1	Rutin inhibits oleic acid-induced lipid accumulation via reducing lipogenesis and
2	oxidative stress in hepatocarcinoma cells
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#### 19 Abstract

20 Excessive lipid accumulation within liver has been proposed to cause obesity, 21 hyperlipidemia, diabetes and fatty liver disease. Rutin, a common dietary flavonoid 22 that is consumed in fruits, vegetables, and plant-derived beverages, has various 23 biological functions, including antioxidant, anti-inflammatory and anticancer effects. 24 However, a hypolipidemic effect of rutin on fatty liver disease has not been reported. 25 In this study, we examined the effect of rutin on reducing lipid accumulation in 26 hepatic cells. Hepatocytes were treated with oleic acid (OA) containing with or 27 without rutin to observe the lipid accumulation by nile red stain. The result showed 28 rutin suppressed OA-induced lipid accumulation and increased AMP-activated protein 29 kinase (AMPK) activity in hepatocytes. The expression of critical molecule involved 30 in lipid synthesis, sterol regulatory element binding proteins-1 (SREBP-1), was 31 attenuated in rutin-treated cells. Moreover, long term incubation of rutin inhibited the 32 transcriptions of HMG-CoA reductase (HMGCR), glycerol-3-phosphate 33 acyltransferase (GPAT), fatty acid synthase (FAS) and acetyl-coenzyme carboxylase 34 (ACC). Besides, we also found out the anti-oxidative effect of rutin by increasing the 35 expression of peroxisome proliferator-activated receptor (PPAR)- $\alpha$  and antioxidative 36 enzymes. Taken together, our findings suggest rutin could attenuate lipid 37 accumulation by decreasing lipogenesis and oxidative stress in hepatocyte.

#### 38 Introduction

39 Nonalcoholic fatty liver disease (NAFLD) is characterized by hepatic fat 40 accumulation in the absence of significant ethanol consumption. It comprises of a 41 broad spectrum of liver disease ranging from fat accumulation in the liver (hepatic 42 steatosis) to steatohepatitis and latter progressing to cirrhosis in 10%-25% of cases 43 over 8-10 years (Matteoni and others 1999). Liver plays an essential role in lipid 44 metabolism via regulating it lipogenesis and oxidative stress (Madan and others 2006). 45 Several studies suggest that excessive intake of calories, visceral obesity and insulin 46 resistance will burden liver function and be important risk factors for NAFLD 47 development (Browning and Horton 2004). NAFLD is currently the most common 48 cause of chronic liver disease and an independent risk factor for cardiovascular 49 disease (Targher and others 2007). It is estimated that over 20% of the adult 50 population in developed countries has NAFLD and the incidence in adults and 51 children is rising rapidly because of ongoing epidemics of obesity and type 2 diabetes 52 (Charlton 2004). Therefore, preventing and treating NAFLD are relevant to health 53 promotion.

54 The pathogenesis of the fatty change in NAFLD is multi-factorial. The mechanism 55 underlying fat accumulation of NAFLD is mostly due to the synthesis of fatty acids 56 and inhibition of fatty acid oxidation (Reddy and Rao 2006). Activation of FAS

57 expression through modulation of SREBP-1 has been reported in human breast cancer (Magana and Osborne 1996). Many recent studies have demonstrated that 58 59 transcriptional regulation of the gene for the enzymes of fatty acid synthesis, 60 including FAS, by SREBPs (Magana and others 2000; Heemers and others 2001). In 61 the impairment or inhibition of PPAR- $\alpha$  function and stimulation of SREBP-1, the 62 receptor molecules controlling the enzymes responsible for the oxidation and 63 synthesis of fatty acids respectively, appear to contribute to the overall lipid load in 64 the liver (Bugianesi and others 2002; Browning and Horton 2004). Further, NAFLD is 65 a risk factor for more serious liver alterations, eventually leading to fibrosis and to 66 non-alcoholic steatohepatitis (NASH) (Raman and Allard 2006). Recently, oxidative 67 stress has been postulated to contribute to NASH development. Several studies 68 indicate depletion of antioxidants such as reduced glutathione (GSH), vitamins C and 69 vitamin E was suggested to occur in NASH patients (Leclercq 2004; Videla and 70 others 2004).

