

Antagonizing *Klebsiella pneumoniae* using prebiotics and postbiotics

under simulated gut conditions

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Abstract

In 2019 alone, approximately 5 million deaths were associated with antibiotic-resistant bacteria, excluding an estimated 1.27 million direct deaths, with projections rising to nearly 9 million annual deaths by 2050. As rates of prolonged hospitalization increase, patient exposure to pathogens such as *Klebsiella pneumoniae* (KP) rises through contact with medical devices of ventilators and catheters. Individuals with metabolic disorders or underlying gastrointestinal dysfunction are especially susceptible to KP colonization and subsequent intestinal translocation due to impaired barrier integrity and reduced microbial diversity, however emerging evidence indicates that KP can translocate across healthy gastrointestinal epithelium to facilitate secondary infections. Additionally, WHO's 2024 bacterial priority pathogen review ranked two different antibiotic-resistant strains of *Klebsiella pneumoniae* within the top 5 highest concerns to public health. This study aims to evaluate microbiome-targeted strategies to suppress KP colonization while preserving beneficial gut flora. Using an in-vitro simulated gut fermentation model, stool inoculate from healthy adults will be antagonized with 3% w/v KP and treated with a combination of probiotics, prebiotics, and postbiotics. Microbial composition will be assessed via 16S rRNA sequencing alongside metabolic shifts using NMR spectroscopy. We hypothesize that KP introduction will induce dysbiosis, while postbiotic and combination treatments will most effectively suppress KP proliferation and restore metabolic homeostasis. These findings may guide development of scalable synbiotic or postbiotic therapeutics to mitigate multidrug-resistant gut colonization in high-risk populations.

Background

Current treatments to bacterial infections rely predominantly on antibiotic administration, while effective in reducing pathogens, these therapies can produce unintended consequences on the body. Broad-spectrum antibiotics used to treat bacterial infections such as those attenuated by *Klebsiella pneumoniae*, can induce microbial dysbiosis within the gut through depleting commensal bacterium (Lin et al., 2017). Additional impacts can include the increase in the permeability of epithelial barrier causing pathogens to translocate to other organs and incite secondary infections or other comorbidities (Wang et al., 2025). Consequently, there is increasing interest in alternative therapeutic approaches such as using Lactic Acid Bacteria to antagonize pathogenic species through the production of organic acids and other antimicrobial metabolites, inhibition of mucosal adherence and biofilm formation, and support of intestinal barrier recovery (Do et al., 2025). More specifically, *Lactobacillus plantarum* and *Lactobacillus rhamnosus* have been shown to inhibit the growth of multi-drug resistant *Klebsiella pneumoniae* under fermentative conditions (Nagpal et al., 2018). *L. rhamnosus* has also been shown to inhibit genes of *K. pneumoniae* that promote biofilm production (Zhang et al., 2024).

Methods

Determine inoculum concentration of *K. pneumoniae*

Collect Stool samples from participants

Stool Inoculation with *K. pneumoniae* and Treatments

Microbiome Sequencing and *K. pneumoniae* quantification using qPCR

Bioinformatics Analysis

Experimental Groups:
Inulin (INU),
Fructooligosaccharide (FOS),
Lactobacillus rhamnosus GG (LGG),
Lactobacillus plantarum (LP),
Heat-Inactivated LGG,
INU + LP,
FOS + LP,
INU + LGG,
FOS + LGG

Within the generalized process above, we are currently on the third step being anaerobic fecal fermentation where this study will include 10 participants aged 18-35 years old. This study is projected to be concluded by June 2026. The following figures all represent the results from determining the concentration and inoculum amount of *K. pneumoniae*.

Results (optimization pertaining to Step 1)

