

Effects of Inorganic HgCl₂ on Adipogenesis

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Mercury is a common pollutant that alters glucose metabolism in adipocytes; however, the effect of HgCl₂ on differentiating adipocytes and their subsequent metabolic function is not well understood. Two adipocyte models, the 3T3-L1 and C3H10T1/2 (10T1/2) cell lines, were differentiated in the presence of HgCl₂. To assess the amount of differentiation in a population, markers of differentiation (i.e., PPAR γ and GLUT 4 expression and lipid accumulation) and functions of adipocytes (i.e., glucose transport and insulin-induced glucose transport) were measured. HgCl₂ exposure significantly decreased the number of phenotypic adipocytes and PPAR γ expression in both 3T3-L1 and 10T1/2 cells without effects on cell viability. GLUT 4 was significantly reduced by HgCl₂ treatment in 10T1/2 but not 3T3-L1 cells. Exposure to HgCl₂ during differentiation increased basal glucose uptake in a dose-dependent manner (up to 2.5-fold) and decreased insulin-induced glucose uptake in 3T3-L1 adipocytes. In contrast, HgCl₂ had little effect on basal or insulin-induced glucose uptake in 10T1/2 cells, possibly due to their lower insulin responsiveness. We examined the effect of HgCl₂ exposure on signaling event involved in differentiation of adipocytes and cellular stress, namely, the phosphorylation of ERK1/2 and JNK, respectively. HgCl₂ exposure had no effect on ERK1/2 phosphorylation in either cell line, increased JNK phosphorylation in the 10T1/2, and had no effect on JNK phosphorylation in 3T3-L1 cells. These data indicate HgCl₂ exposure can inhibit the differentiation of fibroblasts into adipocytes as well as influence signaling events and the subsequent metabolic activity of differentiated adipocytes.

Key Words: adipocyte; adipogenesis; mercury; differentiation; 3T3-L1; 10T1/2

Terminal differentiation of precursor cells into adipocytes is an important component of glucose and lipid metabolism throughout the development and life of animals. Thus, disruption of differentiation may result in serious developmental and adult diseases related to glucose/lipid metabolism. *In vitro* research has shown that adipocyte differentiation and/or metabolism is disrupted by exposure to numerous environmental

chemicals, such as dioxin and endrin, and metal contaminants, such as arsenite, vanadate, and the Group IIb metals: Cd²⁺, Zn²⁺, and Hg²⁺ (Alexander *et al.*, 1998; Barnes *et al.*, 1999; Ezaki, 1989; Jin *et al.*, 2000; Liao and Lane, 1995; Moreno-Aliaga and Matsumura, 2000; Wauson *et al.*, 2002).

Metals have been shown to have a wide variety of effects on adipocytes. Vanadate inhibits adipocyte differentiation of the preadipocyte 3T3-L1 cell line when added during the first 24 h of differentiation (Jin *et al.*, 2000; Liao and Lane, 1995). Vanadate also stimulates glucose transport and lipogenesis in rat adipocytes (Dubyak and Kleinzeller, 1980; Shechter and Ron, 1986). Arsenite inhibits adipocyte differentiation of the C3HT101/2 fibroblast cell line with both chronic and acute exposure (Trouba *et al.*, 2000; Wauson *et al.*, 2002). Zinc increased both glucose transport and phosphorylation of Akt, a kinase involved in the insulin signaling leading to increased glucose transport (May and Contoreggi, 1982; Tang and Shay, 2001). Similarly, studies have shown that low micromolar concentrations of cadmium can increase GLUT 1-mediated glucose uptake in 3T3-L1 adipocytes (Harrison *et al.*, 1991). Ezaki (1989) showed a 4-fold stimulation of glucose transport in primary rat adipocytes due to acute exposure to 100 μ M HgCl₂, while we have found similar effects in 3T3-L1 adipocytes with chronic exposure to low concentrations of HgCl₂ (1–10 μ M; Barnes and Kircher, unpublished data). Despite the clear effect of metals on adipocytes, the specific impact of HgCl₂ on cellular differentiation and subsequent metabolic function of adipocytes remains unclear.

In vitro experiments have shown that terminal adipocyte differentiation has two distinct phases: a commitment phase and a maturation phase (Shao and Lazar, 1997; Xue *et al.*, 1996). Cascades of transcription factors, including peroxisome proliferator-activated receptor γ (PPAR γ) and the CCAAT/enhancer-binding proteins (C/EBPs), control these two phases. Insulin responsiveness of adipocytes is a characteristic that is acquired during the maturation phase of differentiation (Resh, 1982) and involves the expression of the proteins responsible for the functions of adipocytes (e.g., lipogenesis and insulin-sensitive glucose transport). The ability of adipocytes to respond to insulin is an important component of whole body glucose and lipid metabolism and storage. A decrease in insulin-mediated responses from insulin target tissues is termed

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insulin resistance and is an important characteristic of Type II diabetes (Zimmet *et al.*, 2001).

In this study, we used the well-characterized 3T3-L1 preadipocyte and the multipotent C3H10T1/2 fibroblast cell models to determine the effects of inorganic HgCl₂ on adipocyte differentiation and function. Our results demonstrate that inorganic HgCl₂ exposure inhibits differentiation, but not viability, of both cell lines. In addition, we show that HgCl₂ treatment decreases the expression of several adipocyte-specific proteins, affects kinases involved in insulin signaling, and decreases insulin-mediated glucose uptake in the 3T3-L1 cell line. The reduction in adipocyte differentiation and subsequent decrease in insulin-mediated glucose transport following HgCl₂ exposure suggest that HgCl₂ may contribute to insulin resistance and the onset of diseases related to insulin responsiveness.

