Human milk bacteria assembled into functionally distinct synthetic communities in infant formula differently affect intestinal physiology and microbiota in neonatal mini-piglets

Charles Le Bras[a,b], Gwenaelle Randuineau[a], Armelle Cahu[a], Patrice Dahirel[a], Sylvie Guérin[a], Regis Janvier[a], Véronique Romé[a], Lucie Rault[b], Marie-Bernadette Maillard[b], Amandine Bellanger[c], Yves Le Loir[b], Sophie Blat[a], Sergine Even[b¤], Isabelle Le Huërou-Luron[a¤]

[a]*Institut NuMeCan, INRAE, INSERM, Université de Rennes, Saint Gilles, France;*

[b]*STLO, INRAE, Institut Agro Rennes Angers, France;*

[c]*CHU Rennes, Pediatric Department, CIC-Inserm 1414, Rennes, France.*

Running Head (54 characters and space): Human milk SynComs alter gut functions and microbiota

Address correspondence to I. Le Huërou-Luron, isabelle.luron@inrae.fr

¤, Isabelle Le Huërou-Luron and Sergine Even contributed equally to this work.

Word count for the abstract : 251

Importance section : 131

Word count for the text : 5028

Abstract

The contribution of Human milk (HM) microbiota to infant gut health was addressed by evaluating the impact of HM bacteria, combined in two synthetic communities (SynComs) exhibiting anti-inflammatory (AI) or high immunomodulatory (HI) properties *in vitro*, on gut immune and barrier functions, and microbiota. Neonatal mini-piglets were fed either a formula without supplementation (CTRL) or supplemented with AI or HI SynComs, and were compared to sow milk-fed (SM) piglets over a period of 24 days. Feces were collected on postnatal day (PND) 8, and ileal, colonic and fecal samples were collected on PND24. The multifactorial analysis indicated that the two HM-derived SynComs impacted microbiota and intestinal functions differently. Several genera, mainly belonging to Bacillota, displayed different relative abundances between the formula-fed groups at both PND8 and PND24. At PND8, the fecal sIgA level in HI piglets was slightly lower than in SM piglets but markedly higher than in CTRL and AI piglets. SynComs HI and/or AI slightly increased the expression of genes involved in pro-inflammatory (IL6, TNFaR1), antioxidant (SOD2), anti-inflammatory (SOCS3) and Treg (FOXP3) pathways in ileal and colonic tissues compared with the CTRL group. Systemic immune functions were also modulated with a cytokine secretion capacity of peripheral blood mononuclear cells that tended to be higher with HI supplementation. Interestingly, SynCom bacteria were correlated with several ileal and colonic genera, and both were correlated with physiological variables. Overall, our findings support the influence of HM bacteria, provided in formulas as SynCom at a physiological concentration, on gut microbiota and functions.

Importance

Early-life environmental factors, such as neonatal diet, influence the gut microbiota,

which plays a key role in the functional development of the gut. However, the role of

the human milk (HM) microbiota, particularly with regard to the immunomodulatory

properties of HM bacteria, is not well understood. This study investigates the

differential effects of two synthetic communities with a similar taxonomic composition

representative of the taxonomic diversity of the HM microbiota. Thse communities

exhibit contrasting immunomodulatory properties that were previously characterized

using an *in vitro* intestinal quadricellular model. Daily supplementation with these two

SynComs modulated the composition of the gut microbiota and the gut physiology

differently, particularly the intestinal immune signatures. In conclusion, the functional

profile of bacteria within the HM microbiota may induce distinct developmental profiles

of gut physiology in infants.

Introduction

Optimal infant growth and development, particularly with regard to gut digestive and

immunological functions and microbiota, depend on early nutrition (1). Human milk

(HM) is the optimal source of nutrition for infants in their first few months of life (2, 3).

The beneficial properties of HM are mediated by bioactive compounds that promote

the maturation of the gut immune system in interaction with the development of the gut

microbiota (4, 5). Breast milk contains a diverse bacterial community, with over 200

different species belonging to dozens of genera identified (6, 7). That includes the

prevalent genera *Bifidobacterium* and *Lactobacillus*, as well as *Streptococcus,*

Staphylococcus, Cutibacterium and *Corynebacterium* (6, 8, 9). Despite the low

bacterial load in HM (10^3-10^4 colony-forming units (CFU)/mL), these bacteria contribute

to the neonatal gut microbiota, accounting for 5-33 % of the total bacteria present in

the feces of breastfed infants under six months of age (10, 11). Beyond their direct role in seeding the infant microbiota, HM bacteria are likely to contribute to the development of the gut microbiota. This is achieved by competing with gut microbes for nutrients or mucosal binding sites, directly inhibiting them, or contributing to trophic chains (4). HM bacteria may also influence the development of the gut immune system. This occurs via their immunomodulatory properties, such as modulation of cytokine production and the induction of secretory IgA (sIgA), or via their impact on gut barrier function (12). The immunomodulatory activity of HM bacteria may be associated with the presence of bacterial surface antigens or intracellular antigens, released during digestion, as well as their metabolism. Some HM bacteria can digest human milk oligosaccharides (HMOs) and other milk compounds, producing short chain fatty acids (SCFAs) with significant immunomodulatory capacities (7). Studies *in vitro* and *in vivo* in mice and piglets have shown that HM bacteria belonging to the genera *Bifidobacterium*, *Lactobacillus* and *Streptococcus* exhibit a wide variety of immunomodulatory profiles (13–17). With the exception of these genera, little information is available on the immunomodulatory properties of HM strains belonging to other genera. However, bacteria belonging to these genera that have been isolated from other types of microbiota, such as skin, mouth or gut microbiota, have also demonstrated strain-dependent immunomodulatory capacities, and impacted barrier function (18–21). This suggests that HM-derived bacteria can impact gut physiological functions. Nevertheless, the impact of HM-derived bacteria assembled in complex communities that mimic the actual bacterial communities present in HM, at a low but continuous dose, on gut functions and microbiota has been insufficiently addressed so far.

To further explore the *in vivo* role of HM bacteria assembled in synthetic bacterial communities (SynComs) on intestinal homeostasis, Yucatan piglets were fed dairy-

based infant formula supplemented with HM SynComs. The suckling pig is a well-

established and suitable animal model for human infants, with a digestive system that

is well characterised and closely resembles that of humans (22–25). Furthermore,

Yucatan piglets can consume a diet consisting entirely of dairy-based infant formula

and provide sufficient tissue and digesta samples for various analyses (26). A

sequential microbial colonization of the digestive system with a progressive increase

in α-diversity occurs during suckling and especially at weaning in the piglet as in the

human infant (27–29). Two SynComs of 11 HM strains each, closely related in terms

of taxonomy and covering the prevalent taxa of HM microbiota were used. We have

previously demonstrated *in vitro* that the intestinal epithelium was differently affected

depending on the HM strain assembly, these two SynComs displaying an anti-

inflammatory profile (AI) *vs.* a high immunostimulatory (HI) one (9). It was hypothesized

that these two HM SynComs added to infant formula at a concentration close to

physiological concentrations ($\sim 5.5.10^5$ CFU/mL infant formula) would differentially

affect key gut immune and barrier functions *in vivo*, according to their functional

characteristics, in association with changes in gut microbiota composition. The gut

immune and barrier functions and microbiota were also examined in sow milk-fed (SM)

piglets as a natural physiological control group.

Results

SynCom supplementation of formulas was well tolerated and did not affect piglet

growth

From postnatal day (PND) 2 to PND24, Yucatan piglets were fed dairy-based infant

formula (Supplemental Table S1) without supplementation (CTRL) or supplemented

with SynComs AI or HI (Table 1; (9)). The AI and HI bacterial doses added in formulas

corresponded to 5.5 x 10^5 CFU/mL formula, amounting to an average daily intake of

1.28 x 10^8 CFU/kg body weight (BW) for piglets fed supplemented formulas. During

the whole experimental period, formula-fed piglets remained healthy, consumed an

average value of 255 ± 3 mL/kg BW, with an average daily BW gain of 74 ± 14 g/day

(Figure 1). Supplementing formulas with SynComs had no significant effect on BW

gain compared to the CTRL, though a significant sex effect was observed (P=0.045)

(Figure 1). As expected, SM piglets showed significantly higher growth (P<0.05) with

an average daily BW gain of 146 ± 4 g/day compared to the formula-fed piglets.

Overall impact of SynCom AI and HI on the intestinal homeostasis of formula-

fed piglets

A multifactorial analysis (MFA) was conducted in order to analyze the overall effect of

SynCom supplementation of formulas on intestinal homeostasis. To this purpose,

Partial Least Squares-Discriminant Analysis (PLS-DA) was first performed on the

variables related to microbiota composition, SCFA concentration, Ussing chamber

permeability, histomorphometric data, sIgA content and gene expression measured in

the ileum and colon as well as cytokine and sIgA production of ileal Peyer Patch (PP)

cell culture, from the three formula-fed piglet groups (dataset accessible in the

repository https://doi.org/10.57745/ATTHZ3) . The most discriminant variables with a

Variable Importance in Projection (VIP) score >1 in the PLS-DA (n = 112 out of a total

of 201 variables in the ileum and n = 141 out of a total of 250 variables in the colon)

were selected for the MFA after grouping by function (barrier, immunity, microbiota

activity, nutrient transporter, endocrine and tryptophan metabolism) or phylum

(Actinomycetota, Bacillota, Bacteroidota, Pseudomonadota, and 'Other Phyla') as

detailed in Materials & Methods section (Supplemental Figure S1, dataset accessible

in the repository https://doi.org/10.57745/ATTHZ3). MFA was able to distinguish the

three groups of formula-fed piglets in the ileum and in the colon (Figure 2). The groups

of variables contributing to the discrimination between formula-fed piglet groups

included immunity, microbiota (Actinomycetota, Bacillota and Pseudomonadota phyla)

and endocrine functions in both the ileum and colon, as well as tryptophan metabolism

and barrier functions in the ileum only.

132 SynCom bacterial strains were present in AI and HI intestinal microbiota

To monitor the presence of SynCom bacteria in the intestine of piglets, metabarcoding

was applied to AI- and HI-supplemented formulas in order to identify the OTU

potentially corresponding to each SynCom bacteria (hereafter referred as to SynCom

AI/HI OTUs) in supplemented formulas and in the ileal and colonic piglet digesta. OTUs

corresponding to the genera added in SynComs AI and/or HI were identified in AI

and/or HI formulas, with high homology between the OTU sequence and the 16S

sequence of the SynCom strains, at the exception of *Cutibacterium*, *Veillonella* and a

Streptococcus infantis strain present in SynCom AI (Table 1, Supplemental Table S2).

The absence of corresponding OTUs for *Cutibacterium* and *Veillonella* strains was

likely due to the failure of V3-V4 amplification on these strains with the primer pair

used, as confirmed by the failure of virtual PCR using the NCBI PrimerBLAST tool.

Furthermore, a bias in the lysis of bacterial cells for certain strains that may be resistant

to the method used, may have limited DNA recovery from these strains, contributing

to their non-detection in formulas or piglet microbiota. Six SynCom AI OTUs

(potentially corresponding to the *Bifidobacterium bifidum, Rothia mucilaginosa,*

Corynebacterium simulans, Bifidobacterium breve, Staphylococcus haemolyticus and

Winkia neuii strains added in AI SynCom) exhibited significant higher relative

abundances in the ileal microbiota of AI piglets compared to that of CTRL piglets

(Figure 3, Table 1). Likewise, the relative abundance of three SynCom HI OTUs

(potentially corresponding to the *Corynebacterium kroppenstedtii, Bifidobacterium*

breve and *Staphylococcus capitis strains* added in HI*)* was significantly higher in the

ileal microbiota of HI compared to CTRL. Three additional SynCom HI OTUs

(potentially corresponding to *Staphylococcus epidermidis, Micrococcus luteus* and

Lactobacillus jensenii) exhibited a similar higher abundance profile, yet this was not

statistically significant. The presence of SynCom OTUs was also observed in the

colonic and fecal microbiota of supplemented piglets at PND8 and PND24, yet to a

lesser extent, probably due to the very low abundance of these OTUs in these

compartments. When found, the relative abundance of SynCom OTUs can represent

from 0.01% to 0.86% of total OTUs in ileum, from 0.0002% to 0.02% of total OTUs in

colon, and from 0.0002% to 0.06% of total OTUs in feces. Overall, these results

suggest that most SynCom bacteria were recovered from the ileal microbiota and, to a

lesser extent, the colonic microbiota of supplemented piglets.

SynCom supplementation modified microbiota composition and activity

Microbiota was analyzed on feces from formula-fed and SM-fed piglets at PND8 to

detect early dietary effects and on ileal and colonic digesta and feces at PND24.

Moderate differences were observed in ileal, colonic and fecal microbiota of formula-

fed piglets (CTRL, AI, HI). The ileal α-diversity was lower in CTRL than in HI, AI group

value being intermediate (Supplemental Figure S2). β-diversity did not differed

between formula-fed groups (Supplemental Figure S2). However, consistent with the

MFA results, several taxa showed different relative abundances in the ileal and colonic

microbiota of the formula-fed groups that go beyond the presence of the SynCom

OTUs (Table 2; Supplemental Table S3). At PND24, several families

(Lachnospiraceae, Peptostreptococcaceae, Ruminococaceae and Erysipelotrichaceae)

within Bacillota were more abundant in the ileum of HI compared to CTRL and AI. An

intermediate situation was sometimes observed for AI, as for Peptostreptococcaceae,

whose relative abundance in AI was not significantly different from HI or CTRL. Some

changes were common to the AI and HI groups compared to the CTRL group, notably

a higher abundance of Actinomycetaceae and *Actinomyces*.

In the colon, less differences were observed between formula-fed groups. Family IX

and Clostridia vadinBB60 group were more abundant in HI (and, to a lesser extent in

AI), while *Allistipes* and *Staphylococcus* were higher in AI. Some ileal and colonic

differences were reflected in fecal microbiota at PND24, with higher levels of family XI,

Actinomycetaceae, *Actinomyces* and *Allistipes* in AI and/or HI groups compared to

CTRL group (Table 2).

