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Coláiste na hOllscoile Corcaigh

- 1 The microbiome of professional athletes differs from that of sedentary subjects not only in
- 2 composition but particularly at the functional metabolic level
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- Abbreviations: Short chain fatty acid (SCFA), Body mass index (BMI), Ribosomal 24
- ribonucleic acid (rRNA), Vitamin Biosynthesis (VB), Lipid Biosynthesis (LB), Amino Acid 25
- Biosynthesis (AAB), Carbohydrate Biosynthesis (CB), Cofactor Biosynthesis (CfB), Energy 26
- Metabolism (EM), Creatine kinase (CK), trimethylamine-N-oxide (TMAO), 27

28 phenylacetylglutamine (PAG), trimethylamine (TMA), 3-Carboxy-4-methyl-5-propyl-2-

- 29 furanpropionic acid (CMPF), Cardio-vascular disease (CVD).
- 30

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32

33 ABSTRACT

34 **Objective**

It is evident that the gut microbiota and factors that influence its composition and activity influence human metabolic, immunological, and developmental processes. We previously reported that extreme physical activity with associated dietary adaptations, such as that pursued by professional athletes, is associated with changes in faecal microbial diversity and composition relative to that of individuals with a more sedentary lifestyle. Here we address the impact of these factors on the functionality/metabolic activity of the microbiota which reveals even greater separation between exercise and a more sedentary state.

42 Design

43 Metabolic phenotyping and functional metagenomic analysis of the gut microbiome of

44 professional international rugby union players (n = 40) and controls (n = 46) was carried out

45 and results were correlated with lifestyle parameters and clinical measurements (e.g. dietary

46 habit and serum creatine kinase, respectively)

47 **Results**

Athletes had relative increases in pathways (e.g. amino acid and antibiotic biosynthesis and
carbohydrate metabolism) and faecal metabolites (e.g. microbial produced short chain fatty
acids [SCFAs] acetate, propionate, and butyrate) associated with enhanced muscle turnover
(fitness) and overall health when compared to control groups.

52 Conclusion

53 Differences in faecal microbiota between athletes and sedentary controls show even greater

54 separation at the metagenomic and metabolomics than at compositional levels and provide

added insight into the diet-exercise-gut microbiota paradigm.

56 SUMMARY

57 What is already known about this subject?

58 Taxonomic and functional compositions of the gut microbiome are emerging as biomarkers

- 59 of human health and disease.
- 60 Physical exercise and associated dietary adaptation are linked with changes in the

61 composition of the gut microbiome.

62 Metabolites such as short chain fatty acids (SCFAs) have an impact on a range of health

63 parameters including immunity, colonic epithelial cell integrity, and brain function.

64 What are the new findings?

Our original observation of differences in gut microbiota composition in elite athletes is
confirmed and the separation between athletes and those with a sedentary lifestyle is even
more evident at the functional or metabolic level. Microbial derived SCFAs are enhanced
within the athletes.

69 How might it impact on clinical practice in the foreseeable future?

The findings provide new evidence supporting the link between exercise and metabolic
health. The findings provide a platform for the rational design of diets for those engaged in
vigorous exercise. The identification of specific alterations in the metabolic profile of

subjects engaged in high levels of exercise provides insight necessary for future effortstowards targeted manipulation of the microbiome.

75 INTRODUCTION

Regular exercise challenges systemic homeostasis resulting in a breadth of multi-organ 76 molecular and physiological responses, including many that centre on immunity, metabolism 77 78 and the microbiome-gut-brain axis.[1-5] Exercise exhibits systemic and end-organ anti-79 inflammatory effects, as well as contributing to more efficient carbohydrate metabolism, in addition to trophic effects at the level of the central nervous system. [6, 7] In fact, increasing 80 physical activity offers an effective treatment and preventative strategy for many chronic 81 conditions in which the gut microbiome has been implicated.[8-10] Conversely, a sedentary 82 83 lifestyle is a major contributing factor to morbidity in developed Western society and is associated with heightened risk of numerous diseases of affluence, such as obesity, diabetes, 84 asthma, and cardiovascular disease.[11-14] Recent evidence supports an influential role for 85 86 the gut microbiome in these diseases.[15-23]

