

# Composition of the fecal, vaginal and colostrum microbiotas of dams at parturition and their relationship with neonatal outcomes in dogs

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1	Composition of the fecal, vaginal and colostrum microbiotas of
2	dams at parturition and their relationship with neonatal outcomes
3	in dogs
4	Quentin Garrigues <sup>1</sup> , Emmanuelle Apper <sup>2</sup> , Fanny Mercier <sup>1</sup> , Ana Rodiles <sup>2</sup> , Nicoletta Rovere <sup>3</sup> ,
5	Sylvie Chastant <sup>1,4*</sup> and Hanna Mila <sup>1</sup>
6	<sup>1</sup> NeoCare, Reproduction, ENVT, Université de Toulouse, Toulouse, France
7	<sup>2</sup> Lallemand SAS, Blagnac, France
8	<sup>3</sup> Department of Health, Animal Science and Food Safety, VESPA, University of Veterinary,
9	20134 Milan, Italy
10	<sup>4</sup> Ecole Nationale Vétérinaire d'Alfort, BREED, Maisons-Alfort, France
11	* Current address
12	
13	Corresponding author:
14	Hanna MILA
15	23 Chemin des Capelles
16	BP 87614
17	31 076 Toulouse Cedex 3
18	France
19	<b>Tel:</b> +33 5 61 19 36 32
20	Mail Address: hanna.mila@envt.fr

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#### 23 Abstract:

Background: Microbial seeding in early life is critical for the host's short- and long-term health, and the mother is the first source of bacteria for the newborn. The objective of this study was to characterize the maternal fecal, vaginal, and colostral microbiotas in the canine species one day after parturition and to evaluate the relationship between the microbial profiles of 36 dams and the neonatal outcomes of 284 newborns.

29 **Results:** The first part of the study revealed the presence of 2 fecal, 3 vaginal, and 2 colostral 30 microbial clusters on the basis of the core microbiota of the dams. Among these three maternal 31 microbiotas, only the vaginal microbiome was found to be associated with neonatal outcomes. 32 Compared with those in the other clusters, females in Cluster 1, with the lowest stillbirth and 33 neonatal mortality ratios, presented a greater abundance of Moraxellaceae in their vaginal 34 microbiota; Cluster 2, with a greater abundance of *Pasteurellaceae*, mostly from the 35 Haemophilus genus; and Cluster 3 (with the highest stillbirth and neonatal mortality ratios), a 36 greater abundance of Enterobacteriaceae, mostly E. coli. Moreover, Cluster 3 dams presented 37 significantly lower species richness according to the Shannon index than did dams from the 38 other clusters.

39 Conclusions: This study underscores the strong association between maternal microbiota, 40 particularly the vaginal microbiota, and newborn health. The results of this study call for further 41 research to gain a deeper understanding of the optimal vaginal microbiota composition in canine 42 species and the ways to modulate it to improve neonatal outcomes.

#### 43 **1. Background**

44 Currently, the dynamic interaction between microbial communities (collectively known as the 45 microbiota) and their host organisms offers valuable insights into host health. The most 46 extensively studied microbiota is the gut (and more specifically the fecal), as its role in shaping its host's health has gained increasing evidence<sup>1,2</sup>. However, many more microbial communities 47 play crucial roles in host health, although they remain less explored. This includes the vaginal 48 49 and colostrum microbiotas, which have many essential functions within the host (the dam), such as immune regulation, metabolic equilibrium and protection against pathogens $^{3-5}$ . Moreover, 50 51 all of these microbiotas have emerged as central players in reproductive health and performance<sup>5,6</sup>. In particular, the maternal vaginal and colostrum microbiotas have been shown 52 53 in humans to be crucial for enhancing the newborn's immune system by promoting the 54 colonization of the intestine by beneficial bacteria, such as Lactobacillus and Bifidobacterium, as they induce specific immune stimulation of the intestinal environment through the 55 production of short-chain fatty acids (SCFAs) and interactions with Treg cells<sup>5,7,8</sup>. 56

57 Given the complex topic of the maternal microbiota and its importance during parturition, 58 maternal factors may have crucial interrelationships with the microbial composition. These 59 factors encompass a spectrum of maternal attributes, such as physiological status, consumption of medications, or diet, as observed in humans <sup>9</sup>. For example, pregnant women exposed to 60 antibiotics presented lower abundances of Actinobacteria and greater alpha diversity <sup>10</sup>, 61 62 whereas overweight and obese women presented lower maternal alpha diversity and taxonomic differences in the maternal gut microbiota<sup>11</sup>. Understanding how these maternal factors interact 63 with microbial diversity has the potential to improve the understanding of the relationship 64 between the host's physiological state and the microbial communities that inhabit it. 65

Although the importance of the maternal microbiota during parturition for neonates' health 66 trajectory has been demonstrated in human medicine<sup>7,12,13</sup>, it is currently poorly investigated in 67 canine species. Neonatal puppies are inherently vulnerable, with approximately 13% of puppies 68 dying during their first weeks of life<sup>14</sup>. The transition from the protected intrauterine 69 70 environment to the external world places them at a critical juncture where among other factors, 71 their ability to establish a resilient microbial ecosystem is paramount. In the case of perturbed 72 microbial seeding, as shown with puppies born from C-sections, less diverse microbiota and 73 delayed growth were observed<sup>15,16</sup>. Other neonatal events can also impact the proper setting of 74 the microbial communities of newborn puppies. For example, birth weight is associated with 75 microbiota alterations, with low-birth-weight (LBW) puppies exhibiting an increased abundance of opportunistic bacteria in their fecal microbiota during the first three weeks of life 76 compared with normal-weight puppies <sup>17</sup>. For these reasons, understanding the vertical 77 78 transmission of bacteria from mothers to offspring seems crucial for improving puppies' health.

79 This study aims to evaluate whether maternal fecal, vaginal and colostral microbial profiles of 80 bitches one day after whelping are associated with neonatal outcomes in terms of LBW, early 81 growth rate, stillbirth and neonatal mortality (defined as deaths occurring during the first three 82 weeks of life) ratios. Second, the degree to which maternal factors, such as body condition score 83 (BCS), gestational weight changes, fecal scores, parity, and litter size, are correlated with 84 variations in maternal microbial composition related to neonatal outcomes was assessed 85 (Figure 1). Improving the understanding of the interactions among maternal physiological factors, the microbiota and reproductive performance would provide crucial insights into the 86 87 ability of the modulation of the maternal microbiota to increase the survival and well-being of 88 newborn puppies.



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Fig. 1. Summary of all maternal factors and neonatal outcomes studied and their potentialinteractions with the three maternal microbiota.

