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Analysis of blood microbiome in patients with gastric cancer

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Background

- Gastric cancer (GC) is one of the most common cancers in the world and third leading cause of cancer-related death.
- Microbiome is associated with various diseases as well as with GC.
- Bacterial DNA corresponds to various states of human health.

Aim

To perform a microbiome analysis and identify possible circulating biomarkers for GC.

Methods

- 35 GC patients and 43 Controls.
- DNA extracting from blood plasma.
- The V1–V2 region of the bacterial 16S rRNA sequencing on a Illumina MiSeq, using 27F and 338R primers.
- Bioinformatic and statistical analysis.

Research Results (1)

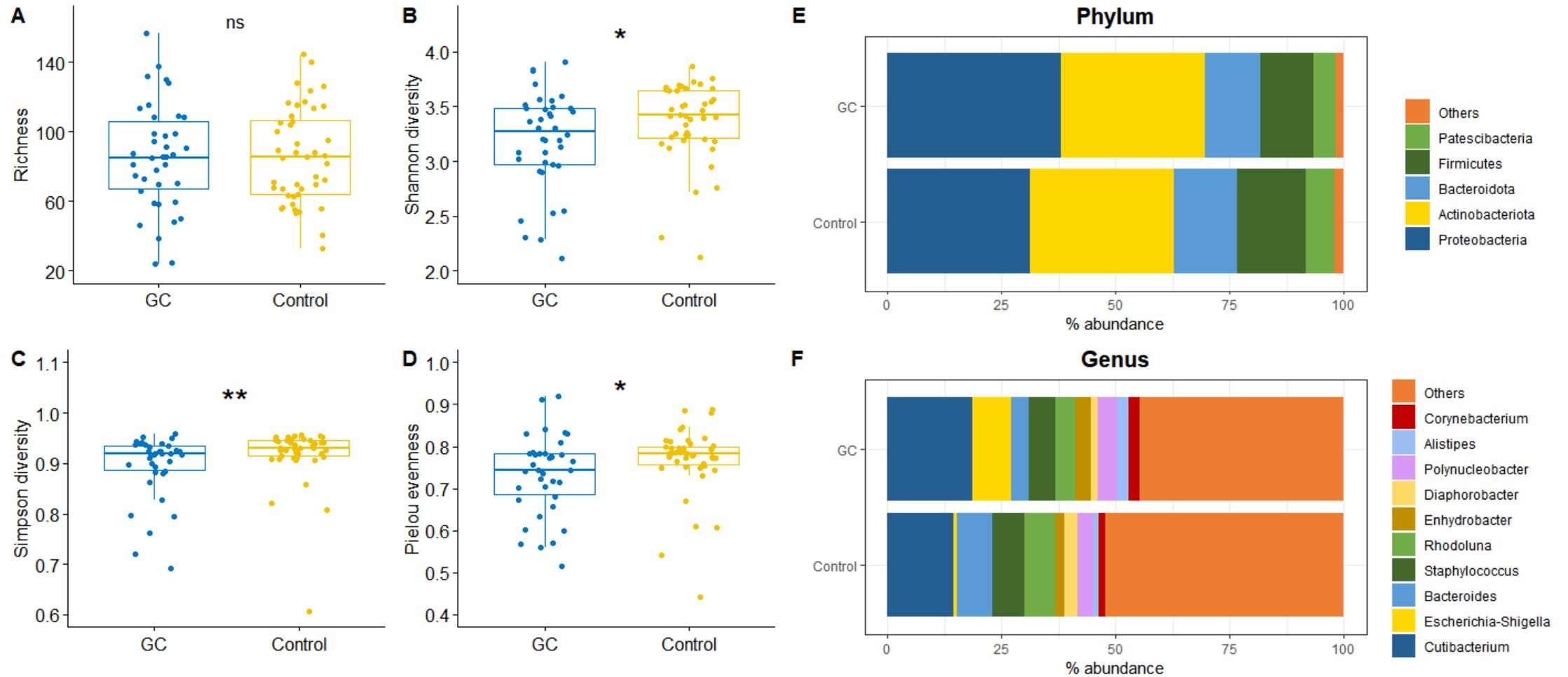


Figure 1. Comparison of plasma microbiome among healthy controls (Controls) and patients with gastric cancer (GC). (A-D) alpha diversity. (E,F) Barplots of the taxonomic profiles. ** $P < 0.01$, * $P < 0.05$, ns- not significant.

