

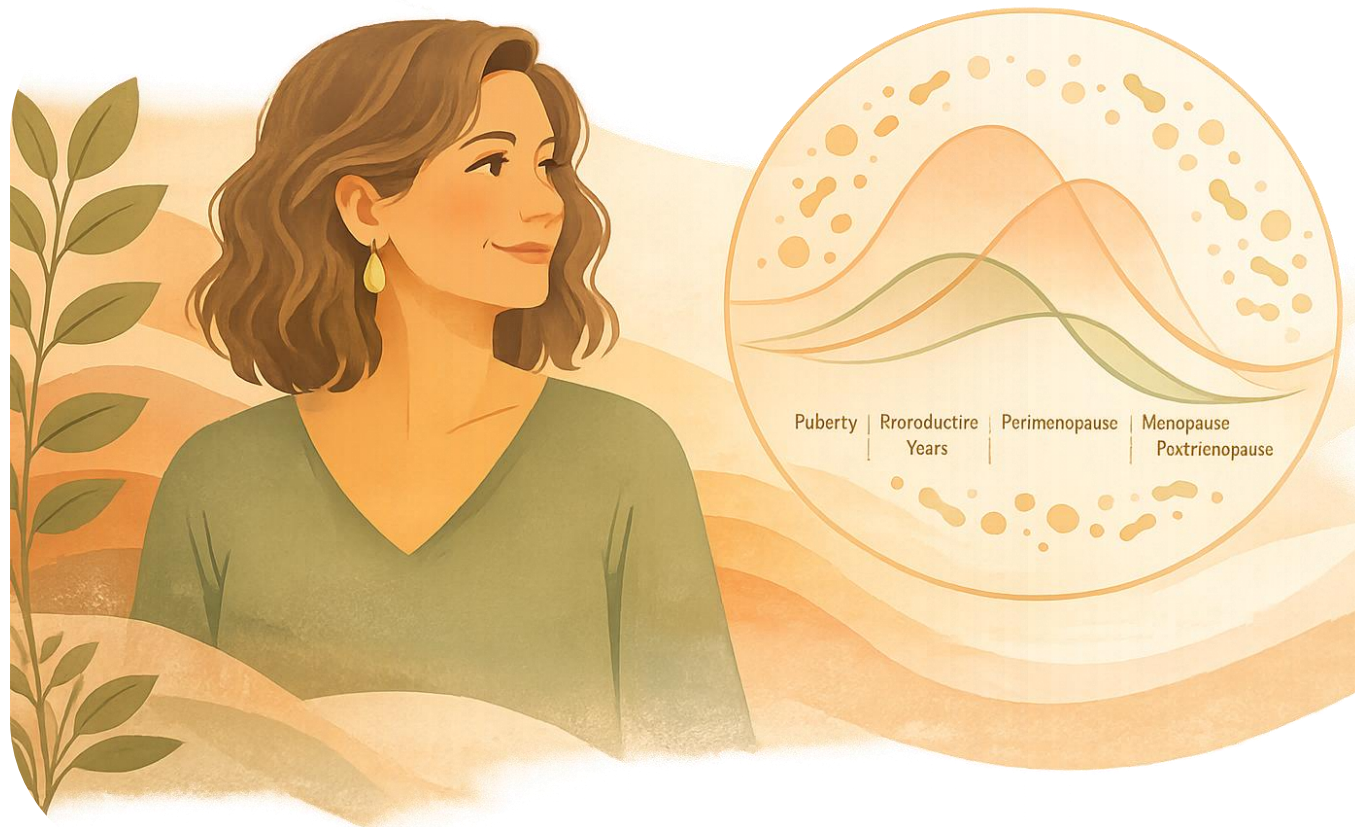


**Microbiome  
Center**

# The role of microbiome during menopause



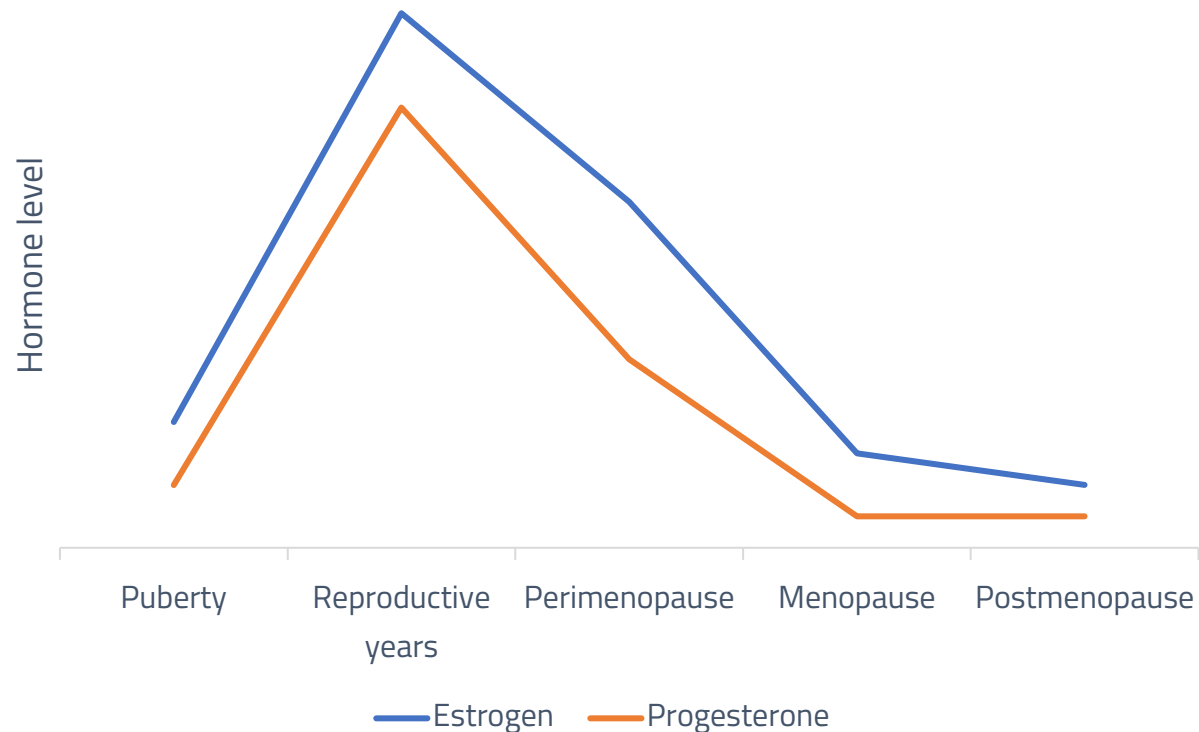
**Dr. Mariya Petrova**



# Women's hormonal journey

# Hormonal changes across a woman's life

Estrogen and progesterone shift from activation to persistently low levels.



## KEY TREND INSIGHTS

- 01 Puberty: hormones; reproductive cycles
- 02 Perimenopause: irregular estrogen, early progesterone decline
- 03 Menopause brings a marked estrogen drop; postmenopause remains persistently low.

1. Patel et al 2025 J Midlife Health . doi: 10.4103/jmh.jmh\_75\_25  
2. Zacur et al 2006 Headache doi: 10.1111/j.1526-4610.2006.00554.x.

# Understanding menopause

01

PERIMENOPAUSE

The transition leading to menopause. Begins in the early-to-mid 40s  
Can last 5-10 years

02

MENOPAUSE

The stage is reached after 12 consecutive months without menstruation  
Menopause is a single moment in time

03

POSTMENOPAUSE

Start immediately after the menopause.  
Continues for the rest of life



# Understanding menopause

01 

## PERIMENOPAUSE

- Fluctuating estrogen;
- Declining progesterone
- Mostly regular cycles;
- Symptoms: hot flashes; night sweats; mood changes, sleep disturbances; vaginal dryness

02 

## MENOPAUSE

- Marked decline in estrogen;
- Ovarian activity has essentially ceased
- Once diagnosed, the transition to the postmenopausal begins immediately

03 

## POSTMENOPAUSE

- Chronically low estrogen;
- Early postmenopause - hot flashes, sleep issues, vaginal dryness, mood changes, night sweats
- Late postmenopause – osteoporosis, metabolic and cardiovascular disease, urogenital atrophy

# Menopause – how does it feel?

## Hot Flashes

## Mind and Mood

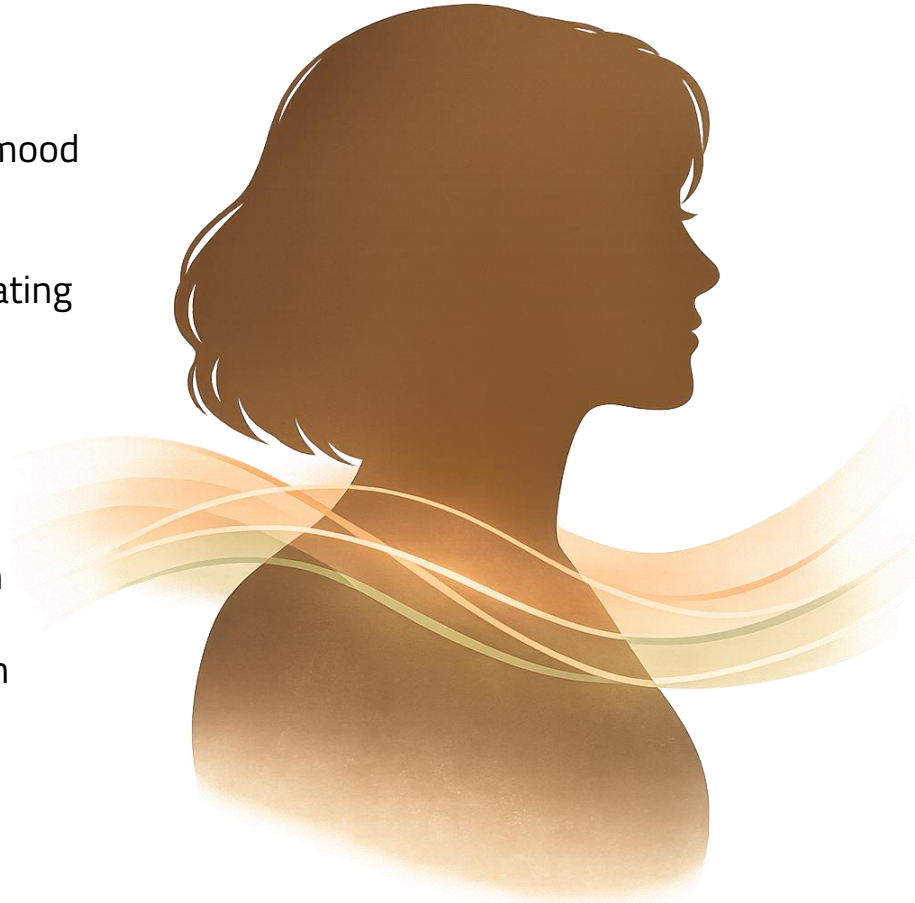
- Mood swings low mood
- Anxious feelings
- Irritability
- Difficulty concentrating
- Brain fog
- Memory issues
- Headaches

## Muscles and Joint Pain

- Joint pains/stiffness
- Long-term back pain
- Muscle pain

## Energy and Sleep

- Physical exhaustion
- Mental exhaustion
- Trouble sleeping



## Bone health

## Weight changes

## Hair, Skin and Nails

- Thinning hair
- Weak or brittle nails
- Itchy and dry skin
- Facial wrinkles
- Loss of skin firmness
- Dark spots

## Digestion

- Bloating
- Heartburn
- Upset stomach
- Constipation
- Diarrhea
- Bladder issues

## Intimacy

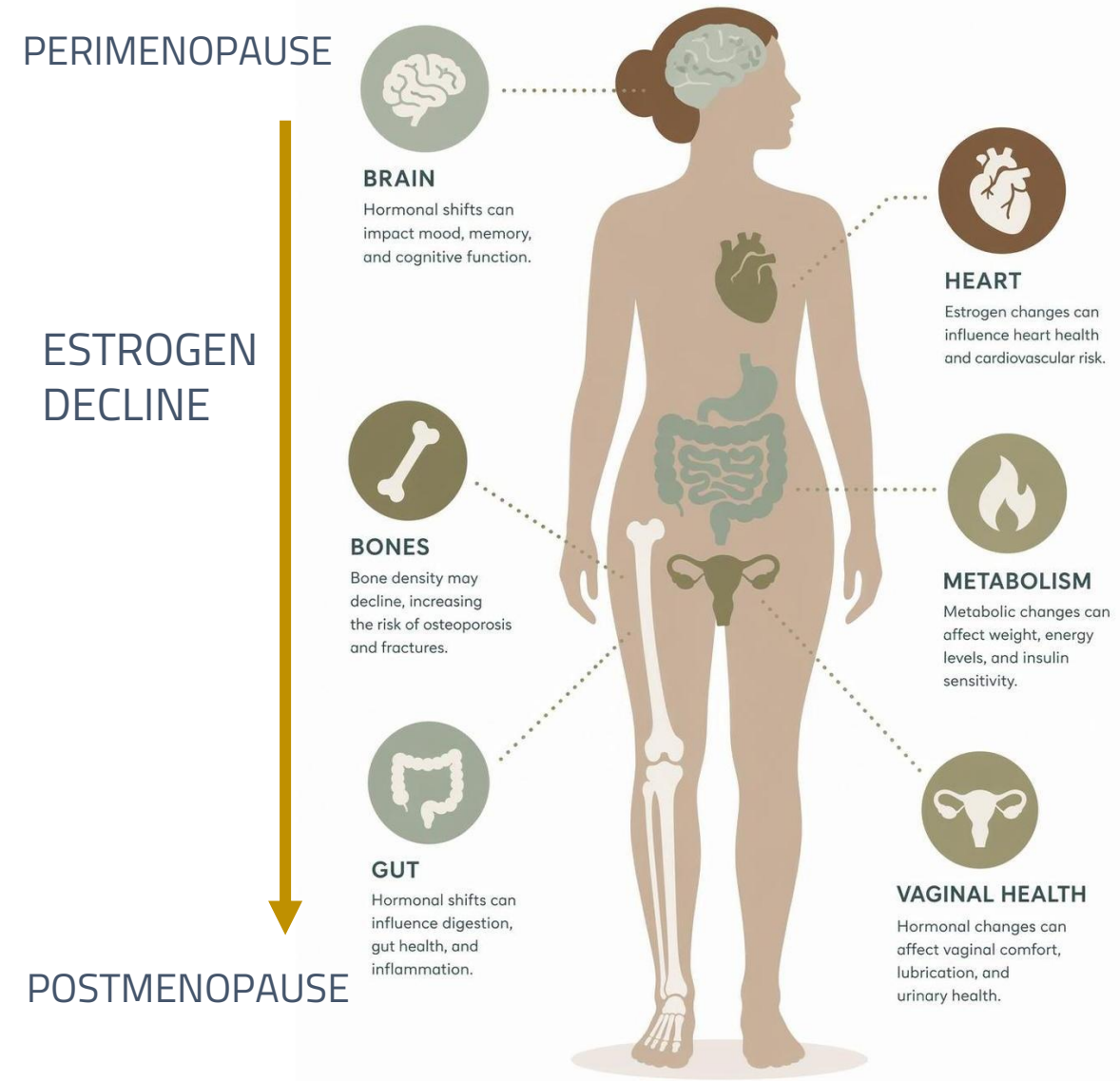
- Low sex drive
- Vaginal dryness
- Painful sex

# Hormonal Shifts drive Symptoms and Disease risk

- 01 Insulin Resistance & Type 2 Diabetes**  
Estrogen supports insulin sensitivity and glucose handling  
Decline leads to ↑ visceral fat & impaired glucose metabolism  
**Outcome:** Increased risk of metabolic syndrome and T2D
- 02 Cardiovascular Disease**  
Estrogen protects vascular function and lipid balance  
Decline leads to ↑ LDL, ↓ HDL, ↑ vascular stiffness  
**Outcome:** sharply increased CVD risk after menopause
- 03 Depression & Cognitive Changes**  
Estrogen influences serotonin, dopamine, and brain plasticity  
**Outcome:** mood instability (peri) and ↑ risk of depression and cognitive decline (post)
- 04 Thyroid Health**  
Estrogen affects thyroid hormone binding and  
**Outcome:** fatigue, weight gain, increased clinical relevance of thyroid disorders

1. Lim et al 2026 Nutrients <https://doi.org/10.3390/nu18071052>
2. Cuozzo et al 2026 PNS DOI: <https://doi.org/10.1017/S0029665126102201>
3. Wang et al. 2025 Frontiers in Endocrinology <https://doi.org/10.3389/fendo.2025.1562332>