Dietary fat is one of the most important environmental factors associated with the incidence of NFLD. Recent studies on fatty liver in food science have focused on the searching for functional food ingredients or herbal extracts that can suppress the accumulation of hepatic lipid. Rutin is a common dietary flavonoid that is consumed in fruits, including tomatoes, vegetables and plant-derived beverages such as tea and

76	wine. It was reported rutin has several pharmacological properties including
77	antioxidant, anticarcinogenic, cytoprotective, antiplatelet, antithrombic,
78	vasoprotective and cardioprotective activities (La Casa and others 2000; Sheu and
79	others 2004; Mellou and others 2006; Melloua and others 2006). Recent reports have
80	suggested rutin uptake can significantly decrease the weights of body, liver organ, and
81	adipose tissue as well as the levels of hepatic triglycerides and cholesterol levels in
82	high-fat diet (HFD) rats (Hsu and others 2009). Here, we attempted to examine the
83	hepatic hypolipidemia effect and possible mechanism of rutin on hepatic lipid
84	metabolism.
85	Materials and method
86	Chemicals
87	The 3-(4, 5-dimethylthiazol-zyl)-2, 5-diphenylterazolium bromide (MTT), nile red,
88	oleic acid, rutin and statin were purchased from Sigma-Aldrich (St. Louis, Mo.,
89	U.S.A.). GPx, PPAR $\alpha$ , SOD and SREBP antibodies were obtained from Santa Cruz
90	Biotechnology (CA, U.S.A.). Anti-pThr172-AMPK and anti-AMPK antibodies were
91	purchased from Cell Signaling Technology (Beverly, MA, U.S.A). Anti-β-actin and
91 92	purchased from Cell Signaling Technology (Beverly, MA, U.S.A). Anti-β-actin and anti-catalase antibodies were purchased from Sigma-Aldrich.

94 Human hepatoma HepG2 cells were obtained from American Type Culture

95	Collection and grown in Dulbecco's modified Eagle's medium supplemented with
96	10% fetal bovine serum, 100 $\mu g/ml$ penicillin, 100 $\mu g/ml$ streptomycin, and 2 mM
97	L-glutamine (HyClone®, Thermo scientific). The cells were cultured at 37°C in a
98	humidified atmosphere of 95% air-5% CO <sub>2</sub> .
99	Cytotoxicity assay
100	HepG2 cells were seeded at a density of 1 $\times$ 10 $^5$ cells/ ml in 24-well plate and
101	incubated with statin, OA and rutin at various concentrations for 24 h. Thereafter, the
102	medium was changed and 0.5 mg/ml MTT was added to incubate for 4 h. The viable
103	cells were directly proportional to the production of formazan. Following dissolved in
104	isopropanol, the absorbance was read at 563 nm with a spectrophotometer (Hatachi
105	3210).
106	Nile red stain
107	HepG2 cells were seeded in a 6-well plate ( $3 \times 10^6$ cells /ml) and treated with 600
108	$\mu M$ OA and different concentrations of rutin for 24 h. After being washed twice with
109	PBS, the cells were fixed with 4% formaldehyde for 30 min and then stained with 1
110	$\mu$ g/ml nile red for 30 min at room temperature. After staining, the distribution of lipid
111	in cells was immediately analyzed by FACScan flow cytometer (Becton Dickinson).
112	Lipid-bounded nile red fluorescence was detected using inverted fluorescence
113	microscopy.

