

Growth Hormone Regulation of p85 α Expression and Phosphoinositide 3-Kinase Activity in Adipose Tissue: Mechanism for Growth Hormone-Mediated Insulin Resistance

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Juan-Pablo del Rincon¹, Keiji Iida¹, Bruce D. Gaylenn¹, Carrie E. McCurdy², J. Wayne Leitner³, Linda A. Barbour^{4,5}, John J. Kopchick⁶, Jacob E. Friedman², Boris Draznin^{3,4}, and Michael O. Thorner¹

From the ¹Department of Internal Medicine, University of Virginia, Charlottesville, VA; ²Department of Pediatrics, University of Colorado Health Sciences Center; ³Research Service, Denver VA Medical Center, Denver, CO; ⁴Department of Medicine, University of Colorado Health Sciences Center; ⁵Department of Obstetrics and Gynecology, University of Colorado Health Sciences Center; and ⁶Edison Biotechnology Institute and the Department of Biomedical Sciences, Ohio University, Athens, OH.

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Address correspondence and reprint requests to
Michael O. Thorner, Department of Medicine, University of Virginia, Box 800466, Charlottesville, VA 22908, E-mail: mot@virginia.edu, or to Juan-Pablo del Rincon, Department of Medicine, University of Virginia, Box 801411, Charlottesville, VA 22908,

Phosphoinositide 3-kinase (PI3K) is involved in insulin-mediated effects on glucose uptake, lipid deposition and adiponectin secretion from adipocytes. Genetic disruption of the p85 α regulatory subunit of PI3K increases insulin sensitivity, while elevated p85 α levels are associated with insulin resistance through PI3K dependent and independent mechanisms. Adipose tissue plays a critical role in the antagonistic effects of growth hormone (GH) on insulin actions on carbohydrate and lipid metabolism through changes in gene transcription. Objective: Assess the role of the p85 α subunit of PI3K and PI3K signaling in GH-mediated insulin resistance in adipose tissue. Research Design and Methods: p85 α mRNA and protein expression and IRS-1-associated PI3K activity were measured in white adipose tissue (WAT) of mice with GH excess, deficiency and sufficiency. Additional studies using 3T3-F442A cells were conducted to confirm direct effects of GH on free p85 α protein abundance. Results: p85 α expression: 1) is decreased in WAT from mice with isolated GH deficiency; 2) is increased in WAT from mice with chronic GH excess; 3) is acutely up-regulated in WAT from GH-deficient and GH-sufficient mice following GH administration; 4) is directly up-regulated by GH in 3T3-F442A adipocytes. The insulin-induced increase in PI3K activity was robust in mice with GH-deficiency, but not in mice with GH excess. Conclusions: GH regulates p85 α expression and PI3K activity in WAT and provides a potential explanation for: a) the insulin hypersensitivity and associated obesity and hyperadiponectinemia of GH-deficient mice; and b) the insulin resistance and associated reduced fat mass and hypoadiponectinemia of mice with GH excess.

GH has well known diabetogenic effects. As early as 1931, Houssay and Biasotti showed that injection of crude pituitary extracts induced diabetogenic effects in dogs (1). By 1949 it was confirmed that these effects were caused by GH (2). There is a 30 to 56% prevalence of overt diabetes mellitus in humans with acromegaly, a disease characterized by excessive GH production (3; 4). The molecular mechanism(s) of GH-induced insulin resistance is (are) not clear.

A large number of studies demonstrate that adipose tissue plays a critical role in the antagonistic effects of GH on insulin action on carbohydrate and lipid metabolism (reviewed in (5)). Studies showing direct actions of GH in adipose cells or tissue include: kinetic studies in pigs which demonstrated that GH-induced insulin resistance results predominantly from reduced incorporation of glucose into adipose tissue (6; 7), studies in 3T3-L1 and 3T3-F442A adipocytes showing that GH inhibits insulin action on glucose transport and lipid accumulation (5; 8), and studies in human adipose tissue and adipocytes showing that GH reduces the incorporation of glucose into triglycerides (9). It has been proposed that the GH-induced insulin resistance in adipocytes is caused by a mechanism involving the phosphoinositide 3-kinase (PI3K) signaling pathway (10).

The PI3K pathway has an essential role in insulin induced glucose uptake and lipid metabolism in adipocytes (11), and it is also involved in the insulin-mediated increase in secretion of the adipocyte-derived hormone adiponectin (12-14). PI3K is a heterodimer consisting of one p85 regulatory and one p110 catalytic subunit, each of which occurs in multiple isoforms. p85 α and the p55 α and p50 α splice variants, represent 70-80% of the total PI3K regulatory subunits in insulin-sensitive tissues, and are encoded by the *Pik3r1* gene (15). In addition to its role as part of the PI3K dimer, the p85 α regulatory

subunit is also recognized as an important negative regulator of PI3K and insulin action. This has been shown in mouse models with partial or total knockout of p85 α that demonstrate the paradoxical phenotype of increased insulin sensitivity (16-18). The inverse correlation between p85 levels and insulin sensitivity is also applicable when this regulatory subunit is expressed at greater-than-normal levels. For instance, p85 overexpression in cells inhibited PI3K signaling and glucose uptake (19). This mechanism has been recently supported by studies of the insulin resistant states induced by human placental growth hormone (20), and in obesity and type 2 (21) and gestational diabetes (22).

