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Fructose diet ameliorates effects of macrophage migration inhibitory factor deficiency on prefrontal cortex inflammation, neural plasticity and behavior in male mice

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Running title: Fructose and inflammation in MIF-KO mice prefrontal cortex

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Abbreviations: macrophage migration inhibitory factor (MIF); interleukin-1 β (IL-1 β); tumor necrosis factor- α (TNF- α); toll-like receptor 4 (TLR-4); arginase 1 (Arg-1); mannose receptor (MRC-1); leukemia inhibitory factor (LIF); glycogen synthase kinase-3 (GSK-3); protein kinase C (PKC); phosphorylated insulin receptor substrate 1 (pIRS-1); AMP-activated protein kinase α (AMPK α); brain derived neurotrophic factor (BDNF); insulin-like growth factor 1 (IGF-1); calcium calmodulin dependent kinase 2 alpha (CaMKII α); glucocorticoid receptor (GR); 11 β -hydroxysteroid dehydrogenase type 1 (11 β -HSD1); nuclear factor κ B (NF- κ B); activator protein 1 (AP1); prefrontal cortex (PFC); homeostatic model assessment of insulin resistance (HOMA-IR); quantitative insulin sensitivity check index (QUICKI); fructose 1,6-bisphosphate (FBP).

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Abstract

Macrophage migration inhibitory factor (MIF) is a pro-inflammatory cytokine that represents a link between diet-induced inflammation and insulin resistance. Our aim was to examine whether fructose diet affects inflammation and insulin signaling in the prefrontal cortex (PFC) of *Mif* knockout mice (MIF-KO), and their possible link to neural plasticity and behavior. We analyzed nuclear factor κ B (NF- κ B) and glucocorticoid signaling, expression of F4/80, IL-1 β , TNF- α , TLR-4, MyD88, arginase 1 (*Arg-1*), mannose receptor (*Mrc-1*) and leukemia inhibitory factor (*Lif*) to assess inflammation in the PFC of C57/BL6J and MIF-KO mice consuming 20% fructose solution for 9 weeks. Insulin receptor (IR), IRS-1 serine phosphorylations (307 and 1101) and activity of PKC α , Akt, GSK-3 β and AMPK α were used to analyze insulin signaling. Brain derived neurotrophic factor (BDNF) and insulin-like growth factor 1 (IGF-1) mRNA levels, together with synaptophysin and PSD-95 protein level and calcium calmodulin dependent kinase 2 (CaMKII) activity, were used as plasticity markers. Behavior was examined in elevated plus maze, light dark box and novel object recognition test. The results showed concomitant increase of *Tnf- α* , *Tlr-4*, *MyD88* and M2 microglia markers (*Arg-1*, *Mrc-1*, *Lif*) in the PFC of MIF-KO, paralleled with unchanged glucocorticoid and insulin signaling. Increase of BDNF and IGF-1 was paralleled with increased CaMKII activity, decreased PSD-95 protein level, anxiogenic behavior and impaired memory in MIF-KO mice. Fructose feeding restored these parameters in the PFC

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Keywords: fructose; inflammation; macrophage migration inhibitory factor; prefrontal cortex; neural plasticity; insulin resistance; behavior

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1. Introduction

Fructose consumption is an important factor for the development of type 2 diabetes, not only through metabolic disturbances in the liver and adipose tissue, but also through development of insulin resistance in the central nervous system (CNS) (1). It was previously shown that fructose-induced obesity and type 2 diabetes are associated with poorer cognitive performance, cognitive decline and dementia (2, 3), which points the interest to the prefrontal cortex (PFC), a limbic structure involved in higher cognitive functions and anxiety control (4). Several potential mechanisms of cognitive decline in metabolic disturbances have been revealed so far, including hypothalamic and hippocampal inflammation and insulin resistance, while PFC is yet to be investigated (5). In addition, metabolic processing of fructose leads to decreased amount of cellular ATP, sensed by AMP-activated protein kinase (AMPK) (6), which can lead to excessive production of pro-inflammatory cytokines and exacerbation of insulin resistance, also at the level of the CNS (7).

The macrophage migration inhibitory factor (MIF) is a pleiotropic pro-inflammatory cytokine which forms a link between inflammation and insulin resistance (8, 9). Generally, the role of MIF in inflammation is associated with positive regulation of pro-inflammatory cytokines, tumor necrosis factor- α (TNF- α) and interleukin-1 β (IL-1 β) (10), and with positive regulation of toll-like receptor 4 (TLR-4) (11), which is regulated through activity of proinflammatory kinases such as mitogen-activated protein (MAP) kinase family, as well as the nuclear factor κ B (NF- κ B) and activator protein 1 (AP1). MIF knockout (MIF-KO) mice generally exert strong anti-inflammatory phenotype, since their activated lymph node cells secrete lower amounts of some pro-inflammatory mediators such as IL-1 β , IL-6, IL-23 and

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TGF- β , but they, however, secrete higher amounts of TNF- α (12). In addition, in the infarcted myocardium of MIF-KO mice, reduced gene expression of pro-inflammatory cytokines and mediators was observed, whereas anti-inflammatory cytokine IL-10 was up-regulated (13). It has been previously reported that MIF and glucocorticoids can have counter regulating effects on immune cell activation and cytokine production (14) and glucocorticoids are traditionally recognized as suppressors of inflammation (15). Glucocorticoids can be locally produced within the tissues by the enzyme 11 β -hydroxysteroid dehydrogenase type 1 (11 β -HSD1) (16) and their effects are mediated by the glucocorticoid receptor (GR), a hormone-dependent transcription factor (17). GR transcriptional activity partially depends on post-translational modifications, such as phosphorylation, among which phosphorylation at serine 220 of mouse GR is considered activatory (18). It seems that homeostatic balance between MIF and glucocorticoids is especially important in the brain, determining whether to promote immune responses (in infection) or dampen them (to protect from the harmful effects of inflammation) (19). Still, the exact role of MIF in brain inflammation is largely unclear and although it has a potent pro-inflammatory activity in other organs, it might have quite opposite role in the CNS, as its involvement in detoxification of catecholamine neurotransmitters metabolism has been confirmed (20).

The source of inflammation in the brain can be microglial cells as the resident macrophages of CNS or the macrophages infiltrating from the periphery (21). The general function of adult brain microglia is monitoring of the environment and elicitation of inflammatory response in case of the detection of any danger signal. This leads to M1 activation of microglia and subsequent release of pro-inflammatory cytokines such as TNF α ,

