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# **Streptococcus Thermophilus CNRZ160 preserves muscle anabolism in old rats by targeting anti-inflammatory mechanisms at the gut level: a probable gut-muscle cross talk.**

***Savary-Auzeloux I, Jarzaguet M, David J, De Azevedo M, Chatel JM, Dardevet D.***

1-Université Clermont Auvergne, INRA, UNH, Unité de Nutrition Humaine, CRNH Auvergne, F-63000

2- Micalis, INRA, AgroParisTech, Université Paris Saclay, Jouy en Josas, 78350

## **Introduction et But de l'étude**

By preventing post prandial muscle anabolism, inflammation has been recognized to be one of the factors responsible for sarcopenia during aging. Age-associated microbiota dysbiosis by increasing intestinal permeability/inflammation could be the starting point of an intestinal followed by systemic inflammation. However, the mechanisms by which intestinal inflammation can lead to a blunted anabolic response is still under hypothesis. Our study was designed to first link a targeted intestinal inflammation to muscle anabolic response and how a bacterial strain presenting gut anti-inflammatory properties in vitro could prevent these adverse effects.

## **Matériels et Méthodes**

Microbiota dysbiosis and intestinal inflammation in elderly rats (18m) were generated by adjusted ingestion of low concentration of Dextran Sodium Sulfate (DSS) for 1 month, with (CNRZ group) or without (DSS group) *S. Thermophilus* CNRZ160 ( $10^9$  CFU/day) with anti-inflammatory potential in vitro (Junjua, 2016). They were compared to pair fed control rats (PF). Muscle and colon were harvested and tissues protein synthesis assessed in the post-prandial state (flooding dose method with  $^{13}\text{C}$  Valine). Expression of tight junction / inflammatory markers and proteolytic systems were determined in colon and muscle respectively. Insulin and glucose levels were assayed in plasma. Groups were compared using ANOVA and Fisher posthoc test (significance:  $p < 0.05$ ).

## **Résultats et Analyse statistique**

As expected, colon weight was increased by 13% with DSS ( $P < 0.05$ ) and a muscle mass loss was indeed recorded compared to PF ( $p < 0.05$ ). CRZ170 allowed to :1) maintain normal colon weight 2) limit the loss of fat free mass by a better maintenance of post prandial muscle protein synthesis ( $p < 0.05$ ) and an inhibition of proteolysis (MURF1 and Cathepsin L,  $P < 0.05$ ). Mechanisms involved are independent to an improvement of insulin sensitivity as CNRZ160 did not prevent the increase in HOMA induced by the DSS (+66% vs PF,  $P < 0.01$ ) but rather by an anti-inflammatory mechanism at the colon level (IFN $\gamma$  inhibited and IL10 activated respectively,  $P < 0.05$ ).

## **Conclusion**

In the elderly, an inflammation of intestinal origin could participate in sarcopenia development by limiting anabolic response. Ingestion of *S. Thermophilus* could prevent these adverse effects by mechanisms excluding a probiotic effect on insulin sensitivity but involving specifically an anti-inflammatory status in the colon highlighting a probable gut-muscle axis which remains to be further characterized at the systemic level.