

# Using Metabolomics to Quantify Health

Elaine Holmes, PhD, FRSC, FSB

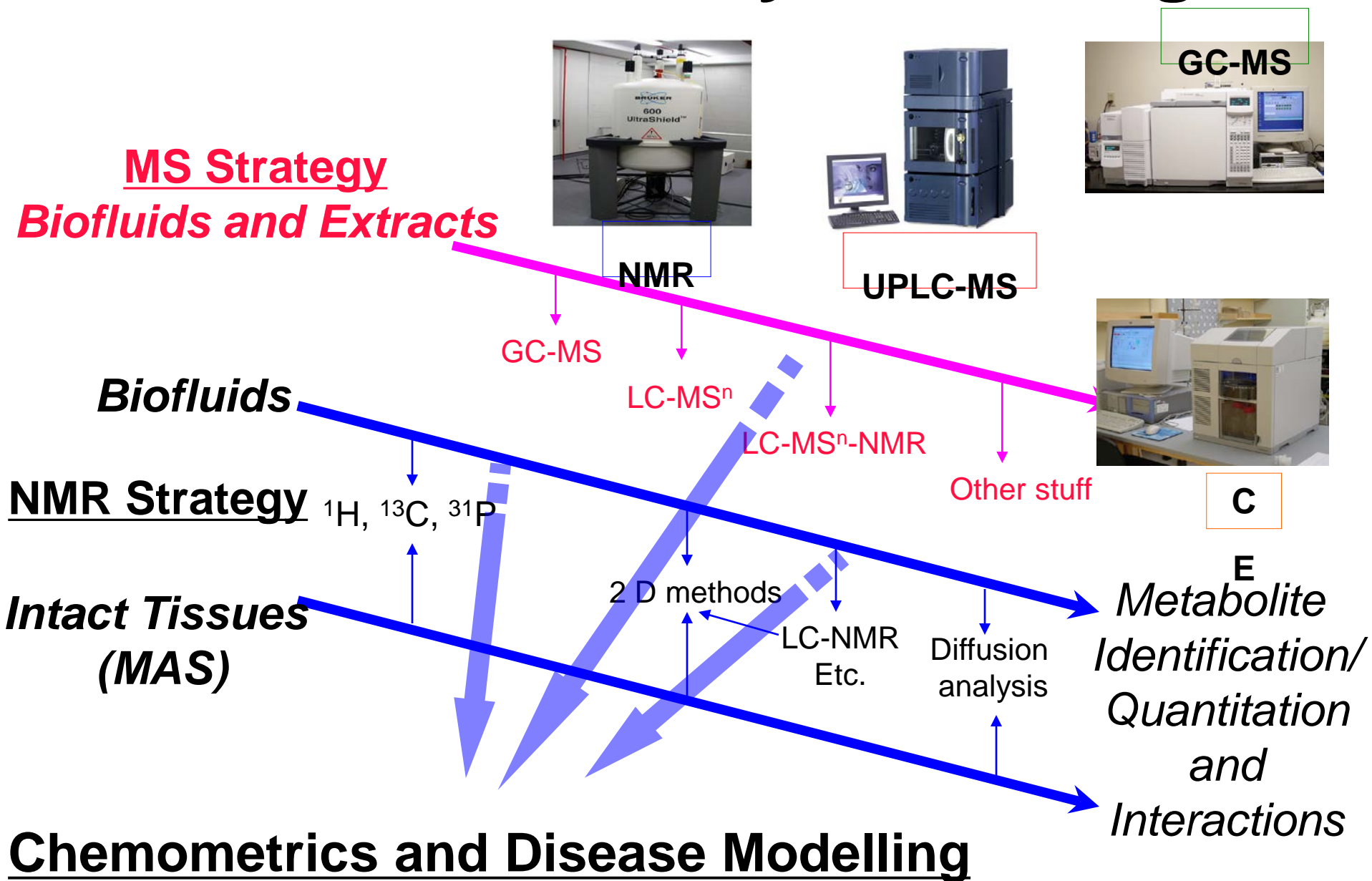
Biomolecular Medicine, Imperial College, U.K.



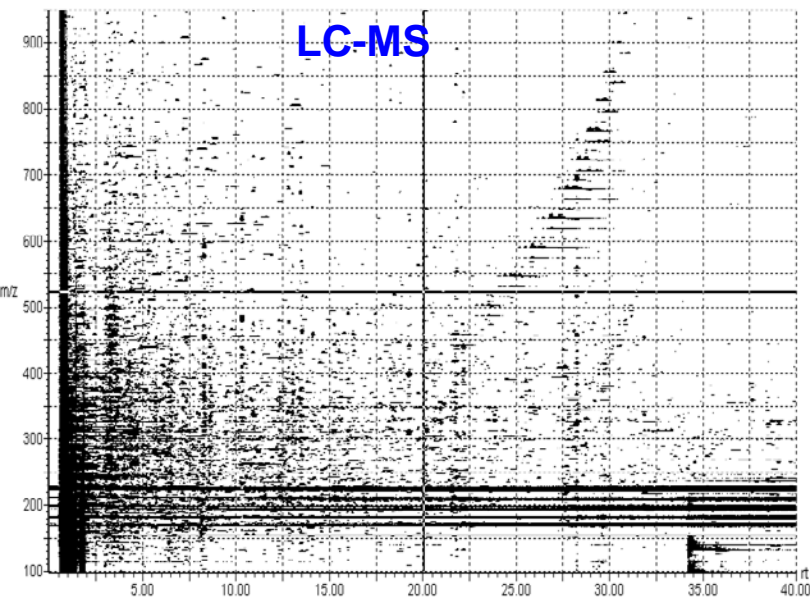
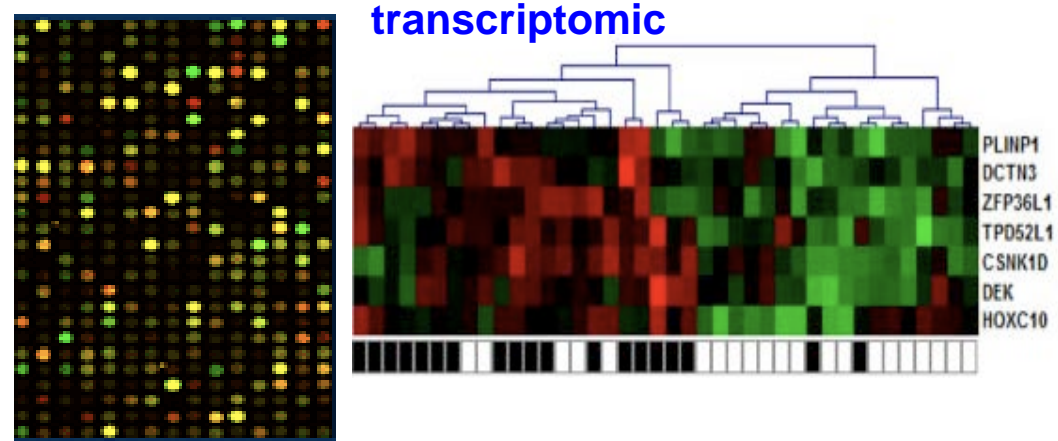
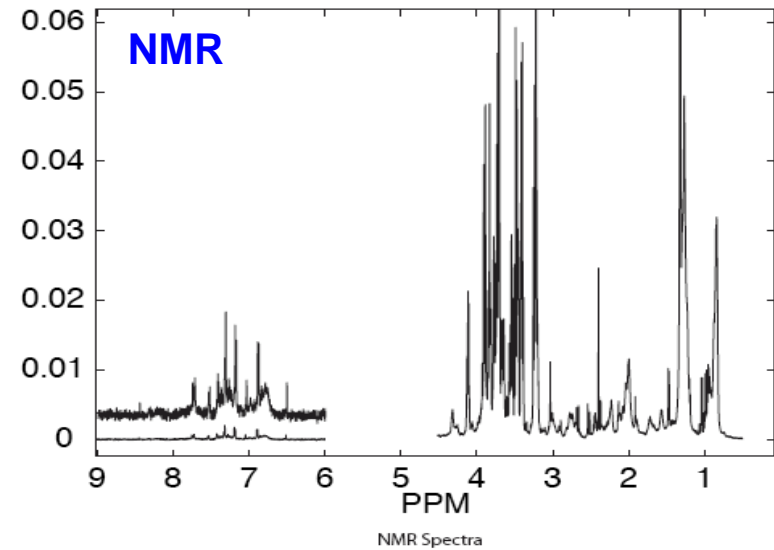
# Summary

- ◆ Background to technology and adaptations for modelling human data
- ◆ **Characterizing metabolic consequences of food interventions**
- ◆ Considering the mammalian ecosystem and complexity
- ◆ **Defining biomarkers of health**
- ◆ Future directions of metabolic phenotyping within the nutritional arena

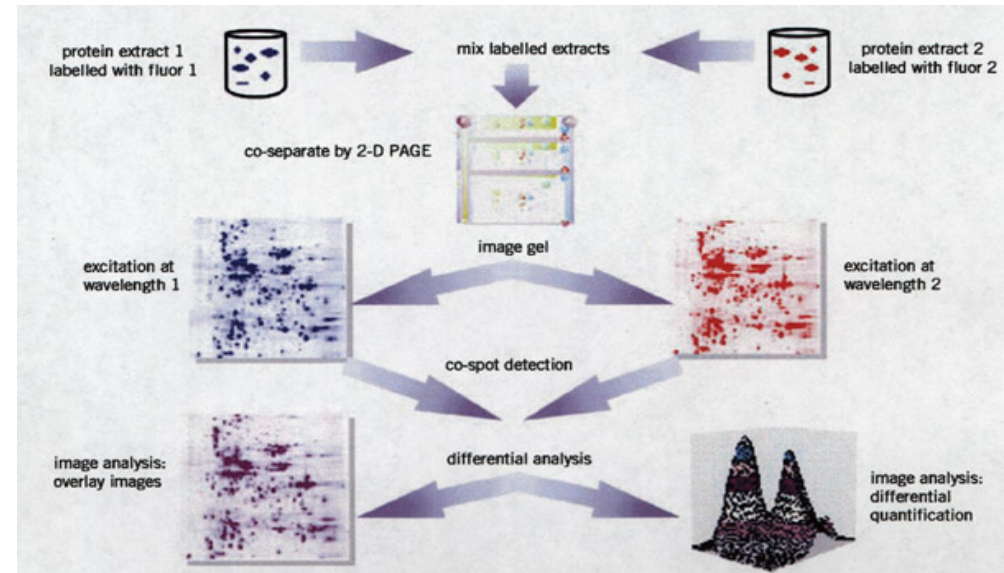
# Metabonomic Analysis Strategies



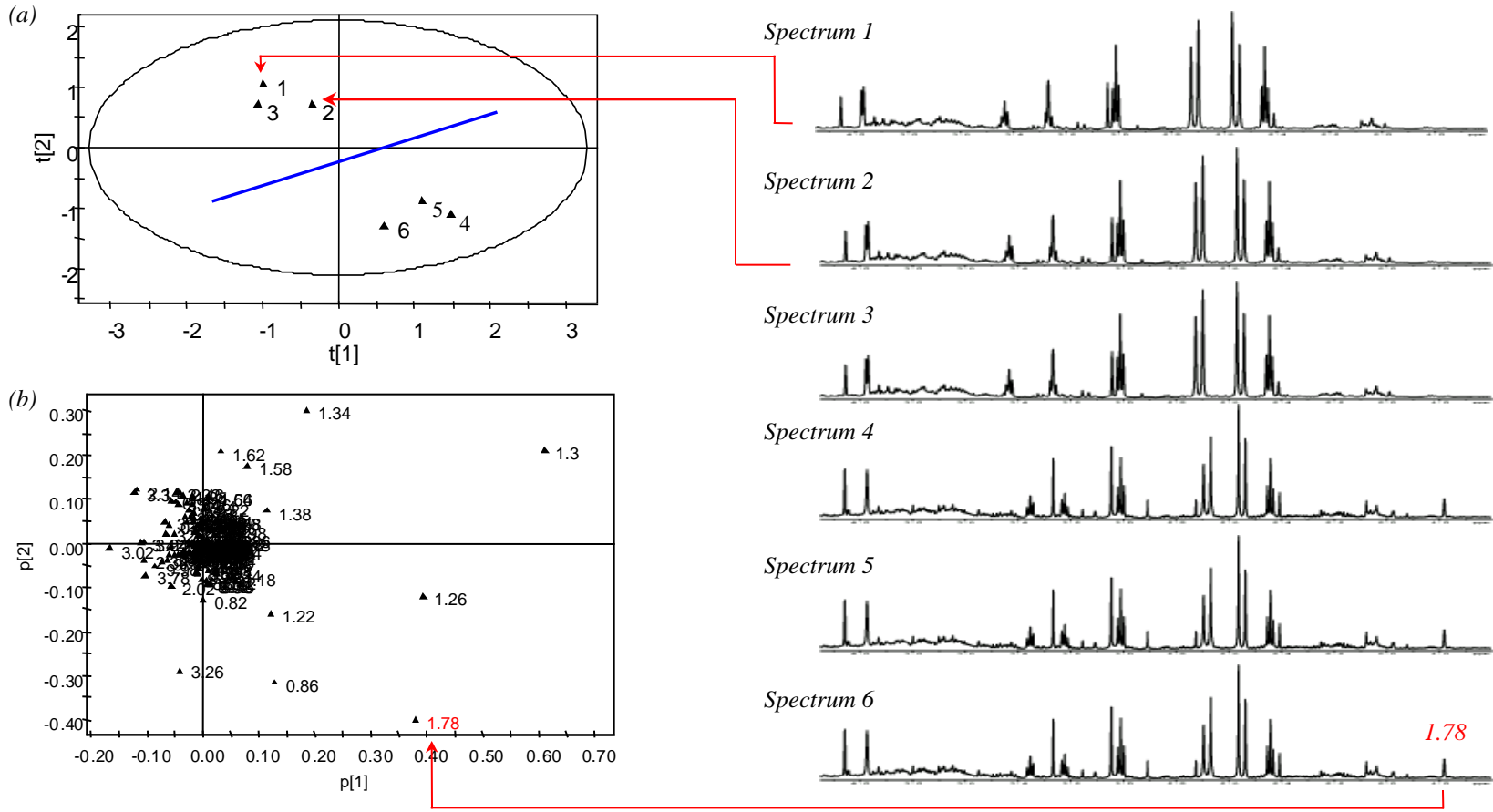
**Omics data tend to be highly multivariate, may not be annotated completely, can have missing values, usually require aligning and standardizing in multiple dimensions and are all structured differently**



