ヒト腸内フローラの解析:培養法と定量的 PCR 法の比較

田中隆一郎、松木隆広、渡辺幸一、高田敏彦 ヤクルト中央研究所

19世紀後半からの近代細菌学は、Robert Koch(1843-1910)に代表される微生物の純粋培養技法の確立に始まる。以来、20世紀のほぼ 100年間はこの培養技法を基本とする方法論が細菌学研究の主流であった。しかしながら、20世紀末からの分子生物学の興隆は新たな微生物の認識法を提案しており、それらは定量的 PCR 法、FISH 法、DGGE 法、クローンライブラリー法など多彩である。

培養法ではたとえ非選択培地であっても、人工培地の使用による培養可能な菌種の選択圧がかかることは避けられず、このため実在する菌数に比してその培養可能な菌数は低く出ることが通常である。ヒト大便材料での培養結果からは、培養可能な菌数は顕微鏡下に計測された菌数の 15 - 58%に過ぎないことが知られている。また、複雑な菌叢構成を示すヒト腸内フローラの分析には相応の熟練した技術が要求され、ことに細菌の同定に至ってはまさに職人芸とも称される技術が求められてきた。しかしながら、これらの技術にかかる労力と時間の割にはその精度に問題が残り、ことに近年の系統分類の基礎となった遺伝子配列からの結果と対応しない場面があった。

われわれは 1995 年から定量的 PCR 法の開発を目指し、腸内フローラ構成菌種の 16S rRNA の遺伝子配列を標的とした菌群および菌種特異的プライマーの作成を進めてきた。一方、大便から抽出した DNA を標的に上記のプライマーを用いた定量的 PCR 法が可能な自動化装置の開発も行った¹。表 1 は健常成人の大便菌叢を定量的 PCR 法、FISH 法および培養法を用いて比較した成績である²。対象とした細菌群は、 Clostridium coccoides グループ、 C. leptum サブグループ、 Bacteroides fragilis グループ、 Bifidobacterium、 Atopobium クラスター、 Prevotella の 6 菌群である。培養法は経験的に最も回収菌量が高いMedium10 を用いた。また総菌数は細菌 DNA を染める DAPI 染色により求めた。この結果、総菌数に対する培養可能な菌数の割合は 54%となり定量的 PCR 法では 72%となった。特に培養法では Clostridium coccoides グループや C. leptum サブグループの検出割合が低いことが判明した。さらに、4 6名の成人を用いた成績では総菌数 10.9 (LogCFU/G)に比し、定量的 PCR 法は 10.8 (LogCFU/G)となり、この6菌群で 79.4%を占めることも判明したが詳細な構成菌種の解析はこれからである。ただし、 Bifidobacterium の菌種構成はすでに明

らかにしており、培養法との比較が可能である。定量的 PCR 法では乳児特異的 と考えられた B. breve が成人からも低率に検出されることから、一部の個体では食生活の変動にもかかわらずなお保持されることが分かった。

遺伝子レベルで約80%が認識可能となったが、これらの菌種の詳細な情報が不足している。さらには残り20%の菌種の実体は依然として不明である。また、これら遺伝子レベルで認識可能な菌の中には従来から難培養性未知菌群としてきた菌種が多数含まれており、これらの菌群を培養可能にする努力も始まっている。ヒト腸内フローラの解明とその共生関係の実態解明に迫るのも時間の問題になってきた。

文献

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Table 1 Comparison of quantitative PCR (qPCR), FISH, and culture method (CFU) for quantification of predominant bacteria in fecal samples

| Bacteria | A-8 ^b | | | B-8 | | | C-8 | | | D-8 | | | | | | F-8 | | |
|--------------------|------------------|-------|-------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----|
| | qPCR | FISH | CFU | qPCR | FISH | CFU | qPCR | FISH | CFU | qPCR | FISH | CFU | qPCR | FISH | CFU | qPCR | FISH | CFU |
| C. coccoides group | 10.4 | 10.4 | 10.4 | 10.7 | 10.4 | 10.3 | 10.4 | 10.2 | 9.9 | 10.5 | 10.5 | 10.3 | 10.3 | 10.3 | 10.2 | 9.5 | 9.4 | - |
| C. leptum subgroup | 10.1 | 10.3 | 10.1 | 10.7 | 10.2 | 9.9 | 10.7 | 10.0 | 10.4 | 10.8 | 10.4 | 10.2 | 10.5 | 9.8 | 10.1 | 6.5 | - | - |
| B. fragilis group | 10.5 | 10.3 | 10.7 | 10.1 | 10.4 | 10.3 | 10.1 | 10.3 | 10.3 | 9.4 | 9.7 | 9.4 | 10.0 | 10.0 | 10.2 | 9.7 | 8.5 | 9.7 |
| Bifidobacterium | 9.9 | 9.7 | 9.2 | 10.3 | 10.3 | 9.9 | 10.3 | 9.9 | 10.0 | 9.7 | 9.3 | 9.4 | 9.8 | 9.4 | 9.4 | 6.5 | 7.8 | - |
| Atopobium cluster | 9.6 | 9.7 | 9.9 | 9.6 | 9.9 | 9.9 | 10.3 | 9.6 | 10.2 | 9.9 | 9.7 | 10.1 | 9.9 | 9.1 | 9.8 | 6.8 | - | - |
| Prevotella | | NT | • | - | NT | | 10.2 | NT | 9.8 | 10.7 | NT | 10.4 | | NT | | | NT | |
| Sum of 6 groups | 10.9 | 10.9 | 11.0 | 11.1 | 11.0 | 10.8 | 11.2 | 10.8 | 10.9 | 11.2 | 10.8 | 10.9 | 10.9 | 10.6 | 10.7 | 9.9 | 9.5 | 9.7 |
| Total bacteria | NT | 11.0° | 11.1 ^d | NT | 11.1 | 10.9 | NT | 10.9 | 11.0 | NT | 10.9 | 11.0 | TM | 10.8 | 10.7 | _NT | 9.7 | 9.9 |
| Total cells (DAPI) | | 11.2 | | | 11.3 | | | 11.2 | | | 11.1 | | | 11.1 | | | 10,3 | |

