if the daily intake of *Lactobacillus rhamnosus* **HN001** would reduce the incidence and the severity of eczema in children.

#### **STUDY DESIGN**

Pregnant mothers treated daily from ~5 weeks pre-term to 6 months post-term for breastfeeding mothers. Infants treated daily from birth to 24 months old — treatments given as supplement to infant feeds (breast milk, infant formula, weaning food). Health assessment was done at 2, 4, and 6 years.

#### **SUBJECTS**

Infants with family history of allergy

Approx 150 infants/children/treatment group

- Placebo
- L. rhamnosus HN001 at dose of 6 billion per day (6\*109 cfu/day)

### Long term study



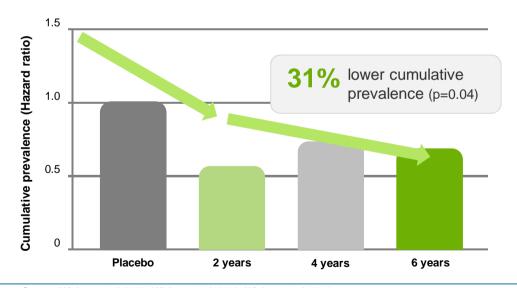
- The following outcomes were assessed at 2, 4, and 6 years of age
  - Eczema prevalence was evaluated by
    - using SCORing Atopic Dermatitis (SCORAD) cut off =>10 (to differentiate from rash)
  - Atopy was assessed by using Australasian Society of Clinical Immunology and Allergy guidelines.
    - Skin prick tests were done against egg white, peanut, cow's milk, cat pelt,
       D.pteronyssinus and mixed grass pollen
  - Wheeze and rhinoconjunctivitis was assessed by using International Study of Asthma and Allergies in Childhood criteria.
    - Questionnaire

# 31% lower cumulative prevalence of eczema over 6 years

[ Atopic eczema severity diagnosis tool (SCORAD) ]

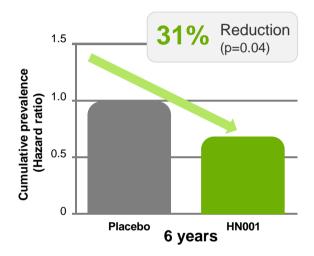
- Significant reduction at 2 years → 43% (p=0.009)
- The effect continues over 6 years → 31% lower cumulative prevalence (p= 0.04)

Study showed that the *Lactobacillus rhamnosus* HN001 group experienced a 31% reduction in the *cumulative prevalence* of SCORAD ≥10 points over 6% compared to placebo (Hazard Ratio 0.69; p=0.04).



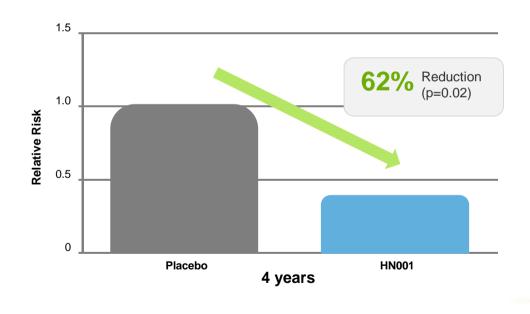
# 31% lower prevalence of allergic sensitization over 6 years

- By using skin prick tests children in HN001 group had a significantly lower cumulative prevalence of allergic sensitization compared with children taking placebo (HR 0.69; p=0.04)
- Skin prick tests measure an immune system reaction towards the allergen.
  - Allergens bind to IgE antibodies on immune cells beneath the skin that release inflammatory mediators and cause the typical redness and swelling of the skin.



