

# Implications of mitochondrial skeletal muscle metabolism on diabetes and obesity before and after weight loss

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GG\_SFEFS\_ 19.10.2009



Folie 1

GG2 19.10.2009  
GG\_PC: 12.10.2009

# Plan

- Introduction

- Insulin resistance and mitochondrial function

- Study 1

- Lipid peroxidation in skeletal muscle of obese as compared to endurance-trained humans: a case of good vs. bad lipids?

- Study 2

Upregulation of peroxisome proliferator-activated receptor gamma coactivator gene (PGC1A) during weight loss is related to insulin sensitivity but not to energy expenditure

- Perspectives

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## To start up



Course de l'escalade, Geneva

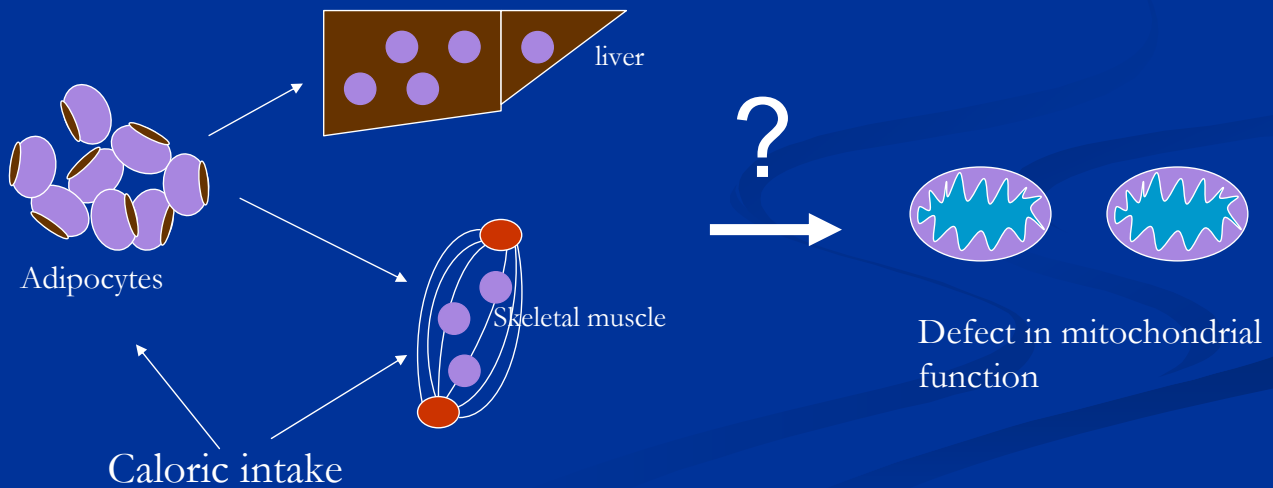


Botero : the dancer

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# Insulin resistance (IR)

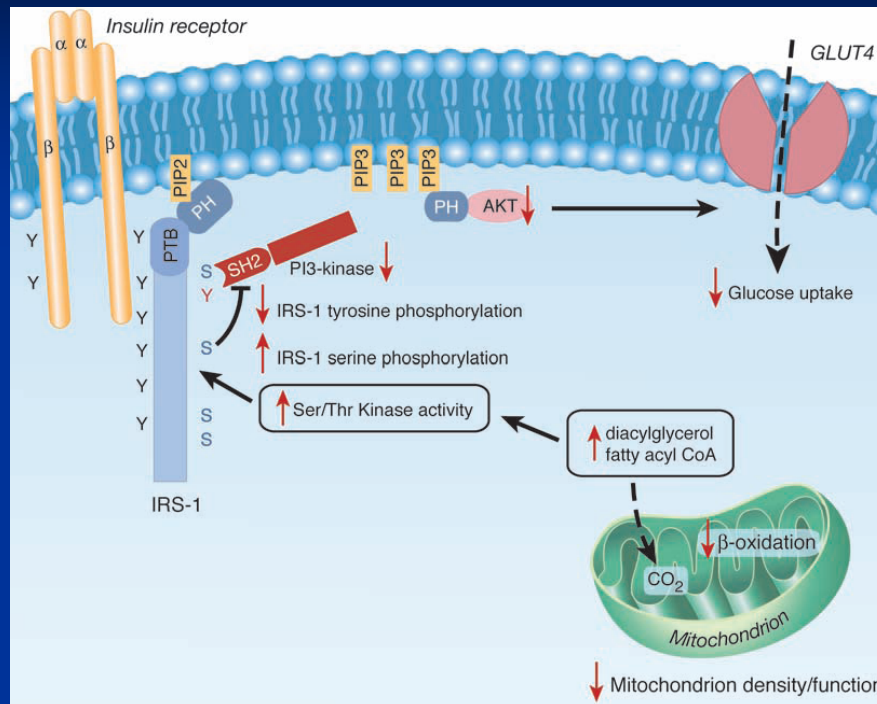
A diminished response of a target cell or organ to a physiological concentration of insulin.



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Mitochondrial dysfunction or decreased mitochondrial density are candidates mediators of obesity-related insulin resistance in skeletal muscle.

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Lowell, Science 2005

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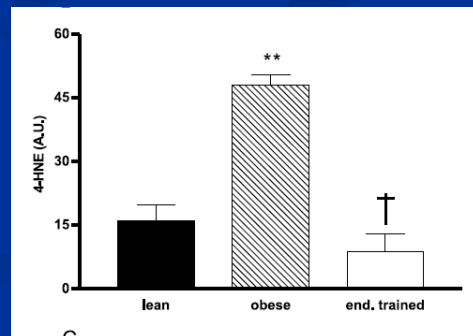
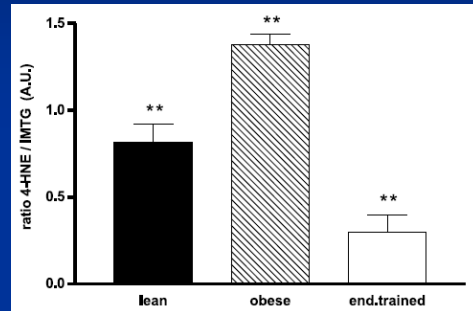
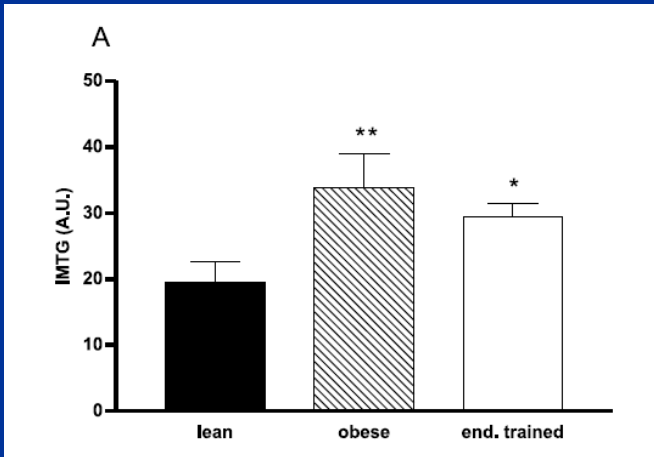
## Mitochondrial hypothesis

- ↑ Insulin Resistance
- ↑ Intra-myocellular triglyceride content (IMTG)
- ↓ Oxydative phosphorylation

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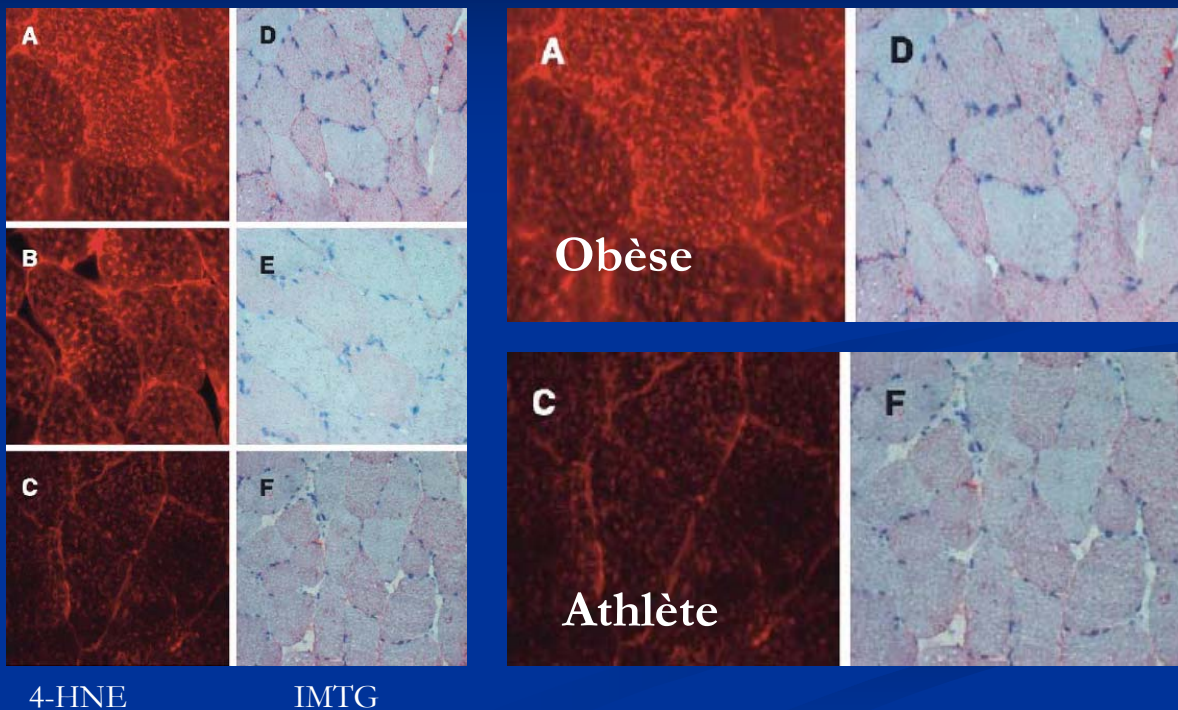
## Lipid peroxidation in skeletal muscle of obese as compared to endurance-trained humans: a case of good vs. bad lipids?