The concept that regular exercise and sustained levels of increased physical activity 87 foster or assist the maintenance of a preferential intestinal microbiome has recently gained 88 momentum and interest.[24-29] Previously, using 16S rRNA amplicon sequencing, we 89 demonstrated taxonomic differences in gut microbiota between an elite athlete cohort of 90 international-level rugby players and a group of age-matched high (>28 kg/m²) and low (<25 91 kg/m²) BMI controls.[26] This analysis illustrated a significantly greater intestinal microbial 92 93 diversity amongst the athletes compared to both control groups. This taxonomic diversity significantly correlated with exercise and dietary protein consumption. However, the 94 95 possibility existed that these differences did not equate to differences at a functional level. Here, we re-examine the microbiome in these participants by whole metagenome shotgun 96

97 sequencing to provide deeper insight into taxonomic composition and metabolic potential and 98 by complementary metabolic phenotyping analyses of host- and microbial-derived (urine and 99 faecal respectively) metabolic profiles. This analysis shows that the differences in the gut 100 microbiota between athletes and controls is even more pronounced at the functional 101 metabolic level than at the compositional level as previously reported and provides further 102 rationale for prospective controlled studies to unravel the relationship between diet, exercise 103 and the gut microbiome.

104 **RESULTS**

- 105 The study groups were comprised of professional male athletes (n = 40) and healthy controls
- 106 (n = 46).[26] To better represent the variability of BMI in the athletes, controls were

107 classified as either low BMI (n = 22, BMI ≤ 25.2) or high BMI (n = 24, BMI ≥ 26.5).

Participants made no report of gastrointestinal (GI) distress or alterations of GI transit timethroughout the course of the initial study.

110 Functional structure of the enteric microbiome correlates with athletic state

Functional metagenomic analysis of faecal samples allowed for the prediction of the 111 operational potential of each individual's microbiota. In total, 19,300 taxonomically linked 112 metabolic pathways were identified in at least one individual. Comparison of phylogenetic 113 constructions derived from the 16S rRNA amplicon data of our previous study and the 114 functional data of this present report reveals a greater level of identification at higher levels 115 of taxonomy (e.g. phylum) for 16S sequences, [26] while the metagenomic data had greater 116 117 fidelity and superior resolution of lower levels of taxonomy (e.g. species) (Fig. 1). Consistent with previous results, the microbiota of the athletes were significantly more diverse than that 118 119 of both the low and high BMI control groups at the functional level (Fig. 2A). Furthermore, 120 our previous findings of an enrichment of Akkermansia in athletes was corroborated by the

121 presence of significantly higher proportions of metabolic pathways associated with this genus in athletes when compared to high BMI controls (p < 0.001). Correlation analysis revealed 122 that, of the total 19,300 pathways, 98 were significantly altered between the three cohorts (p 123 124 < 0.05) (Supplementary table 1). Subsequently, large-scale functional dissimilarity between athletes and controls was determined and distinct patterns of pathway composition between 125 groups were revealed (Supplementary Fig. 1A). This functional distinction remained true 126 127 whether applied to total pathway data or to the statistically significant subset of pathways (Supplementary Fig. 1B). Correlation of pathways present in at least one member from both 128 129 cohorts further exemplified the uniformity of the athletes and the division between the athletes and control groups (Supplementary Fig. 1C). Separation according to group 130 membership was further illustrated through Principal Coordinate Analysis (PCoA), with 131 132 statistical support of the significant separation between the athletes and both control groups (p < 0.05) (Fig. 2B). This was also the case for the statistically significant subset of pathways 133 (Supplementary Fig. 1D). Principal Component Analysis (PCA) supplemented with a 134 Correspondence Analysis (CA) and k-Nearest Neighbor (k-NN) semi-supervised learning 135 approach cast further light (i.e. visualization of robustly defined class associations of specific 136 individuals within the groups) on the clustering of participants within and between cohorts 137 (Supplementary Fig. 1E). 138