MATERIALS AND METHODS

Reagents. For the culture of 10T1/2 cells, Dulbecco's modified Eagles medium (DMEM) formulated with F12 media was obtained from Gibco/Invitrogen (Carlsbad, CA) and fetal bovine serum (FBS) was purchased from Atlanta Biological (Norcross, GA). For the culture of 3T3-L1 cells, DMEM was obtained from Sigma Chemical Co. (St. Louis, MO) and FBS and new calf serum (NCS) were obtained from Biowhittaker (Walkersville, MD). Other cell culture reagents for both cell lines were the same and include: bovine pancreatic insulin (28 U/mg), mercuric chloride, dexamethasone, and 3-isobutyl-1-methylxanthine (IBMX), which were purchased from Sigma Chemical Co. [³H]-deoxyglucose (DG, >30 Ci/mmol) was obtained from NEN Life Science Products, Inc. (Boston, MA). Viability of treated and untreated cells was assessed by the release of lactate dehydrogenase using the CytoTox-ONE kit from Promega (Madison, WI) and the manufacturer's recommended protocol. All other chemicals were reagent grade or higher and obtained from commercial sources.

Differentiation of 3T3-L1 cells. 3T3-L1 fibroblasts obtained from ATCC (Rockville, MD) were grown to confluence in high-glucose DMEM containing 10% NCS. Differentiation of 3T3-L1 fibroblasts was performed as described previously with minor modifications (Frost and Lane, 1985). Briefly, the confluent cells were incubated 3 days in DMEM containing 10% FBS, 1 μg/ml insulin, 0.25 μM dexamethasone, and 500 μM IBMX (IDM). Cells were then incubated for an additional 2 days in DMEM containing 10% FBS and 1 μg/ml insulin. After differentiation, adipocytes were maintained in DMEM containing 10% FBS. Visual assessment of lipid droplet formation indicated that > 80% of the cells exhibited the adipocyte phenotype.

Differentiation of C3H10T1/2 cells. C3H10T1/2 cells (ATCC) were maintained in DMEM:F12 media and differentiated as described previously (Phillips *et al.*, 1995). Upon reaching confluence, cells were induced to differentiate in DMEM:F12 supplemented with 10% FBS and 10 μg/ml insulin, 1 μM dexamethasone, 0.5 μM IBMX, and 1 μM BRL49653 (IDM/BRL) for 2 days. Cells were then incubated for an additional 5 days in DMEM containing 10% FBS and 10 μg/ml insulin. Differentiation, as assessed by lipid droplet formation, ranged from 30–50%.

Flow cytometry and cell staining. Cells were differentiated in the presence or absence of HgCl₂. After differentiation, cells were lifted from the plate with trypsin and fixed with paraformaldehyde (1% final concentration). Nile Red dissolved in DMSO was added to a final concentration of 0.25 μg/ml and staining was quantified by flow cytometry. Cellular Nile Red fluorescence, a measure of lipid accumulation within adipocytes, was measured at 530 nm on a FACSCalibur dual-laser flow cytometer (Becton Dickinson, San Jose, CA). The adipocyte population was identified based on Nile Red staining (lipid content) and side scatter (cell complexity). Data was acquired and analyzed

with CellQuest software (Becton Dickinson). For Oil Red O staining and extraction, cells were washed one time with 37°C PBS and incubated with formalin (10% formaldehyde, 90% PBS) for 15 min to fix the cells. After fixing, cells were washed three to four times with tap water. Oil Red O solution (5 mg Oil Red O/ml isopropanol) was added to each well and incubated at room temperature for 2 h. Plates were rinsed three to four times with tap water and allowed to air dry. To extract Oil Red O, isopropanol was added to each well and shaken at room temperature for 5 min, and a sample was read at 510 nm. Oil Red O binds neutral lipids and was used to determine relative amounts of lipid in treated and untreated adipocyte populations for confirmation of Nile Red data. Oil Red O measures total lipid content of all cells in the population rather than just the adipocyte population measured by flow cytometry and Nile Red.

Glucose transport. Glucose uptake was measured 7 days after initiation of the differentiation protocol. Cells were washed twice with KRPH buffer (5 mM Na₂HPO₄, 20 mM HEPES, 1 mM MgSO₄, 1 mM CaCl₂, 4.7 mM KCl, 0.1% BSA, pH 7.4) and then incubated for 1 h in KRPH buffer. Glucose uptake was measured in the presence and absence of 10 μM cytochalasin B to determine effects on mediated and nonmediated DG uptake. Glucose uptake was measured during the final 10 min by the addition of [³H]-2-deoxyglucose to a final assay concentration of 50 μM DG containing 0.5 μCi 2-[³H]-deoxyglucose/ml. Cells were washed three times in cold PBS, solubilized in 0.5 N NaOH, and aliquots were subjected to scintillation counting. Total protein levels were determined using the Bradford protein assay (Bio-Rad, Hercules, CA).

Immunoblotting. Monoclonal anti-PPARγ, polyclonal anti-GLUT 4, monoclonal antiphospho-ERK, and the appropriate HRP-conjugated antibodies were purchased from Santa Cruz Biotechnology (Santa Cruz, CA). Phospho-specific antibodies raised against JNK were purchased from Upstate Biotechnology (Lake Placid, NY). Equal amounts of protein were separated by SDS-PAGE using 10% polyacrylamide gels and then transferred to ECL nitrocellulose membrane (Amersham, Peapack, NJ), per the manufacturer's protocol. Immunoblotting was performed and proteins were visualized using the HRP-conjugated secondary antibody and ECL detection reagents, per the manufacturer's protocol (Amersham). Blots were scanned and the analysis performed on a Macintosh G4 computer using the public domain NIH Image (version 1.61, developed at the U.S. NIH and available at <http://rsb.info.nih.gov/nih-image/>).

Statistical analysis. Data were analyzed by one-way analysis of variance (ANOVA, InStat version 2.03). Differences among data means were assessed using a Student-Newman-Keuls multiple comparison test (*p* < 0.05). Experiments were replicated at least three times with representative experiments shown in the figures.