Aaron P. Russell<sup>a,b,\*</sup>, Giacomo Gastaldi<sup>b,c</sup>, Elisabetta Bobbioni-Harsch<sup>c</sup>, Patrizia Arboit<sup>b</sup>, Charles Gobelet<sup>a</sup>, Olivier Dériaz<sup>a</sup>, Alain Golay<sup>c</sup>, Joseph L. Witztum<sup>d</sup>, Jean-Paul Giacobino<sup>b</sup>



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## Peroxydation des lipides intramusculaires



4-HNE

IMTG

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# Conclusion

- IMTG content was the same in the obese and endurance trained (ET) subjects.
- The lipid peroxidation/IMTG ratio was 4.2-fold higher in the obese subjects.
- Obesity results in an increased level of IMTG peroxidation while ET has a protective effect on IMTG peroxidation.
- This suggests a link between the lipid peroxidation/IMTG ratio and insulin resistance.

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Insulin action in skeletal muscle  
couples directly to mitochondrial  
energetics and substrate selection

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# Insulin resistance and mitochondria

- 4 potential mitochondrial targets :
  - Uncoupling protein 3 (UCP3)
  - Carnitine palmitoyltransferase-1 (CPT1)
  - Peroxisome proliferator-activated receptor gamma Co-activator 1alpha (PGC-1alpha)
  - Mitofusin-2 (Mfn-2)

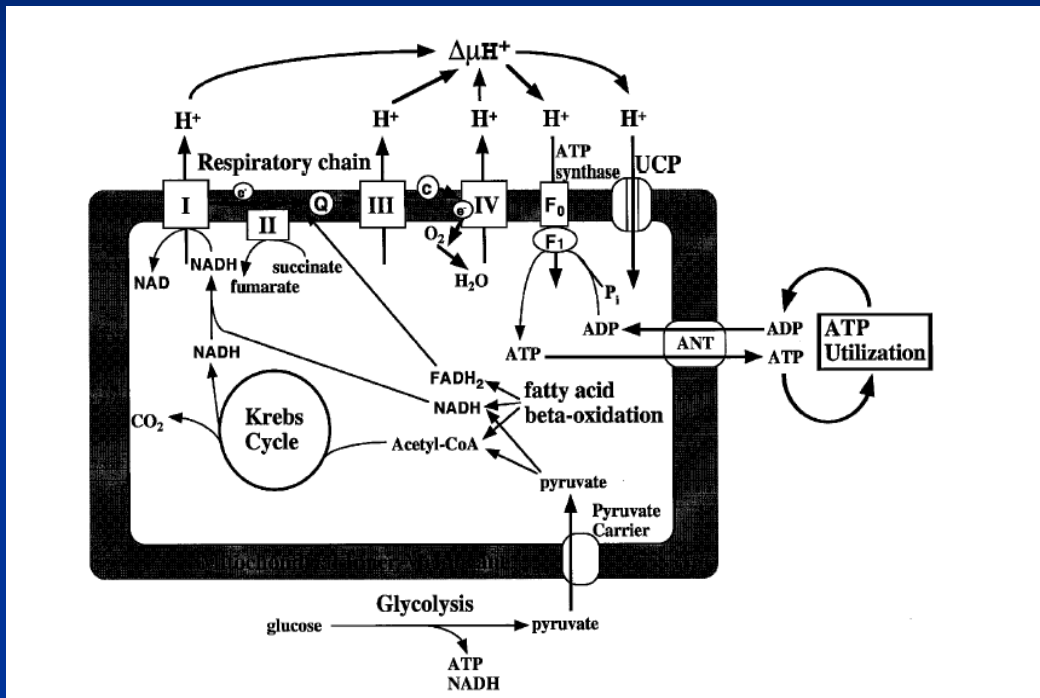
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## Uncoupling protein 3 (UCP3)

- UCP3 is selectively expressed in skeletal muscle and brown adipose tissue
- UCP3 is a member of the mitochondrial anion carrier super family
- High homology with UCP1, UCP3 was proposed to be an uncoupling protein (cold thermogenesis)
- Role and function of UCP3 (?):
  - Regulation of energy expenditure
  - Regulation of fatty acid metabolism
  - Prevention of reactive oxygen species production (ROS)

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# UCP3



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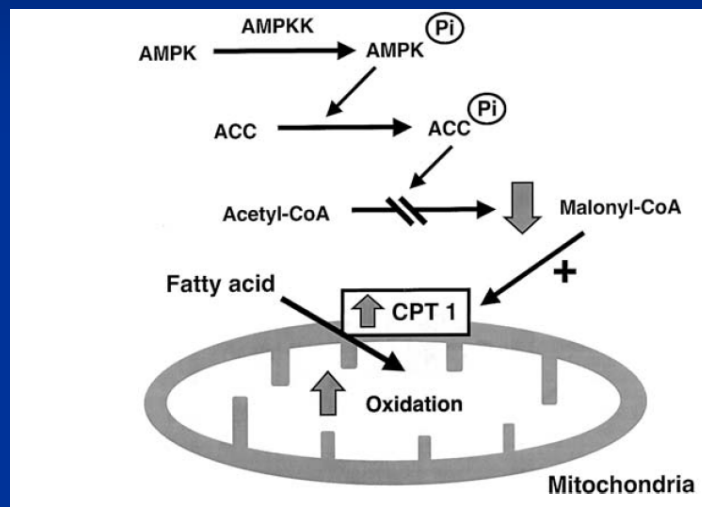
## Carnitine palmitoyltransferase-1 (CPT-1)

- CPT-1 is the rate limiting enzyme for transport of cytosolic long-chain acyl CoA molecules into the mitochondria for oxidation
- Malonyl CoA is an allosteric inhibitor of fatty acid oxidation via direct binding of CPT1

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# Carnitine palmitoyltransferase-1



Y. Minokoshi and B. Kahn

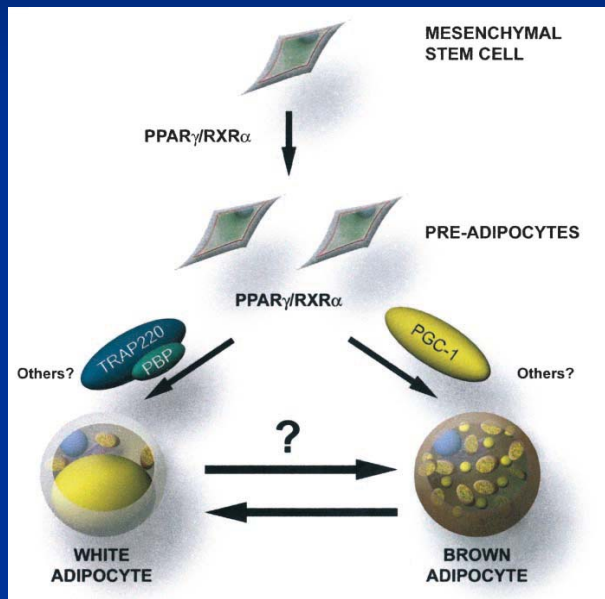
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## PPAR $\gamma$ (Peroxisome proliferator-activated receptor) Co-activator 1 $\alpha$

- A nuclear transcriptional coactivator implicated in :
  - Mitochondrial biogenesis
  - Adaptive thermogenesis
  - Insulin secretion
  - Gluconeogenesis

