



SCHOOL OF PUBLIC HEALTH
Department of Nutrition



Branched-chain and aromatic amino acids and T2D in the PREDIMED Study

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Outline

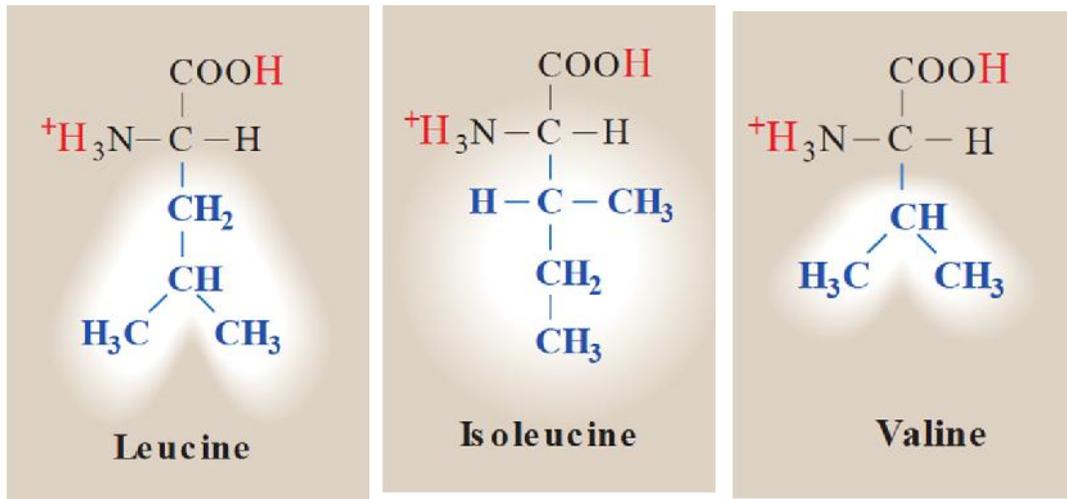
1.Introduction

2.Methods

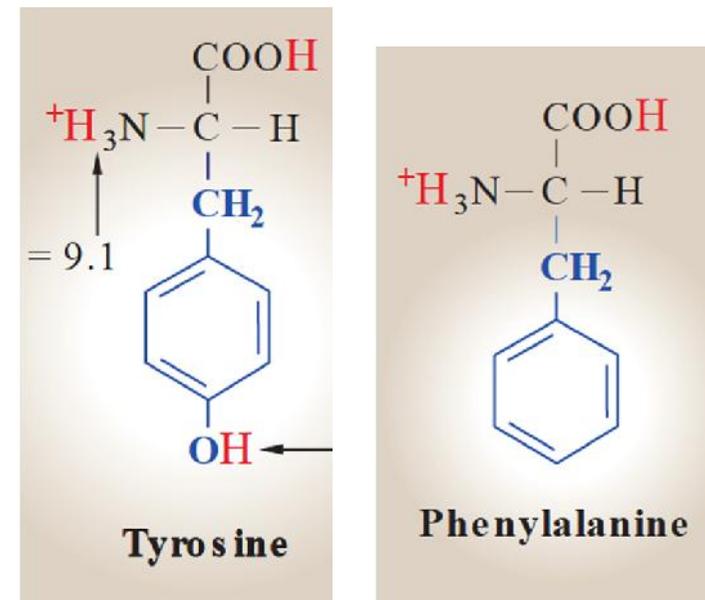
3.Results

4.Discussion/Conclusion

Branched-chain amino acids (BCAA)



Aromatic Amino Acids (AAAs)



Background

Methods

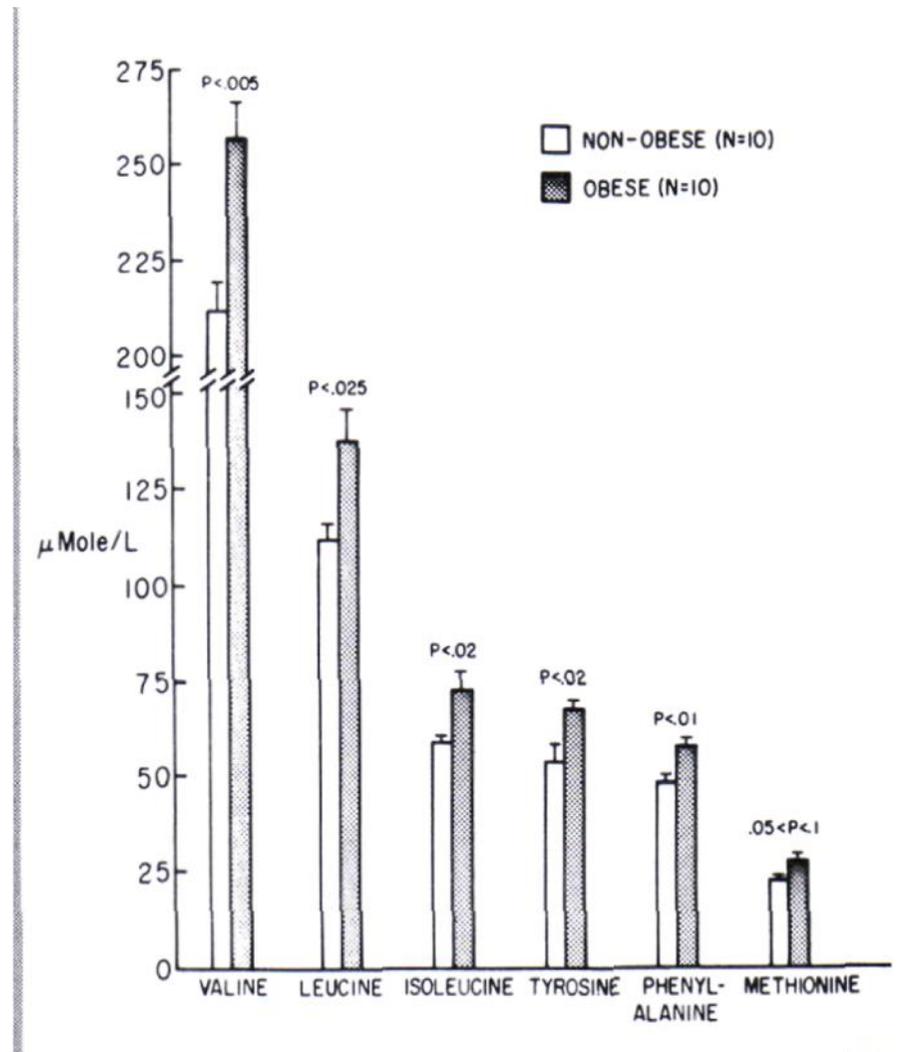
Results

Discussion/Conclusion

Plasma Amino Acid Levels and Insulin Secretion in Obesity

Philip Felig, M.D., Errol Marliss, M.D., and George F. Cahill, Jr., M.D.

N Engl J Med 1969; 281:811-816 | [October 9, 1969](#) | DOI: 10.1056/NEJM196910092811503



Background

Methods

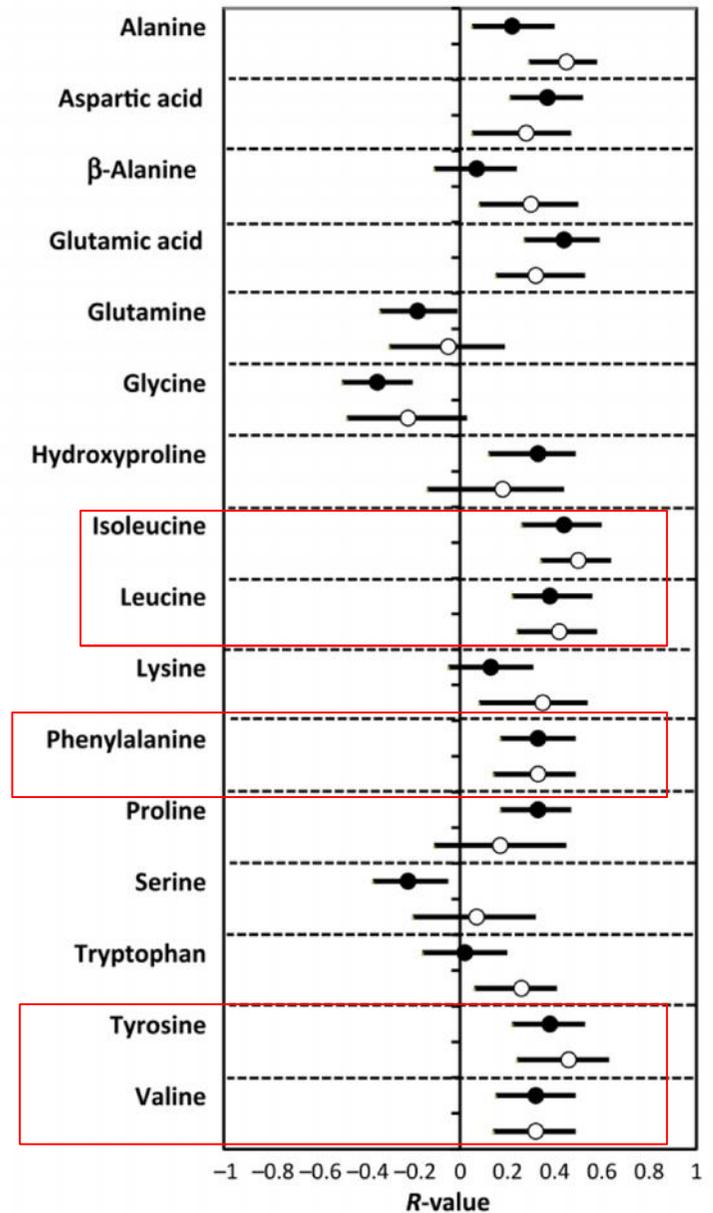
Results

Discussion/Conclusion

Relationship between insulin resistance and amino acids in women and men

Ryan Seibert¹, Fahim Abbasi¹, Feras M. Hantash², Michael P. Caulfield², Gerald Reaven¹ & Sun H. Kim¹

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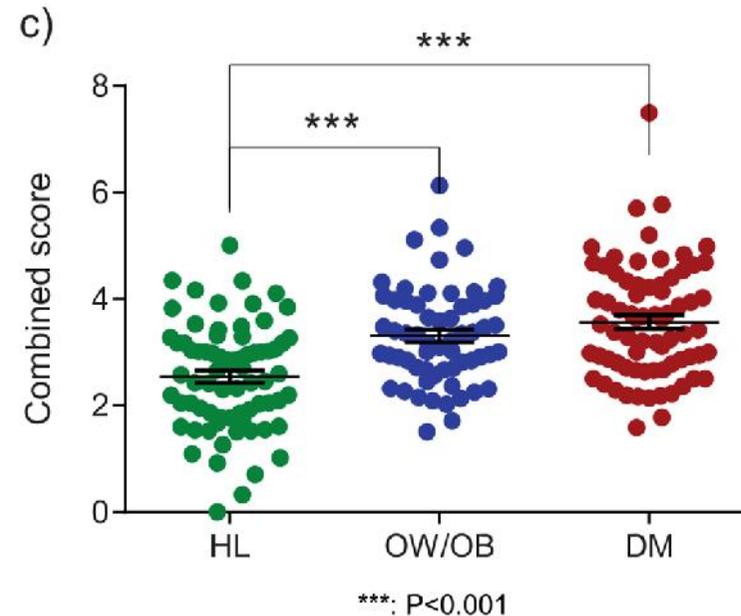
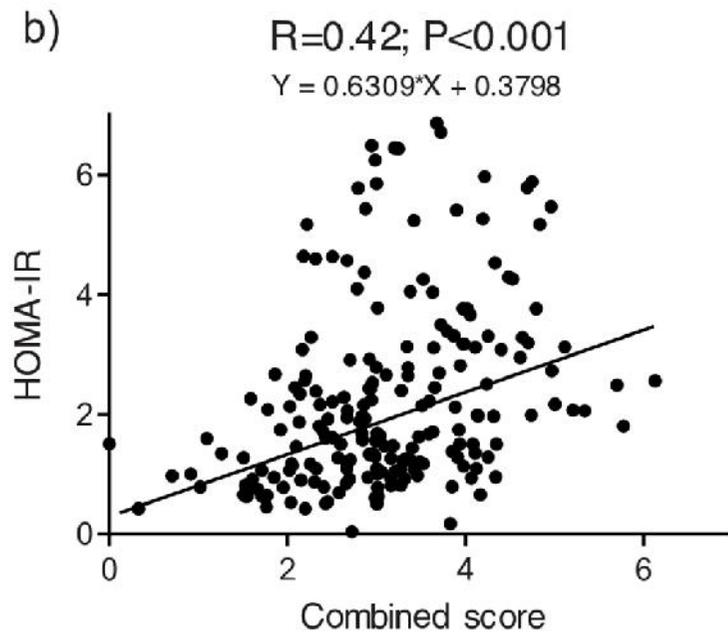
Background

