

Probiotics, Prebiotics, and Synbiotics

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Yogurt: A Wonder Food?

by the American Institute for Cancer Research

The body benefits from a healthy supply of "good" bacteria in the digestive tract, according to many researchers. A lack of beneficial bacteria among the microorganisms in the gut is thought to contribute to many health problems, including cancer.

Probiotic Foods

Yogurt / Kefir (fermented milk drink) / Sauerkraut

Tempeh (cake made of fermented cooked soybeans)

Miso (fermented soybean paste)

probiotics

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Probiotics

Definition

- Nutritional supplement
- Contains 1 or more cultures of living organisms
 - Typically bacteria or yeast
- Modify the endogenous microflora
- Have a positive effect on the host



Prebiotics

Definition

- Nondigestible food ingredients
 - Fructo-oligosaccharides (chicory, inulin)
 - Lactulose
- Positively affect the endogenous flora
- Stimulate the growth of one or a limited number of bacterial species
 - FOS⇒Bifidobacteria
 - Lactulose⇒Lactobacilli

Synbiotics

Definition

- A probiotic organism in combination with its prebiotic food
- Providing both the organism and substrate at the time of ingestion may offer improved chance of survival in GI tract

Intestinal Flora

- 10^{12} viable bacteria/gram of large bowel content
 - More than total cells in the human body
 - More than total humans who have ever lived
- At least 17 families
- At least 50 genera
- 400-500 species in any single person
- 80-90% unculturable



The Normal Human Microflora - Birth

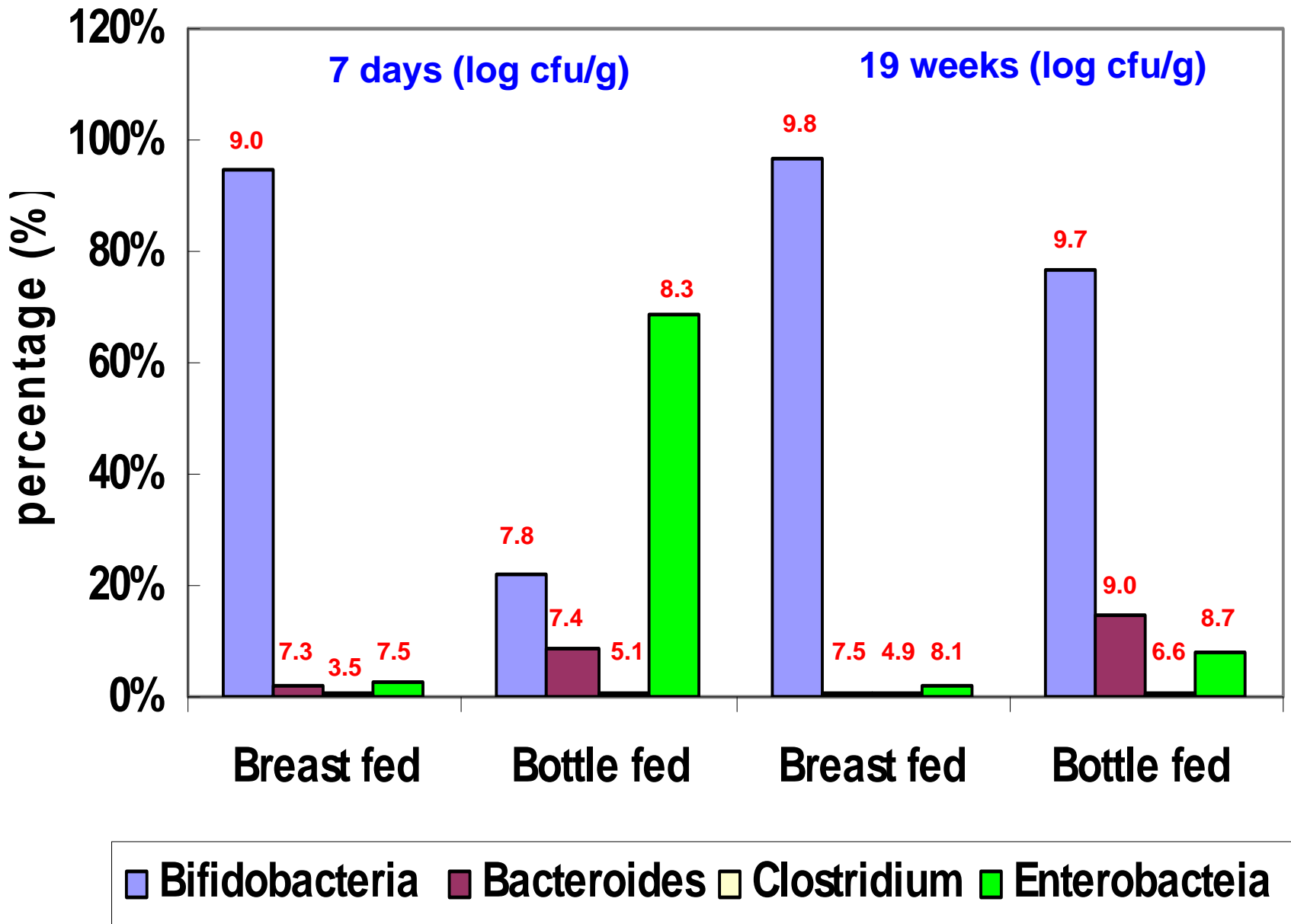
0 to 2 days: The newborn infant is microbiologically sterile. Its first flora is acquired from vaginal, skin and rectal microflora of the mother

Dominant Types:

- ❖ Lactobacilli: Mainly *acidophilus* types
- ❖ Streptococci: Non-haemolytic
- ❖ Enterobacteria: Various including *E. coli*

2 days to Weaning: Highly dependent on breast or bottle feeding

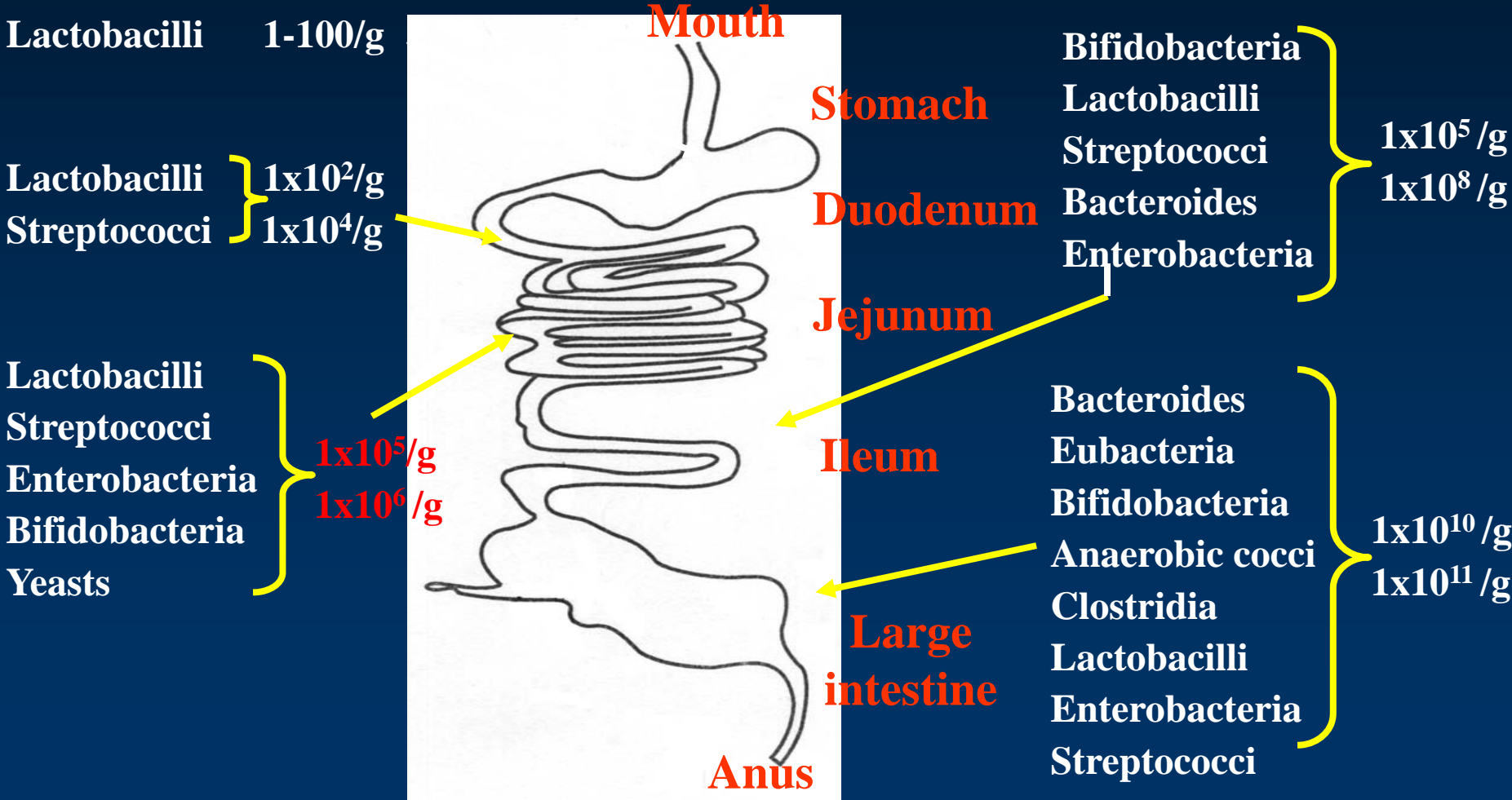
	2 - 7 days		1 - 19 weeks	
	Breast fed (log cfu/g)	Bottle fed (log cfu/g)	Breast fed (log cfu/g)	Bottle fed (log cfu/g)
<i>Bifidobacteria</i>	9.0 (95%)	7.8 (22%)	9.8 (97%)	9.7 (77%)
<i>Bacteroides</i>	7.3 (2%)	7.4 (8.7%)	7.5 (0.5%)	9.0 (15%)
<i>Clostridium</i>	3.5 (<1%)	5.1 (<1%)	4.9 (<1%)	6.6 (<1%)
<i>Enterobacteria</i>	7.5 (3%)	8.3 (69%)	8.1 (2%)	8.7 (8%)



The Normal Human Microflora - Adult

- ❖ The intestinal microflora acquires adult characteristics and is fully formed by two years of age
- ❖ It is important to note the variation in number and type of microbial species in the different parts of the intestine

