

Brown Adipose Tissue a panacea against the metabolic syndrome?

Jan Nedergaard

Department of Molecular Biosciences

The Wenner-Gren Institute,

Stockholm University

Professor at

Fellow of the Nobel-prize awarding



Stockholm
University



THE ROYAL SWEDISH ACADEMY OF SCIENCES



Results in collaboration with (among others)

The Cannon/Nedergaard lab:

Gustavo Abreu de Vieira

Helena Feldmann

Valeria Golozoubova

Anders Jacobsson

Elaina Maldonado

Natasa Petrovic

Tomas Waldén



The Bengtsson lab:

Jessica Olsen

Maasaki Sato

Olof S. Dallner

Anna L. Sandström

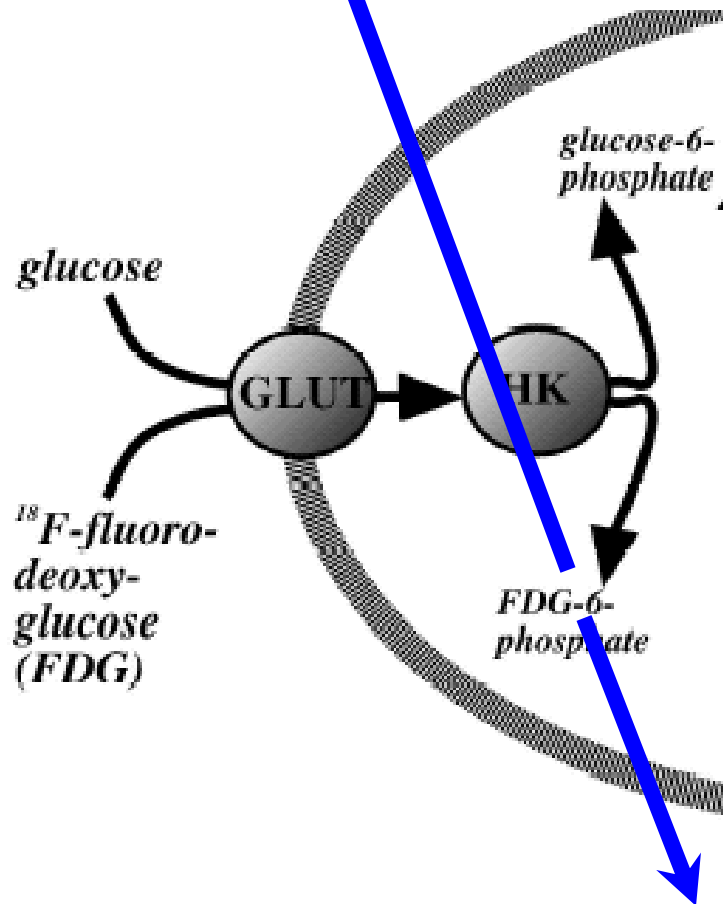
A new organ in adult humans:
brown adipose tissue

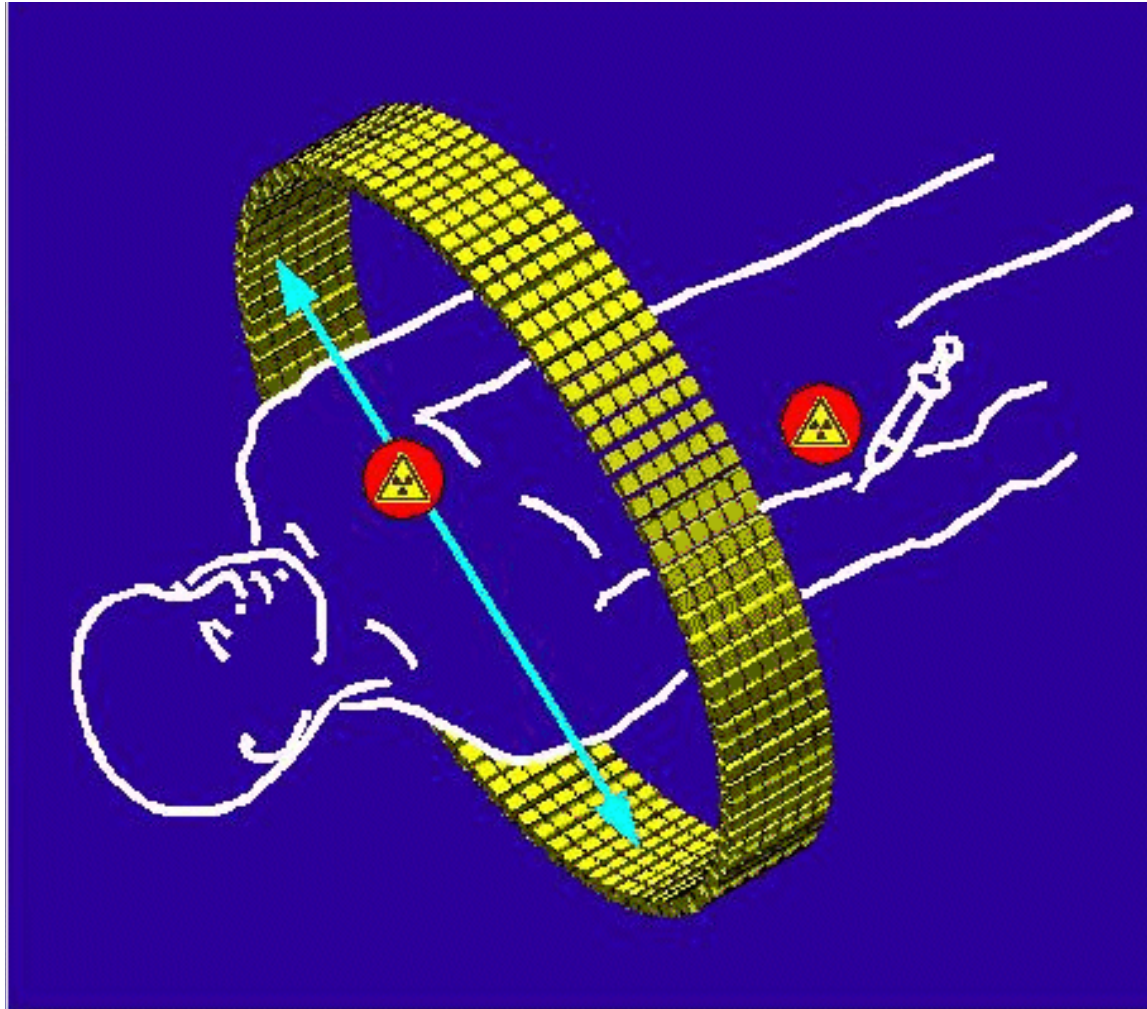
Before 2007:

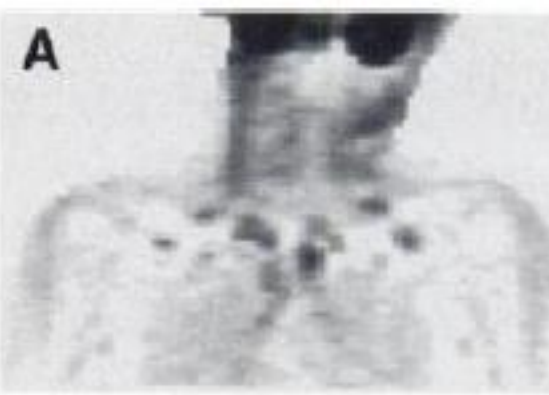
“in man, brown adipose tissue
is only found in newborns”



An unexpected
development
from radiology







Tense muscle?

"In all patients, the soft tissue uptake was clearly localised *within the fatty tissue* of the shoulders as demonstrated by PET/CT co-registration."

Hany//von Schulthess 2002

Eur J Nucl Med Mol Imaging

2007:

Invited Review

Am J Physiol Endocrinol Metab 293: E444–E452, 2007.
First published May 1, 2007; doi:10.1152/ajpendo.00691.2006.

Unexpected evidence for active brown adipose tissue in adult humans

Jan Nedergaard, Tore Bengtsson, and Barbara Cannon

The Wenner-Gren Institute, The Arrhenius Laboratories, Stockholm University, Stockholm, Sweden

Submitted 18 December 2006; accepted in final form 23 April 2007

Nedergaard J, Bengtsson T, Cannon B. Unexpected evidence for active brown adipose tissue in adult humans. *Am J Physiol Endocrinol Metab* 293: E444–E452, 2007. First published May 1, 2007; doi:10.1152/ajpendo.00691.2006.—The contention that brown adipose tissue is absent in adult man has meant that processes attributed to active brown adipose tissue in experimental animals (mainly rodents), i.e., classical nonshivering thermogenesis, adaptive adrenergic thermogenesis, diet-induced thermogenesis, and antiobesity, should be either absent or attributed to alternative (unknown) mechanisms in man. However, serendipitously, as a consequence of the use

means either that adult man does not possess classical nonshivering thermogenesis (i.e., the development with time of a heat-producing mechanism to replace shivering, as a consequence of chronic exposure to cold) or that man should possess an alternative method of nonshivering thermogenesis other than that found in experimental animals (rodents), where all classical nonshivering thermogenesis is dependent upon brown adipose tissue (34). Furthermore, this means that adaptive adrenergic thermogenesis [which in rodents originates from

After 2007:

” in man, brown adipose tissue
is found in newborns and in (certain?) adults”



- ☐ 1. Title: **Identification and Importance of Brown Adipose Tissue in Adult Humans.**
Author(s): Cypess, Aaron M.; Lehman, Sanaz; Williams, Gethin; et al.
Source: NEW ENGLAND JOURNAL OF MEDICINE Volume: **360** Issue: **15** Pages: **1509-1517** DOI: **10.1056/NEJMoa0810780** Published: **APR 9 2009**
- ☐ 2. Title: **Brief Report: Functional Brown Adipose Tissue in Healthy Adults.**
Author(s): Virtanen, Kirsi A.; Lidell, Martin E.; Orava, Janne; et al.
Source: NEW ENGLAND JOURNAL OF MEDICINE Volume: **360** Issue: **15** Pages: **1518-1525** DOI: **10.1056/NEJMoa0808949** Published: **APR 9 2009**
- ☐ 3. Title: **Unexpected evidence for active brown adipose tissue in adult humans**
Author(s): Nedergaard, Jan; Bengtsson, Tore; Cannon, Barbara
Source: AMERICAN JOURNAL OF PHYSIOLOGY-ENDOCRINOLOGY AND METABOLISM Volume: **293** Issue: **2** Pages: **E444-E452** DOI: **10.1152/ajpendo.00691.2006**
AUG 2007
- ☐ 4. Title: **Cold-Activated Brown Adipose Tissue in Healthy Men.**
Author(s): Lichtenbelt, Wouter D. van Marken; Vanhommerig, Joost W.; Smulders, Nanda M.; et al.
Source: NEW ENGLAND JOURNAL OF MEDICINE Volume: **360** Issue: **15** Pages: **1500-1508** Published: **APR 9 2009**
- ☐ 5. Title: **High Incidence of Metabolically Active Brown Adipose Tissue in Healthy Adult Humans Effects of Cold Exposure and Adiposity**
Author(s): Saito, Masayuki; Okamatsu-Ogura, Yuko; Matsushita, Mami; et al.
Source: DIABETES Volume: **58** Issue: **7** Pages: **1526-1531** DOI: **10.2337/db09-0530** Published: **JUL 2009**
- ☐ 6. Title: **The presence of UCP1 demonstrates that metabolically active adipose tissue in the neck of adult humans truly represents brown adipose tissue**
Author(s): Zingaretti, Maria Cristina; Crosta, Francesca; Vitali, Alessandra; et al.
Source: FASEB JOURNAL Volume: **23** Issue: **9** Pages: **3113-3120** DOI: **10.1096/fj.09-133546** Published: **SEP 2009**

☐ 1. Title: **Identification and Importance of Brown Adipose Tissue in Adult Humans.**
Author(s): Cypess, Aaron M.; Lehman, Sanaz; Williams, Gethin; et al.
Source: NEW ENGLAND JOURNAL OF MEDICINE Volume: 360 Issue: 15 Pages: 1509-1517 DOI: 10.1056/NEJMoa0810780 Published: APR 9 2009

☐ 2. Title: **Brief Report: Functional Brown Adipose Tissue in Healthy Adults.**
Author(s): Virtan
Source: NEW E

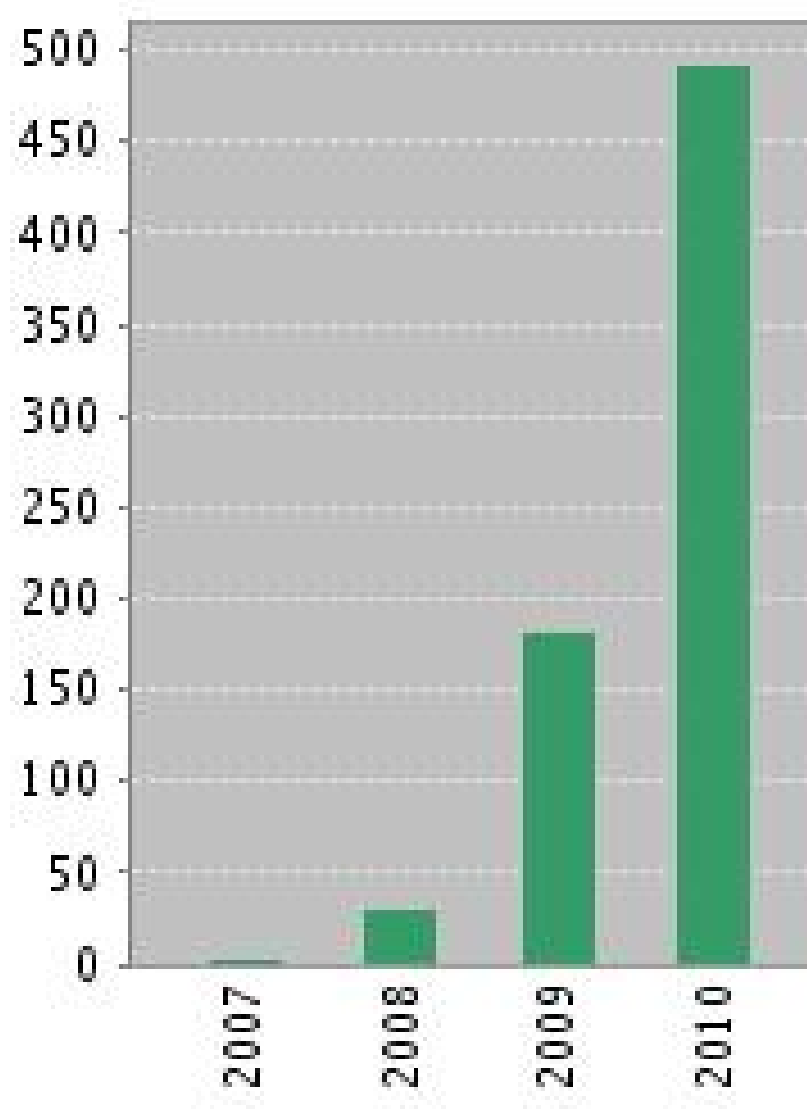
Citations in Each Year

☐ 3. Title: **Unexpect**
Author(s): Neder
Source: AMERIK
AUG 2007

☐ 4. Title: **Cold-Acti**
Author(s): Lichte
Source: NEW E

☐ 5. Title: **High Inci**
Author(s): Saito,
Source: DIABET

☐ 6. Title: **The pres**
Author(s): Zinga
Source: FASEB



endo.00691.2006

n adipose tissue

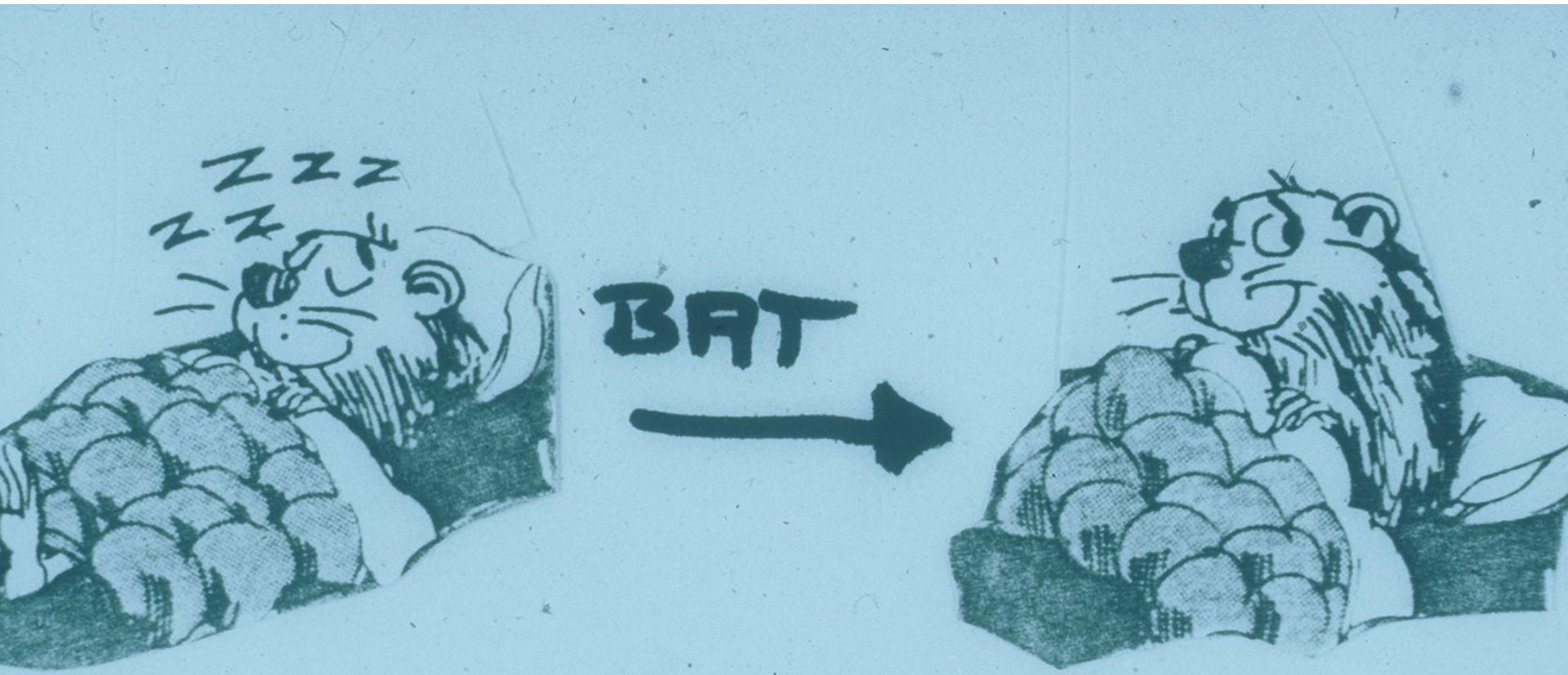
Brown adipose tissue:
classical functions



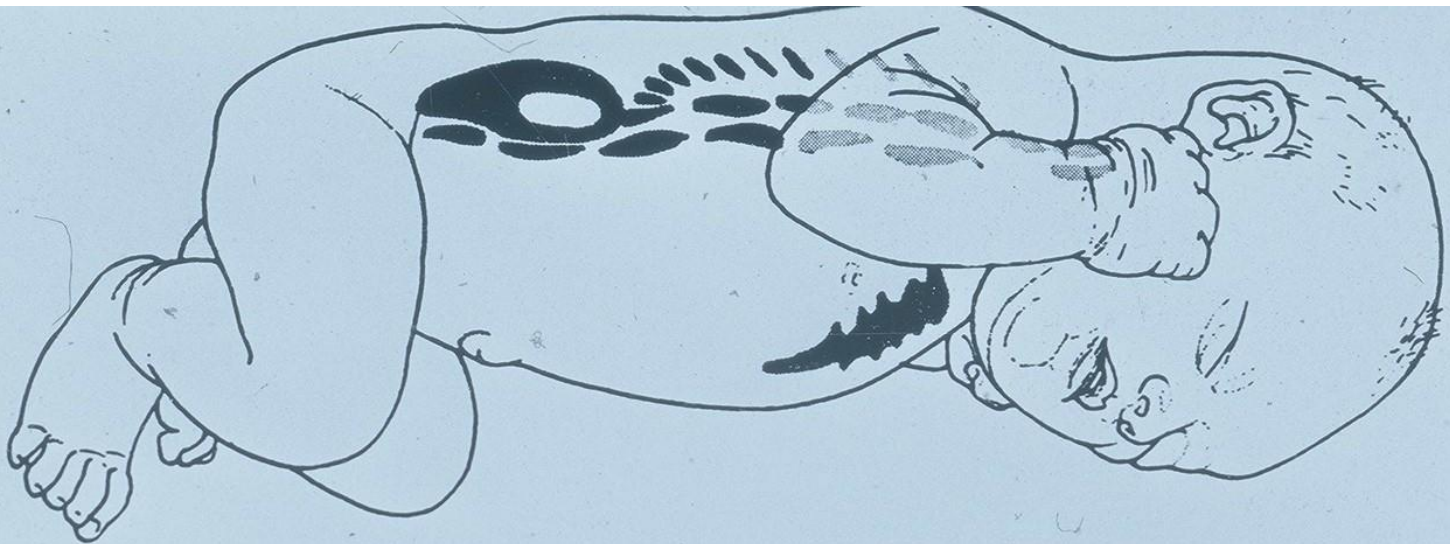
Classically: keeping human newborns warm



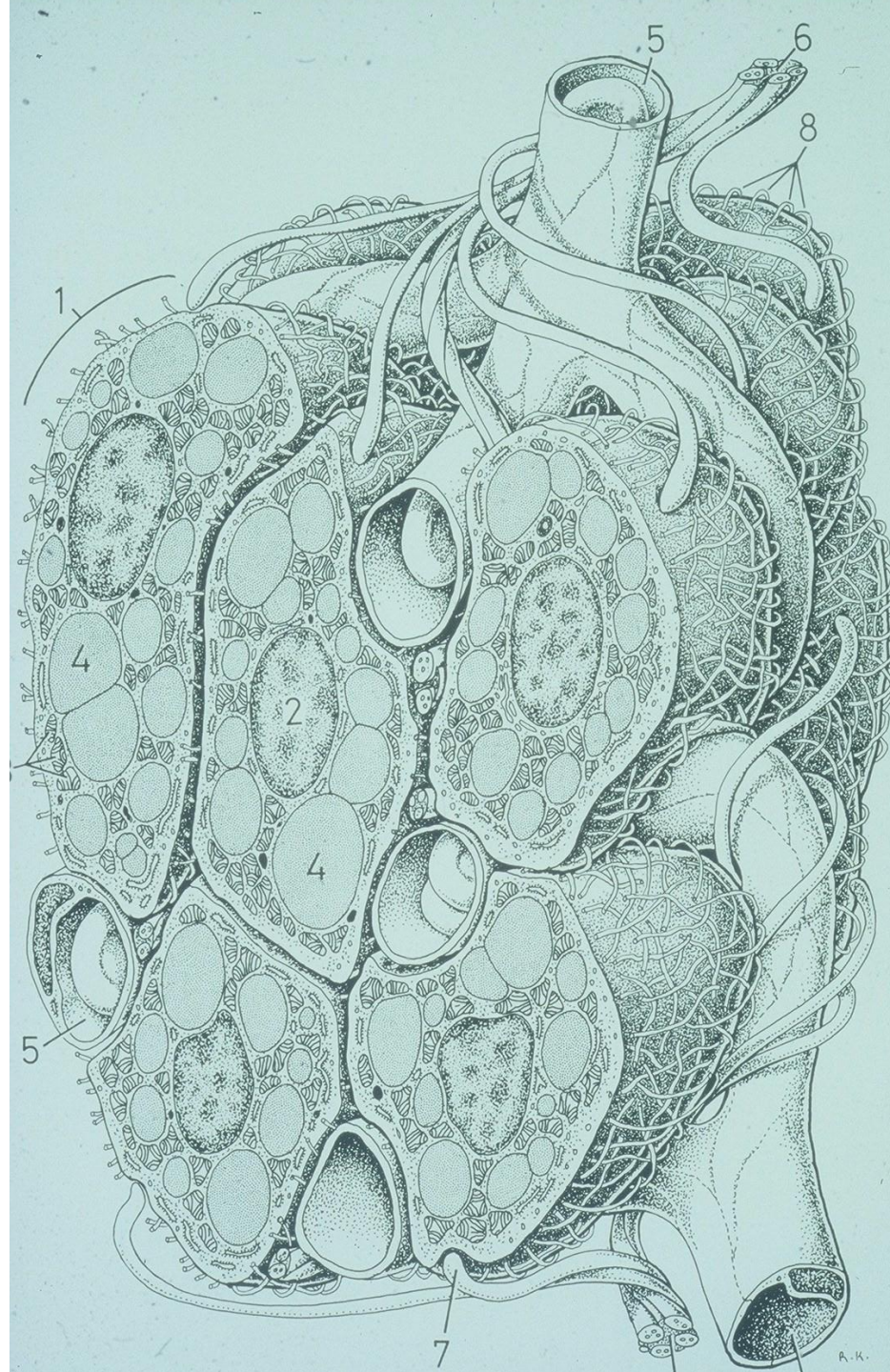
Classically: keeping small mammals warm

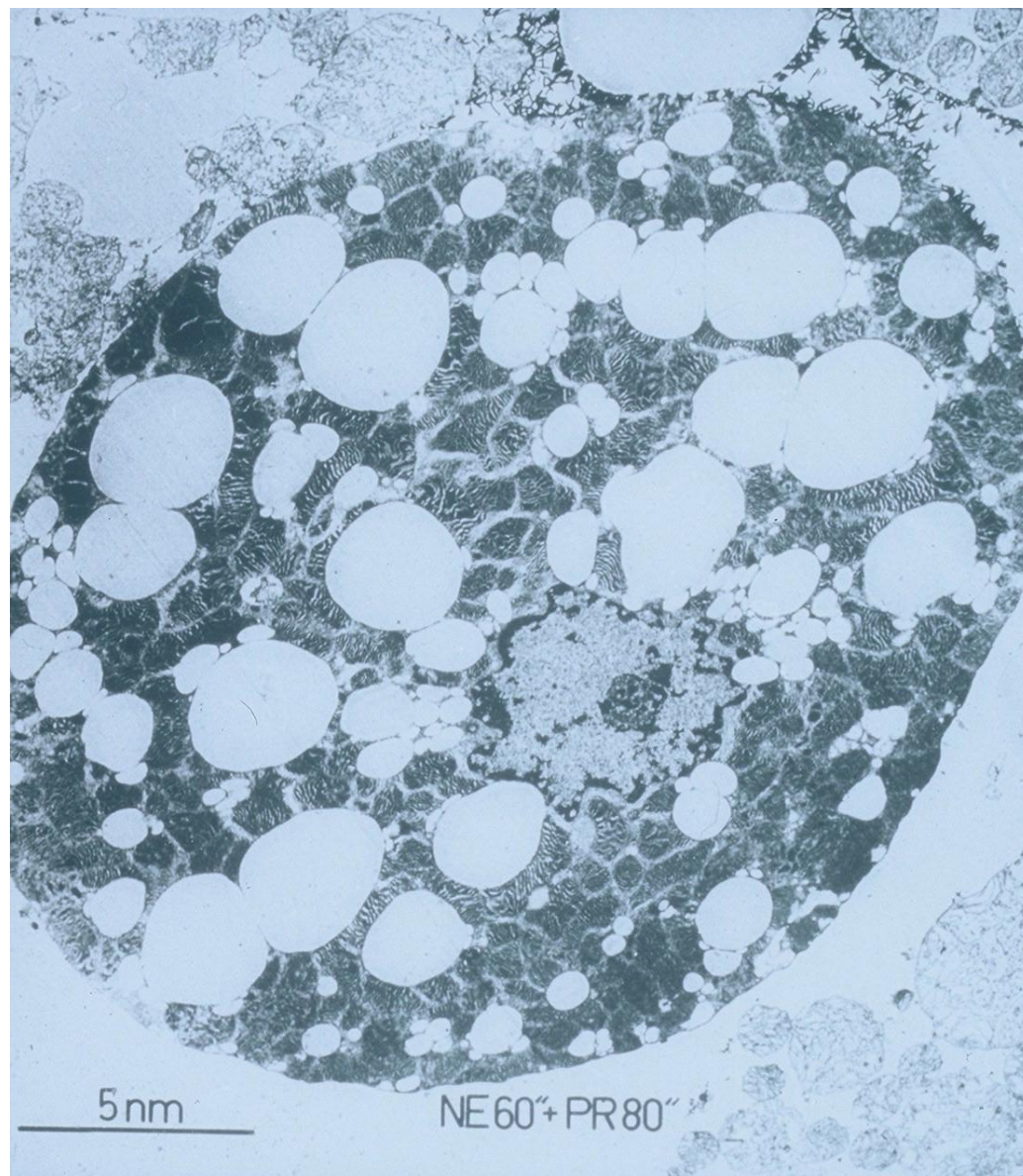


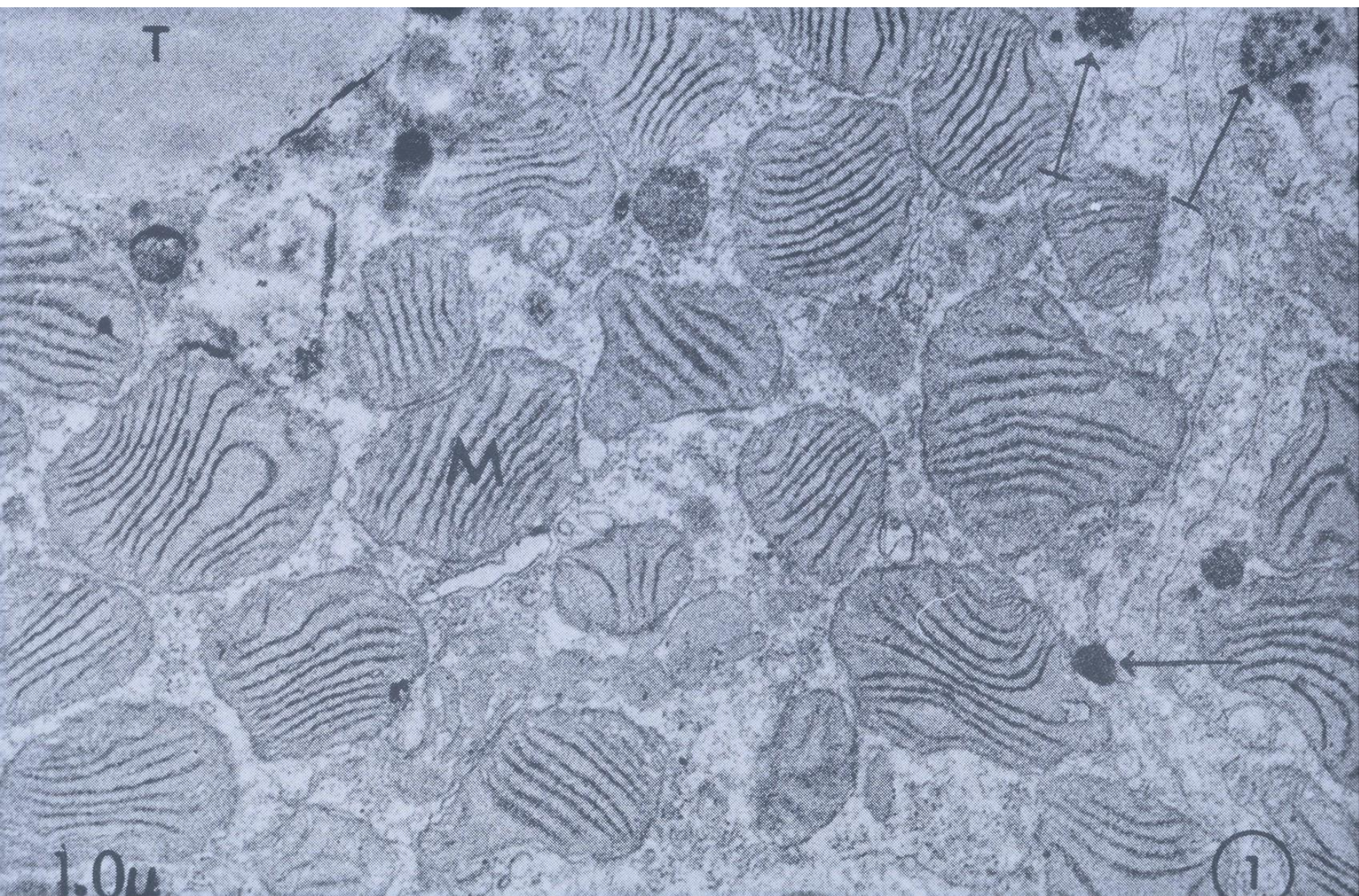
Classically: awakening from hibernation

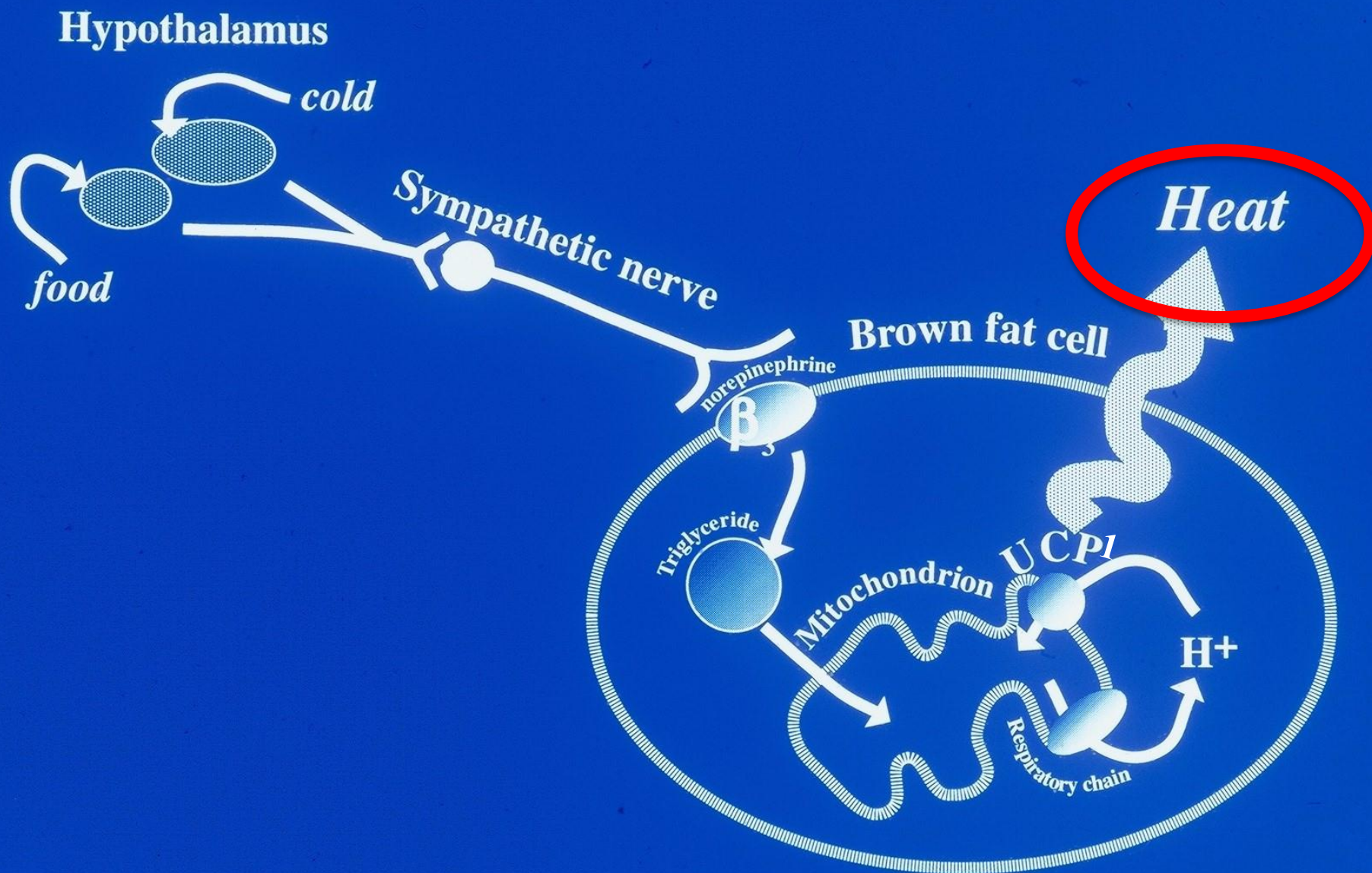


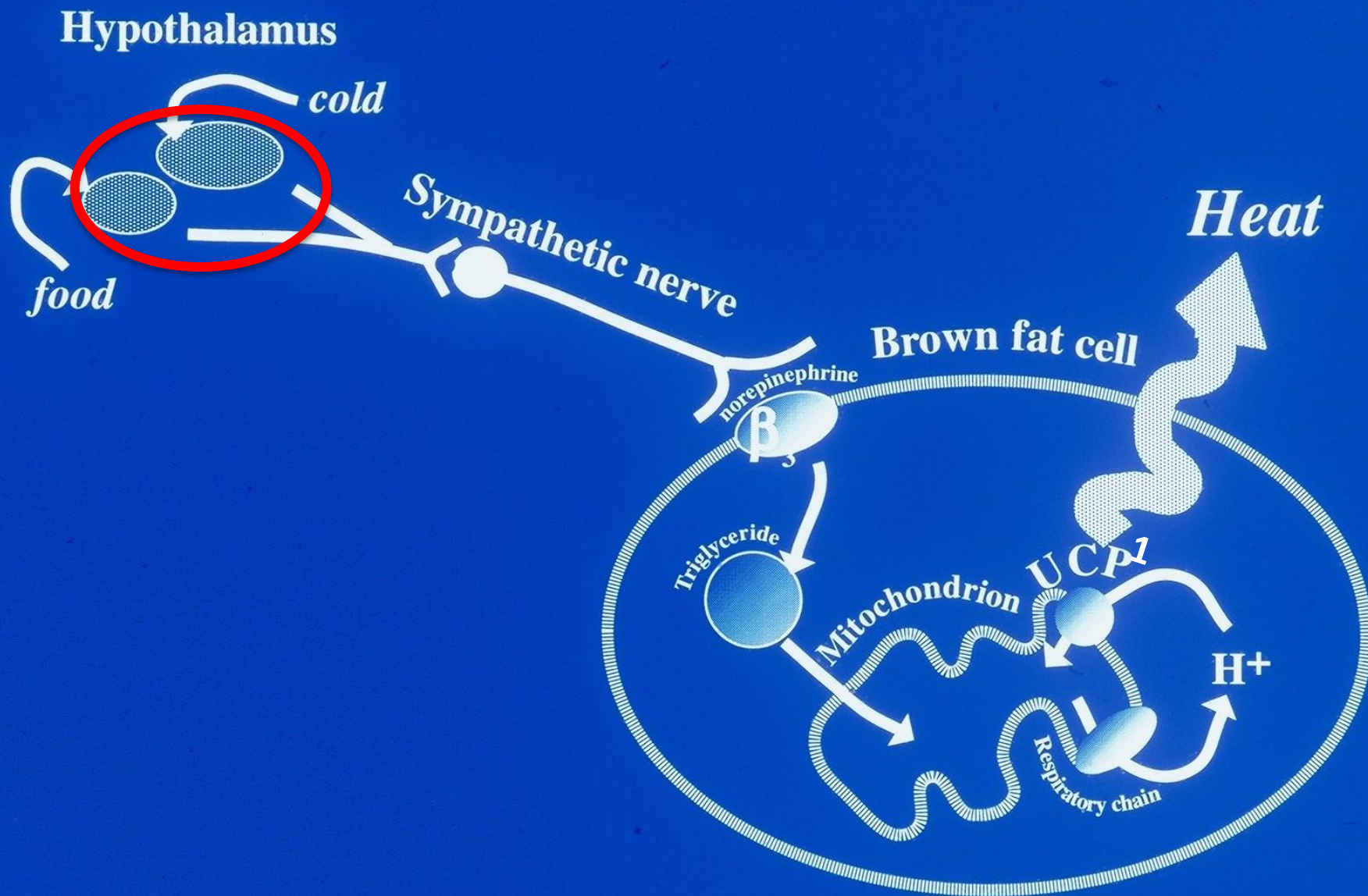
Brown
adipose
tissue

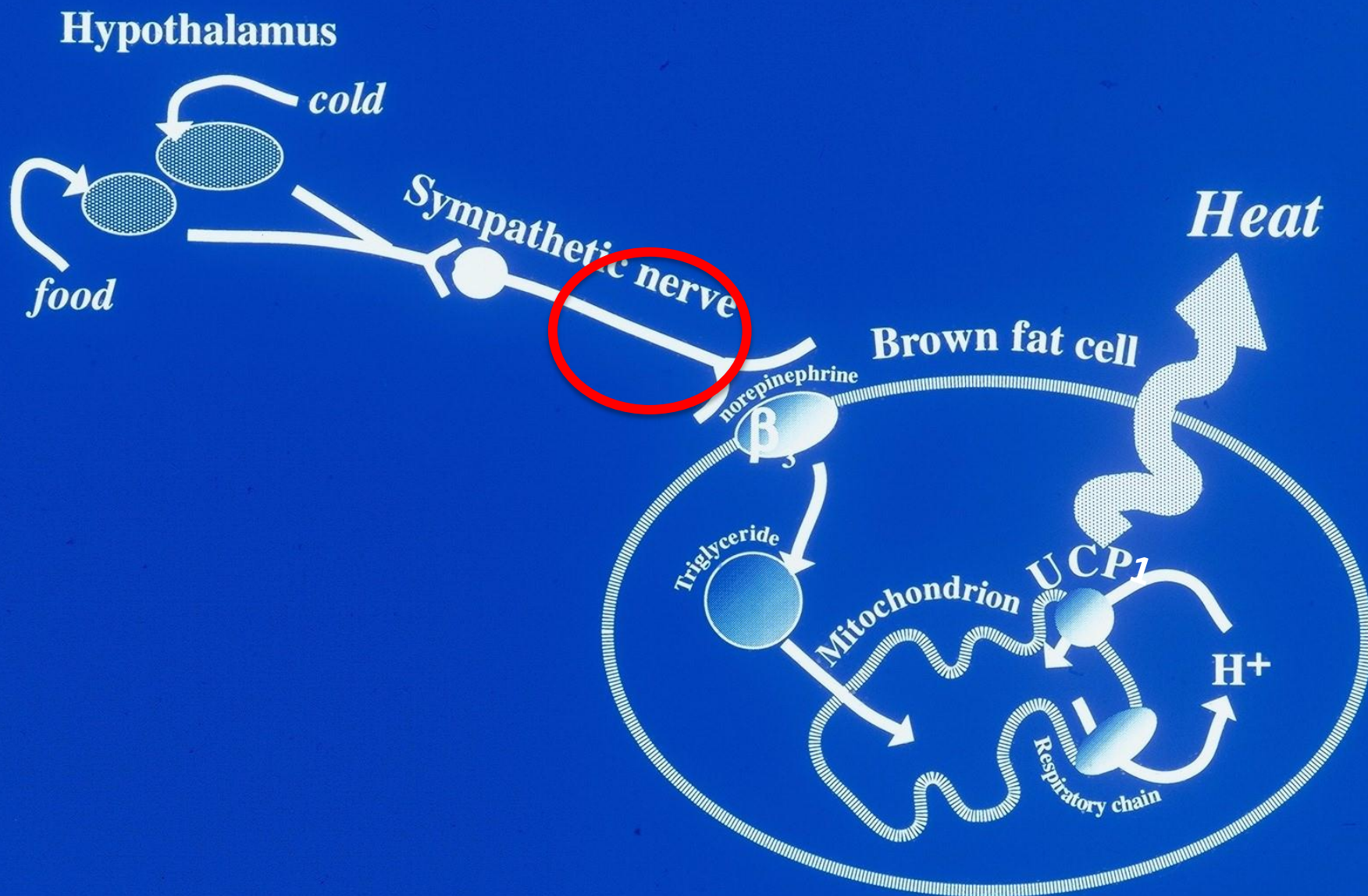


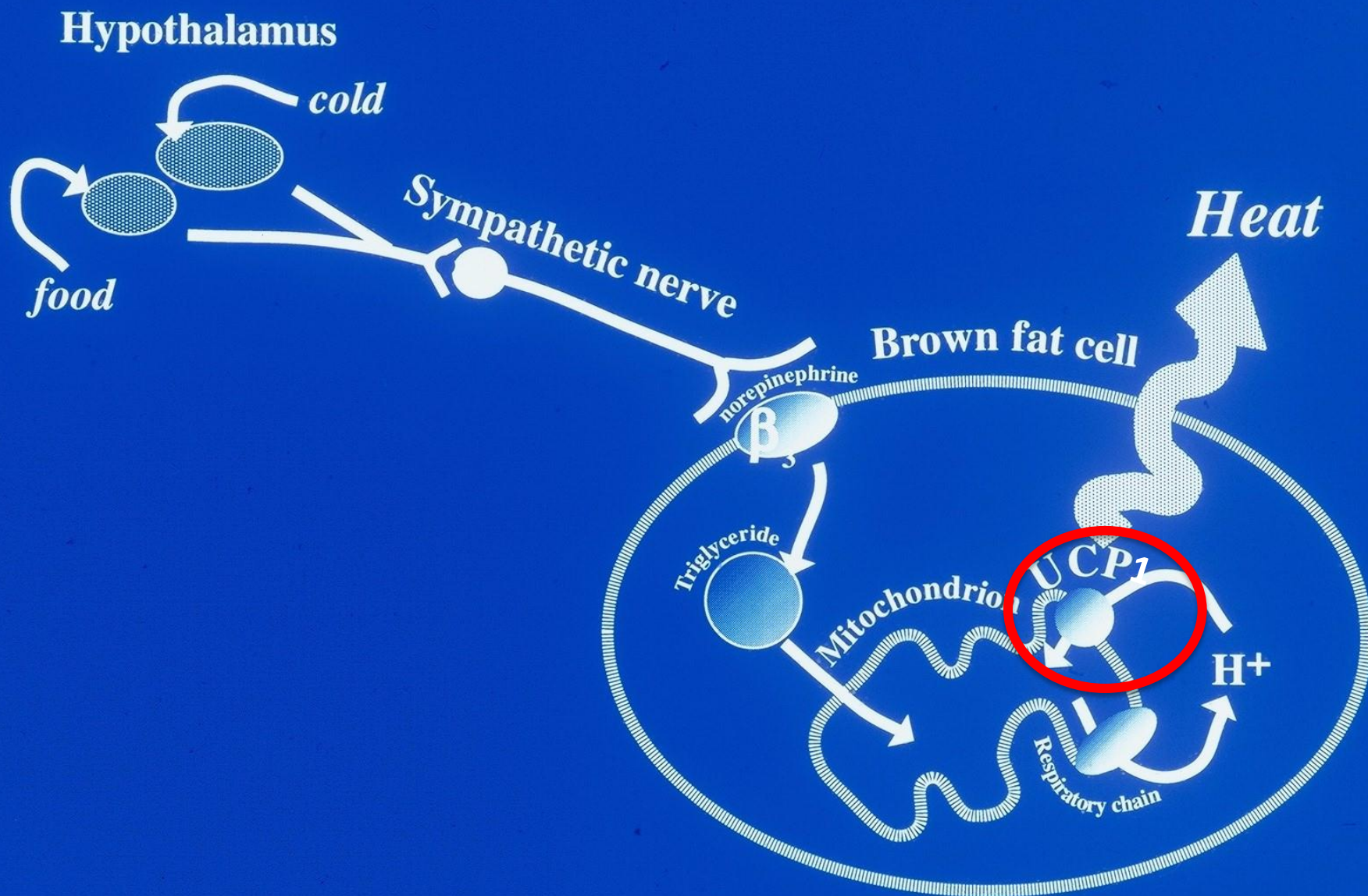


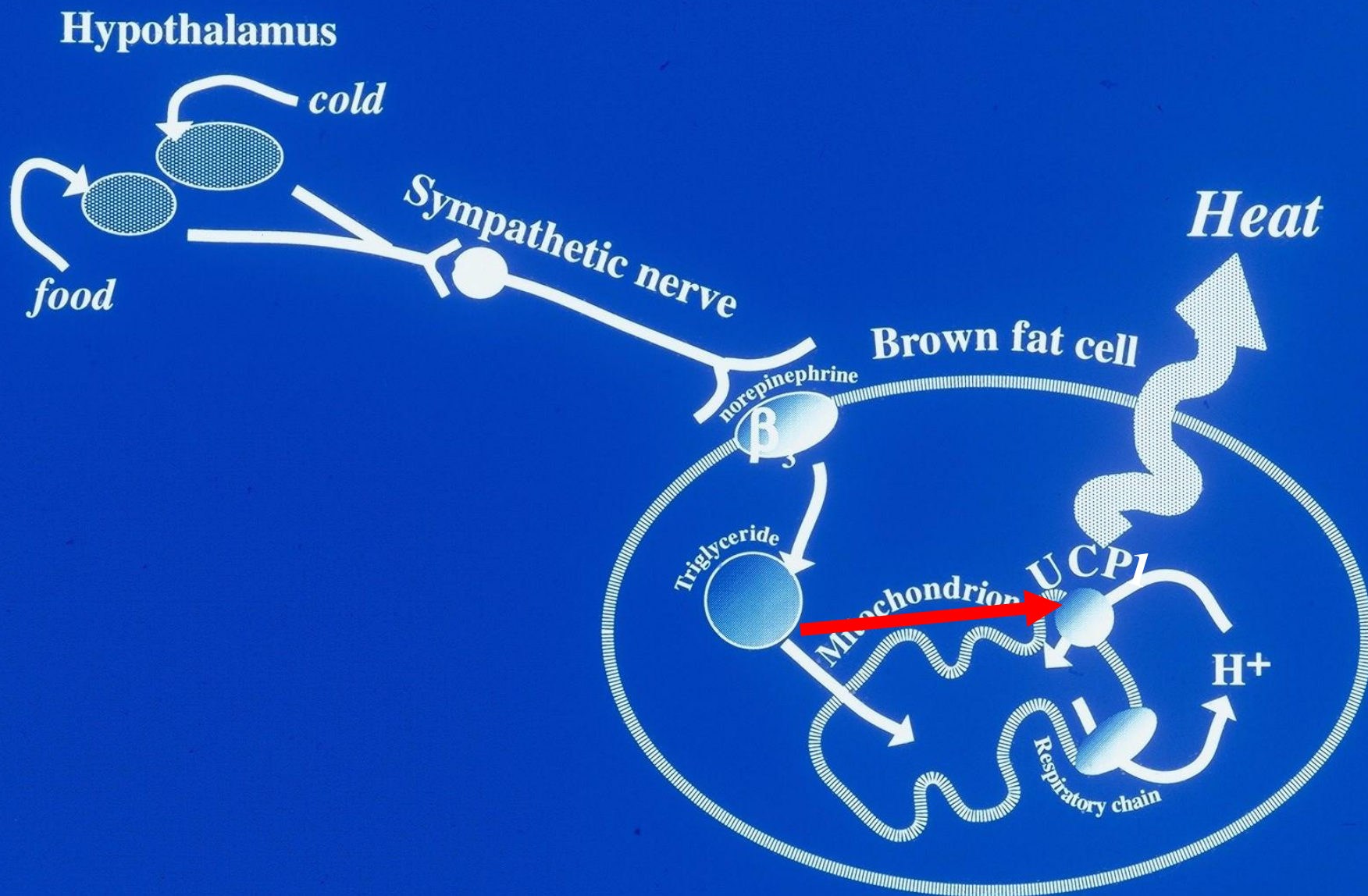












Worldwide increasing metabolic problems



Metabolic syndrome*:

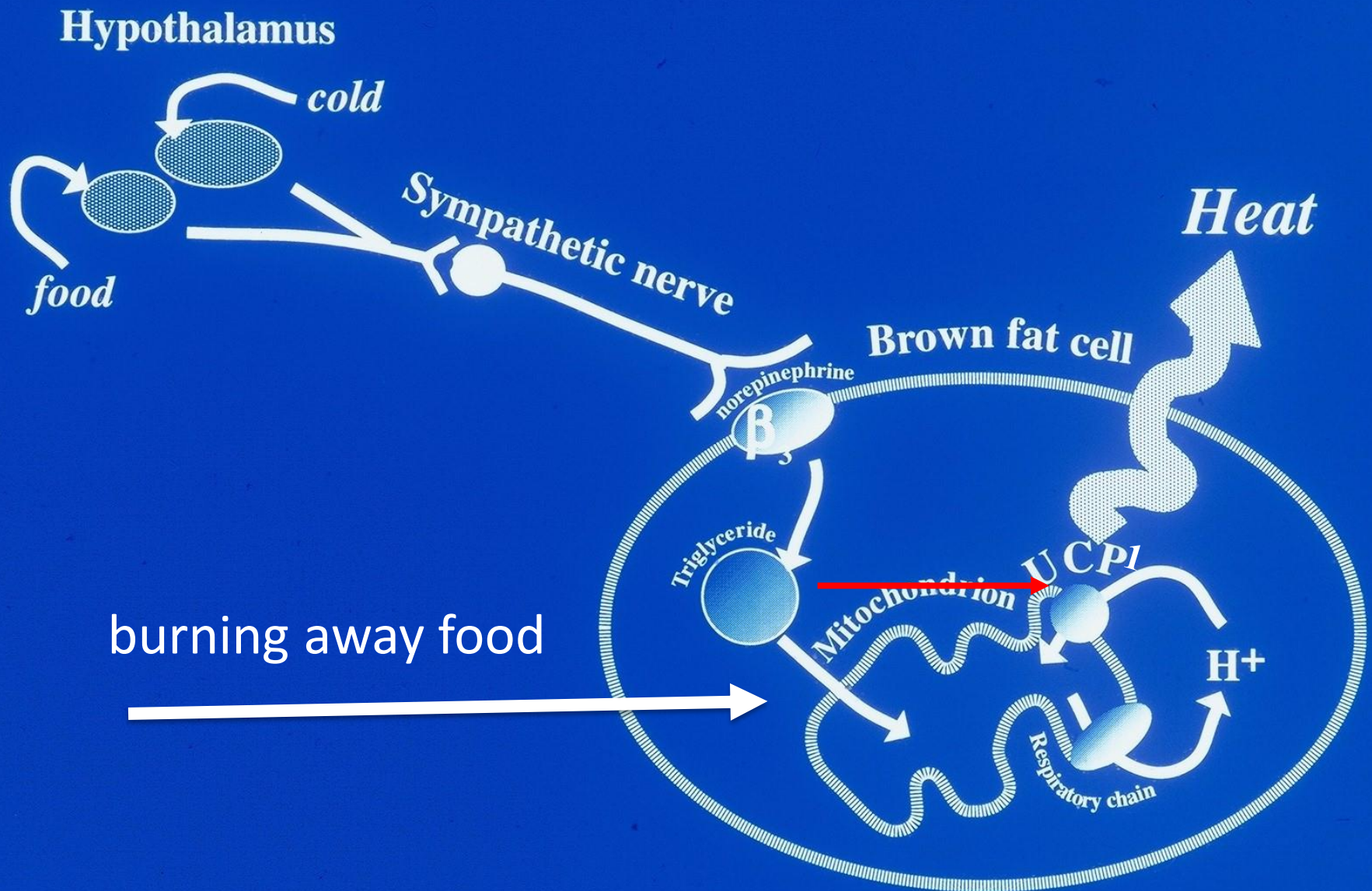
- **Central obesity**

plus any two of the following four factors:

- **raised triglycerides level in blood**
- **reduced HDL cholesterol in blood**
- **raised blood pressure**
- **raised fasting plasma glucose or type 2 diabetes (insulin resistance)**

Active brown adipose tissue has the capacity to modulate most of above parameters

* newest IDF definition



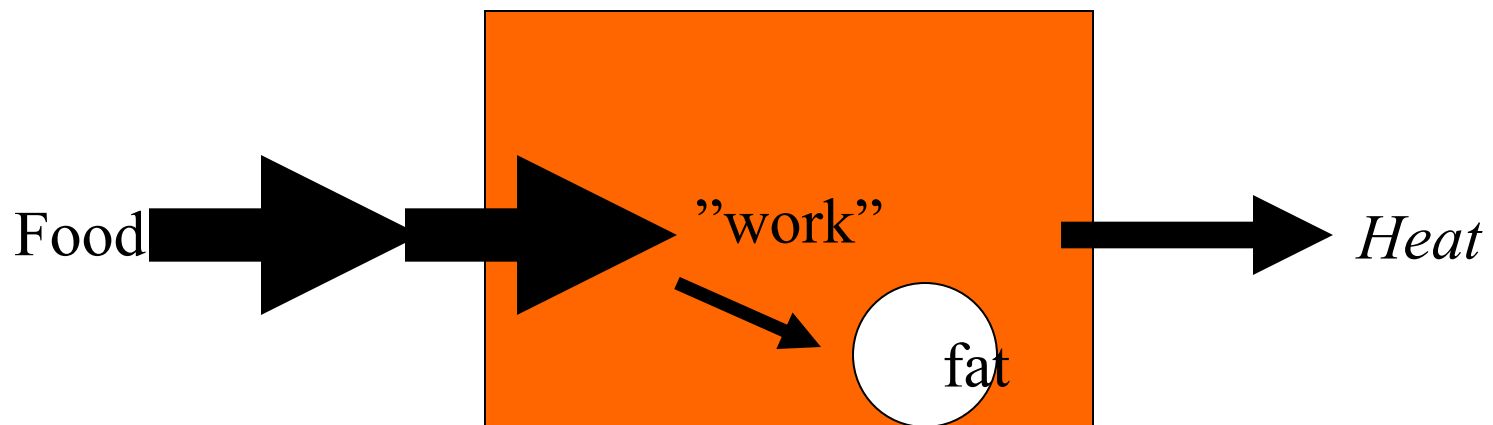


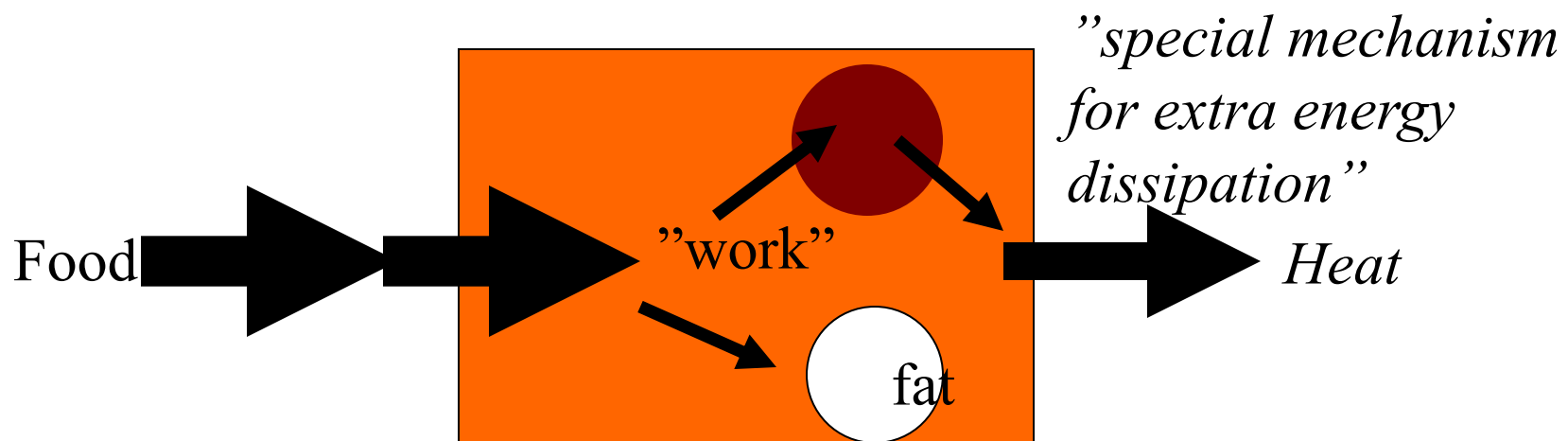


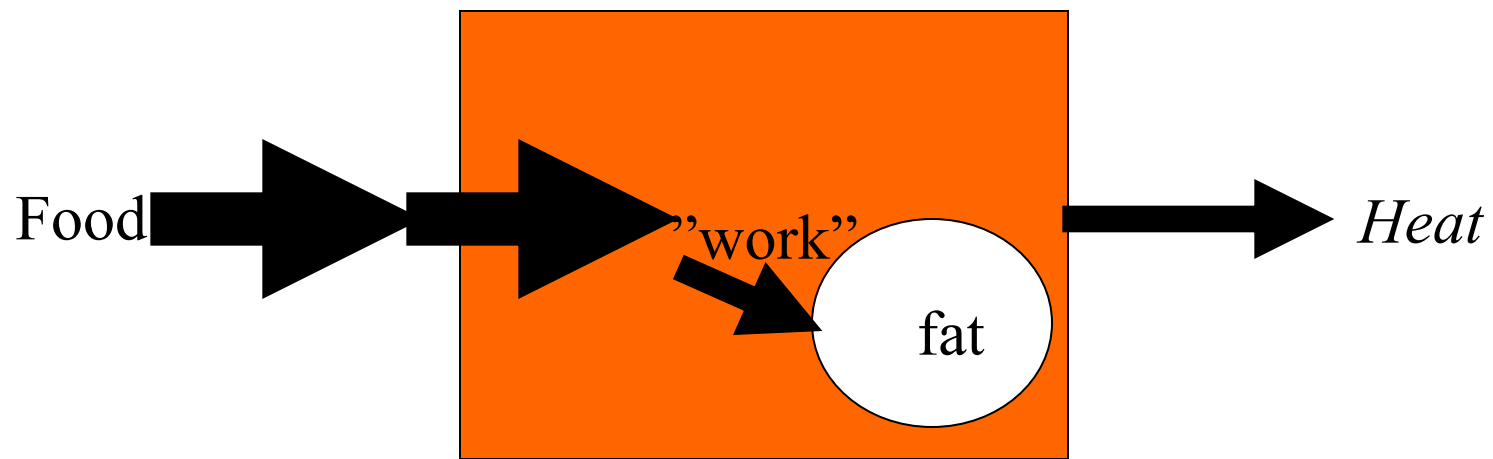
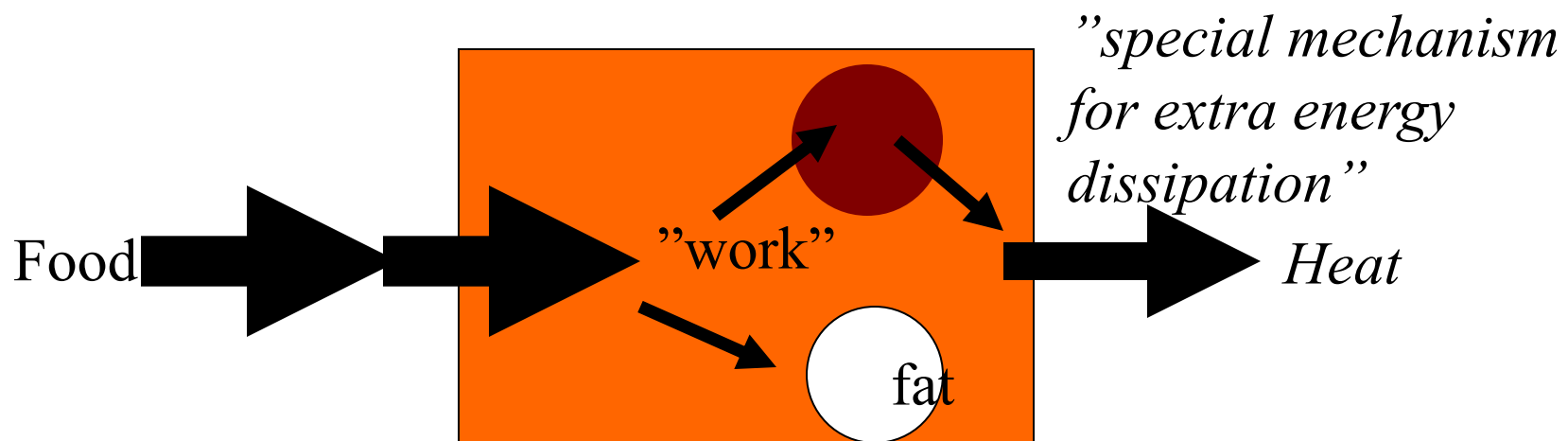
we can abstain - but what if we eat?

