For healthcare professional use only



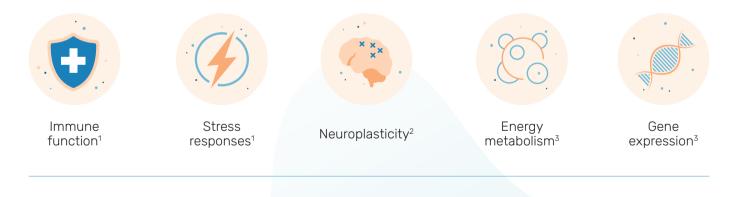
Nutrition Essentials: C-Section Delivery

Strategies to rebalance the gut microbiome

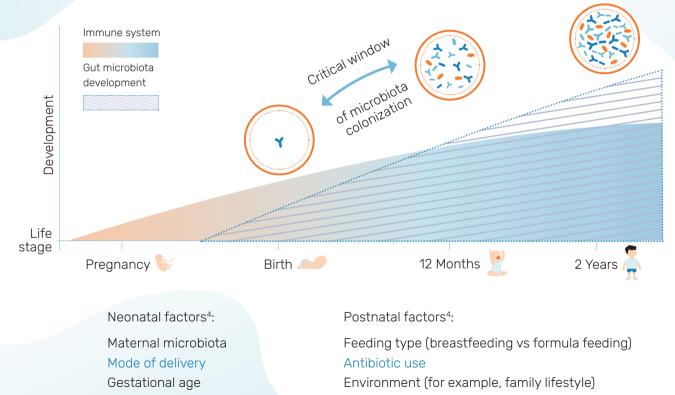
The role of the gut microbiome in infant development

A balanced gut microbiota is essential for proper immune, metabolic and cognitive development in infants and children.¹

The gut microbiome plays an important role in regulating host processes such as:¹



Factors influencing the development of the gut microbiome in early life



How does mode of delivery affect microbiome colonization in the gut?

- Mode of delivery is generally accepted as a major factor that influences initial gut microbiota colonization.⁴
- Babies delivered by vaginal birth have a different gut microbiome than babies delivered by Caesarean-section (C-section).⁵
- Vaginally delivered infants are exposed to maternal vaginal and fecal microbes which then colonize the gut.⁴
- Babies delivered by C-section do not come into direct contact with maternal vaginal and fecal microbes and are more likely to be colonized by maternal skin and environmental microbes.⁴

PC1 (12%)

PC2 (9.8%)

Mother's body habitat Oral cavity Vagina Skin **Delivery mode** Vaginal delivery C-section delivery

Differences in gut microbiota composition between infants delivered vaginally and through C-section



Infants born by C-section have delayed gut microbiota colonization as well as lower levels of important 'keystone colonizers' such as Bifidobacterium and Bacteroides.^{5,6}

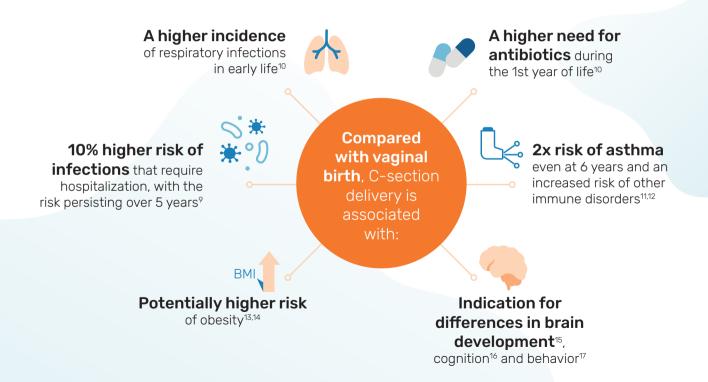


Vaginally delivered infants show a greater diversity of gut microbiota compared with C-section delivered infants.⁴ \mathfrak{O}

These differences in infant gut microbiome are present at 1 year and beyond.⁷⁸ This can have long-term effects on immunological and metabolic development of infants.⁷

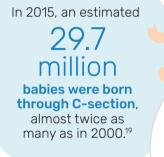
The gut microbiota of C-section infants differs significantly from that of vaginally delivered infants, which may have serious consequences on the long-term health of C-section infants.

