

# *Effects of food matrix on the prebiotic efficacy of inulin-type fructans: a randomised trial*

Article

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1 **Research article**

2 **Effects of food matrix on the prebiotic efficacy of inulin-type fructans: a randomised**  
3 **trial**

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15

16 **Abstract**

17

18 Recently there is much debate in the scientific community over the impact of the food matrix  
19 on prebiotic efficacy of inulin-type fructans. Previous studies suggest that prebiotic  
20 selectivity of inulin-type fructans towards bifidobacteria is unaffected by the food matrix.  
21 Due to differences in study design, definitive conclusions cannot be drawn from these  
22 findings with any degree of certainty. In this randomised trial, we aimed to determine the  
23 effects that different food matrices had on the prebiotic efficacy of inulin-type fructans  
24 following a standardised 10-day, 4-arm, parallel, randomised protocol with inulin either in  
25 pure form or incorporated into shortbread biscuits, milk chocolate or a rice drink. Similar  
26 increases in *Bifidobacterium* counts were documented across all four interventions using both  
27 fluorescence *in situ* hybridisation (pure inulin: +0.63; shortbread: +0.59; milk chocolate:  
28 +0.65 and rice drink: +0.71 (log<sub>10</sub> cells/g wet faeces) and 16S rRNA sequencing quantitative  
29 microbiome profiling data (pure inulin: +1.21 x 10<sup>9</sup>; shortbread: +1.47 x 10<sup>9</sup>; milk chocolate:  
30 +8.59 x 10<sup>8</sup> and rice drink: +1.04 x 10<sup>9</sup> (cells/g wet faeces) (all  $P \leq 0.05$ ). From these results,  
31 we can confirm that irrespective of the food matrix, the selectivity of inulin-type fructans  
32 towards *Bifidobacterium* is unaffected, yet the compositional make-up of the food matrix  
33 may have implications regarding wider changes in the microbiota.

34

35 **Trial registration:** [clinicaltrials.gov](https://clinicaltrials.gov/ct2/show/study/NCT05581615) ID: NCT05581615.

36

37 **Key words**

38

39 Prebiotics, food matrix, carbohydrates, inulin-type fructans, gut microbiota

## 40 1. Introduction

41

42 Diet, being one of the key drivers of fermentation in the gut, can strongly influence the  
43 composition and thus the functionality of the gut microbiota. One way to modify the  
44 composition and activity of the gut microbiota is via prebiotic functional foods as they  
45 provide a safe, affordable and effective dietary approach (Sanders *et al.*, 2019). Oligofructose  
46 (OF) and inulin are the most widely researched prebiotics belonging to a class of non-  
47 digestible carbohydrates referred to as inulin-type fructans (ITF) (Karimi *et al.*, 2015). ITF  
48 are linear polydisperse carbohydrates composed of monomers of fructose linked by  $\beta$ -(2-1)  
49 glycosidic (fructosyl-fructose) linkages. A non-reducing  $\alpha$ -D-glucose moiety may or may not  
50 be present (Roberfroid, 2007) and based on the degree of polymerisation (DP), ITF can be  
51 separated into OF (DP 2-9) and inulin (DP  $\geq$  10) (van Loo, 2006).

52

53 Due to their structure and the absence of brush border  $\beta$ -fructosidases the majority of ITF  
54 reach the colon intact functioning as prebiotics by displaying high selectivity towards certain  
55 beneficial microbial groups such as *Bifidobacterium*. This is a key feature of the prebiotic  
56 concept along with providing a series of health benefits to the host as summarised in these  
57 series of reviews (Ahmed and Rashid, 2019; Gibson *et al.*, 2017; Sanders *et al.*, 2019; Wilson  
58 and Whelan, 2017). Furthermore, due to their physicochemical properties ITF can also act as  
59 fat and sugar replacers as well as texture modifiers while still providing potentially prebiotic  
60 dosages. They are becoming an increasingly common ingredient within the food industry  
61 (Shoaib *et al.*, 2016).

62

63 The concept that the food matrix may impact on the prebiotic efficacy of ITF has become of  
64 increasing interest in recent years. This is in part due to previous research suggesting that  
65 food matrices may either hinder or enhance the bioavailability of phenolic compounds, fatty  
66 acids and other nutrients (Ribas-Agusti *et al.*, 2018; Thorning *et al.*, 2017). Furthermore,  
67 there is evidence that high levels of dietary fibre present within the matrix can influence the  
68 absorption of such compounds via the sequestration of ions and formation of complexes  
69 (D'Archivio *et al.*, 2010; Palafox-Carlos *et al.*, 2011). This concept also applies to the  
70 microbial fermentation of unabsorbed secondary metabolites in the diet and resulting  
71 metabolites within the colon (Aguilera, 2019).

72

73 Depending on the processing parameters, ITF may or may not be subject to degradation  
74 during the production process. Critical processing parameters include pH, with the critical  
75 cut-off appearing to be  $\leq$  4 (Glibowski and Wasko, 2008; Mensink *et al.*, 2015),  
76 pasteurisation (often used during fruit juice production) (Klewicki, 2007), heating such as  
77 during baking (Poinot *et al.*, 2010; Rodriguez-Garcia *et al.*, 2012) resulting in participation in  
78 caramelisation and Maillard reactions (indicated by the level of browning in bread, cakes,  
79 biscuits, etc) (Mensink *et al.*, 2015). Degradation could also be caused by high temperature  
80 and pressure extrusion (ready-to-eat cereals and snacks) (Duar *et al.*, 2015) and enzymatic  
81 hydrolysis via yeasts and bacteria (bread and beer production) (Struyf *et al.*, 2017).  
82 Generally, the processing time, temperature, and the DP of ITF used appear to be critical if  
83 the potential degradation of ITF is to be avoided. Each aspect needs to be carefully  
84 considered in order to optimise product quality while maintaining ITF integrity (Jackson *et*  
85 *al.*, 2022b).

86 To date, studies have explored the effects of ITF on the gut microbiota in both pure form, as  
87 well as several food products such as biscuits, yoghurt, stewed apple, cereal bars, cocoa  
88 drinks, and fruit juices as vehicles for ITF supplementation (Azpiroz *et al.*, 2017; Brighenti *et al.*,  
89 1999; Gibson and Roberfroid, 1995; Healey *et al.*, 2018; Kleessen *et al.*, 2007; Ramnani  
90 *et al.*, 2010; Rao, 2001; Slavin and Feirtag, 2011). The results of these studies all document  
91 that the selectivity of ITF towards *Bifidobacterium* is unaltered as result of the food matrix.  
92 However, as a subgroup analysis from So *et al.*, (2018) concluded, fibre interventions  
93 delivered through supplementation resulted in significantly higher *Bifidobacterium* spp.  
94 compared to placebo/lower fibre controls (SMD: 0.75; 95% CI: 0.52, 0.98;  $P \leq 0.00001$ , I<sup>2</sup> =  
95 83%). No differences were found between food interventions and comparators (SMD: 0.20;  
96 95% CI: -0.36, 0.76;  $P = 0.49$ , I<sup>2</sup> = 88%), although considerable heterogeneity persisted in  
97 both analyses. This emphasizes that definitive conclusions on whether the food matrix  
98 matters in the supplementation of ITF cannot be drawn due to differences in study design  
99 (crossover vs parallel study design, number of participants, length of the intervention),  
100 differences in the implementation of controlled vs non controlled and exclusion diets  
101 (excluding or not excluding other fructans), the type and amount of ITF supplemented (inulin  
102 vs OF), time point of stool samples collection), combined with the lack of washout periods,  
103 differences in reporting changes in microbial numbers (dry vs wet weight of faeces) and  
104 analytical techniques used (fluorescence *in situ* hybridization (FISH) vs selective media vs  
105 quantitative polymerase chain reaction (qPCR)).

