

High Protein Aggravates, and Mineralocorticoid Antagonism Ameliorates Renal Injury in the BTBR ob/ob Mouse Model of Diabetic Nephropathy

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Background

Diabetic nephropathy is a rapidly increasing health issue worldwide with a large unmet medical need. One of the challenges in the development of new treatments is the lack of relevant and translatable rodent models.

Introduction

- The obese and type 2 diabetic BTBR ob/ob mouse has been shown to mimic key features of human Diabetic Nephropathy, including progressive proteinuria and glomerular lesions (1).
- The introduction of high protein diet to the model results in faster, aggravated and more robust disease progression.
- A benchmarking study to assess the renoprotective effect of the mineralocorticoid receptor (MR) antagonist eplerenone was performed in the model.

Methods

- Regular or high protein diet (HPD, 30%, Research Diets, New Brunswick, NJ, US) with or without admixture of eplerenone (100 mg/kg/day) was provided to female BTBR ob/ob mice from 8 to 18 weeks of age, or were fed regular diet or 40% HPD up to 24 weeks of age.
- Albuminuria expressed as UAE (urinary albumin excretion) or UACR (albumin to creatinine ratio) was measured along with parameters of glycemic and metabolic control (plasma glucose, insulin, HbA1c, triglycerides (TG), non esterified fatty acids (NEFA)).
- Histopathological scoring focusing on mesangial proliferation and interstitial fibrosis was performed on kidney sections.
- Gene expression analysis was performed on renal cortex and isolated glomeruli and multivariate analysis was performed on gene expression data from isolated glomeruli.

