

## **Dietary preservatives alter the gut microbiota *in vitro* and *in vivo* with sex-specific consequences for host metabolic development**

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### **Classification:**

Biological Sciences / Physiology

### **Keywords:**

dietary additive; processed food; gut microbiome; energy metabolism; developmental programming

1 **ABSTRACT**

2 Antibiotics in early life can promote adiposity via interactions with the gut microbiota. However,  
3 antibiotics represent only one possible route of antimicrobial exposure. Dietary preservatives exhibit  
4 antimicrobial activity, contain chemical structures accessible to microbial enzymes, and alter  
5 environmental conditions favoring specific microbial taxa. Therefore, preservatives that retain  
6 bioactivity in the gut might likewise alter the gut microbiota and host metabolism. Here we conduct *in*  
7 *vitro*, *ex vivo*, and *in vivo* experiments in mice to test the effects of preservatives on the gut microbiota  
8 and host physiology. We screened common dietary preservatives against a panel of human gut  
9 isolates and whole fecal communities, finding that preservatives strongly altered microbial growth and  
10 community structure. We exposed mice to diet-relevant doses of 4 preservatives [acetic acid, BHA  
11 (butylated hydroxyanisole), EDTA (ethylenediaminetetraacetic acid) and sodium sulfite], which each  
12 induced compound-specific changes in gut microbiota composition. Finally, we compared the long-  
13 term effects of early-life EDTA and low-dose antibiotic (ampicillin) exposure. EDTA exposure modestly  
14 reduced nutrient absorption and cecal acetate in both sexes, resulting in lower adiposity in females  
15 despite greater food intake. Females exposed to ampicillin also exhibited lower adiposity, along with  
16 larger brains and smaller livers. By contrast, in males, ampicillin exposure generally increased energy  
17 harvest and decreased energy expenditure, resulting in higher adiposity. Our results highlight the  
18 potential for everyday doses of common dietary preservatives to affect the gut microbiota and impact  
19 metabolism differently in males and females. Thus, despite their generally-regarded-as-safe  
20 designation, preservatives could have unintended consequences for consumer health.

21

22 **SIGNIFICANCE**

23 Early-life exposure to antibiotics can alter the gut microbiota and shape adult metabolic health. Here  
24 we show that dietary preservatives can have analogous effects. Common dietary preservatives altered  
25 gut microbiota composition *in vitro*, *ex vivo* and *in vivo*. Early-life EDTA exposure had long-term, sex-  
26 specific consequences for energy metabolism. Simultaneously, we deliver new mechanistic  
27 understanding of early-life antimicrobial-induced effects on adiposity via evidence that low-dose  
28 ampicillin treatment increases energy harvest while conserving energy expenditure in males,  
29 promoting adiposity, while EDTA treatment dampens energy harvest, promoting leanness in females.  
30 Overall, our results emphasize that early-life gut microbiome disruptions can be triggered by diverse  
31 antimicrobial exposures, with previously unappreciated metabolic consequences that differ for males  
32 and females.

33

34 **INTRODUCTION**

35 Humans have long practiced diverse food preservation methods to extend shelf life and prevent food  
36 spoilage. Drying, salting, smoking, and fermentation all function by making food an inhospitable  
37 environment to undesirable microbes, either by removing water or adding compounds with  
38 antimicrobial activity against foodborne microbes. The ubiquity of traditional or industrial preservatives  
39 in human diets, combined with their activity against foodborne bacteria raise the possibility that, once  
40 consumed, preservatives might also affect some of the trillions of microbes living in the gastrointestinal  
41 tract.

42 Gastrointestinal microbes (collectively, gut microbiota) are far from passive inhabitants. The gut  
43 microbiota plays critical roles in nutrient digestion, energy allocation, immunological training and  
44 maintenance, and neurologic and endocrine activity<sup>1–4</sup>. Consequently, variation in the gut microbiota  
45 can affect growth, development, and many gastrointestinal, autoimmune, neurological, and metabolic  
46 diseases<sup>5</sup>. Both diet and antibiotic use can rapidly re-shape the gut microbiota, whether by  
47 encouraging growth of some taxa at the expense of others or else by altering the functions carried out  
48 by different microbes within the gut.

49 Differences in dietary macronutrient content<sup>6</sup>, plant versus animal sources<sup>7</sup>, cooking<sup>8</sup>, and  
50 fermentation<sup>9</sup> can all reshape the gut microbiota, often with downstream effects on host metabolism.  
51 Non-nutritive dietary compounds – such as phytochemicals and food additives – can also affect the  
52 gut microbiota with consequences for host health<sup>10–12</sup>. For instance, consumption of dietary emulsifiers  
53 by mice at diet-relevant doses altered the gut microbiota and promoted obesity and insulin  
54 resistance<sup>12</sup>. Importantly, germ-free mice were protected from these effects, and effects were  
55 transmissible to germ-free mice upon gut microbiota transplantation, suggesting that emulsifier-  
56 induced changes in the gut microbiota were necessary and sufficient to link emulsifier ingestion to  
57 biomarkers for metabolic syndrome<sup>12</sup>. Many drugs can also influence the gut microbiota<sup>13,14</sup>, with  
58 antibiotics being a canonical example. When administered to mice even at very low, subtherapeutic  
59 levels, antibiotics have been shown to alter gut microbiota composition and, when treatment starts  
60 early in life, to promote weight gain and increased body fat in adulthood<sup>15–17</sup>.

61 Given the antimicrobial activity of preservatives and the potential for even low doses of  
62 antimicrobials to alter the gut microbiota, preservatives represent a key, largely unexplored influence  
63 on health. In this study, we used *in vitro* and *in vivo* approaches to test the effect of common dietary  
64 preservatives on the gut microbiota and to assess potential consequences for host metabolism. We  
65 first screened 9 common dietary preservatives [acetic acid, BHA, BHT (butylated hydroxytoluene),  
66 EDTA, sodium benzoate, sodium chloride, sodium nitrate, sodium sulfite, sulfur dioxide] for activity  
67 against a small panel of human gut isolates (*Bacteroides ovatus*, *Clostridium symbiosum*, *Eggerthella*  
68 *lenta*, *Escherichia coli*), representing 4 of the most abundant phyla in the human gut. We then tested  
69 the effects of a subset of these compounds (acetic acid, BHA, EDTA, sodium sulfite) on whole gut

70 microbial communities both *ex vivo* and in mice. Last, we investigated the effects of long-term and  
71 early-life exposure of one preservative, EDTA, on the developing microbiota and long-term host  
72 metabolism. Most of the preservatives tested exhibited strong activity against gut bacteria *in vitro*, *ex*  
73 *vivo*, and in mice. Exposure to EDTA starting in early life had pronounced effects on the developing  
74 gut microbiota and increased fecal energy density. For females, EDTA exposure resulted in altered  
75 energy balance, as evidenced by reduced fat mass and feed efficiency in treated females versus  
76 untreated female controls. Overall, our results indicate that dietary preservatives can alter the gut  
77 microbiota and that long-term exposure to preservatives starting early in life, as occurs in many human  
78 populations, may carry metabolic consequences.

79

## 80 RESULTS

### 81 Dietary preservatives alter the growth of individual gut isolates and whole communities in vitro

82 We first evaluated the antimicrobial activity of 9 common dietary preservatives at diet-relevant  
83 concentrations against a panel gut bacterial isolates under anaerobic conditions (Table S1). Almost  
84 all compounds, with the exception of sodium chloride and sodium nitrate, significantly inhibited  
85 bacterial growth at or below the concentrations used in food (Figure S1). BHA and EDTA were notable  
86 for their antimicrobial activity against all strains at and below the maximum concentrations allowed in  
87 food (200  $\mu\text{g}/\text{ml}$  and 1000  $\mu\text{g}/\text{ml}$ , respectively). Of the 2 traditional preservatives, acetic acid (vinegar)  
88 and sodium chloride (table salt), acetic acid was of particular interest because it had divergent effects  
89 at higher concentrations, promoting growth of *C. symbiosum* while inhibiting growth of *E. coli* and *B.*  
90 *ovatus*. The 2 sulfur-based compounds tested, sodium sulfite and sulfur dioxide, showed similar  
91 patterns of growth inhibition starting at the maximum concentrations allowed in food (500  $\mu\text{g}/\text{ml}$ ).

92 To elucidate the broader antimicrobial effects of preservatives exhibiting substantial inhibitory  
93 effects on single isolates, we next tested 4 preservatives (acetic acid, BHA, EDTA, sodium sulfite) on  
94 whole gut bacterial communities cultured *ex vivo*, with the broad-spectrum antibiotic ampicillin as a  
95 positive control. Whole mouse fecal communities ( $n=4$  donor mice) were grown in differing  
96 concentrations of each compound for 48 hours, with monitoring of overall growth by optical density  
97 ( $\text{OD}_{600}$ ), confirmation of cell density measurements by plate culture (Figure S2), and profiling of  
98 community composition at endpoint by 16S rDNA sequencing. As expected, ampicillin altered  
99 microbial growth dynamics and endpoint community composition at all concentrations tested. All 4  
100 preservatives also significantly inhibited maximum community growth (Figure 1A) and altered  
101 community composition (Figure 1B-C), with clear dose-response effects. These effects were strongest  
102 for BHA and EDTA, both of which significantly altered community composition at the lowest  
103 concentration sequenced (50  $\mu\text{g}/\text{ml}$ ), well below the maximum concentrations allowed in food (Table  
104 S1). Where there was undetectable cell growth (as measured by  $\text{OD}_{600}$ , validated with CFU counts,

105 Figure S2), community composition resembled the original inocula likely because that was the only  
106 DNA present in the sample (Figure 1).

107 At concentrations where OD<sub>600</sub> readings indicated uninhibited or minimally inhibited growth, each  
108 preservative altered community composition in slightly different ways. Low doses of ampicillin greatly  
109 favored several prevalent strains of Bacteroidetes and Proteobacteria, to the extent a higher maximum  
110 OD<sub>600</sub> was observed at 20 and 50 µg/ml. Among the preservatives, increasing concentrations of BHA  
111 reduced the relative abundance of Bacteroidetes in favor of Firmicutes, with a similar trend trend for  
112 higher levels of EDTA. Principal coordinate analysis also highlighted the impact of increasing  
113 concentrations of each preservative (Figure 1B), particularly for acetic acid, where the statistically  
114 significant effects of dose are readily observable in PCoA space but harder to visualize in terms of  
115 relative abundance.

116

117 *Short-term preservative exposure has compound-specific effects on the gut microbiota of adult mice*  
118 To examine how dietary preservatives affect the gut microbiota *in vivo*, we treated adult male  
119 C57BL6/J mice with one of each preservative for 7 days via drinking water, with doses set at the  
120 maximum acceptable daily intake listed by the FDA (see Table S1) and scaled isometrically for mice  
121 (see Methods). An additional group treated with a low dose of ampicillin (6.7 µg/ml) was included as  
122 a positive control, along with an untreated water group. Water intake was measured every 2-3 days to  
123 confirm dosing estimates. Neither ampicillin nor any preservative significantly affected mouse body  
124 mass during this short-term exposure, with the exception of the acetic acid, where mouse water intake  
125 dropped by about 1/3 during treatment, likely due to an aversion to the vinegar taste (Figure S3).

126 We used 16S rDNA sequencing to profile the fecal microbiota daily, as well as the gut microbiota  
127 along the length of the gastrointestinal (GI) tract at endpoint. The strongest overall determinant of gut  
128 microbiota composition, as indexed by Bray-Curtis distance, in both fecal and gut effluent samples  
129 was the original cage in which mice were housed prior to redistribution into individual housing at the  
130 start of the study ( $p<0.001$ ,  $R^2=0.311-0.549$ , PERMANOVA) (Figure S4, Table S2). Microbial  
131 communities at endpoint also differed significantly by GI tract location ( $p<0.001$ ,  $R^2=0.272$ ). Therefore,  
132 in all microbiome analyses, we controlled for the effects of cage and sample location, as the  
133 PERMANOVA test ascribes variation sequentially and failing to account for these high-impact  
134 variables can prevent the detection of biologically significant differences by treatment.

135 As expected, low-dose ampicillin treatment altered gut microbiome composition, both  
136 longitudinally in fecal samples ( $p=0.002$ ,  $R^2=0.033$ , PERMANOVA, Table S2) and at endpoint along  
137 the GI tract ( $p=0.003$ ,  $R^2=0.034$ , PERMANOVA) without any detectable impact on bacterial density  
138 (Figure S5). All 4 tested preservatives also influenced gut microbial community composition over time  
139 in at least 2 of 3 different longitudinal models (Table S2). This effect was particularly robust for EDTA,  
140 where the longitudinal effect of treatment remained significant across all 3 models tested, including

141 after the addition of a 'Phase' variable to control for stochastic variation between baseline and  
142 treatment periods that may be shared with control mice (EDTA treatment:  $p<0.05$ ,  $R^2=0.016\text{--}0.026$ ).  
143 In contrast, preservatives had no effect on microbiota composition in any cross-sectional analyses of  
144 endpoint samples, even when including samples from all GI tract locations, potentially due to high  
145 variability by GI location and inability of cross-sectional analyses to use within-mouse controls.

