


Adipose tissue autophagy in obesity – Contributes to, or protects from, morbidity?

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Ben-Gurion University 

Be'er-Sheva, Israel



Sunrise, Lahav
Photo: Zvia Rudich

Understanding the intriguing phenotype of the insulin-sensitive obese

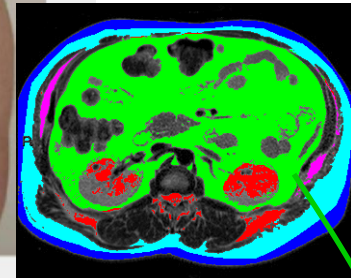
Insulin sensitive



Insulin resistant



BMI = ~45 Kg/m²



Hyperplasia

Hypertrophy

The insulin-sensitive obese:

- * Lower systemic inflammation: *Lower hsCRP, lower systemic IL-6*
- * Fat distribution: *less Visceral fat, more superficial SC fat*
- * Lower fat deposition in non-adipose tissue/adipocytes (ectopic fat = fatty liver)
- * Increased reliance on adipocyte hyperplasia
- * Less adipose tissue inflammation and fibrosis

Blüher: Am J Physiol – Endocrinol and Metab 299: E506, 2010;

Golan: Diabetes Care 35: 640, 2012

How does “stressed fat” become dysfunctional?

Insulin sensitive

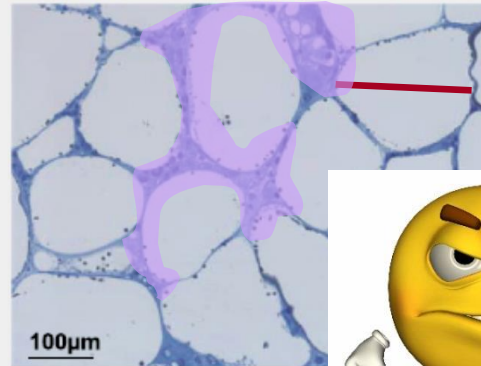
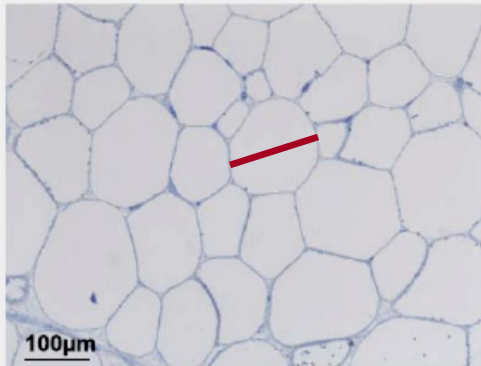


Insulin resistant



BMI = ~45 Kg/m²

**Omental
(visceral) fat**



“Angry fat”!!
- Stressed
- Dysfunctional



Stresses:

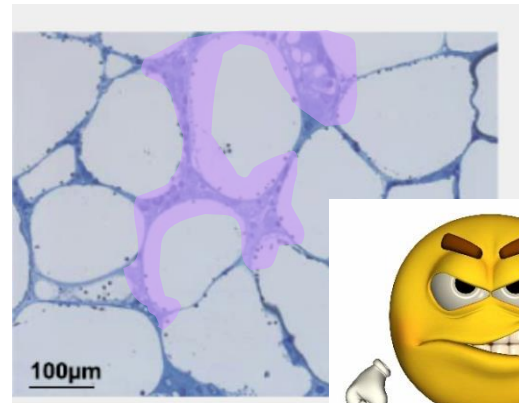
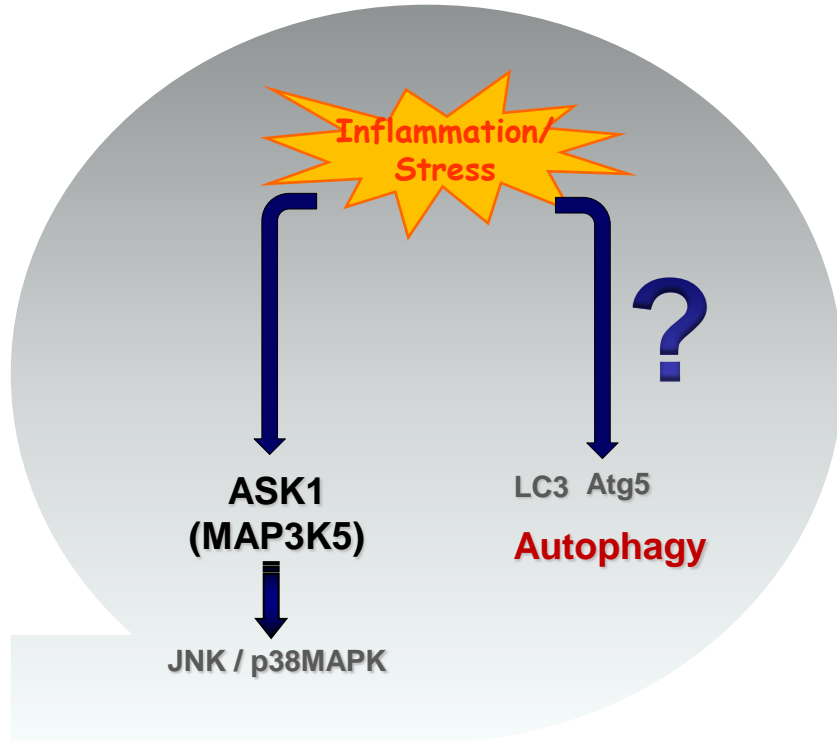
Oxidative *ER*
Inflammatory *Hypoxic*
Metabolic



Dysfunctional:

Dys-regulated lipolysis
Insulin resistant
Abnormal secreted products

Human adipose tissue stress response in obesity



"Angry fat"!!
- Stressed
- Dysfunctional

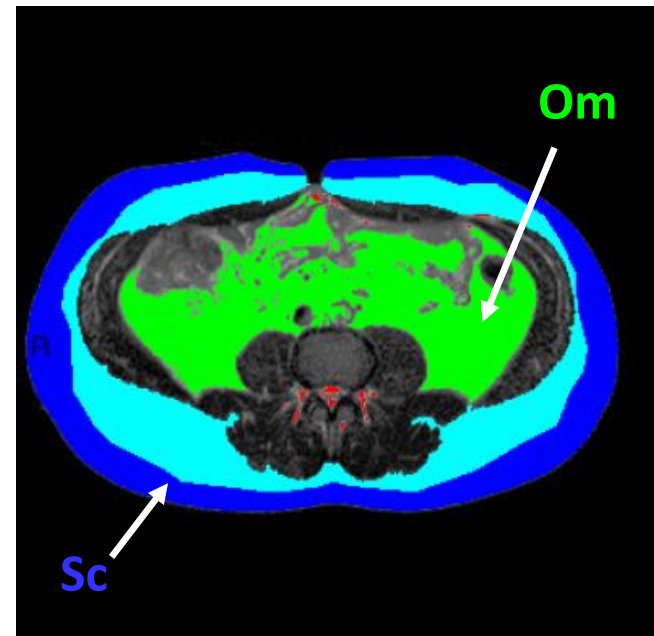
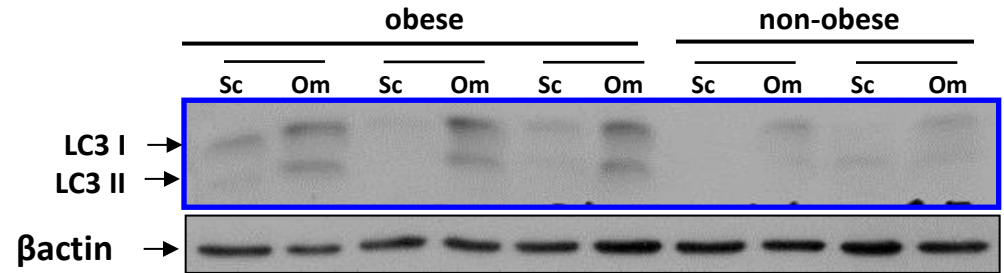
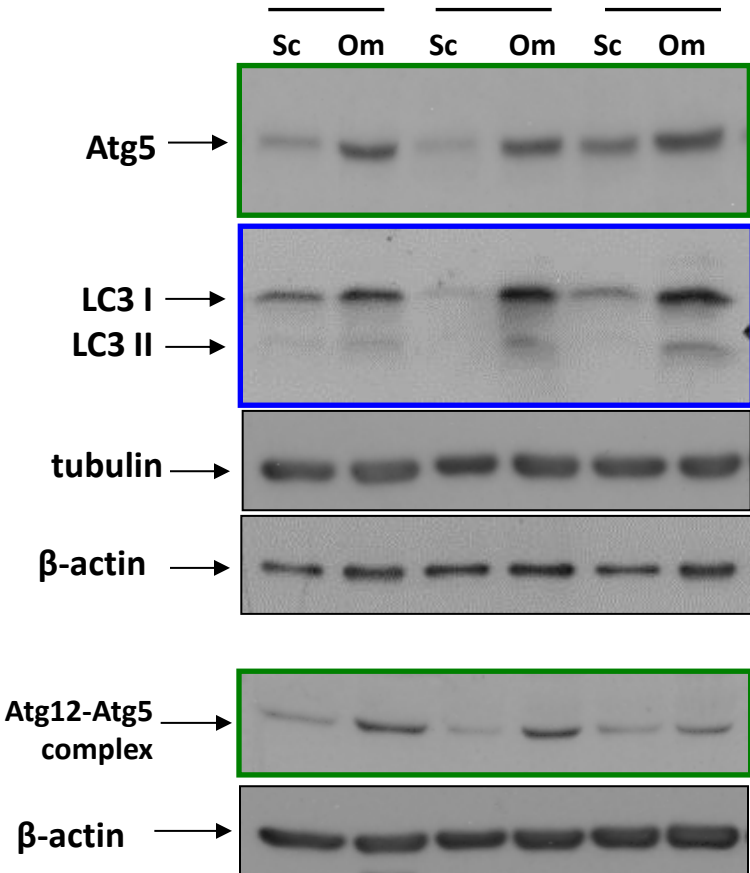
Endocrinology, 148:2955, 2007

Trends Endocrinol. Metab., 18: 291, 2007

J. Clin. Endocrinol. Metab., 94, 2507, 2009.

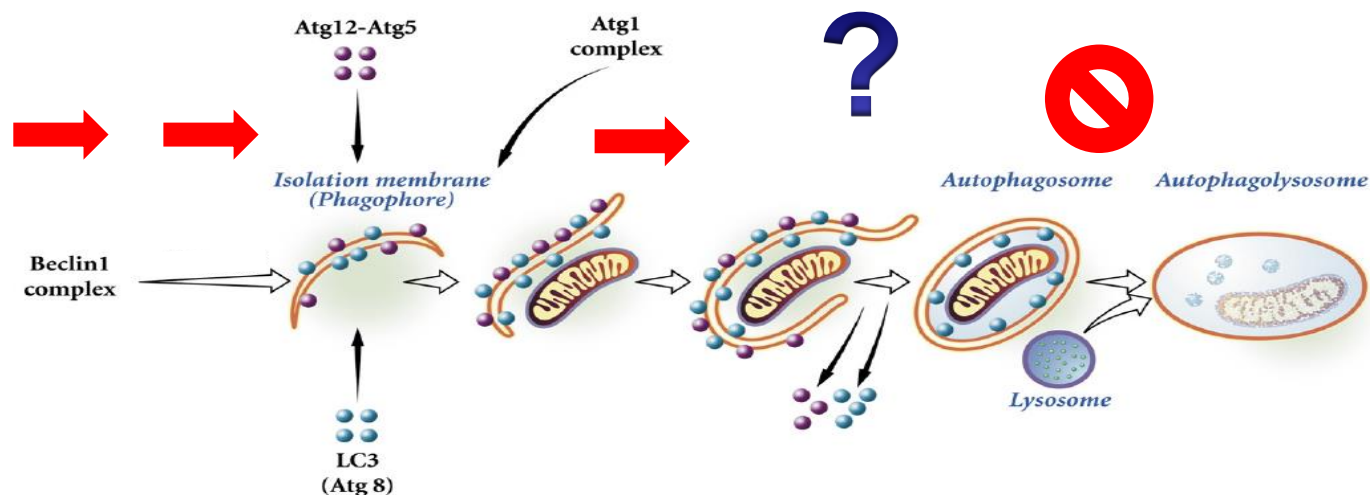
Increased protein levels of autophagy genes in omental (visceral) fat in obesity

Obese



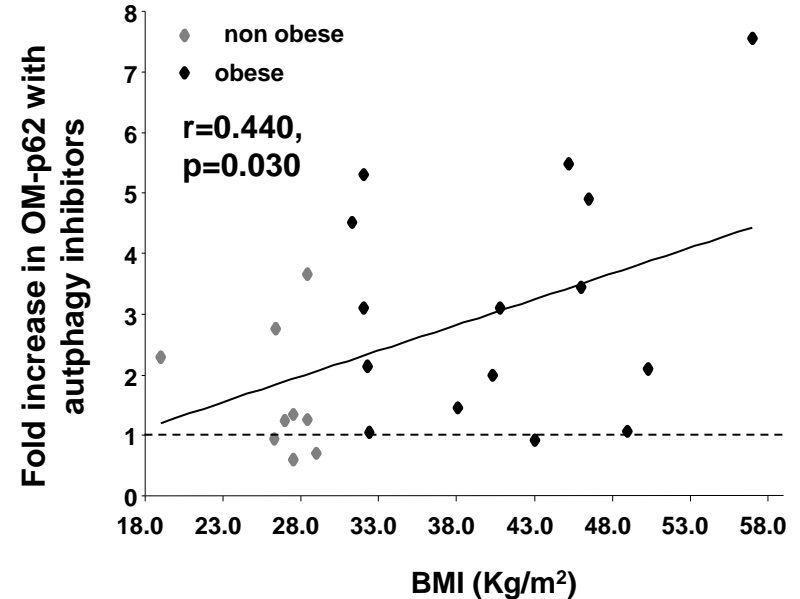
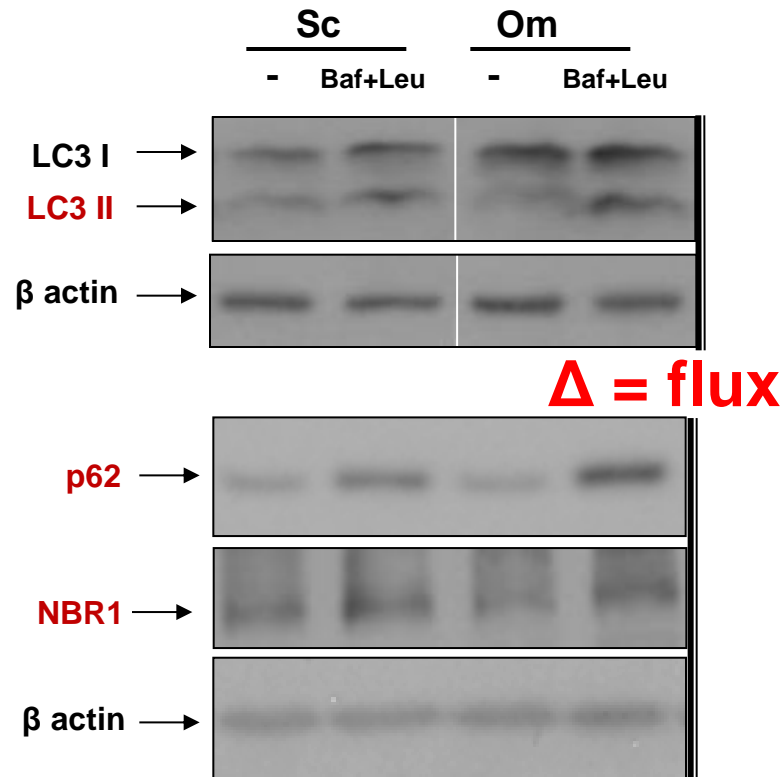
Questions:

1. Is autophagic FLUX up-regulated in adipose tissue in human obesity? Is this unique to adipose tissue?
2. What is the mechanism for autophagy activation in adipose tissue in obesity?
3. What might be the functional/ (pathophysiological) role of such activation? - Is adipose tissue autophagy “good” or “bad”?



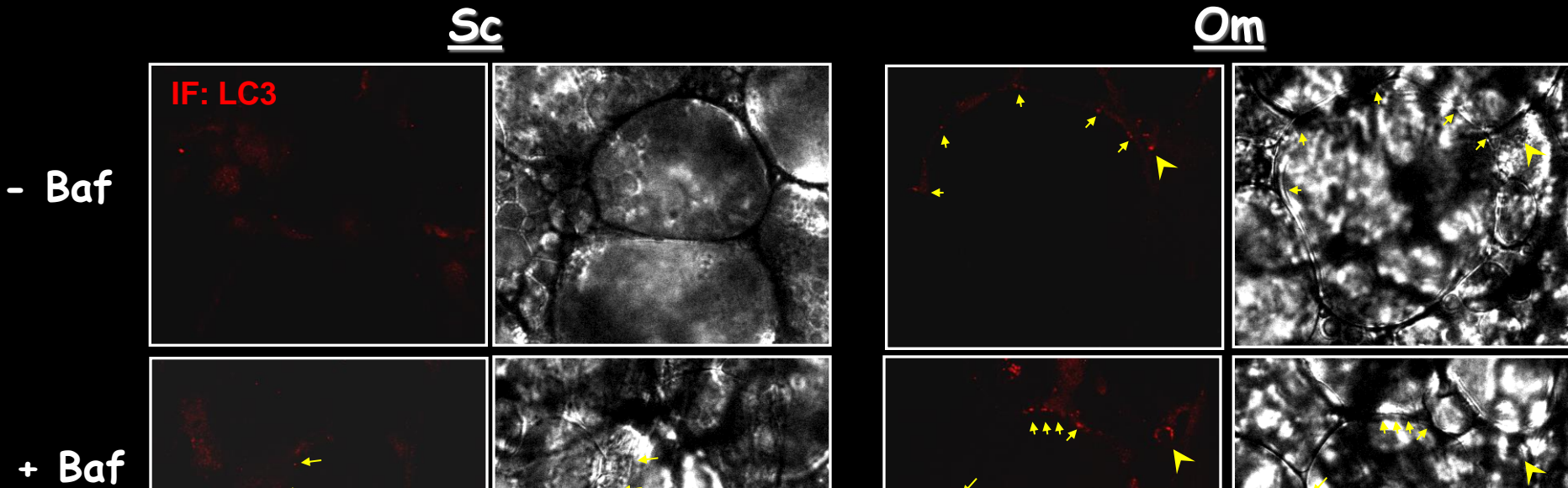
Autophagic flux is activated (1):

more increase in LC3II, p62 and NBR1 with inhibitors



Autophagic flux is activated (2):

Higher number of LC3-dots (autophagosomes) in human fat explants



Autophagy in obesity:

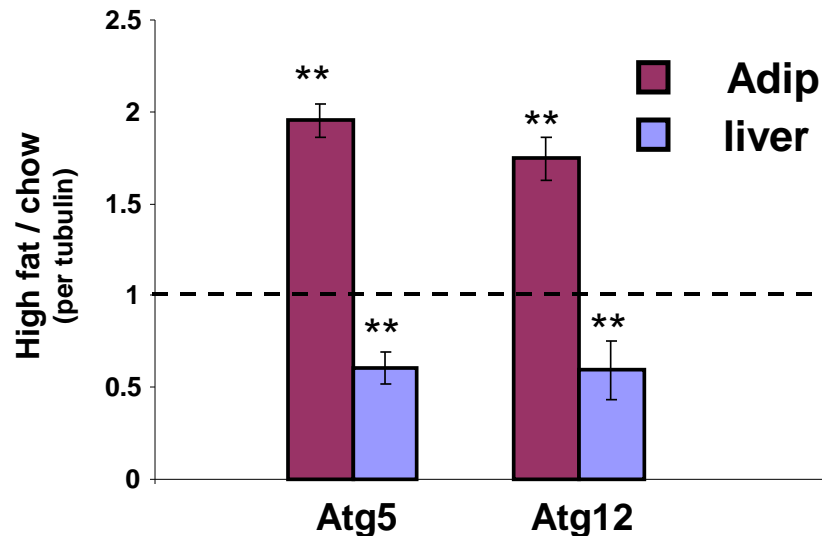
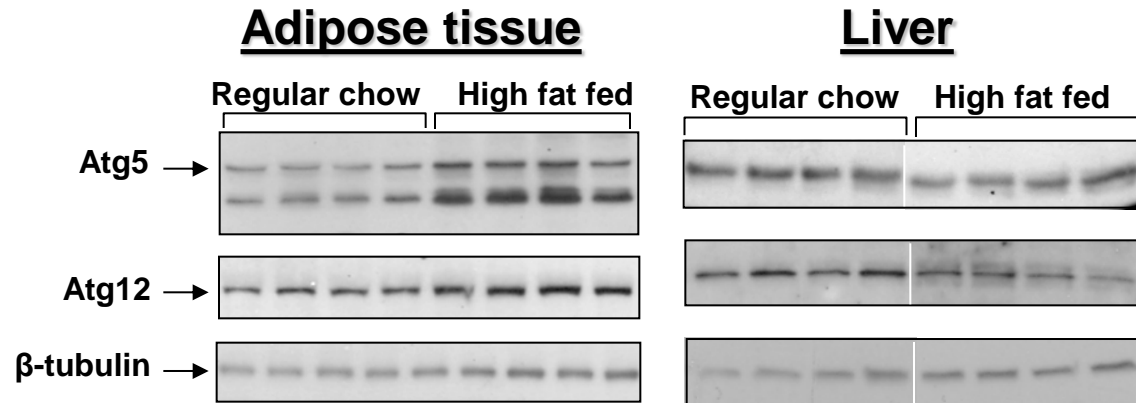
Enhanced in *human* adipose tissue, BUT Inhibited in *mouse* liver!

