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Standardizing Microbiome Research: From The Lavatory To The Laboratory

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(Previously in the lab of Dr. Ami Bhatt at Stanford)

Disclosures

- None



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Overview

1. Introduction
2. Sources of variability
3. Methods to minimize variability
4. Standardization in patients with cancer



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The human microbiome and cancer



<https://www.smithsonianmag.com>

Stool processing and analysis workflow



1. Collection



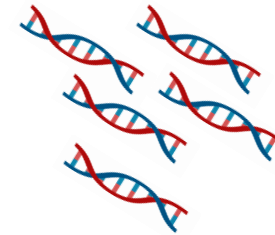
2. Processing and storage



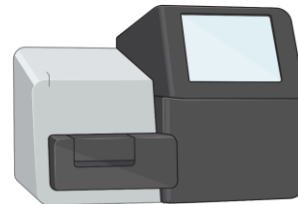
3. DNA extraction



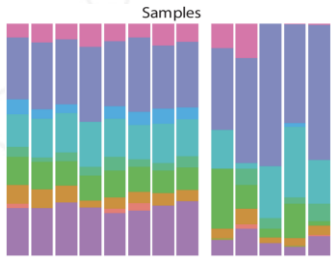
4. Library preparation



5. Sequencing



6. Bioinformatic analysis



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Microbiome sequencing methods