At PND8, several taxa showed differential abundance between groups. Differences

included a higher abundance of Prevotellaceae/*Prevotella* and Rikenellaceae in AI and

HI, Bifidobacteriaceae/*Bifidobacterium* and Ruminococcaceae specifically in AI, and

Aerococcaceae and an unknown family within Clostridia vadinBB60 group in HI.

Conversely, Actinomycetaceae/*Actinomyces* and Enterococcaceae/*Enterococccus*

were less abundant in Syncom-supplemented groups.

The ileal, colonic and fecal microbiota composition of the formula-fed groups was

compared with that of SM piglets. Of note, the sow milk microbiota was also determined

(546 OTUs identified). Several genera predominant in sow milk microbiota are

commonly found in HM microbiota. They were also present in the SynComs, including

Staphylococcus, *Streptococcus*, *Lactobacillus*, *Rothia* and *Corynebacterium* (Table

'OTUs   identified   in   sow   milk'   accessible   in   the   repository

https://doi.org/10.57745/ATTHZ3). However, a few differences occurred between sow

milk and HM microbiota (30, 31) or SynComs, such as the low abundance of

Bifidobacterium (corresponding to less than 0.1 % of the total OTUs) or the presence

of *Terrisporobacter* in sow milk.

The ileal, colonic and fecal microbiota of SM-fed piglets showed significant differences

in both α-and β-diversity compared to the three formula-fed groups (Supplemental

Figure S2), in agreement with differences in the relative abundance of numerous

bacterial taxa (Supplemental Table S4). Interestingly, the SynCom-supplemented

groups exhibited shifts in bacterial abundance compared to CTRL that aligned more

closely with the SM group (Table 2 and Supplemental Table S4). This includes the

higher abundance of Peptostreptococcaceae, Erysipelotrichaceae, *Clostridium sensu*

stricto 1, *Turicibacter* in the ileum of HI, the higher abundance of *Alistipes* and lower

abundance of *Butyricicoccus* in the colon and/or feces of AI. At PND8, the higher

abundance of Prevotellaceae/*Prevotella* and lower abundance of

Enterococcaceae/*Enterococcus* in the feces of HI and AI piglets compared to the CTRL

group, was closer to levels observed in SM piglets.

To determine whether SynCom supplementation affected microbiota activity, SCFA

concentrations were also analysed at PND8 (feces) and PND24 (feces and colonic

digesta) (Table 3). The fecal concentration of acetate tended to be higher in HI

compared to CTRL and AI and that of propionate was higher in HI compared to AI at

PND8, whereas difference no longer occurred in feces at PND24 (Table 3). In the

colon, propionate, valerate, butyrate, isovalerate, isobutyrate and total SCFA

concentrations were higher in SM-fed than in formula-fed groups at PND24 (Table 3).

Overall, adding HM-derived SynComs to the formulas specifically altered the

microbiota composition. These changes reduced, but did not eliminate, the differences

observed between CTRL and SM piglets. The effect of SynComs on fermentative

activity was mainly observed in the first days of supplementation.

SynCom supplementation affected systemic and intestinal immune functions

MFA indicated that immunity was one of the main functions affected by SynCom

supplementation that influenced both the systemic and intestinal immune functions

(Figures 4 and 5, Supplemental Tables S5 and S6). At PND8, the fecal sIgA content

in HI piglets was 6- and 11-fold higher than in CTRL and AI piglets, respectively (Figure

4). A similar profile of sIgA content was observed in the ileal digesta at PND24,

although the differences were non-significant. Meanwhile, SM piglets exhibited fecal

sIgA levels 12-fold higher than the CTRL group at PND8, but only 1.9-fold higher than

the HI group. At PND24, there was a trend toward higher cytokine secretion in HI

peripheral blood mononuclear cells (PBMC) compared to CTRL and AI PBMC (Figure

4). A similar pattern was observed in PP from HI and AI piglets compared to the CTRL

group (Supplemental Table S5). The impact of SynComs on intestinal immune function

was further demonstrated through changes in gene expression in both ileal and colonic

tissues (Figure 5). AI and HI groups showed a slight upregulation of genes associated

with pro-inflammatory responses (CCL2, TNFa, IL4, IFNg, IL6, IL1b, IL8, CCL20), anti-

inflammatory pathways (SOCS3), antioxidant activity (SOD2), Treg pathways

(FOXP3), and cellular signalling (TLR2 and TLR4) compared to the CTRL group.

Interestingly, the SM group also showed a mild stimulation of immune-related genes

in the colon compared to the CTRL group, whereas the ileum exhibited an overall

decrease in gene expression (Figure 5). Overall, adding SynCom HI -and SynCom AI

to a lesser extent- to the formula modulated systemic and intestinal immune functions,

and sIgA level specifically.

Intestinal morphology and barrier functions differed between groups at PND24

To assess the effect of SynCom supplementation on the epithelial barrier, the intestinal morphology, the expression of genes related to cell renewal and barrier function, and *ex vivo* para- and transcellular permeability were evaluated in the ileum and colon at PND24 (Figures 5 and 6, Supplemental Table S6). The main differences were observed in villous height, goblet cell density, and genes involved in proliferation, apoptosis and mucin synthesis, particularly when comparing formula-fed piglets to SM piglets. Only minor differences were detected among the formula-fed groups (Figures 5 and 6).

Regarding permeability, ileal paracellular permeability was lower in formula-fed piglets than in SM-fed piglets (Figure 6). This was accompanied by higher expression of ileal genes encoding tight junction proteins (CLDN4, MLCK and ZO1), as well as a trend toward increased expression of CTNNB1 and OCLN in the CTRL and AI groups compared to the SM group. The HI group showed intermediate expression levels (Figure 5A).

In the colon, there were no differences in *ex vivo* paracellular permeability among the four groups (Figure 6), despite some variations in tight junction protein expression (Figure 5B). Besides, transcellular permeability was higher in the ileum of the AI group compared to the HI group, while in the colon, both AI and HI groups exhibited lower transcellular permeability than the CTRL group, reaching levels similar to those in the SM group (Figure 6).

Overall, these results highlight the impact of SynCom supplementation on intestinal epithelium morphology and transcellular permeability.

Intestinal nutrient transport, tryptophan metabolism and endocrine functions were moderately affected by the SynCom supplementation of formulas at PND24

A few number of genes related to nutrient transport, tryptophan metabolism and endocrine functions showed differential expression among formula-fed piglets (Figure 5 and Supplemental Table S6). Specifically, the ileal expression of SLC15A1 (peptide transporter) and the colonic expression of GCG (involved in endocrine function) were higher in the HI group compared to the AI group (Figure 5). Additionally, the expression of several other genes -encoding proteins involved in nutrient transport, tryptophan metabolism and endocrine function- varied between formula-fed and SM-fed piglets in both in the ileum and colon (Figure 5).

Correlation analyses highlight the influence of HM bacteria on the composition of the intestinal microbiota and intestinal functions.

To explore individual associations between variables, correlation analyses were conducted between SynCom OTUs and microbiota or physiological variables (Figure 7), as well as between microbial genera and physiological variables (Supplemental Figure S3), specifically in the ileum and colon of formula-fed piglets.

In the ileum, the abundance of seven out of thirteen detected SynCom OTUs in the piglet microbiota showed strong correlations with eight immune-related variables. Notably, a specific OTU of the HI group corresponding to *Bifidobacterium breve*- was correlated to ileal sIgA level and to an ileal barrier variable (BD2) (Figure 7A). In contrast, only three SynCom OTUs correlated to a physiological variable in the colon (Figure 7B).

Additionally, all SynCom OTUs correlated to various genera in the ileum and eight SynCom OTUs correlated to various genera in the colon (Figure 7C and 7D).

Furthermore, multiple genera within the ileal and colonic microbiota exhibited

significant positive or negative correlations ($p < 0.05$ and $|r| > 0.7$) with 37.1 % of total

physiological variables in the ileum and 59.7 % in the colon (Supplemental Figure S3).

These results underscore the influence of HM bacteria-driven gut microbiota

composition on diverse gut functions.

Discussion

Our study aimed to assess the impact of two SynComs on gut physiology and

microbiota in piglets used as a model for human infants. The SynComs shared a similar

taxonomic composition, reflecting the diversity of HM bacteria, but exhibited different

immunomodulatory properties (9). From PND2 to PND24, piglets were fed with either

a control formula or a formula supplemented with SynCom AI or HI at a constant

concentration of 5.5×10^5 CFU/mL (~5×10^4 CFU/mL per strain), comparable to the

HM bacterial load in breastfed infants. Our findings indicate that most SynCom bacteria

were present in the intestine of piglets fed the SynCom-supplemented formulas. The

two SynComs exerted distinct effects on intestinal immune and barrier functions and

microbiota composition, at both PND8 and PND24. SynCom HI showed a global

impact on intestinal immune markers (including higher sIgA levels and PBMC cytokine

secretion) associated with changes in microbial composition, particularly within the

Bacillota phylum. The immune effects of the SynCom AI were less pronounced

compared to SynCom HI. Correlation analyses further revealed associations between

specific SynCom bacteria and both microbiota composition and intestinal functions,

primarily in the ileum. Additional correlations between intestinal functions and genera

not provided by the SynComs were mainly observed in the colon. This suggests that

SynCom supplementation in formulas also induced physiological changes by altering

the overall microbiota composition.

The HM bacteria assembled in the SynComs proved safe, causing no intestinal

disorders or growth differences in piglets across the three formula-fed groups. OTUs

corresponding to most added SynCom bacteria ("SynCom OTUs") were detected in

the ileum and, to a lesser extent, in the colon of SynCom-supplemented piglets, at a

relative abundance of 0.0002 to 0.86 %. This aligned with evidence of vertical transfer

of HM bacteria to the infant gut and the presence of probiotic bacteria in feces during

supplementation (10, 32–35). We cannot exclude that these SynCom OTUs, when

found in the intestinal microbiota, corresponded in part to bacteria others than SynCom

bacteria, as metabarcoding does not allow to specifically identify a single strain. PCR

with strain-specific primers or shotgun sequencing could undoubtedly confirm their

identification. Nevertheless, their increased relative abundance in the ileum and colon

of SynCom-supplemented piglets -compared to CTRL- strongly suggests that at least

some of these OTUs originated from the added SynCom bacteria. No SynCom OTUs

were found in the formula or in the intestine for *Cutibacterium*, *Streptococcus infantis,*

and V*eillonella* strains. This may be due to their low abundance, bias in bacteria lysis

or limitations of the primers used, which were suboptimal for amplifying the 16S rRNA

gene of *Cutibacterium* and *Veillonella* (36). While the metabarcoding approach

confirmed the presence of most SynCom OTUs in the intestinal microbiota of SynCom-

supplemented piglets, it did not clarify whether these bacteria could survive or persist

in the mucosal environment-especially since piglets received daily SynCom

supplementation throughout the experiment. Of note, previous *in vitro* studies,

however, demonstrated strain-dependent survival of five SynCom bacteria (namely

Bifidobacterium breve CIRM-BIA2845, *Streptococcus salivarius* CIRM-BIA 2846,

Cutibacterium acnes CIRM -BIA 2849, *Staphylococcus epidermidis* CIRM-BP 1633

and *Lactobacillus gasseri* CIRM-BIA 2841) in a model of infant gastrointestinal

digestion (37).

The observed impact of SynCom OTUs on intestinal immune function -and, to a limited

extent, on barrier function- underscores the modulatory influence of HM-derived

bacteria on intestinal physiology. This effect is notable despite the low concentration

of SynCom OTUs in the formulas and their limited relative abundance in the intestine.

Since microbiota is less abundant in the ileum than in the colon (38), the relative

abundance of the SynCom OTUs was higher in the ileum, where much of the gut-

associated immune system resides. In this environment, where bacterial competition

is reduced, even a low bacterial load may be sufficient to interact with the mucosa and

its immune system. Previous studies have demonstrated similar immune-modulating

effects at low doses. For instance, supplementing infant formula with either a low (10^4

CFU/g of powder) or regular (10^7 CFU/g of powder) dose of *Bifidobacterium lactis*

produced comparable immune benefits in infants aged 0-6 months, despite a lower

fecal detection of *Bifidobacterium lactis* in the low-dose group (39). Additionally, early-

life variations in the abundance of subdominant bacterial genera of the gut mirobiota

(such as *Lachnospira*, *Rothia*, *Veillonella* and *Faecalibacterium*) have been shown to

reduce lung inflammation in an asthmatic mouse model (84), further supporting the

potential of low-abundance bacteria to exert significant physiological effects. More

generally, the ability of some species to influence the microbiota despite their low

abundance is highlighted in the concept of keystone species that possess specific

enzymatic activities, enabling, for instance, crossfeeding with others, sometimes more

dominant, species, as illustrated for *Bifidobacterium* (85,86).

In line with the observed impact of SynCom OTUs on intestinal immune functions,

seven of the thirteen detected SynCom OTUs in the piglet microbiota were correlated

with ileal immune markers. These findings align with the immunomodulatory profiles of

SynCom bacteria previously characterized *in vitro* (9). The correlations involved OTUs

shared by or specific to SynComs AI and HI, including *Bifidobacterium breve,*

Corynebacterium sp., *Staphylococcus haemolyticus, Winkia neuii* and *Micrococcus*

luteus. Our results support the well-documented immunomodulatory role of

Bifidobacterium strains as probiotics (40–44) and contribute to the limited existing

knowledge about the other HM genera, highlighting their potential value for probiotic

applications when assembled in SynComs.

Beyond the presence of SynCom OTUs in the intestine, SynCom supplementation also

induced changes in the microbiota. SynCom HI supplementation, in particular, induced

a higher ileal abundance of several families and genera mostly belonging to Bacillota,

including *Clostridium sensu stricto 1*, *Eubacterium* and *Turicibacter*. This also included

Peptostreptococcaceae, one of the most abundant families in the ileum (mean relative

abundance >1% and up to >10%), with the AI group showing intermediate levels

between HI and CTRL groups. In the colon, fewer changes were observed, mostly

within Bacillota as well. Additionally, the AI group showed an increase of *Alistipes*

compared to other groups.

