

About OMICS Group

OMICS Group International is an amalgamation of [Open Access publications](#) and worldwide international science conferences and events. Established in the year 2007 with the sole aim of making the information on Sciences and technology 'Open Access', OMICS Group publishes 500 online open access [scholarly journals](#) in all aspects of Science, Engineering, Management and Technology journals. OMICS Group has been instrumental in taking the knowledge on Science & technology to the doorsteps of ordinary men and women. Research Scholars, Students, Libraries, Educational Institutions, Research centers and the industry are main stakeholders that benefitted greatly from this knowledge dissemination. OMICS International also organizes 500 [International conferences](#) annually across the globe, where knowledge transfer takes place through debates, round table discussions, poster presentations, workshops, symposia and exhibitions.

About OMICS International Conferences

OMICS International is a pioneer and leading science event organizer, which publishes around 500 open access journals and conducts over 300 Medical, Clinical, Engineering, Life Sciences, Pharma scientific conferences all over the globe annually with the support of more than 1000 scientific associations and 30,000 editorial board members and 3.5 million followers to its credit.

OMICS International has organized 500 conferences, workshops and national symposiums across the major cities including San Francisco, Las Vegas, San Antonio, Omaha, Orlando, Raleigh, Santa Clara, Chicago, Philadelphia, Baltimore, United Kingdom, Valencia, Dubai, Beijing, Hyderabad, Bengaluru and Mumbai.

An **metabolomic** approach to identify the **endogenous** **substrate of OCT1**

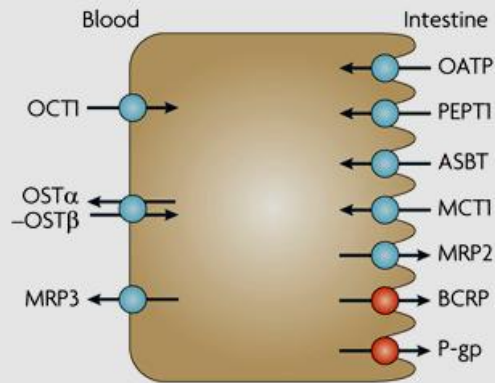
Ligong Chen, Ph.D.

**Department of Pharmacology and
Pharmaceutical Sciences
School of Medicine**

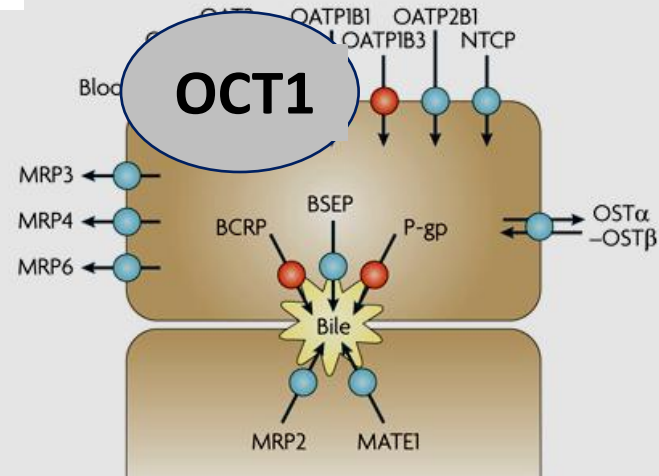
April. 28th, 2015

Transporters Play Critical Roles in **Drug and Nutrients A.D.M.E.**

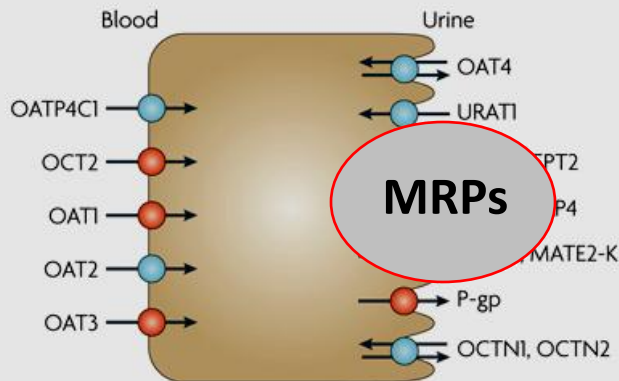
Intestinal epithelia



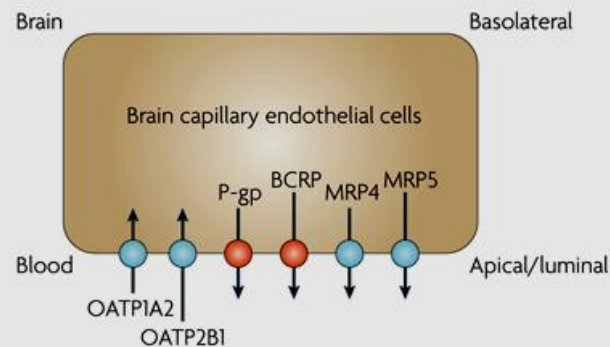
Hepatocyte



Kidney proximal tubules



Blood-brain barrier



Currently Utilized SLC-drug Targets

Depression,epilepsy,addiction

SLC6 family (TC:2.A.22,APC)

SLC6A1,SLC6A2,

SLC6A4,SLC6A3 (SSRI)

Movement disorders, psychiatric disorders, addiction

SLC18 family (TC:2.A.1,MFS)

SLC18A2

Epilepsy

SLC22 related (MFS)

SV2A

Uricosuresis,gout

SLC22 family (TC:2.A.1.19,MFS)

SLC22A6(OAT1)

Diuresis

SLC12 family (TC:2.A.30)

SLC12A1,SLC12A2,

SLC12A3,SLC12A4

SLC12A5 (NKCC)

Antiosteoporotic,antineoplastic

SLC25 family (TC:2.A.29,MC)

SLC25A4,SLC12A5,SLC12A6

Anti-diabetes

SLC5A2 (Canagflozin)

The List is Increasing.....

Transporter as Important Disease Susceptible Genes in GWAS

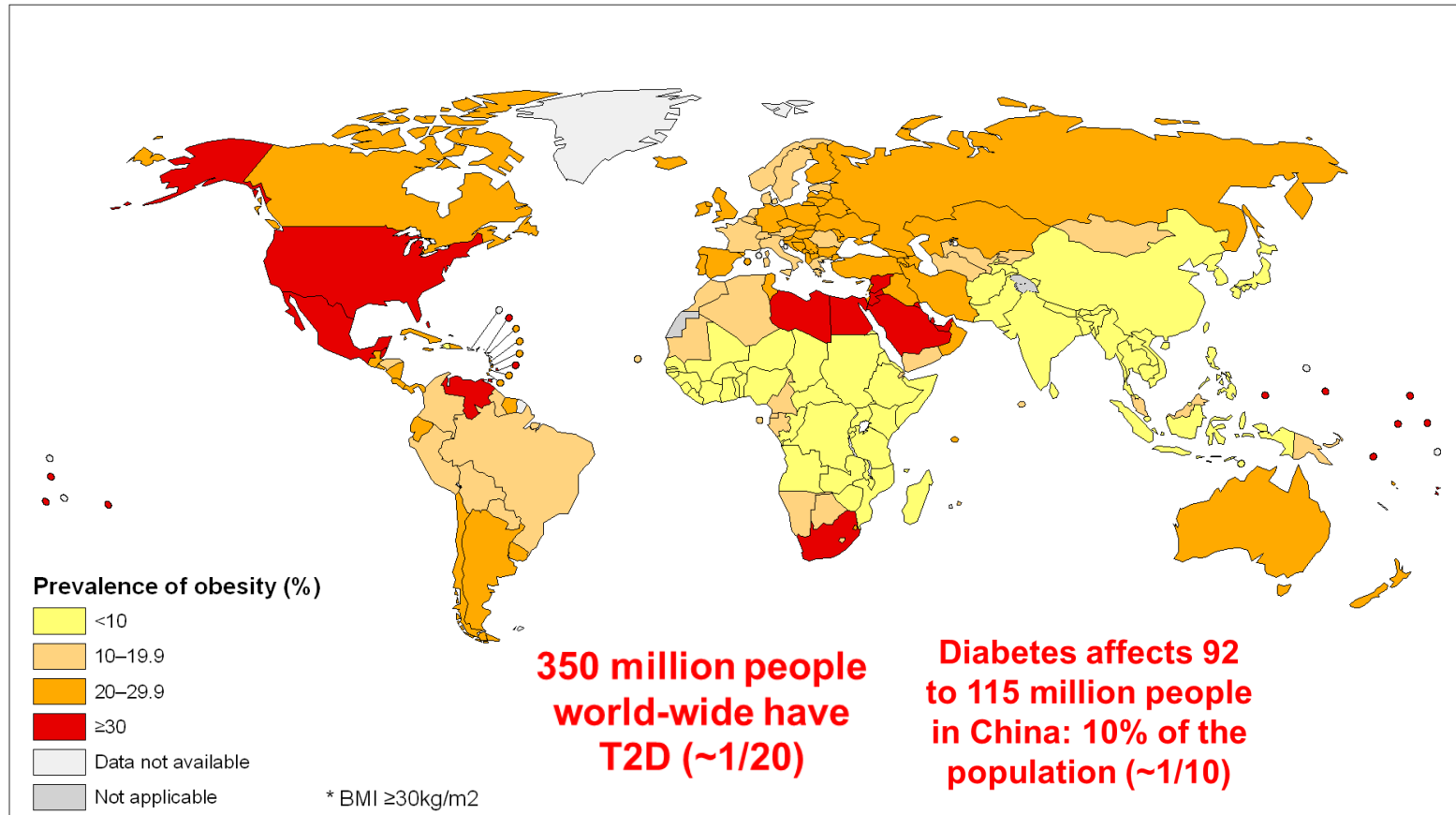
- SLC24A4 for Alzheimer's Disease
- SLC39A6 for Breast/pancreatic cancer/esophageal squamous-cell carcinoma
- SLC16A9 in Metabolic disease
- SLC6A20 in Hyperglycinuria, and iminoglycinuria
- SLC7A9 in Chronic kidney disease
- SLC22A3 in Prostate cancer/heart disease
- SLC2A9 in Gout: Urate acid disease
- SLC1A1 in Pancreatic disease
- SLC30A8 in Diabetes
- SLC22A12 in Gout: Urate acid disease
- SLC45A2 in Melanoma
- SLC17A8 in Lung Cancer Han Chinese
- SLC2A13 in Parkinson's Disease
- SLC6A4 in Schizophrenia

