

Pre- and Probiotics and gut health

A review of the evidence

CAPGAN
ICH London
July 2011

Steve Allen

Outline

- Definitions
- What evidence do we have that informs practice?
 - Prevention of antibiotic-associated diarrhoea
 - Treatment of acute diarrhoea
 - Prevention of NEC in preterm infants
 - Prevention of atopic eczema
- What are the challenges for the research community?



Definitions

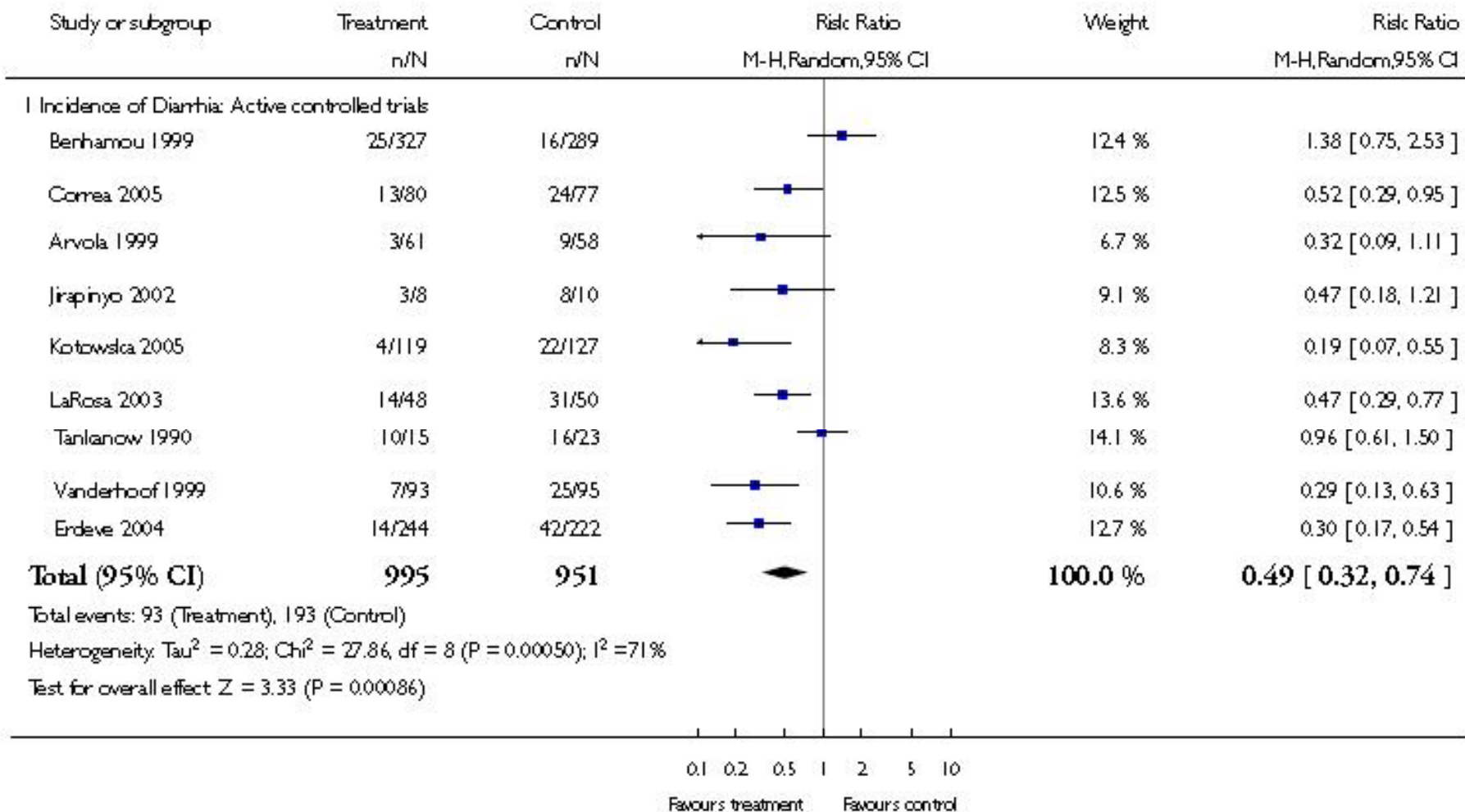
Probiotic: "live microorganisms which, when administered in adequate amounts, confer health benefits on the host"

Prebiotic: "a selectively fermented ingredient that allows specific changes, both in the composition and/or activity in the GI microflora, that confers benefits upon host well-being and health."

