Original Article
GDF15 negatively regulates RGS16 to impair hepatic lipid metabolism in male mice offspring conceived by in vitro fertilization

Jingliu Liu1*, Yichen Zhu2*, Dan Zhu1, Yajun Shi1, Likui Lu1, Weisheng Li1, Lingjun Li1, Xiwen Zhou1, Pengjie Zhang1, Hao Yang1, Min Li3, Bin Wang1, Miao Sun1

1Institute for Fetology, The First Affiliated Hospital of Soochow University, Suzhou, Jiangsu, China; 2Cambridge-Suda Genomic Resource Center, Jiangsu Key Laboratory of Neuropsychiatric Diseases Research, Suzhou Medical College of Soochow University, Suzhou, Jiangsu, China; 3Department of Obstetrics and Gynecology, The First Affiliated Hospital of Soochow University, Suzhou, Jiangsu, China. *Equal contributors.

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Abstract: Objectives: We generated an in vitro fertilization and embryo transfer (IVF-ET) mouse model to investigate the molecular mechanism underlying the abnormal lipid metabolism found in IVF-ET offspring. Methods: The glucose metabolism levels of offspring were assessed by glucose tolerance test (GTT), insulin tolerance test (ITT), and pyruvate tolerance test (PTT). The lipid metabolism levels were assessed by triglycerides (TG), low-density lipoprotein cholesterol (LDL-C) and high-density lipoprotein cholesterol (HDL-C). RNA-seq was performed on liver tissues. mRNA and protein expression of relevant genes was verified by the quantitative real-time PCR and protein immunoblotting. HepG2 cells were transfected with either interfering RNA or overexpression plasmids to investigate the gene functions. Results: Compared to the control, male IVF-ET offspring showed: 1) higher body, liver, and epididymal white adipose tissue weight; 2) disrupted glucolipid metabolism with abnormal GTT, ITT, and PTT; 3) significantly decreased GDF15 along with increased RGS16. Furthermore, phosphorylation of ERK1/2 and AKT was significantly reduced. In HepG2 cells, knockdown of GDF15 caused an abnormally increased RGS16 and decreased phosphorylation of ERK1/2 and AKT, accompanied by increased lipid deposition. In contrast, overexpression of GDF15 reduced expression of RGS16. Simultaneous knockdown of both GDF15 and RGS16 reversed lipid deposition. Conclusions: Down-regulation of GDF15 results in elevated RGS16, which causes the weakening of the downstream ERK1/2 and AKT phosphorylation, leading to abnormal lipid metabolism in the livers of IVF-ET male offspring. This suggests that the GDF15-RGS16-p-ERK1/2/p-AKT pathway plays a crucial role in liver lipid deposition in IVF-ET male offspring and could be a therapeutic target.

Keywords: In vitro fertilization-embryo transfer, liver, lipid deposition, GDF15, RGS16

Introduction
Assisted reproductive technology (ART) refers to medical aids that enable infertile couples to conceive. It includes in vitro fertilization and embryo transfer (IVF-ET) and their derivatives [1]. In recent years, the incidence of infertility has increased, and about 17% of couples worldwide suffer from infertility [2]. In China, about 200 thousand IVF babies are born each year. Especially with the unveiled “three-child” policies, in order to resolve fertility problems, the demands for ART have increased dramatically. Consequently, the proportion of children born after IVF keeps rising. Theories of “gamete and embryo-fetal origins of adult diseases” suggest that adverse environmental exposures during gametogenesis, embryo implantation, and critical developmental stages from fetus to the infant will have an “imprinting” impact on the offspring’s growth and development, leading to greater risk of diseases such as hypertension, diabetes, kidney disease, and centripetal obesity in adulthood [3]. As one of the environmental exposures at early developmental stages, ARTs involve ovarian stimulation, in vitro fertilization or intracytoplasmic single sperm injection, and embryo culture, freezing, and transfer, all of which mean that the environment experienced by gametes...
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and embryos is significantly altered compared to natural pregnancy [4, 5].

Whether ARTs affect children’s health in the long term has been a topic of great interest since the first IVF baby was born in 1978 [6]. A follow-up study shows that IVF-ET-born children may have a higher risk of cardiometabolic disease [7]. Increased fasting blood glucose levels [8], blood pressure [8, 9], adiposity, triglyceride levels [10], and vascular dysfunction [9, 11, 12] were found in IVF children. Our recent studies reported that umbilical veins of IVF-ET offspring showed abnormal sensitivity to acetylcholine (ACh) or angiotensin II (AII)-mediated contraction, which could be caused by hypo/hypermethylation of the specific receptors [13, 14]. Our findings strongly supported the idea that IVF-ET could directly affect fetal vessel functions, which might result in cardiovascular disorders in the long term.

However, various causes of infertility and complicated genetic backgrounds in humans make the studies exploring the influence of ART itself on offspring health quite tricky. To eliminate those complicating factors, animal models were used to study the potential effects of IVF-ET on their offspring. Recent research with IVF-ET mouse models found impaired metabolism in IVF-ET offspring, such as altered fasting blood glucose levels, impaired glucose tolerance and pyruvate [15-19]; increased body weight, body fat, and higher triglyceride, cholesterol, and insulin levels [20]; decreased lipolysis and increased accumulation of lipids in adipose and liver tissues [19, 21]. These studies suggest that the IVF-ET technique is significantly associated with abnormal metabolic function in the offspring.

