

# **miRNA, dicer and adipose tissue in HIV: novel pathways of fat regulation and organ specific cross-talk in HIV**



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Massachusetts General Hospital**

**NIH Workshop on Obesity and Fat Metabolism  
in HIV-infected Individuals  
May 23, 2018**



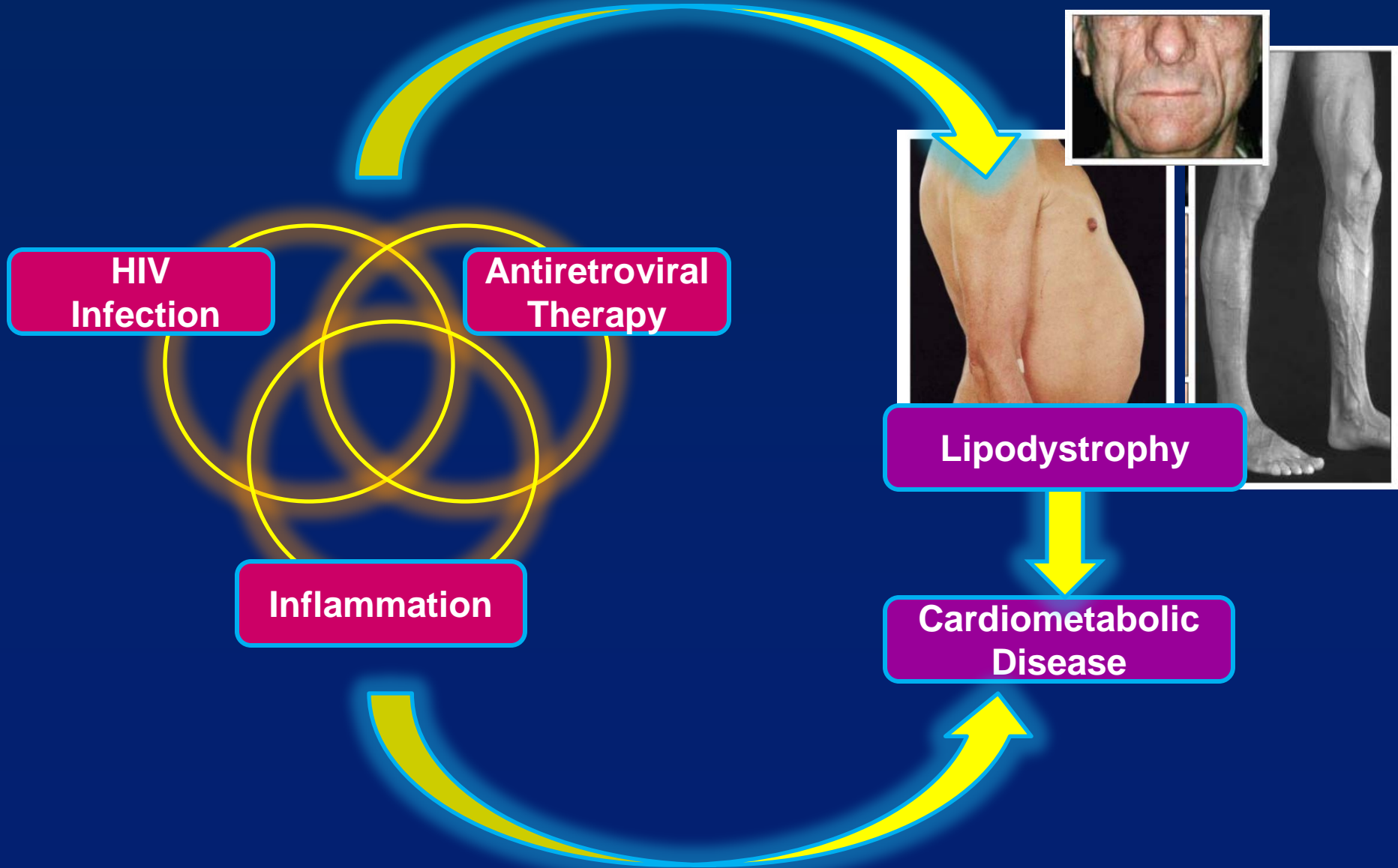


# Financial Disclosures

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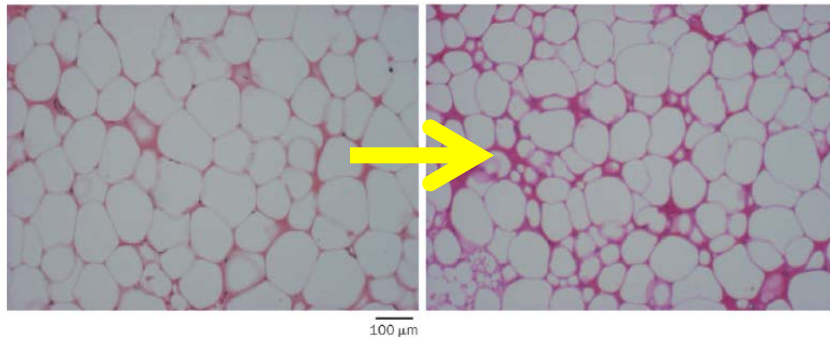
SKG has received research funding from Gilead, KOWA, and Theratechnologies and served as a consultant for Navidea Inc. and Theratechnologies, all unrelated to this work.

# HIV patients are at increased risk for metabolic disease secondary to adipose dysfunction



# Mechanisms of adipose redistribution and dysfunction in HIV

**Viral Effects**  
(↓ DICER, ↓ PPAR $\gamma$ )

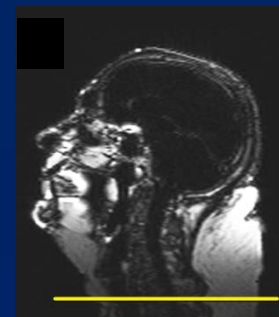


**Functional SC Fat**

**Dysfunctional SC Fat**

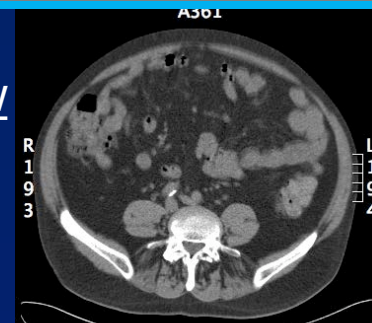
**ART Effects**  
(↓ SREBP ↓ Mito Fx)

?Compensatory



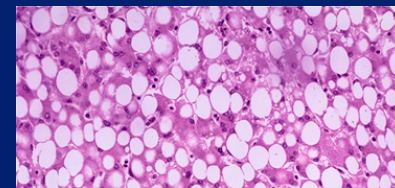
**Protective Metabolic Impact:**  
Brown fat like

Overflow



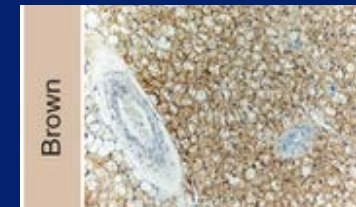
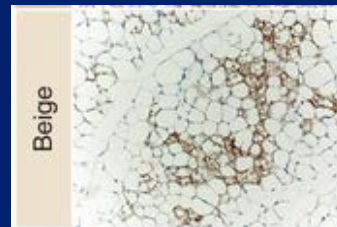
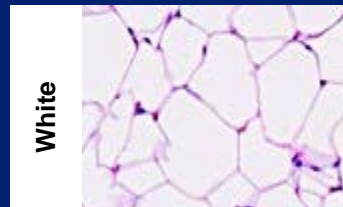
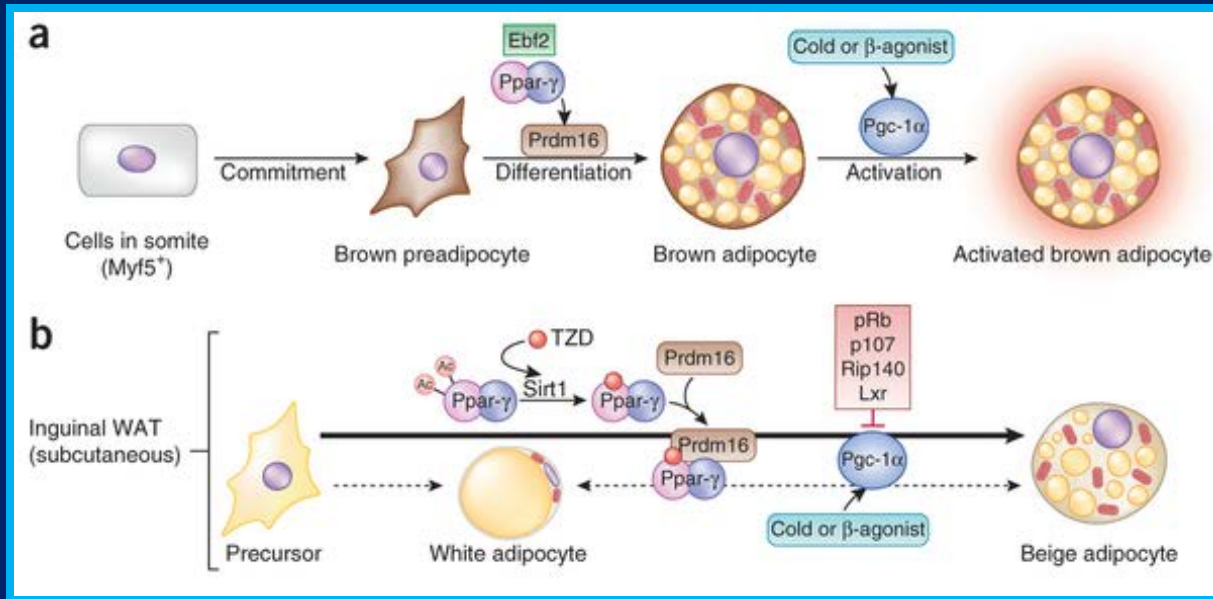
**Adverse Metabolic Impact:**  
↑ VAT