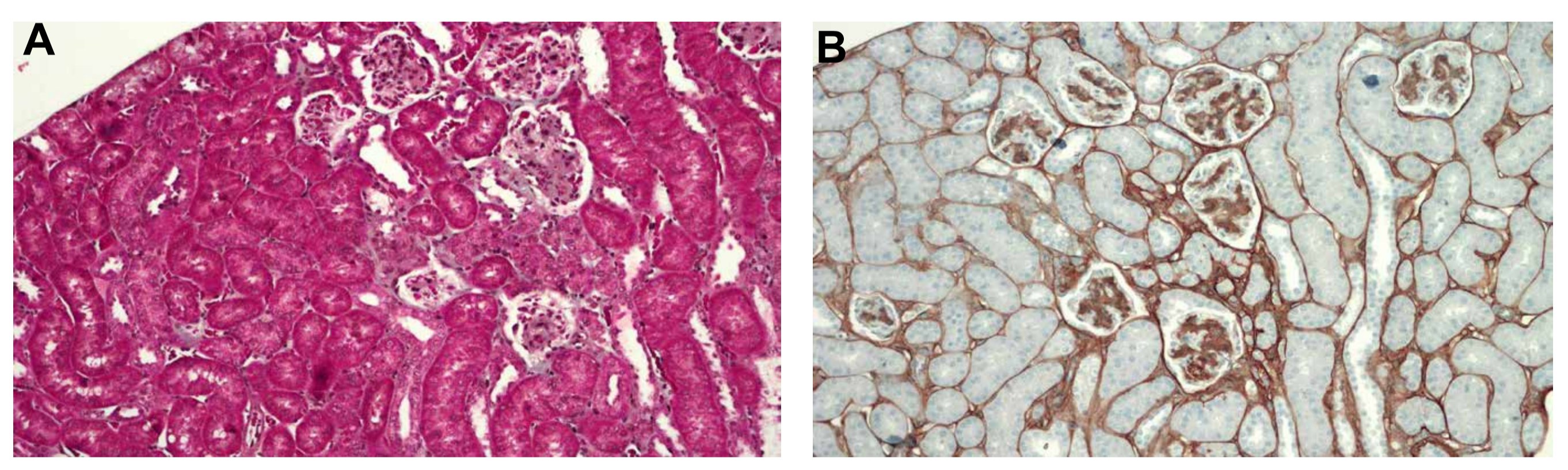
Results

HPD results in increased proteinuria and metabolic disturbances

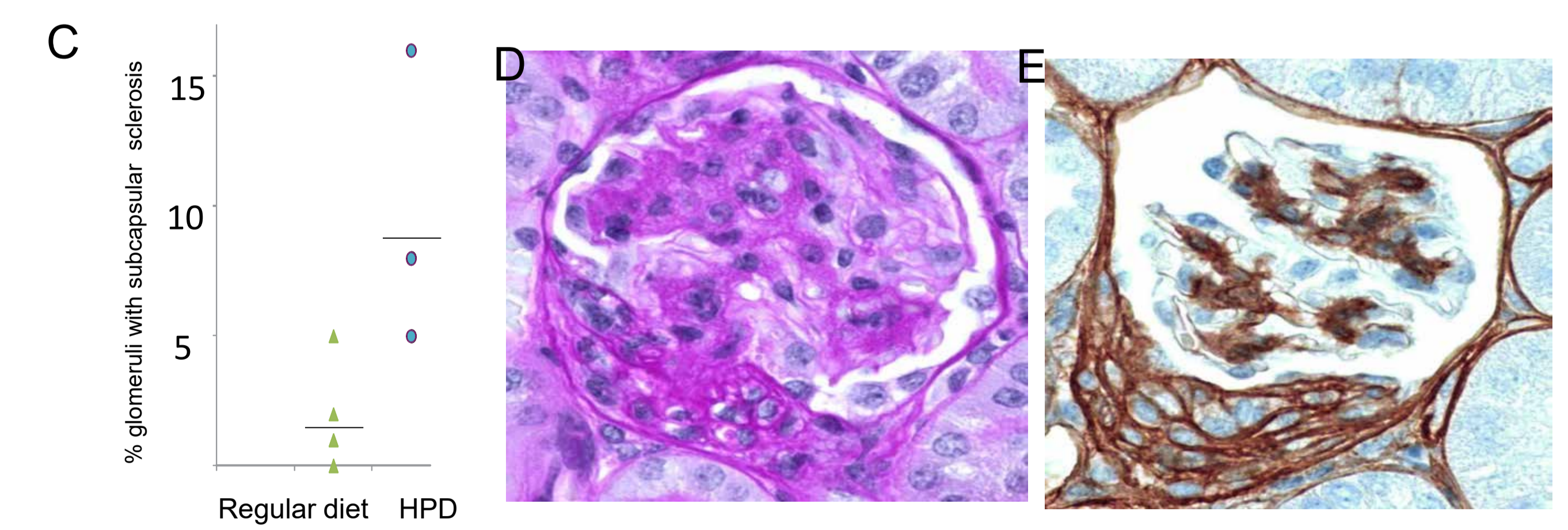
	Glucose (mM)	HbA1c (%)	TG (mM)	NEFA (mM)	UAE (µg/13h)
Regular diet (n=5)	21.2 (7.0, 33.3)	10.5 (8.8, 12.5)	1.0 (0.7, 1.7)	0.39(0.24, 0.55)	499 (238, 1864)
HPD (n=3)	33.3 (30.3, 33.3)	14.0 (13.1, 14.0)	2.8(1.5, 2.9)	0.44(0.44, 0.45)	2041 (1448, 3478)

Metabolic parameters at 24 weeks of age in female BTBR ob/ob mice on regular diet or 40% HPD. Median(min, max)

HPD results in aggravated renal pathology



Tubulointerstitial fibrosis in HPD treated BTBR ob/ob mice visualized by (A) Masson's trichrome and (B) collagen IV staining.