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IL-6 and IL-1 β (22). In the steady state microglia express markers typically present on many other tissue macrophages and/or monocytes, such as F4/80, a glycoprotein found on the surface of macrophages and resting microglia (23). However, microglia also have protective functions when switched to M2 phenotype, as it can release anti-inflammatory cytokines, growth factors (such as insulin-like growth factor 1, IGF-1) and promote trophic support by secretion of neurotrophins like brain derived neurotrophic factor (BDNF) (24). This "alternative" activation microglia is associated with the expression of arginase 1 (Arg-1) and mannose receptor (MRC-1), both of which represent relatively straightforward markers of M2 microglial phenotypes (25, 26). In addition, several authors have reported that certain cytokines, such as leukemia inhibitory factor (LIF), can alter the phenotype of microglia from pro-inflammatory to anti-inflammatory state and even promotes survival of neurons and glia in several animal models (27). The major mediators of inflammation, like IL-1 β and TNF- α , are also involved in the development of insulin resistance in the local brain tissues (7) through multiple signaling cascades ending with NF- κ B and/or c-Jun N-terminal kinase (JNK) activation (28). At the cellular level, insulin resistance is reflected in the inability to pass the insulin signal through insulin signaling cascade (29). Namely, excessive phosphorylation of serine 307 and 1101 on the insulin receptor substrate 1 (IRS-1) protein reduces its ability to activate downstream PI3 kinase (PI3K) and leads to its accelerated degradation (30). Therefore, the phosphorylation of IRS-1 protein on these serine residues is considered a key marker of cellular insulin resistance (31). Downstream of the PI3K-Akt pathway, insulin signaling also involves glycogen synthase kinase-3 (GSK-3), an enzyme whose activity is down-regulated by serine phosphorylations (32). One of the important players is protein

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Fructose-induced disturbances in brain insulin signaling can lead to dysfunction of neurons and disorders of cognitive functions (38, 39). Fructose feeding was previously reported to induce insulin signaling impairment (40, 41), reduce neurogenesis (42), elicit neuroinflammation (43) and negatively impact brain plasticity in rat hippocampus (44) and frontal cortex (45). Since the majority of fructose effects in the brain were investigated in hippocampus, the present study is focused on prefrontal cortex, and what is more important, it has been demonstrated that high-fat and sugar diets induce severe frontal-dependent cognitive deficits (46–48). Studies on hippocampus have pointed that the main mechanisms underlying impairments in spatial memory and learning in rodents is increase in neuroinflammatory markers (49), as well as alterations in hippocampal insulin signaling, IGF-1 and BDNF levels (50). The role of insulin signaling in the promotion of neuroplasticity in the adult brain has been recently documented (51). One of the proposed mechanisms is PKC-dependent, suggesting that the net effect of this kinase and its interaction with insulin appears to be induced synaptogenesis and stimulated neurorepair in adult brain (52). IGF-1 influences growth, proliferation, and maturation of neurons and glia, as well as the neuronal

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Taking into account that fructose diet can affect brain insulin sensitivity and plasticity through changes in inflammation, the aim of this study was to examine the underlying role of pro-inflammatory cytokine MIF in inflammation, insulin sensitivity and plasticity of the PFC in male mice fed with high fructose diet.

2. Experimental Procedures

2.1. Animals and treatment

The generation of homozygous *Mif* gene-deficient (MIF-KO) mice on C57BL/6J background has been described previously (58). Breeder mice (MIF-KO and WT) were a kind gift from Dr. Christine Metz (Laboratory of Medicinal Biochemistry, The Feinstein

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2.2. Behavioral testing

During the last five days of the treatment, all mice were submitted to elevated plus maze (EPM), light-dark box (LDB) and novel object recognition (NOR) test (days: -1, -3, -5, between 9 AM and 1 PM). The tests were performed at 25°C , in a dimly illuminated room (indirect 2 x 40 W light) with light and acoustic isolation. Videos of mouse activities were registered by the camera connected to a PC and analyzed by ANY-maze Video Tracking

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For the EPM test, mouse movements were recorded for 5 min by a video camera mounted vertically above the apparatus, a cross-shaped Plexiglas platform elevated 50 cm from the floor. This apparatus consisted of two opposite open arms (OA, 50 × 10 cm), and two opposite closed arms (CA, 50 × 10 cm) with 40 cm walls, connected by a central platform (CP, 10 × 10 cm), where each animal was placed at the start of a test. The level of a mouse anxiety was estimated by the number of entries into OA (presented as % of total entries) and by latency to first entrance into OA.

LDB was made from Plexiglas (50 cm × 25 cm × 30 cm (H)) and divided into one-third, covered and dark compartment, while the rest of the box was open and alight. The barrier had a loose door that allowed free transitions between the compartments. The 5 min test sessions were video registered after each mouse had been placed in the middle of the illuminated compartment and allowed to move freely. Their time spent in the dark vs. light compartment and the latency to first enter into dark compartment were measured and compared among the groups.

The variant of NOR applied in our experiments was adapted from the published procedure by Hammond et al. (61). Each animal was allowed a 10 min training session with the exposure to two identical, non-toxic objects (hard plastic item) placed in the two opposite corners of the arena (45x45 cm). After the training session, animal was returned to its home

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cage for a 30-min retention interval, before it was submitted to the test, in which one familiar object was replaced with a novel object of a similar size, but with different shape. The animal was placed into the arena, equidistant and facing away from both objects. The exploration was defined when the animal's head was inside a circle (R=6 cm) around the object. Each mouse was excluded from further exploratory registration after accumulating 40 s of exploration time on either of the sample objects. The novel object preference ratios (in % of time) were calculated by dividing the novel object exploratory time with the time used to explore both objects (40 s). A value above 50% suggests preference for the novel object, while a value below 50% is indicative of familiar object preference.

2.3. Parameters of systemic insulin sensitivity

In order to determine insulin sensitivity, the homeostatic model assessment of insulin resistance (HOMA-IR) index, quantitative insulin sensitivity check index (QUICKI) and revised quantitative insulin sensitivity check index (R-QUICKI) were determined. HOMA index was calculated from fasting plasma insulin and glucose concentrations using the following formula: $\text{insulin (mU/l)} \times \text{glucose (mmol/l)} / 22.5$. QUICKI and R-QUICKI were calculated using formulas $1 / [\log \text{insulin } (\mu\text{U/mL}) + \log \text{glucose (mg/dL)}]$ and $1 / [\log \text{insulin } (\mu\text{U/mL}) + \log \text{glucose (mg/dL)} + \log \text{NEFA (mmol/l)}]$, respectively.

2.4. RNA extraction and Reverse Transcription

Animals were killed by rapid decapitation and the prefrontal cortices were carefully

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Total RNA was isolated using TRIzol® (AmBion, Life Technologies, Carlsbad, USA). After homogenization, samples were centrifuged at 12000 g for 15 min at 4°C. RNA was precipitated with isopropanol. Quantitative evaluation of the isolated RNA was performed spectrophotometrically (OD 260/280 > 1.8 was considered satisfactory) and its quality was confirmed on 2% agarose gel. Reverse transcription was performed using a High-Capacity cDNA Reverse Transcription Kit (Applied Biosystems, Foster City, USA) according to the manufacturer's instructions and the cDNAs were stored at -70°C until use.