#### 114 **Preparation of protein extract of HepG2 cells**

The proteins of the cells were harvested in a cold RIPA buffer (1% NP-40, 50 mM Tris-base, 0.1% SDS, 0.5% deoxycholic acid, 150 mM NaCl, pH 7.5) containing leupeptin (1.7  $\mu$ g/ml) and sodium orthovanadate (10  $\mu$ g/ml). The cell mixture was vortexed at 4°C for 4 h. All mixtures were then centrifuged at 12,000 rpm at 4°C for 10 min, and the protein contents of the supernatants were determined with the Coomassie Brilliant Blue total protein reagent (Kenlor Industries, USA) using bovine serum albumin as the standard.

#### 122 Western blot analysis

123 Equal amounts of protein samples were subjected to SDS-polyacrylamide gel 124 electrophoresis and electrotransferred to nitrocellulose membranes (Millipore, 125 Bedford, MA, USA). The membranes were blocked with 5% non-fat milk and then 126 incubated with the first antibody at 4°C overnight. Thereafter, membranes were 127 washed three times with 0.1% Tween-20 in PBS and incubated with the secondary 128 antibody conjugated to anti-mouse horseradish peroxidase (GE Healthcare, Little 129 Chalfont, Buckinghamshire, UK). The bands were detected and revealed by enhanced 130 chemiluminescence using ECL western blotting detection reagents and exposed ECL 131 hyperfilm in FUJFILM LAS-3000 (Tokyo, Japan). The protein quantification was 132 determined by densitometry using the FUJFILM-Multi Gauge V2.2 software.

# Reverse transcription-polymerase chain reaction (RT-PCR) Assay

134	To determine the mRNA expression level of HMGCR, FAS, ACC and GPAT in
135	the HepG2 cells, total RNA was extracted using Trizol Reagent Plus kits
136	(GENEMARK Technology Co., Ltd). cDNA synthesis and PCR amplification were
137	performed using the following procedures. For reverse transcription, 4 $\mu g$ of total
138	cellular RNA were used as templates in a 20 $\mu$ l reaction containing 4 $\mu$ l dNTP (2.5
139	mM), 2.5 $\mu$ l Oligo dT (10 pmol/ $\mu$ l), and RTase (200 U/ $\mu$ l); the reaction was performed
140	at 42°C for 1 h. Thereafter, 5 $\mu$ l cDNA was used as a template for PCR amplification
141	with the appropriate primers. The HMGCR primers were forward:
142	5'-AGGTTCCAATGGCAACAACAGAAG-3' and reverse: 5'-ATGCTCCTTGAAC
143	ACCTAGCATCT-3', which amplified a 828 bp fragment, run for 31 cycles at 95°C for
144	1 min, 63°C for 1 min and 72°C for 1 min. The FAS primers were forward: 5'-
145	TACATCGACTGCATCAGGCA-3' and reverse: 5'- GATACTTTCCCGTCGCA
146	TAC-3', which amplified a 553 bp fragment, run for 40 cycles at 95°C for 1 min,
147	58.9°C for 1 min and 72°C for 1 min. The ACC primers were forward:
148	5'-TGAAGGCTGTGGTGATGGAT-3' and reverse: 5'-CCGTA GTGGT TGAGG
149	TTGGA-3', which amplified a 678 bp fragment, run for 40 cycles at 95°C for 1 min,
150	52°C for 1 min and 72°C for 1 min. The GPAT primers were forward:
151	5'-ACACCGGTTTCTGACTTTGG-3' and reverse: 5'-GCCGCTTCTGTTTCTACC

152 AC	G-3', which amplified a 589 bp fragment, run for 28 cycles at 95°C for 1 min, 50°C
153 for	1 min and 72°C for 1 min. The GAPDH primers were forward:
154 5'-'	TCCCTCAAGATTGTCAGCAA-3' and reverse: 5'-AGATCCACAACGGATACA
155 TT	-3', which amplified a 309 bp fragment, run for 30 cycles at 95°C for 1 min, 55°C
156 for	1 min and 72°C for 2 min. The PCR products were visualized on 2% agarose gels