146 We next used MaAsLin2<sup>18</sup>, a tool that applies general linear models to determine multivariate  
147 associations with metagenomic features, to identify microbial taxa that were particularly susceptible or  
148 resistant to treatment with dietary preservatives. Again, we were able to compare the effects of  
149 treatment longitudinally (with current treatment status as a fixed effect and source cage as a random  
150 effect) and cross-sectionally (with treatment and sample location as fixed effects and source cage as  
151 a random effect). These models identified a large number of differentially abundant taxa at multiple  
152 taxonomic levels that were impacted by preservative use (Figure 2). Among preservatives, there was  
153 some overlap regarding the microbial taxa that were consistently altered, such as the genus  
154 *Clostridium* (family: Ruminococcaceae), which was reduced in all treatment groups in either endpoint  
155 or longitudinal models. In many other cases, preservatives had compound-specific effects: for  
156 instance, the relative abundance of *Allobaculum*, a genus recently implicated in the attenuation of  
157 insulin resistance<sup>19</sup>, was elevated by EDTA treatment but reduced by acetic acid, sodium sulfite, and  
158 ampicillin. Overall, each preservative treatment had a unique impact on the gut microbiome,  
159 characterized by subtle shifts in overall composition and distinct differentially abundant taxa.

160

#### 161 Dietary antimicrobials alter murine gut microbiota strongly in early life

162 The gut microbiota changes over the course of host development, and perturbations of the gut  
163 microbiota during gestation and infancy—including with low-dose antibiotics—have previously been  
164 shown to have long-term effects on host metabolism<sup>16</sup>. To examine how preservatives with  
165 antimicrobial properties might specifically affect the developing gut microbiota and host metabolism,  
166 we treated pregnant mice and their litters with either diet-relevant doses of EDTA, low-dose ampicillin  
167 (positive control), or normal drinking water (negative control) from gestational day 13.5 until offspring  
168 were 28 weeks old.

169 Consistent with previous studies<sup>15,16</sup>, low-dose ampicillin treatment altered gut microbiota  
170 composition for the duration of treatment (Figure 3A, Table S3), with reductions in a number of  
171 individual microbial taxa identified using MaAslin2 (Figure 3B). The genus *Allobaculum* was again  
172 notable among these differentially abundant taxa (Figure S6) as it is nearly absent in ampicillin-treated  
173 mice, was present at high levels in untreated mice during early life, and has also shown consistent  
174 reductions by low-dose antibiotic treatment in prior work<sup>16</sup>. For other genera such as *Clostridium*  
175 (family: Ruminococcaceae), EDTA but not ampicillin treatment reduced abundance, particularly during

176 early life (Figure S6), again indicating that the preservatives are not simply less potent antimicrobials  
177 than antibiotics, but may also have distinct impacts on gut microbes.

178 Treatment with EDTA also significantly altered gut microbiota composition, but this effect was  
179 largely limited to early life, with a significant effect of EDTA treatment at 4 weeks of age ( $p=0.037$ ,  
180 PERMANOVA, Table S3) but not for timepoints between 8 and 20 weeks of age ( $p=0.552$ – $0.885$ ). The  
181 amount of overall variation ascribed to EDTA treatment also generally declined from week 4  
182 ( $R^2=0.179$ ) into later weeks ( $R^2=0.058$ – $0.080$ ). Consequently, while MaAsLin2 identified 17 taxa as  
183 differing significantly with EDTA treatment (Figure 3B), most of these were either reduced only at 4  
184 weeks or else only rose to significance in the longitudinal model that included mouse age as an  
185 additional variable. Overall, our data indicate that young mice may be particularly sensitive to EDTA-  
186 induced perturbations of the gut microbiota or else that the gut microbiota can become resistant to the  
187 effect of EDTA with prolonged treatment.

188

189 *Early-life antimicrobial treatment alters host adiposity and energy gain*

190 Because of the role of the gut microbiome in programming host metabolism<sup>20</sup>, we tracked body  
191 composition and energy intake over the course of the experiment. Notably, early-life exposure to either  
192 low-dose ampicillin or EDTA had sex-specific outcomes. Ampicillin treatment starting in gestation  
193 resulted in increased body fat in males, whether measured as total body fat via EchoMRI (Figure 4A)  
194 or the mass of the epididymal fat pad at 28 weeks (Figure 4B). Intriguingly, however, both EDTA and  
195 ampicillin-treated females exhibited decreased body mass as adults compared to untreated controls,  
196 with reductions coming largely from body fat rather than lean mass (Figure 4A).

197 Sex-specific effects of early-life antimicrobial treatment were even more pronounced after  
198 accounting for differences in food intake, as ampicillin-treated males exhibited lower food intake and  
199 EDTA-treated females exhibited higher food intake than sex-matched untreated controls (Figure 4C).  
200 To account for these differences in daily food intake, we used linear mixed effects models to evaluate  
201 how body mass and fat mass changed as a function of food intake. These models revealed that  
202 ampicillin-treated males gained markedly more weight and body fat per gram of food intake, and that  
203 EDTA- and ampicillin-treated females gained markedly less weight and particularly body fat per gram  
204 of food intake than sex-matched untreated controls (Figure 8D-E,  $p<0.05$ , LME).

205 Since differences in body mass and body composition among treatment groups could not be  
206 attributed to differences in food intake, we reasoned that they must result from either differential energy  
207 absorption from food or differential energy expenditure. To estimate unabsorbed energy, we first  
208 collected the feces produced by each mouse over 24 hours and measured fecal energetic density via  
209 bomb calorimetry. EDTA treatment led to higher fecal energy density in both female and male mice  
210 (Figure S7A). However, high variability in total 24-hour fecal production among EDTA-treated mice  
211 meant that the increased fecal energy density did not necessarily translate to higher total energy

212 excretion (Figure S7B-C). Among ampicillin-treated mice, only males exhibited any differences in fecal  
213 energy excretion patterns, with higher fecal energy density but lower daily fecal production contributing  
214 to a non-significant net trend of modestly lower total energy excretion ( $p=0.268$ , Wilcoxon rank-sum  
215 test), about 14.4% lower than sex-matched untreated controls. Augmented energy harvest by  
216 ampicillin-treated males may have contributed in part to their increased weight and adiposity per gram  
217 of food intake.

218 To examine how the gut microbiota might independently contribute to altered host energy  
219 harvest, we used gas chromatography-mass spectrometry (GC-MS) to quantify cecal short-chain fatty  
220 acids (SCFAs), the major products of carbohydrate fermentation by the gut microbiota that serve as  
221 signaling molecules and metabolic fuel for diverse host tissues<sup>21</sup> (Figure S8). For nearly all SCFA  
222 types, there was a consistent effect of sex detected across treatment groups in a 2-way ANOVA, with  
223 higher SCFA concentrations observed in females. This surprising result may indicate either that a  
224 greater fraction of dietary nutrients enters the cecum in females, thus indicating lower ileal digestibility,  
225 or that female and male gut microbiota have differential fermentation capacity. Including sex as a  
226 covariate in follow-up testing, ampicillin-treated mice had higher concentrations of cecal propionate  
227 ( $p=0.035$ , Tukey's HSD), valerate ( $p=0.032$ ), isovalerate ( $p=0.067$ ), and isobutyrate ( $p=0.082$ )  
228 compared with untreated controls, while EDTA treatment was associated with a marginally significant  
229 reduction in acetate ( $p=0.053$ ) and total SCFAs ( $p=0.068$ ), with the latter result driven largely by  
230 acetate as the most abundant SCFA. Given phenotypic sex differences, we also included a sex by  
231 treatment interaction term in our tests of cecal SCFAs, which revealed borderline significant increases  
232 in total SCFAs ( $p=0.058$ ), propionate ( $p=0.061$ ), and butyrate ( $p=0.062$ ) in ampicillin-treated females  
233 versus males.

234 Jointly, these data suggest that while differential dietary energy harvest likely contributed to the  
235 increased body mass and adiposity observed in ampicillin-treated males, it only partially explains the  
236 decreased body mass and adiposity observed in EDTA- and ampicillin-treated females. We therefore  
237 tested whether these phenotypes might additionally be driven by differences in energy expenditure.

238 We used indirect calorimetry to estimate the resting energy expenditure (REE) of treated and  
239 untreated mice. Consistent with their lean phenotypes, ampicillin-treated females had higher body  
240 mass-corrected REE than untreated controls, with EDTA-treated females intermediate between these  
241 groups (Figure S9B), but REE did not significantly vary by treatment for females on an absolute basis,  
242 when corrected by lean mass only, or after when corrected for both lean mass and fat mass  
243 independently using ANCOVA (Figure S9). Similarly, consistent with their increased stores of  
244 inexpensive body fat without reduction in expensive lean mass, ampicillin-treated males exhibited  
245 similar REE to controls and EDTA-treated males on an absolute basis or when correcting for lean  
246 mass alone (Figure S9). Interestingly, correcting for both lean mass and fat mass using ANCOVA  
247 suggested a substantial ~19% reduction in the REE of ampicillin-treated males, although this analysis

248 was underpowered and did not reach statistical significance ( $p=0.149$ ). Regardless, it has been noted  
249 previously that even very small differences in energy expenditure – e.g., 3-5% differences that are  
250 hard to detect without sample sizes on the order of  $n=100$  – can meaningfully contribute to differential  
251 weight gain and body composition<sup>22</sup>.

252 Given the potential for even slight differences in REE to contribute to body composition  
253 outcomes, we next considered the different tissues that may have underpinned a more or less  
254 energetically costly body, as most internal organs have higher mass-specific metabolic rates than do  
255 muscles at rest<sup>23</sup>. While EDTA-treated mice showed few significant differences from controls,  
256 ampicillin treatment led to striking sex-specific effects on organ size that were broadly consistent with  
257 observed treatment-induced trends in body composition. Ampicillin-treated females exhibited lower  
258 combined internal organ masses compared with controls (Figure S10I). While this result was driven  
259 primarily by their smaller livers (Figure S10C), ampicillin-treated females also displayed marked  
260 increases in brain size (Figure S10H), a tissue with a high mass-specific metabolic rate<sup>24</sup>. In contrast,  
261 ampicillin-treated males exhibited higher combined masses of metabolically expensive organs  
262 compared with controls (Figure S10) and differences in organ sizes that were generally in the opposite  
263 direction to those seen in ampicillin-treated females, including larger livers, longer small intestines,  
264 and a non-significant trend of longer large intestines. These increased structures for digestion may  
265 underpin the higher energy harvest observed for ampicillin-treated males.

266 Taken together, our analyses of energy harvest, energy expenditure, and tissue allocation  
267 suggest that ampicillin-induced increases in body fat in males may arise in part from increases in  
268 energy absorption from food (potentially promoted by larger livers and longer intestines) coupled with  
269 overall conservation of resting energy expenditure. By contrast, decreased adiposity in ampicillin-  
270 treated and EDTA-treated females may arise in part from energy expenditure driven by unexpected  
271 increases in brain size in ampicillin-treated females and modest reductions in cecal acetate and energy  
272 absorption from food by EDTA-treated females.

273

## 274 **DISCUSSION**

275 We aimed to test whether consumption of dietary preservatives, both traditional and industrial, might  
276 perturb the gut microbiota—an important contributor to human energy budgets. We found that  
277 physiologically relevant concentrations of common dietary preservatives affected the gut microbiota *in*  
278 *vitro*, *ex vivo*, and in live mice. Each preservative left a unique signature on the gut microbiota that  
279 was distinct from that of antibiotics. We further showed that early-life treatment with low levels of EDTA  
280 reduces energy absorption from food and fat storage in females but not males. Importantly, we tested  
281 only low levels of these preservatives that are within diet-relevant ranges, underscoring the possibility  
282 that such consumption of dietary preservatives might have similar effects in humans.

283        Different preservatives left unique signatures on gut microbiota composition both *ex vivo* and *in*  
284        *vivo*. This is consistent with previous work that found many non-antibiotic drugs to have antimicrobial  
285        properties against gut bacteria<sup>13</sup> and recent evidence that non-antibiotic drugs have mechanisms of  
286        action that are highly diverse and largely distinct from those of antibiotics<sup>25</sup>. Differing mechanisms of  
287        host absorption, metabolism, and excretion may also account for the varied effects of each  
288        preservative on the gut microbiome. Compounds may remain active once absorbed, but be excreted  
289        through a pathway (such as urine) that minimizes contact with the gut microbiota. Alternatively, a  
290        compound may remain unabsorbed and reach the distal gut but be inactivated or functionally altered  
291        by host or microbial metabolism, as is the case with bile acids and a number of drugs<sup>14</sup>. The effects of  
292        preservatives on whole community composition were generally stronger and broader *ex vivo* than *in*  
293        *vivo*, affecting taxonomic composition from phylum-level through ASV-level *ex vivo* but mainly affecting  
294        family-level through ASV-level composition within the mouse gut. These *ex vivo* versus *in vivo*  
295        differences are unsurprising as, in order to deliver biologically relevant doses of preservatives to mice  
296        (based on FDA acceptable daily intake limits), preservative concentrations in the mouse drinking water  
297        were only 10-20% of FDA-permitted maximum concentrations in food, meaning that administered  
298        compound concentrations were lower *in vivo* than in the *ex vivo* culture media.