Early immune boost reported in breastfed infants and HM-fed piglets was associated

with the composition of the microbiota (5, 45–48). The role of Bacillota in immune

ontogeny has been demonstrated in rodents, where it is essential for regulating

susceptibility to immunopathologies later in life (49). *Turicibacter*, a known indicator of

immune status, was positively correlated with the TNFα response of ileal PP cells in

this study. Its abundance was decreased in immunodeficient mice (50, 51) and

negatively associated with immune-related adverse events (52). *Alistipes*, a human gut

commensal involved in protein fermentation, has been linked to immune modulation,

though its effects remain debated (53, 54). Some species, such as *Alistipes*

onderdonkii, have shown potential as anti-inflammatory probiotics (55). Correlation

analyses further revealed that specific SynCom OTUs, such as *Bifidobacterium breve*

(OTU 205), were directly associated with ileal sIgA levels, a critical marker of immune

development in infants. This SynCom OTU also correlated with other genera, including

Bavaricoccus and *Parvimonas* (Bacillota) and *Sutterella* (Pseudomonadota), some of

them being likewise linked to sIgA levels. sIgA plays an important role in the intestinal

defense by preventing pathogen adhesion and neutralizing toxins. Notably, fecal sIgA

levels were higher in the HI group at PND8, suggesting a beneficial effect of Syncom

HI-induced microbiota changes on immune markers. These findings align with previous

studies showing that probiotic supplementation can restore sIgA levels in formula-fed

infants, which are typically lower compared to breastfed infants (56–58).

Despite modulation by SynCom-supplementation, the microbiota still differed between

the three groups of piglets fed formula and SM. Specifically, microbial α-diversity was

lower in the SM group compared to the formula groups. This aligns with the lower α-

diversity observed in the feces of infants fed HM compared to formula at 1-2 months

of age (59–65) or in the ileum, colon and/or rectum of 3-week-old piglets fed HM

compared to formula (5, 66, 67). However, no difference in intestinal α-diversity was

found in weaned piglets fed sow milk or milk replacer (68). β-diversity also differed in

piglets fed SM or formula, consistent with previous studies comparing formula with SM

or HM (5, 66). These differences may be linked to the contrasting environments of

piglets, including maternal presence, as well as the specific role of maternal milk

components like oligosaccharides. In line with the differences in β-diversity, several

taxa showed differential abundances between formula-fed and SM-fed piglets. Yet,

some of the changes induced by Syncom HI -and, to a lesser extent, AI-

supplementation, compared to the CTRL group, brought the SynCom-supplemented

groups closer to the SM group. This includes the higher abundance of Bacillota

members in the ileum of the HI group and of *Alistipes* in the colon of the AI group, as

well as the higher abundance of Prevotellaceae/*Prevotella* and lower abundance of

Enterococcaceae/*Enterococcus* at PND8 in the feces of HI and AI compared to the

CTRL piglets. Notably, a rapid decrease in Enterococcaceae after birth has been

reported during the maturation of piglet colonic microbiota, while

Prevotellaceae/*Prevotella* was more abundant in HM-fed piglets compared to formula-

fed ones (5, 17, 66). Furthermore, several taxa exhibited differential abundance in the

HI and AI groups compared to the CTRL group at PND8, even more so than at PND24.

This was associated with changes in fecal metabolite concentrations in the HI group,

particularly higher acetate and propionate levels compared to the CTRL and AI groups

at PND8, resembling those observed in the SM group. SCFAs may play a role in

immune maturation, both locally in the intestine and systemically (69). Overall, these

results suggest that SynCom HI, and to a lesser extent AI, may drive changes in

microbiota composition and activity toward that of SM-fed piglets.

The correlations between certain genera -whose abundance was either altered or

unchanged by SynCom supplementation- and ileal and colonic barrier variables (such

as genes encoding tight junction proteins and mucins) highlight the relationship

between microbiota and intestinal barrier functions, as previously observed (5).

However, no differences in *ex vivo* paracellular permeability were found between the

formula-fed groups in the ileum and colon. In line with this, the expression of genes

encoding tight junction proteins showed little variations among formula-fed piglets, but

was reduced in SM piglets, with HI piglets sometimes exhibiting intermediate levels.

Notably, the higher paracellular permeability observed in the SM ileum aligns with

findings from some studies in breastfed infants (70) and HM-fed piglets (5), which

reported higher permeability compared to formula-fed piglets. Yet, these results remain

controversial, as other studies have found no change -or even a reduction- in total gut

permeability in breastfed infants compared to formula-fed infants (1, 71–73), or

reduced expression of genes coding for tight junction proteins in HM-fed piglets (74).

Additionally, changes in the expression of genes involved in other functions – such as

nutrient transport, endocrine function and tryptophan metabolism- were significantly

correlated with numerous genera in the ileum and colon microbiota. This further

supports the idea that SynComs AI and HI influence intestinal functions by modulating

the composition of the intestinal microbiota.

In conclusion, HM-derived bacteria can reach intestinal compartments and influence

the intestinal epithelium, its immune function, and the microbiota. Consistent with our

in vitro study using a quadricellular model mimicking the intestinal epithelium, we

confirmed that SynComs -despite having similar taxonomic composition but

contrasting immunomodulatory properties- can differentially modulate the

developmental profile of intestinal immune functions. The immunostimulatory profile of

SynCom HI induced more pronounced changes in intestinal immune properties than

the anti-inflammatory profile of SynCom AI, as evidenced by effects on sIgA levels and

cytokine secretion by PBMC. A major limitation of this study was that the SynComs,

composed of only 11 strains, did not fully capture the complexity of the HM microbiota.

Additionally, the strains were assembled in equal proportions, whereas dominant taxa

are typically observed in the HM microbiota (4, 6). Nevertheless, this study

demonstrates that the continuous dietary supply of HM-like SynComs at physiological

doses -5.5 x 10^5 CFU/mL, which is within the upper mid-range of HM bacterial load-

was sufficient to induce physiological effects in a SynCom-dependent manner. Further

investigation is needed to fully characterize underlying mechanisms and identify the

keystone bacteria. Moreover, the apparently beneficial effects observed with SynCom

OTUs in healthy piglets should be evaluated in unhealthy contexts where the immune

system is challenged, such as allergic conditions, which are common in infants.

Materials & Methods

Animal study

The study was designed and conducted at INRAE experimental facilities (Pig

Physiology and Phenotyping Experimental Facility, Saint-Gilles, France, doi

10.15454/1.5573932732039927E12; Agreement No. D35-275-32) in accordance with

the current ethical standards of the European Community (Directive 2010/63/EU), and

the French legislation on animal experimentation and ethics. The ethics committees of

CREEA (Rennes Committee of Ethics in Animal Experimentation) and of France's

Ministry of Higher Education and Research approved (authorization #35727-

2022030411197283) the entire procedure described in this protocol. Animal welfare

was ensured by daily observation throughout the experiment. The piglets did not

receive any medication or antibiotic treatment.

Thirty female and male Yucatan piglets were separated from their dam at postnatal

day (PND) 2 and housed in individual stainless-steel metabolic cages. Room

temperature was maintained at 30°C for the first week and then lowered at 28°C until

the end of the experiment. Piglets were fed one of the three experimental formulas with

an automatic milk feeder, as previously described (26). To account for litter-to-litter

variation, three piglets with a BW close to the mean birth weight of the litter were

selected from each litter and assigned to one of the three formulas. Mean birth weight of selected piglets was 0.849 ± 0.023 kg. Allocation to formulas was balanced between groups for birth weight, BW at PND2 and sex. Formulas were daily rehydrated to 20 % dry matter extract in water prior to distribution. Formula supply was divided into ten meals that were automatically distributed throughout the day. BW was measured twice a week and feeding amounts were adjusted accordingly. The daily net energy offered was 1450 kJ/kg metabolic BW. Formula intake was automatically recorded for each meal. In addition, six piglets selected from the same litters as the formula-fed piglets were allowed to suckle the sow naturally (SM) to provide benchmarks for gut development and microbiota. Seventeen female and nineteen male were used (CTRL: n=4 female and 6 male; AI: n=5 female and 5 male; HI: n=4 female and 6 male; SM: n=4 female and 2 male). All piglets were euthanized at PND24 ($\pm$ 2.6 days) and tissues were collected.

Diets and synthetic bacterial communities

Formulas were manufactured at a semi-industrial pilot scale at Bionov (Rennes, France). The three formulas had the same nutritional content (Supplemental Table S1). They differed by the bacterial supplementation: two HM-derived SynComs with anti-inflammatory (AI) *vs.* high immunomodulatory (HI) properties (9) as described in Table 1, or no bacterial supplementation for the control (CTRL) formula.

The AI and HI SynComs were each composed of 11 strains in equal proportions. Three of the strains were common to both SynComs and a further eight strains were specific to each SynCom. Firstly, the two SynComs were designed to mimic HM microbiota with representatives of genera frequently found in HM and with at least, one representative of the 4 most widespread genera of the cultivable HM microbiota:

Staphylococcus, *Cutibacterium*, *Streptococcus* and *Corynebacterium* (6). Secondly, to

consider the wide variability in the immunomodulatory capacities of HM bacteria, the 2

communities were assembled to have theoretically contrasting immunomodulatory

effects, depending on their individual properties, as previously described (9). The

SynCom AI was designed to display mainly anti-inflammatory properties and the

SynCom HI to display both anti- and pro-inflammatory properties. Each bacterial strain

was cultured separately on its optimal growth medium for 1 to 5 days as previously

described (9) and its concentration was estimated with an OD measurement. Bacterial

cells were harvested by centrifugation (6000 g, 10 min, 4°C), washed with 0.9 % (wt

/vol) saline solution, pooled and resuspended in the formula. Daily doses equivalent to

a 500-fold concentrated bacterial suspension (total bacterial concentration of 2.75 x

10^8 Colony Forming Units (CFU)/mL) were prepared and stored at -80°C until used.

After thawing in a water bath at 37°C for a few minutes, AI and HI bacterial doses were

added in the AI and HI diets, respectively, at a total bacterial concentration of 5.5 x 10^5

CFU/mL of formula (corresponding to a concentration of 5 x10^4 CFU/mL of formula for

each strain).

Sample collection

Diet

Fifteen mL milk samples were collected from sows nursing the SM piglets on day 20

postpartum. Injection of oxytocin (2 mL, Laboratoires Biové, Arques, France) was

carried out to facilitate milking. Before sampling, the sow teats were thoroughly washed

with water and soap and rinsed with sterile physiological water (0.9 % NaCl) before

cleaning with ethanol. Samples of formulas CTRL, AI and HI were also randomly

collected at the time of rehydration of formula powders during the third week of the

experimental period. Sow milk and formula samples were stored at -80°C until

microbiota analysis.

Piglets

During the experimental period, feces were collected at PND8 and stored at -80°C for

microbiota, SCFA and sIgA analyses. On the last day of the experiment, piglets were

euthanized 1 h after their last meal by electrical stunning immediately followed by

exsanguination. Blood was collected in 2 BD Vacutainer CPT (BDBiosciences, NJ,

USA) and stored at room temperature until PBMC extraction. Ileal digesta and tissue

were collected from an 80-cm segment anterior to the ileocecal junction, and colonic

digesta and tissue were collected from the first third part of the colon. Samples of 100

mg ileal and colonic digesta were immediately frozen in liquid nitrogen and stored at -

80°C for microbiota and sIgA analyses. Samples of feces were collected and stored at

-80°C for microbiota analysis. In addition, 0.5 to 2 g of ileal and colonic digesta and

feces were collected for SCFA analysis. A 10-cm segment of distal ileum (containing

the ileal PP) was collected, rinsed with ice-cold Hank's balanced saline solution

supplemented with 50 mg/mL gentamicin, 200 UI/mL penicillin, 200 mg/mL

streptomycin and 10 mM hepes for isolation of PP mononuclear cells. The remaining

ileal segment and the proximal colon were rinsed with cold phosphate buffered saline

(PBS). A 10-cm segment was kept in ice-cold Dulbecco's Minimum Essential Medium

(Gibco, Thermo Fisher, France) for immediate Ussing chamber analysis. About 100

mg of ileal (without PP) and colonic tissues were kept in a RNA later solution for 24 h

at 4°C and stored at −20°C until RNA extraction and gene expression analysis. Finally,

adjacent segments (10-cm) were fixed in 4 % paraformaldehyde for 48 h until further

dehydration in ethanol and embedding in paraffin, for morphometry analysis and goblet

cell counting.

Microbiota analysis

Extraction of total bacterial DNA from ileal and colonic digesta and feces was performed as described in the instruction guide of the Quick-DNA Fecal/Soil Microbe Miniprep Kit (ZYMO Research, Irvine, USA). Sow milk and formula samples were pre-treated before total bacterial DNA extraction as described (75). The V3-V4 region of 16S rRNA gene was amplified using the following primers: CTTTCCCTACACGACGCTCTTCCGATCTACTCCTACGGGAGGCAGCAG (V3F) and GGAGTTCAGACGTGTGCTCTTCCGATCTTACCAGGGTATCTAATCC (V4R), Phusion® High-Fidelity DNA Polymerase (New England Biolabs, Évry-Courcouronnes, France) and dNTP (New England Biolabs) for 25 cycles (10 s to 98°C, 30 s at 62°C, and 30 s at 72°C). Agarose gel electrophoresis was performed to verify amplicon purity prior to sequencing using Illumina MiSeq technology, performed at the Genotoul GeT-PlaGe platform (Toulouse, France).

SCFA analysis

After collection, ileal and colonic digesta and feces were weighed, mixed with 1 mL 0.5 % orthophosphoric acid solution per g of digesta and centrifuged at 1700 g for 15 min at 4°C. Supernatants were then stored at -20°C until SCFA quantification. SCFAs were analyzed by High Performance Liquid Chromatography (HPLC, Ultimate 3000, Thermo Fisher Scientific, Courtaboeuf, France). Acid separation was performed using a Rezek ROA organic acid H+ column (300*7.8mm Phenomenex, California) with H_2SO_4 0.005M as mobile phase at a flow rate of 0.4ml/min at 60°C. Two detectors were used: a UV detector (Dionex UVD 170U) operating at 210nm and a refractometer (RI 2031 Plus Jasco). Quantification was performed with an external calibration using acetic acid

(PanReac, Lyon, France), propanoic, 2-methylpropanoic, butanoic, 3-methylbutanoic

and pentanoic acids (Merck, St. Quentin Fallavier, France) as standards (5).