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#### 93 **2. Methods**

94 2.1. Animal enrollment and housing

Thirty-six bitches from medium-sized (> 15 and  $\leq$  25 kg) and large-sized (> 25 kg) breeds were 95 96 recruited from one breeding kennel in France. Dams were followed from ovulation (G0) up to 24 hours postpartum (P1), with a pregnancy diagnosis performed on their 28<sup>th</sup> day of gestation 97 98 (G28). They were fed two manufactured dry pet food diets. From G0 until G28, the bitches 99 received Diet 1, then Diet 2 from G28 to the end of the experiment. The nutritional values of 100 both diets are available in Supplementary Table S1. During the experiment, all dogs had ad 101 libitum access to water. All the dams were vaccinated and dewormed before mating, following 102 the veterinary protocol in place at the breeding facility. They were housed in individual outdoor

pens until around the 56<sup>th</sup> day of gestation (G56), when they were moved to individual pens in the maternity building to prepare for whelping. The pens were equipped with a floor heating system, heating lamps, and wood shavings as bedding material. All puppies were born by natural delivery (i.e., no cesarean section) and remained in the same pens as their mothers during the study period.

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2.2.

#### Sampling and measures

Both dam weights (digital scale Soehnle model 7859.70.002, Soehnle GmbH, Backnang, Germany, maximum capacity of 200 kg, precision  $\pm 0.1$  kg) and body condition scores (BCSs, 9-point scale, with 1 being the thinnest and 9 the fattest <sup>18</sup>) were recorded on G0, G28, G56 and P1. Gestational relative gain weight (GWG) was calculated as the percentage of weight gained or lost by the dams between G0 and P1 according to the following formula: ((weight P1 – weight G0) / weight G0 \* 100%).

Every day, individual food intake was recorded by measuring the amount of food provided in the morning and normalizing it on the basis of the remaining food in the bowl the following day.

Dams' fecal scores (FS) were recorded on three consecutive days, from one to three days postpartum, to assess the gut health of dams following parturition via a 5-point scale fecal scoring system (with 1 being the driest stool and 5 being the most liquid<sup>19</sup>). The mean of the three scores was then calculated and attributed to the P1 time point.

For each dam, reproductive performance was evaluated through the number of puppies born alive, the number of stillborn puppies, the number of puppies dying during the neonatal period (from birth to 21 days post parturition), and the number of low-birth-weight puppies (LBWs). Stillborn, dead and LWB puppies were recorded as a ratio to the number of puppies alive at birth per litter. To determine LBW, puppies were weighed during the first 12 hours after birth

127 (D0) via a digital scale (EB3 Series, Ohaus, Parsippany, NJ, USA; maximum capacity, 5 kg; 128 precision,  $\pm 0.1$  g). To address interbreed variability, quartiles of birth weight were calculated 129 for each breed on the basis of the last 4010 birth weights registered in the breeding facility <sup>20,21</sup> 130 (Supplementary Table S2). The thresholds obtained were used to categorize each puppy into 131 one of the four birth weight quartile groups. The first quartile included the 25% lightest puppies, 132 whereas the 25% heaviest puppies were in the fourth quartile, with all puppies under the first 133 quartile threshold considered LBW. Puppies were weighed again at approximately 48 h after 134 birth (D2), and their growth rate (GR) was calculated as follows: ((weight D2 - weight 135 D0)/weight D0) \* 100%.

136 All samples for maternal microbiota analyses were collected at P1 (108 total samples). Sterile 137 swabs (175 mm, Viscose knob, COPAN, Brescia, Italy) were used to collect fecal and vaginal 138 microbiota samples. Moreover, vaginal swabs were introduced via a sterile plastic speculum to 139 avoid contamination with the skin and vestibule bacterial flora. For colostrum collection, 140 intramuscular administration of 1 or 2 UI of oxytocin was performed before collection. The fourth pair of mammary glands (with the 1<sup>st</sup> pair being the most cranial and the 5<sup>th</sup> pair being 141 142 the most caudal) was cleaned with chlorhexidine soap on a sterile compress, after which 0.1 143 mL of colostrum was collected from each gland into a sterile Eppendorf tube (0.2 mL in total). 144 The swabs and colostrum were stored at -20°C immediately after collection for a maximum of 145 1 month and then at -80°C for the rest of the time until further processing.

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# 2.3. DNA Extraction and 16S rRNA Gene Amplification and Sequencing

Metagenomic DNA was extracted from swabs via a Quick-DNA Fecal/Soil Microbe Miniprep Kit (Zymo Research, Irvine, CA, USA) following the manufacturer's instructions. For colostrum DNA extraction, the same kit and instructions were used with minor adaptations on

the basis of the methodology of Derakhshani *et al*<sup>22</sup>. The extracted DNA was quantified via a 151 152 fluorometric method with a Quant-iT<sup>™</sup> PicoGreen<sup>®</sup> dsDNA assay kit (Life Technologies, 153 Carlsbad, CA, USA) via a QuantStudio<sup>™</sup>3 Real Time PCR System (Thermo Fisher Scientific 154 Inc., Waltham, MA, USA). The V3-V4 region of the 16S rRNA gene was amplified via PCR 155 (CCTACGGGAGGCAGCAG) 23 via the universal primers 341F and 806R (GGACTACNVGGGTWTCTAAT)<sup>24</sup>. The PCR amplicons were purified with a HighPrep 156 157 PCR system (Magbio Genomics, Gaithersburg, MD, USA) and used for library construction 158 with an Illumina NEXTflex PCR-Free DNA Sequencing Kit (Bioo Scientific Corp., Austin, 159 TX, USA). Amplicon libraries were sequenced on an Illumina MiSeq 2500 platform (Illumina, 160 San Diego, CA, USA) at the GeT-PlaGe INRAE Platform (Toulouse, France) for paired-end fragment sizes of 250 bp. All the reagents used were of molecular grade. 161

#### 162 2.4. Analysis of Sequencing Data

163 Raw fastq files were imported, demultiplexed, quality filtered and dereplicated through highresolution sample inference with DADA2<sup>25</sup> in QIIME 2 (version 2020.2)<sup>26</sup>. This allowed the 164 identification of amplicon sequence variants (ASVs) under default parameters, excluding 165 166 primer length. ASV de novo alignment and phylogenetic analysis were performed with MAFFT and FastTree2, respectively <sup>27,28</sup>. Rarefaction curves were checked for full community sampling 167 168 depth. Taxonomy was assigned to the resulting 16S rRNA gene marker genes against Greengenes (gg-13-8-99-nb-classifier)/SILVA (v138) via the sklearn classifier method 169 according to Bokulich et al.<sup>29</sup>. The raw data were rarefied by removing the ASVs present in 170 171 fewer than 5 samples with an abundance lower than 0.005% of the total abundance.

172 2.5. Data analysis

All the statistical analyses were conducted in R version 4.1.0 (R Core Team, 2021), with
resulting p values less than 0.05 considered statistically significant, and box plots and histogram
8

figures were drawn with RStudio (version 2022.02.3 Build 492). Other plots were created via MicrobiomeAnalyst<sup>30</sup>. All clinical data are expressed as the means and SDs ( $\pm$ ).

177 Before compositional, multivariate and principal component analysis (PCA), the ASV 178 abundances were centered log-ratio (CLR) transformed following the replacement of zero with 179 the geometric Bayesian model (GBM) of the zCompositions package<sup>31</sup>.

