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Inhibition of obesity through alterations of C/EBP- α gene expression by gum Arabic in mice with a high-fat feed diet

Abdelkareem A. Ahmed ^{a,b,c,*}, Hassan H. Musa^c, Mohammed Elmujtba Adam Essa^d, Adriano Mollica^e, Gokhan Zengin^f, Hussain Ahmad^g, Saber Y. Adam^h

^a Department of Animal and Veterinary Sciences, Botswana University of Agriculture and Natural Resources, Private, Bag 0027, Gaborone, Botswana

^b Department of Physiology and Biochemistry, Faculty of Veterinary Science, University of Nyala, Nyala, Sudan

^c Biomedical Research Institute, Darfur University College, Nyala, South Darfur State, Sudan

^d Department of Phytochemical and Herbal Medicine, Medical and Cancer Research Institute, Nyala, South Darfur State, Sudan

^e Department of Pharmacy, University "G. d'Annunzio" of Chieti-Pescara, 66100, Chieti, Italy

^f Department of Biology, Science Faculty, Selcuk University, Konya, Turkey

^g Faculty of Veterinary and Animal Sciences, Islamia University, Bahawalpur, Pakistan

h Department of One Health, Medical and Cancer Research Institute, Nyala, South Darfur State, Sudan

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ABSTRACT

Obesity is a metabolic disease associated with high morbidity and mortality worldwide. Previously we showed that Gum Arabic (GA) inhibited obesity in fed with diet-induced obesity. However, the mechanism underlying the mode of action is not fully elucidated. Here we aimed to identify the effects of GA on CCAAT-enhancerbinding protein- a (C/EBP- a) in mouse-fed diet-induced obesity. Thirty female CD-1 mice 90 days old were randomly divided into three groups (n=10). Mice were fed either a regular diet (control), a high-fat diet (HFD), or a high-fat diet containing 10% w/w GA (HFD+GA) for 15 weeks. Body weights, visceral adipose tissue (VAT), plasma lipid, blood glucose, plasma insulin, adiponectin, and leptin levels were measured. In addition, 11 β -hydroxysteroid dehydrogenase type 1 (11 β -HSD1) and C/EBP- α gene mRNA expressions were measured, and 11 β -HSD1 as well. Supplementation of GA significantly (P < 0.05) decreased body weight gain and VAT associated with decreases in blood glucose, total cholesterol LDL, and increased HDL concentrations. Likewise, administration of GA significantly (P < 0.05) decreased plasma Corticosterone (CORT) and leptin concentrations, whereas increased adiponectin compared to the control and HFD groups. In addition, GA administration significantly (P < 0.05) reduced the abundance of both hepatic 11β -HSD1 and C/EBP- α gene mRNA expression compared to the control and HFD groups. Supplementation of GA significantly (P < 0.05) down-regulated hepatic 11β-HSD1 protein expression compared to control and HFD groups. These findings indicate that GA consumption may be useful to prevent obesity through suppression of C/EBP- α gene expression.

1. Introduction

The occurrence of obesity is growing and resumes to be the main public health issue worldwide (James, 2018). Obesity forms the basis of the metabolic syndrome associated with dyslipidemia (Vekic, Zeljkovic, Stefanovic, Jelic-Ivanovic, & Spasojevic-Kalimanovska, 2019), insulin resistance (Noakes, 2018), type 2 diabetes (Leitner et al., 2017), heart disease (Carbone et al., 2019), hypertension (Leggio et al., 2017) and nonalcoholic fatty liver disease (Polyzos, Kountouras, & Mantzoros, 2019). Abdominal obesity is the main manifestation of metabolic syndrome which considered a fatal outcome of visceral obesity (Paley & Johnson, 2018). To understand the consequence of abdominal obesity and its role in development of metabolic syndrome is fundamental to understand the link between the diseases associated with this condition (L. Hu et al., 2017). The visceral fat reduction is vital to decrease the risk of metabolic diseases in this context (Myers, Kokkinos, & Nyelin, 2019; Nishizawa & Shimomura, 2019; Pi-Sunyer, 2019). Thus, it is essential to establish strategies for preventing obesity.