- Mouse Vs human difference?

- Adipose Vs liver difference?

Autophagy in liver and fat in obesity:

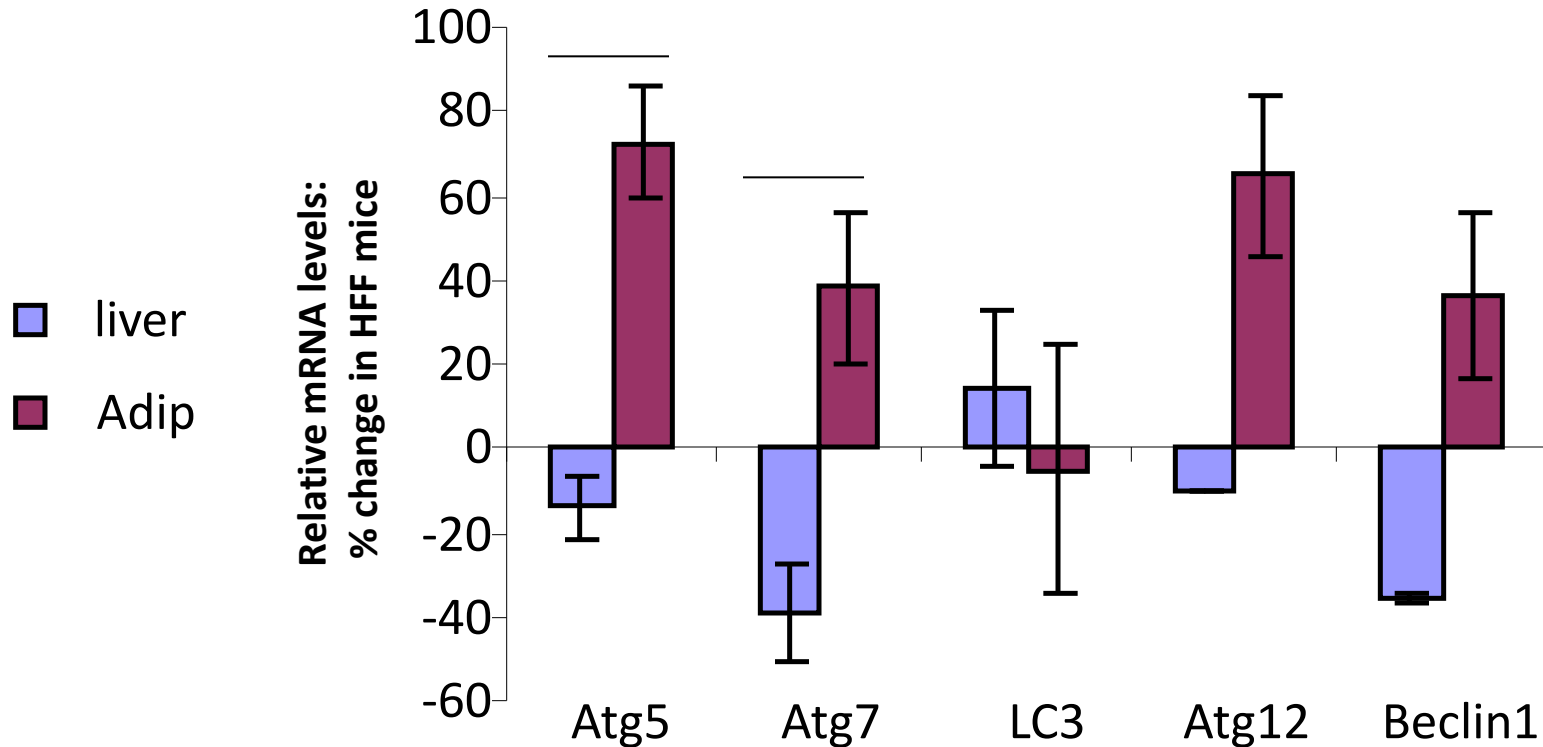
A tissue-difference, not a human-mouse difference



Autophagy in liver and fat in obesity:

A tissue-difference, not a human-mouse difference

Change in autophagy gene expression by 16w high fat feeding in mice



Questions:

1. Is autophagic FLUX up-regulated in adipose tissue in human obesity? Is this unique to adipose tissue?

YES (even if oppositely-regulated in other tissues!!):

- *Mol Med* 16: 235, 2010.
- *JCEM* 9: E268, 2011; *Obesity Facts* 5: 710, 2012.
- *Endocrinology* 153: 5866, 2012.
- Nunez et al, *Int. J. Obesity* 2013, in press, PMID:23478428

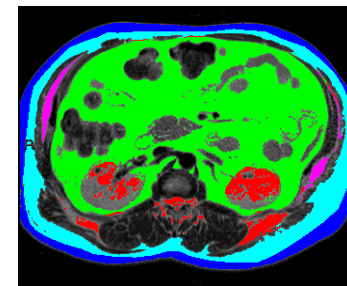
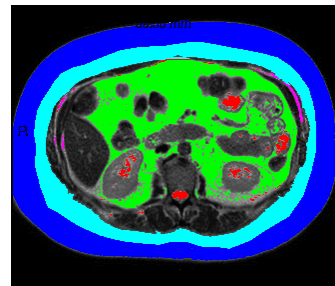
NO:

- Suppressed in mice: *BBRC* 417, 352, 2012

Questions:

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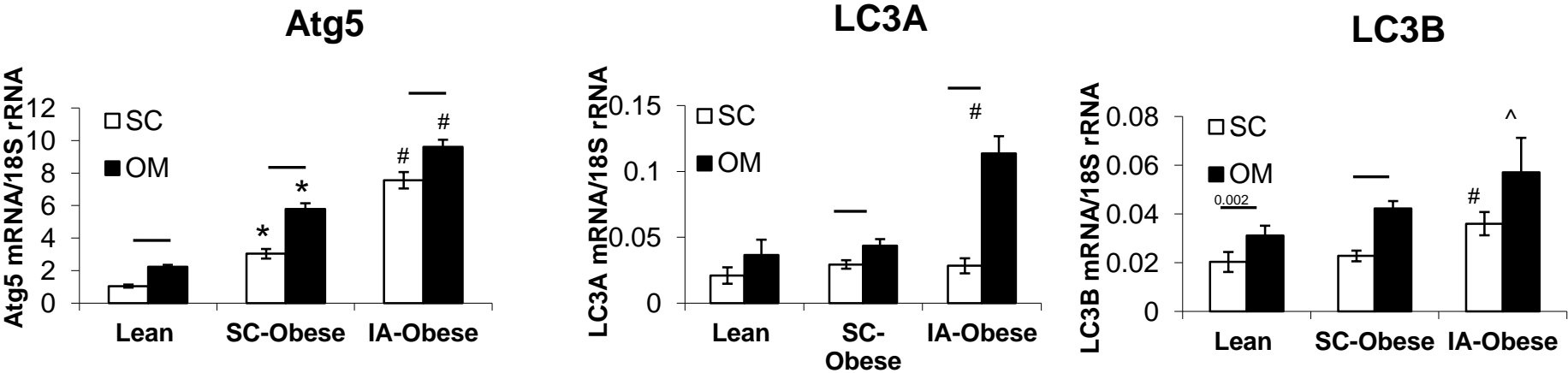
Is Atg's mRNA increased?



	Lean (n=66)	SC-Obese (n=88)	IA-Obese (n=42)
Age	50.3 ± 2.1	57.8 ± 1.5 *	59.1 ± 2.0 ^
Sex (% male)	48	47	53
BMI (Kg/m ²)	24.2 ± 0.2	34.6 ± 0.6 *	33.1 ± 0.8 ^
Fat area (cm ²)			
SC	55.3 ± 2.8	851.9 ± 32.3 *	416.1 ± 24.1 #
IA (visceral)	56.6 ± 2.8	165.7 ± 4.4 *	294.5 ± 8.5 #
Mean adipocyte diameter (µm)			
SC	94.2 ± 1.1	106.6 ± 0.9 *	112.9 ± 2.0 #
OM	85.0 ± 0.7	99.6 ± 0.7 *	104.5 ± 0.9 #
Fasting plasma glucose (mmol/l)	5.8 ± 0.1	5.7 ± 0.1	5.7 ± 0.1
Fasting plasma insulin (pmol/l)	57.5 ± 12.0	175.7 ± 13.3 *	193.8 ± 16.6 ^
GIR (µmol/Kg/min)	82.3 ± 3.6	59.0 ± 2.7 *	37.1 ± 3.2 #
HbA1C (%)	5.5 ± 0.1	5.7 ± 0.1 *	5.9 ± 0.1 #

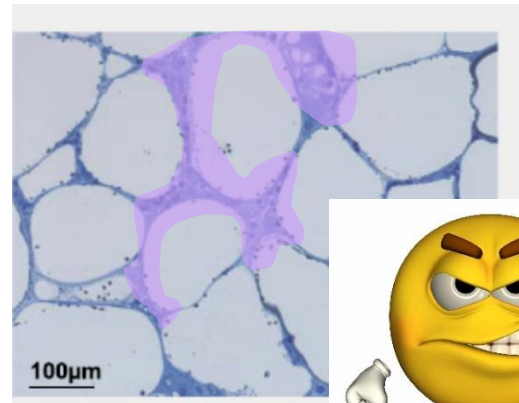
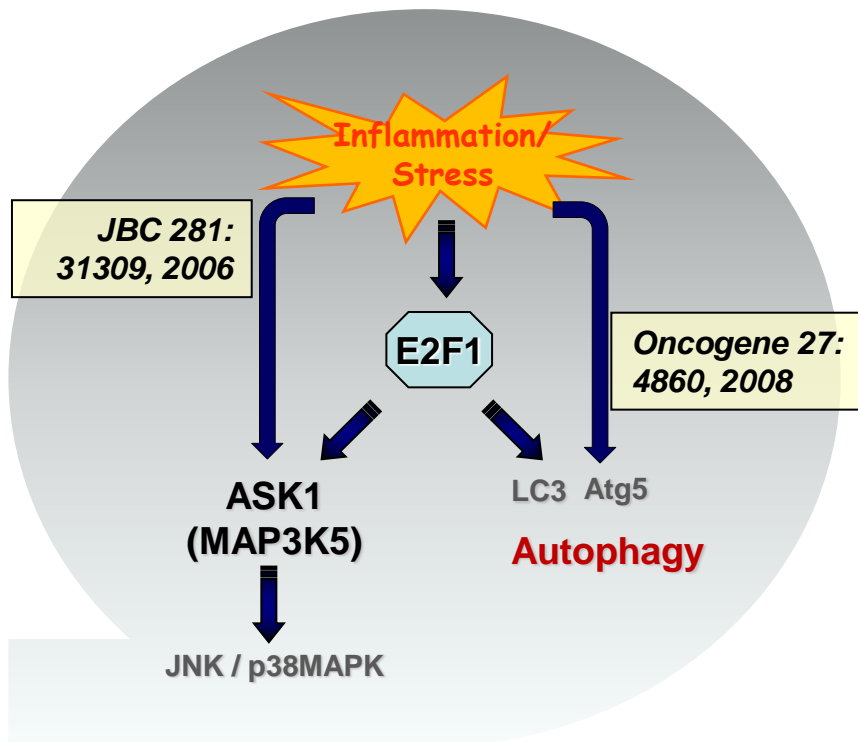
Matthias Blüher, University of Leipzig, Germany

mRNA levels of key autophagy genes are increased in human OM fat in obesity



Is autophagy regulated transcriptionally??

Human adipose tissue stress response in obesity – *inspiration from literature:*



“Angry fat”!!
- Stressed
- Dysfunctional

Endocrinology, 148:2955, 2007

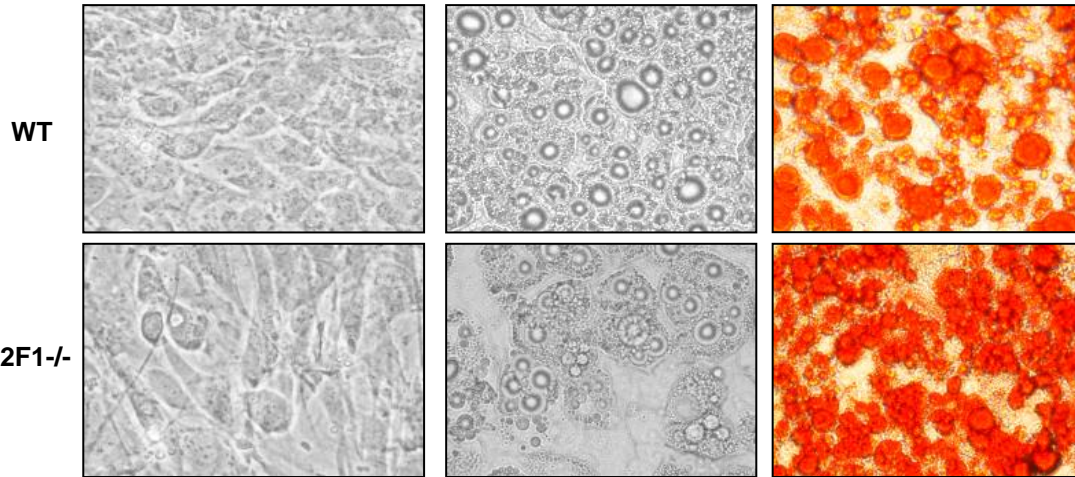
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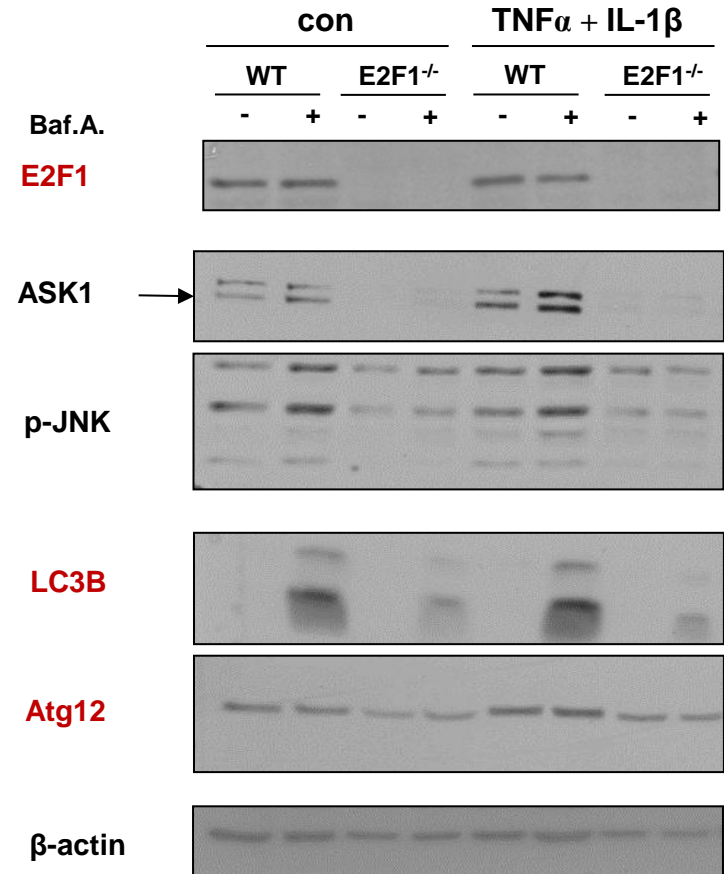
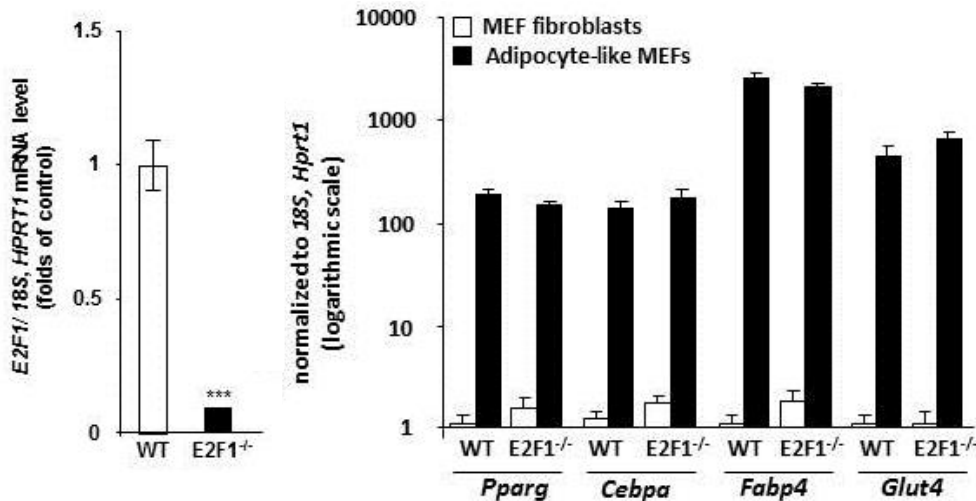
J. Clin. Endocrinol. Metab., 96, E268, 2011.