299        We initially hypothesized that early-life treatment with preservatives would alter the gut  
300        microbiome and host metabolism in a manner similar to that of subtherapeutic antibiotics, ultimately  
301        inducing greater body fat in adults, especially males<sup>26</sup>. Our experiments with ampicillin confirmed these  
302        sex differences and offer novel insight into the energetic basis of early-life antibiotic-induced adult  
303        adiposity in males, in which higher dietary energy harvest (possibly due to longer small intestines) and  
304        marginally lower resting metabolic rate conspire to induce positive energy balance. In females,  
305        ampicillin did not promote but rather reduced adiposity. Exposure to EDTA also led to significant  
306        reductions in body fat in treated females compared with untreated female controls, an effect driven by  
307        lower dietary energy harvest. These antimicrobial-induced reductions in female energy status have  
308        not been identified previously, to our knowledge, potentially because leanness has been a lesser focus  
309        than obesity among most researchers rooted in industrialized contexts.

310        We were particularly intrigued by the impact of antimicrobial compounds and host sex on cecal  
311        SCFAs, as widespread evidence links SCFA production by gut microbes to regulation of energy  
312        metabolism and fat storage<sup>1</sup>. The generally higher levels of all SCFAs we observed in females  
313        compared to males have not been reported elsewhere, to our knowledge, but may contribute to the  
314        observed sex differences in body composition. As expected, our subtherapeutic dosing of ampicillin  
315        increased the abundance of some SCFAs, notably propionate. On the other hand, EDTA treatment  
316        reduced acetate and total SCFAs, suggesting that EDTA-exposed gut microbiomes may be less  
317        efficient at fermenting carbohydrates reaching the colon, thus contributing to higher caloric contents  
318        in feces.

319 Importantly, EDTA was capable of altering the gut microbiota in early life, a critical period in  
320 which gut microbiome disruption can affect lifelong metabolic programming<sup>16</sup> and immune  
321 development, although the latter was not the focus of this study. Further studies are necessary to  
322 understand how EDTA and other preservatives may affect the gut microbiome and host metabolism  
323 in humans, but our findings that EDTA treatment can inhibit nutrient absorption and adiposity in female  
324 mice compared to untreated sex-matched controls raises concerns about the use of currently  
325 permissible levels of EDTA in foods available to young children and animals. EDTA has many uses  
326 beyond food preservation, with applications in medicine, as an undisclosed component of other food  
327 additives (e.g., some artificial sweeteners contain EDTA as a stabilizer), and even as a vehicle for iron  
328 supplements added to breakfast cereals or given to children to prevent iron deficiency<sup>27,28</sup>. Future work  
329 to elucidate how preservatives and other xenobiotic compounds interact with the gut microbiota, and  
330 potential downstream consequences for host physiology, will be critical in identifying the ecological  
331 levers at our disposal for modulating metabolic health via the gut microbiome.

332  
333

### 334 METHODS

335

336 **Compound concentration calculations.** Based on prior literature showing antimicrobial effects *in*  
337 *vitro* against foodborne pathogens, we screened 9 common food preservation agents, 7 synthetic  
338 compounds [BHA (butylated hydroxyanisole), BHT (butylated hydroxytoluene), disodium EDTA  
339 (ethylenediaminetetraacetic acid), sodium benzoate, sodium nitrate, sodium sulfite, sulfur dioxide] and  
340 2 more traditional compounds [acetic acid (vinegar) and sodium chloride (table salt)] (Table S1). We  
341 selected these compounds due to their widespread use and because they represent main classes of  
342 preservatives in general use today.

343 For *in vitro* and *ex vivo* experiments, we tested the growth effects of each compound at  
344 concentrations of 20-2000 µg/ml, a range that includes the FDA maximum concentration for all  
345 regulated compounds. For *in vivo* mouse experiments, drinking water doses of each compound were  
346 calculated as follows: acceptable daily intake (ADI) as stated by the FDA was scaled allometrically to  
347 mice by a factor of 12.3, based on the relative body-mass-to-body-surface-area ratios of humans (37  
348 kg/m<sup>2</sup>) and mice (3 kg/m<sup>2</sup>)<sup>29</sup>. Finally, we assumed an average daily water intake of 0.15 ml/g body  
349 mass for mice<sup>15</sup>, which was ultimately consistent with measured water intake (Figure S3), resulting in  
350 drinking water concentrations of 10% v/v (acetic acid), 41 mg/L (BHA), 206 mg/L (EDTA), and 57 mg/L  
351 (sodium sulfite). Ampicillin was administered at a concentration of 6.7 mg/L, a value modeled on  
352 previous studies<sup>15</sup>.

353 Commercial preparations of acetic acid (A1009), BHA (BH104), BHT (B1095), EDTA (E1001),  
354 sodium benzoate (S1146), sodium nitrate (SO183), and sodium sulfite (S1113) were obtained from

355 Spectrum Chemicals (New Brunswick, NJ); sulfur dioxide (sc-215934) from Santa Cruz Biotechnology  
356 (Santa Cruz, CA); ampicillin trihydrate (J66514) from Thermo Fisher (Waltham, MA); and sodium  
357 chloride (BDH9286) from VWR International (Radnor, PA).

358

359 **Growth of bacterial strains and whole communities.** All *in vitro* and *ex vivo* culturing was performed  
360 under anaerobic conditions using Brain Heart Infusion (BHI) broth (BD 214010) supplemented with  
361 yeast extract (5 g/L, VWR J850) and resazurin sodium salt (0.1 mg/L, Sigma Aldrich R7017) that was  
362 autoclaved before the final addition of L-cysteine hydrochloride (0.5 g/L, Sigma Aldrich C7477). Media  
363 and all consumables were allowed to reduce in an anaerobic chamber for >12 hours before use. All  
364 tests were performed in optically clear, flat-bottomed 96-well plates filled with 190  $\mu$ l broth pre-mixed  
365 with the appropriate concentration of each compound with 10  $\mu$ l inoculum. For tests of individual  
366 strains, the inoculum consisted of *Bacteroides ovatus* (ATCC 8483), *Clostridium symbiosum* (ATCC  
367 14940), *Escherichia coli* (ATCC 47076), or *Escherichia coli* (ATCC 25559) grown to mid-logarithmic  
368 growth phase and normalized to an optical density at 600 nm (OD<sub>600</sub>) of 0.1. For whole fecal  
369 communities, fecal samples were collected fresh from adult C57BL6/J mice and moved to an  
370 anaerobic chamber within 10 minutes of collection. Samples were then diluted 1:30 in pre-reduced  
371 PBS, vortexed for 10 minutes to homogenize, and the resulting cell suspension was used as the  
372 inoculum. Plates were incubated at 37°C and all combinations of inoculum/compound/concentration  
373 were performed in triplicate.

374 We validated OD<sub>600</sub> readings of cell density with counts of colony forming units (CFUs) in for a  
375 random selection samples, cultured on agar plates (Figure S2), made from the supplemented BHI  
376 media described above plus 15g/L agar (BD 214010). Cultures were diluted 10-fold 8 times to generate  
377 dilutions from 1:10 through 1:10<sup>8</sup>. We plated 4 5 $\mu$ l replicates of each dilution and incubated these in  
378 an anaerobic chamber for 24-48 hours, until colonies were visible (example image: Figure S2D). CFU  
379 counts of cell density were generally well correlated with OD<sub>600</sub> readings.

380

381 **Animal husbandry.** For the 7-day trial, 5 groups of 6 male, 7-week-old C57BL/6J cage-mate mice  
382 were purchased from Jackson Laboratory. Mice were transferred to individual housing shortly after  
383 arrival and were maintained in separate cages for the duration of the experiment. To prevent baseline  
384 variation in the gut microbiome among source cages from biasing results, we randomly assigned one  
385 mouse from each cage-mate group to one of 6 treatment groups: water (negative control), ampicillin  
386 (positive control), acetic acid, BHA, EDTA, or sodium sulfite. After the 7<sup>th</sup> day of treatment, mice were  
387 sacrificed by CO<sub>2</sub> inhalation and samples of gut effluent collected.

388 For the long-term, developmental experiment, 9 timed-pregnant mice at 11 days gestation were  
389 delivered from Jackson Laboratory, with n=3 assigned to each treatment group (control, EDTA,  
390 ampicillin). At 13.5 days gestation, mice in the EDTA and ampicillin groups were given treated drinking

391 water. Drinking water was refreshed twice weekly and treatment continued for the duration of the  
392 experiment, until offspring were 28 weeks old. Offspring were weaned at 3 weeks of age, and housed  
393 together by litter and sex, with  $\leq 5$  mice per cage. Starting at 4 weeks of age and every 4 weeks  
394 thereafter, we assessed mouse body composition via EchoMRI and collected fecal samples for gut  
395 microbial profiling. At 28 weeks, mice were sacrificed, and samples of gut effluent and other tissues  
396 were collected for downstream analysis.

397 Mice in both experiments were fed irradiated PicoLab Mouse Diet 20 5058 provided *ad libitum*.  
398 All mouse experiments were performed in the specific pathogen-free Harvard University Biological  
399 Research Infrastructure facility under a protocol approved by the Harvard University Institutional  
400 Animal Care and Use Committee (Protocol #17-06-306).

401  
402 **Gut microbial profiling via 16S rDNA sequencing.** We assessed gut microbial community  
403 composition of bacterial cultures, feces and gut effluent via 16S rDNA sequencing. For the long-term  
404 treatment experiment where mice were housed in groups, one mouse from each cage was randomly  
405 selected for gut microbial profiling, as it is generally inappropriate to treat co-housed animals as  
406 independent biological replicates for the purposes of gut microbiome profiling due to coprophagy and  
407 other sources of extensive horizontal transmission. We isolated DNA using the Qiagen Powersoil DNA  
408 Isolation Kit following manufacturer's instructions. Next, we performed PCR amplification of the 16S  
409 rRNA gene using custom-barcoded 515F and 806R primers targeting the V4 region of the gene. We  
410 performed PCR on each sample in triplicate with sample-specific negative controls with the following  
411 protocol: 95°C for 3 min; 35 cycles of 94°C for 45 s, 50°C for 30 s, and 72°C for 90 s; and 10-minute  
412 final extension at 72°C. We then cleaned amplicons with AmpureXP beads (Agencourt) and quantified  
413 samples with Quant-iT Picogreen dsDNA Assay Kit (Invitrogen) prior to pooling samples evenly by  
414 DNA content. The resulting 16S rDNA libraries underwent 1x150 bp sequencing across 3 lanes of an  
415 Illumina HiSeq, with one lane dedicated to each of the *in vitro* plus *ex vivo* samples, 7-day mouse  
416 study samples, and long-term mouse study samples.

417 Sequences were processed in QIIME2<sup>30</sup>, first by de-noising with Dada2 and truncating at 149  
418 bp to ensure maximum sequence quality, resulting in read depths of  $126,218 \pm 25,902$  (*in vitro* and *ex*  
419 *vivo* study),  $172,173 \pm 37,136$  (7-day study), and  $68,271 \pm 10,532$  (long-term study). Taxonomy was  
420 assigned using the GreenGenes classifier<sup>31</sup> and a rooted tree for all amplicon sequence variants  
421 (ASVs) was generated. The taxonomy, phylogeny, and ASV feature table were then imported into R  
422 (version 4.3.2) using qiime2R (version 0.99.6). Pre-processing was conducted using phyloseq (version  
423 1.46.0<sup>32</sup>). First, each sample was pruned of very low abundance ASVs, defined as  $\leq 3$  reads per study  
424 pool. Next, reads were subsampled evenly at 50,000 reads/samples for the *in vitro* plus *ex vivo* and  
425 7-day *in vivo* studies, and at 40,000 reads/sample for the long-term study, which excluded 2 samples  
426 with  $<40,000$  reads, resulting in  $n=124$ ,  $n=327$ , and  $n=182$  samples in each study, respectively. Further

427 processing of 16S rDNA sequences was then performed in R using phyloseq for calculating distance  
428 matrices and ordinations; vegan (version 2.6-4) for PERMANOVA tests; and MaAsLin2 (version  
429 1.16.0) for identifying differentially abundant taxa using general linear models.

