

NO to Obesity: Does Nitric Oxide Regulate Fat Oxidation and Insulin Sensitivity?

Nitric oxide (NO) is a free radical gas that acts as a pleiotropic transmitter in many diverse functions (1). Most importantly, its production by endothelial NO synthase (eNOS) mediates vasodilation and inhibits thrombocyte aggregation. In other cells such as immune cells or neurons, NO is produced by the inducible NO synthase (iNOS) and neuronal NO synthase (nNOS), and mediates an inflammatory response or acts as an atypical neurotransmitter, respectively. Furthermore, it was suggested that NO plays an important role in the regulation of energy balance because administration of the nonspecific NO synthase inhibitor *N*-nitro-*L*-arginine-methyl ester (L-NAME) reduced weight gain and food intake in mice (2). In nNOS-knockout mice, the appetite-suppressant activity of leptin was markedly reduced, suggesting that NO is a downstream signal of leptin (3). Because deletion of the iNOS protected mice against high-fat diet-associated insulin resistance (4), it was also suggested that NO (“nitrosative stress”) is a player in the pathogenesis of insulin resistance (5). However, such a link between NO and insulin sensitivity is not consistent with studies in eNOS knockout mice, in which deletion of one allele led to reduced insulin sensitivity in response to a high-fat diet (6), and with the concept that endothelial dysfunction is reciprocal to insulin sensitivity (7). Such unresolved inconsistencies may be the reason why NO has not yet made its way into the current textbooks as a major player in the regulation of adiposity and insulin sensitivity or a pathogenetic factor for obesity and diabetes.

The report by Tsuchiya *et al.* (8) in this issue of *Endocrinology* readdresses the role of NO in the regulation of energy balance, supports the view that NO synthase is involved in this process, and offers potential mechanistic links with obesity and diabetes. The authors show that a chronic application of the established NO synthase inhibitor L-NAME significantly reduced body weight gain in mice. Intriguingly, this effect was larger in mice on a high-fat diet; here, L-NAME markedly reduced the volume of fat cells as well as triglyceride accumulation. Consistent with this phenomenon, L-NAME reversed the detrimental effects of the high-fat diet on hepatic triglyceride content, glucose tolerance, and *in vivo* insulin sensitivity. The authors conclude that these effects are due to increased energy dissipation because L-NAME elevated the mRNA levels of uncoupling proteins 1 and 3 in muscle and brown adipose tissue, respectively. Most interestingly, L-

Abbreviations: eNOS, Endothelial NO synthase; iNOS, inducible NO synthase; L-NAME, *N*-nitro-*L*-arginine-methyl ester; nNOS, neuronal NO synthase; NO, nitric oxide.

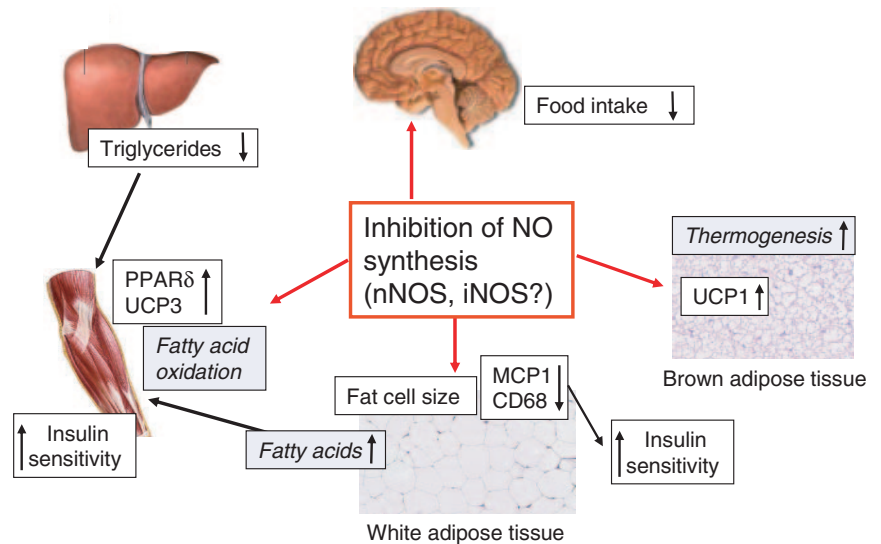
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NAME also increased the expression of peroxisome proliferator-activated receptor δ in muscle. This transcription factor has recently been shown to be of central importance for fat oxidation in muscle (9). In addition, generation of NO in mitochondria by the mitochondrial NO synthase reduces respiration and oxygen consumption (10). Thus, it appears reasonable to assume that the primary effect of a chronic inhibition of NO production by L-NAME is an enhanced oxidation of fatty acids (Fig. 1).

