# Microbiome and Non-traditional Therapies for *C. difficile* Infection

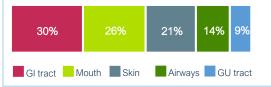
A Primer for Healthcare Professionals

## The Microbiome is Essential for Human Health

The human microbiome is comprised of more than 100 trillion microbial cells and over 1,000 known bacterial species, including the predominant phyla Bacteroidetes, Firmicutes, Proteobacteria, and Actinobacteria.<sup>1,2</sup> Given the critical functions of commensal microbiota, healthcare professionals can care for a patient's microbiome by trying to preserve the diversity and abundance of microorganisms.

#### Microbial abundance varies by body site<sup>3</sup>

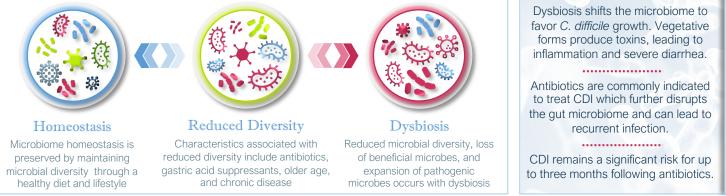


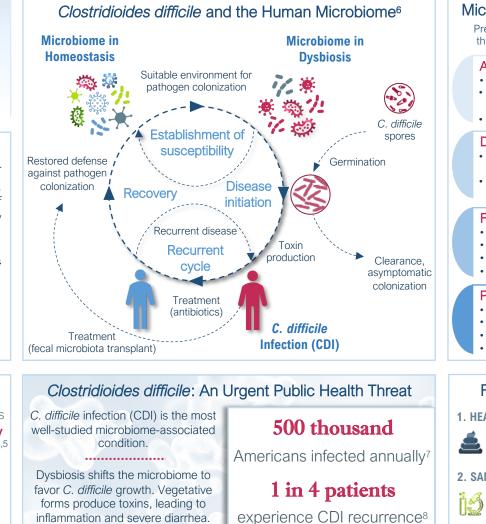


Metabolizes drugs Modulates immune response Protects against injury Regulates hormones Resists pathogens

## Dysbiosis May Result in Reduced Microbiome Functional Capacity

**Dysbiosis** is defined as a significant change in the microbiome structure or function and is associated with more than two dozen health conditions, including **infection**, **inflammatory bowel disease**, **obesity, diabetes, cancer, cardiovascular disease**, **& immunosuppression**.<sup>4,5</sup>





9% mortality

in hospitalized patients<sup>9</sup>

\$5 billion

annual healthcare costs<sup>10</sup>

## Microbiome-Targeted Interventions<sup>11</sup>

Prescribers can positively impact the microbiome through evidence-based interventions including:

#### Antibiotic Stewardship

- Avoid unnecessary antimicrobials
- Prescribe narrow-spectrum antibiotics for the
   photost possible duration when indicated
- shortest possible duration when indicated
  Practice diagnostic stewardship

## **Diet and Prebiotics**

- Plant-based, Mediterranean diets increase bacterial diversity
- Prebiotics (substrates used by microbiota) may promote beneficial microbes

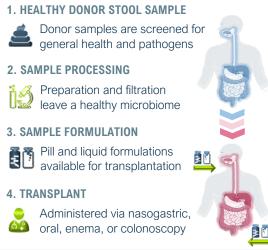
#### Fecal Microbiota Transplant (FMT)

- Transfer of healthy donor feces into GI tract
- Effectively restores microbiome diversity
- Recommended after three episodes of CDI
- Currently being studied for cancer and IBD

## Probiotics

- Live organisms intended to promote health
- Safe for most patients
- Not recommended to treat CDI
- Discrepancies in dose and organisms studied

# FMT Preparation and Process<sup>12</sup>



**FERRING** 

PHARMACEUTICALS

References: 1. Ley RE, et al. Cell. 2006;124(4):837-48. 2. Gill SR, et al. Science. 2006;312(5778):1355-9. 3. Peterson J, et al. Genome Res. 2009;19(12):2317-23. 4. Flint HJ, et al. Nat Rev Gastroenterol Hepatol. 2012;9:577-89. 5. Lynch SV, Pedersen O. N Engl J Med. 2016;375(24):2369-79. 6. Britton RA, Young VB. Gastroenterol. 2014;146:1547-53. 7. Guh AY, et al. N Engl J Med. 2020;382(14):1320-30. 8. Kelly CP, LaMont JT. N Engl J Med. 2008;359:1932-40. 9. Lessa FC, et al. N Engl J Med. 2015;372(24):1913-8. 10. Desai K, et al. BMC Infect Dis. 2016;16:303. 11. Sorbara MT, Pamer EG. Nat Rev Microbiol. 2022;20:365-80. 12. Cammarota G, et al. Gut. 2017;66:569-80.