Ex vivo **permeability measurement**

Ileal and colonic permeability measurements were performed using Ussing chambers

(Physiological Instruments, San Diego, CA, USA) as described (5). Permeability was

determined using tracer molecules, fluorescein sodium salt (Na-FITC) for paracellular

permeability and peroxidase from horseradish type VI (HRP) for transcellular

permeability. The tracer molecules were added into the apical compartment and those

transferred through the epithelium were analyzed in the serosal compartment.

Concentration of Na-FITC in the samples collected after 120-min incubation from the

serosal buffer was measured by fluorimetry (Varioskan™ LUX multimode microplate

reader, ThermoFisher Scientific, Saint-Herblain, France) whereas concentration of

HRP was determined using spectrophotometry (Varioskan™ LUX multimode

microplate reader, ThermoFisher Scientific, France) after enzymatic reaction using o-

Dianisidine dihydrochloride as substrate (Merck, Molsheim, France).

Histomorphometry analysis

Histomorphometric analysis was performed after alcian blue and periodic acid Schiff

staining on 7 µm sections of formalin-fixed and paraffin-embedded ileal and colonic

tissues. Sections were analysed using a light microscope (Nikon Eclipse E400, Nikon

Instruments, France) with image processing software (NIS-Elements AR 3.0, Nikon

Instruments), as described (76). Villous and crypt sizes and goblet cell density were

measured in at least 15-20 crypt-villous units per piglet.

Cell isolation and *in vitro* culture

PBMC extraction was performed within 2 h after collection following the manufacturer instructions of the BD Vacutainer CPT (BDBiosciences, NJ, USA). After centrifuging the BD Vacutainer CPT tube at 1500 g for 20 min, the cell ring was recovered. The PBMC cells obtained were resuspended with 10 mL of HBSS supplemented with 10 % Foetal Calf Serum (FCS) and centrifuged 10 min at 600 g and 4°C. The supernatant was discarded. The pellet containing PBMC was resuspended with 7 mL of Ammonium-Chloride-Potassium (ACK) lysis buffer, and with 7 mL of RPMI complemented with 10 % FCS and 1 % Penicillin/Streptomycin (complete RPMI). The suspension was centrifuged 5 min at 600 g and 4°C. The pellet was resuspended with 14 mL of complete RPMI and centrifuged 10 min at 600 g and 4°C. Finally, PBMC were suspended in complete RPMI to achieve cell concentration of 4.10^6 cells/mL. Mononuclear cells from freshly-removed ileal PP were isolated as previously described (76). PP cells were suspended in complete RPMI to achieve cell concentration of 8.10^6 cells/mL.

PBMC and PP mononuclear cells were cultured in RPMI complete medium for 48 h at 37°C in a 5% CO_2 water-saturated atmosphere. Culture was performed in unstimulated conditions and stimulated conditions with ConA (5 µg/ml of Concanavalin A from Canavalia ensiformis Merck, Molsheim, France) or LPS (10 µg/ml of LPS-EB ultrapure from Escherichia coli 0111:B4 strain, InvivoGen, San Diego, USA). In addition, PP mononuclear cells were cultured at 37°C in a 5 % CO_2 water-saturated atmosphere for 7 days to assess sIgA production. Supernatants of PBMC and PP cells were collected and following the addition of antiprotease cocktail 1X (SigmaFast, Merck Sigma, Saint Quentin Fallavier, France) stored at −20 °C until cytokine and sIgA analyses.

Cytokine and sIgA analyses

Concentrations of IL-10 and TNF-α in culture supernatants of PBMC and PP cells were measured by ELISA (R&D Systems, USA: DY693B and DY985, respectively).

For sIgA analysis, ileal and colonic digesta at PND8 and PND24 and fecal samples at PND8 were 10-fold diluted with PBS-EDTA (0.5 M) buffer supplemented with a protease inhibitor cocktail (250 µg/L; P2714-1BTL). After a vigorous shaking, suspensions were incubated 30 min at room temperature on a Rotary laboratory shaker and centrifuged at 18 000 g, 30 min and 4°C. Supernatants were stored at -20°C until ELISA analysis. Concentration of sIgA in 7 days-cultured PP cell supernatants as well as in ileal, colonic and fecal supernatants was assessed as previously described (76).

Gene expression analysis

Total RNA extraction from ileal and colonic tissues was performed using the "NucleoSpin® RNA" kit (Macherey Nagel). Extracted RNA was quantified using a DS-11 spectrophotometer (DeNovix, Wilmington, DE, USA). RNA quality and RNA Integrity Number (RIN) were assayed using the Agilent RNA 6000 Nano kit in combination with an Agilent 2100 Bioanalyzer (Agilent Technologies France, Massy, France). Reverse transcription was then carried out on 1 µg of extracted RNAs using the High Capacity Complementary DNA Reverse Transcription Kit, as previously described (77).

Quantitative real-time PCR was performed on a 384-well plates real-time PCR machine using a PowerSYBR green PCR Master Mix kit (4368708, ThermoFisher Scientific, France) for detection (78). The housekeeping genes selected were YWHAZ and PGK1 for ileum, and HTPR1 and RPL4 for colon. Relative expressions of the target

genes (Supplemental Table S7) were determined using the $2^{-\Delta\Delta Ct}$ method for group

comparisons.

Statistical analysis

Data are presented as means ± SEM (standard error of the mean). For microbiota

data, raw sequences were analyzed using the bioinformatic pipeline FROGS (Find

Rapidly OTU with Galaxy Solution) software (79). Data were treated with the following

steps: pre-processing, clustering with swarm algorithms, remove of chimera, OTU

filters, and finally taxonomic affiliation. The descriptive analysis of the structure (α- and

β-diversity) of the microbiota was conducted with the Phyloseq function (EdgeR

package, Bioconductor). The α-diversity index used were Chao1 representing the

bacterial richness. Phylogenetic β-diversity was studied using the Bray-Curtis

distances and group differences were evaluated with principal co-ordinate analysis

(PCoA) and permutational multivariate analysis (PERMANOVA) of variance using

distance matrices. Differences in phyla, families, genera and OTUs were assessed

with pairwise comparisons on OTUs or after aggregation at the desired taxonomic rank

(phyloseq tax_glom function) using DESeq2 as described in (5).

Unidimensional analysis. A statistical analysis of the variables (excluding microbiota

data) was performed using R software (version 4.3.2). Body weight differences

between groups (SM, CTRL, AI and HI) were assessed using repeated-measures

ANOVA, testing for the effects of diet, time and sex. For the other variables, a three-

way ANOVA was performed testing for main effects of diet, sex, litter, and for

interactions between diet and sex, and diet and litter, followed by Tukey *post hoc* test

for parametric variables. When sex or litter effects or their interactions with diet were

non-significant (p > 0.05), these factors were removed from the model. The normal

distribution and the homoscedasticity of the residuals of each linear model were tested

using Shapiro-Wilk and Levene's tests, respectively. When the raw data did not fulfil

these model assumptions, a natural logarithmic transformation of the data was

performed prior to running the linear model. If the assumptions were still not satisfied,

data were tested with a non-parametric Kruskal Wallis test associated with Dunn test.

Differences were considered as statistically significant for $p < 0.05$ and a trend for

difference at $0.05 < p < 0.1$.

Multidimensional analysis. Partial Least Squares Discriminant Analyses (PLS-DA;

mixOmics package (80)) were performed on all the variables measured in the ileum

(n=201) and colon (n=250) to calculate their Variable Importance in Projection (VIP)

score (81) on the first and the second components of the PLS-DA that discriminated

the three formula groups. The variables with a VIP score greater than 1 on components

1 or 2 were selected, corresponding to 112 variables for the ileum and 141 variables

for the colon. Variables were then divided into eleven groups as follows: Barrier,

Immunity, Microbiota activity, Nutrient transporter, Endocrine and Tryptophan

metabolism, plus five microbiota phyla: Actinomycetota, Bacillota, Bacteroidota,

Pseudomonadota, and 'Other Phyla' (that gathered the Campylobacterota,

Deferribacterota, Desulfobacterota, Euryarchaeota, Fusobacteriota, Spirochaetota,

Synergistota, Verrucomicrobiota and Patescibacteria phyla), for the Multifactorial

analysis (MFA; FACTOMINE R package (82, 83)).

Data correlation. Pearson correlation coefficients with Benjamini–Hochberg correction

were determined between the SynCom bacteria, and microbiota and physiological

variables, and between microbial genera and physiological variables, in the ileum and

colon of formula-fed piglets. Relevant significant correlations ($|r| \geq 0.7$, $p < 0.05$) are

presented in the Figure 7 and the Supplemental Figure S3.

Figures

Figure 1. Growth curve of female (F) and male (M) formula-fed piglets (CRTL, AI, HI)

and sow milk-fed (SM) piglets.

Data are shown as means ± SEM. Body weight differences between the CTRL, AI, HI

and SM groups were assessed using repeated-measures ANOVA, testing for the

effects of diet, time and sex. The body weight of CTRL, AI and HI piglets differed from

that of SM piglets from PND7 to PND19 (p < 0.05).

Figure 2. Ileal (A) and colon (B) multifactorial analysis (MFA) using microbiota and intestinal

variables of formula-fed piglets (CRTL, AI, HI), and grouped by function or phylum (n = 11

groups of quantitative variables).

Variables used in the MFA were the most discriminating variables preselected by Partial Least

Squares-Discriminant Analysis (PLS-DA) with a Variable Importance in Projection (VIP) score

> 1 for components 1 and 2 (n=112 and 141 variables in the ileum and colon, respectively;

Supplemental Figure S1 and Table '*Table Individual ileal and colonic data used for PLS-DA*

and MFA' accessible in the repository https://doi.org/10.57745/ATTHZ3). On the MFA plots,

the dots represent the piglet individus, and the square symbols the barycenter of the ellipses.

The Red dot line on the histograms of contribution of variable groups represents the level of

statistical significance corresponding to the inverse of the number of groups of variables used

in the analyses.

Dim, Dimension

Figure 3. Ileal (A) and colonic (B) relative abundances of the OTUs potentially

corresponding to the SynCom strains added in AI and/or HI formulas.

Each individual is represented with one dot; Median with interquartile range. A three-

way ANOVA was performed testing for main effects of diet, sex, litter, and for

interactions between diet and sex, and diet and litter, followed by Tukey *post hoc* test

for parametric variables or a Kruskal Wallis test associated with Dunn test for non-

parametric variables.

A **sIgA concentration at PND8**

B **sIgA concentration at PND24**

C **PBMC cytokine secretion**

Figure 4. Secretory IgA (sIgA) concentration **(A)** in feces at PND8 and **(B)** in ileal and

colonic digesta at PND24 of formula-fed (CTRL, AI, HI) and sow milk-fed (SM) piglets;

(C) IL-10 and TNFα production in unstimulated (basal) and stimulated (Concanavalin

A, ConA) conditions of formula-fed (CTRL, AI, HI) PBMC.

Each individual is represented with one dot; Median with interquartile range. A three-

way ANOVA was performed testing for main effects of diet, sex, litter, and for

interactions between diet and sex, and diet and litter, followed by Tukey *post hoc* test

for parametric variables or a Kruskal Wallis test associated with Dunn test for non-

parametric variables. PBMC, Peripheral Blood Mononuclear Cells; PND, postnatal

days

A ILEUM

Function	Gene	AI	HI	SM	p value
Anti-inflammatory	SOCS3				0.069
Pro-inflammatory	CCL2	$			0.046
	TNFa				0.088
	IL4				0.089
	CCL20			*	0.048
	IFNg				0.067
	IL6	*			0.034
	CX3CL1	$	$	*	0.017
	TNFaR1	& $	* $	*	0.009
	IL8				0.094
Antioxidant activity	SOD2	& $	* $	*	0.009
Treg pathway	FOXP3	* &			0.008
Permeability	CLDN4	$	*	*	<0.001
	OCLN				0.064
	MLCK	$		*	0.014
	ZO1	$		*	0.022
	CTNNB1				0.098
Defense	IAP		$	*	0.008
Proliferation	PCNA	$	$		0.019
Apoptosis	CASP3	$	$	*	0.037
Nutrient transporter	MCT1				0.093
	MCT2	$		*	0.009
	SLC15A1	&	$		0.047
	MCT4			*	0.016
Tryptophan pathway	KYNU				0.097
	TPH1	$	$	*	0.007
Endocrine	NPY1R			*	0.047
	PYY			*	0.023
	CHGA	$	$	*	0.044

B COLON

Function	Gene	AI	HI	SM	p value
Anti-inflammatory	IL10	$	$	*	0.013
	SOCS3	$		*	0.047
Pro-inflammatory	IL1b			*	0.030
	IL6	$		*	0.006
	IL8				0.052
	IL4				0.067
	TNFaR1				0.094
	CX3CL1				0.080
	CCL20		$		0.027
Receptor/ cellular signalling	TLR4			*	0.042
	MYD88				0.067
	TLR2				0.099
Antioxidant activity	SOD2	* & $	*	*	0.003
Treg pathway	FOXP3	$	* $	*	0.001
Permeability	CLDN3				0.057
	CTNNB1				0.098
	F11R				0.085
	MLCK	$	$		0.001
	ZO1		$	*	0.033
	CLDN7	$	$		0.007
Defense	MUC2		$		0.009
Proliferation	PCNA	$	$	*	0.002
	TFF3				0.051
Apoptosis	CASP3	$	$	*	0.002
Nutrient transporter	IRS2			*	0.049
	GLUT1	$	$	*	0.001
	GCG	&	$		0.025
	MCT2				0.061
	GLP1R		$		0.043
	FFAR3		$	*	0.011

Figure 5. Heatmap of differentially expressed genes related to immune, epithelial barrier, nutrient transport, tryptophan metabolism and endocrine functions in ileum (A) and colon (B) of formula-fed AI and HI piglets and sow milk-fed (SM) piglets at PND24.

The expressions of the target genes relative to the CTRL values were determined using the 2-ΔΔCt method for group comparisons. Gene expression data shown in the figure are log2 transformed data. A three-way ANOVA was performed testing for main effects of diet, sex, litter, and for interactions between diet and sex, and diet and litter, followed by Tukey *post hoc* test. Differences between the CTRL, AI, HI and SM groups were considered as statistically significant for $p < 0.05$ and a trend for difference at $0.05 < p < 0.1$. When significant differences occurred, * indicates difference from CTRL, & difference from HI, and $ difference from SM.

