

HIGH-VALUE NUTRITION

> Ko Ngà Kai Whai Painga



Bovine Beta Casein Variants and Digestion

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Host Institution











Outline

- Research Timeline
- Beta Casein Variants
- Review of Studies on Beta Casein and Digestive Function
- Recent Research
- The Future



Research Timeline



Bovine Beta Casein~2.5 grams per serve



A2 Beta Casein: The Original Variant



Bovine Beta Casein Variants

- Originally all domesticated cows produced milk containing only the A2 type of beta casein
- Owing to natural genetic mutation, a variant of the A2 protein appeared; termed A1 protein, differs very slightly in composition from the original A2 protein
- Both types have since given rise to a number of minor related "sub-variants", such as those termed A3, B and C
- Beta casein variants can be divided into either "A1 type" or "A2 type" based on their digestion
- A1 and A2 variants are the primary types of beta-casein
- Variants A3, B and I are increasing in frequency



Digestion of Beta Casein Variants

- It is accepted that BCM-7 is produced from the incomplete digestion of the A1 but not A2 types of beta casein
- BCM-7 is an established exorphin, or peptide that binds and 'activates' opiate receptors expressed by cells and tissues throughout the body. (EFSA 2009)
- BCM-7 is produced at physiological levels in healthy adult human small intestine (Boutrou et al, 2013)



· Searching scientific or medical databases will throw up hundreds of published studies on BCM-7 or beta casomorphin



Barnett *et al* (2014)





A1 vs A2 protein consumption resulted in:

- Increased GI inflammation (MPO)
- Increased transit time (GITT)
- Increased DPPIV enzyme that breaks down BCM-7 but also controls stomach emptying and metabolic hormones.



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Ul Haq *et al* (2013)

- Comparative evaluation of cow β -case in variants (A1/A2) consumption on Th2-mediated inflammatory response in mouse gut. Haq MR, et al (2013) Eur J Nutr.
- A1 protein induced inflammation is BCM-7 mediated through established immune/cell pathways. •



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Challenges

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Boutrou et al (2013) and Ho et al (2015)

- Boutrou et al (2013) provide time line and amount of BCM-7 production following the consumption of milk protein.
 - Milligram amounts, sufficient to elicit biological response from tissue in the gut
 - Peaks at 30 min and present for four hours following intake of milk.
- Ho et al (2014) Preliminary Human Clinical Trial reports the potential link between A1 beta casein, GI inflammation and symptoms of intolerance

"a statistically significant positive association between abdominal pain and stool consistency was observed when participants consumed the A1 but not the A2 diet. Further studies of the role of A1 beta casein in milk intolerance are needed." (Ho et al, 2014 and Pal et al, 2015)





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Trivedi *et al (2014*) - Mechanism of BCM-7 interaction with human cells¹

A mechanism of BCM-7's biological interactions with neuronal and gut epithelial cells was published in 2014

BCM-7 binds the Mu Opiate receptor which is coupled to the EAAT3 receptor

BCM-7 binding inhibits cysteine uptake by EAAT3 receptor, reducing the level of substrate for antioxidant production

Consequently cellular glutathione (GSH) levels decrease putting the cell under oxidative stress

Oxidative stress and subsequent inflammation triggers both changes in gene expression and epigenetic modification of DNA



Trivedi *et al* (2015)



¹ Trivedi MS et al, Food-derived opioid peptides inhibit cysteine uptake with redox and epigenetic consequences. (2014) J Nutr Biochem. 25(10):1011-8. 1Trivedi M, Zhang Y, Lopez-Toledano M, Clarke A, Deth R. (2016) Differential neurogenic effects of casein-derived opioid peptides on neuronal stem cells: implications for redoxbased epigenetic changes. J Nutr Biochem. Nov;37:39-46

- Neural stem cells were treated with BCM-7, BCM-9 (A2) and hBCM-7 (from human)
- BCM-9 (A2) was comparable to hHBCM-7 in its effects where as BCM-7 was closer in effect to positive control morphine.



Jianqin *et al* (2016) – Human Clinical n=45 Milk Intolerant



Plots of reported intolerance symptoms of participants consuming a2 Milk[™] vs conventional milk in double blinded crossover clinical trial.

