

SF1-Specific AMPK α 1 Deletion Protects Against Diet-Induced Obesity

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AMPK is a cellular gauge that is activated under conditions of low energy, increasing energy production and reducing energy waste. Current evidence links hypothalamic AMPK with the central regulation of energy balance. However, it is unclear whether targeting hypothalamic AMPK has beneficial effects in obesity. Here, we show that genetic inhibition of AMPK in the ventromedial nucleus of the hypothalamus (VMH) protects against high-fat diet (HFD)–induced obesity by increasing brown adipose tissue (BAT) thermogenesis and subsequently energy expenditure. Notably, this effect depends upon the AMPK α 1 isoform in steroidogenic factor 1 (SF1) neurons of the VMH, since mice bearing selective ablation of AMPK α 1 in SF1 neurons display resistance to diet-induced obesity, increased BAT thermogenesis, browning of white adipose tissue, and improved glucose and lipid homeostasis. Overall, our findings point to hypothalamic AMPK in specific neuronal populations as a potential druggable target for the treatment of obesity and associated metabolic disorders.

AMPK is a serine/threonine kinase that is highly conserved throughout evolution. AMPK is a heterotrimer complex

comprising a catalytic α subunit (α 1 or α 2), with a conventional serine/threonine protein kinase domain, and two regulatory subunits, β (β 1 or β 2) and γ (γ 1, γ 2, or γ 3) (1-3). AMPK is activated by phosphorylation of the α subunit on Thr172, which can be allosterically induced by AMP and catalyzed by several upstream kinases such as liver kinase B1 (LKB1) and calmodulin-dependent kinase kinases, especially CaMKK β (1-3). Consequently, by detecting changes in the ratio of adenine nucleotides, AMPK is activated by stresses that deplete cellular energy status. By turning off ATP-consuming processes while turning on catabolic processes, AMPK mediates a global counterregulatory response (1–3) that maintains cellular energy homeostasis.

Hypothalamic AMPK plays a major role in the regulation of food intake and energy expenditure (EE), as well as glucose and lipid homeostasis at the whole-body level (4–10). These differential effects of AMPK seem to have an anatomical basis. Whereas the regulatory effects of AMPK on food intake emanate from the arcuate nucleus of the hypothalamus (ARC) (4,6,11,12), its effect on EE stems from the ventromedial nucleus of the hypothalamus (VMH), where AMPK affects the sympathetic nervous system (SNS) to regulate brown adipose tissue (BAT)

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thermogenesis (7,10,11,13–16). The fact that hypothalamic AMPK controls both feeding and EE, as well as leptin resistance (17,18), makes it an interesting candidate for the treatment of obesity (9,19,20). The aim of this study is to investigate the VMH targeting of AMPK in diet-induced obese (DIO) models. Our data show that ablation of $AMPK\alpha1$ in steroidogenic factor 1 (SF1) neurons of the VMH protects against high-fat diet (HFD)–induced obesity and that this effect is mediated by increased SNS-driven BAT thermogenesis and browning of white adipose tissue (WAT).

RESEARCH DESIGN AND METHODS

Animals

Adult male Sprague-Dawley rats (8–10 weeks old, 200– 250 g; Animalario General University of Santiago de Compostela [USC]) and adult male null SF1-Cre $AMPK\alpha1^{flow/flox}$ mice (mixed background; 20 weeks old for the standard diet [SD] experiments and 34 weeks old for the HFD experiments) and their littermates were used. All experiments were performed in agreement with the International Law on Animal Experimentation and were approved by the USC Ethical Committee (project ID 15010/14/006) and the University of Iowa Institutional Animal Care and Use Committee. To generate SF1 neuron-specific AMPKa1 knockout mice (SF1-Cre $AMPK\alpha1^{flox/flox}$), SF1-Cre mice [Tg(Nr5a1-cre)Lowl/J, stock number 012462] were crossed with AMPKa¹ floxed mice $(AMPK\alpha1^{\text{flox/flox}}$ mice, Prkaa1tm1.1Sjm/J, stock number 014141; both strains from The Jackson Laboratory, Bar Harbor, ME) that possess loxP sites flanking exon 3 of the Prkaa1 gene. Cre-negative, floxed (AMPK $\alpha1^{\rm{flox/flox}}$) littermates were used as controls (10). The animals were housed with an artificial 12-h light (0800 h to 2000 h)/12-h dark cycle, under controlled temperature and humidity conditions and allowed free access to standard laboratory chow (SAFE A04; Scientific Animal Food & Engineering, Nantes, France) or 45% HFD (D12451; Research Diets, Inc., New Brunswick, NJ) and tap water.

Generation of Lentiviral Particles

The protein-coding sequence of AMPKa1-DN was cloned from pVQAd Sf1-AMPKa1-DN (Material serial reference number [MSRN] 24603; ViraQuest Inc., North Liberty, IA) into the pSIN-Flag vector. To generate lentiviral (Lv) particles, the pSIN-Flag vector containing $AMPK\alpha1-DN$ was cotransfected with packaging vectors (psPAX2 and pMD2G) into HEK293T as previously described (21). pMD2G and psPAX2 were a gift from Didier Trono (12259 and 12260, respectively; Addgene Plasmids, Cambridge, MA).

Stereotaxic Microinjection of Viral Vectors

Adenoviral (GFP, AMPKa1-DN, AMPKa2-DN, and $AMPK\alpha$ 1-CA; Viraquest) and Lv (null and AMPK α 1-DN) vectors were delivered in the VMH of rats or mice as previously reported (7,10,11,13–16,22,23).

Peripheral Treatments

The adrenergic receptor β 3 (β 3-AR)–specific antagonist SR59230A (3 mg/kg/day; Tocris Bioscience, Bristol, U.K.) was administrated subcutaneously (SC), as previously reported (7,10,11,24).

