

# **Nutrigenomics and Nutrigenetics**

## **The Scientific Context**

**Christian Bréchet**  
**Vice-President Institut Merieux**  
**Scientific and Medical Affairs**

**[christian.brechot@institut-merieux.com](mailto:christian.brechot@institut-merieux.com)**

**Biomarkers**

## **Nutrigenomics**

**Effect of food and nutrients on  
the genome expression  
Risk: Obesity, Diabetes type 2  
etc..**

**Personalised  
Health Care**

**Personalised Nutrition?  
(Personalised Dietary and  
Phenotype analysis)**

**DNA-based  
tests and  
counselling**

## **Nutrigenetics**

**Impact of genetics  
on the food and nutrients  
effects**

# Nutrigenomics

**Specific groups  
or  
Individual, Personal,  
Patterns of Response?**



# Nutrigenetics

Modified from S Massart

## **Scientific Background**

- ☐ **Nutritional environment modifies the expression of genes: Which biomarkers?**
- ☐ **Nutrients metabolism is dependent on genetics and this may impact health**
- ☐ **Single gene-related diseases are rare but have a clear impact**
- ☐ **Multiple gene-related diseases are the most frequent and much more complex to analyze:  
Wich impact?**

# **A representative example of modern Nutrigenomics**

## **❑ Diet-driven changes:**

**Anti-inflammatory diet mix in healthy but overweight men:**

**The effects are personal and can be revealed by a visualisation method  
(« health Space »)**

**Three patterns of changes, in three different group of individuals:**

**Metabolic and oxydative response**

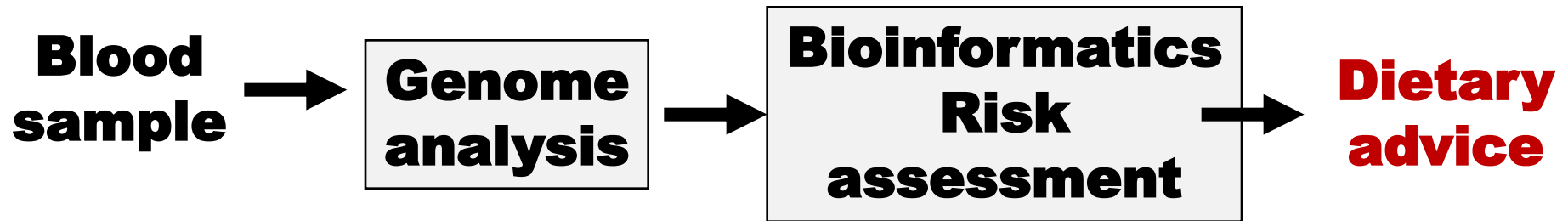
**Metabolic and oxydative with low inflammatory response**

**Inflammation markers**

**Bakker et al Am J Clin Nutr 2010; 91 (4) 1044-1059**

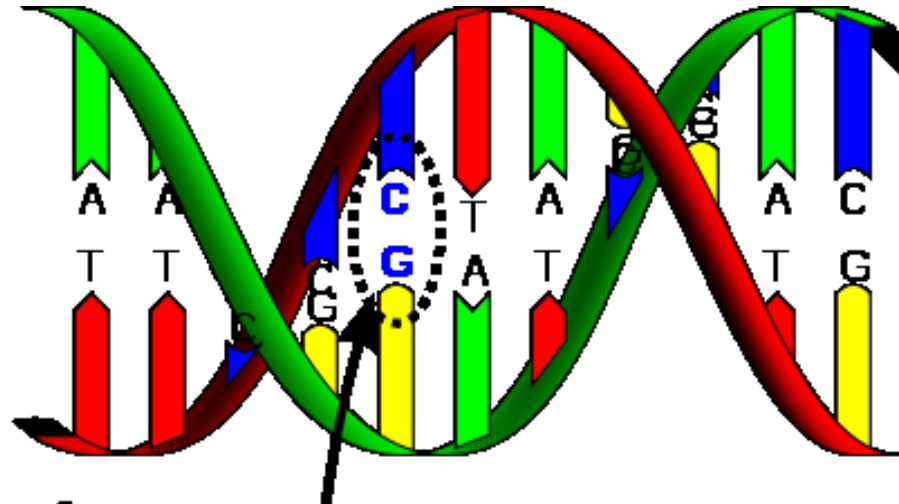
# **Dietary advice based on genetics**

## **The “vision”**

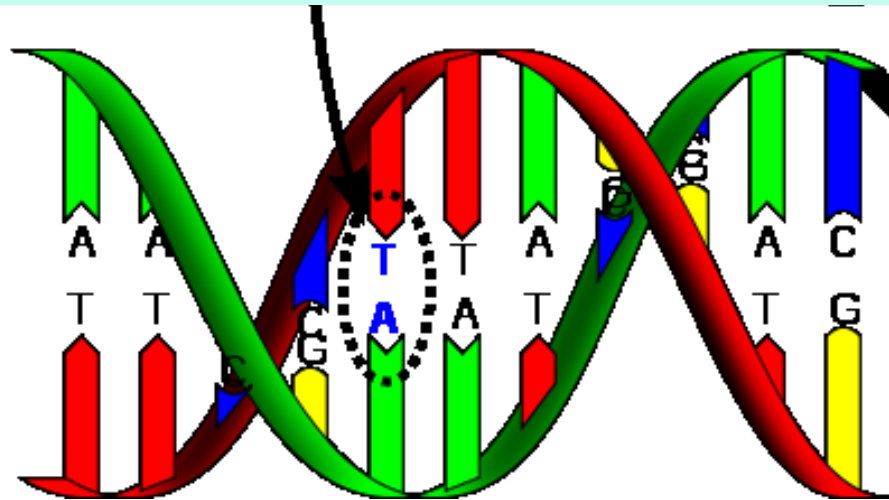


**Only 24.000 genes...However, 9.000.000 variants**

- ☐ **Single Nucleotide Polymorphisms (SNP)**
- ☐ **Sequencing**



## Single Nucleotide Polymorphism SNP



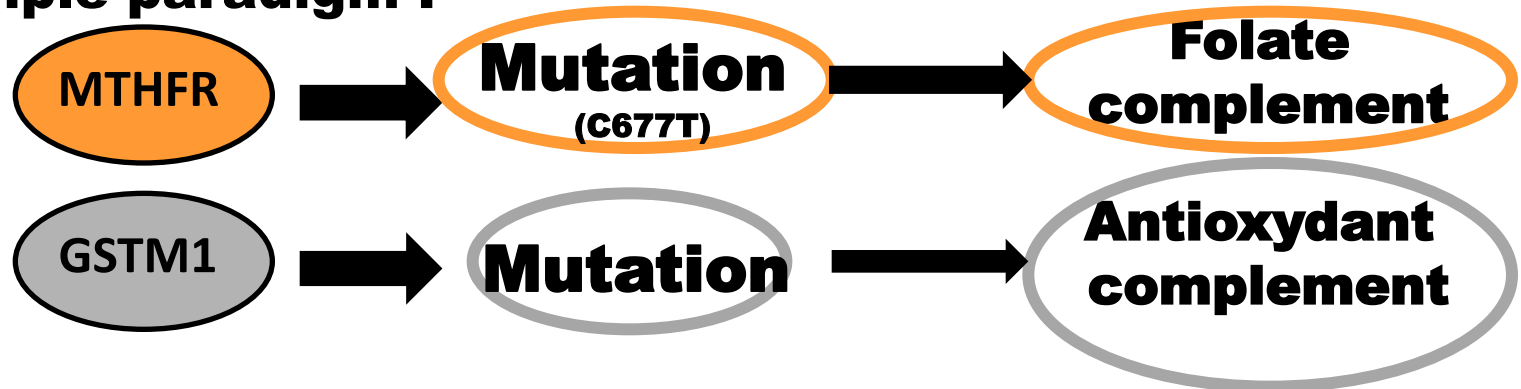
# Nutrigenetics today

## Genome sequencing, SNPs analyses

- Only coding regions (sequencing)
- 20-50 genes: NAT2, MTHFR, T2R, AMY1, G Proteins