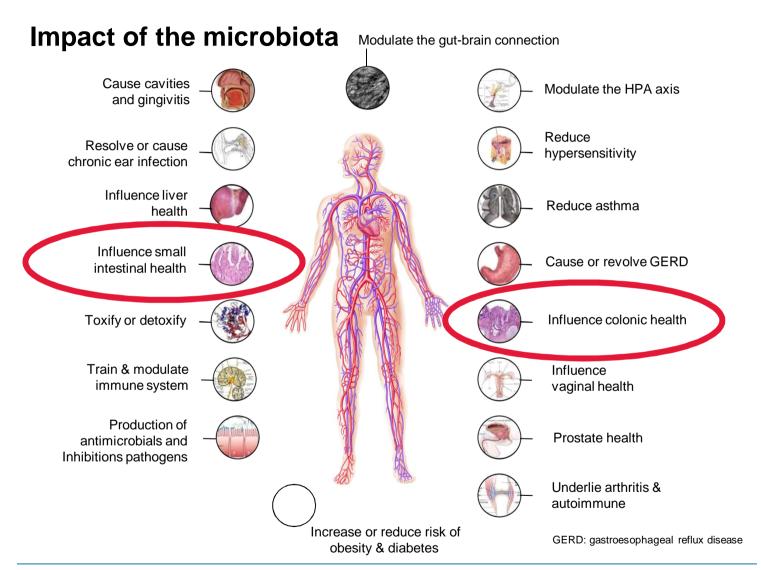
## 62% reduced risk of rhinitis and red eyes over 4 years

 Clinical diagnosis (The International Study of Asthma and Allergies in Childhood questionnaire) was used to assess the prevalence of current rhinoconjunctivitis. At 4 years of age, the children in HN001 group had a 62% lower relative risk of having rhinoconjunctivitis (rhinitis and red eyes) (p=0.02).



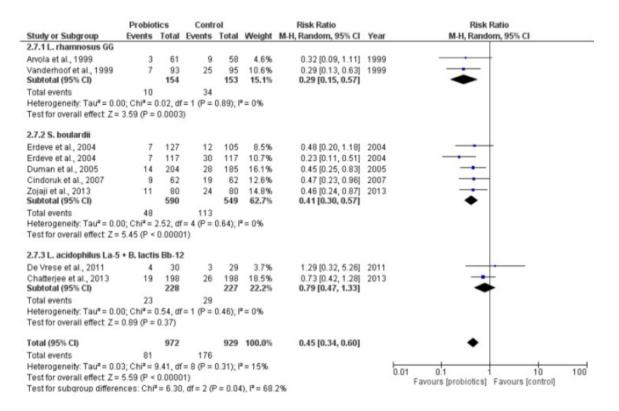


Source: Wickens et al. 2012



### Probiotics and antibiotic associated diarrhea

### Figure 3



Efficacy results of probiotic use: eight RCTs by three probiotic subgroups (outcome: incidence of antibiotic-associated diarrhea (AAD)).

Blaabjerg et al (2017) Antibiotics. 6:21

### **Probiotics in management of on Antibiotic Associated Diarrhea** (AAD) in adults

#### **AIM OF THE STUDY**

This study was designed to determine the dose response effect of HOWARU® Restore formulation on the incidence of AAD and CDAD and severity of gastrointestinal symptoms in adults having antibiotherapy.

#### STUDY DESIGN

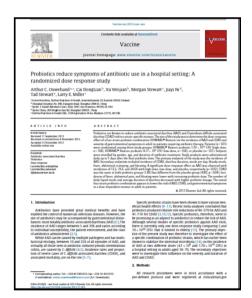
Triple blind, randomised, placebo controled

### **SUBJECTS**

Adults in-patients requiring antibiotherapy.

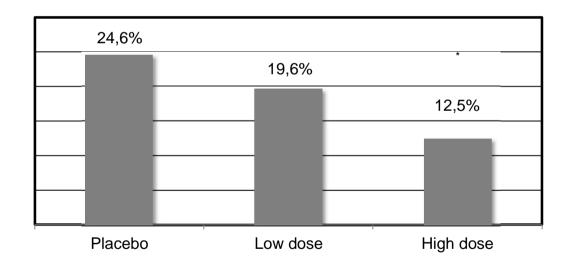
450 PATIENTS DIVIDED IN 3 TREATMENT GROUPS COMPLETED THE STUDY

- Placebo
- Combination of 4 probiotic strains at 4.17 x 10<sup>9</sup> CFU/day (low dose)
- Combination of the same 4 strains at 1.70 x 10<sup>10</sup> CFU/day (high dose)



### **Probiotics in management of on Antibiotic Associated** Diarrhea (AAD) in adults - incidence

- Subjects taking the high dose experienced a 50% reduction in incidence of AAD compared to the placebo group (p<0.005).
- Low dose group has shown a 20% reduction compared to placebo group but the results were not statistically significant.