2.5. Real-time PCR

The expression of genes was analyzed using Power SYBR® Green PCR Master Mix. Specific primers (Applied Biosystems, Foster City, USA) were used to selectively amplify *Igf-1*: F: 5'-AGA CAG GCA TTG TGG ATG AG-3', R: 5'-TGA GTC TTG GGC ATG TCA GT-3'; *Tnf-α*: F: 5'-TCG AGT GAC AAG CCC GTA GC-3', R: 5'-CTC AGC CAC TCC AGC TGC TC-3'; *Bdnf-9*: F: 5'-TGC AGG GGC ATA GAC AAA AG-3', R: 5'-TGA ATC GCC AGC CAA TTC TC-3'; *Il-1β*: F: 5'-CAC CTC TCA AGC AGA GCA CAG-3', R: 5'-GGG TTC CAT GGT GAA GTC AAC-3'; *Tlr-4*: F: 5'-ATC ATC CAG GAA GGC TTC CA-3', R: 5'-GCT AAG AAG GCG ATA CAA TTC-3'; *MyD88*: F: 5'-TCA TGT TCT CCA TAC CCT TGGT-3', R: 5'- GAC TGG GGT GAG CGT CAA A-3'; *Arg-1*: F: 5'-TAACCTTGCTTGCTTCGG-3', R: 5'- GTGGCGCATTACAGTCAC-3'; *Lif*: F: 5'-CCCTGAAGACTGGACA ACTGTG-3', R: 5'- CAGAACCAGCAGCAGTAAGGG-3'; *Mrc-1*: F: 5'-GTTGTATTCTTTGCCTTCCAG-3', R: 5'-

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2.6. Preparation of total protein

For the preparation of total protein fraction, the remaining organic phase (obtained after aqueous phase separation for RNA precipitation) was centrifuged at 2000 g for 5 min at 4°C. After adding ethanol. Protein fraction was precipitated from phenol-ethanol supernatant, using acetone and centrifuged at 12000 g for 10 min at 4°C. The protein pellets were dispersed in 0.3 M guanidine hydrochloride in 95% ethanol with 2.5% glycerol by sonication on ice and washed in 0.3 M guanidine hydrochloride in 95% ethanol with 2.5% glycerol. After sedimenting the protein by centrifugation at 8000 g for 5 min at 4°C, pellets were dispersed in the lysis buffer containing 2.5 mM Tris-HCl pH 6.8, 2% SDS, 10% glycerol and 50 mM DTT. All samples were stored at -70°C.

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2.7. Western blot analysis

The samples were mixed with denaturing buffer, boiled, and 40 µg of proteins were subjected to 10% (pAkt 1/2/3 Ser473, Akt 1/2/3, AMPK α 1/2 and pAMPK α Thr 172, 11 β -HSD1, GR, pGR Ser 220, syntrophophysin, F4/80, NF- κ B, I κ B, pI κ B Ser32) or 7.5% (IR β , pIRS-1 Ser307, pIRS-1 Ser1101, IRS-1, PSD-95, PKC α , pPKC α -Ser657, CaMKII α , pCaMKII α -Thr286, GSK-3 β , pGSK-3 β Ser9) SDS-PAGE. After electrophoresis, proteins were transferred onto PVDF membrane (Immobilon-P, Millipore, USA) using a blot system (Transblot, BioRad, USA). Membranes were blocked for 1 h with 5% non-fat dry milk dissolved in phosphate buffered saline (PBS) at room temperature and incubated with the respective primary and secondary antibodies: anti-phospho-IRS-1 Ser 307 (sc-33956, 1:1000); anti-IRS-1 (sc-8038, 1:250); anti-phospho-Akt 1/2/3 (Ser473, sc-7985-R, 1:2000); anti-Akt 1/2/3 (sc-8312, 1:2000); anti-AMPK α 1/2 (sc-25792, 1:1000); anti-GR (sc-8992, 1:250); anti-NF κ B/p65 (C-20) (sc-372, 1:000); anti-I κ B- α (C-21) (sc-371, 1:500); anti-F4/80 (M-17)-R (sc-26643-R, 1:500); anti-insulin R β (C-19) (sc-711, 1:500); anti-pPKC α -Ser657 (sc-12356, 1:500); anti-PKC α (H-7) (sc-8393, 1:500); anti-pCaMKII α -Thr286 (sc-12886-R, 1:10000); anti-CaMKII (M-176) (sc-9035, 1:10000); anti-GSK-3 α / β (0011-A) (sc-7291, 1:1000) and anti-pGSK-3 β (F-2) (sc-373800, 1:1000) were from Santa Cruz Biotechnology (Dallas, Texas, USA), while anti-phospho-IRS1-Ser 1101 (#2385, 1:500); anti-PSD95 (#2507, 1:1000); anti-phospho-I κ B α (Ser32) (14D4) (#2859, 1:500); anti-pAMPK α Thr 172 (#2535s, 1:1000) and anti-pGR Ser 211/220/232 (#4161S, 1:1000) were obtained from Cell Signaling Technology (Danvers, Massachusetts, USA). Anti-synaptophysin (SP11): MA5-

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2.8. Statistical analyses

Data are presented as mean \pm SEM. The data were tested for normality by the Kolmogorov-Smirnov test. Normally distributed data were analyzed by one-way ANOVA followed by Tukey *post-hoc* test. A p value < 0.05 was considered statistically significant. Statistical analyses were performed by using GraphPad Prism v5 Software (USA).

3. Results

3.1. Markers of inflammation in the prefrontal cortex

Inflammation in the PFC was estimated through NF- κ B signaling pathway, the expression of genes for pro-inflammatory cytokines IL-1 β and TNF- α , as well through gene expression of *Tlr-4* and *MyD88*. In addition, the activation of microglia was assessed at the protein level of F4/80 and mRNA level of *Arg-1*, *Lif* and *Mrc-1*. There was no statistically significant changes between the investigated groups in the expression of *Il-1 β* (Table 1) and protein levels of F4/80, NF- κ B/p65 subunit and I κ B and its phosphorylation (Figure 1B and C). However, significant differences were observed in one-way ANOVA for mRNA levels

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3.2. Markers of insulin sensitivity and energy balance

Systemic insulin sensitivity was assessed at the level of HOMA-IR index and QUICKI and R-QUICKI. One-way ANOVA confirmed significant differences for all analyzed parameters, HOMA-IR (F=5.78, p<0.01), QUICKI (F=14.12, p<0.001) and R-QUICKI (F=14.53, p<0.001). As shown in Table 2, post-hoc test showed that HOMA-IR was significantly higher in fructose-fed MIF-KO mice compared to the wild type animals (**p<0.01, MIF-KO + F vs. WT), while QUICKI and R-QUICKI were significantly decreased in both MIF-KO groups regardless of the diet (**p<0.001, MIF-KO vs. WT and MIF-KO + F vs. WT). In addition, HOMA-IR was higher (†p<0.01), while QUICKI and R-QUICKI were lower (††p<0.001) in fructose-fed MIF-KO mice in comparison to the WT animals on the same diet.

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In order to assess insulin sensitivity in the PFC, protein levels of IR and IRS-1 were analyzed together with IRS-1 inhibitory phosphorylations at serine 307 and serine 1101. As shown in Figure 2, IRS-1 signaling remained unchanged in the PFC of all experimental groups. However, one-way ANOVA revealed significant differences for IR protein level ($F=28.49$, $p<0.001$) and IRS-1 serine 1101 phosphorylation ($F = 5.049$, $p<0.001$). Post-hoc test confirmed significant decrease of IR protein level in all experimental groups in comparison to the wild type animals on standard diet ($**p<0.01$, MIF-KO vs. WT; $***p<0.001$, MIF-KO + F vs. WT, WT + F vs. WT), while IR protein level was significantly higher in fructose-fed MIF-KO mice in comparison to the wild type animals on the same diet ($\dagger p<0.05$, MIF-KO + F vs. WT + F). Also, IRS-1 serine 1101 phosphorylation was significantly higher in fructose-fed MIF-KO mice in comparison to wild type animals on both standard and fructose diet ($*p<0.05$, MIF-KO vs. WT; $\dagger p<0.05$, MIF-KO + F vs. WT + F).

