



Impact of A Short-Term Antibiotic Cycle on Glucose Control in Adults with Overweight or Obesity

Jessica Mroska*, Ryan Porter PhD, Sarah-McKinley Barnard PhD, Melissa A. Fernandez, Timothy Ritter MD, Brooke Hodnick PA-C, Katie Harnen, Olivia Landis, Jade Nesbitt, Genevieve Aiwonegbe, and Elisa Marroquin PhD

Department of Nutritional Sciences, Texas Christian University, Fort Worth, TX

*presenting author



Abstract

Background: Dietary fiber has been consistently associated with beneficial effects on body composition and insulin resistance in humans, potentially acting through alterations in the gut microbiota. Murine studies have shown fiber to be able to mitigate antibiotic-induced gut microbial perturbations and subsequent insulin resistance.

Objective: This study aims to investigate the effect of a short-term antibiotic cycle on glucose control. Furthermore, we will also explore potential associations between dietary fiber intake, glucose control, and body composition.

Methods: This preliminary analysis, derived from a larger randomized controlled trial, prospectively evaluated 11 adults with overweight or obesity, lacking a diabetes diagnosis. Glucose control and insulin resistance, measured via serum, fasting glucose, fasting insulin and HOMA index, were analyzed before and after a short-term antibiotic course (Vancomycin 500 mg/8h for 3 days) and analyzed at Bioreference Laboratories. Total dietary fiber intake was measured through 24h dietary records collected over six days and analyzed using ESHA Food Processor Nutrition Analysis Software. Body composition was evaluated through DEXA and BodPod scans at the TCU Applied Metabolic & Physiology Lab. SPSS was utilized for all statistical analyses. A p-value <0.05 was considered statistically significant.

Results: A 3-day antibiotic cycle of Vancomycin caused a significant increase in fasting insulin 1.50 ± 2.08 ($p=0.037$) and fasting glucose 5.67 ± 1.53 ($p=0.023$), but not HOMA-IR 0.17 ± 0.38 . No significant correlations were found between fiber intake and chronic glucose control, antibiotic-induced glucose control changes, insulin resistance, or body composition. Participants consumed an average 15.58 grams of fiber per day with females ($n=6$) meeting 65.5% of fiber RDA for females (25 g/day) and males ($n=5$) meeting 38.5% of RDA (38 g/day).

Conclusion: The outcomes of this study illustrate the ability of a short-term antibiotic cycle, specifically Vancomycin, to induce harmful effects on glucose control in humans. These findings highlight the need for further research into understanding accumulated exposure risk as well as methods for the prevention and treatment of antibiotic-induced metabolic disruption.

Background

- **Overweight/obesity** and **insulin resistance** are chronic diseases that affect 73.5% and 40.3% of Americans, respectively^{1,2}
- The **gut microbiome** produces metabolites that directly influence host metabolic health while **antibiotics** have been shown to significantly disrupt the gut microbiome composition and diversity³
- **Antibiotic use** frequency is associated with increased risk of obesity in human and animal studies and insulin resistance in animal studies⁴⁻⁶
- **Short-term antibiotic regimens** have been shown to either have no effect or harmful effects on insulin resistance, fasting glucose, and fasting insulin in humans⁷⁻¹¹
- Murine research has shown **fiber** to protect against antibiotic-induced insulin resistance by acting through the gut microbiota¹²⁻¹⁶
- **Fiber intake** has been consistently associated with lower body fat mass and insulin resistance alongside higher lean mass^{17,18}

Objectives

- 1.) Determine the effect of a short-term antibiotic regimen on markers of glucose control
- 2.) Describe the relationships between total dietary fiber intake with glucose control, insulin resistance, and body composition

Methods

Study Design: Pre-test/Post-test Design

Participants: 11 participants ages 18-50 with overweight or obesity ($BMI \geq 25 \leq 40$) and no diagnosis of diabetes

Intervention: 3-day antibiotic regimen of Vancomycin (500 mg every 8 hours)

Measured Outcomes:

- Changes in insulin resistance (HOMA), fasting glucose, and fasting insulin from pre- to post-antibiotic intervention
- Relationships between total dietary fiber intake with body composition parameters, insulin resistance, and chronic glucose control markers (HbA1c)

