1 **Title:** Microbial community-scale metabolic modeling predicts personalized short chain fatty acid
2 production profiles in the human gut.
3

4 **Authors:** Nick Quinn-Bohmann[1,2], Tomasz Wilmanski[1], Katherine Ramos Sarmiento[1], Lisa
5 Levy[3], Johanna W. Lampe[3], Thomas Gurry[4,5], Noa Rappaport[6], Erin M. Ostrem[7], Ophelia S.
6 Venturelli[7,8,9,10], Christian Diener[1,*], Sean M. Gibbons[1,2,11,12,13*]
7
Affiliations: [1] Institute for Systems Biology, Seattle, WA 98109, USA; [2] Molecular Engineering
Graduate Program, University of Washington, Seattle, WA 98195, USA; [3] Fred Hutchinson
Cancer Center, Seattle, WA 98109, USA; [4] Pharmaceutical Biochemistry Group, School of
Pharmaceutical Sciences, University of Geneva, Switzerland; [5] Myota GmbH, Berlin, Germany; [6]
Center for Phenomic Health, Buck Institute for Research on Aging, Novato, CA 94945, USA; [7]
Department of Biochemistry, University of Wisconsin-Madison, Madison, WI 53706, USA; [8]
Department of Biomedical Engineering, University of Wisconsin-Madison, Madison, WI 53706,
USA; [9] Department of Chemical & Biological Engineering, University of Wisconsin-Madison,
Madison, WI 53706, USA; [10] Department of Bacteriology, University of Wisconsin-Madison,
Madison, WI 53706, USA; [11] Department of Bioengineering, University of Washington, Seattle,
WA 98195, USA; [12] Department of Genome Sciences, University of Washington, Seattle, WA
98195, USA; [13] eScience Institute, University of Washington, Seattle, WA 98195, USA; [*]
correspondence can be addressed to cdiener@isbscience.org and sgibbons@isbscience.org

21
Abstract

Microbially-derived short chain fatty acids (SCFAs) in the human gut are tightly coupled to host
metabolism, immune regulation, and integrity of the intestinal epithelium. However, the
production of SCFAs can vary widely between individuals consuming the same diet, with lower
levels often associated with disease. A systems-scale mechanistic understanding of this
heterogeneity is lacking. We present a microbial community-scale metabolic modeling (MCMM)
approach to predict individual-specific SCFA production profiles. We assess the quantitative
accuracy of our MCMMs using *in vitro*, *ex vivo*, and *in vivo* data. Next, we show how MCMM
SCFA predictions are significantly associated with blood-derived clinical chemistries, including
cardiometabolic and immunological health markers, across a large human cohort. Finally, we
demonstrate how MCMMs can be leveraged to design personalized dietary, prebiotic, and
probiotic interventions that optimize SCFA production in the gut. Our results represent an
important advance in engineering gut microbiome functional outputs for precision health and
nutrition.

36
37 **Keywords**
38 gut microbiome, short chain fatty acids, flux balance analysis, metabolic model, precision
39 nutrition
40
41
42
43
Introduction

The human gut microbiota serves many functions: maintaining intestinal barrier function,

regulating peripheral and systemic inflammation, and breaking down indigestible dietary

components and host substrates into a wide range of bioactive compounds [1,2]. One of the

primary mechanisms by which the gut microbiota impacts human health is through the

production of small molecules that enter the circulation and are absorbed and transformed by

host tissues [3–5]. Approximately half of the metabolites detected in human blood are significantly

associated with cross-sectional variation in gut microbiome composition [6].

Short chain fatty acids (SCFAs) are among the most abundant metabolic byproducts

produced by the gut microbiota, largely through the fermentation of indigestible dietary fibers

and resistant starches, with acetate, propionate and butyrate being the most abundant SCFAs [7–

9]. Deficits in SCFA production, specifically butyrate and propionate, have been repeatedly

associated with disease, including inflammatory bowel disease and colorectal cancer [10–15].

Therefore, SCFA production is a crucial ecosystem service that the gut microbiota provides to

its host, with extensive impacts on health [1,11,16,17]. However, different human gut microbiota

provided with identical dietary substrates can show variable SCFA production profiles [18,19], and

predicting this heterogeneity remains a fundamental challenge to the microbiome field.

Measuring SCFA abundances in blood or feces is rarely informative of *in situ* production rates,

due to the volatility of SCFAs, cross-feeding among microbes, and the rapid consumption and

transformation of these metabolites by the colonic epithelium [10,20,21] . Furthermore, SCFA

production fluxes (i.e., the amount of a metabolite produced over a given period of time) within

an individual can vary longitudinally, depending upon dietary inputs and the availability of host

substrates [22]. In order to account for this inter- and intra-individual heterogeneity, we propose

the use of microbial community-scale metabolic models (MCMMs), which mechanistically

account for metabolic interactions between gut microbes, host substrates, and dietary inputs, to

estimate personalized, context-specific SCFA production profiles.

Statistical modeling and machine-learning approaches for predicting metabolic output

from the microbiome have shown promising results in recent years. For example, postprandial

blood glucose responses can be predicted by machine-learning algorithms trained on large

human cohorts [23,24]. Nevertheless, machine-learning methods are limited by the measurements

and interventions represented within the training data [25]. Mechanistic models like MCMMs, on

the other hand, do not rely on training data and can provide causal insights [21]. Metabolic

modeling of individual commensal taxa has been used to predict plasma concentrations of

microbially derived metabolites [26], but these methods have not been extended to diverse, real-

world microbiomes. MCMMs can be constructed using existing knowledge bases, including

curated genome-scale metabolic models (GEMs) of individual taxa [27]. MCMMs are limited by

the availability of well-curated GEMs for abundant taxa present within every individual in a

population and by information on individual-specific dietary variation. These limitations are

further exacerbated in human populations that are generally underrepresented in microbiome

research, where our databases are also less representative [28]. However, as our knowledge

bases grow, so too will the power and scope of MCMMs. Overall, MCMMs have the potential to

serve as powerful, transparent, knowledge-driven tools for predicting community-specific

responses to a wide array of interventions or perturbations.

Here, we demonstrate the utility of MCMMs for the prediction of personalized SCFA

production profiles in the context of different dietary, prebiotic, and probiotic inputs. We first

validate our modeling platform using diverse synthetic *in vitro* gut microbial communities (N =

1,387) and *ex vivo* stool incubation assays (N = 29). Next, we investigate the relevance of this

modeling strategy *in vivo* using data from a 10-week high-fiber dietary intervention cohort (N =

18), where individuals showed a variety of immune responses. We assess the clinical

significance of these precision SCFA predictions by looking at associations between predicted

SCFA production on an average European diet and a panel of blood-based clinical lab tests in a

large human cohort (N = 2,687). Finally, we demonstrate the potential power of MCMMs in

designing personalized prebiotic, probiotic, and dietary interventions that optimize predictions

for individual-specific butyrate production rates.

Results

MCMMs capture SCFA production rates in vitro

Details on the origin and composition of each dataset used in these analyses can be found in

the supplement (**Table S1**).

We sought to investigate whether MCMMs can predict production rates of the major

SCFAs (i.e., acetate, propionate, and butyrate) under controlled experimental conditions (**Fig.**

1). Growth media, matching the environmental context of each experiment, were constructed

and applied as bounds on metabolic import to MCMMs (**Fig. 1A**), which were concurrently

constructed by combining manually-curated GEMs from the AGORA database [29] using MICOM

[21], constraining taxon abundances using 16S amplicon or shotgun metagenomic sequencing

relative abundance estimates (**Fig. 1B**). Sample-specific metabolic models were then solved

using cooperative tradeoff flux balance analysis (ctFBA), a previously-reported two-step

quadratic optimization strategy that yields empirically-validated estimates of the steady state

growth rates and metabolic uptake and secretion fluxes for each taxon in the model [21] (**Fig. 1C,**

see Materials and Methods). Models constructed from 16S amplicon sequencing data were

summarized at the genus level, which was the finest level of phylogenetic resolution that the

data allowed for. When shotgun metagenomic sequencing data were available, models were

constructed at the species level. Models constructed from both 16S and shotgun metagenomic

data at the species and genus levels showed highly consistent results (**Fig. S1**). Measured

SCFA production profiles from synthetic *in vitro* community and stool *ex vivo* experiments (**Fig.**

1D) were compared to paired SCFA flux predictions from MCMMs to validate the accuracy of

the models.

