





Fecal microbiota transplantation: from facts to fiction

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Disclosures

 \checkmark None on the topic





From facts to fiction

✓ History

Where do we stand?
Where could we go ?
One size fits them all?









« *Re-establish the balance of nature...* »

Ben Eiseman 1958











GUT MICROBES 2017, VOL. 8, NO. 3, 253–267









From facts to fiction

✓ History ✓ Where do we stand? ✓ Where could we go ? ✓ One size fits them all?

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Recurrences

The expression:



- is a recurrence.
 - Recurrence: an equation that describes a function in terms of its value on smaller functions

Decreased Diversity of the Fecal Microbiome in Recurrent *Clostridium difficile*–Associated Diarrhea





 ✓ Analysis of 16S clone libraries of the fecal microbiota in patients with antibiotic-associated diarrhea due to *Clostridium difficile*.



Chang et al, Journal of infectious Diseases 2008; 197:435-8

UNIL | Université de Lausanne Faculty of Biology and Medicine

Duodenal Infusion of Donor Feces for Recurrent Clostridium difficile





Microbiota diversity in patients before and after infusion of donor faeces, versus healthy donors



van Nood E, et al. N Engl J Med 2013;368:407–15.



ESCMID EUROPEAN SOCIETY OF CLINICAL MICROBIOLOGY AND INFECTIOUS DISEASES



First line in recurrent C. difficile infections





From facts to fiction

✓ History
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Fecal Microbiota Transplantation for Primary Clostridium difficile Infection





Bretthauer et al, N Engl J Med 2018, 378:26















Multidonor intensive faecal microbiota transplantation for active ulcerative colitis: a randomised placebo-controlled trial



- Multicentre, double-blind, randomised, placebo-controlled trial at three hospitals in Australia
- ✓ Active ulcerative colitis
 - Placebo
 - Colonoscopic faecal microbiota transplantation followed by enemas 5 days per week for 8 weeks.
- Primary outcome was steroid-free clinical remission with endoscopic remission or response at week 8.

	Faecal microbiota transplantation (n=41)	Placebo (n=40)	Risk ratio (95% CI)	p value
Primary outcome				
Steroid-free clinical remission and endoscopic remission or response*	11 (27%)	3 (8%)	3.6 (1.1-11.9)	0-021
Secondary outcomes				
Steroid-free clinical remission†	18 (44%)	8 (20%)	2.2 (1.1-4.5)	0.021
Steroid-free clinical response‡	22 (54%)	9 (23%)	2.4 (1.3-4.5)	0.004
Steroid-free endoscopic remission§	5 (1 2%)	3 (8%)	1.6 (0.4-6.4)	0-48
Steroid-free endoscopic response¶	13 (32%)	4 (10%)	3·2 (1·1-8·9)	0-016

Effect of Fecal Microbiota Transplantation on 8-Week Remission in Patients With Ulcerative Colitis A Randomized Clinical Trial

- ✓ 73 adults with mild to moderately active UC
- ✓ Multicenter, randomized, doubleblind clinical trial in 3 Australian tertiary referral centers
- ✓ Randomization:
 - anaerobically prepared pooled donor FMT (n = 38)
 - autologous FMT (n = 35) via colonoscopy followed by 2 enemas over 7 days.
- Primary outcome: steroid-free remission of UC at week 8
- ✓ FMT associated with a higher likelihood of remission at 8 weeks





Donor Autologous



Clinical impact of pre-transplant gut microbial diversity on outcomes of allogeneic hematopoietic stem cell transplantation



- ✓ 107 allo-HSCT recipients between 2013 and 2015
- ✓ Patients were classified into three groups based on the diversity index:
 - low (<2)
 - intermediate (2, 3)
 - high (>3)
- ✓ Endpoint: acute graft-versushost disease (aGVHD)



- The cumulative incidence of grade II to IV acute graft-versus-host disease (aGVHD) was similar among the three groups
- Composition of microbiota before allo-HSCT, aGVHD patients
 - Significantly higher abundance of phylum Firmicutes (p < 0.01)
 - Lower tendency for Bacteroidetes (p = 0.106)
- ✓ Maintenance of Bacteroidetes throughout allo-HSCT may be a strategy to prevent aGVHD.



