



High-Fat Diets and LXRs Expression in Rat Liver and Hypothalamus

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Abstract

Disturbances on lipid metabolism are associated with health disorders. High-fat diets (HFDs) consumption promotes cardiovascular and neurodegenerative diseases where cholesterol plays an important role. Among regulators of this steroid homeostasis, the liver X receptors (LXRs) induce genes that protect cells from cholesterol overload. We previously described how both hypothalamic LXR α and LXR β are sensitive to a high-fructose diet, suggesting that these receptors trigger responses related to control of energy and food intake. The present work's main objective was to study the effect of different HFDs on LXRs expression (in hypothalamus and liver), and lipid profile. Male rats received control diet (CD), HFD₁ (CD + bovine fat (BF)), HFD₂ (CD + BF + cholic acid (CA)), HFD₃ (CD + BF + cholesterol), or HFD₄ (CD + BF + CA + cholesterol) for different time periods. Hypothalamic LXR β , both hepatic LXRs subtypes, and total cholesterol (TC) raised after 2 weeks of HFDs. Four and 8 weeks of HFD₃ and HFD₄ increased the LXRs subtypes in both tissues and TC levels. Only HFD₄ reduced triglycerides (TG) levels after 2 and 8 weeks. The TC and TG values correlated significantly with LXRs expression only in rats fed with HFD₄. These data add relevant information about how diet composition can produce different scales of hypercholesterolemia states accompanied with central and peripheral changes in the LXRs expression.

Keywords High-fat diets · Oxysterols · Cholic acid · Cholesterol · Triglycerides

Introduction

Cholesterol homeostasis disturbances are associated with serious health disorders. In fact, it is well known that regular high-fat diets (HFDs) consumption constitutes a risk factor for metabolic, cardiovascular, and neurodegenerative

diseases (Cullen 2000; Ghibaudi et al. 2002; Riccioni and Sblendorio 2012; Shanmugasundaram et al. 1986; Sparks et al. 1993). One of the major sites of endogenous cholesterol synthesis is the liver. After a HFDs intake, this organ activates mechanisms to handle the elevated loads of cholesterol, suppressing novo cholesterol synthesis and promoting cholesterol elimination (Carey and Mazer 1984; Russell 2003).

The liver X receptors (LXRs) are key factors in cholesterol metabolism and their transcriptional function is activated by oxysterols (oxidized cholesterol derivatives; Baranowski 2008; Peet et al. 1998; Zelcer and Tontonoz 2006). The LXRs maintain normal cholesterol balance promoting sterol efflux from peripheral cells and hepatic sterol catabolism and excretion, increasing circulating high density lipoprotein (HDL-c), and inhibiting further sterol absorption. Also, they participate in the metabolism of bile acids (BAs), fatty acids, triglycerides (TG), glucose, processes related to steroidogenesis, the immune system, and inflammation (Cao et al. 2004; Cha and Repa 2007; Laurencikiene and Rydén 2012; Zelcer and Tontonoz 2006). There are two LXRs subtypes, LXR α (NR1H3) and LXR β (NR1H2) that share ~78% identity of their amino acid sequences in both

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DNA and ligand-binding domains (Ulven et al. 2005). LXR α predominates in liver, small intestine, kidney, macrophages, and adipose tissue, whereas LXR β is ubiquitously expressed. Although both subtypes are equally able to induce hepatic lipogenesis, studies in LXRs knockout mice suggest that LXR α is the dominant subtype in this pathway (Repa et al. 2000; Repa and Mangelsdorf 2000; Steffensen et al. 2003).

In the central nervous system (CNS), the cholesterol pool is separated from the peripheral one (Koch et al. 2001). The brain produces and regulates its own cholesterol requirements related to vital functions as signal transmissions. However, chronic HFDs consumption produces detrimental changes in the brain (Franciosi et al. 2009; Hwang et al. 2008; Morrison et al. 2010), there also is an association between cholesterol metabolism dysregulation and neurological, neurodegenerative and neurodevelopmental occurrence (Blain and Poirier 2004; Treiber-Held et al. 2003).

Both LXRs are present in the brain, but LXR β is the main subtype (Whitney et al. 2002). To date, it is not known if they have different functions within the CNS. However, LXR β alterations are related to several neurodegenerative diseases (Dai et al. 2012; Fan et al. 2008; Kim et al. 2008). Studies from our group suggest that hypothalamic LXRs play a critical role in lipid and glucose homeostasis. Six weeks of high-fructose beverage changes the LXRs expression in rat hypothalamus but not in neocortex, hippocampus, or cerebellum. In addition, the TG levels negatively correlate with both receptor subtypes (Kruse et al. 2012). Moreover, in hypothalamic explants from untreated rats, the LXRs expression is sensitive to cholesterol or glucose addition (Kruse et al. 2017). It is important to note that the hypothalamus receives metabolic signals from periphery through complex circuits of nutrient-sensing cells (Karnani and Burdakov 2011; Lam et al. 2005) and regulates the body energy homeostasis and body weight (BW; Bantubungi et al. 2012; De Souza et al. 2005; Gao and Horvath 2008; Morton et al. 2006). Several reports describe that sustained HFDs consumptions cause a localized inflammatory state on hypothalamus that contributes to the obesity development (Cai 2012; Dalvi et al. 2017; De Souza et al. 2005; Horvath et al. 2010; Thaler et al. 2012; Valdearcos et al. 2017).

The prevalence of health problems related to hypercholesterolemia is progressively increasing; thus, the understanding of how hypothalamic control of homeostasis and body energy metabolism are affected by changes in the peripheral system remains to be answered. Experimental models based on animals fed with HFDs are extensively used for these purposes. These diets include variations in fat type, content, and supplements like cholesterol and/or cholic acid (CA) that produce different scales of hypercholesterolemia (Charlton et al. 2011; Matsuzawa et al. 2007; Van Herck et al. 2017). Also, several works describe the capacity of HFDs to induce changes in LXRs expression but no one has explored such

effects on the CNS (Côté et al. 2013; Mohammadi and Oshaghi 2014; Thornton et al. 2008; Zhu et al. 2017).

Taking into account the association between HFDs consumption and detrimental changes in the brain, the LXRs role on lipid metabolism, and our previous findings, the aim of the present work was to evaluate the effects of different HFDs consumption on LXRs expression (in hypothalamus and liver) and lipid metabolism parameters (total cholesterol (TC) and TG). The liver organ was selected for functional comparisons, as a metabolic reference tissue. The HFDs compositions were based on nutritional models described in the bibliography (Van Herck et al. 2017), including the addition of bovine fat (BF), CA, and cholesterol to normal chow diet (CD). The treatments were administered by different time lapses (2, 4, or 8 weeks), chosen according to the available literature. We hypothesized that the selected HFDs composition would produce changes in central and peripheral LXRs expression associated with different scales of hypercholesterolemia. In this manner, the obtained results will add more information on how the diet components influence lipid metabolism and LXRs expression.

