

Modulation of 11 β -Hydroxysteroid Dehydrogenase Type 1 in Mature Human Subcutaneous Adipocytes by Hypothalamic Messengers

MARK FRIEDBERG, EMMANOUIL ZOUMAKIS, NAOKI HIROI, TARIF BADER,
GEORGE P. CHROUSOS, AND ZE'EV HOCHBERG

Pediatric and Reproductive Endocrinology Branch, National Institute of Child Health and Human Development, Bethesda, Maryland 20892

Glucocorticoids are regulated at the prereceptor level by 11 β -hydroxysteroid dehydrogenase (11 β -HSD), which interconverts inactive cortisone and active cortisol. In a previous study, we noted that patients with hypothalamic obesity had an increased ratio of cortisol/cortisone metabolites, suggesting enhanced 11 β -HSD-1 activity. In this *in vitro* study, we tested the hypothesis that adipose 11 β -HSD-1 is regulated by the hypothalamus via circulating hormones, sympathetic nervous system innervation, and/or cytokines. Preadipocytes were retrieved from sc fat from healthy nonobese individuals and differentiated *in vitro* to mature adipocytes. Cells were incubated with several potential effectors, and the activity of 11 β -HSD-1 was assayed by measuring conversion of added 500 nM cortisone to cortisol. Expression of 11 β -HSD-1 mRNA was determined by real-time PCR, whereas lipolytic effects were determined by measuring glycerol concentration in the culture medium. CRH down-regulated 11 β -HSD-1 activity with maximal effect at 10⁻⁹ M (65 \pm 10% of control; *P* < 0.001) and caused a reduction in lipolysis. Likewise, ACTH down-regu-

lated 11 β -HSD-1 activity with maximal effect at 10⁻⁹ M (65 \pm 20%; *P* < 0.05) and reduced medium glycerol. Neither CRH nor ACTH affected 11 β -HSD-1 mRNA expression. TNF α up-regulated 11 β -HSD-1 activity maximally at 0.6 \times 10⁻⁹ M (140 \pm 20%; *P* < 0.001); the same cytokine increased 11 β -HSD-1 mRNA levels to 3-fold of control (*P* < 0.05) and increased medium glycerol levels to 165 \pm 14% of control (*P* < 0.01). IL-1 β also up-regulated 11 β -HSD-1 activity maximally at 0.6 \times 10⁻⁹ M (160 \pm 33%; *P* < 0.001) and caused an increase in glycerol levels (159 \pm 11% of control; *P* < 0.001). Of the adrenergic agonists, salbutamol up-regulated 11 β -HSD-1 activity maximally at 10⁻⁷ M (162 \pm 46%; *P* < 0.02), and clonidine down-regulated it at 10⁻⁷ M (82 \pm 15%; *P* < 0.005). We conclude that possible distinct hypothalamic mediators regulating adipose tissue 11 β -HSD-1 might include down-regulation of 11 β -HSD-1 activity by CRH, ACTH, and α 2 sympathetic stimulation, and up-regulation of the enzyme by β 2 sympathetic stimulation and by the cytokines TNF α and IL-1 β . (*J Clin Endocrinol Metab* 88: 385–393, 2003)

ABNORMAL METABOLISM OF glucocorticoids has been implicated in the pathophysiology of obesity for many years (1). Glucocorticoids are regulated at the prereceptor level by the microsomal enzyme 11 β -hydroxysteroid dehydrogenase (11 β -HSD), which interconverts active cortisol and inactive cortisone. Human 11 β -HSD type 1 (11 β -HSD-1) is a reversible nicotinamide adenine dinucleotide phosphate (NADP)/reduced NADP-dependent, low-affinity enzyme whose *in vivo* action is predominantly oxoreduction of inactive cortisone to active cortisol, functioning as a positive prereceptor signaling pathway modulator of glucocorticoid action (2). In humans, 11 β -HSD-1 is expressed in glucocorticoid target tissues, such as the brain, liver, gonads, lung, and adipocyte tissue (3).

In the companion paper, we report that the obesity that developed in patients with hypothalamic obesity is associated with enhanced 11 β -HSD-1 activity, as reflected by higher ratios of 11-hydroxy/11-oxo metabolites (4). We proposed that abnormal metabolism of exogenous glucocorticoids might be involved in the pathogenesis. Despite the recent increase in our understanding of adipose to hypothalamus signaling, mainly through research on leptin, neu-

ropeptide Y, and α -melanocyte-stimulating hormone (5), our understanding of the reciprocal pathway remains lacking. The present study was designed to examine postulated hypothalamic messengers that might mediate hypothalamus-to-adipose signaling.

On the basis of the findings of the companion paper and on the aforementioned studies, the current *in vitro* study was based on the hypothesis that adipose tissue 11 β -HSD-1 is regulated by the hypothalamus through hormones, the sympathetic nervous system, and/or cytokines. Previous studies have used sc or omental adipose stromal cells to study 11 β -HSD-1 regulation (2, 6–8). These studies have provided valuable information on the regulation of steroid metabolism in preadipocytes. We now report on the regulation of 11 β -HSD-1 in fully differentiated adipocytes.

Materials and Methods

Preadipocytes were retrieved by centrifugation after collagenase treatment from abdominal or thigh sc fat samples obtained by liposuction from otherwise nonobese, healthy individuals (Table 1). Preadipocytes were differentiated *in vitro* to mature adipocytes using 1 μ M dexamethasone, 100 nM insulin, isobutylmethylxanthine 0.2 mM, and 10 μ M PPAR γ agonist (Zen-Bio, Inc., Research Triangle Park, NC). Differentiation to mature adipocytes was confirmed by microscopic appearance of intracellular lipid droplets, expression of the adipocyte specific genes aP2, PPAR γ , and *ob* (leptin), and by the lipolytic response to isopro-

Abbreviations: BMI, Body mass index; HPA, hypothalamo-pituitary-adrenal; 11 β -HSD, 11 β -hydroxysteroid dehydrogenase; NADP, nicotinamide adenine dinucleotide phosphate; PRL, prolactin.

erolon. Mature cells were maintained in media containing 1 μ M dexamethasone and 100 nM human insulin.

After an overnight incubation with serum-free media and without dexamethasone or insulin, cells were incubated with and without the several effectors tested in this study. The supernatant was collected and centrifuged, and activity of 11 β -HSD-1 was assayed in the supernatants by measuring conversion of added 500 nM cortisone (Sigma, St. Louis, MO) to cortisol with a RIA kit (Coat-a-Count cortisol, Diagnostic Products Corp., Los Angeles, CA), under conditions ensuring first-order kinetics (2–24 h; Fig. 1). Starvation of up to 48 h and also addition of reduced NADP to the incubation media did not influence 11 β -HSD-1 activity in these cells (data not shown). All experiments were performed at least three times and in triplicate.

Effectors tested

GH, IGF-I, leptin, estradiol, dihydrotestosterone, T₃, CRH, ACTH, TNF α , phenylephrine, dobutamine, salbutamol, phenylpropranolamine, BRL 37344, prolactin (PRL), and acetyl choline were purchased from Sigma. IL-1 β and IL-6 were purchased from R&D Systems, Inc. (Minneapolis, MN).