- Weight Management,
- Heart health,
- Nutritional needs,
- Bone health

### ➤ Simple paradigm :





# **Personalised Nutrition Testing now offered by companies**

## **Examples:**

- Sciona**
- Genelex**
- Market Amerika**
- SuraCell**

**Test pricing: 100 to 1000 US\$**

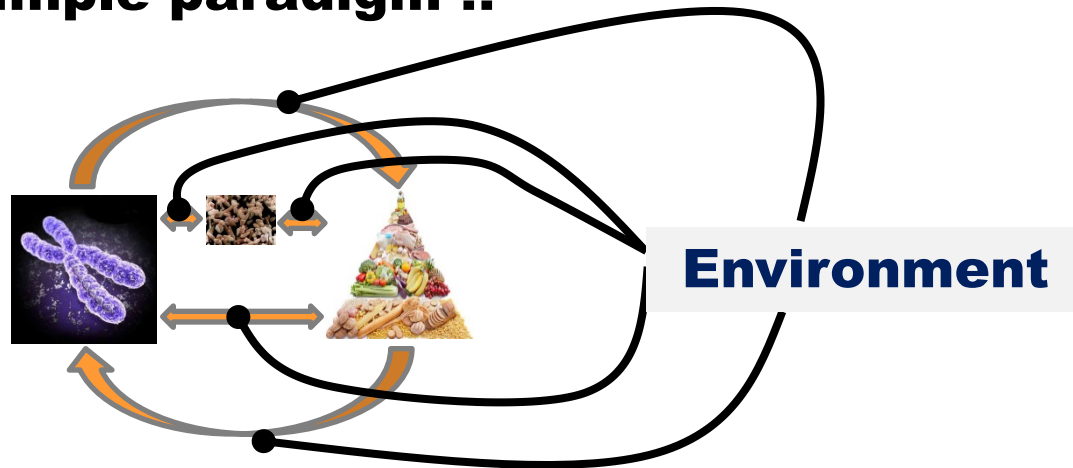
# ***Insulin Resistance***

- **“Analyzes five of your genes that may play an important role in determining how your body manages overall insulin resistance”**
- **“..assesses five key diet and lifestyle action areas”**

Gene Analyzed	Role of the Gene in Insulin Resistance	Genetic Variation Screened For Variations Found in Your Gene	Percentage of Population with this Gene Variation*
VDR	Mechanism of Insulin Secretion	CTaqIT	70.6
VDR		TBsmIC	69.6
IL-6	Inflammatory Response; Response of Cells to Insulin	G(-174)C	36.3
TNF- $\alpha$		G(-308)A	16.5
PPAR $\gamma$	Glucose and Lipid Metabolism	Pro12A	61.0
ACE	Blood Pressure Regulation	II/DD	10.3

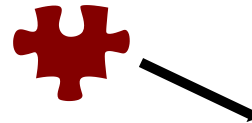
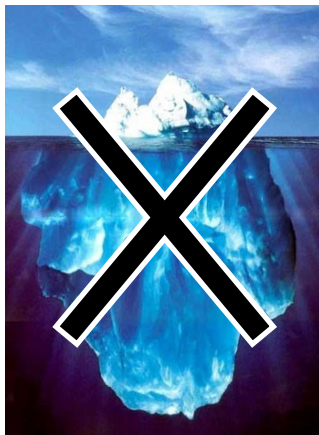
\*The population frequencies given are normalized for the U.S. population data from the U.S. 2002 Census Report. Population frequencies can vary for different ethnic groups, so for more detailed information, please turn to the Population Frequency Data Table in the Reference Section of your report.

➤ **Not a simple paradigm !!**



➤ **Technology:**

- **Studying 20 genes = <0.003 % of the genome**
- **Studying 1M mutations (Microarray) = 0.03 % of the genome**