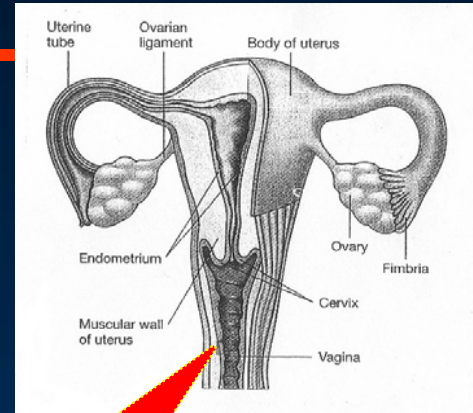
Typical Microbial Flora of the Gastro-intestinal Tract of Man



The Protective Effect of the Human Microflora – Prevention of Candidiasis

Normal condition

Candida overgrowth



Occasional *Candida* cell

Vaginal epithelial surface



Protective lactobacilli depleted

Candida albicans overgrow and change to 'hyphal' form – some invade cells

Numerous lactobacilli attached to epithelial surface prevent attachment and overgrowth of *Candida albicans*

Inflammatory symptoms

Metabolic Activities of the Normal Flora

❖ Synthesis of vitamins:

- ❖ B-vitamins: B₁₂

- ❖ Folic acid

- ❖ Biotin

- ❖ Riboflavin

- ❖ Vitamin K

❖ Conservation of nitrogen:

- ❖ 30% of urea produced in liver is released into colon (70% urea released in urine)

- ❖ Bacteria recycle urea into amino acids - available to host

Metabolic Activities of the Normal Flora (cont)

- ❖ **Synthesis of short chain fatty acids (SCFA's):**
 - ❖ **The colonic epithelial cells deliver approximately 50% of their energy requirements from butyrate produced by the microflora.**
 - ❖ **Estimated that 5-10% of the total body energy is from SCFA's**
 - ❖ **Colonic cells deprived of butyrate begin to atrophy within approximately 5 days. This decreases integrity of mucosal barrier and causes mucous permeability to increase dramatically**
 - ❖ **Relatively low numbers of colonic flora (notably eubacteria and peptococci) produce butyric acid: estimated production is 100mmol/day**

Luminal Nutrition and Intestinal Conditioning

- ❖ G.I tract mucosa is only body tissue with a systemic and luminal nutritional source
- ❖ Over 50% of nutrition of small and large intestinal mucosa is luminal

Energy Source						
	Glucose	Glutamine	Butyrate	Aspartate	Acetate	Propionate
Duodenum	30%	60%	-	10%	-	-
Jejunum	20%	70%	-	10%	-	-
Colon	5%	5%	60%	-	20%	10%

Metabolic Activities of the Normal Flora (cont)

❖ Detoxification and toxin production:

The microbial flora can detoxify and positively transform many substances:

- ❖ Heavy metals (by binding and by enhancing excretion from systemic circuit)
- ❖ Biotransformation of plant polysaccharides releasing lignases and phyto-estrogens (iso-flavones) by colonic flora (colon and breast cancer)
- ❖ Release of quercetin by bacterial β -galactosidase from fruit carbohydrates. Quercetin & rutin have been shown to be powerful anti-mutagens and can also show cancer-promoting properties
- ❖ Plant polyphenols such as those contained in grape skin/seed extracts are only absorbed in the colon following interaction with microflora
(Lemaire, 2004 – personal comm)
- ❖ Evidence that depending on the type of flora, release of dietary glucosinolates(isothiocyanates) has effect of stimulating or repressing cytochrome P450 in liver
(Nugon Bauden *et al*, 1998)

Microbial Flora and Production of Carcinogens.

The microbial flora are vigorous producers of carcinogens:

- ❖ **Fecapentaenes: most potent carcinogens found in the intestine. Formed from derivatives of mainly saturated fats**
- ❖ **Heterocyclic amines: can be produced either from high temperature cooked fats or cigarette smoke interacting with protein. Potent tumour producer in prostate, colon and breast. One meal of high cooked fat/protein as in BBQ can produce 200 x normal level of heterocyclic amines in bowel**
- ❖ **Bile acids, nitrosamines, diacylglycerol**
- ❖ **Most active microbes are *Bacteroides* species**
- ❖ **Vegetarians have lower levels of *Bacteroides*, significantly lower levels of carcinogens and significantly lower levels of CRC.**

Probiotics

Preparations of one or more components of the normal microbial flora designed to contribute to the population dynamics, or metabolic/immunological balance, of the intestinal flora, and so confer health benefits to the host

Possible Probiotic Benefits

Nutr Clin Care. 2004 ; 7(2):56-68

Intestinal Disorders

Diarrhea

Antibiotic-associated

Traveler's Pathogen-induced
or infectious

Gastroenteritis

Irritable bowel syndrome

Inflammatory bowel disease

Crohn's disease

Ulcerative colitis

Pouchitis

Lactase digestionOther

Other Medical Disorders

Cancer / Hyperlipidemia

Helicobacter pylori infections

Hepatic diseases

Genitourinary tract infections

Improved immune function

Food substitute in allergies

Nutritional Supplement for Weight Gain

Faliure-to-thrive

Cancer cachexia

AIDS Pancreatitis/cystic fibrosis

Inflammatory bowel disease

Probiotics

Potential Mechanisms of Action

- Inhibition of adhesion
- Immunomodulation
- Production of antimicrobial substances
- Modification of toxins or toxin receptors
- Competition for nutrients
- Reduction in bacterial translocation
- Anti-inflammatory signaling within the epithelium

History

Probiotics: 19th Century

- Pasteur (1877)
 - Observed antagonistic interaction between bacterial strains
 - Suggested that non-pathogenic bacteria should be used to control pathogenic bacteria



Probiotics: Early 20th Century

- Metchnikoff (1907)
 - Observed that lactic fermentation of milk arrested putrefaction
 - Suggested that consumption of fermented products would offer the same benefit to humans
 - Felt that longevity in Bulgarian peasants was due to ingestion of “soured milks”

Probiotics: Mid to late 20th Century

- 1950's, Ferdinand Vergin publishes article discussing effects of antibiotics on beneficial intestinal bacteria
- 1980's Fuller establishes first definition of probiotics

Commonly Used Bacterial Strains for Probiotic Purposes

Nutr Clin Care. 2004 ; 7(2):56–68

<i>Lactobacillus</i> Species	<i>Bifidobacterium</i> Species
<i>L. acidophilus</i> <i>L. bulgaricus</i> <i>L. casei</i> <i>L. Rhamnosus GG</i> <i>L. plantarum</i>	<i>B. Adolescentis</i> <i>B. animalis</i> <i>B. bifidum</i> <i>B. breve</i> <i>B. infantis</i> <i>B. longum</i> <i>B. thermophilus</i>
Other Lactic Acid Bacteria	Non-Lactic Acid Bacteria
<i>Enterococcus faecium</i> <i>Streptococcus thermophilus</i>	<i>Bacillus subtilis</i> <i>Escherichia coli strain nissle</i> <i>Saccharomyces boulardii</i> <i>Saccharomyces cerevisiae</i>

Selection Criteria for Probiotic Isolates

- ❖ **Must be considered totally non-pathogenic**
- ❖ **Should be species indigenous to the target host**
- ❖ **Should be capable of ‘colonisation’ of digestive tract**
 - **resists stomach acid, bile salts,**
 - **capable of attachment to epithelial cells**
 - **capable of immunomodulation in-vitro**
- ❖ **Scientific evidence especially clinical data is desirable to support use**
- ❖ **Commercial release of the product should be covered by thorough Quality Assurance programme**

Advances in Probiotic Research

Other trial work recently published has shown probiotics at high potency to:

- * General stimulation of immunity and maintenance of intestinal balance **4-8 billion**
- * Reduce incidence of neonatal allergy **2-6 billion**
- * Reduce severity of established allergy **10-40 billion**
- * Reduce severity of inflammatory bowel disease **100-400 billion**
- * Prevent dysbiosis from antibiotic use - **30-100 billion**

Summary of Trials

THE TWO ESSENTIALS:

- ❖ Important to have functional effective strains
- ❖ Adequate numbers are essential

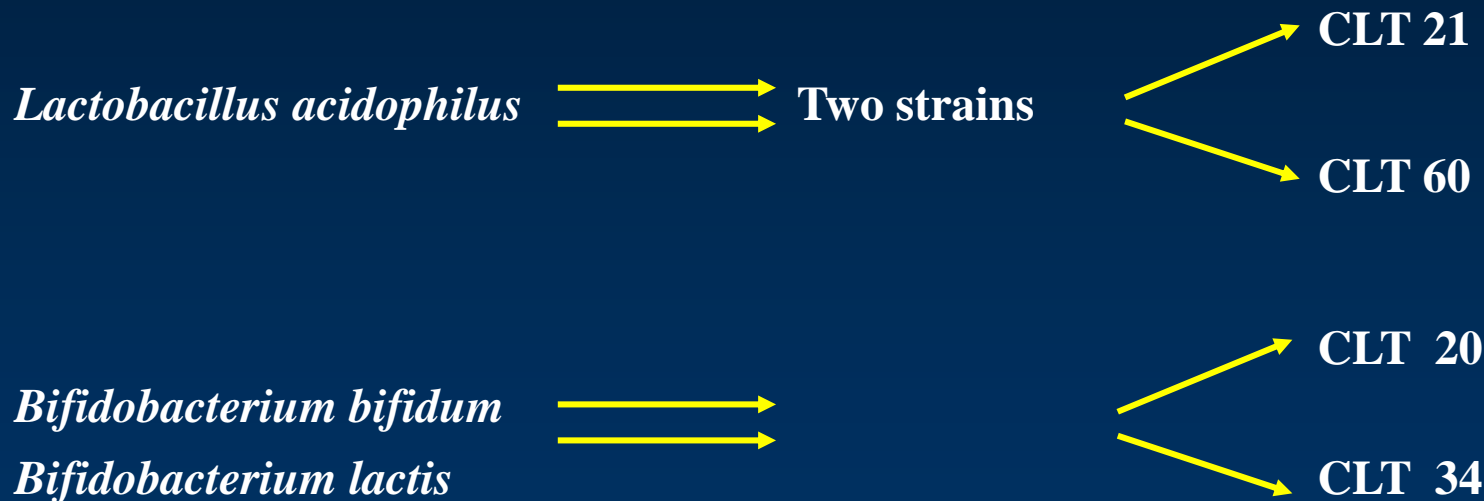
Higher numbers produce a:

- ✓ More profound therapeutic effect
- ✓ More consistently
- ✓ Faster!