Since studies with inhibitors of RNA and protein synthesis suggest that many (perhaps all) of the anti-insulin effects of GH involve mRNA transcription and protein synthesis (5; 23; 24), we investigated the effects of GH on the p85 α subunit of PI3K and its potential involvement in GH mediated insulin resistance. Our results strongly support that GH modulates insulin action through regulation of the expression of the p85 α subunit of PI3K in adipose tissue.

RESEARCH DESIGN AND METHODS

Generation of the giant transgenic mouse expressing bovine GH (bGH) under the regulation of the metallothionein I promoter was previously described (25). Mice with this transgene show high serum bGH levels (25). C57BL/6J *lit/lit* and *lit/+* mice were obtained from the Jackson Laboratory (Bar Harbor, Maine). The little (*lit*) autosomal recessive mutation of the GH-releasing hormone (GHRH) receptor causes isolated GH deficiency in *lit/lit* mice, while heterozygous *lit/+* mice are GH sufficient (26). *lit/lit* and *lit/+* mice received a subcutaneous bolus (120 ng/g body weight) of rat recombinant GH (rrGH) (gift from Genentech Inc., South San Francisco, CA) or vehicle (0.9% saline, 100 μ l) 4 h before sacrifice. bGH and *lit* mice

were sacrificed at 3 months of age using halothane. WAT depots were snap-frozen and stored at -80°C. Male mice were used in all the studies. Animal procedures were approved by the Institutional Animal Care and Use Committees of the University of Virginia, Ohio University and the University of Colorado Health Sciences Center.

Measurement of blood parameters. Blood was obtained by cardiac puncture. Plasma glucose and insulin were measured after a six h fast in lit/lit and lit/+ mice using the glucose oxidase method (YSI Incorporated, Yellow Springs, OH) and the Sensitive Rat Insulin RIA Kit (Linco Research, St. Charles, MO), respectively. Adiponectin concentrations were measured in serum from non-fasted lit/lit and bGH mice and their respective controls using the Mouse Adiponectin RIA Kit (Linco Research, Inc., St. Charles, MO). The insulin resistance index was calculated by multiplying the fasting blood glucose level (mg/dl) by the fasting insulin level (ng/ml) (27).

Determination of adipocyte size in lit/lit and lit/+ mice. Epididymal adipose tissue removed from lit/lit and lit/+ mice was fixed in a 4% paraformaldehyde/PBS solution, embedded in paraffin, cut into 5- μ m sections, and stained with hematoxylin and eosin. Cross-sectional areas of at least 100 adipocytes per mouse, from at least 7 microscopic fields, were measured using the Image-Pro Plus software (Media Cybernetics, Inc., Silver Spring, MD). The mean area value from each mouse was subsequently used for comparison between groups (n=5 mice per group).

Cells. 3T3-F442A cells were provided by Dr. P.J. Bertics (University of Wisconsin) and maintained in Dulbecco's modified Eagle's medium (DMEM) (Invitrogen, Carlsbad, CA) supplemented with 10% calf serum and a mixture of penicillin and streptomycin. Confluent cells were differentiated by adding DMEM containing 10% fetal bovine serum (Invitrogen) and 172 nM insulin (Eli Lilly, Indianapolis, IN). Medium was renewed

every second day. After 10 days, differentiated cells were incubated overnight in a serum-free media (DMEM with 0.1% bovine serum albumin) and then treated with media with or without recombinant human GH (rhGH) (Genentech, South San Francisco, CA) (200 ng/ml) at 37° C for 3, 6 and 24 h. In experiments performed to determine the effects of GH on the abundance of free p85 α protein, 3T3-F442 adipocytes were incubated with and without 500 ng/ml rrGH for 24 h.

Real-time Reverse Transcriptase-PCR. Total RNA was extracted using Tri Reagent (Molecular Research Center, Inc. Cincinnati, OH) followed by further purification using the RNeasy Mini Kit (Qiagen, Valencia, CA) with on-column DNA digestion with the RNase-Free DNase Set (Qiagen). RNA concentrations were measured using the RiboGreen Quantitation Kit (Molecular Probes, Eugene, OR). Primers for the mouse *Pik3r1* gene targeted exons 14 (5'-CTTGTCGGGAGAGCAGTAAGCA-3')

and 15 (5'-CAGGTTGTAGGGCTCGGCAAAG-3'), as the C-terminal region, encoded by nine exons (E7 to E15), is common to all variants (p85 α , p55 α and p50 α) of the *Pik3r1* gene (28). Primers targeted exon 5 of the *Pik3r1* gene (5'-TCATCAGTGTGGCTTACGCTTCAGTA-3') for p85 α , exon E1-55 (5'-CACGGTTTGGACTATGGAAGACCTG-3') for p55 α and exon E1-50 (5'-TTCTCTGTGGGATACTGGCAGTTCAA-3') for p50 α . A reverse primer common to the three splice variants targeted the C-terminal region on exon 7 (5'-TTGTTGGCTACAGTAGTGGGCTTGG-3'). Primers for the insulin-like growth factor (IGF)-1 gene and 18S rRNA were as described (29).

Plasmids were constructed with the PCR products generated with the above-mentioned specific primer pairs and were cloned into the pGEM-T vector (Promega, Madison, WI) and introduced in *Escherichia coli* JM109 (Promega). From a selected

transformant containing the desired construct, plasmid DNA was isolated using the Qiaprep Spin Miniprep Kit (Qiagen). A serial dilution of each plasmid was used to make a standard curve for quantification. RNA reverse transcription and real-time PCR were done as described (29). The obtained values (copy number) were normalized to 18S rRNA.