Ouwehand et al (2014) Vaccine vol 32

Impact of the microbiota Modulate the gut-brain connection Cause cavities Modulate the HPA axis and gingivitis Reduce Resolve or cause hypersensitivity chronic ear infection Influence liver Reduce asthma health Influence small Cause or revolve GERD intestinal health Toxify or detoxify Influence colonic health Train & modulate Influence immune system vaginal health Production of Prostate health antimicrobials and Inhibitions pathogens Underlie arthritis & autoimmune Increase or reduce risk of GERD: gastroesophageal reflux disease obesity & diabetes



# **DIABETES**



DIABETES IS ON THE RISE

**422 MILLION**ADULTS HAVE DIABETES

THAT'S 1 person in 11



3.7 million
deaths due to diabetes

deaths due to diabetes and high blood glucose

1.5 million

deaths caused by diabetes

### **Many types of Diabetes**

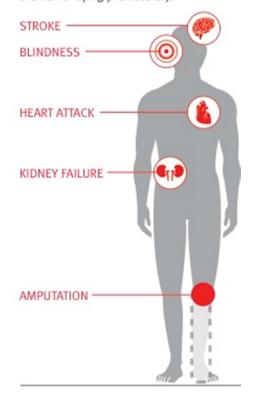






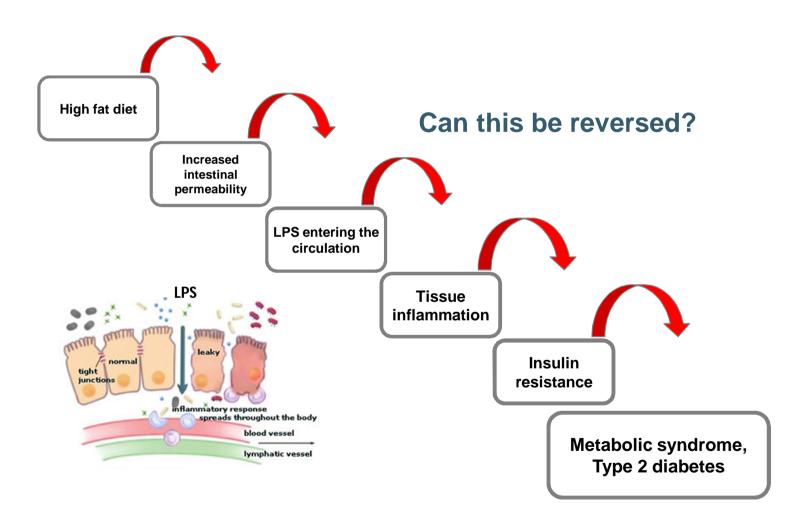
### Concequences

Diabetes can lead to complications in many parts of the body and increase the risk of dying prematurely.

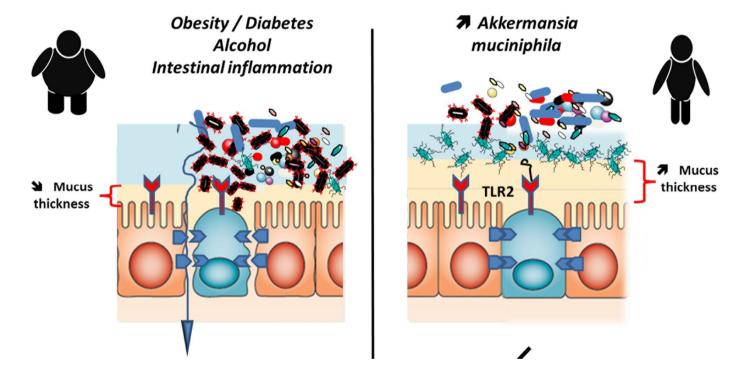


www.who.int/diabetes/global-report

## **Gut-derived metabolic endotoxemia – the hypothesis**



## Akkermansia muciniphila and metabolic health



Inflammation and onset of type 2diabetes, Metabolic syndrome

# High levels of *Akkermansia muciniphila* supports good metabolic health

### Gut microbiota

		Akk LO (N=24)	Akk HI (N=25)	p Value
Sex, N (%)	F	19 (79.2)	22 (88.0)	0.4
	M	5 (20.8)	3 (12.0)	
Glucose homoeostasis				
Glucose (mmol/L)		5.4 (0.1)	5.2 (0.1)	0.02
Insulin (μIU/mL)		11.3 (0.9)	8.9 (0.9)	0.03
HOMA-IR		1.5 (0.1)	1.2 (0.1)	0.03
Disse index		-9.2 (1.0)	-6.0 (1.1)	0.02

