**APPLIED MICROBIAL AND CELL PHYSIOLOGY**



# **Metronidazole and ciprofoxacin diferentially afect chronic unpredictable mild stress‑induced changes in the colon, cecum and ileum microbiota**

**Chen Meng1,2 · Chen Dong4 · Hong Liu1,2,[3](http://orcid.org/0000-0003-4343-3490)**

Received: 15 September 2021 / Revised: 3 November 2021 / Accepted: 4 November 2021 / Published online: 9 December 2021 © The Author(s), under exclusive licence to Springer-Verlag GmbH Germany, part of Springer Nature 2021

## **Abstract**

Antibiotics have been shown to have a major impact on the composition and metabolism of gut microbiota, while unpredictable stress has been shown to have major infuences on gut microbiota homeostasis. However, the impact of combination antibiotics (e.g. metronidazole and ciprofoxacin) on gut microbiota dysbiosis that is induced by stress remains unclear. Here, chronic unpredictable mild stress (CUMS) was used to simulate unpredictable stress, and Sprague–Dawley rats received antibiotics (metronidazole and ciprofloxacin) after CUMS. The weights and coefficients of the thymus, liver and spleen were analysed. 16S rRNA gene sequencing was performed to determine the gut microbiota in the colon, cecum and ileum. We found that antibiotics decreased the CUMS-induced increases in spleen coefficients. Short-term antibiotic exposure significantly increased the cecum and ileum microbiota richness and signifcantly increased the ileum microbiota diversity after CUMS. Long-term antibiotic exposure signifcantly decreased the colon microbiota diversity and signifcantly increased the ileum microbiota richness after CUMS. The impacts of antibiotic exposure on the microbiota compositions at the phylum and genus levels in diferent gut segments were diferent after CUMS. However, it is worth noting that the most diferentially abundant bacteria in the colon, cecum and ileum were all *Verrucomicrobia* under long-term antibiotic exposure. Antibiotic exposure signifcantly increased the relative abundance of *Lactobacillus* in the colon and ileum and signifcantly increased the relative abundance of *Akkermansia* in the colon and cecum after CUMS. In conclusion, this study showed that metronidazole and ciprofloxacin differentially affected the CUMS-induced changes in the microbiota of the colon, cecum and ileum. **Key points**

• *The impacts of antibiotic exposure on the changes in microbiota that were induced by chronic unpredictable mild stress were analysed.*

- *We collected rat gut microorganisms from the colon, cecum and ileum.*
- *The diversities, compositions, functions and network structures were analysed.*

**Keywords** Metronidazole · Ciprofoxacin · 16S rRNA · Gut microbiota · Gut segment · Chronic unpredictable mild stress

 $\boxtimes$  Chen Dong dongchen@sdpei.edu.cn

 $\boxtimes$  Hong Liu lh64@buaa.edu.cn

- <sup>1</sup> School of Biological Science and Medical Engineering, Institute of Environmental Biology and Life Support Technology, Beihang University, Beijing 100083, China
- <sup>2</sup> Beijing Advanced Innovation Centre for Biomedical Engineering, Beihang University, Beijing 102402, China
- <sup>3</sup> International Joint Research Center of Aerospace Biotechnology & Medical Engineering, Beihang University, Beijing 100083, China
- <sup>4</sup> Laboratory of Sport Nutrition and Intelligent Cooking, Shandong Sport University, Jinan 250102, China

## **Introduction**

Antibiotics are not only widely used in clinical treatment but are also ubiquitous in food and the environment (Clardy et al. [2009](#page-11-0); Wang et al. [2020](#page-12-0)). Antibiotics are a double-edged sword. On the one hand, antibiotics can cause a series of negative efects, such as *Clostridium difcile* infections, antibiotic resistance and microbiota imbalance. On the other hand, antibiotics have also saved countless lives. Moreover, the efect of antibiotics on bacteria depends not only on the chemical structure or combination of antibiotics but also depends on the duration of antibiotic exposure. In addition, people are currently faced with all types of chronic stress in their lives, such as chronic diseases, economic instability, separation and violence. Kuti et al. ([2020\)](#page-11-1) found that *Clostridium* species increased in the colon in chronically stressed mice, while rifaximin treatment decreased the *Clostridium* concentrations and increased the colonic expressions of the tight junction proteins. Yang et al. [\(2020](#page-12-1)) found that chronic minocycline treatment altered the gut microbiota species abundances and the imbalance of gut microbiota metabolites that were induced by chronic unpredictable mild stress (CUMS) in faecal samples.

Chronic stress has been shown to have a major infuence on gut microbiota homeostasis (Siopi et al. [2020](#page-12-2); Li et al. [2019a](#page-12-3), [b](#page-12-4)). There are more than 100 trillion microbiota in the human gastrointestinal tract, and most of them are bacteria (Rooks and Garrett [2016](#page-12-5); Cryan et al. [2019\)](#page-11-2). The gut microbiota is considered to be an important "organ" for maintaining host immune and metabolic homeostasis (Clarke et al. [2014;](#page-11-3) Cani [2017\)](#page-11-4). Gut microbiota dysbiosis is usually defned as disorders of diversity or composition of the gut microbiota, which are often associated with infammatory bowel disease and nervous system diseases (Carding et al. [2015;](#page-11-5) Lavelle and Sokol [2020](#page-11-6)). Gut-associated lymphoid tissue (GALT) is one of the largest masses of lymphoid tissue in the body (Claud and Walker [2008\)](#page-11-7). Although the number of genes that are encoded by the gut microbiota is greater than 150 times more numerous than those encoded by the human genome and is highly involved in metabolic reactions, they have been neglected in disease diagnosis and treatment (Zhu et al. [2010\)](#page-12-6). Moreover, studies have shown that the gut microbiota may have a great infuence on brain development and function (Cryan et al. [2019;](#page-11-2) Heijtz et al.  $2011$ ). Li et al.  $(2019a, b)$  $(2019a, b)$  $(2019a, b)$  $(2019a, b)$  found that the overall gut microbiota compositions were signifcantly diferent between the CUMS group and control group, and CUMS increased anxiety-like and depression-like behaviour in mice. Marin et al. ([2017](#page-12-7)) reported that the gut microbiota compositions were altered by CUMS. However, the current understanding focuses on colon microbiota dysbiosis. Thus, it is of great relevance to explore the impact of antibiotics on the CUMSinduced microbiota dysbiosis of diferent gut segments.