## 2D gel electrophoresis



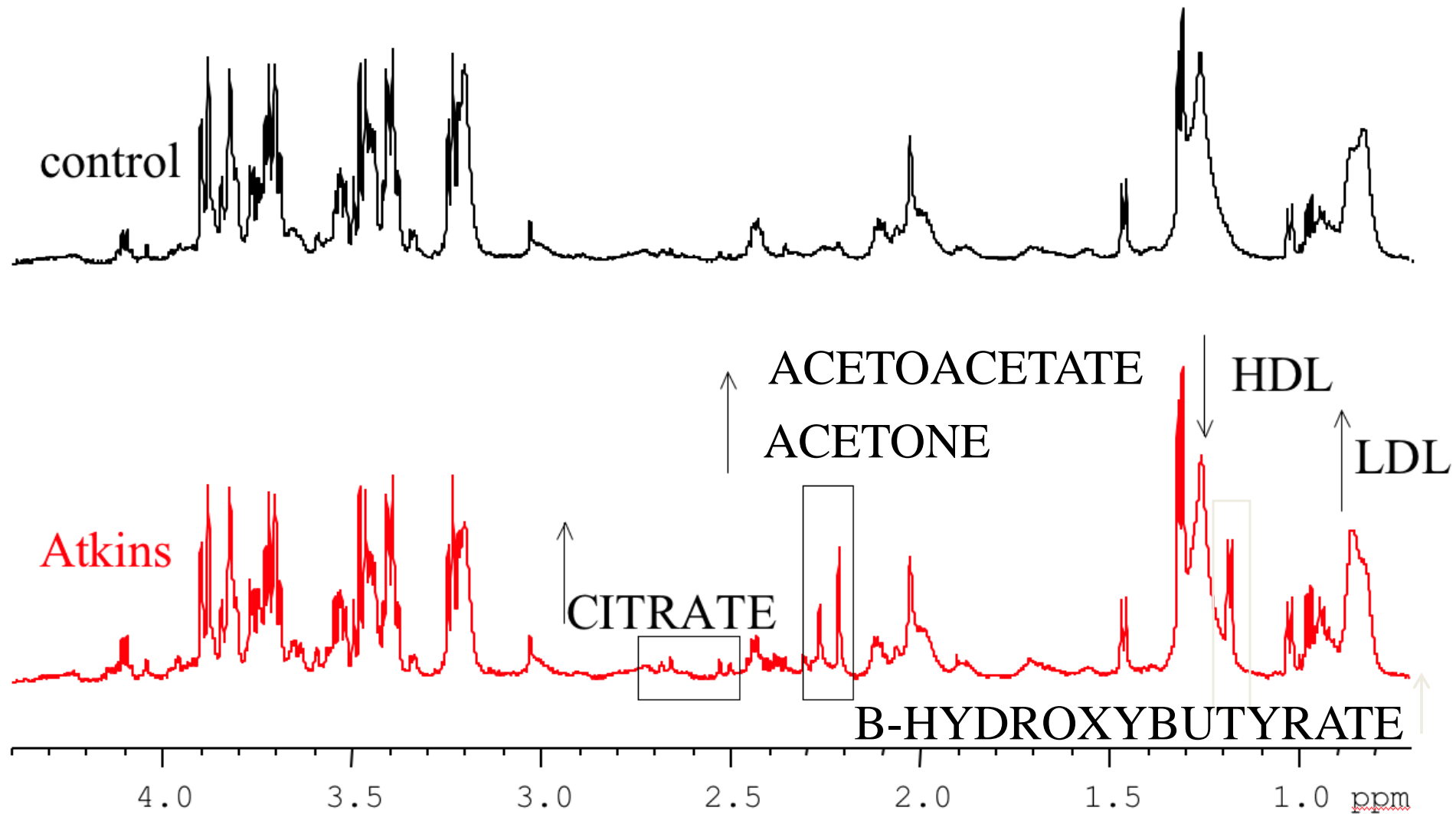
# Example of PCA Analysis



Spectra → scores → loadings → spectra



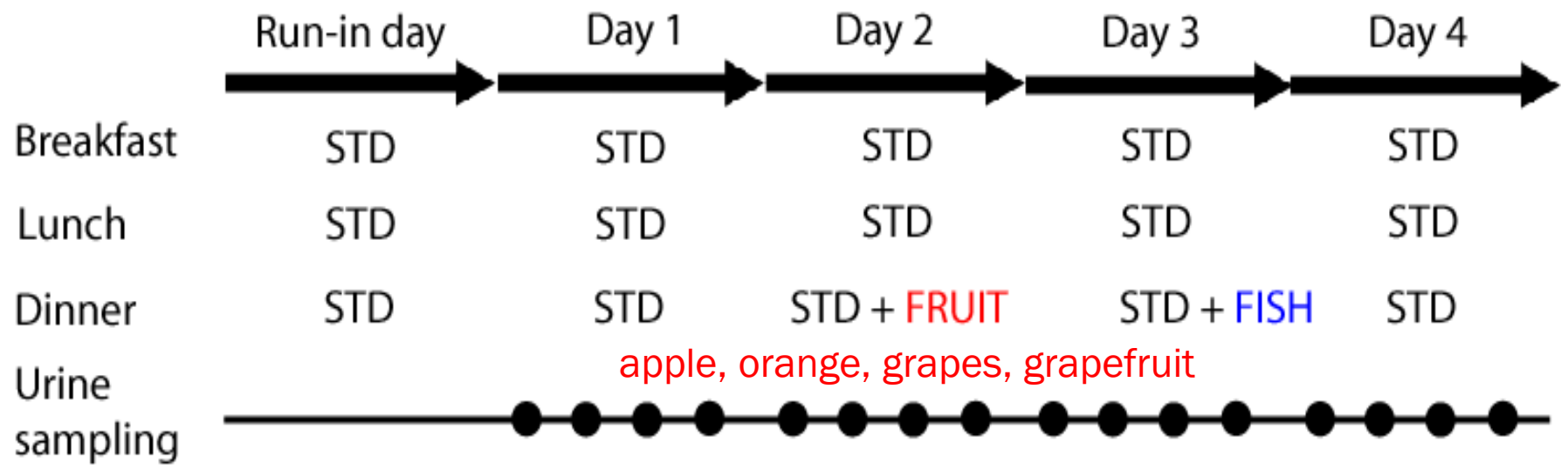
# BLOOD PLASMA ANALYSIS FROM PATIENT BEFORE AND AFTER ATKINS DIET (6 WEEKS):



**BAD NEWS!**

# A food intervention study to find food biomarkers *via* metabolic profiling.

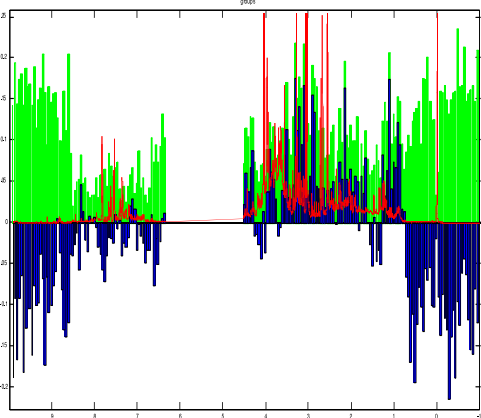
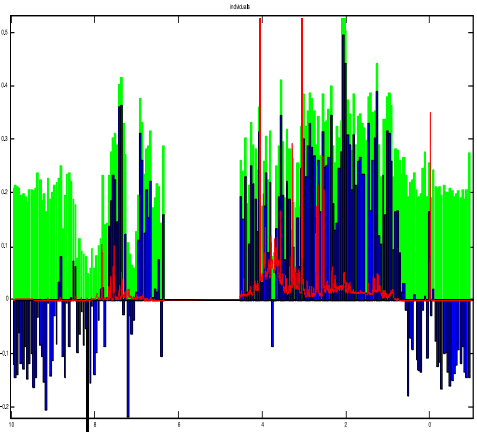
Compliance; quantitative intake; product quality / differences



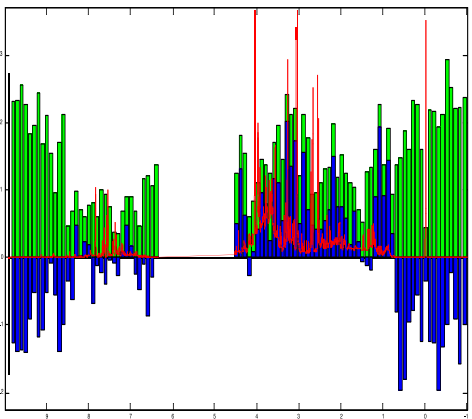
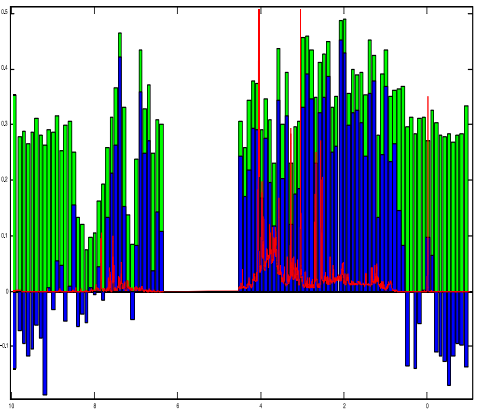
**NOT ALL PARTS OF THE SPECTRA YIELD EQUAL INFORMATION AND DIFFERENT SPECTRAL AREAS REFLECT DIFFERENT SOURCES OF VARIANCE TO DIFFERENT DEGREES.**

**Inter-individual variation**

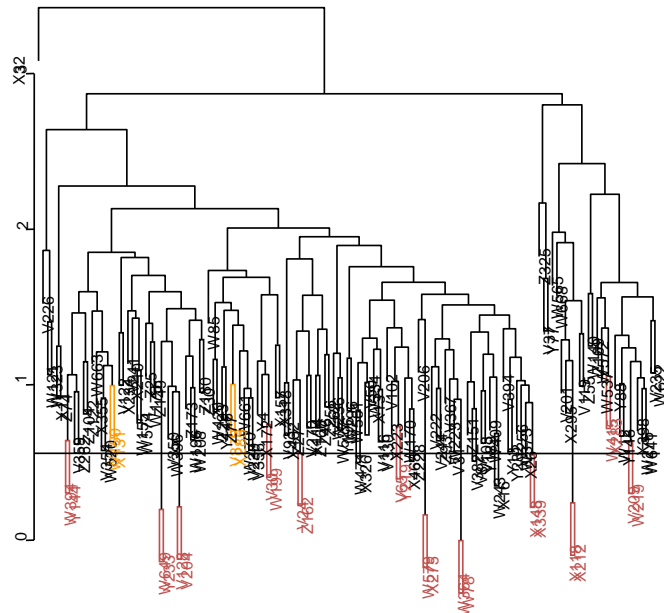
**Diet-related variation**



**■ Variance explained ( $R^2$ )**  
**■ Variance predicted ( $Q^2$ )**



**0.05 ppm**

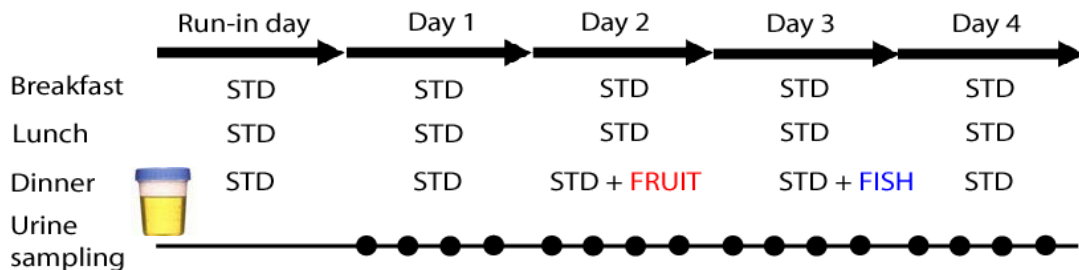


**similarity dendrogram**

**0.1 ppm**



# Elucidation of potential food biomarkers from metabolic profiles with pattern recognition



Are biomarkers of healthy food intake equivalent to biomarkers of health?  
ACUTE VS CHRONIC

Increased excretion of:

- trimethylamine-*N*-oxide
- taurine
- methylhistidine
- creatine
- choline
- carnitine

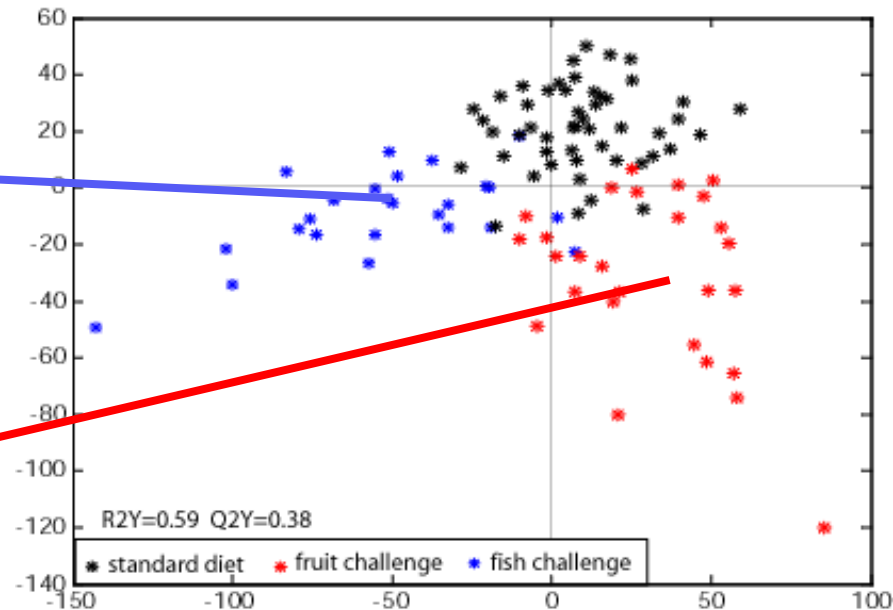
Increased excretion of:

- proline betaine  $r=0.71$
- tar tartaric acid
- hippuric acid

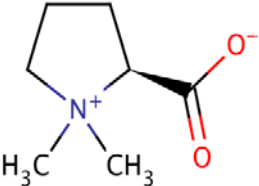
**FISH**

**FRUIT**

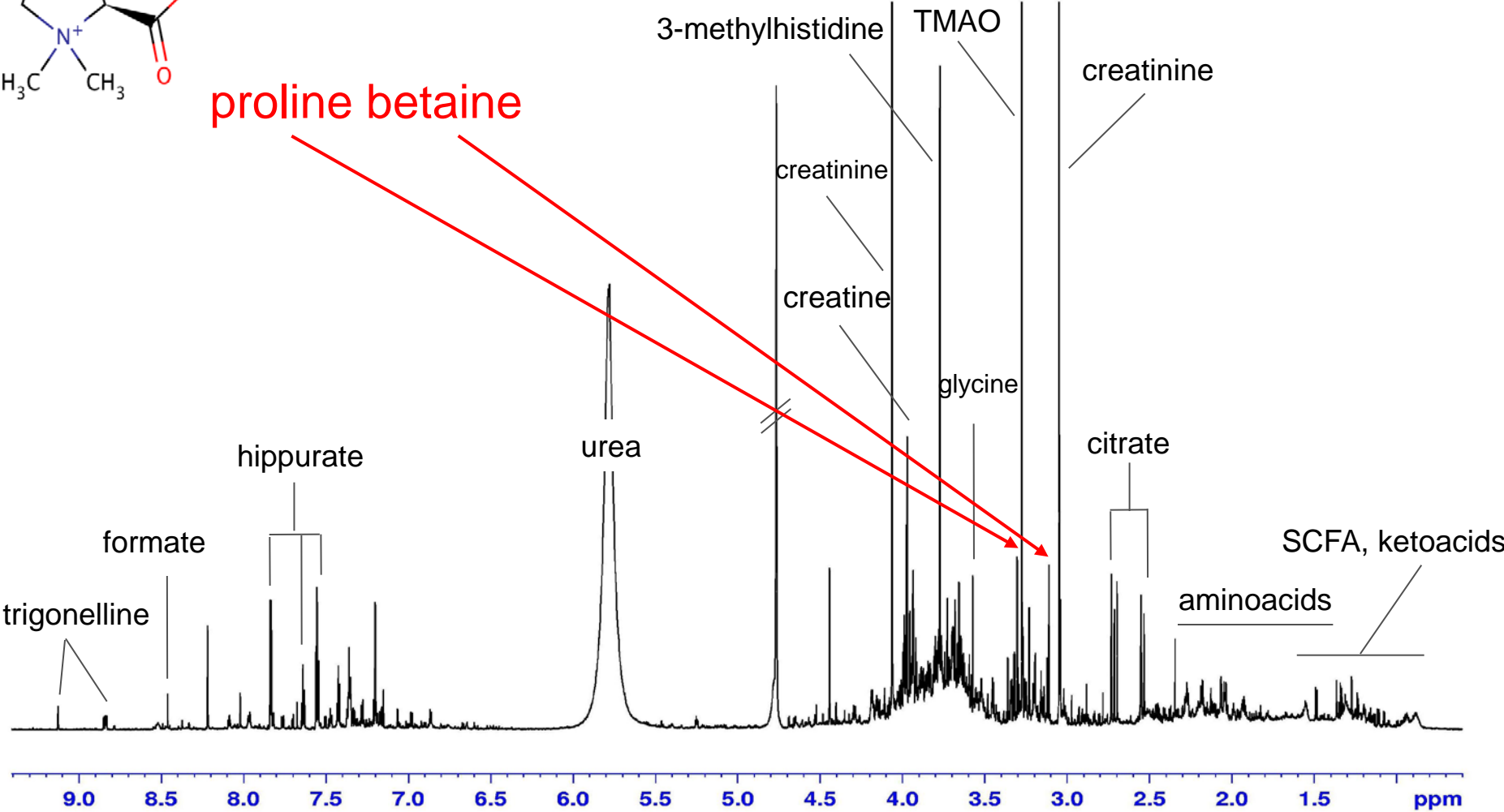
Partial least squares discriminant analysis



**Features of a good food biomarker:** Detectable (relatively high concentration, low probability of overlap, more than one spectral feature); Long half life; not multiply metabolized



proline betaine

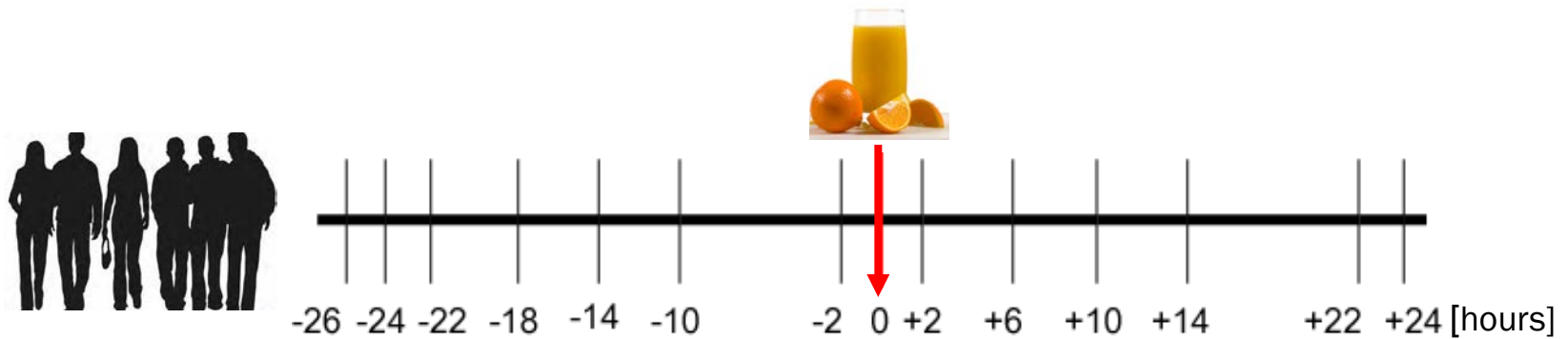


# <sup>1</sup>H NMR analysis to quantify proline betaine in fruit juices and fruits

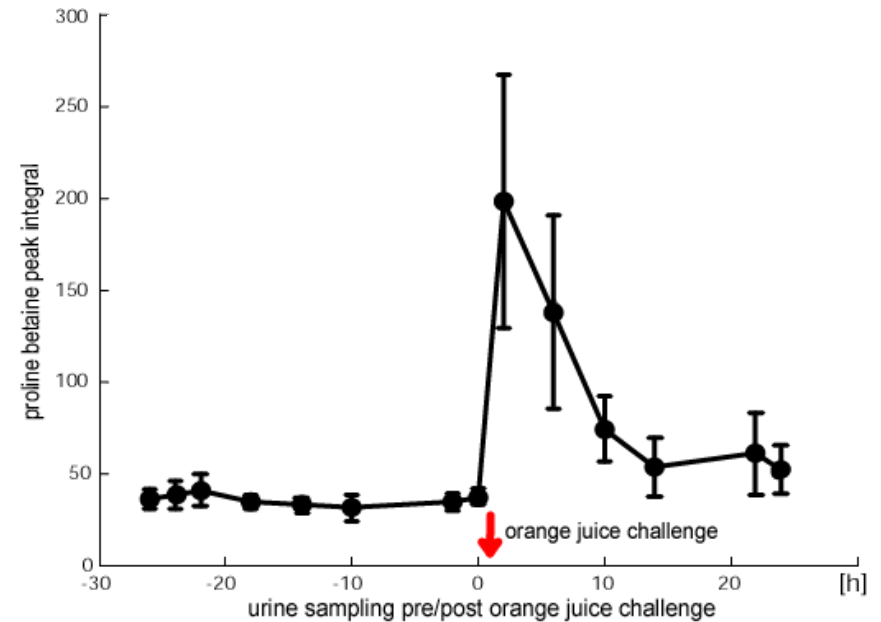
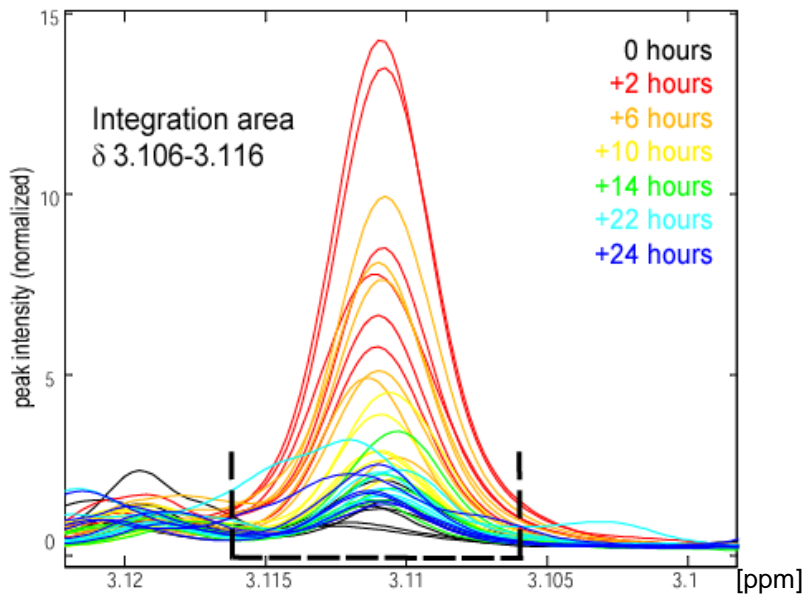
Analysis of different fruits and fruit juices in a fully relaxed <sup>1</sup>H NMR experiment

