

Microbiome Premature

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Overview

- 1 Introduction
 - 2 Materials
 - 3 Literature Survey
 - 4 Methods
 - 5 Results
- References

Introduction

Microbiome

- Microbiota: the microorganisms which live inside & on humans (Turnbaugh et al., 2007)
- Microbiome: 10^{13} to 10^{14} microorganisms whose which collective genome (Gill et al., 2006)

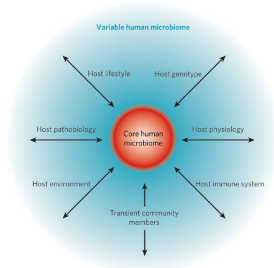


Figure: Concept of a core human microbiome (Turnbaugh et al., 2007)

- Ribosomal RNA
- Well-known as a key to phylogeny (Olsen & Woese, 1993)

Premature (Preterm Birth)

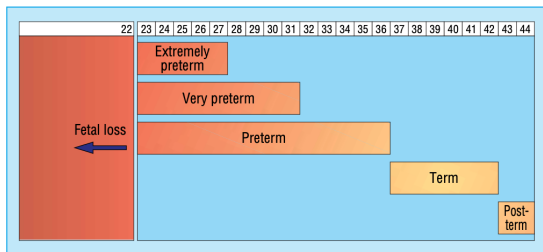


Figure: Definitions of Premature (Tucker & McGuire, 2004)

∴ Hence, in this study,

- Premature: < 37 weeks
- Normal: ≥ 37 weeks

Materials

16S rRNA Sequencing

16S rRNA sequencing is the *reference method* for bacterial taxonomy & identification (Mignard & Flandrois, 2006)

Reasons (Janda & Abbott, 2007):

- 16S rRNA exists in almost all bacteria
- Functions of the 16S rRNA has not changed over time
- 16S rRNA is large enough for bioinformatics

Train/Test Data vs. Validate Data

- JBNU/Helixco data
 - First data
 - Second data
 - Stool data
- Validate data
 - EBI data
 - HMP data

Table: Metadata of Data

Data	Participants	Samples	Remarks
First	24	107	-
Second	35	288	-
Stool	63	126	Stool
EBI	18	1016	Only Normal
HMP	1572	9205	Only Premature

Literature Survey

Literature Survey

EBI Data (Dominguez-Bello et al., 2016)

BRIEF COMMUNICATIONS

nature.
medicine

Partial restoration of the microbiota of cesarean-born infants via vaginal microbial transfer

Maria G Dominguez-Bello^{1,2}, Kassandra M De Jesus-Laboy², Nan Shen³, Laura M Cox¹, Amnon Amir⁴, Antonio Gonzalez⁴, Nicholas A Bokulich¹, Se Jin Song^{4,5}, Marina Hoashi^{1,6}, Juana I Rivera-Vinas⁷, Keimari Mendez⁷, Rob Knight^{4,8} & Jose C Clemente^{3,9}

estimated 15% of births that require C-section delivery to protect the health of the mother or baby¹¹.

Here we exposed C-section-delivered infants to their maternal vaginal fluids at birth and longitudinally determined the composition of their microbiota to assess whether it developed more similarly to vaginally born babies than to unexposed C-section-delivered infants. We collected samples from 18 infants and their mothers, including 7 born vaginally and 11 delivered by scheduled C-section, of which four were exposed to the maternal vaginal fluids at birth (Supplementary Table 1). Briefly, the microbial restoration procedure, or vaginal microbial transfer, consists of incubating sterile gauze in the vagina of moth-

- Study Objectives
 - ① Compare Vaginally vs. Cesarean-section (C-section)
 - ② Restore the microbiota of C-section
- Microbial restoration procedure
 - ① Measure maternal vaginal pH
 - ② Put sterile gauze with saline solution in vagina for 1 hour
 - ③ Swab the infant with the gauze
- Sample collection procedure
 - ① Sample at right after birth, day 3 and weekly for the first month
 - ② Sample from oral, forehead, arm, foot and anal
- Notable Methods/Results
 - ① Using distance methods: e.g. UniFrac distance, Hamming distance