Metronidazole is mainly used in infection treatment or prevention that are caused by anaerobic bacteria (Freeman et al. [1997\)](#page-11-9). Ciprofloxacin, as the third generation of quinolones, has broad-spectrum antibacterial activity (Campoli-Richards et al. [1988](#page-11-10)). Metronidazole and ciprofoxacin are often used in combination in clinical practice (Werk and Schneider [1988\)](#page-12-8). However, the impact of metronidazole and ciprofoxacin on gut microbiota dysbiosis induced by stress remains unclear. Therefore, in this study, CUMS was used to simulate unpredictable stress to explore the effects of metronidazole and ciprofoxacin on the CUMS-induced microbiota dysbiosis of diferent gut segments.

## **Materials and methods**

#### **Experimental design**

Male Sprague–Dawley (SD)-specifc pathogen-free (SPF) rats were obtained from Beijing SPF Biotechnology Co. Ltd. (Beijing, China). All rats were kept under a 12-h light/dark cycle at a constant temperature (21–22°C) and humidity (55 $\pm$ 5%). All rats received the same sterile standard food (Beijing SFB Biotechnology Co. Ltd., Beijing, China) and tap water. Three rats were fed in each cage. After efficacy analysis, 6-week-old  $(n=24)$  rats were allowed to adapt to the environment prior to the experiment in the 1st week. The rats were randomly assigned to one of four groups of 6 animals each: the CTL group rats  $(n=6)$  did not receive any treatment, the CUMS group rats  $(n=6)$  were exposed to chronic unpredictable mild stress from the 2nd to 5th week, and the CUMS+ABX-s group rats  $(n=6)$  were exposed to chronic unpredictable mild stress from the 2nd to 5th week as well as to metronidazole and ciprofoxacin in drinking water (metronidazole, 1 g/L, Sangon Biotech, Shanghai, China; ciprofoxacin hydrochloride, 0.2 g/L, Solarbio, Beijing, China) in the 6th week. The rats in the CUMS + ABX-l group  $(n=6)$  were exposed to chronic unpredictable mild stress from the 2nd to 5th week as well as to metronidazole and ciprofoxacin in drinking water (metronidazole, 1 g/L, Sangon Biotech, Shanghai, China; ciprofloxacin hydrochloride, 0.2 g/L, Solarbio, Beijing, China) from the 6th to 9th week. All rats were euthanized (carbon dioxide) in the 9th week. The thymus, liver, spleen, colon (cn), cecum (cm) and ileum (lm) contents were collected and stored rapidly at−80 °C until analysis. "cn" in fgures represent the colon contents of rats, "cm" in fgures represent the cecum contents of rats, and "lm" in fgures represent ileum contents of rats.

#### **Chronic unpredictable mild stress**

The studied rats were exposed to chronic unpredictable mild stress from the 2nd to 5th week: (1) food deprivation for 24 h, (2) water deprivation for 24 h, (3) rotation on a shaker for 1 h, (4) tail pinch for 1 min, (5) forced swimming in (cold) water for 5 min, (6) modifed light/dark cycle, or (7) heat stress at 50 °C for 15 min (Nollet et al. [2013\)](#page-12-9). Two types of chronic unpredictable mild stress on each day were randomly assigned. The rats in the CTL group were fed according to routine feeding and were not afected by the other groups of rats.

#### **Organ coefficients**

The thymus, liver and spleen were removed from the sacrifced rats. All organs were washed in saline, sucked dry and weighed. The organ coefficients (e.g. thymus coefficient, liver coefficient and spleen coefficient) were calculated by



<span id="page-2-0"></span>**Fig. 1** The efect of antibiotic exposure on the growth state. **a** Experimental design and procedures. **b**–**c** Body weight and weight gain were monitored during the experiment  $(n=6)$ . **d**–**f** Thymus, liver and spleen weights and coefficients  $(n=6)$  were measured. ABX, antibi-

dividing the weight of the individual organs by the weight of a specific rat. A larger organ coefficient indicates organ congestion, oedema or hypertrophy, and a smaller organ coefficient indicates organ atrophy and degenerative changes.

#### **16S rRNA gene sequencing**

At least 1 g of homogeneous fresh samples (e.g. colon contents, cecum contents and ileum contents) was collected and

otics; CUMS, chronic unpredictable mild stress; CUMS+ABX-s, short-term antibiotic exposure; and CUMS+ABX-l, long-term antibiotic exposure. \**P*<0.05; \*\**P*<0.01

stored quickly at−80 °C until analysis. When all samples had been collected, DNA extraction was performed. First, the gut contents were thawed on ice, and the total genomic DNA was extracted by phenol/trichloromethane/isoamyl alcohol. The DNA quality and concentrations were determined with a NanoDrop spectrophotometer (Thermo Scientifc Inc., Waltham, MA, USA). The DNA was diluted to 1 ng/µL using sterile water based on the concentration.

<sup>2</sup> Springer

The 16S rRNA genes (V3–V4) were amplifed using 341F (5′-CCTAYGGGRBGCASCAG-3′) and 806R (5′-GGA CTACNNGGGTATCTAAT-3′) primers. The sequencing libraries were generated using a DNA PCR-Free Sample Preparation Kit (Illumina Co., Ltd., San Diego, CA, USA) following the manufacturer's recommendations. The DNA library was sequenced on an Illumina NovaSeq platform, and 250-bp paired-end reads were generated. High-throughput sequencing was performed on an Illumina NovaSeq platform at Novogene Technologies Co., Ltd. (Beijing, China). These data were uploaded as a bioproject to the National Center for Biotechnology Information (NCBI) database (PRJNA745052).

### **Microbiota analysis**

The 16S rRNA gene sequences were processed using R software (Version 4.0.0, <https://www.r-project.org/>), USEARCH10.0 ([www.drive5.com/usearch/](http://www.drive5.com/usearch/)) and in-house scripts. The sequences with≥97% similarity were assigned to the same operational taxonomic units (OTUs). Representative sequences of the OTUs were selected and analysed with the USEARCH ([http://www.drive5.com/usearch/\)](http://www.drive5.com/usearch/)



<span id="page-3-0"></span>**Fig. 2** Antibiotic exposure alters the richness and diversity of diferent gut segment microbiota. **a–c** Dot plots showing the  $\alpha$ -diversity indices (e.g. Chao1, Shannon\_e and Simpson) of diferent gut segment microbiota  $(n=6)$ . **d–f** Constrained principal coordinate analysis (CPCoA) of diferent gut segment microbiota (*n*=6). "CTLcn" represents the colon contents of rats in CTL group, "CTLcm" represents the cecum contents of rats in CTL group, "CTLlm" represents ileum contents of rats in CTL group, "CUMScn" represents the colon contents of rats in CUMS group, "CUMScm" represents the cecum contents of rats in CUMS group, "CUMSlm" represents the ileum

contents of rats in CUMS group, "CUMS+ABXcn-s" represents the colon contents of rats in CUMS+ABX-s group, "CUMS+ABXcms" represents the cecum contents of rats in CUMS+ABX-s group, "CUMS+ABXlm-s" represents the ileum contents of rats in CUMS+ABX-s group, "CUMS+ABXcn-l" represents the colon content of rats in CUMS+ABX-l group, "CUMS+ABXcm-l" represents the cecum content of rats in CUMS+ABX-l group, and "CUMS+ABXlm-l" represents the ileum content of rats in CUMS+ABX-l group