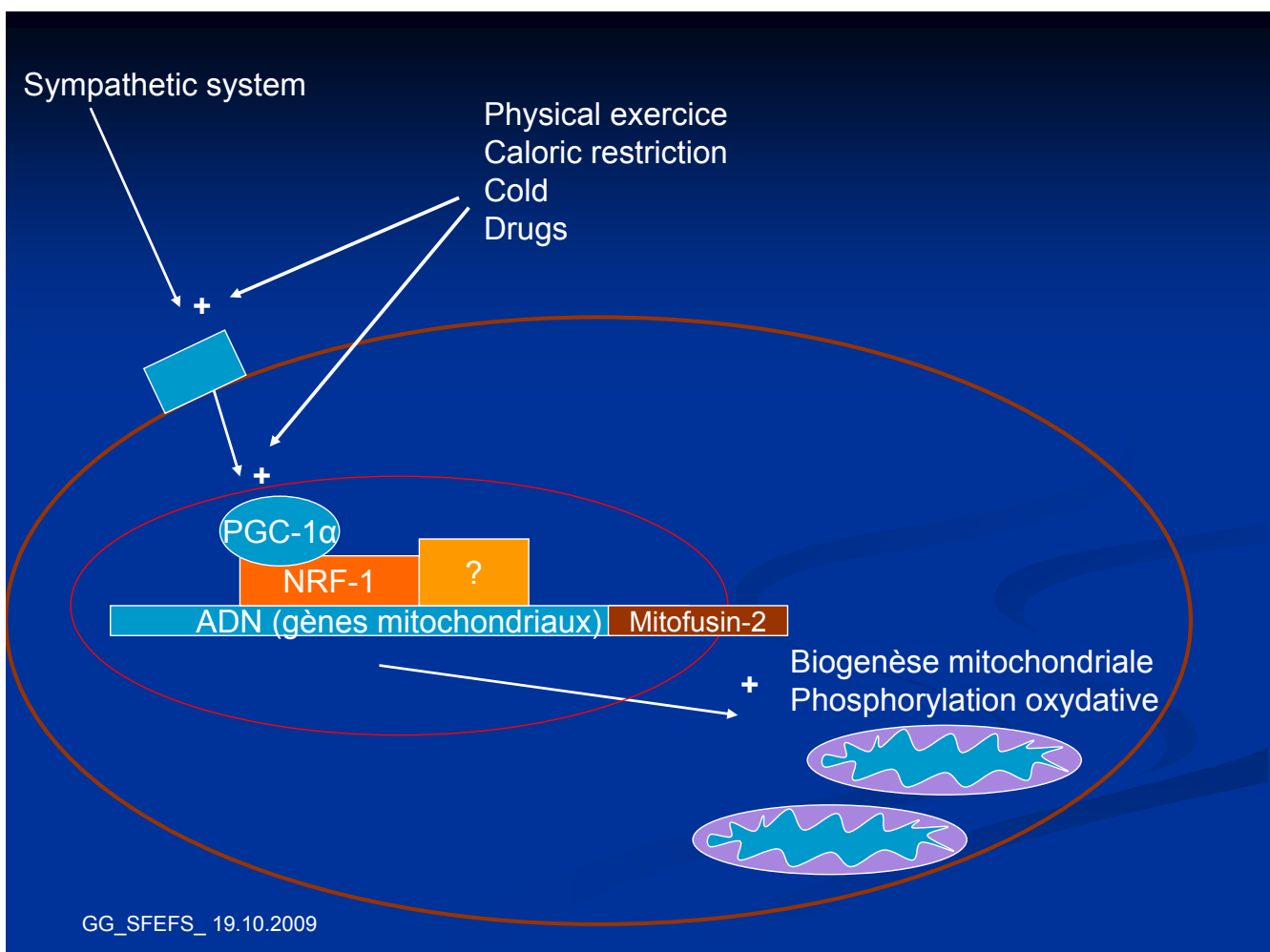
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# PPAR $\gamma$ (Peroxisome proliferator-activated receptor) Co-activator 1 $\alpha$ (PGC-1 $\alpha$ )



Puigserver, P. *Endocr Rev*, 2003. 24(1): p. 78-90.

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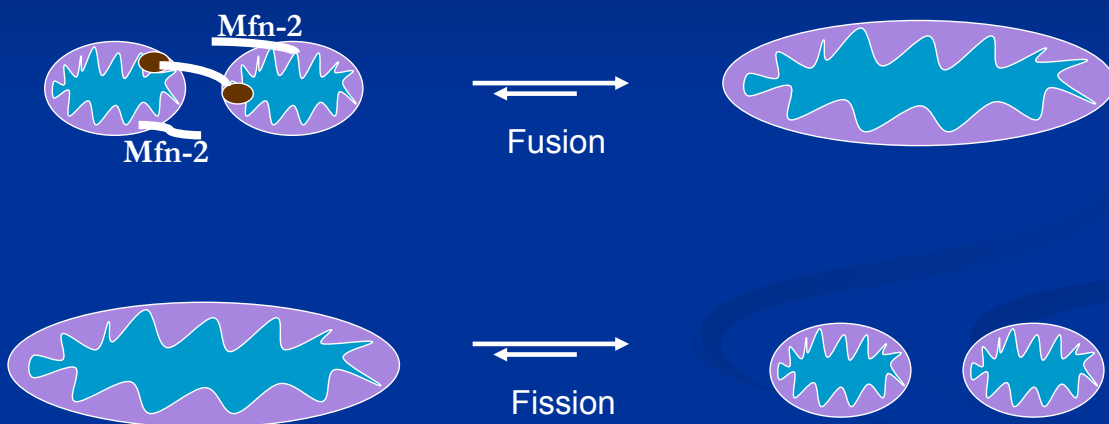
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# Mitofuslin-2 (Mfn-2)

- Mfn-2 is a GTP-ase protein involved in mitochondrial fusion
- Mfn-2 increases the expression of GLUT4 and the mitochondrial oxidative capacity.

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# Mitofuslin-2 (Mfn-2)



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# Upregulation of PGC1A during weight loss is related to insulin sensitivity but not to energy expenditure

Gastaldi et al., Diabetologia, 2007

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## The Aim of the Study

- To investigate the metabolic modifications accompanying surgically-induced body weight loss
- To better understand the regulation of genes which encode proteins involved in lipid oxidation such as Uncoupling protein 3 (UCP3) and PPAR- $\gamma$  coactivator-1 $\alpha$  (PGC-1 $\alpha$ ) in muscle.

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# Subjects

- 17 Morbidly obese women
  - BMI (basal)  $39 \pm 2$  kg/m<sup>2</sup>
  - Age  $41 \pm 2$  years
- Before, 3 and 12 months post Roux-en-Y gastric bypass
  - 17 patients before and after 3 months
  - 11 patients at 12 months

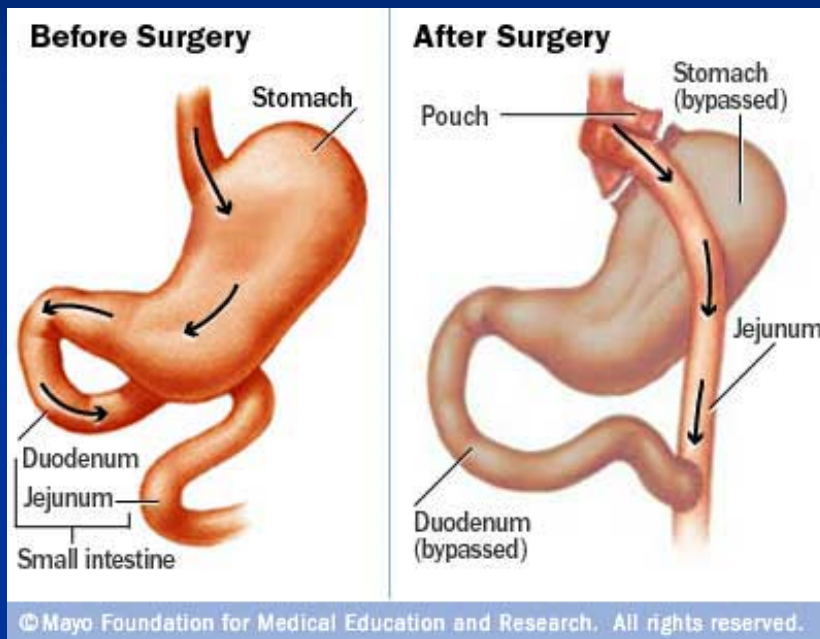
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# Methods and Measurements

- Body weight
- Glucose uptake (hyperinsulemic euglycemic clamp)
- Energy expenditure (indirect calorimetry)
- Plasma measurements :
  - Glucose (enzymatically)
  - Free Fatty Acids (FFA) (enzymatically)
  - Insulin (RIA)
- Muscle biopsy
  - UCP3 mRNA measurements (Quantitative PCR)
  - PGC-1 $\alpha$  mRNA measurements (Quantitative PCR)

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# Roux-en-Y gastric bypass (RYGB)



