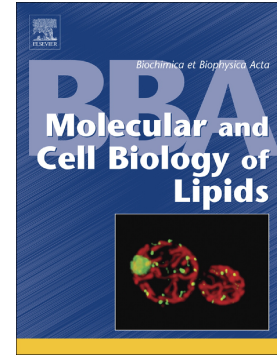


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Turnover of bile acids in liver, serum and caecal content by high-fat diet feeding affects hepatic steatosis in rats

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Abstract

Background: Bile acids (BAs) participate in lipid absorption and serve as metabolic regulatory factors in gut-liver communication. To date, there are no studies on the systemic patterns of BAs in the serum, liver, and gut in the same non-alcoholic fatty

liver disease (NAFLD) model.

Methods: A targeted metabolomics approach and 16S rRNA sequencing were used to identify the profile of BAs and connection between BAs and microbiota. The role and mechanism of altered BAs on hepatic steatosis were investigated.

Findings: In the liver, the composition of taurocholic acid (TCA) was increased, but taurohyodeoxycholic acid (THDCA) and ursodeoxycholic acid (UDCA) were decreased. In the gut, the deconjugated form of TCA (cholic acid (CA)) was increased, while the deconjugated forms of THDCA (α -hyodeoxycholic acid (HDCA)) and ω -muricholic acid (ω MCA) were decreased. In the serum, the composition of TCA was increased, while both HDCA and THDCA were decreased. THDCA induced the gene expression of apolipoprotein, bile secretion-related proteins, and cytochrome P450 family but suppressed inflammatory response genes expression in steatotic hepatocytes by RNAseq analysis. THDCA ameliorated neutral lipid accumulation and improved insulin sensitivity in primary rat hepatocytes. The decreased HDCA level correlated with the level of Bacteroidetes, while the level of CA correlated with the levels of Firmicutes and Verrucomicrobia but correlated inversely with Bacteroidetes.

Conclusion: BAs profiles in the serum, liver and caecal content were altered in a rat NAFLD model, which may affect hepatic lipid accumulation and correlate with gut dysbiosis.

Keywords: Non-alcoholic fatty liver disease; Bile acid; Gut microbiota; TCA; THDCA

Abbreviations:

BAs, Bile acids; NAFLD, non-alcoholic fatty liver disease; TCA, taurocholic acid; THDCA, taurohyodeoxycholic acid; UDCA, ursodeoxycholic acid; CA, cholic acid; HDCA, α -hyodeoxycholic acid; ω MCA, ω -muricholic acid; NASH, non-alcoholic steatohepatitis; VLDL, very low density lipoprotein; FXR, farnesoid X receptor; TGR5, G protein couple receptor 5; BSH, bile salt hydrolase; ASBT, apical sodium-dependent BA transporter; GCDCA, glycochenodeoxycholic acid; DCA, deoxycholic acid; TCDCa, taurochenodeoxycholic acid; ALT, alanine

aminotransferase; AST, aspartate aminotransferase; TG, triglyceride; TC, total cholesterol; HDL-C, high-density lipoprotein cholesterol; LDL-C, low-density lipoprotein cholesterol; GLU, fasting blood glucose; H&E, haematoxylin and eosin; β DCA, 3β -deoxycholic acid; 6-ketoLCA, 6-ketolithocholic acid; T α MCA, tauro α -muricholic acid; T β MCA, tauro β -muricholic acid; TLCA, tauro lithocholic acid; TDCA, taurodeoxycholic acid; T ω MCA, tauro ω -muricholic acid; NorDCA, 23-nordeoxycholic acid; LCA, lithocholic acid; β CDCA, 3β -chenodeoxycholic acid; CDCA, chenodeoxycholic acid; GUDCA, glyoursodeoxycholic acid; GCA, glycocholic acid; ACA, allocholic acid; muroCA, murocholic acid; PCOA, principle coordinate analysis; TUDCA, tauroursodeoxycholic acid;

1. Introduction

Almost 30% of the global population is affected by non-alcoholic fatty liver disease (NAFLD), which accompanies the increasing prevalence of other metabolic abnormalities, including type 2 diabetes, obesity, and cardiovascular disease [1-3]. The spectrum of NAFLD ranges from simple steatosis to non-alcoholic steatohepatitis (NASH) with the development of fibrosis and cirrhosis [4]. NAFLD derives from the accumulation of different lipid species within hepatocytes, which is driven by insulin resistance from energy imbalance, such as excessive free fatty acid delivery to the liver, increased de novo lipogenesis, inadequate increases in very low density lipoprotein (VLDL) secretion, beta-oxidation and bile acid (BA) excretion [5-7]. Although the liver is the master hub that regulates metabolic processes, multiple organs, including adipose tissue, pancreas, muscle and gut, also participates in the progression of NAFLD. Recent studies have shown that changes in the microbiota have a prominent role in NAFLD pathogenesis [8]. The inter-organ communication between the liver and gut is orchestrated by such metabolites as glucose, fatty acid, sterols and BAs [9, 10].

In the liver, primary BAs are biosynthesized from cholesterol and the conjugation with either taurine or glycine makes BAs less hydrophobic and lower toxicity [11]. After biliary secretion, primary BAs are extensively metabolized by the microbiota into secondary BAs, which are more hydrophobic and thus more cytotoxic; then, the secondary BAs are reabsorbed and recirculated through enterohepatic circulation [12, 13]. Exposure to relatively more hydrophobic BAs

(lithocholic acid (LCA), glycochenodeoxycholic acid (GCDCA), deoxycholic acid (DCA) and chenodeoxycholic acid (CDCA)) would induce mitochondrial function disorder and endoplasmic reticulum stress and stimulate inflammatory mediators, resulting in the necrosis and apoptosis of hepatocytes [14]. However, hydrophilic BAs, such as ursodeoxycholic acid (UDCA) and glyoursodeoxycholic acid (GUDCA), have hepatoprotective as well as choleric effects. With the help of active transport processes, the BA enterohepatic circulation participates in several hepatic and gastrointestinal physiological functions including bile flow, cholesterol solubilization and excretion, toxic substance clearance, intestinal absorption of lipophilic nutrients, and metabolic and antimicrobial effects [15].

BAs not only play important roles in the emulsification and absorption of dietary fats and vitamins from the small intestine but also serve as potent signalling molecules. BA signalling is important in the regulation of BA metabolism itself, cholesterol secretion, cholesterol gallstone formation, glucose, lipid, and energy metabolism. BA signalling pathways by the nuclear receptor farnesoid X receptor (FXR), G protein coupled receptor 5 (TGR5) and other nuclear receptors have been identified and well-characterized as mediators of insulin resistance, obesity, lipid metabolism and systemic metabolic processes [16, 17]. The homeostasis of BA composition is not only controlled by the normal function of hepatocytes, the biliary system and ileal enterocytes but also by the appropriate interaction between BAs and the gut microbiota [12, 14, 18]. BAs could influence the gut microbiota composition by shaping the host's intestinal immunity and some intrinsic antimicrobial properties [19, 20]. In turn, alterations in the composition of the microbiota affect BA synthesis and uptake [21]. For example, BAs are directly deconjugated by gut bacteria, such as *Bacteroides*, *Clostridium*, and *Eubacterium* with bile salt hydrolase (BSH) activity [17]. In addition, modulating apical sodium-dependent BA transporter (ASBT) and the signalling properties of BAs by microbial enzymatic activities in the small intestine would prevent active reuptake of BAs [22].

With the development of both non-targeted and targeted metabolomics in recent decades, quantitative analyses can test more than 70 types of BA metabolites. Some studies reported the composition or changes in BAs of the serum, liver or faeces in NAFLD rodent models or patients [4, 23]. García-Cañaveras et al used an untargeted metabolomic method to discover four elevated BAs, including GCDCA,

glycochenodeoxycholate-3-sulfate, taurochenodeoxycholic acid (TCDCA) and taurocholic acid (TCA) in human steatotic liver [24]. Compared with healthy donors, the significant alterations in BAs, including primary and secondary BAs in the blood, were found in NASH patients but not NAFL patients [25, 26]. Mouzaki et al used a quantitative faecal BA method and found a significant increase in primary BAs and total BAs in NAFL patients compared to healthy donors [27]. Zheng et al found a robust and significant increase in the intestinal BA pool including 42 quantified BAs within 12 h of high-fat diet treatment in mice [18]. Since the BA pool is coordinately regulated by the liver and gut, a comprehensive understanding of the metabolism of BAs in the overall BA circulation system, including the liver, gut and serum, is of great importance. To date, there have been no reports on the systemic patterns of BAs in the serum, liver, and caecal content in the same NAFLD model.

Our present study utilized a targeted metabolomics approach to identify the profile of BAs in the serum, liver, and caecal content and used 16S rRNA in the caecal content microbiome to elucidate the connection between BAs and the microbiota in NAFLD and investigated the role and potential mechanism of altered BAs in the liver on hepatic steatosis.

2. Materials and Methods

2.1 Animal studies and sample collection

Ten six-week-old male Sprague–Dawley rats were purchased from the Shanghai Experimental Animal Centre of the Chinese Academy Sciences (Shanghai, China). All animal experiments were performed following the National Institutes of Health Guidelines for the Care and Use of Laboratory Animals and were permitted by the Institutional Animal Care and Use Committee of RenJi Hospital, School of Medicine, Shanghai Jiao Tong University. Rats were fed a standard diet with 1 week of acclimatization and later randomly assigned to the two groups. The Control group received a normal diet (10 kcal%), while the NAFLD group was fed a high-fat diet (D12492, 60 kcal%, Research Diets, New Brunswick, NJ, USA) for eighteen weeks to establish the NAFLD model. Rats were fed the diets and water *ad libitum* and housed in a pathogen-free, temperature and humidity controlled environment with a 12 h light/12 h dark cycle. Body weight and food intake were monitored weekly for 18

weeks. All rats were fasted overnight before sacrifice, and then blood samples were collected from the retinal venous plexus. The blood was centrifuged at 3,000 g for 15 min at 4 °C for serum collection. Parts of the liver were fixed in 4% formaldehyde overnight for histological examination or snap-frozen for later analysis. Other livers, stool samples and caecal content were carefully dissected and kept in liquid nitrogen before storage at -80 °C.