<span id="page-4-0"></span>**Fig. 3** Antibiotic exposure alters the composition of gut microbiota at the phylum level. **a**–**c** Relative abundances of the top 8 phyla in each sample, *Actinobacteria*/*Proteobacteria* ratios and *Actinobacteria*/*Prot eobacteria* ratios of each group in the colon. **d**–**f** Relative abundances of the top 8 phyla in each sample, *Actinobacteria*/*Proteobacteria* ratios and *Actinobacteria*/*Proteobacteria* ratios of each group in the cecum. **g**–**i** Relative abundances of the top 8 phyla in each sample,

and Greengenes databases ([http://greengenes.secondgeno](http://greengenes.secondgenome.com/) [me.com/\)](http://greengenes.secondgenome.com/) to annotate the taxonomic information: kingdom, phylum, class, order, family, genus and species. The OTU table was standardized to the sample with the lower number of sequences and was subjected to the following analyses. The taxonomy was visualized by ImageGP [\(http://](http://www.ehbio.com/ImageGP) [www.ehbio.com/ImageGP\)](http://www.ehbio.com/ImageGP). The results of the constrained principal coordinate analysis (CPCoA) were visualized by

*Actinobacteria*/*Proteobacteria* ratios and *Actinobacteria*/*Proteobacte ria* ratios of each group in the ileum. "\*" represents the CUMS group versus the CTL group, "#" represents the CUMS+ABX-s group versus the CUMS group, "a" represents the CUMS+ABX-l group versus the CUMS group, one symbol represents *P*<0.05, two symbols represent *P*<0.01, and three symbols represent *P*<0.001

RStudio (<https://rstudio.com/>), and the reshape2, ggplot2, vegan, digest, ggrepel and ggpubr packages were used in the CPCoA.

Phylogenetic Investigation of Communities by Reconstruction of Unobserved States (PICRUSt) ([http://picrust.](http://picrust.github.io/picrust/) [github.io/picrust/](http://picrust.github.io/picrust/)) was performed using the online version of Galaxy ([http://huttenhower.sph.harvard.edu/galaxy/\)](http://huttenhower.sph.harvard.edu/galaxy/) and was visualized by STAMP (Version 2.1.3) (Parks



<span id="page-5-0"></span>**Fig. 4** Antibiotic exposure alters the gut microbiota compositions at the genus level. **a**–**c** Relative abundances of the top 10 genera in each sample. **d**–**f** Bacterial network of the colon, cecum and ileum contents. The nodes represent OTUs, node sizes represent connectivity, and colours represent diferent genus levels. Edges (connections): red represents a positive correlation, and green represents a negative

correlation (Spearman,  $|r \ge 0.6, P < 0.05$ ). "\*" represents the CUMS group versus the CTL group, "#" represents the CUMS+ABX-s group versus the CUMS group, "a" represents the CUMS+ABX-l group versus the CUMS group, one symbol represents *P*<0.05, two symbols represent *P*<0.01, and three symbols represent *P*<0.001

**Table 1** Network structure

<span id="page-6-0"></span>

Table 1 Network structure characteristics				Nodes Edges Average degree Average	clustering coef- age path ficient	Aver- length	Modularity Diameter Density		
	Colon	-50	314	12.56	0.72	1.98	0.86	4	0.26
	Cecum	- 52	192	7.39	0.69	2.52	3.84	6	0.15
	<b>Ileum</b>	52	421	16.19	0.74	1.84	0.19		0.32

et al. [2014](#page-12-10)). The bacterial networks were constructed using Gephi (Version 0.9.2, <https://gephi.org/>). Moreover, the signifcantly diferent species between the CUMS and the CUMS + ABX groups were generated by the LEfSe method (Segata et al. [2011\)](#page-12-11). The threshold of the linear discriminant was set to 2.0.

#### **Statistical analyses**

All statistical analyses were performed using Prism 6.0 software (GraphPad Software, [https://www.graphpad.](https://www.graphpad.com/) [com/](https://www.graphpad.com/)) and OriginPro 2018C (Origin Software, [https://](https://www.originlab.com/) [www.originlab.com/](https://www.originlab.com/)). The histograms are presented as the means  $\pm$  standard error (SE). The differences between the groups were evaluated with one-way ANOVA with Duncan's test.  $P < 0.05$  was considered to indicate a statistically signifcant diference. The diferences were noted as signifcant for \**P*<0.05, \*\**P*<0.01 and \*\*\**P*<0.001.

## **Results**

#### **Changes in body weights and organ coefficients**

To explore the efect of CUMS and antibiotic exposure on the body weights and organ coefficients, the body and organ weights were measured. Compared with the CTL group, the body weight (Fig. [1b,](#page-2-0)  $P < 0.01$ ,  $F_{(3, 20)} = 7.78$ ) and weight gain (Fig. [1c](#page-2-0),  $P < 0.01$ ,  $F_{(3, 20)} = 9.74$ ) decreased signifcantly in the CUMS group. There were no signifcant diferences between the CUMS group and CUMS + ABX group, which indicated that the antibiotics used had no signifcant efects on the CUMS-induced decreases in body weights and weight gains.

Compared with the CTL group, the thymus coefficients (Fig. [1d](#page-2-0),  $P < 0.05$ ,  $F_{(3, 20)} = 3.35$ ) and spleen coefficients (Fig. [1f,](#page-2-0)  $P < 0.01$ ,  $F_{(3, 20)} = 4.84$ ) significantly increased, while the liver weights significantly decreased (Fig. [1e,](#page-2-0)  $P < 0.01$ ,  $F_{(3, 20)} = 5.25$  in the CUMS group. In addition, we found that when compared to the CUMS group, the CUMS+ABX-s group displayed signifcantly lower spleen coefficients (Fig. [1f,](#page-2-0)  $P < 0.05$ ,  $F_{(3, 20)} = 4.84$ ), while the CUMS+ ABX-l group exhibited a trend toward decreased spleen weights (Fig. [1f](#page-2-0),  $P = 0.08$ ,  $F_{(3, 20)} = 1.301$ ), which indicated that the antibiotics reduced the CUMS-induced increases in the spleen coefficients.