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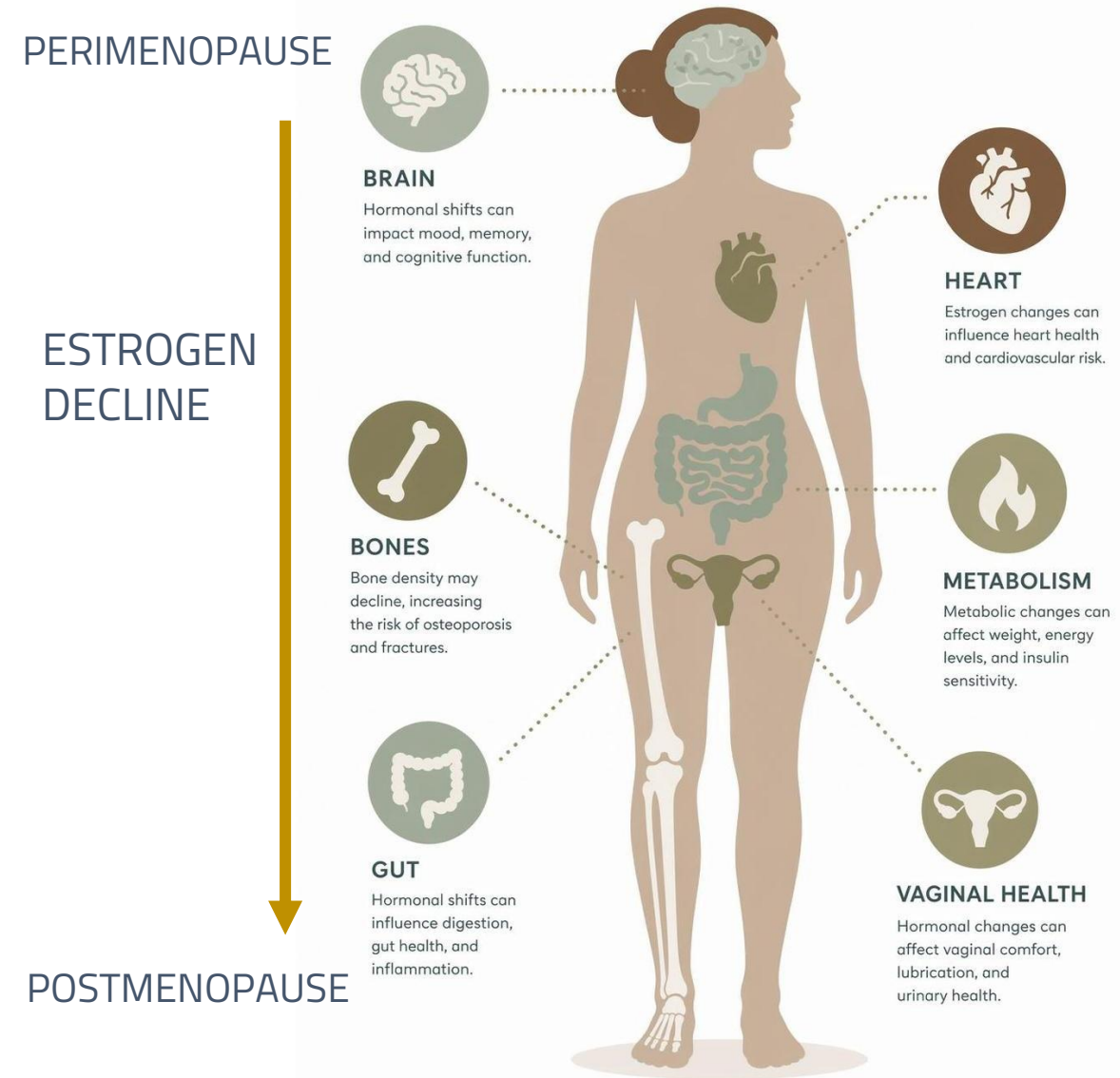


# Hormonal Shifts drive Symptoms and Disease risk

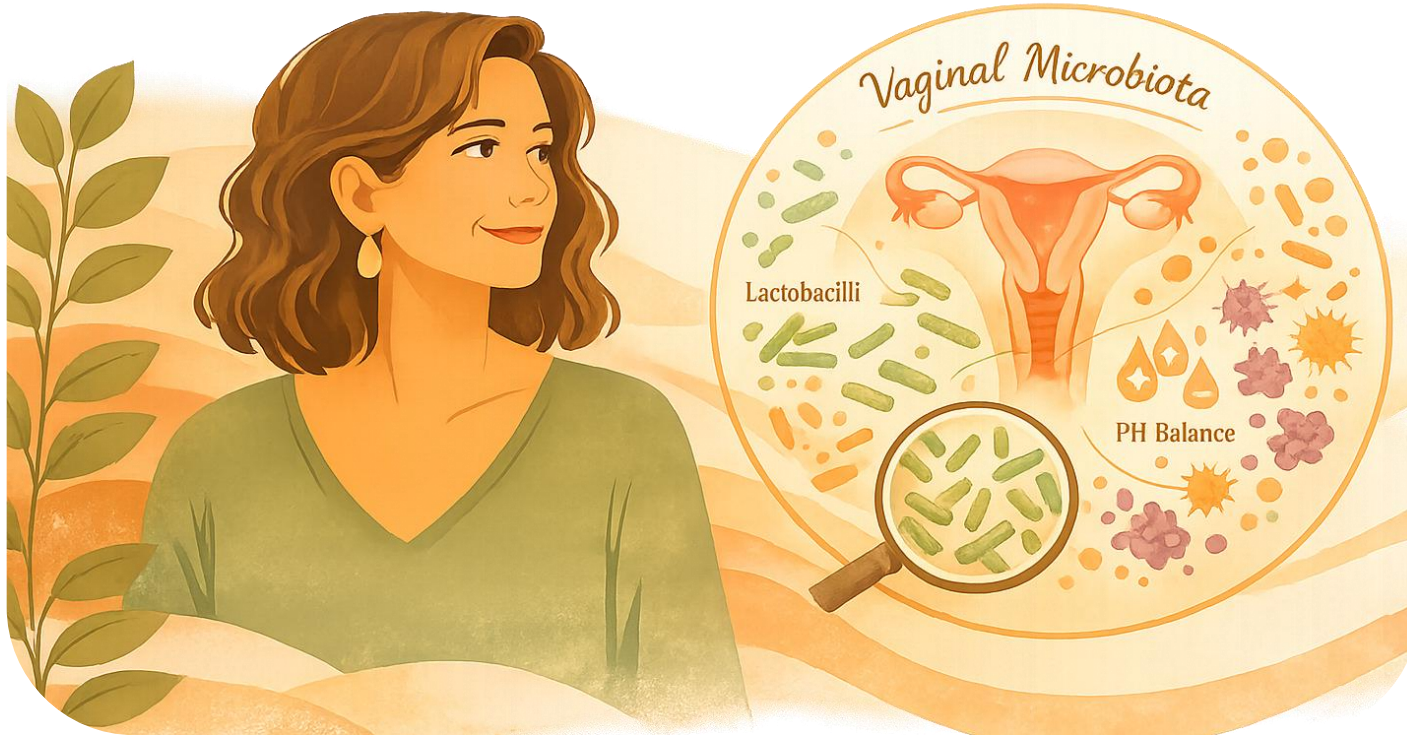
**05 Bone Health**  
Estrogen is critical for bone remodeling balance  
Decline leads to ↑ osteoclast activity (bone breakdown)  
**Outcome:** accelerated bone loss increased risk of osteopenia and osteoporosis higher fracture risk

**06 Vaginal Health**  
Estrogen maintains vaginal epithelium thickness glycogen → Lactobacillus growth and low pH  
Decline leads to ↓ glycogen ↓ Lactobacillus ↑ pH  
**Outcome:** vaginal dryness, irritation, infections, Genitourinary Syndrome of Menopause (GSM)

**07 Gut Health**  
Estrogen and gut microbiota are tightly linked (estrobolome)  
Menopause leads to altered gut microbiome composition leading to ↑ low-grade inflammation  
**Outcome:** contributes to metabolic dysfunction, systemic inflammation, hormone imbalance



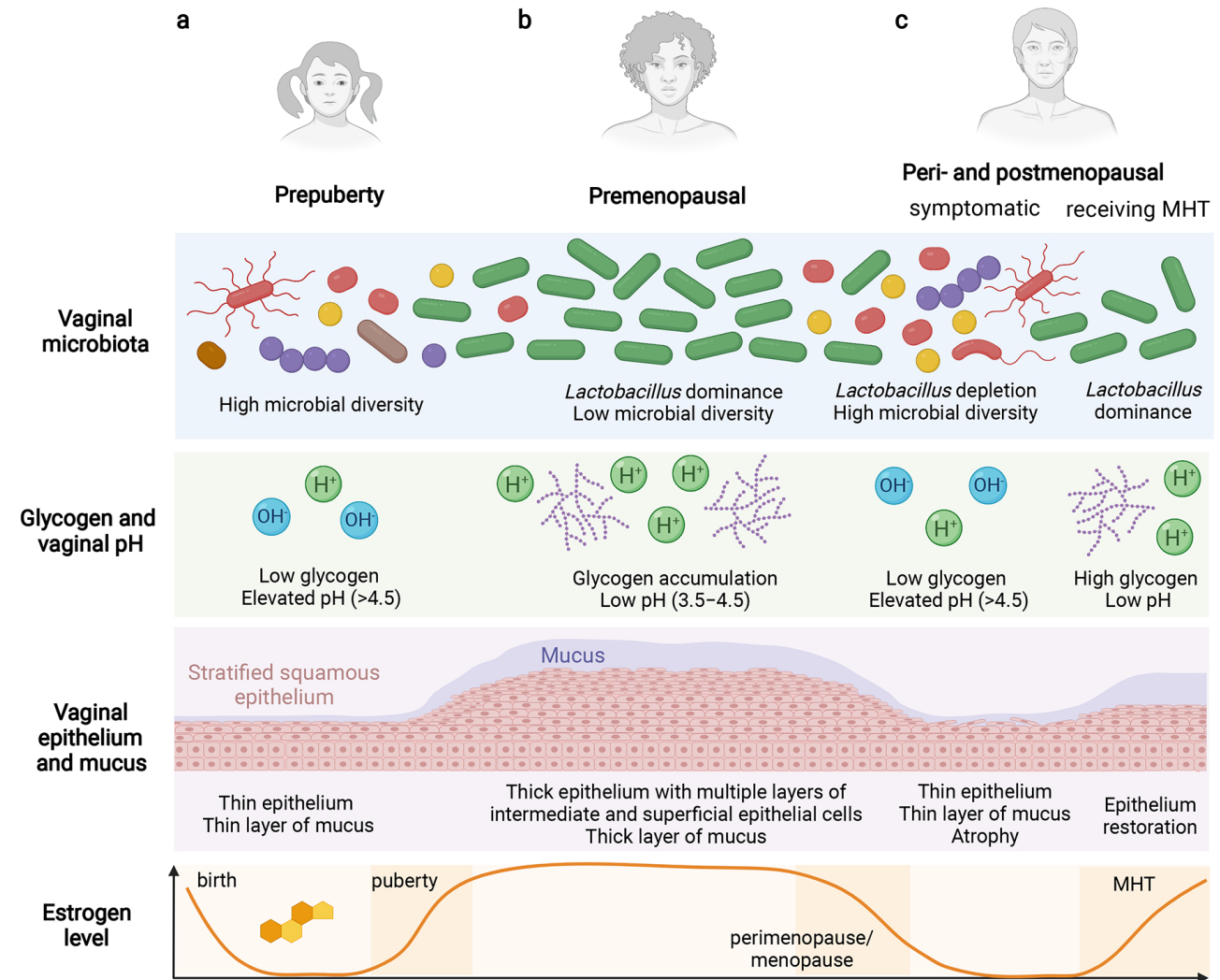
1. Lim et al 2026 Nutrients <https://doi.org/10.3390/nu18071052>
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3. Wang et al. 2025 Frontiers in Endocrinology <https://doi.org/10.3389/fendo.2025.1562332>



# Vaginal microbiota during menopause

# Vaginal microbiome across a woman's life<sup>1</sup>

- Before puberty: High microbial diversity, neutral pH, low estrogen.
- Reproductive age: Estrogen supports *Lactobacillus* dominance and low vaginal pH.
- Menopause: Reduced estrogen decreases *Lactobacillus*, increases pH and microbial diversity.
- Clinical relevance: Associated with vaginal atrophy and genitourinary symptoms; vaginal estrogen may help restore microbiome balance.



1. Laniewski et al 2022 Nat Microbiol doi: [10.1038/s41564-022-01071-6](https://doi.org/10.1038/s41564-022-01071-6)

# Optimal vaginal microbiome during reproductive age

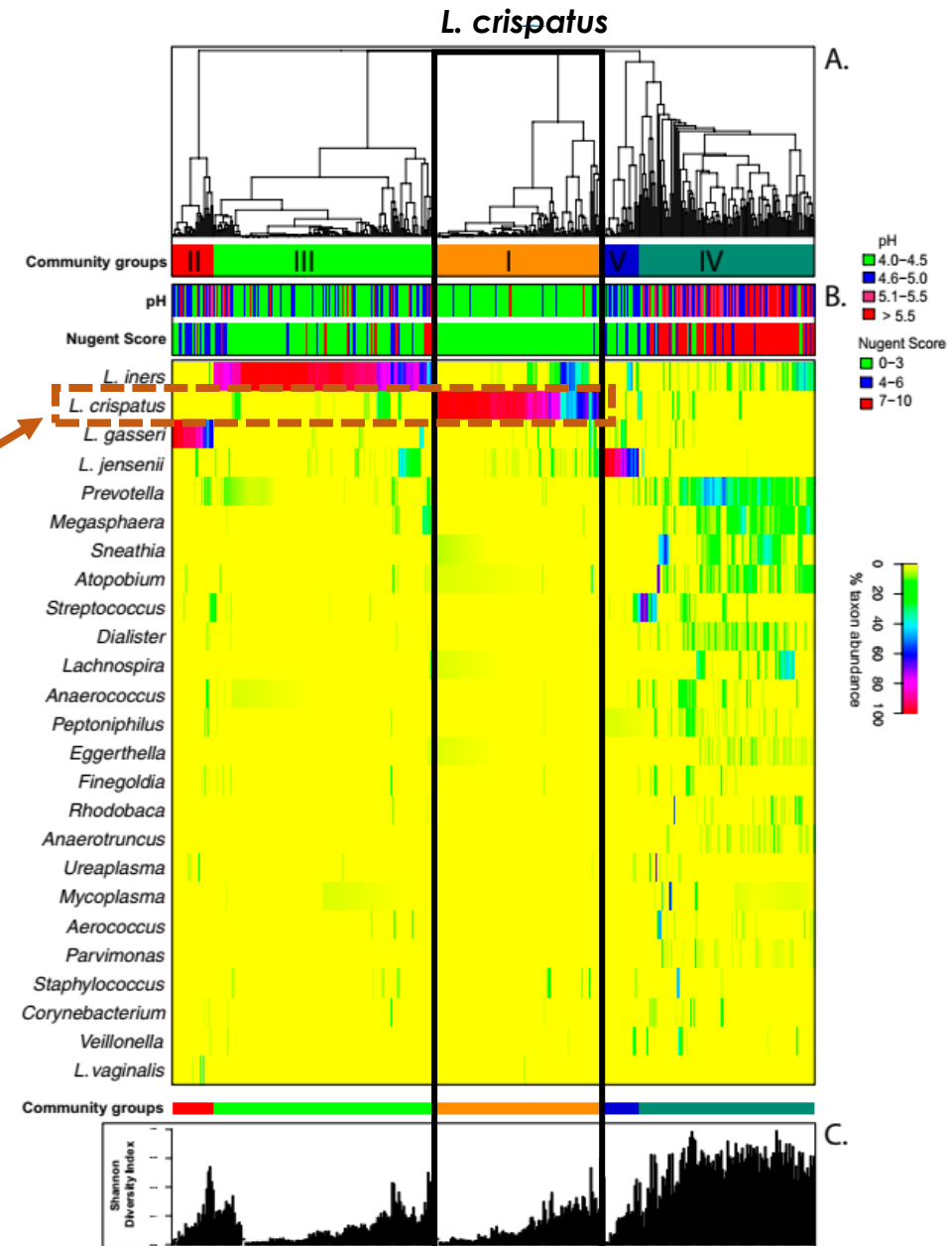
## Optimal vaginal microbiota is:

- characterized with low diversity
- dominated by *Lactobacillus* species
- low pH between 3.8 -4.5

## Community State Types<sup>1</sup>.

- CST 1 – ***L. crispatus* dominated; most associated with health**
- CST 2 – *L. gasseri* dominated
- CST 3 – *L. inres* dominated; benefits under question
- CST 4 – high diversity, non-*Lactobacillus* dominated<sup>2,3</sup>
- CST 5 – *L. jensenii* dominated

Research has built up since 2011 now each of the CST has been divided into subcategories



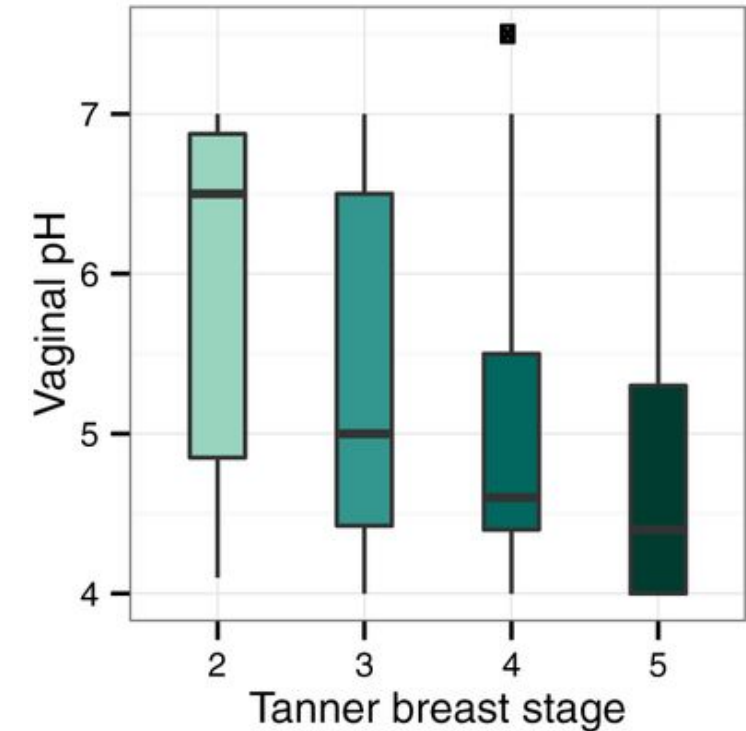
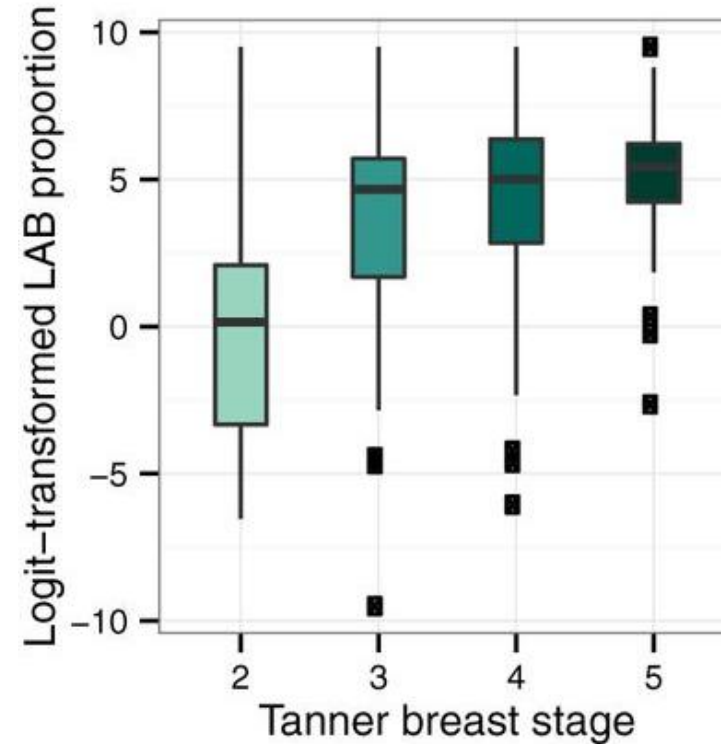
1. Ravel, J. et al. Proc Natl Acad Sci U S A 108, 4680–4687 (2011)  
 2. Verstraelen, H. et al. Journal of Lower Genital Tract Disease 26, 73 (2022)  
 3. Gajer, P. et al. Sci Transl Med 4, 132ra52 (2012)

# Vaginal microbiome: prepuberty/premenarche

Longitudinal research shows transition of vaginal microbiome from premenarche (~11y/o) to post-menarche<sup>1</sup>.

