

Probiotici e disturbi funzionali

Ruggiero Francavilla, MD PhD

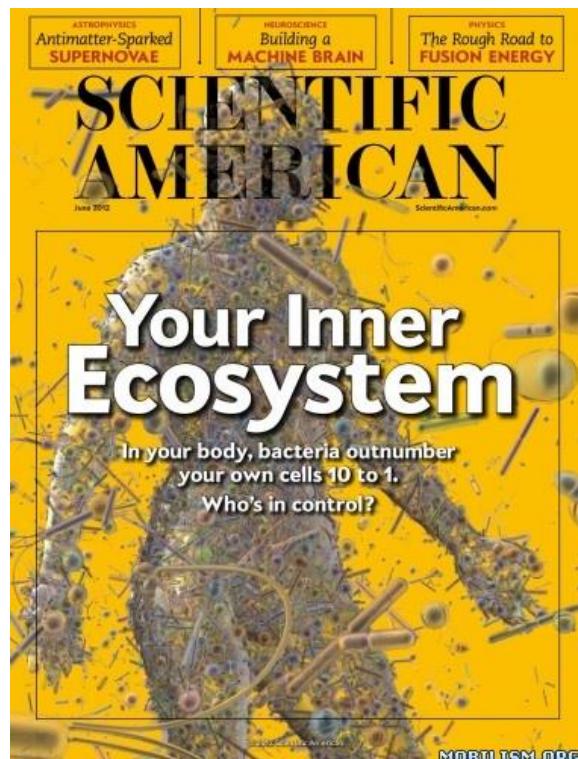
Consultant in Pediatric Gastroenterology & Hepatology
Senior Lecturer in Pediatrics
Dpt Biomedicina Età Bioevolutiva
University of Bari - Italy



Il 2012 anno del microbiota



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L'albero della vita



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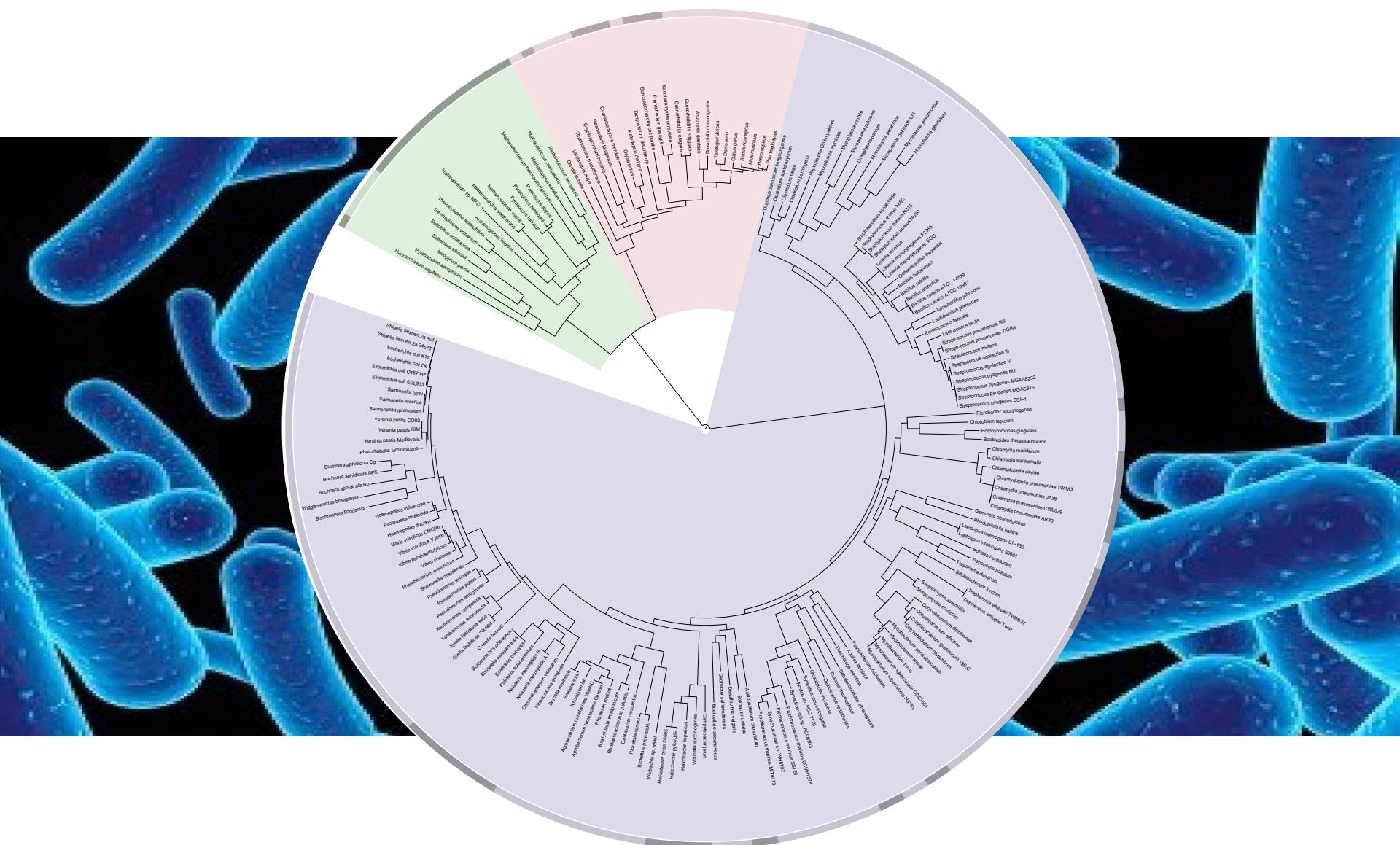


Noi siamo qui

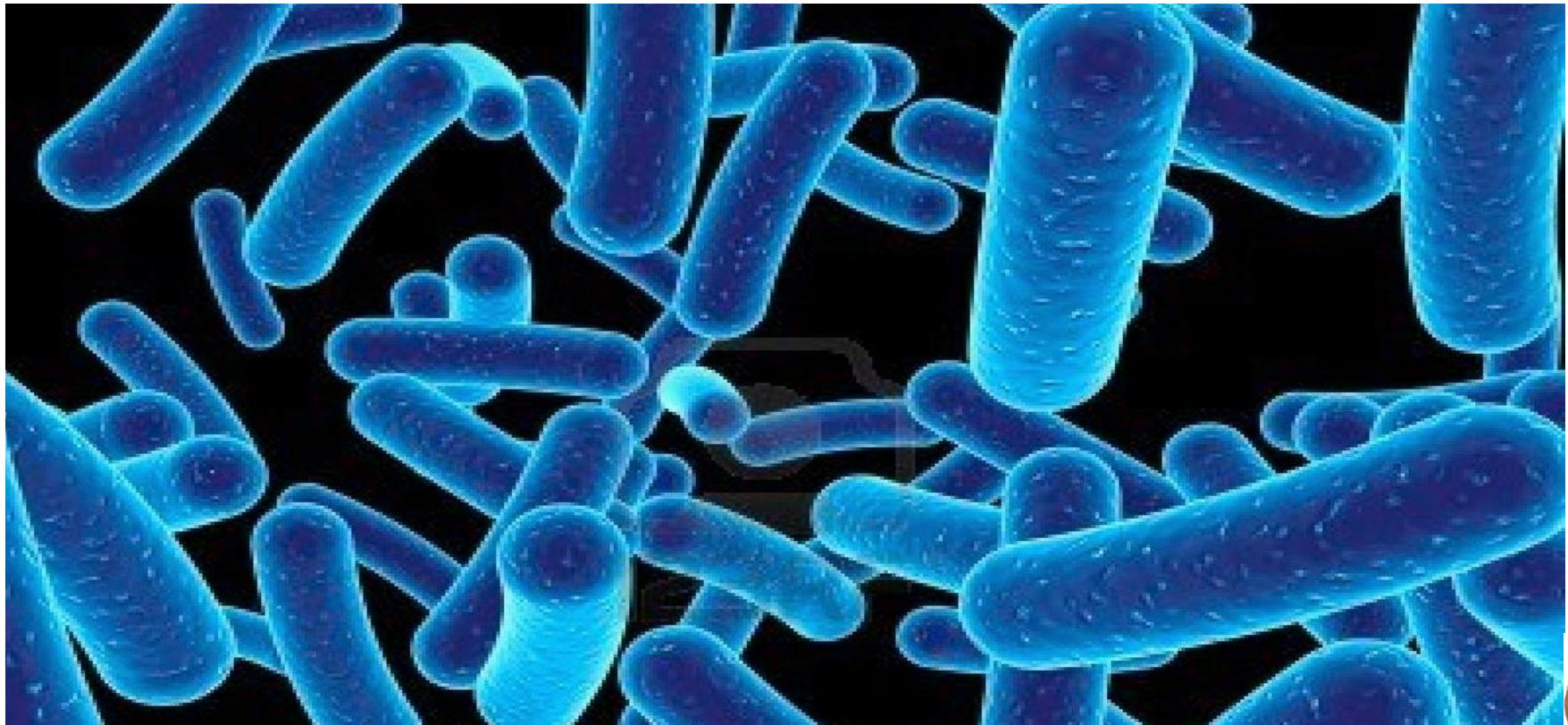
L'albero della vita



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I batteri sono i padroni del mondo



.....
|
Procaroti
4 miliardi /anni



Uomo
8 milioni/anni

Sono da un tempo ca 400 maggiore rispetto all'uomo

Nature. 2006;441:714

Noi ed i batteri

Se i **4 miliardi** di anni della terra equivalessero a **24 ore** l'uomo apparirebbe alle **23:59:30** ed il "sapiens" gli **ultimi 5 secondi**



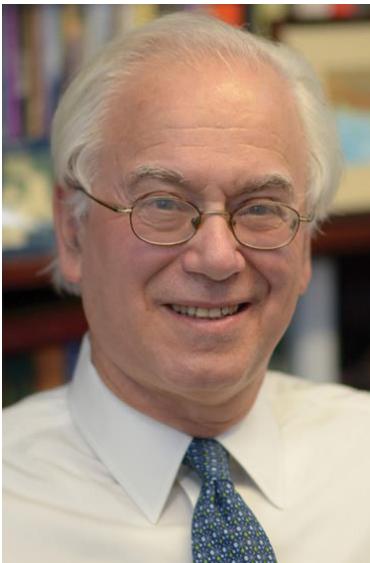


Chi siamo?

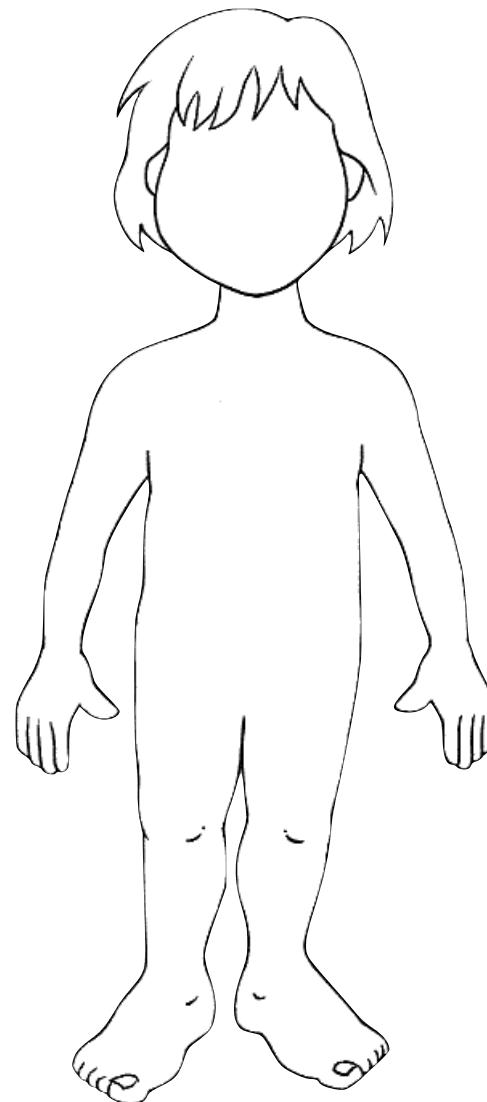
Who are we?

Indigenous microbes and the ecology of human diseases

Martin J. Blaser



Martin J. Blaser is the Frederick H. King Professor of Internal Medicine, the Chair of the Department of Medicine and a Professor of Microbiology at New York University School of Medicine, New York, USA.
E-mail: martin.blaser@med.nyu.edu



Blaser MJ. EMBO Rep. 2006;7:956

Chi siamo?

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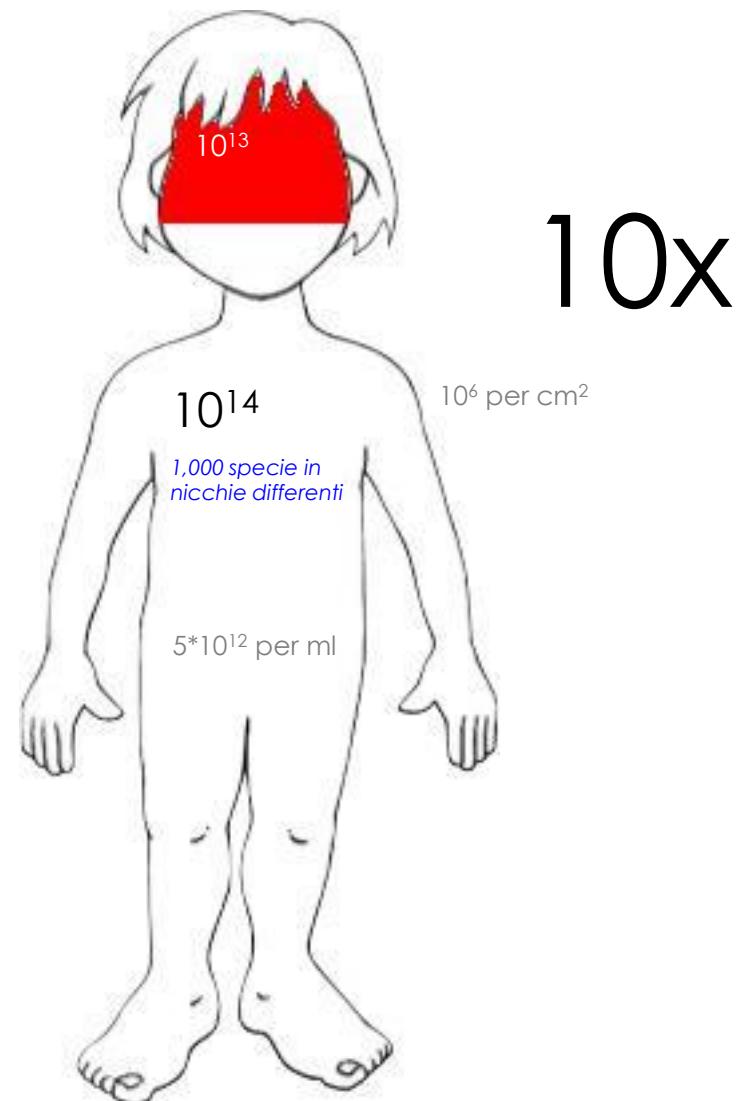
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E-mail: martin.blaser@med.nyu.edu

Microbiota:

Assemblaggio massivo di batteri concorrenti e cooperanti.



