Gut microbiome composition is predictive of incident type 2 diabetes in a population cohort of 5572 Finnish adults

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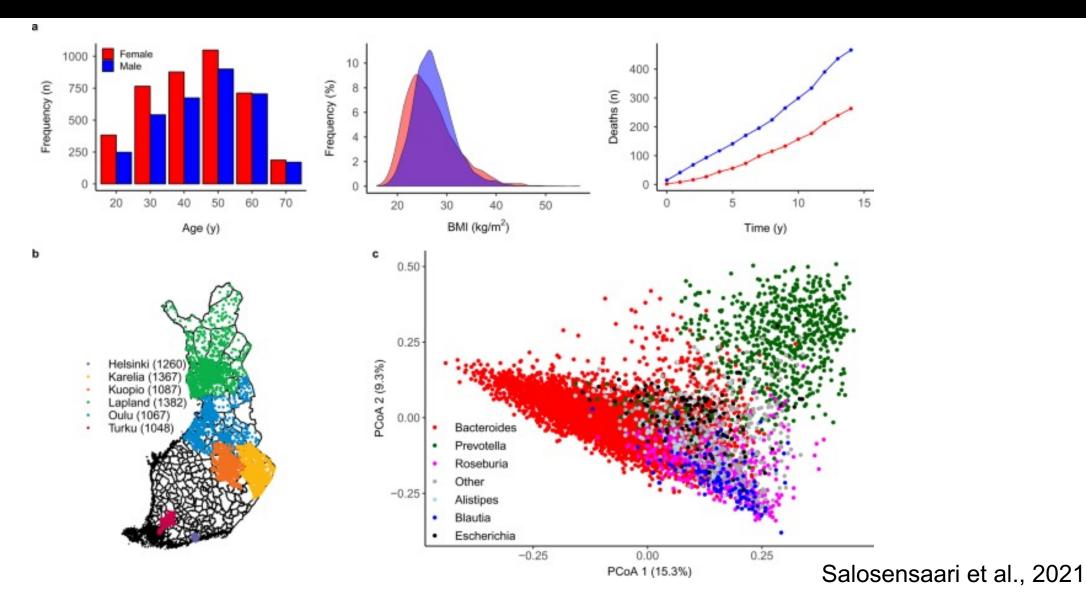
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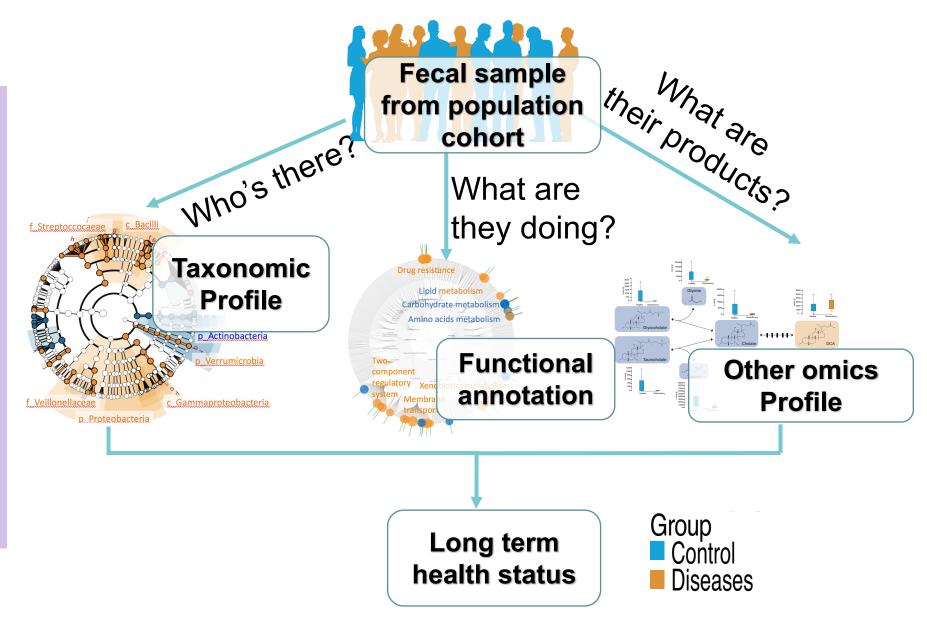
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FINRISK 2002