## **Efects on the diversity of gut microbiota in diferent segments**

To explore the efects of antibiotic exposure on the microbiota of diferent gut segments after CUMS, diferent gut segment contents were analysed by sequencing the bacterial 16S rRNA V3+V4 region. A total of 3,452,508 high-quality sequences were obtained from 24 samples (ranging from 32,845 to 72,112 reads per sample). The low-abundance OTUs were discarded, and we obtained 6,089 OTUs that could be used for further analysis. The greater the value of Chao1, the greater the community richness, the greater the Shannon\_e value, the higher the community diversity, and the greater the Simpson value, the lower the community diversity.

Compared with the CTL group, the microbiota richness (Chao1) increased signifcantly (Fig. [2b](#page-3-0), *P* < 0.01,  $F_{(3, 20)} = 12.75$ ) in the CUMScm group, and the microbiota diversities (Shannon\_e and Simpson) signifcantly increased in the CUMScm group (Fig. [2b,](#page-3-0) middle, *P* < 0.01, *F* (3, 20) = 8.28) and CUMSlm group (Fig. [2c,](#page-3-0) middle, *P*<0.05, *F* (3, 20)=20.46; Fig. [2c,](#page-3-0) right, *P*<0.01,  $F_{(3, 20)} = 9.77$ . Compared with the CUMS group, the CUMS + ABXcm-s (Fig. [2b](#page-3-0), left,  $P < 0.01$ ,  $F_{(3, 20)} = 12.75$ ) and CUMS + ABXlm-s (Fig. [2c,](#page-3-0) left, *P* < 0.001, *F*  $(3, 20)$  = 29.44) groups exhibited significantly increased microbiota richness, while the CUMS+ ABXlm-s group exhibited significantly increased microbiota diversity (Fig. [2c,](#page-3-0) middle, *P* < 0.001, *F* (3, 20) = 20.46; Fig. [2c,](#page-3-0) *P* < 0.05, right,  $F_{(3, 20)} = 9.77$ . Compared to the CUMS group, the CUMS+ABXcn-l group displayed signifcantly decreased microbiota diversity (Fig. [2a,](#page-3-0) middle, *P*<0.001, *F* (3, 20) = 7.29; Fig. [2a,](#page-3-0) right, *P* < 0.01, *F* (3, 20) = 10.0029), while the  $CUMS + ABX$ lm-l group displayed significantly increased microbiota richness (Fig. [2c,](#page-3-0) left, *P* < 0.01, *F*  $(3, 20)$  = 29.44).

In addition, the beta diversity analysis showed that the microbiota in the colon, cecum and ileum were signifcantly afected by antibiotic exposure after CUMS (Fig. [2d–f\)](#page-3-0).



<span id="page-8-0"></span>**Fig. 5** Variations in diferent gut segment microbiota under long-term ◂ antibiotic exposure. **a**–**c** Cladogram plot showing the taxonomic levels represented by rings in the colon, cecum and ileum samples from the CUMS group and CUMS+ABX-l group, with phyla in the outermost ring and genera in the innermost ring. Each circle represents a member within that level. The taxa at each level were coloured according to their abundances ( $P < 0.05$ ; LDA score > 3)

#### **Efects on the gut microbiota composition at the phylum level**

Compared with the CTLcn group, *Proteobacteria* sig-nificantly (Fig. [3a,](#page-4-0)  $P < 0.05$ ,  $F_{(3, 20)} = 14.29$ ) decreased in the CUMScn group. Compared with the CUMScn group, the CUMS+ ABXcn-s group exhibited a trend toward a decreased relative abundance of *Proteobacteria* (Fig. [3a,](#page-4-0)  $P=0.068$ ,  $F_{(3, 20)}=14.29$ , while the *ActinobacterialProteob acteria* ( $A/P$ ) ratio significantly increased (Fig.  $3b$ ,  $P < 0.05$ , *F* (3, 20)=7.79). Compared with the CUMScn group, *Bacteroidetes* (Fig. [3a](#page-4-0), *P*<0.001, *F* (3, 20)=12.98) and *Proteobacteria* (Fig. [3a](#page-4-0),  $P < 0.05$ ,  $F_{(3, 20)} = 14.29$ ) significantly decreased, *Firmicutes* (Fig. [3a,](#page-4-0)  $P < 0.05$ ,  $F_{(3, 20)} = 3.34$ ) and *Verrucomicrobia* (Fig. [3a,](#page-4-0)  $P < 0.001$ ,  $F_{(3, 20)} = 8.95$ ) signifcantly increased, while the *A/P* (Fig. [3b,](#page-4-0) *P*<0.01, *F*  $(3, 20)$  = 7.79) and *Firmicutes/Bacteroidetes* (*F/B*) (Fig. [3c,](#page-4-0)  $P < 0.001$ ,  $F_{(3, 20)} = 8.19$  ratios significantly increased in the CUMS+ABXcn-l group.

Compared with the CTLcm group, *Bacteroidetes* (Fig. [3d,](#page-4-0)  $P < 0.01$ ,  $F_{(3, 20)} = 6.26$ ) significantly decreased, *Firmicutes* (Fig. [3d](#page-4-0),  $P < 0.05$ ,  $F_{(3, 20)} = 5.17$ ) significantly increased, and the *A/P* (Fig. [3e,](#page-4-0)  $P < 0.05$ ,  $F_{(3, 20)} = 4.47$ ) and  $F/B$  (Fig. [3f,](#page-4-0)  $P < 0.01$ ,  $F_{(3, 20)} = 5.75$  ratios significantly increased in the CUMScm group. There were no signifcant diferences between the CUMScm group and CUMS+ABXcm-s group at the phylum level. Compared with the CUMScm group, *Firmicutes* (Fig. [3d](#page-4-0),  $P < 0.05$ ,  $F_{(3, 20)} = 5.16$ ) significantly decreased, *Bacteroidetes* (Fig. [3d,](#page-4-0)  $P < 0.05$ ,  $F_{(3, 20)} = 6.26$ ) and *Verrucomicrobia* (Fig. [3d,](#page-4-0)  $P < 0.001$ ,  $F_{(3, 20)} = 9.82$ ) signifcantly increased in the CUMS+ABXcm-l group, while the *F*/*B* ratio (Fig. [3f](#page-4-0), *P* < 0.01, *F* (3, 20) = 5.75) significantly decreased in the CUMS+ABXcm-l group.

