Opportunities and obstacles in precision nutrition \rightarrow metabolic mechanisms

- 1. Applying metabolomics to understand nutrition and disease physiology
- 2. Altered amino acid metabolism influences sphingolipid diversity to drive peripheral neuropathy and macular disease
- 3. Is serine metabolism predictive of diabetic peripheral neuropathy?

Christian Metallo

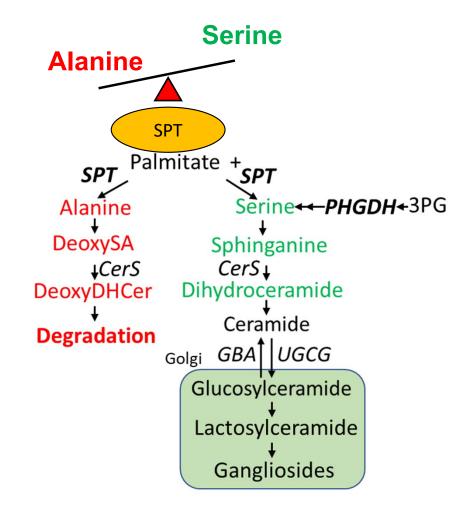
Food Forum Workshop Challenges and Opportunities for Precision and Personalized Nutrition Aug 10 2021



Molecular & Cellular Biology Lab

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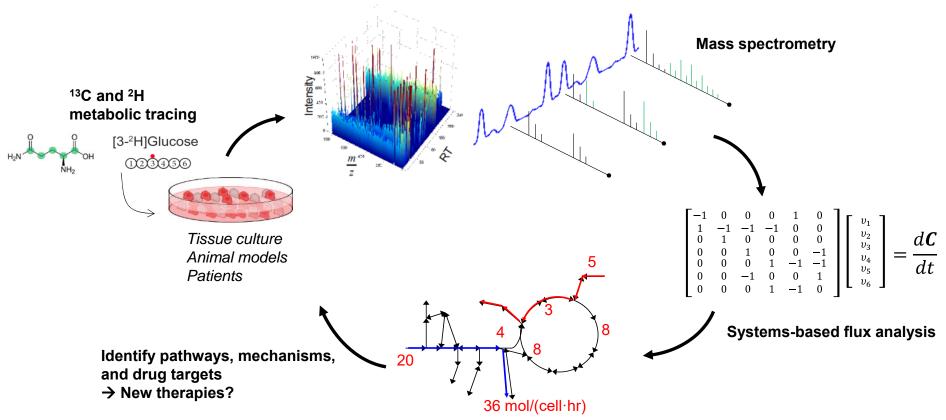




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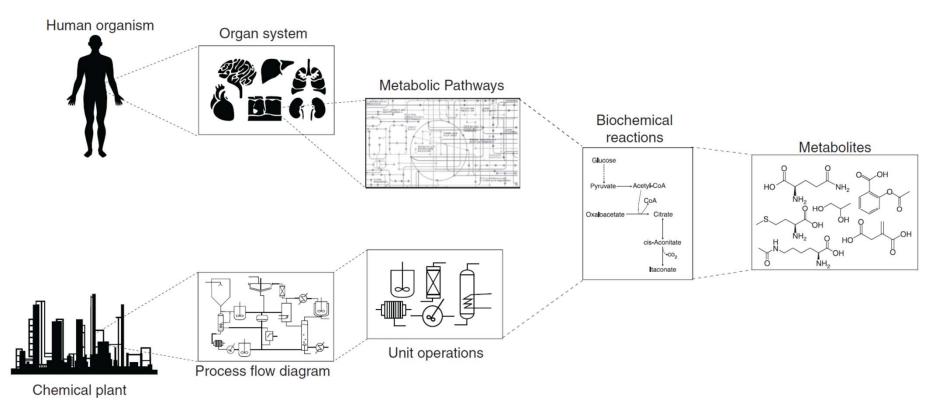


Tracing molecules through space and time to understand disease

Key areas of interest:

- Cancer metabolism: Parker et al. Canc Res 2014; Badur et al. Cell Rep 2018; Muthusamy et al. Nature 2020
- T2D, BCAA metabolism, and lipid diversity: Green et al. Nat Chem Bio 2016; Wallace et al. Nat Chem Bio 2018
- Serine, neuropathy, and Macular Telangiectasia (MacTel): Gantner et al. NEJM 2019; Eade et al. Nat Metab 2021

Our bodies, tissues, and cells are more analogous to chemical plants than test tubes