- stained with ethidium bromide. 157
- 158 **Statistical analysis**

1 = 0

- 159 Data was analyzed by an unpaired *t*-test and represented as means  $\pm$  SD. A value
- of p < 0.05 was considered statistically significant. 160
- 161 **Results and discussion**

#### 162 Cytotoxicity of statin, oleic acid and rutin in HepG2 cells

Previous reports using the HepG2 cell line to study lipid metabolism indicated that 163 regulating hepatic LDLR and HMGCR activities could be observed in HepG2 cells 164 165 (Kong and others 2004; Lu and others 2008). Therefore, the HepG2 cells were used in 166 the present study. We further examined the stain pattern to compare the effect of rutin 167 and statin on lipid homeostasis. Herein, statin (or HMGCR inhibitor), a class of drugs that lowers cholesterol level in human, was used as a positive control. Meanwhile, to 168 169 avoid cytotoxicity, the viability of cells treated with various concentrations of OA, 170 statin and rutin was determined by MTT assay. The result indicated the concentration 171 of OA on the inhibition of 50 % of HepG<sub>2</sub> cells viability (IC<sub>50</sub>) was 800  $\mu$ M (Figure 172 1A). Moreover, there were no cytotoxicity toward HepG<sub>2</sub> cells below 10  $\mu$ M statin 173 and 200  $\mu$ M rutin treatment, respectively (Figure 1B and 1C).

## 174 Statin and rutin attenuates lipid accumulation in HepG2 cells

175 To verify the inhibition of statin and rutin of OA-induced lipid accumulation, 176 HepG2 cells were treated with indicated concentrations of statin and rutin in the 177 presence of OA for 24 h. Then cells were stained with 1µg/ml nile red and analyzed 178 by flow cytometry. Both statin and rutin stimulations weakened OA-mediated nile red 179 stains in a dose-dependent manner (Figure 2A). The quantitative data of nile red stains 180 displayed 5 µM and 10 µM statin could reduce 6.63% and 19.68% of lipid accumulation. In response to  $100 \,\mu\text{M}$ ,  $150 \,\mu\text{M}$  and  $200 \,\mu\text{M}$  rutin stimulations, 20.65%, 181 182 29.98% and 38.21% reduction of lipid accumulation were observed (Fig. 2B and 2C). 183 Further analyzing the effect of statin and rutin on triglyceride and cholesterol levels 184 showed 5  $\mu$ M and 10  $\mu$ M statin reduced triglyceride level in OA-pretreated cells by 185 4.2% and 10.06% respectively. In this regard, treating with 100  $\mu$ M, 150  $\mu$ M and 200 186 µM of rutin resulted in 3.86%, 3.67% and 17.85% reduction in triglyceride, respectively (Figure 3A). Additionally, 5 µM and 10 µM statin stimulation resulted in 187 188 a reduction of cholesterol by 24.61% and 34.51%, respectively. 150  $\mu$ M and 200  $\mu$ M 189 rutin reduced cholesterol level by 26.5% and 30.5%, respectively. Based on above

result, it indicates rutin and statin have the same effect on suppressing OA-mediated lipid accumulation (Fig. 2C  $\cdot$  3A and 3B). Our findings consists with other's reports that confirm rutin could significantly reduce the levels of total cholesterol in animals with a high-cholesterol diet (Ziaee and others 2009) and serum cholesterol and triglyceride levels in rats with streptozotocin-induced diabetes and normal rats (Hardie and Carling 1997; Krishna and others 2005).