180

#### 2.5.1. Overall microbiota analysis

Beta diversity. Multidimensional scaling (MDS) plots generated via the phyloseq package were generated to visualize the beta diversities among the three microbiota. To highlight potential differences in the fecal, vaginal and colostrum microbiota structures, permutational multivariate analysis of variance (PERMANOVA) with 9999 permutations was performed on the basis of Bray–Curtis distances with the Adonis function available in the "vegan" package v2.6-2 of R software<sup>32</sup>.

Alpha diversity. The alpha diversity was calculated with observed ASVs and the Shannon <sup>33</sup>
 index via the Phyloseq package v1.38.0 <sup>34</sup>, and ANOVA coupled with Tukey's test was used to
 evaluate differences among the three microbiotas and between clusters.

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#### 2.5.2. Core microbiota and clustering

191 *Definition of the core microbiota*. To describe and illustrate the main genera and families 192 comprising the different maternal microbiotas, the core microbiotas of the dams were defined 193 as all the ASVs at the genus level present in at least 32 dams (89% of samples) for fecal and 194 colostrum microbiotas and 27 dams (75%) in vaginal dams, with a minimum of 1% mean 195 relative abundance<sup>35</sup>.

196 *Clustering of the dams*. The clustering of the dams was performed via Dirichlet Multinomial
 197 Mixtures (DMM) clustering via the DirichletMultinomial 1.44.0 package in R<sup>36</sup>. The optimal

198 number of clusters was determined via the Laplace approximation by analyzing model 199 complexity. The contributions of the main ASVs to each microbiota cluster were then 200 determined via linear discriminant analysis effect size (LEfSe).

201

#### 2.5.3. Relationships between microbiota profiles and neonatal health

The associations between the microbial clusters identified in the dams' feces (Cluster 1/Cluster 2), vagina (Cluster 1/Cluster 2/Cluster 3), and colostrum (Cluster 1/Cluster 2) and the neonatal outcomes in their litter (the ratio of LBW and GR between 0 and 2 days of life, the ratio of stillbirth, and the ratio of neonatal mortality) were evaluated via generalized linear models (using the glm function of the R *stats* package). The four following models were constructed to address these questions:

# 208 Neonatal outcome ~ Fecal microbial cluster + Vaginal microbial cluster + Colostral 209 microbial cluster

Chi-square (for the interlitter LBW, stillbirth, and neonatal mortality ratio) and deviance (for
the interlitter GR 0–2 days) tests were used to assess the goodness-of-fit of the final models.
The overdispersion of the models was also assessed by comparing the residual deviance to the
degrees of freedom.

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#### 2.5.4. Relationships between microbiota profiles and maternal factors

In the final part of the study, only the microbiota associated with neonatal outcomes were investigated. Eight factors were chosen for their biological relevance to study the association between maternal factors and microbial profiles: breed, age, parity, food intake, GWG, BCS, FS at P1, and litter size (Figure 1). On the basis of correlation matrices (using Kendall's tau), parity and age were significantly correlated (rho>0.4; p<0.001); thus, out of the two, only parity was included in further analyses. Similar results were observed for food intake and GWG; therefore, only GWG was used for further analysis. A multivariate logistic regression model was subsequently built using the *glm* function to evaluate the associations between maternal parameters (breed as a nominal variable and parity, GWG, BCS, FS, and litter size as continuous variables) and the clusters (cluster name) of microbiota correlated with neonatal health. Different models, including the six mentioned fixed effects, were tested, and the final model was built on the basis of the lowest Akaike criterion as follows:

227

#### Microbial clusters ~ Parity + Litter\_size + Breed

228 The overdispersion of the model was assessed by comparing the residual deviance to the 229 degrees of freedom.

230 **3. Results** 

#### 3.1. Description of the population

232 The 36 dams studied belong to 9 different medium and large breeds: Australian Shepherd (n=8), 233 Golden Retriever (n=8), German Shepherd (n=1), Labrador Retriever (n=6), White Swiss 234 Shepherd (n=3), Pyrenean Mountain Dog (n=2), Bernese Mountain Dog (n=6), Boxer (n=1) 235 and Dalmatian (n=1). Five bitches were primiparous, 8 gave birth once before the study, and 236 23 had whelped at least 2 times (mean =  $2.7 \pm 1.8$ ). The mean age of the dams was  $3.3 \pm 1.2$ 237 years. At G0, the dams weighed between 18.5 and 39.5 kg (mean =  $29.7 \text{ kg} \pm 5.1$ ) and had 238 BCSs ranging from 3 to 8 (mean =  $5.4 \pm 1.3$ ) (Table 1). At P1, the weights of the dams and 239 their BCSs decreased (mean =  $27.7 \text{ kg} \pm 5.1 \text{ and mean} = 4.1 \pm 1.1, \text{ p} < 0.001$ , respectively). The 240 mean GWG was -6.5±7.0%, ranging from -22 to 6%. The mean FS of the dams at parturition 241 was  $2.6 \pm 0.6$ . A total of 284 puppies were born in our study, with litter sizes ranging from 4 to 242 11 puppies (mean =  $7.9 \pm 1.9$ ). A total of 30 puppies were stillborn (10.6%), with a mean of 0.8 243  $\pm$  1.1 puppies per litter. Among the 254 puppies born alive, 60 were LBW (23.6%), and 25 244 (9.8%) died during the first three weeks. Half of the dams (17 out of 36 dams) delivered no 245 LBW puppies, whereas the other half (19 dams) had between 1 and 8 LBW per litter (mean 246 ratio =  $0.2 \pm 0.3$ ).

Parameter	Mean	Standard error	Minimum	Maximum	Median
Weight at G0 (kg)	29.7	5.2	19	40	30.9
Weight at P1 (kg)	27.7	5.13	19	38	28.2
BCS at G0	5.4	1.3	3	8	6.0
BCS at P1	4.1	1.2	2	7	4.0
Parity	2.7	1.9	0	6	3.0
Fecal score at P1	2.6	0.6	1.7	4.5	2.4
Litter size	7.9	1.9	4	11	3.6
Sex ratio	1.5	1.0	0	4	1.0
Ratio of LBW (%)	0.2	0.3	0	0.9	0.1
GR 0-2 days (%)	8.1	8.2	-5.6	25.1	8.0
Stillbirth (%)	0.8	1.1	0	4	1.0
Neonatal mortality	0.4	0.5	0	1	0

**Table 1.** Characteristics of the dams (n=36) and their litters included in the study.

 $\begin{array}{c} 248 \\ \hline G0 - ovulation \ day; \ P1 - postpartum \ day \ 1; \ BCS - body \ condition \ score; \ LBW - low \ birth \ weight; \ GR - growth \ rate \end{array}$ 

3.2. Comparison of the fecal, vaginal and colostrum microbiotasone day after parturition

A total of 3,087,414 sequences were used for the analysis. After the cleaning, filtration, and
affiliations of the sequencing reads, 235 ASVs were identified, including 11 phyla, 22 classes,
40 orders, 79 families, and 128 genera.