The evidence presented by Tsuchiya *et al.* (8) demonstrates that inhibition of NO synthesis partially protects mice from the adipogenic effects of a high-fat diet. However, the study leaves a few questions unanswered. Most importantly, the here presented data do not provide any direct evidence for an increase in energy expenditure or an enhanced oxidation of fatty acids in muscle in response to L-NAME. Furthermore, there is a striking difference between the present results and those by Morley and Flood (2). In the previous study, administration of L-NAME for 9 d produced a significant inhibition of food intake in obese mice. In contrast, reduced adiposity observed in the present study could not be explained by reduced caloric intake. However, it should be noted that small changes of daily food intake or energy expenditure may lead to large effects on adiposity over time. Morbidly obese mice such as the New Zealand obese mouse consume approximately 10% more calories and have a slightly lower body temperature (by 0.7 C) than lean controls (11); quantification of even smaller differences is technically challenging. Finally, it has to be assumed that the effect of L-NAME represents the net result of a nonspecific inhibition of eNOS, iNOS, and other isoforms. According to the previous data, these tissue-specific isoforms appear to exert diverging effects on insulin sensitivity (4, 6). To establish convincingly the role of NO in the regulation of energy balance, these points require clarification by additional experimentation involving tissue-specific deletion of NO synthase, and the direct demonstration of altered fatty acid metabolism and energy expenditure. In addition, opposite effects of an exposure to increased NO levels would strengthen the concept considerably.

Enzymes whose inhibition reduces high-fat induced adiposity and insulin resistance are potential targets for a pharmacological intervention in obesity. Unfortunately, global inhibition of NO synthesis will lead to undesired cardiovascular and other side effects. In the present study, L-NAME produced a substantial increase of blood pressure, from 112–144 mm Hg, and a compensatory reduction in heart rate. Such side effects would certainly represent a difficult obstacle for a chronic drug therapy of obesity. Thus, without dissociation of the vascular effects from those on energy balance, possibly by a selective and tissue-

FIG. 1. Effects of a chronic inhibition of NO synthesis by L-NAME on parameters of adiposity and energy balance in mice. The synopsis depicts parameters assayed in Refs. 2 and 8. *Light blue boxes and italics indicate conclusions.* MCP, Monocyte chemoattracting protein; PPAR, peroxisome proliferator-activated receptor; UCP, uncoupling protein.



specific inhibition of iNOS in muscle and/or adipose tissue, it is hard to envision a therapeutic benefit of this approach.

After the discovery of leptin more than 10 yr ago, obesity research has been one of the fastest moving fields, and has provided a large body of knowledge as to the neuroendocrine and hormonal control of hunger, satiety, and energy expenditure (12). Furthermore, a substantial number of genes involved in the regulation of fat storage has been identified through their knockout phenotypes. In contrast, there is much less progress in the search for new therapeutics of obesity, and very few “druggable” targets that made it through large clinical trials, such as cannabinoid receptor antagonists, struggle due to their limited efficacy, potential side effects, and small therapeutic window. However, the report by Tsuchiya *et al.* (8) reminds us that a large number of unknown or untested antiobesity targets exists, awaiting detailed examination. From genome-wide mutagenesis or knockout screens in *Drosophila melanogaster* or *Caenorhabditis elegans*, respectively, we can estimate that the total number of genes involved in the regulation of energy balance is in the hundreds (13, 14). Data from mice are consistent with this estimate. A recent metaanalysis of genome-wide searches for susceptibility loci (quantitative trait loci) indicated that at least 50 chromosomal segments have already been identified that harbor alleles associated with adiposity or leanness (15). Identification of these by positional cloning is difficult and time consuming but appears feasible based on rapidly evolving technology (16). Furthermore, genome-wide association studies in humans carry the potential to lead to new insights into the mechanisms of triglyceride storage; proof of principle has been provided by the recent discovery of the fat mass and obesity associated (FTO) gene (17). Thus, identification and examination of druggable targets of antiobesity therapy remain to be high-hanging fruits. However, in the face of the threat posed by the rapidly increasing incidence of obesity and diabetes, we certainly cannot afford to wait for them to fall into our lap.

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