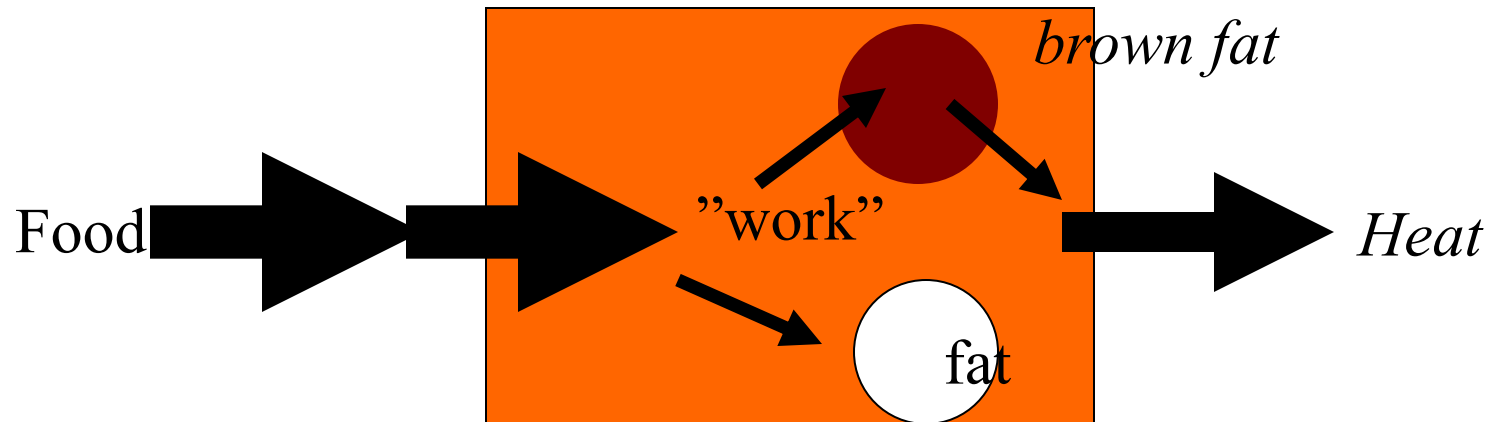
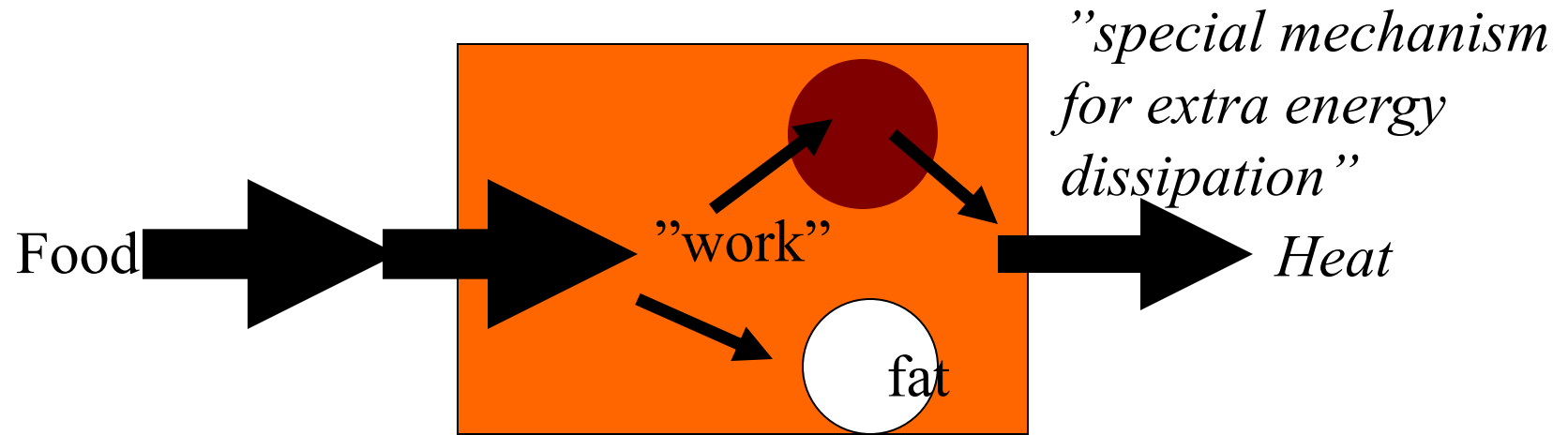


we can abstain - but what if we eat?



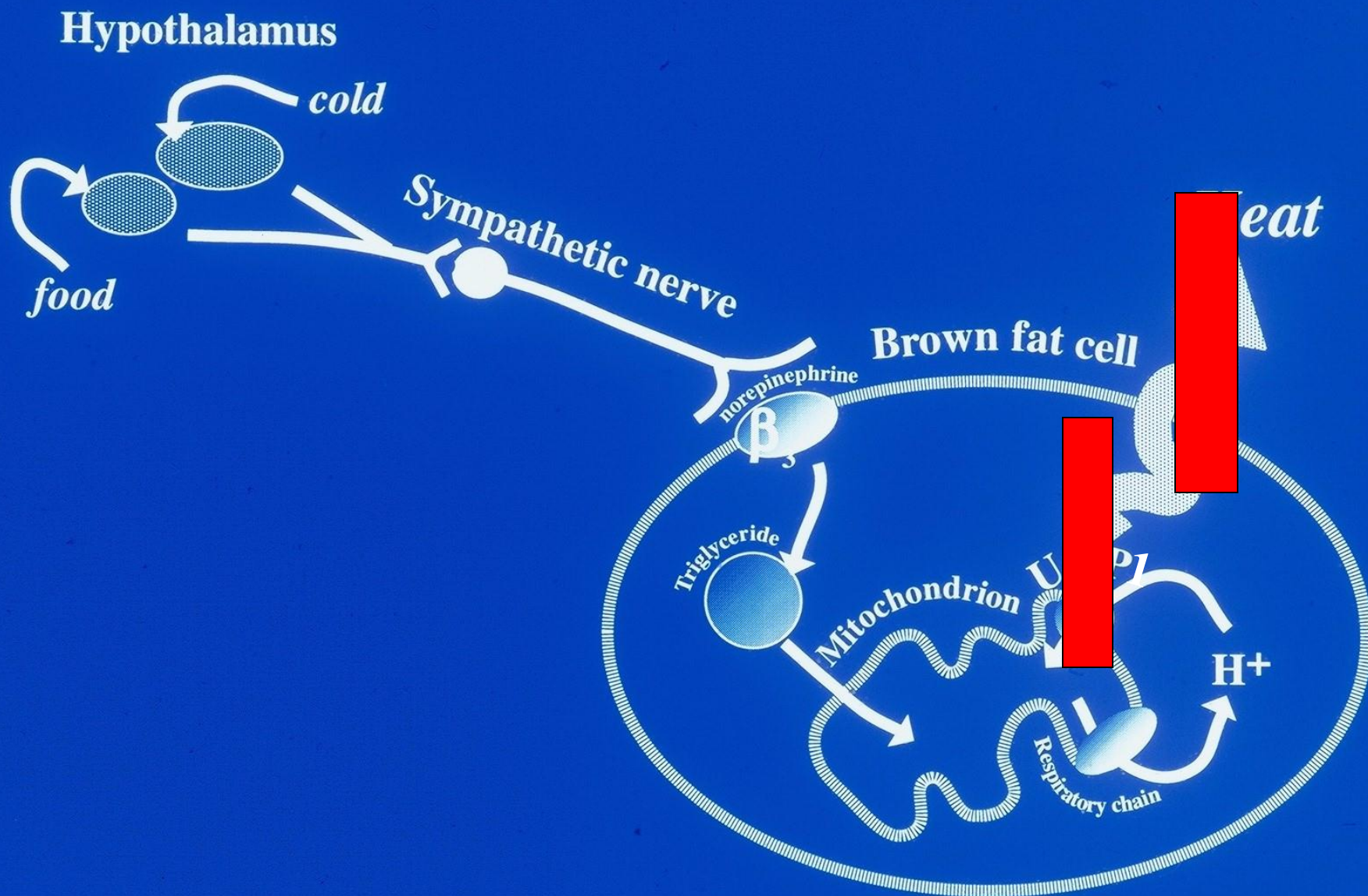


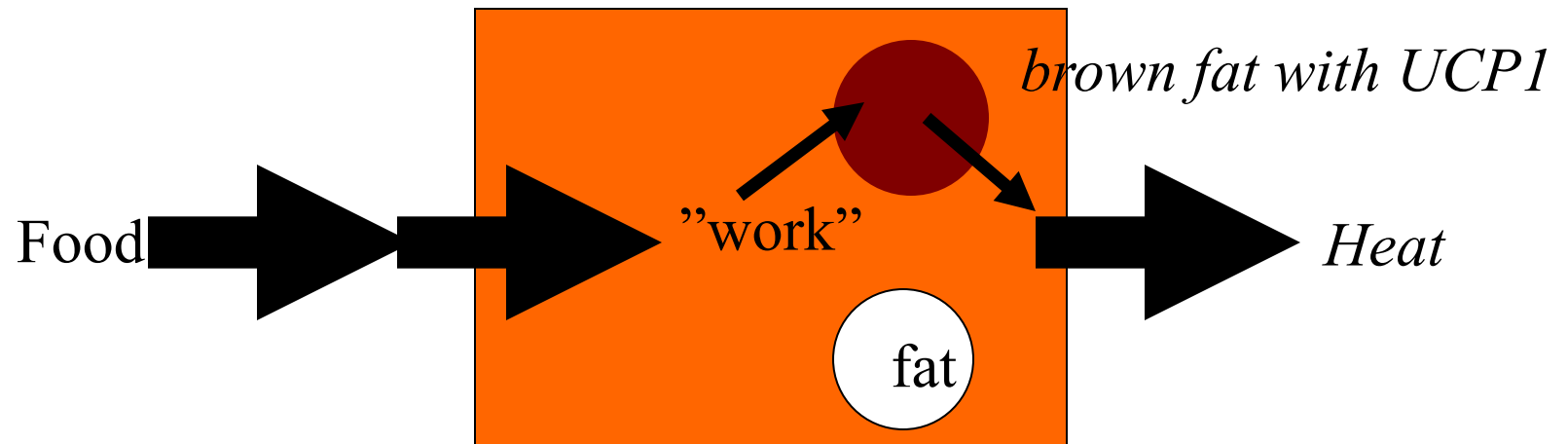


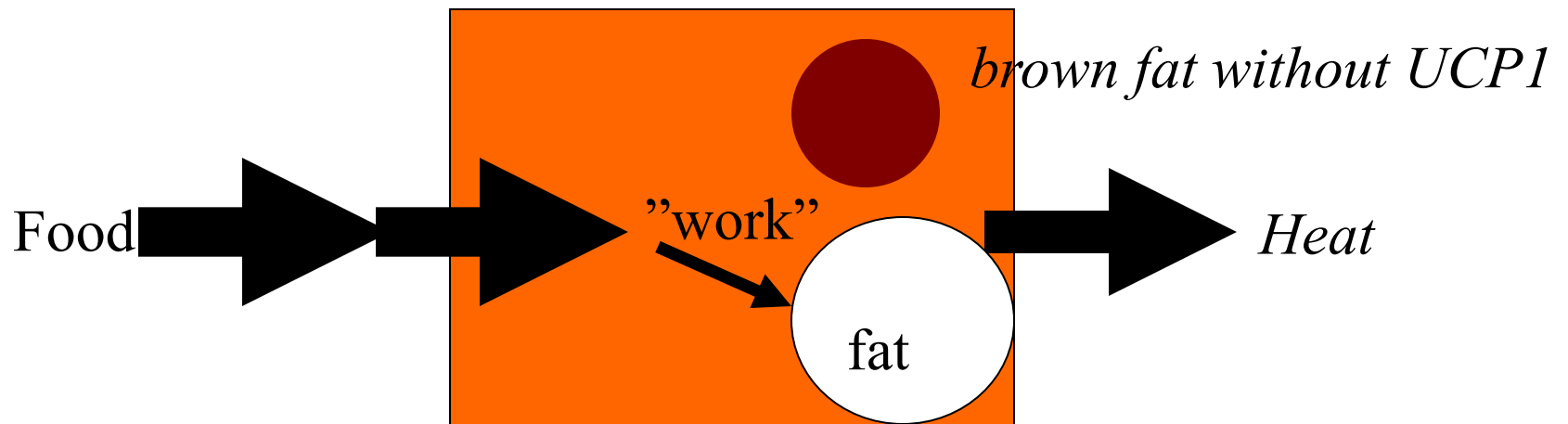


- ***such a special mechanism exists (diet-induced thermogenesis)***
- ***and that it is entirely located to brown adipose tissue***

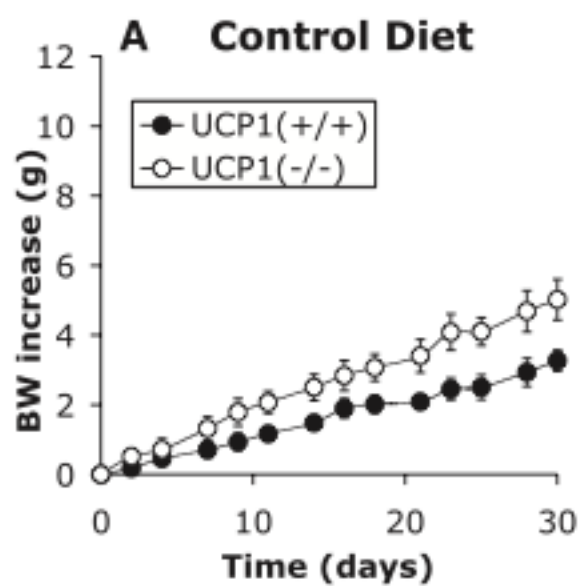
What are the consequences
of lack of
brown fat thermogenesis?

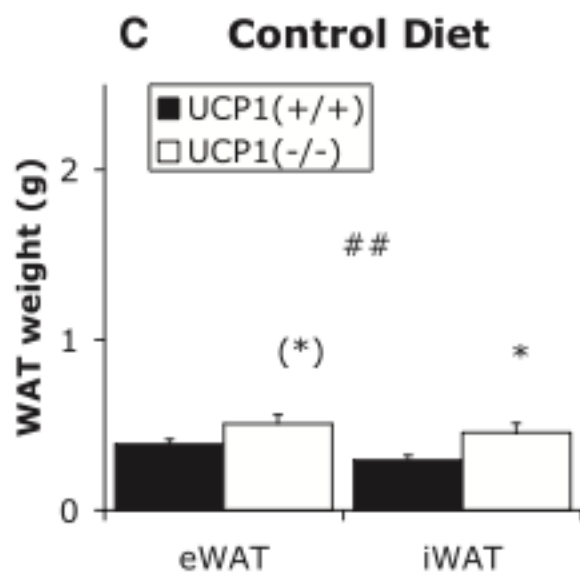
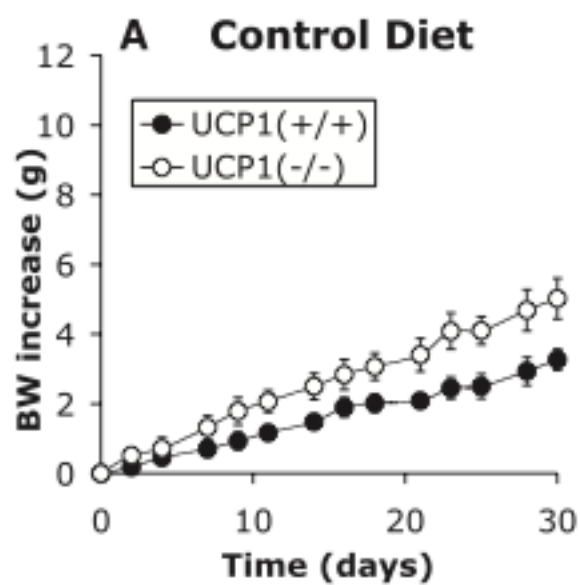






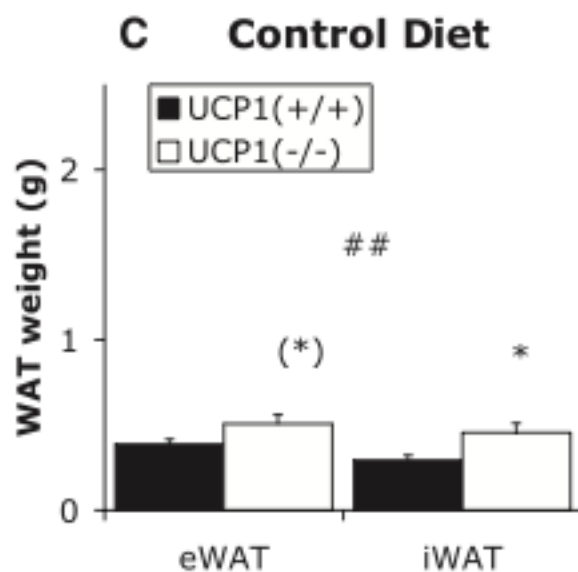
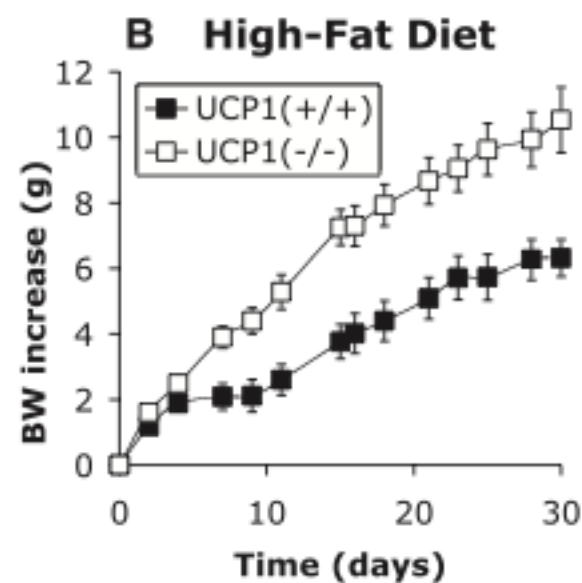
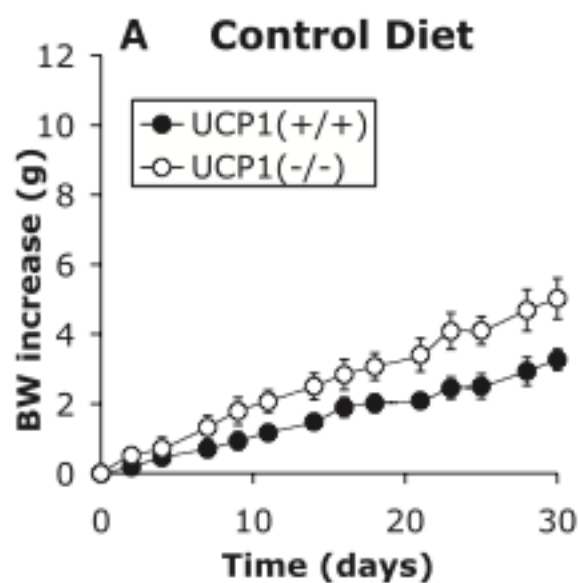
Thus, animals/humans without UCP1
should become obese

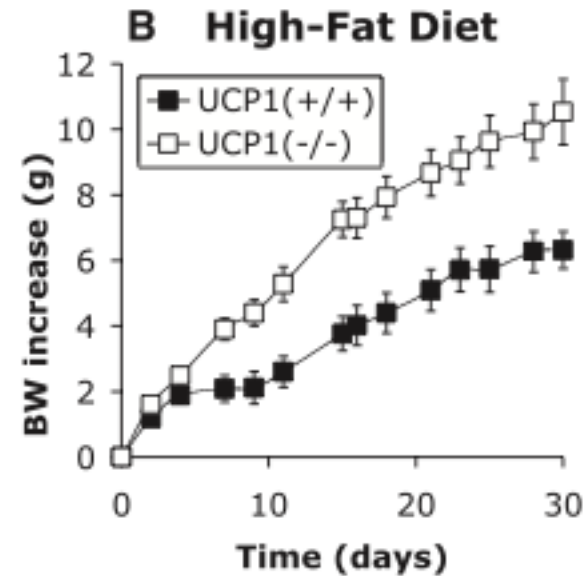
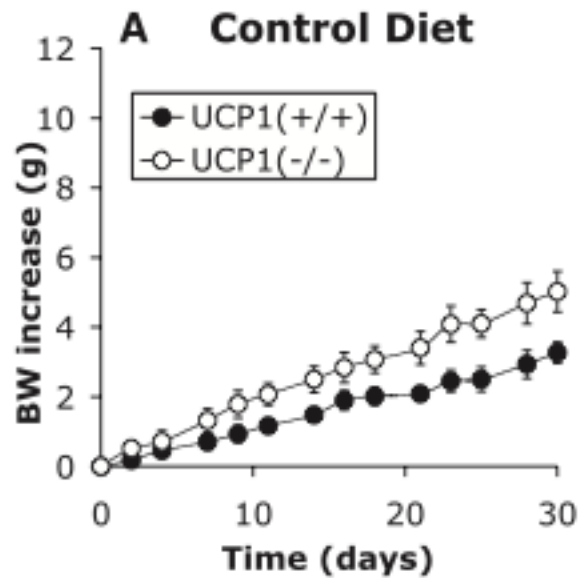




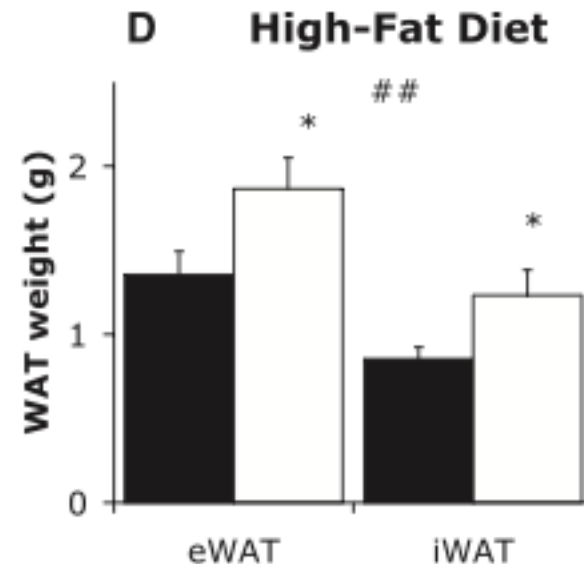
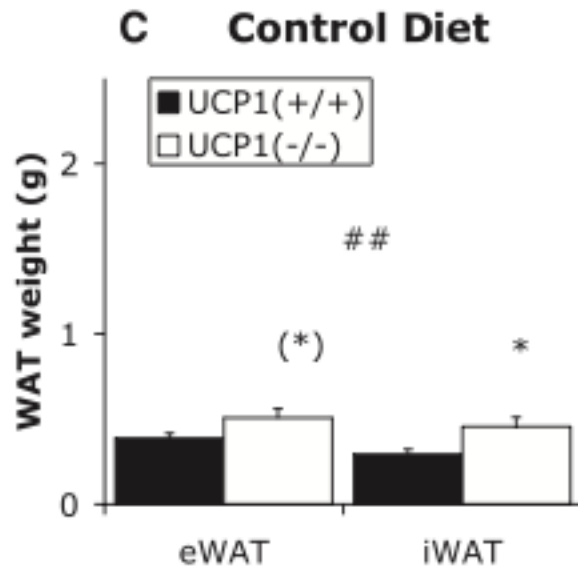


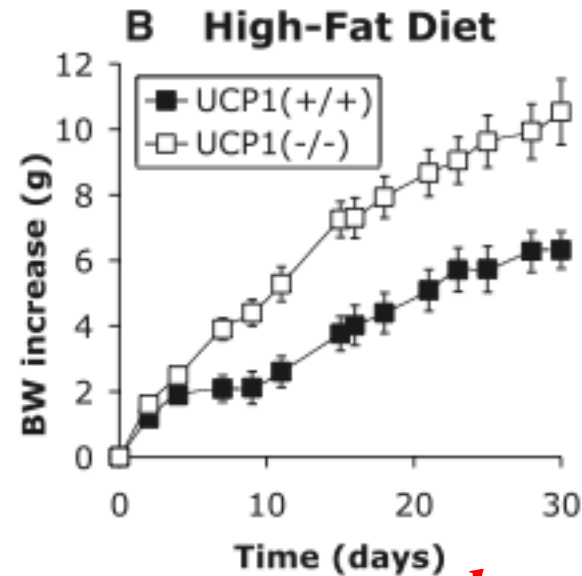
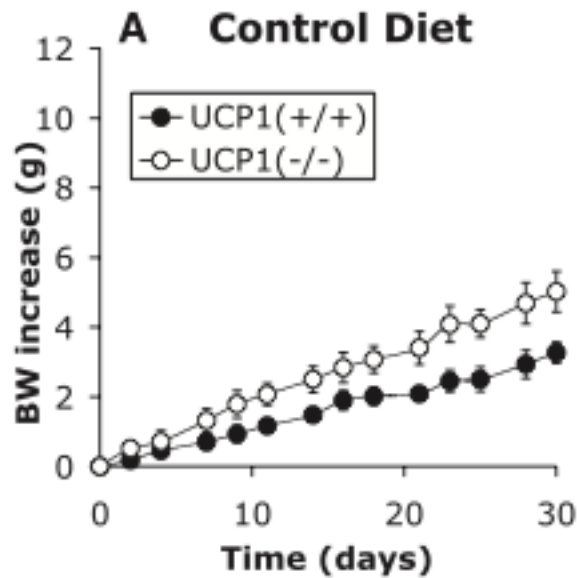
**Effect of
high fat diet**





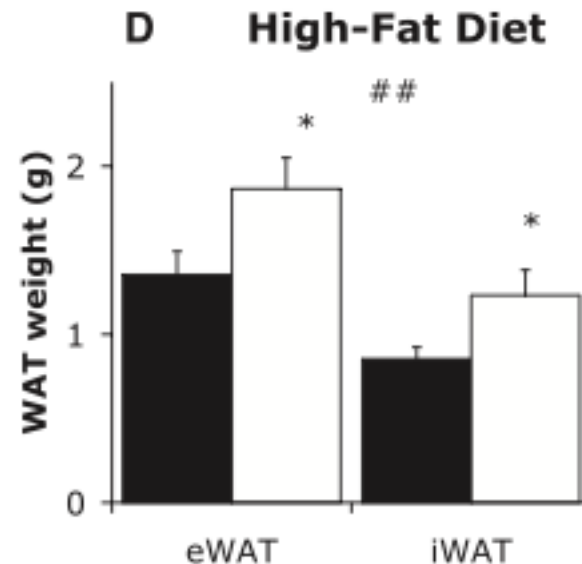
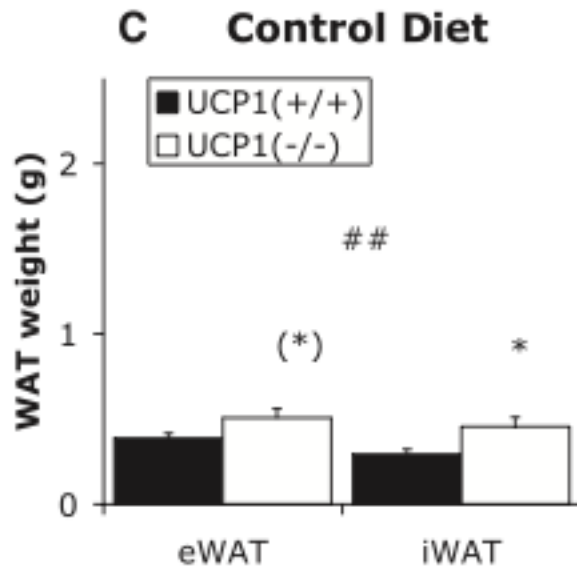
*Without
brown fat
mice
become
fatter*



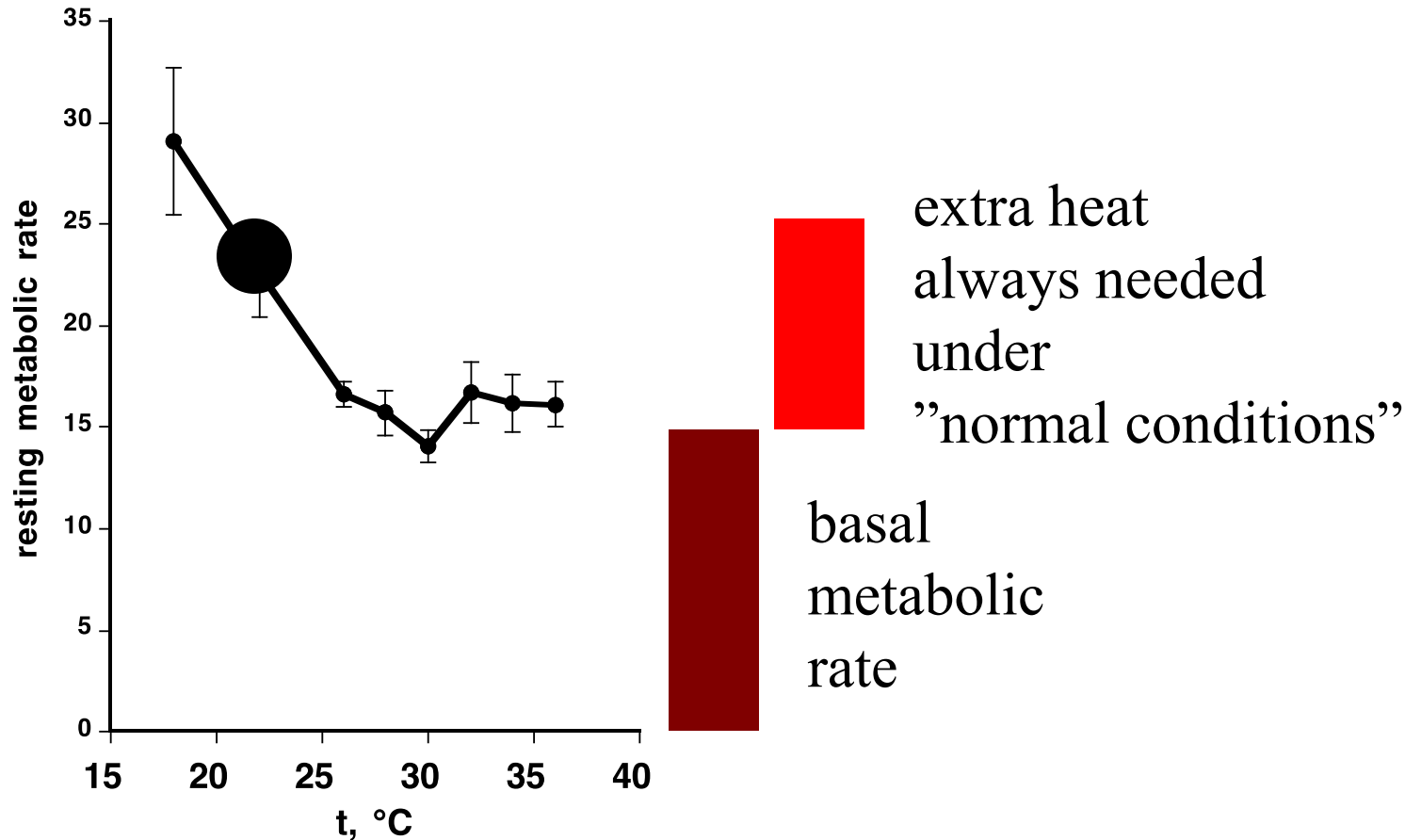


*Without
brown fat
mice
become
fatter*

at thermoneutrality!

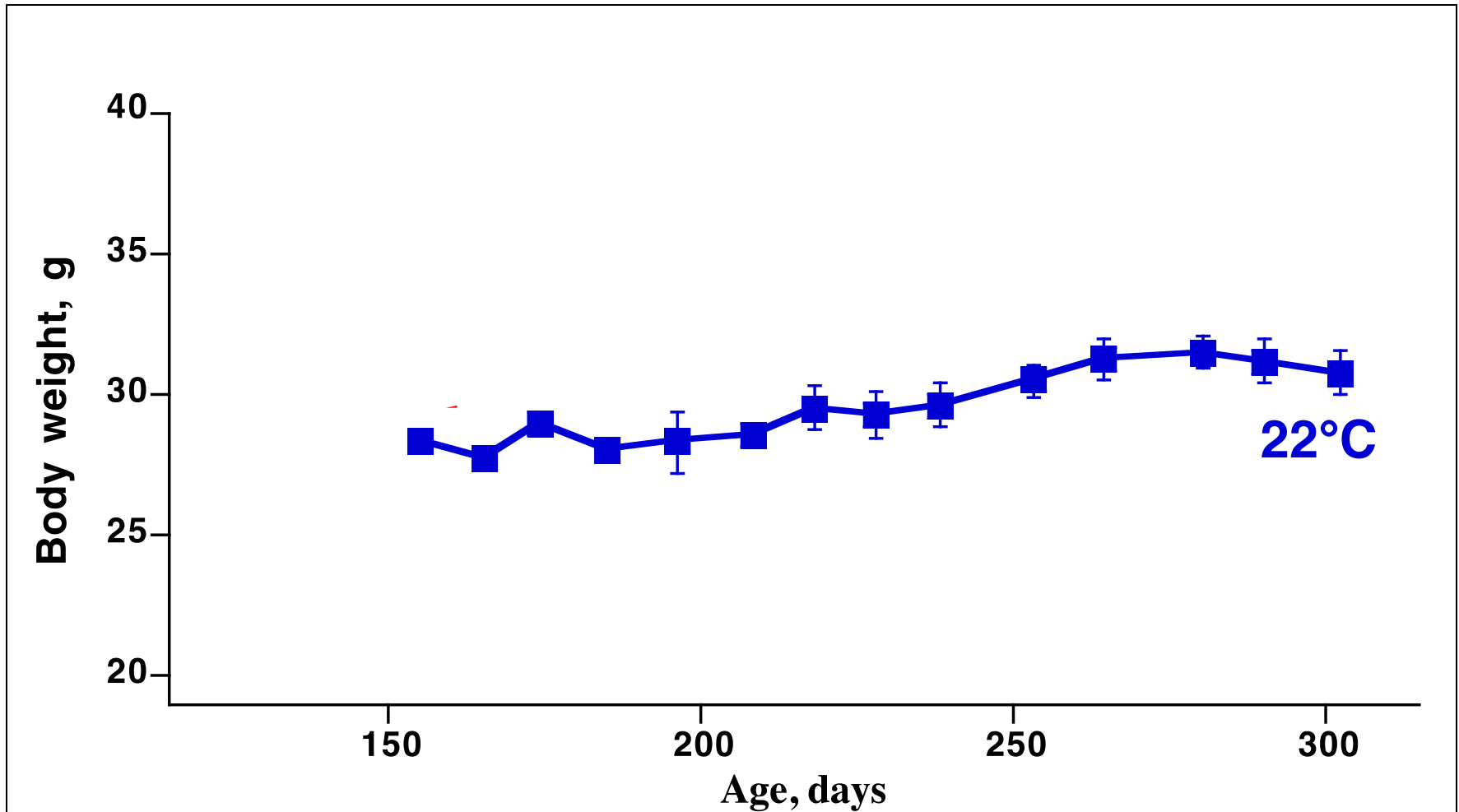


***“Normal” conditions impose
a constant large metabolic stress on mice***



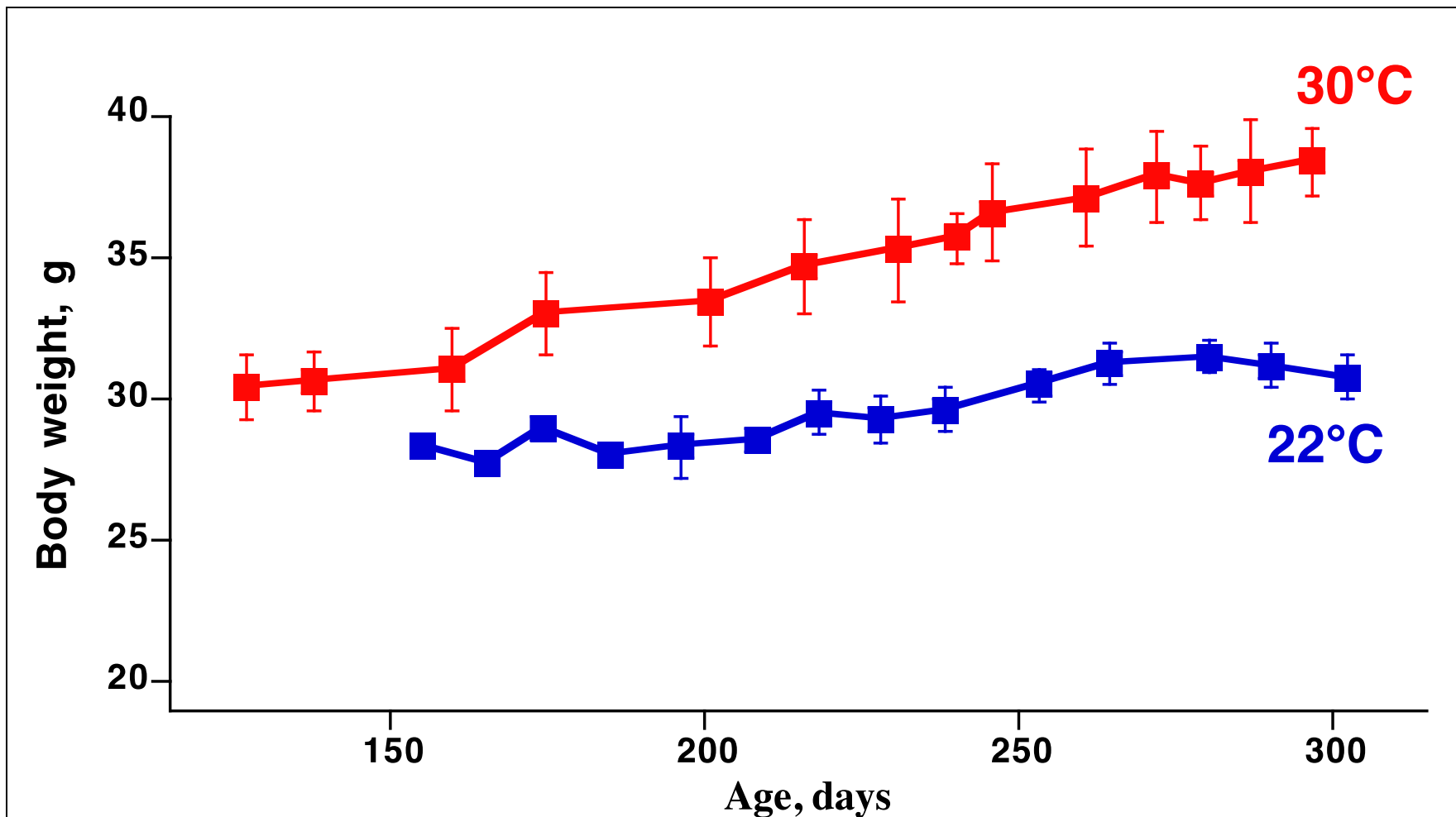
Body weight

wild-type mice



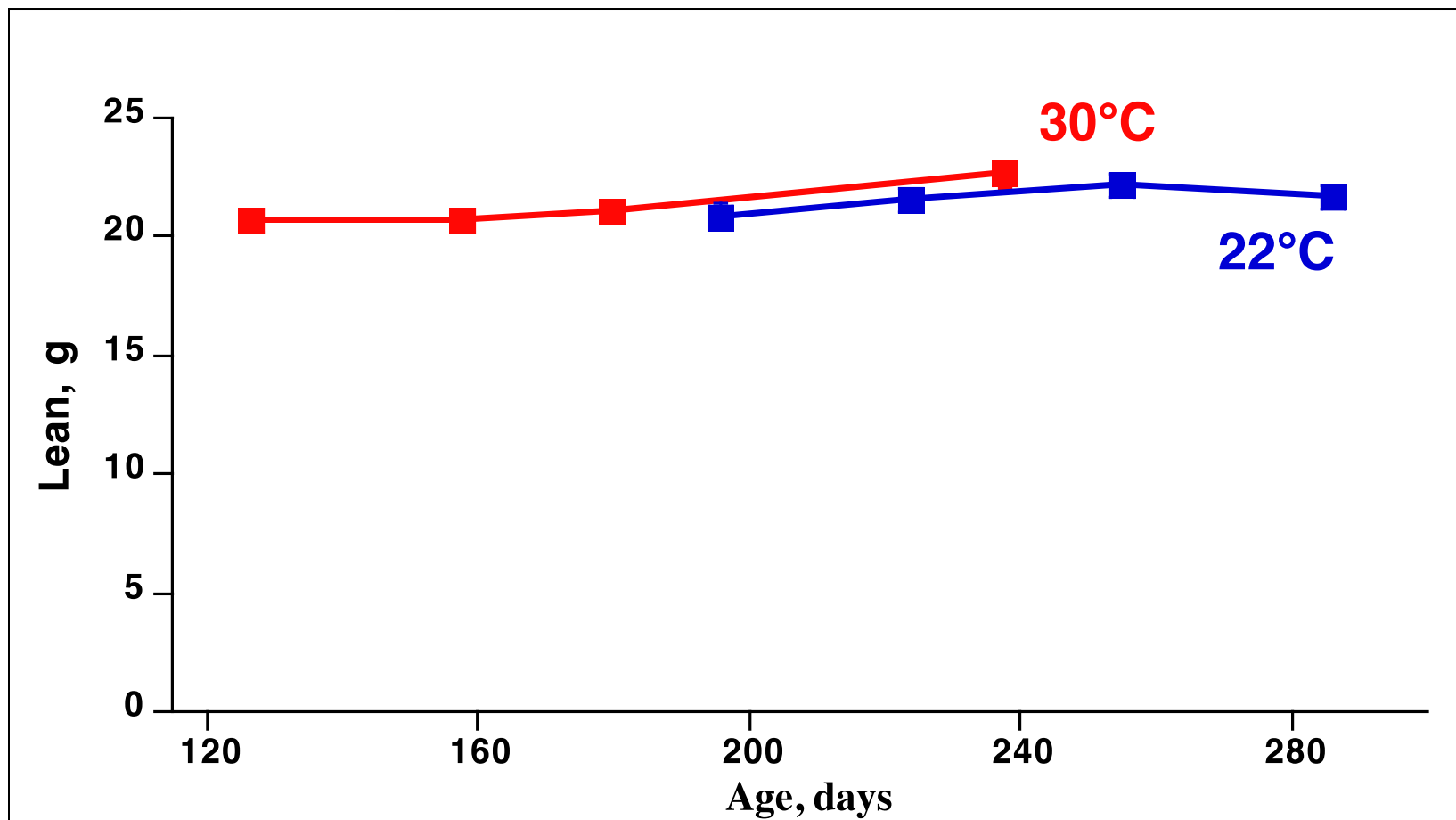
Body weight

wild-type mice



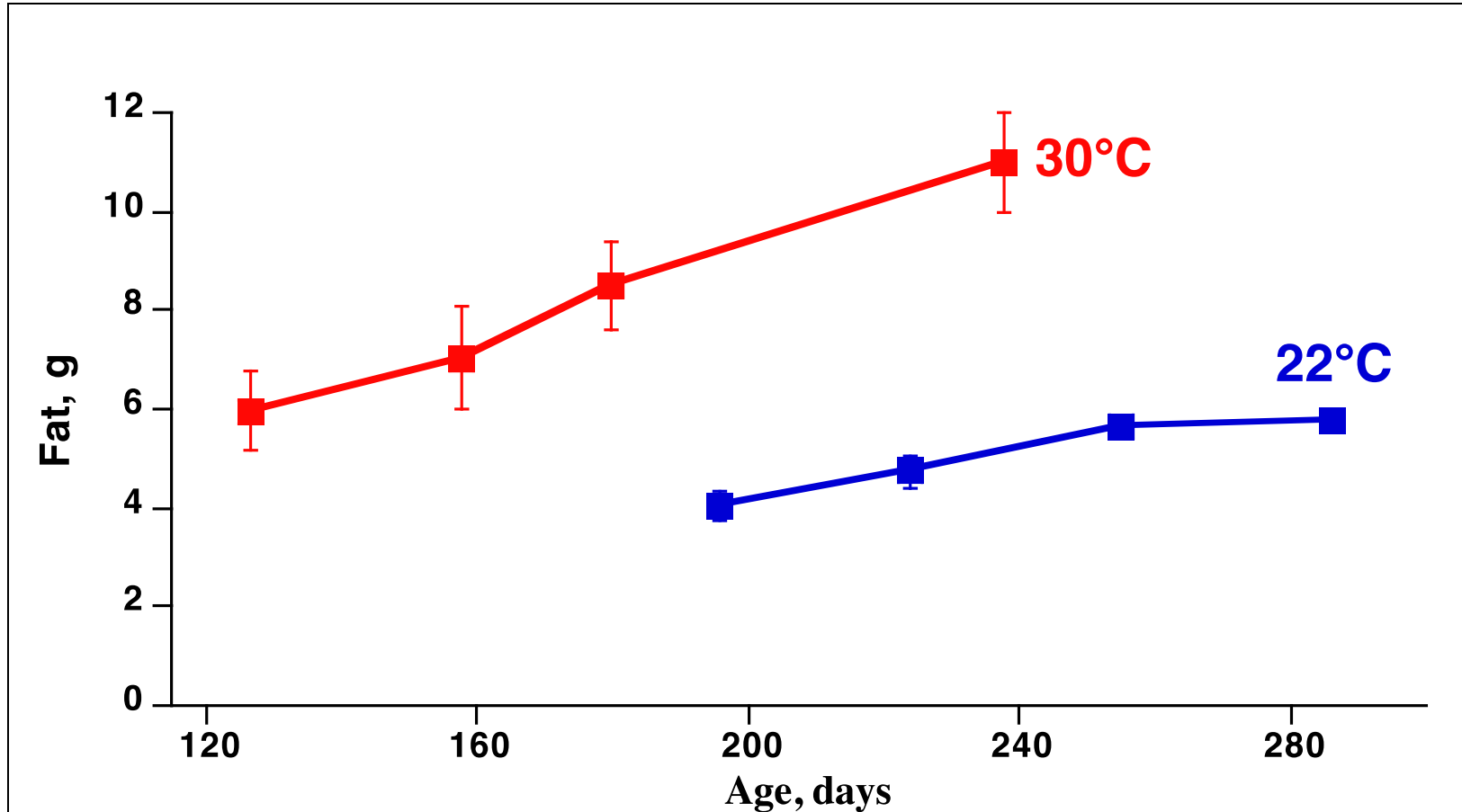
wild-type mice

No effect on lean mass:



wild-type mice

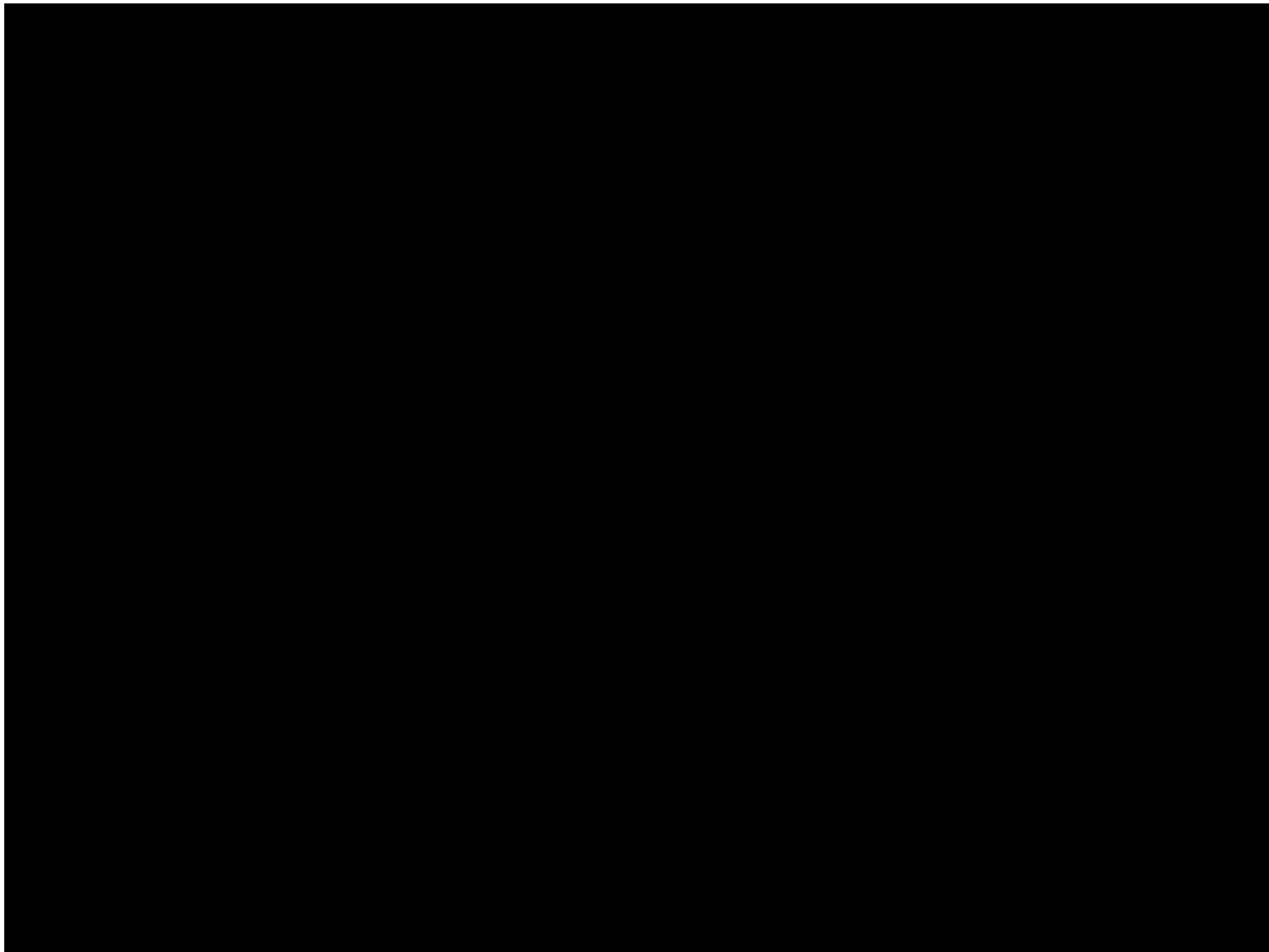
- so everything has to be fat accumulation:



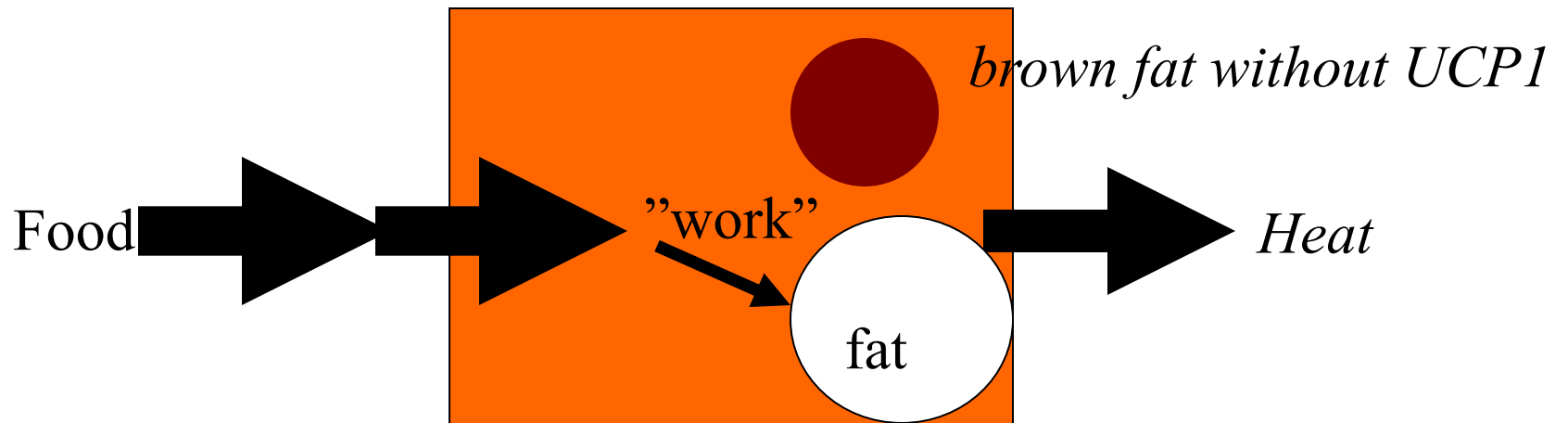
*Thus, simply performing experiments
at a temperature without thermal stress
results in a large change in metabolic phenotype....*

*- the 30 ° C-phenotype of mice is probably
a better model of adult man....*

*("humanized" temperature conditions
have at least as large effects on metabolism
as many molecular manipulations)*

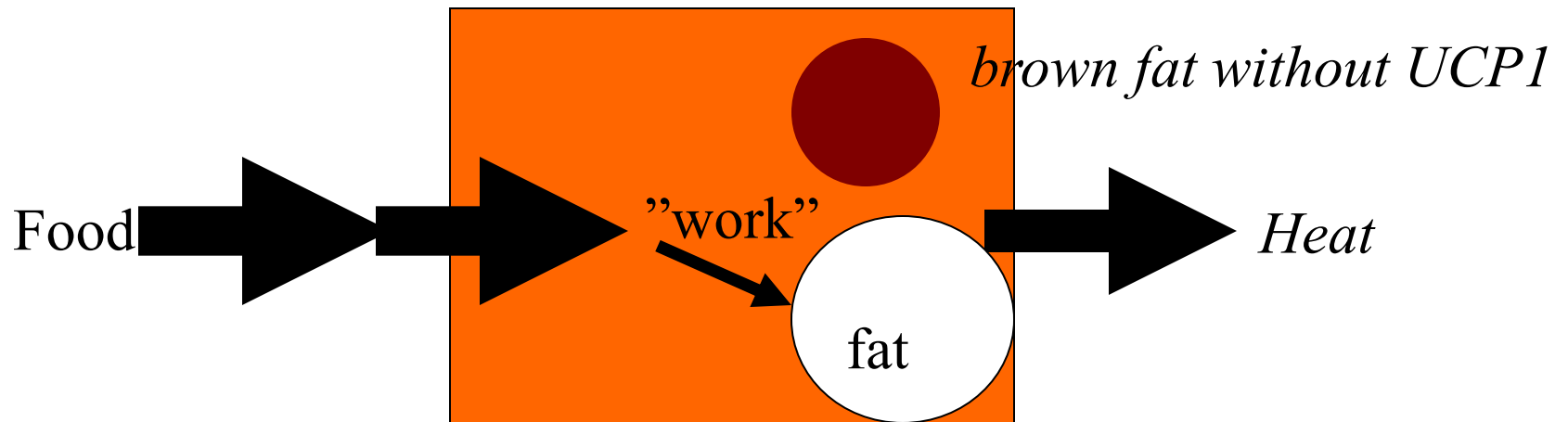


Bautista//Julius 2007



Thus, animals without UCP1
become obese!

i.e. brown fat protects against obesity



Thus, animals without UCP1
become obese!