16S ribosomal RNA sequencing

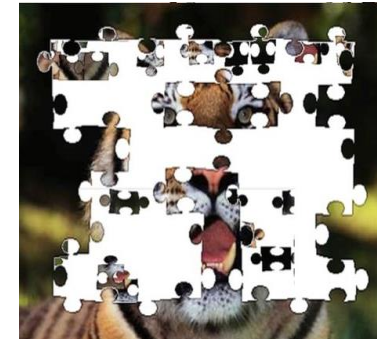
Gross taxonomic classification



Metagenomic sequencing + limited gene analysis

Higher resolution taxonomic classification

Non-bacterial data



Metagenomic sequencing + whole genome analysis

Species/strain level classification

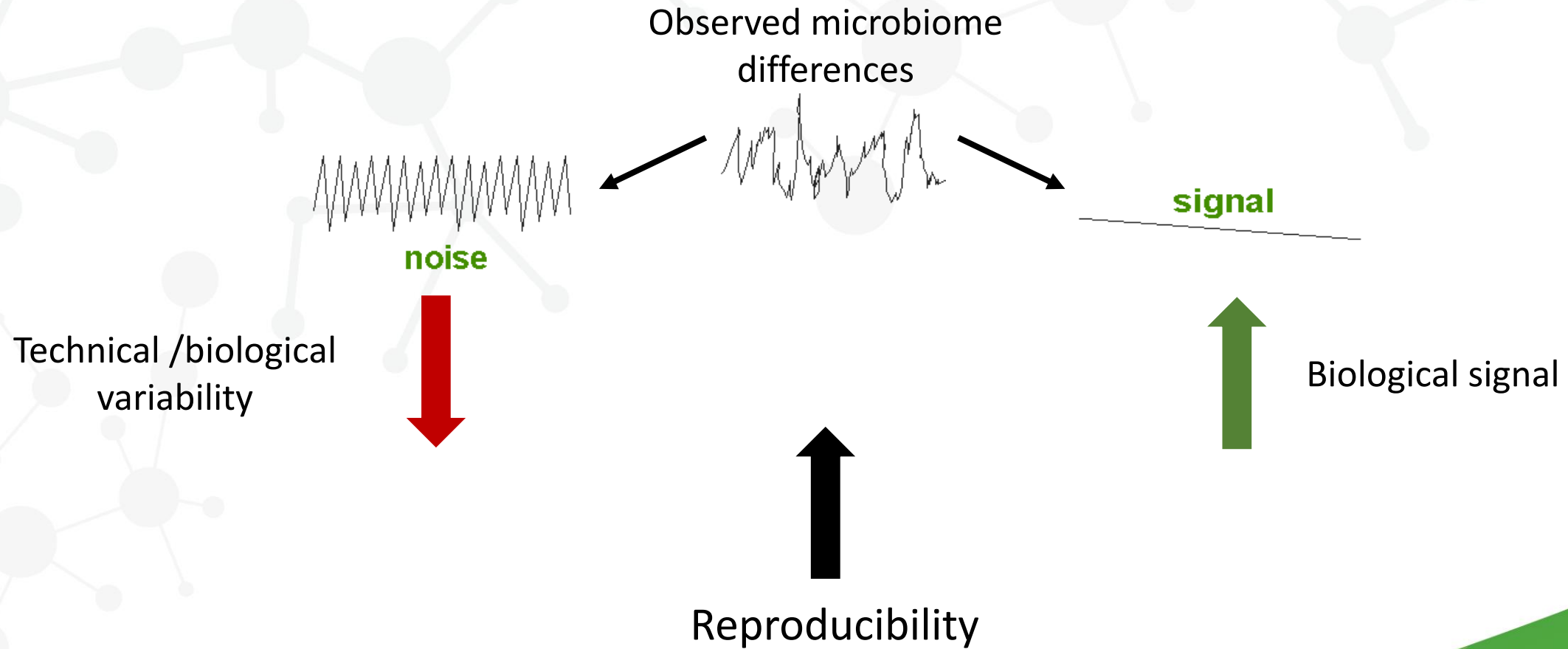
Non-bacterial data

Metabolic pathways



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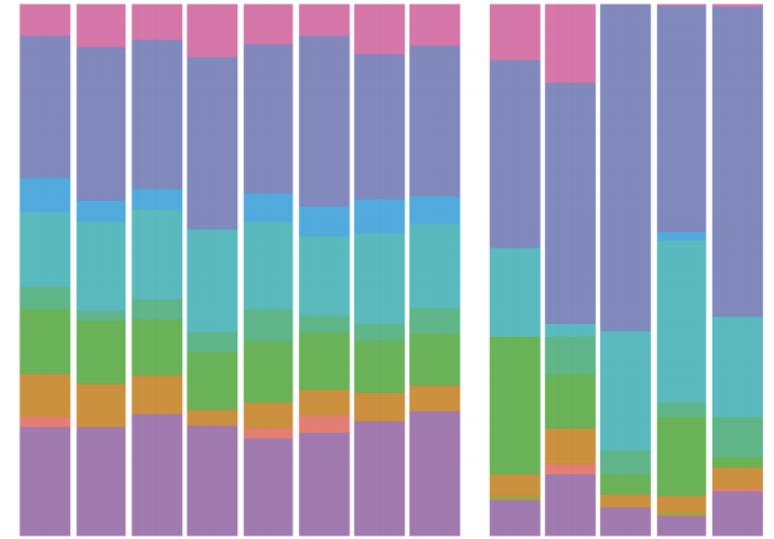
Reproducibility is a major challenge in microbiome research



Technical and biological variability can occur at every step



-
1. Collection
 2. Processing and storage
 3. DNA extraction
 4. Library preparation
 5. Sequencing
 6. Bioinformatic analysis