Overflow



**Adverse Metabolic Impact:**  
↑ NAFLD, IMCL,  
cardiac steatosis

# Brown or beige fat differentiation may be protective of metabolic disease



Reduced UCP1 Expression  
Single Lipid Droplet  
Few Mitochondria

Increased UCP1 Expression  
Multiple Lipid Droplets  
Many Mitochondria

Metabolic Benefit

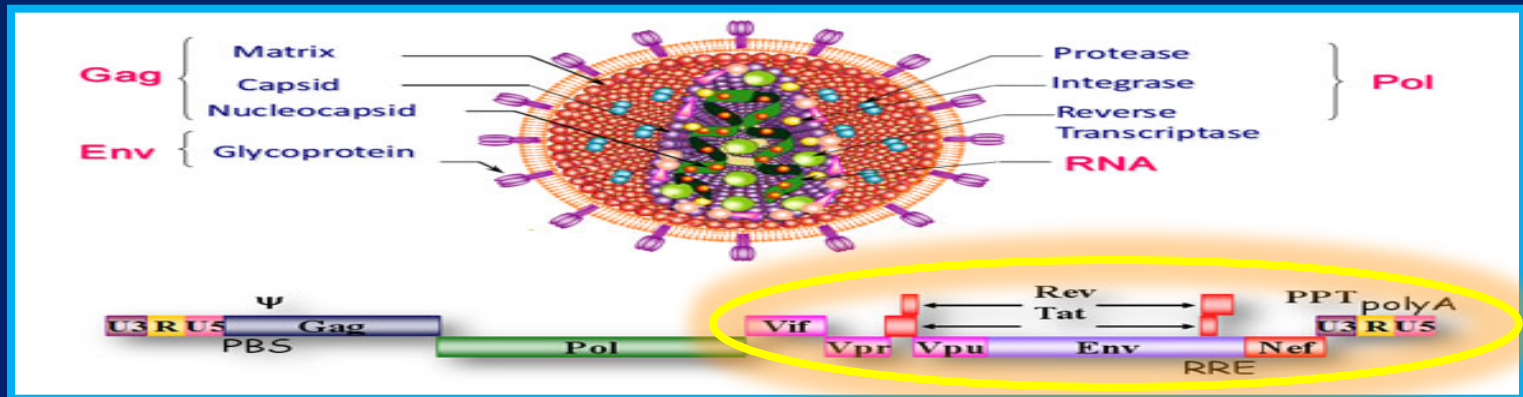
# Mechanisms of Adipose Tissue Dysfunction

- Drug Effects

Protease Inhibitors inhibit SREBP and PPAR $\gamma$  in SC fat

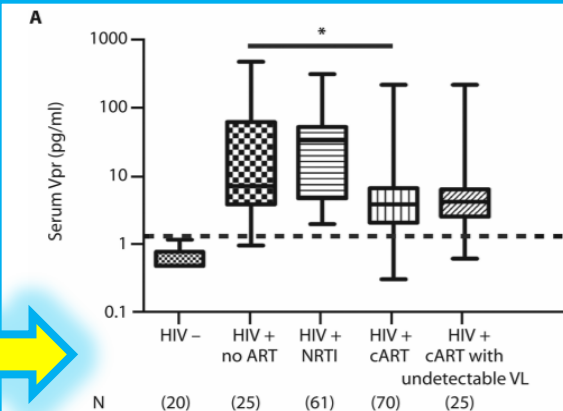
Nucleoside Reverse Transcriptase Inhibitors inhibit mitochondrial DNA in SC fat

- Viral Effects



Vpr circulated in the blood of most individuals with HIV, including those on antiretroviral therapy (ART) with undetectable viral load.

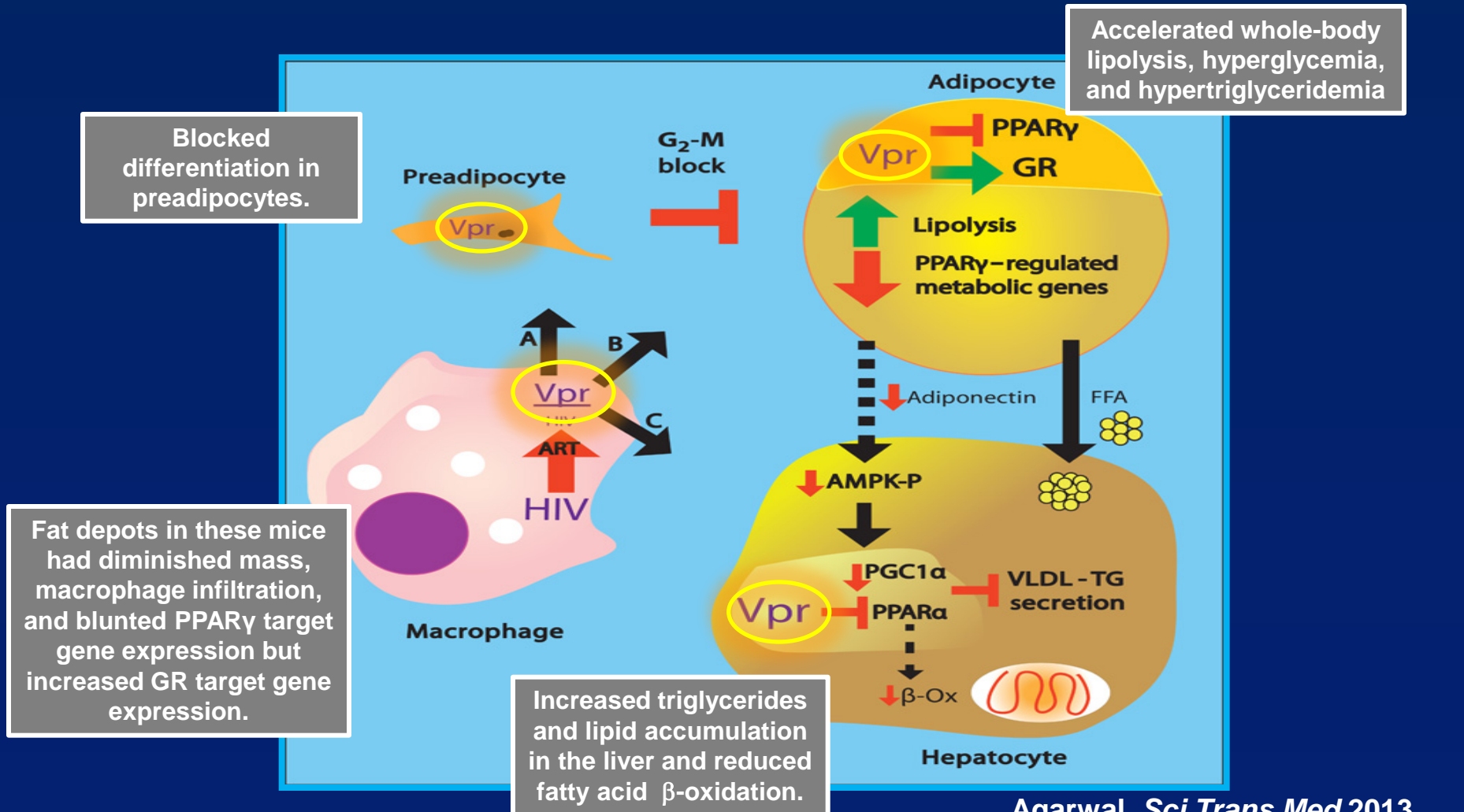
(Agarwal, 2013)





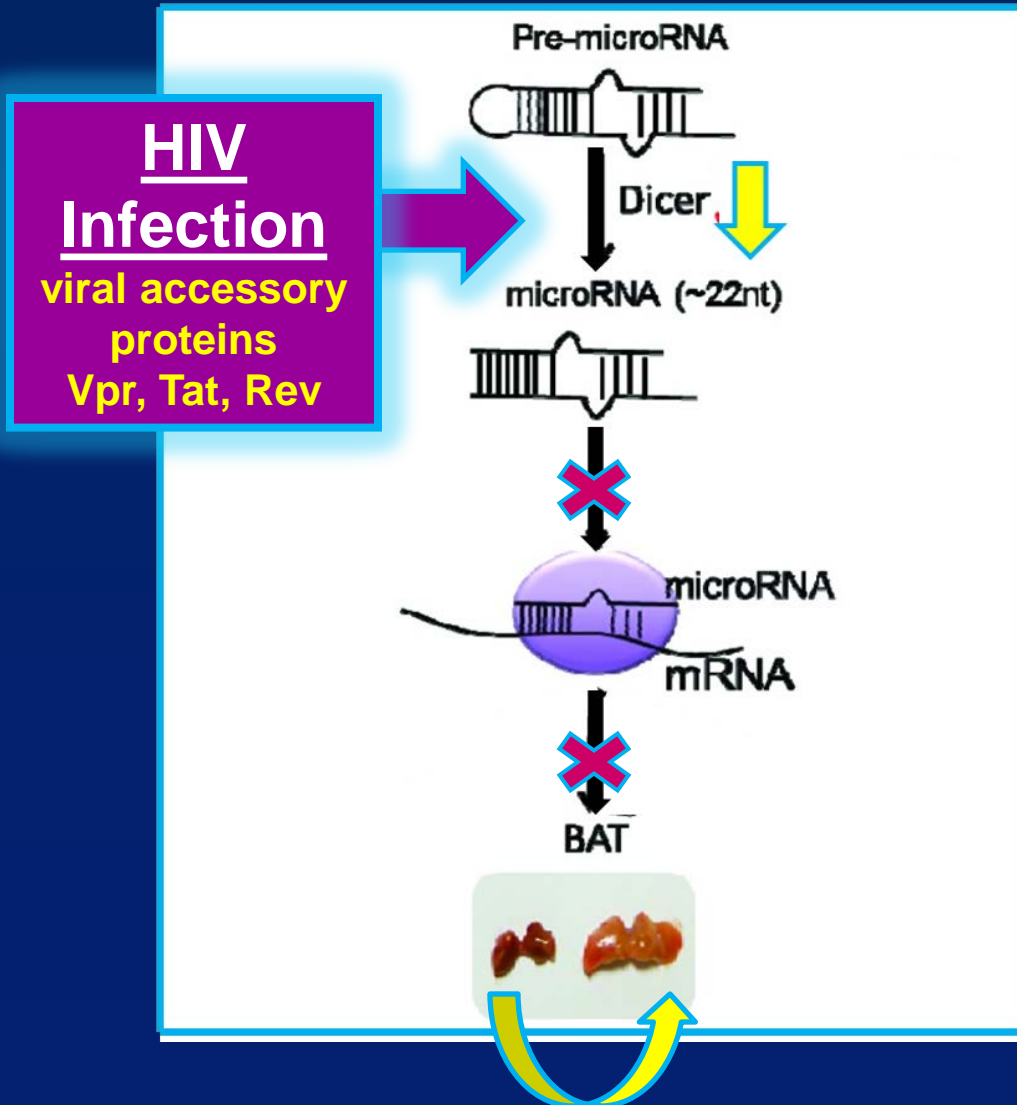
# HIV VPR mediated effects of adipose dysfunction through the PPAR $\gamma$ and the Glucocorticoid Receptor

In mouse models expressing the Vpr transgene in adipose tissues and liver or infused with synthetic Vpr:



Fat depots in these mice had diminished mass, macrophage infiltration, and blunted PPAR $\gamma$  target gene expression but increased GR target gene expression.