Worldwide increasing metabolic problems



Metabolic syndrome*:

- **Central obesity**

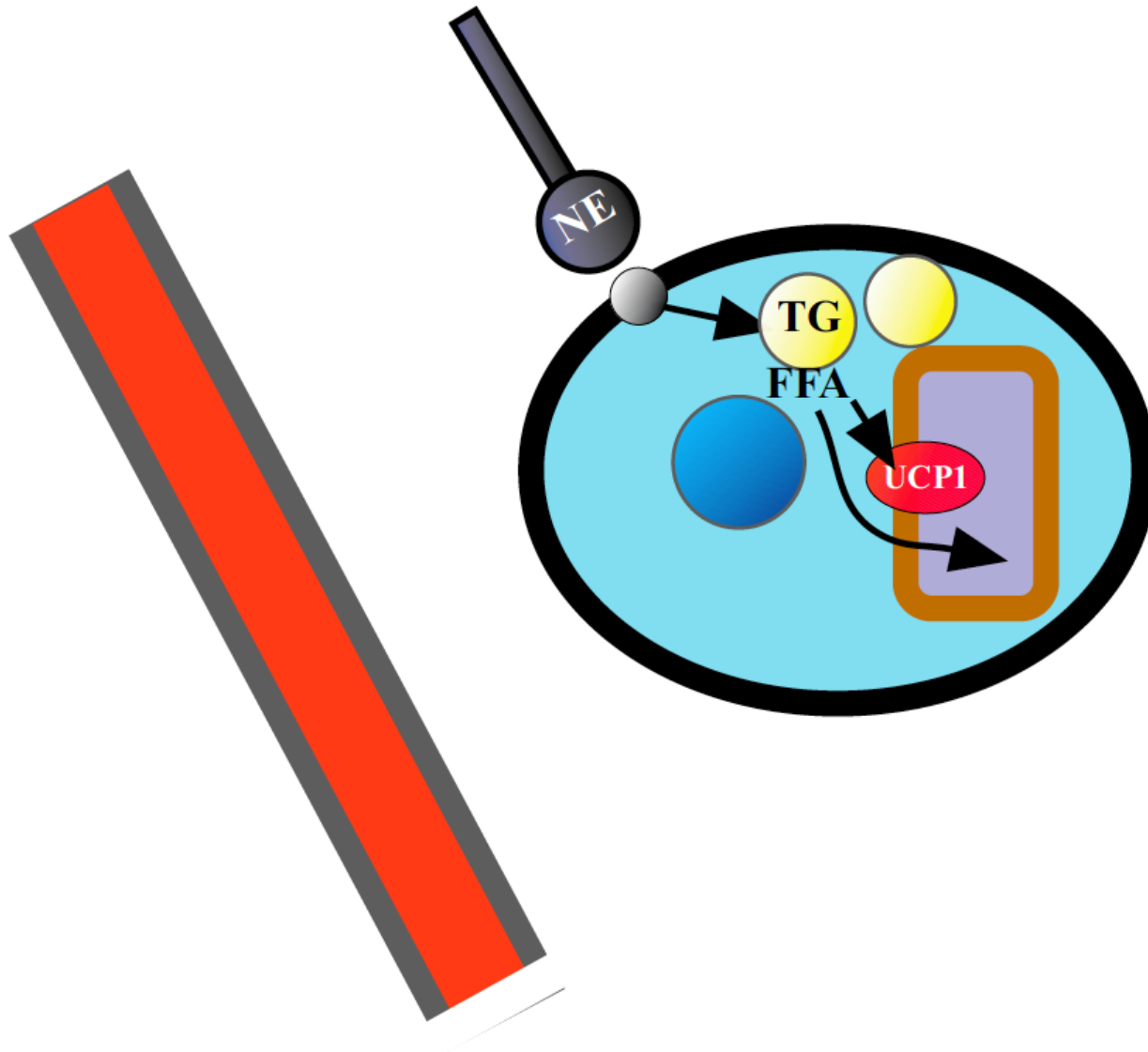
plus any two of the following four factors:

- **raised triglycerides level in blood**
- **reduced HDL cholesterol in blood**
- **raised blood pressure**
- **raised fasting plasma glucose or type 2 diabetes (insulin resistance)**

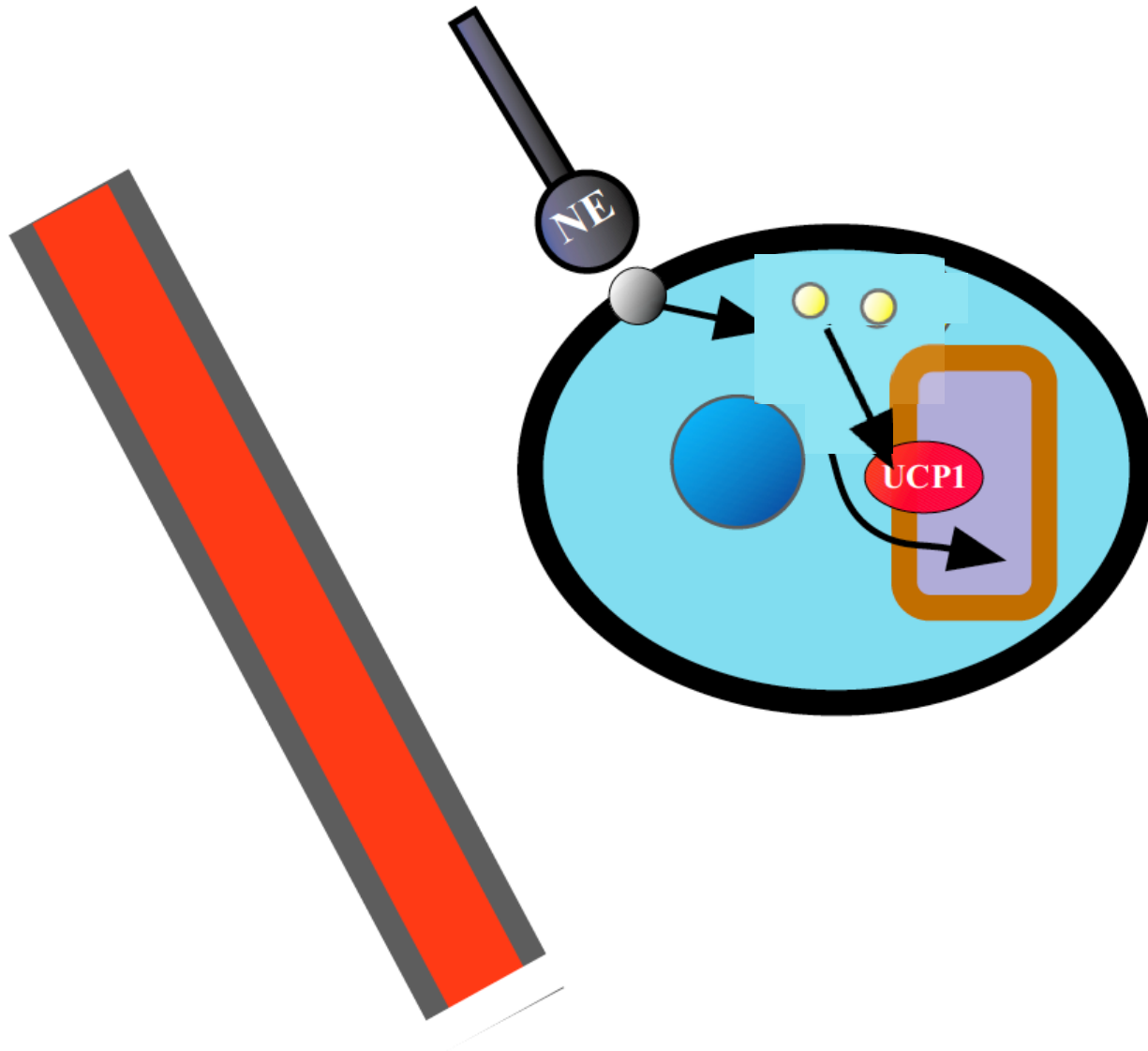
Active brown adipose tissue has the capacity to modulate most of above parameters

* newest IDF definition

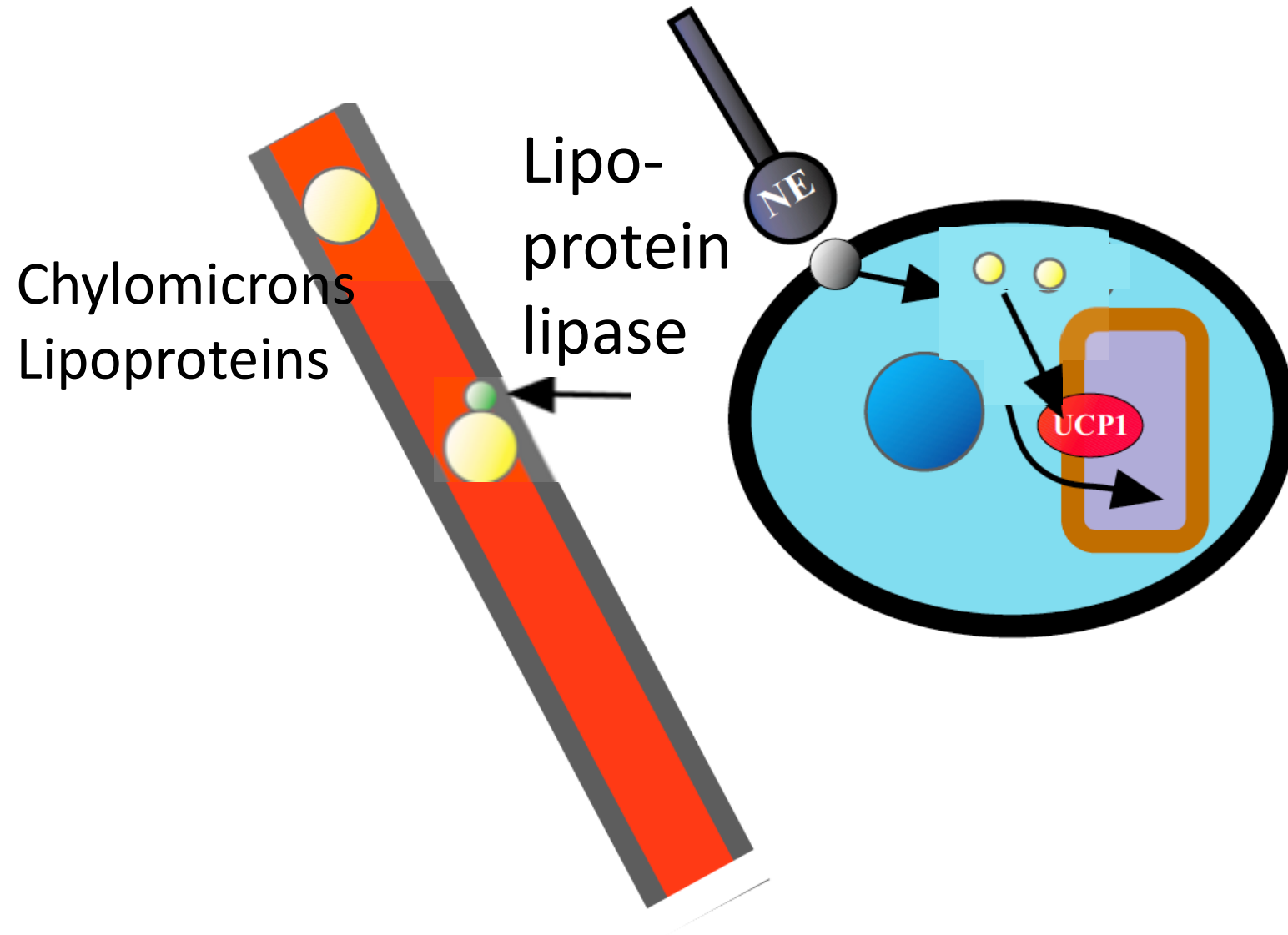
Initial activation



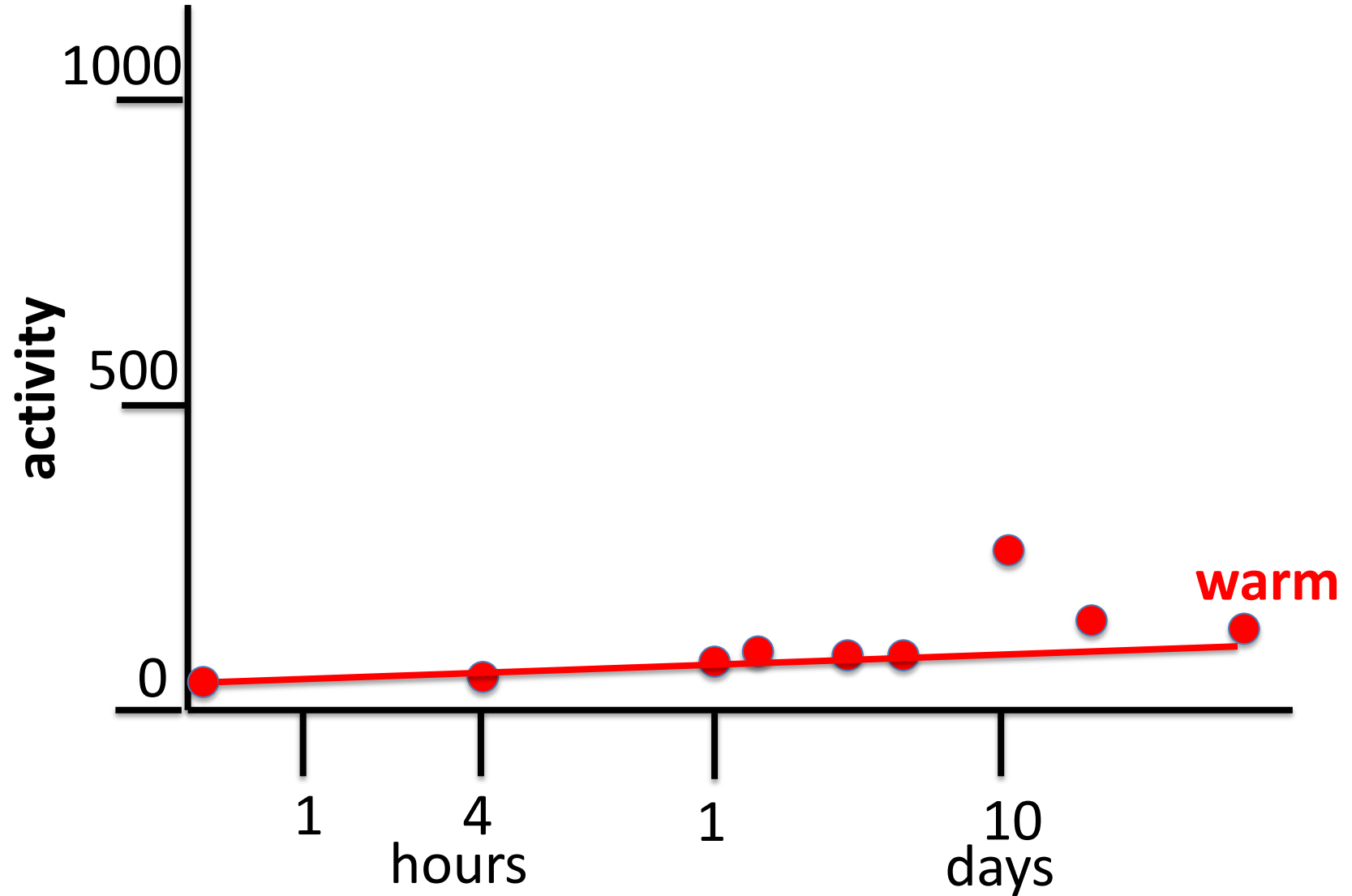
After some hours of activation



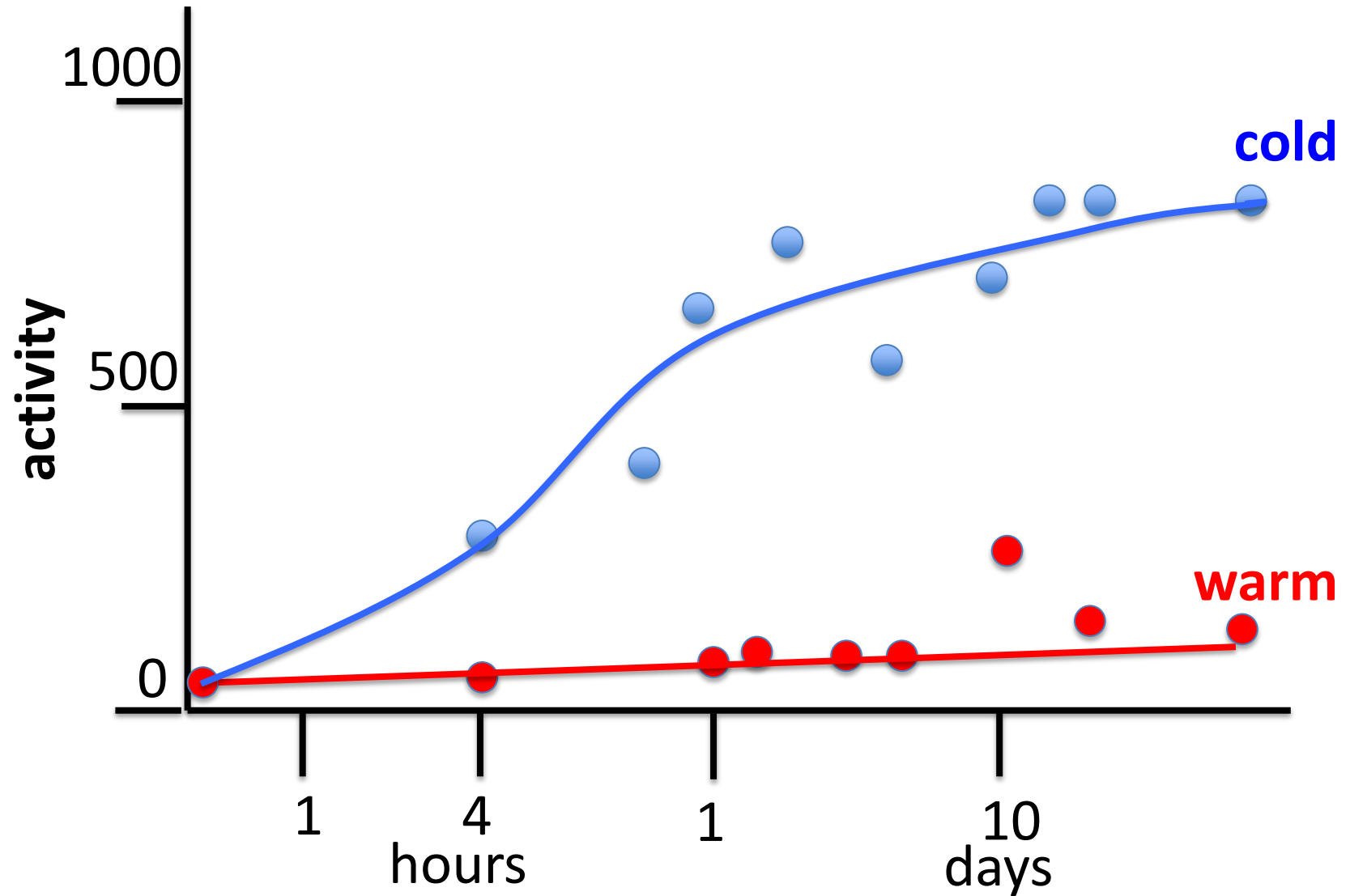
After some hours of activation



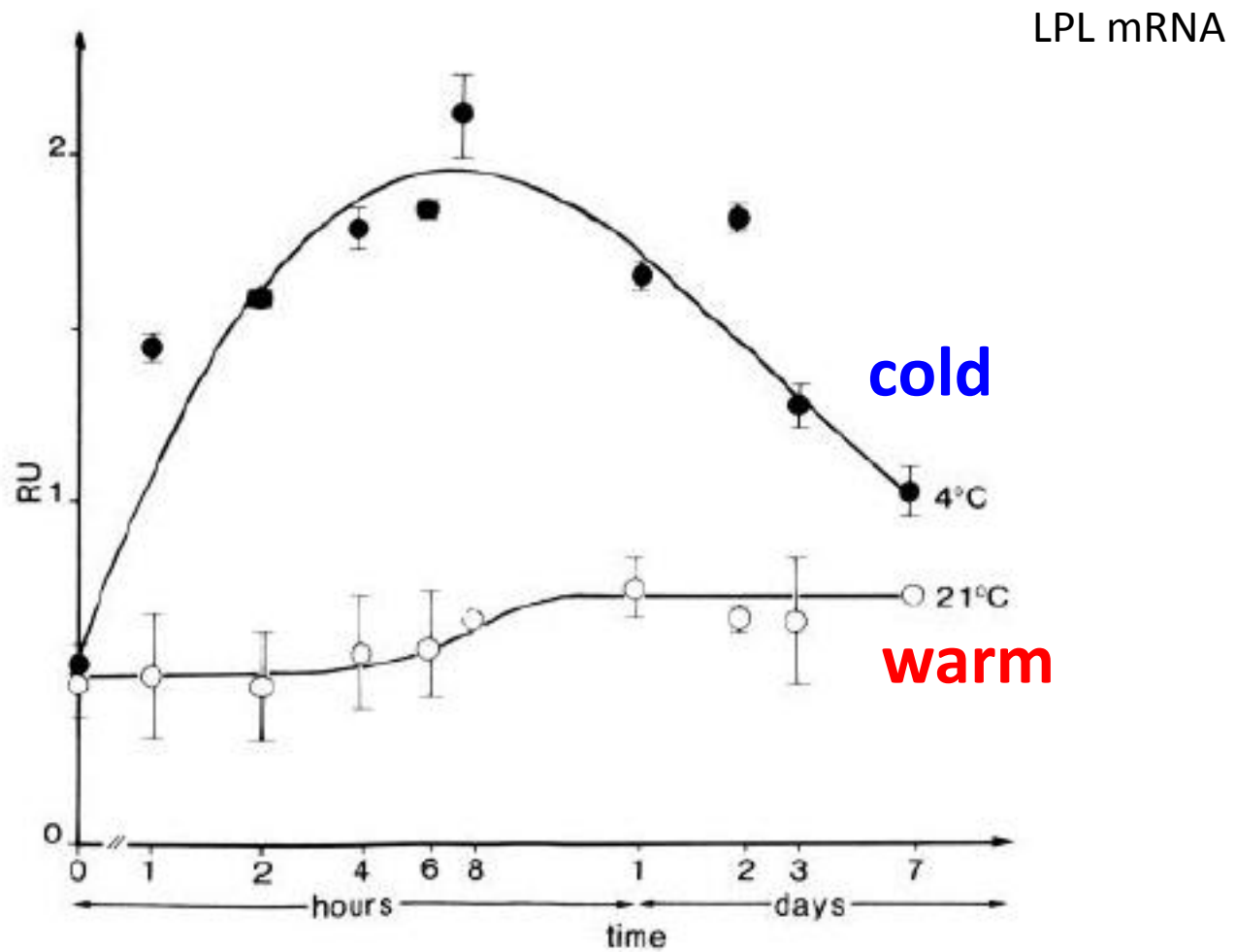
Lipoprotein lipase activity



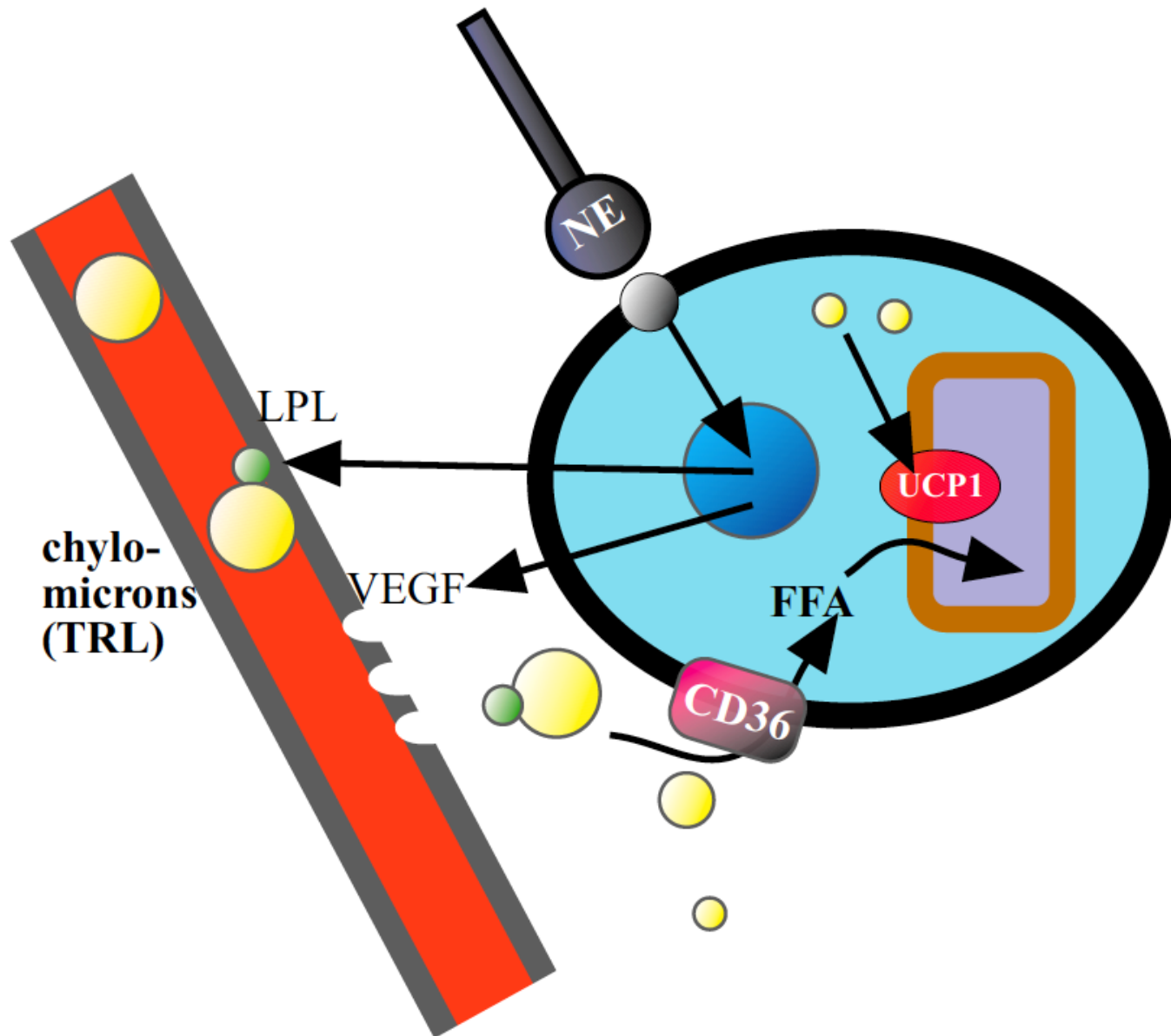
Lipoprotein lipase activity



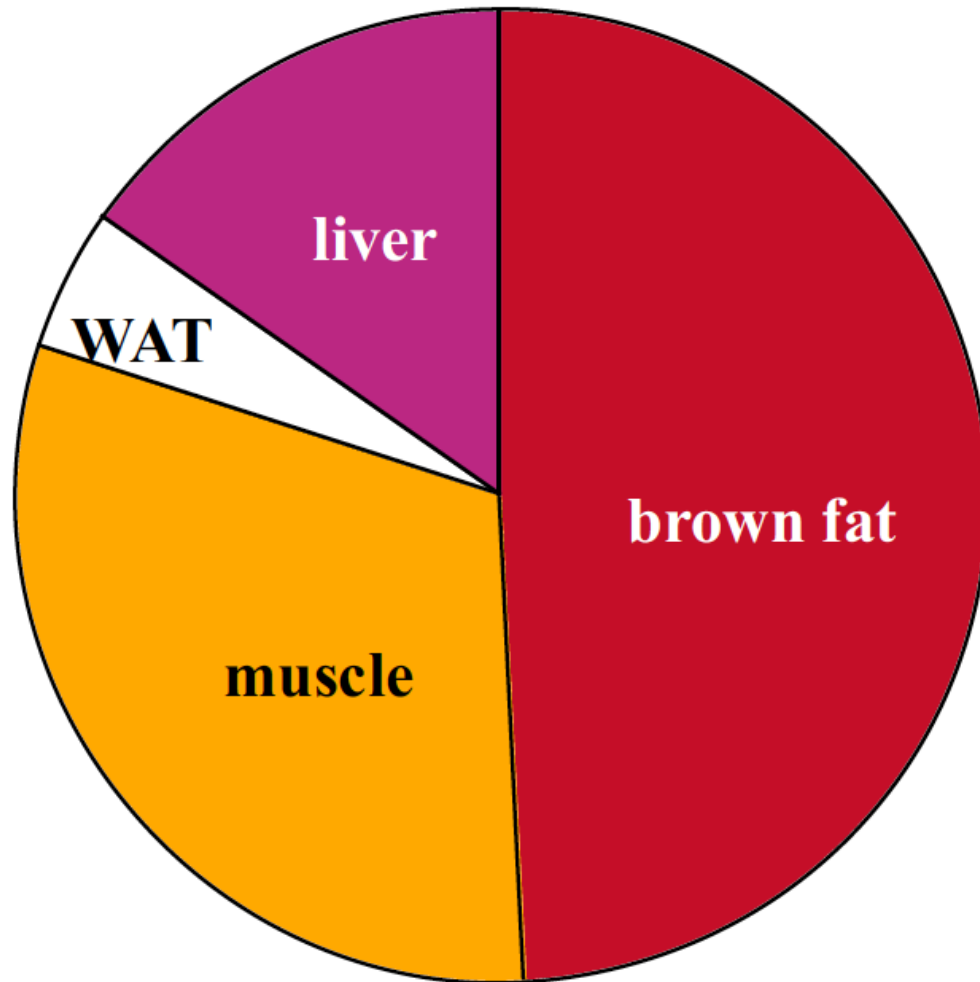
Lipoprotein lipase mRNA



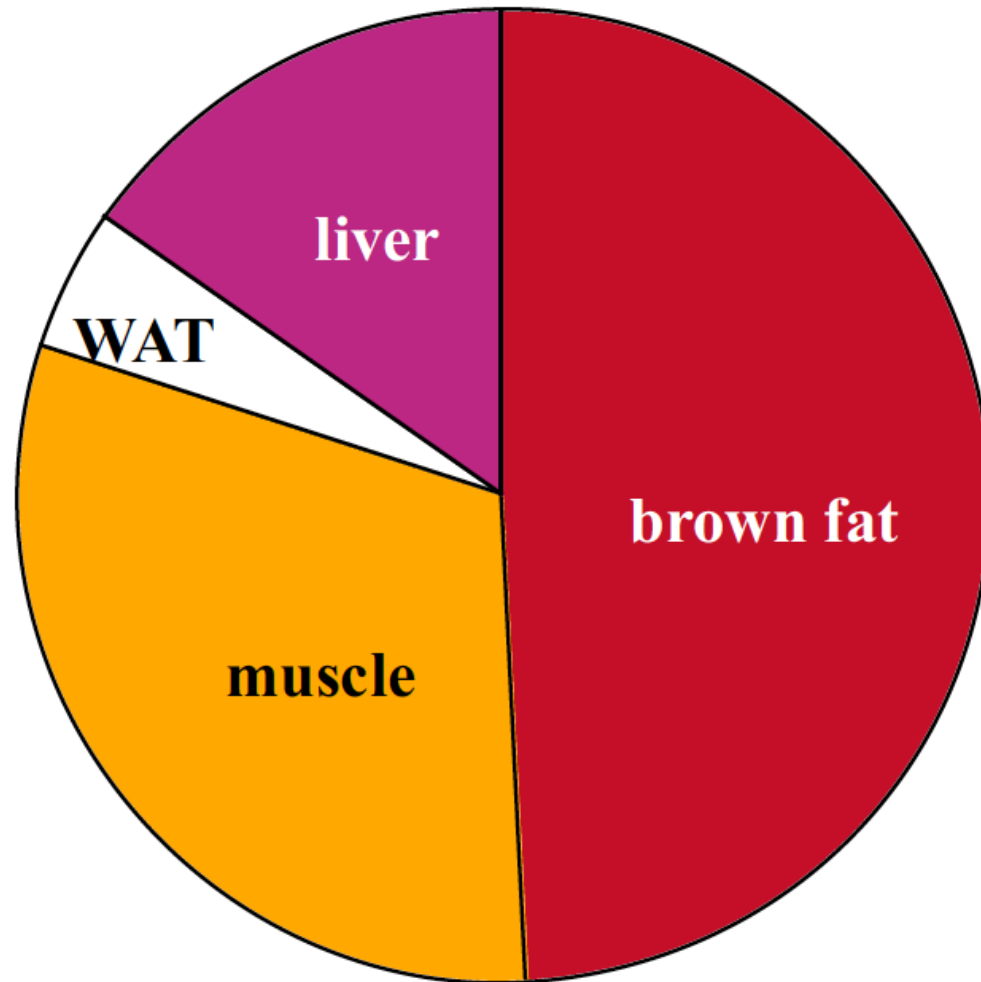
Triglyceride pathway



Triglyceride clearance



i.e. brown adipose tissue protects against hypertriglyceridemia



Worldwide increasing metabolic problems



Metabolic syndrome*:

- **Central obesity**

plus any two of the following four factors:

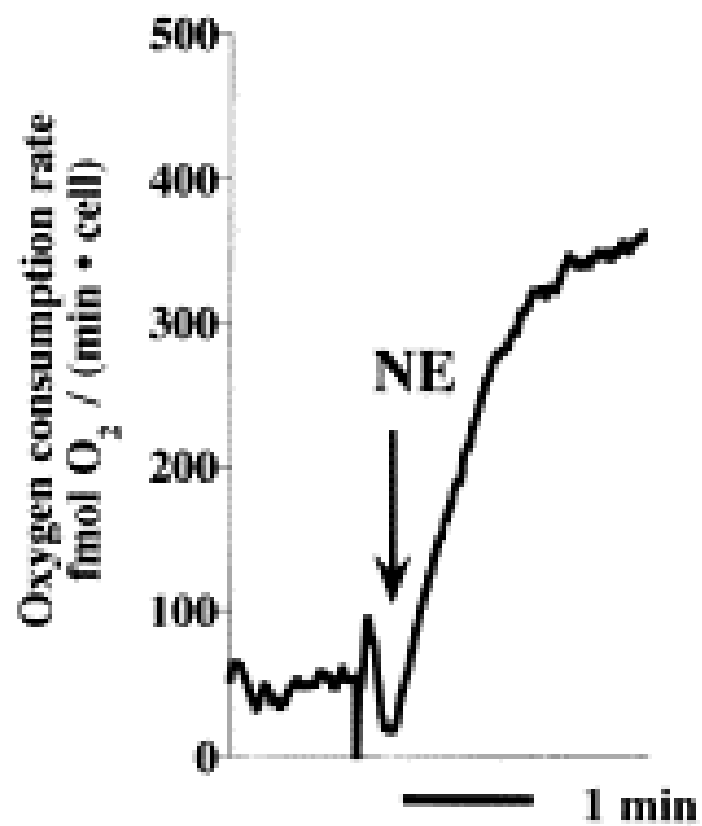
- **raised triglycerides level in blood**
- **reduced HDL cholesterol in blood**
- **raised blood pressure**
- **raised fasting plasma glucose or type 2 diabetes (insulin resistance)**

Active brown adipose tissue has the capacity to modulate most of above parameters

* newest IDF definition

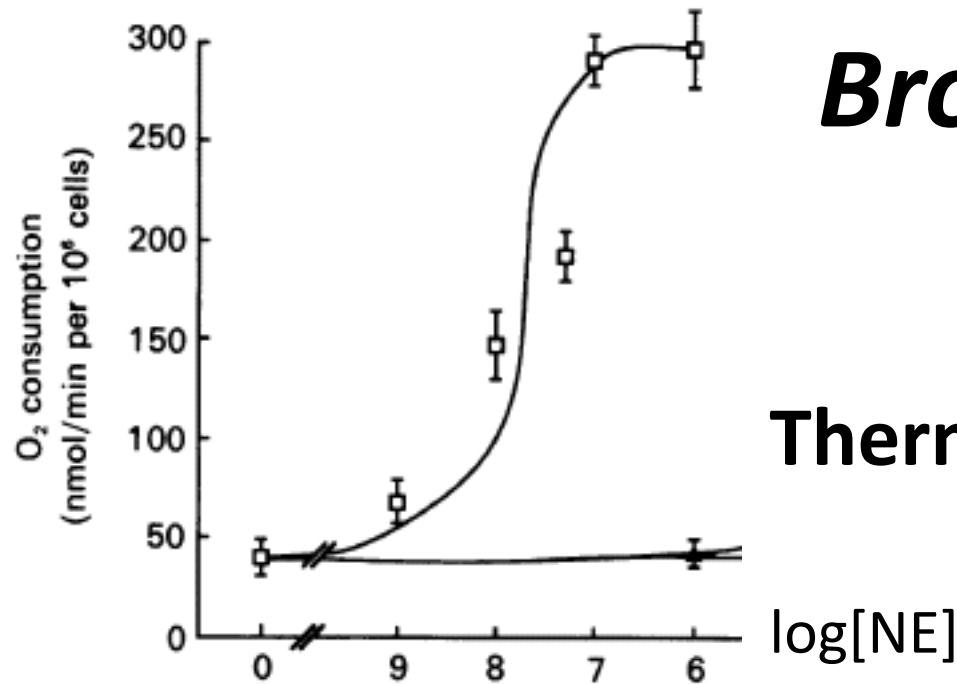
**Brown adipose tissue
and glucose disposal....**

Brown-fat cells



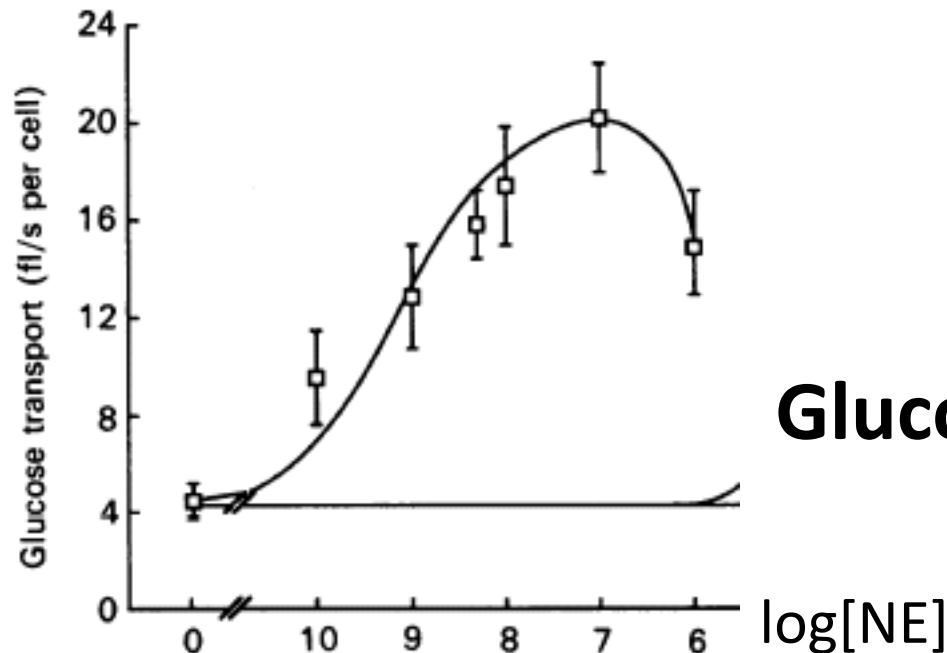
Brown-fat cells:

Thermogenesis



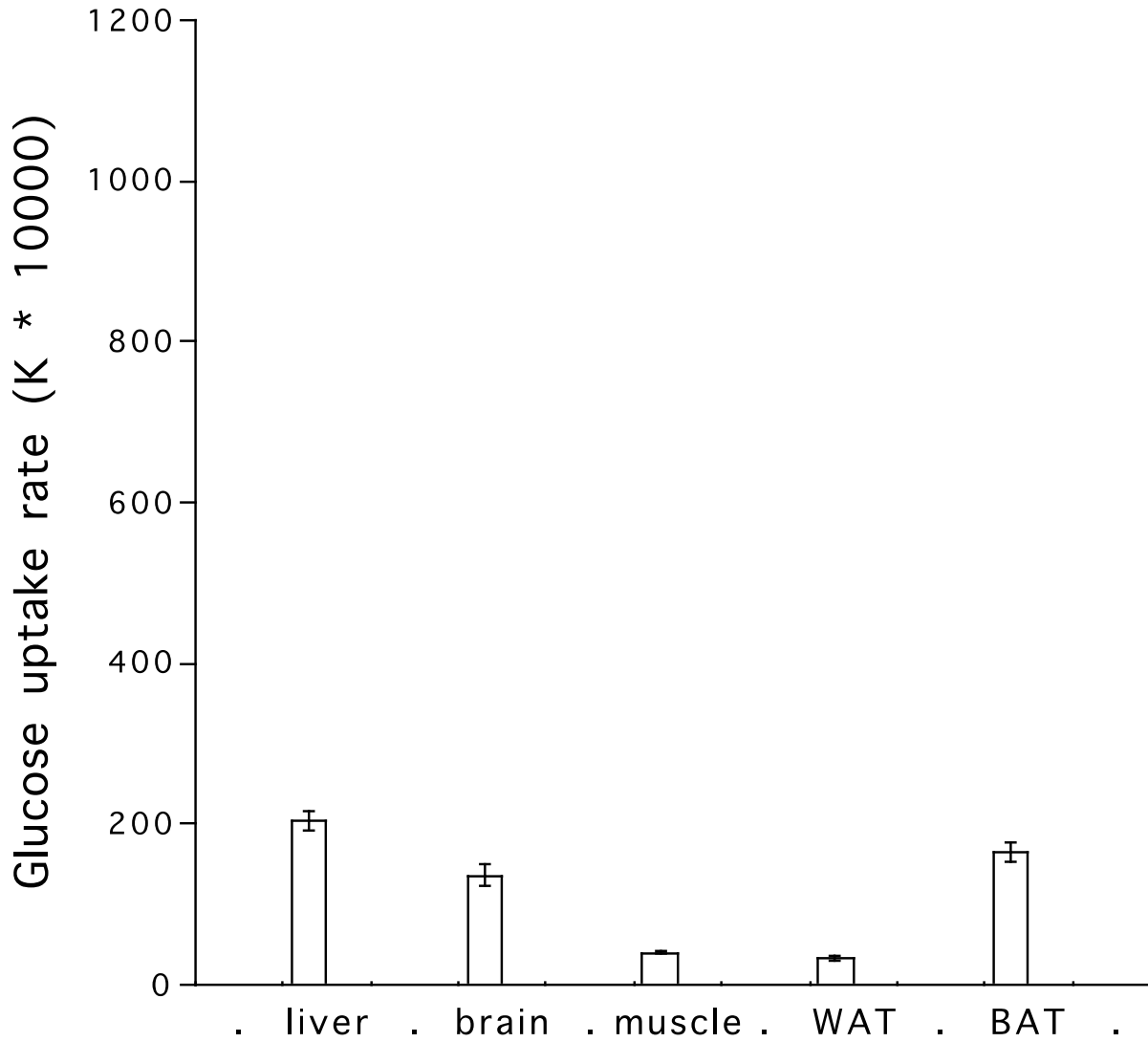
$\log[NE]$

Glucose uptake



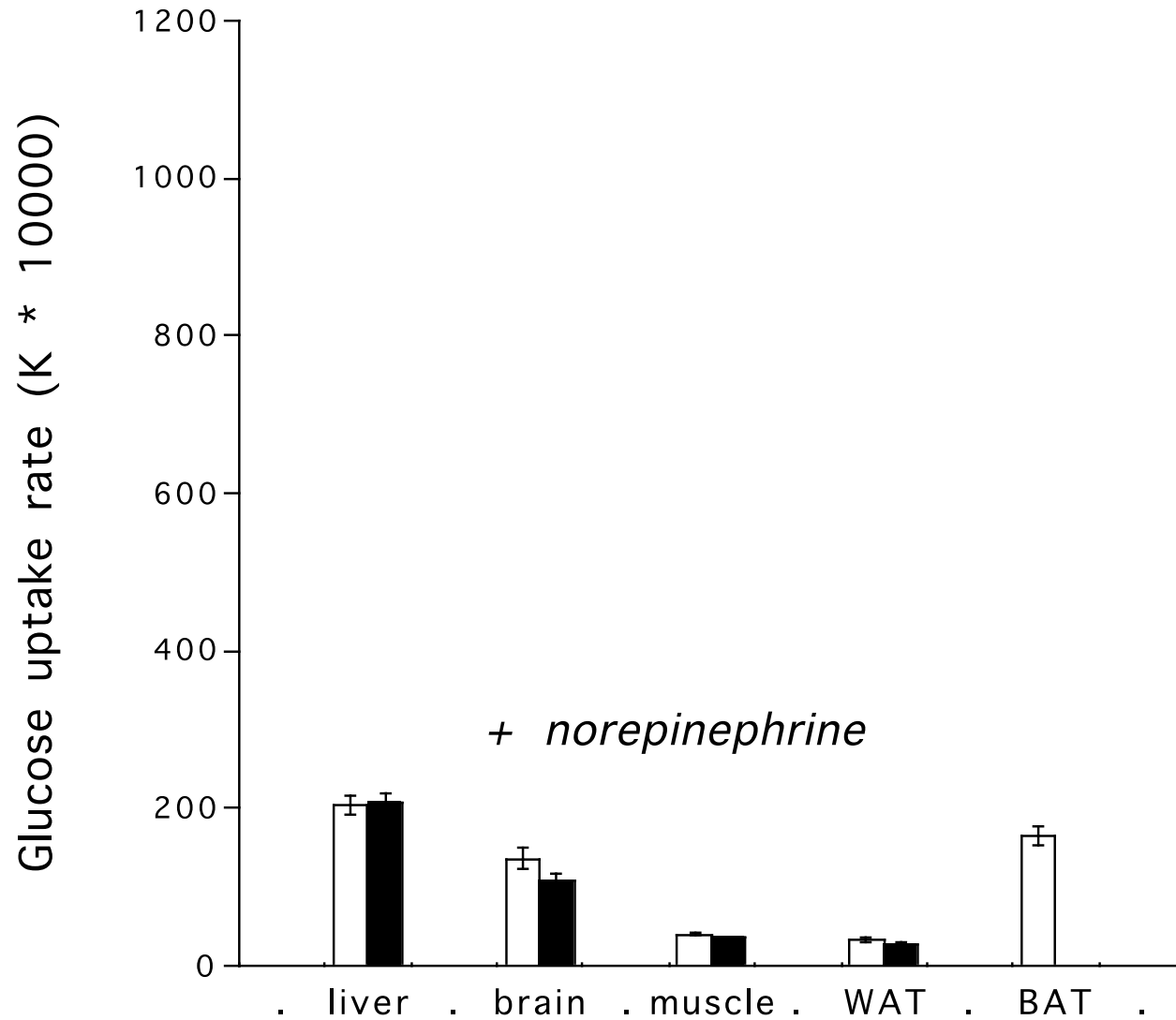
$\log[NE]$

Glucose uptake rate

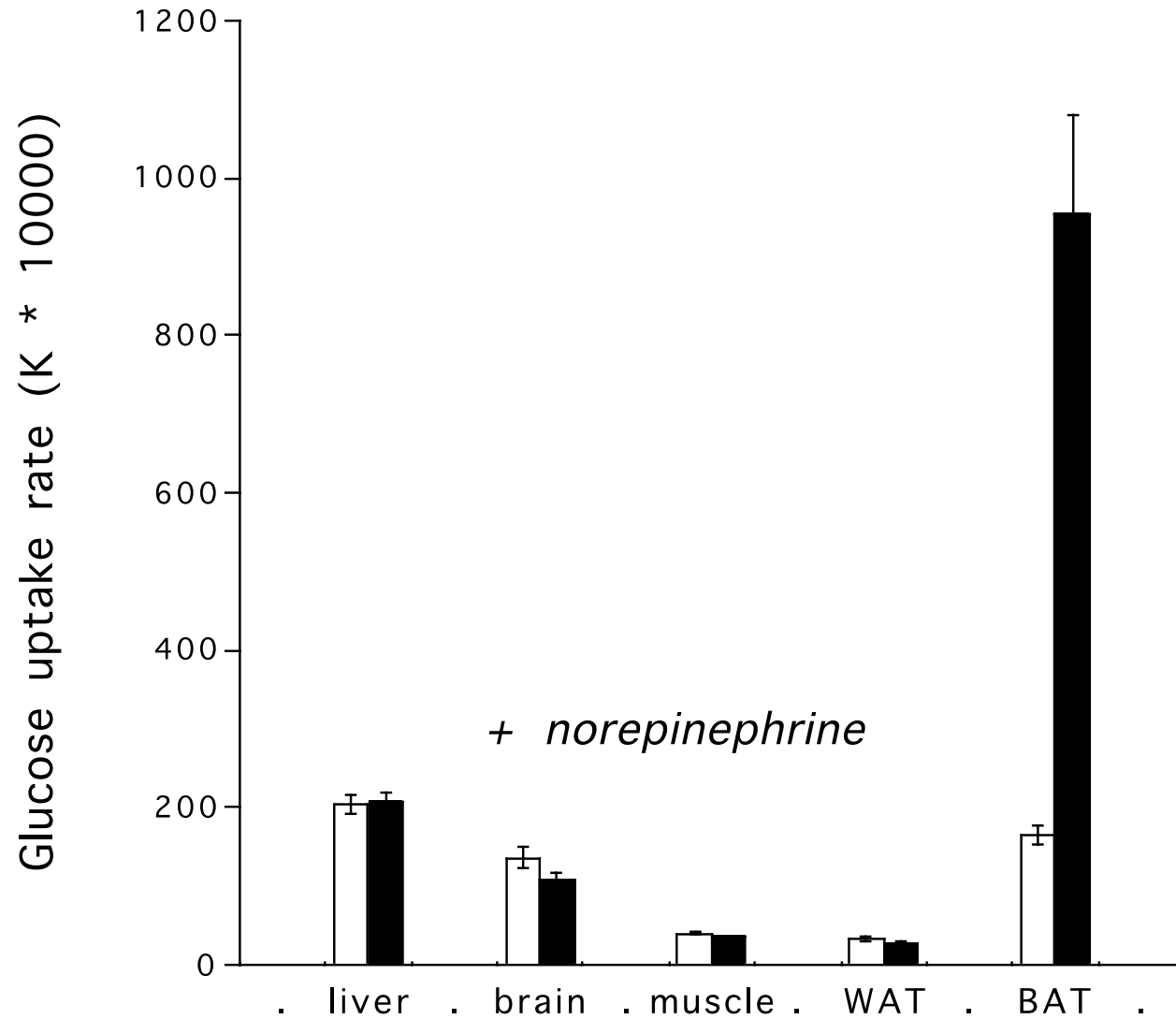


Cooney et al. 1985

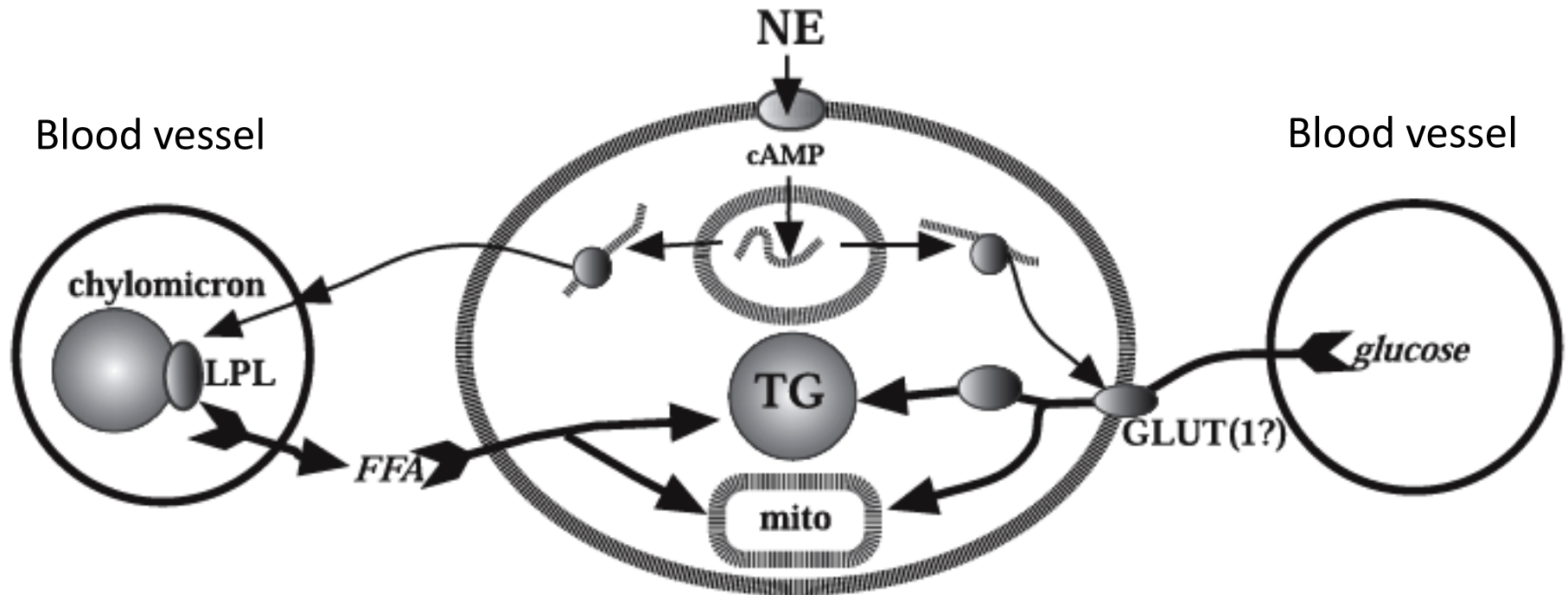
Glucose uptake rate



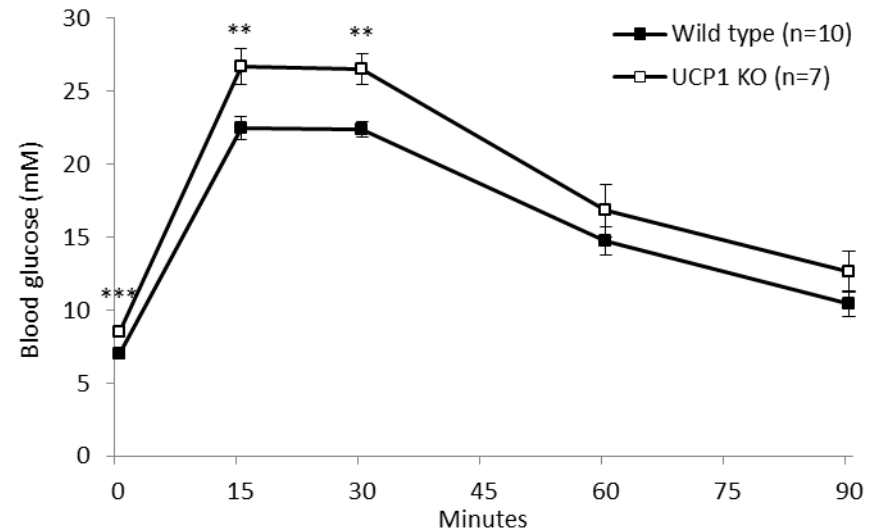
Glucose uptake rate



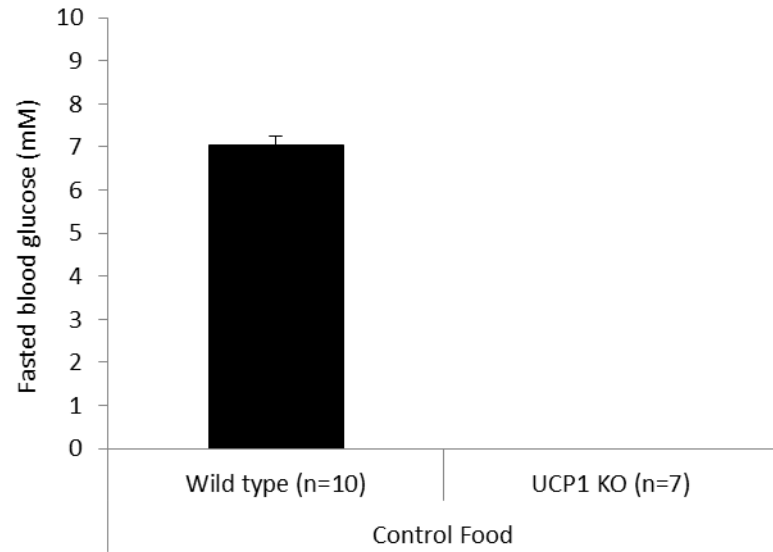
Brown adipocyte



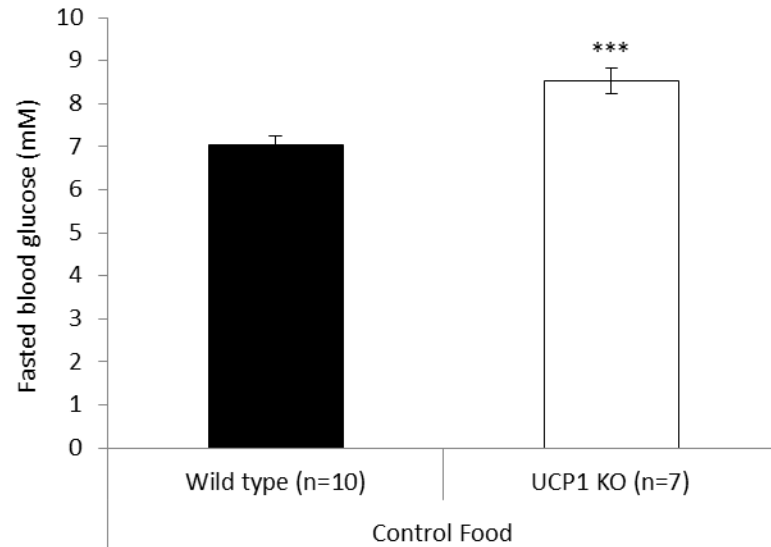
Glucose tolerance test



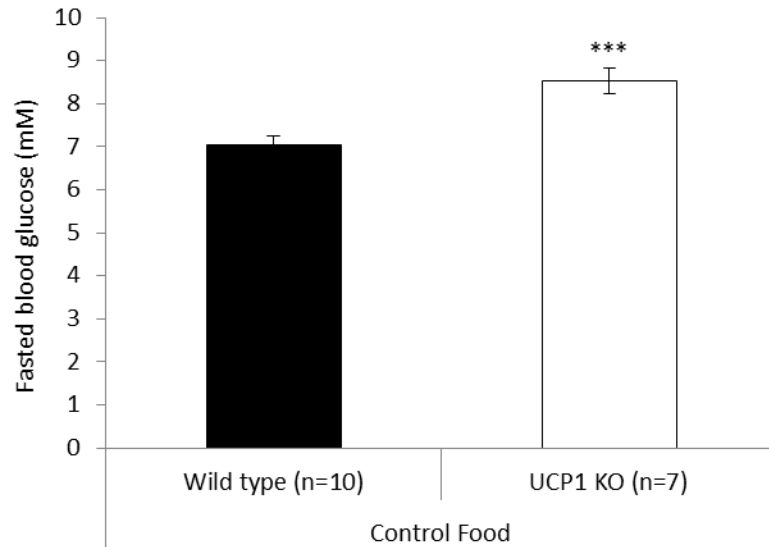
Fasting glucose



Fasting glucose



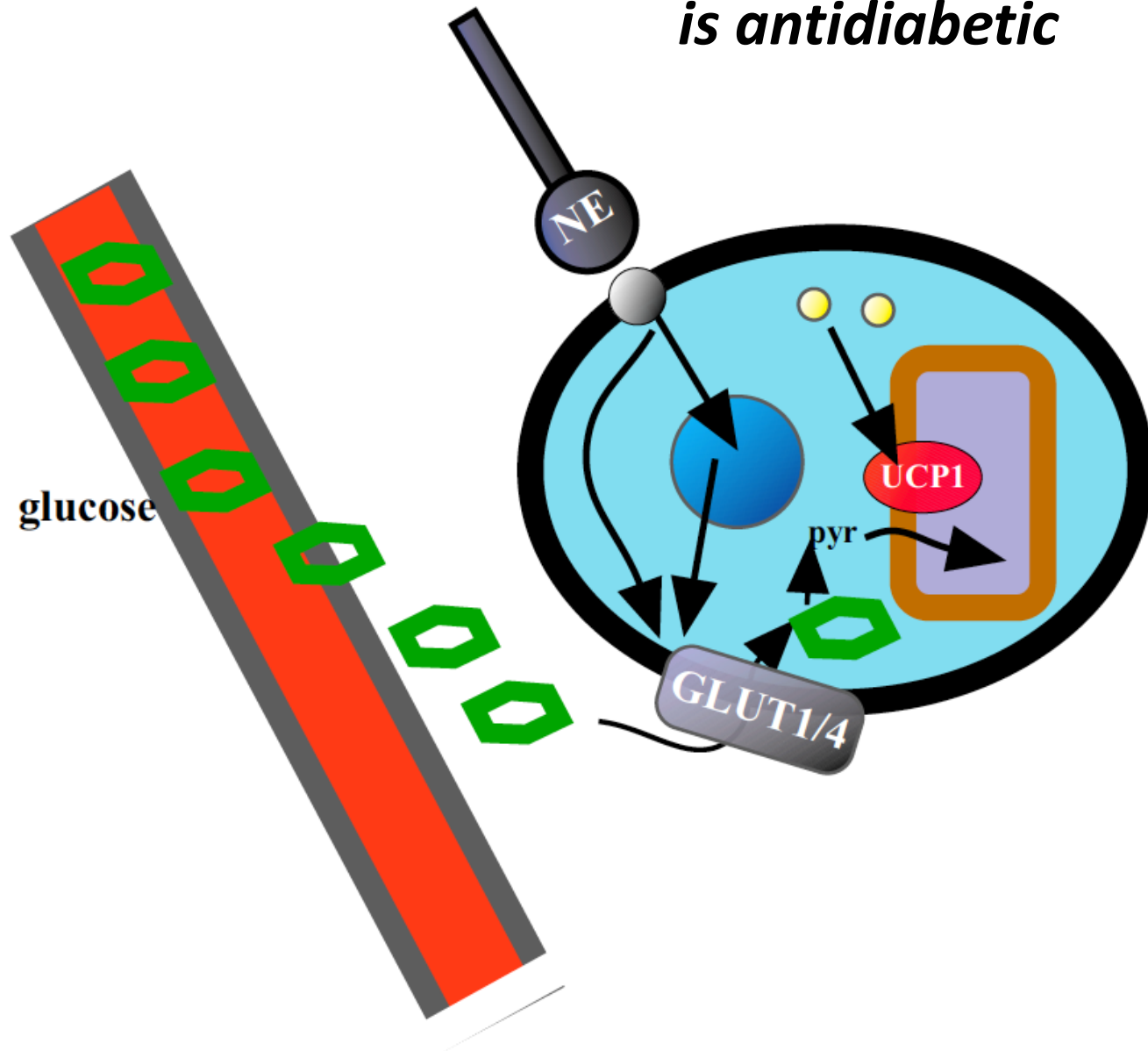
Fasting glucose



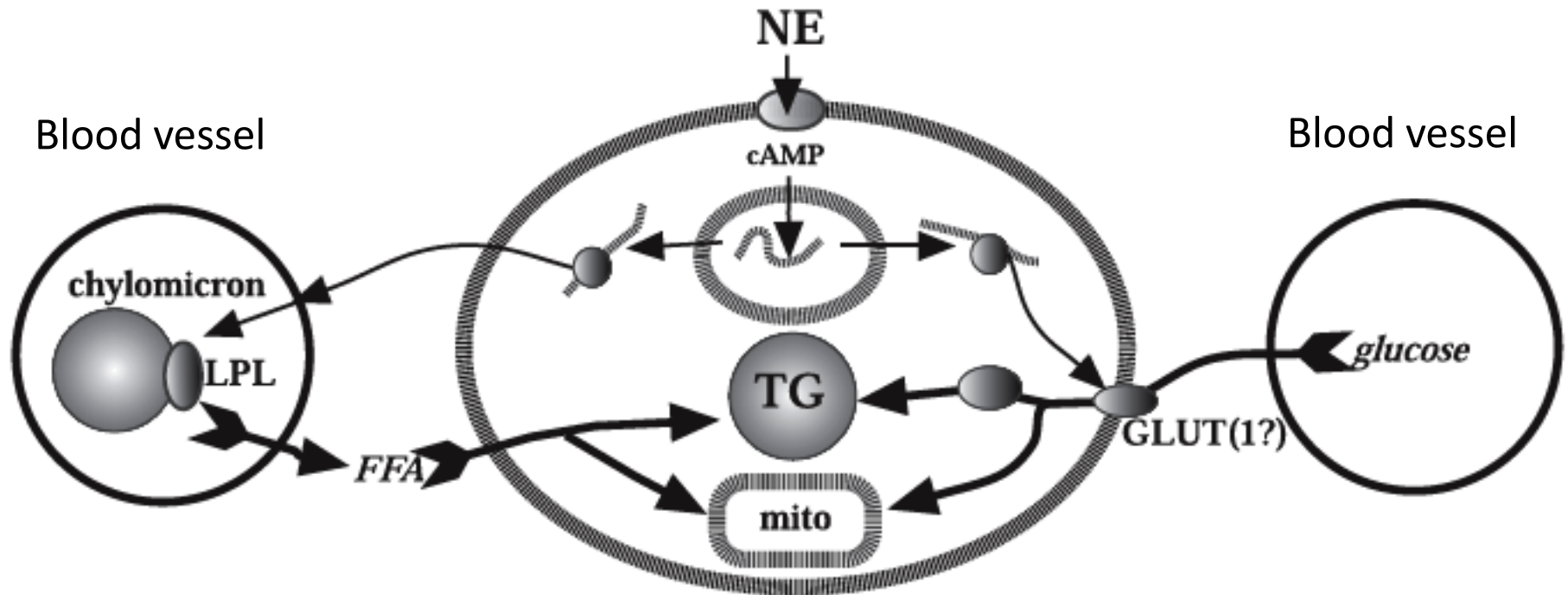
Brown fat is of significance
for glucose control
in mice