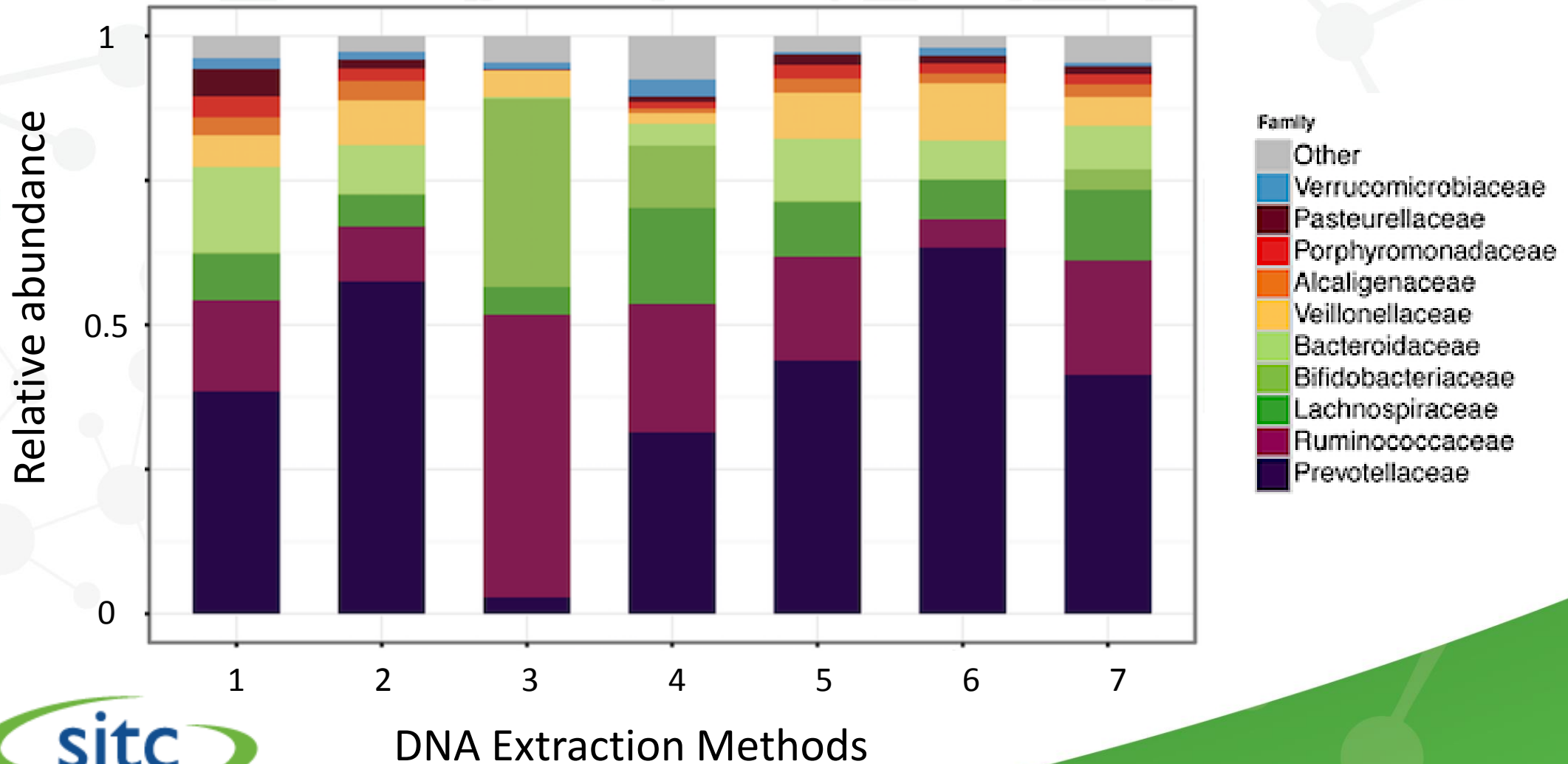


Sources of technical and biological variability

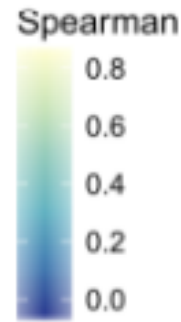
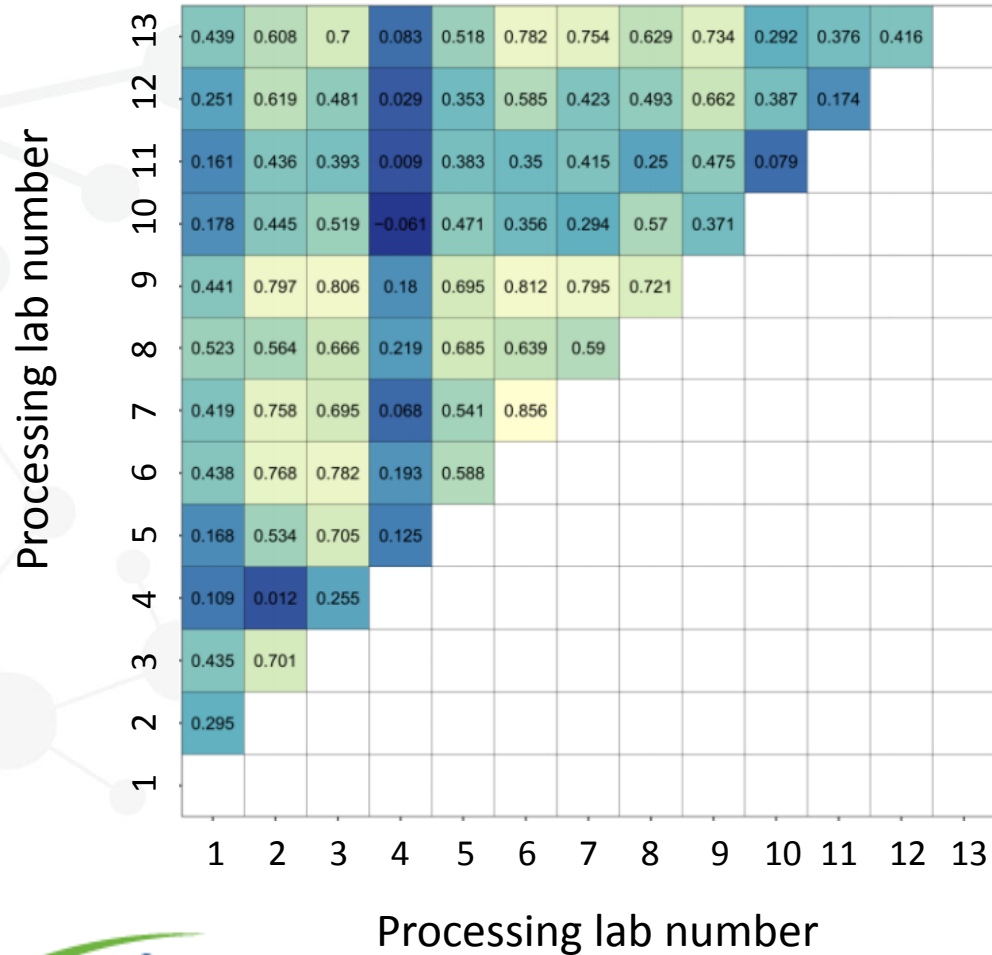
1. **DNA extraction method**
2. **Bioinformatic processing**
3. Study design
4. Sample collection
5. Storage conditions
6. Batch variation
7. Contamination
8. Different reference databases
9. Many others....