Restrictive and malabsorptive surgical procedure

Provides large and Durable weight loss

Well known to improve Insulin resistance and cardiometabolic outcomes

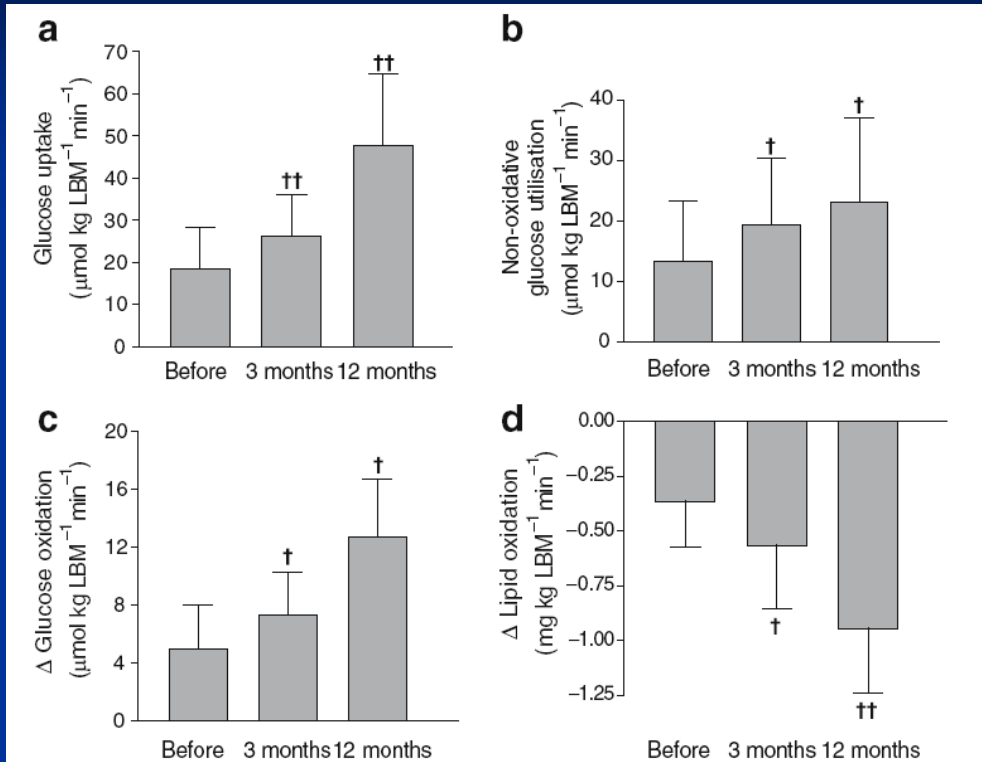
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## Upregulation of PGC1A during weight loss is related to insulin sensitivity but not to energy expenditure

	Before RYGB (n=17)	3 months (n=17)	12 months (n=11)
Body weight (kg)	124.4±13 (127.8±12)	102.2±12 <sup>c</sup>	82.5±13 <sup>c</sup>
BMI (kg/m <sup>2</sup> )	45.9±4 (46.1±3)	37.7±4 <sup>c</sup>	30.5±5 <sup>c</sup>
Plasma glucose (mmol/l)	5.8±1.1 (5.9±1.2)	4.9±0.4 <sup>a</sup>	4.5±0.4 <sup>a</sup>
Plasma insulin (pmol/l)	168.6±86 (170.3±86)	84.3±34 <sup>c</sup>	56.8±34 <sup>b</sup>
Energy expenditure (MJ/day)	8.28±0.4 (8.10±0.7)	6.80±0.8 <sup>b</sup>	6.90±0.9 <sup>b</sup>
Protein oxidation (mg kg LMB <sup>-1</sup> min <sup>-1</sup> )	0.79±0.3 (0.84±0.2)	0.46±0.13 <sup>b</sup>	0.74±0.3
Glucose oxidation (μmol kg LMB <sup>-1</sup> min <sup>-1</sup> )	5.25±4.4 (5.45 ±2.8)	1.93±4.4	1.54±4.9 <sup>a</sup>
Lipid oxidation (mg kg LMB <sup>-1</sup> min <sup>-1</sup> )	1.66±0.5 (1.52±0.3)	1.88±0.5	1.98±0.3

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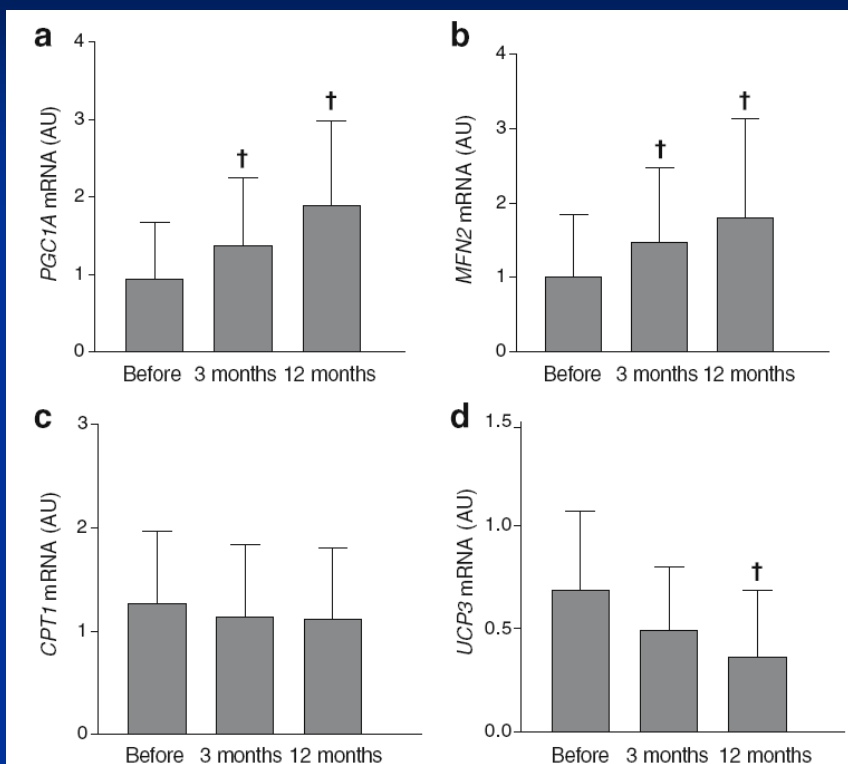
# Upregulation of PGC1A during weight loss is related to insulin sensitivity but not to energy expenditure



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Gastaldi et al., Diabetologia, 2007

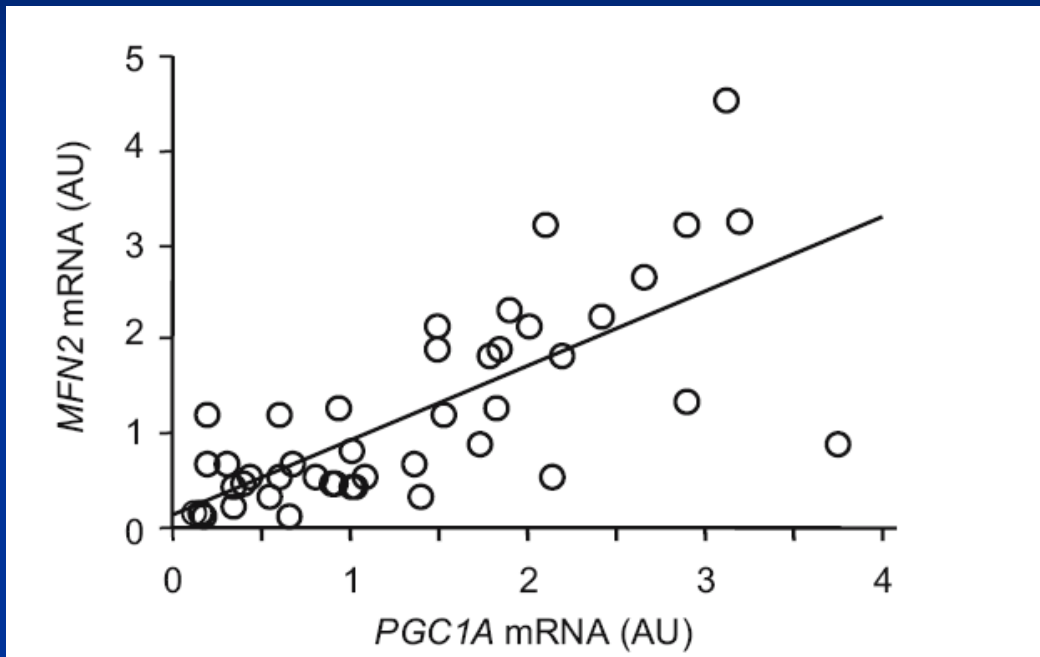
# Upregulation of PGC1A during weight loss is related to insulin sensitivity but not to energy expenditure



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Gastaldi et al., Diabetologia, 2007

## Upregulation of PGC1A during weight loss is related to insulin sensitivity but not to energy expenditure



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Gastaldi et al., Diabetologia, 2007

## Simple regression

**Table 3** Synthesis of simple regression analyses of BMI and muscle molecular parameters vs insulin sensitivity measured before and during RYGB-induced weight loss

