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Non-targeted ¹H-NMR-metabolomics suggest the induction of master regulators of energy metabolism in the liver of vitamin E-deficient rats

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2 Abstract

3 The essential function of vitamin E in vivo is not fully understood. Several studies addressed
4 changes in the pattern of gene expression induced by vitamin E, but often did not investigate
5 if these changes altered biochemical pathways and are eventually translated into biological
6 function. We therefore used ¹H-NMR metabolomics to investigate the biochemical effects in
7 the liver of rats caused by long-term feeding with diets deficient (dVE; α-tocopherol (αT), <1;
8 γ-tocopherol (γT), <1; all values in mg/kg diet), marginal (mVE; αT, 6; γT, 11), sufficient
9 (sVE; αT, 12; γT, 24), or fortified with vitamin E (fVE; αT, 140; γT, 24). The concentrations
10 of four polar hepatic metabolites were affected by the vitamin E content of the diet; glucose
11 was lower and creatine, phosphocholine, and betaine were higher in deficient compared with
12 rats receiving vitamin E. To achieve further biochemical insight, we investigated
13 transcriptional changes in genes involved in the regulation of metabolic pathways related to
14 these metabolites. Transcription of PGC1α, PPARα, and PPARγ, transcription factors
15 controlling energy metabolism, was lower and that of the fatty acid translocase CD36 higher
16 in animals fed vitamin E-deficient compared to those fed vitamin E-replete diets. Our data
17 thus indicate that consumption of a vitamin E-deficient diet may alter hepatic energy
18 metabolism in rats.

19

20 **Keywords:** Energy metabolism; Glucose; Liver; Metabolites; NMR metabolomics; Rats;
21 Tocopherols; Vitamin E

22 **1 Introduction**

23 Vitamin E was discovered in 1922 by Herbert M. Evans and Katherine S. Bishop as a dietary
24 factor required for foetal development and successful reproduction in rats.¹ A number of
25 deficiency syndromes, such as muscular dystrophy and neuronal dysfunction, were described
26 in subsequent years.² Toward the end of the 1930s, the in vitro antioxidant activity of vitamin
27 E was discovered³ and for the following decades assumed to be its major in vivo-function.⁴
28 Other biological activities of vitamin E, including roles in cell signalling, gene expression,
29 immune response, and apoptosis, have been described more recently (reviewed in ^{5,6}). To this
30 day, more than 90 years after the discovery of vitamin E,¹ no specific biochemical function
31 that explains the essentiality of this micronutrient has been described.

32 Vitamin E is not a single entity, but comprises the eight naturally occurring and
33 structurally related substances α -, β -, γ -, and δ -tocopherol and α -, β -, γ -, and δ -tocotrienol,^{5,7}
34 of which α -tocopherol (α T) is the predominant vitamin E congener and the major lipid-soluble
35 antioxidant in humans.⁸ Vitamin E is absorbed together with other lipids in the small intestine,
36 packaged into chylomicrons and transported via the lymph and the portal vein to the systemic
37 circulation from where it is taken up into the liver. The liver preferentially metabolizes the
38 non- α T congeners to side-chain truncated water-soluble carboxyethyl hydroxychromanols,
39 which are eliminated via the bile and urine, and secretes predominantly α T and to a lesser
40 degree γ T into the bloodstream.^{9,10} Thus, the liver is the central organ for vitamin E turnover.

41 A number of studies reported changes in the pattern of gene expression induced
42 by vitamin E,¹¹⁻¹³ but did not investigate if the changes in mRNA expression affected
43 biochemical pathways and were eventually translated into function. Using a metabolomics
44 approach, we have previously observed a shift in the profile of metabolites in response to
45 vitamin E-deficiency in rats.¹⁴

46 In the present study, we used ^1H -NMR-based metabolomics to investigate the
47 biochemical consequences of long-term feeding of deficient, marginal, sufficient or high
48 dietary concentrations of vitamin E on hepatic metabolism in rats. Using a bottom-up
49 approach, we investigated the pattern of gene expression upstream of the metabolic changes
50 identified by NMR-metabolomics in order to generate new hypotheses that could be tested in
51 independent experiments to uncover the essential biological function of vitamin E.