430

431 **Quantitative PCR (qPCR) of 16S rRNA gene.** We performed qPCR on the V4 region of the 16S gene  
432 (515F and 806R, non-barcoded primers) in triplicate, using a standard curve on each plate based on  
433 genomic DNA isolated from a pure culture of *Escherichia coli*. We used the following recipe for each  
434 PCR reaction: 12.5  $\mu$ l SYBR Green qPCR mix, 2.25  $\mu$ l of each non-barcoded primer (515F and 806R),  
435 6  $\mu$ l nuclease-free H<sub>2</sub>O, and 2  $\mu$ l template DNA, for a total volume of 25  $\mu$ l per well. We ran the qPCR  
436 reaction in a BioRad CFX 96-well Real-Time PCR thermocycler with the following protocol: initial  
437 denature at 94°C for 15 min; 40 cycles of 95°C for 15 s, 50°C for 40 s, and 72°C for 30 s. To calculate  
438 16S rRNA gene abundance, we first multiplied DNA concentrations of each sample as measured via  
439 qPCR then divided by the mass of the original fecal sample and multiplied by 2.03  $\times$  10<sup>5</sup>—an estimate  
440 of genome-equivalents per ng DNA based on a mean gut microbial community genome size of 4.50  
441 Mbp<sup>11</sup>.

442

443 **Resting energy expenditure.** We used an open-flow indirect calorimetry system for measurement of  
444 resting energy expenditure, using Classic Line instrumentation manufactured by Sable Systems  
445 International (Las Vegas, NV), as described previously<sup>33</sup>.

446 Mice were fasted for 4 hours before being placed in respirometer chambers and given 1 hour to  
447 acclimate to the chambers before measurement began. Measurements spanned 1 hour, with  
448 continuous activity measurement via force plates. Gas flow into the oxygen analyzer cycled between  
449 one of 2 mouse cages every 7 minutes, with a 7-minute baseline between each cycle. Raw data was  
450 processed in ExpeData3, where flow rates were corrected for standard temperature and pressure  
451 (STP) and O<sub>2</sub> readings were corrected by spanning dry baseline air to 20.95% O<sub>2</sub>. Oxygen  
452 consumption (VO<sub>2</sub>) (ml/min) was then calculated as:

$$453 \quad VO_2 = \frac{FR (F_i O_2 - F_e O_2)}{[1 - F_e O_2 (1 - RQ)]}$$

454 Where FR is the dry flow rate, F<sub>i</sub>O<sub>2</sub> is the % oxygen in incurrent (baseline) air, F<sub>e</sub>O<sub>2</sub> is the % oxygen  
455 in excurrent (post-chamber) air, and RQ is the respiratory quotient, here assumed to be 0.8<sup>34</sup>. Oxygen  
456 consumption was converted to energy expenditure using the oxyjoule equivalent of 20.13 J/ml O<sub>2</sub><sup>34</sup>,  
457 then further converted into kcal/day by a factor of 4184 J/kcal.

458 To find resting energy expenditure (REE) from the continuous measurement of energy  
459 expenditure (EE), we first averaged EE over 20 second increments, then found the 3 minimum EE  
460 values  $\geq$ 1 minute apart with confirmed minimal activity, then averaged these 3 values as the estimated  
461 REE. Since researchers have variously championed the biological relevance of uncorrected and

462 corrected REE values<sup>22,35</sup>, we have elected to report absolute REE as well as REE corrected for body  
463 mass, lean mass, or both via ANCOVA.

464

465 **Estimation of fecal energy excretion.** In the long-term *in vivo* study, all mice were housed  
466 individually in fresh cages for 24 hours after which the bedding was collected and sifted for feces.  
467 Collected feces were desiccated by freeze drying to calculate the total dry-weight fecal production per  
468 day. The entire sample of collected feces was then was then combusted in a bomb calorimeter (Parr  
469 Instrument Co., 6050 Calorimeter).

470

471 **Statistical analysis.** For data not obtained via sequencing, we performed all statistical analysis within  
472 the R Studio platform (version 023.09.1+494) and the tidyverse packages (version 2.0.0). For single-  
473 variate, non-normally distributed comparisons between treatment groups, we performed Kruskal-  
474 Wallis tests, followed by pairwise Wilcoxon rank-sum tests with the control as a reference group. For  
475 normally distributed data, we performed ANOVAs followed by Tukey's HSD. For longitudinal data  
476 where individual mice were sampled multiple times, we used linear mixed effects models to control for  
477 the random effects of each mouse and avoid autocorrelation, with models run using the nlme package  
478 (version 3.1-164). Multivariate analyses of microbiome composition were performed on sample  
479 distance matrices using the PERMANOVA test in the vegan package.

480

## 481 **DATA AVAILABILITY**

482 Sequencing data have been deposited to the NCBI Sequence Read Archive under submission number  
483 SUB14437337.

484

## 485 **AUTHOR CONTRIBUTIONS**

486 The project was conceived and designed by LDS and RNC. Culturing experiments were performed by  
487 LDS and CRAB. Animal work was performed by LDS and KSC. Samples were processed for  
488 sequencing by LDS and EMV. All analysis and other sample processing was performed by LDS. The  
489 project was supervised by RNC. The manuscript was drafted by LDS and RNC and revised with  
490 feedback from all authors.

491

## 492 **COMPETING INTERESTS STATEMENT**

493 The authors have no competing interests.

494

## 495 **ACKNOWLEDGMENTS**

496 We thank Martin Blaser and members of the Carmody lab for helpful discussions and feedback on  
497 early drafts of this manuscript. This study was supported by a National Science Foundation Graduate

498 Research Fellowship (to LDS) and awards from The William F. Milton Fund (to RNC), Harvard Dean's  
499 Competitive Fund for Promising Scholarship (to RNC), and National Science Foundation (BCS-  
500 2142073 to LDS and RNC).

501

## 502 REFERENCES

- 503 1. Carmody, R. N. & Bisanz, J. E. Roles of the gut microbiome in weight management. *Nat Rev Microbiol* **21**, 535–550 (2023).
- 504 2. Cani, P. D. *et al.* Microbial regulation of organismal energy homeostasis. *Nat Metab* **1**, 34–46 (2019).
- 505 3. Chung, H. *et al.* Gut immune maturation depends on colonization with a host-specific microbiota. *Cell* **149**, 1578–1593 (2012).
- 506 4. Osadchiy, V., Martin, C. R. & Mayer, E. A. The Gut-Brain Axis and the Microbiome: Mechanisms and Clinical Implications. *Clin Gastroenterol Hepatol* **17**, 322–332 (2019).
- 507 5. Lynch, S. V. & Pedersen, O. The Human Intestinal Microbiome in Health and Disease. *N Engl J Med* **375**, 2369–2379 (2016).
- 508 6. Turnbaugh, P. J., Bäckhed, F., Fulton, L. & Gordon, J. I. Diet-induced obesity is linked to marked but reversible alterations in the mouse distal gut microbiome. *Cell Host Microbe* **3**, 213–223 (2008).
- 509 7. David, L. A. *et al.* Diet rapidly and reproducibly alters the human gut microbiome. *Nature* **505**, 559–563 (2014).
- 510 8. Carmody, R. N. *et al.* Cooking shapes the structure and function of the gut microbiome. *Nat Microbiol* **4**, 2052–2063 (2019).
- 511 9. Caffrey, E. B., Sonnenburg, J. L. & Devkota, S. Our extended microbiome: The human-relevant metabolites and biology of fermented foods. *Cell Metab* **36**, 684–701 (2024).
- 512 10. Suez, J. *et al.* Artificial sweeteners induce glucose intolerance by altering the gut microbiota. *Nature* **514**, 181–186 (2014).
- 513 11. Roopchand, D. E. *et al.* Dietary Polyphenols Promote Growth of the Gut Bacterium Akkermansia muciniphila and Attenuate High-Fat Diet-Induced Metabolic Syndrome. *Diabetes* **64**, 2847–2858 (2015).
- 514 12. Chassaing, B. *et al.* Dietary emulsifiers impact the mouse gut microbiota promoting colitis and metabolic syndrome. *Nature* **519**, 92–96 (2015).
- 515 13. Maier, L. *et al.* Extensive impact of non-antibiotic drugs on human gut bacteria. *Nature* **555**, 623–628 (2018).
- 516 14. Spanogiannopoulos, P., Bess, E. N., Carmody, R. N. & Turnbaugh, P. J. The microbial pharmacists within us: a metagenomic view of xenobiotic metabolism. *Nat Rev Microbiol* **14**,

533 273–287 (2016).

534 15. Cho, I. *et al.* Antibiotics in early life alter the murine colonic microbiome and adiposity. *Nature*  
535 **488**, 621–626 (2012).

536 16. Cox, L. M. *et al.* Altering the intestinal microbiota during a critical developmental window has  
537 lasting metabolic consequences. *Cell* **158**, 705–721 (2014).

538 17. Chen, R.-A. *et al.* Dietary Exposure to Antibiotic Residues Facilitates Metabolic Disorder by  
539 Altering the Gut Microbiota and Bile Acid Composition. *mSystems* **7**, e0017222 (2022).

540 18. Mallick, H. *et al.* Multivariable association discovery in population-scale meta-omics studies.  
541 *PLoS Comput Biol* **17**, e1009442 (2021).

542 19. Takeuchi, T. *et al.* Gut microbial carbohydrate metabolism contributes to insulin resistance.  
543 *Nature* **621**, 389–395 (2023).

544 20. Kimura, I. *et al.* Maternal gut microbiota in pregnancy influences offspring metabolic phenotype  
545 in mice. *Science* **367**, eaaw8429 (2020).

546 21. den Besten, G. *et al.* The role of short-chain fatty acids in the interplay between diet, gut  
547 microbiota, and host energy metabolism. *J Lipid Res* **54**, 2325–2340 (2013).

548 22. Speakman, J. R. Measuring energy metabolism in the mouse - theoretical, practical, and  
549 analytical considerations. *Front Physiol* **4**, 34 (2013).

550 23. Wang, Z. *et al.* Specific metabolic rates of major organs and tissues across adulthood:  
551 evaluation by mechanistic model of resting energy expenditure. *Am J Clin Nutr* **92**, 1369–1377  
552 (2010).

553 24. Wheeler, P. E. An investigation of some aspects of the transition from ectothermic to  
554 endothermic metabolism in vertebrates. (Durham University, 1984).

555 25. Noto Guillen, M., Li, C., Rosener, B. & Mitchell, A. Antibacterial activity of nonantibiotics is  
556 orthogonal to standard antibiotics. *Science* **384**, 93–100 (2024).

557 26. Cox, L. M. & Blaser, M. J. Antibiotics in early life and obesity. *Nat Rev Endocrinol* **11**, 182–190  
558 (2015).

559 27. Wreesmann, C. T. J. Reasons for raising the maximum acceptable daily intake of EDTA and the  
560 benefits for iron fortification of foods for children 6–24 months of age. *Matern Child Nutr* **10**, 481–  
561 495 (2014).

562 28. EFSA Panel on Food Additives and Nutrient Sources added to Food (ANS). Scientific Opinion  
563 on the use of ferric sodium EDTA as a source of iron added for nutritional purposes to foods for  
564 the general population (including food supplements) and to foods for particular nutritional uses.  
565 *EFSA J.* **8**, 1414 (2010).

566 29. Reagan-Shaw, S., Nihal, M. & Ahmad, N. Dose translation from animal to human studies  
567 revisited. *FASEB J.* **22**, 659–661 (2008).

568 30. Bolyen, E. *et al.* Reproducible, interactive, scalable and extensible microbiome data science

569 using QIIME 2. *Nat Biotechnol* **37**, 852–857 (2019).

570 31. DeSantis, T. Z. *et al.* Greengenes, a chimera-checked 16S rRNA gene database and workbench  
571 compatible with ARB. *Appl Environ Microbiol* **72**, 5069–5072 (2006).

572 32. McMurdie, P. J. & Holmes, S. phyloseq: an R package for reproducible interactive analysis and  
573 graphics of microbiome census data. *PLoS One* **8**, e61217 (2013).

574 33. Carmody, R. N. Energetic Consequences of Thermal and Non-Thermal Food Processing.  
575 (Harvard University, 2013).

576 34. Lighton, J. R. B. *Measuring Metabolic Rates: A Manual for Scientists*. (Oxford University Press,  
577 2018).

578 35. Tschöp, M. H. *et al.* A guide to analysis of mouse energy metabolism. *Nat Methods* **9**, 57–63  
579 (2011).

580 36. Joint FAO/WHO Expert Committee on Food Additives. *Evaluation of Certain Food Additives and  
581 Contaminants: Thirty-Third Report of the Joint FAO/WHO Expert Committee on Food Additives*.  
582 (1989).

583 37. Joint FAO/WHO Expert Committee on Food Additives. *Evaluation of Certain Food Additives and  
584 Contaminants: Fourty-Fourth Report of the Joint FAO/WHO Expert Committee on Food  
585 Additives*. (1995).

