

## Summary of the alteration of gut microbiota in patients with CRC in from 2014 to 2019

Object	Year	Alteration of gut microbiota	Sequencing methods	References	Journal
human	2015	A number of Bacteroides and Parabacteroides species, along with Alistipes putredinis, Bilophila wadsworthia, Lachnospiraceae bacterium and Escherichia coli were enriched in carcinoma samples compared with both healthy and advanced adenoma samples. Gut commensals such as Bifidobacterium animalis and Streptococcus thermophilus, on the other hand, decreased in faeces from adenoma or carcinoma patients, consistent with deviation from a healthy microbiome. Ruminococcus, Bifidobacterium and Streptococcus were significantly overrepresented in the controls, while Bacteroides, Alistipes, Escherichia, Parvimonas, Bilophila and Fusobacterium were overrepresented in the carcinoma patients .	metagenome-wide association study	Gut microbiome development along the colorectal adenoma-carcinoma sequence	Nat Commun
human	2014	Relative to healthy subjects, subjects with adenomas had higher relative abundances of OTUs affiliated with the Ruminococcaceae (OTU 21), Clostridium (OTU 60), Pseudomonas (OTU 3322), and Porphyromonadaceae (OTUs 1901 and 1903); they had lower relative abundances of OTUs affiliated with the Bacteroides (OTUs 1889 and 1913), Lachnospiraceae (OTU 36), Clostridiales (OTU 38), and Clostridium (OTUs 20, 97, 99; Supplementary Fig. S1) We observed that relative to healthy subjects, subjects with carcinomas had higher abundances of OTUs associated with Fusobacterium (OTU 2458), Porphyromonas (OTU 1905), Lachnospiraceae (OTUs 31, 59, 32, 116, 85), and Enterobacteriaceae (OTU 2479); they had lower relative abundances of OTUs affiliated with the Bacteroides (OTU 1889), Lachnospiraceae (OTUs 23, 30, 253, 136), and Clostridiales (OTU 42; Supplementary Fig. S2). T	16S rRNA gene sequencing	The human gut microbiome as a screening tool for colorectal cancer	Cancer Prev Res (Phila)
human	2017	Significant stepwise increase of C. symbiosum abundance was found in CRA, early CRC and advanced CRC (P<0.01).		Fecal Clostridium symbiosum for Noninvasive Detection of Early and Advanced Colorectal Cancer: Test and Validation Studies.	EBioMedicine

