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Sequence-based Methods in Human Microbial Ecology: A The 2nd Human Genome Comes of Age

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Abstract

Ecologists studying microbial life in the environment have recognized the enormous complexity of microbial diversity for more than a decade (Whitman et al. 1998). The development of a variety of culture-independent methods, many of them coupled with high-throughput DNA sequencing, has allowed this diversity to be explored in ever greater detail (Handelsman 2004; Harris et al. 2004; Hugenholtz et al. 1998; Moreira and Lopez-Garcia 2002; Rappe and Giovannoni 2003). Despite the widespread application of these new techniques to the characterization of uncultivated microbes and microbial communities in the environment, their application to human health and disease has lagged behind. Because these techniques now allow not only cataloging of microbial diversity, but also insight into microbial functions, it is time for clinical microbiologists to apply these tools to the microbial communities that abound on and within us, in what has been aptly called “the second Human Genome Project” (Relman and Falkow 2001).

In this review we will discuss the sequence-based methods for microbial analysis that are currently available and their application to identify novel human pathogens, improve diagnosis and treatment of known infectious diseases, and finally to advance understanding of our relationship with microbial communities that normally reside in and on the human body.

Sequence-based Methods

It has long been recognized that standard culture methods fail to adequately represent the enormous microbial diversity that exists in nature. To avoid reliance on cultivation, many culture-independent methods have been developed to search for novel bacterial species, especially pathogens. These methods include screening of expression libraries with immune serum, nucleic acid subtractive methods, small molecule detection with mass spectroscopy, among others, and these have been reviewed elsewhere (Relman 2002). This review will focus primarily on sequence-based methods because of their general applicability and the continued expansion of high-throughput, low cost, sequencing capacity. The cornerstone of culture-independent identification of bacterial and archaeal species is sequence analysis of ribosomal RNA genes that are sufficiently well-conserved across species that they can be readily amplified using PCR primers based on highly conserved sequences, yet are sufficiently diverse to differentiate bacterial or archaeal species. Carl Woese initially used small subunit (16S) rRNA gene sequences for construction of phylogenetic trees of cultivated organisms (Woese 1982; Woese and Fox 1977), but this method was subsequently applied to libraries of rRNA genes PCR-amplified from environmental DNA samples without cultivation (Giovannoni et al. 1990; Schmidt et al. 1991; Stahl et al. 1984; Stahl et al. 1985; Ward et al. 1990). A striking collective result from the application of this technique to numerous environmental samples was the realization that cultivated organisms represent a tiny fraction of species present in most environmental samples. Indeed only half of 45 currently recognized bacterial phyla contain cultivated members (Hugenholtz et al. 1998; Rappe and Giovannoni 2003). To maximize the utility of 16S rRNA gene analysis for species determination, it is now routine to amplify the entire 16S rRNA gene, which spans ~1500 bp, and is thus readily sequenced in its entirety through bi-directional sequencing of cloned 16S amplicons (Hugenholtz 2002). After sequencing, 16S sequences are clustered into groups and a threshold of sequence similarity is established (usually 98 or 99%) to distinguish genus and species (Fig.1).

While PCR amplification of 16S sequences has been of enormous value, there are caveats to this approach. One is that organisms that carry sequence differences within the highly conserved regions used for primer design may not amplify at all or do so less efficiently, so that the representation in cloned libraries of amplified 16S rRNA genes may be skewed, especially if the number of 16S rRNA

sequences sampled is small (Kroes et al. 1999). Such errors may be recognized and corrected by hybridization-based methods such as in situ hybridization with species or strain specific 16S oligonucleotides applied to the original (or similar) sample (Amann et al. 1990; Amann et al. 1995; Bosshard et al. 2000; DeLong et al. 1989; Giovannoni et al. 1988).

A second relative drawback of 16S sequencing is the need for high-throughput sequencing capacity that, except in high-throughput sequencing centers, remains relatively slow compared to hybridization-based methods. As an alternative, several strategies employing 16S rRNA gene microarrays have been presented and offer some advantage in speed compared to sequencing when comparison of many samples is required (Guschin et al. 1997; Loy et al. 2002; Loy et al. 2005; Rudi et al. 2000; Small et al. 2001). For the most part these studies employed oligonucleotide probes that were designed for detection of specific organisms such as sulfate reducing bacteria or beta-proteobacteria and have offered acceptable sensitivity. Application to highly complex environmental samples has been limited by sensitivity and difficulties in differentiating related species, but it seems reasonable to expect further improvement in this technology and eventual application to clinical materials from humans.