Transcriptional-based regulation of autophagy: Loss-of-function approach

MEF (fibroblasts) MEF (adipocyte-like cells) Oil-red O (adipocyte-like cells)

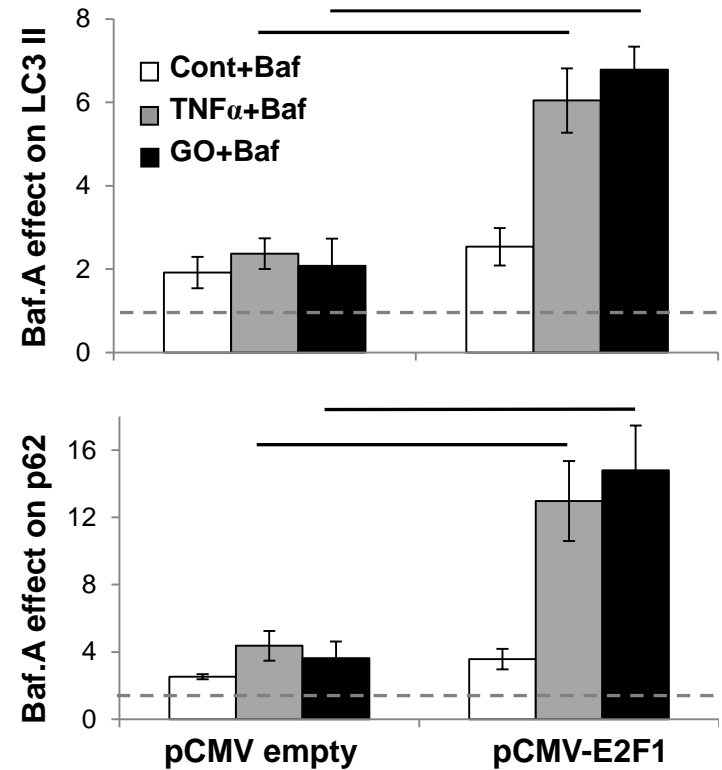
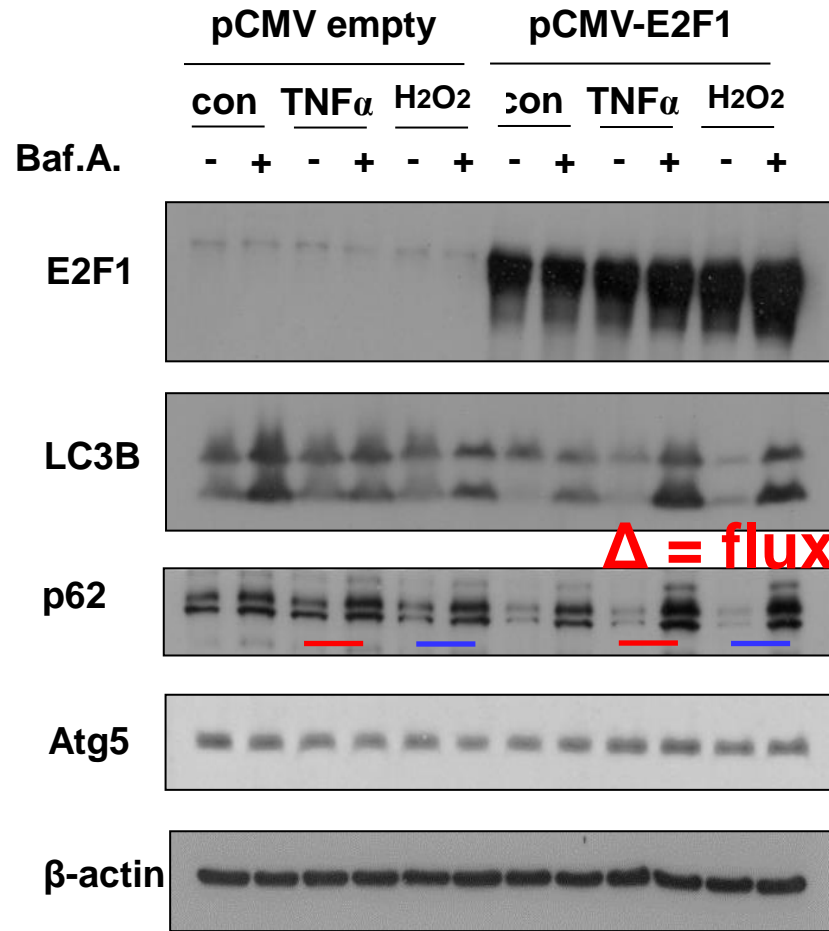


MEFs: Dr. Gustavo Leone, Ohio State U, Columbus



Yulia Haim, unpublished data

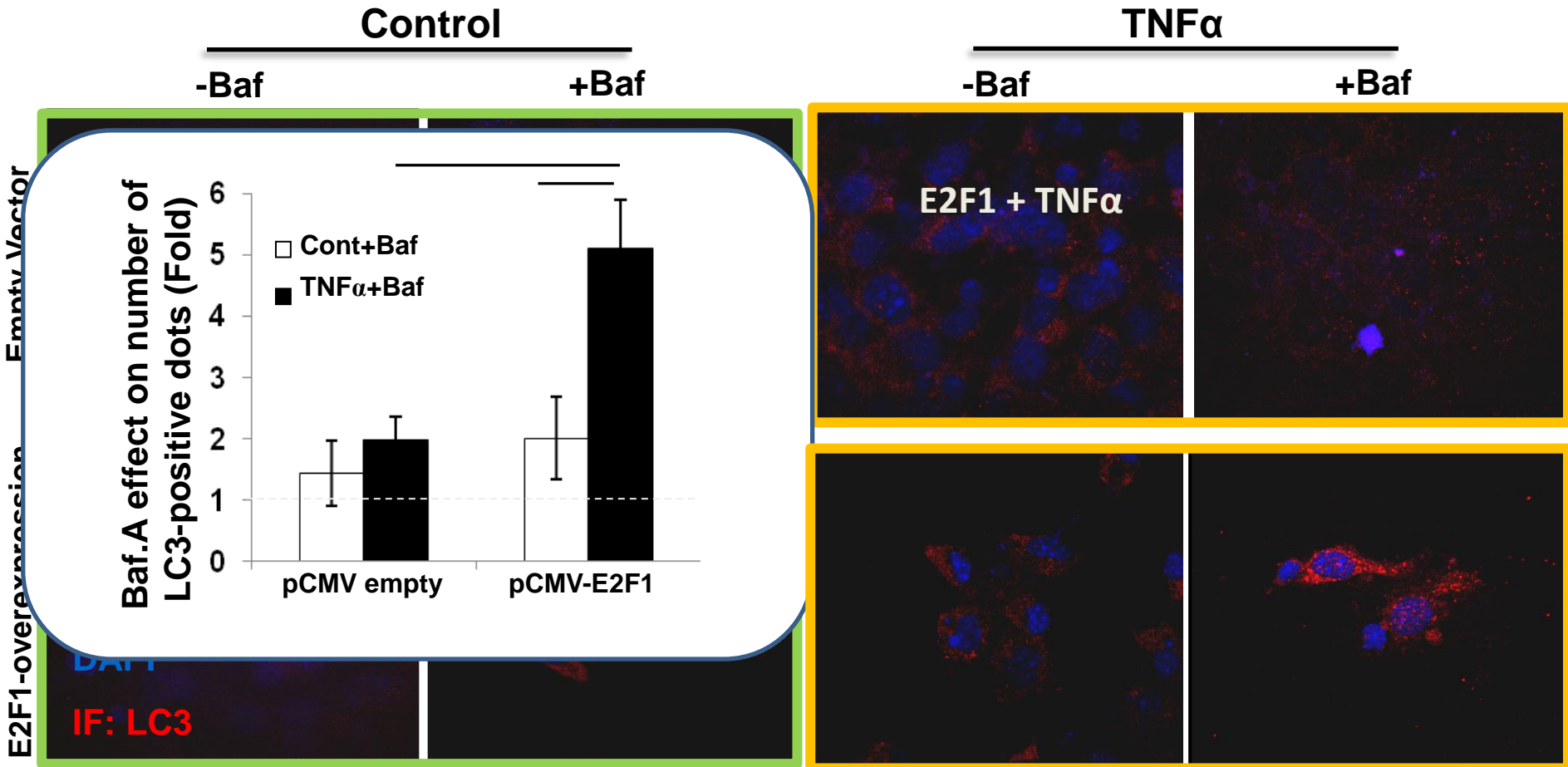
Transcriptional-based regulation of autophagy: gain-of-function approach



HEK 293 cells

Julia Kovsan, unpublished data

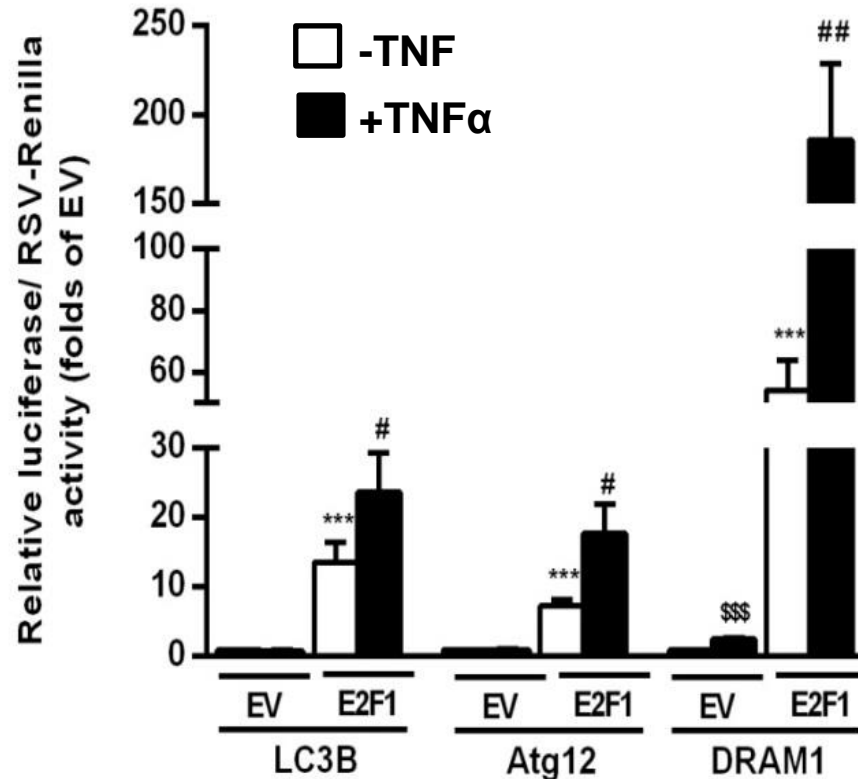
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HEK 293 cells

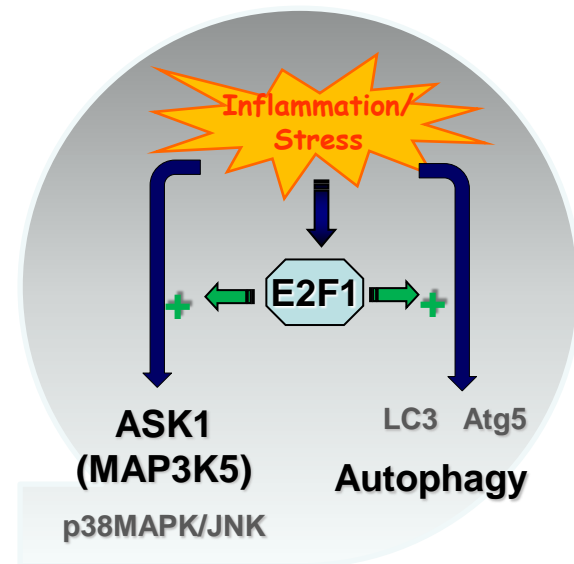
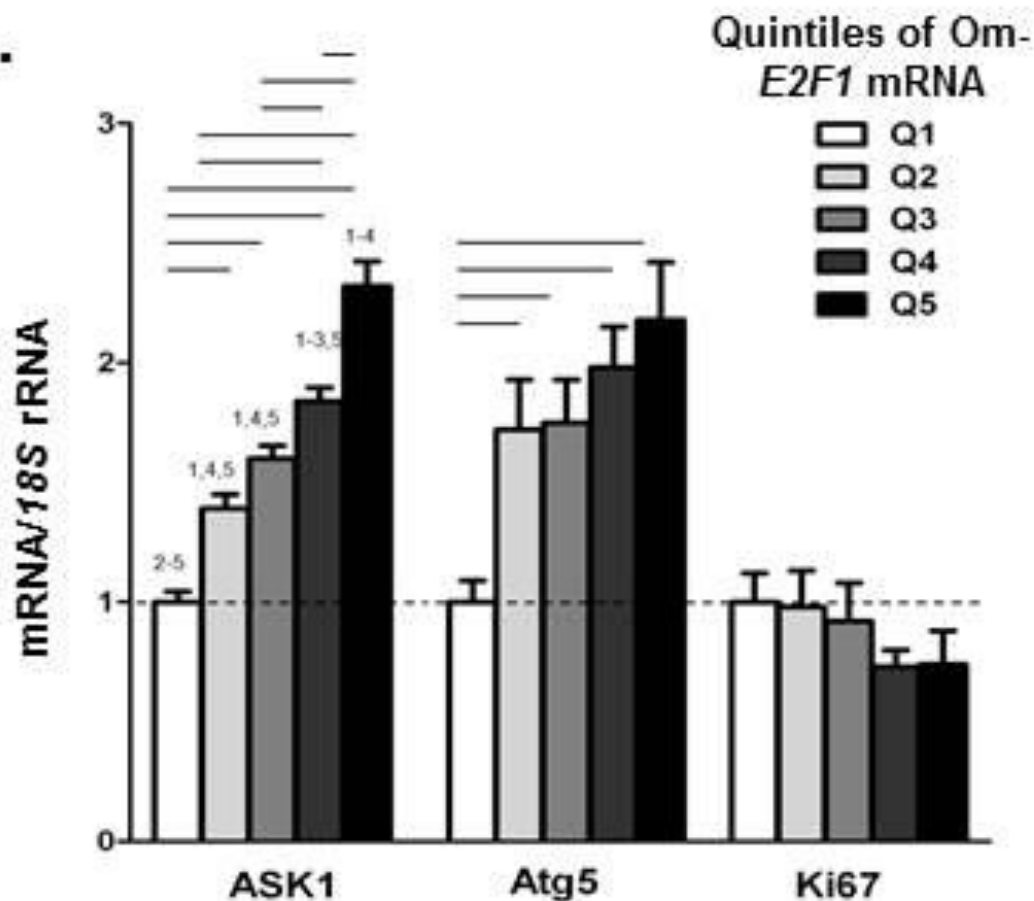
Julia Kovsan, unpublished data

Sensitization to TNF α of several autophagy gene promoters by E2F1 over-expression: Dual luciferase assay



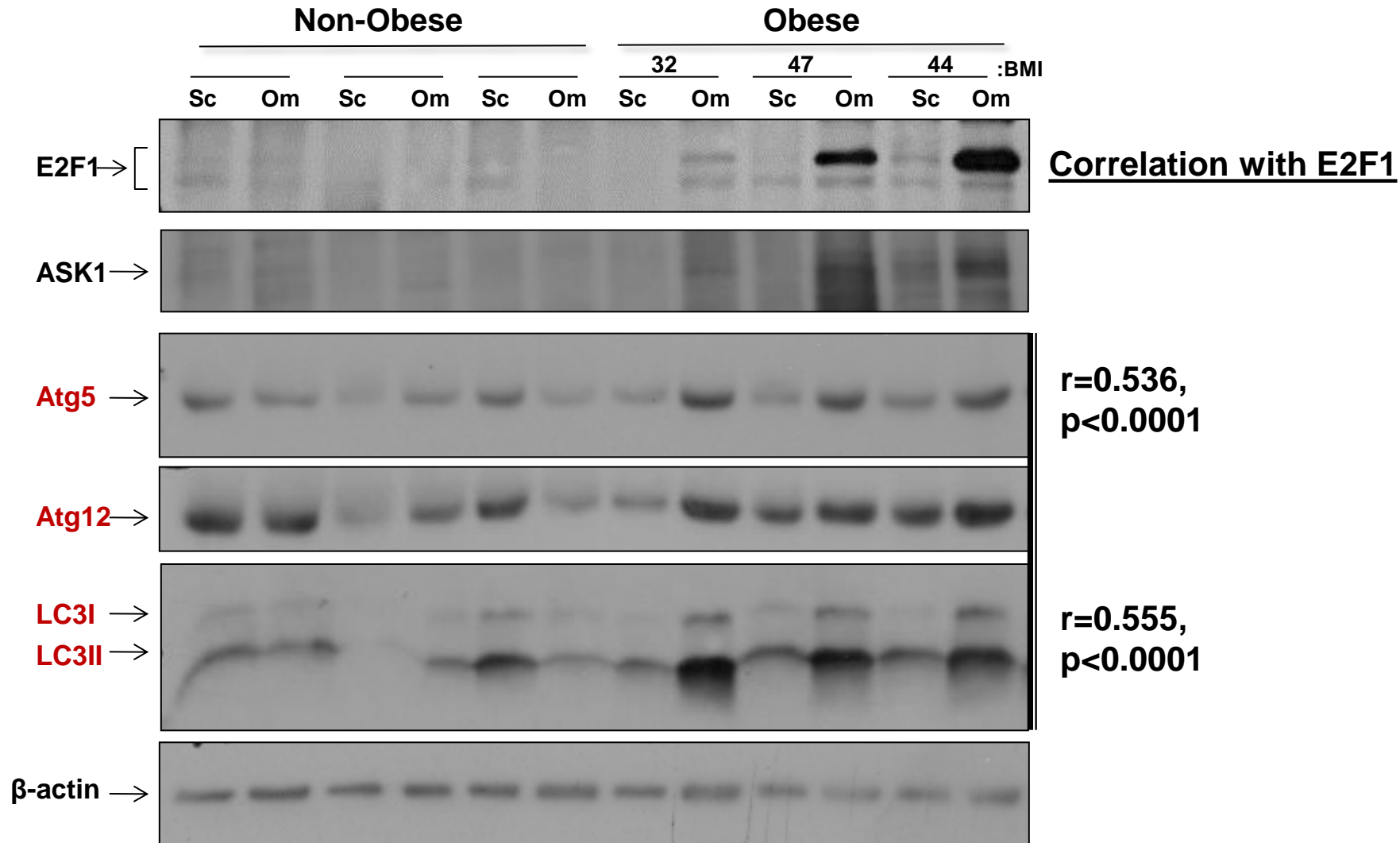
Plasmids: Kind gift from **Eun-Kyeong Jo**, Chungnam National University School of Medicine, Daejeon, South Korea;; **Kenichi Yoshida**, Meiji University, Kanagawa, Japan.