First, we looked at published data from synthetically constructed communities of

bacterial commensals isolated from the human gut [30]. This data set included endpoint

measurements of relative microbial abundances, derived from 16S amplicon sequencing,

measured endpoint butyrate concentrations, and the overall optical density for each of 1,387

independent co-cultures (**Fig. 2A**). Cultures varied in richness from 1-25 strains. MCMMs were

constructed for each co-culture as described above, simulating growth of each of the models

using a defined medium mapped to a database of metabolic constituents, matching the

composition of the medium used in the *in vitro* experiments (see Materials and Methods).

Model-predicted butyrate fluxes were compared with calculated butyrate production rates

(endpoint butyrate divided by culturing time, assuming no butyrate at the start of growth,

normalized to total biomass using OD600), stratifying results into low richness (1-5 genera) and

high richness (10-25 genera) communities. Model predictions for butyrate production fluxes

were significantly correlated with measured butyrate production fluxes across all communities

(Pearson's correlation; Low Richness: $r = 0.17$, $p < 0.001$; High Richness: $r = 0.53$, $p < 0.001$),

but the predictions were more accurate in the higher richness communities (**Fig. 2B-C**).

Next, we compared MCMM predictions to anaerobic *ex vivo* incubations of human stool

samples from a small number of individuals ($N = 29$), cultured after supplementation with sterile

PBS buffer or with different dietary fibers across four independent studies. Study A contained

samples from two donors cultured for 7 hours with a final dilution of 1:5, Study B [18] contained

samples from 10 donors cultured for 24 hours diluted 1:19, Study C contained samples from 8

donors cultured for 4 hours diluted 1:5, and Study D contained samples from 9 donors cultured

for 6 hours diluted 1:3. Fecal *ex vivo* assays allow for the direct measurement of bacterial SCFA

production fluxes without interference from the host. For all three studies, *ex vivo* incubations

were performed by homogenizing fecal material in sterile buffer under anaerobic conditions,

adding control or fiber interventions to replicate fecal slurries, and measuring the resulting SCFA

production rates *in vitro* at 37°C (see Materials and Methods). Metagenomic (Studies A, C and

D) or 16S amplicon (Study B) sequencing data from these *ex vivo* cultures were used to

construct MCMMs, using relative abundances as a proxy for relative biomass for each bacterial

taxon (see Materials and Methods). MCMMs were simulated using a diluted standardized

European diet (i.e., to approximate residual dietary substrates still present in the stool slurry),

with or without specific fiber amendments, matching the experimental treatments (see Material

and Methods). Within studies, the divergence in measured SCFA production between control

samples and fiber-treated samples seemed to be highly dependent upon the final dilution of the

ex vivo cultures (**Fig. S2**). This was accounted for by matching the dilution of residual fiber

(starch, cellulose and dextrin) in the medium used for growth simulation to the corresponding

study. For instance, Study A was diluted 1:5, so the residual fiber in the medium used to

simulate growth for these samples was diluted by a factor of 5. The resulting SCFA flux

predictions were then compared to the measured fluxes. MCMM fluxes are given in units of

mmol/gDW/h, while measured production fluxes are given in mmol/L/h. Without knowledge of

the live-cell biomass within the fecal homogenates, it was not possible to normalize the units

across the two axes, but the predicted and measured values were expected to be proportional.

To overcome study-specific differences in protocols and allow for comparison of results across

studies, we Z-scored both measured and predicted SCFA production fluxes within each data set

(**Fig. 2D-F**). We observed a similar degree of agreement between MCMM-predicted and

measured production fluxes for butyrate and propionate across all four *ex vivo* data sets (**Fig.**

2E-F). The model was notably less capable of accurately predicting differences in acetate

production between individuals, with no significant association seen (**Fig. 2-3**). Significant

agreement was observed between measured and predicted production fluxes of butyrate and

propionate within each individual data set (r =0.41-0.97, Pearson test, p<0.05) with the

exception of propionate in Study A, which had a very limited sample size (N = 2) (**Fig. 3E-L**).

Notably, the correlation coefficient (Pearson r) for these associations was similar to that seen in

the high-richness *in vitro* cultures (**Fig. 2C**). As previously seen, the prediction of acetate was

worse, most notably in studies C and D, where no significant prediction was observed. In

studies A and B, acetate production was more readily predicted, likely due to a strong

treatment-effect (**Fig. 3A-D**). Within treatment groups, similar correlations were observed,

though statistical power was severely limited by the smaller sample sizes (**Table S2**).

Predictions from models built with shotgun metagenomic sequencing data showed slightly better

results when constructed at the species level, as compared to building at the genus level (**Fig.**

S3). To test whether SCFA production was impacted by sample diversity, we compared

measured butyrate and propionate against Shannon index for each sample in each study (**Fig.**

S4). A weak significant signal was seen in only one of the four studies (Study D). In summary,

we observed agreement between MCMM predicted and measured *in vitro* production rates of

butyrate and propionate in the presence or absence of fiber supplementation, with better

agreement in more diverse communities and over longer experimental incubation times (**Fig. 2-**

3). As acetate was not well predicted by the MCMMs (i.e., acetate was not strongly coupled to

biomass production, and predictions could vary widely for the same biomass optimum), we

focused our downstream predictions and analyses on the SCFAs butyrate and propionate.

MCMM predictions correspond with variable immunological responses to a 10-week high-fiber

dietary intervention

We next investigated whether MCMM-predicted SCFA production rates could be leveraged to

help explain inter-individual differences in phenotypic response following a dietary intervention.

Specifically, we looked at data from 18 individuals who were placed on a high-fiber diet for ten

weeks [31]. These individuals fell into three distinct immunological response groups: one in which

high inflammation was observed over the course of the intervention (high-inflammation group),

and two other distinct response groups that both exhibited lower levels of inflammation (low-

inflammation groups I and II; **Fig. 4A**). We hypothesized that these immune response groups

could be explained, in part, by differences in MCMM-predicted production rates of anti-

inflammatory SCFAs. Using 16S amplicon sequencing data from seven time points collected

from each of these 18 individuals over the 10-week intervention, we built MCMMs for each study

participant at each time point. Growth was then simulated for each model using a standardized

high-fiber diet, rich in resistant starch (see Material and Methods). Throughout the study, a

trend of decreasing propionate production was observed in high-inflammation individuals (r =

0.39, Pearson test, p = 0.019), showing less production as the intervention went on, despite the

high fiber content of the diets consumed by participants (**Fig. 4B**). Individuals in the high-

inflammation group showed significantly lower predicted propionate production, on average,

compared to the individuals in each of the low-inflammation groups (High vs. Low I: 131.9 ± 5.8

vs 158.1 ± 5.7 mmol/(gDW h), Mann-Whitney p = 0.0053; High vs. Low II: 131.9 ± 5.8 vs

163.08.3 ± 6.5 mmol/(gDW h), Mann-Whitney p = 0.0017; **Fig. 4C**). Butyrate showed no such

significant effects across immune response groups (**Fig. 4D, 4E**). To investigate whether

sample alpha-diversity was sufficient to explain the differences between the immune response

groups, we calculated the alpha diversity for each sample at each timepoint during the study.

Across all seven time points tested, only one significant difference in alpha diversity was seen,

between the two low inflammation groups at time point 2 (Mann-Whitney U-test, p < 0.05),

leading us to determine that differences in SCFA production throughout the intervention were

not the result of differences in diversity.   (**Fig. S4**).

MCMM-predicted SCFA profiles are associated with a wide range of blood-based clinical

markers

To further evaluate the clinical relevance of personalized MCMMs, we generated SCFA

production rate predictions from stool 16S amplicon sequencing data for 2,687 individuals in a

deeply phenotyped, generally-healthy cohort from the West Coast of the United States (i.e., the

Arivale cohort) [32]. Baseline MCMMs were built for each individual assuming the same dietary

input (i.e., an average European diet) in order to compare SCFA production rate differences,

independent of background dietary variation. MCMM-predicted SCFA fluxes were then

regressed against a panel of 128 clinical chemistries and health metrics collected from each

individual, adjusting for a standard set of common covariates (i.e., age, sex, and microbiome

sequencing vendor; **Fig. 5A**). After FDR correction, 20 markers were significantly associated

with the predicted production rate of butyrate (**Fig. 5B**). Predicted butyrate production showed

significant positive associations with only 3 markers, including the health-associated hormone

adiponectin, and significant negative associations with 17 markers linked to disease, including

C-reactive protein (CRP), low-density lipoprotein (LDL), and blood pressure (mean arterial

pressure; $P < 0.05$, FDR-corrected t-test). Propionate showed no significant associations after

covariate adjustment and multiple comparison correction (**Fig. 5B**). Total combined propionate

and butyrate production was significantly associated with 16 clinical markers, all overlapping

with those associated with butyrate. Predicted butyrate production was significantly negatively

associated with BMI ($\beta = -0.10$, t-test, $p < 0.001$), while propionate was not (**Fig. 5 C-D**).