New Consortium

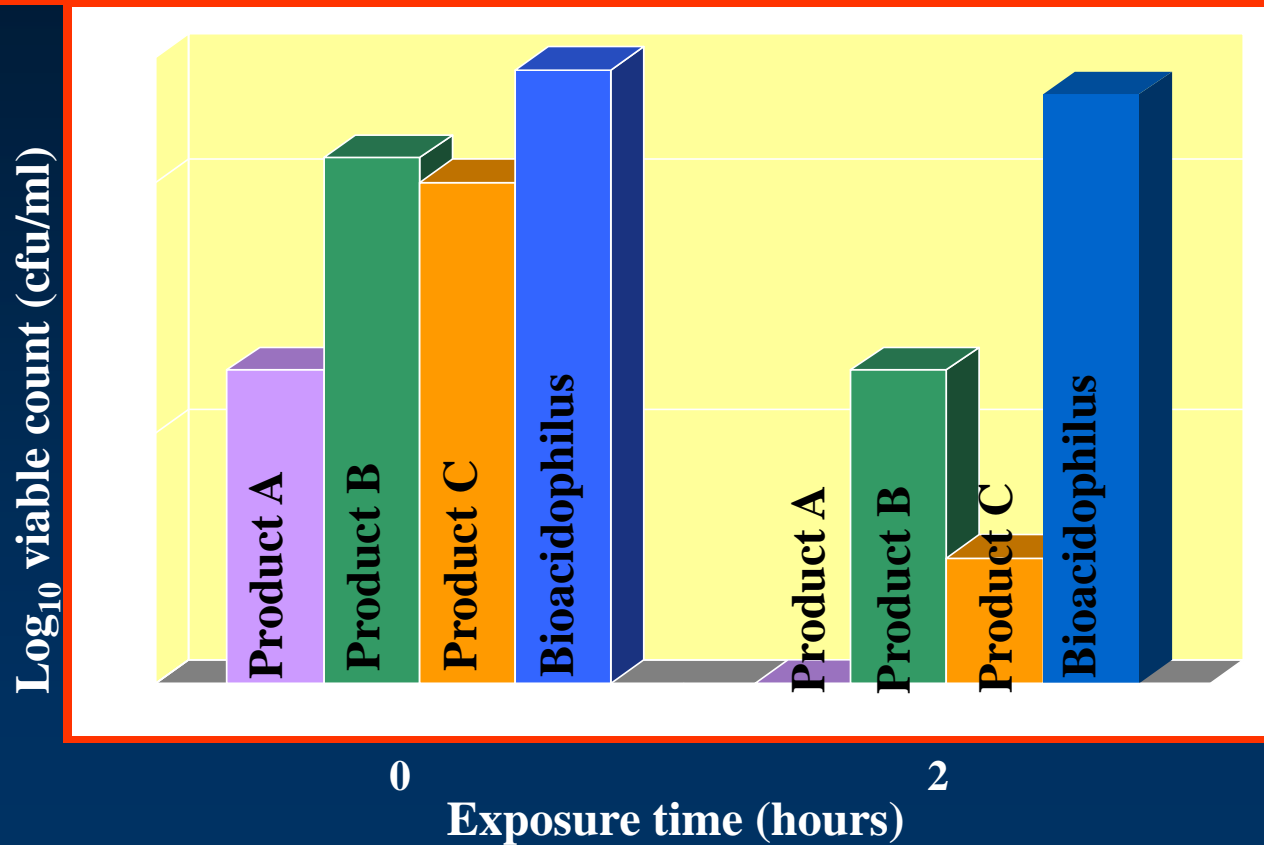
Recent and current trials have been using the:

CONSORTIUM



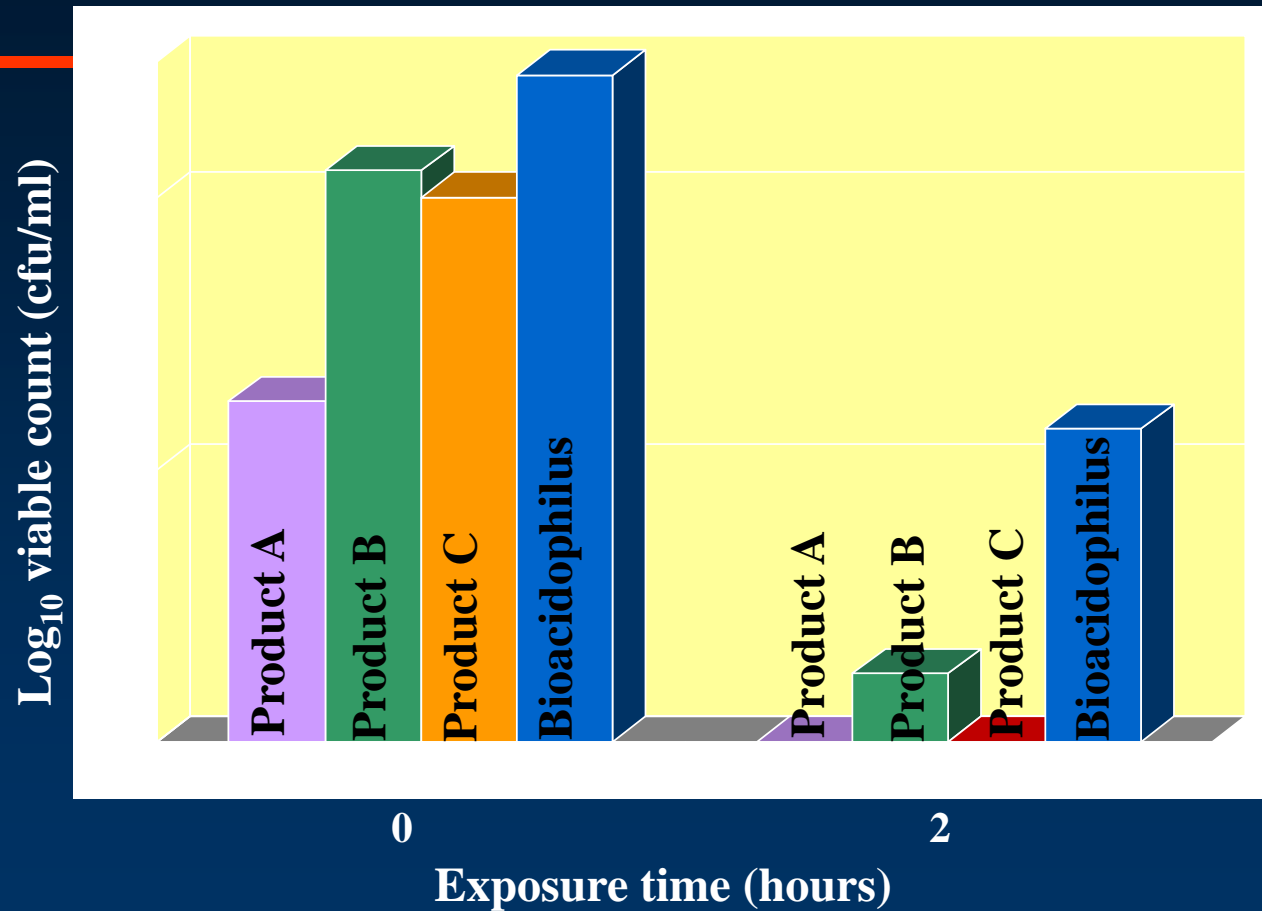
Following screening of numerous human strains, two new strains of *L. acidophilus* and *B. bifidum* were inseparable in terms of efficacy from the original two strains

Passages of Probiotics through the G.I. Tract



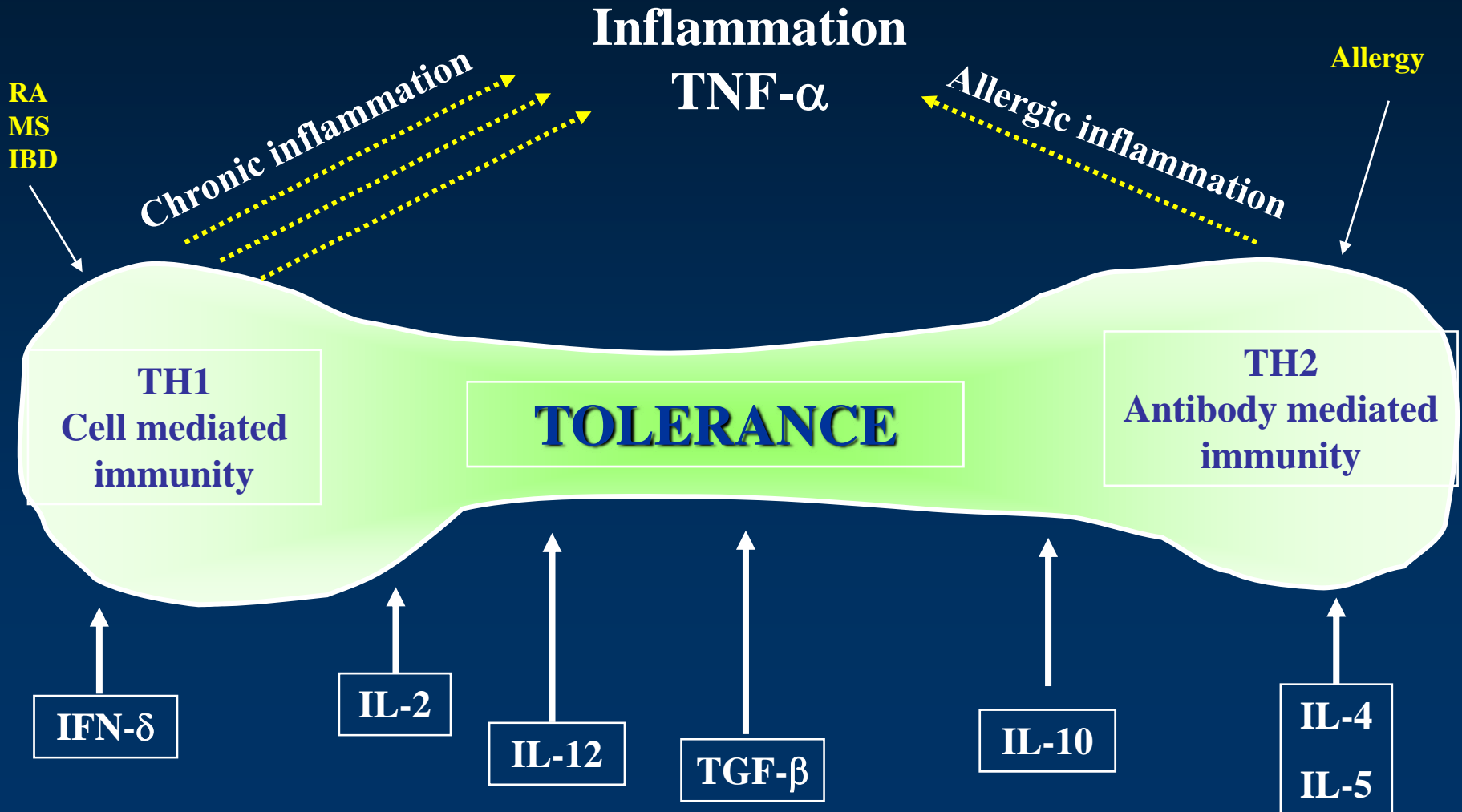
The Acid Test: At a high pH of 4.2, **Bioacidophilus** remains the most viable probiotic