Materials and Methods

Experimental Animals

Two-month-old adult male Sprague–Dawley rats (300–400 g; $n = 60–65$) were housed under standard laboratory conditions in a temperature- and humidity-controlled vivarium with a 12-h light–dark cycle, and ad libitum access to food and water. All procedures concerning animal care and use were carried out according to the European Community Council Directive (86/609/EEC), the guidelines of the National Institutes of Health Guide for the Care and Use of Laboratory Animals, and approved by the Instituto de Biología y Medicina Experimental's ethical committee (CE050/2015) in the City of Buenos Aires, Argentina.

Experimental Procedure and Diets

After weaning and up to 2 months of age, animals were fed with a normal chow diet (CD; protein (18.2%), carbohydrates (56.9%), lipids (3.9%), vitamins and minerals (3%), fiber (5%), and humidity (13%); Gepisa feeds, Grupo Pilar SA, Argentina). Then, rats were maintained with CD (3.3 kcal/g) or with different HFDs (4.8 kcal/g). Experimental HFDs were prepared adding BF (38%; HFD₁), BF (38%) + CA (0.2%; HFD₂), BF (38%) + cholesterol (2%; HFD₃), or BF (38%) + CA (0.2%) + cholesterol (2%; HFD₄) to CD. Diet composition was based on nutritional models previously described (Van Herck et al. 2017). HFDs without CA are more closely related to human diets, but rats

are resistant to increase TC by fat consumption (Stark et al. 2000); therefore CA was added to promote cholesterol absorption (Matsuzawa et al. 2007; Nishina et al. 1990).

Animals were separated into 5 groups according to diets (CD, HFD₁, HFD₂, HFD₃, and HFD₄), each group comprised of 5 rats ($n=25$). At 2 months of age, HFDs feeding were administered by 2 weeks for an initial evaluation. Although in the experimental practice the most used HFDs resemble HFD₃ and HFD₄, we decided to evaluate HFD₁ and HFD₂ with the purpose to study their action on LXRs expression in hypothalamus and liver. Moreover, given the extensive bibliographic data that describe the hypercholesterolemic effects of HFDs containing 2% of cholesterol, these were also administered by 4 and 8 weeks ($n=5$ rats/group; Van Herck et al. 2017). In each case, the results were compared to CD group.

The fasted animals' body weight (BW) was registered weekly between 09:00 and 10:00 a.m. The BW gain was calculated as final BW (at 2, 4, or 8 weeks) minus the BW before the initiation of the treatments. The food consumption was quantified daily only in rats that received HFD₃ and/or HFD₄ by a 7-day period between the second and fourth week. The food intake (grams/calories) was relativized to animal BW. On the day of sacrifice, the rats were fasted by 8 h prior to taking blood samples from the tail vein before they were rendered unconscious by CO₂ and killed by decapitation. Liver and hypothalamus were dissected, frozen, and stored at $-80\text{ }^{\circ}\text{C}$ (Coirini et al. 1983).

Lipid Profile

Blood samples were centrifuged at $3500\times g$ for 15 min to obtain serum. TC and TG levels were measured by spectrophotometry using commercially available kits (Wiener Labs S.A.I.C., Argentine), and according to the manufacturers' instructions, with equal volumes of serum from each animal. Results were analyzed together according to each group.

Protein Expression Determination: Western and Immunoblot

Frozen tissue fragments of liver or hypothalamus were processed as previously described (Rey et al. 2013). The total homogenate protein concentration was determined by Bradford's method (Bradford 1976), using BSA (Sigma-Aldrich, USA) as standard. Aliquots from each tissue sample containing equal amounts of protein were suspended in SDS-containing sample buffer and heated at $100\text{ }^{\circ}\text{C}$ for 2 min. The proteins (20 μg) were loaded onto a 10% SDS-PAGE gel in Tris–Glycine-SDS electrophoresis buffer and separated at 120 V for 90 min. Proteins were transferred from gels onto PVDF membranes (Bio-Rad, USA) in Tris-MetOH-Glycine transfer buffer at 30 V overnight. Membranes were blocked

with TBS-T 0.1% (20 mmol/l Tris, 150 mmol/l NaCl, and 0.1% Tween-20, pH 7.6) containing 5% of fat-free milk at room temperature for 1 h. Blocked membranes were incubated with the primary antibody in TBS-T 0.1% containing 1% fat-free milk at $4\text{ }^{\circ}\text{C}$ overnight. The primary antibodies used were LXR α (rabbit, 1:1000, Santa Cruz Biotechnology, USA), LXR β (goat, 1:1000, Santa Cruz Biotechnology, USA), and β -Actin (goat, 1:3000, Santa Cruz Biotechnology, USA) as protein loading control. A pre-stained molecular ladder (Thermo Fisher Scientific, USA) was used to determine the molecular weights. Immunoblots were washed with TBS-T 0.1% 3 times and incubated at room temperature for 1 h with the respective HRP-conjugated secondary antibodies (rabbit, 1:3000, Bio-Rad, USA and goat, 1:5000, Santa Cruz Biotechnology, USA). Chemiluminescence was detected with the ECL system and exposed to hyperfilm (GE Healthcare Life Sciences, USA). Signals in the immunoblots were scanned and analyzed by Scion Image Software (National Institutes of Health, USA). The protein level was corrected for the loading control (β -actin). For each tissue and marker used, the amount of protein was referred as percentage of the CD. The time-line studies for HFD₃ and HFD₄ are presented as percentage of increase with respect to CD at 2, 4, and 8 weeks.

Statistical Analysis

Data were expressed as mean \pm SEM (standard error of the mean). Differences among diets (CD, HFD₁, HFD₂, HFD₃, and HFD₄) at the second week and food/energy consumption for CD, HFD₃, and HFD₄ were determined by one-way analysis of variance (ANOVA). Significance among diets (CD, HFD₃, and HFD₄) and weeks was determined by two-way ANOVA followed by Newman–Keuls post hoc test. The statistical analysis was performed with commercial softwares GraphPad Prism (GraphPad Software Inc., v.4) and/or StatView (SAS Institute Inc. v5.0.1). Differences were considered significant at $p < 0.05$.

