



National  
**SCIENCE**  
Challenges

HIGH-VALUE  
NUTRITION

Ko Ngā Kai  
Whai Painga

# INFANT HEALTH - Update

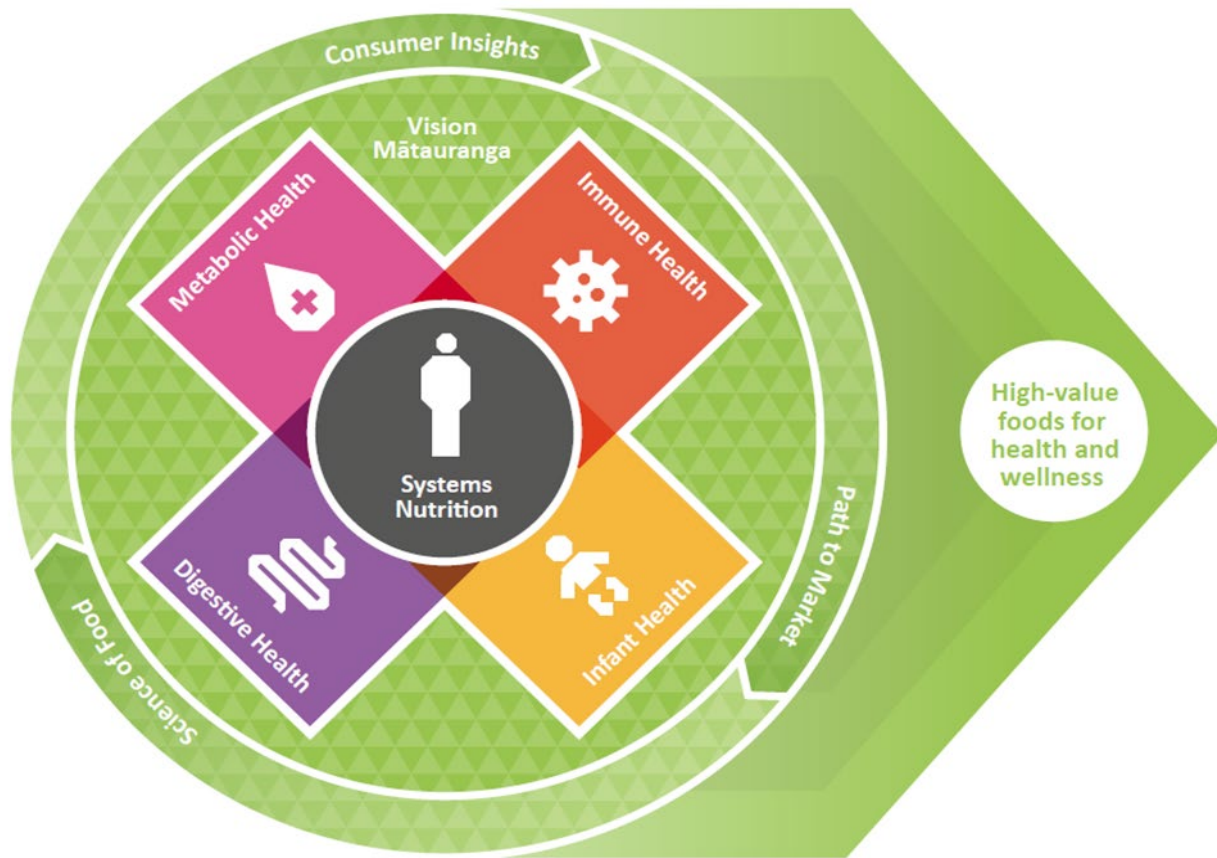
*Clare Wall, NZRD, PhD. Professor, The University of Auckland*  
**On behalf of the HVN Infant Health Team**

Challenge Host



Challenge Collaborating Parties





## Outline

- Background
- IFH Programme
- Pilot Study
- Trials



WHAT YOU DO AND EAT IN THE FIRST 1000 DAYS, MAKES A  
DIFFERENCE FOR THE REST OF YOUR LIFE

# Weaning: Introduction of Solid Food

- Development of feeding skills
- Taste
- Nutrients
- **Gut maturation**
- **Immune maturation**