Statistics

As expected in a primary culture system originating from subjects with individual variations, individual results varied considerably. Replicate experiments were performed on each of the five subjects and averaged. ANOVA were performed on the mean values of the subjects (n = 5) to compare the expression across concentrations, applying Student's *t* test when it was significant, to compare treated cells to control untreated cells using Sigmapstat 32 (SPSS, Inc., Chicago, IL), Origin 5 (Microcal Software Inc., Northampton, MA) and Excel (Microsoft Corp., Redmond, WA) computer software. In the case of ACTH and CRH, when in two subjects most results indicated inhibition but some unexpected results showed stimulation, the binomial test was used to test the hypothesis that the negative response is the dominant one (*i.e.* the

TABLE 1. Characteristics of subjects who donated liposuction tissue for this study

Subject no.	Sex	Age (yr)	BMI (kg/m ²)
1	F	32	21.67
2	F	43	24.84
3	F	64	25.9
4	M	35	26.6
5	F	20	23.9

All tissues were abdominal sc fat except tissue from subject 2, which was sc fat from the thigh. F, female; M, male.

probability to get a negative response is higher than 0.5). The probability of type I error was set at 0.1, and a *P* value less than 0.1 was considered significant. Correlations were calculated by the Pearson's coefficient.

Real-time RT-PCR

After incubation with a known or putative effector as described above, total RNA was extracted from adipocytes using a single-step method (Tri Reagent, Molecular Research Center, Inc., Cincinnati, OH). RT-PCR experiments were performed according to the ThermoScript RT-PCR system kit instructions (Life Technologies, Inc., Gaithersburg, MD). Briefly, after treatment with deoxyribonuclease I (GenHunter, Corp., Nashville, TN), total RNA (1 μ g) was reverse transcribed to complementary DNA by a reaction containing 2 mM deoxynucleotide mix, 100 mM dithiothreitol, 40 U RNase inhibitor, 50 ng random primer, and 15 U ThermoScript reverse transcriptase. The reaction was run at 25 C for 10 min and 50 C for 50 min, heated to 85 C for 5 min, and then cooled to 4 C.

To quantitate expression of 11 β -HSD-1 mRNA after incubation with an effector, we applied the TaqMan PCR method, using a 7700 Sequence Detector (PE Applied Biosystems, Foster City, CA). The reaction contained TaqMan Universal PCR Master Mix (900 nmol/liter) and the following forward and reverse primers: forward, 5'-TTGGAATATTTGGGCTAACAGTGA-3'; reverse, 5'-CCTCCTCTAATTTCCCTTGAG-3'. The dye utilized was a TaqMan probe 200 nmol/liter 5'-FAM-AGGATTAATAATGCTGATTCTGCCCCAG-TAMRA-3'. 18S ribosomal RNA primers and probe were added at 50 nmol/liter. Thermal cycling proceeded with 40 cycles of 95 C for 15 sec and 60 C for 1 min. Input RNA amounts were calculated with a multiplex comparative method for mRNAs of 11 β -HSD-1 and 18S ribosomal protein.

Lipolysis

Lipolysis was assessed by quantitative enzymatic determination of glycerol concentrations in the culture medium [Triglyceride (GPO-Trinder), Sigma].

Results

CRH and ACTH

CRH down-regulated 11 β -HSD-1 activity (*P* < 0.1), with maximal down-regulatory effect demonstrated at 10⁻⁹ M (65 \pm 10% of control; *P* < 0.01; Table 2). A representative dose-response demonstrating this effect is shown in Fig. 2A, presenting mean and distribution of five replicate wells. The CRH receptor-1 antagonist, antalarmin, at a concentration of 10⁻⁷ M did not reverse CRH-suppressed 11 β -HSD-1 activity

FIG. 1. Time course of adipocyte 11 β -HSD-1 activity. Subcutaneous mature adipocytes were incubated with 500 nM cortisone for varying time intervals. Concentration of cortisol was then measured by RIA in the culture medium.

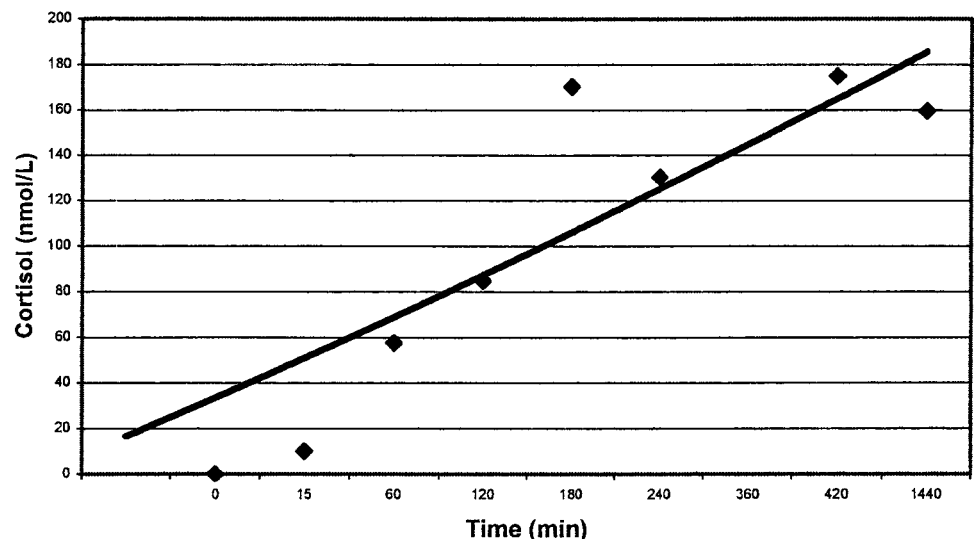


TABLE 2. Summary of effectors that modulated 11 β -HSD-1 activity in a primary culture of mature human sc adipocytes

Effector	Maximal effect on 11 β -HSD-1 activity	Maximal effective concentration	Maximal lipolytic effect	Maximal effective concentration
CRH	65 \pm 10%	10 ⁻⁹ M	77 \pm 21%	10 ⁻⁷ M
ACTH	65 \pm 20%	10 ⁻⁹ M	72 \pm 9%	10 ⁻⁷ M
TNF α	140 \pm 20%	0.6 \times 10 ⁻⁹ M	165 \pm 14%	0.6 \times 10 ⁻⁹ M
IL-1 β	160 \pm 33%	0.6 \times 10 ⁻⁹ M	159 \pm 11%	0.6 \times 10 ⁻¹⁰ M
Salbutamol	162 \pm 46%	10 ⁻⁷ M	100%	None
Clonidine	82 \pm 15%	10 ⁻⁷ M		

Results represent the mean \pm SD; n = 4–5 subjects.

(data not shown). CRH caused a dose-dependent reduction in glycerol concentration in the incubation media (ANOVA $P < 0.05$). Maximal effect was at a concentration of 10⁻⁷ M (77 \pm 21% of control; $P = 0.05$; Table 2). Likewise, ACTH down-regulated 11 β -HSD-1 activity ($P < 0.1$) with maximal effect at a concentration of 10⁻⁹ M (65 \pm 20%; $P < 0.05$; Table 2). A representative dose-response demonstrating the down-regulatory effect of ACTH is shown in Fig. 2B. A combination of CRH and ACTH was nonadditive (data not shown). ACTH caused a dose-dependent reduction in glycerol concentration (ANOVA $P < 0.001$), with maximal effect at a concentration of 10⁻⁷ M (72 \pm 9% of control; $P < 0.001$; Fig. 2D). The individual response did not correlate with the subject's age or body mass index (BMI; $r = 0.323$; $P > 0.1$; n = 5). Neither CRH nor ACTH affected 11 β -HSD-1 mRNA levels (Fig. 2E).