The full name of genes is given in the Supplemental Table S7.

PND, postnatal days

Figure 6. Effects of diets on intestinal barrier. Villous length in ileum and crypt depth in ileum and colon; goblet cell density in ileal villi and ileal and colonic crypts; *ex vivo* (Ussing chamber) epithelial barrier paracellular and transcellular permeability in ileum and colon, in formula-fed (CTRL, AI, HI) and sow milk-fed (SM) piglets at PND24.

 Each individual is represented with one dot; Median with interquartile range. A three-way ANOVA was performed testing for main effects of diet, sex, litter, and for interactions between diet and sex, and diet and litter, followed by Tukey *post hoc* test for parametric variables or a Kruskal Wallis test associated with Dunn test for non-parametric variables.PND, postnatal days

Figure 7. Heatmap of significant correlations with Benjamini–Hochberg correction showing the relationship between the relative abundance of the OTUs potentially corresponding to AI and/or HI SynCom strains, and **(A and B)** physiological variables and **(C and D)** microbial genus abundances in the **(A and C)** ileum and **(B and D)** colon of formula-fed piglets. Only associations with a correlation coefficient $|r| > 0.7$ and a significant p value < 0.05 are shown, with the strength of those correlations denoted by the intensity of the circle's blue colour. Only positive correlations were significant. TNFα Basal PEYER, TNFα secretion by Peyer Patch cells in unstimulated condition ; IL10 LPS PEYER, IL-10 secretion by Peyer Patch cells in LPS-stimulated condition ; isovalerate, isovalerate concentration ; all the other variables in capital letters correspond to the expression of genes listed in Supplemented Table S7.

Acknowledgement

We warmly thank all volunteer mothers for their breastmilk samples and all the paediatric nurses of the maternity department of Rennes University Hospital, for their involvement in the project. The authors acknowledge the staff of Rennes Pig Physiology and Phenotyping Experimental Facility (UE1421 UE3P, Saint-Gilles, France, doi 10.15454/1.5573932732039927E12; Agreement No. D35-275-32) for their participation in the realization of this experiment and their expert assistance in animal care and feeding. We thank the Genotoul GeT-PlaGe platform from Toulouse (France) for 16S rRNA metabarcoding.

This work was funded by the Région Bretagne (grant no. 19008213) and Région Pays de la Loire (grant no. 2019-013227) (France), and by Bba Milk Valley association through the PROLIFIC project.

Conflict of interest

The authors declare no competing financial interests. The funders had no role in study design, data collection or the interpretation of the work.

Data Availability Statement

All data generated or analysed during this study are included in this published article and its supplementary information files. The datasets presented in this study can be found in online repositories (four Tables named 'Relative abundance of the OTUs that did not correspond to AI and HI bacteria in formulas', 'Individual ileal and colonic data used for PLS-DA and MFA', 'OTUs identified in sow milk', 'Cytokine production by Peyer Patch and PBMC cells in formula-fed piglets') https://doi.org/10.57745/ATTHZ3.

830 In addition, the raw sequences of microbiota analysis are available on NCBI

831 repositories (PRJNA1197167).

832
Contributions

ILHL, SE, YLL and SB conceived the project that led to the submission of this work.

ILHL and SE supervised research; CLB, SE and ILHL designed the experiment; CLB,

GR, AC, PD, SG, RJ, VR, LR, MBM, SE and ILHL acquired data; CLB, SE and ILHL

played an important role in interpreting the results; AB and LR realised the human milk

collection; CLB, SE and ILHL drafted the manuscript and had primary responsibility for

final content. All authors revised and approved the final manuscript.

References
842

1.   Castanet M, Costalos C, Haiden N, Hascoet J-M, Berger B, Sprenger N,

Grathwohl D, Brüssow H, De Groot N, Steenhout P, Pecquet S, Benyacoub J,

Picaud J-C. 2020. Early Effect of Supplemented Infant Formulae on Intestinal

Biomarkers and Microbiota: A Randomized Clinical Trial. 5. Nutrients 12:1481.

2.   Ballard O, Morrow AL. 2013. Human Milk Composition: Nutrients and Bioactive

Factors. Pediatr Clin North Am 60:49–74.

3.   Eriksen KG, Christensen SH, Lind MV, Michaelsen KF. 2018. Human milk

composition and infant growth. Curr Opin Clin Nutr Metab Care 21:200–206.

4.   Boudry G, Charton E, Le Huërou-Luron I, Ferret-Bernard S, Le Gall S, Even S,

Blat S. 2021. The Relationship Between Breast Milk Components and the Infant

Gut Microbiota. Front Nutr 8:629740.

5.   Charton E, Bourgeois A, Bellanger A, Le-Gouar Y, Dahirel P, Romé V,

Randuineau G, Cahu A, Moughan PJ, Montoya CA, Blat S, Dupont D, Deglaire

A, Le Huërou-Luron I. 2022. Infant nutrition affects the microbiota-gut-brain axis:

Comparison of human milk vs. infant formula feeding in the piglet model. Front

Nutr 9:976042.

6.   Oikonomou G, Addis MF, Chassard C, Nader-Macias MEF, Grant I, Delbès C,

Bogni CI, Le Loir Y, Even S. 2020. Milk Microbiota: What Are We Exactly Talking

About? Front Microbiol 11:60.

7.   Selma-Royo M, Lerma JC, Cortes-Maciás E, Collado MC. 2021. Human milk

microbiome: From actual knowledge to future perspective. Semin Perinatol

45:151450.

8.   Fernández L, Pannaraj PS, Rautava S, Rodriguez JM. 2020. The Microbiota of

the Human Mammary Ecosystem. Front Cell Infect Microbiol 10:586667.

9.   Le Bras C, Rault L, Jacquet N, Daniel N, Chuat V, Valence F, Bellanger A,

Bousarghin L, Blat S, Le Loir Y, Le Huërou-Luron I, Even S. 2024. Two human

milk-like synthetic bacterial communities displayed contrasted impacts on barrier

and immune responses in an intestinal quadricellular model. ISME Commun

ycad019.

10.   Pannaraj PS, Li F, Cerini C, Bender JM, Yang S, Rollie A, Adisetiyo H, Zabih S,

Lincez PJ, Bittinger K, Bailey A, Bushman FD, Sleasman JW, Aldrovandi GM.

2017. Association Between Breast Milk Bacterial Communities and

Establishment and Development of the Infant Gut Microbiome. JAMA Pediatr

171:647–654.

11.   Fehr K, Moossavi S, Sbihi H, Boutin RCT, Bode L, Robertson B, Yonemitsu C,

Field CJ, Becker AB, Mandhane PJ, Sears MR, Khafipour E, Moraes TJ,

Subbarao P, Finlay BB, Turvey SE, Azad MB. 2020. Breastmilk Feeding

Practices Are Associated with the Co-Occurrence of Bacteria in Mothers' Milk

and the Infant Gut: the CHILD Cohort Study. Cell Host Microbe 28:285-297.e4.

12.   Toscano M, De Grandi R, Grossi E, Drago L. 2017. Role of the Human Breast

Milk-Associated Microbiota on the Newborns' Immune System: A Mini Review.

Front Microbiol 8:2100.

13.   Díaz-Ropero MP, Martin R, Sierra S, Lara-Villoslada F, Rodriguez JM, Xaus J,

Olivares M. 2007. Two Lactobacillus strains, isolated from breast milk, differently

modulate the immune response. J Appl Microbiol 102:337–343.

14.   Pérez-Cano FJ, Dong H, Yaqoob P. 2010. In vitro immunomodulatory activity of

Lactobacillus fermentum CECT5716 and Lactobacillus salivarius CECT5713:

two probiotic strains isolated from human breast milk. Immunobiology 215:996–

1004.

15.   Lara-Villoslada FS, Olivares M, Sierra S, Rodriguez JM, Boza J, Xaus J. 2007.

Beneficial effects of probiotic bacteria isolated from breast milk. Br J Nutr 98:96–

100.

16.   Li S, Li N, Wang C, Zhao Y, Cao J, Li X, Zhang Z, Li Y, Yang X, Wang X, Che C,

Zhao Y, Wang L, Zhao L, Shen J. 2022. Gut Microbiota and Immune Modulatory

Properties of Human Breast Milk Streptococcus salivarius and S. parasanguinis

Strains. Front Nutr 9:798403.

17. Liu H, Zeng X, Zhang G, Hou C, Li N, Yu H, Shang L, Zhang X, Trevisi P, Yang

F, Liu Z, Qiao S. 2019. Maternal milk and fecal microbes guide the

spatiotemporal development of mucosa-associated microbiota and barrier

function in the porcine neonatal gut. BMC Biol 17:106.

18. Gallo RL. 2015. S. epidermidis Influence on Host Immunity: More Than Skin

Deep. Cell Host Microbe 17:143–144.

19. Xia X, Li Z, Liu K, Wu Y, Jiang D, Lai Y. 2016. Staphylococcal LTA-Induced miR-

143 Inhibits Propionibacterium acnes-Mediated Inflammatory Response in Skin.

J Invest Dermatol 136:621–630.

20. Delorme C, Abraham AL, Renault P, Guédon E. 2015. Genomics of

Streptococcus salivarius, a major human commensal. Infect Genet Evol 33:381–

392.

21. Ramani K., Cormack T, Cartwright ANR, Alami A, Parameswaran P , Abdou M

, Wang I , Hilliard-Barth K , Argueta S , Raghunathan D , Caffry W , Davitt

CJH , Romano FB, Ng A , Kravitz V , Rommel T, Sizova M , Kiran EU ,

Pradeep P, Ponichtera HE , Ganguly T , Bodmer M, Itano I. 2022. Regulation

of Peripheral Inflammation by a Non-Viable, Non-Colonizing Strain of

Commensal Bacteria. Front Immunol 13:768076.

22. Rosa F, Matazel KS, Elolimy AA, Adams SH, Bowlin A, Williams KD, Bode L,

Yeruva L. 2021. Human Milk-Fed Piglets Have a Distinct Small Intestine and

Circulatory Metabolome Profile Relative to That of Milk Formula-Fed Piglets.

mSystems 6:e01376-20.

23.   Roura E, Koopmans SJ, Lallès JP, Le Huërou-Luron I, de Jager N, Schuurman

T, Val-Laillet D . 2016. Critical review evaluating the pig as a model for human

nutritional physiology. Nutr Res Rev 29:60–90.

24.   Saraf MK, Piccolo BD, Bowlin AK, Mercer KE, LeRoith T, Chintapalli SV,

Shankar K, Badger TM, Yeruva L. 2017. Formula diet driven microbiota shifts

tryptophan metabolism from serotonin to tryptamine in neonatal porcine colon.

Microbiome 5:77.

25.   Nunoya T, Shibuya K, Saitoh T, Yazawa H, Nakamura K, Baba Y, Hirai T. 2007.

Use of Miniature Pig for Biomedical Research, with Reference to Toxicologic

Studies. J Toxicol Pathol 20:125–132.

26.   Morise A, Sève B, Macé K, Magliola C, Le Huërou-Luron I, Louveau I. 2009.

Impact of intrauterine growth retardation and early protein intake on growth,

adipose tissue, and the insulin-like growth factor system in piglets. Pediatr Res

65:45–50.

27.   Mach N, Berri M, Estellé J, Levenez F, Lemonnier G, Denis C, Leplat JJ,

Chevaleyre C, Billon Y, Doré J, Rogel-Gaillard C, Lepage P. 2015. Early-life

establishment of the swine gut microbiome and impact on host phenotypes.

Environ Microbiol Rep 7:554–569.

28.   Wang J, Han Y, Meng F, Zhao J, Zhou Z, Fan H. 2017. Fecal Microbiota

Succession of Piglets from Birth to Post-weaning by 454 Pyrosequencing

Analysis. Trans Tianjin Univ 23:211–220.

29. Li N, Huang S, Jiang L, Wang W, Li T, Zuo B, Li Z, Wang J. 2018. Differences in

the Gut Microbiota Establishment and Metabolome Characteristics Between

Low- and Normal-Birth-Weight Piglets During Early-Life. Front Microbiol 9:1798.

30. Chen W, Mi J, Lv N, Gao J, Cheng J, Wu R, Ma J, Lan T, Liao X. 2018.

Lactation Stage-Dependency of the Sow Milk Microbiota. Front Microbiol 9:945.

31. Dinleyici M, Pérez-Brocal V, Arslanoglu S, Aydemir O, Ozumut SS, Tekin N,

Vandenplas Y, Moya A, Dinleyici EC. 2024. Composition of Microbiota in

Transient and Mature Human Milk: Significant Changes in Large for Gestational

Age Group. Nutrients 16:208.

32. Milani C, Mancabelli L, Lugli GA, Duranti S, Turroni F, Ferrario C, Mangifesta M,

Viappiani A, Ferretti P, Gorfer V, Tett A, Segata N, van Sinderen D, Ventura M.

2015. Exploring Vertical Transmission of Bifidobacteria from Mother to Child.

Appl Environ Microbiol 81:7078–7087.

33. Asnicar F, Manara S, Zolfo M, Truong DT, Scholz M, Armanini F, Ferretti P,

Gorfer V, Pedrotti A, Tett A, Segata N. 2017. Studying Vertical Microbiome

Transmission from Mothers to Infants by Strain-Level Metagenomic Profiling.

mSystems 2:e00164-16.

34. Duranti S, Lugli GA, Mancabelli L, Armanini F, Turroni F, James K, Ferretti P,

Gorfer V, Ferrario C, Milani C, Mangifesta M, Anzalone R, Zolfo M, Viappiani A,

Pasolli E, Bariletti I, Canto R, Clementi R, Cologna M, Crifò T, Cusumano G,

Fedi S, Gottardi S, Innamorati C, Masè C, Postai D, Savoi D, Soffiati M, Tateo S,

Pedrotti A, Segata N, van Sinderen D, Ventura M. 2017. Maternal inheritance of

bifidobacterial communities and bifidophages in infants through vertical

transmission. Microbiome 5:66.

35. García-Ricobaraza M, García-Santos JA, Escudero-Marín M, Diéguez E, Cerdó

T, Campoy C. 2021. Short- and Long-Term Implications of Human Milk

Microbiota on Maternal and Child Health. Int J Mol Sci 22:11866.