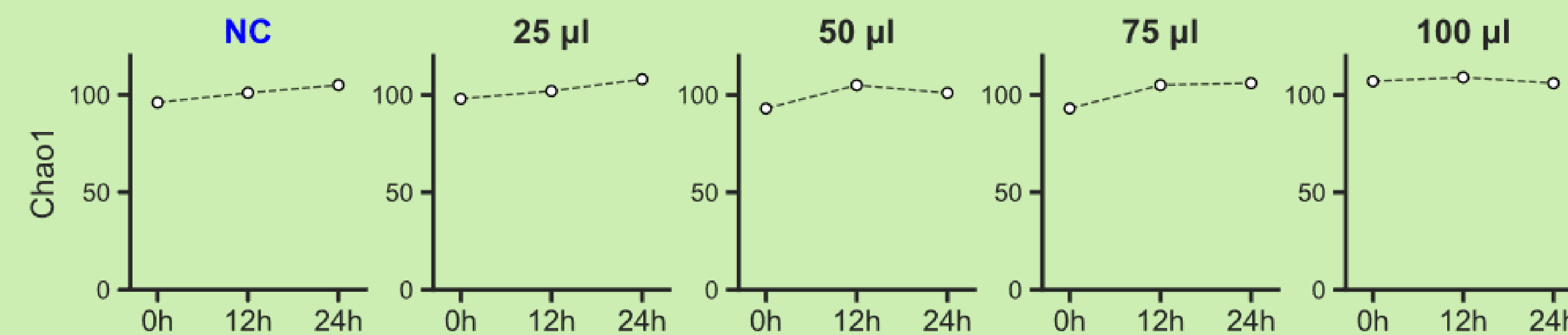


Figure 1. Changes in microbial diversity during fermentation at different volumes of *Klebsiella* at 4.75×10^7 CFU / mL

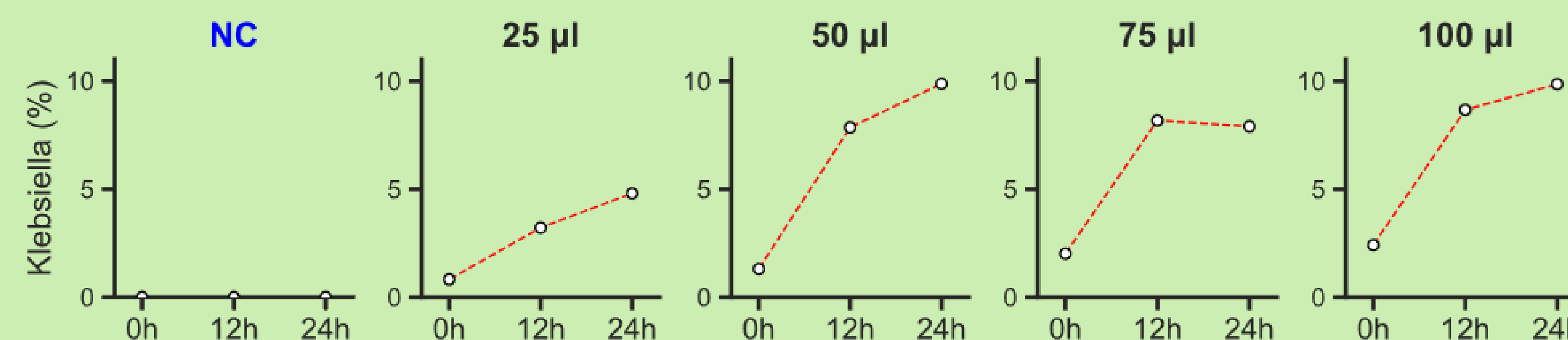


Figure 2. Changes in relative abundance of *Klebsiella* during fermentation at initial volumes of 4.75×10^7 CFU / mL