## 196Rutin inhibits hepatic lipogenesis in HepG2 cells

197 AMPK is a multisubunit enzyme recognized as a major regulator of lipid 198 biosynthetic pathways due to its role in the phosphorylation and inactivation of key 199 enzymes such as ACC (Zhou and others 2001). Recently, a study suggests AMPK 200 mediates a decrease in SREBP-1 protein expression (Auger and others 2005). 201 SREBP-1 is a key lipogenic transcription factor which directly activates the 202 expression of more than 30 genes dedicated to the synthesis and uptake of fatty acids, 203 cholesterol and triglycerides (Brown and Goldstein 1997; Edwards and others 2000; 204 Sakakura and others 2001). We therefore examined the effect of rutin on AMPK activity and the protein expression of A-FABP and SREBP-1. HepG2 cells were 205 206 pre-treated with OA and then exposed to indicated concentrations of rutin for 24 h. 207 Western blot data showed ruitn-treated cells had significant increased 208 phosphorylation level of AMPK up to 1.32 fold (p < 0.01). The expression of SREBP-1

209	was reduced in response to rutin treatment (Fig. 4). There are several reports
210	demonstrate AMPK plays a key role in regulating carbohydrate and fat metabolism,
211	serving as a metabolic master switch response to alterations in cellular energy charge
212	(Winder and Hardie 1999). In fact, activation of AMPK has been to validate a strategy
213	for liver steatosis therapy (Brooks and others 2009). Previous researches indicated
214	that polyphenolic extracts from plenty of plants can activate AMPK (Hwang and
215	others 2005) and suppress FAS expression because it prevents SREBP-1 translocation
216	to the nuclei (Auger and others 2005; Weng and others 2007). In this report, we found
217	rutin has the same ability to activate AMPK and then reduce SREBP-1 expression,
218	finally leading to inhibit hepatic lipogenesis.

## 219 Rutin promotes hepatic antioxiadtive ability in HepG2 cells

220 There are increasing evidences suggesting PPAR- $\alpha$  exerts hypolipidemic effects in the liver through promoting fatty acid  $\beta$ -oxidation and resulting in decreased fatty acid 221 222 available for triglyceride synthesis (Yoon 2009). In this report, we found out treating 223 HepG<sub>2</sub> cells with 200 $\mu$ M rutin increased PPAR- $\alpha$  expression (Fig. 4). Oxidative stress is one of the risk factors linking hyperlipidemia with the pathogenesis of 224 225 atherosclerosis and non-alcoholic steatohepatitis (Young and McEneny 2001; 226 Leclercq 2004). It was reported rutin has several pharmacological properties including 227 antioxidant, anticarcinogenic, and cardioprotective activities (Schwedhelm and others

228	2003; Mellou and others 2006). Therefore, to reveal the protective effects of rutin on
229	hepatic antioxidant enzymes including catalase, glutathione peroxidase (GPx) and
230	superoxide dismutase (SOD), HepG <sub>2</sub> cells were exposed to the indicated
231	concentrations of rutin in the presence of OA for 24 h. The result showed rutin had
232	antioxidative ability by increasing the protein level of catalase, SOD and GPx by 1.32,
233	1.21 and 1.42 folds, respectively (Figure 5). Rutin has been identified as the major
234	low-density lipoprotein (LDL) antioxidant compound of mulberry in an in vitro study
235	(Ziaee and others 2009). Moreover, it has been reported rutin could suppress lipid
236	peroxidation in biological membrane systems such as mitochondria, erythrocytes, and
237	others (Middleton and others 2000; Lopez-Revuelta and others 2006). Thus, the other
238	possibility for the hepatoprotective effects of rutin may be related to antioxidant
239	activity to prevent liver injury. However, further studies are needed to clarify the
240	exact mechanism of rutin involved in.

## 241 Rutin decreased lipogenesis related gene expression in OA-induced HepG2 cells

Several studies have demonstrated that SREBPs transcriptional regulated the gene for the fatty acid synthesis enzymes (Heemers and others 2001). Another study indicated ACC is the rate-determining step in fatty acid synthesis (Wakil and others 1983). In fact, previous reports indicated rutin significantly reduced the activity and mRNA levels of various enzymes involved in hepatic fatty acid synthesis (Odbayar

