

# Alterations in bile acid metabolizing gut microbiota and specific bile acid genes as a precision medicine to subclassify NAFLD

## Short title: Bile acid metabolizing microbiota in NAFLD

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### Abbreviations:

**baiA**, 3 $\alpha$ -hydroxysteroid dehydrogenase; **baiB**, bile acid-coenzyme A ligase; **baiCD**,  
7 $\alpha$ -hydroxy-3-oxo-D4-cholenoic acid oxidoreductase; **baiE**, bile acid 7 $\alpha$ -  
dehydratase; **baiF**, bile acid coenzyme A transferase/hydrolase; **baiG**, primary bile  
acid transporter; **baiH**, 7beta-hydroxy-3-oxochol-24-oyl-CoA 4-desaturase; **baiI**, bile  
acid 7beta-dehydratase; **BAs**, bile acids; **BSH**, bile salt hydrolase; **FXR**, farnesoid X  
receptor; **HMM**, hidden Markov model; **HSDH**, hydroxysteroid dehydrogenase;  
**MAG**, metagenome-assembled genome; **NAFLD**, non- alcoholic fatty liver disease;  
**NASH**, non-alcoholic steatohepatitis; **WMS**, whole metagenome sequences.

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70

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72 The datasets supporting the conclusions of this article are available in the NCBI's

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77

## 78 **Synopsis**

79 The microbial markers identified at the species/strain levels may be useful for  
80 non-invasive diagnosis of NAFLD. The microbial differences in bile acid metabolism  
81 and strain-specific differences among NAFLD microbiota highlight the potential for  
82 precision medicine in NAFLD treatment.

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85

# 86    **Abstract**

87    **Background & Aims:** Multiple mechanisms for the gut microbiome contributing to

88    the pathogenesis of non-alcoholic fatty liver disease (NAFLD) have been implicated.

89    Here, we aim to investigate the contribution and potential application for altered bile

90    acid (BA) metabolizing microbe in NAFLD using whole metagenome sequencing

91    (WMS) data.

92    **Methods:** 86 well-characterized biopsy-proven NAFLD patients and 38 healthy

93    controls were included in the discovery cohort. Assembly-based analysis was

94    performed to identify BA-metabolizing microbes. Statistical tests, feature selection

95    and microbial interaction analysis were integrated to identify microbial alterations and

96    markers in NAFLD. An independent validation cohort was subjected to similar

97    analyses.

98    **Results:** NAFLD microbiota exhibited decreased diversity and microbial interactions.

99    We established a classifier model with 53 differential species exhibiting a robust

100    diagnostic accuracy (AUC=0.97) for detecting NAFLD. Next, 8 important

101    differential pathway markers including secondary BA biosynthesis were identified.

102    Specifically, increased abundance of 7 $\alpha$ -HSDH, baiA and baiB were detected in

103    NAFLD. Further, 10 of 50 BA-metabolizing metagenome-assembled genomes

104    (MAG)s, from *Bacteroides ovatus* and *Eubacterium bifforme*, were dominant in

105    NAFLD and interplayed as a synergetic ecological guild. Importantly, two subtypes

106    of NAFLD patients were observed according to secondary BA metabolism potentials.

107 Elevated capability for secondary BA biosynthesis was also observed in the validation  
108 cohort.

109 **Conclusions:** We identified novel bacterial BA-metabolizing genes and microbes that  
110 may contribute to NAFLD pathogenesis and serve as disease markers. Microbial  
111 differences in BA-metabolism and strain-specific differences among patients highlight  
112 the potential for precision medicine in NAFLD treatment.

113 **Keywords:** NAFLD; gut microbiota; secondary BA synthesis; whole metagenome  
114 sequencing data

115

## 116    **Introduction**

117    Non-alcoholic fatty liver disease(NAFLD) has become one of the leading causes of  
 118    liver disease worldwide, with the global prevalence estimated to be 24%.[1] NAFLD  
 119    is expected to be the No. 1 cause for cirrhosis in the United States within a decade.[2]  
 120        The pathogenic mechanism of NAFLD remains unclear. The current multiple-hit  
 121    hypothesis is that NAFLD is a consequence of a myriad of factors acting in a parallel  
 122    and synergistic manner in individuals with genetic predisposition.[3] Factors such as  
 123    insulin resistance, central obesity, environmental or nutritional factors, and gut  
 124    microbiota, as well as genetic and epigenetic factors, are linked to its pathogenesis.[2,  
 125    4, 5]

126        Recently, the crosstalk between the gut and the liver is increasingly recognized, and  
 127    many studies have reported dysregulated gut microbiota in NAFLD patients. [6-10]  
 128    There are several potential mechanisms for the gut microbiota to influence NAFLD  
 129    development. These effects are mediated by microbial components and metabolites,  
 130    such as lipopolysaccharide, alcohol, and bile acid(BA).[11]

131        BA not only facilitate the digestion and absorption of fatty foods as detergent, they  
 132    also act as important signaling molecules via nuclear receptors, such as farnesoid X  
 133    receptor(FXR) and G protein coupled BA receptor(GPBAR1 or TGR5) to modulate  
 134    hepatic BA synthesis, glucose and lipid metabolism. Recently, we observed  
 135    suppressed BA-mediated FXR signaling in NAFLD liver and intestine, which is in  
 136    harmony with increased secondary BA production. Furthermore, using 16S rRNA

137 data, we observed elevated abundance of secondary BA metabolizing related bacteria  
138 and pathways in the gut microbiome of NAFLD. [12] However, the 16S rRNA  
139 sequencing data has limited resolution which does not allow the identification of the  
140 species or an accurate functional analysis. [13]

141 Whole metagenome sequencing(WMS) allows us to achieve a satisfactory  
142 resolution of the microbiome. Earlier we have used the WMS data to characterize the  
143 gut microbiota in NAFLD patients with and without advanced fibrosis and identified  
144 37 differential bacterial species, among which the abundance of *Escherichia coli* and  
145 *Bacteroides vulgatus* was increased in patients with advanced fibrosis and it's  
146 association with microbial metabolites.[9, 14-16] WMS data were also used to study  
147 the interactions between the gut microbiome and steatosis in obesity.[15, 17]  
148 However, a similar study is lacking for the comparison of the gut community between  
149 healthy and NAFLD subjects using WMS data, which is our goal in this study. Here  
150 we report the structural and functional characteristics of the gut microbiome in  
151 NAFLD, and its association with BA metabolism.

152

## 153 **Results**

### 154 ***Gut microbiota alterations between NAFLD patients and healthy controls***

155 WMS data from 86 well-characterized biopsy-proven NAFLD patients and 38 healthy  
156 controls with similar characteristics (Table 1 and Table S1) were chosen to study the

157 structural and functional differences in gut microbiota between NAFLD patients and  
158 healthy controls. And we have confirmed that gender or age distribution did not  
159 account for the observed microbial differences in this study (Figure S1).

#### 160 *Compositional changes in NAFLD gut microbiota*

161 We determined the microbial compositions of NAFLD and healthy controls using  
162 WMS data. Bacteroidetes, Firmicutes, Actinobacteria and Proteobacteria were the  
163 dominant phyla that collectively account for around 90% proportions in both groups  
164 (Figure S2A). NAFLD individuals had lower bacterial diversity than healthy controls  
165 (Figure S2B). Besides, significant compositional differences were observed between  
166 these two groups (Figure S2C).