Methods

Results

Discussion/Conclusion

Branched-chain and aromatic amino acid profiles and diabetes risk in Chinese populations



Background

Methods

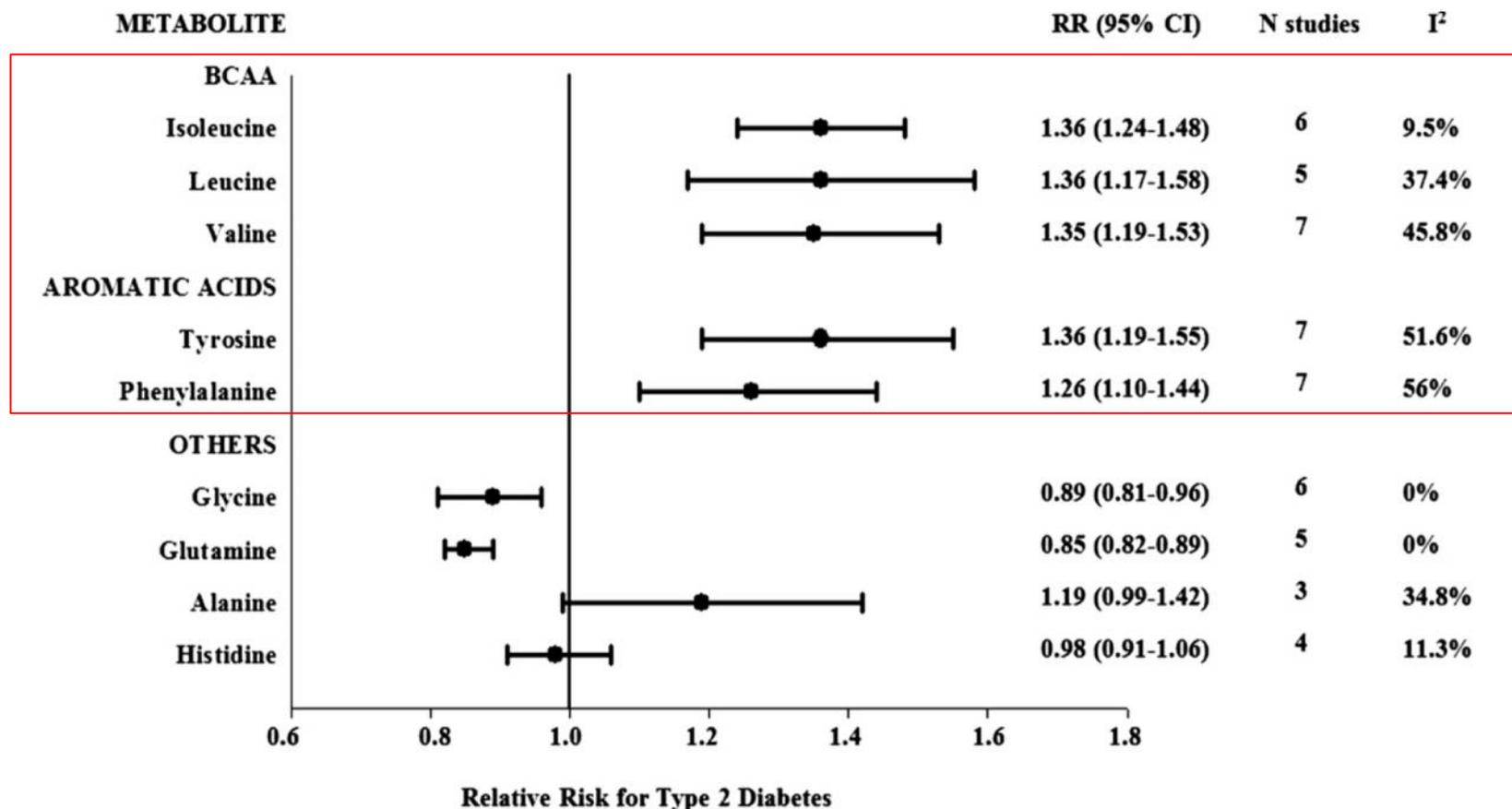
Results

Discussion/Conclusion

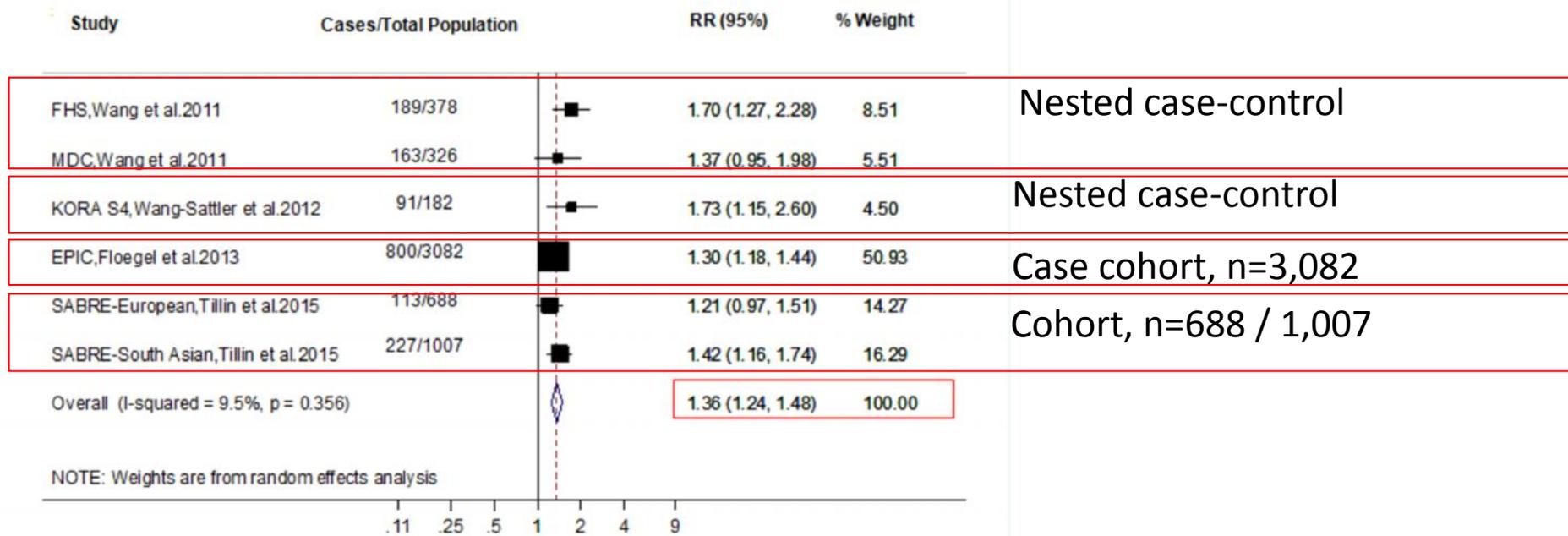
Metabolomics in Prediabetes and Diabetes: A Systematic Review and Meta-analysis

Marta Guasch-Ferré,^{1,2,3} Adela Hruby,¹
 Estefanía Toledo,^{3,4} Clary B. Clish,⁵
 Miguel A. Martínez-González,^{3,4}
 Jordi Salas-Salvadó,^{2,3} and Frank B. Hu^{1,6,7}