Central questions we can answer with FINRISK 2002 microbiome data

Potential of clinical applicability of baseline gut microbiome as non-invasive biomarker for early detections of future health status



Highlight of recent findings from FINRISK02 microbiome studies

- Combination of conventional risk factors with gut microbiota may have potential clinical utility in early risk stratifications of liver diseases (Liu et al., 2022)
- Integration of gut microbiome and conventional risk factors can improve the predictions capacities of incident chronic obstructive pulmonary diseases (Liu et al, 2022, *Preprint*)
- Identifications and characterizations of combined effects of host genetics and diet on human gut microbiota and incident diseases (Qin et al., 2022)
- Gut microbiomes signatures is predictive of incident type 2 diabetes

Aim

To examine the previously unknown long-term association between gut microbiome composition and incident type 2 diabetes in a representative population cohort.

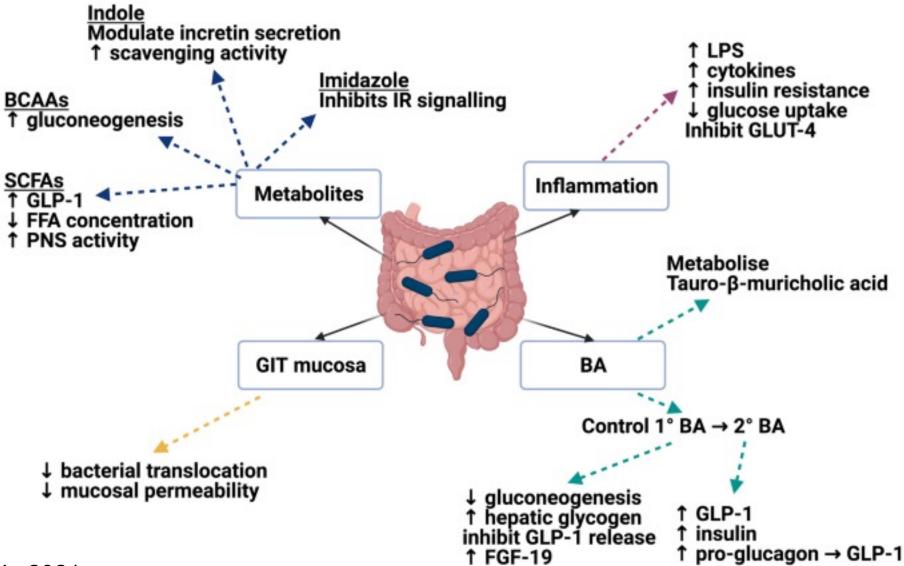
Research outcome

The gut microbiome could potentially be used to improve risk prediction for type 2 diabetes.

Potential mechanisms of microbiota effects on metabolism in the type 2 diabetes patient

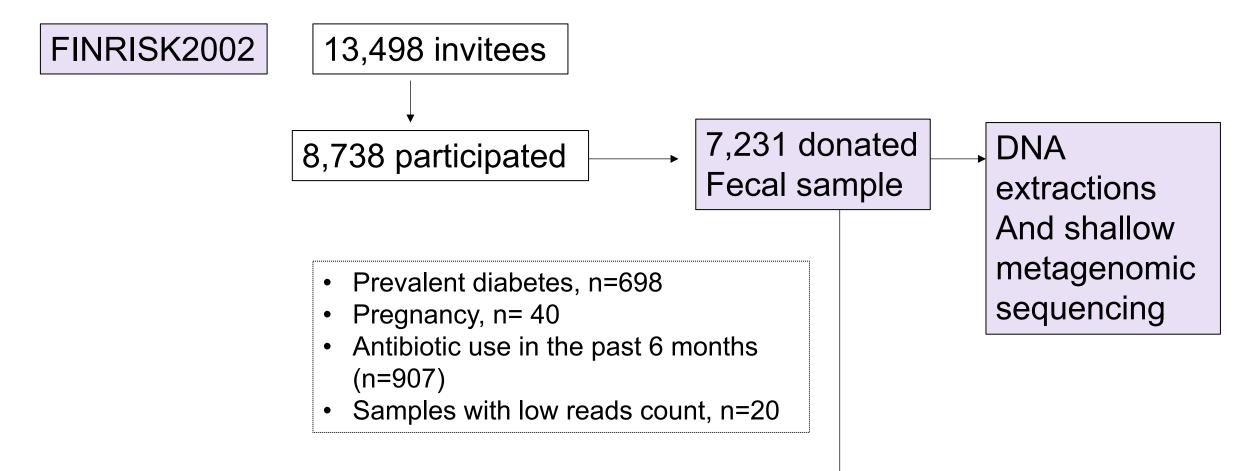
- Modulation of inflammations
- Increased intestinal permeability
- Glucose homeostasis
- Fatty acid oxidation, synthesis and energy expenditure
- Combined effects of inter-microbial interactions