167 To identify microbial markers that may distinguish NAFLD from healthy subjects,  
168 differential species were determined with Mann-Whitney U-tests. 53 species with  
169 FDR values < 0.1 were identified as differential species (Figure 1 & Table S2).

170 Among these, 11 species were dominant in NAFLD patients, which mainly belong to  
171 Clostridia class, including *Eubacterium siraeum*, *Clostridium bolteae*, *E. coli* and  
172 *B.ovatus*, *B.stercoris* from Bacteroidia class. On the other hand, 42 species  
173 significantly reduced in NAFLD patients were mainly of Bacteroidia class, including,  
174 *Bacteroides dorei*, *Alistipes shahii*, and of Clostridia class, for instance, *Eubacterium*  
175 *eligens*, *Eubacterium hallii*, and *Faecalibacterium prausnitzii*. In addition, random  
176 forest (RF) model constructed with differential species achieved an AUC of 0.97 to  
177 detect NAFLD patients from controls (Figure S3).

# 178    *Ecological structural changes in NAFLD gut microbiota*

179    Furthermore, at whole-community level, microbial interaction analysis was performed

180    to investigate potential changes in ecological structure. There were more species in

181    healthy communities than those in NAFLD communities (167 nodes vs 141 nodes)

182    though with similar amount of interactions. Then, we examined the “core community”

183    (interactions with magnitudes > 0.4) of healthy and NAFLD groups, respectively.

184    Considerable discrepancies existed in the “core community” of healthy and NAFLD

185    (Figure 2A&B). In detail, the healthy “core community” was more complex, with 162

186    species and 565 interactions, compared to the NAFLD community with 81 species

187    and 166 interactions. And the NAFLD community was separated into 8 isolated

188    components, an indication of unstable microbial community. Among them, the major

189    component harbored most species from Clostridia class, such as BA production

190    bacteria, *C.bolteae* (node NO. 78), *C.clostridioforme* (node NO. 138) with increased

191    proportion in NAFLD, while species from Bacilli class were dominant in the second

192    major component. Besides, species with increased abundance in NAFLD patients

193    (circle nodes in Figure 2B) were dominant in the “core community” and positively

194    interacted with each other. Then, we looked into the top 20 hub species of “core

195    community”, respectively. 10 of them were common in both group, such as *C.bolteae*,

196    *C.hathewayi*, *Dorea longicatena*, *Flavonifractor plautii*, which may play the role as

197    the “keystone” to sustain the homeostasis (Figure 2C&D).

198

## 199 *Functional changes in NAFLD gut microbiota*

200 Microbial functional profiles were determined at pathway level using HUMAnN2 and  
201 92 differential pathways were identified between the NAFLD and the healthy groups  
202 (Table S3). Similarly, we identified 8 important pathway features (Figure 3A) to build  
203 RF model (AUC=0.83) that could distinguish NAFLD patients from healthy subjects  
204 (Figure 3B). Most pathways were more represented in NAFLD microbiota than in  
205 controls. These pathways included secondary BA synthesis (ko00121) (Figure 3C),  
206 benzoate degradation (ko00362), biosynthesis of ansamycins (ko01051) and oxidative  
207 phosphorylation (ko00190) (Figure S4).

## 208 *Novel genes and microbial genomes associated with secondary BA synthesis*

209 The fact that the secondary BAs biosynthesis pathway was significantly elevated in  
210 NAFLD (Figure 3C) prompted us to examine the relevant BA metabolizing enzymes  
211 encoded by the microbiome. Taking advantage of the WMS data, we were able to  
212 quantify the gene abundance and to map these genes to specific microbial genomes.

## 213 *Genes related to secondary BA synthesis*

214 Bacterial genes directly involved in secondary BA synthesis catalyze the  
215 deconjugation, the oxidation and epimerization, or the multi-step 7 $\alpha$ -dehydroxylation  
216 reactions (Figure 4A). Protein sequences of target enzymes were collected from  
217 Integrated Microbial Genomes(IMG) database (Figure 4A).[18] High quality protein  
218 sequences were selected to construct hidden Markov models(HMMs), in order to

219 identify potential BA metabolizing enzymes.

220 The data (Figure 4B) showed that genes encoding 7- $\alpha$ -hydroxysteroid  
221 dehydrogenase(7 $\alpha$ -HSDH), BSH and bile acid inducible operon (bai)A, baiB, baiCD,  
222 baiH were relatively more abundant than baiE, baiF and baiI. Importantly,  
223 significantly increased abundance of 7 $\alpha$ -HSDH, baiA and baiB were observed in  
224 NAFLD compared to controls. These data were consistent with the pathway analysis  
225 results, and confirmed the increased secondary BA production in NAFLD.[12]

226 *Novel identification of microbial genomes related to secondary BA synthesis*  
227 *using advanced bioinformatics*

228 To identify the BA metabolizing microbial genomes, the metagenomic-assembled  
229 species(MAG) analysis was performed. Prevalent genes in the non-redundant gene  
230 catalog that presented in more than 5 samples were binned into 252 MAGs, which  
231 were considered to represent distinct microbial genomes. Among these, 50 MAGs that  
232 contain at least one gene encoding BSH, HSDH or bile acid inducible operons (Table  
233 S4) were defined as BA-metabolizing MAG. To obtain relatively complete microbial  
234 genomes, we re-assembled these 50 MAGs using high quality reads mapped to genes  
235 in each MAG.

236 Among these, 10 MAGs exhibited significantly increased abundance in NAFLD,  
237 while 18 MAGs were reduced in NAFLD (Figure 5A). Among the 10 MAGs elevated  
238 in NAFLD, 6 MAGs belong to Bacteroides (order Bacteroidales), including

239 *B.vulgatus*, *B.ovatus*, and *B.stercoris*. Other MAG genomes were assigned as  
240 *E.rectale* and *E.biforme* (order Clostridiales). BA-metabolizing MAGs with reduced  
241 abundance in NAFLD are mainly from *R.bromii*, *D.longicatena* and *B. dorei*.  
242 Furthermore, we explored the species' contributions of pathways in via HUMAnN2,  
243 and found that the pathway secondary bile acids biosynthesis were mainly encoded by  
244 *E.eligens* (48.3%) and *B.vulgatus* (26.2%)( Figure S5). This is consistent with the  
245 increased BA-metablizing MAGs belonging to species *Bacteroides vulgatus* and  
246 *Eubacterium eligens*.

247 For a better understanding of the BA metabolizing microbial community, microbial  
248 interactions analysis was performed with BA-metabolizing MAGs. In contrast to the  
249 situation where more interactions existed in healthy group on whole-community level,  
250 we found that the sub-network of BA-metabolizing MAG was more complex with  
251 considerable interactions in NAFLD than in controls (164 and 100 edges,  
252 respectively) (Figure 5B &C). In addition, most MAGs with higher proportions in  
253 NAFLD patients were hub nodes in both healthy and NAFLD BA-metabolizing  
254 communities and were positively interacted, such as *Bacteroides sp.* MAG001,  
255 *B.vulgatus* MAG007, *B.ovatus* MAG026, *B.vulgatus* MAG030 and *B.xylanisolvens*  
256 MAG117. These are likely "house-keeping" species for BA metabolism. In contrast,  
257 *Bacteroides stercoris* MAG003, an MAG not included in the healthy network, was  
258 highly elevated in NAFLD, ranked high in the NAFLD network, and positively  
259 interacted with the "house-keeping" BA metabolizing species. Similarly, *E.biforme*

260 MAG036 and MAG089, which exhibited the lowest hub score in healthy network,  
261 ranked the highest in NAFLD network.