“HOT” Therapeutic Targets

.....

Obesity and Diabetes Rising in the world: How a Rare Disease Becomes a Modern "Pandemic"?

Prevalence of obesity*, ages 20+, age standardized
Both sexes, 2008



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

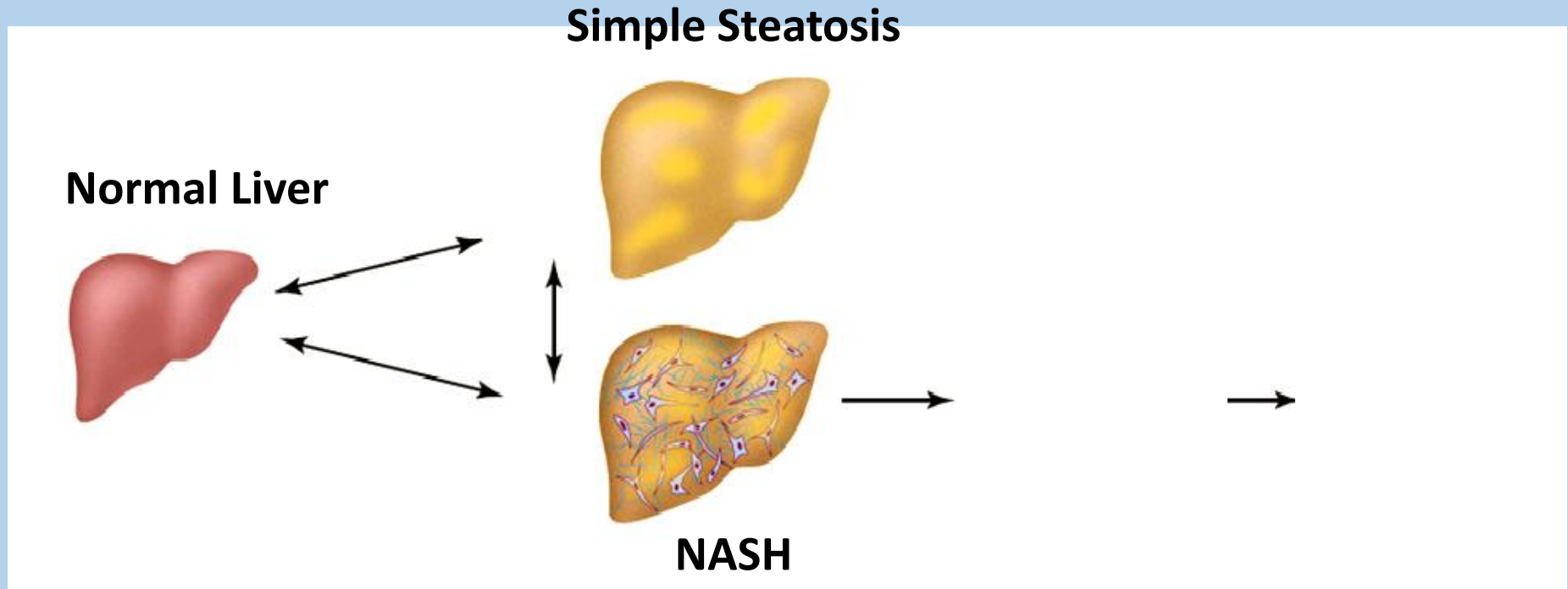
Data Source: World Health Organization
Map Production: Public Health Information
and Geographic Information Systems (GIS)
World Health Organization



World Health
Organization

© WHO 2011. All rights reserved.

Nonalcoholic steatohepatitis(NASH) disease affects **35%** of **adults** and an increasing number of **children**

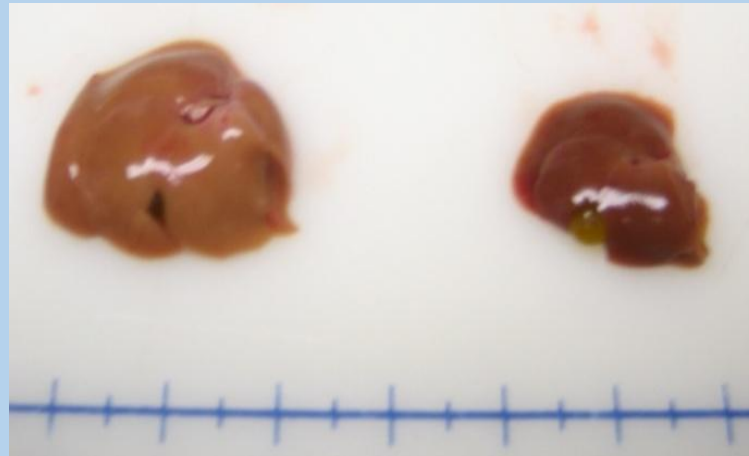


Currently, there is no effective treatment on fatty liver

What **Phenotypes** do we see from the mouse studies?