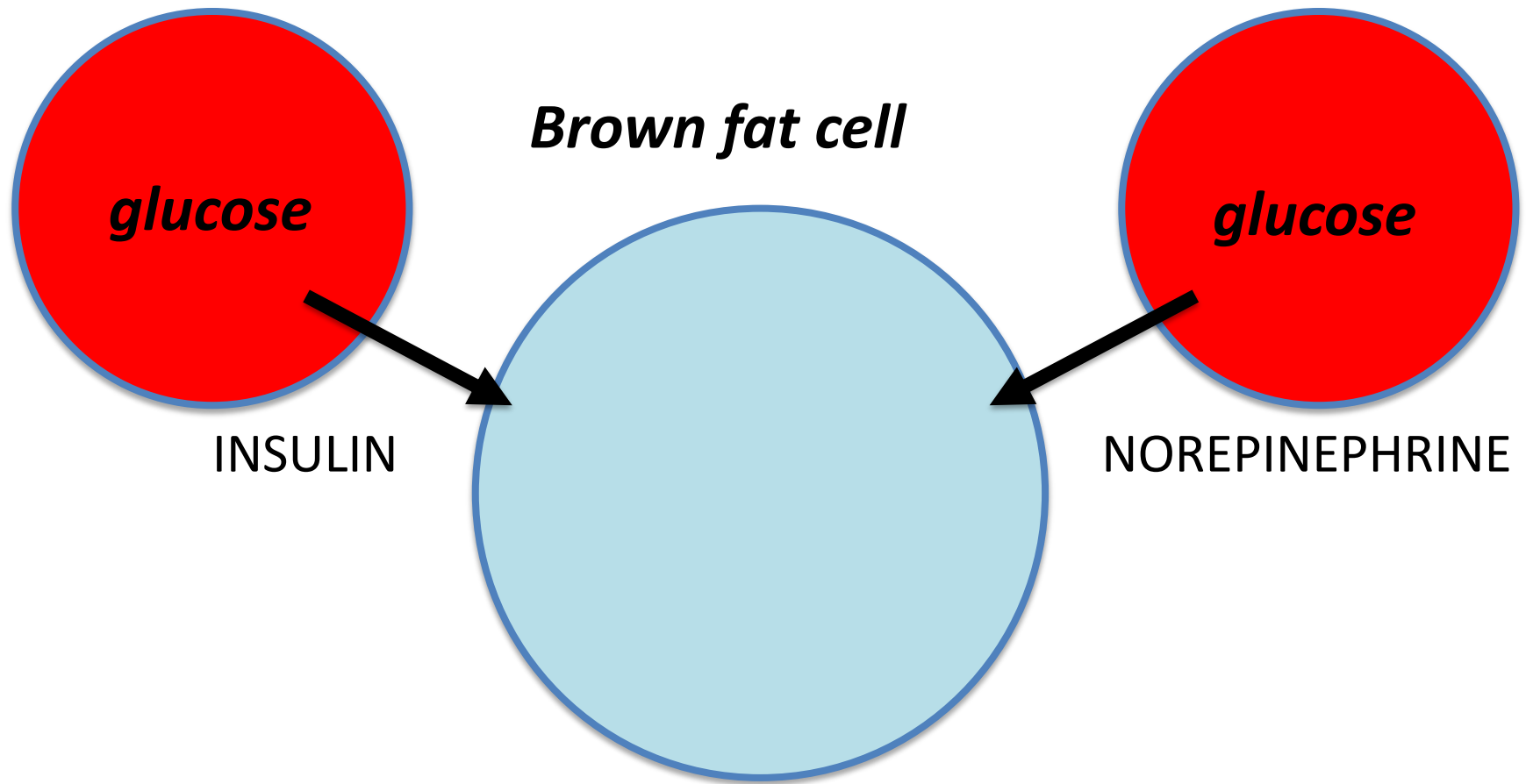
Glucose pathway

***i.e. brown adipose tissue
is antidiabetic***

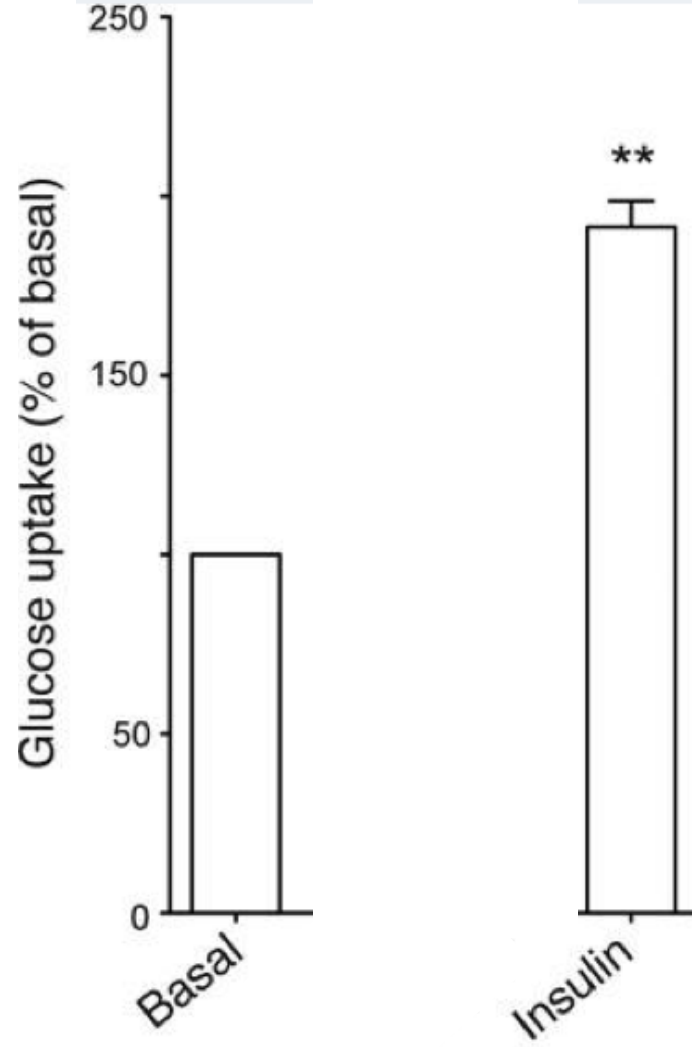


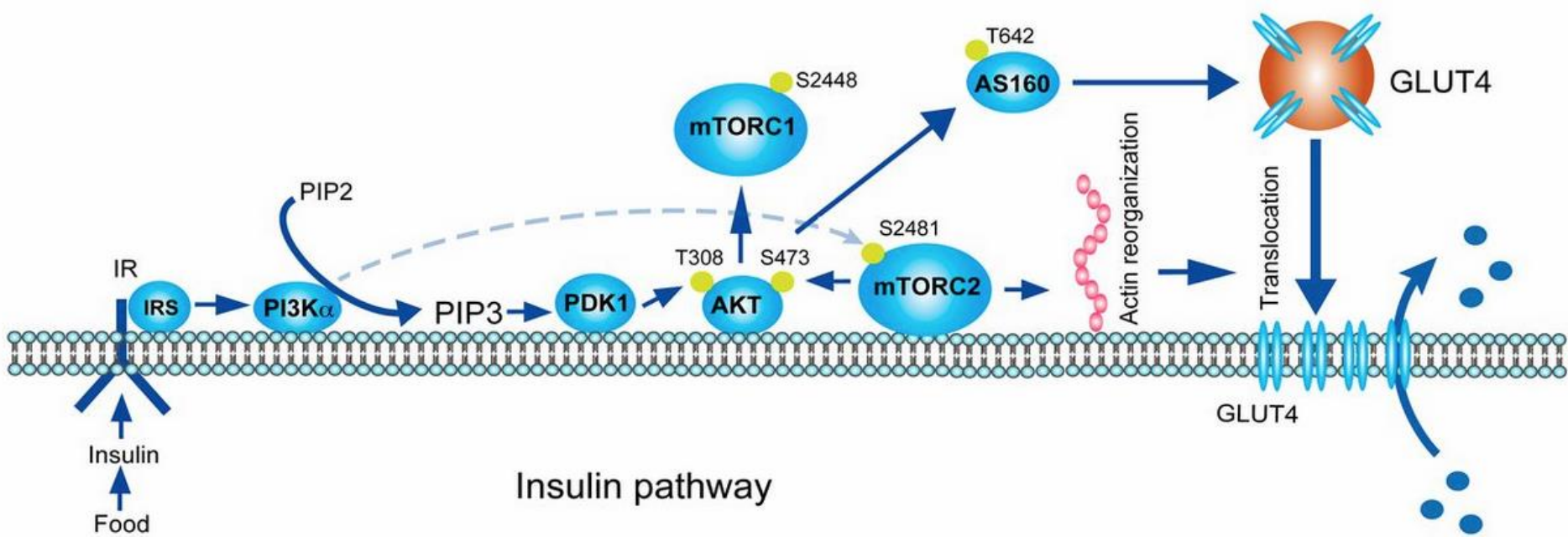
Brown adipocyte



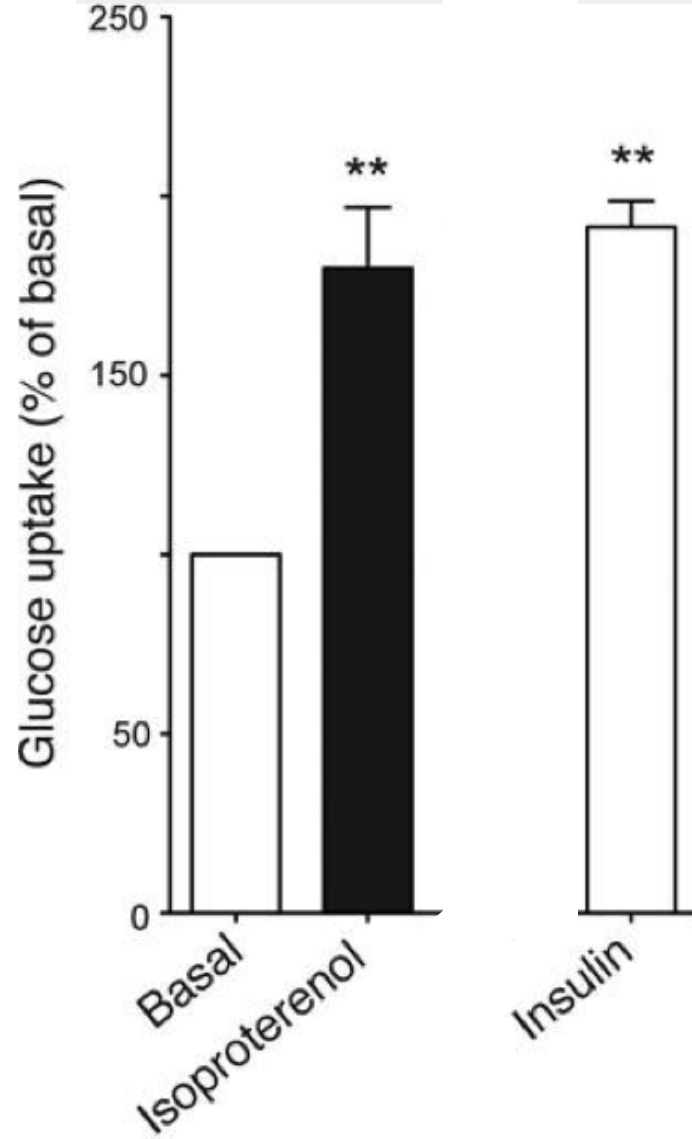


Brown-fat cell





Brown-fat cell



NE

β_3 -AR

Brown-fat cell



GLUT

glucose



NE

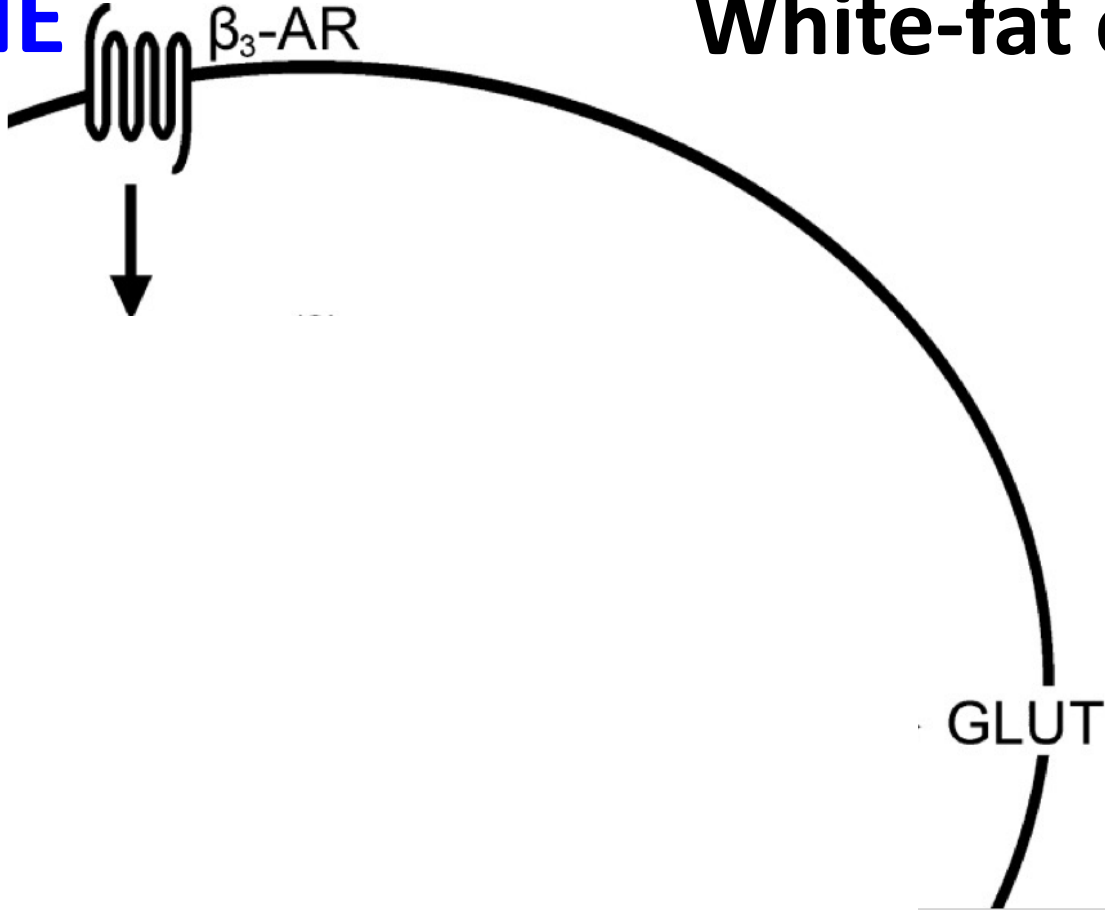
β_3 -AR

White-fat cell?

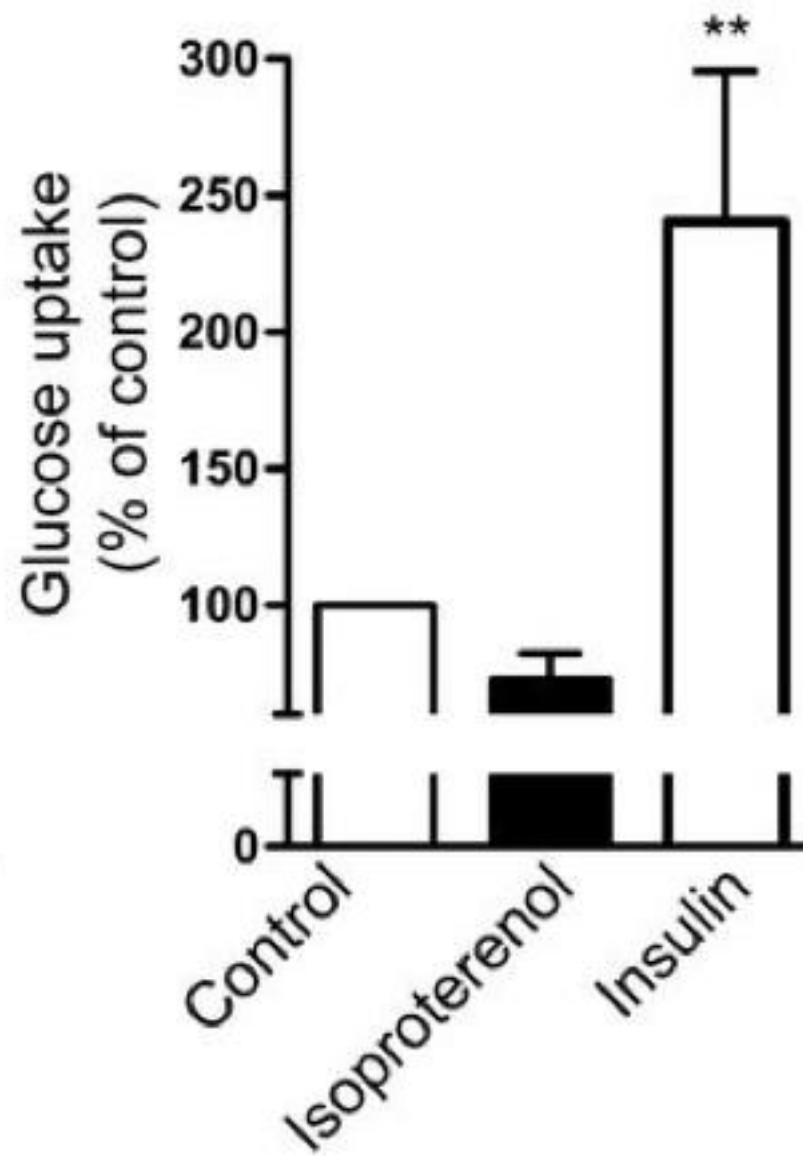


GLUT

glucose



Rat white adipocytes



NE

β_3 -AR

Brown-fat cell

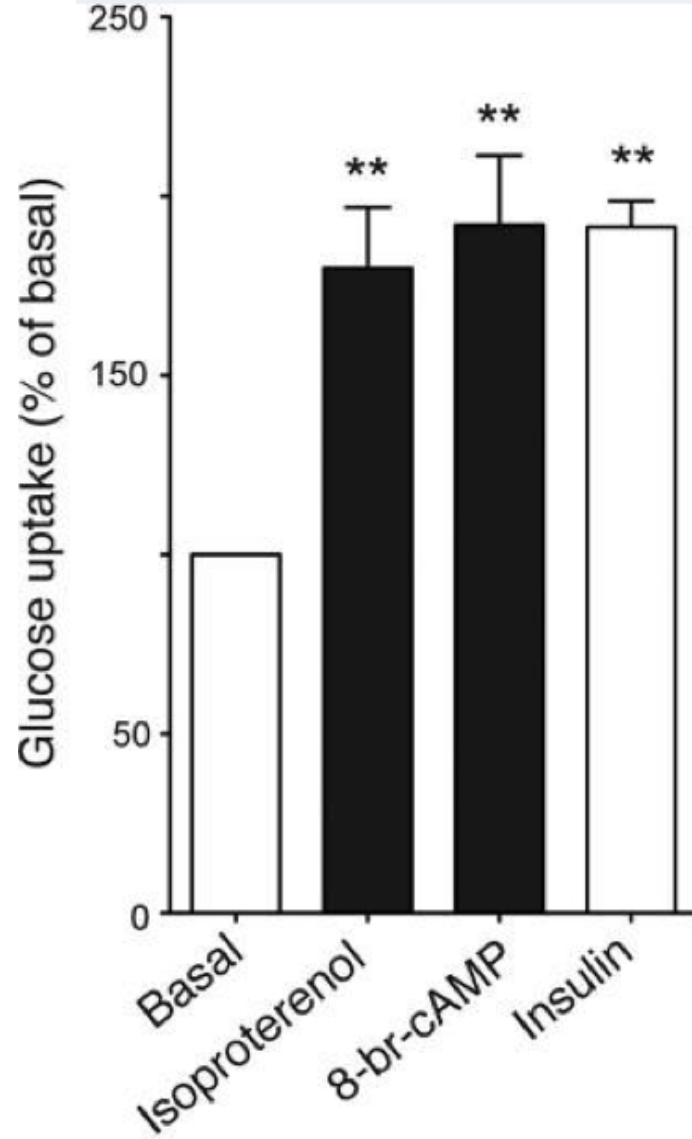


GLUT

glucose



Brown-fat cell



NE

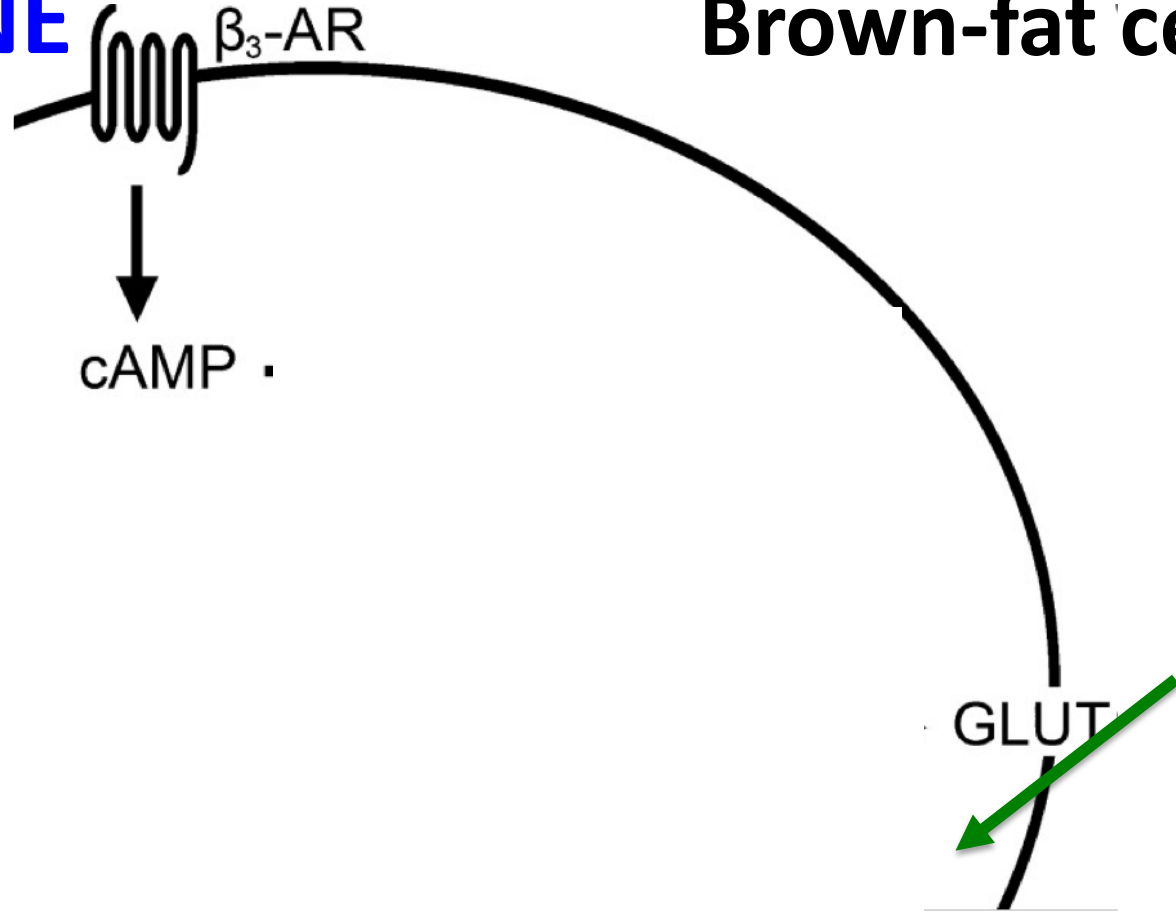
β_3 -AR

Brown-fat cell

cAMP

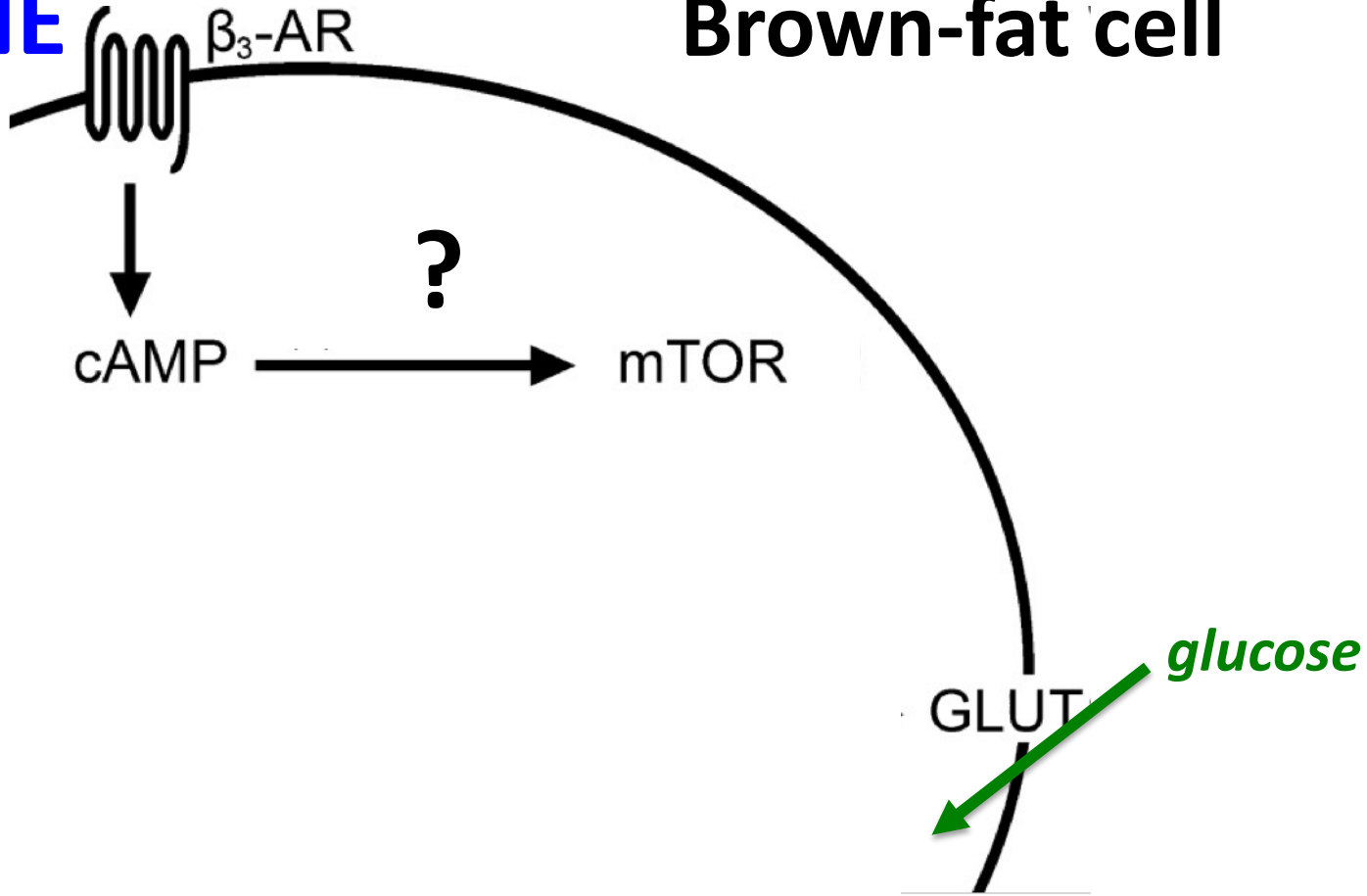
GLUT

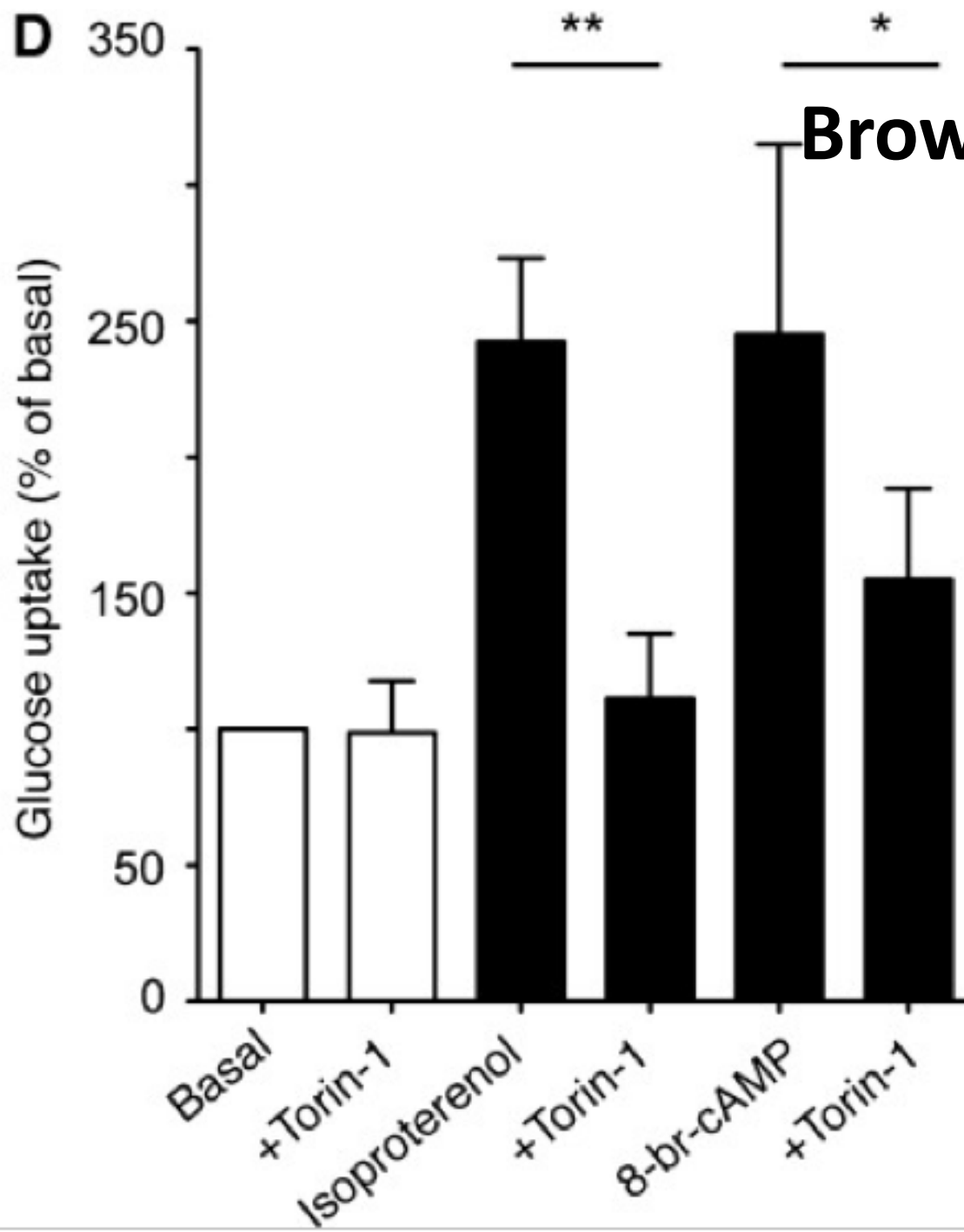
glucose



NE

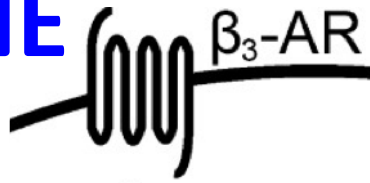
Brown-fat cell



D**Brown-fat cell**

NE

Brown-fat cell



cAMP



mTORC^{1?}
2?

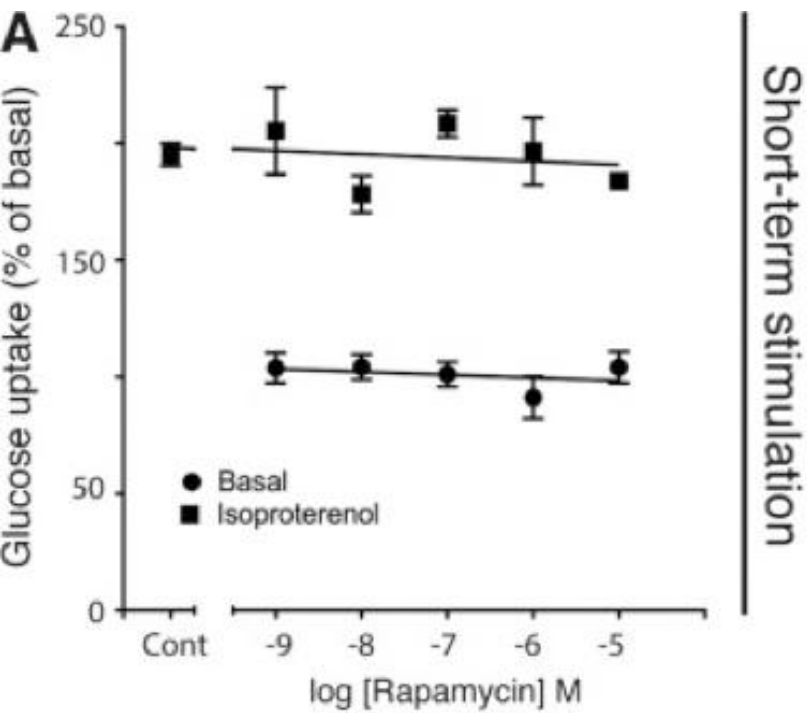
GLUT



glucose

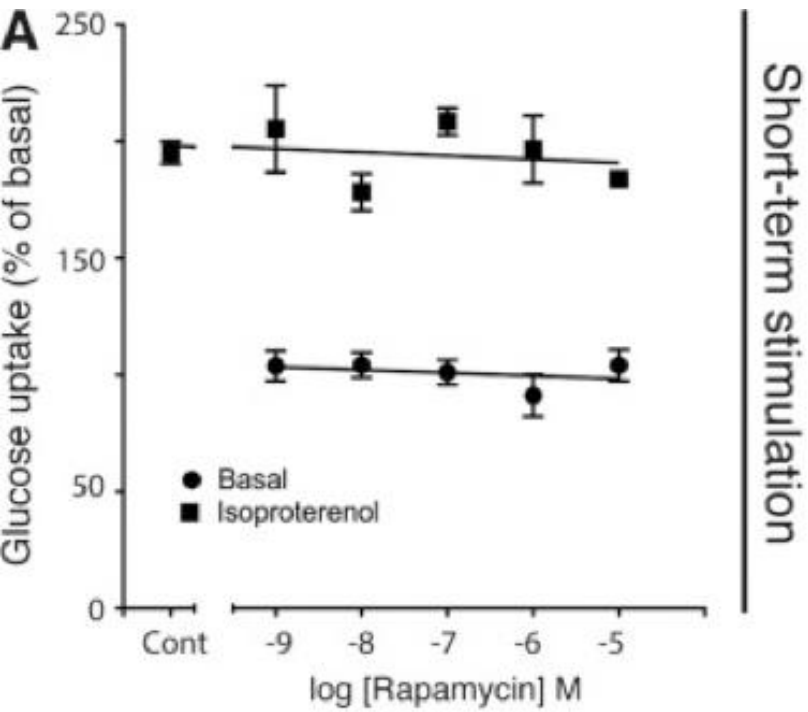
Brown-fat cell

mTORC1

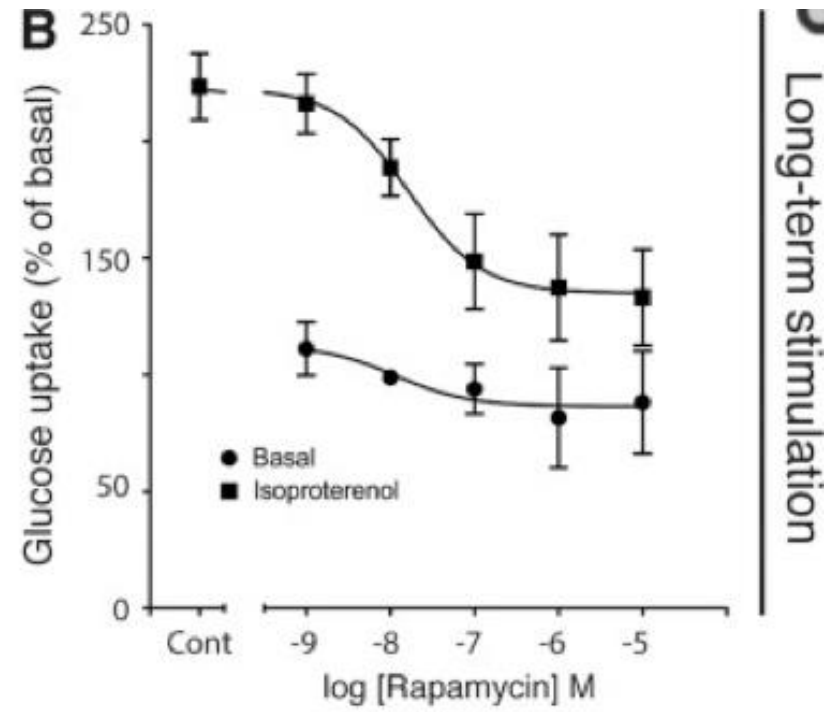


Brown-fat cell

mTORC1

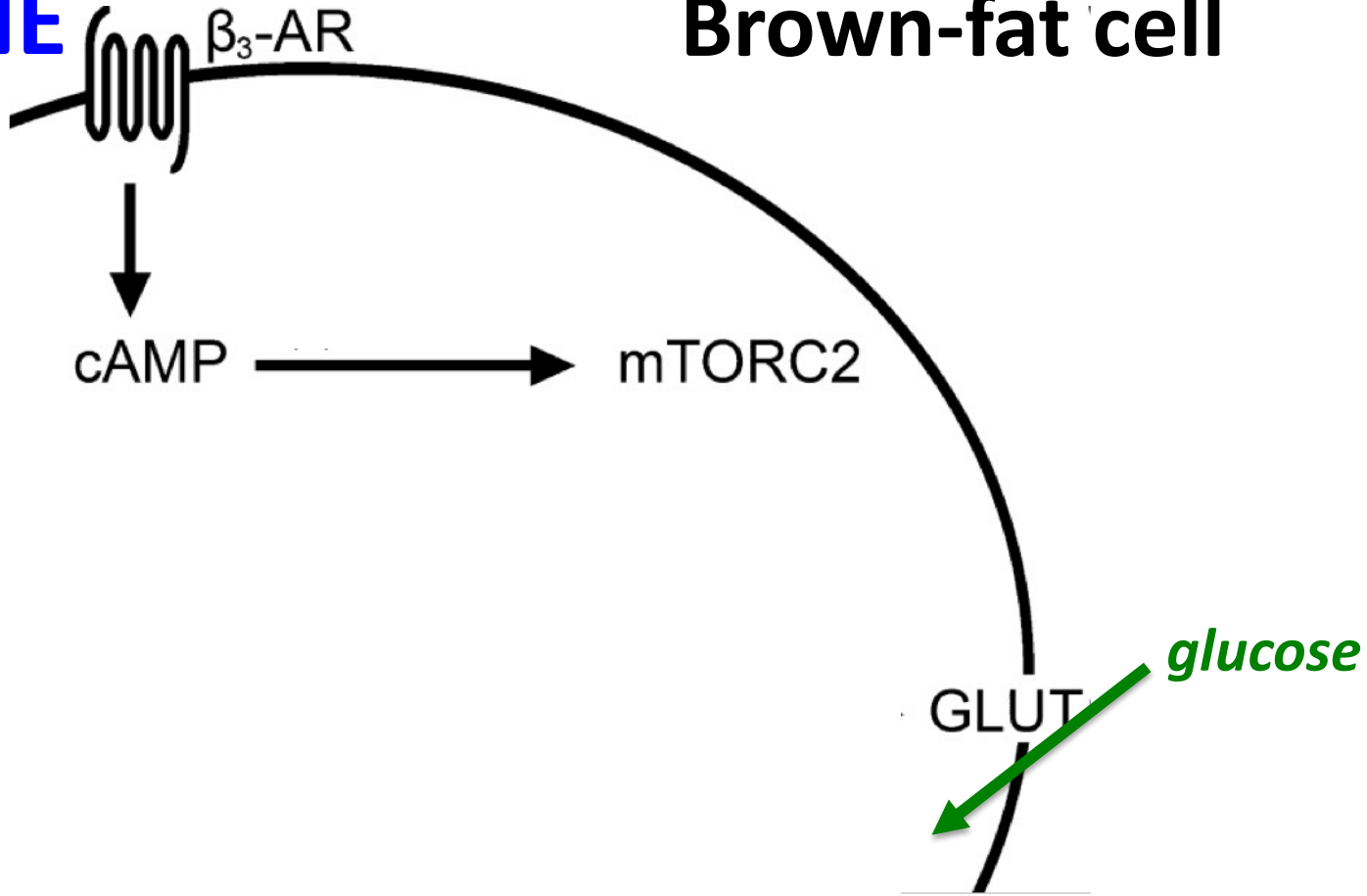


mTORC2

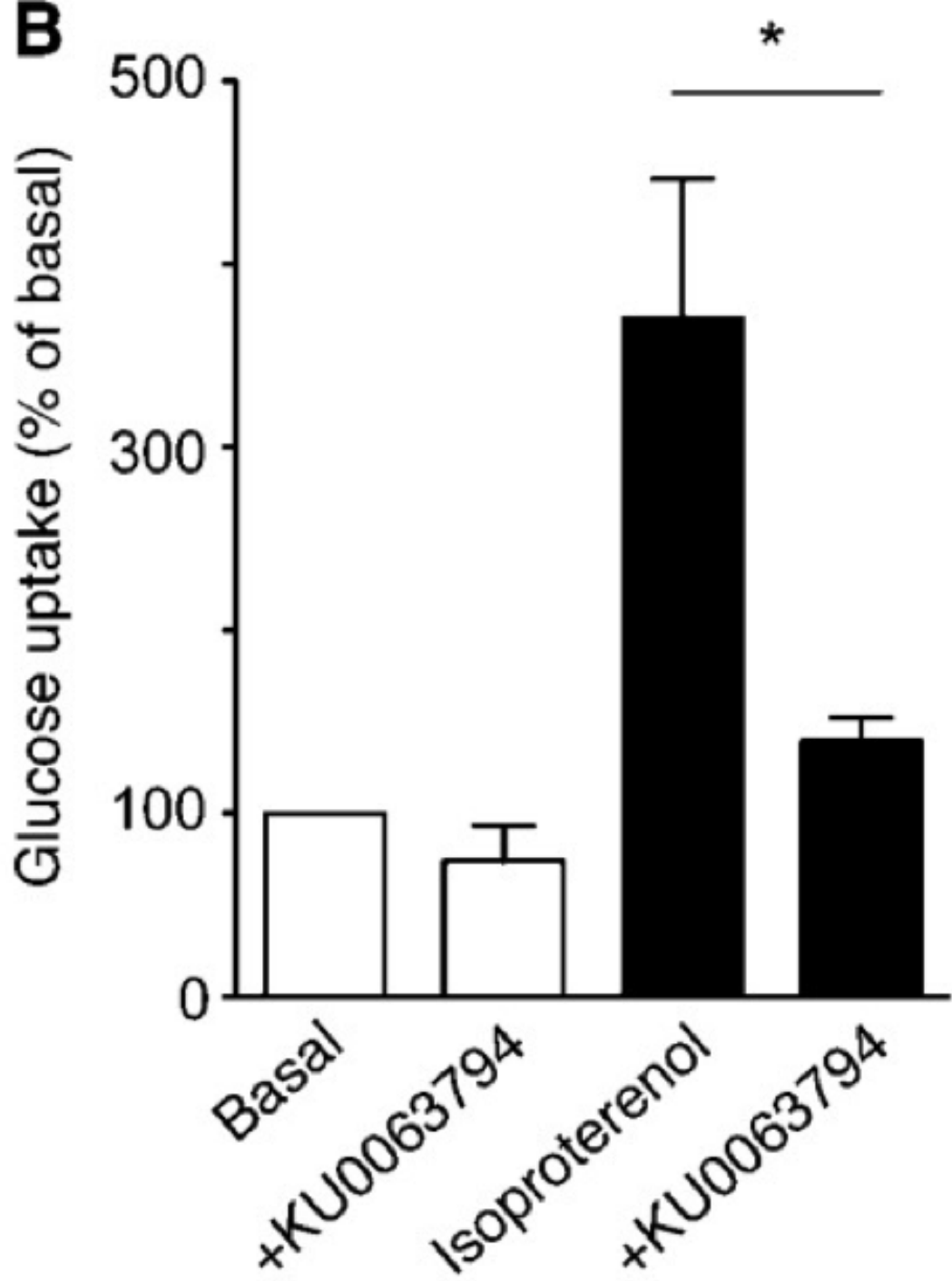


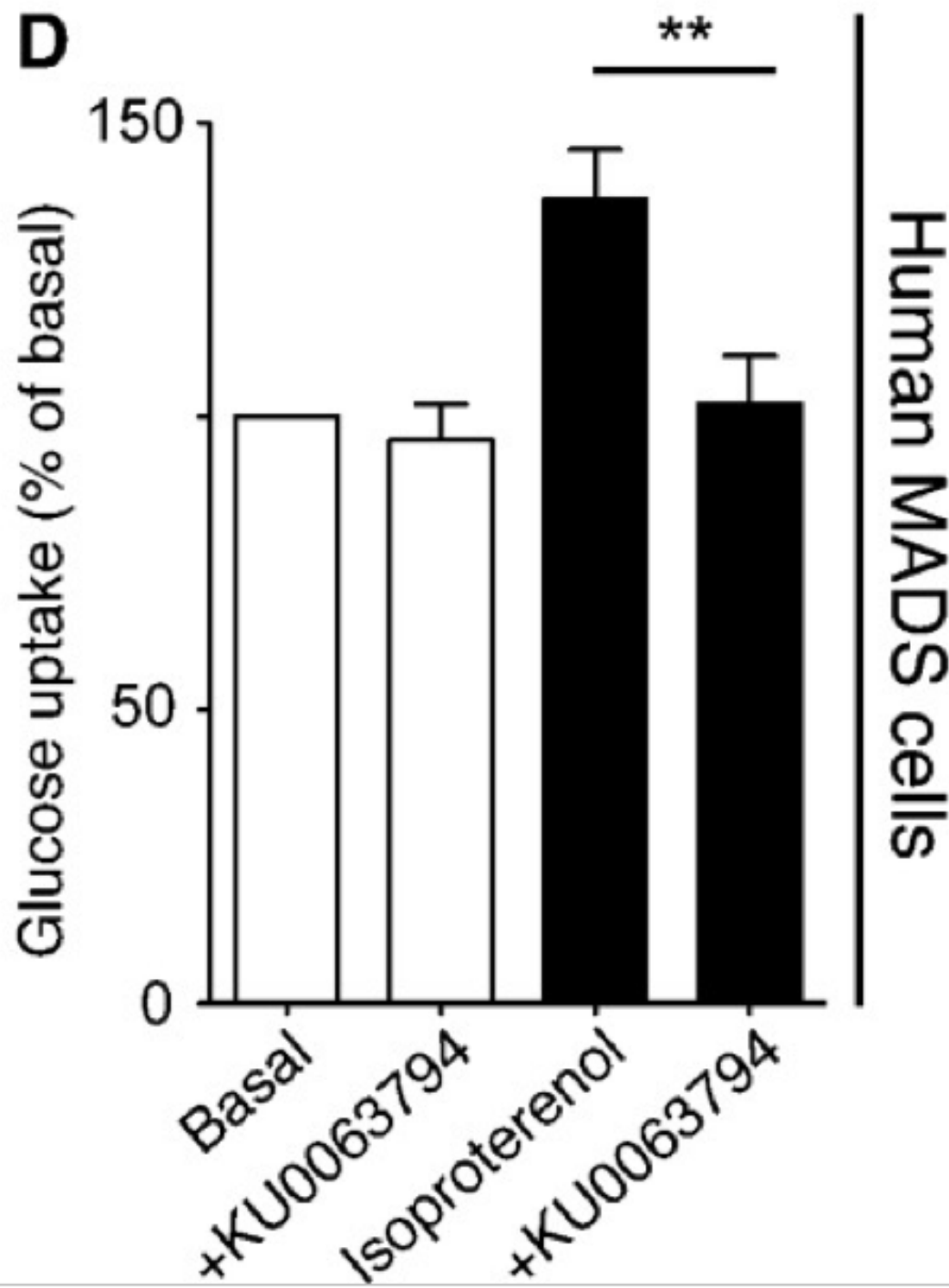
NE

Brown-fat cell



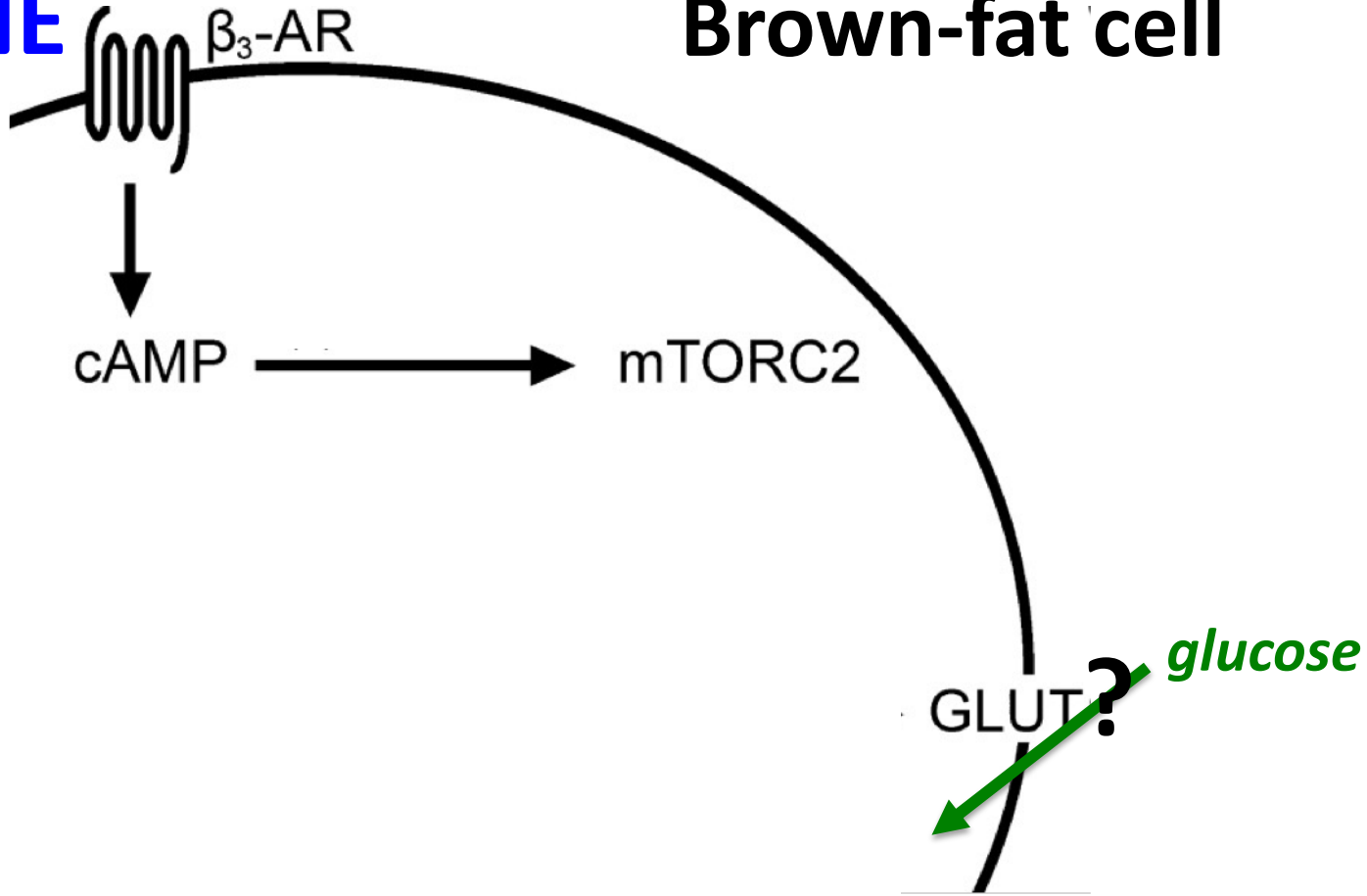
$\beta_1\beta_2$ KO and FVB Mice





NE

Brown-fat cell

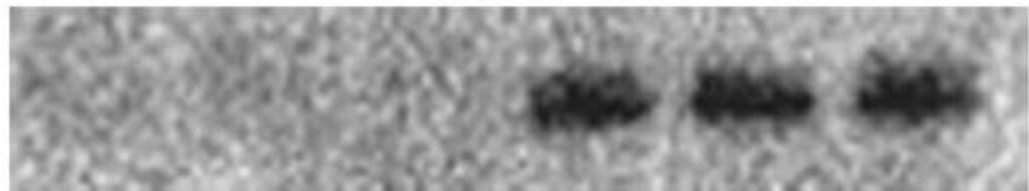


	Plasma membrane			Vesicles		
NE (h)	0	2	5	0	2	5

β_3 -AR

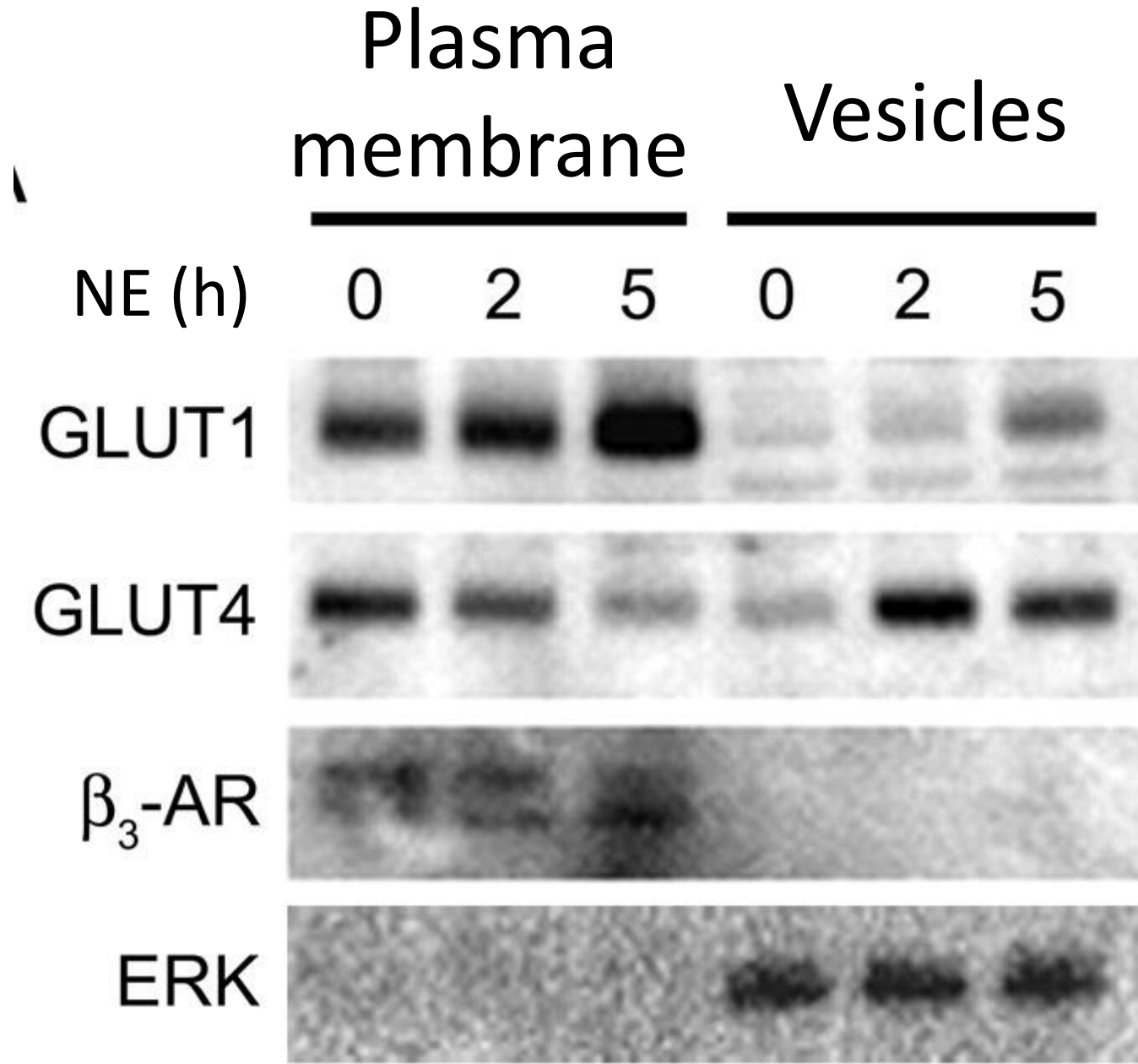


ERK



5

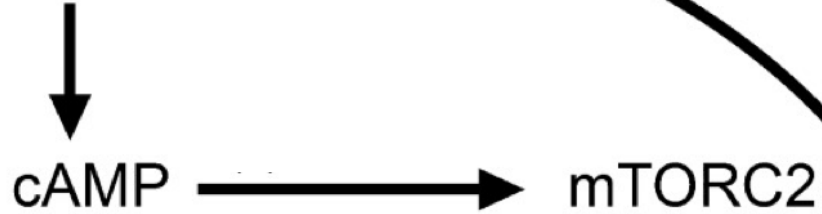
7928



NE

β_3 -AR

Brown-fat cell

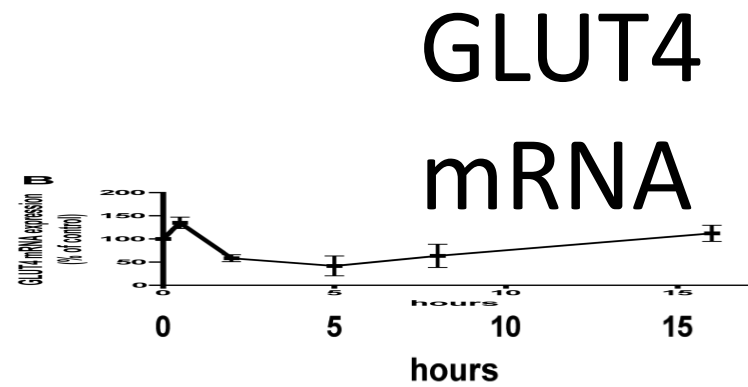
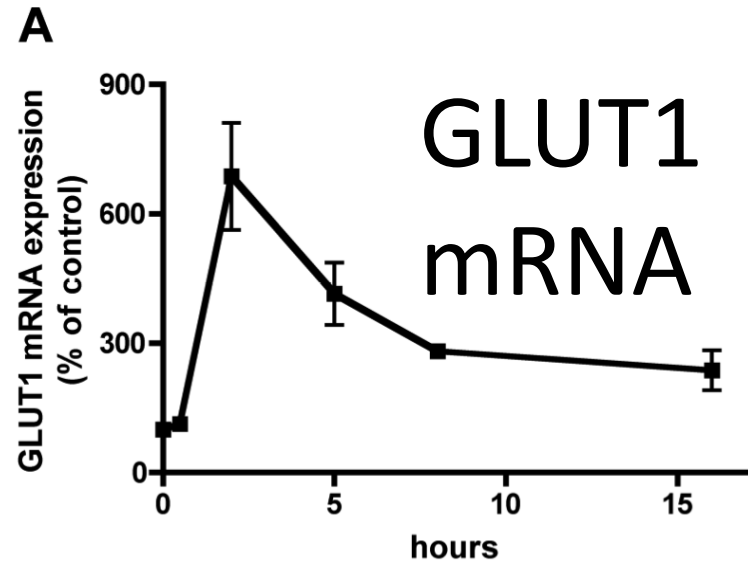