Gut microbiome influences efficacy of PD-1-based immunotherapy against epithelial tumors

- Immune checkpoint inhibitors (ICIs) targeting the PD-1/PD-L1 axis induce sustained clinical responses in a sizable minority of cancer patients
- Primary resistance to ICIs can be attributed to abnormal gut microbiome composition
- ✓ FMT from cancer patients who responded to ICIs into germ-free mice ameliorated the antitumor effects of PD-1 blockade, whereas FMT from nonresponding patients failed to do so
- Metagenomics of patient stool samples at diagnosis revealed correlations between clinical responses to ICIs and the relative abundance of Akkermansia muciniphila.







Microbiota Transfer Therapy alters gut ecosystem and improves gastrointestinal and autism symptoms: an open-label study

- Goal: impact of Microbiota Transfer Therapy (MTT) on gut microbiota composition and GI and Autism spectrum disorders (ASD) symptoms of 18 ASD-diagnosed children
- Childhood Autism Rating Scale (CARS): 15 items for diagnosis and severity



Kang et al. Microbiome (2017) 5:10

Long-term benefit of Microbiota Transfer Therapy on autism symptoms and gut microbiota

Vaude Vaude

- ✓ Most improvements in GI symptoms maintained (follow up 2 years)
- ✓ Autism-related symptoms improved even more after the end of treatment.
- ✓ At follow-up, increases in bacterial diversity and relative abundances of Bifidobacteria and Prevotella.
- Long-term safety and efficacy of MTT as a potential therapy to treat children with ASD who have GI problems,
- Double-blind, placebo controlled trial in the future.

Gut microbiota modulates alcohol withdrawal-induced anxiety in mice



Hui-wen Xiao^{a,1}, Chang Ge^{a,1}, Guo-xing Feng^{a,1}, Yuan Li^a, Dan Luo^a, Jia-li Dong^a, Hang Li^a, Haichao Wang^b, Ming Cui^{a,*}, Sai-jun Fan^{a,*}





Transplantation of the gut microbiota from alcohol-fed mice facilitated the development of depressive behavior in the recipients



✓ Alterations of gut microbiota composition might contribute to the development of alcohol withdrawal-induced anxiety,



Toxicology Letters 287 (2018) 23-30

Fecal Microbiota Transplant From a Rational Stool Donor Improves Hepatic Encephalopathy: A Randomized Clinical Trial



- ✓ Open-label, randomized clinical trial with a 5 month follow-up in outpatient cirrhotic men with recurrent HE
- ✓ Follow up at D5, 6, 12, 35, and 150 post- randomisation
- ✓ 10 patients/group



✓ Five SOC and no FMT participants developed further HE (p=0.03)



Bajaj et al, HEPATOLOGY, VOL. 66, NO. 6, 2017

Fecal microbiota transplantation against intestinal colonization by extended spectrum beta-lactamase producing *Enterobacteriaceae*: a proof of principle study



- Goal: Can FMT be an effective treatment in patients carrying ESBL-EB?
- ✓ 15 patients carrying ESBL-producing Enterobacteriaceae (ESBL-EB)
- Seven patients underwent a second FMT after 4 weeks when ESBL-EB remained



✓ FMT be an effective treatment in patients carrying ESBL-EB.