2.2 Biochemical index and histological analysis

The analysis of serum alanine aminotransferase (ALT), aspartate aminotransferase (AST), triglyceride (TG), total cholesterol (TC), high-density lipoprotein cholesterol (HDL-C), low-density lipoprotein cholesterol (LDL-C) and fasting blood glucose (GLU) were measured using an automatic biochemical analyser (Siemens Advia 1800, Siemens Healthcare Diagnostics, Tarrytown, NY, USA). Paraffinized and frozen liver sections were stained with haematoxylin and eosin (H&E) and oil Red O, respectively.

2.3 BA metabolite profile assessment

The BAs from the serum, liver, caecal content were quantitatively measured by Metabo-Profile Inc. (Shanghai, China) according to a previously reported protocol [18, 28, 29]. BA analysis was performed with an ACQUITY BEH C18 column (1.7 mm, 100 mm, 3.2 mm internal dimensions) (Waters Corp., Milford, MA, USA). One standard calibration solution at 10 different concentration levels contains 73 standards and the QC was tested every 12 samples. The peak annotation and quantitation were performed by TargetLynx application manager (Waters Corp., Milford, MA, USA). For details, see Methods in the Supporting Information.

2.4 Gut microbe 16S rRNA sequencing

Microbial DNA was extracted from rat caecal content and stool samples using the E.Z.N.A.® Soil DNA Kit (Omega Bio-tek, Norcross, GA, USA) according to the manufacturer's protocols. The final DNA concentration and purification were determined using a NanoDrop 2000 UV-vis spectrophotometer (Thermo Scientific, Wilmington, USA), and DNA quality was checked by 1% agarose gel electrophoresis. The V3-V4 hypervariable regions of the bacterial 16S rRNA gene were amplified with primers 338F (5' - ACTCCTACGGGAGGCAGCAG-3') and 806R

(5 '-GGACTACHVGGGTWTCTAAT-3') with a thermocycler PCR system (GeneAmp 9700, ABI, USA). The PCR reactions were as follows: 3 min of denaturation at 95 °C, 27 cycles of 30 s at 95 °C, 30 s for annealing at 55 °C, and 45 s for elongation at 72 °C, and a final extension at 72 °C for 10 min. PCR reactions were performed in a 20 µL mixture containing 4 µL of 5×FastPfu Buffer, 2 µL of 2.5 mM dNTPs, 0.8 µL of each primer (5 µM), 0.4 µL of FastPfu Polymerase and 10 ng of template DNA. The PCR products were extracted from a 2% agarose gel and further purified using the AxyPrep DNA Gel Extraction Kit (Axygen Biosciences, Union City, CA, USA) and quantified using QuantiFluor™-ST (Promega, Madison, WI, USA) according to the manufacturer's protocol. Purified amplicons were pooled in equimolar and paired-end sequenced (2×300) on an Illumina MiSeq platform (Illumina, San Diego, CA, USA) according to the standard protocols by Majorbio Bio-Pharm Technology Co. Ltd. (Shanghai, China). Raw fastq files were quality-filtered by Trimmomatic and merged by FLASH with the following criteria: (i) The reads were truncated at any site receiving an average quality score <20 over a 50 bp sliding window. (ii) Sequences with an overlap longer than 10 bp were merged according to their overlap with a mismatch of no more than 2 bp. (iii) Sequences of each sample were separated according to barcodes (exactly matching) and primers (allowing 2 nucleotide mismatching), while reads containing ambiguous bases were removed. Operational taxonomic units (OTUs) were clustered with 97% similarity cut-off using UPARSE (version 7.1 <http://drive5.com/uparse/>) with a novel 'greedy' algorithm that performs chimaera filtering and OTU clustering simultaneously. The taxonomy of each 16S rRNA gene sequence was analysed using an RDP Classifier algorithm (<http://rdp.cme.msu.edu/>) against the Silva (SSU123) 16S rRNA database using a confidence threshold of 70%.

2.5 Primary Rat hepatocyte isolation

Hepatocytes were isolated from rats by a two-step collagenase perfusion according to a previous method [30]. The digested liver sections were filtered through a 70-µm nylon mesh. Rat hepatocytes were collected after centrifugation at 50×g for 5 min. The cells were washed twice with DMEM and then resuspended in culture medium (William's medium E, 10% FBS). Trypan Blue exclusion yielded cell viability greater than 85%. The cells were plated in collagen I coated six-well plates with William's E medium supplemented with 10% FBS, penicillin (100 U/ml) and streptomycin (100 mg/ml). Cells were cultured in a humidified incubator at 37°C and

5% CO₂. Experiments were started at 4 h after the isolation of hepatocytes. The medium was replaced with a fresh medium with the addition of oleic acid and palmitic acid at a ratio of 2:1 at a concentration of 0.25 mmol/L; BSA was used as a control. After 48 h of incubation, the culture medium was removed, cells were washed with PBS twice and further cultured in medium with or without 10 μM Z-guggulsterone (Selleck Chemicals, Texas, USA) for 2 h before the addition of TCA (Sigma Aldrich, St. Louis, MO, USA) at 62.5 μM, 125 μM, 250 μM, 500 μM, and 1000 μM, and taurohyodeoxycholic acid (THDCA) (Shanghai ZZBio CO LTD, Shanghai, China) at 15 μM, 30 μM, 62.5 μM, 125 μM, and 250 μM. After 24 h, cells were washed with PBS before RNA isolation and Oil Red O staining. At the same time, after this preincubation, the cells with OAPA or THDCA (250 μM) were treated with 10 μg/ml insulin for 0, 20, and 40 min and then collected for immunoblot analysis.

2.6 RNA-Seq analysis

Total RNA was isolated using TRIzol Reagent (Invitrogen, Carlsbad, CA, USA) according to the manufacturer's instructions. The cDNA Library preparation was done using the RNA-Seq Sample Prep Kit (Illumina) according to the manufacturer's instructions. For the QC step, an Agilent 2100 Bioanalyzer and an ABI StepOnePlus Real-Time PCR System were used to qualify and quantify the sample library. Each cDNA library was amplified once before sequencing. Sequencing was performed on an Illumina HiSeq X Ten at Biotecan Co., Ltd. (Shanghai, China). The RNA-Seq data were analysed as previously described [31, 32]. DAVID (<http://david.abcc.ncifcrf.gov/home.jsp>) functional annotation cluster analysis was performed on the list of differentially expressed genes (over 1.5-fold and $P < 0.05$). The gene ontology (GO) biological process (BP) terms were used to categorize the enriched biological themes in the list of differentially expressed genes in DAVID.

2.7 Quantitative real-time PCR

Total RNA was extracted from rat liver tissues and cells using TRIzol reagent, and reverse transcription was performed using PrimeScript RT Reagent Kit (Takara, Shiga, Japan), according to the manufacturer's instructions. Quantitative PCR was performed with a SYBR Green PCR kit (Takara, Shiga, Japan) using GAPDH as an internal standard. The primers used for gene expression analysis are shown in Supplementary Table 1.

2.8 Oil red O staining

Cells were stained with oil red O solution (Goodbio Technology, Wuhan, China). Briefly, cells were washed three times with PBS and fixed with 4% formalin. After fixation, cells were incubated with 0.5% oil red O solution for 1 h at room temperature. Images were obtained using a microscope (Olympus, Japan).

2.9 Western blot analysis

Proteins from primary rat hepatocytes were extracted in RIPA buffer (Beyotime, Shanghai, China). Total protein samples of 100 µg each were separated on a 10% SDS-PAGE and electro-transferred to PVDF membranes. After blocking with 5% BSA in TBST for 1 h at room temperature, the membranes were incubated with antibodies against phospho-Akt Ser473 (Cell signalling technology, MA, USA), total-AKT (Cell signalling technology, MA, USA), and beta-actin (Proteintech, IL, USA) overnight at 4°C. The protein signals were visualized using the ECL Western Blotting Kit (Bio-Rad, Hercules, Calif., USA).

2.10 Cell transfection and dual-luciferase assay

The BRL-3A rat hepatocytes were purchased from the Cell Bank of the Chinese Academy of Sciences (Shanghai, China). Cells were cultivated in high-glucose DMEM supplemented with 10% FBS and 100 U/ml penicillin-streptomycin at 37°C in an atmosphere containing 5% CO₂. pGMFXR-Lu (Genomeditech, Shanghai, China) and pRL vector (Renilla luciferase control reporter vector) were co-transfected into BRL-3A cells by using Lipofectamine 3000 (Invitrogen) for 24 h; then, cells were incubated with THDCA or PBS for another 24 h, and luciferase activities were measured by a dual-luciferase reporter kit (Beyotime, China).

2.11 Statistical analysis

All of the physiological, biochemical, BA, and microbiota data were collected from five individuals per group as biological replicates. Taxonomy abundance at different ranks was normalized to the summation by each sample. The BA data generated from the UPLC-TQMS analysis were imported to the Simca-P 13.0 software package (Umetrics, Umea, Sweden) for multivariate statistical analysis. Mann–Whitney U tests and Spearman correlation were performed using SPSS 13.0 software (IBM Corp, Armonk, NY, USA). The statistically significant p values were adjusted using a false discovery rate of 0.05. Spearman correlation analysis was used

to evaluate the interactions between gut microbiota and BA levels, giving a value ranging from 1.0 (maximum positive correlation) to -1 (maximum negative correlation) and 0 (no correlation). All statistical graphs were made using GraphPad Prism (version 6.0; GraphPad Software, San Diego, USA).

3. Results

3.1 Concentrations of BA species in the serum, liver and caecal content were altered in the NAFLD rat model

To study chronic high-fat diet induced hepatic steatosis and changes in BAs, we fed rats with a high-fat diet for 18 weeks. The NAFLD group exhibited increased body weight and liver index (liver to body weight ratio) (Fig. S1A, Fig. S1B). The HE and oil Red O of liver samples from the NAFLD group displayed steatosis or microvesicular fatty degeneration (Fig. S1C, Fig. S1D, Fig. S1E, Fig. S1F). The levels of ALT and AST in the serum significantly increased in the NAFLD group (Fig. S1G). The serum TC, LDL-C and glucose increased significantly and serum HDL-C decreased significantly (Fig. S1H).

