

# Effect of increased endogenous glucose levels within Type 2 diabetes on cellular lipid profiles

Churm R<sup>1</sup>, Barry JD<sup>2</sup>, Caplin S<sup>2</sup>, Davies JS<sup>1</sup>, Stephens JW<sup>1</sup>, Prior SL<sup>1</sup>

<sup>1</sup> Diabetes Research Group, Grove building, Swansea University, Swansea, UK

<sup>2</sup> Welsh Institute of Metabolic & Obesity Surgery, Morriston Hospital, Swansea, UK



## Introduction

- ATP binding cassette subfamily G1 (ABCG1) mediates cholesterol efflux and modulates cellular lipid homeostasis
- Type 2 diabetes (T2D) has been shown to alter cholesterol metabolism, resulting in higher cholesterol synthesis and lower cholesterol absorption
- High glucose levels associated with T2D have the ability to suppress ABCG1 expression via increased oxidative stress, inducing nuclear factor kappa B (NF-κB) activation, blocking ABCG1 transcription
- Lipid accumulation could lead to the development of atherosclerotic plaques and altered immune response

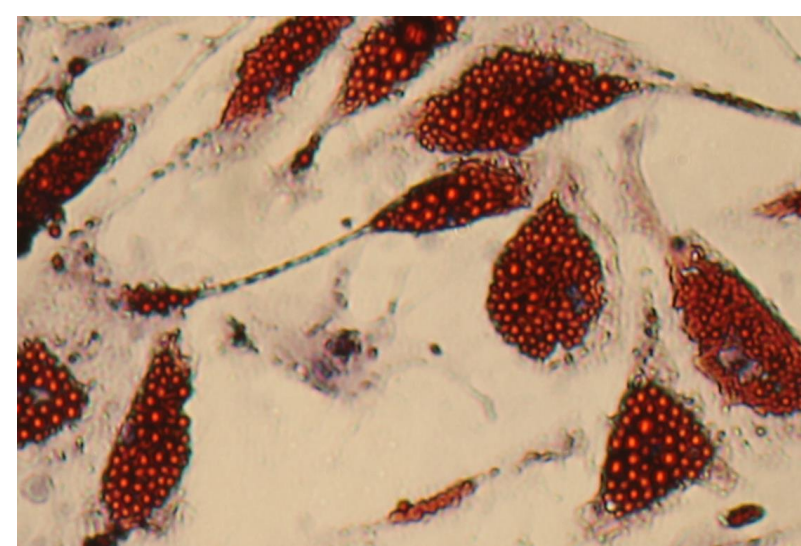


Figure 1. Lipid droplets in human adipocytes

## Aims

Our aim was to examine the relationship between ABCG1 expression and lipid profiles within the increased glucose levels of subjects with Type 2 diabetes (ODM)