A 5-day course of oral antibiotics followed by faecal transplantation to eradicate carriage of multidrug-resistant *Enterobacteriaceae*: a randomized clinical trial

- Randomized, open-label, superiority trial (Geneva, Paris, Utrecht, Tel Aviv).
- Non-immunocompromised adult patients randomized 1: 1 to
 - no intervention (control) (17)
 - 5-day course of oral antibiotics (colistin sulphate, neomycin sulphate) followed by frozen FMT from unrelated healthy donors (22)
- ✓ Primary outcome was detectable intestinal carriage of ESBL-E/CPE by stool culture 35-48 days after randomization (V4).
- ✓ Non-absorbable antibiotics followed by FMT slightly decreased ESBL-E/CPE carriage compared with controls; this difference was not statistically significant

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Gut microbiota and obesity: implications for fecal microbiota transplantation therapy



Table 1 Changes in microbiota composition associated with obesity.

Models	Disease	Implicated microbiota	Reference
Rat	Obesity	Altered gut microbiota	29,30
Rat	Obesity	Firmicutes ↑, Bacteroidetes ↓	31,32
Human	Obesity	Firmicutes ↑, Bacteroidetes ↓	37, 38, 39, 40, 41
Human	Obesity	Proteobacteria ↑, Bacteroidetes ↑, Campylobacter ↑, Shigella ↑, Lactobacillus ↑, Clostridium coccoides ↑, Bifidobacterium ↑, Akkermansia muciniphila ↓, Clostridium leptum ↓, Bacteroides fragilis ↓, Bifidobacterium catenulatum ↓	43,44
Human	Obesity	H2-producing <i>Prevotellaceae</i> ↑, H2-utilizing methanogenic <i>Archaea</i> ↑	46
Human	Obesity	Enterobacter ↑	48



Kang and Cai, HORMONES 2017, 16(3):22



An obesity-associated gut microbiome with increased capacity for energy harvest

- Obesity is associated with changes in the relative abundance of the two dominant bacterial divisions, the Bacteroidetes and the Firmicutes
- Colonization of germ-free mice with an 'obese microbiota' results in a significantly greater increase in total body fat than colonization with a 'lean microbiota'





Fecal microbiota transplantation for the improvement of metabolism in obesity: The FMT-TRIM double-blind placebo-controlled pilot trial

- ✓24 adults with obesity and mild–moderate insulin resistance
- ✓ Weekly healthy lean donor FMT versus placebo capsules for 6 weeks.
- Despite engraftment, we did not observe clinically significant metabolic effects during the study

Effects of Gut Microbiota Manipulation by Antibiotics on Host Metabolism in Obese Humans: A Randomized Double-Blind Placebo-Controlled Trial



Canton de Vaud ✓ a 7-day antibiotic treatment (amoxicillin/ vancomycin) has no clinically relevant impact on host metabolism in obese humans





Yu et al, PLoS Med 2020 17(3): e1003051

Reijnders et al., 2016, Cell Metabolism 24, 63-74



Regulation of life span by the gut microbiota in the short-lived African turquoise killifish







Smith et al. eLife 2017;6:e27014



Regulation of life span by the gut microbiota in the short-lived African turquoise killifish





- Abx: antibiotic treatment at 9.5 weeks without direct recolonization
- ✓ Omt: same-age GM transfer after antibiotic treatment at 9.5 weeks.
- ✓ Wt: wild-type, untreated fish.
- ✓ Ymt: 6- week-old fish GM transfer after antibiotic treatment at 9.5 weeks



From facts to fiction

✓ History

- ✓ Where do we stand?
- ✓ Where could we go ?

✓ One size fits them all?



lemen

Please stand closer, It's shorter than you think

Please remain seated for the entire performance





Legal environment

Country	Drug	Human tissu
Switzerland, France	x	
Belgium, UK, Denmark		Х
Austria, Estonia, Germany, Ireland, Malta, Netherlands, Portugal, Slovenia,	?	?
USA , Canada	Investigational new drug	
Australia, New Zealand	Unapproved	
Hong Kong	Refused comment	



Perfect donor



Screening questionnaire (specific items for stool donation).