Microbiota influence in glucose homeostasis



Cunningham et al., 2021

Research Methods





Research Methods

Type 2 diabetes diagnosis:

 ICD-10 codes E10–E14, ICD-9 code 250, or ICD-8 code 250

Prevalent diabetes also was determined based on three or more drug purchases with Anatomical Therapeutic Chemical drug code A10 \rightarrow Our results were also not confounded by antidiabetic drugs, including metformin which were widely reported to largely influence gut microbiome Information available at baseline:

- Physical examination (e.g BMI)
- Blood sampling for metabolomic
- Demographic data
- Dietary habbit
- Lifestyle
- Diseases

The participant were followed through 31 December 2017 (for this study) on national health registers of Finland

Altogether, 432 cases of incident diabetes occurred over the median follow-up of 15.8 years.

Research Methods

Taxonomic profile:

- Filtering to core taxa:

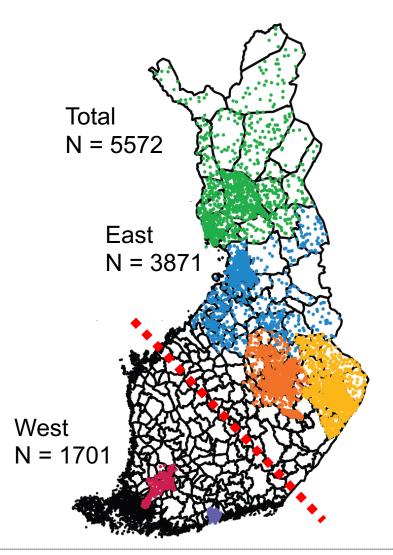
detection > 0.01% and prevalence > 1% (N = 119)'

- Alpha and beta diversity metrics

Features selections in eastern subpopulation

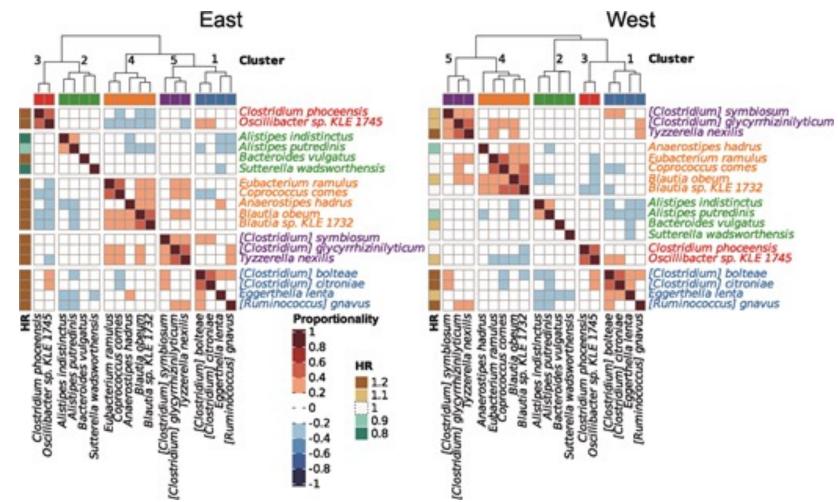
- Cox proportional hazard model adjusted by covariates*
- Clustering of proportionally abundant taxa (5 resulting clusters) and tested the same model

