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糖尿病大鼠 ghrelin 和 nesfatin-1 表达动力学及其调控 *

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摘要 目的:探讨 STZ 诱导糖尿病大鼠 ghrelin 和 nesfatin-1 动力学及分泌调节变化。**方法:**STZ 诱导糖尿病大鼠模型;采用葡萄糖脱氢酶分析法测量血浆葡萄糖水平;免疫放射分析检测血浆 ghrelin、nesfatin-1、胰岛素、胰岛素样生长因子 1(IGF-1)、生长激素(GH)含量;采用 real-time PCR 检测 ghrelin mRNA 水平变化;免疫组化观察 ghrelin 和 nesfatin-1 免疫活性细胞数量。**结果:**糖尿病大鼠体重显著降低($t=23.16, P<0.01$),血糖水平显著升高($t=22.55, P<0.01$),血浆胰岛素和 IGF-1 水平显著降低($t=6.50, t=24.13, P<0.01$),但 GH 水平显著升高($t=3.30, P<0.05$)。糖尿病大鼠血浆总 ghrelin($t=7.03, P<0.01$)和活性 ghrelin($t=3.33, P<0.05$)水平均显著升高,血浆 nesfatin-1 水平则显著降低($t=6.24, P<0.01$);糖尿病大鼠血浆总 ghrelin 与 GH($r=0.81, P<0.01$)和 IGF-1 水平($r=-0.58, P<0.01$)呈显著相关性;与对照组大鼠相比,糖尿病大鼠胃总 ghrelin($t=16.86, P<0.01$)和活性 ghrelin($t=3.30, P<0.05$)水平均显著降低;而胃 nesfatin-1($t=7.93, P<0.01$)水平则显著升高。胃总 ghrelin 水平与血浆 IGF-1 水平呈明显相关性($r=0.65, P<0.01$);与对照组大鼠相比,糖尿病大鼠胃 ghrelin mRNA 表达水平显著升高($t=16.8, P<0.01$),胃底 ghrelin 免疫活性细胞数量显著减少($t=3.98, P<0.01$);实验中给予大鼠自由饮食,糖尿病大鼠血浆总 ghrelin 水平显著增加($t=7.53, P<0.01$),nesfatin-1 水平显著降低($t=5.46, P<0.01$)。糖尿病大鼠注射胰岛素后,可使增加的 ghrelin 水平($t=1.76, P=0.11$)和降低的 nesfatin-1 水平接近正常($t=1.96, P=0.06$);且胰岛素可显著反转糖尿病大鼠胃总 ghrelin($t=8.54, P<0.01$)和 nesfatin-1 水平($t=2.42, P<0.05$);以及注射胰岛素后,糖尿病大鼠胃底 ghrelin 细胞显著增加,nesfatin-1 细胞明显减少($t=3.21, t=2.59, P<0.05$)。**结论:**Ghrelin 或 nesfatin-1 参与糖尿病大鼠能量平衡调控。

关键词:Ghrelin;Nesfatin-1;糖尿病;胃;生长激素

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Dynamics Expression and Regulation of Ghrelin and Nesfatin-1 in Diabetic Rats*