Long term impact of C-section delivery



Increasing C-section rates across the world are a cause for concern

- C-section can be a medically necessary intervention to prevent maternal and newborn mortality.¹⁸
- However, C-section delivery is associated with short- and long-term risks.¹⁸
- The World Health Organization (WHO) has stated that C-section use should not exceed 10%–15% of all births.¹⁸

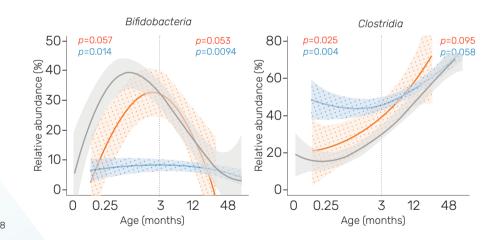


It is projected that by 2030, **28.5%** of pregnant women worldwide will deliver by C-section.²⁰

The impact of C-section delivery on infant health is thus becoming an increasing concern.

Does early life antibiotic exposure impact gut microbiome development?

- Antibiotic use in infants reduces gut microbiota diversity and impacts abundance of *bifidobacteria* as important early life colonizers.⁵⁸
- Infants treated with antibiotics showed reduced infant-type *bifidobacteria* while adult-type *clostridia* increased in abundance.⁵⁸



Normal
 Caesarean
 Antibiotic-treated

Impact of antibiotic use in early life

Early life antibiotic use is associated with an increase in immune-related disorders and impacts metabolism. There is also some evidence that it can affect cognitive development.

Impact of antibiotic use on:



Higher likelihood of *Clostridioides difficile* infection²¹







Higher risk of developing allergies and asthma²²⁻²⁵



Increased susceptibility to obesity^{27,28}

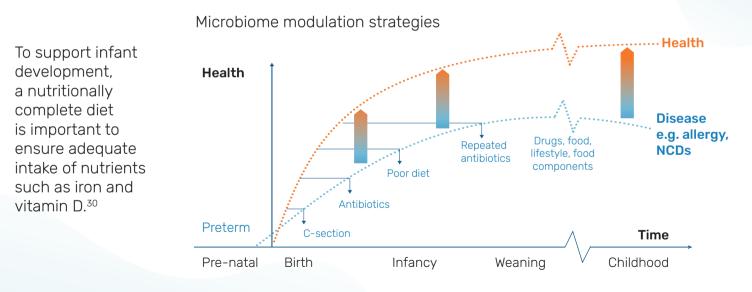


Higher susceptibility to develop autoimmune disease and non-communicable disorders²⁵



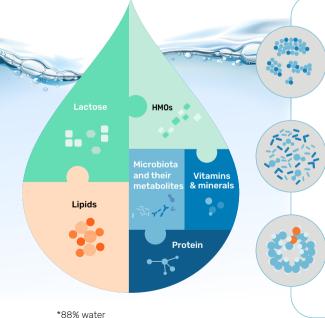
Cognitive development⁶⁴

Nutritional strategies offer a good opportunity to rebalance the compromised microbiota in early life⁶⁵



Breast milk is the gold standard in infant nutrition

Breast milk contains nutritional and bioactive compounds that support development of a healthy gut microbiota and immune system³¹⁻⁴⁵



Immune cells and other immune modulatory components Conferring active and passive immunity

>200 identified Human Milk Oligosaccharide (HMOs) Prebiotic effect, direct effect on immune cells and blocking the entry of pathogens to reduce infections

Bacteria and bacterial metabolites

To support the development and functioning of a healthy gut and immune system

Unique lipids profile with essential fatty acids and complex lipid structures

To support brain development

Nucleotides, vitamins, minerals, micronutrients Essential for growth and development

Carbohydrates (including lactose) and lipids

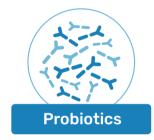
Most important sources of energy

Proteins Essential for growth and development

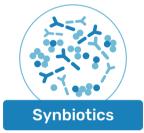
The role of prebiotic, probiotic and synbiotics in gut microbiota colonization



Substrates that are selectively utilized by host micro-organisms, conferring a health benefit.⁴⁷



Live micro-organisms which when administered in adequate amounts confer a health benefit on the host.⁶⁶



A mixture of pre- and probiotics that improve the survival of live microbial dietary supplements in the gastrointestinal tract by selectively stimulating the growth of health-promoting bacteria.⁶⁷

Biotics-containing formula: A valid nutritional alternative



When exclusive breastfeeding is not possible, biotics-containing formula could be considered as a valid nutritional alternative.



Several biotics are available in the market, but only a few have been proven to provide health benefit to infants.

Prebiotics with proven benefits: scGOS/IcFOS (9:1) and 2'-FL

- Short-chain galacto-oligosaccharide (scGOS)/long-chain fructo-oligosaccharides (lcFOS) (9:1) is a unique blend of scGOS and lcFOS which has demonstrated positive effects on infant microbiota and health in over 40 studies.⁴⁹⁻⁵¹
- 2'-fucosyllactose (2'-FL) is the most abundant HMO found in breast milk.52

scGOS/IcFOS (9:1) in infant formula:

- Increased beneficial bacteria 53,54,57
- Reduced infections
 ^{55-57,68}



• Suppressed the growth of harmful bacteria^{51,53,57,59}

Adding 2'-FL to scGOS/IcFOS enhances immune and microbiota benefits.