Passages of Probiotics through the G.I. Tract

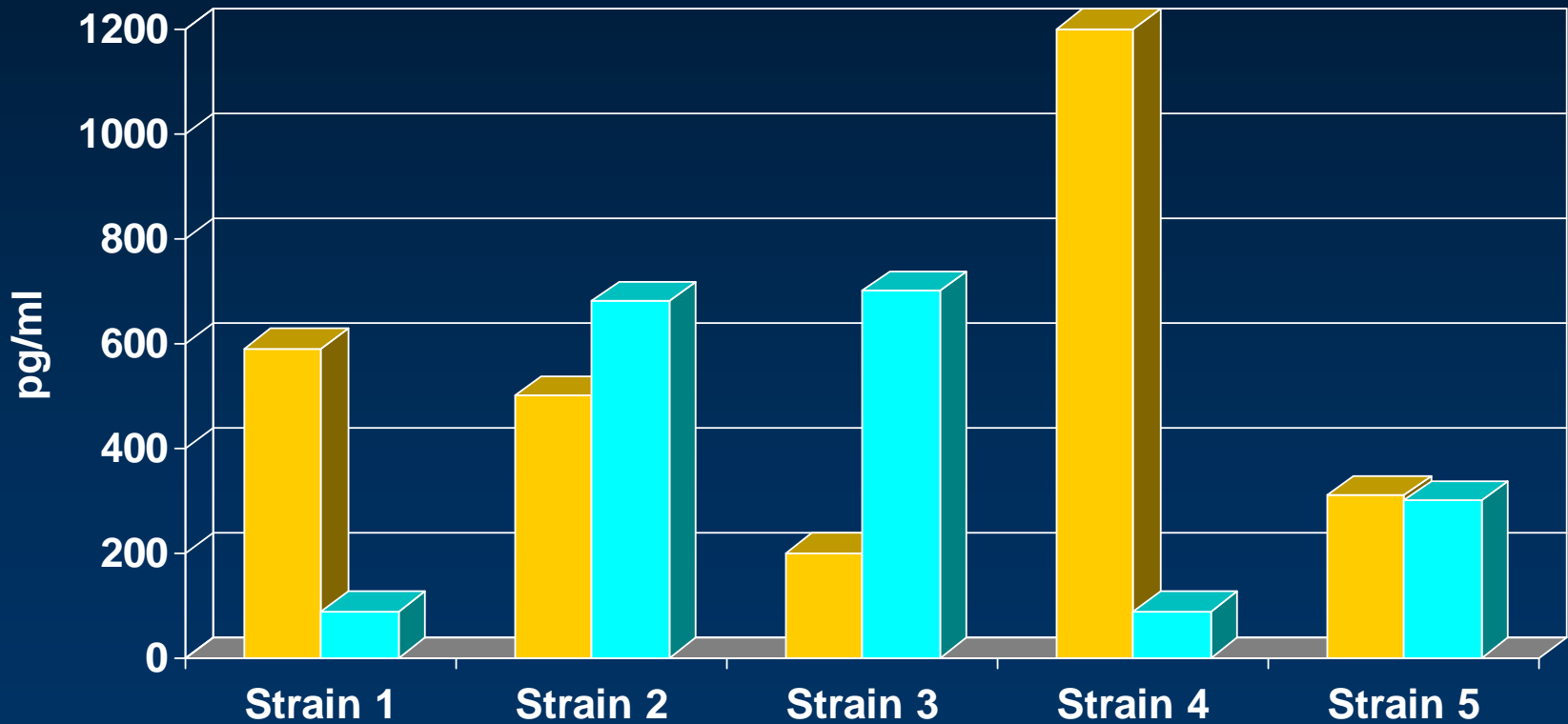


The Acid Test: At a low pH of 2.6, **Bioacidophilus** remains the most viable probiotic

Major Cytokine Influence on Immune Response/Tolerance



Effect of Different Probiotic Strains on *In-vitro* Stimulation of Cytokines in Peripheral Mononuclear Blood Cells (Cont..)