# The endoribonuclease *Dicer* has been linked to modulation of brown and white adipocyte differentiation



- *Dicer* is a cytoplasmic type III RNase that cleaves pre-microRNAs into mature microRNAs.
- Downregulation of *Dicer* adversely affects multiple microRNAs that maintain adipocyte identity and play important roles in BAT and WAT differentiation.
- HIV has evolved to suppress *Dicer* expression and activity via viral accessory proteins (**Vpr, Tat, and Rev**) as a mechanism to enhance infectivity.



# Multiple HIV viral accessory proteins suppress Dicer in order to promote HIV infectivity

**Vpr**

→ Triggers depletion of *Dicer* through a ubiquitin ligase complex which enhances macrophage infection (Klockow, 2013).

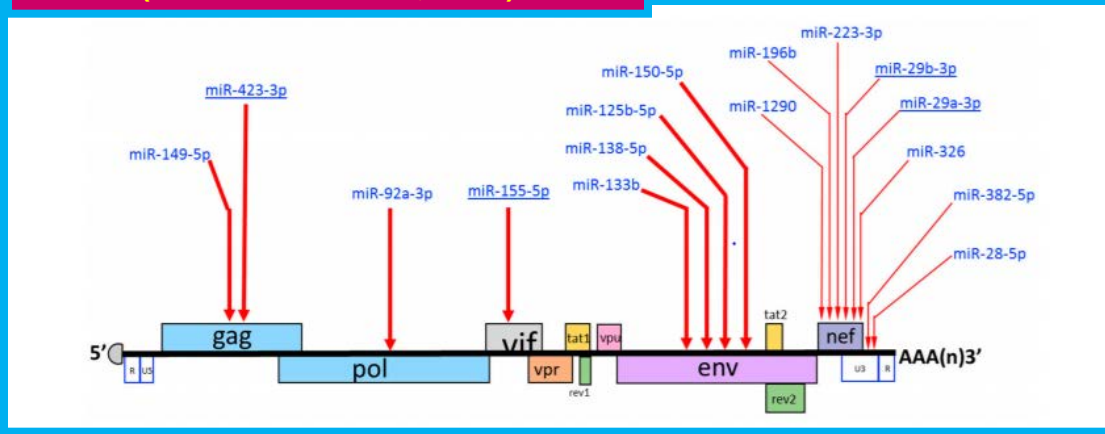
**Tat**

→ Evolved as a suppressor of RNA silencing by reducing *Dicer's* ability to process dsRNA into siRNA (Bennasser, 2005).

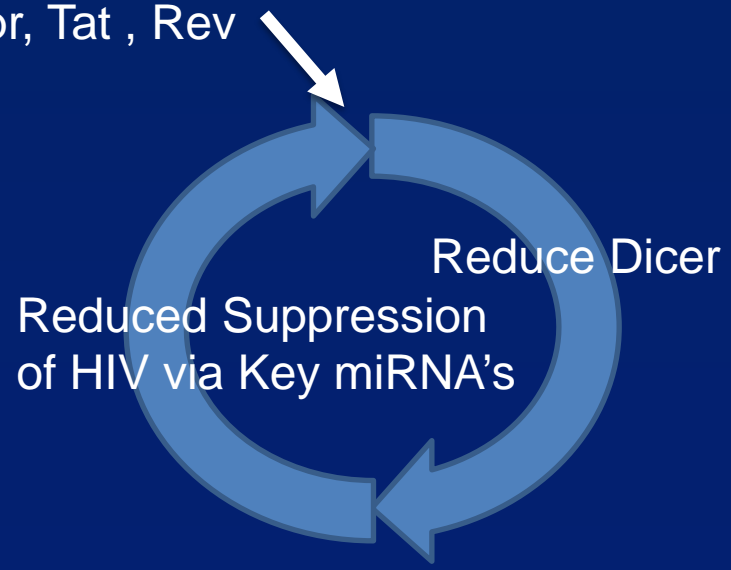
**Rev**

→ Suppresses *Dicer* dependent RNAi processing involving the arginine rich motif (Ponia, 2013).

Binding sites for miRNAs which may target suppression of HIV replication (Balasubramanian, 2018)



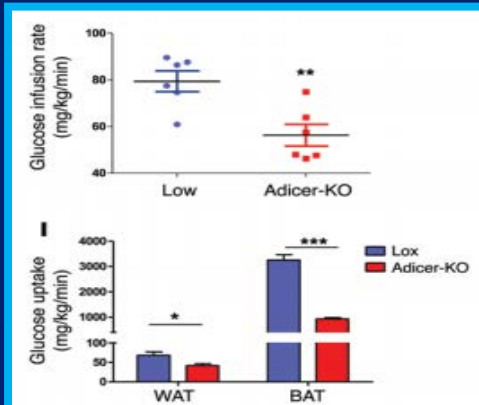
↑ Vpr, Tat, Rev



# Adipose specific Dicer-KO mice develop a lipodystrophy phenotype – resembling HIV lipodystrophy



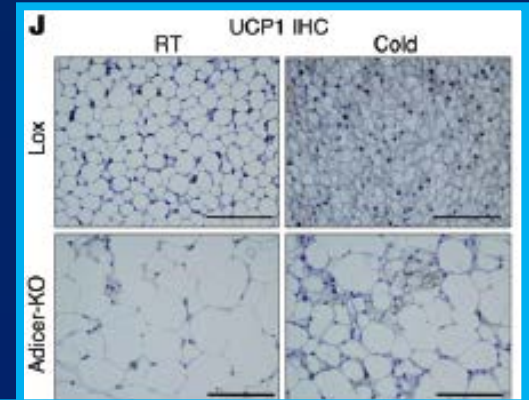
**Loss of SC WAT and Increase DC Fat**



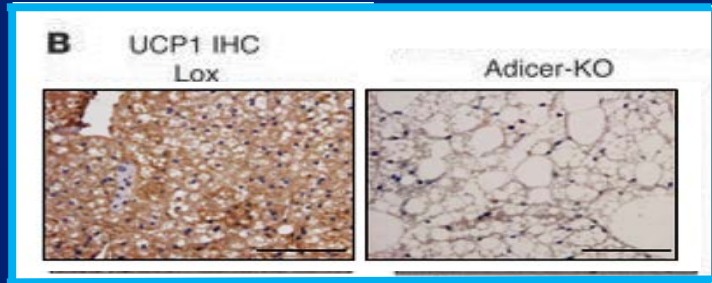
**Severe IR, ↓ Gluc uptake in BAT and ↓ HG Suppression**



**↓ miRNA, eg 365**



**Dysfunctional WAT: ↓ Beige Adipocytes on Cold Exposure; ↑ MΦ**



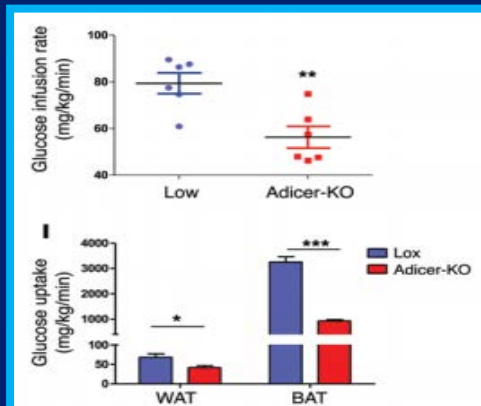
**↓ Mitochondria and UCP1 in BAT**

Adapted from Mori et al. JCI 2014

# Adipose specific Dicer-KO Mice develop a lipodystrophy phenotype – resembling HIV lipodystrophy

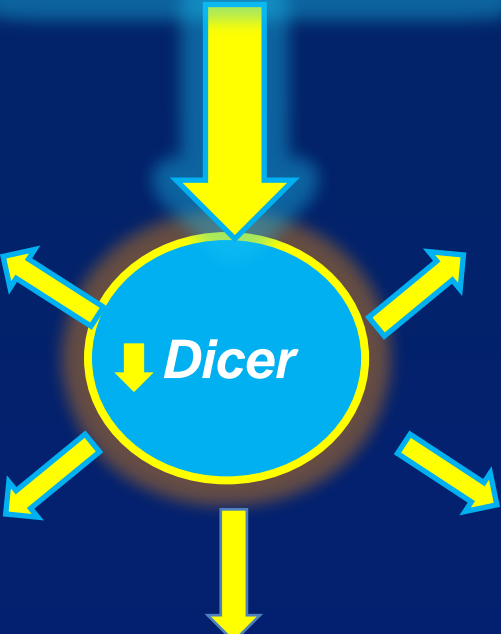


**Loss of SC WAT and Increase DC Fat**



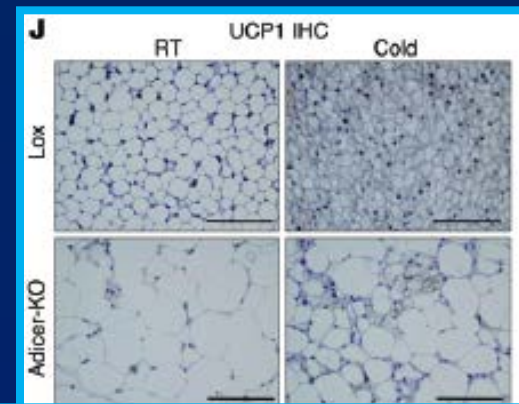
**Severe IR,  
↓ Gluc uptake in BAT  
and ↓ HG Suppression**

