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**THE ANTIOXIDANTS AND ANTI-INFLAMMATORIES BENEFIT OF BROCCOLI
SPROUT DIETS AND THEIR RELATION TO HEALTH.**

By

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A DISSERTATION

Submitted in partial fulfillment of the

Requirements for the Degree of

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(in Biomedical Sciences)

The Graduate School

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August 2024

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By Tolu Esther Alaba

Dissertation Advisor: Dr. Suzanne Ishaq

An Abstract of the Dissertation Presented
in Partial Fulfillment of Requirements for the
Degree of Doctor of Philosophy
(in Biomedical Sciences)
August 2024

Inflammatory bowel disease is a chronic intestinal condition characterized by severe inflammation, oxidative stress, microbial dysbiosis, and cellular structure and barrier damage. The complex mechanism of pathologies makes it challenging to manage the disease effectively. Most current treatments target only inflammation using steroids and antibiotics with side effects. Therefore, recent research has focused on safe and effective nutritional options. Broccoli sprouts, *Brassica oleracea* variety italica, is a member of the *Brassicaceae* family and has documented antioxidant, anti-inflammatory, and gut protective benefits against inflammatory bowel diseases. These benefits have been associated mainly with sulforaphane from dietary glucosinolates present in broccoli sprouts. However, many other dietary and microbially derived metabolites are present in broccoli sprouts that are yet to be identified and explored against inflammatory bowel diseases. Commensal bacteria such as *Bifidobacterium* and *Bacteroides* have been reported to participate in hydrolyzing dietary metabolites for gut benefits. However, there is a need for more studies on the differential effects of broccoli sprouts on metabolite concentration and microbial communities in diverse patients with these gut conditions. Additionally, the interactions of these metabolites with

microbial communities in specific gut regions still need to be clarified. Therefore, this project utilized dietary assessments, computational analyses, and a global metabolomics approach to identify beneficial metabolites and microbial interactions across different age groups and genders associated with broccoli sprouts diet as a potential nutritional intervention against inflammatory bowel diseases.

First, I assessed the role of high consumption of dark green vegetables diets such as *Brassic*as, fruits, and fiber on the healthy eating index using dietary history surveys and the effect of steamed broccoli sprouts intervention on the microbial response of *Bacteroides thetaiotaomicron* genes for benefit in healthy individuals with self-reported gut problems. *Bacteroides thetaiotaomicron* genes are associated with increased conversion of glucosinolates from broccoli sprouts into isothiocyanates, such as sulforaphane, for anti-inflammatory and antioxidant effects against inflammatory bowel disease. The data showed a healthy eating index of >70 in individuals who consumed at least twice daily dark green vegetables may have a high expression of *Bacteroides thetaiotaomicron* genes. This result was particularly evident before, at the end, and seven days after the broccoli sprout diet in young and middle-aged persons with gut conditions who consumed high amounts of dark green vegetables, fiber, and fruits above the daily values recommended by the dietary guidelines for Americans. These vital results provide information for future research to explore personalized approaches for dietary recommendations for individuals with gut conditions in compliance with dietary guidelines for Americans and its beneficial effect on diet-microbial responsiveness, particularly in young adults.

Second, I utilized untargeted metabolomics and computational tools to examine the effects of steamed broccoli sprouts intervention on the concentrations of beneficial dietary and microbial-derived metabolites. Also, I investigated the association between the metabolites, commensal

bacteria, and *Bacteroides thetaiotaomicron* genes in ulcerative colitis mice. Metabolites annotated in fecal samples after broccoli sprouts diet includes sulforaphane, short-chain fatty acids, tryptophan, indoles, glutamic, and polyphenols with antioxidant, anti-inflammatory, and gut-protective effects against mouse models of inflammatory bowel diseases. These metabolites positively correlate with commensal bacteria, *Bacteroides*, *Intestinimonas*, *Oscillibacter*, and *Lachnospiraceae* species in the colon, cecal and jejunum regions. These findings open up exciting avenues for future research, particularly in targeting region-specific benefits of broccoli sprouts intervention against inflammatory bowel diseases.

Lastly, I examined the differential effect of two different preparations, steamed and mildly heated broccoli sprouts diets, as interventions for ulcerative colitis in female and male, young and adult mice. Metabolic profiles of plasma samples revealed increased concentrations of glucoraphanin and glucoerucin, iso-ferulic acid, flavanone-4-glucuronide, and denticulaflavonol are which may be associated with decreased disease activity and recovery from colitis observed in adult female mice. Adult male and younger mice may benefit more from mildly heated broccoli sprouts with increased concentrations of catechin, proanthocyanidins, short-chain fatty acids, and glutathione metabolites. Novel information generated from this study could guide the targeted application of broccoli intervention as nutritional management for specific age and gender groups with inflammatory bowel condition

DEDICATION

I dedicate this dissertation to God, my parents, family, and friends, who supported, prayed, and motivated me throughout my doctoral studies.

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GLOSSARY OF TERMS

| Abbreviation | Definition | Abbreviation | Definition |
|--------------|---------------------------------|--------------|---|
| AHR | Aryl Hydrocarbon Receptor | IL6 | Interleukin-6 |
| CCL | Chemokine (C-C) Ligand | IL23R | Interleukin-23 receptor |
| CCR | Chemokine (C-C) Receptor | iNOS | Inducible Nitric Oxide Synthase |
| CD | Crohn's Disease | ITC | Isothiocyanates |
| CG | Cysteine-Glycine | LPS | Lipopolysaccharides |
| COX-2 | Cyclooxygenase | NAC | N-acetyl-L-Cysteine |
| CXCL | Chemokine(CXC) Ligand | NFkB | Nuclear Factor kappa B |
| DPPH | 2,2-Diphenyl-1-picrylhydrazyl | Nrf2 | Nuclear Factor Erythroid 2-related Factor |
| DSS | Dextran Sulfate Sodium | NOD | Nucleotide oligomerization domain (NOD) |
| ERN | Erucin | OCTN | Organic Cation Transporter |
| GLR | Glucoraphanin | SCFA | Short Chain Fatty Acid |
| GPX | Glutathione Peroxidase | SFN | Sulforaphane |
| GSH | Glutathione | SS | Steamed broccoli Sprouts |
| GSL | Glucosinolates | TLR | Toll-Like Receptor |
| IBD | Inflammatory bowel Disease | TNF α | Tumor Necrosis Factor-alpha |
| ICAM | Intercellular-Adhesion Molecule | TNFSF | Tumor-Necrosis-Factor Superfamily |
| IL10 | Interleukin-10 | UC | Ulcerative Colitis |
| IL1 β | Interleukin-1 beta | ZO-1 | Zonula Occluden-1 |

CHAPTER 1

CURRENT KNOWLEDGE ON THE PREPARATION AND BENEFITS OF CRUCIFEROUS VEGETABLES AS RELATES TO IN VITRO, IN VIVO AND CLINICAL MODELS OF INFLAMMATORY BOWEL DISEASE.

This chapter was published in *Current Developments in Nutrition* and has undergone minor edits according to the dissertation format for consistency (Alaba et al. 2024)

1.1 Abstract

Inflammatory bowel disease is a chronic condition with a significant economic and social burden. The disease is complex and challenging to treat because it involves several pathologies, such as inflammation, oxidative stress, dysbiosis, and intestinal damage. The search for an effective treatment has identified cruciferous vegetables and their phytochemicals as potential management options for inflammatory bowel disease, as they contain prebiotics, probiotics, and anti-inflammatory and antioxidant metabolites essential for a healthy gut. This critical narrative style review provides a robust insight into the pharmacological effects and benefits of crucifers and their documented bioactive compounds in in vitro and in vivo models, as well as clinical inflammatory bowel disease. The review highlights the significant impact of crucifer preparation and the presence of glucosinolates, isothiocyanates, flavonoids, and polyphenolic compounds, which are essential for the anti-inflammatory and antioxidative benefits of cruciferous vegetables, as well as their ability to promote the healthy microbial community and maintain the intestinal barrier. This review may serve as a viable nutritional guide for future research on methods and features essential to developing experiments, preventions, and treatments for inflammatory bowel

disease. There is limited clinical information and future research may utilize current innovative tools, such as metabolomics, for adequate knowledge and effective translation into clinical therapy.

Key words: Inflammatory bowel disease, cruciferous vegetables, oxidative stress, inflammation, microbiomes, glucosinolates, isothiocyanates, polyphenols and flavonoids.

1.2 Introduction

1.2.1 Inflammatory Bowel Disease

Inflammatory bowel disease (IBD) is a chronic condition that can last a lifetime and reoccur, causing inflammation, diarrhea, rectal bleeding, and abdominal pain due to severe anatomical damage, immune over-activation, oxidative stress, and microbiome disruption (Seyedian et al. 2019; Tian et al. 2017). Ulcerative colitis (UC) primarily affects the rectum and colon, leading to inflammation, pain, and diarrhea, including mucousy and bloody stool, resulting in anemia and iron deficiency (Seyedian et al. 2019; El Amrousy et al. 2022) as well as a greater risk factor for colon cancer, the second leading cause of cancer death globally (Gates et al. 2023; Siegel et al. 2021). Crohn's disease (CD) involves chronic inflammation of the distal gut, leading to lesions along the entire intestine, immune intolerance of commensals, fever, tiredness, and complications such as stenosis, fistulas, and strictures (Caparrós et al. 2021). Patients often experience remission and recurring flares resulting in surgical removal of damaged intestinal regions (Petagna et al. 2020). IBDs create a continuous pathological circle of comorbidities: malabsorption and malnutrition can lead to adipogenesis, obesity, diabetes, and non-alcoholic fatty liver disease (Lomer et al. 2019; Saroli Palumbo et al. 2019); IBD stress is associated with 8-9% of pregnancy loss or preterm birth (Nielsen et al. 2022); and it can impact psychological well-

being, including anxiety, depression, obsessive disorder, and teasing from peers (Barberio et al. 2021; Quick et al. 2015).

IBD is a significant economic and social burden, particularly in Europe and North America where rates are high (Kaplan 2015; The Lancet Gastroenterology Hepatolog...); in the US, > 3 million people suffer from IBD, with an annual cost > \$30 billion. Cases of IBD have dramatically increased in many countries (Caviglia et al. 2023), with various factors contributing, including diet and the switch to ultra-processed foods (Dolan and Chang 2017), lifestyle, urbanization and exposure to environmental pollutants (Benchimol et al. 2017), and stress (Kaplan and Ng 2017), as well as a few genetic markers (Liu et al. 2015; Ahern et al. 2010). Many studies suggest that diet is a major factor, including one which reported a 70% relationship between IBD and a switch to self-reported unhealthy diets with high sugar and saturated fats and less fiber, fruits, and vegetables (Damas et al. 2018).

IBD management focuses on alleviating inflammation, oxidative stress, or microbial dysbiosis, and is challenged by severe side effects, or individualized presentation of symptoms. Clinical medicine, such as immunosuppressants, antibiotics and steroids, and surgery (Lewis et al. 2018; Sandborn WJ, Ghosh S, Panes J, et al....), can induce remission, but many patients become less responsive over time. Patients can spontaneously enter remission, which masks medication's loss of efficacy. Individuals can experience repetitive relapse (Miyatani Y 2023), and patients with recurrent surgery often experience a high mortality rate (Lewis et al. 2018; Hudesman DP, Chakravarty SD, Emond B,...). Thus, a low-cost and efficient approach is essential for IBD management to alleviate oxidative stress, inflammation, and host-microbial dysbiosis is essential for IBD management (Hudesman DP, Chakravarty SD, Emond B,...; Dahlhamer et al. 2016). This critical-narrative review style highlights primary research articles documenting the preparation,

use, and mechanisms of bioactive compounds derived from cruciferous vegetables as a potential management for IBD. There is evidence that a person's response to plant fibers or secondary compounds can be highly individualized and reliant on their gut microbiota, thus any ranking of the effectiveness of different brassicas would not be broadly applicable. This critical narrative style of review highlights that crucifer's preparation affects the effectiveness and potential for targeting benefits in the gut.

1.2.2 Comorbidities of oxidative stress and inflammation during IBD

The complex relationship between oxidative stress and inflammation could create a vicious cycle of chronic inflammation when immune cells produce reactive oxygen species (ROS) in response to intestinal injury, free radicals, and reactive nitrogen species (Tian et al. 2017) in the gut to recruit more inflammatory cells to exacerbate IBD (Pereira et al. 2015; Nuñez et al. 2021). Some critical pathways in the relationship between inflammation and oxidative stress are nuclear Factor kappa B (NFkB) and nuclear factor erythroid 2-related factors 2/Kelch-like ECH-associated protein (NRF2/KEAP). The coupling of NRF2 and KEAP proteins within the intestinal cells could prevent the NRF's transcription of antioxidants and anti-inflammatory proteins (Moura et al. 2020; Geertsema et al. 2023). Meanwhile, NFkB could increase mitochondrial production of ROS by proton loss during intracellular enzymatic reactions, leading to uncontrolled oxidative stress, inflammation, and intestinal damage (Piechota-Polanczyk A 2014).

The gut epithelial barrier is critical to enforcing selective permeability to permit essential nutrients but prevent harmful substances (Schulzke et al. 2009). Damaged barriers cause excess ROS, inadequate production of antioxidants, and leaky gut conditions (van Duijn W, et al. 2003) in which an influx of pathogenic bacteria activates NFkB epithelial and recruits immune cells which disrupts the gut-microbiota homeostasis (Wullaert 2010; Zuo and Ng 2018).

Similarly, the gut's vasculature contains several tight junctions crucial for selective permeability and vascular dilation (Deban L, Correale C, Vetrano S, Males...; Song Y, He Y, Rong L, et al. 2023). Mucosal endothelial cells can express vascular endothelial cell adhesion molecules (VCAM), intercellular adhesion molecules (ICAM), chemokines, and fractalkines to recruit and retain inflammatory cells (Gu et al. 2017). Inflammatory signals, toll-like receptors (TLR), and nucleotide oligomerization domains NOD1/2 via endothelial NFκB and mitogen-activated protein kinases could trigger sphingosine 1-phosphate receptor-2 for oxidative stress and further damage (Schirbel et al. 2013). The endothelial-immune cell interaction within the gut could ultimately lead to platelet aggregation, intestinal coagulation, ischemia, and dysbiosis (Schirbel et al. 2013; Roberts et al. 2010).

1.2.3 Microbial dysbiosis during IBD

Microorganisms inhabit the human gastrointestinal tract, from the oral cavity to the rectum (Turnbaugh et al. 2007), colonizing the gut early in life through the parent's microbiota and the living environment (Dominguez-Bello et al. 2010; Dill-McFarland et al. 2019), and play an essential role in developing the child's gut, cellular barrier, and mucosal layer (Selma-Royo et al. 2021; Selma-Royo et al. 2020), and tolerance to gut microbiota (Knoop et al. 2017). The composition of microbial communities varies by anatomical location and diet, which can either protect or predispose the gut to IBD (Nishino K, Nishida A, Inoue R, et al....; Holman et al. 2023). Microbial populations in healthy and IBD patients are highly individualized, and changes associated with UC and CD are distinct. Moreover, there are differences between mucosal and luminal microbiota in inflamed and non-inflamed tissues from IBD patients (Walker et al. 2011).

Significant causal relationships exist between the gut immune system, oxidative stress, and loss of commensal bacteria (Borrelli et al. 2018; Rana et al. 2014; Schaubeck et al. 2016). Dysregulated inflammatory processes can cause inappropriate responses to regular gut commensals and lead to altered microbial architecture - dysbiosis. It is situationally specific whether dysbiosis precedes inflammation or dysbiosis leads to inflammation (Aldars-García et al. 2021). In UC, pathogenic microbiota can initiate IBD-like inflammation in germ-free mice (Abeles et al. 2016; Schaubeck et al. 2016), and some bacterial species of *Clostridium*, *Escherichia coli*, and *Shigella flexneri* can induce pathogenicity of commensals in the early development of IBD (Ma et al. 2023). Similarly, in CD, pathogen infection and gut microenvironmental cues can cause the pathogenesis of commensal colonies to trigger dysbiosis (Schaubeck et al. 2016). Conversely, studies in mice showed that knockout of genes associated with host-microbe tolerance and increased copies of immune defense genes protected against gastrointestinal inflammation (Li et al. 2023), indicating that inflammation can lead to dysbiosis.

Studies show that IBD patients are likely to have lower microbial diversity (Hansen et al. 2012), featuring more pathogenic bacteria and fewer beneficial species (Kang et al. 2010; Shaw et al. 2016) which reduces short-chain fatty acid (SCFA) production but increases sulfur metabolism (Machiels K, Joossens M, Sabino J, et ...; de Vos WM. 2013). Therefore, dysbiosis is more pronounced in CD with increased pathogens: *Enterococcus* spp., *Lactobacillus fermentum*, *Clostridioides difficile*, *Shigella flexneri*, and *Listeria* spp. and decreased commensals such as *Faecalibacterium prauznitzii*, *Eubacterium rectale*, *Ruminococcus* spp., *Bacteroides fragilis* and *B. vulgatus* (Nishino K, Nishida A, Inoue R, et al....; Holman et al. 2023; Hoarau G, Mukherjee PK, Gower-Rousseau...; Heinken et al. 2021). Meanwhile, reports from UC patients showed increased bacterial phyla *Pseudomonadota* (formerly *Proteobacteria*), *Actinobacteria*, and

Prevotella spp. and lowered *Bacteroidota* (formerly *Bacteroidetes*) (Aldars-García et al. 2021). Dysbiosis persists during disease inactivity, so decreased *F. prausnitzii* and *Clostridium coccooides* can predict relapse (Rajca et al. 2014).

1.2.4 The role of diet in IBD development and treatment

The development of dysbiosis, inflammation, and oxidative stress during IBD can be modulated by diet, about five times more closely associated than genetic factors (Tian et al. 2017; David et al. 2014; Khalili et al. 2018; Ho et al. 2019). High consumption of dietary fat and sugar can increase mucosal dysbiosis, inflammation and horizontal gene transfer in microbiome to increase pathogenic colonization, such as *Pseudomonadota* (formerly *Proteobacteria*) and *Bacillota* (formerly *Firmicutes*) phyla (Agus et al. 2016; Groussin et al. 2021), and decrease SCFA-producing bacteria *Roseburia* spp., *Eubacterium rectale*, and *Ruminococcus bromii* (da Rocha et al. 2023; De Filippo et al. 2010). Dysbiosis and damaged intestinal cells promote the influx of ROS and inflammasomes from impaired mitochondria biogenesis (Das and Ganesh 2023; Saint-Georges-Chaumet and Edeas 2015): the hypoxic epithelial cells and inflammatory cytokines induce mitochondrial leaky electron transfer chain and peroxidase production for oxidative stress (Lee et al. 2020; Clark and Mach 2017), which results in inadequate energy production and tiredness (Clark and Mach 2017). Mice fed with a high-fat and sugar diet exhibit severe edema, high leukocyte scores, and the presence of chemokines and cytokines, such as tumor necrosis factor-alpha (TNF α), Interleukin-6 (IL6), and chemokine (C-C) ligand2 (CCL2), in their colon (Shon et al. 2023), and fecal samples revealed more pathogenic bacteria, TLR expression, and neutrophil-to-lymphocyte ratio genes (Shon et al. 2023). The same study also reported elevated C-reactive proteins and monocytes in plasma of people consuming an ultra-processed high-fat and sugar diet, indicating IBD-like high-fat-diet-induced systemic inflammation (Shon et al. 2023).

High fat diets can reprogram innate immune cells via NOD-like receptor protein-3 signaling to promote systemic inflammation (Christ et al. 2018), and fat- and protein-rich diets triggered IL4, TNF α , and monocytes chemoattractant protein-1 and generated harmful peroxides (Tayyem et al. 2021; Keewan et al. 2020). Obesity is a significant link between type 2 diabetes and IBD severity with increased inflammation with decreased tight junction protein such as epithelial cadherin. These markers reflect epithelial permeability and inflammatory influx and retention within the colon (Francis et al. 2023). Therefore, unhealthy diets promote dysbiosis, inflammation, and mitochondria-induced oxidative stress.

Meanwhile, healthy diets rich in fiber, antioxidants, and anti-inflammatory metabolites (Fritsch et al. 2021; Rahmani et al. 2019) can increase SCFA-producing bacteria to metabolize dietary micronutrients and phytochemicals for IBD treatment (Caban and Lewandowska 2023; Guo et al. 2022; Facchin et al. 2020). Vegetables with high content of glucosinolates and polyphenols can promote microbiota diversity (Li et al. 2020; Wu et al. 2021), increase antioxidant activity, and reduce inflammation via increased dietary cysteine and microbiota production of SCFA (Li et al. 2015; Scarano et al. 2017; Holman et al. 2023; Barton et al. 2017; Kumar et al. 2022). SCFA can bind G-protein coupled receptors to alter inflammatory genes and increase the antioxidant activities of glutathione (Kaisar et al. 2017; Flint et al. 2012; Rom et al. 2020; Mardinoglu et al. 2015). Despite these benefits, there is a need for a comprehensive review of the preparation methods, models, and specific metabolic effects of cruciferous vegetables as a guide for translational research. Therefore, the discussion of this review will focus on the role of crucifers and their phytochemicals, which have bioactive properties against IBD development.

1.2.5 Search criteria

The search criteria for this review include articles published between 2003 and 2023 in PubMed and Web of Science. We found 625 articles based on the keyword's combination with inflammatory bowel disease, cruciferous vegetables, Brassicaceae, broccoli, inflammation, oxidative stress, microbiomes, microbiota, bioactive compounds, glucosinolates, isothiocyanates, polyphenols, flavonoids, gut barrier, and colon damage. Excluding criteria such as cancer, microbial neuroinflammation, pharmacological or drug interventions in IBD, a disease associated with cruciferous plants, and non-cruciferous sources of polyphenols and flavonoids which reduced the searched articles to 220 publications. After checking for content relevance, we finally selected only 35 primary articles for the discussion section by excluding reviews, inadequate studies based on the reported information on extraction methods, and applications not associated with this review's objectives.

1.3 Discussion

1.3.1 Cruciferous vegetables and bioactive compounds that mitigate IBD

Cruciferous vegetables belong to the mustard family, and are rich in bioactive compounds beneficial to human health (Zhang et al. 2018; Wang et al. 2022) via prebiotic, probiotic (i.e., when fermented), anti-inflammatory and antioxidant effects for regulating gut microbiota communities and alleviating pathogenic signals of IBD (Wu et al. 2019; Wu et al. 2023; Dolan and Chang 2017). They include broccoli and broccoli sprouts (*Brassica oleracea* variety *italica*), Brussels sprouts (*B. oleracea* var. *gemmifera*), cabbage (*B. oleracea* var. *capitata*), cauliflower (*B. oleracea* var. *botrytis*), collard greens (*B. oleracea* var. *viridis*), kale (*B. oleracea* var. *Acephala* or *B. napus*), bok choy (*Brassica rapa* cultivar *Chinensis*), mustard greens (*B. rapa* and *B. juncea*), turnips (*B. rapa*, var. *rapa*), the mustard Virginia pepperweed/peppergrass (*Lepidium virginicum*), arugula

(*Eruca vesicaria sativa*), and wasabi (*Wasabia japonica*, *W. koreana*, and *Eutrema japonicum*) (Zhang et al. 2018; Wang et al. 2022). The presence of glucosinolates (GSLs), flavonoids, and polyphenols in crucifers provide antioxidants to scavenge ROS and anti-inflammatory agents to alleviate IBD symptoms and heal intestinal damage (Cicio et al. 2022; Mueller et al. 2013).

Cruciferous diet can supply GSLs such as glucoraphanin (GLR), sinigrin, and glucoerucin, which are metabolized by plant-sourced myrosinase and gut microbiota-sourced enzymes into isothiocyanates (ITCs), such as sulforaphane (SFN) and erucin (see Figure 1.1), for intestinal and systemic health benefits (Tian et al. 2018; Saha et al. 2012; Zhang et al. 2023). SFN is effective against IBD by maintaining Nrf2 redox homeostasis, protecting tight junctions, recruiting commensal bacteria, and increasing antioxidants and anti-inflammatory markers (Wei et al. 2022; Geertsema et al. 2023; He et al. 2022). Broccoli sprouts possess more antioxidants, total phenolic content (TPC), and GSLs that provide ITCs than other crucifers (Amron NA 2018; Cartea ME, Francisco M, Soengas P, Ve...). Meanwhile, broccoli, kale, radish, and cabbage are flavonoids-rich with quercetin and cyanidin, and polyphenols like ferulic, sinapic, and caffeic acids for prebiotic, endothelial and epithelial barrier protection, antioxidant, anti-inflammatory and anti-adhesive potential to complement the effect of ITCs against IBD (Choe et al. 2018; Kim et al. 2021; Choi et al. 2016; Ayaz et al. 2008; Bian et al. 2018; Jeon et al. 2016). Importantly, cooking or other preparations of crucifers affect bioavailability of these phytochemicals (Figure 1.2), and where in the GI tract they will be absorbed. Future research should investigate the combined effect of phytochemicals from crucifers as a holistic approach to developing treatment or supplements for the clinical management of IBD.



Figure 1.1: Inflammatory bowel disease is a chronic condition characterized by inflammation, oxidative stress, and dysbiosis. Clinical, in vivo, and in vitro studies have shown that dietary cruciferous vegetables and their phytochemicals, such as glucosinolates (GSLs), isothiocyanates (ITCs), flavonoids, and polyphenols, may modulate inflammation, oxidative stress, dysbiosis, and gut barrier to alleviate inflammatory bowel disease. These dietary phytochemicals may promote probiotic bacteria, microbial homeostasis, gut health, as well as anti-inflammatory and antioxidant genes, as potential dietary management for inflammatory bowel disease patients.

1.3.2 *In vitro* studies

1.3.2.1 Broccoli and broccoli sprouts

Broccoli has been widely studied for its anti-inflammatory and antioxidant properties against *in vitro* IBD models (Table 1.1 and Figure 1.1). One study showed that broccoli-derived nanoparticles (BDN), made of broccoli juice and lipids, prevented dendritic cell (DC) activation by upregulating AMPK anti-inflammatory pathways, thereby reducing chemoattractant molecules like chemokine (C-C) receptors (CCR), chemokine (CXC) ligand (CXCL), and CCLs in the DCs and monocytes (Deng et al. 2017). Similarly, broccoli-derived vesicles rich in GLR, glucobrassicin and neoglucobrassicin decreased oxidative stress (Hossain et al. 2022) in Caco-2 cells (colon cells derived from a 72-year old man with colorectal adenocarcinoma). The SFN treatment transformed the white blood cell monocytes (M1) to anti-inflammatory macrophages (M2) (Sun et al. 2022; Pal and Konkimalla 2016), through IL10 and signal-transducer and activator of transcription-3 pathways to ameliorate inflammation in bone marrow-derived macrophages (Sun et al. 2022), and decreased COX-2 and iNOS activities and increased IL10 and CD36 against chronic inflammation in human cells (Pal and Konkimalla 2016; Fernandez-Prades et al. 2023).

Cold-pressed broccoli seed extracts (BSE) exhibited prebiotic, anti-inflammatory, and antioxidant properties against LPS-induced inflammation in J774A.1 mouse cancer cells (Choe et al. 2018). The treatment increased *Bacteroidetes/Firmicutes* ratio and production of SCFA and decreased commensal bacteria *Akkermansia spp.*, *Lactobacillus spp.*, and *Bifidobacterium spp.* (Choe et al. 2018). BSE increased the antioxidant activities of ORAC, HOSC, and ABTS scavengers and inhibited COX-2 and IL1 β cytokines above the control (Choe et al. 2018). The benefits of BSE may be attributed to the presence of GLR, Glucoerucin, and quercetin-3-glucoside.

1.3.2.2 Other cruciferous vegetables

Culture media containing cabbage juice exhibited *in vitro* anti-inflammatory and prebiotic properties associated with indole-3-carbinol, a metabolite of glucobrassicin (Jeong et al. 2023; Jeon et al. 2016). LPS RAW264.7 cells (macrophage-like, Abelson leukemia virus-transformed cell line derived from BALB/c mice) were co-cultured with vegetable waste from green and kimchi cabbage. The kimchi inhibited 20% of IL6 activities more than green cabbage. However, both types of cabbage had similar inhibitory effects against LPS-induced nitric oxide inflammation. Furthermore, kimchi decreased *E. coli* significantly, while green cabbage had more effect against *S.aureus* (Jeong et al. 2023).

The cold-water extract of cauliflower exhibited higher antioxidant activities of DPPH scavenger, while the ethanol extract possessed more flavonoids and polyphenols than both hot and cold water extracts (Bhatt et al. 2020). Furthermore, all three extracts had prebiotic effects and promoted the growth of six *Lactobacilli* strains. Only hot and cold-water extract significantly increased *L. acidophilus* microbial flora (Bhatt et al. 2020), which can promote a healthy gut.

One study identified nine phenolic acids in kale, with ferulic and caffeic acids being the most abundant (Ayaz et al. 2008). In the study, phenolic fractions of kale increased DPPH scavengers and decreased pathogenic bacteria, *S. aureus* and *E. coli* (Ayaz et al. 2008). An ethanolic extract from kale inhibited LPS-induced inflammation in RAW264.7 macrophages and relevant cytokines: IL6, iNOS, TNF α , and TLR-4 (Raychaudhuri et al. 2023). In a similar study, kale digesta rich in phenolic acids inhibited LPS and TNF α -induced intestinal epithelial cell inflammation and upregulated catalase, GSH, and superoxide dismutase antioxidant levels against cellular oxidative stress (Kaulmann et al. 2016).

One study investigated different radish extracts with chloroform, hexane, butanol, ethyl acetate, and water-soluble fraction on LPS-induced inflammation in RAW264.7 macrophages. The 100 µg/mL chloroform extract exhibited the most significant inhibition against NFκB, COX-2, iNOS, IL6, and TNFα levels. Interestingly, the treatment also prevented platelet aggregation by decreasing cellular prostaglandin E-2 concentration (Park and Song 2017). Similarly, radish sprouts ethanolic extract (RSE) decreased IL6 and chemoattractant protein-1 levels in monocytes: the 100µg/mL decreased IL1β and TNFα proteins the most, but both 50 and 100µg/mL doses inhibited iNOS. The RSE 100µg/mL significantly inhibited NFκB protein by decreasing its association with inflammatory subunits, p-IκBa and p65, while increasing the expression of the inhibitory subunit, IκBa (Kim et al. 2021).

Wasabi, a Japanese and Korean crucifer, exhibited anti-inflammatory properties and may repair intestinal barriers. Wasabi extracts co-cultured with LPS-treated macrophages and Caco-2 cells inhibited NFκB and decreased IL1β and IFN-γ levels, and increased the expression of tight junction proteins zonula occludens-1 (ZO-1) and claudin, but not occludin, in Caco-2 cells (Kang et al. 2017). In conclusion, these in vitro studies suggest the beneficial effects of cruciferous vegetables through prebiotic, anti-inflammatory, antioxidants, and gut barrier protective mechanisms, determined primarily by the crucifer's preparation, bioactive compounds, dosage, and treatment period (See Table 1.1, Figure 1.1 & 1.2).

