学位論文 博士(生命医科学)甲

Relationships between barley consumption and gut microbiome characteristics in a healthy Japanese population: a cross-sectional study

(健康な日本人集団における大麦摂取と腸内細菌叢の関係:横断調査)

松岡 翼

山梨大学

Relationships between barley consumption and gut microbiome characteristics in a healthy Japanese population: a cross-sectional study

Tsubasa Matsuoka ^{1, 2, 3*}, Koji Hosomi ³, Jonguk Park ⁴, Yuka Goto ^{1, 3}, Mao Nishimura ^{1, 3}, Satoko Nakashima ^{1, 3}, Haruka Murakami ⁵, Kana Konishi ⁵, Motohiko Miyachi ⁵, Hitoshi Kawashima ⁴, Kenji Mizuguchi ^{4, 6}, Toshiki Kobayashi ¹, Hiroshi Yokomichi ², Jun Kunisawa ^{3, 7, *}, Zentaro Yamagata ^{2, *}

- 1 Research and Development Department, Hakubaku Co., Ltd., 4629, Nishihanawa, Chuo, Yamanashi 409-3843, Japan
- Department of Health Sciences, School of Medicine, University of Yamanashi, 1110, Shimokato,
 Chuo, Yamanashi 409-3898, Japan
- Laboratory of Vaccine Materials, Center for Vaccine and Adjuvant Research, National Institutes of Biomedical Innovation, Health and Nutrition, 7-6-8 Asagi, Saito, Ibaraki, Osaka 567-0085, Japan
- 4 Laboratory of Bioinformatics, National Institutes of Biomedical Innovation, National Institutes of Biomedical Innovation, Health and Nutrition, 7-6-8 Asagi, Saito, Ibaraki, Osaka 567-0085, Japan
- 5 Department of Physical Activity Research, National Institutes of Biomedical Innovation, Health and Nutrition, 1-23-1 Toyama, Shinjuku, Tokyo 162-8636, Japan
- 6 Institute for Protein Research, Osaka University, Osaka, Japan
- 7 Department of Microbiology and Immunology, Kobe University, Hyogo, Japan; Graduate Schools of Medicine, Pharmaceutical Sciences, and Dentistry, Osaka University, Osaka, Japan;

Department of Microbiology and Immunology and International Research and Development Center for Mucosal Vaccines, The University of Tokyo, Tokyo, Japan; Faculty of Science and Engineering, Waseda University, Tokyo, Japan

* Corresponding Author

Tsubasa Matsuoka:

Mailing address: 4629, Nishihanawa, Chuo, Yamanashi 409-3843, Japan

E-mail: matsuoka.tsubasa@hakubaku.co.jp

Tel.: +81-50-3162-6932

Fax.: +81-55-274-5467

目次

Abstract	1
Abbreviations	2
Background	3
Methods	4
Study design	4
Measurements	5
DNA extraction and 16S rRNA gene amplicon sequencing	5
Bioinformatics analysis	6
Statistical analyses	7
Results	8
Participants	8
Enterotypes	12
Microbiome	13
Multiple regression analyses of all the participants	14
Network analysis of microbiome	15
Discussion	15
Declarations	
Ethics approval and consent to participate	
Consent for publication	
Availability of data and materials	19
Competing interests	19
Funding	19
Authors' contributions	19
Acknowledgements	19
References	20
Supplementary data	

Abstract

Background: Barley contains abundant soluble β -glucan fibers, which have established health benefits. In addition, the health benefits conferred by the gut microbiota have attracted considerable interest. However, few studies have focused on the barley intake and microbiota of the Japanese population. In this study, we aimed to identify the relationship between the barley consumption and gut microbiota composition of the Japanese population.

Methods: A total of 236 participants were recruited in Japan, and 94 participants with no complications of diabetes, hypertension, or dyslipidemia were selected for the study. We analyzed fecal samples from the participants, their medical check-up results, and responses to questionnaires about dietary habits. The participants were grouped according to their median barley intake. Then, we assessed the relative abundance of 50 microbial genera. Characteristic bacteria were evaluated for their relationship with barley by multiple regression analysis, adjusted for disease and dietary habits in all participants. We also analyzed the networks and clustering of the 20 selected genera.

Results: According to the comparison between the barley groups, *Bifidobacterium*, *Butyricicoccus*, *Collinsella*, *Ruminococcus* 2, and *Dialister* were characteristic candidate microbiota of the group that consumed large amounts of barley (P < 0.05). The relationship between barley and *Bifidobacterium* remained after adjusting for disease and dietary habits, and *Butyricicoccus* remained after adjusting for disease and cluster analyses revealed that barley consumption was directly correlated with *Bifidobacterium* and *Butyricicoccus*.

Conclusions: Barley consumption generates changes in the intestinal microbiota of the Japanese population. We found that *Bifidobacterium* and *Butyricicoccus* abundance was positively associated with barley consumption.

Keywords: barley; beta-glucan; microbiome; Bifidobacterium; Butyricicoccus

Abbreviations

VIF: Variance inflation factor

PCoA: Principal coordinate analysis

FDA: False discovery rate

SCFA: Short-chain fatty acid

Background

The gut microbiota is important for health, and thus, several investigations have focused on the human gut microbiome. It has been reported that diet can alter the gut microbiome [1]. Microbiota-accessible carbohydrates, such as dietary fiber [2], are resistant to digestion in the small intestine and enter the large intestine undigested; therefore, they are likely to improve host metabolism [2].

Barley is an important cereal that contains the soluble fiber β -glucan [3]. Barley improves metabolic dysfunction, increases the diversity of the gut microbiota, and increases bacteria such as *Blautia* [4]. Additionally, barley lowers postprandial blood glucose in healthy [3] and diabetic patients [5] and lowers cholesterol concentrations in Japanese people with mild metabolic syndrome after 12 weeks of consumption [6]. Therefore, barley consumption has many potential benefits to global health.

Barley consumption affects the gut microbiota and host health [7, 8]. For example, a crossover study in Sweden found that barley intake increased blood concentrations of butyric acid (produced by intestinal bacteria) and decreased postprandial hyperglycemia [7]. Research in the USA found that barley intake increased the gut microbiota diversity and *Blautia* abundance and improved host cholesterol levels [4]. Another Swedish study found that barley intake promoted a high ratio of *Prevotella/Bacteroides* and improved host blood glucose metabolism [4]. These results suggest that barley might beneficially modulate the composition of the gut microbiota and improve host metabolic health.

Indeed, the effects of barley on the gut microbiota have been established in several countries [4, 7, 8]. Furthermore, as the intestinal microbiota is affected by dietary habits and genetic factors, it is important to evaluate its effectiveness in different populations [9]. The Japanese gut microbiota is characterized by abundant *Blautia* and *Bifidobacterium*, which utilize the dietary fiber from seaweed, a common item in the Japanese diet [1]. Consuming barley with white rice is also a specific dietary habit

in Japan, but little is known about its effects on the microbiota. Most studies on barley and the microbiota have regarded exhaled hydrogen concentrations as an alternative measurement of intestinal bacteria [7, 10, 11]; however, few studies have analyzed the relationship between the microbiota and barley consumption. Therefore, we aimed to define the relationship between barley and gut microbiota composition in healthy Japanese adults using next-generation sequencing.

Methods

Study design

The study was approved by the Yamanashi University Ethics Committee (approval No. 1824), the National Institutes of Biomedical Innovation, Health and Nutrition Ethics Committee (approval No. 169-04), and the Chiyoda Paramedical Care Clinic Ethics Committee (approval No. 15000088). This study was conducted in accordance with the Declaration of Helsinki (2013) and was based on a registered study (UMIN000033479). Cross-sectional data were evaluated from the first year of the study to undertake an exploratory overview of the gut microbiome of a population that consumes barley. Sampling was conducted from August 2018 to March 2019.

We enrolled 272 participants, which were employees of the barley processing company Hakubaku Co., Ltd. Our target sample included at least 100 participants. We excluded those with disorders (Risk 2) and pre-disorders (Risk 1) of diabetes, hypertension, and dyslipidemia from the main analysis. Details of the exclusion criteria for disorders are shown in **Table S1** (see Additional file 1). We classified the participants into two groups based on the median barley consumption rate (high, 32.3–253 and low, 0–31.8 g/1000 kcal·d.