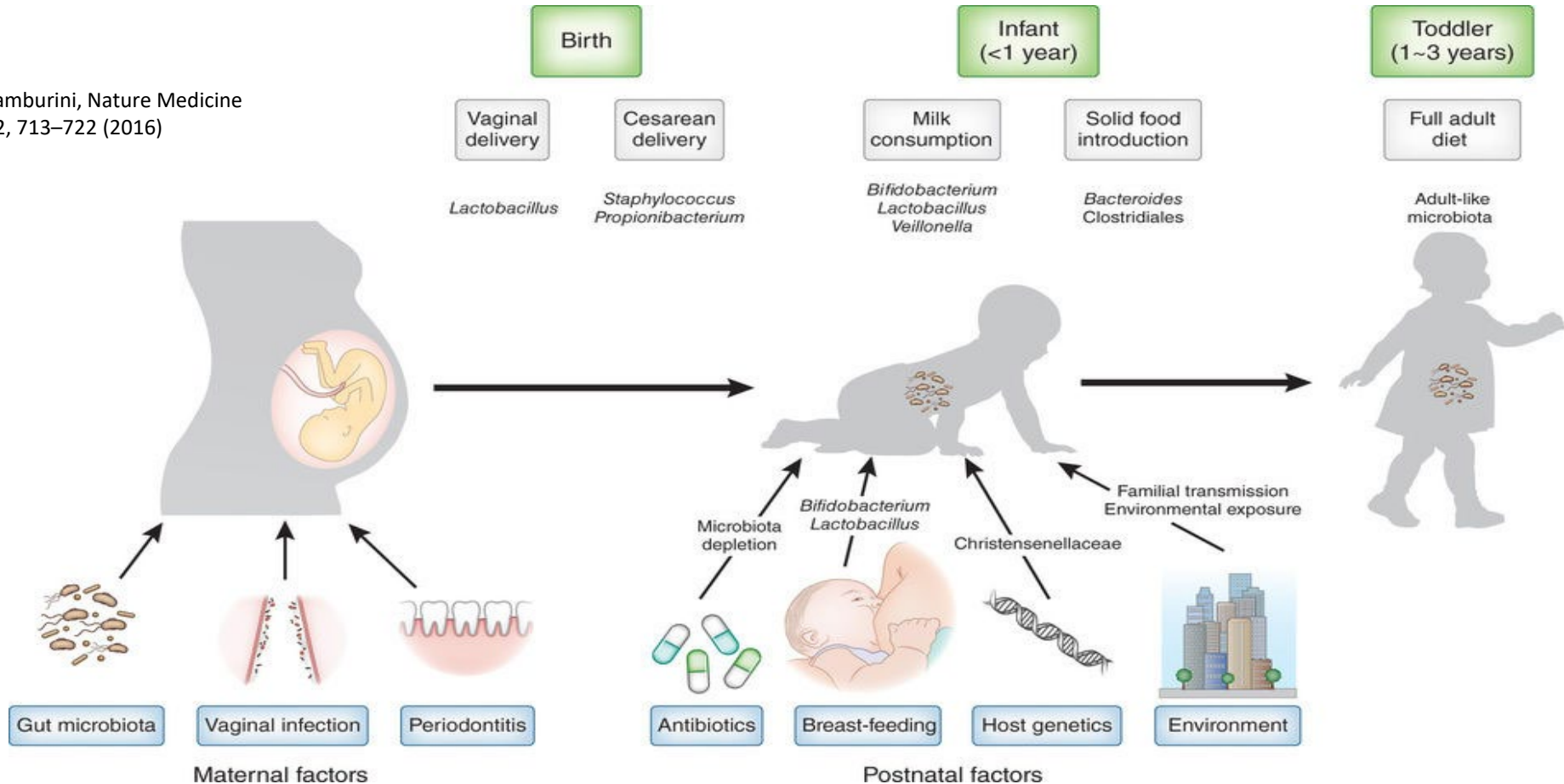


*Global baby food market estimated to reach **US\$ 70 B** by 2016 (Euro Monitor 2012 – From cradle to school: opportunities for babies' food and children food.*

*Approximately **US\$ 50 B** in milk formula and further **US\$ 20 B** in prepared and other baby/infant foods*