BAs from the serum, liver, and caecal content were analysed using UPLC-MS/MS. From the serum samples, the NAFLD group demonstrated significantly increased TCA and decreased α -hyodeoxycholic acid (HDCA), THDCA, 3β -deoxycholic acid (β DCA), and 6-ketolithocholic acid (6-ketoLCA) compared to the Control group (Fig. 1A). In the liver, only one tauro-conjugated BA, TCA, was significantly increased. However, 10 BAs from the NAFLD group were significantly decreased in the liver, including 4 tauro-conjugated BA species including tauroolithocholic acid (TLCA), THDCA, taurodeoxycholic acid (TDCA) and tauro ω -muricholic acid (T ω MCA). Furthermore, β DCA, HDCA, 6-ketoLCA, 23-nordeoxycholic acid (NorDCA), LCA and 3β -chenodeoxycholic acid (β CDCA) showed lower levels in the NAFLD group (Fig. 1B). In the caecal content, primary BAs including cholic acid (CA) and chenodeoxycholic acid (CDCA) were significantly increased. In addition, glycine-conjugated species, such as GUDCA, glycocholic acid (GCA) and allocholic acid (ACA), were significantly increased, while HDCA, murocholic acid (muroCA), NorCA and ω -muricholic acid (ω MCA) were decreased in the NAFLD group (Fig. 1C).

3.2 Composition of BA species in the serum, liver and caecal content were altered in the NAFLD rat model

We calculated the percentage of the concentration of each BA to the concentration of the sum of all BA species. As a result, in the serum, the NAFLD group had a decreased ratio of HDCA of 9.54%, which accounted for 32.85% in the Control group. The TCA proportion rose to 19.77% compared to the Control group at 3.75%, while the percentage of muroCA, 6-ketoLCA, β DCA and ω MCA significantly decreased after HFD feeding in the serum (Fig. 2A, Fig. 2B). As a high proportional component of the BA pool in the liver, the TCA proportion increased from 40.80% to 61.90% with HFD treatment, the result of which was consistent with its increasing trend in the serum. However, the THDCA proportion decreased from 13.95% to 3.06%. Most BA proportions decreased with HFD treatment, including tauro-conjugated species such as T ω MCA, TDCA, TLCA, β DCA, 6-ketoLCA, HDCA, LCA, NorDCA, muroCA, 3 β -chenodeoxycholic acid (β CDCA), and UDCA (Fig. 2C, Fig. 2D). Caecal results showed a significantly elevated proportion of CA from 3.03% to 26.11% and other elevated BAs including GCA, CDCA, 3-dehydrocholic acid (3-DHCA), ACA, and NorCA, and a diminished proportion of ω MCA, HDCA, and muroCA with HFD treatment (Fig. 2E, Fig. 2F).

3.3 Effects of THDCA and TCA on hepatic steatosis in vitro

Based on the above data, as the two most prevalent components of the BA pool in liver, the concentrations of TCA and THDCA in the liver were dramatically changed by high-fat diet feeding. The TCA level increased significantly while the THDCA level decreased significantly. In addition, in the caecal content and serum samples, TCA and THDCA, or their related deconjugation species, paralleled the changes observed in the liver samples. RNA sequencing was used to study the transcriptional profile alterations of steatotic primary rat hepatocytes upon TCA and THDCA treatment. The cluster map illustrated that the concentrations of THDCA and TCA changed significantly in response to OAPA treatment (Fig. 3A). As shown in Fig. 3B, there were a total of 324 changed genes (over 1.5-fold, $p < 0.05$) in the OAPA group compared with the genes in the BSA group; among these genes, 226 were upregulated and 96 were downregulated. Compared with OAPA-treated cells, 190 genes were upregulated (over 1.5-fold, $p < 0.05$) and 145 genes were downregulated (over 1.5-fold, $p < 0.05$) in the THDCA group, while there were 89

upregulated genes and 69 downregulated genes in the TCA group (Fig. 3C, 3D). The upregulated and downregulated genes were pooled, and gene ontology (GO) analysis was performed using the DAVID default parameters. As shown in Fig. 3E, the 190 genes that were upregulated in the THDCA group, compared to their expression in the OAPA group, were mainly enriched in areas such as “lipid metabolic process”, “regulation of transport”, and “fatty acid derivative metabolic process”. As shown in Fig. 3F, the genes downregulated in the THDCA group compared to their expression in the OAPA group were mainly enriched in processes such as “regulation of cell proliferation”, “cell differentiation”, and “regulation of transport”. Therefore, THDCA treatment might improve lipid processing and BA transportation. THDCA treatment upregulated the transcription of the apolipoprotein family (Apoa1, Apoa4, Apob), bile secretion (Baat, Abcc3, Ephx1), insulin-like growth factor binding protein (Igfbp1, Igfbp4) and the cytochrome P450 family (Cyp1a1, Cyp2a1), while it suppressed the expression of inflammatory response (Cxcl12, Cxcl3) and LPS response genes (Wnt7a, Nppb) (Fig. 3G). Oil Red O staining revealed that THDCA (250 μ M) treatment significantly ameliorated neutral lipid accumulation in OAPA-treated hepatocytes (Fig. 3H). Following stimulation with insulin, THDCA (250 μ M) could elevate the level of phospho-Akt, resulting in improvements in the insulin signalling pathway (Fig. 3I). Raw data of RNA sequencing were deposited at SRA database of NCBI with the accession number SRP199028.

3.4 THDCA ameliorated hepatic steatosis by activating FXR in vitro

As shown above, many of the genes regulated by THDCA are FXR's downstream genes. The mRNA level of FXR was upregulated in the steatotic liver compared with the normal liver (Fig. 4A). We observed that THDCA (250 μ M) treatment increased the activity of FXR reporter activity in BRL-3A cells, indicating that THDCA was able to activate FXR (Fig. 4B). Moreover, Oil Red O staining showed that THDCA treatment significantly ameliorated neutral lipid accumulation in OAPA-treated BRL-3A cells, and the neutral lipid accumulation was markedly increased in response to the combination treatment of THDCA and Z-guggulsterone (Fig. 4C). Furthermore, compared with the results of the OAPA group, THDCA treatment significantly increased the mRNA expression of FXR's downstream genes including Ppargc1a, NTCP, Fkp5 and Lpin1, and this increased expression was

attenuated by the FXR antagonist Z-guggulsterone (Fig. 4D). Similar results were seen in rat primary hepatocytes by qRT-PCR (Fig. 4E). The mRNA levels of FXR and FXR's downstream genes (BSEP, CYP2c22, NTCP, Lpin1, etc.) were dose-dependently increased by THDCA, whose effects were more obvious than those of TCA. In the presence of Z-guggulsterone, the promoting effects of THDCA and TCA were attenuated.

3.5 Alteration of gut microbiome composition in response to HFD feeding

As BAs are closely related to the gut microbiota, we next performed 16S rRNA gene sequencing with the caecal content samples. An unweighted principle coordinate analysis (PCOA) revealed that the gut microbiota structure changed significantly in response to HFD feeding. HFD-related differences were mainly observed along the first principal coordinate (PCoA1), which accounted for the largest proportion (52.1%) of total variation (Fig. 5A), while PCoA2 made up 20.08% of the total variation. Furthermore, the hierarchical clustering tree based on OTU level showed the gut microbiota structure of all samples (Fig. 5B).

At the phylum level, 13 different phyla were identified in both groups, which were dominated by members of the Firmicutes, Bacteroidetes and Proteobacteria phyla. By comparing the taxonomic profiles at the phylum level, the NAFLD group was characterized by a significantly elevated enrichment of Firmicutes at 87.95% abundance compared to 61.60% in the Control group. However, the Control group had a higher abundance of Bacteroidetes (30.35% compared to 3.67% in the NAFLD group (Fig. 5C, 5D)). The results could indicate the NAFLD could increase the ratio of Firmicutes to Bacteroidetes. After HFD treatment, the Verrucomicrobia abundance increased significantly from 0.14% to 3.85%. Moreover, there were reductions in the prevalence of the Cyanobacteria, Saccharibacteria and Elusimicrobia phyla in the NAFLD group versus the Control group.

At the genus level, the taxonomic analysis revealed the presence of 153 genera, 74 of which exhibited significant changes between the two groups. The results were similar to those presented at the phylum level. The abundance of *norank_f_Bacteroidales_S24-7_group*, *Alloprevotella*, *Prevotellaceae_Ga6A1_group*, *Prevotellaceae_NK3B31_group*, *Prevotella_9*, *Alistipes*, *Prevotellaceae_UCG-001*, *Butyricimonas*, *unclassified_f_Prevotellaceae*

and *unclassified_f_Porphyrimonadaceae* belonging to the phylum *Bacteroidetes* also decreased significantly in the NAFLD model. Consistent with the change in the *Firmicutes* phylum, the abundance of *Phascolarctobacterium*, *[Eubacterium]_fissicatena_group*, *Terrisporobacter*, *[Ruminococcus]_torques_group*, *Erysipelatoclostridium*, *Lachnospiraceae_UCG-010*, *Faecalitalea*, *Candidatus_Stoquefichus*, *Staphylococcus*, *Enterococcus*, *Blautia*, *unclassifiedoClostridiales*, *Granulicatella*, *[Eubacterium]_nodatum_group*, *Streptococcus*, *Lactococcus*, *Christensenellaceae_R-7_group*, *[Ruminococcus]_gavreauii_group*, *Family_XIII_AD3011_group* and *Candidatus_Soleaferrea* increased significantly, while the abundance of *Akkermansia* from the phylum *Verrucomicrobia* was elevated (Fig. 5E,5G). Collectively, our data clearly indicated that HFD feeding resulted in a loss of microbial diversity and particularly increased the abundance of the *Firmicutes* phylum.