- 255 *Beta diversity.* The microbial community composition significantly differed depending
- 256 on location on the basis of the PERMANOVA results obtained via Bray–Curtis distances (p <

257 (0.001) and pairwise analysis (p-adjusted = 0.003 for each pair) (Figure 2). The fecal microbiota 258 had greater dissimilarity than the vaginal and colostrum microbiota, which shared more 259 bacterial communities, as seen with the overlapping ellipses. The size of the ellipses also 260 allowed us to highlight greater interindividual variation in the composition of the vaginal microbiota than the other two, where ellipses were smaller. The Bray-Curtis distances were 261 262 also added to a heatmap to specify the previous results (Figure 3). As anticipated with the MDS 263 plot, approximately half of the vaginal and colostrum ASVs were almost absent from the fecal 264 microbiota, explaining the interdissimilarity.



265

Fig. 2. Beta diversity of the 36 dams' three types of microbiota (fecal in red; vaginal in green and colostral in blue) one day after parturition. The MDS plot shows the dissimilarities between dams' fecal, vaginal and colostrum microbiotas one day after parturition, which were calculated

via Bray–Curtis distances. Each point represents an individual dam sample for one specific microbiota, positioned on the plot on the basis of the similarity of its microbiota communities with other samples. Ellipses are based on 95% confidence intervals and standard errors. The similarity of bacterial communities is evaluated on the basis of taxon similarity and abundance. (p < 0.001)



Fig. 3. Heatmap of dam microbiota one day after parturition at the family level between the three studied sites (fecal, vaginal and colostral). The color scale is based on the relative abundance of the amplicon sequence variant (ASV).

279 Composition. At the three sampling sites, Firmicutes, Proteobacteria, Fusobacteria, 280 Bacteroidetes and Actinobacteria were the five most abundant microbial phyla, except the 281 vaginal phylum, where *Tenericutes*, exclusively composed of *Mycoplasma*, was more abundant 282 than Actinobacteria and was significantly more abundant than in feces and colostrum (Figure 283 **4A and Table 2**). The relative abundance of *Firmicutes* remained similar among the sampling 284 sites, although the family composition of this phylum varied from one site to another. The fecal 285 microbiota had the most heterogeneous Firmicutes composition, with Clostridiaceae, 286 Lachnospiraceae and Acidaminococcaceae being the most abundant families of this phylum. 287 The vaginal and colostrum microbiotas, on the other hand, had only one abundant Firmicutes 288 family: Streptococcaceae and Staphylococcaceae, respectively (Figure 4B). More Bacteroidetes (dominated by Bacteroidaceae and Prevotellaceae) and Actinobacteria 289 290 (dominated by Corynebacteriaceae) were present in the fecal microbiota than in the vaginal 291 and colostrum microbiotas (Table 2). In contrast, Proteobacteria was the dominant phylum in 292 both the vaginal and colostrum microbiotas, with Enterobacteriaceae and Moraxellaceae 293 having the highest relative abundances in the vaginal and colostrum microbiotas, respectively.

Table 2. Mean relative abundance of each phylum and prominent family in the three microbiotas of the dams one day after parturition (n=36).

	Relati	Relati	ve abundan (mean±SD)	ce (%)			
Phylum	Fecal	Vaginal	Colostrum	Family	Fecal	Vaginal	Colostrum
Actinobacteria	15.9±14.5	2.2±4.8	2.2±2.0	Corynebacteriaceae	$14.2 \pm 14.2$	1.9±4.3	1.1±1.3
Bacteroidetes	$25.4 \pm 8.7$	10.3±16.0	$8.0 \pm 8.0$	Bacteroidaceae	$12.0{\pm}4.5$	1.1±5.2	1.6±1.9
				Prevotellaceae	$9.0{\pm}5.4$	$1.2 \pm 4.1$	$1.0{\pm}1.4$
Firmicutes	32.9±9.9	26.2±25.4	35.3±19.5	Staphylococcaceae	$0.8 \pm 1.6$	$4.4 \pm 8.5$	$10.0{\pm}12.1$
				Streptococcaceae	$2.4 \pm 5.3$	13.1±21.9	3.2±4.8
				Clostridiaceae	6.4±4.3	$3.4{\pm}15.7$	4.1±4.7
				Lachnospiraceae	5.1±2.7	$0.4{\pm}1.0$	$2.0\pm2.6$
				Acidaminococcaceae	$4.2 \pm 2.3$	$0.1\pm0.5$	$1.2 \pm 1.7$
Fusobacteria	13.5±4.8	$7.0{\pm}14.2$	4.3±4.6	Fusobacteriaceae	13.5±4.8	$7.0{\pm}14.0$	4.3±4.6

Proteobacteria	11.5±7.4	48.7±27.1	49.7±21.4	Succinivibrionaceae	4.1±5.1	$0.0\pm0.1$	0.2±0.3
				Enterobacteriaceae	$1.9{\pm}1.9$	16.2±25.2	5.6±11.2
				Pasteurellaceae	$0.6\pm0.8$	14.3±23.6	$1.7{\pm}5.7$
				Moraxellaceae	$1.9 \pm 4.7$	$14.4{\pm}18.9$	38.6±20.2
Tenericutes	0.1±0.3	5.3±15.7	0.1±0.2	Mycoplasmataceae	$0.04 \pm 0.2$	5.3±15.7	$0.05 \pm 0.2$





Fig. 4. Mean relative abundance of the bacterial taxa of the three studied microbiotas in 36 bitches one day after parturition at the (A) phylum and (B) family levels. The 15 most abundant families at each site are highlighted. All the remaining taxa are summed in the "Other" category. Significant differences between phyla are identified with Tukey's HSD letters.

302 Alpha diversity. The microbiotas from the vagina, colostrum and feces presented 303 significantly different numbers of observed ASVs and Shannon diversity indices (p < 0.001). 304 The colostrum microbiota had a significantly greater number of observed ASVs (mean = 84.9305  $\pm$  17.0) compared to the fecal one (mean = 54.3  $\pm$  7.4) which itself was significantly greater 306 than the vaginal one (mean =  $37.5 \pm 23.6$ ) (Figure 5A). According to the Shannon index, the 307 fecal and colostrum microbiota did not significantly differ (mean =  $2.9 \pm 0.2$  and mean =  $2.7 \pm$ 308 0.6), implying that the evenness of the taxa in the fecal microbiota is greater (Figure 5B). The 309 alpha diversity of the microbiota from both locations was significantly greater than that of the 310 vaginal microbiota (mean =  $1.7 \pm 0.9$ ).



Fig. 5. Alpha diversity of 36 samples of maternal fecal, vaginal and colostrum microbiotas one
day after parturition using (A) observed species (bacterial richness) and (B) the Shannon index

315 (bacterial richness and evenness). Significant differences are identified with Tukey Honest 316 Significant Difference (HSD) letters. Boxes with different letters are significantly different (p 317 < 0.05).