247	and others 2006). Thus, we used RT-PCR to measure the effect of rutin on the mRNA
248	expressions of FAS, ACC, HMGCR (rate-limiting enzyme for cholesterol synthesis)
249	and GPAT (enzyme for triacylglycerol synthesis). As expected, rutin could clearly
250	decrease the mRNA levels of HMGCR, FAS, ACC and GPAT in OA-pretreated cells.
251	Other studies showed fatty acid directly affected some gene expression through
252	regulating transcription factors, including PPAR and SREBP-1 (Clarke 2000).
253	According to the result, we confirmed rutin could decrease lipid synthesis and
254	increase fatty acid oxidation through activating AMPK-p and PPAR- $\alpha$ , which further
255	inhibit protein expression in SREBP-1 and lead to the reduction of the transcription
256	activity of ACC and FAS. Also, rutin could enhance the protein expression of
257	antioxidant enzymes, catalase, SOD and GPx (Figure 5).

### 258 **Conclusions**

In conclusion, we prove rutin not only reduce lipid accumulation but also had good antioxidant capacity and propose AMPK is pivotal in shutting down the anabolic pathway and promoting catabolism by downregulating the activity of key enzymes inlipid metabolism, such as, HMGCR, ACC and FAS. Rutin suppresses fat accumulation of the liver and could be developed as a potential therapeutic treatment to reduce the formation of a fatty liver.

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438 control. The result was presented as mean  $\pm$  SD of three independent experiments.





OA (600µM)+ Statin (10µM)



OA (600µM)+ Rutin (150µM)







Figure 2 Statin and rutin attenuates oleic acid-induced lipid accumulation in HepG2 cells. HepG2 cells were treated with indicated concentrations of statinc or rutin in the presence of OA for 24 h. Cells were stained with nile red (A) and analyzed by flow cytometry (B). Quantitative assessment of the percentage of lipid accumulation (C) represented the average of three independent experiments. NC: normal control; SC: stain control. The result was expressed as mean  $\pm$ SD. \*, *p*<0.05.



514	Figure 3 The inhibitory effect of rutin and statin on oleic acid-induced
515	triglyceride and cholesterol content in HepG2 cells. Cellular triglyceride (A) and
516	cholesterol (B) were induced by 600 $\mu M$ OA and. Cells were treated with indicated
517	concentrations of rutin and statin in the presence of OA for 24 h. Total intracellular
518	triglyceride (A) and cholesterol (B) were analyzed using enzymatic colorimetric
519	method and expressed as mean $\pm$ SD, n=3, *, p<0.05. OA as control (cells treated with
520	oleic acid only).





Figure 4. Rutin treatment increases AMPK phosphorylation and PPARa level and decreases ACC and SREBP-1 protein expression. HepG<sub>2</sub> cells were pre-treated 600  $\mu$ M OA and then incubated with indicated concentrations of rutin for 24 h. pThr172-AMPK, SREBP1 and PPAR- $\alpha$  were detected by Western blot analysis. The numbers below the panels represent quantification of the immunoblot by densitometry. C: control. The result from three independent experiments was expressed as mean ±SD. \*, *p*<0.05; \*\*, *p*<0.01.









Figure 5. Rutin increases the protein expression of anti-oxidant enzymes. HepG<sub>2</sub> cells were exposed to the indicated concentrations of rutin in the presence of 600 μM OA for 24 h. The catalase, GPx and SOD-1 protein expressiona were detected by Western blot analysis. Data was representative of three independent experiments and quantified by densitometric analysis. Expression levels were normalized to β-actin protein level. The results from three repeated and separated experiments were similar and expressed as mean ±SD. \*\*, p<0.01.



**Figure 6. Rutin decreases genes expression related to lipid metabolism in HepG2 cells.** The mRNAs of HMGCR, GPAT, FAS and ACC were extracted from cells treated with the indicated concentrations of rutin in the presence of 600  $\mu$ M OA for 24 h. The mRNA expression was analyzed by RT-PCR. Expression levels were normalized to GAPDH mRNA expression level. Data was representative of three independent experiments and quantified by densitometric analysis.