There were no significant differences between the CUMSlm group and CTLlm group at the phylum level. Compared with the CUMSlm group, *Bacteroidetes* (Fig. [3g,](#page-4-0)  $P < 0.01$ ,  $F_{(3, 20)} = 5.61$ ) significantly increased, *Firmicutes* (Fig. [3g,](#page-4-0)  $P = 0.06$ ,  $F_{(3, 20)} = 1.51$ ) exhibited a decreasing trend, while the *A/P* (Fig. [3h](#page-4-0),  $P < 0.05$ ,  $F_{(3, 20)} = 2.804$ ) and *F/B* (Fig. [3i,](#page-4-0)  $P < 0.05$ ,  $F_{(3, 20)} = 4.06$ ) ratios significantly decreased in the CUMS+ ABXlm-s group. Compared with the CUMSlm group, *Bacteroidetes* (Fig. [3g,](#page-4-0)



<span id="page-8-1"></span>**Fig. 6** Diferential microbial functions in diferent gut segments under short-term antibiotic exposure. **a**–**c** The metagenomic analysis was based on 16S rRNA gene sequencing data and was performed using PICRUSt (Phylogenetic Investigation of Communities by

Reconstruction of Unobserved States), which was followed by annotation with the Kyoto Encyclopedia of Genes and Genomes (KEGG) database and visualization using STAMP. The statistical diferences between the two groups were screened by Welch's *t* test with  $P < 0.05$ 





<span id="page-9-0"></span>**Fig. 7** Diferential microbial functions in diferent gut segments under long-term antibiotic exposure. **a**–**c** The metagenomic analysis was based on 16S rRNA gene sequencing data and conducted

*P* = 0.09, *F*  $_{(3, 20)}$  = 5.61) and *Verrucomicrobia* (Fig. [3g,](#page-4-0)  $P=0.07$ ,  $F_{(3, 20)}=1.77$ ) significantly increased, while the *A/P* (Fig. [3h](#page-4-0), *P*=0.09, *F* (3, 20)=2.804) and *F/B* (Fig. [3i,](#page-4-0)  $P=0.08$ ,  $F_{(3,20)}=4.06$  ratios exhibited decreasing trends in the CUMS+ABXlm-l group.

## **Efects on the gut microbiota compositions at the genus level**

To investigate the efects of antibiotics on the gut microbiota compositions at the genus level in diferent segments after CUMS, we analysed the genera with the top ten highest relative abundances (Fig. [4a–c](#page-5-0)). As shown in Fig. [4a,](#page-5-0) compared with the CUMScn group, *Turicibacter* (*P*<0.05,  $F_{(3, 20)} = 4.21$ ) significantly increased, while *Peptococcaceae* ( $P < 0.05$ ,  $F_{(3, 20)} = 6.35$ ) and *Ruminoccaceae*  $(P<0.001, F_{(3, 20)} = 12.03)$  significantly decreased in the CUMS + ABXcn-s group. Compared with the CUMScn

using PICRUSt, which was followed by annotation with the KEGG database and visualization using STAMP. The statistical diferences between the two groups were screened by Welch's *t* test with *P*<0.05

group, *Prevotella* (*P*<0.001, *F* (3, 20)=9.66), *Clostridiales*  $(P<0.001, F<sub>(3, 20)</sub>=9.96)$ , *SMB53*  $(P<0.05, F<sub>(3, 20)</sub>=5.25)$ , *Peptococcaceae* (*P* < 0.01, *F* (3, 20) = 6.35) and *Ruminoccaceae* ( $P < 0.01$ ,  $F_{(3, 20)} = 12.03$ ) significantly decreased, and *Akkermansia* ( $P < 0.001$ ,  $F_{(3, 20)} = 8.95$ ) significantly increased in the CUMS+ABXcn-l group.

As shown in Fig. [b,](#page-5-0) when compared with the CTLcm group, *SMB53* ( $P < 0.05$ ,  $F_{(3, 20)} = 14.49$ ) significantly decreased, and *Lachnospiraceae* ( $P < 0.01$ ,  $F_{(3, 20)} = 3.68$ ) and *Ruminoccaceae* ( $P < 0.05$ ,  $F_{(3, 20)} = 15.14$ ) significantly increased. Compared with the CUMScm group, *Ruminoccaceae* (*P* < 0.001, *F* (3, 20) = 15.14) significantly increased, and *Turicibacter* ( $P < 0.01$ ,  $F_{(3, 20)} = 8.83$ ), *SMB53* (*P*<0.05, *F* (3, 20)=14.49) and *Lachnospiraceae*  $(P<0.05, F<sub>(3, 20)</sub>=3.68)$  significantly decreased in the CUMS+ ABXcm-s group. Compared with the CUMScm group, *Turicibacter* (*P*<0.001, *F* (3, 20)=8.83), *Clostridiales* (*P*<0.05, *F* (3, 20)=2.37), *SMB53* (*P*<0.01, *F* (3, 20)=14.49),

*Lachnospiraceae* ( $P < 0.05$ ,  $F_{(3, 20)} = 3.68$ ) and *Peptococcaceae* ( $P < 0.001$ ,  $F_{(3, 20)} = 12.25$ ) significantly decreased, while *S24–7* (*P*<0.001, *F* (3, 20)=18.44) and *Akkermansia*  $(P<0.001, F_{(3, 20)} = 9.82)$  significantly increased in the CUMS+ABXcm-l group.

As shown in Fig. [4c](#page-5-0), compared with the CUMSlm group, *Prevotella* (*P*<0.001, *F* (3, 20)=9.036), *Lachnospiraceae* (*P* < 0.01, *F* (3, 20)= 6.65), *Peptococcaceae* (*P* < 0.01, *F*  $_{(3, 20)}$  = 4.52) and *Ruminoccaceae* (*P* < 0.001, *F* <sub>(3, 20)</sub> = 18.71) significantly increased, while *Turicibacter* (*P* < 0.05, *F*  $_{(3, 20)}$ =5.33) and *SMB53* (*P*<0.01, *F*<sub>(3, 20)</sub>=13.39) signifcantly decreased in the CUMS+ABXlm-s group. Compared with the CUMScm group, *Turicibacter* (*P*<0.01, *F*  $(3, 20) = 5.33$ ) and *SMB53* (*P* < 0.001, *F*  $(3, 20) = 13.39$ ) significantly decreased, while *Lactobacillus* (*P* < 0.001, *F*  $(3, 20)$  = 8.15) and *Ruminoccaceae* (*P* < 0.05, *F*  $(3, 20)$  = 18.71) signifcantly increased in the CUMS+ABXlm-l group.

The microbial interaction networks were constructed by using the Spearman correlation coefficients (Fig.  $4d-f$ ). Table [1](#page-6-0) shows the structural characteristics of the microbial networks for the diferent treatment groups. The numbers of edges and average degrees for the cecum were lower than those for the colon and cecum, and the number of edges for cecum was the highest. The average path length and modularity of the cecum were higher than those of the colon and ileum.