The pairwise Pearson correlations among all associated OTUs of the top 50 most abundant genera were visualized with a correlation network diagram, and all of the genera were from the phyla *Firmicutes*, *Bacteroidetes*, *Proteobacteria*, *Actinobacteria* and *Verrucomicrobia*. *Candidatus_Stoquefichus*, *Quinella*, *Ruminococcaceae_NK4A214_group*, *Clostridium_sensu_stricto_1* and *[Eubacterium]_fissicatena_group* from the *Firmicutes* phylum had the highest importance and the highest betweenness centrality within the NAFLD and Control network. This finding indicated that the changes in genus abundance of *Firmicutes* were most important in gut microbiota dysbiosis. The results of the 16S rRNA gene sequencing of the stool samples are shown in Fig. S2 and raw data of the 16S rRNA sequencing were deposited at SRA database of NCBI with the accession number SRP198883 and SRP198884.

3.6 Correlation of CA, HDCA or ω MCA with the gut microbiome in response to HFD feeding

With the help of the microbiota, BAs, including primary BAs, change markedly in the caecal content. As the top two most prevalent species in the liver BA pool, TCA and THDCA changed significantly in liver and serum samples. We hypothesized that they were converted into CA and HDCA, respectively, which made up the largest component of the BA caecal content pool. Tauro α -muricholic acid (T α MCA) and tauro β -muricholic acid (T β MCA) would be deconjugated into ω MCA by the gut

microbiota in the intestine. To provide a better understanding of the correlation of CA, HDCA or ω MCA with the gut microbiota, a Spearman correlation analysis was performed between the relative abundance of the differential microbial phylum or genus and the concentrations of these three BAs in the caecal content samples. To visualize the correlations of HDCA, ω MCA and CA, unsupervised clustering of OTUs to reveal different clusters of phyla or genera was first performed. HDCA was positively correlated with *Bacteroidetes*, which decreased in the NAFLD group. CA was positively correlated with *Firmicutes* and *Verrucomicrobia* and negatively correlated with *Bacteroidetes* (Fig. 6A).

Among the differential microbial genera shown in the heatmap, each had at least one significant correlation with a BA (Fig. 6B). Almost all of the microbes were significantly correlated with specific BAs. Thus, these microbes might be the bacteria that respond differentially to alterations in specific HFD-induced BA secretion. Through cluster analysis, the gut microbiome was categorized into three classes. Class G1 and most of Class G2 were negatively correlated with HDCA and ω MCA and were positively correlated with CA. The microbiome of Class G3 and part of Class G2 were positively correlated with HDCA and ω MCA and negatively correlated with CA. Considering the five top-ranked microbiome components related to BA based on the correlation coefficient and p value, it was shown that HDCA was closely positively correlated with *Ruminococcaceae_UCG-010*, *Peptococcus*, *Turicibacter*, and *norank_f_Bacteroidales_S24-7_group*, while it was negatively correlated with *unclassified_f_Christensenellaceae*. CA was closely positively correlated with *Staphylococcus*, *Actinomyces* and *Lachnospiraceae_UCG-010*, while it was negatively correlated with *[Eubacterium]_xylanophilum_group* and *Ruminiclostridium_6*. ω MCA was closely positively correlated with *Parasutterella*, *Tyzzarella*, *Intestinimonas*, *Lachnospiraceae_UCG-006* and *[Eubacterium]_brachy_group*. The correlation of CA, HDCA or ω MCA with the gut microbiome in the stool samples is shown in Fig. S3.

4. Discussion

BAs are amphipathic molecules that are produced in the liver using cholesterol as a raw material. Primary BAs can be synthesized via the classic (neutral) pathway and the alternative (acidic) pathway in the liver. After conjugation with glycine or taurine, BAs are excreted by hepatocytes into the canalicular space via the bile salt

export pump (BSEP or ABCB11) [33]. The bile containing BAs, free cholesterol and phospholipids is further released into the duodenum after a meal. The primary BAs are converted into secondary BAs by microbial modification in the gut. BAs are recirculated to the liver via the enterohepatic circulation by BA transporters or binding proteins (SLC10A2, ASBT, FABP6, IBABP, SLC51A/B, and OST α/β located on ileal enterocytes and transporters on hepatocytes (NTCP or OATP)) [34].

Our present study showed the altered BA pool size and compositions in the serum, liver and caecal content after 18 weeks of high-fat diet feeding. The composition of TCA was increased, but THDCA was decreased in the liver. In the gut, the deconjugated form of TCA (CA) was increased, while the deconjugated form of THDCA (HDCA) was decreased. In the serum, the composition of TCA was increased, while both HDCA and tauro-conjugated HDCA (THDCA) were decreased. THDCA but not TCA induced the gene expression of apolipoprotein, bile secretion related proteins, and the Cytochrome P450 family, but suppressed inflammatory response gene expression in steatotic hepatocytes. As a result, THDCA ameliorated neutral lipid accumulation through activating FXR and improved insulin sensitivity in hepatocytes.

THDCA is a natural BA with hydrophilic properties that better stimulates cholesterol and phospholipid secretion into bile versus tauroursodeoxycholic acid (TUDCA) and TCA [35]. Considering THDCA's relatively high hydrophilicity, this BA has been proposed for the treatment of hepatic disorders. In the current study, we demonstrated that THDCA could ameliorate lipid accumulation through increased expression of apolipoprotein family and lipid metabolism genes and improve insulin sensitivity in a concentration-dependent manner in hepatocytes. As a FXR agonist, THDCA would reverse hepatic steatosis and protect against liver damage caused by HFD by stimulating FXR and its downstream target. In the NAFLD model, the composition of THDCA was decreased dramatically, which might be one of the reasons for lipid accumulation in the liver. We found a decreased composition of UDCA in the liver samples of the NAFLD group compared to the Control group. UDCA has been widely used to promote bile secretion in the clinic. UDCA and its taurine-conjugated variant could improve steatosis and inflammation in an animal model [36], while clinical studies showed that it significantly improved hepatic insulin resistance and glycaemic control but not histological improvement [36-38]. Of the natural FXR agonists, CDCA is the most potent endogenous activator, while LCA,

DCA and CA activate FXR with a moderate efficacy, with the conjugated forms being less potent [39]. Taken together, these data demonstrate that THDCA is a potentially potent FXR agonist in vivo.

TCA is the hydrophobic product of the conjugation of CA with taurine, which was found to downregulate gluconeogenic genes and induce proinflammatory gene expression in hepatocytes [40, 41]. TCA might be a potential biomarker of liver injury in rat toxicity studies [42]. Following treatment of rats with streptozotocin and high-fat diet, liver and plasma TCA were increased in all mice fed a HFD, and significantly more of those mice developed HCC versus controls [43]. Through bile acyl-CoA synthetase and bile acid-CoA, primary BAs are mainly conjugated to the amino acid taurine to form sodium salts with increased solubility in rodents [16, 44]. In fatty liver, due to increased synthesis of primary BAs, a large amount of CA is converted into TCA, which results in its increased proportion in the BA pool. Although TCA has been reported to improve insulin sensitivity and glucose metabolism through the ERK1/2 and AKT pathways, it would interfere with the secretion of VLDL particles [45-47]. Our results are in agreement with previous studies in the liver of human samples, reporting that the concentrations of TCA were significantly higher in the NAFLD group [24]. Based on transcriptome profiling and qRT-PCR, we found that TCA has a reduced effect on lipid metabolism and transportation and FXR activation versus THDCA.

Serum BAs would come from BAs absorbed in the portal or hepatic vein. The serum concentration of TCA was the only BA to be markedly higher in the NAFLD group, which was consistent with the observation that TCA was significantly higher in the plasma of patients with steatosis when compared to healthy people [48]. BA profiles in steatotic patients display similar changes to our high-fat diet fed rodent model. TCA was increased significantly in a diabetic mice model [49]. Similar to the changes in the liver, we found HDCA and THDCA to be decreased in serum samples in NAFLD. Serum TCA may be considered an indicator of NAFLD and a more sensitive and non-invasive diagnosis method.

Our results are in agreement with previous studies reporting that high-fat diet induced changes in intestinal flora including the increased abundance of *Firmicutes* and decreased abundance of *Bacteroidetes* [4, 23]. From our observation, *Bacteroidetes* is positively correlated with HDCA through deconjugation and

dihydroxylation of BAs. Previous research has shown that *Prevotella* was negatively correlated with CA [18]. Our results confirmed a similar correlation between *Prevotella_9* and CA. HDCA was positively correlated with *Ruminococcaceae_UCG-009*, *Ruminococcaceae_UCG-010* and *Ruminococcaceae_UCG-013*, which are genera from the *Firmicutes* phylum. In our study, we found that ω MCA was positively correlated with *Parasutterella*, *[Eubacterium]_brachy_group*. ω MCA was reported to be converted to β MCA through the oxidation of the *Eubacterium lentum* strain, so we further studied the species of the microbiota in the NAFLD model and identified relationships with BAs [50, 51].

The present study has several limitations, including the absence of information about the BA profile in the portal vein and a lack of intervention on the gut microbiota. Furthermore, the therapeutic effect of THDCA administration on an animal model of NAFLD requires further investigation. Additional studies about the relationship between BAs and the gut microbiome and whether THDCA could selectively eliminate bacteria or whether augmentation of specific gut microbiota would modify THDCA would be useful.

In conclusion, we reported the turnover of the BA profile in the serum, liver and caecal content in a rat NAFLD model. THDCA might improve hepatic steatosis in vitro through activating FXR. In addition, the altered BAs are highly correlated with gut dysbiosis.

5. Authors' contributions

YM and XL participated in the research design. JZ and YT conducted the animal experiments. XL, JL, CL and DX collected the data and performed the data analysis. XL, YT and YW contributed to the writing of the manuscript. All authors have read and approved the final manuscript.

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8. Conflict of interest

The authors declared that they had no conflicts of interest to this work.

Figure legend

Fig. 1 Concentrations of BA species in serum, liver and caecal content were altered in the NAFLD rat model (A) BAs in serum. (B) BAs in liver. (C) BAs in caecal content. The data are expressed as the mean \pm SEM. *, $p < 0.05$, **, $p < 0.01$, ***, $p < 0.001$ vs. Control group.

