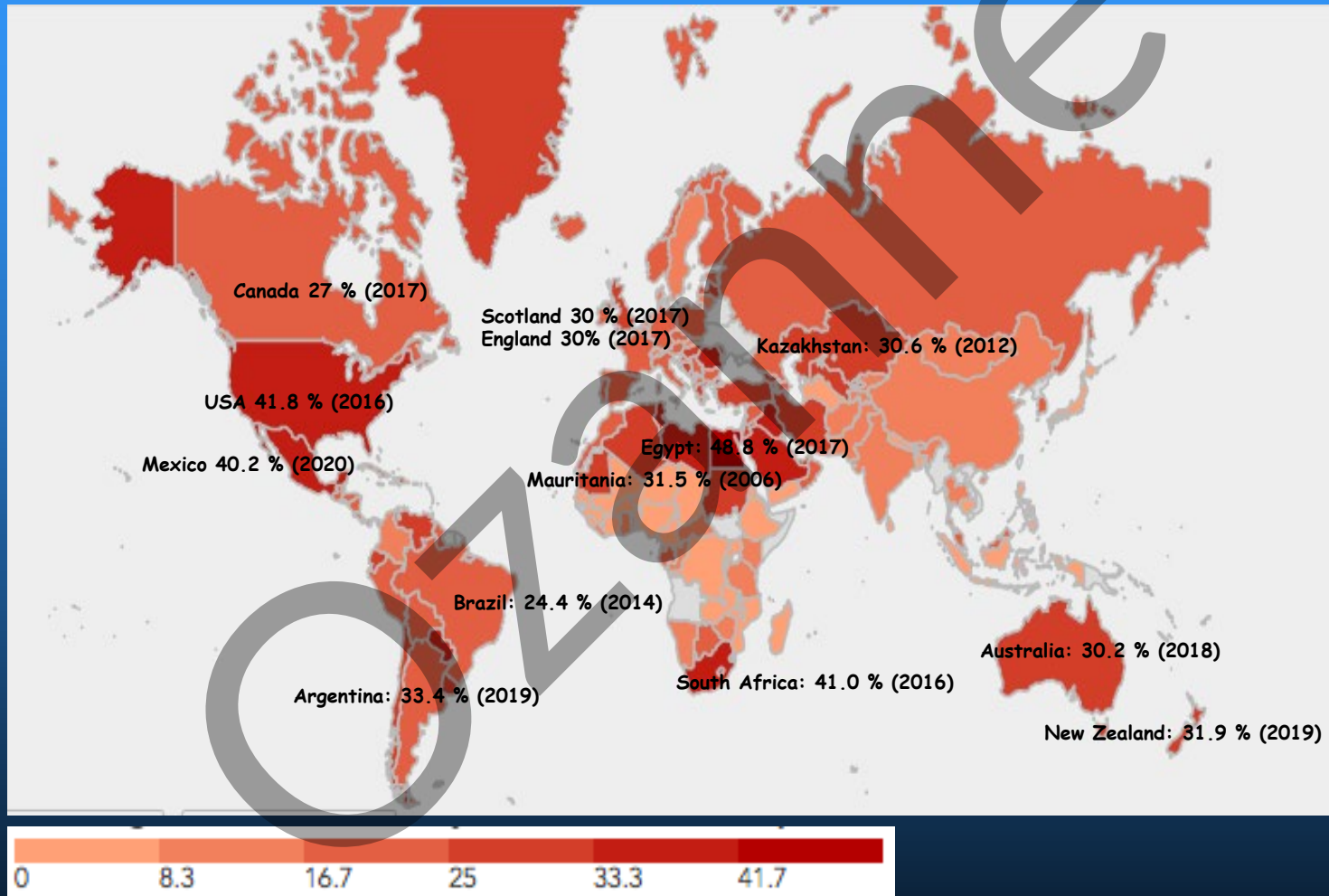


# Interventions during Obese Pregnancy: A Window of Opportunity to Improve the Health of Two Generations

**Susan Ozanne**



# Obesity Prevalence in Women



# Developmental Programming

Suboptimal  
Early  
Environment



Increased risk  
of  
Cardio-metabolic  
Disease

Under-nutrition

Over-nutrition

Stress

Hypoxia

Air pollutants

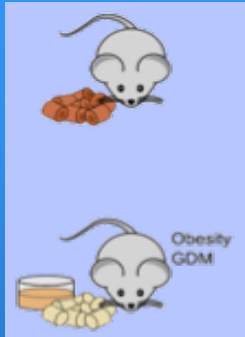
Smoking

# Evidence for Programming by Maternal Obesity in Humans

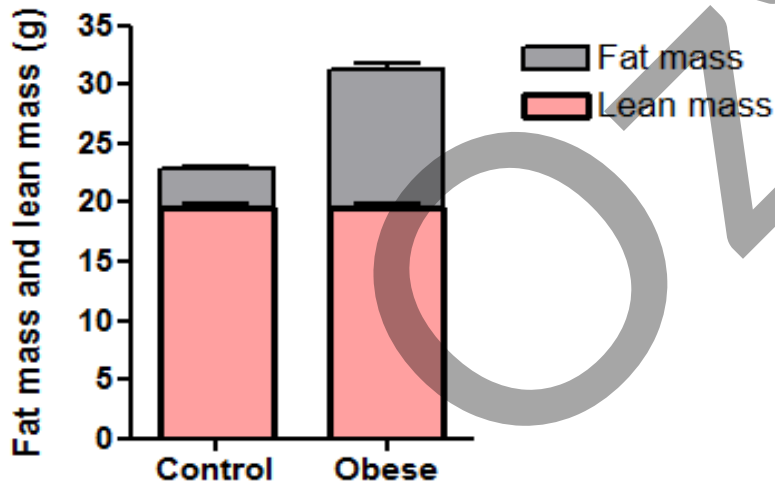
Measurement	Born Pre Maternal Bariatric Surgery	Born Post Maternal Bariatric Surgery
% Body Fat	29.9 ± 13.9	21.4 ± 10.3***
Insulin (μU/ml log10)	18.8 ± 12.2	11.3 ± 7.4*
Glucose (mM)	4.9 ± 0.43	4.7 ± 0.43
Systolic BP (mmHg)	111.3 ± 14.7	97.4 ± 12.8*