Sources of variability: DNA extraction methods

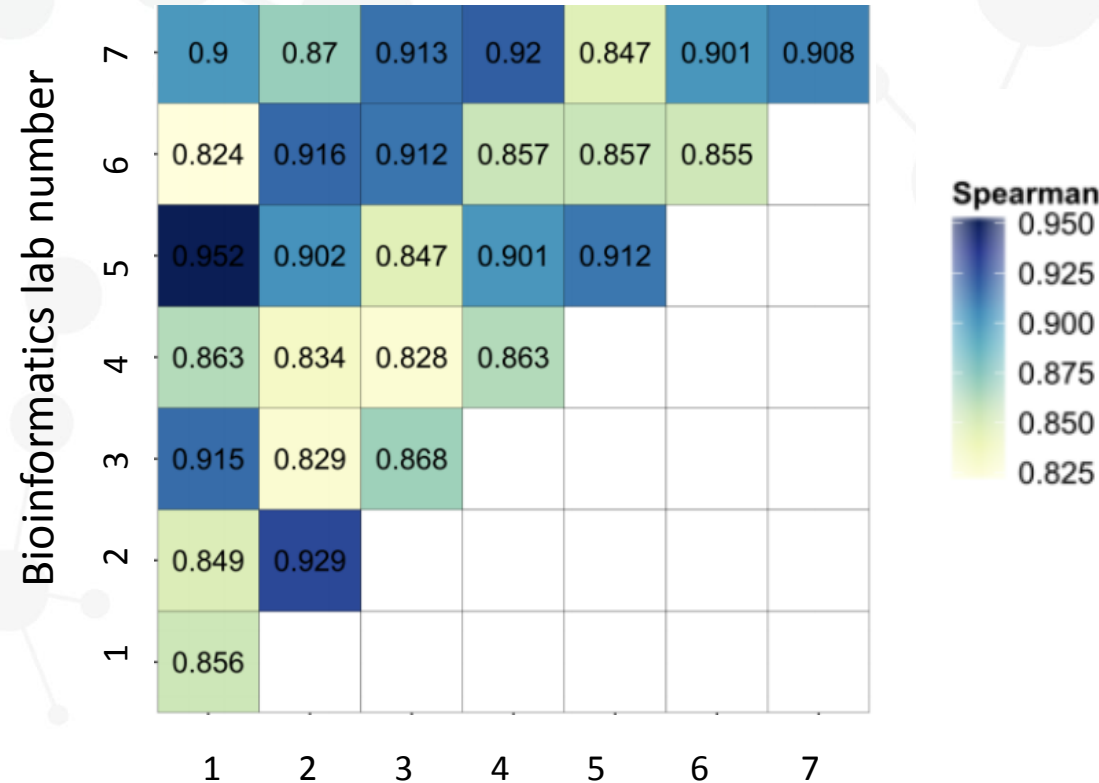


Poor correlation of diversity measurements between different labs processing the same sample



Correlation of diversity measurements:
0.08 (blue)-0.77 (yellow)

Improved correlation of diversity measurements between different labs analyzing the same sample



Correlation of diversity measurements:

0.82-0.95

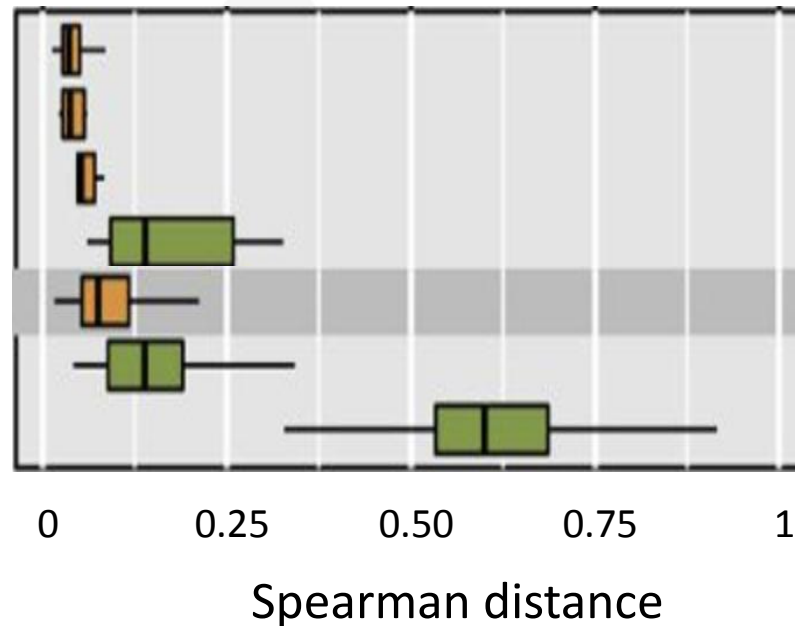


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Relative contributions to variability in microbiome research: International Human Microbiome Standards (IHMS)