Glucocorticoids (GCs) are well-known to play a key role in the regulation of various biological activities, such as stress responses (Aerts, 2018), inflammatory responses (Liberman et al., 2018), immune response (Bereshchenko, Bruscoli, & Riccardi, 2018), energy balance

* Corresponding author at: Department of Physiology and Biochemistry, Faculty of Veterinary Science, University of Nyala, Nyala, 583, Sudan. *E-mail addresses:* kareemo151@gmail.com, aabdallah@buan.ac.bw (A.A. Ahmed).

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(Borba et al., 2017) and development of obesity (Woods et al., 2015). 11 β -hydroxysteroid dehydrogenase type 1 (11 β -HSD1) is the key GC metabolizing enzyme that regulates intracellular active GC's bioavailability through converting inactive GC to their active forms in vivo (Chapman, Holmes, & Seckl, 2013). The overexpression of 11β-HSD1 is fundamental in the development of metabolic syndrome (Li et al., 2017) and its related conditions including obesity (Stomby, Andrew, Walker, & Olsson, 2014), atherosclerosis (Hadoke, Kipari, Seckl, & Chapman, 2013), insulin resistance (Peng et al., 2016), type 2 diabetes millets (Shukla et al., 2019a) and nonalcoholic fatty liver disease (Candia et al., 2012). Downregulation of 11β-HSD1 contributes in resistant of metabolic syndrome (Harno et al., 2013). 11β-HSD1 inhibitors are found to improve lipid profile (G.-X. Hu et al., 2013), blood glucose (Shukla et al., 2019b) and improved adipose tissue functions (Rathinasabapathy et al., 2017). An adipose tissue selected inhibitor is also found to improve hepatic metabolism by decreasing phosphoenolpyruvate carboxykinase (Winnick et al., 2013) and increasing carnitine palmitoyltransferase I (Anagnostis et al., 2013) expression.

Leptin is an adipose tissue hormone that plays a vital role in body weight regulation (Xu & Xie, 2016) when produced and released from adipocytes into the bloodstream (D'Souza, Neumann, Glavas, & Kieffer, 2017). Leptin stimulates energy expenditure and inhibits food intake (Hussain & Khan, 2017). The central roles of leptin are regulation of body weight manifested by excessive obesity, which occurs both in mice and humans (Gruzdeva, Borodkina, Uchasova, Dyleva, & Barbarash, 2019). On the other hand, Adiponectin is the predominant peptide produced by adipocytes which play a fundamental role in obesity (Tumminia et al., 2019) and its related conditions such as type 2 diabetes (Y. Wang et al., 2018) and cardiovascular disease (Menzaghi & Trischitta, 2018). It's also secreted by other cell types (Barbe et al., 2019), such as cardiac myocytes (Woodward, Akoumianakis, & Antoniades, 2017), skeletal muscle (Krause, Milne, & Hawke, 2019) and endothelial cells (Sena, Pereira, Fernandes, Letra, & Seiça, 2017). Adiponectin influences are mediated via Adiponectin receptors (Karnati, Panigrahi, Li, Tweedie, & Greig, 2017). Adiponectin is well documented to increase insulin sensitivity in the liver and muscle (Ruan & Dong, 2016). It is ultimately regulates peripheral blood glucose (Yanai & Yoshida, 2019) and fatty acid metabolism (Stern, Rutkowski, & Scherer, 2016).

Dietary fibre (DF) is used to treat a wide variety spectrum of obesity associated conditions (Bozzetto et al., 2018). A diet containing high fat, in particular, Trans (TFAs) and saturated fatty acids (SFAs) plays a critical role in the development of metabolic syndrome (Sekar et al., 2017). In contrast, a diet containing polyunsaturated fatty acids offers protection against metabolic syndrome development (Khan & Jackson, 2018). Chronic feeding of saturated fatty acids increased hepatic 11β-HSD1 mRNA expression in rats (Vara Prasad, Jeya Kumar, Kumar, Qadri, & Vajreswari, 2010). Hepatic CCAAT-enhancer binding protein- α (C/EBP- α) is the main transcription factor required for 11 β -HSD1 mRNA expression found to increase by supplementation of TFAs and SFAs in the rat. The consumption of medicinal plants such as tea is reported to reduce 11β-HSD1 activity (Hintzpeter, Stapelfeld, Loerz, Martin, & Maser, 2014). About five compounds isolated from tea showed slight inhibitory effects on both human and mouse 11β-HSD1 activity (G. C. Wang et al., 2016).