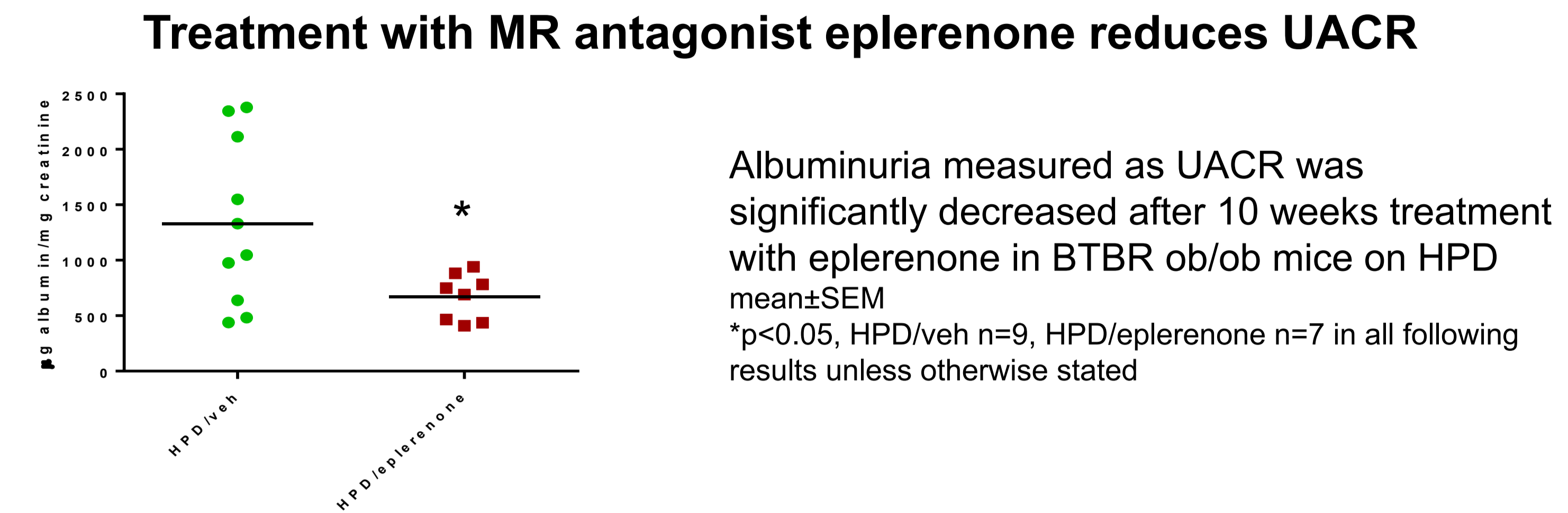


(C) Subcapsular glomerular sclerosis in BTBR ob/ob mice +/- HPD visualized by (D) PAS, (E) coll.IV staining in BTBR ob/ob mice on HPD.