**10-30 million SNPs  
believed to exist  
(4 million known)**

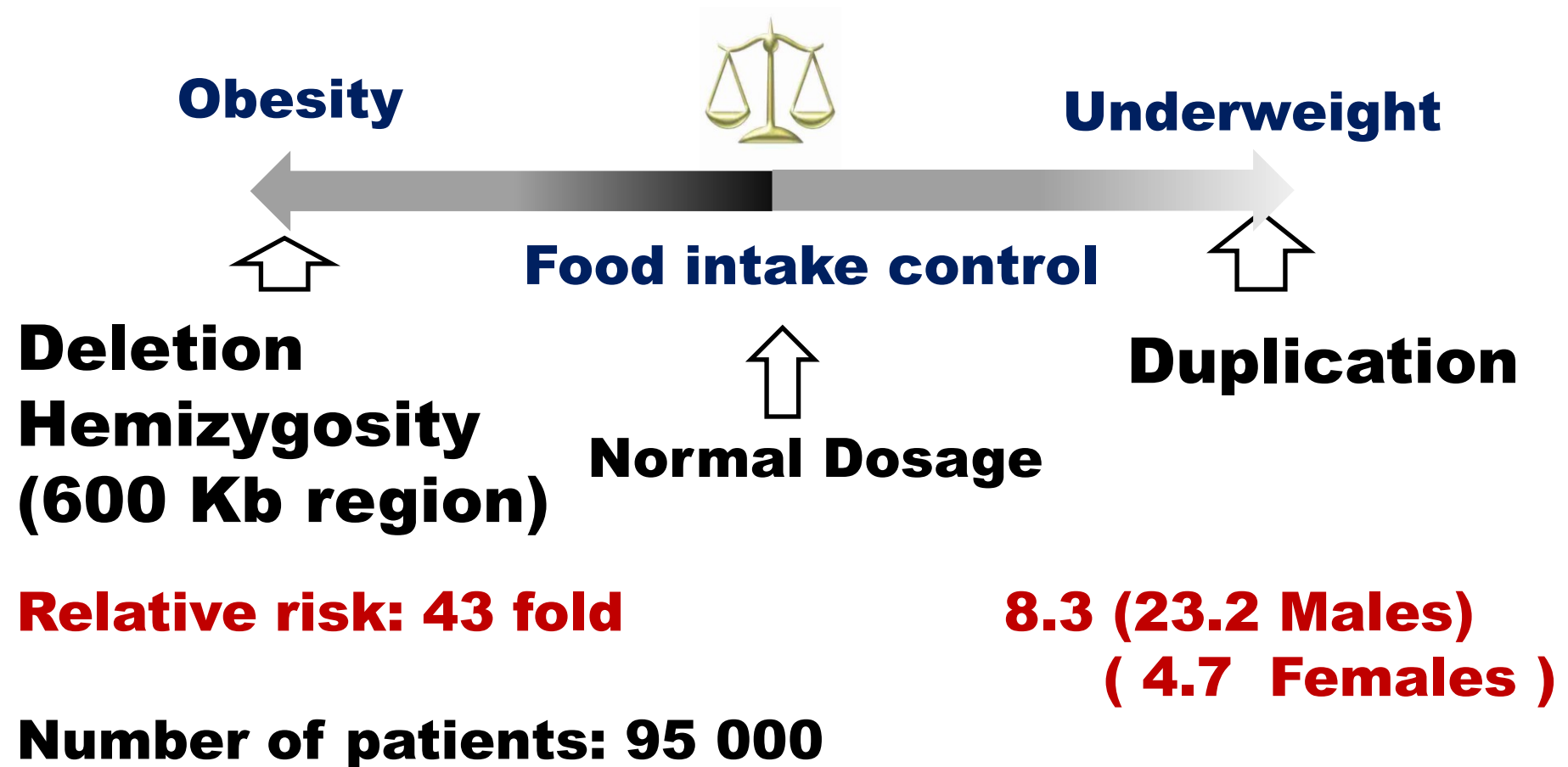
**How useful is data  
on 1 SNP?**



**The future relies on  
Genome Wide Association Studies (**GWAS**)  
(**+100,000 SNPs**)**

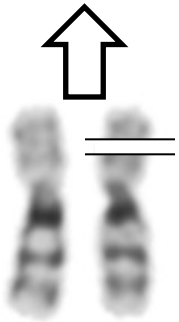
# **The number of copies of the 16p11.2 region predicts BMI**

**Mirror extreme BMI phenotypes associated with gene dosage (Genome Wide Association Study (GWAS))**



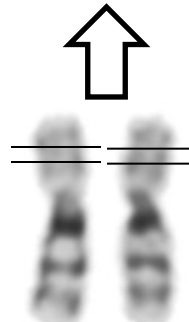
# Contrasting phenotypes

**autism**



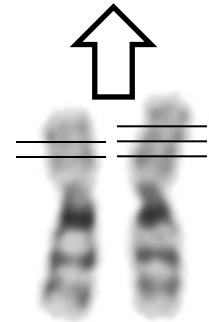
**deletion**

**sociability**



**normal dosage**

**schizophrenia**



**duplication**

➤ **Understanding also relies on plenty of genomic variations, including :**

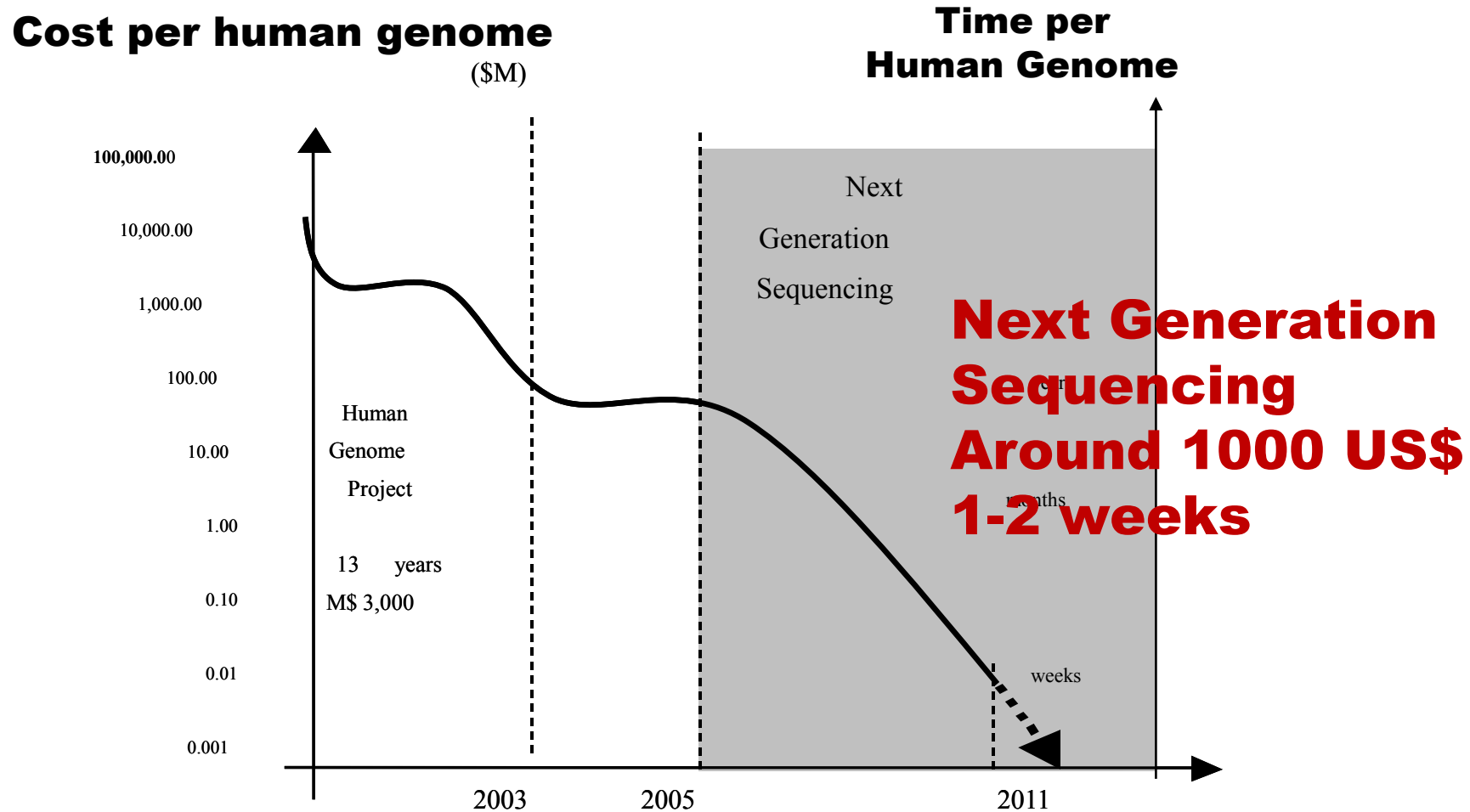
- **Non coding DNA**
- **Epigenome**
- **Metagenome**

➤ **Genome Sequencing will be a key technology to reveal those variants :**





# DNA sequencing is now amenable to a diagnostic test context



**Key issue: Integration of data, bioinformatics**



# **The real impact of genetic testing ?**

## **❑ The Case against:**

- **What does it mean to test for one gene polymorphism?**
- **Even in studies based on GWAS or deep sequencing the relative risk which is evidenced is very low: around 2-3 fold**

## **❑ The Case for:**

- **Well targeted single genetic trait may have a profound impact: ex: cholesterol levels**
- **With the advent of whole genome sequencing and progress in bioinformatics, combination of several polymorphism may lead to significant risk factors identification**

# Potential Benefits

## ☐ **At the population level**

**Identify subgroups who might be particularly responsive or resistant to dietary intervention**

**Provide a better understanding of the mechanisms involved in disease susceptibility**

## ☐ **At the individual level**

**Increase awareness of risk**

**Motivate behavior changes (diet, life style)**

**Enhance prevention**

## **Limitations (1)**

- ☐ **Technological:**

**Bioinformatics**

**Interpretation of data: Misleading claims**

- ☐ **Psychological impact** (individual and family)