Blaser MJ. EMBO Rep. 2006;7:956



Chi siamo?

Who are we?

Indigenous microbes and the ecology of human diseases

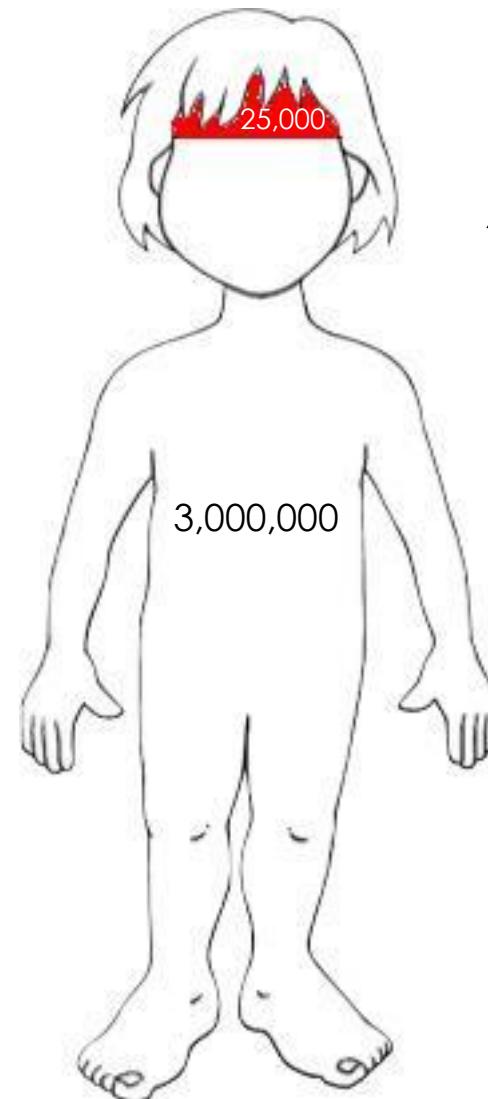
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E-mail: martin.blaser@med.nyu.edu

Microbioma:

Insieme di geni microbici.



100x

Blaser MJ. EMBO Rep. 2006;7:956

Super-organismo



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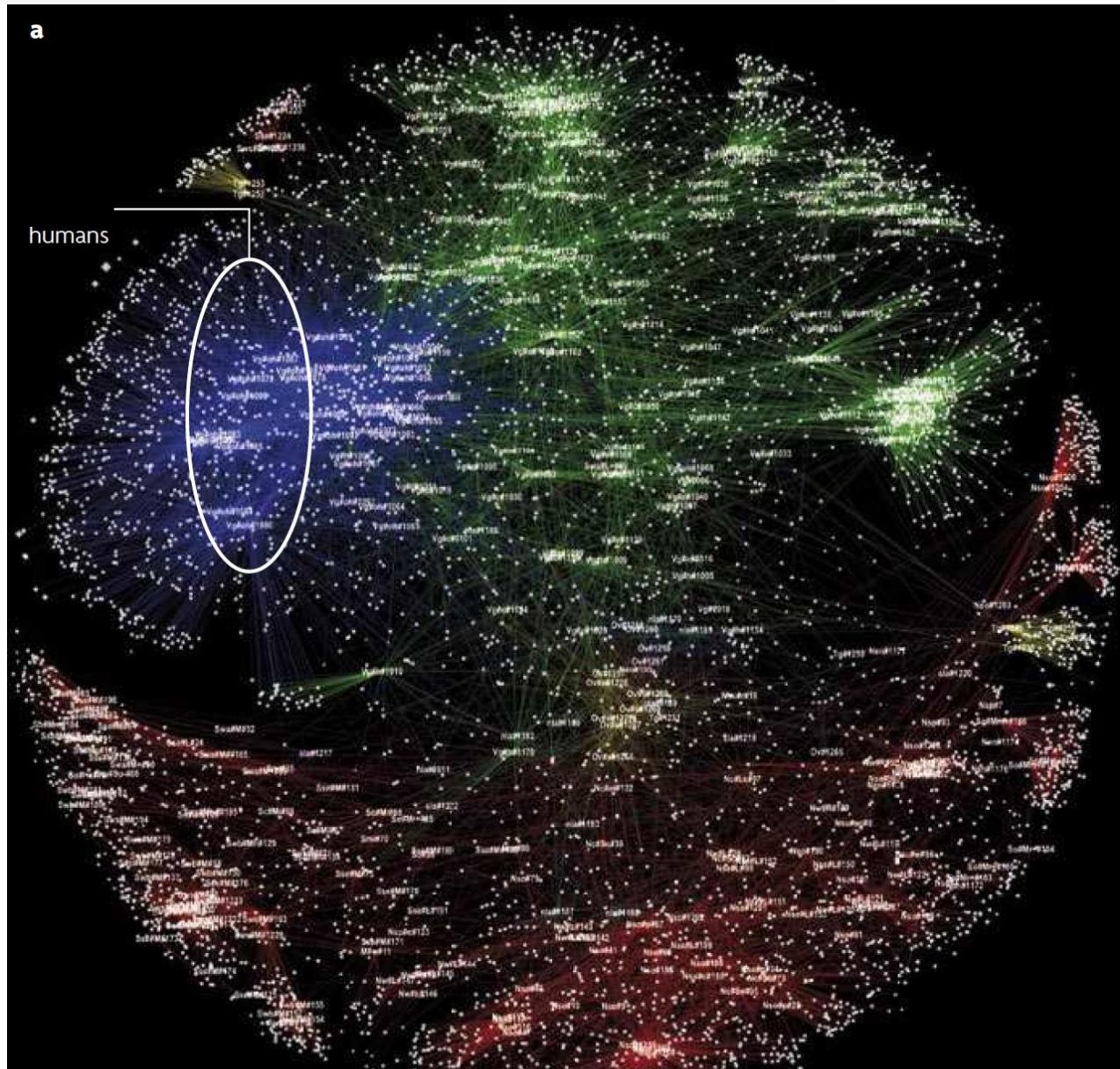


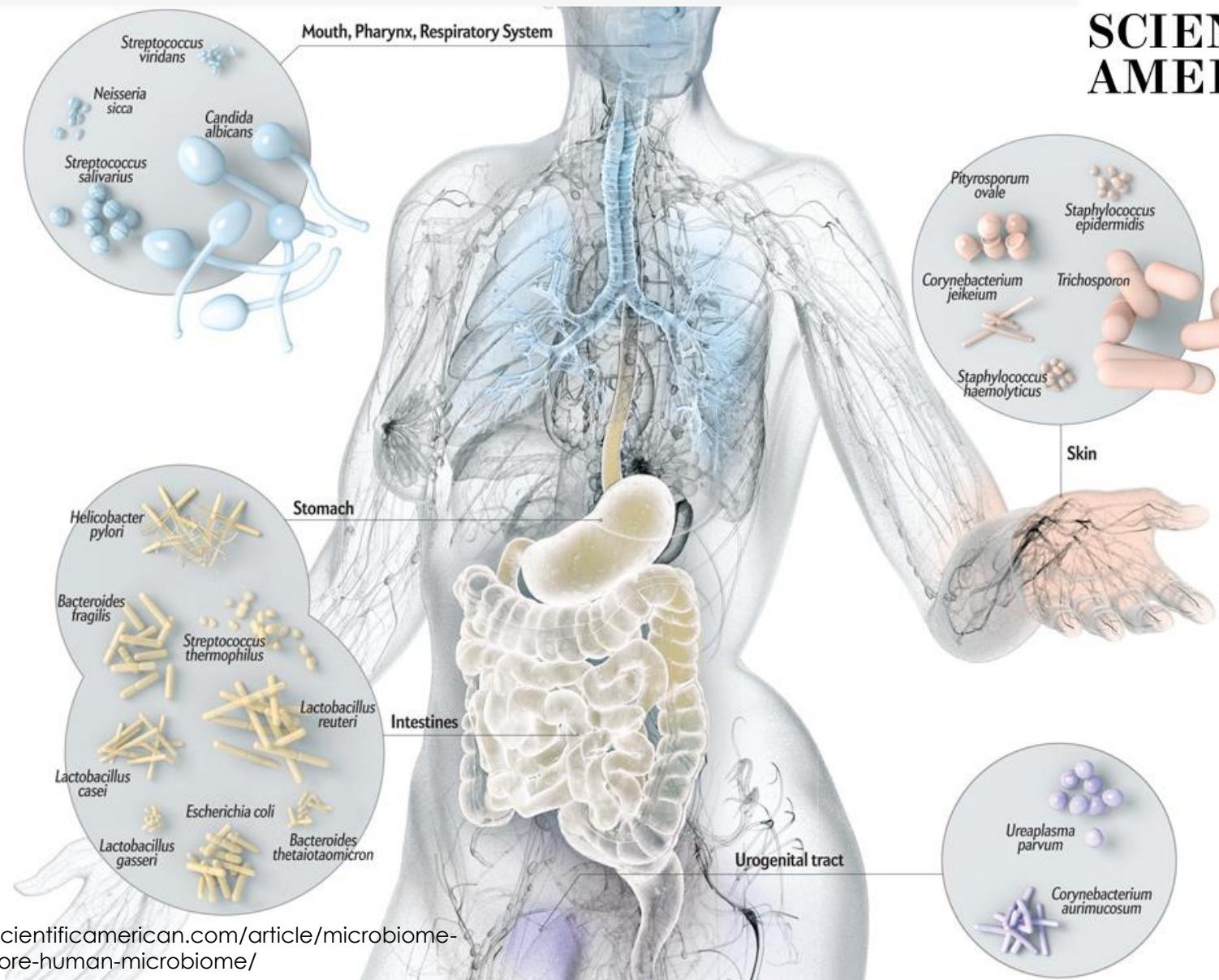
"You may be born 100% human
but you will die 90% microbial"

Science 2000;288:287

Ingresso su invito

- Free-living ●
- Vertebrate gut ●
- Human gut ●
- Termite gut ●
- Invertebrates from non-saline environments ●
- Saline invertebrate ●
- Human skin ●
- Human vulva ●
- Human mouth ●
- Plant (tightly adhered to plant root) ●
- Human vagina ●
- Human ear ●





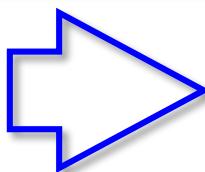
Ad ognuno il suo!

<http://www.scientificamerican.com/article/microbiome-graphic-explore-human-microbiome/>

Pressione evolutiva bidirezionale

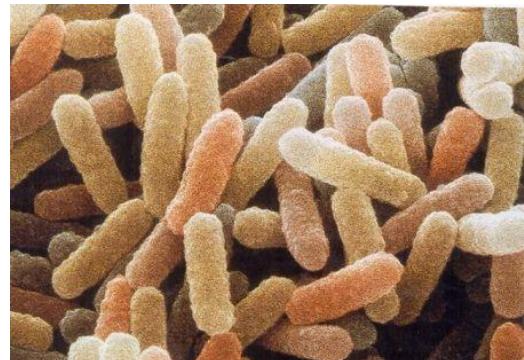
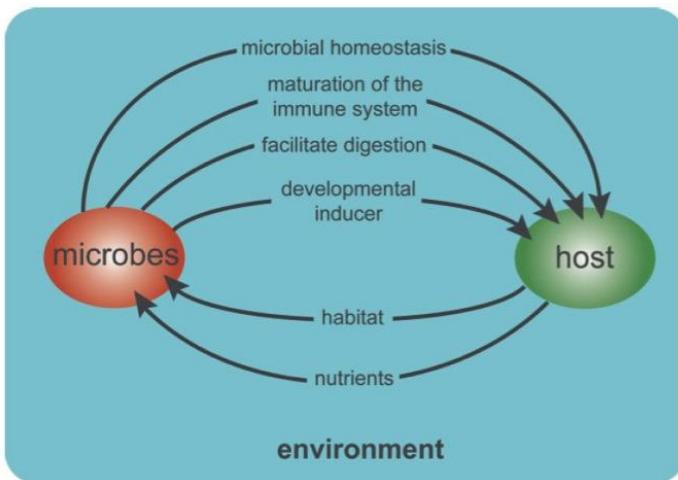
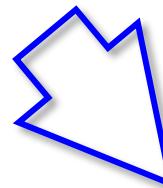


Habitat

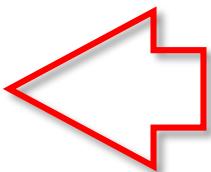


Food

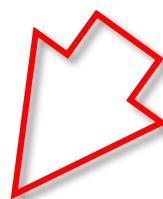
Stable environment



Immune-modulation



Metabolic activities



Ann Rev Gen 2008;42:165



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Il lattante del koala



<http://www.sydneycloseup.com/baby-koala.html>

Il parto vaginale

Gut microbiota biomodulators: When the stork comes by the scalpel

Vito Leonardo Miniello *, Angela Colasanto, Fernanda Cristofori, Lucia Diaferio, Laura Ficele,
Valentina Santoiemma, Ruggiero Francavilla

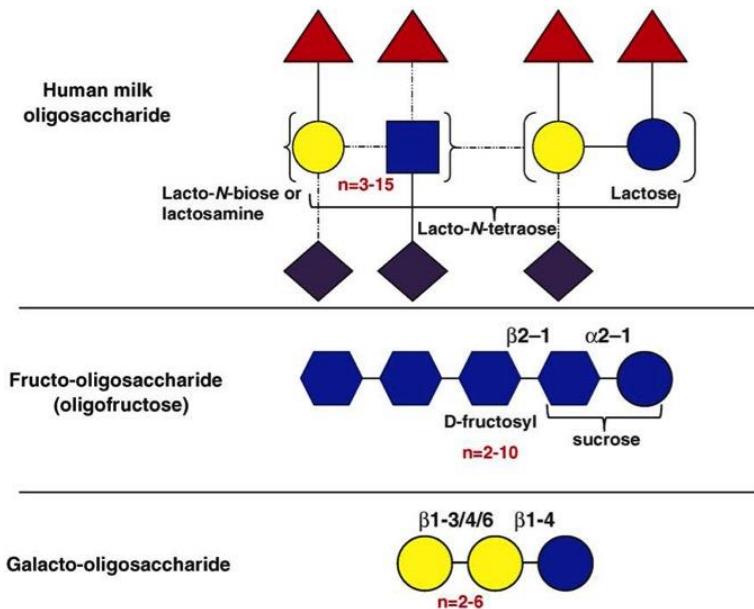
La madre con il parto vaginale
tramette al bambino il microbiota
ideale selezionato in milioni di anni
di evoluzione e meglio compatibile
con il suo patrimonio genetico



Accoglienza su.. invito

Nursing our microbiota: molecular linkages between bifidobacteria and milk oligosaccharides

David A. Sela^{1,2,3} and David A. Mills^{2,3,4}



Migliaia di possibili combinazioni ma solo 200 il BM che sono quelle meglio utilizzabili dal MI del lattante mentre per altri batteri si comportano da substrati che possono legarli ed allontanarli dall'intestino

(selezione attiva e passiva)

La presenza di oligo-frutto saccaridi nel latte materno non hanno un elevato valore nutrizionale per il lattante ma supportano la crescita di un microbiota salutare per il bambino.

