

# Mucosal Simulator of the Human Intestinal Microbial Ecosystem

*Commonly used acronym: M-SHIME*

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## Organisation

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**Country** Belgium

**Geographical Area** Flemish Region

## SCOPE OF THE METHOD

<b>The Method relates to</b>	Human health
<b>The Method is situated in</b>	Basic Research, Education and training, Translational - Applied Research
<b>Type of method</b>	In vitro - Ex vivo

## DESCRIPTION

### Method keywords

dynamic gut simulator

mucus covered microcosms

mucosal microenvironment

mucosal microbiome

fecal microbiota

## Scientific area keywords

host-microbiome interaction  
human health  
human diseases  
inflammatory bowel disease

## Method description

The M-SHIME is a dynamic model for the human digestive tract that mimics the different compartments - stomach, small intestine and colon - while also incorporating a cross-sectional simulation mimicking both the luminal as the mucosal microenvironment of the human gut. The mucosal environment in particular is simulated with mucus-coated microcosms (carriers with high specific surface area) to facilitate colonisation of the mucosal microbiota. Compared to regular SHIME systems, the M-SHIME model allows to accurately study the colonisation of the endogenous mucosal microbiome, study different colonisation behaviour according to health status, and assess the engraftment potential of probiotic strains or live biotherapeutics. The M-SHIME is inoculated with fecal microbiota from an individual human donor. Mimicking the mucosal conditions enables adaptation of the microbiota to the mucosal environment thus yielding a microbial community that reflects the *in vivo* situation in terms of composition and functionality. Pooling of fecal microbiota samples is strongly disadvised. The method is a 1 donor per experiment setup. This also allows maintaining the unique features of an individual's microbiome in order to study interindividual differences in mucosal colonisation and microbial behaviour.

## Lab equipment

BSL2 lab required as M-SHIME inoculum is derived from human fecal slurry.

## Method status

History of use  
Internally validated  
Published in peer reviewed journal

## **PROS, CONS & FUTURE POTENTIAL**

### **Advantages**

- Specific study of gut mucosa-associated microbiota that are difficult to access through invasive *in vivo* sampling procedures (tissue brushes, biopsies...),
- Multi-parametric model,
- Longitudinal model that allows time-resolved analyses,
- Responsive model that allows treatments that are impossible to carry out *in vivo*,
- Absence of host tissue allows to solely address responsiveness of the mucosal microbiota to determinants/stressors of interest (e.g. antibiotics, drugs... ).

### **Challenges**

Absence of host tissue means absence of epithelial barrier or immune response.

### **Modifications**

- Incorporation of different mucin types for more delicate enteropathogen studies,
- Incorporation of more immune related components (Ig, AMP...).

### **Future & Other applications**

Enteropathogen studies, Human nutrition, Chronic gut inflammation, Pharmacokinetics, Toxicokinetics...

## **REFERENCES, ASSOCIATED DOCUMENTS AND OTHER INFORMATION**

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