262 In general, the observed species were represented by multiple MAGs. Here,  
263 *R.bromii* was represented by 7 MAGs, and *E.eligens* by 5 MAGs. However, only one  
264 of the 7 *R.bromii* MAG was significantly increased in NAFLD group, while 4 others  
265 showed decreased abundance (Table S5). Situations were similar in *B.vulgatus* (two  
266 of three increased) and *E.rectale* (one increased and two decreased). Unexpectedly,  
267 multiple MAGs of the same species were distributed in different modules both in  
268 healthy and NAFLD communities (Table S6). Apparently, these observations indicate  
269 that strains within the same species may function differently.

270 ***Different BA metabolizing potentials among NAFLD microbiota and***  
271 ***emergence of two subtypes of NAFLD: High BA versus normal BA subtype***

272 Although the average abundances of the secondary BA metabolism pathway and  
273 related genes were increased in NAFLD, we noticed that the abundances exhibited a  
274 broad distribution among NAFLD patients (Figure 3C and 4B). Many of the NAFLD  
275 microbiota exhibited BA metabolizing potentials similar to those of healthy controls.  
276 Based on the abundance of 3 differential BA-metabolizing genes (*7α*-HSDH, *baiA*  
277 and *baiB*), NAFLD patients were clustered into two subtypes: normal-BA subtype  
278 comprising 45 patients and high-BA subtype comprising 37 patients (Figure 6A),  
279 which was not related to the disease severity ( $p=0.7$ ). The abundances of the 3 marker  
280 genes were all significantly higher in high-BA subtype, but were similarly represented

281 between normal-BA subtype and healthy control group (Figure 6B). In addition, we  
 282 performed the PCA analysis based on the entire differential microbial enzymes and  
 283 found that the normal-BA subtype and the healthy control group exhibited closer  
 284 distance, as compared to the high-BA group (Figure 6C). In further characterization of  
 285 the microbial profiles of the patterns of the normal-BA and high-BA groups, we  
 286 identified 3 species (Table S7), 68 enzymes (Table S8) and 16 pathways (Table S9)  
 287 that could distinguish the normal-BA subtype from the high-BA subtype, and, at the  
 288 same time, could distinguish NAFLD from the healthy group. Based on the relative  
 289 abundance of these differential features, the study subjects were clustered into three  
 290 groups consistent with their BA metabolizing potentials. Features were also clustered  
 291 into two groups (Figure S6). One group (including species *Flavonifractor plautii*,  
 292 enzymes 2-dehydropantoate 2-reductase and glutamate 5-kinase and pathway  
 293 glycosaminoglycan degradation etc.) exhibited elevated abundance in normal-BA  
 294 subtype and reduced abundance in high-BA subtype. The other group (including  
 295 species *Escherichia coli* and *Ruminococcus bromii*, enzymes glycerol dehydrogenase,  
 296 agmatinase and pathway citrate cycle, phosphotransferase system etc.) exhibited an  
 297 opposite distribution among the study groups.

### 298 *Elevated secondary BA synthesis capability in the validation cohort of* 299 *NAFLD*

300 Similar analyses were performed with the validation dataset. The secondary BA  
 301 synthesis genes 7 $\alpha$ -HSDH, BSH, baiA, baiB, baiCD, baiF, and baiH were relatively

302 more abundant than baiE and baiI. Importantly, significantly increased abundance of  
303 most secondary BA synthesis genes were observed in NAFLD compared to controls  
304 (Figure S7).

305 As for BA metabolizing microbial genomes, we identified 13 MAGs, each carrying  
306 at least one gene encoding BSH, HSDH or bai operon. Among these, 9 MAGs  
307 exhibited a trend of increased abundance in NAFLD. Consistent with the discovery  
308 cohort, these 9 MAGs belonged to *B. vulgatus*, and *R. bromii*(Table S10). Statistical  
309 significance was not achieved for the increased abundances of the MAGs, likely due  
310 to the small sample size.

## 311 Discussion

312 In this study, we defined the structural and functional differences in gut microbiota  
313 between NAFLD and healthy subjects, at the resolutions of gene, species and strain.  
314 The current study is novel in using WGS data to compare the gut microbiota between  
315 NAFLD and healthy controls and underpinning the role of BA metabolizing  
316 microbiome in NAFLD, and potentially identifying two microbiota-derived subtypes  
317 of NAFLD that may have clinical implications for both biomarker as well as  
318 therapeutic development. Compared with the approach of 16S rRNA sequencing,  
319 WMS data allow direct function quantification and accurate taxa assignment of the  
320 entire gut microbiome, at the levels of species and strain. Out of the many differential  
321 representations of genes and species between NAFLD and healthy controls, one  
322 outstanding observation is the increased abundance of secondary BA metabolizing

323 genes and microbes in NAFLD and that BA metabolizing bacteria were dominant taxa  
324 in the gut of NAFLD. For the first time, we identified the genes and bacterial strains  
325 responsible for elevated secondary BA synthesis in NAFLD. Similarly, increased  
326 abundances of the BA metabolizing genes and bacterial species were observed in an  
327 independent validation cohort. Considering the profound impact of BA signaling on  
328 lipid and carbohydrate metabolism[19], the differential BA metabolizing genes and  
329 bacterial strains we identified may serve as novel therapeutic targets for NAFLD  
330 management.

331 We and others have reported elevated secondary BA production in NAFLD. [12,  
332 20] In our previous study[12], we observed much increased secondary BAs in  
333 NAFLD serum and consistently, an elevated taurine metabolizing microbiota, an  
334 indication of increased BA metabolism in the gut. However, we did not observe any  
335 significant change in the abundance of those microbes that directly metabolize BA  
336 (that is, microbes encoding BSH, 7-alpha-HSDH and 7-alpha-dehydroxylase), likely  
337 because the 16S rRNA sequencing approach was not able to provide a sufficient  
338 resolution for functional analysis. With the advantage WGS data, the current study  
339 was able to provide convincing evidence at a satisfactory resolution, that secondary  
340 BA synthesis enzymes and microbes with secondary BA metabolizing potentials were  
341 indeed elevated in NAFLD gut microbiota. As secondary BAs are potent antagonistic  
342 ligands for FXR, data presented here is a strong support for the hypothesis that

343 elevated secondary BA synthesis by the microbiota contributes to NAFLD  
 344 etiology.[12, 21]

345 Although on average NAFLD patients exhibited elevated BA metabolizing  
 346 microbiota, and higher serum DCA (secondary BA) when compared to healthy  
 347 controls, our data showed that elevated BA metabolizing microbiota was not a  
 348 unanimous phenomenon in NAFLD. More than half of the NAFLD patients (45 out of  
 349 82) had a microbiota with normal BA metabolizing potential. Based on BA  
 350 metabolizing potentials, our NAFLD patients can be clustered into two subtypes. This  
 351 indicates that BA related pathomechanism does not apply to many NAFLD patients,  
 352 in line with the current multi-hit hypothesis.[3] Besides the difference in BA  
 353 metabolizing potentials, these two subtypes of the gut microbiota also exhibit  
 354 different abundances in other genes, pathways, and bacterial species. It is interesting  
 355 to note that NAFLD microbiota with higher BA metabolizing potentials also exhibited  
 356 elevated representation of *E.coli*, a potent alcohol producer[6, 22], suggesting that the  
 357 gut microbiota may impact NAFLD pathogenesis through multiple mechanisms in the  
 358 same patient.