36. Long DR, Hsu JE, Salipante SJ, Bumgarner RE. 2019. Letter to the Editor

regarding Qui et al: "Cutibacterium acnes and the shoulder microbiome." J

Shoulder Elbow Surg 28:e275–e276.

37. Le Bras C, Mouchard A, Rault L, Cochet M-F, Ménard O, Jacquet N, Chuat V,

Valence F, Le Loir Y, Bellanger A, Deglaire A, Le Huërou-Luron I, Even S. 2025.

New insights into the cultivability of human milk bacteria from ingestion to

digestion and implications for their Immunomodulatory properties. Sci Rep

15:10985.

38. Sekirov I, Russel SL, Antunes CM, Finlay BB. 2010. Gut Microbiota in Health

and Disease'. Physiol Rev 90:859–904.

39. Baglatzi L, Gavrili S, Stamouli K, Zachaki S, Favre L, Pecquet S, Benyacoub J,

Costalo C. 2016. Effect of Infant Formula Containing a Low Dose of the Probiotic

Bifidobacterium lactis CNCM I-3446 on Immune and Gut Functions in C-Section

Delivered Babies: A Pilot Study. Clin Med Insights Pediatr 10:33096.

40. Díaz-Ropero MP, Martín R, Sierra S, Lara-Villoslada F, Rodríguez JM, Xaus J,

Olivares M. 2007. Two Lactobacillus strains, isolated from breast milk, differently

modulate the immune response. J Appl Microbiol 102:337–343.

41. Pérez-Cano FJ, Dong H, Yaqoob P. 2010. In vitro immunomodulatory activity of

Lactobacillus fermentum CECT5716 and Lactobacillus salivarius CECT5713:

two probiotic strains isolated from human breast milk. Immunobiology 215:996–

1004.

42. Chiu Y-H, Tsai J-J, Lin S-L, Chotirosvakin C, Lin M-Y. 2014. Characterisation of

bifidobacteria with immunomodulatory properties isolated from human breast

milk. J Funct Foods 7:700–708.

43. Jamyuang C, Phoonlapdacha P, Chongviriyaphan N, Chanput W, Nitisinprasert

S, Nakphaichit M. 2019. Characterization and probiotic properties of Lactobacilli

from human breast milk. 3 Biotech 9:398.

44. Saeed A, Yasmin A, Baig M, Ahmed MA, Farooqi Z-R. 2023. Streptococcus

lactarius MB622 and Streptococcus salivarius MB620 isolated from human milk

reduce chemokine IL-8 production in response to TNF-α in Caco-2 cell line, an

exploratory study. Cytokine 168:156232.

45. Laubereau B, Brockow I, Zirngibl A, Koletzko S, Gruebl A, von Berg A, Filipiak-

Pittroff B, Berdel D, Peter Bauer C, Reinhardt D, Heinrich J, Wichmann H-E, for

the GINI Study Group. 2004. Effect of breast-feeding on the development of

atopic dermatitis during the first 3 years of life - results from the GINI-birth cohort

study. J Pediatr 144:602–607.

46. Calder PC, Krauss-Etschmann S, de Jong EC, Dupont C, Frick J-S, Frokiaer H,

Heinrich J, Garn H, Koletzko S, Lack G, Mattelio G, Renz H, Sangild PT,

Schrezenmeir J, Stulnig TM, Thymann T, Wold AE, Koletzko B. 2006. Early

nutrition and immunity - progress and perspectives. Br J Nutr 96:774–790.

47. Rougé C, Butel M-J, Piloquet H, Ferraris L, Legrand A, Vodovar M, Voyer M, de

la Cochetière M-F, Darmaun D, Rozé J-C. 2010. Fecal Calprotectin Excretion in

Preterm Infants during the Neonatal Period. PLoS ONE 5:e11083.

48. Camacho-Morales A, Caba M, García-Juárez M, Caba-Flores MD, Viveros-

Contreras R, Martínez-Valenzuela C. 2021. Breastfeeding Contributes to

Physiological Immune Programming in the Newborn. Front Pediatr 9:744104.

49. Al Nabhani Z, Dulauroy S, Marques R, Cousu C, Al Bounny S, Déjardin F,

Sparwasser T, Bérard M, Cerf-Bensussan N, Eberl G. 2019. A Weaning

Reaction to Microbiota Is Required for Resistance to Immunopathologies in the

Adult. Immunity 50:1276-1288.e5.

50. Kellermayer R, Dowd SE, Harris RA, Balasa A, Schaible TD, Wolcott RD,

Tatevian N, Szigeti R, Li Z, Versalovic J, Smith CW. 2011. Colonic mucosal DNA

methylation, immune response, and microbiome patterns in Toll-like receptor 2-

knockout mice. FASEB J 25:1449–1460.

51. Dimitriu PA, Boyce G, Samarakoon A, Hartmann M, Johnson P, Mohn WW.

2013. Temporal stability of the mouse gut microbiota in relation to innate and

adaptive immunity. Environ Microbiol Rep 5:200–210.

52. Hamada K, Isobe J, Hattori K, Hosonuma M, Baba Y, Murayama M, Narikawa Y,

Toyoda H, Funayama E, Tajima K, Shida M, Hirasawa Y, Tsurui T, Ariizumi H,

Ishiguro T, Suzuki R, Ohkuma R, Kubota Y, Sambe T, Tsuji M, Wada S, Kiuchi

Y, Kobayashi S, Kuramasu A, Horiike A, Kim Y-G, Tsunoda T, Yoshimura K.

2023. Turicibacter and Acidaminococcus predict immune-related adverse events

and efficacy of immune checkpoint inhibitor. Front Immunol 14:1164724.

53. Jiang W, Wu N, Wang X, Chi Y, Zhang Y, Qiu X, Hu Y, Li J, Liu Y. 2015.

Dysbiosis gut microbiota associated with inflammation and impaired mucosal

immune function in intestine of humans with non-alcoholic fatty liver disease. 1.

Sci Rep 5:8096.

54. Parker BJ, Wearsch PA, Veloo ACM, Rodriguez-Palacios A. 2020. The Genus

Alistipes: Gut Bacteria With Emerging Implications to Inflammation, Cancer, and

Mental Health. Front Immunol 11:906.

55. Li Z, Rasic M, Kwan M, Sepulveda M, McIntosh C, Shastry V, Chen L, Finn P,

Perkins D, Alegre M-L. 2023. Oral administration of the commensal Alistipes

onderdonkii prolongs allograft survival. Am J Transplant Off J Am Soc

Transplant Am Soc Transpl Surg 23:272–277.

56. Koutras AK, Vigorita VJ. 1989. Fecal secretory immunoglobulin A in breast milk

versus formula feeding in early infancy. J Pediatr Gastroenterol Nutr 9:58–61.

57. Bridgman SL, Konya T, Azad MB, Guttman DS, Sears MR, Becker AB, Turvey

SE, Mandhane PJ, Subbarao P, CHILD Study Investigators, Scott JA, Field CJ,

Kozyrskyj AL. 2016. High fecal IgA is associated with reduced Clostridium

difficile colonization in infants. Microbes Infect 18:543–549.

58. Xiao L, Gong C, Ding Y, Ding G, Xu X, Deng C, Ze X, Malard P, Ben X. 2019.

Probiotics maintain intestinal secretory immunoglobulin A levels in healthy

formula-fed infants: a randomised, double-blind, placebo-controlled study. Benef

Microbes 10:729–739.

59. Chichlowski M, van Diepen JA, Prodan A, Olga L, Ong KK, Kortman GAM,

Dunger DB, Gross G. 2023. Early development of infant gut microbiota in

relation to breastfeeding and human milk oligosaccharides. Front Nutr

10:1003032.

60. Davis EC, Wang M, Donovan SM. 2017. The role of early life nutrition in the

establishment of gastrointestinal microbial composition and function. Gut

Microbes 8:143-171.

61. Derrien M, Alvarez A-S, de Vos WM. 2019. The Gut Microbiota in the First

Decade of Life. Trends Microbiol 27:997–1010.

62. Ho NT, Li F , Lee-Sarwar KA , Tun HM, Brown BP , Pannaraj PS, Bender JM ,

Azad MB, Thompson AL, Weiss ST, Azcarate-Peril MA, Litonjua AA, Kozyrskyj

AL, Jaspan HB, Aldrovandi GM, Kuhn L. 2018. Meta-analysis of effects of

exclusive breastfeeding on infant gut microbiota across populations. Nat

Commun 9:4169.

63. Pannaraj PS, Li F, Cerini C, Bender JM, Yang S, Rollie A, Adisetiyo H, Zabih S,

Lincez PJ, Bittinger K, Bailey A, Bushman FD, Sleasman JW, Aldrovandi GM.

2017. Association Between Breast Milk Bacterial Communities and

Establishment and Development of the Infant Gut Microbiome. JAMA Pediatr

171:647–654.

64. Ma J, Li Z, Zhang W, Zhang C, Zhang Y, Mei H, Zhuo N, Wang H, Wang L, Wu

D. 2020. Comparison of gut microbiota in exclusively breast-fed and formula-fed

babies: a study of 91 term infants. Sci Rep 10:15792.

65. Stewart CJ, Ajami NJ, O'Brien JL, Hutchinson DS, Smith DP, Wong MC, Ross

MC, Lloyd RE, Doddapaneni H, Metcalf GA, Muzny D, Gibbs RA, Vatanen T,

Huttenhower C, Xavier RJ, Rewers M, Hagopian W, Toppari J, Ziegler AG ,

She JX, Akolkar B, Lernmark A, Hyoty H, Vehik K , Krischer JP, Petrosino JF.

2018. Temporal development of the gut microbiome in early childhood from the

TEDDY study. Nature 562:583–588.

66. Brink LR, Matazel K, Piccolo BD, Bowlin AK, Chintapalli SV, Shankar K, Yeruva

L. 2019. Neonatal Diet Impacts Bioregional Microbiota Composition in Piglets

Fed Human Breast Milk or Infant Formula. J Nutr 149:2236–2246.

67. Brink LR, Mercer KE, Piccolo BD, Chintapalli SV, Elolimy A, Bowlin AK, Matazel

KS, Pack L, Adams SH, Shankar K, Badger TM, Andres A, Yeruva L. 2020.

Neonatal diet alters fecal microbiota and metabolome profiles at different ages in

infants fed breast milk or formula. Am J Clin Nutr 111:1190–1202.

68. Poulsen A-SR, de Jonge N, Sugiharto S, Nielsen JL, Lauridsen C, Canibe N.

2017. The microbial community of the gut differs between piglets fed sow milk,

milk replacer or bovine colostrum. Br J Nutr 117:964–978.

69. Plunkett CH, Nagler CR. 2017. The Influence of the Microbiome on Allergic

Sensitization to Food. J Immunol 198:581–589.

70. Lee GO, McCormick BJJ, Seidman JC, Kosek MN, Haque R, Olortegui MP,

Lima AAM, Bhutta ZA, Kang G, Samie A, Amour C, Mason CJ, Ahmed T, Yori

PP, Oliveira DB, Alam D, Babji S, Bessong P, Mduma E, Shrestha SK,

Ambikapathi R, Lang DR, Gottlieb M, Guerrant RL, Caulfield LE, For The Mal-Ed

Network Investigators null. 2017. Infant Nutritional Status, Feeding Practices,

Enteropathogen Exposure, Socioeconomic Status, and Illness Are Associated

with Gut Barrier Function As Assessed by the Lactulose Mannitol Test in the

MAL-ED Birth Cohort. Am J Trop Med Hyg 97:281–290.

71.   Catassi C, Bonucci A, Coppa GV, Carlucci A, Giorgi PL. 1995. Intestinal

1102   permeability changes during the first month: effect of natural versus artificial

1103   feeding. J Pediatr Gastroenterol Nutr 21:383–386.

1104   72.   Le Huërou-Luron I, Blat S, Boudry G. 2010. Breast- v. formula-feeding: impacts

1105   on the digestive tract and immediate and long-term health effects. Nutr Res Rev

1106   23:23–36.

1107   73.   Weaver LT. 1988. The impact of milk and weaning diet on gastrointestinal

1108   permeability in English and Gambian infants. Trans R Soc Trop Med Hyg

1109   82:784–789.

1110   74.   Elolimy AA, Washam C, Byrum S, Chen C, Dawson H, Bowlin AK, Randolph

1111   CE, Saraf MK, Yeruva L. 2020. Formula Diet Alters the Ileal Metagenome and

1112   Transcriptome at Weaning and during the Postweaning Period in a Porcine

1113   Model. mSystems 5:e00457-20.

1114   75.   Mariadassou M, Nouvel LX, Constant F, Morgavi DP, Rault L, Barbey S, Helloin

1115   E, Rué O, Schbath S, Launay F, Sandra O, Lefebvre R, Le Loir Y, Germon P,

1116   Citti C, Even S. 2023. Microbiota members from body sites of dairy cows are

1117   largely shared within individual hosts throughout lactation but sharing is limited

1118   in the herd. Anim Microbiome 5:32.

1119   76.   Le Bourgot CL, Ferret-Bernard S, Normand LL, Savary G, Menendez-Aparicio E,

1120   Blat S, Appert-Bossard E, Respondek F, Huërou-Luron IL. 2014. Maternal Short-

1121   Chain Fructooligosaccharide Supplementation Influences Intestinal Immune

1122   System Maturation in Piglets. PLOS ONE 9:e107508.

77. Lemaire M, Dou S, Cahu A, Formal M, Le Normand L, Romé V, Nogret I, Ferret-
Bernard S, Rhimi M, Cuinet I, Canlet C, Tremblay-Franco M, Le Ruyet P, Baudry
C, Gérard P, Le Huërou-Luron I, Blat S. 2018. Addition of dairy lipids and
probiotic Lactobacillus fermentum in infant formula programs gut microbiota and
entero-insular axis in adult minipigs. 1. Sci Rep 8:11656.

78. Guerbette T, Beaumont M, Andriamihaja M, Ciesielski V, Perrin J-B, Janvier R,
Randuineau G, Leroyer P, Loréal O, Rioux V, Boudry G, Lan A. 2023.
Obesogenic diet leads to luminal overproduction of the complex IV inhibitor H2S
and mitochondrial dysfunction in mouse colonocytes. FASEB J 37:e22853.