Independent variable	Dependent variable	
	Glucose uptake	
	<i>p</i> value	<i>r</i> <sup>2</sup>
<i>PGC1A</i>	0.005	0.17
<i>MFN2</i>	0.0001	0.29
<i>UCP3</i>	0.03	-0.10
BMI	0.0001	-0.29

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Gastaldi et al., Diabetologia, 2007



# Multiple regression

**Table 4** Multiple regression analysis of factors influencing insulin sensitivity, i.e. glucose uptake

Independent variable	Dependent variable	
	Glucose uptake	
	<i>p</i> value	<i>R</i> <sup>2</sup>
<i>PGC1A</i>	NS	0.48
<i>MFN2</i>	0.006	0.48
<i>UCP3</i>	NS	0.48
BMI	0.002	0.48

There was a significant and independent relationship of BMI ( $p=0.002$ ) and *MFN2* ( $p=0.006$ ) with insulin sensitivity measured in morbidly obese women before and during RYGB-induced weight loss

## Summary

- Surgically-induced body weight loss leads to :
  - ↑ glucose uptake
  - ↑ lipid oxidation
  - ↑ PGC-1 $\alpha$  mRNA (at 3 and 12months), similar for NG and DT2 patients
  - ↓ UCP3 mRNA at 12months

# Conclusion

- Massive weight loss upregulates PGC1A mRNA expression in skeletal muscle.
- This increase is associated with enhanced MFN2 expression, which contributes to the amelioration of insulin sensitivity.
- CPT1 or UCP3 mRNA expression does not show any significant impact on the modifications of insulin sensitivity or on the regulation of energy expenditure.

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# Perspectives

- To further analyse the link between lipid peroxidation, mitochondrial dysfunction and insulin sensitivity.
- To identify co-factors that have a permissive role for PGC1A and stimulates Mfn-2 and to determine whether these co-factors are activated in different physiological conditions



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# Acknowledgements

- Dr PD Elisabetta Bobbioni-Harsch
- Dr PhD Aaron Russell
- Prof. Alain Golay
- Prof. Jean-Paul Giacobino

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Mes meilleurs remerciements à la fondation suisse pour l'encouragement de la recherche sur la nutrition en Suisse pour son soutien et sa générosité.

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# QUESTIONS

&

# DISCUSSION

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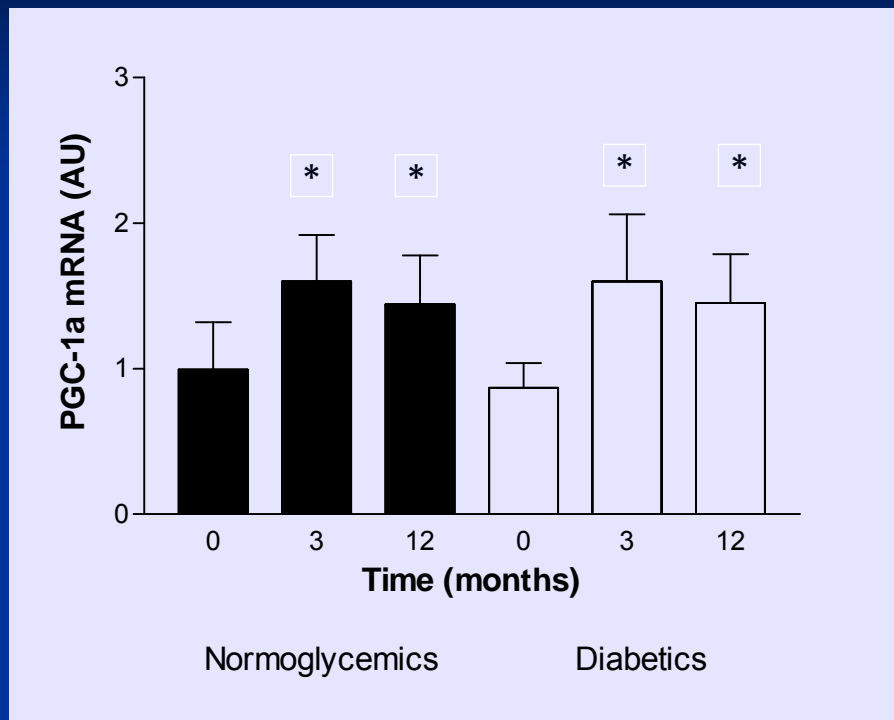
## Subgroups analysis

Before surgery:

- Normoglycemic patients  
(NG, n=10)
- Diabetic patients  
(D, n=7)

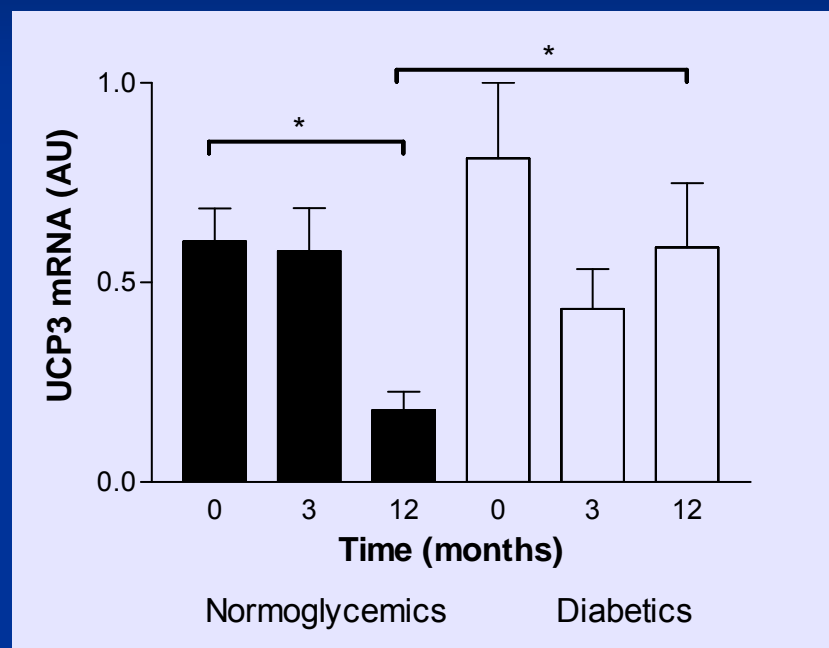
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# PGC-1 $\alpha$ mRNA



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# UCP3 mRNA



\* =  $p < 0.04$

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# Subgroups Conclusions

- In morbidly obese stable body weight subjects diabetes is not associated to a lower PGC-1 $\alpha$  mRNA expression in muscle
- Prolonged caloric restriction is accompanied to a sustained increased in PGC-1 $\alpha$  mRNA
- During body weight loss the regulation of PGC-1 $\alpha$  is similar in the NG and D obese subjects.

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- Fatty acids increase the expression of UCP2 and UCP3 mRNA, implying that these UCPs are somehow involved in fatty-acid metabolism (Nedergaard and Cannon, 2003).
- UCP2 and UCP3 catalyze net proton conductance, but only when activated by fatty acids and free radical-derived alkenals (Brand et al., 2004a, 2004b).
- UCP2 and UCP3 can probably export fatty acids and other anions (Echtay et al., 1999; Jaburek et al., 1999).
- Mice in which UCP2 or UCP3 are knocked out show only weak phenotypes in the laboratory (Harper and Himms-Hagen, 2001).

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# Mitochondrie et IR

- Rotenone-sensitive NADH:O<sub>2</sub> oxidoreductase is 40% decreased in type 2 diabetic patients
- Mitochondrial morphology is modified (small and spaced)

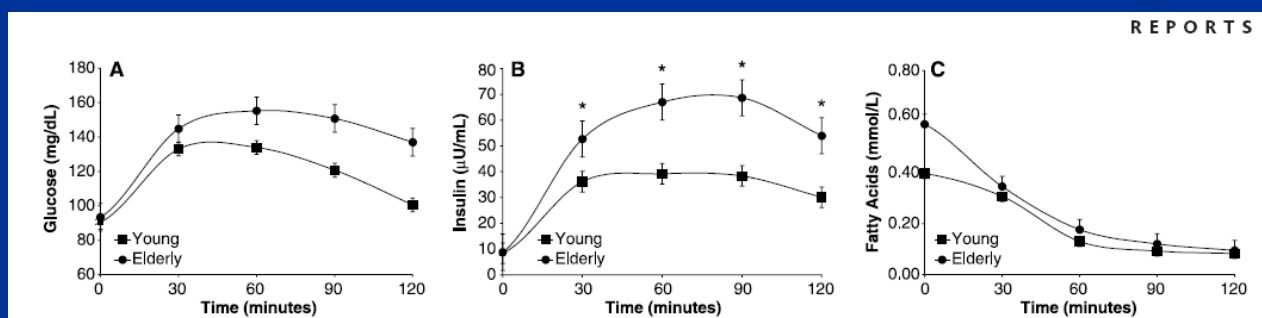
## *Dysfunction of mitochondria in human skeletal muscle in type 2 diabetes*