Diabetes Care 2016;39:833–846 | DOI: 10.2337/dc15-2251



Isoleucine



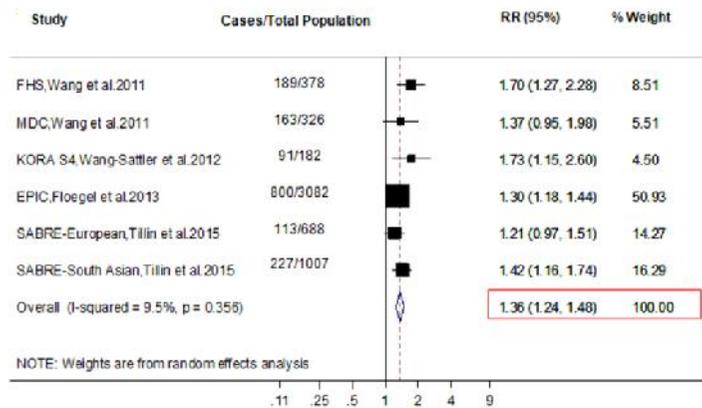
Background

Methods

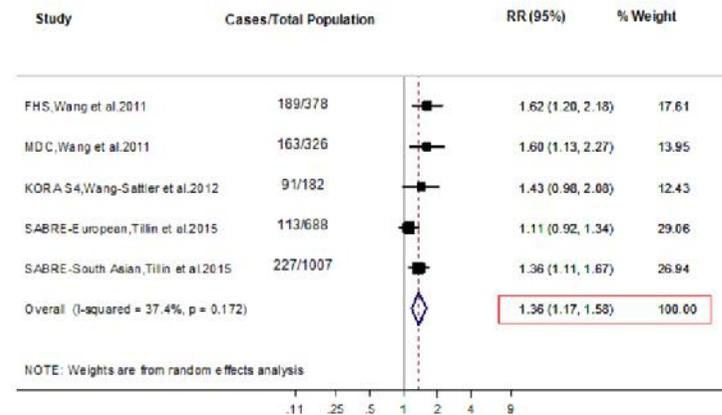
Results

Discussion/Conclusion

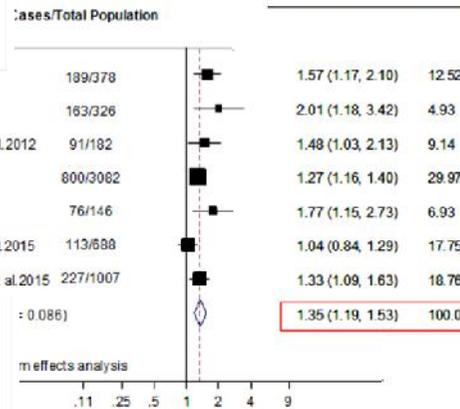
Isoleucine



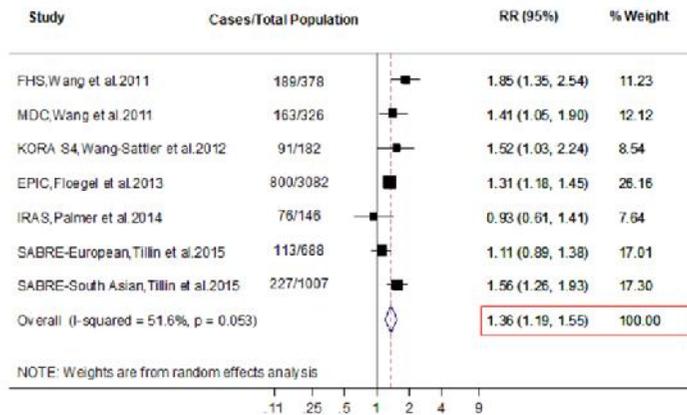
Leucine



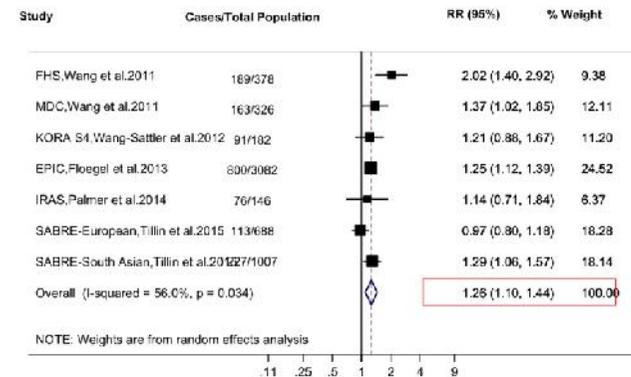
Valine



Tyrosine



Phenylalanine



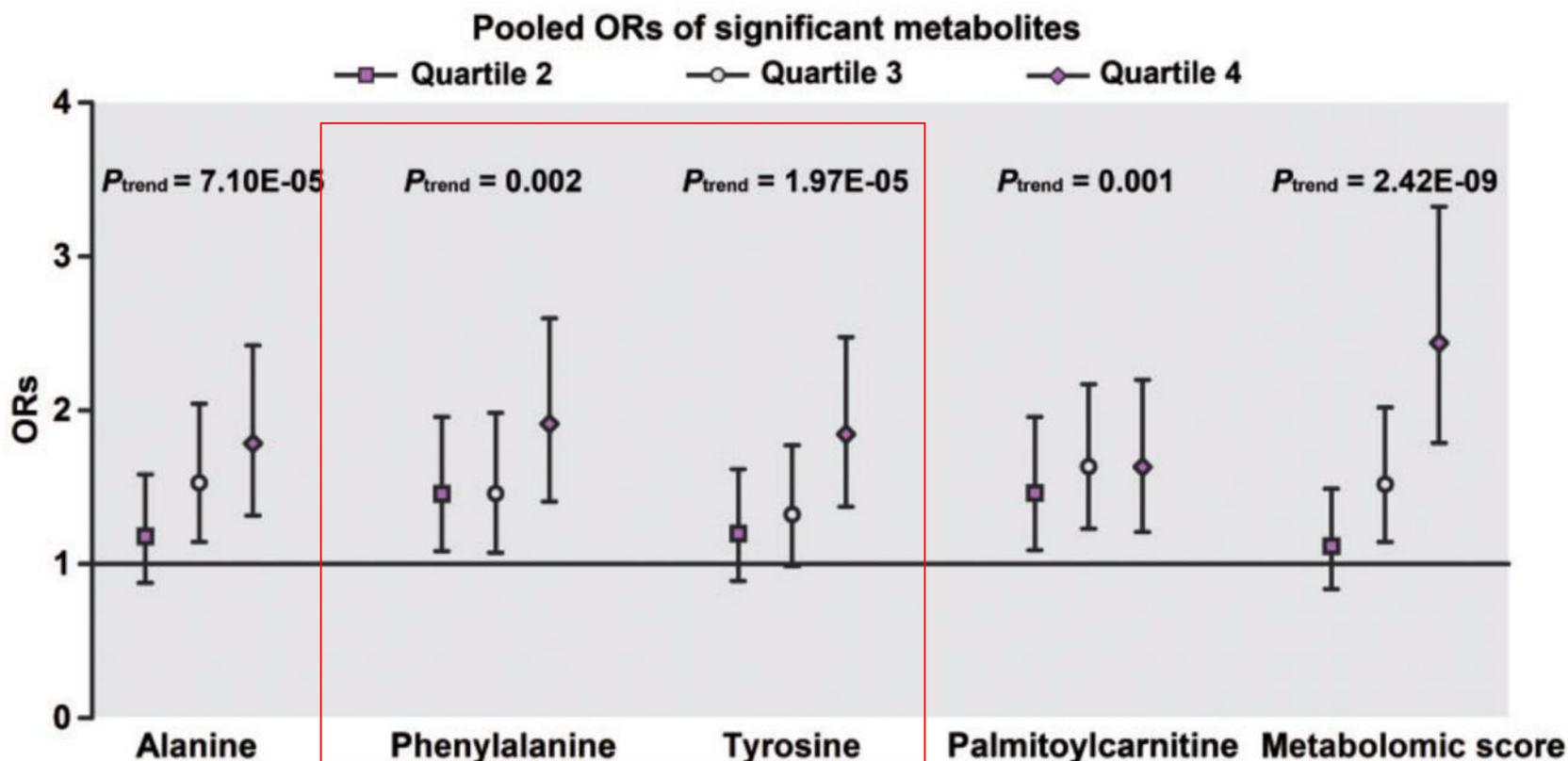
Background

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Plasma metabolomics identified novel metabolites associated with risk of type 2 diabetes in two prospective cohorts of Chinese adults



Background

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Metabolic signatures and risk of type 2 diabetes in a Chinese population: an untargeted metabolomics study using both LC-MS and GC-MS

Metabolite	Chemical class	Compound ID		VIP	<i>p</i> value	Trend ^a	Association		AUC ^b	
		METLIN	HMDB				OR (95% CI)	FDR	Low	High
2-Aminooctanoic acid	Amino acid	5923	00991	1.39	0.003	Down	0.69 (0.51, 0.93)	0.016	0.733	0.779
Aminomalonic acid	Amino acid	58024	01147	3.50	<0.001	Up	2.03 (1.48, 2.78)	<0.001	0.733	0.808
Glycine	Amino acid	20	00123	3.67	<0.001	Up	2.66 (1.72, 4.12)	<0.001	0.731	0.798
Isoleucine	Amino acid	23	00172	1.50	0.002	Up	1.44 (1.07, 1.93)	0.015	0.725	0.768
Leucine	Amino acid	24	00687	1.50	0.002	Up	1.44 (1.07, 1.93)	0.015	0.725	0.768
Ornithine	Amino acid	27	00214	1.20	0.001	Down	0.63 (0.45, 0.88)	0.007	0.738	0.783
Phosphoserine	Amino acid	297	00272	1.71	0.033	Down	0.74 (0.57, 0.96)	0.023	0.748	0.771
Proline	Amino acid	29	00162	5.54	<0.001	Down	0.44 (0.30, 0.66)	<0.001	0.728	0.850
Serine	Amino acid	30	00187	1.32	0.013	Down	0.68 (0.48, 0.94)	0.022	0.743	0.765
Threonine	Amino acid	32	00167	1.80	<0.001	Up	1.53 (1.16, 2.02)	0.003	0.732	0.780
Valine	Amino acid	35	00883	1.78	<0.001	Up	1.66 (1.21, 2.26)	0.001	0.731	0.766

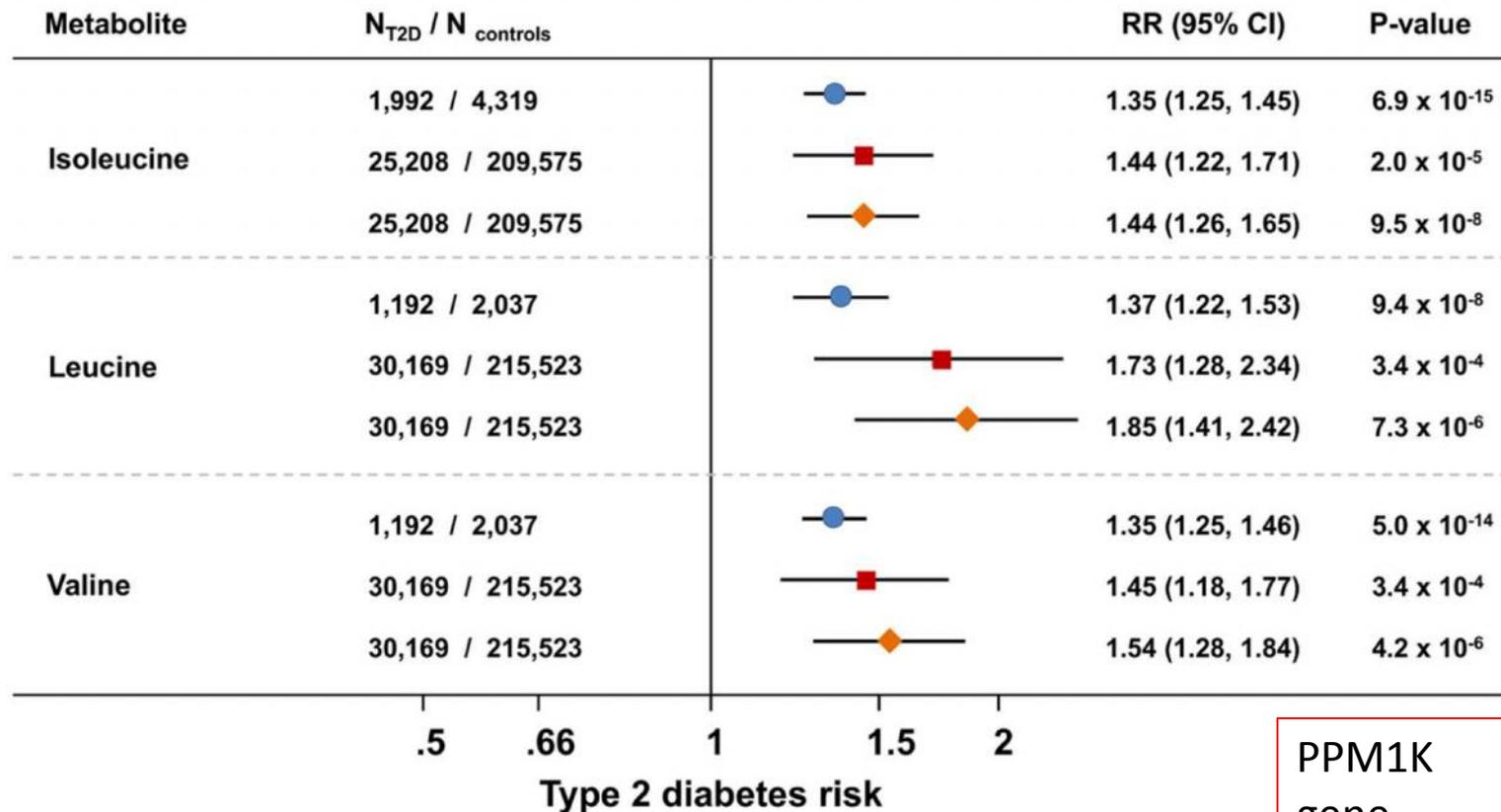
Background

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Genetic Predisposition to an Impaired Metabolism of the Branched-Chain Amino Acids and Risk of Type 2 Diabetes: A Mendelian Randomisation Analysis



OR of type 2 diabetes per 1 SD genetically-predicted increase in metabolite levels from *Mendelian randomisation using independent genetic variants*



Limitations in previous studies

- Did not use repeated measurements over time of these amino-acids
- No evaluation about how dietary interventions can influence changes in the levels of these plasma amino-acids and the risk of disease

Background

Methods

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Hypotheses

- 1) **Baseline plasma** levels of **BCAA and AA** are directly associated with a higher subsequent risk of developing **T2D**;
- 2) **1-year changes** in the plasma levels of these amino-acids are associated with a higher subsequent risk of developing T2D;
- 3) An intervention with a **Mediterranean diet** can attenuate the direct association between **baseline plasma levels** of these amino-acids and the risk of developing T2D;
- 4) A **Mediterranean diet** intervention **during one year time** is able to reduce the plasma levels of these amino-acids.