Allattamento materno nasce 160 MA fa

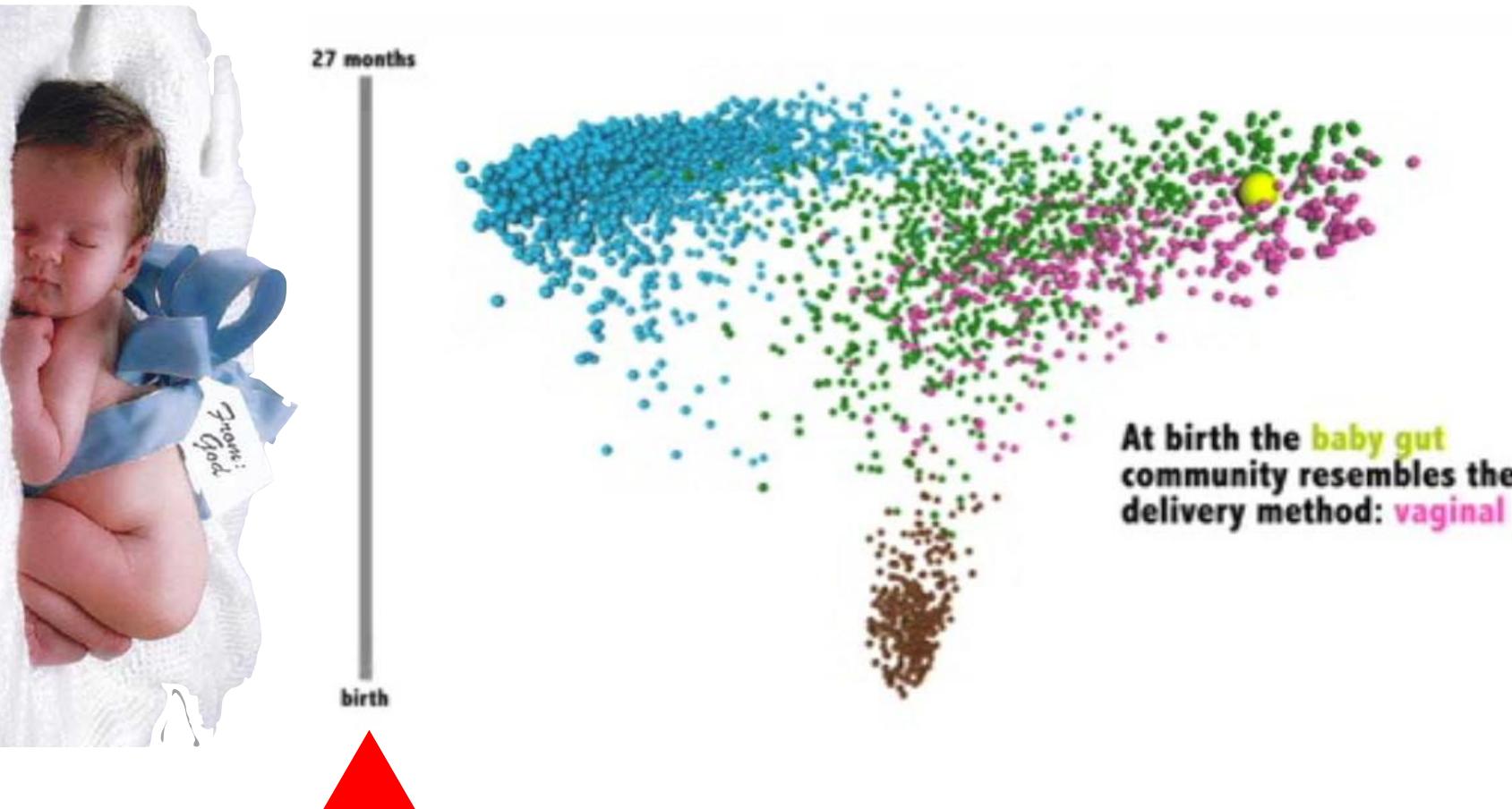
FA, IgAs, lattoferrina, lisozoma, modulatori immunitari, G(F)OS



Colonizzazione

Neonatologi e pediatri hanno in mano il futuro del nostro microbioma

Bocca
Cute
Vagina
Feci





Ruolo del pediatra



La formazione del microbiota intestinale si
consolida nei primi tre anni di vita

Equilibrio olobionte – ologenoma - ambiente



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genoma



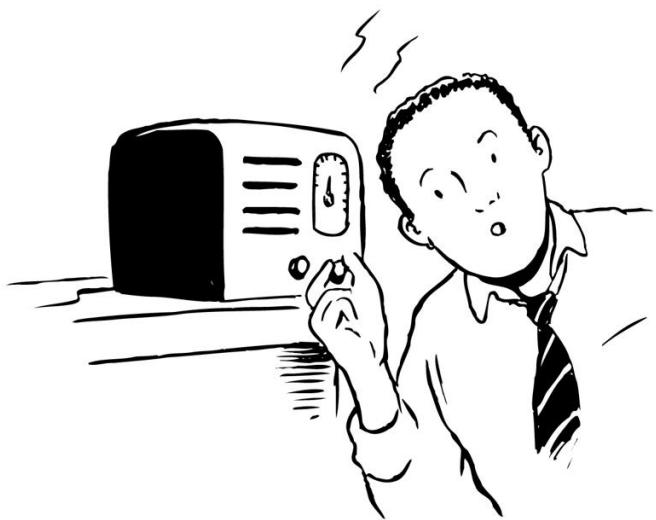
microbiota



ambiente

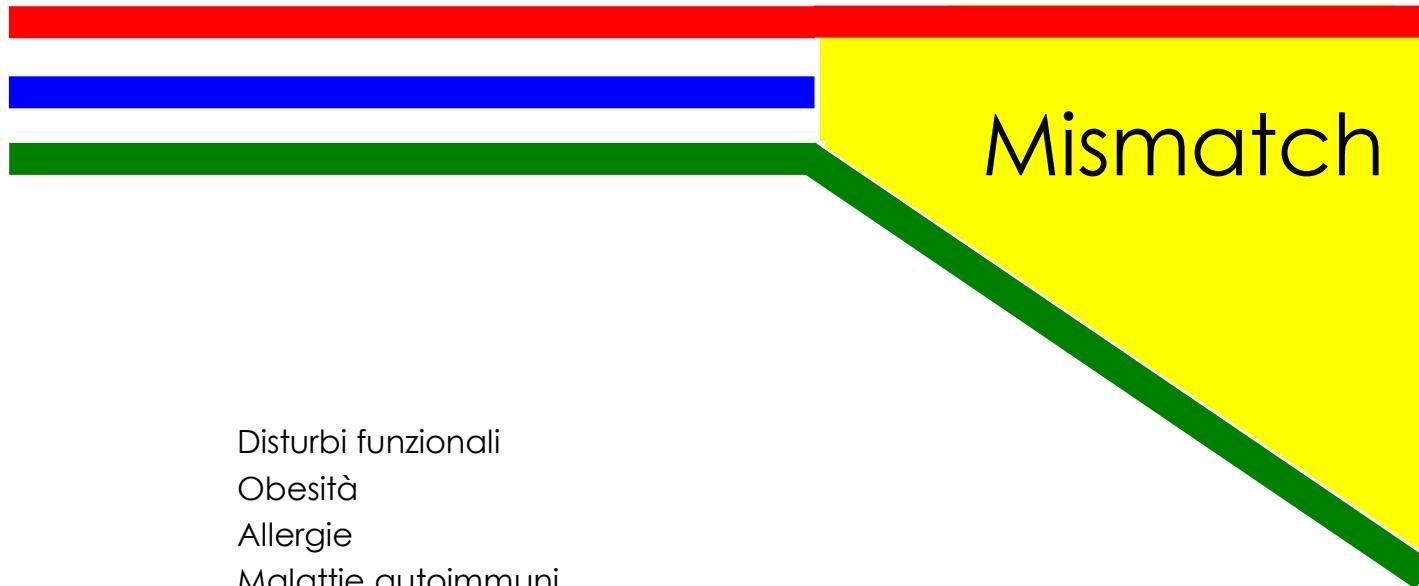


EUBIOSI



Nat Rev Microbiol. 2009;7:887

genoma
microbiota
ambiente



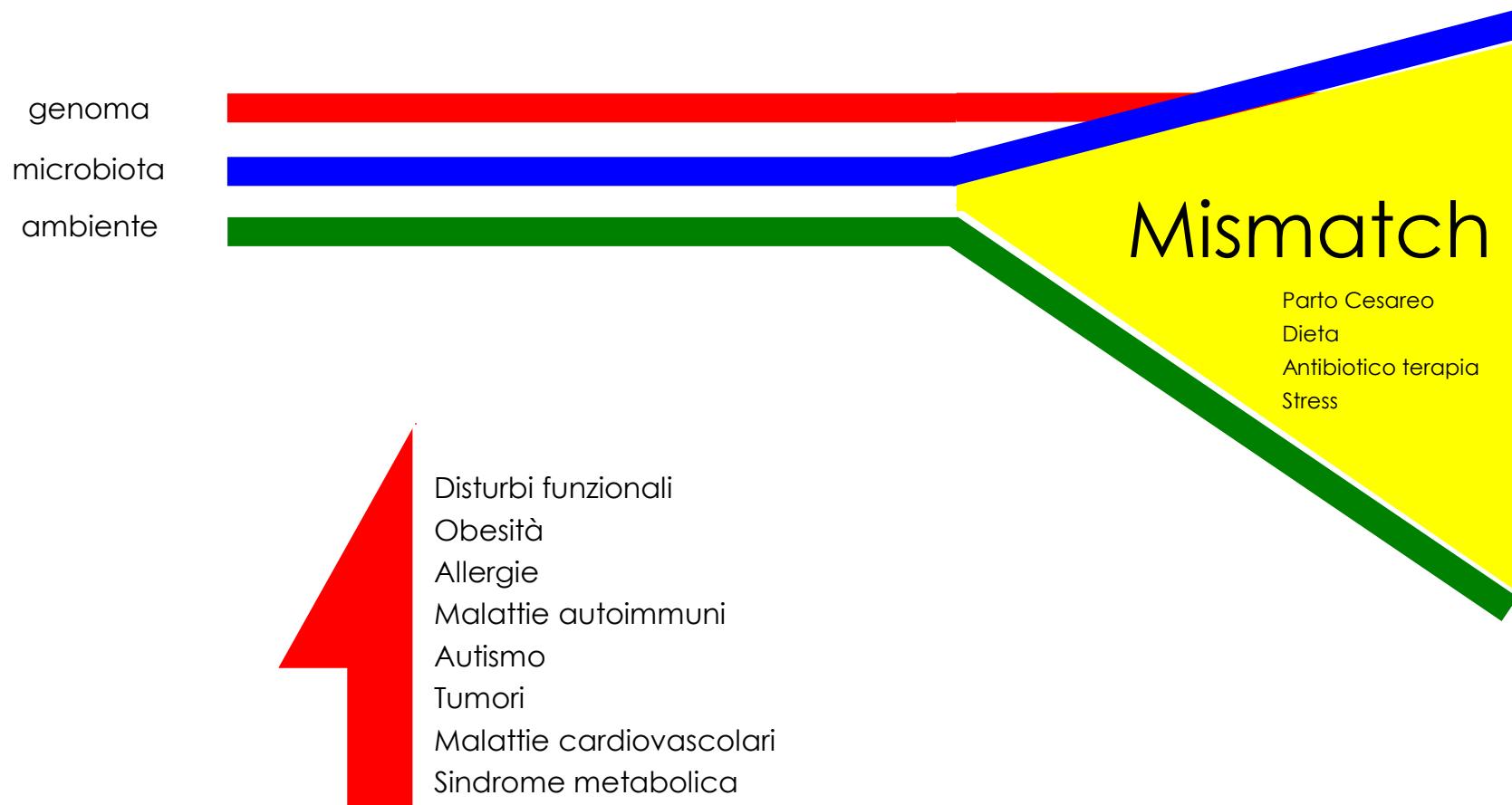
Disturbi funzionali
Obesità
Allergie
Malattie autoimmuni
Autismo
Tumori
Malattie cardiovascolari
Sindrome metabolica