Cytokines

TNF α up-regulated 11 β -HSD-1 activity in mature adipocytes in a dose-dependent manner, exerting maximal effect at a concentration of 0.6 \times 10⁻⁹ M (140 \pm 20%; $P < 0.001$; Fig. 3A). TNF α at a concentration of 0.6 \times 10⁻⁸ M increased 11 β -HSD-1 mRNA levels to 300% of control ($P < 0.05$), whereas IL-6 did not have any effect (Fig. 3E). TNF α caused an increase in glycerol levels with maximal effect at 0.6 \times 10⁻⁹ M (165 \pm 14% of control; $P < 0.01$; Fig. 3C). IL-1 β up-regulated 11 β -HSD-1 activity in mature adipocytes, with maximal effect reached at 0.6 \times 10⁻⁹ M (160 \pm 33%; $P < 0.001$; Table 2). A representative dose-response of this effect is shown in Fig. 3B. IL-1 β caused an increase in glycerol levels with maximal effect at 0.6 \times 10⁻¹⁰ M (159 \pm 11% of control; $P < 0.001$; Fig. 3D).

IL-6 demonstrated inconsistent effects on 11 β -HSD-1 activity ranging from 50% to 150% of control. These differences did not correlate with patient characteristics ($r = 0.297$; $P > 0.1$). IL-6 did not influence glycerol levels in the incubation media.

Adrenergic effectors

To test possible effects of the sympathetic nervous system, mature adipocytes were incubated with agonists of each of the adrenergic receptors. The β 2 agonist salbutamol up-regulated 11 β -HSD-1 activity, demonstrating maximal effect at a concentration of 10⁻⁹ M (162 \pm 46%; $P < 0.02$; Table 2). A representative dose response demonstrating the up-regulatory effect of salbutamol is shown in Fig. 4A. The α 2 agonist, clonidine, demonstrated a slight but significant down-regulation of 11 β -HSD-1 activity at 10⁻⁷ M (82 \pm 15%;

$P < 0.005$; Table 2). A representative dose-response demonstrating the down-regulatory effect of clonidine is shown in Fig. 4B. Salbutamol did not influence glycerol levels in the incubation media.

The α 1 agonist phenylephrine, the β 1 agonists dobutamine and phenylpropanolamine, and the β 3 agonist BRL 37344 did not affect adipocyte 11 β -HSD-1 activity (Table 3). Likewise, acetylcholine did not affect adipocyte 11 β -HSD-1 activity (Table 3).

Other effectors

GH, IGF-I, leptin, estradiol, dihydrotestosterone, T₃, and PRL did not influence 11 β -HSD-1 activity (Table 3).

Discussion

This study investigated potential messengers that might mediate hypothalamic signals to mature adipose cells, resulting in modulation of 11 β -HSD-1 activities. The results of this study demonstrate a number of such potential mediators. We used a primary cell culture system of mature human abdominal sc adipocytes from nonobese subjects. Mature adipocytes might play an important role in adipose metabolism, and although 11 β -HSD-1 activity in stromal cells has been shown to be influenced by various factors (2, 3, 6–8), the mature adipocyte has been studied far less in this respect than its precursors. Furthermore, study of modulation of 11 β -HSD-1 activity in mature adipocytes is crucial in light of the recent report that 11 β -HSD-1 activity switches direction from a predominant dehydrogenase activity in the preadipocyte to predominant oxo-reductase activity in the mature omental adipocyte (9). Despite the fact that this switch did not occur in sc adipocytes, this reversal of 11 β -HSD-1 activity in mature omental adipocytes emphasizes the importance of cell differentiation stage in cellular function. Likewise, modulation of 11 β -HSD-1 activity might be substantially different between the preadipocyte and the mature adipocyte in regard to hypothalamic regulation of the enzyme, with significance regarding hypothalamic control of adiposity. We encountered a number of problems with our study system. The major problem was variability of results, as expected in a primary culture system originating from subjects with individual variations. To combat these problems, we repeated experiments at least 3 times, and in most instances we repeated experiments between 8 and 11 times. Despite this and despite careful observation of patient characteristics and methods, considerable variability remained.

We postulated that CRH and ACTH, might play important roles as hypothalamic regulators of 11 β -HSD-1 activity, be-