Information	Exclusion criteria	Selection criteria with personal assessment
Co-morbidities	Digestive disorders (acute or chronic diarrhoea) within 3 months prior to donation Known chronic disease History of typhoid fever	Donors with family history of: – Inflammatory bowel disease (relation) – Autoimmune diseases (relation) – Colon cancer (relation and age at onset) Donors with personal history of uncomplicated hypertension or hypercholesterolaemia
Drug treatment	Donor under long term medical treatment ^a	Treatment of uncomplicated hypertension or
	Antibiotic intake within 3 months ^a	hypercholesterolaemia
Travels	Living in tropical areas during the 3 months prior to donation Long-term residence in tropical areas Hospitalizations abroad longer than 24 hours in the 12 months prior to donation (including members of the donor's entourage) ^b	Game consumption (trichinosis screening mandatory)
Age	Minor donor ^c	Aged donor (>65 years) ^d
Weight status	Non limiting	Donor with Body mass index > 30 ^e



Agent	FDA	van Nood	Austria	France
Blood				
HIV 1/2	х	х	х	х
HBV.HAV. HCV	X	X	X	X
HEV				
HTLV ½		х	х	х
TPHA VDRL	х	х	х	х
CMV		х		х
EBV		х		х
Toxoplasma				х
Strongyloides stercoralis		х		х
Trichinella				х
Entamoeba histolytica		х		х
Stool				
Standard	Y	v	V	V
	X	X	X	X
C. Difficile Salmonella, shigella, versinia, campylohacter	X	X	X	X
	^	~	X	X
MDR				×
Vibrio cholorze/parabemolyticus				×
Adenovirus				×
Astrovirus				×
Norovirus				×
Picorpavirus			v	×
Rotavirus	Y		^	A V
Parasites	x	х	x	x



Perfect donor



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Weight status	Non limiting	Donor with Body mass index > 30 ^e

Screening questionnaire/events since the screening visit.

Exclusion criteria	Selection on the basis of individual assessment
Diarrhoea (>3 loose or liquid stools/day) Situations at risk of contamination: – Travel in tropical areas – Contact with human blood (sting, wound, showing, piercing ^a , tattoo ^a) – Sexual high-risk behaviour – Presence of anal lesions caused by Human papilloma virus or Herpes Simplex Virus	Specific events to be investigated: Medical consultation (reason) Contracted disease (type, date and duration) Medication (type, date of last intake) Travel abroad Diarrhoea (>3 loose or liquid stools/day) among members of the entourage (including children) within 4 weeks of donation.



Sokol, Galperine et al. Digestive and Liver Disease 48 (2016) 242-247







Sokol, Galperine et al. Digestive and Liver Disease 48 (2016) 242-247



Multiple donations for frozen formula









Approval of our center since October 2019



Faculty of Biology and Medicine















The Dutch Are Opening Europe's First Donor Bank ... for Poop







Countries with stool bank



[2] "The French Republic"

[3] "The Hong Kong Special Administrative Region of China"

[4] "The Italian Republic"

[5] "The Kingdom of the Netherlands"

[6] "The State of Israel"

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- [7] "The United Kingdom of Great Britain and Northern Ireland"
- [8] "The United States of America"

Highcharts.com © Natural Earth...



Specific Bacteria and Metabolites Associated With Response to Fecal Microbiota Transplantation in Patients With Ulcerative Colitis

Double-blind trial of 81 patients with active UC randomly assigned to groups that received an initial colonoscopic infusion and then intensive multidonor FMT or placebo enemas, 5 d/wk for 8 weeks.





Conclusions

- ✓ Highly efficient in reccurent CDI
- A lot of potential indications
- Regulation in constant evolution
 - Discussion with SwissMedic
 - Modulation regarding sanitary crisis
- Necessity to be associated to a research platform
 - Inovative treatments
 - Microbiota analysis
 - Research protocols

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*Médecine transfusionnelle, Produits lactés et de menstruation, vaccinologie