# Using Animal Models to Demonstrate Causality and Understand Underlying Mechanisms

# Maternal Diet-Induced Obesity Model



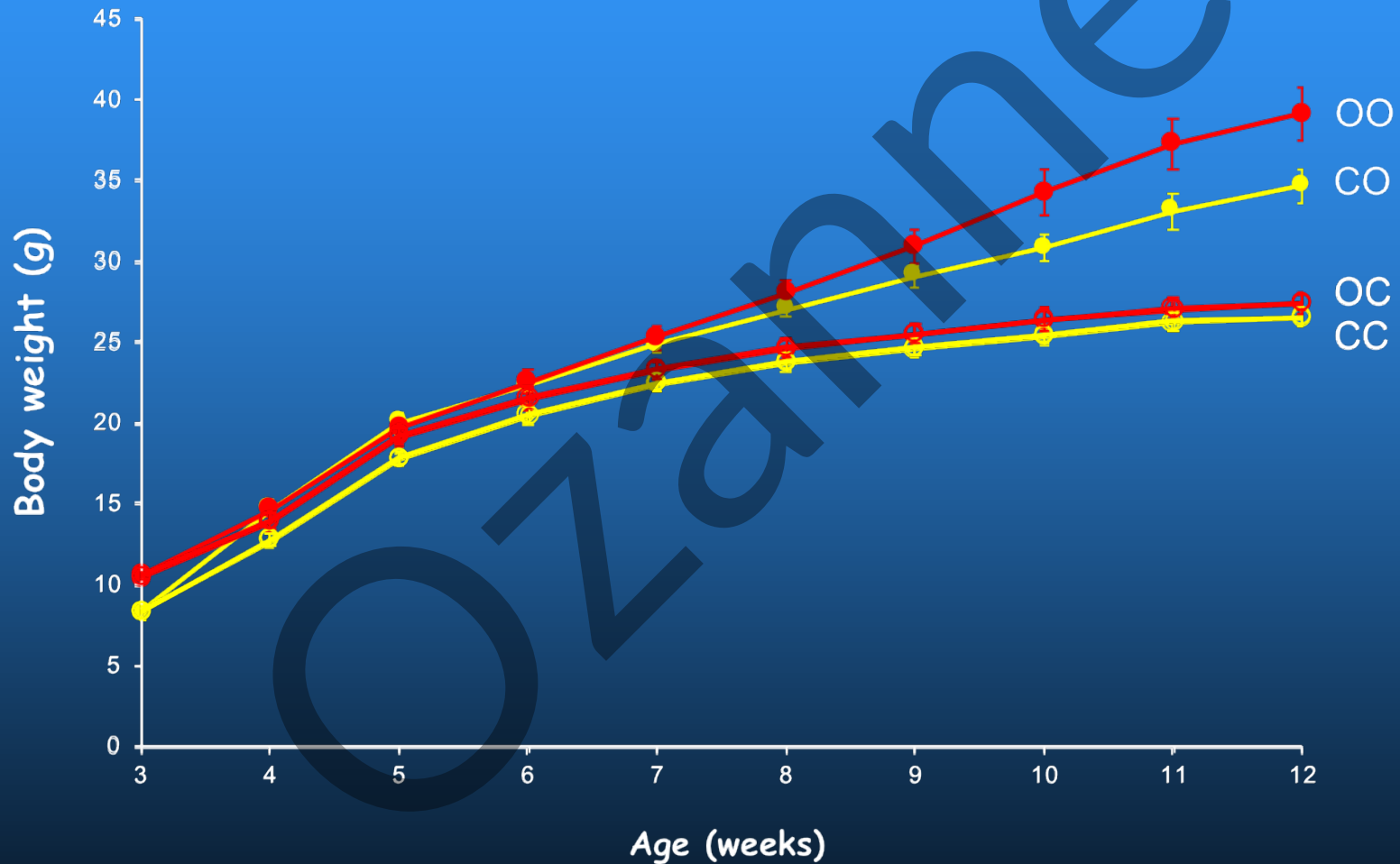
## Body Composition at Mating



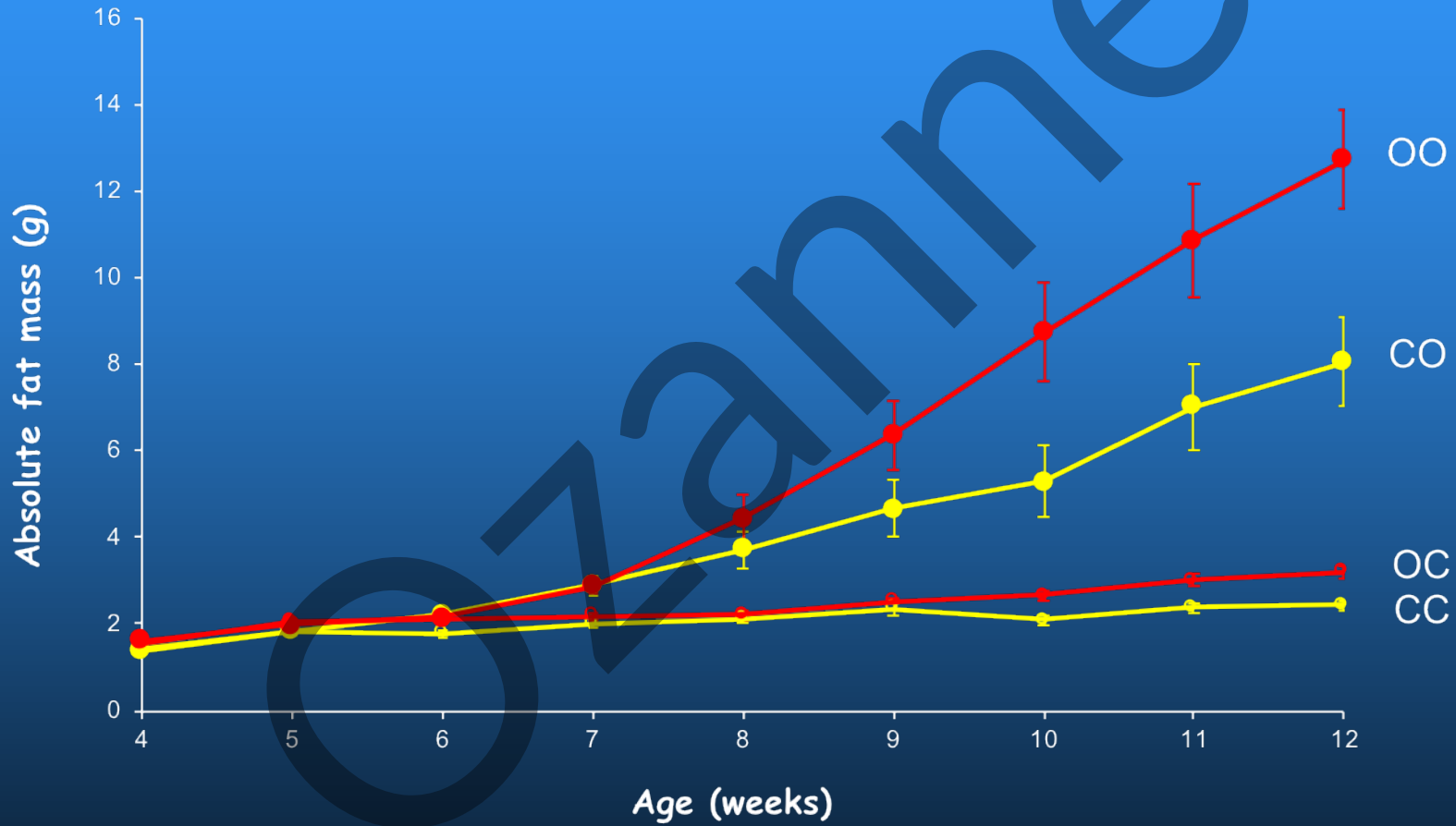
## Plasma Parameters during Pregnancy

	CONTROL	OBESE
Insulin (pmol/l)	96 ± 8	224 ± 11**
Triglycerides (mmol/l)	0.77 ± 0.13	0.83 ± 0.15
Free Fatty Acids (µmol/l)	410 ± 46	796 ± 130*
Cholesterol (mmol/l)	2.1 ± 0.2	3.8 ± 0.2***

# Offspring Body Weight

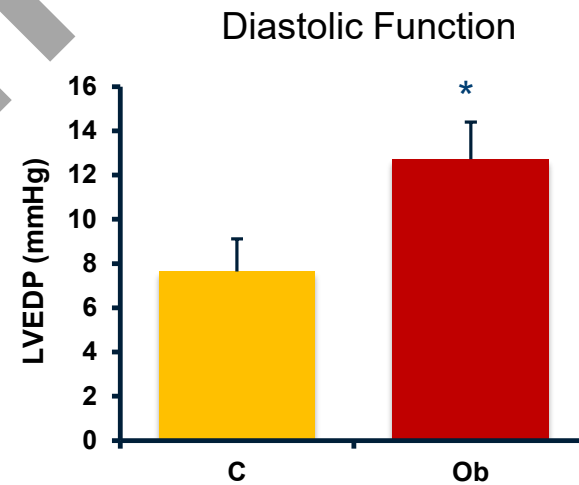
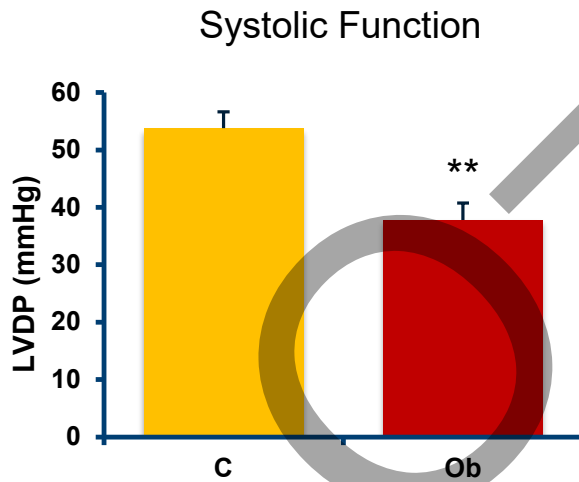
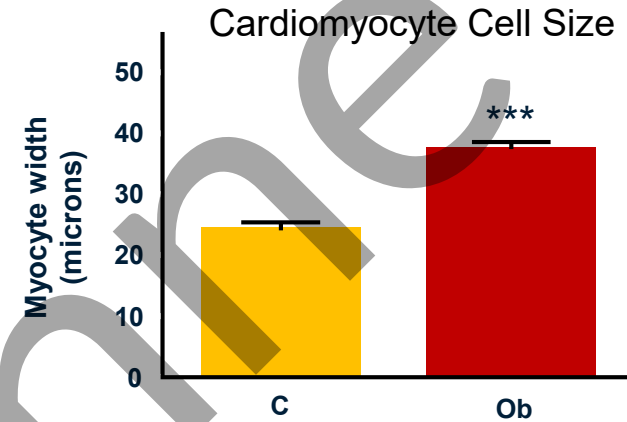
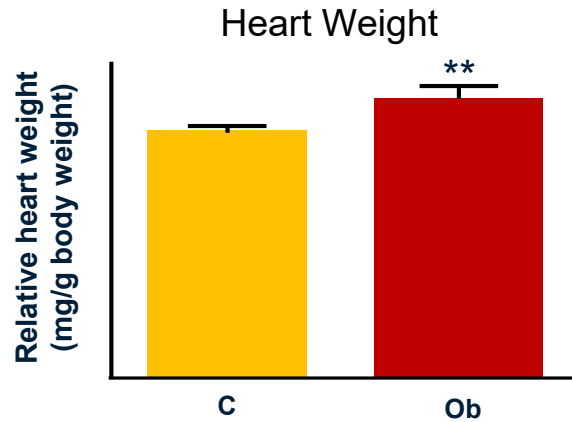