Results

HFDs Feeding Effects After 2 Weeks

BW Gain and Lipid Metabolism Parameters

The HFDs did not modify the BW gain (data not shown). However, rats fed with HFDs presented changes in the lipid parameters (see Table 1 legend for statistical data). Compared to CD, HFD₂, HFD₃, and HFD₄ increased the TC levels (61.69, 49.81, and 82.00%, respectively; $p < 0.05$). Only HFD₄ reduced TG levels (35.76% of decrease; $p < 0.05$; Table 1).

Table 1 Lipid parameters (TC and TG) after 2 weeks of CD or HFDs feeding

	CD	HFD ₁	HFD ₂	HFD ₃	HFD ₄
TC (mg/dL)	52.20±0.20	59.80±2.70	84.40±7.20	78.20±1.40*	95.00±5.80*
TC (mg/dL)	198.00±25.20	234.80±11.90	175.20±3.90	168.40±6.10	127.20±2.20*

Results are expressed as mean±SEM from two independent assays ($n=5$ animals/group). Significant differences were determined by one-way ANOVA for TC ($F(4,20)=15.79$; $p<0.0001$) and TG ($F(4,20)=9.39$; $p=0.0002$)

* $p<0.05$ Newman–Keuls post hoc test

LXRs Expression

The consumption of HFDs produced significant changes in the LXRs expression (see Fig. 1 legend for statistical data). Compared to CD, all HFDs raised the hepatic levels of LXR α (HFD₁:50.07%, HFD₂:49.07%, HFD₃:54.97%,

and HFD₄:11.69%; $p<0.05$). Similarly, the increases in the LXR β expression were 90.03, 41.51, and 100.61% for HFD₁, HFD₃, and HFD₄, respectively ($p<0.05$; Fig. 1a). In the hypothalamus, LXR α expression remained unchanged, but LXR β increased with all HFDs

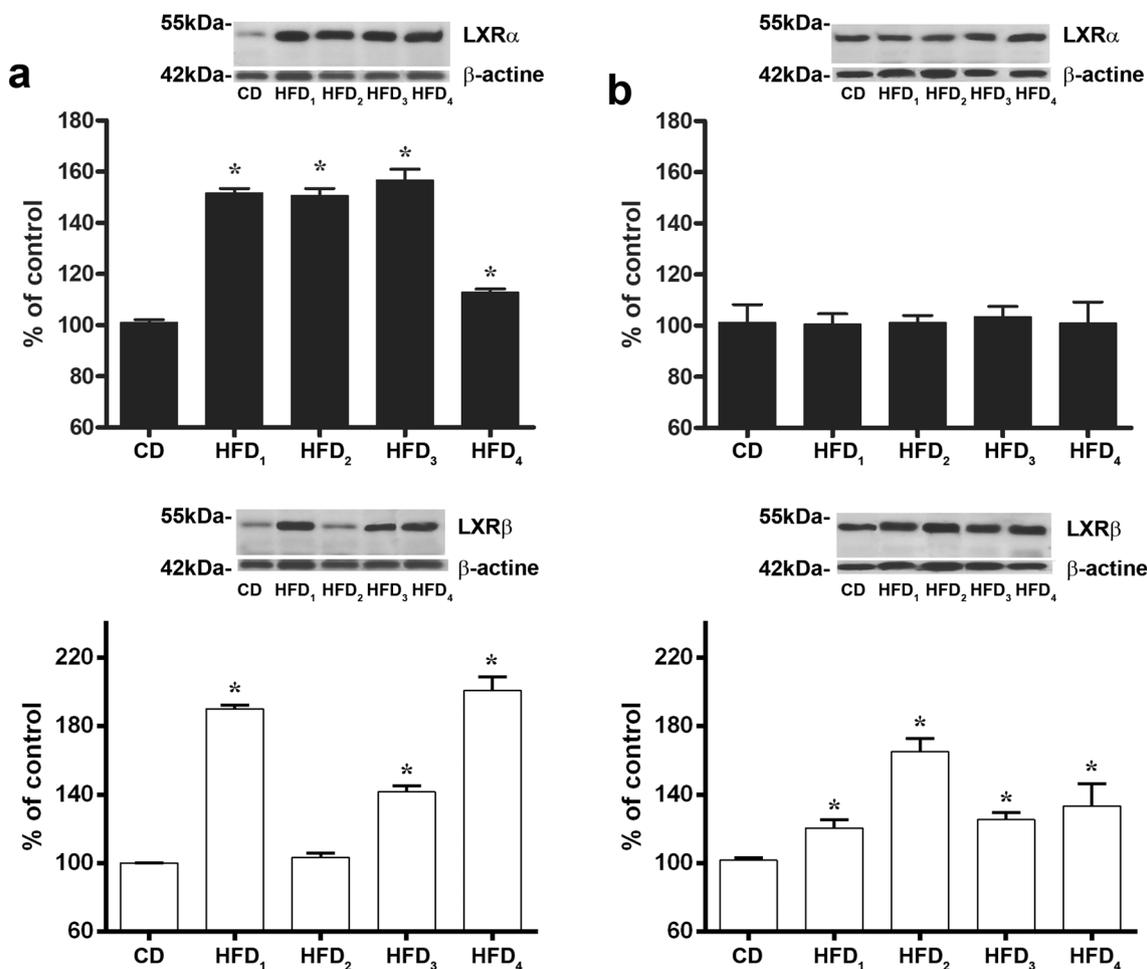


Fig. 1 LXR α (black bars) and LXR β (white bars) expression in liver (a) and hypothalamus (b) after 2 weeks of CD or HFDs feeding. LXRs levels were quantified by Western blot and represented as percentage of CD. Representative Western blots are showed on the top of each graph. Results are expressed as mean±SEM from two independent assays ($n=5$ animals/group). Significant differences were

determined by one-way ANOVA for liver ($F_{LXR\alpha}(4,20)=101.24$; $p<0.0001$ and $F_{LXR\beta}(4,20)=127.39$; $p<0.0001$) and hypothalamus ($F_{LXR\alpha}(4,20)=0.207$; $p=0.931$ and $F_{LXR\beta}(4,20)=48.51$; $p<0.0001$). Sub-index in each F indicates the LXRs subtype. * $p<0.05$ Newman–Keuls post hoc test

feedings (HFD₁:18.47%, HFD₂: 62.16%, HFD₃:23.31%, and HFD₄:30.87%; $p < 0.05$; Fig. 1b).

HFDs Feeding Effects After 4 and/or 8 Weeks

These studies were done with HFD₃ and HFD₄. The selection was based on the 2-week results since these two HFDs were the only ones capable of increasing TC levels and LXRs expression. In this section we also include correlational studies between LXRs expression (in liver and hypothalamus) and TC and TG levels, like the comparison performed in our previous work (Kruse et al. 2012).