52

53 2 Material and Methods

54 2.1 Experimental animals, diets, and study design

55 The animal experiment was performed in accordance with the guidelines for the care and use
56 of animals for experimental procedures and approved by the Ministry of Agriculture,
57 Environment and Rural Areas of the state of Schleswig-Holstein (Germany). Other aspects of
58 this feeding trial and details regarding the preparation of the experimental diets and animal
59 performance were previously published.^{15, 16} Briefly, 32 male Fisher 344 rats (Charles River
60 Laboratories, Sulzfeld, Germany) with a mean initial body weight of 51 ± 5 g (mean \pm SD)
61 were randomly divided into four groups of eight animals each and fed a vitamin E-deficient
62 (dVE; α T, <1; γ T, <1; all values in mg/kg diet), vitamin E-marginal (mVE; α T, 6; γ T, 11),
63 vitamin E-sufficient (sVE; α T, 12; γ T, 24), or vitamin E-fortified (fVE; α T, 140; γ T, 24)
64 experimental diet (ssniff Spezialdiäten GmbH, Soest, Germany) for 6 months. The
65 concentrations and α T and γ T compositions of the diets were chosen to mimic a deficient,
66 marginal, and sufficient dietary intake of vitamin E from vegetable oils, where the ratio of α T
67 to γ T would be identical, and the use of dietary supplements (which consist of α T only),
68 which would increase α T intake only. The composition of the semi-synthetic diet was as
69 follows (g/kg diet): casein, 240; maize starch, modified, 480; glucose, 110; cellulose, 50; VE-
70 free vitamin premix (E15313-2), 10; mineral premix (E15000), 60; rapeseed oil, 50; all
71 vitamin E in the four diets originated from the respective (vitamin E-stripped, native, or a mix
72 of stripped and native) rapeseed oils used¹⁵. The rats were housed in Macrolon III cages in a
73 conditioned room (22 ± 2 °C, 55 % relative humidity, 12 h light/dark cycle) and had free
74 access to tap water and the experimental diets. After the 6-month feeding period, the rats were
75 fasted for 12 h prior to CO₂-anaesthesia and decapitation. The liver was excised, snap-frozen
76 in liquid nitrogen, and stored at -80 °C until extraction.

77 2.2 Liver extraction

78 Rat liver samples were extracted using a method already described with slight modification.¹⁴
79 In brief, liver samples (about 100 mg) were homogenized for 1 min in ice-cold methanol-
80 chloroform (2:1, v/v, 3 mL) using a Heidolph DiAx 600 homogenizer (Schwabach, Germany).
81 Samples were then sonicated for 30 min and, after the addition of 1 mL ice-cold water and
82 1 mL ice-cold chloroform, vortexed for 1 min, and centrifuged at $4000 \times g$ for 20 min (to
83 allow phase separation). The aqueous supernatant (2.1 mL out of 3 mL polar phase) was then
84 collected, dried using an evacuated centrifuge (Savant, SVC 100H, Savant Instruments INC,
85 New York, NJ, USA) and reconstituted by adding 550 μL of sodium phosphate buffer
86 (0.25 M, pH 7.0) and 30 μL of internal standard solution (1 mM sodium-3-(trimethylsilyl)-
87 2,2,3,3-tetradeuteriopropionate (TSP); Cambridge Isotope Laboratories, Andover, MA, USA),
88 and 40 μL of D_2O , before NMR analysis.

89 2.3 NMR metabolomics of polar liver extracts

90 All NMR analyses of liver extracts were performed on a Bruker spectrometer operating at 400
91 MHz equipped with auto-sampler. ^1H NMR spectra of liver samples were acquired using the
92 zgpg30 pulse sequence (Bruker Spectrospin Ltd.) at 25°C with 400 scans and 32,768 data
93 points over a spectral width of 6410.25 Hz. Acquisition time was 2.55 s, and relaxation delay
94 was 3.0 s (Fig. 1). NMR signals were identified primarily using the NMR Suite 6.1 library
95 (Chenomx Inc., Edmonton, Canada), Human Metabolome Data Base, Biological Magnetic
96 Resonance Data Bank, or spiking with authentic standard, and were confirmed with 2D NMR
97 in the event of multiplicity.
98 The spectral data were processed using Bruker Topspin 1.3 software and were Fourier-
99 transformed after multiplication by a line broadening of 0.3 Hz and referenced to TSP at 0.0
100 ppm. Spectral phase and baseline were corrected manually. Each spectrum was integrated

101 using Amix 3.7.3 (Bruker BioSpin GmbH, Rheinstetten) into 0.01 ppm integral regions
102 (buckets) between 0.5-9.5 ppm in which areas between 4.45-5.35 ppm containing residual
103 water were removed (total of 810 buckets). Each spectral region was then normalized to the
104 intensity of internal standard (TSP), which insures the generation of semi-quantitative data
105 after adjusting for the weight of liver sample extracted.

106

107 **2.4 Hepatic glutathione and glutathione disulfide**

108 Hepatic glutathione and glutathione disulfide were quantified by a published method¹⁷, with
109 modifications. HPLC-grade solvents, perchloric acid, EDTA, and phosphoric acid were
110 purchased from Carl Roth GmbH (Karlsruhe, Germany). Sodium dihydrogen phosphate, 1-
111 octanesulfonic acid and glutathione (G6529, 98-100 % pure; CAS no. 70-18-8) and
112 glutathione disulfide (G4376, 98 % pure; CAS no. 27025-41-8) standards were from Sigma-
113 Aldrich (Steinheim, Germany). Liver tissue (200 mg) was thawed on ice and placed in a 2 mL
114 microcentrifuge tube. One mL ice-cold 10% perchloric acid solution (0.4 N perchloric acid;
115 100 nM EDTA) was added and samples were sonicated three times for 15 s each. The
116 homogenates were centrifuged ($24500 \times g$, 4 °C, 15 min) and 100 μ L supernatant was
117 transferred to an HPLC vial, diluted with 100 μ L mobile phase, and 10 μ L were injected into
118 a JASCO X-LC HPLC system (autosampler, 3159-AS; two pumps, 3185-PU; solvent mixer,
119 3180-MX; degasser, 3080-DX; Jasco, Groß-Umstadt, Germany) and detected on an ESA
120 5600A electrochemical detector equipped with a boron-doped diamond electrode (model
121 5040; Dionex, Idstein, Germany). Separation of the analytes was achieved on a Reprisil C18
122 column (5 μ m, 250 \times 3 mm; Trentec-Analysentechnik, Rutesheim, Germany) using 25 mM
123 sodium dihydrogenphosphate, 1.4 mM 1-octanesulfonic acid, and 6% acetonitrile (adjusted to
124 pH 2.65) as mobile phase at a flow rate of 0.6 mL/min. The potential was set to +1500 mV
125 (vs. a palladium reference electrode) with a clean cell-treatment at +1900 mV for 30 s and a