Measurements

The primary outcome was the association between barley consumption and the alpha-diversity of the microbiome, and the secondary outcome was the abundance of the 50 dominant microbiota sorted by mean relative abundance (**Tables S4 and S5**, see Additional file 1). We collected a copy of the participants' medical check-up results. Dietary habits other than barley consumption were assessed using a brief self-administered diet history questionnaire (BDHQ) (Gender Medical Research, Inc., Tokyo, Japan). Barley consumption (g/1000 kcal·d) was calculated using a questionnaire and the daily energy value from the BDHQ. Rice bowl size (200, 160, 140, and 100 g), proportion of barley mixed with white rice (0%, 5%, 10%, 15%, 30%, and 50%), barley-mixed rice consumed per month (0, 0.5, 1, 4, 8, and 16 days/month), and barley consumption rate (g/d) were determined. Medical history, including medication (especially during the month of sampling), and consumption of fermented foods and supplements were determined using questionnaires.

DNA extraction and 16S rRNA gene amplicon sequencing

Fecal samples were collected at home with guanidine thiocyanate (GuSCN) solution, and DNA was extracted and stored at 10–30 °C for up to 30 d [12]. Briefly, 0.2 mL of fecal samples, 0.3 mL of No. 10 lysis buffer (Kurabo Industries Ltd., Osaka, Japan), and 0.5 g of 0.1-mm glass beads (WakenBtech Co., Ltd., Tokyo, Japan) were homogenized using a PS1000 Cell Destroyer (Bio Medical Science, Tokyo, Japan) at 4260 rpm for 50 s at 25 °C. The homogenate was centrifuged at 13 000 × g for 5 min at 25 °C, and the DNA was extracted from the supernatant using a Gene Prep Star PI-80X automated DNA isolation system (Kurabo Industries Ltd). DNA concentration was determined with the ND-1000 NanoDrop Spectrophotometer (Thermo Fisher Scientific Inc., Waltham, MA, USA). The samples were

stored at -30 °C. The 16S rRNA gene was amplified from fecal DNA and sequenced [12]. The V3–V4 region of the 16S rRNA gene was amplified using the following primers (5' \rightarrow 3'): TCGTCGGCAGCGTCAGATGTGTATAAGCGACAGCCTACGGGNGGCWGCAG and GTCTCGTGGGCTCGGAGATGTGTATAAGAGACAGGACTACHVGGGTATCTAATCC. The DNA library for Illumina MiSeq was prepared using Nextera XT Index Kit v2 Set A (Illumina Inc., San Diego, CA, USA), and its concentration was determined with the QuantiFluor dsDNA System (Promega Corp., Madison, WI, USA). The 16S rRNA gene was sequenced using Illumina MiSeq (Illumina) as described by the manufacturer.

Bioinformatics analysis

The sequence reads from Illumina MiSeq were analyzed using the Quantitative Insights Into Microbial Ecology (QIIME) software package (v1.9.1) [13]. We used QIIME Analysis Automating Script (Auto-q)⁽¹⁴⁾ to proceed from trimming paired-end reads to operational taxonomic unit (OTU) selection. We used open-reference OTU picked with the UCLUST software against the SILVA v128 reference sequence to select OTUs based on sequence similarity (>97%). The taxonomy (phylum, class, order, family, and genus) and relative abundance were calculated using the SILVA v128 database [13, 14]. The intestinal microbiota was compared in 10 000 randomly selected reads per sample.

Statistical analyses

Calculation of alpha-diversity

Data were exported as BIOM files and imported into R (version 3.6.0). Diversity was analyzed using the phyloseq R-package. Alpha-diversity indices of observed OTU, Chao 1, Shannon, and Simpson indices were calculated using the estimate_richness function.

Comparison of barley groups

To compare the results of the medical check-ups and dietary habits between the high and low barley groups, we used Student's *t*-tests. The alpha-diversity and relative abundance of each genus were analyzed using Mann–Whitney *U*-tests. *P* values were adjusted using false discovery rate (FDR) methods. To confirm the reliability of the analyses, we explored the relationship between barley consumption groups (0 = low and 1 = high) and each microbiome using multiple regression analyses with all participants. We expressly set the amounts of *Bifidobacterium*, *Butyricicoccus*, *Collinsella*, *Ruminococcus* 2, and *Dialister* as outcomes. We adjusted the model for age, sex, risk of diabetes, dyslipidemia, and hypertension for model 1. In addition to model 1, we adjusted the model for consumption rate (g/1000 kcal) of cereals, sugar and sweetener, legumes, and beverages for model 2 and for cereals, sugar and sweetener, legumes, beverages, green vegetables, other vegetables, fish, and confectionery for model 3. We used the vif function of the car R-package to evaluate variance inflation factors (VIFs). All VIFs were < 5 and considered acceptable for these analyses [15].

Principal coordinate analysis of microbiomes

We classified the participants into enterotypes A, B, and C using the pam function of the cluster R-package. We then summarized the composition of intestinal microbiota by principal coordinate analysis (PCoA) using the vegdist function of the vegan R-package and the quasieuclid and dudi.pco

functions of the ade4 R-package. Data were calculated using the Bray–Curtis method. Subsequently, the environmental factor arrows were fit to the PCoA figure using the envfit function of the vegan R-package. Significant genera were assessed using permutations of environmental variables.

Network analysis of significant microbiomes and barley

To visualize the associations between barley and 20 microbiome genera selected by P < 0.1, we implemented a network analysis (Table S4 and S5, see Additional file 1). The network is shown with lines of correlation with |r| > 0.15 (Kendall rank-sum tests). Different colors on the plots indicate different community groups. We fit the correlation data frame to the cc.df function of the igraph R-package using the reshape2 R-package and calculated microbiota community groups using the leading.eigenvector.community function.

All analyses were carried out in R (version 3.6.0), and tests were two-sided; P < 0.05 was considered significant. All graphs except for those from the network analysis were created with the R-package ggplot2 [16].

Results

Participants

We obtained informed consent from 272 individuals, of which 33 participants resigned, and six were excluded because of non-compliance and data loss. Ninety-four participants had no disorders and were included in the main analyses, and 236 were included in the multiple regression analyses (**Figure 1**). Additionally, the numbers of participants who consumed antibiotic drugs, laxative drugs, and drugs

9

or supplements for controlling intestinal function (prebiotics and probiotics) were 4, 6, and 10, respectively, out of 236 participants. We included these participants in the analyses.

The characteristics of the barley groups did not significantly differ (**Table 1**). However, fasting glucose concentrations tended to be higher in the high barley group (P = 0.054). Disorder risk did not significantly differ between the groups (Table S1, see Additional file 1). **Table 2** and **Table S2** (see Additional file 1) show the differences in dietary habits between the barley groups. The barley intake was 13.9 ± 11.3 g/1000 kcal and 70.9 ± 43.6 g/1000 kcal in the low and high barley groups, respectively. The consumption rates of dietary fiber (P < 0.001), cereals (P = 0.048), sugar and sweetener, and beverages were significantly different between the barley groups, and those of legumes (P = 0.056) tended to be higher in the high barley group. Therefore, we selected these four dietary categories for adjustment in the multiple regression analyses (model 2). Additionally, green leafy vegetables, carrot, and pumpkin in the green vegetable category, boiled fish in the fish category, and Japanese confectionery and ice cream in the confectionery category had a significant or slight difference between the barley groups. Also, seaweed and mushroom, which are known to contain soluble fiber, were in the "other vegetable" category. Therefore, we added these four variables to model 2 and conducted multiple regression analyses (model 3).



Figure 1 Flow chart of participants. Disorder means risk of diabetes, hypertension, and dyslipidemia.

		Low barley ¹	High barley ¹	
	Total ($n = 94$)	(<i>n</i> = 47)	(<i>n</i> = 47)	
T 7 ' 11	0–253	0–31.8	32.3–253	D 2
variable	g/1000 kcal d	g/1000 kcal·d	g/1000 kcal·d	P -
Male, <i>n</i> (%)	54 (57%)	32 (68%)	22 (47%)	
Age (years)	36 ± 10	36 ± 10	36 ± 11	0.82
Body mass index (kg/m ²)	21.5 ± 3.4	21.3 ± 4.1	21.6 ± 2.5	0.67
Systolic pressure (mmHg)	111 ± 11	110 ± 11	112 ± 11	0.25
Diastolic pressure (mmHg)	68 ± 9	67 ± 9	69 ± 8	0.39
Fasting glucose (mg/dL)	86 ± 7	84 ± 7	87 ± 7	0.054
HbA1c (%)	5.3 ± 0.2	5.3 ± 0.2	5.3 ± 0.2	0.26
TG (mg/dL)	69 ± 28	67 ± 30	71 ± 26	0.42
HDL-cholesterol (mg/dL)	65 ± 13	66 ± 13	63 ± 12	0.26
LDL-cholesterol (mg/dL)	95 ± 15	93 ± 14	97 ± 16	0.15

Table 1 Characteristics of the participants in the barley groups

Data are shown as means \pm SD or n (%). ¹Range of barley consumption.