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ABSTRACT Objective: To study the changes of ghrelin and nesfatin-1 dynamics and secretory regulation in rats with STZ-induced diabetes. **Methods:** Diabetes was induced by intraperitoneal injection of streptozotocin (STZ). Serum glucose were measured by the glucose dehydrogenase, while the levels of ghrelin, nesfatin-1, insulin, IGF-1 and GH were detected by RIA. Preproghrelin mRNA level was tested using real-time RT-PCR and the ghrelin and nesfatin-1-immunoreactive cells were observed using immunohistochemistry. **Results:** The weight of diabetic rats decreased significantly ($t=23.16, P<0.01$), the glucose was increased significantly ($t=22.55, P<0.01$), plasma insulin and IGF-1 level was decreased significantly ($t=6.50, t=24.13, P<0.01$), but the GH level was increased significantly ($t=3.30, P<0.05$). The level of total ($t=7.03, P<0.01$) and active ($t=3.33, P<0.05$) plasma ghrelin of the diabetic rats was increased significantly, while the plasma nesfatin-1 level was decreased ($t=6.24, P<0.01$), compared with that of the control group. The total plasma ghrelin level of the diabetic rats correlated significantly with their serum GH level ($r=0.81, P<0.01$) and with their serum IGF-1 level ($r=-0.58, P<0.01$). The gastric total ($t=16.86, P<0.01$) and active ($t=3.30, P<0.05$) ghrelin level of the diabetic rats was decreased significantly, while the gastric nesfatin-1 levels was increased($t=7.93, P<0.01$) compared with that in the control group, and their gastric total ghrelin level correlated significantly with their serum IGF-1 level ($r=0.65, P<0.01$). The preproghrelin mRNA expression in the stomach was increased significantly ($t=16.8, P<0.01$) in the diabetic rats compared with the control and the number of ghrelin-immunoreactive cells in the gastric fundus of the diabetic rats was decreased significantly ($t=3.98, P<0.01$). Giving rats free diet in the experiments, the total plasma ghrelin level in diabetic rats was increased significantly ($t=7.53, P<0.01$), nesfatin-1 level

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significantly reduced ($t=5.46, P<0.01$). After insulin injections, the increasing level of ghrelin ($t=1.76, P=0.11$) and reducing level of nesfatin-1 in diabetic rats was close to normal ($t=1.96, P=0.06$). Insulin significantly reversed the total gastric ghrelin ($t=8.54, P<0.01$) and nesfatin-1 level ($t=2.42, P<0.05$) of diabetes rats. After injection of insulin, ghrelin cells were increased significantly, while nesfatin-1 cells were decreased significantly ($t=3.21, t=2.59, P<0.05$) in stomach fundus of diabetic rats. **Conclusions:** Ghrelin or nesfatin-1 may participate in the regulation of energy balance in diabetic rats.

Key words: Ghrelin; Nesfatin-1; Diabetes; Stomach; Growth hormone

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前言

Ghrelin 是从人类和大鼠胃中分离的一种新型生长激素促分泌素^[1],在其第3位丝氨酸残基上有特异性N端辛酰基修饰,对ghrelin的生理特性至关重要。Ghrelin的主要生理功能是促进人类及啮齿类动物生长激素分泌,促进摄食^[2]及胃运动^[3]。负能量平衡状态比如饥饿或恶病质、神经性厌食症所致的低体重可使血浆ghrelin水平增加^[4-8]。许多组织可表达前体ghrelin mRNA^[9],其中胃底表达水平最高^[10]。Nesfatin-1是2006年发现的一种新型厌食肽^[11],在中枢、外周胃肠、胰岛等部位均有表达,具有减少摄食、抑制胃肠运动等作用。据报道胃底A样细胞可分泌ghrelin和nesfatin-1。

链脲佐菌素(STZ)是一种抗生素,可通过破坏胰腺胰岛内分泌细胞诱导糖尿病生成。STZ诱导糖尿病大鼠可出现体重降低、多食、血糖升高、低胰岛素血症^[12,13]。至今还没有报道STZ诱导胰岛素依赖型糖尿病大鼠ghrelin和nesfatin-1的动力学变化。本文应用免疫放射分析法(RIA)、实时酶联反应法(RT-PCR)及免疫组织化学技术等方法,探讨STZ诱导糖尿病大鼠ghrelin和nesfatin-1动力学及分泌调节变化。

1 材料和方法

1.1 实验动物

8周龄雄性Wistar大鼠45只,随机分为3组:对照组($n=15$),腹腔注射生理盐水;STZ诱导糖尿病大鼠组($n=15$),腹腔注射STZ(60 mg/kg)诱导糖尿病;胰岛素处理糖尿病大鼠组($n=15$),在注射STZ一周后给予皮下注射中性鱼精蛋白人胰岛素(7 U/只)。所有动物自由饮水和进食,4周后大鼠禁食16h,乙醚麻醉处死。分离大鼠胃、十二指肠和上端结肠,生理盐水冲洗。