Higher expression of *E2F1* in omental (visceral) fat associates with *ASK1* and *Atg5* expression (but not Ki67)



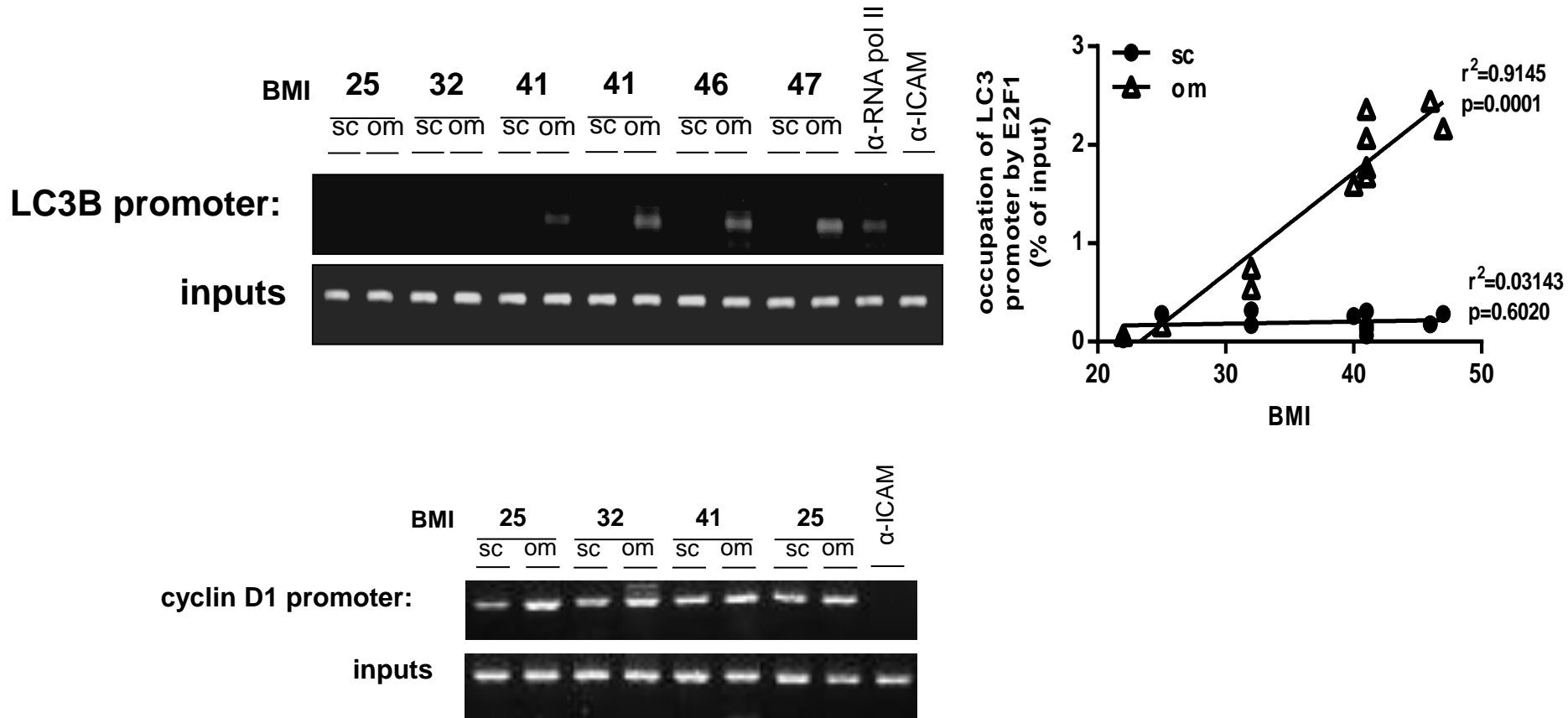
Human samples n=500
Matthias Blüher, Leipzig

Protein expression of E2F1 *vis-à-vis* ASK1 and autophagy genes in human adipose tissue



A chromatin immunoprecipitation (ChIP) protocol for use in whole human adipose tissue

Yulia Haim,¹ Tanya Tarnovski,¹ Dana Bashari,² and Assaf Rudich^{1,3}



Questions:

2. What is the mechanism for autophagy/autophagy gene expression up-regulation in adipose tissue in obesity?

Our suggestion:

- Transcriptionally-based;
- Direct, and/or by sensitizing the tissue to stress

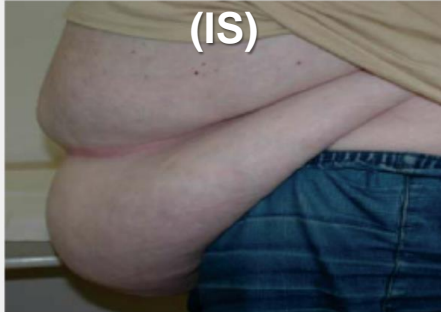
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Adipose tissue autophagy early in the course of obesity-associated cardio-metabolic morbidity

Insulin sensitive

(IS)

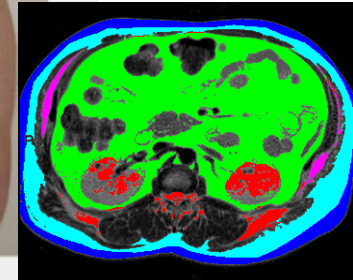


Insulin resistant

(IR)



BMI = ~45 Kg/m²



BMI and age-matched, n=30 pairs

	Insulin sensitive obese (n=30)	Insulin resistant obese (n=30)
Age	44.6 ± 0.4	44.9 ± 0.4
Sex (% male)	33	37
BMI (Kg/m ²)	45.1 ± 0.2	45.2 ± 0.2
Fasting plasma glucose (mmol/l)	5.2 ± 0.0	5.7 ± 0.1*
Fasting plasma insulin	29.8 ± 2.6	104.7 ± 5.6*
GIR (μmol/Kg/min)	89.4 ± 1.7	33.0 ± 2.5*
HbA1C (%)	5.3 ± 0.0	5.7 ± 0.1*

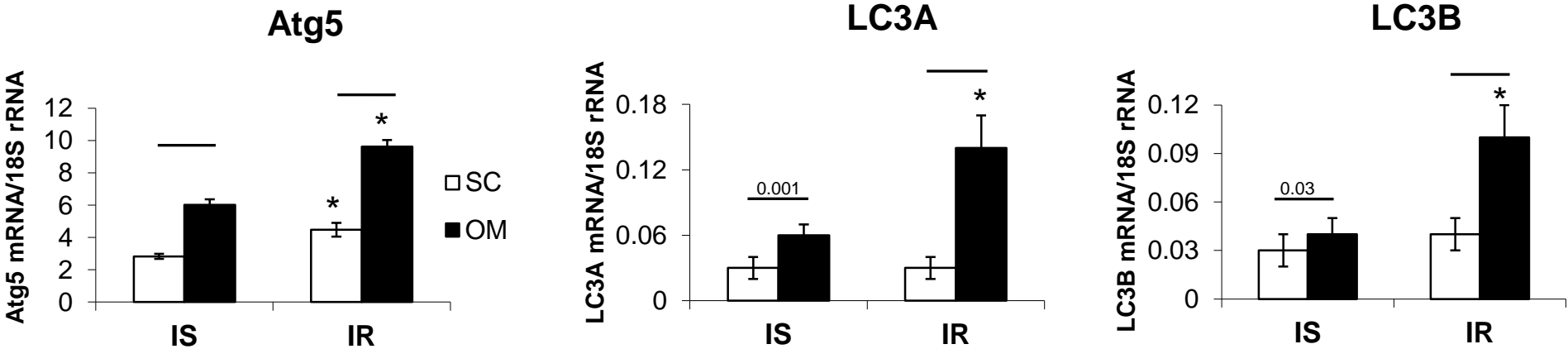
- Normoglycemic
- No CV disease

Obese +/- Insulin resistant

GIR – glucose infusion rate;

J Clin. Endocrinol. Metab. 96: E268, 2011

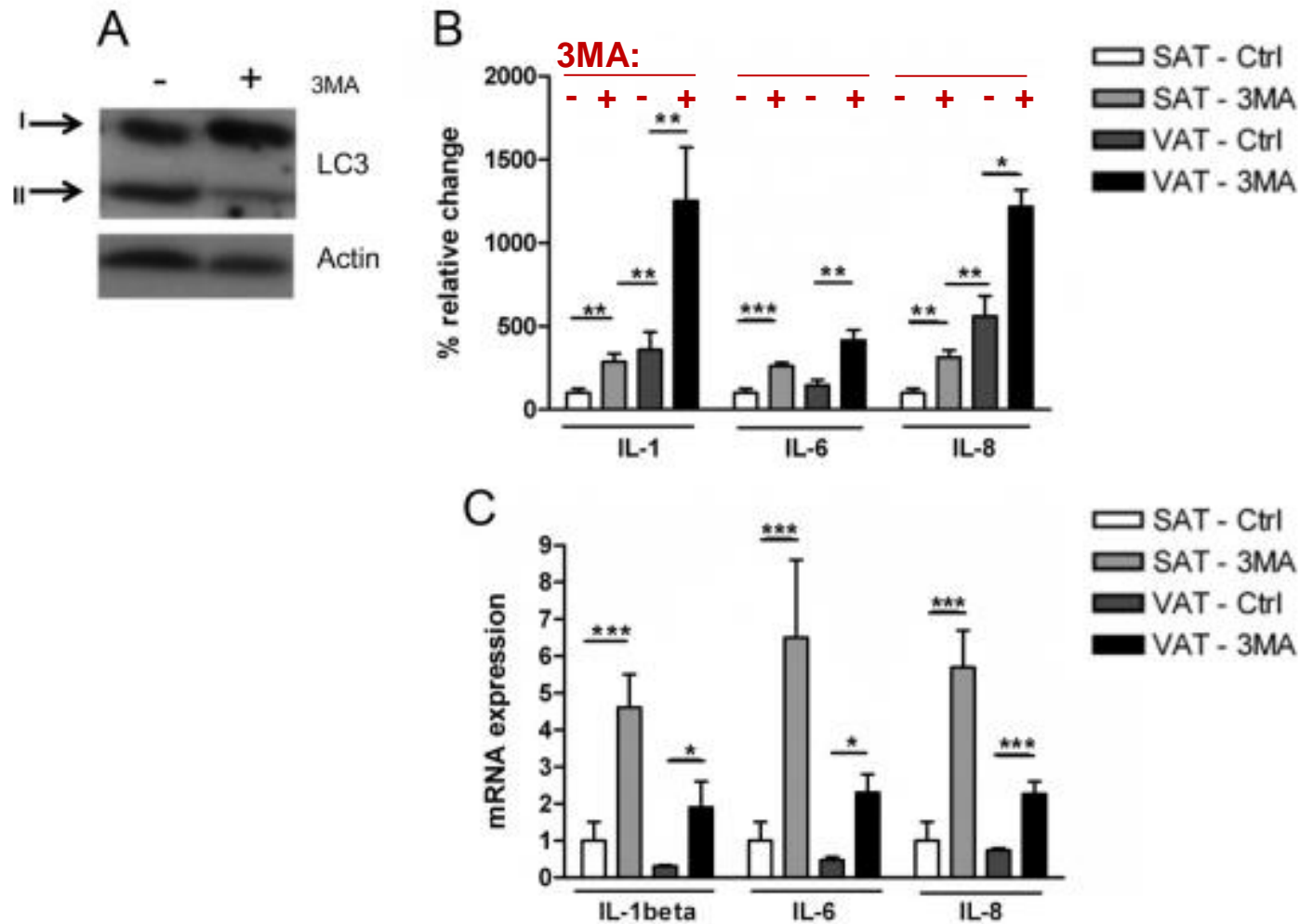
Omental fat autophagy activation co-appears with insulin resistance, but precedes obesity-associated morbidity!



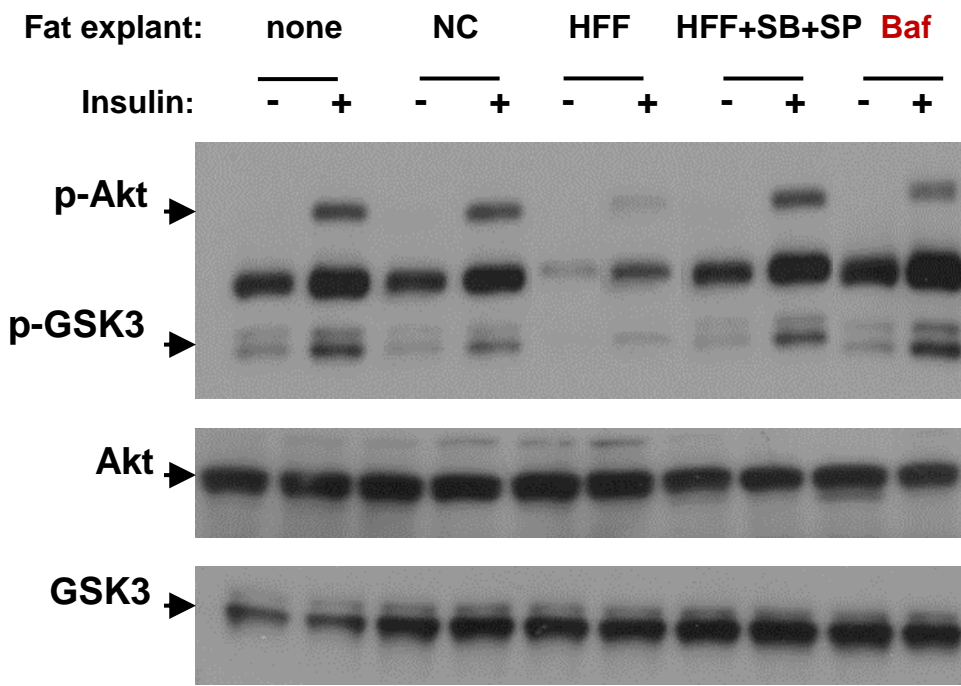
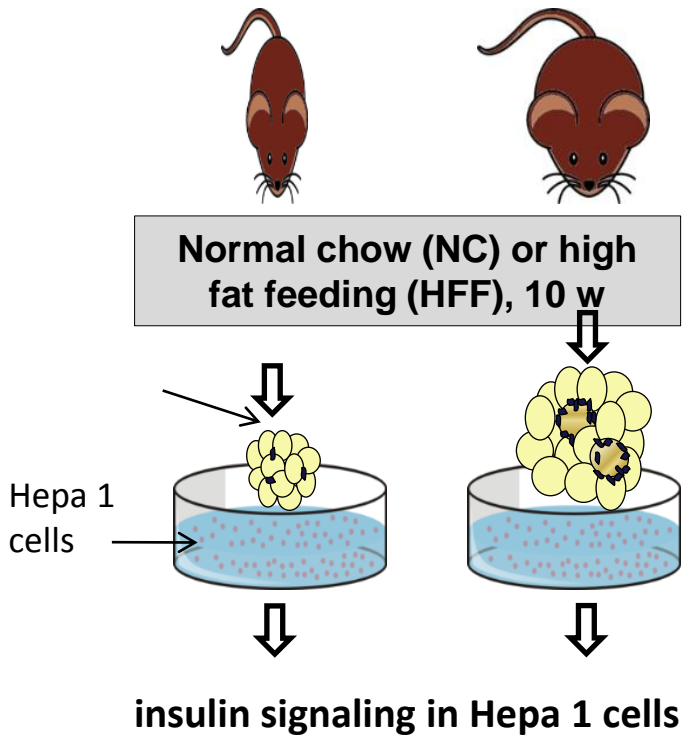
But when it is activated – does it act to limit disease progression, or does it contribute to pathogenesis?

Activated autophagy is potentially protective:

3MA-mediated autophagy inhibition in human fat explants enhances pro-inflammatory cytokines secretion/expression



Activated autophagy is potentially detrimental: Inhibiting adipose tissue autophagy prevents hepatocyte insulin resistance in a fat-hepatocyte co-culture system



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The “jury is still out”:

- Autophagy may limit further adipose inflammation. But,
- May be involved in adipocyte insulin resistance and dysfunctional fat-liver crosstalk!

Thanks to:

BGU

- Nava Bashan

-- Iris Shai

- Yulia Haim

- Tanya Tarnovscki

- Noa Slutsky

- Ori Nov

- Ilana Harman-Boehm

- Boris Kirshtein

- Julia Kovsan

BIU

- Doron Ginsberg

WIS

- Zevi Elazar

- Michael Walker

Leipzig, Germany

- Matthias Blüher

- Nora Kloting

Columbus, OH

- Gustavo Leone

Zurich, Switzerland

- Daniel Konrad

- Stephan Wuest

Daejeon, Korea

- Eun-Kyeong Jo

GIF, BSF, ISF, Israeli ministry of Health

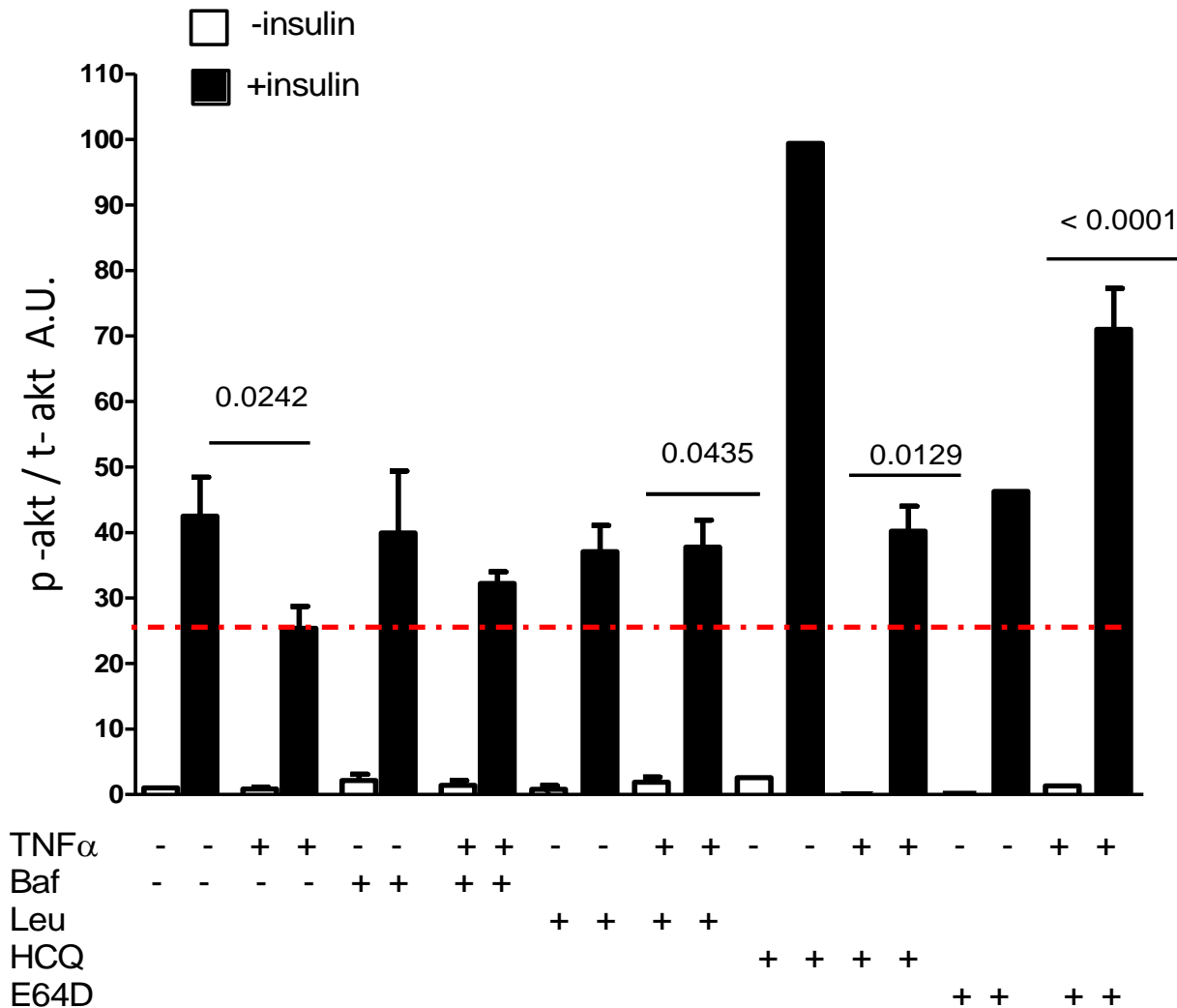
... and thanks for your attention!