²Student's *t*-test

Low barley $(n = 47)$	High barley $(n = 47)$	
0–31.8 g/1000 kcal·d ¹	32.3–253 g/1000 kcal·d ¹	P ²
1693 ± 456	1765 ± 562	0.50
35 ± 6	34 ± 6	0.58
30 ± 6	30 ± 6	0.85
130 ± 20	129 ± 18	0.75
4.9 ± 1.3	6.1 ±1.7	< 0.001
3608 ± 948	3871 ± 1094	0.22
13.9 ± 11.3	70.9 ± 43.6	< 0.001
213 ± 55	236 ± 58	0.048
20 ± 15	27 ± 20	0.06
37 ± 23	44 ± 32	0.2537
62 ± 29	72 ± 45	0.2001
36 ± 32	35 ± 30	0.87
32 ± 15	31 ±16	0.74
3.9 ± 3.7	2.4 ± 2.4	0.03
26 ± 20	25 ± 17	0.81
439 ± 271	335 ± 226	0.047
	$\begin{array}{c} 1600 \text{ balley } (n=17) \\ 0-31.8 \text{ g}/1000 \text{ kcal} \cdot \text{d}^1 \\ \hline 1693 \pm 456 \\ 35 \pm 6 \\ 30 \pm 6 \\ 130 \pm 20 \\ 4.9 \pm 1.3 \\ 3608 \pm 948 \\ \hline 13.9 \pm 11.3 \\ 213 \pm 55 \\ 20 \pm 15 \\ 37 \pm 23 \\ 62 \pm 29 \\ 36 \pm 32 \\ 32 \pm 15 \\ 3.9 \pm 3.7 \\ 26 \pm 20 \\ 439 \pm 271 \\ \hline \end{array}$	1600 barley (0 = 10)11gin barley (0 = 10) $0-31.8 \text{ g}/1000 \text{ kcal} \cdot d^1$ $32.3-253 \text{ g}/1000 \text{ kcal} \cdot d^1$ 1693 ± 456 1765 ± 562 35 ± 6 34 ± 6 30 ± 6 30 ± 6 130 ± 20 129 ± 18 4.9 ± 1.3 6.1 ± 1.7 3608 ± 948 3871 ± 1094 13.9 ± 11.3 70.9 ± 43.6 213 ± 55 236 ± 58 20 ± 15 27 ± 20 37 ± 23 44 ± 32 62 ± 29 72 ± 45 36 ± 32 35 ± 30 32 ± 15 31 ± 16 3.9 ± 3.7 2.4 ± 2.4 26 ± 20 25 ± 17 439 ± 271 335 ± 226

Table 2 Comparison of diet between the barley groups

Data are shown as means \pm SD.

¹Range of barley consumption.

² Student's *t*-test

Enterotypes

Figure 2a describes the number of participants with each enterotype. Enterotype B was dominant and enterotypes A and C were less abundant in each group. The numbers of each enterotype did not significantly differ between the groups (P = 0.20). Figure 2b shows an overview of the PCoA of the microbiome. The distribution of the plots was laid out in a " \land " shape and separated into three groups. Clusters A and B were distributed in the negative direction of PCoA1 and cluster C in the positive direction. Clusters A and B were divided by PCoA2, and cluster B was in an intermediate position between A and C. The driven genera in each enterotype were *Bacteroides* (A), *Blautia* (B), and *Prevotella* 9 (C) (correlation coefficients; all P < 0.001). The most common enterotypes of the 94 participants were in the following order: B (60%), A (28%), and C (13%). The distribution of enterotypes was similar between the barley groups (B > A > C) and tended to be in the positive direction of PCoA2 in the high barley group, but the values were not significant (correlation coefficient, P = 0.08, **Figure S1**, see Additional file 1).



Figure 2 Microbiome enterotypes in high and low barley groups (n = 94) aged 19–65 years in 2018. (a) Comparison of numbers of enterotypes A, B, or C in each group. (b) Plot of PCoA. Color indicates enterotype; symbols indicate high or low barley consumption. Arrows indicate the top three environmental factors.

Microbiome

Alpha-diversity did not significantly differ between the barley groups (**Table S3**, see Additional file 1). The high barley group had a higher abundance of *Bifidobacterium* (P = 0.01), *Collinsella* (P = 0.03), *Butyricicoccus* (P = 0.002), *Dialister* (P = 0.04), and *Ruminococcus 2* (P = 0.04) without FDR adjustment (**Table 3**, Table S4, see Additional file 1). *Subdoligranulum* (P = 0.08), *Anaerostipes* (P = 0.0502), *Acidaminococcus* (P = 0.07), and Ruminococcaceae UCG-013 (P = 0.06) tended to be high in the high barley group. Therefore, we selected *Bifidobacterium*, *Collinsella*, *Butyricicoccus*, *Dialister*, and *Ruminococcus 2* as candidate characteristic genera associated with barley consumption.

Tuble & Relative abundance (70) of interobionic bacterial genera in low and much barley groups								
	Low barley $(n = 47)$	High barley $(n = 47)$						
	0-31.8 g/1000 kcal·d 1	32.3-253 g/1000 kcal·d 1						
Genus	Median	Median	P^2	P^{3}				
(relative abundance %)	(interquartile range)	(interquartile range)	(crude)	(FDR)				
Bifidobacterium	2.73 (0.00, 5.10)	5.61 (0.00, 8.12)	0.01	0.37				
Collinsella	0.92 (0.00, 1.82)	1.95 (0.00, 2.20)	0.03	0.42				
Subdoligranulum	1.12 (0.00, 1.80)	1.83 (0.00, 2.32)	0.08	0.44				
Anaerostipes	0.89 (0.02, 1.28)	1.06 (0.07, 1.92)	0.0502	0.42				

Table 3 Relative abundance (%) of microbiome bacterial genera in low and high barley groups

Butyricicoccus	0.43 (0.00, 0.46)	0.65 (0.12, 0.65)	0.002	0.09
Ruminococcaceae UCG-013	0.09 (0.00, 0.27)	0.22 (0.00, 0.34)	0.06	0.44
Dialister	0.00 (0.00, 0.31)	0.07 (0.00, 0.43)	0.04	0.42
Acidaminococcus	0.00 (0.00, 0.30)	0.03 (0.00, 0.66)	0.07	0.44
Ruminococcus 2	0.00 (0.00, 0.37)	0.01 (0.00, 0.86)	0.04	0.42

¹Range of barley consumption rate

² Mann–Whitney *U*-test (crude *P* value)

³ Mann–Whitney *U*-test adjusted with FDR (false discovery rate) method

Multiple regression analyses of all the participants

We assessed associations between barley and *Bifidobacterium*, *Butyricicoccus*, *Collinsella*, *Dialister*, and *Ruminococcus 2* using multiple regression analyses (**Table 4**, **Table S6**, see Additional file 1). The results of model 1 and 2 are shown in Table 4, and the results of model 1–3 are shown in Table S6 (see Additional file 1) with detailed data. *Bifidobacterium* had a consistent relationship with barley, and *Butyricicoccus* had a relation in model 1. Other bacteria had no significant relationship with barley.

Table 4 Association between the intestinal bacteria and barley intake¹ by multivariate linear regression analyses.

	Crude ²		Model 1 ³		Model 2 ⁴	
Genus	r (SE)	Р	R (SE)	Р	R (SE)	Р
Bifidobacterium	2.52 (0.70)	0.012	2.52 (1.00)	0.012	2.61 (1.03)	0.012
Butyricicoccus	0.11 (0.05)	0.03	0.11 (0.05)	0.03	0.08 (0.05)	0.102
Collinsella	0.23 (0.30)	0.45	0.27 (0.30)	0.38	0.26 (0.31)	0.41
Dialister	0.08 (0.09)	0.37	0.10 (0.09)	0.24	0.08 (0.09)	0.41
Ruminococcus 2	0.10 (0.15)	0.47	0.10 (0.15)	0.53	0.11 (0.16)	0.48

¹The barley intake group 0: low barley group (0–32.3 g/1000 kcal), 1: high barley group (32.9–253 g/1000 kcal)

²Crude [r (SE)]: Coefficients of a single linear regression model.