Juice/fruit description	Proline betaine (mg/L)	Juice/fruit description	Proline betaine (mg/L)
<b>Citrus fruit juice (authentic)</b>		<b>Other fruit juice</b>	
Orange juice, from concentrate	1316	Pineapple juice	57
Orange juice	1189	Red grape and raspberry juice	46
Orange juice, freshly squeezed	1062	Pomegranate and blueberry juice	18
Grapefruit juice	766	Peach, mango, passionfruit juice	17
<b>Citrus fruit juice (synthetic)</b>		Apple juice	14
Orange soft drink	216	Blackcurrant juice	12
Orange squash (20% orange juice from concentrate)	201	<b>Other fruit</b>	
Orange squash	75	Kiwi	66
<b>Citrus fruit</b>		Grape	51
Orange	786	Melon	34
Lime	651	Banana	28
Satsuma	486	Strawberry	22
Lemon	240	Pear	14
		Apricot	10

# Proline betaine excretion in individual volunteers



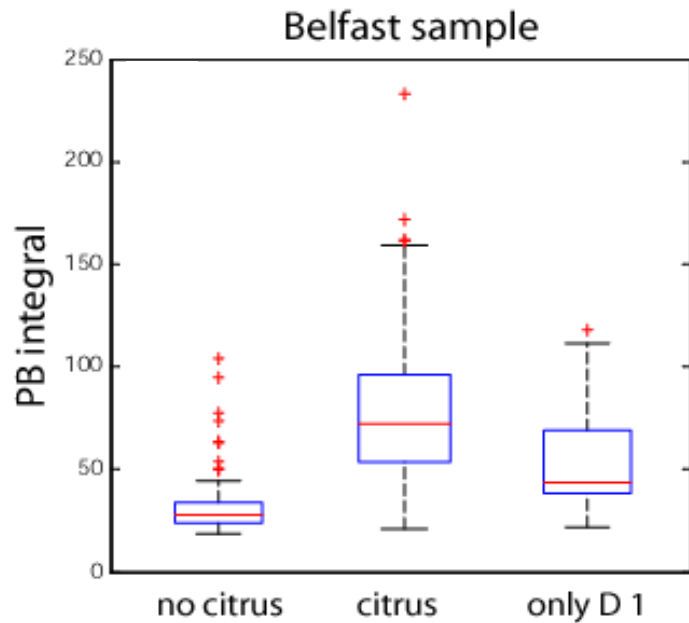
Kinetics study (N=6): orange juice consumption and urine sampling



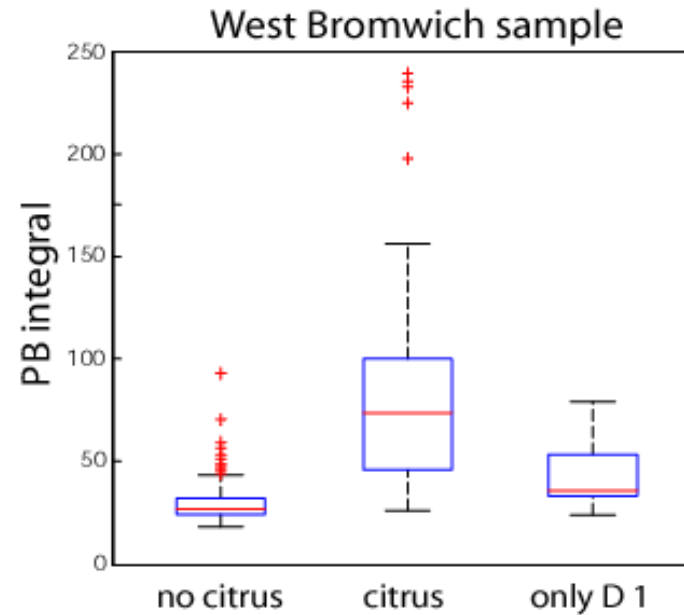
# Establishing the relationship between proline betaine excretion and citrus consumption in population studies:

## Validation of biomarkers

- Quantify proline betaine concentrations in 24-hr urine samples
- Ascertain whether the recorded intake of citrus fruit matches the dietary questionnaires data



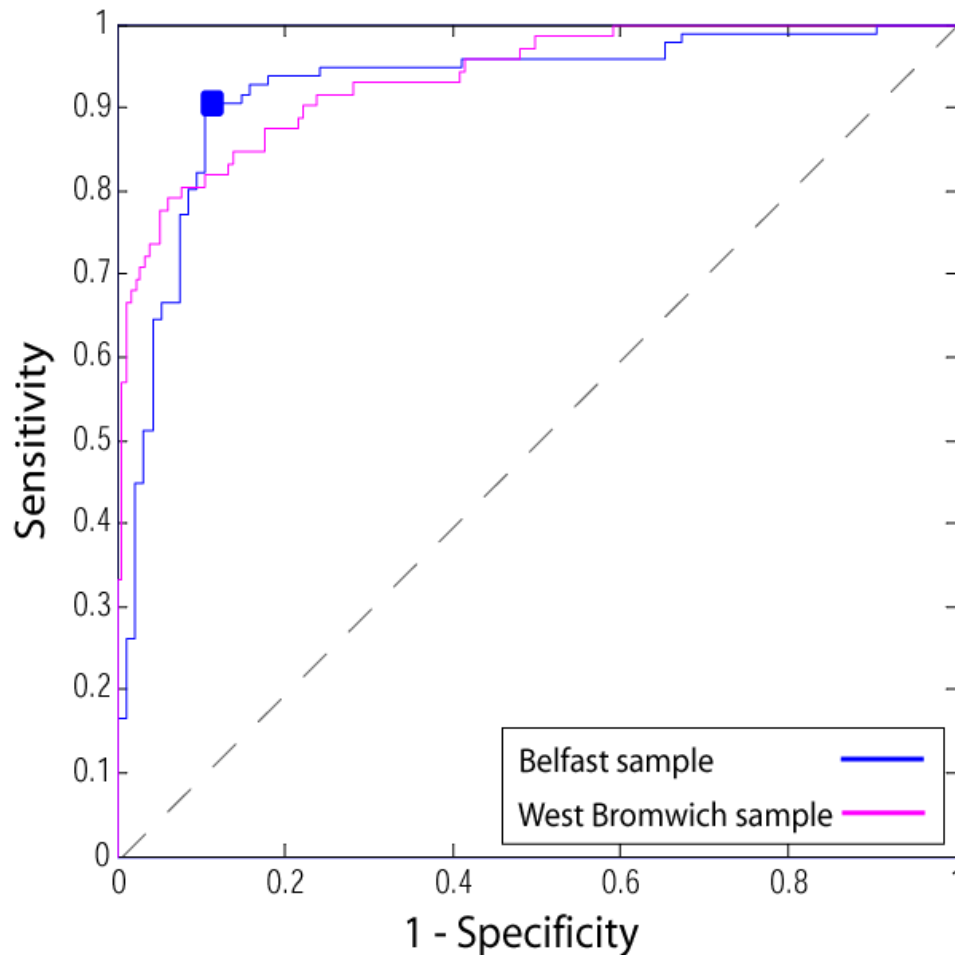
p-value =  $1.2 \times 10^{-24}$



p-value =  $8.8 \times 10^{-35}$

# Good predictivity of the biomarker in a free-living population

Receiver operating characteristics curve



## Training Set:

AUC: 92.3%

90.6% specificity

86.2% sensitivity

## Test Set:

AUC: 93.5%

92.3% specificity

80.6% sensitivity



# Significant differences in nutrient intake of citrus consumers and non-consumers

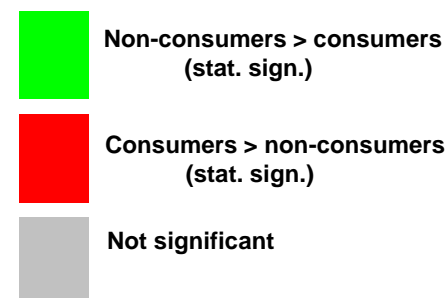
Variable		P value
Energy, kcal/24-h	0.8%	n.s.
Total fat, % kcal	-9.4%	<0.0001
Total SFA, % kcal	-10.1%	<0.0001
Total MFA, % kcal	-9.9%	<0.0001
Total PFA, % kcal	-10.1%	<0.0001
Omega-3 FA, % kcal	-4.0%	0.01
Omega-6 FA, % kcal	-11.3%	<0.0001
Trans FA, % kcal	-11.8%	<0.0001
Cholesterol, mg/1,000 kcal	-11.0%	<0.0001
Keys Score‡	-8.1%	<0.0001
Total carbohydrate, % kcal	8.1%	<0.0001
Starch, % kcal	0.0%	0.95
Total sugars, % kcal	16.7%	<0.0001
Fructose, % kcal	44.4%	<0.0001
Galactose, % kcal	20.0%	<0.001
Glucose, % kcal	39.5%	<0.0001
Lactose, % kcal	3.7%	n.s.
Maltose, % kcal	-12.5%	n.s.
Sucrose, % kcal	2.0%	n.s.
Fibre, g/1,000 kcal	11.9%	<0.0001

Variable		P value
Total protein, % kcal	-1.3%	n.s.
Vegetable protein, % kcal	7.4%	<0.0001
Animal protein, % kcal	-4.9%	<0.001
Vitamin A, IU/1,000 kcal	29.3%	<0.0001
Beta-carotene, µg/1,000 kcal	35.5%	<0.0001
Retinol, µg/1,000 kcal	9.1%	n.s.
Thiamine, mg/1,000 kcal	8.3%	<0.0001
Riboflavin, mg/1,000 kcal	4.5%	<0.01
Niacin, mg/1,000 kcal	1.8%	n.s.
Pantoth. acid, mg/1,000 kcal	8.3%	<0.0001
Vitamin B6, mg/1,000 kcal	11.0%	<0.0001
Vitamin B12, µg/1,000 kcal	0.0%	n.s.
Vitamin C, mg/1,000 kcal	126.4%	<0.0001
Vitamin E, mg/1,000 kcal	-2.2%	n.s.
Folic acid, µg/1,000 kcal	18.2%	<0.0001

Variable		P value
Urinary sodium, mmol/24-h	-3.2%	0.05
Urinary potassium, mmol/24-h	16.9%	<0.0001
Magnesium, mg/1,000 kcal	8.8%	<0.0001
Calcium, mg/1,000 kcal	4.6%	<0.01
Phosphorus, mg/1,000 kcal	2.1%	<0.05
Iron, mg/1,000 kcal	7.4%	<0.0001
Copper, mg/1,000 kcal	11.1%	<0.0001
Selenium, µg/1,000 kcal	-1.5%	n.s.
14-day alcohol, g/24-h	-10.8%	n.s.
Caffeine, mg/1,000 kcal	-29.7%	<0.0001
Body mass index, kg/m <sup>2</sup>	-3.8%	<0.0001
Systolic BP, mm Hg	-1.4%	<0.01
Diastolic BP, mm Hg	0.3%	n.s.
Education, years	9.0%	<0.0001

Proline betaine excretion is correlated with:

Healthy eating patterns  
Low BMI & BP



# The INTERMAP Population Study

Investigating the effects of nutrition on adverse population blood pressure levels *via* metabolic profiling.

## Study Design

- 2 x 24 h urine samples collected 3-6 weeks apart from 17 centres spanning Peoples Republic of China (PRC), Japan, US and UK (4,680 people = ca 10,000 samples including quality control split samples). NMR spectra were acquired for each sample
- 4 visits were made by each person

## Measurements:

blood pressure - seated (2 x for 4 visits)

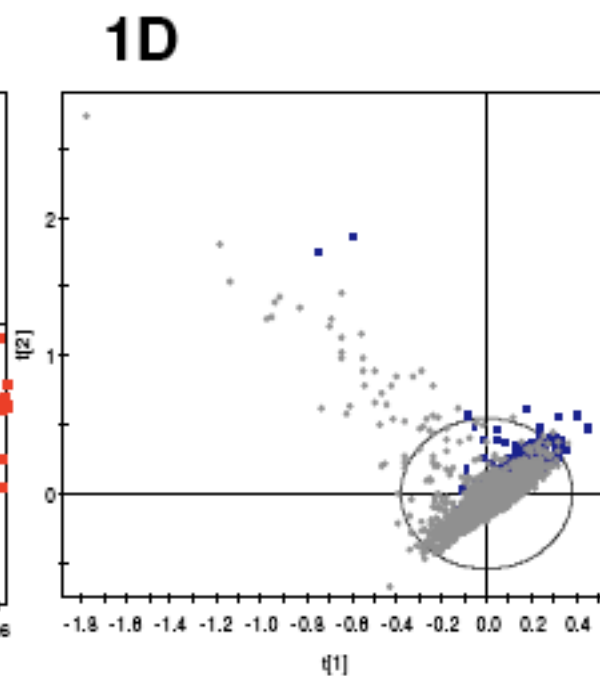
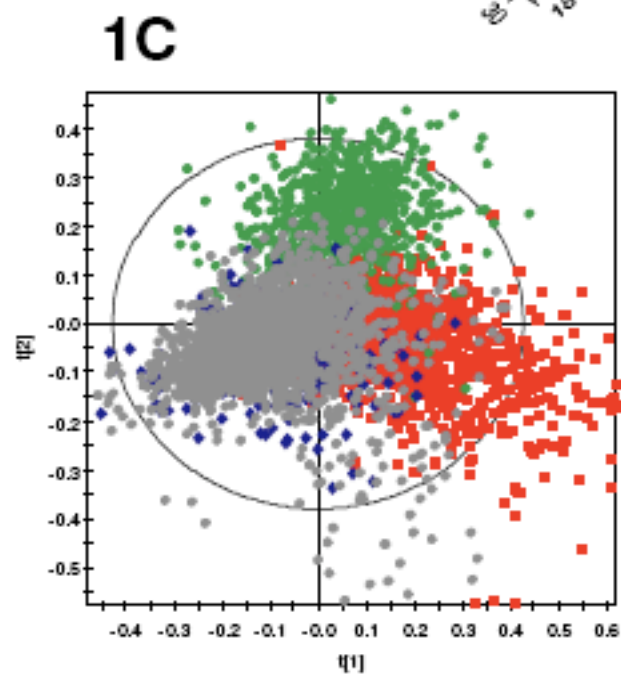
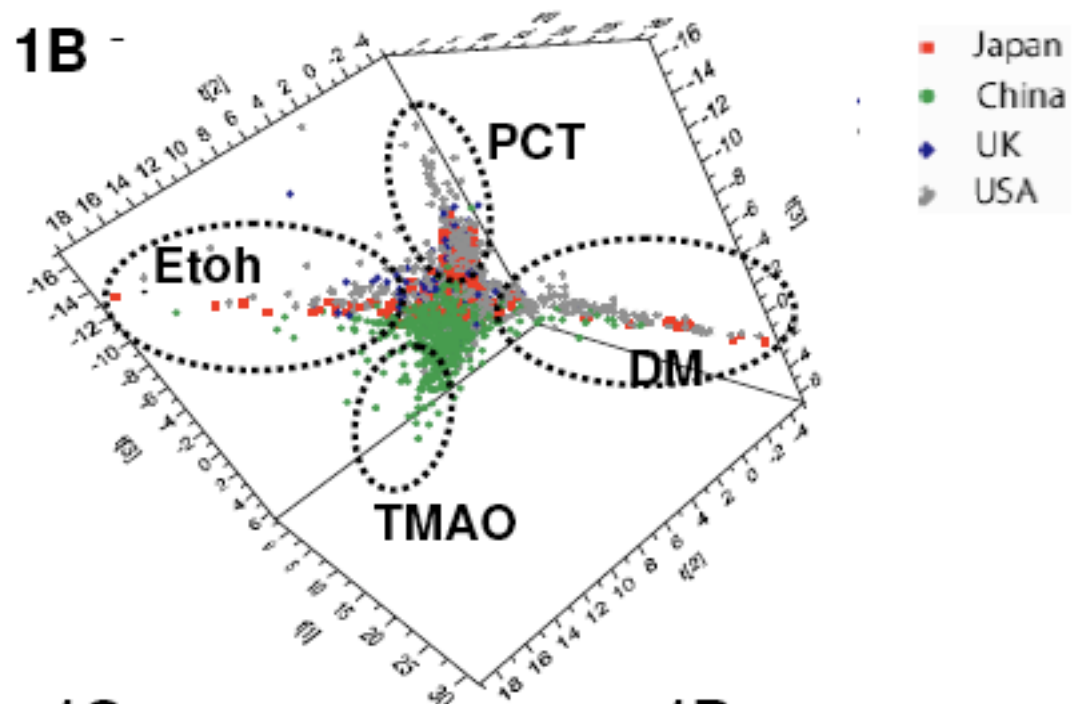
Height (2 visits)

weight (2 visits)

daily alcohol over previous 7 days questionnaire (2 visits)

