CIRCULATING LEVELS OF IRISIN IN OBESE NON DIABETIC PATIENTS AND IN LMNA-MUTATED PARTIAL LIPODYSTROPHIES

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INTRODUCTION Irisin is a myokine, which displays a day-night rhythm, is correlated with lean body mass, and increases after exercise in healthy young individuals, despite an association with major adverse cardiovascular events and polycystic ovary disease (Mantzoros 2014). Increased skeletal muscle volume has been reported in women with familial partial lipodystrophies (FPLD) (Ji JCEM 2014). **Our aim was to to determine whether irisin could be a marker of FPLD, which is characterized by a decreased fat mass and an increased lean mass** (Clin.gov2009-AO-1169-48/PHRC 2009_09/094).

METHODS AND PATIENTS

Circulating irisin levels (EIA Phoenix) were measured in :

- 20 LMNA-related FPLD,
- 19 healthy normal-weighed (H) and
- 13 obese non-diabetic (OND) patients

And correlated with:

- body composition (assessed with DEXA and MRI),
- metabolic parameterd (fasting blood glucose (FBG),
- insulin, A1c, lipid, transaminases, leptin) and
- inflammatory markers (leukocytes CD4, CD8, CRP)

Values were expressed as median IQR and were compared wih the non-parametric Kruskal–Wallis test (Statview). Correlations were studied by the non-parametric Spearman correlation test. The Wilcoxon non-parametric test was used to compare biological data between H, FPLD, and OND.

RESULTS Irisin median differed significantly between the 3 groups (p:0.0076), was higher in OND (p: 0.0099) and FPLD (p: 0.047) than in H groups, without any difference between FPLD and OND and was similar between male and female.

Irisin was not correlated with leptin or inflammatory markers. Leptinemia was higher in OND compared to H and FPLD (p<0.0001), without difference between these 2 groups. Irisin/leptin ratio, a biomarker of lean/fat mass, was lower in OND (21(13-32)) than in FPLD (166 (71-214)) or control (164(128-222)) groups (p<0.0001 without difference between FPLD and H.

	HC(1)	$[Q_1, Q_3]$	OND (2)	[Q ₁ , Q ₃]	FPLD (3	[Q ₁ , Q ₃]	p ₁₊₂₊₃ *	P _{1/2} *	P _{1/3} *	p _{2/3} *
Number (n)	19		13		20		8	s		
Age (years)	37	[23-55]	51	[21-56]	45	[33-58.5]	0.22		_ F	100
Weight (kg)	69	[55-76.8]	100.4	[94-104]	67.3	[55.6-80.75]	< 0.0001	<0.0001	1.000	<0.0001
BMI (kg/m²)	22.3	[21-24.2]	39	[36.8-41]	25.6	[21.97-28.5]	< 0.0001	<0.0001	0.1	<0.0001
Fasting blood glucose (g/l)	0.86	[0.83-0.94]	0.92	[0.83-0.99]	1.06	[0.89-1.51]	0.0084	0.87	0.009	0.19
Fasting blood insulin (g/l)	4.5	[3.1-5.8]	7.3	[4.5-10.55]	9.3	[6.4-18.4]	0.001	0.07	0.001	0.84
Hemoglobin A1c (%)	5	[4.9-5.6]	5.8	[5.4-6.2]	6.15	[5.6-7]	< 0.0001	0.0033	<0.0001	0.45
Transaminases (UI/L)		30 30		80 000		10 100		2		
SGOT	22	[19-25]	20	[19-25]	32	[23.5-39]	0.0059	1.000	0.02	0.03
SGPT	17	[14-25]	20	[19-27]	29	[22.5-52]	0.004	0.089	0.009	0.33
Lipids (g)/I								()		
Total cholesterol	1.95	[1.8-2.12]	1.88	[1.75-2.13]	1.76	[1.59-2.12]	0.34			15
Triglycerides	0.88	[0.62-1.16]	1.31	[1.07-1.59]	2.14	[1.08-2.66]	0.0015	0.05	0.004	0.23
Leptin (ng/ml)	4.6	[4.1-10.7]	49.6	[31.9-67.6]	6.8	[4.15-11.95]	< 0.0001	<0.0001	1.000	<0.0001
Irisin (ng/ml)	804	[732-876]	934	[872-1046]	940	[810-1066]	0.0076	0.006		
CRP (mg/l)	0	0	7	[3-15]	3	[0.0-3.5]	< 0.0001	< 0.0001	0.0009	0.11