Strain 1 – CLT 21
Strain 2 – CLT 60

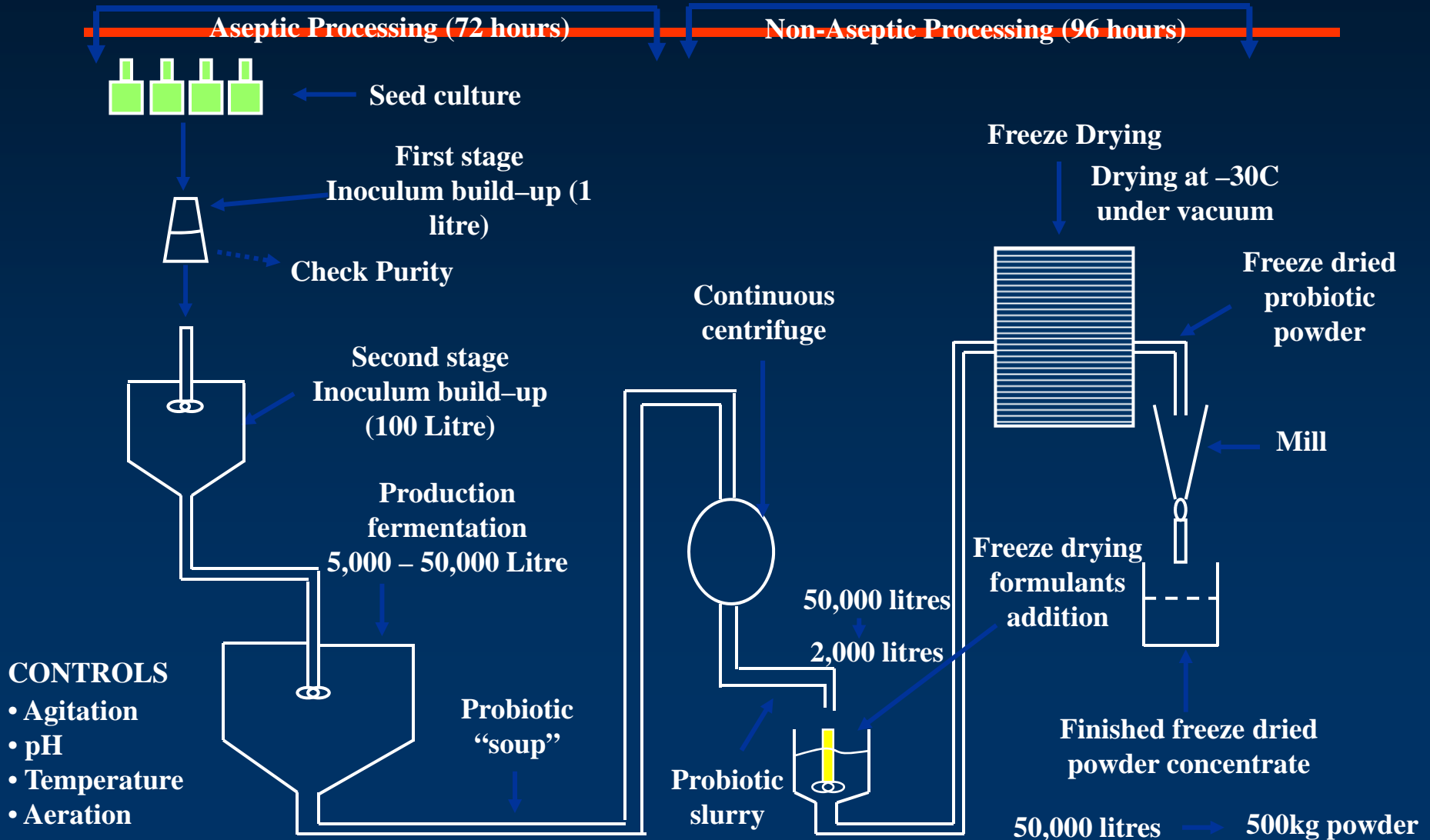
IL-10

IL-12

Strain 3 – CLT 20
Strain 4 = CLT 89 *L.salivarius*
Strain 4 = CLT 34

Stability and Quality Assurance

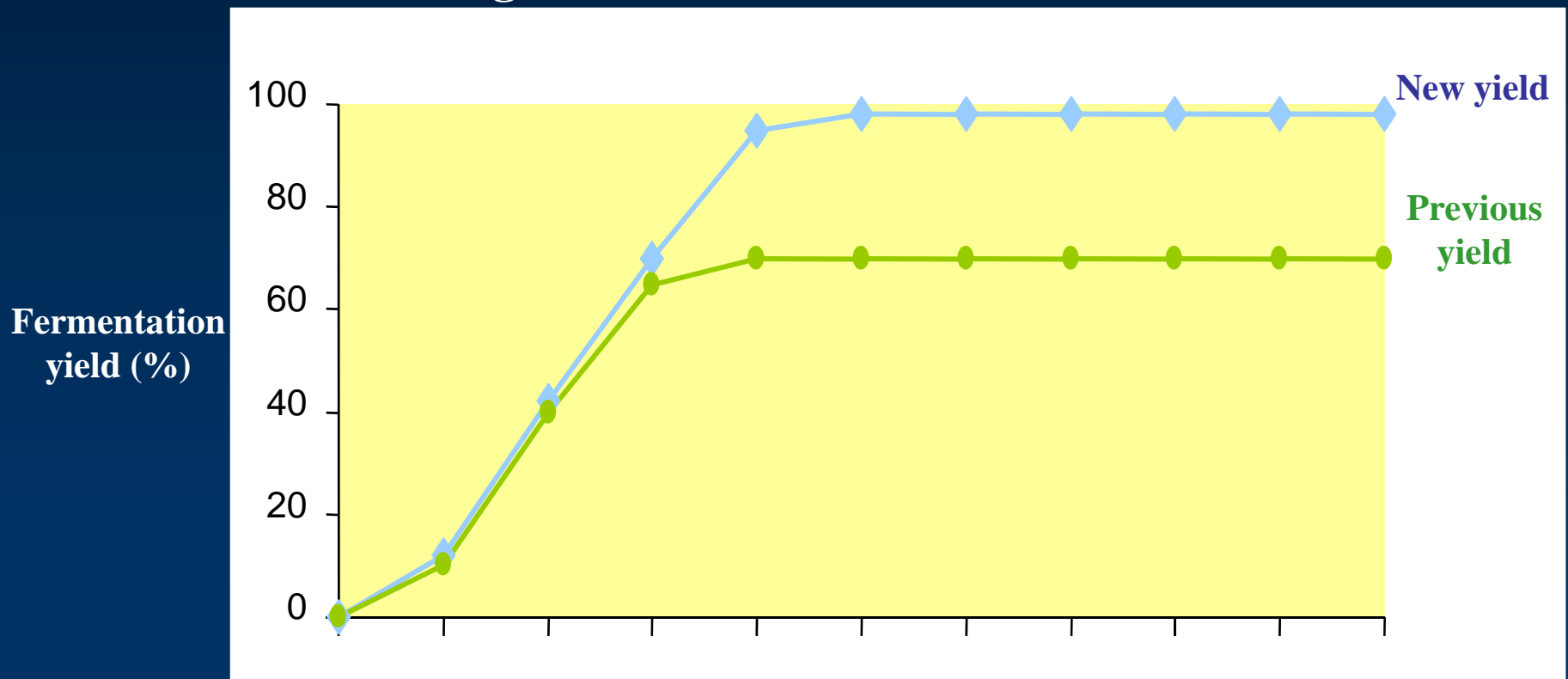
Flow Diagram for Manufacture of Probiotic Cultures



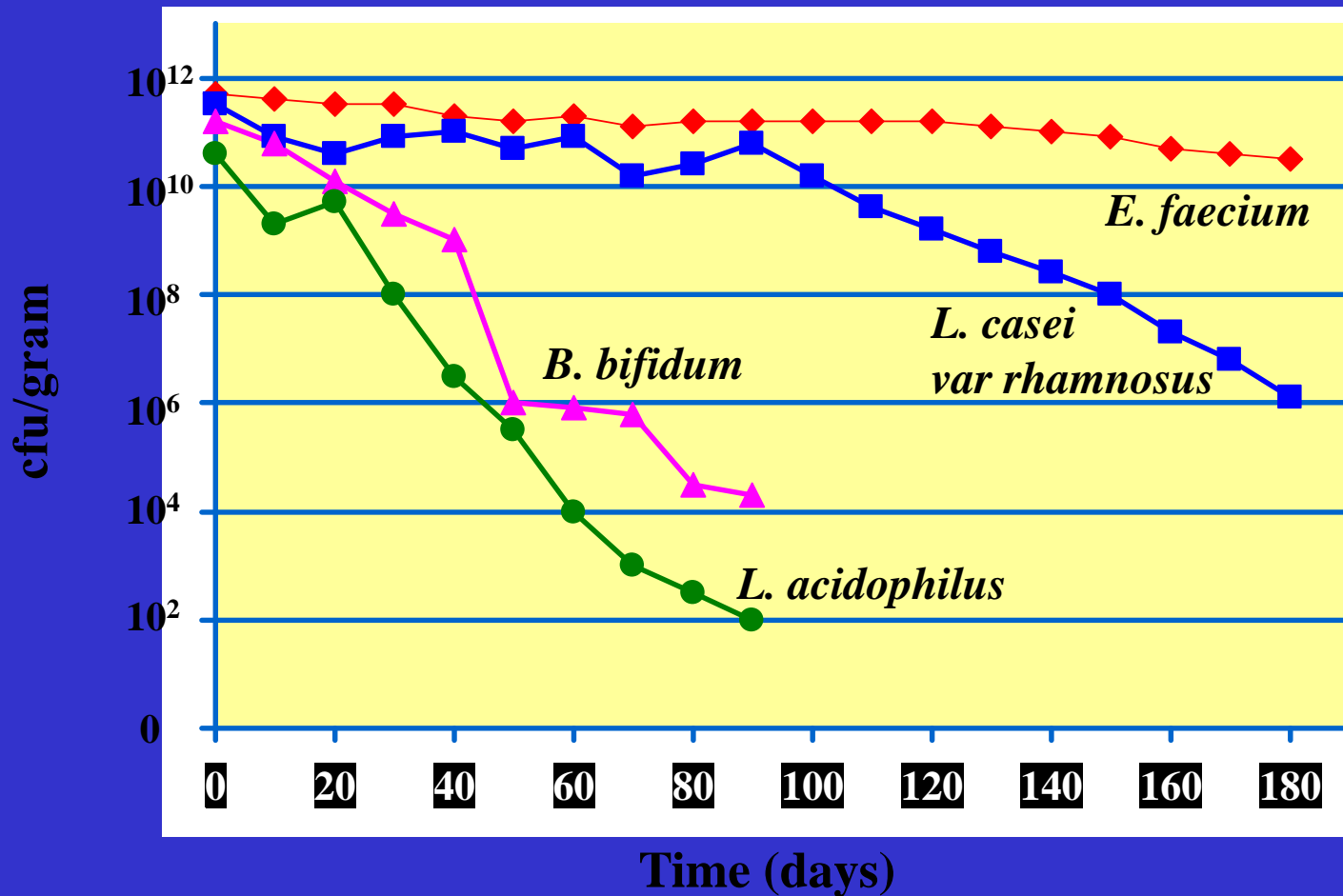
Manufacturing – Technical Breakthrough

group continuously looking to improve:

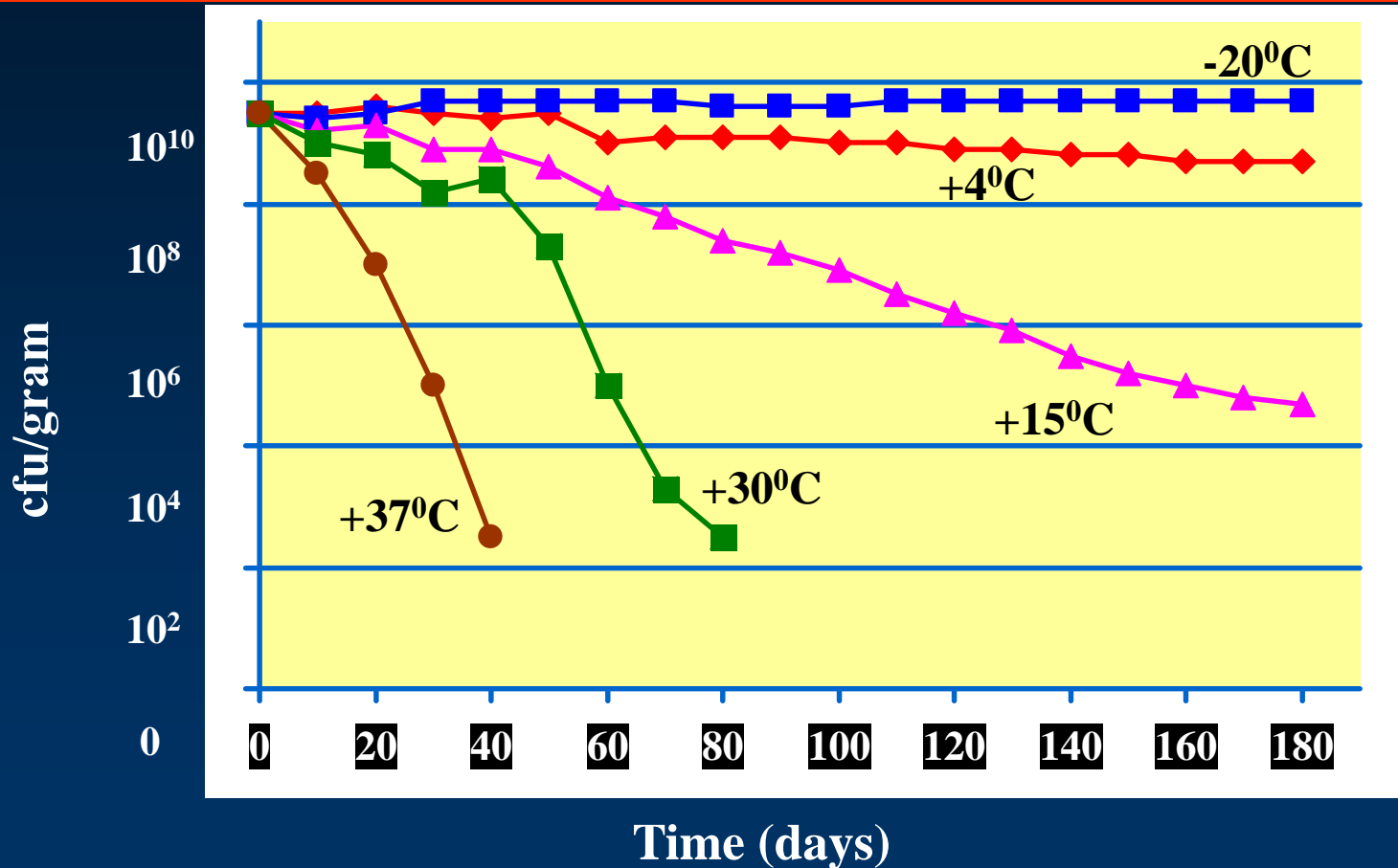
1. Yield of LAB 4 organisms



Effect on Different Freeze-dried Lactic Acid Bacteria of Long Term Storage at 30°C



