Whole-brain activation signatures of weight-lowering drugs

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Background & Aim

The development of effective anti-obesity therapeutics relies heavily on the ability to target CNS signaling mechanisms critically involved in the homeostatic control of body weight. To get insight into neurocircuits recruited by anti-obesity drug treatment, the present study aimed to determine whole-brain activation signatures of six different weight-lowering drug classes with documented efficacy in humans.

Methods

Chow-fed C57BL/6J mice (n=8 per group) received a single dose of the following weight lowering compounds:

- Lorcaserin, 5-HT2C receptor agonist (7 mg/kg, i.p.)
- Rimonabant, cannabinoid CB1 receptor antagonist (10 mg/kg, i.p.),
- Bromocriptine, D2 receptor agonist (10 mg/kg, i.p.),
- Sibutramine, dual noradrenaline-serotonin reuptake inhibitor (10 mg/kg, p.o.),
- Semaglutide, GLP- receptor agonist (0.04 mg/kg, s.c.) or
- Setmelanotide, melanocortin-4 receptor (MC4R) agonist (4 mg/kg, s.c.).

Brains were sampled two hours post-dosing, immunolabelled using c-Fos expression as a proxy for neuronal activation. Cleared whole-brains were imaged using a high-throughput light sheet fluorescence microscopy-deep learning pipeline enabling fully automated 3D mapping and quantitation of brain activation patterns at single-cell resolution.

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Figure 1. Study design and groups. Mice (n=8) were dosed with lorcasarin (7mg/kg; ip), rimonabant (10mg/kg; ip), bromocriptine (10mg/kg; ip), sibutramine (10mg/kg; po), semaglutide (0.04mg/kg; sc), setmelanotide (4mg/kg; sc) and compared to respective ip, sc, or po dosed vehicle controls. Brains removed were sampled sampled two hours post-dosing, immunolabelled using c-Fos expression as a proxy for neuronal stimulation. Brains were scanned on a Lavision Ultramicroscope II and mapped into a common reference atlas. The total number of c-Fos positive cells was quantified and the individual brains from each group were aligned into an average brain providing a heatmap of overall c-Fos activity.





Overlapping and specific c-Fos expression signatures of weight-lowering drugs in in key brain areas regulating energy homeostasis and hedonic eating. (A) Anatomical map (dorsal view) depicting 12 selected brain regions involved in appetite regulation. (B) Summary of drug-induced c-Fos induction across the 12 individual brain regions. These 12 areas included cardinal hypothalamic feeding centres [paraventricular (PVH), dorsomedial (DMH) and arcuate (ARH) hypothalamic nucleus; lateral hypothalamic area, (LHA)]; central amygdalar nucleus (CEA); major dopaminergic pathways [nucleus accumbens (ACB), substantia nigra pars compacta (SNC), ventral tegmental area (VTA)] as well as components of the brainstem [parabrachial nucleus (PB), nucleus of the solitary tract (NTS), dorsal motor nucleus of the vagus nerve (DMX), area postrema (AP)]

Study outline



c-Fos expression signatures of weight-lowering drugs in major appetite-regulating brain regions



Mapping quantitative changes in c-Fos expression



Figure 4. Overlapping and distinct c-Fos expression signatures of weight-lowering drugs in major appetite-regulating brain regions. Fold-change (log2 scale, mean ± S.E.M.) in c-Fos positive cell counts in the 12 selected brain regions (rostro-caudal order) compared to corresponding vehicle controls. Dunnett's test negative binomial generalised linear model with p-value adjustment for multiple comparisons using FDR < 0.05 was applied for statistical analysis (*p < 0.05; **p < 0.01, ***p < 0.001).

Bromocriptine



Figure 2.3D mapping and quantification of whole-brain c-Fos responses to acute treatment with various weight-loss promoting compounds. The average c-Fos signal from n=8 mice mapped into the same 3D reference brain. Quantification and statistical analysis of c-Fos expression was performed in 308 brain regions Brain areas with statistically significant hanges in c-Fos expression (p < 0.05pregulation) or blue (downregulatic compared to corresponding vehicle controls In general, the c-Fos response to peptide treatment (semaglutide), is more regioselective compared to that of small molecules and small peptides (e.g. lorcaserin, rimonabant, sibutramine setmelanotide).





Mean $\log_2(fold change) \pm SEM$

Conclusion

- We pinpoint several overlapping brain activation signatures of various weightlowering drugs.
- + This shared feature suggests that weightlowering drugs stimulate distinct homeostatic and non-homeostatic feeding centres.
- + Future centrally acting anti-obesity compounds may be specifically designed to target key components of this neurocircuitry framework to provide more effective and sustained weight loss in obese patients.



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