106

107 Many of the food products utilised in the studies mentioned above are sources of other  
108 potential prebiotics including phenolic acids,  $\beta$ -glucan, arabinoxylans and bovine milk  
109 oligosaccharides. Each possesses the potential to alter the fermentation selectivity and have  
110 been shown to influence levels of *Lactobacillus*, *Bacteroides*, *Enterococcus*, *Prevotella*, and  
111 *F. prausnitzii* (Gomez *et al.*, 2016; Kemperman *et al.*, 2013; Scott *et al.*, 2019; Valeur *et al.*,  
112 2016) amongst others. A critical aspect often overlooked by researchers when considering  
113 study designs regarding food-based prebiotic supplementation studies. This leads to the  
114 question of whether the food matrix matters in the supplementation of ITF? This question is  
115 becoming increasingly important to answer given the interest in the addition of ITF into  
116 various food products with several manufacturers marketing these products as beneficial for  
117 health (Rolim, 2015). Therefore, this study aims to determine the effects that different food  
118 matrices may have on the prebiotic efficacy of ITF following a standardised protocol. The  
119 hypothesis to be tested is that the food matrix does not impact on the selectivity of ITF  
120 towards *Bifidobacterium*.

121

## 122 **2. Materials and methods**

123

### 124 **Subjects and recruitment**

125

126 Healthy adults, both males and females, were recruited from the Reading area via previous  
127 email lists and posting on social media. The inclusion criteria were volunteers aged 18-65,  
128  $BMI \geq 18.5$  and  $\leq 30 \text{ kg/m}^2$ , no evidence of gastrointestinal diseases and following what  
129 could be deemed a typical Western European diet. They were free of food allergies and had a  
130 stool frequency of at least 3 bowel movements per week. Exclusion criteria were extreme  
131 diets (i.e., ketogenic, vegetarian, vegan, intermittent fasting), antibiotic treatment in the four

132 months preceding the study, anaemia, chronic or acute diseases i.e., (pre)-diabetic. Potential  
133 subjects were also excluded if they had undergone surgical resection of any part of the bowel,  
134 were current smokers and/or had a history of alcohol or drug misuse. Potential volunteers  
135 were excluded if they were pregnant or lactating. Use of laxatives was not permitted 4 weeks  
136 prior to beginning of the intervention.

137

### 138 **Study design and interventions**

139

140 The study design was a prospective, non-placebo controlled, parallel-group, randomised trial  
141 lasting ten days. Ten days was the chosen intervention length based on the results of previous  
142 research demonstrating that the bifidogenic effect of ITF can be seen after approximately  
143 seven days of daily intake (Nagy *et al.*, 2022). Prior to commencing the study, eligible  
144 subjects were provided with both verbal and written study information and gave their  
145 informed consent. Enrolled subjects were asked to undergo a two-week run-in period in  
146 which they were required to restrict the use of any probiotics, prebiotics and prebiotic or  
147 probiotic containing foods or supplements. After the run-in phase enrolled subjects were  
148 randomised using REDCap (see below) into one of four groups ( $n = 24$  per group) stratified  
149 by sex using a ratio of approximately 2:1 (female : male): (Group A (16 : 8) – pure inulin),  
150 (Group B (18 : 6) – inulin-enriched shortbread), (Group C (16 : 8) – inulin-enriched milk  
151 chocolate), and (Group D (18 : 6) – inulin-enriched rice drink).

152

153 The ITF used in the was highly soluble inulin (Orafti<sup>®</sup> HSI, DP 2-60, min. 88% inulin,  
154 maximum of 12% glucose, fructose, and sucrose (DM), BENEEO-Orafti, Tienen, Belgium)  
155 produced from chicory. The interventions used in this study were provided by BENEEO.  
156 Interventions were chosen based on the outcomes of our literature review reflecting the most  
157 common food products that undergo inulin fortification (Jackson *et al.*, 2022a; Jackson *et al.*,  
158 2022b). This not only reflects a wide degree of matrices (baked, semi-solid and liquid), but  
159 also those consumed as part of the population's habitual diet (Murakami and Livingstone,  
160 2016). Each portion of pure inulin or enriched food product contained 5 g of ITF and was  
161 consumed twice per day resulting in a total daily ITF intake of 10 g. This dosage was chosen  
162 based on the amount of ITF that can be successfully fortified into study products without  
163 changes in product characteristics. Pure inulin was used as the comparator to determine if the  
164 prebiotic efficacy was altered as a result of different food matrices. Details on composition of  
165 each study product per 100 g and per daily portion can be found in Table 1.

EFFECTS OF FOOD MATRIX ON ITF PREBIOTIC EFFICACY

Amounts	Pure inulin		Shortbread		Milk Chocolate		Rice Drink	
	per 100 g	per 11.4 g daily portion	per 100 g	per 58 g daily portion	per 100 g	per 52 g daily portion	per 100 mL	per daily 300 mL portion
<b>Energy kJ/kcals</b>	875/216	87.5/21.6	1766/422	1024.28/244.76	2187/523	568.36/271.96	465/111	1534.5/330
<b>Carbohydrates (g)</b>	11	1.1	54.7	31.73	31	16.12	20.4	61.2
<b>of which is sugars (g)</b>	11	1.1	12	6.96	30.4	15.81	11.8	35.4
<b>Fat (g)</b>	Negligible	Negligible	15.9	9.22	36.3	18.88	2.3	6.9
<b>of which is saturates (g)</b>	Negligible	Negligible	7.2	4.18	21.6	11.23	0.8	2.4
<b>Protein (g)</b>	Negligible	Negligible	5.4	3.13	7.2	3.74	0.5	1.5
<b>Fibre (excluding fructans) (g)</b>	0	0	1.36	0.79	2.46	1.28	0.77	2.3
<b>Fibre (including fructans) (g)</b>	88	10	18.6	10.79	21.7	11.28	4.1	12.3
<b>Salt (g)</b>	Negligible	Negligible	1	0.58	0.2	0.104	0	0

166 Table 1. Compositional breakdown of study products per 100 g and per daily portion.

167 Stool and urine samples were collected at Day 0 and Day 10. Details of sample collection are  
168 presented below. No intervention was given until both baseline samples had been provided.  
169 Subjects were instructed to consume their assigned pure inulin supplement or food product  
170 for the entire 10 days, one portion in the morning and one portion in the evening with no  
171 other food or drink and within 15 min of opening. Volunteers were told to not alter their diet  
172 or fluid intake during the trial with exception of portion size to make allowances for  
173 additional calories consumed as part of the intervention. Volunteers were only considered  
174 compliant if consumption for the whole ten-days of the intervention was achieved. In order to  
175 assess compliance volunteers were asked to complete an online daily check-in diary. Changes  
176 in habitual dietary intakes at Day 0 and Day 10 were assessed using a modified version of the  
177 validated eNutri2019-DE web application specifically designed to capture short-term changes  
178 in dietary intake. In-depth details on the eNutri2019-DE web application have been described  
179 elsewhere (Franco *et al.*, 2019).

180

181 Data were collected and managed using REDCap electronic data capture tools hosted at the  
182 University of Reading (Harris *et al.*, 2009). REDCap (Research Electronic Data Capture) is a  
183 secure, web-based application designed to support data capture for research studies,  
184 providing: 1) an intuitive interface for validated data entry; 2) audit trails for tracking data  
185 manipulation and export procedures; 3) automated export procedures for seamless data  
186 downloads to common statistical packages; and 4) procedures for importing data from  
187 external sources.

188

## 189 **Outcomes**

190

### 191 **Primary outcomes**

192

193 The primary outcome was differences in *Bifidobacterium* count as measured by fluorescence  
194 *in situ* hybridisation flow cytometry (FISH-FLOW).