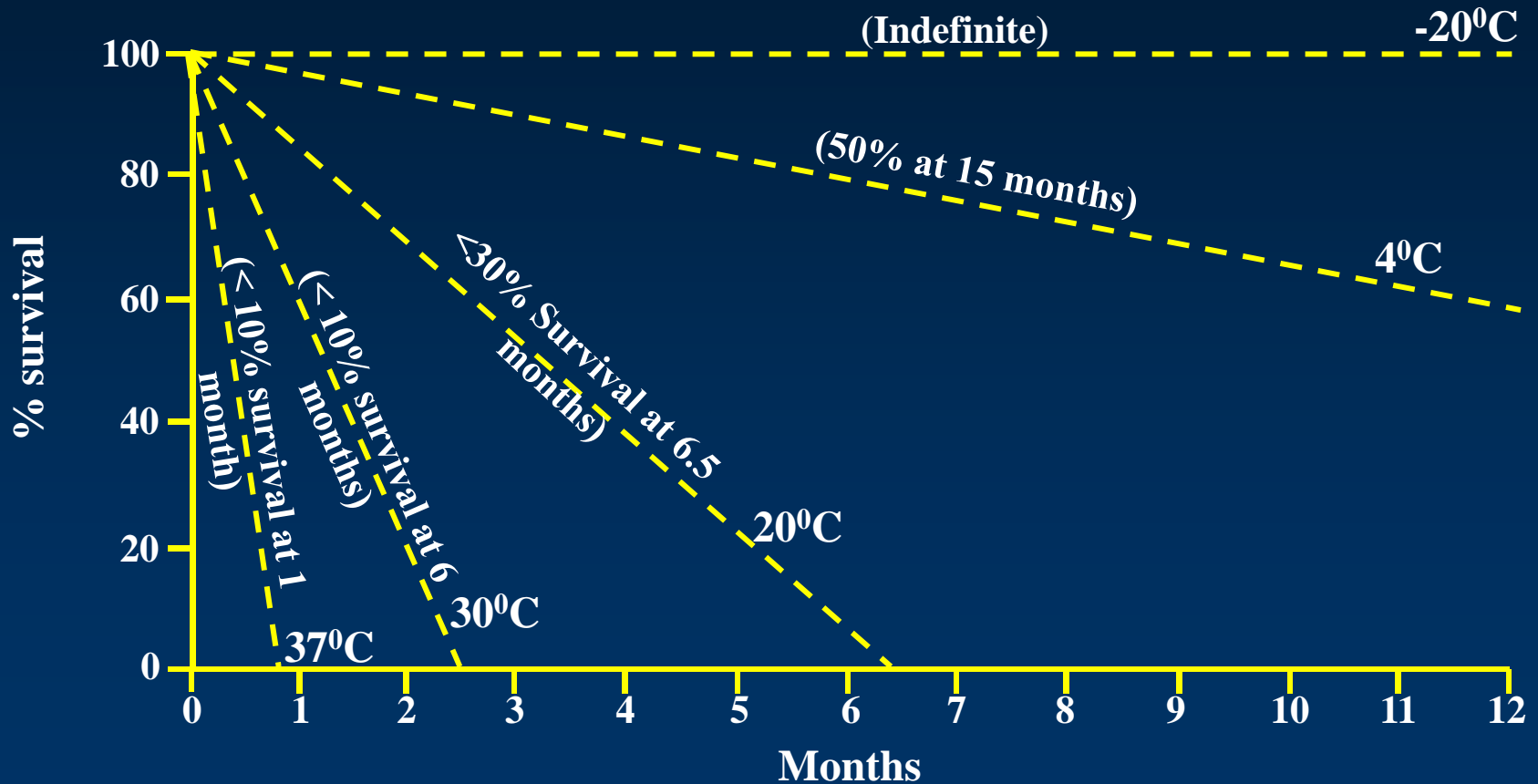
Effect of Variable Temperature Storage on Freeze-Dried *L. acidophilus*



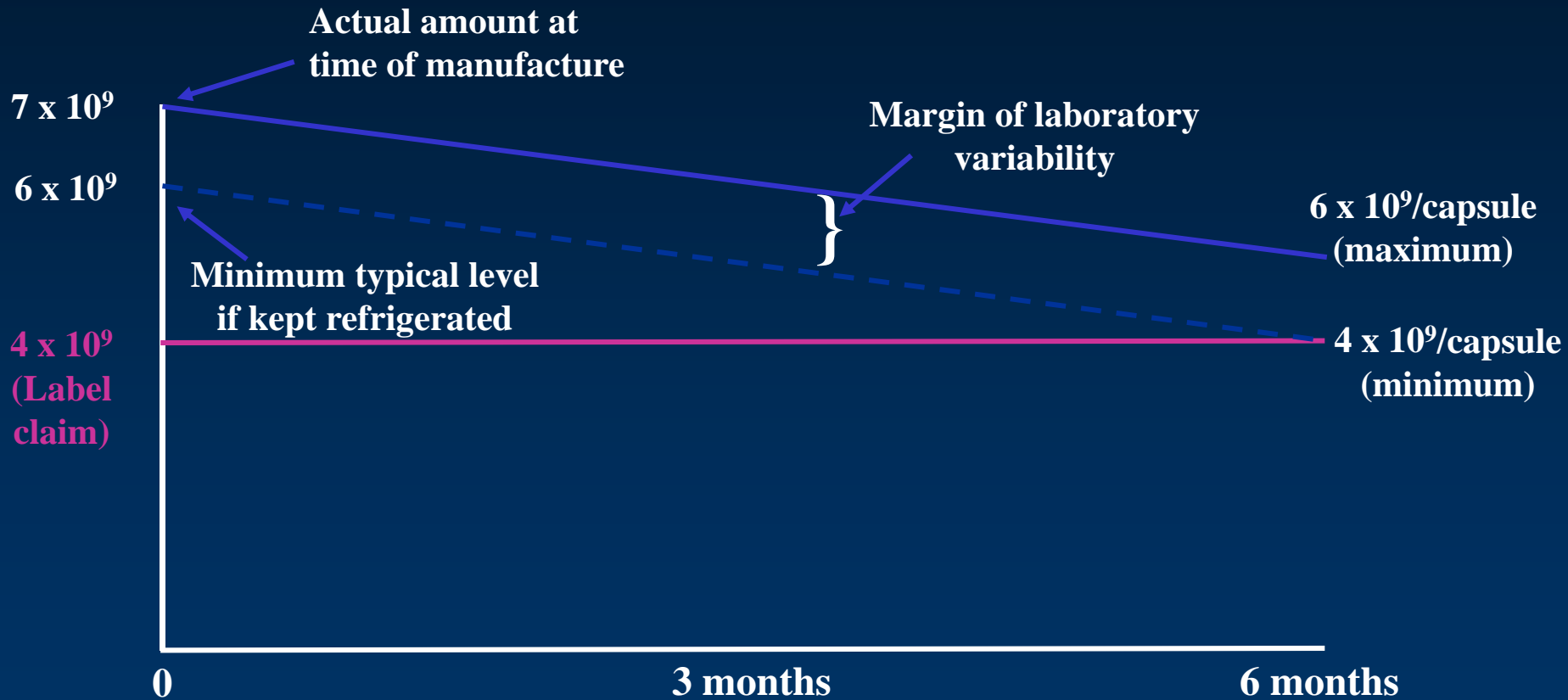
All bacteria freeze-dried under same conditions in same formulation

Improvement in Stability of Probiotics

Previous

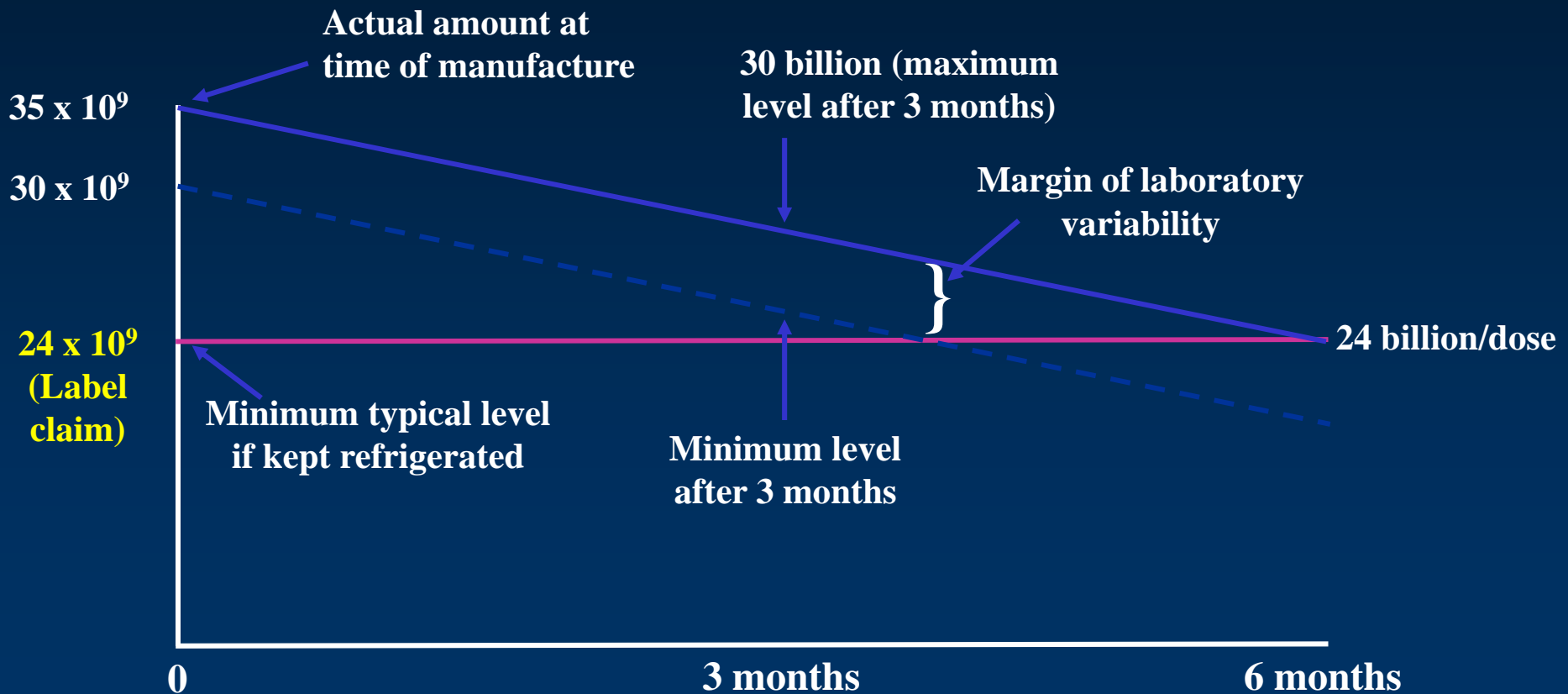


Bioacidophilus Shelf Life at Ambient 15-30 Celcius



**Bioacidophilus (capsules/powders);
Neonate**

Bioacidophilus Forte Shelf Life at Ambient 15-30 Celcius



Improved Stability

Use of overage and improved stability now means that the range of probiotics has:

- ❖ Indefinite shelf life at -20°C
- ❖ 12 months shelf life at 4°C and still has 90% overage
- ❖ 3 – 6 months shelf life at ambient 30°C → still reach label claim!