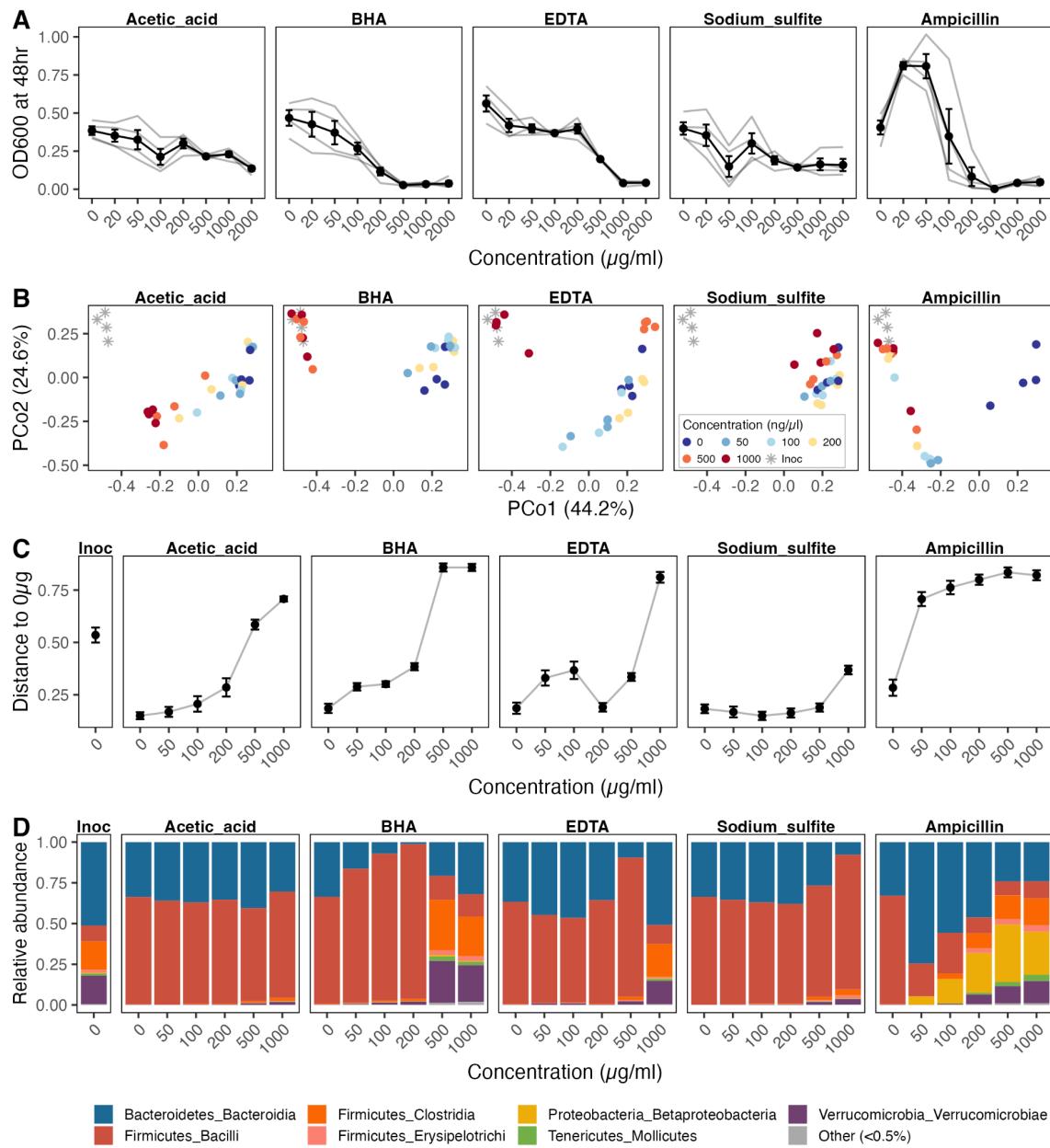
586 38. Joint FAO/WHO Expert Committee on Food Additives. *Toxicological Evaluation of Certain Food  
587 Additives with a Review of General Principles and Specifications: Seventeenth Report of the  
588 Joint FAO/WHO Expert Committee on Food Additives*. (1973).

589 39. Joint FAO/WHO Expert Committee on Food Additives. *Evaluation of Certain Food Additives and  
590 Contaminants. Thirty-Seventh Report of the Joint FAO/WHO Expert Committee on Food  
591 Additives*. (1991).

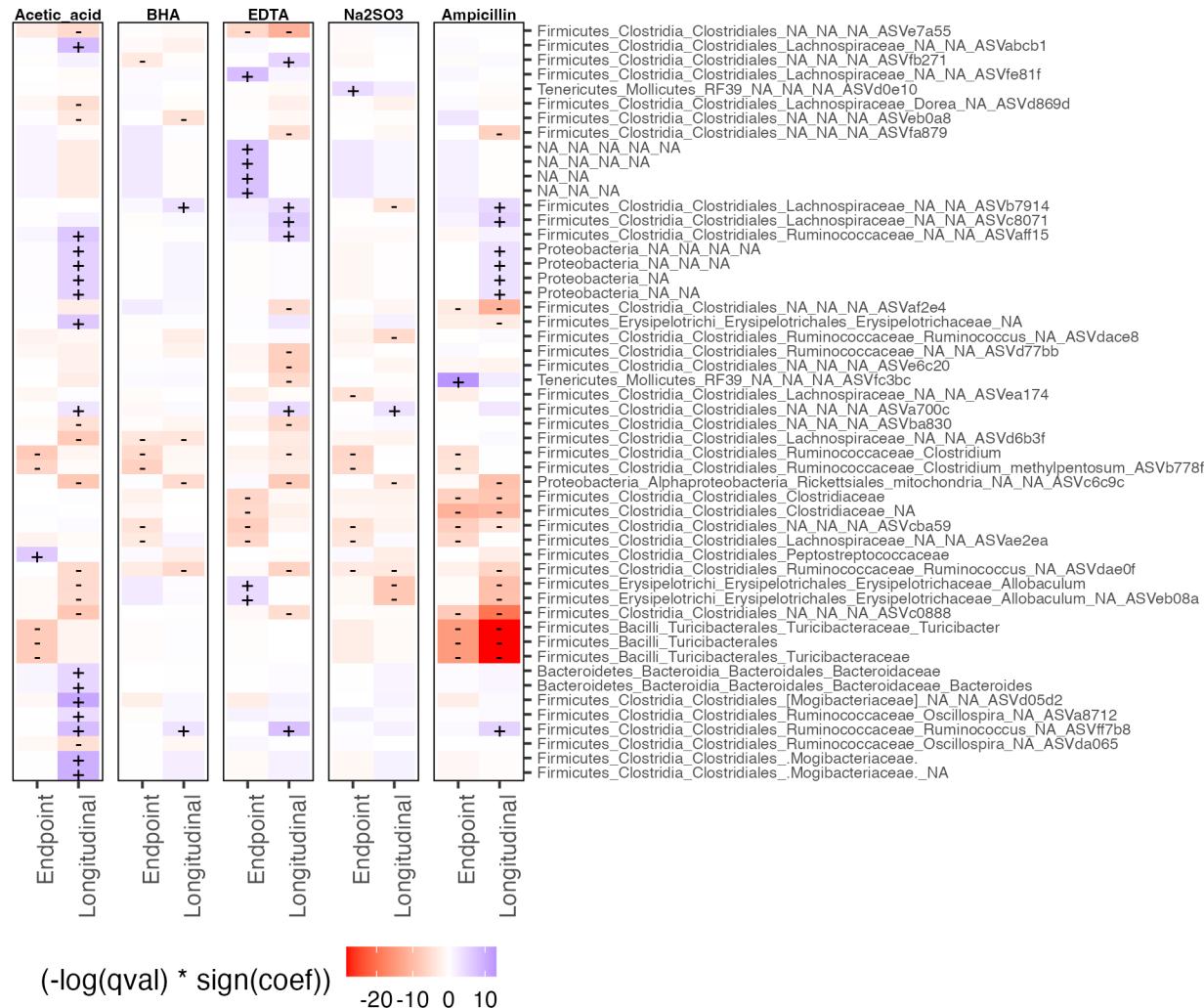
592 40. Joint FAO/WHO Expert Committee on Food Additives. *Evaluation of Certain Food Additives and  
593 Contaminants : Forty-Fourth Report of the Joint FAO/WHO Expert Committee on Food  
594 Additives*. (1995).

595 41. Joint FAO/WHO Expert Committee on Food Additives. *Evaluation of Certain Food Additives:  
596 Fifty-First Report of the Joint FAO/WHO Expert Committee on Food Additives*. (1999).