359 BA based therapies such as obeticholic acid has been shown to improve NASH.  
 360 [23] However, the response rates to OCA in improvement of one-stage of fibrosis in  
 361 the FLINT trial was 35% versus 19% in placebo.[24] It is plausible that NAFLD  
 362 patients with altered BA subtype may be more likely to respond to BA based therapies

363 and those with a normal BA subtype should receive an alternate strategy paving the  
364 pay for a microbiome based precision medicine tool in NASH therapeutics.

365 Another outstanding observation in this study is that many strains of the same  
366 species are functionally different. Specifically, different strains of *Bacteroides ovatus*  
367 were clustered into different functional modules (modules 0, 2, 4 in healthy  
368 communities and modules 3, 4, 6 in NAFLD communities). It is also interesting to  
369 note that only one of the four observed strains of *Bacteroides ovatus* was significantly  
370 increased in NAFLD group. Similar observations were reported for *F. prausnitzii*[25,  
371 26] and *E.coli*[27, 28], suggesting the genomic variability within a microbial  
372 species.[29] Some of the microbiome studies based on 16S rRNA platforms may need  
373 a re-evaluation because of this genomic variability.

374 It was interesting to note that 10 BA-metabolizing bacterial strains, including  
375 *B.stercoris*, *E.biforme*, and *R.bromii*, were elevated and were dominant strains in  
376 NAFLD microbiota. These BA-metabolizing strains belong to two different phylum.  
377 Zhao et al. proposed a concept in gut microbiota that a group of species that “exploit  
378 the same class of environmental resources in a similar way” may be considered as a  
379 “guild” in ecology[30] and members of a guild do not necessarily share taxonomic  
380 similarity, but they co-occur when adapting to the changing environment.[25]

381 Similarly, the 10 BA-metabolizing strains may act as a synergetic guild to promote  
382 the secondary BA production in the NAFLD microbial community. There were more  
383 positive interactions among these 10 strains in NAFLD community than in healthy

community, indicating elevated capabilities of secondary BA production and intensified competition among these secondary BA producers within the microbial guild of NAFLD. It is likely that these strains are responsible for elevated secondary BA production in NAFLD, contributing to NAFLD pathogenesis.[12] Among these 10 strains, MAG036 , MAG089 , and MAG003 with increased abundance and the highest network importance in NAFLD may act as the “keystone” species[53], and therefore, represent potential targets for intervention.

At the whole community level, the NAFLD gut microbiota exhibited significantly reduced diversity compared to the healthy controls. In addition, much reduced interactions among the members of the NAFLD gut microbiota were observed. With less strains and sparse interactions, the gut microbial community in NAFLD is relatively weak and unstable. Similarly, reduced biodiversity were reported in the gut of obesity.[31] It is postulated that long-term dietary habit is the major cause for the altered gut microbiota.[32] The biodiversity disaster in the gut of humans demands immediate attention. The restoration of the gut microbial diversity may, at the same time, prevent or cure many of the microbiota related diseases including NAFLD.

In summary, we identified specific genes and bacterial strains responsible for elevated secondary BA production in NAFLD. These genes and strains may serve as novel therapeutic targets for microbiome-based high-BA subtype of NAFLD. These findings strongly support our hypothesis that elevated secondary BA synthesis contributes to the development of NAFLD. In addition, our WGS study revealed the

heterogeneity of the gut microbiota among NAFLD patients highlighting the importance of personalized treatment for NAFLD. Our study also revealed many other microbial characteristics of the NAFLD that demands attention such as the much reduced diversity and the ecological guild in the gut of NAFLD.

## **Materials and Methods**

### ***Data information and preprocessing***

Discovery dataset: The NAFLD datasets and relevant meta data(Sequence Read Archive, PRJNA373901) were described previously[9] comprising 86 biopsy-proven NAFLD patients. The healthy control dataset was from PRJEB6070[33], with 38 healthy individuals with BMI < 25. These subjects were chosen because of similar age and gender ratio compared to NAFLD patients to effectively reduce bias[34] (Table 1 & Table S1).

Validation dataset: 10 middle-aged NAFLD subjects [35] (PRJNA420817) were recruited to a diet trial and the initial baseline data before diet intervention were used for this study. 11 healthy subjects from MetaHit Project[36](Sequence Read Archive, PRJEB1220) with similar age and gender ratio were chosen as controls (Table 1& Table S1).

All subjects provided a written informed consent and the study protocol was approved by Institutional Review Board (approval number:UCSD IRB11298) or registered at ClinicalTrials.gov with identifier: NCT02558530.

425 The KneadData(<http://huttenhower.sph.harvard.edu/kneaddata>) tool was used to  
426 ensure the data consisted of high quality microbial reads free from contaminants. The  
427 low quality reads were removed using Trimmomatic(SLIDINGWINDOW:4:15  
428 MINLEN:75 LEADING:10 TRAILING:10). The remaining reads were mapped to the  
429 human genome(hg38) by bowtie2[37], and the matching reads were removed as  
430 contaminant reads from the host.

### 431 *Gene-based taxonomic and functional profiling of gut microbiota*

432 MetaPhlAn2[38] was used to identify the composition of gut microbial community  
433 and to assess the abundance of the prokaryotes within each sample. Species that failed  
434 to exceed 0.01% relative abundance in at least 20% samples were excluded.

435 The functional profiling of gut microbiome was determined by the HMP Unifiled  
436 Metabolic Analysis Network (HUMAN2)[39]. In brief, high-quality metagenomic  
437 reads were mapped to the pangenomes of species identified with MetaPhlAn2 and  
438 these pangenomes have been pre-annotated by UniRef90 families. Reads failed to  
439 map to a pangenome were aligned to UniRef90 by translated search with  
440 DIAMOND[40]. Hits to UniRef90 are weighted according to alignment quality,  
441 sequence length and coverage. In this study, enzyme abundance was quantified by  
442 regrouping (summed) according to EC number and pathway abundance by regrouping  
443 (summed) genes in pathways against KEGG database.