Pathways exhibiting statistically significant variation between the athletes and both control
groups were organised according to MetaCyc metabolic pathway hierarchy classification (34
metabolic categories), highlighting a number of differences (Fig. 3A, Supplementary table 2).
Distinct clustering patterns were observed within each cohort, with the high BMI control
group having the lowest average abundance scores across 31 metabolic pathway categories
(the exceptions being Vitamin Biosynthesis (VB), Lipid Biosynthesis (LB), and Amino Acid
Biosynthesis (AAB) categories). The athlete group had the highest mean abundance across 29

of the 34 metabolic categories (e.g. Carbohydrate Biosynthesis [CB], Cofactor Biosynthesis
[CfB], and Energy Metabolism [EM]) (Supplementary table 2).

Numerous statistically significant (p < 0.05) associations were identified between pathway 148 abundances and serum Creatine Kinase—an enzymatic marker of muscle activity (CK, IU/L), 149 total bilirubin (IU/L) and dietary macronutrient intake of protein (g/day), fibre (g/day), 150 carbohydrates (g/day), sugars (g/day), starch (g/day), fat (g/day), and total energy (KJ/day) 151 (Fig. 3B). Each group was represented by distinct association profiles of the correlation 152 between clinical measurements and metagenomic pathways. Dietary factors, sugars and other 153 carbohydrates, as well as energy intake, provide the majority of the correlation for the control 154 155 groups whereas the athlete group was predominantly correlated with CK, total bilirubin, and total energy intake. Of the total number of metabolic pathways with associations to the 156 clinical data from all three groups (10,760; data not shown), relevant pathways related to the 157 158 production of secondary metabolites, co-factors, and SCFAs were identified (e.g. biotin biosynthesis and pyruvate fermentation to butanoate). 159

160 Distinct differences between host and microbial metabolites in athletes and controls

A combination of multi-platform metabolic phenotyping and multivariate analysis based on 161 Orthogonal Partial Least Squares Discriminant Analysis (OPLS-DA) was used to compare 162 urinary and faecal samples from athletes and controls. The cross-validated (CV) OPLS-DA 163 models show strong differences between athletes and controls in urine samples by proton 164 nuclear magnetic resonance (¹H-NMR) analysis (R²Y=0.86, Q²Y=0.60, Fig. 2C), hydrophilic 165 interaction ultra-performance liquid chromatography mass spectroscopy (HILIC UPLC-MS) 166 positive mode analysis (R²Y=0.85, Q²Y=0.74, Supplementary Fig. 2A) and reverse phase 167 ultra-performance liquid chromatography mass spectroscopy (RP UPLC-MS) in both positive 168 and negative mode analysis ($R^2Y=0.83$, $Q^2Y=0.73$, and $R^2Y=0.83$, $Q^2Y=0.67$, 169

170	Supplementary Fig. 2B and 2C respectively). Likewise, the CV-OPLS-DA models comparing
171	faecal samples, although weaker than the urine models, reveal significant differences between
172	athletes and controls by ¹ H-NMR analysis (R ² Y=0.86, Q ² Y=0.52, Fig. 2D) and HILIC
173	UPLC-MS positive mode analysis (R ² Y=0.65, Q ² Y=0.34, Supplementary Fig 2D).
174	The loadings of the pairwise OPLS-DA models were used to identify metabolites
175	discriminating between the two classes. Athletes' ¹ H-NMR metabolic phenotypes were
176	characterised by higher levels of trimethylamine-N-oxide (TMAO), L-carnitine,
177	dimethylglycine, O-acetyl carnitine, proline betaine, creatinine, acetoacetate, 3-hydroxy-
178	isovaleric acid, acetone, N-methylnicotinate, N-methylnicotinamide, phenylacetylglutamine
179	(PAG) and 3-methylhistidine in urine samples and higher levels of propionate, acetate,
180	butyrate, trimethylamine (TMA), lysine, and methylamine in faecal samples, relative to
181	controls. Beta-alanine betaine was higher in both faecal and urine samples of athletes.
182	Athletes were further characterised by lower levels of glycerate, allantoin and succinate and
183	lower levels of glycine and tyrosine relative to controls in urine and faecal samples,
184	respectively (Supplementary Table 3).
185	While numerous metabolites discriminated significantly between athletes and controls with
186	RP UPLC-MS positive (490) and negative (434) modes for urine, as well as with HILIC
187	UPLC-MS positive mode for urine (196) and faecal water (3), key metabolites were
188	structurally identified using the strategy described below. UPLC-MS analyses revealed
189	higher urinary excretion of N-formylanthranilic acid, hydantoin-5-propionic acid, 3-Carboxy-
190	4-methyl-5-propyl-2-furanpropionic acid (CMPF), CMPF glucuronide, trimetaphosphoric
191	acid, acetylcarnitine - C2, propionylcarnitine - C3, isobutyrylcarnitine - C4, 2-
192	Methylbutyroylcarnitine - C5, Hexanoylcarnitine - C6, C9:1-carnitine, L-valine, nicotinuric
193	acid, 4-pyridoxic acid and creatinine in athletes relative to controls. Levels of glutamine, 7-
194	methylxanthine, imidazoleacetic acid, isoquinoline / quinolone were lower in athletes'