Kelley et al., Diabetes, 2002

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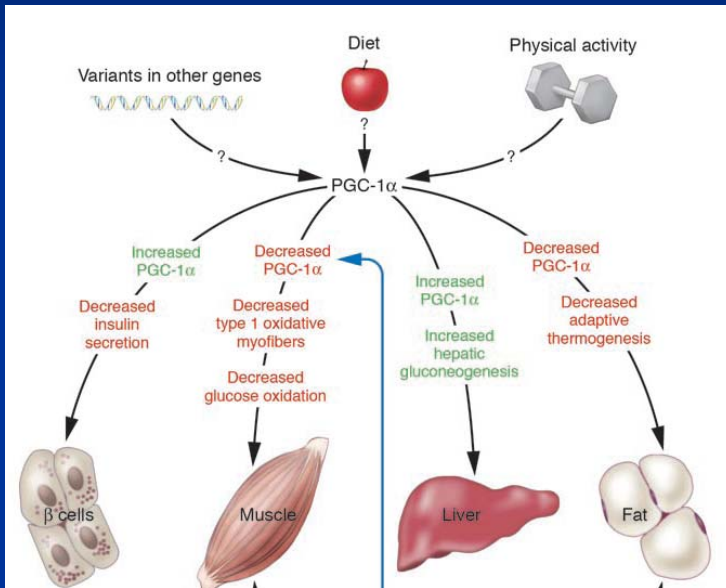
## Mitochondrial Dysfunction in the Elderly: Possible Role in Insulin Resistance

Kitt Falk Petersen,<sup>1</sup> Douglas Befroy,<sup>1,7</sup> Sylvie Dufour,<sup>1,7</sup> James Dziura,<sup>1</sup> Charlotte Ariyan,<sup>3</sup> Douglas L. Rothman,<sup>4</sup> Loretta DiPietro,<sup>5,6</sup> Gary W. Cline,<sup>1</sup> Gerald I. Shulman<sup>1,2,7\*</sup>



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# Modulation de l'expression de PGC-1



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↑ PGC-1alpha  
Améliore performance physique  
Switch expression fibres muscul. type IIx en IIa et I

PGC-1alpha\_KO  
↓ Mitochondrie et perf. Physique

DT et pré-DT  
↓ PGC-1alpha

## Mitochondrial Dysfunction in the Elderly: Possible Role in Insulin Resistance

Table 1. Body composition of study participants.

	Age (years)	Body weight (kg)	Fat mass (kg)	% Fat mass (% body weight)	LBM (kg)	BMI (kg/m <sup>2</sup> )
Young (n = 13)	27 ± 2	71 ± 4	19.9 ± 2.5	28 ± 3	54 ± 5	23.8 ± 1.1
Elderly (n = 15)	70 ± 2	70 ± 3	20.1 ± 1.7	29 ± 2	49 ± 3	25.1 ± 0.5
P value	<0.0001	0.69	0.93	0.77	0.28	0.28

Table 2. Metabolic rates and tissue lipid content of participants (24).

	Basal rates of glucose production (mg/kg of LBM/min)	Clamp peripheral glucose metabolism rate (mg/kg of LBM/min)	Intramyocellular lipid content (%)	Intrahepatic lipid content (%)	Mitochondrial TCA flux rate (nmol/g of muscle/min)	Mitochondrial ATP synthesis rate (μmol/g of muscle/min)
Young	2.3 ± 0.1	6.2 ± 0.6	0.96 ± 0.08	0.49 ± 0.10	96 ± 10	7.50 ± 0.77
Elderly	2.4 ± 0.1	4.0 ± 0.4	1.39 ± 0.15	1.61 ± 0.38	62 ± 5	4.06 ± 0.65
P value	0.34	<0.002	0.035	0.036	<0.006	<0.004

↑ IR

↑ IMLC

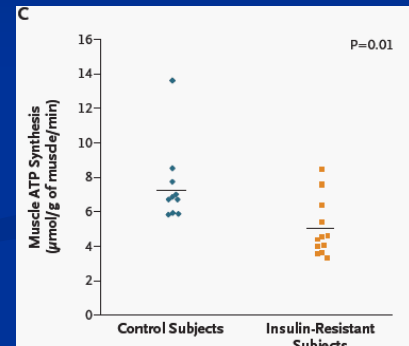
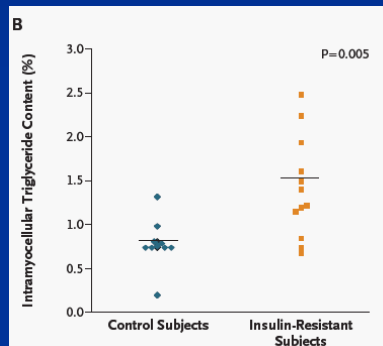
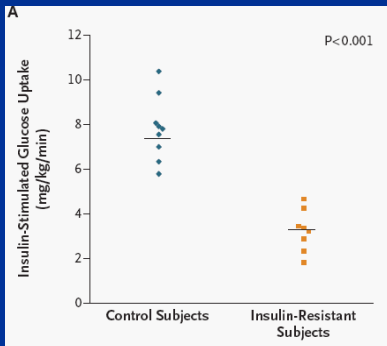
↓ OX<sub>et</sub> PHOS

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# Impaired Mitochondrial Activity in the Insulin-Resistant Offspring of Patients with Type 2 Diabetes

Kitt Falk Petersen, M.D., Sylvie Dufour, Ph.D., Douglas Befroy, Ph.D.,  
Rina Garcia, B.A., and Gerald I. Shulman, M.D., Ph.D.



**Table 1. Characteristics of the Two Groups of Subjects.<sup>a</sup>**

Characteristic	Insulin-Sensitive Controls	Insulin-Resistant Subjects
Age (yr)	28±7	26±7
Weight (kg)	60±13	64±9
Height (m)	1.69±0.11	1.65±0.09
Body-mass index	21±2	23±2
Activity index†	2.6±0.5	2.4±0.4
Glycosylated hemoglobin (%):‡	5.1±0.3	5.2±0.4
Adipocyte-derived factors		
Adiponectin (µg/ml)	12±4	11±4
Tumor necrosis factor α (pg/ml)	1.5±0.3	1.8±0.9
Interleukin-6 (pg/ml)	0.52±0.31	0.68±0.42
Resistin (ng/ml)	0.77±0.24	0.79±0.24

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## lipolysis

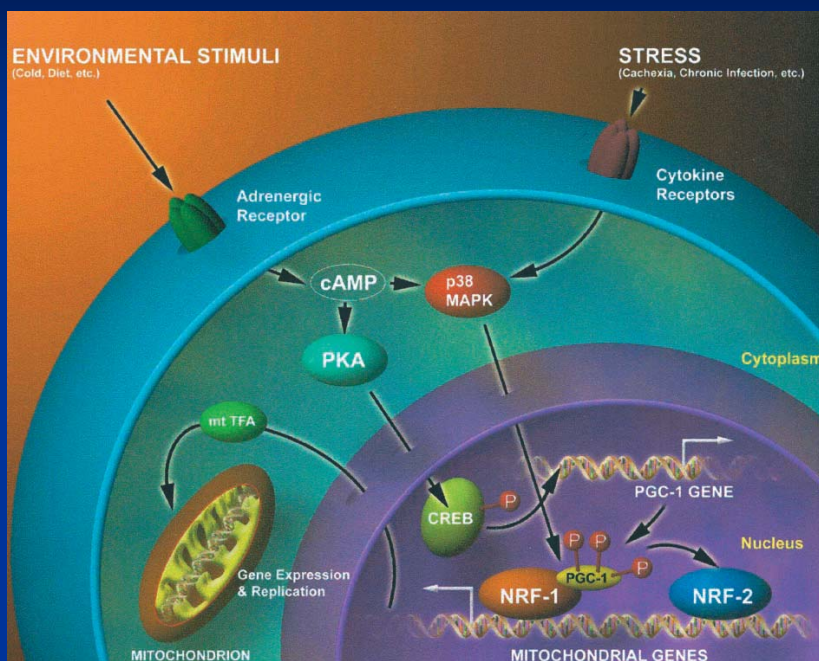
- Fasting : low insulin, low catecholamines, low glucose
- Stress : high catecholamine
- Obesity : high insulin, high FFA, high glucose