Fig. 2 Composition of BA species in serum, liver and caecal content were altered in the NAFLD rat model (A) Changes in serum BA composition in the Control and NAFLD group. (B) The decreased composition of HDCA, muroCA, 6-keto-LCA, β DCA, and ω MCA and the increased composition of TCA among the BA pool in the serum from the HFD groups. (C) Changes in liver BA composition in Control and NAFLD group. (D) The decreased composition of THDCA, T ω MCA, TDCA, TLCA, β DCA, 6keto-LCA, HDCA, LCA, NorDCA, muroCA, β CDCA, and UDCA and the increased composition of TCA among the BA pool in the liver of the HFD groups. (E) Changes in the caecal content BA composition in the Control and NAFLD group. (F) The increased composition of CA, GCA, CDCA, 3-DHCA, ACA, and NorCA and the decreased composition of ω MCA, HDCA, and muroCA among the BA pool in the caecal content of the HFD groups. *, $p < 0.05$, **, $p < 0.01$, ***, $p < 0.001$ vs. Control group.

Fig. 3 Effects of THDCA and TCA on hepatic steatosis in vitro (A) Hierarchical

clustering of BSA, OAPA, TCA and THDCA samples. (B) Diagram illustrating the genes that were upregulated and downregulated in the OAPA group compared to their expression in the BSA group. (C) Heatmap of different groups. (D) Diagram illustrating the genes that were upregulated and downregulated in the THDCA group or the TCA group compared to their expression in the OAPA group. (E) and (F) Significantly enriched biological process categories in the gene ontology (GO) analysis related to the genes that were upregulated (E) or downregulated (F) in the THDCA group compared to the expression levels in the OAPA group. (G) Heatmap of specific genes in the OAPA and THDCA groups. (H) Oil red O staining of BSA, OAPA and THDCA (250 μ M) treatment and the quantification of the ratio relative to the results of the BSA group. (I) Protein levels of phospho-Akt-Ser473, total Akt, and beta-actin were observed by Western blot. Quantitative analysis of the Western blot for phospho-Akt-Ser473/Akt was conducted by ImageJ. *, $p < 0.05$, **, $p < 0.01$, ***, $p < 0.001$.

Fig. 4 THDCA ameliorated hepatic steatosis by activating FXR (A) Hepatic mRNA levels of FXR in the Control group and the NAFLD group. (B) A dual luciferase reporter assay was performed to detect the effect of THDCA on FXR activity in BRL-3A cells. Data were normalized to Renilla luciferase activity and are presented as a relative fold change. (C) Oil red O staining of OAPA and OAPA+THDCA (250 μ M) and OAPA+THDCA (250 μ M)+Z-guggulsterone (Z-GG) treatment in BRL-3A cells and the quantification of the ratio relative to the results of the OAPA group. (D) mRNA levels of Ppargc1a, NTCP, Fkp5, Lpin1 and Cyp2c22 in the OAPA, OAPA+THDCA (250 μ M) and OAPA+THDCA (250 μ M)+Z-GG groups in BRL-3A cells. (E) Heatmap representing mRNA profiling analysis of all genes expressed in primary rat hepatocytes treated with OAPA and then treated with either Z-GG or various concentrations of BAs (THDCA, TCA) for 24 h. *, $p < 0.05$ vs. OAPA group. #, $p < 0.05$ vs. OAPA+THDCA (250 μ M)+Z-GG group.

Fig. 5 Analysis of the alterations in the gut microbiome composition in response to HFD feeding (A) PCoA score plot based on Bray-Curtis metrics. (B) Unweighted UniFrac cluster tree based on Bray-Curtis metrics. (C) Relative abundances of the gut microbiota of each sample at the phylum level. (D) Wilcoxon rank-sum test bar plot at

the phylum level. (E) Relative abundances of the gut microbiota of each sample at the genus level. (F) Network analysis of caecal content 16S was performed at the genus level. The Spearman coefficient (r), ranging from positive (red) to negative (green) values, is reported (edges with $|r| > 0.8$ with $p < 0.01$). The edge thickness is proportional to the number of co-occurrences found between two nodes (species and species) linked by the edge itself. Bacterial species with a mean relative abundance in the top 50 are reported with their OTU number and are represented as circles. Node size is proportional to the number of edges departing from the node, indicating its degree of interaction. The node name size is proportional to the betweenness centrality, meaning the bridging/key importance of that node within the network. (G) Wilcoxon rank-sum test bar plot at the genus level.

Fig. 6 Cross-correlation of the concentrations of CA, HDCA or ω MCA with the relative abundance of differential microbial phylum and genus (A) The Spearman coefficient (r), ranging from positive (red) and negative (green) values, was used to cross-correlate the specific BAs HDCA, ω MCA and CA (within caecal sample) and the microbial phylum. (B) The Spearman coefficient (r), ranging from positive (red) and negative (green) values, was used to cross-correlate the specific BAs HDCA, ω MCA and CA (within caecal sample) and the microbial genus.

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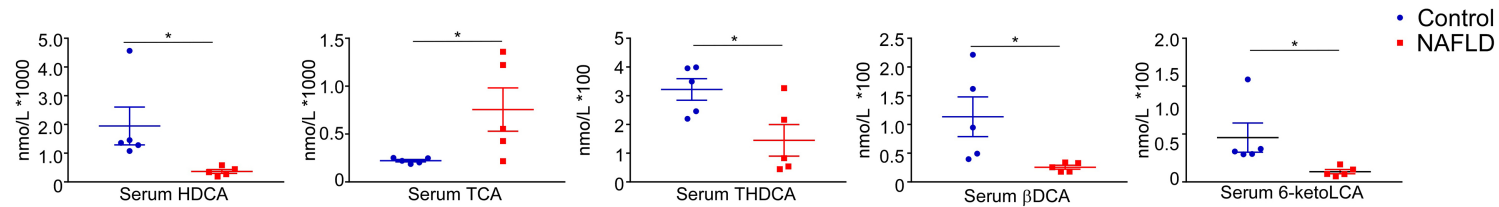
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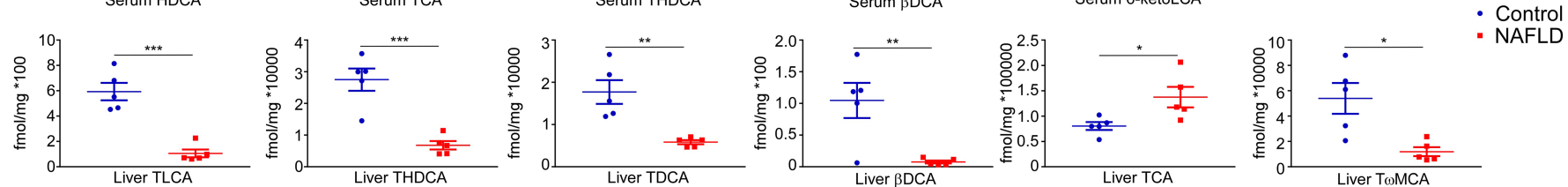
Highlights

1. TCA was increased, but THDCA and UDCA were decreased in the liver of a rat NAFLD model.
2. CA was increased, while both HDCA and ω MCA were decreased in the caecal content of a rat NAFLD model.
3. TCA was increased, while both HDCA and THDCA were decreased in the serum of a rat NAFLD model.
4. THDCA might improve hepatic steatosis in vitro through activating FXR.
5. The altered bile acids were highly correlated with gut dysbiosis.

