Hepatoprotective effects of semaglutide in the diet-induced obese Ldlr^{-/-} mouse model of NASH

Authors

Urmas Roostalu, Ditte Marie-Jensen, Denise Oró, Casper Gravesen Salinas, Henrik H. Hansen, Michael Feigh

Gubra, Hørsholm, Denmark Contact: Michael Feigh <u>mfe@gubra.dk</u>

BACKGROUND & AIM

The long-acting glucagon-like peptide-1 (GLP-1) analogue semaglutide is approved for the treatment of type 2 diabetes and obesity. Recently, semaglutide has been reported to improve liver histological outcomes in patients with non-alcoholic steatohepatitis (NASH) and fibrosis (Newsome et al., NEJM, 2020). Semaglutide is currently in phase-3 clinical trial (ESSENCE) for the treatment of NASH.

We have recently characterized semaglutide treatment in the translational GAN diet-induced obese (DIO) mouse model of fibrosing NASH (Møllerhøj et al. Clin Transl Sci, 2022). The present study aimed to evaluate semaglutide treatment in DIO low-density lipoprotein (LDL) receptor knockout (DIO-LDLR-KO) mouse model of NASH.

METHODS

Male LDLR^{-/-} mice fed western diet (D12079B Research diets, 41 %-kcal fat, 0.21% cholesterol) for 17 weeks and administered (SC, QD) vehicle or semaglutide (30 nmol/kg) for 17 weeks as prophylactic intervention. Chow-fed LDLR^{-/-} mice served as controls. Terminal endpoints included body weight, plasma and liver biochemistry, NAFLD Activity Score (NAS), fibrosis stage and quantitative liver histology.



Group	Animal model	Treatment	Number of animals
1	CHOW-LDLR-KO	Vehicle	12
2	DIO-LDLR-KO	Vehicle	16
3	DIO-LDLR-KO	Semaglutide (30 nmol/kg)	15



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Figure 1. Semaglutide improves metabolic and biochemical parameters in DIO-LDLR-KO mice. (A) Body weight (BW) change relative to baseline (day 1) over study period. (B) Terminal body weight. (C) Liver weight. (D-K) Terminal plasma and liver biochemistry: (D) Plasma triglycerides (TG, nmol/l), (E) Plasma total cholesterol (TC, nmol/l), (F) Plasma low-density lipoprotein (LDL, nmol/l), (G) Plasma high-density lipoprotein (HDL, nmol/l), (H) Liver TG (mg/g liver), (I) Liver TC (mg/g liver),(J) Plasma alanine aminotransferase (ALT, U/l), (K) Plasma aspartate aminotransferase (AST, U/l). *p<0.05, **p<0.01, ***p<0.001 (one-way ANOVA).



4 Steatosis, inflammation and ballooning degeneration scores



Lobular inflammation score 2 1 60-0

Figure 3. Semaglutide improves all NAFLD Activity Score (NAS) variables in DIO-LDLR-KO mice. (A) Steatosis score. (B) Lobular inflammation score. (C) Hepatocyte ballooning degeneration score. *p<0.01, ***p<0.001 compared to DIO-LDLR-KO vehicle group (one-sided Fisher's exact test with Bonferroni correction).





5 Quantitative histological markers of steatosis, inflammation and fibrosis

Figure 4. Semaglutide improves quantitative liver histological markers in DIO-LDLR-KO mice. Histomorphometric assessments were performed by GHOST deep learning-based image analysis on scoring-associated variables and conventional IHC image analysis (A) % hepatocytes with lipid droplets. (B) Number of inflammatory foci. (C) % area of PSR. (D) % area of galectin-3. (E) % area of collager 1a1. (F) % area of alpha-smooth muscle actin (α-SMA). Mean ± SEM. *p<0.05, **p<0.01, ***p<0.001 compared to DIO-LDLR-KO vehicle group (one-way ANOVA). Right panels: Representative galectin-3, collagen 1a1 and α-SMA photomicrographs (scale bar, 100 µm).



3 NAFLD Activity Score and Fibrosis Stage



Figure 2. Semaglutide improves liver histopathological scores in DIO-LDLR-KO mice. Histopathological scores were determined by Gubra Histopathological Objective Scoring Technique (GHOST) deep learning-based image analysis. (A) NAFLD Activity Score (NAS). (B) Fibrosis Stage. **p<0.01, ***p<0.001 compared to DIO-LDLR-KO vehicle group (one-sided Fisher's exact test with Bonferroni correction). Bottom panels: Representative HE and PSR photomicrographs used for GHOST evaluation.



CONCLUSION

- + Semaglutide induces weight loss, improves hepatomegaly, dyslipidemia, and transaminases in DIO-LDLR-KO mice
- + Semaglutide improves both NAS and fibrosis scores in DIO-LDLR-KO mice
- + Semaglutide improves quantitative histological markers of steatosis, inflammation and fibrosis in DIO-LDLR-KO mice

The DIO-LDLR-KO mouse represents a translational model for evaluating drug effects on clinical and histological endpoints in NASH