

7. Nakayama T, Oishi K. Influence of coffee (*Coffea arabica*) and galacto-oligosaccharide consumption on intestinal microbiota and the host responses. *FEMS Microbiol Lett* 2013; **343**: 161–8.
8. Cowan TE, Palmnäs MS, Yang J, *et al.* Chronic coffee consumption in the diet-induced obese rat: impact on gut

microbiota and serum metabolomics. *J Nutr Biochem* 2014; **25**: 489–95.

9. Lee HC, Jenner AM, Lova CS, Lee YK. Effect of tea phenolics and their aromatic fecal bacterial metabolites on intestinal microbiota. *Res Microbiol* 2006; **157**: 876–84.

Letter: gut microbiota modulation contributes to coffee's benefits for non-alcoholic fatty liver disease – authors' reply

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SIRS, We thank Dr Shen for the interest in our review and detailed work-up of its content.^{1, 2} We appreciate the comments and want to address briefly the main hypothesis raised. Dr Shen argues that one of the potential mechanisms by which coffee consumption may reduce the risk of non-alcoholic fatty liver disease (NAFLD) is through beneficial modifications of the bacterial community resident in the lower gastrointestinal tract.

We entirely agree with Dr Shen's intriguing hypothesis, which is further supported by the findings of Gniechwitz *et al.*,³ who demonstrated that arabinogalactans and galactomannans from coffee beverages determined an increase of about 60% of species belonging to the *Bacteroides* group. Recently, a shift in distal gut microbiota towards a lower percentage of *Bacteroides* in NAFLD patients has been observed, with a decrease in the relative abundance of *Bacteroides* as the severity of NAFLD

increased.⁴ The question remains as to whether changes in the intestinal microbial community are one of the environmental causes of NAFLD or if they are a consequence of fatty liver infiltration, specifically of the unbalanced diet that often accompanies the development of hepatic steatosis.

In the future, larger studies on the potential role of gut microbiota in human NAFLD should take all of the possible confounding variables into account, including coffee intake. If an enterotype is ultimately shown to be causally related to NAFLD, then targeted dietary interventions (including increased coffee consumption) may allow the modulation of individuals' enterotypes to improve their liver health.⁵

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REFERENCES

1. Shen L. Letter: gut microbiota modulation contributes to coffee's benefits for non-alcoholic fatty liver disease. *Aliment Pharmacol Ther* 2014; **39**: 1441–2.
2. Yesil A, Yilmaz Y. Review article: coffee consumption, the metabolic syndrome and non-alcoholic fatty liver disease. *Aliment Pharmacol Ther* 2013; **38**: 1038–44.
3. Gniechwitz D, Reichardt N, Blaut M, Steinhart H, Bunzel M. Dietary fiber from coffee beverage: degradation by human fecal microbiota. *J Agric Food Chem* 2007; **55**: 6989–96.
4. Mouzaki M, Comelli EM, Arendt BM, *et al.* Intestinal microbiota in patients with nonalcoholic fatty liver disease. *Hepatology* 2013; **58**: 120–7.
5. Tagliabue A, Elli M. The role of gut microbiota in human obesity: recent findings and future perspectives. *Nutr Metab Cardiovasc Dis* 2013; **23**: 160–8.