A



B



C

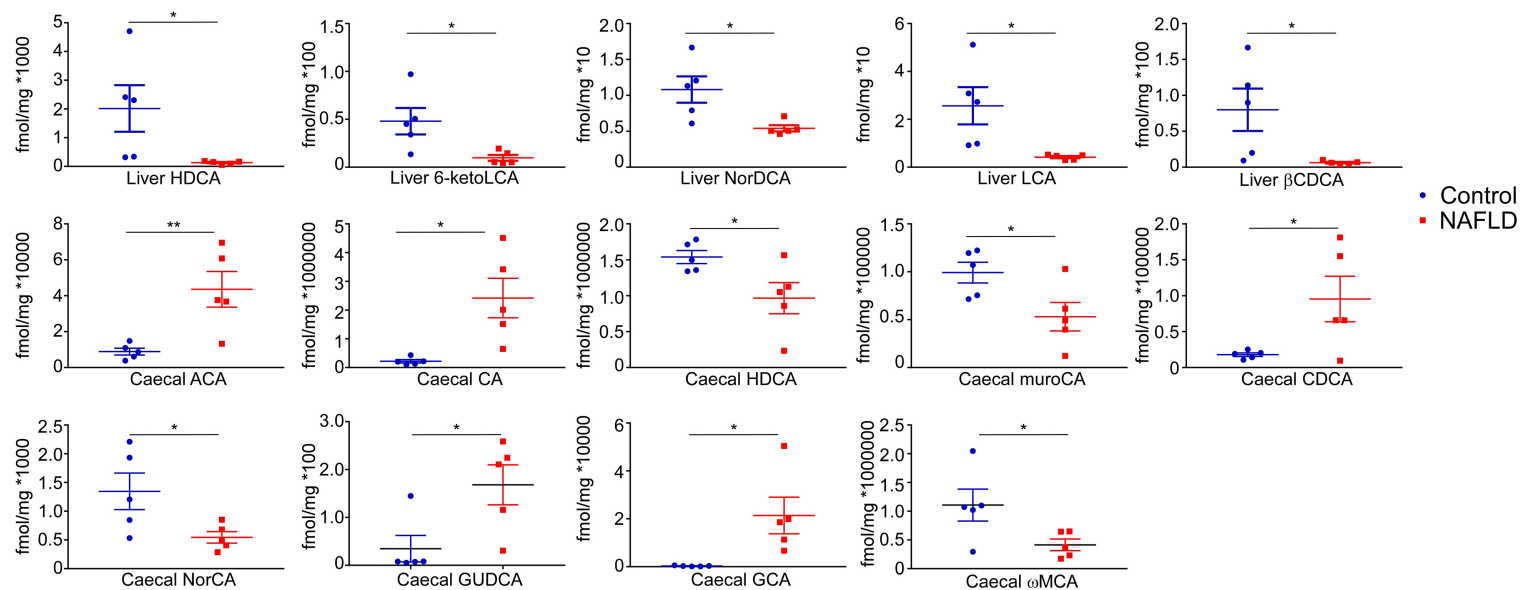


Figure 1

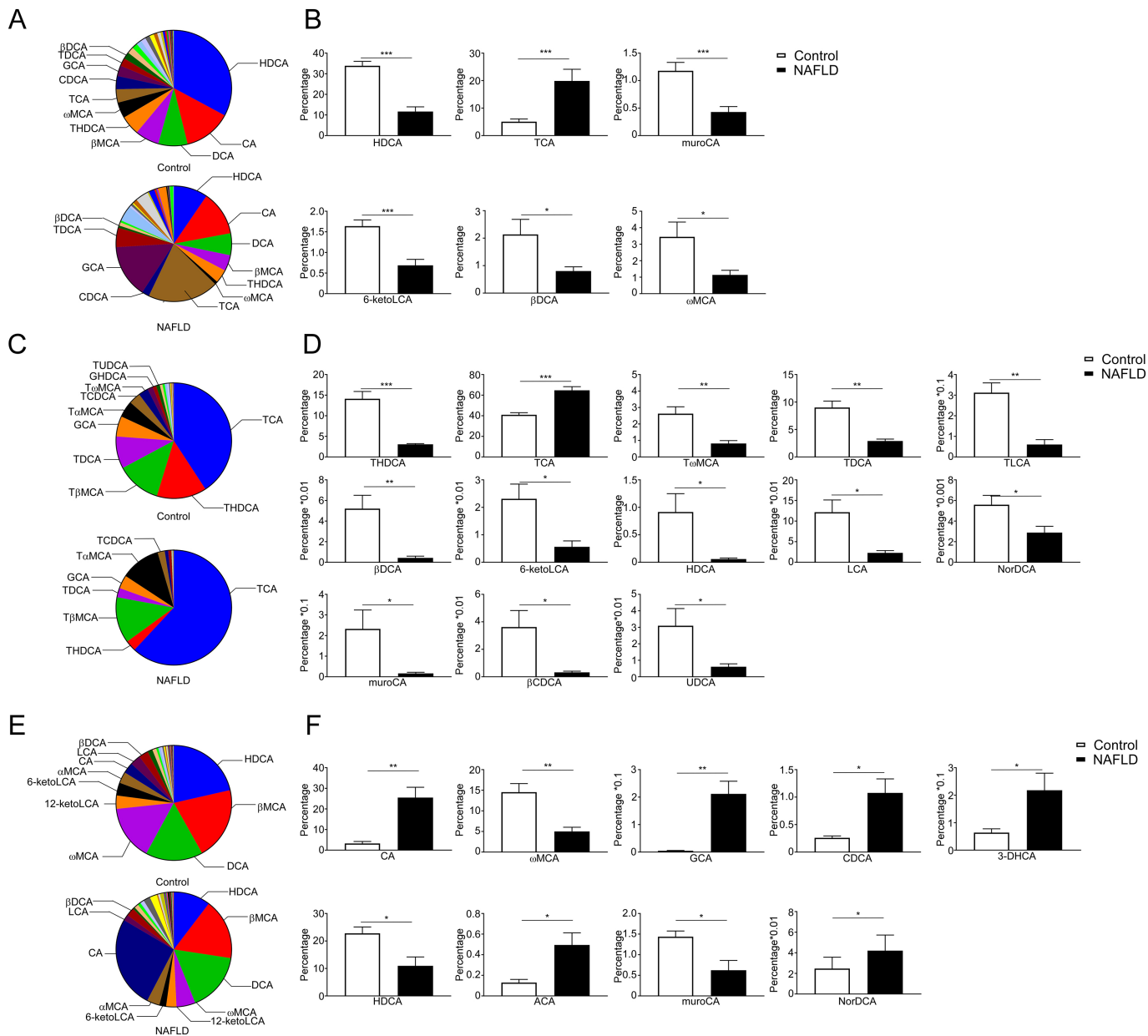


Figure 2

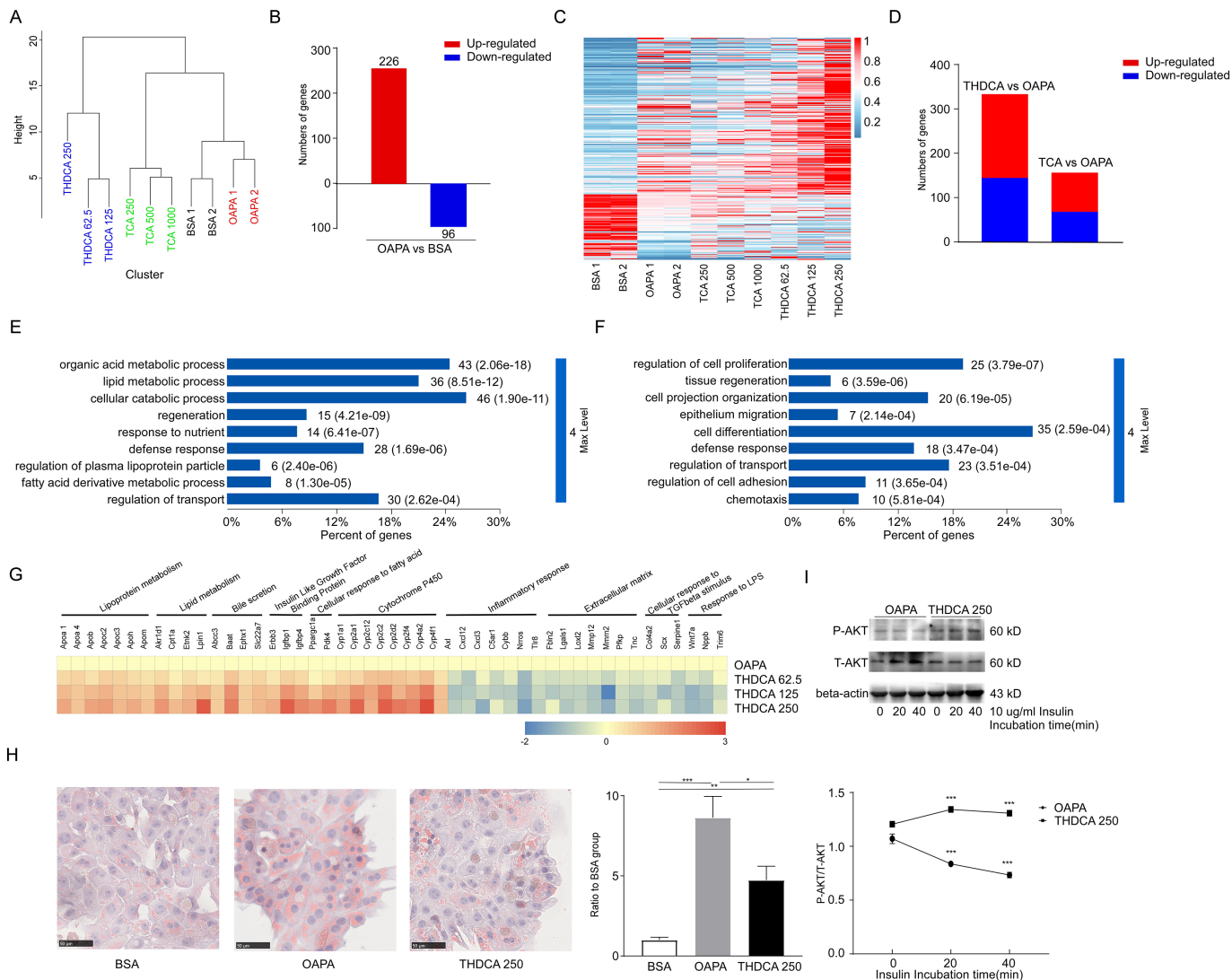


Figure 3

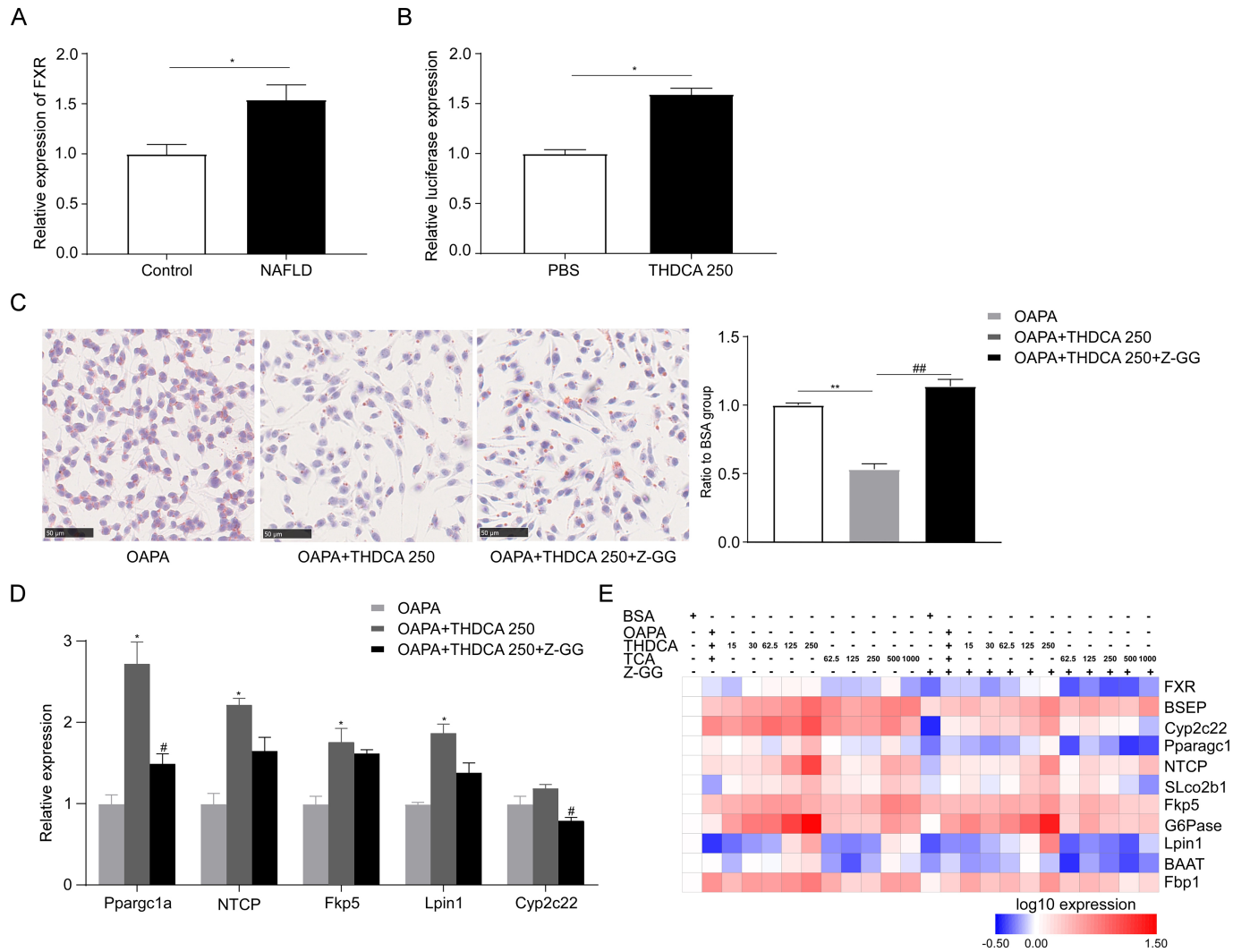


