



(REVIEW ARTICLE)



## Role of the probiotics in pathologies Metabolics of gut Microbiota

Laila Ovalle Véjar <sup>1</sup>, Axa-Sofía Ramos Arriaga <sup>1,\*</sup>, María-Magdalena Domínguez Jiménez <sup>1</sup>, Marissa Nava De Casas <sup>1</sup>, María-Fernanda Muñoz Flores <sup>1</sup> and Brissia Lazalde <sup>2</sup>

<sup>1</sup> Faculty of Medicine and Nutrition, Juarez University of the State of Durango; Durango, Dgo. Mexico.

<sup>2</sup> Department of Genetics of the Faculty of Medicine and Nutrition, Universidad Juarez del Estado de Durango, Durango, Dgo. Mexico.

GSC Advanced Research and Reviews, 2024, 19(03), 141–146

Publication history: Received on 04 May 2024; revised on 11 June 2024; accepted on 13 June 2024

Article DOI: <https://doi.org/10.30574/gscarr.2024.19.3.0214>

### Abstract

The gut microbiota is the central regulator of human metabolism, it is considered a superorganism, it fulfills functions related to homeostasis and the maintenance of systemic health, contributing to immunity and epithelial integrity, any alteration is related to non-compliance or interruption of some of its functions, for this reason in search of balance, prevention and treatment measures have been implemented, one of them is the use of probiotics, which has been proven to bring beneficial actions towards the health of the host, such as lactobacillus and bifidobacteria, here we will review the association between gut microbiota, probiotics and the use of probiotics like a treatment of prevention for pathologies of gut microbiota.

**Keywords:** Gut Microbiota; Probiotics; Prevention of Pathologies Metabolics; Gastrointestinal microorganisms; Dysbiosis

### 1. Introduction

The microbiota is often called a superorganism, due to the extensive number of microorganisms that make it up, mostly bacteria, interacting with each other in a dynamic way. (6) It contains between 100 and 150 times more genes than the human genome and is closely related to development, homeostasis and disease. (10)

It has an essential role in the development and maintenance of systemic health through antagonism of pathobionts and production of metabolites that contribute to immunity and epithelial integrity; commonly, perturbations of the commensal microbiota are associated with systemic changes in immune homeostasis and contribute to disease susceptibility and outcome. (1)

In search of restoring balance and improving the health of the host, a wide variety of treatments have been used that completely target the microbiota, such as the use of probiotics. (6) It has been proven that they are capable of conferring health benefits, especially in terms of prevention such as infections of the gastrointestinal tract, since they facilitate the absorption of nutrients and alter the dynamic interaction of the microorganisms of the microbiota. (8)

In recent years, numerous studies have pointed to microbial dysbiosis as a key driving factor in many gastrointestinal conditions, including cancers. However, comprehensive mechanistic understandings of how gut microbes collectively influence carcinogenesis remain limited; In addition to their role in carcinogenesis, the gut microbiota has now been shown to play a key role in influencing clinical outcomes of cancer immunotherapy, making them valuable targets in cancer treatment. (11)

\* Corresponding author: Ramos-Arriaga Axa.

## 2. Probiotics

Probiotics are defined as live microorganisms that, when administered in adequate amounts, provide a health benefit to the host. (3) They modulate the composition of the microbiota by inhibiting the growth of potentially pathogenic bacteria through the production of bacteriocins and the creation of a more acidic environment, unfavorable for pro-inflammatory bacteria but which favors the growth of beneficial species such as lactobacillus and bifidobacteria, and they also increase diversity. bacterial and decrease fungal diversity and can increase the production of fatty acids with anti-inflammatory and anticarcinogenic properties. (5)

In pathological conditions characterized by inflammatory processes, it is postulated that probiotics exert beneficial effects by reducing disease activity and favoring the induction of remission. It is argued that this decrease in inflammation occurs by inhibiting the growth of pathogenic bacteria by improving barrier functions that prevent invasion of tight junctions, by reducing the pH of the intestine, and by stimulating both specific and nonspecific immune responses. (7)

### 2.1. Gastrointestinal microorganisms

The human gastrointestinal tract provides a suitable environment for a diverse microbial population, with more than 400 to 500 different species of bacteria identified to date. The main introduction of this variety to the host probably occurs in close connection with labor and birth of the neonate, with *Lactobacillus* and *Prevotella* spp predominating in the vaginal canal during birth. This microbial population may be susceptible to changes in diet, host age, disease states, and lifestyle. (2)