# Offspring Adiposity

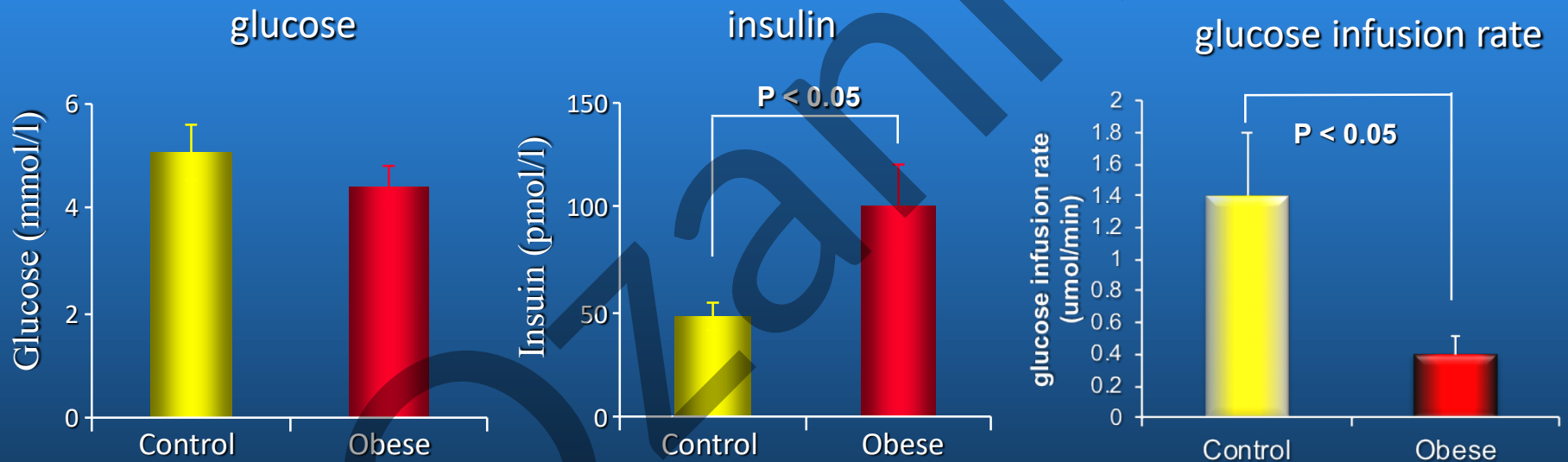




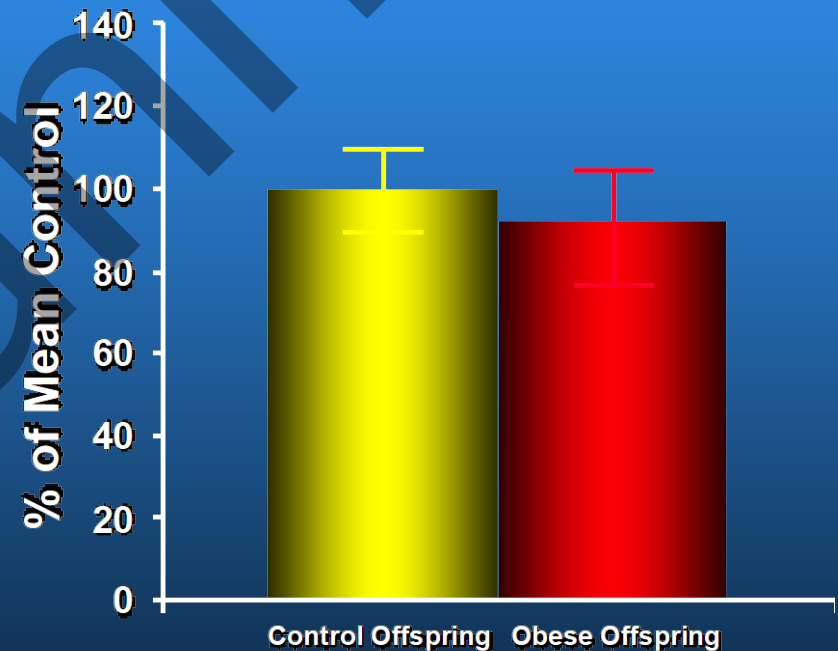
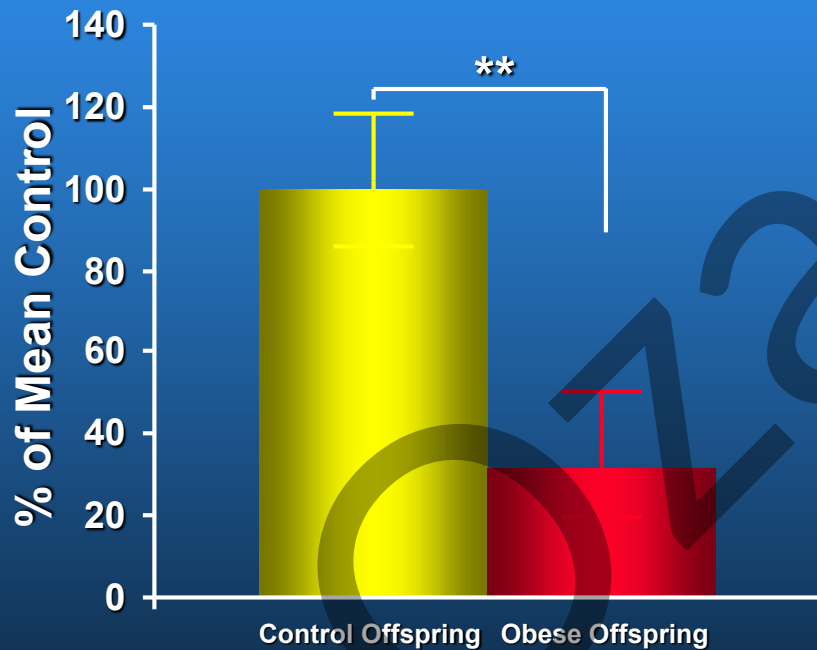
# Cardiac Effects



# Plasma Parameters

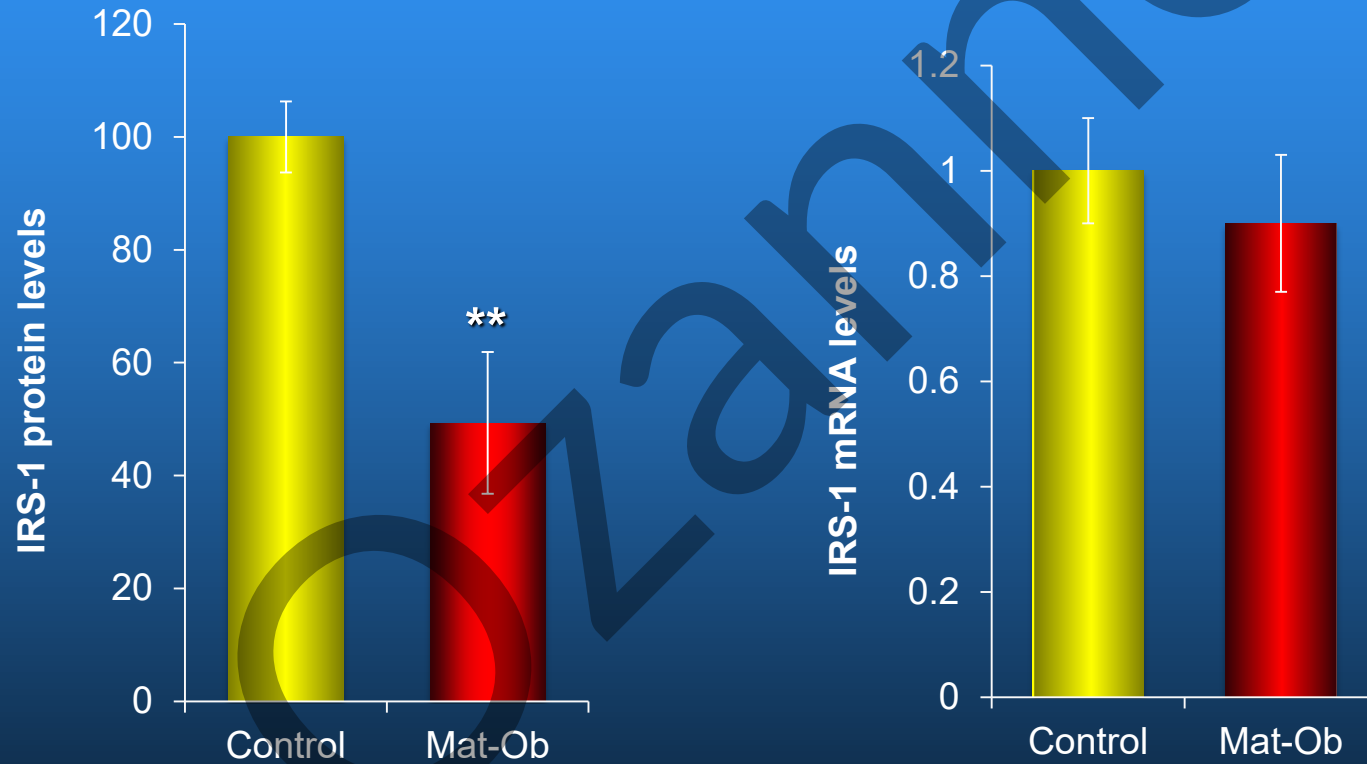


# Post-Transcriptional Programming of Adipose Tissue IRS-1 by Maternal Diet-Induced Obesity

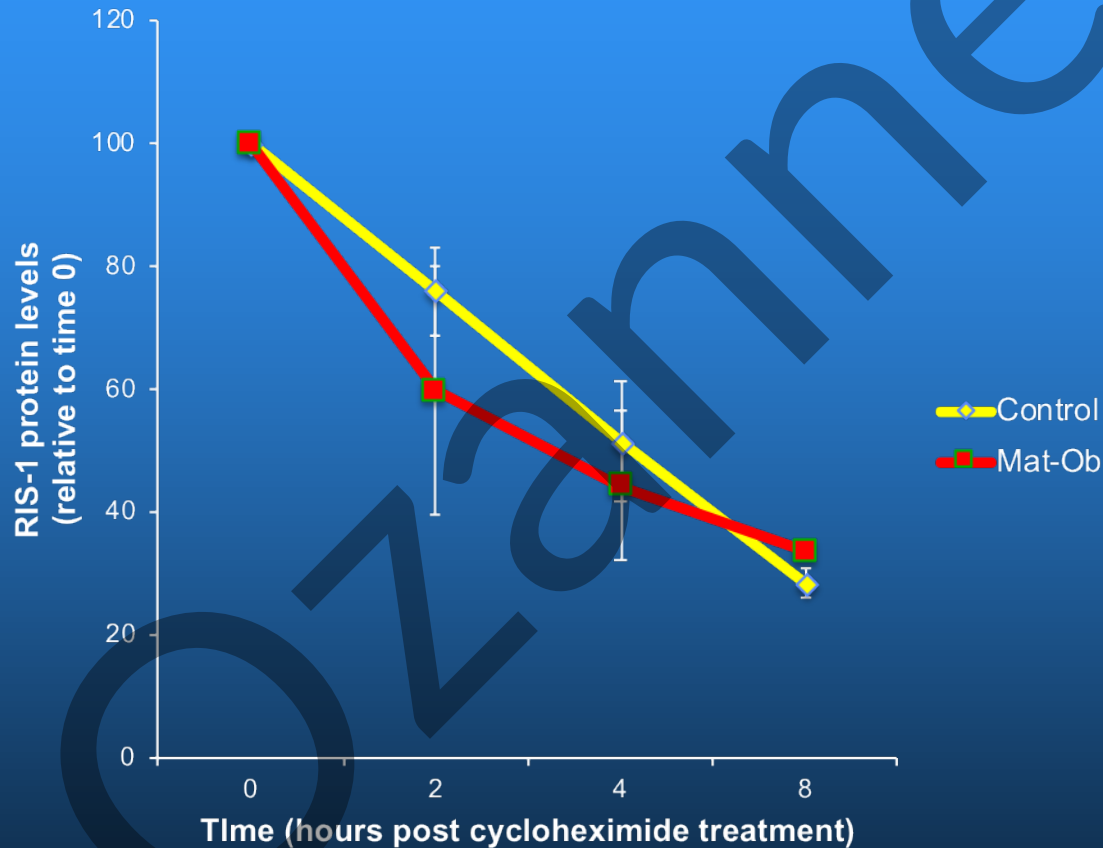


Is this effect  
maintained following *in*  
*vitro* culture?

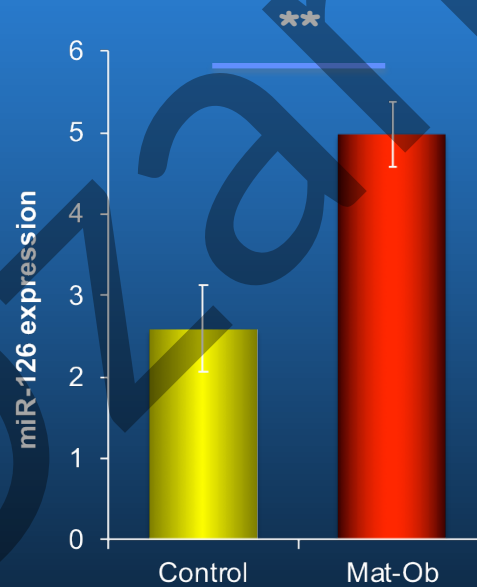
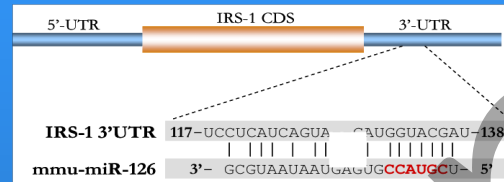
# Cell Autonomous Programming of IRS-1 by Maternal Diet-Induced Obesity