1.2 血液及相关激素分析

采用葡萄糖脱氢酶分析法测量血浆葡萄糖水平,放射免疫分析(RIA)参照文献^[14,15]进行,检测血浆胰岛素、胰岛素样生长因子1(IGF-1)、生长激素(GH)以及血浆和胃组织ghrelin、nesfatin-1水平。

1.3 Real-time PCR

使用Tri-RNA试剂盒提取下丘脑组织总RNA,用1 μ g总RNA和寡核苷酸dT引物合成cDNA。cDNA与SYBR Premix Ex TaqII和特定引物混合,进行RT-PCR:95° C 3 s,60° C 30 s,50个循环。Ghrelin引物:5' -GGA ATC CAA GAA GCC ACC AGC-3' ; 5' -GCT CCT GACAGC TTG ATG CCA-3'。Ghrelin探针序列:5' -FAM-AAC TGC AGC CAC GAG CTC TGG AAG GC-TAMRA-3'。内源性对照GAPDH引物:5'

-TTC AAC GGC ACA GTC AAG GC-3' ; 5' -GCC TTC TCC ATG GTG GTG AAG-3'。GAPDH探针序列:5' -FAM-CCC ATC ACC ATC TTC CAG GAG CGA GA-TAMRA-3'。

1.4 免疫组织化学染色

组织样本用10%福尔马林固定,石蜡包埋,连续冠状切片,厚度为4-6 μ m。切片70°C加热10 min,之后依次浸泡于下述溶液中:二甲苯(5 min),96%乙醇(3 min),90%乙醇(3 min),双蒸水(3 min)。切片经nesfatin-1(1:2000,美国Phoenix公司)或ghrelin(1:10000,美国sigma公司)一抗孵育,4°C过夜^[11],磷酸盐缓冲液清洗后,用羊抗兔生物素Ig G孵育4°C过夜^[11]。切片经卵白素-生物素-过氧化物酶复合物着色10 min^[11],梯度乙醇溶液中脱水,苏木紫中性染色。光镜下观察。免疫活性细胞密度(D)用以下公式计算:

$$D=(Ng/Nt) \times 100\%$$

Ng:一定区域免疫活性细胞的数量;Nt:免疫活性细胞的总数量。

1.5 统计学分析

所有数据均用($\bar{x} \pm s$)表示,多组间均数比较采用单因素方差分析,两组间均数比较采用t检验,Real-time PCR结果分析采用 Δ Ct值表示,即检测待测基因cDNA进入PCR指数增长期的起始点即循环阈值(cycle threshold, Ct),以同一样本中神经肽和看家基因 β -actin之间的Ct差值(Δ Ct),即 Δ Ct=Ct_{ghrelin}-Ct _{β -actin}进行组间资料的t检验(Prism 3.0统计软件), $P<0.05$ 为差异有显著统计学意义。

2 结果

与对照组相比,糖尿病大鼠体重显著降低($t=23.16, P<0.01$;表1),糖尿病大鼠胃湿重与对照组大鼠比较无明显差异($t=0.68, P>0.05$)。血糖水平显著升高($t=22.55, P<0.01$),血浆胰岛素和IGF-1水平显著降低($t=6.50, t=24.13, P<0.01$),但GH水平显著升高($t=3.30, P<0.05$)。

与对照组大鼠相比,糖尿病大鼠血浆总ghrelin($t=7.03, P<0.01$)和活性ghrelin($t=3.13, P<0.05$)水平均显著升高,而nesfatin-1($t=6.24, P<0.01$)水平则显著降低(表2)。糖尿病大鼠血浆总ghrelin水平与GH水平($r=0.81, P<0.01$)和IGF-1水平($r=-0.58, P<0.01$)呈显著相关性(图1A,B)。与对照组大鼠相比,糖尿病大鼠胃总ghrelin($t=16.86, P<0.01$)和活性ghrelin($t=3.30, P<0.05$)含量均显著降低,而胃nesfatin-1含量则显著升高($t=7.93, P<0.01$,表2),胃总ghrelin水平与血浆IGF-1水平呈明显相关性($r=0.65, P<0.01$,图1C)。

表 1 糖尿病大鼠体重、血糖、胃湿重及血浆胰岛素和 GH 水平($\bar{x} \pm s$)