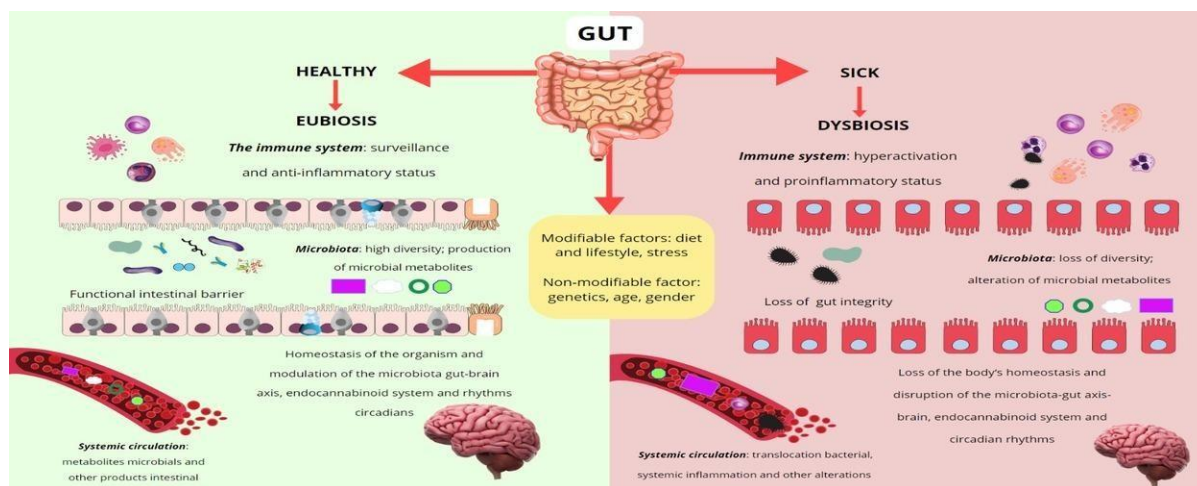
The intestinal microbiota influences multiple metabolic processes in the host, such as energy regulation, glucose and lipid metabolism. When there is a microbial imbalance, known as dysbiosis, metabolic alterations can occur. Several studies have established a causal relationship between microbial function and these metabolic perturbations. Treatments targeting the gut microbiota have been shown to improve metabolic function in humans, and fecal transplantation of microbiota from patients with obesity, steatosis, or type 2 diabetes can partially replicate the donor's metabolic profile in animal recipients. (4)

The bacteria present in the large intestine maintain a continuous interaction with the epithelial cells of the colon and other microorganisms, influencing physiological processes. Given the close link between the gut microbiome and normal colon physiology, dysbiosis in the gut. (9)

The excessive presence or uncontrolled growth of certain microorganisms in the intestine can change the beneficial relationship they normally have with the body into a harmful relationship. This has been linked to several gastrointestinal diseases, such as inflammatory bowel disease, irritable bowel syndrome, metabolic syndrome, and non-alcoholic fatty liver disease. (12)

In a healthy state, a layer of mucosa acts as a barrier between epithelial cells and bacteria in the intestine. In general, beneficial bacteria residing in the intestine do not have direct contact with epithelial cells. However, in patients with inflammatory bowel disease (IBD), a higher density of bacteria that are associated with the mucosa is observed. These bacteria come from biofilms containing a significant amount of *Bacteroides fragilis* (*B. fragilis*) and a considerable amount of extracellular matrix. This suggests that the microbiota is more aggressive and that biofilms are more invasive in IBD patients compared to healthy individuals. (13)

The composition of the intestinal microbiota plays a fundamental role in metabolic diseases. Therefore, controlling and regulating the gut microbiota could represent a promising solution to address these conditions. (14) The presence of a healthy gut microbiota may have a protective effect against the development of inflammatory bowel diseases (IBD). This implies that regulating the composition of the intestinal microbiota could be considered as a possible treatment option in the future. (13) In addition, the intestinal microbiota constantly releases bioactive molecules inside the intestine, and some of these molecules can pass into the blood circulation and have an additional impact on metabolic processes by acting as specific ligands. In this process, intestinal integrity plays a crucial role by preventing harmful bacterial metabolites from being transferred to the circulation. (14)