urinary samples relative to controls. Additionally, 16 unknown glucuronides were lower inthe athlete samples (Supplementary Table 4).

SCFA levels in faeces measured by targeted GC-MS showed significantly higher levels of acetate (p < 0.001), propionate (p < 0.001), butyrate (p < 0.001) and valerate (p = 0.011) in athletes relative to controls. Isobutyrate and isovalerate did not differ significantly between the groups (Fig. 4B, Supplementary Table 5). Furthermore, concentrations of propionate strongly correlated to protein intake while butyrate was shown to have a strong association with intake of dietary fibre (Supplementary Table 6).

203

204 Correlating metabonomic and metagenomic results

Correlation analysis between targeted measurements of SCFAs and taxonomic data from 16S rRNA sequencing revealed a number of correlations that remained significant following correction; *Roseburia* was positively correlated with acetate (p = 0.004) and butyrate (p = 0.018) while *Family XIII Incertae Sedis* was positively correlated with isobutyrate (p < 0.018) while *Family XIII Incertae Sedis* was positively correlated with isobutyrate (p < 0.001), isovaleric acid (p < 0.001) and valeric acid (p = 0.008) (Fig. 4A, Supplementary Table 7).

211

SCFAs were also correlated with pathway relative abundances, with all SCFAs associating 212 with considerably more pathways in the athletes versus the controls (Fig. 4C). Multiple 213 214 statistically significant (7.948) (p < 0.05) correlations between the metabolic pathways and SCFAs were identified (Supplementary Table 8). Two distinct blocks of proportionately 215 discriminant correlations were observed with isobutyric and isovaleric acids, which were 216 217 more abundant in the athletes while acetic and butyric acids were more proportionately abundant in controls. Correlations of the SCFA concentrations to pathways related to 218 fermentation, biosynthesis, or modification of fatty acids were identified among the 219

numerous other associations (see supplementary table 8 for complete list). Additional

221 correlations of metabolic pathways against well-identified metabolites detected from both

faecal water (Fig. 5A and 5C) and urine (Fig. 5B and 5D) presented numerous significant

associations (6,186 and 13,412, respectively; data not shown) (p < 0.05). It was also observed

that 16 genera correlated with 12 metabolites (Supplementary Table 9).

225 **DISCUSSION**

The results confirm enhancement of microbial diversity in athletes compared with controls. Supporting previous insights into the beneficial influence of physical exercise and associated diet on the compositional structure of the gut microbiota,[25, 26, 30] this study has extended the paradigm to include links between physical fitness and the functional potential of the gut microbiota and its metabolites. It must be conceded that some athletes, although fit may not necessarily be more healthy.[31]