human	2019 First, the relative abundance of <i>Fusobacterium nucleatum</i> spp. was significantly ( $P < 0.005$ ) elevated continuously from intramucosal carcinoma to more advanced stages. Second, <i>Atopobium parvulum</i> and <i>Actinomyces odontolyticus</i> , which co-occurred in intramucosal carcinomas, were significantly ( $P < 0.005$ ) increased only in multiple polypoid adenomas and/or intramucosal carcinomas. Compared to the healthy controls, we found microbiome shifts in MP and S0, in addition to SI/II and SIII/IV, which were highly distinct across stages. A number of species in the phyla Firmicutes, Fusobacteria and Bacteroidetes was predominantly elevated in samples from S0, SI/II and SIII/IV, increasing with the degree of malignancy. In addition, we identified species newly associated with CRC, of which <i>Colinsella aerofaciens</i> ( $P=0.000840$ , $q=0.0544$ ), <i>Dorea longicatena</i> ( $P=0.000925$ , $q=0.0557$ ), <i>Porphyromonas uenonis</i> ( $P=0.000439$ , $q=0.0475$ ), <i>Selenomonas sputigena</i> ( $P=0.00369$ , $q=0.101$ ) and <i>Streptococcus anginosus</i> ( $P=0.00177$ , $q=0.0788$ ) were significantly elevated in SIII/IV with all four analytic pipelines used (see Methods). In line with a previous study <sup>5</sup> , two butyrate producers, <i>Lachnospira multipara</i> (S0, $P=0.000596$ , $q=0.585$ ; SI/II, $P=0.000801$ , $q=0.725$ ; SIII/IV, $P=0.000116$ , $q=0.877$ ) and <i>Eubacterium eligens</i> (S0, $P=0.00147$ , $q=0.698$ ), were significantly depleted in CRC stages. Sulfide-producing bacteria, including <i>Desulfovibrio vietnamensis</i> (SIII/IV, $P=0.00109$ , $q=0.0565$ ), <i>D. longreachensis</i> (S0, $P=0.00164$ , $q=0.188$ ) and <i>Bilophila wadsworthia</i> (SIII/IV, $P=0.00408$ , $q=0.101$ ), were elevated.	fecal metagenomic and metabolomic studies	Metagenomic and metabolomic analyses reveal distinct stage-specific phenotypes of the gut microbiota in colorectal cancer	Nat Med
human	2016 stool of CA cases was depleted in a network of Clostridia operational taxonomic units from families Ruminococcaceae, Clostridiaceae, and Lachnospiraceae, and enriched in the classes Bacilli and Gammaproteobacteria, order Enterobacteriales, and genera <i>Actinomyces</i> and <i>Streptococcus</i> (all $q < 0.10$ ). class <i>Erysipelotrichi</i> was depleted in SSA cases.	16S rRNA gene sequencing	The gut microbiota in conventional and serrated precursors of colorectal cancer	Microbiome
human	2017 <i>Eubacterium ventriosum</i> was consistently enriched in control microbiomes across all three methods (IMG: $q=0.002$ ; mOTU: $q=0.0049$ ; MLG: $q=3.33 \times 10^{-4}$ ). On the other hand, <i>Parvimonas micra</i> ( $q < 7.73 \times 10^{-6}$ ), <i>Solobacterium moorei</i> ( $q < 0.011$ ) and <i>F. nucleatum</i> ( $q < 0.00279$ ) were consistently enriched in CRC patient microbiomes across all three methods (figure 1A and online supplementary figure S5), while <i>Peptostreptococcus stomatis</i> ( $q < 7.73 \times 10^{-6}$ ) was enriched according to two methods. PERMANOVA analysis showed that only CRC status ( $p \leq 0.013$ from all three methods) and colonoscopy ( $p=0.079$ from two methods) explained the quantitative variation in the three CRC-enriched species	metagenome-wide association studies	Metagenomic analysis of faecal microbiome as a tool towards targeted non-invasive biomarkers for colorectal cancer	Gut
human	2017 We found that individual markers for <i>clbA+</i> bacteria and <i>F. nucleatum</i> were more abundant in stool of patients with CRC	16S rRNA gene sequencing	Cancer-associated fecal microbial markers in colorectal cancer detection.	Int J Cancer
human	2017 Significantly elevated abundances of Fn, Ch, and m7 and decreased abundances of Bc and Ri in CRC patients compared to healthy controls	metagenome sequencing analysis	Fecal Bacteria Act as Novel Biomarkers for Noninvasive Diagnosis of Colorectal Cancer.	Clin Cancer Res

human	<p>2017 The relative abundance in patients with CRC compared with controls was 132-fold, 37-fold and 41-fold for the markers Fn, Pa and Pm, respectively. As for patients with advanced adenoma, their relative abundance of marker Fn was significantly higher than the control group (3.8-fold, p=0.022, online supplementary figure S3A). Nevertheless, there was no significant difference in abundance between advanced adenoma and control groups for markers Pa (p=0.545) and Pm (p=0.232) (see online supplementary figure S3B, C).</p>	quantitative PCR	<p>Quantitation of Gut faecal Fusobacterium improves faecal immunochemical test in detecting advanced colorectal neoplasia</p>
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**Summary of the alteration of gut microbiota in patients with T2DM and the common alteration with both T2DM and CRC from 2012 to 2019**

