

# The Gut Microbiome and Fecal Microbiota Transplantation (FMT) in Oncology: Harnessing Microbial Therapy for Cancer Treatment

## Introduction

The human gut microbiome, composed of trillions of microorganisms, plays a crucial role in maintaining health, including the modulation of immune functions, metabolic pathways and disease pathogenesis <sup>1–7</sup>. Over the past decade, the role of the gut microbiome in cancer has become a focus of intense research. Recent advances in cancer research have revealed that the gut microbiome significantly impacts the development, progression, and treatment responses in various cancers <sup>8–13</sup>. Emerging evidence suggests that manipulating the gut microbiome, particularly through fecal microbiota transplantation (FMT), holds promise as a novel therapeutic strategy in oncology. Fecal microbiota transplantation (FMT) is emerging as a promising treatment strategy to manipulate the gut microbiome, enhance cancer therapy, and mitigate side effects from chemotherapy and immunotherapy <sup>8–11,13</sup>. In this summary, we aim to synthesize the current understanding of the gut microbiome's involvement in cancer and the potential applications of FMT in oncology.

#### **Highlighted Findings:**

- **Gut Microbiome's Role in Cancer**: Dysbiosis in the gut microbiome plays a key role in cancer development and progression, particularly in colorectal cancer and melanoma, by promoting inflammation and immune evasion<sup>8,13</sup>.
- FMT Enhances Immunotherapy: FMT has shown potential for overcoming resistance to immune checkpoint inhibitors (ICIs), promoting immune cell infiltration within tumors and reducing immune-related adverse events. FMT helps restore the microbiome, enhancing immune responses and improving treatment efficacy 8,14–16.
- Mitigating Treatment Toxicity with FMT: FMT is a promising strategy for reducing chemotherapy and radiation-induced toxicity, such as gastrointestinal side effects. By restoring the gut microbiome, FMT helps protect the intestinal barrier, improving patient comfort and treatment adherence <sup>17,18</sup>.
- Restoring Microbial Balance and Mitigating Treatment Toxicity: FMT can restore gut
  microbiome diversity disrupted by cancer treatments, helping to reduce side effects (including
  toxicity), infections, and improve immune function, contributing to better recovery 8,14,19.
- Effectiveness and Future Directions: Early trials suggest FMT can improve treatment outcomes in immunotherapy-refractory cancer patients, though further large-scale research is needed<sup>9,11,17</sup>. For consistent results, standardized protocols for donor screening, treatment administration, and microbiome analysis are necessary. It is worth noting that across multiple studies, FMT has been shown to be well-tolerated with minimal adverse events in immunocompromised patients.



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#### The Role of Gut Microbiome in Cancer

## **Microbiome and Cancer Development**

Research indicates that dysbiosis, or an imbalance in the gut microbiota, can contribute to cancer development and the progression of several cancers. A growing body of evidence points to specific microbial species being involved in carcinogenesis and promoting tumor growth by modulating immune responses and inflammation 8,10,12,14.

The microbiome's role is not limited to gastrointestinal cancers; emerging evidence also implicates microbial dysbiosis in the development of breast cancer, liver cancer, and even melanoma <sup>12–15,19</sup>. This broader impact is attributed to the gut microbiome's ability to influence systemic immune responses, thereby affecting tumor progression in distant sites. In cancer, gut dysbiosis can contribute to carcinogenesis by promoting chronic inflammation, DNA damage, and altering immune responses that facilitate tumor progression <sup>8,20–22</sup>. Furthermore, the presence of certain bacteria may influence the tumor microenvironment (TME), which is essential for cancer cell survival and metastasis <sup>8,12,14,21,23</sup>.

## **Microbiome and Cancer Treatment Response**

The gut microbiome not only plays a role in cancer initiation but also significantly influences treatment outcomes, especially in the context of immunotherapy and chemotherapy (8). A healthy, diverse microbiome is associated with improved responses to immune checkpoint inhibitors (ICIs), such as anti-PD-1 therapies and CTLA-4 inhibitors, which are widely used in cancer treatment 9-12,14,16,24-26. Studies have shown that patients with a healthy, diverse gut microbiome respond better to these treatments compared to those with microbiome dysbiosis 8,9,11,14,16,27.

On the other hand, chemotherapy and antibiotics can disrupt the microbiome, leading to reduced efficacy of treatments <sup>14,19,24,26</sup>. Research has shown that a healthy gut microbiome can help activate immune cells, enhance cytokine production, and improve anti-tumor responses <sup>14,23,28</sup>. This connection suggests that manipulating the gut microbiome could be a valuable strategy to enhance cancer treatment efficacy.

The gut microbiome also plays a role in modulating the metabolism of chemotherapy agents, which highlights the microbiome's role in modulating chemotherapy efficacy and its potential impact on Gastrointestinal toxicity, one of the most common complications of anti-cancer therapies 8,18,24,29,30.