Glucose and Insulin Tolerance Tests

Glycemia was measured with a glucometer (Accucheck; Roche, Barcelona, Spain) after insulin or glucose administration, after an intraperitoneal injection of 0.75 units/ kg insulin (Actrapid; Novonordisk, Bagsvaerd, Denmark) for insulin tolerance test or 1 mg/g D-glucose (Sigma-Aldrich, St. Louis, MO) for glucose tolerance test, as previously shown (23,24). HOMA of insulin resistance (HOMA-IR) was calculated as previously reported (24).

Calorimetric System and Nuclear Magnetic Resonance

Animals were analyzed for EE, oxygen consumption $(VO₂)$, respiratory quotient (RQ), and locomotor activity (LA) using a calorimetric system (LabMaster; TSE Systems, Bad Homburg, Germany) as previously shown (10,11,13,16).

Positron Emission Tomography–Computed Tomography

Whole-body microPET/CT (positron emission tomography– computed tomography) images were acquired with the Albira PET/CT Preclinical Imaging System (Bruker Biospin, Woodbridge, CT). Mice received an injection of 7.4 \pm 1.85 MBq of 2^{-18} F-fluoro-2-deoxy-2-glucose (18 F-FDG) in the tail vein. The acquisition was performed 45 ± 10 min after the 18F-FDG injections. Images were generated using the Bruker Albira Suite software, version 5.0. The brown fat and liver areas were delineated by using image tools implemented in the AMIDE software [\(http://amide.sourceforge.](http://amide.sourceforge.net/) [net/\)](http://amide.sourceforge.net/) to generate a three-dimensional spherical volume of interest with a radius of 6 mm. Thus, mean standardized uptake values were calculated (10).

BAT Temperature Measurements

Skin temperature surrounding BAT was recorded with an infrared camera (B335, Compact Infrared Thermal Imaging Camera; FLIR, West Malling, Kent, U.K.) as previously shown (10,11,13,14,16,23,24).

Sympathetic Nerve Activity Recording

Multifiber recording of sympathetic nerve activity (SNA) was obtained from the nerve subserving BAT as previously described (7,10,11,14,23).

Sample Processing

From each animal, the VMH, BAT, subcutaneous WAT (scWAT), and liver were immediately homogenized on ice to preserve phosphorylated protein levels. Samples were stored at -80° C until further processing. The specificity of the VMH dissections was confirmed by analyzing the mRNA of SF1 and proopiomelanocortin (POMC) (data not shown).

Blood Biochemistry

Levels of insulin and leptin were measured using mice ELISA kits (Merck Millipore, Billerica, MA), triglyceride and cholesterol were measured using Spinreact kits (Spinreact S.A., San Esteve de Bas, Spain), and nonesterified fatty acids (NEFAs) were measured using the Wako kit (Wako Chemicals GmbH, Neuss, Germany) on fed animals. Plasma glucagon levels were measured using a mouse ELISA kit (Mercodia AB, Uppsala, Sweden), corticosterone (CORT) levels were analyzed using a competitive enzyme immunoassay kit (Enzo Life Sciences, Farmingdale, NY), and epinephrine levels were measured using an ELISA kit (CUSABIO, Houston, TX) in 24 h–fasted HFD mice.

Real-time Quantitative RT-PCR

Real-time PCR (TaqMan; Applied Biosystems, Foster City, CA) was performed using specific primers and probes ([Supplementary Table 1\)](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1) as previously described (7,10, 11,16,23).

Immunohistochemistry

Detection of uncoupling protein 1 (UCP1) in WAT was performed using anti-UCP1 (1:500, ab10983; Abcam, Cambridge, U.K.) as previously reported (24–26). Digital images for WAT were quantified with ImageJ Software (National Institutes of Health [NIH], Bethesda, MD), as previously shown (24–26). Direct detection of GFP fluorescence was performed as previously reported (10,24,26).

Double Immunohistochemistry/In Situ Hybridization

In situ hybridization analysis was performed as previously shown (27) using a specific antisense riboprobe complementary to the coding sequence of the whole exon 3 of mice Prkaa1 mRNA (PrKaa1-ex3 riboprobe, 278- and 371-nt, NM_001013367.3). For the generation of the template, primer sequences were as follows: forward T3-AMPKex3-sense (5'-CAGAGATGCAATTAACCCTCAC-TAAAGGGAGAGTACCAGGTCATCAGTACACCATCT-3'); reverse T7-AMPKex3-as (5'-CCAAGCCTTCTAATACGACT-CACTATAGGGAGACCTTCCATTTTTACAGATATAATCA-3'). After hybridization, sections were processed for immunohistochemistry of SF1 with anti-SF1 antibody (1:500; Abcam). Brain sections were incubated against a biotinylated donkey anti-rabbit secondary antibody (1:500; Jackson ImmunoResearch Laboratories, West Grove, PA), and peroxidase reaction was performed using the VECTASTAIN Elite ABC-HRP Kit (Vector Laboratories, Burlingame, CA) and 3,3'-diaminobenzidine-tetrahydrochloride (DAB). Slides were dipped in Kodak Autoradiography Emulsion type NTB (Kodak, Rochester, NY) and exposed for 3 weeks at 4°C in the dark. After this period, the sections were developed and fixed.