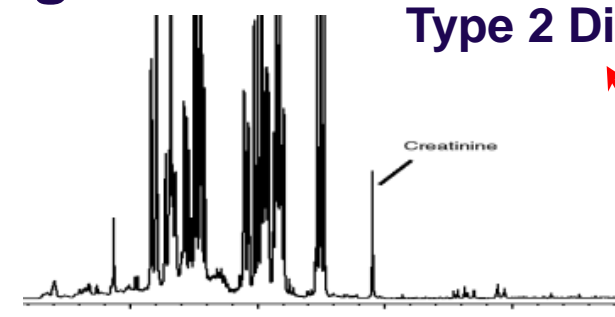
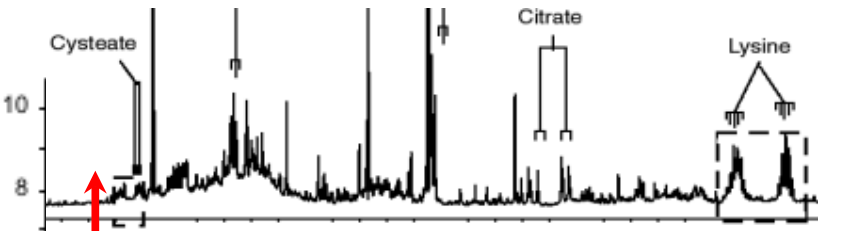
Dietary intake (including vitamin/mineral supplements) recorded using 24 hr recall method (4 visits)

Demographic and medical history questionnaire (1 visit)

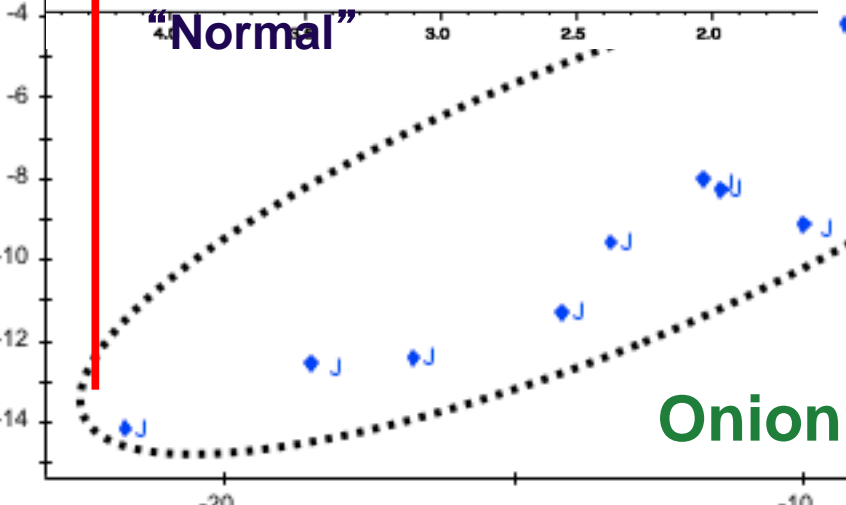
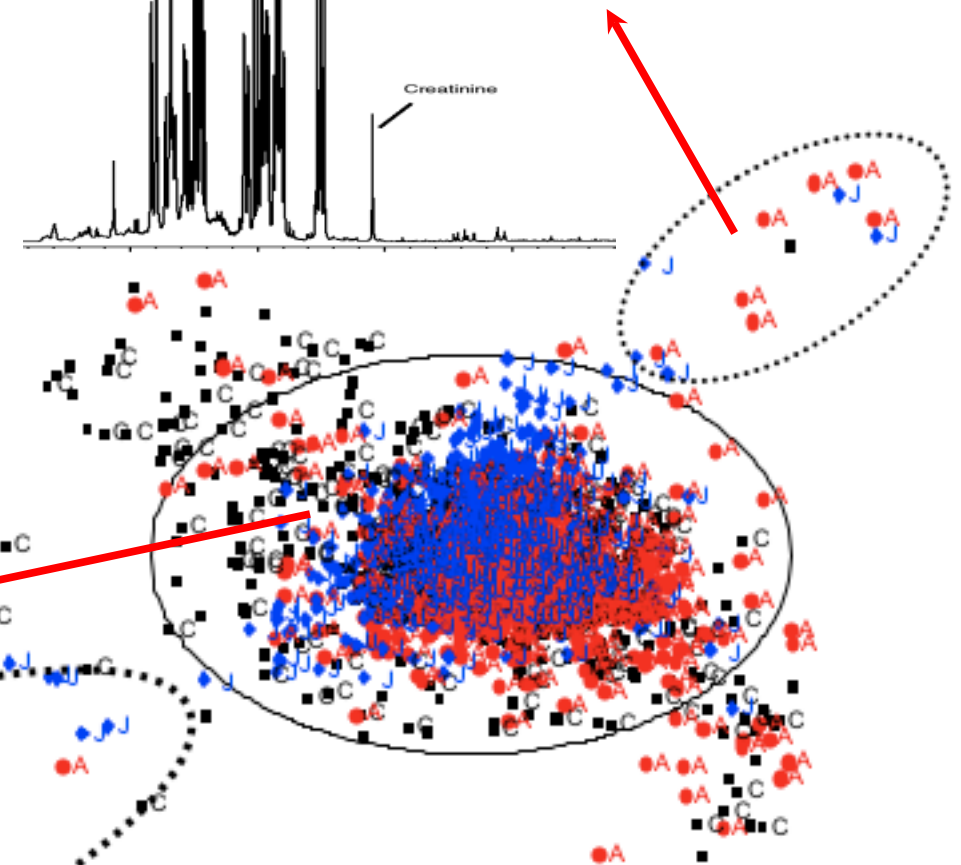
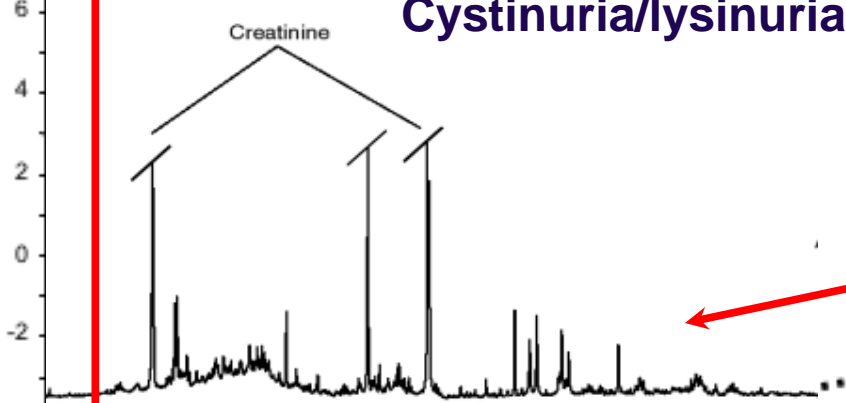


# Large Scale Metabonomic Screening of Human Populations: Identifying Outliers

Type 2 Diabetes



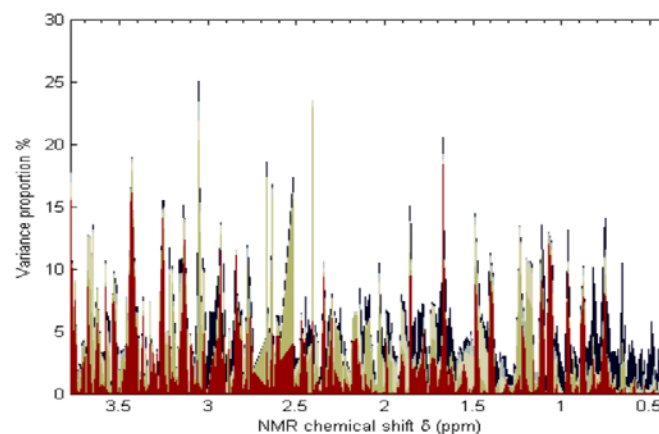
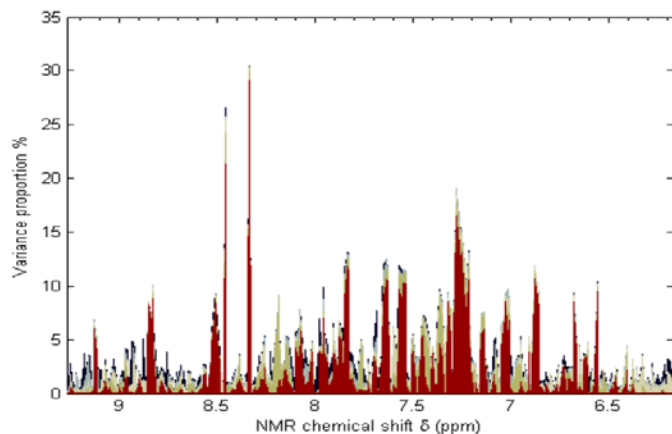
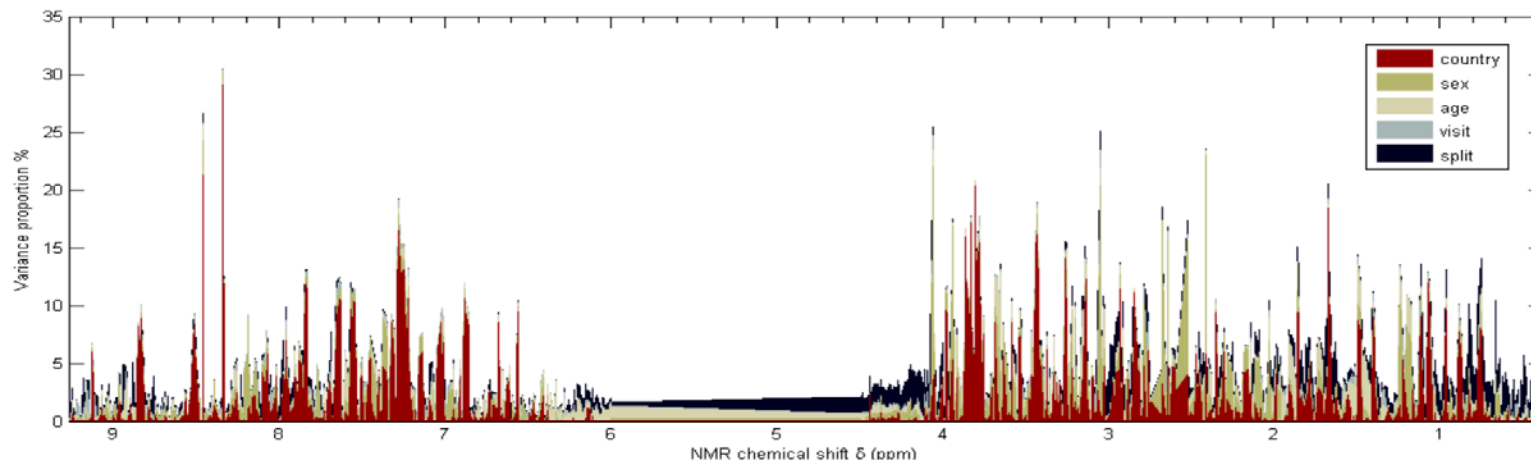
Cystinuria/lysinuria



Onion Skin Approach

N = 1000 Japanese  
N = 900 Americans  
N = 900 Chinese

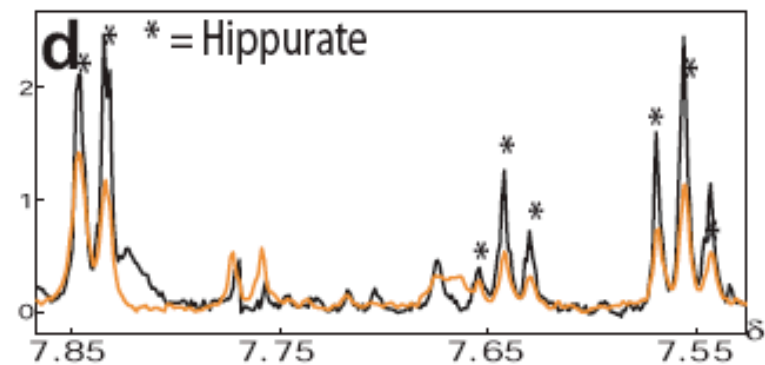
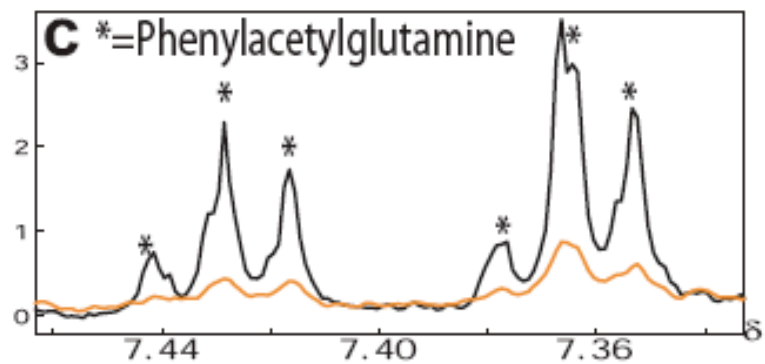
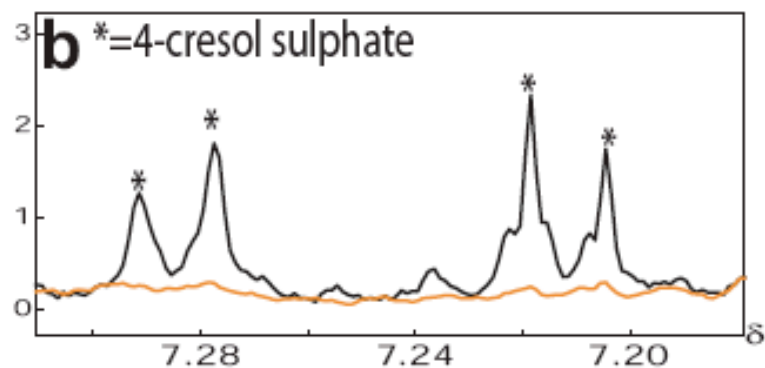
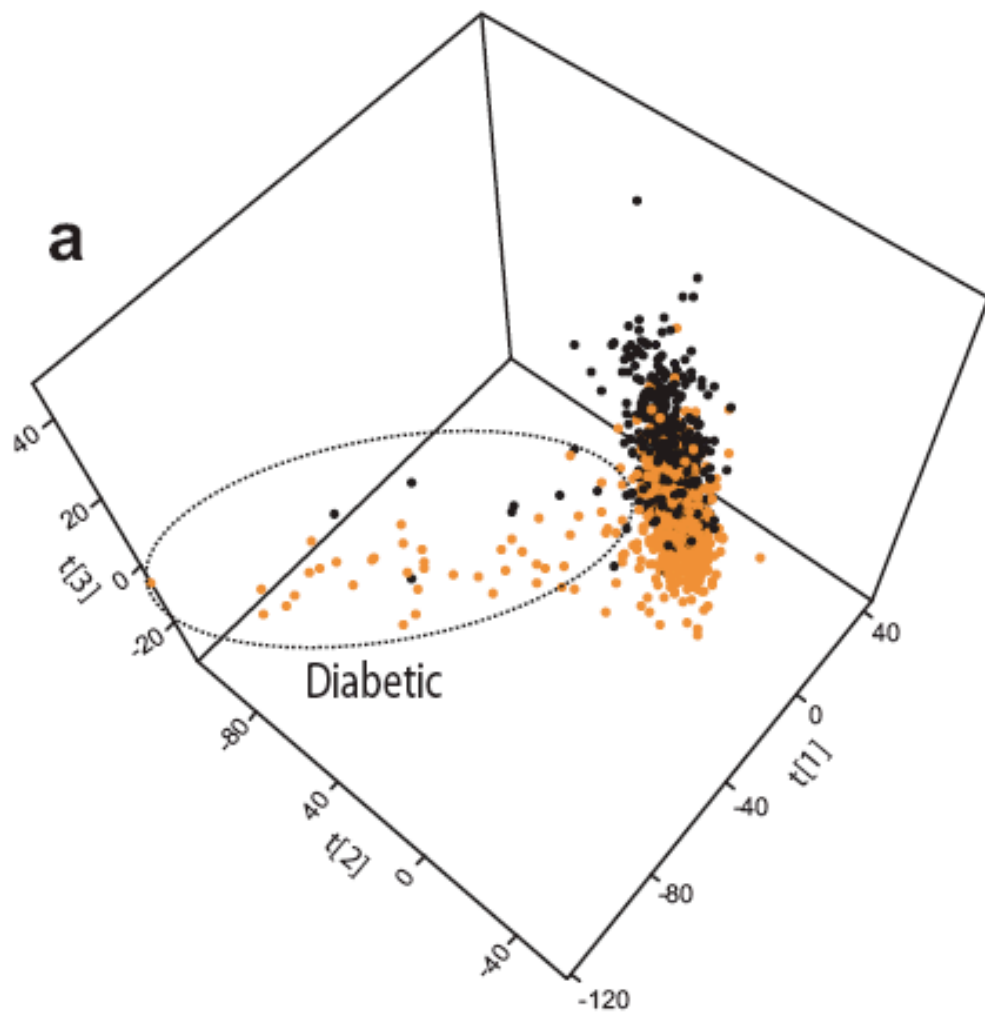
# DIFFERENT PATTERNS OF VARIATION IN HUMAN METABOTYPE



