

# Functional survey of the pediatric multiple sclerosis microbiome

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# **INTRODUCTION & PURPOSE**

We examined the gut microbiome functional potential by metagenomic analysis of stool samples from pediatric multiple sclerosis (MS) cases and matched controls using a case-control design.

## METHODS

Persons ≤21 years old enrolled in a Canadian Pediatric Demyelinating Disease Network study

All MS cases met McDonald criteria, had symptom onset <18 years of age and had either no prior disease-modifying drug (DMD) exposure or

## **RESULTS (CONTINUED)**

	*			
		•	MS vs. control	
*			DMD naïve MS vs. control	
			DMD exposed MS vs. control	p<0.05*
			DMD naïve vs. exposed MS	P<0.005**

**Metabolic Pathways -** *Relative Abundance* 

## **Metabolic Pathways -** *Prevalence*

	Methanogenesis	L-glutamate degradation	Flavin biosynthesis	
30%	*	*	*	
88%		*	*	

were exposed to beta-interferon or glatiramer acetate only 20 MS cases were matched to 20 unaffected controls by:

• Sex, age at stool sample collection (± 3 years), stool consistency (Bristol Stool Scale) and, when possible, by race

Shotgun metagenomic reads were generated using the Illumina NextSeq platform.

We compared:

- 1. Functional diversity of enzymes (Enzyme Commission numbers) and proteins (KEGG orthology) using Wilcoxon Rank Sum test
- 2. Metabolic pathways (MetaCyc) <u>relative abundance</u> and <u>prevalence</u>
- By disease status (MS case or unaffected control)
- By disease-modifying drug exposure (DMD *naïve* vs. *ever* exposed MS case vs. unaffected control)
- 3. Gene ontologies (GOs) <u>relative abundance</u> and <u>prevalence by</u> disease status
- Differential abundance analyses was assessed using ALDEx2 (Wilcoxon Rank Sum test).
- Differential proportional analyses (prevalence) was assessed using the Fisher Exact test



Homolactic fermentation: lactic acid production; associated with anti-inflammatory effects<sup>1</sup>.

**Peptidoglycan maturation:** components of the bacterial capsule, found in nearly all bacteria, circulate throughout human body and are necessary for proper immune cell homeostasis<sup>2</sup>. *Higher for MS DMD naïve vs exposed* 

Both pathways: Lower for MS cases vs controls, Lower for MS DMD exposed vs controls

#### **Gene Ontology -** *Relative Abundance*

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MS cases were enriched (vs controls) for:

- **Methanogenesis:** Methane production by Archaea
- L-glutamate degradation: Produces propionate, a short-chain fatty acid, from amino acid glutamate
- Flavin biosynthesis (archaea): Produces riboflavin (vitamin B2)

Differences were not significant for the DMD naïve vs. exposed MS cases, p>0.05

**Gene Ontology -** *Prevalence* 



Viral DNA genome packaging

Methanogenesis



## RESULTS

## **Characteristics of the pediatric-onset multiple sclerosis** cases and unaffected controls

Characteristic	MS cases, n=20	Controls, n=20			
<b>Female,</b> n (%)	16 (80%)	16 (80%)			
Age at stool sample collection, years: mean (SD)	16 (4)	15 (3)			
Age at symptom onset, years: mean (SD)	13 (4)	N/A			
Race: white, n (%)	11 (55%)	9 (45%)			
Body Mass Index: mean (SD)	23 (5)	21 (4)			
Hard stool (Bristol stool scale, types 1-2), n (%)	4 (20%)	4 (20%)			
Dietary metrics (Block Kids Screener): mean (SD)					
Energy (kcal/day)	950 (337)	1151 (535)			
Fibre (g/day)	9 (5)	12 (7)			

All cohort characteristics were similar between MS cases and controls (*p*>0.05, Wilcoxon test)

DMD use for the MS cases (pre-stool sample)				
Naïve	8 (40%)			
Exposed	12 (60%)			
Beta-interferon	7 (35%)			
Glatiramer acetate	5 (25%)			



#### **Functional diversity**

Controls vs	s. MS cases	Con	ntrols vs DMD e	xposed vs naïve MS
Dichnoss	Inverse Simpson		Dichnoss	Inverse Simpson

## REFERENCES

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## CONCLUSION

No overall difference in functional diversity for the pediatric onset MS cases vs controls. However, relative to controls, the MS cases exhibited:



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 Archaea-related methanogenesis Higher

- Archaea-related Vitamin B2 (riboflavin) production
- Viral activity
- Iron acquisition via enterobactin
- Heavy metal activity
- L-glutamate degradation (to propionate; a short-chain fatty acid) Lower Peptidoglycan maturation
  - Homolactic fermentation (lactate production)
  - Carbohydrate degradation
  - Glycolysis

Peptidoglycan maturation differed by disease-modifying drug status; for example was higher for the DMD naïve vs exposed MS cases.

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