Western Blotting

Protein lysates from the VMH, BAT, and liver were subjected to SDS-PAGE, electrotransferred, and probed with antibodies against acetyl-CoA carboxylase α (ACC α), AMPKa2 (Merck Millipore), phosphorylated ACCa (pACCa; Ser79), phosphorylated hormone-sensitive lipase (pHSL; Ser660), tumor necrosis factor α (TNF- α), and forkhead box protein O1 (FOXO1) and its phosphorylated form (pFOXO1) (Cell Signaling, Danvers, MA), activating

transcription factor 6 β (ATF6 β), CHOP, nuclear factor- κ B (NF- κ B) p65, phosphorylated IkB kinase α / β (p-IKK α / β), phosphorylated protein kinase RNA-like endoplasmic reticulum kinase (pPERK; Thr981), glucokinase (GCK) (Santa Cruz Biotechnology, Dallas, TX), HSL, interleukin 1β (IL-1 β), interleukin 6 (IL-6), phosphorylated inositolrequiring enzyme 1 (pIREa; Ser724), UCP1, glucose-6 phosphatase (G6pase), pyruvate carboxykinase (PCK1) (Abcam), α -tubulin, or β -actin (Sigma-Aldrich), as previously described (7,10,11,14,23,24). Autoradiographic films (Fujifilm, Tokyo, Japan) were scanned and the band signal was quantified by densitometry using ImageJ 1.33 software (NIH), as previously shown (7,10,11,13–16,22,23). Values were expressed in relation to β -actin (VMH) or α -tubulin (BAT). Representative images for all proteins are shown; in the case of the loading controls, a representative gel is displayed, although each protein was corrected by its own internal control (β -actin or α -tubulin). In all the figures showing images of gels, all the bands for each picture are from the same gel, although they may be spliced for clarity.

Statistical Analysis

Data are expressed as mean \pm SEM; when data are relativized, they are given as percentage of the appropriate controls. Error bars represent SEM. Statistical significance was determined by Student t test (when two groups were compared) or ANOVA (when more than two groups were compared) followed by post hoc Bonferroni test. $P < 0.05$ was considered significant; the exact P values are specified in the RESULTS.

RESULTS

Inhibition of AMPK α in the VMH Reverses HFD-Induced **Obesity**

We stereotaxically injected into the VMH of HFD-induced obese rats a combination of adenoviruses harboring dominant-negative isoforms of the catalytic AMPK α 1 and α 2 ($AMPK\alpha1\alpha2-DN$) subunits. The infection efficiency was demonstrated by assaying the hypothalamic expression of GFP into the VMH (Fig. 1A), as previously reported (7,10,11,13,14,16,22). Treatment with an adenovirus expressing $AMPK\alpha1\alpha2-DN$ induced a feeding-independent weight loss in rats fed HFD (day $1 P = 0.004$, day 2 $P = 0.0006$, day 3 $P = 0.00007$, day 4 $P = 0.00007$, day 5 P = 0.00001) (Fig. 1B and C) and SD controls (day 1 P = 0.08, day 2 $P = 0.014$, day 3 $P = 0.001$, day 4 $P = 0.0001$, day $5 P = 0.0002$) ([Supplementary Fig. 1](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1)A and B). This effect was associated with VMH decreased levels of $pACC\alpha$ (HFD $P = 0.04$, SD $P = 0.005$) and/or endoplasmic reticulum (ER) stress markers (pIRE $P = 0.009$, pPERK $P = 0.04$, ATF6 $\beta P =$ 0.0007) (Fig. 1D and E and [Supplementary Fig. 1](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1)C). $AMPK\alpha1\alpha2-DN$ elicited an increase in BAT temperature $(P = 0.04)$ (Fig. 1F) as well as in the protein (P = 0.001) and/or mRNA expression $(P = 0.01)$ of UCP1 and peroxisome proliferator-activated receptor- γ coactivator 1α $(P = 0.01)$ and 1 β $(P = 0.06)$ (PGC1 α and PGC1 β) in the BAT

Figure 1 - Effect of AMPK α 1 α 2-DN microinjection into the VMH on energy balance in HFD-induced obese rats. A: Representative image of direct GFP fluorescence in the VMH after injection of adenovirus. B: Body weight change ($n = 9$ rats/group). C: Daily food intake ($n = 1$ 9 rats/group). D: Protein levels of pACC α and ACC α in the VMH (n = 7 rats/group). E: Protein levels of the ER stress pathway in the VMH (n = 7 rats/group). F: BAT temperature (n = 7 rats/group). G: Protein levels of UCP1 in the BAT (n = 7 rats/group). H: mRNA levels of thermogenic markers in the BAT ($n = 9$ rats/group) of rats fed an HFD stereotaxically treated within the VMH with GFP or AMPK α 1-DN and AMPK α 2-DN adenoviruses. *P < 0.05, **P < 0.01, and ***P < 0.001 vs. HFD GFP VMH. Statistical significance was determined by Student t test. Data expressed as mean \pm SEM. The bands in gels from panels D, E, and G have been spliced from the same original gels, as indicated by vertical black lines. ME, medial eminence.

of HFD-fed rats (Fig. 1G and H). These data indicate that inhibition of $AMPK\alpha$ within the VMH decreases DIO.

Specific Inhibition of AMPK α 1 Isoform in the VMH Reverses HFD-Induced Obesity

Next, we treated rats stereotaxically within the VMH with adenoviruses expressing $AMPK\alpha1-DN$ or $AMPK\alpha2-DN$. Although both isoforms induced a significant decrease in body weight (AMPK α 1-DN: day 1 P = 0.01, day 2 P = 0.018, day 3 $P = 0.04$, day 4 $P = 0.008$, day 5 $P = 0.005$; $AMPK\alpha2-DN: day 1 P = 0.03, day 2 P = 0.07, day 3 P = 0.06,$ day 4 $P = 0.02$, day 5 $P = 0.01$), AMPK α 1-DN, but not AMPKa2-DN, caused a feeding-independent weight loss (AMPK α 2-DN P = 0.03) (Fig. 2A–C). Since BAT thermogenesis is mainly controlled by the SNS via β 3-AR (28), we investigated whether BAT activity after administration of $AMPK\alpha1-DN$ or $AMPK\alpha2-DN$ adenoviral particles in the VMH was mediated by the SNS. Pharmacological inactivation of β 3-AR by SC administration of SR59230A (7,10,11,24) prevented the effect on BAT (ANOVA $P =$ 0.018, $F = 4.45$; GFP vs. AMPK α 1-DN $P = 0.007$; AMPK α 1-DN vs. AMPK α 1-DN + SR59230A P = 0.04) (Fig. 2D) and body temperature (ANOVA $P = 0.0084$, $F = 5.35$; GFP vs. AMPK α 1-DN $P = 0.006$; AMPK α 1-DN vs. AMPK $α1$ -DN + SR59230A $P = 0.002$) (Fig. 2E) associated with AMPKa1-DN injection into the VMH. Consistent with the increased thermogenesis, the treatment with SR59230A blunted the weight-reducing effect of $AMPK\alpha1-DN$ (GFP -9.76 \pm 2.62 g, AMPK $\alpha1-DN$ -21.86 ± 3.71 g, $P < 0.01$ vs. GFP; AMPK α 1-DN + SR59230A -12.71 \pm 2.93 g, P < 0.05 vs. AMPK α 1-DN).