## **Fecal Microbiota Transplantation (FMT) in Cancer Treatment**

#### **Mechanism of FMT**

Fecal microbiota transplantation (FMT) involves transferring gut microbiota from a healthy donor to a recipient to restore microbial diversity and balance. The transplant introduces a diverse community of microorganisms, which can help immune function, restore microbial diversity, and potentially reverse treatment resistance <sup>8</sup>. In oncology, FMT is being explored as a therapeutic option to modulate the gut microbiome, improve treatment efficacy, and reduce therapy-related complications <sup>11,14,18</sup>.

## FMT's impact in oncology is thought to be mediated through:



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- **Immune Modulation:** FMT restores immune homeostasis by increasing beneficial microbes that enhance anti-tumor immunity <sup>9,13,17,18,26</sup>.
- **Correction of Dysbiosis:** Cancer patients often exhibit dysbiosis due to the disease or treatment side effects. FMT restores microbial diversity, potentially reversing negative effects on the host immune response, metabolism and treatment response 8,13,16,19,29,30.
- **Metabolic Rebalancing:** Gut microbiota-derived metabolites, including short-chain fatty acids (SCFAs), play a critical role in regulating inflammation and epithelial integrity, creating a microenvironment less conducive to tumor progression <sup>17,19,31,32</sup>.

#### **Effectiveness of FMT in Cancer Treatment**

The effectiveness and optimal protocol for FMT in cancer treatment are still being evaluated in clinical trials, but early results are promising. FMT has demonstrated the ability to enhance immune responses to cancer therapies, improve clinical outcomes in immunotherapy-refractory patients, and reduce treatment-related toxicity <sup>9,14,15,33</sup>. However, the success of FMT can be influenced by several factors, including the patient's baseline microbiome, the quality of the donor material, and the type of cancer being treated <sup>11,17,24</sup>.

While FMT has shown positive results in small trials and preclinical studies, larger and more rigorous clinical trials are needed to fully understand its potential and limitations in oncology <sup>8</sup>. Across multiple studies, FMT has demonstrated a robust safety profile, with minimal adverse events, even in immunocompromised patients. Minor side effects have been reported to be transient and self-limiting. Standardized protocols for donor screening, microbiome analysis, and treatment administration are necessary to ensure consistent and reproducible outcomes.

#### **Applications of FMT in Cancer Treatment**

## • Enhancing Immunotherapy Response:

Responses to immune checkpoint inhibitors (ICIs) are often suboptimal in many patients. FMT has shown great promise in enhancing the effectiveness of immunotherapy. FMT has been shown to overcome resistance to immune checkpoint inhibitors (ICIs), particularly in cancers like melanoma and colorectal cancer, by modulating the gut microbiome, thus enhancing immune responses, with studies reporting improvements in progression-free survival and overall survival 8-12,14-17,34. In clinical trials, FMT from donors who had previously responded to anti-PD-1 therapies resulted in tumor regression in melanoma patients who were refractory to ICIs 9,12,14. The suggested mechanism behind the success of FMT includes an enhanced immune response, such as increased CD8+ T cell infiltration in tumors and improved activation of the tumor microenvironment 14,15,33. Furthermore, it is suggested that FMT can modulate the immune system, reducing immune-related adverse events (irAEs) associated with immunotherapy, such as colitis and skin rashes 9,10.

#### Restoring Gut Microbiome Balance and Reducing Toxicity and Side Effects:

Chemotherapy and radiation therapy often disrupt the gut microbiome, leading to side effects such as nausea, diarrhea, and mucositis. This imbalance not only affects gastrointestinal health but also impairs immune function, increasing the risk of infections and complicating treatment <sup>14,17,18,18,24,35</sup>. By restoring microbial balance, FMT can help alleviate these adverse effects, improve immune responses, and potentially enhance the effectiveness of concurrent cancer therapies while improving patient comfort and reducing side effects, increasing treatment adherence <sup>11,18,19,24,26</sup>. Studies have also found that FMT can help overcome resistance to some chemotherapy agents by reintroducing beneficial microbial populations that enhance the efficacy of these drugs, restoring the microbiome's ability to activate these drugs <sup>21,24,33</sup>.



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FMT has also demonstrated efficacy in alleviating gastrointestinal toxicities, such as diarrhea and mucositis, caused by chemotherapy and radiotherapy by enhancing their metabolism through a restored microbiome, which could lead to better therapeutic outcomes <sup>18,21</sup>. Furthermore, FMT may enhance the body's ability to recover from treatment-induced damage to the intestinal lining, potentially reducing the need for prolonged use of supportive therapies <sup>8,14,16,36</sup>. By re-establishing microbial diversity, FMT may help protect against chemotherapy-induced toxicity and improve the patient's overall guality of life<sup>21,24</sup>.