Covariate-adjusted p-values and beta coefficients for all clinical markers included in the analysis

can be found in the supplementary material (**Table S3**).

Leveraging MCMMs to design precision dietary, prebiotic, and probiotic interventions

As a proof-of-concept for *in silico* engineering of the metabolic outputs of the human gut

microbiome, we screened a set of potential interventions designed to increase SCFA production

for individuals from the Arivale cohort (**Fig. 6A**). MCMMs were built using two different dietary

contexts: an average European diet, and a vegan, high-fiber diet rich in resistant starch (see

Material and Methods). As expected, models grown on a high-fiber diet showed higher average

predicted butyrate production: 87.78 ± 0.67 mmol/(gDW h) vs 16.29 ± 0.13 mmol/(gDW h), t-

test, t = 104.3, p < 0.001 (**Fig. 6B**). However, this increase in butyrate production between the

European and high-fiber diets was not uniform across individuals. On the high-fiber diet, some

individual gut microbiota compositions showed very large increases in butyrate production,

some showed little-to-no change, and a small subset of samples actually showed a decrease in

butyrate production, relative to the European diet. We identified a set of 'non-responders' (N =

9) who produced less than 15 $\frac{mmol}{gDW*h}$ of butyrate on the European diet and showed an increase

in butyrate production of less than 20% on the high-fiber diet (**Fig. 6C**). We also identified a set

of 'regressors' (N = 7) who showed decreased butyrate production on the high-fiber diet when

compared to the European diet (**Fig. 6D**). We then simulated a handful of simple prebiotic and

probiotic interventions across these individuals, to identify optimal combinatorial interventions

for each individual (**Fig. 6C-E**). MCMMs for each subset of individuals were simulated with

prebiotic and probiotic interventions in the context of either the European or the high-fiber diet.

Specifically, diets were supplemented with the dietary fiber inulin, with the dietary fiber pectin, or

with a simulated probiotic intervention that consisted of introducing 10% relative abundance of

the butyrate-producing genus *Faecalibacterium* to the MCMM. In general, optimal combinatorial

interventions significantly increased the population-level butyrate production well above either

dietary intervention alone (**Fig. 6C-D**).

For 15/16 individuals in the regressors or non-responders groups, supplementation of

the background diet with a specific prebiotic or probiotic increased the butyrate production rate

(**Fig. 6C-E**). For both regressors and non-responders, the optimal intervention showed

substantial increases over the standard European diet (+290±80% for non-responders;

+239±102% for regressors). The exact intervention that yielded the highest butyrate production

for any given individual across both populations varied widely (**Fig. 6E**). For example, the

probiotic intervention was more successful in raising predictions for butyrate production in non-

responders than it was in regressors (**Fig. 6E**). Overall, no single combinatorial intervention was

optimal for every individual in the population.

Discussion

The objective of this study was to experimentally validate personalized MCMM SCFA

predictions. Predictions of butyrate production in synthetically constructed *in vitro* co-cultures

showed significant agreement between measured and predicted butyrate fluxes (**Fig. 2**), a first

step toward validation. Interestingly, better agreement was observed in richer communities,

indicating increased model complexity benefitted predictions. Decreasing accuracy of butyrate

predictions as community richness declined may reflect a limitation of building models at the

genus-level, as reconstructions contain a summarized aggregation of the metabolic capability of

the genus as a whole, without species- or strain-level resolution. Furthermore, we are

leveraging database models, which do not reflect the exact strains present in a given sample.

Consequently, pathways included in the metabolic models are not a perfect match to the reality

of what is present in a sample. In high richness models, predictions of SCFAs became more

accurate, suggesting this mismatch gets averaged out as species richness increases, likely due

to functional redundancies across organisms that can mask the inaccuracies of any single taxon

model. Alternatively, there could be some unknown biological reason for why SCFA production

is less variable in higher richness communities, which would affect our ability to make accurate

MCMM predictions. Overall, the observed increase in accuracy with community diversity

benefits modeling of real-world microbiomes, which are often more species-rich than synthetic

in vitro communities [33,34]. As our model databases grow to better-reflect the metabolic diversity

of real-world ecosystems, we expect MCMMs to become more and more accurate, independent

of community diversity.

Further validation of MCMM predictions was observed from *ex vivo* anaerobic fecal

incubations. We saw good agreement between SCFA flux predictions and measurements,

especially for butyrate and propionate, across four independent studies (**Fig. 3**). Acetate is

known to act as an overflow metabolite [35,36], with a wide range of possible fluxes for a given

biomass optimum, so it is perhaps not surprising that the predictions for this metabolite tended

to be less accurate across studies and within treatment groups. Butyrate and propionate,

however, showed a narrower range of possible fluxes for a given biomass optimum, suggesting

that the production of these molecules is more strongly coupled to biomass production. The

dilution level of the *ex vivo* stool incubations had a sizable effect on the results, where the *in*

vitro prebiotic treatment effect was dampened in less dilute fecal homogenates, likely due to the

presence of residual dietary fibers in stool. The more accurate predictions of acetate production

in the more dilute fecal homogenates is likely due to the fact that total SCFA production was

more strongly coupled to *in vitro* prebiotic treatment in these samples. Accounting for this

dilution factor in the construction of the *in silico* media improves predictions and returns more

accurate results for butyrate and propionate production.

We were interested in seeing how 16S- and metagenomic-based models compared at a

similar taxonomic level, and how genus and species level predictions compared, in order to

assess how applicable our modeling strategy could be to different data types. Using paired 16S

and shotgun metagenomic sequencing data from Study C, we saw strong agreement between

models constructed at the genus level for both 16S and metagenomic data (**Fig. S1**).

Furthermore, we saw robust agreement between predictions at the genus and species levels

across metagenomic data sets (**Fig. S5**). Interestingly, predictions from Studies A, C and D

showed marginally better agreement with measured values when constructed at the species

level vs. the genus level, indicating that higher specificity in model construction is desirable

when possible (**Fig. S5**). Across the *in vitro* and *ex vivo* studies, our results strongly support the

use of MCMMs for predicting personalized butyrate and propionate production rates in response

to prebiotic, probiotic, and dietary interventions*.*

In vivo validation via direct measurement of SCFA production is not easily accomplished,

due to the rapid consumption of these metabolites by the colonic epithelium and noisy

measurements in either stool or serum [37] [38]. However, higher SCFA production rates are known

to influence the phenotype of the host in a number of ways, including a reduction in systemic

inflammation and improvements in cardiometabolic health [17,22,39,40]. Wastyk et al. found that

among 18 individuals given a 10-week high fiber dietary intervention, one third showed an

increase in inflammation over the course of the intervention and two thirds showed a decline in

systemic markers of inflammation [31]. In the original paper, there was no clear mechanism for

explaining these variable immune response groups [31]. We found that propionate production, a

strong inhibitor of inflammation through activation of FFA2 and FFA3[41,42], was predicted to be

significantly lower in individuals who showed the high inflammation response (**Fig. 4B-C**) [31].

While it is impossible to say whether or not our propionate flux predictions are underlying these

dietary response phenotypes, the observed immune response groups and propionate

production fluxes could not be explained by differences in alpha-diversity between groups (**Fig.**

S4). We also had access to blood-based clinical labs and microbiome data for a cohort of 2,687

Americans. We built MCMMs for this cohort, assuming a standard European diet, and predicted

butyrate and propionate production. We found that butyrate was negatively associated with

systemic inflammation, LDL cholesterol, and insulin resistance, blood pressure, and BMI (**Fig.**

5). These results are consistent with what is known about how butyrate is protective against

inflammation, cardiovascular disease, obesity, and metabolic syndrome [17,22,39,40,43] (**Fig. 5B**),

and they provide us with further confidence in the predictive power of our MCMM approach.

Dietary interventions have long been known to elicit variable responses, but a mechanistic

framework for predicting this microbiome-mediated heterogeneity has not been available until

now.

Given this set of promising associations between SCFA predictions and host phenotypic

variation, we sought to demonstrate the potential for leveraging MCMMs for designing precision

prebiotic, probiotic, and dietary interventions. Using the Arivale cohort, we identified two classes

of individuals that responded differently to an *in silico* high-fiber dietary intervention: non-

responders and regressors (**Fig. 6**). We designed combinatorial interventions that added either

a prebiotic or a probiotic to the background diets, to see if we could rescue these non-responder

and regressor phenotypes. We found significant heterogeneity in which combinatorial

intervention was optimal across individuals from each of these response groups (**Fig. 6E**).