- (a) Participants confirmed as lactase deficient
- (b) Participants without lactase deficiency, and
 (Figure 3) is combined data

Gastrointestinal (GI) transit time also plotted for feeding groups and phases, showing increased (6hrs) transit time in conventional (A1/A2) fed groups compared to a2 Milk[™] fed

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Challenges

Conventional milk reported to increase inflammatory and immune markers

Table 2 Results of serum and fecal laboratory tests											
Variable	Sequence 1ª				Sequence 2 ^b				Mixed-effects ANOVA		
	Period 1		Period 2		Period 1		Period 2		Estimate ^c	SD	P-value ^d
	BL	PI	BL	PI	BL	PI	BL	PI			
Serum											
hs-CRP (mg/L)	1.00 ± 0.70	1.17 ± 0.64	0.97 ± 0.58	1.10 ± 0.58	1.03 ± 1.03	1.02 ± 1.11	1.01 ± 0.98	1.18 ± 1.04	0.0722 ^e	0.03746	0.0608
Hb (g/L)	141.7 ± 17.5	145.1 ± 17.0	136.7 ± 23.2	143.9 ± 16.4	142.8 ± 20.1	145.5 ± 17.7	137.5 ± 25.2	142.0 ± 18.1	-0.8654	1.6781	0.6088
IL-4 (ng/L)	11.8 ± 4.2	14.1 ± 5.2	11.1 ± 3.4	11.0 ± 3.2	11.9 ± 4.3	12.0 ± 3.7	11.8 ± 3.4	14.1 ± 4.6	2.5258	0.5338	<0.0001
lgG (g/L)	10.3 ± 2.1	11.6 ± 2.3	10.2 ± 1.7	10.6 ± 1.4	10.6 ± 2.1	11.1 ± 1.9	10.8 ± 1.8	12.2 ± 1.7	0.1426 ^e	0.03915	0.0007
lgE (IU/mL)	61.3 ± 29.0	69.8±38.0	63.3 ± 30.1	66.2 ± 28.9	58.6 ± 31.2	60.7 ± 33.3	56.7 ± 31.3	64.4 ± 34.2	5.9688	2.5741	0.0253
lgG1 (µg/mL)	29.4 ± 31.3	37.4 ± 39.1	31.0 ± 33.1	30.3 ± 32.9	33.0 ± 28.3	28.5 ± 28.5	32.9 ± 27.2	37.4 ± 31.4	0.2424 ^f	0.07873	0.0037

Reported in three animal studies in 2014

Confirmed in clinical trials in participants reported and confirmed as milk protein or lactose intolerance

Images taken with a pill endoscope (camera) demonstrate increased gut inflammation with A1 protein containing milk

a2 Milk™ associated with improved levels of SCFA; markers of healthy gut bacteria

Total SCFA (%)	0.76 ± 0.24	0.76 ± 0.24	0.72 ± 0.24	0.83 ± 0.19	0.73 ± 0.33	0.88 ± 0.33	0.74 ± 0.28	0.69 ± 0.18	-0.1289	0.03609	0.0009
Butanoic acid (%)	0.17 ± 0.07	0.16 ± 0.07	0.16 ± 0.07	0.20 ± 0.08	0.17 ± 0.09	0.23 ± 0.09	0.17 ± 0.08	0.16 ± 0.05	-0.0515	0.0122	0.0001
Propanoic acid (%)	0.18 ± 0.07	0.18 ± 0.07	0.17 ± 0.07	0.17 ± 0.07	0.17 ± 0.09	0.19 ± 0.13	0.18 ± 0.09	0.17 ± 0.07	-0.006 ^e	0.0187	0.7504
Acetic acid (%)	0.42 ± 0.15	0.42 ± 0.15	0.40 ± 0.14	0.46 ± 0.11	0.39 ± 0.19	0.46 ± 0.19	0.39 ± 0.17	0.36 ± 0.11	-0.0667	0.0226	0.0052
Feces											

^aSequence 1: $A1/A2 \rightarrow A2$ ^bSequence 2: $A2 \rightarrow A1/A2$ ^cA1/A2 - A2

- Reported in three animal studies in 2014
- Confirmed in clinical trials in participants reported and confirmed as milk protein or lactose intolerance
- Images taken with a pill endoscope (camera) demonstrate increased gut inflammation with A1 protein containing milk

Clinical data reports a₂ Milk[™] vs. conventional milk associated with higher levels of 'healthy' gut bacteria.

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HVN – aMiGo Trial (a2 Milk™ for gut comfort)



Participant Characteristics



Ethnic Distribution

- No non-Caucasians in Dairy Intolerant group
- Fewer non-Caucasian absorbers



Challenges

Dairy avoidance in dairy avoiders?



Lactose intolerant subjects experience greater symptoms with conventional milk



Malabsorption reduced with a2 Milk™



• Breath hydrogen decreased after a2 Milk[™] compared to conventional

National

Science

Challenges

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Urinary galactose not different

Summary: The aMiGo Trial

- In lactose intolerant individuals, a2 Milk™
 - Reduced nausea and faecal urgency than conventional milk, similar to

lactose-free

Breath hydrogen increased later and less after a2 Milk[™] than

conventional in lactose intolerant subjects



The Future

- Confirm and extend acute study observations around A1 protein free milk benefits to lactose intolerance.
- Examine and characterise the mechanism by which the effects are imparted
- Identify breathalomic or metabolomic markers to identify respondent individuals.
- Determine the proportion of respondents of selected population groups or market
- Study medium to long term influence on metabolic and inflammatory markers and outcomes



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