Figure 1 : Conceptual Framework

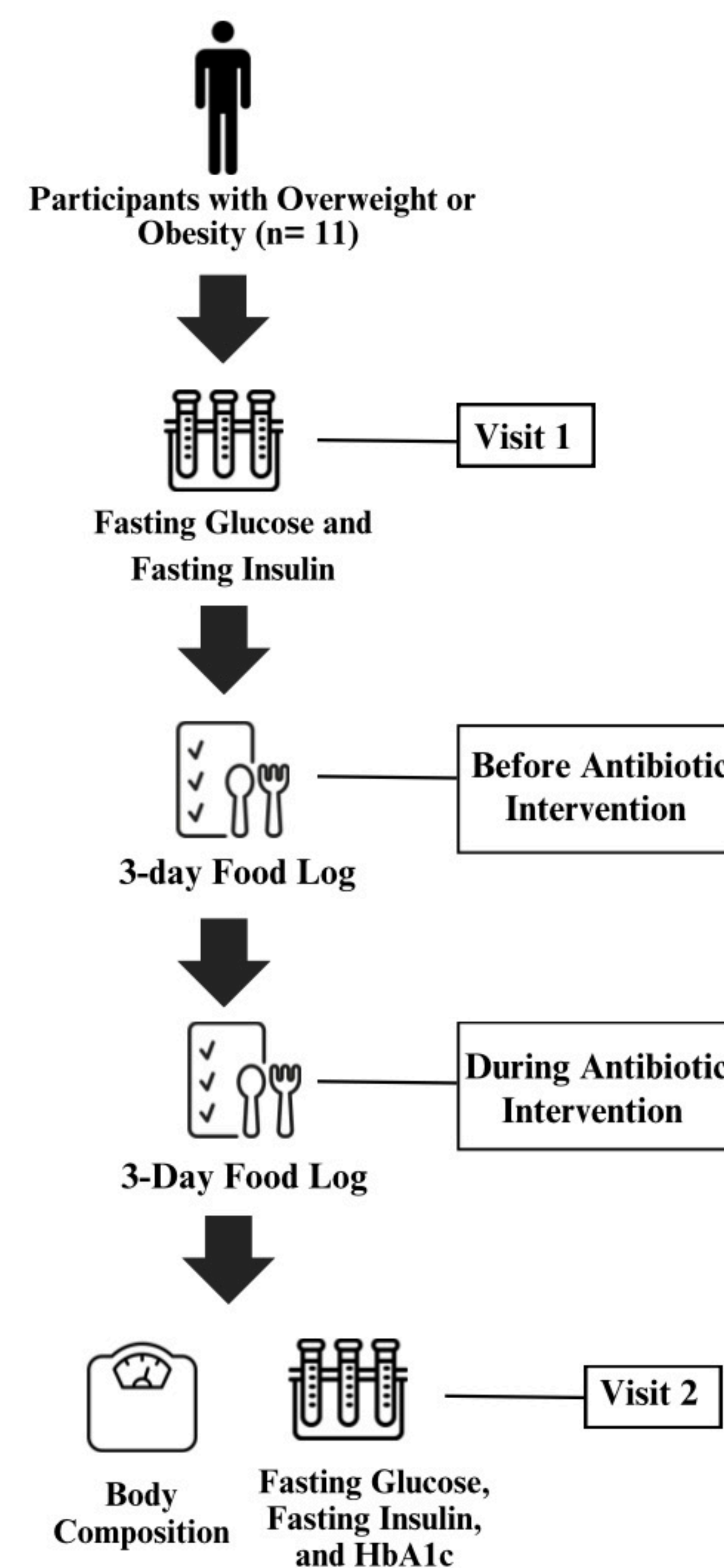


Figure 1. Conceptual framework. Using a pre-test/post-test, we analyzed the effects of a short antibiotic intervention on insulin resistance and whether these effects were modulated by fiber intake. Furthermore, we analyzed the relationships between fiber intake with body composition, insulin resistance, and glycemic control.