#### 444 ***Identification of genes required for secondary BA synthesis***

445 To identify genes that encode enzymes catalyzing secondary BA synthesis, hidden  
 446 Markov models (HMMs) of BA-related genes were constructed. Secondary BA  
 447 synthesis mainly involves (1) deconjugation, (2) oxidation and epimerization and (3)  
 448 multi-step 7 $\alpha$ -dehydroxylation. Enzymes participating in these processes are bile salt  
 449 hydrolase (BSH), hydroxysteroid dehydrogenase (HSDH) and enzymes required in  
 450 the multi-step 7 $\alpha$ -dehydroxylation (including baiA, baiB, baiCD, baiE, baiF, baiH and  
 451 baiI).[18] Representative protein sequences of target enzymes were obtained from  
 452 Integrated Microbial Genomes (IMG) database[41]. High quality sequences were  
 453 selected and aligned in Clustal Omega[42] before they were used to construct HMMs  
 454 on full-length proteins via hmmbuild in HMMER(3.1b2)[43]. Model seed sequences  
 455 were realigned to the model using hmmlalign (default mode) before rebuilding models  
 456 based on the obtained alignments until both model length and relative entropy per  
 457 position were constant. Subsequently, all protein sequences in non-redundant gene  
 458 catalog were screened (hmmsearch) for candidate protein sequences and sequences  
 459 with hmmscore > lower quartile score and e-value less than 10<sup>-5</sup> were identified as  
 460 potential secondary BA synthesis associated genes.

#### 461 ***Assembly-based microbial genomes***

462 For functional analysis of the microbial genomes, we performed bin-based microbial  
 463 genome assembly with the WMS data, including de novo assembly and non-redundant

464 human gut gene catalog construction, co-abundance clustering and determination of  
465 metagenome-assembled genomes (MAG), MAG-augmented assembly and taxonomic  
466 annotation.

#### 467 *De novo assembly and non-redundant human gut gene catalog construction*

468 High-quality paired-end reads from each sample were used for de novo assembly with  
469 Megahit[44] into contigs of at least 500-bp length. Genes were predicted on the  
470 contigs with MetaGeneMark[45]. A non-redundant gene catalog related to NAFLD  
471 was constructed with CD-HIT[46] using a sequence identity cut-off of 0.95, with a  
472 minimum coverage cut-off of 0.9 for the shorter sequences and 11,348,567 microbial  
473 genes were contained.

#### 474 *Co-abundance clustering and determination of MAG*

475 Bowtie2 was used to align high quality reads to the non-redundant gene catalog.  
476 Aligned results were random sampled and downsized to 15 million per sample  
477 (FR-173, FR-719, FR-730, SRR4275396, SRR4275459, SRR4275469, SRR4275470  
478 were excluded for not enough reads) to adjust for sequencing depth and technical  
479 variability. The soap.coverage script (available at:  
480 <http://soap.genomics.org.cn/down/soap.coverage.tar.gz>) was used to calculate  
481 gene-length normalized base counts and the gene abundance profiling was calculated  
482 as the average abundance of 30 times of repeated sampling. All the genes were  
483 clustered into MAG using MSPminer[47] based on their abundance with default

484 parameters.

# 485 *MAG-augmented assembly and taxonomic annotation*

486 We performed augmented assembly for target MAG. Briefly, the MAG- and  
487 sample-specific reads were derived by aligning all high-quality reads to the MAG  
488 gene contigs with Burrows-Wheeler Aligner (0.7.17)[48], followed by de novo  
489 assembly with SPAdes(3.13.0)[49] using k-mers from 21 to 55. CVtree3.0 web  
490 server[50] was used to identify the taxonomy of the MAGs, which applies a  
491 composition vector to perform phylogenetic analysis.

# 492 *Statistic analysis*

## 493 *Differential features identification*

494 Compositional features and functional features that present in at least 20% of the  
495 samples and with average relative abundance over 0.01% in each group were selected  
496 for further differential analysis. Differential features were identified by two-tailed  
497 Mann-Whitney U-tests adjusted by Benjamini-Hochberg. Features with an FDR value  
498 < 0.05 (FDR values < 0.1 for species) were identified as differential features. Then  
499 differential compositional and functional feature profiles were used to build random  
500 forest(RF) model using RandomForest package in R. Feature importance were  
501 estimated via gini importance and then the best model were rebuilt by adding features  
502 according to their importance ranks. Area Under the Receiver-Operator Curve(AUC)  
503 was used to measure the accuracy of the models.

# 504    *Microbial interaction analysis*

505    SparCC[51] was performed to construct compositionality-corrected microbial  
506    interactions network, which is capable of estimating correlation values from  
507    compositional data. Interactions were calculated with 100 refining interactions, after  
508    which statistical significance of each interaction was estimated with 1000  
509    permutations. Only interactions with p value < 0.05 were included in downstream  
510    analysis and those interactions with magnitudes > 0.4 were included in the “core  
511    community”. The importance of species in the community was calculated using  
512    Hyperlink-Induced Topic Search(HITS) algorithms in Python package ‘networkx’.  
513    The networks were then visualized with Cytoscape[52] and module analysis was  
514    performed with ModuLand in Cytoscape.

# 515    *Other statistics*

516    Analysis of similarities (ANOSIM) was performed based on distance matrix for  
517    statistical comparisons of samples between groups or subtypes. P value was calculated  
518    using 9999 permutations. p < 0.05 indicates significant difference. Hetamap was  
519    plotted via “pheatmap” package in R, and features were clustered based on euclidean  
520    distance by “ward.D”. Differential features among healthy, normal-BA and high-BA  
521    groups were identified with Dunn tests adjusted by Benjamini–Hochberg, and features  
522    with FDR values < 0.05 were determined as significant differential features.

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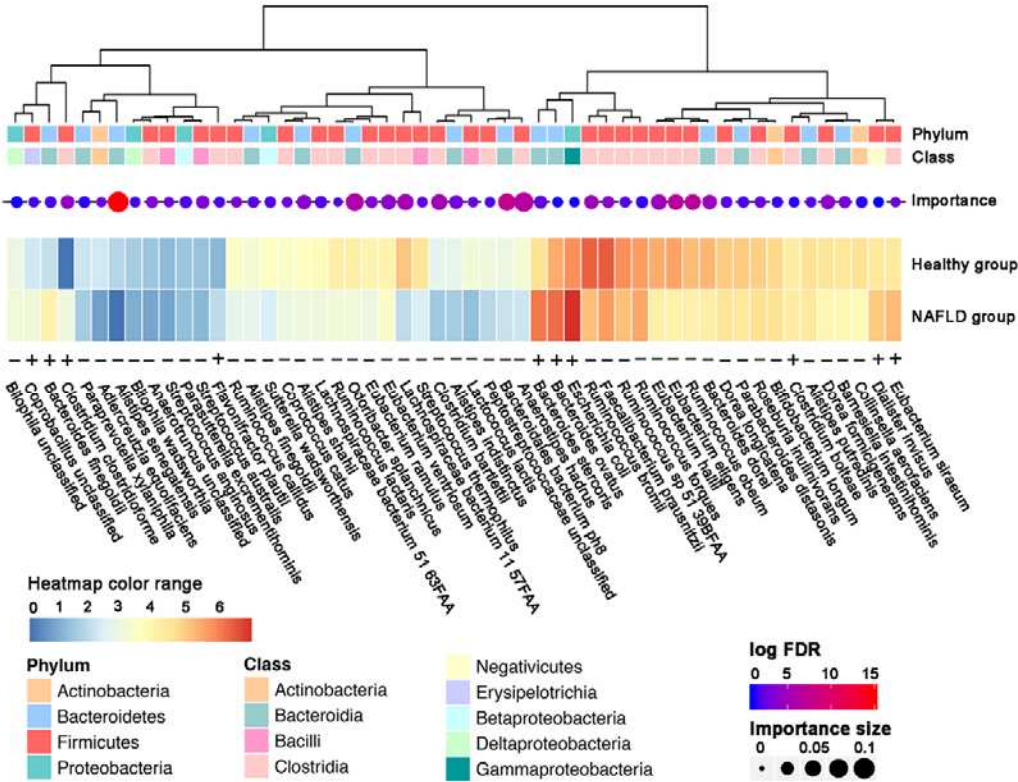
717