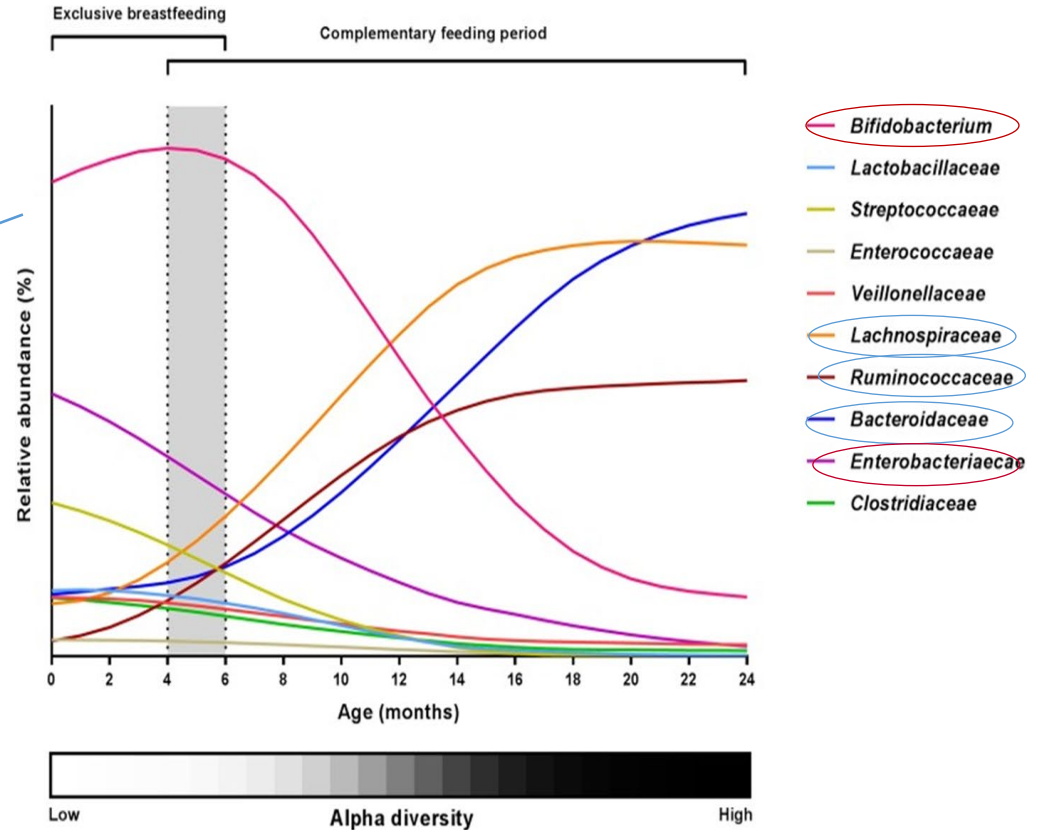
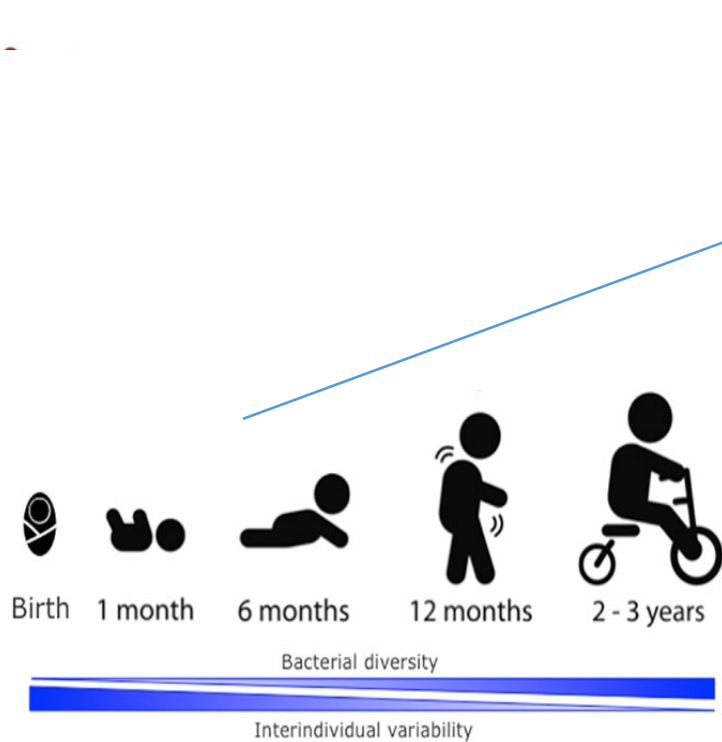
# Microbiota in early life

Tamburini, Nature Medicine  
22, 713–722 (2016)