Next, we evaluated the impact of $AMPK\alpha1-DN$ in rats fed an HFD. Administration of $AMPK\alpha1-DN$ adenovirus into the VMH of HFD-induced obese rats induced feeding-independent weight loss (day $1 P = 0.04$, day 2 $P = 0.002$, day 3 $P = 0.006$, day 4 $P = 0.006$, day 5 $P = 0.001$) (Fig. 2F and G), associated with increased BAT temperature $(P = 0.0004)$ (Fig. 2H). Since our adenoviral treatments lasted 5 days, which correspond to the maximal effect of

Figure 2-Effect of AMPK α 1-DN or AMPK α 2-DN microinjection into the VMH on energy balance in rats. A and B: Body weight change (n = 14–17 rats/group). C: Daily food intake (n = 14–17 rats/group). D: BAT temperature (n = 14–17 rats/group). E: Body temperature (n = 14–17 rats/group) of rats fed an SD stereotaxically treated within the VMH with GFP or AMPKa1-DN or AMPKa2-DN adenoviruses and SC with SR59230A (SR SC). F: Body weight change ($n = 16-19$ rats/group). G: Daily food intake ($n = 16-19$ rats/group). H: BAT temperature ($n =$ 8 rats/group) of rats fed an HFD stereotaxically treated within the VMH with GFP or AMPK α 1-DN adenoviruses. I: Body weight change ($n = 7-$ 8 rats/group). J: Food intake ($n = 7-8$ rats/group). K: BAT temperature ($n = 7-8$ rats/group) of rats fed an HFD stereotaxically treated within the VMH with null or AMPK α 1-DN Lv. *P < 0.05, **P < 0.01, and ***P < 0.001 vs. GFP VMH or null VMH. $\#P$ < 0.05, $\#HP$ < 0.01, and $\#HHP$ < 0.001 vs. AMPKa1-DN VMH. Statistical significance was determined by Student ^t test (when two groups were compared) or ANOVA (when more than two groups were compared) followed by post hoc Bonferroni test. Data are expressed as mean \pm SEM.

the viral infection (7,10,11,14–16,22–24,26,29), we investigated the effect of virogenic targeting of $AMPK\alpha1$ in HFD obese rats for a longer duration. For this purpose, we used Lv harboring the $AMPK\alpha1-DN$ cDNA. Lv allow the prolonged expression of the transgene due to the integration in the host genome (30). Our data show that a single VMH administration with AMPK α 1-DN Lv after 40 days induced a marked feeding-independent weight loss (body weight change ANOVA $P = 0.018$, $F = 4.99$; SD Lv null vs. HFD Lv null $P = 0.005$; HFD Lv null vs. HFD Lv AMPK α 1-DN $P = 0.04$; food intake ANOVA $P = 0.0043$, $F = 7.24$; SD Lv null vs. HFD Lv null $P = 0.006$; SD Lv null vs. HFD Lv AMPK α 1-DN $P = 0.002$; HFD Lv null vs. HFD Lv AMPK α 1-DN $P =$ 0.2 [nonsignificant]) (Fig. 2I and J). Importantly, this was associated with increased BAT thermogenesis in HFD animals, which lasted during the 40-day time period (ANOVA $P = 0.00002$, $F = 20.19$; HFD Lv null vs. HFD Lv AMPK α 1-DN P = 0.0007) (Fig. 2K). Together, these data indicated that AMPK α 1, but not AMPK α 2, is the key isoform modulating BAT thermogenesis within the VMH and that its inhibition decreases HFD-induced obesity.

Ablation of AMPK α 1 in SF1 Neurons of the VMH Increases BAT Thermogenesis and EE

Next, we aimed to identify the specific VMH neuronal population of neurons mediating those effects. To this end, we generated a SF1-specific AMPKa1 null mouse line (SF1- Cre AMPK $\alpha1^{\text{flow/flox}}$ (10) by crossing floxed AMPK $\alpha1$ mice (31) with SF1-Cre mice, which express Cre recombinase under the SF1 promoter (32). Allele-specific PCR demonstrated the successful ablation of $AMPK\alpha1$ in the VMH, a hypothalamic area highly enriched for SF1 neurons, whereas no evidence for ablation of this allele was detected in the cerebral cortex or the cerebellum (Fig. 3A). In addition, $AMPK\alpha1$ allele ablation was detected in peripheral tissues where SF1 is also expressed, such as the adrenal gland, the pituitary, and the testis, but not in SF1-negative tissues, such as the liver (Fig. 3A). To further characterize the SF1-specific deletion of $AMPK\alpha1$ in the VMH, we performed a dual procedure for simultaneous detection of $SF1$ immunoreactivity and AMPK $\alpha1$ mRNA, the latter using a probe directed against the deleted sequence of the allele (flanked by the lox-P sites). Unambiguous colocalization of AMPKa1 mRNA was detected in a substantial proportion of SF1 neurons in the VMH. In contrast, this proportion significantly dropped to nearly negligible levels in SF1-Cre $\text{AMPK}\alpha1^{\text{flox/flox}}$ mice, therefore confirming the effective ablation of $AMPK\alpha1$ in SF1 neurons of the VMH. This was further confirmed by quantification, showing the low degree of colocalization of AMPKa1 mRNA and SF1 positive staining in the null mice (only 11.26%) in relation to WT littermates $(P = 2.10^{-9})$ (Fig. 3B). Next, we investigated the effect of AMPKa1 deletion on hypothalamic $AMPK\alpha2$; SF1-Cre AMP $K\alpha1^{\rm flowflow}$ mice exhibited a significant upregulation of the $AMPK\alpha2$ isoform within the VMH, likely to compensate for the deficiency in $AMPK\alpha$ function $(P = 0.02)$ (Fig. 3C).