Literature Survey

HMP Data (Fettweis et al., 2019)

ARTICLES

<https://doi.org/10.1038/s41591-019-0450-2>nature
medicine

OPEN

The vaginal microbiome and preterm birth

Jennifer M. Fettweis^{1,2,3}, Myrna G. Serrano^{1,3}, J. Paul Brooks^{3,4}, David J. Edwards^{3,5},
Philippe H. Girerd^{2,3}, Hardik I. Parikh¹, Bernice Huang¹, Tom J. Arodz^{3,6}, Laahirie Edupuganti^{1,3},
Abigail L. Glascock⁷, Jie Xu^{3,8,9}, Nicole R. Jimenez^{1,3}, Stephany C. Vivadellj^{1,3}, Stephen S. Fong^{3,10},
Nihar U. Sheth¹¹, Sophonie Jean¹, Vladimir Lee^{1,3}, Yahya A. Bokhari⁶, Ana M. Lara¹, Shreni D. Mistry¹,
Robert A. Duckworth III¹, Steven P. Bradley¹, Vishal N. Koparde¹¹, X. Valentine Orendo¹¹,
Sarah H. Milton², Sarah K. Rozycki¹², Andrey V. Matveyev¹, Michelle L. Wright^{13,14,15},
Snehalata V. Huzurbazar¹⁶, Eugenie M. Jackson¹⁶, Ekaterina Smirnova^{17,18}, Jonas Korlach¹⁹,
Yu-Chih Tsai¹⁹, Molly R. Dickinson¹, Jamie L. Brooks¹, Jennifer I. Drake¹, Donald O. Chaffin²⁰,
Amber L. Sexton²⁰, Michael G. Gravett^{20,21}, Craig E. Rubens²⁰, N. Romesh Wijesooriya⁹,
Karen D. Hendricks-Muñoz^{3,8,9}, Kimberly K. Jefferson^{1,3}, Jerome F. Strauss III^{2,3} and Gregory A. Buck^{1,3,6*}

- Study Objectives
 - ① Predicting & Preventing premature
 - ② Report community resources
 - ③ Provide an analysis of the longitudinal, comprehensive, multi-omic profiling of vaginal samples
- Sample collection Procedure
 - ① Premature birth vs. Matched normal birth
 - ② Ethnically diverse cohort
- Notable Methods/Results
 - ① Imitate figures

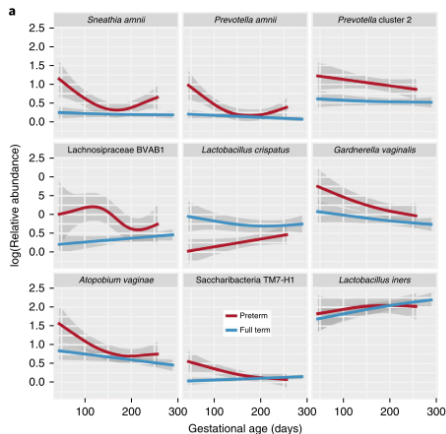


Figure: Microbiome Composition during Pregnancy

Methods

Methods

Qiime 2 Workflow

Qiime 2 Workflow



Figure: QIIME 2 workflow (Bolyen et al., 2019; Mandal et al., 2015; McDonald et al., 2012)

Filtering with Quality Score I

Drawback between:

- Longer sequence read
- Higher quality value

∴ Select the maximum length n where:

$$\begin{aligned} \forall n_i \in \{n_k | \text{MedianQualityScore} \geq 30\} \\ \exists! n \in \{n_i\} : n \geq n_i \end{aligned} \quad (1)$$

Denoising Techniques

- DADA2: Amplicon Sequence Variants (ASVs) (Callahan et al., 2016)
- Deblur: Operational Taxonomic Units (OTUs) (Amir et al., 2017)