Nat Rev Microbiol. 2009;7:887

Teoria del Disappearing microbiota

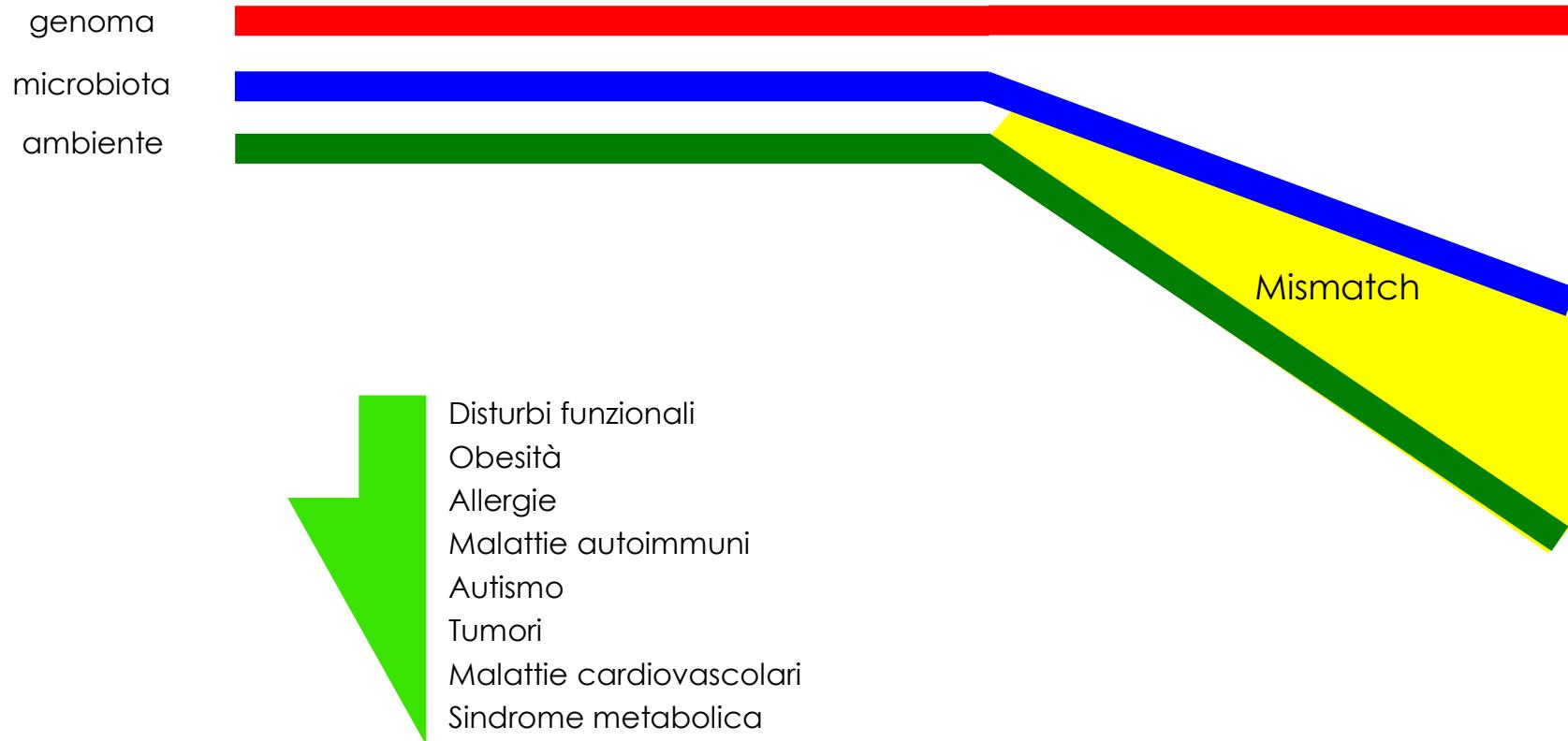


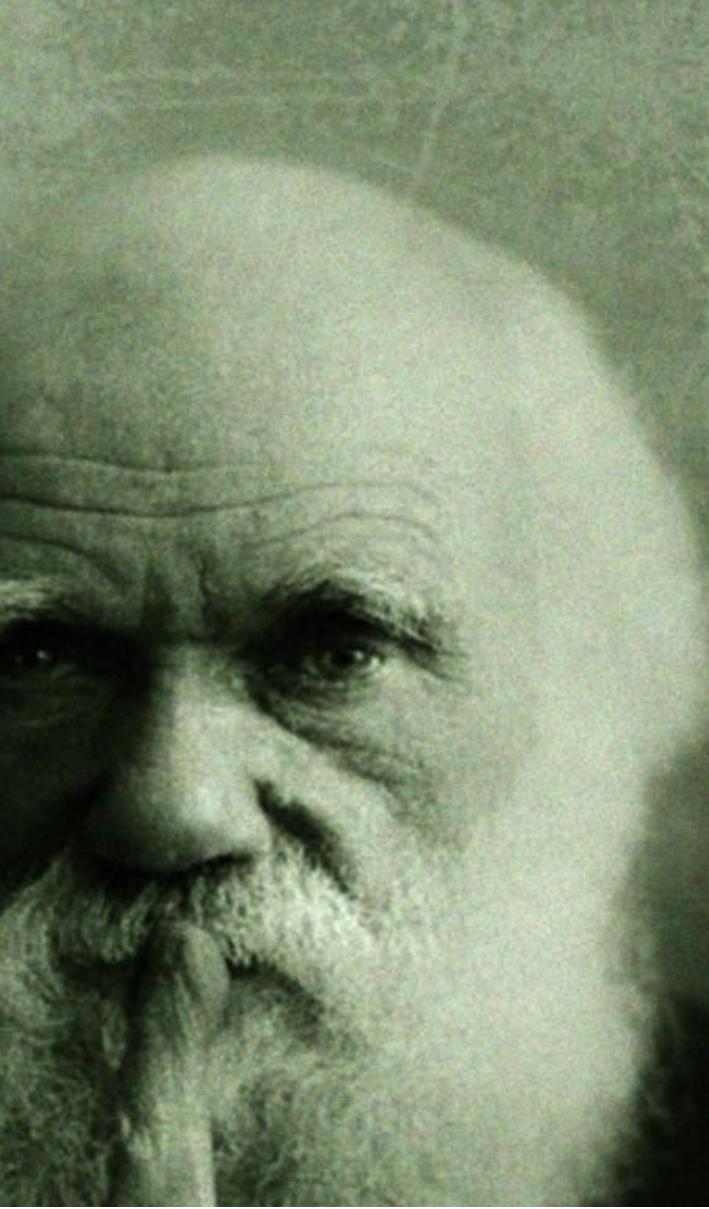
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Nat Rev Microbiol. 2009;7:887

Teoria del Mismatch





“It is not the strongest of the species that survives, nor the most intelligent, but the one most responsive to *change*.”

-Charles Darwin, 1809



STADIUM ARCADIUM Video games as spectator sport

NewScientist

WEEKLY 12 January 2013 No 2899 Australia \$9.50 (inc GST) New Zealand NZ\$8.50 (inc GST) Print Post Approved 230009/00015

WIN A 3D PRINTED SKULL SEE p17

CREATOR OF SPECIES

HOW WHAT LIVES ON US AND IN US DRIVES EVOLUTION

Interview:
Jared Diamond

The beauty and brutality of tribal living

THAT FREAKY FEELING
Why androids make us so uneasy

BATTLE OF THE BOTTLE
The global war for our hearts and livers

ALIEN AURORAS
Casting strange new light on other worlds

News, ideas and innovation - www.newscientist.com

A barcode and a ISBN number (9 771032123098) are visible at the bottom right.

THE OTHER YOU



The microbes living inside us don't just play a vital role in our health - they also shape our evolution, says Carrie Arnold

L'olobionte con il suo ologenoma partecipa come una sola cosa al processo evolutivo



New Scientist, Gennaio 2013

Trasferimento di “app”

Transfer of carbohydrate-active enzymes from marine bacteria to Japanese gut microbiota

Jan-Hendrik Hehemann^{1,2†}, Gaëlle Correc^{1,2}, Tristan Barbeyron^{1,2}, William Helbert^{1,2}, Mirjam Czjzek^{1,2}
& Gurvan Michel^{1,2}



Il porfitano è un polisaccaride presente nelle alghe e comunemente digerito dai pesci.

L'uomo manca di tale attività enzimatica, ma i Giapponesi lo hanno in dotazione nel loro microbiota per trasferimento di materiale genetico dal pesce



Quali probiotici utilizzare



Come scegliere un probiotico

Come modulare



Milioni anni di evoluzione non si sostituiscono con il “primo venuto”





Efficacia provata

(Metanalisi, Cochrane, RCT)

L. Reuteri e disordini funzionali del lattante

Childhood Functional Gastrointestinal Disorders: Neonate/Toddler

PAUL E. HYMAN,* PETER J. MILLA,† MARC A. BENNINGA,§ GEOFF P. DAVIDSON,||
DAVID F. FLEISHER,¶ and JAN TAMINIAU§

*Pediatric Gastroenterology, University of Kansas Medical Center, Kansas City, Kansas; †Paediatric Gastroenterology, Great Ormond Hospital for Children, London, England; §Department of Pediatrics, Emma Kinderziekenhuis ACM, Amsterdam, The Netherlands;
¶Gastroenterology Department, Women's and Children's Hospital, North Adelaide, South Australia, Australia; and ||Department of Child Health, University of Missouri School of Medicine, Columbia, Missouri

FGD sono quadri clinici (correlati all'età) caratterizzati da sintomi cronici o ricorrenti non associati a patologia organica, biochimica o strutturale.



Table 1. Functional Gastrointestinal Disorders

-
- G. Functional disorders: neonates and toddlers
 - G1. Infant regurgitation
 - G2. Infant rumination syndrome
 - G3. Cyclic vomiting syndrome
 - G4. Infant colic
 - G5. Functional diarrhea
 - G6. Infant dyschezia
 - G7. Functional constipation
-

Disbiosi e probiotici

Lactobacillus reuteri DSM 17938 in Infantile Colic: A Randomized, Double-Blind, Placebo-Controlled Trial

AUTHORS: Francesco Savino, MD, PhD,^a Lisa Cordisco, PhD,^b Valentina Tarasco, MD,^a Elisabetta Palumeri, MD,^a Roberto Calabrese, BSc,^a Roberto Oggero, MD,^a Stefan Roos, PhD,^c and Diego Matteuzzi, PhD^b

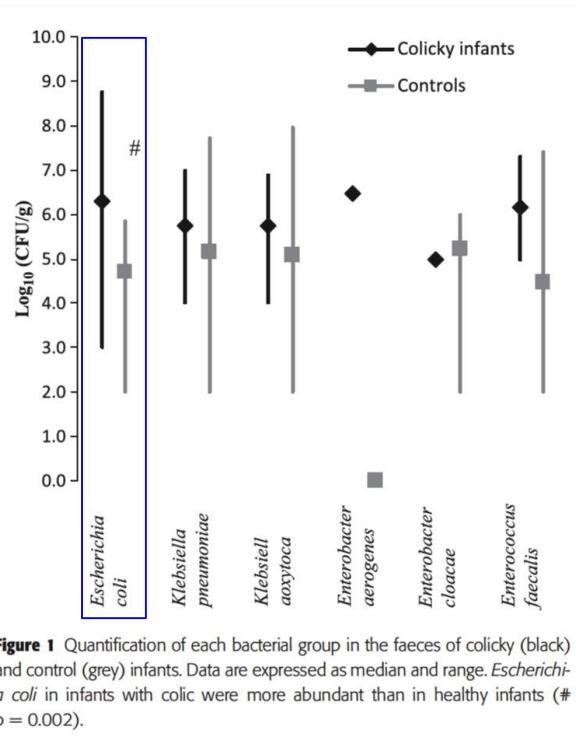
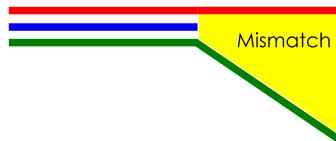
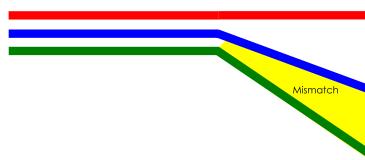


Figure 1 Quantification of each bacterial group in the faeces of colicky (black) and control (grey) infants. Data are expressed as median and range. *Escherichia coli* in infants with colic were more abundant than in healthy infants (# $p = 0.002$).



TABLE 4 Bacterial Species per Gram of Feces and Ammonia Concentration Variation From 21 to 0 Day in the Study Groups

Bacteria/variable, species	Difference Between Days 21 and Day 0, Median (IQR)		<i>P</i>
	Placebo	<i>L. reuteri</i>	
per g			
<i>E. coli</i>	$4.30 \times 10^5 (4.35 \times 10^7)$	$-6.55 \times 10^7 (4.87 \times 10^8)$.001
<i>C. butyricum</i>	$-1.00 \times 10^0 (5.91 \times 10^6)$	$0.00 \times 10^0 (1.52 \times 10^7)$.458
<i>Lactobacillus</i>	$0.00 \times 10^0 (3.27 \times 10^4)$	$4.07 \times 10^5 (4.98 \times 10^6)$.002
<i>Bifidobacteria</i>	$0.00 \times 10^0 (3.09 \times 10^9)$	$2.19 \times 10^8 (2.52 \times 10^9)$.907
Ammonia, mg/L	0.33 (0.81)	-1.10 (1.60)	<.001



Acta Paed. 2009;98:1582
Pediatrics 2010;126:e526

I trial clinici

Lactobacillus reuteri DSM 17938 in Infantile Colic: A Randomized, Double-Blind, Placebo-Controlled Trial

AUTHORS: Francesco Savino, MD, PhD,^a Lisa Cordisco, PhD,^b Valentina Tarasco, MD,^a Elisabetta Palumeri, MD,^a Roberto Calabrese, BSc,^a Roberto Oggero, MD,^a Stefan Roos, PhD,^c and Diego Matteuzzi, PhD^b

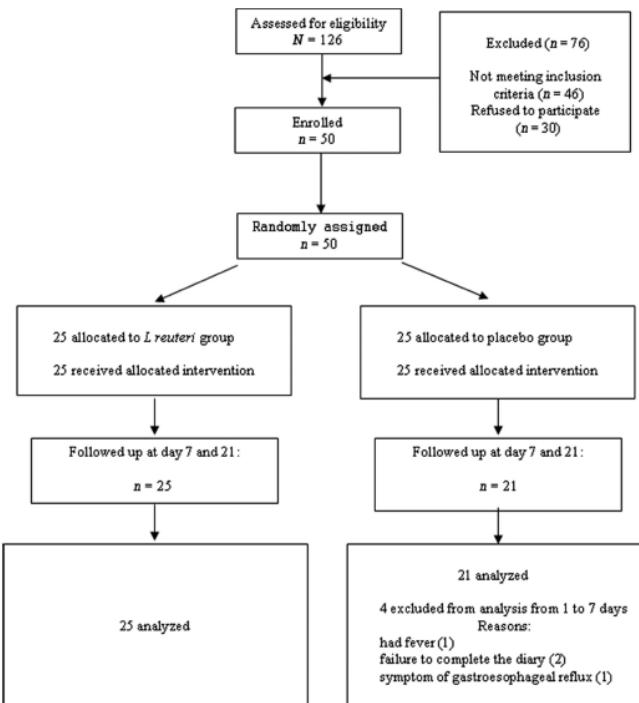
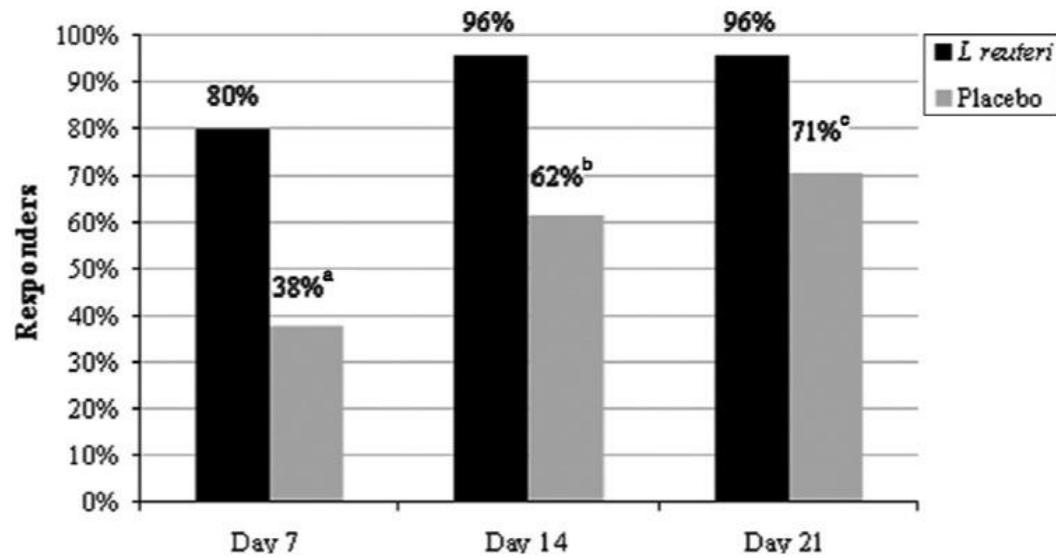
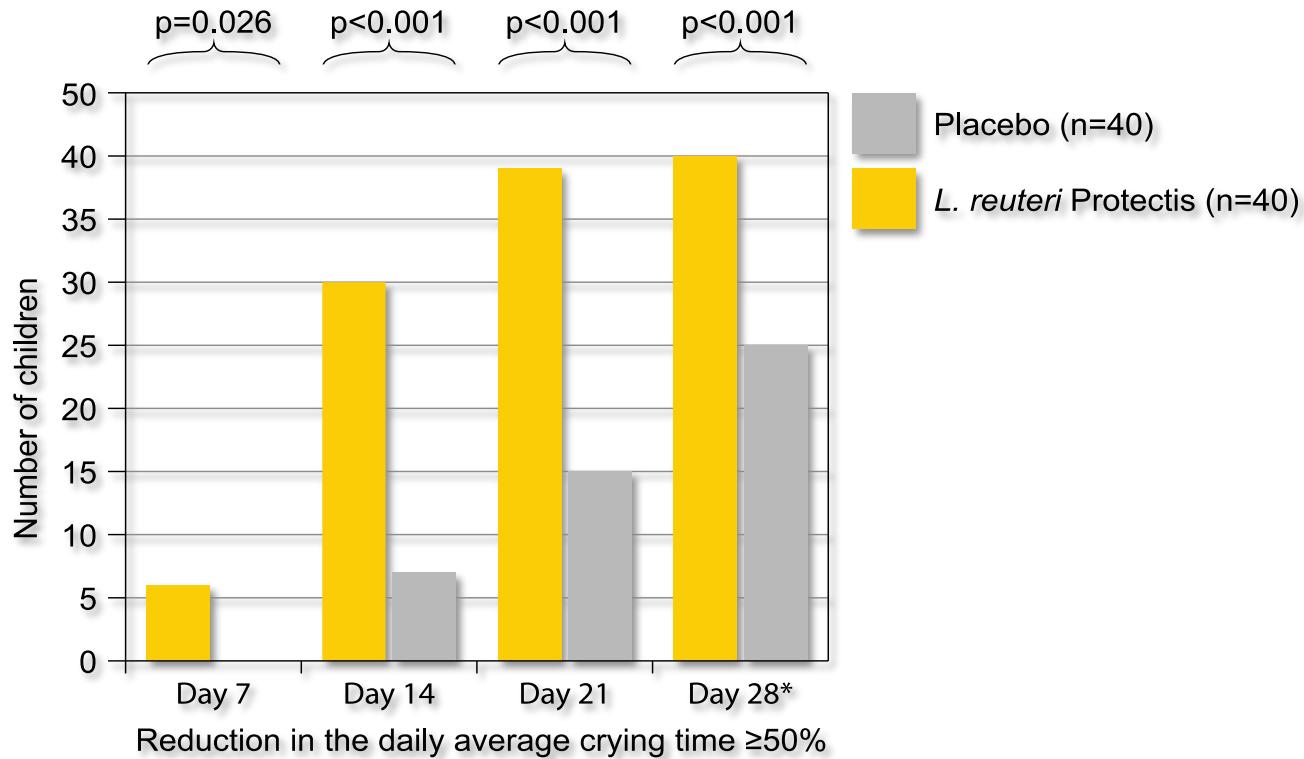