- ☐ **Medical:** Attention drawn away from other modifiable risk factors, decreased use of other services, false sense of security

## Limitations (2)

### **Public Health:**

**Increased costs associated with personalized diets and designer foods**

**Targeting vulnerable populations**

**Concerns surrounding confidentiality, insurance**

**Dilute or contradict public health messages**

# **“Buyer Beware”**

**A recent report by the Government Accountability Office highlighted a few of the concerns with four examples of DTC nutrigenomic tests.**

**❑ The GAO report raised concerns that the tests may mislead consumers by making unsound and ambiguous predictions about health risks.**

**❑ In addition, the test results frequently include recommendations for the consumer to purchase dietary supplements that may be significantly overpriced compared with similar products available through a supermarket or pharmacy and that may, in fact, be harmful for some individuals.**

# **USA: FDA implication**

- **Direct to consumer (DTC) genetic testing remains as a business model**
  - **Some bodies have issued statements against DTC genetic model**
    - **Failure of interpretation, incorrect decision-making**
  - **Others have championed DTC genetic testing model**
    - **Personal empowerment, proactive health strategies**
  - **Others request appropriate oversight for DTC genetic testing**
    - **Protect individuals from incorrect information, protect privacy**
- **FDA working with companies to come into compliance with FDA regulations for medical devices**
- **Panel intended to gain broad-based information on important issues in DTC genetic testing**

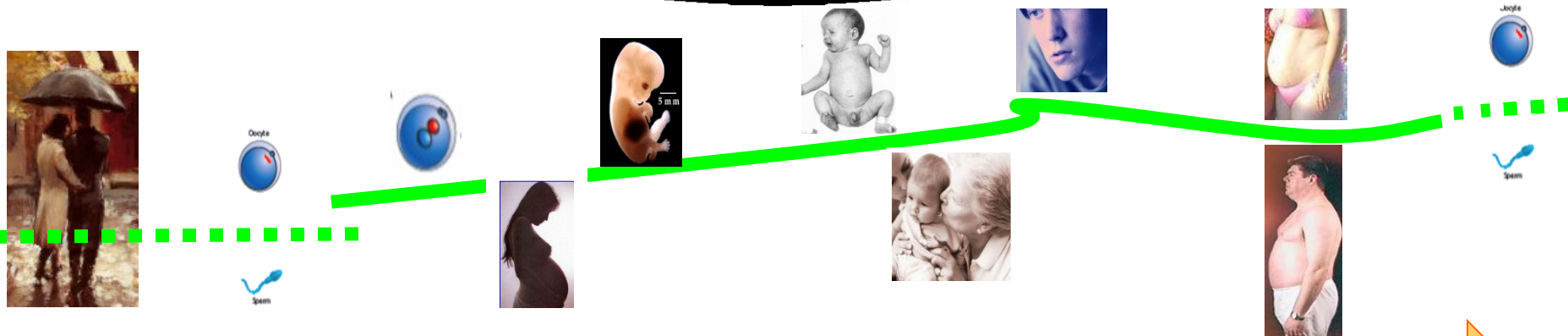
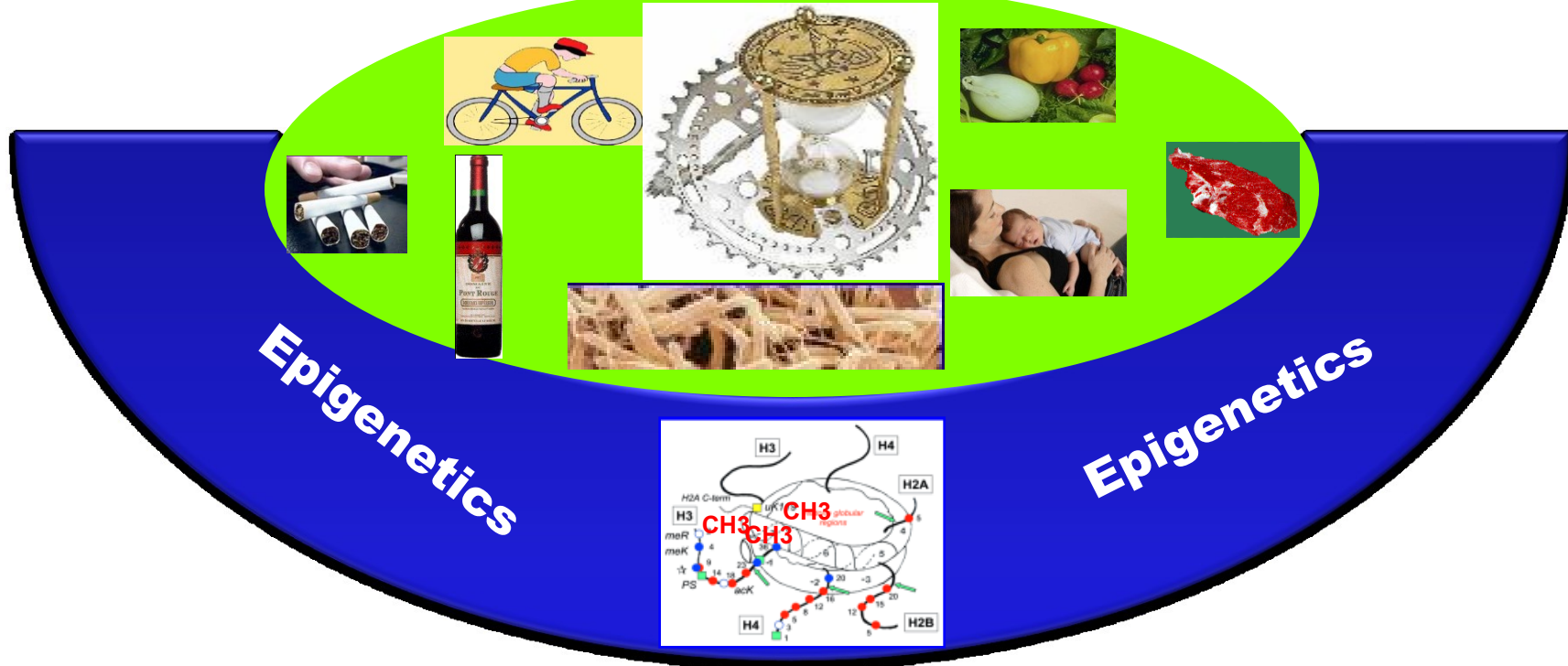
# Nutrigenomics