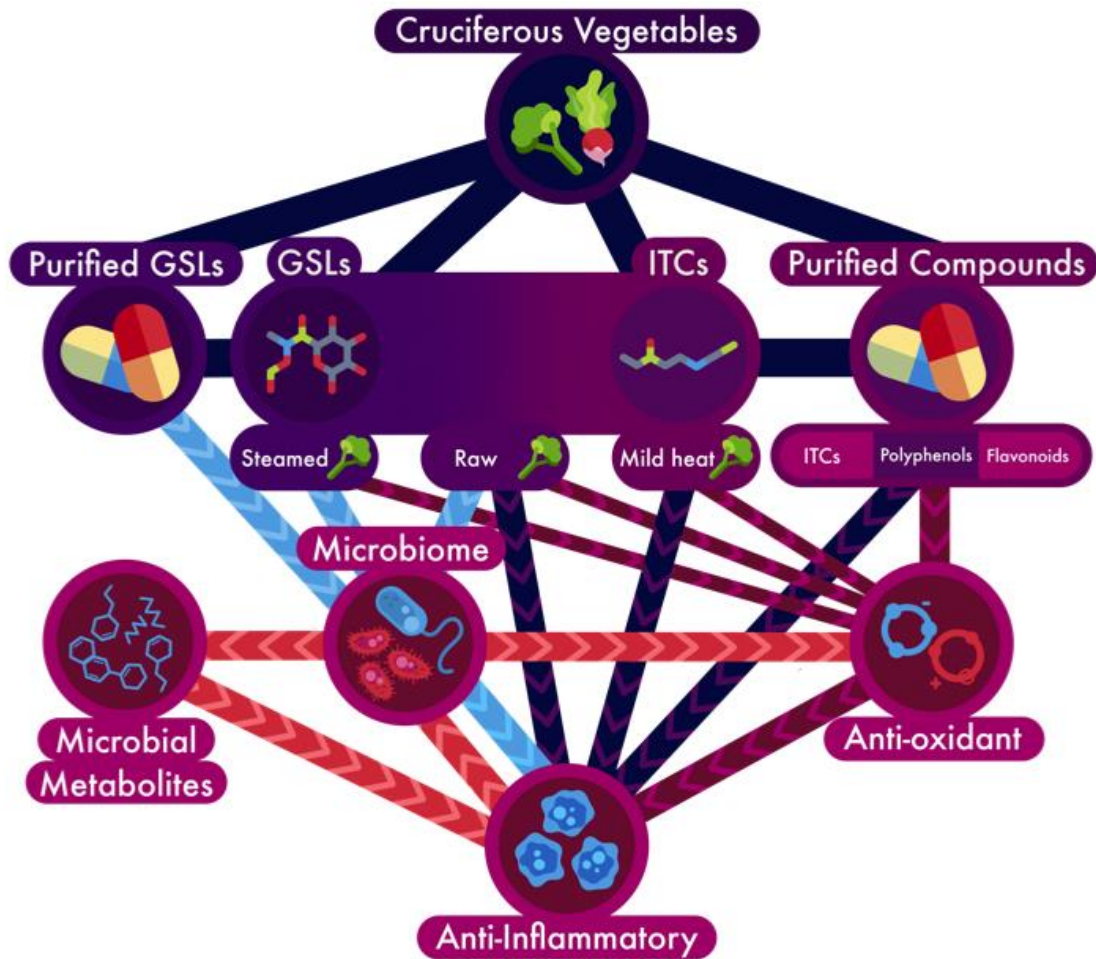


Figure 1.2: Cruciferous vegetables or their purified compounds can ameliorate inflammatory symptoms through multiple pathways. Fiber, glucosinolates (GSLs), isothiocyanates (ITCs), flavonoids, and polyphenols, can reduce inflammation and immune activation, oxidative stress and barrier damage, and can promote functional microbial communities. Each pathway has direct and indirect benefits.

1.3.3 *In vivo* studies

Similar to the findings from *in vitro* studies, broccoli has been reported to have anti-inflammatory, antioxidant, and prebiotic effects against IBD in animal models (see Table 1.2 and Figure 1.2). Both the UC and CD models use chemical triggers or genetic knockouts. The zymosan-mouse is a model of generalized gut inflammation using colon injection of zymosan to enhance the regeneration of immune-specific receptors for colitis and mucosal damage symptoms.

Similarly, a generalized inflammation model is made using AHR, which is a ligand-activated transcription factor of the aryl hydrocarbon receptor with high ligand affinity or sensitivity in the Ahrb/b mice model (alleviates inflammation) and low ligand affinity or sensitivity in the Ahrd/d model (promotes inflammation).

The DSS mouse or rat is the most commonly used UC model, with dextran sulfate sodium in drinking water used to chemically induce colitis with pathologies similar to human UC. The DNBS rat model uses intra-rectal administration of dinitrobenzene sulfonic acid to induce diet- and stress-associated inflammation. MDR1a^{-/-} mice are a UC model with genetically deleted multiple drug resistance genes to develop colitis spontaneously. Rag1^{-/-} mice are a recombination activating gene1 knock-out mouse model for chronic gut inflammation and fatal microbial infection. The IL10-knockout is the most popular immunological model for CD development. The TNBS rat model uses intra-rectal administration of trinitrobenzene sulfonic acid to long-lasting pathologies and clinical symptoms of CD through the NOD2 pathway. In addition to these models to generate colitis, these mice and rats can be associated with human microbiota to assess gut microbial disorder.

1.3.3.1 Broccoli and broccoli sprouts

A study reported the effect of a broccoli diet rich in SFN and GLR against oxidative stress and inflammation in DSS-mice. The diet decreased pathological score and TNF α , IL1 β , and IL18. Meanwhile, it increased AMPK and PGC-1 α pathways and promoted Nrf2, HO-1, and 8-hydroxydeoxyguanosine (8-OHDG) activities against oxidative stress and DNA damage within the colon (Tian et al. 2022). A similar anti-inflammatory effect was observed in DSS-mice fed raw and lightly cooked broccoli diets (Wang et al. 2018). Both diets decreased proinflammatory levels

of IL6 and CCR2 but not TNF α in the colon, even though cooked broccoli had low SFN levels because myrosinase was inactivated and thus GLR conversion is reliant on gut bacteria. The diets improved mucosal regeneration and decreased neutrophil infiltration, disease activity index (DAI), and colonic damage scores. Interestingly, increased levels of tight junction proteins such as claudin-2, occludin, and ZO-1 and decreased VCAM-1 level may restore epithelial tight junction and risk of IBD flare (Wang et al. 2018). Though this study confirmed that broccoli preparations can affect the immediacy of SFN bioavailability (Li et al. 2013), cooking, which inactivates myrosinase and preserves GLR, can utilize gut microbiota to convert it to SFN directly in the colon (Zhang et al. 2023) and other phytochemicals in any preparation could enhance the beneficial effects observed in cooked broccoli (Wang et al. 2018).

SFN from broccoli increased IL10 levels and inhibited IL6 and TNF α activities via signal-transducer and activator of transcription-3 and Nrf2 pathways in DSS-mice (Sun et al. 2022; He et al. 2022). The prebiotic effect of SFN treatment upregulated commensal bacteria such as *Bifidobacterium* and *Lactobacillus* bacteria in DSS mice (He et al. 2022), species which can metabolize GLR for SFN and SFN-N acetylcysteine bioavailability (Wu et al. 2023), and increased protective epithelial barrier proteins such as ZO-1, occludin, and claudin. In another DSS mouse model, *Bifidobacterium* increased anti-inflammatory IL10 levels, inhibited TLR4, and decreased TNF α , IL1 β , and IL8 cytokines in colon tissues. *Bifidobacterium bifidum* treatment decreased the pathogenic colonization of *Streptococcus* and *Enterococcus* and increased beneficial *Actinobacteria* to alleviate dysbiosis (Shang et al. 2022).

Broccoli is a rich source of aryl hydrocarbon receptor (AHR) in the gut of mice that are sensitive to specific environmental toxicants and develop mucosal disorders and GI tumors, *Ahrb/b*, or the less sensitive, *Ahrd/d* mice (Hubbard et al. 2017). Broccoli diet increased duodenal

AHR-associated cytochrome P450, family 1, subfamily A, polypeptide 1 (Cyp1a1) and decreased IL1 β , IL6, prostaglandin-endoperoxide synthase (Ptgs), CXCL5 levels and increased IL10 mainly in *Ahrb/b* mice to abrogate inflammation (Hubbard et al. 2017). The broccoli diet was associated with beneficial bacteria, such as *Actinobacteria* and *Alistipeds*, and metabolic pathways, such as those involved in drug metabolism, valine/leucine/isoleucine biosynthesis, vitamins, and cofactors. At the same time, RNA seq analysis revealed Reg1, Reg2, Tiff2, and CCL28 genes for gut barrier homeostasis, cell cycle regulation, cyclins, and checkpoints (Hubbard et al. 2017). Thus, a broccoli diet may prevent barrier damage and DNA deregulation associated with intestinal stress.

Broccoli seed extract (BSE) exhibited prebiotic, anti-inflammatory, antioxidant, and tight junction benefits in DSS-mice. BSE promoted beneficial bacteria, such as species of *Lactobacillus*, *Bifidobacterium*, and *Alistipeds*, to increase SCFA production (Wu et al. 2023). The BSE treatment decreased the oxidative level of malondialdehyde and increased the antioxidant levels of superoxide dismutase and GSH, inhibited inflammatory cytokines such as IL1 β , IL6, and TNF α , and increased anti-inflammatory IL10. The diet protected gut barriers by increasing claudin-1, occludin, and ZO-1 levels in the colon's tight junctions (Wu et al. 2023). Similar prebiotic and anti-inflammatory effects of freeze-dried broccoli decreased inflammation, histologic injury score, and pathogenic bacteria such as *E. coli* and *Enterococcus* in the *mdr1a*^{-/-} mice model which lack a multiple drug resistance gene and spontaneously develop colitis. A 10% broccoli diet induced beneficial cecal microbial communities which increased SCFA richness, such as butyric and propionic acids (Paturi et al. 2012).

Raw broccoli extract did not alleviate inflammation and oxidative stress in DSS-mice (Mueller et al. 2013), but interestingly, broccoli juice decreased serum IL8 levels to alleviate

intestinal and systemic inflammation in DSS-mice (Samuel et al. 2015), again highlighting the importance of preparation's effect on symptoms. Meanwhile, BDN increased AMPK to inhibit DCs and decreased mucosal inflammatory score. The colon level of IL10 increased, but TNF α , IL17A, and interferon-gamma (IFN- γ) were decreased in DSS-mice. The study highlighted the role of SFN in activating AMPK and transforming DCs from immunogenic types to regulatory cells in the DSS and Rag1^{-/-} mice (Deng et al. 2017).

Meanwhile, broccoli sprouts showed better effects against IBD due to higher GLR and SFN content. A steamed broccoli sprouts diet inhibited TNF α , IL1 β , and IL6 and promoted bacteria richness such as *Bacillota* (formerly *Firmicutes*), *Pseudomonadota* (formerly *Proteobacteria*), *Bacteroides*, and *Verrucomicrobiota* against dysbiosis and IBD in DSS-mice (Holman et al. 2023). Microbial hydrolases and commensal microbiota promoted the beneficial effects of SFN (Li Y, Zhang T, Holman J, et al. 2022) and SCFA production and decreased colonic ulceration (Zhang et al. 2023). Interestingly, eating broccoli sprouts early in life can improve microbiota richness. The study used IL10-knockout mice as a CD model and found higher serum SFN and microbial diversity in young mice than in adult mice. The diet decreased IBD symptoms, such as diarrhea, fecal blood, and pathobiont bacteria like *E. coli* and *Helicobacter*, to alleviate dysbiosis and inflammation (Holcomb et al. 2023).

1.3.3.2 Other cruciferous vegetables

Brussels sprouts exhibited prebiotic effects similar to broccoli sprouts, as reported in human microbiota-associated rats with improved gut microbiota diversity with increased commensal bacteria such as *Bifidobacterium* and *Lactobacillus* (Humblot et al. 2005) and β -glucuronidase for SCFA production against intestinal toxicity and oxidative stress (Humblot et al.

2004). Meanwhile, broccoli sprouts and bok choy increased the expression of antioxidants such as Nrf2, NADH-Quinone oxidoreductase 1, Gstm1, Srxn1, and GPx2 to improve colitis symptoms (Lippmann et al. 2014).

Red cabbage alleviated colitis and intestinal inflammation by decreasing IL6, IL1 β , TNF α , iNOS and COX-2 levels in DSS-mice (Kim et al. 2018). The juice extracts increased microbiota diversity and *Bacteroidetes/Firmicutes* ratio due to the richness of cyanidin, a major flavanol from crucifers (Wu et al. 2023). Interestingly, *Lactobacillus* isolated from Chinese cabbage increased IL10 anti-inflammatory activity against colitis in DSS-mice (Jo et al. 2016). Kale exhibited similar anti-inflammatory and prebiotic effects in DSS mice. Freeze-dried powder of kale improved DAI scores and restored colon length. The diet also decreased inflammatory score, NFkB, IL6, IL1 β , TNF α levels, and macrophage infiltration marker F4/80. Interestingly, kale promoted gut barrier integrity by increasing claudin-1 and occludin, decreased pathogenic *Pseudomonadota* (formerly *Proteobacteria*) such as *E. coli* and *Enterobacter* by 13%, and increased beneficial *Bacillota* (formerly *Firmicutes*) (Raychaudhuri et al. 2023).

Radish has antioxidant, anti-inflammatory, and prebiotic benefits to alleviate IBD. Water extract of radish (RWE) reversed colitis and decreased the rats' body weight, colon length, DAI, and inflammatory damage scores. The diet suppressed inflammation and epithelial adhesion molecules by decreasing IL1 β , TNF α , iNOS, NFkB, monocytes chemoattractant protein-1, and ICAM-1 levels in the colon. The RWE increased GSH and decreased malondialdehyde levels to attenuate oxidative stress (Choi et al. 2016). Comparably, ethanol extract of radish decreased colon atrophy, inflammation, and prostaglandin E-2 platelet aggregation and improved microbiota diversity by increasing *Bacteroidota* (formerly *Bacteroidetes*) and *Akkermansia* spp. and decreasing *Pseudomonadota* (formerly *Proteobacteria*) such as *E. coli* and *Enterobacter* spp. The

high content of sinapic acid, a polyphenol, was associated with the benefits of radish (Kim et al. 2021). In contrast, the anti-inflammatory effect of fermented black radish was attributed to the presence of α -linolenic acid and omega-6 acid (Kim et al. 2020).

Virginia pepperweed alleviated colitis and inflammation in the 2,4-dinitrobenzene sulfonic acid (DNBS) colitis rat. Its ethanolic extract was effective against IBD when administered intraperitoneally (i.p) or orally. However, only the i.p treatment completely restored weight loss and diarrhea and reversed intestinal damage by decreasing ulcers, edema, and inflammatory cells. Interestingly, both i.p and oral treatments alleviated bloody stool, while only the i.p decreased inflammatory levels of MPO, CXCL2, IL1 β , and TNF α (Cruz-Muñoz et al. 2022). This study established the differential benefits of the two administration routes and the need to investigate further the various routes of cruciferous intervention in IBD studies.

A wasabi diet decreased colon inflammatory cells and serum TNF α levels to alleviate intestinal and systemic inflammation. Additionally, the diet reduced IBD-associated pain and anxiety behaviors in mice due to high sinapic acid content (Park et al. 2017). Similar effect was observed with sinigrin, a polyphenol from wasabi, inhibited NF κ B and decreased inflammatory IL1 β and TNF α levels. Interestingly, the compound also repaired the colonic barrier and increased the tight junction protein, ZO-1 (Kang et al. 2017). In conclusion, these in vivo studies suggest that cruciferous vegetables possess prebiotic, anti-inflammatory, antioxidant, and gut barrier protective benefits in animal models of IBD based on the preparation method, bioactive compounds, dosage, and treatment period (See Table 1.2, Figure 1.1 & 1.2).

1.3.4 Clinical studies

There are few clinical studies in the literature; here we highlight the effects of various crucifer preparations on metabolites' bioavailability and potential antioxidant, anti-inflammatory, and prebiotic benefits, as shown in Table 1.3 and Figure 1.1.

1.3.4.1 Broccoli and broccoli sprouts

In a randomized crossover clinical study, fresh and frozen broccoli soup had differential SFN bioavailability and metabolism. Healthy subjects who ate the fresh broccoli soup had ten times more SFN in their plasma and urine than those who ate frozen diets (Saha et al. 2012). Interestingly, the fresh broccoli soup had higher erucin and SFN conjugates in urine and fecal samples, which may be due to the gut microbial metabolism of GLR (Saha et al. 2012). Similarly, participants who ate cooked broccoli with mustard seed powder had increased urine content of SFN and SFN-NAC four times more than broccoli alone (Okunade et al. 2018) due to exogenous myrosinase from mustard powder.

A blinded crossover study on broccoli sprouts and supplements revealed differential SFN and ERN bioavailability (phase 1: 150 μ moles glucoraphanin and 71 μ moles glucoerucin; phase 2: 121 μ moles glucoraphanin and 40 μ moles glucoerucin) (Clarke et al. 2011). Participants who ate cooked sprouts showed maximum SFN and ERN levels in their plasma and urine after 3 and 6 hours, respectively, while those who ate supplements had SFN and ERN peaks after 6 and 12 hours (Clarke et al. 2011). Participants who ate sprouts had higher urine and plasma levels of SFN-Cys, SFN-NAC, ERN-Cys, and ERN-NAC. Meanwhile, supplements increased urine SFN/ERN ratio more than cooked sprouts, which may indicate more benefits (Clarke et al. 2011). Similarly, participants who ate myrosinase-treated broccoli sprouts had maximum urine and plasma SFN

levels 3-6 hours ahead of those who had cooked broccoli, again due to the immediate availability of SFN in raw or treated sprouts but the reliance on gut microbes to produce SFN in the colon using cooked sprouts. SFN-Cys and SFN-CG were majorly expressed at 3-6 hours, while SFN-NAC was abundant after 12 hours. However, two doses of sprouts diet at 12-hour intervals had three times more SFN than a single dose per day. Meanwhile, broccoli sprouts, and myrosinase-treated diets increased HDAC and HQ1 antioxidant levels against DNA oxidation at two-dose consumption. Only the sprouts diet increased p21 gene expression, which activates the Nrf2 antioxidant response. These studies revealed the importance of preparation, dose, and time on broccoli's benefit against oxidative stress (Atwell et al. 2015).

1.3.4.2 Combined effect of crucifers

In a randomized crossover study, ten healthy adults who consumed 200g of cooked broccoli and 20g of fresh winter radish for 17 days showed microbial diversity in their feces and metabolite diversity in their urine samples. The broccoli diet increased participants' urinal *Bacteroidetes/Firmicutes* ratio by 37% to promote gut diversity with increased GSL metabolites, especially in subjects with low BMI <26 kg/m², but the control diet decreased it by 5%, (Kaczmarek et al. 2019). Broccoli consumption also increased *Bacteroides* spp. by 8%, which is necessary for GSL microbial interconversion to ITCs (Kaczmarek et al. 2019). A similar study reported a significant increase in plasma and urine metabolites of SFN and ERN after 4-18 hours of consuming 200g of cooked broccoli diet (providing 147.6 μmol of glucoraphanin and 3.6 μmol of glucoerucin) in individuals with high BMIs >26 kg/m² compared with individuals with low BMIs (Charron et al. 2020). Another randomized crossover study examined the prebiotic effect of broccoli sprouts, radish sprouts, cauliflower, and cabbage as basal diets of low fruits and

vegetables; a single diet of 7g cruciferous vegetables; a double diet of 14g cruciferous vegetables; a mixed diet of 7g cruciferous and 4g apiaceous vegetables (Li et al. 2009). The double cruciferous diets had higher SFN levels associated with beneficial gut microbiota such as *Bacteroidota* (formerly *Bacteroidetes*) to *Bacillota* (formerly *Firmicutes*) ratio and *Actinobacteria* in healthy subjects (Li et al. 2009). A similar study revealed a differential prebiotic effect of low (0.16 mmol GSLs) and high (2.7 mmol GSLs) broccoli and cauliflower diets. Participants who ate a high broccoli diet had microbial diversity with increased *Lactobacillus species*, which may help protect against intestinal damage. In contrast, subjects who consumed low broccoli or only a cauliflower diet had no differential beta diversity (Kellingray et al. 2017), perhaps due to the low serving levels.

Consuming crucifers such as broccoli, cabbage, cauliflower, Chinese cabbage, arugula, watercress, horseradish, mustard sauce, and wasabi may have both beneficial and adverse effects in Crohn's patients, via the expression of genes associated with oxidative stress, inflammation, and gut barrier damage (Laing et al. 2013). This study, conducted in New Zealand, reported interesting correlations between gene expression and self-reported adverse effects of crucifers, including broccoli diet and GPX3, IL23R, TNF α , and OCTN1/2; cabbage and GPX2, GPX3, cadherin-29, ICAM1, signal-transducer and activator of transcription-3, IL23R, IL12B, TLR9 and claudin-12; cauliflower and GPX3, TNFSF15, cadherin-29, Janus kinase-2, nucleotide-binding oligomerization domain-2 and OCTN1/2; Chinese cabbage and IL23R and claudin-12; rocket arugula with IL6, ICAM1, GPX3 and claudin-2; watercress and ICAM1 and TNFSF15; mustard greens and IL6, ICAM1, nucleotide-binding oligomerization domain-2, GPX3, GPX2, IL12B, TNFSF15 and OCTN2; horseradish and OCTN1/2; and wasabi correlated with IL12B and OCTN2 (Laing et al. 2013). For example, GPX3, a gene with protective effect against oxidative stress, had

beneficial effects with broccoli and cauliflower diets but had an adverse effect with mustard sauce. Meanwhile, NOD2, a gene important for bacterial inflammatory response, had beneficial effects with mustard powder but had an adverse effect with cauliflower. Similarly, CDH29, a gene important for barrier junction organization, had a beneficial effect with cabbage but an adverse effect with cauliflower. This study revealed both positive and negative nutrigenomic effects of crucifers and the need for adequate experimental measures in cruciferous and IBD intervention. Further information, such as dietary data, lifestyle, specific dose, and preparation of the vegetables, could be more helpful in understanding the gene-diet relationship. In conclusion, the clinical studies suggest the importance of crucifers' preparation method, presence of bioactive compounds, dosage, and treatment period on their respective prebiotic, anti-inflammatory, and antioxidant benefits in healthy and CD patients (See Table 1.3, Figure 1.1 & 1.2).

1.3.5 The role of metabolomics tools in cruciferous dietary IBD treatment

Metabolomics analysis is an effective tool for exploring dietary interactions with genetics, environment, gut microbiota, and signaling pathways (Ho et al. 2019; Barnett et al. 2014; Tiffany et al. 2021). Analyzing metabolite concentrations can identify pathophysiological pathways relevant to clinical IBD treatment (Gallagher et al. 2021). A metabolomics profiling showed a positive correlation between dietary metabolites and the pathogenic expression of microbes: there were increased amino acids and Pseudomonadota (formerly proteobacteria) species and decreased riboflavin and Faecalibacterium species in children with CD dysbiosis compared with non-dysbiosis children (Heinken et al. 2021).

Existing metabolomics have demonstrated the importance of dietary metabolites derived from cruciferous vegetables as modulators against IBD. For example, untargeted metabolomics

revealed the differential expression of antioxidants and polyphenolic metabolites in raw and lactic acid bacteria (LAB)-fermented broccoli puree, using two strains of LABs, *Lactiplantibacillus plantarum* (LAB1) and *Lactiplantibacillus pentosus* (LAB10), relevant in phytochemical metabolism, which were isolated from fermented broccoli (Hou et al. 2023). The LAB-fermented broccoli had more antioxidant activities than the unfermented broccoli, after 60 hours, with 20% increase in DPPH activities and 70% increase in FRAP and ABTS capacities. Also, the LAB-fermented broccoli had abundant phenolic metabolites after 24 and 48 hours, especially tryptophan and kaempferol (Hou et al. 2023). Tryptophan alleviated clinical IBD symptoms of fatigue and inflammation (Truyens et al. 2022), and kaempferol upregulated anti-inflammatory, antioxidants, and barrier protection markers (Bian et al. 2020). This metabolomic analysis suggests that LAB fermentation may improve phenolics bioavailability and antioxidant benefits of broccoli intervention against IBD (Hou et al. 2023).

A comprehensive metabolomic and microbiota profiling revealed an important correlation between indole-3-carbinol, glucobrassicin metabolite, *Roseburia species*, a butyrate-producing bacteria and IL22, an anti-inflammatory cytokine, for gut protection against colitis (Busbee et al. 2017). Interestingly, decreased butyrate-producing bacteria, such as *Faecalibacterium* and *Roseburia species*, have been identified in humans suffering from constipation (Zhuang et al. 2019). Human fecal samples co-cultured with digesta from broccoli and brussels sprouts revealed upregulated dietary metabolites. Metabolites, phenolic acids, and flavonoids, such as azelaic acid, sinapic acids, suberic acids, coumaric acids, kaempferol, flavonoid-O-3-glucosides, and indole acetic acids, showed positive relationships with both beneficial and detrimental microbiota (Bouranis et al. 2022). *Bifidobacterium* spp. were increased, which helps GLR microbial

transformation to SFN, while the *Intestinibacter* and *Clostridiaceae* genera were mostly unannotated (Bouranis et al. 2022).

It is essential to employ appropriate metabolomics analysis to efficiently identify metabolites with low sensitivity. For example, untargeted metabolomics identified the presence of glutathione metabolites in healthy human plasma samples, which was associated with the antioxidant benefits of the broccoli diet (Atwell et al. 2015). However, glutathione and its precursors, glutamine and cysteine, were transiently downregulated at 6 and 12 hours after the broccoli diet (Housley et al. 2018), while fatty acid metabolites associated with lipid metabolism were consistently downregulated (Housley et al. 2018). There is a need for further investigation into this physiological effect of the broccoli diet against intestinal lipid peroxidation. Untargeted metabolomics did not reveal SFN and its metabolites in the urine of individuals who consumed 200g of raw broccoli (Sun et al. 2020). However, target metabolomics identified SFN, SFN-CYS, SFN-NAC, SFN-GSH, and other metabolites associated with SFN precursors mercapturic pathway in the same samples (Sun et al. 2020). Similarly, a sensitive targeted LC/MS metabolomics method quantified plasma and urine SFN in humans after eating a 200g broccoli diet. The authors synthesized SFN and mercapturic metabolites in the lab. They identified increased SFN, SFN-CYS, SFN-NAC, and SFN-GSH in specific quantities during intraday and interday plasma and urine measurements compared with control after the four-week broccoli diet (Hauder et al. 2011). Therefore, metabolomics profiling may be a significant tool to better understand the importance of dietary crucifers for gut health.

1.3.6 Literature gaps, limitations and perspectives for future work

The central gap in this literature review highlights the need for substantial publications on cruciferous vegetables' translational and clinical effects on IBD management, as searching for clinical IBD studies generated articles primarily about immunosuppressant interventions and steroid therapies. Nutritional researchers may find it challenging to recruit IBD participants for studies if the medical institutions do not appreciate nutritional management of IBD with fibers such as cruciferous vegetables. Enlightening clinicians about the potential results of crucifers in IBD management by highlighting specific pathways of action would further encourage more participation in clinical studies. Proper documentation of cruciferous methods of preparation, extraction of biochemicals, dosage, application, and mechanisms of action in vitro and in vivo models will further encourage clinical studies and provide adequate information to the public and clinicians about the potential benefits of cruciferous consumption in IBD management.

1.4 Conclusion

This review highlights cruciferous vegetables and phytochemicals with potential antioxidants, anti-inflammatory, and prebiotic effects that may prevent or alleviate IBD. Although many studies suggest that GSLs, ITCs, polyphenols, and flavonoids may benefit IBD patients, there is a limited report on the mechanisms of polyphenols and flavonoids. Nonetheless, this information shows that flavonoids and phenolic compounds have beneficial properties that may work with GSL-derived SFN and conjugates to restore gut health and prevent IBD. The data in this review suggests broccoli and sprouts are the most widely studied crucifers with high bioactive compounds associated with the most reported IBD benefits. Future research should carefully consider diet preparation, dose and mode of administration, and intervention timeline as crucial factors that could impact crucifers' benefit in IBD research. Metabolomics is one of the significant

tools currently being explored to identify and correlate the influence of dietary intervention on diseases. We recommend annexing metabolomics tools to investigate critical metabolites from cruciferous vegetables and their association with IBD pathways. This holistic approach may yield groundbreaking results for the clinical development of cruciferous vegetables as supplements and treatment recommendations for IBD patients.

Table 1.1: Potential benefits of Cruciferous vegetables in IBD in vitro models.


| Cruciferous vegetables | Image | Bioactive compounds | Preparation | Dose | Treatment period | Pathways | Benefits | Model | References |
|------------------------|---|---|----------------------|--------------------------------------|----------------------------------|---|---|------------------------------------|---------------------------|
| purified SFN | NA | SFN | purified SFN | 10,1 and 0.1 $\mu\text{mol/L}$ | N.R. | IL10 activation of STAT3 | Anti-inflammatory | Bone marrow derived macrophages | (Sun et al. 2022) |
| Broccoli |  | SFN, lipids | Edible nanoparticles | N.R., Average diameter of 32.4 nm | 2 and 3 hrs | CCRs, CXCLs and CCLs | Anti-inflammatory | DCs and monocytes | (Deng et al. 2017) |
| | | Glucoraphanin, Glucoerucin, Neoglucobrassicin | Nano-vesicles | 5 and 22 $\mu\text{g/mL}$ | 24 hrs | Hydrogen peroxide | Anti-oxidative | Caco-2 and NCI-H441 cells | (Hossain et al. 2022) |
| | | SFN | N.R. | 100, 50, 20,10 and 1 μmol | 24 hrs | COX-2 and iNOS, IL10 and CD36 | Anti-inflammatory | Immortalized human blood monocytes | (Pal and Konkimalla 2016) |
| | | Glucoraphanin, Glucoerucin, Quercetin-3-glucoside | Cold pressed seed | 0.1% (v/v) | 0, 2, 4, 5, and 6 hrs time point | <i>Bacteroidota/Bacillota</i> ratio; ORAC, HOSC and ABTS scavenging activities. COX-2 and IL1 β cytokines | Antioxidant, Prebiotic, Anti-inflammatory | J774A.1 macrophages | (Choe et al. 2018) |

Table 1.1 continued







| | | | | | | | | | |
|--------------------------|---|--|---|---------------------------|--------|--|---------------------------------------|-----------------------------------|----------------------------|
| Green cabbage and kimchi |  | Polyphenols | Freeze dried | 0.2, 0.5, 1 and 2 mg/ml | 24 hrs | MCP-1, IL1 β and TNF α , E. coli, S. aureus | Probiotic (kimchi), Anti-inflammatory | LPS-macrophages | (Jeong et al. 2023) |
| Cauliflower |  | Polyphenols, Flavonoids | Ethanollic, hot and cold-water extract | 1% and 50%(w/w) | 24 hrs | DPPH, Lactobacilli | Antioxidant, Prebiotic | <i>Lactobacilli strains</i> | (Bhatt et al. 2020) |
| Kale |  | SFN, Beta Carotene | Ethanollic extract | 100 μ g/mL | 28 hrs | IL6 and TNF α | Anti-inflammatory | LPS-macrophages | (Ayaz et al. 2008) |
| | | Polyphenols: Ferulic and Caffeic acids | Frozen powder | 100 μ L | 18 hrs | DPPH, E. coli and S. aureus suppression | Antioxidant, Antimicrobial | Microorganisms | (Raychaudhuri et al. 2023) |
| | | Total Polyphenol and Vitamins C | Freeze dried powder and <i>in vitro</i> digestion | 27mg /100g of polyphenols | 18 hrs | Catalase, GSH and SOD | Antioxidant | Caco-2, HT-29-MTX and THP-1 cells | (Kaulmann et al. 2016) |

Table 1.1 continued

| | | | | | | | | | |
|----------------|--|----------------------------|--|-----------------------------|--------|--|--------------------------------------|----------------------------------|----------------------|
| Radish |  | Polyphenols | Chloroform, hexane, butanol, ethyl acetate and water-soluble fractions | 0, 1, 10, 100 and 200 µg/mL | 48 hrs | PGE2, NFκB, COX-2 and iNOS, TNFα, | Anti-inflammatory | LPS-macrophages | (Park and Song 2017) |
| Radish Sprouts |  | Polyphenol: sinapic acid | Ethanol extract | 10, 25, 50 and 100µg/mL | 4 hrs | NFκB, p-IκBα, IκBα, p65, iNOS, IL1β and TNFα | Anti-inflammatory | LPS-macrophages | (Kim et al. 2021) |
| Wasabi |  | Polyphenol: sinigrin acids | Ethanol extract | 100 and 500 µg/mL | 18 hrs | NFκB, IL1β, TNFα, ZO-1, and occludin | Anti-inflammatory and barrier repair | Caco-2 cells and LPS-macrophages | (Kang et al. 2017) |

This review suggests that the effects of cruciferous vegetables depend on the preparation and presence of bioactive compounds, which can alleviate inflammation, oxidative stress, dysbiosis, and gut barrier damage pathways during in vitro inflammatory bowel disease models. NA means not available. N.R means data not reported in the article

Table 1.2: Potential benefits of Cruciferous vegetables in IBD in vivo models.


| Cruciferous vegetables | Image | Bioactive compounds | Preparation | Dose | Treatment period | Pathways | Benefits | Model | References |
|------------------------|---|---------------------|-------------------------|-------------------------|------------------|---|--------------------------------|--------------|--------------------|
| purified SFN | NA | SFN | purified compound | 10, 20 and 40 mg/kg | 14 days | IL10 activation of STATs | Anti-inflammatory | DSS mice | (Sun et al. 2022) |
| purified SFN | NA | SFN | purified compound | 2.5, 5, 10 and 20 mg/kg | 19 days | IL6 and TNF α , STAT3 and Nrf2, Bifidobacterium and Lactobacillus spp. | Prebiotic, Anti-inflammatory | DSS mice | (He et al. 2022) |
| Broccoli |  | SFN, GLR | purified | 600 ppm | 4 wks | IL1 β and IL18, AMPK and PGC-1 α , Nrf2, HO-1, 8-OHdG | Anti-inflammatory, Antioxidant | DSS mice | (Tian et al. 2022) |
| | | SFN | Raw and slightly cooked | 10%(w/w) | 2 wks | IL6, CCR2 and VCAM-1 | Anti-inflammatory | DSS mice | (Wang et al. 2018) |
| | | GLR, ITCs | Freeze dried | 4.1 mg/g | 7 days | NQO1 | Antioxidant | C57BL/6 mice | (Wu et al. 2019) |
| | | SFN | Seed extract | 370 mg/kg/day | 2 wks | Bifidobacterium spp., Nrf2 signaling | Prebiotic, Anti-inflammatory | DSS mice | (Wu et al. 2023) |