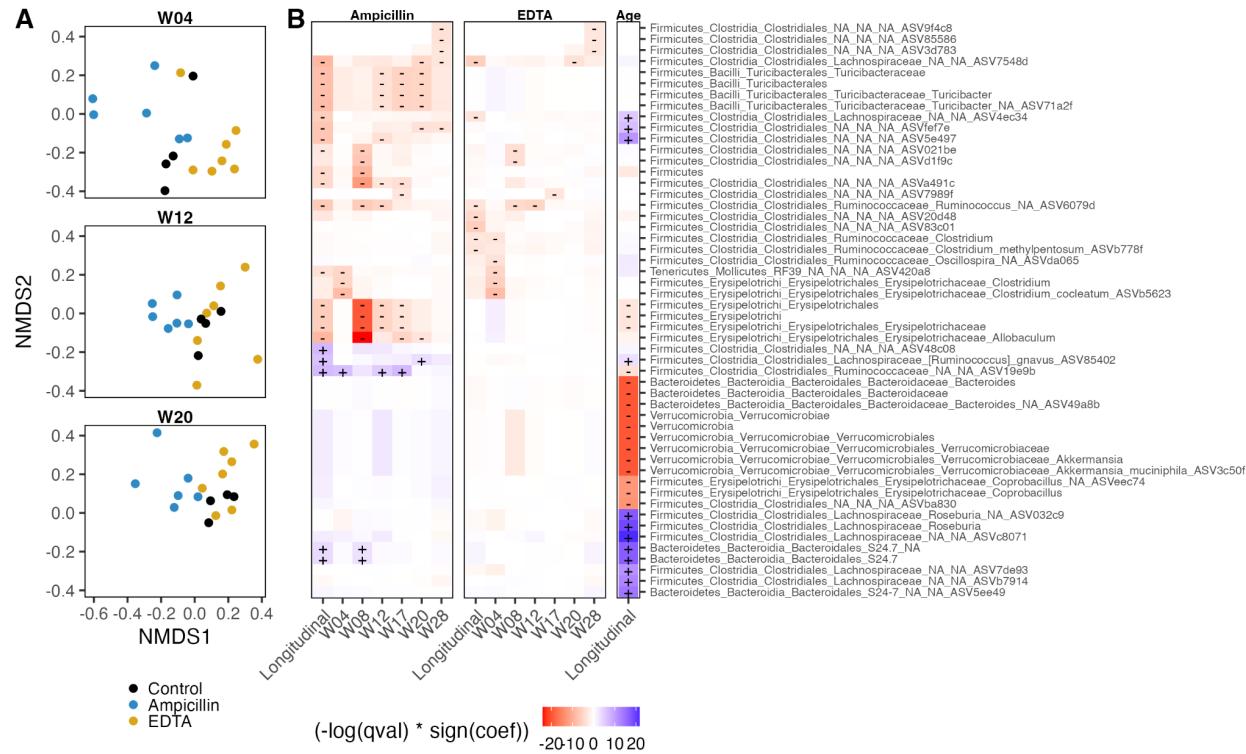
## FIGURES



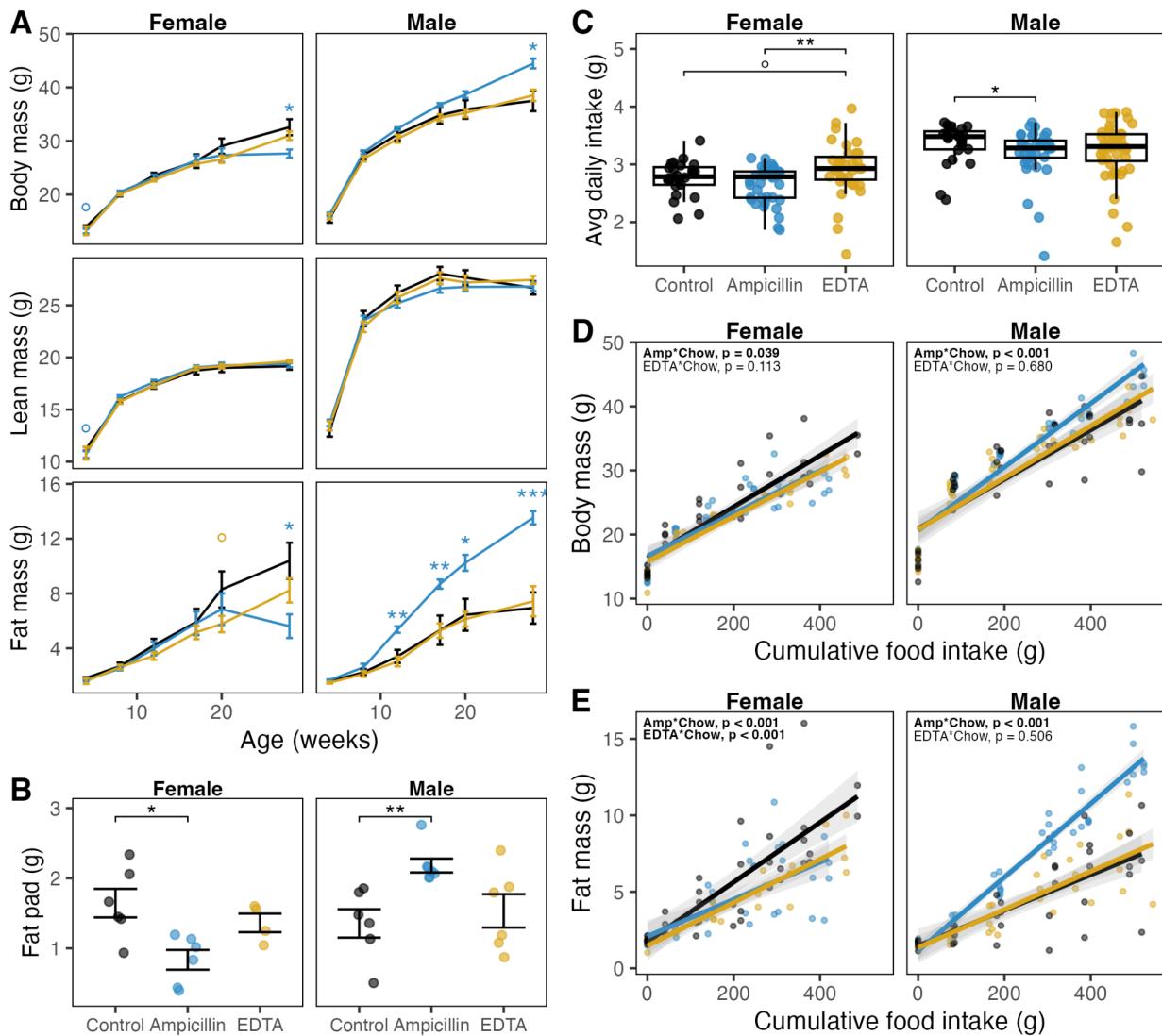
**Figure 1. Impact of preservatives on whole gut communities *ex vivo* after 48 hours of growth.** (A) Cell density at endpoint of whole mouse gut microbial communities grown in media containing varying concentrations of each preservative. Data are mean  $\pm$  SE, with gray lines indicating each of 4 biological replicates. (B) Principal coordinate plot representing dissimilarity among *ex vivo* microbial communities, as indexed by Bray-Curtis distance. The original inoculum is indicated as a gray star. (C) Bray-Curtis distance between each community and the associated no-compound control. Larger values indicate a greater impact of the preservative on microbial community composition. Data are mean  $\pm$  SE. (D) Mean taxonomic composition of each microbial community, showing relative abundance by class.



**Figure 2. Differentially abundant taxa in 7-day *in vivo* trial identified using MaAslin2.** Results displayed from 2 different models, endpoint and longitudinal, showing results from all taxonomic levels (phylum through ASV) with corresponding taxonomic classification, where available. The endpoint model was run on data from all endpoint (Day 7) samples, including the 4 points sampled along the GI tract, with treatment and GI location as fixed effects and source cage as a random effect. The longitudinal model captured fecal samples from baseline (Day -2) through treatment Day 6 and used treatment as a fixed effect with source cage as a random effect. Direction and strength of effect are indicated by color, with statistically significant effects ( $q < 0.05$ ) indicated by + or - signs. NA indicates taxonomic levels with no known classification.

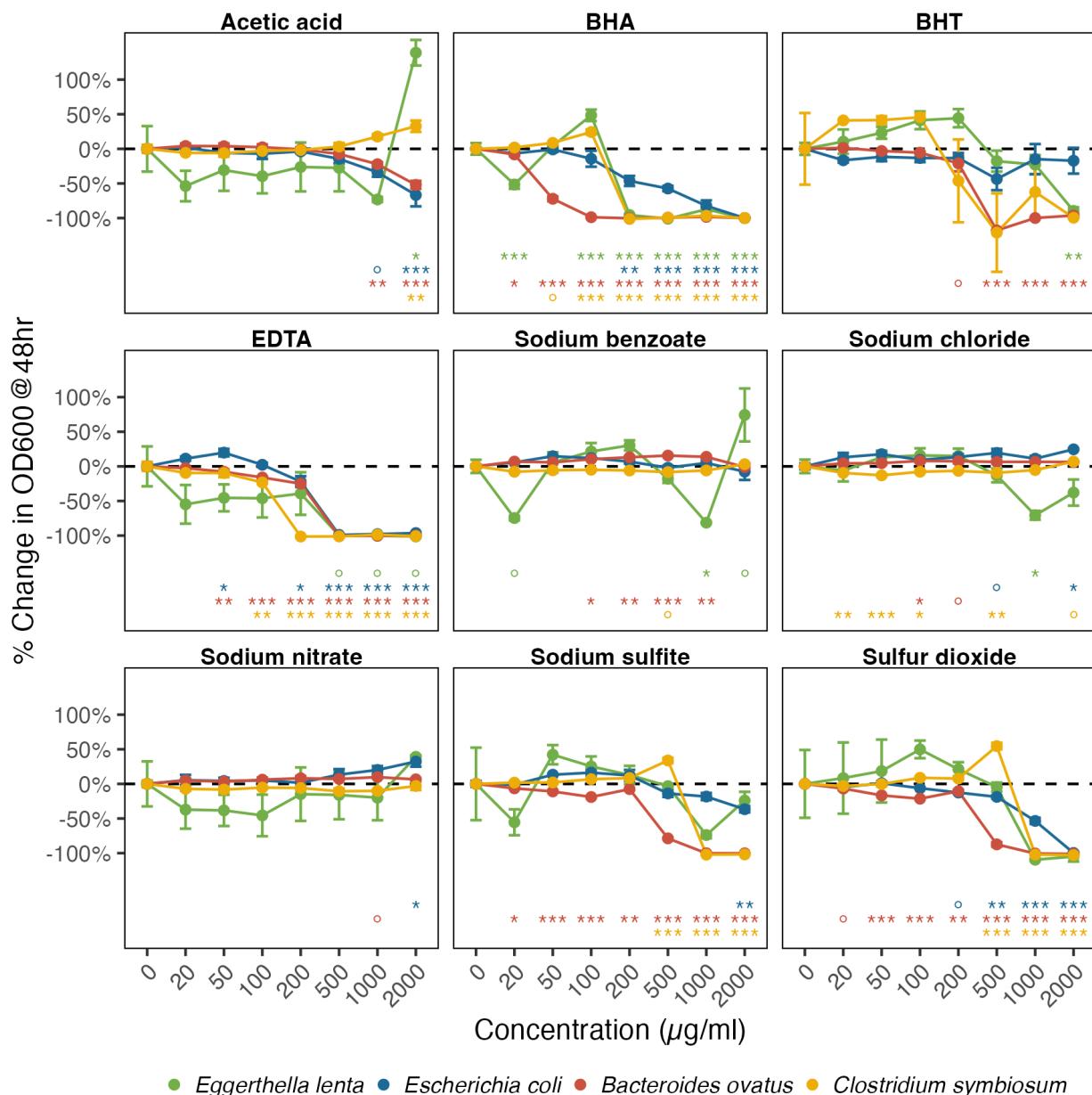


**Figure 3. Gut microbiota composition in long-term trial.** (A) Non-dimensional linear scaling (NMDS) ordination plot of Bray-Curtis distances between mouse gut microbiomes at 4, 12, and 20 weeks of age. (B) Top 50 taxa that differ significantly by treatment and/or age, as identified by MaAslin2. Models were run across all ages with 'Age' as an additional fixed effect and 'Mouse ID' as a random effect (longitudinal model) or else at each age independently (W04 through W28). Direction of effect is indicated by color, with darker shades indicating lower q values and statistically significant effects ( $q < 0.05$ ) indicated by + or - signs.

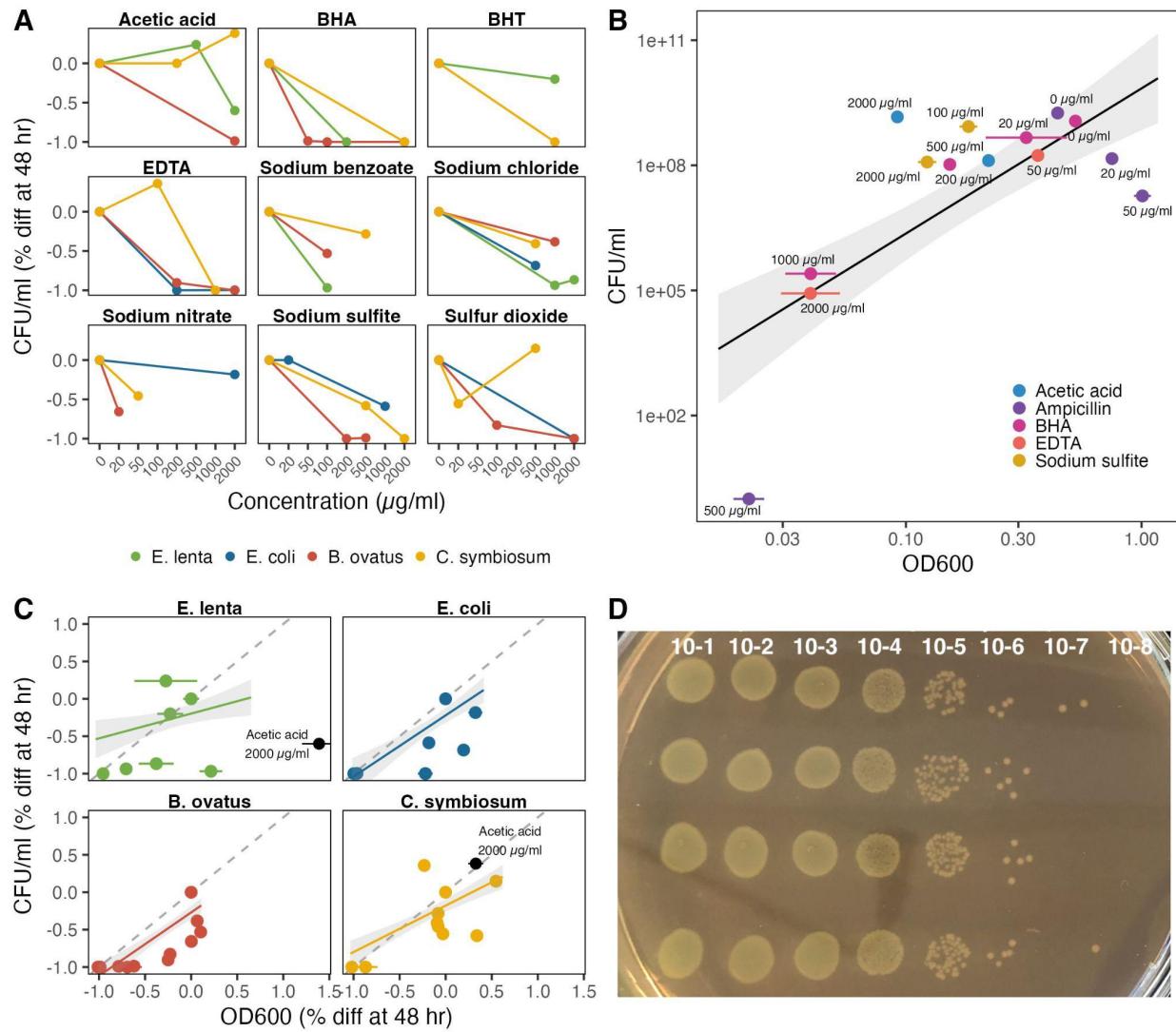


**Figure 4. Growth, body composition, and food intake of mice in the long-term trial.** (A) Body mass of mice from 4 through 28 weeks of age, with lean and fat body mass indexed by EchoMRI. (B) Mass of the gonadal white adipose tissue deposits at 28 weeks for females (parametrial fat pad) and males (epididymal fat pad). (C) Average daily food intake from weeks 4 through 28. Boxplots indicate median, first and third quartiles, with whiskers indicating 1.5 times interquartile range. (D-E) Total body mass (D) and body fat (E) as a function of cumulative food intake from 4 to 28 weeks of age, notated with results of linear mixed effects model  $\sim$  Cumulative chow \* Treatment with mouse ID as a random effect. Data are mean  $\pm$  SE (A, B). All statistical annotation is treatment relative to the control group, unless otherwise indicated. Wilcoxon rank-sum test,  $^{\circ} = p < 0.1$ ,  $^* = p < 0.05$ ,  $^{**} = p < 0.01$ ,  $^{***} = p < 0.001$ .