BV-like microbiome gradually shifts toward an adult-like *Lactobacillus*-dominated microbiome<sup>1</sup>:

- In almost all girls the microbiome changed to *Lactobacillus*-dominant after menarche. In some girls already at baseline.
- Transition occurred before or shortly after menarche
- Various trajectories occur, e.g. *L. iners*-dominated to *L. crispatus*-dominated.



1. Hickey, R. J. et al. mBio (2015)

# Vaginal microbiome: postmenopausal

Estrogen levels strongly affect the vaginal microbiota<sup>1,2,3</sup>.

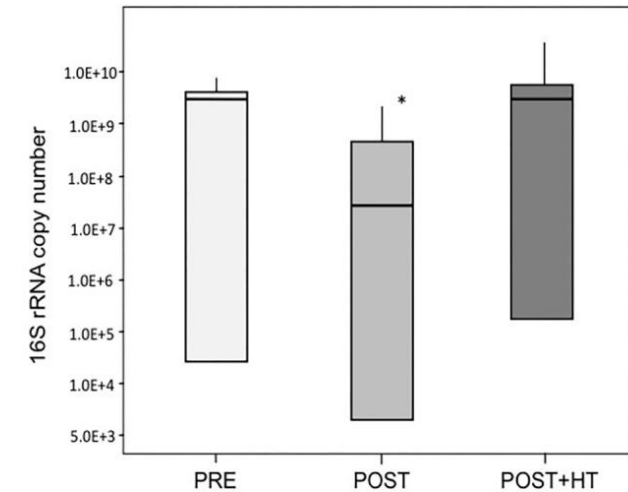
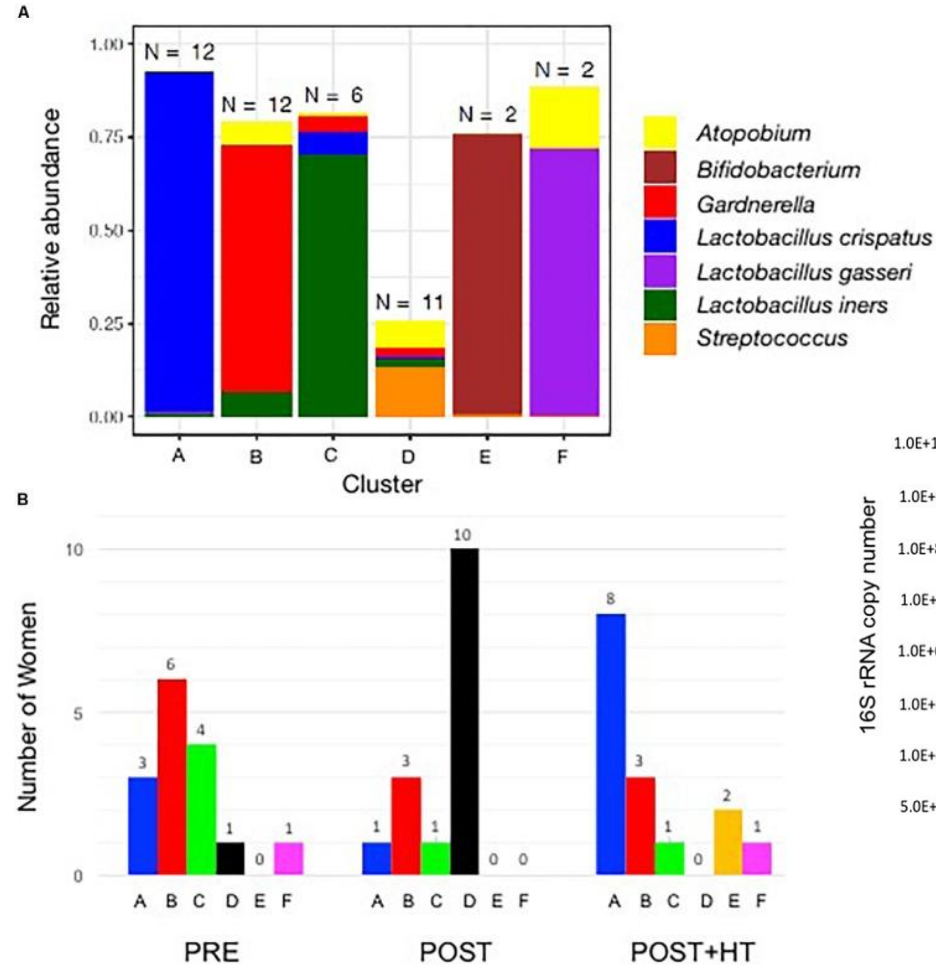
Differences between<sup>1,3</sup>

- Premenopausal
- Postmenopausal
- Postmenopausal with hormone replacement therapy

Postmenopausal women had:

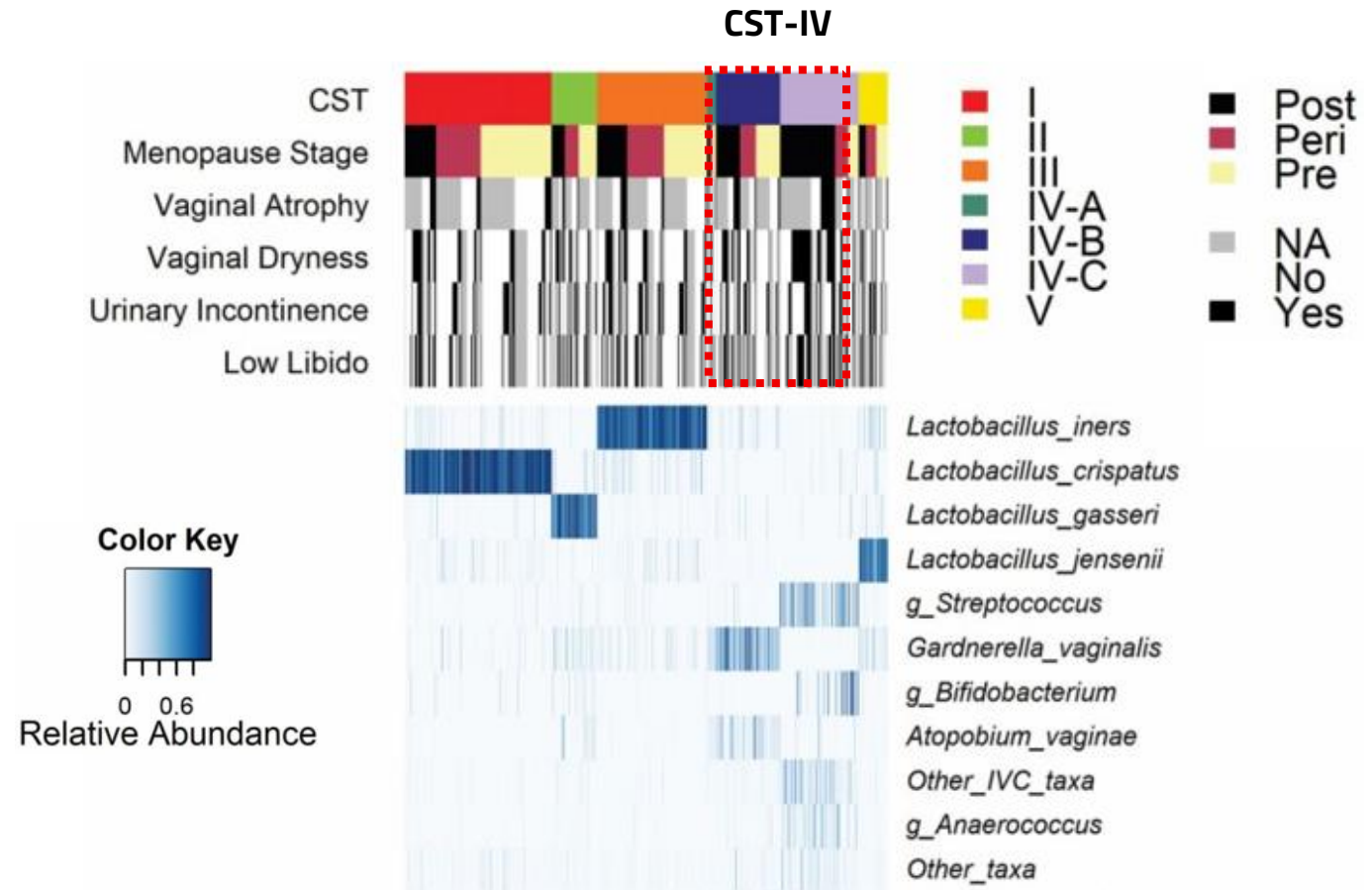
- Much more diverse microbiome without a single dominant species and few lactobacilli
- High prevalence of CST-IV
- 10x lower total abundance

1. Gliniewicz, K. et al. *Frontiers in Microbiology* 10, (2019)  
 2. Verstraelen, H. et al. *Journal of Lower Genital Tract Disease* 26, 73 (2022)  
 3. Chen et al *Microorganisms* (2025)



# Association of Vaginal Microbiota With Genitourinary Syndrome of Menopause<sup>1,2</sup>

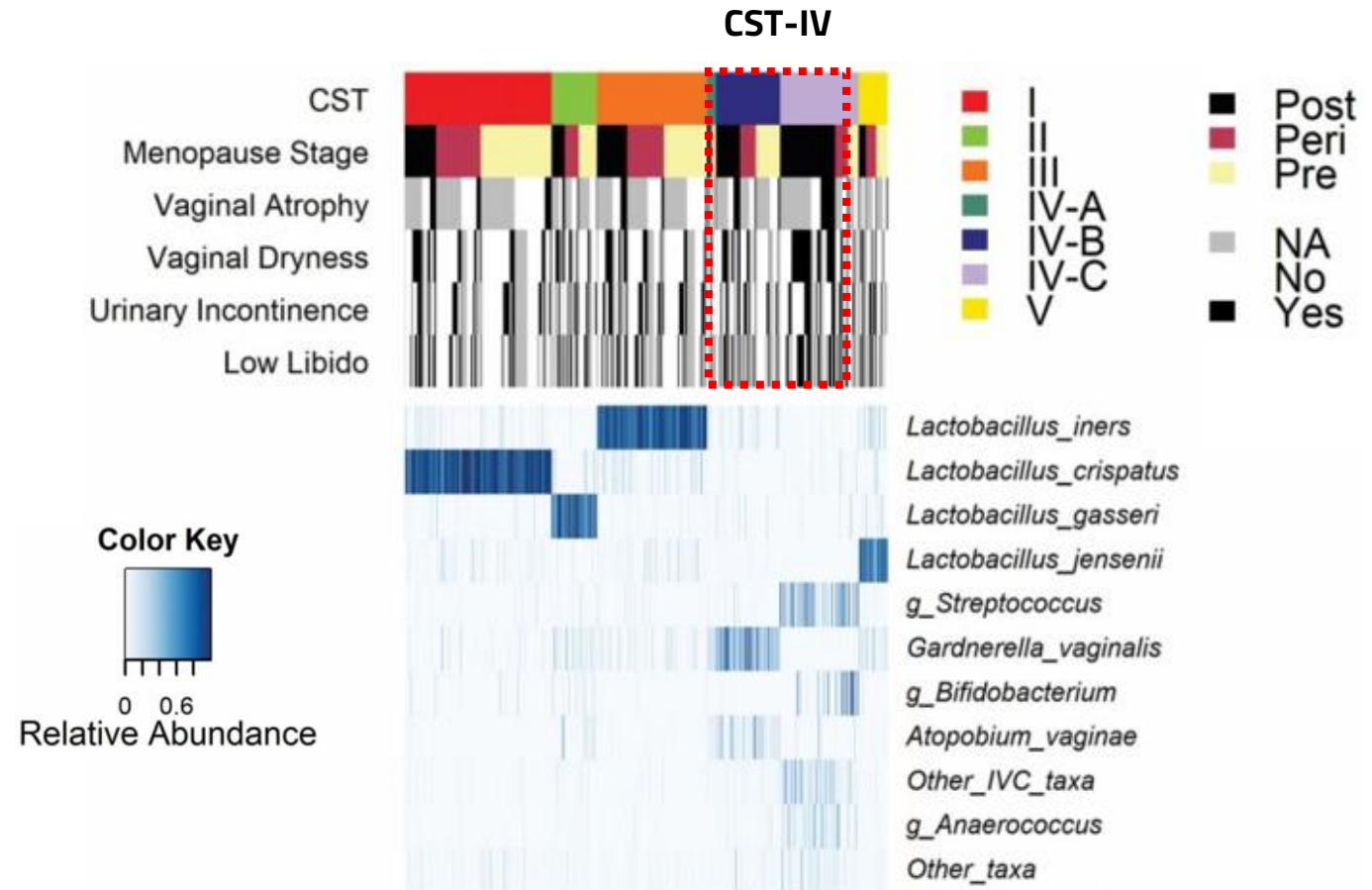
- Low-*Lactobacillus* communities (CST-IV) nearly doubled after menopause
- Strong association between estrogen deficiency and CST-IV states
- Women with *Lactobacillus*-dominated CSTs associated with lower odds of vaginal atrophy and GSM symptoms compared to women with CST-IV.
- *L. crispatus* (CST-I) ~75% lower odds of vaginal atrophy
- The women with the worst vaginal dryness scores were those with CST-IV communities.



1. Shardell et al 2021 J. Gerontol A Biol Sci Med Sci. doi: [10.1093/gerona/ghab120](https://doi.org/10.1093/gerona/ghab120)  
 2. Waetjes et al 2023 Menopause doi: [10.1097/GME.0000000000002263](https://doi.org/10.1097/GME.0000000000002263)

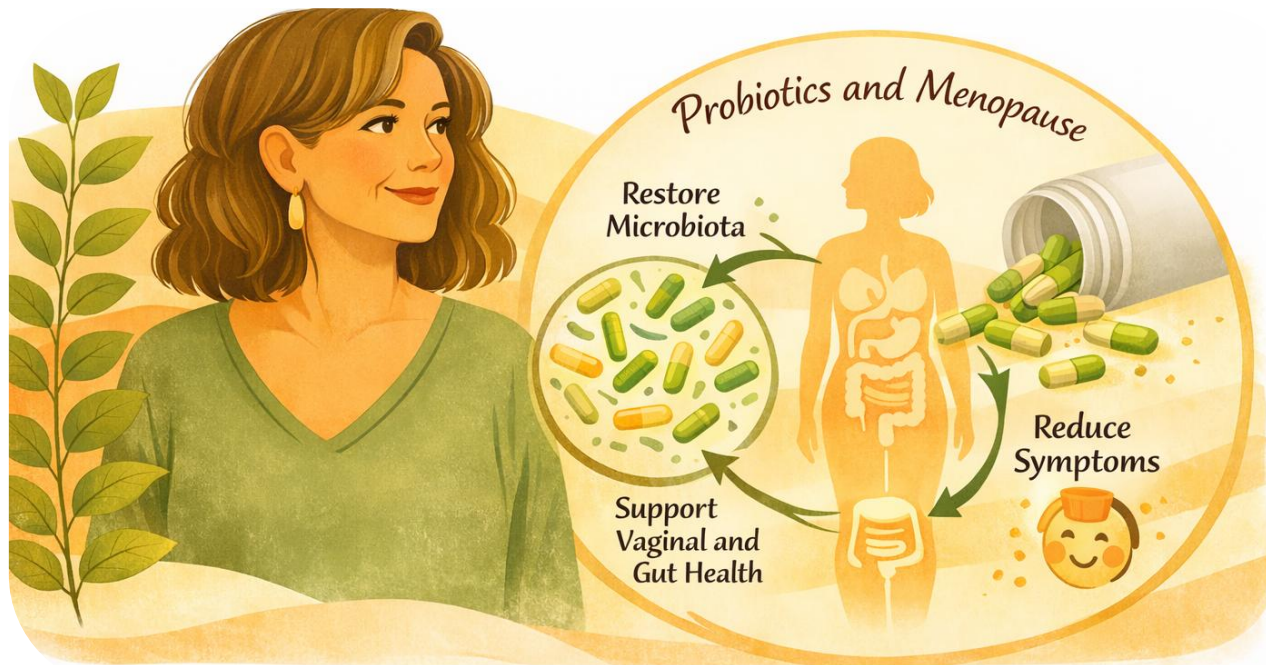
# Association of Vaginal Microbiota With Genitourinary Syndrome of Menopause<sup>1,2</sup>