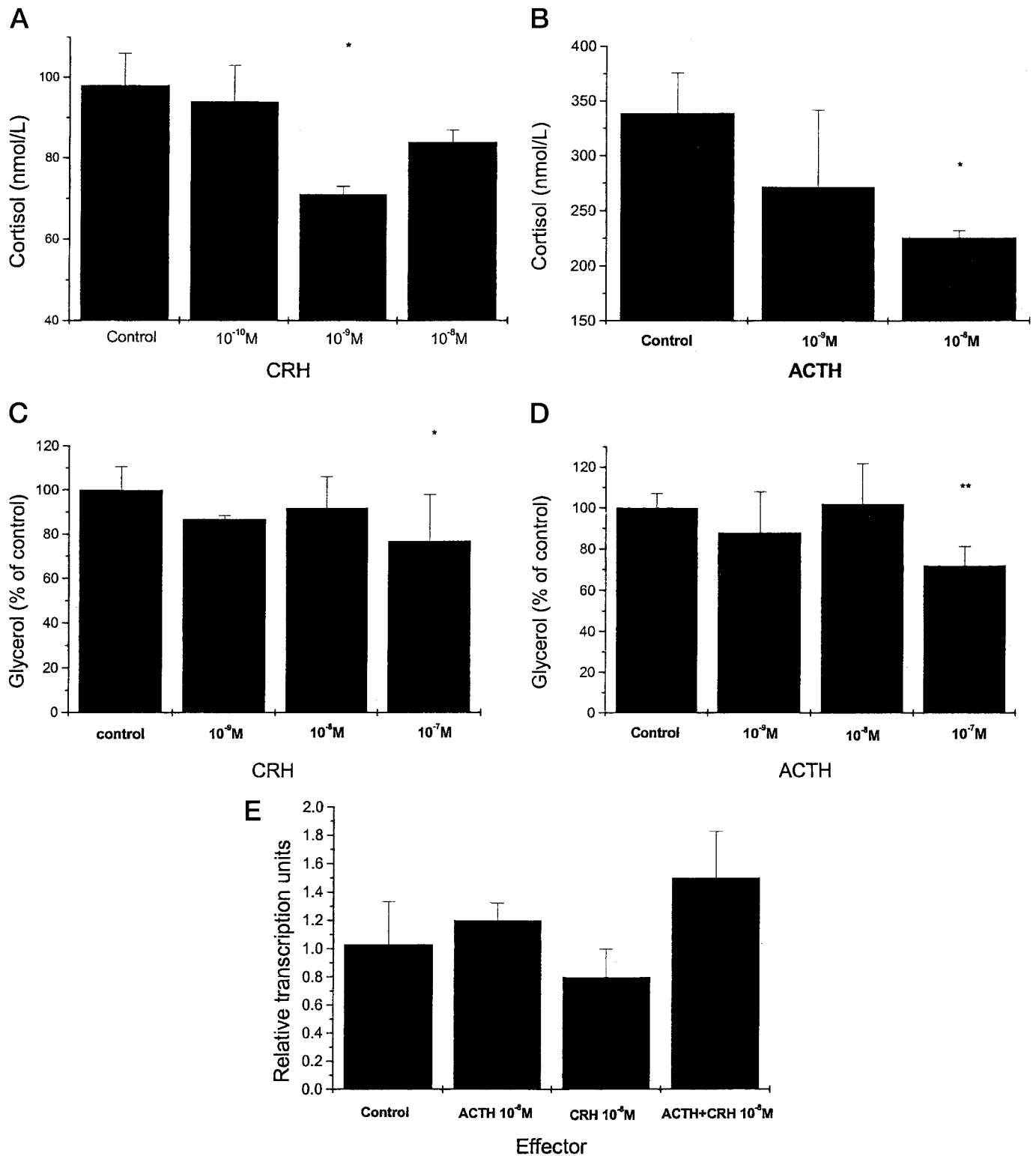


FIG. 2. Representative dose-response effects of CRH (A and C) and ACTH (B and D) on 11 β -HSD-1 activity (A and B) and medium glycerol (C and D) in a primary culture of human adipocytes. E, Real-time RT-PCR of CRH and ACTH. Cells were incubated for 3 h with CRH or ACTH and 500 nM cortisone. Mean \pm SD of five replicate wells. *, $P < 0.05$; **, $P < 0.01$. ANOVA $P < 0.05$ (A and C); $P < 0.001$ (D).

cause changes in adiposity during acute stress and during states of excess cortisol secretion or effect, such as in Cushing's syndrome, can be striking. Rat adipocytes express high-

affinity ACTH receptors (10), and ACTH induces lipolysis in rat adipocytes through these receptors (11). Melanocyte-stimulating hormone/ACTH (4-10), representing the core

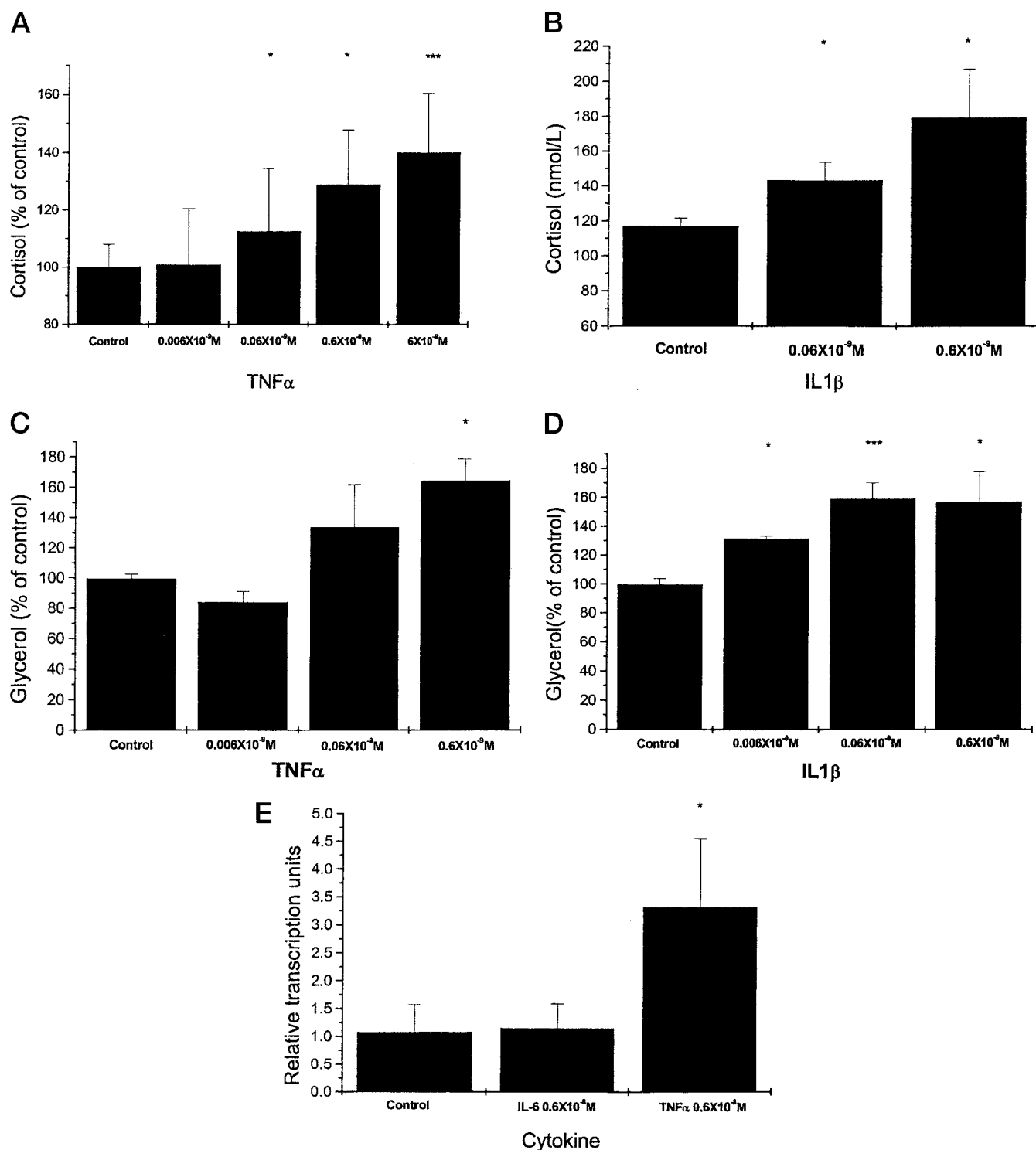


FIG. 3. Effect of TNF α (A) and representative dose-response effects of IL-1 β (B) on 11 β -HSD-1 activity (A and B) and medium glycerol (C and D) in a primary culture of human adipocytes. E, Real-time RT-PCR. Cells were incubated for 3 h with TNF α or IL-1 β and 500 nM cortisone. Mean \pm SD. *, $P < 0.05$; ***, $P < 0.001$. ANOVA $P < 0.001$ (A), $P < 0.05$ (C and D).

sequence of all melanocortins, reduced obesity when administered to human subjects (12). ACTH suppresses leptin levels in rats and has been proposed as the mediator of a hypothalamo-pituitary-adrenal (HPA) axis-leptin regulatory loop (13). Vicennati and Pasquali (14) demonstrated hyper-

activity of the HPA axis in obese women and also proposed that the HPA axis influences obesity through two distinct mechanisms that lead to functional hypercortisolism. The first was suspected to be of central origin, and the second, a peripheral one, located in the liver and adipose tissue (14, 15).