195

### 196 **Secondary outcomes**

197

198 The secondary outcomes were changes in microbial composition and urinary metabolites as  
199 measured 16S rRNA sequencing and <sup>1</sup>H-nuclear magnetic resonance (<sup>1</sup>H-NMR). Details on  
200 sample collection, processing and analysis are detailed below.

201 Bowel habit and GI sensation diaries were completed daily throughout the of the ten-day  
202 intervention, in order to assess day-to-day changes in flatulence, intestinal bloating,  
203 abdominal pressure, abdominal pain and feeling of fullness (all none, mild, moderate and  
204 severe) (Costabile *et al.*, 2008; Ramnani *et al.*, 2010; Walton *et al.*, 2012), stool frequency  
205 and consistency according to the Bristol Stool Form Scale (Lewis and Heaton, 1997). Any  
206 medication use or adverse events were also recorded.



## 207 **Sample collection**

208

### 209 Faecal samples

210

211 Volunteers were provided written and verbal instruction on how to collect stool samples, and  
212 with sterile stool sample pots for Day 0 and Day 10 collections. Freshly collected faecal  
213 samples were kept in 2.5L Oxoid™ AnaeroJar™ (Oxoid, Hampshire, United Kingdom) with  
214 Oxoid™ AnaeroGen™ 2.5L sachets (O<sub>2</sub> ≤0.1%; CO<sub>2</sub>: 7-15%). Faecal samples were collected  
215 from the volunteer's place of residence within 2 hours of voiding. Samples (1.5 g) for  
216 metabolic profiling were stored at -80 °C until the study had been completed. An additional 3  
217 g of the same faecal sample was diluted 1:10 (w:w) in anaerobic phosphate-buffered saline  
218 (PBS, 0.1 M; pH 7.4), then homogenised using a stomacher (260 paddle beats/min) for 2 min  
219 at room temperature. 20 mL of faecal slurry were then vortexed with 3 mm diameter glass  
220 beads for 30 s before being centrifuged at 1,500 x g for 3 min at room temperature. 75 µL  
221 were then diluted in 675 µL phosphate buffered saline (PBS mol l<sup>-1</sup>; pH 7.4) (1:100 dilution),  
222 aliquoted in to 1.5 mL Eppendorf tubes and stored at -80 °C until cells could be fixed.  
223 Samples were then centrifuged at 11,337 × g for 5 min and the supernatant was decanted.  
224 Pellets were then resuspended in 375 µL of 0.1 M PBS and fixed in 4% (w:v)  
225 paraformaldehyde (1,125 µL) for 4 h at 4 °C. Fixed cells were centrifuged at 11,337 × g for 5  
226 min at room temperature. Samples were then washed with 1 mL PBS, pellets aspirated and  
227 centrifuged at 11,337 × g for 5 min. The washing process was repeated twice more. Samples  
228 were re-suspended in 150 µL PBS and stored in ethanol (1:1, v:v) at -20 °C until analysis via  
229 fluorescence *in situ* hybridisation – flow cytometry (FISH-FLOW).

230

### 231 Urine samples

232

233 Day 0 and Day 10 mid-stream urine samples were collected as the first urine sample after  
234 waking in sterilised specimen pots. Urine samples were collected from volunteers at the same  
235 time as faecal samples. Urine samples were stored at - 80 °C until analysis by Proton Nuclear  
236 Magnetic Resonance spectroscopy (<sup>1</sup>H-NMR) could be conducted.

237

## 238 **Enumeration of faecal microbial populations by fluorescence *in situ*** 239 **hybridisation flow cytometry (FISH-FLOW)**

240

241 FISH by flow cytometry was carried out as described by (Grimaldi *et al.*, 2017). Probes used  
242 in this study are listed in Table 2. Fluorescence measures were performed by a BD Accuri™  
243 C6 Plus (BD, Erembodegem, Brussels) measuring at 488 nm and 640 nm. Thresholds of 9000  
244 in the forward scatter area (FSC-A) and 3000 in the side scatter area (SSC-A) were placed to  
245 discard background noise, a gated area was applied in the main density dot to include 90% of  
246 the events. Flow rate was 35 µL/min, with limit of collection set for 100,000 events and  
247 analysed with Accuri CFlow Sampler software. Bacterial counts were then calculated through  
248 consideration of flow cytometry reading and PBS dilution. The number of log<sub>10</sub> cells is  
249 presented as per gram of wet fresh faeces.

250

	Sequence (5' to 3')	Target groups	Reference
<b>Non Eub</b>	ACTCCTACGGGAGGCAGC	Control probe complementary to EUB338	(Wallner <i>et al.</i> , 1993)
<b>Eub338</b>	GCTGCCTCCCGTAGGAGT	Most Bacteria	(Amann <i>et al.</i> , 1990)
<b>Eub338II</b>	GCAGCCACCCGTAGGTGT	<i>Planctomycetales</i>	(Daims <i>et al.</i> , 1999)
<b>Eub338II I</b>	GCTGCCACCCGTAGGTGT	<i>Verrucomicrobiales</i>	(Daims <i>et al.</i> , 1999)
<b>Bif164</b>	CATCCGGCATTACCACCC	<i>Bifidobacterium</i> spp.	(Langendijk <i>et al.</i> , 1995)
<b>Bac303</b>	CCAATGTGGGGGACCTT	Most <i>Bacteroidaceae</i> and <i>Prevotellaceae</i> , some <i>Porphyromonadaceae</i>	(Manz <i>et al.</i> , 1996)
<b>Erec482</b>	GCTTCTTAGTCARGTACC G	Most of the <i>Clostridium</i> <i>coccoides-Eubacterium rectale</i> group ( <i>Clostridium</i> cluster XIVa and XIVb)	(Franks <i>et al.</i> , 1998)
<b>Rrec584</b>	TCAGACTTGCCGYACCGC	<i>Roseburia</i> spp.	(Walker <i>et al.</i> , 2005)
<b>Prop853</b>	ATTGCGTTAACTCCGGCA C	<i>Clostridium</i> cluster IX	(Walker <i>et al.</i> , 2005)
<b>Fprau655</b>	CGCCTACCTCTGCACTAC	<i>Feacalibacterium prausnitzii</i> and relatives	(Suau <i>et al.</i> , 2001)

251 Table 2: Name, sequence, and target group of oligonucleotide probes used for bacterial enumeration

252

253 **Microbial Profiling**

254

## 255 Bacterial DNA extraction

256

257 Bacterial DNA was extracted from faecal samples using the QIAamp Fast DNA Stool mini  
 258 kit (QIAGEN) according to the manufacturer's instructions. Faecal samples were  
 259 homogenised and allocated into 2 mL screwcap tubes containing 0.6 g 0.1 mm glass beads.  
 260 Bead beating was run on a fastprep24 instrument (MPBiomedicals); 4 cycles of 45s at speed  
 261 4). 200 mL of raw extract were then used for DNA isolation.