Results

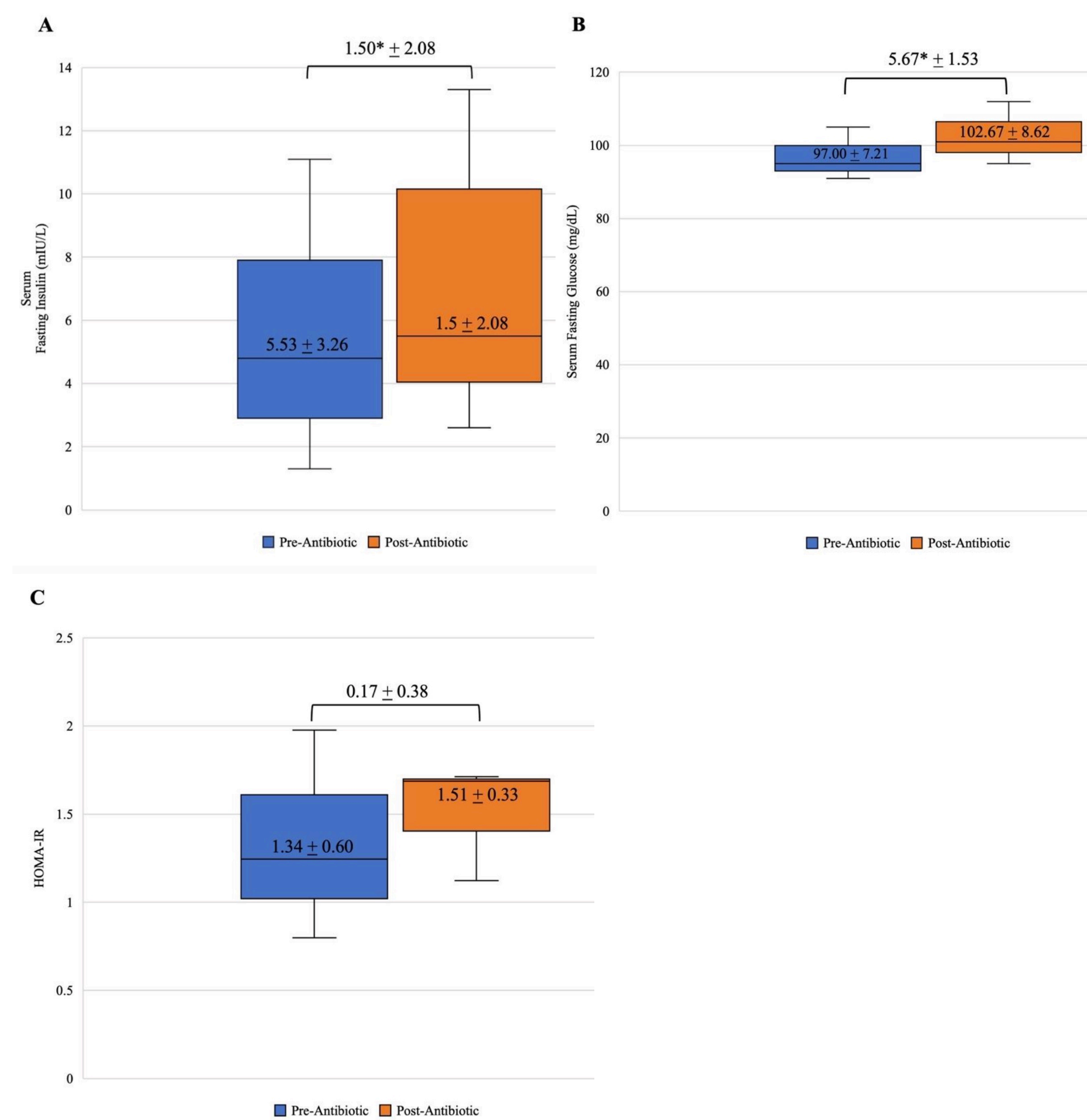


Figure 2: Effect of a 3 short-term antibiotic cycle on glucose control and insulin resistance. Pre-antibiotic (blue color) and post-antibiotic (orange color) levels of (A) fasting glucose ($n=3$), (B) fasting insulin ($n=11$), and (C) HOMA-IR ($n=3$) are shown. Values are given as mean \pm SD. * $p < 0.05$

Conclusions

- **Vancomycin has significant acute harmful effects on acute glucose control** in adults with overweight or obesity without diabetes
- **Fiber intake did not show a significant relationship with antibiotic-induced changes** in glucose control parameters, baseline glucose control and insulin resistance, or body composition parameters. Continuation of the current study will allow for analysis of a larger sample size with strengthened statistical power to ascertain whether fiber intake induces protection against antibiotic-induced disruptions in glucose control in humans.
- Further research should be focused on determining the acute and accumulated long-term risks on metabolism caused by antibiotic cycles, and exploring methods for the prevention and treatment of antibiotic-induced perturbations in glucose control.