Western blots. Polyclonal anti-p110 α (07-658) and anti-p110 β (06-568) antibodies used for co-immunoprecipitation of p85 α , and a specific anti-p85 α monoclonal antibody (Anti-PI 3 Kinase p85 N-SH3 clone AB6) used for p85 α detection were from Upstate USA, Inc. Tissues or 3T3-F442A adipocytes were homogenized in an ice-cold modified RIPA buffer (50 mM Tris-HCl pH 7.4, 1% Igepal CA-630, 0.5% sodium deoxycholate, 0.1% SDS) with a protease inhibitor cocktail (Calbiochem, La Jolla, CA), followed by two cycles of centrifugation at 10,000g for 10 min at 4 C. The supernatant was removed from the centrifugation tube. Proteins were measured using the BCA assay reagent kit (Pierce, Rockford, IL). Equal amounts of protein (50 μ g) from each sample were mixed 2:1 with 4x Laemmli sample buffer, boiled for 5 min, separated on a 7.5% SDS-PAGE gel, and transferred to nitrocellulose membranes (Protran BA85, Schleicher & Schuell, Keene, NH). Nitrocellulose blots were stained with Ponceau S (0.5% in 1% acetic acid) to confirm equal protein loading, destained with TBS-T (0.15 M NaCl, 0.1% Tween 20, 50 mM Tris, pH 7.6), and incubated for 1 h at room temperature with blocking buffer (5% bovine serum albumin in TBS-T) and then incubated for an additional 1 h at room temperature with anti-p85 α antibody at 1:500 dilution. After washing 3 times in TBS-T, membranes were incubated for 2 h with a goat anti-mouse horseradish peroxidase-conjugated antibody (Santa Cruz Biotechnology, Santa Cruz, CA). Bands were visualized using SuperSignal[®] West Pico Chemiluminescence Substrate (Pierce) and exposed to CL-XPosure Film (Pierce). Band densitometry was analyzed with Image

Master TotalLab (Amersham Pharmacia Biotech, Piscataway, NJ). To assess the effects of GH on free p85 α abundance, p85 α -p110 dimers were immunodepleted by subjecting protein lysates to three rounds of sequential immunoprecipitation with a combination of anti-p110 α (1:100) and anti-p110 β (1:100) antibodies. Immunoprecipitates were captured with ImmunoPure Immobilized Protein A/G (Pierce). p85 α protein remaining in the supernatant, representing the p85 monomer, was detected with an anti-p85 α antibody by Western blot.

IRS-1 associated PI3K activity. PI3K activity was measured in epididymal fat from mice with: 1) chronic GH deficiency (lit/lit) and their littermates controls (lit/+); 2) chronic GH excess (bGH) and their wild-type littermates; 3) short-term GH excess (C57BL/6 wild-type mice). The latter C57BL/6, 2-3 months of age, were injected with rrGH (National Hormone and Pituitary Program, Harbor-UCLA Medical Center, Los Angeles, CA) (1 μ g/g) subcutaneously twice daily for 3 days. At the time of sacrifice, mice were fasted for 6 hours and anesthetized with ketamine (150 mg/kg) and acepromazine (5 mg/kg). Their right-sided epididymal fat pad was rapidly removed and frozen immediately in liquid nitrogen. An insulin bolus of 10 U/kg body weight was then injected into the portal vein. At 5 minutes after injection, the epididymal fat pad from the opposite side was excised and frozen immediately. The level of IRS-1 associated PI3K activity was determined as described (30).

Statistical analysis. Results are presented as means \pm SEM. Unpaired t-test and one-way ANOVA were used for comparisons between groups as appropriate, and a non-parametrical (Spearman) method was used for correlation analysis. Statistical significance was considered at P values < 0.05.

RESULTS

Mice with chronic GH excess show increased p85 α expression in WAT and reduced serum

adiponectin. To test the hypothesis that GH modulates insulin action in WAT through regulation of *Pik3r1* expression, we studied bGH transgenic mice. These mice showed increased *Pik3r1* mRNA (Fig. 1A) and concomitantly increased p85 α protein levels in WAT (Fig. 1B). Circulating adiponectin concentrations are in general negatively correlated with insulin resistance and with fat mass (31). In the bGH mice that are lean but insulin resistant (32; 33), adiponectin concentrations were 55% of those in their wild-type littermates (Fig. 1C).

Mice with chronic GH deficiency show reduced p85 α expression in WAT, hypoinsulinemia, hyperadiponectinemia and adipocyte hypertrophy. p85 α protein in WAT of *lit/lit* mice was reduced by ~60% as compared to *lit/+* mice (Fig. 2A). While plasma glucose concentrations were not significantly different between *lit/lit* and *lit/+* mice (Fig. 2B), fasting insulin concentrations in *lit/lit* were 38% of those in *lit/+* mice (Fig. 2C). Estimation of insulin action using the insulin resistance index (fasting blood glucose level (mg/dl) multiplied by the fasting insulin level (ng/ml)) (27) supports that *lit/lit* mice have enhanced insulin sensitivity as compared to *lit/+* mice controls ($P=0.006$) (Fig. 2D). Similarly significant results were obtained with other commonly used formulas for insulin action estimation including QUICKI (34) or HOMA-IR (35) (not shown). The cross-sectional area of adipocytes was significantly higher in *lit/lit* than in *lit/+* mice (947.7 ± 99.28 vs. $456.6 \pm 91.68 \mu\text{m}^2$) (Fig. 2E). Circulating adiponectin has previously been inversely correlated with adipocyte size (31), however, *lit/lit* mice in spite of their enlarged adipocyte size showed higher serum adiponectin concentrations compared to those in *lit/+* mice (30.33 ± 1.36 vs. $11.28 \pm 0.97 \mu\text{g/ml}$) (Fig. 2F).