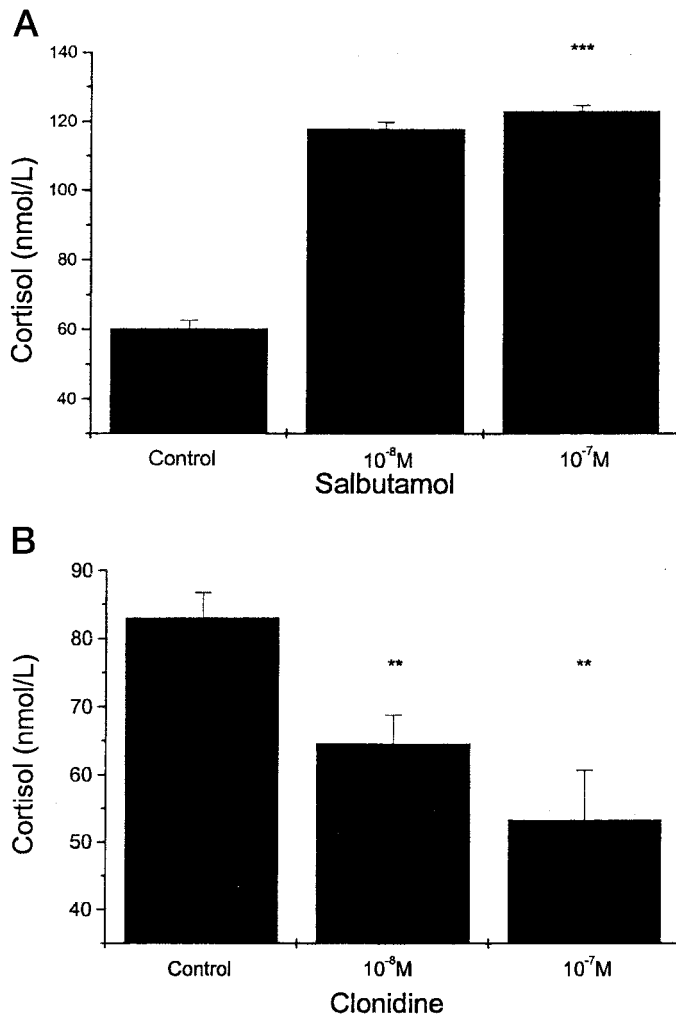


FIG. 4. Representative dose-response effects of salbutamol (A) and clonidine (B) on 11 β -HSD-1 activity in a primary culture of human adipocytes. Cells were incubated for 3 h with salbutamol or clonidine and 500 nM cortisone. Mean \pm SD. **, $P < 0.01$; ***, $P < 0.001$. ANOVA $P < 0.001$ (A), $P < 0.01$ (B).

The results of the present study demonstrate a significant decrease in 11 β -HSD-1 activity when adipocytes were incubated with either CRH or ACTH. CRH and ACTH deficiency become important candidates to directly mediate, at the adipose tissue level, the high cortisol/cortisone ratio of patients with hypothalamic obesity (4) and would comply with the mechanisms detailed previously (14, 15).

Few studies have investigated the role of CRH and ACTH as modulators of the renal type 2 isoform of 11 β -HSD, mostly in relation to the hypertension and electrolyte abnormalities found in hypercortisolism. These have mostly demonstrated down-regulation of 11 β -HSD-2 activity, as we have shown for the type 1 isoform (16, 17). Interestingly, antalarmin, a specific CRH 1 receptor inhibitor (18), did not reverse CRH inhibition of 11 β -HSD-1 activity, which might exert this effect through the CRH 2 receptor or possibly through a third, as yet unidentified, receptor. At the same time, ACTH and CRH down-regulated cellular lipolysis, as indicated by a decrease in medium glycerol. These results contrast those found in the rat adipocyte model described previously (11),

TABLE 3. Effectors tested that did not influence 11-HSD-1 activity in a primary culture of human adipocytes

▪ GH
▪ IGF-I
▪ Leptin
▪ PRL
▪ Estradiol
▪ Dihydrotestosterone
▪ T ₃
▪ IL-6
▪ Phenylephrine (α 1 agonist)
▪ Dobutamine (β 1 agonist)
▪ Phenylpropranolamine (β 1 agonist)
▪ BRL 37344 (β 3 agonist)
▪ Acetyl choline

an effect that seems to vary between species (10). Our results suggest that the down-regulatory effect of CRH and ACTH is exerted not at a transcriptional level, as evidenced by a lack of change in 11 β -HSD-1 mRNA, but rather by direct non-additive modulation of enzymatic activity, possibly through posttranslational modification (phosphorylation) of the enzyme (19–22).

In the acute setting, stress-related CRH and ACTH would down-regulate 11 β -HSD-1 activity, reducing cortisone to cortisol conversion and reducing adiposity. This might contribute to the weight loss of stress, which is often in excess of that related to reduced caloric intake (23). In the acute and chronic setting, the down-regulatory effect of CRH and ACTH on 11 β -HSD-1 activity might counteract the up-regulatory effect of inflammatory cytokines and adrenergic activity that we have shown on this enzyme.

Other hormones that we screened as putative hypothalamic modulators of adipose 11 β -HSD-1 activity did not influence this activity in our system. These included GH, PRL, IGF-I, leptin, estradiol, dihydrotestosterone, and T₃. GH has been shown to decrease 11 β -HSD-1 activity *in vivo* (24–28), as an expression of total body 11 β -HSD-1 activity. Activity of 11 β -HSD-1 is tissue specific (29–31), so that decreased 11 β -HSD-1 due to GH might reflect liver 11 β -HSD-1 activity (25) and not hold true for mature sc adipocytes. Moore *et al.* (8) showed a down-regulation of 11 β -HSD-1 activity due to GH in adipose stromal cells, through IGF-I. Like GH, IGF-I did not influence 11 β -HSD-1 activity in mature sc adipocytes. The difference between these results might be explained by the distinct differentiation stage of the cells, because 11 β -HSD-1 activity has been shown to depend on cell differentiation (9, 32).

T₃ was tested with the thought that it would be the end effector of the TRH-TSH- T₄-T₃ axis, possibly affecting adipose metabolism through modulation of 11 β -HSD-1. In previous studies, albeit using different species and tissues, thyroid hormones have had up-regulating (30), down-regulating (31, 33–35), or no (30) effects. Sex steroids decreased 11 β -HSD-1 activity in sheep, rat, and human liver (36–39) and in rat testis (40).

It was recently suggested that in bulimic and anorexic patients (41, 42), circulating TNF α is derived from the central nervous system, suggesting an endocrine mechanism of secretion and acting. TNF α is under neural control (43), and clonidine suppresses plasma concentrations of TNF α (44).

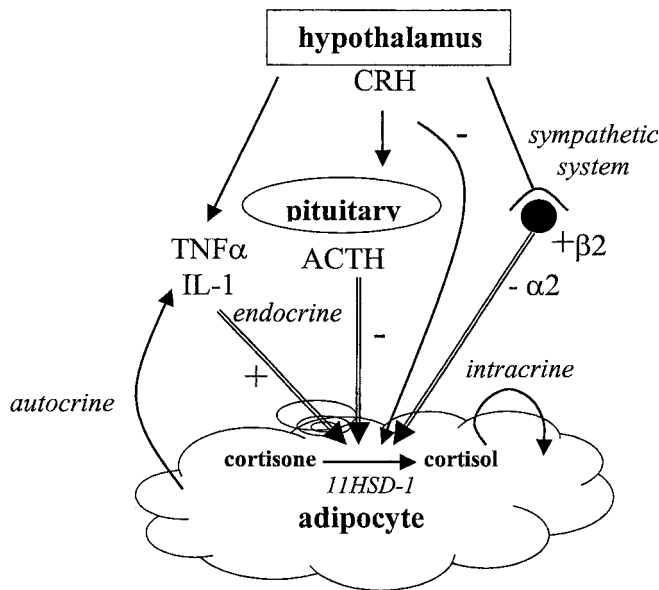


FIG. 5. A model of hypothalamic modulation of 11 β -HSD-1 activity in adipose tissue.