FIGURE 1
Patient enrollment and study progress.



Lactobacillus reuteri DSM 17938 for the Management of Infantile Colic in Breastfed Infants: A Randomized, Double-Blind, Placebo-Controlled Trial

Hania Szajewska, MD¹, Ewa Gyrzuk, MD², and Andrea Horvath, MD¹



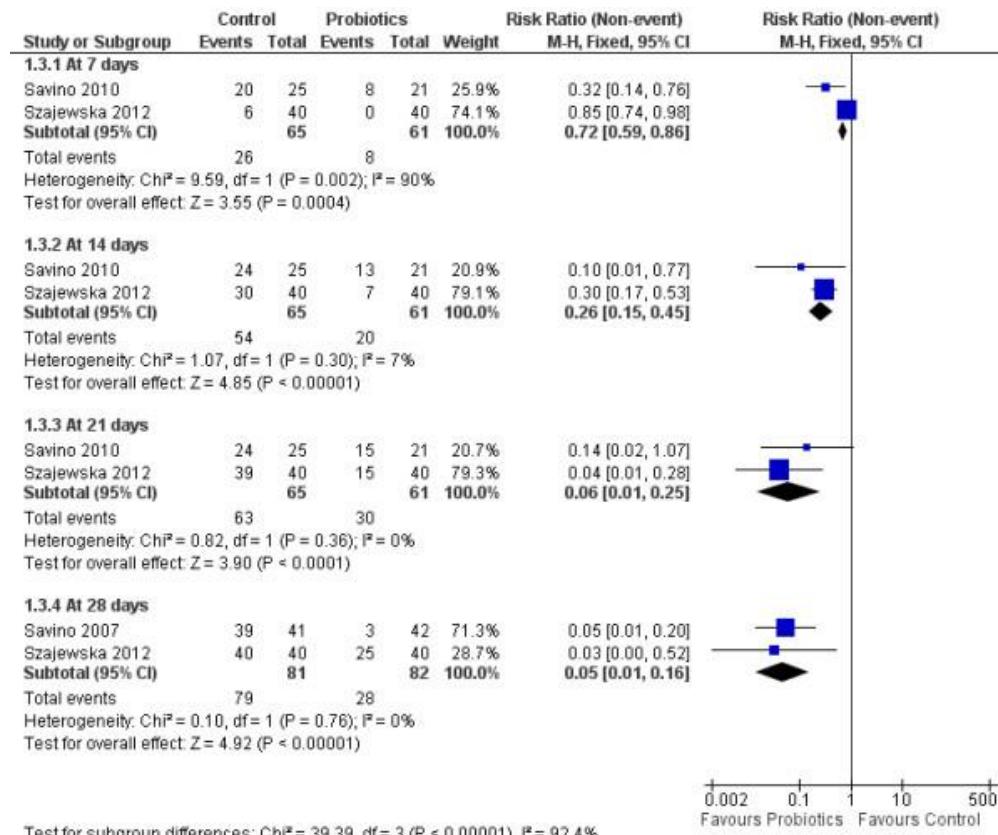
Metanalisi

RESEARCH ARTICLE

Open Access

Probiotics for infantile colic: a systematic review

Jasim Anabrees^{1*}, Flavia Indrio², Bosco Paes³ and Khalid AlFaleh⁴



Metanalisi

Treating infant colic with the probiotic *Lactobacillus reuteri*: double blind, placebo controlled randomised trial

Valerie Sung paediatrician^{1,2,3}, Harriet Hiscock associate professor^{1,2,3}, Mimi L K Tang professor^{1,2,3}, Fiona K Mensah statistician^{1,2,3}, Monica L Nation honours student^{2,3}, Catherine Satzke research fellow^{2,3}, Ralf G Heine paediatric gastroenterologist/allergist^{1,2,3}, Amanda Stock paediatrician¹, Ronald G Barr professor⁴, Melissa Wake professor^{1,2,3}

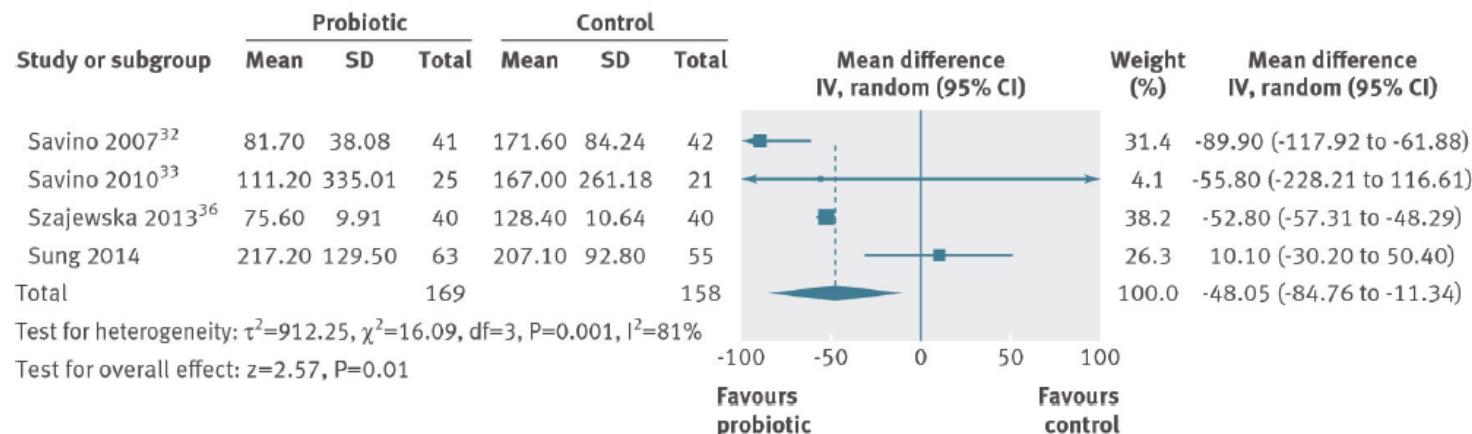
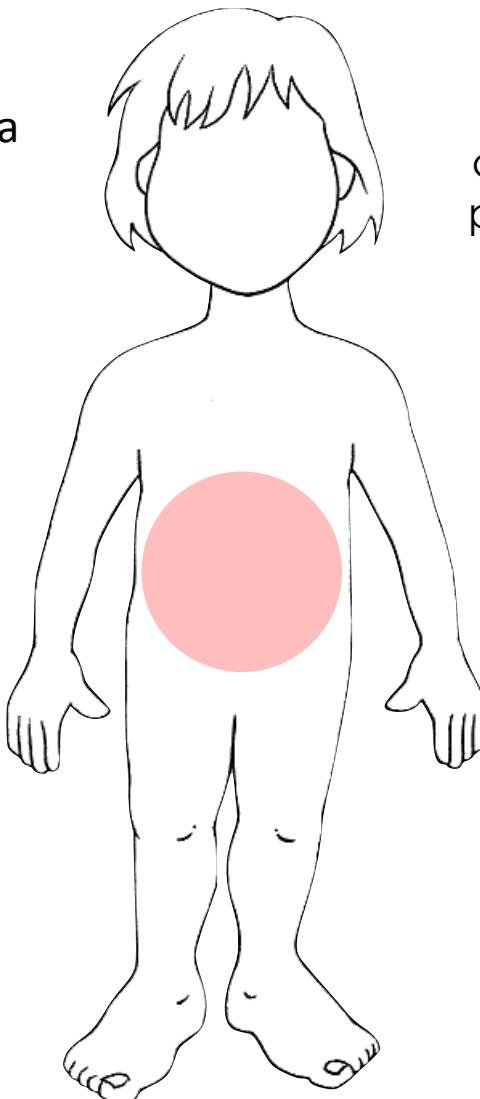


Fig 4 Meta-analysis of previous randomised controlled trials of probiotics for management of infant colic with addition of results from this study

FGD in pediatria

FGD sono quadri clinici (correlati all'età) caratterizzati da sintomi cronici o ricorrenti non associati a patologia organica, biochimica o strutturale.



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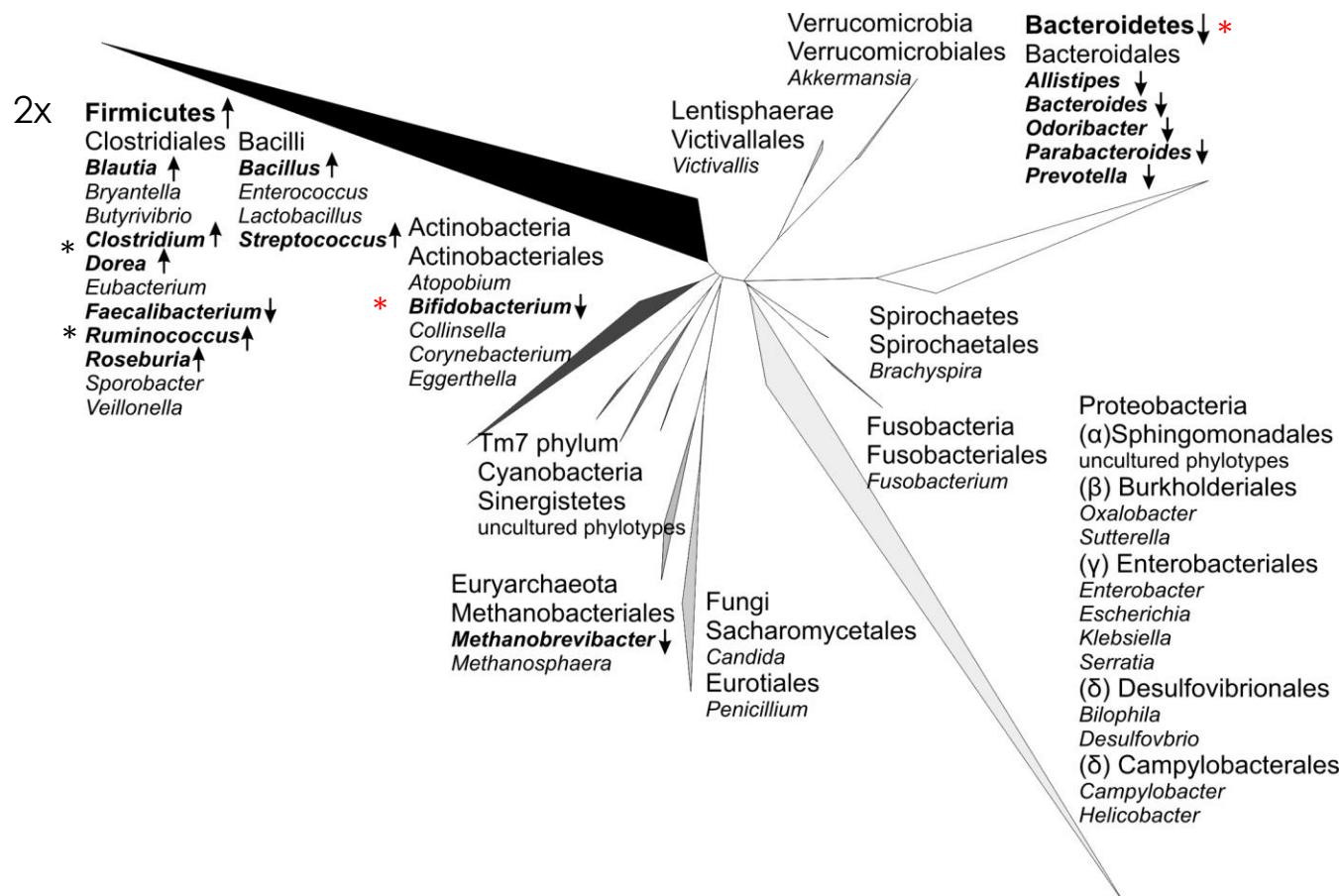
Table 1. The Functional Gastrointestinal Disorders

- H. Functional disorders: children and adolescents
 - H1. Vomiting and aerophagia
 - H1a. Adolescent rumination syndrome
 - H1b. Cyclic vomiting syndrome
 - H1c. Aerophagia
 - H2. Abdominal pain-related FGIDs**
 - H2a. Functional dyspepsia
 - H2b. Irritable bowel syndrome**
 - H2c. Abdominal migraine
 - H2d. Childhood functional abdominal pain**
 - H2d1. Childhood functional abdominal pain syndrome
 - H3. Constipation and incontinence
 - H3a. Functional constipation
 - H3b. Nonretentive fecal incontinence

Microbiota in IBS

Global and Deep Molecular Analysis of Microbiota Signatures in Fecal Samples From Patients With Irritable Bowel Syndrome