Factor	Df	Wilks Lambda	approx. F	P-value
<b>Country</b>	<b>2</b>	<b>0,025</b>	<b>47,613</b>	<b>0</b>
<b>Sex</b>	<b>1</b>	<b>0,335</b>	<b>17,611</b>	<b>0</b>
<b>Age</b>	<b>1</b>	<b>0,752</b>	<b>2,921</b>	<b>0</b>

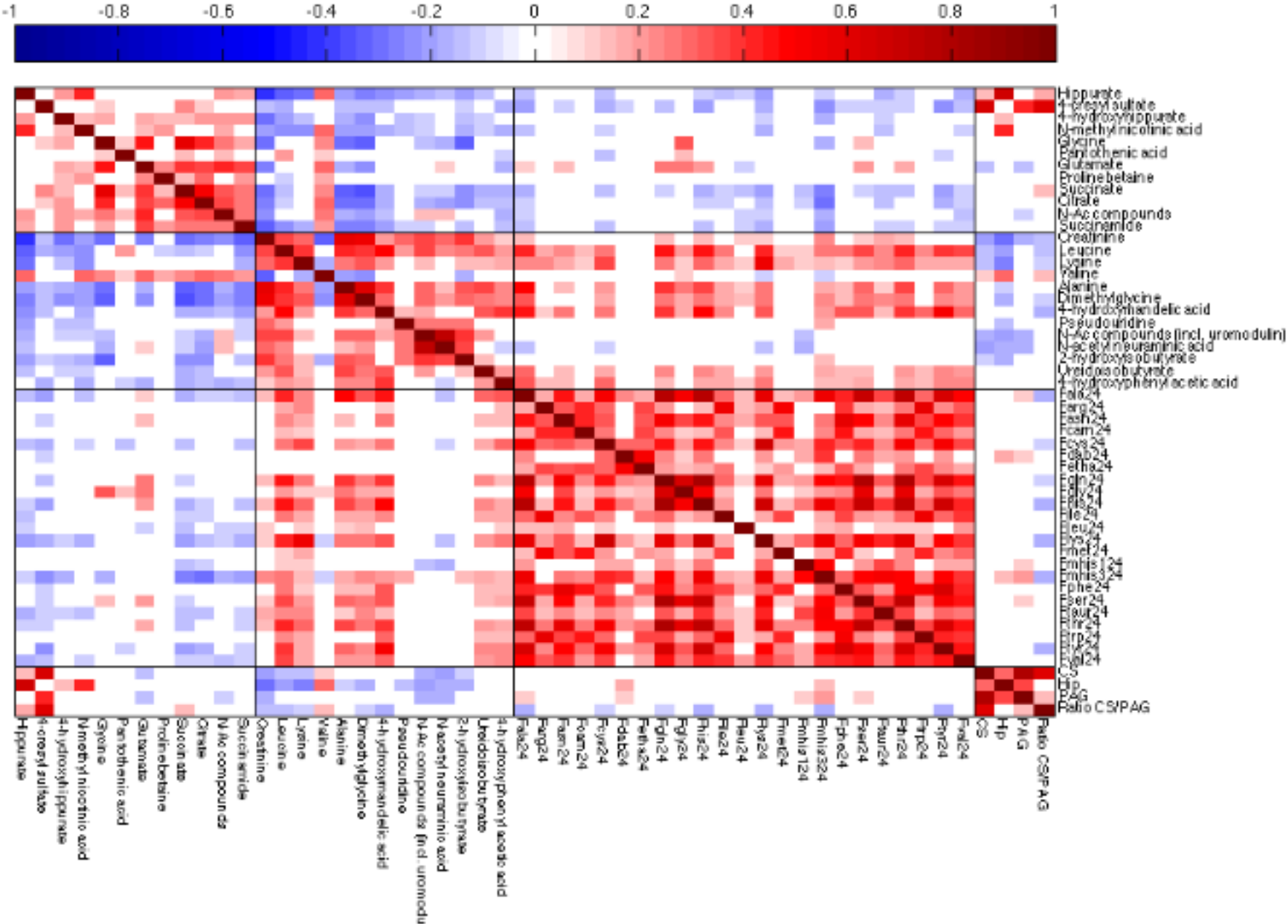
**MANOVA**

- BMI 18.5 - 24.9 kg/m<sup>2</sup>
- BMI ≥30kg/m<sup>2</sup>





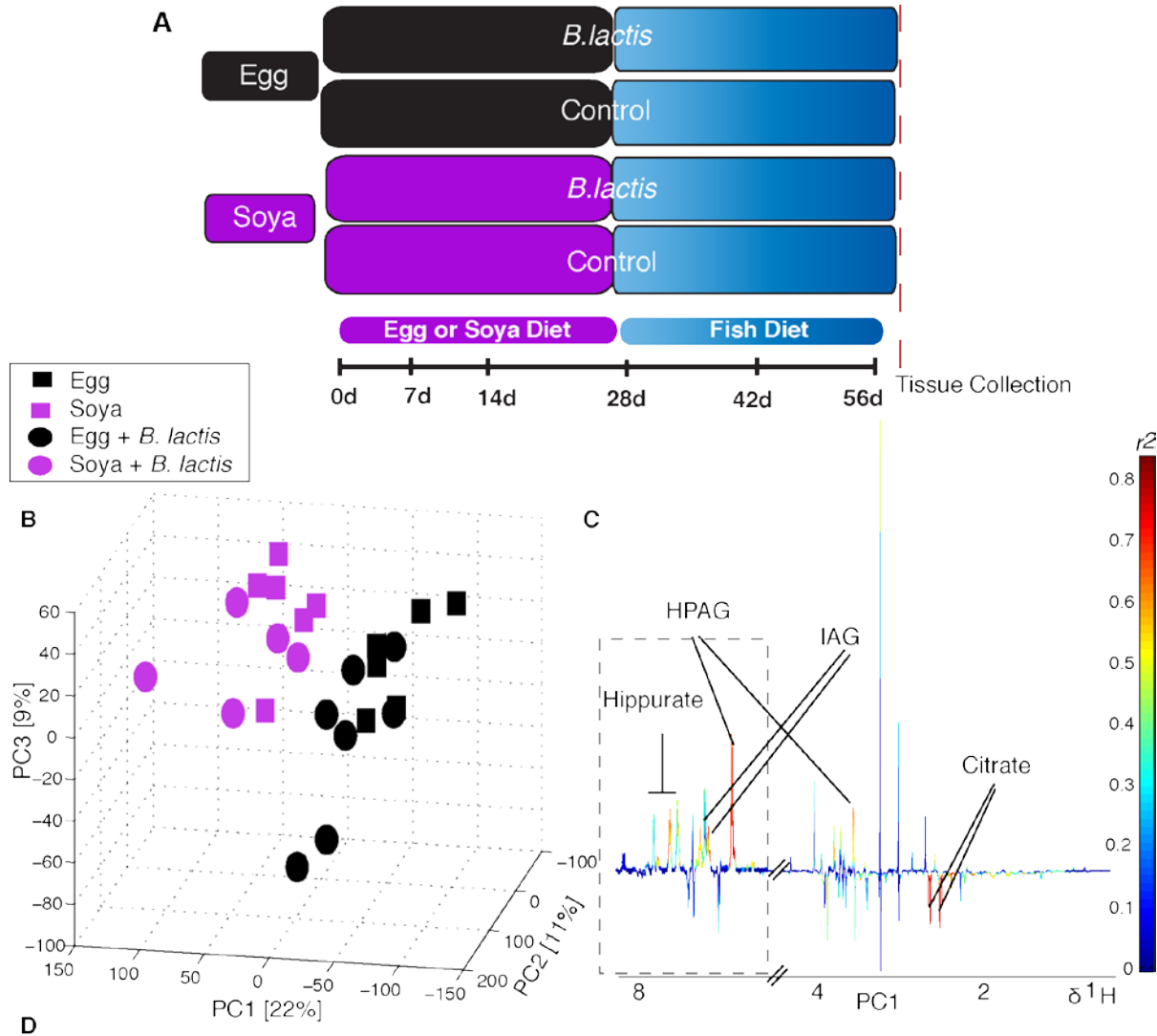
# Correlation between dietary input, metabonomic profiles and ion exchange data that discriminate normal vs clinically obese



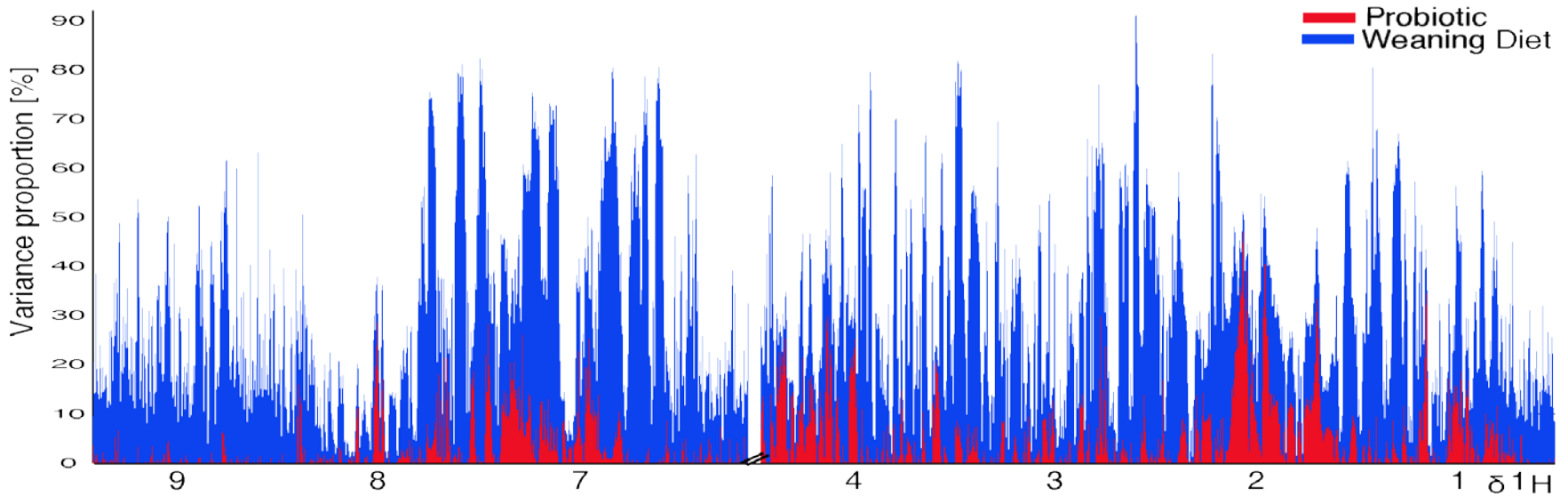
# **Mapping and Understanding The Integrated System Response to Interventions.**

**Can we measure  
“lifestyle interventions”  
metabolically- and if so  
what do they mean?”**

# Porcine model of weaning diet and probiotic to explore shaping of the metabolome, immune system and microflora

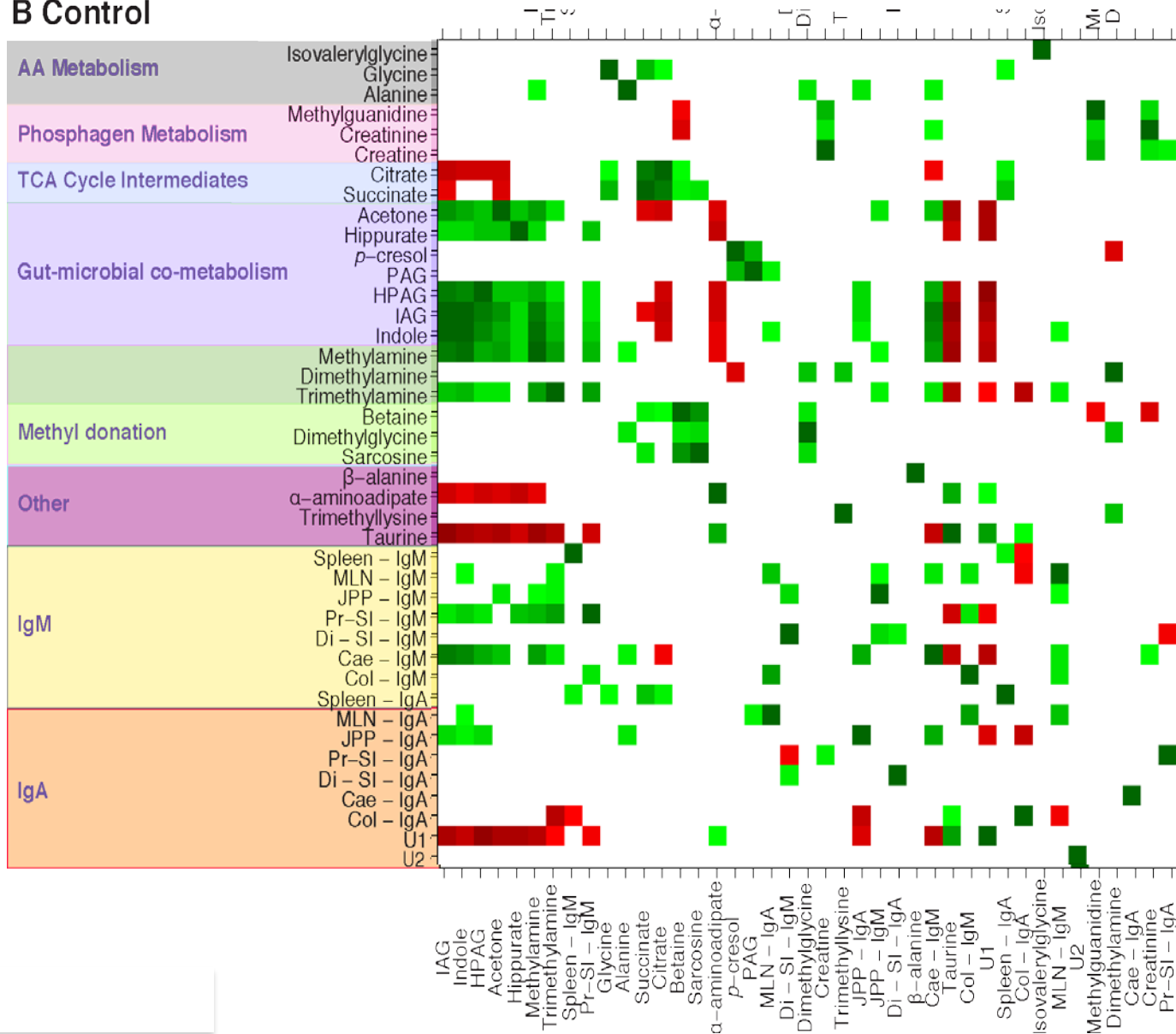


# Differential spectral patterns associated with weaning diet and probiotic intervention.

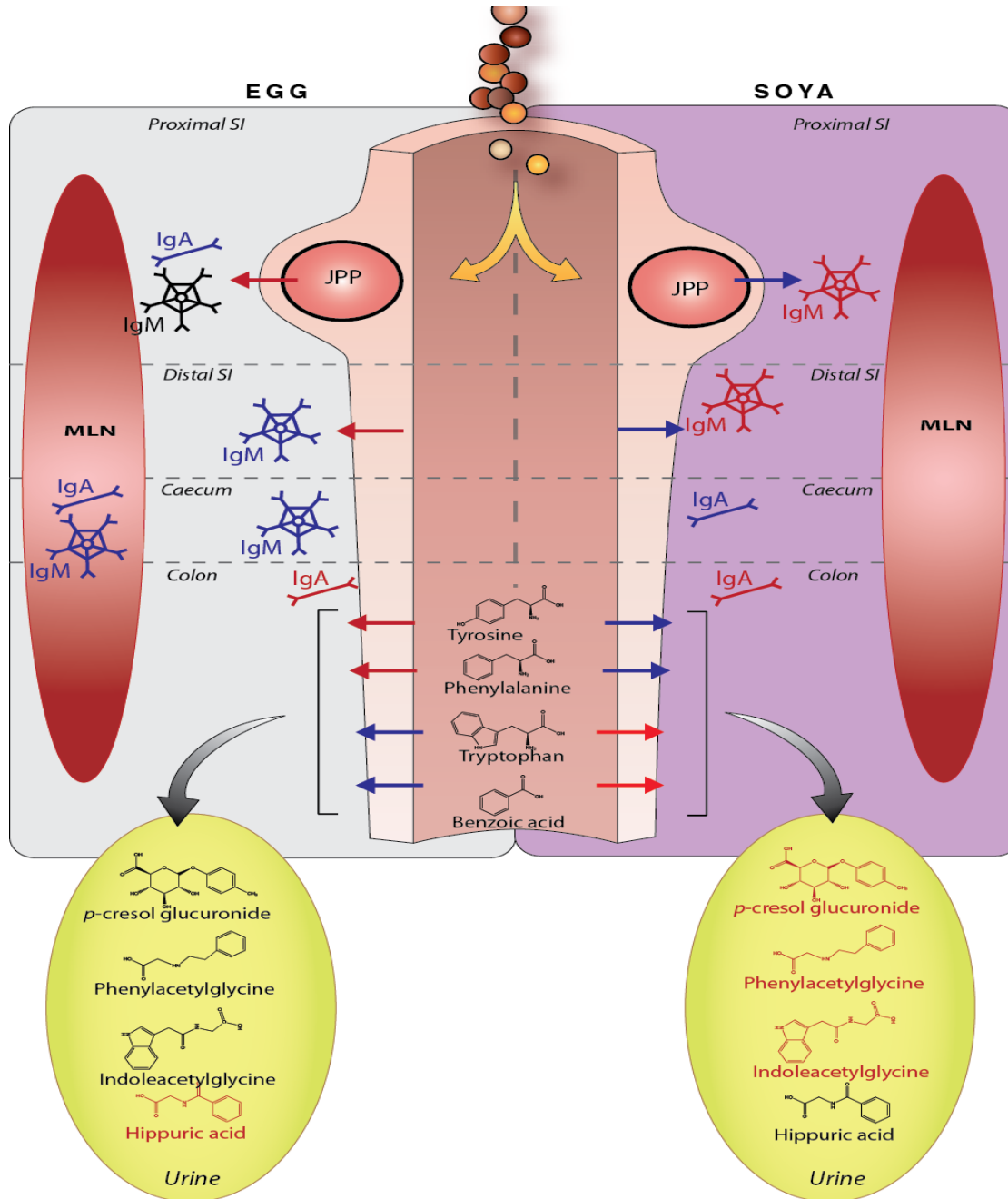


# Correlation map showing relationship between immune and metabolic parameters.

B Control



# Diet & Prebiotic



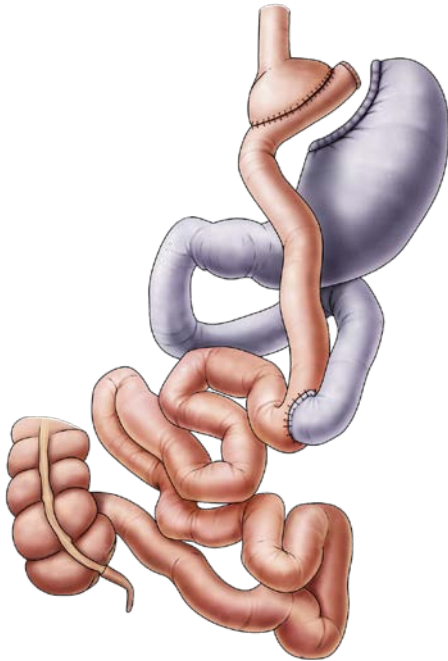


# Surgery & Weight loss

## Bariatric Surgery in a Rat model

Jia Li, Nigel Gooderham

Collaborators: Prof. Darzi, Mr. Athanasiou and Mr. Ashrafian Dr Marchesi



### Groups:

Sham (N=18)