RESULTS

HgCl₂ Treatment Inhibits Adipocyte Differentiation in a Dose-Dependent Manner

HgCl₂ treatment reduced the number of 10T1/2 and 3T3-L1 cells that acquired the adipocyte phenotype when treated with the hormonal mixture required for differentiation (IDM/BRL and IDM, respectively). The number of adipocytes was quantitated using flow cytometric analysis of the size, complexity, and amount of Nile Red staining of cells. The addition of HgCl₂ from the initiation of IDM treatment through 7 days reduced the number of 3T3-L1 cells that became adipocytes in a dose-dependent manner. Treatment with 5–10 μM HgCl₂ reduced the number of phenotypic adipocytes by 40–60% (Fig. 1A). The addition of HgCl₂ reduced the number of 10T1/2 cells that become adipocytes by 60–90%, with a maximum effect at 10 μM HgCl₂ (Figs. 1A and 1B). Lactate

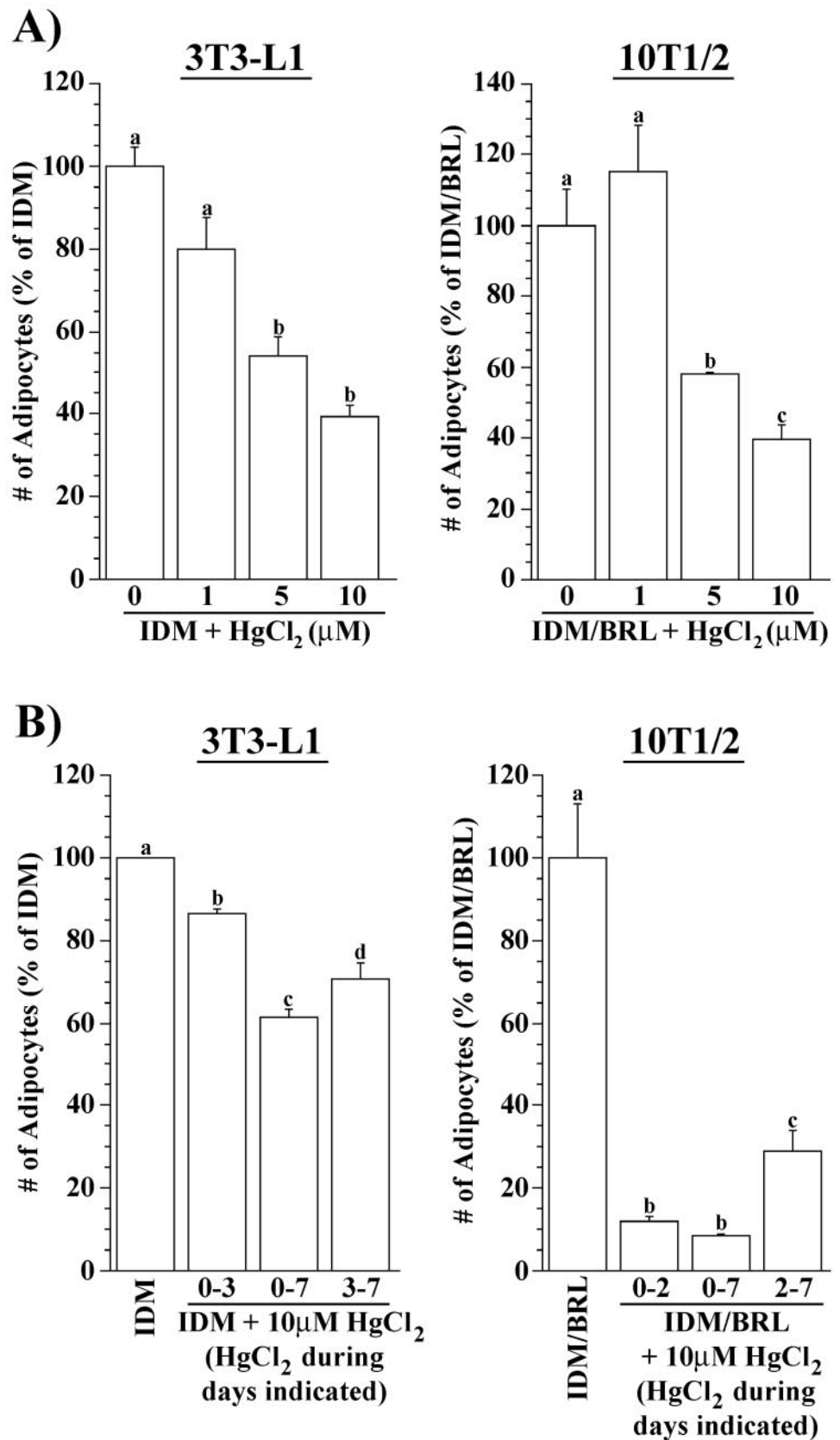


FIG. 1. The effect of HgCl₂ on the formation of phenotypic adipocytes as shown by (A and B) representative experiments in which (A) 3T3-L1 and 10T1/2 cells were induced to differentiate as described in Materials and Methods. 3T3-L1 cultures were treated with 1, 5, or 10 μM HgCl₂ throughout differentiation and 10T1/2 cultures treated for days 0–2. (B) 3T3-L1 and 10T1/2 cells were induced to differentiate in the presence or absence of 10 μM HgCl₂ for the commitment phase, maturation phase, or entire differentiation according to differentiation protocols described in the Materials and Methods. (A and B) 3T3-L1 and 10T1/2 cells were cultured for 7 days after initial hormonal stimulation, fixed, stained with Nile Red, and analyzed by flow cytometry to determine the number of phenotypic adipocytes. Cell complexity and the extent of Nile Red staining were used as criteria for distinguishing the adipocyte population. Results are normalized to IDM or IDM/BRL-stimulated levels (set to 100) and are presented as the mean of four samples ± SEM. Columns with different letters (abc) are significantly different from one another (ANOVA, *p* < 0.05).

dehydrogenase activity was measured to determine the effects of treatment on cell viability. Media LDH was not different from control for 1–20 μM HgCl₂, although 50 μM HgCl₂ increased media LDH in both cell lines (data not shown). In other experiments, differentiated adipocytes were incubated with 1–10 μM HgCl₂ for 16 days without an effect on cell number (Barnes and Kircher, unpublished data).