Parallel Development Pathway both Produce Remarkable Improvements

Clinical trials



Demonstrable clinical effectiveness in human trials

PLUS

Manufacturing technology



Improved yield and stability

**Prebiotics – Good?
Bad? Or Just Another
Source of Fibre?**

Definition

“ Non-digestible food ingredients that beneficially affect the gut by selectively stimulating the growth and/or activity of one or a limited number of bacteria in the colon, that can improve host health”
(Gibson & Roberfroid 1995)

But in Practical Terms:

The function of prebiotics is to specifically promote the growth and/or activity of the desirable types ie. Bifidobacteria, Lactobacilli and others, which consequently produces a relative reduction in undesirable types such as E coli, Klebsiella, Clostridium and Candida.

Types of Prebiotic

Classification	Origin/Manufacturing Procedure
Disaccharides Lactulose Lacticol	From Lactose <i>Synthetic</i> From Lactose <i>Synthetic</i>
Oligosaccharides Fructooligosaccharides (FOS) Soybean oligosaccharides (Trans) Galactooligosaccharides	Legumes, vegetables, cereals <i>Extraction/hydrolysis</i> Soybean <i>Extraction/hydrolysis</i> From lactose <i>Synthetic</i>
Polysaccharides Inulin Resistant starches	Legumes, vegetables, cereals <i>Extraction</i> Legumes, vegetables, cereals <i>Extraction</i>

Fructo-oligosaccharides – Basic Facts

CONTENT OF FOS IN RAW COMMON FOODSTUFFS



Banana 0.3 – 0.7g/100g



Asparagus 2.0 – 3.0g/100g



Garlic 3.6 – 6.4g/100g



Leeks 2.4 – 8.0g/100g



Onions 1.1 – 7.5g/100g



Chicory 19.6 – 26.2g/100g

Wheat Flour 1.0 – 3.8g/100g

(Figures for Inulin are similar)

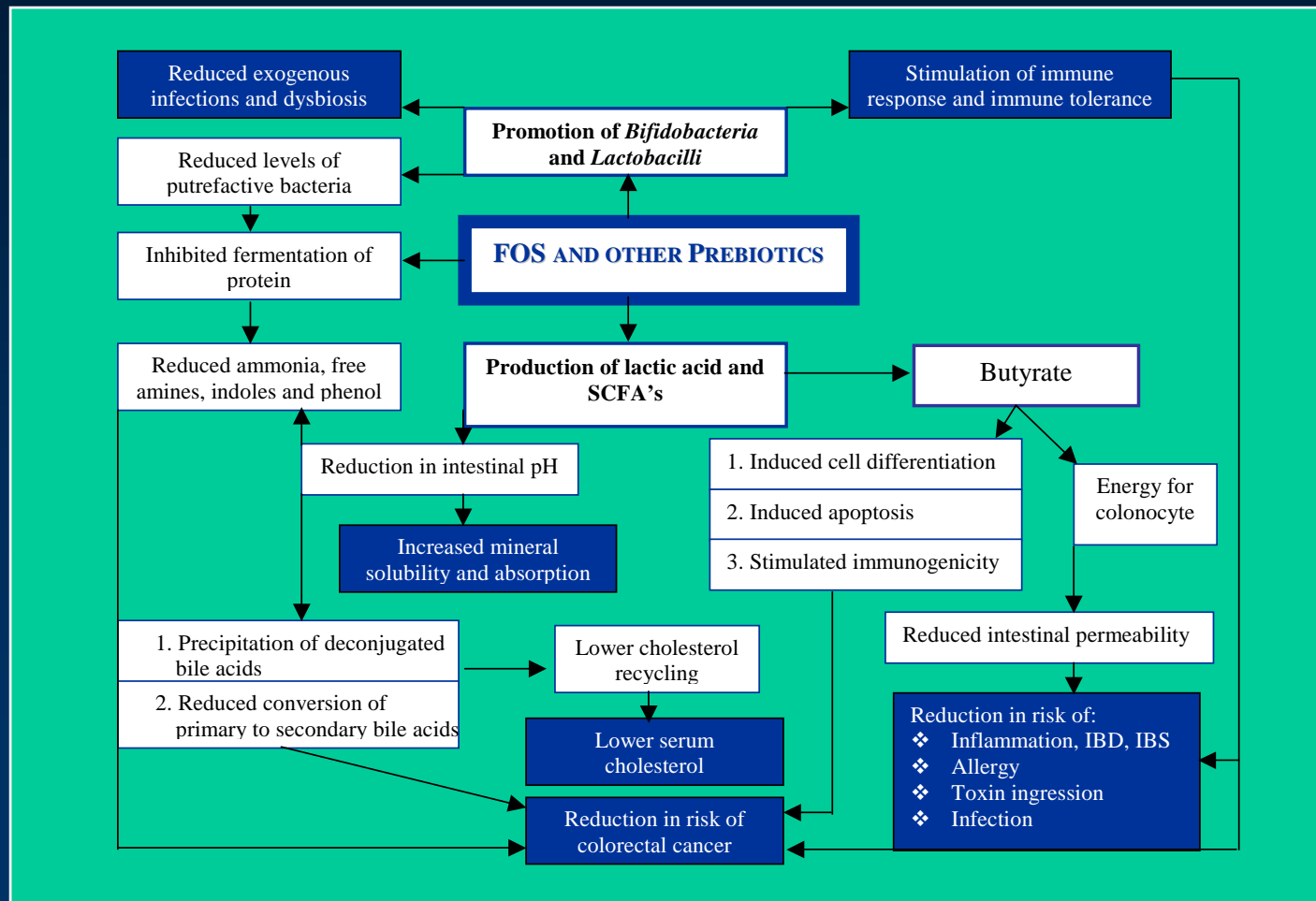
Moshfegh *et al*, 1999

- ❖ US intake range of FOS and Inulin 1-5g/day
- ❖ European intake range of FOS and Inulin 5-18g/day
- ❖ Northern Europe typically at low range Mediterranean Europe at high range

Physiological Effects of FOS

- ❖ The specific stimulation of the “probiotic” component of the normal microflora, ie. *Bifidobacteria* and *Lactobacilli*, together with a concomitant reduction in less desirable microflora components, eg. *Clostridia* and *Coliforms*
- ❖ The stimulation of production of lactate and short chain fatty acids, notably butyrate.

Physiological Effects and Mechanism of Action of FOS



Differential Effects on the Human Microflora

The Bifodogenic Effect

	<u>Organism</u>	<u>Effect of FOS</u>
❖ In Vitro Experiment Action and Animal In-Vivo Experimentation	Bifidobacteria	Increase
	Lactobacilli	Increase
	Clostridia	Decrease
	E.coli	Decrease
	Other Coliforms	Decrease

Wang & Gibson 1993

Davidson et al 1998

Rycroft et al 2001

Djouze&Andrieux 1997

Hussein et al 1999

Differentiation Effects on Human Microflora (Cont'd)

◆ Human Trials – Randomised, Blinded

Amount FOS Fed	Duration	Significant Increase	Significant Decrease	No Change	Reference
15g/day	15 days	<i>Bifidobacteria</i>	<i>Bacteroides</i> <i>Fusobacteria</i> <i>Clostridia</i>	<i>Lactobacilli</i> Gram positive cocci <i>Coliforms</i>	(Gibson et al, 1995)
8g/day	35 days	<i>Bifidobacteria</i>	<i>Bacteroides</i>		(Roberfroid et al, 1998)
10g/litre	28 days	<i>Bifidobacteria</i>		<i>Bacteroides</i> <i>Clostridia</i> <i>E. coli</i> <i>Klebsiella</i> <i>Citrobacter</i>	(Boehm et al, 2002) Pre-term infants
20-40g/day		<i>Bifidobacteria</i>	<i>Enterococci</i>	<i>Candida albicans</i>	(Kleessen et al, 1997)
18g/day	12 days	<i>Bifido/Lactob</i>			(Bouhnik et al, 1996)
8g/day		<i>Bifidobacteria</i>	<i>Bacteroides</i>		(Menne et al, 1997)
5-20g	8 days	<i>Bifidobacteria</i>			(Bornet et al, 2002)

The Effects of FOS on Short Chain Fatty Acid (SCFA) Production

- ❖ Fermentation of FOS and other Prebiotics result in the production of Lactate, Biomass, Gas and SCFA
- ❖ Ratio of SCFA production is relatively constant.