Table 1.2 continued

| | | | | | | | | | |
|--|--|----------------------|------------------|--------------|---------|--|---|---------------------------|-----------------------|
| | | Glucobrassicin | Freeze dried | 15%(w/w) | 24 days | AHR, Cyp1a1, IL1 β , IL10, IL6, PtgS and CXCL5, increased Actinobacteria and Alistipes | Prebiotic, Anti-inflammatory | Ahrb/b and Ahrd/d mice | (Hubbard et al. 2017) |
| | | GLR, SFN and SFN-NAC | Raw seed extract | 370mg/kg/day | 2 wks | IL1 β , IL6 and TNF α , IL10, SOD, GSH, MDA, claudin-1, occludin and ZO-1, Bifidobacterium and Alistipes, SCFAs | Prebiotic, Anti-inflammatory, Antioxidant | DSS mice | (Wu et al. 2023) |
| | | N.R. | Freeze dried | 10%(w/w) | 21 wks | histologic injury score, E. coli and Enterococcus spp. | Prebiotic, Anti-inflammatory | mdr1a ^{-/-} mice | (Paturi et al. 2012) |
| | | SFN | Crude extract | 4% | 12 days | NFkB, TNF α , IL10, MCP-1 and COX 2 | No significance | DSS-rat | (Mueller et al. 2013) |
| | | N.R. | Juice | 1.5mL | 7 days | IL8 | Anti-inflammatory | DSS mice | (Samuel et al. 2015) |

Table 1.2 continued


| | | | | | | | | | |
|------------------|---|-------------|--------------------------|-------------------------|----------------|---|------------------------------|--------------|----------------------|
| | | SFN, Lipids | Edible nanoparticles | Average diameter 32.4nm | 10 and 13 days | AMPK, IL10, TNF α , IL17A and IFN- γ | Anti-inflammatory | DSS mice | (Deng et al. 2017) |
| | | SFN, Lipids | Edible nanoparticles | Average diameter 32.4nm | 10 days | TNF α , IL6 and IL23 | Anti-inflammatory | Rag1-/- mice | (Deng et al. 2017) |
| Broccoli sprouts |  | GLR, SFN | Steamed and freeze dried | 10%(w/w) | 34 days | Bacillota, Pseudomonadota, Bacteroidota and Verrucomicrobiota; TNF α , IL1 β and IL6 | Prebiotic, Anti-inflammatory | DSS mice | (Holman et al. 2023) |
| | | SFN, GLR | Streamed | 5%(w/w) | 13 days | microbial hydrolase, Bacillota | Prebiotic | DSS mice | (Zhang et al. 2023) |

Table 1.2 continued




| | | | | | | | | | |
|---------------------------|---|---|-------------------------|-----------|-------|--|-----------------------------------|----------------------------------|------------------------|
| | | SFN | raw | 10% (w/w) | 2 wks | E. coli and Helicobacter | Prebiotic, Anti-inflammatory | IL10-KO mice | (Holcomb et al. 2023) |
| Broccoli sprouts and seed |  | GLR, Glucoiberin, Glucoerucin, SFN-lysine | powder | 100mg | 4 wks | Nrf2, NQO1, Gstm1, Srxn1 and GPx2 | Anti-inflammatory and antioxidant | DSS mice | (Lippmann et al. 2014) |
| Brussels Sprouts |  | GLR | Cooked and freeze dried | 10% (w/w) | 4 wks | Bifidobacterium and Lactobacillus | Prebiotic | human microbiota associated rats | (Humblot et al. 2005) |
| | | GLR | cooked | 10% (w/w) | 4 wks | B-glucuronidase, SCFA | Antioxidant, Prebiotic | human microbiota associated rats | (Humblot et al. 2004) |
| Bok Choy |  | Glucobrassicin, gluconapin, Progoitrin | powder | 100mg | 4 wks | AHR, Cyp1a1, Nrf2, NQO1, Gstm1, Srxn1 and GPx2 | Anti-inflammatory and antioxidant | DSS mice | (Lippmann et al. 2014) |

Table 1.2 continued








| | | | | | | | | | |
|----------------|---|--------------------------|---------------------|--------------------------|---------|---|--------------------------------|-------------------|----------------------------|
| Red Cabbage |  | Cyanidin 3,5-diglucoside | Freeze dried powder | 5% (w/w) | 2 wks | IL6, IL1 β , TNF α , iNOS, and COX-2 | Anti-inflammatory | DSS mice | (Kim et al. 2018) |
| Kale |  | SFN, Beta Carotene | Freeze dried powder | 4.5% (w/w) | 2 wks | NFkB, IL6, IL1 β and TNF α , claudin-1 and occludin, Bacillota | Prebiotic, Anti-inflammatory | DSS mice | (Raychaudhuri et al. 2023) |
| Radish |  | Polyphenol: sinapic acid | Water extract | 10, 40, 70 and 100 mg/kg | 7 days | GSH, MDA, IL1 β , TNF α , iNOS, NFkB, MCP-1 and ICAM-1 | Antioxidant, Anti-inflammatory | DSS and TNBS- Rat | (Choi et al. 2016) |
| Radish Sprouts |  | Polyphenol: sinapic acid | Ethanol extract | 10, 50 and 100 mg/kg | 14 days | NFkB, COX-2, iNOS, IL6, TNF α and PGE2, Bacteroidota, Pseudomonadota | Anti-inflammatory, prebiotic | DSS mice | (Kim et al. 2021) |

Table 1.2 continued

| | | | | | | | | | |
|---------------------|---|----------------------------|--------------------|------------------------|---------|---|-------------------|--------------|--------------------------|
| Black Radish |  | α -linolenic acid | Fermented | 30 and 60 mg/kg | 7 days | Histologic injury and colitis score | Anti-inflammatory | DSS mice | (Kim et al. 2020) |
| Virginia pepperweed |  | Polyphenols Flavonoids | Ethanollic extract | 3, 30, and 100 mg/kg | 4 days | MPO and CXCL2, IL1 β and TNF α | Anti-inflammatory | DNBS- rat | (Cruz-Muñoz et al. 2022) |
| Wasabi |  | Sinapic acid and ITCs | Ethanollic extract | 100, 200 and 400 mg/kg | 14 days | TNF α , Anxiety and pain test. | Anti-inflammatory | Zymosan-mice | (Park et al. 2017) |
| | | Polyphenol: sinigrin acids | Ethanollic extract | 100 and 500 μ g/mL | 7 days | NFkB, IL1 β , TNF α and ZO-1 | Anti-inflammatory | DSS mice | (Kang et al. 2017) |

This review suggests that the effects of cruciferous vegetables depend on the preparation and presence of bioactive compounds, which can alleviate inflammation, oxidative stress, dysbiosis, and gut barrier damage pathways during in vivo inflammatory bowel disease models. NA means not available. N.R means data not reported in the article.

Table 1.3: Potential benefits of Cruciferous vegetables in IBD clinical studies.


| Cruciferous vegetables | Image | Bioactive compounds | Preparation | Dose | Treatment period | Pathways | Benefits | Subjects | References |
|---------------------------|---|----------------------------|------------------|----------------------|------------------|--|---|--|-------------------------|
| BroccoMax supplement pill | NA | SFN, ERN, GLR, Glucoerucin | Supplement | Six supplement pills | 48 hours | SFN, SFN-CG and ERN-CG | SFN and ERN metabolites bioavailability | Healthy participants | (Clarke et al. 2011) |
| Broccoli |  | SFN, GLR | Fresh and Frozen | 100g | 5 days | SFN, glutathione, SFN-CG, SFN-Cys and SFN-NAC | SFN, ERN and SFN conjugates bioavailability | Healthy participants | (Saha et al. 2012) |
| | | SFN, SFN-NAC | cooked | 200g | 24 hours | SFN-NAC | SFN metabolites bioavailability | Healthy participants | (Okunade et al. 2018) |
| | | GSL metabolites | cooked | 200g | 18 days | Bacteroidota/ Bacillota ratio | Prebiotic | Healthy participants with high and low BMI | (Kaczmarek et al. 2019) |
| | | GSL metabolites | cooked | 200g | 17 days | SFN-Cys, SFN-NAC, SFN-GSH, ERN-Cys, ERN-GSH, ERN-NAC | SFN and ERN metabolites bioavailability | Healthy participants with high and low BMI | (Charron et al. 2020) |

Table 1.3 continued


| | | | | | | | | | |
|------------------|---|-----------------------------------|-------------------------------------|---------------------------------|---------------------------------|--|---|----------------------|--------------------------|
| | | GSL metabolites | Frozen and steamed | 300g and 84g | 2 wks | Lactobacillus species, microbial diversity | Prebiotic | Healthy participants | (Kellingray et al. 2017) |
| | | N.R. | N.R., self-reported consumption | N.R., self-reported consumption | N.R., self-reported consumption | GPX3, IL23R, TNF α , and OCTN1/2 | oxidative stress, inflammation, gut barrier | CD patients | (Laing et al. 2013) |
| Broccoli sprouts |  | SFN, ERN, GLR, Glucoerucin | Freeze dried, | 40 g | 48 hours | SFN-Cys, SFN-NAC, ERN-Cys and ERN-NAC | SFN and ERN metabolites bioavailability | Healthy participants | (Clarke et al. 2011) |
| | | SFN, SFN-Cys, SFN-CG, and SFN-NAC | Fresh or myrosinase treated extract | 200 μ mol/day | 24 hrs | P21, HDAC and HQ1 | Antioxidant | Healthy participants | (Atwell et al. 2015) |
| | | SFN | cooked | 45.7% (w/w) | 14 days | Bacteroidota, Bacillota, Actinobacteria | Prebiotic | Healthy participants | (Li et al. 2009) |

Table 1.3 continued




| | | | | | | | | | |
|-----------------|---|------|---------------------------------|---------------------------------|---------------------------------|--|---|----------------------|--------------------------|
| Cabbage |  | SFN | raw | 15.7% (w/w) | 14 days | Bacteroidota, Bacillota, Actinobacteria | Prebiotic | Healthy participants | (Li et al. 2009) |
| | | N.R. | N.R., self-reported consumption | N.R., self-reported consumption | N.R., self-reported consumption | GPX3, GPX2, cadherin-29, ICAM1, STAT3, IL23R, IL12B, TLR9 and claudin-12 | oxidative stress, inflammation, gut barrier | CD patients | (Laing et al. 2013) |
| Chinese cabbage |  | N.R. | N.R., self-reported consumption | N.R., self-reported consumption | N.R., self-reported consumption | IL23R and claudin-12 | inflammation, gut barrier | CD patients | (Laing et al. 2013) |
| Cauliflower |  | SFN | cooked | 36.4% (w/w) | 14 days | Bacteroidota, Bacillota, Actinobacteria | Prebiotic | Healthy participants | (Li et al. 2009) |
| | | GSL | Frozen and steamed | 84 g | 2 wks | microbial diversity | Prebiotic | Healthy participants | (Kellingray et al. 2017) |

Table 1.3 continued





| | | | | | | | | | |
|----------------|---|------|---------------------------------|---------------------------------|---------------------------------|--|---|----------------------|---------------------|
| | | N.R. | N.R., self-reported consumption | N.R., self-reported consumption | N.R., self-reported consumption | GPX3, TNFSF15, cadherin-29, Janus kinase-2, NOD2 and OCTN1/2 | oxidative stress, inflammation, gut barrier | CD patients | (Laing et al. 2013) |
| Horseradish |  | N.R. | N.R., self-reported consumption | N.R., self-reported consumption | N.R., self-reported consumption | OCTN1/2 | gut barrier | CD patients | (Laing et al. 2013) |
| Mustard green |  | N.R. | Powder and sauce | N.R., self-reported consumption | N.R., self-reported consumption | IL6, ICAM1, NOD2, GPX3, GPX2, IL12B, NOD2, TNFSF15 and OCTN2 | oxidative stress, inflammation, gut barrier | CD patients | (Laing et al. 2013) |
| Radish sprouts |  | SFN | raw | 4% (w/w) | 14 days | Bacteroidota, Bacillota, Actinobacteria | Prebiotic | Healthy participants | (Li et al. 2009) |

Table 1.3 continued

| | | | | | | | | | |
|----------------|---|------|---------------------------------|---------------------------------|---------------------------------|--------------------------------|---|-------------|---------------------|
| Rocket arugula |  | N.R. | N.R., self-reported consumption | N.R., self-reported consumption | N.R., self-reported consumption | IL6, ICAM1, GPX3 and claudin-2 | oxidative stress, inflammation, gut barrier | CD patients | (Laing et al. 2013) |
|----------------|---|------|---------------------------------|---------------------------------|---------------------------------|--------------------------------|---|-------------|---------------------|

This review suggests that the effects of cruciferous vegetables depend on the preparation and presence of bioactive compounds, which can alleviate inflammation, oxidative stress, dysbiosis, and gut barrier damage pathways during clinical inflammatory bowel disease studies. NA means not available. N.R means data not reported in the article.

CHAPTER 2

EFFECT OF CRUCIFEROUS CONSUMPTION ON HEALTHY EATING INDEX AND OVERALL NUTRITIONAL QUALITY IN DIET HISTORY ASSESSMENT OF HEALTHY AND SELF-REPORTED IBD SUBJECTS.

2.1 Abstract

Vegetables, fibers, and fruits are major food components that can increase the healthy eating index score, microbiome diversity and produce beneficial metabolites in the human gut. Glucosinolates are plant metabolites derived from cruciferous vegetables, such as broccoli, from which *Bacteroides thetaiotaomicron* in the mammalian gut can hydrolyze through at least one gene of the *BT2160-2156* operons to produce isothiocyanates, a microbial-derived metabolite, with anti-inflammatory and antioxidation activities. In this study, we explored the role of self-reported fiber, dark green vegetables, and fruits on healthy eating index, based on daily guidelines for Americans, and the effect of steamed broccoli sprouts intervention on the expression of BT genes in humans. These results show increased individualized diet-microbiome interaction before, at the end and after the broccoli sprouts intervention with upregulated BT genes in young and middle-aged persons who self-reported gut problems and consumed prior daily values of fibers, dark green vegetables, and fruits above the daily guidelines for Americans' recommendation. Our work provides valuable information about that compliance to healthy eating guidelines and individualized diet-microbial gene responsiveness as measures for future research to explore the benefits of steamed broccoli sprouts and other dark green vegetables, such as crucifers as potential nutritional management for persons with IBD conditions.

2.2 Introduction

Dietary intake is a primary determinant of individuals' well-being and the probability of pathological development (World Health Organization 2003; Conlon and Bird 2014; National Academy of Sciences and Inst...). The type, amount, and diversity of food choices are some of the main factors associated with health quality and human security (Edelstein 2022; National Research Council et al. 2006). Nutritional surveys reported associations between Inflammatory Bowel Diseases (IBD) risk and high consumption of sugar, fat, and meat protein diets (Han et al. 2020; Xu et al. 2021; Talebi et al. 2023; Basson et al. 2020), as these may alter the chemical and microbial activity in the gut and act as triggers for people who also have genetic or other environmental risk factors for IBD. According to a report, consuming animal protein such as red and white meat had a 40% positive correlation with IBD development (Talebi et al. 2023). A similar correlation between energy drinks, particularly regular soda, has been reported in adults (Han et al. 2020; Xu et al. 2021). Other reports revealed a positive correlation between the consumption of diets rich in fat, dairy products, and sugar among teenagers and young adults (Li et al. 2020; Tayyem et al. 2021; Khorshidi et al. 2020; Rashvand et al. 2018). High consumption of dietary saturated fats has been implicated in microbial dysbiosis and mucosal inflammation via TLRs and NFkB pro-inflammatory stimulation during chronic bowel disease (Statovci et al. 2017; Basson et al. 2020). Meanwhile, developing a healthy dietary lifestyle with regular consumption of food rich in vegetables, fibers, and fruits could promote cognitive function (Bigman et al. 2023), provide a healthy gut via beneficial microbial byproducts (Visconti et al. 2019), and reduce the risk of IBD development (Reddavid et al. 2018; Lopes et al. 2022) due to the anti-inflammatory and antioxidative phytochemicals (Deng et al. 2023; Alaba et al. 2024).

Recent nutritional research has highlighted vegetables, particularly crucifers and broccoli, as beneficial against IBD in both the young and adult population (Manski et al. 2024; Deas et al. 2024; Shen et al. 2023; Yanaka 2018). Our team and other researchers have reported cruciferous vegetables, consisting of diverse plant species such as broccoli, cauliflower, cabbage, kale, bok choy, brussels sprouts, collards, turnips, and radishes, could promote healthy gut (Yanaka 2018), due to the presence of bioactive phytochemicals such as isothiocyanates, polyphenols, flavonoids and SCFAs (Alaba et al. 2024; Holman et al. 2023; Holcomb et al. 2023) and protect against chronic inflammation, oxidative stress, dysbiosis and IBD risks (Hernandez-Ledesma and Martinez-Villal...; Cicio et al. 2022). Therefore, incorporating crucifers such as broccoli sprouts into the dietary guidelines for healthy and IBD populations might prevent and alleviate bowel diseases. However, many factors could impact people's ability to eat healthily. An individual's choice of food could be influenced by location, residential neighborhood, closeness to farming areas, affordability, workplace, social class, and palatability (Ghenadenik et al. 2018; Townshend and Lake 2017; Lam et al. 2024; Leng et al. 2017). Diets rich in fat and sugar are more appealing and desirable among younger adults than vegetables and fruits due to taste perception (Avena 2015; Montmayeur and le Coutre 2009; Murimi et al. 2016). Food affordability and local agricultural production determine access to organic and fresh vegetables (Segal and Demos 2016; Evans et al. 2015; Ver Ploeg 2010; Clark and Tilman 2017).

Nutritional research utilizes diet scores as one of the primary tools for understanding the role of food choices and individual dietary components on health and nutritional qualities (de Jesus et al. 2024; National Academies of Sciences, Engin...). Diet scores examine dietary patterns and nutrient intake (Van Den Heuvel et al. 2021) to provide relevant information about potential disease development or prevention (Hou et al. 2022; Cohen et al. 2013). A systematic review

revealed three categories of pattern-based dietary scores: (1) dietary variety-based scores, (2) scores derived from the assessment of concordance with nutrient- or food-related dietary guidance, and (3) scores based on an assessment of Mediterranean diet characteristics (Kant 2004). The healthy eating index (HEI) utilizes the 2nd category of dietary score to grade the nutritional components of an individual in compliance with the dietary guidelines for Americans (DGA) recommendation. The USDA has recommended the dietary history questionnaires III (DHQ3) as an online tool for researchers to collect nutritional data through surveys (DHQ3). The DHQ3 generates reports and information, such as health index and nutritional quality, as data on participants responding to the study, which researchers could use to investigate how healthy or poor the diet of individuals or populations corresponds to potential health or pathological status. The results of such assessment could be used to encourage the consumption of healthy food among participants and serve as a recommended dietary intervention to prevent or alleviate pathological conditions (Ruiz Esparza Cisneros et al. 2020; Pool-Zobel et al. 1997; McCullough et al. 2002).

Chronic diseases are associated with poor food quality and a low HEI calculated based on the DGA recommendation. For instance, adults in the US with poor diet quality and low diet scores are at risk of developing chronic diseases, such as obesity, diabetes, and cardiovascular diseases (Fanelli et al. 2020; Ghazaryan et al. 2021; Venci and Lee 2018; Vaccaro and Huffman 2017). Older men are less likely to develop chronic diseases due to a higher HEI (Chen et al. 2011) than women (Vaccaro and Huffman 2017; Weaver and Fasel 2018; Jun et al. 2020). The choice to reduce fatty food and increase dietary fiber has been proven to improve diet scores, improve the HEI, and reduce disease risks, especially among adults (López-Cepero et al. 2023). Awareness about the relationship between healthy food choices and an individual's well-being may guide them to incorporate healthy diets for nutritional management of diseases.

Despite the reports on food choices and their essential role in disease onset, progression, or prevention, there are limited human and clinical studies investigating the importance of vegetables such as broccoli as dietary recommendations for IBD. Cruciferous vegetables, such as broccoli, have been reported to contain phytochemicals that could alleviate inflammation, oxidative stress, dysbiosis, and IBD symptoms in mostly *in vivo* and *in vitro* studies (Alaba et al. 2024). Glucosinolates-derived metabolites, primarily isothiocyanates, have been attributed to the cruciferous diet's antioxidant and anti-inflammatory effects, particularly broccoli (Li et al. 2022; Holman et al. 2023). Upon crucifer consumption, commensal bacteria such as *Bacteroides* spp. can metabolize glucosinolates to produce isothiocyanates for gut health and beneficial activities. *Bacteroides thetaiotaomicron* (*B. theta*) utilizes these five gene codes to form several enzymes. Liou et al. reported that at least one *BT2160-2156* operon is required for *Bacteroides* to hydrolyze glucosinolates into isothiocyanates (Liou et al., 2020). The exact DNA sequence of these five genes is only found together in *B. theta*, although a closely related species, *B. ovatus*, has 2 of the genes but cannot convert glucoraphanin (Liou et al. 2019). However, there is a need for more nutritional research to translate these results into the clinical use of cruciferous and broccoli diets to alleviate human gut diseases such as IBD. Therefore, this study aims to assess the effect of regular self-reported food choices, including vegetables and fibers, on individuals' HEI, nutritional quality, and potential well-being. We used DHQ3 and Qualtrics online survey tools to collect 24-hour recall data from healthy individuals with self-reported IBD or inflammatory bowel syndrome (IBS) symptoms. Also, we examined individual's responsiveness to the benefit of self-reported fiber, fruits and vegetables diet, particularly by quantifying the presence of *Bacteroides thetaiotaomicron*, *BT 2160-2156* genes, to measure the bacterial hydrolysis of glucosinolates for antioxidant, anti-inflammatory, and gut protective effect of metabolites in participants that

regularly consumed high portions of these foods. We hypothesized that self-reported high consumption of dark green such as cruciferous vegetables or broccoli sprouts would increase dietary HEI score and *Bacteroides thetaiotaomicron* genes in the gut.

2.3 Methods

2.3.1 Participant recruitment

This study was conducted at the University of Maine in Orono, Maine, USA. All the study's protocols, recruitment process, and human handling were approved by the University of Maine's Institutional Review Board and Biosafety Committee (IRB #2022-08-01 and IBC #SI080122). We recruited study participants as healthy adults 18 years old and above by posting fliers at stores, on social media, and local news. Inclusion criteria are abilities to provide information about food consumed in the last year and stool samples. We excluded subjects taking oral antibiotics for two weeks or less before the study, allergic to broccoli sprouts, and pregnant or lactating. Our initial goal was to recruit healthy participants, but some subjects voluntarily reported having pre-existing conditions of IBS, ulcerative colitis, or Crohn's without flare-up symptoms during the study. The participants' first visit to our lab involved the discussion of the consent forms (supplementary file 1), the study's goal and objectives, how to use the tools for the diet history survey and sample stool collection, and the potential benefits and drawbacks of the study.

2.3.2 Study design

This study utilized steamed broccoli sprouts as a potential dietary intervention for healthy individuals with self-reported IBD/IBS symptoms. The preparation of a steamed broccoli sprout diet has been previously described and reported that inactivating plant enzyme, myrosinase, will prevent the hydrolysis of GLR to SFN, making gut microbes the only source of metabolism (Holman et al. 2023). We performed a randomized parallel study from June 2023 to May 2024 for

a preliminary investigation on the effect of self-reported cruciferous consumption on HEI and nutritional quality. Also, we investigated if steamed broccoli sprouts as a dietary intervention could increase the presence of bacteria genes, *BT 2160-2156* operon, which encode enzymes that can convert GLR to SFN (Liou et al. 2019; Holman et al. 2023).

On Day 0 of the study, we obtained dietary recall data from the subjects for the past year using Qualtrics and fecal samples for microbial analysis, as a baseline for dietary and bacteria activities. Then we gave them one or half a box of broccoli sprouts (Jonahan's Sprouts, Massachusetts, sourced through local grocery stores) to steam for 10 minutes and added to their regular meals every day for 28 days. Then, we collected fecal samples again from subjects on Day 28 to assess the effect of the broccoli sprout diet on gut bacteria genes. On Day 35, after seven days without the broccoli sprouts (treatment washout), we obtained information on how they consumed steamed sprouts for palatability, and fecal samples from subjects to observe the benefits of broccoli sprouts on bacteria genes persisted. We collected dietary recall for the past year using diet history questionnaire version 3 (DHQ3) during the study, after previously using a modified version of the DHQ3 from which we could not obtain HEI, which DHQ3 is programmed to calculate and report automatically.

2.3.3 Dietary data collection

The diet history information was obtained through electronic surveys on Qualtrics (Qualtrics Software, 2023, Provo, UT, USA), which hosted a modified version of the National Cancer Institute's Diet History Questionnaire version 3 (NCI DHQ3 (National Cancer Institute 2023)) to simplify diet history survey questions. Qualtrics generated weighted points for the frequency at which an individual consumed nutrients per year, i.e., yearly frequency. However, due to the lack of mass portions in the Qualtrics questionnaire, we asked the participants to utilize

the DHQ3 software (DHQ3) for healthy eating and nutritional quality reports based on USDA's HEI by comparing the weight and portions of classes of food consumed in mass and frequency, according to the 2020-2025 DGA recommendations for each individual. The DHQ3 software calculated and generated the HEI score for each subject based on 100 points. The HEI score is a crucial metric that provides comprehensive information about an individual's diet quality and adherence to the nutritional guidelines (Shams-White et al. 2023; Pope and Nizielski 2021). A score of <50 is a poor or unhealthy diet, 51-80 needs improvement, and >80 is a good or healthy diet (Shams-White et al. 2023). Also, healthy eating was examined with the nutrients consumed by an individual compared with their DGA recommendation, and the percentage difference was used as compliance difference. DHQ3 provides information about the daily values of each food group in grams or cups to assess the relationship between food intake and HEI score, informing of the HEI component represented in a spider plot. It was essential to use the DHQ3 because the HEI score tells us if the participants were healthy eaters or not. Meanwhile, Qualtrics generated the food frequency according to their classes plotted in a food cluster pie to observe the diversity of food consumed by all the participants. Since age and gender are associated with dietary patterns, HEI, and the development of chronic diseases, we calculated the mean age and HEI within our population. We also categorized our participants as young adults (18-39), mid-aged adults (40-59), and older adults (60+), and by gender to calculate the HEI components of each age and gender group (Artegoitia et al. 2021; Shang et al. 2023; Ma et al. 2022; Weng et al. 2024; Rahmani et al. 2019).

2.3.4 Stool collection, DNA extraction and quantitative PCR for BT2160-2156

During the participants' first visit to our lab, we provided them with instructions on how to label materials and collect feces (supplementary file B.2) using flushable fecal collection materials (Protocult, from Therapak, now Avantor), fecal occult blood cards (Hemocult II® SENSEA® Fecal Occult cards, Beckman-Coulter), and jars filled with RNA later. We obtained samples from participants on Days 0, 28, and 35 within 24 hours of defecation, and stored them at -80°C until processed. *Bacteroides thetaiotaomicron* is one of the primary gut bacteria involved in GLR metabolism, with the expression of its *BT2160-2156* genes that are known to code for enzymes that convert GLR to SFN for anti-inflammatory and gut protective effects (Holman et al. 2023; Li et al. 2013; Zhang et al. 2023; Liou et al. 2019). The fecal DNA was extracted for quantitative PCR and analyzed for the expression of *BT2160-2156*, as previously reported (Marissa Kinney, Johanna Holman, Alexi...; Holman et al. 2023; Holcomb et al. 2023).

2.3.5 Statistical analysis

The primary data from this study were analyzed using R, DisplayR, and Prism (v10). Sample demographics were summarized using descriptive statistics, and the HEI scores were obtained from HEI to examine whether our participants ate healthily. We performed a Spearman's correlation (r_s) with the food nutrients and percentage difference of compliance to DGA recommendation (\pm). The individual's responsiveness to the broccoli sprouts diet was assessed by performing one-way ANOVA to quantify the *Bacteroides thetaiotaomicron*, *BT2160-2156* gene expression between high or low consumers, with or without gut problems. Statistical differences between consumption of nutrients were expressed as mean \pm SD.

2.4 Results

2.4.1 Participants Demographics and HEI score

The mean demographics of the twenty participants involved in this study are presented in Table 2.1. Three participants withdrew and did not complete the study. Four of seventeen participants completed the study but did not fill out the DHQ3 survey. Therefore, twenty subjects began the study and filled out the Qualtrics surveys, seventeen completed the research and provided fecal samples for BT gene expression, and thirteen completed the DHQ3 survey (Table 2.1). The mean age of the subjects was 43 ± 14 years, and the mean HEI score was 70.8 ± 8.7 . As shown in Figure 2.1a, the majority of participants identified as female ($n=13$, 65%) with a higher HEI mean score of 74.3 ± 5.2 , as shown in Figure 2.1b, while males were minority ($n=7$, 35%) with an HEI score of 67.0 ± 10.9 . The young adults comprised ($n=9$, 45%) of our subjects with HEI mean score of 72.6 ± 5.7 , middle-aged adults were ($n=5$, 25%) with mean HEI of 65.5 ± 12.8 , and older adults were ($n=6$, 30%) of the subjects with mean HEI score of 74 ± 6.6 .

Table 2.1: The demographics of the participants and the healthy eating index score of those who filled out the diet history questionnaires.

| Variable | Total participants, N=20 | Completed DHQ3, N=13 |
|---------------------------|--------------------------|--|
| Age(years), Mean \pm SD | 43.4 \pm 14.4 | HEI (100), Mean \pm SD 70.8 \pm 8.4 |
| Age Group, <i>n</i> (%) | | |
| Young Adult | (9, 45) | (4,72) |
| Middle Adult | (5, 25) | (4,65) |
| Older Adult | (6, 30) | (5,74) |
| Sex, <i>n</i> (%) | | |

Table 2.1 continued

| | | |
|--------|----------|---------|
| Female | (13, 65) | (7, 74) |
| Male | (7, 35) | (6, 67) |

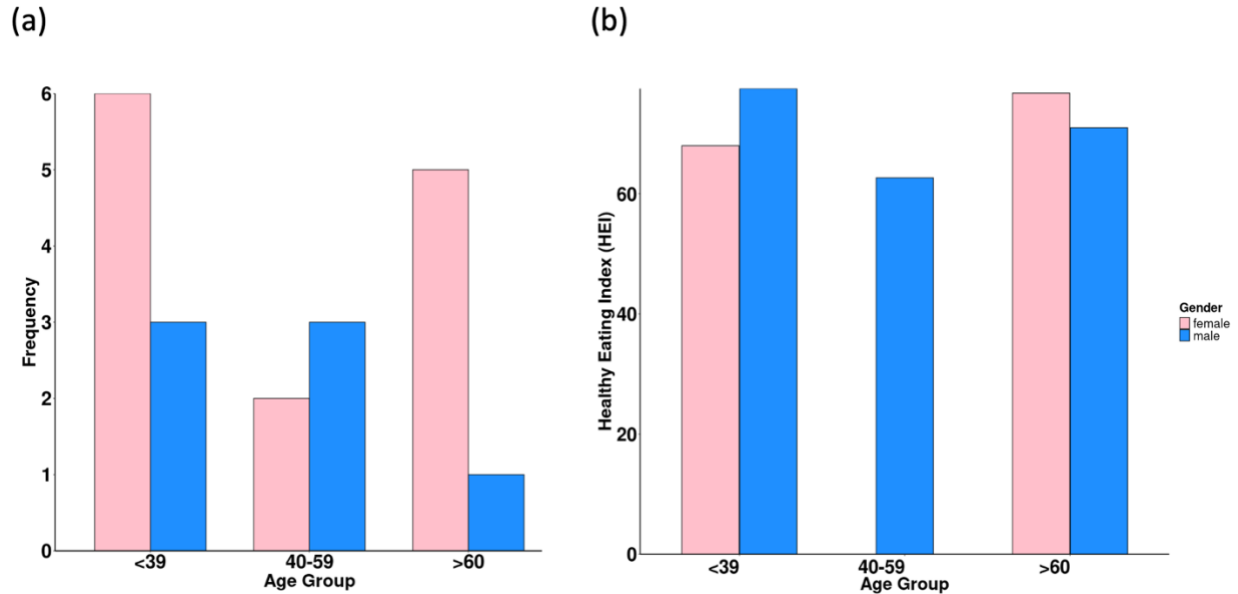
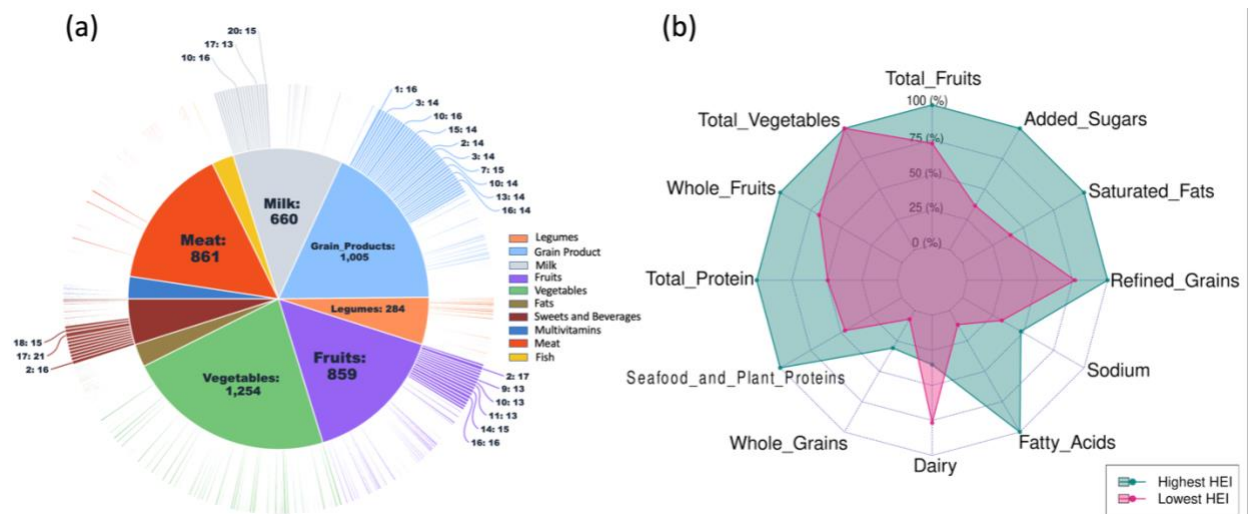


Figure 2.1: Bar graphs graphically display the demographics and healthy eating index distribution of participants. (a) The frequency of the twenty participants involved in the diet study according to sex and age groups classified according to the three stages of adult life, and (b) the healthy eating index distribution of the thirteen participants that filled the DHQ3 survey by age and gender.