# Mechanisms of IRS-1 Programming



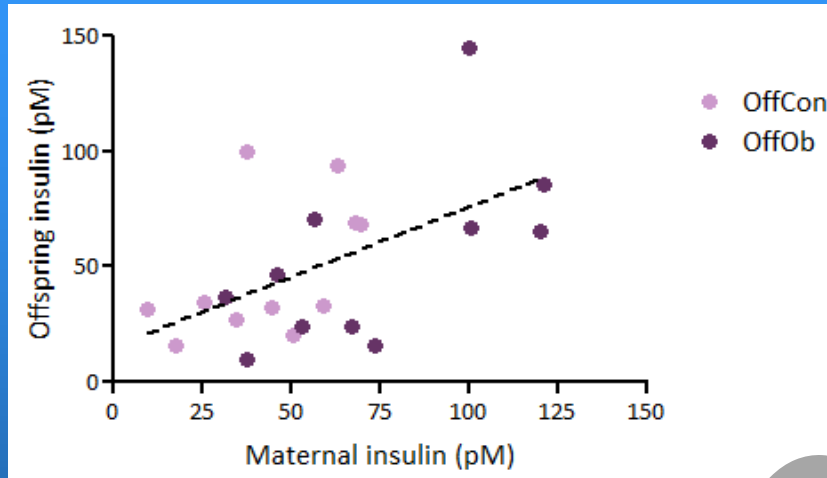
# miR-126 is Programmed



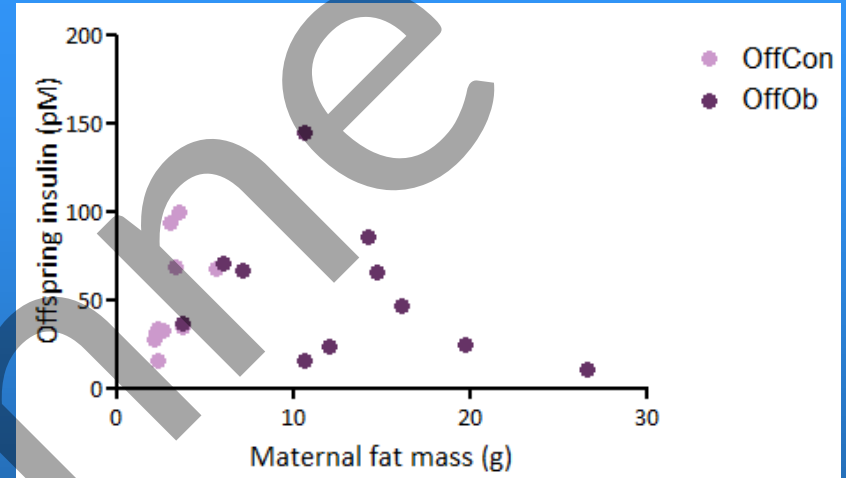
**Intervention in the Mother:  
What do we target?**



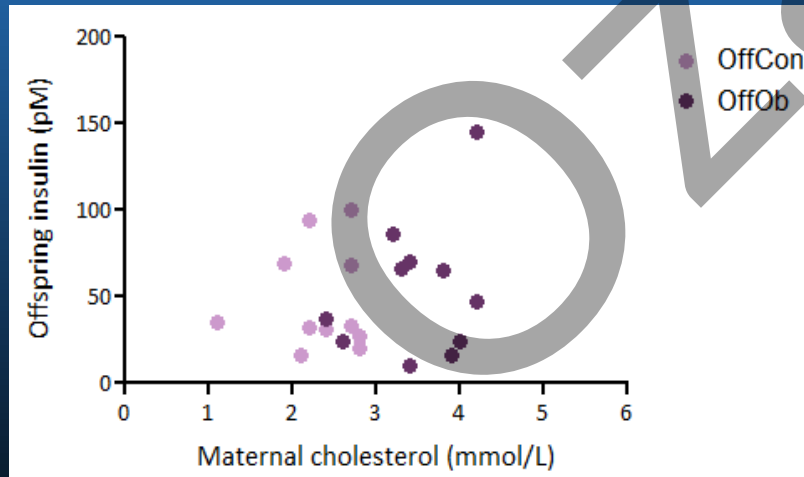
# Maternal Predictors of Offspring Insulin



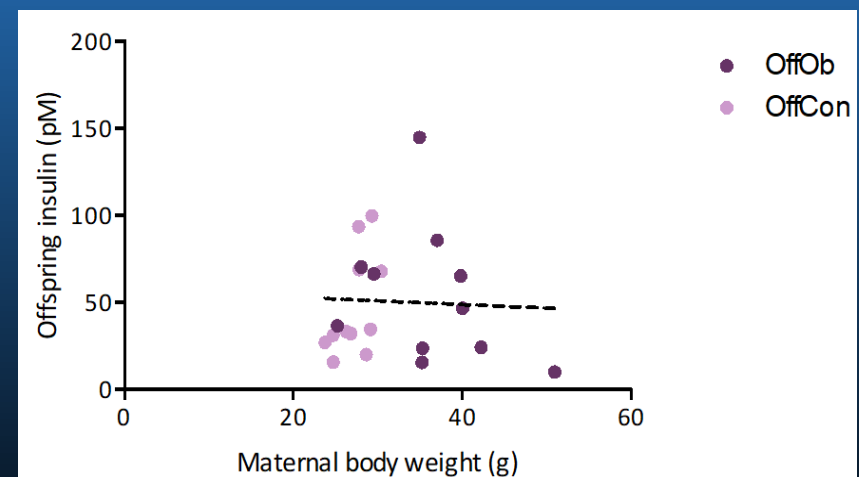
$P < 0.01$  Pearson's  $r = 0.54$



Pearson's  $r = -0.12$



Pearson's  $r = -0.12$



Pearson's  $r = -0.042$

Can we improve the metabolic milieu in the mother by exercise intervention?