**HIV Infection** ↓  
viral accessory proteins  
Vpr, Tat, Rev

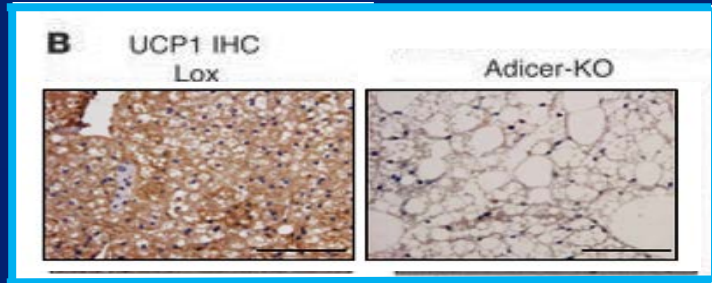


↓ **miRNA, eg 365**

Adapted from  
Mori et al. JCI 2014



**Dysfunctional WAT:  
↓ Beige Adipocytes on  
Cold Exposure; ↑ MΦ**

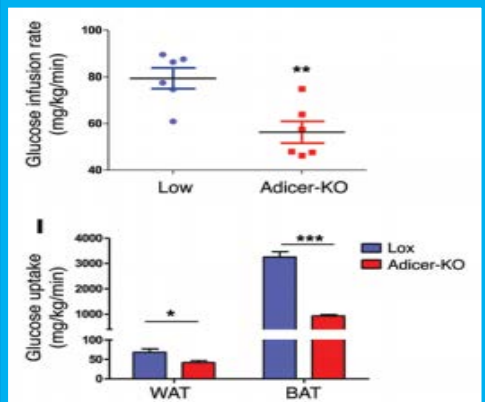


↓ **Mitochondria and  
UCP1 in BAT**

# Adipose specific Dicer-KO mice develop a lipodystrophy phenotype – resembling HIV lipodystrophy



Loss of SC WAT and Increase DC Fat



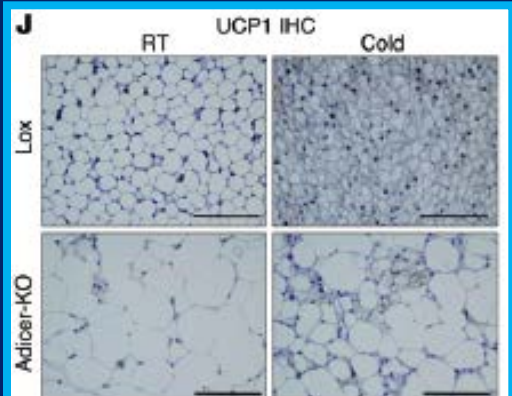
Severe IR,  
↓ Gluc uptake in BAT  
and ↓ HG Suppression

Age ↓  
Caloric Restriction ↑

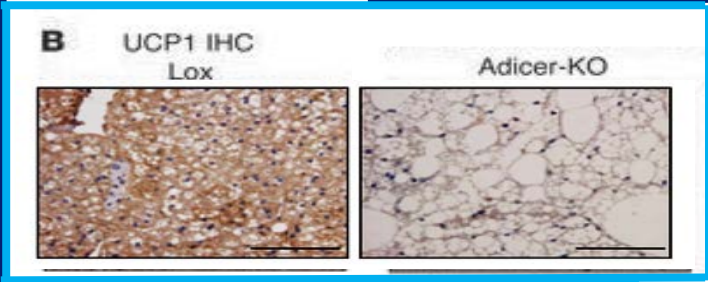


↓ miRNA, eg 365

Adapted from  
Mori et al. JCI 2014



Dysfunctional WAT:  
↓ Beige Adipocytes on  
Cold Exposure; ↑ MΦ



↓ Mitochondria and  
UCP1 in BAT

# Adipose specific dicer-KO mice develop a pronounced aging phenotype

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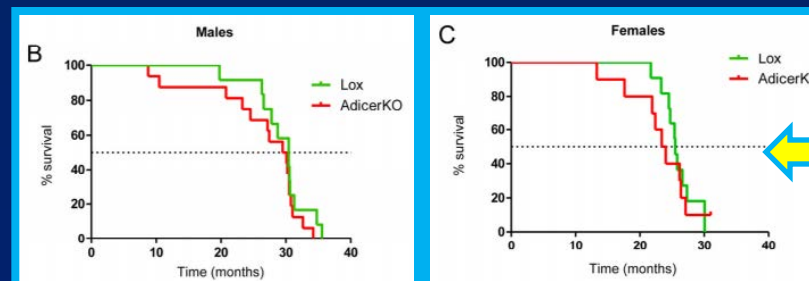
# Adipose specific dicer-KO mice develop a pronounced aging phenotype



Adipocyte Dicer KO mice with more signs of senescence (lipodystrophy, graying, hair loss)

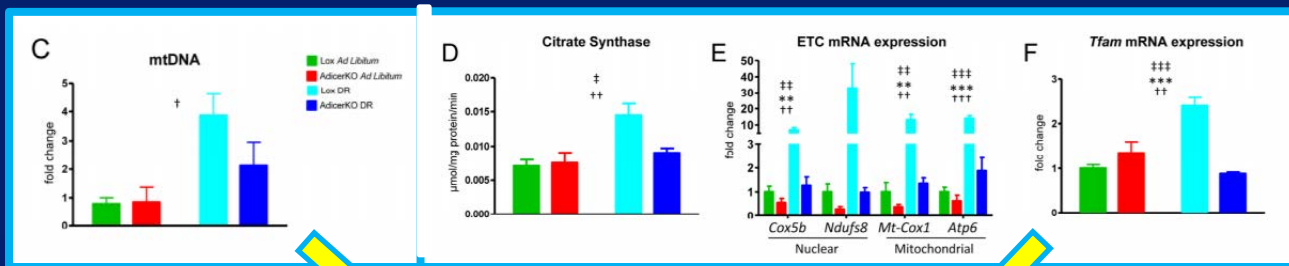
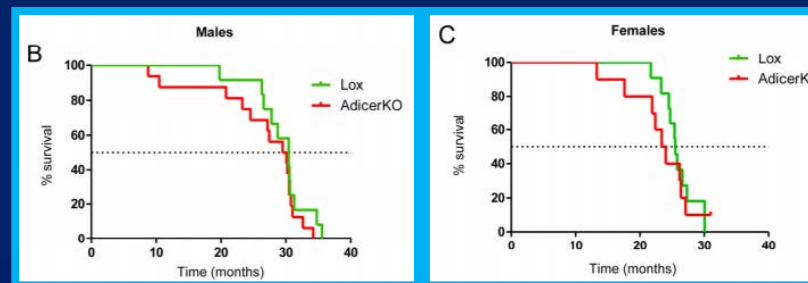


# Adipose specific dicer-KO mice develop a pronounced aging phenotype



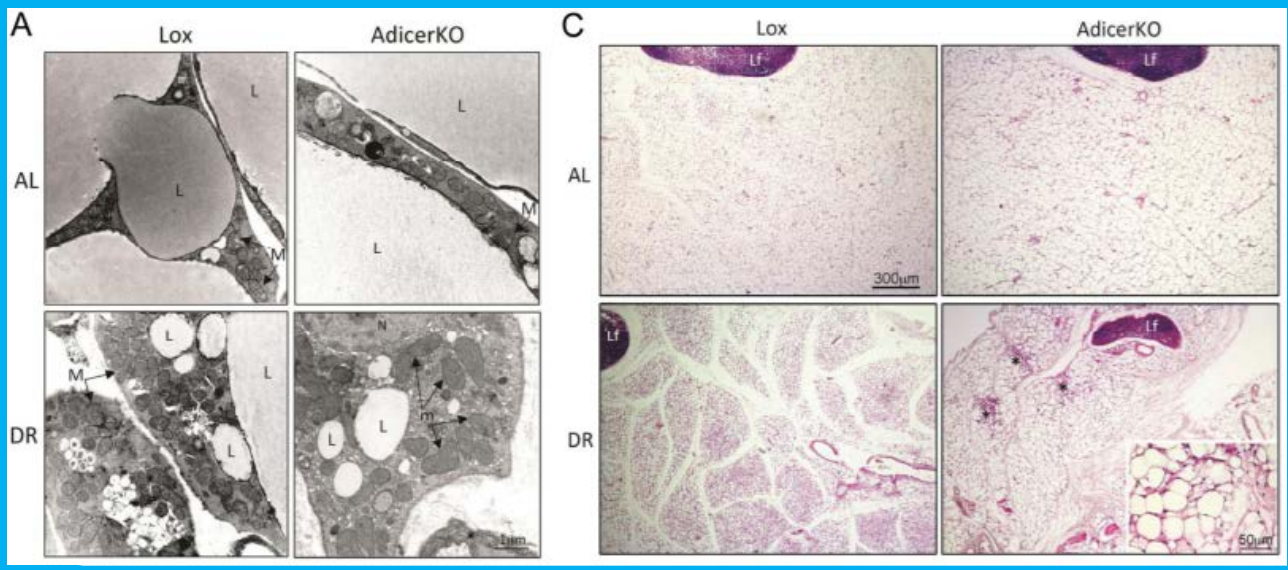
Adipocyte Dicer KO mice with increased premature mortality

# Adipose specific dicer-KO mice develop a pronounced aging phenotype



Adipocyte Dicer KO mice with reduced mitochondrial function and biogenesis.