2.4.2 Dietary diversity and HEI components

The nutrients consumed over the last year by our participants who completed the DHQ3 are visualized in Figure 2.2a, in which group clusters are weighed by the amount and frequency of consumption. The pie chart shows that vegetables (green) and grain products (blue) had the highest consumption rate among our subjects' population. However, sweet beverages, fruits, grain products, and milk are the most frequently consumed foods. For instance, as indicated in

the figure, subject 17 had the highest frequency of sweet and beverage consumption with a yearly weight of 21 points, and subject 2 had the highest frequency of fruit consumption with an annual weight of 17 points. Yearly food weight is a point allocated by Qualtrics based on the frequency by which an individual ate a particular food group. The spider plots in Figures 2.2b-f show the HEI components that map our participants' dietary patterns based on age and sex groups in alignment with the 2020-2025 DGA recommendation (Shams-White et al. 2023). The HEI components of the participants with the highest and lowest HEI values are illustrated in Figures 2.2b. A general comparison of our results across all ages and genders showed that the diet of older females (Figure 2.2c) aligned with HEI components except in food categories such as saturated fats, sodium, and dairy. Middle-aged adult men had the lowest alignment components except in whole grains, sodium, and vegetables, while older men had the lowest with total vegetables and saturated fat components. Comparison between different age groups (Figure 2.2d) showed the highest alignment in the older adults' HEI components and the lowest in the middle-aged adult group. Gender comparison within each group (Figures 2.2d-f) showed the highest alignment of women across all genders in HEI components of total vegetables and first, except in young adult women's vegetable consumption (Figure 2.2f).



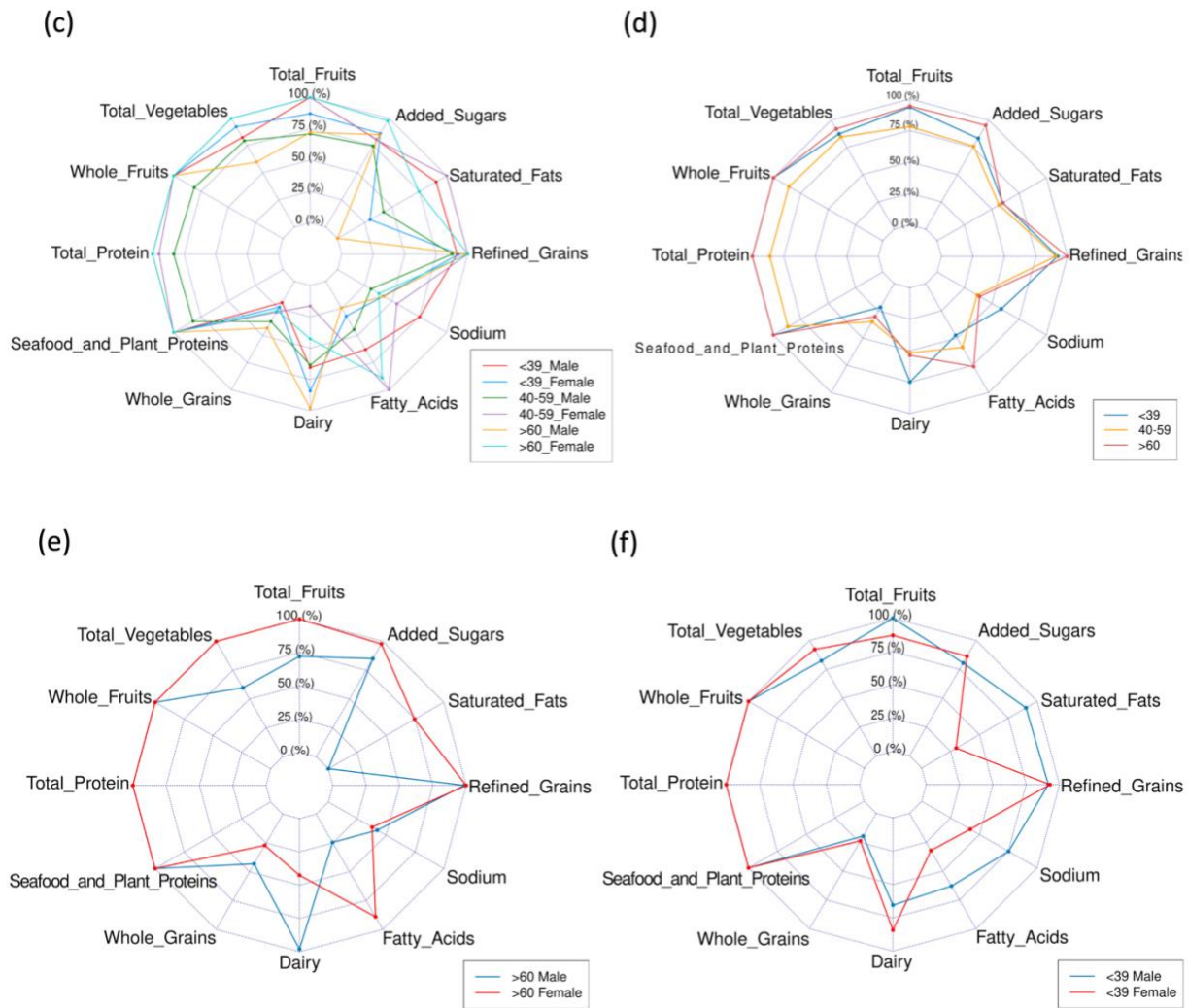


Figure 2.2: Food nutrients and healthy eating index differed among participants by age and sex. (a) Cluster pie of food nutrients in yearly weight of consumption frequency per individual represented by the thickness of the lines (Qualtrics survey); (b-f) Percentage food components that contribute to the healthy eating index of participants represented in spider plots based on age and sex groups (DHQ3 survey).

Since total vegetables and fruits aligned maximally as the major HEI components in women compared to men in this study, we compared the difference between the daily values of fibers, vegetables, and fruits based on gender. Women had a trend of higher daily consumption of these food categories when compared with men (Figure 2.3). Although the dietary gender-

based differences between their daily consumption of fiber, vegetables, and fruits were insignificant, the trends were consistently higher in women than men.

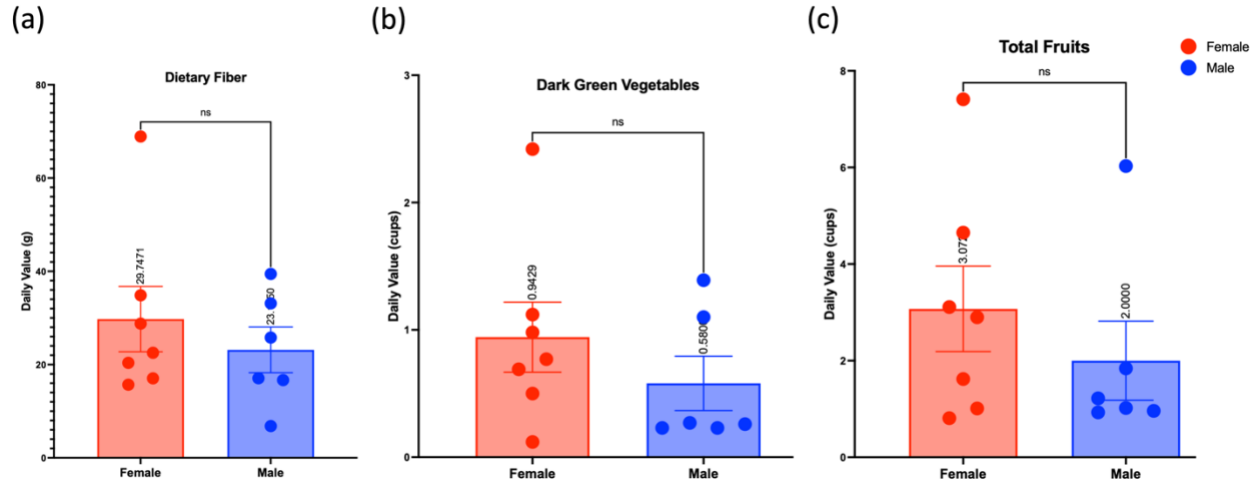


Figure 2.3: Bar charts of dietary fiber, dark green vegetables, and total fruit intake comparing female and male participants that filled the DHQ3 survey. There is a positive trend of increased (a) dietary fiber in grams, (b) dark green vegetables in cups, and (c) total fruit consumption in cups among female participants (red) compared with males (blue). Abbreviations: g=grams

2.4.3 Correlation between participants' HEI scores, nutrients, and compliance to the DGA

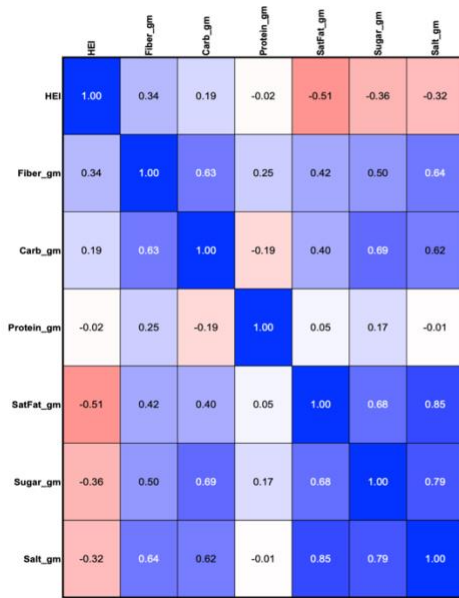
The mean HEI scores of all participants and nutrition values compared with the DGA recommendation are shown in Table 2.2. We calculated the percentage difference for individuals' daily nutrients to assess their compliance with DGA per nutrients (HEI scores for Americans; Drewnowski et al. 2019). We normalized the individual nutrition values for participants with the recommendation per food by calculating the percentage differences for the analysis baseline. The daily value of fiber intake (g) of all the participants had the highest positive correlation with the HEI score, although the compliance difference (%) was more correlated (Figure 2.4). Similarly, the daily value of saturated fat intake (g) of all the participants had the highest negative correlation

with the HEI score. However, the daily dietary difference of compliance to DGA (%) was significantly correlated with HEI, while the daily values were not (Table 2.2).

Table 2.2: The correlation values of participants' healthy eating index scores with their daily nutrition values in grams and compliance differences compared with dietary guidelines for Americans in percentages.

| Variable | N=13 | |
|-----------------------------|----------------------------|---------------------------------|
| Correlation Analysis | | |
| HEI Score 2020 (100 points) | Daily nutrition values (g) | Daily compliance difference (%) |
| Fibers | 0.35 | 0.53* |
| Carbohydrate | 0.19 | 0.1 |
| Protein | -0.02 | -0.08 |
| Saturated Fat | -0.51 | -0.9*** |
| Sugar | -0.35 | -0.22 |
| Salts | -0.32 | -0.32 |

(a)



(b)

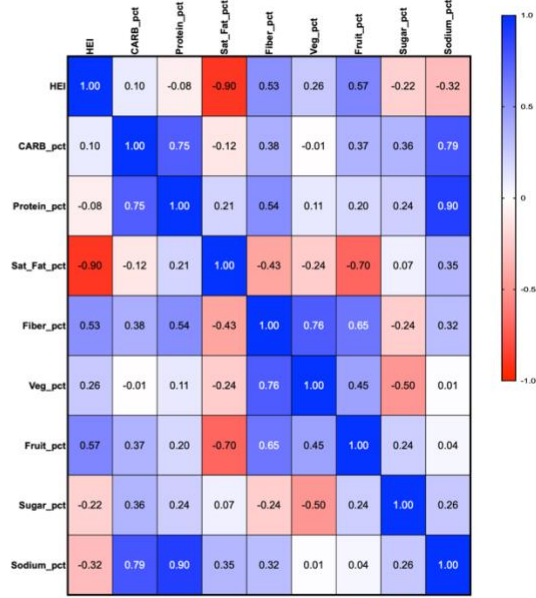


Figure 2.4: Heat map of Spearman correlation of HEI with fiber, vegetables, saturated fats, sugar, and salt. (a) The data of HEI scores compared with daily nutrient values in grams, and (b) HEI scores compared with daily nutrient compliance difference from the dietary guidelines for Americans in percentages. Correlations colored blue are positively, and red are negatively associated. Abbreviations: HEI=healthy Eating Index-2020, gm=grams, and pct=percentage.

2.4.4 Personalized expression of fecal BT2160-2156 genes with broccoli sprouts diet and high consumption of fibers, vegetables, and fruits

The expression of BT genes responsible for converting glucosinolates to isothiocyanates were not significantly different before and after broccoli sprout diet or between high and low consumers of fibers, vegetables, and fruits in this study (Figure 2.5). However, there was a trend of personalized response in individuals with self-reported high daily values of dietary fiber, vegetables, and fruit before and days after the broccoli sprout diet, particularly among the young- and middle-adult participants with self-reported pre-existing gut conditions in both genders. For instance, subject 13, a middle-aged woman, had the highest expression of BT gene combinations with at least three copies before, at the end, and days after the steamed broccoli sprout diet. Subject

3, a young adult man, had high expression and combinations of BT genes days after the steamed broccoli sprout diet. Meanwhile, subjects 20 and 2, older adult women with self-reported high and middle daily values of dietary fiber, vegetables, and fruit, respectively, both with preexisting conditions, did not show significant high BT gene expression before and after the steamed broccoli sprout diet. Subject 19, with the self-reported high yearly frequency of cruciferous diets and a low daily combination of dietary fiber, vegetables, and fruit with no gut conditions, had high BT gene expression at the end and days after the steamed broccoli sprout diet (Figure 2.5b&c). Subjects 10, with low self-reported dietary fiber, vegetables, and fruit consumption, had high expressions of *the BT2158* gene at the end and days after the steamed broccoli sprout diet. Subjects 14, with a moderate yearly frequency of cruciferous diet, had high expressions of *BT2158-2157* gene at the end and *BT2159-2157* days after the steamed broccoli sprout diet.

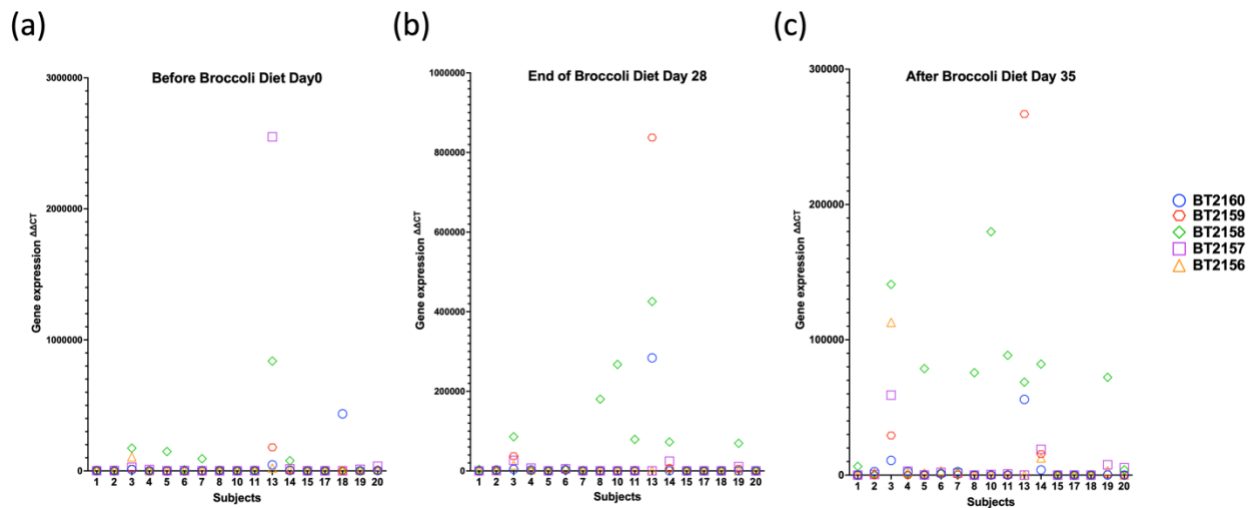


Figure 2.5: Scattered bars illustrate the expression of *BT2160-2156* genes in response to broccoli diet among the twenty participants. Individualized response is based on prior fiber, dark vegetables, fruit intake, and self-reported gut conditions, primarily in young and mid-aged adults. (a-c) The *BT2160-2156* gene expression per participant before, at the end, and seven days after the steamed broccoli sprouts intervention. Abbreviation: BT= *Bacteroides thetaiotaomicron*.

2.5 Discussion

The result from this study indicates that our participants had an overall healthier diet than average Americans based on a mean HEI score of 70.8 compared with 56.6 of the general adult population (Shams-White et al. 2023; Vaudin et al. 2021). The female population in this study showed a higher mean HEI score of 74.3 than males of 67.0 which supports the report that adult men are generally at risk of poor diet and associated chronic diseases such as colon cancer (Deierlein et al. 2023; Fanelli et al. 2020; Boustany et al. 2023). The older adults seem to eat healthier (74) than young (72.6) and mid-aged (65.5) adults, which supports the report that older adults may eat healthier food as a measure of healthy living at late stages of life (Xu et al. 2021; Vaudin et al. 2021).

Nutrient clustering is a critical analysis tool to examine food intake as nutritional patterns of individuals in a given population (O'Hara et al. 2022). Our results showed that food categories of vegetables, fruits, and grain products constitute about 50% of the yearly food frequency weight consumed by subjects in this study. These findings support the reports that high consumption of fibers in vegetables, fruits, and unrefined grains correlates with high HEI scores due to the micronutrients that could improve quality of life (Wright et al. 2020; López-González et al. 2021). The HEI components score further reflects our participants' dietary pattern of food categories in alignment with DGA 2020-2025 by specific age and gender groups (Shams-White et al. 2023). Our data set confirms that dietary patterns differ with age and gender and may predict disease risk factors (Artegoitia et al. 2021). The older adults aligned more with the HEI components than younger and middle adults and women compared to men across all age groups. Older women tend to eat a healthier diet with HEI components maximally aligned with total vegetables, total fruits,

whole fruits, total proteins, seafood, and plant proteins, and minimum alignment with saturated fats, sodium, and dairy in this study.

Meanwhile, men had a lower alignment with the majority of the HEI components, especially middle-aged men, putting them at risk of poor diet-associated diseases. Although there was no significant difference between the amount of daily fiber, dark green vegetables, and total fruits consumed by women and men in this study, there were positive trends of increased daily values in women compared to men. These combinations of HEI components may benefit older women who consume less sodium, saturated fats, and sugar, and more vegetables, fruits, and fibers may be protected against pathological conditions (Kang et al. 2019; Gao et al. 2022; Weisman et al. 2023). These results support the findings that men tend to overwork into the 60s with little cognition of their diet and are at risk for long-term diseases, such as IBD, while older women tend to retire early and focus on their well-being (Jacobs et al. 2020; Leso et al. 2015; Giovannucci et al. 1994).

The consumption of food daily values that align with the DGA recommendation has been reported to lower disease risk (HEI scores for Americans; Drewnowski et al. 2019; Jessri et al. 2016). Our results showed that high fiber consumption and low saturated fat are significantly associated with HEI, which may reduce the risk associated with gut conditions (Eynard and Lopez 2003; Fanelli et al. 2020). The percentage difference in the subjects' compliance with the DGA daily food weight recommendations showed a stronger correlation with HEI than the food nutrition values. The consumption of fibers, vegetables, and fruits above the daily recommended amount had a positive correlation with the population's HEI score and a negative correlation with saturated fats intake. These results suggest that the percentage difference in the subjects' compliance with

DGA recommendations may better represent association with HEI than the daily values. Consuming higher fiber, vegetables, and fruits may provide micronutrients such as glucosinolates, flavonoids, and short-chain fatty acids within the gut against inflammatory bowel diseases (Alaba et al. 2024). The participant with the highest HEI score of 81 consumed more than 50% of the amount of recommended fiber, 300% of the vegetables, 100% of the fruits, and 50% less saturated fats than the DGA recommendation. Meanwhile, the participants with the lowest HEI consumed about 50% of the recommended amount of fiber and 25% less than the recommended amount of vegetables.

Our results showed that young and middle-aged adults may benefit more from their personalized responses to BT genes than older adults. Subjects with self-reported gut conditions in their middle and young adulthood had increased gene expression. For instance, subject 13, a 59-year old woman with a preexisting IBS and adherence to a vegan diet, had the highest total and combinations of BT genes at different times. She had a combination of highly expressed BT2159-2157 before the steamed broccoli sprout diet intervention (day 0). This result may be due to the high regular consumption of dietary fiber, dark green vegetables, and total fruits. According to the HEI report, her values were the highest for all daily values for these nutrients. At the end of the steamed broccoli sprout diet (day 28), she maintained the highest total and combinations of BT genes, with BT2160-2158 genes. After seven days of the steamed broccoli sprout diet (day 35), she retained the BT2160-2158 genes at lower expressions than day 28. Similarly, subject 3, a young adult man with a preexisting gut problem, had increased expressions of BT2158 and 2156 at day, with a switch to higher expression of BT2159-2158 genes at day 28 and increased expression of all the five genes at day 35. Meanwhile, subjects 20 and 2, older women with self-reported high and middle daily values of dietary fiber, vegetables, and fruit, respectively, both with

preexisting conditions, did not show a significant increase in BT gene expression before and after the steamed broccoli sprout diet. Subject 20, a 61-year old woman with a preexisting Crohn's disease which was controlled with diet and without medication, had a slightly upregulated BT2157 at days 0 and 35. These suggest that the older population may not respond to BT gene expression during the steamed broccoli sprout diet intervention. This pattern is similar to a report that individuals with prior high daily fiber diets may not benefit sufficiently from prebiotic diet intervention (Holmes et al. 2022). These results also support the report that the younger IBD population in mice benefited from the steamed broccoli sprout diet than older adults (Holcomb et al. 2023). It has also been reported that gut microbiota differ among young and older adults. The expression of *Bacteroides* is unique among young adults, while *Parabacteroides* co-exist more in older adults (Ragonnaud and Biragyn 2021; Jeffery et al. 2016). The expression of fecal BT2160-2156 genes is essential for the hydrolysis of glucosinolates to isothiocyanates by *Bacteroides spp.* for broccoli benefits against IBD inflammation and oxidative stress (Liou et al. 2020; Holman et al. 2023). *Bacteroides thetaiotaomicron* (*B. theta*) utilizes at least one of these five gene codes to form several enzymes, and multiple combinations of these enzymes may reflect a high conversion of isothiocyanates-from glucosinolates-rich diet (Liou et al. 2019). Therefore, young and adult subjects with high daily consumption of fibers, vegetables, and fruits may respond better to the BT gene expression and benefit from the steamed broccoli sprout diet intervention than old adults with IBD conditions. The low expression of *Bacteroides* with aging may be associated with less molecular response to dietary anti-inflammatory metabolites (Macia et al. 2015), such as isothiocyanates, polyphenols, and short-chain fatty chains from broccoli. A similar pattern to subject 20 was observed with subject 5 in response to BT2158 at days 0 and 35, a 52-year old woman with no preexisting gut problem and a high yearly frequency of cruciferous diets. She had

slightly expressed BT2158 before the broccoli sprouts diet, less expression at the end of the study, and more excellent expression days after the survey. Meanwhile, Subject 19, a 42-year old man with self-reported high yearly frequency of cruciferous diets and low combination of fibers, vegetables, and fruits, with no gut conditions, has increased BT gene expression at the end and days after the broccoli sprouts diet. We observed a similar pattern of increased expressions of *the BT2158-2157* gene at the end and days after the broccoli sprouts diet with subject 10, a 34-year old man with low-self-reported consumption of dietary fiber, vegetables, and fruit, and subject 14, a 35-year old woman who reported a moderate yearly frequency of cruciferous diets. In addition, subject 14 slightly increased *BT2159* days after the broccoli sprouts diet. The expression of fecal BT genes was sustained up to seven days after the broccoli sprout diet, particularly in highly responsive individuals in the study. These data support the report that gut *Bacteroides thetaiotaomicron* were colonized with increased and sustained genetic expression for six weeks and high polysaccharide utilization loci in mice for effective dietary metabolism of complex glucose (Kennedy et al. 2023). These results further establish that response to probiotic interventions such as broccoli sprout diets is individualized and may be favorable to persons with prior diet history of low fiber, vegetables, and fruits (Holmes et al. 2022; Li 2023; Ticinesi et al. 2023; Johnson et al. 2019) and depends on age, preexisting gut problems and other multi-level factors in subjects. One participant reported regular consumption of sulforaphane supplements but did not have high gene copies of BT genes.

2.6 Conclusion, limitations and future direction.

This study is the first to provide evidence on the individualized response of humans to BT gene expression before and after broccoli intervention. Young and middle-aged adults who regularly consume high amounts of fiber, fruits, and dark green vegetables tend to respond better

to broccoli dietary intervention, with sustained upregulated multiple copies of *Bacteroides thetaiotaomicron* genes, especially BT2159-2158 genes. Such responses were observed among individuals who self-reported that they have been eating fibers, fruits and vegetables due to preexisting gut problems. These individuals have HEI scores mostly in the 70s and amount of daily nutrients values above DGA recommendation. Some young and middle-aged adults who ate low or moderate fiber and dark green vegetables had a greater upregulated expression of at least BT2158 gene, seven days after the steamed broccoli sprouts intervention. Therefore, the regular consumption of steamed broccoli sprouts with high consumption of daily amounts of fiber, dark green vegetables and fruits may benefit young and middle-aged adults with IBD or IBS symptoms. Some individuals, especially older adults, did not respond with more copies of BT genes, with either broccoli sprouts intervention or high consumption of these nutrients. Early life intervention with a broccoli diet and incorporating dark green vegetables and fruits as daily diet may benefit the nutritional management of IBD via individualized *Bacteroides thetaiotaomicron* response in young and middle-aged adults.

There are a number of factors that interplay in the cause of an individuals' lifetime that determine their response to microbiota such as BT genes (Wu et al. 2021). The limitations of this work include the repeat of DHQ3 after some participants have already started or finished the study which may introduce bias as subjects may change their initial response collected at the beginning of the study. Also, a multi-factorial approach to broccoli intervention in persons with IBD may reflect comprehensive benefit and microbial response. Future research would consider incorporating other factors beyond diet into consideration for effective assessment of microbial response to dietary intervention. Factors that could influence dietary intervention include smoking, BMI, hormonal changes and therapy (Bostanci et al. 2021; Dominianni et al. 2015; Brettle et al.

2022), which were not obtained during this research. A larger cohort of participants who are healthy without gut problems and those diagnosed with IBD conditions might better reflect broccoli intervention and microbial responsiveness.

CHAPTER 3

STEAMED BROCCOLI SPROUTS DIET ALLEVIATES INFLAMMATORY BOWEL DISEASE BY INCREASING ANTI-INFLAMMATORY, ANTIOXIDANT AND GUT PROTECTIVE METABOLITES IN DSS-MICE

3.1 Abstract

Broccoli is a cruciferous vegetable rich in bioactive compounds that are beneficial against inflammatory bowel disease through antioxidative, anti-inflammatory, and gut-protective activities. However, an in-depth annotation and understanding of the metabolites and microbial interactions associated with the broccoli sprouts diet is needed. This study investigated the effects of a steamed broccoli sprouts diet on the concentrations of metabolites and associated bacterial communities with antioxidant, anti-inflammatory, and gut-protective effects against ulcerative colitis in mice. Our data showed that steamed broccoli sprouts intervention significantly increased the concentrations of beneficial metabolites, such as sulforaphane, short-chain fatty acids, tryptophan, indoles, glutamic and polyphenolic metabolites, with positive correlations with commensal bacteria, *Bacteroides spp.*, *Intestinimonas*, *Oscillibacter* and *Lachnospiraceae* in the colon, cecal and jejunum regions of the gut. These data suggest that as a nutritional intervention, broccoli sprouts may confer region-specific metabolites and microbial interactions for antioxidants, anti-inflammatory, and gut-protective benefits during inflammatory bowel diseases.

3.2 Introduction

Broccoli, *Brassica oleracea var. italica*, is a type of cruciferous vegetable in the *Brassicaceae* family, with nutrients and bioactive compounds beneficial to maintain a healthy gut, alleviate bowel diseases and other associated systemic conditions (Alaba et al. 2024; Syed et al.

2023; Kumar et al. 2022). Broccoli is a non-fatty vegetable with insignificant amounts of fatty acids and low calories. It is rich in dietary amines, carbohydrates, micronutrients, fibers, and vitamins, with anti-inflammatory and antioxidant benefits (Li et al. 2022). Broccoli sprouts, in particular, have been reported to possess more nutritional and beneficial phytochemicals than mature broccoli heads (Chen et al. 2018; Bhandari et al. 2019; Gao et al. 2014). Diets rich in broccoli sprouts could contribute to overall well-being in healthy and disease states (Yanaka 2018; Atwell et al. 2015; Charron et al. 2020). Regular consumption of such a broccoli diet could exert nutritional benefits against cancer (Das and Ghosh 2021; Li et al. 2013), oxidative stress (Tian et al. 2022; Hou et al. 2023), inflammation (Holman et al. 2023; Holcomb et al. 2023; Holman et al. 2023), obesity (Zandani et al. 2021; Taiwo et al. 2024), diabetes (Mohammed and Mohammed 2023; Suresh et al. 2016), liver damage (Mao et al. 2023; Yoshida et al. 2015), renal dysfunction (Hashem and Malak 2024; Rubattu et al. 2015), cardiovascular diseases (Pereyra et al. 2020; Mukherjee et al. 2008), neurodegeneration (Vega-Galvez et al. 2023; Rhee et al. 2020), gut dysbiosis (Zhang et al. 2023; Holman et al. 2023) and maintenance intestinal damage (Wu et al. 2023; Lynn et al. 2015; Ferruzza et al. 2016).

Inflammatory bowel disease (IBD) is one of the major intestinal pathological conditions with a rapid rate of occurrence and global concern (Ye et al. 2015). The disease is difficult to treat due to the complex interplay between multiple pathological pathways such as inflammation, antioxidants, dysbiosis, and gut damage (Larabi et al. 2020; Alaba et al. 2024). Meanwhile, our studies have shown that various broccoli diets, including steamed broccoli sprouts, could alleviate inflammation by decreasing inflammatory oxidative stress while promoting healthy gut microbial diversity and intestinal structures (Alaba et al. 2024; Zhang et al. 2023). Broccoli treatment increased the antioxidants-scavenging activities of ORAC, HSAC, DPPH and ABTS, the

production of SCFA, healthy gut microbes communities, Bacteroidota/Bacillota ratio, and anti-inflammatory cytokines, IL10 and CD36, and it decreased inflammatory cytokines, IL1 β , iNOS, COX-2, CCLs and CXCLs, in macrophages and monocytes media (Pal and Konkimalla 2016; Deng et al. 2017; Choe et al. 2018). Similarly, steamed and raw broccoli sprouts increased antioxidants, NRF2, GPX2 and GSTM1, and tight junction proteins, ZO-1, occludin and claudin-2 against colon damage, decreased cytokines IL6, IL1 β and TNF α , increased expression of PGC1 α / NFR2 pathway and microbial richness in mouse models of ulcerative colitis (dextran sodium sulfate (DSS) induced) and Crohn's disease (microbially induced in interleukin 10 knockouts (IL10 KO) (Holman et al. 2023; Holcomb et al. 2023; Lippmann et al. 2014).