Interestingly, SF1-Cre $AMPK\alpha1^{flow/flox}$ mice displayed reduced body weight (week $4 P = 0.02$, week $8 P = 0.001$, week 12 $P = 0.003$, week 16 $P = 0.005$, week 20 $P = 0.02$) (Fig. 3D) and adiposity $(P = 0.009)$ (Fig. 3E). Body length was comparable between SF1-Cre $\text{AMPK}\alpha\text{1}^{\text{flow/flox}}$ mice and littermate controls (Fig. 3F). Food intake was also not different in SF1-Cre AMPK α 1^{flox/flox} mice (Fig. 3G). SF1-Cre AMPK α 1^{flox/flox} mice exhibited higher EE and VO₂ (P < 0.001) (Fig. 3H–I). LA was decreased (P = 0.007–0.04) (Fig. 3J), whereas RQ remained unchanged (Fig. 3K). Analysis of plasma levels showed lower triglycerides ($P = 0.04$), NEFAs ($P = 0.02$), and leptin ($P = 0.005$), but unchanged cholesterol (Fig. 3L–O), in SF1-Cre $AMPK\alpha1^{\text{flox/flox}}$ mice.

In keeping with the increased EE, SF1-Cre $\text{AMPK}\alpha\text{1}^{\text{flox/flox}}$ showed BAT activation, as demonstrated by elevated SNA subserving this tissue ($P = 0.002$) (Fig. 4A) and the increased BAT temperature $(P = 0.008)$ (Fig. 4B), UCP1 protein expression ($P = 0.008$) (Fig. 4C), and higher ¹⁸F-FDG uptake in the BAT, when compared with liver $(P = 0.03)$ (Fig. 4D), indicating higher BAT function. Of note, pharmacological inactivation of β 3-AR by SC administration of SR59230A $(7,10,11,24)$ reverted the weight loss ($P = 0.004$) in a feedingindependent manner and decreased BAT temperature $(P =$ 0.0009) of SF1-Cre $AMPK\alpha1^{flow/flox}$ mice [\(Supplementary](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1) [Fig. 2](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1)A–C). Finally, SF1-Cre AMPK α 1^{flox/flox} mice displayed higher expression of thermogenic markers in scWAT (Ucp1 $P = 0.007$, Ppargc1a P = 0.04, Ppargc1b P = 0.01, Cidea P = 0.005) [\(Supplementary Fig. 3](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1)A), which was indicative of browning.

SF1 is also expressed in peripheral organs. Therefore, it is possible that the phenotype of SF1-Cre AMPK $\alpha1^{\rm flow/flox}$ mice may be driven by the loss of $AMPK\alpha1$ in those tissues. To investigate this possibility, SF1-Cre AMPK α 1^{flox/flox} mice were treated with an adenovirus encoding a constitutively active AMPK α 1 (AMPK α 1-CA) into the VMH. This gain-of-function treatment promoted feeding-independent weight gain of SF1-Cre AMPK α 1^{flox/flox} mice (day $1 P = 0.09$, day $2 P = 0.15$, day $3 P = 0.05$, day $4 P = 0.02$, day $5 P = 0.002$) (Fig. 4E and F), associated with decreased BAT temperature ($P = 0.04$) (Fig. 4G) and UCP1 expression ($P =$ 0.01) (Fig. 4H). Finally, SF1-Cre $\text{AMPK}\alpha\text{1}^{\text{flox}/\text{flox}}$ mice were exposed to 4°C for 6 h. This cold challenge demonstrated that null mice defended their body temperature (2 h $P = 0.009$, 3 h $P = 0.011$, 4 h $P = 0.011$, 5 h $P = 0.02$, 6 h $P = 0.02$) (Fig. 4I), average body temperature (P = 0.003) (Fig. 4J), and BAT temperature (Fig. 4K) (0 h $P =$ 0.01, 2 h $P = 0.003$, 3 h $P = 0.02$, 4 h $P = 0.01$, 5 h $P = 0.003$) (Fig. 4K) better than the littermate controls. Overall, this evidence demonstrated that specific ablation of $AMPK\alpha1$ in SF1 neurons of the VMH promoted a negative energy balance through a process that involved activation of BAT thermogenesis and subsequent increase in EE.