262

## 263 DNA isolation, library preparation and 16S rRNA gene sequencing

264

265 Extracted bacterial DNA was subjected to PCR amplification of the V4 region of the 16S  
 266 rRNA bacterial gene using two-stage Nextera PCR libraries using the primer pair 515F (5'-  
 267 GTG YCA GCM GCC GCG GTA A -3') and 806R (5'- GGA CTA CNV GGG TWT CTA  
 268 AT -3'). Raw sample extracts were diluted to 2.5ng/mL, using Tris-Buffer and 5 mL were  
 269 used in 1st Step PCR, together with 5x HOT FIREPol® MultiPlex Mix (Solis BioDyne,

270 Estonia) and 4uM primer mix (fwd+rev) 515F/806R (Microsynth, Balgach,  
271 Switzerland). 1st Step PCR samples were purified with NGS Clean Beads (Labgene,  
272 Switzerland). Bead ratio was 1:1:2, Beads were washed with 75% ethanol, airdried and  
273 resuspended in Tris buffer. The 2nd step PCR, each sample was individually barcoded, using  
274 Nextera XT Index Kit v2 (Illumina, San Diego, California) and 5x HOT FIREPol®  
275 MultiPlex Mix (Solis BioDyne, Estonia). 2nd Step PCR samples were purified with NGS  
276 Clean Beads (Labgene, Switzerland). The final 2nd Step PCR products were quantified using  
277 a Quant-iT™ PicoGreen™ ds DNA Assay Kit (Thermo Fisher Scientific, Waltham, USA).  
278 Amplicons were pooled equimolar prior to sequencing. The final pool was quantified using a  
279 Quant-iT™ PicoGreen™ ds DNA Assay Kit (Thermo Fisher Scientific, Waltham, USA) and  
280 Fragment analyzer (Agilent).

281

282 Subsequent PCR libraries were sequenced on an Illumina MiSeq platform using a v2 500  
283 (2\*250 bp read length). Pools were diluted to 9.2 pM and loaded together with 15% PhiX  
284 (Illumina, FC-110-3001) to increase the diversity of the run resulting in a raw cluster density  
285 of 631 and a cluster passed filter rate of 98%. Paired-end reads which passed Illumina's  
286 chastity filter were subject to de-multiplexing and trimming of Illumina adaptor residuals  
287 using Illumina's bcl2fastq software version v2.20.0.422. Quality of the reads was checked  
288 with the software FastQC version 0.11.8 and sequencing reads that fell below an average Q-  
289 score of 20 or had any uncalled bases (N) were removed from further analysis. The locus  
290 specific V4 primers were trimmed from the sequencing reads with the software cutadapt v3.2.  
291 Paired-end reads were discarded if the primer could not be trimmed. Trimmed forward and  
292 reverse reads of each paired-end read were merged to reform *in silico* the sequenced molecule  
293 considering a minimum overlap of 15 bases using the software USEARCH version 11.0.667.  
294 Merged sequences were again quality filtered allowing a maximum of one expected  
295 erroneous base per merged read. Reads that contained ambiguous bases or were outliers  
296 regarding the amplicon size distribution were also discarded. Samples that resulted in less  
297 than 5000 merged reads were discarded, to avoid distortion of the statistical analysis.  
298 Remaining reads were denoised using the UNOISE algorithm implemented in USEARCH to  
299 form Amplicon Sequencing Variants (ASVs) discarding singletons and chimeras in the  
300 process. The resulting ASV abundance table was then filtered for possible barcode bleed-in  
301 contaminations using the UNCROSS algorithm. ASV sequences were compared to the  
302 reference sequences of the RDP 16S database provided by  
303 [https://www.drive5.com/usearch/manual/sintax\\_downloads.html](https://www.drive5.com/usearch/manual/sintax_downloads.html) and taxonomies were  
304 predicted considering a minimum confidence threshold of 0.5 using the SINTAX algorithm  
305 implemented in USEARCH. The resulting library was then corrected by taking into  
306 consideration numbers of 16S copies and rarefying to an even sampling intensity to reduce  
307 bias in diversity metric calculations and quantified as described by (Vandeputte *et al.*, 2017).

308

309

310

311

## 312 **Metabolic profiling using <sup>1</sup>H-NMR spectroscopy**

313

314 For analysis urine samples were thawed, A phosphate buffer (pH 7.4 sodium phosphate with  
315 0.2M disodium phosphate (Na<sub>2</sub>HPO<sub>4</sub>), 0.04M monosodium phosphate (NaH<sub>2</sub>PO<sub>4</sub>) in  
316 deuterium oxide (99.9 %) was prepared, with 1mM 3-(trimethylsilyl) propionic acid-d<sub>4</sub>  
317 sodium salt (TSP) and 3mM sodium azide in the solution. 400 µL of each urine sample were  
318 mixed with 200 µL buffer. 550 µL aliquots of supernatant were collected and dispensed into 5  
319 mm NMR tubes.

320

321 <sup>1</sup>H-NMR spectroscopy analysis was carried out using a Bruker Avance DRX 500 MHz NMR  
322 spectrometer (Bruker Biospin, Germany). The spectrometer was operated at 500.13 MHz.  
323 Urine water spectra were acquired using a standard 1D pulse sequence [recycle delay (RD)-  
324 90°-t<sub>1</sub>-90°-T<sub>m</sub>-90°-acquire free induction decay (FID)] with water suppression applied during  
325 RD of 2 s, a mixing time T<sub>m</sub> of 100ms and a 90° pulse set at 7.70 µs. Per spectrum, a total of  
326 128 scans were carried out with a spectral width of 14.0019 ppm. The FIDs were multiplied  
327 by an exponential function corresponding to 0.3 Hz line broadening. Acquired spectroscopic  
328 data were processed using the TopSpin 3.6.5 software package (Bruker Biospin, Rheinstetten,  
329 Germany). Data Processing was undertaken using the nPYC-Toolbox 1.2.7. Further details on  
330 the nPYC-Toolbox can be found at <https://github.com/phenomecentre/nPYC-Toolbox>

331

### 332 Chemometric analysis

333

334 Processed spectroscopic data were imported to the SIMCA 13.0 software package (Umetrics  
335 AB, Umeå, Sweden) to conduct unsupervised multivariate statistical analysis. Principal  
336 components analysis was used to evaluate similarities/differences in urinary metabolite  
337 composition between groups. The  $R^2$  and  $Q^2$  variables provided an indication of goodness of  
338 fit ( $R^2$ ) as well as goodness of prediction ( $Q^2$ ) of the models.

339

### 340 **Ethics**

341

342 The study was given favourable ethical consent by the University of Reading's Research  
343 Ethics Committee (36/2020). The trial was registered as a clinical trial (clinicaltrials.gov ID:  
344 NCT05581615) and conducted in accordance with the Declaration of Helsinki. All  
345 participants gave written informed consent prior to study entry. There were no protocol  
346 changes once the trial commenced.

347

348

349

## 350 **Sample size and statistical analysis**

351

352 The primary outcome measure was bifidobacterial population as log<sub>10</sub> cells/g wet faecal  
353 sample as measured by fluorescence *in situ* hybridisation. It was calculated that to detect a  
354 difference in *Bifidobacterium* populations between interventions, a total of 92 volunteers was  
355 required. This is based on an 80% probability that the study could detect a 0.5 log<sub>10</sub> cells/g  
356 wet faecal sample difference in colonic bifidobacterial population at a two-sided 0.05  
357 significance level based on the assumption of a standard deviation of 0.7 log<sub>10</sub> cells/g wet  
358 faecal sample bifidobacteria.

359

360 Statistical Package for Social Science version 27 (SPSS Inc., Chicago, IL, USA) was used for  
361 all statistical analyses. Changes in bacteriology (FISH-FLOW, RMP and QMP), dietary data  
362 and bowel habit data were analysed using a linear marginal model (LMM) in order to assess  
363 both repeat measures (changes from baseline) and Day 10 group comparisons. Baseline  
364 values were included as a covariate to assess differences between groups. Participant metrics  
365 were assessed using a one-way ANOVA. All comparisons were corrected for type 1 errors  
366 using a Bonferroni adjustment within each LMM and ANOVA. Results are presented as  
367 mean and standard error (SE) unless otherwise stated. All tests were two tailed and *P* values  
368 ≤ 0.05 were considered statistically significant.