Figure 4

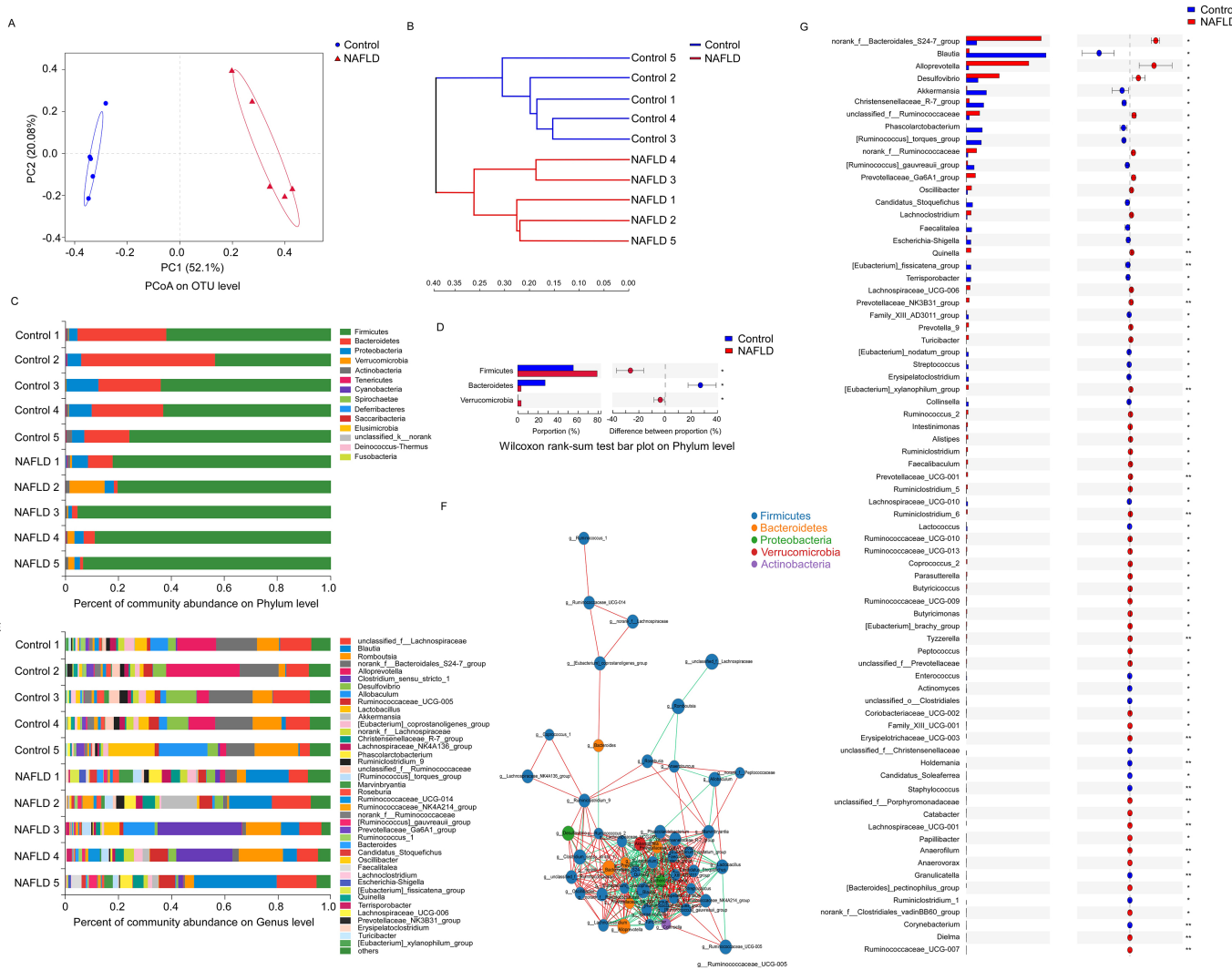


Figure 5

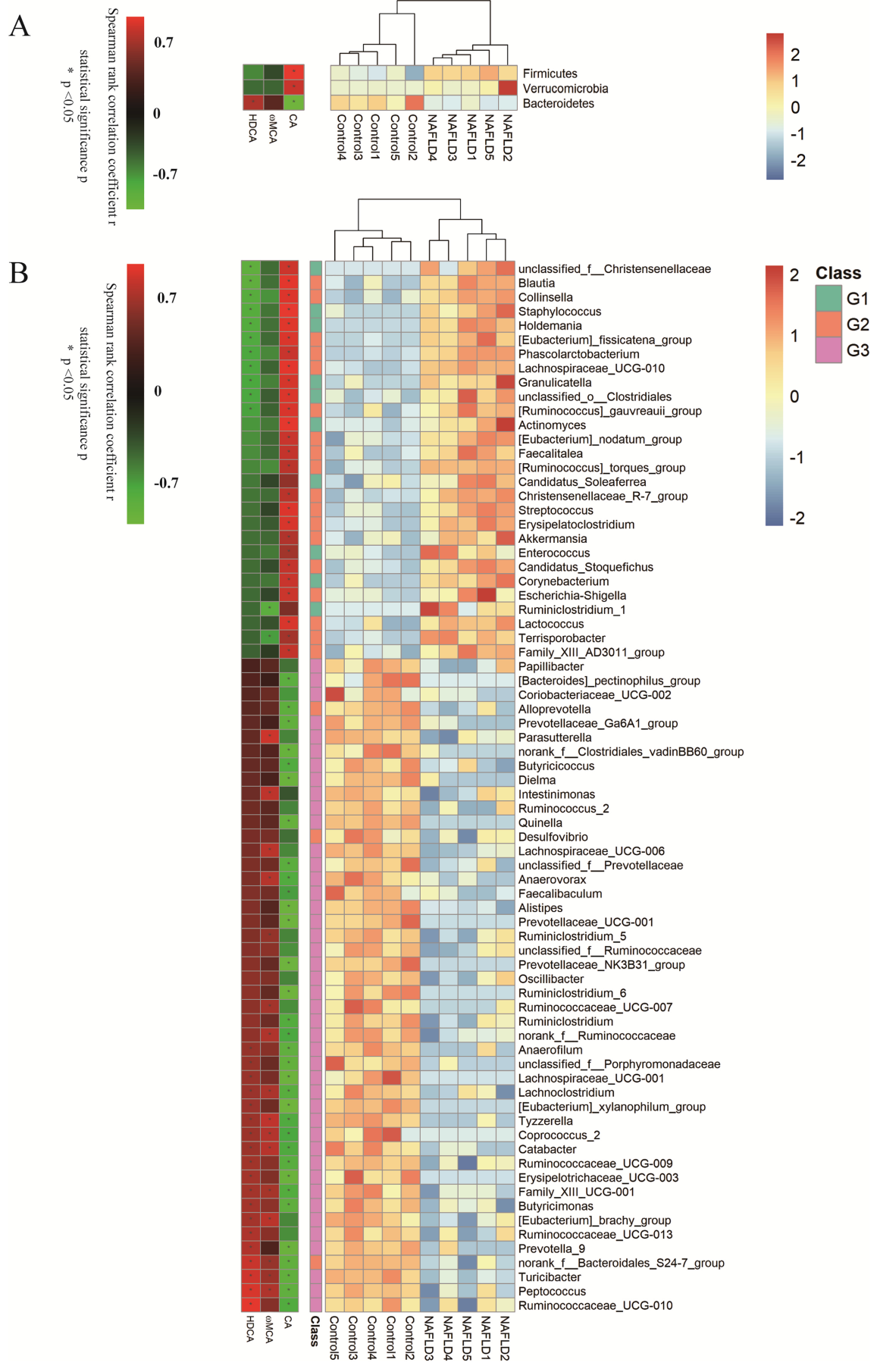
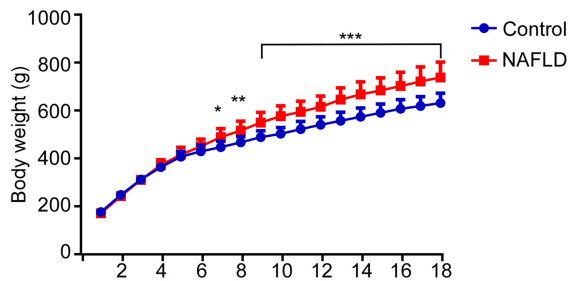
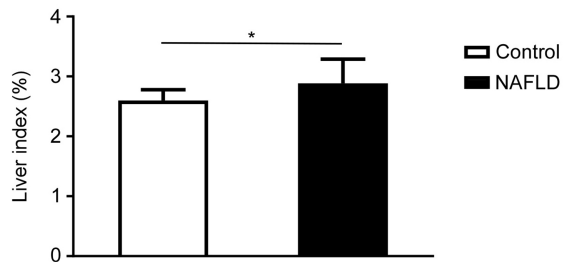