Abnormal glucose metabolism and its underlying mechanism have been widely investigated with ART offspring, while the altered lipid metabolism in IVF-ET offspring is seldom studied. Therefore, we generated a C57BL/6N mouse model by IVF-ET technology to study the liver function and lipid metabolism of IVF-ET-2 cell offspring and then explored the correlation between IVF-ET technology and the alteration of metabolic function of offspring and the specific mechanism.

Materials and methods

Animals

Procedures for the experiments on mice were approved by the Jiangsu Model Organisms Center’s Ethical Committee. C57BL/6N mice and ICR mice were kept in a chamber with alternating light and dark, constant temperature and humidity, and no specific pathogens throughout the experiment. Pregnant mice were housed in a single cage, and pups were sorted into separate cages four weeks after birth. Mice that need to be measured for food intake are housed in a single cage.

The design of the main experiment for this study was shown in Figure 1A. Mice from the IVF-ET group were obtained by transferring 2-cell stage embryos (C57BL/6N background) that developed in vitro into the oviducts of pseudopregnant ICR mice. Control group (CON) refers to animals conceived naturally. Newborn pups were weighed. Offspring were individually weighed from 4 to 28 weeks after weaning. Daily food intake was assessed with both groups.

In vitro fertilization

Superovulation was performed in 6-10-week-old female C57BL/6N mice by injection of 5 IU of pregnant horse serum gonadotropin (PMSG) and 5 IU of human chorionic gonadotropin (HCG, Ningbo Second Hormone Factory, China). Oocytes and capacitated sperm were co-cultured in human oviductal fluid medium (HTF, Sigma, USA) in a 5% CO<sub>2</sub> and 5% O<sub>2</sub> incubator (Heal Force, Shanghai, China) at 37°C. After 15 h, 2-cell embryos were washed with Potassium simplex optimized medium (KSOM, Sigma, USA) three times, followed by embryo transfer.

Embryo transfer

6-8-week-old female ICR mice were used as recipient mice which were mated with male ICR mice with vasectomized vas deferens. The day when the plugs were observed was considered to be embryonic day 0.5 (E0.5) of the pseudopregnancy. Mice were anesthetized with tribromoethanol and fresh 2-cell embryos were transferred by surgery into the oviducts of pseudopregnant ICR females. All female mice that received embryos were fed standard chow and water.
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Figure 1. Experimental design, birth weights, growth charts, and food intake of offspring. (A) Experimental design (Created with Biorender.com). (B) Birthweights of male offspring (CON: n=44; IVF-ET: n=42). (C) Male offspring growth curve after weaning (CON: n=10; IVF-ET: n=10). (D) Food intake in male offspring (CON: n=10; IVF-ET: n=10). (E) Birthweights of female offspring (CON: n=43; IVF-ET: n=43). (F) Female offspring growth curve after weaning (CON: n=10; IVF-ET: n=10). (G) Food intake in female offspring (CON: n=10; IVF-ET: n=10). Data are expressed as mean ± SEM. Symbols under curves: ♂, male; ♀, female; **, P < 0.01; ****, P < 0.0001; ns, not significant. Significance was determined by 2-tailed unpaired t-test in (B, D, E, and G), and 2-way ANOVA in (C and F).

Glucose, insulin, and pyruvate tolerance test

At 20-24 weeks, mice were treated with intraperitoneal injection of glucose (2 g/kg) or pyruvate solution (2 g/kg) after 14-16 hours of fasting and challenged with intraperitoneal injection of insulin (1 IU/kg) after 2 hours of fasting. Blood was taken from the tail tip. Glucose lev-
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Lipid values

After 4 hours of fasting, blood was collected from the posterior orbits of anesthetized mice to extract serum and stored at -80°C. Liver lipids were isolated from liver tissue. Triglycerides (TG), low-density lipoprotein cholesterol (LDL-C) and high-density lipoprotein cholesterol (HDL-C) were measured all measured with a biochemical analyzer (BMG, Germany).

Histologic analysis

Liver tissues were obtained from mice at 20 weeks old after a 4-hour fast. Tissues were either fixed in 4% paraformaldehyde for hematoxylin-eosin (H&E) staining and oil red staining or frozen in liquid nitrogen for future use. All sections were visualized by microscopy (Olympus, Japan).

RNA-sequencing (RNA-seq)

Total RNA was isolated from livers using TRIzol (Invitrogen, USA). RNA sequencing was performed with the liver samples from 20-week-old male offspring. Sequencing was performed on Azenta Biotechnology's Illumina system (Soochow, China). Differentially expressed genes (DEGs) were identified by |foldchange| > 1 and P values < 0.05. Volcano map, heat map and Gene set enrichment analysis (GSEA) were performed. Images are plotted on the omicstudio Biology (website: https://www.omicstudio.cn/index). The genes enriched in GSEA were considered significant when P < 0.05 and |NES| > 1.

Quantitative real-time PCR (qRT-PCR)

Total RNA was extracted using TRIzol (Invitrogen, USA) and synthesized cDNA with a reverse transcription kit (Thermo Scientific, USA). The TB green (TaKaRa, USA) was used for RT-qPCR. Real-time PCR was performed on Bio-Rad CFX96 RT-qPCR machine. RNA concentration and quality were analyzed using NanoDrop-2000. Gene expression was normalized to 18S or β-Actin. See Supplementary Table 1 for primers.