Given that the non-responders had low baseline levels of butyrate production to begin with and

did not respond to a high-fiber diet, this result underscores the importance of personalized

predictions for those who tend not to respond well to population-scale interventions. These

results also suggest that butyrate production in some individuals is limited by composition of the

microbiota, indicating that probiotic interventions would be necessary to induce meaningful

increases in production.

This study had several limitations that should be considered. First, we were limited by

the availability of high-quality fluxomic data sets for model validation. For example, we had

limited sample sizes in the *ex vivo* fecal studies presented above, due to the cost and difficulty

of generating these kinds of data for larger cohorts. Additionally, the human cohort data

presented here only provided indirect support for our MCMM predictions (**Figs. 4-5**). Second,

predictions are dependent on the availability of GEMs. Obtaining large numbers of GEMs that

faithfully recapitulate the full metabolic capacities of each organism in a sample is a challenging

task. We used the publicly available AGORA model database [29]. While AGORA models have

gone through some degree of manual curation, many of these models are not fully validated and

have been shown to include infeasible and missing reactions [44]. Nevertheless, these GEMs

appear to work well in the context of butyrate and propionate flux predictions. SCFA production

pathways are fairly phylogenetically conserved and adjacent to central metabolism, so we might

expect these reactions to be robust to strain- or species-level variation and variation in model

quality. However, predictions for metabolites that are peripheral to central metabolism will likely

be much noisier in the absence of well-curated models that closely match the organisms within

a given sample. Third, model building is dependent on accurate taxonomic assignment of

sequencing reads. For 16S amplicon sequencing, reads can only be confidently assigned at the

genus level, limiting the specificity of a model to the genera present in the original samples.

However, as model databases grow and shotgun metagenomic sequencing becomes more

common, we anticipate this limitation will be resolved. Finally, the lack of individual-specific

dietary constraints limits the accuracy of our predictions. For *ex vivo* fecal fermentations, as well

as *in vivo* analysis, participant dietary information was not available, and so a standard

European diet was used across all models. Detailed knowledge of dietary intake should

increase the accuracy of MCMM predictions. Despite these limitations, MCMMs were able to

explain 25-35% of the variance in butyrate and propionate production across individuals, and we

expect that advances in model curation, pathway annotation, and personalized dietary

constraints will only improve upon the accuracy of this approach over time.

Conclusion

Here we present an approach for the rational prediction of personalized SCFA production rates

from the human gut microbiome, validated using *in vitro, ex vivo* and *in vivo* experimental data.

Additional analysis demonstrated a clear relationship between SCFA predictions and

physiological responses in the host, including lower inflammation and improved cardiometabolic

health. SCFA predictions were also significantly associated with variable immune responses to

a high fiber dietary intervention. Finally, we showed how MCMMs could be used to rapidly

design and test combinatorial prebiotic, probiotic and dietary interventions *in silico* for a large

human population. Personalized prediction of SCFA production profiles from human gut

MCMMs represents an important technological step forward in leveraging computational

systems biology for precision nutrition. Mechanistic modeling allowed us to translate the

ecological composition of the gut microbiome into concrete, individual-specific metabolic

outputs, in response to particular interventions [45,46]. MCMMs are transparent models that do not

require training data, with clear causal and mechanistic explanations behind each prediction.

The clinical relevance of these predictions is evident, due to the widespread physiological

effects of SCFAs on the human body [47,48]. A rational framework for engineering the production

or consumption rates of these metabolites has broad potential applications in precision nutrition

and personalized healthcare.

Materials and Methods

In vitro culturing

Culturing of the synthetically assembled gut microbial communities is described in Clark et al.,

2021 [30]. Culturing of *ex vivo* samples in Study A was done using the methodology described

below. Culturing of *ex vivo* samples in Study B is described in Cantu-Jungles et al., 2021[18].

Culturing of *ex vivo* samples in Study C was conducted by co-author Dr. Thomas Gurry, using

the methodology described below.

In vitro culturing of fecal-derived microbial communities (Study A)

Fecal samples were collected in 1200 mL 2-piece specimen collectors (Medline, USA) in the

Public Health Science Division of the Fred Hutchinson Cancer Center (IRB Protocol number

5722) and transferred into an large vinyl anaerobic chamber (Coy, USA, 37°C, 5% hydrogen,

20% carbon dioxide, balanced with nitrogen) at the Institute for Systems Biology within 20

minutes of defecation. All further processing and incubation was then run inside the anaerobic

chamber. 50 g of fecal material was transferred into sterile 50 oz Filter Whirl-Paks (Nasco, USA)

with sterile PBS + 0.1% L-cysteine at a 1:2.5 w/v ratio and homogenized with a Stomacher

Biomaster (Seward, USA) for 15 minutes. After homogenization, each sample was transferred

into three sterile 250 mL serum bottles and another 2.5 parts of PBS + 0.1% L-cysteine was

added to bring the final dilution to 1:5 in PBS. 87 ug/mL inulin or an equal volume of sterile PBS

buffer were added to treatment or control bottles, respectively. Samples were immediately

pipetted onto sterile round-bottom 2 mL 96-well plates in triplicates. Baseline samples were

aliquoted into sterile 1.5 mL Eppendorf tubes and the plates were covered with Breathe-Easy

films (USA Scientific Inc., USA). Plates were incubated for 7 h at 37°C and gently vortexed

every hour within the chamber. Final samples were aliquoted into 1.5 mL Eppendorf tubes at the

end of incubation. Baseline and 7 h samples were kept on ice and immediately processed after

sampling. 500 uL of each sample were aliquoted for metagenomics and kept frozen at -80°C

before and during transfer to the commercial sequencing service (Diversigen, Inc). The

remaining sample was transferred to a table-top centrifuge (Fisher Scientific accuSpin, USA)

and spun at 1,500 rpm for 10 minutes. The supernatant was then transferred to collection tubes

kept on dry ice and transferred to the commercial metabolomics provider Metabolon, USA, for

targeted SCFA quantification.

In vitro culturing of fecal-derived microbial communities (Study C)

Homogenized fecal samples in this study again underwent anaerobic culturing at 37°C, as

described above, but with a shorter culturing time of 4 hours. The slurry was diluted 2.5x in

0.1% L-cysteine PBS buffer solution. Cultures were supplemented with the dietary fibers pectin

or inulin to a final concentration of 10g/L, or a sterile PBS buffer control treatment. Aliquots were

taken at 0h and 4h and further processed for measurement of SCFA concentrations, which were

used to estimate experimental production flux (concentration[4h] - concentration[0h]/4h). SCFA

concentrations were measured using GC-FID. Briefly, the pH of the aliquots was adjusted to 2-3

with 1% aqueous sulfuric acid solution, after which they were vortexed for 10 minutes and

centrifuged for 10 minutes at 10,000 rpm. 200 uL aliquots of clear supernatant were transferred

to vials containing 200 uL of MeCN and 100 uL of a 0.1% v/v 2-methyl pentanoic acid solution.

The resulting solutions were analyzed by GC-FID on a Perkin Elmer Clarus 500 equipped with a

DB-FFAP column (30m, 0.250mm diameter, 0.25um film) and a flame ionization detector.

In vitro culturing of fecal-derived microbial communities (Study D)

Fecal samples were collected in 1200 mL 2-piece specimen collectors (Medline, USA) in the

Public Health Science Division of the Fred Hutchinson Cancer Center (IRB Protocol number

10961) and transferred into a large vinyl anaerobic chamber (Coy, USA, 37°C, 5% hydrogen,

20% carbon dioxide, balanced with nitrogen) at the Institute for Systems Biology within 30

minutes of sample receipt. All further processing and incubation was then run inside the

anaerobic chamber. 30 g of fecal material was transferred into sterile 50 oz Filter Whirl-Paks

(Nasco, USA) with 90 mL sterile PBS + 0.1% L-cysteine + 0.0001% resazurin and homogenized

with a Stomacher Biomaster (Seward, USA) for 5 minutes. For each individual fecal sample,

triplicate baseline samples of 1500uL slurry were transferred to a deep 96-well place (Fisher

Scientific, USA), sealed and centrifuged at 4000rpm for 10 minutes. 300uL of the supernatant

were transferred to collection tubes and immediately frozen at -80°C. An additional 1800uL of

fecal slurry was transferred into a 2mL Eppendorf tube and frozen at -80°C for metagenomic

shotgun sequencing. Interventions of 100uL inulin at 625mg/L, pectin at 750mg/L or PBS were

transferred to in duplicate to a new deep 96-well plate, topped with 1500uL fecal slurry each,

and immediately sealed with Breathe-Easy films (USA Scientific Inc., USA). Plates were

incubated for 6 h at 37°C and gently vortexed every 2 hours within the chamber. After

incubation, plates were immediately centrifuged at 4000rpm for 10 minutes at room temperature

and 300uL of the supernatant was again transferred to collection tubes and kept at -80°C. The

frozen slurry sample for metagenomic shotgun sequencing was transferred to a commercial

sequencing service (Diversigen, Inc) on dry ice. The remaining supernatant samples were kept

on dry ice and transferred to the commercial metabolomics provider (Metabolon, USA) for

targeted SCFA quantification.