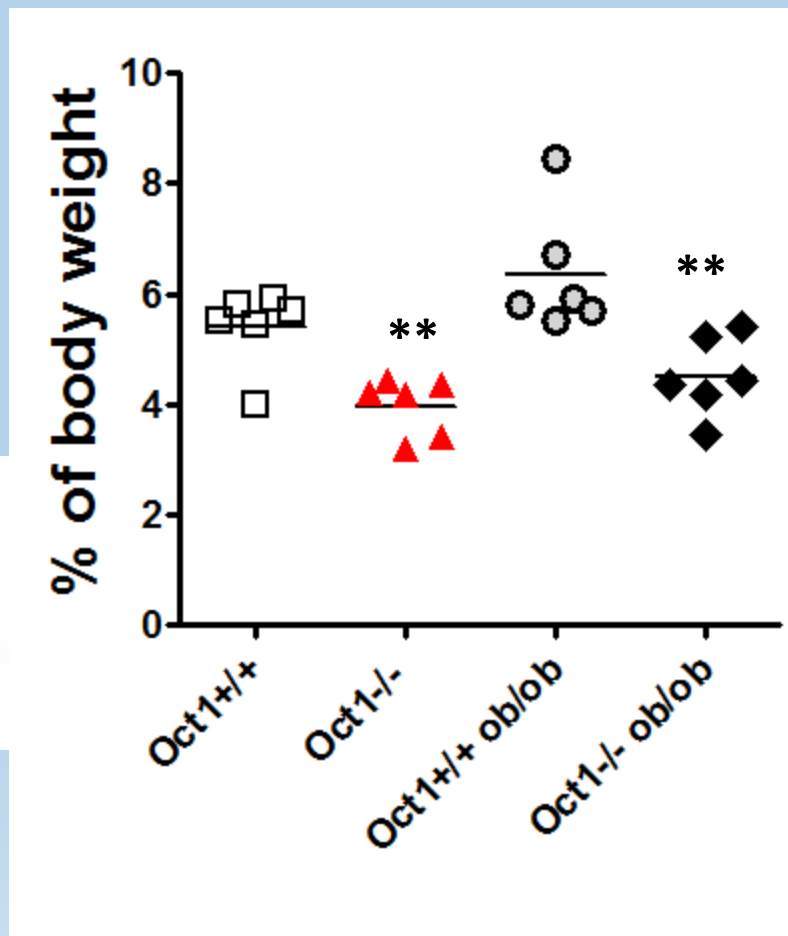
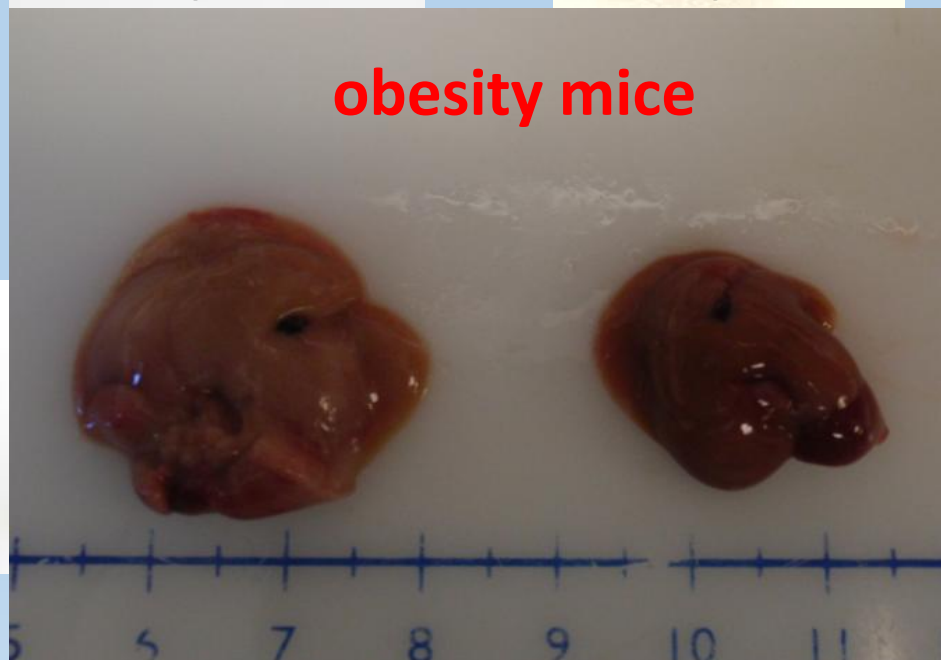
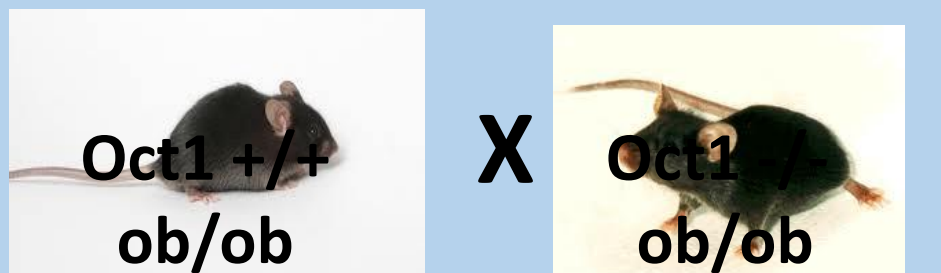
Oct1^{+/+}

Oct1^{-/-}

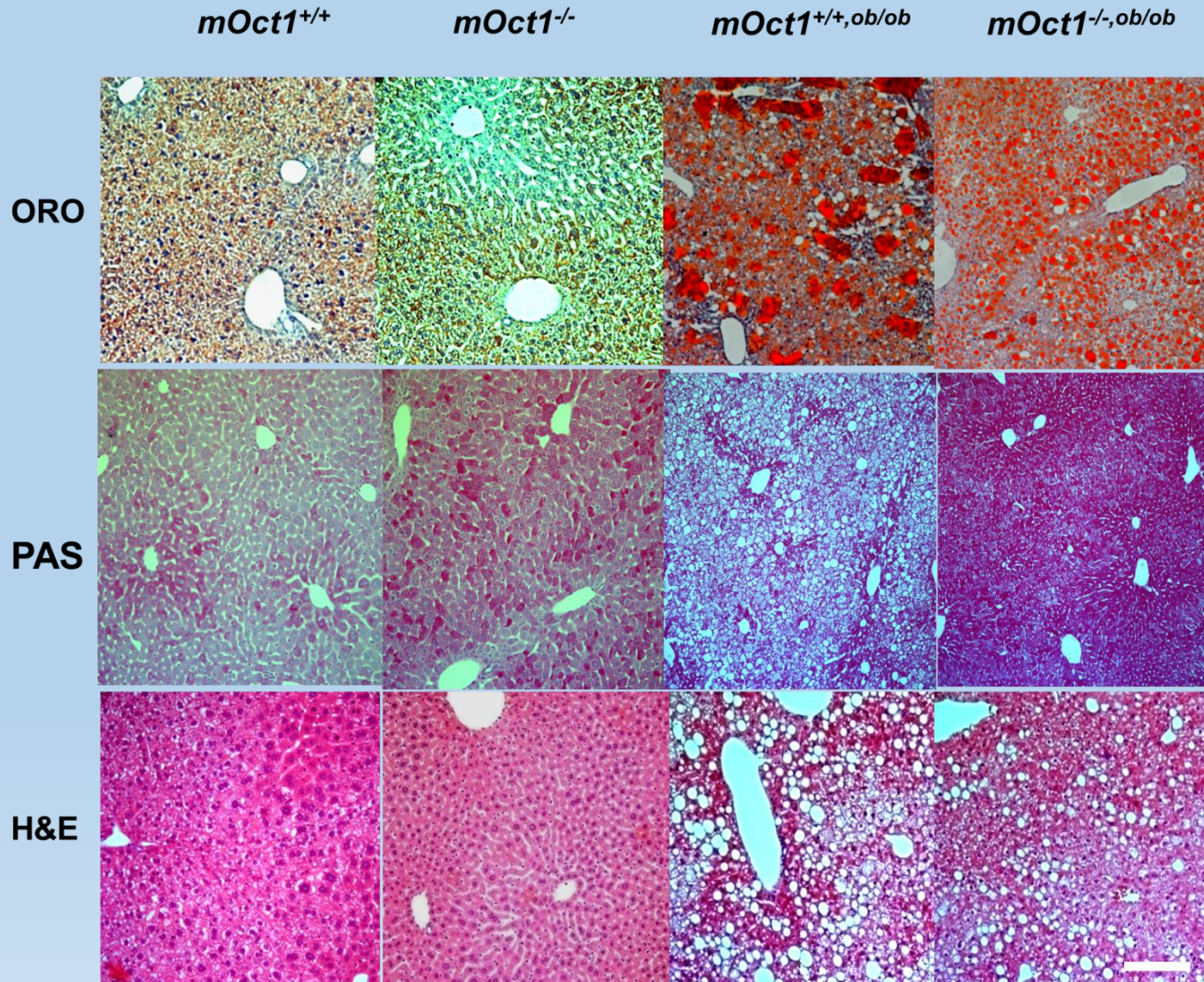


Lean mice

When crossed with Ob/Ob mice (**obesity mice**), the liver size is more **apparently reduced** in KO mice