# Adipose specific dicer-KO Mice are resistant to the metabolic benefits of dietary restriction at the level of the adipose



## Mitochondria Control Mice vs. Adicer KO Mice

<b>Ad Libitum</b>	Less abundant mt in WAT of Adicer KO mice
<b>Dietary Restriction</b>	Healthy looking in controls, Fewer mt with highly irregular shapes and abundant cristae

## Adipocytes Control Mice vs. Adicer KO Mice

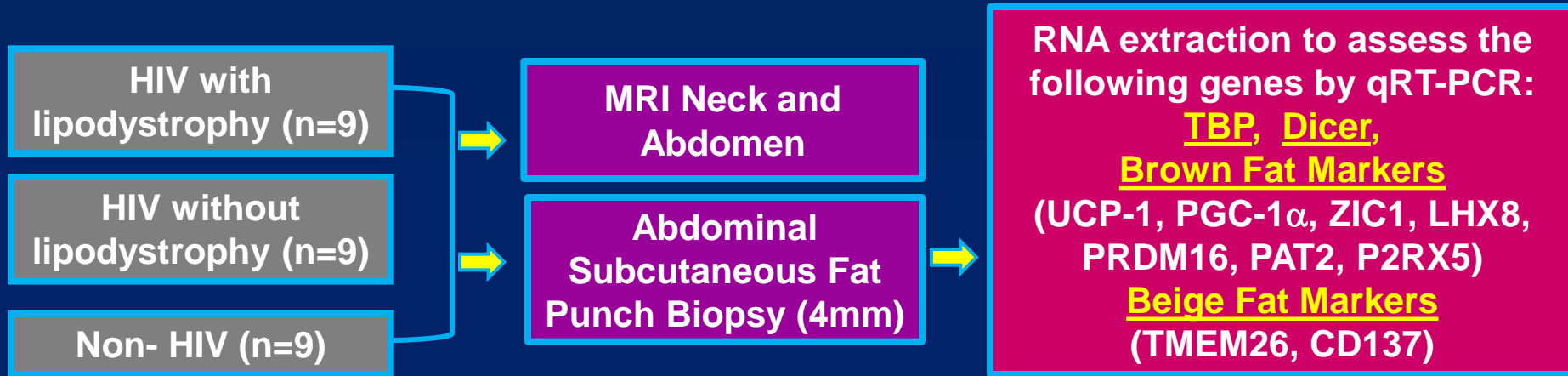
<b>Ad Libitum</b>	Larger adipocytes and more unilocular in Adicer KO mice
<b>Dietary Restriction</b>	More multilocular and filled with cell infiltrate

# Objective and Hypothesis

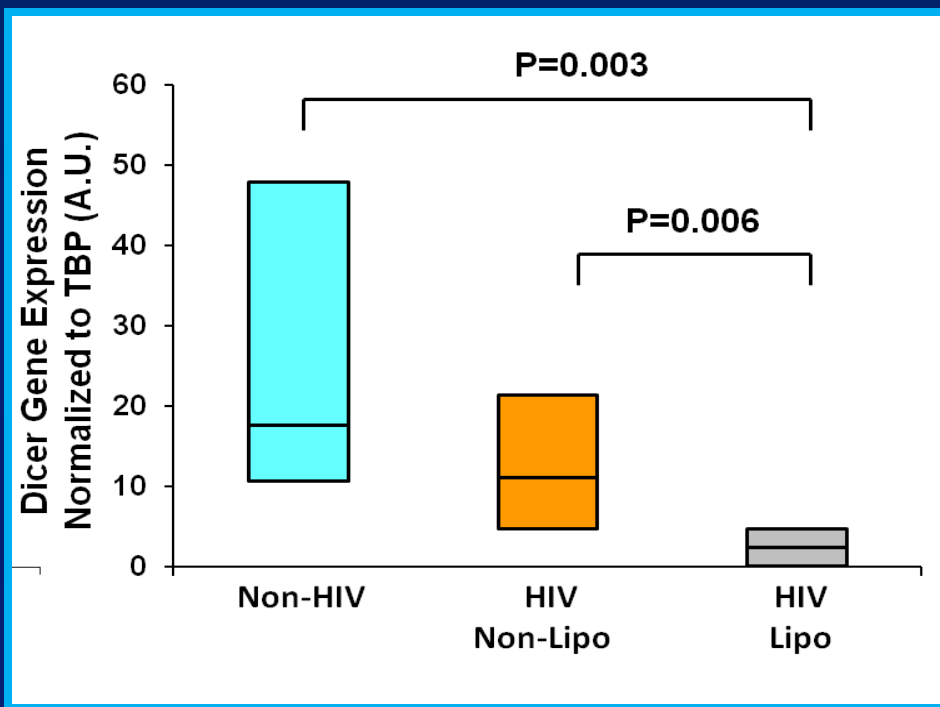
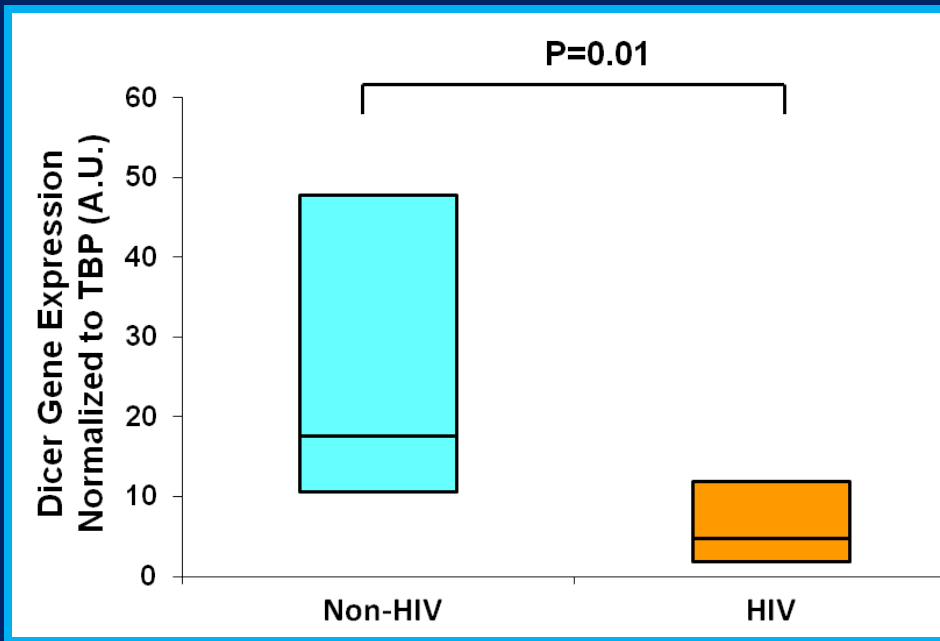
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- We investigated *Dicer*, brown fat and beige fat gene expression in nonlipomatous abdominal subcutaneous (SC) adipose tissue of well-characterized HIV individuals with and without lipodystrophic changes in fat redistribution compared to non-HIV individuals.
- We hypothesized dysfunctional subcutaneous adipose tissue characterized by reduced *Dicer* and related BAT gene expression in HIV subjects with a lipodystrophy phenotype.

# Study Participants and Design



- **Inclusion criteria for all participants:** male gender, age 18-60, BMI 18-35.0 kg/m<sup>2</sup>.
- **Inclusion criteria for HIV participants:** stable ART regimen  $\geq$  12 months (lipodystrophy was determined on clinical exam based on presence or absence of dorsocervical adipose tissue [DCAT] accumulation)
- **Major exclusion criteria for all participants:** history of DM, use of glucocorticoids or GH therapies, cr  $>$ 1.5 mg/dL,



Significant stepwise reduction in *Dicer* expression among Non-HIV, HIV Non-Lipo, and HIV Lipo.



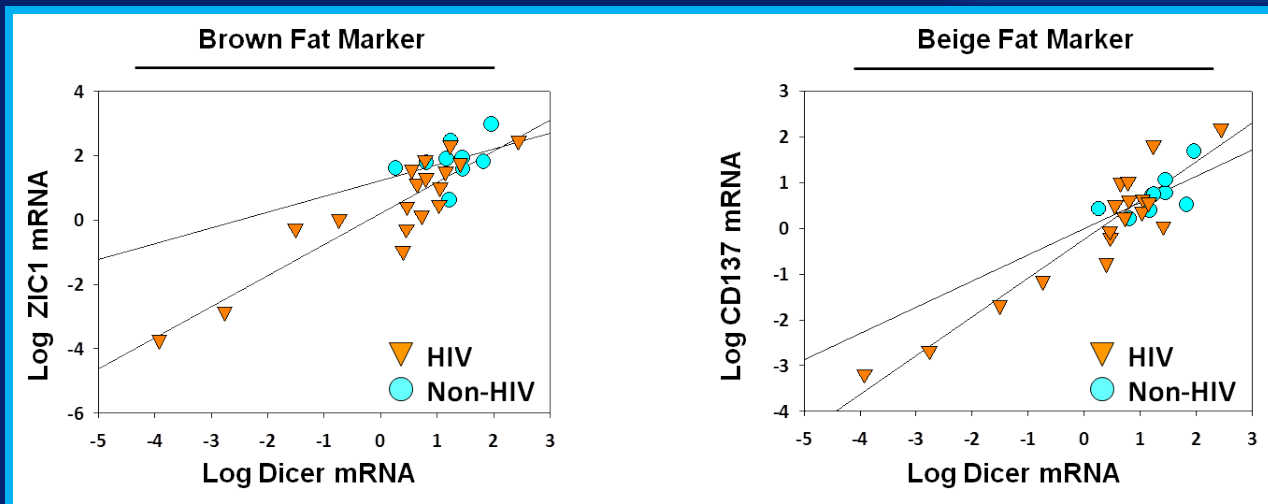
# Individuals with HIV lipodystrophy demonstrate reduced brown and beige fat gene expression in abdominal SC fat