SFA AMPK α 1 Null Mice Are Resistant to HFD-Induced **Obesity**

We evaluated whether SF1-Cre $\text{AMPK}\alpha\text{1}^{\text{flox/flox}}$ mice were protected against obesity. Conditional null mice fed an

Figure 3—Effect of AMPKα1 deletion in SF1 neurons on energy balance in mice. A: PCR for detection of the recombined *Prkaa1* allele in the
following tissues from AMPKα1^{flox/flox} and SF1-Cre AMPKα1^{flox/flox} mice: VMH, B: Double immunohistochemistry/in situ hybridization against SF1 and AMPK α 1, respectively, in the VMH of AMPK α 1^{flox/flox} and SF1-Cre $AMPK\alpha1^{flox/flox}$ mice. White and red arrows indicate the presence and absence of colocalization, respectively. Scale bar: 20 μ m. C: Protein levels of AMPKα2 in the VMH ($n = 7$ mice/group). D: Body weight ($n = 12-23$ mice/group). E: Fat pad mass ($n = 12-23$ mice/group). F: Body length (n = 7–8 mice/group). G: Daily food intake (n = 8 mice/group). H: EE (n = 5–6 mice/group). I: VO₂ (n = 5–6 mice/group). J: LA (n = 5–6 mice/group). K: RQ $(n = 5-6$ mice/group). L-O: Circulating levels of triglycerides, cholesterol, NEFAs, and leptin $(n = 8-9$ mice/group) of ΔM PK α 1^{flox/flox} and SF1-Cre AMPK α 1^{flox/flox} mice. *P < 0.05, **P < 0.01, and ***P < 0.001 vs. AMPK α 1^{flox/flox}. Statistical significance was determined by Student t test. Data are expressed as mean \pm SEM. The bands in gels from panels C come from the same original gels.

Figure 4—Effect of deleting AMPK α 1 in SF1 neurons on BAT thermogenesis in mice. A: SNA recorded from the nerves subserving BAT (n = 8 mice/group). *B*: BAT temperature (n = 12–17 mice/group). *C*: Protein levels of U (n = 8 mice/group). G: BAT temperature (n = 8 mice/group). H: Protein levels of UCP1 in the BAT (n = 7 mice/group) of SF1-Cre AMPKa1^{flox/flox}
mice stereotaxically treated within the VMH with GFP or AMPKa1-CA adenoviruse mice stereotaxically treated within the VMH with GFP or AMPKα1-CA adenoviruses. I: Body temperature (n = 5 mice/group). J: Average body
temperature (n = 5 mice/group). K: BAT temperature (n = 5 mice/group) of AMPKα1^{flox/} at 4°C for 6 h. *P < 0.05 and **P < 0.01 vs. AMPK α 1^{flox/flox}, SF1-Cre AMPK α 1^{flox/flox} GFP VMH, or AMPK α 1^{flox/flox} at 4°C. Statistical significance was determined by Student t test. Data are expressed as mean \pm SEM. The bands in gels from panels C and H have been spliced from the same original gels, as indicated by vertical black lines. SUV, standardized uptake value.

HFD showed a feeding-independent decrease in body weight ($P = 0.006$) and adiposity (scWAT, $P = 0.02$) (Fig. 5A–D), associated with increased EE ($P < 0.05-$ 0.001) and VO₂ ($P < 0.05$ –0.01) (Fig. 5E and F), a slight tendency of elevated LA (Fig. 5G), and no change in RQ (Fig. 5H). Plasmatic levels of NEFAs ($P = 0.005$) and leptin ($P = 0.03$), but neither triglycerides nor cholesterol, were decreased in SF1-Cre $AMPK\alpha1^{\rm{flox/flox}}$ fed an HFD (Fig. 5I–L).

Analysis of the hypothalami of SF1-Cre AMPK $\alpha1^{\rm flow/flox}$ mice fed an HFD demonstrated decreased $pACC\alpha$ levels in the VMH $(P = 0.04)$ (Fig. 6A). Recent evidence demonstrated

that hypothalamic inflammation and ER stress induce obesity and inhibit BAT thermogenesis and browning of WAT (23,24,26,33–35). Our result showed reduced ER stress (pIRE $P = 0.02$, pPERK $P = 1 \times 10^{-5}$, ATF6 $\beta P = 0.01$, CHOP $P = 0.03$) (Fig. 68) and inflammatory markers 0.01, CHOP $P = 0.03$) (Fig. 6B) and inflammatory markers $(IL-1\beta P = 0.02, pIKK\alpha\beta P = 0.001, NF-κB P = 0.04)$ (Fig. 6C) in the VMH of HFD-fed SF1-Cre AMPK α 1^{flox/flox} mice. Notably, this effect was associated with higher BAT temperature ($P = 1 \times 10^{-6}$) (Fig. 6D) and elevated mRNA or protein expression of thermogenic markers, such as UCP1, PGC1 β (Ucp1 P = 0.0015, Ucp3 P = 0.06, Ppargc1b P = 0.015, UCP1 protein $P = 0.005$), and pHSL ($P = 0.0005$, pHSL/HSL

Figure 5 —Effect of AMPK α 1 deletion in SF1 neurons on HFD-induced obesity in mice. A: Representative pictures of mice. B: Body weight $(n = 10-11$ mice/group). C: Fat pad mass $(n = 10-11$ mice/group). D: Daily food intake $(n = 10-11$ mice/group). E: EE $(n = 5-8$ mice/group). F: VO₂ (n = 5–8 mice/group). G: LA (n = 5–8 mice/group). H: RQ (n = 5–8 mice/group). I–L: Circulating levels of triglycerides, cholesterol, NEFAs,
and leptin (n = 8–9 mice/group) of AMPKα1^{flox/flox} and SF1-Cre AMPKα1^{flo} HFD AMPKa1^{flox/flox}. Statistical significance was determined by Student t test. Data are expressed as mean ± SEM. gWAT, gonadal WAT; iWAT, inguinal WAT; vWAT, visceral WAT.