Also, protein levels of PKC α , Akt, GSK-3 β and AMPK were analyzed, together with their phosphorylations and ratios of phosphorylated to total protein levels (Figure 3). One-way ANOVA showed significant differences for PKC α protein level ($F=11.77$, $p<0.001$), its phosphorylation at serine 657 ($F=15.13$, $p<0.001$) and pPKC α /PKC α ratio ($F=5.25$, $p<0.01$). Post-hoc test revealed significant decrease of pPKC α in all experimental groups in comparison to the wild type animals on standard diet (Figure 3A, $***p<0.001$, MIF-KO vs. WT, MIF-KO + F vs. WT, WT + F vs. WT), while PKC α protein level was significantly decreased in standard-fed MIF-KO mice and fructose-fed WT mice in comparison to the wild type animals ($***p<0.001$, MIF-KO vs. WT and $**p<0.01$, WT + F vs. WT). Also total PKC α protein level was significantly higher in fructose-fed MIF-KO mice when compared

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3.3. Glucocorticoid signaling in the prefrontal cortex

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Glucocorticoid signaling was examined at the protein level of 11β -HSD1 enzyme of the prereceptor metabolism, as well as at the level of total GR, its activating serine 220 phosphorylation and their ratio. One-way ANOVA revealed significant differences for pGR ($F=3.13$, $p<0.05$) and pGR/GR ratio ($F=9.86$, $p<0.001$), post-hoc test did not show significant inter-group differences for 11β -HSD1 and both pGR and GR protein levels (Figure 4). However, pGR/GR ratio was markedly higher in the PFC of fructose-fed WT mice compared to the standard-fed WT (** $p<0.01$, WT + F vs. WT), which was abolished in MIF-KO animals on fructose diet ($^{\dagger\dagger}p<0.01$, MIF-KO + F vs. WT + F).

3.4. Markers of neural plasticity in the prefrontal cortex

Plasticity of the PFC was assessed at the phosphorylation level of CaMKII, protein level of PSD-95 and synaptophysin, and at the mRNA level of BDNF-9 and IGF-1. One-way ANOVA showed significant differences for CaMKII ($F=59.29$, $p<0.001$), its threonine 286 phosphorylation ($F=84.25$, $p<0.001$) and their ratio ($F=94.72$, $p<0.001$), as well as for the PSD-95 protein level ($F=18.64$, $P<0.001$) and the relative mRNA level of BDNF-9 ($F=196.60$, $p<0.001$) and IGF-1 ($F=59.29$, $p<0.001$). As shown in Figure 5A, significant increase of CaMKII phosphorylation was observable in all experimental groups in comparison to the wild type animals on standard diet (Figure 5B, *** $p<0.001$, MIF-KO vs. WT, MIF-KO + F vs. WT, WT + F vs. WT), while this phosphorylation was significantly lower in MIF-KO + F group in comparison to the WT mice on fructose diet ($^{\dagger\dagger\dagger}p<0.001$). Total CaMKII protein level was increased in both fructose-fed groups (** $p<0.01$, MIF-KO + F vs. WT, *** $p<0.001$, WT + F vs. WT). Finally, pCaMKII/CaMKII ratio was also significantly increased in all experimental groups in comparison to the wild type animals on

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3.5. Behavioral tests

One-way ANOVA showed that latency to enter OA was significantly affected ($F=2.85$, * $p < 0.05$), while the % of total crossings into open arms of the EPM was not changed. Post-hoc test revealed that MIF-KO mice on standard diet exhibit higher latency to enter the OA, in comparison to the WT animals on the same diet (Fig. 6A, * $p < 0.05$). Preference of mice for the dark box, expressed by the increased time spent in this compartment and the reduction of latency for the first entrance into the dark part (Fig. 6C and D), were significantly affected ($F=3.89$, $p < 0.05$ and $F=7.95$, $p < 0.01$). Post hoc test revealed that standard-fed *Mif* deficient mice had reduced latency to enter dark compartment (* $p < 0.05$) and spent more time in dark than WT animals (** $p < 0.01$), while fructose diet led

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4. Discussion

The aim of the study was to examine the role of *Mif* in the local inflammation in the PFC, as well as its possible link to insulin resistance, plasticity and behavioral impairments under the conditions of energy overload induced by fructose overconsumption. The results showed increased mRNA level of pro-inflammatory mediators in conjunction with increased markers of M2 microglial activation (*Arg-1*, *Mrc-1*) in the PFC of MIF-KO animals on standard diet. This was paralleled with significantly increased trophic factors BDNF-9 and IGF-1 on the one side, and decreased PSD-95 protein level and impaired behavior on another. Insulin signaling was not disturbed in the PFC of MIF-KO animals, as seen on increased pAkt/Akt ratio and unchanged PKC α and GSK-3 activity. Fructose feeding of the MIF-KO mice restored these parameters in the PFC to the control level and mitigated behavioral changes.

It was previously demonstrated that *Mif* deficient mice exert strong anti-inflammatory phenotype (12) and higher levels of anti-inflammatory cytokines in cardiac tissue (13). It has also been reported that *Mif* deficiency may down-regulate TLR-4 expression in macrophages (11). In this study, we found significantly increased *Tnf- α* , *Tlr-4* and *MyD88* mRNA levels in the PFC of MIF-KO mice. This finding could point to the possible existence of a

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compensatory mechanism for *Mif* deficiency in the brain, as seen previously for the compensatory enhanced production of TNF- α in the IL1-KO mice (62). Alternative explanation for increased *Tlr-4* and *MyD88* in the absence of MIF could be found in the elevation of circulatory endotoxins due to the disrupted intestinal barrier permeability and altered diversity and content of gut microbiota in MIF-KO mice, which is known to activate TLR-4/MyD88 complex (63). This increase in proinflammatory mediators was not accompanied with increased expression and activity of NF- κ B, which implies that some other transcriptional regulators, such as AP1 or JNK, could be responsible for the observed effects. It cannot be neglected as well that these pro-inflammatory mediators were analyzed at the transcriptional level, and that posttranslational modifications can also modify their activity. Nevertheless, in accordance with the applied methods, we suggest that *Mif* deficiency in the PFC leads to transactivation of genes for pro-inflammatory mediators. Since F4/80 protein, which is the marker of peripheral macrophages and resting microglia, was not changed between the experimental groups, we presume that the increased transcription of proinflammatory mediators is linked to the activation of proinflammatory M1 microglia in the PFC. Interestingly, the markers of alternative anti-inflammatory M2 microglia, *Arg-1* and *Mrc-1*, were also increased in MIF-KO group, implying the concurrent activation of M1 and M2 microglia in the state of *Mif* deficiency. Indeed, there are studies showing mixed M1 and M2 microglia phenotype with concomitant expression of both pro- and anti-inflammatory genes (64, 65). Although it became clear that individual cells can express transitional phenotypes, it is still not certain whether M1 and M2 are phenotypically distinct subpopulations of microglia that perform different functions within different stages of

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inflammatory response, or whether they shift between functional phenotypes depending on environmental signals (66). Nevertheless, it has been shown that transition from the M1 to the M2 phenotype promotes positive outcomes, since it facilitates resolution of inflammation through anti-inflammatory factors (such as *Arg-1* and *Mrc-1*), leading to deactivation of the proinflammatory cell phenotypes and re-establishment of homeostasis (67). Taking this into account, the observed presence of both M1 and M2 markers in our study could most likely be a part of the brain protective response to increased inflammation which aims to reduce the neuroinflammation-associated damage (64). This is also in accordance with the increased expression of *Lif*, previously shown to direct polarization microglia from pro-inflammatory towards anti-inflammatory phenotype (27). In addition, observed increase of M2 microglial markers goes in line with the increased level of neurotrophic factors, especially IGF-1. Namely, previous studies showed that M2-like macrophages are an important source of IGF-1 (68), and that specifically M2 microglia can enhance IGF-1 release to resolve inflammation and promote neuron survival (69).