Gum arabic (GA) (Fig. 1), is an edible dried sticky exudate from the stems and branches of *Acacia seyal* and *Acacia senegal* (Hammad & Mohammed, 2018) that is rich in non-viscous soluble fiber with 240–580 kDa of molecular weight (Mariod, 2018; Slavin, 2013). It is composed of six carbohydrate moieties (galactopyranose, arabinopyranose, arabinofuranose, rhamnopyranose, glucuropyranosyl uronic acid and 4-O methyl glucuropyranosyl uronic acid) and also contains a small proportion of proteins. The main chain is composed of 1,3-linked β D-galactopyranosyl units. These 1,3-linked β -D-galactopyranosyl units are composed of side chains linked to the main chain by 1,6-linkages. Both the main and side chains contain units of the carbohydrates

moieties presented before. The uronic acid moieties, mostly end-units, have been used widely in the food industry and pharmaceutical field medicine (B. H. Ali, Ziada, & Blunden, 2009). For decades, it has been used as an oral hygiene substance by several communities in North Africa and the Middle East (Al-Majed, Mostafa, Al-Rikabi, & Al-Shabanah, 2002; Badreldin H. Ali et al., 2013; Baien et al., 2020). The treatment of GA has been revealed to ameliorate some biochemical (Nemmar, Al-Salam, Beegam, Yuvaraju, & Ali, 2019), such as decreased total cholesterol (Mohamed, Gadour, & Adam, 2015), low-density lipoprotein (LDL), triglycerides (TG) (Kaddam, Fadl-Elmula, Eisawi, Abdelrazig, & Saeed, 2019), and blood glucose (Larson et al., 2021). Moreover, the administration of GA increased the quality of high-density lipoprotein (HDL) both in humans (Babiker, Elmusharaf, Keogh, & Saeed, 2018) and animal (Ahmed, Fedail, Musa, Musa, & Sifaldin, 2016). In addition, the treatment of GA has been reported to serve as a dietary fibre that and decrease body mass index (BMI) (Babiker et al., 2012), improves reduction of body fat deposition (Ushida, 2012), and serves as anti-obesity effects when supplemented with diet (Ahmed, Musa, Fedail, Sifaldin, & Musa, 2016). Previous studies have revealed that GA lowered caloric density and glucose absorption (Larson et al., 2021; Nasir et al., 2010). In our earlier report, we administrated the normal mice with 10% of GA in the form of drinking water. It decreased visceral adipose tissue, which was associated with the downregulation of hepatic 11β-HSD1 mRNA expression (Ahmed, Musa, Fedail, Sifaldin, & Musa, 2015). However, the mechanism of action through which GA decreased hepatic 11β-HSD1 mRNA expression remains unclear. In the present study, we used mice to test our hypotheses that GA may decrease 11β-HSD1 through hepatic C/EBP- α and the changes in C/EBP- α may be associated with plasma CORT concentrations.

2. Materials and methods

2.1. Experimental design and animal treatment

Thirty female CD-1 mice of 90 days old were purchased from the Sudanese National Research Center, Khartoum, Sudan and housed at the Department of Toxicology, Faculty of Veterinary Medicine, and the University of Khartoum in plastic cages (each containing 5 mice) in room kept at 25°C with a 12-h light and dark cycle. The mice were provided ad libitum access of a commercial diet and drinking water for at least 7 days of adaptation and throughout the experiment. After the adaptation period, mice were allocated into three groups. The control group (Control, n = 10) was fed a standard mouse diet, the high-fat diet group (HFD, n = 10) was fed high-fat diet, and the high-fat diet group was supplemented with 10% of Gum Arabic (GA) groups (HFD+GA, n = 10). GA was purchased from Khartoum Local Market, Sudan. The food was obtained from Jiangsu Province Cooperative Medical and Biological Engineering Co. Ltd (Shown in Table 1). The body weights were recorded during the experimental period. After 15 weeks, the blood samples were collected from the mice's orbital fossa in EDTA containing tubes. The plasma samples were separated via centrifugation for 15 min at 4 °C and stored at -80 °C until biochemical measurements. The mice were killed using a rapid decapitation protocol. Visceral adipose tissue (VAT) and liver samples were then dissected and weighed after being washed in cold phosphate buffer saline (pH 7.4). The liver and VAT tissue was stored at -80 °C until further investigations. The experimental procedures were done based on the Animal Ethics of the University of Khartoum.