Figure 6–Effect of deleting AMPK α 1 in SF1 neurons on the hypothalamus and BAT of HFD-induced obese mice. A: Protein levels of pACC α and ACC α in the VMH (n = 7 mice/group). B: Protein levels of ER stress pathway in the VMH (n = 7 mice/group). C: Protein levels of inflammatory markers in the VMH ($n = 7$ mice/group). D: BAT temperature ($n = 10$ mice/group). E: mRNA levels of thermogenic markers in the BAT ($n = 9$ rats/group). F: Protein levels of thermogenic markers in the BAT ($n = 7$ mice/group). G: Hematoxylin-eosin staining (left panels, scale bar: 100 μm) and adipocyte area (right panels) in scWAT (n = 11–15 mice/group). H: UCP1 staining (left panels, scale bar: 100 μm) and
UCP1 stained area (right panels) in scWAT (n = 8–11 mice/group) of AMPKα1^{flox/fl} $*P < 0.01$, and $*PP < 0.001$ vs. HFD AMPKa1^{flox/flox}. Statistical significance was determined by Student t test. Data are expressed as mean \pm SEM. The bands in gels from panels A–C and F have been spliced from the same original gels, as indicated by vertical black lines. Original magnification \times 20. HPRT, hypoxanthine-guanine phosphoribosyltransferase 1.

 $P = 0.003$) (Fig. 6E and F) in BAT, as well as browning of scWAT, as indicated by decreased adipocyte area ($P = 0.0007$) (Fig. 6G) and increased UCP1 staining ($P = 1 \times 10^{-12}$) (Fig. 6H).

SFA AMPK α 1 Null Mice Show Improved Glucose Homeostasis

Finally, we evaluated the impact of $AMPK\alpha1$ ablation in SF1 neurons on peripheral glucose homeostasis in the context of obesity. HFD SF1-Cre $\text{AMPKa1}^{\text{flox/flox}}$ mice showed decreased glucose levels in the fast and fed states (fast $P = 0.001$, fed $P = 0.004$) (Fig. 7A), improved glucose tolerance (0 min $P = 0.009$, 15 min $P = 0.05$, 30 min $P =$ 0.07, 60 min $P = 0.004$, 90 min $P = 0.006$, 120 min $P =$ 0.003, area under the curve [AUC] $P = 0.004$) (Fig. 7B and C), and unchanged insulin sensitivity and insulin levels (Fig. 7D–F). HOMA-IR confirmed that HFD-induced insulin resistance was ameliorated in SF1-Cre AMPK $\alpha1^{\rm flowflow}$ $(P = 0.06)$ (Fig. 7*G*).

In this context, the lack of effect in insulin sensitivity was intriguing. It has been reported that AMPK in the VMH plays a major role in counterregulatory responses to hypoglycemia by modulating the release of glucagon, CORT, and epinephrine (5,36). Our results showed that when fasted, HFD AMPK α 1 null animals displayed lower levels of glucagon (nonsignificant trend, $P = 0.06$), decreased CORT ($P = 0.008$), and no changes in epinephrine (Fig. 7H–J), suggesting an altered counterregulatory response and that hepatic release of glucose is likely also diminished. Finally, we examined the levels of key enzymes involved in hepatic glucose metabolism. Our data showed that the protein levels of pFOXO1 were increased, whereas the protein levels of PCK1 and G6Pase were decreased [\(Supplementary Fig. 4](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1)A), which was consistent with decreased hepatic gluconeogenesis in SF1-Cre AMPK $\alpha1^{\rm flow/flox}$ mice. On the other hand, the liver protein expression of GCK was increased, consistent with increased glycolysis in the liver of SF1-Cre AMPK α 1^{flox/flox} ([Supplementary](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1)

Figure 7-Effect of deleting AMPKa1 in SF1 neurons on glucose homeostasis in HFD-induced obese mice. A: Fast and fed plasma glucose levels ($n = 9-11$ mice/group). B and C: Glucose tolerance test and AUC ($n = 10-11$ mice/group). D and E: Insulin tolerance test and AUC ($n = 10-11$ 10–11 mice/group). F: Plasma insulin levels ($n = 9$ mice/group). G: HOMA-IR index ($n = 5$ mice/group). H: Glucagon fasting levels ($n = 1$ 5 mice/group). I: CORT fasting levels (n = 5 mice/group). J: Epinephrine fasting levels (n = 5–6 mice/group). **P < 0.01 vs. HFD AMPK α 1^{flox/flox}. Statistical significance was determined by Student t test. Data are expressed as mean \pm SEM. EPI, epinephrine.

[Fig. 4](http://diabetes.diabetesjournals.org/lookup/suppl/doi:10.2337/db17-1538/-/DC1)A). Overall, these findings indicate that targeting of $AMPK\alpha1$ in SF1 neurons not only ameliorated obesity but also reversed associated impaired glucose metabolism.

DISCUSSION

Hypothalamic AMPK has been implicated in the regulation of feeding, BAT thermogenesis, browning of WAT, muscle metabolism, hepatic function, and glucose homeostasis (8–10,19,25,26), as well as being involved in diet-induced leptin resistance (17,18). From a therapeutic perspective, this evidence is relevant since several agents with potential antiobesity and/or antidiabetic effects, such as nicotine (13,37), metformin (38), and liraglutide (15), some of which are even in clinical use, act through AMPK, either peripherally or centrally. Furthermore, the orexigenic and weight-gaining effects of antipsychotic drugs, such as olanzapine, are also mediated by hypothalamic AMPK (39). Therefore, hypothalamic AMPK might theoretically be considered an interesting target for drug development due to its potential to modulate both sides of the energy balance equation, namely food intake and EE (19,20). However, it is unclear 1) whether specific inhibition of hypothalamic AMPK could ameliorate obesity, 2) which AMPK isoform would be the best to target, and 3) which neuronal AMPK-expressing population should be targeted.