Taking into account that excessive inflammation is usually associated with insulin resistance, we examined the key components of the PFC insulin signaling pathway, IR, IRS-1, and Akt, and specifically their phosphorylation-regulated activity, as well as the parameters of systemic insulin sensitivity (HOMA-IR, QUICKI and R-QUICKI). Among analyzed, total IR protein was decreased, both total IRS-1 and its inhibitory phosphorylations (at Ser307 and Ser1101) were unchanged, and protein level of total Akt was decreased in the PFC of MIF-KO mice. The latter is probably a consequence of increased TNF- α expression, since TNF- α was previously shown to be capable of inducing caspase-dependent degradation

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Since inflammation in the brain can lead to pathophysiological changes, further investigation of neurotrophic factors in the PFC was performed. Expression of both *Bdnf-9* and *Igf-1* was significantly increased in the MIF-KO mice, which could be ascribed to M2 microglial activation as a part of the protective mechanism against neuroinflammation-

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associated damage (69). Previous studies suggest that an increase in neural plasticity could counterbalance activation of the immune response, thus keeping inflammation in a limited range (76). However, there are several steps between mRNA and mature protein, which in case of BDNF include the formation of apoptosis-inducing pro-BDNF (77), while in this study only mRNA levels of these factors were assessed. In the present study, *Mif* deficient mice exhibited anxiogenic-like behavior, reflected in increased latency to enter the OA in the EPM and prolonged time spent in the dark compartment of the DLB. Additionally, impairment in learning and memory in MIF-KO mice was also confirmed by the lower novel object preference ratio. These behavioral changes were accompanied with the lower level of PSD-95 observed in the PFC, which is accordance with previous finding that PSD-95 deficiency disrupts PFC-associated function and behavior, particularly learning and working memory (78). We also propose that the observed anxiogenic-like behavior in *Mif* deficient mice could be PSD-95 dependent, since dysfunction of PSD-95 is known to induce anxiety-like behavior (79). Taking into account that PSD-95 synthesis is modulated by inflammation (80), whereas increase in TNF- α leads to its reduction (81), we presume that increased inflammation in *Mif* deficient mice represents primary event leading to downregulation of PSD-95 and associated cognitive and mood impairments. Thus, it could be proposed that behavioral deteriorations are most likely a consequence of enhanced inflammation and downregulation of PSD-95, while elevation of neurotrophic factors may represent an accompanying compensatory mechanism. This compensatory mechanism involves increase of IGF-1, BDNF and CaMKII, the latter representing downstream target of IGF-1 (82), while synaptophysin, the other IGF-1 regulated protein, was not changed. However, when MIF-

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When applied alone in the present study, fructose-enriched diet did not change the level of pro-inflammatory mediators and kinases, nor affected the expression of M2 microglial markers. This was accompanied with unchanged expression of neurotrophic factors, PSD-95 and synaptophysin, which overall indicates that fructose diet did not affect neuronal plasticity and consequently behavior, as compared to WT animals on standard diet. On the other hand, the effects of fructose on insulin signaling were similar to the ones observed for standard-fed *Mif* deficient mice, e.g. decreased level of total IR, unchanged PKC α , and increased activation of Akt kinase, without concomitant change of IRS-1 and its phosphorylations at Ser307, while increased phosphorylation of IRS-1 at Ser1101 was observed. This phosphorylation, identified as S6K1 site in IRS-1, was found to be increased upon nutrient overload (83). However, its ratio to total IRS-1 protein level remained unchanged in the PFC of fructose-fed MIF-KO mice. In addition, in the same animals, reduced expression of *Tlr-4*, *Tnf- α* and *MyD88* was observed. This result was very intriguing, since fructose has considered to be proinflammatory in many tissues as recently thoroughly reviewed in Spagnuolo et al. (84). Such effect of fructose has also been reported for different brain regions (7, 40, 84), where it is promoted through TLR4/NF- κ B signaling pathway (85). To our knowledge, there are no other inflammatory states in which fructose exhibits direct anti-inflammatory effect. However, much of the recent attention has been focused on neuroprotective action of fructose 1,6-bisphosphate (FBP), a high-energy intermediate of

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fructose metabolism (86). It has recently been confirmed that many brain regions express fructose transporters and can metabolize fructose (87), which points to the importance of fructose metabolites for different brain functions. Specifically, FBP acts through anti-inflammatory and immunomodulatory mechanisms (86, 88), and has been shown to suppress MyD88-dependent signaling pathway (89), which was increased in the PFC of MIF-KO mice in our study. The immunosuppressive effects of fructose could also be indirect, and possibly mediated through glucocorticoids, potent anti-inflammatory hormones. Namely, we have previously shown that both glucocorticoid prereceptor metabolism and GR were upregulated by fructose in the hippocampus of rats drinking 60% fructose solution, opposing the action of NF- κ B, and resulting in the unchanged expression of proinflammatory cytokines (90). Nevertheless, the results did not reveal any change at the level of 11 β -HSD1 and total GR, pointing that the observed immunosuppressive effect of fructose in the PFC of MIF-KO mice was independent of the glucocorticoid signaling. While we confirmed that fructose diet increases stimulatory phosphorylation of GR in the PFC of WT mice, this effect was missing in MIF-KO animals, implying that MIF presence is necessary for the activation of glucocorticoids (14). Finally, the signals that originate from peripheral organs, such as increased leptin from the adipose tissue (9), or increased circulatory corticosterone (due to *Mif* deficiency) (91), could also indirectly modulate the effects of fructose in the brain of MIF-KO animals. According to the results presented herein, and the fact that direct anti-inflammatory effects of fructose were not previously reported, it seems that the observed immunomodulatory effects of fructose could rather be related to MIF or to the environment created in the PFC by its genetic deletion.