Mental stress delays increases in cytokine responses, suggesting modulation of TNF α by sympathetic activity (45). Recent research has revealed an important role for cytokines in the metabolism of adipose tissue (46–48). Cytokines are expressed at significant levels by adipose tissue and correlate with BMI (49–52). Also, cytokines have been shown to affect 11 β -HSD-1 activity in various tissues (7, 53–57), but to the best of our knowledge, their effect on 11 β -HSD-1 activity has not been studied in mature, fully differentiated adipocytes. On this basis, and in the context of the study of putative mechanisms of hypothalamic regulation of mature adipocytes, we investigated possible modulation of mature adipocytic 11 β -HSD-1 activity by cytokines. Both TNF α and IL-1 β up-regulated 11 β -HSD-1 activity in sc adipocytes. These results are in accord with previous results obtained from a model using 11 β -HSD-2 expression by rat glomerular mesangial cells (53), and they expand on the recent observation of a similar up-regulatory effect of cytokines in human sc and omental stromal cells (54). Moreover, we show for the first time that in the mature adipocyte, TNF α markedly up-regulates this activity through a gene transcription effect. IL-6, also produced at high levels by adipose tissue itself, had no effect on 11 β -HSD-1 activity.

There is conflicting data about whether glucocorticoids regulate TNF α release by adipocytes, while they inhibit its effects in adipose tissue (56–58). Therefore, locally generated, intracrine cortisol might counter the effects of adipose paracrine/autocrine TNF α . In hypothalamic obesity, a lack of CRH and ACTH might allow for unopposed adipose paracrine/autocrine TNF α , thus leading to an increase in 11 β -HSD-1 activity and an increase in local cortisol effect and obesity. During an acute stress or inflammatory process, TNF α and IL-1 β could recruit cortisol via an autocrine/paracrine mechanism for a local intracrine effect. In a longer time frame, TNF α (cachexin) and IL-1 β reduce adiposity through arrest of adipocyte differentiation, increase of lipolysis, and an increase in apoptosis (59–61). Interestingly,

TNF α up-regulates β 2 receptors in adipocytes (62). We show that a β 2 agonist up-regulates 11 β -HSD-1 activity, making TNF α a potent recruiter of local glucocorticoids at times of inflammation, stress, and sympathetic hyperactivity.

Adrenergic stimulation of β -receptors has an important role in lipolysis (63) and constitutes an efferent brain-to-adipose signaling pathway. We sought to investigate whether this signaling might modulate adipose 11 β -HSD-1 activity. Our results show up-regulation of 11 β -HSD-1 activity by β 2 stimulation, with the converse results seen with regard to α 2 receptors. No effect on 11 β -HSD-1 activity was demonstrated with a β 1 agonist, strengthening the notion that modulation of 11 β -HSD-1 activity by the sympathetic system is a separate pathway to that of the classic lipolytic one. β 3 Adrenergic receptors have been shown to induce lipolysis in rodents (64), and because these receptors are found in human adipose tissue (65), we postulated that they might be the mechanism for hypothalamic modulation of adipose 11 β -HSD-1. We found no effect of a β 3 agonist, although one reason for this may be that the activity of this receptor is low in sc fat in comparison to omental fat (65, 66).

In summary, we have demonstrated modulation of 11 β -HSD-1 activity and availability of cortisol for intracrine effect in mature human sc adipocytes *in vitro* by a number of possible hypothalamic mediators (Fig. 5). Possible mediators that are used by the hypothalamus to regulate adipose tissue cortisol might include down-regulation of 11 β -HSD-1 activity by the HPA axis through a direct CRH and ACTH effect, up-regulation of the enzyme in these cells by the β 2 adrenergic system, and stimulation of the enzyme activity by the cytokines TNF α and IL-1 β .

Damage to the hypothalamus and hypothalamic obesity (4) might result from CRH and ACTH deficiency, increased sympathetic tone, and increased cytokine availability. The same system may also be involved in adipose tissue activity by stress, inflammation, and sympathetic hyperactivity.

Acknowledgments

Received March 31, 2002. Accepted October 15, 2002.

Address all correspondence and requests for reprints to: Ze'ev Hochberg, M.D., D.Sc., Meyer Children's Hospital, P.O. Box 9602, Haifa 31096, Israel. E-mail: z_hochberg@rambam.health.gov.il.

References

- Dunkelman SS, Fairhurst B, Plager J, Waterhouse C 1964 Cortisol metabolism in obesity. *J Clin Endocrinol Metab* 24:832–841
- Bujalska IJ, Kumar S, Stewart PM 1997 Does central obesity reflect "Cushing's disease of the omentum?" *Lancet* 349:1210–1213
- Ricketts ML, Verhaeg J, Bujalska I, Howie AJ, Rainey WE, Stewart PM 1998 Immunohistochemical localization of type 1 11 β -hydroxysteroid dehydrogenase in human tissues. *J Clin Endocrinol Metab* 83:1325–1335
- Tiosano D, Eisenstein I, Militianu D, Chrousos GP, Hochberg Z 2003 11 β -Hydroxysteroid dehydrogenase activity in hypothalamic obesity. *J Clin Endocrinol Metab* 88:379–384
- Gura T 2000 Tracing leptin's partners in regulating body weight. *Science* 287:1738–1741
- Bujalska IJ, Kumar S, Hewison M, Stewart PM 1999 Differentiation of adipose stromal cells: the roles of glucocorticoids and 11 β -hydroxysteroid dehydrogenase. *Endocrinology* 140:3188–3196
- Handako K, Yang K, Strutt B, Khalil W, Killinger D 2000 Insulin attenuates the stimulatory effects of tumor necrosis factor α on 11 β -hydroxysteroid dehydrogenase 1 in human adipose stromal cells. *J Steroid Biochem Mol Biol* 72:163–168
- Moore JS, Monson JP, Kaltsas G, Putignano P, Wood PJ, Sheppard MC, Besser GM, Taylor NF, Stewart PM 1999 Modulation of 11 β -hydroxysteroid