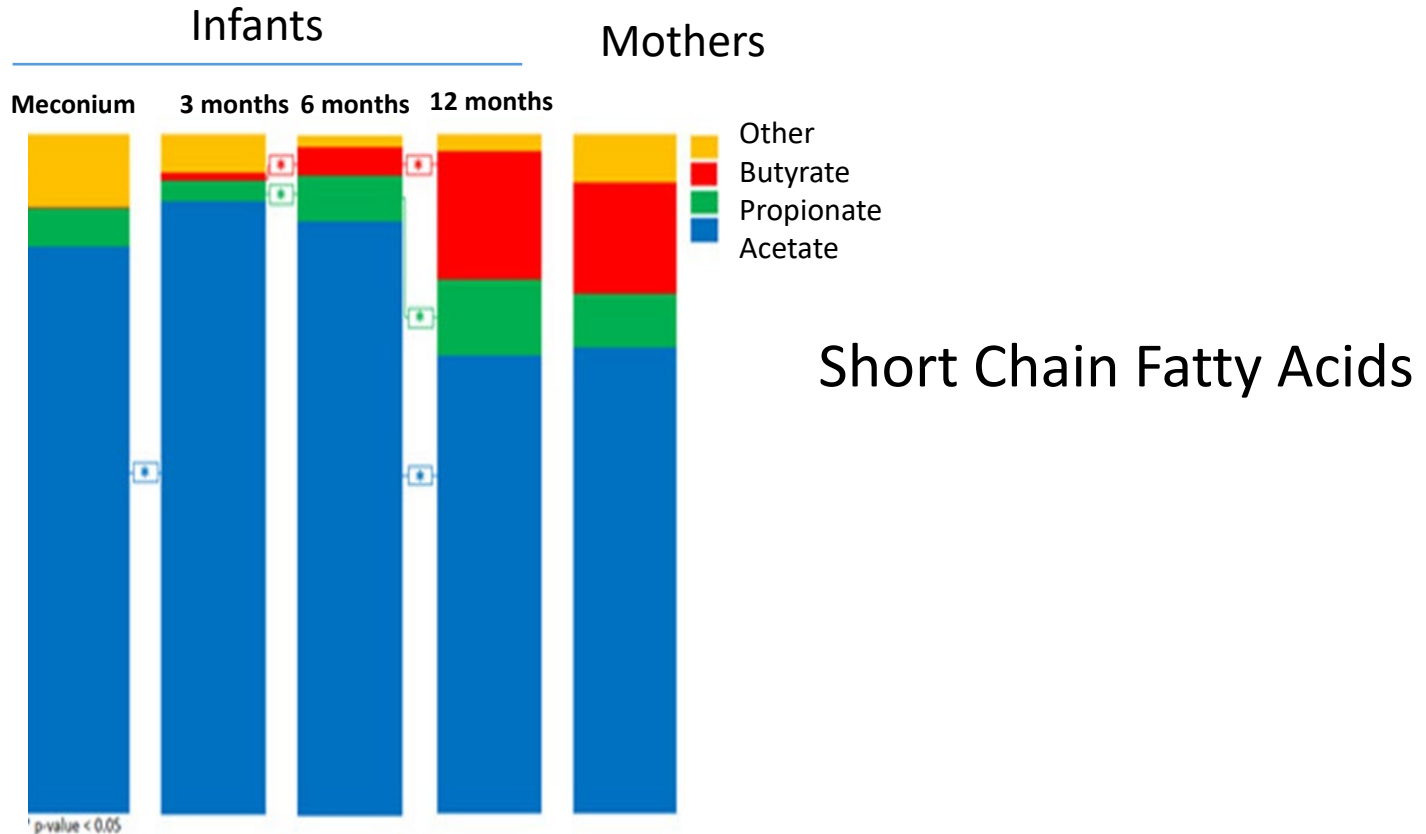


# Weaning a significant time of change

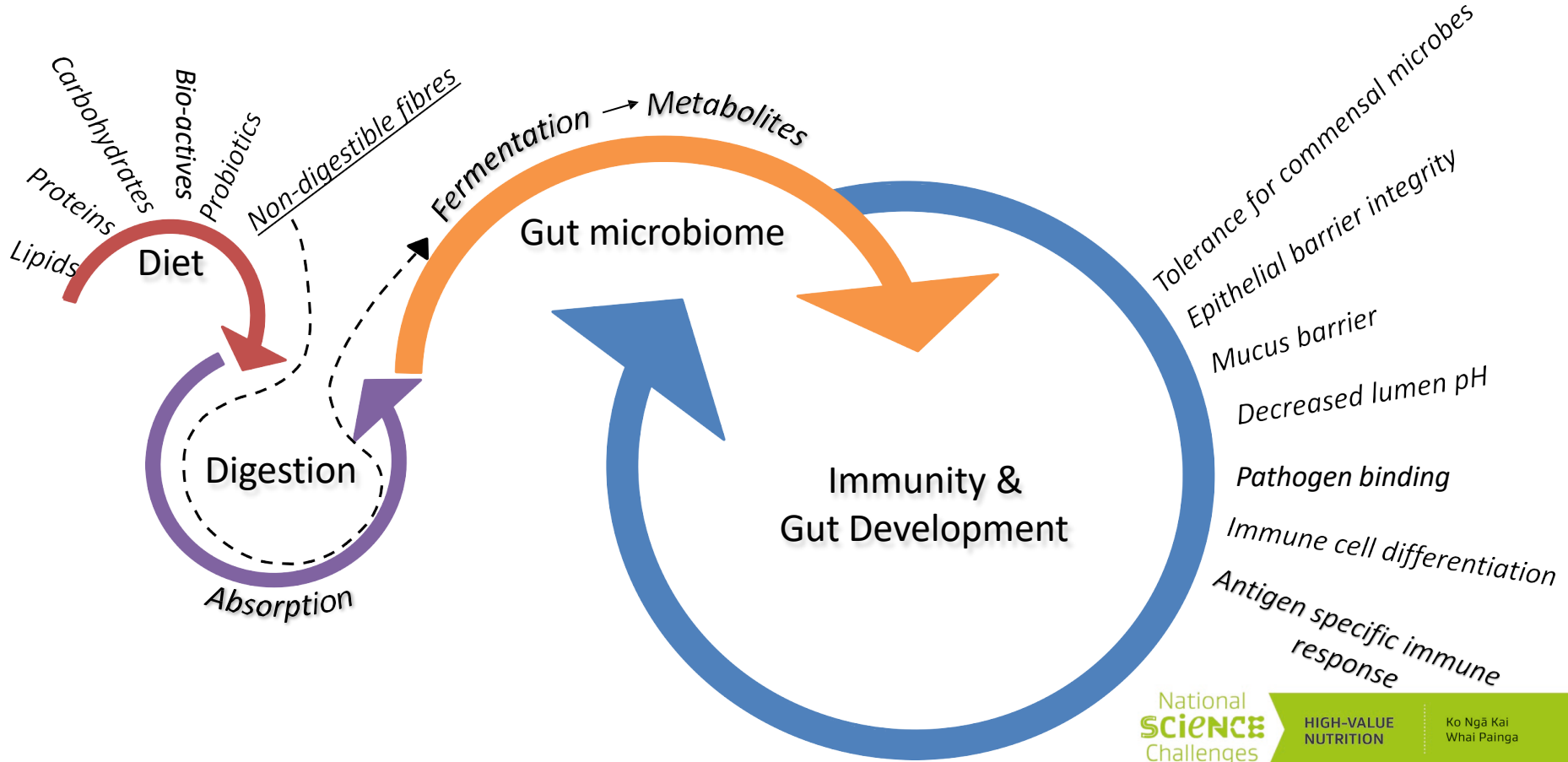
## Commensal Microbes



# Changes in microbiota metabolic activity



# Aim- Evaluating the impact on infant health and immunity through prebiotic food sources which seed the microbiome.





# Measuring the gut microbiome

**What species are present?**

TAXONOMIC COMPOSITION

*Amplicon sequencing*

**What can those species do?**

FUNCTIONAL PROFILING

*Shotgun sequencing*

**What are those species doing?**

TRANSCRIPTOMICS

*RNA sequencing*

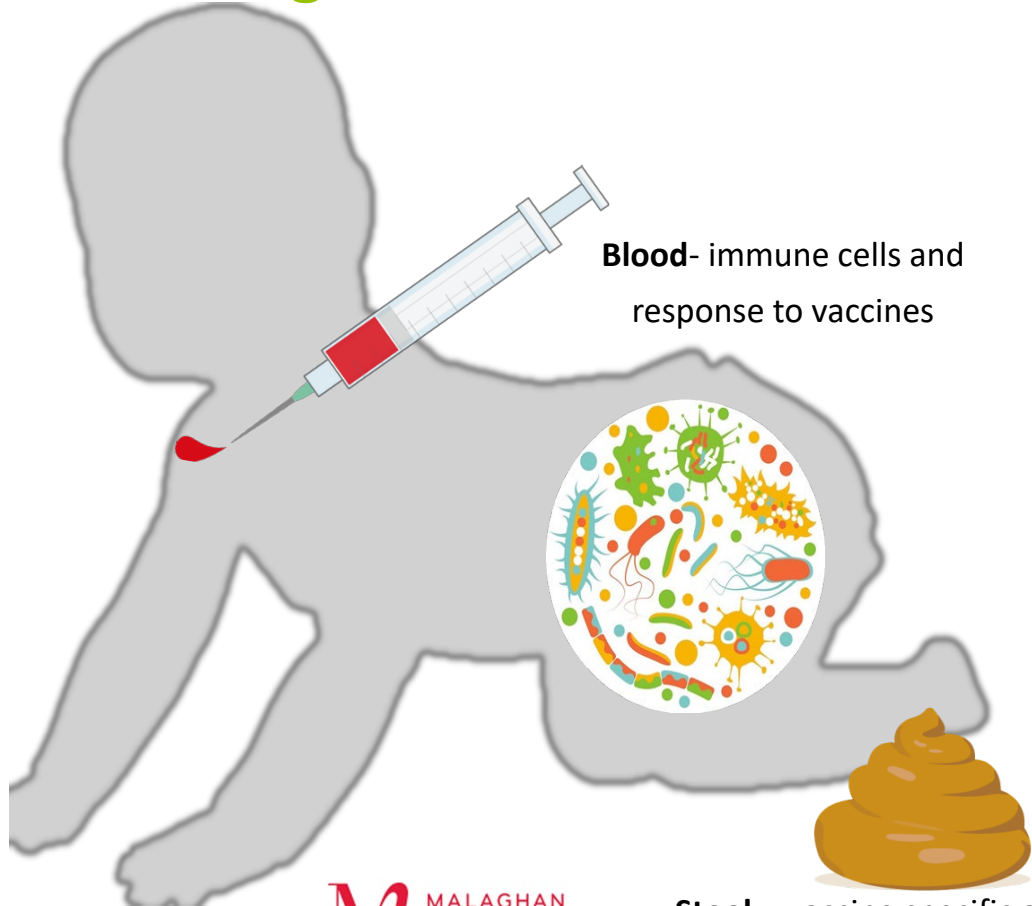
**What have those species done?**

METABOLOMICS

*ID suite of small molecules*