BW Gain and Food Consumption

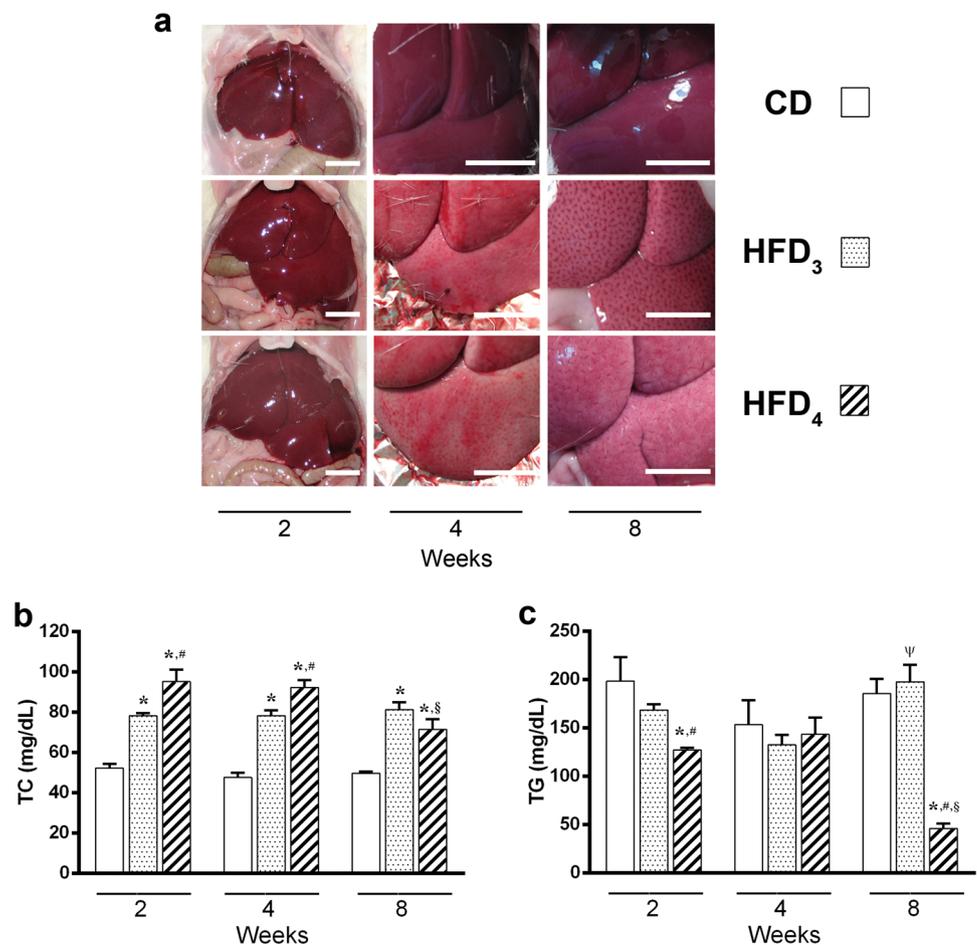
HFD₃ and HFD₄ feeding did not modify the BW gain in any of the time evaluated (data not shown). However, a macroscopical observation of the dissected livers showed that animals fed with these HFDs presented an augmentation in the amount of fat storage (observed as white dots). It also seems that these inclusions were proportional to HFDs treatment duration (Fig. 2a).

One-way ANOVA revealed significant differences in food intake ($F_{\text{Grams}}(2,21) = 10.532$; $p < 0.0001$ and $F_{\text{Calories}}(2,21) = 11.394$; $p = 0.0004$). The animals fed with HFD₃ and HFD₄ ate less grams of food (16.31% and 12.92%, respectively; $p < 0.05$) but more calories (20.79% and 26.67%, respectively; $p < 0.05$) than CD. No differences were found between these HFDs.

Lipid Metabolism Parameters

The lipid parameters values were compared by two-way ANOVA using diet (CD, HFD₃, and HFD₄) and week (2, 4, and 8) as factors. Significant differences were found in both factors and their interaction for TC levels ($F_{\text{Diet}}(2,36) = 96.17$; $p < 0.0001$, $F_{\text{Week}}(2,36) = 3.91$; $p = 0.029$; $F_{\text{Interaction}}(4,36) = 5.61$; $p = 0.001$). Compared to CD, HFD₃ and HFD₄ raised the TC levels after weeks 2 (49.81% and 82.00%; $p < 0.05$), 4 (64.29% and 93.69%; $p < 0.05$), and 8 (62.40% and 42.80%; $p < 0.05$; Fig. 2b). Also, 2 and 4 weeks of HFD₄ produced higher TC increases than HFD₃, and this difference disappeared toward the eighth week. One-way ANOVA for time-line comparison revealed significant differences in each HFD (see Fig. 2 for statistical

Fig. 2 Representative pictures of livers (scale bars: 5 mm) (a), levels of TC (b), and TG (c) from animals fed with CD, HFD₃, and HFD₄ after 2, 4, or 8 weeks. Results are expressed as mean \pm SEM from six independent assays ($n = 5$ animals/group). The two-way ANOVA was followed by Newman–Keuls post hoc test ($p < 0.05$). One-way ANOVA for the levels of TC ($F_{\text{CD}}(2,12) = 1.54$; $p = 0.25$; $F_{\text{HFD}_3}(2,12) = 0.43$; $p = 0.66$; $F_{\text{HFD}_4}(2,12) = 6.88$; $p = 0.0102$) and TG ($F_{\text{CD}}(2,12) = 1.07$; $p = 0.37$; $F_{\text{HFD}_3}(2,12) = 7.17$; $p = 0.009$; $F_{\text{HFD}_4}(2,12) = 24.87$; $p < 0.0001$). Sub-index in each F indicates the used diet. *,# refer to CD and HFD₃, respectively, for each week, § refers to 4 week of the same diet



data). Through the weeks, rats fed with HFD₃ maintained TC levels elevated, whereas with HFD₄ these values decreased toward the last week (24.84%; $p < 0.05$, Fig. 2b).

The two-way ANOVA for TG levels revealed significant differences by diet and interaction ($F_{\text{Diet}}(2,36) = 18.12$; $p < 0.0001$, $F_{\text{Week}}(2,36) = 1.84$; $p = 0.17$; $F_{\text{Interaction}}(4,36) = 7.60$; $p = 0.0002$). After 2 and 8 weeks, HFD₄ produced lower TG levels than CD (35.75% and 75.30%, respectively; $p < 0.05$; Fig. 2c). One-way ANOVA for time-line comparison revealed significant differences for each HFD (see Fig. 2 for statistical data). Throughout time, HFD₃ produced a TG increase whereas HFD₄ did the opposite ($p < 0.05$; Fig. 2c).