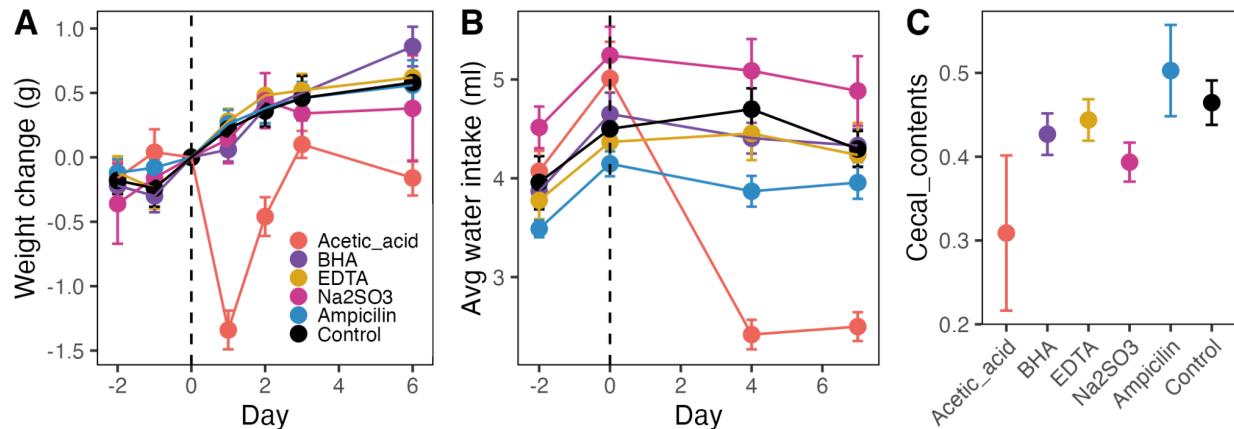
## SUPPLEMENTARY MATERIALS



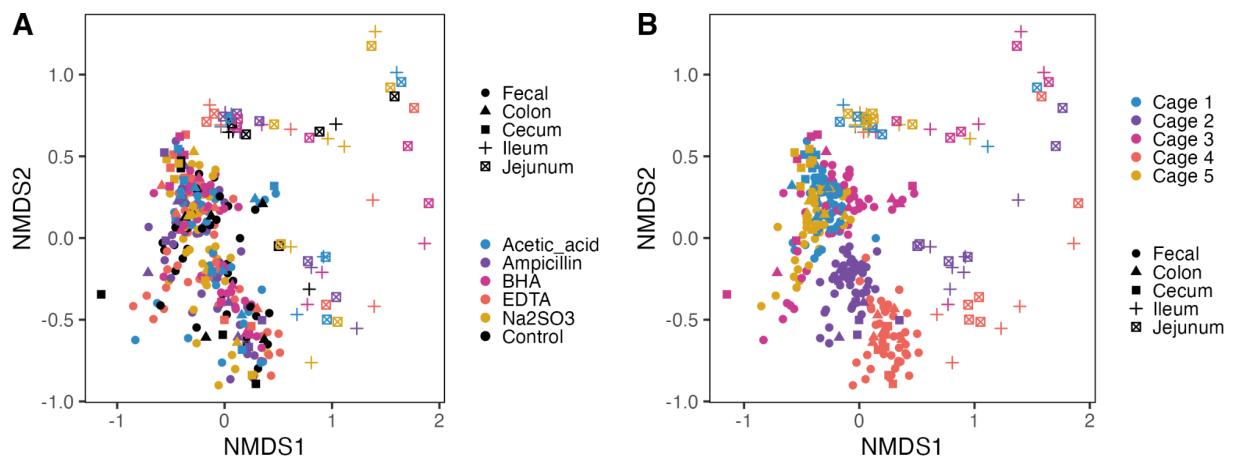
**Figure S1. Impact of preservatives on growth of individual gut isolates *in vitro*.** Cell density (OD<sub>600</sub>) for each preservative and concentration is shown as a percent of no-compound growth controls after 48 hours growth. Data represent mean  $\pm$  SE of 3 technical replicates. Statistical differences for each strain at each concentration versus no-compound controls (0 µg/ml) using Tukey's HSD test annotated as: ° = p<0.1, \* = p<0.05, \*\* = p<0.01, \*\*\* = p<0.001.



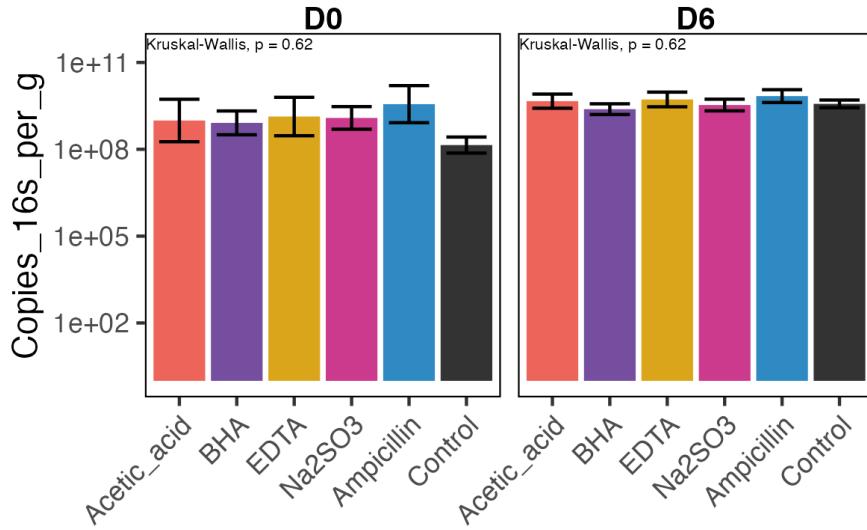
**Figure S2. Validation of bacterial cell density measurements.** Counts of colony forming units (CFUs) from a subset of *in vitro* cultures of both individual strains expressed as the percent difference from controls at endpoint (A, C) and whole fecal communities at endpoint (B, all expressed relative to optical density readings). Data in B and C are mean  $\pm$  SE, with panel B plotted on a log-log scale to highlight CFU counts on the lower end of the spectrum. (D) Image of a representative test plate, with 4 replicates of each 5  $\mu\text{l}$  drop at each dilution (1:10<sup>1</sup> through 1:10<sup>8</sup>).



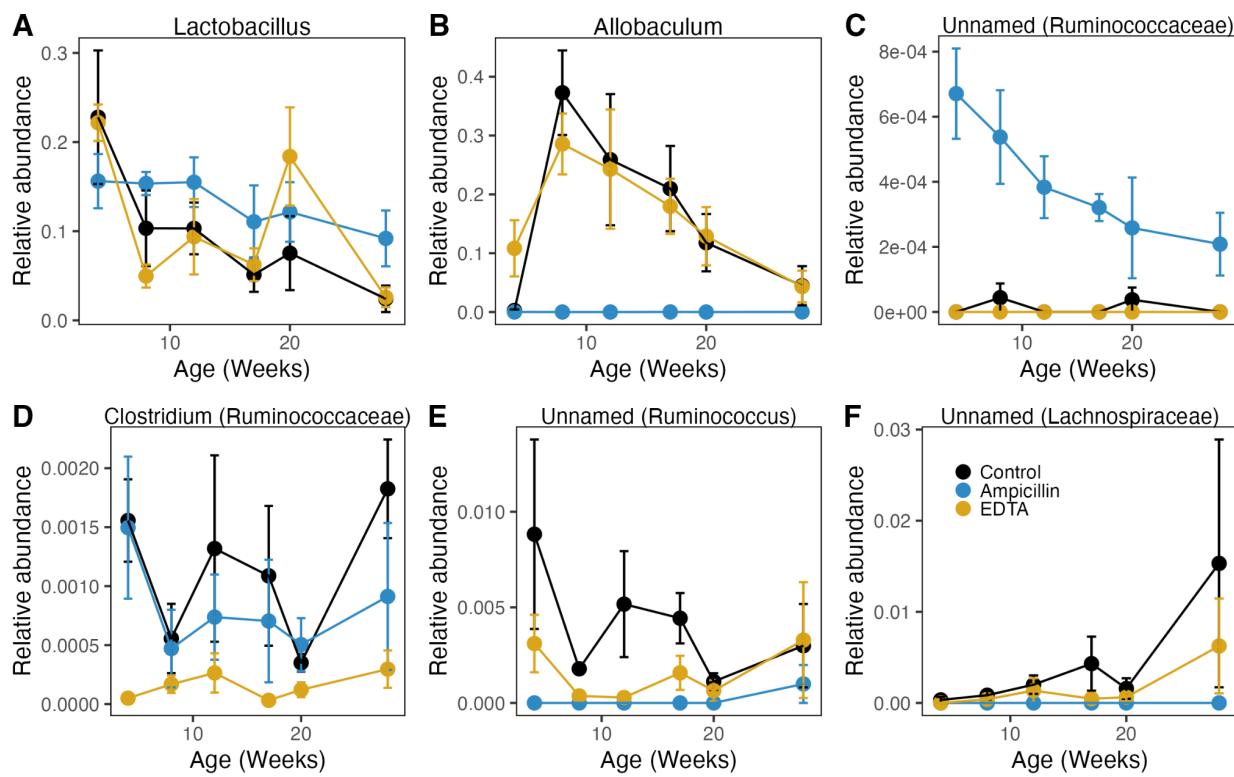
**Figure S3. Physical measurements in 7-day *in vivo* trial.** (A) Change in mouse body mass from Day -2 (Baseline) through Day 6 of treatment. (B) Water intake during baseline and treatment. Values for each day represent the change in mass of cage water bottles divided by the days since the last measurement. (C) Mass of cecal contents at Day 7. Data are mean  $\pm$  SE.



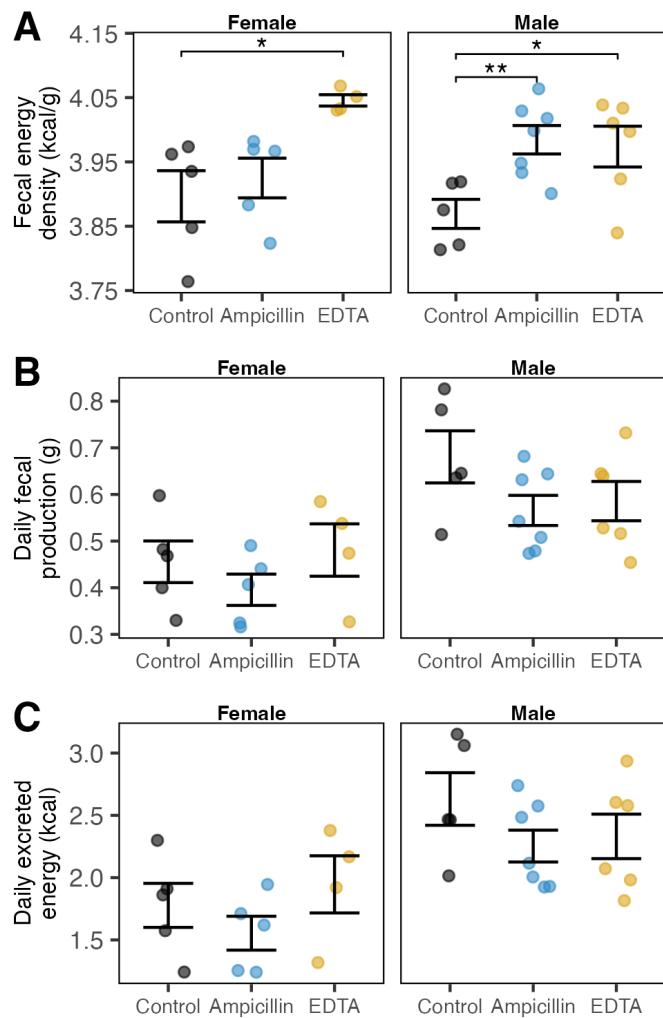
**Figure S4. Gut microbial community composition in 7-day *in vivo* trial.** Non-dimensional linear scaling (NMDS) ordination plot of Bray-Curtis distances between gut microbiome samples collected along the gastrointestinal tract. (A) Samples colored by treatment group. (B) Samples colored by pre-baseline cage groupings to emphasize cage effect.