Object	Year	Alteration of gut microbiota	Sequencing methods	References	Journal
human	2018		sequencing of the 16S rRNA	Characteristics of gut microbiota in adult patients with type 1 and type 2 diabetes based on next-generation sequencing of the 16S rRNA gene fragment	Pol Arch Intern Med
human	2012		metagenome-wide association study	A metagenome-wide association study of gut microbiota in type 2 diabetes.	Nature
human	2019	The sequence analysis revealed that bacteria from Firmicutes were predominant along with those from Clostridia and Negativicutes, whereas bacteria from Verrucomicrobia, Bacteroidetes, Proteobacteria, and Elusimicrobia were less abundant among the obese T2DM patients	16S rRNA sequencing targeting V3 - V4	Analysis of gut microbiota of obese individuals with type 2 diabetes and healthy individuals.	PLoS One

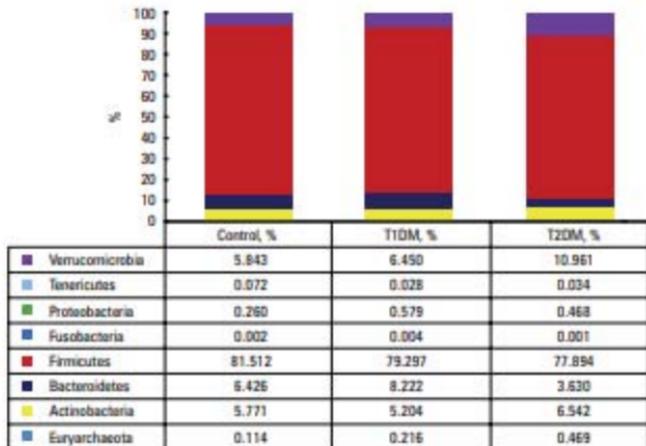
human	2019	Participants with T2DM presented a reduction in the amounts of <i>A. muciniphila</i> and <i>F. prausnitzii</i> compared with those without diabetes ( $P \leq 0.036$ ). Furthermore, <i>A. muciniphila</i> is	quantitative PCR (qPCR)	Participants with T2DM presented a reduction in the amounts of <i>A. muciniphila</i> and <i>F. prausnitzii</i> compared with those without diabetes ( $P \leq 0.036$ ). Furthermore, <i>A. muciniphila</i> is	Biosci Rep
human	2019	The T2DM patients consumed more carbohydrates, and had lower fecal propionate and butyrate concentrations, larger fecal populations of <i>Bifidobacterium</i> spp. and bacteria of the order Lactobacillales, and smaller fecal <i>Bacteroides</i> spp. populations than the control individuals.		Gut microbiota disorders cause type 2 diabetes mellitus and homeostatic disturbances in gut-related metabolism in Japanese subjects	J Clin Biochem Nutr.
human	2017	While, the level of <i>Lactobacillus</i> was significantly higher in the patients with T2DM ( $P$ value < 0.001), <i>Bifidobacterium</i> was significantly more frequent in the healthy people ( $P$ value < 0.001)	quantitative real-time polymerase chain reaction (qPCR) method using bacterial 16S rRNA gene.	Comparison of gut microbiota in adult patients with type 2 diabetes and healthy individuals	Microb Pathog

### Summary of alteration of gut microbiota by metformin in patients with T2DM that may affect CRC from 2014 to 2020

Object	Year	Alteration of gut microbiota	Sequencing methods	References	Journal
patients with T2DM	2020	At the phylum level, subtle increases of Bacteroidetes and Actinobacteria, and a decrease of Firmicutes, were observed, though these were not statistically significant (Figure 3A). In addition, the ratio of Firmicutes to Bacteroidetes decreased after four weeks of taking metformin, although this was not statistically significant	16S rDNA sequences	The Effects of Metformin on the Gut Microbiota of Patients with Type 2 Diabetes: A Two-Center, Quasi-Experimental Study.	