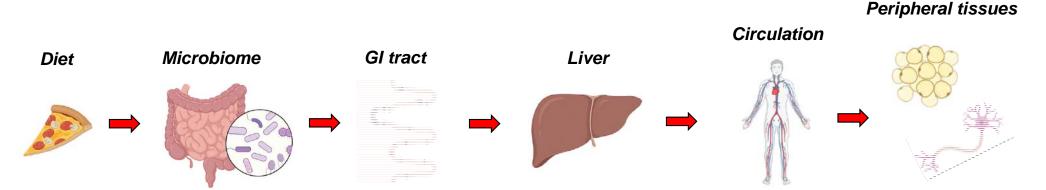


We need to understand these robust (genetically-evolved), biochemical engineering control mechanisms (metabolism) to exploit them therapeutically

Can precision nutrition be used to modulate health?

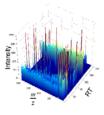
Absolutely... with the right <u>patients</u> and the right <u>dietary approach</u> to treat the right <u>disease</u> Precision nutrition & precision medicine are both needed

Nutrition is inherently imprecise: the microbiome, digestive system, and systemic metabolism function to minimize or filter disturbances/fluctuations in organisms



Dietary manipulations (good or bad) will be mitigated by this system Defects in any step can impact systemic metabolism and drive disease Nutritional science requires diverse expertise

Static metabolite measurements in one compartment can only tell you so much \rightarrow Location and dynamics are critical!



Case study: serine, Macular Telangiactasia (MacTel), and peripheral neuropathy

<u>Macula</u>

Responsible for high visual resolution Accounts for ~50% of neural activity in retina

<u>MacTel:</u>

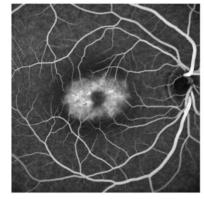
Idiopathic juxtafoveal retinal telangiectasis type 2 Familial disease of the retina (<0.1% of pop.) Central vision loss \rightarrow onset at ~40 years Difficulty reading, driving, etc.

The MacTel project:

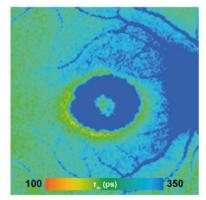
Started in 2005 to understand this disease International group of clinicians and basic scientists Recent genomic focus \rightarrow 800 patients now sequenced GWAS hits \rightarrow PHGDH, PSAT1, PSPH

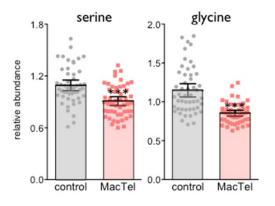
Serine biosynthesis enzymes!

Fluorescein angiogram



Fluorescence lifetime imaging ophthalmoscopy (FLIO)

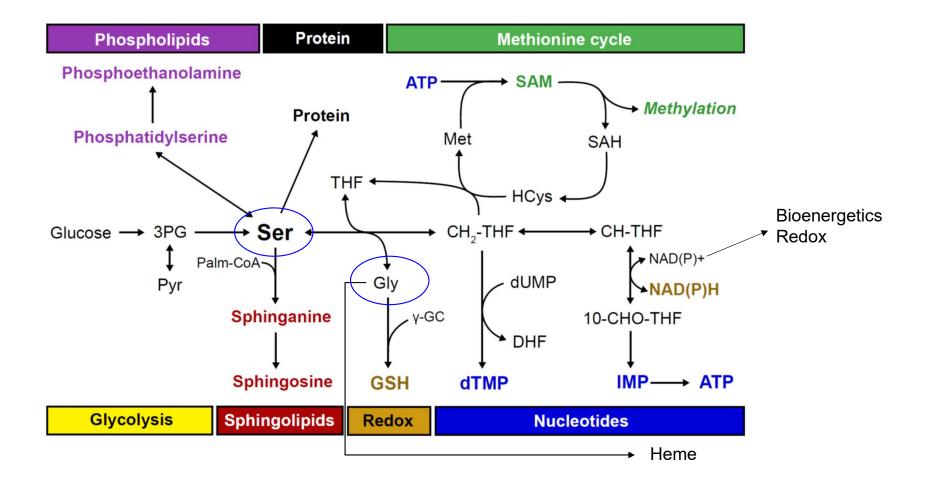




Serine and glycine levels down ~20% in MacTel patients plasma

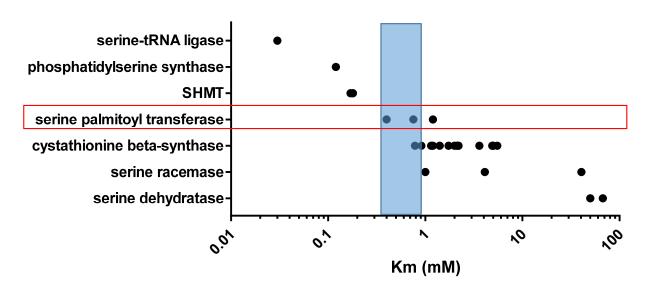
Scerri et al. Nat Genetics 2017

Why are serine and glycine metabolically important?