Background

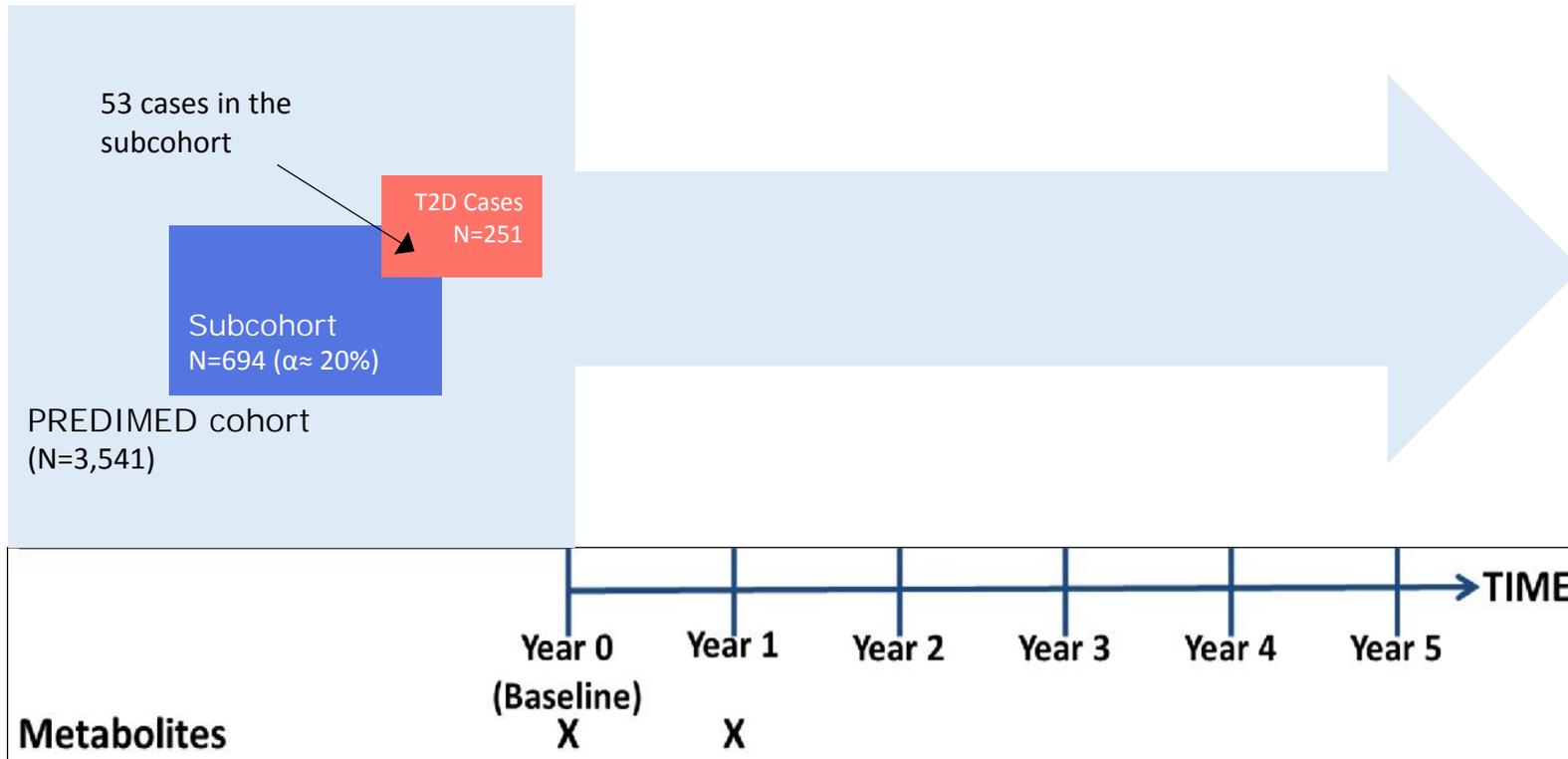
Methods

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DESIGN

Case-cohort study



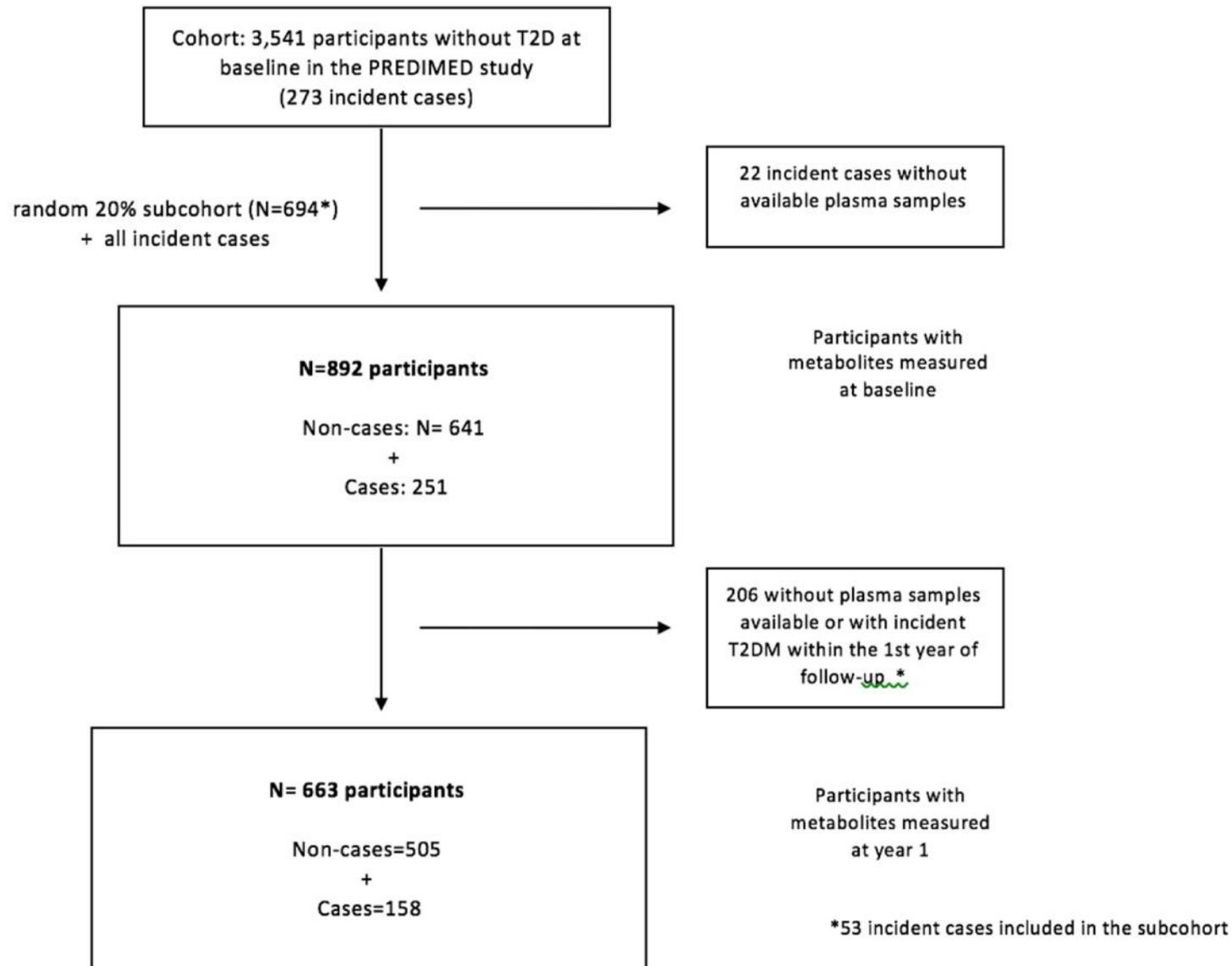
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Flow-chart of the case-cohort design



Background

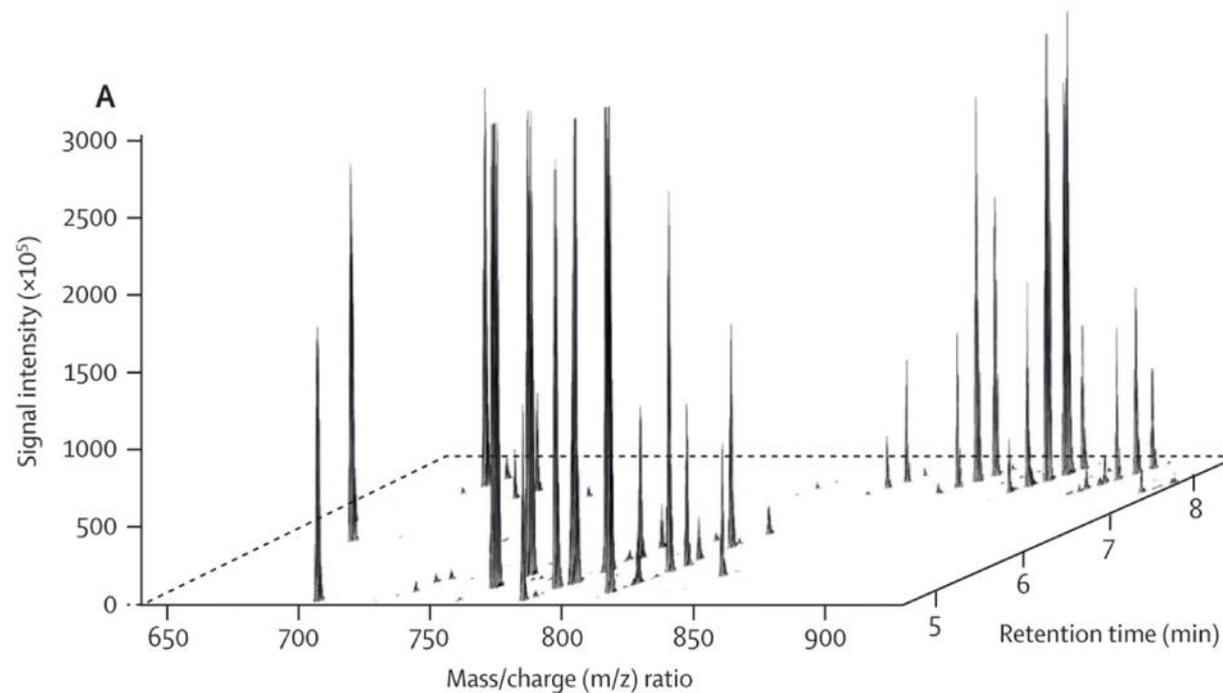
Methods

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Discussion/Conclusion

Metabolomic analysis

- Blood samples in EDTA tubes: from Spain to Boston
- Metabolite profiling of 137 metabolites:
- hydrophilic interaction liquid chromatography (HILIC)-positive with tandem Mass Spectrometry (Broad Institute)



Background

Methods

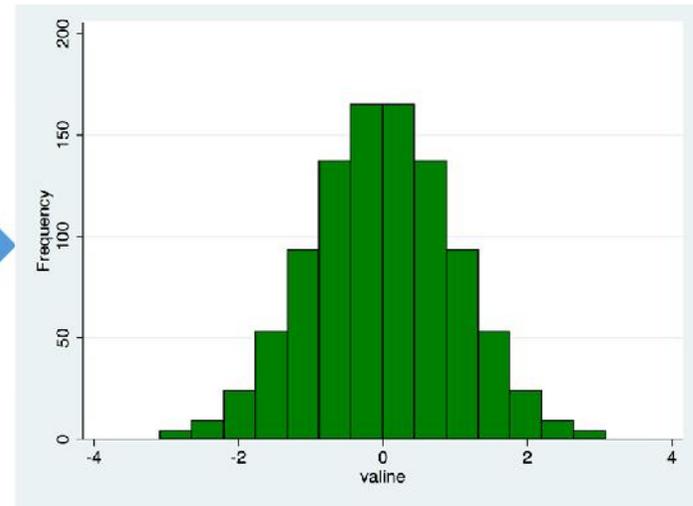
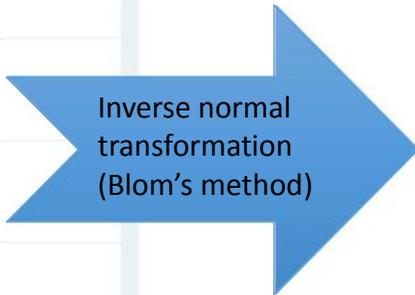
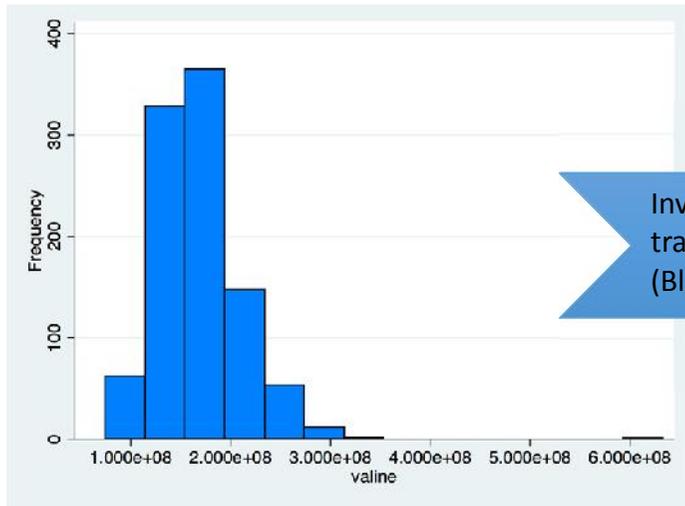
Results

Discussion/Conclusion

Individual AAs and scores

Leucine, isoleucine, valine
Phenylalanine, tyrosine
(signal intensity)

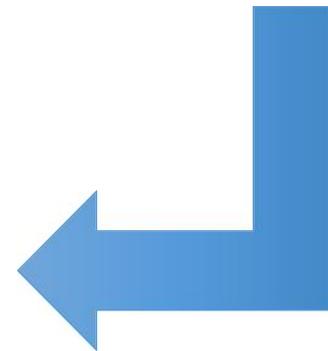
1



2

BCAA score: LEU + ISO + VAL

AAA score: PHE + TYR



Statistical analysis

- *Weighted Cox regression models (Barlow weights)*

Model 1: **age** (years), **sex** (male, female), **intervention group** (MedDiet+EVOO, MedDiet+nuts) (stratified by recruitment center)

Model 2: *Model 1* + **body mass index** (kg/m²), **smoking** (never, current, former), **leisure-time physical activity** (metabolic equivalent tasks in minutes/day), **dyslipidemia** and **hypertension**

Model 3: *Model 2* + **baseline fasting glucose** (mean + quadratic term of glucose centered mean)