718

719 **Table1 Characteristics of the cohort included in this study**

	Discovery cohort		Validation cohort	
	NAFLD	Control	NAFLD	Control
Sample Size	86	38	10	11
Age	51.56±12.67	55.71±12.75	53.7±3.65	56.18±6.65
BMI	30.25±5.46	23.03±1.88	34.1±1.2	23.19±0.92
Gender(F%/M%)	44.19/55.81	50.00/50.00	20.00/80.00	63.63/36.36
AST(U/L)	32.5±29.96	NA <sup>\$</sup>	30.8±2.4	NA
LDL cholesterol(mg/dL)	116±37.12	NA	52.25±5.41 <sup>#</sup>	NA
HDL cholesterol (mg/dL)	46±15.97	NA	20.36±1.26	NA
Triglycerides(mg/dL)	129±95.70	NA	50.45±7.21	NA
Total cholesterol(mg/dL)	191.5±43.39	NA	95.90±5.41	NA

720 Data are presented as median±SD  
721 \$ NA, not available. The control groups included healthy individuals (Ref 33 and 36)  
722 # The data are converted form mmol/L to mg/dL.  
723



724  
725 Figure 1. The differential species distinguishing NAFLD patients from healthy  
726 controls. Differential species were selected by statistical tests (two-tailed  
727 Mann-Whitney U-tests adjusted by Benjamini–Hochberg). Furthermore, the

importance of the species that distinguish NAFLD patients from healthy controls was evaluated with random forest model. The heatmap shows the relative abundance (log-transformed) of the differential species in the NAFLD and the healthy groups, the size of the dots is proportional to the importance and the color shows the FDR value (-log-transformed). “+” indicates increased abundance while “-” indicates decreased abundance in NAFLD.

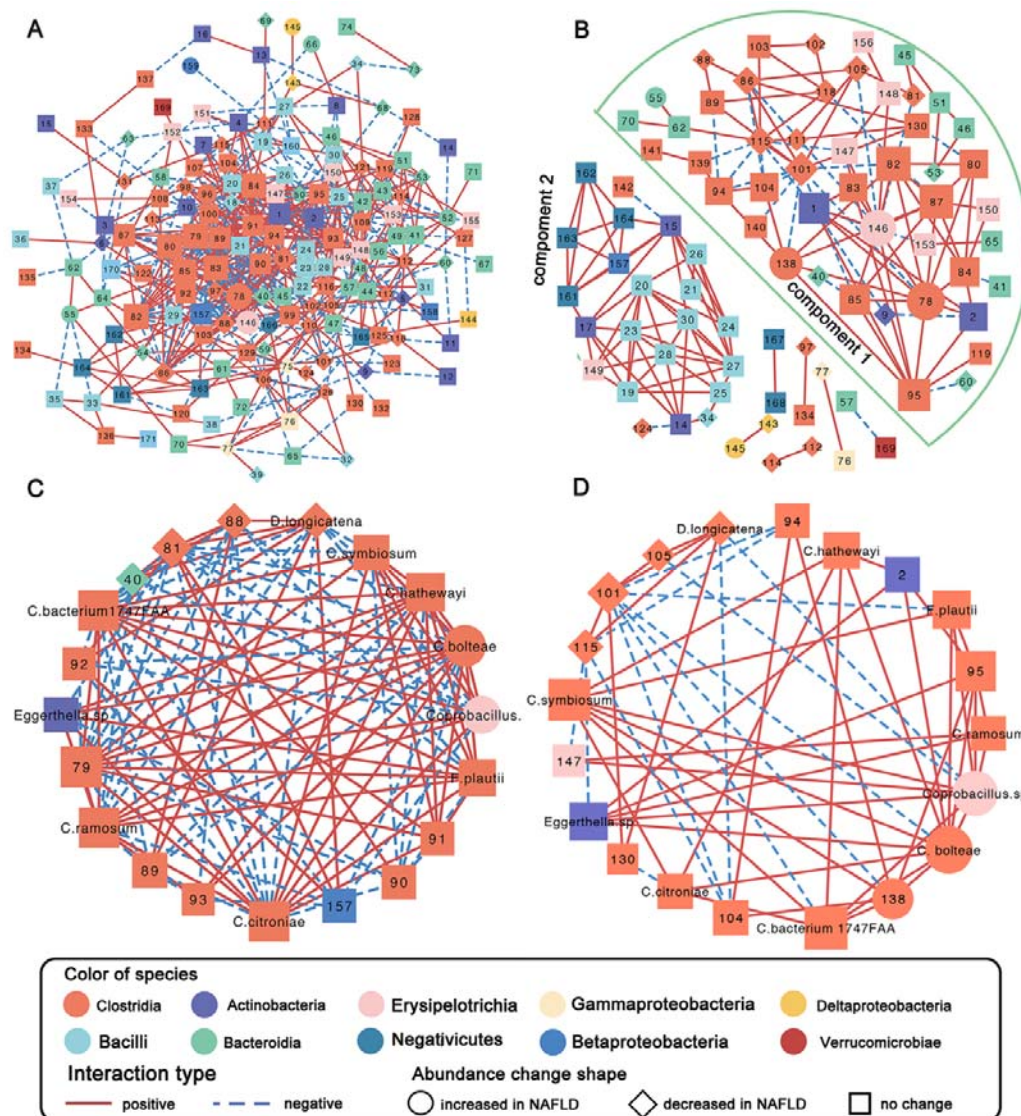


Figure 2. Microbiota “core community” in healthy controls (A&C) and NAFLD patients (B&D). The microbial interactions were calculated using SparCC with 100 refining interactions, and p value of each interaction is approximated with 1000

permutations. Only interactions with p value < 0.05 and interactions with magnitudes > 0.4 were included in the “core community”. The species were colored according to the class they belong to and the node size indicates the hub score in their community. Sub-network of top 20 hub nodes in healthy community (C) and NAFLD community (D) was also plotted. The nodes indicated by species name were common species in both sub-networks.