	<u>Acetate</u>		<u>Propionate</u>		<u>Butyrate</u>
Ratio	3	:	1	:	1
Typical amount/day	18g		6g		6g

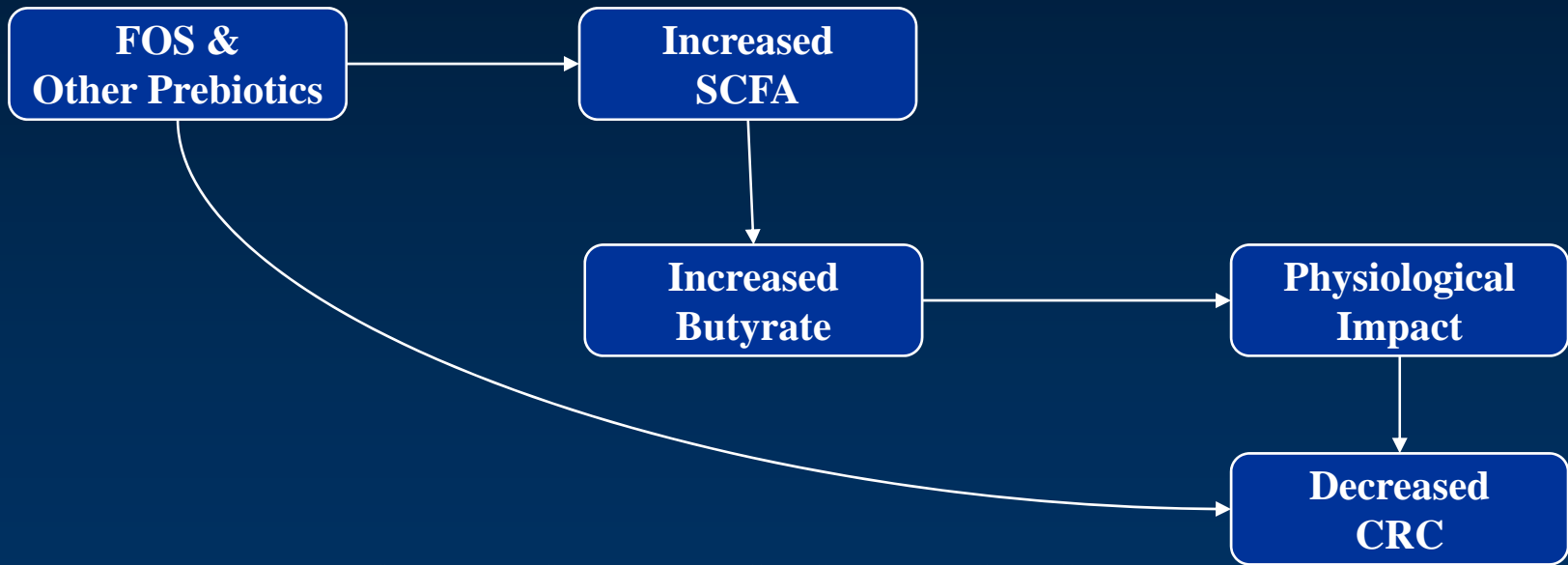
Butyrate – A Metabolic Powerhouse

- ❖ **Over the past 15 years the importance of butyrate to human metabolism has become clear, and is summarized below:**
- ❖ **Butyrate provides 70% of the energy for the colonic epithelial cells, or colonocytes** (Roediger, 1980; Cummings & Macfarlane, 1997)
- ❖ **Butyrate controls the turnover and differentiation of the colonic epithelial cells and is capable of inducing differentiation in colon carcinoma cells** (Smith *et al*, 1998; Velzquez *et al*, 1996)
- ❖ **Butyrate induces apoptosis (programmed cell death) in normal growing colonic cells and reverses resistance to apoptosis in colonic cancer cells** (Bornet, 2002)
- ❖ **Butyrate increases immunogenicity (susceptibility to immune cell policing eg. by NK cells) of cancer cells. Indeed, butyrate in combination with interleukin 2 caused complete clearance of induced colon carcinoma in rats** (Perrin *et al*, 1994; Bornet *et al*, 2002)

Supplementation with FOS Increases Production of SCFA

- ❖ **In vitro models of colonic fermentation show 4-fold increase in butyrate production within 24 hours feeding FOS** *(Rycroft et al, 2001)*
- ❖ **Numerous studies in rats have shown substantial increases in SCFA concentration and decreased faecal pH, following administration of prebiotic oligosaccharides** *(Djouze & Andrieux, 1997; Campbell et al, 1997; Younes et al, 1995)*
- ❖ **In human studies the demonstration of significant levels of SCFA in the human colon was demonstrated using autopsy of sudden death victims** *(Macfarlane et al, 1992)*
- ❖ **Also increase in SCFA production following supplementation of FOS has been demonstrated in several human studies:**
 - Gibson et al, 1995*
 - Stowe et al, 1987*
 - Rumessen et al, 1990*

Prebiotics Decrease Risk of Colorectal Cancer



Any Evidence of Direct Link?

FOS & Mineral Absorption

- ❖ **Increasing acidity in large intestine increases mineral solubility – magnesium, calcium, iron & zinc** (Crittenden 1999; Trinidad *et al*, 1999)
- ❖ **Dietary calcium absorption increases significantly by 26% from 47.8% to 60.1% in human trials where adolescents fed 5g/day FOS** (Van de Heuvel, 1999)
- ❖ **In separate trial dietary calcium absorption increased 20% with adolescents fed 8g/day FOS** (Van Poppel 2000)
- ❖ **Dietary magnesium absorption and plasma magnesium levels showed significant increase of 12% from 30.2% to 33.9% when human subjects supplemented with 10g/day FOS** (Tahiri *et al*, 2001)

FOS and Other Prebiotics Reduces Risk of Colorectal Cancer

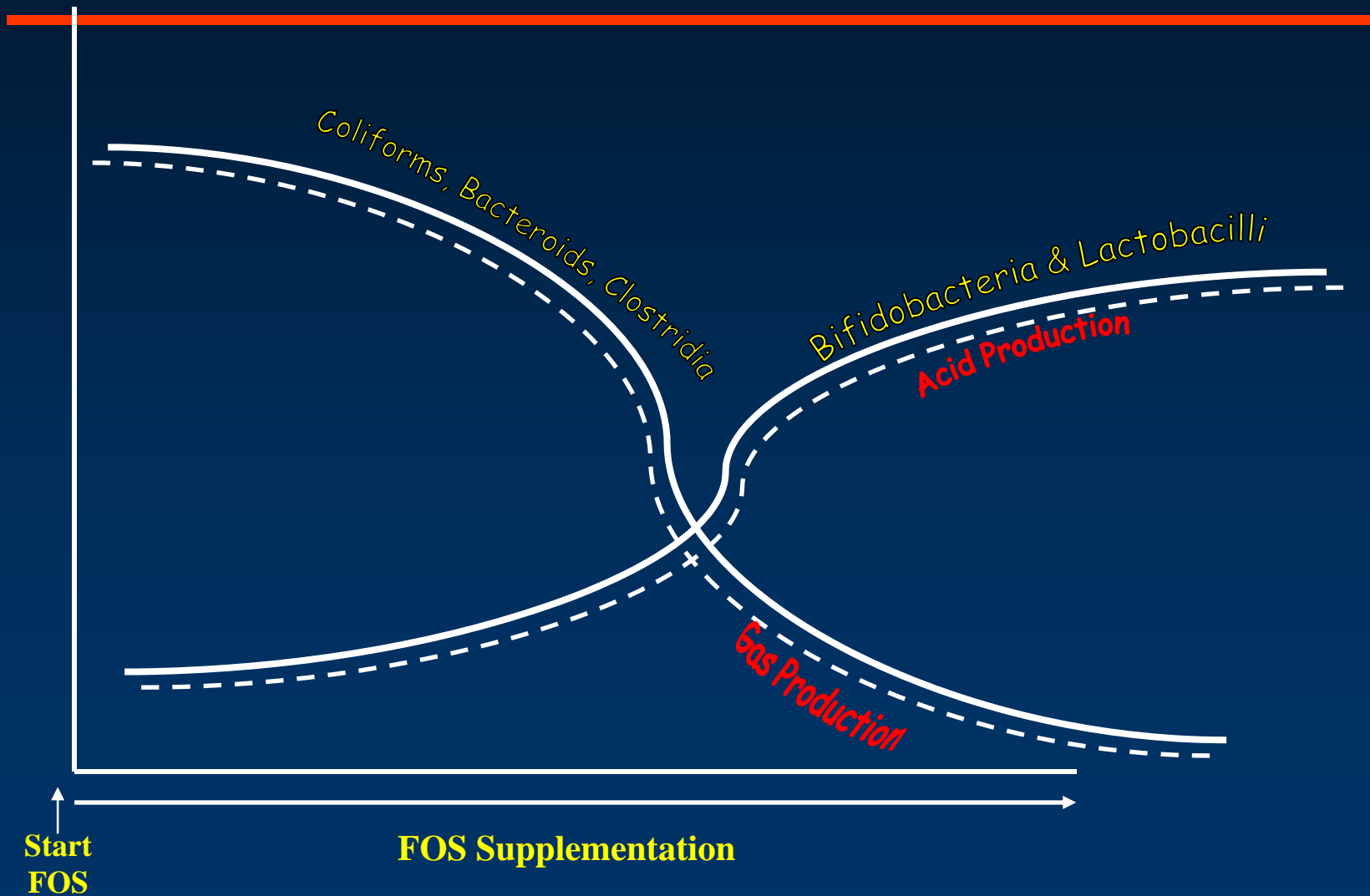
- ❖ **Studies in rats & mice show significant reduction in formation of aberrant crypt foci (ACF) when FOS or inulin is fed**
(Reddy *et al* 1997; Rowland *et al*, 1998)
- ❖ **Combining use of FOS with Bifidobacterium longum gave greater effect (in above) than either individual component.**
- ❖ **In human trials 35.9% of patients with colonic adenomas removed has re-occurrence within 12 months, use of lactulose reduced this to 14.7% - a significant reduction.**
- ❖ **Only butyrate generating prebiotics produce reduction in ACF, insoluble fibre such as starch free wheat bran does not reduce ACF**
(Perrin *et al*, 2001)

Flatulence & Bloating



- ❖ **Consumption of FOS and other prebiotics causes increase in gas production in most people**
- ❖ **This is temporary and in a high majority of people subsides in 2-3 weeks, to level associated with relatively high fibre diet**
- ❖ **Lactobacilli & Bifidobacteria – High acid producers and low gas producers**
- ❖ **Coliforms, Bacteroids etc – Low acid producers and high gas producers**
- ❖ **Good regime is to start supplementation at 2g/day and build to 10g/day over a 2-3 week period**

Flatulence & Bloating



Probiotics + Prebiotics \approx Synbiotics (Combined Benefits)

- ❖ Conceptually, the desirable state or optimising intestinal flora can be achieved by either probiotics or prebiotics.
- ❖ Prebiotics help probiotics become established.
- ❖ Probiotics provide the most physiological beneficial strains.
- ❖ Prebiotics help maintain high populations of probiotics.
- ❖ Combination of prebiotics and probiotics will provide synergistic benefits

(Gibson, 1998)

Thank You