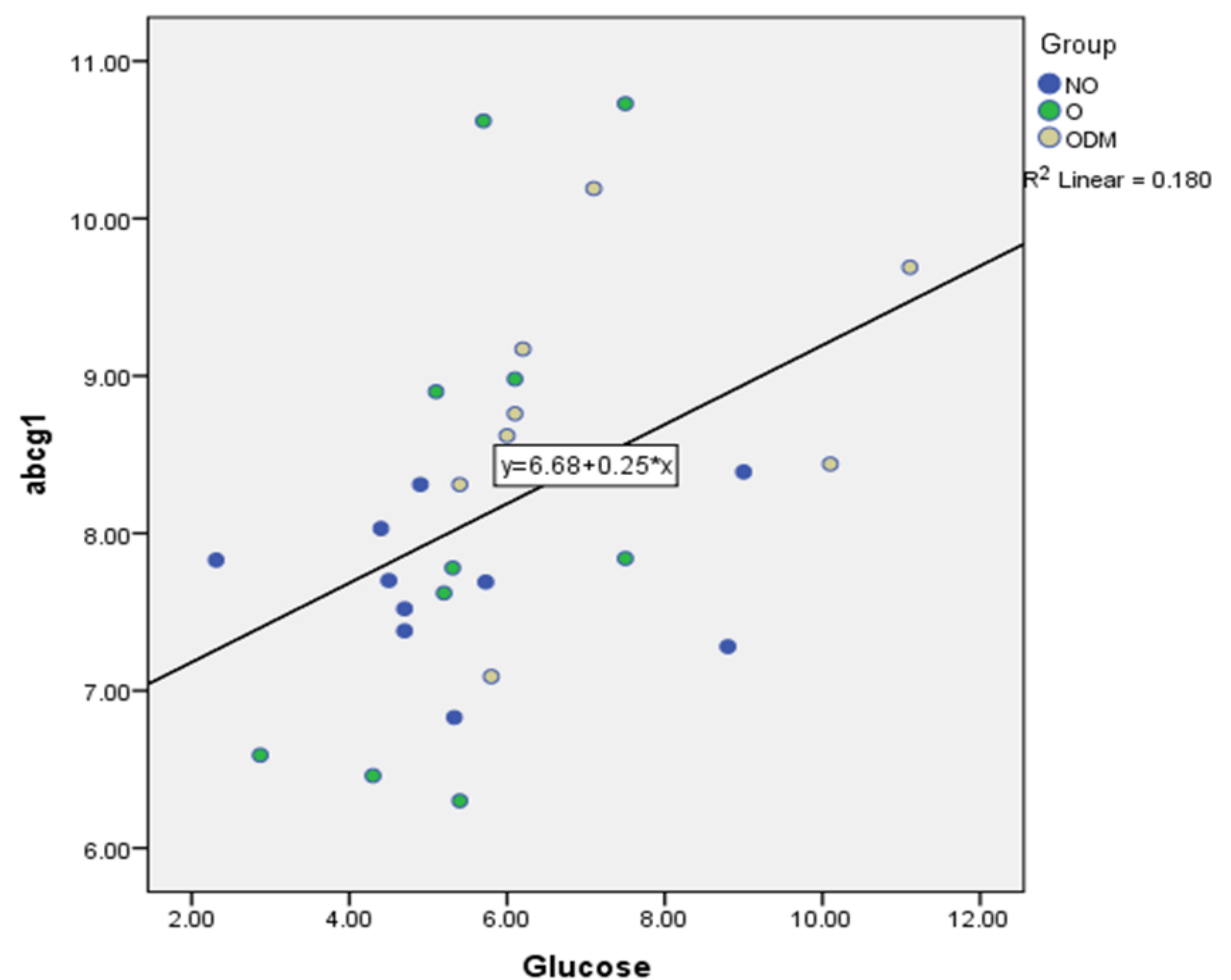
## Methods

- Visceral fat and fasting blood samples were collected from 30 subjects undergoing abdominal surgery, categorised as non obese (NO, n=10), obese (O, n=10) or obese with Type 2 diabetes (ODM, n=10)
- RNA was extracted from visceral fat and used for Real-Time qPCR to determine gene expression changes of ABCG1
- Lipid profiles & plasma glucose were determined using a colorimetric assay on the Randox Daytona Plus™