# **Management of diabetes**





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# Early pregnancy probiotic supplementation with *Lactobacillus rhamnosus* HN001 may reduce the prevalence of gestational diabetes mellitus: a randomised controlled trial

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(Submitted 23 August 2016 – Final revision received 10 January 2017 – Accepted 24 January 2017 – First published online 3 April 2017)

#### Abstract

The study aims to assess whether supplementation with the probiotic Lactobacillus rbamnosus HN001 (HN001) can reduce the prevalence of gestational diabetes mellitus (GDM). A double-blind, randomised, placebo-controlled parallel trial was conducted in New Zealand (NZ) (Wellington and Auckland). Pregnant women with a personal or partner history of atopic disease were randomised at 14–16 weeks' gestation to receive HN001 ( $6 \times 10^9$  colony-forming units) (n 212) or placebo (n 211) daily. GDM at 24–30 weeks was assessed using the definition of the International Association of Diabetes and Pregnancy Study Groups (IADPSG) (fasting plasma glucose  $\geq 5$ -1 mmol/l, or 1 h post 75 g glucose level at  $\geq 10$  mmol/l or at 2 h  $\geq 8$ -5 mmol/ $\rangle$ 0 and NZ definition (fasting plasma glucose  $\geq 5$ -5 mmol/l or 2 h post 75 g glucose at  $\geq 9$  mmol/l). All analyses were intention-to-treat. A total of 184 (87%) women took HN001 and 189 (90%) women took placebo. There was a trend towards lower relative rates (RR) of GDM (IADPSG definition) in the HN001 group, 0.59 (95% CI 0-32, 1-08) (P=0-08). HN001 was associated with lower rates of GDM in women aged  $\geq 35$  years (RR 0-31; 95% CI 0-12, 0-81, P=0-009) and women with a history of GDM (RR 0-00; 95% CI 0-00, 0-66, P=0-004). These rates did not differ significantly from those of women without these characteristics. Using the NZ definition, GDM prevalence was significantly lower in the HN001 group, 2-1% (95% CI 0-6, 5-2), v. 6-5% (95% CI 3-5, 10-9) in the placebo group (P=0-03). HN001 supplementation from 14 to 16 weeks' gestation may reduce GDM prevalence, particularly among older women and those with previous GDM.

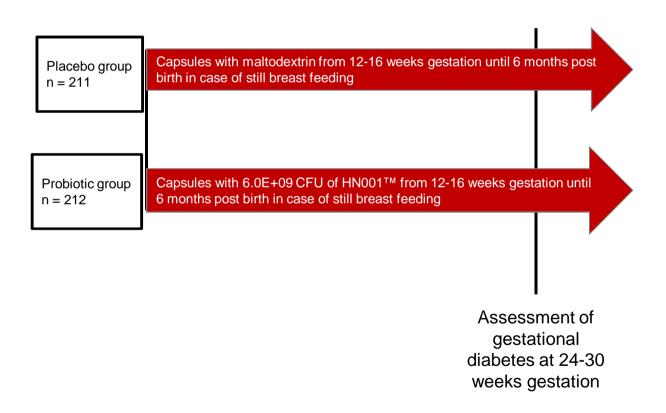
Key words: Randomised controlled trials: Probiotics: Lactobacillus rhamnosus HN001: Gestational diabetes mellitus



Lifestyle factors such as changes in patterns of food consumption with economic development have led to the well-recognised and increasing problems of obesity and associated diseases, including gestational diabetes mellitus (GDM), both in New Zealand (NZ)<sup>(1)</sup>