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The state of suppressed inflammation after fructose-enriched diet was in accordance with the restoration of BDNF-9 and IGF-1 mRNA levels in the PFC of fructose-fed MIF-KO mice, as well as with increased PSD-95 and normalization of analyzed behavioral changes. It was previously shown that sugar-rich diets can lead to decreased hippocampal BDNF mRNA levels in adult rats (92), and also in the offspring of fructose-fed dams, due to hypermethylation of *Bdnf* gene promoter (56). Similar effects of fructose consumption were also reported for IGF-1 mRNA levels in the rat liver (93), while IGF-1 receptor was decreased in the hypothalamus and hippocampus of fructose-fed rats (40). The molecular markers of insulin signaling, as well as AMPK α phosphorylation, were not changed in MIF-KO mice on fructose diet as compared to individual factors, with the exception of PKC α . These results generally suggest that fructose has beneficial effects on disturbances induced by neuroinflammation in *Mif* deficient animals, such as behavioral impairments, most likely through increased synthesis of endocannabinoids (94) and dopamine (95), which has been shown to decrease depression-like and anxiety-like behaviors in laboratory models (96) and inhibit cytokine production and expression of adhesion molecules (97), respectively. Taking into account that it has been shown that brain inflammation is associated with a weakened reward system (98) and that cerebral cortex is a part of the reward system based on signaling via opioid and endocannabinoid receptors (99), there is a possibility that fructose achieves its role in MIF-KO mice through the hedonistic aspect of the sugar consumption. It could be suggested, but remains beyond the scope of this manuscript, that prefrontal cortex and other structures of the corticolimbic pathway, responsible for reward-associated feeding behavior (100, 101), could have more significant role in response to fructose feeding, compared to

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Although the influence of dietary sugars on metabolic disorders is an expanding field of research, the studies regarding the role of specific brain structures, such as PFC, in the pathophysiology of these disorders are still scarce. The results obtained in this study show that *Mif* deficiency provokes compensatory increase in local inflammation in the PFC by increasing the levels of TNF- α , TLR-4 and MyD88, whereas increase of BDNF-9 and IGF-1 could represent counterbalancing response to the increased inflammation due to activation of alternative M2 microglia. *Mif* deficiency also alters neural plasticity by decreasing PSD-95, which is accompanied by anxiety-like behavior and learning and memory impairment. Fructose itself did not affect inflammation or plasticity, but in the MIF-KO mice was clearly capable to restore behavioral impairments and ameliorate inflammation in the PFC, which was independent of glucocorticoid signaling activation. Although all MIF-KO animals showed disturbed insulin sensitivity at the systemic level, this was not mirrored in the disturbed insulin signaling in the PFC. Also, our results clearly demonstrate that the effects of fructose on neuroinflammation and behavior depend on the presence of MIF, as seen for the activation of GR, PKC α and CaMKII kinase, which postulates that their regulation in the setting of metabolic stress by caloric overload is mediated, at least indirectly, through MIF.

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Figure captions

Figure 1. Markers of inflammation. (A) Representative Western blots and relative quantification of (B) pI κ B^{Ser32}, total I κ B, their ratio and NF- κ B/p65 protein level (C) F4/80 protein level and (D) relative mRNA levels of *Arg-1*, *Lif* and *Mrc-1* in the PFC of C57BL/6J mice (WT), mice with genetically deleted *Mif* (MIF-KO), MIF-KO mice on fructose diet (MIF-KO+F) and WT mice on fructose diet (WT + F). Immunoreactivities of analyzed samples were normalized to β -actin as a loading control, while HPRT1 was used as endogenous control for the PCR analysis. The data are presented as mean \pm SEM (n = 6 – 8 animals per group). A value of p<0.05 was considered statistically significant. Significant between-group differences from post-hoc Tukey test are given as follows: **p<0.01, ***p<0.001, all groups vs. WT; ###p<0.001, MIF-KO + F vs. MIF-KO.

Figure 2. Insulin signaling. Representative Western blots and relative quantification of IR, pIRS-1^{Ser307}, pIRS-1^{Ser1101} and IRS-1 and their ratios in the PFC of C57BL/6J mice (WT), mice with genetically deleted *Mif* (MIF-KO), MIF-KO mice on fructose diet (MIF-KO+F) and WT mice on fructose diet (WT + F). Immunoreactivities of analyzed samples were normalized to β -actin as a loading control. The data are presented as mean \pm SEM (n = 6 – 8 animals per group). A value of p<0.05 was considered statistically significant. Significant between-group differences from post-hoc Tukey test are given as follows: **p<0.01, ***p<0.001, all groups vs. WT; †p<0.05, MIF-KO + F vs. WT + F.

Figure 3. Markers of insulin resistance and energy balance. Representative Western blots

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Figure 4. Glucocorticoid signaling. Representative Western blots and relative quantification of 11 β -HSD1, pGR^{Ser220}, GR and their ratio in the PFC of C57BL/6J mice (WT), mice with genetically deleted *Mif* (MIF-KO), MIF-KO mice on fructose diet (MIF-KO+F) and WT mice on fructose diet (WT + F). Immunoreactivities of analyzed samples were normalized to β -actin as a loading control. The data are presented as mean \pm SEM (n = 6 – 8 animals per group). A value of p<0.05 was considered statistically significant. Significant between-group differences from post-hoc Tukey test are given as follows: **p<0.01, WT + F vs. WT; ††p<0.01, MIF-KO + F vs. WT + F.

Figure 5. Synaptic plasticity markers. (A) Representative Western blots and relative quantification of (B) pCaMKII^{Thr286}, total CaMKII and their ratio; (C) PSD-95 and synaptophysine protein levels and (D) relative mRNA levels for *Bdnf-9* and *Igf-1* in the PFC

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Figure 6. Behavioral tests. (A) Latency to enter OA and (B) % of total crossings into OA in the elevated plus maze (EPM) test; (C) Latency to enter dark box and (D) time spent in dark in the light dark box (LDB) test; (E) Novel object preference ratio expressed as % of exploration time in the NOR test are shown for C57BL/6J mice (WT), mice with genetically deleted *Mif* (MIF-KO), MIF-KO mice on fructose diet (MIF-KO+F) and WT mice on fructose diet (WT + F). Data are presented as mean \pm SEM (n = 8 animals per group). Significant between-group differences from post hoc Tukey test are given as follows: * $p < 0.05$, MIF-KO vs. WT; # $p < 0.05$, MIF-KO+F vs. MIF-KO.

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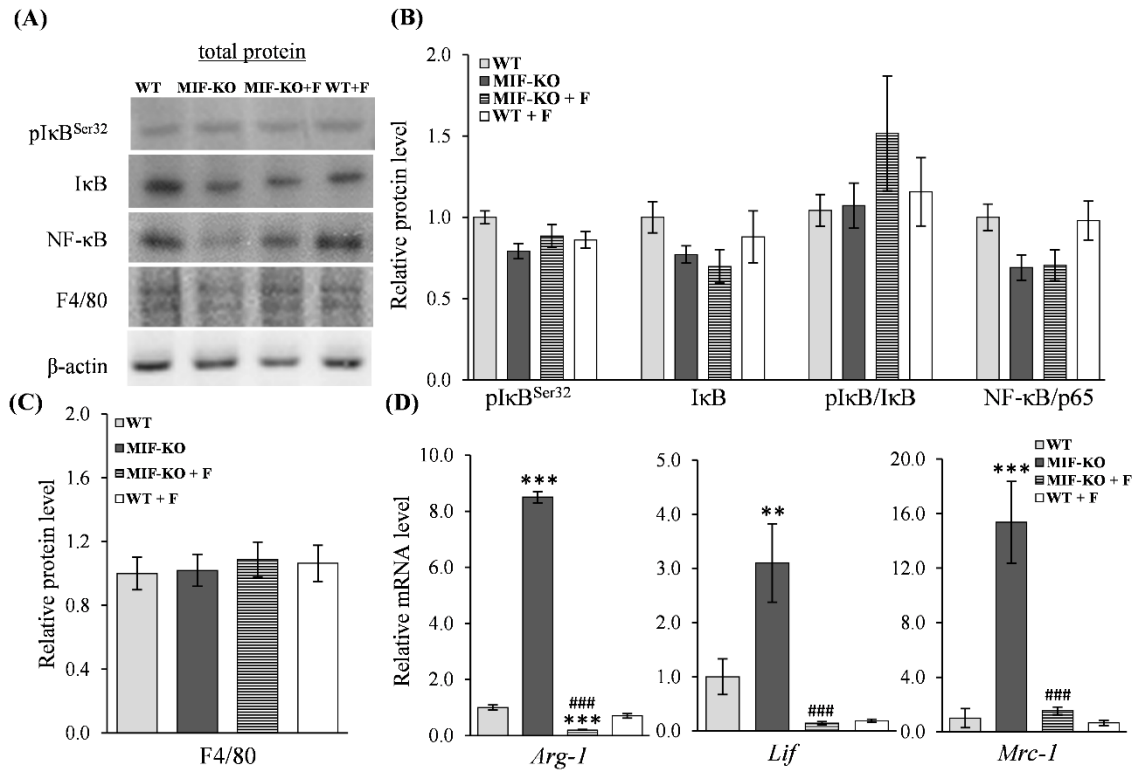