Synbiotic: pre- + pro- biotic

Functional food: "health benefit beyond its nutrient content"

Prevention of antibiotic associated diarrhoea



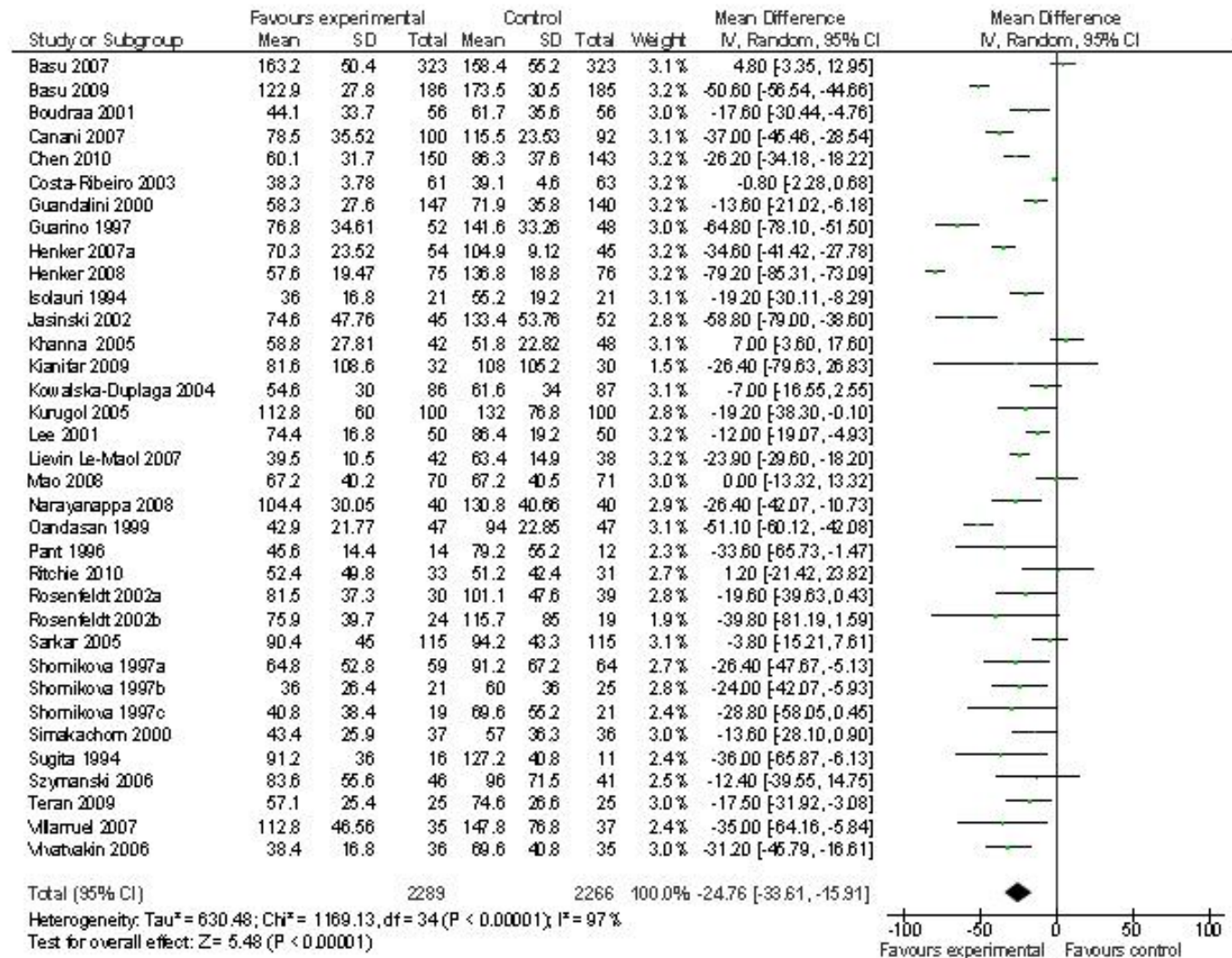
Risk of AAD: PP analysis (9 trials / 1946 infants/children)