Sde-Boker, Negev

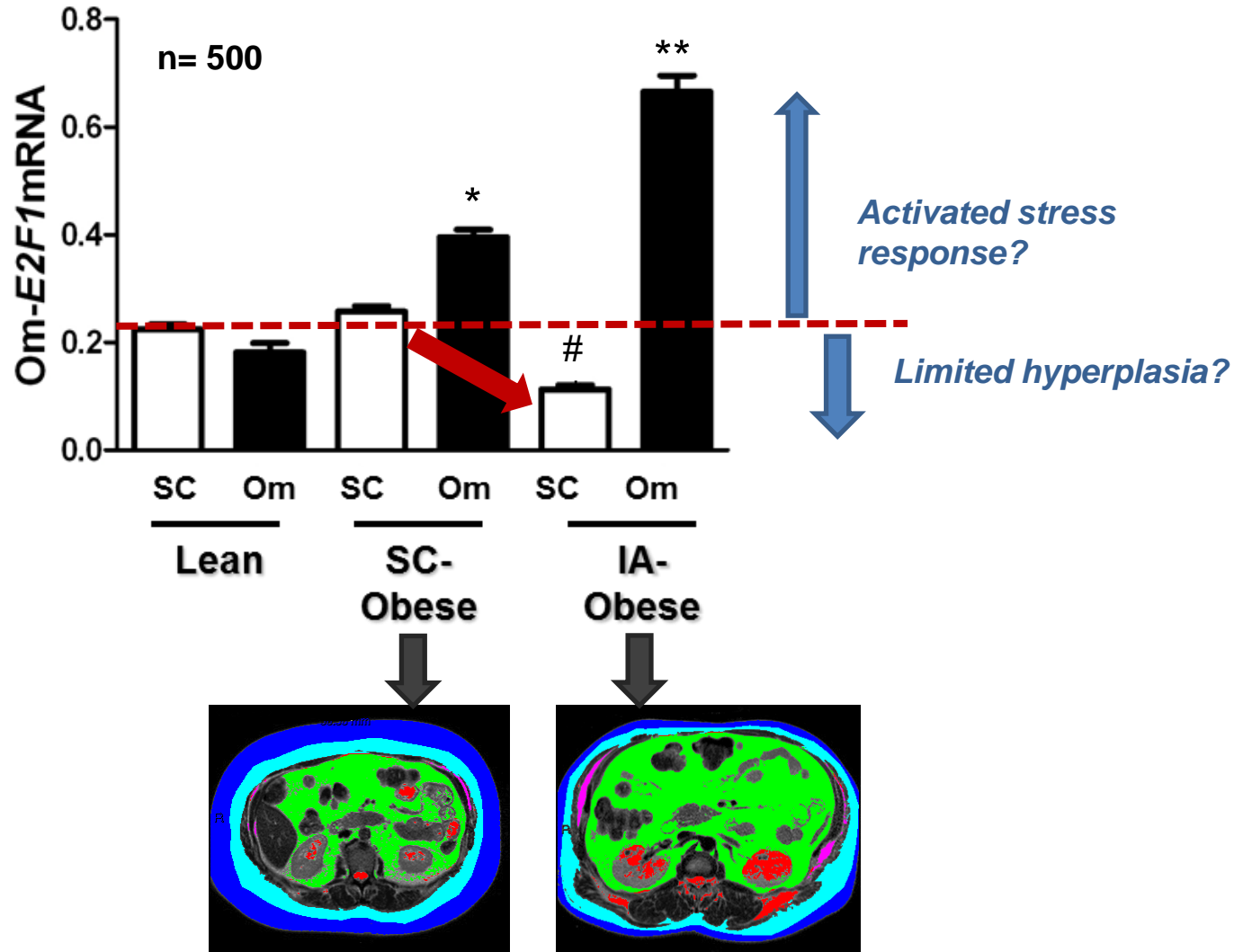
(Photo: Zvia Rudich)



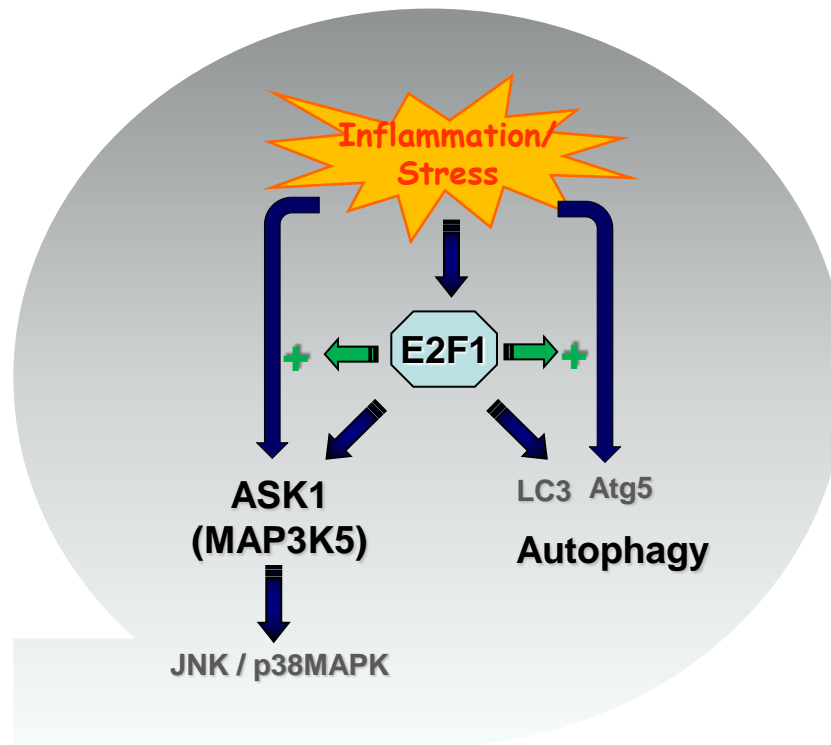
Inhibition of autophago-lysosome function protects against adipocyte TNF-induced insulin resistance.



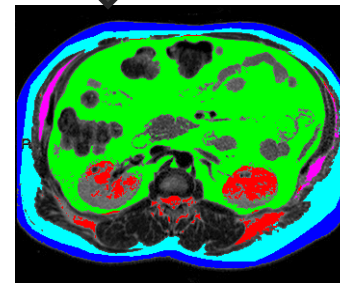
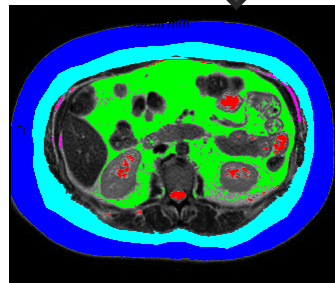
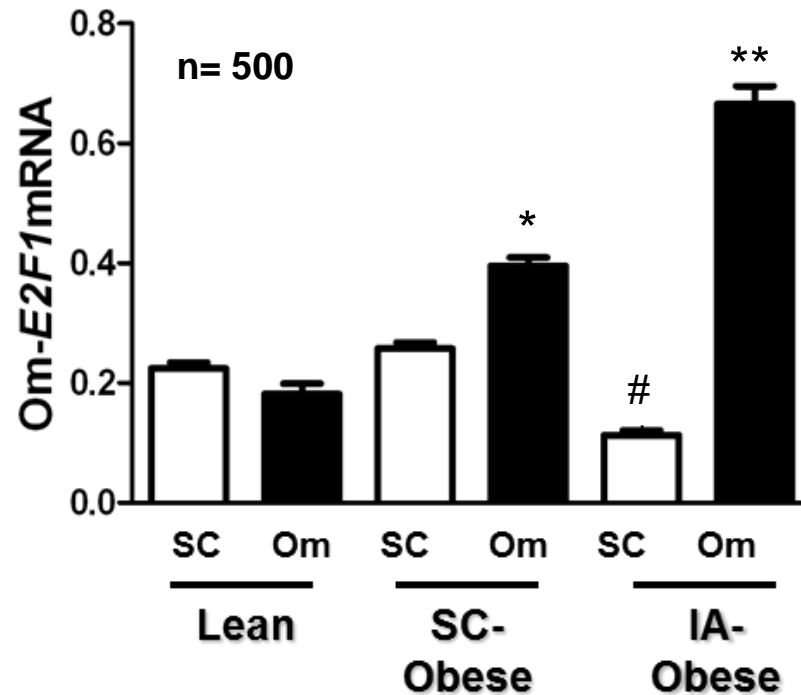
E2F1 mRNA in subcutaneous (SC) and omental (Om) human adipose tissue



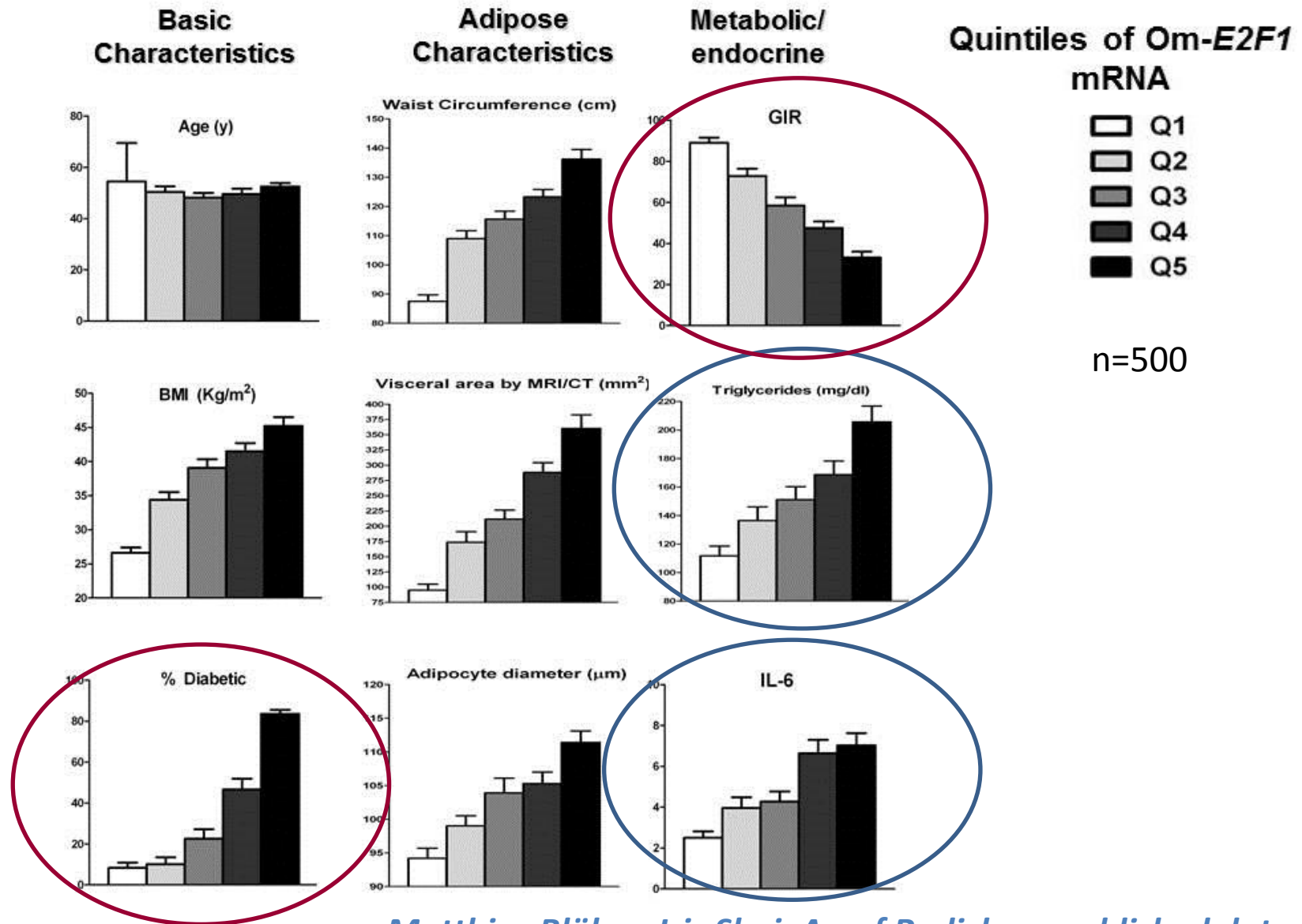
Loss of function approach to prove causality



***E2F1* mRNA in subcutaneous (SC) and omental (Om) human adipose tissue**



Higher expression of E2F1 in omental (visceral) fat associates with a more morbid obese phenotype

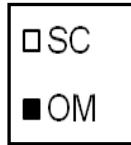


Summary & possible conclusions:

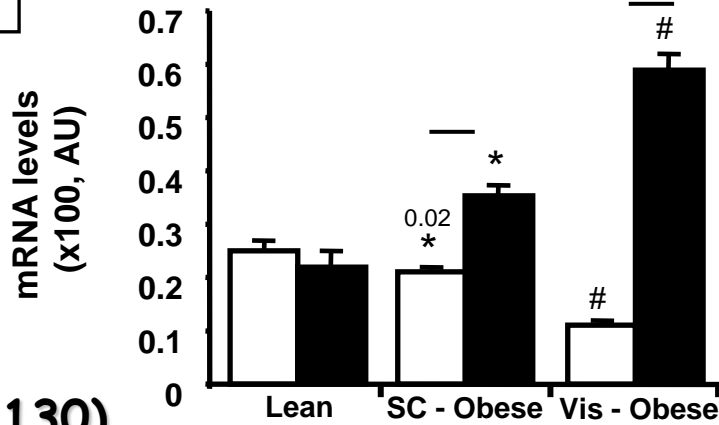
1. “Angry fat” exhibits increased E2F1 expression, at both the mRNA and protein levels.
2. In human adipose tissue, E2F1 correlates with ASK1 and autophagy genes, and exhibits BMI- correlated increased binding to their promoters.
3. In cells, increased E2F1 expression:
 - i. induces ASK1 and Atg’s expression;
 - ii. plays a permissive/sensitizing role for their induction by inflammatory and oxidative stress signals.
4. In the absence of E2F1, adipocyte-like MEFs exhibit decreased basal and inflammation-induced ASK1 and Autophagy.

→ E2F1 may be a co-regulator of two arms of the adipose stress signaling cascade in obesity, activating and sensitizing them to inflammatory and oxidative stress.

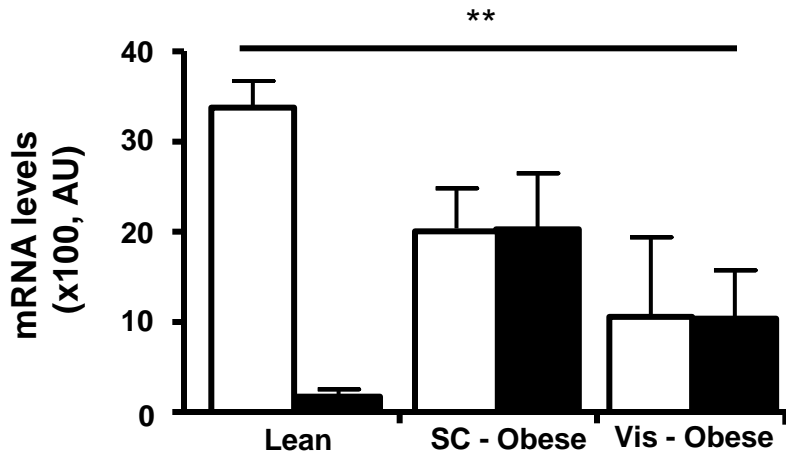
What about other E2Fs?



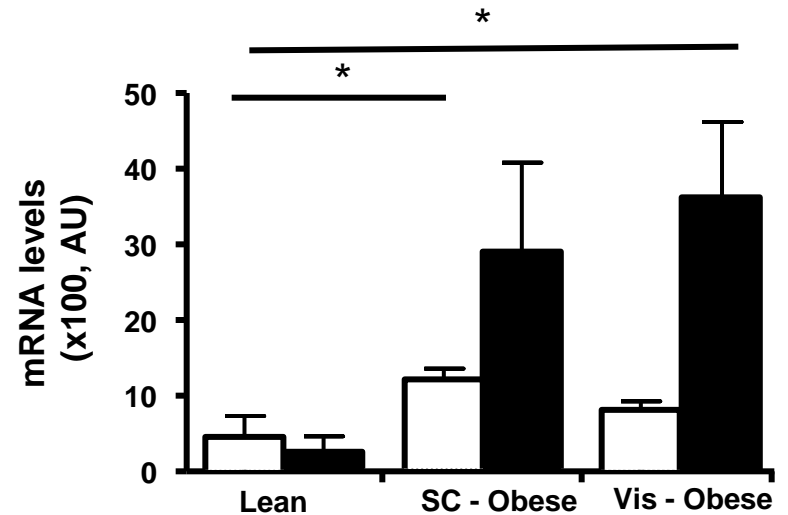
E2F1 (n=196)



E2F3 (n=130)

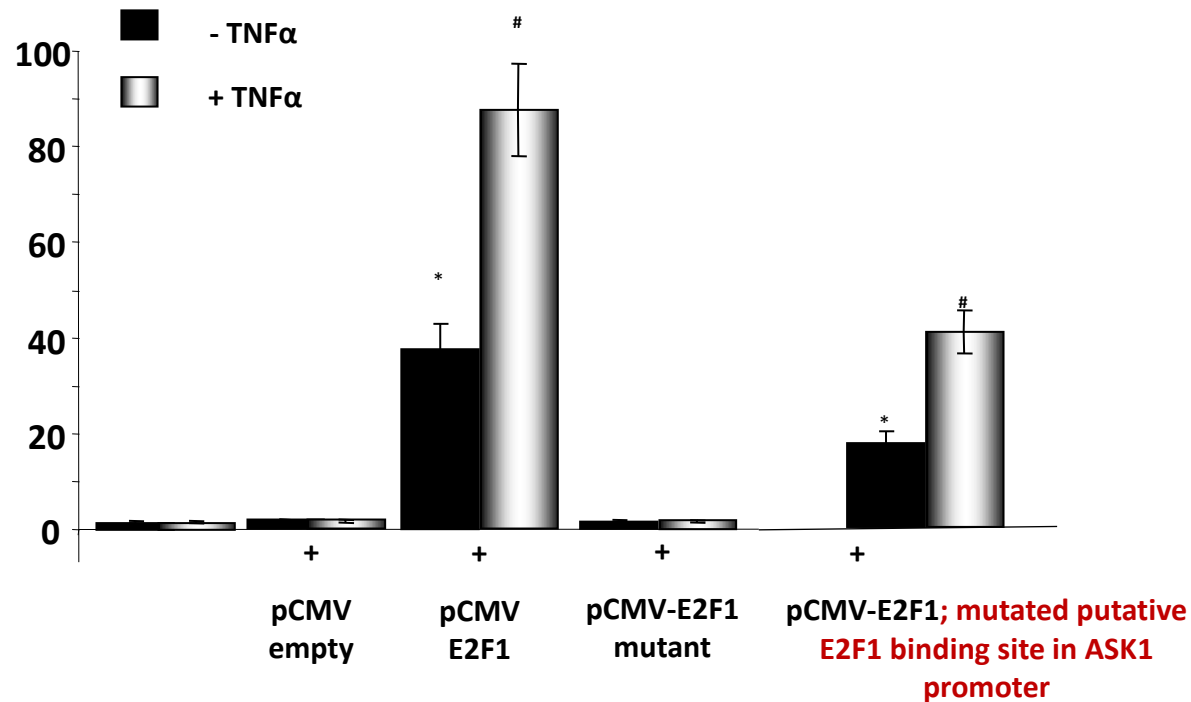


E2F4 (n=130)