Figure 1.

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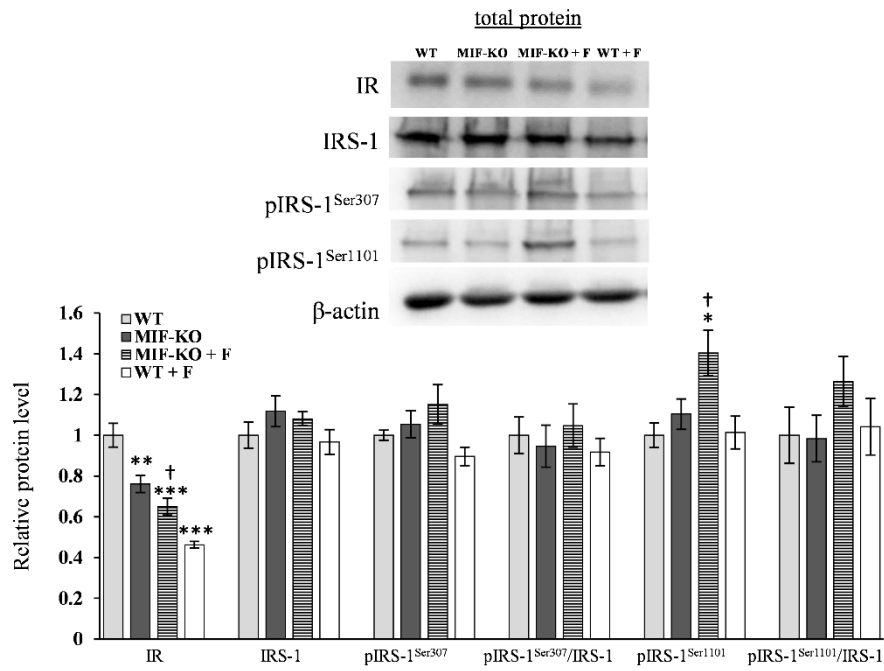


Figure 2.

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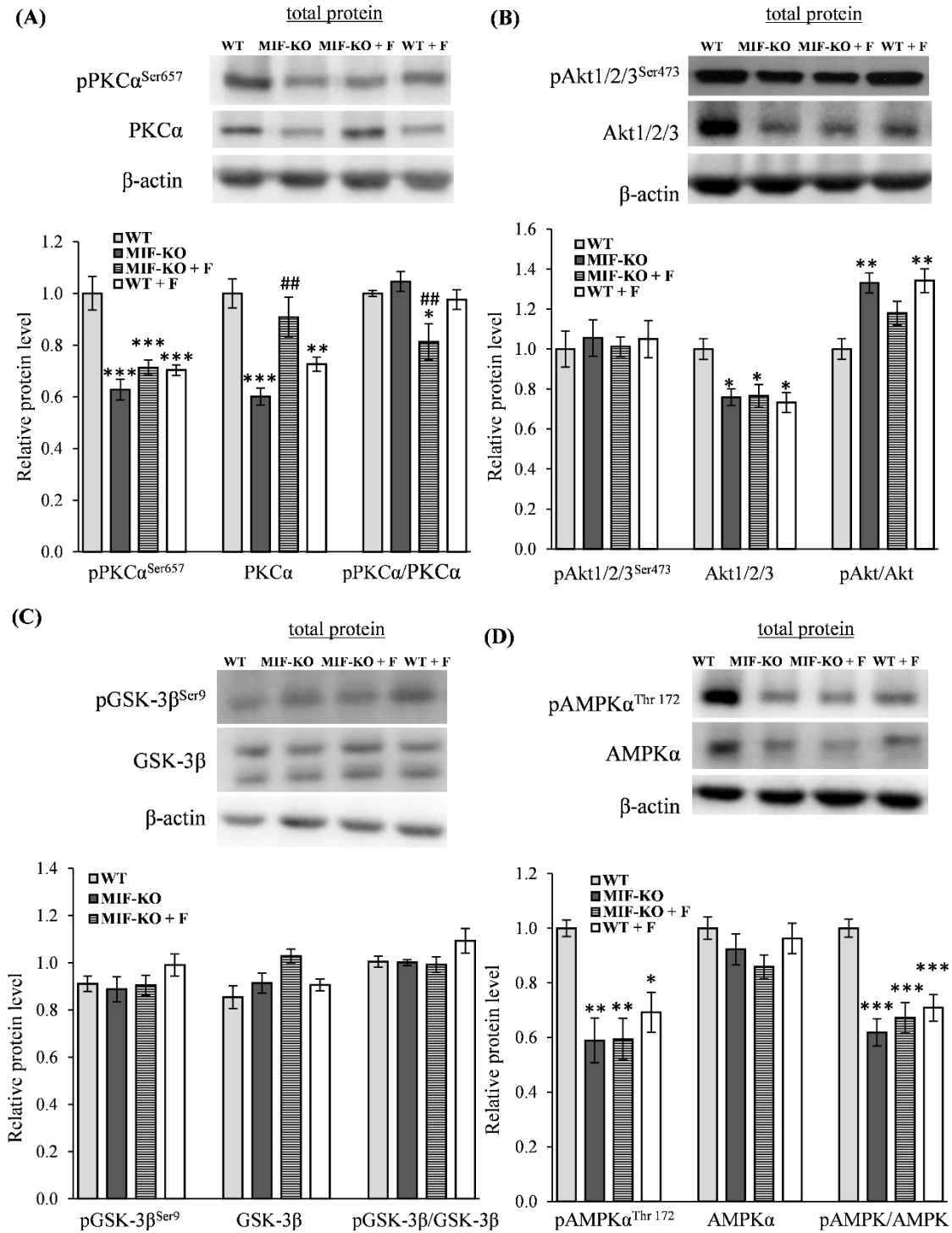


Figure 3.