GDM definitions are variable, and establishing an international consensus on diagnostic criteria that predict adverse pregnancy outcomes has been challenging. In 2008, the International Association of Diabetes and Pregnancy Study Group

## Lactobacillus rhamnosus HN001™ and prevalence of **GDM: Trial design in brief**



### **Prevalence of Gestational Diabetes**

Table 2. Treatment effects on the prevalence of gestational diabetes mellitus defined according to International Association of Diabetes and Pregnancy Study Groups (IADPSG)\* and New Zealand (NZ)† definitions, and mean blood glucose levels (Prevalence percentages and 95% confidence intervals; relative rates (RR) and 95% confidence intervals; mean values and 95% confidence intervals)

	HN001		Placebo				
	Prevalence (%)	95 % CI (%)	Prevalence (%)	95% CI(%)	RR	95% CI	P
IADPSG* (n 373)	8-2 (15/184)	4.6, 13.1	13-8 (26/189)	9-2, 19-5	0.59	0.32, 1.08	0.08
NZ† (n 394)	2·1 (4/194)	0.6, 5.2	6.5 (13/200)	3.5, 10.9	0.32	0.11, 0.96	0.03

### **Effect on fasting glucose levels**

Table 2. Treatment effects on the prevalence of gestational diabetes mellitus defined according to International Association of Diabetes and Pregnancy Study Groups (IADPSG)\* and New Zealand (NZ)† definitions, and mean blood glucose levels (Prevalence percentages and 95% confidence intervals; relative rates (RR) and 95% confidence intervals; mean values and 95% confidence intervals)

	HN001		Placebo				
	Mean	95% CI	Mean	95% CI	Difference in mean	95% CI	P
Fasting (mmoVI)	4.32	4·27, 4·37	n 2 4⋅40	92 4·34, 4·46	-0.08	-0.15, 0.00	0.048

HN001, Lactobacillus rhamnosus HN001.

<sup>\*</sup> Fasting  $\geq 5.1$  mmol/l,  $1h \geq 10$  mmol/l,  $2h \geq 8.5$  mmol/l.

<sup>†</sup> Fasting  $\geq 5.5$  mmol/l,  $2h \geq 9$  mmol/l.

## Results suggest that benefits are greatest in mothers > 35 years of age and in mothers with a previous history of GDM

Influence of age and	Prevalenc	Р		
		HN001™	Placebo	
Influence of age	> 35 years	7.1%	22.9%	0.009
	< 35 years	8.8%	8.5%	0.94
Previous History	With previous history	0%	87%	0.004
	No previous history	6.2%	12.3%	0.14

Wickens at al. 2017 British Journal of Nutrition

EBioMedicine 13 (2016) 190-200



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journal homepage: www.ebiomedicine.com



#### Research Paper

Probiotic With or Without Fiber Controls Body Fat Mass, Associated With Serum Zonulin, in Overweight and Obese Adults—Randomized Controlled Trial\*\*\*



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#### ARTICLE INFO

Article history: Received 19 August 2016 Received in revised form 17 October 2016 Accepted 24 October 2016 Available online 26 October 2016

Keywords: Clinical trial Fiber Obesity Prebiotic Probiotic Synbiotic

#### ABSTRACT

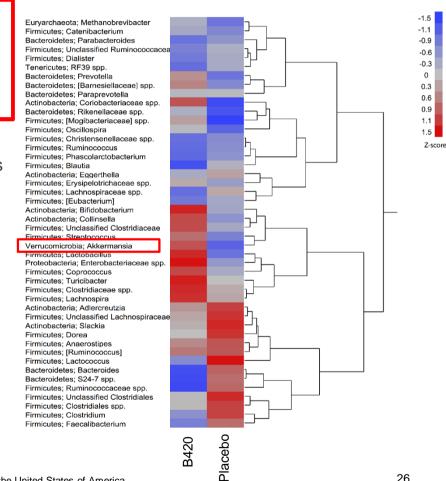
Background: The gut microbiota is interlinked with obesity, but direct evidence of effects of its modulation on body fat mass is still scarce. We investigated the possible effects of Bifidobacterium animalis ssp. lactis 420 (B420) and the dietary fiber Litesse® Ultra polydextrose (III) on body fat mass and other obesity-related parameters.