- Postmenopausal women dominated by CST-IV reported the lowest libido. Women with microbiota dominated by *L. gasseri* and *L. jensenii* had the lowest odds of low libido.
- Vaginal dryness and low libido were strongly associated statistically
- Postmenopausal women whose microbiota stayed consistently *Lactobacillus*-dominated across visits had a lower odds of urinary incontinence
- Low-*Lactobacillus* CST-IV were associated with vaginal dryness, irritation, burning, dyspareunia and vaginal atrophy markers



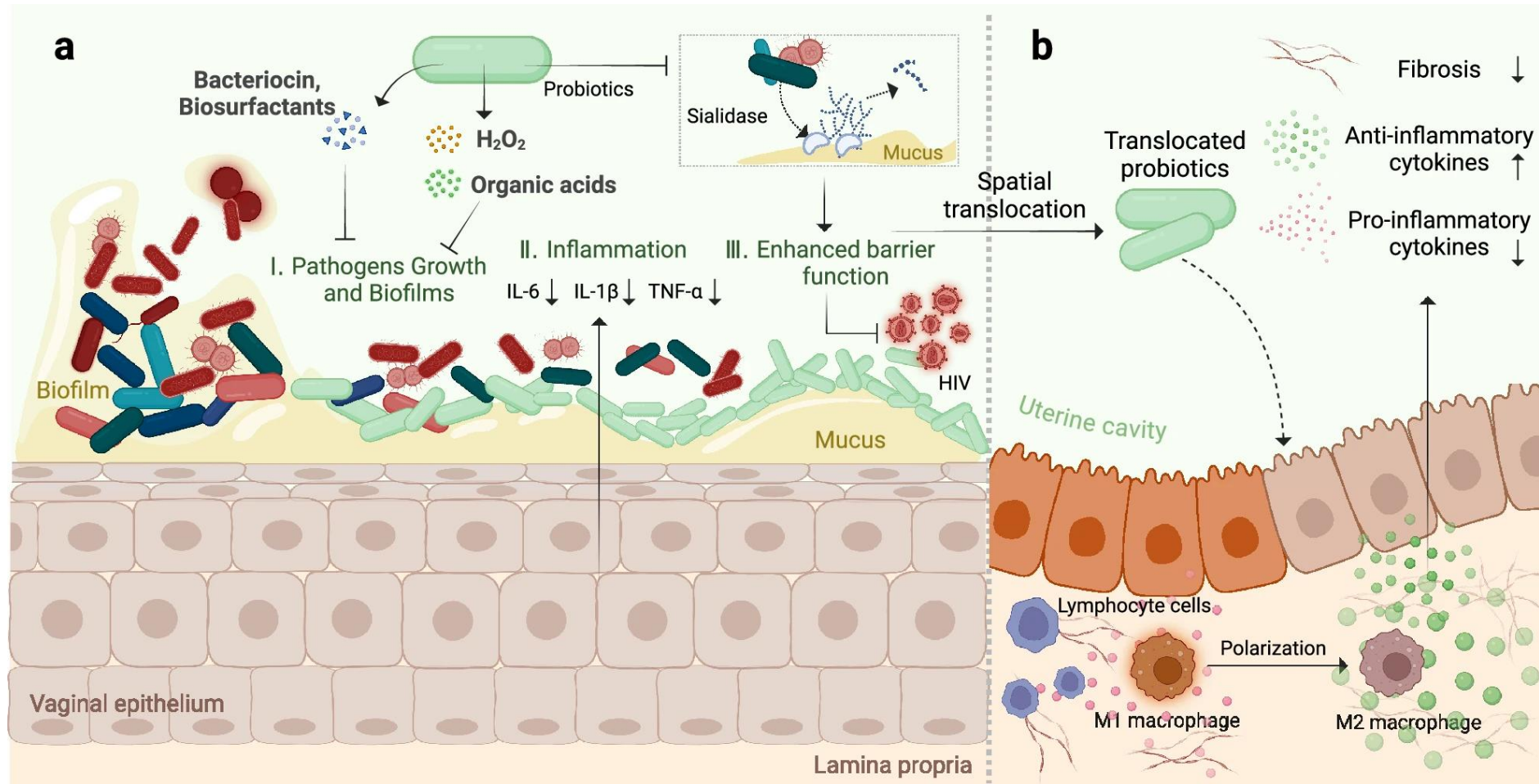
1. Shardell et al 2021 J. Gerontol A Biol Sci Med Sci. doi: [10.1093/gerona/ghab120](https://doi.org/10.1093/gerona/ghab120)

2. Waetjes et al 2023 Menopause doi: [10.1097/GME.0000000000002263](https://doi.org/10.1097/GME.0000000000002263)



# Vaginal suppositories

# Probiotics potential in the vaginal niche



# Microbiome Center vaginal suppositories

Contains three active strains:

- *Lactobacillus crispatus* SP28 ( $2.5 \times 10^9$  cfu/piece)
- *Lactobacillus crispatus* LCR01 ( $2.5 \times 10^9$  cfu/piece)
- *Lactobacillus acidophilus* La02 ( $2.5 \times 10^9$  cfu/piece)

Matrix from cacao butter with coconut butter.

Available as 30 vaginal suppositories for EUR 81 (excluding VAT and transport)

Includes leaflet with clear instructions



# Case report 1: post-menopausal

## Woman, 75 years old

- Recurrent UTIs: complaints of dry vagina, slight burning sensation vagina (not when urinating), dyspareunia, urine stick nitrite pos
- Bowel: flatulence, diarrhea, histamine symptoms (headache, fuzzy, tired).
- Treatment: vitC, cranberry, D-mannose, solidago.
- Gut microbiome: MyOwnBlend after which bowels improved (headache and fatigue were gone) but vaginal complaints not yet.
- Vaginal microbiome analysis requested.
- Awaiting results: Vagifem (estrogens), probiofem Bonusan inserted vaginally.
- Results analysis.



Datum monsterafname 14.09.2022 00:00 Gevalideerd door Thomas Gugereel Uitslagstatus Eindbericht  
 Materiaal AB Gevalideerd op 22.09.2022 Uitslagstatus op 22.09.2022

**Test** **Uitslag** **Eenheid** **Nombereik** **Vorig onderzoek**

**Vaginaal diagnostiek**

**Vaginaal microbiom**

**Kenmerken van vaginale afscheiding**

pH-waarde **7,0** 4,0 - 4,4  AB NAJ

**Diversiteit**

Diversiteit **4,55** < 0,90  AB NAJ MGESEG NAJ MGESEG

De diversiteit in de vaginale microbiota kan van mens tot mens verschillen. Een lage diversiteit is een teken van een gezonde fysiologische vaginale microbiota. Een hoge diversiteit kan op mycoses, pathogene bacteriën of seksueel overdraagbare aandoeningen wijzen.

Grad **4,5**

**Vagina type / Community state type (CST)**

De samenstelling van de vaginale microbiota kan in verschillende groepen verdeeld worden, de zogenaamde vagitypen. De vijf vagitypes I, II, III, IV en V worden onderscheiden door de dominerende lactobacillus species.

Vaginaltyp **IV**

**Bacteriële vaginose-score**

Aan de hand van de BV-score wordt de vaginale microbiota beoordeeld op een bacteriële vaginose (BV). Voor deze beoordeling wordt gekeken naar de fysiologische lactobacillen flora, de anaerobe begeleidende flora en de BV-geassocieerde flora.

< 5  AB NAJ MGESEG

BV Score **8**

< 5 normaal  
5 - 8 intermediair  
> 8 positief

**H2O2-opbouw**

H2O2 synthese index **1,00** > 4  AB NAJ MGESEG

**Lactobacillus (meest voorkomende spp.)**

Lactobacillus (spp.)	Uitslag	Eenheid	Nombereik	Vorig onderzoek
Lactobacillus crispatus	0,00	%	> 70,0	AB NAJ MGESEG
Lactobacillus gasseri	0,00	%		AB NAJ MGESEG
Lactobacillus jensenii	0,00	%		AB NAJ MGESEG
Lactobacillus iners	0,00	%		AB NAJ MGESEG
Lactobacillus (totaal)	<b>0,0</b>	%		AB NAJ MGESEG

AB=Abstrich

\*Externe analyse (R), A) geaccrediteerd NA) niet geaccrediteerd

**Test** **Uitslag** **Eenheid** **Nombereik** **Vorig onderzoek**

**Bacteriën geassocieerd met bacteriële vaginose**

Test	Uitslag	Eenheid	Nombereik	Vorig onderzoek
Atopobium vaginae	0,00	%	< 0,01	AB NAJ MGESEG
BVAB*-1	0,00	%	< 0,01	AB NAJ MGESEG
BVAB*-2	0,00	%	< 0,01	AB NAJ MGESEG
BVAB*-3	0,00	%	< 0,01	AB NAJ MGESEG
Bacteroides fragilis	0,00	%	< 0,01	AB NAJ MGESEG
Gardnerella vaginalis	0,00	%	< 0,01	AB NAJ MGESEG
Megasphaera spp.	0,00	%	< 0,01	AB NAJ MGESEG
Eggerthella spp.	0,00	%	< 0,01	AB NAJ MGESEG
Aerococcus christensenii	0,00	%	< 0,01	AB NAJ MGESEG
Dialister microaerophilus	<b>0,55</b>	%	< 0,01	AB NAJ MGESEG
Prevotella spp.	<b>23,03</b>	%	< 0,01	AB NAJ MGESEG
Dialister invisus	<b>0,55</b>	%	< 0,01	AB NAJ MGESEG
Mobiluncus spp.	0,00	%	< 0,01	AB NAJ MGESEG

**Anaërobe bacteriën**

Test	Uitslag	Eenheid	Nombereik	Vorig onderzoek
Anaerococcus spp.	<b>14,17</b>	%	< 0,01	AB NAJ MGESEG
Bacteroides spp.	<b>12,10</b>	%	< 0,01	AB NAJ MGESEG
Corynebacterium spp.	<b>4,88</b>	%	< 0,01	AB NAJ MGESEG
Escherichia spp.	<b>12,02</b>	%	< 0,01	AB NAJ MGESEG
Finegoldia spp.	<b>2,09</b>	%	< 0,01	AB NAJ MGESEG
Gemella spp.	0,00	%	< 0,01	AB NAJ MGESEG
Lachnospiraceae	<b>0,50</b>	%	< 0,01	AB NAJ MGESEG
Mycoplasma spp.	0,00	%	< 0,01	AB NAJ MGESEG
Parvimonas spp.	0,00	%	< 0,01	AB NAJ MGESEG
Sneathia spp.	0,00	%	< 0,01	AB NAJ MGESEG
Streptococcus spp.	0,00	%	< 0,01	AB NAJ MGESEG
Ureaplasma spp.	0,00	%	< 0,01	AB NAJ MGESEG
Veillonella spp.	0,00	%	< 0,01	AB NAJ MGESEG
Overig	30,16	%		AB NAJ MGESEG

**Candidiasis**

Test	Uitslag	Eenheid	Nombereik	Vorig onderzoek
Candida albicans	negatief		negatief	AB NAJ GPDR
Candida dubliniensis	negatief		negatief	AB NAJ GPDR
Candida glabrata	negatief		negatief	AB NAJ GPDR
Candida krusei	negatief		negatief	AB NAJ GPDR
Candida lusitanae	negatief		negatief	AB NAJ GPDR
Candida parapsilosis	negatief		negatief	AB NAJ GPDR
Candida tropicalis	negatief		negatief	AB NAJ GPDR

AB=Abstrich

\*Externe analyse (R), A) geaccrediteerd NA) niet geaccrediteerd



# Case report 1: post-menopausal



- Started MC vaginal suppositories
- Feels almost normal now, almost no more complaints vaginally.
- Personally feels suppositories have done a lot.
  
- Repeat measurement

Test	Uitslag	Eenheid	Normbereik	Vorig onderzoek
------	---------	---------	------------	-----------------

**Vaginaal diagnostiek**

**Vaginaal microbloom**

**Kenmerken van vaginale afscheiding**

pH-waarde 4,4 4,0 - 4,4

**Diversiteit**

Diversiteit 0,15 < 0,90

De diversiteit in de vaginale microbiota kan van mens tot mens verschillen. Een lage diversiteit is een teken van een gezonde fysiologische vaginale microbiota. Een hoge diversiteit kan op mycoses, pathogene bacteriën of seksueel overdraagbare aandoeningen wijzen.

Grad **0,1**

**Vagina type / Community state type (CST)**

De samenstelling van de vaginale microbiota kan in verschillende groepen verdeeld worden, de zogenaamde vagitypen. De vijf vagitypes I, II, III, IV en V worden onderscheiden door de dominerende lactobacillus species.

Vaginaltyp **I**

**Bacteriële vaginose-score**

Aan de hand van de BV-score wordt de vaginale microbiota beoordeeld op een bacteriële vaginose (BV). Voor deze beoordeling wordt gekeken naar de fysiologische lactobacillen flora, de anaërobe begeleidende flora en de BV-geassocieerde flora.

BV Score **4**

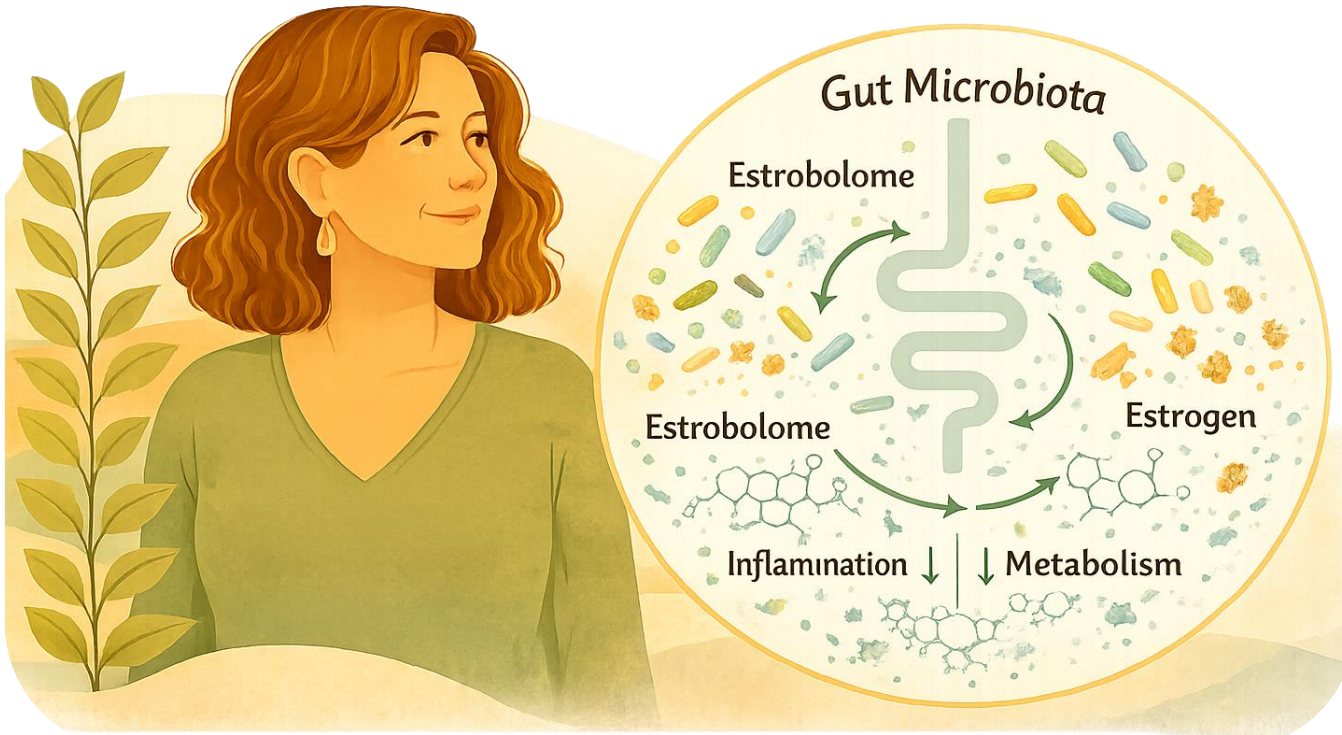
**H2O2-opbouw**

H2O2 synthese index 6,00 > 4

**Lactobacillus (meest voorkomende spp.)**

Lactobacillus spp.	Uitslag	Eenheid	Normbereik	Vorig onderzoek
Lactobacillus crispatus	98,92	%	> 70,0	0,00
Lactobacillus gasseri	0,00	%		0,00
Lactobacillus jensenii	0,00	%		0,00
Lactobacillus iners	0,00	%		0,00
Lactobacillus (totaal)	98,9	%		0,0

Test	Uitslag	Eenheid	Normbereik	Vorig onderzoek
<b>Bacteriën geassocieerd met bacteriële vaginose</b>				
Atopobium vaginae	0,00	%	< 0,01	0,00
BVAB*-1	0,00	%	< 0,01	0,00
BVAB*-2	0,00	%	< 0,01	0,00
BVAB*-3	0,00	%	< 0,01	0,00
Bacteroides fragilis	0,00	%	< 0,01	0,00
Gardnerella vaginalis	0,00	%	< 0,01	0,00
Megasphaera spp.	0,00	%	< 0,01	0,00
Eggerthella spp.	0,00	%	< 0,01	0,00
Aerococcus christensenii	0,00	%	< 0,01	0,00
Dialister microaerophilus	0,01	%	< 0,01	0,55
Prevotella spp.	0,04	%	< 0,01	23,03
Dialister invisus	0,01	%	< 0,01	0,55
Mobiluncus spp.	0,00	%	< 0,01	0,00
<b>Anaërobe bacteriën</b>				
Anaerococcus spp.	0,20	%	< 0,01	14,17
Bacteroides spp.	0,00	%	< 0,01	12,10
Corynebacterium spp.	0,00	%	< 0,01	4,68
Escherichia spp.	0,00	%	< 0,01	12,02
Finnegoldia spp.	0,02	%	< 0,01	2,09
Gemella spp.	0,00	%	< 0,01	0,00
Lachnospiraceae	0,00	%	< 0,01	0,80
Mycoplasma spp.	0,00	%	< 0,01	0,00
Parvimonas spp.	0,00	%	< 0,01	0,00
Sneathia spp.	0,00	%	< 0,01	0,00
Streptococcus spp.	0,00	%	< 0,01	0,00
Ureaplasma spp.	0,00	%	< 0,01	0,00
Veillonella spp.	0,00	%	< 0,01	0,00
Overig	0,81	%		30,16
<b>Candidiasis</b>				
Candida albicans	negatief		negatief	negativ
Candida dubliniensis	negatief		negatief	negativ
Candida glabrata	negatief		negatief	negativ
Candida krusei	negatief		negatief	negativ
Candida lusitaniae	negatief		negatief	negativ
Candida parapsilosis	negatief		negatief	negativ
Candida tropicalis	negatief		negatief	negativ