Sources of variability

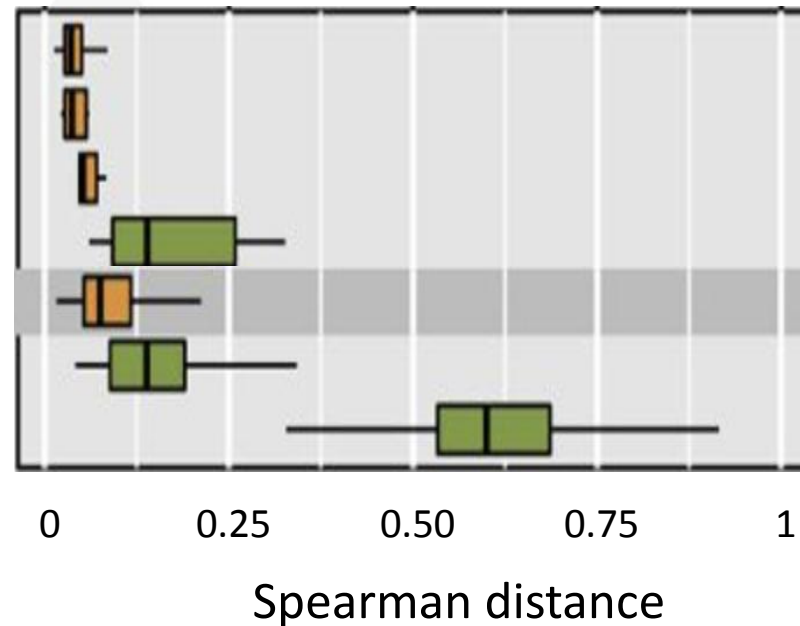
Within protocols (measurement error)
Between library preparations
Between preservation methods
Within stool specimens
Between protocols
Within individuals over time
Between individuals



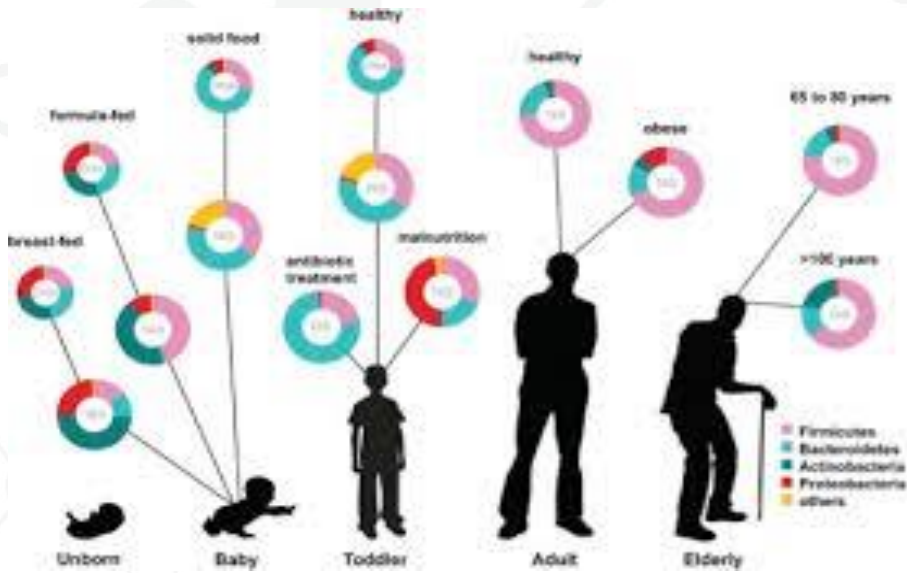
Relative contributions to variability in microbiome research: International Human Microbiome Standards (IHMS)

Sources of variability

Within protocols (measurement error)
Between library preparations
Between preservation methods
Within stool specimens
Between protocols
Within individuals over time
Between individuals



Sources of biological variability



Medications



Diet



Demographic variables



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How can we minimize technical and biological variability?