126 re-equilibration time of 5 min between injections. Peaks were recorded and integrated with
127 the chromatographic software CoulArray 3.10 (ESA Inc., Chelmsford, MA, USA) and the
128 concentrations of glutathione (GSH) and glutathione disulfide (GSSG) were quantified
129 against authentic external standards.

130

131 **2.5 Quantification of α -tocopherol in liver tissue**

132 Liver α T concentrations were determined by HPLC with fluorescence detection as previously
133 reported.¹⁸

134

135 **2.6 RNA isolation and real-time qRT-PCR**

136 Total RNA was extracted using the RNeasy[®] Lipid Tissue Protocol (Qiagen) and DNA was
137 digested with the RNase-Free DNase Set (Qiagen). RNA concentrations were determined
138 spectrophotometrically by measuring the absorbance at 260 nm, and RNA purity was
139 determined using the absorption ratio at 260/280 nm with a ratio of 1.6-1.9 considered
140 acceptable. RNA aliquots were stored at -80 °C until PCR analysis. Primer sequences (see
141 Supporting Information Table) for real-time RT-PCR experiments were designed with
142 Primer3 software (version 0.4.0; http://frodo.wi.mit.edu/cgi-bin/primer3/primer3_www.cgi)
143 and primer pairs were obtained from MWG Biotech AG (Ebersberg, Germany). One-step
144 quantitative reverse transcriptase PCR was carried out with the QuantiTect[®] SYBR[®] Green
145 RT-PCR kit (Qiagen). Each PCR reaction (final volume 20 μ L) contained 0.45 μ L of the
146 respective forward and reverse primers, 22.5 μ L of QuantiTect[®] SYBR[®] Green RT-PCR
147 Master Mix, 0.45 μ L QuantiTect RT-Mix, 18.0 μ L of RNA dilution and 3.15 μ L of water.
148 Real-time PCR amplification was performed in a Rotor-Gene 3000 thermocycler (Corbett
149 Research, Sydney, Australia).

150 **2.7 Quantification of triacylglycerols (TAG), cholesterol and glucose in plasma**

151 TAG, cholesterol and glucose in plasma were measured using the diagnostic kits (OSR61118
152 for TAG, OSR 6116 for cholesterol and OSR 6121 for glucose; Beckman Coulter, Krefeld,
153 Germany) adapted for the Olympus AT200 auto analyzer.

154 **2.8 Statistical analysis of the concentrations of discriminative metabolites in polar liver**
155 **extracts**

156 Principal component analysis (PCA) and orthogonal partial least squares-discriminant
157 analysis (OPLS-DA) were performed using SIMCA-P+ 12.0.1 software (UMETRICS, Umeå,
158 Sweden) after centering and Pareto-scaling of the spectral data as previously described.¹⁴ In
159 the first step of multivariate data analysis, the metabolic profile of the polar phase of liver in
160 each treatment was compared with those in other treatments using separate PCA and OPLS-
161 DA models (total of six comparisons; **Table**) including all 810 spectral buckets generated
162 after binning the NMR spectra between 0.5-9.5 ppm. The NMR signals (Buckets) were
163 identified as discriminating response variable in comparison between each two treatments if
164 their OPLS-DA variable influences on projection (VIP) ≥ 1 and VIP jackknife-based
165 confidence intervals (95% CI) were not close to or included zero. The presence of outliers
166 was investigated using PCA-Hotelling T² Ellipse (95% CI), and the normality of multivariate
167 data was investigated using the normal probability plot of PCA model in each step of
168 multivariate data analysis. The multivariate data were normally distributed. The significance
169 of OPLS-DA model was tested using cross-validated (CV) ANOVA (P<0.05). CV-ANOVA
170 is a diagnostic tool for assessing the reliability of OPLS models.¹⁹ The diagnostic is based on
171 an ANOVA assessment of the cross-validatory predictive residuals of an OPLS-DA model.
172 Cross-validated ANOVA tests whether the model has significantly smaller cross-validated
173 predictive residuals than just the variation around the global average.¹⁹

174 In order to produce an overall view, the spectral data corresponding to the metabolites
175 including 19 buckets, which were found as discriminative in previous stage after paired
176 comparison of each two treatments, were used to generate new PCA and OPLS-DA models
177 incorporating all four treatments. One rat from the dVE group in the OPLS-DA model and
178 one rat from the fVE group in the PCA model were identified as outliers based on Hotelling
179 T^2 Ellipse (95% CI) and therefore omitted.