In the CUMS  $+$  ABX-s group compared with the CUMS group, the most diferentially abundant bacteria from the colon belonged to the phyla *Verrucomicrobia* and *Actinobacteria* (supplementary Fig. S<sub>1a</sub>), the most differentially abundant bacteria from the cecum belonged to the phylum *Firmicutes* (supplementary Fig. S1b), and the most differentially abundant bacteria from the ileum belonged to the phylum *Proteobacteria* (supplementary Fig. S1c). It is worth noting that under long-term antibiotic exposure, the most diferentially abundant bacteria in the colon, cecum and ileum all belonged to the phylum *Verrucomicrobia*  $(Fig. 5a-c).$ 

## **Efects on the metabolism functions of gut microbiota**

To determine the changes in microbiome metabolites that were induced by the changes in microbiota abundances, the 16S rRNA gene data were annotated with metabolic pathways from the KEGG database using PICRUSt prediction analysis (Fig.  $6a-c$  and Fig.  $7a-c$ ). In the colon, compared with the CUMScn group, six metabolic pathways were signifcantly afected by short-term antibiotic exposure, and sixteen metabolic pathways were signifcantly afected by long-term antibiotic exposure. Compared with the CUM-Scm group, two metabolic pathways in the cecum were signifcantly afected by short-term antibiotic exposure, and eighteen metabolic pathways were signifcantly afected by long-term antibiotic exposure. Compared with the CUMSlm group, thirty metabolic pathways in the ileum were signifcantly afected by short-term antibiotic exposure, and eighteen metabolic pathways were signifcantly afected by longterm antibiotic exposure.

## **Discussion**

In the present study, we observed some interesting changes in the gut microbiota that were related to antibiotic exposure after CUMS. For example, *Lactobacillus* signifcantly increased in the colon, which has been reported to ferment sugars to produce lactic acid and increase anti-infammatory factors such as IL-4 and IL-10 (Partrick et al. [2021](#page-12-12); Angelis and Gobbetti [2011\)](#page-11-11). *Turicibacter* also signifcantly increased in the colon, which was reported to be involved in fermentation metabolism, and lactic acid was the main metabolite (Bosshard et al. [2002](#page-11-12); Lee et al. [2018](#page-12-13)). However, *Turicibacter* significantly decreased in both the cecum and ileum. *Akkermansia*, which was signifcantly elevated in the colon and cecum in this study, has been reported to have an anti-inflammatory effect (Derrien et al. [2017;](#page-11-13) Zhao et al. [2017\)](#page-12-14). Dubourg et al. ([2013\)](#page-11-14) and Li et al. ([2020](#page-12-15)) both observed an increase in *Akkermansia* bacteria after treatment with broad-spectrum antibiotic or compound of antibiotic activity. In addition, the efects of metronidazole and ciprofoxacin exposure on the *A/P* and *F/B* ratios of diferent gut segments were diferent in the CUMS-treated rats. The *A/P* ratios signifcantly increased in the colon, but no signifcant diferences were observed in the cecum and ileum, while the changes in the *F/B* ratios in the colon were opposite to those in the cecum and ileum. These results suggested that the gut microbiota from diferent gut segments infuenced the host physiological and psychological health by shaping diferent changes in the gut microbiota compositions.

Moreover, Liu et al. [\(2018](#page-12-16)) reported that chronic minocycline treatment inhibited the activation of microglia through neuroinfammation regulation. Yang et al. ([2020](#page-12-1)) found that chronic minocycline treatment inhibited neuroinfammation. Our study found that the activities of the nervous system pathway in the colon and cecum were signifcantly upregulated under long-term antibiotic exposure after CUMS but that the activity in the ileum was signifcantly downregulated under antibiotic exposure. These results suggested that the gut microbiota from diferent gut segments infuenced the host physiological and psychological health by shaping different metabolic functions of the gut microbiota changes.

Hemmings et al. ([2017](#page-11-15)) reported that *Verrucomicrobia* decreased in patients with PTSD. Tenorio-Jiménez et al. ([2019](#page-12-17)) found that *Verrucomicrobia* in the gastrointestinal

microbiota increased in metabolic syndrome patients after probiotic *Lactobacillus reuteri* V3401 treatment. We found that under long-term metronidazole and ciprofloxacin exposure, the most diferentially abundant bacteria in the colon, cecum and ileum were all *Verrucomicrobia* when compared to the CUMS-treated rats, which suggested that *Verrucomicrobia* may play a critical role in metronidazole and ciprofoxacin regulating the host physiological and psychological health.

This study not only emphasized how antibiotic exposure significantly affects the microbiota in the colon, cecum and ileum after CUMS but also emphasized the importance of studying the microbiota in a location-specifc manner. In conclusion, our results showed that antibiotics promoted compositional changes in the gut microbiota in diferent gut segments, which provide unexpected clues for the roles of diferent gut segment microbiota in diseases. The driving factors of antibiotic upregulation and the mechanism that induces imbalances remain to be determined in complex immune and infammatory diseases.

**Supplementary Information** The online version contains supplementary material available at<https://doi.org/10.1007/s00253-021-11685-1>.

**Author contribution** CM performed experiments, analysed data and wrote original draft. CD performed experiments, collected data and revised the article. HL designed experiments and revised the article.

**Funding** This work was fnancially supported by the grant from the National Natural Science Foundation of China (Grant No. 81871520).

**Data Availability** The data of this study was uploaded as a bioproject to the National Center for Biotechnology Information (NCBI) database (PRJNA745052).

## **Declarations**

**Ethics approval** All procedures were performed according to the National Institutes of Health Guide for the care and use of laboratory animals and were approved by the ethics committee of Beihang University (BM20210108).

**Consent to participate** Not applicable.

**Consent for publication** Not applicable.

**Conflict of interest** The authors declare no competing interests.

# **References**

- <span id="page-11-11"></span>Angelis MDD, Gobbetti M (2011) Lactic acid bacteria | *Lactobacillus* spp.: general characteristics. In: Fuquay JW (ed) Encyclopedia of dairy sciences. Academic Press, San Diego, pp 78–90
- <span id="page-11-12"></span>Bosshard PP, Zbinden R, Altwegg M (2002) *Turicibacter sanguinis* gen. nov., sp. nov., a novel anaerobic, gram-positive bacterium.