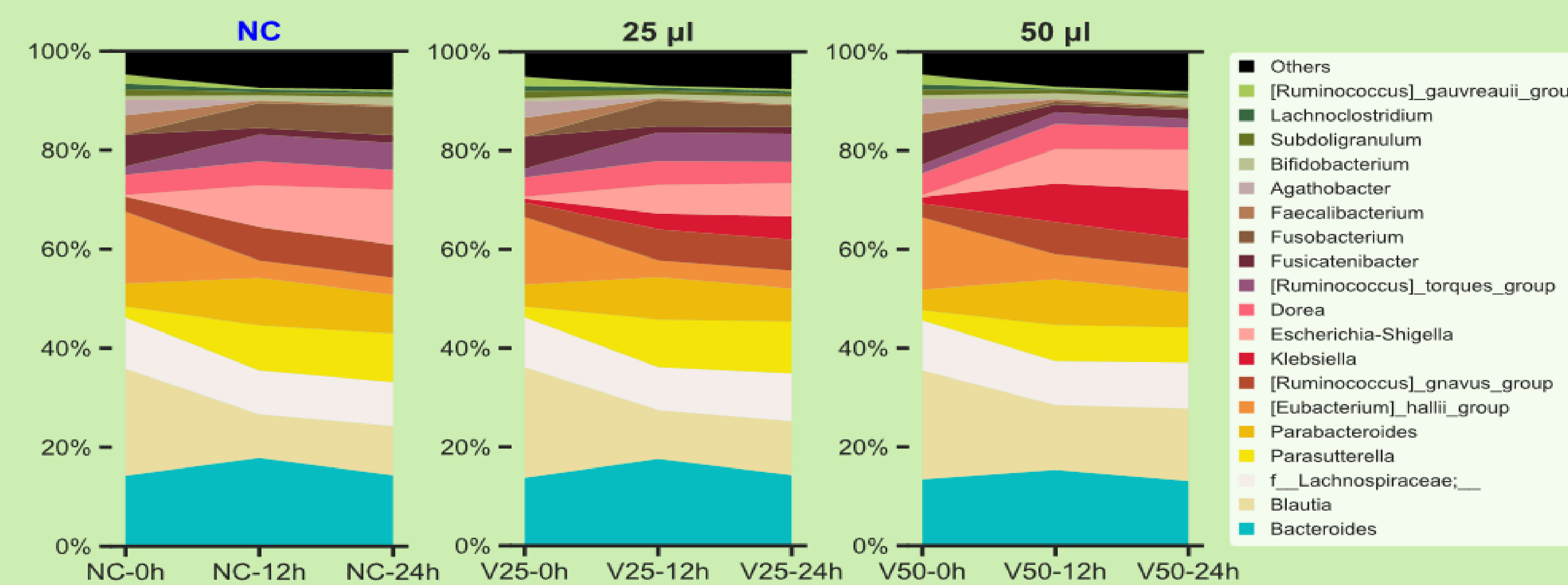


Figure 3. Overall shifts in microbial composition at different volumes of *Klebsiella* at 4.75×10^7 CFU / mL

Sequence ID: Query_4912923 Length: 489 Number of Matches: 1

Score	Expect	Identities	Gaps	Strand
904 bits(489)	0.0	489/489(100%)	0/489(0%)	Plus/Minus
Query 3785566	TTACTTTTTCGGGGTGGCGTGTGGACGAAGAACTGCGGGGATGGTCAACCCA	3785625		
Sbjct 489	TTACTTTTTCGGGGTGGCGTGTGGACGAAGAACTGCGGGGATGGTCAACCCA	430		
Query 3785626	ACGATCCTGGCGGCTGGCGGATAGCGGGATGAGCGGGTAATAAATGCCGTTGTACTT	3785685		
Sbjct 429	ACGATCCTGGCGGCTGGCGGATAGCGGGATGAGCGGGTAATAAATGCCGTTGTACTT	370		
Query 3785686	CTTGTGGGCTGGCCACCAACAGACGAACTTCTGCTGGGTATTGAGAAAGGT	3785745		
Sbjct 369	CTTGTGGGCTGGCCACCAACAGACGAACTTCTGCTGGGTATTGAGAAAGGT	310		
Query 3785746	GTGGCAGATGCCGGTACAGCGGGAAAAACCCAGCTGTGCGGGGCTCCAGTTCAGAG	3785805		
Sbjct 309	GTGGCAGATGCCGGTACAGCGGGAAAAACCCAGCTGTGCGGGGCTCCAGTTCAGAG	250		
Query 3785886	ATAGCGTTTATCACACTTCCGGATAGCCCTCCAGACGTAGATGAATCTTCTCATC	3785865		
Sbjct 249	ATAGCGTTTATCACACTTCCGGATAGCCCTCCAGACGTAGATGAATCTTCTCATC	190		
Query 3785866	GCTCTCCGCTGTGGATAGAGGTGGCCGCCCGGGGGGCGACCCCTCTGGTGGATCCC	3785925		
Sbjct 189	GCTCTCCGCTGTGGATAGAGGTGGCCGCCCGGGGGGCGACCCCTCTGGTGGATCCC	130		
Query 3785926	CAGCCGGTTGAGACGTAACCTGCCCGGCGGCGCCGATGAAAAACGCTCCGGGCT	3785985		
Sbjct 129	CAGCCGGTTGAGACGTAACCTGCCCGGCGGCGCCGATGAAAAACGCTCCGGGCT	70		
Query 3785986	GTGGGTAAGTAGCATGCTGGGCGCTCCAGTTCCGGCGAGTGGCGAATGCAATCAGG	3786045		
Sbjct 69	GTGGGTAAGTAGCATGCTGGGCGCTCCAGTTCCGGCGAGTGGCGAATGCAATCAGG	10		
Query 3786046	TCGTTTCAT	3786054		
Sbjct 9	TCGTTTCAT	1		

Figure 4. BLAST analysis of *K. pneumoniae* subsp. *Pneumoniae* (ATCC 43816 [NCBI accession: CP064352.1]) using the following gene and primers during qPCR: The *K. pneumoniae* khe gene (NC_016845.1: 309,578–310,066; locus tag KPNS_02720; 489 bp) was used as the target.