# Measuring immune function and outcomes



**Blood**- immune cells and response to vaccines



**Breast Milk** – Immune markers



**Infections** - Health Records

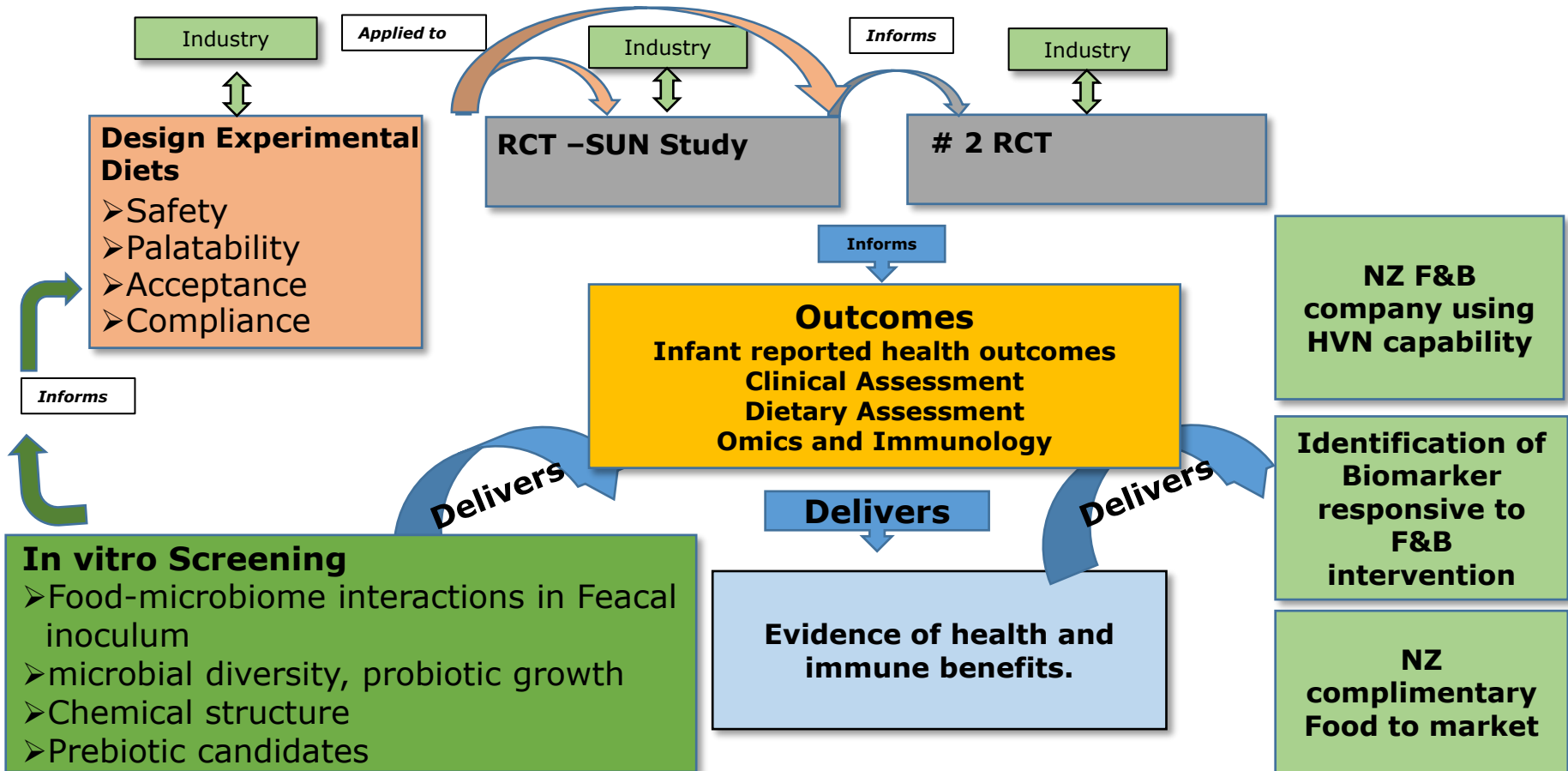
# Infant Health

## Questions



1. What are some key NZ food products to include in an infant's diet to promote immune health?
3. Through what mechanisms do these foods improve immune health?
4. What biomarkers can confirm clinical immune health outcomes?
5. What are dynamic changes in dietary intake and how do these impact on microbiota and the metabolome in early life.

# Infant Health – Research Programme Overview



# Pilot – Feasibility Study



## Prebiotic Food Development

- Acceptance
- Palatability
- Compliance
- Resistance Starch



## Trial

- 40 infants
- 30 kumara
- 10 Probiotic Control