³Model 1 [R (SE)]: Adjusted with sex, age, risk of diabetes, dyslipidemia, and hypertension.

⁴Model 2 [R (SE)]: In addition to model 1, adjusted with an intake of cereal, sugar and sweetener, legume, and beverage.

Network analysis of microbiome

Figure S2 (see Additional file 1) shows the results of the network analysis. *Bifidobacterium*, *Butyricicoccus*, *Ruminococcus* 2, Ruminococcaceae *UCG-013*, *Lachnospira*, and *Tyzzerella 3* were directly associated with barley intake, and except for *Ruminococcus* 2, they were classified in the same community group. *Anaerostipes* was not directly associated with barley intake but was associated via *Lachnospira*, Ruminococcaceae *UCG-13*, or *Tyzzerella 3* to barley intake. In addition, *Anaerostipes* belonged to the same community as barley, *Butyricicoccus*, and *Bifidobacterium*. *Ruminococcus* 2 was directly associated with barley but did not belong to the same community group as barley, *Butyricicoccus*, *Bifidobacterium*, and *Anaerostipes*. Finally, *Dialister* and *Collinsella* seemed to have no relation with barley because they were positioned far from barley and classified in different groups.

Discussion

We identified the characteristics of the gut microbiota in a Japanese population that consumes barley. Previous studies reported that the soluble fiber in barley increases the prevalence of intestinal bacteria, such as *Prevotella 9* and *Blautia*, and alpha-diversity [4, 8]. In our study, *Bifidobacterium* and *Butyricicoccus* abundance tended to increase (Table 4), and we consider these bacteria as specific candidates that relate to barley consumption. However, barley intake might have a limited effect because there were no changes in alpha-diversity.

The consumption of barley tended to be positively related to PCoA2, but this result was not significant (p = 0.08, Figure S1, see Additional file 1). The numbers of each enterotype did not differ between the barley groups. The absolute numbers of enterotype B were 33 (high) and 23 (low). These results suggested that barley consumption slightly shifted the enterotype to B; however, further studies are necessary to confirm this result. Our results of PCoA (Figure 2b) were similar to those of Arumugam et al. [9], in which the distribution is in a " Λ " shape comprising enterotypes A (driven by *Bacteroides*), B (driven by *Blautia*), and C (driven by *Prevotella 9*). However, the influential genus of enterotype B, *Blautia*, was different [9]. Arumugam et al. reported that the driving genera of enterotype A (*Bacteroides*) and C (*Prevotella 9*) are robust between cohorts, but for B it depends on the cohort. Furthermore, *Blautia* was reported as one of the major driving genera [9].

In this study, *Bifidobacterium* and *Butyricicoccus* were identified as characteristic bacteria in the high barley group. *Bifidobacterium* was associated with rye-containing beta-glucan consumption in a randomized control trial [17] and increased with dietary fiber in a systematic review [18]. *Butyricicoccus* was associated with barley in an animal study [19]. Most bacteria relatively close to barley in the network analyses (Figure S2, see Additional file 1) are known for their characteristics of producing short-chain fatty acids (SCFAs). For example, *Butyricicoccus, Subdoligranulum, Ruminococcus 2,* and Ruminococcaceae *UCG-013* belong to the Ruminococcaceae family, which is well-known for producing SCFAs. *Anaerostipes* belongs to the Lachnospiraceae family, which is also known to produce SCFAs. Many bacteria were more highly correlated with other bacteria than with barley. This suggests that in addition to the effects of barley intake, there are many bacteria that are indirectly altered by interactions

between bacteria. *Bifidobacterium* has been reported to produce SCFAs, such as acetic acid from carbohydrates [20], and are known as characteristic bacteria of Japanese people [1]. *Butyricicoccus* is a prevalent butyric acid producer associated with inflammatory bowel disease prevention [21]. Additionally, SCFA production from dietary fiber can acidify the gut environment, which alters the composition of the microbiota [22]. Therefore, these barley-related bacteria might have a positive influence on the hosts.

Although an association with barley was suggested, the results for *Bifidobacterium* may not be unique to barley, as Bifidobacterium abundance has been reported to increase with the consumption of rye [17] and other dietary fiber [18]. Bifidobacterium itself is a characteristic bacteria found in abundance in the Japanese population [1]. Therefore, it may increase in abundance with a typical Japanese diet. Most barley intake is from barley mixed with rice, which is a typical Japanese food pattern, so other dietary factors may be confounding. However, in this study, the association between *Bifidobacterium* and barley was observed even after adjusting for various dietary factors (Table 4, Table S6, see Additional file 1), so we consider the results robust. Although there are few reports on *Butyricicoccus* in humans, randomized controlled trials have shown that its abundance increased after consuming a Mediterranean diet [23]. Because *Butyricicoccus* is highly capable of fermenting dietary fiber, it is possible that the increase was caused by the whole grains, legumes, and vegetables in the Mediterranean diet, but the details are not known. This is the first study to show an association between barley and *Butyricicoccus* in humans, and it will be interesting to see whether the effect was specific to barley or this cohort. However, because the association between barley and *Butyricicoccus* was found only in model 2, confounding by other dietary factors cannot be ruled out, limiting the interpretation of the present results.

This study has several limitations. The participants were employees of a company that manufactures barley products and would thus most likely consume more barley in general. The possibility of other confounding factors such as dietary habits cannot be completely excluded; thus, the effects of barley could be overestimated. We did not measure SCFAs or microbiome functions, which restricts the usefulness of our results. A follow-up intervention study with another cohort is warranted to overcome these limitations.

In conclusion, barley might change the intestinal microbiota of the Japanese population. We selected *Bifidobacterium* and *Butyricicoccus* as candidate characteristic genera indicating barley consumption.

Declarations

Ethics approval and consent to participate

The study was approved by the Yamanashi University Ethics Committee (approval No. 1824), the National Institutes of Biomedical Innovation Health and Nutrition Ethics Committee (approval No. 169-04), and the Chiyoda Paramedical Care Clinic Ethics Committee (approval No. 15000088). The study was registered with the University Hospital Medical Information Network (ID: UMIN000033479). Written informed consent was obtained from all participants.

Consent for publication

Not applicable.

Availability of data and materials

The datasets supporting the conclusions of this article are included within the article (and its additional files). Other data described in the manuscript, code book, and analytic code will be made available from corresponding author upon reasonable request.

Competing interests

The department where Z.Y. works has received research grants for other studies from Hakubaku Co., Ltd. T.M., Y.G., M.N., S.N., and T.K. are employees of Hakubaku Co., Ltd. All other authors have no Competing Interest to declare.

Funding

This study was supported by funding from Hakubaku Co., Ltd. and National Institutes of Biomedical Innovation, Health and Nutrition.

Authors' contributions

Project administration: T.M., K.H., Y.G., H.M., T.K., M.N., S.N., and K.K. Resources: H.M., K.K., M.M., K.H., J.P., H.K., K.M., and J.K. Investigation and Writing, original draft: T.M., K.H., and J.P. Writing, revising and editing: T.M., J.K., and Z.Y. All authors have read and approved the final manuscript.

Acknowledgements

Not applicable.