79. Escudié F, Auer L, Bernard M, Mariadassou M, Cauquil L, Vidal K, Maman S,
Hernandez-Raquet G, Combes S, Pascal G. 2018. FROGS: Find, Rapidly,
OTUs with Galaxy Solution. Bioinforma Oxf Engl 34:1287–1294.

80. Cao K-AL, Rohart F, Gonzalez I, Dejean S, Abadi AJ, Bladen M, Gautier B,
Bartolo F, Monget P, Coquery J, Yao F, Liquet B. 2023. mixOmics: Omics Data
Integration Project (6.26.0). Bioconductor version: Release (3.18).

81. Cocchi M, Biancolillo A, Marini F. 2018. Chapter Ten - Chemometric Methods for
Classification and Feature Selection, p. 265–299. In Jaumot, J, Bedia, C, Tauler,
R (eds.), Comprehensive Analytical Chemistry. Elsevier.

82. Lê S, Josse J, Husson F. 2008. FactoMineR: An R Package for Multivariate
Analysis. J Stat Softw 25:1–18.

83. de Tayrac M, Lê S, Aubry M, Mosser J, Husson F. 2009. Simultaneous analysis
of distinct Omics data sets with integration of biological knowledge: Multiple
Factor Analysis approach. BMC Genomics 10:32.

84. Arrieta MC, Stiemsma LT, Dimitriu PA, Thorson L, Russell S, Yrist-Doutsch S,

Kuzeljevic B, Gold MJ, Britton HM, Lefebvre DL, Subbarao P, Mandhane P,

Becker A, McNagny KM, Sears MR, Kollmann T, The Child study investigators,

Mohn WW, Turvey SE, Finlay BB. 2015. Early infancy microbial and metabolic

alterations affect risk of childhood asthma. Sci. Trans. Medicine 7:307.

85. Gotoh A, Ojima MN, Katayama T. 2019. Minority species influences microbiota

formation: the role of Bifidobacterium with extracellular glycosidases in bifidus

flora formation in breastfed infant guts. Microbial Biotechnology 12:259-264.

86. Akbuga-Schön T, Suzuki TA, Jakob D, Long Vu D, Waters JL, Ley RE. 2024. The

keystone gut species *Christensenella minuta* boosts gut microbial biomass and

voluntary physical activity in mice. mBio 15:e0283623.

1157

1158

1159 **Table 1.** Relative abundances of the Syncom OTUs in formulas[5], and in the feces at PND8 and ileum, colon and feces of formula-

1160 fed (CRTL, AI and HI) piglets at PND24.

1161 OTUs potentially corresponding to the strains added in SynCom AI and/or HI formulas are presented together with their relative

1162 abundance (in % of total OTUs) in feces, ileon and colon microbiota.

Strain	added in AI	added in HI	ID[1]	Identification	OTU relative abundance (%) in formulas			OTU relative abundance (%) in ileum PND24[2]			OTU relative abundance (%) in colon PND24[2]			OTU relative abundance (%) in feces PND24[2]			OTU relative abundance (%) in feces PND8[2]		
					CTRL	AI	HI	CTRL	AI	HI	CTRL	AI	HI	CTRL	AI	HI	CTRL	AI	HI
Bifidobacterium bifidum (CIRM BIA 2840)	x	x	172	*Bifidobacterium bifidum*	0.002	1.428	1.286	0.0003	**0.0206**	0.0170		0.0002	0.0004		0.0003		0.0003		0.0003
Bifidobacterium breve (CIRM BIA 2844)	x		99	*Bifidobacterium breve*		5.341		0.0006	***0.1159***	*0.0008*		***0.0103***	*0.0002*	0.0002	***0.0144***	*0.0002*	0.0003	**0.0584**	0.0012
			184	*Bifidobacterium breve*		2.489		0.0003	**0.0485**	0.0009		0.0044	0.0003	0.0004	0.0049			0.0209	
			2283	*Bifidobacterium breve*		0.084			0.0012									0.0009	
Bifidobacterium breve (CIRM BIA 2845)		x	205	*Bifidobacterium breve*			0.893	0.0006	*0.0003*	***0.2889***	0.0003		0.0148	0.0002		0.0113	0.0002	0.0002	0.0011
Corynebacterium simulans (CIRM BIA 2853)[3]	x		78	*Corynebacterium sp.*	0.002	7.205	1.575		**0.3388**	**0.0709**	0.0002	**0.0147**	**0.0065**	0.0002	**0.0288**	**0.0119**	0.0005	**0.0180**	0.0043
Corynebacterium kroppenstedtii (CIRM BIA 2852)[3]		x	78	*Corynebacterium sp.*	0.002	7.205	1.575		**0.3388**	**0.0709**	0.0002	**0.0147**	**0.0065**	0.0002	**0.0288**	**0.0119**	0.0005	**0.0180**	0.0043
Lactobacillus gasseri[4] (CIRM BIA 2841)	x		10	*Lactobacillus sp.*	0.025	3.212	0.022	8.4725	12.053	10.764	0.5893	0.7879	0.4547	0.3195	0.3337	0.2538	0.0967	0.1923	0.1277
			1622	*Lactobacillus sp.*		0.018		0.0357	0.0347	0.0466	0.0010	0.0005						0.0007	
Lactobacillus jensenii (CIRM BIA 2839)		x	203	*Lactobacillus jensenii*			1.566		0.0006	0.0127	0.0005	0.0002	0.0008			0.0009			0.0006
Micrococcus luteus (CIRM BIA 2843)		x	204	*Micrococcus sp.*	0.002		1.676	0.0003		0.0181		0.0006	0.0023	0.0002		0.0005		0.0002	
Rothia mucilaginosa (CIRM BIA 2847)	x	x	209	*Rothia mucilaginosa*		1.283	0.629		**0.0225**	0.0117		0.0002	0.0002	0.0002	0.0008		0.0002	0.0002	0.0002

Species			OTU	OTU taxonomy																
Staphylococcus haemolyticus (CIRMBP-1635)	x		94	*Staphylococcus haemolyticus*	0.004	13.97	0.002	0.0512	***0.8563***	*0.0184*	0.0036	**0.0245**	*0.0026*	0.0019	***0.0150***	*0.0018*	0.0040	0.0166	0.0071
			3443	*Staphylococcus sp.*		0.088		0.0007	0.0102										
			3980	*Staphylococcus sp.*		0.043		0.0003	0.0015	0.0002				0.0002					
			5808	*Staphylococcus sp.*		0.018		0.0013	0.0221	0.0007									
Staphylococcus capitis (CIRMBP-1634)		x	41	*Staphylococcus capitis*	0.009	0.191	43.10	0.0415	0.0311	0.4045	0.0036	0.0032	0.0186	0.0029	*0.0030*	**0.0175**	0.0175	0.0036	0.0035
			2175	*Staphylococcus sp.*		0.043		0.0005		0.0022				0.0002			0.0003		
			2556	*Staphylococcus sp.*		0.061				0.0010									
			2648	*Staphylococcus sp.*		0.002	0.051	0.0008	0.0008	0.0097					0.0002				
			3748	*Staphylococcus sp.*			0.038	0.0002	0.0003	0.0026	0.0003								
Staphylococcus epidermidis (CIRMBP-1633)		x	2175	*Staphylococcus sp.*		0.043													
			2556	*Staphylococcus sp.*		0.061				0.0010									
			2648	*Staphylococcus sp.*		0.002	0.051	0.0008	0.0008	0.0097					0.0002				
			3748	*Staphylococcus sp.*			0.038	0.0002	0.0003	0.0026	0.0003								
Streptococcus salivarius (CIRM BIA 2846)		x	1690	*Streptococcus sp.*		0.032	0.097												
			1091	*Streptococcus sp.*	0.002	0.084	0.025												
Winkia neuii (CIRM BIA 2850)	x		127	*Winkia neuii*		4.899		0.0003	***0.1470***	*0.0002*	0.0003	**0.0075**	*0.0005*		**0.0125**		0.0002	0.0067	
Veillonella dispar (CIRM BIA 2842)	x	x		No corresponding OTU															
Cutibacterium granulosum (CIRM BIA 2851)	x			No corresponding OTU															
Cutibacterium granulosum (CIRM BIA 2848)		x		No corresponding OTU															
Cutibacterium acnes (CIRM BIA 2849)	x			No corresponding OTU															
Streptococcus infantis (CIRM BP-1636)	x			No corresponding OTU															

1163

1164

[1] ID of OTUs identified in formulas; In few cases, multiple OTUs have been considered appropriate for a strain, or conversely, one

potential OTU was assigned to two strains of a single genus, considering that the 16S sequencing identification of bacteria was

reliable at the genus level.

[2] In bold, significative differential abundances in AI or HI formula-fed piglets compared to CTRL formula-fed piglets within each

intestinal site or fecal PND period; in italic, significative differential abundances between HI and AI formula-fed piglets within each

intestinal site or fecal PND period (Deseq analysis)

[3] *Corynebacterium simulans* CIRM BIA 2853 and *Corynebacterium kroppenstedtii* CIRM BIA 2852 were associated to a single OTU

(78)

[4] For *Lactobacillus gasseri*, two OTUs of *Lactobacillus sp.* (10 and 1622) were identified in the intestinal compartments without any

possibility to discriminate between the strain added in SynCom AI and those of the piglet intestine microbiota, knowing that

Lactobacillus was highly predominant in the ileum and colon of the three formula-fed groups.

[5] It is noteworthy that additional OTUs were also identified in the three prepared formulas (Table *'Relative abundance of the OTUs*

that did not correspond to the AI and HI bacteria in formulas' available on the online dataverse https://doi.org/10.57745/ATTHZ3),

as early as the rehydration of formula powders. These additional OTUs were not differentially abundant between the three rehydrated

formulas, suggesting that this environmental contamination probably occurred during the process of formula manufacturing and/or

were present in dairy ingredients.

PND, postnatal day

1182

 Table 2. Impact of SynComs AI and HI on the relative abundance of bacterial families, and genera in the feces at PND8 and in the
 ileum, colon and feces at PND24 of formula-fed and sow milk-fed piglets, and the differential abundance between groups (log$_2$ fold
 change).

Phylum	Family	Genus	CTRL *vs.* AI		CTRL *vs.* HI		AI *vs.* HI		Abundance (%) [1]			
			p-adjusted	log$_2$ (Fold Change)	p-adjusted	log$_2$ (Fold Change)	p-adjusted	log$_2$ (Fold Change)	CTRL	AI	HI	SM
FECES PND8												
Actinomycetota	Actinomycetaceae		0.002	3.75	0.033	2.96			0.4037	0.0346*	0.0488	0.1601
	Atopobiaceae						0.005	3.95	0.0279	0.0666	0.0056	0.0330
	Bifidobacteriaceae						0.010	3.73	0.0344	0.1209*	0.0112	0.0087
Bacteroidota	Prevotellaceae		<0.001	-5.10	0.006	-4.64			0.1511*	3.5725	3.5217	4.6406
	Rikenellaceae		0.046	-2.80	0.002	-4.37			0.2590	1.3198	4.2684	0.6830
Bacillota	Aerococcaceae						0.007	-5.33	0.0006	<0.0001*	0.0185	0.0073
	Clostridia vadinBB60 group_unknown family				0.033	-3.63	0.004	-4.81	0.0604	0.2962	0.5514	0.0120
	Enterococcaceae		<0.001	3.30	0.002	3.05			10.268*	1.4735*	1.596*	0.2376
	Ruminococcaceae		0.020	-1.19					9.5377	18.142	11.088	10.3816
	Bacilli_ unknown family		<0.001	-5.03			0.004	4.48	<0.0001	0.0141	0.0003	0.0015
	Erysipelotrichaceae unknown family		0.026	1.98					0.4559*	0.1075*	0.1728*	0.0227
Pseudomonadota	Enterobacterales unknown family		0.020	-4.50	0.036	-4.39			0.0062	0.0966	0.1287	0.0005
Actinomycetota	Actinomycetaceae	*Actinomyces*	0.002	3.98	0.031	3.28			0.4020	0.0341	0.0462	0.1523
	Bifidobacteriaceae	*Bifidobacterium*					0.031	3.69	0.0344	0.1209*	0.0112	0.0087
Bacteroidota	Prevotellaceae	*Prevotella*			0.022	-6.56			0.0249*	0.7057*	2.4295	2.5357
	Rikenellaceae	*Alistipes*	<0.001	-11.69			<0.001	9.81	0.0002*	0.6927	0.0009*	0.1272
	Rikenellaceae	*RC9 gut group*			0.009	-4.30			0.2423	0.6196	4.1748	0.5557
Bacillota	Enterococcaceae	*Enterococcus*	0.001	3.06	0.006	2.90			10.268*	1.4735*	1.5960*	0.2376

	Eubacteriaceae	*[Eubacterium] brachy group*	0.007	3.21					0.3984	0.0399	0.1328	0.1260
	Eubacteriaceae	*Eubacterium*			<0.001	9.293	0.004	9.71	0.3397	0.4580	0.1194	0.0104
	Lachnospiraceae	*CAG-56*	<0.001	-7.80					0.4227	0.5792*	0.3691	0.0041
	Lactobacillaceae	*Leuconostoc*	<0.001	4.01					0.1797*	0.0104	0.1050*	0.0074
	Oscillospiraceae	*Oscillibacter*			0.027	2.66			0.1120*	0.0236*	0.0128	0.0013
	Oscillospiraceae	*Oscillospira*	0.020	-3.02					0.0723	0.4949*	0.3589*	0.0085
	Ruminococcaceae	*Negativibacillus*			<0.001	-9.02	0.003	-7.31	0.0003*	0.0007*	0.1073	0.0299
	Bacilli_MA	MultiAffiliation	<0.001	-5.04			0.007	4.48	<0.0001	0.0141	0.0003	0.0015