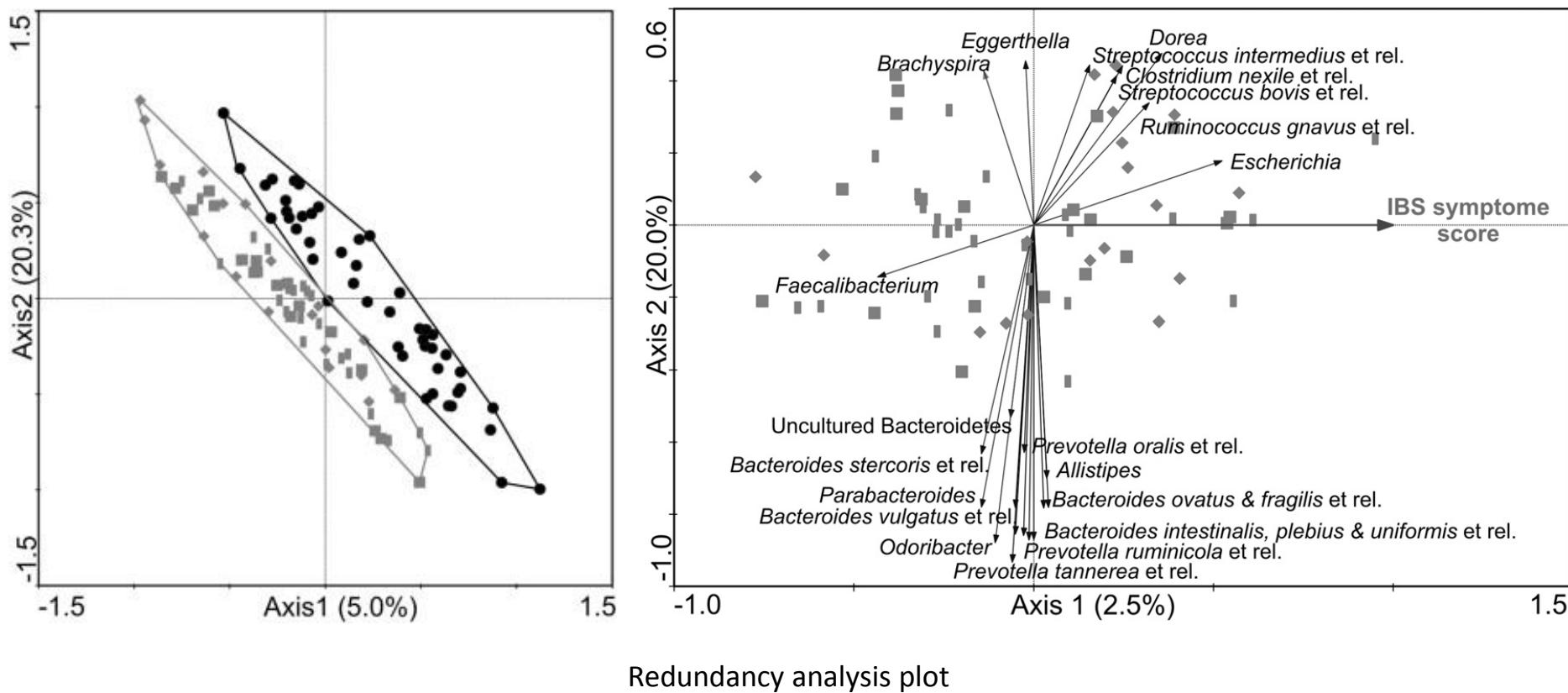
MIRJANA RAJILIĆ-STOJANOVIĆ,^{*‡} ELENA BIAGI,^{*} HANS G.H.J. HEILIG,^{*} KAJSA KAJANDER,[§] RIINA A. KEKKONEN,[§]
SEBASTIAN TIMS,^{*} and WILLEM M. DE VOS^{*||}



Microbiota in IBS

Global and Deep Molecular Analysis of Microbiota Signatures in Fecal Samples From Patients With Irritable Bowel Syndrome

MIRJANA RAJILIĆ-STOJANOVIĆ,*‡ ELENA BIAGI,* HANS G.H.J. HEILIG,* KAJSA KAJANDER,§ RIINA A. KEKKONEN,§ SEBASTIAN TIMS,* and WILLEM M. DE VOS*,||



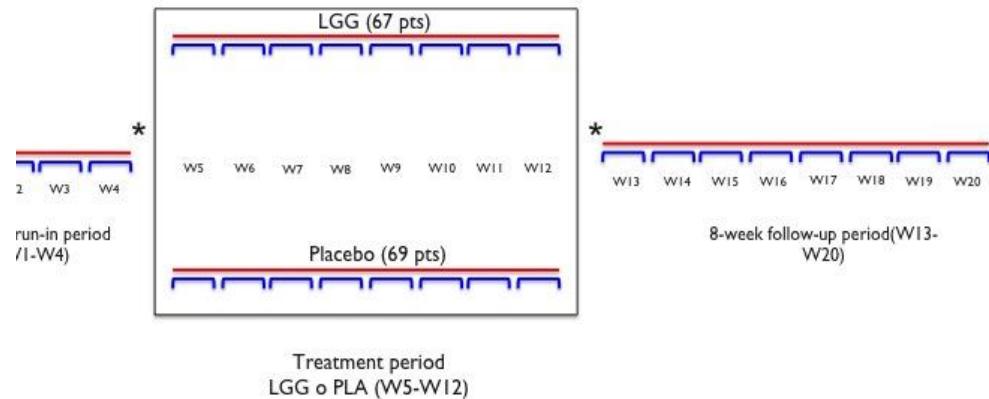
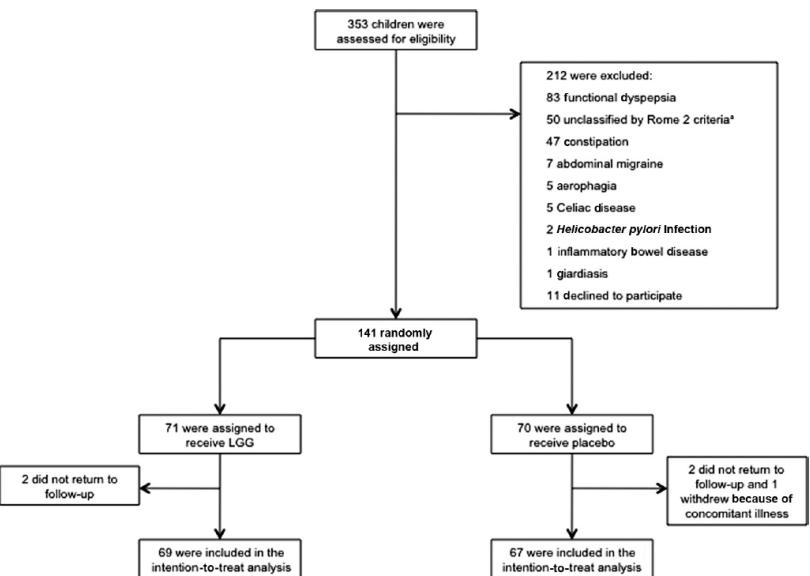
Redundancy analysis plot

Gastroenterology. 2011;141:1555

LGG e DAR pediatrico

A Randomized Controlled Trial of *Lactobacillus GG* in Children With Functional Abdominal Pain

AUTHORS: Ruggiero Francavilla, MD, PhD,^a Vito Minnello, MD,^a Anna Maria Magistà, MD,^a Angela De Canio, MD,^a Nunzia Bucci, MD,^a Francesca Gagliardi, PhD,^a Elena Lionetti, MD,^b Stefania Castellaneta, MD,^c Lorenzo Polimeno, PhD,^d Lucia Peccarisi, MD,^e Flavia Indrio, MD,^a and Luciano Cavallo, MD^a

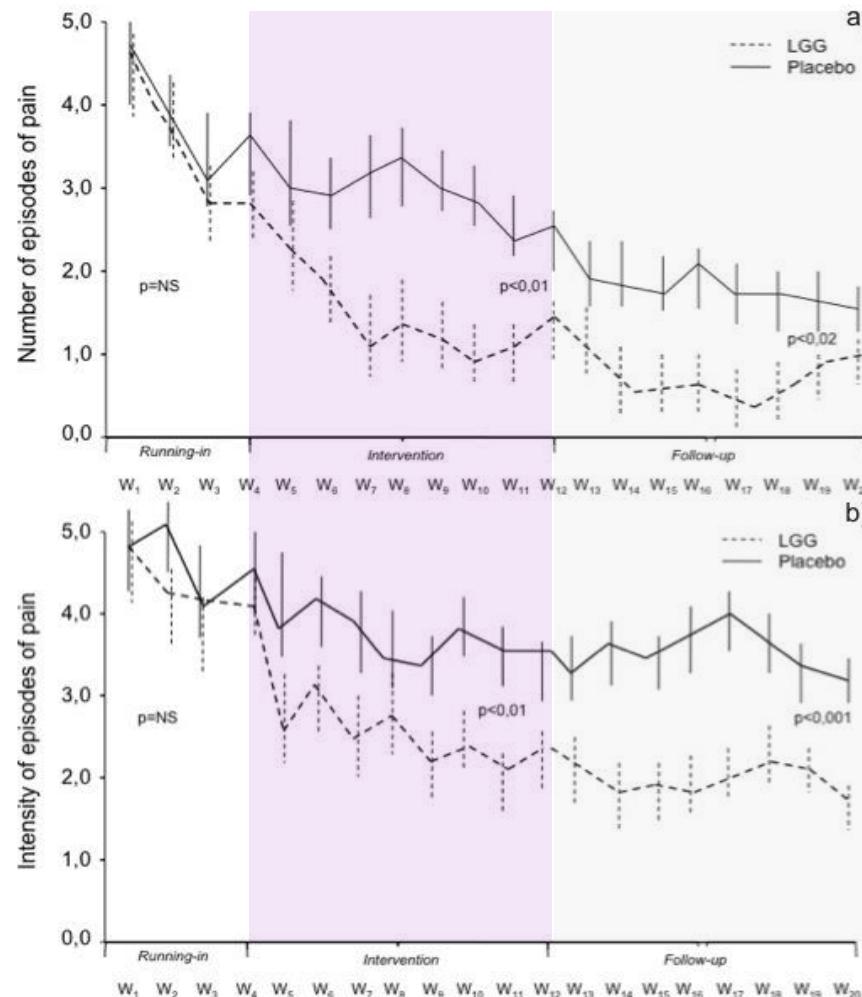


Pediatrics 2011; 126:1445

LGG e DAR pediatrico

A Randomized Controlled Trial of *Lactobacillus GG* in Children With Functional Abdominal Pain

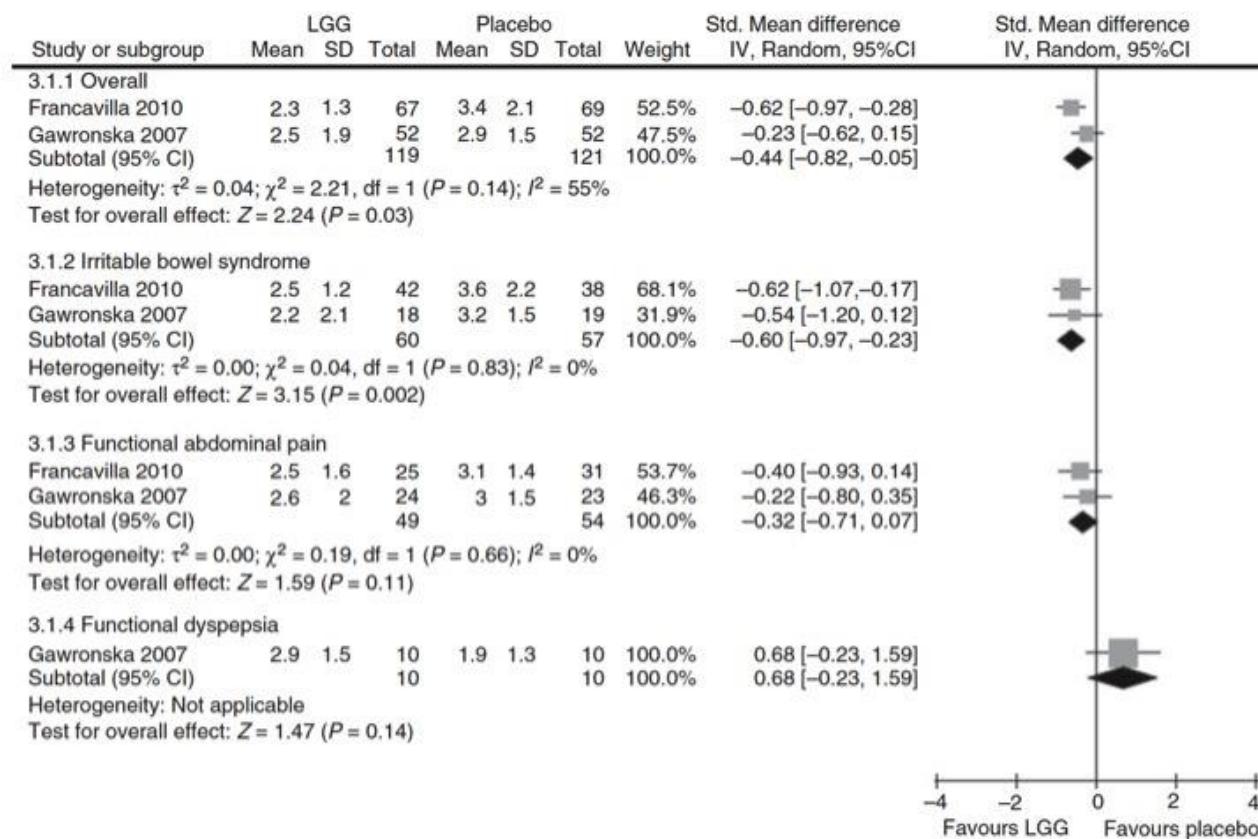
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Pediatrics 2011; 126:1445

Meta-analysis: *Lactobacillus rhamnosus GG* for abdominal pain-related functional gastrointestinal disorders in childhood

A. Horvath, P. Dziechciarz & H. Szajewska





Nonpharmacologic Treatment of Functional Abdominal Pain Disorders: A Systematic Review

Juliette M.T.M. Rutten, MD^{a*}, Judith J. Korterink, MD^{a*}, Leonie M.A.J. Venmans, PhD^b, Marc A. Benninga, MD, PhD^a,
Merit M. Tabbers, MD, PhD^a