Western blotting

Total proteins from cells and liver tissue were extracted in RIPA buffer (P0013B, Beyotime, China). After separation by gel electrophoresis, the proteins were transferred to a nitrocellulose filter membrane. See Supplementary Table 2 for antibodies. The signals were visualized with an enhanced Chemiluminescent (NCM Biotech, China) and quantified with ImageJ.

Cell culture and transfection

HepG2 cells were purchased from ATCC and were cultured in medium containing 10% fetal bovine serum (HyClone, Logan, USA) and 1% antibiotics (HyClone, Logan, USA). Transfection was performed using 150 pmol of si-NC, si-GDF15, si-RGS16 (Gene Pharma, Shanghai, China) or 2 μg pcDNA-empty, pcDNA-GDF15. GT-Transfect-Mate reagent (Gene Pharma, Shanghai, China) in Opti-MEM (Thermo Fisher Scientific, USA) was used. See Supplementary Table 3 for siRNA information. The forward oligonucleotide sequence of the pcDNA-GDF15 vector is TAATACGACTCACTATAGGGCCACCATGCCGGGCAAGAACTCAG; and the reverse oligonucleotide is TCTGAGATGAGTTTTTGTTCTATGCTGTGGGCAAGAACTCAG.

Oil red staining of HepG2 cells

Lipid droplets were quantified by oil red O (ORO) staining (Solarbio, Beijing, China). After transfection for 48 h, the cells were fixed in 4% paraformaldehyde and then were stained with ORO solution, the red stained lipid droplets were visualized by microscopy. TG content in HepG2 cells was measured with the Triglyceride Quantification Kit (Jiancheng, Nanjing, China).

Statistical analysis

All data are shown as mean ± SEM. Statistical analyses were performed using GraphPad Prism 9.0 with a t-test or two-way analysis of variance (ANOVA). P-values < 0.05 were considered significant.

Results

Distinct body weight trajectories in offspring

The number of litters was similar in both groups (CON: 161, IVF-ET: 133), and the sex ratio (female/male) was 1.1 (84:77) in the CON group and 1.0 (67:66) in the IVF group (Table 1). The birth weights of both male and female offspring in the IVF-ET group were higher than those in the CON group on postnatal day 1 (Figure 1B, 1E). There was no significant differ-
Pregnancy rate

Figure 2B

Similarly, significant increases in Figure 2A Pups (n) – Supplementary Figure, Litter (n) 80 (20/25) 100 (133/133) 1.0 (67/66) 6.4±0.4 Litter Size (n). ITT results showed higher blood 32.2 (133/412) ), suggesting slight insulin – Figure 3G-I Implantation rate (%). However, in the Figure 2C – 25 161 6.4±0.4 1.1 (84/77) 100 (161/161) Survival Rate (%). In combination with body weight data and metabolism phenotypes, IVF-ET male offspring had more severe glucose metabolism impairment than female offspring. Therefore, male offspring were chosen as the main subjects in this study. We measured the weight of organs relevant to metabolism, such as the liver, brain, spleen, heart, kidney, subcutaneous white adipose tissue (sWAT), epididymal white adipose tissue (eWAT), and interscapular brown adipose tissue (iBAT) and calculated organ weight/body weight ratios. Both liver and eWAT weight were found to be increased, while only the ratio of epididymal fat weight/body weight, but not liver, was significantly increased (Figure 3B, 3C). The liver is a crucial organ in the regulation of glucose and lipid metabolism [22, 23]. H&E staining of the liver showed that the IVF-ET male offspring had extensive steatosis, ballooning degeneration, and a scattered infiltration of a small number of inflammatory cells in the hepatocytes compared to controls (Figure 3A). ORO staining showed significant lipid deposition in IVF-ET male offspring liver tissue (Figure 3A). Lipid metabolism analysis using plasma and liver tissue showed significantly increased plasma triglycerides and LDL-C and decreased HDL-C in the IVF-ET male offspring (Figure 3D-F). Similarly, significant increases in triglycerides and LDL-C, and decreases in HDL-C were found in the liver tissue of IVF-ET male offspring (Figure 3G-I). However, in the liver tissue and serum of female mice offspring, a slight increase in TG (Supplementary Figure 1A, 1D) and no significant differences in LDL-C and HDL-C (Supplementary Figure 1B, 1C, 1E, 1F) were found in the IVF-ET group compared to CON. It can be inferred that the offspring of IVF-ET males have abnormal lipid metabolism.

Abnormal glucose metabolism in IVF-ET offspring

We then performed the GTT, ITT, and PTT in male and female offspring of the IVF-ET and CON groups. For the male offspring, the area under the curve (AUC) of GTT, ITT, and PTT was increased in the IVF-ET group (Figure 2A, 2C). Glucose homeostasis was disturbed in the IVF-ET group at 15, 30, and 90 minutes after glucose injection compared to the CON group (Figure 2A). ITT results showed higher blood glucose in the IVF-ET group at 0, 15, 30, and 60 minutes, indicating decreased insulin sensitivity (Figure 2B). Despite slight differences in fasting blood glucose, no remarkable difference in blood glucose levels in the two groups after pyruvate injection (Figure 2C). However, for the female offspring, there were no significant differences in fasting glucose, GTT and PTT tests between the two groups, as was the area under their curves (Figure 2D, 2F), and the ITT test showed differences in blood glucose at 0 and 15 minutes after insulin injection and a higher AUC in the IVF-ET group than in the CON group (Figure 2E), suggesting slight insulin resistance.