LXRs Expression and Their Correlation with Lipid Profile Parameters

Hepatic Results LXRs expression levels were analyzed by two-way ANOVA using diet (CD, HFD₃, and HFD₄) and

week (4 and 8) as factors. Significant differences were found in the factor diet and interaction for LXR α ($F_{\text{Diet}}(2,24) = 36.05$; $p < 0.0001$, $F_{\text{Week}}(1,24) = 1.24$; $p = 0.2772$; $F_{\text{Interaction}}(2,24) = 15.42$; $p < 0.0001$), and in both factors and their interaction for LXR β ($F_{\text{Diet}}(2,24) = 111.91$; $p < 0.0001$; $F_{\text{Week}}(1,24) = 12.60$; $p = 0.0016$; $F_{\text{Interaction}}(2,24) = 9.33$; $p = 0.001$). Feeding with HFD₃ and HFD₄ significantly raised the LXRs expression after weeks 4 (LXR α : 24.15% and 17.84% and LXR β : 23.24% and 47.62%; $p < 0.05$) and 8 (LXR α : 9.56% and 42.24% and LXR β : 24.00% and 29.00%; $p < 0.05$; Fig. 3a). One-way ANOVA for time-line comparison revealed significant differences in each HFDs treatment (see Figs. 4, 5 for their respective statistical data). Through the weeks, animals fed with HFD₃ presented a decrease in both LXRs expression ($p < 0.05$; Fig. 4a). However, with HFD₄ the individuals showed a raise in LXR α and a decrease in LXR β levels ($p < 0.05$; Fig. 5a).

Correlational studies between LXRs expression and lipid profile parameters were made for each

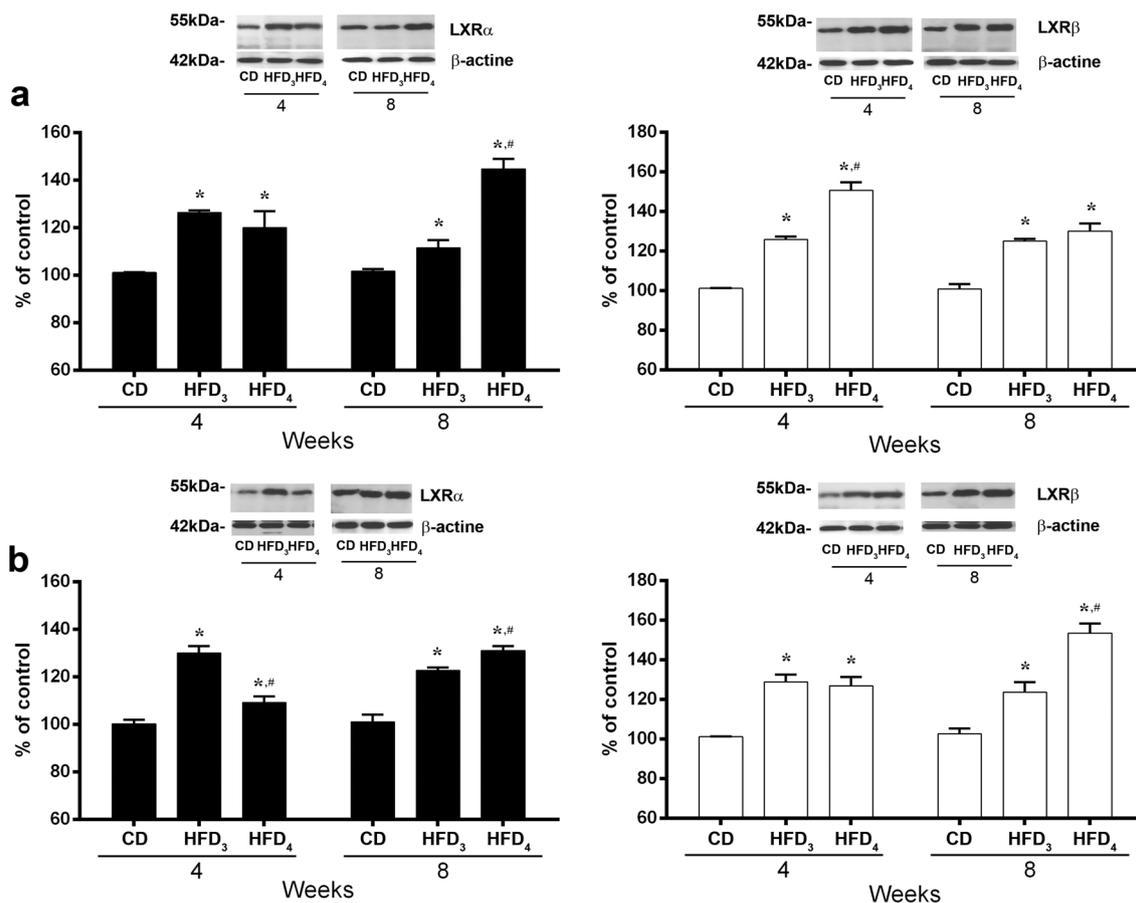


Fig. 3 LXR α (black bars) and LXR β (white bars) expression in liver (a) and hypothalamus (b) after 4 and 8 weeks of CD, HFD₃, or HFD₄ feeding. In each tissue, the LXRs levels were quantified by Western blot and represented as percentage of CD. Representative Western blots are showed on the top of each graph. Results are expressed as

mean \pm SEM from four independent assays ($n = 5$ animals/group). Significant differences were determined in each tissue, respectively, by two-way ANOVA followed by Newman–Keuls post hoc test ($p < 0.05$). *,# refer to CD and HFD₃, respectively