**Specific groups  
or  
Individual, Personal,  
patterns of response?**

**Epigenetics**

# Nutrigenetics





**Long term effects**

**Ageing**

**Sexual dimorphism**

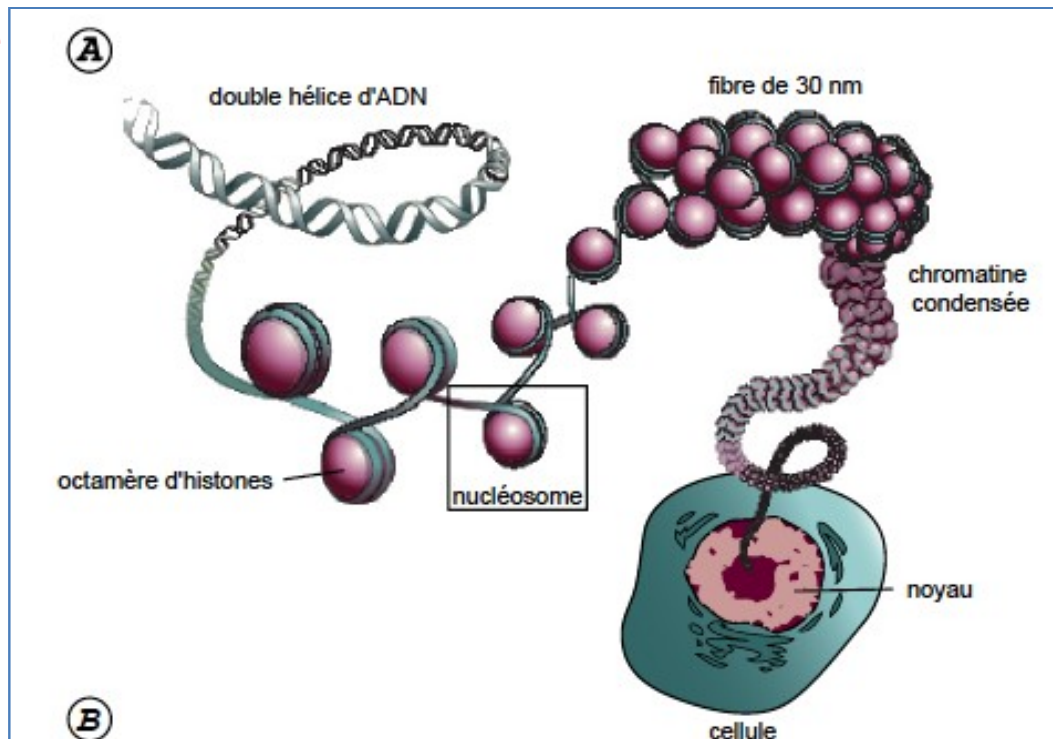


If DNA is the **hardware**,  
epigenetics is the **software** that tells genes what to do

## Genetics

DNA sequence  
variations  
**irreversible**

Epigenetics  
post translational  
modifications  
**reversible**



Transcription  
(expression)

Repair  
Replication,  
Condensation,  
X Inactivation,  
Genomic imprinting  
Ageing  
etc...

**Archives**



**C Junien** The **reversibility** of altered states of  
chromatin is essential for interactions  
with the environment

# An on-going construction

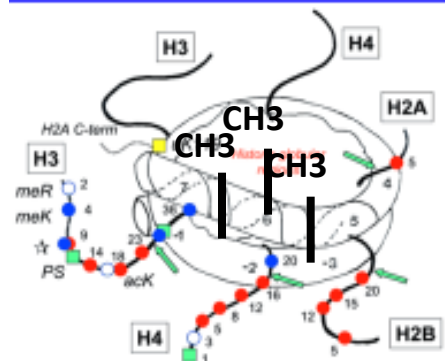
## ***The actors : codes, marks and transcription factors accessibility***

**Folates** **5 AzaC**

**CpG, non-CpG, OHmC**

**Code DNA**

**Methylation (CH<sub>3</sub>)**



**Code**  
**Histones**  
**Variants**

**+ modifications**

**9 ≠ classes of marks**

**≥ 50 activating/repressive**

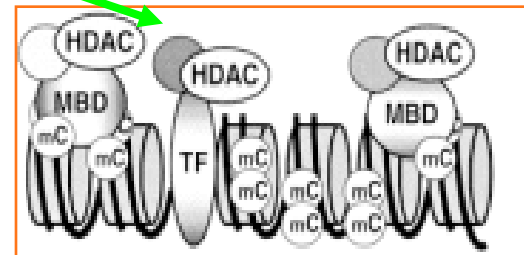
## Folates marks (sites)

**Fibers/SCFA, butyrate/ sulphoraphane**

## Valproate, Trichostatine A (TSA)

## ***Caloric restriction, Stress***

**Resveratrol** Silencing of gene expression

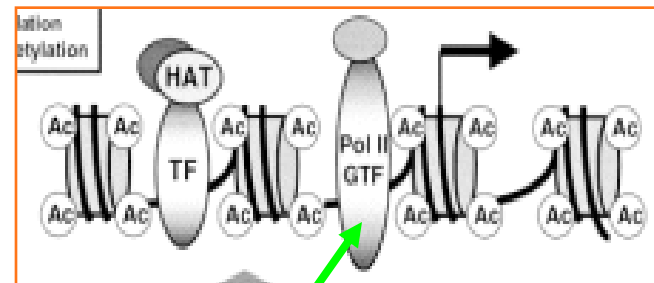


## Code

**Corepressors/  
Coactivators**



## Chromatin Remodeling



**Tissue / stage-specific  
expression of genes**

**Flexible!**  
**But heritable**  
**Thru cell division**

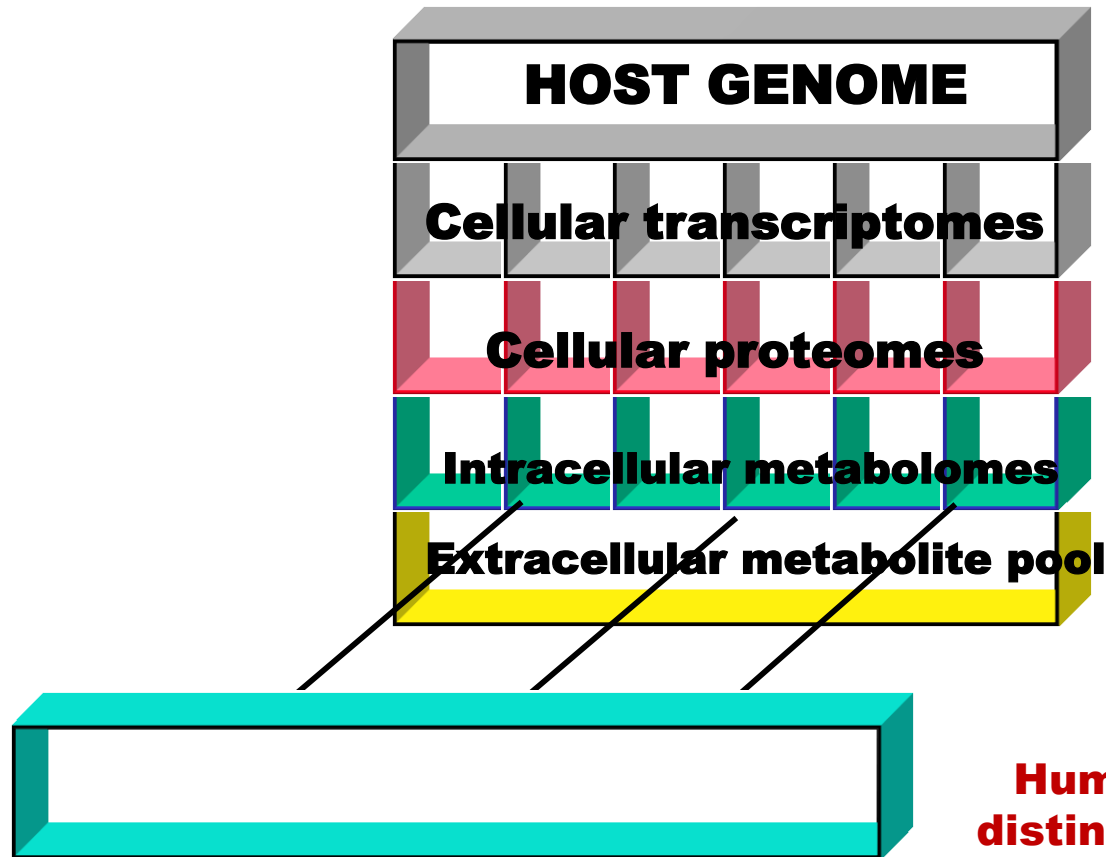


# NcRNA

## C Junien

# The Metabolome interactions

*(Nicholson, J. et al Nature, Rev. Microbiology, 2005, 3, 2-8)*



**Humans: > 500 functionally  
distinct NORMAL cell types/ca.  
10 trillion  
parenchymal cells**

## LETTERS

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### **Human metabolic phenotype diversity and its association with diet and blood pressure**