Metagenomic sequencing and analysis

For Study A, shallow metagenomic sequencing was performed by the sequencing vendor

Diversigen, USA (i.e., their BoosterShot service). In brief, DNA was extracted from the fecal

slurries with the DNeasy PowerSoil Pro Kit on a QiaCube HT (Qiagen, Germany) and quantified

using the Qiant-iT Picogreen dsDNA Assay (Invitrogen, USA). Library preparation was

performed with a proprietary protocol based on the Nextera Library Prep kit (Illumina, USA) and

the generated libraries were sequenced on a NovaSeq (Illumina, USA) with a single-end 100bp

protocol. Demultiplexing was performed using Illumina BaseSpace to generate the final FASTQ

files used during analysis. For Study D, DNA extraction was performed under the same protocol

as Study A. Libraries for Study D were prepared with the Nextera XT Library Prep kit (Illumina,

USA) and sequenced with a paired-end 2x150bp protocol on a NovaSeq 6000 (Illumina, USA)

yielding at least 70M reads/sample.

Preprocessing of raw sequencing reads from Study A and D was performed using

FASTP [49]. The first 5bp on the 5' end of each read were trimmed, and the 3' end was trimmed

using a sliding window quality filter that would trim the read as soon as the average window

quality fell below 20. Reads containing ambiguous base calls or with a length of less than 15bp

after trimming were removed from the analysis.

Bacterial species abundances were quantified using Kraken2 v2.0.8 and Bracken v2.2

using the Kraken2 default database which was based on Refseq release 94, retaining only

those species with at least 10 assigned reads [50,51]. The analysis pipeline can be found at

https://github.com/Gibbons-Lab/pipelines/tree/master/shallow_shotgun.

Metabolomics

Targeted metabolomics were performed using Metabolon's high-performance liquid

chromatography (HPLC)–mass spectrometry (MS) platform, as described before [52]. In brief,

fecal supernatants were thawed on ice, proteins were removed using aqueous methanol

extraction, and organic solvents were removed with a TurboVap (Zymark, USA). Mass

spectroscopy was performed using a Waters ACQUITY ultra-performance liquid

chromatography (UPLC) and Thermo Scientific Q-Exactive high resolution/accuracy mass

spectrometer interfaced with a heated electrospray ionization (HESI-II) source and an Orbitrap

mass analyzer operated at 35,000 mass resolution. For targeted metabolomics ultra-pure

standards of the desired short-chain fatty acids were used for absolute quantification. Fluxes for

individual metabolites were estimated as the rate of change of individual metabolites during the

incubation period (concentration[7h] - concentration[0h]/7h).

Model Construction

Taxonomic abundance data inferred from 16S amplicon sequencing was summarized to the

genus level (as in *in vitro* cultures, *ex vivo* study B, fiber intervention samples, and samples from

the Arivale cohort), or to the species level when shotgun metagenomic sequencing was

available (as in *ex vivo* studies A, C and D). Abundances were used to construct all MCMMs in

this analysis using the community-scale metabolic modeling platform MICOM v0.32.5 [21]. Models

were built using the MICOM build() function with a relative abundance threshold of 0.001,

omitting taxa that made up less than 0.1% relative abundance. The AGORA database (v1.03) of

taxonomic reconstructions summarized to the genus level for 16S data or the species level for

metagenomic sequencing data was used to collect genome-scale metabolic models for taxa

present in each model. Building models at the genus level for metagenomic sequencing data

was explored, but was outperformed by species level models. *In silico* media were applied to

the grow() function, defining the bounds for metabolic imports by the MCMM. Medium

composition varied between analyses (see *Media Construction).* Steady state growth rates and

metabolic fluxes for all samples were then inferred using cooperative tradeoff flux balance

analysis (ctFBA). In brief, this is a two-step optimization scheme, where the first step finds the

maximal biomass production rate for the full microbial community and the second step infers

taxon-specific growth rates and fluxes, while maintaining community growth within a suboptimal

fraction of the theoretical maximum (i.e., the tradeoff parameter), thus balancing individual

growth rates and the community-wide growth rate [21]. All models in the manuscript used a

tradeoff parameter of 0.7. This parameter value was chosen through cooperative tradeoff

analysis in MICOM. Multiple tradeoff parameters were tested, and the highest parameter value

(i.e. the value closest to the maximal community growth rate at 1.0) that allowed most (>90%) of

taxa to grow was chosen (i.e., 0.7). Predicted growth rates from the simulation were analyzed to

validate correct behavior of the models. All models were found to grow with minimum

community growth rate of 0.3 h^{-1}. Predicted values for export fluxes of SCFAs were collected

from each MCMM using the production_rates() function, which calculates the overall production

from the community that would be accessible to the colonic epithelium.

Media Construction

Individual media were constructed based on the context of each individual analysis. For the

synthetic *in vitro* cultures conducted by Clark et al. (2021), a defined medium (DM38) was used

that supported growth of all taxa used in the experiments, excluding *Faecalibacterium*

prausnitzii. Manually mapping each component to the Virtual Metabolic Human database, we

constructed an *in silico* medium with flux bounds scaled to component concentration. All

metabolites were found in the database. Using the MICOM fix_medium() function, a minimal set

of metabolites necessary for all models to grow to a minimum community growth rate of 0.3 h^{-1}

was added to the medium - here, only iron(III) was added (*in silico* medium available here:

https://github.com/Gibbons-Lab/scfa_predictions/tree/main/media).

To mimic the medium used in *ex vivo* cultures of fecally-derived microbial communities,

a carbon-stripped version of a standard European diet was used. First, a standard European

diet was collected from the Virtual Metabolic Human database (www.vmh.life/#nutrition) [53].

Components in the medium which could be imported by the host, as defined by an existing

uptake reaction in the Recon3D model [54], were diluted to 20% of their original flux, to adjust for

absorption in the small intestine[54]. Additionally, host-supplied metabolites such as mucins and

bile acids were added to the medium. The medium was augmented with a minimal set of

metabolites required for growth of all taxa in the model database using the

complete_db_medium() function within MICOM. As most carbon sources are consumed in the

body and are likely not present in high concentrations in stool, this diet was then manually

stripped of carbon sources by removing metabolites identified to be carbon sources for

microbes. All components in the media were then diluted to 10% of their original flux to mimic

the fecal microenvironment. Residual dietary fiber not easily digested including resistant starch,

dextrin and cellulose, was not removed from the medium during carbon removal. The amount of

this residual fiber was scaled to the dilution factor of samples in each study prior to culturing. To

simulate fiber supplementation, single fiber additions were made to the medium, either pectin,

inulin or fructo-oligosaccharide (1.0 mmol/gDW*h for pectin, 10.0 mmol/gDW*h for inulin, 100

mmol/gDW*h for FOS, based on carbon content reported for each).

For *in vivo* modeling, two diets were used: a high-fiber diet containing high levels of

resistant starch, and a standard European diet [53,55]. Again, both diets were collected from the

Virtual Metabolic Human database (www.vmh.life/#nutrition). Each medium was subsequently

adjusted to account for absorption in the small intestine by diluting metabolite flux as described

previously. Additionally, host-supplied metabolites such as mucins and bile acids were added to

the medium, to match the composition of the medium *in vivo*. Finally, the

complete_db_medium() function was again used to augment the medium, as described above.

Prebiotic interventions were designed by supplementing the high-fiber or average

European diet with single fiber additions, either pectin or inulin, as described previously.

Probiotic Intervention

To model a probiotic intervention, 5% relative abundance of the genus *Faecalibacterium*, a

known butyrate-producing taxon [56], was added to the MCMMs by adding a pan-genus model of

the taxon derived from the AGORA database (v1.03). Measured taxonomic abundances were

scaled to 95% of their initial values, after which *Faecalibacterium* was artificially added to the

model.

External Data Collection

Data containing taxonomic abundance, optical density, and endpoint butyrate concentration for

synthetically-constructed *in vitro* microbial cultures were collected from Clark et al. (2021) [30].

Endpoint taxonomic abundance data, calculated from fractional read counts collected via 16S

amplicon sequencing, was used to construct individual MCMMs for each co-culture (see *Model*

Construction). Resulting models ranged in taxonomic richness from 1 to 25 taxa.