180 The absolute concentrations of the metabolites, which their corresponding NMR signals were
181 found discriminative in OPLS-DA model incorporating all four treatments, were calculated
182 from the NMR spectra using NMR Suite 7.1 profiler (ChenomX Inc, Edmonton, Canada) and
183 internal standard (TSP) after correction for overlapping signals. The absolute concentrations
184 of the discriminative metabolites were further investigated by 1-way ANOVA followed by
185 Tukey multiple comparison test. The absolute concentrations of metabolites were log-
186 transformed before ANOVA, when the distribution was skewed (Anderson-Darling test,
187 $P < 0.05$).

188 3 Results

189 Body weights of rats fed vitamin E-deficient (dVE; 363 ± 12 g), -marginal (mVE; 367 ± 18
190 g), -sufficient (sVE; 372 ± 21 g), or -fortified (fVE; 349 ± 21 g) diets for 6 months did not differ
191 significantly at the end of the experiment, as described in detail earlier.^{15, 16} No signs of
192 vitamin E-deficiency (ataxia) or other adverse effects were observed after 6 months in animals
193 on the vitamin E-deficient (< 1 mg/kg diet) or any of the other diets^{15, 16}, which is in agreement
194 with previous studies.^{14, 20, 21}

195 The mean concentrations of α T in the liver increased significantly with
196 increasing VE intake (**Figure 1**). The comparisons of the metabolic profiles were performed
197 between each paired treatment groups using separate OPLS-DA models (total of 6

198 comparisons). Metabolites that were found discriminative in each comparison (VIP >1) are
199 presented in **Table**. Twelve metabolites and 5 unknown NMR signals significantly differed in
200 paired comparisons between different treatment groups (**Table**). Next, new PCA (including 8
201 components) and OPLS-DA (including one predictive component and one orthogonal
202 component) models incorporating all four treatments (**Figure 2**) were established using the
203 liver metabolites that were found discriminative at the previous stage (paired comparison)
204 (**Table**). OPLS-DA model parameters for one predictive component were: $R^2X = 0.46$, $R^2Y =$
205 0.33 , $Q^2 = 0.32$, CV-ANOVA $p = 0.011$; PCA model parameters were: R^2X first component =
206 0.479 , R^2X second component = 0.26 .

207 Both, the PCA and the OPLS-DA model indicated clear separation of treatment
208 groups along the first component (**Figure 2**). The treatments dVE and fVE were located
209 farthest from each other along the first component indicating the largest metabolic differences
210 (**Figure 2**). Four out of fourteen metabolites, namely glucose, betaine, phosphocholine, and
211 creatine, were found discriminative along the first predictive component of the OPLS-DA.
212 The absolute concentrations of these four metabolites were calculated from the NMR spectra
213 and compared using 1-way ANOVA. There was a significant difference ($P < 0.05$) in hepatic
214 glucose, creatine, betaine, and phosphocholine in response to dietary vitamin E (**Figure 1**).

215 Analysis of variance revealed significant differences in hepatic glutathione
216 ($P < 0.01$; **Figure 1**), plasma total cholesterol ($P < 0.001$), and plasma triacylglycerol (TGA;
217 $P < 0.01$; **Figure 3**), and relative hepatic mRNA expression of peroxisome proliferator-
218 activated receptor α (PPAR α) ($P < 0.01$) and γ (PPAR γ ; $P < 0.001$), peroxisome proliferator-
219 activated receptor gamma coactivator 1- α (PGC1 α ; $P < 0.05$), scavenger receptor/fatty acid
220 translocase CD36 ($P < 0.001$), α -tocopherol transfer protein (α -TTP; $P < 0.01$), and glucose-6-
221 phosphatase (G6PC; $P < 0.01$) (**Figure 4**) between treatments. However, the trend across the
222 treatments did not occur uniformly for the different variables reported above (**Figures 1-4**).

223 There were no significant differences in hepatic glutathione disulfide (GSSG),
224 the hepatic GSH/GSSG ratio (Figure 1), plasma glucose (**Figure 3**) and relative hepatic
225 mRNA expression of hypoxia-inducible factor 1- α (HIF1 α), sterol regulatory element-binding
226 protein 1 (SREBP1), insulin-like growth factor binding protein 1 (IGFBP1) and 2 (IGFBP2),
227 phosphofructokinase (PFK), fructose-1,6-bisphosphatase (FBP), and phosphoenolpyruvate
228 carboxykinase (PCK; data not shown).

229

230 **4 Discussion**

231 Several cellular functions that may or may not be independent of its antioxidant activity,
232 including the regulation of gene expression and modulation of signalling pathways, have been
233 attributed to vitamin E.⁶ In order to elucidate the cellular function(s) of vitamin E, it is
234 important to investigate if events on the level of gene transcription and translation ultimately
235 are converted into a biological activity that is reflected by metabolic changes. Therefore, in
236 the present study, we used a bottom-up metabolomics approach to examine the biochemical
237 effects of increasing dietary doses of vitamin E in a rat model and to investigate the coherence
238 between transcriptional and metabolic effects. We chose the liver as the target tissue, because
239 it is the central organ in vitamin E trafficking and metabolism, and focused on metabolites in
240 the polar phase to reflect the metabolism.