2.2. Blood lipid profile and glucose

Blood glucose, plasma total cholesterol, triglycerides (TG), low density lipoprotein (LDL), very low-density lipoprotein (VLDL), and high-density lipoprotein (HDL) were measured using commercially assay kits (Nanjing Jiancheng Bioengineering Company, Nanjing, China), according to the manufacturers' instructions.



Control

HFD

HFD+Gum



Fig. 1. Chemical structure of Gum Arabic (A), the effect of GA treatments on visceral adipose tissue (B and C) and body weight (D). The values are the means ± SEM, n=10/group.

Table 1

Composition of experimental diets

Nutrient	High-fat	High-fat with Gum
Casein	25.8	25.8
L-Cystine	0.4	0.4
Cornstarch		
Maltodextrin	16.2	10.2
Sucrose	8.9	6.4
Cellulose	6.5	5.5
Soybean oil	3.2	3.2
Lard	31.17	31.17
Mineral mix1	1.3	1.3
Dicalcium phosphate	1.7	1.7
Calcium carbonate	0.7	0.7
Potassium citrate 1H20	2.1	2.1
Vitamin mix1	1.3	1.3
Choline bitartrate	0.3	0.3
Gum arabic		10
Total	100.0	100.5

2.3. Plasma CORT and insulin measurements

Plasma CORT concentration was determined using an enzyme immunoassay. CORT in 5 µl plasma and 195 µl water was extracted with 4 ml dichloromethane, re-dissolved in phosphate buffer, and triplicate in the enzyme immunoassay. The dilution of the CORT antibody (Chemicon, Temecula, CA, USA; cross-reactivity; 11-dehvdrocorticosterone 0.35%, progesterone 0.004%, 18-OH-DOC 0.01%, cortisol 0.12%, 18-OHB 0.02% and aldosterone 0.06%) was 1:8000. Horseradish peroxidase (1:400,000) linked to CORT served as the enzyme label and ABTS [2,2_-azino-bis (3-ethylbenzthiazoline-6-sulphonic acid)] as the substrate. The concentration of CORT in plasma samples was calculated by using a standard curve run in duplicate on each plate. Plasma pools from mice with two different CORT concentrations were included as internal controls on each plate. If the concentration was below the detection threshold, the determination was repeated with 10 µl plasma. If the concentration was still below the detection threshold, the value of the lowest detectable concentration (1ngml-1) was assigned. Intraassay variation ranged from 4.5 to 10.8% and inter-assay variation from 9.6 to 17.6%, depending on the concentration of the internal control and the vear of determination.

Plasma insulin levels were detected using an insulin radioimmunoassay (RIA) commercial kit. The samples were analyzed in a double assay format, and the intra-assay coefficient of variation was 1.4%.

2.4. Plasma Adiponectin and leptin concentrations

The leptin and adiponectin levels were measured using commercially available enzyme-linked immunosorbent assay (ELISA) commercial kits. Specifically, for adiponectin concentrations, the Alpco ELISA kit was used (Promega Corporation), and for leptin levels measurements, the R&D Systems ELISA kit was used. Insulin was quantified using the Mouse Insulin ELISA by ALPCO Diagnostics. The intraassay and interassay coefficients of variation were 5.3 and 7.2, respectively, for insulin and 4.3 and 7.8 for leptin.