Table 1: Characteristics of Participants at Baseline

Baseline characteristic	Value (n=11)
Gender	
Female	55%
Male	45%
Race	
White	55%
Hispanic or Latino	18%
Asian	9%
Two or more races	18%
Age (years)	27 ± 9.2
BMI (Kg/m^2)	28.6 ± 2.7
Fasting Glucose (mg/dL)	$97.0 \pm 7.2^*$
Fasting Insulin (mIU/L)	5.5 ± 3.3
HOMA-IR	$1.3 \pm 0.60^*$
HbA1c (%)	5.0 ± 0.61

* Sample size of 3

References

1. Fryar CD. Prevalence of overweight, obesity, and severe obesity among adults aged 20 and over: United States, 1960-1962 through 2017-2018. *NCHS Health E-Stats*. 2020
2. Insulin Resistance and Cardiometabolic Risk Profile Among Nondiabetic American Young Adults: Insights From WHANES.
3. Zhang P. Influence of Foods and Nutrition on the Gut Microbiome and Implications for Intestinal Health. *Int J Mol Sci*. Aug 24 2022;23(17):doi:10.3390/ijms23179588
4. Association between antibiotics use and diabetes incidence in a nationally representative retrospective cohort among Koreans.
5. Boursi B, Mamtani R, Haynes K, Yang YX. The effect of past antibiotic exposure on diabetes risk. *Eur J Endocrinol*. Jun 2015;172(6):639-48. doi:10.1530/EJE-14-1163
6. Del Fiol FS, Balcao VM, Barberato-Filho S, Lopes LC, Bergamaschi CC. Obesity: A New Adverse Effect of Antibiotics? *Front Pharmacol*. 2018;9:1408.
7. Rifaximin for the Treatment of Weight Loss.
8. Reijnders D, Goossens GH, Hermes GDA, Smidt H, Zoetendal EG, Blaak EE. Short-Term Microbiota Manipulation and Forearm Substrate Metabolism in Obese Men: A Randomized, Double-Blind, Placebo-Controlled Trial. *Obes Facts*. 2018;11(4):318-326. doi:10.1159/000492114
9. Reijnders D, Goossens GH, Hermes GD, et al. Effects of Gut Microbiota Manipulation by Antibiotics on Host Metabolism in Obese Humans: A Randomized Double-Blind Placebo-Controlled Trial. *Cell Metab*. Aug 9 2016;24(2):341. doi:10.1016/j.cmet.2016.07.008
10. Mikkelson KH, Frost M, Bahi MI, et al. Effect of Antibiotics on Gut Microbiota, Gut Hormones and Glucose Metabolism. *PLoS One*. 2015;10(11):e0142352. doi:10.1371/journal.pone.0142352
11. Vrieze A, Out C, Fuentes S, et al. Impact of oral vancomycin on gut microbiota, bile acid metabolism, and insulin sensitivity. *J Hepatol*. Apr 2014;60(4):824-31.
12. Penamachú S, Kory B, Hewlett K, Belenky P. Fiber supplementation protects from antibiotic-induced gut microbiome dysbiosis by modulating gut redox potential. *Nat Commun*. Aug 24 2023;14(1):5161. doi:10.1038/s41467-023-40553-x
13. Zhang Y, Aldamarany WAS, Deng L, Zhong G. Carbohydrate supplementation retains intestinal barrier and ameliorates bacterial translocation in an antibiotic-induced mouse model. *Food Funct*. Sep 19 2023;14(18):8186-8200. doi:10.1039/d3fo01343j
14. Schuzlein MK, Vendrov KC, Edwards SJ, Martens EC, Young VB. Dietary Xanthan Gum Alters Antibiotic Efficacy against the Murine Gut Microbiota and Attenuates Clostridiales difficile Colonization. *mSphere*. Jan 8 2020;5(1):doi:10.1128/mSphere.00708-19
15. Ng KM, Aranda-Diaz A, Tropini C, et al. Recovery of the Gut Microbiota after Antibiotics Depends on Host Diet, Community Context, and Environmental Reservoirs. *Cell Host Microbe*. Nov 13 2019;26(5):650-665 e4. doi:10.1016/j.chom.2019.10.011
16. Klancic T, Lafont-Lapointe I, Wong J, et al. Concurrent Prebiotic Intake Reverses Insulin Resistance Induced by Early-Life Pulsed Antibiotic in Rats. *Biomedicines*. Jan 12 2021;9(1):doi:10.3390/biomedicines9010066
17. Tucker LA. Fiber Intake and Insulin Resistance in 6374 Adults: The Role of Abdominal Obesity. *Nutrients*. Feb 20 2018;10(2):doi:10.3390/nu10020237
18. Kronmout D, Bloemberg B, Seidell JC, Nissinen A, Menotti A. Physical activity and dietary fiber determine population body fat levels: the Seven Countries Study. *Int J Obes Relat Metab Disord*. Mar 2001;25(3):301-6. doi:10.1038/sj.ijo.0801568



This study 1) examined the effect of a 3-day antibiotic regimen on blood sugar control in people with overweight or obesity, and 2) explored the relationships between dietary fiber intake with body composition and blood sugar control.