E2F1 over-expression:

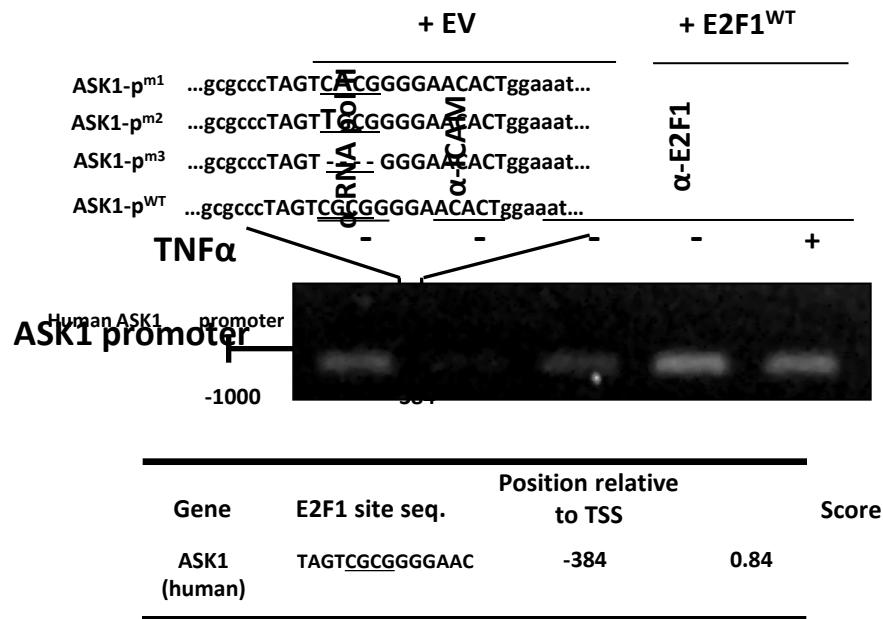
- i. activates the human ASK1 promoter,
- ii is permissive for inflammation-induced promoter activation.



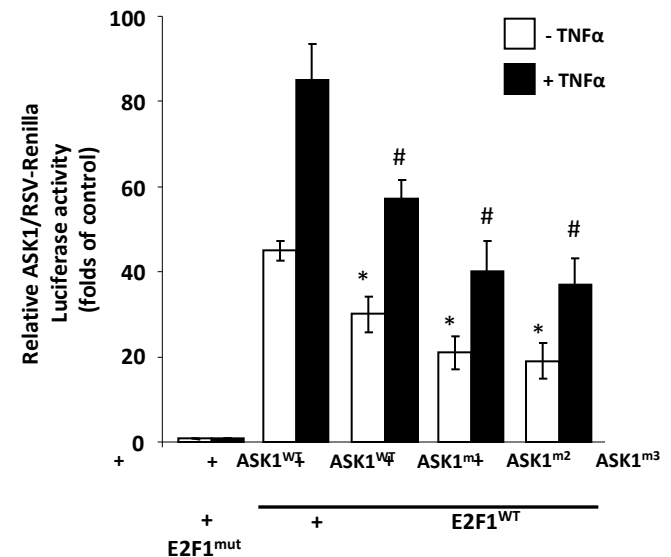
ASK1 promoter activity in HEK293 cells

E2F1 binding site in the ASK1 promoter includes a -384 bp site

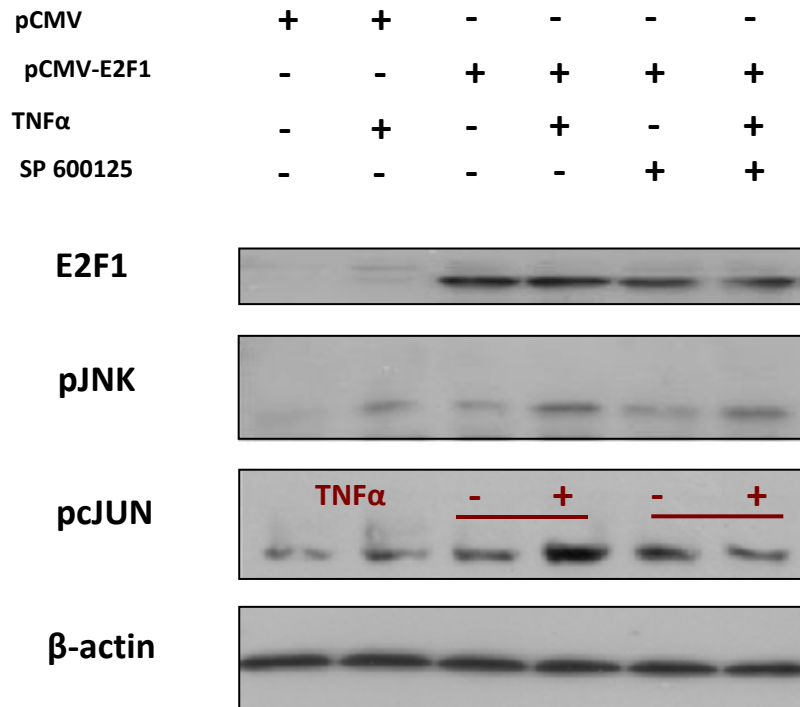
Mutational binding to the ASK1 promoter (ChIP) sequence in the hASK1 promoter



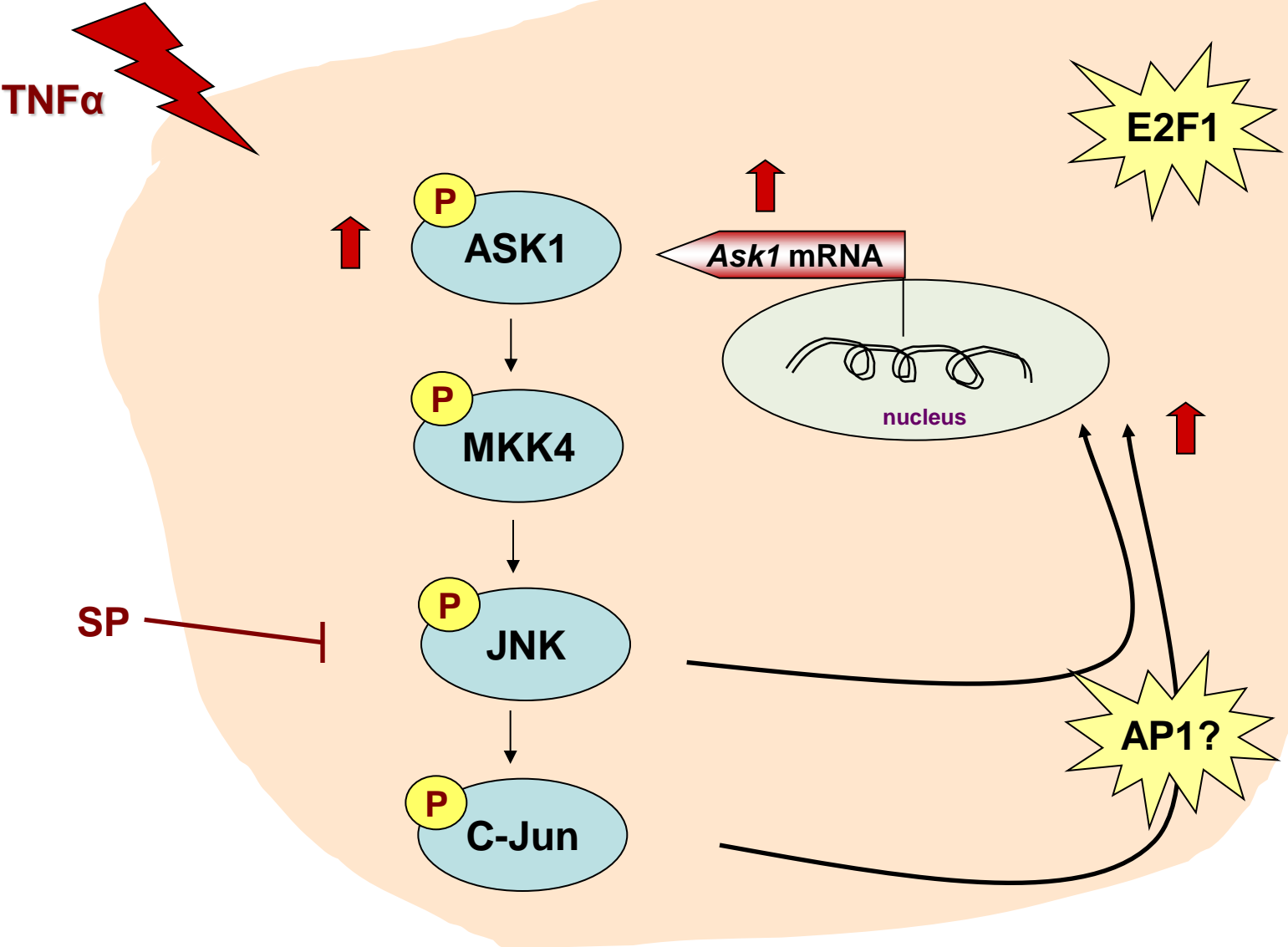
ASK1 promoter activity assay



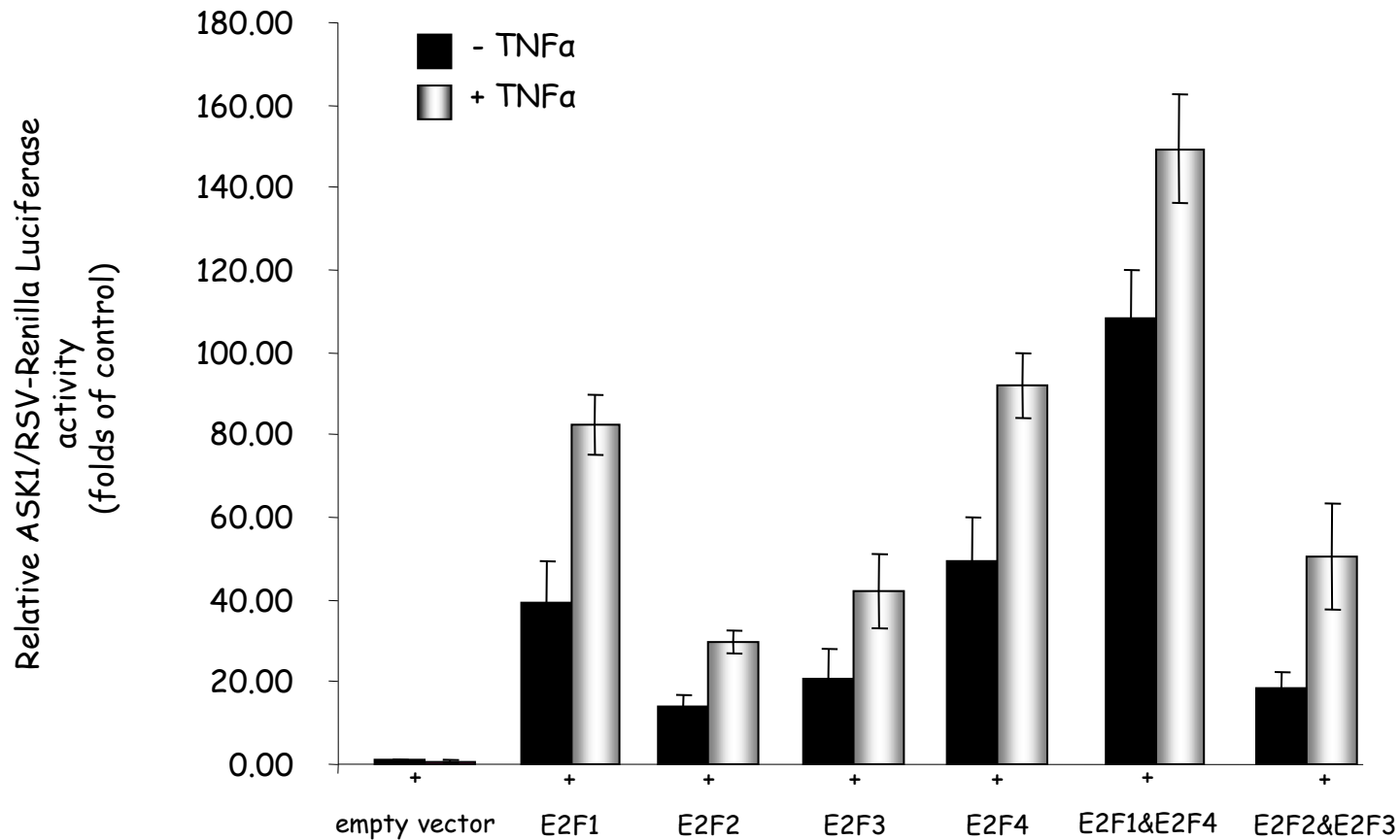
JNK-phosphorylation based input on ASK1 promoter activity



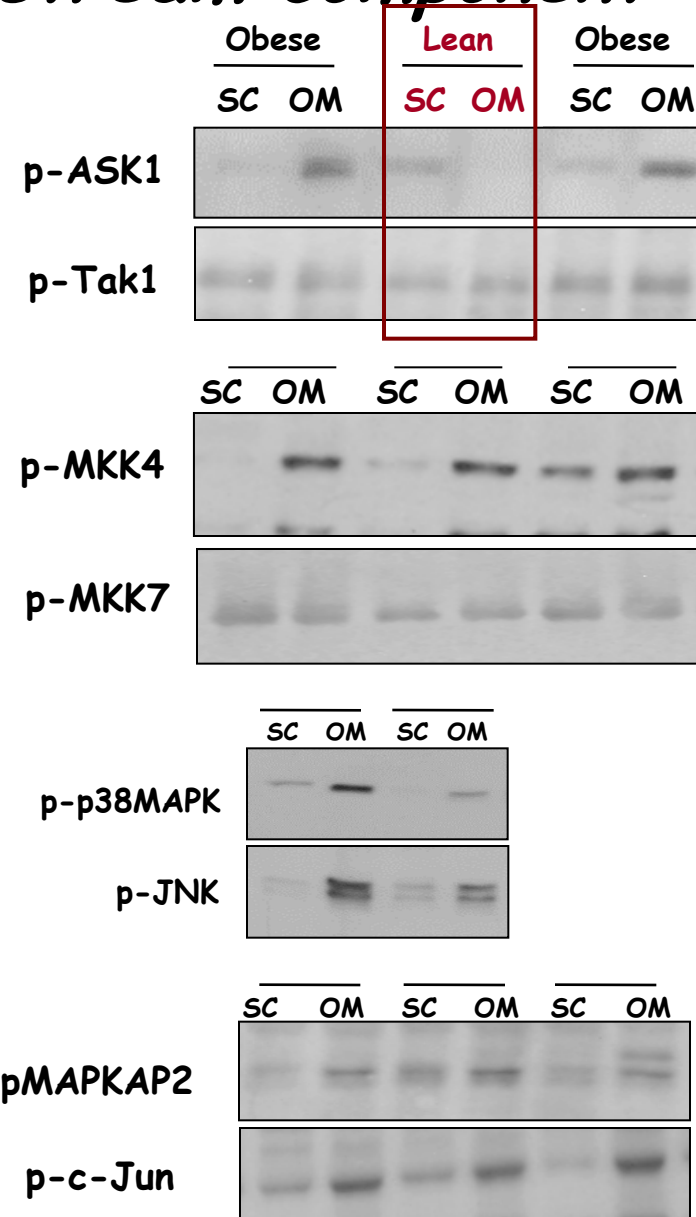
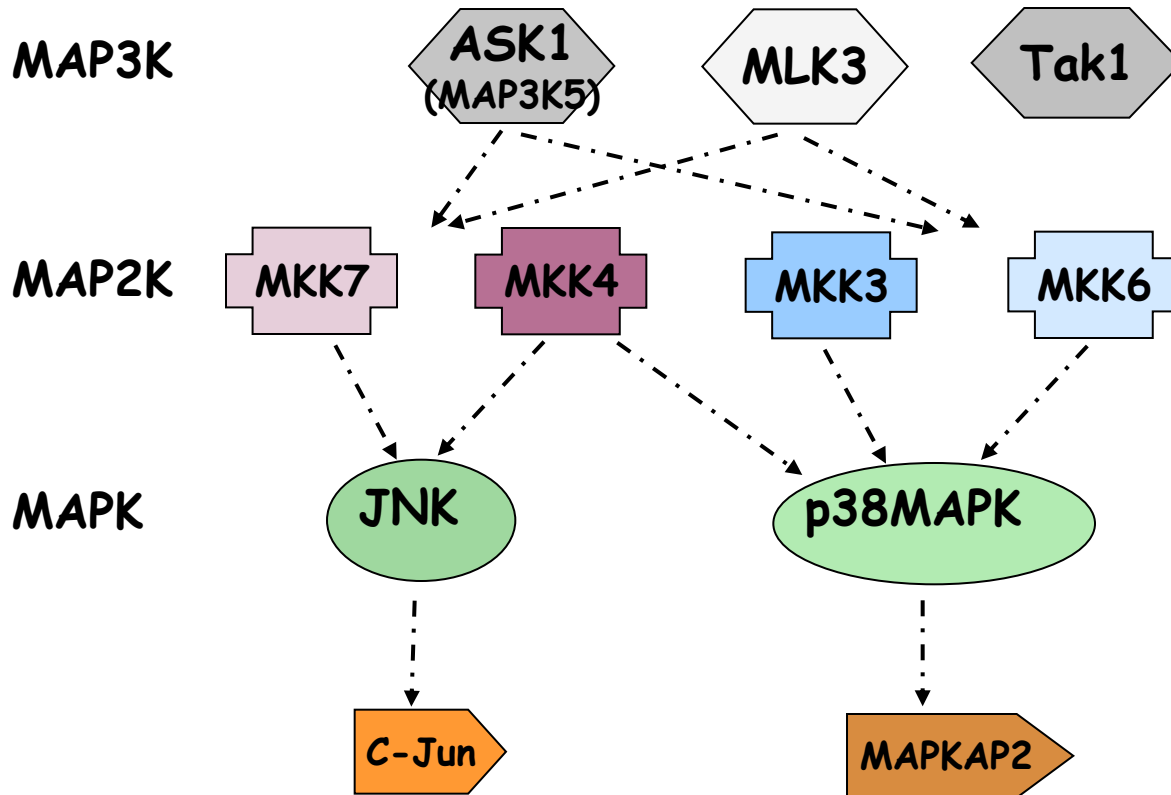
E2F1 and JNK phosphorylation-based activation of ASK1 promoter