How do cells/organisms control substrate flux to divergent pathways?

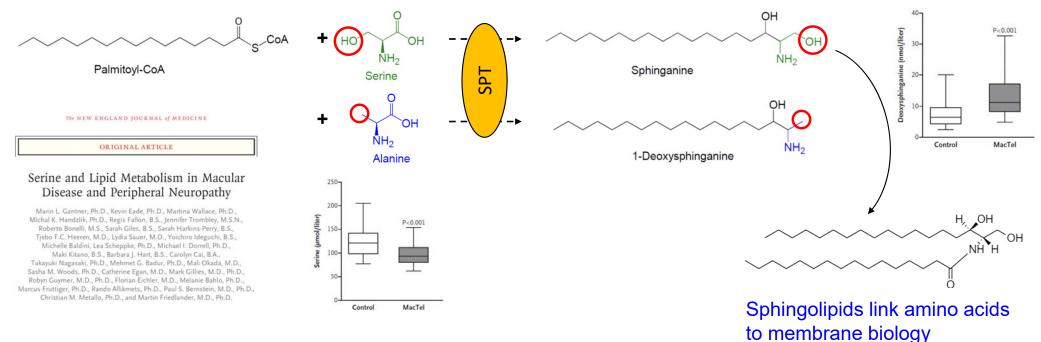
- Numerous enzymes will compete for serine in cells
- Consider Km values → enzyme substrate affinities for several (from the BRENDA database)
 - Tissue "[serine]" remains at 50-250 μ M in mice fed a serine/glycine-free diet



- Evolution has "tuned" enzyme Km's to ensure that the "most important" enzymes find their substrate when concentrations are low
- Could moderately low serine (observed in vivo) drive alterations in sphingolipid metabolism?

$$v = \frac{V_{max}[S]}{K_M + [S]}$$

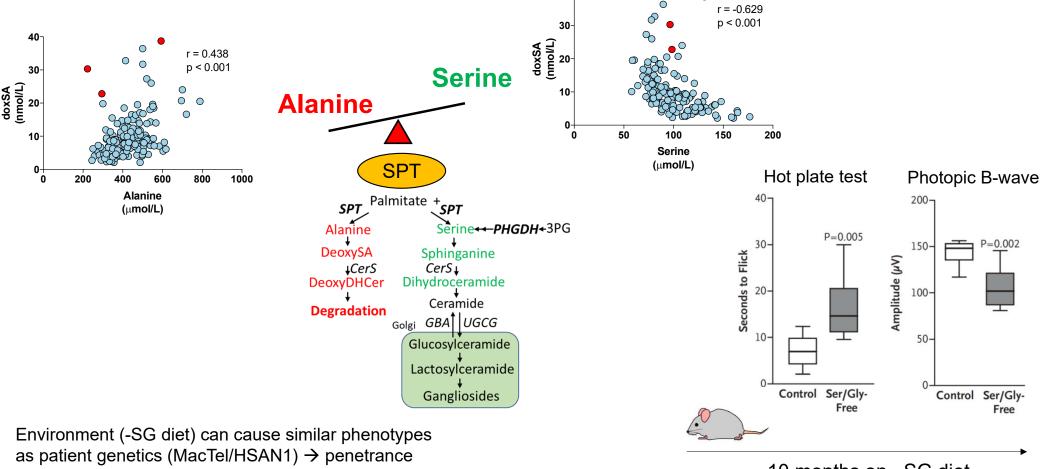
Serine palmitoyltransferase generates bioactive sphingolipids \rightarrow but acts promiscuously with different amino acids



1-deoxysphingolipids are formed when SPT uses alanine instead of serine

- → First identified as endogenous in Hereditary Sensory and Autonomic Neuropathy (HSAN1) patients (Eichler, Hornemann et al. J. Neurosci. 2009)
- → HSAN1 patients express coding variants in SPTLC1 or SPTLC2 → peripheral neuropathy
- → MacTel patients have elevated doxSL in serum
- → Some (but not all) HSAN1 patients have MacTel

Nature/nurture: serine/glycine-free diets induce retinal defects and peripheral neuropathy in mice