Athletes have an increased abundance of pathways that—giving an equivalent amount of 232 expression activity—could be exploited by the host for potential health benefit, including 233 biosynthesis of organic cofactors and antibiotics, as well as carbohydrate degradation and 234 secondary metabolite metabolism compared to both control groups.[32] Furthermore, athletes 235 have an enriched profile of SCFAs, previously associated with numerous health benefits and 236 a lean phenotype.[33-35] While interpretation of SCFA data can be difficult as levels 237 represent a combination of SCFA production and host-absorption rates, it is notable that, as 238 239 previously presented, the athletes' diet maintained significantly higher quantities of fibre intake [29]. This along with an increased number of detected SCFA pathways in the athletes 240 would be conducive to an enhanced rate of SCFA production[36] 241

It was noted that athletes excreted proportionately higher levels of the metabolite TMAO, anend product metabolite of dietary protein degradation. Elevated TMAO has been observed in

patients with cardiovascular disease and atherosclerosis, highlighting a potential downside to
increased protein intake.[15-17, 22, 37] However, TMAO is also found in high levels in the
urine of Japanese populations,[38] who do not have high risk for CVD. Similarly to these
populations, the athletes' diet contained a significantly greater proportion of fish. Our current
understanding of the implications of this result remains limited and requires elaboration in
future studies. Furthermore, pathway abundance in a metagenome merely reflects functional
potential and not necessarily increased expression in situ.

Variance of metagenomic composition between athletes and controls was exemplified with 251 unique pathway-pathway correlations between the two groups. Analysis of categorically 252 253 arranged pathway abundances within the separate cohorts provided additional insight into the previously described dichotomy between the microbiota of athletes and high BMI controls. 254 The two groups displayed distinct structures of functional capacity, separately oriented to 255 256 operate under the different physiological milieu of the two groups. Notably, from a functional perspective, the microbiota of the low BMI group was more similar to the athletes. The low 257 258 BMI controls were generally engaged in a modestly active-lifestyle, reflected by their 259 leanness and increased levels of CK. It is speculative but not implausible, that moderate improvements in physical activity, for overweight and obese individuals may confer the 260 beneficial metabolic functions observed within the athlete microbiome. 261

Dietary contributions to the functional composition of the enteric microbial system are also evident in our study. The relative abundances of pathways related to fundamental metabolic function—amino acid biosynthesis, vitamin biosynthesis, and lipid biosynthesis—were higher on average within the high BMI control group when compared to the athlete group. The mechanisms behind these differences are unclear and might reflect chronic adaptation of the athlete gut microbiome; possibly due to a reduced reliance on the corresponding biosynthetic capacities of their gut microbiota. On the contrary, the athlete microbiome

presents a functional capacity that is primed for tissue repair and to harness energy from the
diet with increased capacity for carbohydrate, cell structure and nucleotide biosynthesis,
reflecting the significant energy demands and high cell-turnover evident in elite sport.

Remarkably, our examination of pathway correlation to dietary macronutrients and 272 plasma CK, as a biomarker of exercise, [39] is suggestive of an impact of physical activity 273 upon the utilization of dietary nutrients by the microbiota of the gut. Comparing athletes to 274 both high and low BMI controls, a greater number of pathways correlating to specific 275 macronutrients with the controls suggests a shift in the dynamics of these varied metabolic 276 functions. The impact of the athletes' increased protein intake compared to both control 277 278 groups was evident in the metabolomic phenotyping results. By-products of dietary protein metabolism (mostly by microbes) including TMAO, carnitines, trimethylamine, 3-Carboxy-279 4-methyl-5-propyl-2-furanpropionic acid, and 3-hydroxy-isovaleric acid are all elevated in 280 the athlete cohort. Of particular interest is 3-hydroxy-isovaleric acid (potentially from egg 281 consumption) which has been demonstrated to have efficacy for inhibiting muscle wasting 282 283 when used in conjunction of physical exercise.[40] The compound is also commonly used as 284 a supplement by athletes to increase exercise-induced gains in muscle size, muscle strength, and lean body mass, reduce exercise-induced muscle damage, and speed recovery from high-285 286 intensity exercise.[41] Numerous metabolites associated with muscle turnover—creatine, 3methylhistidine, and L-valine—and host metabolism—carnitine—are elevated in the athlete 287 groups. Metabolites derived from vitamins and recovery supplements common in 288 professional sports, including glutamine, lysine, 4-pyridoxic acid, and nicotinamide, are also 289 290 raised in the athlete group. It is notable that PAG—a microbial conversion product of phenylalanine—has been associated with a lean phenotype, and is increased in the 291 athletes.[42] Furthermore, PAG positively correlates with the genus Erysipelotrichaceae 292 Incertae Sedis, which we have previously noted to be present in relatively higher proportions 293