*Holmes, E. et al (2008) 453 396-400.*

#### **THE “METABOLOME-WIDE ASSOCIATION STUDY” (MWAS) CONCEPT**

**“The broad non-selective analysis and statistical interrogation of metabolic phenotypes in relation to epidemiologic end-points and risk factors to generate testable physiological or pathway hypotheses”.**

**Nutrigenomics**



**Intestinal  
Metagenomics**



**Genomics  
Epigenetics**

**Nutrigenetics**

**Modified from S Massart**

# **The Interface between our two genomes: A novel paradigm for nutrition**

**The Human Genome  
(23000 genes)**

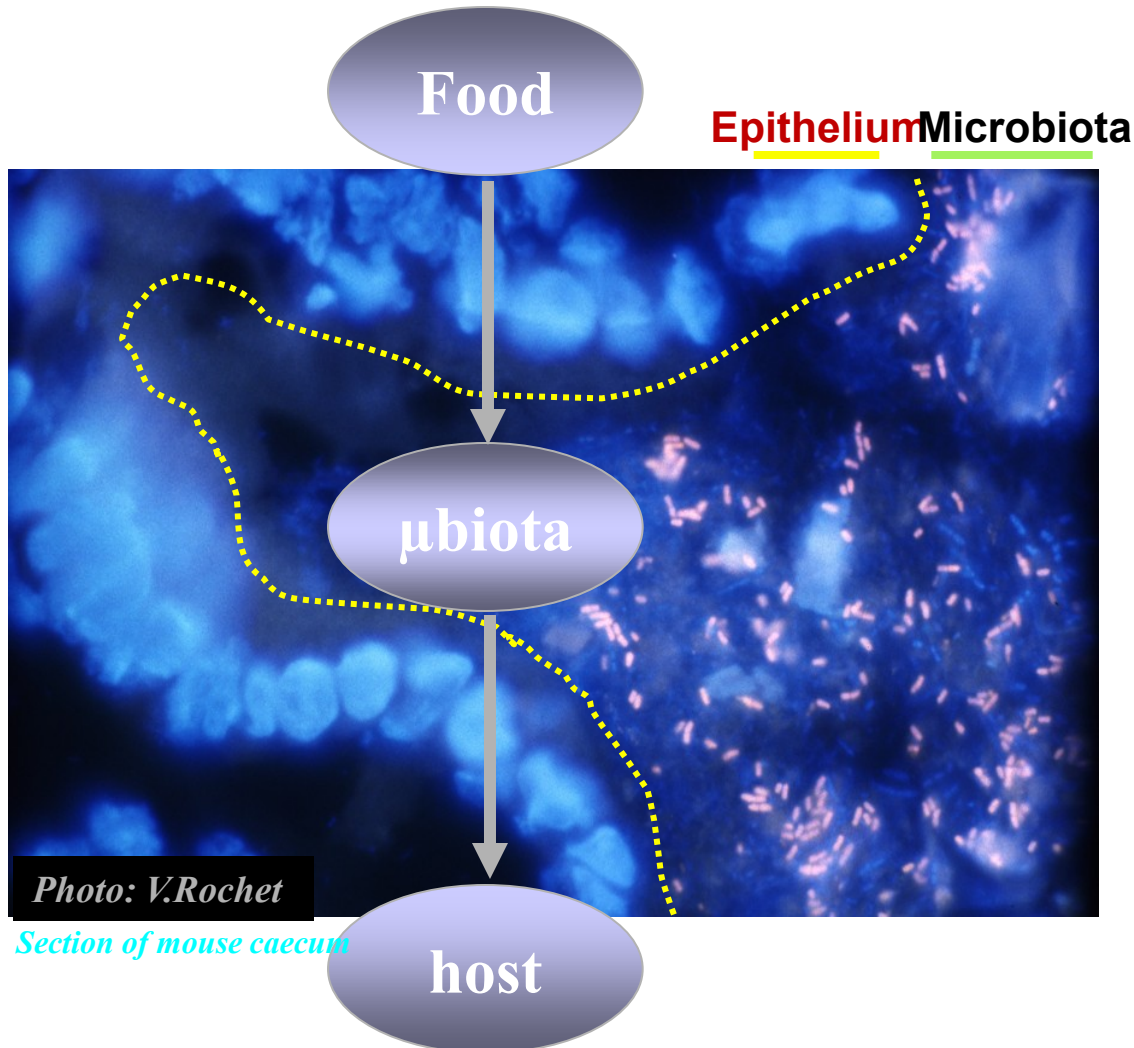
**Food  
Diet**

**Health**



**The Intestinal Microbiota  
(10 times the number of host cells)  
(More than 150 fold increased  
genetic complexity)**