Global inhibition of AMPK α 1 and AMPK α 2 in the VMH ameliorated ovariectomy-induced obesity in female rats (11). Moreover, it has been reported that specific ablation of AMPK α 2 in POMC or agouti-related peptide (AgRP) neurons of the ARC produce opposite phenotypes. Indeed, whereas POMC AMPKa2 null mice display hyperphagia and obesity, AgRP AMPKa2 null mice were hypophagic and lean (6). Our data show that global inhibition of AMPK α 1 and AMPK α 2 within the VMH markedly decreased HFD-induced obesity in a feedingindependent manner involving increased BAT thermogenesis and EE. These latter effects occurred also when $AMPK\alpha1$ was inhibited in the VMH of DIO rats but were not mimicked by targeting of $AMPK\alpha$ 2. Notably, the effect of global inhibition of both isoforms is recapitulated by selective ablation of $AMPK\alpha1$ in SF1 neurons of the VMH, which play a major role in the sympathetic traffic to the BAT (10,40,41). The relevance of these data is reinforced by findings in our animal model, namely the SF1-Cre $AMPK\alpha1^{flowflow}$ mouse, which support our evidence demonstrating that AMPK signaling in the VMH, and specifically in SF1 neurons, is a canonical mechanism modulating energy balance (7,9–11,15,16,26,42). Importantly, our results also point to AMPK α 1, but not AMPK α 2, as the $main$ catalytic $AMPK\alpha$ subunit in the VMH that mediates thermogenic control. This is supported by several findings. First, both thyroid hormones and estradiol decrease the expression and/or activity of $AMPK\alpha1$ but not $AMPK\alpha2$ (7,11,42). Second, the catabolic effects of those hormones, bone morphogenetic protein 8B (BMP8B), nicotine, and liraglutide are reversed by specific activation of AMPKa1 in the VMH (7,9–11,15,16,26,42). Third, the hypothalamic effects of the α 2 subunits are frequently linked to regulation of food intake (4,6,22,43,44) and not thermogenesis, as confirmed in our current experiments involving VMH administration of AMPKa2-DN isoforms. Finally, SF1-Cre AMPK α 1^{flox/flox} mice exhibited a significant compensatory upregulation of the AMPKa2 isoform within the VMH; however, null mice still displayed a markedly thermogenic phenotype, indicating that the increase in AMPKa2 was unable to counteract the effect of AMPKa1 deficiency on BAT and WAT function. Overall, this evidence reinforces the idea that both $AMPK\alpha$ isoforms are playing different roles in the hypothalamus and that whereas $AMPK\alpha1$ modulates thermogenesis, $AMPK\alpha2$ does not. Further work involving the specific knockdown of α 1 or α 2 isoforms in other specific hypothalamic populations is warranted to better understand this pathway.

Activation of BAT and browning of WAT may represent a therapeutic strategy to combat obesity (45–47); however, the specific control of this process by a central mechanism is still unclear. Therefore, our findings showing that specific targeting of the discrete neuronal population of SF1 neurons in VMH impacts obesity by modulating thermogenesis in a feeding-independent manner is of translational relevance. Notably, that action also occurs in the absence of appetite-compensatory changes in the SF1-Cre $AMPK\alpha1^{flow\overline{f}$ mice, which excludes undesired rebound effects. Regarding this, HFD SF1-Cre AMPK $\alpha1^{\rm flow/flox}$ mice also exhibit a clear amelioration of the diet-induced metabolic disorders, as demonstrated by improved glucose homeostasis. Although this may be related to the weightreducing effects of AMPKa1 deletion in SF1 neurons, direct effects cannot be ruled out. The fact that these mice showed higher 18 F-FDG uptake analyzed by PET-CT was indicative of a primary mechanism for increased glucose clearance, likely independent of the weightreducing factor. In keeping with this, our results showed that when fasted, SF1-Cre $AMPK\alpha1^{flow/flox}$ animals displayed lower levels of glucagon and CORT, indicating an abnormal counterregulatory response to hypoglycemia. Moreover, biochemical data were consistent with decreased gluconeogenesis and increased glycolysis, and therefore lower hepatic glucose production in the liver of null mice.

Current evidence points to using multifactorial strategies for the treatment of obesity. The unimolecular combination of different compounds, such as peptide conjugates (with other peptides or steroid/thyroid hormones), has yielded very successful and promising preclinical and clinical (phases 1–2) results (48–50). These strategies target different molecules/receptors to broadly and simultaneously affect several aspects of energy homeostasis, such as feeding, EE, and glucose metabolism (48–50). The fact that hypothalamic AMPK controls all those aspects makes it an interesting and unique candidate for obesity treatment (19,20). In this sense, it has been demonstrated that AgRP AMPKa2 null mice tend to have lower body weight when exposed to an HFD (6). This suggests that the concomitant targeting of $AMPK\alpha$ in SF1 neurons of the VMH and AgRP neurons in the ARC may allow to control both feeding and EE by inhibiting a single molecule, namely AMPK. However, this is challenging for several reasons. First, the strategy must ensure the specific inhibition of hypothalamic AMPK given the differential regulation of this enzyme between the hypothalamus and the peripheral tissues (4,8,9,51), where it would have deleterious consequences (for example, worsening insulin resistance and diabetes). Second, the possible choices to specifically target hypothalamic AMPK seem limited. Optogenetic modulation of central AMPK has been successfully achieved in rodents (52); however, at the current stage, its implementation in clinics appears distant. The utilization of nanoparticles (53) might be an interesting option. Finally, chimeras combining glucagon-like peptide-1 (GLP-1) with estradiol (54) or glucagon with T3 (55), all of which inhibit hypothalamic AMPK (7,11,12,15), would allow targeting of hypothalamic AMPK. Further work is warranted to answer these questions.

In conclusion, our data identify the $AMPK\alpha1$ isoform in SF1 neurons of the VMH as the energy sensor regulating energy balance, its inhibition being sufficient to ameliorate obesity in a feeding-independent, but thermogenicdependent, manner. This finding also opens the need for further functional assessment of the two AMPKa isoforms in the different homeostatic processes controlled by the hypothalamus. Finally, these results suggest that targeting this energy sensor in specific sets of neurons may be a suitable strategy to combat obesity and related metabolic complications.

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