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®



LGG ha la massima evidenza

Pediatrics 2015;135:522



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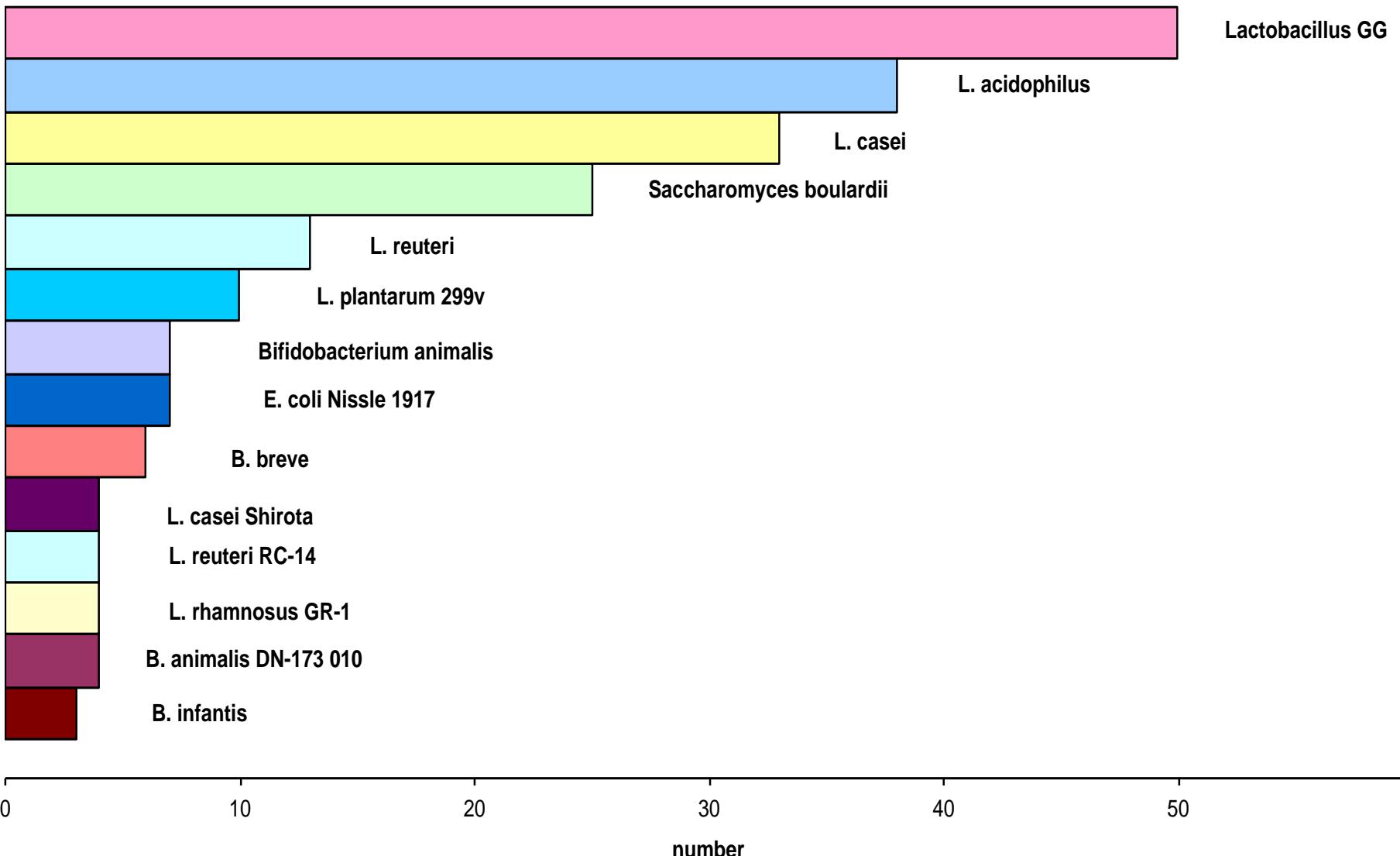


Guida alla scelta

Qualifichiamo le nostre prescrizioni

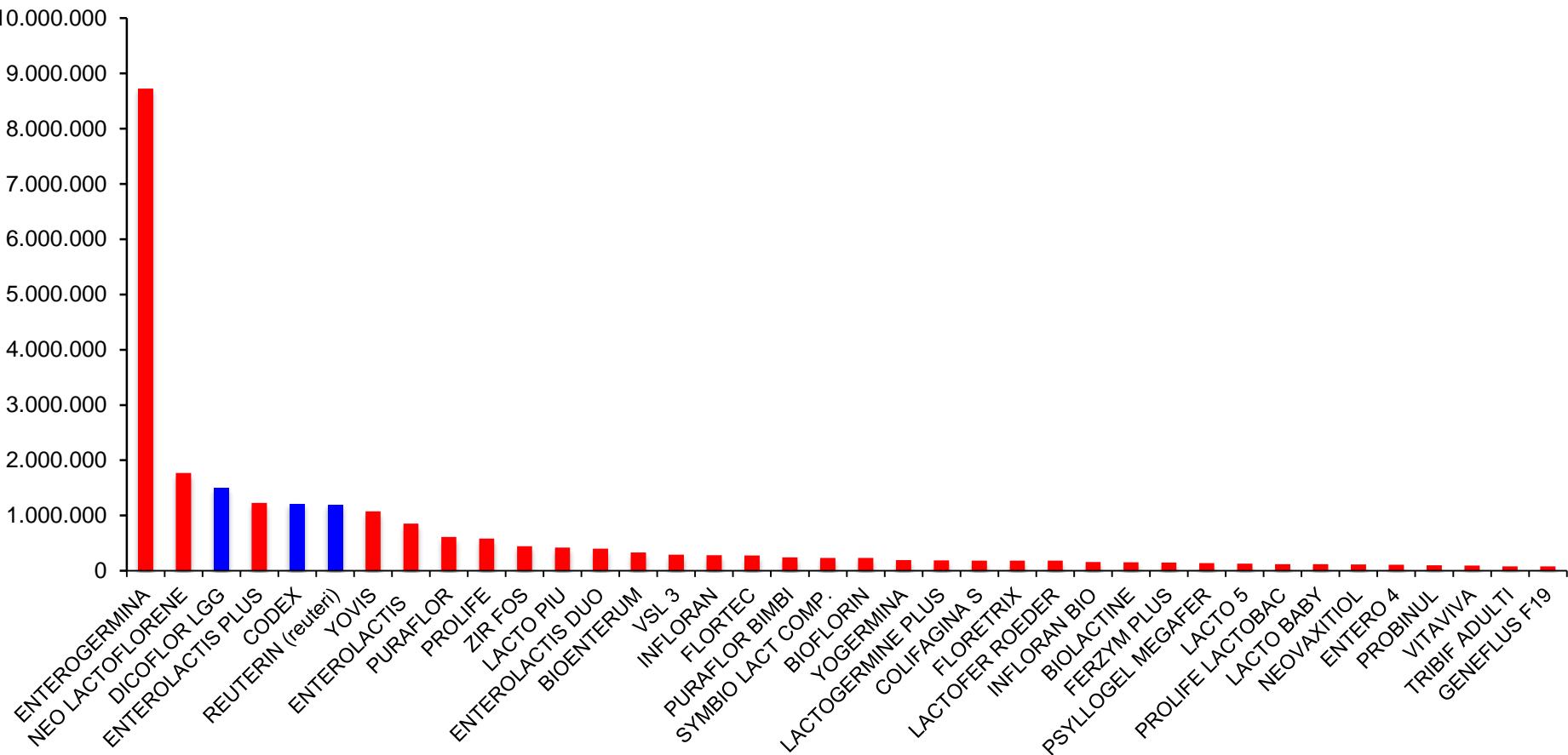


RCT e probiotici (Pubmed)





Vendite di probiotici (03/2010)





- *Digestione*
- *Pancia piatta*
- *Equilibrio intestinale*
- *Bellezza di pelle, capelli, unghie*



NOT
To Do...

Miscela di 4 ceppi



I claim



Descrizione Prodotto

È un integratore alimentare dalla formulazione esclusiva che contiene una innovativa associazione di fermenti lattici che agiscono sul riequilibrio della flora batterica e vitamina B5 che contribuisce alla **riduzione della stanchezza e dell'affaticamento psico-fisico**.

Quando può servire

L'abbinamento di due particolari ceppi di fermenti lattici (*Lactobacillus helveticus* + *Bifidobacterium longum*) in associazione alla vitamina B5 (conosciuta anche come vitamina antistress) ha mostrato un **effetto positivo sull'interazione cervello-intestino**, con sensibili benefici agli stati fisici ed emotivi.



Capire la specificità

Filia

Firmicutes

Classe

Bacilli

Ordine

Lattobacilli

Famiglia

Lactobacillaceae

Genere

Lactobacillus

Specie

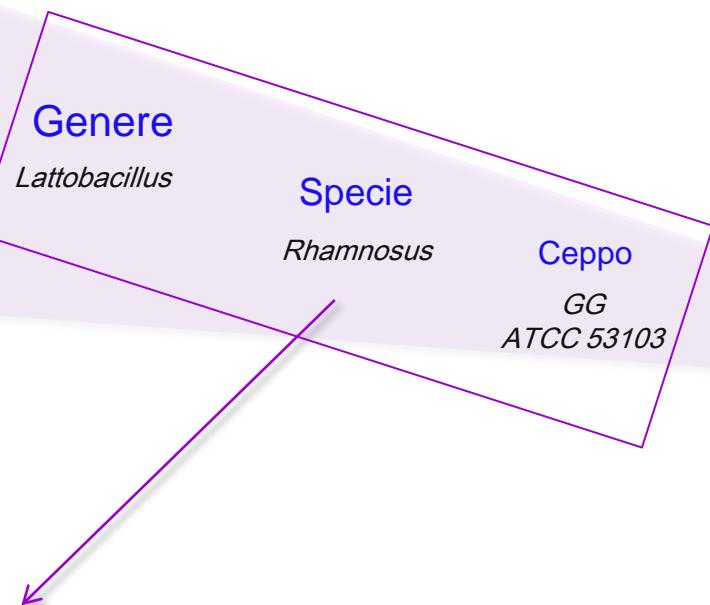
Rhamnosus

Ceppo

GG
ATCC 53103

<http://www.straininfo.net/>

species *Lactobacillus rhamnosus*
parent taxon *Lactobacillus*
type strain 280-16 T, ACM 539 T, ATCC 12116 T, ATCC 7469 T, ATU L-6 T, BCRC 10940 T, BTCC A157 T, BU 227 T, BUCSAV 227 T, CCC B1039 T, CCM 1825 T, CCRC 10940 T, CCTM 3037 T, CCTM La 3037 T, CCUG 21452 T, CDBB 576 T, CECT 278 T, CGMCC 1.0120 T, CGMCC 1.2134 T, CGMCC 1.2466 T, CIP A157 T, CIPA157 T, CNCTC 3 T, CNCTC 6445 T, DSM 20021 T, DSM 20247 T, DSMZ 20021 T, FIRDI 940 T, HAMBI 75 T, Hansen 300 T, IAM 1118 T, IFO (now NBRC) 3425 T, IFO 3425 T, IMET 10691 T, IPF III-L.c./1 T, JCM 1136 T, KCTC 1046 T, KCTC 3237 T, KCTC 3326 T, KCTC 5046 T, LMD 46.33 T, LMG 6400 T, M Rogosa V300 T, M. Rogosa V300 T, M.E. Sharpe H2 T, NBIMCC 1010 T, NBRC 3425 T, NCAIM B.01147 T, NCCB 46033 T, NCDO 243 T, NCFB 243 T, NCIB 6375 T, NCIB 8010 T, NCIM 2125 T, NCIM 2364 T, NCIMB 6375 T, NCIMB 8010 T, NCTC 12953 T, NCTC 6375 T, NRC 488 T, NRCC 488 T, NRIC 1043 T, NRRL B-176 T, NRRL B-442 T, P.A. Hansen 300 T, P.A.Hansen 300 T, PZH 91/50 T, R.P. Tittsler 300 T, R.P.Tittsler 300 T, Rogosa V300 T, RogosaV300 T, Sharpe H2 T, SharpeH2 T, Tittler 300 T, Tittsler 300 T, USCC 1317 T, USCC 2025 T, VKM B-574 T, VTT E-71031 T, VTT E-96031 T, Wis bc-1 T, WSRO 45 T



(BPRCG 2002;16:915)

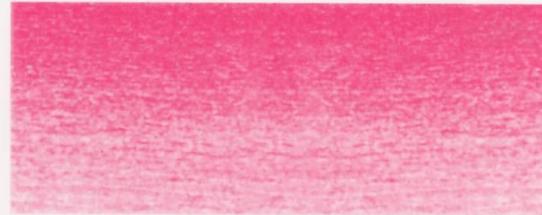


INGREDIENTI: MALTODESTRINE, GELATINA ALIMENTARE, FERMENTI LATTICI VIVI (LACTOBACILLUS GG*),
ANTIAGGLOMERANTE: MAGNESIO STEARATO (VEGETALE), COLORANTE: BLOSSIDO DI TITANIO.

*LACTOBACILLUS GG: LACTOBACILLUS CASEI SUBSPECIE RHAMNOSUS (ATCC 53103). CONCESSIONE ESCLUSIVA BREVETTO
VALIO LTD (FINLAND). BREVETTO EUROPEO N° 0199535



Integratore di fermenti lattici vivi da ceppo umano



Lactobacillus rhamnosus - Lactobacillus bifidus - Lactobacillus acidophilus

2 miliardi di Lactobacillus per capsula



Nomenclatura

301 search results for query 'taxon = 'Lactobacillus rhamnosus' (including subtaxa)'

« previous	1	2	3	31	next »
species names: <i>Bacillus</i> sp. , <i>Lactobacillus rhamnosus</i>					
strain numbers: ATCC 31283 , IFO 3831 , KCTC 3011 , NBRC 3831 , T-37					
species names: <i>Lactobacillus plantarum</i> , <i>Lactobacillus rhamnosus</i>					
strain numbers: CIP 104456					
species names: <i>Lactobacillus casei</i> subsp. <i>rhamnosus</i> , <i>Lactobacillus rhamnosus</i>					
type strain of: <i>Lactobacillus casei</i> subsp. <i>rhamnosus</i> , <i>Lactobacillus rhamnosus</i>					
strain numbers: 280-16 T , ACM 539 T , ATCC 12116 T , ATCC 7469 T , ATU L-6 T , BCRC 10940 T , BTCC A157 T , BU 227 T , BUCSAV 227 T , CCC B1039 T , CCM 1825 T , CCRC 10940 T , CCTM 3037 T , CCTM L4 3037 T , CCUG 21452 T , CDDB 576 T , CECT 278 T , CGMCC 1.0120 T , CGMCC 1.2134 T , CGMCC 1.2486 T , CIP A157 T , CNCTC 3 T , CNCTC 6445 T , DSM 20021 T , DSM 20247 T , DSMZ 20021 T , FIRDI 940 T , HAMBI 75 T , Hansen 300 T , IAM 2118 T , IFO (now NBRC) 3425 T , IFO 3425 T , IMET 10691 T , IPP JIL-Lc./1 T , JCM 1136 T , KCTC 1046 T , KCTC 3237 T , KCTC 3326 T , KCTC 5046 T , LMD 46.33 T , LMC 6400 T , M Rogosa V300 T , M. Rogosa V300 T , M.E. Sharpe H2 T , NBIMCC 1010 T , NBRC 3425 T , NCAIM E.01147 T , NCIB 46033 T , NCDO 243 T , NCFB 243 T , NCIB 6375 T , NCIB 8010 T , NCIM 2125 T , NCIM 2364 T , NCIMB 6375 T , NCIMB 8010 T , NCTC 1293 T , NCTC 6375 T , NRC 488 T , NRCC 488 T , NRIC 1043 T , NRRL B-176 T , NRRL B-442 T , P.A. Hansen 300 T , P.A.Hansen 300 T , PZH 91/50 T , R.P. Tittsler 300 T , R.P.Tittsler 300 T , Rogosa V300 T , Rogosa V300 T , Sharpe H2 T , SharpeH2 T , Tittsler 300 T , Tittsler 300 T , USCC 1317 T , USCC 2025 T , VKM B-574 T , VTT E-71031 T , VTT E-96031 T , WDCM 101 T , Wit bc-1 T , WSRO 45 T					
species name: <i>Lactobacillus rhamnosus</i>					
strain numbers: 61 , CCUG 17659 , CCUG 17659-61 , CCUG 18011 , LMD 98.73 , LMC 8153 , NCCB 98073 , Reid GRI					
species names: <i>Lactobacillus</i> , <i>Lactobacillus rhamnosus</i>					
strain numbers: CCUG 23641 , LMG 10769 , PRSF-L 171					
species name: <i>Lactobacillus rhamnosus</i>					
strain numbers: CCUG 25594 , LMG 10770 , PRSF-L 172 , PRSF-L 172 QC 1/91 , R-943-1027					
species name: <i>Lactobacillus rhamnosus</i>					
strain numbers: CCUG 25738 , LMG 10772					
species name: <i>Lactobacillus rhamnosus</i>					
strain numbers: CCUG 25860 , LMG 10773					
species name: <i>Lactobacillus rhamnosus</i>					
strain numbers: BO 9007039 , CCUG 27333 , LMG 10775 , PRSF-L 173 , PRSF-L 173 QC 1/91					
species name: <i>Lactobacillus rhamnosus</i>					
strain numbers: CCUG 27405 , LMG 10776 , PRSF-L 174 , 5A6vd# 86178					
« previous	1	2	3	31	next »

<http://www.straininfo.net/>31
pagine



Nomenclatura



Ingredienti: Olio di girasole, Trigliceridi a catena media, *Lactobacillus reuteri* DSM 17938. Antiagglomerante: Bi-ossido di silicio.