Figure: Denoising Algorithms

Taxonomy Classification

- Greengenes (GG) (DeSantis et al., 2006)
- SILVA (Pruesse et al., 2007; Quast et al., 2012)



Figure: Taxonomy Classifications

“A **higher** performance at taxonomic levels above *genus level*;
but performance appears to **drop** at *species level*” (Gihawi et al., 2019)

Merging Denoising/Taxonomy

Merging multiple IDs (ASV or OTU) into one, which have

- Different IDs
- Identified as same taxonomy



Figure: Example Diagram for Merging Denoising/Taxonomy

Methods

Python Workflow

t-distributed Stochastic Neighbor Embedding (t-SNE)



Figure: t-SNE with handwritten data (Maaten & Hinton, 2008)

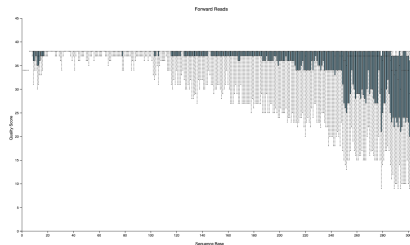
- Pandas (McKinney et al., 2011)
- Scikit-Learn (Pedregosa et al., 2011)
- SciPy (Virtanen et al., 2020)
- Matplotlib (Hunter, 2007)
- Seaborn (Waskom et al., 2020)

Results

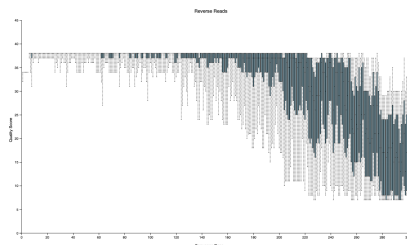
Results

Filtering Results

Quality Score from First Data



(a) Forward

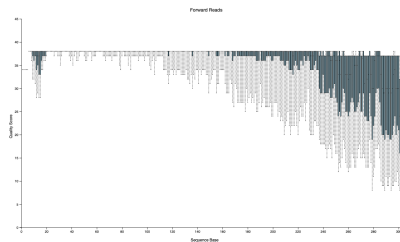


(b) Reverse

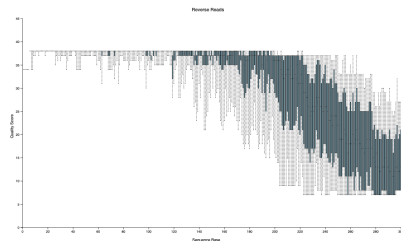
Figure: Sequence Quality Plot from Helixco Data

Maximum Length: $n_{forward} = 300$, $n_{Reverse} = 265$

Quality Score from Second Data



(a) Forward

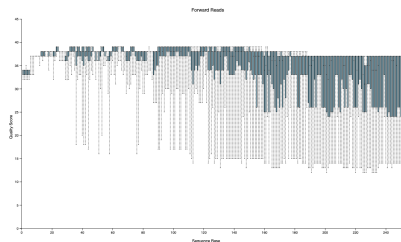


(b) Reverse

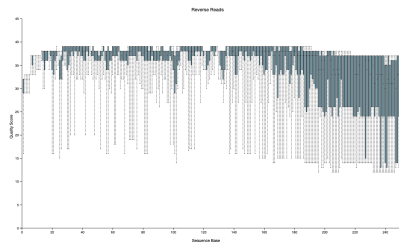
Figure: Sequence Quality Plot from Helixco Data