294 in the athlete group compared to both control groups. PAG is the strongest biomarker post bariatric surgery, where it is associated with an increase in the relative proportions of 295 Proteobacteria as observed here in the athlete group. Within the SCFAs, two distinct clusters 296 297 were observed; acetic acid, propionic acid and butyric acid correlate with dietary contributors (fibre and protein), while isobutyric acid, isovaleric acid and valeric acid correlate with 298 microbial diversity. The same clusters are observed when correlating with individual taxa, in 299 300 support of previously observed links between SCFAs and numerous metabolic benefits and a lean phenotype.[33-35] 301

Our on-going work in this area with non-athletes engaging in a structured exercise regime looks to further explore components of the exercise and diet-microbiome paradigm, which along with the present study may inform the design of exercise and fitness programs, including diet design in the context of optimizing microbiota functionality for both athletes and the general population.

307

308 MATERIALS AND METHODS

309 Study population

Elite professional male athletes (n = 40) and healthy controls (n = 46) matched for age and gender were enrolled in 2011 as previously described in the study.[26] Due to the range of physiques within a rugby team (player position dictates need for a variety of physical constitutions, i.e. forward players tend to have larger BMI values than backs, often in the overweight/obese range) the recruited control cohort was subdivided into two groups. In order to more completely include control participants, the BMI parameter for group inclusion was adjusted to BMI \leq 25.2 and BMI \geq 26.5 for the low BMI and high BMI groups 317 respectively. Approval for this study was granted by the Cork Clinical Research Ethics318 Committee.

319 Acquisition of clinical, exercise and dietary data

Self-reported dietary intake information was accommodated by a research nutritionist within 320 the parameters of a food frequency questionnaire (FFQ) in conjunction with a photographic 321 322 food atlas as per the initial investigation.[26] Fasting blood samples were collected and analysed at the Mercy University Hospital clinical laboratories, Cork. As the athletes were 323 involved in a rigorous training camp we needed to assess the physical activity levels of both 324 control groups. To determine this we used an adapted version of the EPIC-Norfolk 325 questionnaire.[43] Creatine kinase levels were used as a proxy for level of physical activity 326 327 across all groups.

328 Preparation of Metagenomic libraries

329 DNA derived from faecal samples was extracted and purified using the QIAmp DNA Stool

330 Mini Kit (cat. no. 51504) prior to storage at -80°C. DNA libraries were prepared with the

331 Nextera XT DNA Library Kit (cat. no. FC-131-1096) prior to processing on the Illumina

HiSeq 2500 sequencing platform (see supplementary methods for further detail).

333 Metagenomic statistical and bioinformatic analysis

334 Delivered raw FASTQ sequence files were quality checked as follows: contaminating

sequences of human origin were first removed through the NCBI Best Match Tagger

336 (BMTagger). Poor quality and duplicate read removal, as well as trimming was implemented

- using a combination of SAM and Picard tools. Processing of raw sequence data produced a
- total of 2,803,449,392 filtered reads with a mean read count of $32,598,248.74 (\pm 10,639,447)$
- SD) per each of the 86 samples. These refined reads were then subjected to functional

340	profiling by the most recent iteration of the Human Microbiome Project (HMP) Unified
341	Metabolic Analysis Network (HUMAnN2 v. 0.5.0) pipeline.[44] The functional profiling
342	performed by HUMAnN2 composed tabulated files of microbial metabolic pathway
343	abundance and coverage derived from the Metacyc database.[45] Microbial pathway data was
344	statistically analysed in the R software environment (v. 3.2.2) (for further details see
345	supplementary methods).[46] All presented p values were corrected for multiple comparisons
346	using the Benjamini-Hochberg False Discovery Rate (pFDR) method.[47]
347	