318 3.3. Characteristics of the core microbiota clusters

The core fecal, vaginal and colostrum microbiotas were composed of 15, 6, and 14 ASVs, respectively, at the genus level. The composition of the core microbiota is presented in the supplementary data (**Table S3**). Using DMM community clustering, two clusters were identified in the fecal and colostral microbiota, and three were identified in the vaginal microbiota, which is consistent with the previous Bray–Curtis results, highlighting greater intradissimilarity in the vaginal microbiota than in the other two microbiotas (**Figure 6**).



#### B. Vaginal microbial clusters

#### C. Colostral microbial clusters

Fig. 6. Beta diversity plots showing the differences in the fecal (A), vaginal (B) and colostral (C) microbiota structures between the clusters identified in the 36 dams one day after parturition via Dirichlet Multinomial Mixtures (DMM) clustering analysis. The MDS plot shows the dissimilarities between clusters, which were calculated via Bray–Curtis distances. Each point represents an individual dam sample for one specific microbiota, positioned on the plot on the basis of the similarity of its microbiota communities with other samples. Ellipses are based on 95% confidence intervals and standard errors. The similarity of bacterial communities is evaluated on the basis of taxon similarity and abundance. (p < 0.001).

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A. Fecal microbial clusters

*Composition.* In feces, the clusters were separated on the basis of the relatively high relative
abundances of *Clostridiaceae* and *Selenomonadaceae* in Cluster 1 (means of 9% and 3% vs 3%
and 1%, respectively) and the relatively high relative abundances of *Corynebacteriaceae*(namely, *Corynebacterium* and *Porphyromonadaceae*), mostly *Bacteroides*, in Cluster 2
(means of 26% and 9% vs 7% and 0.5%, respectively) (Figure 7A, Figure 8A).

338 In the vagina, Cluster 1 was separated by a relatively high relative abundance of *Moraxellaceae* 339 (28% vs 10% and 1%), mostly *Psychrobacter* and *Acinetobacter* (Figure 7E and Figure 8B), 340 and a relatively low relative abundance of *Fusobacteriaceae* (0.5% vs 9% and 13%). Cluster 2 341 was separated by a relatively high relative abundance of Pasteurellaceae (23% vs 10% and 342 0.9%), mostly *Haemophilus*. Cluster 3 was separated by a relatively high relative abundance of 343 Enterobacteriaceae (41% vs 5% and 8%), mostly Escherichia, and a relatively low abundance 344 of *Flavobacteriaceae* (0.1% vs 3% and 6%). The abundance of the *Mycoplasma* genus did not 345 differ among the three clusters.

Finally, in colostrum, Cluster 1 was separated from Cluster 2 on the basis of the higher relative
abundance of *Moraxellaceae* (51% vs 27%), *mostly Psychrobacter*, and *Flavobacteriaceae* (8%
vs 1%), and lower relative abundances of *Enterobacteriaceae* (2% vs 9%), *Clostridiaceae* (1%
vs 7%) and *Lachnospiraceae* (0.5% vs 3%) (Figure 7F and Figure 8C).

350 All mean relative abundances of the core families of each cluster are compiled in351 Supplementary Table S3.



Fig. 7. Microbiota profiles in determined clusters on different body sites of dams one day after parturition. Relative abundance of the core families with > 1% relative abundance for each cluster of the fecal (A), vaginal (B) and colostrum (C) microbiotas and heatmaps of the core genera of ASVs for the fecal (D), vaginal (E) and colostrum (F) microbiotas.







Fig. 8. The main taxon ASVs of the fecal (A), vaginal (B), and colostrum (C) microbiota significantly distinguishing the observed clusters according to linear discriminant analysis effect size (LEfSe) on samples obtained from 36 dams one day after parturition.

363

*Alpha diversity.* There was a significant difference in the Shannon index between the two clusters of fecal microbiota, with Cluster 1 having a significantly greater index (**Figure 9**). For the colostrum microbiota, there was a significant difference between clusters in the observed ASV only, with Cluster 1 having a lower number of observed ASVs. For the vaginal microbiota, Cluster 1 had a significantly greater number of observed ASVs than did Clusters 2 and 3, whereas Cluster 3 had a significantly lower Shannon index. All the data are compiled in Supplementary **Table S4**.



**Fig. 9.** Bacterial richness of all three microbiota in 36 bitches one day after parturition according to the defined clusters. Significant differences are identified with Tukey's HSD letters. Boxes with different letters are significantly different (p < 0.05) according to (A) the number of observed ASVs and (B) the Shannon index.

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377

#### 378 3.4. Core microbiota clusters and reproductive performance

379 On the basis of the linear models assessing the LBW ratio, GR 0–2 days, stillbirth ratio, and 380 neonatal mortality ratio, with fecal, vaginal, and colostral microbiotas as the studied factors, 381 only the vaginal microbiota was consistently associated with reproductive outcomes, except for 382 the LBW ratio (**Table 3**).

383

**Table 3.** Associations between fecal, vaginal and colostrum microbial clusters one day after
parturition and neonatal outcomes: p values of the four linear models. Significant p values (<</li>
0.05) and tendencies (<0.1) are highlighted in bold.</li>

Maternal microbiota	Ratio of low- birth-weights	Growth rate 0-2 days	Ratio of stillbirth	Ratio of mortality 0-21 days
Fecal microbiota	0.364	0.670	0.709	0.929
Vaginal microbiota	0.638	0.059	0.005	0.018
Colostrum microbiota	0.294	0.189	0.598	0.622

387

Litter GR over the first 2 days of life tended to be 2 times greater in puppies from Cluster 1 bitches than in those from Clusters 2 and 3 (**Table 4, Figure 10A**). In contrast, the interlitter ratio of stillbirth and neonatal mortality was approximately twice as high in Cluster 2 litters and over 4 times greater in Cluster 3 litters than in Cluster 1 litters (Table 4; **Figure 10B and 10C**). No significant difference was observed in neonatal outcomes among dams with different microbial fecal or colostral clusters.

394

**Table 4.** Characteristics of the neonatal outcomes of 36 dams according to their fecal, vaginal or colostral microbiota clusters identified via Dirichlet Multinomial Mixtures (DMM). Significant differences (p < 0.05) and tendencies (< 0.1) are highlighted in bold.

	-	Fecal		Vaginal		Colostr	um
Cluster	Cluster 1	Cluster 2	Cluster 1	Cluster 2	Cluster 3	Cluster 1	Cluster 2
Number of dams	23	13	14	12	10	17	19
Ratio of LBW (mean±SD ; %)	24.5±30.1	17.8±27.6	26.4±29.8	19.4±29.7	19.2±29.3	27.3±32.9	17.4±24.9
GR 0-2 days (mean±SD; %)	7.8±8.7	8.8±7.4	11.3±7.3	6.4±7.3	5.8±9.5	6.9±6.3	9.2±9.6
Ratio of stillbirth (mean±SD; %)	9.8±10.9	10.5±15.3	4.3±6.0	9.9±11.4	18.3±16.2	10.0±11.0	10.1±13.9
Ratio of neonatal mortality (mean±SD; %)	9.3±13.6	8.9±15.2	4.3±9.2	7.3±14.6	18.2±15.7	9.1±14.2	9.2±14.2

399 *LBW* – *low birth weight; GR* – *growth rate* 

400



402 **Fig. 10.** Neonatal outcomes ((A) growth rate 0–2 days; (B) stillbirth ratio; (C) neonatal 403 mortality ratio) of 36 litters according to the vaginal microbial profile of their dam. Significant 404 differences are identified with Tukey's HSD letters. Boxes with different letters are 405 significantly different (p < 0.05).