# Gut Microbiota during menopause

# Why look beyond the vagina?

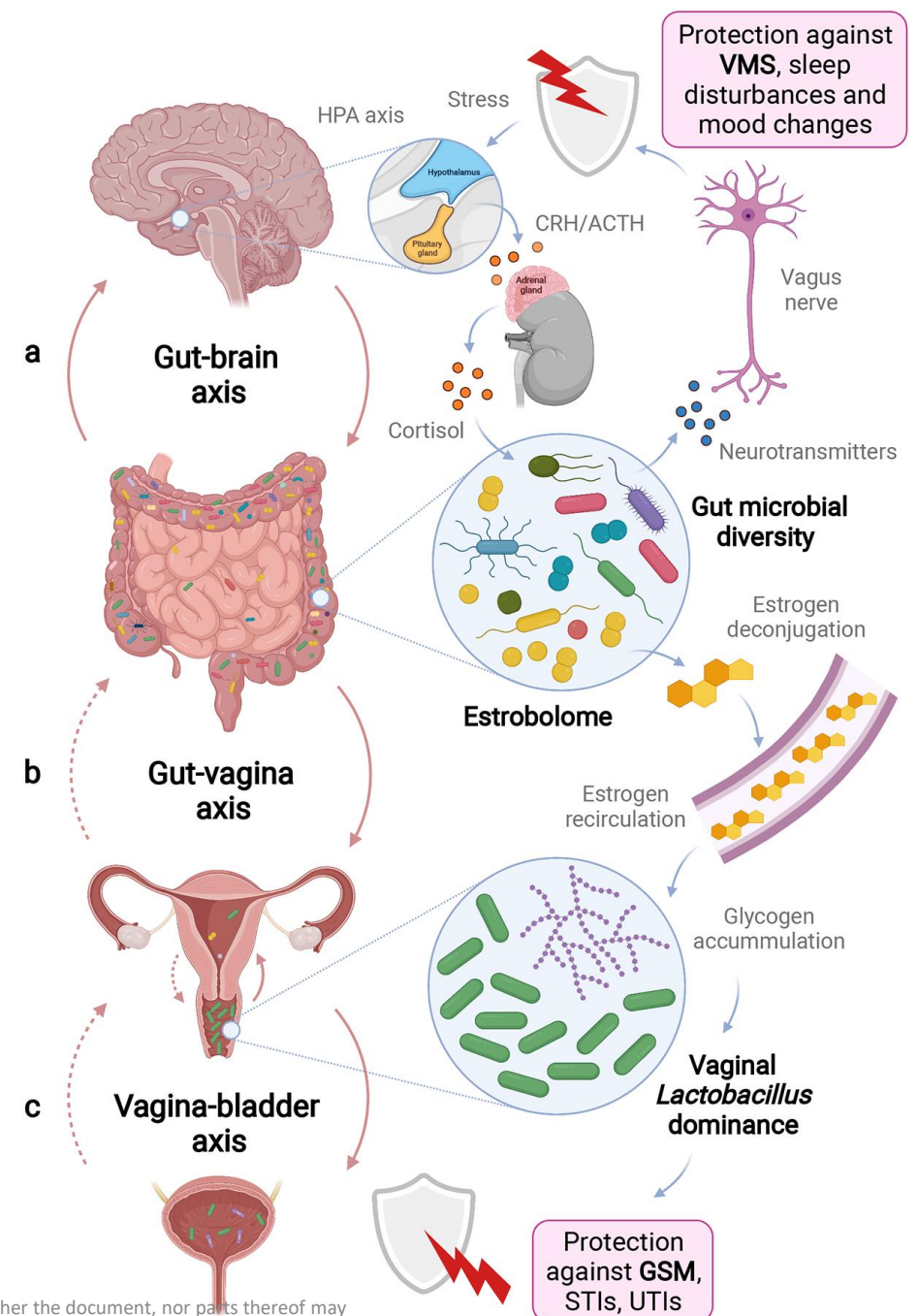
**Menopause is a systemic transition, and the gut microbiota may contribute to symptom development**

During menopause estrogen decline affecting multiple body systems

Gut microbiota interact with:

- estrogen metabolism
- inflammation
- metabolism
- brain signaling

Emerging concept: gut-brain-vagina axis – help maintain systemic and urogenital health in ageing women.



1. Laniewski et al 2022 Nat Microbiol doi: 10.1038/s41564-022-01071-6

# Menopause alter the gut microbiota composition

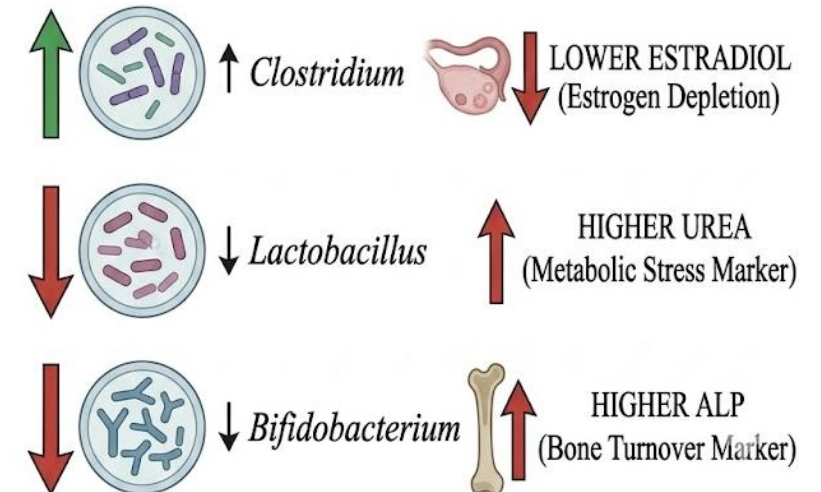
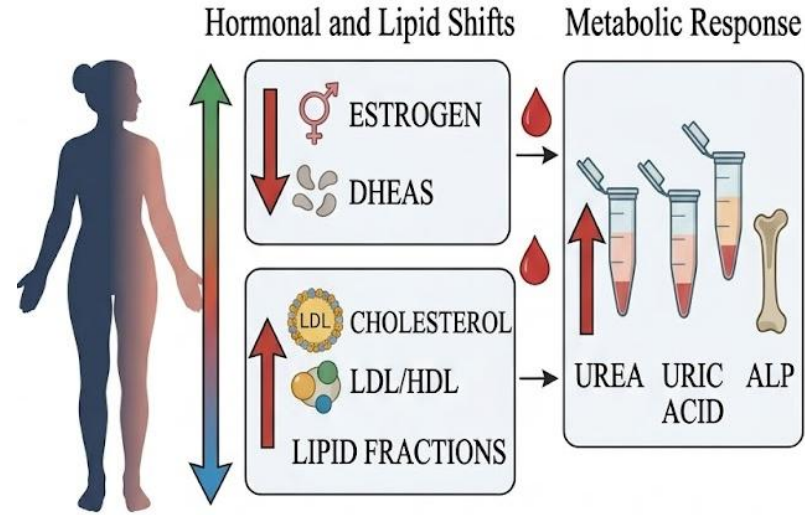
Target microbiome studies suggest menopause is associated with shifts in gut bacterial composition and correlations with hormonal and metabolic markers, supporting a gut–endocrine interaction model.

Menopause transition was associated with:

- ↑ cholesterol and lipid changes
- ↑ metabolic markers (urea, uric acid, ALP)
- hormonal decline (estrogen, DHEAS trends)

In postmenopausal women

- ↑ *Clostridium* was associated with lower estradiol levels, suggesting an estrogen depletion
- ↓ *Lactobacillus* was associated with higher urea - metabolic stress marker
- ↓ *Bifidobacterium* was associated with bone turnover marker (ALP)



1. de Silva et al., 2022 BMC Women's Health <https://doi.org/10.1186/s12905-022-02063-8>

# Gut microbiota and metabolomics in postmenopausal women

Menopause-associated hormonal changes were linked to altered gut microbiota composition, linked to SCFAs production

Women with higher Follicle-Stimulating Hormone (FSH) more commonly reported hot flashes, sweating and bone pain.

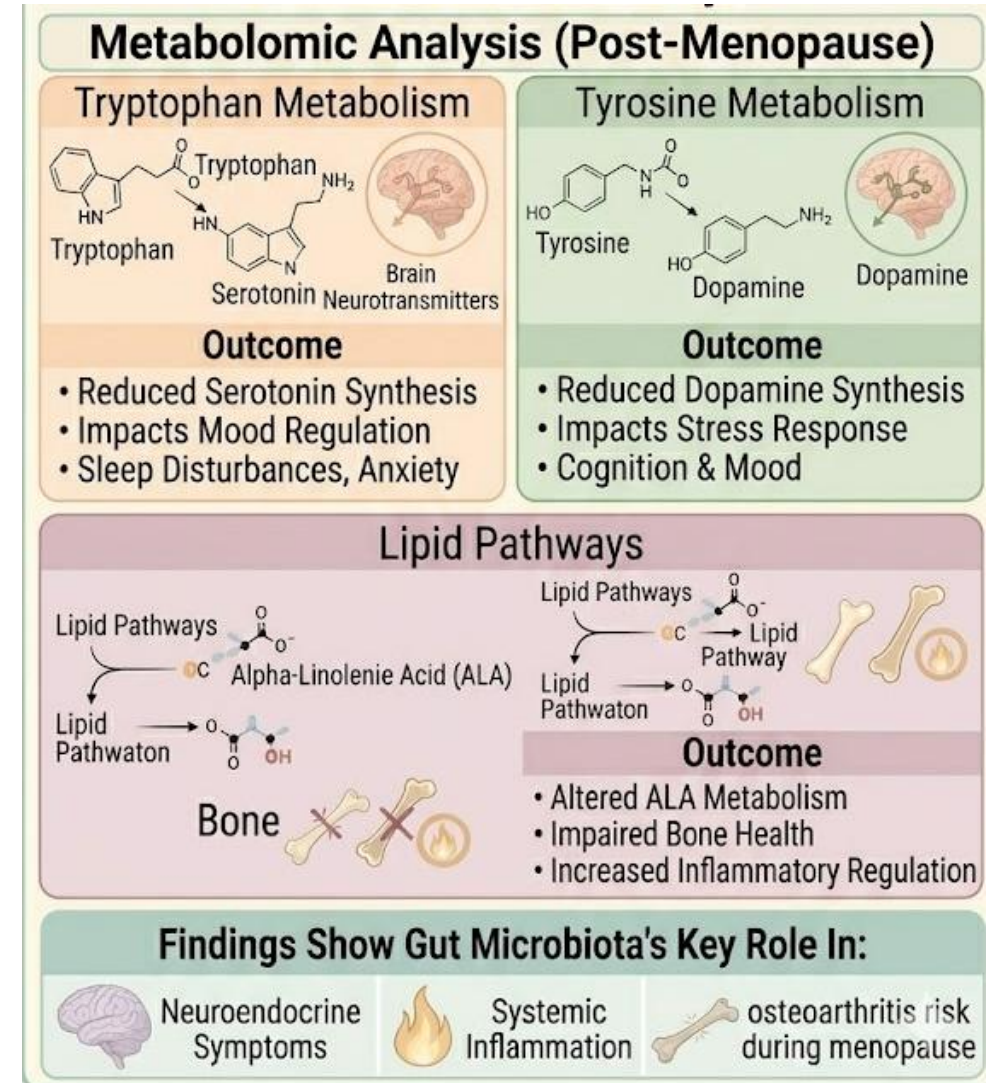
Metabolomic analysis showed alterations in **stool** levels of:

- tryptophan metabolites
- tyrosine metabolites
- lipid metabolites



Rational to include metabolites analysis for women during perimenopause and postmenopause

1. Xie et al., 2024 BMC Women's Health <https://doi.org/10.1186/s12905-024-03448-7>



# The advice aid contains an easy way to use the metabolome data

Reizdarm relevante Metabolite				
Histamin	0,6	µmol/l	< 5	FE HAJ LOMS
Tryptophan	13,9	µmol/l	> 14,5	FE HAJ LOMS
Serotonin	3,4	µmol/l	0,8 - 4,5	FE HAJ LOMS
GABA	31	µmol/l	> 60	FE HAJ LOMS
Aminosäuren (Vorstufen)				
Tryptophan	13,9	µmol/l	> 14,5	FE HAJ LOMS
Tyrosin	48	µmol/l	> 50	FE HAJ LOMS
Phenylalanin	28	µmol/l	> 35	FE HAJ LOMS
Toxine				
Tryptamin	0,61	µmol/l	0,05 - 19,99	FE HAJ LOMS
Indoxylsulfat	3,25	µmol/l	< 0,2	FE HAJ LOMS
p-Cresol Sulfat	8,92	µmol/l	< 1,5	FE HAJ LOMS
Kynureninsäure	3,59	µmol/l	0,1 - 7,49	FE HAJ LOMS
Summenparameter				
Toxin- Score	20	Index	< 3	FE HAJ LOMS
Indolderivate (AhR-Agonisten)				
Indolpropionat (IPA)	1,94	µmol/l	> 3,5	FE HAJ LOMS
Indol-3-Essigsäure (IAA)	14,4	µmol/l	> 3,2	FE HAJ LOMS
Indolaldehyd (IAId)	0,49	µmol/l	> 0,35	FE HAJ LOMS
Tryptamin	0,61	µmol/l	0,05 - 19,99	FE HAJ LOMS
Indol	77,2	µmol/l	> 60	FE HAJ LOMS
Indollaktat (ILA)	1,50	µmol/l	> 1,4	FE HAJ LOMS
Kynureninsäure	3,59	µmol/l	0,1 - 7,49	FE HAJ LOMS
Summenparameter				
AHR-Score	78	%	> 80	FE HAJ LOMS
Gallensäuren (GS)				
Konjugierte / freie GS	3,2	Ratio	2 - 20	FE HAJ LOMS
Desoxycholsäure (DCA)	627	µmol/l	175 - 2500	FE HAJ LOMS
Zytotoxische / protektive GS** **DCA / UDCA	59,21	Ratio	< 67	FE HAJ LOMS
Gesamtsumme Gallensäuren	1035	µmol/l	630 - 4125	FE HAJ LOMS

**Metabolome (6)**

- Erhöhtes Histamin 

Liegt in der Metabolomanalyse ein erhöhter Histaminspiegel vor? 0 = Keine Erhöhung; 1 = ein bisschen; 2 = Erhöhung; 3 = starke Erhöhung; 4 = sehr starke Erhöhung.
- Erniedrigtes Serotonin 

Liegt in der Metabolomanalyse ein erniedrigter Serotoninspiegel vor? 0 = keine Erniedrigung; 1 = ein bisschen; 2 = Erniedrigt; 3 = stark erniedrigt; 4 = sehr stark erniedrigt.
- Erhöhtes serotonine 

Liegt in der Metabolomanalyse ein erhöhter Serotoninspiegel vor? 0 = Keine Erhöhung; 1 = ein bisschen; 2 = Erhöhung; 3 = starke Erhöhung; 4 = sehr starke Erhöhung.
- Erniedrigtes GABA 

Liegt in der Metabolomanalyse ein erniedrigter GABA-spiegel vor? 0 = keine Erniedrigung; 1 = ein bisschen; 2 = Erniedrigt; 3 = stark erniedrigt; 4 = sehr stark erniedrigt.
- Erhöhte toxische Metaboliten 

Liegen in der Metabolomanalyse erhöhte toxische Metaboliten vor? 0 = Keine Erhöhung; 1 = ein bisschen; 2 = Erhöhung; 3 = starke Erhöhung; 4 = sehr starke Erhöhung.
- Ungleichgewicht der AhR-Agonisten 

Liegt in der Metabolomanalyse ein Ungleichgewicht der AhR-Agonisten vor? Dies kann auftreten bei erniedrigtem IPA, IAA, IAId, Indol oder ILA, erhöhtem Tryptamin oder Kynureninsäure, oder in geringerem Maße bei erniedrigtem Tryptamin oder Kynureninsäure. 0 = kein Ungleichgewicht; 1 = ein bisschen; 2 = Ungleichgewicht; 3 = starke Ungleichgewicht; 4 = sehr starke Ungleichgewicht.