# Maternal Exercise Intervention

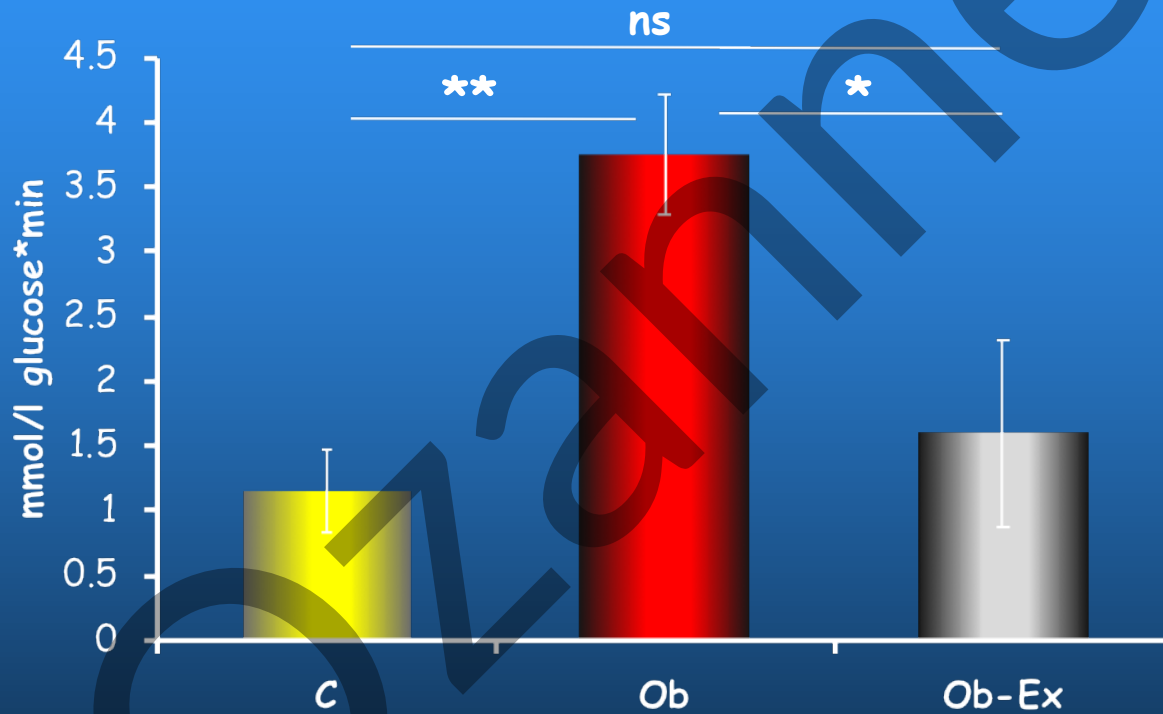


1 week  
training

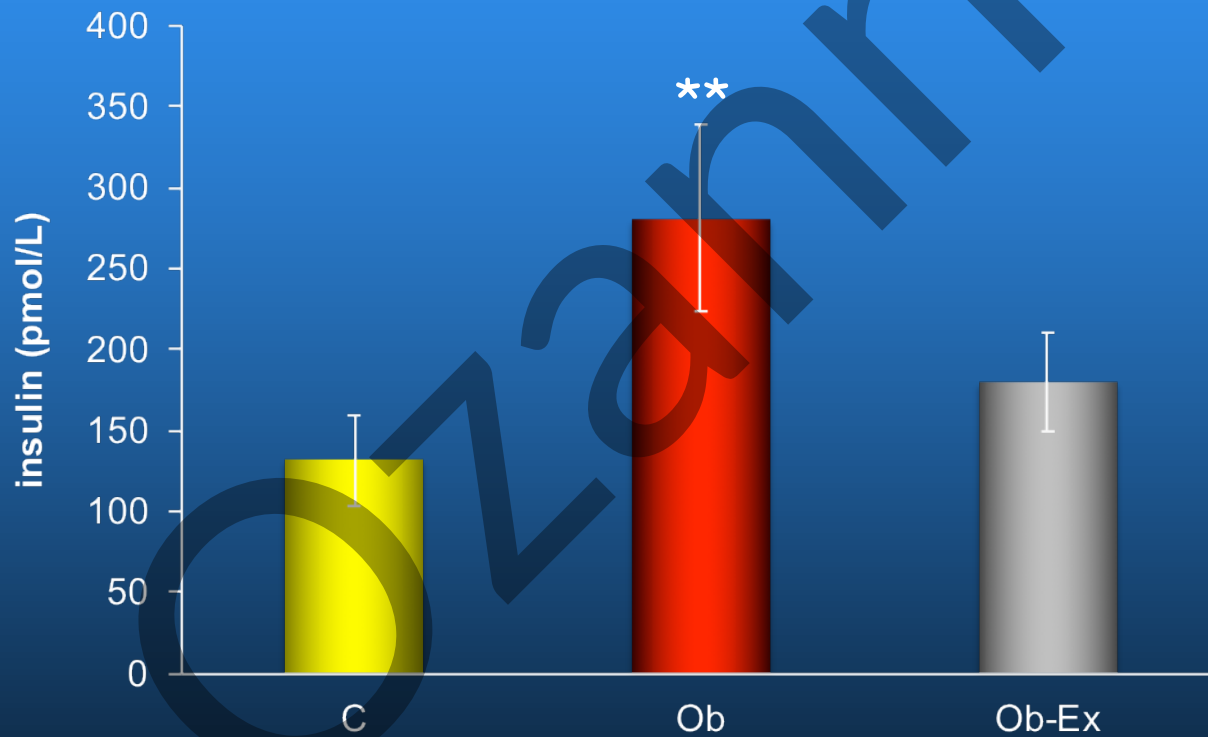
20 min/day  
5 days/week



# Maternal Glucose Tolerance



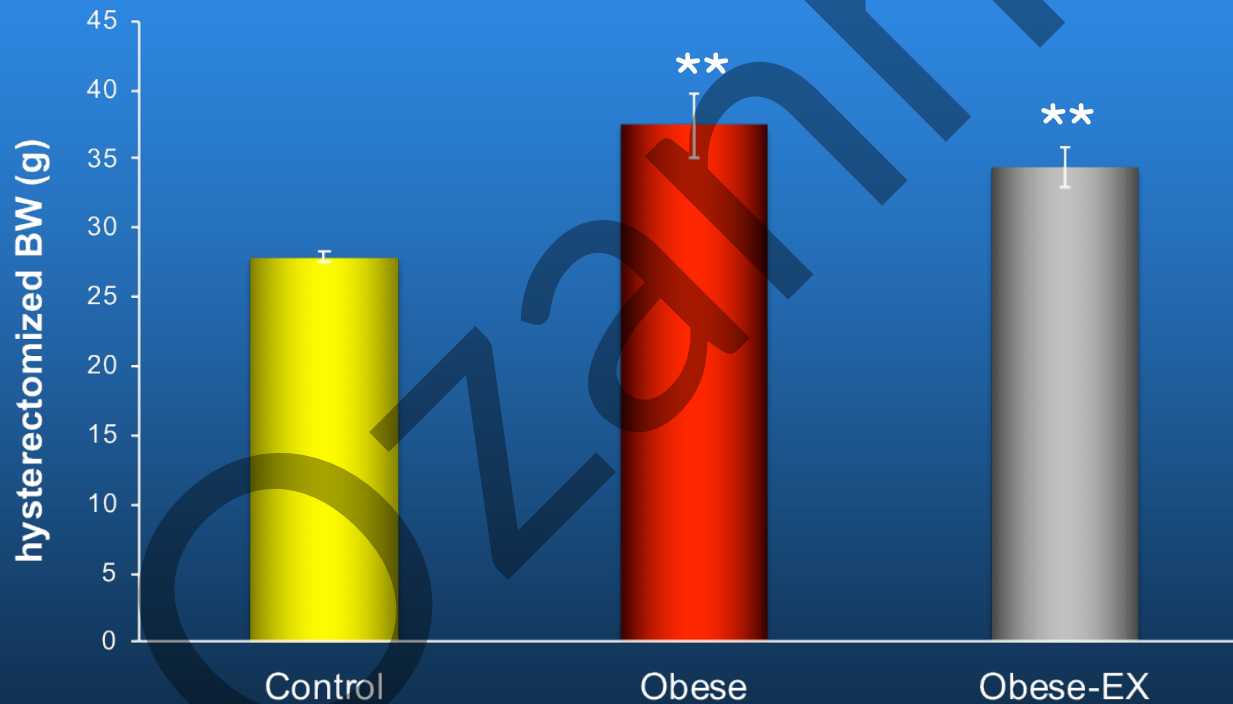
# Maternal Insulin



\*\*  $p < 0.01$  compared to controls

Fernandez-Twinn et al.  
2017

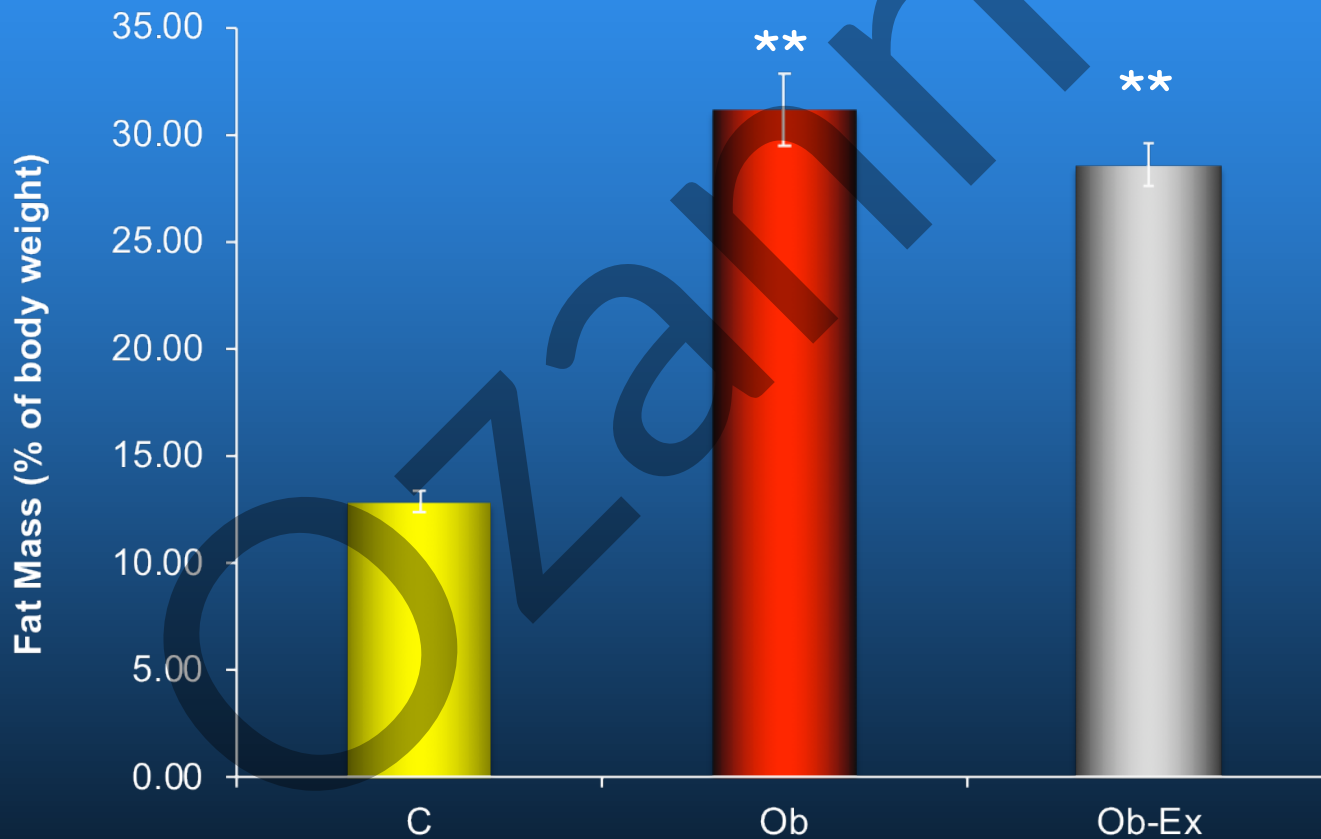
# Maternal Weight



\*\*  $p < 0.01$  compared to controls