References

- Nishijima S, Suda W, Oshima K, Kim S-W, Hirose Y, Morita H, et al. The gut microbiome of healthy Japanese and its microbial and functional uniqueness. DNA Res. 2016;23(2):125–33. https://doi.org/10.1093/dnares/dsw002
- Sonnenburg ED, Sonnenburg JL. Starving our microbial self: The deleterious consequences of a diet deficient in microbiota-accessible carbohydrates. Cell Metab. 2014;20(5):779–86. https://doi.org/10.1016/j.cmet.2014.07.003
- 3. Matsuoka T, Tsuchida A, Yamaji A, Kurosawa C, Shinohara M, Takayama I, et al. Consumption of a meal containing refined barley flour bread is associated with a lower postprandial blood glucose concentration after a second meal compared with one containing refined wheat flour bread in healthy Japanese: A randomized control trial. Nutrition. 2020;72:110637. https://doi.org/10.1016/j.nut.2019.110637
- Martínez I, Lattimer JM, Hubach KL, Case JA, Yang J, Weber CG, et al. Gut microbiome composition is linked to whole grain-induced immunological improvements. ISME J. 2013;7(2):269–80. https://doi.org/10.1038/ismej.2012.104
- Kobayashi T, Kaneko S, Matsuoka T. The effect of barley noodles on blood sugar levels in type
 2 diabetes patients. J Japanese Assoc Diet Fiber Res. 2013;17(1):35–40. https://ci.nii.ac.jp/naid/40019769176
- Matsuoka T, Uchimatsu D, Kobayashi T, Aoe S. Effect of barley on metabolic syndrome related indicators in overweight Japanese men and women. J Japanese Assoc Diet Fiber Res. 2014;18(1):25–33. <u>https://ci.nii.ac.jp/naid/40020187747</u>

- Nilsson AC, Östman EM, Knudsen KEB, Holst JJ, Björck IME. A cereal-based evening meal rich in indigestible carbohydrates increases plasma butyrate the next morning. J Nutr. 2010;140(11):1932–6. https://doi.org/10.3945/jn.110.123604
- Kovatcheva-Datchary P, Nilsson A, Akrami R, Lee YS, De Vadder F, Arora T, et al. Dietary fiberinduced improvement in glucose metabolism is associated with increased abundance of Prevotella. Cell Metab. 2015;22(6):971–82. https://doi.org/10.1016/j.cmet.2015.10.001
- 9. Arumugam M, Raes J, Pelletier E, Le Paslier D, Yamada T, Mende DR, et al. Enterotypes of the human gut microbiome. Nature. 2011;473(7346):174–80. https://doi.org/10.1038/nature09944
- Nilsson AC, Ostman EM, Granfeldt Y, Björck IME. Effect of cereal test breakfasts differing in glycemic index and content of indigestible carbohydrates on daylong glucose tolerance in healthy subjects. Am J Clin Nutr. 2008;87(3):645–54. https://doi.org/10.1093/ajcn/87.3.645
- 11. Lifschitz CH, Grusak MA, Butte NF. Carbohydrate digestion in humans from a beta-glucanenriched barley is reduced. J Nutr. 2002;132(9):2593–6. https://doi.org/10.1093/jn/132.9.2593
- Hosomi K, Ohno H, Murakami H, Natsume-Kitatani Y, Tanisawa K, Hirata S, et al. Method for preparing DNA from feces in guanidine thiocyanate solution affects 16S rRNA-based profiling of human microbiota diversity. Sci Rep. 2017;7(1):4339. https://doi.org/10.1038/s41598-017-04511-0
- Caporaso JG, Kuczynski J, Stombaugh J, Bittinger K, Bushman FD, Costello EK, et al. QIIME allows analysis of high-throughput community sequencing data. Nat Methods. 2010;7(5):335–6. https://doi.org/10.1038/nmeth.f.303
- 14. Mohsen A, Park J, Chen Y-A, Kawashima H, Mizuguchi K. Impact of quality trimming on the efficiency of reads joining and diversity analysis of Illumina paired-end reads in the context of

QIIME1 and QIIME2 microbiome analysis frameworks. BMC Bioinformatics. 2019;20(1):581. https://doi.org/10.1186/s12859-019-3187-5

- Casella G, Fienberg S, Olkin I. A Modern Approach to Regression with R. Vol. 102, Design. 2006.
 618 p. https://doi.org/10.1007/978-0-387-35434-7
- Ito K, Murphy D. Tutorial: Application of ggplot2 to pharmacometric graphics. CPT Pharmacometrics Syst Pharmacol. 2013;2(10): e79. https://doi.org/10.1038/psp.2013.56
- 17. Eriksen AK, Brunius C, Mazidi M, Hellström PM, Risérus U, Iversen KN, et al. Effects of wholegrain wheat, rye, and lignan supplementation on cardiometabolic risk factors in men with metabolic syndrome: a randomized crossover trial. Am J Clin Nutr. 2020;111(4):864–76. https://doi.org/10.1093/ajcn/nqaa026
- So D, Whelan K, Rossi M, Morrison M, Holtmann G, Kelly JT, et al. Dietary fiber intervention on gut microbiota composition in healthy adults: a systematic review and meta-analysis. Am J Clin Nutr. 2018;107(6):965–83. https://doi.org/10.1093/ajcn/nqy041
- Moen B, Berget I, Rud I, Hole AS, Kjos NP, Sahlstrøm S. Extrusion of barley and oat influence the fecal microbiota and SCFA profile of growing pigs. Food Funct. 2016;7(2):1024–32. https://doi.org/10.1039/c5fo01452b
- Pratt C, Campbell MD. The effect of Bifidobacterium on reducing symptomatic abdominal pain in patients with irritable bowel syndrome: a systematic review. Probiotics Antimicrob Proteins. 2020;12(3):834–9. https://doi.org/10.1007/s12602-019-09609-7
- Eeckhaut V, Machiels K, Perrier C, Romero C, Maes S, Flahou B, et al. Butyricicoccus pullicaecorum in inflammatory bowel disease. Gut. 2013;62(12):1745–52. https://doi.org/10.1136/gutjnl-2012-303611

- Scott KP, Duncan SH, Flint HJ. Dietary fibre and the gut microbiota. Nutr Bull. 2008;33(3):201–
 11. https://doi.org/10.1111/j.1467-3010.2008.00706.x
- 23. Zhu C, Sawrey-Kubicek L, Beals E, Rhodes CH, Houts HE, Sacchi R, et al. Human gut microbiome composition and tryptophan metabolites were changed differently by fast food and Mediterranean diet in 4 days: a pilot study. Nutr Res. 2020;77:62–72. https://doi.org/10.1016/j.nutres.2020.03.005



Figure S1 PCoA result. Color means high or low consumption of barley. The arrow means high barley group (*n* 94, aged 19-65 years, Japan, 2018).



Figure S2 The result of network analysis. Line means correlation |*r*|>0.15 (Kendall rank-sum tests). Colors mean community groups. Described names are those in which the difference between low barley and high barley is *P*<0.1 (Mann-Whitney *U*-test) (*n* 94, aged 19-65 years, Japan, 2018). The bacteria described as characters are as follow; *A*: *Subdoligranulum*, *B*: *Eubacterium Hallii group*, *C*: *Prevotella2*, *D*: *Megasphaera*, *E*: *Roseburia*, *F*: *Veillonella*, *G*: *Lachnospiraceae family uncultured*, *H*: *Dorea*, *I*: *Ruminococcus1*, *J*: *Eubacterium coprostanoligenes group*.

Variable	n (Male)	Low barley (<i>n</i> 119)	High barley (n 117)	Criterion
Diabetes risk				
Risk 2	8 (8)	3	5	HbA1c>=6.5% or Fasting blood glucose>=126 mg/dL or Under medication
Risk 1	5 (5)	4	1	Who were not Risk 2, and Fasting blood glucose>=110 mg/dL
Risk 0	223 (161)	110	113	Who were neither Risk 1 nor Risk 2
Hypertension risk				
Risk 2	46 (43)	20	26	SBP>=140 mmHg or DBP>=90 mmHg or Under medication
Risk 1	20 (16)	11	9	Who were not Risk 2, and either SBP>=130 mgHg or DBP>=85 mgHg
Risk 0	170 (115)	86	84	Who were neither Risk 1 nor Risk 2
Dislipidemia risk				
Risk 2	97 (84)	46	51	TG>=150 mg/dL or HDL-cholesterol<40 mg/dL or LDL-cholesterol>=140 mg/dL or Under medication
Risk 1	31 (25)	17	14	Who were not Risk 2, and LDL-cholesterol>=120 mg/dL
Risk 0	108 (65)	54	54	Who were neither Risk 1 nor Risk 2

Table S1 Criterion of risk group of diabetes, hypertension, and dislipidemia.

Risk 2 means disease, Risk 1 means border line, and Risk 0 means healthy participants.