Johnston et al. *Cochrane Database of Systematic Reviews* 2008

Variability in probiotic regimens

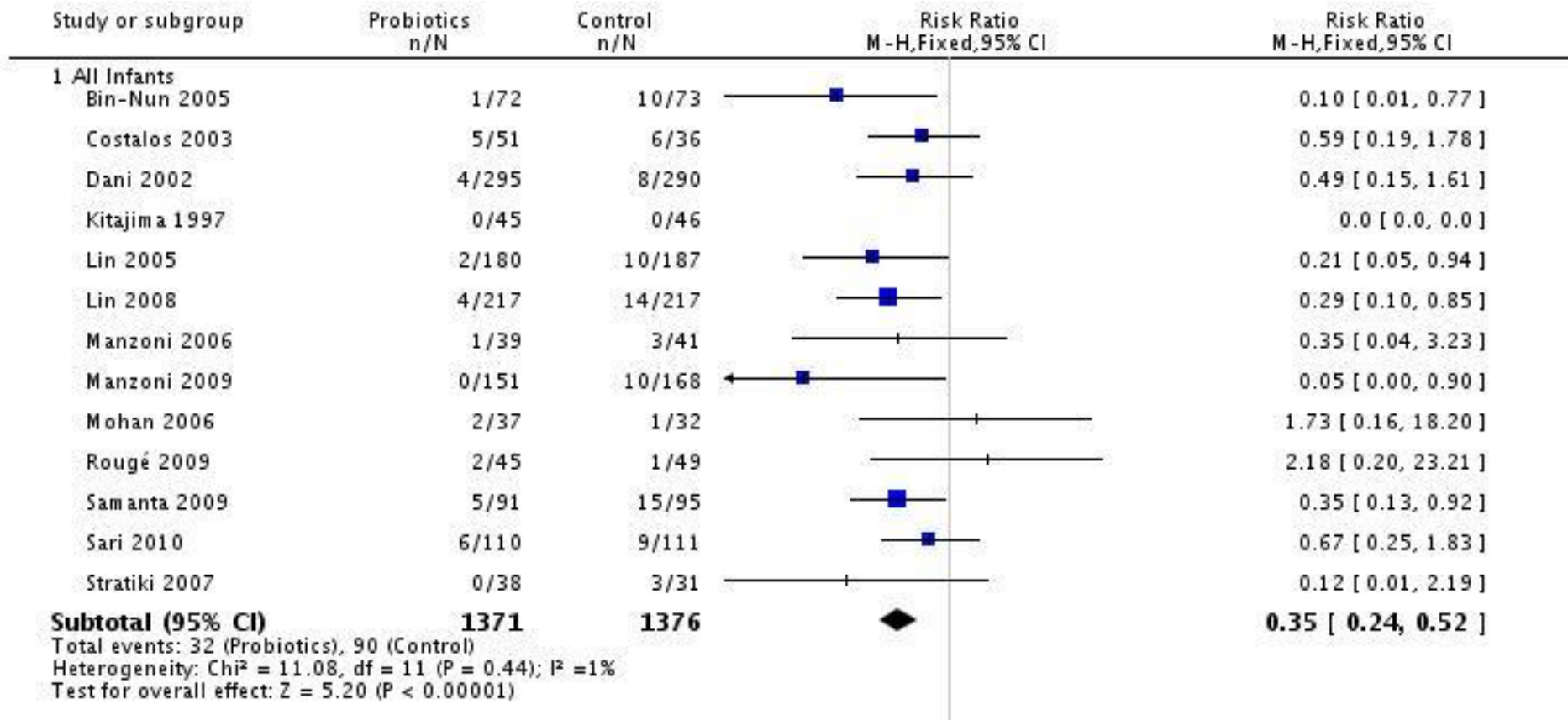
Reference	Probiotic	No. orgs/day	Duration admin
Correa 2005	<i>B. lactis</i> <i>S. thermophilus</i>	825m	15d
Jirapinyo 2002	<i>L. acidophilus</i> <i>B. infantis</i>	Unclear	7d
Tankanow 1990	<i>L. acidophilus</i> <i>L. bulgaricus</i>	2b	5-12d
La Rose 2003	<i>L. sporogenes</i> FOS	5.5b	10d
Arvola 1999	L. GG	4b	Duration Ab treatment
Vanderhoof 1999	L. GG	10-20b ~weight	Duration Ab treatment
Kotowska 2005	<i>S. boulardii</i>	10b	Duration Ab treatment
Benhamou 1999	<i>S. boulardii</i>	4.5b	unclear
Erdeve 2004	<i>S. boulardii</i>	5b	unclear