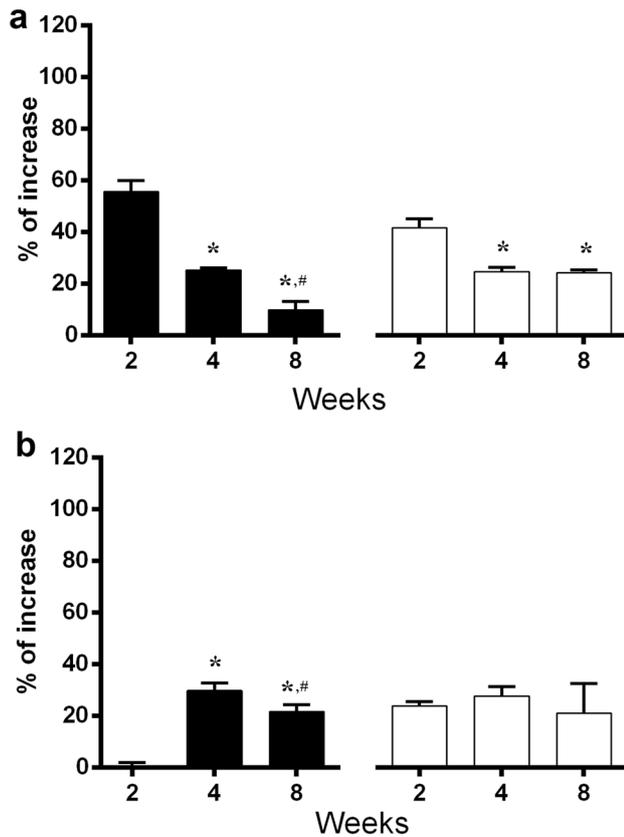


Fig. 4 LXR α (black bars) and LXR β (white bars) expression in liver (a) and hypothalamus (b) after 2, 4, and 8 weeks of HFD₃ administration. In each tissue, the LXRs levels were quantified by Western blot and represented as percentage of increase with respect to CD at 2, 4, and 8 weeks. Results are expressed as mean \pm SEM from six independent assays ($n=5$ animals/group). Significant differences were determined in each tissue, respectively, by one-way ANOVA for liver ($F_{LXR\alpha}(2,12)=52.39$; $p<0.0001$ and $F_{LXR\beta}(2,12)=16.39$; $p=0.0004$) and for hypothalamus ($F_{LXR\alpha}(2,12)=42.98$; $p<0.0001$ and $F_{LXR\beta}(2,12)=0.47$; $p=0.64$; $p<0.0001$). Sub-index in each F indicates the LXRs subtype. Newman–Keuls post hoc test ($p<0.05$). *,# refer to 2 and 4 weeks values, respectively

individual considering animals from 2, 4, and 8 weeks. The statistical analysis showed significant correlations only for HFD₄. These correlations were negative for LXR α ($F_{TC}(1,14)=8.93$; $p=0.0105$; $r^2=0.41$ and $F_{TG}(1,14)=11.85$; $p=0.0044$; $r^2=0.48$) and positive for LXR β expression ($F_{TC}(1,14)=7.26$; $p=0.0184$; $r^2=0.36$, $F_{TG}(1,14)=5.76$; $p=0.0320$; $r^2=0.31$; Fig. 6a).

Hypothalamic Results The two-way ANOVA using diet (CD, HFD₃, and HFD₄) and week (4 and 8) as factors indicated significant differences in both factors and their interaction for LXR α ($F_{Diet}(2,24)=66.93$; $p<0.0001$, $F_{Week}(1,24)=7.33$; $p=0.0123$; $F_{Interaction}(2,24)=21.21$; $p<0.0001$) and LXR β ($F_{Diet}(2,24)=50.53$; $p<0.0001$, $F_{Week}(1,24)=5.89$; $p=0.0231$; $F_{Interaction}(2,24)=9.4$;

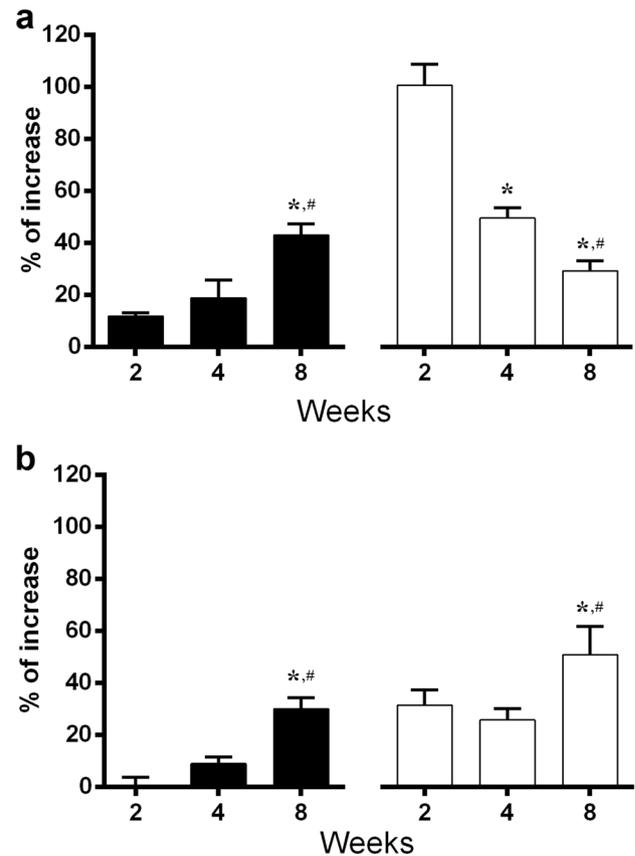


Fig. 5 LXR α (black bars) and LXR β (white bars) expression in liver (a) and hypothalamus (b) after 2, 4, and 8 weeks of HFD₄ administration. In each tissue, the LXRs levels were quantified by Western blot and represented as percentage of increase with respect to CD at 2, 4, and 8 weeks. Results are expressed as mean \pm SEM from six independent assays ($n=5$ animals/group). Significant differences were determined in each tissue, respectively, by one-way ANOVA in liver ($F_{LXR\alpha}(2,12)=12.50$; $p=0.001$ and $F_{LXR\beta}(2,12)=42.14$; $p<0.0001$) and hypothalamus ($F_{LXR\alpha}(2,12)=26.82$; $p<0.0001$ and $F_{LXR\beta}(2,12)=7.48$; $p=0.008$). Sub-index in each F indicates the LXRs subtype. Newman–Keuls post hoc test ($p<0.05$). *,# refer to 2 and 4 weeks values, respectively

$p=0.001$). HFD₃ and HFD₄ feeding raised LXR α expression after weeks 4 (29.71% and 8.92%, respectively; $p<0.05$) and 8 (21.35% and 29.67%, respectively; $p<0.05$). Similarly, the LXR β levels increased after weeks 4 (HFD₃:27.36% and HFD₄:25.50%; $p<0.05$) and 8 (HFD₃:20.45% and HFD₄:49.52%; $p<0.05$; Fig. 3b).

The one-way ANOVA for time-line comparison showed significant changes in LXRs expression in rats fed with HFD₃ and HFD₄ (see Figs. 4, 5 legend for statistical data). In the animals fed with HFD₃, the LXR α expression fluctuated and LXR β remained elevated (Fig. 4b). HFD₄ feeding raised both LXRs levels toward week 8 ($p<0.05$; Fig. 5b).