Abnormal lipid metabolism in IVF-ET male offspring

In combination with body weight data and metabolism phenotypes, IVF-ET male offspring were chosen as the main subjects in this study. We measured the weight of organs relevant to metabolism, such as the liver, brain, spleen, heart, kidney, subcutaneous white adipose tissue (sWAT), epididymal white adipose tissue (eWAT), and interscapular brown adipose tissue (iBAT) and calculated organ weight/body weight ratios. Both liver and eWAT weight were found to be increased, while only the ratio of epididymal fat weight/body weight, but not liver, was significantly increased (Figure 3B, 3C). The liver is a crucial organ in the regulation of glucose and lipid metabolism [22, 23]. H&E staining of the liver showed that the IVF-ET male offspring had extensive steatosis, ballooning degeneration, and a scattered infiltration of a small number of inflammatory cells in the hepatocytes compared to controls (Figure 3A). ORO staining showed significant lipid deposition in IVF-ET male offspring liver tissue (Figure 3A). Lipid metabolism analysis using plasma and liver tissue showed significantly increased plasma triglycerides and LDL-C and decreased HDL-C in the IVF-ET male offspring (Figure 3D-F). Similarly, significant increases in triglycerides and LDL-C, and decreases in HDL-C were found in the liver tissue of IVF-ET male offspring (Figure 3G-I). However, in the liver tissue and serum of female mice offspring, a slight increase in TG (Supplementary Figure 1A, 1D) and no significant differences in LDL-C and HDL-C (Supplementary Figure 1B, 1C, 1E, 1F) were found in the IVF-ET group compared to CON. It can be inferred that the offspring of IVF-ET males have abnormal lipid metabolism.

Altered liver transcriptome in IVF-ET male offspring

RNA sequencing of livers from both groups was performed to explore potential mechanisms of lipid metabolism in male offspring conceived through IVF-ET. 59 genes were upregulated, and 76 genes were downregulated in the IVF-
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Figure 2. GTT, ITT, and PTT in offspring. A. Glucose tolerance test and AUC in male offspring (CON: n=10; IVF-ET: n=7). B. Insulin tolerance test and AUC in male offspring (CON: n=9; IVF-ET: n=7). C. Pyruvate tolerance test and AUC in male offspring (CON: n=9; IVF-ET: n=7). D. Glucose tolerance test and AUC in female offspring (CON: n=7; IVF-ET: n=7). E. Insulin tolerance test and AUC in female offspring (CON: n=8; IVF-ET: n=8). F. Pyruvate tolerance test and AUC in female offspring (CON: n=8; IVF-ET: n=8). For bar graphs, data represent mean ± SEM. ♂, male; ♀, female; *, P < 0.05; **, P < 0.01; ***, P < 0.001; ns, not significant. Relative to controls, by ANOVA.

Figure 3. Analysis of liver and lipid metabolism factors in male offspring. A. H&E staining and oil-red O staining of liver tissue (scale bar = 100 μm). B. Weight of multiple organs of male offspring (CON: n=12; IVF-ET: n=11). C. The proportion of each organ to body weight (CON: n=12; IVF-ET: n=11). D-F. Plasma levels of triglycerides, LDL-C, HDL-C (CON: n=10; IVF-ET: n=11). G-I. Triglycerides, LDL-C, HDL-C levels in liver tissue (CON: n=8; IVF-ET: n=10). TG, Triacylglycerol; HDL-C, High-Density Lipoprotein Cholesterol; LDL-C, Low-Density Lipoprotein Cholesterol. Data represent mean ± SEM. *, P < 0.05; **, P < 0.01; ***, P < 0.001; ****, P < 0.0001; ns, not significant.

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ET group compared to the CON group (Figure 4A). A heat map of metabolism-related genes was generated (Figure 4B). By analyzing the GSEA it was found that many genes involved in
the initial fatty acid synthesis process were significantly upregulated in the GO and KEGG enrichment pathways in the IVF-ET group compared to the CON group (Figure 4C, 4D). We verified the sequencing results by RT-qPCR and confirmed the upregulation of many genes related to lipid synthesis, such as Pparg, Srebf1, Dgat2, Cebp, and Fabp2 (Figure 4E). No significant changes were observed for several genes related to fatty acid oxidation, such as Ppara, Pgc1a, and Acox1 (Figure 4F). Liver transcriptome data has suggested that abnormal liver lipid metabolism in IVF-ET male offspring mice may be primarily related to the lipid synthesis pathway.

**Decreased GDF15 and increased RGS16 were found in the liver of IVF-ET offspring**

Gdf15 performs a vital role in obesity and metabolic diseases [24, 25]. Rgs16 was known to regulate fatty acid oxidation in hepatocytes [26]. Both of which are implicated in hepatic lipid metabolism. In RNA-sequencing results, more than 2-fold changes were found with both Gdf15 and Rgs16 in the IVF-ET group as compared to the CON group (Figure 4A, 4B). Validation of the expression of these two genes in mouse liver tissue by q-PCR revealed reduced Gdf15 (Figure 5A) and increased Rgs16 (Figure 5B), which is consistent with the results of the RNA-Seq data. Western blotting results confirmed decreased GDF15 and increased RGS16 protein expression in the livers of IVF-ET offspring (Figure 5C).