	Non-HIV (n=9)	HIV Non-Lipodystrophic (n=9)	HIV- Lipodystrophic (n=9)	P value HIV Lipo vs. Non-HIV	P value HIV Lipo vs. HIV Non-Lipo
Dicer	17.69 (10.72, 47.91)	11.20 (4.83, 21.45)	2.49 (0.02, 4.88)	<b>0.003</b>	<b>0.006</b>
<b>Brown adipose tissue markers</b>					
UCP1	0.17 (0.08, 0.28)	0.16 (0.07, 1.45)	0.01 (0.00, 0.20)	--	--
PGC1 $\alpha$	31.12 (7.14, 56.02)	11.71 (0.56, 33.12)	0.03 (0.00, 0.14)	<b>0.0006</b>	<b>0.002</b>
ZIC1	64.45 (39.43, 185.94)	37.14 (15.14, 138.59)	1.02 (0.06, 2.78)	<b>0.0006</b>	<b>0.004</b>
LHX8	0.23 (0.08, 0.47)	0.13 (0.06, 0.38)	0.01 (0.00, 0.13)	<b>0.009</b>	<b>0.03</b>
PRDM16	1.57 (0.23, 2.27)	0.51 (0.30, 1.45)	0.02 (0.00, 0.16)	<b>0.002</b>	<b>0.0008</b>
PAT2	0.31 (0.18, 0.49)	0.39 (0.28, 0.94)	0.04 (0.00, 0.27)	<b>0.02</b>	<b>0.008</b>
P2RX5	0.35 (0.17, 1.15)	1.99 (0.20, 4.50)	0.14 (0.00, 0.51)	0.12	<b>0.02</b>
<b>Beige adipose tissue markers</b>					
TMEM26	0.78 (0.50, 1.33)	2.54 (0.79, 3.68)	0.24 (0.01, 0.75)	0.07	<b>0.004</b>
CD137	5.17 (2.53, 8.61)	4.11 (2.13, 37.84)	0.17 (0.01, 2.00)	<b>0.006</b>	<b>0.008</b>

Gene expression values are normalized to TBP, results are expressed as ratios in arbitrary units

# Reduced *Dicer* is associated with decreased brown and beige fat gene expression in abdominal SC fat in HIV

	Non-HIV (n=9)		HIV (n=18)	
	$\rho$	P-Value	$\rho$	P-Value
<b>Brown adipose tissue markers</b>				
UCP1	0.63	0.07	0.48	<b>0.04</b>
PGC1 $\alpha$	0.15	0.70	0.79	<b>0.0001</b>
ZIC1	0.42	0.26	0.86	<b>&lt;0.0001</b>
LHX8	-0.08	0.83	0.67	<b>0.003</b>
PRDM16	0.67	<b>0.05</b>	0.84	<b>&lt;0.0001</b>
PAT2	0.35	0.36	0.79	<b>&lt;0.0001</b>
P2RX5	0.60	0.09	0.74	<b>0.0004</b>
<b>Beige adipose tissue markers</b>				
TMEM26	0.72	<b>0.03</b>	0.72	<b>0.0007</b>
CD137	0.78	<b>0.01</b>	0.82	<b>&lt;0.0001</b>



# HIV-specific parameters are related to *Dicer* and brown and beige fat gene expression in abdominal SC fat in HIV

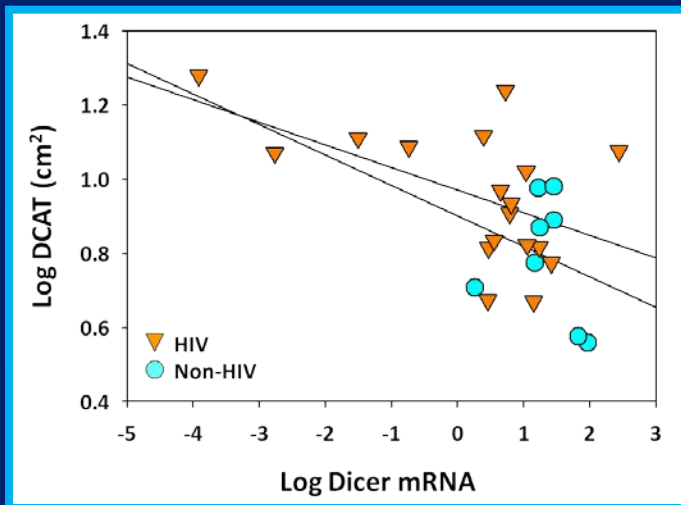
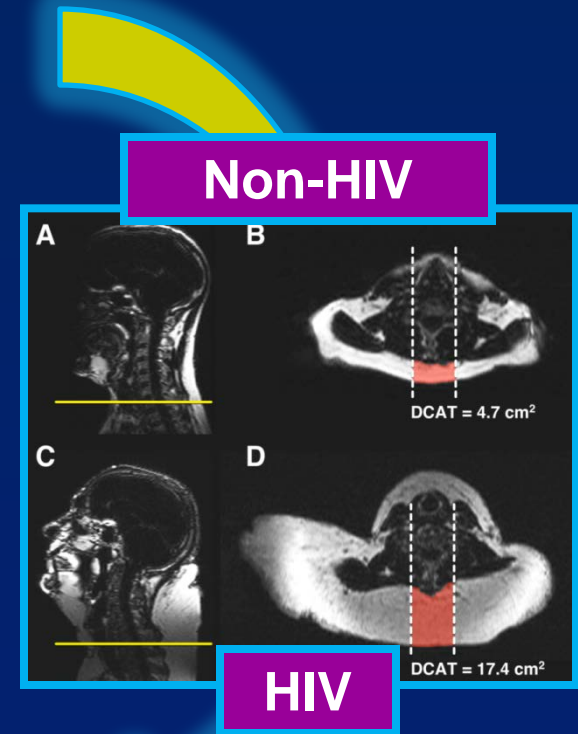
	Duration HIV		CD4 Count		CD8 Count	
	r	P-Value	r	P-Value	r	P-Value
Dicer	-0.44	0.07	<b>0.55</b>	<b>0.02</b>	0.42	0.08
DCAT	0.41	0.09	-0.46	0.06	-0.36	0.14
miRNA-365	-0.42	0.08	-0.0006	0.99	0.16	0.53
<b>Brown adipose tissue markers</b>						
UCP1	-0.34	0.17	0.21	0.41	0.13	0.62
PGC1 $\alpha$	-0.47	<b>0.05</b>	0.57	<b>0.01</b>	0.58	<b>0.01</b>
ZIC1	-0.40	0.10	0.49	<b>0.04</b>	0.47	<b>0.05</b>
LHX8	-0.25	0.32	0.44	0.07	0.46	0.06
PRDM16	-0.36	0.14	0.61	<b>0.01</b>	0.50	<b>0.04</b>
PAT2	-0.38	0.12	0.59	<b>0.01</b>	0.48	<b>0.04</b>
P2RX5	-0.57	<b>0.01</b>	0.61	<b>0.01</b>	0.45	0.06
<b>Beige adipose tissue markers</b>						
TMEM26	-0.52	<b>0.03</b>	0.65	<b>0.004</b>	0.41	0.09
CD137	-0.51	<b>0.03</b>	0.53	<b>0.02</b>	0.42	0.08
<b>Other metabolic markers</b>						
DIO2	-0.55	<b>0.02</b>	0.51	<b>0.03</b>	0.43	0.08
Leptin	-0.42	<b>0.08</b>	0.49	<b>0.04</b>	0.50	<b>0.04</b>
HSP60	-0.62	<b>0.006</b>	0.50	<b>0.04</b>	0.48	<b>0.05</b>

# ART-specific parameters are related to reduced *Dicer* and brown and beige fat gene expression in SC fat in HIV

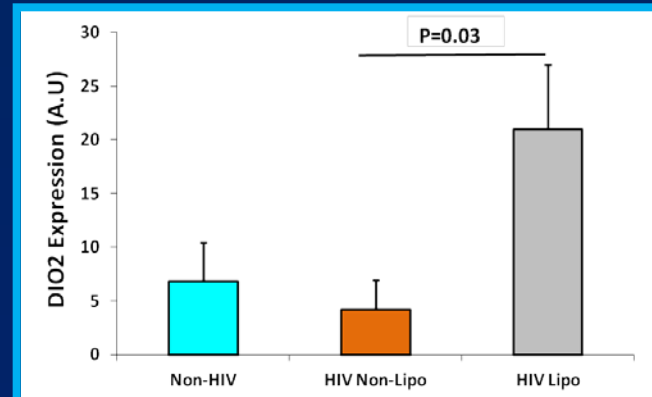
	Duration ART use		Duration NRTI use		Duration NNRTI use		Duration PI use	
	r	P-Value	r	P-Value	r	P-Value	r	P-Value
Dicer	-0.70	<b>0.001</b>	-0.37	0.21	-0.12	0.85	-0.71	<b>0.03</b>
DCAT	0.59	<b>0.009</b>	0.44	0.13	-0.17	0.79	0.80	<b>0.009</b>
miRNA-365	-0.44	0.07	-0.49	0.09	0.69	0.19	-0.49	0.18
<b>Brown adipose tissue markers</b>								
UCP1	-0.49	<b>0.04</b>	-0.19	0.53	-0.83	0.08	-0.15	0.70
PGC1 $\alpha$	-0.61	<b>0.007</b>	-0.31	0.31	-0.20	0.74	-0.73	<b>0.02</b>
ZIC1	-0.65	<b>0.004</b>	-0.32	0.28	-0.11	0.86	-0.85	<b>0.004</b>
LHX8	-0.75	<b>0.0003</b>	-0.56	<b>0.05</b>	-0.06	0.93	-0.70	<b>0.04</b>
PRDM16	-0.67	<b>0.003</b>	-0.29	0.34	-0.41	0.49	-0.74	<b>0.02</b>
PAT2	-0.75	<b>0.0004</b>	-0.44	0.13	-0.06	0.93	-0.74	<b>0.02</b>
P2RX5	-0.72	<b>0.0007</b>	-0.47	0.11	0.04	0.95	-0.72	<b>0.03</b>
<b>Beige adipose tissue markers</b>								
TMEM26	-0.72	<b>0.0007</b>	-0.39	0.19	0.11	0.86	-0.67	<b>0.05</b>
CD137	-0.62	<b>0.006</b>	-0.32	0.28	-0.10	0.87	-0.64	0.06
<b>Other metabolic markers</b>								
DIO2	-0.69	<b>0.002</b>	-0.46	0.11	-0.05	0.93	-0.73	<b>0.03</b>
Leptin	-0.60	<b>0.009</b>	-0.34	0.26	-0.18	0.77	-0.84	<b>0.004</b>
HSP60	-0.70	<b>0.0002</b>	-0.54	0.06	-0.03	0.97	-0.79	<b>0.01</b>