**Figure 1** Microbiota in health and disease (dysbiosis).

Throughout life, sudden alterations in a person's gut microbiota are common. Factors such as infections, antibiotic use, hygienic practices, dietary changes, and even vacation travel can cause temporary instability in the gut microbiota, however, in most cases, the gut microbiota eventually resets and recovers completely. (12)

The intestinal microbiota is mainly composed of five bacterial groups: Bacteroidetes, Firmicutes, Actinobacteria, Proteobacteria and Verrucomicrobia. (13)

The persistence of a dysbiotic imbalance, characterized by a decrease in “peacekeeping” organisms and an increase in disease-associated microbiota, may contribute to the development of malignant diseases. Among the most common intestinal microorganisms associated with the gastrointestinal tract are *H. pylori*, *E. coli*, various *Mycoplasma* species, *S. bovis*, *Clostridium septicum*, Epstein-Barr virus (EBV), and human papillomavirus. (12)

There are many mechanisms for probiotics to inhibit pathogenic microorganisms, such as stimulation of epithelial barrier function, production of antimicrobial substances, and limiting the access of pathogenic microorganisms to nutrients, resources and competitive exclusion due to competition for binding sites. (13)

## 2.2. The use of probiotics

The use of probiotics can cause changes in the composition of the intestinal microbiota, which reflects the ability of probiotics to survive during their passage through the digestive tract. (15)

Probiotics are mainly microorganisms present in the human intestine and can have beneficial effects by helping to maintain the balance of the intestinal microbiota. In everyday life, common probiotics, such as *Lactobacillus* or *Bifidobacterium*, are often consumed in the form of supplements containing active bacteria. (16) The foundation for the application of probiotics dates to observations made in the early 19th century. It was first proposed as a treatment due to the observation that children suffering from diarrhea had a decrease in the population of bifidobacteria in their intestine. This observation suggested that oral intake of bifidobacteria could replenish this subpopulation of the gut microbiota and potentially improve the health of affected individuals. (17)

Clinical trials have been conducted with a variety of probiotic strains to treat inflammatory and gastrointestinal diseases. But drug development associated with preclinical and clinical studies is lacking.

With the advancement of research on probiotics, the mechanism by which these microorganisms contribute to maintaining health has become more evident. In recent years, it has been observed that probiotics are capable of preventing the adhesion of pathogens to the intestinal surface, strengthening the epithelial barrier and modulating the immune system. In addition, it has also been observed that probiotics exert a regulatory effect on intestinal microecology and have a beneficial impact on the human body. (16)

### 2.3. Probiotics in inflammatory bowel disease

Inflammatory bowel disease (IBD), which encompasses conditions such as ulcerative colitis (UC) and Crohn's disease (CD), is a global disease with a higher incidence in Western countries, although an increase in incidence is observed in newly industrialized countries. (13)

Although the history (chronic inflammatory state) and some symptoms of Crohn's disease (CD) and ulcerative colitis (UC) are similar, these diseases have significant differences from each other. An accurate diagnosis is crucial for proper treatment. Crohn's disease can affect any part of the digestive tract, from the mouth to the anus. (Table 1)

There have been many reports providing evidence that some strains of probiotics may be useful during treatment and prevention against IBD, in both murine and rat models of the disease.

Approximately, they indicate some differences, probably caused by the selected research methods and the selected bacterial strain. In the animal model for colitis induction, the most common are DSS dextran sulfate sodium or TNBS 2,4,6-trinitrobenzenesulfonic acid. The use of DSS is dictated by its strong, rapid and dose-dependent UC-like effect. (18)