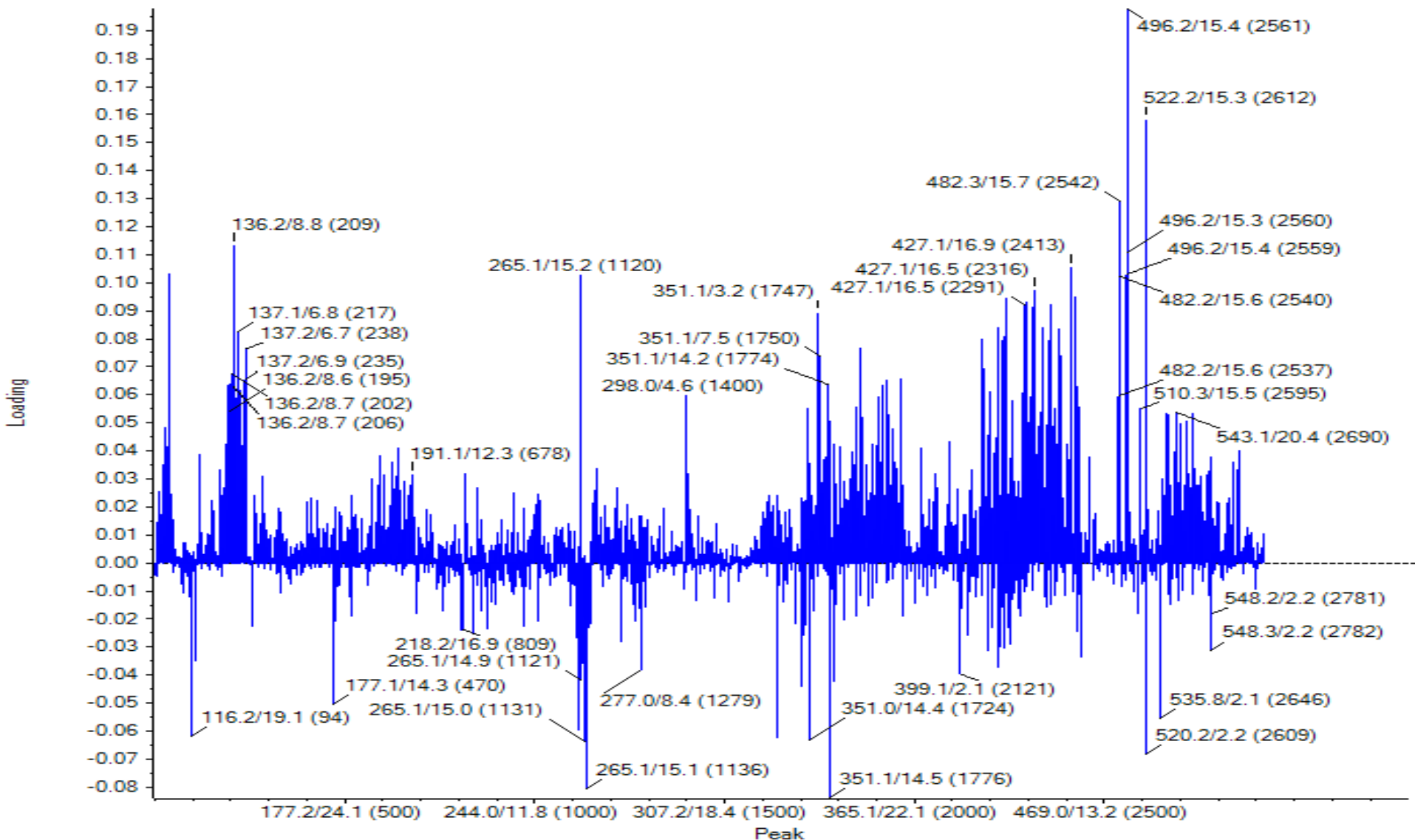


OCT1 knockout mice showed **less fat accumulation** **but higher glycogen** in liver than WT

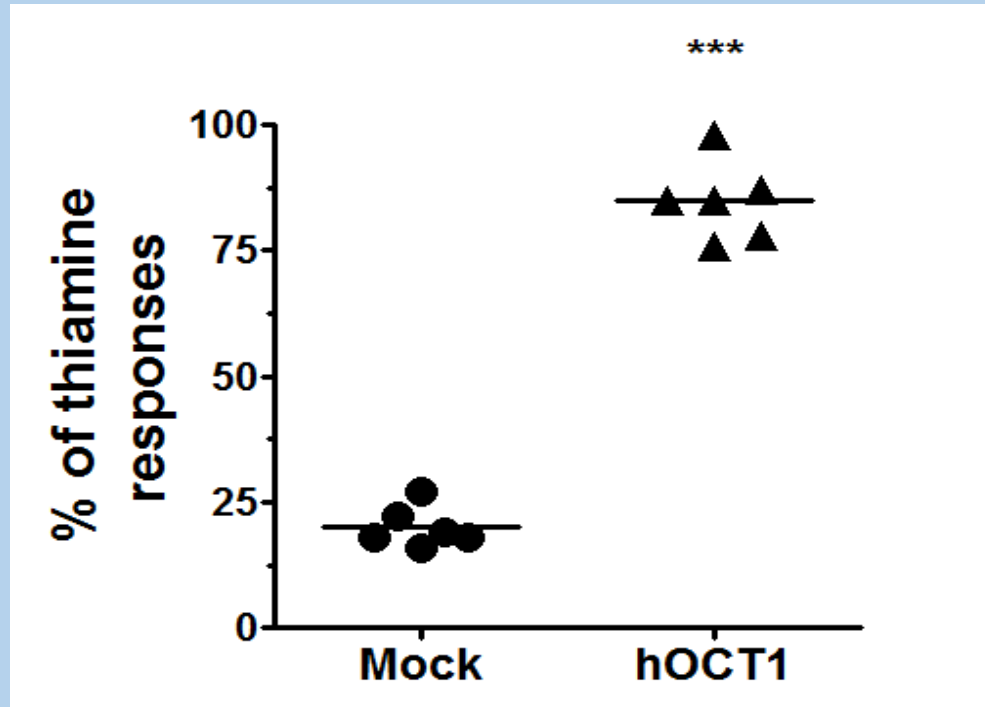


What's the endogenous substrate of OCT1?

Loadings for D1 (100.0 %), Pareto (DA)

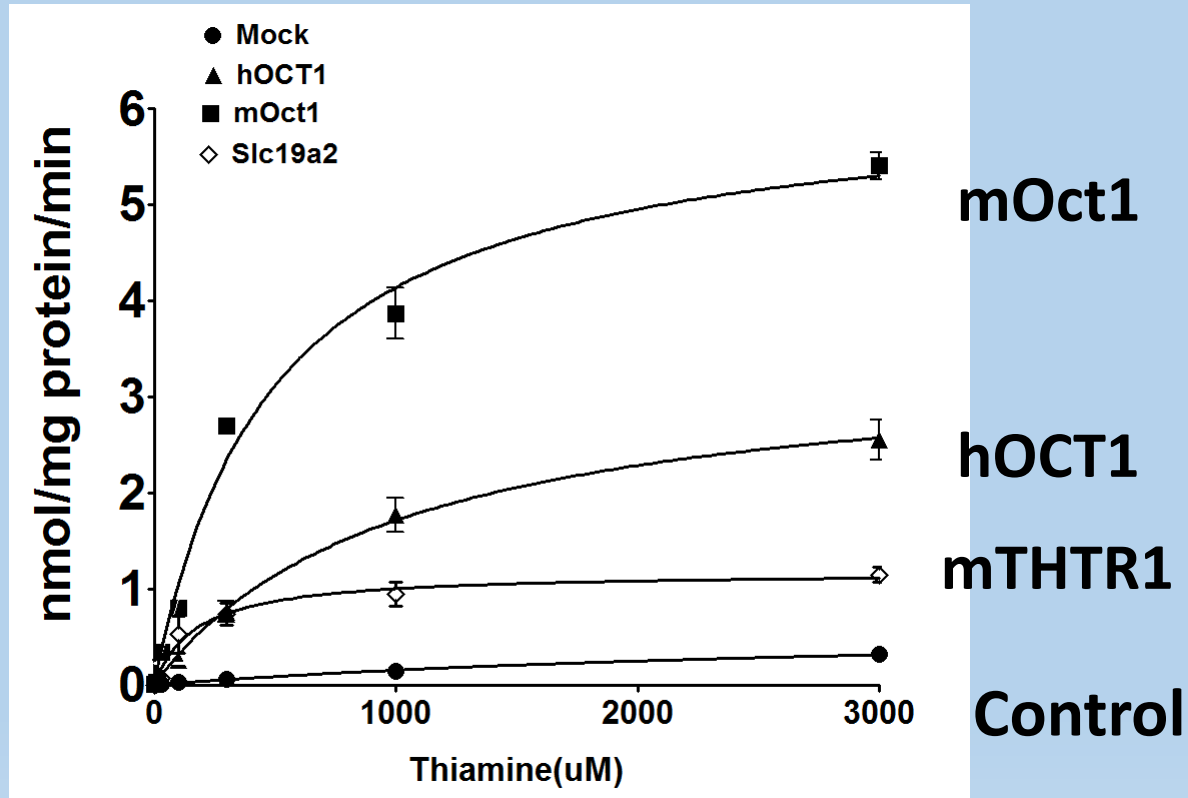


Thiamine (Vitamin B1) is one of the metabolites **accumulated highly** in HEK293-hOCT1