Maximum Length: $n_{forward} = 300$, $n_{Reverse} = 222$

Quality Score from Stool Data



(a) Forward



(b) Reverse

Figure: Sequence Quality Plot from Stool Data

Maximum Length: $n_{forward} = 250$, $n_{Reverse} = 251$

Quality Score with EBI Data

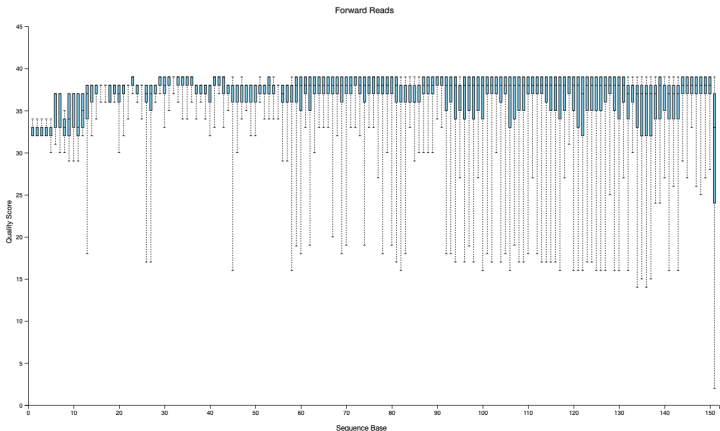
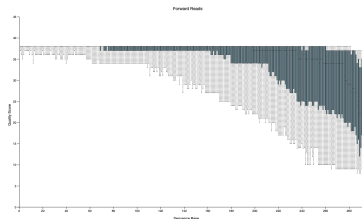


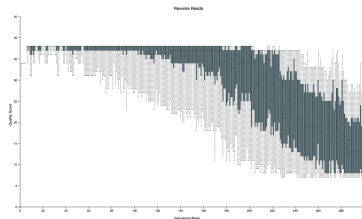
Figure: Sequence Quality Plot from EBI Data

Maximum Length: 150

Quality Score with HMP Data



(a) Forward



(b) Reverse

Figure: Sequence Quality Plot from HMP Data

Maximum Length: $n_{forward} = 278$, $n_{Reverse} = 226$

Results

Comparing Data

Workflow for Comparing Data

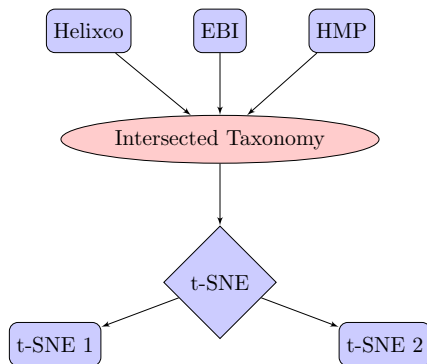


Figure: Workflow of t-SNE for Brief Information

Intersected Taxa



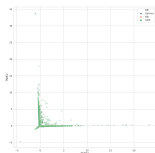
(a) DADA2 + GG (b) DADA2 + SILVA



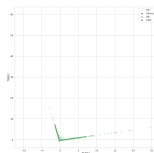
(c) Deblur + GG (d) Deblur + SILVA

Figure: Intersected Taxa Information

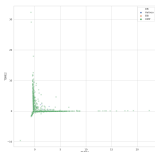
t-SNE for Comparing Data



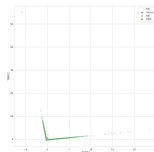
(a) DADA2 + GG



(b) DADA2 + SILVA



(c) Deblur + GG



(d) Deblur + SILVA

Figure: t-SNE for Comparing Data

t-SNE with Site/Premature Information I

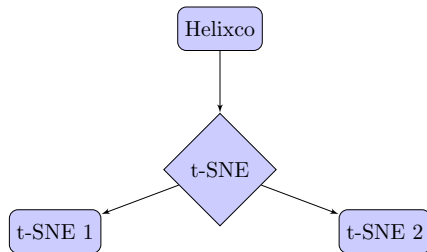
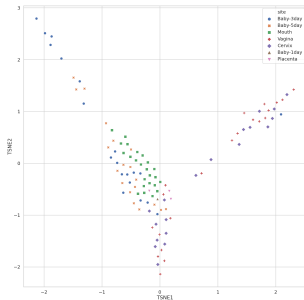
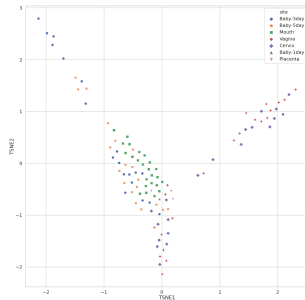


