#### A New NR-FGF Axis: Regulation of Feast and Famine

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#### Feast and Famine

- Feast/famine cycles are a recurrent environmental stressor
- The ability to withstand periods of limited/excess nutrient availability is critical to animal survival





### Adipose tissues: Central to the feast/famine response



Cinti S Am J Physiol Endocrinol Metab 2009;297:E977-E986

# Adipose tissues are dynamic and possess wide developmental potential



### Adipose development and remodelingcoordination of multiple cell types



### Adipose tissue remodeling - adaptive response to energy stress

Adipose tissues expand and contract during feast/famine cycles
→ a process called "remodeling"

- Remodeling is a complex process that requires coordinated changes within adipocytes, immune cells, surrounding vasculature, and the extracellular matrix

- Adaptive remodeling is dynamic and critical for maintaining metabolic homeostasis

- The mechanisms underlying remodeling are poorly understood



#### Fibroblast growth factors



### The NR-FGF axis



# FGF1 in adipose tissue is regulated by nutritional cues



FGF1B in Vis WAT





# Adipose tissue subcompartments – adipocytes and stromal cells



### FGF1 is expressed predominantly in visceral adipocytes



Visceral fat depots are linked to metabolic disease and has more active remodeling capacity than subcutaneous fat

#### Fibroblast growth factors



Fibroblast growth factor (FGF)	Phenotype of knockout mouse	Physiological role
FGF1	Normal	Not established
FGF2	Loss of vascular tone Slight loss of cortex neurons <sup>72-73</sup>	Not established
FGF3	Inner ear agenesis in humans <sup>9</sup>	Inner ear development <sup>9</sup>
FGF4	Embryonic lethal <sup>128</sup>	Cardiac valve leaflet formation Limb development <sup>126-128</sup>
FGF5	Abnormally long hair <sup>129</sup>	Hair growth cycle regulation <sup>129-131</sup>
FGF6	Defective muscle regeneration <sup>133</sup>	Myogenesis <sup>132,133</sup>
FGF7	Matted hair Reduced nephron branching in kidney <sup>137,138</sup>	Branching morphogenesis <sup>138</sup>
FGF8	Embryonic lethal <sup>162</sup>	Brain, eye, ear and limb development <sup>160,161</sup>
FGF9	Postnatal death Gender reversal Lung hypoplasia <sup>170</sup>	Gonadal development Organogenesis <sup>170,171</sup>
FGF10	Failed limb and lung development <sup>142</sup>	Branching morphogenesis <sup>142</sup>
FGF16	Embryonic lethal <sup>172</sup>	Heart development172
FGF17	Abnormal brain development <sup>163</sup>	Cerebral and cerebellar development <sup>163</sup>
FGF18	Delayed long-bone ossification <sup>164,165</sup>	Bone development <sup>164,165</sup>
FGF19	Increased bile acid pool <sup>189</sup>	Bile acid homeostasis Lipolysis Gall bladder filling <sup>3,6,197-201</sup>
FGF20	No knockout model	Neurotrophic factor <sup>175</sup>
FGF21	No knockout model	Fasting response Glucose homeostasis Lipolysis and lipogenesis <sup>4,208-225</sup>
FGF22	No knockout model	Presynaptic neural organizer <sup>143</sup>
FGF23	Hyperphosphataemia Hypoglycaemia Immature sexual organs <sup>185,235</sup>	Phosphate homeostasis Vitamin D homeostasis <sup>226-261</sup>

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# FGF1: a "boring" FGF





### No change in body weight gain in FGF1 KO mice on a HFD



### Increased insulin resistance in FGF1 KO mice on HFD



### Increased peripheral and hepatic insulin resistance in FGF1 KO mice on a HFD



# Visceral adipose tissue fails to expand in FGF1 KO mice on a HFD



### Increased liver fat accumulation in FGF1 KO mice on a HFD



WT

KO

### Non-uniform size distribution in FGF1 KO visceral adipocytes



### Increased fibrosis in visceral adipose tissue of FGF1 KO mice on a HFD





Masson's trichrome stain – collagen stains blue

### Impaired vascularity in visceral adipose of FGF1 KO mice on a HFD





Heart perfusion of fluorescent spheres – vascular space in red, nuclei in blue

Visceral adipose tissue can't properly expand in response to HFD in FGF1 KO mice...... But, can it contract?

### Modern-day yoyo diet





#### 36 weeks high fat diet

6 weeks chow diet

# Further impairment of FGF KO visceral adipose tissue upon HFD withdrawal





# Failure of FGF1 KO visceral WAT to properly contract upon HFD withdrawal



# Fat necrosis in FGF1 KO mice after removal of HFD





### Regulation of FGF1 by PPARy and TZDs



#### PPARy binds to the FGF1 promoter





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### Future directions

- Some major questions ...
- Why is only visceral fat affected by loss of FGF1?
- Are adipocytes solely responsible for the whole body KO phenotype?
- What are the target cells of FGF1 action?
- Is there any therapeutic relevance for FGF1 in treating metabolic disease?

### FGF1 link to insulin sensitization - Is there a human connection?

Induction of FGF1 by TZD

Fasting blood glucose



### FGF1 gain-of-function studies - exploring therapeutic possibilities

#### Experimental approaches

- Pharmacological
  - Parental delivery of recombinant FGF1 protein into animal models of obesity/diabetes.
- Genetic
  - Tissue-specific transgenic overexpression of FGF1
  - Viral overexpression of FGF1

### FGF1 : therapeutic possiblities ?



### The adipocyte life cycle



## Biology of adipose tissues













## Feast and Famine

-Feast/famine cycles have occurred throughout time

-The ability to withstand periods of limited/excess nutrient availability is a critical aspect of survival



# Why would alleles predisposing to obesity exist in natural populations?



"Thrifty allele hypothesis" James V. Neel, M.D.,Ph.D. (1960s)

"Genes associated with common modern diseases like diabetes, hypertension and obesity are part of the human gene pool, because they helped our early ancestors survive when calories and salt were less abundant."







## FGF1 is NOT boring!









#### Development: Lineage Restriction



### **Topological distribution of adipose organs – developmentally regulated**