Figure 6

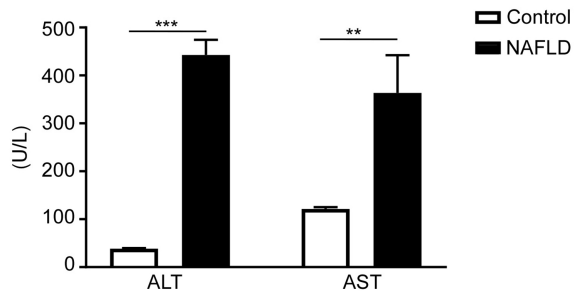
A



B



G



H

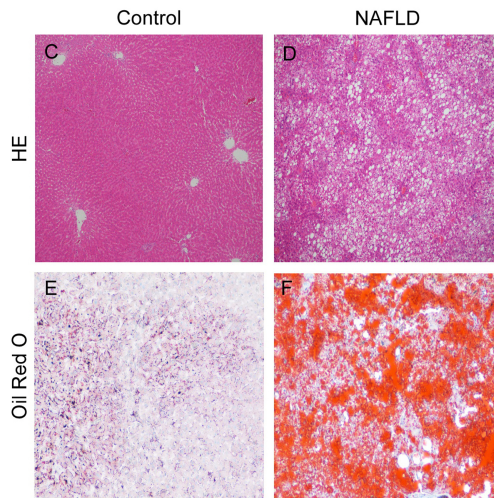
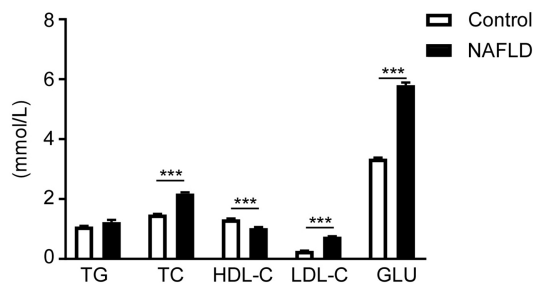


Figure 7

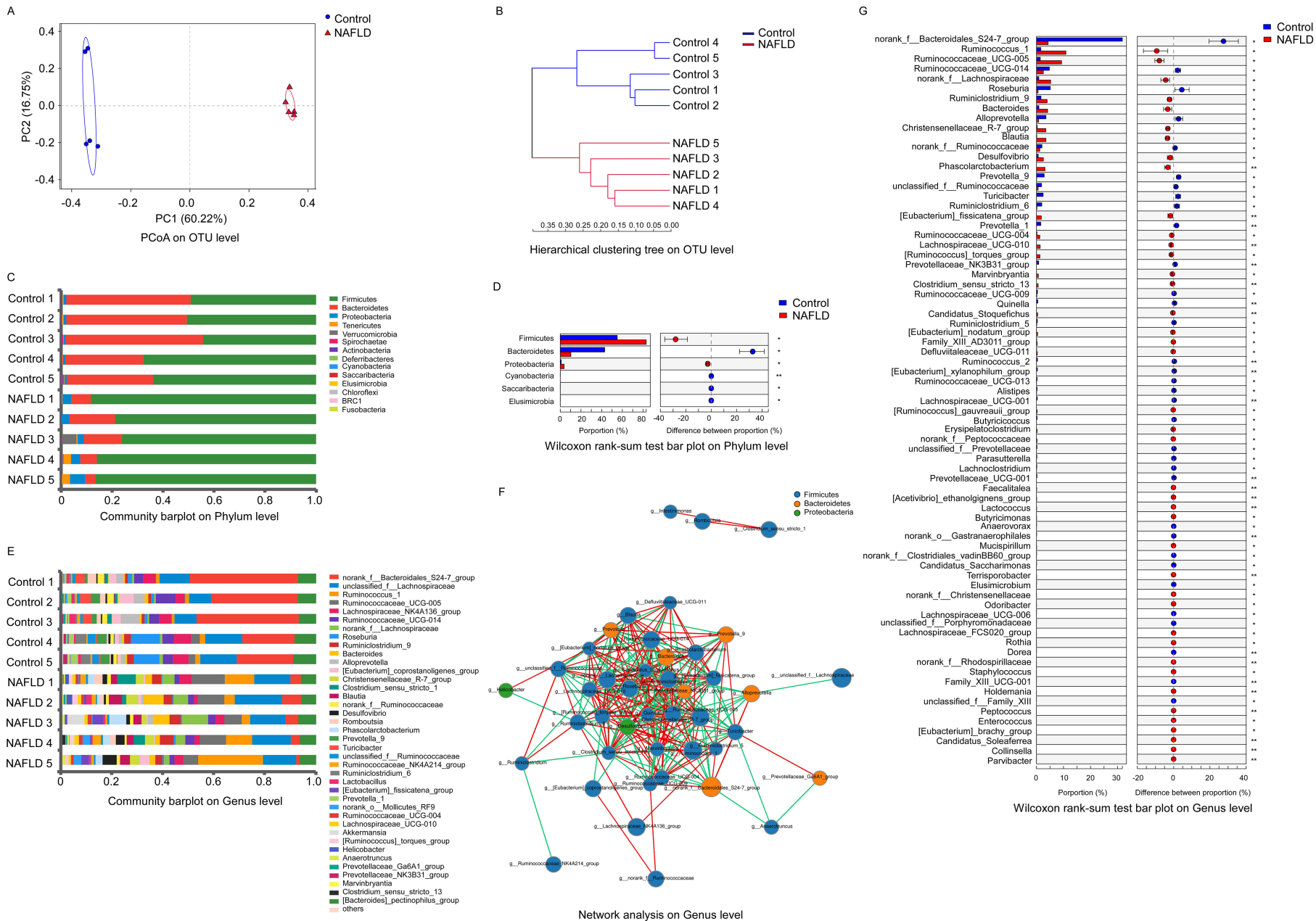
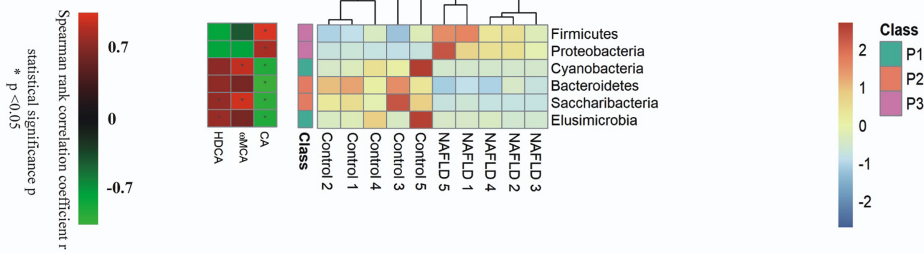


Figure 8

A



B

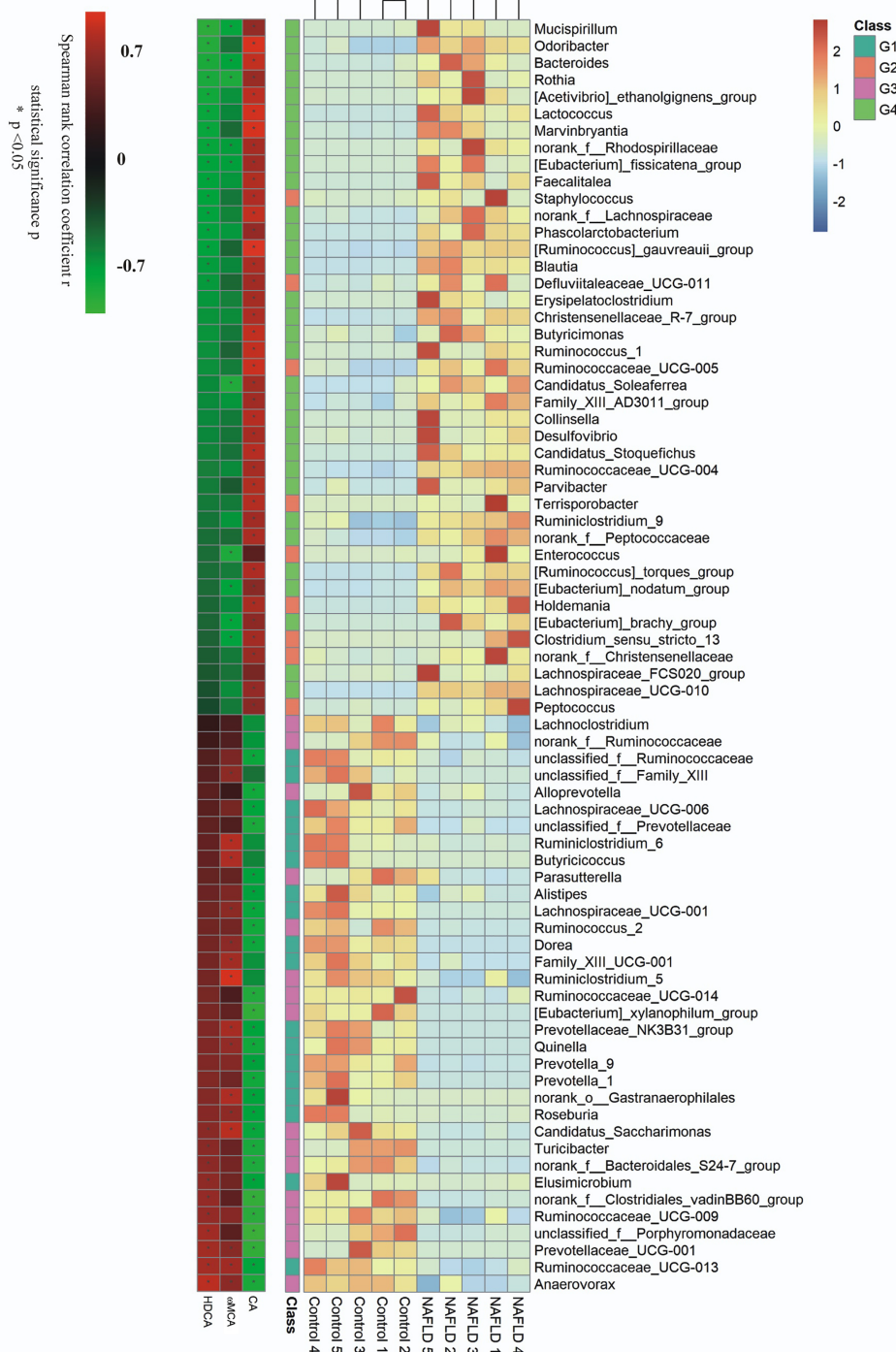


Figure 9