369

## 370 **3. Results**

371

### 372 **Subject characteristics**

373

374 110 subjects expressed interest in the trial with 100 potential subjects completing the  
375 screening visit. Of these, 14 did not meet the inclusion criteria, 96 eligible subjects were  
376 randomized (*n* = 24 per group) and included in the analysis for all primary and secondary  
377 outcomes (Figure 1). Baseline characteristics are reported in Table 3.

378

379 **Figure 1.** CONSORT diagram of participant flow through the trial

380 Table 3 reports the subject data (age, height, weight, and BMI) mean and range segregated by  
 381 intervention. Average subject age was 37.89 y, weight 68.05 kg, height 169.08 cm and BMI  
 382 23.70 (kg/m<sup>2</sup>). No significant differences were recorded between any of the groups.

383  
 384

Metric	Pure inulin (n =24)	Shortbread (n =24)	Milk Chocolate (n =24)	Rice Drink (n =24)	P (b)
Age (y)	39.46 (25-63)	34.46 (20-62)	38.29 (19-64)	39.33 (19-64)	<i>P</i> = 0.54
Weight(kg)	69.86 (50-110)	67.76 (51-105)	66.98 (53-86)	67.82 (45-98)	<i>P</i> = 0.89
Height (cm)	170.2 (157-193)	168.4 (152.4-189)	170.2 (155-193)	167.5 (147-195)	<i>P</i> = 0.73
BMI (kg/m <sup>2</sup> )	23.89 (18.37-30.37)	23.79 (19.57-30.79)	23.11 (19.71-28.72)	24.03 (18-29.9)	<i>P</i> = 0.74

385 **Table 3:** Subject data – age, weight, height, and BMI mean and SE segregated by intervention (*n* = 24 per group). *P* values  
 386 are the results of using a one-way ANOVA to compare differences in categorical data.

387

### 388 Dietary intake

389

390 Nutrient data collected at Day 0 and Day 10 of the intervention are presented in Table 4.  
 391 No significant differences were detected in total energy, protein, carbohydrates, total sugar,  
 392 starch and PUFAs intakes (Table 4). Analysis of total fat revealed significant differences  
 393 between interventions at day 10 (*P* = 0.026) with fat intakes in the milk chocolate  
 394 intervention being significantly different from the rice drink intervention (*P* = 0.019).  
 395 Repeated measure comparisons showed that total fat intake was significantly greater at Day  
 396 10 in the milk chocolate group only (*P* = 0.042). Finally, no significant differences in dietary  
 397 fibre were detected between interventions at Day 10 (Table 4). Follow-up comparisons  
 398 revealed that dietary fibre intake was significantly greater at Day 10 within each group (all *P*  
 399 ≤ 0.001) (Table 4).

EFFECTS OF FOOD MATRIX ON ITF PREBIOTIC EFFICACY

	Pure Inulin (n =24)			Shortbread (n =24)			Milk Chocolate (n =24)			Rice Drink (n =24)			P (b)
	Day 0	Day 10	P (a)	Day 0	Day 10	P (a)	Day 0	Day 10	P (a)	Day 0	Day 10	P (a)	
<b>Total energy (kcal)</b>	2139 (156.60)	2056 (167.90)	0.58	2127 (149.40)	2302 (180.80)	0.25	2429 (168.20)	2570 (172)	0.35	1990 (135.70)	2083 (129.90)	0.53	0.552
<b>Protein (g)</b>	93.51 (6.98)	96.17 (5.9)	0.69	88.4 (8.07)	89.71 (8.40)	0.84	98.22 (6.76)	97.73 (6.4)	0.94	79.99 (6.91)	76.83 (6.82)	0.64	0.293
<b>Fat (g)</b>	88.04 (8.11)	84.31 (6.82)	0.59	87.48 (8.03)	81.98 (8.72)	0.59	98.92 (9.70)	113.2 (9.24)	<b>0.042</b>	83.38 (6.12)	79.27 (6.38)	0.55	<b>0.026</b>
<b>PUFA (g)</b>	16.44 (1.43)	15.09 (1.27)	0.38	15.86 (1.74)	15.41 (1.85)	0.77	17.98 (1.92)	18.52 (1.71)	0.72	14.50 (1.38)	14.73 (1.31)	0.88	0.499
<b>CHO (g)</b>	250.30 (18.51)	247.80 (25.59)	0.89	248.60 (22.59)	276.50 (19.77)	0.13	280.70 (18.34)	276.90 (17.33)	0.84	228.20 (16.59)	236.40 (17.06)	0.66	0.599
<b>Starch (g)</b>	130.90 (10.71)	127.50 (15.07)	0.74	133.80 (10.36)	143.30 (11.70)	0.37	147.80 (12.79)	138.20 (11.73)	0.33	122.20 (11.23)	132.50 (11.84)	0.33	0.616
<b>Total sugar (g)</b>	116.80 (10.91)	116.90 (15.36)	0.99	112.80 (13.82)	110.60 (11.11)	0.85	129.80 (12.44)	134.10 (9.48)	0.71	104.50 (10.62)	115.40 (10.18)	0.35	0.748
<b>Fibre (g)</b>	31.04 (2.09)	38.64 (2.11)	<b>≤ 0.001</b>	27.06 (2.38)	38.04 (2.51)	<b>≤ 0.001</b>	30.23 (2.18)	39.01 (39.01)	<b>≤ 0.001</b>	21.69 (21.69)	35.14 (1.76)	<b>≤ 0.001</b>	0.902

400 **Table 4:** Energy and nutrient intake at baseline (Day 0) and at completion (Day 10) of intervention study in 96 volunteers (n = 24 per group). Mean and standard error (SE). (a) P values are as a  
401 result of planned Day 0 vs Day 10 comparisons (grey columns). (b) P values are as a result of using Day 0 data as a baseline covariate for between group Day 10 comparisons (orange column).  
402 Keyword: CHO = Total carbohydrates; PUFA = Polyunsaturated fatty acids

**403 Bacterial enumeration by FISH**

404

405 96 subjects provided stool samples at baseline and end of the intervention. Figure 2 and  
406 Figure 3 report changes in bacterial counts observed in the four intervention groups between  
407 Day 0 and Day 10 of the intervention.

408

409 Figure 2A reports the changes seen in total bacteria counts (Eub I-II-III). Analysis revealed  
410 no significant differences between interventions at completion ( $P = 0.315$ ). There was an  
411 average  $0.07 \log_{10}$  cells/g wet faeces increase in Eub I-II-III counts across all four  
412 interventions going from  $9.74$  to  $9.81 (0.07) \pm 0.025$  (SE)  $\log_{10}$  cells/g wet faeces. All values  
413 at end of intervention were significantly different compared to respective baseline samples  
414 (all  $P \leq 0.05$ ) (Supplemental Data Table 1).

415

416 Similarly, regarding Bif164 (*Bifidobacterium* spp.) counts no significant differences were  
417 detected between interventions at Day 10 ( $P = 0.641$ ). Repeated measures analysis revealed  
418 significant increases in Bif164 counts at Day 10 across all four interventions: average  
419 numbers increasing from  $8.36$  to  $9.00$  (mean difference  $0.64 \pm 0.05$  (SE))  $\log_{10}$  cells/g ( $P \leq$   
420  $0.001$ ) (Figure 2B).

421

422 **Figure 2.** Bacterial groups measured by FISH-FLOW ( $\log_{10}$  cells/g wet faeces) using probes: (A) total bacteria (Eub338 I-  
423 II-III), (B) *Bifidobacterium* spp. (Bif164). Box and whisker plot - min and max with all points. 96 volunteers ( $n = 24$  per  
424 group). Results that are statistically significant within and between subject (intervention) are displayed by specified  $P$  values.