Identification of Novel Human Pathogens

An exciting application of culture-independent methods is the identification of uncultivated organisms causing human disease. Because DNA can be extracted from any potentially infected material and used as a substrate for 16S rRNA gene amplification, David Relman predicted in 1996 that a rash of claims for disease causation by new pathogens would follow application of this method to human tissues, and laid out a clear strategy for proving disease causation for organisms that might be difficult or impossible to grow (Fredericks and Relman 1996). Remarkably, this has not come to pass and only a few new pathogens have been identified through 16S rRNA gene amplification. This may be because present methods for cultivation are sufficient for the vast majority of pathogens capable of growth on human tissues, or it may be that we have yet to apply culture-independent methods to many clinical conditions that have an infectious component. Whatever the reason, these new infectious agents are notable and worthy of review here.

The first novel pathogen to be identified by sequence-based methods was *Rochalimaea henselae*, the organism responsible for bacillary angiomatosis (BA). The hallmark of BA is abnormal proliferation of small blood vessels in the skin and visceral organs of immunocompromised patients. Although bacteria had been found in tissue sections by Warthin-Starry staining, they could not be cultured due to their fastidious growth requirements (Perkocha et al. 1990). In 1990, Relman et al. amplified a partial 16S rRNA gene sequence from tissue samples obtained from bacillary angiomatosis patients, but not from normal tissues, using broad-range PCR (Relman et al. 1990). Analysis of this 16S sequence suggested a novel species most closely related to *Rochalimaea* spp. Further evidence for causation was provided by the isolation of a slow-growing, *Rochalimea*-like bacillus from a single BA patient in an independent study (Slater et al. 1990). Two years later, genotypic analysis of the complete 16S rRNA gene and other genomic loci further confirmed the novelty of the isolated BA agent, *Rochalimaea henselae* (later moved into the genus *Bartonella*) (Regnery et al. 1992).

The same strategy was soon applied to other potential infectious diseases and led to the identification of *Ehrlichia chaffeensis*, a new *Ehrlichia* species associated with tick bites and causing a febrile illness. Ehrlichiosis is clinically similar to Rocky Mountain spotted fever, another tick-borne disease caused by the intercellular parasite, *Rickettsia rickettsii*. While testing of the index patient's serum for antibodies against *R. rickettsii* was negative, patient serum contained antibodies to *E. canis*, a well-described canine pathogen (Maeda et al. 1987). This suggested that *E. canis* or a related species was responsible for disease, and 16S rRNA gene amplification from infected macrophages led to identification of *E.*

chaffeensis (Anderson et al. 1991; Dawson et al. 1991). Causation is supported by concordance of *E. chaffeensis* 16S rRNA and serologic findings in patients with fever, leukocyte inclusions and history of a tick bite, as well as a salutary clinical response to appropriate antibiotics accompanied by loss of *E. chaffeensis* 16S rRNA gene from leukocytes.

A third example of success with 16S rRNA gene amplification is Whipple's disease. Whipple's disease is a rare disease first described in 1907, in a missionary who died of an illness marked by chronic joint pain, weight loss and severe abdominal pain. In the report of this patient, George Hoyt noted "rodlike bacilli in a small node" (Whipple 1907). Eighty-four years passed before the identification of the etiologic agent despite its consistent observation in affected tissues (Cheers and Ashworth 1961; Yardley and Hendrix 1961) and patients' improvement with antibiotic treatment (Trier et al. 1965). In 1991, a partial 16S rRNA gene sequence was amplified from a small-bowel biopsy specimen taken from a patient with Whipple's disease (Wilson et al. 1991), and the complete 16S rRNA gene sequence was determined a year later, revealing it to be an actinomycete not closely related to any known genus. It was therefore given a new genus and species name, "*Tropheryma whipplei*", based on the unusual features of the disease and the distinct morphological characteristics of the bacillus (Relman et al. 1992). It is worth noting that *T. whipplei* was particularly recalcitrant to cultivation (Raoult et al. 2000). The complete genome of *T. whipplei* predicted deficiencies in amino acid synthesis (Bentley et al. 2003; Raoult et al. 2003). With this information, Renesto et al. successfully designed a complete medium that allowed cell-free cultivation of *T. whipplei* (Renesto et al. 2003). This was the first demonstration that genomic information could guide rational design of media for axenic cultivation of fastidious bacteria.