^a Number, Log₁₀ cells per gram of feces (wet weight): -, not detected: NT, not tested.

^b Fecal samples collected at 8th month were used for comparison.

Total number of bacteria determined by hybridization with probe Bact 338. In the present study, 66, 63, 46, 60, 53, and 28% (53 ± 14, average ± SD) of total cells were detected with Bact338 probe in sample A, B, C, D, E, and F, respectively

^d Total cultivated bacteria with the Medium 10.

Analysis of human intestinal flora:

Comparison between culture and quantitative PCR methods

Ryuichiro Tanaka, Takahiro Matsuki, Koichi Watanabe, Toshihiko Takada

Yakult Central Institute for Microbiological Research

Modern bacteriology in the late 19th century started with the establishment of a pure culture technique, represented by that developed by Robert Koch (1843-1910). Since then, methodology based on this culture technique became the mainstream of bacteriological studies for nearly 100 years of the 20th century. However, the advent of molecular biology since the end of the 20th century has provided various novel microbial identification methods such as quantitative PCR, FISH, DGGE, and clone library methods.

Culture methods, even when a nonselective medium is used, cannot be free from selective pressure for culturable bacterial strains due to the use of artificial medium, which usually results in a smaller number of culturable bacteria than the total number. The results from cultures using human feces indicated that the number of culturable bacteria is no more than 15-58% of the number counted under a microscope. In addition, analysis of complex human intestinal flora requires considerable skills; in particular, bacterial identification has demanded even artisan skills. However, these techniques have problems with precision in spite of the energy and time spent on them, and, in particular, their results are sometimes inconsistent with those of gene sequencing, a basic technique for recent systematic biology.

Since 1995, to develop a quantitative PCR method, we've worked on designing bacterial group- and bacterial strain-specific primers targeting 16S rRNA sequences of the constituent strains of intestinal flora. Also, we developed an automatic device that allows quantitative PCR using the above primers targeting the DNA extracted from feces¹⁾. Table 1 shows the data of bacterial

flora of healthy adult feces, compared using quantitative PCR, FISH, and culture methods²⁾. The 6 bacterial groups of interest include the *Clostridium coccoides* group, C. leptum subgroup, Bacteroides fragilis group, Bifidobacterium, Atopobium cluster, and Prevotella. Medium 10, with which the highest yield of bacteria was confirmed empirically, was used for the culture method. The total number of bacteria was determined by DAPI staining of bacterial DNA. As a result, culturable bacteria accounted for 54% of the total bacteria; 72% by the quantitative PCR method. The detection rates of the Clostridium coccoides group and *C. leptum* subgroup were particularly lower by the culture method. In addition, the total number of bacteria from the data on 46 adults was 10.9 (LogCFU/G); 10.8 (LogCFU/G) by the quantitative PCR method. These 6 bacterial groups accounted for 79.4%. However, in-depth analysis of constituent bacterial strains is needed in the future. In this regard, constituent bacterial strains of *Bifidobacterium* have already been determined, allowing comparison with the culture method. *B. Breve*, once considered infant-specific, could also be detected from adults by quantitative PCR at a low rate, demonstrating that it is retained within some individuals in spite of changes in diet.

Approximately 80% of strains have become identifiable on a genetic level, however, detailed data concerning these strains is lacking. In addition, the remaining 20% remain unidentified. These bacteria, identifiable on a genetic level, include many unknown bacterial groups that have been difficult to culture until now; therefore, efforts to culture these bacterial groups have also started. It's simply a matter of time before human intestinal flora and the actual conditions of its symbiosis are elucidated.

References

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