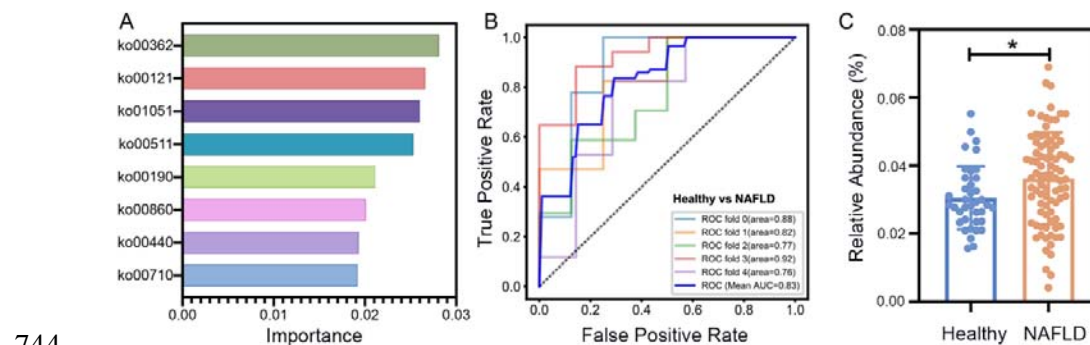


Figure 3. The differential pathway markers distinguishing NAFLD patients from healthy controls. Differential pathways were selected by two-tailed Mann-Whitney U-tests adjusted by Benjamini–Hochberg. Pathways with FDR values < 0.05 were included. Important differential pathway markers were then identified with random forest model and with the top 8 important pathways, the model achieved the highest AUC value. (A). The importance of pathways evaluated in NAFLD with the random forest model. (B). The AUC curve of random forest model with the top 8 important pathways. (C). The abundance of secondary A biosynthesis pathway (ko00121) in the healthy and the NAFLD groups. Values are the mean±SD. \* indicates FDR<0.05.

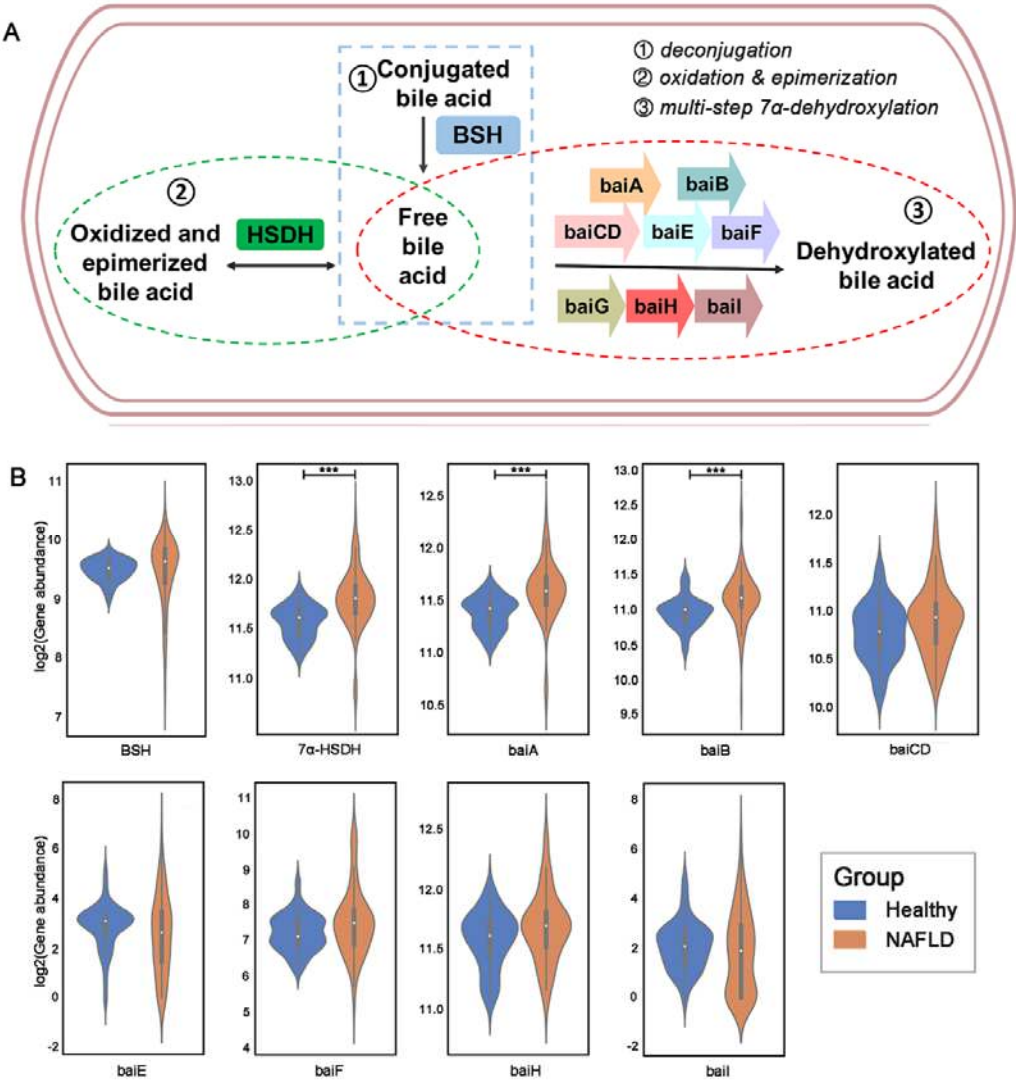


Figure 4. The abundance of the bacterial genes related to secondary bile acid synthesis. (A) Genes responsible for secondary bile acid biosynthesis can be grouped into 3 categories: (1) deconjugation, (2) oxidation and epimerization and multi-step 7α-dehydroxylation. (B) Gene abundance in health and NAFLD groups. Differences were identified by two-tailed Mann-Whitney U- tests adjusted by Benjamini–Hochberg. BSH: bile salt hydrolase; HSDH: hydroxysteroid dehydrogenase; baiA, 3α-hydroxysteroid dehydrogenase; baiB, bile acid-coenzyme A ligase; baiCD, 7α -hydroxy-3-oxo-D4-cholenoic acid oxidoreductase; baiE, bile acid 7α- dehydratase; baiF, bile acid coenzyme A transferase/hydrolase; baiG, primary bile

acid transporter; baiH, 7beta-hydroxy-3-oxochol-24-oyl-CoA 4-desaturase; baiI, bile  
acid 7beta-dehydratase. \*\*\* indicates FDR<0.001.