ASK1 promoter activation by over-expression of E2F1, E2F2, E2F3, E2F4 and their combinations



Stress signaling in Intra-abdominal fat in human obesity: *Ask1* is an upstream component

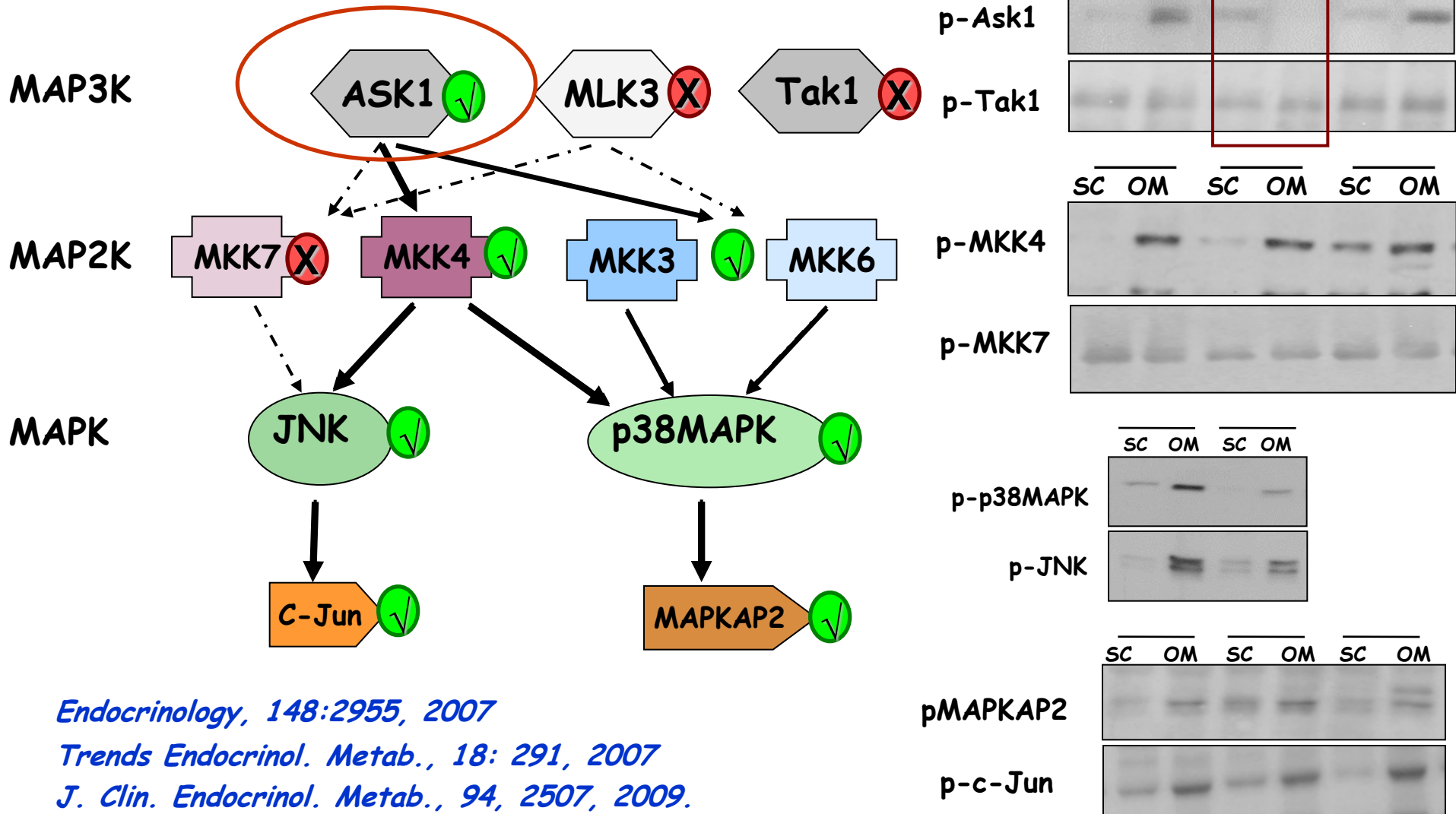


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Stress signaling in Intra-abdominal fat in human obesity: *Ask1* is an upstream component

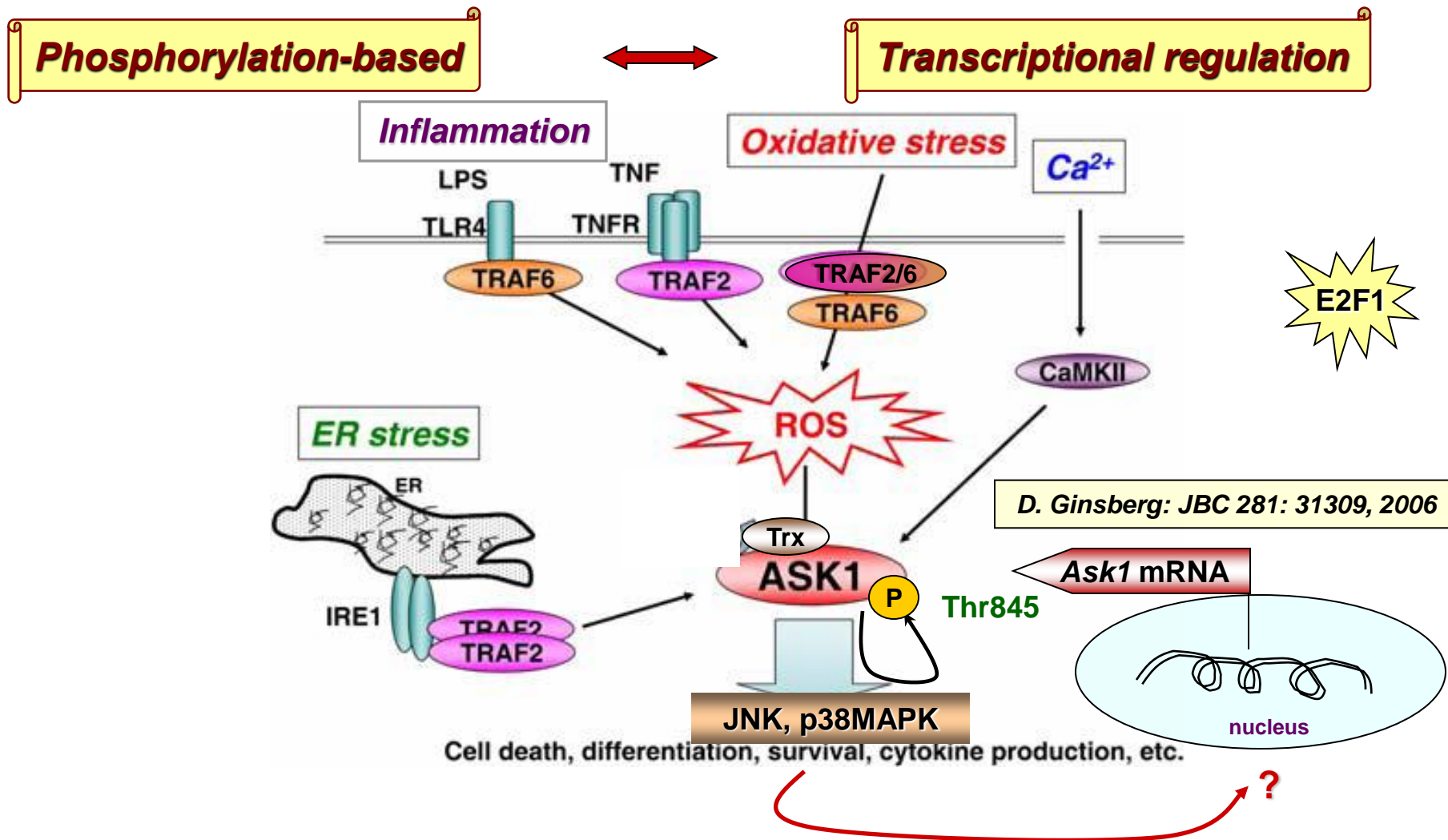


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Trends Endocrinol. Metab., 18: 291, 2007

J. Clin. Endocrinol. Metab., 94, 2507, 2009.

Phosphorylation and transcription -based regulation of ASK1 (MAP3K5)

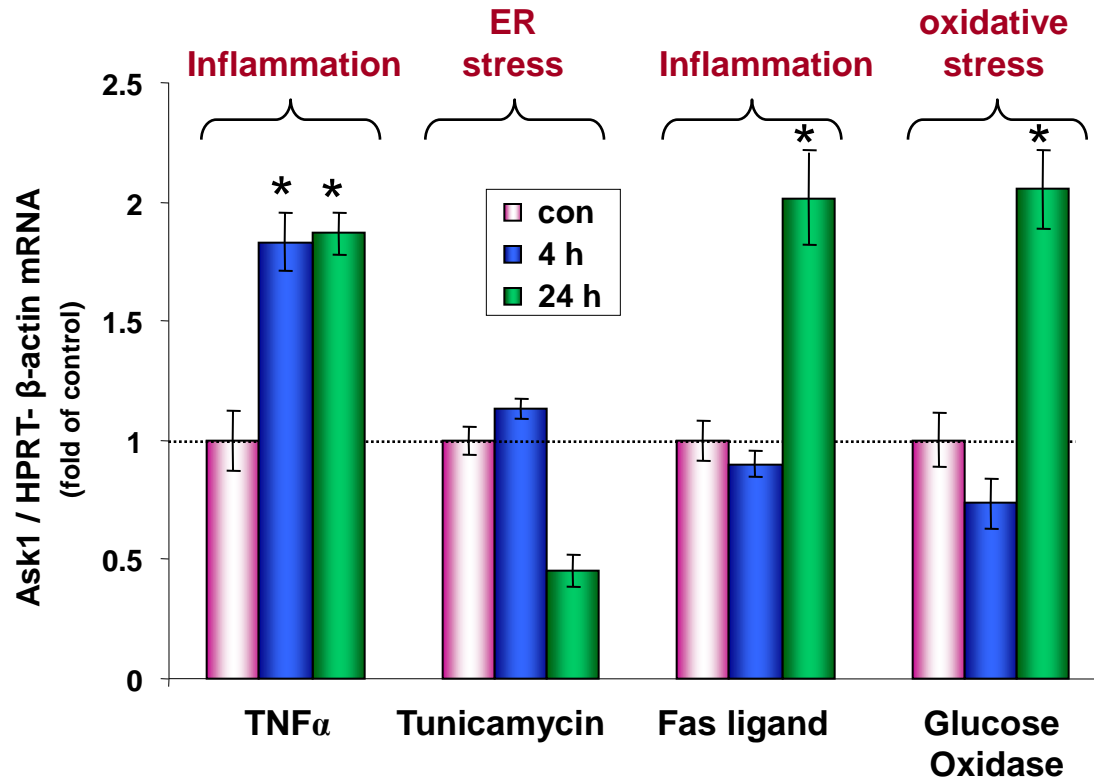


OM-Ask1 mRNA level is an independent predictor of whole-body insulin resistance

<u>(Dependent variable: Glucose infusion rate (GIR) during clamp)</u>	<u>Standard coefficients (Beta)</u>	<u>Significance</u>
Model 1: Age-adjusted OM-Ask1 SC-Ask1	-0.547 -0.021	<0.001 0.797
Model 2: Adjusted for Age, Sex, BMI OM-Ask1 SC-Ask1	-0.526 0.002	<0.001 0.983
Model 3: Adjusted for Age, Sex, BMI, HDL-c, LDL-c, TG, FFA OM-Ask1 SC-Ask1	-0.336 -0.100	<0.001 0.894
Model 4: Adjusted for Age, Sex, BMI, HDL-c, LDL-c, TG, FFA, leptin, adiponectin, IL-6 OM-Ask1 SC-Ask1	-0.308 -0.009	0.001 0.913

Transcriptional activation of *ASK1* in intra-abdominal adipocytes cell line: potential role of inflammation and oxidative stress

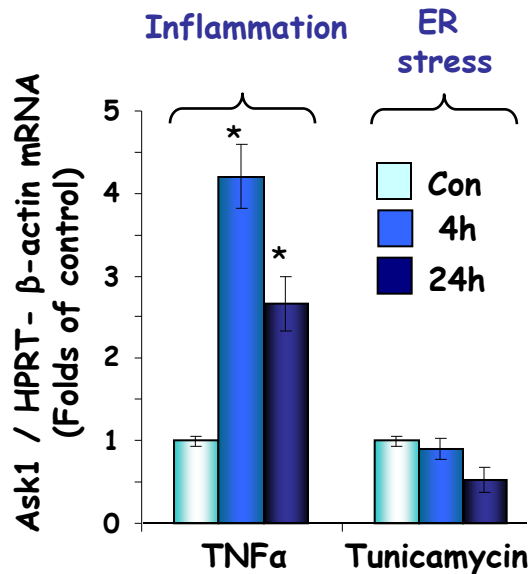
Intra-abdominal adipocyte cell line



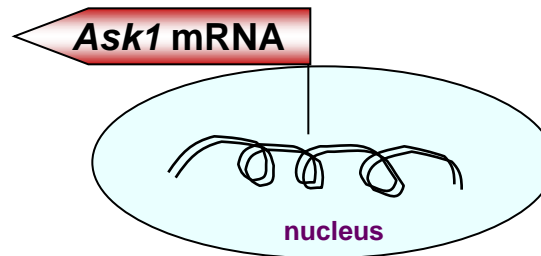
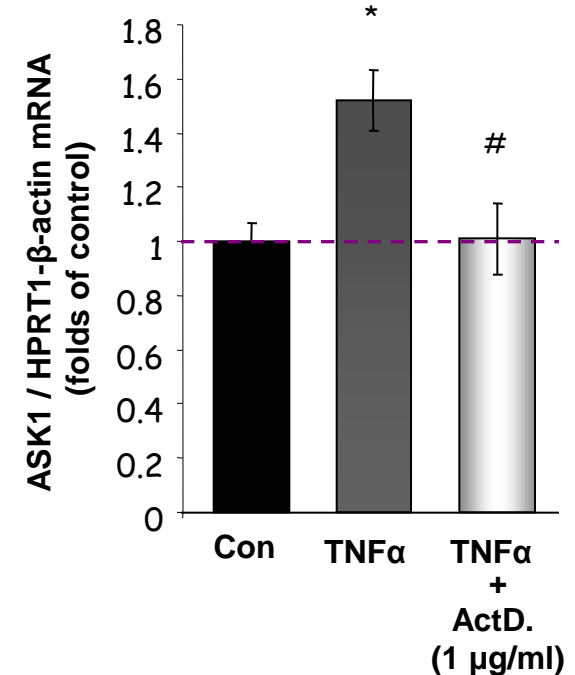
Transcriptional activation of *ASK1* in intra-abdominal adipocytes:

potential role of inflammation and oxidative stress

SGBS human pre-adipocytes



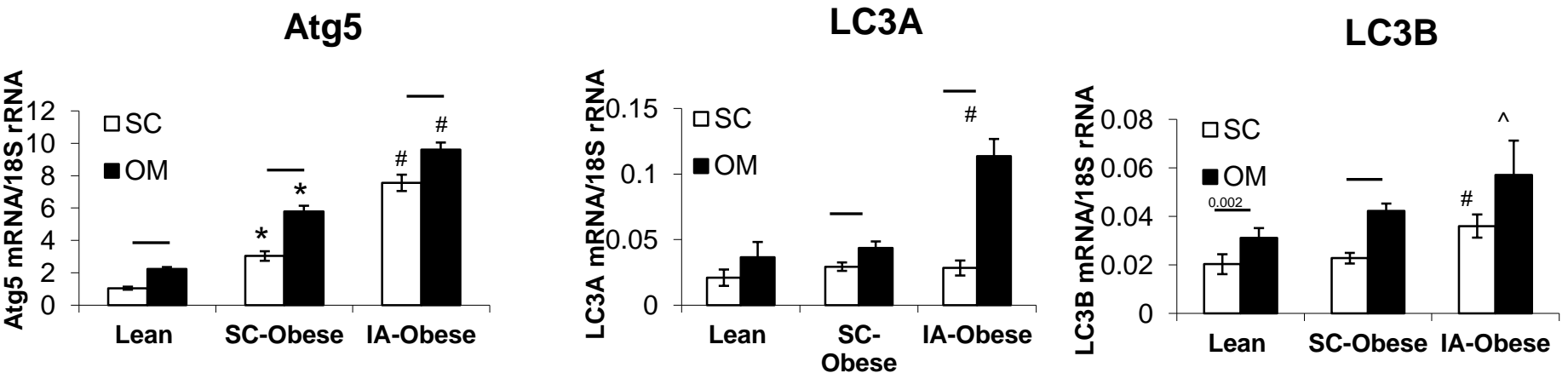
Intra-abdominal (mouse) adipocytes



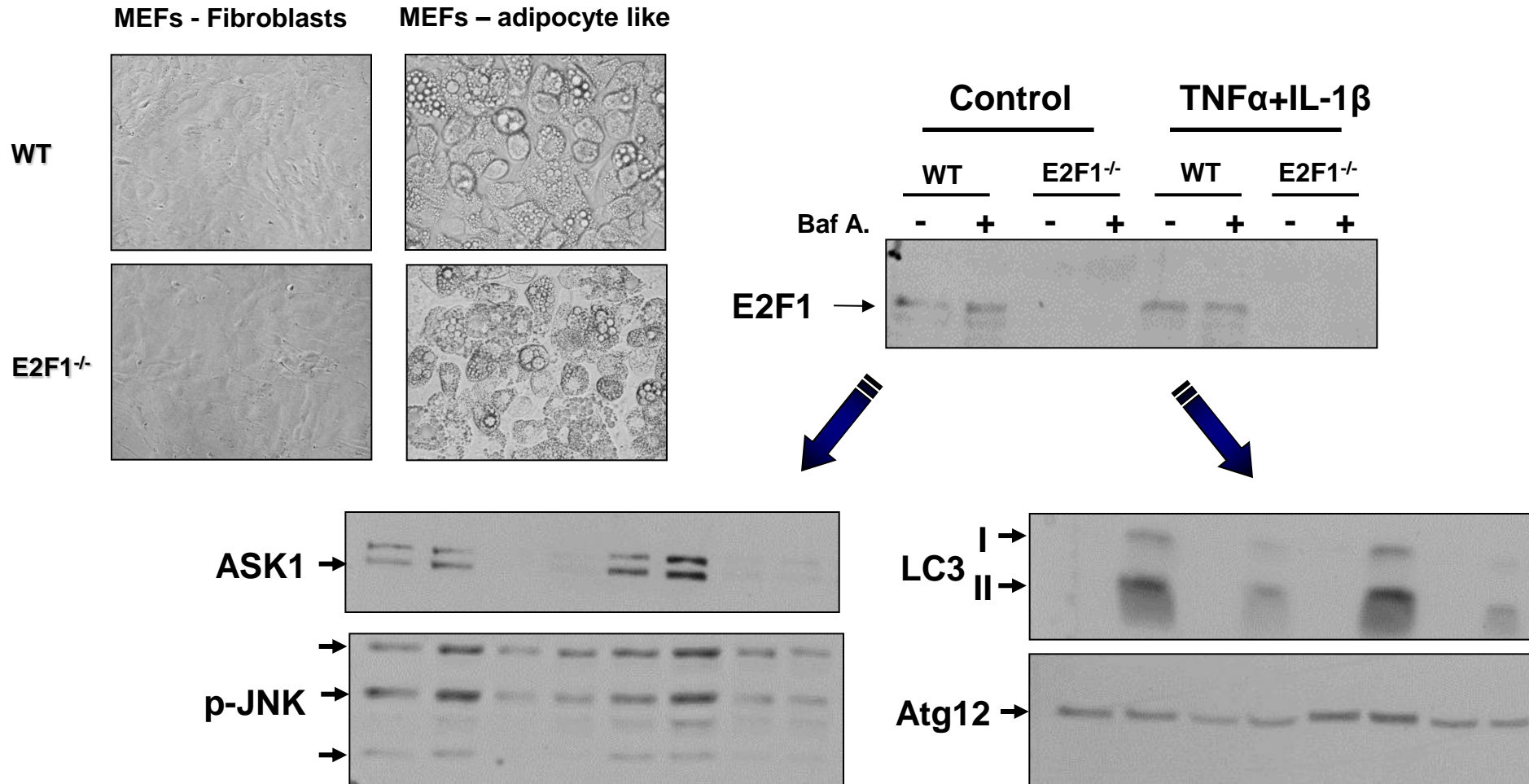
Unpublished data

AP is activated (3):

mRNA levels of key autophagy genes are increased in human OM fat in obesity, **particularly if fat is accumulated intra-abdominally!**