The magnitude of the inhibition of adipogenesis by HgCl₂ varied among experiments and is probably due to differences in passage number and cellular responsiveness to the differentiation cocktail. For example, the percentage of differentiation under control conditions varied among cultures (75–95% and 20–50% for 3T3-L1 and 10T1/2 cells, respectively). However, despite the variability among cultures, we observed consistent and repeatable effects of HgCl₂ on adipogenesis in both 3T3-L1 and 10T1/2 cells.

To determine if HgCl₂ was effective at a particular stage of differentiation, cells were incubated with HgCl₂ for the commitment phase (time exposed to IDM or IDM/BRL), the maturation phase (rest of differentiation), or during the entire differentiation process. Figure 1B shows that 3T3-L1 and 10T1/2 cells differ in their sensitivity to HgCl₂ at different phases of differentiation. Mercury inhibited differentiation at all stages, however, the magnitude of inhibition differed among stages. In 3T3-L1 cells, 10 μM HgCl₂ treatment was slightly less effective at inhibiting adipogenesis when added during the maturation phase (days 3 to 7) than when HgCl₂ was present for the entire differentiation period (Fig. 1B). In 10T1/2 cells, 10 μM HgCl₂ exposure during the commitment phase was as effective at inhibiting adipocyte differentiation as if HgCl₂ was present throughout differentiation (Fig. 1B). For this reason, in the subsequent experiments, 10T1/2 cells were only exposed to HgCl₂ during the commitment phase of differentiation (days 0–2). Exposure of 10T1/2 cells to HgCl₂ during only the

maturation phase significantly inhibited adipocyte differentiation, although to a lesser degree than the other exposure periods.

HgCl₂ Treatment Decreases the Lipid Content of 3T3-L1- and 10T1/2-Derived Adipocytes

The effect of HgCl₂ on lipid accumulation (an important component of adipocyte differentiation) in 3T3-L1 and 10T1/2 cells is shown in Figure 2. Cells were exposed to HgCl₂ during differentiation and the amount of Oil Red O staining was determined after 8 days. Oil Red O staining can be used to assess the amount of lipid in a population of cells. HgCl₂ treatment resulted in a dose-dependent decrease in cellular lipid accumulation in both cell lines (decreased in Oil Red O staining). Oil Red O staining was significantly reduced with 20 μM HgCl₂ and 5 μM HgCl₂ in 3T3-L1 and 10T1/2 cells, respectively. Using flow cytometry and Nile Red staining, lipid accumulation within individual 3T3-L1 adipocytes was measured. As expected, HgCl₂ decreased the average lipid content of differentiated 3T3-L1 adipocytes in a dose-dependent manner (Table 1). Nile Red staining is a more sensitive method for measuring lipid accumulation. Using this more sensitive analysis of lipid accumulation, we observed a decrease in lipid accumulation with 1 μM HgCl₂ as compared to 20 μM HgCl₂ with Oil Red O staining. Mean Nile Red fluorescence decreased 43% in 3T3-L1 adipocytes exposed to 10 μM HgCl₂.

HgCl₂ Inhibits Expression of Adipogenic Proteins

To further examine the effects of HgCl₂ on adipogenesis, we examined the expression of early (PPAR γ) and late (GLUT 4) adipogenic proteins in treated and untreated cells. Peak expression of PPAR γ occurs about 48 h after the induction of differentiation and is often used as a marker of early adipocyte

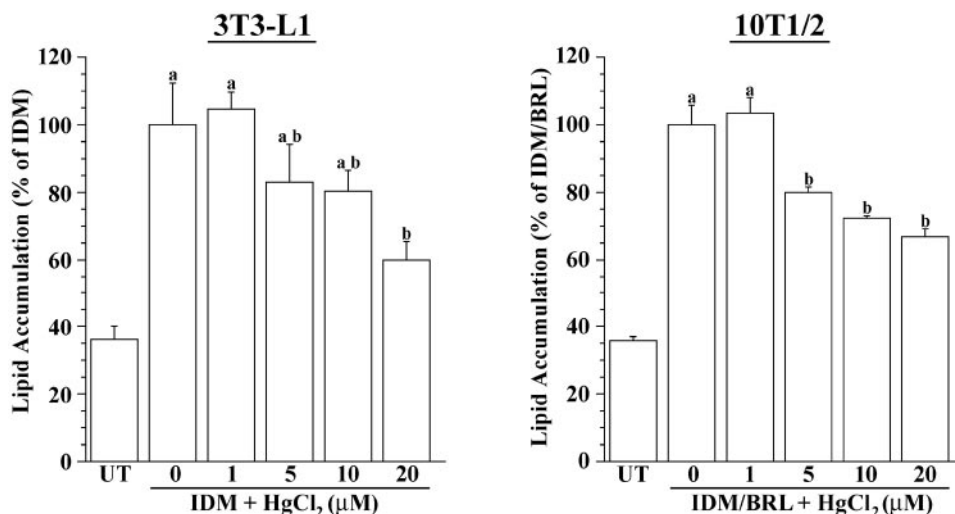


FIG. 2. The effect of HgCl₂ on lipid accumulation in 3T3-L1 and 10T1/2 adipocytes as shown by a representative experiment where 3T3-L1 and 10T1/2 cells were differentiated in the presence of 0, 1, 5, 10, and 20 μM HgCl₂. Following differentiation, cells were fixed with paraformaldehyde and stained with Oil Red O. Stained cells were extracted with isopropanol and cellular Oil Red O, determined by absorbance at 510 nm. Results were normalized to IDM or IDM/BRL-stimulated levels (set to 100). Values presented are the mean of four samples \pm SEM. Columns with different letters (abc) are significantly different from one another (ANOVA, $p < 0.05$).