Range of barley consumption; Low barley: 0-31.8 g/1000 kcal · day, High barley: 32.3-253 g/1000 kcal · day

	Low barley $(n 47)$	High barley $(n 47)$			
Variable (g/1,000 kcal·d)	0-31.8 g/1,000 kcal·d ¹	32.3-253 g/1,000 kcal \cdot d ¹	P^{2}	Model 2^3	Model 3 ³
Category					
Cereal	213 ± 55	236 ± 58	0.048	Ο	Ο
Potato	19 ± 16	21 ± 14	0.40		
Sugar and sweetener	3.9 ± 3.7	2.4 ± 2.4	0.03	Ο	0
Legume	20 ± 15	27 ± 20	0.056	Ο	0
Green vegetable	37 ± 24	44 ± 31	0.25		0
Other vegetable ⁴	62 ± 29	72 ± 45	0.2001		0
Fruit	36 ± 32	35 ± 30	0.87		
Fish	32 ± 15	31 ± 16	0.74		0
Meat	48 ± 26	45 ± 15	0.47		
Egg	18 ± 10	20 ± 13	0.45		
Milk	54 ± 43	48 ± 44	0.49		
Oil	6.9 ± 2.2	7.2 ± 2.2	0.53		
Confectionery	26 ± 20	25 ± 17	0.81		0
Beverage ⁴	439 ± 271	335 ± 226	0.047	Ο	0
Seasoning and spice ⁴	128 ± 45	135 ± 70	0.57		
In detail					
Rice	141 ± 54	173 ± 61	0.007		
Natto	3.6 ± 4.2	10.4 ± 12.0	< 0.001		
Green leafy vegetables	11 ± 10	17 ± 17	0.04		
Carrot and Pumpkin	6.7 ± 5.9	10.1 ± 8.4	0.03		
Seaweed	3.5 ± 2.8	4.0 ± 3.9	0.51		

Table S2 Comparison of diet between low barley group and high barley group on cross-sectional study (n 94).

Mushroom	4.4 ± 2.5	5.0 ± 4.1	0.37	
Boiled fish	25 ± 28	15 ± 16	0.052	
Japanese confectionery	3.8 ± 3.4	2.8 ± 2.5	0.08	
Ice cream	18 ± 19	12 ± 12	0.08	
Coffee	136 ± 113	84 ± 91	0.015	
Cola	67 ± 65	37 ± 50	0.013	

Data are shown as Means \pm SD

1) Range of barley consumption.

2) Student's *t*-test

3) Model variables were used as the independent variables on tha multiple regression analyses.

4) Other vegetable include mushroom and seaweed.

Beverage include fruit or vegetable drink.

Seasoning include liquid seasoning.

	Low barley $(n 47)$	High barley $(n 47)$	
	range: 0-31.8 g/1000 kcal·d	range: 32.3-253 g/1000 kcal·d	
Variable	Median [Interquartile range]	Median [Interquartile range]	$P \text{ value}^{1)} P_{\text{FDR}} \text{ value}^{2)}$
Observed	561 [482, 649]	549 [500, 628]	0.86 0.87
Chao1	1146 [919, 1290]	1170 [971, 1419]	0.41 0.68
Shannon	3.77 [3.46, 3.95]	3.77 [3.57, 4.14]	0.38 0.68
Simpson	0.94 [0.90, 0.95]	0.94 [0.92, 0.96]	0.21 0.68
Fisher	128 [106, 156]	125 [111, 149]	0.87 0.87

Table S3 Alpha-diversity, compared low barley with high barley group on cross-sectional study (aged 19-65 years in 2018, Japan).

¹⁾ Compared low and high barley groups using Mann–Whitney U-test (crude P value)

²⁾ Compared low and high barley groups using Mann–Whitney U-test adjusted with FDR method

Low barley (n 47)High barley (n 47)range: 0-31.8 g/1000 kcal·d range: 32.3-253 g/1000 kcal·d Median [Interquartile range] Median [Interquartile range] P value¹⁾ $P_{\rm FDR}$ value²⁾ Genus **Bacteroides** 0.50 0.79 31.27 [0.01, 28.98] 29.28 [1.71, 27.52] Blautia 6.15 [0.78, 7.48] 0.64 0.85 5.81 [1.63, 6.67] **Bifidobacterium** 2.73 [0.00, 5.10] 5.61 [0.00, 8.12] 0.01 0.37 Faecalibacterium 5.76 [0.00, 6.02] 6.08 [0.00, 6.34] 0.54 0.79 Prevotella 9 0.01 [0.00, 6.96] 0.00 [0.00, 3.90] 0.20 0.59 Eubacterium rectale group 1.10 [0.00, 2.28] 1.56 [0.00, 2.62] 0.73 0.87 *Parabacteroides* 2.28 [0.00, 2.62] 1.64 [0.00, 1.96] 0.18 0.59 Subdoligranulum 1.12 [0.00, 1.80] 1.83 [0.00, 2.32] 0.08 0.44 Collinsella 0.92 [0.00, 1.82] 1.95 [0.00, 2.20] 0.03 0.42 1.41 [0.00, 1.82] 1.43 [0.00, 2.02] 0.99 0.99 Sutterella 0.00 [0.00, 3.03] 0.00 [0.00, 0.76] 0.20 0.59 Megamonas Ruminococcus torques group 1.27 [0.03, 1.67] 1.09 [0.01, 1.73] 0.36 0.72 1.06 [0.07, 1.92] 0.0502 0.42 *Anaerostipes* 0.89 [0.02, 1.28] 0.53 Lachnoclostridium 0.79 1.22 [0.19, 1.69] 1.23 [0.04, 1.48] Fusicatenibacter 0.83 0.90 1.41 [0.00, 1.49] 1.00 [0.00, 1.40] Fusobacterium 0.00 [0.00, 1.14] 0.00 [0.00, 1.65] 0.91 0.95 Eubacterium hallii group 0.97 [0.00, 1.28] 0.78 [0.00, 0.97] 0.60 0.83 Alistipes 0.40 [0.00, 1.30] 0.21 [0.00, 0.82] 0.34 0.72 Lachnospira 0.41 [0.00, 0.78] 0.62 [0.00, 1.10] 0.22 0.59

Table S4 Relative abundance(%) of the frequent 50 microbiomes (genus levels), compared low barley with high barley group on cross-sectional study (aged 19-65 years in 2018, Japan).

Prevotella 2	0.00 [0.00,	0.34]	0.00 [0.00,	1.46]	0.99	0.99
Megasphaera	0.00 [0.00,	0.65]	0.00 [0.00,	1.15]	0.28	0.66
Roseburia	0.66 [0.00,	1.04]	0.40 [0.00,	0.72]	0.18	0.59
Veillonella	0.03 [0.00,	1.06]	0.03 [0.00,	0.70]	0.47	0.79
Phascolarctobacterium	0.01 [0.00,	0.79]	0.00 [0.00,	0.70]	0.58	0.83
Escherichia Shigella	0.07 [0.00,	0.72]	0.05 [0.00,	0.75]	0.73	0.87
Lachnospiraceae family uncultured	0.49 [0.01,	0.72]	0.59 [0.00,	0.70]	0.91	0.95
Alloprevotella	0.00 [0.00,	0.56]	0.00 [0.00,	0.74]	0.77	0.89
Dorea	0.40 [0.00,	0.81]	0.35 [0.00,	0.43]	0.32	0.72
Ruminococcus 2	0.00 [0.00,	0.37]	0.01 [0.00,	0.86]	0.04	0.42
Butyricicoccus	0.43 [0.00,	0.46]	0.65 [0.12,	0.65]	0.00	0.09
Lachnospiraceae UCG-008	0.52 [0.00,	0.57]	0.32 [0.00,	0.48]	0.81	0.90
Ruminococcus 1	0.01 [0.00,	0.28]	0.01 [0.00,	0.69]	0.34	0.72
Acidaminococcus	0.00 [0.00,	0.30]	0.03 [0.00,	0.66]	0.07	0.44
Ruminococcaceae family uncultured	0.23 [0.00,	0.42]	0.24 [0.00,	0.54]	0.64	0.85
Parasutterella	0.02 [0.00,	0.38]	0.02 [0.00,	0.57]	0.50	0.79
Streptococcus	0.12 [0.00,	0.52]	0.20 [0.00,	0.43]	0.50	0.79
Mitsuokella	0.00 [0.00,	0.59]	0.00 [0.00,	0.35]	0.38	0.73
Prevotellaceae NK3B31 group	0.00 [0.00,	0.48]	0.00 [0.00,	0.28]	0.71	0.87
Dialister	0.00 [0.00,	0.31]	0.07 [0.00,	0.43]	0.04	0.42
Ruminiclostridium 5	0.12 [0.00,	0.36]	0.15 [0.01,	0.32]	0.66	0.85
Ruminococcaceae UCG-013	0.09 [0.00,	0.27]	0.22 [0.00,	0.34]	0.06	0.44
Barnesiella	0.00 [0.00,	0.23]	0.05 [0.00,	0.36]	0.22	0.59
Ruminococcaceae UCG-002	0.00 [0.00,	0.17]	0.01 [0.00,	0.39]	0.19	0.59