Effects of chronic GH deficiency and acute GH replacement on total *Pik3r1* and its p85 α , p55 α and p50 α splice variants in WAT. As mice with heterozygous disruption of the *Pik3r1* gene have shown increased insulin

sensitivity, we explored whether the enhanced insulin sensitivity of GH-deficient mice might be related to a decreased expression of the *Pik3r1* gene. *lit/lit* mice showed *Pik3r1* mRNA levels (that included the three products, p85 α , p55 α and p50 α , of the gene) ~ half of those in their GH-sufficient *lit/+* littermates (Fig. 3A). As we found that mice with chronic GH excess had increased p85 α expression, we analyzed the response at 4 h after an acute dose of rrGH on *Pik3r1* expression. *Pik3r1* mRNA levels in GH-treated *lit/lit* mice were 169% higher than in vehicle-treated *lit/lit* mice (Fig. 3A). *Pik3r1* mRNA levels also increased in GH-treated *lit/+* mice (Fig. 3A). To elucidate the response of each of the splice variants of the *Pik3r1* gene under different levels of GH action, we measured p85 α , p55 α and p50 α mRNA levels. p85 α , the most abundant product, showed very similar changes to those found for *Pik3r1* (Fig. 3B). In contrast, p55 α (Fig. 3C) and p50 α (Fig. 3D) mRNA levels did not show significant differences between any of the studied groups. Correlation analysis between *Pik3r1* and p85 α , p55 α and p50 α mRNA levels showed respectively values of 0.89 ($P<0.001$), 0.31 ($P=N.S.$) and 0.03 ($P=N.S.$) (not shown), confirming that the observed effects on total *Pik3r1* expression can be accounted for by changes in p85 α expression. Since the IGF-1 gene is an established target of GH, we validated our experimental model by analyzing IGF-1 mRNA levels in the same groups of mice (Fig. 3E), and obtained results similar to those of the *Pik3r1* gene. A strong correlation between IGF-1 and *Pik3r1* mRNA levels (Spearman $r=0.79$) was found, suggesting that GH regulates both *Pik3r1* and IGF-1 expression in WAT.

GH increases *Pik3r1* mRNA levels in differentiated 3T3-F442A cells. To gain further insight into the possibility of a direct effect of GH on *Pik3r1*, we analyzed 3T3-F442A adipocytes incubated with or without GH. *Pik3r1* mRNA levels increased to 191%, 244% and 247% within 3, 6 and 24 h of

incubation with GH, respectively (Fig. 4), supporting a direct effect of GH on *Pik3r1* expression in adipose cells.

Insulin-stimulated IRS-1 PI3K activity is increased in WAT of mice with chronic GH deficiency and decreased in WAT of mice with chronic or with short-term GH excess. In order to analyze if the GH-induced changes in *p85 α* expression had concomitant effects on PI3K activity in WAT, epididymal fat from mice with diverse levels of GH action were analyzed. While *lit/+* and *lit/lit* mice showed respectively a 57% and 207% increase in IRS-1-associated-PI3K activity in response to insulin (Fig. 5A), *bGH* mice did not have a significant response (Fig. 5B). In order to assess a shorter term effect of GH, wild-type mice were exposed to *rrGH* or vehicle for a period of 3 days. While insulin significantly increased PI3K activity in wild-type mice (Fig. 5C), this effect was abrogated in mice treated for 3 days with *rrGH* (Fig. 5C), demonstrating a GH-inhibitory effect on insulin action on IRS-1-associated PI3K activation.

Effects of GH on the abundance of the *p85 α* monomer. To gain further insight into the effects of GH on abundance of the *p85 α* monomer, we measured *p85 α* protein levels in supernatants of 3T3-F442A adipocyte lysates following immunodepletion of *p110 α* and *p110 β* protein, resulting in co-immunoprecipitation of their bound *p85 α* protein. Free *p85 α* was increased by ~290% in GH-treated cells (Fig. 6A). Using the same technique, we found increased free *p85 α* in WAT from *bGH* mice (Fig. 6B), and decreased free *p85 α* in WAT from *lit/lit* mice (Fig. 6C).

DISCUSSION

GH can exert divergent actions on carbohydrate and lipid metabolism, showing acute insulin-like effects and delayed anti-insulin effects. The insulin-like effects are observed under conditions of previous GH deprivation (36); however, these effects are

short-lived and their physiological significance, remains unclear (5). In contrast, the insulin-opposing effects of GH are present after a lag period of a few hours and persist chronically if exposure to GH continues (5; 36). The main hypothesis in the present study was that GH antagonizes insulin actions through regulation of *p85 α* expression in adipose tissue. Our results show that GH up-regulates the expression of the *p85 α* -encoding gene, *Pik3r1*, both directly in adipose cells, and in adipose tissue in mice. Several lines of evidence support that *p85 α* can reciprocally regulate insulin action; PI3K dependent and independent mechanisms have been proposed as explanations for these *p85 α* -mediated effects (reviewed in (37)). We found in the present study that PI3K is involved in the insulin opposing effects of GH in WAT, as shown by the fact that the normal increase in insulin-stimulated IRS-1-associated PI3K activity was abrogated in mice exposed to exogenous GH. We observed similar changes in *bGH* mice, a model of life-long GH excess, as IRS-1-associated-PI3K activity did not increase in response to insulin in these mice. The latter result confirms insulin resistance and is consistent with a previous analysis of the same strain of *bGH* mice, showing an 80% decrease in insulin-simulated glucose uptake in WAT (33). Mice with GH excess demonstrate dissociation between body mass and insulin sensitivity, as despite being lean (32) and resistant to high-fat diet induced obesity (38), they are severely insulin resistant (33). Since PI3K is involved in up-regulation of glucose uptake and lipid deposition in adipocytes (11; 39), an increase of *p85 α* , a negative regulator of insulin action, specifically in adipose tissue potentially explains the dissociation between body mass and insulin resistance in mice with GH excess.