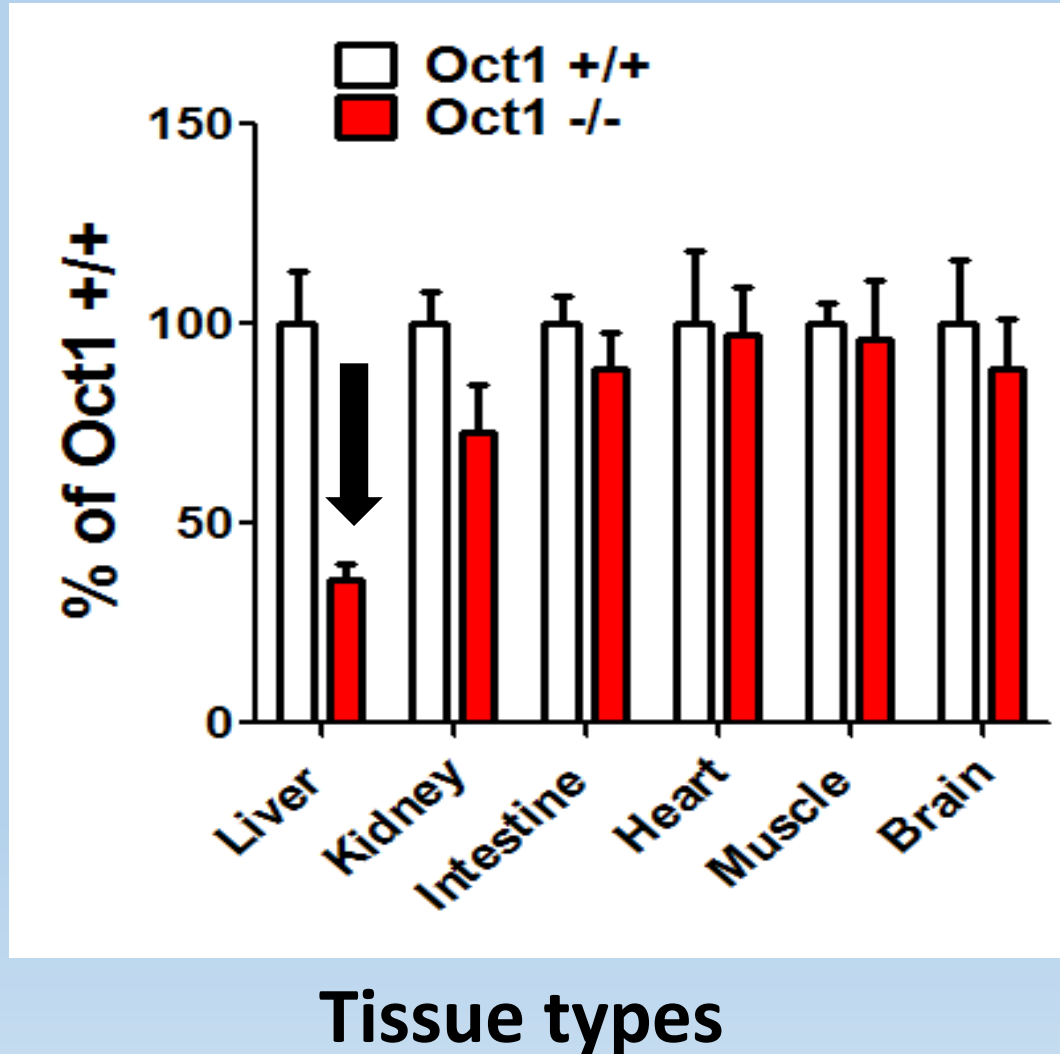
265.1 / 15.1
m/z / R.T.

OCT1 is **high capacity but low affinity** thiamine transporter

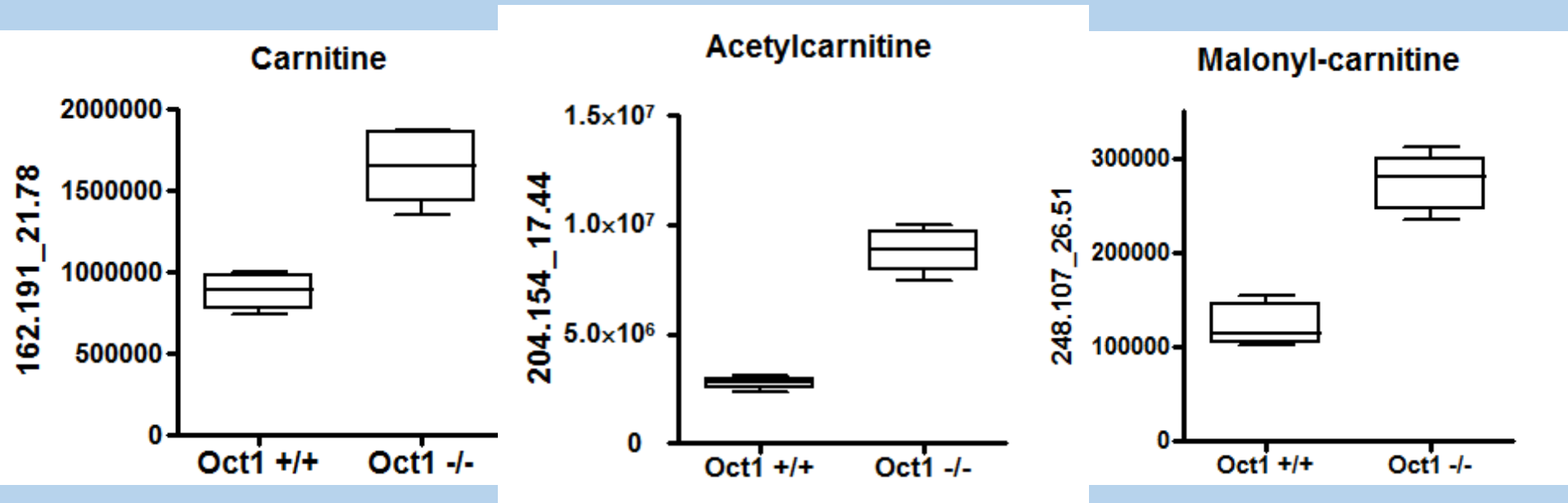


Kinetics

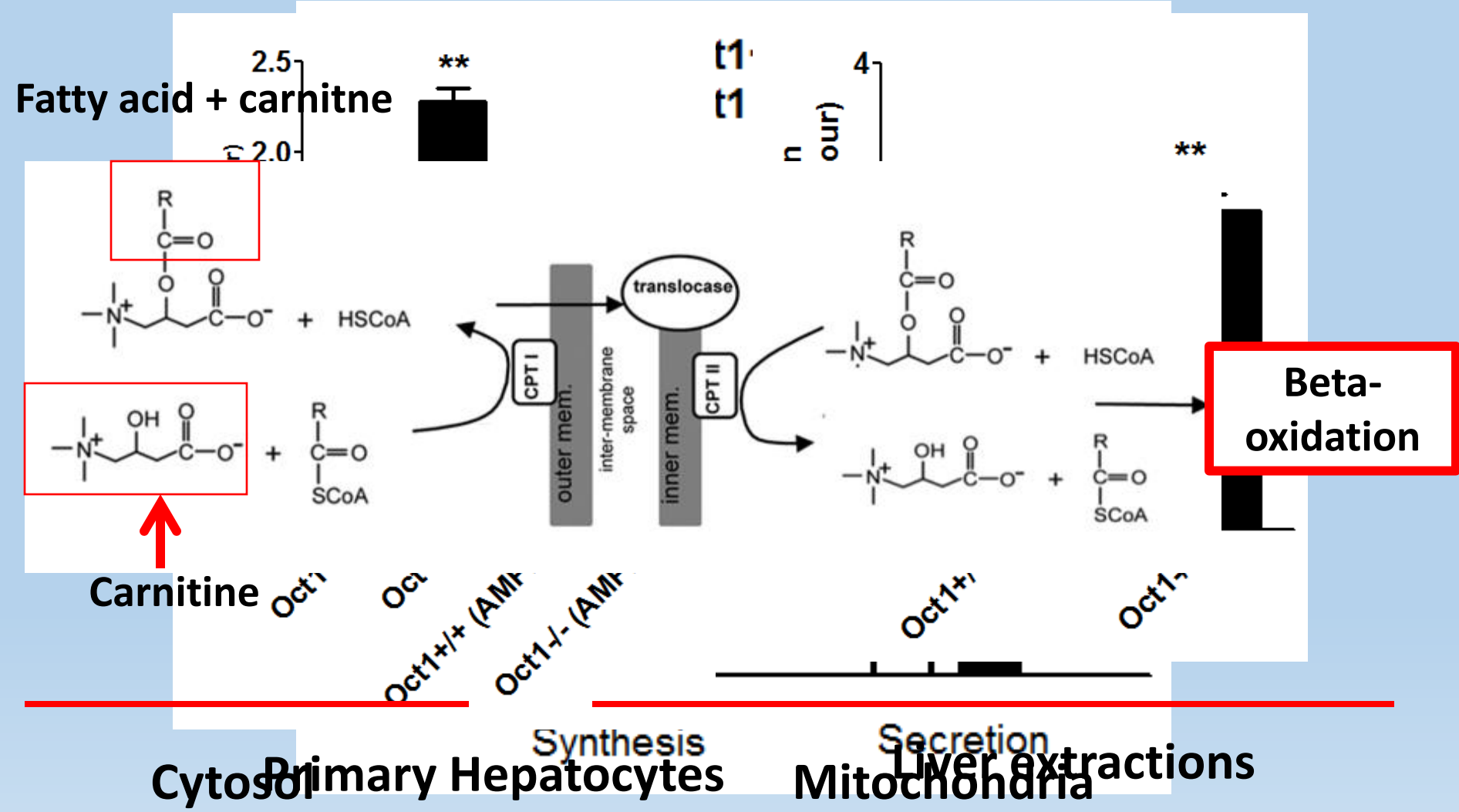
Oct1^{-/-} mice has decreased thiamine distribution in liver



Carnitine and its derivatives are the most **significant metabolites** elevated in KO mice liver