- dehydrogenase isoenzymes by growth hormone and insulin-like growth factor: *in vivo* and *in vitro* studies. *J Clin Endocrinol Metab* 84:4172–4177
9. Bujalska IJ, Walker EA, Hewison M, Stewart PM 2002 A switch in dehydrogenase to reductase activity of 11 β -hydroxysteroid dehydrogenase type 1 upon differentiation of human omental adipose stromal cells. *J Clin Endocrinol Metab* 87:1205–1210
 10. Boston BA 1999 The role of melanocortins in adipocyte function. *Ann N Y Acad Sci* 885:75–84
 11. Behrens CM, Ramachandran J 1981 The effect of glucocorticoids on adipocyte corticotropin receptors and adipocyte responses. *Biochimica Biophysica Acta* 672:268–279
 12. Fehm HL, Smolnik R, Kern W, McGregor GP, Bickel U, Born J 2001 The melanocortin melanocyte-stimulating hormone/adrenocorticotropin (4–10) decreases body fat in humans. *J Clin Endocrinol Metab* 86:1144–1148
 13. Spinedi E, Gaillard RC 1998 A regulatory loop between the hypothalamo-pituitary-adrenal (HPA) axis and circulating leptin: a physiological role of ACTH. *Endocrinology* 139:4016–4020
 14. Vicennati V, Pasquali R 2000 Abnormalities of the hypothalamic-pituitary-adrenal axis in non-depressed women with abdominal obesity and relations with insulin resistance: evidence for a central and peripheral alteration. *J Clin Endocrinol Metab* 85:4093–4098
 15. Pasquali R, Vicennati V 2000 Activity of the hypothalamic-pituitary-adrenal axis in different obesity phenotypes. *Int J Obes Relat Metab Disord* 24(Suppl 2):S47–S49
 16. Morita H, Cozza EN, Zhou MY, Gomez-Sanchez EP, Romero DG, Gomez-Sanchez CE 1997 Regulation of the 11 β -hydroxysteroid dehydrogenase in the rat adrenal. Decreased enzymatic activity induced by ACTH. *Endocrine* 7:331–335
 17. Arteaga E, Farella C, Campusano C, Cardenas I, Martinez P 1999 Persistent hypokalemia after successful adrenalectomy in a patient with Cushing's syndrome due to ectopic ACTH secretion: possible role of 11 β -hydroxysteroid dehydrogenase inhibition. *J Endocrinol Invest* 22:857–859
 18. Webster EL, Lewis DB, Torpy DJ, Zachman EK, Rice KC, Chrousos GP 1996 *In vivo* and *in vitro* characterization of antalarmin, a nonpeptide corticotropin-releasing hormone (CRH) receptor antagonist: suppression of pituitary ACTH release and peripheral inflammation. *Endocrinology* 137:5747–5750
 19. Rocchi S, Gaillard I, van Obberghen E, Chambaz EM, Vilgrain I 2000 Adrenocorticotrophic hormone stimulates phosphotyrosine phosphatase SHP2 in bovine adrenocortical cells: phosphorylation and activation by cAMP-dependent protein kinase. *Biochem J* 2:483–490
 20. Paz C, Maciel FC, Poderoso C, Gorostizaga A, Podesta EJ 2000 An ACTH-activated protein tyrosine phosphatase (PTP) is modulated by PKA-mediated phosphorylation. *Endocr Res* 26:609–614
 21. Elliott-Hunt CR, Kazlauskaitė J, Wilde GJ, Grammatopoulos DK, Hillhouse EW 2002 Potential signalling pathways underlying corticotropin-releasing hormone-mediated neuroprotection from excitotoxicity in rat hippocampus. *J Neurochem* 80:416–425
 22. Kiang JG, Ding XZ, Gist ID, Jones RR, Tsokos GC 1998 Corticotropin-releasing factor induces phosphorylation of phospholipase C- γ at tyrosine residues via its receptor β 2 in human epidermoid A-431 cells. *Eur J Pharmacol* 363:203–210
 23. Smith SR, de Jonge L, Pellymounter M, Nguyen T, Harris R, York D, Redmann S, Rood J, Bray GA 2001 Peripheral administration of human corticotropin releasing hormone: a novel method to increase energy expenditure and fat oxidation in man. *J Clin Endocrinol Metab* 86:1991–1998
 24. Whorwood CB, Donovan SJ, Wood PJ, Phillips DIW 2001 Regulation of glucocorticoid receptor α and β isoforms and type 1 11 β -hydroxysteroid dehydrogenase expression in human skeletal muscle cells: a key role in the pathogenesis of insulin resistance? *J Clin Endocrinol Metab* 86:2296–2308
 25. Liu YJ, Nakagawa Y, Nasuda K, Saegusa H, Igarishi Y 1996 Effect of growth hormone, insulin and dexamethasone on 11 β -hydroxysteroid dehydrogenase activity on a primary culture of rat hepatocytes. *Life Sci* 59:227–234
 26. Gelding SV, Taylor NF, Wood PJ, Noonan K, Weaver JU, Wood DF, Monson JP 1998 The effect of growth hormone replacement therapy on cortisol-cortisone interconversion in hypopituitary adults: evidence for growth hormone modulation of extrarenal 11 β -hydroxysteroid dehydrogenase activity. *Clin Endocrinol* 48:153–162
 27. Walker BR, Andrew R, MacLeod KM, Padfield PL 1998 Growth hormone replacement inhibits renal and hepatic 11 β -hydroxysteroid dehydrogenases in ACTH deficient patients. *Clin Endocrinol (Oxf)* 49:257–263
 28. Toogood AA, Taylor S, Shalet SM, Monson JP 2000 Modulation of cortisol metabolism by low-dose growth hormone replacement in elderly hypopituitary patients. *J Clin Endocrinol Metab* 85:1727–1730
 29. Sun K, Yang K, Challis JRG 1997 Differential regulation of 11 β -hydroxysteroid dehydrogenase type 1 and 2 by nitric oxide in cultured human placental trophoblast and chorionic cell preparation. *Endocrinology* 138:4912–4920
 30. Ricketts ML, Shoemith KJ, Hewison M, Strain A, Eggo MC, Stewart PM 1998 Regulation of 11 β -hydroxysteroid dehydrogenase type 1 in primary cultures of rat and human hepatocytes. *J Endocrinol* 156:159–168
 31. Whorwood CB, Sheppard MC, Stewart PM 1993 Tissue specific effects of thyroid hormone on 11 β -hydroxysteroid dehydrogenase gene expression. *J Steroid Biochem Mol Biol* 46:539–547
 32. Napolitano A, Voice MW, Edwards CRW, Seckl JR, Chapman KE 1998 11 β -hydroxysteroid dehydrogenase 1 in adipocytes: expression is differentiation-dependent and hormonally regulated. *J Steroid Biochem Mol Biol* 64:251–260
 33. Hellman L, Bradlow HL, Zumoff B, Gallagher TF 1961 The influence of thyroid hormone on hydrocortisone production and metabolism. *J Clin Endocrinol Metab* 21:1231–1247
 34. Koerner DR, Hellman L 1964 Effect of thyroxine administration on the 11 β -hydroxysteroid dehydrogenases in rat liver and kidney. *Endocrinol* 75:592–601
 35. Zumoff B, Bradlow HL, Levin J, Fukushima DK 1982 Influence of thyroid function on the *in vivo* cortisol \leftrightarrow cortisone equilibrium in man. *J Steroid Biochem Mol Biol* 18:437–440
 36. Liu YJ, Nakagawa Y, Toya K, Saegusa H, Nasuda K, Endoh A, Ohzeki T 1998 Effects of thyroid hormone (thyroxine) and testosterone on hepatic 11 β -hydroxysteroid dehydrogenase mRNA and activity in pubertal hypothyroid male rats. *Metabolism* 47:474–477
 37. Nwe KH, Hamid A, Morat PB, Khalid BA 2000 Differential regulation of the oxidative 11 β -hydroxysteroid dehydrogenase activity in testis and liver. *Steroids* 65:40–45
 38. Wang S, Matthews SG, Jeffray TM, Stevens MY, Yang K, Hammond GL, Challis JR 1997 The effects of estradiol-17 β infusion into fetal sheep in late gestation. *Endocrine* 6:271–278
 39. Jamieson PM, Nyirenda MJ, Walker BR, Chapman KE, Seckl JR 1999 Interactions between oestradiol and glucocorticoid regulatory effects on liver-specific glucocorticoid-inducible genes: possible evidence for a role of hepatic 11 β -hydroxysteroid dehydrogenase type 1. *J Endocrinol* 160:103–109
 40. Nwe KH, Morat PB, Khalid BA 1997 Opposite effects of sex steroids on 11 β -hydroxysteroid dehydrogenase activity in the normal and adrenalectomized rat testis. *Gen Pharmacol* 28:661–664
 41. Nakai Y, Hamagaki S, Takagi R, Taniguchi A, Kurimoto F 2000 Plasma concentrations of tumor necrosis factor- α (TNF- α) and soluble TNF receptors in patients with bulimia nervosa. *Clin Endocrinol (Oxf)* 53:383–388
 42. Nakai Y, Hamagaki S, Takagi R, Taniguchi A, Kurimoto F 1999 Plasma concentrations of tumor necrosis factor- α (TNF- α) and soluble TNF receptors in patients with anorexia nervosa. *J Clin Endocrinol Metab* 53:383–388
 43. Mastronardi CA, Yu WH, McCann S 2001 Lipopolysaccharide is controlled by the central nervous system. *Neuroimmunomodulation* 9:148–156
 44. Nader ND, Ignatowski TA, Kurek CJ, Knight PR, Spengler RN 2001 Clonidine suppresses plasma and cerebrospinal fluid concentrations of TNF- α during the perioperative period. *Anesth Analg* 93:363–369
 45. Steptoe A, Willemsen G, Owen N, Flower L, Mohamed-Ali V 2001 Acute mental stress elicits delayed increases in circulating inflammatory cytokine levels. *Clin Sci (Lond)* 101:185–192
 46. Sethi JK, Hotamisligil GS 1999 The role of TNF α in adipocyte metabolism. *Semin Cell Dev Biol* 10:19–29
 47. Ahima RS, Flier JS 2000 Adipose tissue as an endocrine organ. *Trends Endocrinol Metab* 11:327–332
 48. Papanicolaou DA, Vgontzas AN 2000 Interleukin-6: the endocrine cytokine. *J Clin Endocrinol Metab* 85:1331–1333
 49. Orban Z, Remaley AT, Sampson M, Trajanoski Z, Chrousos GP 1999 The differential effect of food intake and β -adrenergic stimulation on adipose-derived hormones and cytokines in man. *J Clin Endocrinol Metab* 84:2126–2133
 50. Kern PA, Saghizadeh M, Ong JM, Bosch RJ, Deem R, Simsolo RB 1995 The expression of tumor necrosis factor in adipose tissue: regulation by obesity, weight loss, and relationship to lipoprotein lipase. *J Clin Invest* 95:2111–2119
 51. Saghizadeh M, Ong JM, Garvey WT, Henry RR, Kern PA 1996 The expression of TNF α by human muscle: relationship to insulin resistance. *J Clin Invest* 97:1111–1116
 52. Katsuki A, Sumida Y, Murashima S, Murata K, Takarada Y, Ito K, Fujii M, Tsuchihashi K, Goto H, Nakatani K, Yano Y 1998 Serum levels of tumor necrosis factor- α are increased in obese patients with non insulin-dependent diabetes mellitus. *J Clin Endocrinol Metab* 83:859–862
 53. Escher G, Galli I, Vishwanath BS, Frey BM, Frey FJ 1997 Tumor necrosis factor α and interleukin 1 β enhance the cortisone/cortisol shuttle. *J Exp Med* 186:189–198
 54. Tomlinson JW, Moore J, Cooper MS, Bujalska I, Shahmanesh M, Burt C, Strain A, Hewison M, Stewart PM 2001 Regulation of expression of 11 β -hydroxysteroid dehydrogenase type 1 in adipose tissue: tissue specific induction by cytokines. *Endocrinology* 142:1982–1989
 55. Thieringer R, Le Grand CB, Carbin L, Cai T-Q, Wong B, Wright SD 2001 11 β -Hydroxysteroid dehydrogenase is induced in human monocytes upon differentiation to macrophages. *J Immunol* 167:30–35
 56. Cooper MS, Bujalska I, Rabbitt E, Walker EA, Bland R, Sheppard MC, Hewison M, Stewart PM 2001 Modulation of 11 β -hydroxysteroid dehydrogenase isozymes by proinflammatory cytokines in osteoblasts: an autocrine switch from glucocorticoid inactivation to activation. *J Bone Miner Res* 16:1037–1044
 57. Zhang HH, Kumar S, Barnett AH, Eggo MC 2001 Dexamethasone inhibits tumor necrosis factor- α -induced apoptosis and interleukin-1 β release in hu-