patients with T2DM	2015 n, we next compared T2D metformin-treated (n=93) and T2D metformin-untreated (n=106) samples to characterize the treatment effect in more detail. Multivariate contrasts of T2D metformin-treated with T2D metformin-untreated samples appeared weaker than those between T2D metformin-untreated and ND control samples, the former only significant at the bacterial family level (PERMANOVA FDR<0.1), suggesting that the effects of metformin treatment on gut microbial composition are poorly captured by multivariate analysis. Univariate tests of the effects of metformin treatment showed a significant increase of <i>Escherichia</i> spp. and a reduced abundance of <i>Intestinibacter</i> spp.,	16S rDNA sequences	Disentangling type 2 diabetes and metformin treatment signatures in the human gut microbiota.	Nature
patients with T2DM	2018 In the metformin treatment group, four CAGs were increased by metformin and three were significantly decreased (Fig. 3b; see Table S3 in the supplemental material). Among the four CAGs enriched by metformin, CAG21 showed significant inverse correlations with HbA1c, and CAG25 with FBG, 2-h PBG, and LDL-c (Fig. 4a). CAG21 consisted of 10 OTUs: two OTUs belong to <i>Clostridium</i> XIVa and one to each of the following genera: <i>Erysipelotrichaceae</i> incertae sedis, <i>Escherichia/Shigella</i> , <i>Fusobacterium</i> , <i>Flavonifractor</i> , <i>Lachnospiraceae</i> , <i>Lachnospiraceae</i> incertae sedis, and <i>Clostridium</i> XVIII and IV. CAG25 contained four OTUs from <i>Blautia</i> and one from <i>Anaerostipes</i> . Among the three CAGs inhibited by metformin, CAG7 and CAG8 were significantly correlated with the alleviation of hyperglycemia (Fig. 4a). CAG7 and -8 showed significantly negative correlations with HOMA-β. CAG7 contained three OTUs from <i>Bacteroides</i> and one from <i>Parabacteroides</i> ; CAG8 consisted of three OTUs from <i>Bacteroides</i> , two OTUs from <i>Alistipes</i> , and one OTU each from <i>Oscillibacter</i> and un-Ruminococcaceae, respectively. To sum up, metformin significantly enriched CAG21 and CAG25 and inhibited CAG7 and CAG8, which were significantly correlated with the amelioration of hyperglycemia and hyperlipidemia.	V3 and V4 regions of the 16S rRNA gene by Illumina sequencing and multivariate statistical methods.	Structural Alteration of Gut Microbiota during the Amelioration of Human Type 2 Diabetes with Hyperlipidemia by Metformin and a Traditional Chinese Herbal Formula: a Multicenter, Randomized, Open Label Clinical Trial	<a href="#">mBio.</a>
patients with T2DM	2018 metformin treatment, disturbances of the intestinal microbes lead to increased abundance of <i>Escherichia</i> spp., <i>Akkermansia muciniphila</i> , <i>Subdoligranulum variabile</i> and decreased abundance of <i>Intestinibacter bartlettii</i> . T	16S rDNA sequences	Understanding the Representative Gut Microbiota Dysbiosis in Metformin-Treated Type 2 Diabetes Patients Using Genome-Scale Metabolic Modeling.	
patients with T2DM	2020 At the genus level, SB treatment increased the levels of <i>Megamonas</i> , <i>Mobilitalea</i> , <i>Acetivibrio_g1</i> , <i>AB606281_g</i> , and <i>AB606237_g</i> , while it decreased <i>Clostridium_g23</i> , <i>Oscilibacter</i> , and <i>Alloprevotella</i> . Additionally, eight species were increased and seven species were decreased in response to SB treatment (Figure 3A). Relative abundance in genus level including lactic acid bacteria and <i>Akkermansia</i> was compared by t-test analysis and found to differ between treatment groups. The relative abundance of <i>Bifidobacterium</i> was significantly lower in the SB group than the placebo group, while those of <i>Lactobacillus</i> and <i>Akkermansia</i> were significantly higher in the SB group than the placebo group (Figure 3B). The relative abundance of <i>Weissella</i> did not differ between treatment groups.	MiSeq system based on 16S rRNA gene	<i>Scutellaria baicalensis</i> Combined effects of with metformin on glucose tolerance of patients with type 2 diabetes via gut microbiota modulation.	