Data from *ex vivo* studies A and D, containing shotgun metagenomic sequencing and

SCFA metabolomics, was collected and processed as described previously. Taxonomic

abundance data was used to construct MCMMs for each individual (see *Model Construction*).

From a study by Cantu-Jungles et al. (2021) [18] (*ex vivo* Study B), preprocessed

taxonomic abundance and SCFA metabolomics data was collected. Homogenized fecal

samples in this study underwent a similar culturing process, with a culturing time of 24 hours.

Cultures were supplemented with the dietary fiber pectin, or a PBS control. Initial and endpoint

metabolomic SCFA measurements were used to estimate experimental production flux

(concentration[24h] - concentration[0h]/24h). Taxonomic abundance data was used to construct

MCMMs for each individual .

Data from a third (Study C) was collected from the Pharmaceutical Biochemistry Group

at the University of Geneva, Switzerland, under study protocol 2019-00632, containing

sequencing data in FASTQ format and targeted metabolomics SCFA measurements.

Data was collected from Wastyk, et al 2021 [31], which provided 16S amplicon sequencing

data at 9 timepoints spanning 14 weeks, along with immunological phenotyping, for 18

participants undergoing a high-fiber dietary intervention. Only 7 timepoints spanning 10 weeks

were included in subsequent analysis, as the last 2 timepoints were taken after the conclusion

of the dietary intervention. MCMMs were constructed for each participant at each timepoint at

the genus level (see *Model Construction)*. Mean total butyrate and propionate production were

compared between immune response groups.

De-identified data was obtained from a former scientific wellness program run by Arivale,

Inc. (Seattle, WA) [32]. Arivale closed its operations in 2019. Taxonomic abundances, inferred

from 16S amplicon sequencing data, for 2,687 research-consenting individuals were collected

and used to construct MCMMs. 128 paired blood-based clinical chemistries taken within 30

days of fecal sampling were also collected and used to find associations between MCMM SCFA

predictions on a standard European diet and clinical markers. Blood pressure and BMI for each

individual were also collected. Metadata for each sample including age, sex, and microbiome

sequencing vendor were included in the analysis as confounders.

Statistical analysis

Statistical analysis was performed using SciPy (v1.9.1) and statsmodels (v0.14.0) in Python

(v3.8.13). Pearson correlation coefficients and p-values were calculated between measured and

predicted SCFA production fluxes in *in vitro* and *ex vivo* cultures, as well as for predicted SCFA

production fluxes across timepoints for an *in vivo* high-fiber intervention. Significance in SCFA

production between immune response groups in the high-fiber dietary intervention was

determined by non-parametric pairwise Mann-Whitney U test for butyrate, propionate, and

combined butyrate and propionate production. Association of MCMM-predicted SCFA

production flux with paired blood-based clinical labs was tested using OLS regression, adjusting

for age, sex, microbiome sequencing vendor, and tested for significance by two-sided t-test.

BMI was not included as a confounder in the analysis because it was itself negatively correlated

with butyrate production [43]. Multiple comparison correction for p-values was done using the

Benjamini–Yekutieli method for adjusting the False Discovery Rate (FDR) [57]. Comparison of

butyrate production between dietary interventions was tested using paired Student's t-tests. In

all analyses, significance was considered at the $p < 0.05$ threshold.

Data, Software, and Code Availability

Code used to run analysis and create figures for this manuscript can be found at

https://github.com/Gibbons-Lab/scfa_predictions.

Processed data for synthetically constructed cultures can be found at

https://github.com/RyanLincolnClark/DesignSyntheticGutMicrobiomeAssemblyFunction. Raw

sequencing data can be found at https://doi.org/10.5281/zenodo.4642238.

Raw sequencing data for Study A can be found in the NCBI SRA under accession number

PRJNA937304.

Processed data for *ex vivo* Study B can be found at

https://github.com/ThaisaJungles/fiber_specificity. Raw sequencing data can be found in the

NCBI SRA under accession number PRJNA640404.

Raw sequencing data for *ex vivo* Study C can be found in the NCBI SRA under accession

number PRJNA939256.

Raw sequencing data for *ex vivo* Study D can be found in the NCBI SRA under accession

number PRJNA1033794.

Processed data for the longitudinal high-fiber intervention study can be found at

https://github.com/SonnenburgLab/fiber-fermented-study/.

Qualified researchers can access the full Arivale deidentified dataset supporting the findings in

this study for research purposes through signing a Data Use Agreement (DUA). Inquiries to

access the data can be made at data-access@isbscience.org and will be responded to within 7

business days.

Illustrations were created with BioRender.com.

Acknowledgements

We thank members of the Gibbons Lab for helpful discussions and suggestions regarding this

work. Thanks to Nathan Price, Amy Willis, and Lauren Rajakovich for helpful input on this work.

Funding

This research was funded by Washington Research Foundation Distinguished Investigator

Award and by startup funds from the Institute for Systems Biology (to SMG). Fecal sample

collection at Fred Hutchinson Cancer Center was supported by P30 CA015704. Research

reported in this publication was supported by the National Institute of Diabetes and Digestive

and Kidney Diseases of the National Institutes of Health (NIH) under award no. R01DK133468

(to SMG), by the Global Grants for Gut Health from Yakult and Nature Portfolio (to SMG), and

by the National Institute on Aging of the National Institutes of Health (NIH) under award no.

U19AG023122 (to NR).

Author contributions

N.Q.B., S.M.G. and C.D. conceptualized the study. N.Q.B. ran the analyses, interpreted results

and authored the first draft of the manuscript. S.M.G. and C.D. provided funding, materials and

resources for the work, and supervised the work. S.M.G, C.D. and K.R.S. performed the *ex vivo*

fermentation and sampling included in Study A and D. C.D. ran metagenomic analysis. J.W.L.,

L.L., O.V., E.M.O., K.R.S. and T.G. contributed data and resources. T.W. and N.R. provided

support with analyses and statistical interpretation. All authors reviewed and edited the

manuscript.

685
686
687   **Citations**
688

1.   Oliphant, K. & Allen-Vercoe, E. Macronutrient metabolism by the human gut microbiome:

major fermentation by-products and their impact on host health. *Microbiome* **7**, 91 (2019).

2. Rackerby, B., Van De Grift, D., Kim, J. H. & Park, S. H. Effects of Diet on Human Gut

Microbiome and Subsequent Influence on Host Physiology and Metabolism. *Gut*

Microbiome and Its Impact on Health and Diseases 63–84 Preprint at

https://doi.org/10.1007/978-3-030-47384-6_3 (2020).

3. Tomasova, L., Grman, M., Ondrias, K. & Ufnal, M. The impact of gut microbiota metabolites

on cellular bioenergetics and cardiometabolic health. *Nutr. Metab.* **18**, 72 (2021).

4. Glotfelty, L. G., Wong, A. C. & Levy, M. Small molecules, big effects: microbial metabolites

in intestinal immunity. *Am. J. Physiol. Gastrointest. Liver Physiol.* **318**, G907–G911 (2020).

5. Donia, M. S. & Fischbach, M. A. HUMAN MICROBIOTA. Small molecules from the human

microbiota. *Science* **349**, 1254766 (2015).

6. Diener, C. *et al.* Genome-microbiome interplay provides insight into the determinants of the

human blood metabolome. *Nat Metab* **4**, 1560–1572 (2022).

7. Ríos-Covián, D. *et al.* Intestinal Short Chain Fatty Acids and their Link with Diet and Human

Health. *Front. Microbiol.* **7**, 185 (2016).

8. Nogal, A., Valdes, A. M. & Menni, C. The role of short-chain fatty acids in the interplay

between gut microbiota and diet in cardio-metabolic health. *Gut Microbes* **13**, 1–24 (2021).

9. Silva, Y. P., Bernardi, A. & Frozza, R. L. The Role of Short-Chain Fatty Acids From Gut

Microbiota in Gut-Brain Communication. *Frontiers in Endocrinology* vol. 11 Preprint at

https://doi.org/10.3389/fendo.2020.00025 (2020).

10. Morrison, D. J. & Preston, T. Formation of short chain fatty acids by the gut microbiota and

their impact on human metabolism. *Gut Microbes* **7**, 189–200 (2016).

11. Cong, J., Zhou, P. & Zhang, R. Intestinal Microbiota-Derived Short Chain Fatty Acids in

Host Health and Disease. *Nutrients* **14**, (2022).

12. Yang, W. *et al.* Intestinal microbiota-derived short-chain fatty acids regulation of immune

cell IL-22 production and gut immunity. *Nat. Commun.* **11**, 4457 (2020).

13. Scheppach, W. *et al.* Effect of butyrate enemas on the colonic mucosa in distal ulcerative

colitis. *Gastroenterology* **103**, 51–56 (1992).