**Increased phosphorylation of AKT and ERK1/2 in the livers of IVF-ET offspring**

It is known that GDF15 can activate the downstream AKT and ERK1/2 pathways, which contribute to the regulation of hepatic mitochondrial function and energy metabolism. Therefore, we continued to check if the downstream of GDF15 had been affected. We verified the expression of ERK1/2, AKT, p-ERK1/2, and p-AKT levels in the liver of IVF-ET male offspring by western blot and found that the expression of p-ERK1/2 and p-AKT was reduced in the liver of IVF-ET male offspring mice (Figure 5D). This suggests that the impaired lipid metabolism in the IVF-ET group may be due to abnormalities in the ERK1/2 and AKT pathways.

**GDF15 negatively regulated RGS16 in lipid deposition in hepatocytes**

To investigate the relationship between GDF15, RGS16, and liver lipid metabolism, we performed RNA interference to knock down GDF15 expression in HepG2 cells in vitro. Interestingly, we found that knockdown of GDF15 was followed by an increase in the expression of RGS16 (Figure 6A, 6B). De novo lipid synthesis genes such as PPARG, SREBF1, FABP2, CEBPB, and FABP2 were increased (Figure 6D), while fatty acid oxidation genes such as Ppara, Pgc1a, Acox1 showed no significance (Figure 6E). Phosphorylation of ERK1/2 and AKT levels were significantly decreased (Figure 6C). Furthermore, we overexpressed GDF15 by transfecting HepG2 cells with GDF15 containing pcDNA3.1-myc-His plasmids. Interestingly, we found that overexpression of GDF15 was followed by a significant decrease in RGS16 mRNA and protein expression (Figure 7A, 7B). The expression of lipogenic genes SREBF1 and FABP2 was decreased (Figure 7D), while the expression of fatty acid oxidation genes PPAR and ACOX1 was increased (Figure 7E). Phosphorylation of ERK1/2 and AKT were significantly increased (Figure 7C). Our findings indicated that a negative regulatory relationship between GDF15 and RGS16 may cause changes in lipogenic and fatty acid oxidation genes by affecting the phosphorylation of ERK1/2 and AKT, leading to increased lipid deposition.

**Knockdown of RGS16 reverses GDF15 down-regulation-induced lipid deposition**

Since decreased GDF15 results in abnormal lipid metabolism and increased expression of RGS16, we asked whether reducing RGS16 could rescue the phenotypes caused by GDF15 down-regulation.

By RGS16 RNAi in HepG2 cells (Supplementary Figure 2A, 2B), we found that reduced expression of lipogenic genes PPARG, SREBF1, and FABP2 mRNA (Supplementary Figure 2D), increased expression of fatty acid oxidation gene PGCLA (Supplementary Figure 2E) and increased phosphorylation of ERK1/2 and AKT (Supplementary Figure 2C), suggesting that a reduction in RGS16 may increase fatty acid oxidation and...
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Figure 4. Transcriptome analysis in livers of IVF-ET male offspring. A. Volcano plots show significantly altered genes. Rgs16 and Gdf15 are highlighted; B. Heat map of differential genes associated with lipid metabolism; C. Enrichment map of genes involved in pathways related to fatty acid metabolism; D. Enrichment map of genes involved in pathways related to unsaturated fatty acid metabolism. E. mRNA levels of genes related to the fatty acid synthesis pathway in liver tissue; F. mRNA levels of genes related to the fatty acid oxidation pathway in liver tissue. GSEA, Gene Set Enrichment Analysis; NES, Normalized Enrichment Score; GO, Gene Ontology; BP, Biological Process; KEGG, Kyoto Encyclopedia Of Genes And Genomes. For bar graphs, data represent mean ± SEM. *, P < 0.05; ***, P < 0.001; ****, P < 0.0001; ns, not significant.

We then knocked down of GDF15 and RGS16 expression simultaneously to see if this could inhibit initial lipid synthesis, resulting in reduced lipid deposition in hepatocytes.
reverse the abnormal lipid deposition caused by GDF15 downregulation in hepatocytes. Oil Red O staining showed that knockdown of RGS16 reversed the abnormal lipid deposition (Figure 8A), mRNA expression of lipogenic and fatty acid oxidation genes (Figure 8C, 8D), and phosphorylation of ERK1/2 and AKT caused by GDF15 knockdown in HepG2 cell line (Figure 8B). These results suggested that the knockdown of RGS16 in HepG2 cells reversed the abnormal lipid deposition induced by GDF15 knockdown.

Discussion
The development of the embryo and fetus are susceptible to environmental factors, and any sub-optimal conditions during the development stages of the gametes, embryos, and fetus can affect the health of the offspring after birth, which is known as the “Gamete and embryofetal origin of disease” theory [27]. A vast body of evidence suggests that children conceived by IVF-ET may be at increased risk of chronic diseases [8, 10]. In this study, increased body
weight, abnormal glucose metabolism and lipid metabolism, particularly abnormal liver lipid deposition, were observed in IVF-ET male mice offspring.

Sex-specific phenotypes, such as male offspring exhibiting more severely impaired glucose metabolism, insulin resistance, abnormal pyruvate tolerance, and earlier weight gain than females, were found in our study. This finding indicates that there may be metabolic gender differences in offspring caused by IVF-ET techniques. To date, various metabolic phenotypes of IVF-ET offspring have been reported. Lower birth weight [28] and catch-up growth [15, 29], normal birth weight [17], and higher body weight were observed with IVF-ET offspring. IVF-ET offspring could be more susceptible to impaired glucose metabolism, insulin resistance, and abnormal pyruvate tolerance.