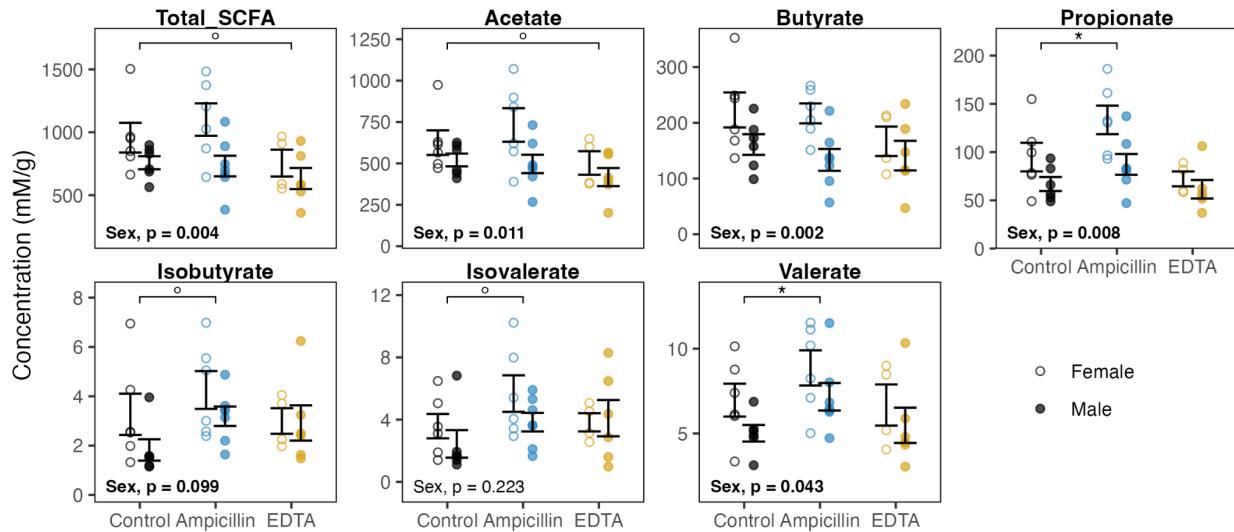
**Figure S5.** Absolute fecal bacterial abundance at Day 0 and Day 6, measured by quantitative PCR of the 16S gene. Data are mean  $\pm$  SE.



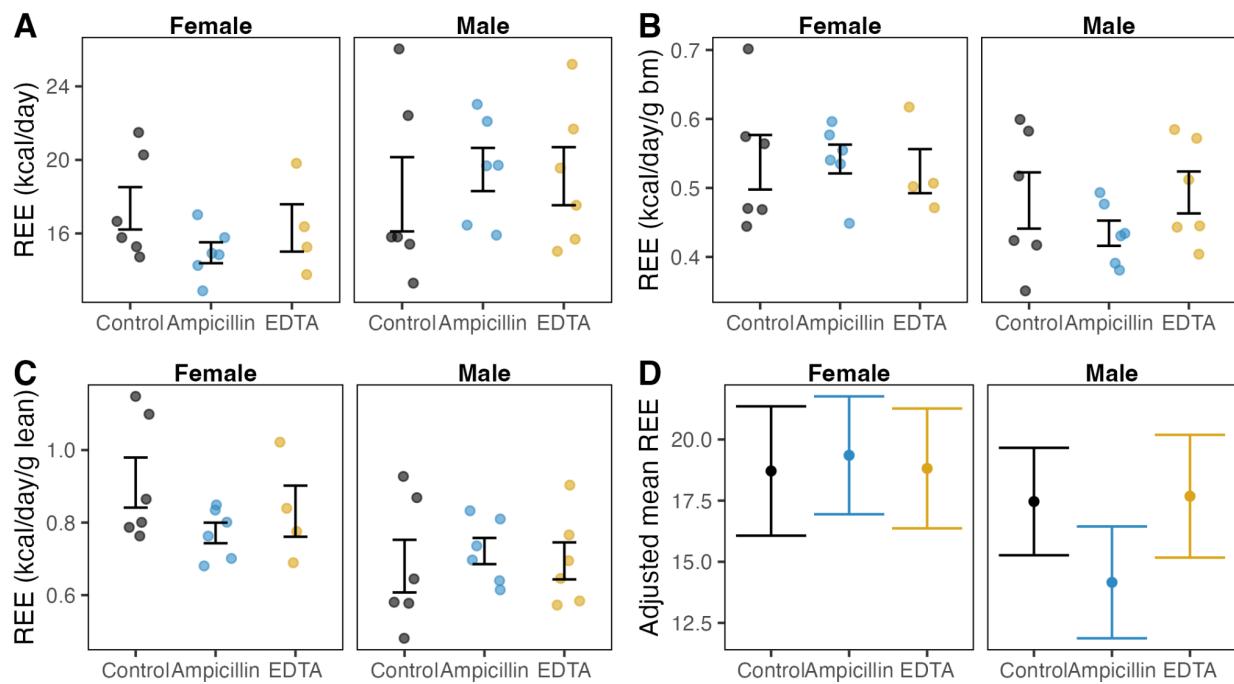
**Figure S6. Relative abundance of select genera and ASVs in the long-term trial.** Notable genera previously found to differ with early-life antibiotic treatment<sup>16</sup> (A, B) and genera and unnamed ASVs identified by MaaAslin2 as significantly different between at least one treatment group and controls (C-F). Across these taxa, we observed significant differential abundance by ampicillin treatment (B, C, E, F), by EDTA treatment (D-F), and by age (C, F). ASVs are presented with the lowest known taxonomic identification. Data are mean  $\pm$  SE and colored by treatment group (n = 4-7).



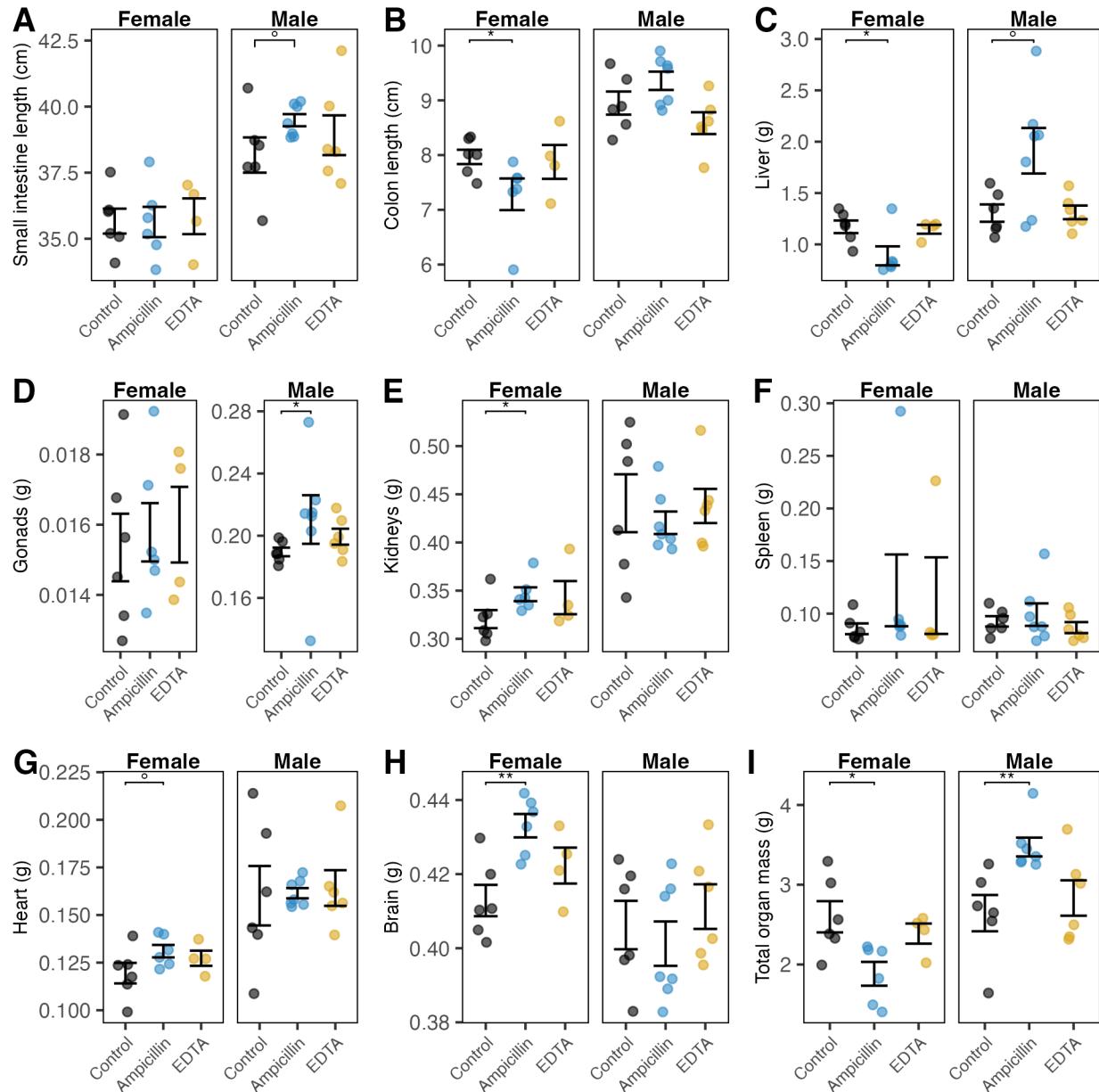
**Figure S7. Fecal energy excretion.** (A) Caloric density of fecal dry matter quantified via bomb calorimetry. (B) Total fecal production over 24 hours. (C) Total excreted energy over 24 hours, calculated as the product of fecal energy density and fecal production over the same time period. Material was collected from mice at 28 weeks of age. Error bars are mean  $\pm$  SE. Wilcoxon rank-sum test,  $^{\circ} = p < 0.1$ ,  $^* = p < 0.05$ ,  $^{**} = p < 0.01$ ,  $^{***} = p < 0.001$ .



**Figure S8. Cecal short-chain fatty acid contents.** Concentrations measured by GC-MS and displayed as mM per g dry matter. Total SCFA is the sum of all 6 SCFAs shown individually. Data are mean  $\pm$  SE. 2-way ANOVA on SCFA Concentration  $\sim$  Sex \* Treatment, followed by Tukey's HSD,  $^{\circ}$  =  $p < 0.1$ ,  $*$  =  $p < 0.05$ ,  $**$  =  $p < 0.01$ ,  $***$  =  $p < 0.001$ . Interaction effects: Total SCFAs ( $p = 0.058$ ), propionate ( $p = 0.061$ ), and butyrate ( $p = 0.062$ ) for ampicillin-treated females versus ampicillin-treated males.



**Figure S9. Indirect calorimetry.** (A) Estimated resting energy expenditure (REE) of fasted 28-week-old mice, expressed as kcal per day. (B) REE expressed per gram of mouse body mass. (C) REE expressed per gram of lean body mass. Data in A-C are mean  $\pm$  SE. No significant differences from control were detected for any group (Mann-Whitney U test,  $p > 0.05$ ). (D) REE group means adjusted using ANCOVA with mouse lean mass and fat mass as covariates. Data in D are adjusted means  $\pm$  SE.



**Figure S10. Organ sizes of 28-week-old mice.** Organ sizes given as length (A, B) or mass (C-I). For paired organs (gonads and kidneys), value represents the sum of the left and right sides. Total organ mass (I) is the sum of all organ mass measurements (C-H). Data are mean  $\pm$  SE. Wilcoxon rank-sum test,  $^{\circ} = p < 0.1$ ,  $^* = p < 0.05$ ,  $^{**} = p < 0.01$ ,  $^{***} = p < 0.001$ .

**Table S1: Background information on preservatives tested in initial *in vitro* screen**

Compound	Functional class	Food use	Acceptable daily intake† (mg/kg/day)	FDA concentration limits (µg/ml)
Acetic acid	Antimicrobial, flavoring agent, acidity regulator	Vinegar (natural), cheese, dressings, condiments	NA	NA
BHA (butylated hydroxyanisole)	Antimicrobial	Cereals, chips, baked goods, condiments, shortening, fats/oils	0.5 <sup>36</sup>	200
BHT (butylated hydroxytoluene)	Antioxidant, antimicrobial	Same as BHA	0.3 <sup>37</sup>	200
Disodium EDTA (ethylenediamine-tetraacetic acid)	Antioxidant, antimicrobial Antioxidant, color retention agent, preservative, sequestrant, stabilizer	Canned vegetables, potatoes, beans, sauces, dressings, sweeteners, multivitamins	2.5 <sup>38</sup>	1000
Sodium benzoate	Antimicrobial	Carbonated beverages, syrup, margarine, dressings; Natural in cranberries, plums, cinnamon, cloves	5 <sup>39</sup>	1000
Sodium chloride	Flavoring agent	All food types, household use	NA	NA
Sodium nitrate	Antimicrobial	Processed meats	3.7 <sup>40</sup>	500
Sodium sulfite	Antimicrobial	Wine, cider, beer, cereal/potato-based snacks	0.7 <sup>41</sup>	500 <sup>§</sup>
Sulfur dioxide	Antimicrobial	Dried fruit, wine, cider, beer	0.7 <sup>41</sup>	500

† Acceptable daily limit (ADI) is based on JECFA/WHO recommendations and represents the upper limit of the compound that is safe for ingestion in units of mg compound per kg body weight per day. Estimated dietary concentration (EDC) was based on FDA limits for compound concentrations in foods, when available. For acetic acid for which there is no usage limit, the upper dietary concentration was estimated based on dietary intake estimates.

§ While the FDA does not specify a limit of concentrations in food from our source, sodium sulfate is evaluated together with sulfur dioxide and the same limits are proposed by other regulatory bodies (namely FAO/WHO). Therefore we apply the permissible concentration of sulfur dioxide (0.05%) to sodium sulfite here.

**Tables S2 and S3:**

Please see appended Excel file.