While most human tissues are normally sterile, many epithelial-lined cavities of the human body in contiguity with the environment harbor microbial communities, the complexities of which are just beginning to be understood. These include the skin, mouth, ear, gastrointestinal tract and the vagina. Identifying pathogens within this complex bacterial background is more difficult than identifying them in normally sterile compartments. One of the most successful examples of this involves the study of dental plaque. Because of their known role in dental caries and periodontal disease, human oral flora has been studied intensively through both culture-dependent and culture-independent techniques. About 500 bacterial species have been found in the human oral cavity (Meyer and Fives-Taylor 1998; Paster et al. 2001; Thoden van Velzen et al. 1984) and 40-60% of these species are uncultivated "phylogenotypes" (Kroes et al. 1999; Paster et al. 2001). Studies using conventional culture methods have established that streptococci play a key role in initiating the formation of dental caries, and *Actinobacillus actinomycetemcomitans*, *Porphyromonas gingivalis* and *Treponema denticola* contribute to the development of periodontal disease (Meyer and Fives-Taylor 1998). Recent 16S rDNA sequence analysis uncovered that in addition to these known pathogens, several uncultivated organisms, including organisms assigned to uncultivated phyla *Deferribacteres*, OP11 and TM7, are strongly associated with periodontitis or acute necrotizing ulcerative gingivitis in humans (Brinig et al. 2003; Choi et al. 1994; Dewhirst et al. 2001; Hutter et al. 2003; Ouverney et al. 2003; Paster et al. 2001).

Recently, methanogenic archaea have also been linked to periodontal disease based on 16S rRNA sequencing and FISH analysis (Kulik et al. 2001; Lepp et al. 2004), providing the first example of archaeal disease association in humans. In Lepp's study, the relative abundance of methanogenic archaea was associated with disease severity and decreased with effective treatment (Lepp et al. 2004). However, archaea were not uniformly found in the subgingival space of severely affected individuals, leaving in question the nature of their role in this polymicrobial disease. Interestingly, the abundance of archaea and *Treponema denticola* were inversely correlated, suggesting that they might compete for the same niche in the community. It was hypothesized that both organisms serve as "hydrogen sinks" in the highly reduced environment of the subgingival space, allowing acid producing members of the

community to grow to higher density than they might in their absence. While additional genomic and metabolic studies will be required to fully understand the role of methanogenic archaea in periodontal disease, this example clearly illustrates how culture-independent methods may do more than increase our appreciation of the number of known pathogens. These methods also stand to teach us a great deal about the mechanisms of disease, especially in circumstances where the paradigm of a single causative agent seems not to hold. Other clinical circumstances that may benefit from similar analyses include sinusitis, ventilator associated pneumonia, small bowel overgrowth syndromes, inflammatory bowel disease and bacterial vaginosis.

Novel Viral Pathogens

While it is unclear how many new bacterial human pathogens remain to be identified, it seems likely that a larger number of viral pathogens have thus far escaped detection. This is because growth conditions are far harder to determine and nucleic acid techniques based on sequence conservation are not available. Nonetheless there are several examples of successful application of culture-independent methods to the identification of novel viral pathogens. These include the use of DNA subtraction techniques to identify the Kaposi's sarcoma virus (Chang et al. 1994), expression screening of a cDNA library with patient serum to identify the hepatitis-C agent (Choo et al. 1989), and more recently hybridization based screening to identify the SARS virus as a coronavirus (Ksiazek et al. 2003). The last example was particularly notable for the novel viral sequences were recovered from individual elements of the array to which they hybridized and for the speed with which the analysis was accomplished. The diversity of viral genomes clearly complicates the search for novel pathogens and development of new strategies may be required. One such strategy might employ the application of appropriately extracted clinical materials directly to a massively-parallel, single molecule sequencing apparatus. Sequencing machines capable of producing >200,000 short sequencing reads in a single run, from small amounts of DNA without prior cloning, are now commercially available (www.454.com (Andries et al. 2005)). Such machines already produce sequence at ~20% the cost of Sanger sequencing and the short reads produced by single-molecule techniques provide an efficient way of producing molecular tags for microbial species. Infected tissues or body fluids could be extracted, reverse transcribed if needed (for RNA viruses) and sequenced along with contaminating host or bacterial DNA. The resulting sequence reads would then be searched for homology to known viral (and bacterial) sequences. Viral sequences found could then be linked by subsequent PCR or used in hybridization-based strategies to recover complete viral genomes.