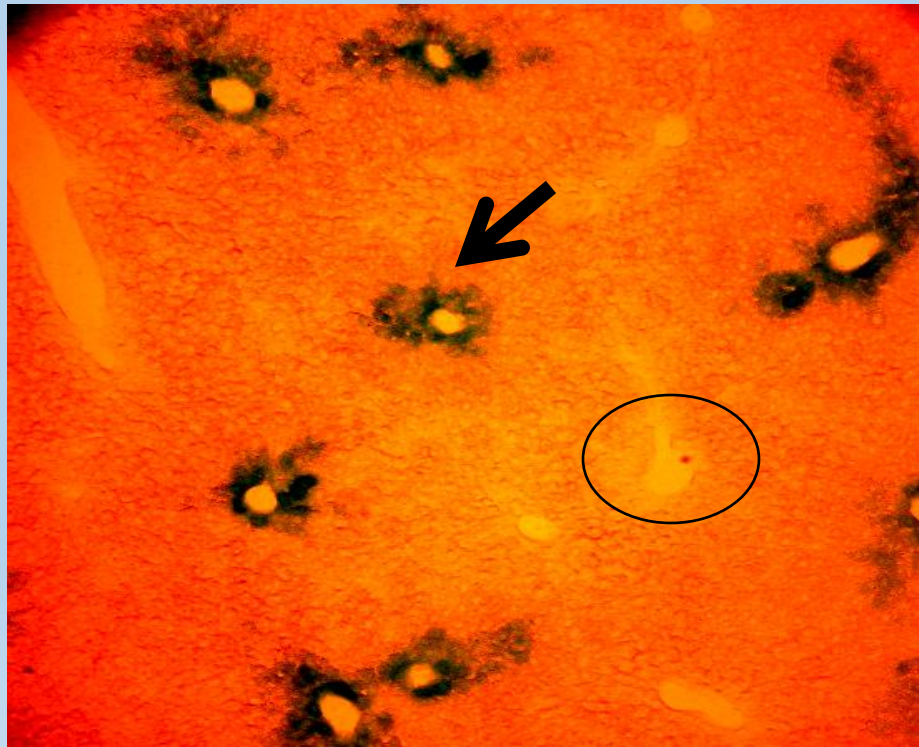


Fatty acid **β -oxidation rate** is higher in Oct1 KO mice but lower fatty acid synthesis rate

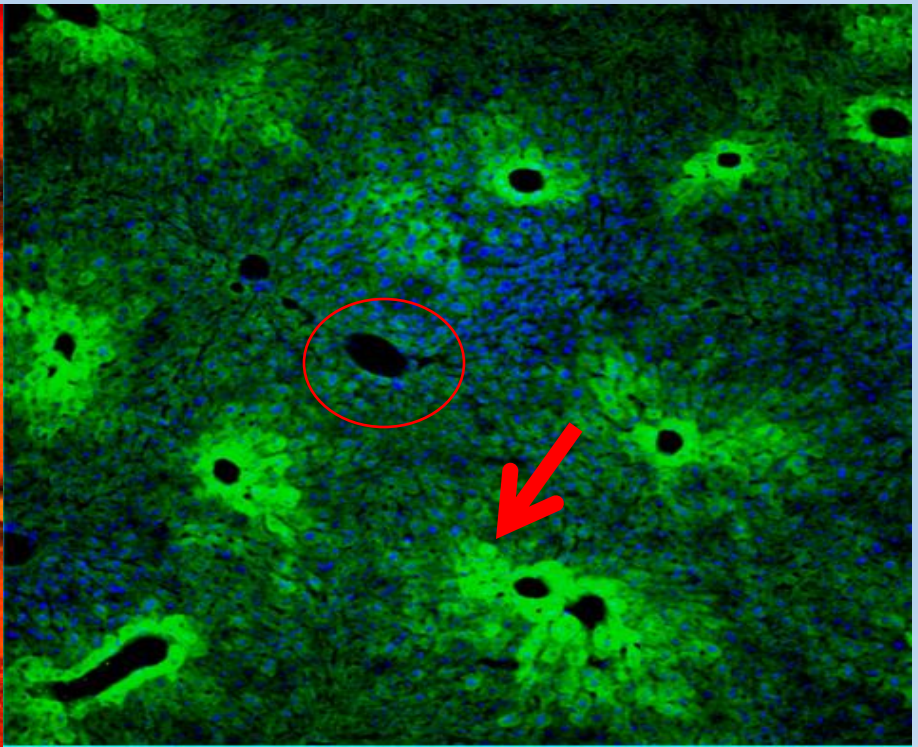


Location, Location.....

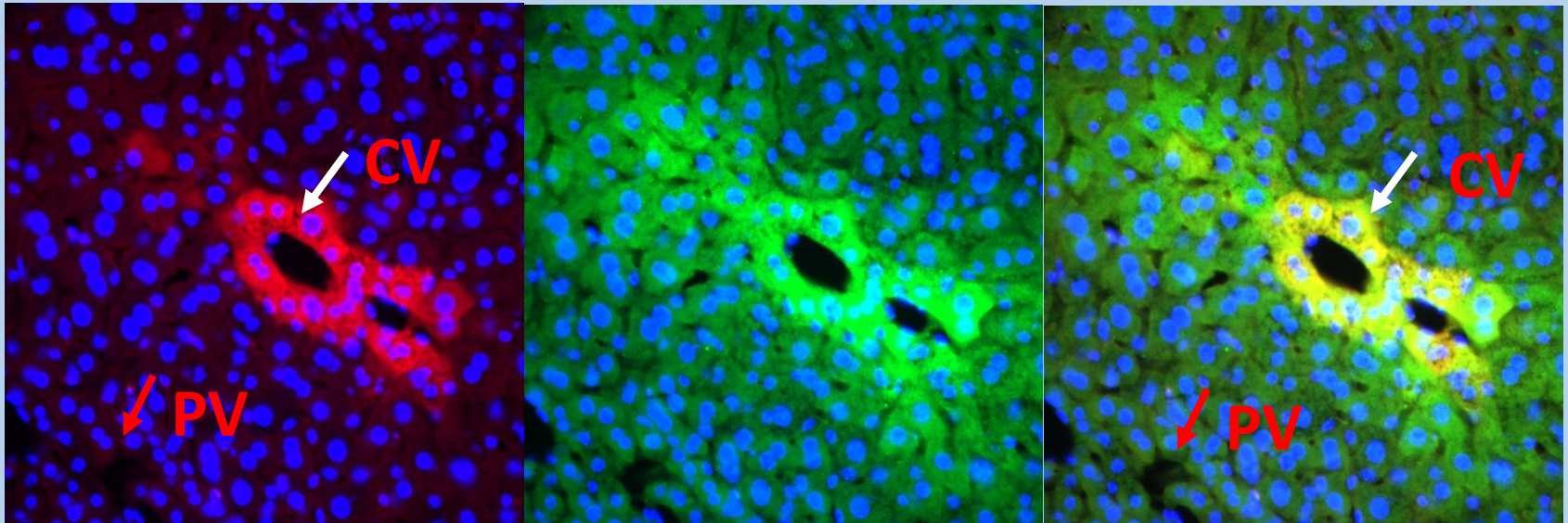
X-gal staining



Anti-beta
Galactosidase



OCT1 only expressed in the hepatocytes **around central vein**



Glutamine
synthetase

β -Galactosidase

Merge

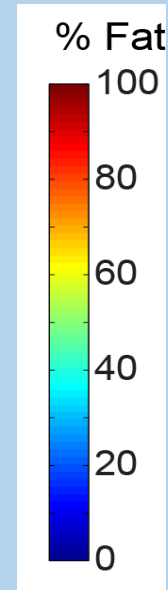
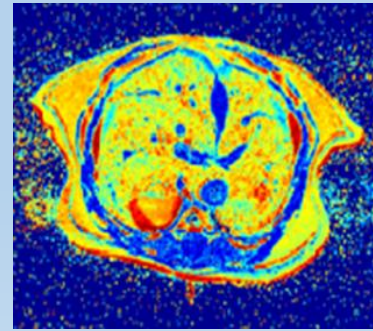
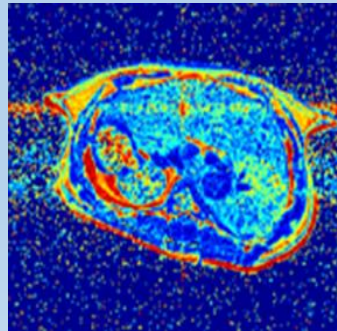
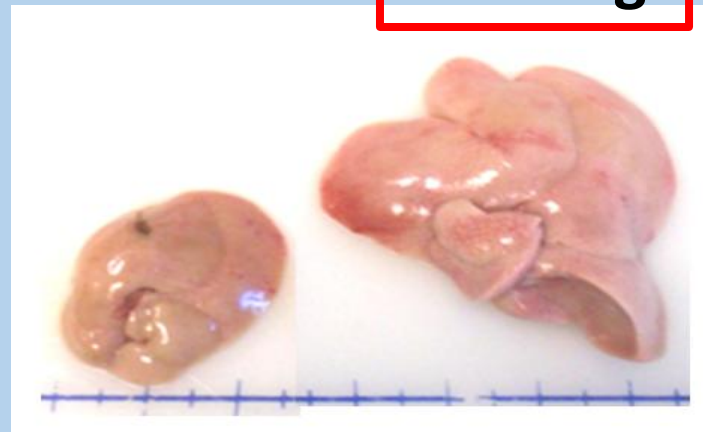
The **enlarged liver** from human transgenic mice - magnetic resonance imaging (**MRI**) of liver **fat** content