# Increased DCAT accumulation is associated with reduced *Dicer* and brown and beige fat gene expression in abdominal SC fat in HIV

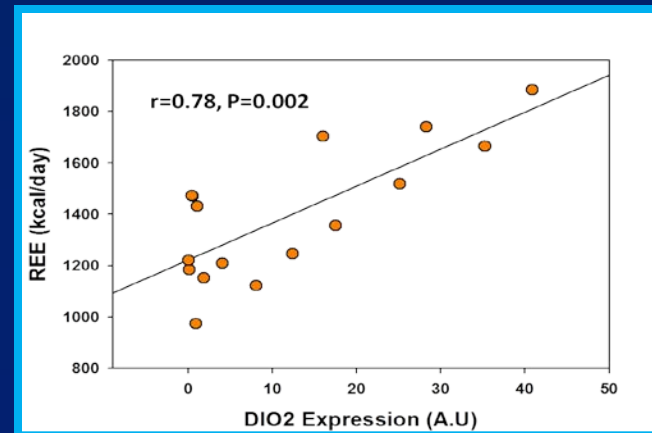
	Non-HIV (n=9)		HIV (n=18)	
	$\rho$	P-Value	$\rho$	P-Value
Dicer	-0.24	0.57	-0.50	<b>0.03</b>
<b>Brown adipose tissue markers</b>				
UCP1	-0.48	0.23	-0.36	0.14
PGC1 $\alpha$	0.43	0.29	-0.59	<b>0.01</b>
ZIC1	-0.55	0.16	-0.49	<b>0.04</b>
LHX8	-0.40	0.32	-0.57	<b>0.01</b>
PRDM16	-0.19	0.65	-0.71	<b>0.0009</b>
PAT2	-0.48	0.23	-0.71	<b>0.0009</b>
P2RX5	-0.50	0.20	-0.66	<b>0.003</b>
<b>Beige adipose tissue markers</b>				
TMEM26	-0.45	0.26	-0.63	<b>0.005</b>
CD137	0.17	0.69	-0.39	0.11



# Lipomatous dorsocervical fat has brown fat features: increased expression of DIO2 and relates to increased EE



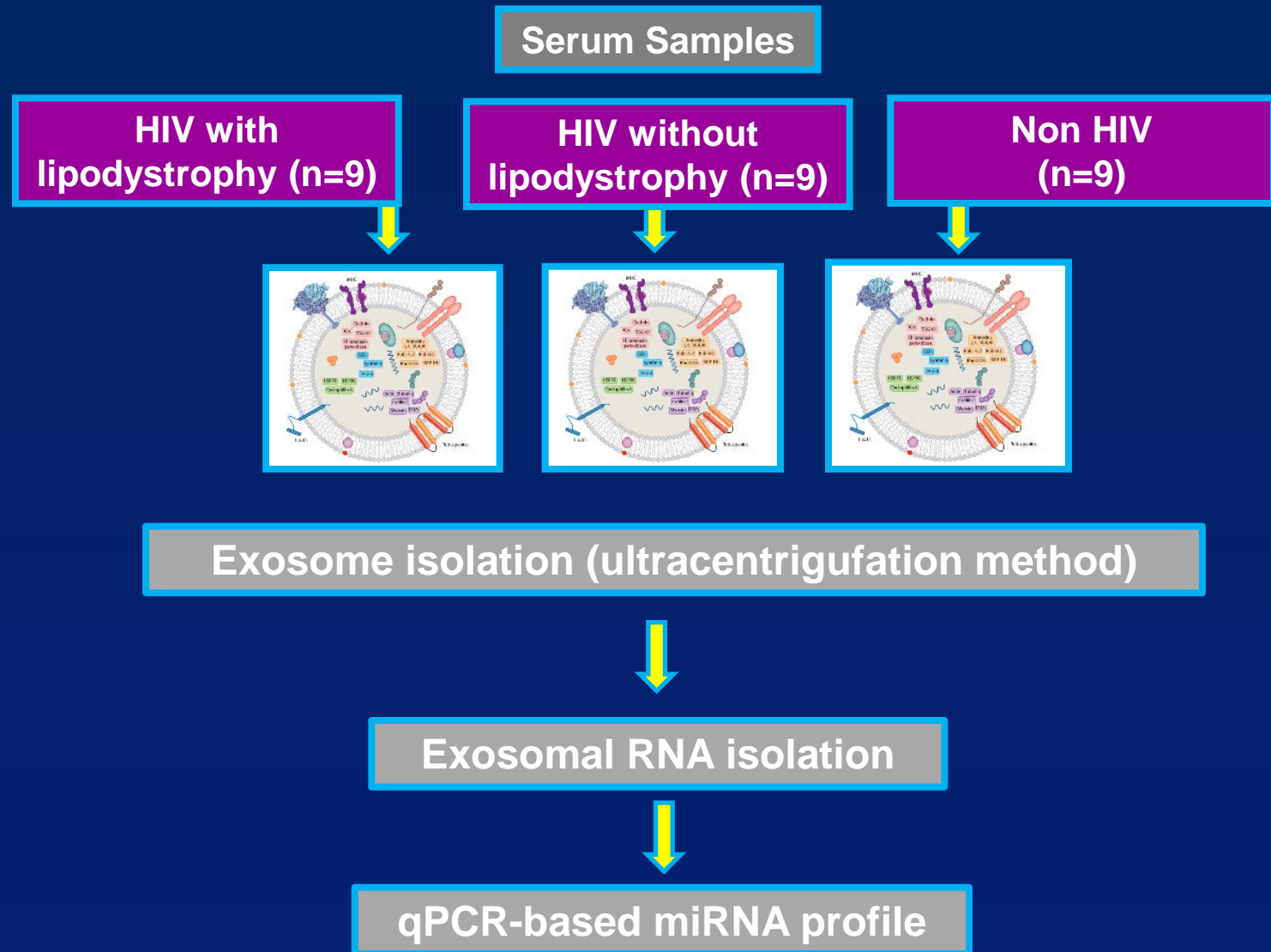
DIO2 expression was 3-fold higher in HIV Lipo vs. HIV non-Lipo



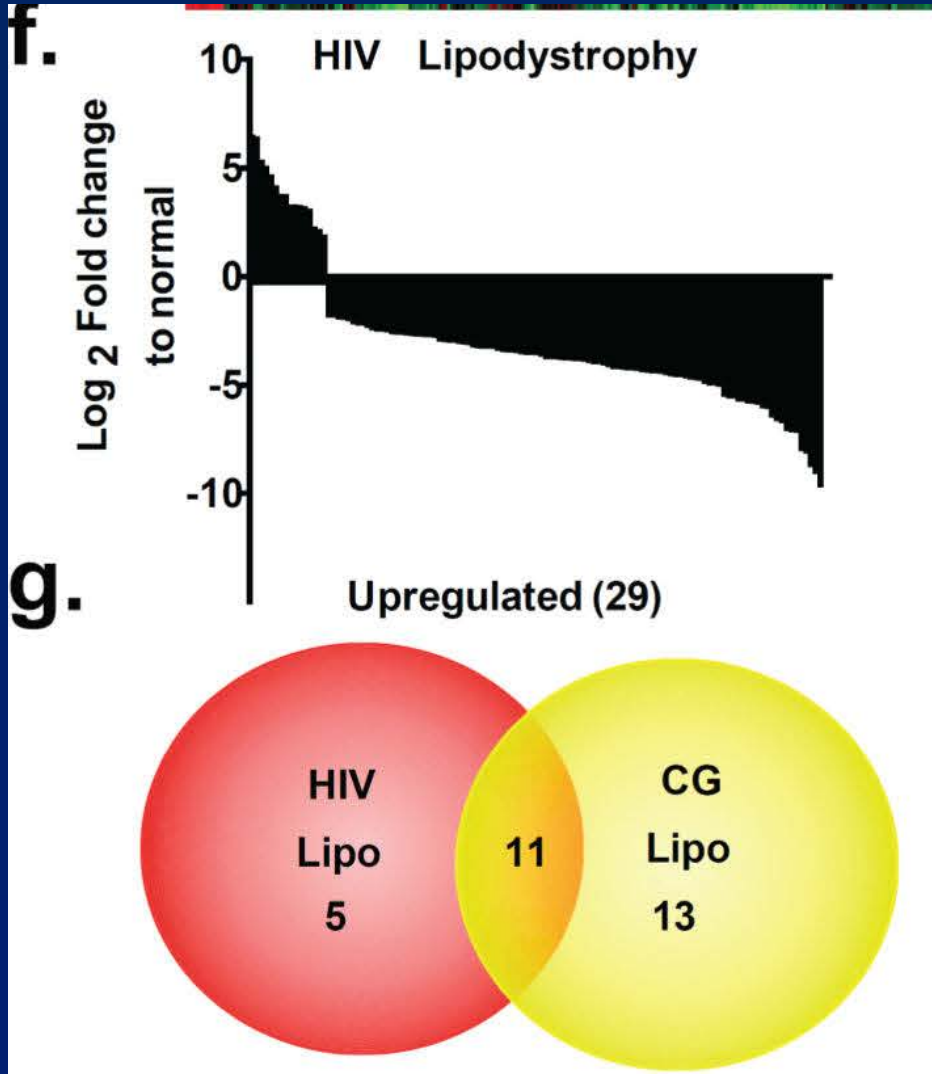
In addition to REE, DIO2 expression also relates to UCP-1 ( $r=0.77$ ,  $P=0.002$ ), PGC-1 $\alpha$  ( $r=0.81$ ,  $P=0.01$ ), and CideA expression ( $r=0.66$ ,  $P=0.03$ ) in HIV.