**Table 1** Diseases that alter the gut microbiota (19, 20, 21, 22)

Intestinal Disorders		Observations		Mechanisms	Effect of Probiotics	
Crohn's Disease		Increase in Candida and fecal fungal diversity		Candida induces a Th17-mediated response that exacerbates inflammation	Can reduce Candida load and modulate the immune response, improving symptoms	
Ulcerative Colitis		Increase in Debaryomyces and Candida, decrease in alternaria and Aspergillus		Candida induces Th17 and IL-23 responses, affecting the intestinal microbiome	Help restore the gut microbiota, reducing inflammation and improving remission	
Irritable Bowel Syndrome	Bowel	Increase in Candida and Malassezia, decrease in Sporobolomyces		Fungicides reduces visceral hypersensitivity	Can decrease Candida proliferation, improving hypersensitivity and gut inflammation	
Intestinal Graft-Versus-Host Disease (GVHD)		Increase Candida	in	Candida induces Th17 and IL-23 responses, exacerbating	Probiotics balance the microbiota, reducing	can gut the

### 3. Conclusion

The intestinal microbiota has gained interest in recent years regarding the regulation of intestinal homeostasis. The metabolic importance of the intestinal microbiota for the pharmacokinetics of nutrients and drugs underscores the potential of using probiotics for preventive or therapeutic applications in various gastrointestinal disorders. Their ability to restore microbial balance is essential, as they decrease the proliferation of fungal and bacterial pathogens and enhance the host's immune response. These therapeutic effects result in a significant improvement in clinical symptoms and a reduction in the progression of diseases such as Crohn's disease, ulcerative colitis, and irritable bowel syndrome.

On the other hand, it allows the development of more specific and effective treatments, taking advantage of the beneficial interactions between microorganisms and the human body; it contributes to the prevention of diseases by promoting a healthy microbiota through diet and other lifestyle factors. In addition, it improves the understanding of complex and multifactorial diseases, such as autoimmune, gastrointestinal and neurological diseases, by revealing the essential role that the microbiota plays in modulating the immune system and other bodily functions. In summary, this knowledge opens new avenues for personalized medicine and public health, improving both quality of life and health outcomes globally.

## Compliance with ethical standards

### *Disclosure of conflict of interest*

No conflict of interest to be disclosed.

## References

- [1] Brenchley, J.M. and Ortiz, A.M. (2021) Microbiome studies in non-human primates - current HIV/AIDS reports, SpringerLink. Available at: <https://link.springer.com/article/10.1007/s11904-021-00584-9> (Accessed: 15 May 2024).
- [2] Fedorak R, Demeria D. Probiotic bacteria in the prevention and the treatment of inflammatory bowel disease. *Gastroenterol Clin North Am* [Internet]. 2012;41(4):821–42. Available from: <http://dx.doi.org/10.1016/j.gtc.2012.08.003>
- [3] Jansma J, Chatziioannou AC, Castricum K, van Hemert S, El Aidy S. Metabolic network construction reveals probiotic-specific alterations in the metabolic activity of a synthetic small intestinal community. *mSystems*. 2023 Oct 26;8(5). doi:10.1128/msystems.00332-23
- [4] Schoeler M, Caesar R. Dietary lipids, gut microbiota and lipid metabolism. *Rev Endocr Metab Disord* [Internet]. 2019;20(4):461–72. Disponible en: <http://dx.doi.org/10.1007/s11154-019-09512-0>
- [5] Abraham BP, Quigley EMM. Probióticos en la enfermedad inflamatoria intestinal. *Gastroenterol Clin North Am* [Internet]. 2017;46(4):769–82. Disponible en: <http://dx.doi.org/10.1016/j.gtc.2017.08.003>
- [6] Wang Y, Gao P, Li C, Lu Y, Zhang Y, Zhou Y, et al. High-fidelity gut metagenome: A new insight of identification of functional probiotics. *Journal of Integrative Agriculture*. 2024 May; doi:10.1016/j.jia.2024.05.011
- [7] 1.Ritchie ML, Romanuk TN. A Meta-Analysis of Probiotic Efficacy for Gastrointestinal Diseases. Heimesaat MM, editor. *PLoS ONE*. 2012 Apr 18;7(4):e34938.
- [8] Liu X, Zhao H, Wong A. Accounting for the health risk of probiotics. *Heliyon*. 2024 Mar;10(6). doi:10.1016/j.heliyon.2024.e27908
- [9] 1.Liu Y, Cheuk-Hay Lau H, Cheng WY, Yu J. Gut microbiome in colorectal cancer: Clinical diagnosis and treatment. *Genomics, Proteomics & Bioinformatics*. 2022 Jul;
- [10] Stein RA, Riber L. Efectos epigenéticos de los ácidos grasos de cadena corta del intestino grueso en las células huésped. *Microvida* [Internet]. 2023 [consultado el 15 de mayo de 2024];4. Disponible en: <https://pubmed.ncbi.nlm.nih.gov/37441522/>
- [11] Smet A, Kupcinkas J, Link A, Hold GL, Bornschein J. The role of microbiota in gastrointestinal cancer and cancer treatment: Chance or curse? *Cellular and Molecular Gastroenterology and Hepatology*. 2022;13(3):857–74. doi:10.1016/j.jcmgh.2021.08.013
- [12] Bonde A, Daly S, Kirsten J, Kondapaneni S, Mellnick V, Menias CO, et al. Human gut Microbiota-associated gastrointestinal malignancies: A comprehensive review. *Radiographics*. 2021;200168. Disponible en: <http://dx.doi.org/10.1148/rg.2021200168>
- [13] Yu S, Sun Y, Shao X, Zhou Y, Yu Y, Kuai X, et al. Leaky gut in IBD: Intestinal barrier–gut Microbiota interaction. *J Microbiol Biotechnol*. 2022;32(7):825–34. Disponible en: <http://dx.doi.org/10.4014/jmb.2203.03022>
- [14] Li H-Y, Zhou D-D, Gan R-Y, Huang S-Y, Zhao C-N, Shang A, et al. Effects and mechanisms of probiotics, prebiotics, synbiotics, and postbiotics on metabolic diseases targeting gut Microbiota: A narrative review. *Nutrients*. 2021;13(9):3211. Disponible en: <http://dx.doi.org/10.3390/nu13093211>
- [15] Wieërs G, Belkhir L, Enaud R, Leclercq S, Philippart de Foy J-M, Dequenne I, et al. How Probiotics Affect the Microbiota. *Front Cell Infect Microbiol*. 2020;9. Disponible en: <http://dx.doi.org/10.3389/fcimb.2019.00454>
- [16] Wang X, Zhang P, Zhang X. Probiotics regulate gut Microbiota: An effective method to improve immunity. *Molecules*. 2021;26(19):6076. Disponible en: <http://dx.doi.org/10.3390/molecules26196076>
- [17] Wieërs G, Belkhir L, Enaud R, Leclercq S, Philippart de Foy J-M, Dequenne I, et al. How Probiotics Affect the Microbiota. *Front Cell Infect Microbiol*. 2020;9. Disponible en: <http://dx.doi.org/10.3389/fcimb.2019.00454>