Baseline participants characteristics

	Subcohort ^a	Cases
n	694	251
Age (years)	66.5 (5.7)	66.4 (5.7)
Sex (% women),	62.8	55.0
Intervention group, %		
MedDiet+EVOO	30.7	29.9
MedDiet+nuts	37.2	33.9
Control	32.1	36.3
Hypertension, %	90.8	96.0
Dyslipidemia, %	85.0	79.7
Smoking, %		
Never	61.0	52.6
Former	22.6	22.3
Current	16.4	25.1
Waist circumference, cm	99.0 (10.7)	103.4 (10.0)
Body mass index, kg/m ²	29.9 (3.6)	30.8 (3.3)
Physical activity, METs/d	238 (238)	249 (232)
Education, %		
Elementary or lower	75.4	76.5
Secondary or higher	24.6	23.5
Total energy intake, kcal/d	2277 (566)	2327 (622)
Mediterranean diet ^b	8.6 (1.9)	8.5 (1.8)
Glucose, mg/dl ^c	99.7 (15.2)	117.2 (17.6)

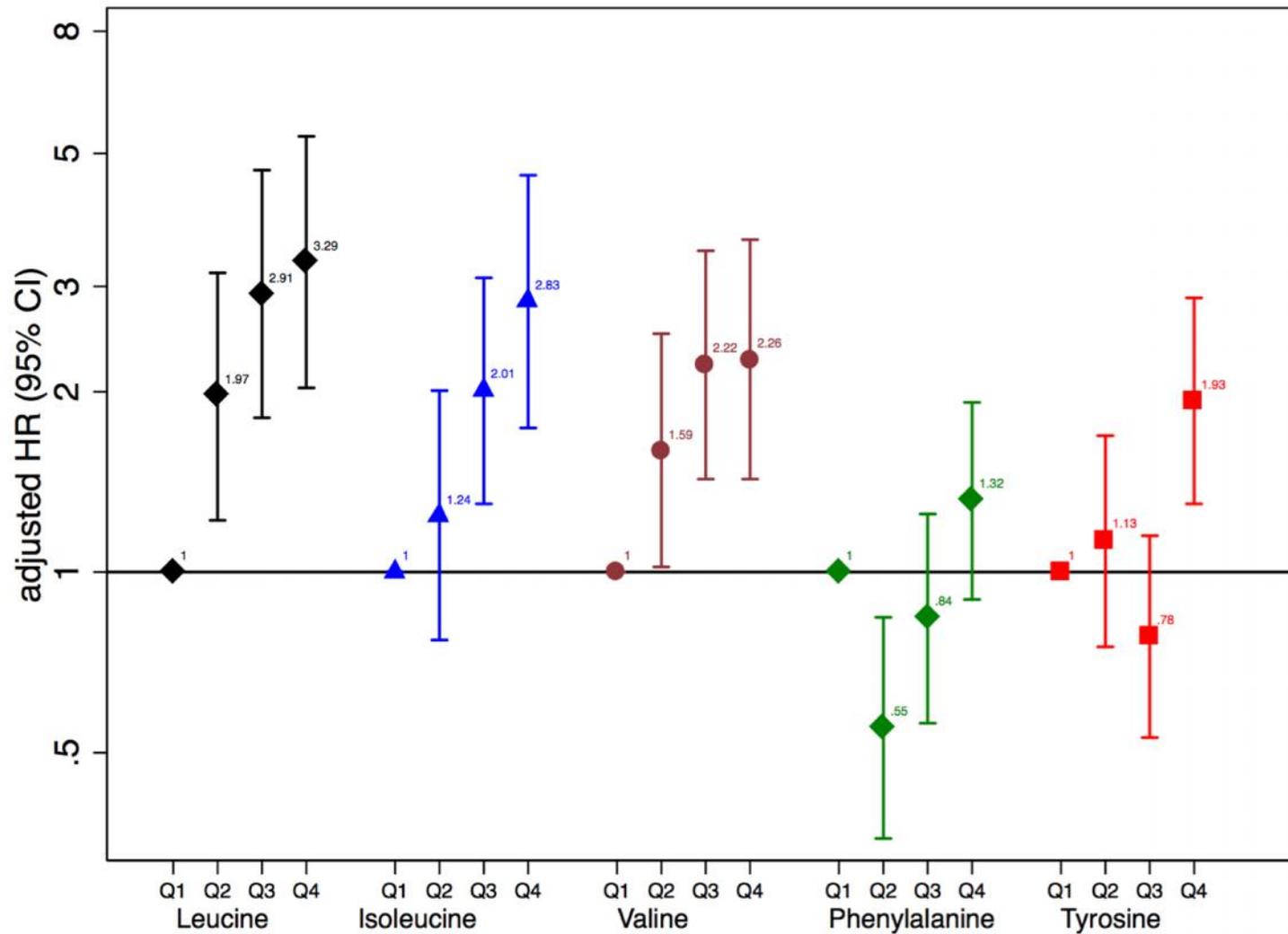
Background

Methods

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Incident type 2 diabetes by Baseline Plasma Amino Acid Concentrations^a



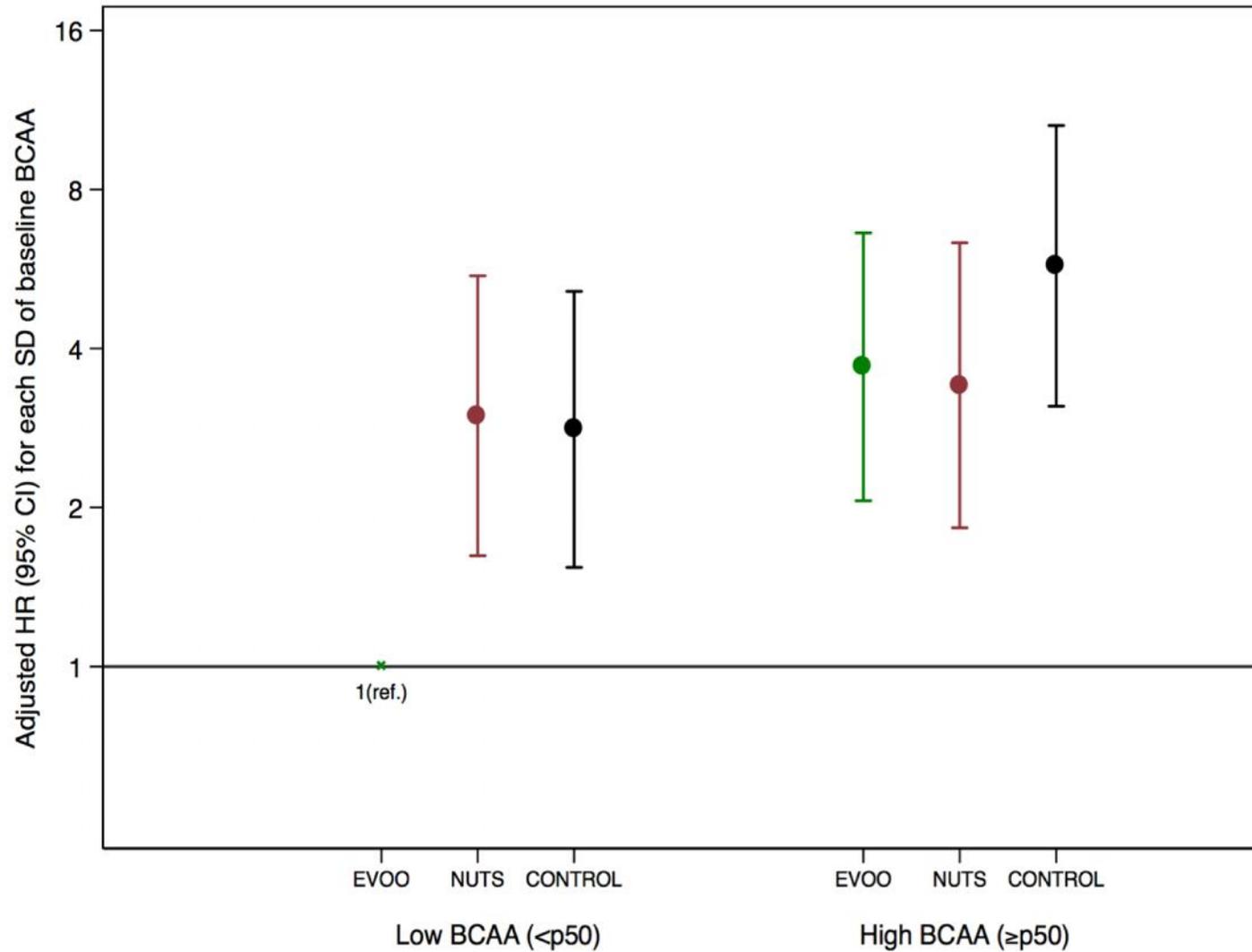
Background

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Joint effect of MedDiet and baseline BCAA score



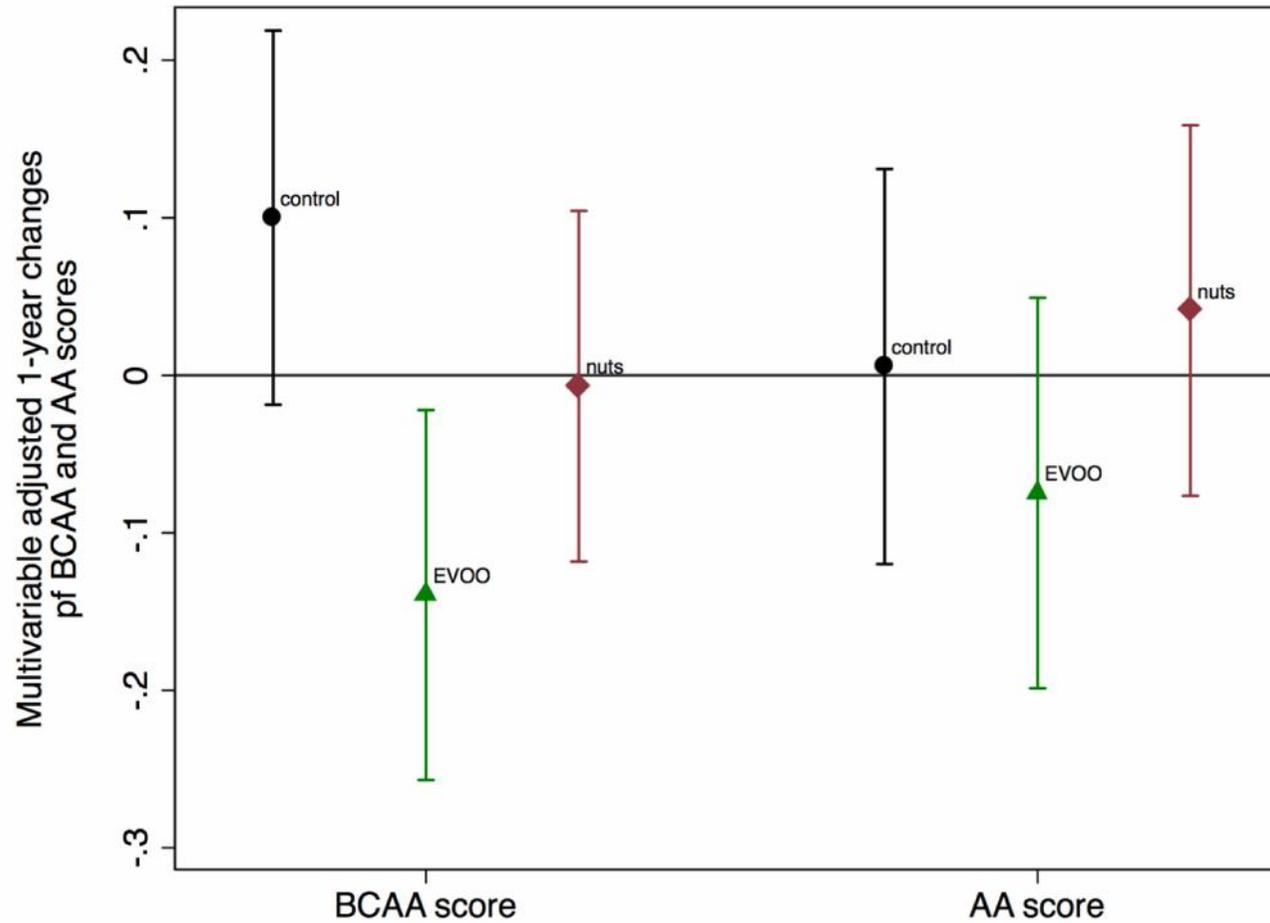
Background

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Discussion/Conclusion

Changes in BCAA and AA scores after 1 Year of Intervention, by Intervention Group.



