# Pathogen and Pathobiont Management

Pathogen management guidelines and considerations for pathobiont management to minimise the impact to beneficial gut microbes.



## **Pathogens defined**

	Pathogen	Opportunistic pathogen	Pathobiont	Commensal
			Contraction of the second	
Definition	A microbial strain that can cause disease	A microbial strain that can cause disease in susceptible hosts	A microbial species associated with negative health outcomes*	A microbial species associated with positive health outcomes*
Management	Medical treatment dependent on pathogen and clinical presentation	Medical treatment may be considered in vulnerable patients	Targeted intervention may be considered if over-abundant	Targeted intervention may be considered if under-abundant
Example	E. coli 0157	Klebsiella oxytocca	Bilophila wadsworthia	Faecalibacterium prausnitzii

\*Often based on cross-sectional studies where causation has not been established



### When to consider testing for pathogen identification

#### Clinical indications for referring for diagnostic pathogen panel include:

- Chronic signs and symptoms of a pathogen infection, including loose stools, frequent defecation, weight loss, bloating, abdominal pain, nausea, vomiting<sup>^</sup>
- History of overseas travel or exposure to environments with reduced sanitation

**O-BIOM** 

MetaXplore<sup>™</sup> GI Plus

STOOL SAMPLE KIT

nal Health Markers hogen & Parasite Pa

- Immunocompromised patient
- Suspected or diagnosed post-infective IBS

^For acute or severe symptoms referral to the GP for testing is recommended.

# Testing to support pathogen identification

Stool testing using MetaXplore GI Plus can be used for targeted pathogen detection<sup>1</sup> alongside gut microbiome<sup>2</sup> and gastrointestinal health marker<sup>1</sup> profiles. MetaXplore GI Plus utilises RT-PCR (real-time polymerase chain reaction) that is routinely used as a highly sensitive method for the detection of target pathogens, species or genera. MetaXplore GI Plus combines RT-PCR analysis with metagenomics to provide comprehensive insights into the health of the whole gut microbiome to support informed clinical decision-making.

<sup>1</sup>The faecal occult blood, real-time polymerase chain reaction (RT-PCR) and enzyme-linked immunosorbent assays (ELISA) used in the MetaXplore<sup>TM</sup> range are diagnostic and are approved for clinical use.

<sup>&</sup>lt;sup>2</sup>The faeces pH assay used in the MetaXplore<sup>™</sup> range is for research use only and not to be used as a basis for diagnosis. The metagenomic assays used in the MetaXplore<sup>™</sup> range are to determine the microbiome populations and associated functional pathways in a faecal sample. The application is for research use only and not to be used as a basis for diagnosis.

#### Pathogen management guidelines

Medical treatment if detected

Entamoeba histolytica

**Clostridium difficile pathogenic strains** *C. difficile* toxin B, Hypervirulent *C. difficile* 

Giardia lamblia

#### Medical referral if symptomatic

Medical treatment if symptomatic

Escherichia coli pathogenic strains

Enterotoxigenic *E.coli* (ETEC), Enteroaggregative *E. coli* (EAEC), *E. coli* 0157, Shiga toxin *Shigella spp/* enteroinvasive *E.coli* (EIEC), Enteropathogenic *E. coli* (EPEC)

Not necessarily pathogenic strains Consideration of clinical presentation required Aeromonas spp. Campylobacter spp. Cryptosporidium spp. Cyclospora cayetanensis Salmonella spp Vibrio spp. Yersinia enterocolitica

Metagenomic detected potential pathogens e.g. Campylobacter\_D upsaliensis, Clostridium\_P perfringens

Pathogenic role is unclear Exclude other causes of symptoms before considering treatment

Dientamoeba fragilis Blastocystis sub-types (species)\*

Clinical context must always be primary consideration.

# Pathobiont management checklist

STE Test the mi	P 1 crobiome	STEP 2 Evaluate the clinical case	STEP 3 Consider the cause	STEP 4 Treat the cause		
Test the microbiome	Rule out pathogen requiring medical treatment or referral					
	Assess microbiome resilience by reviewing diversity and richness					
	Identify overabundant pathobionts by reviewing distance from average in species table					
	Identify underabundant commensals by reviewing distance from average in species table					
	Evaluate functional dysbiosis by reviewing microbial markers					
Evaluate the clinical case	Consider clinical context such as clinical symptoms, severity, and duration					
	Note the patient's vulnerability, such as immunocompromised status, age, or underlying conditions that may affect treatment decisions					
	Ensure any red flag gastrointestinal health markers have been medically investigated (elevated calprotectin or lactoferrin, detected occult blood)					
	Assess gut function and environment including inflammation and gut barrier by using gastrointestinal health markers					
Consider the cause	Determine gastrointestinal function and environment					
	Note functional dysbiosis					
	Consider underlying conditions					
	Review medication history					
	Evaluate dietary factors					
	Assess lifestyle and stress factors					
Treat the cause	Implement MetaXplore personalised insights to manage microbial markers					
	Maximise microbial diversity and richness					
	Support gastrointestinal function such as digestive secretions and motility					
	Regulate gastrointestinal environment by managing intestinal barrier and intestinal inflammation					
	Optimise diet and lifestyle to support microbiome and gut health					

# **Considerations for antimicrobial treatment**



MetaXplore is proudly & exclusively available in Australia via Co-Biome and in the UK via Invivo Healthcare.