241 We observed lower glucose concentrations in the liver of rats fed deficient
242 compared with those fed fortified diets (**Figure 1B**), which is consistent with our previous
243 metabolomics study on vitamin E deficiency in rats.¹⁴ There was a positive correlation
244 between glucose and glycogen in the liver ($R^2=70.7\%$; $P<0.001$). Although the experimental
245 diets dose-dependently increased hepatic α T, liver glucose concentrations did not differ
246 significantly between the dVE, mVE, and sVE groups (**Figure 1B**).

247 In order to test the notion that lower glucose concentrations in the livers of rats
248 fed vitamin E-deficient diets might be associated with reduced gluconeogenesis during
249 fasting, we measured the relative mRNA expression of PGC1 α , which plays a critical role in
250 the maintenance of glucose, lipid, and energy homeostasis.^{22,23} PGC1 α , through
251 transcriptional co-activation of glucocorticoid receptors and the hepatic nuclear factor-4 α
252 (HNF-4 α), activates an entire program of key gluconeogenic enzymes, including
253 phosphoenolpyruvate carboxykinase (PCK) and glucose-6-phosphatase (G6PC).^{24,25}
254 Consistent with this notion, the relative mRNA expression of PGC1 α (**Figure 4A**) followed
255 the same pattern as the glucose content in the liver (**Figure 1B**) and was lower in dVE
256 compared with fVE. This is in general agreement with induced PGC1 α protein in the brain of
257 guinea pigs orally administered tocotrienol-rich rice bran extract.²⁶ Furthermore, the PGC1 α
258 target gene G6PC was down-regulated in animals fed the vitamin E-deficient diet (**Figure**
259 **4F**). PGC1 α further modulates lipid/energy metabolism through co-activation of PPAR α and
260 PPAR γ . Therefore, we measured the relative mRNA expression of these nuclear receptors,
261 which too was lower in the livers of animals fed vitamin E-deficient compared to vitamin E-
262 containing diets. Consistently, PPAR γ expression is up-regulated by vitamin E (both α T and
263 γ T) in colon cancer cells (SW480)²⁷, prostate cancer cells²⁸ and keratinocytes²⁹. PGC1 α can
264 promote insulin resistance in the liver through PPAR α -dependent induction of mammalian
265 tribbles homolog (TRB-3), which is a fasting-inducible inhibitor of the serine-threonine
266 kinase Akt/PKB and insulin signalling.³⁰ Lower expression of PPAR α and PGC1 α in the
267 present study may suggest alleviated inhibitory effects of the downstream TRB-3 on insulin
268 signalling when on a vitamin E-deficient diet. Insulin is an inhibitor of gluconeogenesis in the
269 liver. Therefore, reduced hepatic glucose in animals fed the vitamin E-deficient diet might be
270 the result of increased insulin signalling in the liver. Plasma glucose concentrations, however,
271 did not differ between groups (**Figure 3**), which is likely explained by the fact that our

272 animals were fasted for >12 h prior to blood sampling and any differences in postprandial
273 blood glucose were already evened out.

274 We further investigated the metabolic effects of vitamin E on the interplay
275 between glucose and lipid metabolism by measuring other parameters associated with lipid
276 metabolism. Plasma total cholesterol and TAG were lower in animals fed deficient compared
277 with fortified diets (**Figure 3**). Intriguingly, the hepatic mRNA expression of the fatty acid
278 transporter CD36 was higher in the dVE than in the mVE, sVE, and fVE groups (**Figure 4**).
279 These findings are consistent with previous observation in smooth muscle cells and
280 macrophages, where incubation with α T reduced CD36 expression.^{31, 32} The increased CD36
281 and reduced PPAR α , PPAR γ , and PGC α 1 in vitamin E-deficiently fed animals may indicate
282 higher fatty acid uptake and lower β -oxidation in their liver. In agreement with this, α T
283 supplementation was recently shown to decrease CD36 expression and TAG accumulation in
284 the liver of guinea pigs.³³ Unfortunately, due to the limited amount of liver tissue available,
285 we were not able to determine hepatic TAG in our rats. The present findings suggest that
286 vitamin E supplementation may reduce hepatic fatty acid uptake via reduced CD36 expression
287 and may increase fatty acid metabolism (indicated by up-regulated expression of PPAR α ,
288 PPAR γ , and PGC α 1) and thereby reduce lipid accumulation.

289 An increase in the creatine content of liver was observed in the present
290 experiment, which is consistent with previous findings in the liver of vitamin E-deficient
291 rabbits and mice.^{34, 35} Creatine is synthesized mainly in the liver. Its main role is in the
292 creatine kinase/phosphocreatine system as a part of the cell's energy shuttle. The creatine
293 kinase/phosphocreatine energy shuttle, via highly diffusible phosphocreatine and creatine,
294 connects subcellular sites of ATP production (e.g. glycolysis and mitochondrial oxidative
295 phosphorylation) with sub-cellular sites of ATP utilization.³⁶ Increased creatine in animals on
296 a vitamin E-deficient diet (**Figure 1E**) may indicate changes in energy metabolism and energy