Tab 1: Median distribution of metabolic and inflammatory parameters in healthy controls, obese non diabetic and FPLD patients.

9700	HC (1)	$[Q_1, Q_3]$	OND (2)	$[Q_1, Q_3]$	FPLD (3)	$[Q_1, Q_3]$	p ₁₊₂₊₃ [‡]	p _{1/2} *	p _{1/3} *	p _{2/3} *
Fat mass (DEXA)			8 5					110	704 5	- 12
Total fat mass (%)	22.7	[20-30.7]	45.4	[43.9-48.9]	20.75	[16.75-28.15]	<0.0001	<0.0001	0.99	<0.0001
Fat mass/height ² (g/m ²)	0.52	[0.43-0.87]	1.78	[1.64-2.02]	0.58	[0.34-0.65]	<0.0001	<0.0001	1.000	<0.0001
Lean mass (DEXA)										
Lean Mass (%)	73.38	[66-76.4]	52.4	[48.75-54.25]	75.66	[68.55-79.88]	<0.0001	<0.0001	0.99	<0.0001
Lean mass/height ² (g/m ²)	1.64	[1.5-1.8]	2.06	[1.91-2.2]	1.8	[1.7-2.13]	<0.0001	<0.0001	0.08	0.07
Total fat mass/ total lean mass	0.31	[0.26-0.5]	0.87	[0.81-1]	0.29	[0.21-0.44]	<0.0001	<0.0001	1.000	<0.0001
Abdominal fat mass (MRI)										
Total abdominal fat mass (cc)	276	[166-374]	833	[711.5-937.5]	216.5	[153.5-310.5]	<0.0001	<0.0001	1.000	<0.0001
Intra abdominal fat mass (cc)	50	[21-92]	182.5	[122.5-336]	124.5	[65-164.5]	0.0002	0.0006	0.03	0.13
Intra abdominal fat mass/ Total abdominal fat mass (g/m²)/ (cc)	0.2	[0.11-0.3]	0.25	[0.15-0.33]	0.57	[0.46-0.7]	0.0001	0.74	0.0006	0.0075
Lean mass/height ² / intra abdominal fat mass (g/m ²)/ (cc)	0.03	[0.02-0.07]	0.01	[0.01-0.02]	0.02	[0.01-0.02]	0.0005	0.0015	0.04	0.1
Lean mass/height ² / total abdominal fat mass (g/m ²)/ (cc)	0.006	[0.004-0.010]	0.002	[0.002-0.003]	0.009	[0.006-0.012]	<0.0001	<0.0001	0.36	<0.0001

<u>Tab 2</u>: Median distribution of anthropometrical parameters in healthy controls, obese non diabetic and FPLD patients.

	r	р
Weight (kg)	+ 0,386	0,005
BMI (kg/m²)	+ 0,453	0,0008
Fasting blood glucose (g/l)	+ 0,330	0,017
Fasting blood insulin (g/l)	+ 0,421	0,002
Hemoglobin A1c (%)	+ 0,349	0,012
SGPT (UI/L)	+ 0,333	0,016
Total cholesterol (g/l)	+ 0,397	0,0039
Trialycerides (g/l)	+ 0,494	0,0002
Lean mass/height² (g/m²) - DEXA	+ 0,517	< 0,0001
IA fat mass (cc) - MRI	+ 0,349	0,017
IA fat mass/TA fat mass - MRI	+ 0.39	0.0069