The LXRs expression and lipid parameters correlational study were made for each individual data, considering all

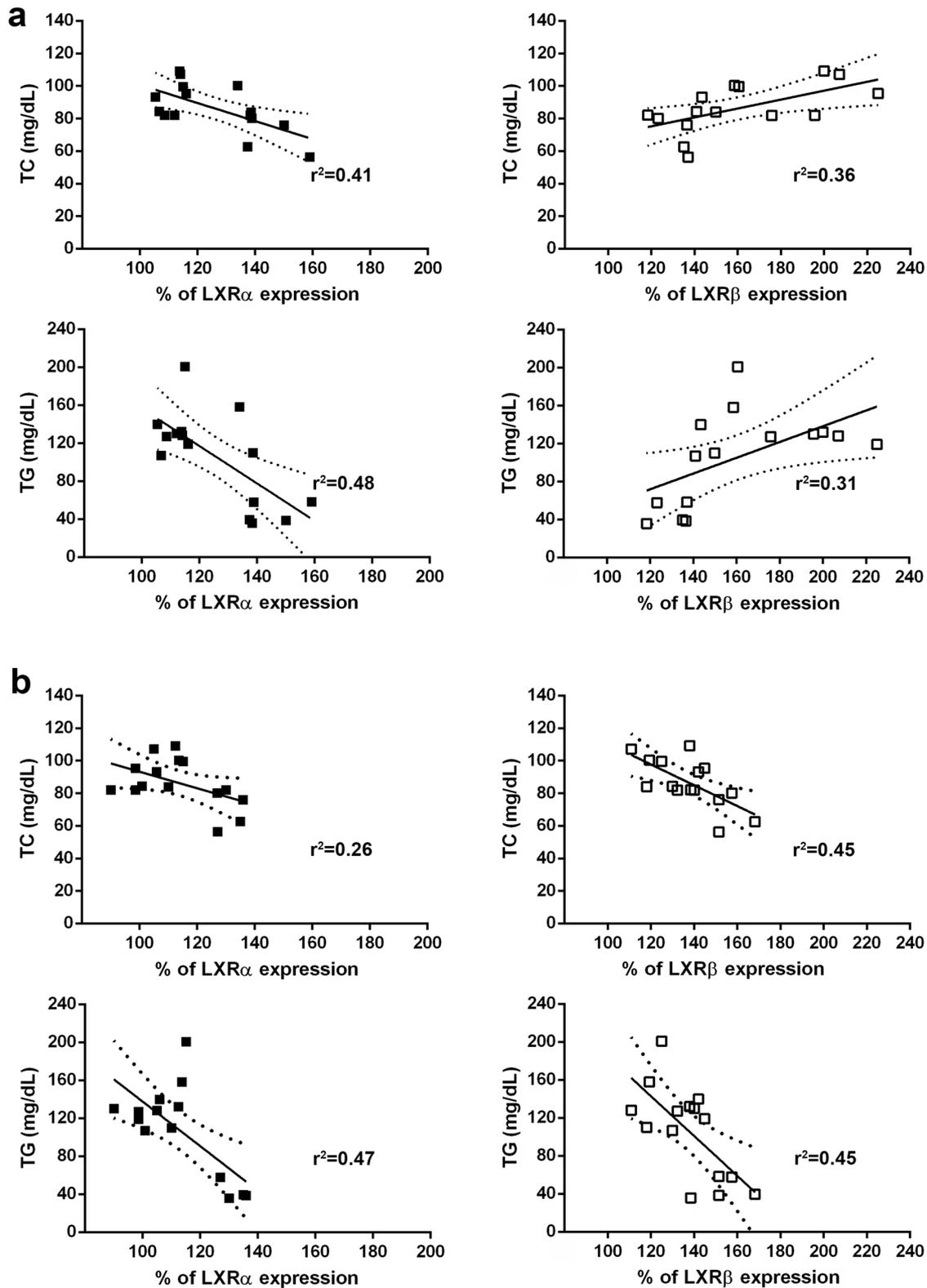


Fig. 6 Correlations between the lipid parameters TC (mg/dL) or TG (mg/dL) and the LXR α (filled square) or LXR β (open square) expression in liver (a) and hypothalamus (b) from animals fed with HFD₄ throughout the evaluated weeks. Each point represents a value corresponding to an individual animal. The confident interval is represented by dotted curves. Correlation equations obtained for LXR α in

liver ($y_{TC}=1.558-0.006x$ and $y_{TG}=3.539-0.02x$) and hypothalamus ($y_{TC}=1.431-0.005x$ and $y_{TG}=3.727-0.024x$), and for LXR β in liver ($y_{TC}=0.426+0.003x$ and $y_{TG}=-0.278+0.008x$) and hypothalamus ($y_{TC}=1.739-0.006x$ and $y_{TG}=3.955-0.021x$). Sub-index in each equation indicates the lipid parameter

weeks together. The statistical analysis indicated significant correlations only for HFD₄. These correlations were negative for LXR α ($F_{TC}(1,14)=4.675$; $p=0.0498$; $r^2=0.23$ and $F_{TG}(1,14)=11.70$; $p=0.0046$; $r^2=0.47$) and LXR β expression ($F_{TC}(1,14)=10.69$; $p=0.0061$; $r^2=0.45$ and $F_{TG}(1,14)=10.79$; $p=0.0059$; $r^2=0.45$; Fig. 6b).

Discussion

Regular HFDs consumption is associated with metabolic, cardiovascular, and neurodegenerative diseases (Cullen 2000; Ghibaudi et al. 2002; Riccioni and Sblendorio 2012; Shanmugasundaram et al. 1986; Sparks et al. 1993). The prevalence of these health disorders is increasing; thus, the understanding of how cholesterol homeostasis is maintained is an important concern that remains in force. Based on the available bibliography, we developed different HFDs combining BF, CA, and/or cholesterol, to study the hypothalamic and hepatic LXRs expression. Initially, all HFDs feedings were studied after 2 weeks, and these results allowed us to select two HFDs for longer treatments (4 and 8 weeks).

HFDs feeding did not modify the BW gain in any of the evaluated times. However, rats fed with HFD₃ or HFD₄ ate less grams of food and more calories than CD. The BW gain results are in agreement with reports of murine fed with HFDs, even though the food intake levels are different (Côté et al. 2013; Nishina et al. 1990; Wang et al. 2010).