297 balance that may be consistent with the observed changes in hepatic glucose (**Figure 1B**), and
298 the expression of master regulators of energy metabolism (PGC1 α , PPAR α , and PPAR γ ;
299 **Figure 4**). It is important to understand if the increase in hepatic creatine concentrations in
300 dVE is caused by induction of creatine biosynthesis and/or changes in creatine kinase activity.
301 Creatine kinase, the enzyme converting creatine to phosphocreatine, is inactivated by reactive
302 oxygen species,³⁷ and PGC1 α is required for the induction of many ROS-detoxifying
303 enzymes,³⁸ which may suggest a link between creatine kinase activity and modulated PGC1 α
304 expression in the present study. Creatine kinase/phosphocreatine is particularly important in
305 cells with high energy requirements such as those in skeletal muscles, kidney, brain, retina
306 photoreceptor cells, and spermatozoa³⁹. Interestingly, vitamin E-deficiency affects
307 predominantly the above-mentioned tissues and deficiency symptoms include muscular
308 dystrophy and neurological dysfunction. This could hint towards a role of impaired energy
309 metabolism in the pathophysiology of vitamin E deficiency.

310 The use of fasted animals (>12 h) to reduce the impact of recent feed intake on
311 the liver metabolome represents a limitation of our study, since fasting affects energy
312 metabolism. We can therefore not exclude that the vitamin E-dependent differences in the
313 polar liver metabolome in the fasting state may differ from that observed in fed animals, a
314 question deserving further attention in targeted investigations of the liver metabolome in
315 vitamin E-deficient animals.

316

317 **Conclusions**

318 Using a bottom-up approach to generate novel hypotheses that can be tested independently
319 and may help to understand the essential biological function of vitamin E, we studied the
320 differences in the abundance of polar metabolites in the liver in response to increasing dietary
321 doses of vitamin E. The most important changes observed include a significant decrease in

322 glucose and increase in creatine in the liver of rats maintained for 6 months on a vitamin E-
323 deficient diet. These findings suggest a change in energy metabolism in dietary vitamin E-
324 deficiency, which were consistent with the pattern of expression of master energy regulators.
325 Based on these findings, we propose that the impact of vitamin E-deficiency on the
326 underlying signalling pathways should be studied in adequately designed models to
327 substantiate or refute the importance of vitamin E for cellular energy homeostasis.

328

329 **Acknowledgments**

330 The study was in part funded by a grant (no. 528/051) from the Union zur Förderung von Öl-
331 und Proteinpflanzen e.V. None of the authors has a known conflict of interest.

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Table. Fold-changes in the contents of metabolites in the aqueous phase of rat liver extracts which were affected by the vitamin E content of the diet^{1,2}. Class 1, deficient (dVE); class 2, marginal (mVE); class 3, sufficient (sVE); and class 4, fortified (fVE).

<i>Metabolites</i>	<i>NMR signal</i>	<i>Class 1-2</i>	<i>Class 1-3</i>	<i>Class 1-4</i>	<i>Class 2-3</i>	<i>Class 2-4</i>	<i>Class 3-4</i>
CH3-	0.88		0.81	0.71	0.77	0.67	
Leucine	0.96	1.15					
Alanine	1.48			1.23			
Glutamine	2.16	1.14			0.83		1.21
Glutamate	2.36				0.81		
Unknown	2.53				0.86		
Unknown	2.55						1.20
Methionine	2.64		0.73				
Creatine	3.04	0.34	0.30	0.32			
Phosphocholine³	3.22	0.63		0.40		0.62	
Betaine	3.27	0.75		0.65			

Unknown	3.29					0.91	
Glucose	3.29–3.90	1.31	1.17	1.44	0.84		1.22
Phosphocholine³	4.18			0.65		0.79	
Glycogen	5.412	1.55	1.31	1.74			1.32
Inosine⁴	6.11	1.43			0.80	0.83	
NAD/NADP/NADPH	8.30				0.69	0.86	
Unknown	8.31						1.31
Inosine⁴	8.36	1.40			0.81	0.83	

¹Fold-changes for each pair of comparisons were calculated by dividing the spectral value of the treatment (class) with the higher digit by that with the lower digit (e.g. signal class 3 divided by signal class 2).

²Metabolites with VIP > 1 and for which the corresponding jackknife-based 95% confidence intervals were not close to or including zero were considered different between each treatment pairs (VIP: Variable influences on projection).

³Two NMR signals of phosphocholine were independently found different between treatments after statistical analysis.

⁴Two NMR signals of inosine were independently found different between treatments after statistical analysis.

Figure 1. Mean α -tocopherol, glucose, phosphocholine, betaine, creatine, glutathione (GSH) and glutathione disulfide (GSSG) concentrations and their ratios in the livers of rats fed a vitamin E-deficient (dVE), -marginal (mVE), -sufficient (sVE), or -fortified (fVE) diet for 6 months. Bars not sharing a common letter are significantly different at $P < 0.05$. Error bars indicate standard deviations. Glucose, phosphocholine, betaine, and creatine were quantified by NMR and α -tocopherol and GSH by HPLC.