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- Fatty acids increase the expression of UCP2 and UCP3 mRNA, implying that these UCPs are somehow involved in fatty-acid metabolism (Nedergaard and Cannon, 2003).
- UCP2 and UCP3 catalyze net proton conductance, but only when activated by fatty acids and free radical-derived alkenals (Brand et al., 2004a, 2004b).
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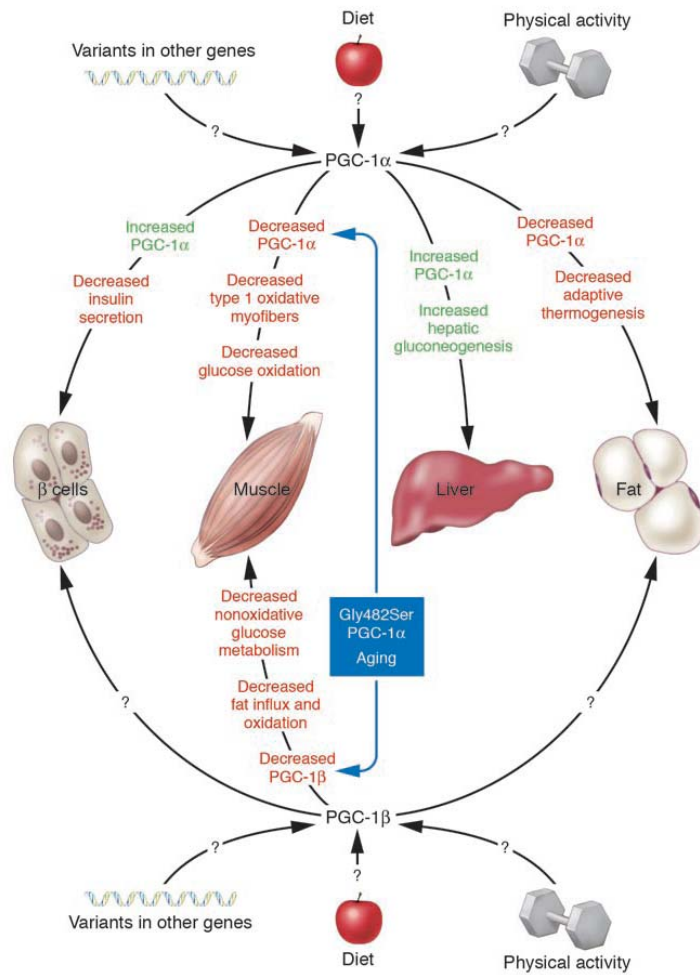
# PGC-1



- Biogenèse Mitochondriale
- Thermogenèse adaptative
- Secretion insulin
- Néoglucogenèse.

Puigserver, P. Endocr Rev, 2003. 24(1): p. 78-90.

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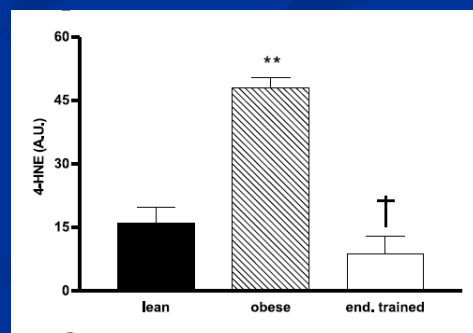
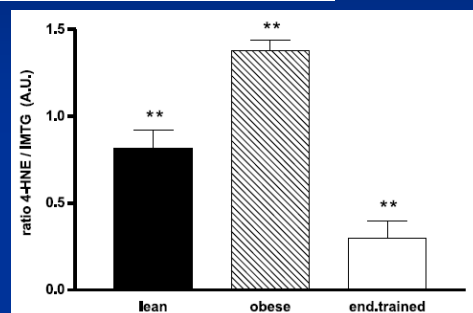
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FEBS Letters 551 (2003) 104–106

FEBS 27574

### Lipid peroxidation in skeletal muscle of obese as compared to endurance-trained humans: a case of good vs. bad lipids?

Aaron P. Russell<sup>a,b,\*</sup>, Giacomo Gastaldi<sup>b,c</sup>, Elisabetta Bobbioni-Harsch<sup>c</sup>, Patrizia Arboit<sup>b</sup>, Charles Gobelet<sup>a</sup>, Olivier Dériaz<sup>a</sup>, Alain Golay<sup>c</sup>, Joseph L. Witztum<sup>d</sup>, Jean-Paul Giacobino<sup>b</sup>



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# Impaired in vivo mitochondrial function but similar intramyocellular lipid content in patients with type 2 diabetes mellitus and BMI-matched control subjects

V. B. Schrauwen-Hinderling • M. E. Kooi •  
M. K. C. Hesselink • J. A. L. Jeneson • W. H. Backes •  
C. J. A. van Echteld • J. M. A. van Engelshoven •  
M. Mensink • P. Schrauwen

Diabetologia (2007) 50:113–120  
DOI 10.1007/s00125-006-0475-1

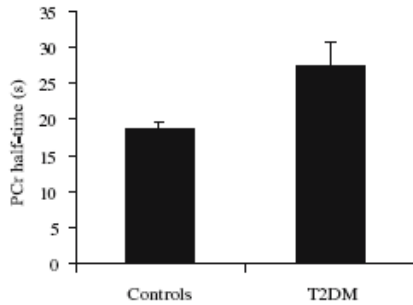


Fig. 4 PCr half-time was longer in patients with type 2 diabetes mellitus (T2DM) than BMI-matched controls ( $p < 0.05$ )

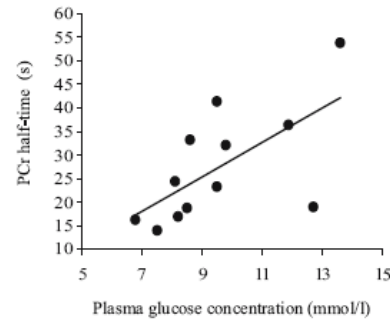


Fig. 5 Plasma glucose concentration correlates with the PCr half-time in diabetes patients ( $r^2 = 0.42$ ,  $p < 0.01$ )

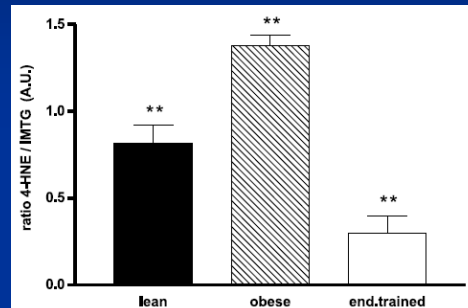
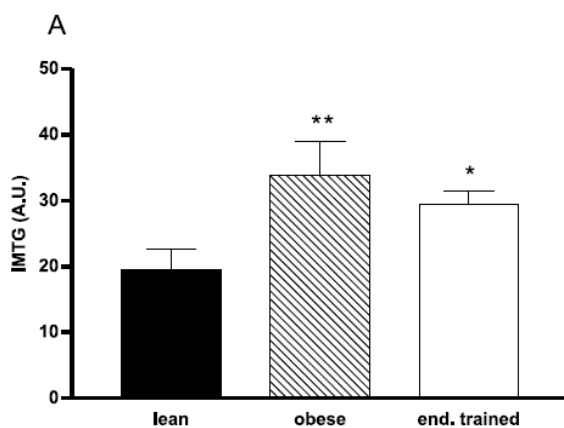
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FEBS Letters 551 (2003) 104–106

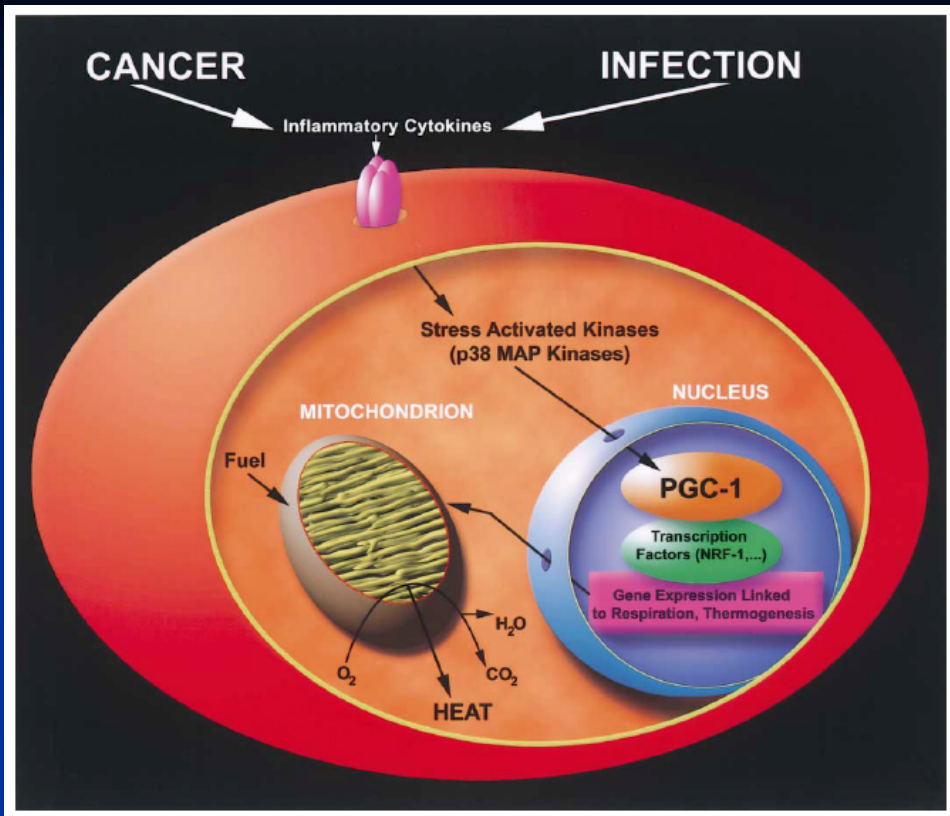
FEBS 27574

## Lipid peroxidation in skeletal muscle of obese as compared to endurance-trained humans: a case of good vs. bad lipids?