# Adipose tissue major source circulating miRNA's: Assessing miRNA signature through serum exosomal profiling

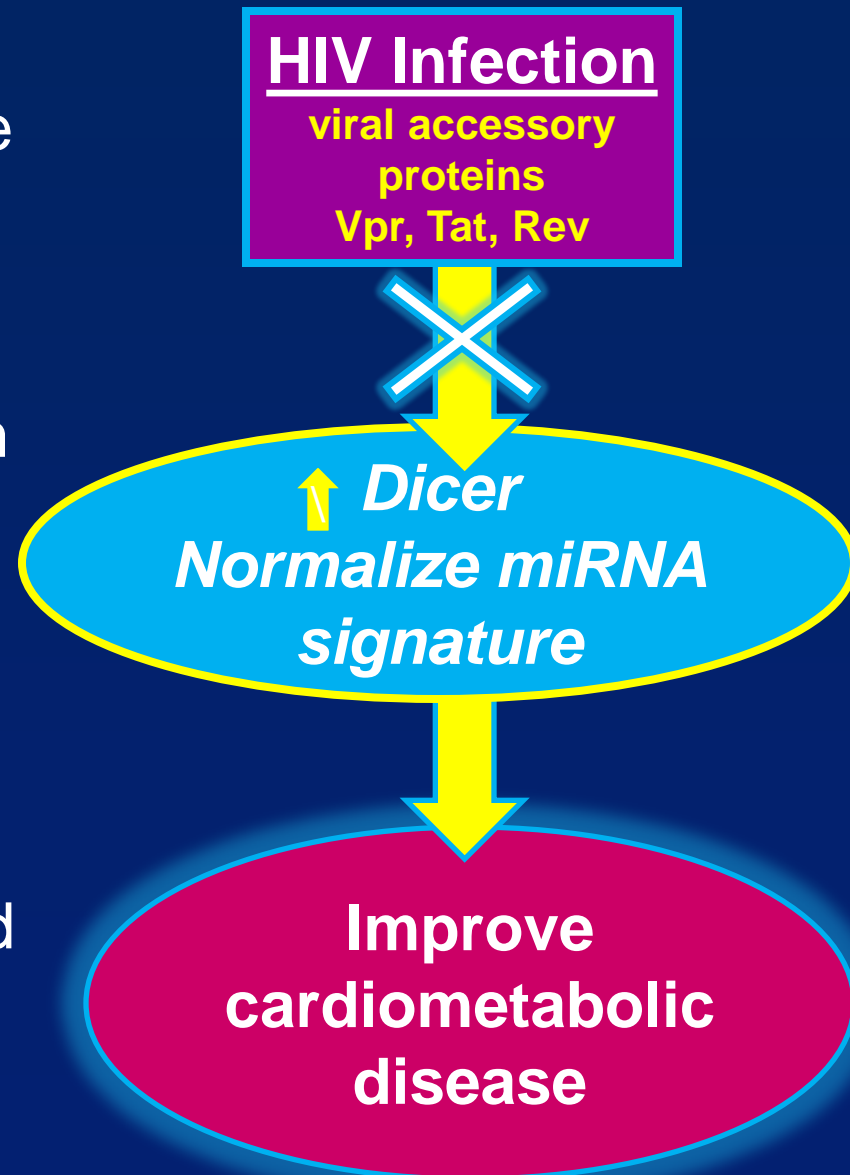


# Overlapping miRNA Expression Pattern with CGL



# Potential treatment strategy for adipose dysfunction and metabolic disease in HIV?

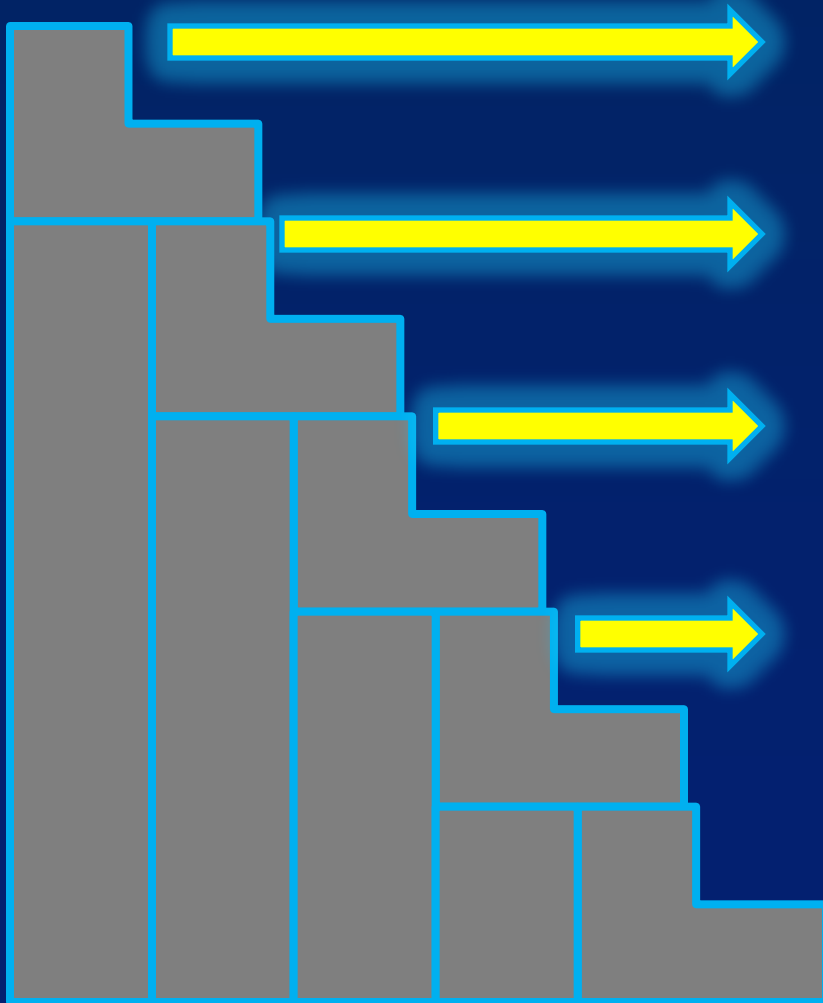
- Our results demonstrate dysfunctional SC adipose tissue marked by reduced *Dicer* which may limit capacity for adipose browning in HIV lipodystrophy and provide a novel mechanism for metabolic dysregulation.
- A potential therapeutic strategy to increase *Dicer* expression or modulate microRNAs may increase “browning” of WAT and improve cardiometabolic health in HIV lipodystrophy.



# Summary

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## Data to Date Suggest:

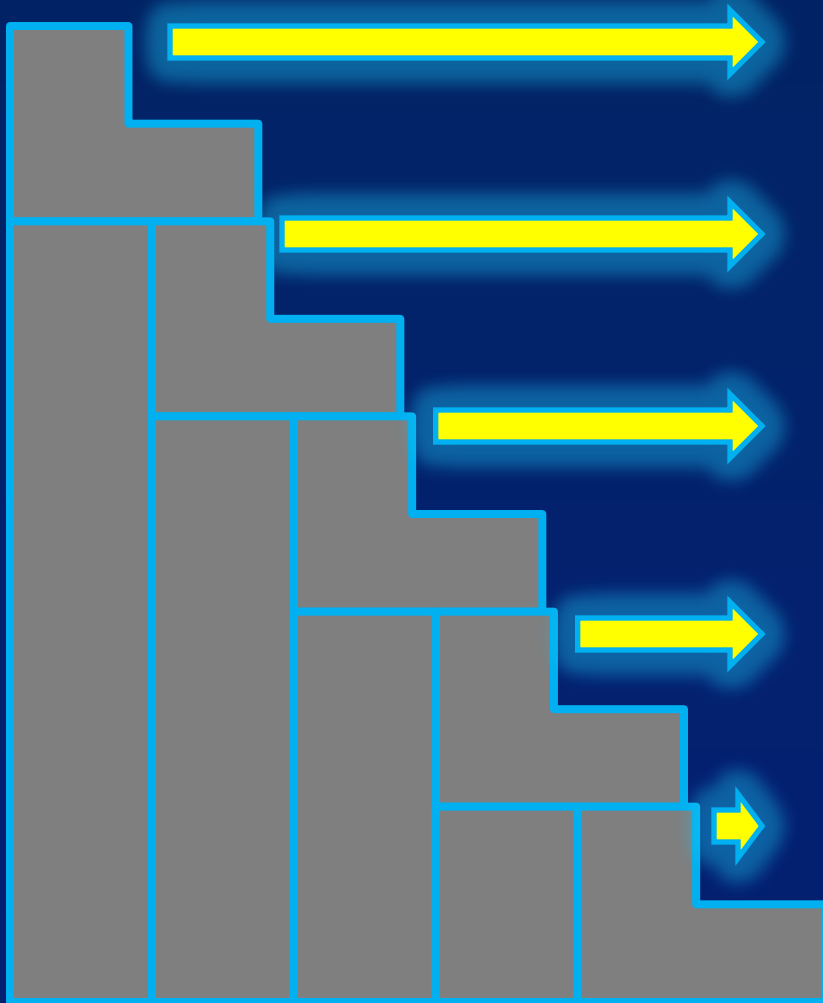


- Individuals with HIV have adipose dysfunction, including reduced browning/beiging, which may contribute to metabolic risk.
- HIV viral accessory proteins mediate effects of adipose dysfunction in preclinical models
- In this way HIV may contribute to reduced Dicer, downregulation of brown and beige fat genes, and DCAT accumulation
- Data from the current study in HIV lipodystrophy aligns with evidence from animal studies using adipose specific Dicer KO mice.

# Future Directions

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## What we still don't know:



- Which miRNAs are implicated in adipocyte differentiation and metabolic complications in relation to Dicer expression in HIV? These ongoing studies will help identify a comprehensive panel of panel of miRNAs unique to HIV and that are clinically relevant.

- What are potential treatment strategies that could be harnessed from this novel mechanism, e.g RNA based therapeutics

# Funding and Collaborators

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- Suman Srinivasa, M.D. (MGH Endocrinology)
- Martin Torriani, M.D. (MGH Radiology)
- Aaron Cypess, M.D. (NIH)
- CR Kahn, M.D. (Joslin Diabetes, Endocrinology)





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**Thank you!**

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