Rhodospirillaceae family uncultured	0.00 [0.00,	0.26]] 00.0	0.00,	0.27]	0.43	0.79
Ruminococcus gauvreauii group	0.00 [0.00,	0.23]] 00.0	0.00,	0.25]	0.79	0.90
Paraprevotella	0.00 [0.00,	0.31]	0.00 [0.00,	0.17]	0.20	0.59
Odoribacter	0.04 [0.00,	0.21]	0.10 [0.00,	0.24]	0.48	0.79
Eubacterium coprostanoligenes group	0.00 [0.00,	0.14]	0.01 [0.00,	0.30]	0.21	0.59
Bilophila	0.10 [0.00,	0.18]	0.14 [0.00,	0.25]	0.24	0.60
Tyzzerella 3	0.00 [0.00,	0.10]] 00.0	0.00,	0.29]	0.22	0.59

¹⁾ Compared low and high barley groups using Mann–Whitney U-test (crude P value)

²⁾ Compared low and high barley groups using Mann–Whitney U-test adjusted with FDR method

Table S5 Results of Multiple regression analysis (dichotomy and continuous) and Kendall rank correlation between barley consumption rate (g/1000 kcal · day) and intestinal microbiota on cross-sectional study (aged 19-65 years in 2018, Japan).

	Multiple reg	ression (Barley	:dichotomy) ¹⁾	Multiple reg	ression (Barley	ey:continuous) ²⁾ Kendall rank correla			
Genus	Estimate	SE	P value	Estimate	SE	P value	Estimate	P value	
Bacteroides	-1.51	3.15	0.63	-0.06	0.04	0.57	-0.05	0.48	
Blautia	-0.85	0.85	0.32	-0.02	0.01	0.50	-0.05	0.47	
Bifidobacterium	2.78	1.63	0.09	0.11	0.02	0.04	0.17	0.01	
Faecalibacterium	-0.21	1.09	0.85	-0.04	0.01	0.23	0.07	0.32	
Prevotella 9	-2.60	2.91	0.38	-0.07	0.03	0.44	-0.09	0.27	
Eubacterium rectale group	0.55	0.58	0.34	0.02	0.01	0.37	0.02	0.80	
Parabacteroides	-0.65	0.39	0.10	-0.01	0.00	0.35	-0.11	0.12	
Subdoligranulum	0.43	0.46	0.36	-0.01	0.01	0.57	0.06	0.38	
Collinsella	0.50	0.52	0.34	0.02	0.01	0.15	0.12	0.10	
Sutterella	0.24	0.44	0.59	-0.01	0.01	0.42	-0.03	0.67	
Megamonas	-1.87	1.15	0.11	-0.06	0.01	0.13	-0.11	0.19	
Ruminococcus torques group	0.16	0.41	0.70	0.00	0.00	0.94	-0.05	0.45	
Anaerostipes	0.71	0.36	0.05	0.01	0.00	0.36	0.08	0.25	
Lachnoclostridium	-0.17	0.27	0.54	0.00	0.00	0.96	-0.04	0.54	
Fusicatenibacter	-0.06	0.27	0.82	-0.01	0.00	0.46	-0.02	0.80	
Fusobacterium	0.74	0.85	0.39	0.01	0.01	0.61	-0.03	0.72	
Eubacterium hallii group	-0.42	0.24	0.08	-0.01	0.00	0.50	0.00	0.98	
Alistipes	0.29	0.37	0.44	0.00	0.00	1.00	0.05	0.44	
Lachnospira	0.23	0.25	0.36	0.01	0.00	0.26	0.16	0.03	

Prevotella 2	1.41	0.64	0.03	0.01	0.01	0.68	-0.01	0.90
Megasphaera	0.74	0.60	0.22	0.08	0.01	0.00	0.06	0.43
Roseburia	-0.40	0.22	0.08	-0.01	0.00	0.16	-0.07	0.32
Veillonella	-0.37	0.44	0.40	0.00	0.01	0.86	0.14	0.07
Phascolarctobacterium	-0.19	0.22	0.39	0.00	0.00	0.66	0.00	0.96
Escherichia Shigella	0.06	0.47	0.90	0.02	0.01	0.26	0.03	0.69
Lachnospiraceae family uncultured	0.02	0.14	0.90	0.01	0.00	0.01	0.07	0.31
Alloprevotella	0.18	0.56	0.75	-0.01	0.01	0.56	-0.06	0.49
Dorea	-0.32	0.19	0.10	-0.01	0.00	0.39	-0.06	0.36
Ruminococcus 2	0.45	0.23	0.06	0.00	0.00	0.51	0.15	0.05
Butyricicoccus	0.17	0.07	0.02	0.00	0.00	0.05	0.21	0.00
Lachnospiraceae UCG-008	-0.11	0.11	0.32	0.00	0.00	0.60	0.01	0.93
Ruminococcus 1	0.36	0.21	0.08	0.01	0.00	0.18	0.10	0.20
Acidaminococcus	0.37	0.20	0.07	0.00	0.00	0.82	0.08	0.29
Ruminococcaceae family uncultured	0.03	0.13	0.81	0.01	0.00	0.15	0.01	0.85
Parasutterella	0.18	0.20	0.38	0.02	0.00	0.01	0.08	0.27
Streptococcus	-0.11	0.17	0.53	0.00	0.00	0.79	0.07	0.32
Mitsuokella	-0.21	0.45	0.65	0.00	0.01	0.93	0.02	0.84
Prevotellaceae NK3B31 group	-0.34	0.41	0.41	-0.01	0.00	0.53	0.00	0.99
Dialister	0.17	0.13	0.19	0.00	0.00	0.92	0.08	0.27
Ruminiclostridium 5	-0.04	0.11	0.72	0.00	0.00	0.95	0.01	0.89
Ruminococcaceae UCG-013	0.06	0.08	0.49	0.00	0.00	0.27	0.17	0.02
Barnesiella	0.09	0.12	0.46	0.00	0.00	0.63	0.08	0.29

Ruminococcaceae UCG-002	0.14	0.13	0.25	0.00	0.00	0.98	0.07	0.38
Rhodospirillaceae family uncultured	0.02	0.21	0.92	0.00	0.00	0.64	-0.09	0.25
Ruminococcus gauvreauii group	0.01	0.11	0.93	0.00	0.00	0.38	-0.01	0.93
Paraprevotella	-0.15	0.13	0.23	0.00	0.00	0.86	-0.13	0.11
Odoribacter	0.01	0.08	0.87	0.00	0.00	0.88	0.02	0.76
Eubacterium coprostanoligenes group	0.13	0.10	0.21	0.01	0.00	0.03	0.07	0.38
Bilophila	0.05	0.05	0.29	0.00	0.00	0.46	0.06	0.40
Tyzzerella 3	0.19	0.13	0.16	0.02	0.00	0.00	0.16	0.04

¹⁾ Results of multiple regression analysis. Genus levels of microbiome relative abundance (%) were used as the dependent variable, barley consumption rate (0="Low barley group", 1="High barley group"), age (years), and sex (0="female", 1="male") were used as the independent variable. Estimate: Linear regression coefficient, SE: standard error.

²⁾ Results of multiple regression analysis. Genus levels of microbiome relative abundance (%) were used as the dependent variable, barley consumption rate (g/1000 kcal \cdot day), age (years), and sex (0="female", 1="male") were used as the independent variable. Estimate: Linear regression coefficient, SE: standard error.

³⁾ Results of correlation test between barley consumption rate (g/1000 kcal·day) and genus levels of intestinal microbiota relative abundance (%) using Kendall method. Estimate: Kendall's correlation coefficient.

Table S6 Association between the relative abundance of microbiome bacteria and barley intake group $(0 = \text{low}, 1 = \text{high})^1$ by multivariate linear regression analyses (n = 236).