ILEUM PND24

Actinomycetota	Actinomycetaceae		0.001	-2.55	0.036	-1.92	NS		0.0697	0.4850*	0.2654	0.0157
Bacteroidota	Bacteroidaceae		NS		NS		0.003	-2.02	0.0693*	0.0792*	0.1449	0.0652
Bacillota	Anaerovoracaceae		NS		0.022	-2.36	0.004	-2.50	0.0032	0.0054	0.0184	0.0030
	Lachnospiraceae		NS		NS		0.049	-1.07	0.2981*	0.2919*	0.4394*	0.1988
	Lactobacillaceae		0.002	1.81	NS		NS		63.076*	47.171*	47.534*	58.8158
	Peptostreptococcaceae		NS		0.006	-3.30	NS		2.2256*	10.1021*	12.1278*	30.3666
	Ruminococcaceae		NS		NS		0.041	-1.29	0.0669	0.0843*	0.1181	0.0440
	Bacilli_Multi-affiliated		<0.001	-7.29	NS		<0.001	8.46	0.0010	0.4339	0.0003	0.0006
	Erysipelotrichaceae		NS		0.020	-3.08	0.012	-3.08	0.1444*	0.2784*	1.0665*	2.8484
Actinomycetota	Actinomycetaceae	*Actinomyces*	<0.001	-3.27	0.050	-2.17	NS		0.0463	0.3594	0.1700	0.0083
Bacillota	Clostridiaceae	*Clostridium sensu stricto 1*	NS		0.038	-3.09	NS		0.1348*	0.1839*	0.6792	1.7373
	Lachnospiraceae	*Eubacterium fissicatena grp*	NS		0.030	-2.60	NS		0.0050	0.0076	0.0238	0.0046
	Peptostreptococcaceae	*Multi-affiliated*	NS		0.011	-3.66	NS		1.4123	8.4800	11.077	13.8917
	Bacilli_MA	*Multi-affiliated*	<0.001	-8.65	NS		<0.001	9.57	0.0010	0.4339	0.0003	0.0006
	Staphylococcaceae	*Staphylococcus*	0.003	-2.69					0.1156*	0.9394*	0.4529*	0.0117
	Streptococcaceae	*Lactococcus*	0.030	3.40	NS		NS		1.9620*	0.2310*	1.0012*	0.0040
	Turicibacteraceae	*Turicibacter*	NS		0.038	-3.27	NS		0.1444*	0.2781*	1.0665	2.8484

COLON PND24

Bacillota	Butyricicoccaceae		<0.001	2.77	NS		NS		0.2761*	0.0470	0.1576*	0.0295
	Clostridia vadinBB60 group unknown family		NS		0.028	-4.50	NS		0.0005	0.0087	0.0307	0.0033
	Family XI		<0.001	-17.32	<0.001	-22.49	0.007	-5.18	<0.0001*	0.0019	0.0854*	0.0012
	Staphylococcaceae		<0.001	-4.38	NS		<0.001	5.37	0.0096	0.0282	0.0231	0.0060
Bacteroidota	Rikenellaceae	*Alistipes*	<0.001	-6.59	NS		<0.001	7.14	0.0016*	0.1486*	0.0012*	2.2380
Bacillota	Butyricicoccaceae	*Butyricicoccus*	0.003	2.81	NS		NS		0.1681*	0.0242	0.1046	0.0250

Phylum	Family	Genus										
	Clostridia vadinBB60 group	*unknown genus*	NS		0.016	-5.11	NS		0.0010	0.0047	0.0377	0.0033
	Lactobacillaceae	*Leuconostoc*	0.017	2.77	NS		NS		0.2228*	0.0359	0.1744*	0.0061
	Staphylococcaceae	*Staphylococcus*	0.001	-4.67	NS		<0.001	5.36	0.0096	0.0282	0.0227	0.0056
	Streptococcaceae	*Lactococcus*	NS		NS		0.003	-4.24	0.0987	0.0161	0.3101*	0.0114
FECES PND24												
Actinomycetota	Actinomycetaceae		0.023	-2.28	0.001	-2.75	NS		0.0060	0.0372	0.0466*	0.0126
	Atopobiaceae		NS		0.016	3.03	NS		0.0250	0.0122	0.0048	0.0285
Bacteroidota	Marinifilaceae		0.046	-8.12	<0.001	38.06	<0.001	46.18	0.0002*	0.1125	<0.0001*	1.2923
Bacillota	Family XI		NS		<0.001	-7.90	<0.001	-7.95	0.0004	0.0004	0.0689*	0.0035
	Bacilli_MA		<0.001	-5.88	NS		<0.001	6.20	0.0002	0.0304	<0.0001	0.0004
Actinomycetota	Actinomycetaceae	*Actinomyces*	0.003	-2.91	0.007	-2.90	NS		0.0049	0.0365	0.0411	0.0121
Bacteroidota	Muribaculaceae	*Muribaculum*	NS		<0.001	11.01	<0.001	8.06	0.7124	0.1557	0.0005*	0.0403
	Rikenellaceae	*Alistipes*	<0.001	-8.15	NS		<0.001	7.83	0.0006*	0.1310	0.0010*	2.9391
Bacillota	Lactobacillaceae	*Leuconostoc*	0.005	2.85	NS		NS		0.3313*	0.0356*	0.1193*	0.0032
	Peptostreptococcaceae	*Peptostreptococcus*	0.044	-3.40	NS		NS		0.0016*	0.0123	0.0078	0.0326
	Bacilli-MA	Bacilli_MA cluster108	<0.001	-6.16	NS		<0.001	6.38	0.0002	0.0304	<0.0001	0.0004
	Streptococcaceae	*Lactococcus*	0.003	4.15	NS		NS		0.3970*	0.0191	0.1921*	0.0061

1187

Log$_2$ Fold Change, the Fold Change indicates the significant differential abundance of bacteria (at family or genus level) in the first cited
group compared to the second cited group (Deseq analysis). For example, Actinomycetaceae abundance is higher in CTRL feces than in AI
one at PND8.
PND, postnatal days.

[1] relative bacterial abundance in sow milk fed piglets was also added in the table in order to compare the impact of SynCom supplementation
with the SM-fed control group. Asterisks indicate a significant differential abundance (p-adjusted <0.05) of the bacterial family or genus
between one of the formula-fed group (either CTRL, AI or HI) and SM group. The complete list of bacterial families or genera differentially
abundant between each of the formula-fed group (either CTRL, AI or HI) and SM group is available on Supplemental Table S3.
1196

1197 **Table 3.** SCFA concentrations (mmol/kg dry matter) in the feces at PND8 and in the colonic digesta and feces at PND24 of formula-

1198 fed (CTRL, AI and HI) and sow milk-fed (SM) piglets.

		CTRL		AI		HI		SM		p-value
Feces PND8	*Acetate*	*14.31*	*± 2.44*	*14.09*	*± 2.4*	*20.75*	*± 3.16*	*18.22*	*± 7.35*	*0.053*
	Propionate	**2.91**	**± 0.79[ab]**	**2.63**	**± 0.7[a]**	**4.42**	**± 0.93[b]**	**4.92**	**± 2.44[ab]**	**0.046**
	Butyrate	2.19	± 0.59	1.7	± 0.47	2.4	± 0.66	2.7	± 0.57	0.164
	Valerate	**0.49**	**± 0.1[a]**	**0.5**	**± 0.13[a]**	**0.8**	**± 0.12[ab]**	**1.39**	**± 0.62[b]**	**0.008**
	Isobutyrate	*0.36*	*± 0.13*	*0.29*	*± 0.1*	*0.45*	*± 0.09*	*1.11*	*± 0.64*	*0.052*
	Isovalerate	0.79	± 0.27	0.59	± 0.23	0.77	± 0.2	0.00	± 0.00	0.617
	Total SCFA	*21.05*	*± 4.2*	*19.79*	*± 3.91*	*29.58*	*± 4.98*	*28.35*	*± 11.58*	*0.069*
Feces PND24	Acetate	7.61	± 1.69	10.53	± 2.94	7.97	± 1.08	8.51	± 1.33	0.662
	Propionate	2.51	± 0.69	3.57	± 1.01	2.63	± 0.39	2.49	± 0.22	0.761
	Butyrate	*1.6*	*± 0.2*	*1.69*	*± 0.24*	*1.28*	*± 0.18*	*2.03*	*± 0.38*	*0.068*
	Valerate	*0.49*	*± 0.09*	*0.51*	*± 0.11*	*0.52*	*± 0.1*	*0.91*	*± 0.19*	*0.071*
	Isobutyrate	0.22	± 0.05	0.24	± 0.06	0.2	± 0.04	0.47	± 0.14	0.358
	Isovalerate	0.69	± 0.2	0.43	± 0.19	0.55	± 0.2	1.88	± 0.46	0.174
	Total SCFA	13.11	± 2.86	16.98	± 4.31	13.13	± 1.75	16.29	± 2.37	0.530
Colon PND24	Acetate	23.64	± 4.50	26.61	± 6.80	24.45	± 7.30	47.81	± 12.20	0.255
	Propionate	**6.85**	**± 1.1[a]**	**8.20**	**± 1.9[a]**	**6.98**	**± 1.7[a]**	**19.80**	**± 5.2[b]**	**0.007**
	Butyrate	**2.68**	**± 0.4[a]**	**3.12**	**± 0.6[a]**	**3.07**	**± 0.9[a]**	**7.43**	**± 1.5[b]**	**0.017**
	Valerate	**0.95**	**± 0.2[a]**	**0.77**	**± 0.1[a]**	**0.97**	**± 0.2[a]**	**3.06**	**± 0.8[b]**	**0.004**
	Isobutyrate	**0.34**	**± 0.1[a]**	**0.31**	**± 0.1[a]**	**0.40**	**± 0.1[a]**	**2.14**	**± 0.4[b]**	**0.002**
	Isovalerate	**0.96**	**± 0.2[a]**	**1.20**	**± 0.2[a]**	**1.69**	**± 0.7[a]**	**3.91**	**± 0.6[b]**	**0.001**
	Total SCFA	**35.42**	**± 6.2[a]**	**40.20**	**± 9.4[a]**	**37.56**	**± 10.8[a]**	**84.16**	**± 20.4[b]**	**0.034**

1199

Data are presented as means ± SEM[1] SCFA concentration are expressed as mmol / kg dry matter of colonic digesta.

A three-way ANOVA was performed testing for main effects of diet, sex, litter, and for interactions between diet and sex, and diet

and litter, followed by Tukey *post hoc* test for parametric variables or a Kruskal Wallis test associated with Dunn test for non-

parametric variables.

[a,b,c] non-common letters indicate that piglet groups differed significantly ($p < 0.05$).

SCFA, short chain fatty acids; SM, sow milk-fed.

Supplemental Figure S1. Partial Least Squares Regression-Discriminant Analysis

(PLS-DA) of **(A)** 201 microbial and physiological variables analyzed in the **ileum** and

(B) 250 microbial and physiological variables analyzed in the **colon** of formula-fed

(CRTL, AI and HI) piglets at PND24. The 30 most discriminating variables for

Component 1 and Component 2 are listed on the figures; the complete list of

discriminant variables is given in 'the online dataverse

https://doi.org/10.57745/ATTHZ3 - Table "Individual ileal and colonic data used for

PLS-DA and MFA".

PND, postnatal days

Supplemental Figure S2. Microbiota diversity. **(A)** Microbial α-diversity (Chao 1 index)

and **(B)** microbial β-diversity (Bray-Curtis index) in the feces at PND8 and in the ileal

and colonic digesta and feces at PND24 of formula-fed (CTRL, AI, HI) and sow milk-

fed (SM) piglets.

A: a,b,c non-common letters indicate that piglet groups differed significantly, p < 0.05.

A three-way ANOVA was performed testing for main effects of diet, sex, litter, and for

interactions between diet and sex, and diet and litter, followed by Tukey *post hoc* test

for parametric variables or a Kruskal Wallis test associated with Dunn test for non-

parametric variables.

B: no difference in β-diversity occurred when only the three formula groups were

compared (PERMANOVA p > 0.05).

1226

1227 **Supplemental Figure S3.** Correlation matrix with Benjamini–Hochberg correction

1228 between relative abundance of microbial genera and physiological variables in the

1229 ileum **(A)** and colon **(B)** of formula-fed (CRTL, AI and HI) piglets at PND24. Only

associations with a correlation coefficient $|r| > 0.7$ and a significant p value < 0.05 are shown, with the strength of those correlations denoted by the intensity of the circle's colour.

Muc cell per 100µm crypt/villous, density of mucin cells in 100µm of crypt/villous; Muc cell per crypt/villous, density of mucin cells per crypt/villous; Crypt depth, crypt depth in µm ; Villous length, villous length in µm ; sIgA, sIgA concentrations in the ileal content ; TNF_T_PEYER, TNF_LPS_PEYER and TNF_ConA_PEYER, TNFα secretion by Peyer Patch cells in unstimulated condition (T) or stimulated by LPS or ConA; Total SCFA, total SCFA concentration; short chain fatty acid content is expressed in raw value or '..._prop' in % of total SCFA content; the variables in capital letters correspond to the expression of genes listed in Supplemental Table S7.

↓ indicates a genera that is significantly correlated with at least an OTU potentially corresponding to AI and/or HI SynCom strains (see Figure 7).

Supplemental Table S1. Nutritional composition of formula and sow milk.

Supplemental Table S2. Percentage of identity between the 16S rRNA gene of each SynCom member and the corresponding OTU sequence, as determined using BLAST.

Supplemental Table S3. Differential abundances of OTUs in the ileum, colon and feces at PND24 and the feces at PND8 of formula-fed (CRTL, AI and HI) piglets.

Supplemental Table S4. Relative abundances of families and genera in the feces at PND8 and in the ileum, colon and feces at PND24 of formula-fed (CRTL, AI and HI) piglets and sow milk-fed (SM) piglets, and the differential abundance between formula-fed and sow milk-fed groups (log2 fold change).

1259 **Supplemental Table S5**. Cytokine (IL-10 and TNF-α) and secretory IgA (sIgA)
1260 production by mononuclear cells extracted from ileal Peyer's Patches of formula-fed
1261 (CTRL, AI, HI) and sow milk-fed (SM) piglets at PND24

1262

1263 **Supplemental Table S6**. Expression of ileal and colonic genes involved in epithelial
1264 barrier, immune, tryptophan metabolism and endocrine functions, which were non-
1265 significantly different between formula-fed (CTRL, AI, HI) and sow milk-fed (SM) piglets
1266 at PND24.

1267

1268 **Supplemental Table S7**. Primers used in real-time PCR.

1269