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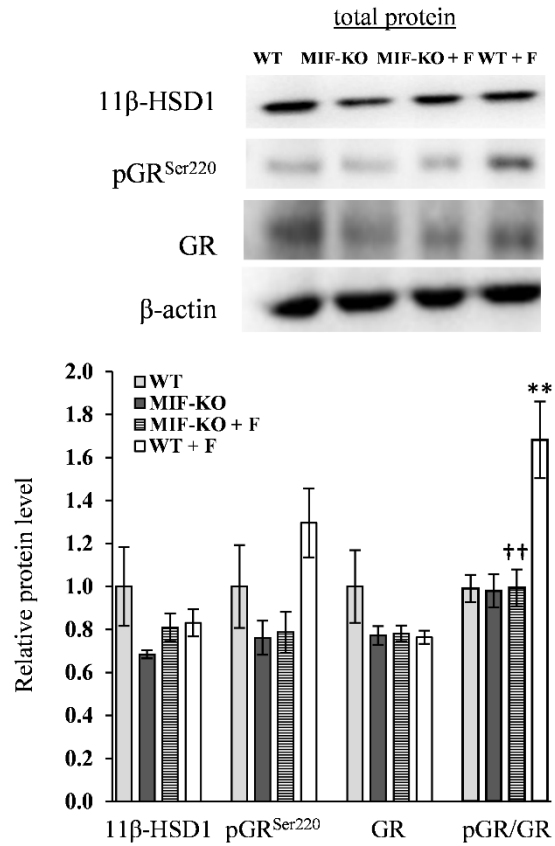


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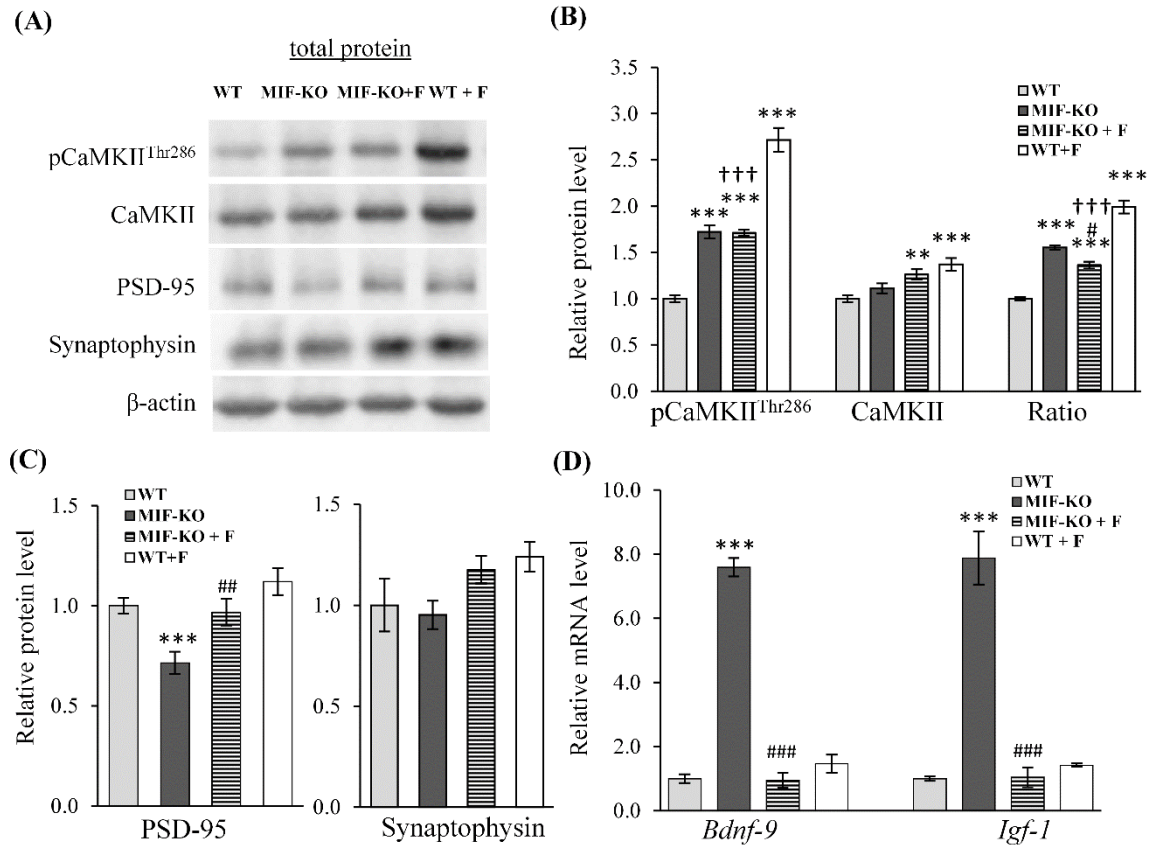


Figure 5.

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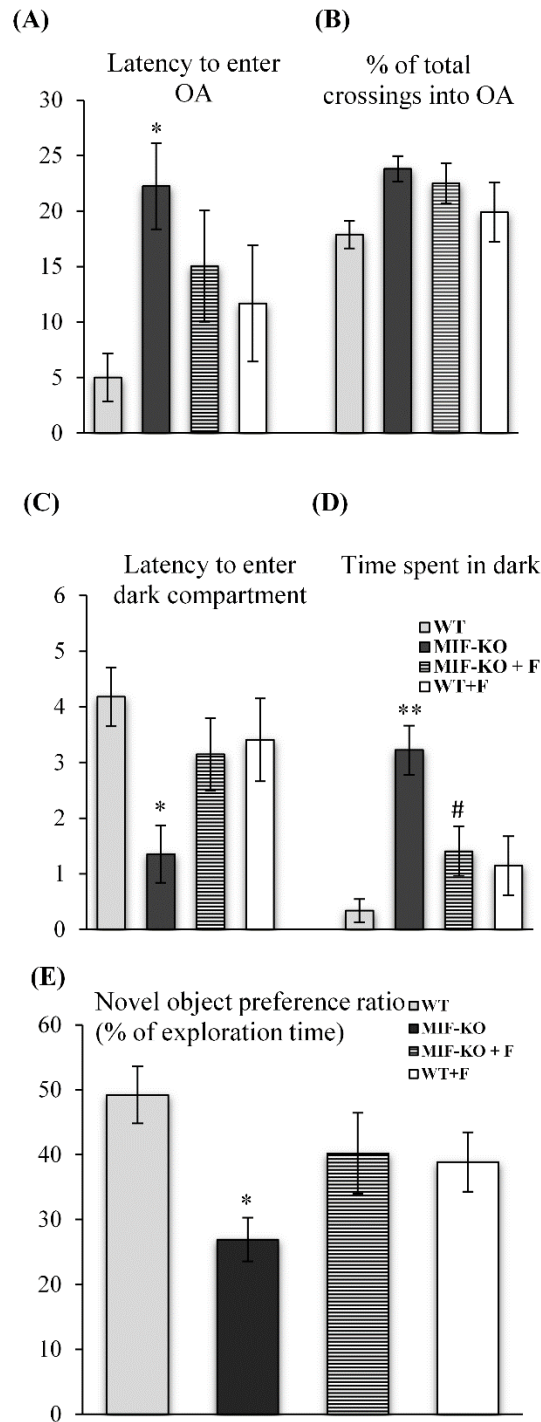


Figure 6.