Insulin hypersensitivity in hypophysectomized animals was described in the 1920s (1). Mice with chronic GH deficiency (40; 41) and mice with genetically reduced *p85 α* show insulin hypersensitivity

(18). We questioned whether the enhanced insulin sensitivity of GH-deficient mice was related to a decrease in p85 α expression in WAT. mRNA levels of the *Pik3r1* gene (in a region amplifying not only p85 α but also the splice forms p55 α and p50 α) were decreased in WAT of *lit/lit* mice. Further real-time RT-PCR analysis in *lit/lit* and *lit/+* mice treated with rrGH or vehicle demonstrated that the observed effects of GH action on *Pik3r1* were accounted for by changes in its most abundant isoform, p85 α . Consistent with changes in p85 α mRNA, *lit/lit* mice showed reduced p85 α protein levels and a substantial (above 200%) increase in insulin-induced IRS-1-associated-PI3K activity. The increased insulin sensitivity found in mice with GH deficiency occurs in spite of an increase in adiposity (32; 40; 41). A previous study in *lit/lit* mice showed that body fat accounted for 52% of body weight at age 12 months vs. 25% in *lit/+* mice (26) and we found that *lit/lit* mice adipocytes are hypertrophic. As mentioned above, PI3K is involved in up-regulation of glucose uptake and lipid deposition in adipose tissue, therefore a decrease in p85 α in this tissue provides a potential explanation for the dissociation between increased insulin sensitivity and adiposity in GH deficiency. This notion is consistent with results from a recent study where liver IGF-1-deficient (LID) mice – having increased plasma GH due to lack of IGF-1 negative feedback on GH secretion – were crossed with transgenic mice expressing a GH antagonist (GHa) to block GH action. The resulting LID + GHa mice showed improved total body insulin sensitivity and increased insulin-stimulated glucose uptake in WAT and muscle, in spite of a two fold increase in adipose tissue mass (42). We propose that the dissociation between insulin sensitivity and adiposity in mouse models with altered GH action is best explained by direct effects of GH action in adipose tissue. This concept is consistent with the physiological role of GH in switching energy away from adipose tissue (through decreased

lipogenesis and increased lipolysis) resulting in increased lipid oxidation and preservation of body protein (43). Do the adipocytes of GH deficient animals reach a limit in their capacity to accumulate energy that would result in reduction of insulin sensitivity? We did not investigate this question; however increased insulin sensitivity, in spite of obesity, is also observed in children with GH deficiency, an effect that diminishes with increasing age; paradoxically, GH deficient adults demonstrate insulin resistance even prior to GH replacement therapy (43; 44). Of note too, is a recent study in *lit/lit* mice in which insulin sensitivity was analyzed up to 18 months of age; at age 12 months *lit/lit* still had greater insulin sensitivity than control mice, but by age 18 months they showed a blunted response to insulin (45).

A larger adipocyte size has been related with reduced serum adiponectin concentrations (31); this was not the case for *lit/lit* mice as in spite of their enlarged adipocyte size they showed hyperadiponectinemia. As PI3K has been implicated in up-regulation of adiponectin secretion in 3T3-L1 adipocytes (12-14), it is possible that decreased p85 α in WAT (accompanied by greater responsiveness to insulin in PI3K activity) contributes to the increased serum adiponectin concentrations found in *lit/lit* mice. In the case of bGH mice, an increase in p85 α in WAT (with a resultant decrease in PI3K responsiveness to insulin) might contribute to the reduced adiponectinemia. Consistent with our results in the *lit/lit* model, mice with specific disruption of the p85 α subunit of *Pik3r1* (p85 α ^{-/-}) (16) placed on a high-fat diet developed greater adipocyte size than their littermates but yet showed higher adiponectin in WAT (and greater insulin sensitivity) compared to their wild-type littermates on the same diet (27). We acknowledge that other factors beside adiponectin secretion, including adiponectin turnover, determine serum adiponectin concentrations and may be playing a role in these mouse models (46).

Besides changes in adipocytokines (e.g. adiponectin) (47), other mechanisms have been proposed to explain the modulatory effects of GH on insulin (5; 48), including up-regulation of suppressor of cytokine signaling (SOCS) proteins (e.g. SOCS-3). However, a role for SOCS is still undefined. It was suggested that SOCS-3 may be involved in termination of insulin-like effects in 3T3-F442A cells incubated with GH, but due to its transient expression and rapid turnover it is unlikely to play a relevant role in GH-mediated insulin resistance (24).