1.96 g

Oct1 +/+

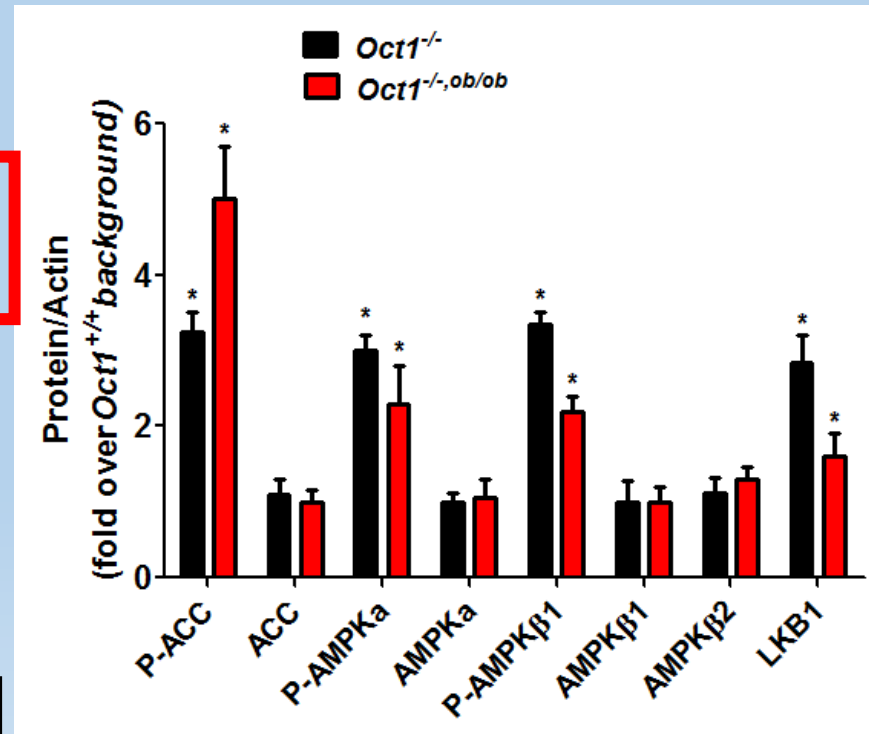
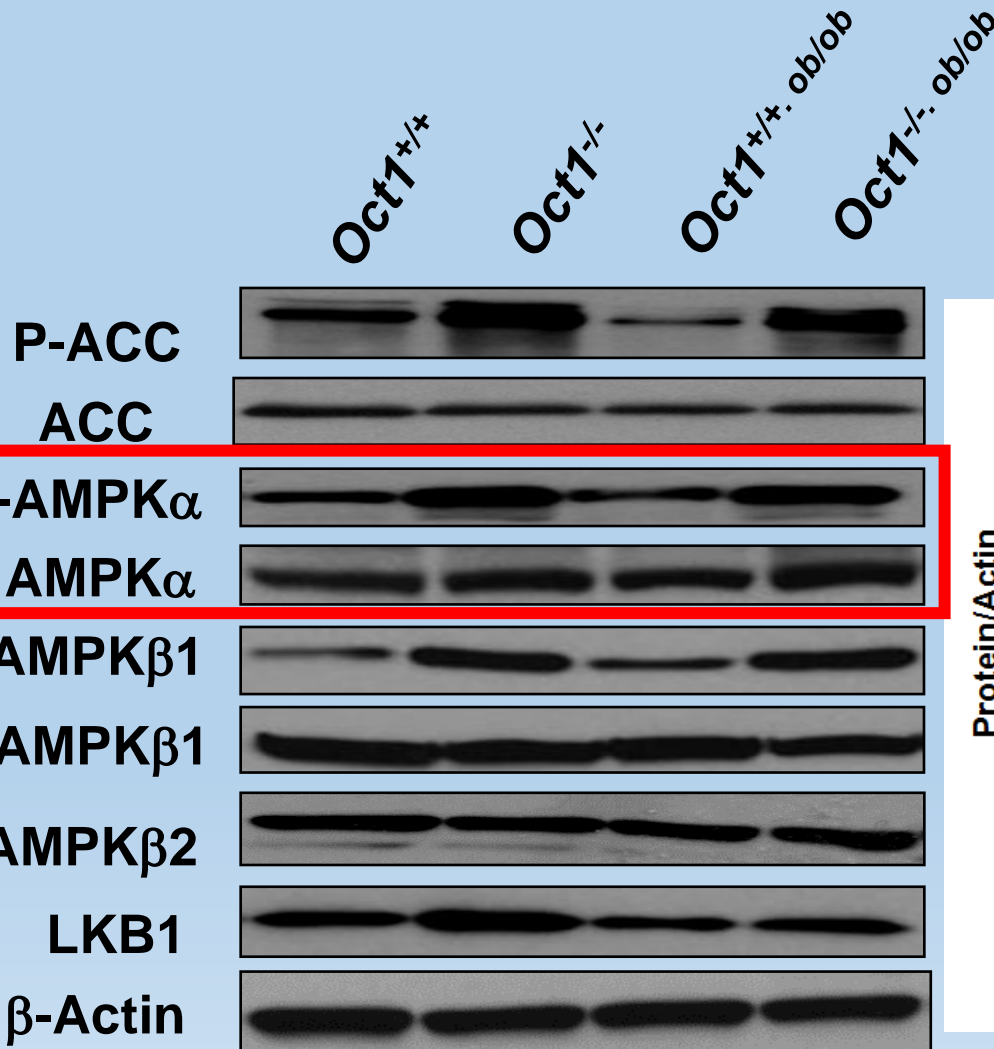
**Oct1 +/+,
hOCT1tg**

5.13g

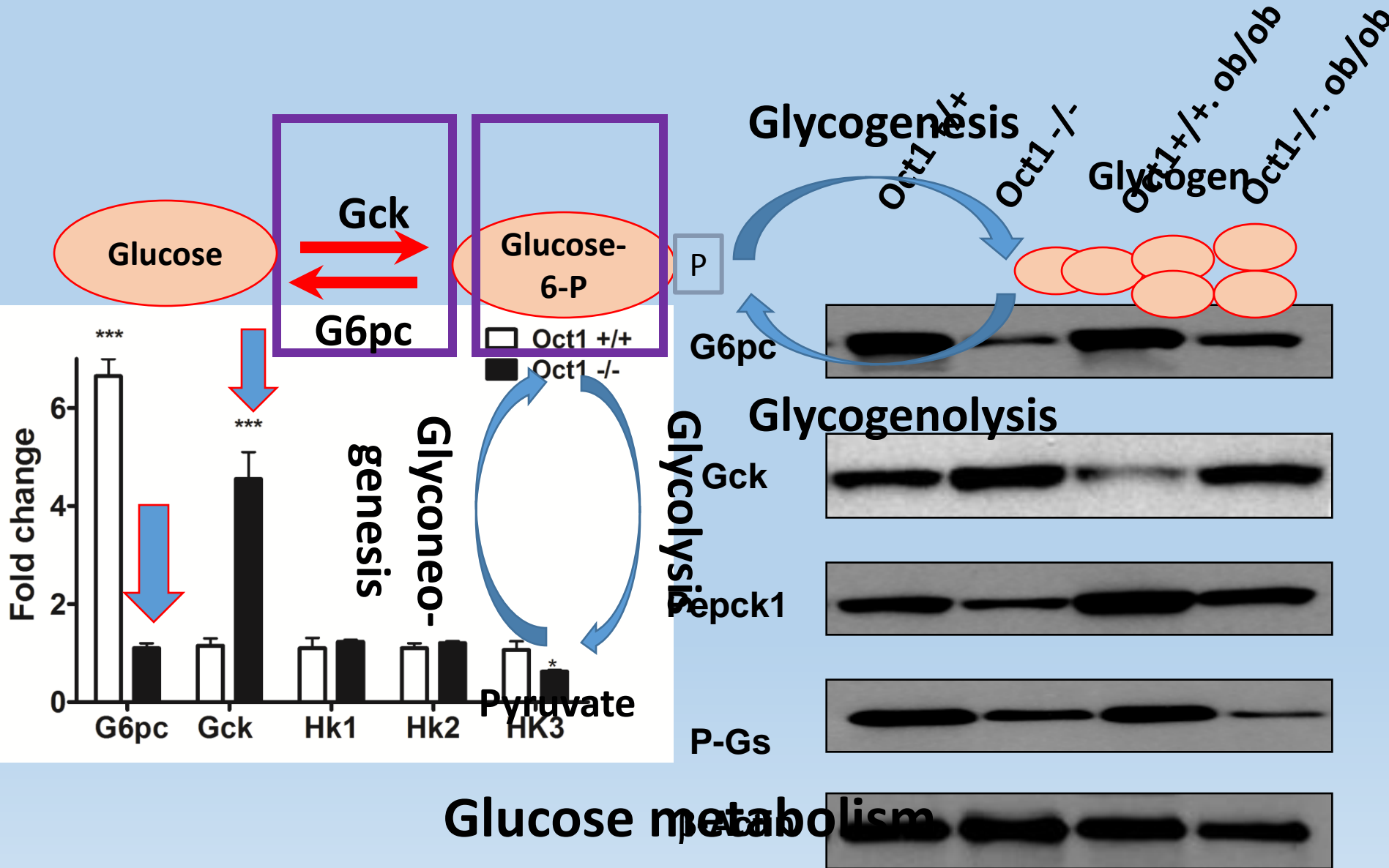


The **non-invasive** method to monitor the fat amount in **living animal**.