The nutritional benefits mentioned above may be associated with the hydrolysis effect of some gut bacteria on dietary metabolites from broccoli, such as glucosinolates (GSL), amines, polyphenols, and fibers. Gut microbes can hydrolyze these classes of plant metabolites into isothiocyanates (ITC), conjugates of flavonoids, phenolic acids, short-chain fatty acids (SCFA), and vitamins (Alaba et al. 2024; Bhandari et al. 2019; Choe et al. 2018). For instance, consuming cooked or raw broccoli for four or more days could increase the abundance of myrosinase-like microbial hydrolases, *Escherichia coli*, *Lactobacillus spp.*, *Bifidobacterium spp.* and *Bacteroides spp.*, to metabolize GSLs, such as GLR, glucoerucin and sinigrin, into ITCs, nitriles, erucin and indole conjugates to upregulate antioxidant and anti-inflammatory genes, such as GSH, NFR2, NQ1 and IL10, and gut mucosal barrier to alleviate IBD pathologies (Bouranis et al. 2021; Liu et al. 2017; Kaczmarek et al. 2019; Cebeci 2017; Liang et al. 2018). Similarly, flavanol and polyphenols such as curcumin, ferulic acids, and quercetin can be metabolized by *Clostridium*, *Bacteroides*, *Ruminococcus spp.* and *Lactobacillus spp.* with the ability to decrease proinflammatory cells, increase Treg cells, antioxidants (SOD) and barrier protection such as ZO-

1, occludin (Xu et al. 2021; Catalkaya et al. 2020; Peterson et al. 2018; Guo et al. 2022). Enterocytes have been reported to contain phenolic cleaving bacteria such as *Aldercreutzia equolifaciens* and *Flavonifractor plautii* and enzymes such as β -glucuronidase, *sulfotransferases* (SULT) and *catechol-O-methyltransferases* (COMT) (Murota et al. 2018; Takagaki et al. 2014). Microbiota such as *Bacteroides*, *Lactobacillus*, and *Eubacterium* can hydrolyze dietary fibers into SCFAs such as butyrate, propionate and acetate to stimulate anti-inflammatory responses of Treg cells to release IL10 and protect epithelial tight junction from damage (Ananthakrishnan et al. 2013; Caballero-Flores et al. 2023; Parada Venegas et al. 2019). Broccoli could change intestinal microbial population for tryptophan hydrolysis by *Clostridium sporogenes* and *Peptostreptococcus spp.* to increase indole metabolites with anti-inflammatory effects via inhibition of COX2 and stimulation of NRF2 pathways (Wlodarska et al. 2017; Liu et al. 2022; Duan et al. 2023; Nisha et al. 2022). Phenylalanine, a dietary amino acid from broccoli, can be metabolized by *Enterococcus* and *Lactobacillus spp.* to increase anti-inflammatory and neuroprotective metabolites, which decreased cytokines such as IL (Portune et al. 2016; Hou et al. 2023; Hubbard et al. 2017; Liu et al. 2014). Despite the reports that steamed studies could improve IBD pathologies with decreased inflammatory markers such as IL6, TNF α , and IL1 β and maintained microbial richness along the gut biogeography (Zhang et al. 2023; Holman et al. 2023), there is limited information about the role of microbiome-derived metabolites modulating these IBD pathways into healthy conditions. It is essential to analyze the metabolomic intensity of compounds with antioxidant, anti-inflammatory, and gut-protective properties during IBD management of broccoli.

In this study, we aim to assess the effect of steamed broccoli sprouts on dietary and microbial metabolites using a comprehensive panel of untargeted metabolomics (Clish 2015). We

hypothesized that steamed broccoli sprouts would increase the concentration of dietary and microbial anti-inflammatory, antioxidant, prebiotic, and gut-protective compounds against IBD. We used fecal samples from a previously published study which demonstrated that a 10% steamed broccoli sprout diet would prevent inflammation and changes to gut microbiota which otherwise occur during chemically induced ulcerative colitis (Holman et al. 2023). To further explore broccoli's nutraceutical effect against IBD, we compare the peak intensity of fecal metabolites in mice fed steamed broccoli diets alone with steamed broccoli diets in induced IBD conditions. This research used advanced untargeted metabolomic approaches to identify novel dietary and microbial anti-inflammatory, antioxidant, prebiotic, and gut-protective metabolites associated with steamed broccoli that are effective against IBD pathologies. These findings provide relevant information on the potential nutritional management of IBD by using steamed broccoli sprouts as a nutrition intervention.

3.3 Methods

3.3.1 Diet preparation and experimental design

We purchased broccoli sprouts from a local grocery store (Shaw's, ME), steamed them for 10 minutes over boiling water, and freeze-dried and ground them into fine powder. The powder was mixed with purified AIN93G powder (ScottPharma Solutions, Marlborough, MA) to make a 10% (w/w) steamed broccoli diet according to our previous studies, which reported adequate conversion of GLS to ITN (Holman et al. 2023; Zhang et al. 2023). We have documented the materials for this experiment in Holman's article (Holman et al. 2023). Specific pathogen-free C57BL/6 mice were purchased from Jackson Laboratory at six weeks of age, acclimated for seven days, and distributed into cages based on four treatment groups as reported in this previous study (Holman et al. 2023). Treatments consisted of 1) Control mice fed with AIN93G diet; 2) 2.5% DSS mice

fed with DSS in water to induce IBD; 3) 10% SS mice fed with 10% steamed broccoli sprouts diet; 4) 2.5% DSS + 10% SS mice fed with both DSS and steamed broccoli sprouts (SS) diets. After the first seven days of adaption to diets, mice were placed on 2.5% DSS treatment in drinking water for five days, then a recovery period of five days. After two more cycles of DSS treatment and recovery, fecal samples were collected on day 30 for metabolomics analysis. Mice remained on their diets for the duration of the study.

3.3.2 Untargeted metabolomics data acquisition and statistical analyses

Frozen fecal samples of 50 mg were sonicated in 200 μ l of water and mixed with 800 μ l of cold buffer (1:1 of MeCN:MeOH). The homogenate solution was vortexed for 30 seconds and centrifuged at 14,000 g for 5 mins at 4°C. A supernatant of 900 μ l was collected into a fresh tube and centrifuged as aforementioned. A supernatant of 800 μ l was collected into another tube, then centrifuged dried. Metabolites were reconstituted in a cold 400 μ l buffer (1:1 of water + 0.1 % formic acid:MeCN) for metabolomics analysis. Liquid chromatography with a high-resolution mass spectrometry (LC-HRMS) data acquisition was performed using Waters Synapt G2, time-of-flight (TOF) XEVO machine at the mass spectrometry facility of the University of California, Irvine, according to the previous report (Hosseinkhani et al. 2021). This earlier report is a significant reference in the field and validates our methodology. We transferred 250 μ l of each sample in the column for 10 μ l injection (C18 column, 7 x 40 mm) at liquid phase conditions as shown in Table 3.1 for metabolite analysis in an Acquity iClass UPLC and Synapt G2 system (Waters Corp., Manchester, UK) (Helm et al. 2014). These tools are widely used and trusted in the field, ensuring the reliability of our results. We processed the LCMS metadata in MassLynx, Progenesis QI, mzMine, and Sirius tools with built-in search engines to obtain the retention time, mass charge

ratio, molecular weight, peak intensity, metabolites name, and formula using several libraries (Esperanza et al. 2020; Peng et al. 2021).

Table 3.1: Liquid Chromatography conditions for metabolomics.

| Time (min) | A(%) | B(%) |
|-------------------|-------------|-------------|
| 0.00 | 98.0 | 2.0 |
| 1.00 | 98.0 | 2.0 |
| 15.00 | 2.0 | 98.0 |
| 17.00 | 2.0 | 98.0 |
| 18.10 | 98.0 | 2.0 |
| 20.00 | 98.0 | 2.0 |

A: 95:5 water: acetonitrile with 0.1% formic acid

B: acetonitrile with 0.1% formic acid. Flow rate of 3 uL/min.

The metadata was pre-processed in R to remove duplicate metabolite calls and correct for peak intensity errors before importing into MetaboAnalyst 5.0 (<http://www.metaboanalyst.ca>) (Pang et al. 2022). We normalized the data by log transformation and performed univariate One-way ANOVA analysis at $p < 0.05$ in a scatter plot in MetaboAnalyst and Prism with Fisher's post-hoc test to annotate specific metabolites of interest that are statistically different across the experimental groups in bar plots. We performed unsupervised and supervised discriminant

analysis for sample and group variation. The unsupervised principal component analysis (PCA) made the 2-way comparison of variability and sample cluster. We performed Hierarchical clusters with heatmaps to observe the correlation between the experimental groups and metabolite peak intensity. To identify potential relationships between bacteria involved in the hydrolysis of dietary metabolites from broccoli, we further performed Spearman correlation analyses with screening for p values 0.05 or less between some metabolites of interest and previously published microbiome richness, taxa diversity, and *B. thetaiotaomicron* genes, *BT2160-2156* operon (Holman et al. 2023).

3.4 Results

3.4.1 Univariate ANOVA of metabolites, discriminant analysis, and hierarchical clustering of samples in MetaboAnalyst 6.0

The partial least squares-discriminant analysis (PLS-DA) of samples showed significant differences and variations between the control, 2.5% DSS, 10% SS treated, and 2.5% DSS + 10%SS groups (Figure 3.1a). Additional analysis with K-mean clustering of the PCA plot identified inter-cluster similarity between the 10% SS treated and 2.5% DSS + 10% SS groups, while control and 2.5% DSS clustered within their groups (Figure 3.1b). Hierarchical clusters of samples confirmed the separation of samples into their treatment groups (Figure 3.1c). A total of 12,313 metabolites were observed based on metabolomics analysis, about 7000 were filtered out by quality control analysis in MetaboAnalyst, and 3,103 have significantly increased or decreased concentrations across the four treatment groups, as shown in the scatter plot (Figure 3.1d).

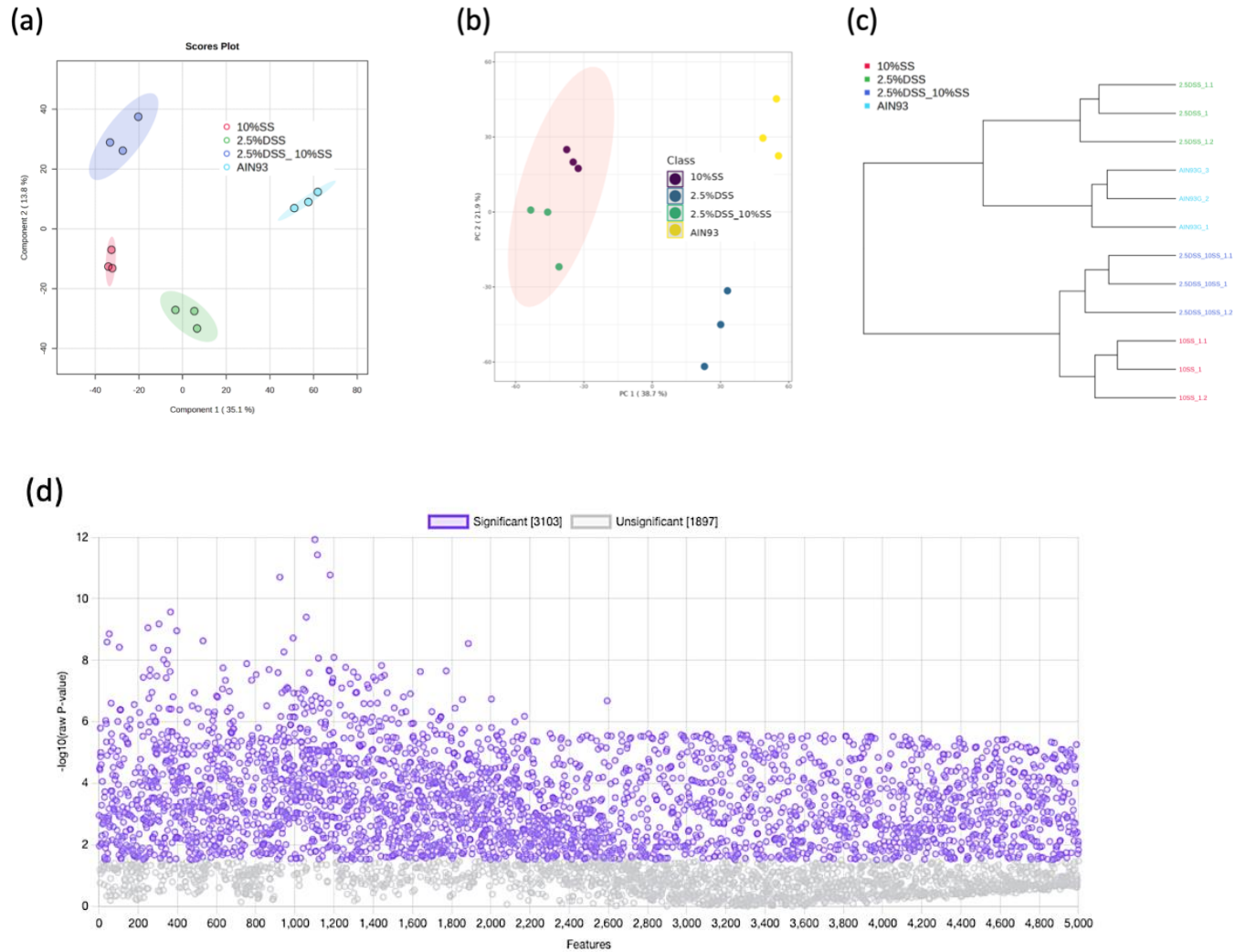


Figure 3.1: Fecal metabolites were differentially present by steamed broccoli sprout diet and DSS treatment. (a) PCA plots of samples with component 1 at 13.8% and component 2 at 35.1%; (b) K-mean plots with PC 1 at 21.9% and PC 2 at 38.7%; (c) Hierarchical cluster of experimental groups shown in dendrogram trees. (d) The univariate one-way ANOVA at $p < 0.05$ highlighted 3,103 metabolites differentially expressed across the experimental groups. Abbreviation: DSS= Dextran Sulfate Sodium.

3.4.2 Hierarchical clustering of differentially expressed fecal metabolites across the four treatment groups in heatmaps

The heat maps show the effect of steamed broccoli sprouts on metabolite clusters contributing to the differential impact of the broccoli diet against IBD across all the treatment groups in Figure 3.2a and specific metabolites of interest highlighted in Figure 3.2b. The

microbiota-derived metabolites of interest with differences in concentrations with broccoli diet or DSS treatment are isothiocyanates, tryptophan metabolites, indole derivatives of tryptophan, amines derivatives of glutamine and phenylalanine, prolines, and SCFAs.

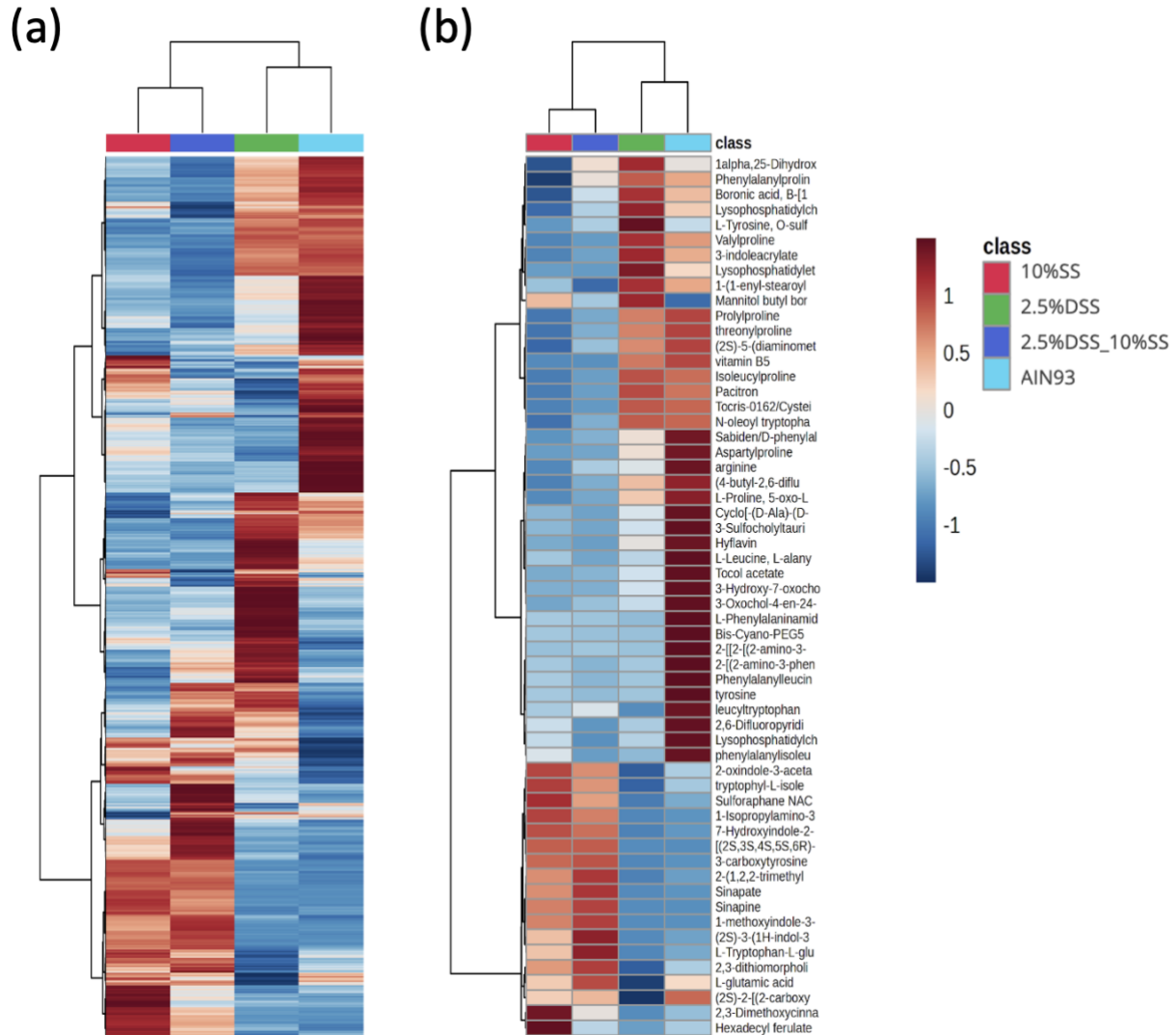
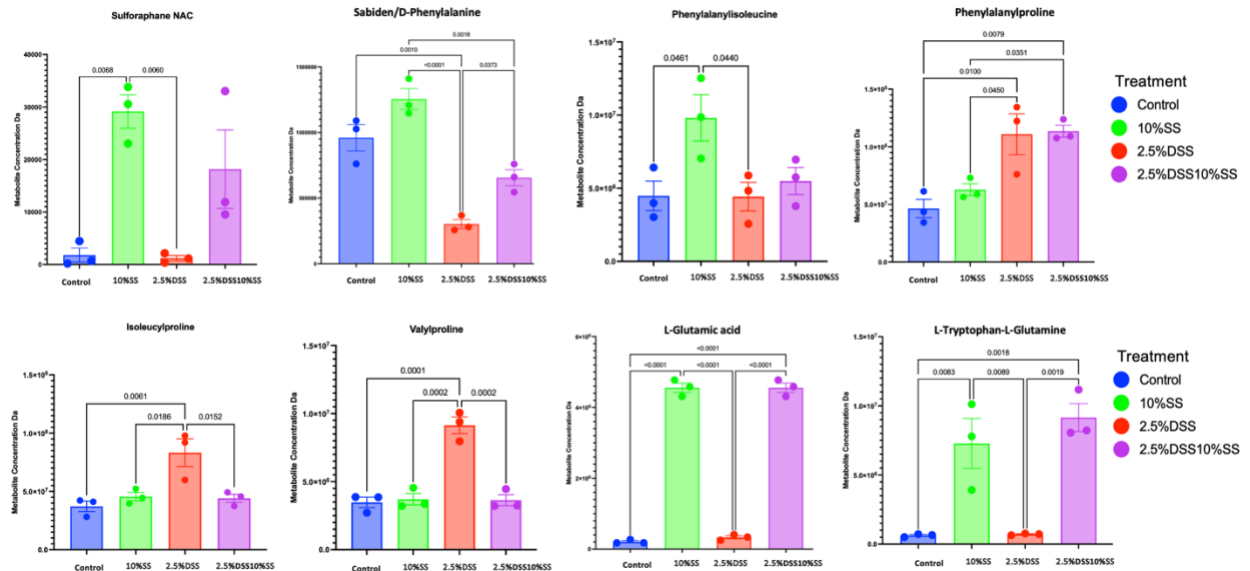
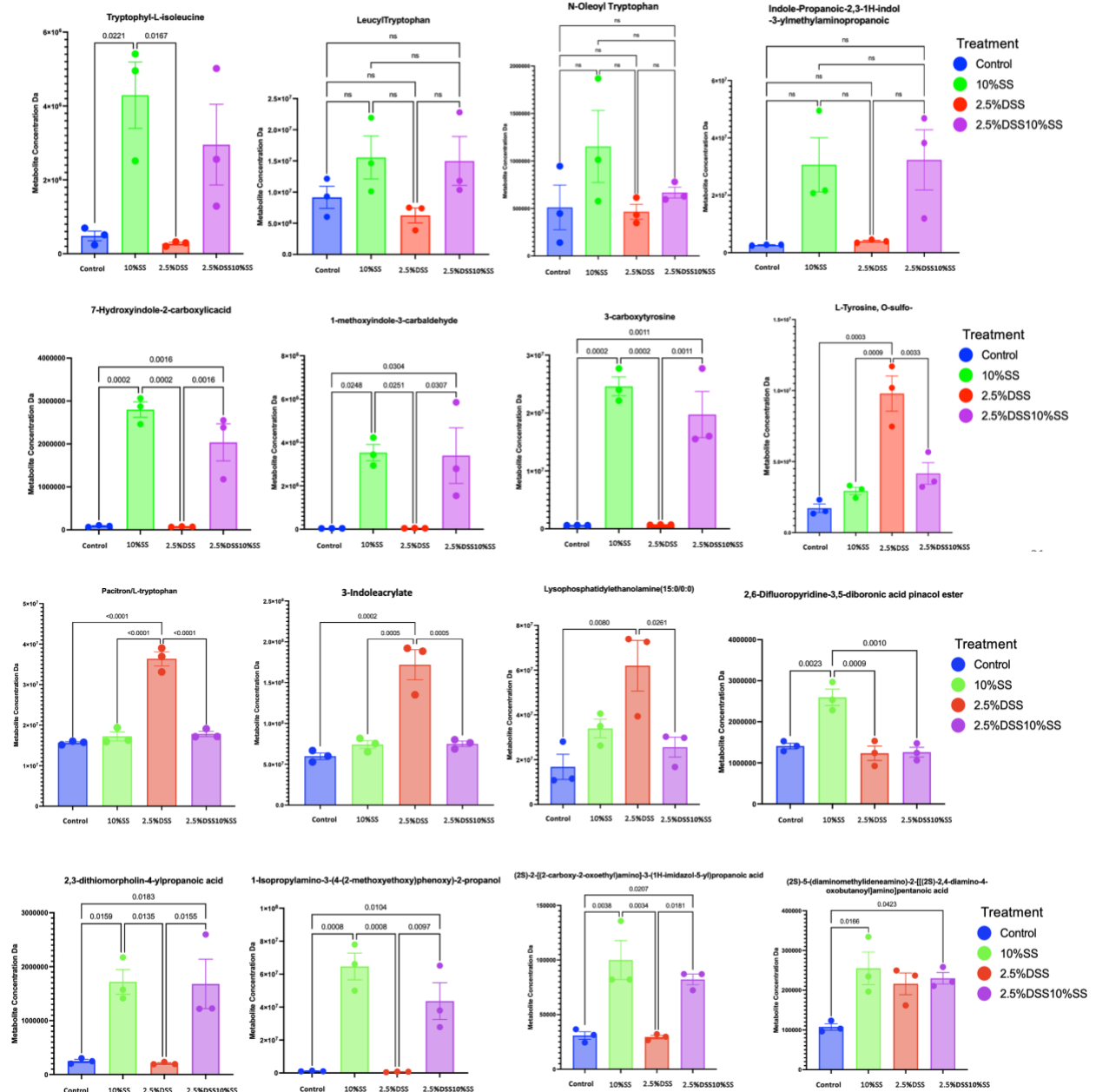


Figure 3.2: Hierarchical clusters analysis comparing the metabolites among the treatment groups (10% SS, 2.5%DSS, and 2.5%DSS_10%SS) and the control (AIN93). The heatmaps showed that (a) all differentially changed fecal metabolites and (b) specific differentially changed fecal metabolites of interest between the groups. The red color denotes an increase in metabolite concentration, while the blue color shows a decrease. Abbreviations: DSS= Dextran Sulfate Sodium and SS= steamed broccoli sprouts.

3.4.3 The effect of steamed broccoli sprouts on metabolite concentration

To identify the effect of steamed broccoli sprouts, we performed one-way ANOVA at $p < 0.05$ using the metabolite concentrations. The microbiota-derived metabolites of interest with positive significant concentrations in mice that ate broccoli are sulforaphane N-acetyl cysteine (SFN-NAC), D-phenylalanine (sabiden), phenylalanyl isoleucine, L-glutamic acid, L-tryptophan-L-glutamine, tryptophyl-L-isoleucine, indoles, 3-carboxytyrosine, sinapic acid (polyphenol), derivatives of boronic acid, propanoic acid and acetic acid. We observed positive trends of polyphenolic metabolites, hexadecyl ferulate, and 2,3-Dimethoxycinnamic acid in the feces of mice that ate broccoli, but those differences were not significant. Likewise, tryptophan metabolites N-oleoyl tryptophan, leucyl tryptophan, and indole propanoic acid showed a positive trend in mice that ate broccoli without any considerable difference. Meanwhile, L-tryptophan, indole acrylate, O-sulfotyrosine, cysteine-s-sulfate, pentanoic acid, and proline metabolites had positive significant differences with the DSS treatment as shown in Figure 3.3. Open source information about the metabolites of interest are reported in Table 3.2





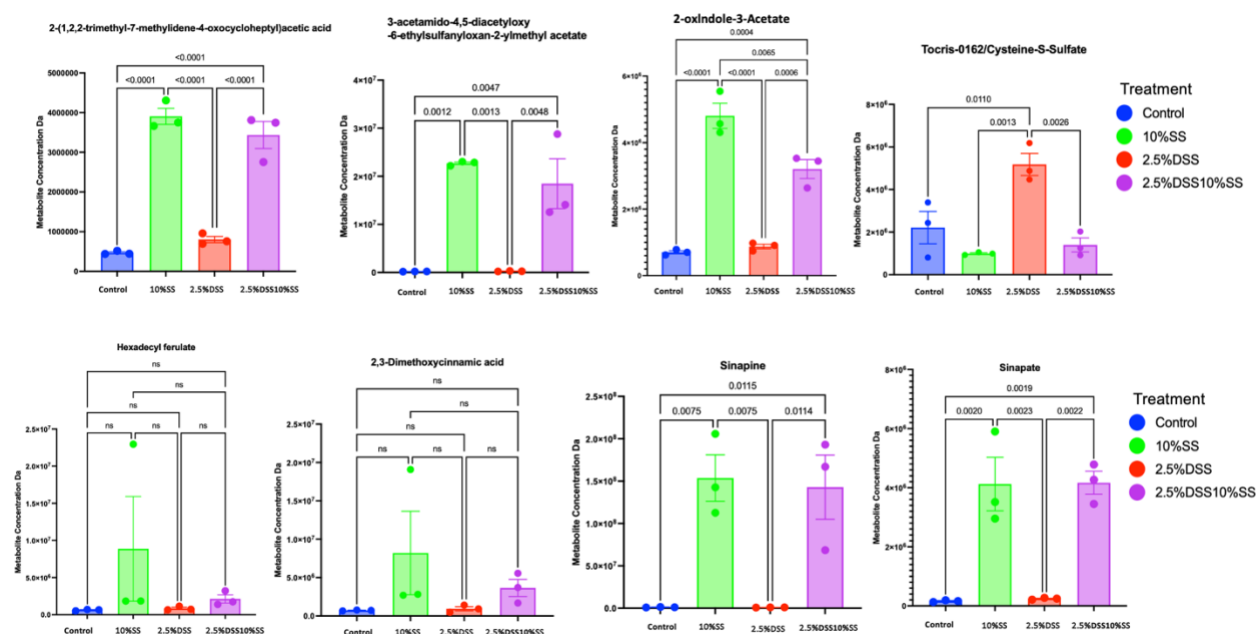


Figure 3.3: Bar plots showing the concentrations of fecal metabolites with significant effects in mice fed with a 10%SS diet, 2.5%DSS treatment, 2.5%DSS10%SS, compared with control groups (n=3 mice/group). Selected beneficial metabolites from steamed broccoli diet can potentially alleviate or are related to a specific metabolic pathway in inflammatory bowel disease. Numbers topping the box indicate significance levels of a post-hoc test following a one-way analysis of variance. Test that were not significant at an alpha level of 0.05 were indicated with ns. Abbreviations: DSS= Dextran Sulfate Sodium and SS= steamed broccoli sprouts.