Methods: 225 healthy volunteers (healthy, BMI 28–34.9) were randomized into four groups (1:1:1:1), using a computer-generated sequence, for 6 months of double-blind, parallel treatment: 1) Placebo, microcrystalline cellulose, 12 g/d; 2) LU, 12 g/d; 3) B420,  $10^{10}$  GFU/d in microcrystalline cellulose, 12 g/d; 4) LU + B420, 12 g +  $10^{10}$  GFU/d. Body composition was monitored with dual-energy X-ray absorptiometry, and the primary outcome was relative change in body fat mass, comparing treatment groups to Placebo. Other outcomes included anthropometric measurements, food intake and blood and fecal biomarkers. The study was registered in Clinicaltrials gov (NCT01978691).

Findings: There were marked differences in the results of the Intention-To-Treat ( $\Pi$ T; n = 209) and Per Protocol (PP: n = 134) study populations. The PP analysis included only those participants who completed the interven-

### Akkermansia is more abundant in human subjects consuming B-420™

- B-420<sup>™</sup> impacted many species of the human gut microbiota; including, significantly higher relative abundance of Akkermansia muciniphila in B-420™ subjects<sup>1</sup>.
- Abundance of Akkermansia muciniphila, a mucin-degrading bacterium that resides in the mucus layer, is generally associated with improved metabolic health including body weight, glucose tolerance and intestinal permeability<sup>2, 3, 4</sup>.
- A. muciniphila has been identified as inversely correlated with body weight gain in pregnant women.<sup>2</sup>
- A. muciniphila controlled gut barrier function, fat mass storage, and glucose tolerance in obese and type 2 diabetic mice<sup>3</sup>.



<sup>&</sup>lt;sup>1</sup>Hibberd et al. 2018. Beneficial Microbes (under peer review)

<sup>&</sup>lt;sup>2</sup>SantaCruz et al. 2010. British Journal of Nutrition

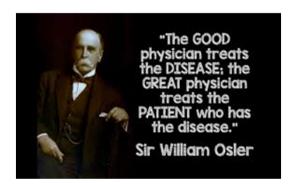
<sup>&</sup>lt;sup>3</sup>Everard et al., 2013. Proceedings of the National Academy of Sciences of the United States of America

<sup>&</sup>lt;sup>4</sup>Dao et al., 2016, Gut

Harnessing the gut microbiome and probiotics, for better health in a broader population

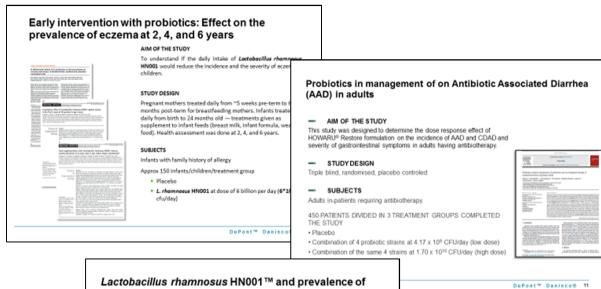
# **Probiotics in**

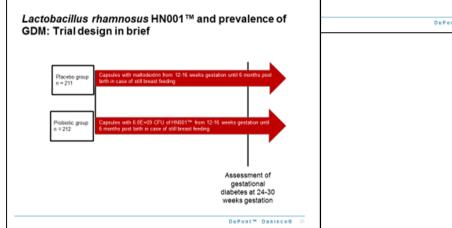
# **Treatment**



# **Prevention**

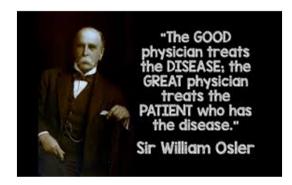






# **Probiotics in**

# **Treatment**





# **Prevention**





## **Opportunities with different delivery formats**



DuPont Nutrition & Health combines in-depth knowledge of food and nutrition with current research and expert science to deliver unmatched value to the food, beverage and dietary supplement industries. We are innovative solvers, drawing on deep consumer insights and a broad product portfolio to help our customers turn challenges into high-value business opportunities.

# **Thank You**



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