406

408 3.5. Factors associated with variation in the core microbiota409 clusters

410 Among the three studied microbiota, only the maternal vaginal microbial profile was 411 significantly associated with the reproductive performance of the dam (stillbirth and neonatal 412 mortality), and a trend was observed for the GR at 0-2 days. Thus, the vaginal microbial profile 413 was further explored. The results of the final multivariate logistic regression model on the 414 vaginal microbial profile revealed a significant association with parity (0.049) but not with 415 breed or litter size (p>0.05 for all the parameters). Bitches from Cluster 2 and Cluster 3 had a 416 mean parity of 3 and 4, respectively, whereas the mean parity in Cluster 1 was 1 (Figure 11). 417 More specifically, all primiparous dams belonged to this cluster. However, no significant 418 differences between nulliparous (n=5) and multiparous (n=31) dams were found via LEfSe 419 analysis.



421 **Fig. 11.** Parity of the 36 followed bitches according to their vaginal microbial profile. 422 Significant differences are identified with Tukey's HSD letters. Boxes with different letters are 423 significantly different (p < 0.05).

#### 424 **4. Discussion**

#### 425 4.1. Limitations of the study

426 To the best of our knowledge, this study is one of the few in the literature and the first in canine 427 species to provide results concerning the composition of the maternal microbiota of the vagina, 428 feces and colostrum concomitantly at parturition and how they are associated with maternal 429 factors and early-life outcomes. While these results are promising for understanding how 430 maternal factors influence the microbiota at parturition, several elements need to be considered. 431 A total of 36 bitches and their 284 puppies were included in our study. Although this is an 432 important number of animals, the number of animals per group after clustering has decreased 433 to a more limited population, lowering our statistical power in models, specifically those 434 associated with maternal factors. On the basis of previous studies, factors such as type of parturition, diet and breed have a strong influence on microbial communities and could 435 overshadow the factors investigated in the present study<sup>16</sup>; indeed, the included dams originated 436 437 from one kennel with the same nutrition, kennel conditions and management.

#### 438

### 4.2. Importance of the maternal microbiota for newborns

439 Early colonization of the gut and development of the intestinal microbiota are crucial steps for newborns, which can shape many vital functions in the short and long term <sup>37,38</sup>. More 440 441 specifically, the expression of some genes in newborns is influenced by maternal microbial 442 status, even before birth, affecting the later development of the immune system, neurophysiology, or energy metabolism<sup>39</sup>. It is now widely known that maternal factors and the 443 444 microbiota play crucial roles in the establishment of bacterial communities in newborns in the constant presence of their mothers during parturition<sup>13,40,41</sup>. Among the maternal microbiota, 445 446 the fecal microbiota is by far the most studied, although many recent studies have shown that 447 the vaginal and colostrum microbiota play crucial roles in shaping the microbiota of newborns <sup>5,42</sup>. Each of these microbiotas intervenes at different times in the development of the newborn's 448 449 microbiota, with different effects. In humans, the vaginal environment is the first in contact 450 with the newborn, even before exposure to the external environment; hence, it is the one shaping 451 initial bacterial colonization<sup>43</sup>. It is then expanded by the colostrum microbiota, which is rapidly ingested by the newborn, shaping its gut microbiota<sup>44</sup>. Finally, animals at birth might come into 452 453 contact with their mother's feces, which induces another vertical transfer of bacteria from the 454 mother to the offspring. Thus, to obtain a full picture of the association between the maternal 455 microbiota and offspring health, several microbiota have been studied rather than one.

456

### 4.3. Composition of the fecal microbiota

457 First, some important differences between the fecal, vaginal, and colostral microbiotas were 458 demonstrated in our study. Compared with those of the other two microbiota, the fecal 459 microbiota at parturition had the most uniform composition among the dams, with no clear 460 dominance of any specific taxa. The fecal microbiota has been extensively studied in recent 461 decades in dogs, and the composition presented in our study did not differ much from previously published data <sup>45–48</sup>. In some taxa, such as *Lactobacillus*, the relative abundance in the fecal 462 463 microbiota was very low (0.9% of total abundance) compared with that in nonpregnant animals. 464 Indeed, in previous results concerning the evolution of the fecal microbiota during pregnancy, we reported that the abundance of lactobacilli decreased to almost zero at parturition<sup>49</sup>. One 465 466 hypothesis for this disappearance was that lactobacilli translocate from the gut to the mammary glands; this phenomenon is known as the "entero-mammary pathway"<sup>50</sup>. Moreover, the increase 467 in estrogen levels during pregnancy has been linked to a decrease in vaginal pH, fostering the 468 growth of lactobacilli and reducing pathogen colonization<sup>51</sup>. However, these hypotheses, as 469 470 well as the role of *Lactobacillus* in newborn dogs, remain to be investigated. More generally,

471 other studies are needed to understand the role of the maternal fecal microbiota in newborn472 seeding.

473 Although the same diet was provided to all the dams in this study, two bacterial profiles were 474 distinguished in the fecal microbiota postpartum. The first profile (Cluster 1) was characterized 475 by a relatively high abundance of Bacteroides and Clostridium and mostly Clostridium 476 hiranonis. This species affects secondary bile acid production and inhibits the growth of pathogenic bacteria such as C. perfringens<sup>52,53</sup>. On the other hand, Corynebacterium, which is 477 478 overrepresented in Cluster 2, is associated with a lower risk of food-responsive diarrhea or IBD in dogs<sup>54</sup>. Nevertheless, no relationship between the fecal microbiome and neonatal outcomes 479 480 was observed in this study.

#### 481 4.4. Composition of the colostrum microbiota

482 Similar to that of the fecal microbiota, very limited interindividual diversity was observed 483 between the core colostrum microbiota of dams. The source of the colostrum microbiota is still 484 unclear, and many studies suggest that some of the bacterial communities are derived from 485 contamination from the skin, the external environment and the oral microbiota of the offspring<sup>55</sup>. Nevertheless, Proteobacteria was the dominant phylum in the colostrum 486 microbiota, as observed in women's milk *postpartum*<sup>56</sup>. This phylum was represented mainly 487 488 by the *Moraxellaceae* family, which had the highest relative abundance among all the bacterial 489 families. Interestingly, in a previous study on puppies, the Moraxellaceae family had the highest mean relative abundance in puppy feces at birth<sup>17</sup>. This finding reinforces the relationship 490 491 between the maternal colostral microbiota and the initial development of the intestinal 492 microbiota of the newborn. Indeed, nearly 70% of stool bacteria originate from maternal milk in newborn human babies younger than 6 days of age<sup>56</sup>. However, this hypothesis needs further 493 494 investigation in dogs.