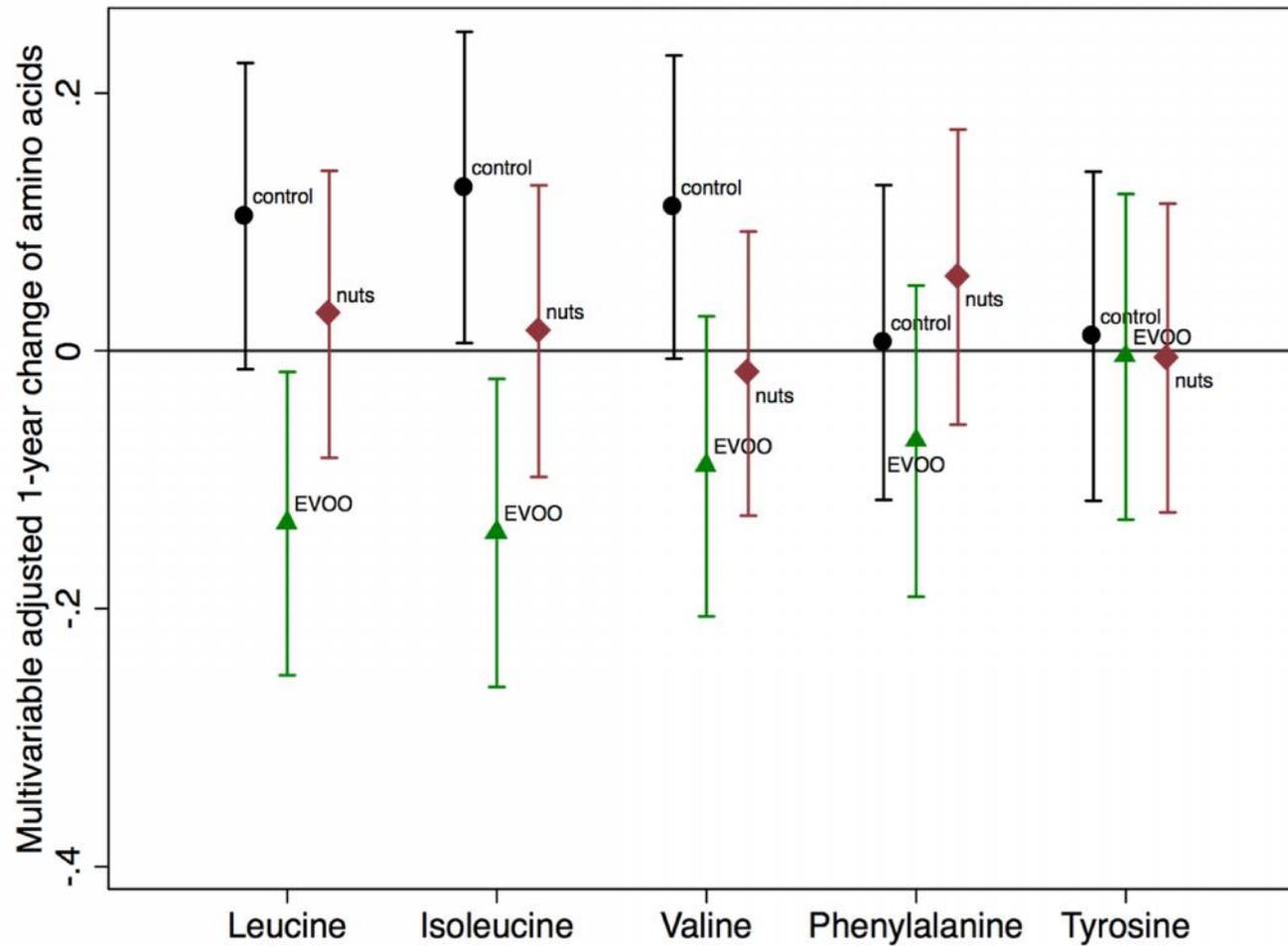
Background

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Changes in individual AAs after 1 Year of Intervention, by Intervention Group.



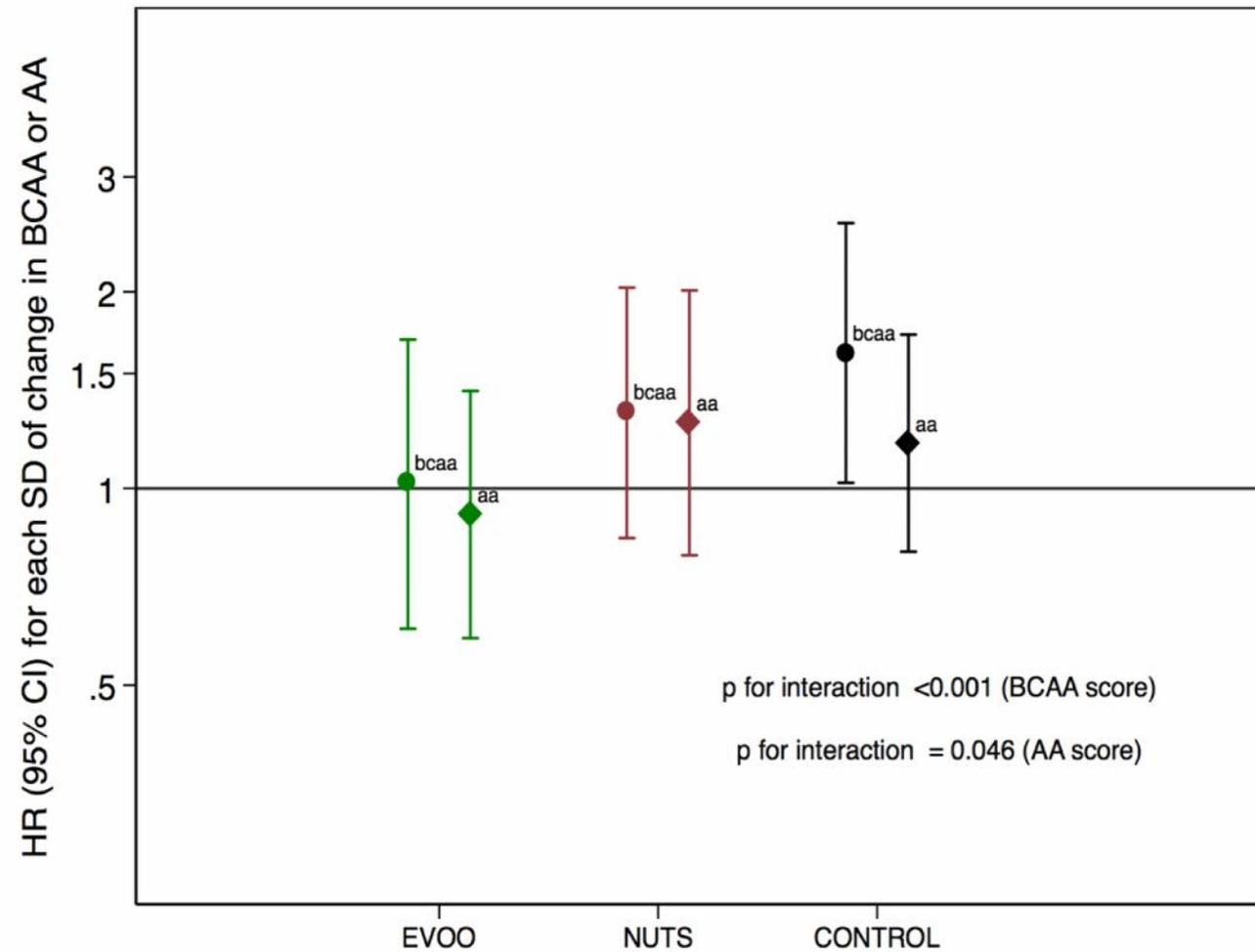
Background

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Associations of 1-yr changes (per SD) in BCAA and AA score with the risk of incident type 2 diabetes stratified by intervention group



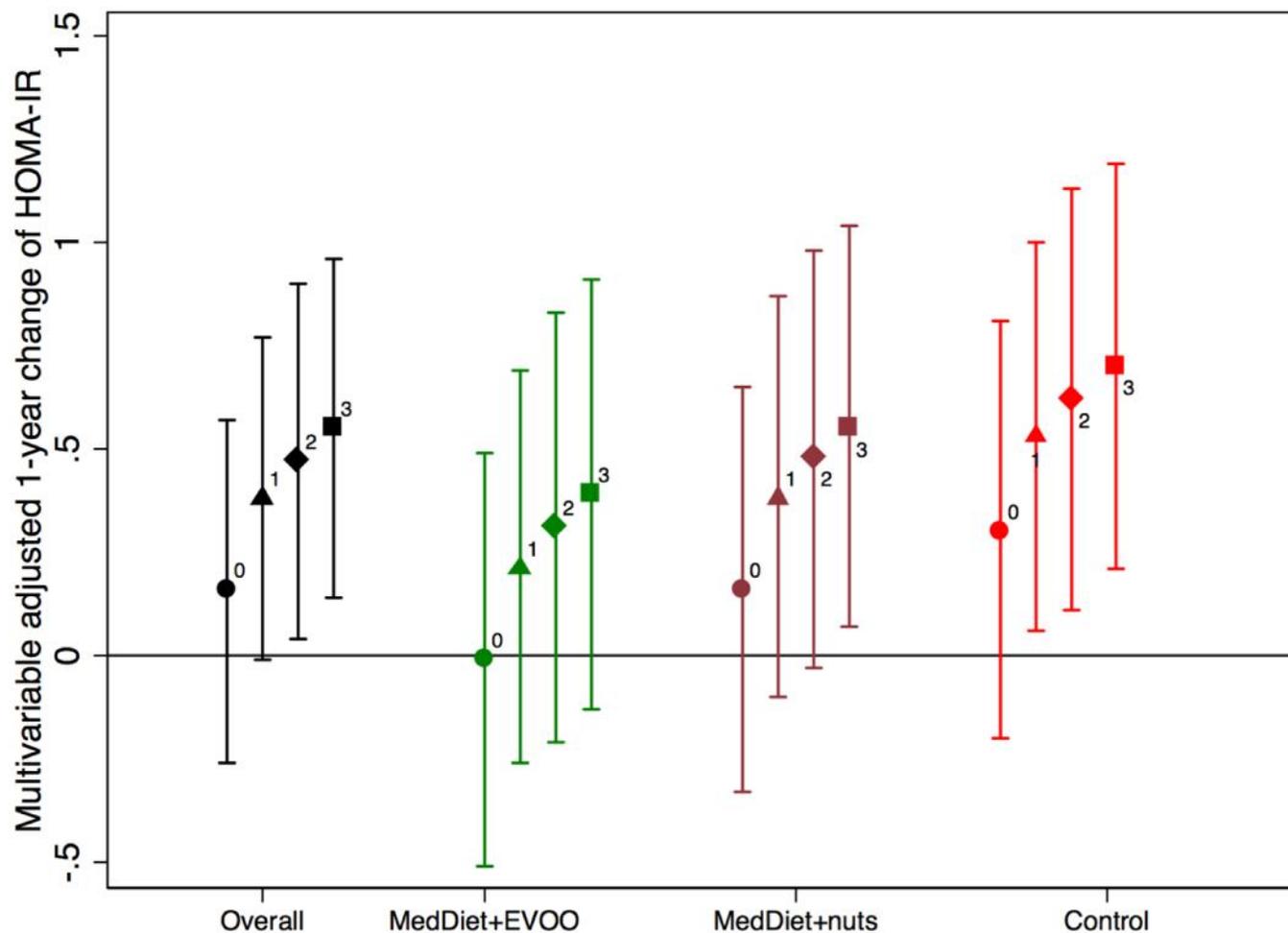
Background

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One-year Change of HOMA-IR Index 95% confidence intervals by Quartiles of Baseline Plasma Branched-Chain