Applied the same model with selected features in eastern sub-population to western sub-population

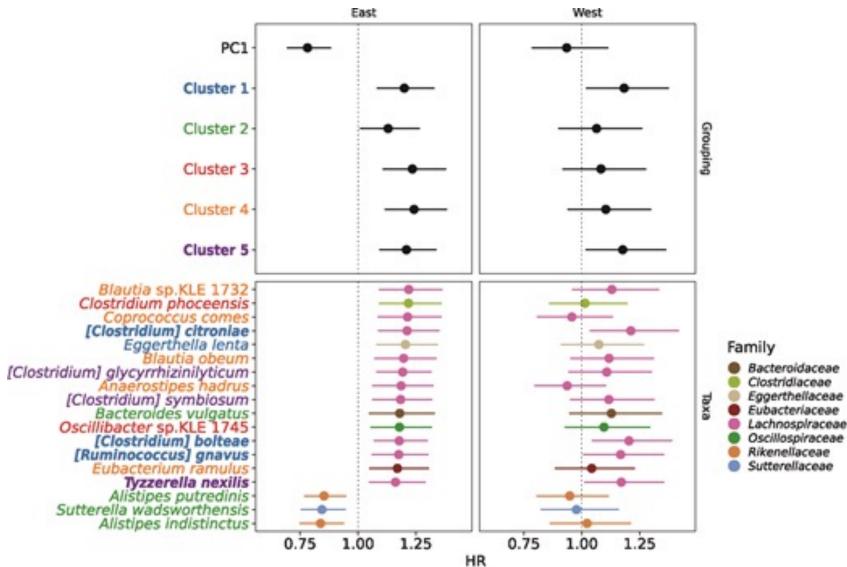


*covariates: baseline age, BMI, sex, systolic blood pressure, non-HDL cholesterol, triglycerides, and current smoking status of the participants.

Cluster of 18 Species that were significantly associated with incident type 2 diabetes (adjusted P < 0.05 from East data)



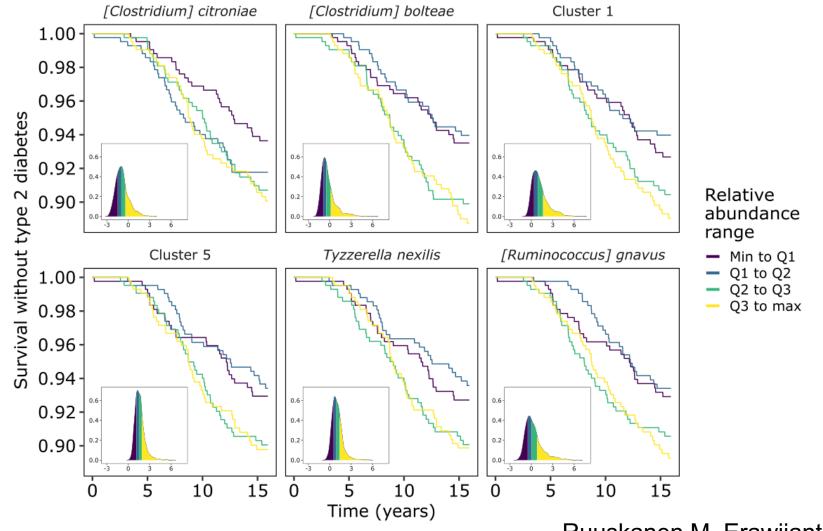
4 taxa and 2 clusters were positively associated with incident type 2 diabetes in both population



- *C. citroniae* has been positively associated with production of trimethylamine N-oxide (TMAO) production, likely connected with intake of red meat, which has been known as type 2 diabetes risk factor¹
- *C. bolteae* has been reported to be enriched in type 2 diabetes patients in previous cross-sectional study along with other opportunistic pathogens² and negatively associated with acabose consumption³
- *T. nexilis* has been observed to decrease drastically in response to feeding participants a soluble fibre, polydextrose⁴
- The abundance *R.gnavus* is potentially related with glucose metabolism regulation and linked to increases in inflammatory cytokines, both of which are related to type 2 diabetes pathophysiology⁵