# The estrobolome – the link between the gut microbiota and estrogen

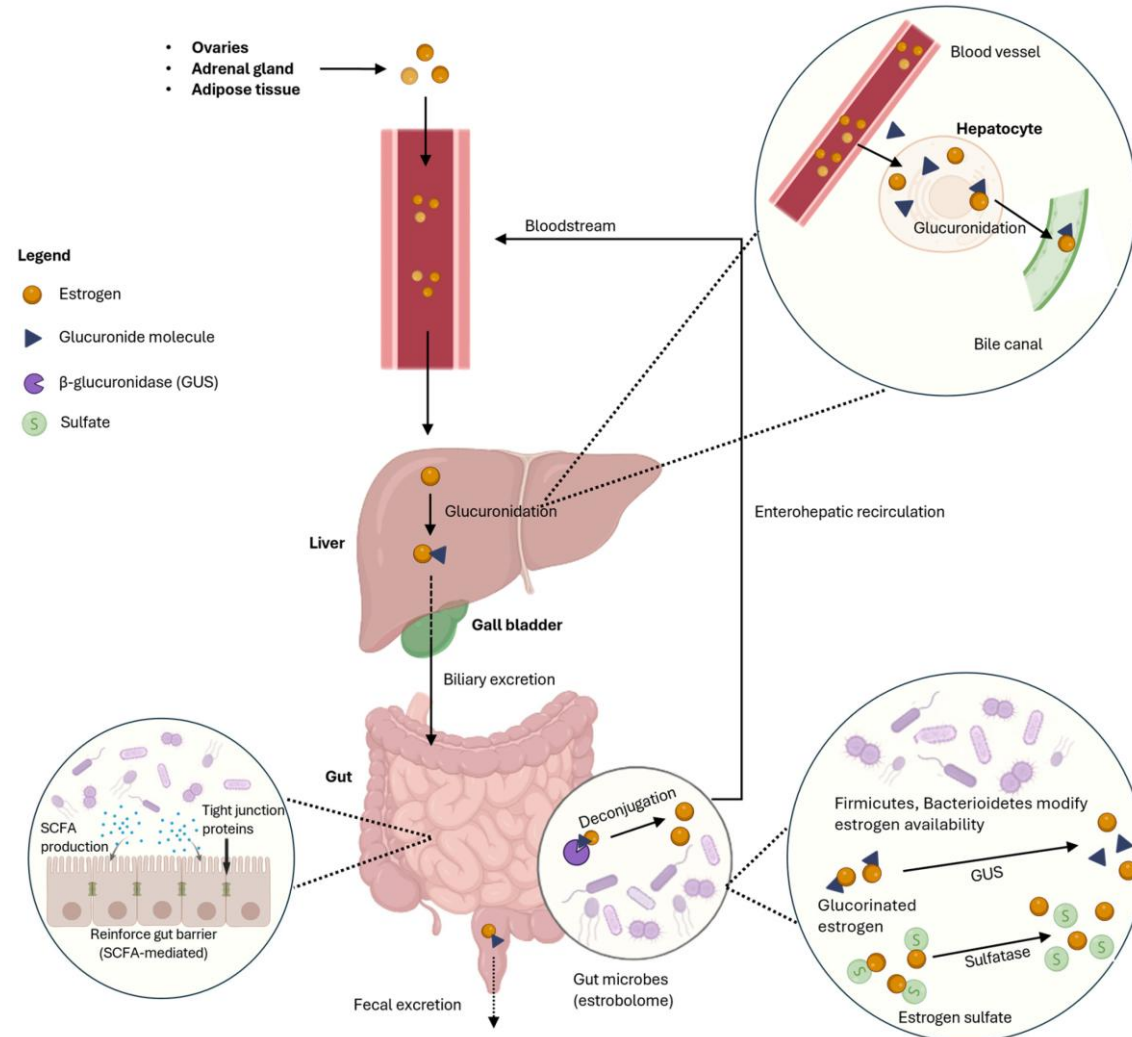
Liver → estrogens inactivated and excreted into the gut

Gut bacteria reactivate estrogens

- regulate if estrogen is eliminated or recycled
- recycling loop (enterohepatic circulation) is a major determinant of overall estrogen exposure

Active estrogens are reabsorbed into circulation and can bind to estrogen receptors in:

- Brain → mood, cognition
- Cardiovascular system → vascular function
- Metabolic tissues → insulin sensitivity
- Bone → inhibits bone resorption
- Vaginal epithelium → maintains tissue + microbiota

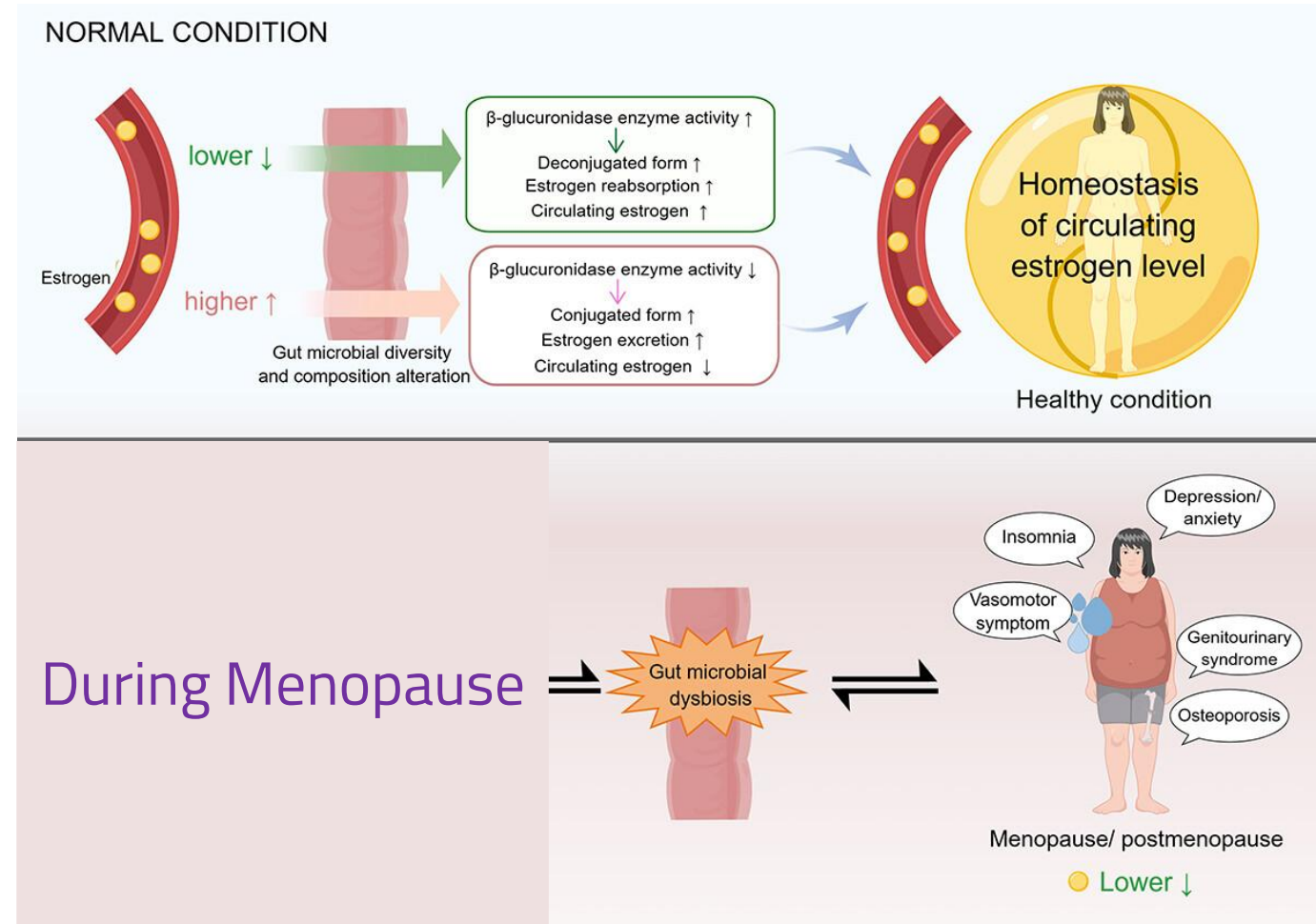


1. Lim et al., 2026 Nutrients <https://doi.org/10.3390/nu18071052>

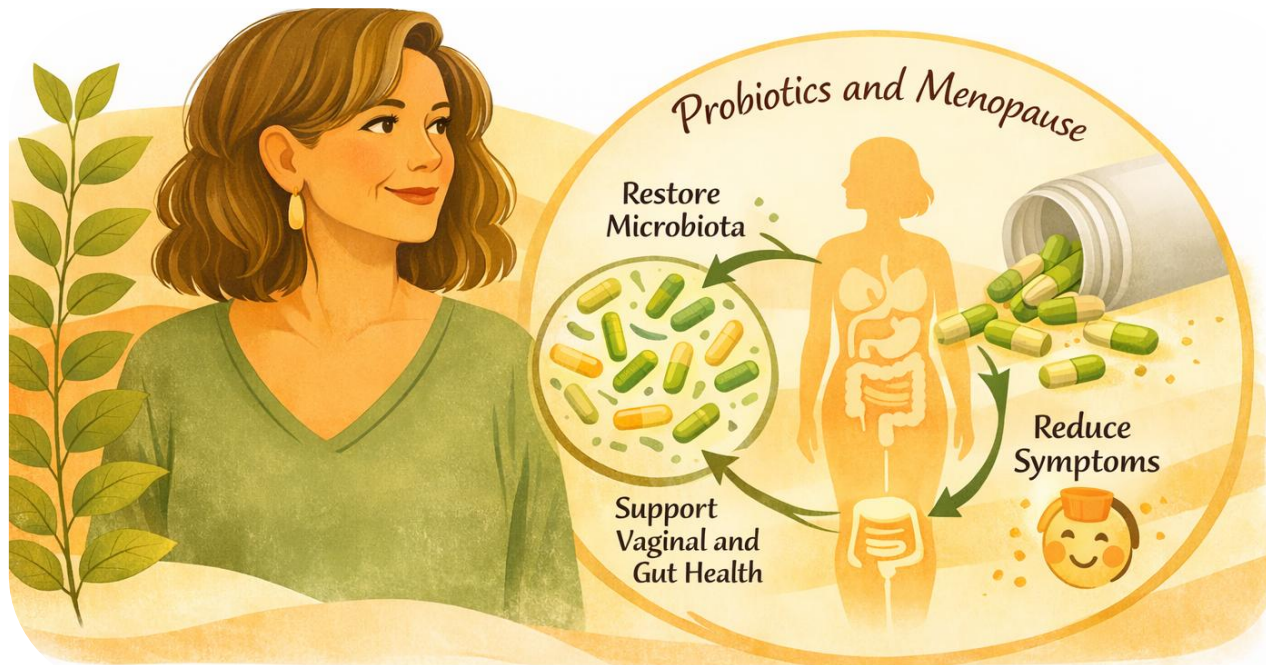
# The estrobolome and menopause symptoms

Gut microbiota (the estrobolome) contribute to menopausal symptoms

- Vasomotor symptoms
- Mood/sleep
- Metabolic dysfunction
- Bone health
- Vaginal health (Genitourinary Syndrome of Menopause)



1. Hu et al., 2024 Gut Microbes <https://doi.org/10.1080/19490976.2023.2236749>



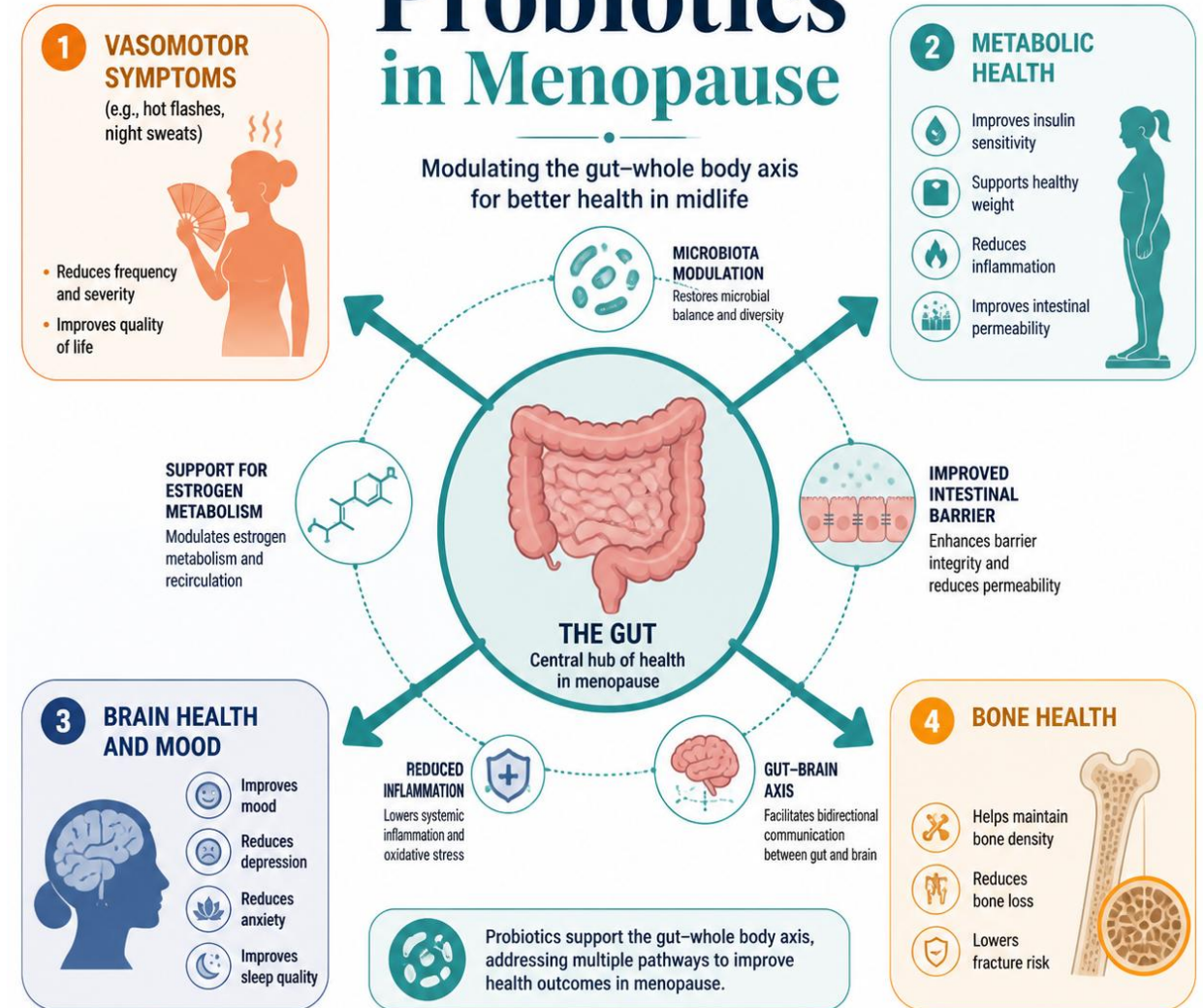
# Oral probiotics targeting the gut during menopause

# Probiotic Potential

Improve clinically relevant symptoms linked to menopause

- Vasomotor symptoms
- Metabolic Health
- Bone Health
- Brain Health
- Vaginal Health

## Probiotics in Menopause



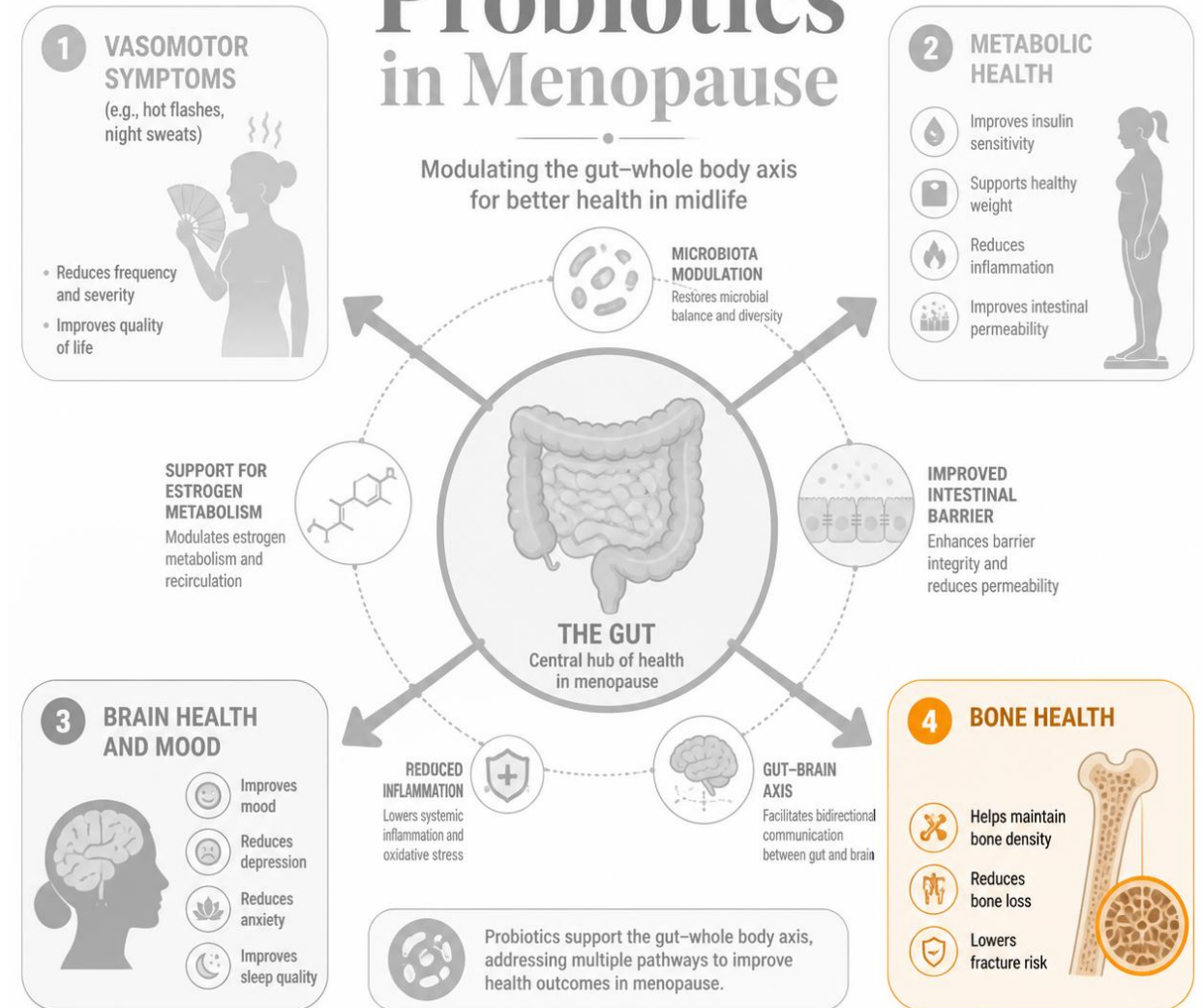
Evidence suggests probiotics may be a safe and effective adjunct strategy to support symptom relief and long-term health in menopausal women.