Table 1 The levels of body weight, gastric weight, serum glucose, serum insulin, serum IGF-1 and serum GH in STZ-induced diabetic rats($\bar{x} \pm s$)

	Body weight (g)	Gastric weight(mg)	Glucose (mg/dl)	Insulin (ng/mL)	GH (ng/mL)	IGF-1 (ng/mL)
Control	353.4± 16.0	2145.6± 81.2	136.5± 4.1	0.27± 0.08	6.63± 0.24	1478.6± 137.6
Diabetic	207.5± 12.2**	2160.5± 85.0	451.2± 41.5**	0.08± 0.05**	35.23± 13.24*	449.5± 32.5**

注: *P<0.05, **P<0.01, 与对照组相比。

Notes: *P<0.05, **P<0.01 vs. control group.

表 2 糖尿病大鼠血浆和胃组织 ghrelin 和 nesfatin-1 的表达($\bar{x} \pm s$)

Table 2 The level of plasma ghrelin, nesfatin-1 and gastric ghrelin, nesfatin-1 in STZ-induced diabetic rats($\bar{x} \pm s$)

Group	Total Ghrelin		Active Ghrelin		Nesfatin-1	
	Plasma (fmol/mL)	Gastric (fmol/mg)	Plasma (fmol/mL)	Gastric (fmol/mg)	Plasma (fmol/mL)	Gastric (fmol/mg)
Control (n=15)	615.2± 72.3	1758.8± 184.3	76.2± 25.6	337.5± 25.8	357.8± 53.1	1132.5± 96.5
Diabetic (n=15)	1123.4± 196.6**	1007.5± 195.2**	120.2± 38.5*	205.2± 36.5**	216.2± 48.3*	1385.5± 103.3*

注: *P<0.05, **P<0.01, 与对照组相比。

Notes: *P<0.05, **P<0.01 vs. control group.

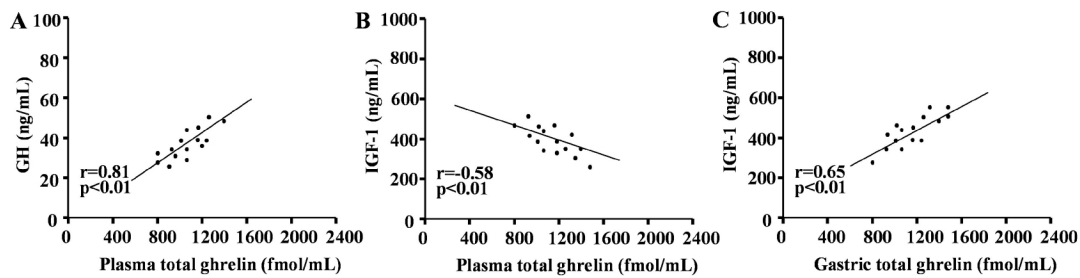


图 1 Ghrelin 与 GH, IGF-1 水平的相关性分析

Fig. 1 The correlation between ghrelin and GH, IGF-1

注: A: 血浆总 ghrelin 与 GH 水平的相关性分析; B: 血浆总 ghrelin 与 IGF-1 水平的相关性分析; C: 胃总 ghrelin 与 IGF-1 水平的相关性分析。

Note: A: The correlation between plasma total ghrelin and GH; B: The correlation between plasma total ghrelin and IGF-1; C: The correlation between gastric total ghrelin and IGF-1.

与对照组相比, 糖尿病大鼠胃 ghrelin mRNA 表达水平显著升高($t=16.8, P<0.01$; 图 2a), 但十二指肠和结肠 ghrelin mRNA 表达水平与对照组无显著差异($t=1.24, P>0.05$)。与对照组相比, 糖尿病大鼠胃底 ghrelin 免疫活性细胞数量显著减少($t=3.98, P<0.01$; 图 2b), 胃底 ghrelin 免疫活性细胞与细胞总数比例减小, 提示糖尿病大鼠胃非活性细胞增加, 但与对照组相比差异不明显($t=1.64, P=0.11$; 图 2c)