- Improved influenza vaccination response^{60,61}
- More favorable microbial ecosystem⁶⁰

Bifidobacterium breve M-16V is a probiotic with proven health benefits

- *Bifidobacterium* are a family of beneficial bacteria naturally found in the gut of breastfed infants.⁶²
- *B. breve* M-16V is a species originally isolated from a healthy infant gut.⁶³
- *B. breve* M-16V has been extensively studied, with well-established clinical data on its safety and efficacy in infants.⁶³





Promotes early gut microbial colonization

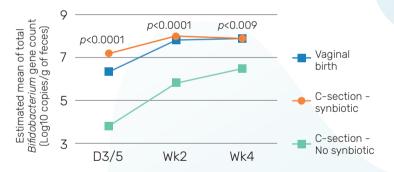


Regulates immune response to prevent allergic disorders

Infant formula with *B. breve* M-16V and scGOS/IcFOS (9:1) corrects delayed gut colonization in babies born by C-section

JULIUS study: Randomized, double-blind multicentre study²⁹

- **153 infants delivered by C-section** randomized to receive synbiotic (n=52), prebiotic (n=51), or control formula (n=50)
- From day 3/5 to week 4, the **proportion of** *bifidobacteria* **in the synbiotic group was significantly higher than the control group**.²⁹
- The delayed colonization of *bifidobacteria* in infants born by C-section was restored with synbiotic treatment resembled the vaginally born reference.²⁹



Reduced incidence of skin disorders with infant formula containing *B. breve* M-16V and scGOS/IcFOS (9:1)

Compared with the control group, significantly fewer infants in the synbiotic group reported skin disorder-related adverse events.²⁹

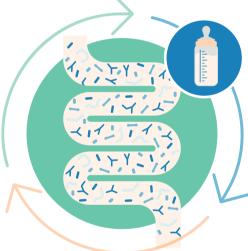
10 Proportion of infants with 8 skin disorders 53% 6 reduction p = 0.0174 2 n=48 n=51 n=30 0 Control Synbiotic Vaginal birth

Incidence of skin disorders during 16 weeks of intervention (reported AEs)

Summary

The gut microbiota plays a key role in immunoregulation and normal development.

The gut microbiome colonization is influenced by various factors such as mode of delivery at birth and feeding type during infancy.



Where breastfeeding is not possible, including babies delivered by C-section, choosing an evidencebased synbiotic infant formula can support the development of a healthy gut microbiome.

References

- 1. West CE et al. J Allergy Clin Immunol 2015;135(1):3-13.
- 2. Murciano-Brea J et al. Cells. 2021;10(8): 2084.
- 3. Barko PC et al. J Vet Intern Med 2018;32:9-25.
- 4. Milani C et al. Microbiol Mol Biol Rev 2017;81(4):e00036-17.
- 5. Dominguez-Bello MG et al. PNAS 2020;107:11971-11975.
- 6. Shaterian N et al. Open Med 2021;16:624-639.
- 7. Korpela K, de Vos WM. Curr Opin Microbiol 2018;44:70-78.
- 8. Roswall J et al. Cell Host Microbe 2021;29:765-776.
- 9. Miller JE et al. PLoS Medicine 2020;17:e1003429.
- 10. Reyman M et al. Commun Biol. 2021;4(1):1233.
- 11. Sevelsted A et al. Pediatrics. 2015;135:e92-8.
- 12. Stokholm J et al. Sci Trans Med 2020;12:eaax9929.
- 13. Zhou Y et al. Int J Environ Res Public Health 2020;17:2003.
- 14. Chojnacki MR et al. Early Hum dev. 2019;129:52-59.
- 15. Deoni SC et al. AJNR Am J Neuroradiol. 2019;40:169-177.
- 16. Huang K et al. Brain Res Bull. 2019;144:108-121.
- 17. Zachariassen LF et al. Physiol Behav. 2021;230:113285.
- 18. Betran AP et al. BJOG. 2016;123:667-70.
- 19. Boerma T et al. Lancet 2018;392:1341-8.
- 20. Betran AP et al. BMJ Global Health 2021;6:e005671.
- 21. Langdon A et al. Genome Med 2016;8:39.
- 22. Hirsch AG et al. Clin Exp Allergy 2017;47:236-44.
- 23. Kummeling I et al. Pediatrics 2007;119:e225-31.
- Slob EMA et al. Eur Respir J. 2020; 55:1902021.
 Korpela K et al. Pediatr Res 2020;99:438-443.
- 26. Cox LM et al. Cell. 2014:158(4):705-721.
- 27. Bailey LC et al. JAMA Pediatr 2014;168:1063-1069.
- 28. Murphy R et al. Int. J. Obes 2014:38(8):1115–1119.
- 29. Chua MC et al. J Pediatr Gastroenterol Nutr 2017;65:102-106.
- 30. Akkermans MD et al. J Pediatr Gastroenterol Nutr 2016:62:635-42.
- 31. Coppa GV, Int. Conf. on Breast milk and Lactation 1991 USA.
- 32. Brandmiller J, et al. J Pediatr 1998;133:95-8.
- 33. Gyorgy P et al. Eur J Biochem 1974,43:29.
- 34. Wickramasinghe S, et al. BMC Microbiol 2015;15:172.
- 35. Eiwegger T et al. Pediatr Res 2004;56(4):536-40.
- 36. Bode L, et al. Thromb Haemost 2004;92(6):1402-10.
- 37. Eiwegger T et al. Pediatr Allergy Immunol 2010;21(8):1179-88.
- 38. Boehm G, et al. In: Mattia-Sandholm T(ed): Funct. Diary prod. Woodhead Publ Ltd, 2002.