Ruuskanen M, Erawijantari PP, et al., 2022

The difference in type 2 diabetes incidence between relative abundance quartiles begins to show only after around 5 years of follow-up



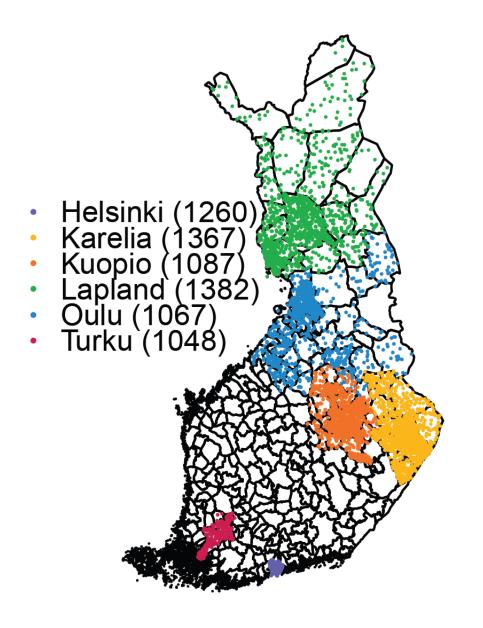
Ruuskanen M, Erawijantari PP, et al., 2022

Table 1. 0-5 years follow			
Predictor	Coefficient	HR	P.value
Cluster 1	0.321	1.378 (95% Cl, 1.066-1.782)	0.0145135889568437
Cluster 5	0.275	1.317 (95% Cl, 1.021-1.698)	0.0337993465813785
[Clostridium] citroniae	0.237	1.267 (95% Cl, 0.958-1.676)	0.0972084481416306
[Clostridium] bolteae	0.258	1.295 (95% Cl, 1.022-1.641)	0.032235957877583
Tyzzerella nexilis	0.173	1.189 (95% Cl, 0.91-1.553)	0.203862710208228
[Ruminococcus] gnavus	0.162	1.176 (95% CI, 0.901-1.534)	0.232735865242045

The species were robustly associated with incident type 2 diabetes only in the groups with 0-10 and 0-15 years of follow-up time

Table 2. 0-10 years follow-up time (n of incident = 235)			
Predictor	Coefficient	HR	P.value
Cluster 1	0.237	1.267 (95% CI, 1.128-1.423)	6.23365780011579e-05
Cluster 5	0.202	1.224 (95% Cl, 1.091-1.373)	0.000577547047524432
[Clostridium] citroniae	0.243	1.275 (95% CI, 1.132-1.437)	6.69719882893286e-05
[Clostridium] bolteae	0.175	1.191 (95% Cl, 1.068-1.329)	0.00173541180356872
[Ruminococcus] gnavus	0.156	1.169 (95% Cl, 1.042-1.311)	0.0075894612035767
Tyzzerella nexilis	0.139	1.149 (95% CI, 1.022-1.292)	0.020194545301951

Table 3. 0-15 years follow-up time (n of incident = 404)			
Predictor	Coefficient	HR	P.value
Cluster 1	0.201	1.223 (95% Cl, 1.118-1.338)	1.15537978015434e-05
Cluster 5	0.184	1.202 (95% CI, 1.1-1.314)	4.78164969970047e-05
[Clostridium] citroniae	0.191	1.211 (95% CI, 1.103-1.329)	5.84181218846101e-05
[Clostridium] bolteae	0.156	1.169 (95% CI, 1.075-1.272)	0.000286154330023966
[Ruminococcus] gnavus	0.143	1.153 (95% Cl, 1.056-1.26)	0.0015874734461806
Tyzzerella nexilis	0.15	1.162 (95% Cl, 1.063-1.27)	0.000916898009056105



SUMMARY AND FUTURE DIRECTIONS

 Our results agree with previous finding and robust across geographical differences

What next?

- Comparing the predictive capability of taxonomic signatures with conventional risk factors
- Confirming the findings with a similar cohort setting (meta-analysis)
- Explore the underlying mechanism of actions:
 - The comprehensive analysis supported by life habit (diet) and other supporting data

Coming soon.....





Finnish institute for health and welfare