Roux-en-Y gastric bypass (N=18)

### Time points:

Pre-op, 2, 4, 6 and 8 weeks post-op

### Samples:

Urine and faeces

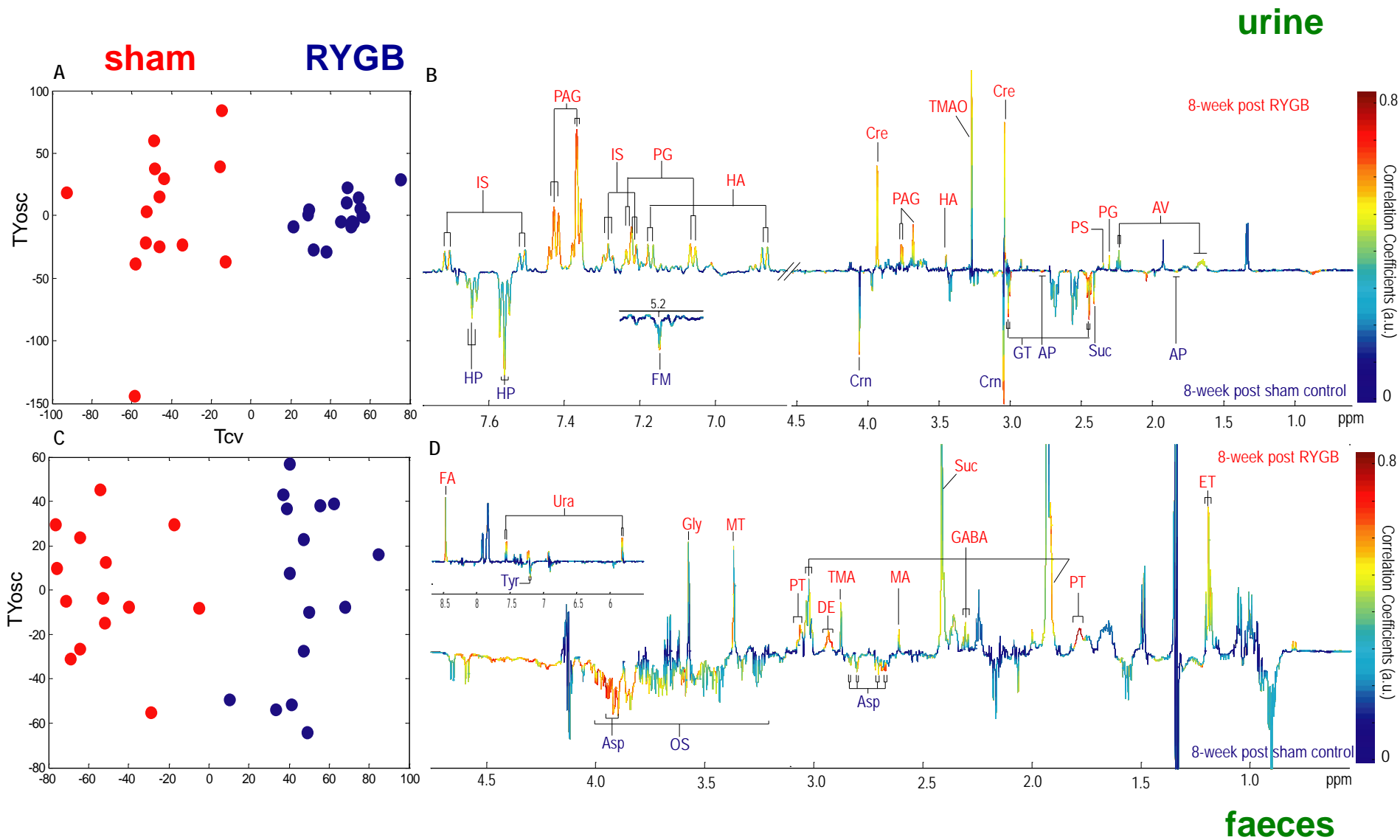
### Methods:

NMR-based metabolic profiling

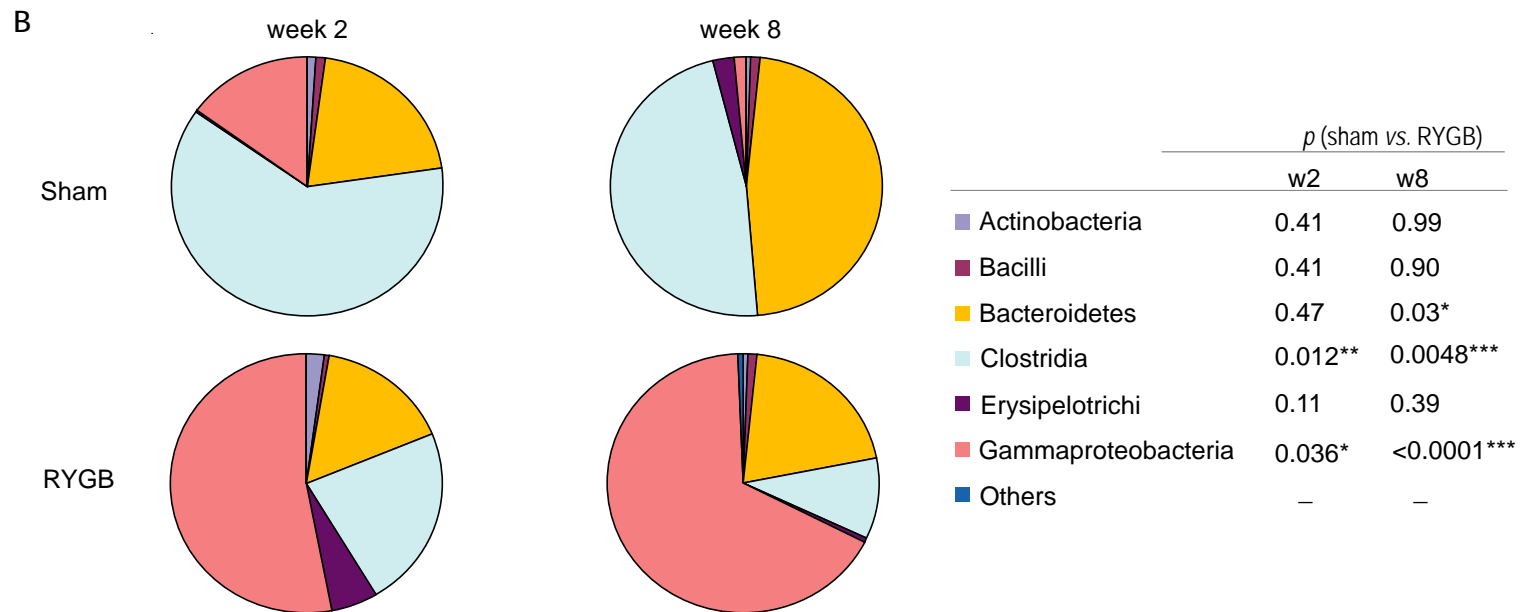
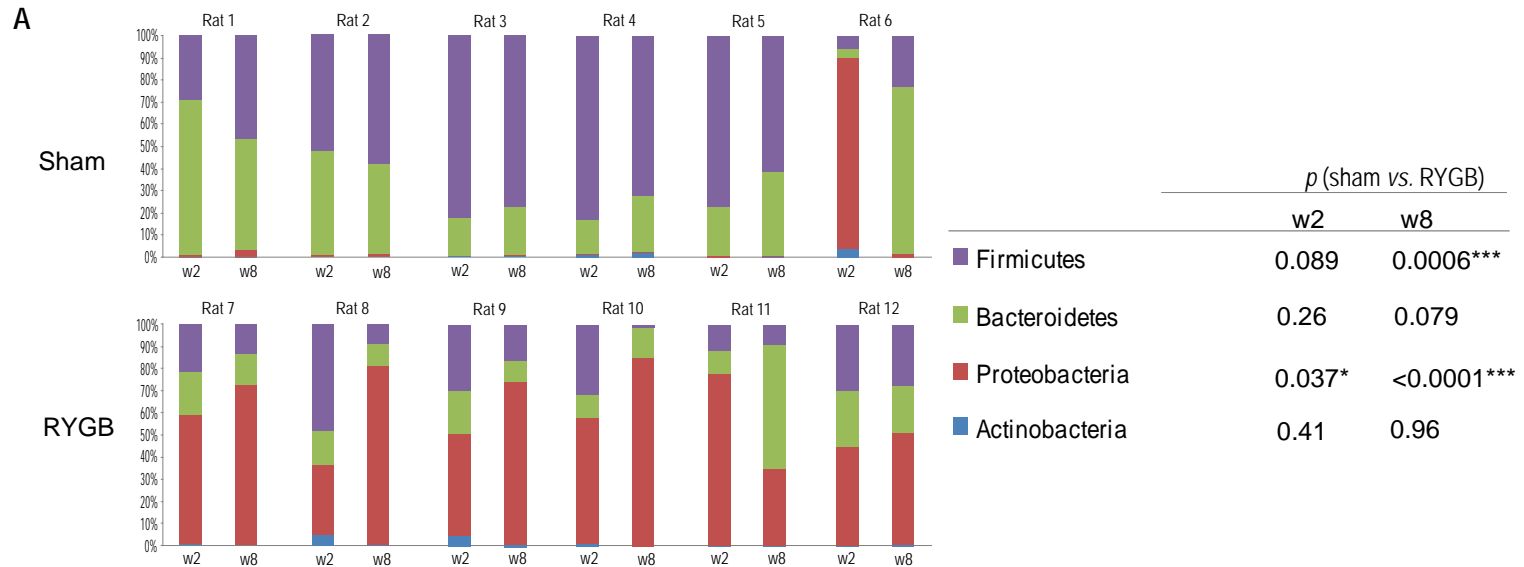
UPLC-MS analysis on faecal bile acids

454 Sequencing system for microbial composition analysis

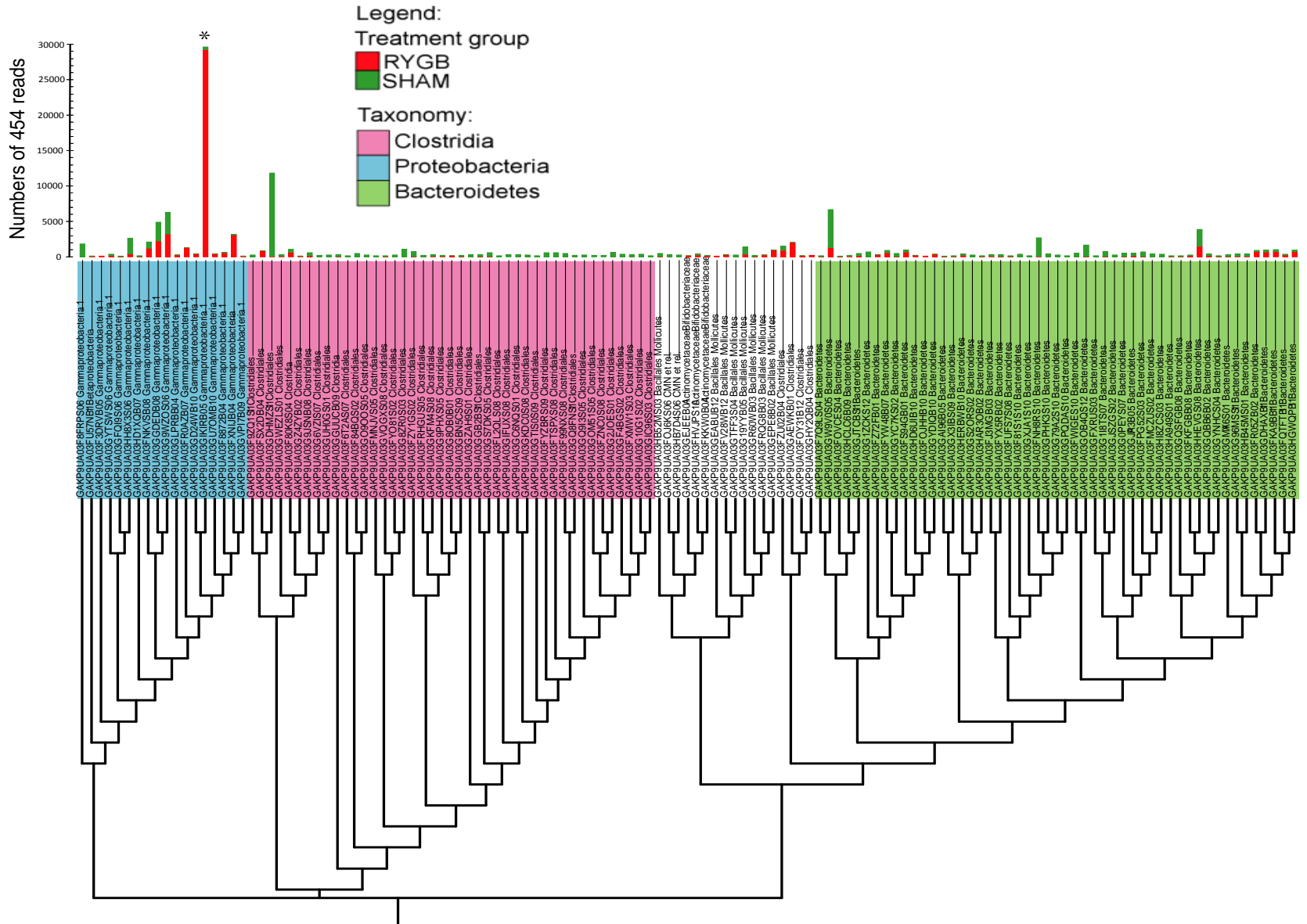
# Bariatric Surgery: RYGB in non-obese rats



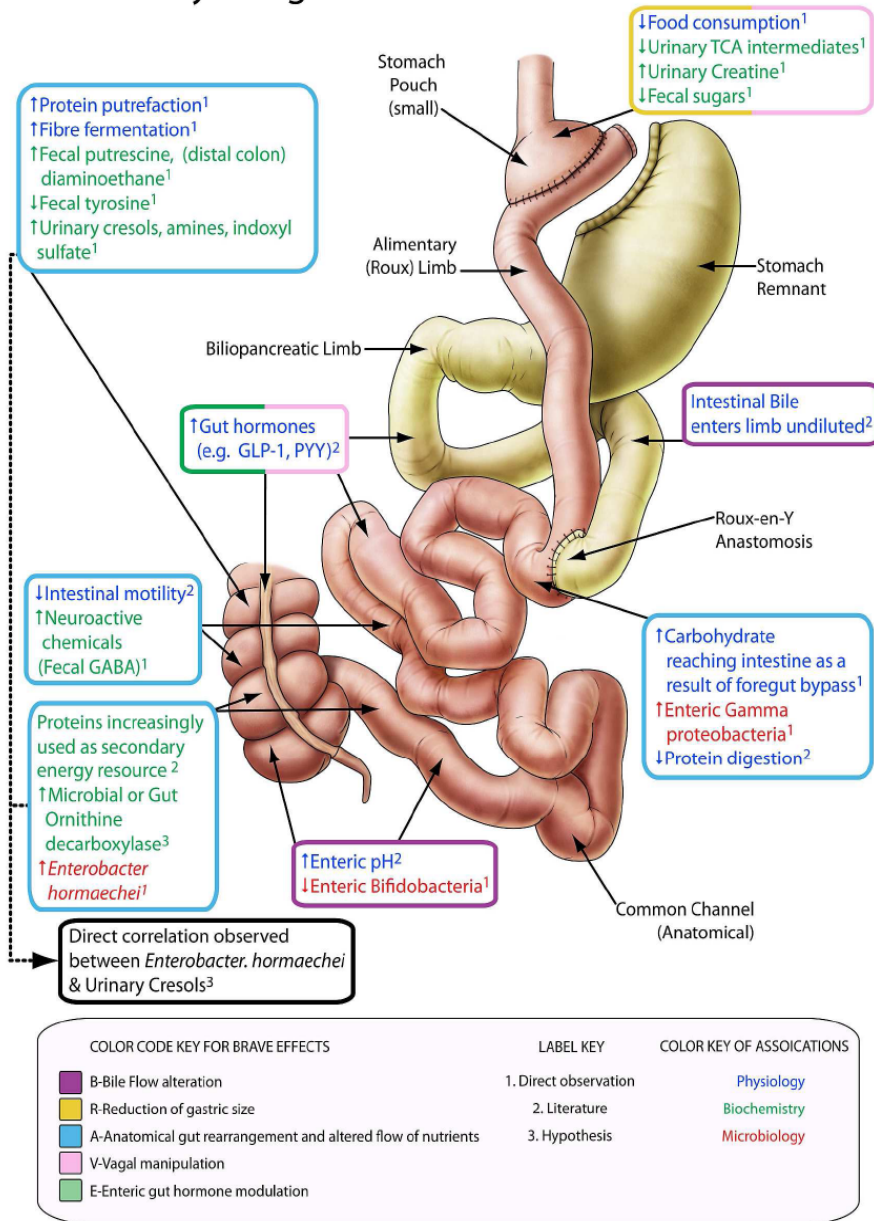
# Bariatric Surgery: 454 sequence data



# Phylogenetic relationships in RYGB/sham operated rats



# The Roux-en-Y Gastric Bypass in Relation to Physiological and Microbial Activities



The Roux-en-Y gastric bypass (RYGB) operation is a bariatric procedure that achieves its physiological benefits through B.R.A.V.E effects:

- **B**ile flow alteration
- **R**eduction of gastric size
- **A**natomical gut rearrangement and altered flow of nutrients
- **V**agal manipulation
- **E**nteric gut hormone modulation

Ashrafian *et al.* 2010 *Obes Rev.* Sep 29

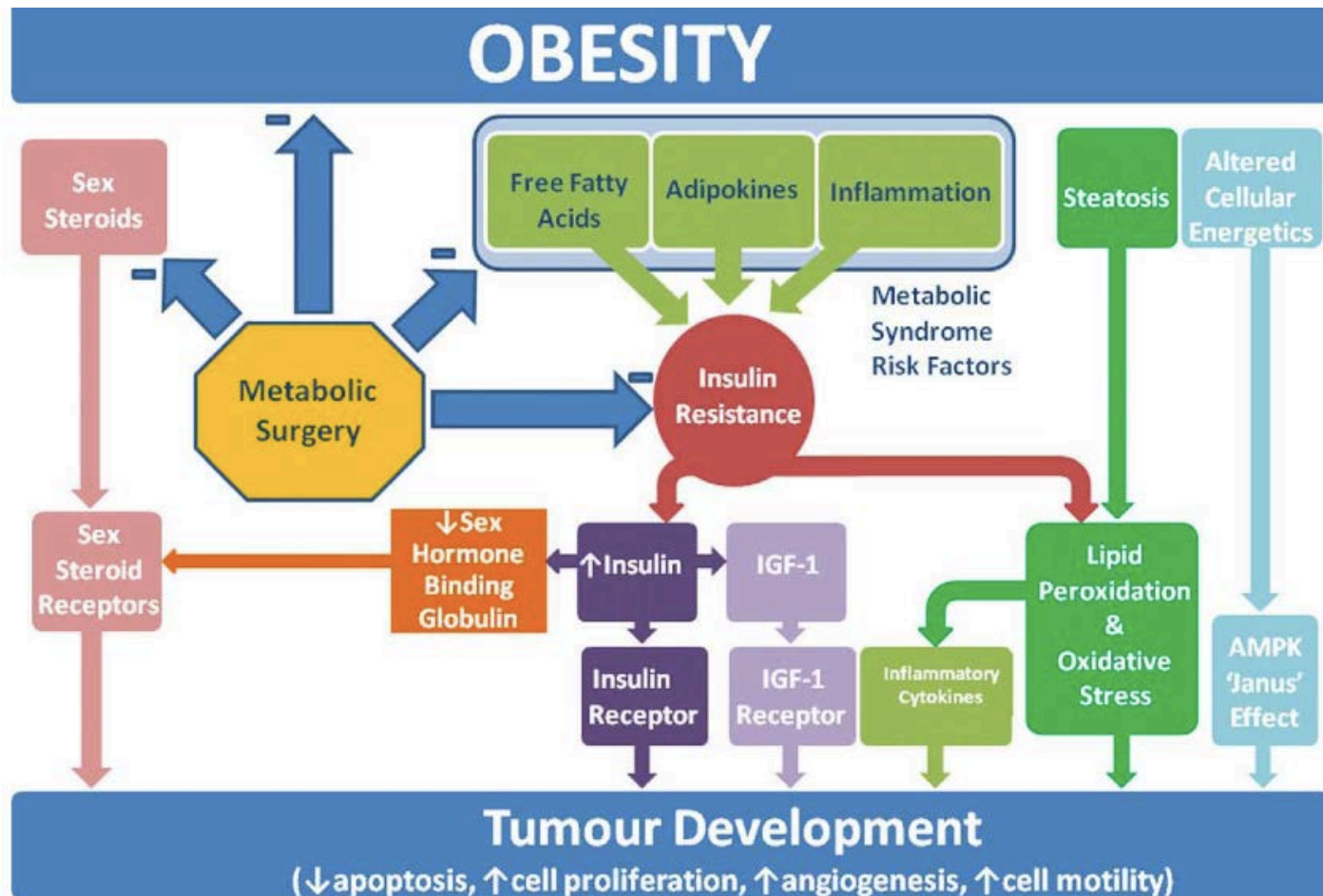
## Summary

- (1) A shift from Firmicutes to Proteobacteria, especially gamma-proteobacteria post RYGB.
- (2) Upregulation of TCA cycle indicates increased energy expenditure.
- (3) Increased biogenesis of urinary *p*-cresol and related compounds and host-microbial co-metabolites.
- (4) A shift from protein degradation to putrefaction

# Metabolic Surgery and Cancer

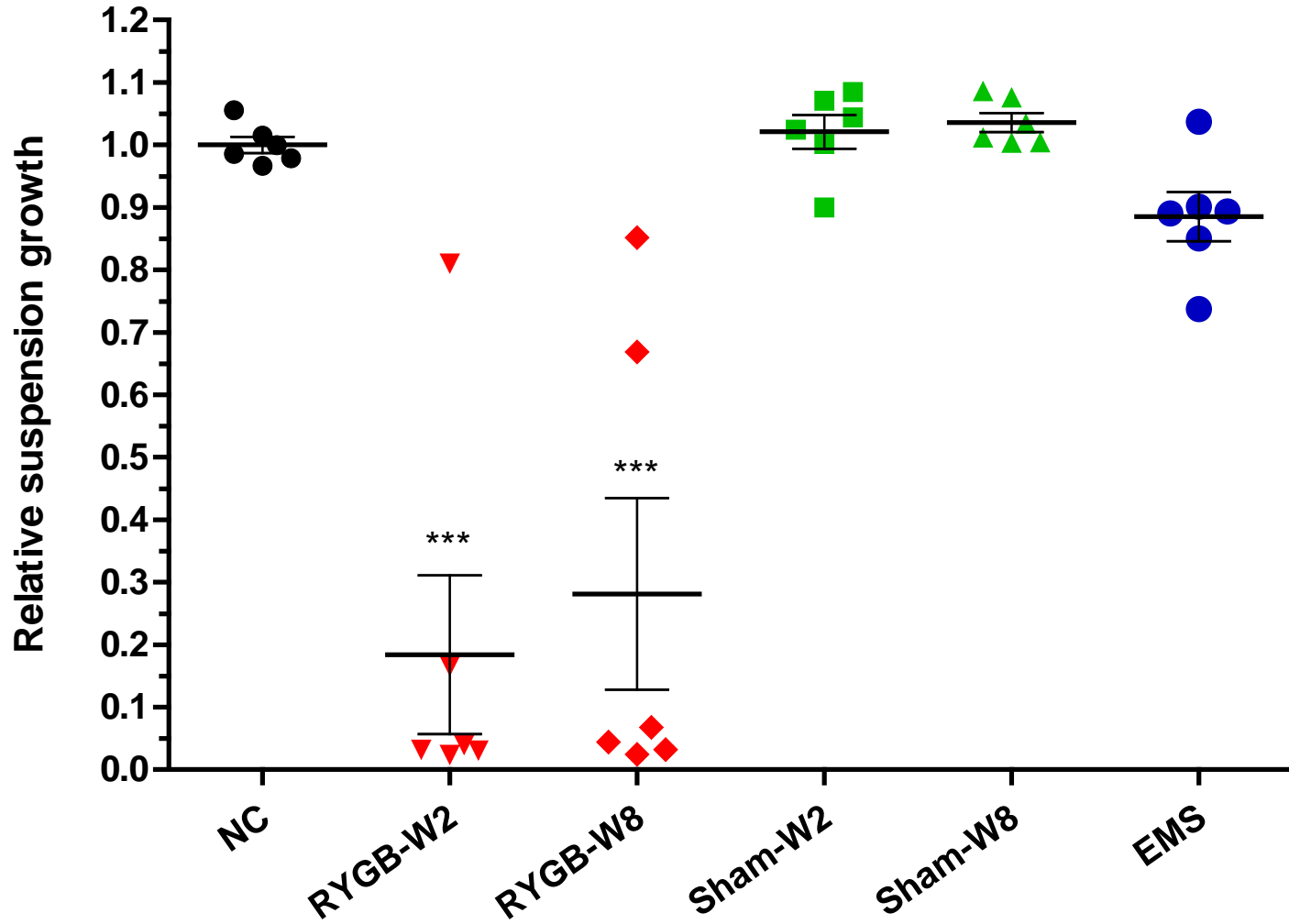
## Protective Effects of Bariatric Procedures

Hutan Ashrafian, MRCS; Kamran Ahmed, MRCS; Simon P. Rowland, BSc(Hons); Vanash M. Patel, MRCS; Nigel J. Gooderham, PhD; Elaine Holmes, PhD; Ara Darzi KBE, FMedSci; and Thanos Athanasiou, MD, PhD, FETCS



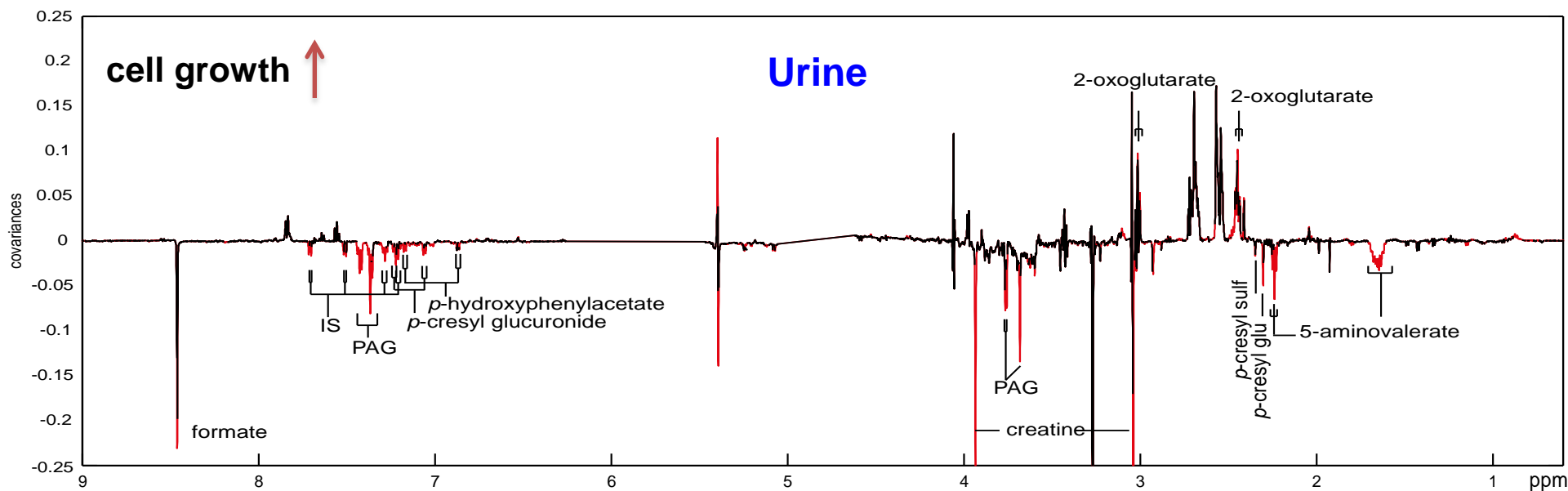
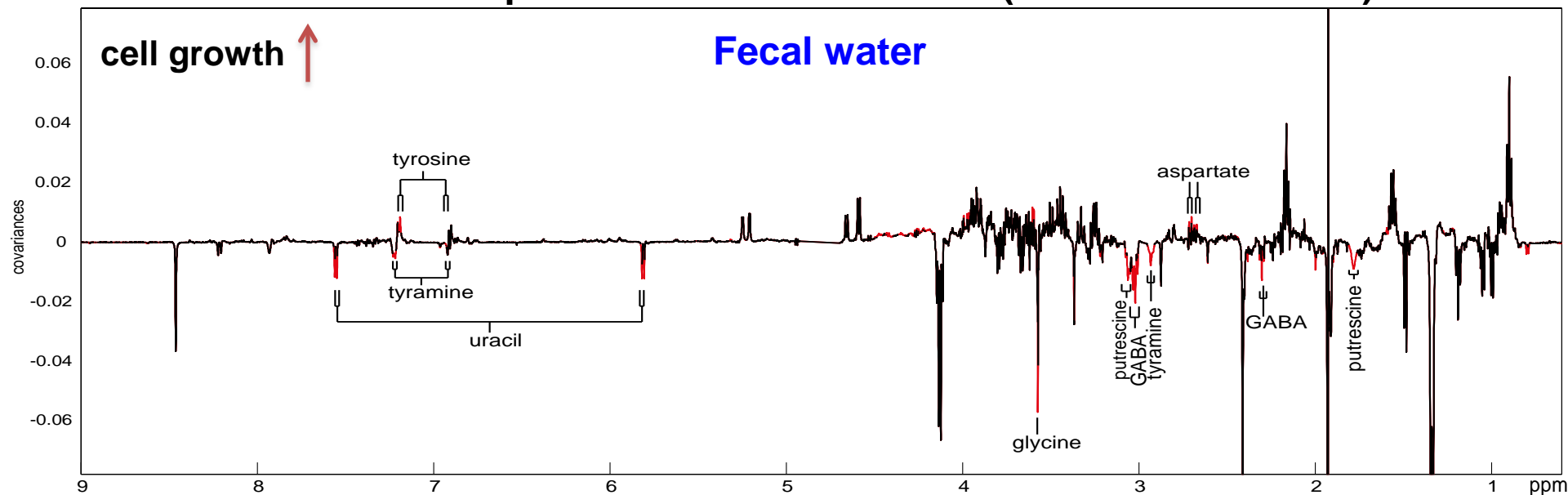
**Figure 1.** Mechanisms of decreased cancer risk by metabolic surgery are depicted. IGF-1 = Insulin-like Growth Factor 1, AMPK = 5' adenosine monophosphate-activated protein kinase.

Determination of the relative suspension growth as a measure of cytotoxicity of fecal water extracts following treatment of L5178Y mouse lymphoblastoid cells for 24 h (mean  $\pm$  S.E.M of 6 independent samples).



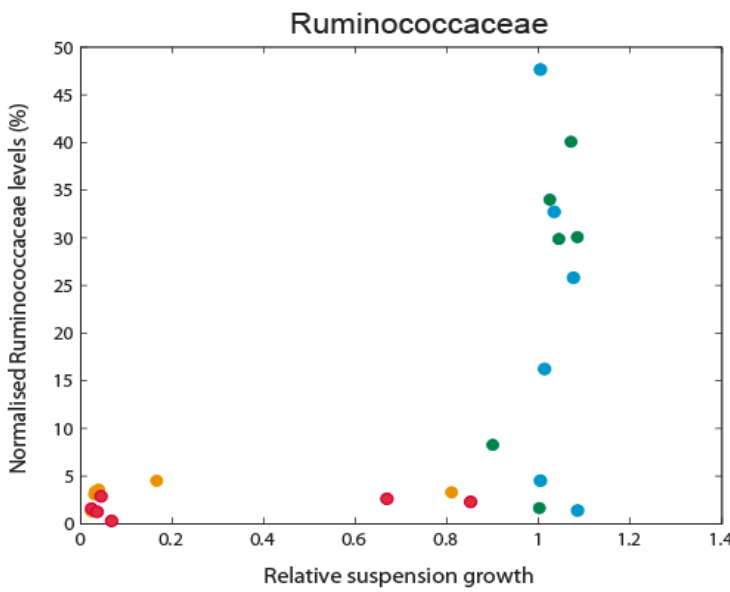
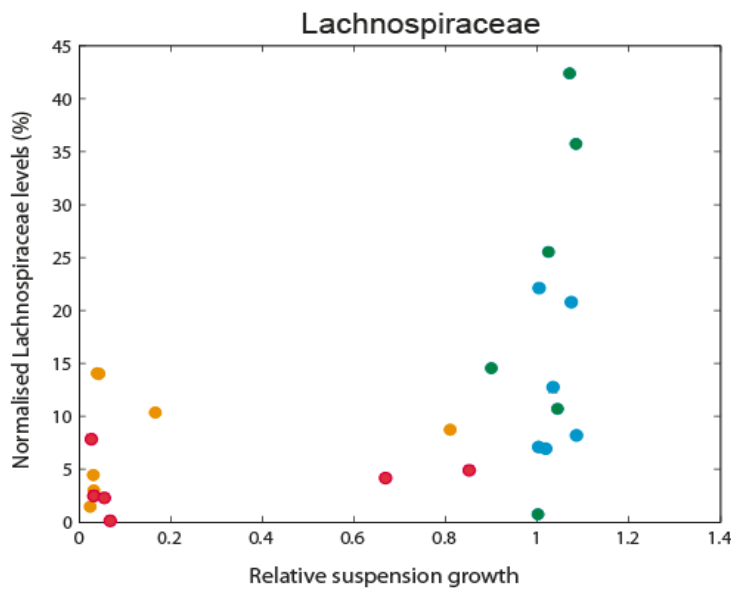
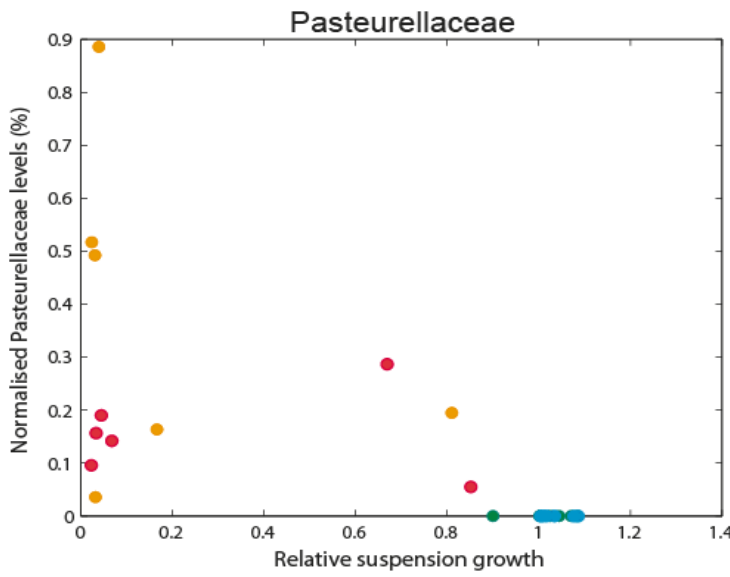
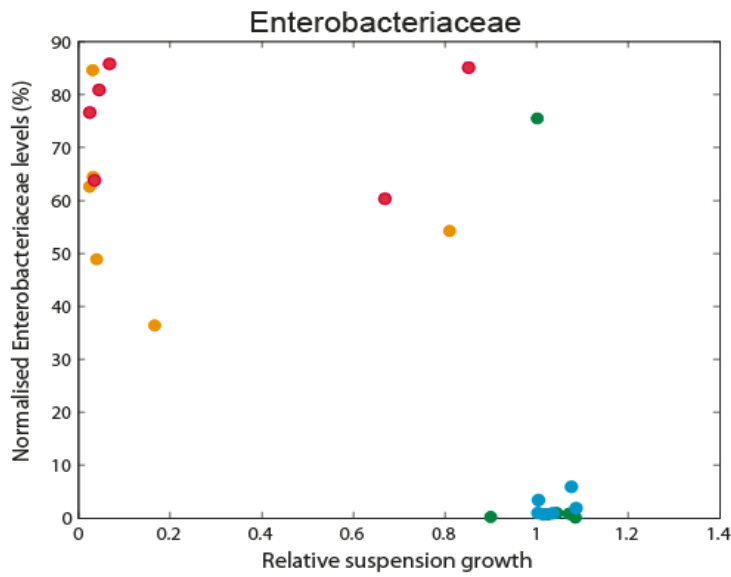