348 Metabolic profiling

349 Urine and faecal samples were prepared for metabonomic analysis as previously

described.[48, 49] Utilising established methods, urine samples underwent ¹H-NMR,

351 reversed-phased (RP) and hydrophilic interaction chromatography (HILIC) profiling

352 experiments. Faecal samples underwent ¹H-NMR, hydrophilic interaction chromatography

353 (HILIC) and bile acid UPLC-MS profiling experiments and GC-MS targeted SCFA

analysis.[49-51]

355

After data pre-processing, [52] the resulting ¹H-NMR and LC-MS data sets were imported 356 into SIMCA 14.1 (Umetrics) to conduct multivariate statistical analysis. Principal Component 357 Analysis (PCA), followed by Orthogonal Partial Least Squares Discriminant Analysis 358 359 (OPLS-DA) was performed to examine the data sets and to observe clustering in the results according to the predefined classes. The OPLS-DA models in the current study were 360 established based on one PLS component and one orthogonal component. Unit variance 361 scaling was applied to ¹H-NMR data, Pareto scaling was applied to MS data. The fit and 362 predictability of the models obtained was determined by the R^2Y and Q^2Y values, 363 respectively. Significant metabolites were obtained from LC-MS OPLS-DA models through 364

division of the regression coefficients by the jack-knife interval standard error to give an estimate of the t-statistic. Variables with a t-statistic ≥ 1.96 (z-score, corresponding to the 97.5 percentile) were considered significant. Significant metabolites were obtained from ¹H-NMR OPLS-DA models after investigating correlations with correlation coefficients values higher than 0.4. Univariate statistical analysis (Mann-Whitney U test) was used to examine the SCFA data set. P-values were adjusted for multiple testing using the Benjamini-Hochberg False Discovery Rate (pFDR) method.

372

373 Confirmation of metabolite identities in the NMR data was obtained using 1D ¹H NMR and 2D ¹H-¹H NMR and ¹H-¹³C NMR experiments. In addition, statistical tools such as SubseT 374 Optimization by Reference Matching (STORM) and Statistical TOtal Correlation 375 376 SpectroscopY (STOCSY) were also applied.[53, 54] Confirmation of metabolites identities in the LC-MS data was obtained using Tandem MS (MS/MS) on selected target ions. 377 Metabolite identification was characterized by a level of assignment (LoA) score that 378 379 describes how the identification was made.[55] The levels used were as follows: LoA 1: Identified compound, confirmed by comparison to an authentic chemical reference. LoA 2: 380 MS/MS precursor and product ions or 1D+2D NMR chemical shifts and multiplicity match to 381 a reference database or literature to putatively annotate compound. LoA 3: Chemical shift (δ) 382 and multiplicity matches a reference database to tentatively assign the compound. (For 383 384 further details see supplementary methods).

385

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400 **Conflicts of interest**

- 401 FS is a founder shareholder in Atlantia Food Clinical Trials, Tucana Health Ltd and
- 402 Alimentary Health Ltd. He is director of the APC Microbiome Institute, a research centre
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- 405 Janssen, Friesland Campina, General Mills, Kerry, MeadJohnson, Nutricia, 4D pharma and
- 406 Second Genome, Sigmoid pharma.

407 Author Contributions

- 408 W.B. prepared DNA samples for metagenomic sequencing.
- 409 O.O. and W.B. processed and analysed the metagenomic data.
- 410 E.H., I.G., and N.C.P. performed metabolomic processing and statistical analysis thereof.
- 411 F.S., P.D.C., O.O., and W.B. devised experimental design and approach.

- 412 F.S., P.D.C., O.C., O.O., M.M, E.H, N.C.P and W.B. wrote manuscript.
- 413 Results discussed by all authors.
- 414 Ethics approval
- 415 Cork Clinical Research Ethics Committee.