Figure 2. Score scatter plot of OPLS-DA model generated using fourteen metabolites found different in pair comparison of the metabolic profile of liver after different treatments. Model parameter for one predictive component: $R^2X = 0.46$, $R^2Y = 0.33$, $Q^2 = 0.32$, CV-ANOVA $p = 0.011$ (A). Score scatter plot of PCA model generated using fourteen metabolites found different in pair comparison of the metabolic profile of liver after different treatments. PCA model parameters were R^2X first component 1 = 0.479, R^2X second component = 0.26. 1-deficient (dVE), 2-marginal (mVE), 3-sufficient (sVE), and 4-fortified (fVE) (B). Score $t[1]$ (component 1) and score $t[2]$ (component 2) are new variables summarizing the variation of X-variables (the intensity of NMR signals corresponding to metabolites). For the OPLS-DA model, score $t[1]$ (orthogonal component 1) summarizes the variation of X-variable, which is unrelated to treatment. R^2X : Fraction of X variation modeled in the component. Q^2 : Overall cross-validated fraction of Y (treatment) variation modeled by X for the component. R^2Y : Fraction of Y variation modeled by Y in the component, using the Y model

Figure 3. Mean fasting plasma glucose, total cholesterol, and triacylglycerol (TAG) concentrations of rats fed a vitamin E-deficient (dVE), -marginal (mVE), -sufficient (sVE), or -fortified (fVE) diet for 6 months. Bars not sharing a common letter are significantly different at $P < 0.05$. Error bars indicate standard deviations.

Figure 4. Relative hepatic mRNA expression (normalized for the geometric mean of the housekeeping genes 18S rRNA, GAPDH, and β -actin) of PGC1 α , CD36, PPAR α , PPAR γ , α TTP, and G6PC in rats fed a vitamin E-deficient (dVE), -marginal (mVE), -sufficient (sVE), or -fortified (fVE) diet for 6 months. Bars not sharing a common letter are significantly different at $P < 0.05$. Error bars indicate standard deviations.