425 *Bacteroides* (Bac303) counts are reported in Figure 3A. Increases in Bac303 counts were  
426 observed across all four interventions, yet the extent of change varied greatly. Largest  
427 increases in numbers of Bac303 were observed in the shortbread intervention increasing from  
428 8.06 to 8.31 (mean difference  $0.25 \pm 0.04$  (SE))  $\log_{10}$  cells/g wet faeces ( $P = 0.002$ ). Bac303  
429 counts at the end of the interventions (Day 10) were not significantly different between  
430 interventions ( $P = 0.201$ ) (Supplemental Data Table 1).

431

432 In contrast, significant differences in Rrec584 (*Roseburia/Eubacterium rectale*) counts were  
433 observed between interventions at Day 10 ( $P = 0.022$ ). Subsequent analysis identified  
434 significantly greater increases in Rrec584 counts in the shortbread intervention compared to  
435 milk chocolate ( $P = 0.021$ ). Significant increases from baseline in Rrec584 counts were only  
436 detected in the shortbread group going from 8.39-8.61 (mean difference  $0.22 \pm 0.07$  (SE))  
437  $\log_{10}$  cells/g wet faeces ( $P = 0.005$ ) (Figure 3B).

438

439 Additionally, *Faecalibacterium prausnitzii* (Fprau655) (Figure 3C) counts differed  
440 significantly between interventions at Day 10 ( $P = 0.029$ ), with increases in the shortbread  
441 intervention being significantly different from milk chocolate ( $P = 0.048$ ). In Day 0 vs Day  
442 10 comparisons the most noticeable changes in Fprau655 were recorded in both the  
443 shortbread and rice drink interventions with increases from 8.73 to 8.93 (0.20 mean  
444 difference  $\pm 0.07$  (SE))  $\log_{10}$  cells/g wet faeces (shortbread) and 8.77 to 8.84 (0.18 mean  
445 difference  $\pm 0.08$  (SE))  $\log_{10}$  cells/g wet faeces (rice drink). Both changes were statistically  
446 significant compared to respective Day 0 samples - shortbread ( $P = 0.004$ ) and rice drink ( $P =$   
447 0.012) (Figure 3C).

448

449 Finally, no significant differences were observed in changes of numbers of *Clostridium*  
450 *coccoides-Eubacterium rectale* group (Erec458) or *Propionibacterium* (Pro853) either within  
451 or between intervention at completion (Supplemental Data Table 1).

452

453 **Figure 3.** Bacterial groups measured by FISH-FLOW ( $\log_{10}$  cells/g wet faeces) using probes: (A) most *Bacteroidaceae* and  
454 *Prevotellaceae* (Bac303), (B) *Roseburia* (Rrec584) and (C) *Faecalibacterium prausnitzii* (Fprau655). Box and whisker plot -  
455 min and max with all points. 96 volunteers ( $n = 24$  per group). Results that are statistically significant within and between  
456 subject (intervention) are displayed by specified  $P$  values

## 457 Microbiota Profiling Analysis

458

459 Figure 4 reports 16S rRNA sequencing results for Relative Microbiome Profiling (RMP)  
 460 along with Quantitative Microbiome Profiling (QMP) for *Bifidobacterium* data across all four  
 461 interventions.

462

463 **Figure 4.** Relative Microbiome Profiling (RMP) (A) and Quantitative Microbiome Profiling data (QMP) (B) of  
 464 *Bifidobacterium* 16SrRNA sequencing results. Mean and standard error (SE). 96 volunteers ( $n = 24$  per group). Results that  
 465 are statistically significant within and between subject (intervention) are displayed by specified  $P$  values.

466

## 467 Relative Microbiome Profiling (RMP)

468

469 There were no significant differences in phylum level abundances detected between  
 470 interventions at Day 10 (Supplemental data Table 2) (all  $P \geq 0.05$ ). At phylum level largest  
 471 changes were documented in *Actinomycetota* (*Actinobacteria*), *post hoc* analysis  
 472 documenting significant increases across all four interventions at Day 10: shortbread ( $P =$   
 473  $0.002$ ), milk chocolate, pure inulin and rice drink (all  $P \leq 0.001$ ) (Supplemental Data Table  
 474 2). Subsequently, there were also significant decreases detected in *Bacillota* (*Firmicutes*):  
 475 milk chocolate ( $P = 0.002$ ), and pure inulin, rice drink and shortbread (all  $P \leq 0.001$ ). These  
 476 changes coincided with those seen in *Bifidobacterium* at genus level.

477

478 Accordingly, no significant differences were detected at genus level in any bacterial group  
 479 between interventions (all  $P \geq 0.05$ ) (Supplemental Data Table 2). In line with phylum level,  
 480 largest changes were recorded in *Bifidobacterium* with significant increases being detected  
 481 across all four interventions averaging an 92% increase above baseline (all  $P \leq 0.001$ ),  
 482 (Figure 4A). In addition, while no differences were detected between interventions, several  
 483 differences in bacterial taxa were documented within intervention including decreases in  
 484 *Blautia* (pure inulin, shortbread and rice drink), *Clostridium* cluster IVXA + IVXB (pure  
 485 inulin, milk chocolate and rice drink), *Dorea* (shortbread and rice drink), *Lactococcus*  
 486 (shortbread), *Ruminococcus2* (milk chocolate), *Lachnospiraceae incertae sedi* (pure inulin  
 487 and shortbread), *Ruminococcus* (pure inulin, shortbread and rice drink), and increases in  
 488 *Prevotella* (milk chocolate) (Supplemental Data Table 2).

489

490 There were no significant differences in any measure of  $\alpha$ -diversity detected between  
 491 interventions at Day 10 (all  $P \geq 0.05$ ). Several within group differences were detected with  
 492 significant decreases in Shannon index in both the pure inulin ( $P = 0.003$ ) and rice drink ( $P =$   
 493  $0.033$ ) interventions. Trends towards reductions in both shortbread ( $P = 0.061$ ) and milk  
 494 chocolate interventions ( $P = 0.073$ ) were noted. There was also a significant decrease in  
 495 richness (no. of species) in both the pure inulin ( $P = 0.011$ ) and rice drink interventions ( $P =$   
 496  $0.026$ ). Simpson index was reduced in the pure inulin intervention ( $P = 0.011$ ) (Supplemental  
 497 Data Table 3).

498

## 499 Quantitative Microbiome Profiling (QMP)

500

501 Upon quantification of RMP data no significant differences were detected between groups at  
 502 Day 10 (all  $P \geq 0.05$ ) (Supplemental Data Table 4). As per RMP, largest increases at phylum  
 503 level were documented in *Actinomyces*: pure inulin and rice drink (both  $P = 0.003$ ), milk  
 504 chocolate ( $P = 0.015$ ) and shortbread ( $P = 0.001$ ). Significant decreases in *Bacillota*  
 505 (*Firmicutes*) were documented in both the pure inulin ( $P = 0.016$ ) and shortbread ( $P \leq 0.001$ )  
 506 interventions, but not in the milk chocolate (all  $P = 0.612$ ) or rice drink interventions (all  $P =$   
 507 0.514).

508

509 Largest changes in microbial counts at genus level were detected in *Bifidobacterium*, *post hoc*  
 510 analysis revealing significant increases across all four interventions: shortbread ( $P \leq 0.001$ ),  
 511 milk chocolate ( $P = 0.036$ ), pure inulin ( $P = 0.004$ ) and rice drink ( $P = 0.011$ ) (Figure 4B).  
 512 This mirrors the changes observed in RMP. Additionally, as per RMP there were a number,  
 513 albeit fewer, changes in bacteria groups detected within each intervention. These included  
 514 decreases in numbers of *Blautia* (pure inulin and shortbread), *Clostridium* cluster IVXA +  
 515 IVXB (pure inulin), *Lachnospiraceae incertae sedi* (pure inulin and shortbread), *Collinsella*  
 516 (pure inulin) and *Ruminococcus* (shortbread). Along with increases in *Prevotella* (milk  
 517 chocolate) and *Roseburia* (shortbread) (Supplemental Data Table 4).