Treatment of acute diarrhoea



Duration of diarrhoea (hours): 35 trials / 4555 infants/children
 Allen et al; Cochrane Database of Systematic Reviews 2010

Prevention of NEC in preterm infants



Risk of NEC: 16 trials / 2842 infants

AlFaleh et al. *Cochrane Database of Systematic Reviews* 2011

Prebiotics

Srinivasjois 2009: oligosaccharide supplementation of formula in neonates ≤ 37 weeks. 4 RCTs / 126 infants:

- preventing NEC and sepsis - not reported
- improve growth - not reported
- stool characteristics - not reported
- gut colonisation – increase in bifidobacterial counts (2 trials)

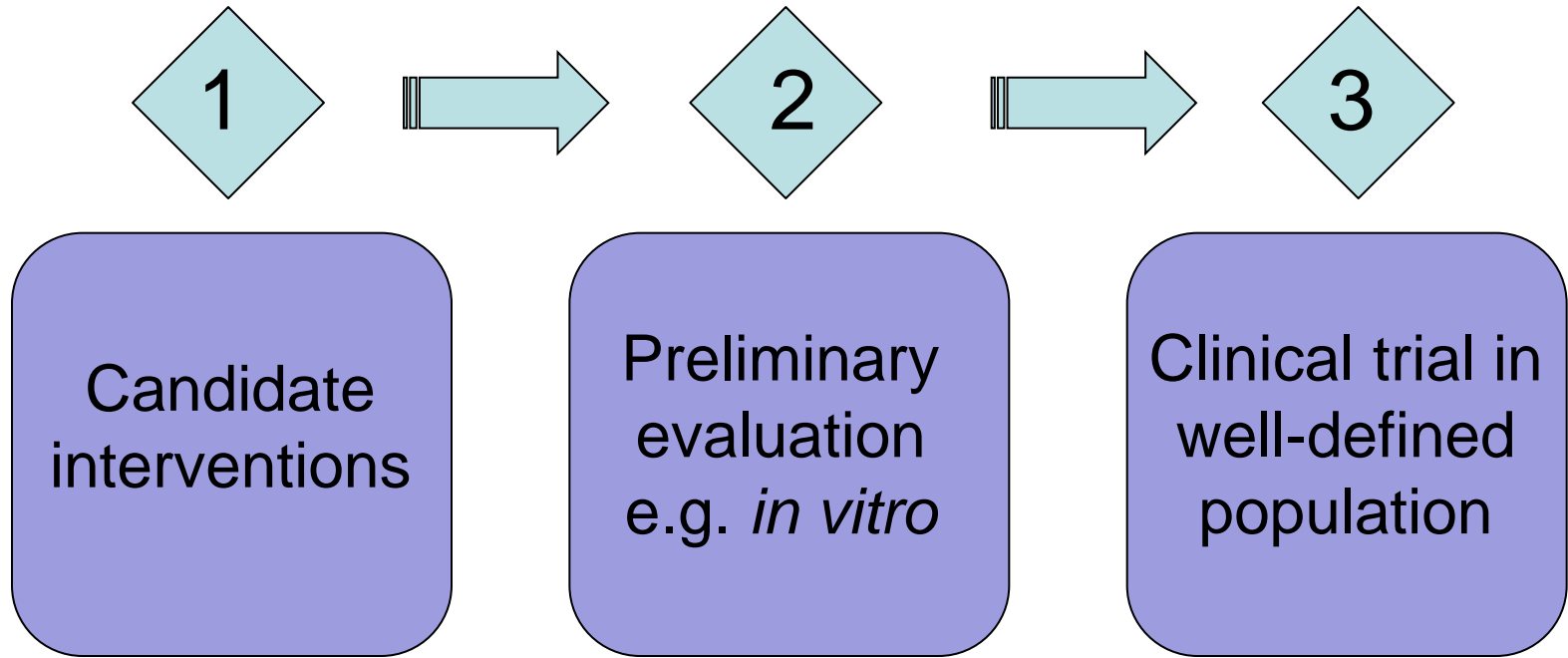
Osborn 2007: Prebiotics in infants for prevention of allergic disease and food hypersensitivity. 5 studies.