	Model 1			Model 2			Model 3		
	R	SE	P value	R	SE	P value	R	SE	P value
Bifidobacterium									
Barley $(0: \text{ low, } 1: \text{ high})^1$	2.52	1.00	0.012 *	2.61	1.03	0.012 *	2.59	1.03	0.013 *
Sex (0: female, 1: male)	-1.31	1.20	0.28	-0.79	1.24	0.52	-1.22	1.33	0.36
Age (10 years)	0.36	0.49	0.46	0.25	0.51	0.63	0.35	0.51	0.49
Risk of diabetes (0–2)	0.45	1.32	0.73	0.79	1.34	0.55	0.96	1.34	0.48
Risk of dyslipidemia (0–2)	-0.17	0.60	0.77	-0.14	0.60	0.81	-0.09	0.60	0.87
Risk of hypertension (0–2)	-1.31	0.71	0.07 #	-1.03	0.73	0.16	-0.98	0.73	0.18
Cereal (g/1000kcal·d)				-0.01	0.01	0.44	-0.02	0.01	0.101
Sugar and sweetner $(g/1000kcal \cdot d)$				0.26	0.13	0.04 *	0.27	0.13	0.03 *
Legume (g/1000kcal·d)				0.00	0.03	0.95	0.01	0.03	0.62
Beverage (g/1000kcal·d)				0.00	0.00	0.06 #	-0.01	0.00	0.009 **
Green vegetable (g/1000kcal·d)							-0.03	0.02	0.23
Other vegetable $(g/1000kcal \cdot d)$							-0.01	0.02	0.68
Fish (g/1000kcal·d)							-0.06	0.03	0.04 *
Confectionery (g/1000kcal·d)							-0.02	0.04	0.60
Butyricicoccus									
Barley $(0: low, 1: high)^1$	0.11	0.05	0.03 *	0.08	0.05	0.102	0.08	0.05	0.13
Sex (0: female, 1: male)	0.02	0.06	0.73	0.03	0.06	0.64	0.07	0.07	0.32
Age (10 years)	0.01	0.02	0.75	0.01	0.03	0.60	0.01	0.03	0.73
Risk of diabetes (0–2)	0.02	0.07	0.70	0.03	0.07	0.64	0.04	0.07	0.54
Risk of dyslipidemia (0–2)	-0.02	0.03	0.44	-0.02	0.03	0.41	-0.03	0.03	0.39
Risk of hypertension $(0-2)$	-0.01	0.04	0.81	-0.01	0.04	0.72	0.00	0.04	0.95
Cereal (g/1000kcal·d)				0.00	0.00	0.43	0.00	0.00	0.11
Sugar and sweetner $(g/1000kcal \cdot d)$				0.00	0.01	0.78	0.00	0.01	0.76
Legume (g/1000kcal·d)				0.00	0.00	0.16	0.00	0.00	0.17
Beverage (g/1000kcal·d)				0.00	0.00	0.34	0.00	0.00	0.92

Green vegetable (g/1000kcal·d)							0.00	0.00	0.22
Other vegetable $(g/1000kcal \cdot d)$							0.00	0.00	0.44
Fish (g/1000kcal · d)							0.00	0.00	0.99
Confectionery (g/1000kcal·d)							0.00	0.00	0.15
Collinsella									
Barley (0: low, 1: high) ^{1}	0.27	0.30	0.37	0.26	0.31	0.41	0.15	0.31	0.63
Sex (0: female, 1: male)	0.44	0.36	0.23	0.49	0.38	0.20	0.41	0.41	0.31
Age (10 years)	-0.09	0.15	0.52	-0.11	0.15	0.49	-0.09	0.16	0.56
Risk of diabetes (0–2)	-0.26	0.40	0.51	-0.24	0.41	0.56	-0.17	0.41	0.68
Risk of dyslipidemia (0–2)	0.03	0.18	0.86	0.04	0.18	0.84	0.04	0.18	0.83
Risk of hypertension (0–2)	-0.06	0.21	0.77	-0.05	0.22	0.81	0.04	0.22	0.87
Cereal $(g/1000$ kcal·d)				0.00	0.00	0.70	0.00	0.00	0.75
Sugar and sweetner $(g/1000 \text{kcal} \cdot \text{d})$				0.00	0.04	0.93	0.00	0.04	0.97
Legume (g/1000kcal·d)				0.00	0.01	0.86	0.00	0.01	0.79
Beverage (g/1000kcal·d)				0.00	0.00	0.69	0.00	0.00	0.61
Green vegetable (g/1000kcal·d)							0.00	0.01	0.82
Other vegetable $(g/1000kcal \cdot d)$							0.01	0.01	0.08 #
Fish (g/1000kcal · d)							-0.02	0.01	0.02 *
Confectionery (g/1000kcal·d)							0.00	0.01	0.85
Ruminococcus 2									
Barley (0: low, 1: high) 1	0.10	0.15	0.53	0.11	0.16	0.48	0.09	0.16	0.58
Sex (0: female, 1: male)	-0.26	0.19	0.16	-0.18	0.19	0.35	-0.12	0.21	0.58
Age (10 years)	0.09	0.07	0.26	0.08	0.08	0.29	0.07	0.08	0.35
Risk of diabetes (0–2)	0.11	0.20	0.60	0.09	0.21	0.65	0.14	0.21	0.50
Risk of dyslipidemia (0–2)	0.00	0.09	1.00	0.02	0.09	0.81	0.03	0.09	0.73
Risk of hypertension $(0-2)$	-0.11	0.11	0.34	-0.11	0.11	0.32	-0.09	0.11	0.45
Cereal (g/1000kcal·d)				0.00	0.00	0.29	0.00	0.00	0.42
Sugar and sweetner $(g/1000 \text{kcal} \cdot \text{d})$				-0.01	0.02	0.55	-0.01	0.02	0.53
Legume (g/1000kcal·d)				-0.01	0.00	0.20	0.00	0.00	0.41
Beverage (g/1000kcal·d)				0.00	0.00	0.20	0.00	0.00	0.23
Green vegetable (g/1000kcal·d)							0.00	0.00	0.34

Other vegetable (g/1000kcal·d) Fish (g/1000kcal·d) Confectionery (g/1000kcal·d)							$0.00 \\ 0.00 \\ 0.01$	0.00 0.00 0.01	0.37 0.34 0.33
Dialister									
Barley (0: low, 1: high) ^{1}	0.10	0.09	0.24	0.08	0.09	0.41	0.06	0.09	0.50
Sex (0: female, 1: male)	0.20	0.11	0.06 #	0.14	0.11	0.19	0.20	0.12	0.098 #
Age (10 years)	-0.03	0.04	0.42	-0.02	0.04	0.64	-0.03	0.05	0.53
Risk of diabetes (0–2)	-0.08	0.12	0.48	-0.10	0.12	0.41	-0.07	0.12	0.54
Risk of dyslipidemia (0–2)	-0.06	0.05	0.27	-0.07	0.05	0.19	-0.07	0.05	0.22
Risk of hypertension $(0-2)$	-0.04	0.06	0.54	-0.06	0.06	0.37	-0.04	0.07	0.53
Cereal (g/1000kcal·d)				0.00	0.00	0.12	0.00	0.00	0.06 #
Sugar and sweetner (g/1000kcal·d)				-0.01	0.01	0.25	-0.01	0.01	0.23
Legume (g/1000kcal·d)				0.00	0.00	0.29	0.00	0.00	0.20
Beverage (g/1000kcal·d)				0.00	0.00	0.09 #	0.00	0.00	0.05 #
Green vegetable (g/1000kcal·d)							0.00	0.00	0.85
Other vegetable $(g/1000 \text{kcal} \cdot \text{d})$							0.00	0.00	0.35
Fish $(g/1000 \text{kcal} \cdot \text{d})$							0.00	0.00	0.70
Confectionery (g/1000kcal·d)							0.00	0.00	0.19

¹The range of barley intake is 0-32.3 g/1,000kcal · d in low, 32.9-253 g/1,000kcal · d in high.

Model 1: Adjusted with sex, age, risk of diabetes, dyslipidemia, and hypertension.

Model 2: In addition to model 1, adjusted with an intake of cereal, sugar and sweetener, legume, and beverage.

Model 3: In addition to model 2, adjusted with green vegetable, other vegetable and confectionery