Table 3.2: Open source information about annotated fecal metabolites of interest, Human Metabolomics Database or PubChem identification number, chemical formula, average molecular weight and CAS number.

| S/N | Name | HMDB ID or PubChem CID | Chemical Formula | Average Molecular Weight | CAS Registry number |
|-----|--------------------------------|------------------------|--|--------------------------|---------------------|
| 1 | Sulforaphane-N-acetyl-cysteine | HMDB0240561 | C ₁₁ H ₂₀ N ₂ O ₄ S ₃ | 340.47 | NA |
| 2 | Sabiden/D-Phenylalanine | HMDB0250791 | C ₉ H ₁₁ NO ₂ | 165.1891 | NA |
| 3 | Phenylalanyl Isoleucine | HMDB0028998 | C ₁₅ H ₂₂ N ₂ O ₃ | 278.352 | 22951-94-6 |
| 4 | Phenylalanyl Proline | HMDB0011177 | C ₁₄ H ₁₈ N ₂ O ₃ | 262.309 | 7669-65-0 |

Table 3.2 continued

| | | | | | |
|----|--|--------------------------|---|----------|--------------|
| 5 | Isoleucyl Proline | HMDB0011174 | C ₁₁ H ₂₀ N ₂ O ₃ | 228.292 | 37462-92-3 |
| 6 | Valyl Proline | HMDB0029135 | C ₁₀ H ₁₈ N ₂ O ₃ | 214.265 | 20488-27-1 |
| 7 | N-(N-(4-(((2,4-Diamino-6-pteridinyl)methyl)methylamino)benzoyl)glycyl)-L-glutamic acid | PubChem CID 326464 | C ₂₂ H ₂₅ N ₉ O ₆ | 511.5 | 71177-43-0 |
| 8 | L-Tryptophan-L-Glutamine | HMDB0029081 | C ₁₆ H ₂₀ N ₄ O ₄ | 332.3544 | NA |
| 9 | Tryptophyl-L-Isoleucine | HMDB0029086 | C ₁₇ H ₂₃ N ₃ O ₃ | 317.3828 | NA |
| 10 | Leucyl- Tryptophan | HMDB0028940 | C ₁₇ H ₂₃ N ₃ O ₃ | 317.3828 | NA |
| 11 | N-oleoyl tryptophan | HMDB0241968 | C ₂₉ H ₄₄ N ₂ O ₃ | NA | NA |
| 12 | Indole-Propanoic OR 2,3-1H-indol-3-ylmethyl amino)propanoic | PubChem CID 24802222 | C ₂₀ H ₁₉ N ₃ O ₂ | 333.4 | 149724-31-2 |
| 13 | 3-Indoleacrylate | HMDB0000734 | C ₁₁ H ₉ N ₂ O ₂ | 187.198 | 29953-71-7 |
| 14 | Pacitron/L-tryptophan | HMDB0000929 | C ₁₁ H ₁₂ N ₂ O ₂ | 204.2252 | 73-22-3 |
| 15 | 7-Hydroxyindole-2-carboxylic acid | PubChem CID 20039897 | C ₉ H ₇ N ₃ O ₃ | 177 | 84639-84-9 |
| 16 | 1-Meoxyindole-3-carbaldehyde | HMDB0040972 | C ₁₀ H ₉ N ₂ O ₂ | 175.184 | 67282-55-7 |
| 17 | L-Tyrosine, O-Sulfo- | HMDB0155722 | C ₉ H ₁₁ N ₂ O ₆ S | 261.252 | 956-46-7 |
| 18 | 3-carboxy tyrosine | PubChem CID 53728607 | C ₁₀ H ₁₁ N ₂ O ₅ | 225.2 | NA |
| 19 | 2,6-Difluoropyridine-3,5-diboronic acid pinacol ester | PubChem SID 458703181 | C ₁₇ H ₂₅ B ₂ F ₂ N ₂ O ₄ | 366.2 | 1204333-58-3 |
| 20 | Lysophosphatidylethanolamine (15:0/0:0) | HMDB0011502 | C ₂₀ H ₄₂ N ₂ O ₇ P | 439.523 | NA |

Table 3.2 continued

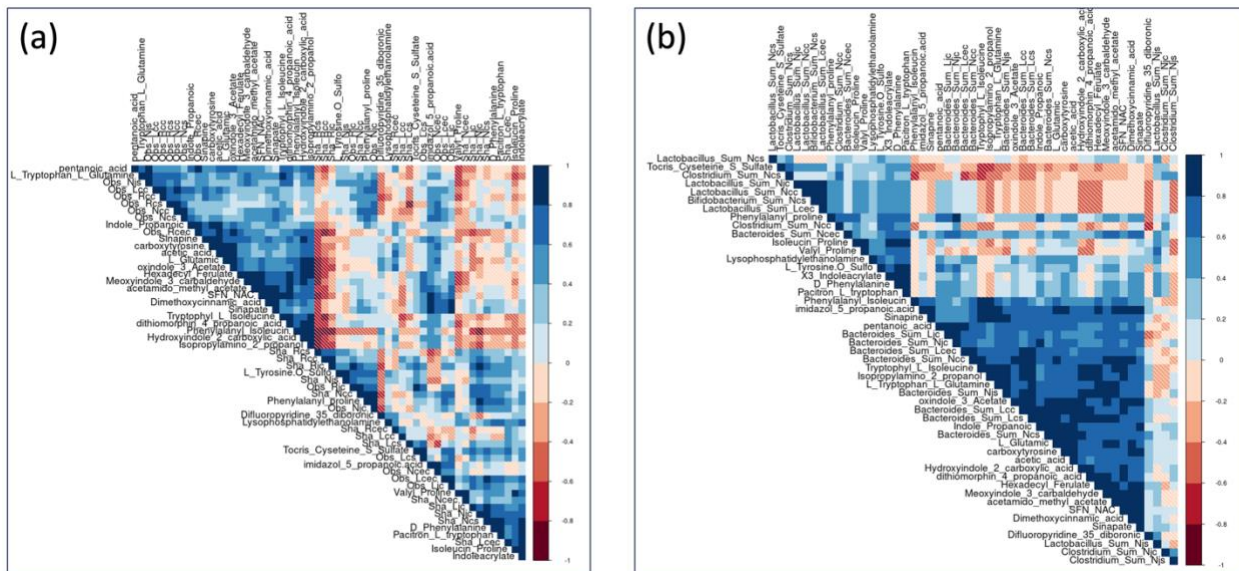
| | | | | | |
|----|---|-------------------------|--------------|---------|-------------|
| 21 | 2,3-dithiomorphin-4-ylpropanoic acid | ChemWhat Code 997648 | C11H20N2O2S2 | 276.42 | 691410-93-2 |
| 22 | 1-Isopropylamino-3-(4-(2-methoxyethoxy)phenoxy)-2-propanol | PubChem CID 193122 | C15H25NO4 | 283.36 | 30311-37-6 |
| 23 | (2S)-2-[(2-carboxy-2-oxoethyl)amino]-3-(1H-imidazol-5-yl)propanoic acid | HMDB0002271 | C6H8N2O2 | 140.058 | 1074-59-5 |
| 24 | (2S)-5 (diaminomethylideneamino)-2-[[[(2S)-2,4-diamino-4-oxobutanoyl]amino]pentanoic acid | PubChem CID 92266784 | C10H20N6O4 | 288.3 | NA |
| 25 | 2-(1,2,2-trimethyl-7-methylidene-4-oxocycloheptyl)acetic acid | PubChem CID 16720154 | C13H20O3 | 225.1 | NA |
| 26 | [(2S,2S,4S,5S,6R)-3-acetamido-4,5-diacetyloxy-6-ethylsulfanyloxan-2-yl]methyl acetate | PubChem CID 4347027 | C16H25NO8S | 391.4 | 49810-41-5 |
| 27 | Hexadecyl Ferulate | HMDB0039317 | C26H42O4 | 418.609 | 158306-36-6 |
| 28 | 2,3Dimethoxy cinnamic acid | HMDB0034315 | C11H12O4 | 208.211 | 14737-89-4 |
| 29 | Sinapine | HMDB0029379 | C16H24NO5 | 310.365 | 84123-22-8 |
| 30 | Sinapate | HMDB0032616 | C11H12O5 | 224.51 | 7362-37-0 |
| 31 | 2-oxindole-3-Acetate | HMDB0035514 | C10H9NO3 | 191.058 | 2971-31-5 |
| 32 | Tocris-0162/ Cysteine-S-Sulfate | HMDB0000731 | C3H7NO5S2 | 201.221 | 1637-71-4 |

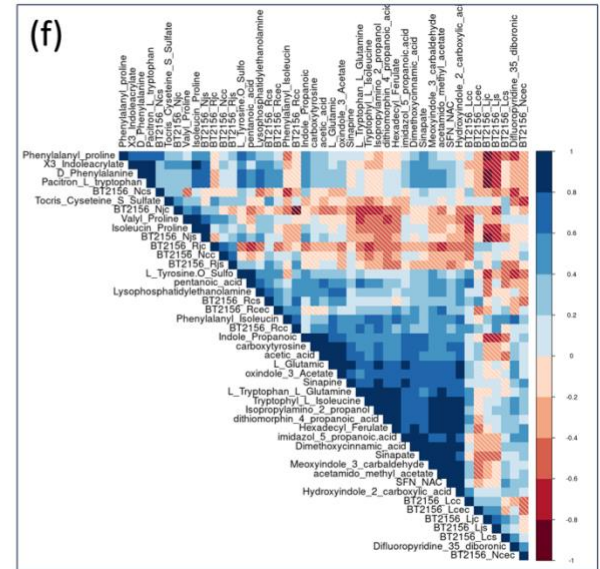
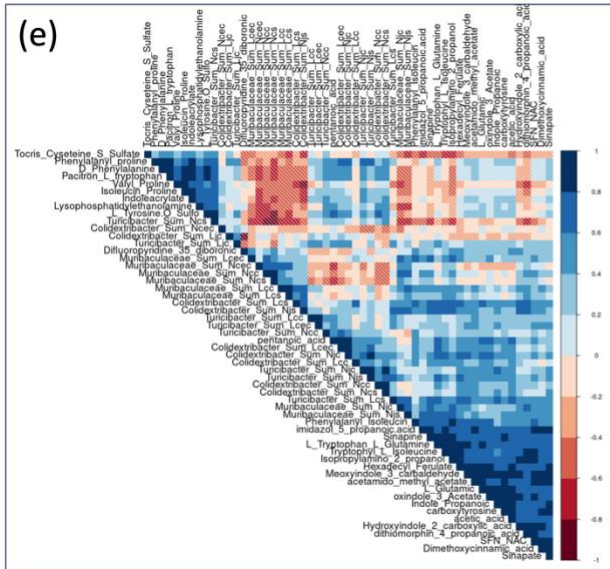
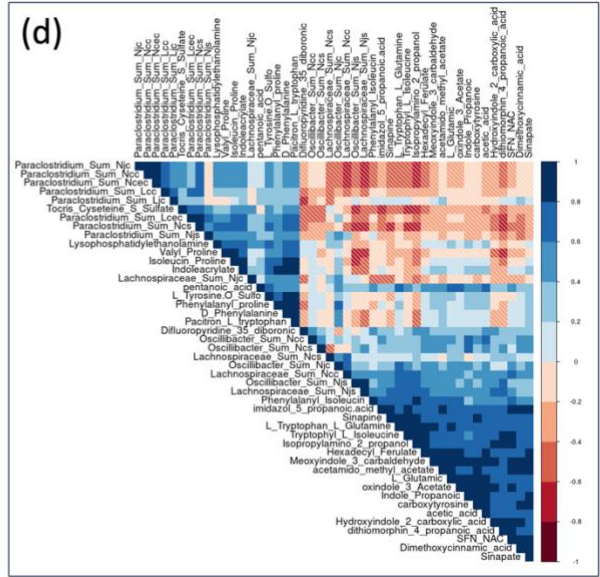
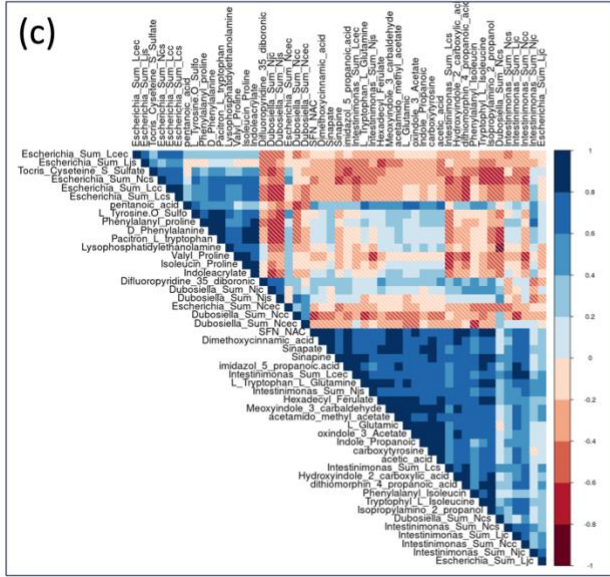
3.4 Correlation analysis between fecal metabolites, microbial richness, bacterial taxa, and *B. thetaiotaomicron*, *BT2160-2156* genes.

We further performed correlation analyses between the metabolites of interest and previously published data from this experiment on microbial richness, bacteria taxa, and *B.thetaiotaomicron* *BT2160-2156* genes (Holman et al. 2023). We observed strong relationships between metabolites and a selection of the hydrolyzing microbial populations, further highlighting the importance of microbially derived metabolites during broccoli dietary management of IBD, as shown in Figure 3.4. Cecal microbial richness had positive correlations with broccoli-increased beneficial metabolites, SFN-NAC, phenylalanyl-isoleucine, L-glutamic acid, tryptophyl-L-isoleucine, indoles, 3-carboxy tyrosine, sinapic acid, derivatives of propanoic acid and acetic acid, hexadecyl ferulate, and 2,3-Dimethoxycinnamic acid. Meanwhile, cecal microbial richness had zero or negative correlation with the DSS-increased metabolites such as L-tryptophan, indole acrylate, O-sulfotyrosine, cysteine-s-sulfate, and prolines. Colon scraping and content have similar strong positive correlation with broccoli beneficial metabolites such as L-glutamic (strongest correlation), L-tryptophan-L-glutamic, trsptophyl-L-isoleucine, indoles, 3-carboxytyrosine, sinapic acid, derivatives of propanoic acids, boronic acid and acetic acids, hexadecyl ferulate, and 2,3-Dimethoxycinnamic acid.

Metabolites SFN-NAC, phenylalanyl-isoleucine, L-glutamic, L-tryptophan-L-glutamic, tryptophyl-L-isoleucine, indoles, 3-carboxytyrosine, sinapic acid, derivatives of propanoic acids, boronic acid and acetic acids, hexadecyl ferulate, and 2,3-Dimethoxycinnamic acid showed positive relationships with *Bacteroides spp.* in the gut, especially from jejunum scrapings, colon content, and scrapings, *Intestinimonas* in jejunum scraping, colon, cecal contents and scrapings, and *Lachnospiraceae* in jejunum scraping, colon scrapings and cecal contents. There were

negative correlations between these metabolites and *Paraclostridium* in the cecal contents and colon scrapings, *Dubosiella* in the colon and cecal contents, *Escherichia* in the jejunum and colon scrapings and cecal content. Positive correlations were observed between D-Phenylalanine, L-tryptophan, indole acrylate, O-sulfotyrosine, cysteine-s-sulfate, and prolines and *Lactobacillus* in jejunum and colon scrapings, cecal and jejunum contents, *Paraclostridium* in the cecal contents and colon scrapings. Similar to *Bacteroides* in the gut, most of the broccoli-increased metabolites, SFN-NAC, phenylalanyl-isoleucine, L-glutamic, L-tryptophan-L-glutamic, tryptophyl-L-isoleucine, indoles, 3-carboxytyrosine, sinapic acid, derivatives of propanoic acids, boronic acid and acetic acids, hexadecyl ferulate, and 2,3-Dimethoxycinnamic acid positively correlated with *BT 2156* in the cecal content, *BT 2157-2158* in the cecal content and jejunum scrapings, *BT 2159* in cecal content, and *BT 2160* in the jejunum scraping.





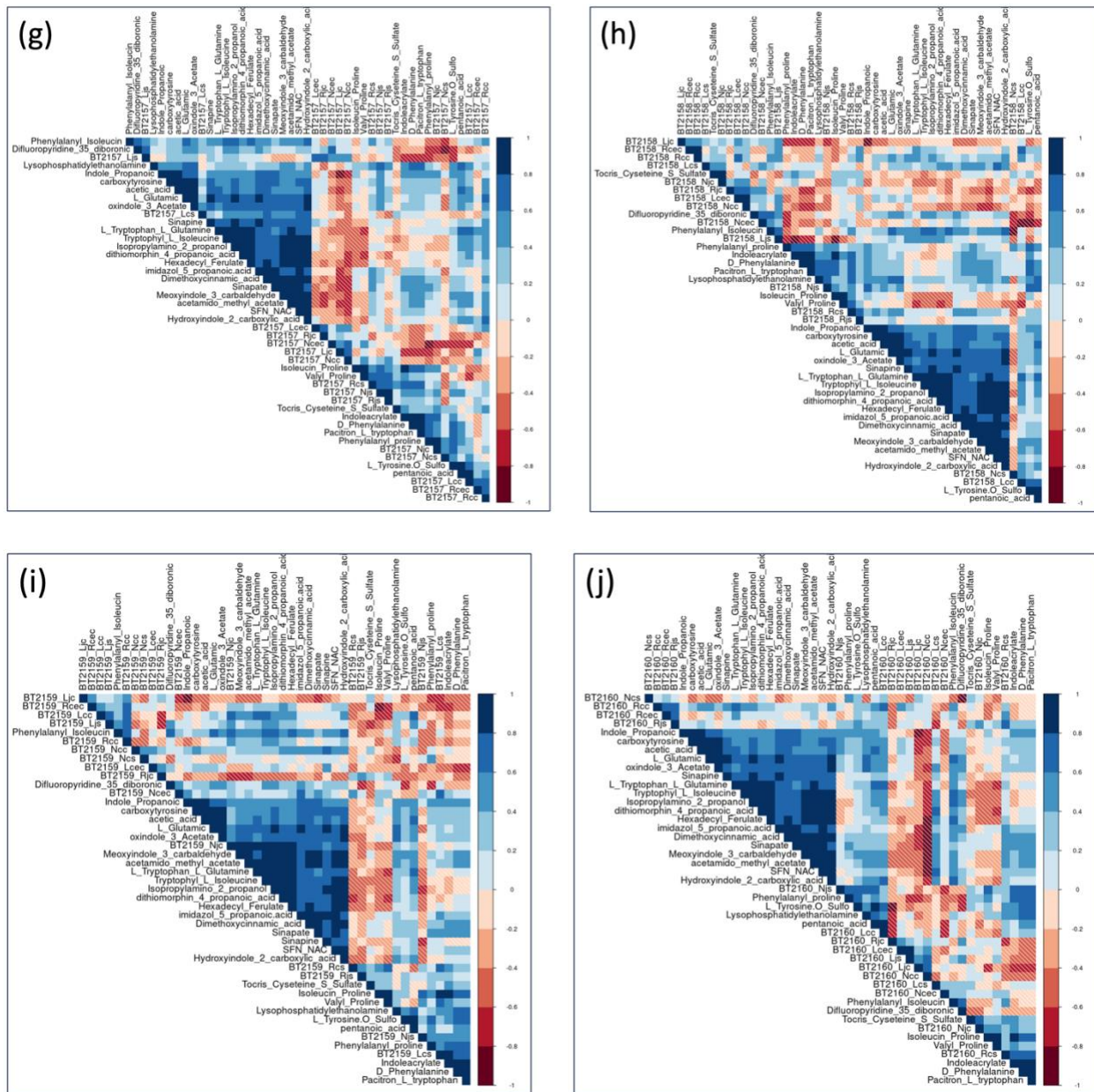


Figure 3.4: Correlogram of fecal metabolites, bacterial diversity metrics, IBD-associated bacterial taxa, and *B. thetaiotaomicron* genes (BT 2160-2156). The color scale by the plot illustrates the strength and direction of the pairwise association, which is determined by the correlation coefficient between each pair of variables at p values 0.05 or less.

3.5 Discussion

Broccoli sprouts diets have become of interest to nutritional scientists as a potential option for IBD management due to the presence of beneficial phytochemicals such as glucosinolates,

polyphenols, flavonoids, and fibers (Nagraj et al. 2020; Yanaka 2018; Bouranis et al. 2024). These dietary metabolites can be hydrolyzed by certain gut bacteria to increase the production of microbial-derived bioactive compounds with the capacity to modulate and alleviate IBD-induced inflammatory, oxidation, dysbiosis, and gut cellular damage pathological pathways (Liu et al. 2017; Catalkaya et al. 2020; Parada Venegas et al. 2019; Duan et al. 2023; Roager and Dragsted 2019). We have suggested that broccoli and other cruciferous vegetables could serve as potential nutritional options for IBD management by increasing microbial diversity and modulatory bioactive compounds with antioxidants, anti-inflammatories, and gut protective properties to alleviate IBD pathologies (Alaba et al. 2024). As part of this study, we have previously reported the beneficial effect of a 10% SS diet to restore IBD-related weight loss, decrease disease activity index and inflammatory markers, increase the metabolism of GLR to anti-inflammatory SFN and preserve healthy biogeographical patterns of diverse bacteria in the gut (Holman et al. 2023; Zhang et al. 2023). Although many studies have reported SFN as the active compound related to broccoli's nutritional benefit, other vital metabolites and the gut bacteria involved in their metabolisms still remain understudied. Therefore, this research reports the novel dietary and microbially hydrolyzed metabolites with specific anti-inflammatory, antioxidative, and gut protective effects and their associated bacteria communities after mice were fed with steamed broccoli sprouts diets as nutritional management for IBD in the DSS-mice model.

This study revealed a significantly increased SFN-NAC concentration in the 10% SS diet compared to the control and 2.5% DSS groups, which is expected as the base mouse diet does not contain GSLs, and bacteria are not known to spontaneously produce SFN conjugates. However, the administration of the diet did not significantly increase SFN-NAC in the 2.5% DSS + 10% SS group, though there was a trend of increase similar to the 10% SS group, which likely indicates

that GLR-converting bacteria were harmed or inactivated by the presence of DSS. Previous research indicated that high concentrations of NaCl can inactivate myrosinase (Guo et al. 2013), thus DSS treatment may perhaps affect bacterial myrosinase-like enzymes as well. This data is consistent with the previous report that suggests that SFN-NAC is upregulated in the fecal samples through microbial hydrolysis of glucoraphanin (Wu et al. 2023; Bouranis et al. 2024). SFN-NAC metabolite possesses antioxidant and anti-inflammatory properties in the gut with the ability to transform proinflammatory monocytes into macrophages, upregulate Treg cells to release IL-10 and modulate NFkB, STAT3 inflammatory, and activate NRF oxidative pathways (Liang et al. 2018; Fernandez-Prades et al. 2023; He et al. 2022; Negi et al. 2011). The concentrations of polyphenolic metabolites, sinapate, and sinapine were enormously significant in the fecal samples of mice that ate 10% SS and 2.5% DSS + 10% SS groups compared with control and DSS groups. This finding supports the importance of sinapic metabolites as one of the significant crucifer-derived phenolic compounds reported in the literature regarding the antioxidant and anti-inflammatory benefits of the broccoli diet (Olszewska et al. 2020). Sinapic acid possesses the ability to upregulate GSH and decrease MDA, NFkB, IL1 β , IL-6, TNF α , iNOS, COX-2, and MCP-1 gene expression (Ayaz et al. 2008; Choi et al. 2016). It can also protect gut barriers against damage via I-CAM expression and mitigate psychological stress during IBD (Park et al. 2017; Kim et al. 2021; Choi et al. 2016). Hexadecyl ferulate and 2,3-Dimethoxycinnamic acid are phenolic metabolites with antioxidative and anti-inflammatory effects against COX-2 and NFkB pathways (Jayaprakasam et al. 2006; Atta et al. 2017; Murad et al. 2016).

Amines, D-phenylalanine, phenylalanyl isoleucine, 3-carboxy tyrosine, and L-glutamine were significantly increased in the 10%SS when compared with the control and 2.5%DSS, and in the 2.5%DSS10%SS mice when compared with the 2.5%DSS mice. Phenylalanine and tyrosine

metabolites can be beneficial or detrimental during IBD, depending on the conjugates and pathways engaged (Montenegro-Burke et al. 2021; Uranga et al. 2016). For instance, O-sulfotyrosine, upregulated in our DSS mice, has been implicated in leukocyte cell adhesion for inflammatory invasion (Stewart and Ronald 2022). Meanwhile, conjugating a carboxyl group and tyrosine is associated with COX-2 inhibition, which was revealed as upregulated 3-carboxytyrosine in mice that ate broccoli with or without DSS (Levina et al. 2018). In our data set, D-phenylalanine (sabiden) and phenylalanyl isoleucine increased in the 2.5%DSS10%SS and 10%SS groups, which could alleviate oxidative stress and recruit Tregs into the gut against inflammation (Wang et al. 2020; Guan et al. 2020). Glutamic metabolite was increased with diet with and without DSS. This metabolite possesses the ability to protect the mucosal and cellular layer of the gut from cytokines, NFkB, TNF α , and nitric oxidative stress damage and increase epithelial proliferation to maintain tight junction and prevent pathologic translocation of bacteria into the gut (Lee et al. 2022; Xu et al. 2021; Santos et al. 2014; Mondello et al. 2010). Similarly, our data identified increased concentrations of tryptophan metabolites and indoles, L-Tryptophan-L-glutamine, tryptophyl-L-isoleucine, 7-dihydroxyindole-2-carboxylic acid, 1-methoxyindole-3-carbaldehyde with antioxidative, anti-inflammatory and gut protective benefits, after broccoli sprouts diet (Zhang et al. 2021; Geng et al. 2018; Vega-Galvez et al. 2023). Thus, these results confirm that tryptophan microbial metabolism may play a significant role in the beneficial effects of broccoli on IBD management. We observed an increased level of L-tryptophan with DSS treatment when compared with the control and broccoli diet, which could be due to the activities of tryptophan to recruit T-cells to the site of damage in response to the presence of cytokines during IBD (Ding et al. 2020; Esperanza et al. 2020; Sikalidis 2015). The role of tryptophan and glutamine conjugate, L-Tryptophan-L-glutamine, increased with 10%SS and 2.5%DSS10%SS, which

buttress the role of glutamate rings in tryptophan/kynurenine metabolic pathway (Andrade et al. 2015; Santos et al. 2014; Moroni 1999). The broccoli diet is fiber-rich, which serves as a substrate for microbial production of SCFAs. The metabolites identified in our data were mainly propanoic/propionic, boronic acid and acetates, such as 2-oxindole-3-acetate, 1-isopropylamino-3-(4-(2-methoxyethoxy)phenoxy)-2-propanol, 2,6-difluoropyridine-3,5-diboronic acid pinacol ester, 2,3-dithiomorpholin-4-ylpropanoic acid and 2-(1,2,2-trimethyl-7-methylidene-4-oxocycloheptyl) acetic acid with broccoli sprouts diet suggesting the gut protective, anti-inflammatory and antioxidative and microbial diversity effects of SCFAs in benefits of broccoli diet against IBD (Yan et al. 2023; Gao et al. 2018; Yang et al. 2021).

The production of microbially-derived metabolites in the gut depends mainly on the bacteria communities engaged during the hydrolysis of dietary compounds from broccoli sprouts. We have reported that steamed broccoli sprout diet supports communities' richness, especially *Bacteroides spp.*, which are involved in GLS hydrolysis to SFN (Holman et al. 2023; Zhang et al. 2023). We also reported biogeographical patterns of bacteria richness in the gut, with higher *BT 2159-2156* genes in jejunum scrapings, cecal contents and colon scrapings after the broccoli diet with and without DSS. The *Bacteroides spp.* and *BT2160-2156* operon were increased in cecal contents after the broccoli diet with DSS (Holman et al. 2023). To identify bacteria communities and taxa patterns associated with microbially-derived metabolites, we performed correlation analysis between fecal metabolites, microbial richness, bacterial taxa, and *B. thetaiotaomicron*, *BT 2160-2156* genes. Our results revealed a positive relationship between beneficial metabolites upregulated with the broccoli sprouts, such as SFN-NAC, L-glutamic, L-tryptophan-L-glutamic, tryptophyl-L-isoleucine, indoles, 3-carboxy tyrosine, sinapate, derivatives of propanoic acids, boronic acid and acetic acids, hexadecyl ferulate, and 2,3-Dimethoxycinnamic, and observed

richness, commensal bacteria taxa, *Bacteroides spp.*, *Intestinimonas*, *Oscillibacter* and *Lachnospiraceae*, mainly in the colon, cecal and jejunum regions of the gut. These findings support the report that GLS hydrolysis to SFN occurs majorly in the colon and cecum (Zhang et al. 2023; Lai et al. 2010), primarily due to *Bacteroides spp.* enriched in the colon (Liou et al. 2020; Frank et al. 2007). *Bacteroides thetaiotaomicron*, *BT 2160-2156* genes are required for GLS hydrolysis in the gut (Liou et al. 2020), and our finding showed a positive relationship between beneficial metabolites and *BT 2160-2156* genes in the colon and cecum. *Intestinimonas* are involved in the microbial hydrolysis of amine metabolites and SCFAs production as anti-inflammatory mechanisms and protection against intestinal oxidative stress and gut damage (Du et al. 2020; Riaz Rajoka et al. 2021; Bui et al. 2020). Similarly, *Lachnospiraceae* has been reported to protect against the risk of Crohn's disease in the ileocolic region and ulcerative colitis rectosigmoiditis in the gut by hydrolysis dietary fibers for SCFA and amines for phenolic acids production (Li et al. 2023; Zhang et al. 2021; Frank et al. 2007; Zaplana et al. 2023; Vita et al. 2024). The *Oscillibacter* has been associated with microbial metabolism of polyphenols, decreased hyperlipidemia, recovery from colitis and increased gut protection (Liu et al. 2022; Zhang et al. 2022; Haiou et al. 2024; Shi et al. 2022). Meanwhile, our data showed positive correlations between cecal and colonic-located *Lactobacillus* and *Paraclostridium* with broccoli-enriched metabolite, D-Phenylalanine, and DSS enriched metabolites, L-tryptophan, indole acrylate, O-sulfotyrosine, cysteine-s-sulfate, and prolines, (Vita et al. 2024). Proline residues and tryptophan are targets for *Lactobacillus* hydrolysis to increase aryl hydrocarbon receptor sensitivity and decrease gut inflammation (Hou et al. 2023; Geng et al. 2018). *Paraclostridium* is associated with pathological development and severity of ulcerative colitis, such as intestinal barrier damage, colon rupture, and bloody stool (Kutsuna et al. 2019; Kutsuna et al. 2018). Bacterial diversity and metabolic

activities prominent in the colon and cecum may be associated with less pH in regions favorable for hydrolysis of dietary metabolites (Press et al. 1998; Nugent et al. 2001; Newmark and Lupton 1990).

3.6 Conclusion, limitations and future direction

Steamed broccoli sprouts demonstrate significant potential as a nutritional intervention for managing inflammatory bowel disease (IBD) by modulating fecal metabolites, such as sulforaphane N-acetyl cysteine, amines, indoles, phenolic metabolites and short-chain fatty acids, associated with anti-inflammatory, antioxidative, and gut-protective effects. This study elucidates novel microbially derived metabolites and their associations with specific bacterial communities, such as *Bacteroides spp.*, *Intestinimonas*, *Oscillibacter*, *Lachnospiraceae*, and *Bacteroides thetaiotaomicron*, *BT 2160-2156* genes, shedding light on the intricate mechanisms underlying the beneficial effects of broccoli in IBD management. Additionally, identifying increased concentrations of crucial metabolites such as sulforaphane N-acetyl cysteine (SFN-NAC) and sinapic acid highlights their potential as critical mediators of the observed therapeutic effects. We highlighted these specific regions of metabolites and microbial activities in the gut. Further research should focus on elucidating the targeted nutritional interventions with broccoli-derived metabolites that interact with the gut microbiota to mitigate IBD pathology in diverse age groups. Additionally, investigations should include translating these findings into human trials to validate the efficacy of steamed broccoli sprouts as a viable dietary approach for clinical IBD management.

CHAPTER 4

BROCCOLI SPROUTS ALLEVIATE ULCERATIVE COLITIS IN MICE BY INCREASING DIETARY AND MICROBIAL METABOLITES: DIFFERENTIAL EFFECTS IN YOUNG AND ADULT MALE AND FEMALE MICE

4.1 Abstract

Inflammatory bowel disease is a chronic condition with a higher risk and disease severity in older adults, especially women. Raw broccoli sprouts diet may cover benefits in early life through the anti-inflammatory bioactive compounds and increase microbial diversity. Still, these benefits have not been explored with differential diet preparation, gender, and age groups. Therefore, we assessed the potential effect of steamed and mildly heated broccoli sprouts on plasma metabolite concentrations in young and adult and female and male mice with ulcerative colitis type of inflammatory bowel disease. Our data revealed protective effects of a steamed broccoli sprouts diet in adult female mice against colon damage, weight loss, and disease activity, with increased plasma concentrations of dietary metabolites, such as glucoraphanin and glucoerucin, and microbial metabolites such as iso-ferulic acid, flavanone-4-glucuronide, and denticulaflavonol. Meanwhile, adult male and younger mice had similar anti-colitis benefits with mildly heated broccoli sprout intervention with increased concentrations of dietary and microbial-derived metabolites such as catechin, proanthocyanidins, short-chain fatty acids, and glutathione derivatives. This research generates novel information for future targeted applications of different broccoli sprouts diets as dietary interventions for the nutritional management of ulcerative colitis in specific age groups and genders.

4.2 Introduction

Inflammatory bowel disease (IBD) is a gastrointestinal tract pathological condition categorized into two main presentations: ulcerative colitis (UC) and Crohn's disease (CD). IBDs affect millions of people worldwide (Seyedian et al. 2019; Tian et al. 2017). In the United States, over 3 million have been diagnosed with IBD (Han et al. 2020; Xu et al. 2021), and the prevalence of IBD has increased substantially in recent years, causing a significant burden to healthcare systems (Ng et al. 2017; Jairath and Feagan 2020). Chronic colon inflammation, dysbiosis, and intestinal damage are some of the characteristics of both presentations, with nuances in severity and location of symptoms by disease and age. Onset is often in children and young adults, although it can take years to be formally diagnosed, but 10-year longitudinal study revealed that about 45% of patients (both CD and UC) are adults between 30-59 years and about 48% are patients older than 60 years (Lewis et al. 2023). Similarly, the risk of IBD is also high among female adults over 50 years of age (8,9), which is attributed to immune and microbial interactions with estrogens (Jacenik et al. 2019).

The primary cause of IBD is still unknown, and there are multiple triggers. Age and particularly puberty are linked to disease onset (Papa et al. 2012; Kowalska-Duplaga et al. 2019), but stress, environmental conditions, and diet are some of the factors linked to the high incidence of IBD (Goodman et al. 2020; Ge et al. 2022). As diet is a source of anti-inflammatories, antioxidants, and a strong modifier of gut microbial communities, it has long been a strategy for mitigating IBD symptoms. Although there was no significant difference between the dietary habits of adults with and without IBD, some nutritional surveys have revealed interesting associations between IBD risk and diet - particularly unhealthy consumption of diets high in sugar, fat, and meat protein (Han et al. 2020; Xu et al. 2021). Specifically, dietary total meat consumption

increases the risk of IBD by almost 40% (Talebi et al. 2023), as does more energy drinks, as well as regular soda, than adults without IBD (Han et al. 2020; Xu et al. 2021). So-called “Western diets”, which include contain highly processed foods which tend to contain high fats, red meat or processed protein, and simple carbohydrates, may promote IBD pathogenesis (Mithul Aravind et al. 2021; Catalkaya et al. 2020; Lin et al. 2017; Shen et al. 2014), although dairy proteins which are also high in these diets are protective against IBD (Talebi et al. 2023). Thus, specific foods may play less of a role in disease onset than the overall pro/anti-oxidative or inflammatory potential of a diet.