Int J Syst Evol Microbiol 52:1263–1266. [https://doi.org/10.1099/](https://doi.org/10.1099/00207713-52-4-1263) [00207713-52-4-1263](https://doi.org/10.1099/00207713-52-4-1263)

- <span id="page-11-10"></span>Campoli-Richards DM, Monk JP, Price A, Benfeld P, Todd PA, Ward A (1988) Ciprofoxacin Drugs 35:373–447. [https://doi.org/10.](https://doi.org/10.2165/00003495-198835040-00003) [2165/00003495-198835040-00003](https://doi.org/10.2165/00003495-198835040-00003)
- <span id="page-11-4"></span>Cani PD (2017) Gut microbiota - at the intersection of everything? Nat Rev Gastroenterol Hepatol 14:321–322. [https://doi.org/10.1038/](https://doi.org/10.1038/nrgastro.2017.54) [nrgastro.2017.54](https://doi.org/10.1038/nrgastro.2017.54)
- <span id="page-11-5"></span>Carding S, Verbeke K, Vipond DT, Corfe BM, Owen LJ (2015) Dysbiosis of the gut microbiota in disease. Microb Ecol Health Dis 26:26191. <https://doi.org/10.3402/mehd.v26.26191>
- <span id="page-11-0"></span>Clardy J, Fischbach MA, Currie CR (2009) The natural history of antibiotics. Curr Biol 19:R437–R441. [https://doi.org/10.1016/j.cub.](https://doi.org/10.1016/j.cub.2009.04.001) [2009.04.001](https://doi.org/10.1016/j.cub.2009.04.001)
- <span id="page-11-3"></span>Clarke G, Stilling RM, Kennedy PJ, Stanton C, Cryan JF, Dinan TG (2014) Minireview: gut microbiota: the neglected endocrine organ. Mol Endocrinol 28:1221–1238. [https://doi.org/10.1210/](https://doi.org/10.1210/me.2014-1108) [me.2014-1108](https://doi.org/10.1210/me.2014-1108)
- <span id="page-11-7"></span>Claud EC, Walker WA (2008) The intestinal microbiota and the microbiome. In: Polin RA and Neu J (eds), Gastroenterology and nutrition: neonatology questions and controversies*.* W.B. Saunders, pp 73–92
- <span id="page-11-2"></span>Cryan JF, O'Riordan KJ, Cowan CSM, Sandhu KV, Bastiaanssen TFS, Boehme M, Codagnone MG, Cussotto S, Fulling C, Golubeva AV, Guzzetta KE, Jaggar M, Long-Smith CM, Lyte JM, Martin JA, Molinero-Perez A, Moloney G, Morelli E, Morillas E, O'Connor R, Cruz-Pereira JS, Peterson VL, Rea K, Ritz NL, Sherwin E, Spichak S, Teichman EM, Wouw MVD, Ventura-Silva AP, Wallace-Fitzsimons SE, Hyland N, Clarke G, Dinan TG (2019) The microbiota-gut-brain axis. Physiol Rev 99:1877– 2013.<https://doi.org/10.1152/physrev.00018.2018>
- <span id="page-11-13"></span>Derrien M, Belzer C, Vos WMD (2017) *Akkermansia muciniphila* and its role in regulating host functions. Microb Pathog 106:171–181.<https://doi.org/10.1016/j.micpath.2016.02.005>
- <span id="page-11-14"></span>Dubourg G, Lagier JC, Armougom F, Robert C, Audoly G, Papazian L, Raoult D (2013) High-level colonisation of the human gut by *Verrucomicrobia* following broad-spectrum antibiotic treatment. Int J Antimicrob Agents 41:149–155. [https://doi.org/10.1016/j.](https://doi.org/10.1016/j.ijantimicag.2012.10.012) [ijantimicag.2012.10.012](https://doi.org/10.1016/j.ijantimicag.2012.10.012)
- <span id="page-11-9"></span>Freeman CD, Klutman NE, Lamp KC (1997) Metronidazole. a therapeutic review and update. Drugs 54:679–708. [https://doi.org/10.](https://doi.org/10.2165/00003495-199754050-00003) [2165/00003495-199754050-00003](https://doi.org/10.2165/00003495-199754050-00003)
- <span id="page-11-8"></span>Heijtz RD, Wang S, Anuar F, Qian Y, Björkholm B, Samuelsson A, Hibberd ML, Forssberg H, Pettersson S (2011) Normal gut microbiota modulates brain development and behavior. Proc Natl Acad Sci U S A 108:3047–3052. [https://doi.org/10.1073/](https://doi.org/10.1073/pnas.1010529108) [pnas.1010529108](https://doi.org/10.1073/pnas.1010529108)
- <span id="page-11-15"></span>Hemmings SMJ, Malan-Müller S, Heuvel LLVD, Demmitt BA, Stanislawski MA, Smith DG, Bohr AD, Stamper CE, Hyde ER, Morton JT, Marotz CA, Siebler PH, Braspenning M, Criekinge WV, Hoisington AJ, Brenner LA, Postolache TT, McQueen MB, Krauter KS, Knight R, Seedat S, Lowry CA (2017) The microbiome in posttraumatic stress disorder and trauma-exposed controls: an exploratory study. Psychosom Med 79:936–946. <https://doi.org/10.1097/psy.0000000000000512>
- <span id="page-11-1"></span>Kuti D, Winkler Z, Horváth K, Juhász B, Paholcsek M, Stágel A, Gulyás G, Czeglédi L, Ferenczi S, Kovács KJ (2020) Gastrointestinal (non-systemic) antibiotic rifaximin diferentially afects chronic stress-induced changes in colon microbiome and gut permeability without efect on behavior. Brain Behav Immun 84:218–228. <https://doi.org/10.1016/j.bbi.2019.12.004>
- <span id="page-11-6"></span>Lavelle A, Sokol H (2020) Gut microbiota-derived metabolites as key actors in infammatory bowel disease. Nat Rev Gastroenterol Hepatol 17:223–237. [https://doi.org/10.1038/](https://doi.org/10.1038/s41575-019-0258-z) [s41575-019-0258-z](https://doi.org/10.1038/s41575-019-0258-z)
- <span id="page-12-13"></span>Lee YS, Kim TY, Kim Y, Lee SH, Kim S, Kang SW, Yang JY, Baek IJ, Sung YH, Park YY, Hwang SW, O E, Kim KS, Liu S, Kamada N, Gao N, Kweon MN, (2018) Microbiota-derived lactate accelerates intestinal stem-cell-mediated epithelial development. Cell Host Microbe 24:833-846.e836. [https://doi.org/10.1016/j.chom.](https://doi.org/10.1016/j.chom.2018.11.002) [2018.11.002](https://doi.org/10.1016/j.chom.2018.11.002)
- <span id="page-12-3"></span>Li JG, Jia XY, Wang C, Wu CX, Qin XM (2019a) Altered gut metabolome contributes to depression-like behaviors in rats exposed to chronic unpredictable mild stress. Transl Psychiatry 9:40. [https://](https://doi.org/10.1038/s41398-019-0391-z) [doi.org/10.1038/s41398-019-0391-z](https://doi.org/10.1038/s41398-019-0391-z)