Since it has been reported that insulin per se can induce expression of p85 α (49), we analyzed the effect of GH in 3T3-F442A adipocytes in the absence of insulin; the resulting rapid and sustained increase in expression of the p85 α gene supports a direct effect of GH in adipocytes. Additional experiments to measure the abundance of the p85 α monomer, further confirmed that GH per se induces p85 α protein expression. Monomeric or “free” p85 α protein, this being p85 α not bound to the p110 catalytic subunit of PI3K, is the p85 fraction more specifically linked with insulin resistance (37). In experiments performed to gain further insight into the direct effects of GH on p85 α in adipose cells, we exposed 3T3-F442A adipocytes to rrGH for 24 h and analyzed the amount of p85 α in lysate supernatants after 3 rounds of immunoprecipitation with anti-p110 α and anti-p110 β antibodies. The amount of p85 α monomer was markedly increased in GH-treated as compared to control cells, thus demonstrating direct up-regulation by GH of this critical negative regulator of insulin action.

Taken together, our results demonstrate that GH regulates the expression of p85 α , a critical modulator of insulin action. GH-deficient mice showed decreased p85 α expression and a concomitant increase in

insulin-induced IRS-1-associated PI3K activity, while mice with GH excess showed increased p85 α levels and a concomitant suppression of the IRS-1-associated PI3K activity response to insulin. The GH-induced up-regulation of p85 α expression may explain the GH-induced insulin resistance and reduced fat mass found in mice with GH excess. A schematic representation of a proposed model explaining GH effects on insulin action in adipose tissue is shown in Fig. 7. In the context of previous studies showing that genetic manipulations of *Pik3r1* result in profound effects on insulin action (16-18; 27; 50), the results of the present study strongly support a role for regulation of p85 α expression in WAT as a mechanism involved in the insulin hypersensitivity of GH deficiency and in GH-mediated insulin resistance.

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Figure legends

FIG. 1. Increased p85 α expression in WAT and reduced adiponectin in serum of bGH mice. A: *Pik3r1* mRNA levels in mesenteric fat from bGH and wild-type littermates (WT). Percent values are expressed as means \pm SEM (n=5-6/group). B: Western blot of p85 α protein in perirenal fat of bGH mice. Experiments were done as described in Research Design and Methods. The upper panel shows a representative picture, and the lower panel shows the mean \pm SEM of arbitrary densitometry units of 3 independent experiments. C: Serum adiponectin concentrations in bGH mice. **P \leq 0.01; ***P<0.001.

Figure 1A

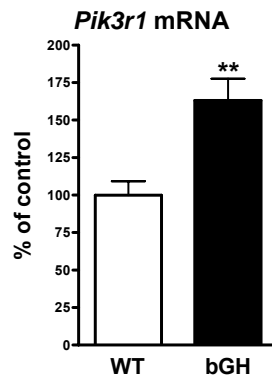


Figure 1B

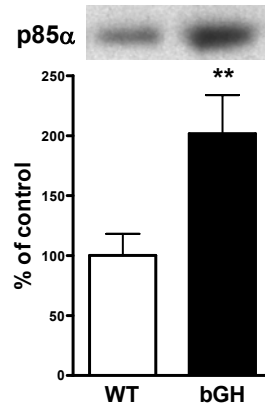


Figure 1C

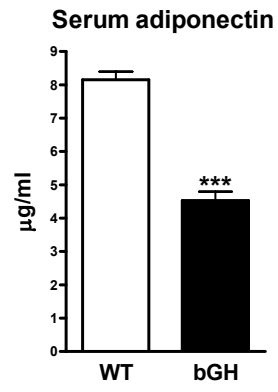


FIG. 2. Reduced p85 α protein, normoglycemia, hypoinsulinemia, hyperadiponectinemia and increased adipocyte size in GH deficient mice. p85 α protein in epididymal fat (A), fasting plasma glucose (B) and insulin concentrations (C), insulin resistance index (glucose mg/dl x insulin ng/ml) (D), cross sectional adipocyte area (with representative picture in upper panel) (E), and serum adiponectin concentrations (F) in *lit/lit* compared to *lit/+* mice (n=5/group). p85 α was measured in epididymal fat protein pooled from 5 mice/group in 3 independent experiments. Values are expressed as means \pm SEM. **P<0.01; ***P<0.001.

Figure 2A

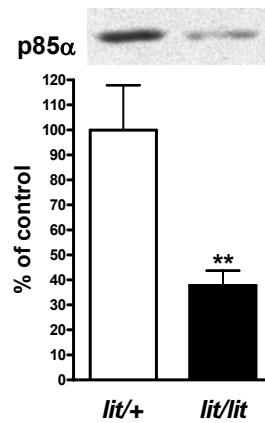


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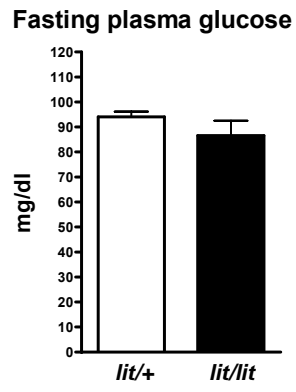


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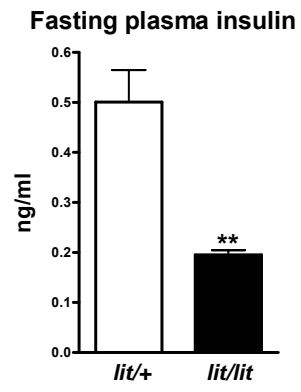