Figure 6. Relationship of GDF15 with lipid metabolism and RGS16. A. GDF15 and RGS16 mRNA expression levels after GDF15 knockout (si-NC: n=3; si-GDF15: n=3); B. Protein levels of GDF15 and RGS16 after GDF15 knockdown (si-NC: n=3-6; si-GDF15: n=3-6); C. Protein levels of AKT, ERK1/2, p-ERK1/2, p-AKT after GDF15 knockdown (si-NC: n=3-6; si-GDF15: n=3-6); D. mRNA expression levels of lipogenic genes after GDF15 knockdown (si-NC: n=3; si-GDF15: n=3); E. mRNA expression levels of fatty acid oxidation genes after GDF15 knockdown (si-NC: n=3; si-GDF15: n=3). HepG2: Human hepatocellular carcinoma cell line; si-GDF15: interfering RNA; si-NC: negative control for interfering RNA. For bar graphs, data represent mean ± SEM. *, P < 0.05; **, P < 0.01; ****, P < 0.0001; ns, not significant.
after receiving a high-fat diet [20]. Severe glucose metabolism dysfunction sometimes occurs only in female offspring and sometimes only in male offspring [15, 16, 18, 29]. The underlying mechanisms of sex-related differences in IVF-ET offspring remain to be fully determined. We presumed that the sex-specific phenotypes might be caused by different mouse strains, culture media, and breeding conditions [17]. In addition, estrogen has a protective effect on glucose metabolism and lipid metabolism [30]. In vitro manipulation may also affect susceptibility to long-term metabolic disease by affecting genomic imprinting [31], and whether it has gender-specific effects remains to be determined in future studies.

Moreover, we found increased body fat and liver weight, abnormal liver steatosis and lipid deposition, higher TG/LDL-C, and lower HDL-C in the male IVF-ET offspring at 20 weeks. These findings suggest abnormal lipid metabolism in
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IVF-ET male mice. It is well-known that hepatic lipid metabolism plays a key role with essential functions in the de novo synthesis of fatty acids and ketogenesis [32]. Therefore, we sequenced the liver transcriptome and carried out an in-depth study of the possible mecha-
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nisms underlying the abnormalities in lipid metabolism. GO, and KEGG enrichment analysis results revealed an upregulated transcriptional status of genes involved in the primary synthesis of hepatic lipids in the livers of IVF-ET mice compared to CON mice. This suggests that the mechanism of increased hepatic lipid deposition in IVF-ET male offspring may be related to abnormal lipid synthesis. Insulin resistance, hyperglycemia, hypertriglyceridemia, and abnormal fatty deposits in the liver are the main features of Non-alcoholic fatty liver disease (NAFLD). Therefore, we speculate that male mice born via IVF-ET might be susceptible to metabolic disorders relative to NAFLD.

It has been shown that increased phosphorylation of the insulin receptors AKT and ERK1/2 contributes to the regulation of hepatic energy metabolism [33-36]. Growth differentiation factor 15 (GDF15), a member of the transforming growth factor-β superfamily, is abundantly expressed in placental trophoblast cells during gestation and is synthesized and secreted mainly in the liver, where it is involved in various biological processes including energy balance, body weight regulation, and cachexia due to cancer and chronic diseases [37, 38]. It can promote fatty acid oxidation and inhibit lipid de novo synthesis in hepatocytes by binding to the GFRAL-RET receptor on the surface of target cells, leading to activation of the downstream AKT and ERK1/2 pathways [39]. Some studies showed that decreased GDF15 in the physiological range can cause increased body weight and fat levels in mice [40]. G protein signaling regulator 16 (RGS16) is expressed in tissues such as the heart, liver, blood-forming cells and brain [41, 42]. High expression of RGS16 leads to hepatic steatosis, reduced blood glucose and β-ketone levels, and decreased gene expression for fatty acid oxidation in the liver; In contrast, Rgs16 KO mice exhibited the opposite phenotype as increased expression of lipogenic genes in the liver and increased hepatic fatty acid oxidation rates [26, 43]. In IVF-ET mice, we found downregulation of GDF15, p-ERK1/2, p-AKT, and increased RGS16 and other lipogenic genes in the livers of IVF-ET male offspring. We, therefore, deduced that abnormal lipid metabolism in IVF-ET male offspring might be associated with an abnormal GDF15-RGS16-p-ERK1/2/p-AKT pathway. Combining the known opposite functions reported with GDF15/RGS16 and the opposite expression found in our studies, we presumed that there might be a negative relationship between these two genes. However, no studies have shown an association between GDF15 and RGS16 to date.

In vitro in HepG2 cells, knockdown of GDF15 resulted in abnormal upregulated expression of RGS16, inhibition of the phosphorylation of ERK1/2 and AKT, elevated expression of lipogenic genes, decreased expression of fatty acid oxidation genes, and increased cellular lipid deposition. Overexpression of GDF15 reduced the expression of RGS16, and subsequently increased the phosphorylation of ERK1/2 and AKT, reduced the expression of lipogenic genes, and increased the expression of fatty acid oxidation genes. These findings suggest that there may be a negative regulation between GDF15 and RGS16. Therefore, we speculate that RGS16 downregulated by GDF15 could be a possible mechanism for the abnormal lipid metabolism phenotype in IVF-ET male mice and may be an effective way to improve the metabolic abnormalities in IVF-ET offspring. Nevertheless, this is an in vitro cell experiment and might not fully explain the lipid metabolism pathway of IVF-ET offspring.