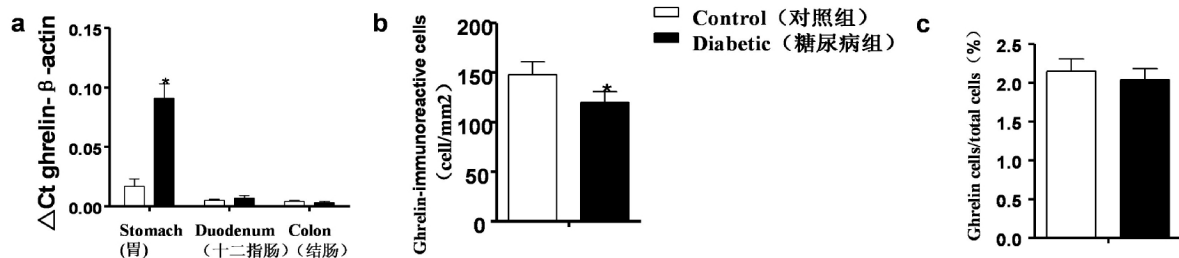


图 2 糖尿病大鼠 ghrelin mRNA 和 ghrelin 免疫反应细胞的表达

Fig. 2 The expression of preproghrelin mRNA and ghrelin-immunoreactive cells in STZ-induced diabetic rats

注: a: 胃、十二指肠和结肠中 ghrelin mRNA 的表达(ghrelin/β-actin); b: 糖尿病大鼠 ghrelin 免疫活性细胞数量;

c: 胃底 ghrelin 免疫活性细胞与细胞总数比例。*P<0.01, 与对照组相比

Note: a: the expression of ghrelin mRNA in stomach, duodenum and colon(ghrelin/β-actin); b: the number of ghrelin-immunoreactive cells of diabetic rats; c: the ratio of ghrelin-immunoreactive cells in total cells in fundus of stomach. *P<0.01 vs. control group.

实验中给予大鼠自由饮食, 糖尿病大鼠血浆总 ghrelin 水平显著增加 ($t=7.53, P<0.01$; 表 3), nesfatin-1 水平显著降低 ($t=5.46, P<0.01$)。胰岛素处理后可使增加的 ghrelin 水平降低接近正常 ($t=1.76, P=0.11$), 而使降低的 nesfatin-1 水平升高 ($t=1.96, P=0.06$)。与对照组相比, 糖尿病大鼠胃总 ghrelin 水平降低 ($t=5.14, P<0.01$), 而 nesfatin-1 水平显著升高 ($t=5.37, P<0.01$), 给予胰岛素可显著反转 ghrelin ($t=8.54, P<0.01$; 表 3) 和

nesfatin-1 水平 ($t=2.42, P<0.05$)。在正常大鼠、糖尿病大鼠和胰岛素处理糖尿病大鼠之间, 胃内活性 ghrelin 与总 ghrelin 的比率无显著差异 ($t=1.12, P>0.05$)。与正常大鼠比较, 糖尿病大鼠胃底 ghrelin 免疫活性细胞数显著减少 ($t=3.56, P<0.01$), nesfatin-1 免疫活性细胞数量明显增加 ($t=3.56, P<0.01$), 胰岛素处理后可显著改善这一状况 ($t=3.21, t=2.59, P<0.05$; 表 3)。

表 3 胰岛素对糖尿病大鼠 ghrelin 和 nesfatin-1 表达的影响 ($\bar{x} \pm s$)

Table 3 The effects of insulin on expression of ghrelin and nesfatin-1 in STZ-induced diabetic rats ($\bar{x} \pm s$)