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- 421 **Data Access**: In conformation of data accessibility protocol, metagenomic raw sequence data
- 422 from this study are deposited in EMBL Nucleotide Sequence Database (ENA)
- 423 (http://www.ebi.ac.uk/ena/data/), accession number PRJEB15388

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579 FIGURE LEGENDS

580 Figure 1 | Comparison of phylogenetic constructions from metagenomic and 16S rRNA

581 gene sequencing sourced from all participants. Phylogenetic trees derived from (A)

582 metagenomic sequencing and **(B)** 16S rRNA amplicon sequencing. Taxonomic levels are

- assigned from centre out with kingdom level assignment in centre and strain level assignment
- in outer most ring. Dark blue radial highlights correspond to poorly identified taxonomies
- 585 (i.e. 'unknown' and 'unassigned' database entries). Number of assignments at each level of
- 586 phylogeny is displayed below the respective graph. Taxonomic trees derived from the two
- sequencing approaches illustrate an advantage of metagenomic sequencing in the number of

588 predictions of lower taxonomic levels and the frequency of full identification of taxa, while

589 16S rRNA sequencing grants greater insight of high level phylogenies within the population.

590

591 Figure 2 | Group-wise comparison of microbial metagenomic and metabolomic profiles.

592 (A) Shannon index of diversity for metabolic pathways from all three groups. Pathway

593 diversity is increased in the athlete group when compared to low BMI and high BMI controls.

594 Diversity measures are statistically significant between low BMI and athletes (p < 0.049), 595 with statistical significance between all groups (Kruskal Wallis p < 0.05). (**B**) Principle

- 596 coordinate analysis (PCoA) of Bray-Curtis compiled distance matrix of all microbial
- 597 metabolic pathway relative abundances. Groups show significant variation from one another

598 (Adonis PERMANOVA p < 0.05). (C & D) Cross validated orthogonal partial least squares 599 regression discriminant analysis (OPLS-DA) of full Nuclear Magnetic Resonance (¹H-NMR)

- 600 spectra from urine ($R^2Y=0.86$, $Q^2Y=0.60$)(**C**) and faecal water ($R^2Y=0.86$, $Q^2Y=0.52$)(**D**)
- samples. OPLS-DA displays robust separation between athletes and controls. Models are
- 602 comprised of 1 predictive (tcv[1]) and 1 orthogonal (tocv[1]) principal component.

603

604Figure 3 | Group variation of microbial metabolic function and associations between605pathways and clinical and dietary variables. (A) Mean relative abundance values of606statistically significant (Kruskal Wallis p < 0.05) metabolic pathways binned according to607categories of metabolic function. (B) Number of metabolic pathways significantly608(Benjamini-Hochberg corrected p < 0.05) correlated with dietary constituents and blood609serum metabolites.

610

Figure 4 | Athletes display a profile of Short Chain Fatty Acids that alters from that of 611 the controls. (A) Heat map of bacterial taxa (family, genus, and species level) that correlate 612 with faecal short-chain fatty acid levels using Spearman's correlation. Cool colours represent 613 614 positive correlations; hot colours represent negative correlations (r). All taxa shown had a correlation p-value < 0.01. Those marked * represent correlations with a pFDR < 0.01 after 615 Benjamini-Hochberg multiple testing corrections. (B) Median concentrations of GC-MS 616 derived faecal short chain fatty acid. Quantitative analysis of SCFAs in faecal samples shows 617 significant increase in measured concentrations of acetate, propionate, butyrate, and valerate 618 in athletes. Error bars represent 95% confidence intervals. * Data statistically significant (p < 619 620 0.05 after Benjamini-Hochberg corrections). (C) Quantification of statistically relevant correlations of metabolic pathways to GC-MS derived faecal SCFA concentrations (µM). 621

622

623 Figure 5 | Distinctive association profiles of metabolic pathways to metabolites in

624 athletes and controls. (A) Significant correlations of faecal water derived metabolites and

- 625 metabolic pathways, represented by number of correlations for each metabolite. **(B)** Urine
- 626 metabolites significantly correlated to pathways and displayed as number of correlations. (C)

- 627 Significant correlations shown in (A) displayed as proportions of total associations. (D)
- 628 Correlations presented in (**B**) given as proportions of total associations.