Sequence-based methods for rapid diagnosis of bacterial infections

Sequence-based methods have also found application to the rapid identification of human pathogens that can be cultured. For fastidious or slow growing organisms the advantage is obvious, but there may be significant value in their application to more common infectious agents because standard culture techniques require 24-48 hours for growth and identification of most bacterial species. Clinical practice has long favored the use of antibiotics to cover the most likely organisms to be present when infection is suspected, but this practice has contributed greatly to the spread of antibiotic resistance. Hence the use of culture-independent methods for rapid diagnosis has the potential to provide more specific antibiotic therapy from the outset or to withhold it altogether if there is no infection present. Because of the continuing need for analysis of antibiotic sensitivity, culture is still required for every serious infection, but one can envision a day when resistance is sufficiently well understood that this might also be rapidly predicted from nucleic acid-based assays.

Both hybridization and PCR-based strategies have been used for rapid diagnosis. 16S rRNA gene amplification can be carried out using universal primers followed by detection with group-specific fluorescent probes or a second group-specific PCR. When applied to body compartments that are normally sterile including blood, urine, cerebrospinal fluid, wounds and indwelling intravascular catheters, these assays have generally been able to identify more than 95% of infected samples with false-positive rates of ~10%. (Domann et al. 2003; Moumile et al. 2004; Nikkari et al. 2002; Qin and Urdahl 2001; Schuurman et al. 2004). While these studies demonstrate acceptable performance, to our knowledge, no one has fulfilled the promise of these methods to guide therapy prospectively, or to reduce the administration of broad-spectrum antibiotics.

Understanding complex microbial communities in human ecology

It is increasingly clear that humans have a symbiotic relationship with several microbial consortia living on and within us, but understanding the details of these relationships is a major challenge. One important application of culture-independent methods has been preliminary evaluation of these communities. In the discussion below we have focused on the gut because, to date, it is the most studied and it clearly illustrates the complexity of the problem.

It has long been appreciated that the human gastrointestinal tract is colonized by a complex microbial community that is believed to far exceed in number of organisms the total number of cells in the human body. Although this community has been studied in detail by relatively efficient culture techniques, culture-independent studies suggest that 40-80% of the total microscopic counts are uncultivated species (Langendijk et al. 1995; Suau et al. 1999). Several studies have used 16S rRNA gene amplification to uncover numerous novel species (Suau et al. 1999; Wilson and Blichington 1996). Quantitative assays of human fecal samples collected from several individuals have shown that each person has a unique collection of bacteria, and an individual's dominant active flora is relatively stable over time (Franks et al. 1998; Zoetendal et al. 1998). These findings were recently confirmed with a large scale 16S survey, which also found 62% of bacterial phylotypes in the gut were novel and 80% represented uncultivated species, mostly from the Firmicutes and Bacteroidetes phyla (Eckburg et al. 2005).