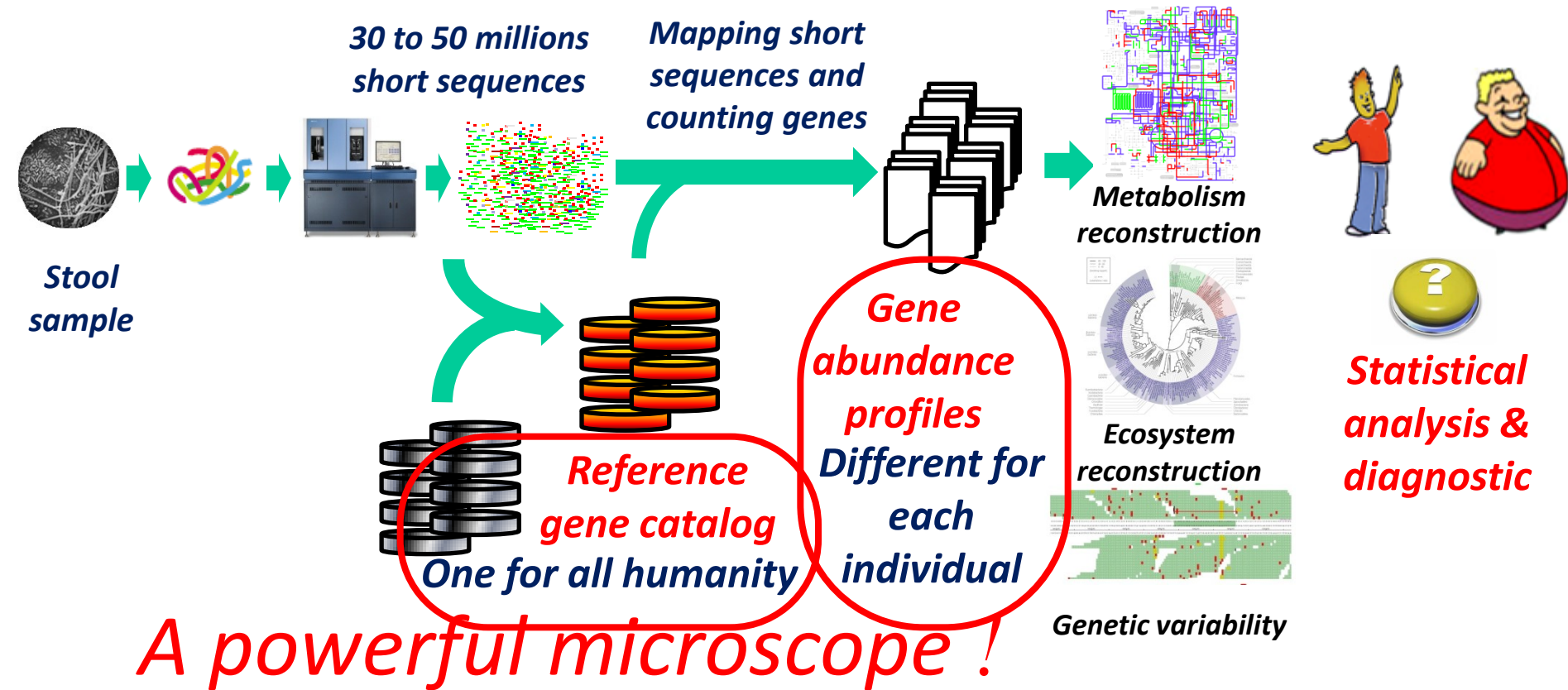
# The human intestinal microbiota : dense, structurally and functionally diverse



- **faecal microbiota : 100 trillions microorganisms**
- **hundreds of species ...**
- **normal consortium adapted and functionally stable**
- **nutrition, physiology, immunity & protection**



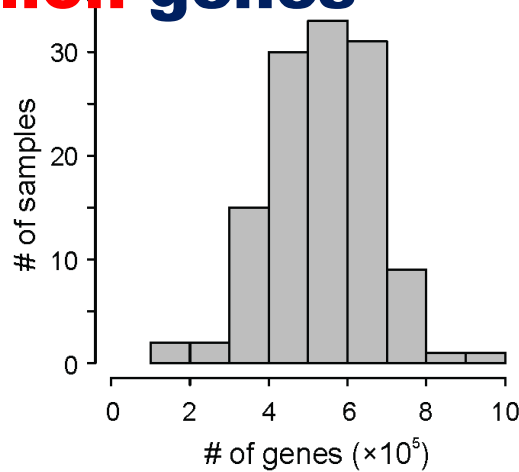
# Quantitative metagenomics





# Human intestinal microbial genes are largely shared in the cohort

Each individual has  
**~540 000 of the 3.3 million genes**



**40 % of an individual's genes are shared with at least 50 % of individuals of the cohort**

**Rare genes = genes shared by less than 20 % of individuals = 2.4 million genes**

**We are all rather similar!**

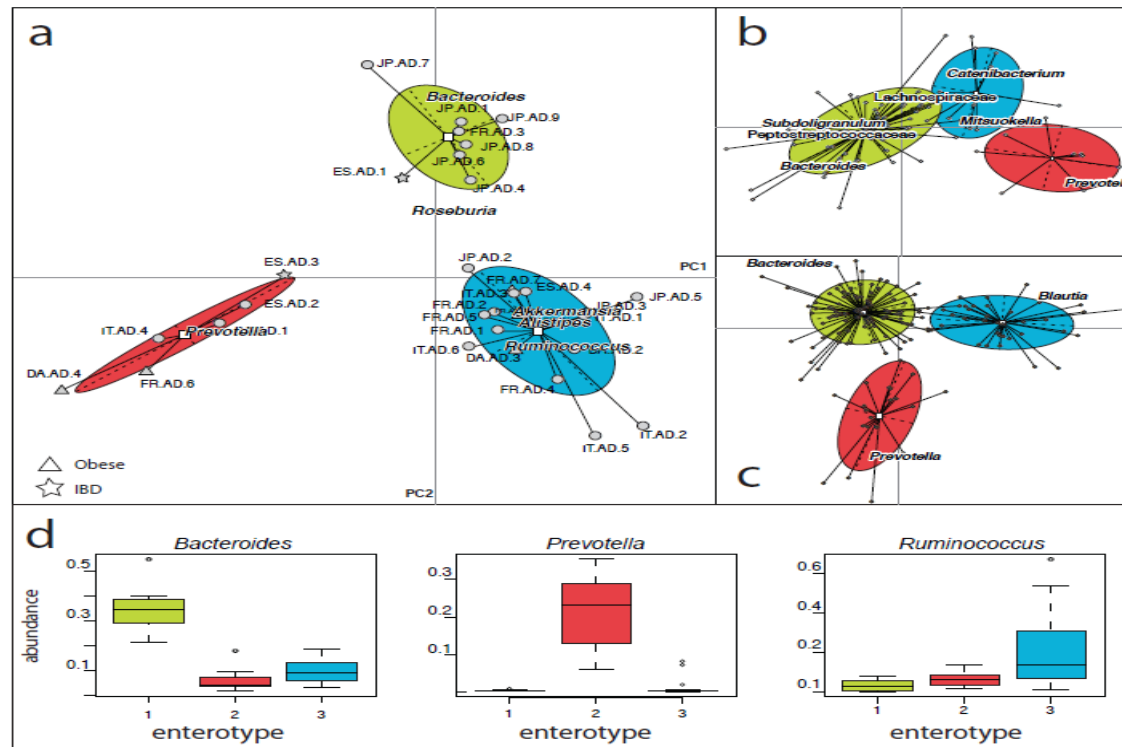
**But not identical!!**



Danes  
n=85;  
Illumina

US  
n=154;  
454

Manimozhiyan Arumugam<sup>1\*</sup>, Jeroen Raes<sup>1,2\*</sup>, Eric Pelletier<sup>3,4,5</sup>, Denis Le Paslier<sup>3,4,5</sup>, Takuji Yamada<sup>1</sup>, Daniel R. Mende<sup>1</sup>, Gabriel R. Fernandes<sup>6</sup>, Julien Tap<sup>1,7</sup>, Thomas Bruls<sup>3,4,5</sup>, Jean-Michel Batto<sup>7</sup>, Marcelo Bertalan<sup>8</sup>, Natalia Borruel<sup>9</sup>, Francesc Casellas<sup>9</sup>, Leyden Fernandez<sup>10</sup>, Laurent Gautier<sup>8</sup>, Torben Hansen<sup>11,12</sup>, Masahira Hattori<sup>13</sup>, Tetsuya Hayashi<sup>14</sup>, Michiel Kleerebezem<sup>15</sup>, Ken Kurokawa<sup>16</sup>, Marion Leclerc<sup>7</sup>, Florence Levenez<sup>7</sup>, Chaysavanh Manichanh<sup>9</sup>, H. Bjørn Nielsen<sup>8</sup>, Trine Nielsen<sup>11</sup>, Nicolas Pons<sup>7</sup>, Julie Poulain<sup>3</sup>, Junjie Qin<sup>17</sup>, Thomas Sicheritz-Ponten<sup>8,18</sup>, Sebastian Tims<sup>15</sup>, David Torrents<sup>10,19</sup>, Edgardo Ugarte<sup>3</sup>, Erwin G. Zoetendal<sup>15</sup>, Jun Wang<sup>12,20</sup>, Francisco Guarner<sup>9</sup>, Oluf Pedersen<sup>11,21,22,23</sup>, Willem M. de Vos<sup>15,24</sup>, Søren Brunak<sup>8</sup>, Joel Doré<sup>7</sup>, MetaHIT Consortium†, Jean Weissenbach<sup>3,4,5</sup>, S. Dusko Ehrlich<sup>7</sup> & Peer Bork<sup>1,25</sup>