1. Standardization
2. Use of controls (+/-)
3. Accurate measurement of confounders



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Minimizing technical and biological variability: Standardization in healthy participants



- Human Microbiome Project (HMP): <https://hmpdacc.org/>
- Microbiome Quality Control Project (MBQC): <https://www.mbqc.org/>
- International Human Microbiome Standards (IHMS): <http://www.microbiome-standards.org/>



Minimizing technical and biological variability: +/- Controls

+ controls: Microbiome standards

- controls: Buffer blanks



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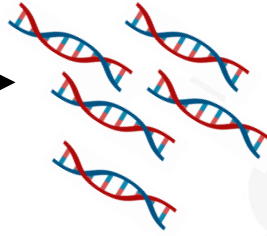
Microbiome standards



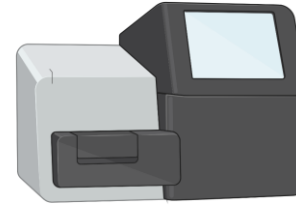
3. DNA extraction



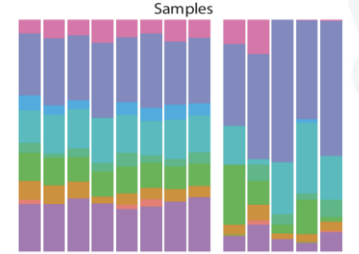
4. Library preparation



5. Sequencing



6. Bioinformatic analysis

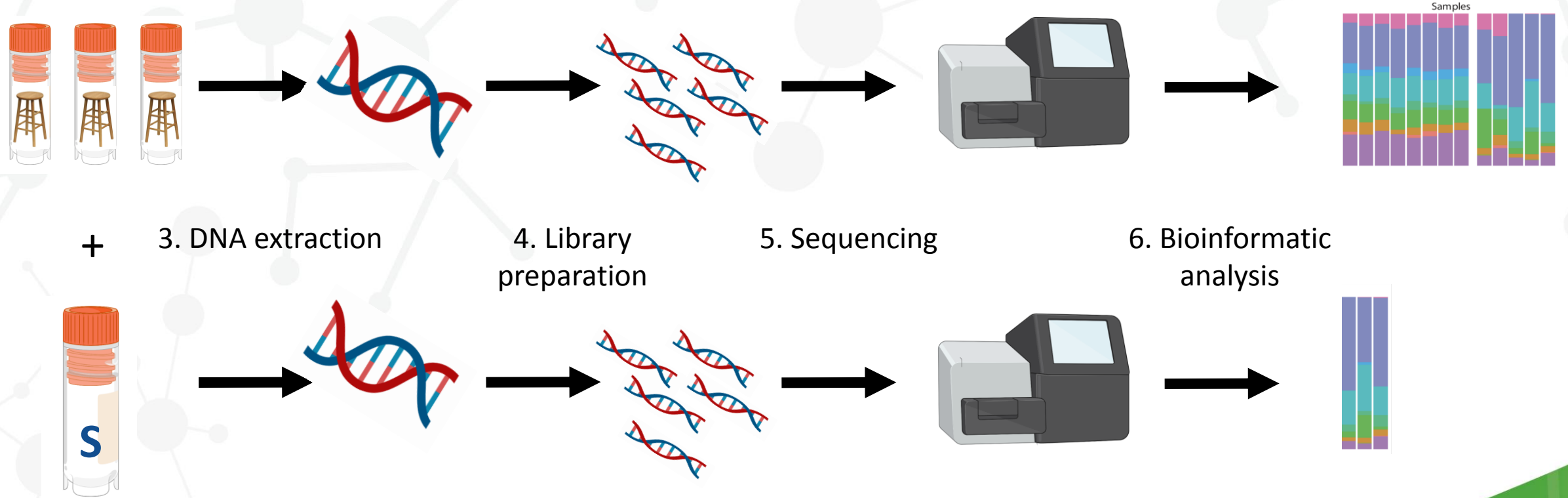


Whole cell standardized microbial community



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Microbiome standards

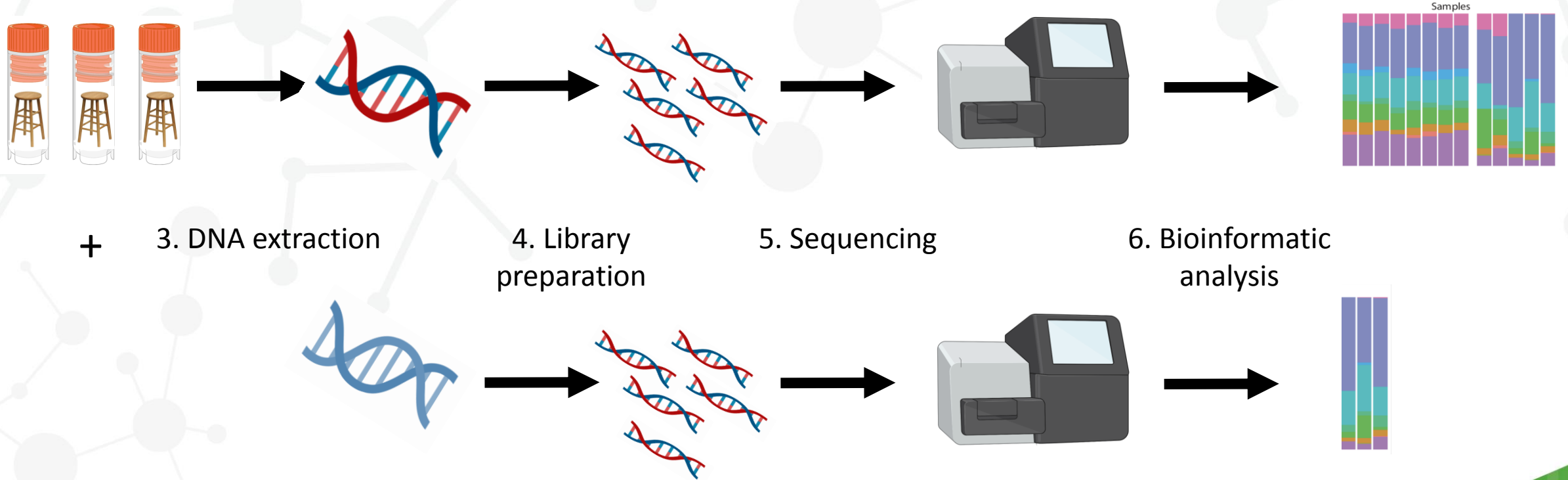


Whole cell standardized microbial community



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Microbiome standards



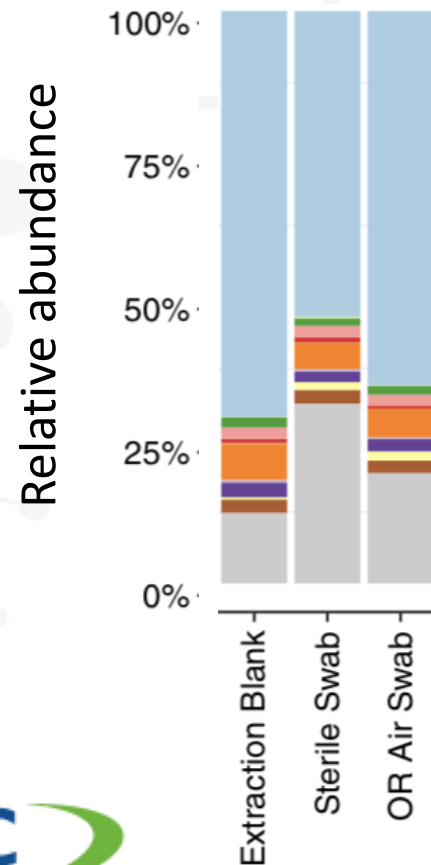
Genomic DNA standard



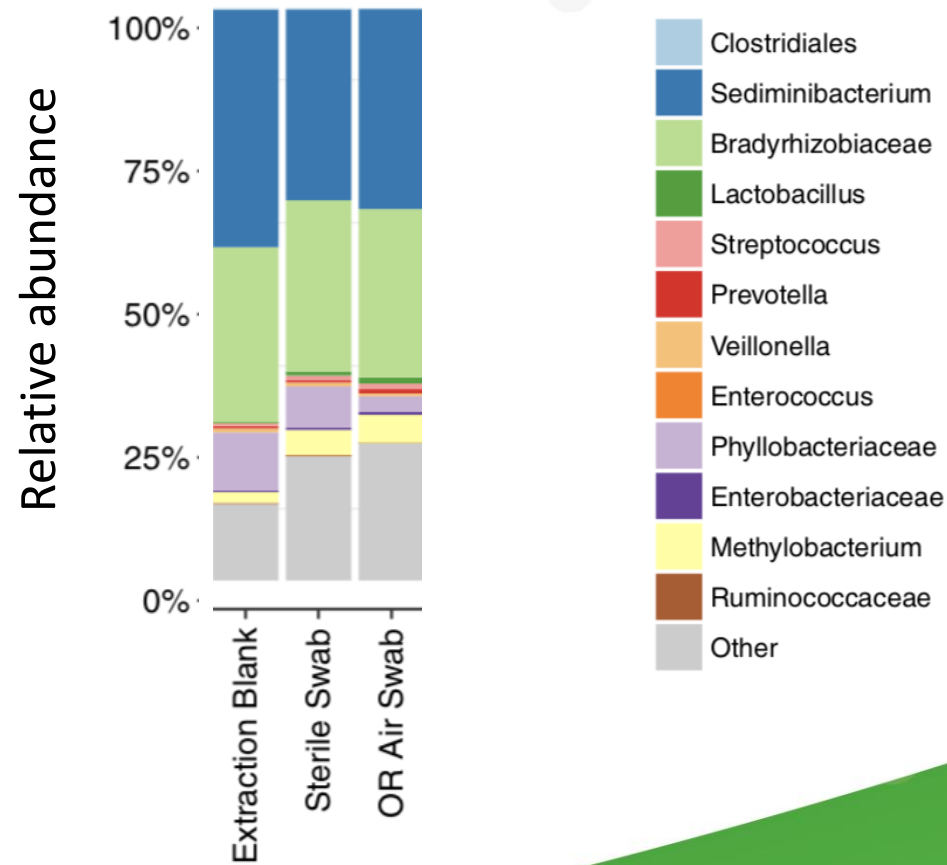
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The importance of negative controls: The microbiome of contamination

DNA extraction method A



DNA extraction method B



Source

What about standardized protocols in patients with cancer?