TABLE 1
Effect of HgCl₂ on Lipid Accumulation in 3T3-L1 Adipocytes

$\mu\text{M HgCl}_2$	Nile Red mean fluorescence
0	157.7 \pm 0.6
1	128.8 \pm 6.1
5	96.0 \pm 1.9
10	89.3 \pm 1.4

Note. 3T3-L1 cultures were treated with 1, 5, or 10 $\mu\text{M HgCl}_2$ throughout differentiation. On day 7, 3T3-L1 adipocytes were fixed, stained with Nile Red, and analyzed by flow cytometry to determine the mean fluorescence of Nile Red in HgCl₂-treated and untreated adipocytes. Data are presented as the mean \pm standard error from the mean with significant differences represented by different superscripts (ANOVA, $p < 0.05$).

differentiation (Ntambi and Young-Cheul, 2000). HgCl₂ dose-dependently decreased expression of PPAR γ up to 70 and 95% in 3T3-L1 and 10T1/2 cells, respectively (Fig. 3). GLUT 4 is not detected in 3T3-L1 or 10T1/2 fibroblasts, however, expression increases in the maturation phase of adipogenesis, making it useful as a marker of late differentiation (Resh, 1982). We hypothesized that the reduced number of phenotypic adipocytes would correlate with lower expression of GLUT 4. Treatment with 10 $\mu\text{M HgCl}_2$ inhibited the expression of GLUT 4 in 10T1/2 cells; however, total GLUT 4 expression in 3T3-L1 cells did not change with HgCl₂ treatment (Fig. 4). These data show that HgCl₂ inhibits expression of proteins critical for both the commitment and maturation of these cells to adipocytes, but that models can differ in their response to HgCl₂.

HgCl₂ Affects the Phosphorylation of Kinases Associated with Adipocyte Differentiation and Metabolism

The hormonal stimulus used to differentiate these two mouse embryo fibroblast cell lines elicits a cascade of cell signaling events involved in regulating the process. The potential for HgCl₂ exposure to modify several important signaling proteins, including ERK1/2 and JNK, was determined for both cell lines. To avoid activation of signaling proteins by the addition of fresh serum to the culture, a modified differentiation protocol was used in which the hormones were added directly to the media present in the culture. As expected based on previous reports (Prusty *et al.*, 2002), insulin and the differentiation cocktail caused an increase in ERK phosphorylation in both cell lines (Fig. 5). HgCl₂ treatment had no significant effect on the amount of ERK phosphorylation in either the 10T1/2 or 3T3-L1 cell line at 10 min (Fig. 5). In 10T1/2 cells, phosphorylated JNK was detected at 10 min and 1 h in cells treated with insulin or IDM/BRL, in the presence and absence of HgCl₂, suggesting that HgCl₂ has no effect on JNK at these early time points. However, HgCl₂ does have an effect at later time points. At 6 h, JNK phosphorylation was only detected in 10T1/2 cells that were treated with HgCl₂ (alone or with hormones). In contrast, phosphorylated JNK was not detected

in 3T3-L1 cells until 6 h in cells treated with insulin alone and insulin with HgCl₂.

Effect of HgCl₂ on Insulin-Stimulated Glucose Transport

We next hypothesized that insulin-stimulated glucose transport would be indicative of the changes in GLUT 4 expression reported above (Fig. 4). Thus, insulin-stimulated glucose transport would decrease in 10T1/2 cells treated with HgCl₂ and remain unchanged in 3T3-L1 cells that maintain levels of GLUT 4 expression. Insulin-mediated glucose uptake is a characteristic of adipocytes that is acquired during differentiation with the concomitant increase in expression of insulin-responsive transporter GLUT 4 (Resh, 1982). The effect of HgCl₂ on insulin-mediated uptake was measured in the 10T1/2 and 3T3-L1 adipocytes after differentiation in the presence and absence of HgCl₂ (Fig. 6). Basal glucose uptake increased dose-dependently in HgCl₂-treated 3T3-L1 adipocytes. In addition to the change in basal glucose uptake with HgCl₂, insulin-mediated glucose uptake decreased in cells treated with HgCl₂ during differentiation in a dose-dependent manner (Fig. 6). For example, insulin stimulated glucose uptake 3-fold in untreated 3T3-L1 adipocytes but only 1.3-fold in cells treated with 5 $\mu\text{M HgCl}_2$ during differentiation. In contrast, differentiated 10T1/2 cells were poorly insulin responsive (independent of treatments), although they did demonstrate an HgCl₂-induced increase in basal glucose uptake like 3T3-L1 adipocytes. HgCl₂ did not appear to have an effect on insulin-mediated glucose transport in 10T1/2 adipocytes; however, their poor insulin response may have precluded observing such an effect.

DISCUSSION

Adipogenesis is an intricate, well-controlled process that has been studied extensively *in vitro* and *in vivo*. However, microarray analysis reveals distinct transcriptional profiles of adipogenesis *in vivo* and *in vitro* (Soukas *et al.*, 2001). Differences in gene expression *in vivo* and *in vitro* emphasize the importance of studying multiple *in vitro* model systems, each of which may shed light on important aspects of *in vivo* differentiation. Therefore, we examined two cell models to address the hypothesis that HgCl₂ inhibits adipogenesis.

HgCl₂ dose-dependently inhibits adipogenesis in both 3T3-L1 and C3H10T1/2 cells (Fig. 1). The mechanism through which HgCl₂ inhibits adipocyte differentiation has yet to be defined; however, we present evidence that the disruption of transcription factor expression and insulin-signaling pathways may be involved. There are two phases of differentiation: commitment and maturation. Disruption of differentiation can occur during one or both of these phases. For example, previous studies showed that retinoic acid and TCDD decrease adipogenesis when present during the commitment phase but not when present during the maturation phase (Phillips *et al.*,