- <span id="page-12-15"></span>Li L, Chang L, Zhang X, Ning Z, Mayne J, Ye Y, Stintzi A, Liu J, Figeys D (2020) Berberine and its structural analogs have difering efects on functional profles of individual gut microbiomes. Gut Microbes 11:1348–1361. [https://doi.org/10.1080/19490976.](https://doi.org/10.1080/19490976.2020.1755413) [2020.1755413](https://doi.org/10.1080/19490976.2020.1755413)
- <span id="page-12-4"></span>Li N, Wang Q, Wang Y, Sun A, Lin Y, Jin Y, Li X (2019b) Fecal microbiota transplantation from chronic unpredictable mild stress mice donors afects anxiety-like and depression-like behavior in recipient mice via the gut microbiota-infammation-brain axis. Stress 22:592–602.<https://doi.org/10.1080/10253890.2019.1617267>
- <span id="page-12-16"></span>Liu HY, Yue J, Hu LN, Cheng LF, Wang XS, Wang XJ, Feng B (2018) Chronic minocycline treatment reduces the anxiety-like behaviors induced by repeated restraint stress through modulating neuroinfammation. Brain Res Bull 143:19–26. [https://doi.org/10.1016/j.](https://doi.org/10.1016/j.brainresbull.2018.08.015) [brainresbull.2018.08.015](https://doi.org/10.1016/j.brainresbull.2018.08.015)
- <span id="page-12-7"></span>Marin IA, Goertz JE, Ren T, Rich SS, Onengut-Gumuscu S, Farber E, Wu M, Overall CC, Kipnis J, Gaultier A (2017) Microbiota alteration is associated with the development of stress-induced despair behavior. Sci Rep 7:43859. <https://doi.org/10.1038/srep43859>
- <span id="page-12-9"></span>Nollet M, Guisquet AML, Belzung C (2013) Models of depression: unpredictable chronic mild stress in mice. Curr Protoc Pharmacol Chapter 5: Unit 5.65. [https://doi.org/10.1002/0471141755.ph056](https://doi.org/10.1002/0471141755.ph0565s61) [5s61](https://doi.org/10.1002/0471141755.ph0565s61)
- <span id="page-12-10"></span>Parks DH, Tyson GW, Hugenholtz P, Beiko RG (2014) STAMP: statistical analysis of taxonomic and functional profles. Bioinformatics 30:3123–3124. <https://doi.org/10.1093/bioinformatics/btu494>
- <span id="page-12-12"></span>Partrick KA, Rosenhauer AM, Auger J, Arnold AR, Ronczkowski NM, Jackson LM, Lord MN, Abdulla SM, Chassaing B, Huhman KL (2021) Ingestion of probiotic (*Lactobacillus helveticus* and *Bifdobacterium longum*) alters intestinal microbial structure and behavioral expression following social defeat stress. Sci Rep 11:3763.<https://doi.org/10.1038/s41598-021-83284-z>
- <span id="page-12-5"></span>Rooks MG, Garrett WS (2016) Gut microbiota, metabolites and host immunity. Nat Rev Immunol 16:341–352. [https://doi.org/10.1038/](https://doi.org/10.1038/nri.2016.42) [nri.2016.42](https://doi.org/10.1038/nri.2016.42)
- <span id="page-12-11"></span>Segata N, Izard J, Waldron L, Gevers D, Miropolsky L, Garrett WS, Huttenhower C (2011) Metagenomic biomarker discovery and explanation. Genome Biol 12:R60. [https://doi.org/10.1186/](https://doi.org/10.1186/gb-2011-12-6-r60) [gb-2011-12-6-r60](https://doi.org/10.1186/gb-2011-12-6-r60)
- <span id="page-12-2"></span>Siopi E, Chevalier G, Katsimpardi L, Saha S, Bigot M, Moigneu C, Eberl G, Lledo PM (2020) Changes in gut microbiota by chronic stress impair the efficacy of fluoxetine. Cell Rep 30:3682-3690. e3686.<https://doi.org/10.1016/j.celrep.2020.02.099>
- <span id="page-12-17"></span>Tenorio-Jiménez C, Martínez-Ramírez MJ, Castillo-Codes ID, Arraiza-Irigoyen C, Tercero-Lozano M, Camacho J, Chueca N, García F, Olza J, Plaza-Díaz J, Fontana L, Olivares M, Gil Á, Gómez-Llorente C (2019) *Lactobacillus reuteri* V3401 reduces infammatory biomarkers and modifes the gastrointestinal microbiome in adults with metabolic syndrome: the PROSIR study. Nutrients 11:1761. <https://doi.org/10.3390/nu11081761>
- <span id="page-12-0"></span>Wang Q, Duan YJ, Wang SP, Wang LT, Hou ZL, Cui YX, Hou J, Das R, Mao DQ, Luo Y (2020) Occurrence and distribution of clinical and veterinary antibiotics in the faeces of a Chinese population. J Hazard Mater 383:121129. [https://doi.org/10.1016/j.jhazmat.](https://doi.org/10.1016/j.jhazmat.2019.121129) [2019.121129](https://doi.org/10.1016/j.jhazmat.2019.121129)
- <span id="page-12-8"></span>Werk R, Schneider L (1988) Ciprofoxacin in combination with metronidazole. Infection 16:257–260. [https://doi.org/10.1007/bf016](https://doi.org/10.1007/bf01650774) [50774](https://doi.org/10.1007/bf01650774)
- <span id="page-12-1"></span>Yang Q, Luo L, Sun T, Yang L, Cheng LF, Wang Y, Liu QQ, Liu A, Liu HY, Zhao MG, Wu SX, Feng B (2020) Chronic minocycline treatment exerts antidepressant efect, inhibits neuroinfammation, and modulates gut microbiota in mice. Psychopharmacology 237:3201–3213. <https://doi.org/10.1007/s00213-020-05604-x>
- <span id="page-12-14"></span>Zhao S, Liu W, Wang J, Shi J, Sun Y, Wang W, Ning G, Liu R, Hong J (2017) *Akkermansia muciniphila* improves metabolic profles by reducing infammation in chow diet-fed mice. J Mol Endocrinol 58:1–14. <https://doi.org/10.1530/jme-16-0054>
- <span id="page-12-6"></span>Zhu B, Wang X, Li L (2010) Human gut microbiome: the second genome of human body. Protein Cell 1:718–725. [https://doi.org/](https://doi.org/10.1007/s13238-010-0093-z) [10.1007/s13238-010-0093-z](https://doi.org/10.1007/s13238-010-0093-z)

**Publisher's Note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional afliations.