GLUT1

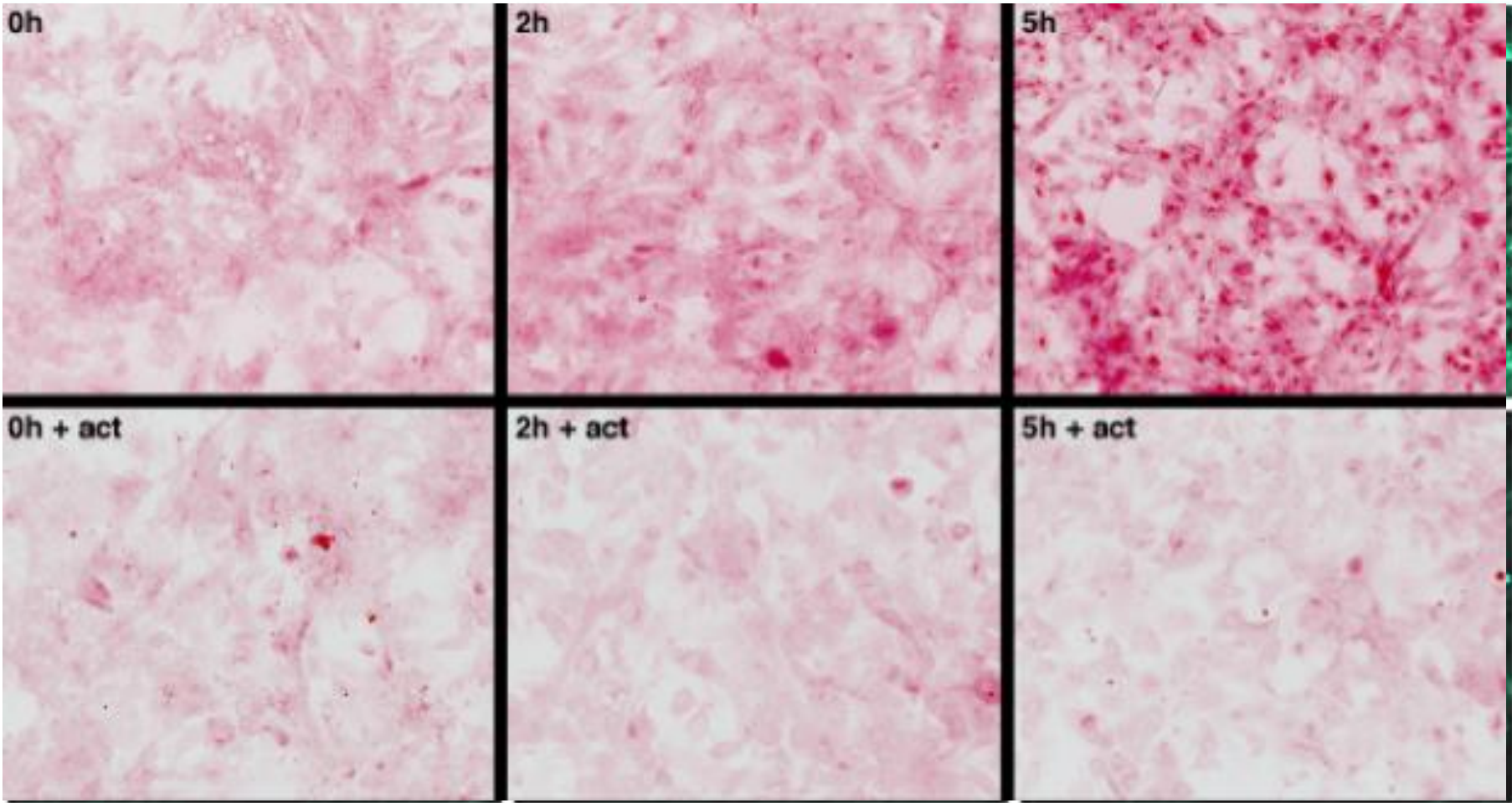
glucose



Acute effect of norepinephrine



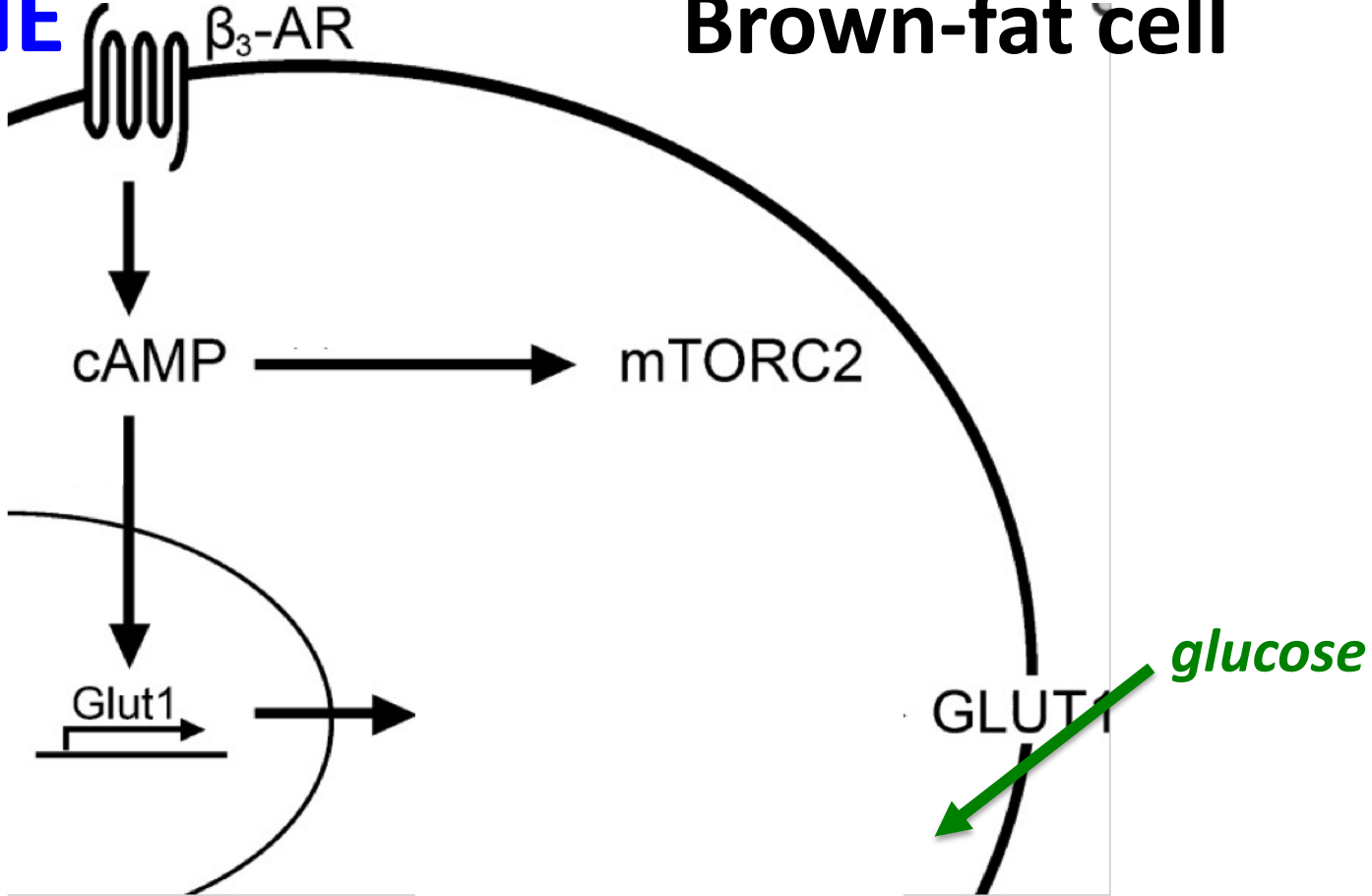
Adrenergically induced appearance of GLUT1 protein



NE

β_3 -AR

Brown-fat cell



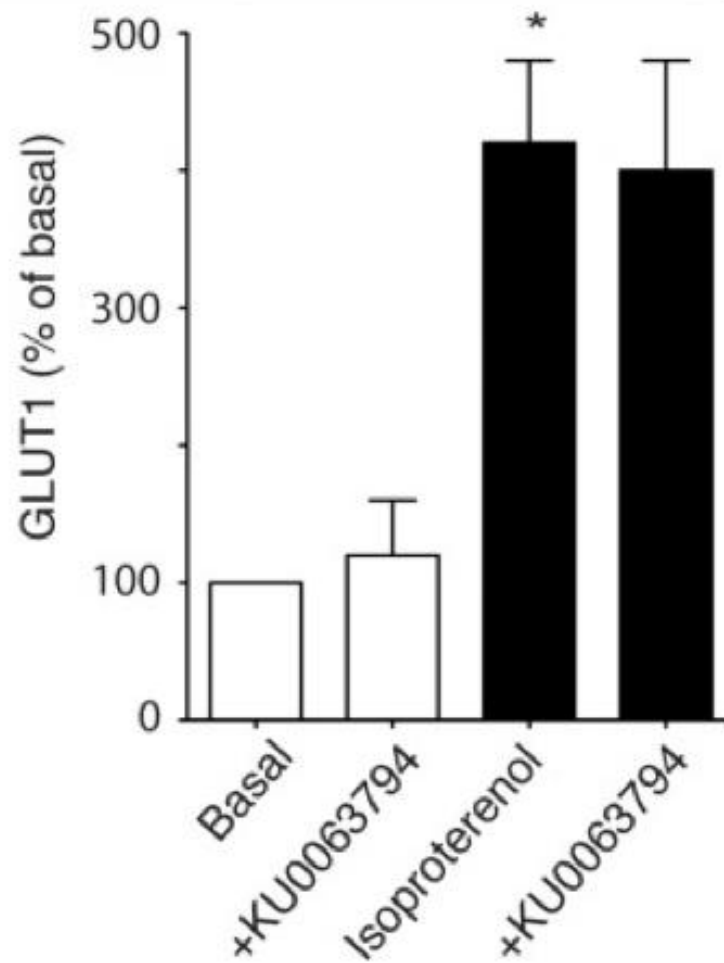
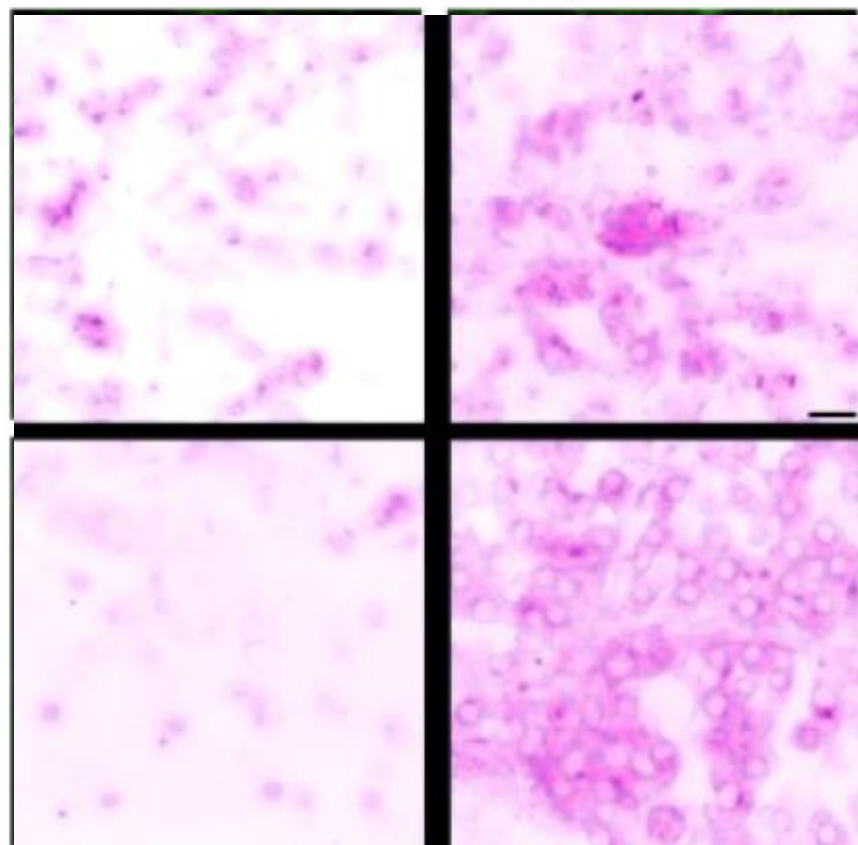
B

GLUT1 (total)

+KU0063794

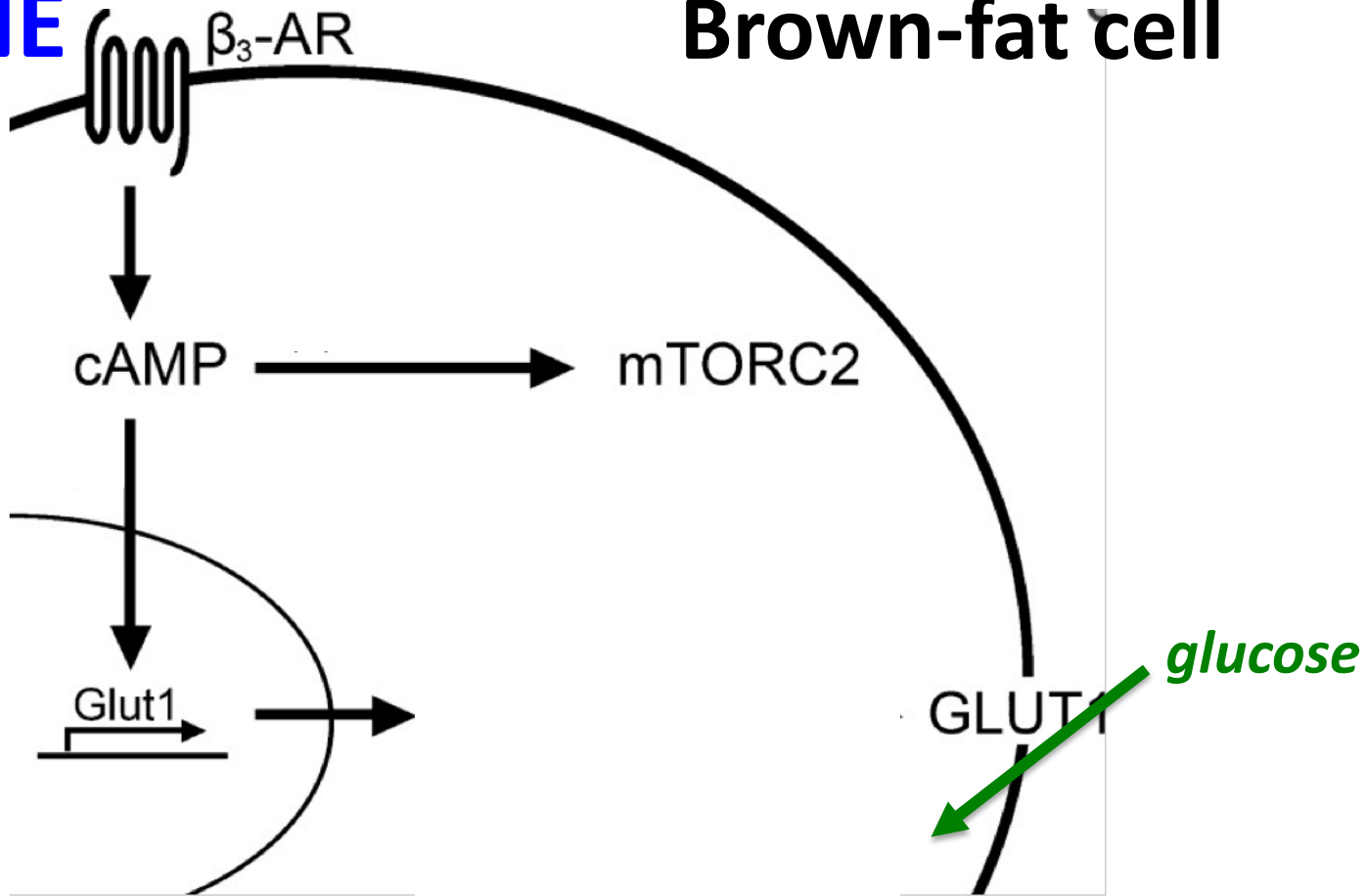
Basal

Isoproterenol



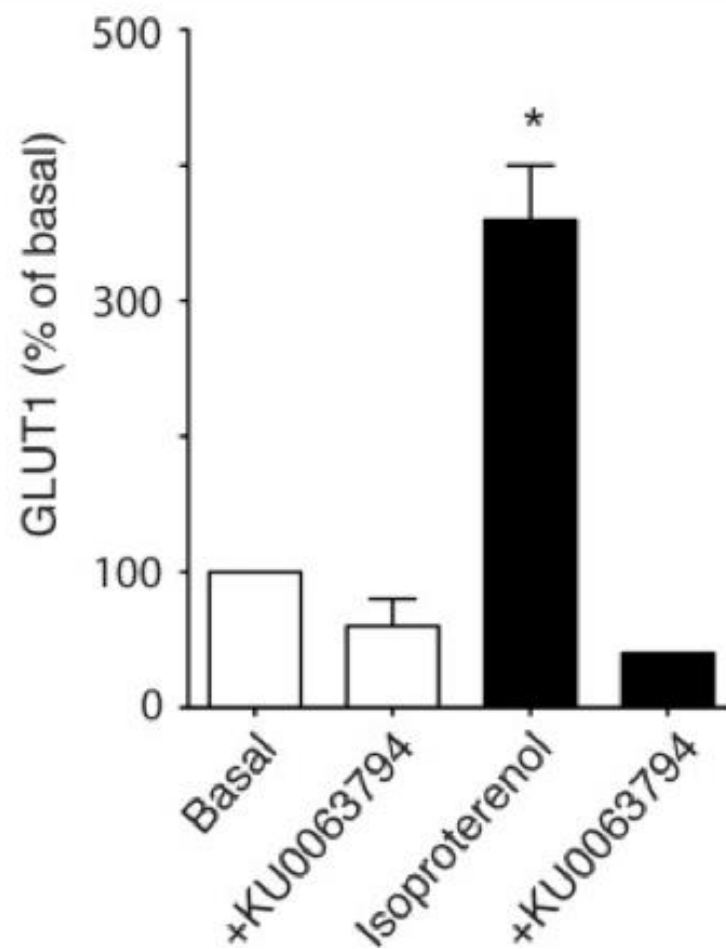
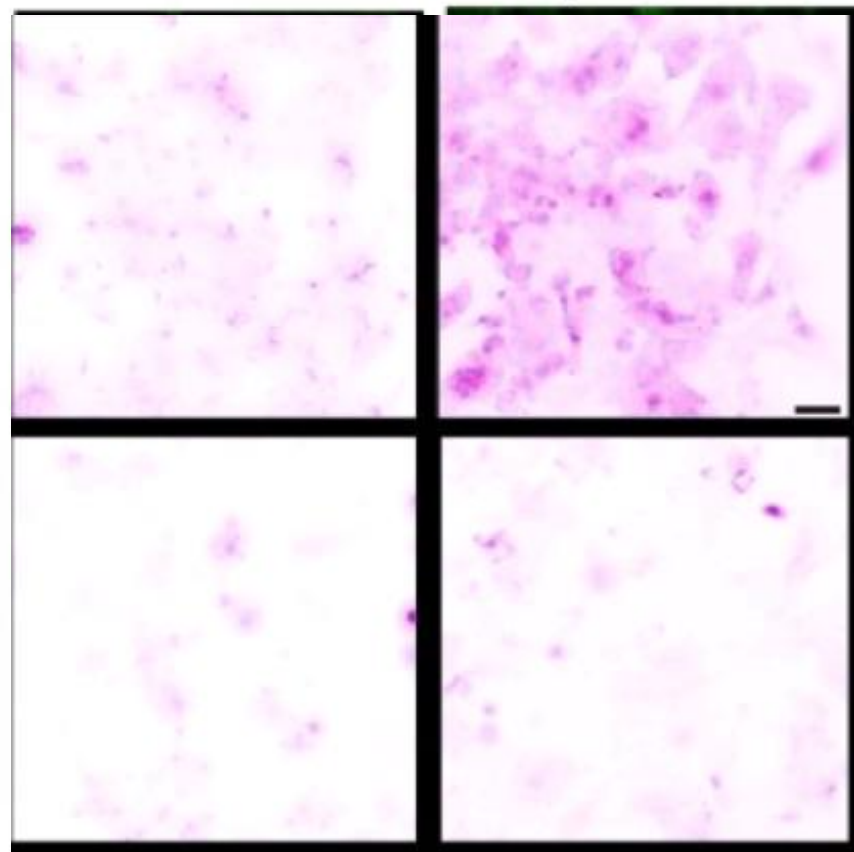
NE

Brown-fat cell



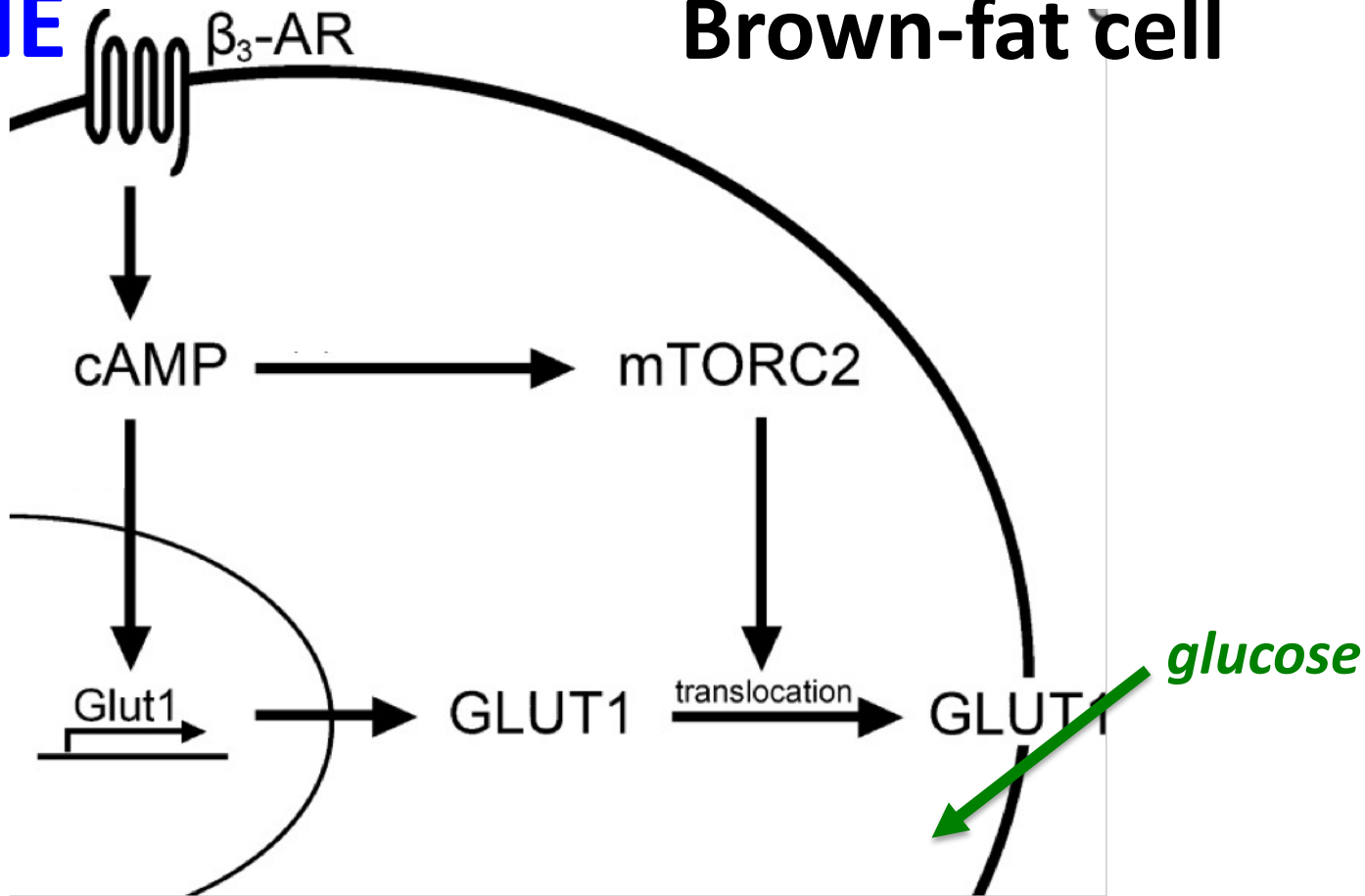
c

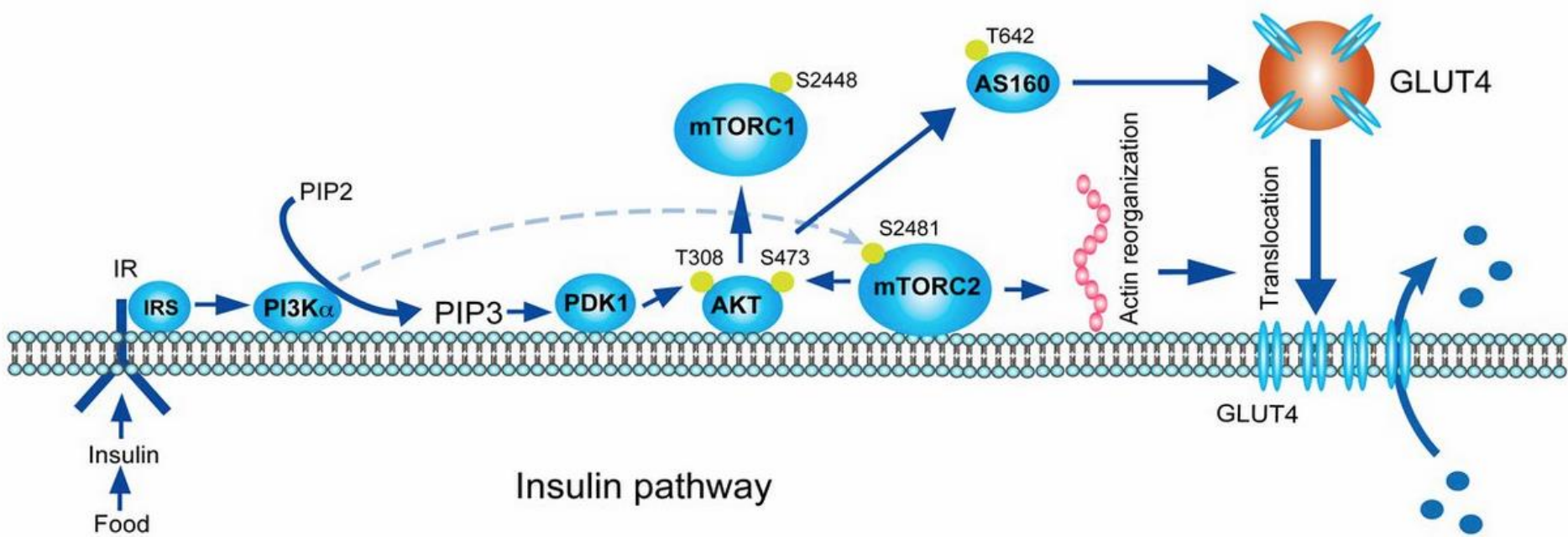
GLUT1 (plasma membrane)

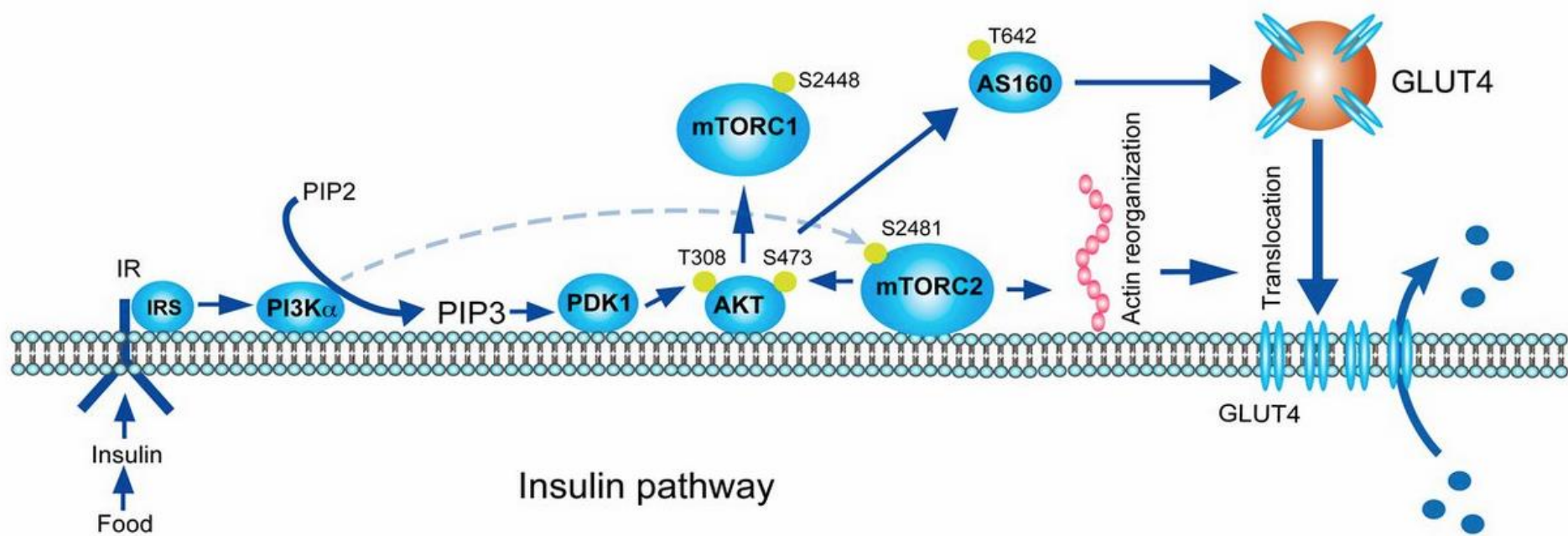
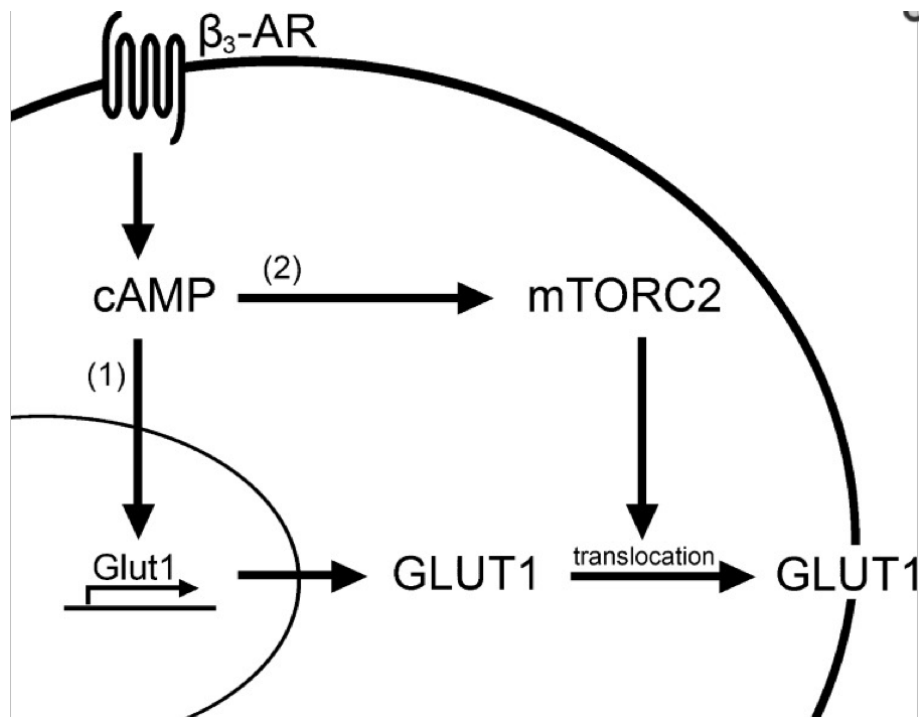
+KU0063794**Basal****Isoproterenol**

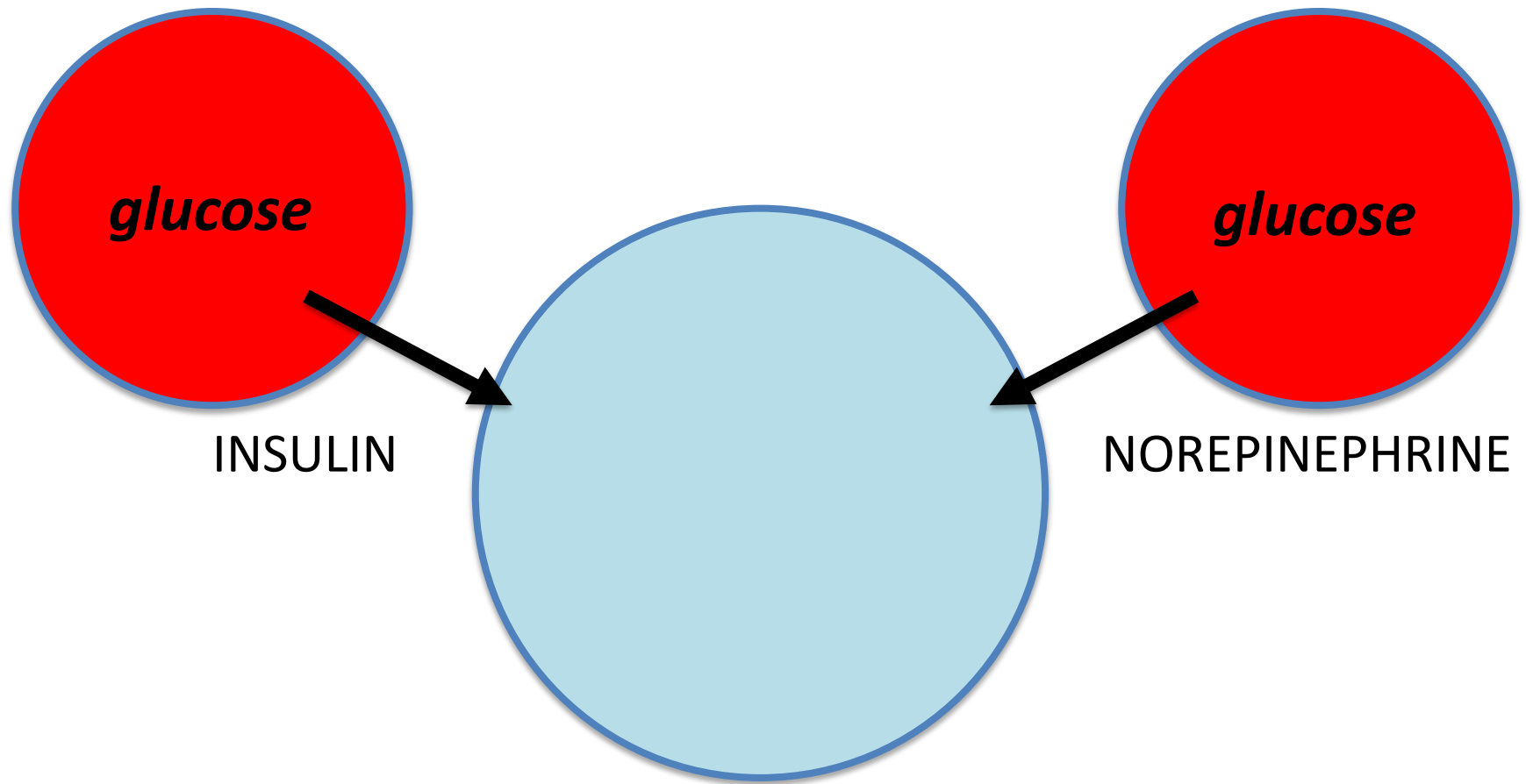
NE

Brown-fat cell









Worldwide increasing metabolic problems



Metabolic syndrome*:

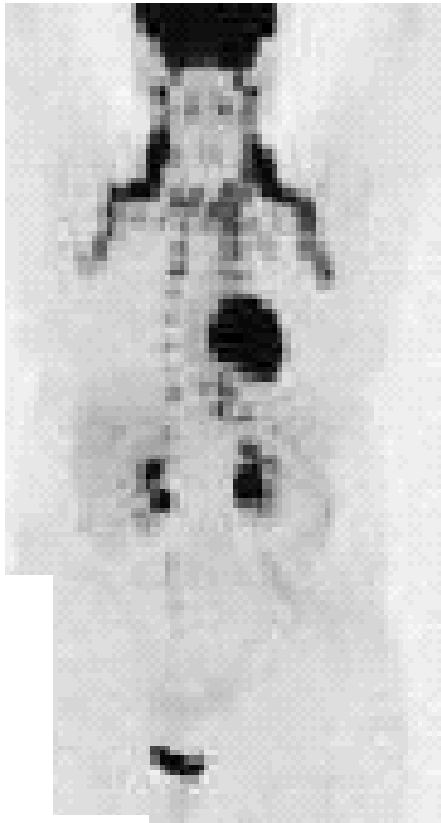
- **Central obesity**

plus any two of the following four factors:

- **raised triglycerides level in blood**
- **reduced HDL cholesterol in blood**
- **raised blood pressure**
- **raised fasting plasma glucose or type 2 diabetes (insulin resistance)**

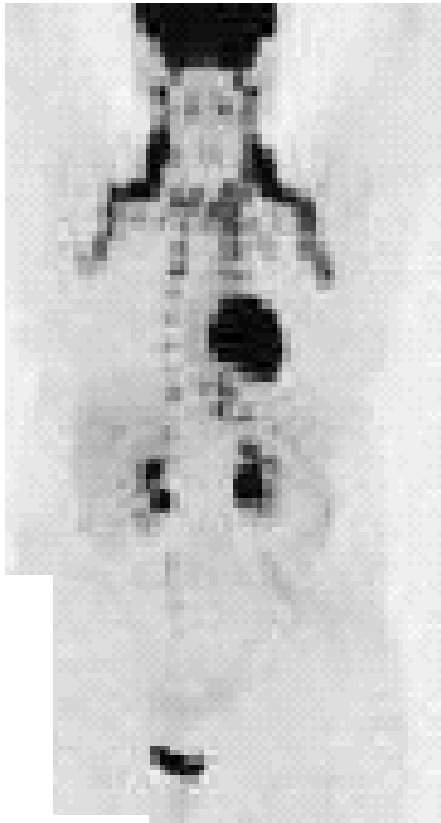
Active brown adipose tissue has the capacity to modulate most of above parameters

* newest IDF definition



Brown fat only dominates
glucose uptake
when we are inactive
and not postprandial
- and slightly cold





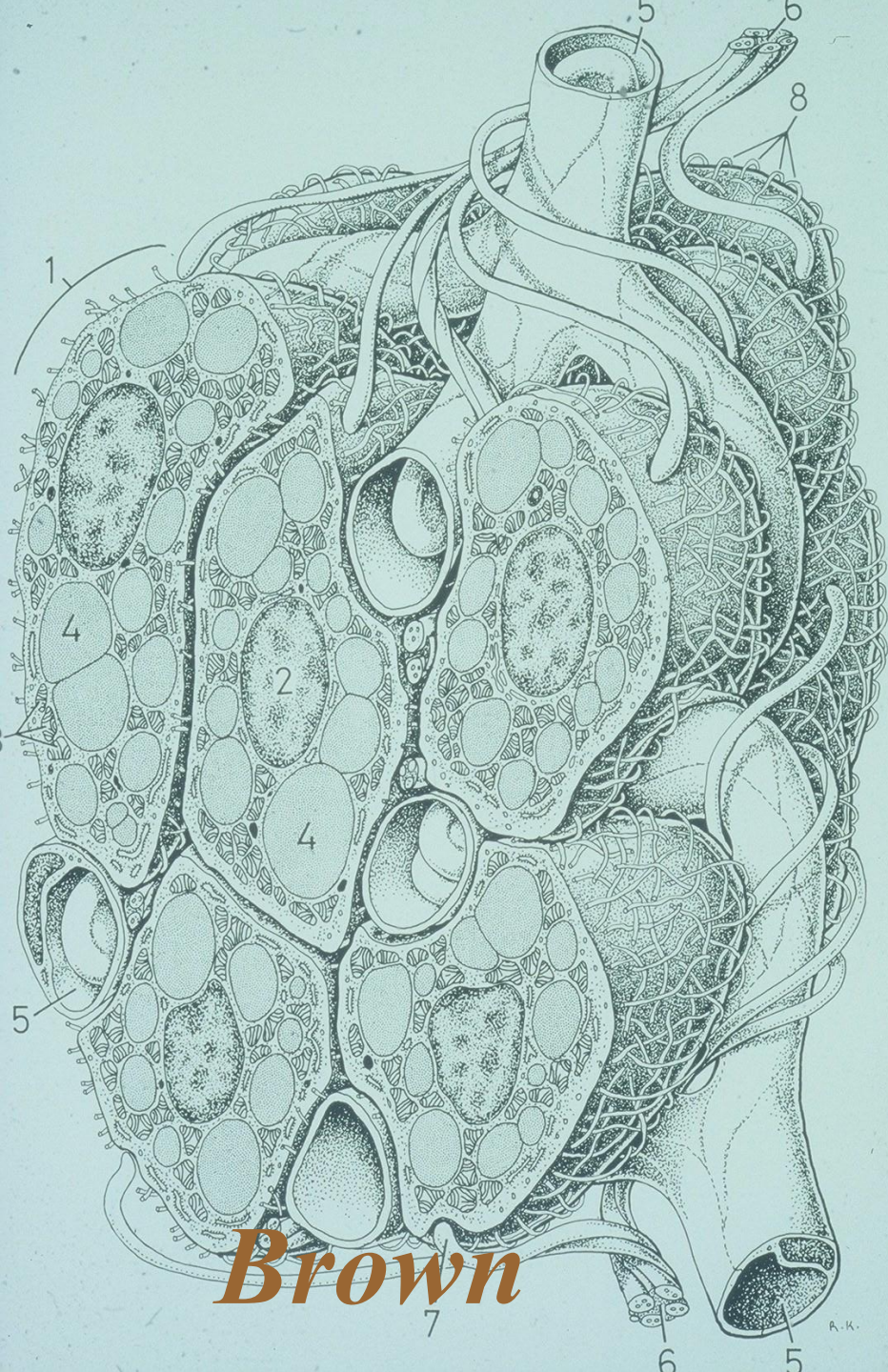
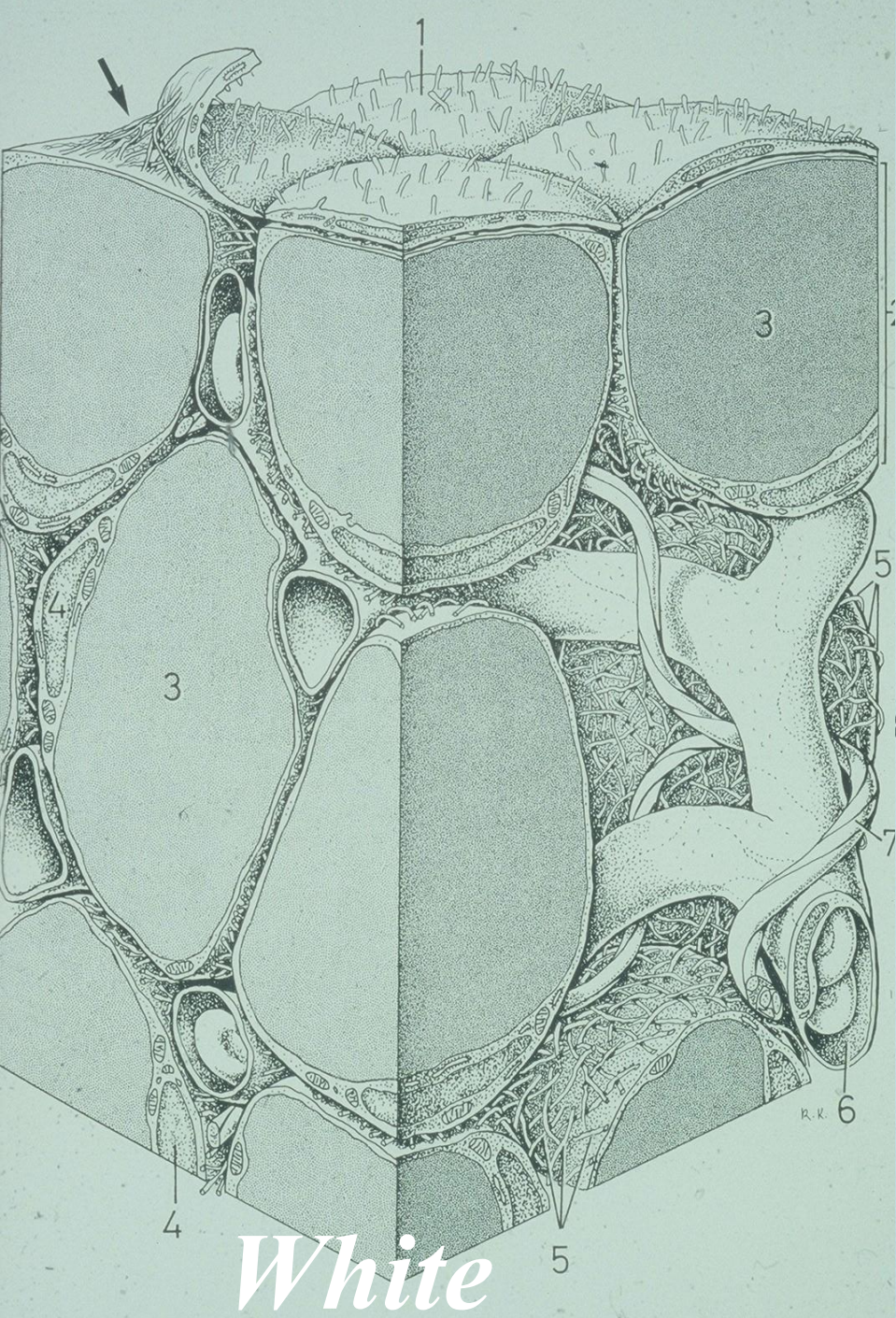
Brown fat only dominates
glucose uptake

when we are inactive
and not postprandial

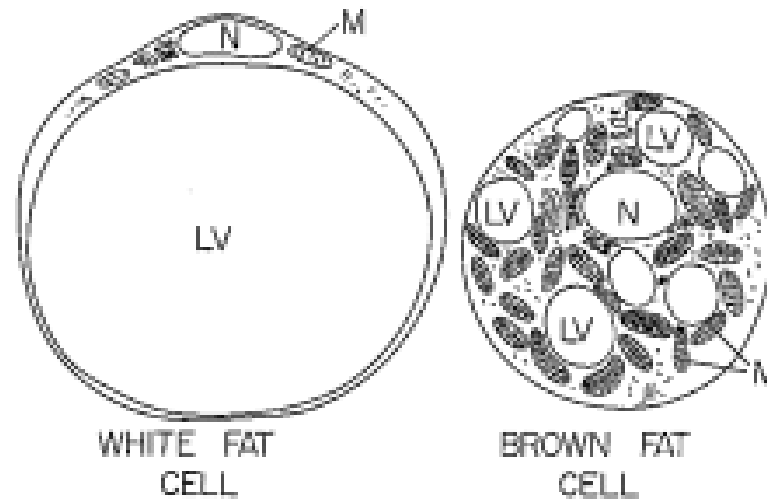
- and slightly cold

- that could be about

1/3 of our life.....



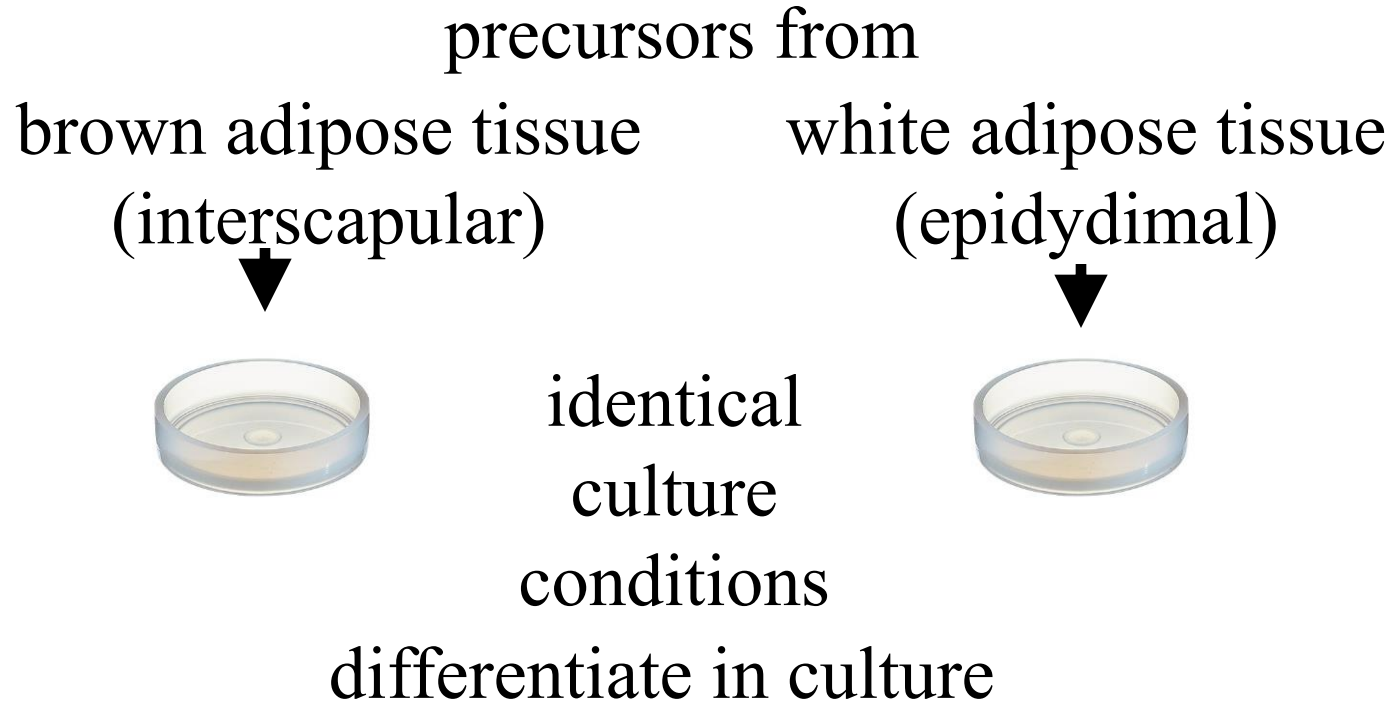
Brown and white fat cells: alike or different?



John Horowitz

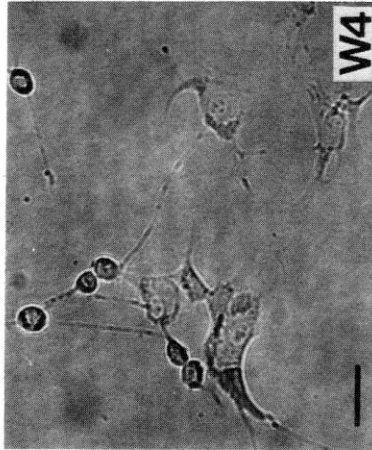
Are the cells different due to external "forces"
- or are they inherently different?