2.5. Hepatic 11 β -HSD1 and C/EBP- α genes mRNA

2.5.1. Total RNA extraction

About 100 mg of liver were ground in liquid N_2 . According to the manufacturer's instruction, a portion of about 50 to 100 mg was used to extract RNA using TRIzol total RNA kit (Invitrogen, Biotechnology Co, Ltd, Carlsbad CA, USA). Total RNA concentration was then quantified by measuring the absorbance at 260 nm in a photometer (Eppendorf Biophotometer, Germany). Ratios of absorptions (260/280 nm) were between 1.8 and 2.0 for all preparations. Aliquots of each RNA sample were subjected to electrophoresis through a 1.4% agarose-formaldehyde

gel to verify their integrity. Total RNAs samples were treated with 10 U DNase I (Rnase Free, D2215, Takara, Japan) for 30 min at 37°C, and purified according to the manufacturer's protocol.

2.5.2. Reverse transcription

Two µg of total RNA was reverse transcribed by incubation at 37°C for 1 h in a 25 µL mixture consisting of $1 \times \text{RT-buffer}$ (Promega, USA), 100 U Moloney Murine Leukemia Virus reverse transcriptase (M-MLV) (Promega, USA), 8 U RNase inhibitor (Promega, USA), 5.3 µmol/L random hexamer primers (TaKaRa Biotechnology, China) and 0.8 mmol/L dNTP (TaKaRa Biotechnology, China). The reaction was terminated by heating at 95°C for 5 min and quickly cooling on ice. RT was performed in a Bio-Rad DNA Engine Peltier Thermal Cycler PTC0200 (Bio-Rad, USA).

2.5.3. Real-Time PCR

The primers for the reference gene were designed to span an intron, so any genomic DNA contamination can be reported easily with an extra product in the melting curves for real-time PCR. For hepatic 11β-HSD1 and C/EBP- α mRNA expression, real-time PCR was performed in Mx3000P (Stratagene, USA) according to the previous publication (Ahmed et al., 2015). Mock RT and No Template Controls were included to monitor the possible contamination of genomic and environmental DNA at both RT and PCR steps. The pooled sample made by mixing equal quantity of RT products (cDNA) from all samples was used for optimizing the PCR condition and tailoring the standard curves for each target gene. Melting curves were performed to insure a single specific PCR product for each gene. Two µL of 16-fold dilution of RT product was used for PCR in a final volume of 25 μL containing 12.5 μL SYBR Green Realtime PCR Master Mix (TOYOBO Ltd., Japan) and 0.2-0.8 µM of each forward and reverse primers for 11β -HSD1 and C/EBP- α (Table 3) were synthesized by Geneary (Shanghai, China). The PCR products were sequenced to validate the identity of the amplicons. Primers specific for A mouse GAPDH were used as a reference gene for normalization purposes. The method of $2^{-\Delta\Delta Ct}$ was used to analyze the real-time PCR data (Livak & Schmittgen, 2001). The mRNA abundances were presented as the fold change relative to the average level of the control group.

2.5.4. Hepatic 11β -HSD1 protein expression

About 50 mg of the liver samples were ground using liquid nitrogen and were homogenized in 300 μ L of ice-cold Radioimmunoprecipitation assay (RIPA) buffer 1x in phosphate saline buffer (PBS) (pH 7.5), 1% Nonidet P-40, 0.5% sodium deoxycholate, 0.1% Sodium Dodecyl sulphate (SDS), 3% aprotinin (was added before lysing), and 1% Phenylmethylsulfonyl fluoride (PMSF) / isopropanol (10 mg/mL, added before lysing)] using a tissue grinder (Polytron, Polytron PT1200E; Brinkman Instruments, Littau, Switzerland). After 30 min of incubation on the ice, the homogenate was centrifuged at 10,000xg for 20 min at 4°C to remove all insoluble material. 70% of the supernatant yield was collected, and the protein concentration was measured by the BCA assay (Pierce, Rockford, IL, USA) according to the manufacturer's direction.