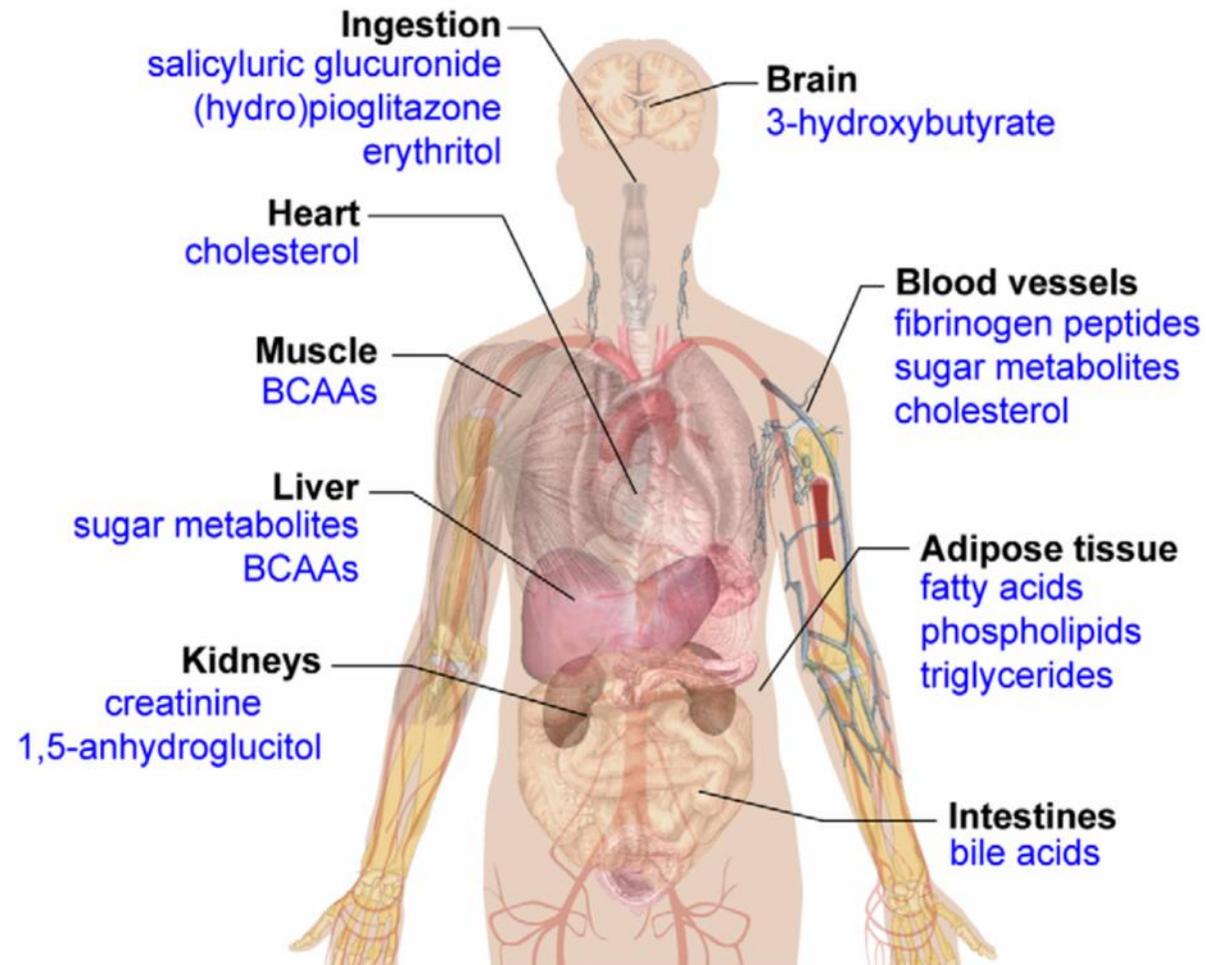
Background

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Metabolic Footprint of Diabetes: A Multiplatform Metabolomics Study in an Epidemiological Setting

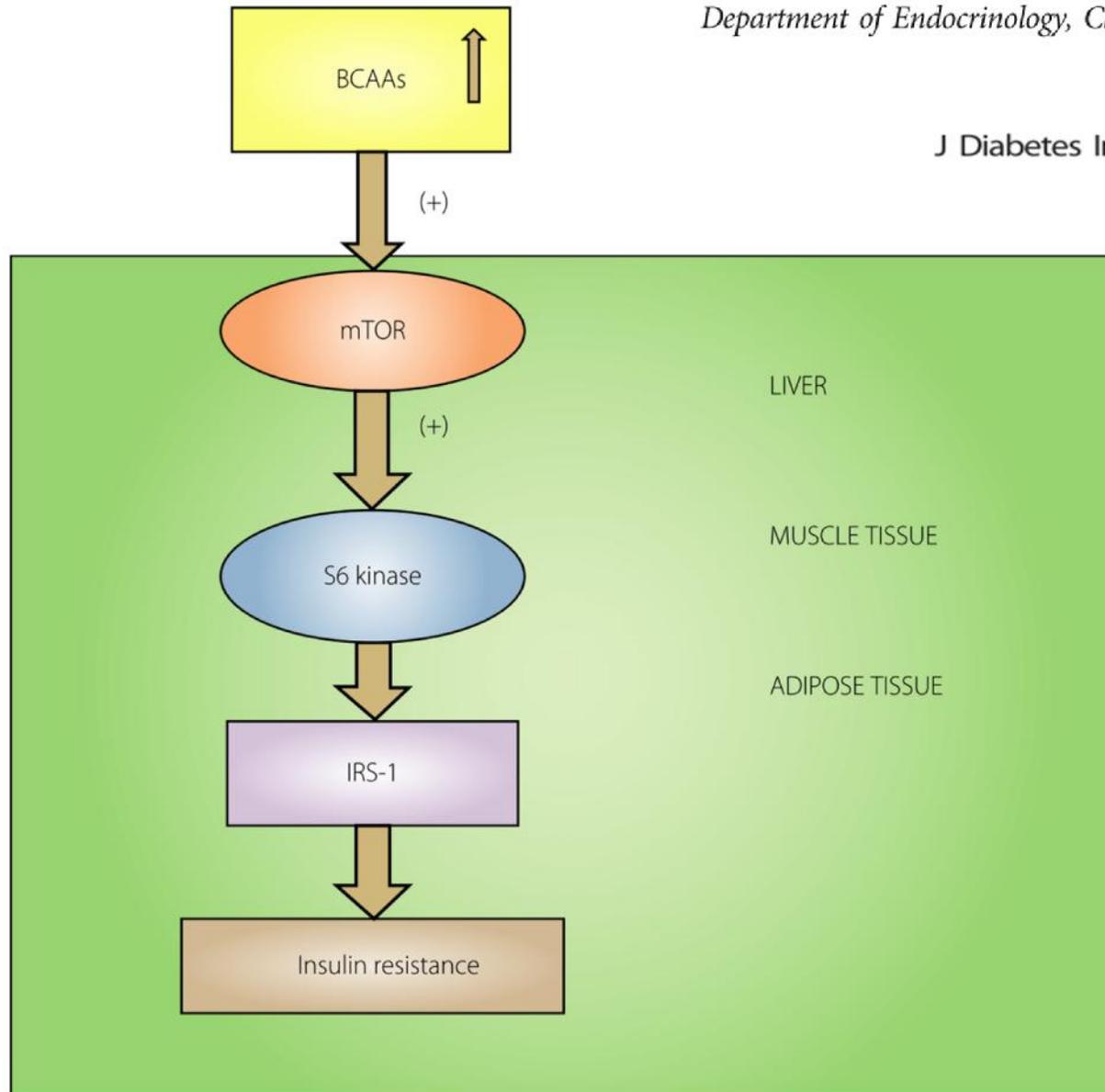


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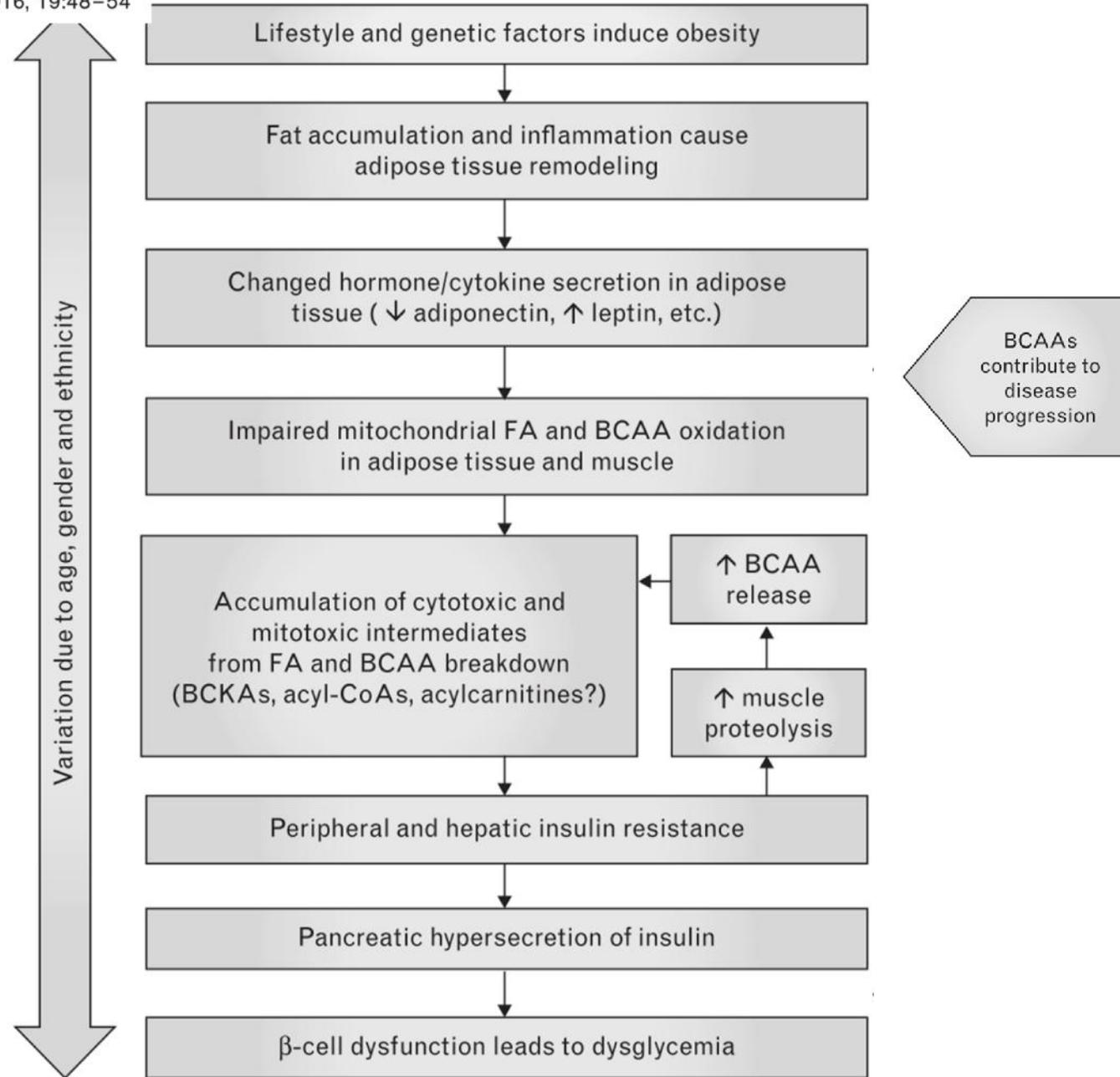


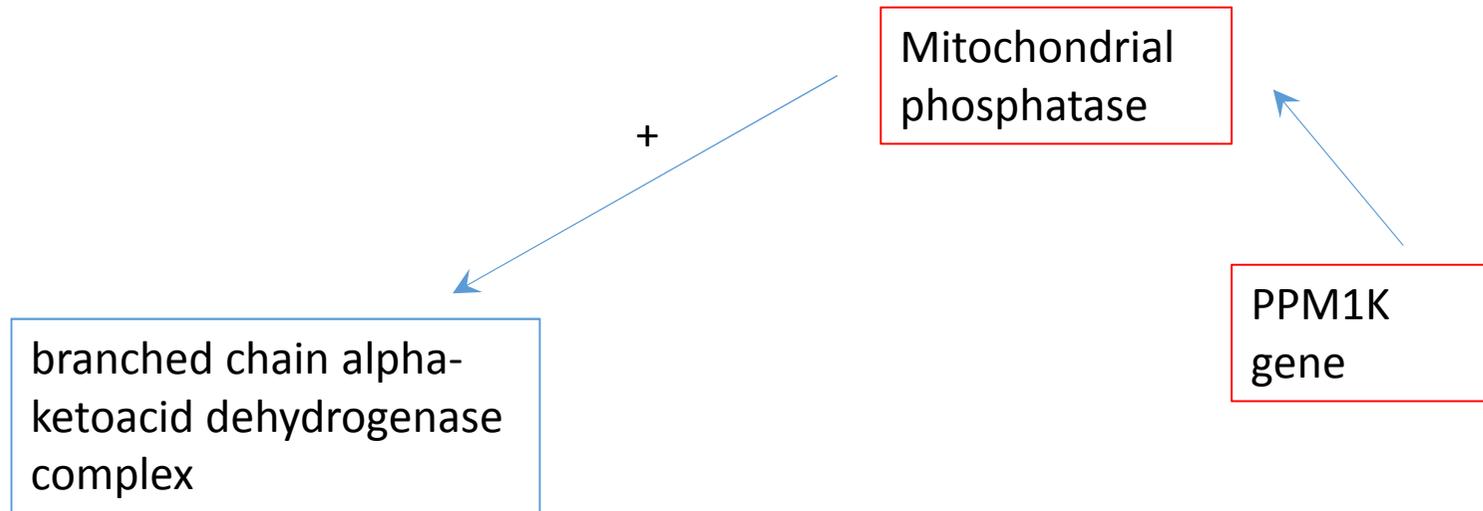
Background

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PLOS Medicine | DOI:10.1371/journal.pmed.1002179 November 29, 2016