Two clusters were identified in the colostral microbiota of the dog, with *Enterobacteriaceae* and *Clostridiaceae* dominating in one cluster and *Moraxellaceae* and *Lachnospiraceae* in the second cluster. To date, it remains impossible to determine which colostral microbial profile might be more beneficial for newborn health, as no relationship was observed between these two parameters in the present study. Further investigations are needed to address the presence of these taxa in canine milk, as well as their potential function in the newborn gut <sup>57</sup>.

# 4.5. Composition of the vaginal microbiota and its associations with neonatal outcomes

503

#### 4.5.1. General composition

Similar to colostrum, *Proteobacteria* was the dominant phylum in the vaginal microbiota, with *Enterobacteriaceae*, *Moraxellaceae*, *Streptococcacae*, and *Pasteurellaceae* being the key bacterial taxa observed *postpartum* in our population. These results are consistent with previous studies in which these taxa were also found to be the most abundant in the vaginal samples of canine females<sup>58–60</sup>. The vaginal microbiota showed considerable interindividual diversity, with some dams having a microbiota composed almost entirely of one main bacterial family, whereas others had a more diverse vaginal microbiota.

Three distinct profiles emerged from the clustering of the vaginal microbiota in our study. The first cluster (Cluster 1) consisted of dams dominated by *Moraxellaceae*, the second cluster (Cluster 2) had dams with a relatively high relative abundance of *Pasteurellaceae*, and the third cluster (Cluster 3) had a relatively high relative abundance of *Enterobacteriaceae*. Both this high interindividual variation between dams and the composition of the vaginal microbiota are quite different from what can be seen in humans. Indeed, the core vaginal microbiota of humans around birth is dominated by *Lactobacillus*, which often accounts for more than half of the relative abundance, followed by *Enterococcus* and *Staphylococcus*<sup>61</sup>. The higher abundance of *Lactobacillus* in the human vaginal microbiota may be due to a lower pH, typically below 4.5, whereas the pH of the canine vagina ranges from 5.0 to 8.1<sup>59</sup>. Lactic acid bacteria can survive in low-pH environments, allowing them to dominate areas where other bacteria cannot survive, such as the human vagina<sup>62</sup>. The high pH in dogs' vaginas leads to greater competition and hence a lower abundance of *Lactobacillus* at the expanse of *Proteobacteria*, which grow at higher pH.

525

#### 4.5.2. Association with mortality in puppies

526 One of the most important findings of this study is the association between the vaginal 527 microbiota in dams and the neonatal outcomes of their puppies. The vaginal microbiota in 528 women, cows and sows has been shown to influence the risk of prematurity, morbidity and 529 mortality in newborns<sup>63–65,</sup> but this study is one of the first to describe such results in canine 530 species via sequence-based bacterial analysis. Indeed, one of the vaginal microbial profiles 531 (Cluster 3) was significantly associated with a higher risk of stillbirth and neonatal mortality in 532 puppies, and a trend toward a lower growth rate over the first two days of life was observed.

533 In parallel with the increased stillbirth ratio, Cluster 3 dams also presented lower vaginal 534 bacterial richness than the other clusters did, suggesting that both are significantly correlated. 535 This is a surprising result, as elevated bacterial diversity was observed in human vaginal 536 samples with an increased risk of premature birth<sup>66</sup>.

*E. coli* was found to be the most abundant *Enterobacteriaceae* in Cluster 3 dams. This bacterium is considered opportunistic<sup>67–69</sup> and is the most commonly isolated bacterium from the vagina of healthy female dogs. However, in the case of neonatal mortality, an abundant pure culture of *E. coli* from a vaginal sample from a dam is interpreted as a likely cause of neonatal death <sup>70</sup>. Indeed, *E. coli* is also most often isolated from internal organs of puppies that die

during the neonatal period <sup>41,71–73</sup>. Moreover, over 80% of cases of neonatal septicaemia in dogs 542 543 occur within the first two days of life, strongly suggesting contamination during late gestation or birth via the uterus or vagina of the dam<sup>74</sup>. In humans, ascending bacterial infection with *E*. 544 545 *coli* leading to chorio-amnionitis before or after membrane rupture is usually the most common infectious cause of stillbirth<sup>75</sup>. Our results seem to confirm the potential pathological role of 546 547 this bacteria, as we have shown that, compared with dams with a vaginal microbiota rich in 548 bacteria from the *Moraxellaceae* family, those with a vaginal microbiota dominated by *E. coli* 549 present a significantly greater risk of stillbirth and neonatal mortality.

Among the most abundant bacteria of Cluster 2 bitches, we identified bacteria from the *Pasteurellaceae* family, more precisely, *Canicola haemoglobinophilus*. Interestingly, these bacteria were found to be associated with urogenital tract infections in dogs<sup>76,</sup> but they were also isolated from dead newborn dogs<sup>77</sup>. Thus, one could hypothesize that the vaginal microbiota of bitches from Cluster 2 could be associated with neonatal mortality. However, our data do not allow us to confirm this hypothesis.

556 In future studies, data on a large number of animals with maternal vaginal bacteria and bacteria 557 isolated from stillborn puppies or puppies dying during the neonatal period are needed to 558 identify the existence of any specific pathogens responsible for neonatal losses in the dog.

559

#### 4.6. Vaginal microbiota and parity

Parity was the only maternal factor correlated with the vaginal microbial profile in female dogs. Bitches from Cluster 3 presented lower bacterial richness and evenness associated with higher parity. As parity in this study increased proportionally with the age of the female, the alpha diversity of the canine vagina may have decreased with age, similar to what can be observed in the feces<sup>78</sup>. While similar results have been reported in the vaginal microbiota of baboons<sup>79</sup>, opposite results have been reported in human and canine populations, where vaginal bacterial diversity increases with age<sup>80,81</sup>. As Cluster 3 dams presented a greater risk of mortality in their puppies together with higher parity, one could hypothesize that the vaginal microbiota undergoes some significant changes with age and/or parity of the host, leading to potential vaginal dysbiosis.

#### 570 **5. Conclusions**

571 The present results demonstrated the association of puppy health with the maternal microbiota, 572 particularly the vaginal microbiota. Low vaginal microbiota richness was associated with an 573 increased risk of stillbirth. A specific vaginal microbial profile was identified in this study and 574 found to be associated with an increased risk of stillbirth and neonatal mortality in newborns. 575 A promising avenue for future research in canine species lies in understanding how hormonal 576 changes affect the physicochemical parameters of environments such as the gut, vaginal 577 mucosa, and colostrum. Hormones such as estrogen, progesterone, and cortisol alter pH levels, 578 mucosal secretions, and immune functions, which in turn create dynamic niches for microbial 579 communities. The practical implications of this research are vast. By understanding the 580 hormonal modulation of these microbial ecosystems and their interactions (called together 581 holomicrobiome), interventions could be developed to optimize the maternal microbiota during 582 pregnancy, potentially reducing the risk of complications such as stillbirth and infections. 583 Moreover, this knowledge could inform the development of probiotic, prebiotic, or dietary 584 strategies to support a healthy holomicrobiome, with cascading benefits for both maternal and 585 neonatal health.