Figure: Workflow of t-SNE for Site/Premature Information

t-SNE with Site/Premature Information II



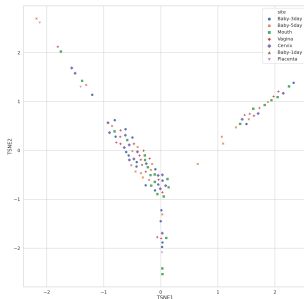
(a) DADA2 + GG



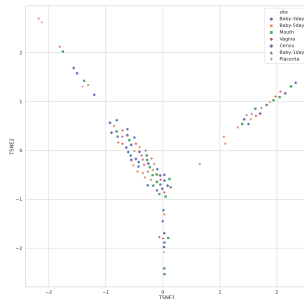
(b) DADA2 + SILVA

Figure: t-SNE with Site

t-SNE with Site/Premature Information III



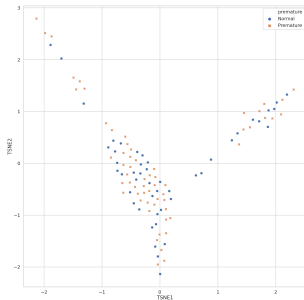
(c) Deblur + GG



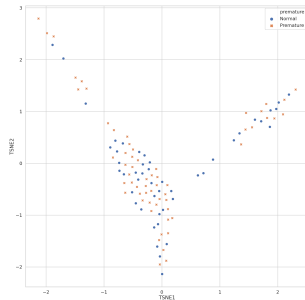
(d) Deblur + SILVA

Figure: t-SNE with Site

t-SNE with Site/Premature Information IV



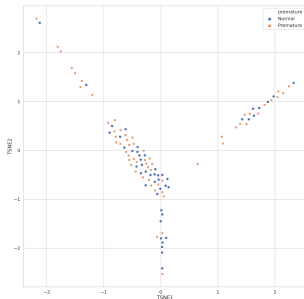
(a) DADA2 + GG



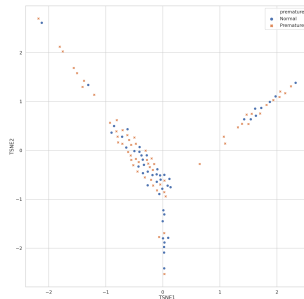
(b) DADA2 + SILVA

Figure: t-SNE with Site + Premature

t-SNE with Site/Premature Information V



(c) Deblur + GG



(d) Deblur + SILVA

Figure: t-SNE with Site + Premature

Bacterial Abundance I

Alpha-Diversity I

Beta-Diversity I

Classification I

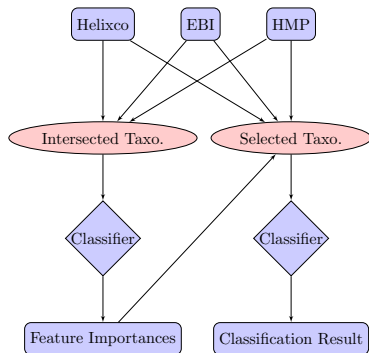


Figure: Workflow with Classification

Random Forest Classifier I

Input Data was treated with **Deblur** and **SILVA**.