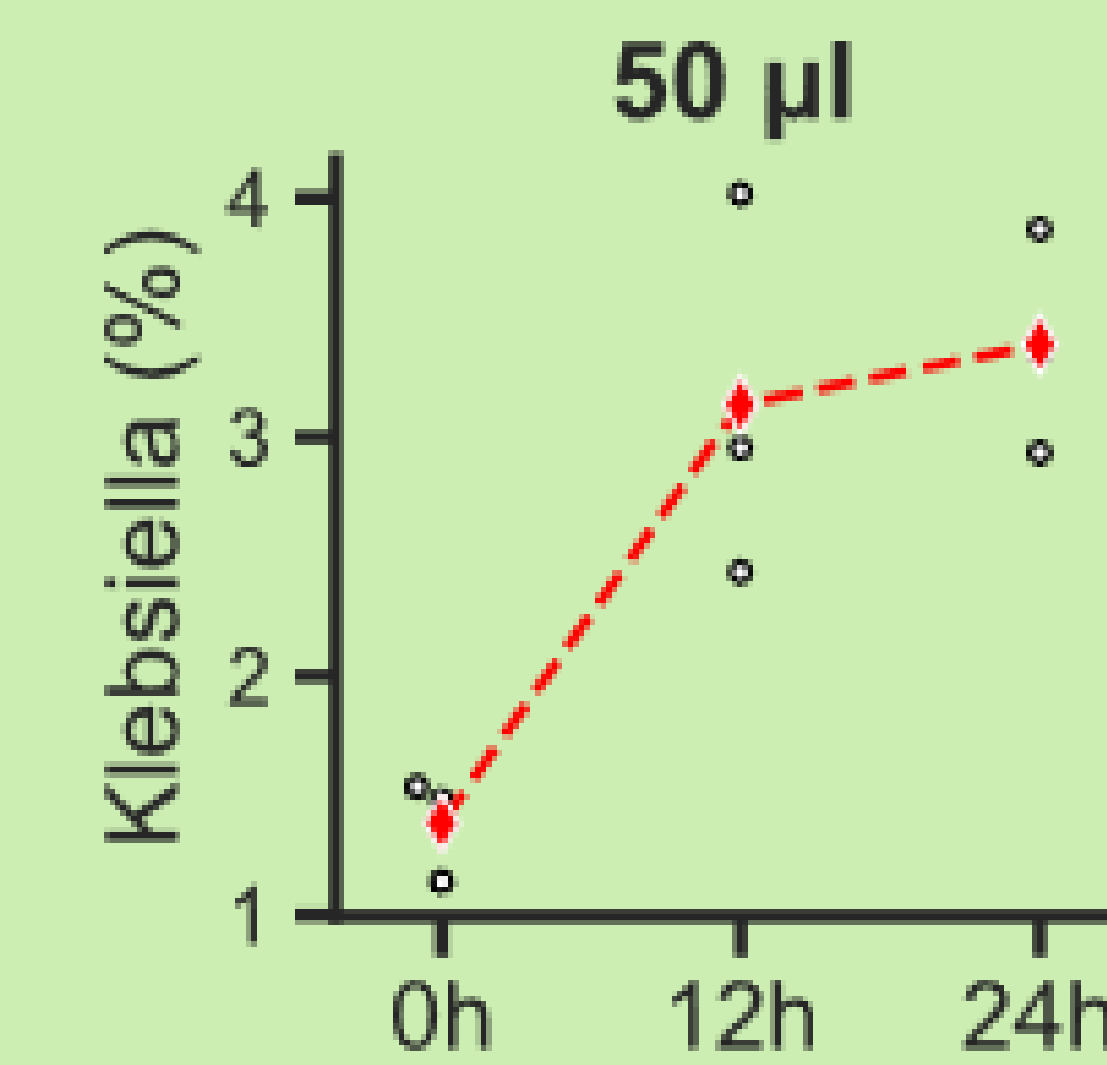


Figure 5. Relative abundance calculation of $Kpn = 2^{-(Ct_{estimated\ Kpn\ 16S} - Ct_{community\ 16S})}$

Conclusions

During the fermentation of *Klebsiella pneumoniae* with healthy stool samples, there exhibited a stable bacterial diversity independent of *K. pneumoniae* concentrations. However, *K. pneumoniae* did proliferate overtime but larger doses did not show to lead to a more exponential growth pattern. From this we conclude the concentration of *K. pneumoniae* may not directly create a dysbiotic microbiome under these circumstances. For the continuation of the experiment, we will be using an inoculation of 50 uL *K. pneumoniae* at 4.75×10^7 CFU / mL. The experimental group combining *Lactobacillus rhamnosus* GG (LGG) and Inulin is expected to exhibit the greatest proliferation of beneficial bacterial species alongside inhibiting *K. pneumoniae* growth. Amongst the monocultures alone, Heat-Inactivated LGG is expected to have the largest beneficial impact. However, the projection of the order of ranking the experimental groups based on the measurements of microflora diversity, is difficult to predict due to a lack of research surrounding any connection between Inulin and FOS with inhibiting growth of KP.

Acknowledgements

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References

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