- Intervention 6 months
- 3 clinic visits
- Sample collection
- Health records
- Food records

Samples for

## Omics and Cell Biology

- Metabolomics
- Microbiomics
- Immunology

## Clinical Assessment

Delivered

Development of RCT

Nourish to Flourish

– Infant Complementary Feeding Study –

PARTICIPANT INFORMATION TAKE PART STUDY TIMELINE MEET THE TEAM FAQs CONTACT US



Lovell *et al.* "Nourish to Flourish": complementary feeding for a healthy infant gut microbiome—a non-randomised pilot feasibility study. *Pilot Feasibility Stud* 8, 103 (2022)

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# Outcomes



## INFANTS



19 (47%)



34 (85%) exclusively breastfed  
6 (15%) combination fed



5.5 months average  
age at introduction  
to solid foods.



88% participants  
completed the  
study.

## WHAT WE LEARNT



### Stool sample

Easier to collect once the  
infant had started solids.



### Urine sample

Contamination with stool.



Good consent to the blood  
sample. Difficult to get  
enough volume of blood.



### Illness records

Parents accurately reported **75%** of all illnesses ~ to GP records.  
Accurate reporting decreased from **75%** when infants were 9 months  
of age to **25%** when infants were 12 months of age.



### Breastmilk sample

Easy to collect.



### Saliva sample

Difficult to collect as  
infants got older.



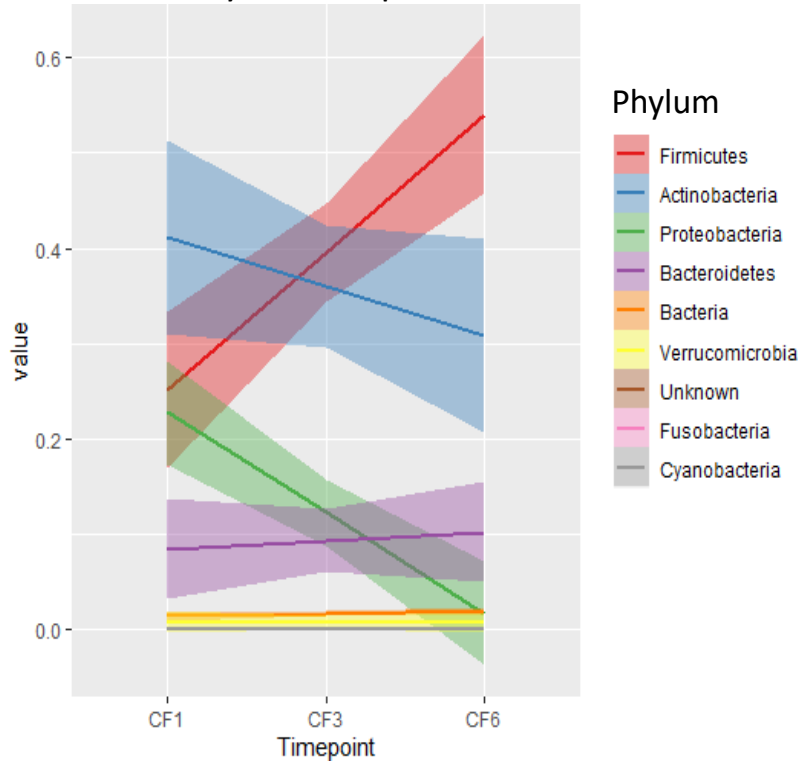
### Food records

Difficult obtaining  
information if infant  
attended day care.