# 586 Supplementary materials

**Supplementary Table S1:** Analysis of the nutritional values of the feeds used in the study.

Parameter	Feed				
	Diet 1	Diet 2			
Moisture, %	6.3	5.7			
Crude ash, % as fed	9.3	8.7			
Crude protein, % as fed	28.4	30.8			
Ether extract, % as fed	16.8	15.1			
Crude fiber, % as fed	<2	2.7			
Carbohydrates, %	37.7	37.0			
Vitamin E, mg/kg as fed	114	124			
Vitamin A, IU as fed	7 330	7 670			
Vitamin D, IU as fed	1 000	1 080			
Metabolizable energy, kcal/100 g	408.6	385.8			

- 590 Supplementary Table S2: Thresholds of birth weight used to create the four quartiles for each breed and the number of birth weights used to
- 591 calculate the threshold:

Birth weight category	LBW	NBW		HBW	Number of birth weight values
Breed	Q1	Q2	Q3	Q4	used to calculate thresholds
Australian Shepherd	< 325 g	325-378 g	378-426 g	>426 g	663
White Swiss Shepherd	< 389 g	389-438 g	438-498 g	>498 g	249
Golden Retriever	< 336 g	336-382 g	382-425 g	>425 g	1094
Labrador Retriever	< 364 g	364-410 g	410-455 g	>455 g	713
German Shepherd	< 426 g	426-488 g	488-541 g	> 541 g	153
Bernese Mountain Dog	< 406 g	406-453 g	453-499 g	> 499 g	489
Boxer	< 393 g	393-438 g	438-487 g	>487 g	269
Dalmatian	< 296 g	296-344 g	344-396 g	> 396 g	175
Pyrenean Mountain Dog	< 464 g	464-508 g	508-566 g	> 566 g	130

592

**Supplementary Table S3:** Mean relative abundances of the core families of each dam cluster for each microbiota one day after parturition.

Fecal			Vaginal				Colostrum		
	Cluster 1	Cluster 2		Cluster 1	Cluster 2	Cluster 3		Cluster 1	Cluster 2
Moraxellaceae	0.56	4.14	Moraxellaceae	27.78	10.10	0.89	Moraxellaceae	51.06	27.43
Enterobacteriaceae	2.47	1.00	Enterobacteriaceae	5.08	8.33	41.20	Enterobacteriaceae	1.91	8.91
Streptococcaceae	3.40	0.54	Streptococcaceae	11.67	10.25	18.64	Streptococcaceae	1.13	5.14
Clostridiaceae	8.64	2.52	Clostridiaceae	0.94	9.00	0.14	Clostridiaceae	1.40	6.51
Fusobacteriaceae	14.25	12.13	Fusobacteriaceae	0.47	9.49	13.06	Fusobacteriaceae	2.37	6.10
Bacteroidaceae	14.37	8.97	Mycoplasmataceae	3.30	3.52	10.25	Bacteroidaceae	0.44	2.68
Actinomycetaceae	0.31	2.60	Flavobacteriaceae	3.15	6.11	0.09	Flavobacteriaceae	7.91	1.42
Prevotellaceae	11.16	5.18	Staphylococcaceae	8.65	2.64	0.39	Staphylococcaceae	8.75	11.08
Lachnospiraceae	6.75	2.23	Weeksellaceae	8.24	1.10	0.00	Lachnospiraceae	0.46	3.29
Peptostreptococcaceae	0.87	2.36	Pasteurellaceae	10.26	23.02	9.35	Pasteurellaceae	0.29	2.96
Corynebacteriaceae	7.38	26.25	Corynebacteriaceae	4.00	0.38	0.79	Morganellaceae	1.07	1.40
Peptoniphilaceae	0.91	7.60	Aerococcaceae	3.68	1.75	0.01	Aerococcaceae	7.53	4.00
Selenomonadaceae	2.82	0.94					Selenomonadaceae	0.19	2.45
Acidaminococcaceae	5.35	2.24					Acidaminococcaceae	0.24	2.10
Succinivibrionaceae	5.33	2.00					Lactobacillaceae	0.55	1.61
Porphyromonadaceae	0.46	8.97							
Oscillospiraceae	4.60	1.77							

	·	× ×
	Cluster	Mean observed ASV
Fecal	Cluster 1	53.74±7.72
	Cluster 2	55.31±7.23
	Cluster 1	55 00+19 74

Supplementary Table S4: Mean number (±SD) of observed ASVs and the Shannon index of each dam for each cluster of each microbiota site. 

597	

	Cluster	Mean observed ASV	Mean Shannon index
Fecal	Cluster 1	53.74±7.72	3.01±0.14
	Cluster 2	55.31±7.23	2.82±0.27
	Cluster 1	55.00±19.74	2.24±0.84
Vaginal	Cluster 2	35.00±20.55	1.79±0.75
	Cluster 3	15.90±12.00	0.86±0.48
Colostrum	Cluster 1	78.88±16.00	2.58±0.45
	Cluster 2	90.37±16.81	2.73±0.70

#### 598 **6.** Abbreviations

- 599 **ASV:** Amplicon sequence variant
- 600 **DMM**: Dirichlet Multinomial Mixtures
- 601 **FS:** Fecal Score
- 602 **GIT:** Gastrointestinal tract
- 603 **GWG**: Gestational Weight Gain
- 604 **LBW:** Low birth weight
- 605 **GR**: Growth ratio

#### 606 **7. Declarations**

#### 607 7.1. Ethics approval

608 The animal study was reviewed and approved by the local ethical committee (Comité d'Éthique

609 en Expérimentation Animale, Science et Santé Animale n°115; reference number: SSA\_2020-

610 004, Toulouse, France). All applicable guidelines for the care and use of animals were followed.

611 Written informed consent was obtained from the kennel owner for his participation in this study.

612 7.2. Data availability

All the data generated or analyzed during this study are included in this published article [andits supplementary information files].

- 615 7.3. Conflict of interest
- 616 E. A. and A. R. were employed by the company Lallemand SAS.

All the authors declare that the research was conducted in the absence of any commercial orfinancial relationships that could be construed as potential conflicts of interest.

619 7.4. Funding

620 The study was co-founded by Occitania Region (La region Occitanie Pyrénées – Méditerranée,
621 France) and Lallemand SAS. The employees of Lallemand SAS have participated in the study
622 design, sample analyses and manuscript writing.

623 7.5. Author Contributions

S.C., H.M., E.A. and Q.G. designed the study and protocols. Q.G. and N.R. collected the samples. Q.G. performed the DNA extraction with the supervision of E.A. A.R. and Q.G. performed the DNA-based and statistical analyses. Q.G., S.C., H.M. and E.A. participated in the investigation and interpretation of the results. Q.G. and H.M. drafted the manuscript, designed the figures and wrote the final manuscript after reviewing. H.M., S.C. and E.A. reviewed and contributed to the writing of the final manuscript.

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