# Probiotic Potential

Improve clinically relevant symptoms linked to menopause

- Vasomotor symptoms
- Metabolic Health
- **Bone Health**
- Brain Health
- Vaginal Health

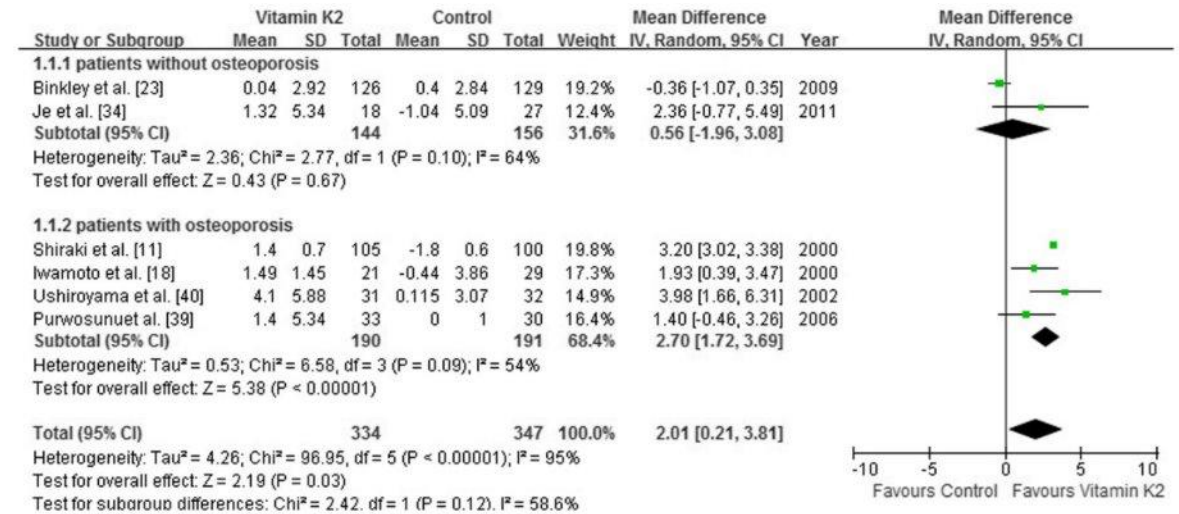


Evidence suggests probiotics may be a safe and effective adjunct strategy to support symptom relief and long-term health in menopausal women.

# Vitamin K2 booster

- This booster contains 4 strains:
  - Lactobacillus brevis* W63,
  - Bacillus coagulans* W64,
  - Propionibacterium freundenreichii* W200,
  - Bacillus subtilus* W201
- These strains are selected for their capacity to produce vitamin K2 in various subtypes (fig)<sup>1</sup>.
- Vitamin K2 produced by bacteria in the gut can be absorbed and contributes to vitamin K2 use by other commensals<sup>2,3</sup>.
- Evidence for therapeutic uses of vitamin K2:
  - Osteoporosis (meta-analysis of RCTs, fig)<sup>4</sup>
  - Arterial stiffness<sup>5</sup>
  - Glycemic control / T2DM<sup>6-8</sup>
  - Depression<sup>9</sup>
- Typical use: patients with osteoporosis or atrial stiffness combined with metabolic dysfunction

	MK4	MK5	MK6	MK7	MK8	MK9	MK9-4H	MK10
<i>B.subtilis</i> W201		0,1	0,4	105,9	1,9	0,2		
<i>P. freundenreichii</i> W200		0,2		0,02	0,3	20,1	1040	
<i>B. coagulans</i> W64		0,1	0,1	23,7	1,3	0,1		0,1
<i>L. brevis</i> W63				0,01	0,004	0,007		



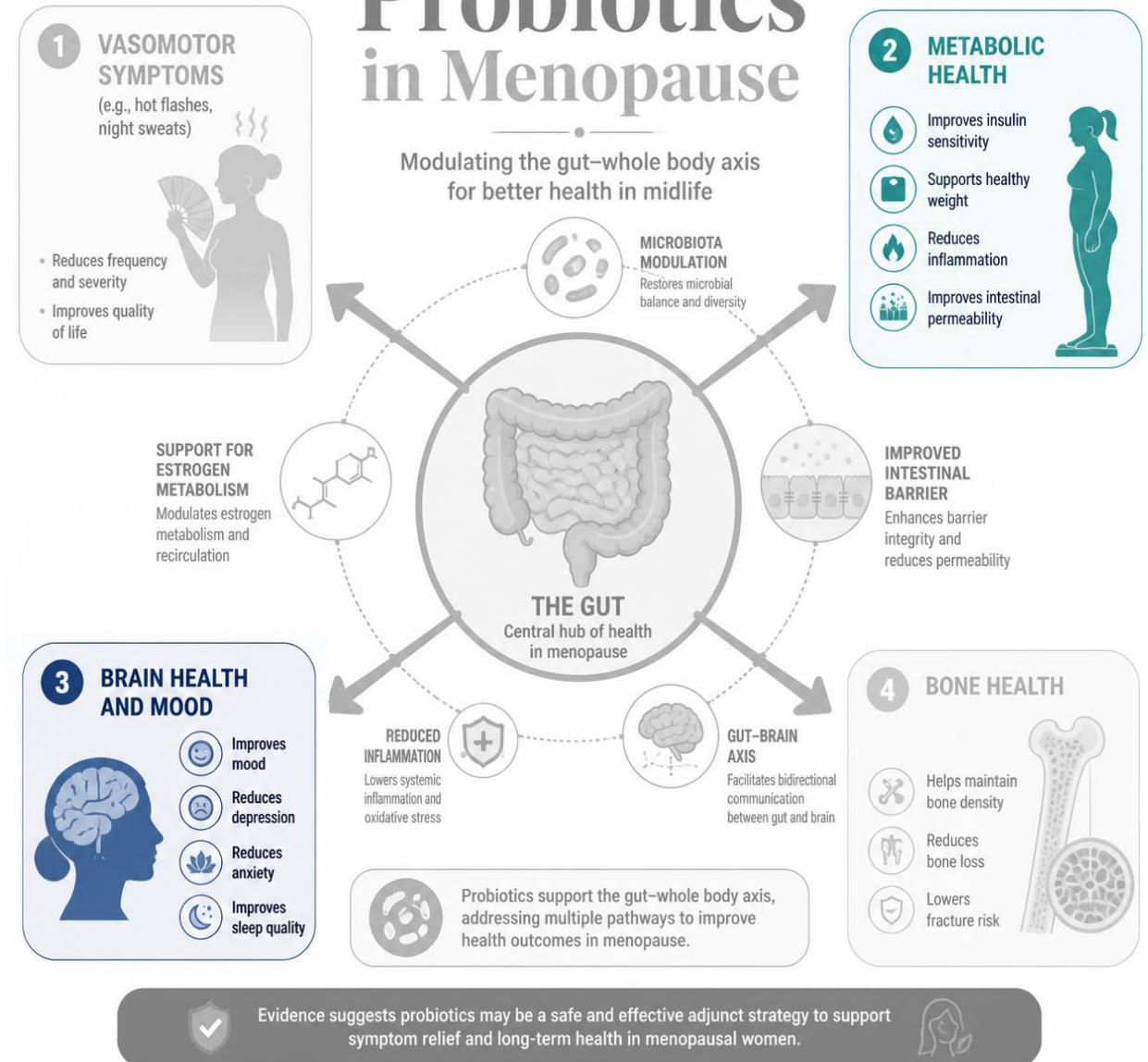
**Fig. 2** Forest plot of the medium-term follow-up of vertebral BMD changes, showing a significant improvement of vertebral BMD in osteoporosis subgroup analysis and overall effect for vitamin K2 over control group

- Proprietary data
- Walther, B. et al. *Adv Nutr* 4, 463–473 (2013)
- Halder, M. et al. *Int J Mol Sci* 20, (2019)
- Huang, Z.-B. et al. *Osteoporos Int* 26, 1175–1186 (2015)
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- Rahimi Sakak, F. et al. *European Journal of Nutrition* (2020)
- Karamzad, N. et al. *Diabetes Metab Syndr Obes* 13, 2239–2249 (2020)
- Aguayo-Ruiz, J. I. et al. *Diabetology & Metabolic Syndrome* 12, (2020)
- Tarkesh, F. et al. *BMC Womens Health* 22, 315 (2022)<sup>34</sup>

# Probiotic Potential

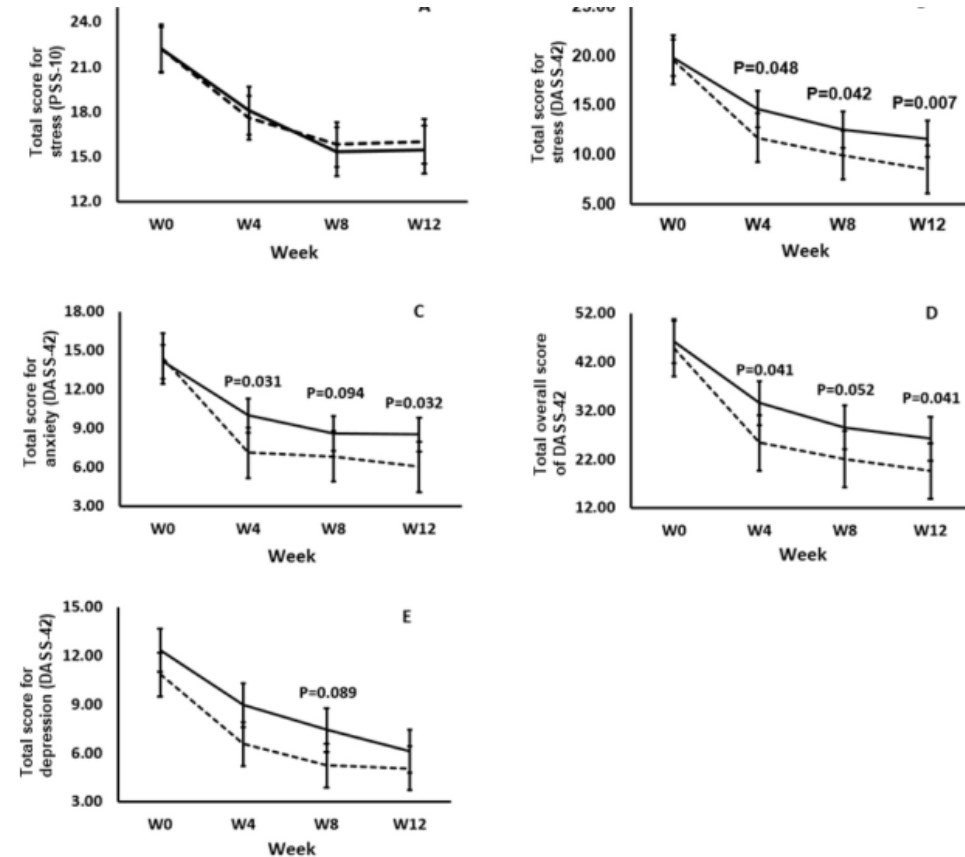
Improve clinically relevant symptoms linked to menopause

- Vasomotor symptoms
- **Metabolic Health**
- Bone Health
- **Brain Health**
- Vaginal Health



# *L. plantarum* P-8

- The *Lactiplantibacillus plantarum* P-8 is isolated from a traditional fermented dairy product from Mongolia.
- A well-designed RCT shows an effect on **depression, stress and anxiety**<sup>2</sup>, which is expected to be caused by changes in microbial production of neuro-active substances such as GABA<sup>3</sup>.
- In addition, there is evidence for:
  - IBS<sup>4</sup>
  - Anti-inflammatory effect<sup>4,2</sup>
  - Increasing sIgA excretion<sup>5</sup>
  - Reduction of bile acids<sup>5</sup>

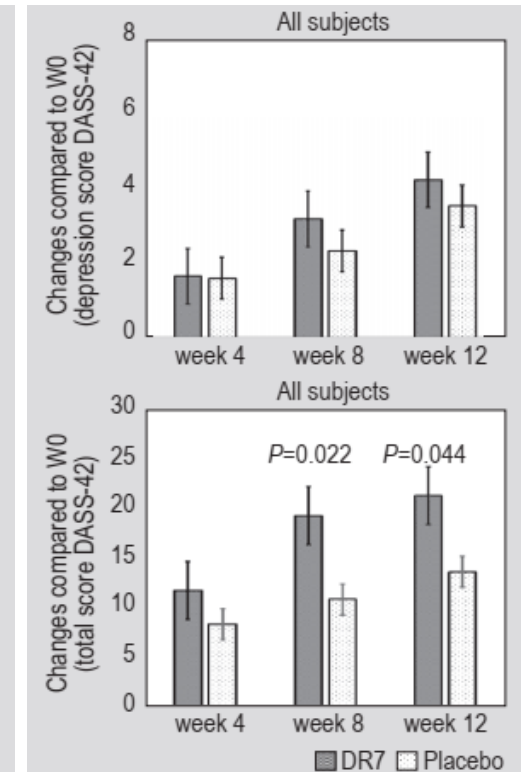
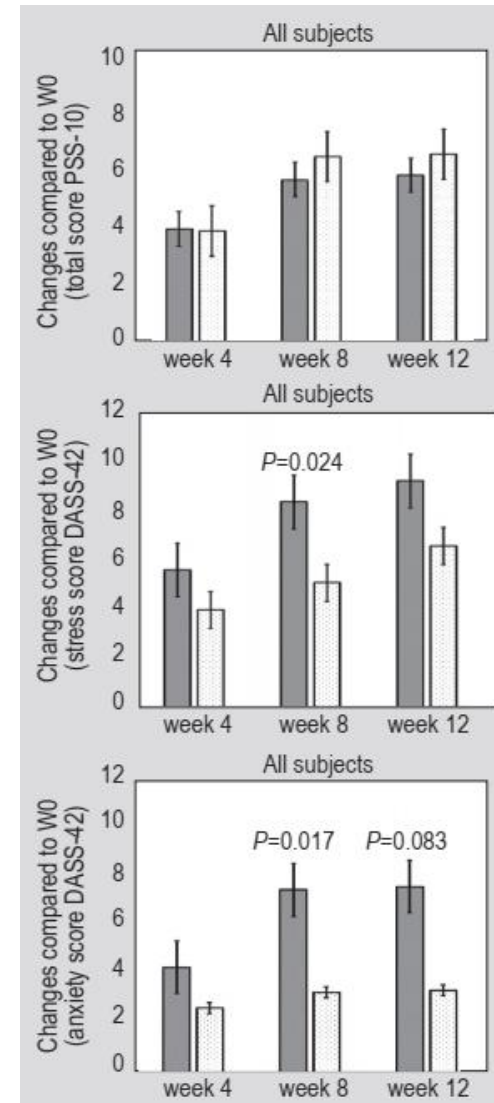


**Fig. 2.** Effects of a 12-week administration of probiotic *L. plantarum* P8 (---) or placebo (—) on the total scores of (A) stress based on the PSS-10 questionnaire (W: P < 0.001, T: P = 0.788, TxW: P = 0.820), (B) stress (W: P < 0.001, T: P = 0.030, TxW: P = 0.293), (C) anxiety (W: P < 0.001, T: P = 0.077, TxW: P = 0.170), (D) total scores (W: P < 0.001, T: P = 0.054, TxW: P = 0.427), and (E) depression (W: P < 0.001, T: P = 0.163, TxW: P = 0.787) based on the DASS-42 questionnaire. P-values indicated difference between treatment groups at individual time points. Results are expressed as mean; error bars (SEM); n = 103. Repeated measures ANOVA provided statistical significance on W: effect of weeks; T: effect of treatment groups P8 and placebo; TxW: interaction between weeks and treatment.