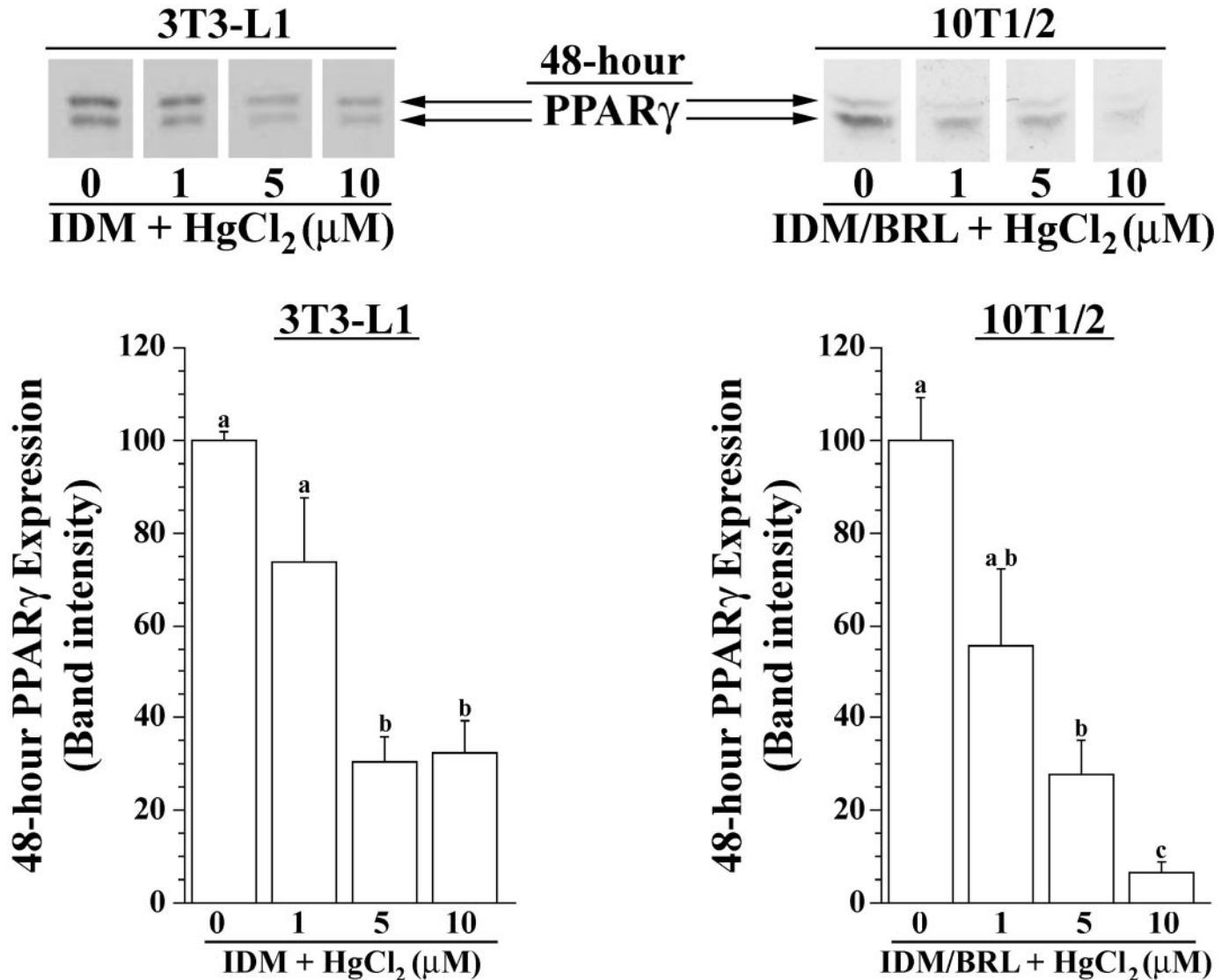


FIG. 3. The effect of HgCl₂ on PPAR γ expression in 3T3-L1 and 10T1/2 cells as shown by representative experiments where IDM or IDM/BRL was added to confluent 3T3-L1 or 10T1/2 cells, respectively. HgCl₂ was added concurrently at 1, 5, and 10 μ M and cell lysates were collected 48 h after treatment. Next, 80 μ g of total cell lysate protein was separated by SDS-PAGE and analyzed by immunoblotting with a monoclonal antibody for PPAR γ . Western blots from one representative experiment are shown from a set of triplicate independent cultures. PPAR γ expression levels were quantitated by image analysis. Results are normalized to IDM or IDM/BRL-stimulated levels (set to 100) and reported below blots. Data are presented as the mean \pm SE of the mean. Columns with different letters (abc) are significantly different from one another (ANOVA, $p < 0.05$).

1995; Xue *et al.*, 1996). Similarly we have demonstrated that while the timing of HgCl₂ exposure has different effects on adipocyte differentiation in the two cell lines (e.g., HgCl₂ is more effective during the commitment phase in 10T1/2), HgCl₂ inhibited adipogenesis when present in one or both phases of differentiation. Our data indicate that, while HgCl₂ treatment inhibits adipogenesis in both cell lines, different mechanisms are at work in the different cell lines and may explain differences of other end points between the two cell lines (e.g., GLUT 4 expression and insulin-mediated glucose transport).

Previous studies have shown that the inhibition of PPAR γ

expression inhibits differentiation (Gurnell *et al.*, 2000). Figure 3 shows that, at 48 h (peak PPAR γ expression), HgCl₂ dose-dependently reduced PPAR γ expression in both 3T3-L1 and 10T1/2 cells. However, decreased expression of PPAR γ during the commitment phase alone does not appear to be responsible for the actions of HgCl₂ because the addition of HgCl₂ after 48 h (after commitment phase) still reduced differentiation of both cell types.