Group	Plasma total ghrelin (fmol/mL)	Gastric total ghrelin (fmol/mg)	Ghrelin Cells (Cell/mm ²)	Plasma nesfatin-1 (fmol/mL)	Gastric nesfatin-1 (fmol/mg)	Nesfatin-1 Cells (Cell/mm ²)
Control (n=15)	492.1 $\pm$ 43.2	2238.1 $\pm$ 197.5	96.2 $\pm$ 12.5	275.5 $\pm$ 41.3	1252.3 $\pm$ 114.0	48.5 $\pm$ 9.6
Diabetic (n=15)	714.4 $\pm$ 58.4**	1652.1 $\pm$ 158.2**	61.7 $\pm$ 10.3**	182.6 $\pm$ 35.8**	1537.4 $\pm$ 123.1**	64.4 $\pm$ 11.3**
Diabetic+INS (n=15)	655.3 $\pm$ 52.5	2690.5 $\pm$ 204.5 [#]	108.2 $\pm$ 22.5 [#]	214.4 $\pm$ 38.6	1406.2 $\pm$ 119.2 [#]	50.1 $\pm$ 6.5

注: ** $P<0.01$, 与对照组相比; # $P<0.05$, ## $P<0.01$, 与糖尿病组相比。

Notes: ** $P<0.01$ vs. control group; # $P<0.05$, ## $P<0.01$ vs. diabetic group.

3 讨论

STZ 处理大鼠体重和血浆胰岛素水平显著降低, 血糖水平显著升高。这种观点与之前研究结果一致^[13], 提示本实验中 STZ 诱导糖尿病大鼠模型成功。大鼠给予外源性 ghrelin 可增加血浆 GH 水平^[16], STZ 诱导的糖尿病大鼠血浆 GH 水平与 ghrelin 水平有显著相关性, 与在恶病质和慢性心脏病中研究相符^[6]。STZ 诱导糖尿病大鼠研究结果显示, 血浆 ghrelin 水平升高, 胃 ghrelin mRNA 表达水平降低, 胃底 ghrelin 水平与 ghrelin 免疫活性细胞数量显著降低, 而血浆 nesfatin-1 水平显著降低, 胃 nesfatin-1 水平显著升高。有文献报道, 十二指肠有 ghrelin、ghrelin mRNA 表达, ghrelin 免疫活性细胞数量也较多^[11,17,18], 本研究显示结肠和十二指肠 ghrelin mRNA 表达水平无显著差异, 提示, ghrelin 主要在胃中产生。且有报道 nesfatin-1 在胃组织中的表达是脑的 10 倍。提示糖尿病大鼠胃内 ghrelin 水平降低, nesfatin-1 水平升高可能与血浆 ghrelin 水平的升高, nesfatin-1 水平的降低有重要关联。

Ghrelin 和 nesfatin-1 均可由胃 X/A 样细胞分泌^[19]。本研究发现, 胰岛素处理大鼠可逆转胃底 ghrelin 和 nesfatin-1 免疫活性细胞数量的改变, 提示胃 A 样细胞中 ghrelin 或 nesfatin-1 标记细胞数量改变, 而不是 A 样细胞分泌 ghrelin 或 nesfatin-1 变化。糖尿病大鼠血浆 ghrelin 水平升高, 胃 ghrelin 水平及 ghrelin 免疫活性细胞数量降低可能归因于胃 ghrelin 释放入血增多相关。糖尿病大鼠体重显著降低, 胰岛素处理后可逆转糖尿病大鼠 ghrelin 或 nesfatin-1 动力学改变, 这些改变可能导致负能量平衡, 如体重降低, 而不是直接逆转 STZ 对胃粘膜毒性作用。但对刺激肽类合成或分泌的信号通路机制还不清楚。

Ghrelin 是一种具有多重生理功能的脑肠肽, 研究显示, ghrelin 与 IGF-1 相似具有双重调控代谢和生长的作用^[20]。本研究结果发现, 血浆 IGF-1 水平与血浆和胃总 ghrelin 水平有显著相关性, 血浆 IGF-1 水平的降低可能参与这一调控机制。另

外, 负能量平衡状态可能引起胃 ghrelin mRNA 表达水平补偿性上调, 使 ghrelin 合成分泌增加。

总之, STZ 诱导糖尿病大鼠胃 ghrelin 分泌入血增加, 提示, 在 STZ 处理大鼠, 负能量平衡可能导致 ghrelin mRNA 水平上调, 从而刺激胃 ghrelin 前体细胞合成分泌 ghrelin, 而胃 nesfatin-1 水平升高可能与糖尿病胃轻瘫的发生发展有相关性。

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(上接第 1811 页)

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