Cell culture: *brown versus white*

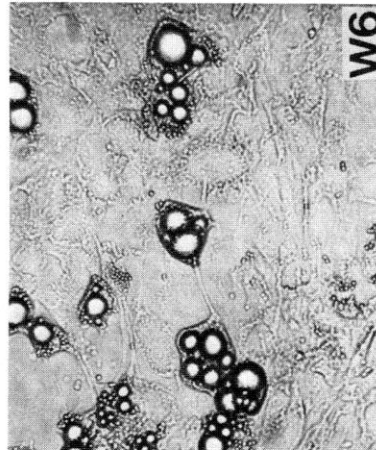


White precursors

4



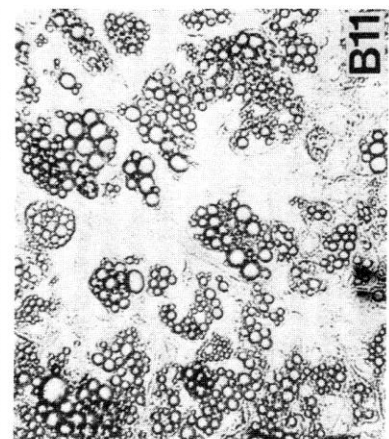
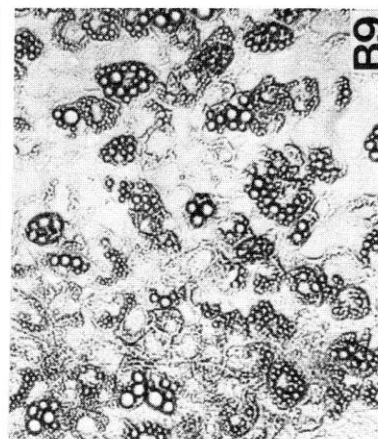
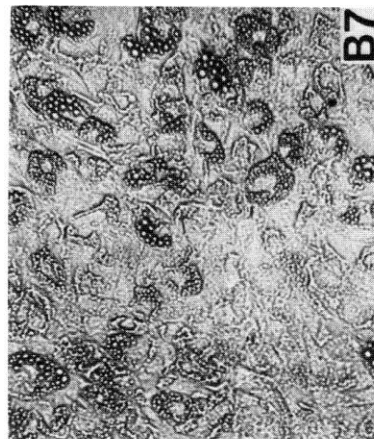
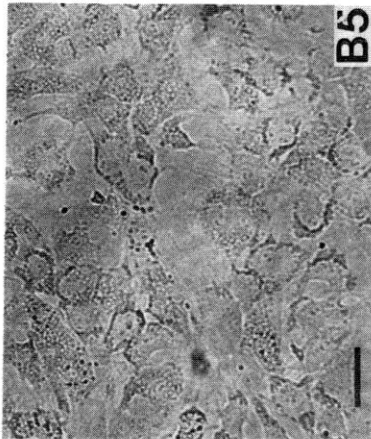
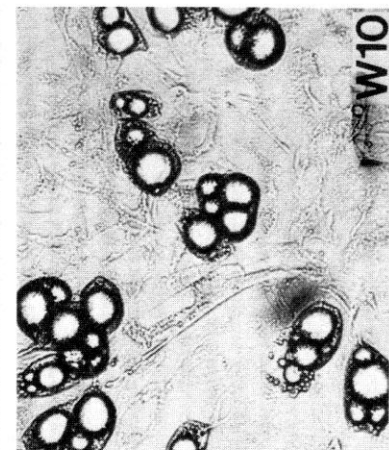
6



8



10 days in culture



Brown precursors

Rat cells

White precursors

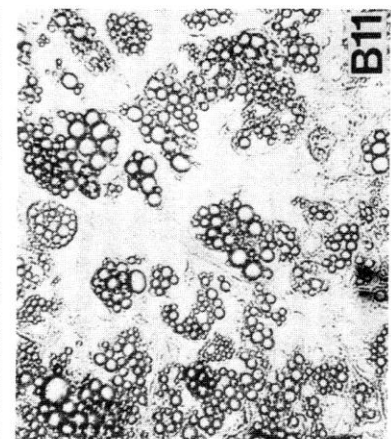
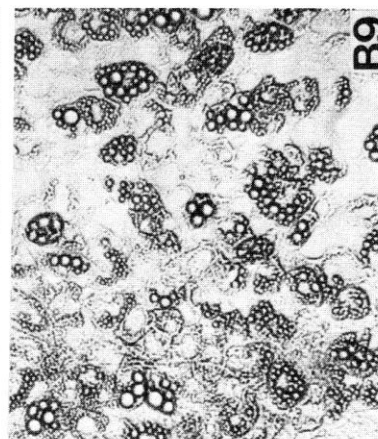
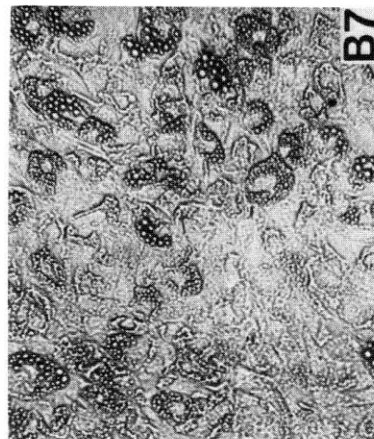
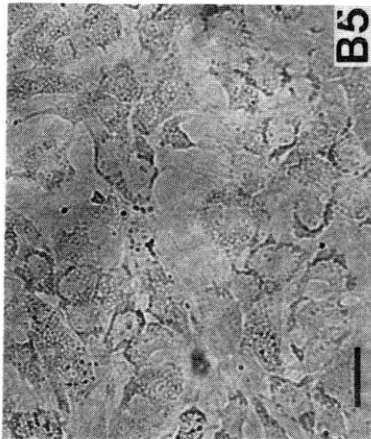
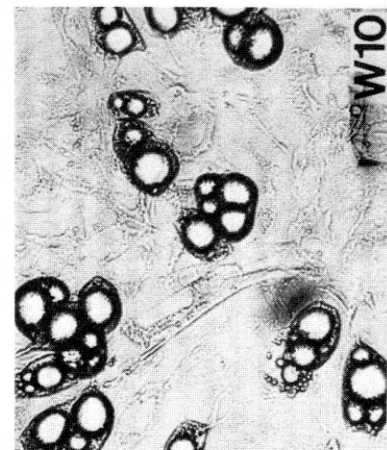
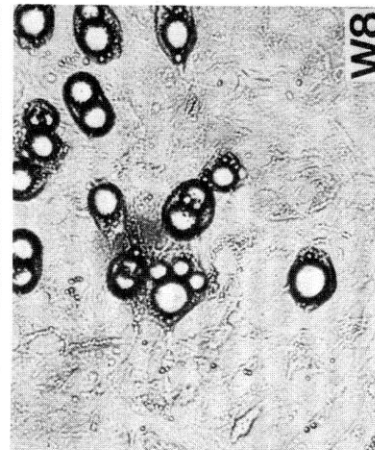
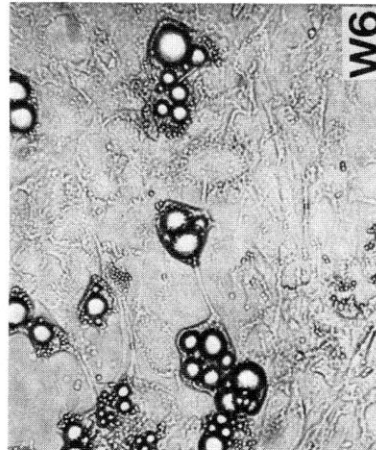
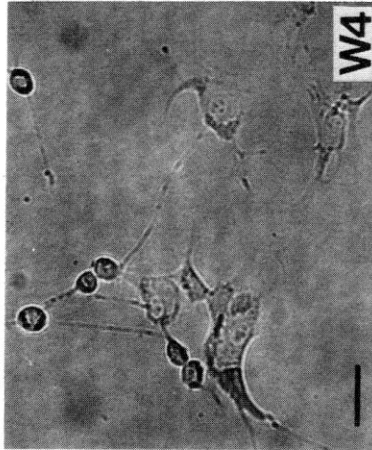
A cell-autonomous difference!

4

6

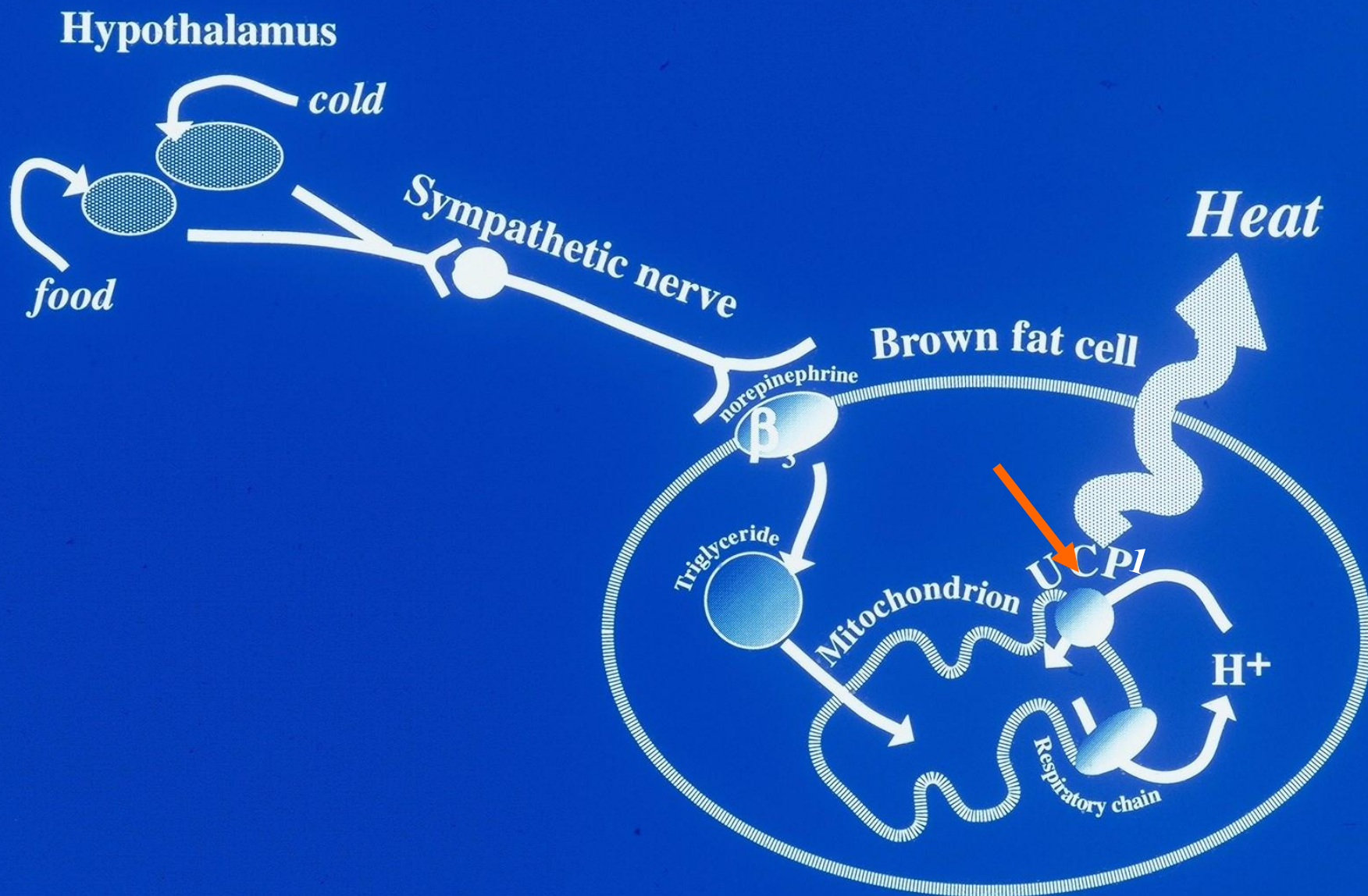
8

10 days in culture

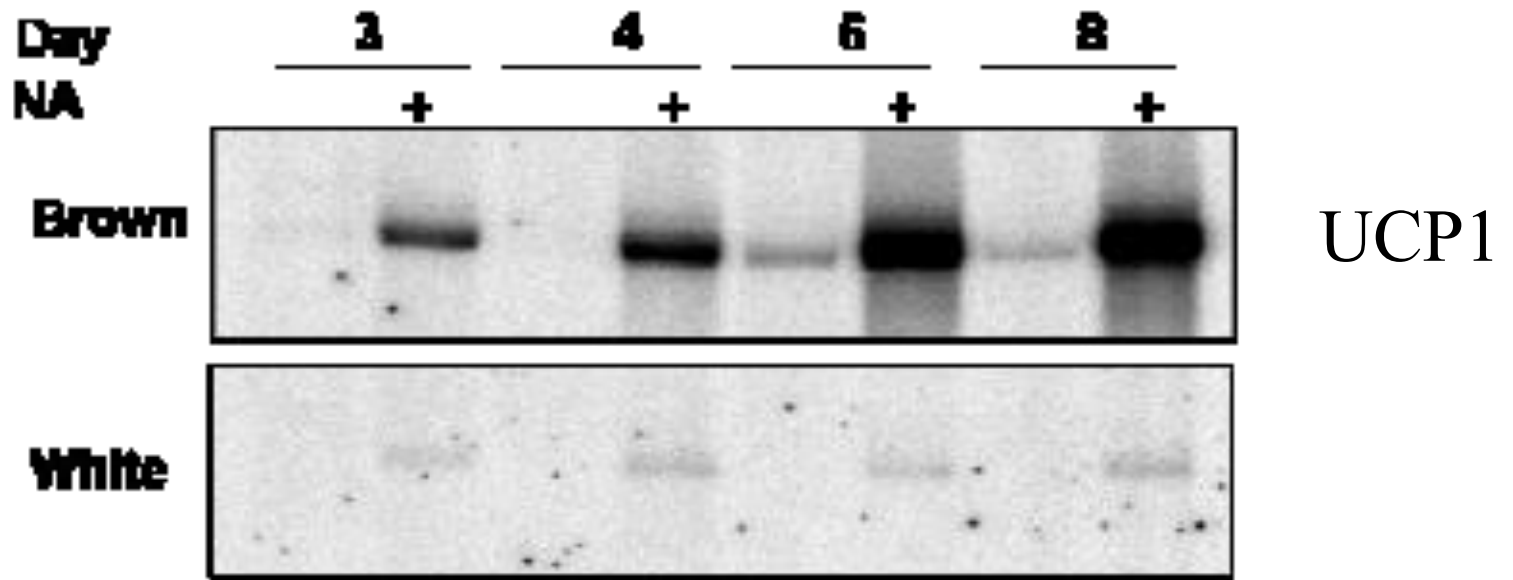


Brown precursors

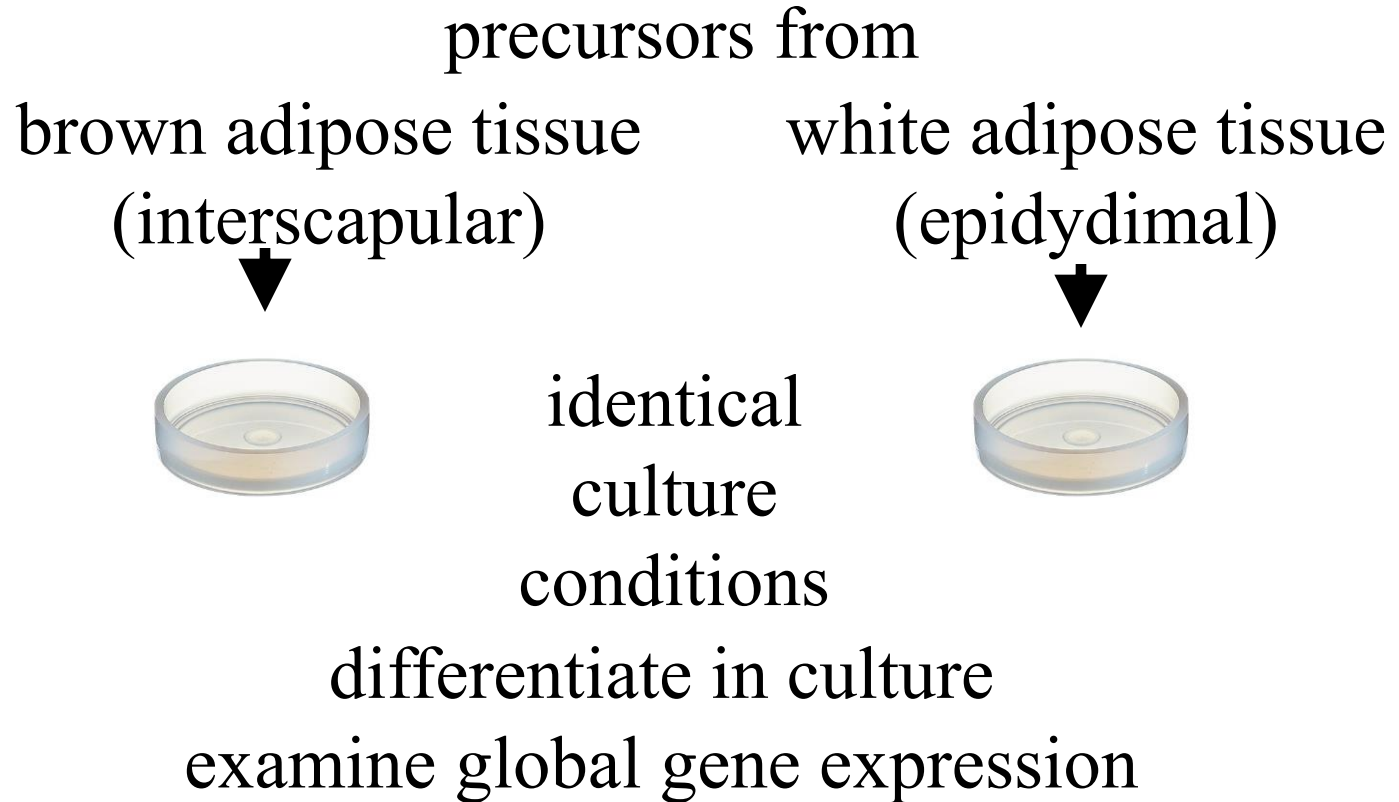
Rat cells



*brown and white remain different
under identical conditions*

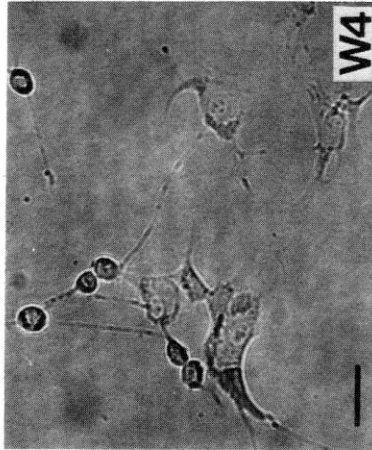


Cell culture: *brown versus white*

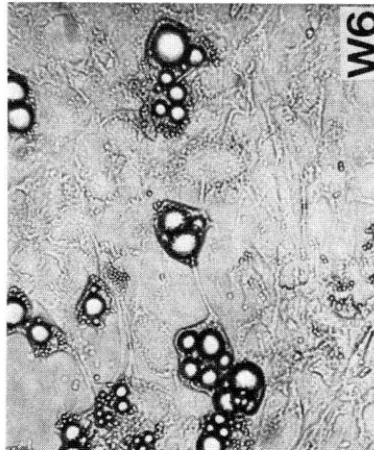


White precursors

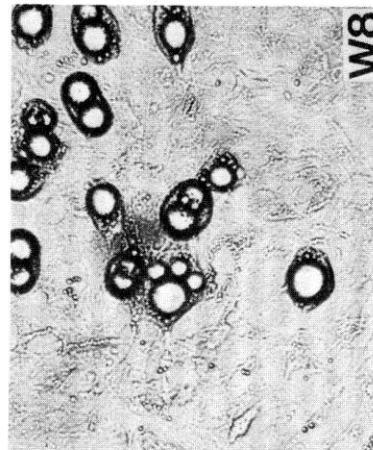
4



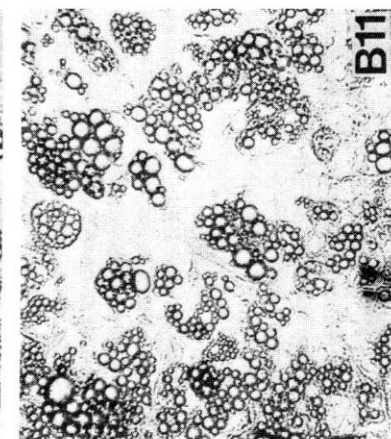
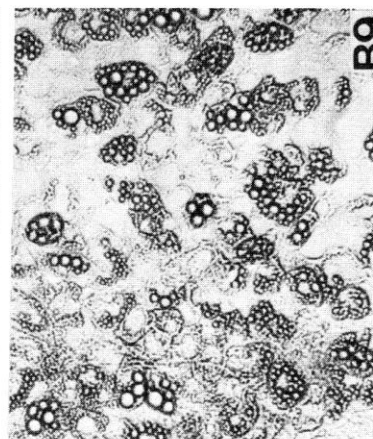
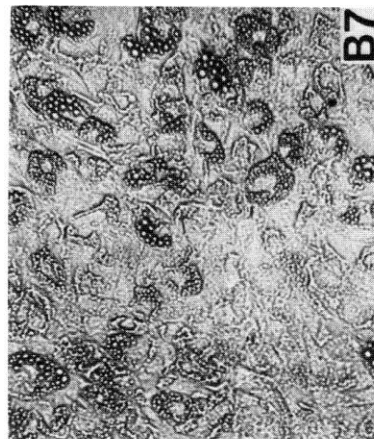
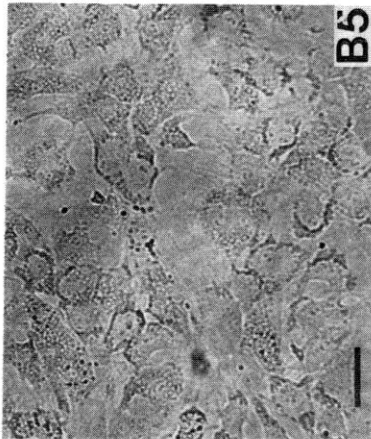
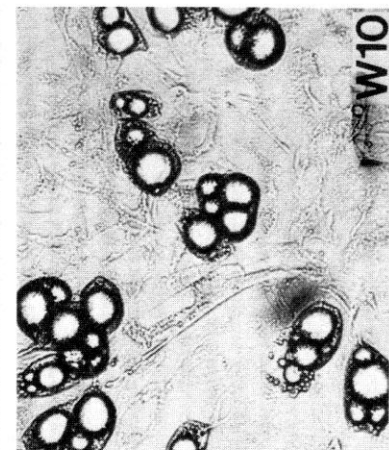
6



8



10 days in culture



Brown precursors

Rat cells

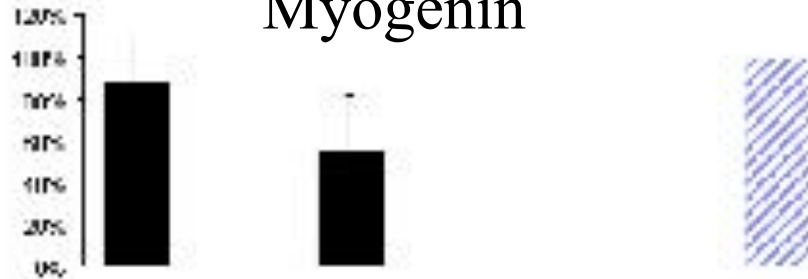
Genes enriched >5 fold in brown versus white undifferentiated pre-adipocytes

Gene Symbol	Gene Title
<i>Acta1</i>	actin, alpha 1, skeletal muscle
<i>Actc1</i>	actin, alpha, cardiac
<i>Cd83</i>	CD83 antigen
<i>Chrna1</i>	cholinergic receptor, nicotinic, alpha polypeptide 1 (muscle)
<i>Cldn5</i>	claudin 5
<i>Icam2</i>	intercellular adhesion molecule 2
<i>Lhx8</i>	LIM homeobox protein 8
<i>Meox2</i>	mesenchyme homeobox 2
<i>Mme</i>	membrane metallo endopeptidase
<i>Myh3</i>	myosin, heavy polypeptide 3, skeletal muscle, embryonic
<i>Myl1</i>	myosin, light polypeptide 1
<i>Mylpf</i>	myosin light chain, phosphorylatable, fast skeletal muscle
<i>Myog</i>	<i>myogenin</i>
<i>Tbx15</i>	T-box 15
<i>Tnnc1</i>	troponin C, cardiac/slow skeletal
<i>Tnni1</i>	troponin I, skeletal, slow 1
<i>Tnnt3</i>	troponin T3, skeletal, fast
<i>Zic1</i>	zinc finger protein of the cerebellum 1

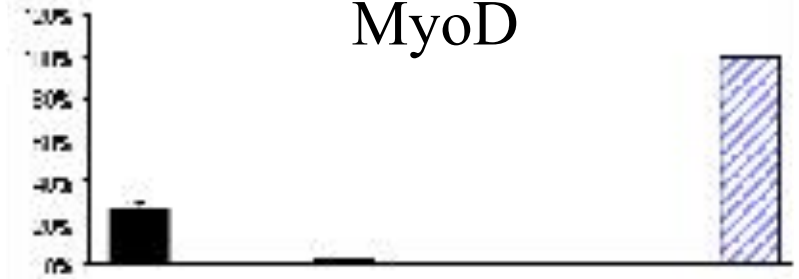
Genes enriched >5 fold in brown versus white undifferentiated pre-adipocytes

Gene Symbol	Gene Title
<i>Acta1</i>	actin, alpha 1, skeletal muscle
<i>Actc1</i>	actin, alpha, cardiac
<i>Cd83</i>	CD83 antigen
<i>Chrna1</i>	cholinergic receptor, nicotinic, alpha polypeptide 1 (muscle)
<i>Cldn5</i>	claudin 5
<i>Icam2</i>	intercellular adhesion molecule 2
<i>Lhx8</i>	LIM homeobox protein 8
<i>Meox2</i>	mesenchyme homeobox 2
<i>Mme</i>	membrane metallo endopeptidase
<i>Myh3</i>	myosin, heavy polypeptide 3, skeletal muscle, embryonic
<i>Myl1</i>	myosin, light polypeptide 1
<i>Mylpf</i>	myosin light chain, phosphorylatable, fast skeletal muscle
<i>Myog</i>	<i>myogenin</i>
<i>Tbx15</i>	T-box 15
<i>Tnnc1</i>	troponin C, cardiac/slow skeletal
<i>Tnni1</i>	troponin I, skeletal, slow 1
<i>Tnnt3</i>	troponin T3, skeletal, fast
<i>Zic1</i>	zinc finger protein of the cerebellum 1

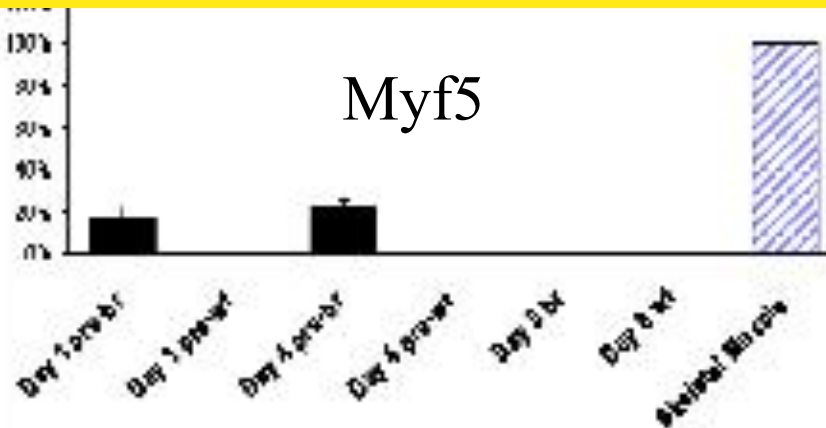
Myogenin



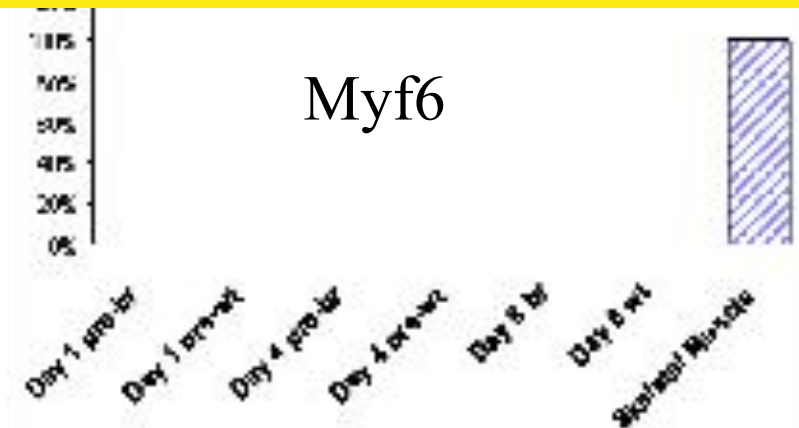
MyoD



Myf5

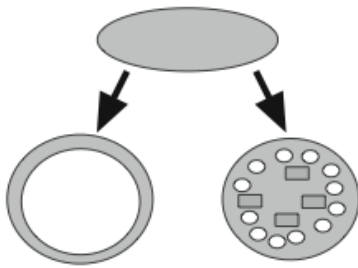


Myf6

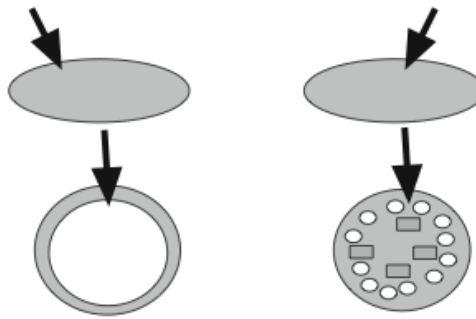


A myogenic gene expression signature establishes that brown and white adipocytes originate from distinct cell lineages

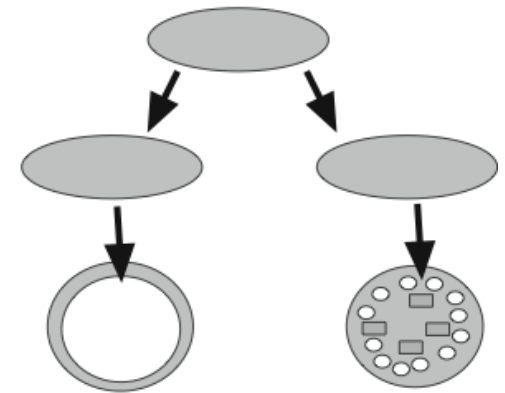
a) common stem cell



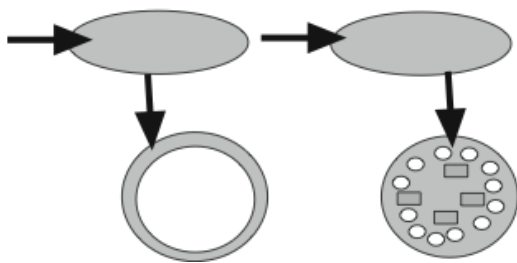
b) different stem cells



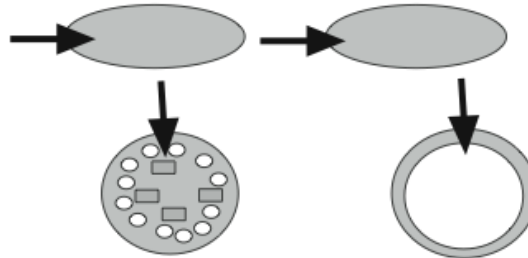
c) dichotomizing stem cells



d) white to brown stem cell

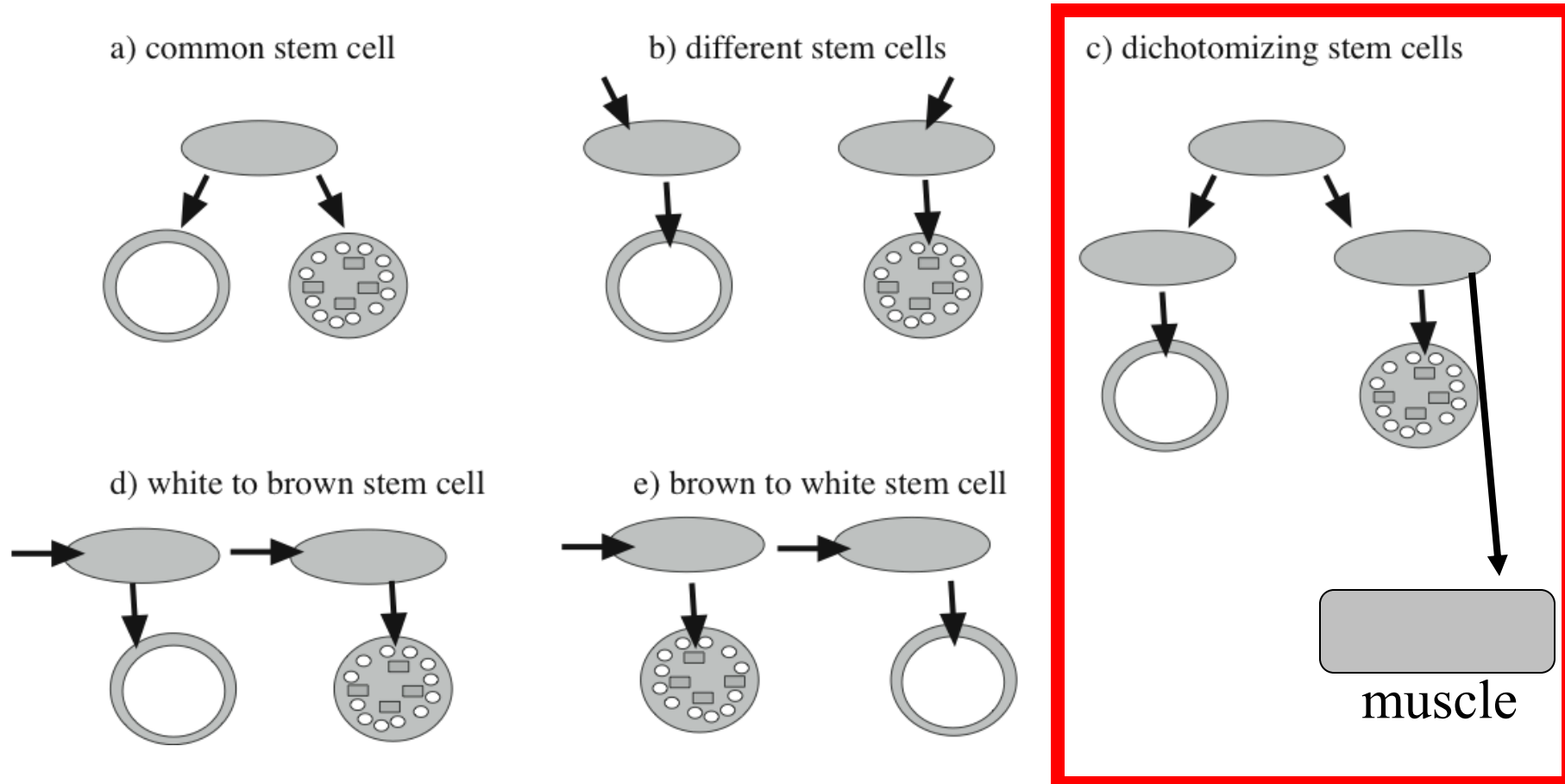


e) brown to white stem cell



A myogenic gene expression signature establishes
that brown and white adipocytes originate from distinct cell lineages

Timmons et al. (2007) PNAS

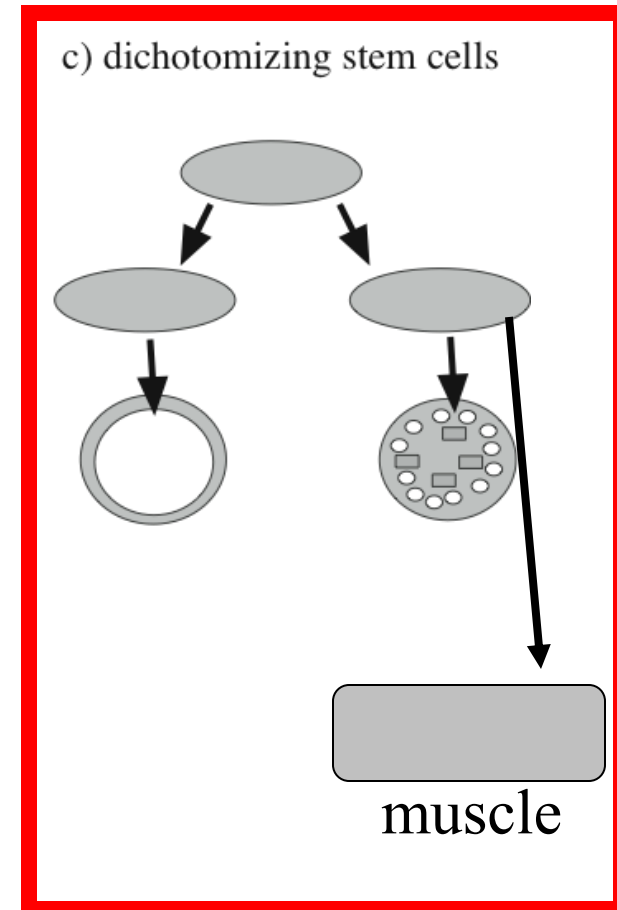


A myogenic gene expression signature establishes that brown and white adipocytes originate from distinct cell lineages

Timmons et al. (2007) PNAS

**Brown fat cells are
“adipomyocytes”**

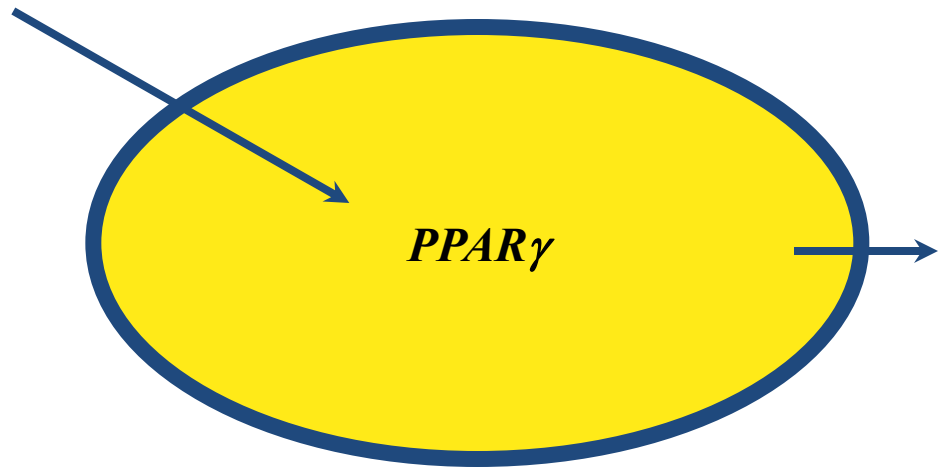
-



**Are all UCP1-containing cells
brown adipocytes?**

Treatment of *white* adipocytes

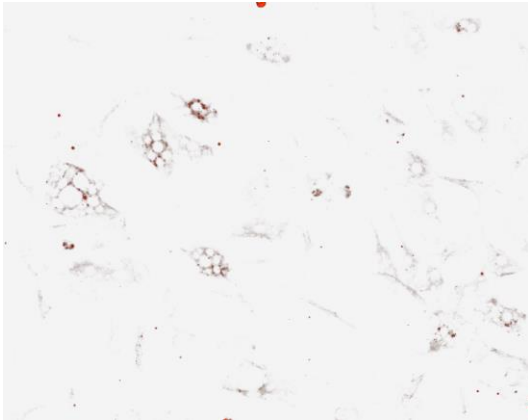
Rosiglitazone



adipo-
genesis

White adipocytes

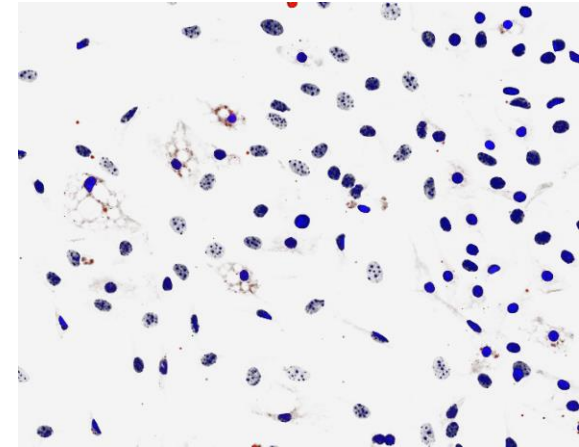
VDAC



UCP1



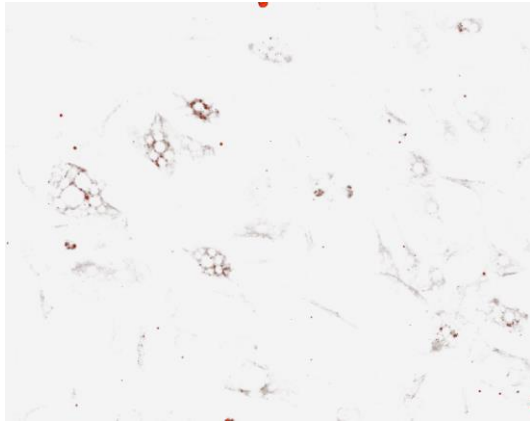
VDAC
UCP1
nuclei



Do all white fat cells become "brown"?
(i.e. express UCP1)?

White adipocytes

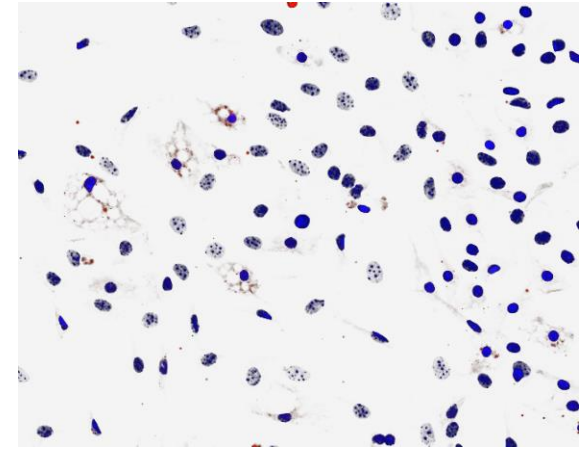
VDAC



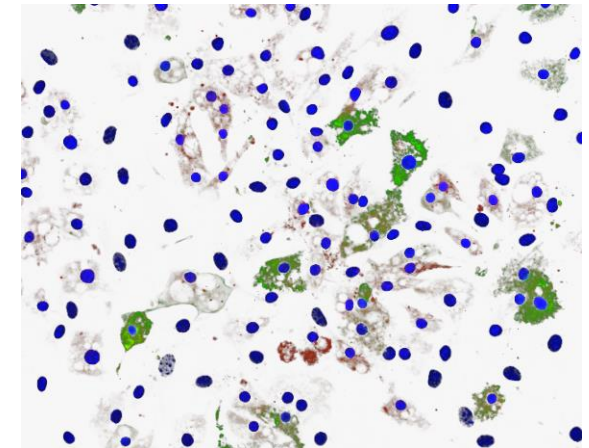
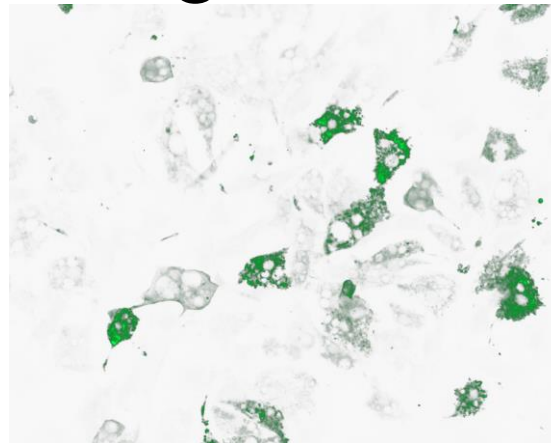
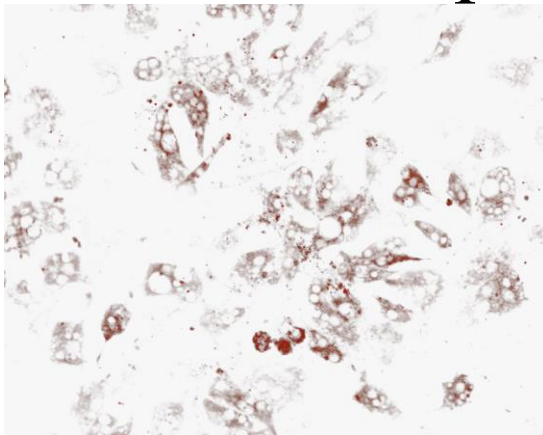
UCP1



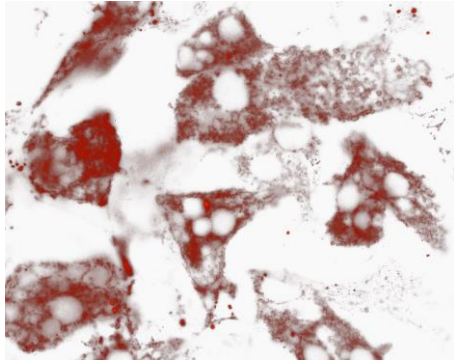
VDAC
UCP1
nuclei



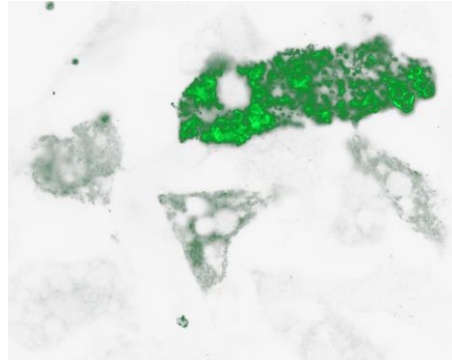
plus rosiglitazone



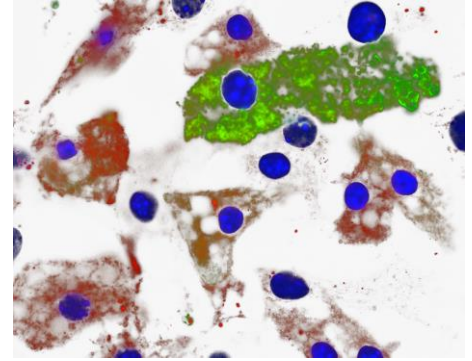
VDAC



UCP1



VDAC
UCP1
nuclei

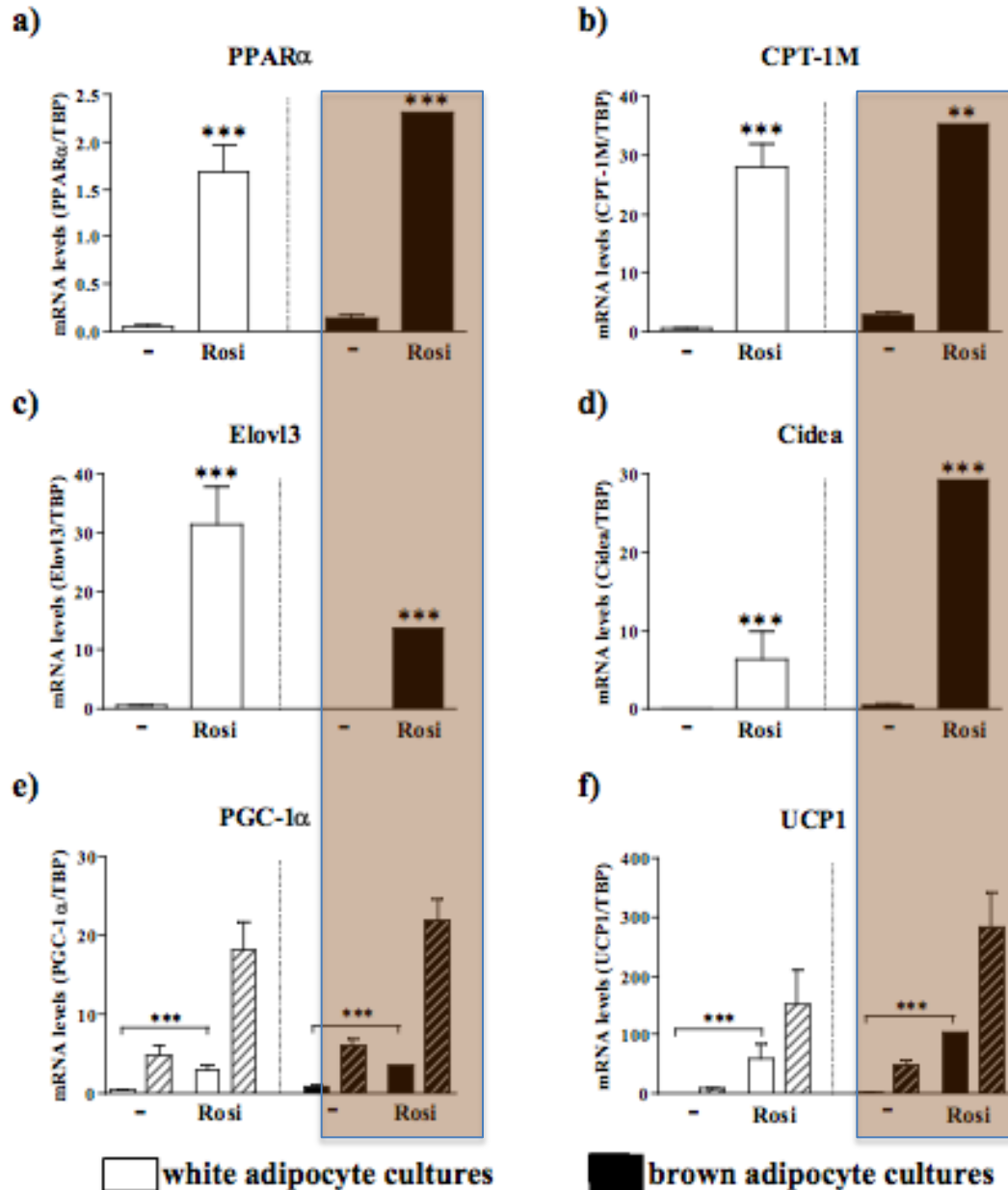


White adipocytes
Rosiglitazone

Are the UCP1-expressing cells
"true" brown adipocytes?

They express UCP1 - but is that sufficient?

Established brown adipocyte-specific genes



Established brown adipocyte genes are induced in white adipocytes

Are the UCP1-expressing cells
"true" brown adipocytes?

They express UCP1 - but is that sufficient?

What characterizes a "true" brown adipocyte?

**Genes enriched >5 fold
in brown versus white undifferentiated pre-adipocytes**

Gene Symbol	Gene Title
<i>Acta1</i>	actin, alpha 1, skeletal muscle
<i>Actc1</i>	actin, alpha, cardiac
<i>Cd83</i>	CD83 antigen
<i>Chrna1</i>	cholinergic receptor, nicotinic, alpha polypeptide 1 (muscle)
<i>Cldn5</i>	claudin 5
<i>Icam2</i>	intercellular adhesion molecule 2
<i>Lhx8</i>	LIM homeobox protein 8
<i>Meox2</i>	mesenchyme homeobox 2
<i>Mme</i>	membrane metallo endopeptidase
<i>Myh3</i>	myosin, heavy polypeptide 3, skeletal muscle, embryonic
<i>Myl1</i>	myosin, light polypeptide 1
<i>Mylpf</i>	myosin light chain, phosphorylatable, fast skeletal muscle
<i>Myog</i>	<i>myogenin</i>
<i>Tbx15</i>	T-box 15
<i>Tnnc1</i>	troponin C, cardiac/slow skeletal
<i>Tnni1</i>	troponin I, skeletal, slow 1
<i>Tnnt3</i>	troponin T3, skeletal, fast
<i>Zic1</i>	zinc finger protein of the cerebellum 1

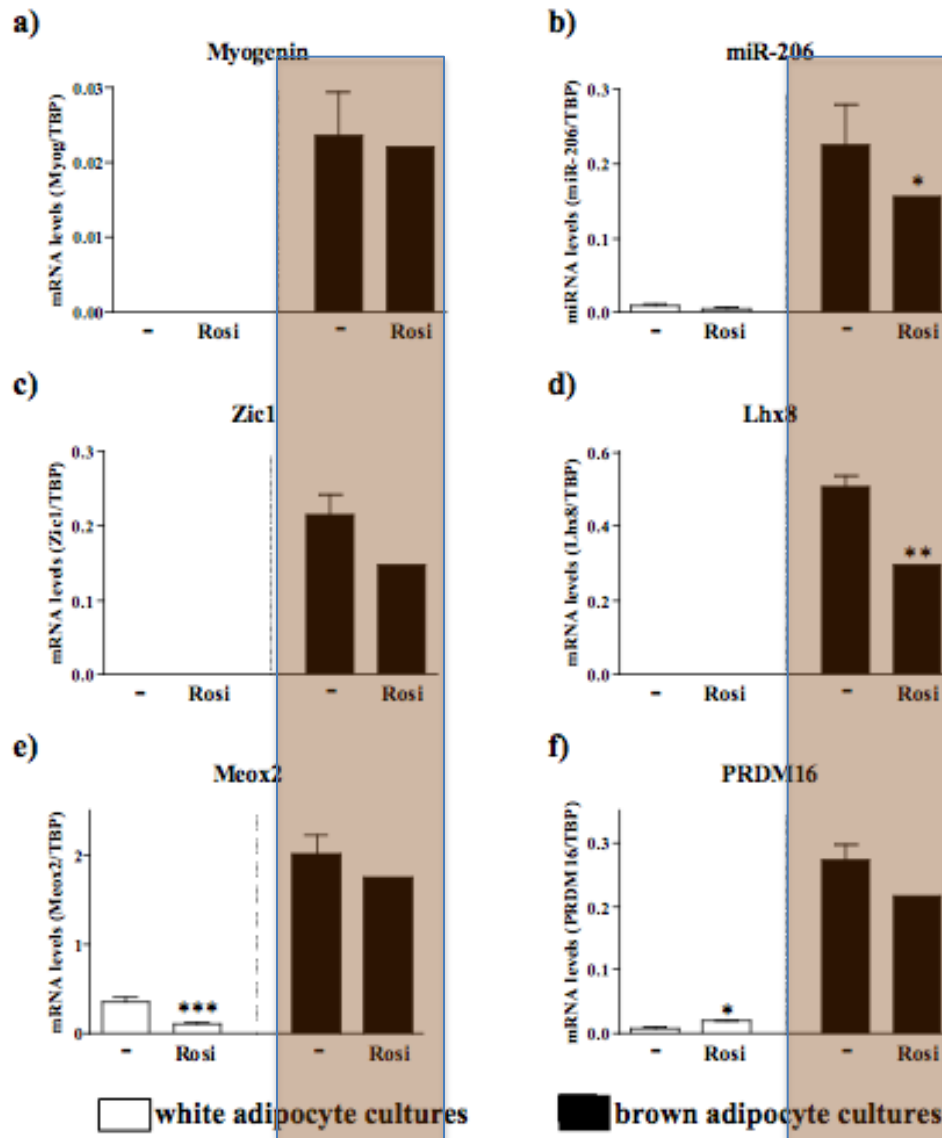
**Genes enriched >5 fold
in brown versus white undifferentiated pre-adipocytes**

Gene Symbol	Gene Title
<i>Acta1</i>	actin, alpha 1, skeletal muscle
<i>Actc1</i>	actin, alpha, cardiac
<i>Cd83</i>	CD83 antigen
<i>Chrna1</i>	cholinergic receptor, nicotinic, alpha polypeptide 1 (muscle)
<i>Cldn5</i>	claudin 5
<i>Icam2</i>	intercellular adhesion molecule 2
<i>Lhx8</i>	LIM homeobox protein 8
<i>Meox2</i>	mesenchyme homeobox 2
<i>Mme</i>	membrane metallo endopeptidase
<i>Myh3</i>	myosin, heavy polypeptide 3, skeletal muscle, embryonic
<i>Myl1</i>	myosin, light polypeptide 1
<i>Mylpf</i>	myosin light chain, phosphorylatable, fast skeletal muscle
<i>Myog</i>	myogenin
<i>Tbx15</i>	T-box 15
<i>Tnni1</i>	troponin C, cardiac/slow skeletal
<i>Tnni1</i>	troponin I, skeletal, slow 1
<i>Tnnt3</i>	troponin T3, skeletal, fast
<i>Zic1</i>	zinc finger protein of the cerebellum 1

Lhx8

Zic1

Novel brown adipocyte-specific genes



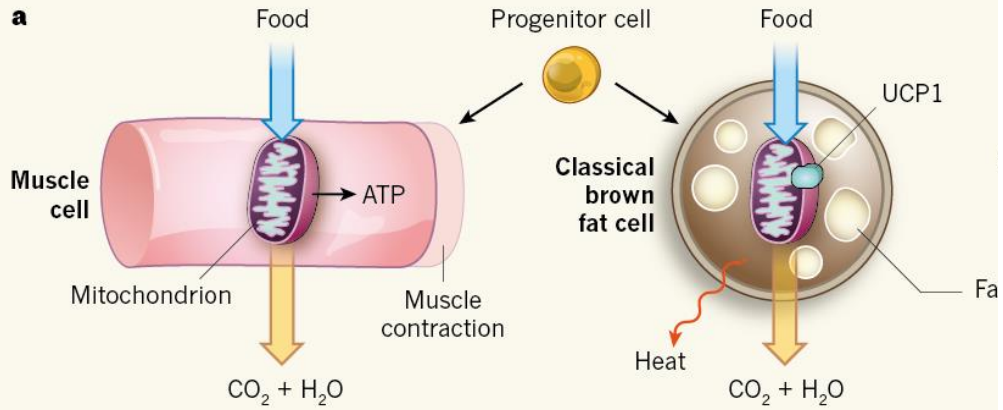
Novel brown adipocyte genes are not induced in white adipocytes

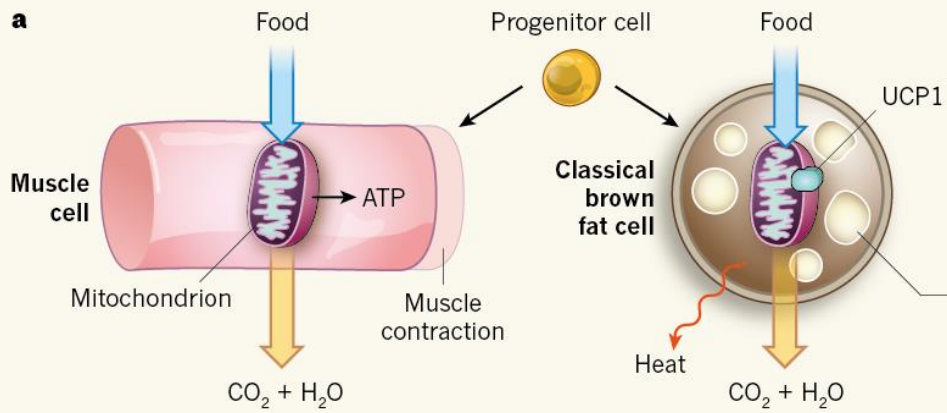
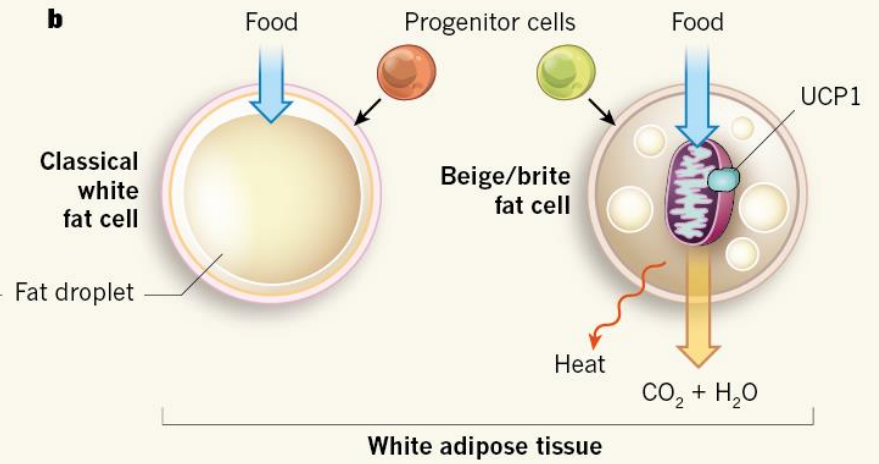
Thus, these cells are neither brown, nor white,
but they are **BR**own-like in wh**ITE** cultures:

thus they are **BRITE!**

or beige or induced or ectopic

a



a**b**

What is the point of brite/beige adipose tissue?

Heat production as in brown fat?

Yes, but capacity only 0-20 % of that of brown fat (in mice)

Only form in humans?