Figure 1

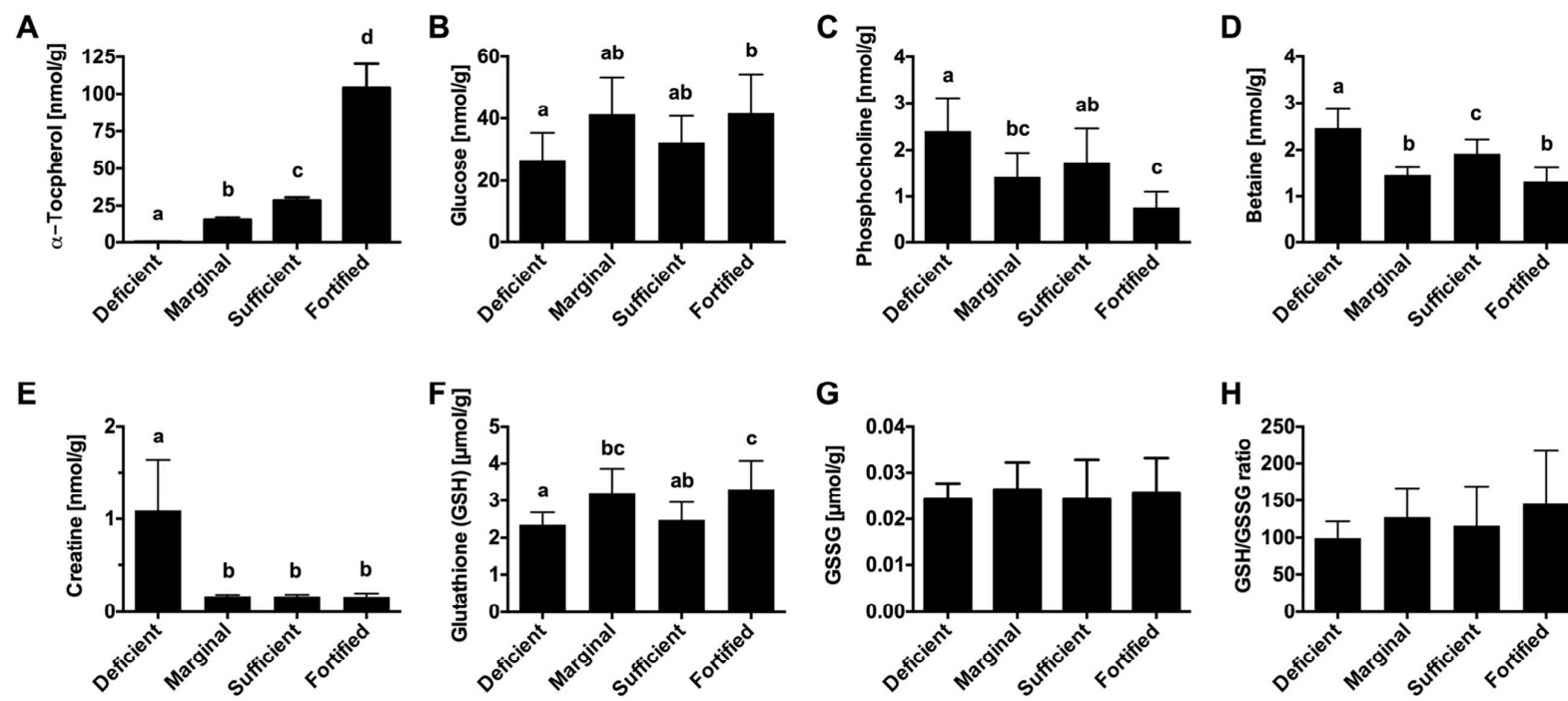


Figure 2

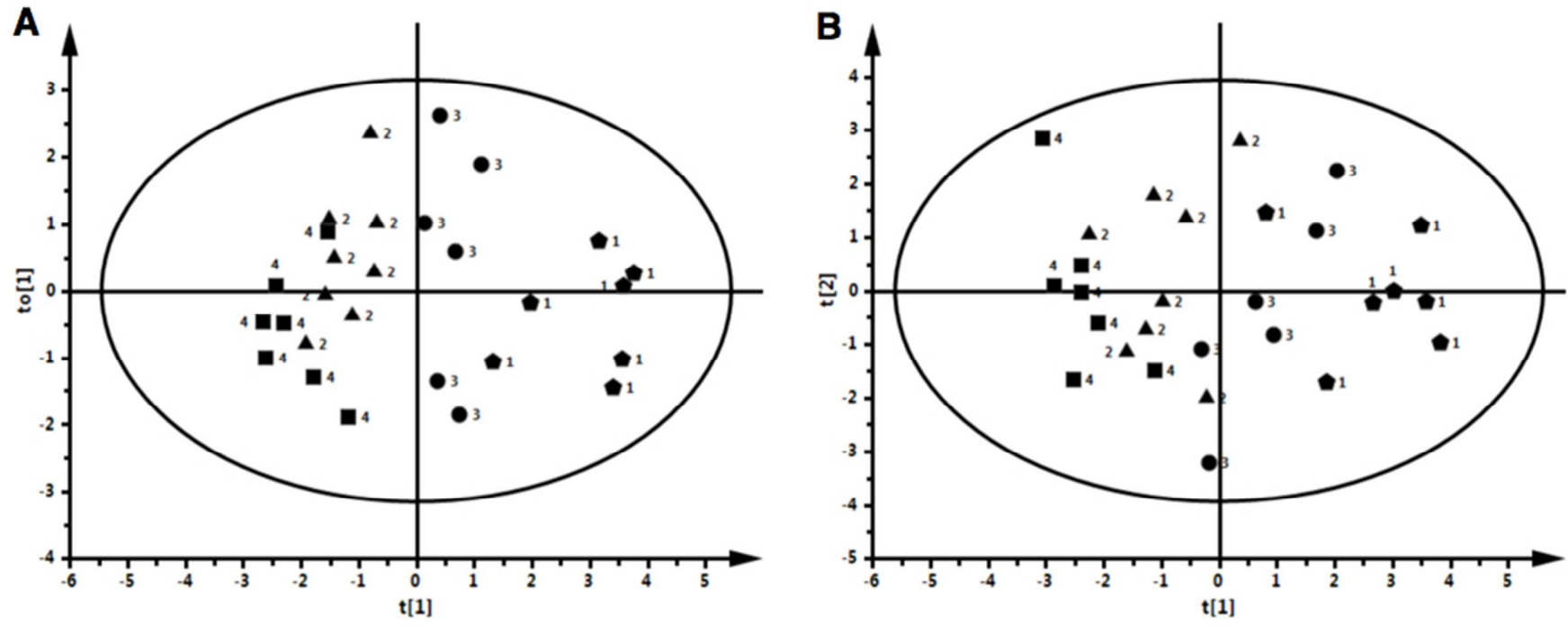


Figure 3

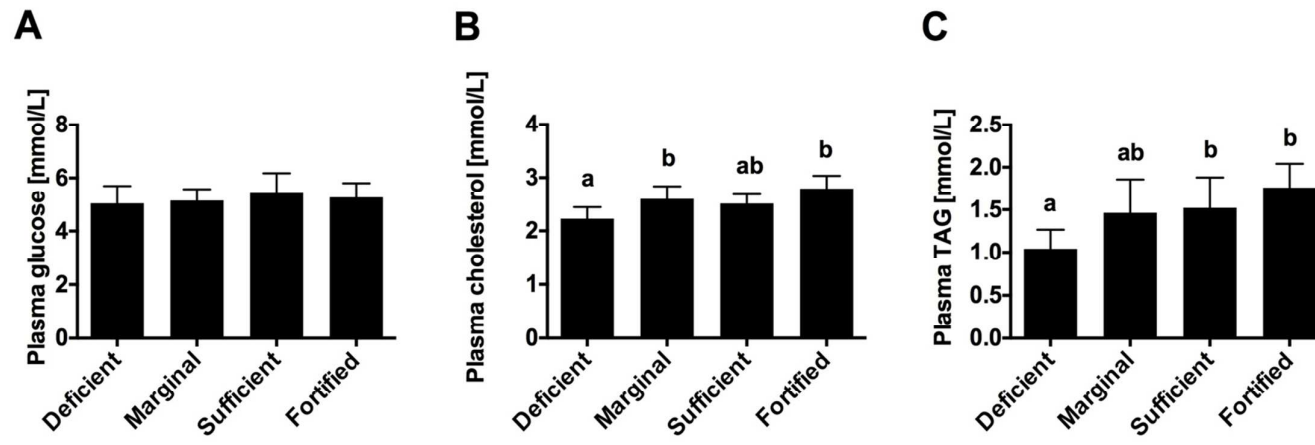


Figure 4