Insufficient evidence

Probiotics – research in to practice

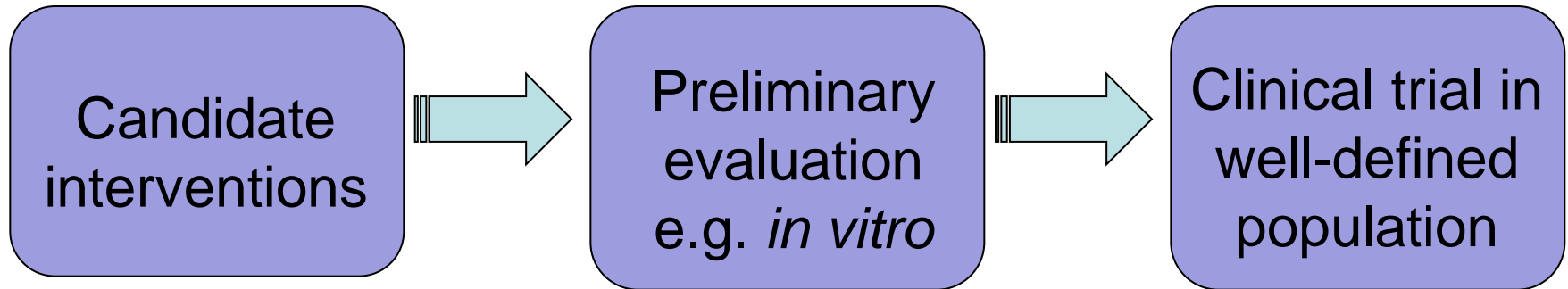
- Proof of principle confirmed for some diseases
- Why no clinical practice guidelines?

Investigational model



How does this work for pre- or probiotics?

Investigational model



Very large number of candidate probiotics / regimens

- single strains vs combinations
- synbiotics
- dose (no. organisms)
- timing / duration of administration

Limited *in vitro* models

Mechanisms complex

- nutrition
- anti-pathogen
- mucosal defence
- inflammation
- immunity

Target diseases often heterogeneous / complex

- acute infectious diarrhoea
- antibiotic-associated diarrhoea

Simple sum ...

Too many candidates \times Unable to select best candidate \times Heterogeneous clinical population $=$ ***Too difficult!!***

Complex mechanisms

Closing the research-practice gap

- Develop more / better *in vitro* models, but ...
- Practical approach:
 - Select candidates with “best evidence”
 - Well characterised, quality-controlled pre- / probiotics
 - Large trials of clearly defined populations – definitive results

Design trials so that they contribute to meta-analysis!

Obstacles

- Where evidence is good, is a placebo group now acceptable?
- Monitor safety - especially
 - in “new” environments (e.g. preterm infants)
 - post-marketing in sub-groups
- FAO / EU FSA restrictions on health claims for “functional foods”

Thanks for listening!