14. Tang, Y., Chen, Y., Jiang, H., Robbins, G. T. & Nie, D. G-protein-coupled receptor for short-

chain fatty acids suppresses colon cancer. *Int. J. Cancer* **128**, 847–856 (2011).

15. Singh, N. *et al.* Activation of Gpr109a, receptor for niacin and the commensal metabolite

butyrate, suppresses colonic inflammation and carcinogenesis. *Immunity* **40**, 128–139

(2014).

16. Tan, J. *et al.* The role of short-chain fatty acids in health and disease. *Adv. Immunol.* **121**,

91–119 (2014).

17. Mortensen, P. B. & Clausen, M. R. Short-chain fatty acids in the human colon: relation to

gastrointestinal health and disease. *Scand. J. Gastroenterol. Suppl.* **216**, 132–148 (1996).

18. Cantu-Jungles, T. M. *et al.* Dietary Fiber Hierarchical Specificity: the Missing Link for

Predictable and Strong Shifts in Gut Bacterial Communities. *MBio* **12**, e0102821 (2021).

19. Healey, G. R., Murphy, R., Brough, L., Butts, C. A. & Coad, J. Interindividual variability in

gut microbiota and host response to dietary interventions. *Nutr. Rev.* **75**, 1059–1080

(2017).

20. Boets, E. *et al.* Quantification of in Vivo Colonic Short Chain Fatty Acid Production from

Inulin. *Nutrients* **7**, 8916–8929 (2015).

21. Diener, C., Gibbons, S. M. & Resendis-Antonio, O. MICOM: Metagenome-Scale Modeling

To Infer Metabolic Interactions in the Gut Microbiota. *mSystems* **5**, (2020).

22. van Deuren, T., Blaak, E. E. & Canfora, E. E. Butyrate to combat obesity and obesity-

associated metabolic disorders: Current status and future implications for therapeutic use.

Obes. Rev. **23**, e13498 (2022).

23. Zeevi, D. *et al.* Personalized Nutrition by Prediction of Glycemic Responses. *Cell* **163**,

740   1079–1094 (2015).

741 24. Rein, M. *et al.* Effects of personalized diets by prediction of glycemic responses on

742   glycemic control and metabolic health in newly diagnosed T2DM: a randomized dietary

743   intervention pilot trial. *BMC Med.* **20**, 56 (2022).

744 25. Gibbons, S. M. *et al.* Perspective: Leveraging the Gut Microbiota to Predict Personalized

745   Responses to Dietary, Prebiotic, and Probiotic Interventions. *Adv. Nutr.* **13**, 1450–1461

746   (2022).

747 26. Shoaie, S. *et al.* Quantifying Diet-Induced Metabolic Changes of the Human Gut

748   Microbiome. *Cell Metab.* **22**, 320–331 (2015).

749 27. Heinken, A. *et al.* Genome-scale metabolic reconstruction of 7,302 human microorganisms

750   for personalized medicine. *Nat. Biotechnol.* (2023) doi:10.1038/s41587-022-01628-0.

751 28. Abdill, R. J., Adamowicz, E. M. & Blekhman, R. Public human microbiome data are

752   dominated by highly developed countries. *PLoS Biol.* **20**, e3001536 (2022).

753 29. Magnúsdóttir, S. *et al.* Generation of genome-scale metabolic reconstructions for 773

754   members of the human gut microbiota. *Nat. Biotechnol.* **35**, 81–89 (2017).

755 30. Clark, R. L. *et al.* Design of synthetic human gut microbiome assembly and butyrate

756   production. *Nat. Commun.* **12**, 3254 (2021).

757 31. Wastyk, H. C. *et al.* Gut-microbiota-targeted diets modulate human immune status. *Cell*

758   **184**, 4137–4153.e14 (2021).

759 32. Manor, O. *et al.* Health and disease markers correlate with gut microbiome composition

760   across thousands of people. *Nat. Commun.* **11**, 5206 (2020).

761 33. Quigley, E. M. M. Gut bacteria in health and disease. *Gastroenterol. Hepatol.* **9**, 560–569

762   (2013).

763 34. Guinane, C. M. & Cotter, P. D. Role of the gut microbiota in health and chronic

764   gastrointestinal disease: understanding a hidden metabolic organ. *Therap. Adv.*

Gastroenterol. **6**, 295–308 (2013).

35. Valgepea, K. *et al.* Systems biology approach reveals that overflow metabolism of acetate

in Escherichia coli is triggered by carbon catabolite repression of acetyl-CoA synthetase.

BMC Syst. Biol. **4**, 166 (2010).

36. Wolfe, A. J. The acetate switch. *Microbiol. Mol. Biol. Rev.* **69**, 12–50 (2005).

37. Liu, H. *et al.* Butyrate: A Double-Edged Sword for Health? *Adv. Nutr.* **9**, 21–29 (2018).

38. Sze, M. A., Topçuoğlu, B. D., Lesniak, N. A., Ruffin, M. T., 4th & Schloss, P. D. Fecal

Short-Chain Fatty Acids Are Not Predictive of Colonic Tumor Status and Cannot Be

Predicted Based on Bacterial Community Structure. *MBio* **10**, (2019).

39. Gut microbial metabolites lower blood pressure in patients with hypertension. *Nat*

Cardiovasc Res **2**, 18–19 (2023).

40. Amiri, P. *et al.* Role of Butyrate, a Gut Microbiota Derived Metabolite, in Cardiovascular

Diseases: A comprehensive narrative review. *Front. Pharmacol.* **12**, 837509 (2021).

41. Tough, I. R., Forbes, S. & Cox, H. M. Signaling of free fatty acid receptors 2 and 3 differs in

colonic mucosa following selective agonism or coagonism by luminal propionate.

Neurogastroenterol. Motil. **30**, e13454 (2018).

42. Ulven, T. Short-chain free fatty acid receptors FFA2/GPR43 and FFA3/GPR41 as new

potential therapeutic targets. *Front. Endocrinol.* **3**, 111 (2012).

43. Coppola, S., Avagliano, C., Calignano, A. & Berni Canani, R. The Protective Role of

Butyrate against Obesity and Obesity-Related Diseases. *Molecules* **26**, (2021).

44. Babaei, P., Shoaie, S., Ji, B. & Nielsen, J. Challenges in modeling the human gut

microbiome. *Nat. Biotechnol.* **36**, 682–686 (2018).

45. Gurry, T., Nguyen, L. T. T., Yu, X. & Alm, E. J. Functional heterogeneity in the fermentation

capabilities of the healthy human gut microbiota. *PLoS One* **16**, e0254004 (2021).

46. Passi, A. *et al.* Genome-Scale Metabolic Modeling Enables In-Depth Understanding of Big

Data. *Metabolites* **12**, (2021).

47.   Gasaly, N., de Vos, P. & Hermoso, M. A. Impact of Bacterial Metabolites on Gut Barrier

Function and Host Immunity: A Focus on Bacterial Metabolism and Its Relevance for

Intestinal Inflammation. *Front. Immunol.* **12**, 658354 (2021).

48.   Agus, A., Clément, K. & Sokol, H. Gut microbiota-derived metabolites as central regulators

in metabolic disorders. *Gut* **70**, 1174–1182 (2021).

49.   Chen, S., Zhou, Y., Chen, Y. & Gu, J. fastp: an ultra-fast all-in-one FASTQ preprocessor.

Bioinformatics **34**, i884–i890 (2018).

50.   Wood, D. E., Lu, J. & Langmead, B. Improved metagenomic analysis with Kraken 2.

Genome Biol. **20**, 257 (2019).

51.   Lu, J., Breitwieser, F. P., Thielen, P. & Salzberg, S. L. Bracken: estimating species

abundance in metagenomics data. *PeerJ Comput. Sci.* **3**, e104 (2017).

52.   Gauglitz, J. M. *et al.* Enhancing untargeted metabolomics using metadata-based source

annotation. *Nat. Biotechnol.* **40**, 1774–1779 (2022).

53.   Elmadfa, I. Österreichischer Ernährungsbericht 2012. **1**, (2012).

54.   Brunk, E. *et al.* Recon3D enables a three-dimensional view of gene variation in human

metabolism. *Nat. Biotechnol.* **36**, 272–281 (2018).

55.   Waldmann, A., Koschizke, J. W., Leitzmann, C. & Hahn, A. Dietary intakes and lifestyle

factors of a vegan population in Germany: results from the German Vegan Study. *Eur. J.*

Clin. Nutr. **57**, 947–955 (2003).

56.   Zhou, L. *et al.* Faecalibacterium prausnitzii Produces Butyrate to Maintain Th17/Treg

Balance and to Ameliorate Colorectal Colitis by Inhibiting Histone Deacetylase 1. *Inflamm.*

Bowel Dis. **24**, 1926–1940 (2018).