Insulin is the only component of the differentiation cocktail that is present throughout adipocyte commitment and maturation. Since HgCl₂ inhibited adipocyte differentiation when added during either phase of differentiation, the interactions

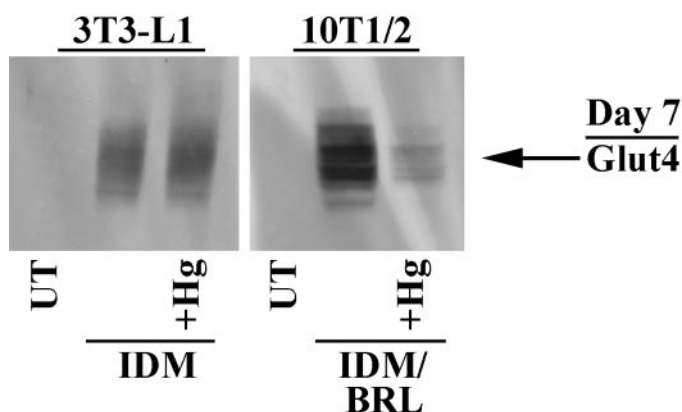


FIG. 4. The effect of HgCl_2 on GLUT 4 expression as shown by representative experiments where 3T3-L1 and 10T1/2 cells were differentiated in the presence and absence of $10 \mu\text{M}$ HgCl_2 . On day 7, cell lysates were collected as described in Materials and Methods. Then, $80 \mu\text{g}$ of total cell lysate was analyzed by immunoblotting with a polyclonal antibody that specifically recognizes GLUT 4.

with insulin responses were closely examined. Insulin activates kinases important for adipocyte differentiation and function including extracellular receptor kinase (ERK), which is phosphorylated in response to insulin and activated by metals such as zinc (Tang and Shay, 2000), vanadate, and arsenic (Wu *et al.*, 1999). The action of HgCl_2 on the ERK phosphorylation is not well documented. Figure 5 shows that ERK phosphorylation is associated with the initiation of differentiation in both cell lines. HgCl_2 , however, had no effect on ERK phosphorylation, suggesting that ERK is not a target of HgCl_2 in the inhibition of adipogenesis. While there is some controversy as to whether ERK activity is required for adipocyte differentiation (De Mora *et al.*, 1997; Qiu *et al.*, 2001), ERK activity is required for the environmental contaminant TCDD to inhibit adipocyte differentiation (Hanlon *et al.*, 2003).

SAPK family member c-Jun N-terminal kinase (JNK) regulates adipocyte differentiation and function of mature adipocytes (Camp *et al.*, 1999). Although it is not directly activated by insulin, it can contribute to the downregulation of the

insulin signal by serine phosphorylation of insulin receptor substrate 1 (IRS-1; Aguirre *et al.*, 2000). Serine phosphorylation of IRS-1 results in decreased phosphorylation of IRS-1 downstream targets, which has been linked to insulin resistance (Zick, 2001). In addition to JNK action on insulin-signaling pathways, active JNK also phosphorylates $\text{PPAR}\gamma$, thereby inhibiting its transcriptional activity (Camp *et al.*, 1999). Reduced activity would lead to decreased adipocyte differentiation and, while we observed a decrease in $\text{PPAR}\gamma$ expression, reduced activity may also contribute to the HgCl_2 -mediated inhibition of differentiation. HgCl_2 treatment has been shown to stimulate JNK activity in other cell systems including rabbit renal cortical slices (Turney *et al.*, 1999) and LLC-PK cells (Matsuoka *et al.*, 2000), although the physiological consequences of JNK phosphorylation in these cells were not examined. We report here that HgCl_2 treatment had no effect on JNK phosphorylation in 3T3-L1 cells. However, in 10T1/2 cells, HgCl_2 exposure led to a prolonged phosphorylation of JNK, which occurred independently of the presence of any hormones. If this prolonged JNK phosphorylation leads to serine phosphorylation of IRS-1 and subsequent inactivation, insulin signaling would be disrupted. Since insulin signaling is required for both the commitment to and maturation of adipocytes, downregulation of insulin signaling via JNK activation is a possible mechanism through which HgCl_2 inhibits adipogenesis.

In addition to the molecular data showing HgCl_2 disrupts signaling pathways used by insulin, we present physiological data that shows there is a decrease in insulin-mediated glucose transport in cells differentiated in the presence of HgCl_2 . Figure 6 shows that 3T3-L1 cells treated with HgCl_2 during differentiation reduced insulin-mediated glucose transport dose-dependently. This may be due to fewer adipocytes, reduced expression of the insulin-responsive glucose transporter, disruption of normal insulin-signaling pathways, or some combination of these events. The reduction in adipocyte number was about 50% for 3T3-L1 cells treated with $5 \mu\text{M}$ HgCl_2 (Fig. 1A). HgCl_2 treatment decreased insulin-mediated glucose uptake 2.8-fold (700 to 250 pmole/well for control and $5 \mu\text{M}$

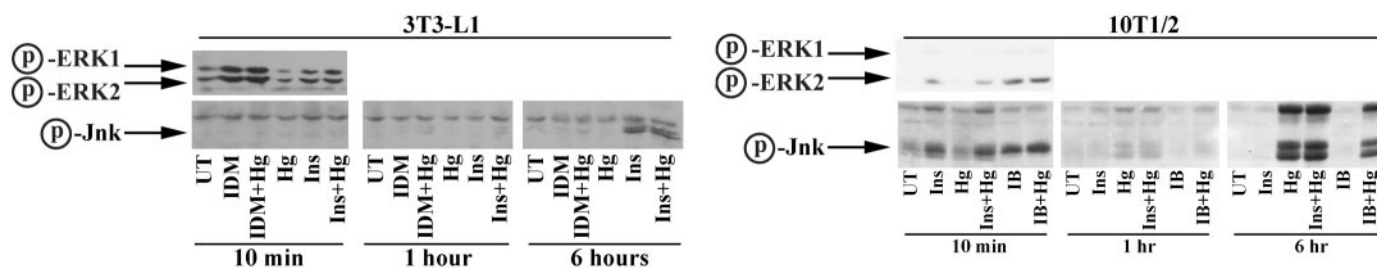


FIG. 5. The effect of HgCl_2 on JNK and ERK phosphorylation is shown. When 3T3-L1 and 10T1/2 cells reached confluence, they were induced to differentiate with IDM or IDM/BRL, respectively, as described in Materials and Methods. Next, $10 \mu\text{M}$ HgCl_2 was added concurrently with IDM or IDM/BRL; 10 min, 1 h, and 6 h after treatment, cells were harvested as described in Materials and Methods. Then, $80 \mu\text{g}$ of total cell lysate was analyzed by immunoblotting with polyclonal antibodies that specifically recognize the phosphorylated forms of JNK and ERK. UT, untreated; IDM or IB, normal differentiation cocktail; Ins, insulin.