- man subcutaneous adipocytes and preadipocytes. *J Clin Endocrinol Metab* 86:2817–2825
58. **Coppack SW** 2001 Pro-inflammatory cytokines and adipose tissue. *Proc Nutr Soc* 60:349–356
59. **Feingold KR, Doerrler W, Dinarello CA, Fiers W, Grunfeld C** 1992 Stimulation of lipolysis in cultured fat cells by tumor necrosis factor, interleukin-1 and interferons is blocked by inhibition of prostaglandin synthesis. *Endocrinology* 134:2581–2588
60. **Petruschke T, Hauner H** 1993 Tumor necrosis factor- α prevents the differentiation of human adipocyte precursor cells and causes delipidation of newly developed fat cells. *J Clin Endocrinol Metab* 76:742–747
61. **Prins JB, Niesler CU, Winterford CM, Bright NA, Siddle K, O'Rahilly S, Walker NI, Cameron DP** 1997 Tumor necrosis factor- α induces apoptosis of human adipose cells. *Diabetes* 46:1939–1944
62. **Hadri KE, Courlton A, Gauthereau X, Chambaut-Guerin AM, Pairault J, Feve B** 1997 Differential regulation by tumor necrosis factor- α of β -1, β -2 and β -3 adrenoreceptor gene expression in 3T3-F442A adipocytes. *J Biol Chem* 272:24514–24521
63. **Lafontan M** 1994 Differential recruitment and differential regulation by physiological amines of fat cell β -1, β -2 and β -3 adrenergic receptors expressed in native fat cells and in transfected cell lines. *Cell Signal* 6:363–392
64. **Atgie C, D'Allaire F, Bukowiecki LJ** 1997 Role of β -3 adrenoreceptors in the regulation of lipolysis and thermogenesis in rat brown adipocytes. *Am J Physiol* 273:C1136–C1142
65. **Krief S, Lonnqvist F, Raimbault S, Baude B, Van Spronsen A, Arner P, Strosberg AD, Ricquier D, Emorine LJ** 1993 Tissue distribution of β 3-adrenergic receptor mRNA in man. *J Clin Invest* 91:344–349
66. **Tavernier G, Barbe P, Galitzky J, Berlan M, Caput D, Lafontan M, Langin D** 1996 Expression of β 3-adrenoreceptors with low lipolytic action in human subcutaneous white adipocytes. *J Lipid Res* 37:87–89