518

519 **<sup>1</sup>H-NMR spectroscopic profiles**

520

521 Metabolic profiles of urine samples across the four intervention groups were analysed using  
 522 unsupervised (PCA) methods (first two components), showing separation between the four  
 523 interventions at completion ( $R^2\text{Cum} = 0.18$ ,  $Q^2\text{Cum} = 0.122$ ) (Figure 5). We did not observe  
 524 any differences in <sup>1</sup>H-NMR metabolic profiles between interventions as points did not show  
 525 any clustering or patterns in relation to intervention. As a result, no subsequent downstream  
 526 analysis was carried out.

527

528 **Figure 5.** Urinary <sup>1</sup>H magnetic resonance (<sup>1</sup>H-NMR) profiles across the four intervention groups. Unsupervised principal  
 529 components analysis (PCA) scores plot of endpoint urine samples.  $R^2\text{Cum} = 0.18$ ,  $Q^2\text{Cum} = 0.122$ . Key: IN = Pure inulin;  
 530 MC = Milk chocolate; RD = Rice Drink; ST = Shortbread

531

532 **Bowel habit and function**

533

534 Changes in gastrointestinal symptoms (flatulence, intestinal bloating, abdominal pressure,  
 535 abdominal pain and feeling of fullness) were self-recorded daily throughout the 10-day  
 536 intervention and are reported as averages of Days 0-5 and Days 6-10. Scores of 0, 1, 2, and 3  
 537 corresponded to none, mild, moderate, and severe. Changes in stool consistency were  
 538 measured as per Bristol Stool Form Scale and stool frequency are reported in Figure 6. There  
 539 were no differences in flatulence, intestinal bloating, abdominal pressure, abdominal pain or  
 540 feeling of fullness detected between interventions at completion (D6-10) (Supplemental Data

541 Table 5), although there was a trend towards significant differences in feeling of fullness ( $P =$   
542 0.058). This reflected the level of significance documented between the rice drink and pure  
543 inulin interventions at completion ( $P = 0.058$ ). Repeated measures analysis revealed a  
544 significant decrease in feeling of fullness in the pure inulin intervention only ( $P = 0.002$ ).

545

546 Stool consistency was significantly different between interventions ( $P = 0.017$ ), with values  
547 documented in pure inulin being higher than in the rice milk intervention ( $P = 0.010$ ). These  
548 results are in line with post hoc analysis revealing increases in stool consistency ratings were  
549 only detected in the pure inulin group ( $P = 0.009$ ). Finally, there were no changes in stool  
550 frequency either within or between interventions although there was a trend towards increases  
551 in stool frequency identified in the pure inulin intervention ( $P = 0.080$ ) (Figure 6 and  
552 Supplemental Data Table 5).

553

554 **Figure 6.** Stool consistency (Bristol Stool Form Scale, A) and stool frequency (B) at (Day 0-5) and again at Day 6-10 after  
555 intervention in 96 volunteers ( $n = 24$  per group). Results that are statistically significant within and between subject  
556 (intervention) are displayed by specified  $P$  values.

557

## 558 Discussion

559

560 This is the first study to investigate whether the food matrix impacts on the prebiotic efficacy  
561 of ITF using a standardised protocol. In total 96 volunteers provided stool samples at baseline  
562 and end of the intervention. One of the main pre-requisites of a prebiotic is to stimulate  
563 beneficial changes in microbial composition in certain, but not limited number of bacteria  
564 (Gibson *et al.*, 2017). ITF prebiotics primarily target bifidobacteria as they possess the  
565 necessary glycosidases and transporters needed to degrade fructans and to assimilate low  
566 molecular weight carbohydrates (Falony *et al.*, 2009; Riviere *et al.*, 2018). In this study we  
567 used both targeted and untargeted analyses to determine the impact of the food matrix on the  
568 prebiotic efficacy of ITF.

569

570 In this study, we demonstrate, using both targeted and untargeted analysis, that, irrespective  
571 of the food matrix, the selectivity of ITF towards bifidobacteria appears to be unaffected.  
572 FISH-FLOW determined similar increases in Bif164 counts across all interventions averaging  
573 a  $0.64 \pm 0.10 \text{ Log}_{10} \text{ Cells/g wet faeces}$  at completion. These findings were further validated  
574 using untargeted analysis with an average  $92\% \pm 5.43\% \text{ (SE)}$  and  $1.14 \times 10^9 \pm 1.52 \times 10^8$   
575 (SE) *Bifidobacterium* increase in RMP and QMP abundance respectively. This further  
576 confirms the selectivity of ITF towards *Bifidobacterium* (Costabile *et al.*, 2010; Gibson and  
577 Roberfroid, 1995; Kruse *et al.*, 1999). No significant differences were detected between  
578 interventions (all  $P \geq 0.05$ ). These results are in line with those documented by several  
579 previous food-based ITF supplementation studies (Gibson *et al.*, 1995; Healey *et al.*, 2018;  
580 Marteau *et al.*, 2011; Ramnani *et al.*, 2010; Reimer *et al.*, 2020; Tuohy *et al.*, 2001). This  
581 does not, however, match those recorded by (Slavin and Feirtag, 2011) who documented that  
582 upon consumption of 20g/day of ITF supplemented into ice cream, no significant differences

583 in *Bifidobacterium* counts were detected. These differences likely result from subjectivity in  
584 using plate counts, lack of a washout period and lack of collection of baseline stool samples  
585 (Slavin and Feirtag, 2011).

586

587 Upon completion differences between the interventions in microbial load and composition  
588 among the differing food matrices were detected. Using targeted FISH-FLOW analysis there  
589 were significant increases in Bac303, Rrec584 and Fprau655 detected in the shortbread  
590 intervention. In the rice drink intervention significant increases were seen in numbers of  
591 FPräu655. The microbial loads (QMP) documented in both *Roseburia* and *Faecalibacterium*  
592 *prausnitzii* were similar to those recorded by FLOW-FISH. The levels of *Roseburia* and  
593 *Faecalibacterium prausnitzii* at completion of the shortbread intervention using FISH-  
594 FLOW were significantly different from milk chocolate at Day 10 (both  $P \leq 0.05$ ), but not  
595 from pure inulin or rice milk (both  $P \geq 0.05$ ).

596

597 These results are of interest because several previous food-based supplementation studies by  
598 (Gibson *et al.*, 1995; Kleessen *et al.*, 2007; Tuohy *et al.*, 2001) either noted reductions or no  
599 changes in numbers of *Bacteroides* upon consumption of ITF-fortified cereal bars and  
600 biscuits. In contrast (Brighenti *et al.*, 1999) and (Rao, 2001) recorded 0.49 and 0.69  
601  $\log_{10}$  CFU/g faeces dry weight increases in *Bacteroides* upon consumption of ITF containing  
602 extruded ready-to-eat cereal and when pure ITF was supplemented into drinks. These  
603 discrepancies probably occur due to the higher levels of *Bacteroides* present in the study  
604 conducted by (Kleessen *et al.*, 2007; Tuohy *et al.*, 2001). It should be noted that different  
605 analytical techniques were used (FISH-FLOW vs selective media) which directly impedes the  
606 comparison and evaluation of results across such studies (Jackson *et al.*, 2022b).