Regarding to lipid metabolism, after 2 weeks, all HFDs feeding increased TC levels, and HFD₄ produced the highest value. Also, this diet diminished TG levels (Table 1). Four weeks of HFD₃ and HFD₄ raised TC levels, and the highest value was found with the last one (Fig. 2b), but the TG levels remained unchanged (Fig. 2c). The HFD₃ effect on TC was similar to other works employing analogous diets, although the action on TG levels was different (Fidèle et al. 2017; Wang et al. 2010). Otherwise, HFD₄ increased TC values like Mohammadi and Oshaghi's report, who also describe an increase in TG levels after feeding with a similar HFD (Mohammadi and Oshaghi 2014). Eight weeks of HFD₃ or HFD₄ elevated TC levels, but the second diet reduced the TG levels (Fig. 2b, c). The effect of HFD₄ on TC was similar to those described by other authors, but the action on TG levels was different (Côté et al. 2013; Zhu et al. 2017). Although both HFDs significantly changed the lipid profile with respect to CD, the time-line comparison of HFD₃ and HFD₄ feeding revealed opposite results. HFD₃ kept the raise in TC levels and produced a non-significant increase in TG levels. The TC discrepancies between both HFDs may be due to the presence of CA in HFD₄, which elevates the TC levels increasing the absorption of cholesterol and suppressing its conversion to BAs (Nishina et al. 1990; Srivastava et al. 2000; Van Herck et al. 2017). Otherwise, the

decrease in TG levels caused by HFDs may be due since during periods of high lipid influx the liver acts as a "lipid buffer" increasing its TG storage (Frayn 2002), which is macroscopically observed in the liver of animals fed with HFDs (Fig. 2a). HFD₄ results are in agreement with other reports showing that HFDs containing CA induce hepatic steatosis (Côté et al. 2013; Panchal and Brown 2011). However, the mechanism underlying the reciprocal relationship between BAs biosynthesis and TG production remains elusive. One possible explanation is the fact that BAs activate the farnesoid X receptor (FXR) which modulates the TG levels through transcriptional gene regulation (Kast et al. 2001; Lu et al. 2000; Pineda Torra et al. 2003). FXR suppresses BAs synthesis and lipogenesis (Côté et al. 2013), promotes nutrient absorption, and stimulates cholesterol and BAs efflux from the liver (Cave et al. 2016). Alternatively, at the metabolite level, a reduction in BAs biosynthesis could increase hepatic cholesterol and oxysterol levels which will reduce the function of the sterol regulatory element binding protein-1c (SREBP-1c), leading to decrease the TG production (Beigneux et al. 2002; Pullinger et al. 2002).

Several reports describe the HFDs capacity to induce changes in the hepatic LXRs expression (Côté et al. 2013; Mohammadi and Oshaghi 2014; Thornton et al. 2008; Zhu et al. 2017). In this work, 2 weeks of HFDs feeding raised the hepatic LXR α expression (Fig. 1a). Except for HFD₂, all HFDs elevated the LXR β levels (Fig. 1a). The extension of HFD₃ and HFD₄ to 4 weeks increased both LXRs expression (Fig. 3). The HFD₄ results are in agreement with the report of Mohammadi and Oshaghi, where a similar HFD raises the hepatic LXR α mRNA in a murine model (Mohammadi and Oshaghi 2014). After 8 weeks, HFD₃ and HFD₄ elevated LXR α expression, but the second diet produced the highest increase (Fig. 3). This last diet results are in accordance with Zhu et al., who described an increase in LXR α levels after 6 weeks of treatment with a similar HFD (Zhu et al. 2017). However, 7 weeks of treatment with another diet like HFD₄ did not alter the hepatic LXR mRNA levels (Côté et al. 2013). The time-line comparison of LXR α expression revealed that HFD₃ and HFD₄ produced opposite effects on this subtype, but the LXR β levels decreased with both HFDs (Figs. 4a, 5a). The correlational studies performed with HFD₄ indicated that TC and/or TG correlated with both LXRs expression (negatively to LXR α and positively to LXR β ; Fig. 6a), adding relevant information about the role of these receptors on lipid homeostasis.

The discrepancies of the HFDs action on LXRs expression could be explained by the fact that diet impact depends on the balance between LXR and FXR actions. Both receptors' functions are subjected to the heterodimerization with retinoid X receptor (RXR; Peet et al. 1998; Wang et al. 1999; Yoshikawa et al. 2003). Thus, FXR can inhibit LXR signaling by a competition for the limited

pool of their common dimeric partner (Wang et al. 1999; Yoshikawa et al. 2003). However, HFDs' effects on transcriptional level remain controversial. Some researchers found that high-cholesterol and CA diet actions on LXR α overrode the effects of FXR (Gupta et al. 2002). But others described that FXR is not activated by a high-cholesterol diet because the hepatic BAs pool does not increase; although its synthesis is stimulated, this is balanced by an increased excretion. However, the addition of CA activates FXR, which results in an impaired cholesterol metabolism and hypercholesterolemic state (Xu et al. 2004).

Although brain cholesterol levels remain separated from the peripheral pool (Koch et al. 2001), HFDs consumption can cause detrimental changes (Franciosi et al. 2009; Hwang et al. 2008; Morrison et al. 2010; Waise et al. 2015). Specifically, Waise et al. demonstrated that HFDs feeding produces inflammation in rodent hypothalamus (Waise et al. 2015). In the present work, 2 weeks of HFDs did not modify the hypothalamic LXR α expression, but increased LXR β levels (Fig. 1b). Four weeks of HFD₃ and HFD₄ raised the LXR α and LXR β , but the first diet produced the highest LXR α values. This pattern was reversed after 8 weeks, where HFD₄ feeding generated the highest LXR α increases (Fig. 3). The time-line comparison revealed that rats fed with HFD₃ presented a fluctuation in LXR α expression, whereas the elevated LXR β level remained unchanged (Fig. 4b). Similar evaluation with HFD₄ showed that both LXR α and LXR β subtypes increased toward the eighth week (Fig. 5b). LXR α levels correlated negatively with TC and/or TG levels (Fig. 6b), revealing that hypothalamic LXR α are sensitive to changes in these parameters. This reinforces our previous observation suggesting a possible role of these hypothalamic receptors on lipid homeostasis (Kruse et al. 2012). Although more studies will be necessary to understand the mechanisms involved on this action, the present work points out hypothalamic LXR α as interesting targets to explore possible therapeutic interventions for pathologies related to cholesterol disturbances.

Summarizing, distinct HFDs feedings were evaluated at different times: exploring changes on BW gain, lipid profile, and LXR α expression in hypothalamus and liver. Our results add relevant information about how diet composition can produce different scales of hypercholesterolemia states accompanied with peripheral and central changes in LXR α expression. Also to our knowledge, this is the first study that correlates changes in lipid profile with LXR α expression after HFDs feeding treatment.

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Authors contribution The authors' responsibilities were as follow: MR and HC designed and conducted the research, had primary responsibility for the final content, and wrote the paper with contribution by coauthors; MR, MSK, and RNM-H performed the TC and TG analysis and the Western blot studies; MR statistically analyzed the data; and all authors read and approved the final manuscript.

Compliance with Ethical Standards

Conflict of interest The authors declare that they have no conflict of interest.

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