Figure 2D

Insulin resistance index

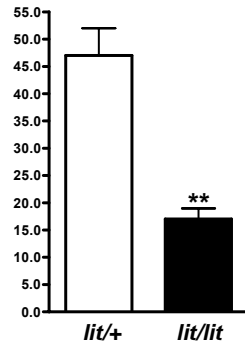


Figure 2E

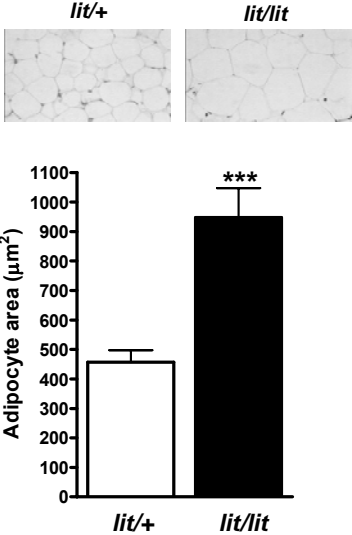


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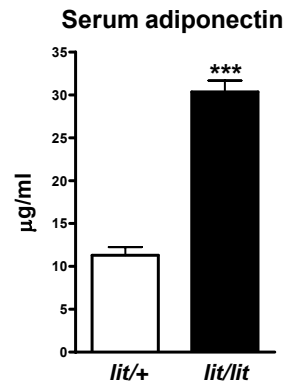


FIG. 3. *Pik3r1* (A), *p85α* (B), *p55α* (C), *p50α* (D) and IGF-1 (E) mRNA levels in mesenteric from *lit/lit* and *lit/+* mice, 4 h after treatment with either 120 ng/g body weight rrGH (+) or vehicle (-) (n=5/group). mRNA levels of total *Pi3kr1* (amplifying a common region for the 3 splice variants), of each specific splice variant and of the IGF-1 gene were measured as described in Research Design and Methods. Percent values are expressed as means ± SEM, with vehicle-treated *lit/+* mice as control group. *P<0.05; **P<0.01; ***P<0.001.

Figure 3A

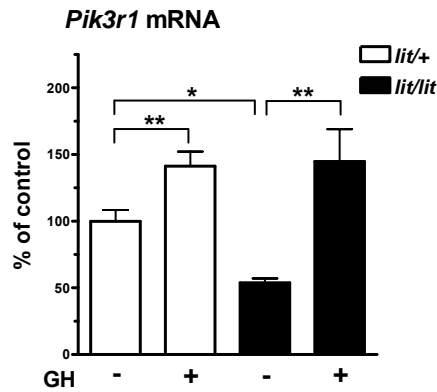


Figure 3B

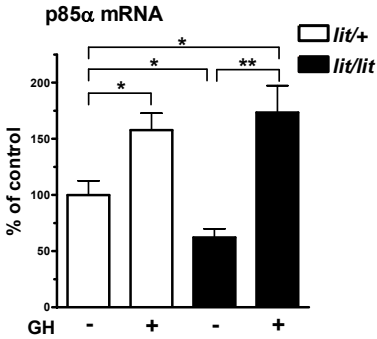


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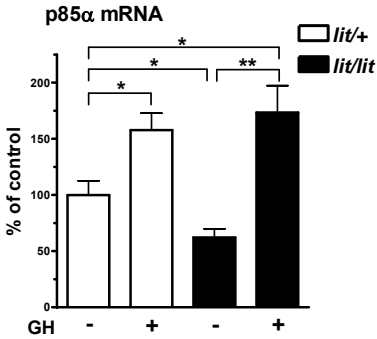


Figure 3C

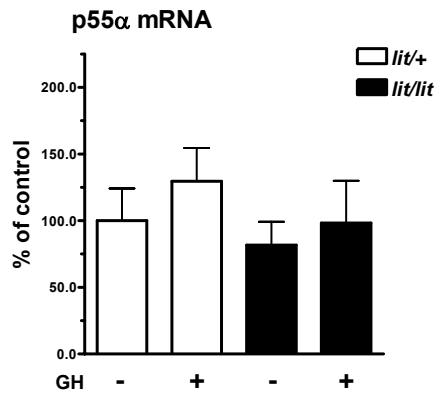


Figure 3D

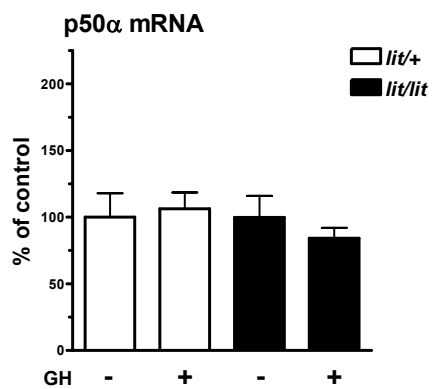


FIG. 4. In vitro regulation of *Pik3r1* mRNA levels by GH. 3T3-F442A cells were induced to differentiate in DMEM, 10% FBS and 172 nM insulin. After 10 days, a serum-free media was used overnight, and cells were incubated with or without rhGH (200 ng/ml) for 3, 6 and 24 h. Percent values are expressed as means \pm SEM (n=3/time point) of the time 0 reference control. *P<0.05; **P<0.01.

Figure 4

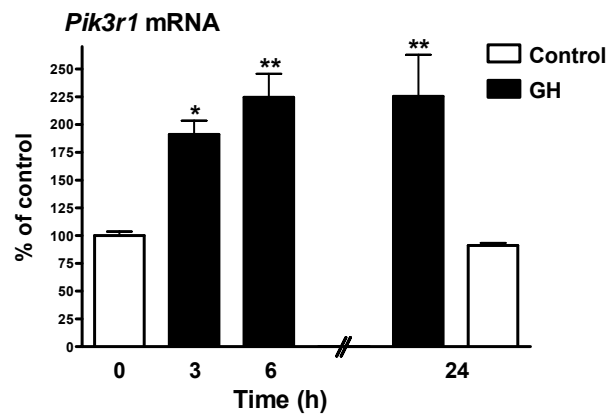


FIG. 5. Insulin-stimulated IRS-1-associated PI3K activity in epididymal fat from *lit/lit* and *lit/+* mice (5A), bGH mice and their wild-type littermates (5B), and wild-type mice treated with rrGH (1 μ g/g twice daily) or vehicle for 3 days (5C), was determined as described in Research Design and Methods, analyzing individually (unpooled samples) 4-7 mice/group. Densitometry values are expressed as means \pm SEM in arbitrary units. PI-3P phosphatidylinositol-3,4,5. * $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$. WT=wild-type.