607

608 Additionally, it is difficult to compare results of Rrec584 and FPräu655 to previous food-  
609 based ITF supplementation studies due to most studies using targeted analysis not reporting  
610 changes in both targeted groups. One food-based supplementation study that counted  
611 Fpräu655 using FISH-FLOW recorded no change in numbers upon consumption of fruit juice  
612 drinks containing Jerusalem artichoke inulin (Ramnani *et al.*, 2010). A trend towards an  
613 increase in relative abundances of *Faecalibacterium prausnitzii* was detected upon  
614 consumption of pure ITF (Healey *et al.*, 2018).

615

616 *Bacteroides* possess a large number of loci responsible for the assimilation of complex  
617 carbohydrates including arabinoxylans (Pereira *et al.*, 2021) as well as complex starches  
618 (Dobranowski and Stintzi, 2021). Arabinoxylans are components of the wheat flour used in  
619 production of the shortbread biscuits in this study. From this, one could speculate that the  
620 significantly larger increases seen in *Roseburia* and *Faecalibacterium prausnitzii* in the  
621 shortbread intervention resulted from the utilisation of resulting motifs from the breakdown  
622 of arabinoxylans by *Bacteroides*. For example, it was previously demonstrated by (Walton *et*  
623 *al.*, 2012) that, consumption of *in situ* produced arabinoxylan-oligosaccharides in bread,  
624 resulted in significant increases in *Bacteroides*, *Roseburia* and *Faecalibacterium prausnitzii*

625 (all  $P \leq 0.05$ ). However, it has also been demonstrated that upon consumption of 2 x 44 g  
626 bowls of wheat bran arabinoxylan-rich ready-to-eat cereal no changes in *Bacteroides*,  
627 *Roseburia* and *Faecalibacterium prausnitzii* could be detected (Maki *et al.*, 2012). Taking  
628 this into consideration, increases in both *Roseburia* and *Faecalibacterium prausnitzii* often  
629 coincide with increases in *Bifidobacterium* in *in vitro* studies likely as a result of cross-  
630 feeding on acetate and lactate (Kim *et al.*, 2020; Riviere *et al.*, 2016). From this, it could be  
631 hypothesised that increases in both *Roseburia* and *Faecalibacterium prausnitzii* in the  
632 shortbread intervention may have also occurred from both the utilisation of resulting  
633 breakdown arabinoxylan motifs by *Bacteroides* along with cross-feeding on acetate and  
634 lactate produced by *Bifidobacterium*.

635

636 It can be implied that complementary effects may exist from the presence of other bioactive  
637 compounds present within the matrices. For example it was demonstrated by (Ramnani *et al.*,  
638 2010) that upon consumption of high polyphenol-containing fruit shots containing Jerusalem  
639 artichoke ITF, in addition to an increase of bifidobacteria, significant increases in  
640 *Lactobacillus/Enterococcus* group were detected ( $P = 0.042$ ). Finding means to increase  
641 numbers of *Bacteroides*, *Roseburia* and *Faecalibacterium prausnitzii* alongside  
642 *Bifidobacterium* may be of clinical importance via the potential to increase butyrate  
643 production, given that butyrate plays a vital role as an energy source for colonocytes, in the  
644 regulation of tight cell junction integrity, and in the repair of the intestinal mucosa (Canani *et al.*,  
645 2011). *Faecalibacterium prausnitzii* is considered to be a keystone species and has been  
646 associated with lowered risks of IBD and ulcerative colitis (Leylabadlo *et al.*, 2020). Overall,  
647 from the findings of this study we can conclude that the selectivity of ITF towards  
648 bifidobacteria is independent of the food matrix. Yet, the compositional makeup of the matrix  
649 may likely have important implications towards stimulating changes in the wider microbiota.

650

651 During the trial volunteers did not alter their diet or lifestyle, with exception of consumption  
652 of study product and adjustment of portion sizes to compensate for additional calories  
653 consumed. On average, fibre intakes were estimated at 27.5 g/day which is slightly below the  
654 current UK recommendations of 30 g/day as laid down by SACN (Scientific Advisory  
655 Committee on Nutrition, 2015). They do, however, far exceed those of the average population  
656 at just 14.9-18 g/day (Gressier and Frost, 2022; Scientific Advisory Committee on Nutrition,  
657 2015).

658

659 Significant increases in dietary fibre intakes were detected across all four interventions (Table  
660 4). Between baseline and completion there was an average increase of 10.2g fibre with an  
661 average 37.71 g/day of fibre being consumed by completion suggesting that the addition of  
662 10 g/day of inulin into food products could help people reach or even exceed the daily  
663 minimum recommendation. Increasing fibre intake is the 1<sup>st</sup> line of treatment to improve  
664 bowel function. In order to assess changes in stool consistency the validated Bristol Stool  
665 Form Scale was used. However, despite an additional consumption of 10 g/day ITF  
666 significant changes in stool consistency were only detected in the pure inulin intervention at  
667 Day 10 ( $P = 0.023$ ).

668

669 In our cohort no differences in stool frequency were detected and scores were stable  
670 throughout the intervention. Given that, in this study, volunteers started with higher daily  
671 stool frequency at baseline and that increases in stool frequency are often seen in subjects  
672 with low fibre intakes, the higher baseline fibre intakes seen in this study likely contributed  
673 towards a lack of change in stool frequency (Buddington *et al.*, 2017; François *et al.*, 2014;  
674 Grider and Piland, 2007; Isakov *et al.*, 2013; Micka *et al.*, 2017; Ramnani *et al.*, 2010; Slavin  
675 and Feirtag, 2011).

676

677 Gastrointestinal sensations including flatulence, intestinal bloating, abdominal pressure and  
678 abdominal pain were rated as none to mild and remained unchanged throughout the course of  
679 the intervention. No discomfort was reported and no discontinuation of the study by any  
680 volunteers was recorded. The only significant difference was a decrease in feeling of fullness  
681 in the pure inulin intervention ( $P = 0.002$ ). This indicates that chicory inulin in both pure  
682 form and supplemented into differing matrices is well tolerated, but the food matrix may have  
683 implications regarding satiety. It has been documented that matrices higher in lipids and other  
684 non-digestible carbohydrates content such as the interventions used in this study can  
685 induce/sustain satiety by regulating smooth muscle stretch receptors and delaying gastric  
686 emptying (Aguilera, 2019).

687

## 688 **Conclusion**

689

690 In conclusion, we can confirm that irrespective of the food application and matrix, prebiotic  
691 ITF are selectively utilized and lead to specific changes in the gut microbiota.  
692 *Bifidobacterium* was the only genus consistently impacted by inulin-type fructans, yet the  
693 compositional make-up of food matrix may have implications regarding changes in the wider  
694 microbiota. For example, differences in several bacterial groups including *Roseburia* and  
695 *Faecalibacterium prausnitzii* were documented at the completion between the shortbread and  
696 milk chocolate interventions.

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707 **Supplementary material**

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709 **Supplemental Data Table 1.** Targeted microbial analysis vis fluorescence *in situ*  
710 hybridisation at Day 0 and Day 10 of intervention.

711

712 **Supplemental Data Table 2.** 16S rRNA relative microbial profiling data at Day 0 and Day  
713 10 of intervention

714

715 **Supplemental Data Table 3.** Alpha diversity measures of 16S rRNA sequencing at Day 0  
716 and Day 10 of intervention.

717

718 **Supplemental Data Table 4.** 16S rRNA quantitative microbiome profiling data at Day 0 and  
719 Day 10 of intervention.

720

721 **Supplemental Data Table 5.** Gastrointestinal sensation and bowel habit diary data displayed  
722 by day and intervention.

723

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725

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728

729 **Conflict of Interest**

730

731 We acknowledge that this work was financed by BENEIO. ST and JVH are employees of  
732 BENEIO.

733

734 **Data Sharing**

735 The data that support the findings of this study are available from the corresponding author  
736 upon reasonable request.

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