Studies in mice, rats and fish raised in sterile environments, and therefore lacking this community in the gut, have demonstrated the importance of this community for normal gut structure and function, nutrient absorption, fat deposition, and development of normal immunity (Backhed et al. 2004; Backhed et al. 2005; Guarner and Malagelada 2003; Rawls et al. 2004). In a recent study by Rawls et al., gene expression patterns were compared between germ-free and normal gut in both mice and zebrafish, identifying 59 genes with concordant changes in the two species. One gene that was potently suppressed by the presence of gut microbiota in both mice and fish is *Fiaf*, an inhibitor of lipoprotein-lipase, a gene important for fat accumulation. Reconstitution of gut microbiota increased body fat by more than 50% in germ-free mice. However, inactivation of *Fiaf* by gene targeting completely eliminated the normal microbiota-induced deposition of fat, demonstrating an important role for this protein in microbe-induced fat deposition. The mechanism by which gut microbial flora suppress *Fiaf* expression is unknown, but it does not seem to involve PPAR- α (a known *Fiaf* regulator), or gut macrophages (Backhed et al. 2004). These observations shifted the prevailing view of gut microbes from commensalism to a true symbiosis in which the microbial community enjoys a stable, nutrient rich environment with a limited host immune response. In turn, the microbes selected to exist in this environment facilitate normal gut function in largely undescribed ways (Backhed et al. 2005). Unfortunately, while 16S rRNA gene surveys have successfully defined microbial diversity in the gut, these studies provide little functional information to help us understand the physiology of host-microbe interactions. Dissecting the functions of the gut flora is extremely difficult because of at least 3 reasons.

First, the enormous microbial diversity has made complete description of the community difficult; second, the number of available complete genomes from the microbial community relative to the total number of species is severely limited; and third, it is much more difficult to perform functional studies on microbial communities than single isolates.

An alternative strategy for understanding potential functions of microbial communities that circumvents these problems was recently reported by Tringe et al. for analysis of several environmental microbial communities (Tringe et al. 2005) (and Fig. 2). This analysis represents the community not from the viewpoint of the individual organisms present, but rather from the collective gene content of the constituent organisms. For this analysis, small insert libraries were created for farm soil and several whale falls and approximately 25-100 Mb of sequence was generated from each library. No attempt was made to assemble the sequencing reads. Instead, the reads (referred to as “environmental gene tags” or EGTs) were individually annotated and when possible a putative gene function assigned to each read based on its best BLAST hit. EGTs were then binned by related function and the prevalence of specific functions compared between four environments: soil, whale falls and two previously reported environmental samples, a biofilm obtained from acid mine runoff (Tyson et al. 2004), and seawater collected from the Sargasso Sea (Venter et al. 2004). Phylogenetic trees were constructed from these EGT fingerprints which showed that samples obtained from similar environments clustered together. Further more, analysis of EGTs over-represented in specific environments suggest functions important for survival in that environment (e.g. sodium transporters in seawater). It is easy to imagine how such an analysis could be used to understand the function of microbial community in the gut and other human environments. EGT fingerprints of microbial communities from diseased and normal individuals might be compared, or those from single individuals subjected to different diets.

Despite the accumulating data for the role of microbes in human health, little is known about the other side of the symbiotic relationship, the benefits provided to the microbial community by the human host and the selective pressures the host environment exerts. This is largely due to the difficulty of analyzing complex microbial communities in different host settings. With the advance of sequencing capacity and new technologies like EGT fingerprints, one might imagine the value of studying microbial communities in genetically amenable model organisms, such as mice carrying genetic modifications that alter the immune system or gut development, may provide novel insights in understanding the host-microbe interaction. While the study of Tringe et al compared quite different microbial communities, one might expect that the number of EGTs altered in congenic mice, raised together and eating the same diet but differing in the presence or absence of a single gene might be much more limited. Depending on the magnitude of the changes, they may be difficult to identify, but if found could be readily related to phenotypic changes in the host.

Conclusion and Future Directions

Culture independent methods, while largely developed for analysis of environmental microbes, have found broad utility in human ecology and have led to an appreciation for the diversity of microbial communities inhabiting normal humans (gut, oral, ear, blood?). Quantitative PCR methods show particular promise for providing rapid identification of human pathogens that may allow clinicians to narrow and limit antibiotic use, which could in turn limit the spread of antibiotic resistance. As DNA sequencing capacity grows and costs fall, sequence-based methods of analysis will be expanded to provide snap-shots of the microbes present in many body fluids and tissues and the functions encoded in their genes. Specifically, we predict that expansion of EGT-based methods to complex microbial communities in the mouth, gut, skin and vagina may lead to an understanding of their role in human health and disease.

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