Consuming diets loaded with fiber, antioxidants, and phytochemicals have been shown to provide anti-inflammatory benefits, promote a healthy gut, aid digestion, and lower the risk of IBD (Deng et al. 2023; Alaba et al. 2024). Cruciferous vegetables are a diverse group of economically important plant species, including broccoli, cauliflower, cabbage, kale, bok choy, brussels sprouts, collards, turnips, and radishes. Cruciferous vegetables are representative of a healthy diet that promotes good health and well-being (Statovci et al. 2017; Kassem et al. 2023), and contain numerous bioactive phytochemicals with anti-oxidant and anti-inflammatory properties (Alaba et al. 2024). Previous studies have linked broccoli consumption to protection against dysbiosis, chronic gut inflammation, and IBD risks, however; little research is available on the processing methods that confer these protective benefits, as preparation can affect the location of benefits in the gut.

The methods of broccoli preparation significantly impact the presence of dietary metabolites (Wu et al. 2016; Wang et al. 2018; Zhang et al. 2023; Charron et al. 2020; Yuan et al. 2009), as mild heat treat preserves broccoli-sourced myrosinase but inactivates epithiospecifier protein which results in high dietary anti-inflammatories which are absorbed in the stomach and

duodenum, while heat treatment inactivates both enzymes and preserves dietary glucosinolates which instigate microbially derived metabolites in the large intestines (Holcomb et al. 2023; Zhang et al. 2023; Holman et al. 2023; Li et al. 2013). For instance, a blanched broccoli diet decreased SFN metabolites and promoted microbial interconversion into erucin metabolites in healthy human subjects (Saha et al. 2012), while steamed broccoli diet and juice increased SFN levels with decreased inflammatory markers and dysbiosis in DSS-mice (Samuel et al. 2015; Zhang et al. 2023; Holman et al. 2023; Li Y, Zhang T, Holman J, et al. 2022). Another study compared the disparate availability of SFN and erucin metabolites in extraintestinal tissues after female hairless mice consumed steamed, raw, or mildly heated broccoli sprouts. These researchers reported mildly heated broccoli preparation with the most abundant presence of the microbially derived SFN and erucin metabolites (Bricker et al. 2014). Since younger CD patients experience more small intestine-based symptoms which older CD patients experience more colitis, and since puberty and immune development modulates microbial communities, age and immune development may make microbial communities more or less receptive to change (Holcomb et al. 2023), additional investigation is required to identify the best broccoli processing strategies that can provide the most significant benefits to create targeted treatment plans for different age and sex groups of people with IBD.

In this study, we aim to assess the effect of steamed and mildly heated broccoli preparations using a comprehensive panel of untargeted metabolomics (Clish 2015) to annotate the concentrations of dietary and microbial metabolites. We hypothesized that steamed and mildly heated broccoli sprouts may differentially increase the protective properties of broccoli with age (young and adult) and sex (male and female)-specific benefits against IBD. To explore the potential benefits of broccoli sprouts against IBD, the metabolites from steamed (ST) and mildly

heated (MH) broccoli in male and female, young and adult, were compared with dextran sodium sulfate-induced ulcerative colitis mice. Advanced untargeted metabolomic approaches have rarely been used to compare different preparations of broccoli and their effectiveness in producing microbial metabolites with bioactivity on different age and sex groups. Our research identified the differentially expressed metabolites between different sexes and age groups that may be beneficial against IBD risk. These findings provide relevant information on personalized IBD nutritional management for adults and women at highest risk of IBD (Lewis et al. 2023; Weisman et al. 2023) through using broccoli sprout preparation as part of an IBD nutrition intervention.

4.3 Methods

4.3.1 Diet preparation

We purchased raw broccoli sprouts from a local grocery store (Shaw's, ME) and then steamed them for 10 minutes over boiling water or mildly heated them at 60 °C in a water bath for 10 minutes, after which both preparations were freeze-dried and ground into fine powder. The steamed and mildly heated broccoli sprout powders were mixed individually with purified AIN93G powder (ScottPharma Solutions, Marlborough, MA) to make either a 10% (w/w) steamed diet or 10% (w/w) mildly heated broccoli diet.

4.3.2 Animals and experimental design

The animal protocol was approved by the Binghamton University IACUC (protocol number 882-22). Male and female (n = 4 of each per treatment group), young (four weeks old) and mature (eight weeks old) Specific Pathogen Free (SPF) C57BL/6 mice were purchased from Jackson Laboratories (Bar Harbor, Maine). After acclimation to the facility, mice were randomized into 12 experimental groups based on broccoli diet preparation, age, and sex, as shown in Table 1. Mice

were housed in individual cages in a pathogen-free, humidity- and temperature-controlled room under a 12:12 hour light: dark cycle at the School of Pharmacy and Pharmaceutical Sciences, SUNY Binghamton University (Johnson City, New York). The mice in the broccoli groups were fed for 7 days, after which colitis was induced for five days in all the mice with 2% DSS added to the drinking water, followed by a five day recovery period in which mice received the broccoli diet without DSS (Zhang et al. 2023; Holman et al. 2023).

Table 4.1: Classification of experimental groups based on broccoli diet, age and sex.

| Cage # | Experimental group | Cage # | Experimental group |
|---------------|--|---------------|---|
| Cage 1 | 4 week old (young) male control with DSS | Cage 7 | 8 week old (mature) male control with DSS |
| Cage 2 | 4 week old (young) female control with DSS | Cage 8 | 8 week old (mature) female control with DSS |
| Cage 3 | 4 week old (young) male MH with DSS | Cage 9 | 8 week old (mature) male MH with DSS |
| Cage 4 | 4 week old (young) female MH with DSS | Cage 10 | 8 week old (mature) female MH with DSS |
| Cage 5 | 4 week old (young) male ST with DSS | Cage 11 | 8 week old (mature) male ST with DSS |

Table 4.1 continued

| | | | |
|--------|---------------------------------------|---------|--|
| Cage 6 | 4 week old (young) female ST with DSS | Cage 12 | 8 week old (mature) female ST with DSS |
|--------|---------------------------------------|---------|--|

DSS- dextran sodium sulfate; ST- steamed broccoli diet; MH- mildly heated broccoli diet.

4.3.3 Assessment of colitis and tissue harvest

Fresh fecal samples were collected daily. Body weight (BW), fecal occult blood, activity levels, and appearance were monitored daily for colitis assessment. Disease activity index (DAI) scores were calculated daily based on the sum of the weight loss, the rate of diarrhea, and the hematochezia. Weight loss percentage was scored as 0 for <1%, 1 for 1-5%, 2 for 6-10%, 4 for >15%. Stool consistency was scored 0 for normal, 2 for loose stool, and 4 for diarrhea. Hematochezia scored 0 for absence and 2 for presence. After five days of DSS and five days of recovery, mice were sacrificed for tissue harvest. Blood samples were obtained by direct cardiac puncture and collected in heparinized tubes. Colon tissues were collected and measured for length. Statistical analysis was performed for BW, DAI scores, and colon length differences among treatment groups based on age and sex using One-way ANOVA at $p < 0.05$ with Tukey's post-hoc test.

4.3.4 Metabolomics analysis

Plasma was collected from blood samples via centrifuge at 3000 rpm for 10 minutes at 4 °C and stored at -80°C for metabolomics analysis. Aliquots of 10 µl serum samples were added to 70 ul of extraction buffer (40% acetonitrile, 25% methanol, and 35% water). The solution was incubated on ice for 10 minutes and centrifuged at 13000 rpm for 20 mins at 4°C. The precipitated metabolites were aliquoted into fresh tubes, vacuum dried and reconstituted into 50%

acetonitrile/water for analysis. Liquid chromatography-mass spectrometry (LC-MS) data acquisition and processing were performed using trapped ion mobility spectrometry time-of-flight machines (timsTOF), according to the previous report (Alsoud et al. 2022). The extracted proteins were analyzed using a UHPLC system (Bruker Intensity Solo 2 C18 column, 2.1mm x 100 mm; MS system: Bruker timsTOF Pro 2, San Jose, CA) with 3 µl of injection of each sample and blanks per column at liquid phase conditions shown in Table 2. Metabolites were identified from LCMS data preprocessed with an in-built Bruker’s MetaboScape 2023b and MetaboAnalyst 5.0 (<http://www.metaboanalyst.ca>) data analysis software (Pang et al. 2022) to obtain the retention time, mass charge ratio, molecular weight and peak intensity, metabolites name and formula for each sample using several libraries (Esperanza et al. 2020; Peng et al. 2021).

Table 4.2: Liquid Chromatography conditions for metabolomics.

| Time (min) | A (%) | B (%) |
|-------------------|--------------|--------------|
| 0.00 | 98.0 | 2.0 |
| 1.00 | 98.0 | 2.0 |
| 15.00 | 2.0 | 98.0 |
| 17.00 | 2.0 | 98.0 |
| 18.10 | 98.0 | 2.0 |
| 20.00 | 98.0 | 2.0 |

A: 95:5 water:acetonitrile with 0.1% formic acid

B: acetonitrile with 0.1% formic acid. Flow rate of 0.3 mL/min

4.3.5 Metadata and statistical analyses

The metadata was pre-processed in R to remove duplicate metabolite calls and correct for peak intensity errors before importing into MetaboAnalyst 5.0 (Pang et al. 2022). After that, the data were normalized by log transformation. Univariate One-way ANOVA analysis was performed at $p < 0.05$ in a scatter plot with Fisher's post-hoc test to annotate specific metabolites of interest that are statistically different across the experimental groups in box plots. We performed unsupervised and supervised discriminant analysis for sample and group variation. The unsupervised principal component analysis (PCA) made the 2-way comparison, while multigroup supervised partial least squares discriminant analysis (PLS-DA) and sparse PLS-DA (sPLS-DA) to reduce variability and improve the estimate. Hierarchical clusters were performed with heatmaps to observe the correlation between the experimental groups and metabolite concentration. Quantitative enrichment analysis was conducted to identify metabolic patterns compared with KEGG databases represented as bubble plots and enrichment ratio graphs. The differential expression within the treatment groups reflects the metabolic pathways associated with the metabolites based on broccoli diets, age, and sex.

4.4 Results

4.4.1 Body Weight, DAI scores and Colon length

The results from this experiment showed that MH and ST broccoli diets differentially decreased the severity of DSS-induced colitis based on age and sex. The ST diet restored weight loss in young male and adult female mice, while MH restored BW in young female and adult male mice (Figure 4.1a). Both the MH and ST diets significantly decrease DAI scores in young female and male, and adult male mice, while only the ST diet decreased DAI in adult female mice (Figure 4.1b). The MH and ST diets significantly restored colon and rectum length in young male and

adult female mice, while none of colon and rectum length in adult males were restored (Figure 4.1c).

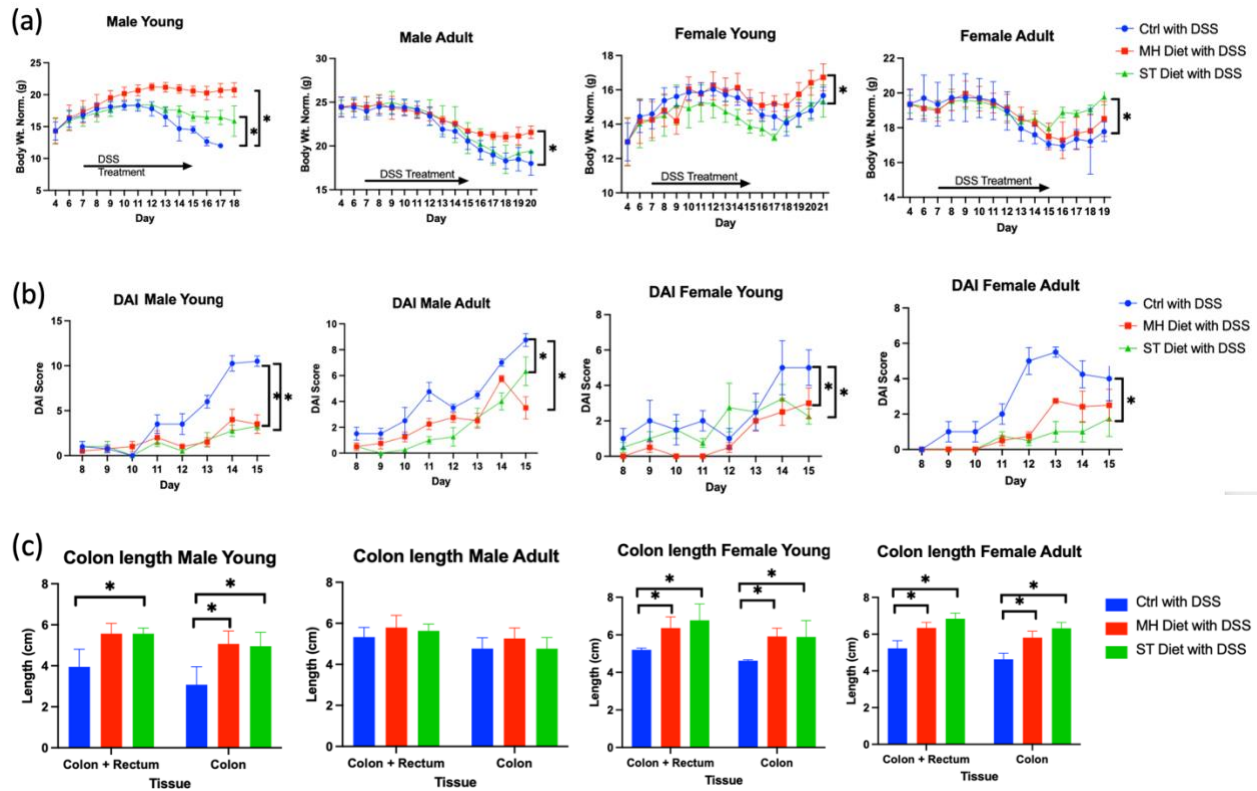


Figure 4.1: Mildly heated or steamed broccoli sprout diets improve weight gain and colon growth and reduce disease activity index by age and sex of mice with chemically induced colitis. One-way ANOVA ($p < 0.05$) graphs of (a) body weight difference; (b) DAI score difference, and (c) colon length difference of male and female young, male and female adult groups. Abbreviations: DAI=disease activity index, g=grams, and cm=centimeter.

4.4.2 Univariate ANOVA and discriminant analyses of metabolites in MetaboAnalyst 5.0

Further analysis with supervised PLS-DA showed intergroup clustering of the data set, with PC 1 at 19.9% and PC 2 at 11.8% (Figure 4.2a). Further analysis with supervised PLS-DA plots showed the data set's intergroup clustering, except for the young male groups, with PC 1 at 9.6% and PC 2 at 11.5% (Figure 4.2b). We conducted sPLS-DA, which separated the young F

control and young F MH groups from other groups, and the result showed the inter-clustering with component 1 at 10% and component 2 at 10.1% (Figure 4.2c).

The untargeted metabolites analysis we conducted identified 2572 metabolites. After filtering the data in R, this was reduced to 848 metabolites imported in MetaboAnalyst for univariate one-way ANOVA at $p < 0.05$. The result showed 476 metabolites with significant increased or decreased concentrations across the twelve experimental groups in a scatter plot (Figure 4.2d). These differential concentrations are glucosinolates, flavonoids, polyphenols, short-chain fatty acids, amino acids, tryptophan, carnitine derivatives and organic acid metabolites. The post-Hoc test shown in box plots (supplementary Figure A.1) highlight some significant metabolites of interest such as glucoerucin, glucoraphanin, isoferulic acid, denticulaflavonol, equol 4'-O-glucuronide, propionic acid, ethyl heptafluorobutyrylacetate, dilauryl thiodipropionate, 3-hydroxydodecanoic acid, 2-oxo-tetradecanoic acid, acetylcysteine, taurine, indolelactic acid, gamma-CEHC, alpha-tocopherol succinate, hippuric acid, nicotine glucuronide and uridine triphosphate glucose associated age, diet preparation and sex difference across the groups. The ST diet increased glucosinolate and flavonoid metabolites such as glucoerucin, glucoraphanin, denticulaflavonol and 4',5-dihydroxy-3,3'-dimethoxy-6, 7-methylenedioxyflavone-4'-glucuronide in the adults and young female mice. Mainly, glucoraphanin, denticulaflavonol, and 4',5-dihydroxy-3,3'-dimethoxy-6, 7-methylenedioxyflavone-4'-glucuronide had the highest concentrations in the adult female ST group, while isoferulic acid 3-sulfate was highest concentrations in adult female MH group. Meanwhile, propionic acid, dilauryl thiodipropionate, ethyl heptafluorobutyrylacetate, 5-(3',4',5'-trihydroxyphenyl)-gamma-valerolactone-3'-O-sulphate and 3'-O-methyl(-)-epicatechin were highest in young female MH compared with the ST group. Similarly, L-Palmitoylcarnitine, linoleyl carnitine and heptadecanoyl carnitine were highest in

young female MH. Acetylcysteine and 2-oxo-tetradecanoic acid were highest in young males and female broccoli diet groups, respectively.

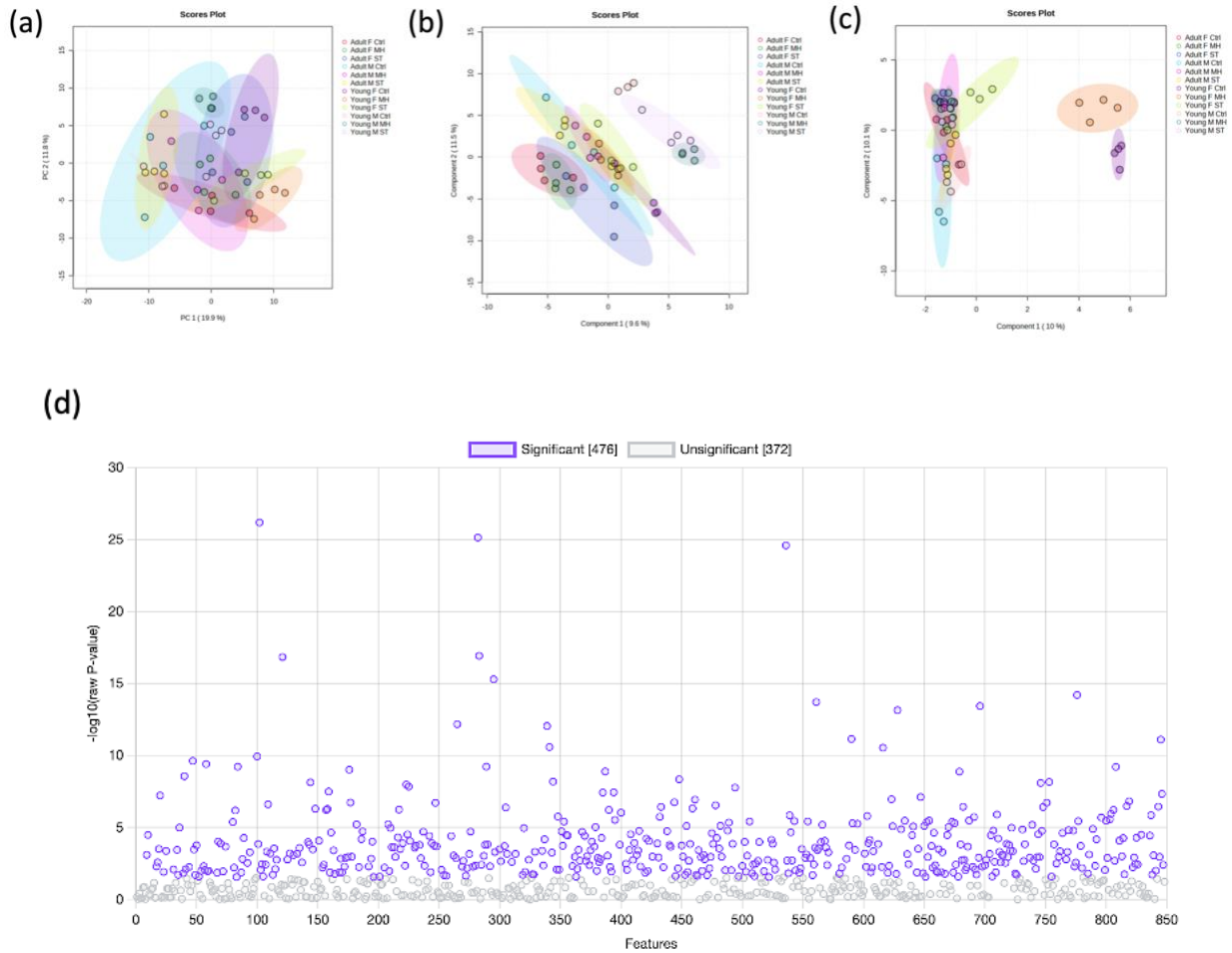


Figure 4.2: Serum metabolites were differentially present in mice of different ages and sexes, and the preparation of broccoli sprouts. (a) PCA plots with PC 1 at 19.9% and PC 2 at 11.8%; (b) PLSDA plots with PC 1 at 9.6% and PC 2 at 11.5%; (c) further analysis with sPLSDA with component 1 at 10% and component 2 at 10.1%. (d) The univariate ANOVA analysis at $p < 0.05$ showed 476 metabolites differentially expressed across the experimental groups. Abbreviations: PCA= principal component analysis, PLSDA= partial least squares discriminant analysis, sPLSDA=supervised PLSDA, PC= Principal Component.

4.4.3 Hierarchical clustering of differentially expressed plasma metabolites in heatmaps

The heat maps show the metabolites clusters contributing to the beneficial effect of the broccoli sprouts intervention across all the treatment groups in Figure 4.3a. The top 150

metabolites include glucosinolates, flavonoids, polyphenols, tryptophan, carnitine and amino acid derivatives with antioxidative and anti-inflammatory activities as shown in Figure 4.3b. The specific metabolites of interest that were increased and decreased between the experimental groups with treatment preparation, age, and sex are reported in supplementary Figure A.2. We compared the differential effect of diet preparation on metabolite concentration with age and sex. The ST diet increased glucoerucin mostly in young females, while carnitine derivatives were increased with the MH diet in young males. The ST diet increased glucoerucin in adult male and female mice and decreased leukotriene D4 in males compared to MH.

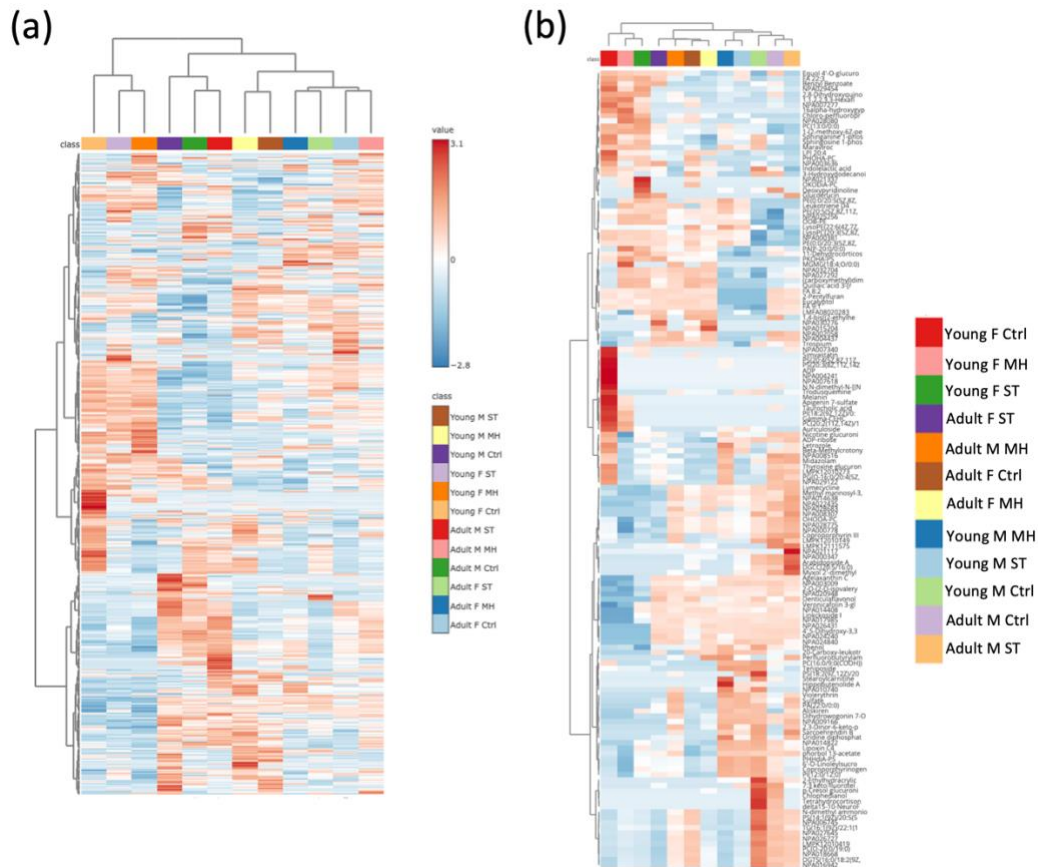


Figure 4.3: Serum metabolites were differentially abundant in mice according to age and sex, and preparation of the broccoli sprouts. (a) Hierarchical clusters of the 476 significant metabolites and (b) the top 150 metabolites are differentially abundant across the experimental groups. The red color intensity denotes an increase in metabolite concentration, while the blue color shows a decrease.

4.4.4 Enrichment analysis mapped plasma metabolites with metabolic pathways in bubble plots and bar graphs

The quantitative enrichment analysis reported in bubble plots and bar graphs (supplementary Figure A.3) revealed arachidonic acids, fatty acids, glycolysis, leucine and isoleucine, amino sugar and nucleotide sugar, taurine, propanoate and tyrosine, and drugs metabolism among the topmost metabolic pathways associated with the metabolites different between the experimental groups. We compared the differential effect of diet preparation on metabolic enrichment and pathway with age and sex. Glycolysis/gluconeogenesis metabolism, fructose and mannose metabolism, arachidonic acid metabolism, taurine and hypotaurine metabolism, amino sugar, and nucleotide sugar metabolism were enriched with ST and MH diet in young female mice. Steroid hormone metabolism, arachidonic acid metabolism, ether lipid metabolism, valine, leucine, and isoleucine metabolism were enriched with ST and MH diet in young male mice. Arachidonic acid metabolism, fatty acid metabolism, elongation, fatty acid degradation, tyrosine metabolism, and purine metabolism were enriched with ST and MH diet in adult female mice. Ether lipid metabolism, propanoate metabolism, fructose and mannose metabolism, arachidonic acid metabolism, taurine and hypotaurine metabolism, amino sugar, and nucleotide sugar metabolism were enriched with ST and MH diet in adult male mice.

4.5 Discussion

Recent surveys have reported adults, especially women, as a high-risk population for IBD (Xu et al. 2021; Weisman et al. 2023). The use of vegetables for intestinal health has been established, particularly broccoli sprouts against IBD pathogenesis such as inflammation, dysbiosis, and gut damage (Zandani et al. 2021; Holman et al. 2023; Zhang et al. 2023). The ameliorative effects have been associated primarily with gut microbial metabolites of

glucosinolates, flavonoids, polyphenols, and amino and fatty acids (Cicio et al. 2022; Martins et al. 2023; Ortega Hernández and Others). However, broccoli preparation could influence its benefits against IBD (Charron et al. 2020; Wu et al. 2016; Wang et al. 2018) in different populations by modulating the kinetics of bioavailability and resulting isothiocyanate concentrations in different body tissues (Alaba et al. 2024; Li et al. 2013; Vermeulen et al. 2008). This pilot study is the first to report the metabolic difference associated with the differential benefits of broccoli sprout preparation (ST and MH), including in a disease model of colitis. Our data showed that adult females may benefit more from the ST diet. In contrast, adult males and young females may benefit more from the MH diet intervention by increasing the concentration of beneficial metabolites against ulcerative colitis in the DSS-mice model of IBD.

The DSS model of IBD is an effective method to assess the UC type of IBD characterized by clinical symptoms similar to UC patients, such as weight loss and DAI score of stool consistency and fecal blood. Our result revealed that only ST broccoli diets could restore colitis-induced weight loss and decrease colitis severity as DAI scores, and both ST and MH restored colon length in adult female mice, suggesting that the anti-colitis effect of ST diet may benefit the adult female population more than the MH diet. Meanwhile, both diets restored BW and decreased the severity of colitis in young female and all male mice. Still, none of the diets restored colon length in adult males, suggesting the anti-colitis benefits of the MH diet may benefit a younger population than adults. Similar results have been documented in IL-10-knockout CD mice, with a more significant decrease in BW and fecal blood in younger mice after a raw broccoli diet (Holcomb et al. 2023).

Our data indicate that the anti-colitis impact of the ST diet in the adult female population may be associated with the high concentrations of glucosinolates and flavonoid metabolites in the

group, while the anti-colitis benefit of the MH diet may be due to the high concentrations of polyphenol and SCFA metabolites in adult male and younger groups (supplementary Figure A.1). Gut microbes could hydrolyze dietary glucosinolates into isothiocyanates such as SFN and erucin metabolites to promote a healthy gut (Bouranis et al. 2021; Liu et al. 2017). Likewise, flavonoids and polyphenols confer gut protective benefits as primary or microbial metabolites (Makarewicz et al. 2021; Baky et al. 2022). The major glucosinolates expressed in our plasma samples are glucoraphanin and glucoerucin which could be metabolized microbially by bacteria such as *Bifidobacterium* species and glucosidases (Wu et al. 2023; Cebeci 2017; Radünz et al. 2021) to confer anti-inflammatory, antioxidant and gut protective benefits (Holman et al. 2023; Wu et al. 2019; Holman et al. 2023) particularly in adult female mice after consumption of ST diet. These results supported the previous claim that a broccoli diet could contribute to the presence of glucosinolates-derived plasma metabolites to prevent intestinal damage (Charron et al. 2020; Martins et al. 2022).

Dietary metabolites, denticulaflavonol and microbially derived 4',5-Dihydroxy-3,3'-dimethoxy-6,7-methylenedioxyflavone-4'-glucuronide possess similar anti-inflammatory and antioxidant benefits against IBD (Ortega Hernández and Others ; Choi et al. 2023; Anastasaki et al. 2017; Adnan et al. 2021; Anastasaki et al. 2017). Although these flavonoids increased in all the adult males and females and young male treatment groups, denticulaflavonol had a higher intensity in young male ST and adult female ST groups. These results further suggest the potential benefits of ST diet for adult females and that both age and sex are significant factors to consider during broccoli preparation for IBD intervention. Isoferulic acid-3-sulfate, generated by sulfotransferases hydrolysis of ferulic acid (Serreli and Deiana 2019), was significantly increased in all adult and young male treatment groups but had a higher concentration in adult female and young male MH

groups. The results suggest that MH broccoli may increase polyphenolic metabolites to prevent IBD via its anti-inflammatory and antioxidant properties (Serreli et al. 2021; Zhao and Jiang 2021; Stevens et al. 2022; Kaulmann and Bohn 2016), predominantly in adult female and young male populations. Microbial metabolites from polyphenols, 3'-O-methyl(-)-epicatechin derived from catechin and 5-(3',4',5'-Trihydroxyphenyl)-gamma-valerolactone-3'-O-sulphate derived from of proanthocyanidins were increased in young female MH than the ST group and may exhibit anti-inflammatory and antioxidant effect against colitis (Shay et al. 2015; Fan et al. 2017; Dryden et al. 2013; Vasconcelos et al. 2012) and prevent immune cells adhesion to gut mucosal (Angelino et al. 2019; Márquez Campos et al. 2019; Catalkaya et al. 2020).

Gut bacteria could metabolize fatty acids and amino acids to produce beneficial SCFAs and tryptophan metabolites (Russo et al. 2019). Amino acids, tryptophan, and phenylalanine are essential for promoting protein synthesis, which could also confer ameliorative effects against IBD (He et al. 2018; Lai et al. 2019). Major SCFA microbially derived from vegetables include acetic acids, butyric acid propionic acids, and their metabolites are crucial anti-inflammatory markers and prebiotics to promote gut homeostasis (Parada Venegas et al. 2019; Gonçalves et al. 2018) and alleviate dysbiotic IBD (Chen et al. 2023; Ashaolu et al. 2021). Our broccoli diet increased the concentration of SCFAs, such as propionic acid, dilauryl thiodipropionate, ethyl heptafluorobutyrylacetate, L-palmitoylcarnitine, linoleyl carnitine, and heptadecanoyl carnitine, while indoxyl sulfate, an inflammatory tryptophan metabolite, was decreased in young females with MH than in the ST group. The results suggest that the MH diet may benefit the young female IBD population by increasing SCFA metabolites against pathogenic bacteria, proinflammatory monocyte polarity and immune cell adhesion to gut mucosal (Wu et al. 2023; Rivière et al. 2016;

Recharla et al. 2023), increased carnitine derivatives and decreased indoxyl sulfate metabolites to prevent intestinal inflammation and protect gut barrier (Zhu et al. 2020; Semba et al. 2017).