Fernandez-Twinn et al.  
2017

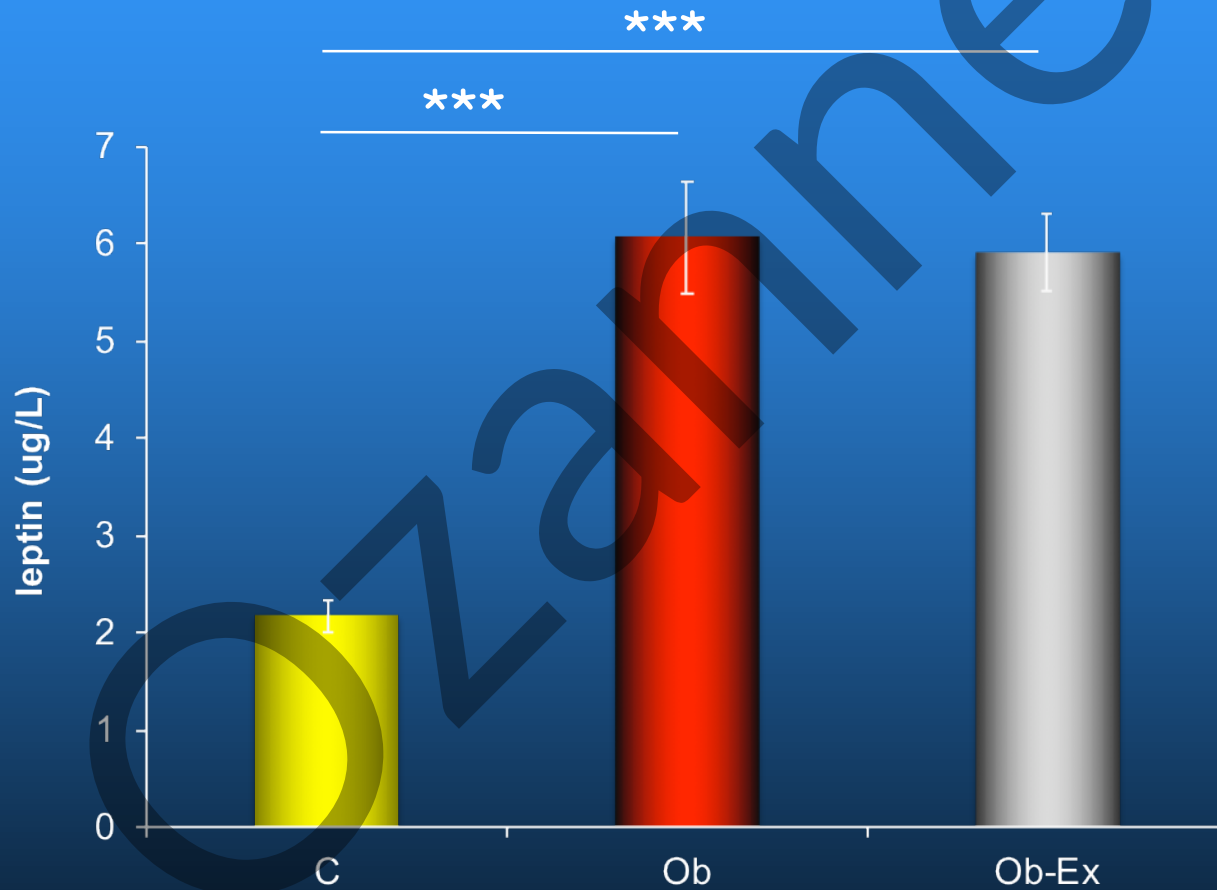
# Maternal Fat Mass



\*\*\*  $p < 0.001$  compared to controls

Fernandez-Twinn et al.  
2017

# Maternal Leptin



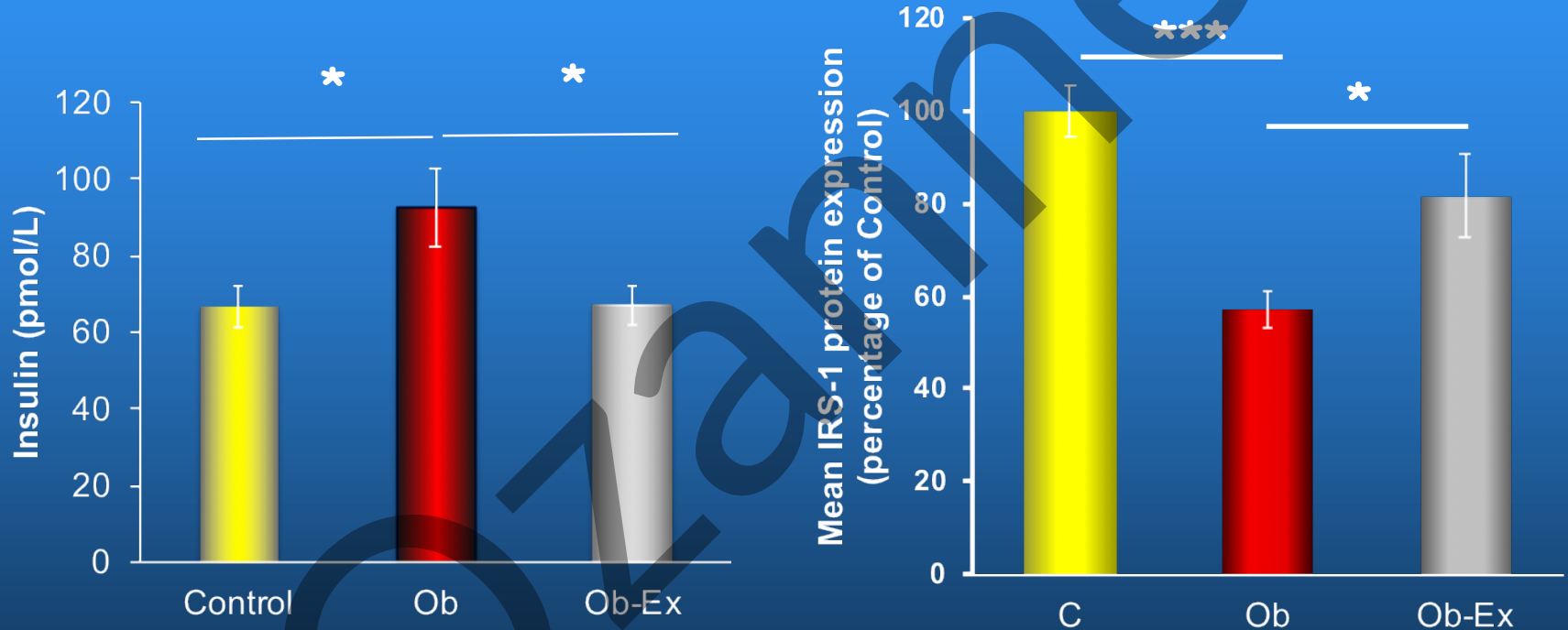
\*\*\*  $p < 0.001$  compared to controls

Fernandez-Twinn et al.  
2017

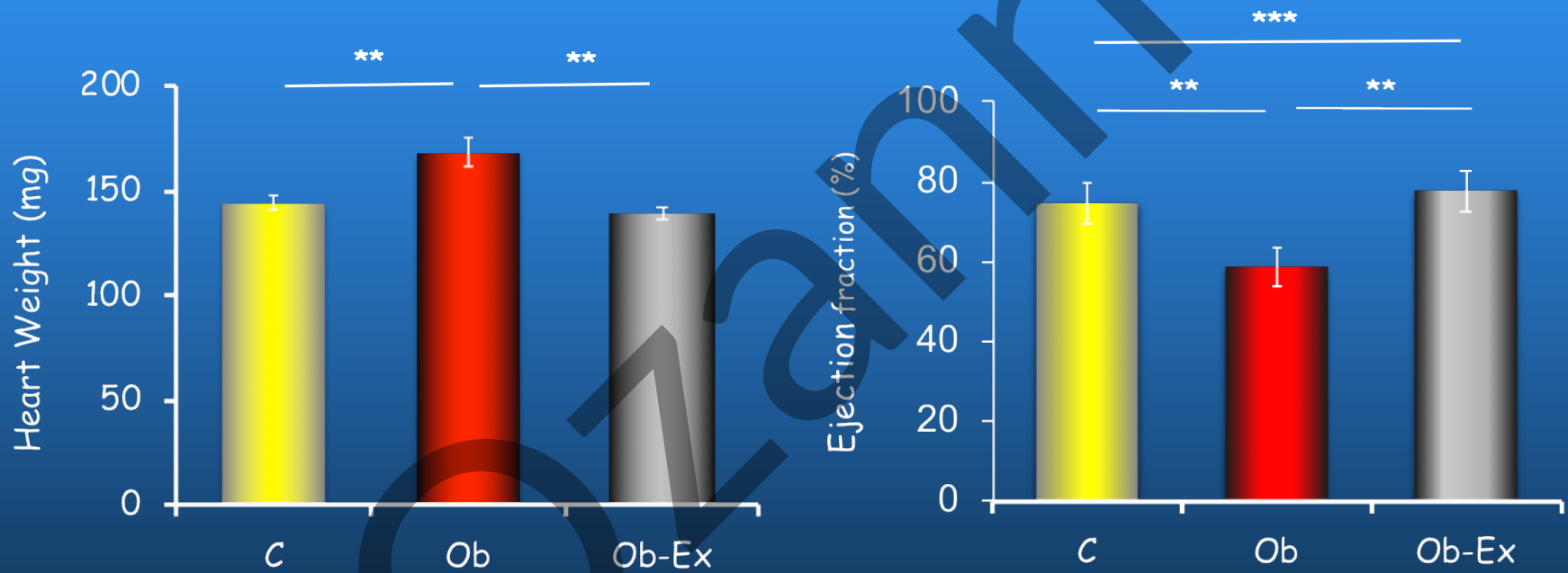


Does maternal exercise intervention prevent detrimental effects in the offspring?