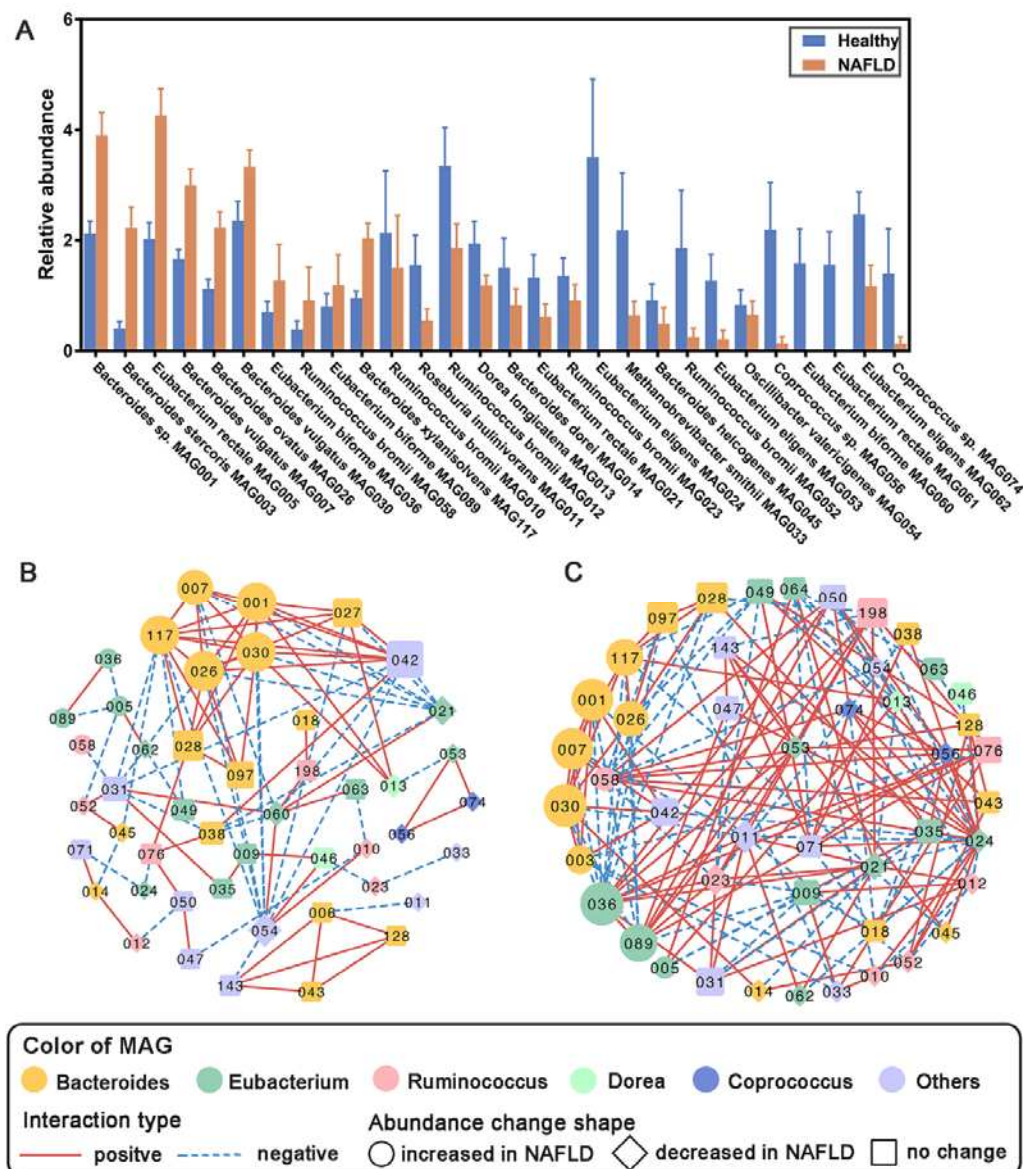
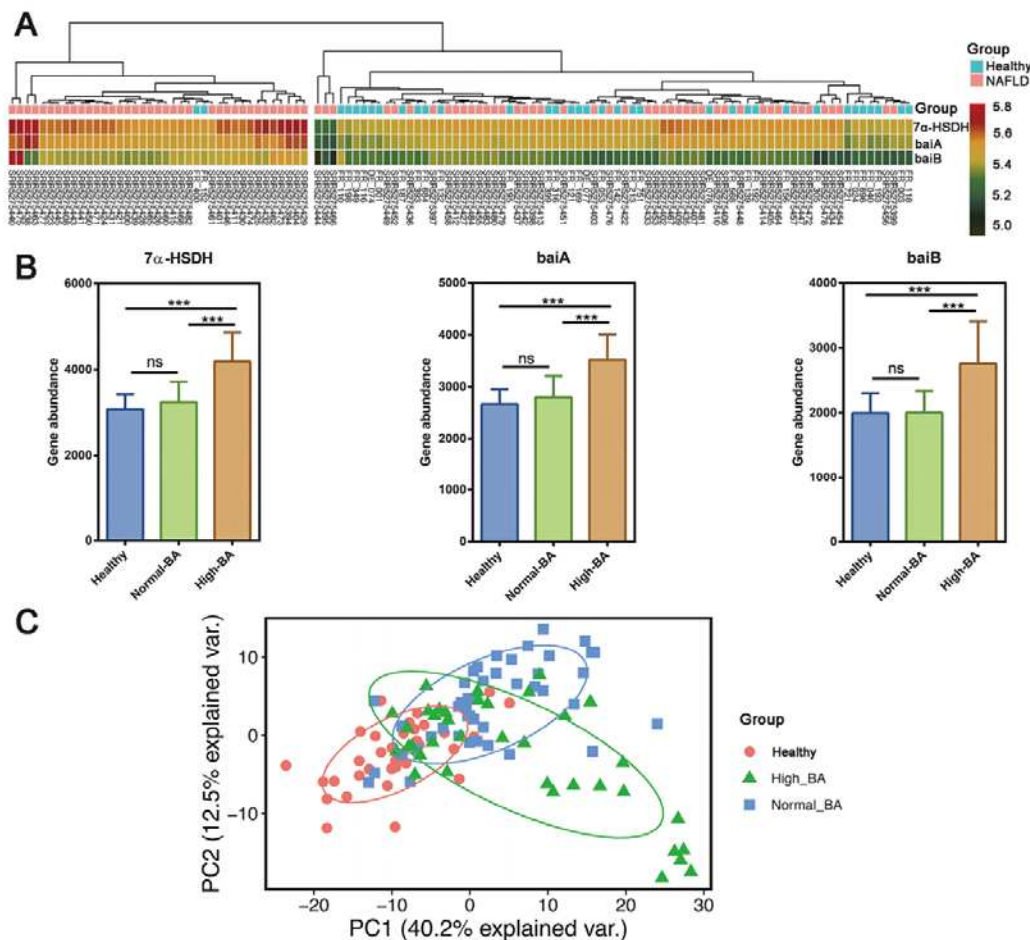


Figure 5. BA metabolizing MAG in NAFLD and healthy subjects. (A) MAG exhibiting differential abundance between healthy controls and NAFLD patients. Differential MAG were selected by two-tailed Mann-Whitney U- tests adjusted by Benjamini–Hochberg. MAG with FDR values < 0.1 were included. Values are mean  $\pm$  SEM. Interaction network for BA metabolising MAG community in healthy controls (B) and NAFLD patients (C). Microbial interactions were calculated using

773 SparCC with 100 refining interactions, and p value of each interaction is  
 774 approximated with 1000 permutations. Only interactions with p value < 0.05 were  
 775 included.



776  
 777 Figure 6. Subgroups of NAFLD patients with different abundances of the secondary  
 778 BA synthesis genes. (A) NAFLD patients were clustered into two subgroups:  
 779 normal-BA subgroup and high-BA subgroup according to the abundances of 3  
 780 differential secondary BA synthesis genes. (B) Comparison of the abundances of 3  
 781 differential secondary BA synthesis genes among healthy control, normal-BA and  
 782 high BA groups. They were all significantly increased in high-BA subgroup, but was  
 783 not different between normal-BA subgroup and healthy group (Dunn tests adjusted by  
 784 Benjamini–Hochberg). (C) PCA plot based on the differential enzymes. Subjects were

785 clustered according to the secondary BA metabolizing potentials ( $p < 0.001$  with  
786 ANOSIM analysis). Values are mean $\pm$ SD. \*\*\* indicates FDR $<0.001$ .