# O-PLS regression analyses of fecal water and urine extracts against relative suspension growth values obtained from a 24h treatment of L5178Y cells with sham or RYGB operated rat faecal extracts (week 2 and week 8)

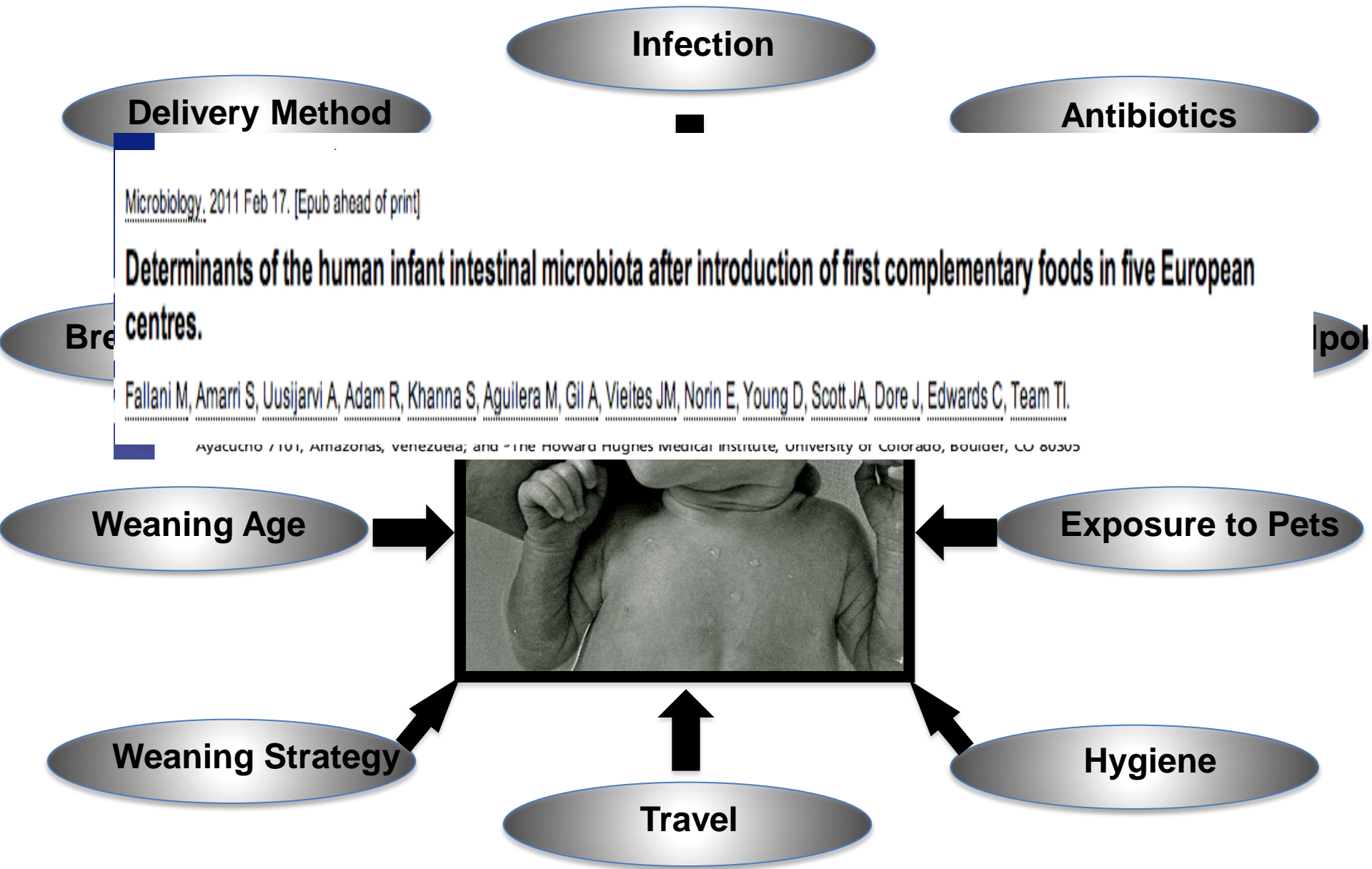




# Scatter plots of normalised bacterial levels and relative suspension growth of L5178Y mouse lymphoblastoid cells exposed to fecal water extracts



# Early influences on the development of the gut microbiome



ORIGINAL ARTICLE

## Premature Birth and Later Insulin Resistance

Paul L. Hofman, M.B., Ch.B., Fiona Regan, M.B., B.S.,  
Wendy E. Jackson, M.B., Ch.B., Craig Jefferies, M.B., Ch.B.,  
David B. Knight, M.B., B.S., Elizabeth M. Robinson, M.Sc.,  
and Wayne S. Cutfield, M.D.

(*Circulation*. 2006;114:1687-1692.)  
© 2006 American Heart Association, Inc.

### Epidemiology

## Low Birth Weight, a Risk Factor for Cardiovascular Diseases in Later Life, Is Already Associated With Elevated Fetal Glycosylated Hemoglobin at Birth

Thiemo Pfab, MD; Torsten Slowinski, MD; Michael Godes, MD; Horst Halle, MD, PhD; Friedrich Priem;; Berthold Hocher, MD, PhD

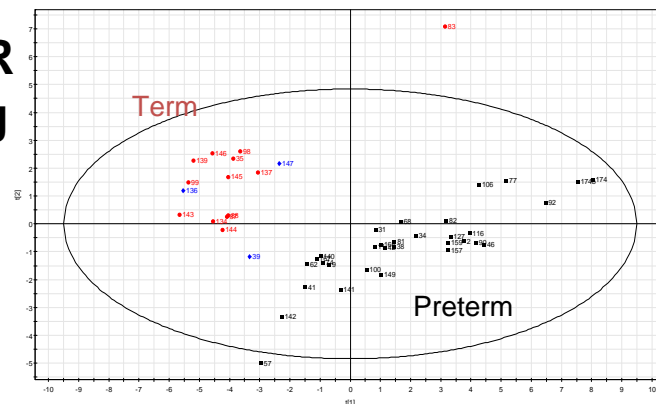
### Clinical Epidemiology

## Low Birth Weight Increases Risk for End-Stage Renal Disease

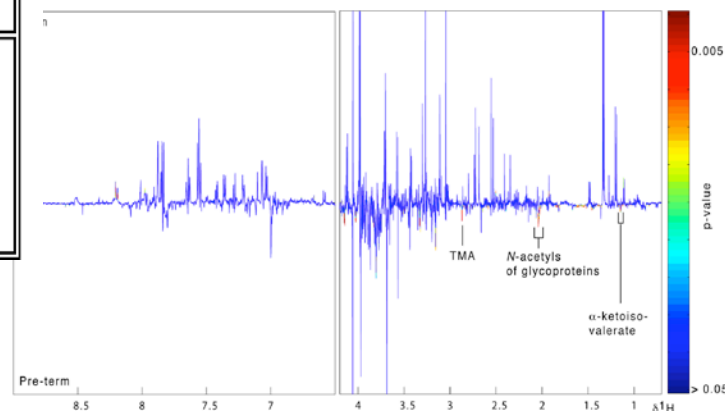
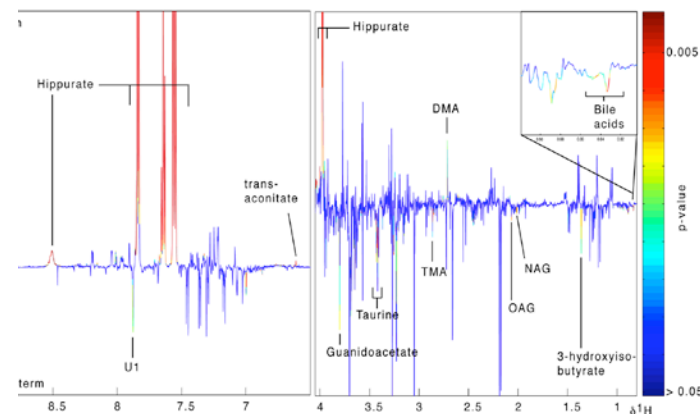
Bjørn Egil Vikse<sup>\*</sup>, Lorentz M. Irgens<sup>†</sup>, Torbjørn Leivestad<sup>||</sup>, Stein Hallan<sup>¶,\*\*</sup> and Bjarne M. Iversen<sup>\*</sup>

# Differential biomarkers associated with preterm birth

PCA scores and loadings plots based on urine NMR profiles showing metabolic differentiation of young adults (18-25 yrs) in preterm vs 'normal' birth



Group	Metabolites	Direction of change	Chemical shift [ppm]	Multiplicity	p value
Male preterm	bile acids	+	0.83-0.85	m	0.0004
	3-hydroxyisobutyrate	+	1.36	s	0.014
	O-acetyl fragments of glycoproteins	+	2.066	s	0.012
	dimethylamine	-	2.71	s	0.03
	trimethylamine	+	2.86	s	0.009
	guanidoacetate	+	3.8	s	0.017
	t-aconitate	-	6.61	s	0.003
	hippurate	-	7.64	t	0.003
Female preterm	$\alpha$ -ketoisovalerate	+	1.145	d	0.03
	N-acetyl fragments of glycoproteins	+	2.04	s	0.007
	trimethylamine	+	2.86	s	0.0009



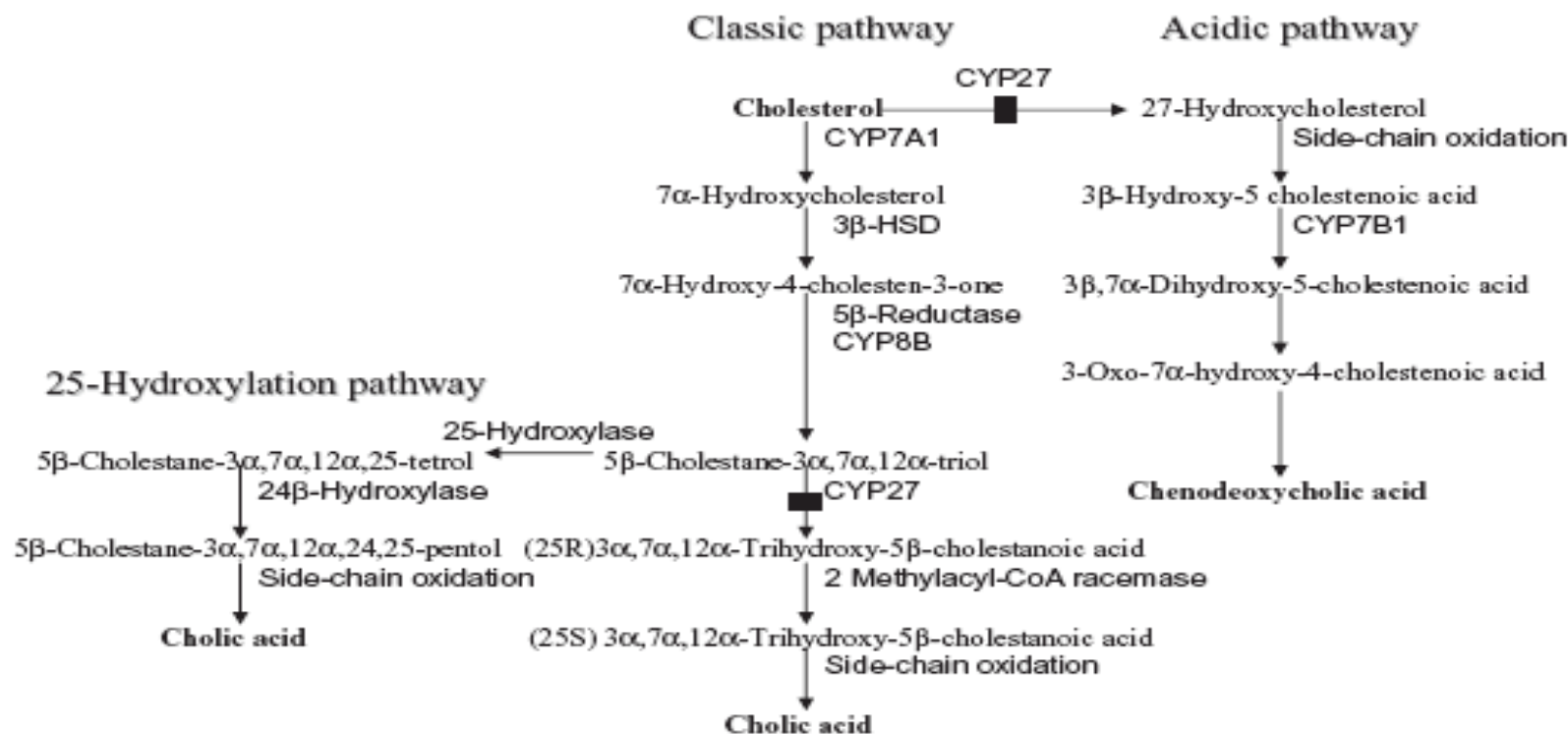
Original Article

**Developmental pattern of urinary bile acid profile in preterm infants**

Hiroshi Nishiura,<sup>1</sup> Akihiko Kimura,<sup>1</sup> Yasuhiko Yamato,<sup>1</sup> Kumiko Aoki,<sup>2</sup> Takahiro Inokuchi,<sup>2</sup> Takao Kurosawa<sup>3</sup> and Toyojiro Matsuishi<sup>1</sup>

<sup>1</sup>*Department of Pediatrics and Child Health and* <sup>2</sup>*Research Institute of Medical Mass Spectrometry, Kurume University School of Medicine, Kurume, Fukuoka and* <sup>3</sup>*Faculty of Pharmaceutical Sciences, Health Sciences University of Hokkaido, Ishikari-Tobetsu, Hokkaido, Japan*

**Conclusion:** Physiological cholestasis in preterm infants persists longer than in full-term infants. Moreover, as large amounts of cholic and 1 $\beta$ ,3 $\alpha$ ,7 $\alpha$ ,12 $\alpha$ -tetrahydroxy-5 $\beta$ -cholan-24-oic acids were detected in urine from preterm infants during this study, the 25-hydroxylation pathway may be particularly important for bile acid synthesis in early preterm infants.





# Concluding Remarks

1. Advances in metabolic profiling methods allow its application in a wide variety of biomedical fields.
2. **Statistical spectroscopic & chemometric analysis of spectroscopic and related data allow biomarker structure, pathway elucidation and mechanistic insights.**
3. Can identify biomarkers of nutrient intake, quantify, and monitor effects on health in animals and humans.
4. **Variation in human populations need not be an insurmountable obstacle and can even carry valuable information – Personalized Medicine**
5. The metabolic looking glass provides a ‘systems biology’ window on an organism -provides a framework for stratification and management of individuals and



# ACKNOWLEDGEMENTS

## **Pediatrics**

**Nina Modi**

**Anisha Wijeyeskera**

**Mathew Hyde**

**James Parkinson**

## **Northwestern University/**

**Jeremiah Stamler**

**Martha Daviglius**

## **AstraZeneca**

**Ian Wilson**

## **Chinese Academy of Science, Wuhan**

**Yulan Wang**

## **Imperial College**

**Jeremy Nicholson**

**John Lindon**

**Nigel Gooderham**

**Jia Li**

**Ivan Yap**

**Jonathan Swann**

**Will Edmands**

**Silke Heinzmann**

**Claire Merrifield**

## **Cardiff University**

**Julian Marchesi**

## **FUNDERS**

**Nestle, NHS, NIH, MRC,**

**AstraZeneca, EU FP7**