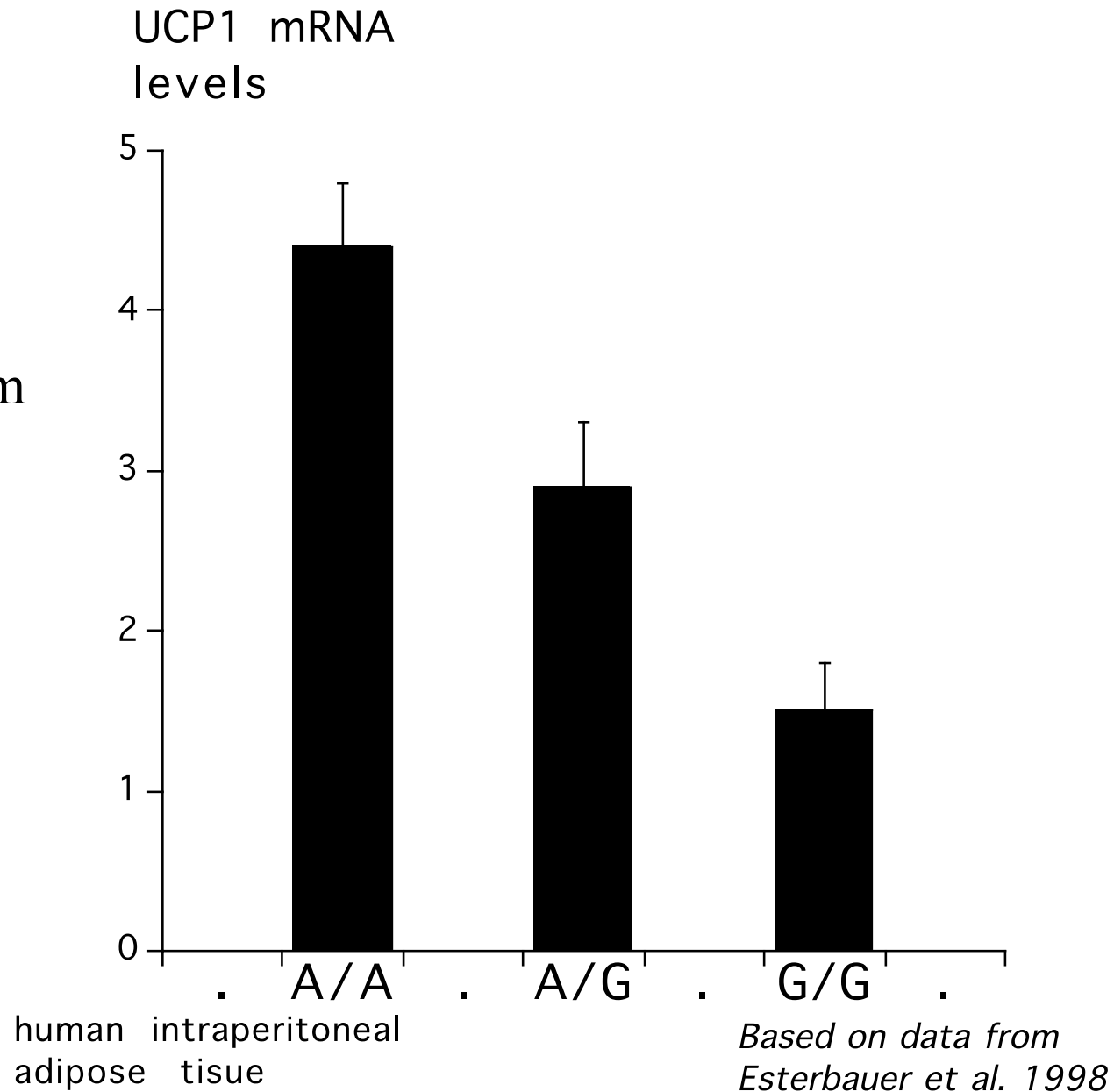
Probably not, humans have both, just like mice

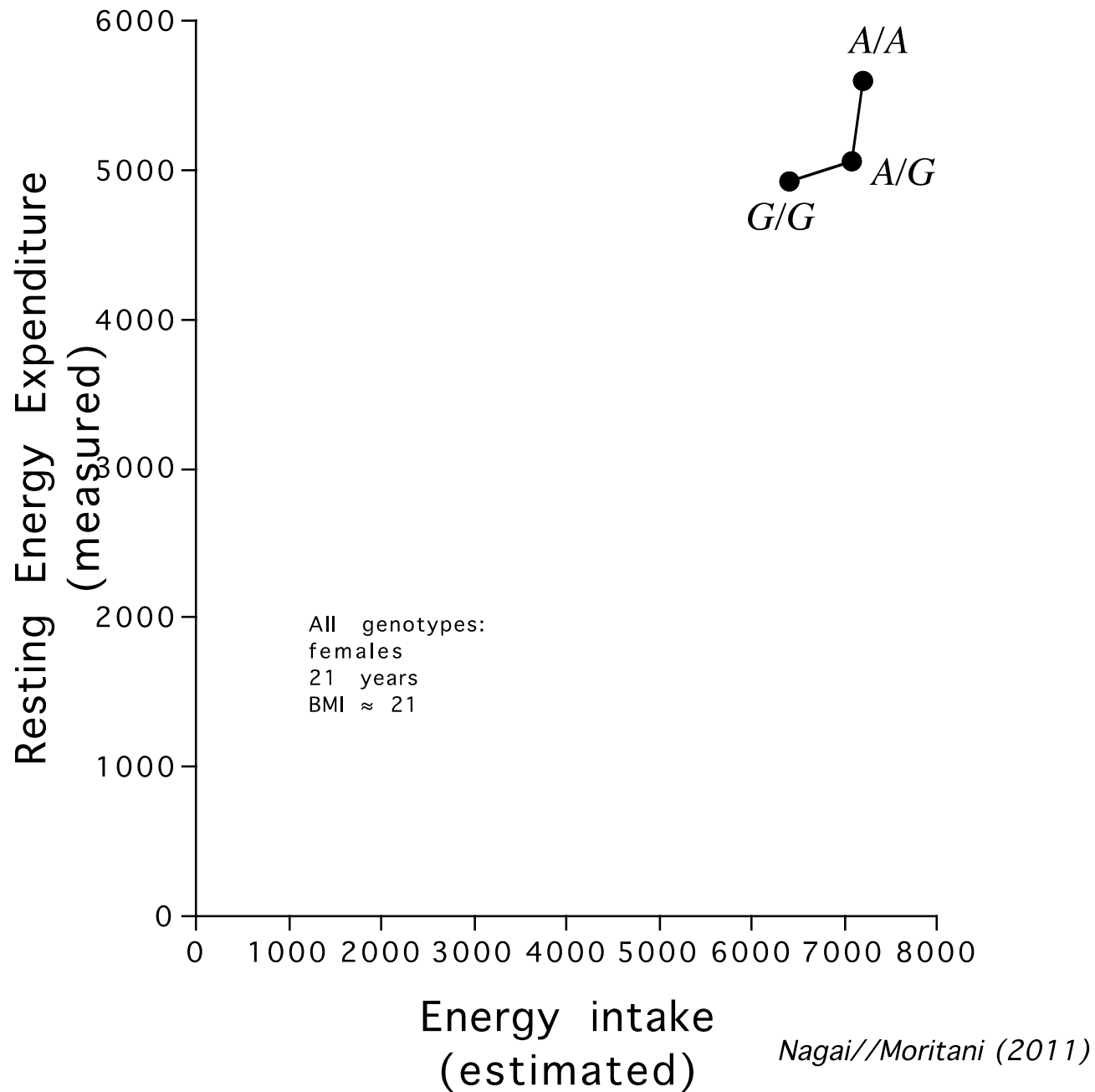
Doing something else?

Could be so, but nothing firmly demonstrated

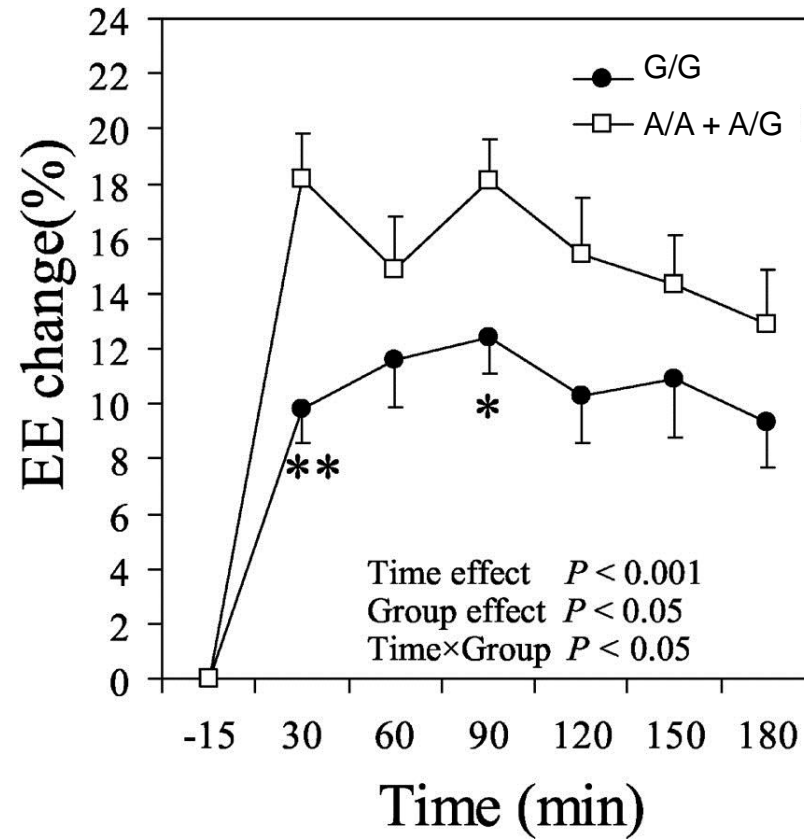
**The only “functional” evidence
for possible significance
of brown fat and brite/beige fat
in humans
is genetic**

The -3826
polymorphism





High-fat meal

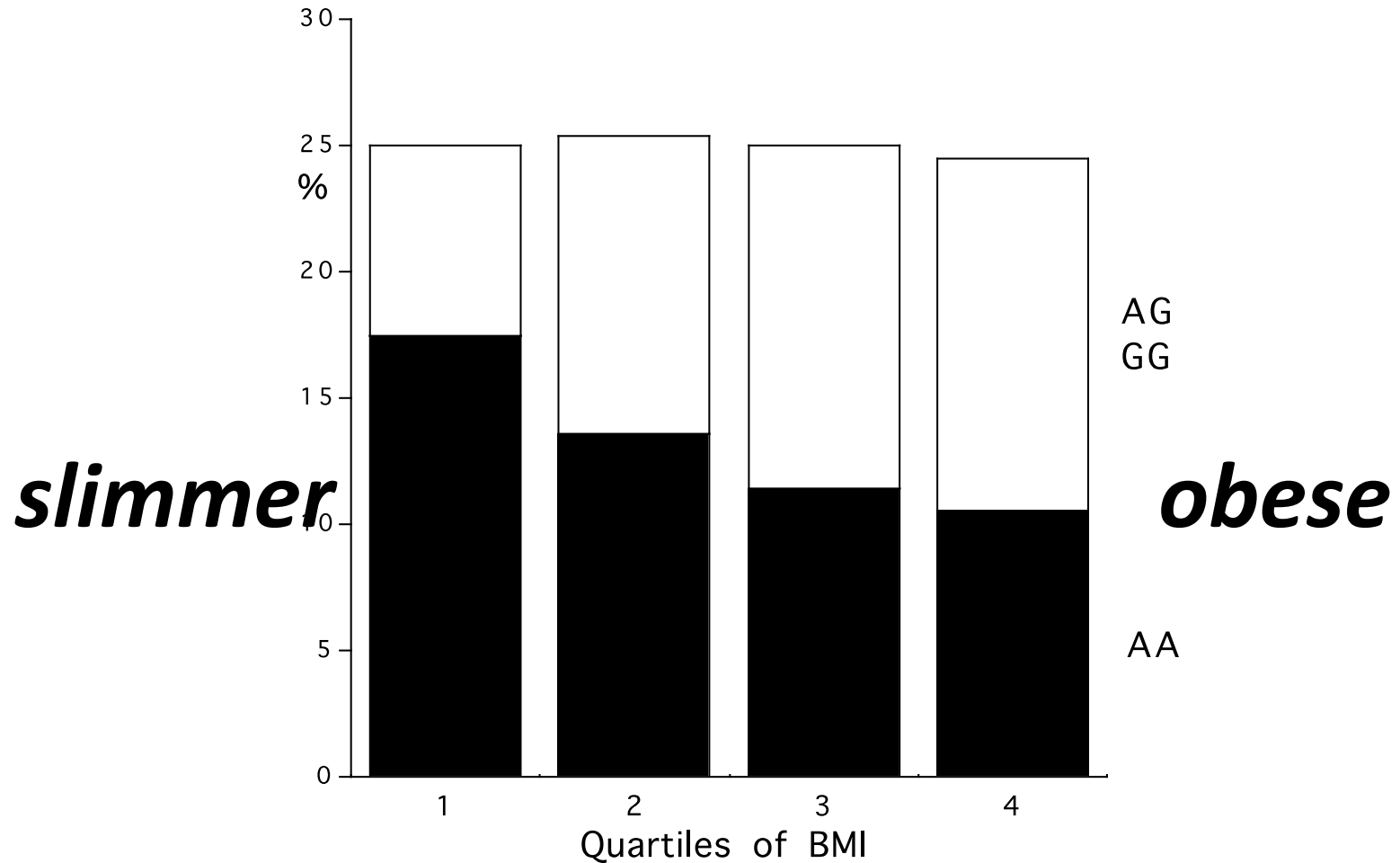


Nagai et al. 2003

And as time goes by

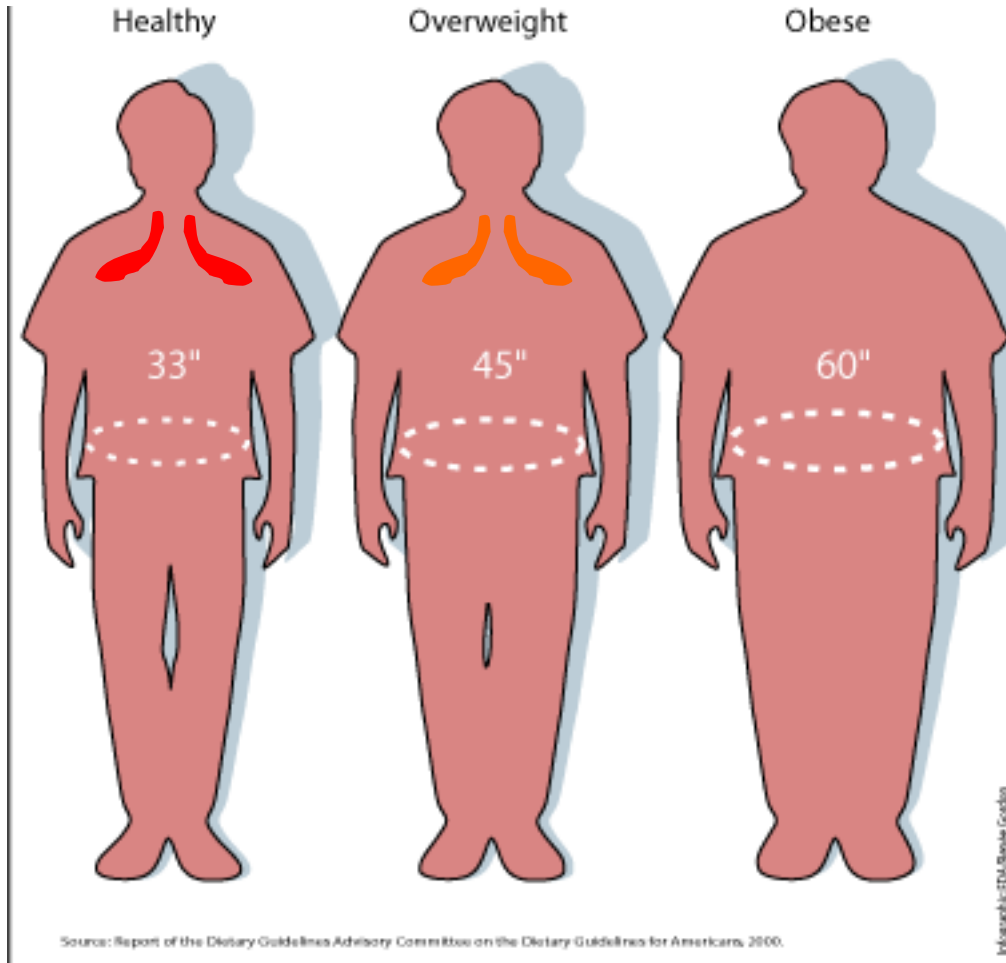
Evidence from man

Correlation of UCP1 genotype with obesity



Sramkova et al. 2007

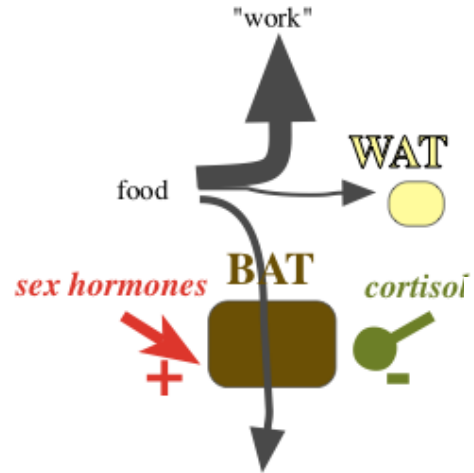
**Thus,
the A's can both eat more than the G's
– and stay slim...**



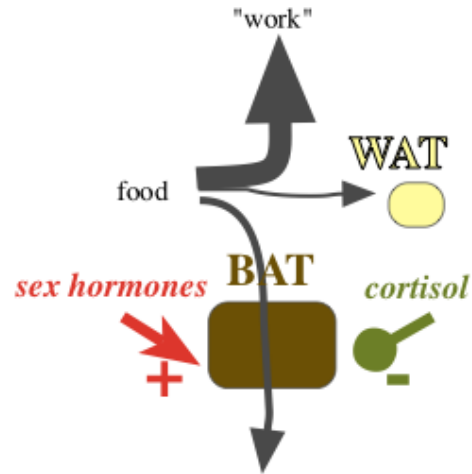
**In our opinion,
extrapolation from
mouse data
to humans
(now allowed)
implies that even in humans
the absence of brown fat
causes obesity**

**- but why do we lose it
with age?**

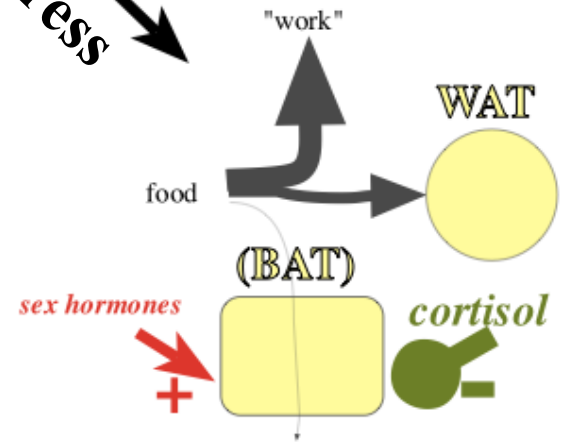
Young adults



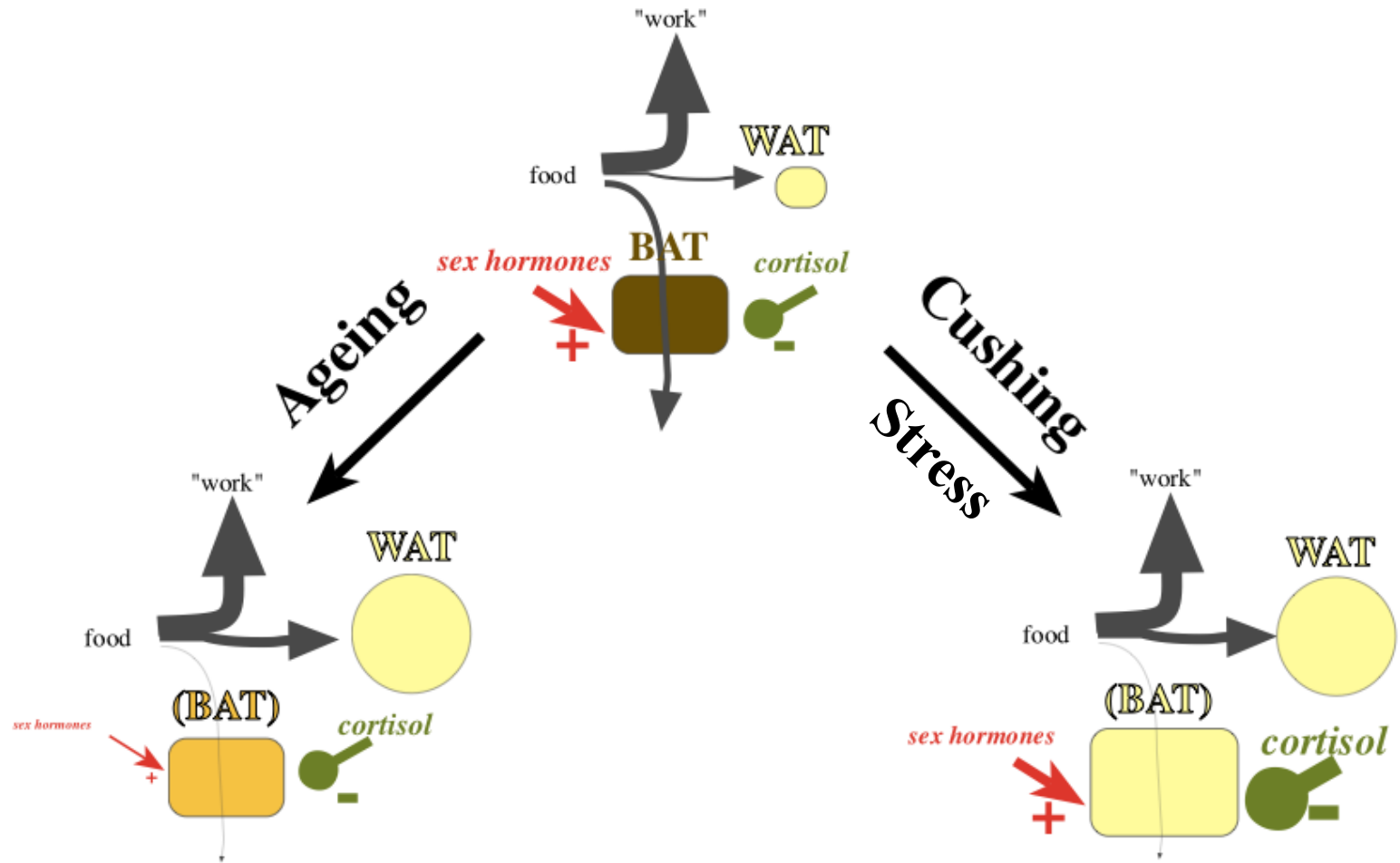
Young adults

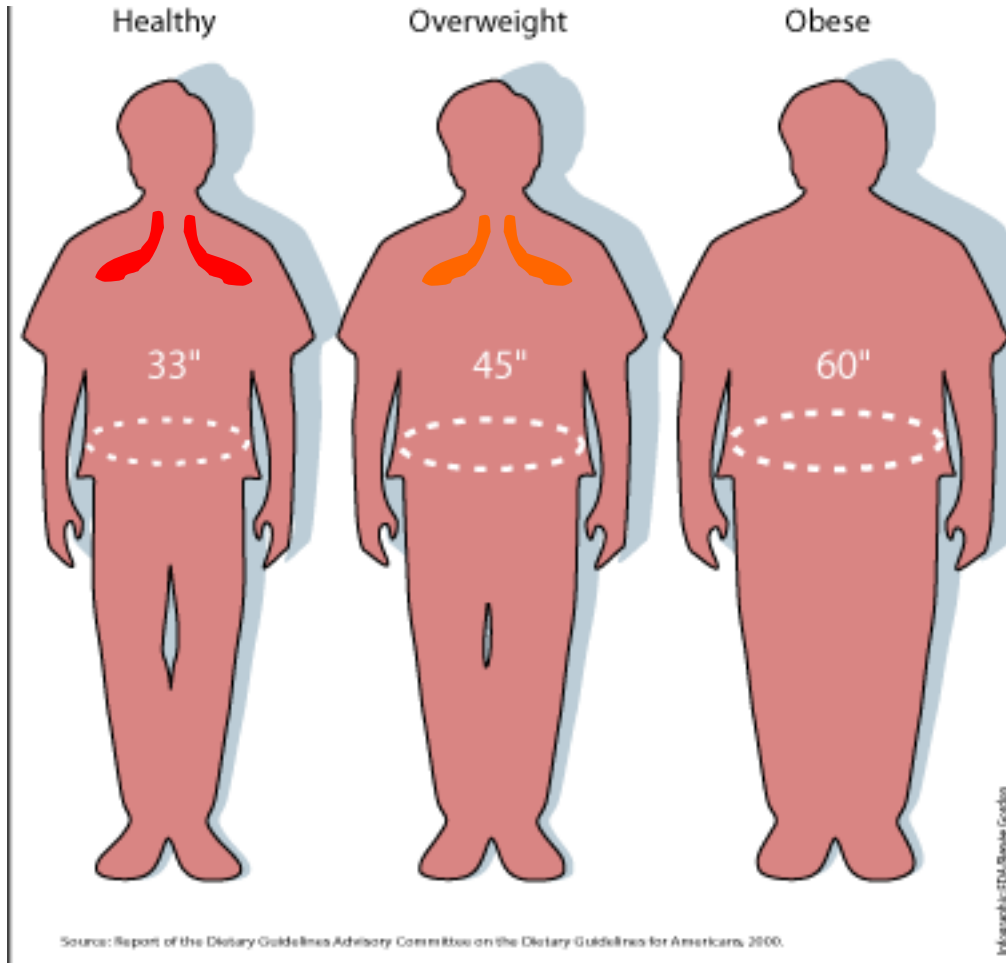


Cushing
Stress



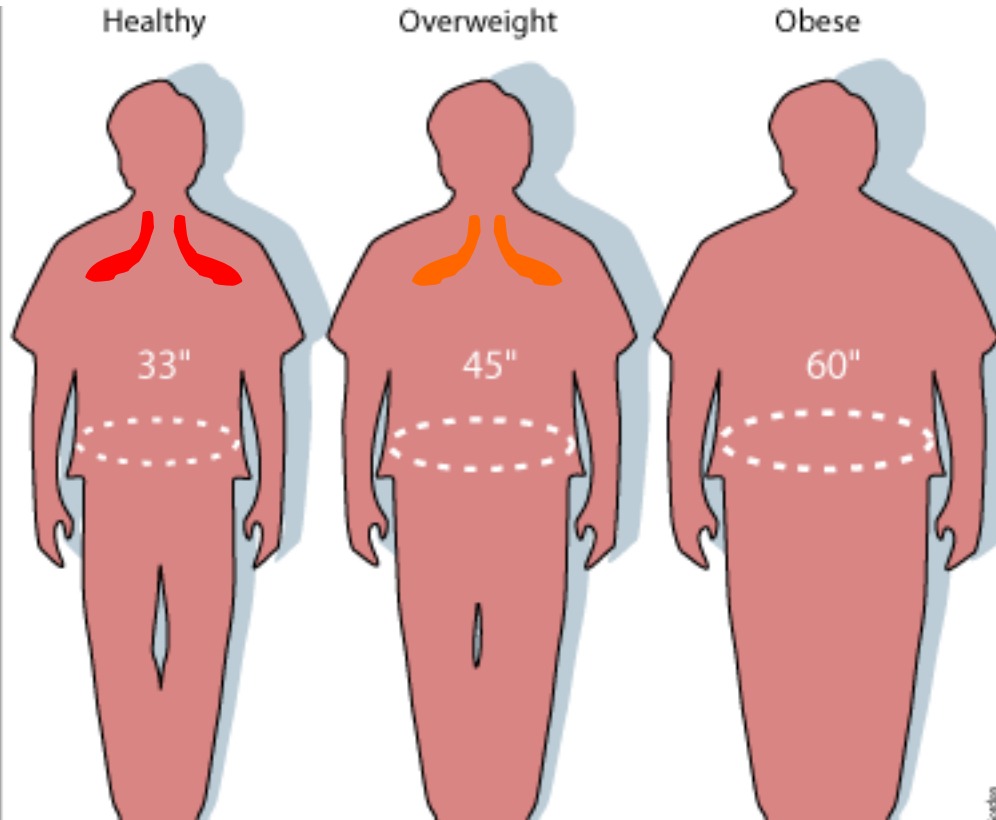
Young adults





**In our opinion,
extrapolation from
mouse data
to humans
(now allowed)
implies that even in humans
successive diminishment
or absence of brown fat
*causes obesity,
worsens triglyceridemia
and disposes to diabetes***

In our opinion,
extrapolation from
mouse data
to humans
(now allowed)
implies that even in humans
successive diminishment
or absence of brown fat
causes obesity,
worsens triglyceridemia
and disposes to diabetes



so keep your brown fat active!



Worldwide increasing metabolic problems



Metabolic syndrome*:

- **Central obesity**

plus any two of the following four factors:

- **raised triglycerides level in blood**
- **reduced HDL cholesterol in blood**
- **raised blood pressure**
- **raised fasting plasma glucose or type 2 diabetes (insulin resistance)**

Active brown adipose tissue has the capacity to modulate most of above parameters

* newest IDF definition

Brown Adipose Tissue panacea

Jan Nedergaard

Department of Molecular Biosciences

The Wenner-Gren Institute,

Stockholm University

Professor at

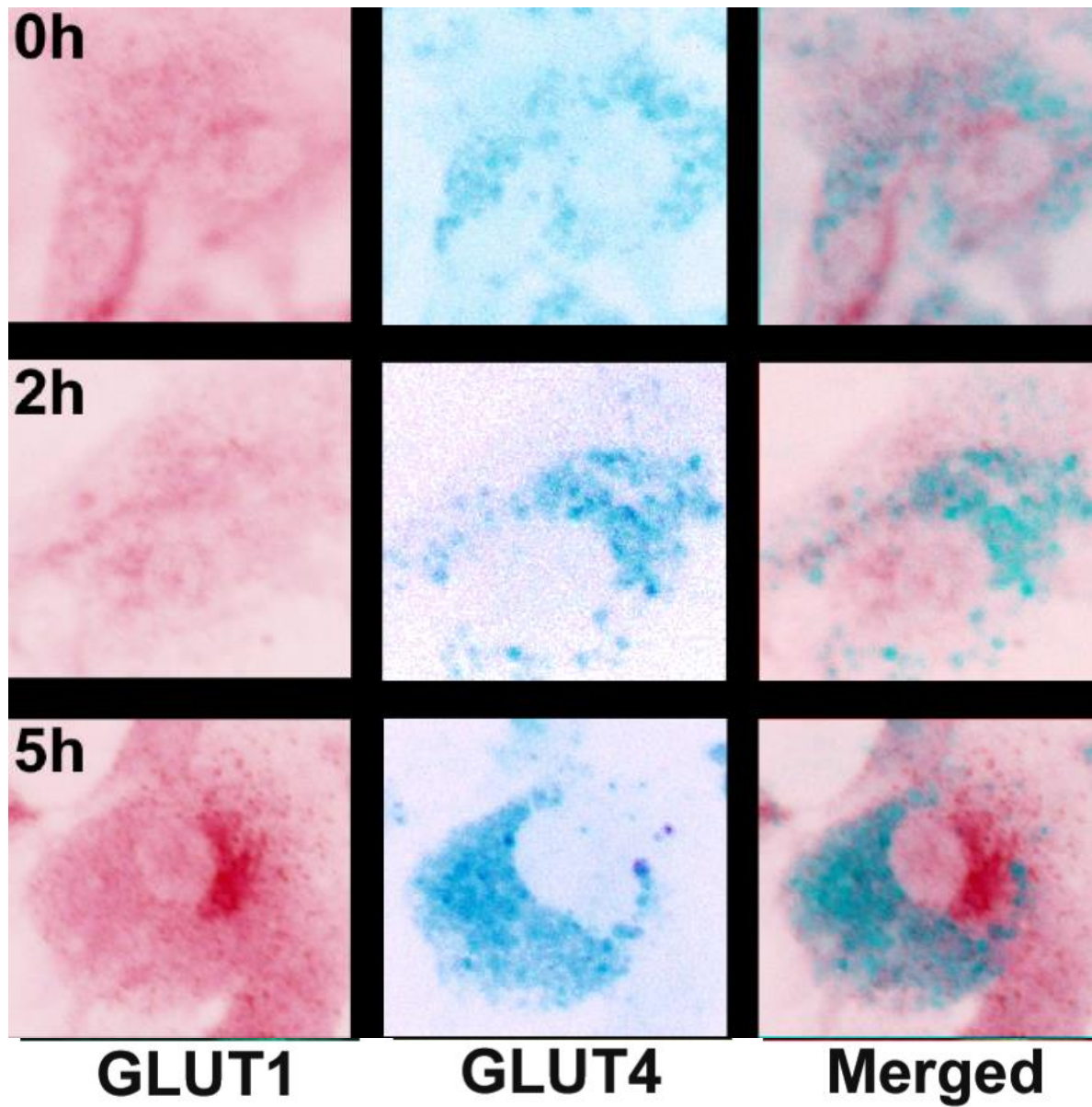
Fellow of the Nobel-prize awarding



Stockholm
University



Hours of
adrenergic
stimulation



Results in collaboration with (among others)

The Cannon/Nedergaard lab:

Gustavo Abreu de Vieira

Tore Bengtsson

Helena Feldmann

Valeria Golozoubova

Anders Jacobsson

Elaina Maldonado

Natasa Petrovic

Tomas Waldén

and

Jan Nedergaard



RVC London

Valentina Gburcik

James A. Timmons

University of Copenhagen

Naja Zenius Jespersen

Camilla Scheele

Bente Klarlund Pedersen

Therese Juhlin

University of Ancona

Marie Cristina Zingaretti

Saverio Cinti

Results in collaboration with (among others)

The Cannon/Nedergaard lab:

Gustavo Abreu de Vieira

Tore Bengtsson

Helena Feldmann

Valeria Golozoubova

Anders Jacobsson

Elaina Maldonado

Natasa Petrovic

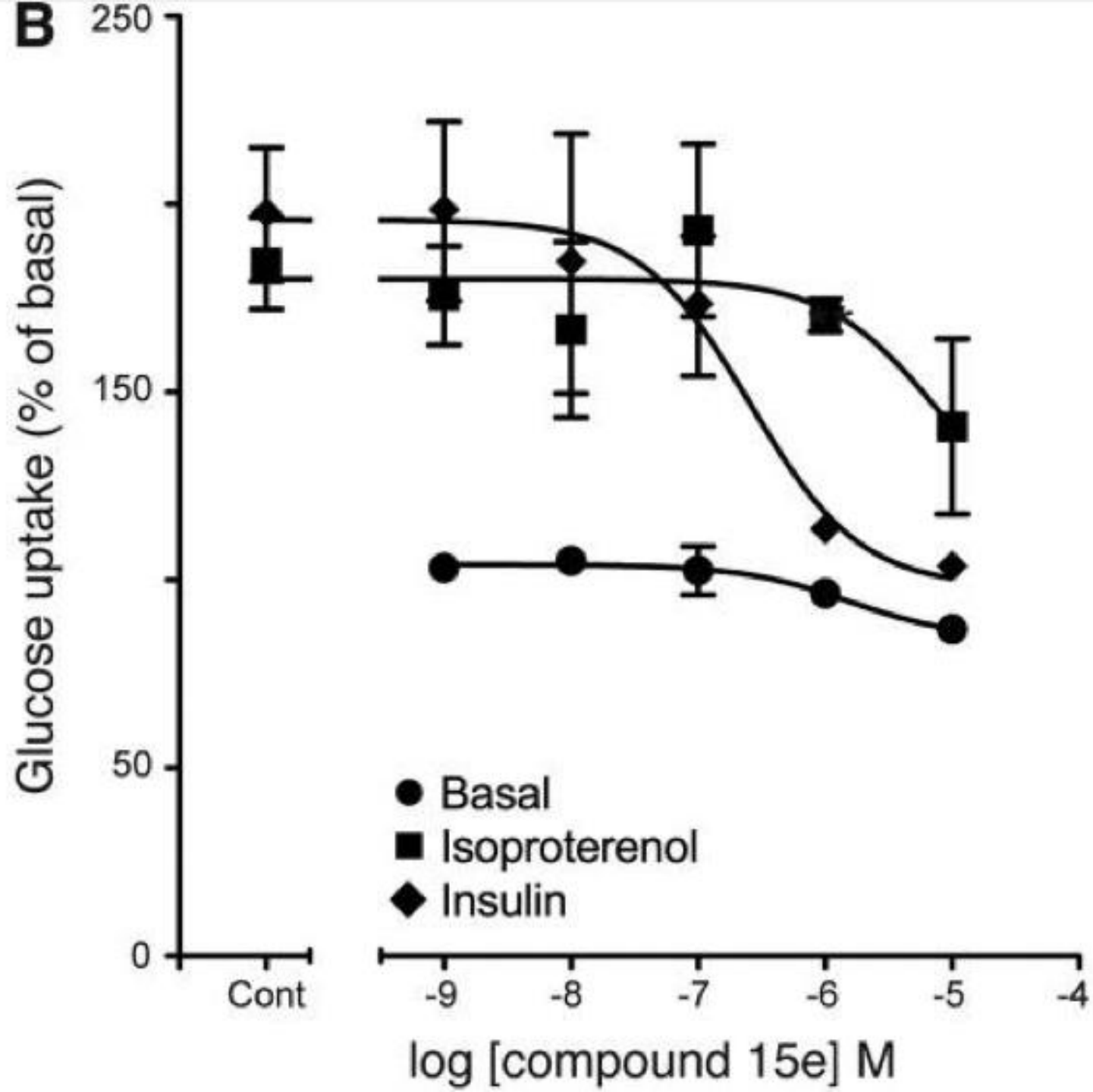
Tomas Waldén



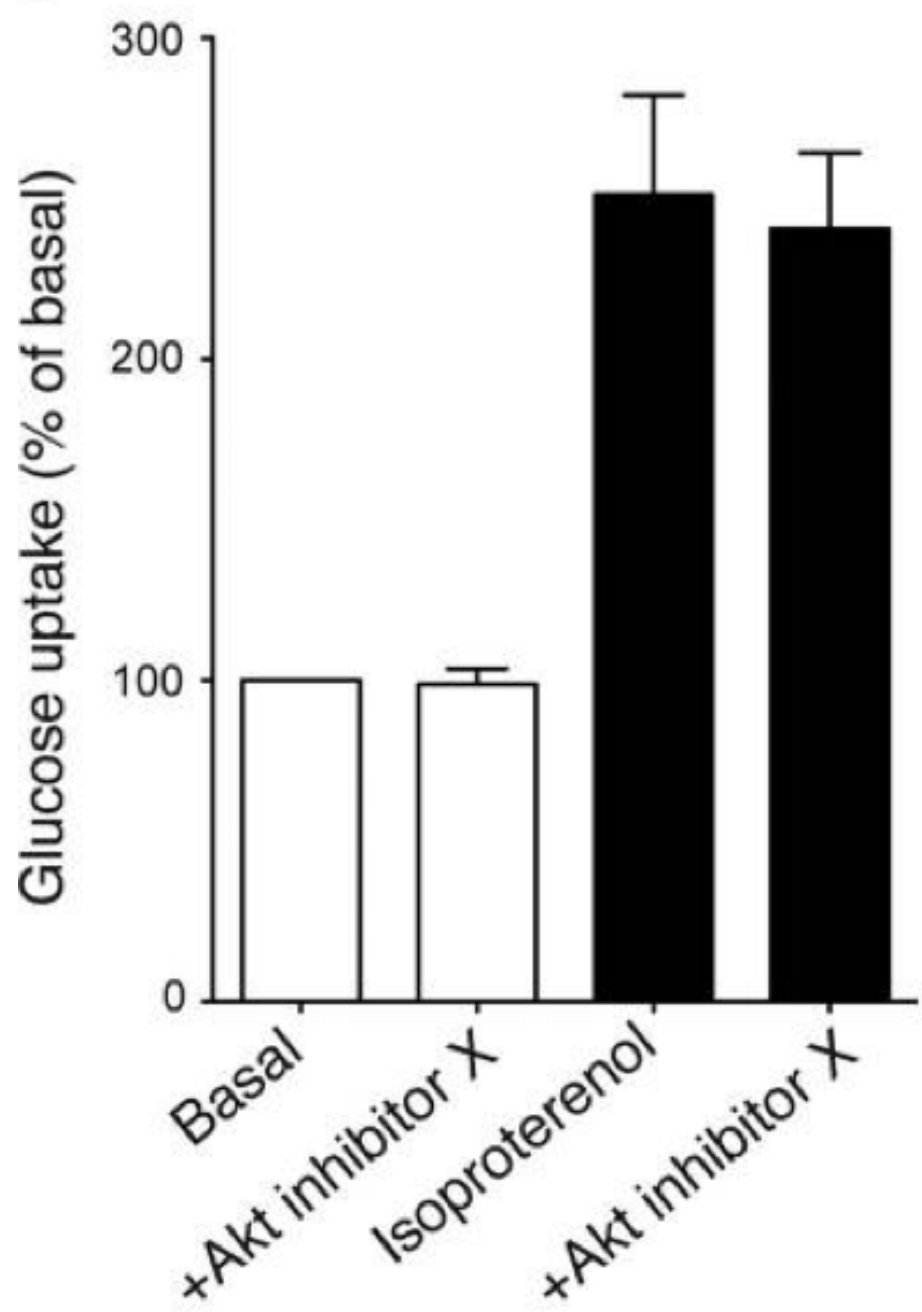
The Bengtsson lab:

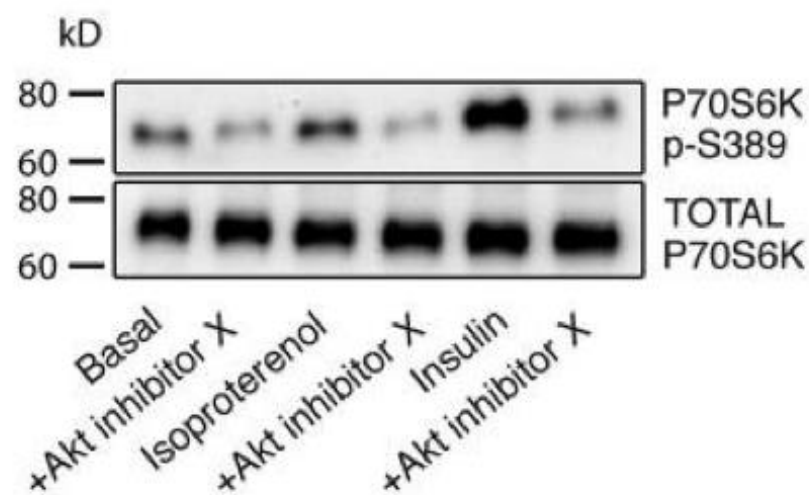
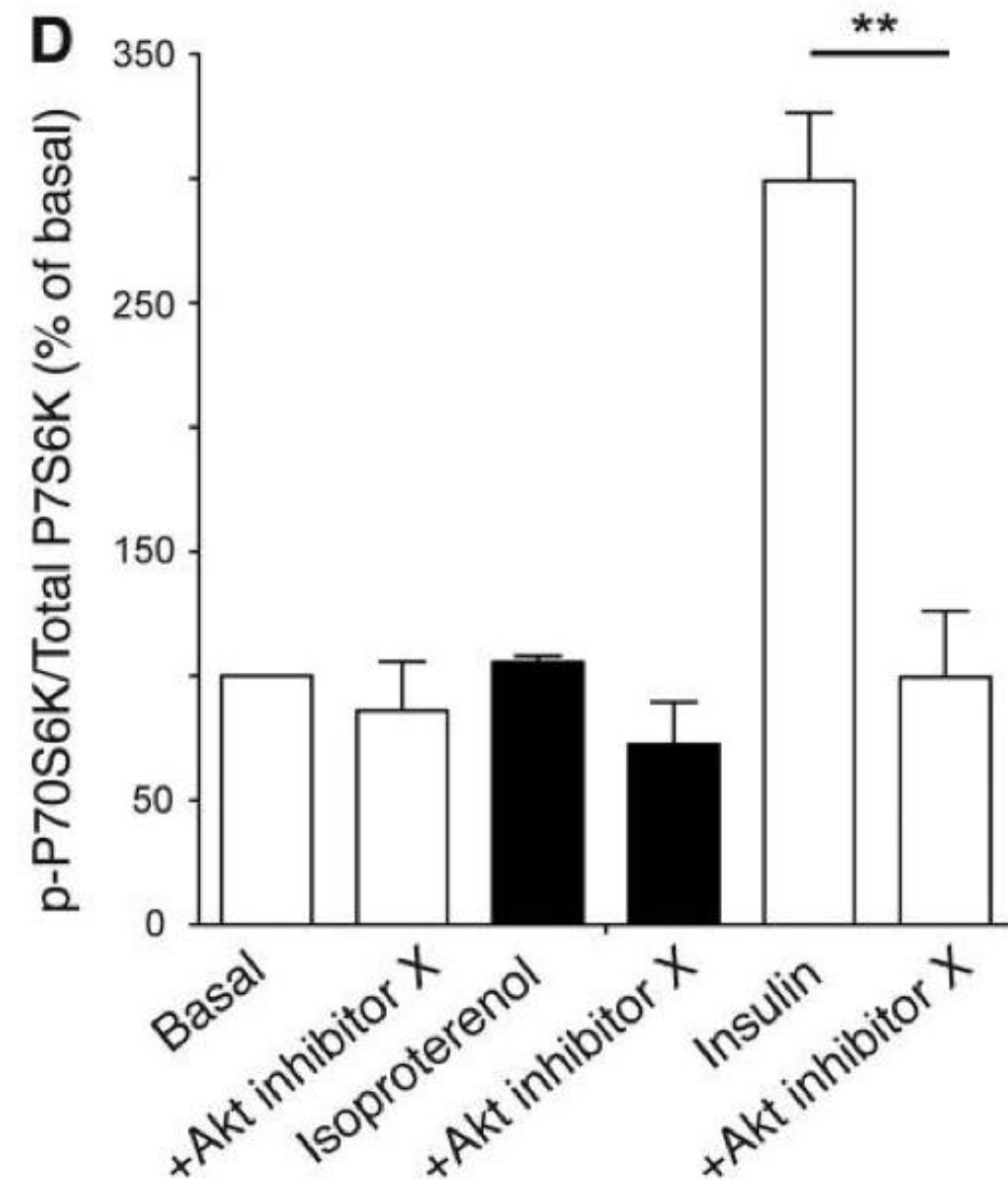
Jessica Olsen

Gu



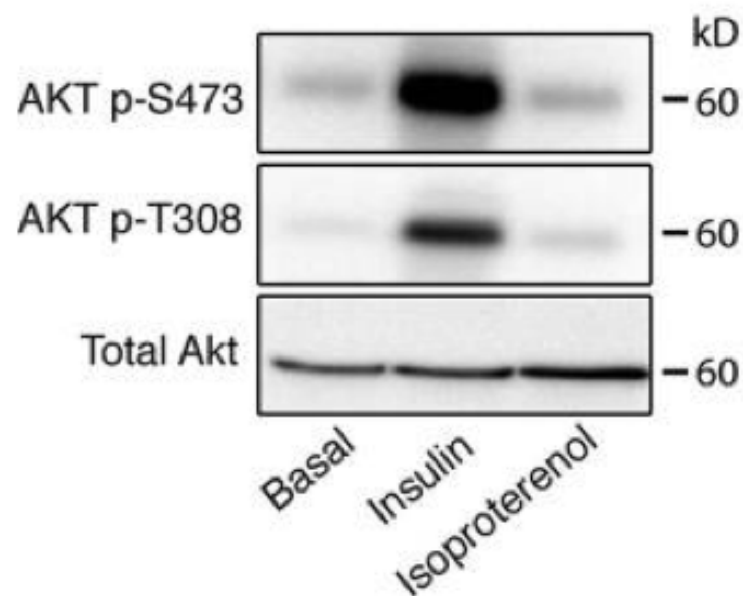
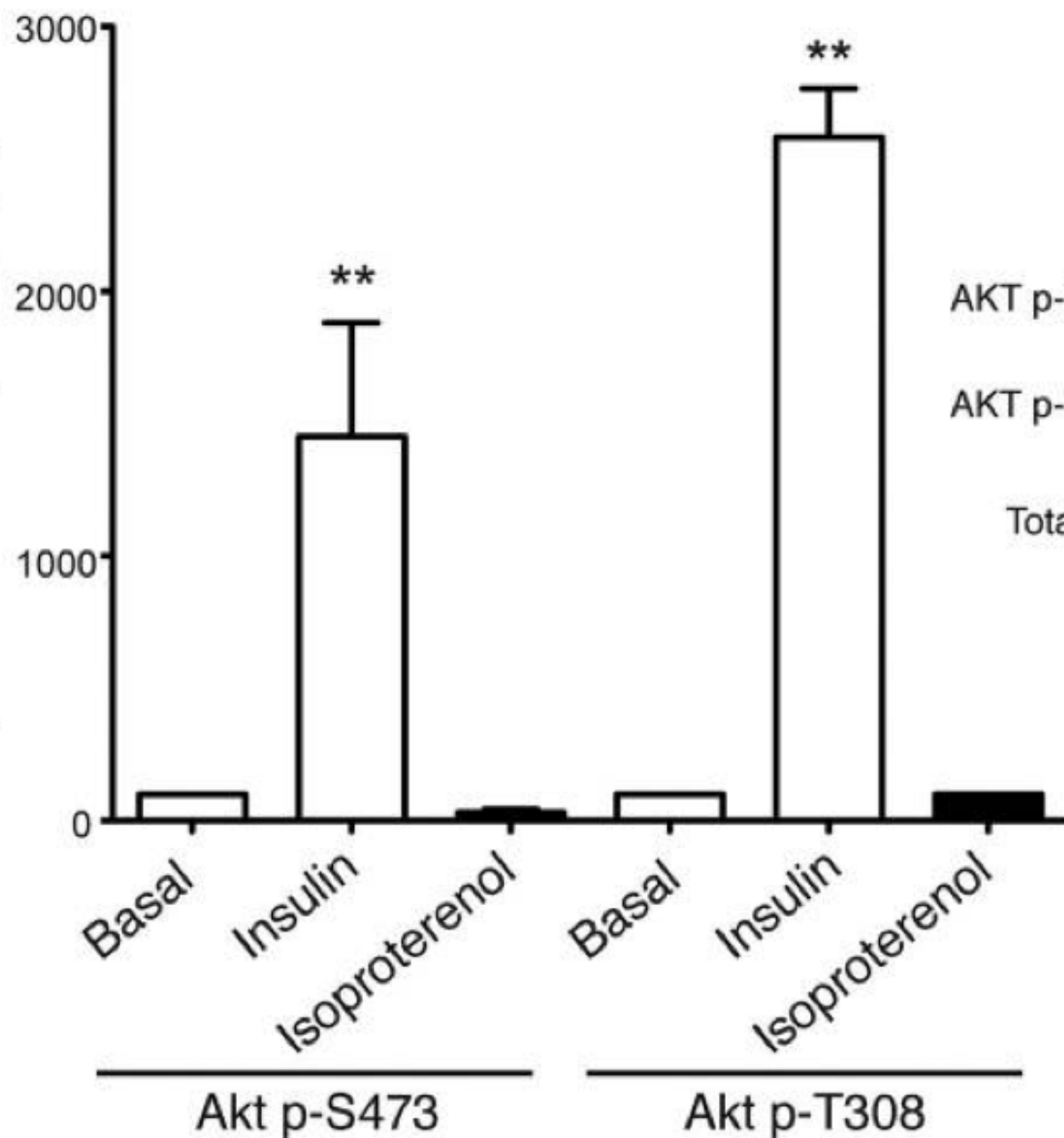
C

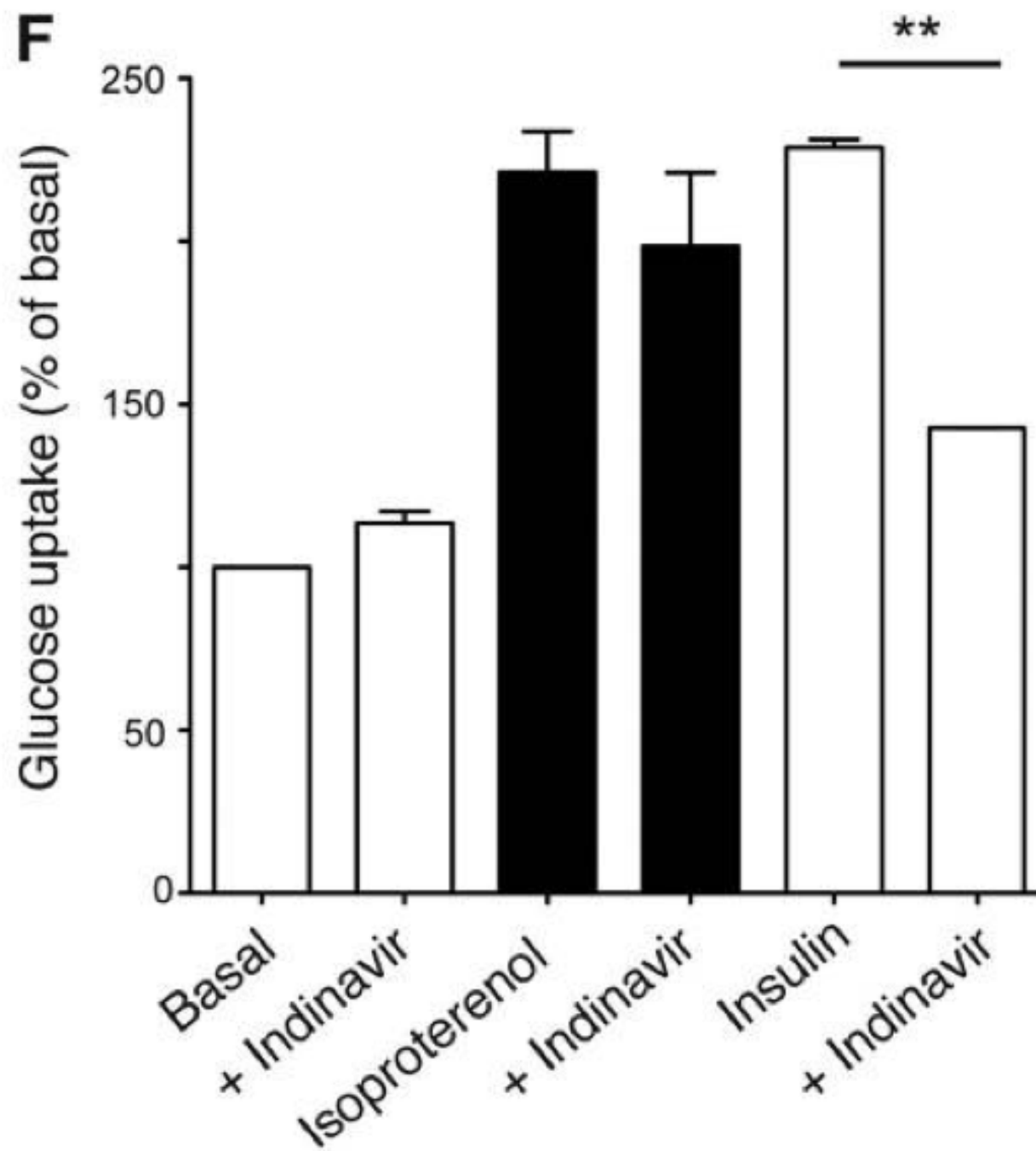


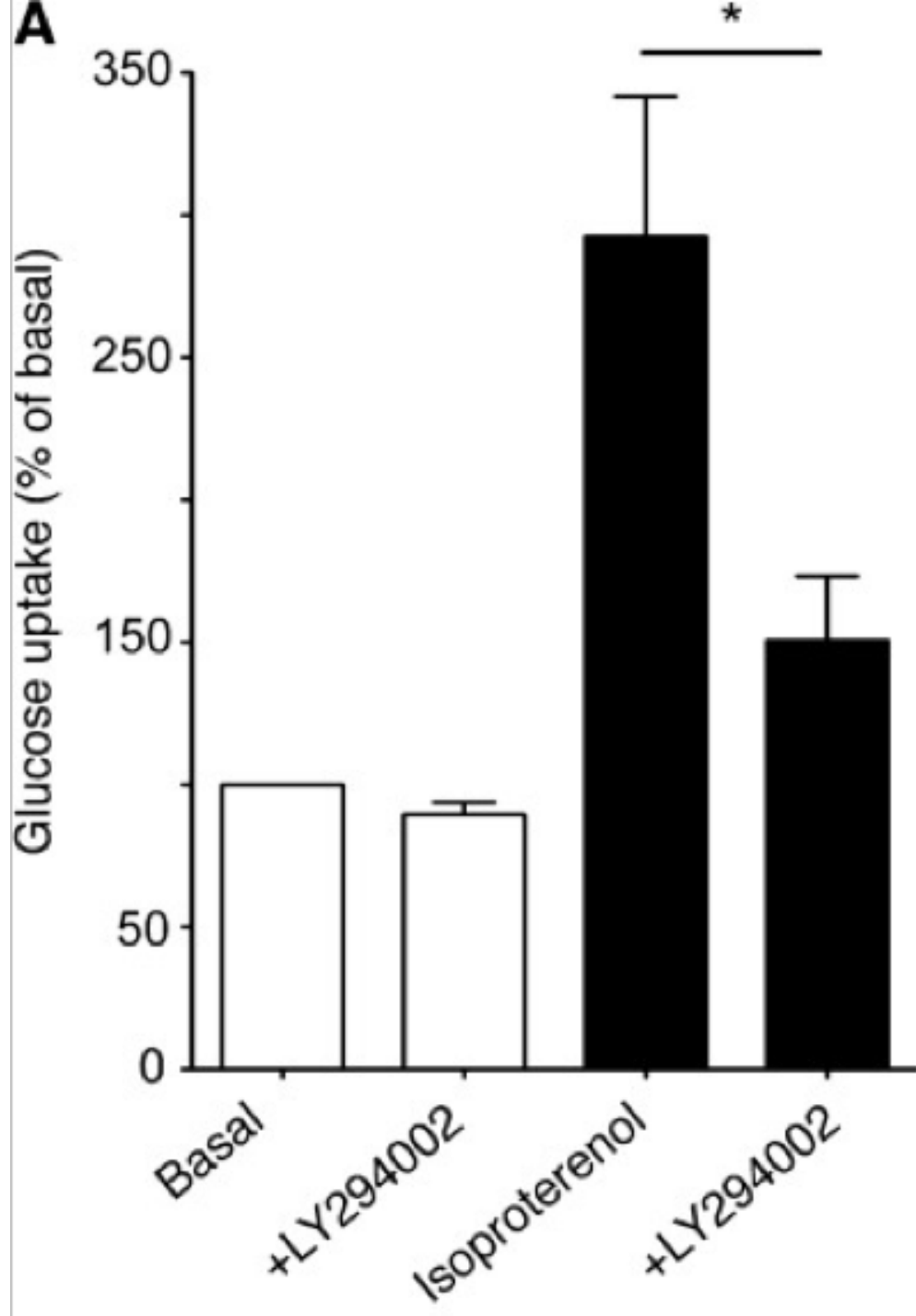


F

p-Akt/Total Akt (% of basal)