Research Results (2)

Differential abundance analysis (GC vs Controls, Mann-Whitney U test, FDR) :

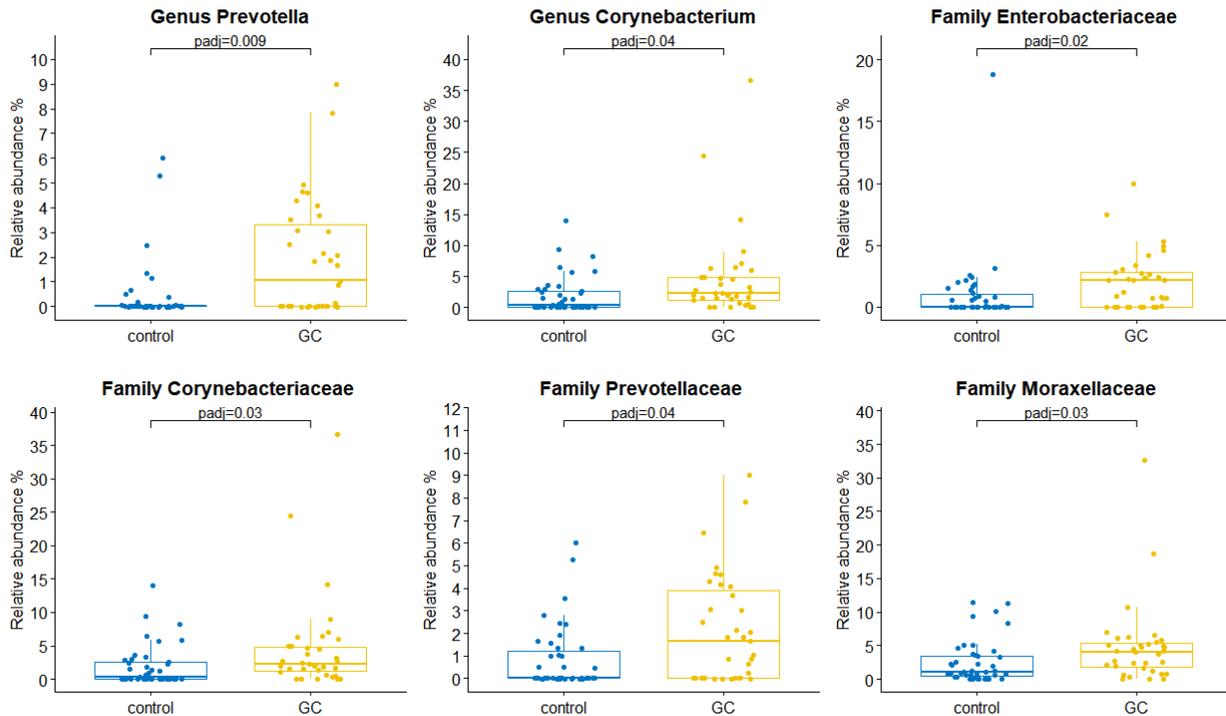


Figure 2. Boxplots of significantly different bacterial genera and families between control and GC groups.

Association with clinical data:

g. Prevotella

- intestinal tumour growing type
- absence of metastases (M0)
- absence or a small number of cancer cells in the lymph nodes (N0-N1)
- larger tumor (T3-T4)

g. Corynebacterium

- diffuse tumour growing type
- low cell differentiation (G3)

f. Enterobacteriaceae

- diffuse tumour growing type
- present of metastases (M0)
- absence or a small number of cancer cells in the lymph nodes (N0-N1)
- low cell differentiation (G3)

Conclusions

1. Global circulating microbiome profile of GC patients differs from that of the control group.
2. GC patients' blood microbiome are less diverse as controls.
3. *Prevotella*, *Corynebacterium*, *Corynebacteriaceae*, *Prevotellaceae*, *Moraxellaceae*, and *Enterobacteriaceae* could presumably be used as clinical biomarkers of GC.