# **Enterotypes can be viewed as “blood groups” but the reasons for their existence remains to be elucidated**

Recent publication: online September 1st (Wu et al, Science)

## **“Linking Long-Term Dietary Patterns with Gut Microbial Enterotypes”**

***Bacteroides* enterotype** → protein and animal fat ?

***Prevotella* enterotype** → carbohydrate ?

**Not modified by short term (10 days) diet intervention**

**(2 enterotypes found, based on 16S rDNA only – inadequate resolution ?)**

**They should allow patient stratification  
& aid to develop personalized medicine  
and nutrition**

**H Blottiere**

## ARTICLES

# An obesity-associated gut microbiome with increased capacity for energy harvest

Peter J. Turnbaugh<sup>1</sup>, Ruth E. Ley<sup>1</sup>, Michael A. Mahowald<sup>1</sup>, Vincent Magrini<sup>2</sup>, Elaine R. Mardis<sup>1,2</sup> & Jeffrey I. Gordon<sup>1</sup>

### BRIEF COMMUNICATIONS

#### MICROBIAL ECOLOGY

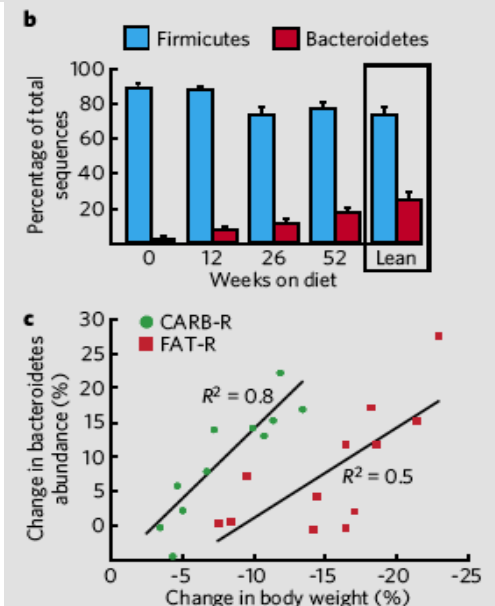
## Human gut microbes associated with obesity

Ruth E. Ley, Peter J. Turnbaugh, Samuel Klein,  
Jeffrey I. Gordon

Washington University School of Medicine,  
St Louis, Missouri 63108, USA

**Suggested that Obese Individuals may have a lower Bacteroidetes: Firmicutes ratio than Lean Individuals – and this can be modulated by diet.**

NATURE|Vol 444|21 December 2006



# **Modern ‘non-infectious’ human diseases with associated gut microbiotal disorders.**

**Gastric ulcers (*Helicobacter pylori*)**

**Colon and other cancers.....**

**Autoimmune (AI) diseases**

**Inflammatory bowel diseases- Ulcerative Colitis & Crohn’s (type IV)**

**Type 1 diabetes (type IV)- may be prevented by gut bugs and parasites**

**Primary biliary cirrhosis**

**Celiac disease (type IV hypersensitivity)  
others too?**

**Insulin resistance related conditions**

**Type 2 diabetes and obesity...**

**Allergies & related immune disorders**

**Asthma, Eczema, Psoriasis.....(others?)**

**Neuropsychiatric disorders?**

**Autism (?), Schizophrenia?.....(others?)**

**Hypertension....**

**From: J Nicholson**

# **Inter- and Multidisciplinarity**

**Handling of data: knowledge management  
Bioinformatics, Systems Biology  
« Big Science » and « curiosity-driven » science**

**Information  
Technology  
For Health  
« services »  
Business model**

**Nutrigenomics  
nutrigenetics**

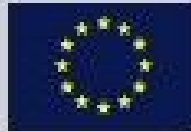
**Public health  
Ethics**

**Cohorts  
Clinical studies  
(Interventional)  
Evidence  
based**

**Technologies: « omics »**  
- Sequencing  
- Epigenetic analysis  
- Proteomics  
- Metabonomics

**Research  
Consortia  
And  
Networks**

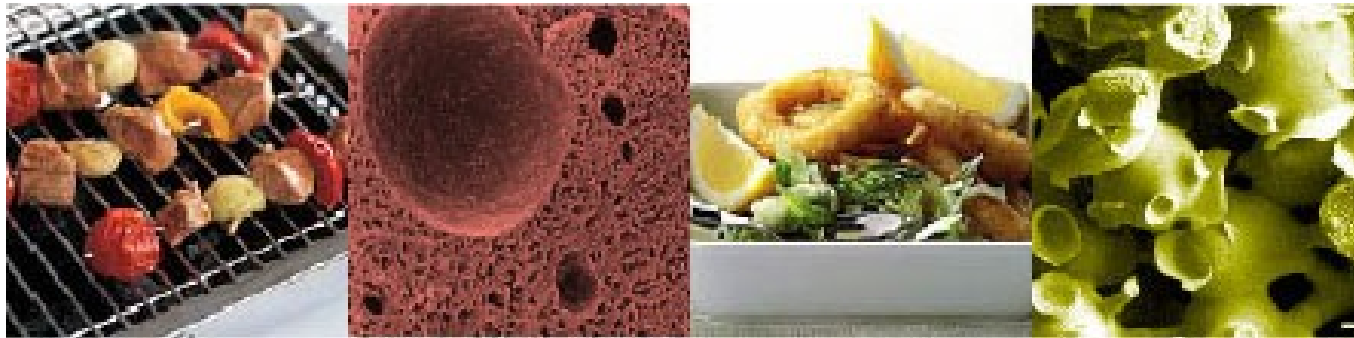
NuGO is a world-leading network  
integrating nutritional genomics  
in Europe.



NuGO is funded  
by the European  
Commission



2004-506360



**The European Nutrigenomics Organisation:  
linking genomics, nutrition and health research (NuGO)**

## **NuGO activities**

### **Representative examples**

**Challenges of molecular nutrition research :  
the nutritional phenotype database to store, share  
and evaluate nutritional systems biology studies**

***Ben Omnen et al.***

**Time-Resolved and Tissue-Specific Systems Analysis  
of the pathogenesis of Insulin Resistance**

**Robert Kleemann et al**



# **Nutritigenomics and Nutrigenetics**

**A real and most important case for the future of  
Personalised Health Care**

## **Questions and Challenges**

**❑ Evidence based ? To be substantiated**

**❑ Mechanisms ?**

**❑ Which impact?:**

- group of individuals?**
- individuals ?**
- novel biomarkers ?**
- novel scientific model:  
integration of data  
multidisciplinarity**