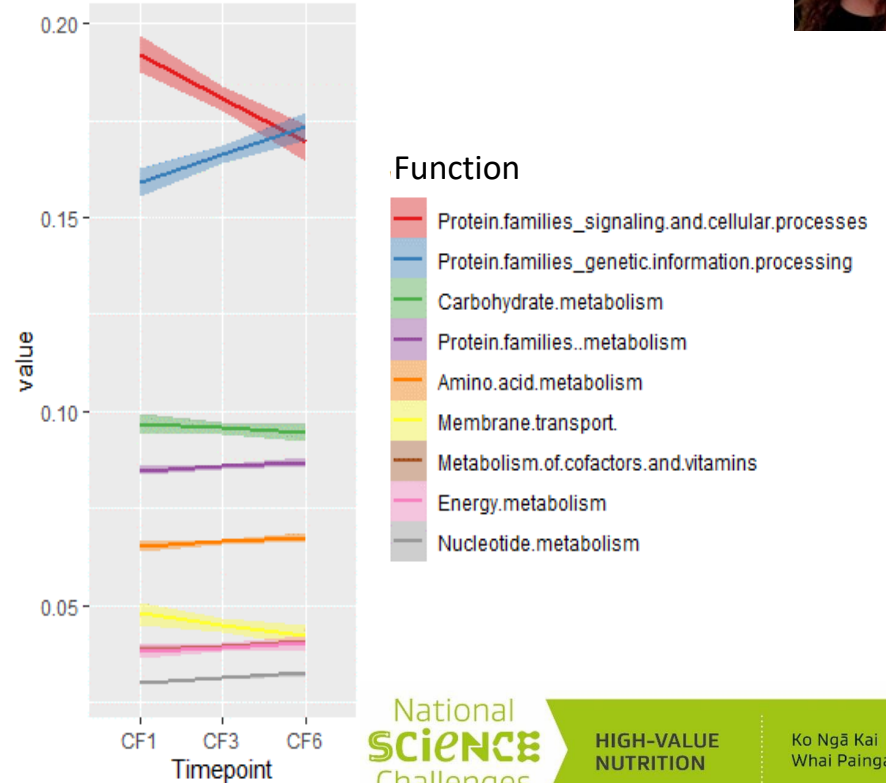
# Broad trends over time



## Phylum composition



## Functional composition



McKeen S, et al. (2022) Adaptation of the infant gut microbiome during the complementary feeding transition. PLOS ONE 17(7): e0270213.

# Seeding through Feeding: nourishing the infant microbiome to support immune health 'The SUN' randomised controlled trial

Double-blind, randomised controlled trial, 300 infants who have not yet started solids and their mothers.

- Kūmara,
- Kūmara + resistant starch from bananas
- Control

### Primary outcome [1]

Difference in GP-confirmed respiratory infections at 10 months.



*Kai Rotorua*

### Secondary outcome [1]

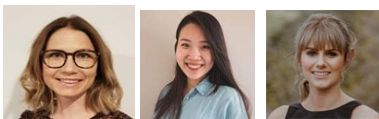
Difference in infant health assessed using daily records of illness, verified using medical records.

### Other Secondary outcomes

Difference in immune and omic markers – blood samples, faecal samples

Sleep.....



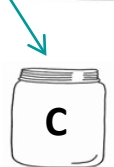


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Time  
(months)

**Monthly phone call**  
Questionnaires/App



0



4



*actigraph*



**Baseline (prior to introduction of solids)**

*(clinic visit)*

Questionnaires, anthropometry,  
faecal sample, breast milk sample  
Blood Sample

**Month 2**

*(clinic visit)*

Questionnaires, dietary intake,  
anthropometry, faecal sample,  
Breast milk sample

**Month 4**

*(clinic visit)*

Questionnaires, dietary intake,  
anthropometry, faecal sample  
Breast milk sample,  
Blood Sample

# Acknowledgements

Amy Lovell  
Robyn Lawrence  
Xiaoxi Fu  
Biju Balakrishnan  
Martin Kussmann  
Hannah Eriksen  
Nicole Roy  
Barbara Galland  
Karl Fraser  
Wayne Young  
Eric Altermann  
Jane Mullaney  
Jacqui Tonkin  
Simone Frame  
Starin McKeen  
Warren McNabb  
Vitor Geniselli Da Silva  
Olivier Gasser  
Janine Cooney  
Karin Schofield



**Intwood Consulting**



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