Genetic Predisposition to an Impaired Metabolism of the Branched-Chain Amino Acids and Risk of Type 2 Diabetes: A Mendelian Randomisation Analysis

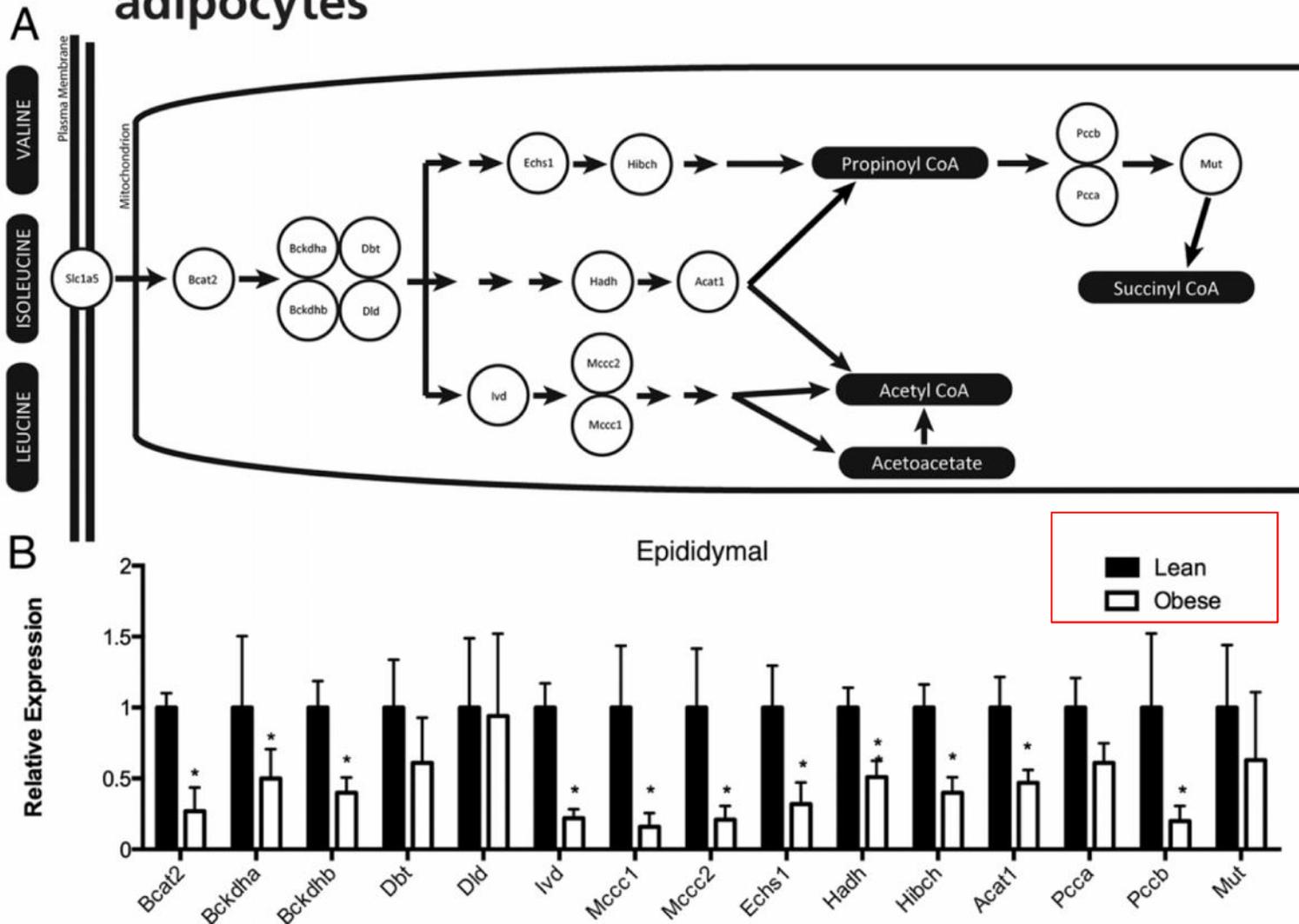
Background

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Obesity and inflammation down-regulate expression of genes linked to BCAA metabolism selectively in adipose tissue and cultured adipocytes



(Molecular Endocrinology 29: 411–420, 2015)

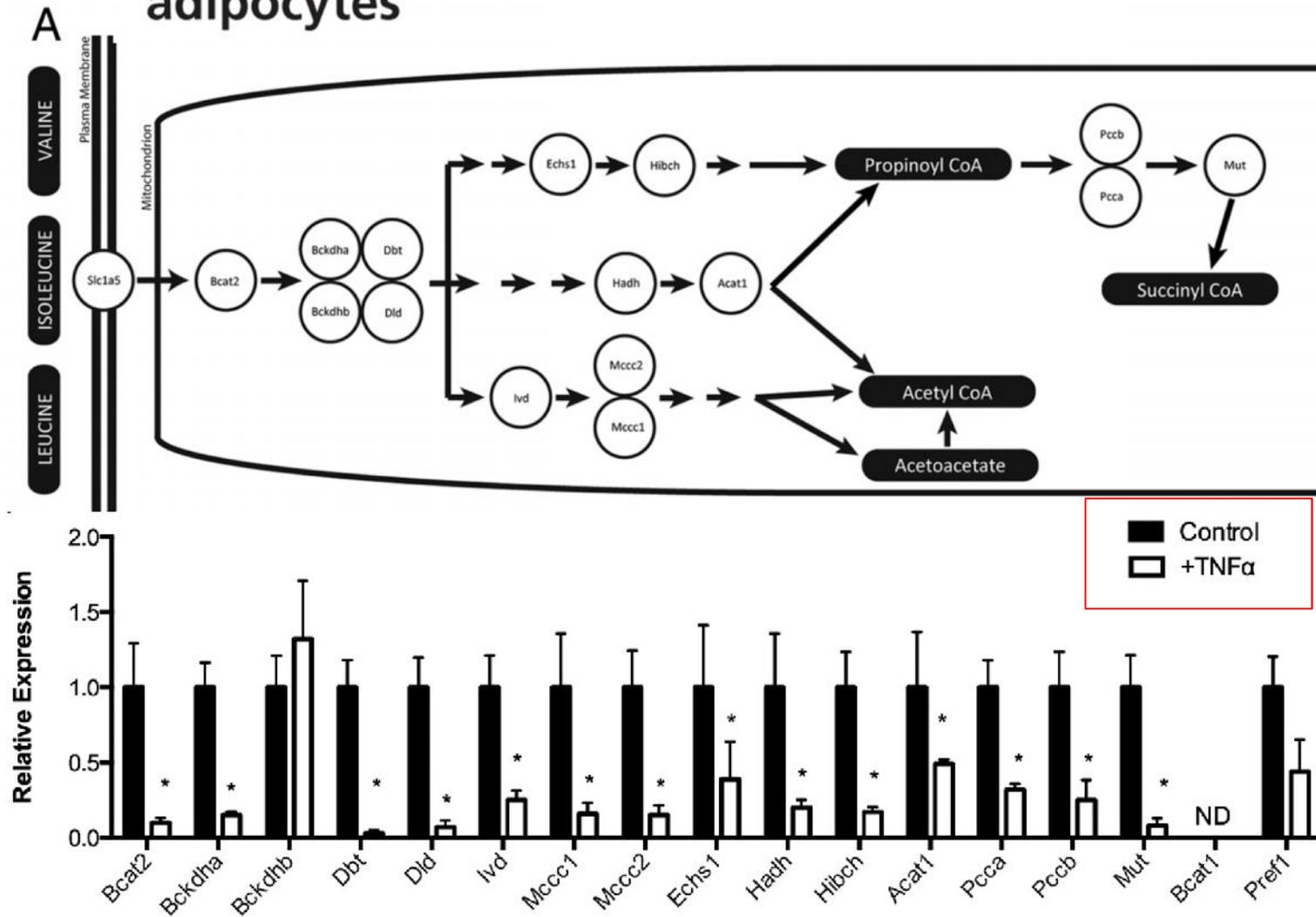
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Obesity and inflammation down-regulate expression of genes linked to BCAA metabolism selectively in adipose tissue and cultured adipocytes



(Molecular Endocrinology 29: 411–420, 2015)

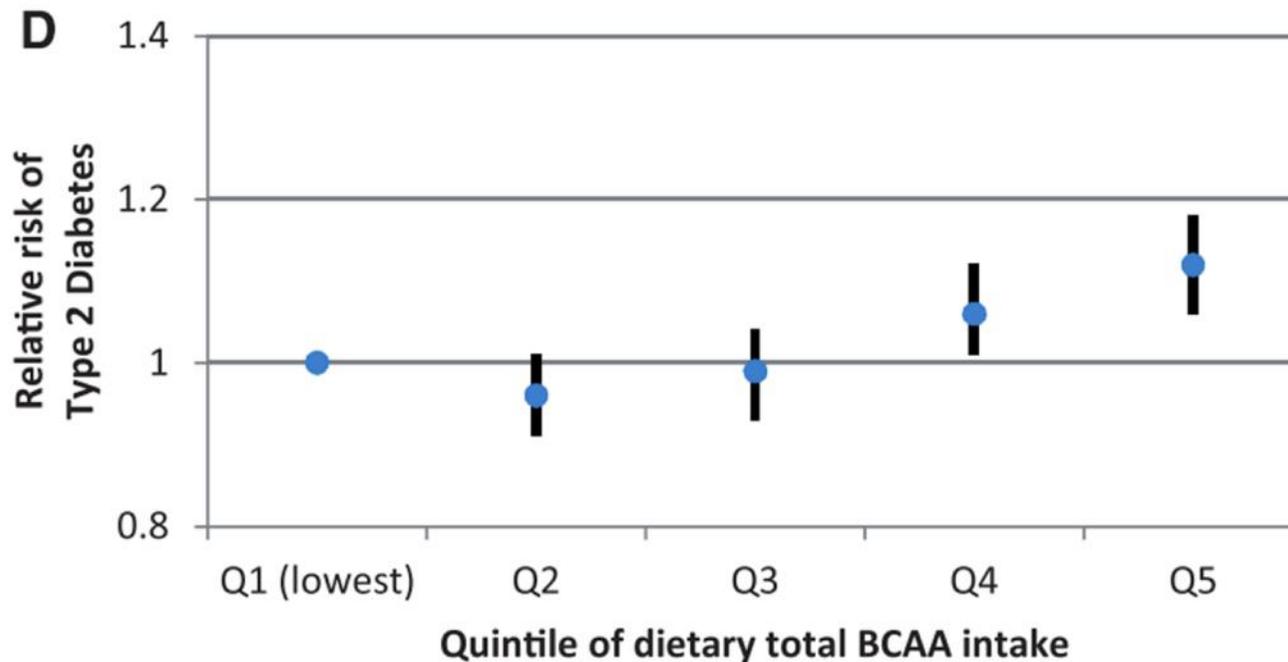
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Cumulative consumption of branched-chain amino acids and incidence of type 2 diabetes



Background

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BASELINE

YEAR 1

YEARS 2-7

↑ BCAA

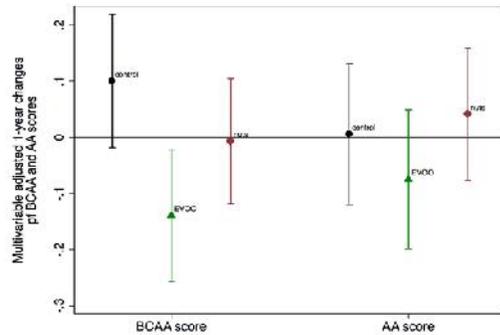
MedDiet
+ EVOO

0.60 (95% CI, 0.43 to 0.85) (Ann Inter Med 2014)

T2D

↓ BCAA

P for interaction
< 0.001



Background

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Conclusions

1) Baseline BCAAs and AA scores were *independently* associated with a higher risk of **incident T2D** after a median follow-up of 3.8 years;

2) **One-year changes in BCAAs** were associated with a higher risk of subsequently developing T2D (during years 2 to 7 of follow-up) only in the control group of the trial, but not in the active intervention groups receiving MedDiets, and this differential association was supported by statistically significant interactions for each of the 2 active intervention groups;

3) The intervention with the **MedDiet+EVOO** was associated with 1-year significant reductions in leucine, isoleucine and the overall BCAA score.

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Thank you very much!

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