## • Reducing and managing of Graft-Versus-Host Disease

Graft-versus-host disease (GVHD) is a common and serious complication following hematopoietic cell transplantation (HCT) and occurs when the donor's immune cells attack the recipient's tissue, leading to inflammation and potential tissue damage. Gut dysbiosis is often observed in patients with GVHD, contributing to an imbalance in immune function that exacerbates the disease. FMT has emerged as a promising strategy to prevent and manage GVHD by helping to restore a diverse and functional microbiome, which may reduce inflammation, improve immune tolerance, and support the gastrointestinal tract's epithelial barrier function <sup>13,18,19</sup>. FMT has mainly been tested in acute GVHD, with early clinical trials and case reports showing improvements in GVHD symptoms, including reduced inflammation and better clinical outcomes, particularly in steroid-resistant cases with reduced hospital times and, in some cases, complete resolution of symptoms <sup>13,19,37–41</sup>. In chronic GVHD, FMT may help by potentially reducing ongoing inflammation and tissue damage, as well as prevent secondary complications of GVHD, such as infections, by rebalancing the gut microbiome and improving overall immune system function <sup>18</sup>.

## **Challenges and Future Directions**

Despite the promising results, several challenges remain in the clinical use of FMT in oncology. The lack of standardized protocols for FMT administration, donor selection, and microbiome analysis limits its widespread application. Additionally, long-term safety data are still needed to assess the potential risks of FMT in cancer patients.

Future studies should focus on:

- Standardizing FMT protocols and donor microbiome screening
- Identifying which cancer patients will benefit most from FMT
- Investigating the long-term safety and efficacy of FMT in cancer treatment
- Expanding research into the use of FMT in various cancer types beyond melanoma and colorectal cancer

By addressing these challenges, FMT could become a cornerstone of cancer treatment, particularly for overcoming immunotherapy resistance, improving treatment efficacy, and reducing adverse treatment effects.

#### Conclusion

The gut microbiome plays a critical role in cancer development, progression, and treatment outcomes. Fecal microbiota transplantation offers a novel and promising therapeutic approach to modulate the microbiome, enhance immunotherapy efficacy, and reduce treatment-related side effects. While FMT has shown positive results in preclinical and early clinical studies, further research is necessary to refine protocols, optimize safety, improve donor selection, and explore its potential in a broader range of cancers. As clinical evidence continues to grow, FMT may become a key therapeutic tool in



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oncology, helping to optimize cancer treatment responses and improve patient quality of life, possibly becoming an integral component of personalized cancer care.

# Ready to Explore the Potential of FMT in Oncology?

Let's discuss how FMT can integrate into your clinical protocols, collaborate on impactful case studies, or support your patients' outcomes. Novel Biome offers high-quality FMT products designed to support clinical and research applications. If you're interested in exploring how our products can enhance cancer treatments or improve patient outcomes, let's connect!

<u>Schedule a Call Today</u> or email us at <u>support@novelbiome.com</u> to explore research insights and practical applications in your practice.

References: 1. Belkaid, Y. & Hand, T. W. 2014, 2. Choi, H. H. & Cho, Y.-S. 2016, 3. Hooper, L. V., Littman, D. R. & Macpherson, A. J. 2012, 4. Lloyd-Price, J., Abu-Ali, G. & Huttenhower, C. 2016, 5. Perez-Muñoz, M. E. et al. 2017, 6. Sommer, F. & Bäckhed, F. 2013, 7. Wilson, B. C. et al. 2019, 8. Chen, D. et al. 2019, 9. Elkrief, A. & Routy, B. 2021, 10. Park, R., Umar, S. & Kasi, A. 2020, 11. Porcari, S. et al. 2023, 12. Zhang, J. et al. 2022, 13. Zhang, X. et al. 2023, 14. Baruch, E. N. et al. 2021, 15. Davar, D. et al. 2021, 16. Van Dingenen, L. et al. 2023, 17. Brusnic, O. et al. 2024, 18. Wardill, H. R. et al. 2019, 19. Habibi, S. & Rashidi, A. 2023, 20. Lam, S. Y. et al. 2017, 21. Woelk, C. H. & Snyder, A. 2021, 22. Yu, L.-X. & Schwabe, R. F. 2017, 23. Qiu, Q. et al. 2021, 24. Ali, H. et al. 2021, 25. Gopalakrishnan, V. et al. 2018, 26. Ninkov, M. et al. 2023, 27. Viaud, S. et al. 2013, 28. Chaput, N. et al. 2017, 29. Secombe, K. R. et al. 2019, 30. Wardill, H. R. & Tissing, W. J. E. 2017, 31. Ahmad Kendong, S. M. et al. 2021, 32. Pandey, H et al. 2023, 33. Zhao, W. et al. 2023, 34. Peng, Z. et al. 2023, 35. Tanaka, Y. et al. 2021, 36. Ding, S. et al. 2020, 37. Ghani, R. et al. 2021, 38. Innes, A. J. et al. 2021, 39. Kaito, S. et al. 2018, 40. Kakihana, K. et al. 2016, 41. Van Lier, Y. F. et al. 2020.