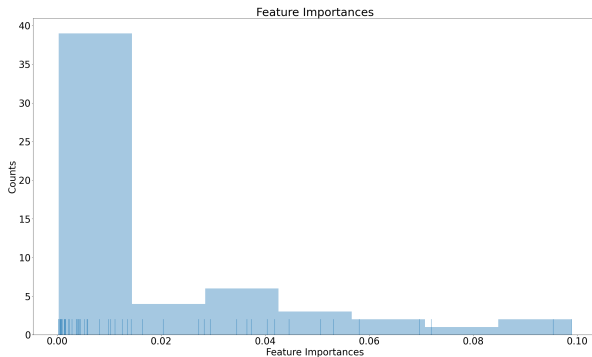


Figure: Feature Importance derived by Random Forest Classifier

Random Forest Classifier II

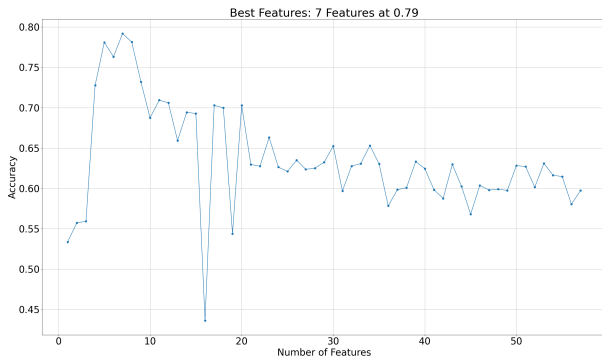


Figure: Number of Features vs. Accuracy

Random Forest Classifier III

- ① *Bacteria Firmicutes Bacilli Lactobacillales Lactobacillaceae Lactobacillus Lactobacillus iners*
- ② *Bacteria Fusobacteriota Fusobacteriia Fusobacteriales Leptotrichiaceae Leptotrichia*
- ③ *Bacteria Actinobacteriota Actinobacteria*
- ④ *Bacteria Firmicutes Bacilli Lactobacillales Lactobacillaceae Lactobacillus*
- ⑤ *Bacteria Firmicutes Clostridia Peptostreptococcales-Tissierellales Peptostreptococcaceae Romboutsia*
- ⑥ *Bacteria Firmicutes Bacilli Mycoplasmatales Mycoplasmataceae Ureaplasma*
- ⑦ *Bacteria Actinobacteriota Actinobacteria Corynebacteriales Corynebacteriaceae Corynebacterium Corynebacterium matruchotii*

Random Forest Classifier IV

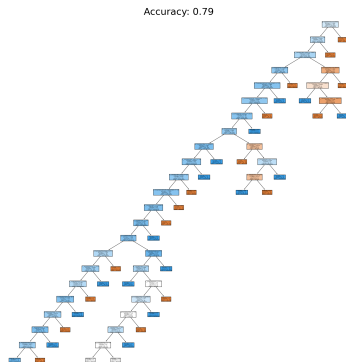
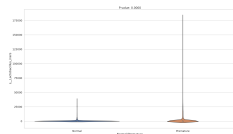
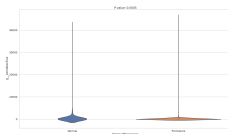


Figure: Random Forest Classifier

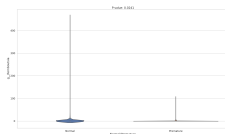
Random Forest Classifier V



(a) *Lactobacillus iners*



(b) *Lactobacillus*



(c) *Romboutsia*

Figure: Violin Plot of Taxonomy

- a *Bacteria Firmicutes Bacilli Lactobacillales Lactobacillaceae Lactobacillus Lactobacillus iners*
- b *Bacteria Firmicutes Bacilli Lactobacillales Lactobacillaceae Lactobacillus*
- c *Bacteria Firmicutes Clostridia Peptostreptococcales-Tissierellales Peptostreptococcaceae Romboutsia*

Lactobacillus (Lb.)

- Vaginal *Lb.* may be clinically useful tools at PTB under 33 weeks. (Usui et al., 2002)
- Presence of *Lb.* sp (odds ratio 0.2) was negatively associated. (MARTIUS et al., 1988)
- *Lb. crispatus/gasseri* could decrease the risk of PTB. (Stafford et al., 2017)
- *Lb.* were associated with decreased risk of PTB. (Tabatabaei et al., 2019)

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