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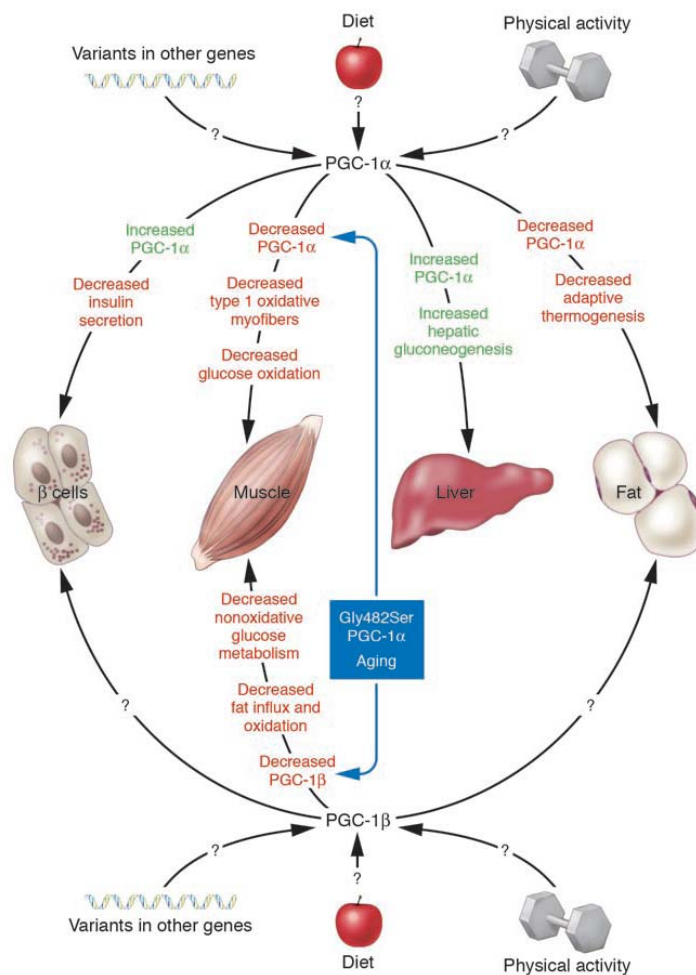


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Molecular Cell, Vol. 8, 971–982, November, 2001, Cytokine Stimulation of Energy Expenditure through p38 MAP Kinase Activation of PPAR Coactivator-1

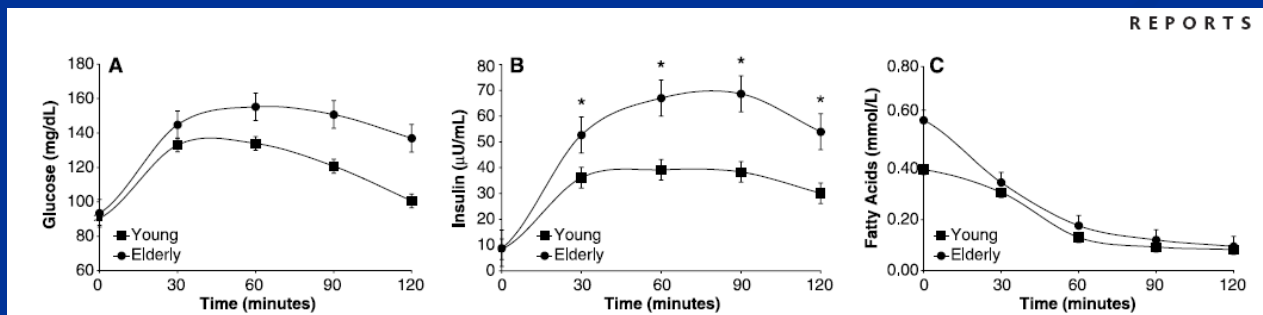
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# Mitochondrial Dysfunction in the Elderly: Possible Role in Insulin Resistance

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# Mitochondrial Dysfunction in the Elderly: Possible Role in Insulin Resistance

Table 1. Body composition of study participants.

	Age (years)	Body weight (kg)	Fat mass (kg)	% Fat mass (% body weight)	LBM (kg)	BMI (kg/m <sup>2</sup> )
Young (n = 13)	27 ± 2	71 ± 4	19.9 ± 2.5	28 ± 3	54 ± 5	23.8 ± 1.1
Elderly (n = 15)	70 ± 2	70 ± 3	20.1 ± 1.7	29 ± 2	49 ± 3	25.1 ± 0.5
P value	<0.0001	0.69	0.93	0.77	0.28	0.28

Table 2. Metabolic rates and tissue lipid content of participants (24).

	Basal rates of glucose production (mg/kg of LBM/min)	Clamp peripheral glucose metabolism rate (mg/kg of LBM/min)	Intramyocellular lipid content (%)	Intrahepatic lipid content (%)	Mitochondrial TCA flux rate (nmol/g of muscle/min)	Mitochondrial ATP synthesis rate (µmol/g of muscle/min)
Young	2.3 ± 0.1	6.2 ± 0.6	0.96 ± 0.08	0.49 ± 0.10	96 ± 10	7.50 ± 0.77
Elderly	2.4 ± 0.1	4.0 ± 0.4	1.39 ± 0.15	1.61 ± 0.38	62 ± 5	4.06 ± 0.65
P value	0.34	<0.002	0.035	0.036	<0.006	<0.004

↑ IR

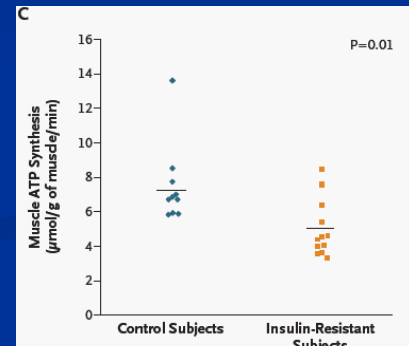
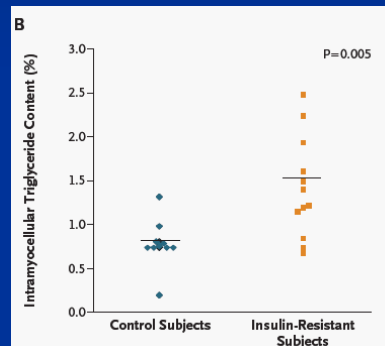
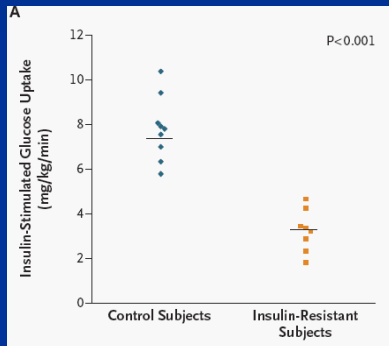
↑ IMLC

↓ OX<sub>et</sub> PHOS

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# Impaired Mitochondrial Activity in the Insulin-Resistant Offspring of Patients with Type 2 Diabetes

Kitt Falk Petersen, M.D., Sylvie Dufour, Ph.D., Douglas Befroy, Ph.D.,  
Rina Garcia, B.A., and Gerald I. Shulman, M.D., Ph.D.



**Table 1. Characteristics of the Two Groups of Subjects.<sup>a</sup>**

Characteristic	Insulin-Sensitive Controls	Insulin-Resistant Subjects
Age (yr)	28±7	26±7
Weight (kg)	60±13	64±9
Height (m)	1.69±0.11	1.65±0.09
Body-mass index	21±2	23±2
Activity index†	2.6±0.5	2.4±0.4
Glycosylated hemoglobin (%)‡	5.1±0.3	5.2±0.4
Adipocyte-derived factors		
Adiponectin (μg/ml)	12±4	11±4
Tumor necrosis factor α (pg/ml)	1.5±0.3	1.8±0.9
Interleukin-6 (pg/ml)	0.52±0.31	0.68±0.42
Resistin (ng/ml)	0.77±0.24	0.79±0.24

GG\_SFEFS\_19.10.2009

## Mitochondria and IR

### *Dysfunction of mitochondria in human skeletal muscle in type 2 diabetes*

Kelley et al., Diabetes, 2002

→ Type 2 diabetic patients show a reduction of 40% in NADH:O<sub>2</sub> oxidoreductase

→ Changes in mitochondrial morphology (small and separated)

GG\_SFEFS\_19.10.2009

# Mitofusin-2 (Mfn-2)