- [18] Jakubczyk D, Leszczyńska K, Górka S. The effectiveness of probiotics in the treatment of inflammatory bowel disease (IBD)—A critical review. *Nutrients*. 2020;12(7):1973. Disponible en: <http://dx.doi.org/10.3390/nu12071973>
- [19] Sokol H, Leducq V, Aschard H, Pham HP, Jegou S, Landman C, Cohen D, Liguori G, Bourrier A, Nion-Larmurier I, Cosnes J, Seksik P, Langella P, Skurnik D, Richard ML, Beaugerie L. Fungal microbiota dysbiosis in IBD. *Gut*. 2017 Jun;66(6):1039-1048. doi: 10.1136/gutjnl-2015-310746. Epub 2016 Feb 3. PMID: 26843508; PMCID: PMC5532459.
- [20] Wei L, Singh R, Ro S, Ghoshal UC. Gut microbiota dysbiosis in functional gastrointestinal disorders: Underpinning the symptoms and pathophysiology. *JGH Open*. 2021 Mar 23;5(9):976-987. doi: 10.1002/jgh3.12528. PMID: 34584964; PMCID: PMC8454481.
- [21] Fredricks DN. The gut microbiota and graft-versus-host disease. *J Clin Invest*. 2019 May 1;129(5):1808-1817. doi: 10.1172/JCI125797. Epub 2019 May 1. PMID: 31042160; PMCID: PMC6486325.
- [22] Zhang, F., Aschenbrenner, D., Yoo, J. Y., & Zuo, T. (2022). The gut mycobiome in health, disease, and clinical applications in association with the ut bacterial microbiome assembly. *The Lancet. Microbe*, 3(12), e969–e983. [https://doi.org/10.1016/S2666-5247\(22\)00203-8](https://doi.org/10.1016/S2666-5247(22)00203-8)