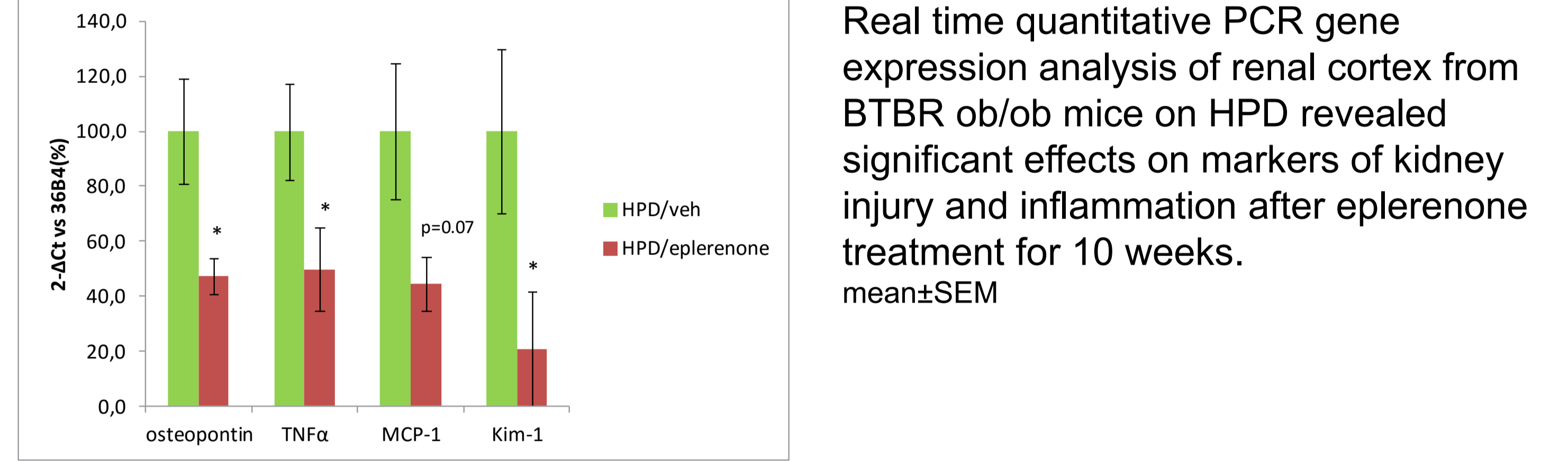
References

1. Hudkins KL et al. 2010, BTBR ob/ob Mutant Mouse Model of Diabetic Nephropathy, J Am Soc Nephrol 21: 1533-1541

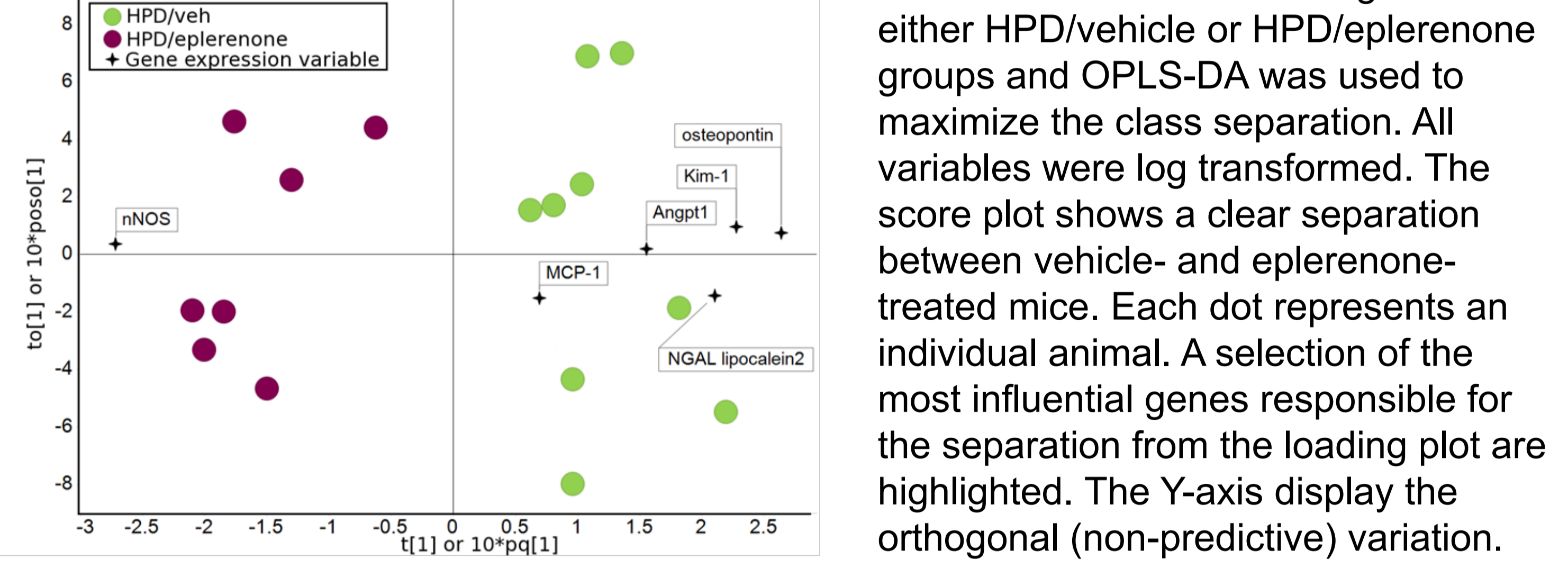
Results cont.



Treatment with MR antagonist eplerenone reduces markers of kidney injury and inflammation in kidney cortex and in isolated glomeruli.



Multivariate analysis was used to investigate genes responsible for separating vehicle and eplerenone treated BTBR ob/ob mice on HPD. 45 genes measured from isolated glomeruli were used in an orthogonal projections to latent structures-discriminant analysis (OPLS-DA).



Treatment with MR antagonist eplerenone have beneficial effects on renal pathology

Pathology	Individuals							Average		
	1	2	3	4	5	6	7			
Interstitial fibrosis (0=nil/minimal, 1= minimal, focal, 2= slight, focal)										
HPD/veh	2	2	1	1	1	1	1	1,33		
HPD/eplerenone	1	1	1	1	0	-	-	0,80		
Subcapsular sclerosis (%; 100 glomeruli counted)										
HPD/veh	15	5	2	0	0	0	0	3,33		
HPD/eplerenone	0	0	0	0	0	-	-	0		
Mesangial matrix expansion (ave 100 glom/mouse, 0=nil/minimal, 1=slight/moderate, <4 cells/segment, 2=moderate, 4-6 cells/segment, 3=moderate/severe, >6 cells/segment, 4=severe+nodularity;mesangiolysis)										
HPD/veh	2.0	1.9	1.9	1.9	1.9	1.8	1.7	1.7	1.4	1.8
HPD/eplerenone	1.6	1.5	1.4	1.4	1.3	1.3	1.0	-	-	1.4

Conclusions

- Introduction of a high protein diet to BTBR ob/ob mice results in faster disease progression with more aggravated and robust renal damage
- The declining renal function in BTBR ob/ob mice on a high protein diet can be effectively ameliorated by treatment with an MR antagonist
- These results suggests the BTBR ob/ob model as a translatable model to test and validate novel therapies aimed at treating diabetic nephropathy