Acetylcysteine, a substrate for glutathione, and 2-oxo-tetradecanoic acid, a precursor of microbially derived lipids, were differentially increased in young males and females fed with both diets, suggesting the sex differential effect of the broccoli diet. Acetylcysteine may protect the young population via antioxidative and anti-inflammatory effects against NFkB pathways and ROS production in the gut (Frye and Berk 2018; Uraz et al. 2013; Wang et al. 2022), while 2-oxo-tetradecanoic acid may protect against *Helicobacter pylori* gastric infection to promote intestinal barrier homeostasis (Morozumi et al. 2022; Hu et al. 2023; Matsui et al. 2017). Valeric conjugates derived from leucine could promote IBD by recruiting proinflammatory cells, mitochondria oxidation (Liu et al. 2019; Tummolo et al. 2022; Mavilio et al. 2016), and epithelial damage (Folz et al. 2023; Martin et al. 2017; Li et al. 2020). Broccoli diet decreased alpha-ketoisovaleric acid in young males MH and more significantly in the ST group, compared with the young male DSS group, suggesting the differential effect on age and sex during anti-inflammatory and antioxidant benefits of broccoli. However, the diets were not significantly different in the adult and young female groups. Taurocholic acid, a metabolite of taurine, was decreased by MH and ST diet only in the young female group to prevent inflammation and colitis caused by bacteria metabolism of bile (Thomas et al. 2022; Kumar et al. 2022; Zhou et al. 2023). The pathway analysis compared each diet preparation against the DSS control, age, or sex group to annotate potential metabolic pathways associated with the nutritional benefits of diets and the pathology of IBD. Arachidonic acid, fatty acid and phenylalanine, tryptophan, and tyrosine metabolism are major pathways enriched by ST and MH diets in adult male and female groups. Arachidonic and fatty acid pathways may be associated with IBD generating pro-inflammatory and adhesive markers in the

gut (Coquenlorge et al. 2016; Huang et al. 2021), while fatty acid, phenylalanine, tryptophan, and tyrosine could be associated with bacterial hydrolysis of fat and amino acids to generate metabolites with anti-inflammation, antioxidation and barrier protection (Asakura and Kitahora 2018; Elbarbry et al. 2014; Das 2016). Steroid hormone, fatty acid, arachidonic acid, ether lipids, arginine biosynthesis, propanoate, valine, leucine, and isoleucine metabolism are major pathways enriched by ST and MH diets in young male groups. Fatty acid and arachidonic acid could impact the production of steroid hormones in young people, and nutrition may be a significant factor influencing the steroidal hormones in the younger male with IBD to protect against gut inflammation (Wiese et al. 2016; Bhathena and Velasquez 2002; Calder et al. 2009). Ether lipids metabolism is associated with IBD development (Ferru-Clément et al. 2023; Liu et al. 2023), while nutritional intervention such as broccoli diet could promote arginine biosynthesis (Li et al. 2023), propanoate, valine, leucine, and isoleucine may protect against IBD in the young male population (Basson et al. 2016; Forsman 2022). Glycolysis/gluconeogenesis, fructose and mannose, amino sugar and nucleotide sugar, pentose phosphate, sphingolipids, and arachidonic acid are major pathways ST and MH diets enrich young female groups. Glycolysis/gluconeogenesis, fructose, mannose and pentose phosphate pathways may generate substrates for microbial hydrolysis of phytochemicals (Hou et al. 2023; Hagihara et al. 2019) against IBD in young female population, while sphingolipids and arachidonic acid may be associated with pro-inflammatory and adhesion markers during IBD development (Coquenlorge et al. 2016; Huang et al. 2021).

4.6. Conclusion, limitations and future direction

To the best of our knowledge, this study is the first to report that different preparations of broccoli sprouts differentially benefit females and males, as well as young and adult mice, as a potential dietary intervention for IBD conditions. Adult female mice benefited more from steamed

broccoli sprouts intervention than mildly heated with significant recovery from IBD-induced weight loss and colon damage, decreased disease activity index, and increased concentration of antioxidant, anti-inflammatory, and gut-protective metabolites. Meanwhile, adult male and younger mice benefited more from mildly heated broccoli sprouts. The increased concentrations of dietary-derived glucosinolates and microbially derived flavanols in the adult female mice fed steamed broccoli sprouts points to the potential use of such anti-inflammatory and antioxidant metabolites as a late-life dietary intervention for the adult female population, who are more at risk of IBD. Meanwhile, early-life use of broccoli sprouts as a dietary intervention may benefit the younger population by using mildly heated broccoli sprouts with microbially derived polyphenols, short-chain fatty acids, and glutathione substrates. The limitation of this study is the need for funds, a larger sample size, and tissues for multiple analyses, as only plasma metabolites were tested in the cohort of mice. There needed to be sufficient housing equipment so the mice would not be housed in groups, making it challenging to generate enough fecal samples per mouse. Future research may use the preliminary information from this study to develop a robust approach to the differential benefit of broccoli sprout preparation across different stages of human life.

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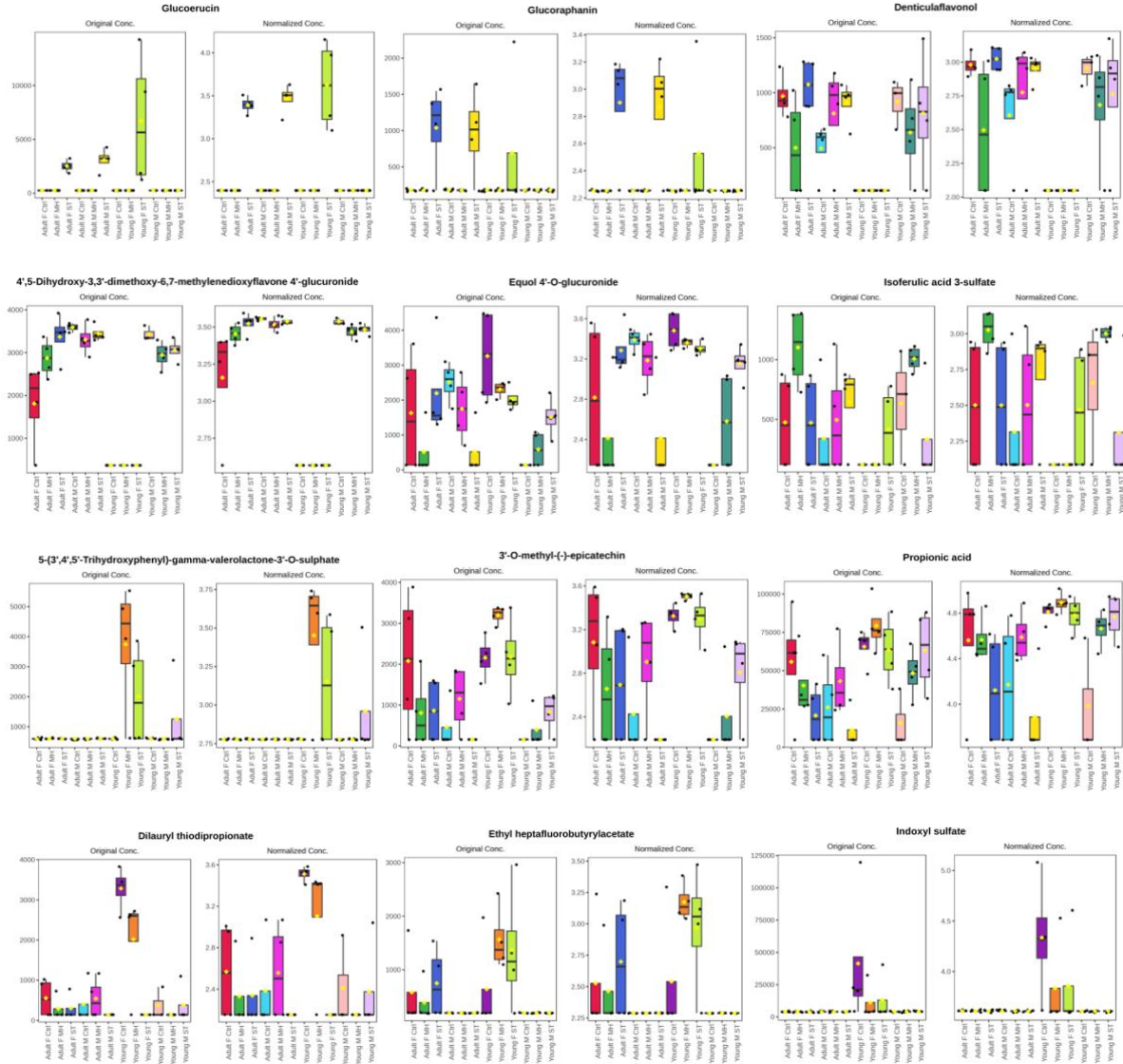
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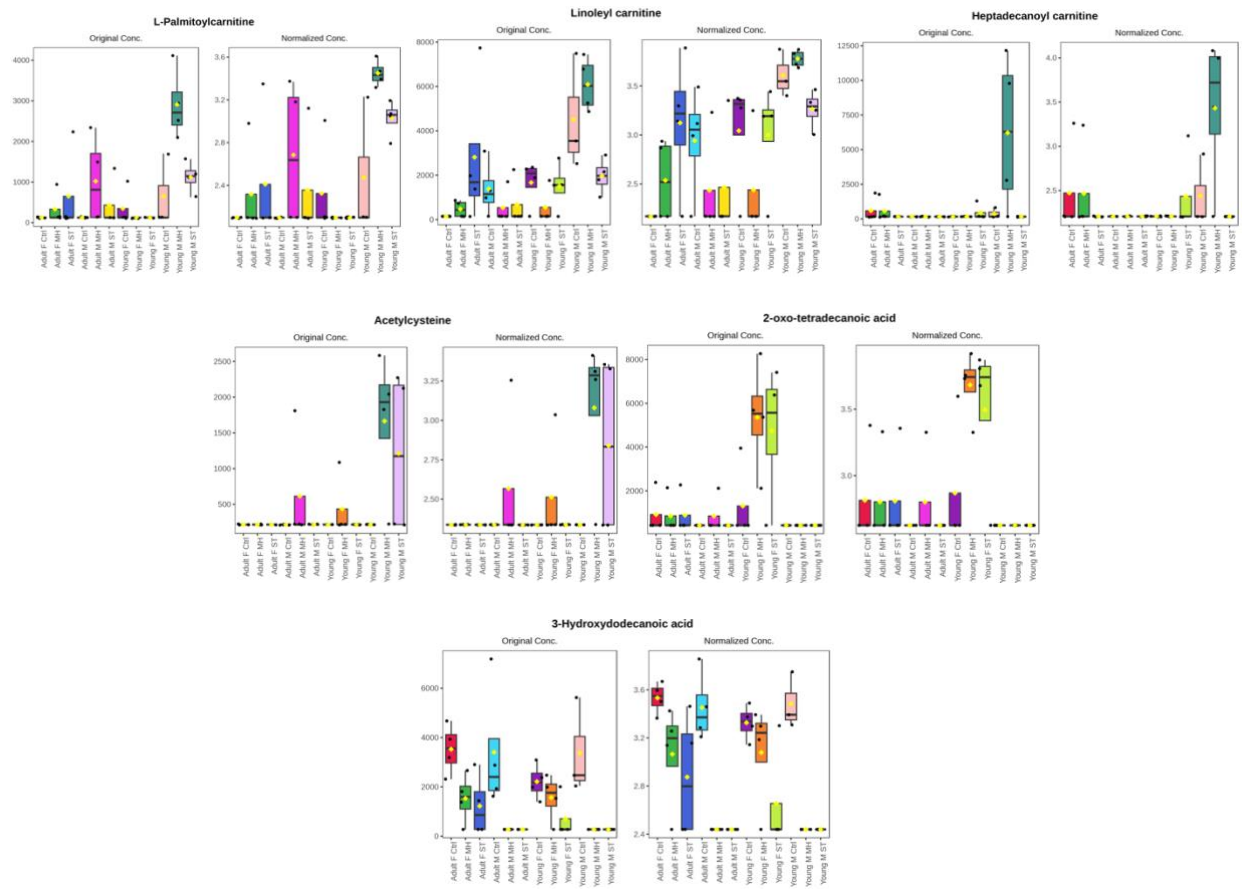
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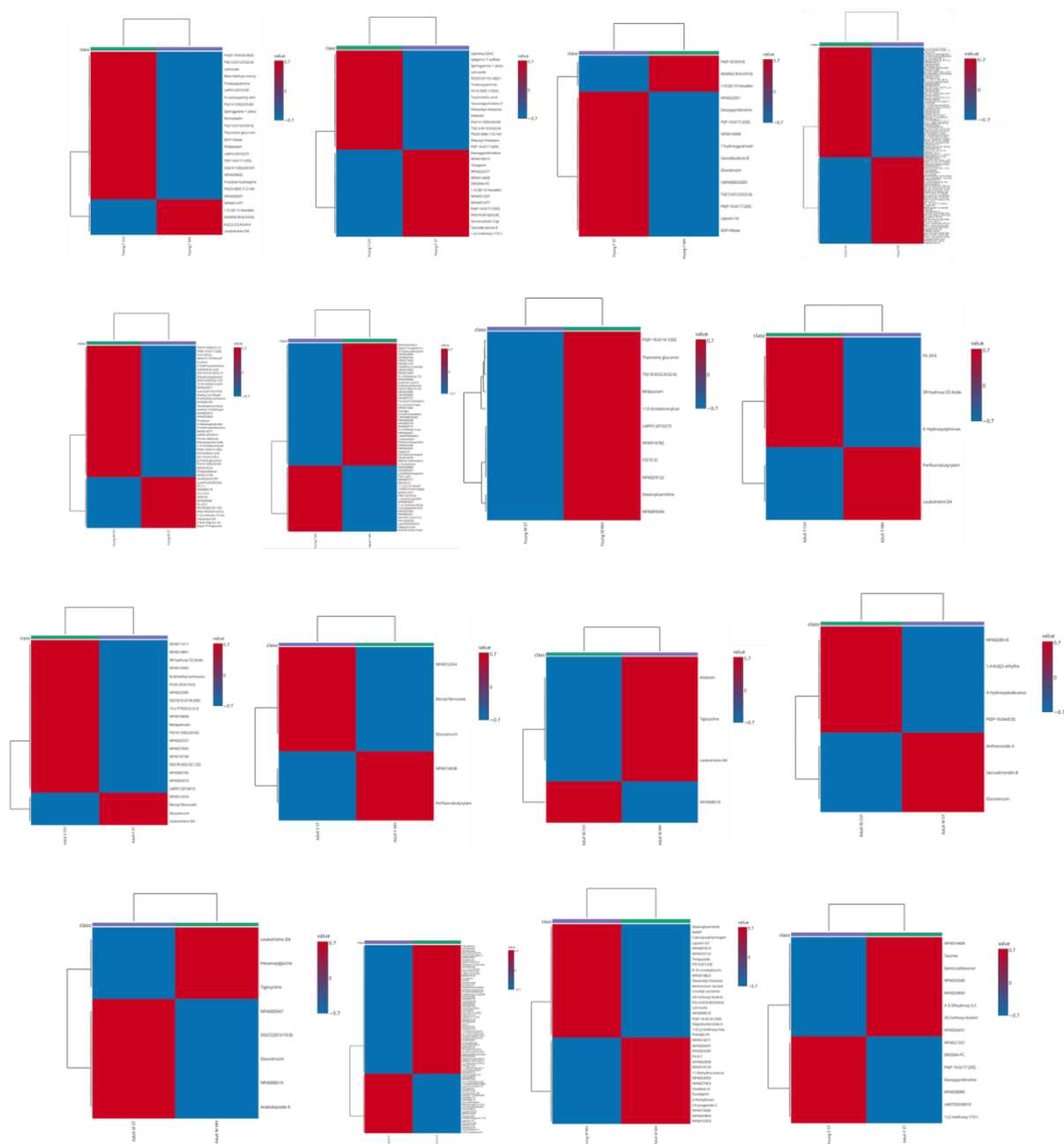
APPENDICES

Appendix A. Supplementary Figures

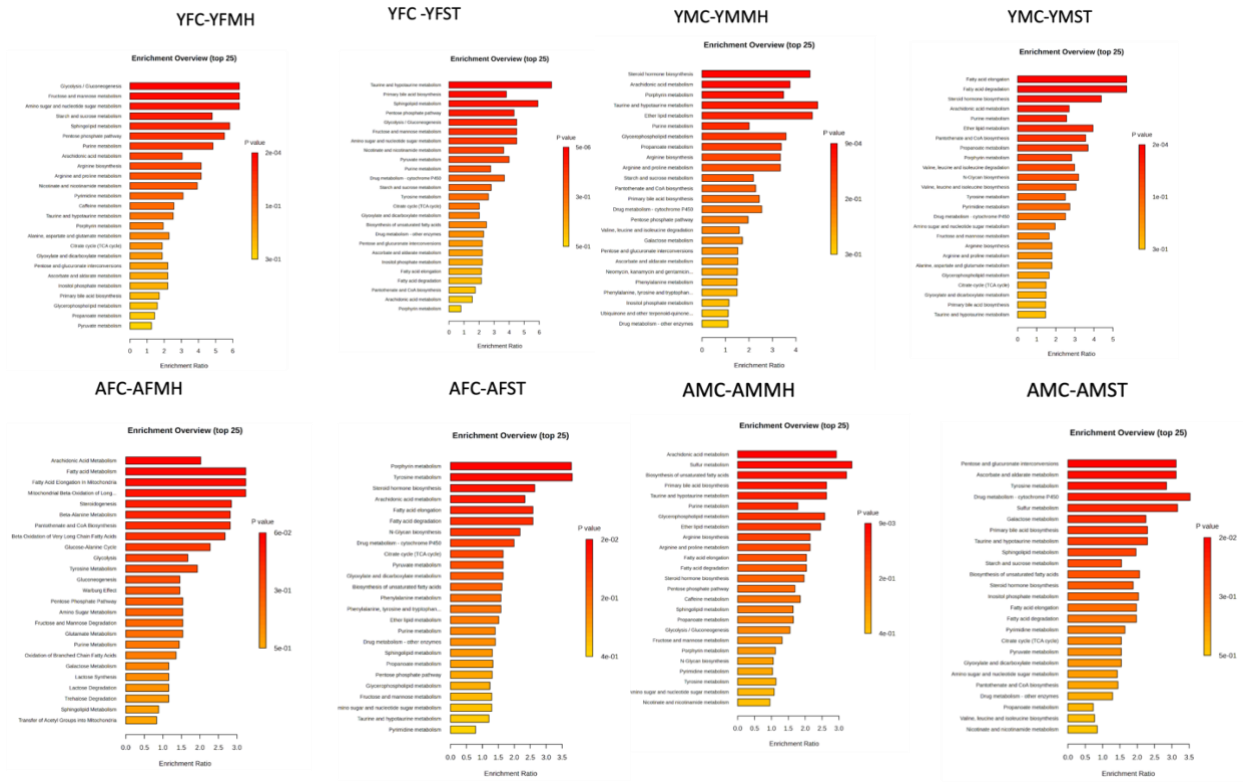




A.1 Boxplots show differences in the concentration of metabolites across the experimental groups. Selected metabolites can potentially alleviate IBD or are related to a specific metabolic pathway in IBD.



A.2 Heatmaps illustrate differentially regulated metabolites between the experimental groups with diet preparation, age, and sex. Selected metabolites can potentially alleviate or are related to a specific metabolic pathway involved in inflammatory bowel disease.



A.3 The top 25 metabolic pathways associated with broccoli intervention or inflammatory bowel disease among the experimental groups were based on the diet preparations, age, and sex. Bar charts show the enrichment ratio of the associated pathways.

Appendix B. Supplementary Files

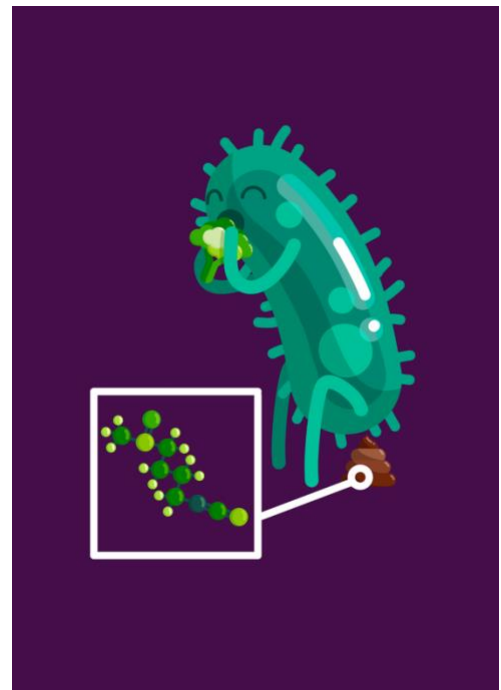
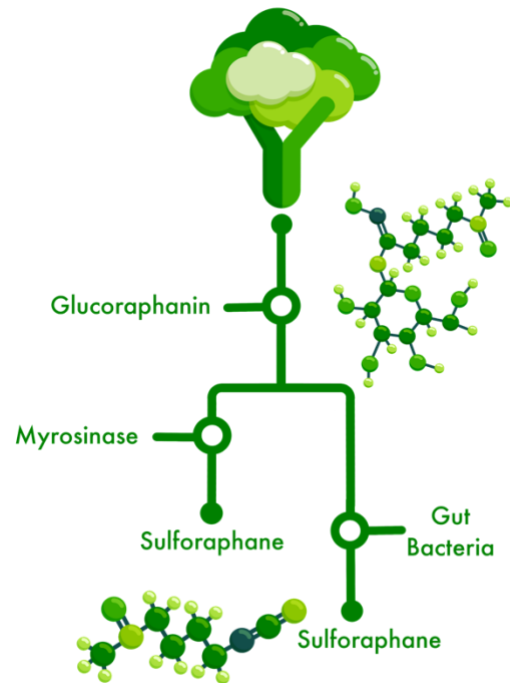
B.1 Consent form:

Welcome to the Broccoli Sprout Project!

You are invited to participate in a research project being conducted by two Principal Investigators, Dr. Sue Ishaq and Dr. Yanyan Li, who are Assistant Professors in the School of Food and Agriculture. Johanna Holman, a graduate student in the School of Food and Agriculture at the University of Maine is the lead student researcher (co-investigator) of this study.

Why are we running this study?

We want to understand how adding steamed broccoli sprouts to your diet will influence your gut microbiota and whether some microbes produce anti-inflammatory effects, in healthy individuals.



| You can participate if you are... | You cannot participate if you are... |
|-----------------------------------|---|
| ✓ At least 18 years of age | X Allergic to broccoli sprouts |
| ✓ In good general health | X Pregnant |
| | X Taking oral antibiotics in the previous 2 weeks. Please notify us if you start taking oral antibiotics after starting the study: you can continue and receive compensation. |

What will you be asked to do?

- You will be asked to eat steamed broccoli sprouts along with your regular diet every day for 28 days. You will eat *either* 1 serving of broccoli sprouts daily for four weeks, *or* 1 serving of broccoli sprouts every other day for four weeks, depending on which group you are assigned to on the day you visit the University of Maine to get your study materials. You will be provided with fresh broccoli sprouts each week. You have the option to get them delivered to where you live or pick them up from the lab.
- You will be asked to fill out surveys on your diet and on how you feel about participating in the study.
- You will be asked to give us three fecal samples during the study: 1 before you start eating sprouts, 1 after you have been eating sprouts for 4 weeks, and 1 after you have stopped eating sprouts for a week.
- We expect the length of time you will participate in this study will be approximately 52 days: 14 days before eating sprouts, 28 days of eating sprouts, and then 7 days after you stop eating sprouts. On average it may take one hour each day to participate (details on the time for each activity are below).

Contact Information: If you have any questions about this study, please contact:

- Johanna Holman (co-investigator and lead student researcher) at johanna.holman@maine.edu or 207-558-2634, who is in charge of ordering sprouts for participants and setting up visits.
- Lead researchers: sue.ishaq@maine.edu (Dr. Sue Ishaq) or yanyan.li@maine.edu (Dr. Yanyan Li).
- If you have any questions about your rights as a research participant, please contact the Office of Research Compliance, University of Maine, 207-581-2657 or umric@maine.edu.

Benefits. What are the potential benefits if I participate?

There may be no direct benefits to you, because not everyone reacts to the broccoli sprouts.

- You will be provided with broccoli sprouts and learn how to incorporate this healthy food to your diet.
- Your digestive health may benefit from participating in this study.
- This research will help us learn more about the influence of broccoli sprouts on the gut bacteria and anti-inflammatory effects in healthy humans, allowing us to develop dietary strategies for prevention of IBD.

- You will receive a copy of the results from your samples, and a copy of the results from the whole study.

Compensation. How will I be compensated for my time and effort?

You will receive \$70 as an Amazon e-gift card for participating in the first 4 weeks of this study and then an additional \$70 as an Amazon e-gift card for the remaining part of the study, for a total of \$140. The first part of this study includes 2 study visits, diet history survey, cruciferous veggie survey, 3 days of food diaries, 1 stool sample, 2 sprouts samples, and 4 check-in phone calls. The second part of this study includes 2 study visits, completing cruciferous veggie survey again, completing 6 days of food diaries, 2 stool samples, 1 sprout sample, 3 check-in phone calls, and an end-of-study questionnaire.

Voluntary. Can I quit at any time? Yes! Participation is voluntary. Participation is voluntary. If you choose to take part in this study, you may stop at any time. If you choose to withdraw from the study, you will be compensated only for the activities that you participated in prior to your withdrawal. You may skip any questions you do not wish to answer.

Risk. What are the potential risks if I participate? There are minimal risks to you from participating in this study.

- You may feel uncomfortable about some activities (e.g., collection of stool samples).
- The survey questions ask you about your dietary habits and gut health. You may skip any questions you do not wish to answer in the questionnaires. Example questions from the surveys include: How often did you eat lettuce salads (with or without other vegetables)? On a number scale from 1 to 5, how difficult was it for you to eat the required amount of broccoli sprouts, 1 being very easy and 5 being very difficult? Was there anything we could have done differently in our study to make the diet easier for you to eat? How would you describe your overall gut health today? Is it normal, better, or worse to how you normally feel?
- Ingestion of broccoli sprouts may cause bloating, gas and other stomach discomfort, though steamed sprouts may cause less issues as compared to fresh sprouts. You can spread out the broccoli sprouts you need to eat throughout the day, in small quantities at a time, to reduce the discomfort. You may withdraw from the study at any time if the discomfort persists or becomes more severe.

Confidentiality. How will my privacy be protected in this study?

- *A code name will be used on samples/surveys.* Your name will not be on any of the data, the samples, or included in any publication or report. *A consent form that you sign will link your name to your code name.* This form will be kept separate from the data, in the PI's locked office and destroyed by May 2025.
- *Only the researchers who are named in this protocol and trained in data confidentiality have access to data and samples.* To further protect your privacy: some members interact with you and bring your samples to the laboratory, and different team members work with your samples.
- All electronic data (surveys and any data collected during visits or phone calls) will be stored on a password-protected computer. If the surveys or study data are collected on paper, these will be stored in a locked file cabinet in the lead researcher's office. Survey and sample data

are retained indefinitely for record keeping purposes and potential future research. All stool samples will be stored in a locked -80°C freezer in PI’s lab and destroyed by May 2028.

- If you leave the study before day 14, your data will not be included in the data analysis and will be destroyed by May 2024. If you leave between day 14 and completion of the study, your data will be included in the data analysis unless you request that your data not be saved.

_____ (Signature) _____ (Date)
Your signature indicates that you have read the above information and agree to participate. You will receive a copy of this form.

Schedule for Code Name: _____ **who will eat _____ box of sprouts each day**

B.2 Fecal collection instructions

Stool Collection Kit Instructions for the Broccoli Sprout Project



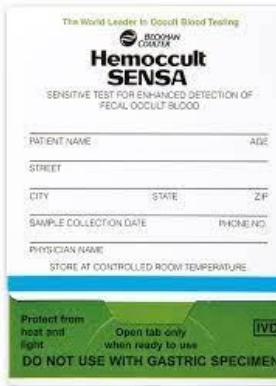
Research Coordinator: Johanna Holman (johanna.holman@ maine.edu, 207-558-2760)


Lead Researchers: Sue Ishaq (sue.ishaq@maine.edu, 207-581-2770) and Yanyan Li (yanyan.li@maine.edu, 207-581-3134)

Fecal samples should be collected on

- 1) the day before or the morning of beginning the steamed broccoli sprout diet, D0;
- 2) the day you finish 4 weeks of eating the steamed broccoli sprout diet, D28;
- 3) 7 days after you stop eating the steamed sprout diet, D35.

Materials needed for each collection date:

| | | |
|--|--|---|
|  <p>A Protocult brand collection device</p> |  <p>2 plastic collection tubes, filled with preservatives, and the plastic bags the tubes were in.</p> <p>We use one jar (marked R) to identify gut bacteria, and one jar (marked E) to identify the compounds gut microbes are making with the sprouts.</p> |  <p>1 FOBT smear card, and a biohazard bag from the FOBT envelope.</p> <p>We'll use a chemical compound that will change color if there is any blood in your sample which could indicate inflammation.</p> |
| <p>A pair of latex gloves</p> | <p>A sharpie or pen</p> | <p>A fecal collection survey</p> |

| | |
|--|--|
| | <p>Step 1: Gather the materials you'll need.</p> <p>Make sure the two plastic collection tubes and the FOBT smear card all have the same time point written on them (D0, D28, D35).</p> <p>Use a sharpie or pen to put your code name and the date on two plastic collection tubes and one FOBT smear card.</p> <p>Open the FOBT card flap.</p> |
|  | <p>Step 2: Unfold the Protocol collection device and attach it to the toilet seat.</p> <p>Put on the nitrile gloves provided. Lay one of the white stool collection pouches on a flat surface with the instructions facing upwards. Fold the outer flaps upwards.</p> <p>Peel the backing off of the adhesive tape on both sides of the pouch. Attach the pouch over the toilet bowl and stick the tape to the toilet seat.</p> |
| | <p>Step 3: Empty your bowels directly onto the collection device.</p> <p>A golf ball sized amount is plenty.</p> |



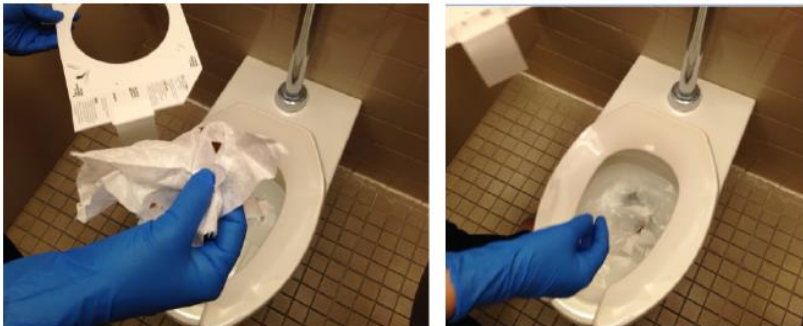
Step 4: Use the spoon from one of the jars to create a thin smear of feces on panels A and B inside the card.

Close the FOBT card flap, and place the card inside one of the plastic “biohazard” bags.

Step 5: Use the spoons to put 1 teaspoon of feces into each jar.

Keeping the tubes to avoid spilling the preservative. If accidental spilling occurs, do not add water or any other liquid to the tubes.

Close the jars firmly and put them in their plastic bags.



Step 6: Cleanup. The remaining feces can be left in the collection pouch. Detach the centerpiece from the paper frame, and flush the feces and centerpiece down the toilet. The remaining portion of the stool collection pouch can be discarded in the trash.

Return the samples to the lab within 1 - 2 days, at the University of Maine in 111 Rogers Hall, Orono. Rogers Hall is next to the library and the student union.
The samples can be kept at room temperature.

BIOGRAPHY OF THE AUTHOR

Tolu Esther Alaba was born and raised in Kwara State, Nigeria on October 14, 1987. She graduated in 2011 with a B.Tech degree in Human Physiology from the Ladoko Akintola University of Technology Ogbomosho. In 2015, she obtained a Master's degree in Human Physiology at the prestigious University of Ibadan, Nigeria. Thereafter, She continued to work as a researcher at the University of Ibadan, under the mentorship of Professor Fasanmade at the for Cardiopulmonary Laboratory. Thereafter, she joined the School of Biology and Ecology at the University of Maine (United States) in 2019 and transferred to the Graduate School of Biomedical Science and Engineering in 2020. Tolu is a candidate for the Doctor of Philosophy degree in Biological Sciences from the University of Maine in August 2024.