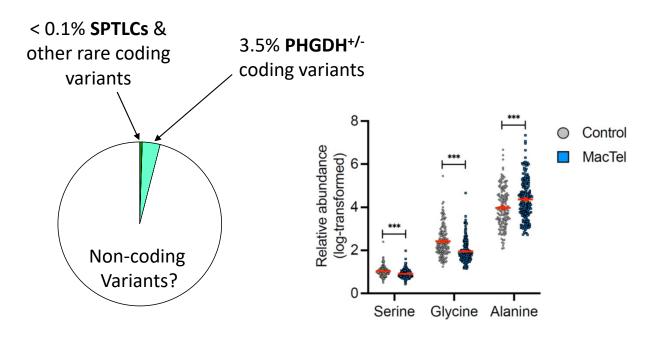


Gantner et al. *NEJM* 2019

¹⁰ months on -SG diet

MacTel is a disease of dysregulated amino acid metabolism

- PHGDH haploinsufficiency is significantly enriched in MacTel cohort (Eade et al. Nat Met 2021)
- PHGDH is rate-limiting for serine synthesis in the nervous system
- Familial disease, several lines of genetic evidence (GWAS, coding variants) linked to serine
- Systemic serine/glycine, alanine, and SLs altered



Collaborations with Friedlander (TSRI), Bernstein (Utah), Allikmets (Columbia), Bahlo (WEHI)

Key nutrition questions:

What factors (dietary or otherwise) influence these phenotypes?

Are there links to more common diseases and co-morbidities (e.g. type 2 diabetes)?

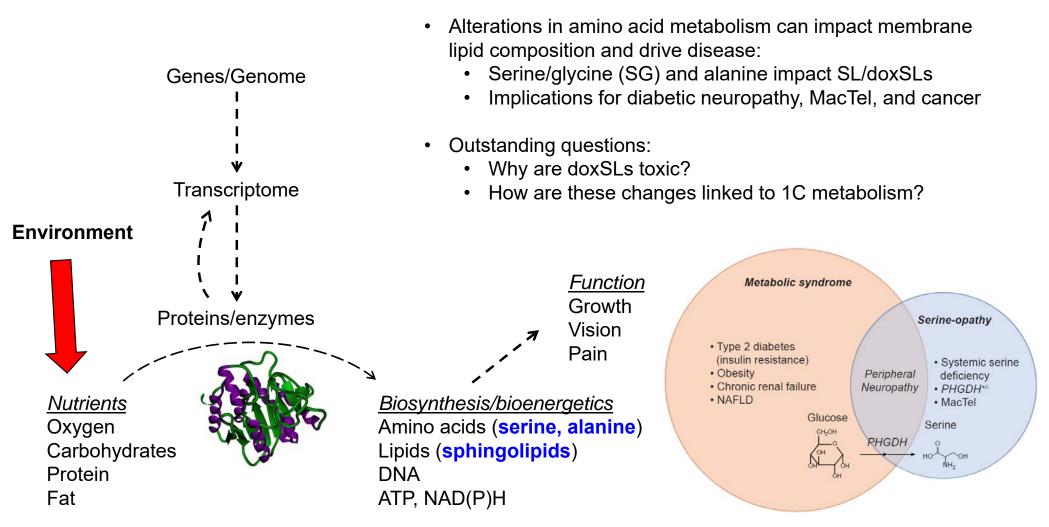
TABLE 4. Comparison of Macular Telangiectasia (MacTel) Natural History Observation Study with Population-based Cohorts: Results from Multivariate Logistic Regression.			
Characteristic*	Odds	Limits	p Value
US MacTel Cohort v	ersus NHAN	ES	
Diabetes mellitus	3.58	2.39-5.36	< 0.0001
Overweight	2.45	1.47 - 4.07	0.0006
Australian MacTel C	ohort versus	BMES	
Cancer	2.81	1.54-5.10	0.0007
Diabetes mellitus	5.58	3.28-9.52	< 0.0001
Overweight	3.50	1.86-6.57	< 0.0001
European MacTel Co	hort versus l	RS-I	
Hypertension	2.60	1.83-3.69	< 0.0001
Diabetes mellitus	4.78	3.00-7.63	< 0.0001
Thyroid Disease	2.13	1.30-3.50	0.0028
Overweight	1.97	1.31-2.95	0.0010

*All models include age and sex

NHANES, National Health and Nutrition Examination Study; BMES, Blue Mountains Eye Study; RS-I, Rotterdam Study-I

Clemons et al, Opth Epidem 2013

Environment (diet) can influence the same biochemical pathways as genetics



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