**FIGURE 1** Relative percentage distribution of bacteria at the phylum level (L2) in the study groups



**TABLE 2** Differences in the relative percentages of the microbial types between the study groups at the genus level (L5)

Genus (L5)	Controls (n = 23)	T1DM group (n = 22)	T2DM group (n = 23)	P value
g_Bacteroides	5.22%	5.96%	2.74%	0.02**
f_Clostridiaceae; Other	2.29%	2.53%	0.77%	0.03* 0.006* 0.01*
f_Clostridiaceae; g_	2.09%	1.96%	0.88%	0.02* 0.04*
f_Lachnospiraceae; Other	3.23%	1.63%	1.74%	0.02**
g_Ruminococcus	5.30%	6.66%	10.69%	0.02* 0.04**
g_Anaerostipes	0.34%	0.28%	0.21%	0.049* 0.04*
g_Roseburia	0.45%	0.29%	0.13%	0.005* 0.003*
f_Peptostreptococcaceae; g_	0.12%	0.12%	0.03%	0.001* 0.003* 0.02*
f_Enterobacteriaceae; g_	0.05%	0.53%	0.42%	0.001**
f_Flavobacteriaceae; g_	0.06%	0.06%	0.02%	0.007**

A P value of less than 0.05 is considered significant.

Clostridiales (6.43%, 5.98%, and 7.07%, respectively); *Akkermansia* (5.84%, 6.45%, and 10.96%, respectively); *Ruminococcus* (5.3%, 6.66%, and 10.69%, respectively); *Bacteroides* (5.22%, 5.96%, and 2.74%, respectively); *Blautia* (4.86%, 7.45%, and 5.61%, respectively); an isolated, but not yet identified, genus belonging to the family Lachnospiraceae (3.23%, 1.63%, and 1.74%, respectively); *Faecalibacterium* (3.14%, 2.71%, and 1.62%, respectively); *Bifidobacterium* (2.89%, 2.68%, and 2.02%, respectively); *Coprococcus* (2.76%, 2.42%, and 3.49%, respectively); an unnamed genus in the family Clostridiaceae (2.09%, 1.96%, and 0.88%, respectively); an isolated, but not yet identified, genus belonging to the family Clostridiaceae (2.29%, 2.53%, and 0.77%, respectively); *Collinsella* (1.75%, 1.37%, and 3.13%, respectively); *Dorea* (1.24%, 1.01%, and 1.58%, respectively); and a genus with the suggested name of *Ruminococcus*, belonging to the family Lachnospiraceae (1.05%, 3.89%, and 1.78%, respectively). The remaining 108 OTUs (corresponding to the genus) constituted a fraction of the gut microbiota composition in the samples examined. A comparison of the relative percentages of the microbial types in the study groups showed significant differences for 10 types (table 2).

An  $\alpha$ -diversity analysis showed a slightly low

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## Control-enriched MLGs

## T2D-enriched MLGs

- Unclassified
- Actinobacteria
- Eggerthella
- Bacteroidales
- Alistipes
- Bacteroides
- Parabacteroides
- Firmicutes
- Lachnospiraceae
- Erysipelotrichaceae
- Clostridiales
- Clostridium
- Eubacterium
- Roseburia
- Faecalibacterium
- Subdoligranulum
- Proteobacteria
- Desulfovibrio
- Escherichia
- Haemophilus
- Verrucomicrobia
- Akkermansia