15 μg of protein extract from each sample was mixed with loading buffer and denatured by boiling for 5 min before loading on a 12% SDS-PAGE gel. After electrophoretic transfer, the nitrocellulose membranes (BioTrace, Pall, USA) were cut to isolate the 11β-HSD1 band (32 kDa) and β-actin band (43 kDa) band according to the prestained SDSPAGE standards. After five times washing with TBST (Tris Buffered Saline with Tween) (0.1% Tween-20 in Tris-buffered saline), the blotted membranes were blocked with 5% skim milk in TBST for 2 h at 25°C. Followed by five times washing with TBST, the blots were then incubated with rabbit polyclonal antibody against 11β-HSD1 (Cayman Chemical Company, USA, diluted 1:200) and against β-actin (Cayman Chemical Company, USA, and diluted 1:10.000) at 4°C 18 hours. Then blots were washed five times with TBST and incubated with HRP-conjugated secondary antibody (Abcam, UK; 1:4000) for 2h at 25°C. Finally, the blots were washed and detected by enhanced chemiluminescence (ECL) using the LumiGlo substrate (Super Signal West Pico Trial Kit, Pierce, USA). The band density of 11 β -HSD1 was normalized by β -actin. ECL signals recorded on x-ray film were scanned and analyzed with Kodak 1D Electrophoresis Documentation and Analysis System 120 (Kodak Photo Film Co. Ltd., USA).

2.6. Statistical analysis

Descriptive statistics model was used for homogeneity and normality of variances check. Body weight, VAT, blood lipids profile, blood glucose, plasma CORT, plasma leptin, Adiponectin, and insulin, in addition to mRNA and protein expression were analyzed by one-way ANOVA using SPSS 21.0 for Windows 10, then followed by a least-significant difference (LSD) test for groups comparisons. A P-value \leq 0.05 was considered significant.

3. Results

3.1. Body weight and organs weight

The treatment of HFD significantly (P<0.01) increased VAT compared to control group, while treatment of GA significantly decreased the values of VAT in HFD+GA treated mice group (Fig. 1A and 1B). Similarly, the treatment of HFD significantly increased the mice body weight compared to the control group, while the administration of GA significantly (P<0.01) reduced mice body weight gain of HFD mice (Fig. 1C).

3.2. Plasma insulin and blood glucose

The treatment of HFD increased blood glucose levels when compared to the control. But the treatment of GA significantly (P<0.05) reduced concentrations of blood glucose compared to the control, and HFD treated mice groups (Fig. 2 A). Unlikely, supplementation of HFD increased plasma insulin concentrations compared to the control group, whereas the supplementation of GA significantly decreased insulin concentrations (Fig. 2 B).

3.3. Plasma corticosterone, adiponectin, and leptin concentrations

The treatment of HFD significantly increased plasma CORT concentrations compared to the control group. However, the supplementation of GA significantly (P<0.05) decreased plasma CORT levels compared to the control, and HFD treated mice groups (Fig. 2 C). Conversely, the treatment of HFD significantly (P<0.05) decreased plasma Adiponectin concentrations when compared to the control group, and HFD treated mice groups (Fig. 2D). However, the supplementation of GA significantly (P<0.05) decreased leptin concentrations compared to the control, and HFD treated mice groups (Fig. 2 E).

3.4. Plasma lipid profile

The intake of HFD significantly (P<0.05) increased plasma total cholesterol and LDL concentrations compared to control. Yet, GA administration significantly (P<0.05) decreased plasma total cholesterol and LDL concentrations. In contrast, the supplementation of GA significantly (P<0.05) increased HDL cholesterol concentration compared to the control, and HFD treated mice groups (Table 2).

3.5. Hepatic 11β -HSD1 and C/EBP- α genes mRNA and protein expression

Interestingly, the treatment of GA significantly down-regulated the



Fig. 2. Effect of GA treatments on blood glucose (A), plasma Insulin (B), plasma CORT (C), plasma Adiponectin (D), and plasma leptin (E). The values are the means \pm SEM, n=10/group. Bars with different letters are significantly different at p<0.05.

Table 2

Effect of GA treatments on blood lipid profile concentrations. Data were expressed as means \pm S.E.M. of 10 /group. Different letters in the rows indicate significantly different mean values at p<0.05.