However, the factors resulting in reduced hepatic GDF15 expression in IVF-ET offspring remain to be investigated, and epigenetic changes or intergenerational inheritance may be a valid explanation [44, 45]. When genome-wide epigenetic reprogramming occurs, the fertilization and pre-implantation stages are critical periods of development. Manipulations during in vitro culture of fertilized eggs may lead to oxidative stress in fertilized egg cells, affecting cell division [46]. ROS produced by oxidative stress has been shown to regulate epigenetic processes, such as DNA methylation and histone acetylation [47]. The abnormal epigenetic modifications may also be associated with direct, intergenerational, and transgenerational effects in offspring [48].

In summary, the IVF-ET model in this study eliminates the genetic diversity and complex environmental factors in humans and can be used to demonstrate that IVF-ET could have long-term effects on growth and glucolipid metabolism in offspring. Inhibiting RGS16 expression
can reverse the abnormal lipid metabolism caused by GDF15 down-regulation, which may be an effective way to alleviate abnormal lipid metabolism in male IVF-ET offspring. However, our findings could not directly represent humans owing to the complex genetic background, the hormonal environment in the body and the use of various drugs in humans. Still, it would provide valuable information for prevention and clinical decision-making.

Conclusion

Male mice born by IVF-ET exhibit a higher risk of glucolipid metabolism manifested as increased body weight, abnormal GTT, ITT, PTT, and abnormal liver lipid deposition. GDF15-RGS16-p-ERK1/2/p-AKT may be the underlying mechanism for lipid metabolism. Realizing the health problems of ART offspring in the long term will help improve the IVF-ET technique to reduce unnecessary adverse effects. This is only one step in that direction and further work is still required.

Acknowledgements

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Disclosure of conflict of interest

None.

Address correspondence to: Miao Sun and Bin Wang, Institute for Fetology, The First Affiliated Hospital of Soochow University, Suzhou 215006, Jiangsu, China. E-mail: miaosunsuda@163.com (MS); binwang2233@suda.edu.cn (BW); Min Li, Department of Obstetrics and Gynecology, The First Affiliated Hospital of Soochow University, Suzhou 215006, Jiangsu, China. E-mail: miaoshou181@sina.com

References

Impact of IVF-ET technology on hepatic lipid metabolism of offspring


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### Supplementary Table 1. Primers used for RT-qPCR

<table>
<thead>
<tr>
<th>Primer</th>
<th>Forward primer (5’-3’)</th>
<th>Reverse primer (5’-3’)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mouse <em>Gdf15</em> NM_011819</td>
<td>CTGGCAATGCGCTGAACACG</td>
<td>GGTCGGGACTTGGTTCTGAG</td>
</tr>
<tr>
<td>Mouse <em>Rgs16</em> NM_011267</td>
<td>GACGCAGCTGGGAATCTTT</td>
<td>GGCCCCACTCAGATTTGCTAAT</td>
</tr>
<tr>
<td>Mouse <em>Pparg</em> NM_011146</td>
<td>GGAAGACCACCTCGCATTCTT</td>
<td>GTAATCAGCAAACATTGGGTC</td>
</tr>
<tr>
<td>Mouse <em>Srebf1</em> NM_011480</td>
<td>TGACCGGCTATTCGGTGA</td>
<td>CTGGGCTGAGCAATACAGTTC</td>
</tr>
<tr>
<td>Mouse <em>Dgat2</em> NM_026384</td>
<td>GCGCTACTTCCGAGACTACTT</td>
<td>GGGCCCTATGCCAGAACT</td>
</tr>
<tr>
<td>Mouse <em>Cebpβ</em> NM_001287738</td>
<td>ACACGTGTAACGTACGCCG</td>
<td>GCTCGAAACGGAAAAGGTC</td>
</tr>
<tr>
<td>Mouse <em>Fabp2</em> NM_007980</td>
<td>GTGGAAATGAGCCGGAACAG</td>
<td>CCATCTGTGTGATTTGCTAAG</td>
</tr>
<tr>
<td>Mouse <em>Ppara</em> NM_011144</td>
<td>AAGTGGACTGATAATGAGTGTG</td>
<td>CGGAATAGTTCGCCAAAGAAG</td>
</tr>
<tr>
<td>Mouse <em>Pgc1a</em> NM_008904</td>
<td>TATGGAGTGACATAGTGCTTCT</td>
<td>GTCGCTACACACATTCAATCC</td>
</tr>
<tr>
<td>Mouse <em>Acox1</em> NM_015729</td>
<td>TAACTTCTCCTACGAGGCA</td>
<td>AGTTCCATGAAACCATCTCAGT</td>
</tr>
<tr>
<td>Mouse 18S NM_003278</td>
<td>CTCAACACGGGAAAACCTCAC</td>
<td>CGCTCCACCAACTAAGAAG</td>
</tr>
<tr>
<td>Human <em>GDF15</em> NM_001330615</td>
<td>GACCCTCAGAGTTGCACTCC</td>
<td>GCCTGGTTAGCAGGTCCTC</td>
</tr>
<tr>
<td>Human <em>RGS16</em> NM_002928</td>
<td>AAGAAGATCCGATCAGCTACCA</td>
<td>GCTGACCTCTTTAGGGGCTC</td>
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<tr>
<td>Human <em>PPARG</em> NM_001330615</td>
<td>AGCCTCGCAAGCCTTTGAGTG</td>
<td>GGCTTCACATTCAGCAACCTG</td>
</tr>
<tr>
<td>Human <em>SREBF1</em> NM_004176</td>
<td>AAGTGGACTGATAATGAGTGTG</td>
<td>CGGAATAGTTCGCCAAAGAAG</td>
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<tr>
<td>Human <em>DGAT2</em> NM_004176</td>
<td>AAGTGGACTGATAATGAGTGTG</td>
<td>CGGAATAGTTCGCCAAAGAAG</td>
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<tr>
<td>Human <em>CEBPB</em> NM_002928</td>
<td>GACTTCAAGCGGTACCTGAGG</td>
<td>CCCGTAGTCGTCGAGAACAG</td>
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<tr>
<td>Human <em>FABP2</em> NM_000134</td>
<td>ATGGGCGTTTGACGACATTTG</td>
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<td>Human <em>PPARA</em> NM_005036</td>
<td>ATGGTGGAACCGGGAAGCC</td>
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<td>Human <em>PGC1a</em> NM_013261</td>
<td>TCTAGTCCCTGATAGTGACAT</td>
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<tr>
<td>Human <em>ACOX1</em> NM_004035</td>
<td>ACGTCGACAGCGTTATG</td>
<td>AGGTCAGCAGTGCCAAAC</td>
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<tr>
<td>Human <em>β-Actin</em> NM_013261</td>
<td>CATTCAGTTGCTATCCAGGC</td>
<td>CTCTTAATGTCACGACAG</td>
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Sequences are shown in the 5’ to 3’ direction.
Supplementary Table 2. Antibodies for western blotting