Figure 5A

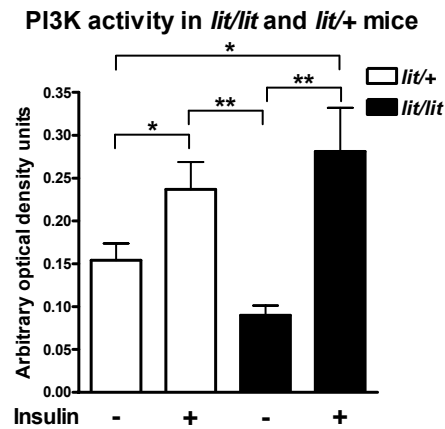


Figure 5B

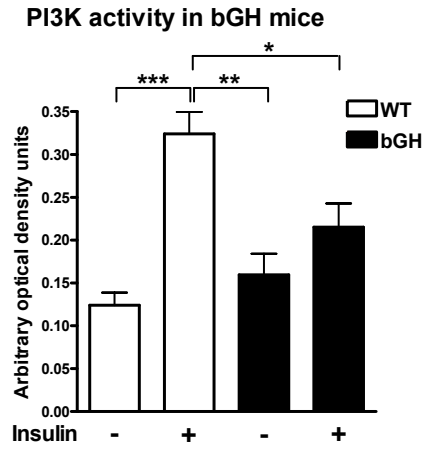


Figure 5C

PI3K activity in wild-type mice

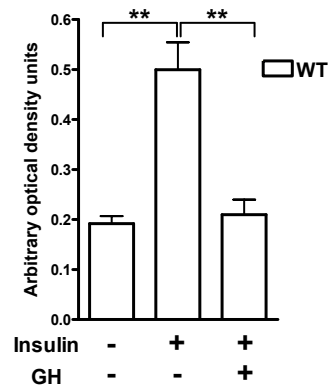


FIG. 6. Regulation of free p85 α protein by GH action in vitro and in vivo. p110-p85 α dimers were immunoprecipitated with anti-p110 α and anti-p110 β antibodies, and the remaining p85 α in the supernatant was analyzed by Western blot. A: 3T3-F442A adipocytes treated with GH. Cells differentiated as described in Methods and Fig. 4 were incubated for 24 h with or without rrGH, 500 ng/ml (n=4-5 culture dishes/group). B: Perirenal fat from bGH mice and their wild-type littermates (n=6-9 mice/group). C: Epididymal fat from lit/+ and lit/lit mice (n=5-6 mice/group). Values in A, B, and C are means \pm SEM expressed in percent from 3 independent experiments done with protein pools. Representative pictures are shown in the upper panels. ***P \leq 0.001. WT=wild-type.

Figure 6 A

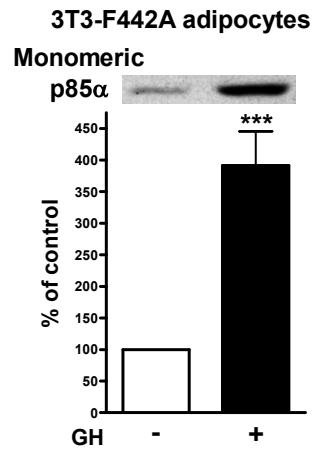


Figure 6 B

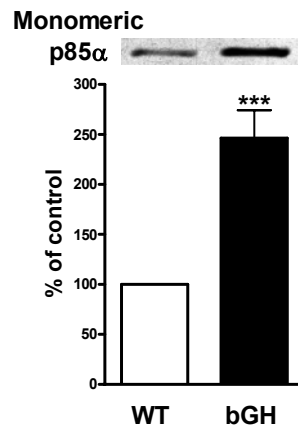


Figure 6 C

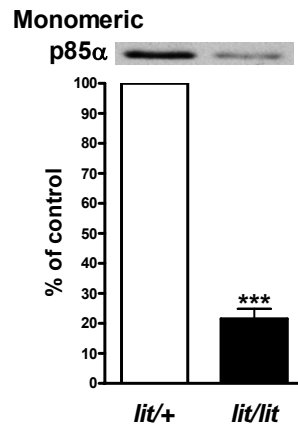


FIG. 7. Schematic representation of one proposed model illustrating modulatory effects of GH on insulin action through regulation of p85 α expression in WAT. p85 α has been extensively studied and shown to reciprocally regulate PI3K signaling (16; 18; 19; 27; 50). Increased levels of GH lead to increased expression of p85 α , decreasing insulin-stimulated IRS-1-associated PI3K activity. The latter is a sine qua non of insulin resistance and may also lead to decreased lipid deposition and adiponectin secretion. GH deficiency leads to a decline in p85 α expression, strong insulin-stimulated IRS-1-associated PI3K activity, increased insulin sensitivity (decreased insulin resistance), and may also lead to increased lipid deposition and enhanced adiponectin secretion. Thick arrows indicate either increase (continuous) or decrease (dashed).

Figure 7