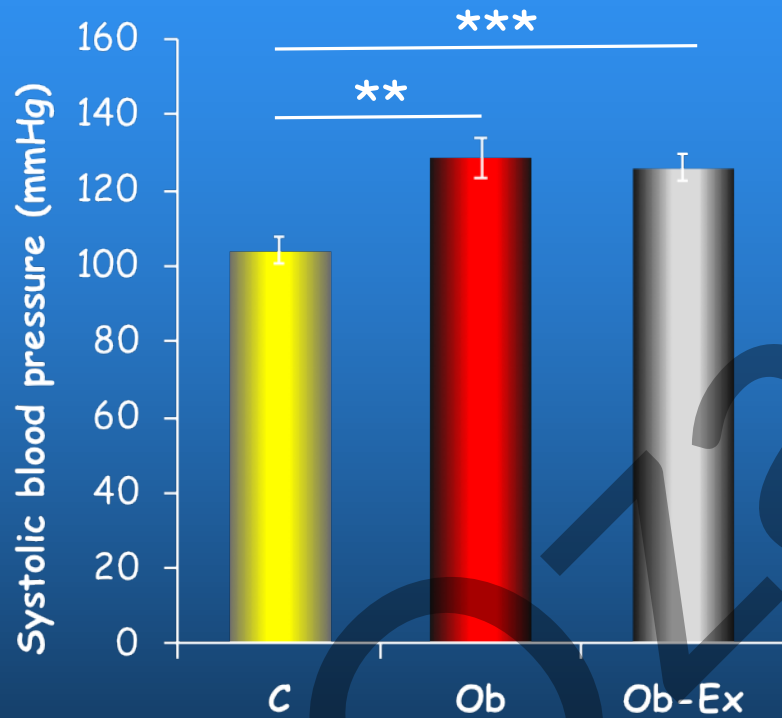
# Offspring Insulin and IRS-1



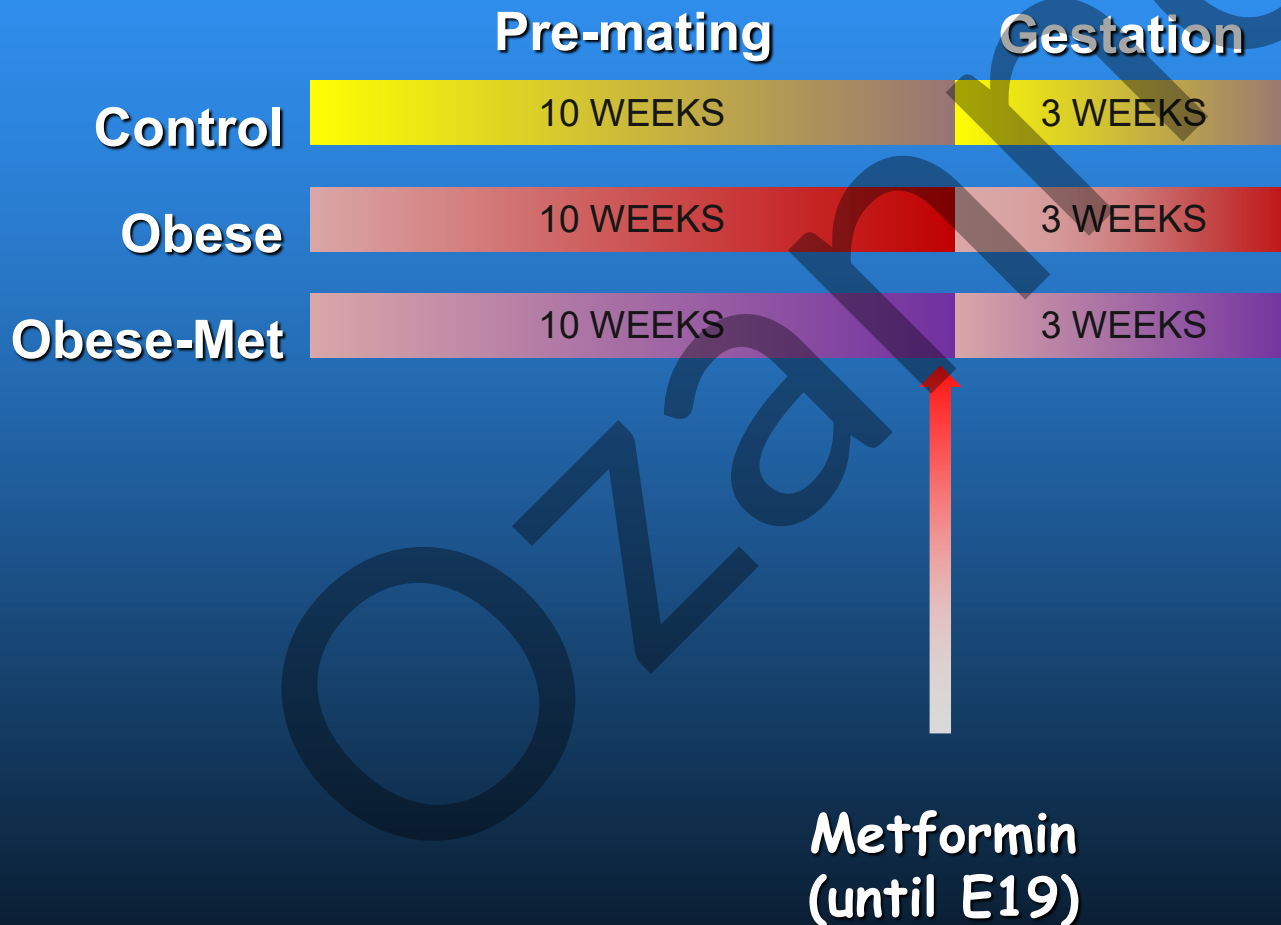
# Offspring Heart Weight and Function



# Offspring Blood Pressure

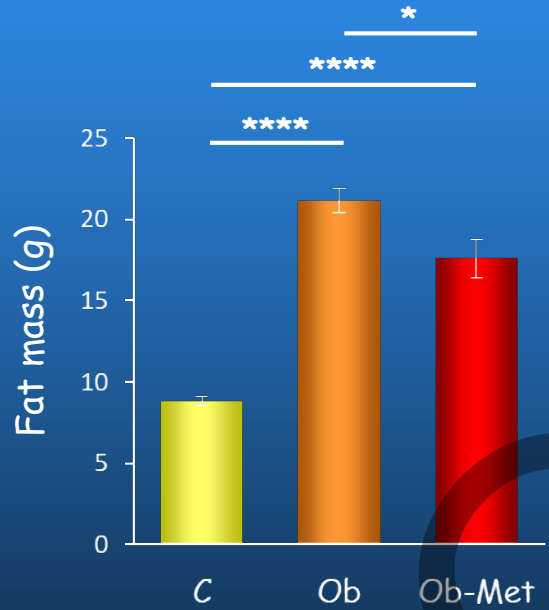


# Maternal Metformin Intervention

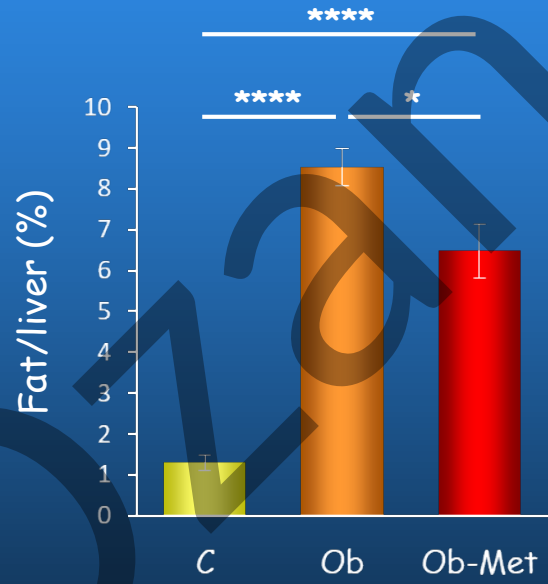


# Maternal Physiology

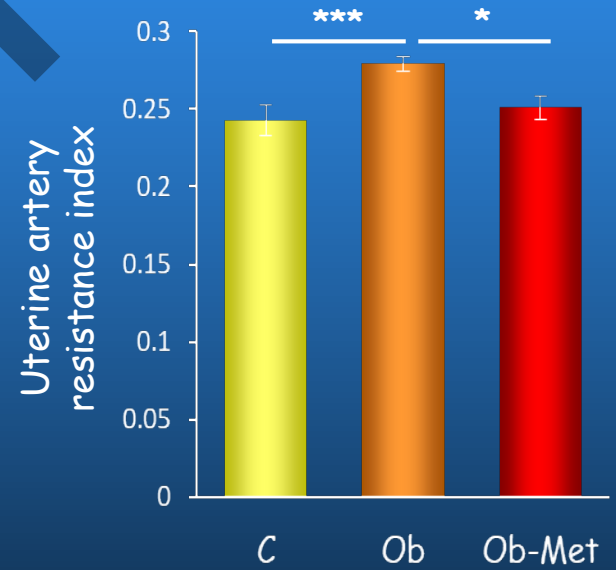
## Body Fat



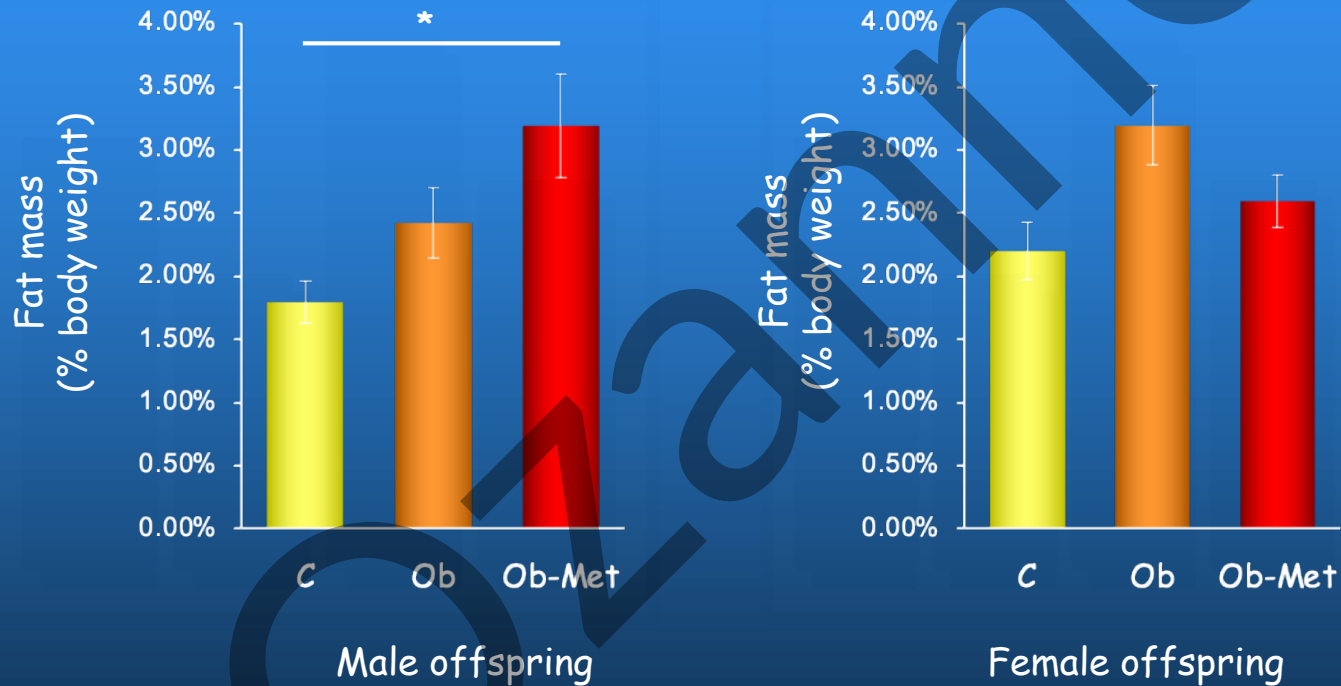
## Liver Fat



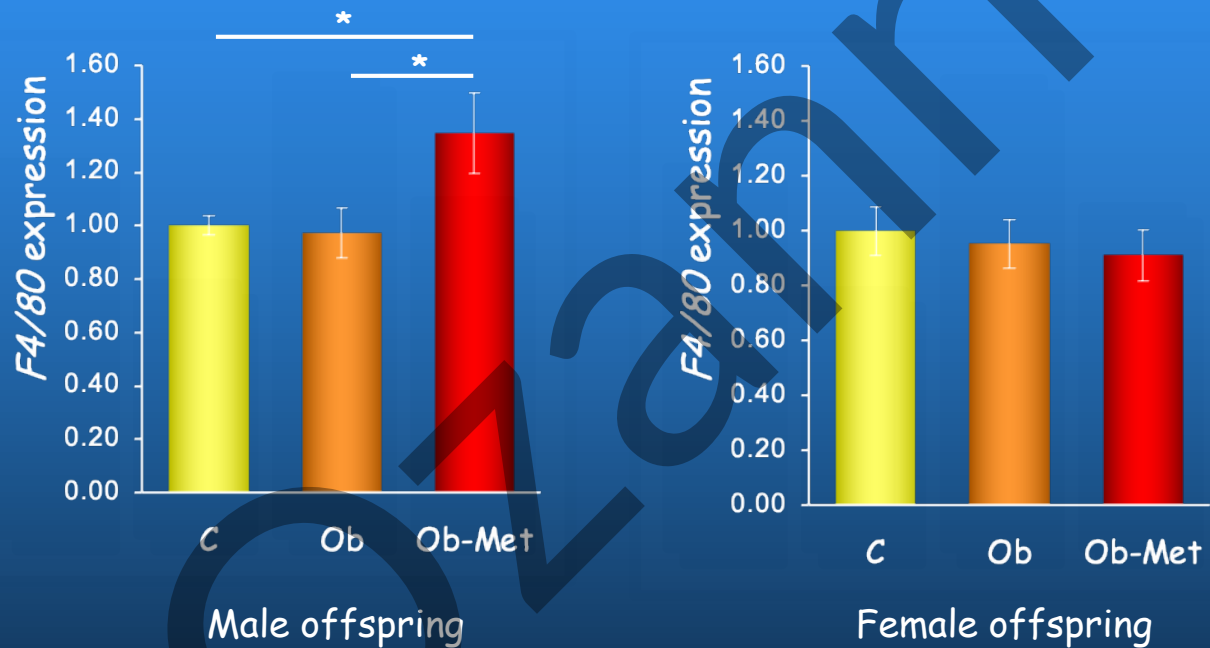
## Uterine Artery RI



# Young Adult Offspring Fat Mass

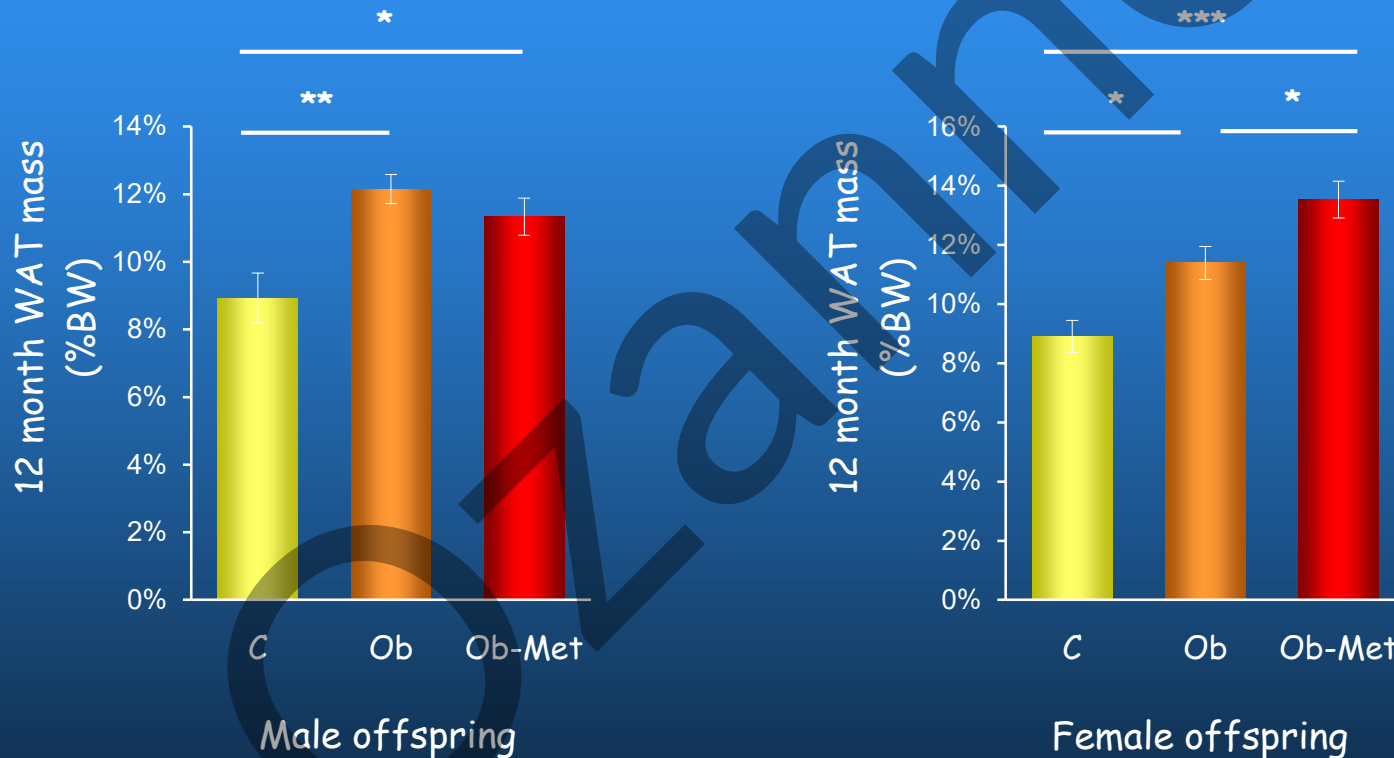


# Young Adult Offspring Fat Inflammation

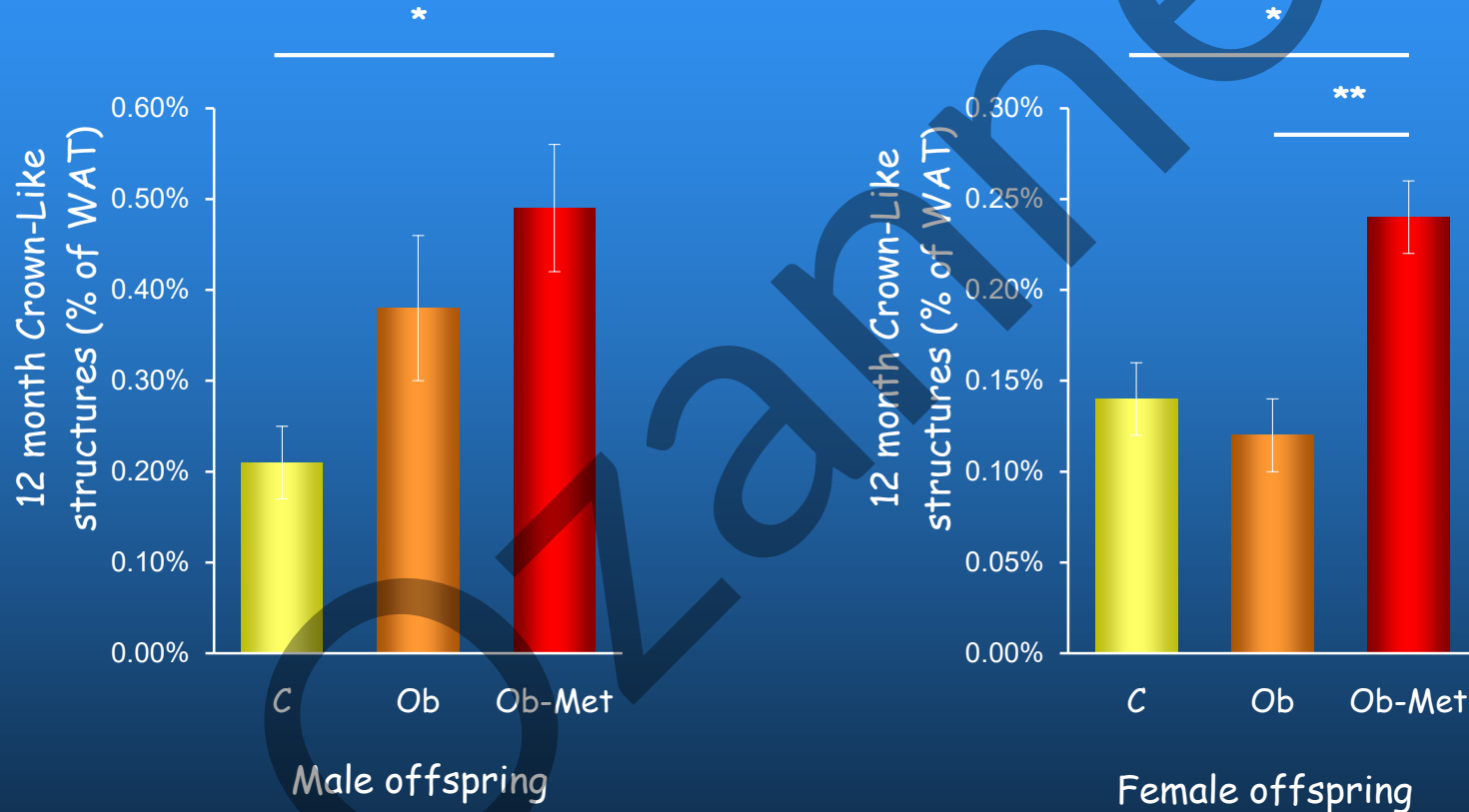




# Old Adult Offspring Fat Mass

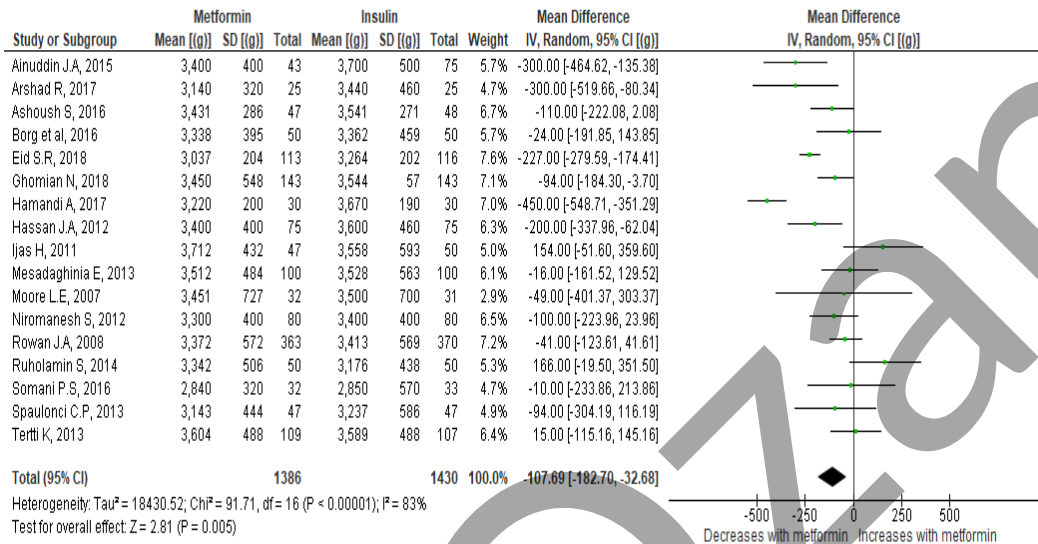


# Old Adult Offspring Fat Inflammation



# Meta-Analysis of Randomised to Metformin versus Insulin for GDM

## Meta-analysis of studies that randomised to metformin v insulin for GDM 28 studies (n=3976 participants)

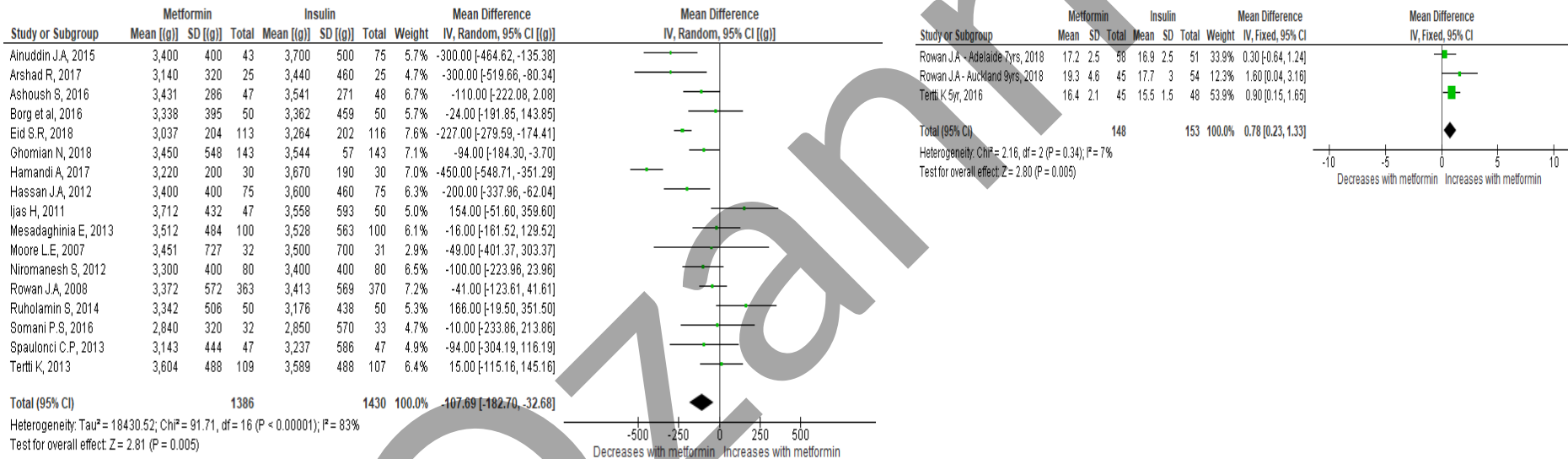


Children exposed to metformin compared to insulin are:

- Are born lighter (108g, p<0.01)

# Meta-Analysis of Randomised to Metformin versus Insulin for GDM

## Meta-analysis of studies that randomised to metformin v insulin for GDM 28 studies (n=3976 participants)



Children exposed to metformin compared to insulin are:

- Are born lighter (108g, p<0.01)
- Are 0.44kg heavier in infancy (18-24 months, p<0.01)
- Have higher BMI (by 0.8 units, p<0.01) and increased adiposity by mid-childhood (5-9 years)

# Conclusions and Perspectives

- ❖ Obesity during pregnancy impacts on maternal and offspring cardio-metabolic health
- ❖ Mechanistic insight from animal models suggest insulin is a key programming factor
- ❖ Improvements in maternal and offspring health can occur without weight loss
- ❖ Intervention strategies need to consider short- and long- term effects for both mother and child as well as interaction with fetal sex
- ❖ Pregnancy is a window of opportunity to improve health of at least two generations