Group	Triglyceride (mg/dL)	Total cholesterol (mg/dL)	HDL (mg/ dL)	LDL (mg/dL)	VLDL (mg/dL)
Control	40.7±3.15a	68.9±4.6 a	49.7 ±4.9 a	48.45 ±5.60a	8. 63 ±6.5a
HDF	39.1±3.7a	97.2±4.8 b	34.1 ±2.2 b	71.45 ±5.60b	13. 81 ±4.7a
HFD+GA	38.7±5.4a	71.2±5.5 a	54.9 ±9.3 a	39.71 ±5.12a	10.41 ±0.15a

Table 3

Primers sequences used for Real-time PCR

Target genes	Gene bank number	Product Size	Primer sequences
GAPDH	NM_008084.2	141	F: 5'- ACATGGTCTACATGTTCCAGTA-3' R: 5'-GGAGTCTACTGGTGTCTTCA- 3'
11β- HSD1	NM_008288.2	302	F: 5'-AGCAACCAGAGATAGGCAGC- 3' R: 5'-ACACCTCGCTTTTGCGTAGA- 3'
C/EBP-α	NM_00 1287521.1	178	F: 5'-AGACATCAGCGCCTACATCG- 3' R: 5'-CCGGTACTCGTTGCTGTTCT- 3'

11 β -HSD1 protein expression in the liver of mice fed with HFD compared to the control and HFD treated mice groups (Fig. 3C). The intake of HFD increased hepatic 11 β -HSD1 mRNA expression compared to the control group. However, the supplementation of GA significantly decreased hepatic 11 β -HSD1 mRNA expression compared to the HFD treated mice group (Fig. 3 A). Likewise, treatment of GA significantly decreased hepatic C/EBP- α mRNA expression compared to the HFD treated mice group (Fig. 3 B).

4. Discussion

Obesity is a global public health problem associated with high morbidity and mortality (Abdelaal, le Roux, & Docherty, 2017). Therapeutic approaches such as surgical operations (Jumbe, Hamlet, & Meyrick, 2017), uses of synthetic drugs (Wolfe, Kvach, & Eckel, 2016); ultimately cause adverse complications, health consequences with high economic costs (Tremmel, Gerdtham, Nilsson, & Saha, 2017). Several experimental studies confirmed the association between dietary fibre intake reduction in abdominal obesity (Pilolla, 2018), food intake (Fayet-Moore, Cassettari, Tuck, McConnell, & Petocz, 2018), body weight (Solah et al., 2017), cholesterol (Soliman, 2019) and blood glucose (McRae, 2018). Consistently, supplementation of Gum Arabic (GA) decreased body weight which was associated with reduction of abdominal visceral adipose tissue (VAT). The body weight reduction via GA may be based on the fact that dietary fibre consumption has potential health beneficial including satiety promotion (Dreher, 2018), cleric intake reduction (Adam, Thomson, Williams, & Ross, 2015), stomach hormone secretions (Hervik & Svihus, 2019), thus, could reduces weight. In addition, dietary fibre intake reported changing body composition (Solah et al., 2017).

Leptin, the hormone, a hunger biomarker produced by adipose tissue, communicates information about the organism's energy balance (Barateiro, Mahú, & Domingos, 2017; Rosenbaum & Leibel, 2014). Leptin circulating plasma levels are influenced by the nutritional status of the organism (Alwarawrah, Kiernan, & MacIver, 2018). Deregulations in leptin signaling pathway and biosynthesis have been associated with

obesity (Sánchez-Jiménez, Pérez-Pérez, de la Cruz-Merino, & Sánchez-Margalet, 2019). In the present study, the administration of GA decreased plasma leptin concentrations. These results are consistent with previous findings that revealed the consumption of cereal fibre reduced plasm leptin concentrations in mice fed with a high fat diet (Zhang et al., 2016). Several studies reported the effect of dietary fibre consumption on modulating of leptin secretion and its ameliorating effects on leptin resistance in mice (Acharya, Gao, Bless, Chen, & Tetel, 2019; H. Wang, Hong, Li, Zang, & Wu, 2018; Zhang et al., 2016). The majority of those reports based on circulating leptin levels suggest that fibre consumption ultimately has beneficial health effects by improving leptin resistance and sensitivity (Hong et al., 2016; Izadi, Saraf-Bank, & Azadbakht, 2014; Maziarz et al., 2017). However, the mechanism of action through which GA decreases leptin remains unclear. On the other hand, the administration of GA increased plasma Adiponectin concentrations associated with low blood leptin concentrations. The present findings agree with earlier studies that revealed the consumption of cereals dietary fibre increased serum adiponectin levels in mice fed a high-fat diet (Han et al., 2017). In addition, the consumption of fermentable fibre significantly increased plasma adiponectin concentrations in mice fed with high fat and sucrose diet (Jangra, K, Sharma, Pothuraju, & Mohanty, 2019). Yet, the mechanism underlying the increases of plasma adiponectin via dietary fibre, including GA requires further investigation, which will be our future exciting research direction.