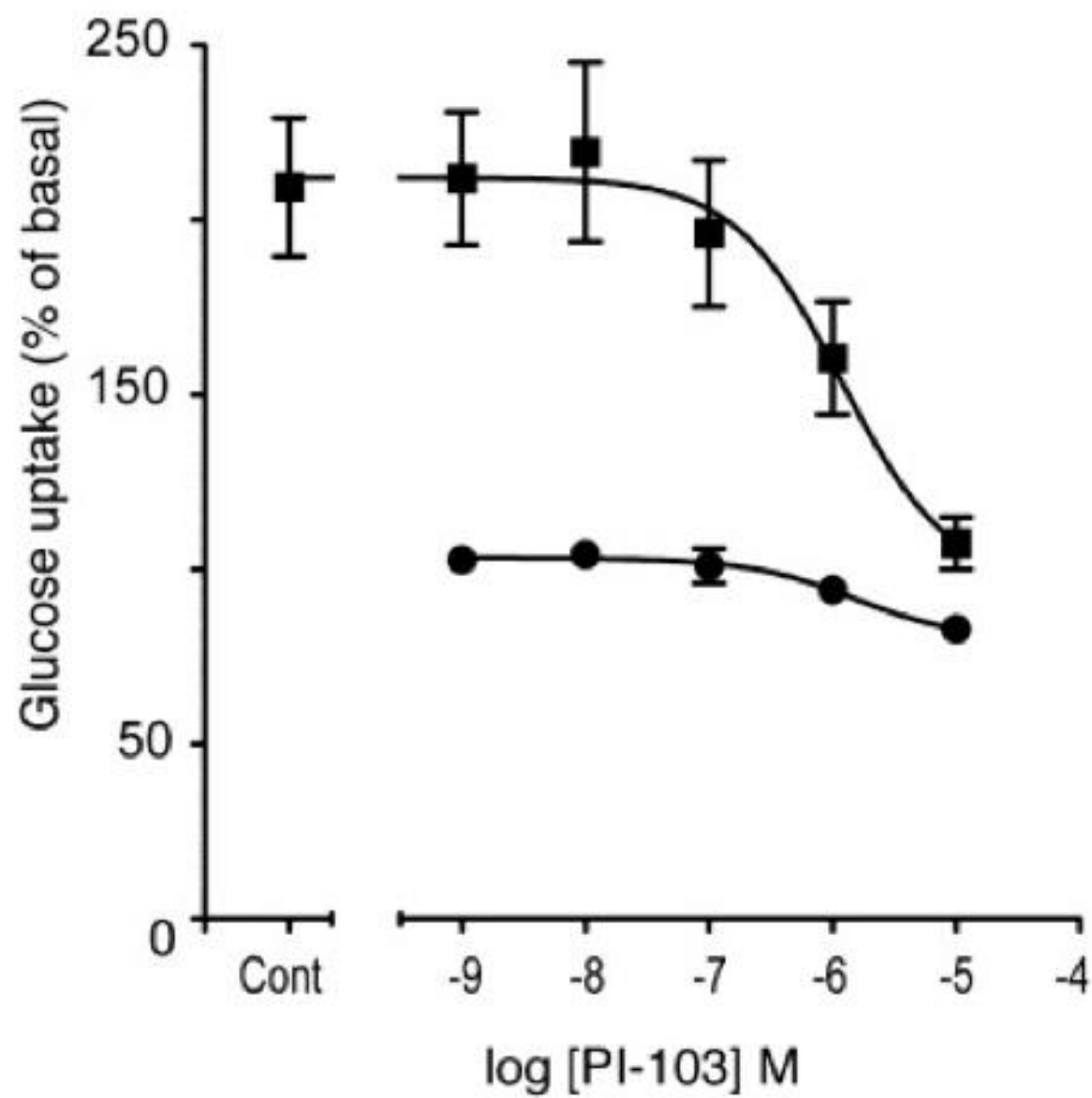


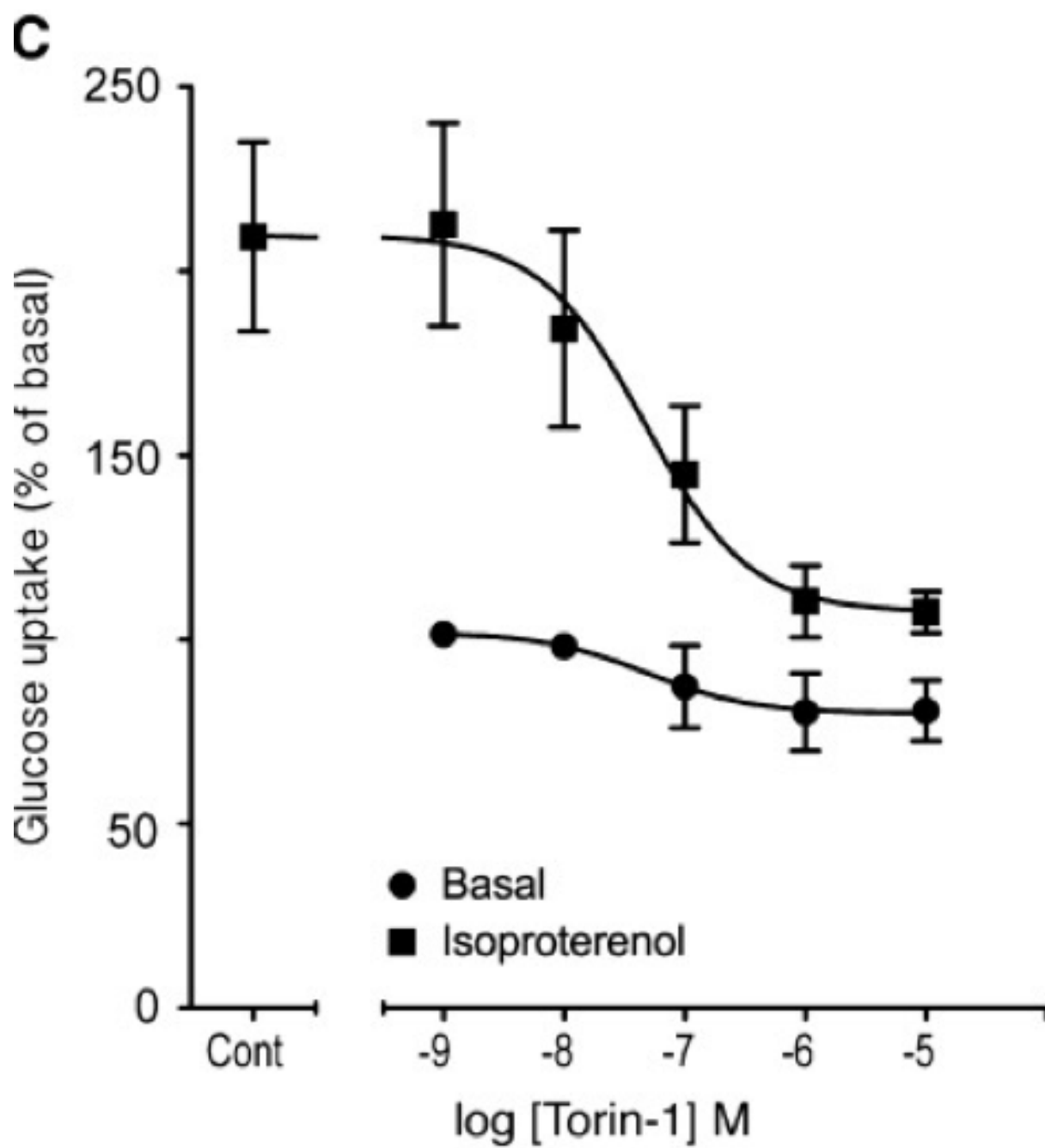


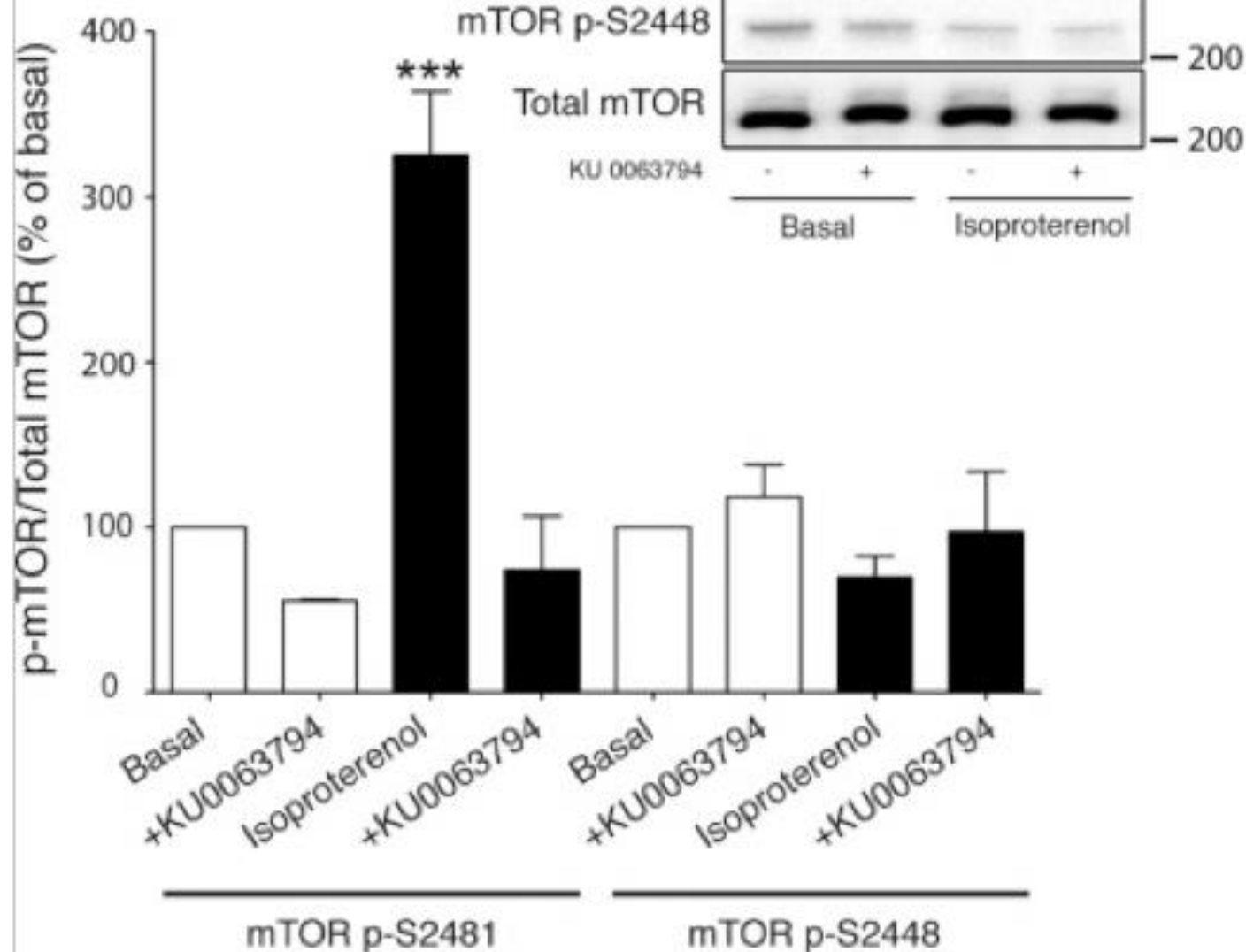


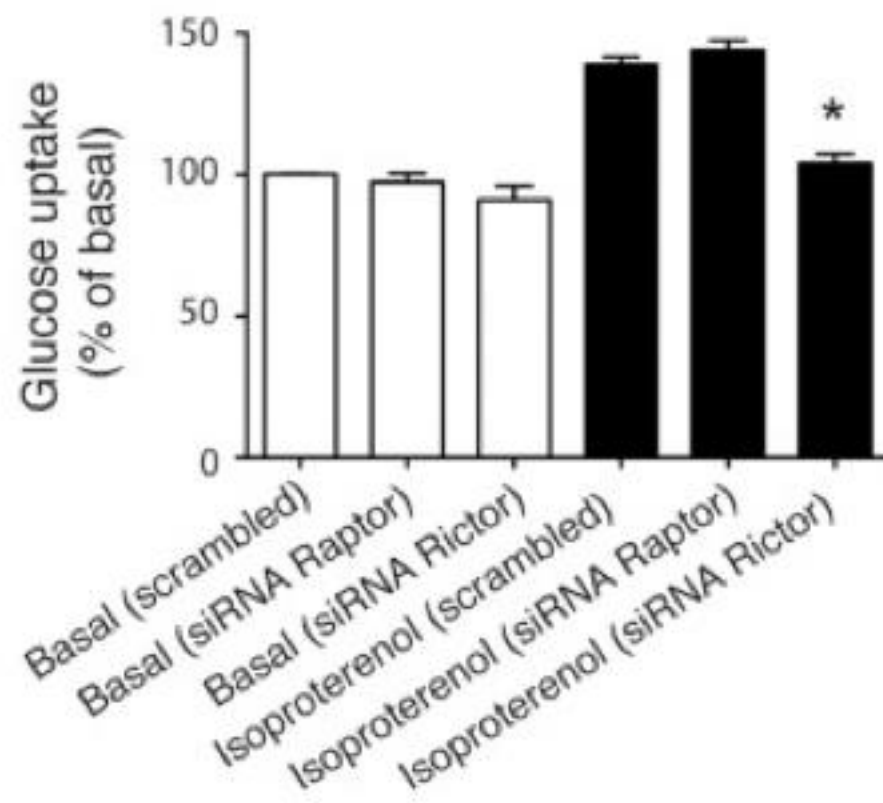
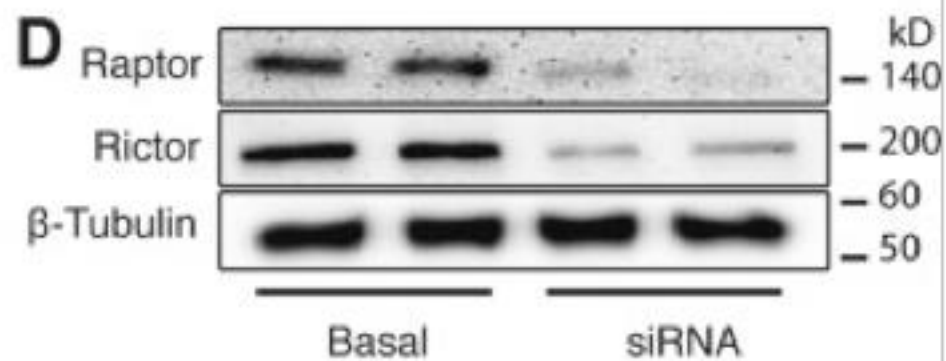
B

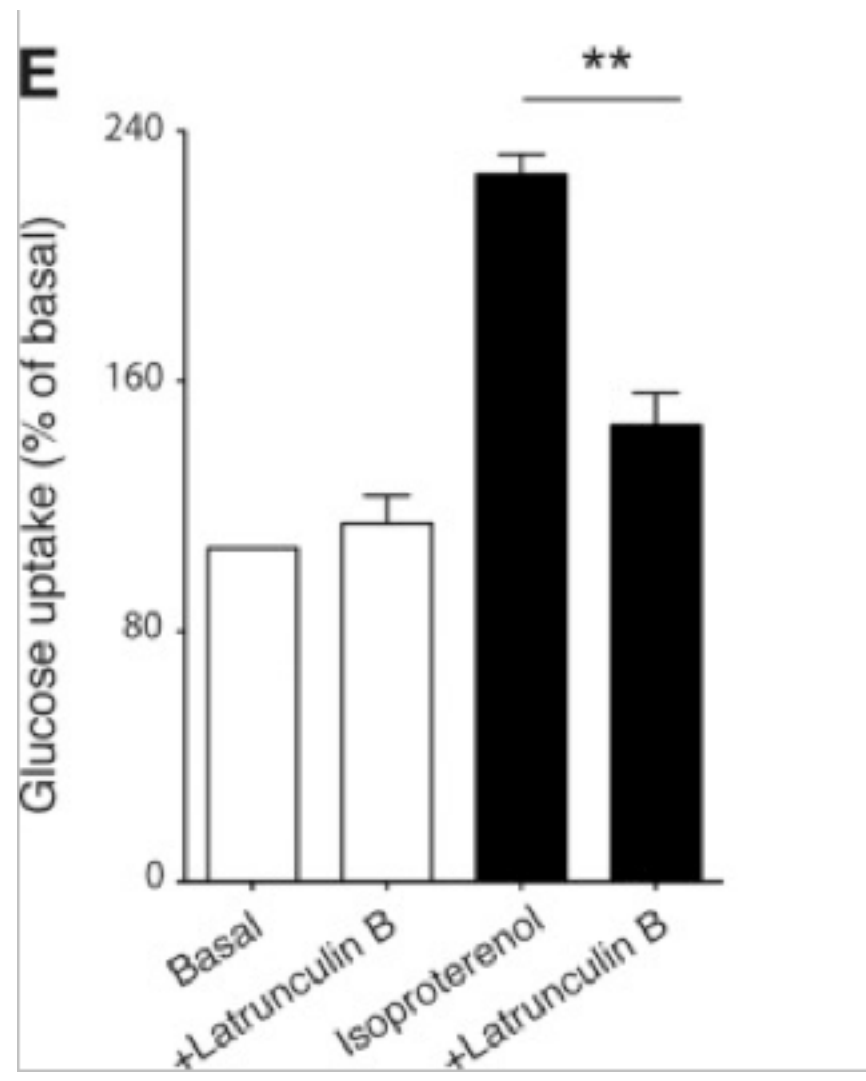
● Basal
■ Isoproterenol

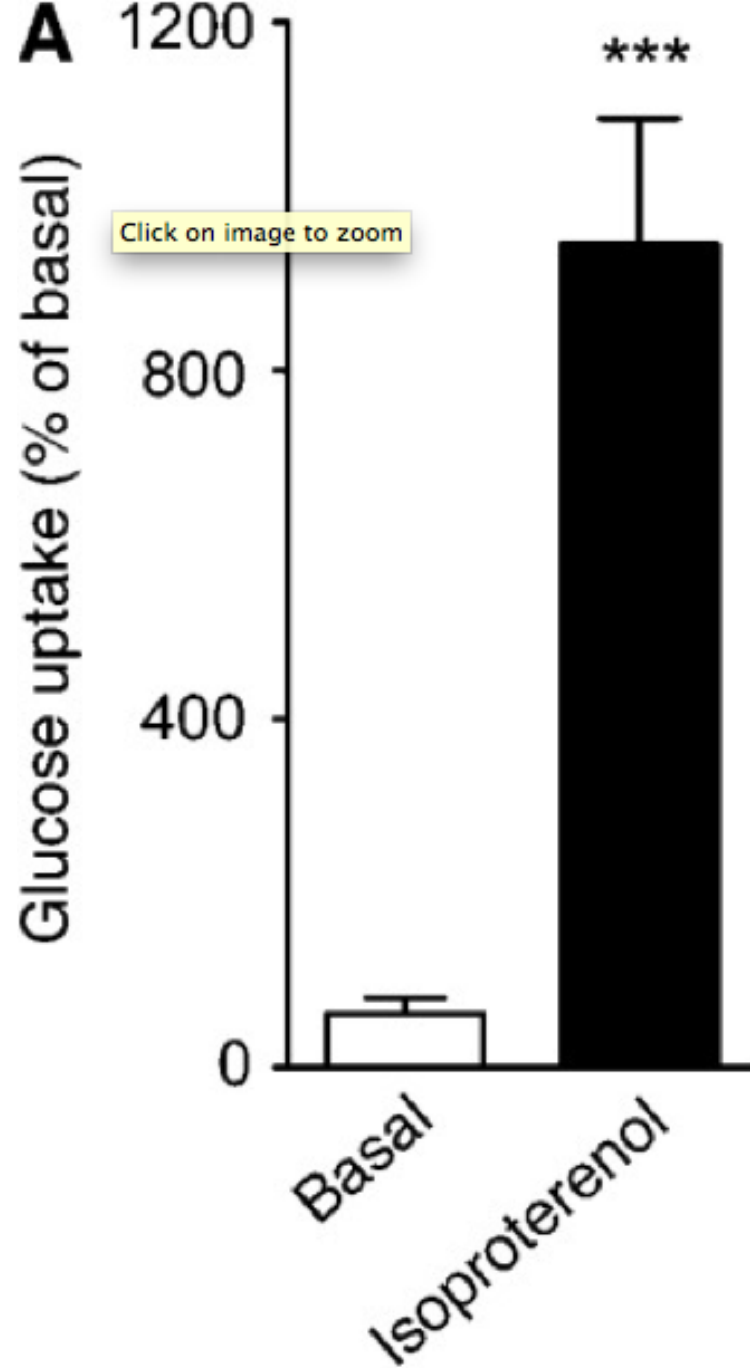


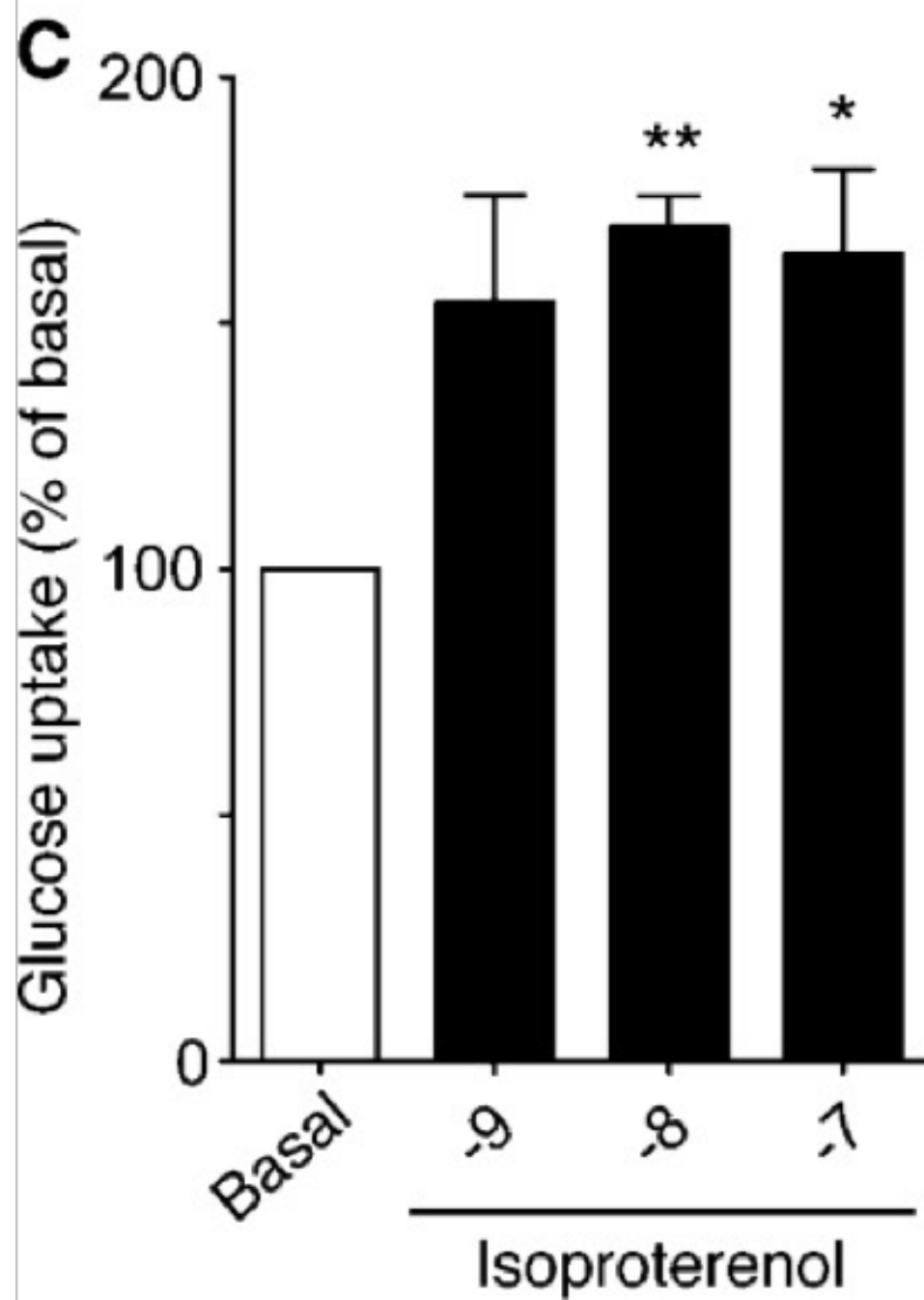


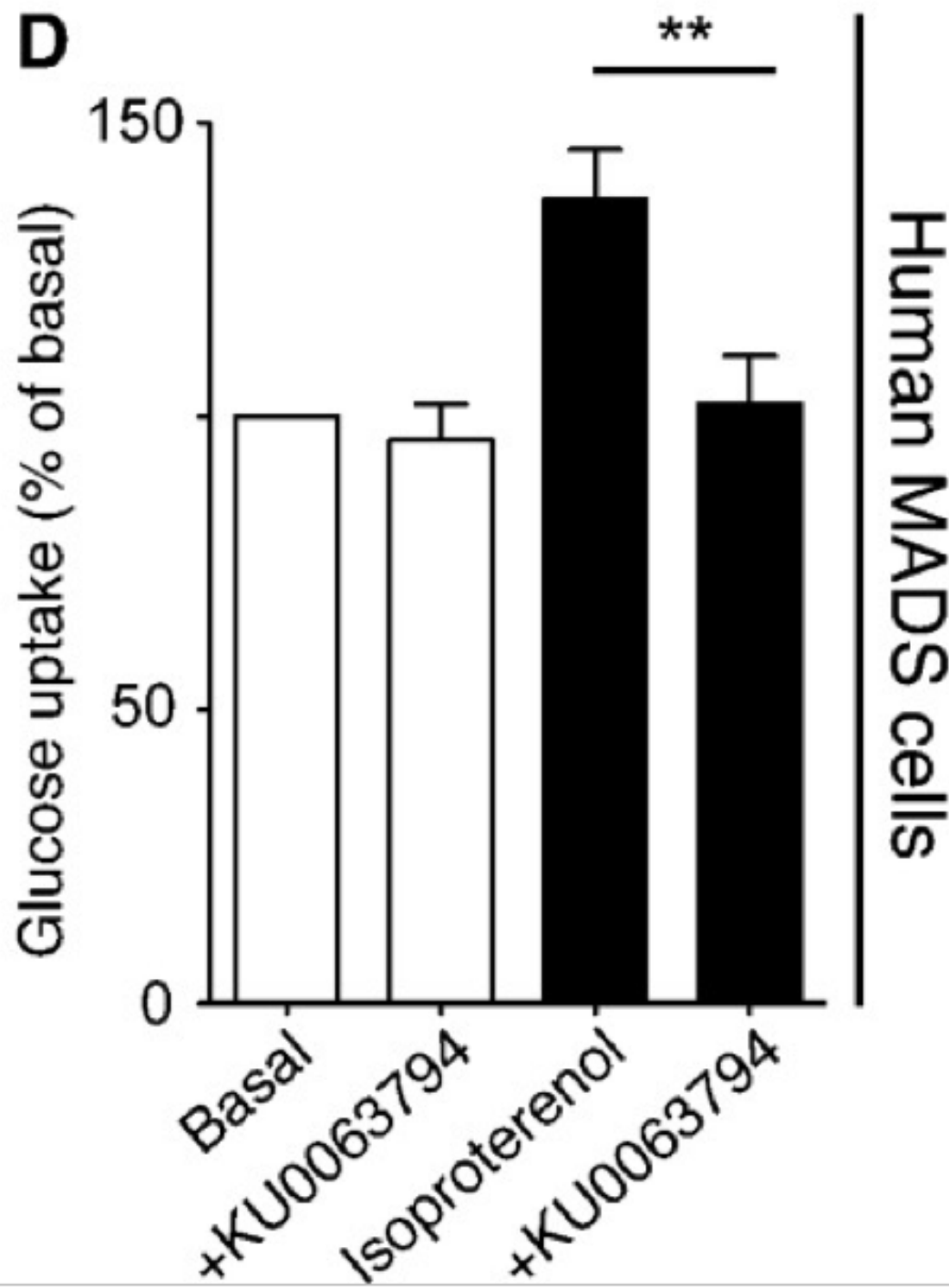
C



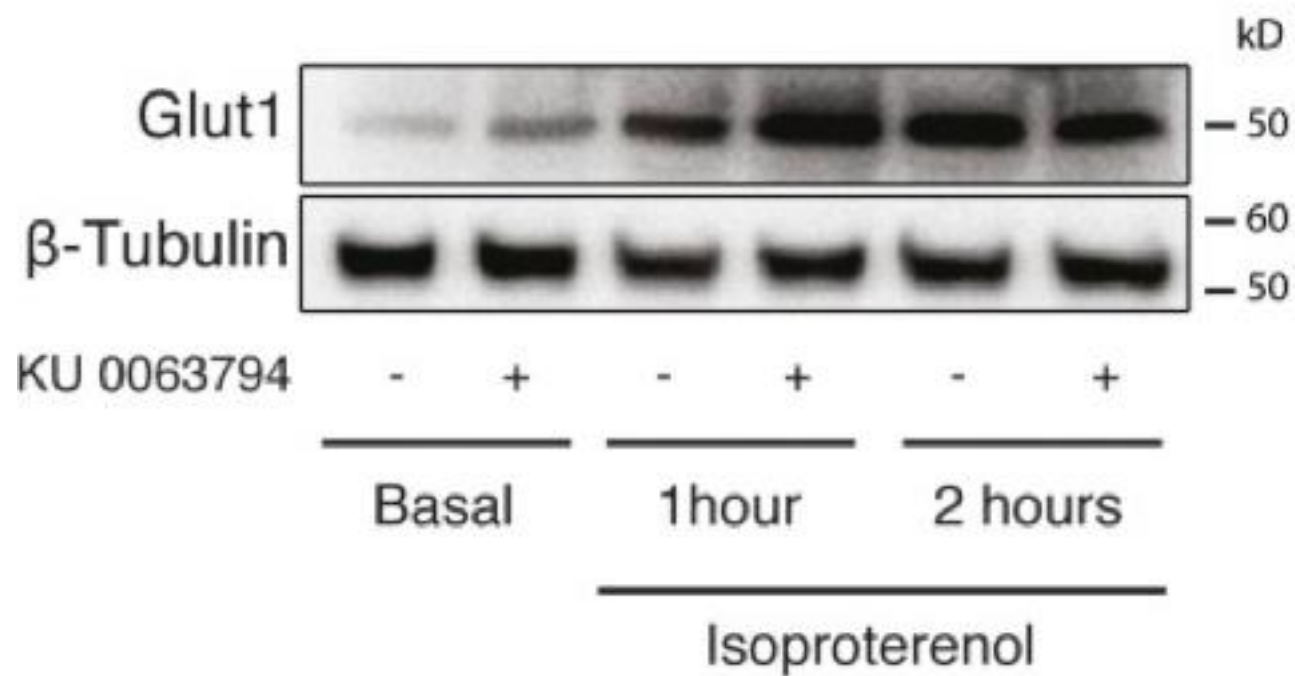


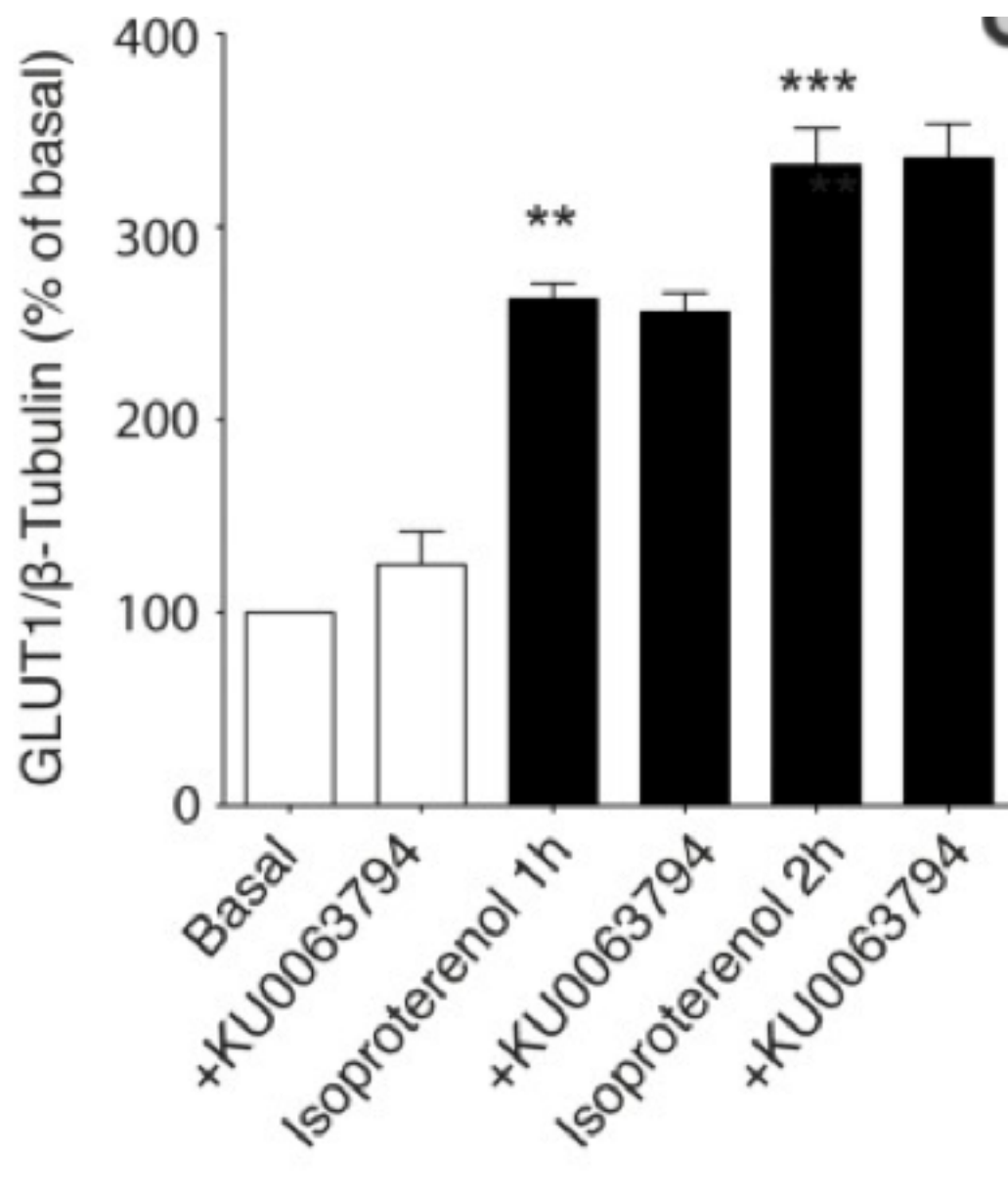






A





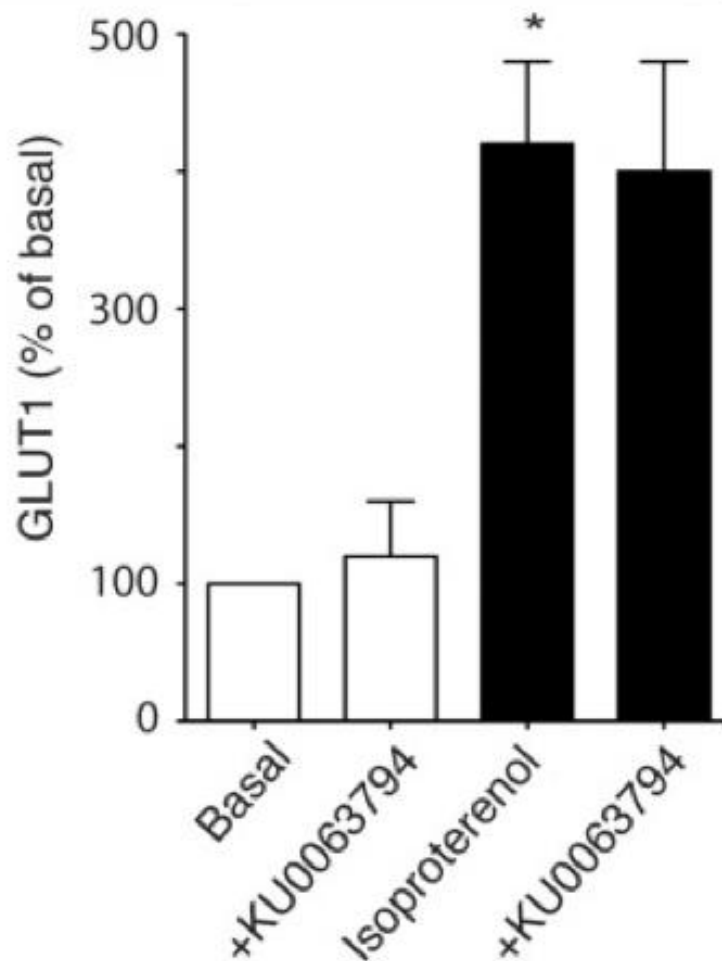
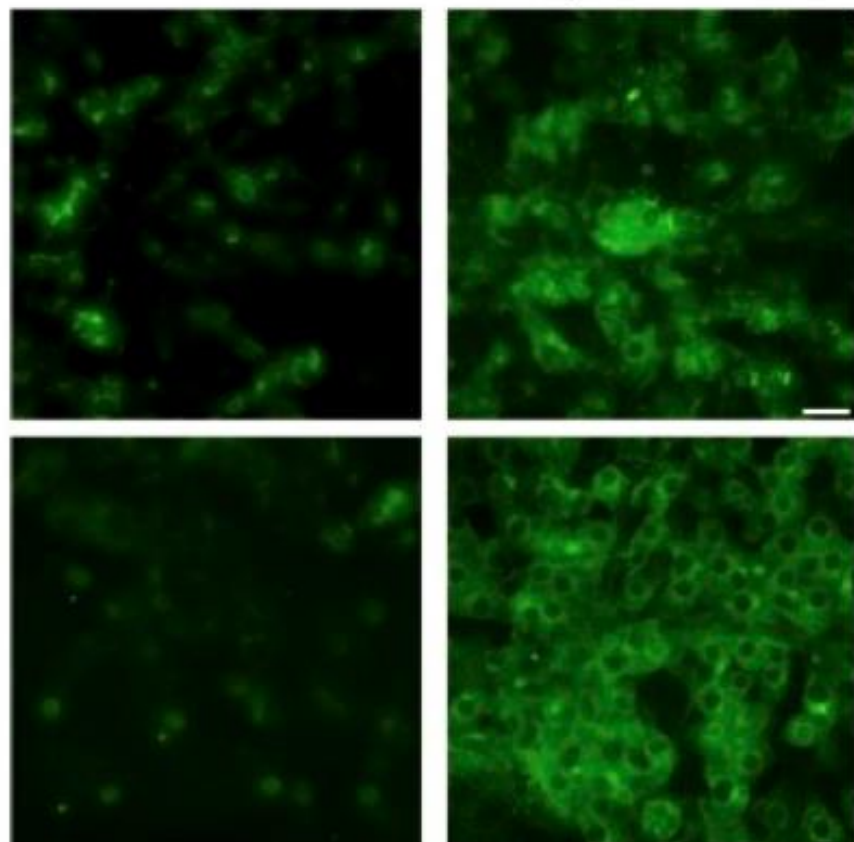
B

GLUT1 (total)

+KU0063794

Basal

Isoproterenol



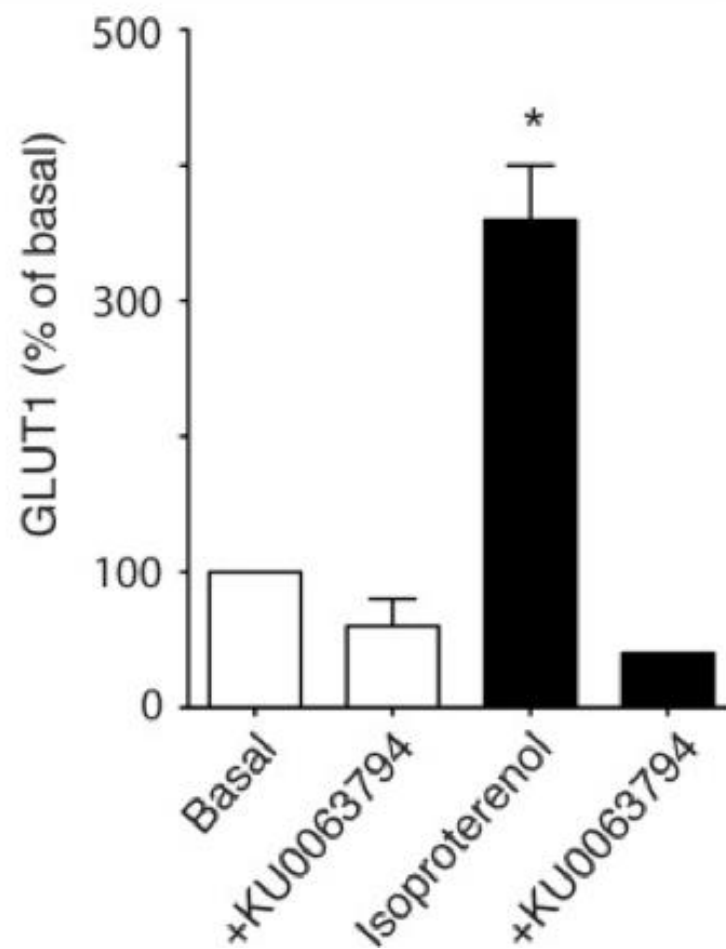
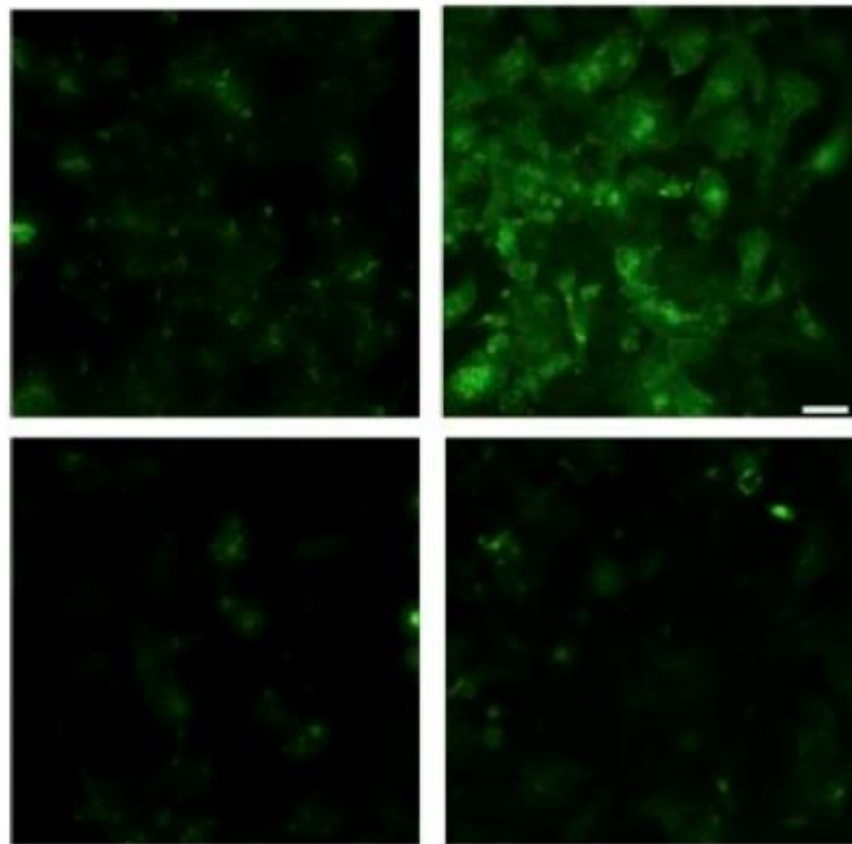
c

GLUT1 (plasma membrane)

+KU0063794

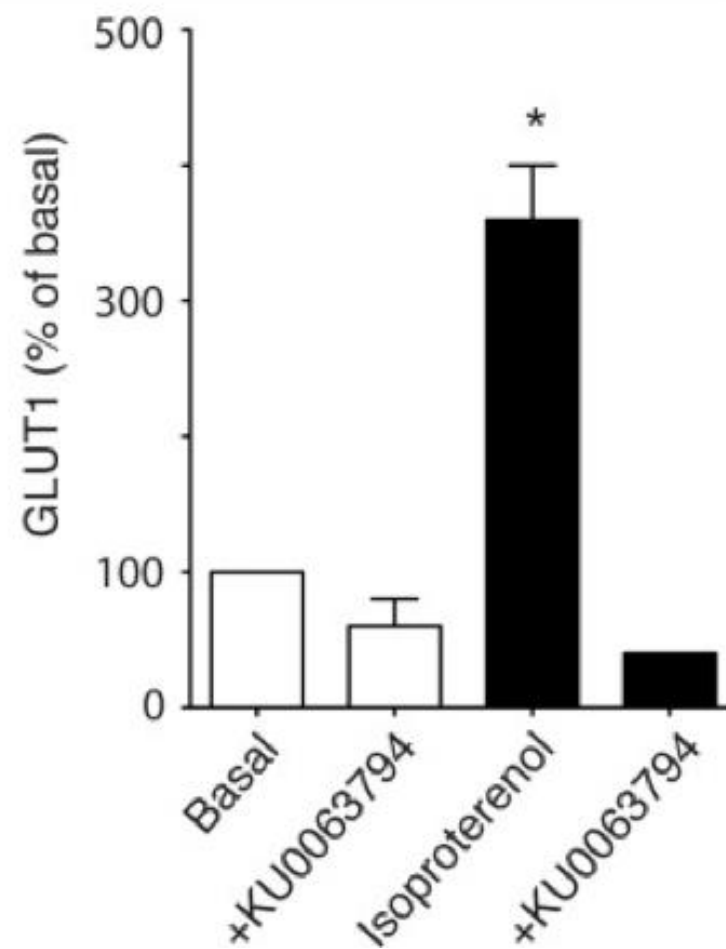
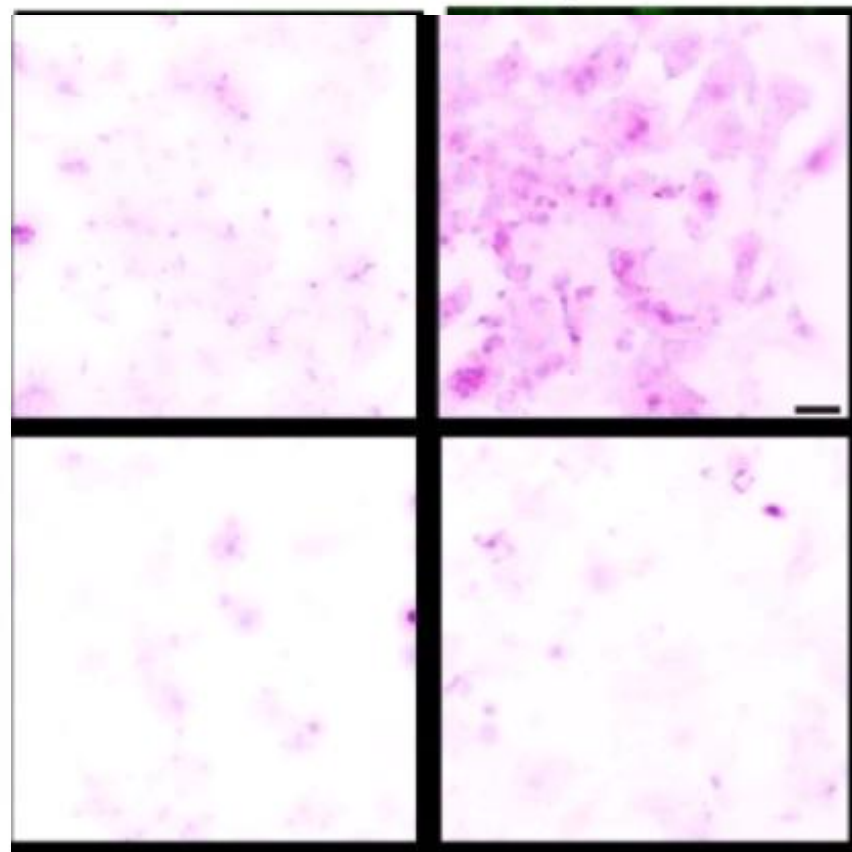
Basal

Isoproterenol



c

GLUT1 (plasma membrane)

+KU0063794**Basal****Isoproterenol**

β_3 -AR



cAMP



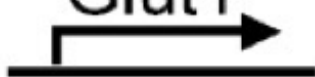
mTORC2



(1)



Glut1



GLUT1

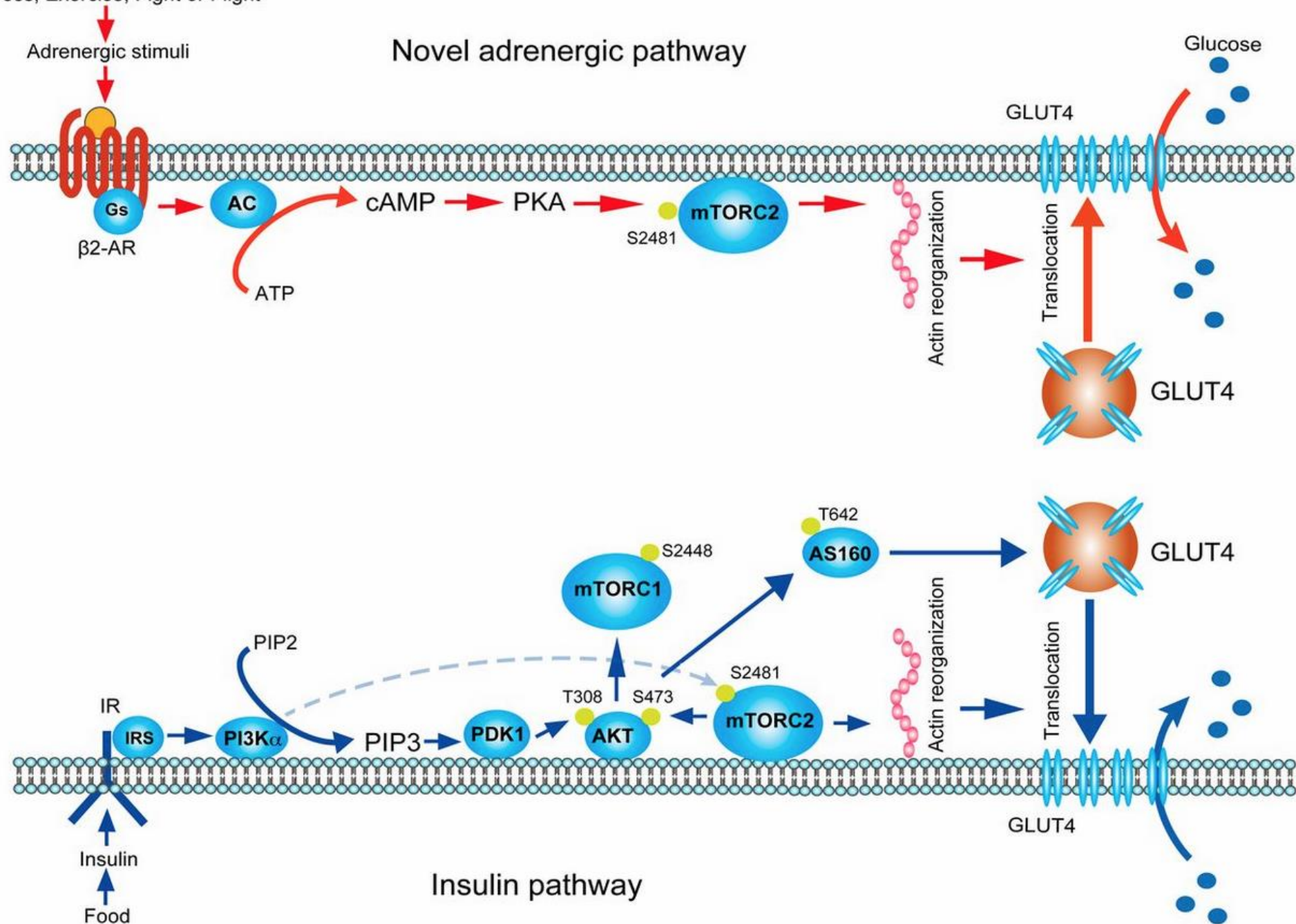
translocation

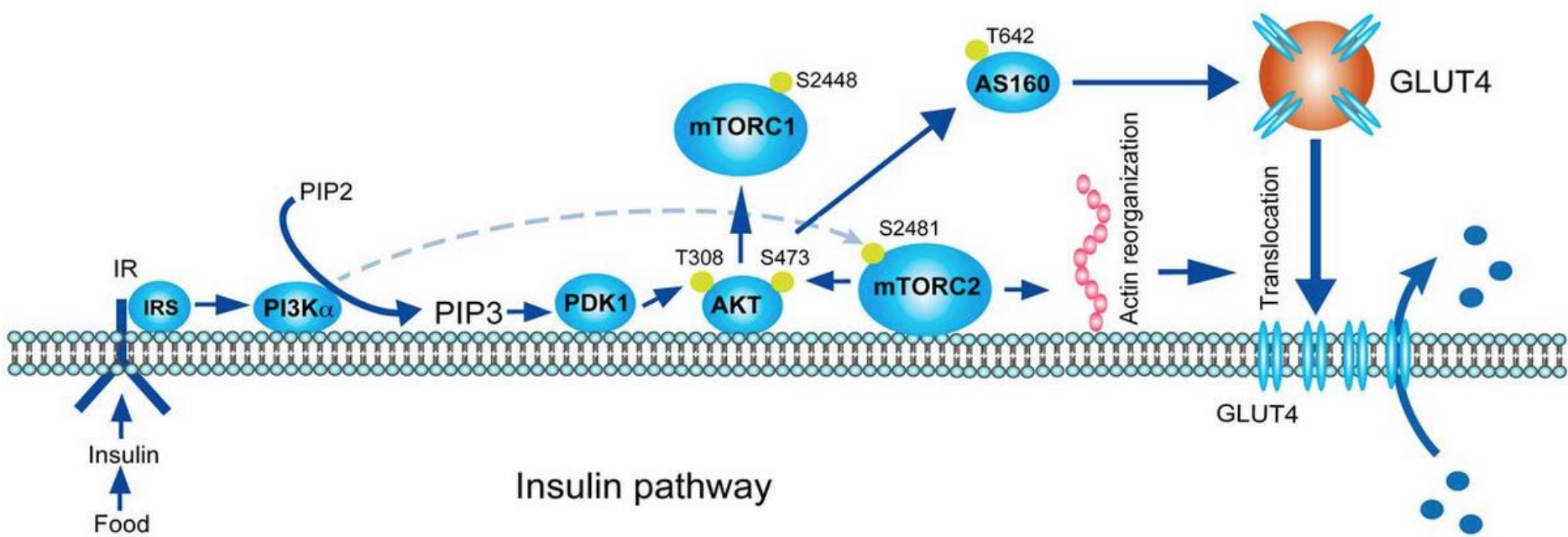


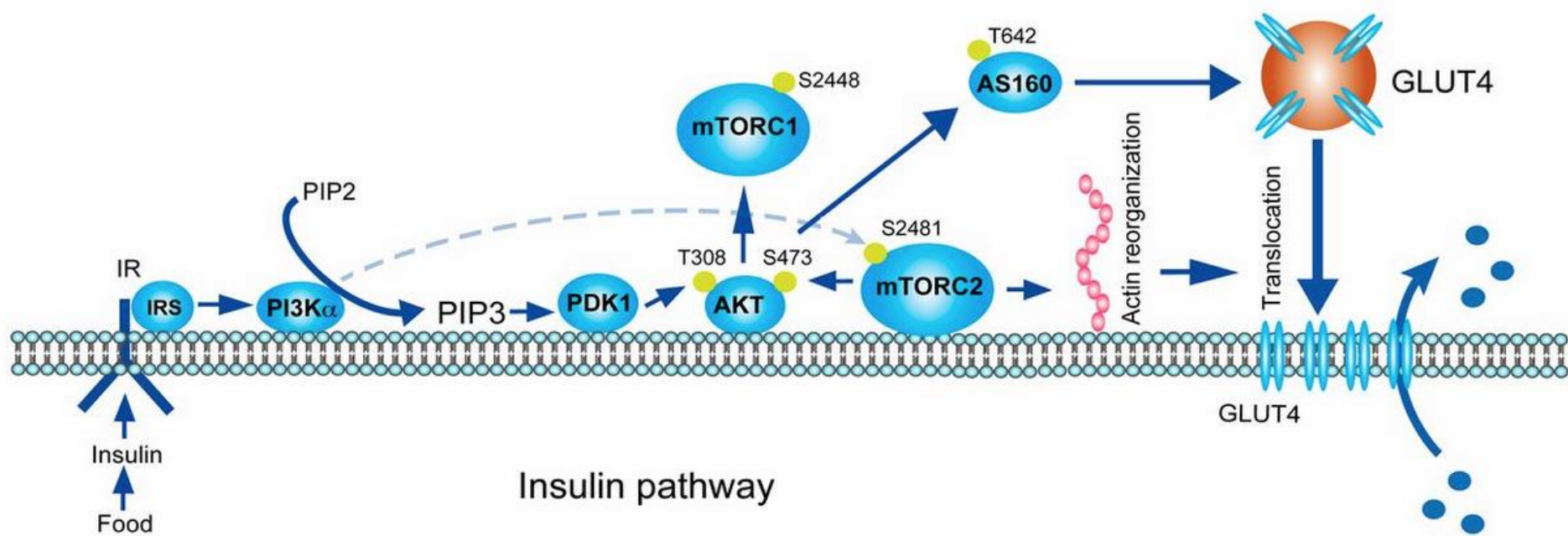
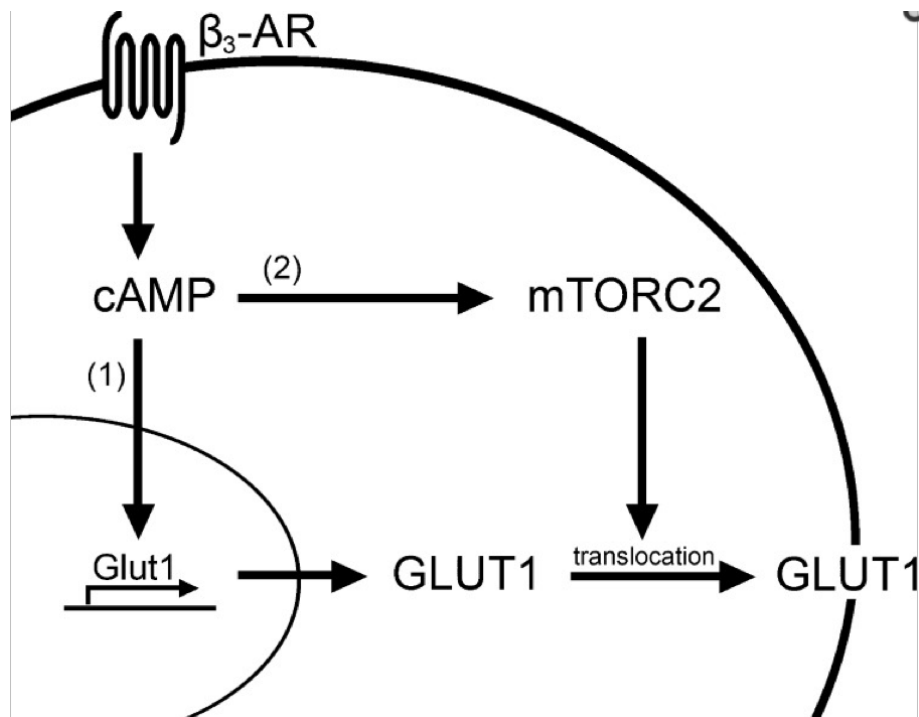
GLUT1

Stress, Exercise, Fight or Flight

Novel adrenergic pathway







**These SNPs
accelerate age-related decrease in BAT activity,
and thereby may associate with
visceral fat accumulation with age.**

Yoneshiro//Saito, 2013)