1. Bao, Y. et al. *Ann Microbiol* 62, 1311–1320 (2012)
2. Lew, L.-C. et al. *Clin Nutr* 38, 2053–2064 (2019)
3. Ma, T. et al. *Neurobiol Stress* 14, 100294 (2021)
4. Xu, H. et al. *Eur J Nutr* (2020)
5. Wang, L. et al. *Nutrition* 30, 776-783.e1 (2014)

# *L. plantarum* DR-7

- The *Lactiplantibacillus plantarum* DR-7 is isolated from fresh cow's milk in Malaysia<sup>1</sup>.
- A well-designed RCT shows a convincing effect on **stress and anxiety**<sup>2</sup>. Mechanistic evidence suggests that this is induced **via pathways of serotonin** and oxidative ageing<sup>3</sup>.
- In addition, based on metabolites analysis the and integration of Biovis metabolites measurements the strain can increase serotonin
- There is also evidence for:
  - Upper respiratory tract infections<sup>4,5</sup>
  - Anti-inflammatory effects<sup>2-4</sup>
  - **Increases AMPK activity**<sup>1,6-8</sup>



1. Lew, L.-C. et al. Korean J Food Sci Anim Resour 38, 350–361 (2018)
2. Chong, H.-X. et al. Benef Microbes 10, 355–373 (2019)
3. Zaydi, A. I. et al. Benef Microbes 11, 753–766 (2020)
4. Chong, H.-X. et al. J Dairy Sci 102, 4783–4797 (2019)
5. Altadill, T. et al. Microorganisms 9, 528 (2021)
6. Yap, P.-G. et al. Appl Biochem Biotechnol 191, 226–244 (2020)
7. Lew, L.-C. et al. Int J Mol Sci 21, E5872 (2020)
8. Lew, L.-C. et al. Korean J Food Sci Anim Resour 38, 350–361 (2018)

# PHGG

- This fiber is derived from the guar bean (*Cyamopsis tetragonoloba*) and partially hydrolyzed enzymatically to make it less viscous<sup>1</sup>.
- This fiber is extremely well-studied, hundreds of clinical studies have been conducted since 1970's.
- Different from most other fibers, PHGG has found to be efficacious at daily doses of ~5g.
- Important therapeutic uses:
  - **Insulin resistance (dozens of studies, fig<sup>2,3,11</sup>)**
  - IBS, abdominal pain, bloating<sup>1,4,5</sup>
  - Constipation<sup>6,7</sup>
  - Diarrhea<sup>8,9</sup>
  - **Depression and anxiety<sup>1</sup>**
  - SIBO<sup>10</sup>
- Typical use: IBS and symptoms, SIBO, diabetes

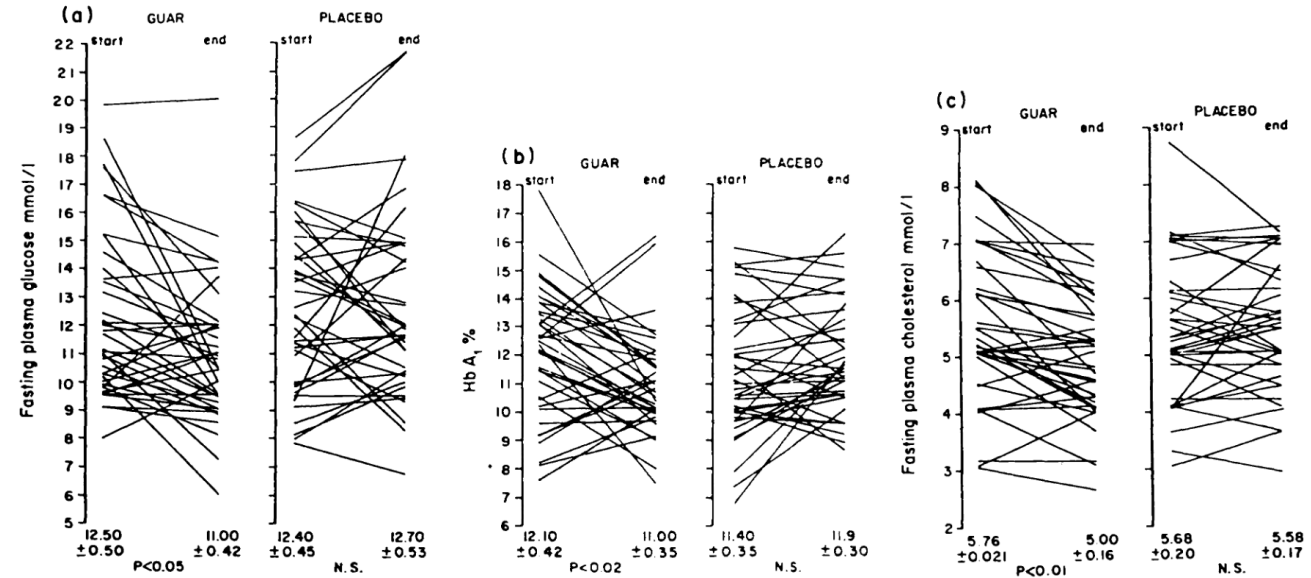


FIGURE 1. Individual changes in fasting plasma glucose (a), glycosylated hemoglobin (b), and cholesterol (c) in all 39 patients.

TABLE 3. Clinical data on patients at the beginning and end of each treatment period.

Clinical variables	Guar period			Placebo period		
	B	E	Significance	B	E	Significance
FPG (mmol/L)	12.50 ± 0.50	11.00 ± 0.42	<i>P</i> < 0.05	12.4 ± 0.45	12.7 ± 0.53	NS
HbA1c (%)	12.10 ± 0.42	11.00 ± 0.35	<i>P</i> < 0.02	11.40 ± 0.35	11.90 ± 0.30	NS

1. Parisi, G. et al. *Dig Dis Sci* 50, 1107–1112 (2005)
2. Peterson, D. B. et al. *Diabetic Medicine* 4, 111–115 (1987)
3. Dall'Alba, V. et al. *Br J Nutr* 110, 1601–1610 (2013)
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5. Niv, E. et al. *Nutr Metab (Lond)* 13, 10 (2016)
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7. Polymeros, D. et al. *Dig Dis Sci* 59, 2207–2214 (2014)
8. Homann, H.-H. et al. *JPEN J Parenter Enteral Nutr* 18, 486–490 (1994)
9. Alam, N. H. et al. *J Pedi Gas and Nutrition* 31, 503–507 (2000)
10. Furnari, M. et al. *Aliment Pharmacol Ther* 32, 1000–1006 (2010)
11. Laajam, M. A. et al. *Ann Saudi Med* 10, 525–530 (1990)

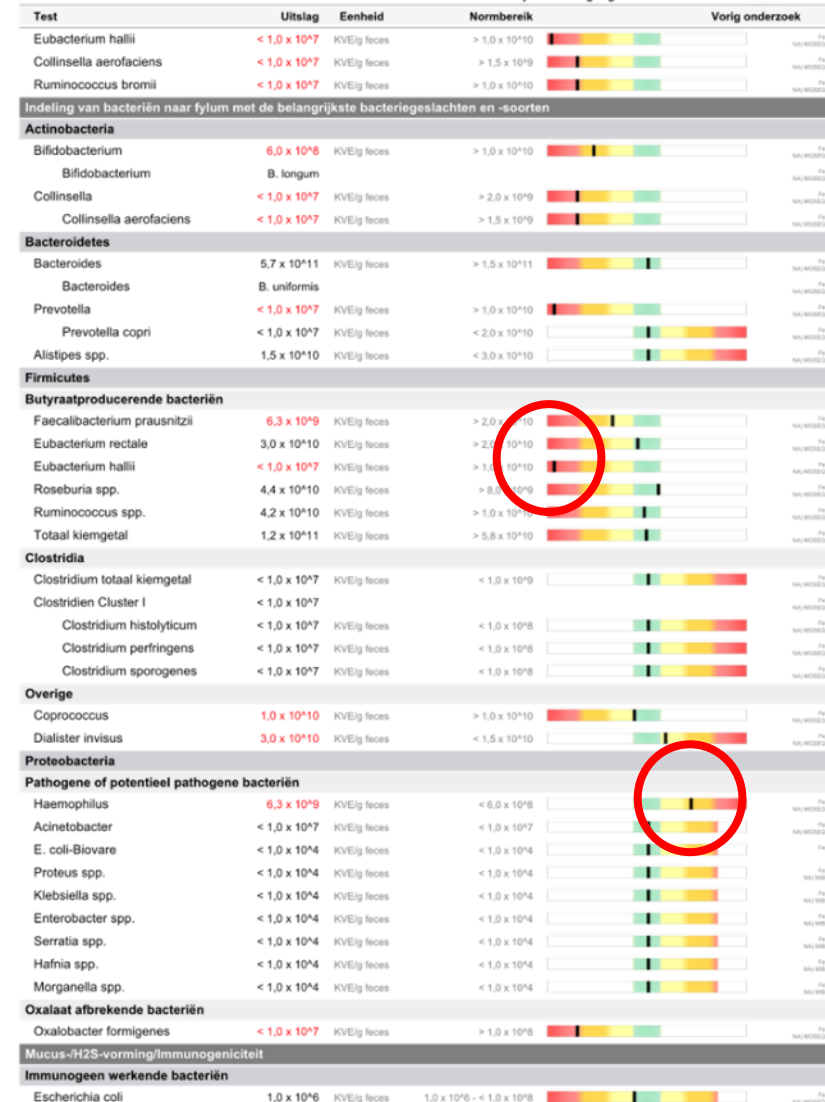
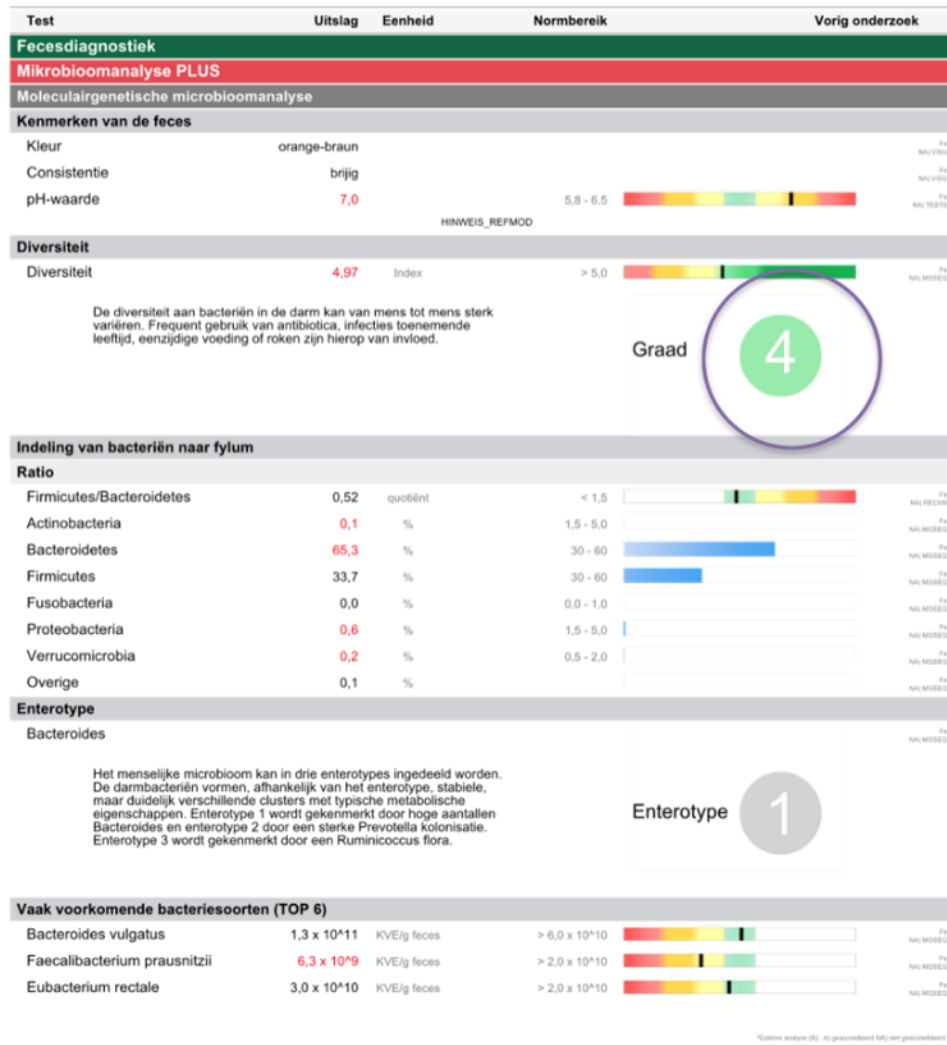
# Case 2 Metabolic syndrome + depression

- Lady 60 y/o
- Obese (BMI 36)
- Fasting glucose 8.2, HbA1c 45
- Hypertension, kidney stones, UTIs, fatigue
- Diverticulitis
- Hospitalized for dehydration
- Sad mood/anxiety/depression
- Medication: Citalopram 10mg, Enalapril 5mg
- Answered positive on every GI complaints question of the Microbiome Center questionnaire:

- Abdominal pain, changing frequency, changing BSS type, bloating, belching, pain after meal, fatty stools, food intolerances, etc.

























# Case report 2 Metabolic syndrome + depression



\*Binnen analyse (Fi, Ki) gecombineerd (Ki) niet gecombineerd

# Case 2 Metabolic syndrome + depression

Test	Uitslag	Eenheid	Normbereik	Vorig onderzoek
Enterococcus spp.	1,0 x 10 <sup>8</sup>	KVE/g feces	1,0 x 10 <sup>6</sup> - < 1,0 x 10 <sup>8</sup>	 Fe NA/MS/EG
Lactobacillus spp.	4,0 x 10 <sup>5</sup>	KVE/g feces	1,0 x 10 <sup>5</sup> - < 1,0 x 10 <sup>8</sup>	 Fe NA/MS/EG
<b>Mucine vorming/slijmvliesbarrière</b>				
Akkermansia muciniphila	1,7 x 10 <sup>9</sup>	KVE/g feces	> 5,0 x 10 <sup>9</sup>	 Fe NA/MS/EG
Faecalibacterium prausnitzii	6,3 x 10 <sup>9</sup>	KVE/g feces	> 2,0 x 10 <sup>10</sup>	 Fe NA/MS/EG
<b>H2S-vorming</b>				
sulfaatreducerende bacteriën	< 1,0 x 10 <sup>7</sup>	KVE/g feces	< 1,0 x 10 <sup>8</sup>	 Fe NA/MS/EG
Desulfovibrio piger	< 1,0 x 10 <sup>7</sup>	KVE/g feces	< 1,0 x 10 <sup>8</sup>	 Fe NA/MS/EG
Desulfomonas pigra	< 1,0 x 10 <sup>7</sup>	KVE/g feces	< 1,0 x 10 <sup>8</sup>	 Fe NA/MS/EG
Bilophila wadsworthii	< 1,0 x 10 <sup>7</sup>	KVE/g feces	< 1,0 x 10 <sup>8</sup>	 Fe NA/MS/EG
<b>Gisten/schimmels</b>				
Candida albicans	< 1,0 x 10 <sup>3</sup>	KVE/g feces	< 1,0 x 10 <sup>3</sup>	 Fe NA/MB
Candida species	< 1,0 x 10 <sup>3</sup>	KVE/g feces	< 1,0 x 10 <sup>3</sup>	 Fe NA/MB
Geotrichum candidum	< 1,0 x 10 <sup>3</sup>	KVE/g feces	< 1,0 x 10 <sup>3</sup>	 Fe NA/MB
Schimmels	negatief			Fe NA/MB
<b>Aanvullende parameters</b>				
<b>Vertering</b>				
Vetgehalte	5,90	g/100g	< 3,5	 Fe NA/PHOT
Stikstofgehalte	0,50	g/100g	< 1,0	 Fe NA/PHOT
Suikergehalte	3,80	g/100g	< 2,5	 Fe NA/PHOT
Watergehalte	78,20	g/100g	75 - 85	 Fe NA/PHOT
<b>Maldigestie</b>				
Pancreas elastase in feces	293,17	µg/g	> 200	 Fe AJ/ELISA
Galzuren in feces	negatief		negatief	Fe NA/PETKO
<b>Malabsorptie</b>				
Calprotectine	177,03	mg/l	< 50	 Fe AJ/ELISA
Alpha-1-antitripsine	26,1	mg/dl	< 27,5	 Fe AJ/ELISA
<b>Extra parameter(s)</b>				
Secretoir Immunoglobuline A	6431,2	µg/ml	510 - 2040	 Fe AJ/ELISA
<b>Extra parameter(s)</b>				
Zonuline	52,00	ng/ml	< 55	 Fe AJ/ELISA
<b>Speciale gastro-enterologische diagnostiek</b>				
<b>Gluten-sensitieve enteropathie / coeliakie</b>				
Anti-gliadine antilichamen in feces	119,67	U/l	< 100	 Fe AJ/ELISA
Anti-transglutaminase antilichamen in feces	304,43	U/l	< 100	 Fe AJ/ELISA

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# Case 2 Metabolic syndrome + depression



## Approach:

- Gluten-free diet
- MyOwnBlend
- Additional examination:
  - IgA tTGA: negative
  - Colonoscopy: no abnormalities

## Result:

- Weight slowly decreased
- Fasting glucose 5.6, HbA1c 4.1
- GI complaint almost completely disappeared
- Mood normalized

Test	Uitslag	Eenheid	Nombereik	Vorig onderzoek
<b>Fecesdiagnostiek</b>				
<b>Extra parameter(s)</b>				
Calprotectine	58,77	mg/l	< 50	119,92 <sub>Fe</sub> ELISA
Zonuline	59,26	ng/ml	< 55	67,12 <sub>Fe</sub> ELISA
<b>Speciale gastro-enterologische diagnostiek</b>				
<b>Gluten-sensitieve enteropathie / coeliakie</b>				
Anti-gliadine antilichamen in feces	43,52	U/l	< 100	119,12 <sub>Fe</sub> ELISA
Anti-transglutaminase antilichamen in feces	<50	U/l	< 100	290,12 <sub>Fe</sub> ELISA

# Conclusions

## Menopause is not only a hormonal transition, but a multi-system biological shift affecting metabolic, urogenital, and immune health

Declining estrogen levels drive significant changes in vaginal and gut microbiota

### Vaginal microbiota: menopause leads to changes

- In reproductive age, estrogen supports a *Lactobacillus*-dominated environment
- Menopause leads to ↓ glycogen, which leads to ↓ *Lactobacillus*, which leads to ↑ pH
- Result: vaginal dysbiosis, contributing to complaints and infection risk

### Gut microbiota: estrobolome affects systemic physiology

- Healthy gut microbiota regulates estrogen recycling: keeping systemic levels high
- Changes in microbiota can alter systemic estrogen exposure
- Dysbiosis leads to metabolic dysfunction, inflammation & hormonal imbalance

### How to treat these changes?

- Microbiome Center's vaginal suppositories with *L. crispatus* support healthy vaginal microbiota and improves menopausal vaginal complaint
- Personalized microbiome treatment (MyOwnBlend) supports with:
  - Patient-specific health problems (e.g. mood, metabolic dysfunction, bone health, cardiovascular health, etc.)
  - Estrobolome, via deconjugation (recycling) of liver-excreted estrogen



# In case of any questions contact

[simone@microbiome-center.nl](mailto:simone@microbiome-center.nl)

**+316 14618094**



**Menopause: systemic changes with direct role of gut  
and vaginal microbiomes**

**Thank you for your attention**