- 39. Newburg D, et al. Glycobiology 2004;14(3):253-63.
- 40. Wang S, et al. Neurosci. Biobehav. Rev. 2018:95:191-201.
- 41. Gomez-Gallego C, et al. Nutrients 2018:10;1355.
- 42. Boix-Amorós A et al. Front Microbiology 2016:492.
- 43. Aguilar-Toala JE. et al. Trends Food Sci. Technol 2018;75:105-114.
- 44. Brenna, J. Nutr Rev 2016;74:329.
- 45. Hadley K, et al. Nutrients, 2016;8:216.
- 46. Hobbs A et al. BMC Pregnancy Childbirth 2016;16:90.
- 47. Gibson GR et al. Nat Rev Gastroenterol Hepatol 2017;14(8):491-502.
- 48. Joint FAO/WHO Expert Consultation on Evaluation of Health and Nutritional Properties of Probiotics in Food including Powder Milk with Live Lactic Acid Bacteria. 1–4 October 2001.
- Salminen S, Szajewska H, Knol J, Eds. The Biotics Family in Early Life. Chichester, UK: John Wiley and Sons Ltd, 2019.
- 50. Patel RM, Denning PW. Clin Perinatol. 2013;40:11-25.
- 51. Fanaro S et al. Acta Paediatr Suppl 2005;94(449):22-26.
- 52. Hegar B, et al. Pediatr Gastroenterol Hepatol Nutr. 2019;22(4):330-340.
- 53. Knol J et al. J Pediatr Gastroenterol Nutr. 2005;40:36-42.
- 54. Moro G et al. J Pediatr Gastroenterol Nutr 2002;34(3):291-295.
- 55. Bruzzese E et al., Clin Nutr, 2009. 28:156-61.
- 56. Chatchatee P et al. J Pediatr Gastroenterol Nutr. 2014;58:428-437.
- 57. Arslanoglu S et al. J Nutr. 2007;137:2420-4.
- 58. Korpela K et al. Pediatr Res 2020;88(3):438-443.
- 59. Knol et al. Acta Paediatr Suppl. 2005 Oct;94(449):31-3.
- 60. Xiao, et al. J Nutr. 2019;149:856-869.
- 61. Van de Elsen et al. Benef. Microbes. 2019;10:279-91.
- 62. Turroni F et al. PloS One 2012;7:e36957.
- 63. Wong CB et al. Nutrients 2019;11:1724.
- 64. Slykerman RF et al. Acta Paediatr 2017;106(1):87-94.
- 65. Kumar H et al. Microorganism 2020 ;8(12):1855.
- 66. Hill C et al. Nat Rev Gastroenterol Hepatol 2014;11(8):506-514.
- 67. Swanson KS et al. Nat Rev Gastroenterol Hepatol 2020; 17(11):687-701.
- 68. Arslanoglu S et al. J Nutr 2008;138(6):1091-1095.





Early Life Nutrition

- Simply Biotics
- Simply Lipids
- Nutrition Essentials: Faltering Growth
- Nutrition Essentials: Iron Deficiency
- Nutrition Essentials: C-section Delivery



Adult Nutrition

- Nutrition Essentials: Frailty
- Nutrition Essentials: Oncology
- Nutrition Essentials: Stroke