Recent studies reported that the consumption of dietary fibre, including GA reduced plasma cholesterol (Soliman, 2019), triglyceride (Hannon et al., 2018) and, bad cholesterol, low-density lipoprotein (LDL) levels both in human and mice (Narayan et al., 2014; Yanai & Tada, 2018). In agreement with earlier publications, the treatment of GA decreases total cholesterol LDL, whereas it increases good cholesterol and HDL concentrations. The reduction in plasma lipid profile was associated with a reduction in blood glucose concentrations. Numerous modes of action have been pointed out to disclose the hypercholesterolemic effects of dietary fibre (McRae, 2017; Rideout, Harding, Jones, & Fan, 2008; Viuda-Martos et al., 2010). One potential elucidation is that dietary fibre increases the viscosity of the intestinal nutritional contents (Grundy et al., 2016; Jha, Fouhse, Tiwari, Li, & Willing, 2019); consequently it is interfering with nutrient absorption (Adams, Sello, Qin, Che, & Han, 2018) and micelle formation (Jesch & Carr, 2017), which in turn, decreases intestinal lipids absorption. Others mechanisms suggested is that the soluble dietary fibers serves through disrupting the bile acids formation (Naumann, Schweiggert-Weisz, Eglmeier, Haller, & Eisner, 2019) the entero-hepatic circulation, enhancing bile acid excretion (Dubey, Toh, & Yeh, 2018; Parnell & Reimer, 2010) and consequently decreases the plasma cholesterol concentrations (Babio, Balanza, Basulto, Bullo, & Salas-Salvado, 2010; Narayan et al., 2014). Furthermore, the viscosity prosperity of fermentable dietary fibres is reported to have significant effects on lowering cholesterol in the rat (Brockman, Chen, & Gallaher, 2014).

11 β -hydroxysteroid dehydrogenase type 1 (11 β -HSD1) an intracellular gate-keepers of tissue GCs action catalyses generation of active glucocorticoids (GCs), which plays a vital role is initiation of abdominal fat deposition (Galitzky & Bouloumié, 2013). CCAAT-enhancer binding protein- α (C/EBP- α) (Sai et al., 2008), the main transcription factor required for the expression of 11 β -HSD1 mRNA expression plays a critical role in the induction of obesity via influences on 11 β -HSD1 mRNA transcription (Ren et al., 2014). Here we presented the first finding revealing that the administration of GA downregulated hepatic C/EBP- α mRNA expression is associated with downregulation of hepatic 11 β -HSD1 mRNA expression in mice. Moreover, downregulation of hepatic 11 β -HSD1 protein expression. Interestingly, the downregulation of 11 β -HSD1 and its transcriptional enhancer C/EBP- α were associated with a reduction of plasma corticosterone (CORT) concentrations.



Fig. 3. Effect of GA treatments on hepatic 11 β HSD1 (A) and C/EBP- α (B) mRNA expression and hepatic C/EBP- α protein expression (C). The values are the means \pm SEM, n=10/group. Bars with different letters are significantly different at P<0.05.

5. Conclusion

expression.

In conclusion, the administration of GA reduced body weight and abdominal VAT deposition in female mice associated with the reduction of plasma CORT and downregulation of C/EBP- α and 11 β -HSD1 mRNA and protein expression. Thus, GA may have a future perspective of their review to suppress obesity by suppressing C/EBP- α gene mRNA

Declaration of Competing Interest

All authors declare that there is no conflict of interest.

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