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<th>Company</th>
<th>Cat. No.</th>
<th>Dilution</th>
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<td>β-actin</td>
<td>Proteintech</td>
<td>2D4H5</td>
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<tr>
<td>α-Actinin</td>
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<td>p-ERK1/2</td>
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<tr>
<td>ERK1/2</td>
<td>Cell Signaling Technology</td>
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<td>p-AKT (Ser473)</td>
<td>Cell Signaling Technology</td>
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<td>1:1000</td>
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<tr>
<td>AKT</td>
<td>Cell Signaling Technology</td>
<td>#4691</td>
<td>1:1000</td>
</tr>
<tr>
<td>GDF15</td>
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<tr>
<td>RGS16</td>
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<td>ab119424</td>
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</table>

Secondary antibody

<table>
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<tr>
<th>Secondary antibody</th>
<th>Company</th>
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<tbody>
<tr>
<td>HRP-conjugated Affinipure Goat Anti-Mouse IgG (H+L)</td>
<td>Multi Sciences</td>
<td>GAM0072</td>
<td>1:10000</td>
</tr>
<tr>
<td>HRP-conjugated Affinipure Goat Anti-Rabbit IgG (H+L)</td>
<td>Multi Sciences</td>
<td>GAR0072</td>
<td>1:10000</td>
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Supplementary Table 3. Primers used for siRNA

<table>
<thead>
<tr>
<th>Primer</th>
<th>Forward oligonucleotide (5’-3’)</th>
<th>Reverse oligonucleotide (5’-3’)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GDF15</td>
<td>GCUCAGACCACUUGAUGACTT</td>
<td>GUCAUGAGUUGUCAGGCTT</td>
</tr>
<tr>
<td>RGS16</td>
<td>GGGCAGUAAACACAGAAATT</td>
<td>UUUGCUGUGUUUACUGCCCTT</td>
</tr>
<tr>
<td>Negative control</td>
<td>UUCUCGAACGUGUGUGUGTT</td>
<td>ACGUGACACGUGUCAGGAATT</td>
</tr>
<tr>
<td>GAPDH Positive control</td>
<td>UGACCUCACUAUUGGUUTT</td>
<td>AACGAUGUGUGAGGUCATT</td>
</tr>
</tbody>
</table>

Sequences are shown in the 5’ to 3’ direction.
Impact of IVF-ET technology on hepatic lipid metabolism of offspring

**Supplementary Figure 1.** Analysis of lipid metabolism factors in female offspring. A-C. Plasma levels of Triglycerides, LDL-C, HDL-C (CON: n=10; IVF-ET: n=11). D-F. Triglycerides, LDL-C, HDL-C levels in liver tissue (CON: n=8; IVF-ET: n=10). TG, Triacylglycerol; HDL-C, High-Density Lipoprotein Cholesterol; LDL-C, Low-Density Lipoprotein Cholesterol. Data represent mean ± SEM. *, P < 0.05; ns, not significant.

![Graphs showing plasma and liver lipid levels](image)

**Supplementary Figure 2.** Role of RGS16 in lipid metabolism. RGS16 knockdown (KD) in HepG2 cells evaluated by (A) mRNA or (B) protein levels; (C) Protein expression of ERK1/2, AKT, p-ERK1/2, or p-AKT after RGS16 knockdown (si-NC: n=3-4; si-RGS16: n=3-4). (D) mRNA expression levels of lipogenic genes after RGS16 knockdown (si-NC: n=3; si-RGS16: n=3). (E) mRNA expression levels of fatty acid oxidation genes after RGS16 knockdown (si-NC: n=3; si-RGS16: n=3). All data are expressed as mean ± SEM. *, P < 0.05; **, P < 0.01; ns, not significant. Relative to negative control, by two-tailed Student’s t-test.