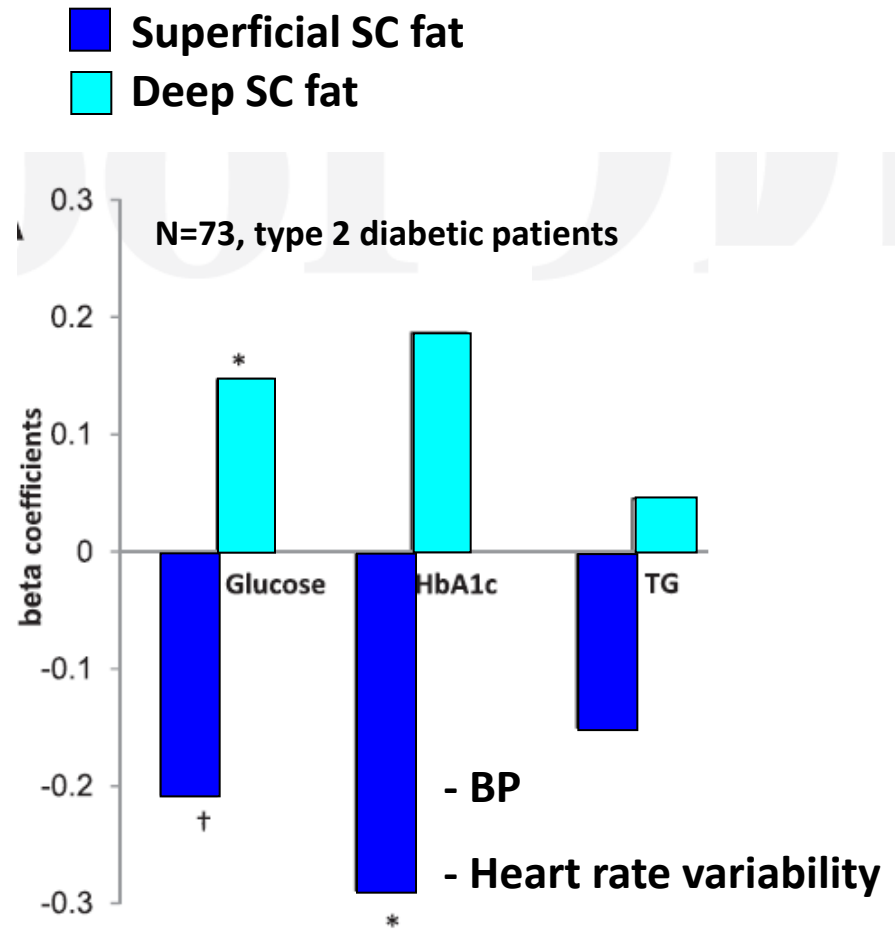
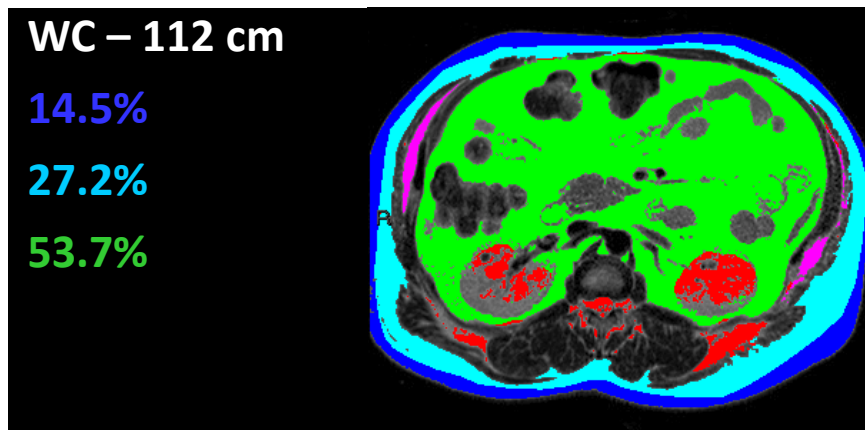
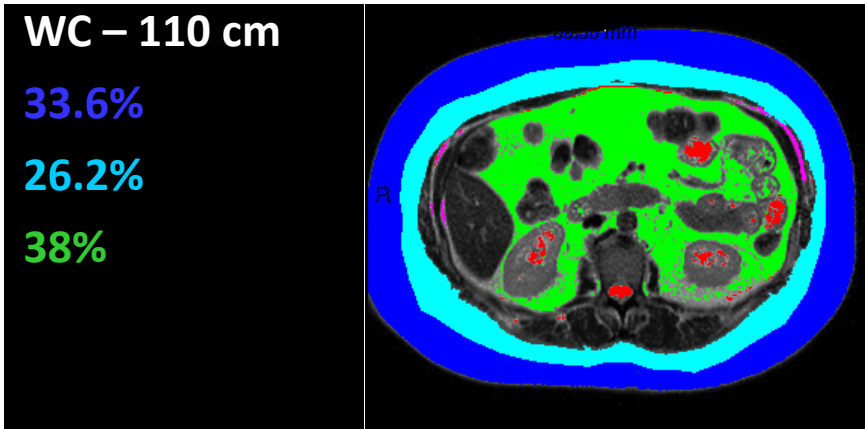
E2F1 is required for basal and inflammation-induced stress signaling and autophagy



Unpublished data

Superficial subcutaneous fat –

- metabolically-safe place to store excess calories!



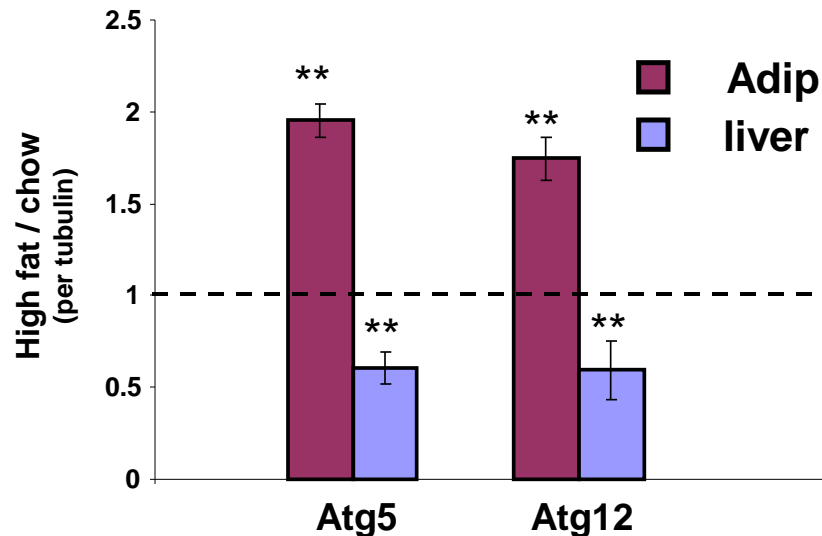
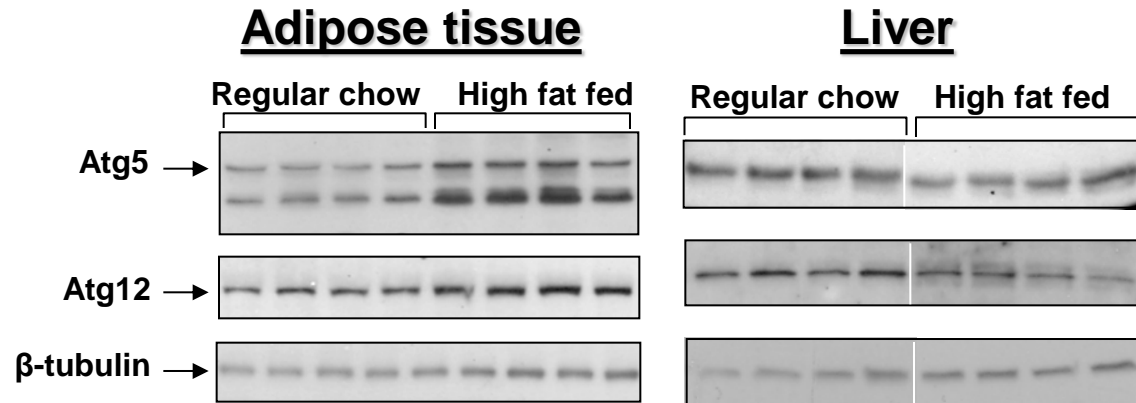
Take home messages before we go on:

1. Visceral fat accumulation is associated with a more detrimental cardio-metabolic obesity sub-phenotype than accumulation of subcutaneous fat.
2. Adipose tissue expansion by adipocyte hypertrophy is more detrimental than expansion by hyperplasia.
3. Accumulation of superficial subcutaneous fat, a depot likely expanding predominantly by hyperplasia, may be cardio-metabolically protective.
4. “Angry fat” is more hypertrophic (larger cells), inflamed and fibrotic, and may become dysfunction by mounting a “tissue stress response”.

→ What is the molecular makeup of *human* adipose tissue stress response?

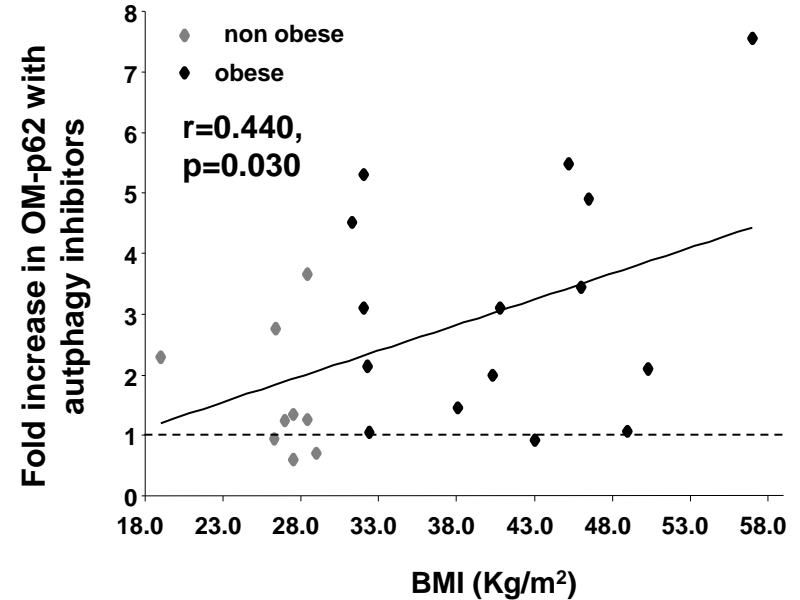
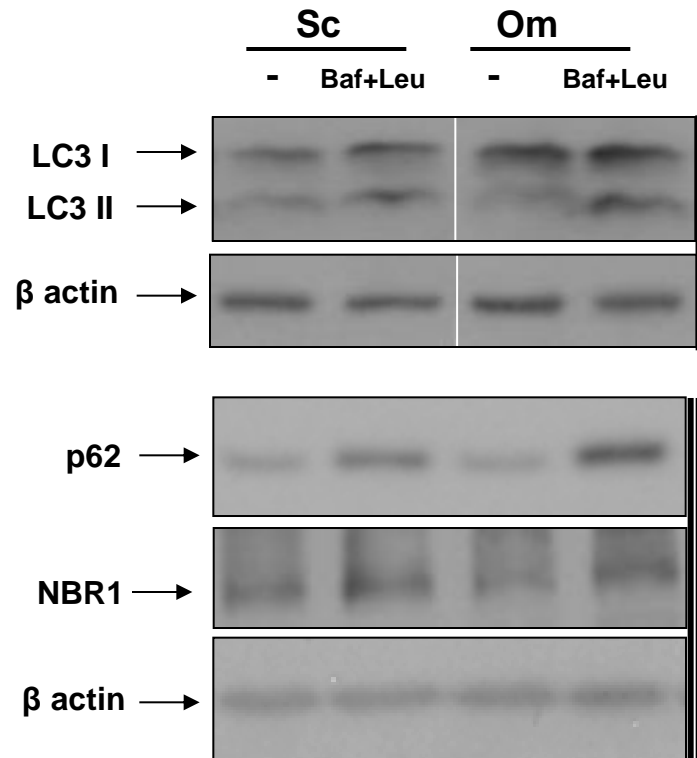
Autophagy in liver and fat in obesity:

A tissue-difference, not a human-mouse difference



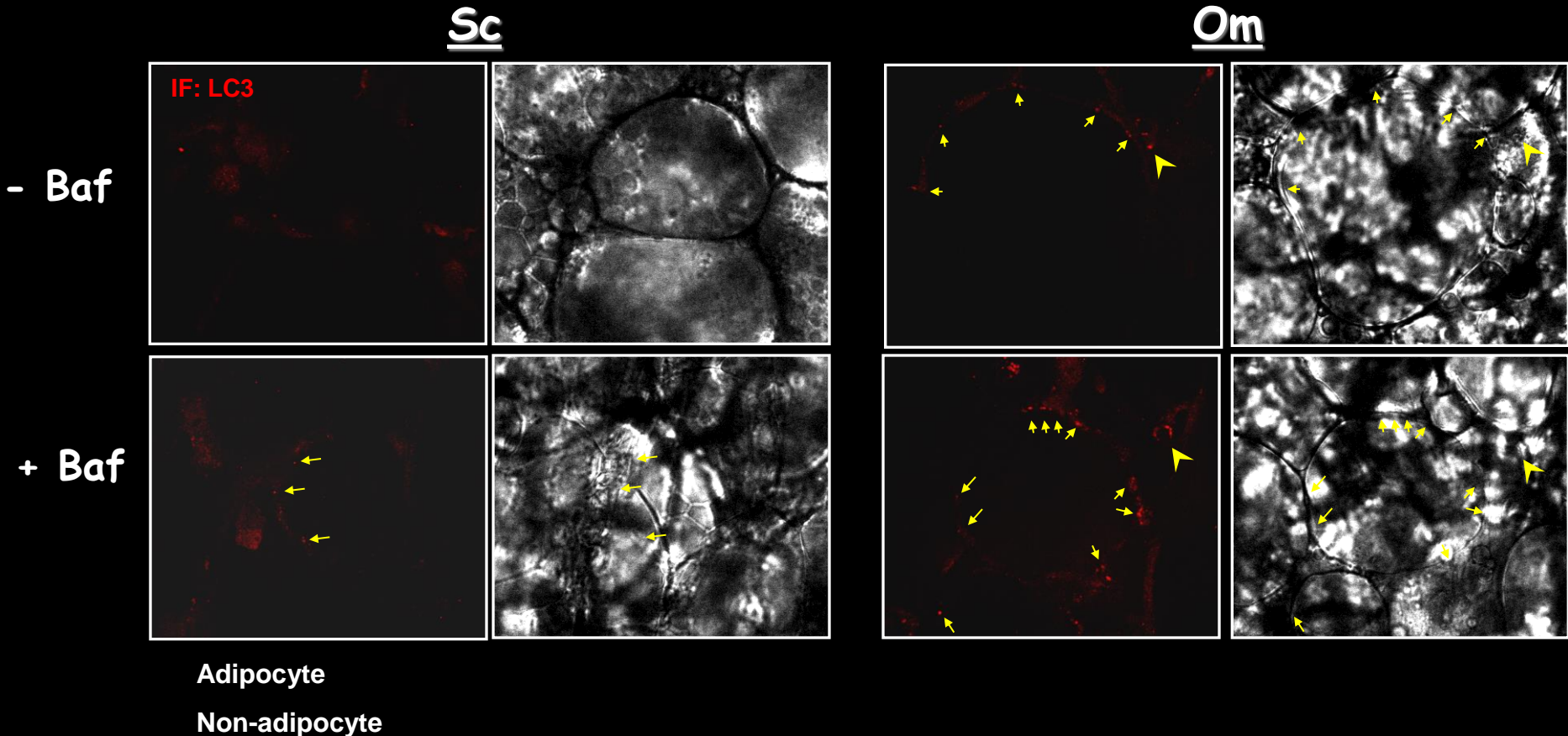
AP is activated (1):

more increase in LC3II, p62 and NBR1 with inhibitors



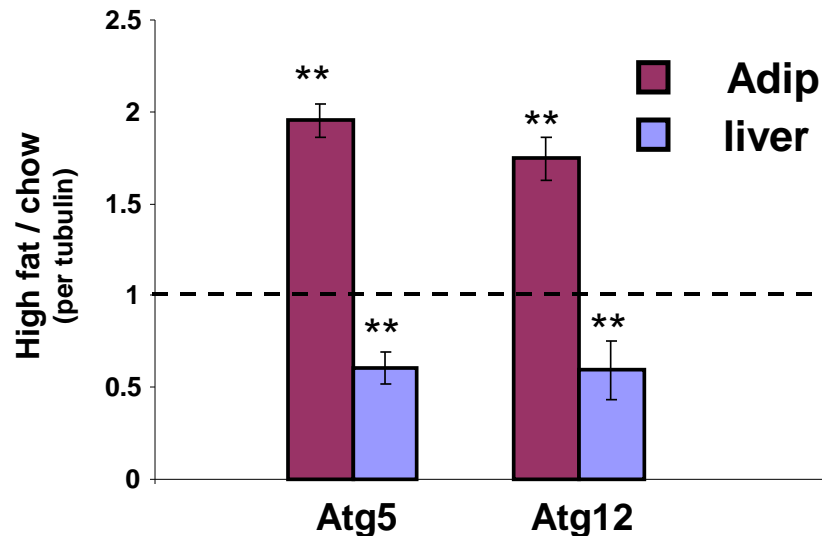
AP is activated (2):

Higher number of LC3-dots (autophagosomes) in human fat explants



Autophagy in liver and fat in obesity:

A tissue-difference, not a human-mouse difference



Gain of function approach to prove causality