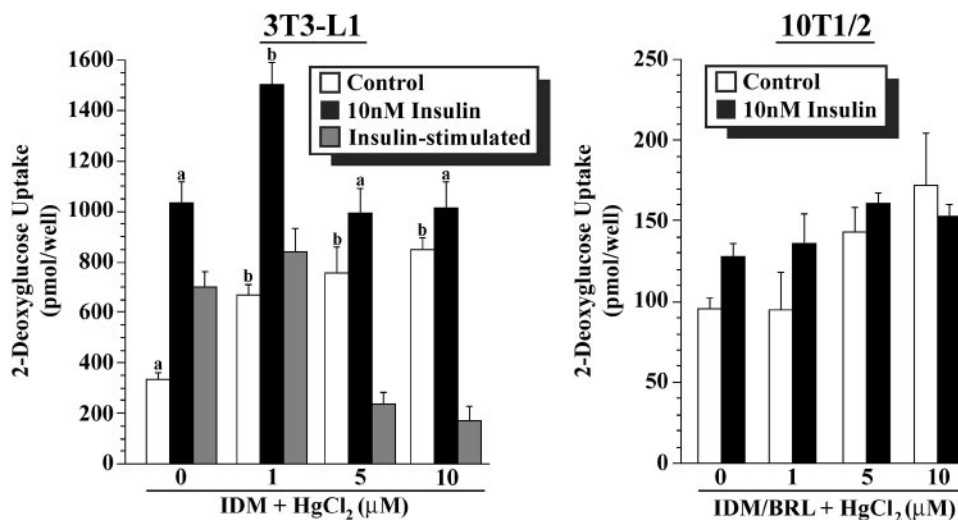


FIG. 6. The effect of HgCl₂ on basal and insulin-mediated uptake of ³H-deoxyglucose in 3T3-L1 and 10T1/2 cells is shown. Cells were incubated with the indicated concentrations of HgCl₂ during differentiation (days 0–7 and 0–2 for 3T3-L1 and 10T1/2 cells, respectively). Following differentiation, cells were serum starved for 2 h and the uptake of 50 μM ³H-2-deoxyglucose was measured in the presence and absence of an insulin stimulus (10 nM). Cells were washed twice with KRPH buffer and incubated in KRPH for 1 h. Deoxyglucose uptake was measured during the last 10 min of KRPH incubation. Data are presented as the mean value of four replicate wells with variability shown as standard error from the mean. Columns with different letters (abc) within a treatment are significantly different from one another (ANOVA, $p < 0.05$). Insulin-stimulated deoxyglucose uptake was calculated by subtracting deoxyglucose uptake in treated and untreated cells from their respective insulin-treated counterpart.

HgCl₂ respectively), suggesting adipocyte number alone would not account for the reduced insulin responsiveness. Although GLUT 4 expression decreased in HgCl₂-treated 10T1/2 cells, no difference was observed in 3T3-L1 cells; yet, HgCl₂-treated 3T3-L1 adipocytes exhibited insulin resistance. Insulin resistance, characterized as a decreased response of insulin-sensitive tissues to the hormonal stimulus, is a metabolic condition contributing to Type 2 diabetes. Insulin resistance can be induced by numerous factors including elevated levels of TNF- α and free fatty acids (Zick, 2001). Ryden and coworkers (2002) showed that, in the adipocyte, TNF- α induces insulin resistance, in part, through the activation of the MAPK pathway including rapid phosphorylation of JNK, suggesting that exposure to chemicals that induce phosphorylation of JNK may contribute to the onset of insulin resistance.

Insulin resistance is a condition that contributes to the onset of noninsulin-dependent diabetes mellitus (NIDDM or Type II diabetes; Zimmet *et al.*, 2001). Many conditions have been shown to induce insulin resistance in *in vitro* cell culture models including oxidative stress (Rudich *et al.*, 1997) and exposure to TNF- α (Engelman *et al.*, 2000). Additionally, exposure to two environmental toxins, arsenic and TCDD, has been linked to an increased incidence of insulin resistance in epidemiological studies (Lai *et al.*, 1994; Longnecker and Michalek, 2000). TCDD and arsenic have also been shown to inhibit adipogenesis in cell culture models (Hanlon *et al.*, 2003; Trouba *et al.*, 2000). The data presented in this report demonstrate that HgCl₂ inhibits adipogenesis in two models of adipocyte differentiation, raising the question of whether exposure to HgCl₂ contributes to the onset of insulin resistance. Epide-

miological studies of people living in methyl mercury–(MeHg-) contaminated areas indicate no correlation of exposure to MeHg and the onset of diabetes (Futatasuka *et al.*, 1996, 2000). However, comparisons between the action of MeHg and HgCl₂ forms of mercury with different chemical characteristics and metabolic actions, on glucose homeostasis and adipogenesis have not been examined. Previous research has demonstrated that the effects of MeHg and HgCl₂ differ in neuronal cell differentiation (Parran *et al.*, 2001) and in calcium regulation in T lymphocytes (Tan *et al.*, 1993). Further comparisons among different forms of mercury are necessary to determine their potential contribution to pathologies associated with glucose homeostasis.

Mercury exposure does not appear to be a contributing factor in the less common form of diabetes, insulin-dependent diabetes mellitus (IDDM). Exposure to HgCl₂ was shown to have no effect on the incidence of IDDM in diabetes-prone rats (Kosuda *et al.*, 1997). However, exposure to HgCl₂ delays the onset of IDDM in a nonobese diabetic mouse model of diabetes as measured by glucosuria (Brenden *et al.*, 2001). Thus, there are recognized effects of HgCl₂ on systems contributing to diabetes, although effects on the most prevalent form, NIDDM, remain unclear. HgCl₂ is a prevalent environmental toxicant that has been recognized to have serious impacts on human health (U.S. EPA, 1997); however, little research has been done on the effects of HgCl₂ on adipocyte function. This study provides evidence that environmental levels of HgCl₂ may be a contributing factor to the onset of insulin resistance and, potentially, Type II diabetes mellitus.

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