57.   Benjamini, Y. & Hochberg, Y. Controlling the false discovery rate: A practical and powerful

approach to multiple testing. *J. R. Stat. Soc.* **57**, 289–300 (1995).

823 **Figures and Figure Captions**
824

Figure 1. Microbial community-scale metabolic models (MCMMs) predict personalized SCFA
production profiles. Schematic of our workflow for validating MCMM-based personalized predictions
for SCFA production. **(A)** Prior to modeling, an *in silico* medium is constructed, containing a matched
diet mapped to its constituent metabolic components. The medium is depleted in compounds absorbed
by the host in the small intestine and augmented with other host-supplied compounds, in addition to
adding a minimal set of metabolites required for growth. **(B)** MCMMs are constructed, combining
abundance and taxonomic data with pre-curated GEMs into a community model. **(C)** Growth in the
MCMM is simulated through cooperative tradeoff flux balance analysis (ctFBA), yielding predicted
growth rates and SCFA production fluxes. **(D)** To validate predicted levels of SCFA production fluxes,
measured production fluxes are collected from *in vitro* communities of human gut commensals and

fecal samples cultured anaerobically *ex vivo* at 37°C over time. **(E)** Predicted and measured SCFA
production fluxes are compared to assess the accuracy of the model.
838
839

B. Butyrate Production   **C.** Butyrate Production

D.   **E.**   **F.**

Figure 2. Relationship between predicted and measured butyrate production rates in *in vitro* and *ex vivo* co-cultures. Butyrate production flux predictions from MCMMs are shown on the y-axes and measured values are shown on the x-axes, along with R^2 and p-values from a Pearson's correlation **(A)** *In vitro* or *ex vivo* communities were cultured anaerobically. Endpoint butyrate concentration was used to calculate production flux and compared with MCMM-predicted flux. **(B)** Predicted and measured butyrate fluxes in models of low richness synthetic communities (1-5 genera per model, N = 882). **(C)** Predicted and measured butyrate fluxes in models of high richness synthetic communities (10-25 genera, N = 697). **(D-F)** Z-scored predicted and measured fluxes for acetate, butyrate and propionate, across four independent *ex vivo* studies. The label in the figure legend indicates the final dilution level of cultures in each study (dilution = 1:x). In (B-F) the dashed line denotes a linear model fit to the data, with the surrounding shaded region indicating the 95% confidence interval.

 Figure 4. Predicted SCFA production profiles were associated with variable immune
869 **response groups following a high-fiber dietary intervention. (A)** Summary of the study from
870 Wastyk et al.[31], where a cohort of 18 individuals participated in a 10-week high-fiber dietary
871 intervention. Immune profiling based on circulating inflammatory cytokines and immune cells
872 clustered individuals into three groups: two low-inflammation groups and one high-inflammation
873 group. **(B)** Total predicted propionate production at each timepoint across the three immune-
874 response groups identified in the original study. **(C)** Average predicted propionate production
875 rates, stratified by immune response group **(D)** Total predicted butyrate production at each
876 timepoint across the three immune-response groups identified in the original study. **(E)** Average
877 predicted butyrate production rates, stratified by immune response group. In (B-E) stars denote
878 significance under a Mann-Whitney U-test, * = $p<0.05$, ** = $p< 0.01$, *** = $p<0.001$.

879
880

881 **Figure 5. SCFA flux predictions are significantly associated with blood-derived clinical**
882 **markers. (A)** MCMMs were constructed for 2,687 Arivale participants, assuming an average
883 European diet, to predict SCFA production profiles. SCFA predictions were regressed against a
884 set of 128 blood-based clinical labs and health markers, with sex, age, and sequencing vendor
885 as covariates in the regressions. **(B)** Heatmap showing the 20 significant associations (FDR-
886 corrected t-test $p<0.05$) between measured blood markers and predicted SCFA production
887 rates. **(C-D)** Predictions for butyrate were significantly correlated with reported BMI

888 measurements for respective participants, but not for propionate. Each dot denotes an individual
889 model reconstructed for a single sample in the Arivale study (N = 2,687). The black line denotes
890 a linear regression line and the gray area denotes the 95% confidence interval of the
891 regression. β-coefficients were calculated from multiple regression accounting for age, sex and
892 microbiome sequencing vendor.

893
894
895

Figure 6. Microbial MCMMs can be used to design and select personalized prebiotic,
probiotic, and dietary interventions aimed at optimizing SCFA production profiles. (A)
MCMMs built from the Arivale cohort (N = 2,687) were used to test personalized responses to
dietary interventions. Personalized models were simulated on an average European diet, as
well as on a high-fiber diet, and divided into responders, non-responders, and regressors, based
on the changes in predicted butyrate production in response to increasing dietary fiber. Non-
responders were defined as individuals who produced less than 15——— of butyrate on the
European diet and showed an increase of less than 20% in butyrate production on the high-fiber
diet. Regressors were defined as individuals who showed a decline in butyrate production on
the high-fiber diet when compared to the European diet. Single-fiber and probiotic interventions
were applied to non-responders and regressors. **(B)** Distribution of butyrate production rates on
two different diets simulated for all participants in the study. Butyrate production ranges that
contain non-responders (N = 9) and regressors (N = 7) are highlighted in green and yellow
shaded areas, respectively. **(C)** Distributions of butyrate production rates for the non-responder
group (N = 9). The optimal intervention resulting in the highest butyrate production is shown in

blue. **(D)** Butyrate production rates for the regressor group (N = 7). The optimal intervention that resulted in the highest butyrate production is shown in blue. **(E)** Heatmap of butyrate production rates across simulated interventions for the individuals in the non-responder and regressor groups. Rows denotes specific interventions, columns denote individuals in the response groups (N = 16). Cell shading (white-to-red) denotes butyrate production rate. Added interventions tested on both non-responders and regressors included probiotic supplementation (inulin or pectin) as well as prebiotic supplementation (5% relative abundance *Faecalibacterium*). The most successful intervention for each individual is denoted by a black border around that cell in the corresponding column.

Supplemental Figures and Captions

962
Figure S1. Predictions of SCFA production using 16S amplicon sequencing or shotgun metagenomic sequencing data show concordance. Data from Study C included 16S amplicon sequencing as well as shotgun metagenomic sequencing. The black line denotes a linear regression line and the gray area denotes the 95% confidence interval of the regression. Color encoding indicates the specific fiber treatment given to each sample. **(A-B)** Predictions for butyrate and propionate between models summarized to the genus level from 16S amplicon sequencing data and shotgun metagenome data. **(C-D)** Predictions for butyrate and propionate from models built using shotgun metagenome data at the genus level and species level.

972
Figure S2. Divergence in SCFA production between controls and fiber-treated samples is
related to culture dilution. Four independent *ex vivo* studies were used to validate predictions
of MCMMs. Each study used a different dilution for the final culture, changing the scale of
substrates available to the microbial communities. Illustrated here, the dilution factor, shown
next to the study name, seems to show agreement with the divergence in SCFA production
between control samples and fiber-treated samples. This was accounted for by diluting the
residual fiber available to the microbial communities in the *in silico* medium.

980
Figure S3. MCMMs built from shotgun metagenomic sequencing data perform better
when constructed at the species level, as compared to the genus level. MCMMs from *ex*
vivo studies A, C and D were constructed at the **(A)** genus and **(B)** species level. Prediction
production rate of butyrate and propionate more closely matched measured production rate in
the species level model as compared to the genus level model. The black line denotes a linear
regression line and the gray area denotes the 95% confidence interval of the regression. Color
encoding indicates the specific treatment from which Pearson r and associated p-value were
calculated for each panel.
989
990

991
992
Figure S4. Alpha diversity of communities does not account for differences in SCFA
production. We compared Shannon index, a measure of alpha diversity, against SCFA
production in *ex vivo* communities, as well as between immune response groups in a
longitudinal high fiber study. **(A)** Propionate production in four *ex vivo* datasets was not
consistently explained by alpha diversity. In study D, a significant relationship was observed as
determined by t-test (p < 0.05), but this was not consistent between datasets. The black line
denotes a linear regression line and the gray area denotes the 95% confidence interval of the
regression. Color encoding denotes the specific fiber treatment that was given to each sample
(B) Butyrate production also showed no consistent correlation with alpha diversity, although a
significant difference was again observed within Study D as determined by t-test (p < 0.05). **(C)**
No consistent pattern emerged with regard to alpha diversity between immune response groups
throughout the course of the high fiber dietary intervention, as determined by Mann Whitney U
test for significance. In C, * = p < 0.05.