Tab 3: Correlation between irisin and metabolic, inflammatory and anthropometrical markers IA = intra-abdominal, TA= total abdominal

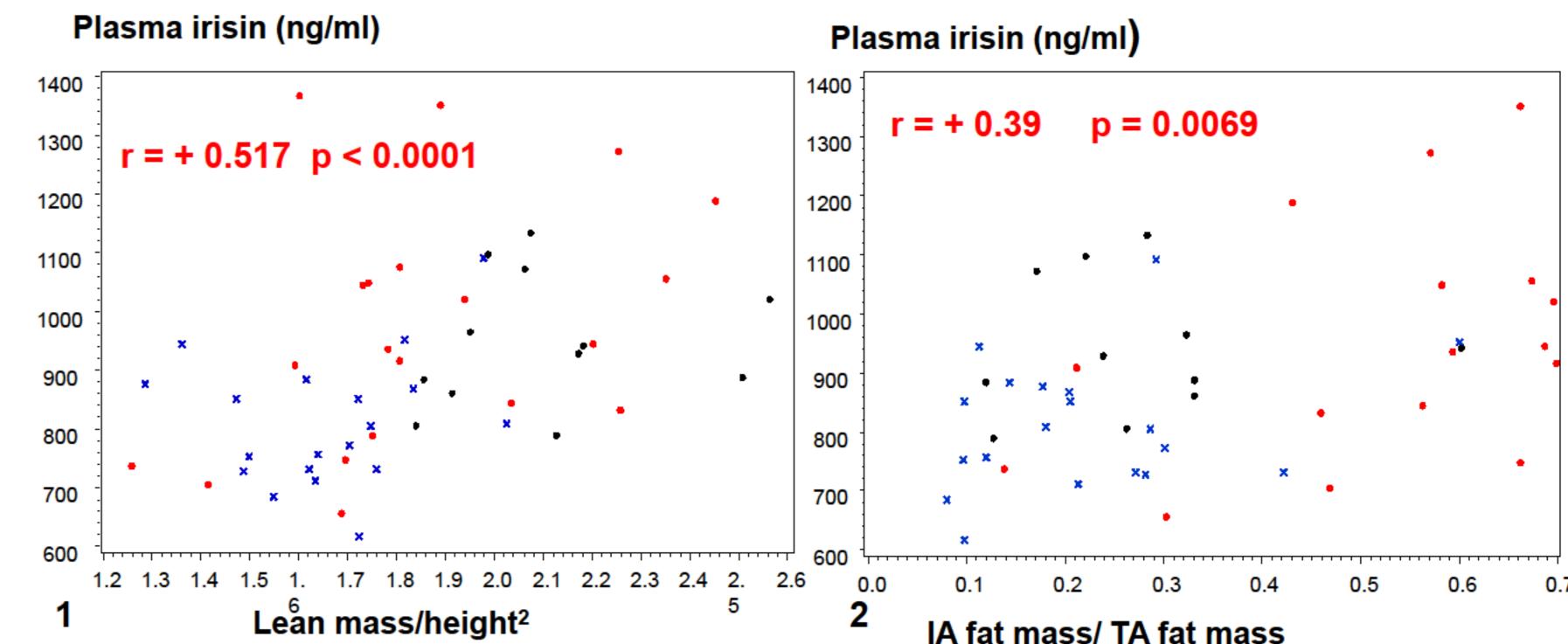


Fig 1: Correlation of irisin and LEFT lean mass/height² in the whole population and RIGHT IA / TA fat mass, HC, OND, FPLD

CONCLUSION Compared to control, FPLD is characterized by high irisinemia and similar leptinemia, OND by both high leptinemia and irisinemia. Irisin is increased in diseases characterized by higher lean mass whatever the amount of fat mass.