## Results

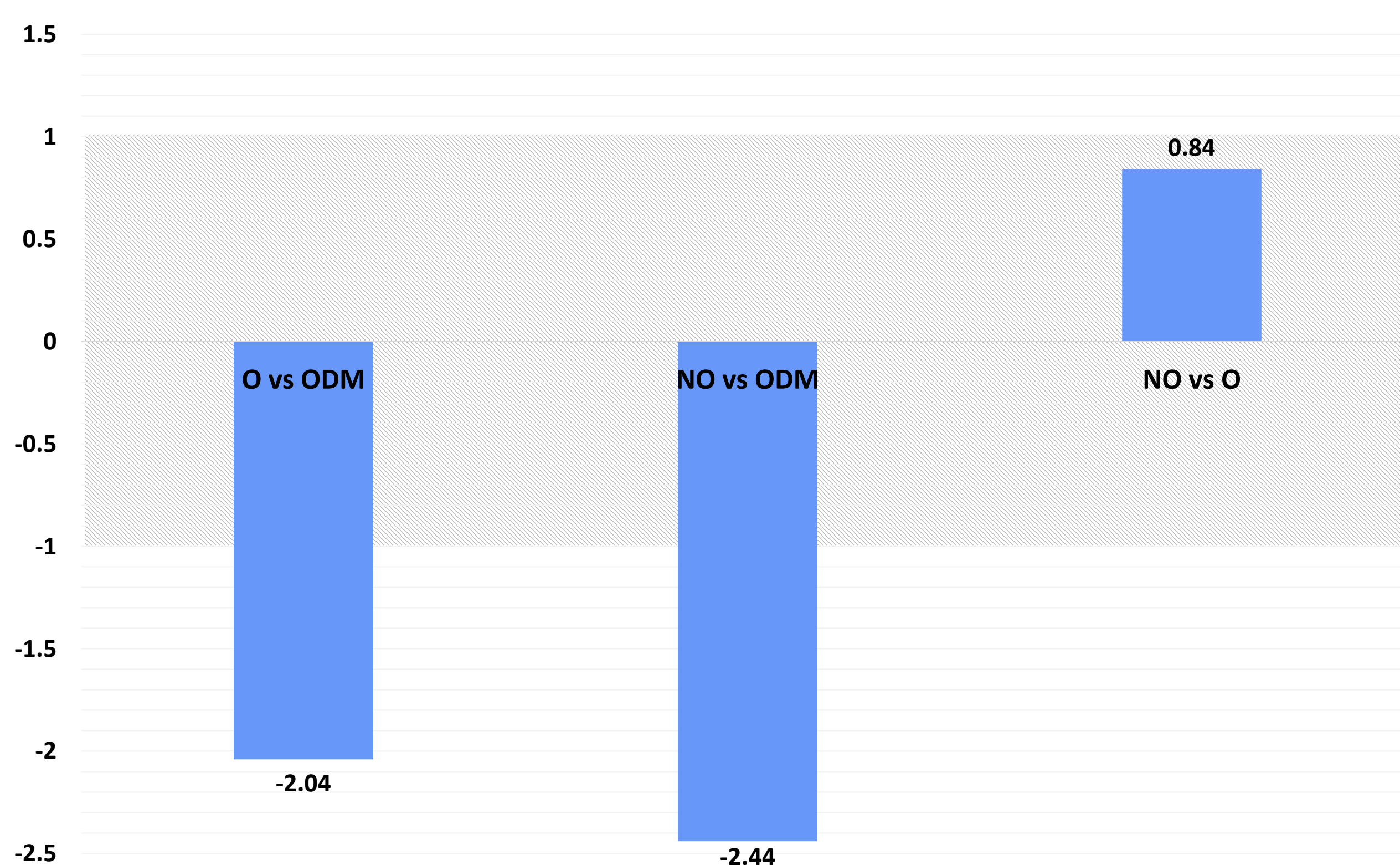
	Δ NO v O	P value	ΔNO v ODM	P value	ΔO v ODM	P value
Age (Years)	-0.7	0.91	-6.3	0.25	-5.6	0.21
Mass (Kg)*	+18.5	<0.01	+59.2	<0.001	+40.7	0.10
BMI (Kg/m <sup>2</sup> )*	+8.7	<0.001	+21.2	<0.001	+12.4	<0.05
Glucose (mmol/L)*	+0.6	0.55	+1.9	<0.01	+1.3	<0.05
HbA1c (%)*	+0.1	0.51	+1.9	<0.05	+1.8	<0.05
HbA1c (mmol/mol)*	+5.5	0.47	+21.9	<0.05	+16.4	<0.05
Cholesterol (mmol/L)	+0.43	0.52	-1.3	<0.01	-1.7	<0.01
HDL (mmol/L)	+0.11	0.68	-0.4	<0.01	-0.6	<0.05
LDL (mmol/L)	+0.18	0.71	-1.2	<0.01	-1.3	<0.01

Table 1. Change in baseline characteristics and lipid profiles when compared between individual groups. Change between means shown for normally distributed data & p value determined using an independent t-test. \* Change between medians shown for not normally distributed data and Kruskal Wallis used for p value determination. Statistical significance shown for p<0.05 are highlighted in red.



Graph 2. Correlation of ABCG1 ΔCt values and fasting plasma concentrations (mmol/L). Y=6.68 + 0.25x, P<0.05, R=0.425

### ABCG1 fold change across all groups



Graph 1. ABCG1 fold change after 2<sup>-ΔΔCt</sup> data analysis. Shaded region indicates the range in which fold change is deemed unaltered. Bars indicated the change relative to the control group as indicated on bar title.

- Within the ODM group there was a significant decrease in plasma levels of total cholesterol, HDL and LDLs when compared to both NO and O (P; <0.01, <0.05, <0.01 respectively)
- This decrease in plasma lipids was independent of prescribed statin use
- Reduced expression of ABCG1 was observed in the ODM group compared to O and NO groups (ABCG1 = 2.0-fold and 2.4- fold decrease, respectively)
- An increase in plasma glucose correlated with the reduced expression of ABCG1 (P<0.05)

## Conclusions

- Decrease in plasma lipids is hypothesised to be the result of a reduction in cholesterol export from the cell, resulting in cellular lipid retention
- Further evaluation of this pathway may provide a new therapeutic avenue for the management of obesity-related Type 2 diabetes complications