- Hospital and clinic based collections
- More variability in microbiome taxonomic composition between patients
- More variability over time within patients
- Low DNA biomass in patients with diarrhea

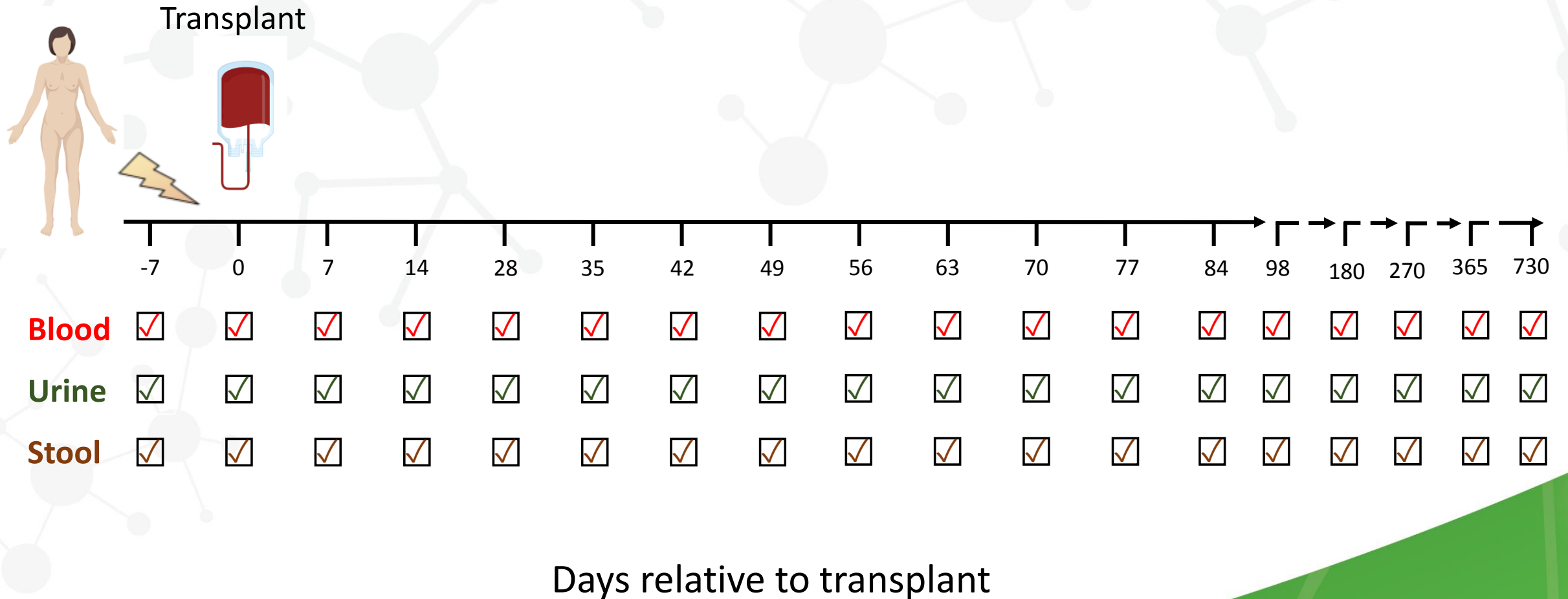


BMT-CTN 1801: Mi Immune Study

- Microbiome and Immune Reconstitution in Cellular Therapies and Hematopoietic Stem Cell Transplantation (Mi-Immune)
 - **Leslie S. Kean MD, PhD, Miguel-Angel Perales, MD, and Ami Bhatt MD, PhD**
- Companion study to Progress III (BMT-CTN 1703)
 - Multi-center phase III RCT
 - Post-transplant cyclophosphamide in reduced-intensity conditioning (RIC) allogeneic hematopoietic stem cell transplant (HCT) recipients



Mi Immune Schema



Goals of Mi Immune Biobanking

- Standardized protocols in patients undergoing HCT
- Multi-center collection of banked blood, urine, and stool
- Resource linking clinical metadata to biobanked samples



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Summary

- Reproducibility is a major challenge
 - Standardization
 - Controls
 - Measurement of confounders
- Standards exist for microbiome research in the general population
- BMT-CTN 1801 standardization and biobanking in HCT



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Thank you!

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