OCT1 activates the **P-AMPK** to inhibit the fatty acid synthesis

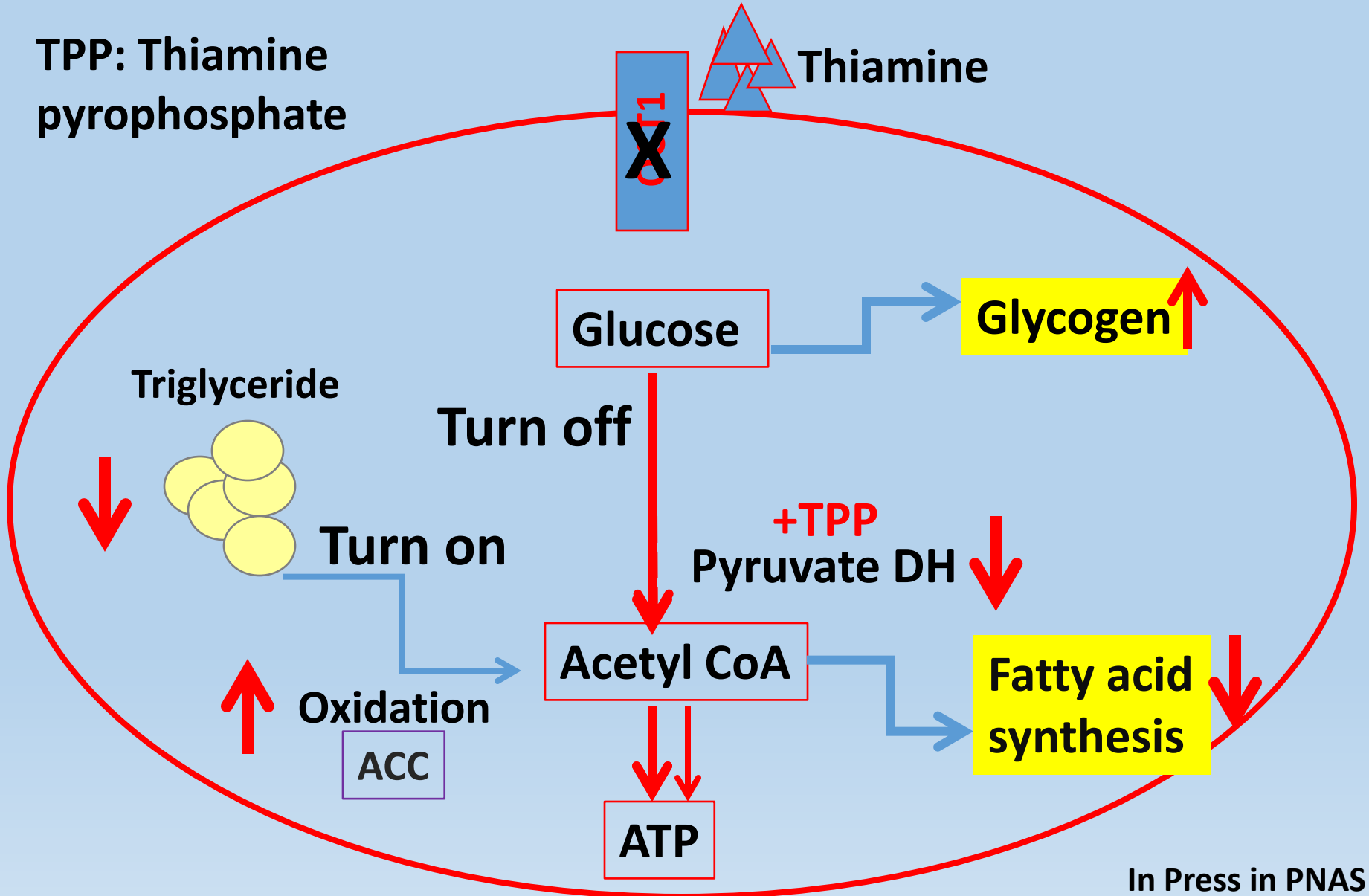
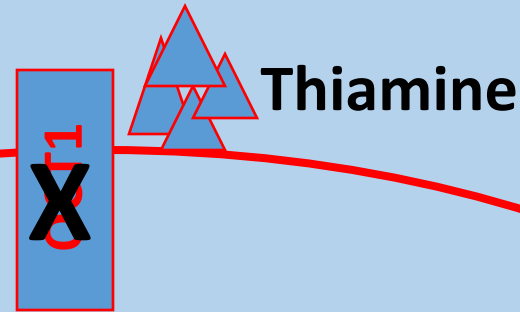


The **glycogenesis** pathways:



The OCT1--The molecular Switch (分子开关) of energy

TPP: Thiamine
pyrophosphate



In the news.....

Science **Highlights** our Discovery.....

METABOLIC DISEASE

A vitamin's dark side in liver disease

Too much of a good thing can be bad for the liver. Chen *et al.* find that mice with high levels of thiamine (vitamin B₁) in their livers develop fatty liver disease, a metabolic disorder that affects one-third of adults in the United States. A protein called organic cation transporter 1 (OCT1) carries dietary thiamine into the liver. When the researchers deleted the *Oct1* gene in mice or fed mice a diet low in thiamine, the mice did not develop the disease. OCT1 also carries the diabetes drug metformin into the liver, which might explain why metformin decreases symptoms of fatty liver disease: By competing with thiamine for OCT1, metformin reduces the amount of dietary thiamine that reaches the liver. — PAK

Proc. Natl. Acad. Sci. U.S.A. 10.1073/pnas.1314939111 (2014).

Science, July 2014

F1000 Prime Wrote the Commentary.....



FM

**Meenakshisundaram
Ananthanarayanan**

F1000 Gastroenterology & Hepatology

Yale University School of Medicine, New
Haven, CT, USA.



[INTERESTING HYPOTHESIS](#) | [NEW FINDING](#) | [NOVEL DRUG TARGET](#)

DOI: 10.3410/f.718467698.793496687

I selected this article because of its demonstration of the relationship of a hepatic cation transporter (organic cation transporter 1 [OCT1]) to steatosis. OCT1 is a transporter known to be involved in the uptake of the anti-diabetic drug metformin. The authors used *Oct1*-null and *Oct1*-transgenic mouse models to show that loss of *Oct1* and overexpression of *Oct1* result in resistance and susceptibility to hepatic steatosis, respectively. The mechanism of this is mediated by the endogenous substrate for *Oct1*, which is thiamine. Low levels of thiamine due to *Oct1* loss (in *Oct1*-null mice) or inhibition by metformin results in increased activation of AMPK phosphorylation. This leads to increased acetyl CoA carboxylase phosphorylation, leading to decreased fatty acid synthesis and fewer triglycerides in the liver. Opposite results are obtained in *Oct1* transgenic mice overexpressing the transporter. In my opinion, this is the first article describing a relationship between a hepatic membrane transporter and the energy sensor AMPK and lipid synthesis.

**Meenakshisundaram
Ananthanarayanan
F1000 Gastroenterology &
Hepatology
Yale University School of Medicine
New Haven, CT, USA.**

Acknowledge

- Chen Lab
- Lan Zhou
- Qi Luo
- Lili Cheng
- Weiqian Zhang
- Xinbin Zhao

Dr. Kathy Giacomini in UCSF
Dr. Daniel Nomura in UC Berkeley
Dr. Yueming Li in MSKCC
Dr. Hao Fan in ASTAR
Dr. Avner Schlesinger in Mount Sinai
Wonderful Colleagues in THU



Let Us Meet Again

We welcome you all to our future conferences of
OMICS International

Please Visit:

www.metabolomicsconference.com

www.conferenceseries.com

<http://www.conferenceseries.com/clinical-research-conferences.php>