Indicazioni: integratore di fermenti lattici vivi (*Lactobacillus reuteri* DSM 17938) utile nel riequilibrio della flora intestinale.

Modo d'uso: assumere 5 gocce (10⁸ CFU) al giorno indifferentemente prima o dopo i pasti. Le gocce possono essere mescolate anche in acqua o bevande fredde di qualsiasi tipo. Nel lattante, Reuterin® può essere mescolato al latte alla temperatura di assunzione (max. 37 °C). *Non miscellare con il latte bollente.*

Da consumarsi preferibilmente entro il: Vedi fondo astuccio.

Brevetto internazionale. N. di Brevetto EP 05747481.9, EP 08164035.1 EP 06733377.3, EP 07748532.4



Avvertenze: Reuterin®, una volta aperto può essere conservato in luogo fresco (max. 25°C) per 4 settimane. Per lunghi periodi conservare in frigo. **Non congelare.** Non disperdere nell'ambiente. Tenere fuori dalla portata dei bambini di età inferiore ai tre anni. Non superare la dose giornaliera consigliata. Gli integratori non vanno intesi quali sostituti di un sano stile di vita. Per l'uso del prodotto si consiglia di sentire il parere del medico.



Concessionario di vendita:



Via Campello sul Clitunno 34/1
00181 Roma

www.noosit.com

Lactobacillus reuteri DSM 17938 su licenza esclusiva di vendita BioGaia AB (Svezia). www.biogaia.com

Prodotto nello stabilimento di*: Sanico NV, Industriestraße 4, Veedijk 59, B-2300 Turnhout, Belgium.

*TwoPac AB, Per Häkanssons väg 36, SE-241 38 Eslöv, Sweden

Associazione Probiotica dal pretermine, neonato e adulto



Impiego:

- Coliche gassose (gonfiore addominale).
- Eradicazione Helicobacter pylori.
- Dissenteria di qualsiasi natura (antibiotica e non).
- Migliorare lo sviluppo della mucosa gastrointestinale portando a maturazione la flora batterica (intestinale).
- Immunomodulazione tramite stimolazione del sistema linfonodale intestinale.
- Prevenzione della candida e in associazione con farmaci antimicotici.

Nomenclatura

55 search results for query 'taxon = 'Lactobacillus reuteri' (including subtaxa)'

species names	<i>Lactobacillus murinus</i> , <i>Lactobacillus reuteri</i>
strain numbers	Astra K10 , CCUG 32271
species name	<i>Lactobacillus reuteri</i>
type strain of	<i>Lactobacillus reuteri</i>
strain numbers	ATCC 23272 T, ATCC 53609 T, BCRC 14625 T, CCRC 14625 T, CCT 3433 T, CCUG 33624 T, CECT 925 T, CIP 101887 T, DSM 20016 T, DSMZ 20016 T, EC-Target Strain 8 T, F275 T, Hansen F275 T, IFO (now NBRC) 15892 T, IFO 15892 T, JCM 1112 T, KCTC 3594 T, LMG 13557 T, LMG 9213 T, NBRC 15892 T, NCDO 2589 T, NCFB 2589 T, NCIB 11951 T, NCIMB 11951 T, NRRL B-14171 T, PRSF-L 166 T, PRSF-L 168 T, PRSF-L 230 T, Reuter F275 T, VTT E-92142 T
species name	<i>Lactobacillus reuteri</i>
strain numbers	Abo-Elnaga 15/7 , BCRC 16090 , CCRC 16090 , CCUG 42757 B , CIP 109822 , DSM 20015 , KCTC 3677 , LMG 13045
species name	<i>Lactobacillus reuteri</i>
strain numbers	BCRC 16091 , CCRC 16091 , CIP 109824 , DSM 20053 , KCTC 3678 , LMG 13046 , PRSF-L 167 , Raibaud F70
species name	<i>Lactobacillus reuteri</i>
strain numbers	CCUG 42758 , KCTC 3682 , L94 , LMG 13088 , NCFB 1089 , strain L94
species name	<i>Lactobacillus reuteri</i>
strain numbers	KCTC 3683 , LMG 13089 , NCFB 1359 , Sharpe Pf 3
species name	<i>Lactobacillus reuteri</i>
strain numbers	CCUG 42759 , KCTC 3679 , LMG 13090 , NCFB 2656 , PRSF-L 164 , strain A1
species name	<i>Lactobacillus reuteri</i>
strain numbers	KCTC 3680 , LMG 13091 , NCFB 2655 , PRSF-L 165 , strain E6
species name	<i>Lactobacillus reuteri</i>
strain numbers	11284 , ATCC 55148 , Bio Gaia AB 11284 , BioGaia AB 11284 , LMG 18238
species name	<i>Lactobacillus reuteri</i>
strain numbers	LMG 18391 , TNO strain K-24

<http://www.straininfo.net/>

9

pagine



EFFICACIA CLINICA

INFORMAZIONI NUTRIZIONALI

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13. Shornikova, A., I.A. Casas, E. Isolauri, H. Mykkanen, and T. Vesikari. 1997a. *Lactobacillus reuteri* as a therapeutic agent in acute diarrhea in young children. *J. Ped. Gastro. Nutr.* 24:399-404.
14. Shornikova, A., I.A. Casas, H. Mykkanen, E. Salo, and T. Vesikari. 1997b. Bacteriotherapy with *Lactobacillus reuteri* in rotavirus gastroenteritis. *Pediatr. Infect. Dis. J.* 16:1103-1107.
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18. Moro G, Minoli I, Mosca M, Fanaro S, Jelinek J, Stahl B, et al. Dosage-related bifidogenic effects of galacto- and fructooligosaccharides in formula-fed term infants. *J Pediatr Gastroenterol Nutr* 2002;34:291-5.
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20. Kalliomaki M, Salminen S, Arvilommi H, Kero P, et al.; Probiotics in primary prevention of atopic disease: a randomised placebo-controlled trial. *Lancet*. 2001; 357:1057-9
21. Kalliomaki M, Salminen S, Poussa T, Arvilommi H, et al. : Probiotics and prevention of atopic disease: 4-year follow-up of a randomised placebo-controlled trial. *Lancet*. 2003; 361:1869-71

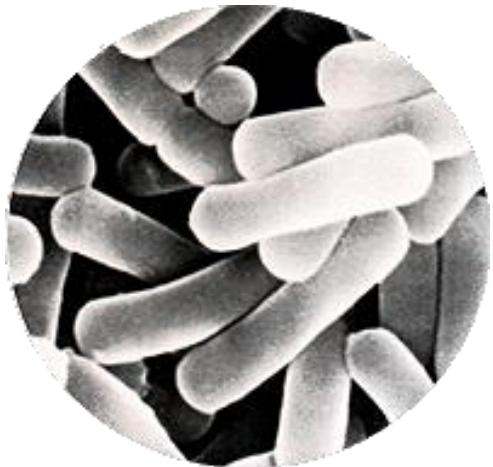


NOT
To Do...

INFORMAZIONI NUTRIZIONALI				
COMPONENTI	Q.tà / bst	UFC/bustina	Per 100 g	CEPPO
Inulina	2000 mg		66.7 g	
Lattoferrina	100 mg		3.33 g	
Bifidobacterium infantis	50 Mld	40 mg	2 Mld	1.33 g simile ATCC 15697
Lb rhamnosus	150 Mld	35 mg	5 Mld	1.17 g simile ATCC 53103
Lb acidophilus	150 Mld	35 mg	5 Mld	1.17 g simile ATCC 4356
Saccharomyces Boulardii	50 Mld	25 mg	1 Mld	0.83 g simile ATCC MYA 796

Contiene 13 Mld di fermenti lattici per bustina

LGG e *L. rhamnosus*



LGG

98%

(identità
genomica)



L. Rhamnosus

(*Nat Rev Microb* 2009;7:843)



98%

(identicità genomica)



(*Nat Rev Microb* 2009;7:843)

NEWS & ANALYSIS

GENOME WATCH

Probiotics stick it to the man

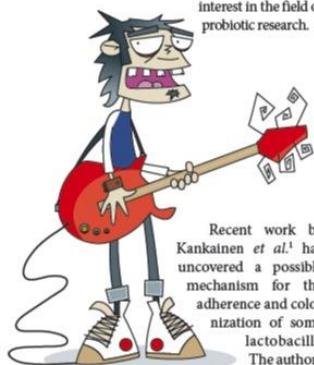
Alan Walker



This month's Genome Watch highlights the part that genomics can play in generating new insights into the interactions of probiotic *Lactobacillus* strains with the human gut.

Lactobacilli are Gram-positive, facultatively anaerobic or microaerophilic bacteria that inhabit a range of ecological niches. They are common inhabitants of the gastrointestinal and vaginal tracts and are also important for the production and preservation of a range of fermented food products. However, they are perhaps most widely known as probiotic organisms, which are consumed as live dietary supplements and have been postulated to have a number of health-promoting benefits. It seems that long-term colonization of the gut does not occur, however, and after the consumption of supplements has ceased the probiotic strains gradually disappear from the colon. Therefore, strains that can adhere to intestinal tissue or mucus are likely to have an extended interaction with the host and are of noteworthy

interest in the field of probiotic research.



Recent work by Kankainen *et al.*¹ has uncovered a possible mechanism for the adherence and colonization of some lactobacilli. The authors

sequenced and compared the genomes of *Lactobacillus rhamnosus* GG, a commonly used probiotic bacterium, and *L. rhamnosus* Lc 705, an industrial strain that is used as an adjunct starter culture in dairy products. At around 3 Mb in size, the genomes of both strains are larger than those of most other lactobacilli sequenced to date. There is a high degree of synteny between the two genomes, and most predicted proteins have greater than 98% average amino acid identity. However, each genome is marked by the presence of distinct genomic islands, which the authors speculate are likely to have been acquired by horizontal gene transfer. Of note, one of the islands that was detected only in *L. rhamnosus* GG seems to contain a set of genes (*spaCBA*) encoding three pilin proteins and another gene encoding a pilin-dedicated sortase that is required for the assembly of pilus structures. Pili are protrusions of the cell surface and have previously been shown to be important for colonization and host interaction in other Gram-positive bacteria. *L. rhamnosus* GG has previously been shown to adhere to mucus and epithelial cell lines around 10 times as efficiently as *L. rhamnosus* Lc 705, and human intervention trials showed that *L. rhamnosus* GG persists in the intestinal tracts of healthy volunteers for 7 days longer than *L. rhamnosus* Lc 705. This led the authors to investigate whether the presence of the SpaCBA pili is crucial to the enhanced colonization ability of *L. rhamnosus* GG.

Firstly, they demonstrated that SpaC pilin is expressed in *L. rhamnosus* GG (but not in *L. rhamnosus* Lc 705) cell wall protein extracts using immunoblotting with SpaC-specific antibodies. Next, they verified the presence of SpaCBA pili on the surface of *L. rhamnosus* GG cells by immunogold electron microscopy. The crucial role of SpaC in enhancing *L. rhamnosus* GG colonization was then convincingly shown by the finding that both wild-type

L. rhamnosus GG treated with SpaC antiserum and *spaC*-inactivated mutants exhibited attenuated adherence to human intestinal mucus. The authors therefore concluded that the greater persistence in the human gut of *L. rhamnosus* GG compared to *L. rhamnosus* Lc 705 is probably due to the mucus-binding capacity of the SpaCBA pili. This is the first reported observation of mucus-binding pili in probiotic lactic-acid bacteria and gives the first indication that pili are crucial to the colonization capabilities of the probiotic *L. rhamnosus* GG.

Coincidentally, Morita *et al.*² recently completed the genome sequencing of *L. rhamnosus* ATCC 53103, which is another probiotic strain and is derived from *L. rhamnosus* GG. Genomic analysis of this strain revealed a very high degree of global synteny with the genome of *L. rhamnosus* GG, except for the fact that the genome of *L. rhamnosus* ATCC 53103 is around 5 kb shorter and contains an 8.9 kb inverted region. Further work to determine whether the *L. rhamnosus* ATCC 53103 genome encodes functional SpaCBA pili will shed more light on the importance of adhesion to mucus during colonization of the human gut by these probiotic *Lactobacillus* strains.

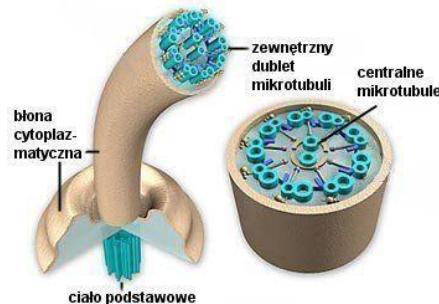
Alan Walker is at the Sanger Institute, Wellcome Trust Genome Campus, Hinxton, Cambridge, CB10 1SA, UK.
e-mail: microbes@sanger.ac.uk

- Kankainen, M. *et al.* Comparative genomic analysis of *Lactobacillus rhamnosus* GG reveals pili containing a human-mucus binding protein. *Proc. Natl Acad. Sci. USA* **106**, 17193–17198 (2009).
- Morita, H. *et al.* Complete genome sequence of probiotic *Lactobacillus rhamnosus* ATCC 53103. *J. Bacteriol.* **191**, 209–216 (2009). doi:10.1128/JB.01287-09.

DATABASES
Entrez Genome project: <http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=genomeprj>
Lactobacillus rhamnosus GG | *L. rhamnosus* GG str. ATCC 53103 | *L. rhamnosus* Lc 705

ALL LINKS ARE ACTIVE IN THE ONLINE PDF

LGG vs. altri L. Rhamnosus ha una capacità di aderire al muco 10 volte maggiore e persiste nell'intestino 7 giorni più a lungo



(Nat Rev Microb 2009;7:843)

grazie

THINK DIFFERENT

