

NMN在肥胖及相关代谢紊乱中的作用

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摘要: 目前, 肥胖及其相关的代谢紊乱在我国呈流行趋势, 严重危害了公共卫生健康。机体从外界摄取以及自身合成的烟酰胺单核苷酸(nicotinamide mononucleotide, NMN)进入细胞后, 可转化生成烟酰胺腺嘌呤二核苷酸(nicotinamide adenine denuclearize, NAD^+), 参与能量和糖脂代谢等调控过程。肥胖会引起机体肝脏、肌肉和脂肪等组织和器官 NAD^+ 含量的下降, 补充NMN可以提高肥胖小鼠体内 NAD^+ 的含量, 改善肥胖和相关代谢紊乱的症状。相关临床试验显示, 作为膳食补充剂, NMN可以提高肥胖受试者的代谢功能。但NMN具体的作用机制仍不十分清楚, 其对人体的安全性和有效性也有待更深入的研究。本文介绍了NMN细胞内的代谢过程和肥胖及相关代谢紊乱中的调控作用, 分析了可能存在的安全性问题, 以期对肥胖相关代谢疾病的干预和治疗提供新思路。

关键词: 烟酰胺单核苷酸; 烟酰胺腺嘌呤二核苷酸; 肥胖

Effect of NMN on obesity and its related metabolic disorders

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Abstract: The incidence of obesity and its related metabolic disorders is increasing in China and becomes a serious public health problem in recent years. Either exogenous or endogenous nicotinamide mononucleotide (NMN) can be converted into nicotinamide adenine denuclearize (NAD^+) within cells, which is involved in the regulation of energy and glycolipid metabolism. Obesity causes NAD^+ levels decrease in multiple tissues and organs, such as liver, skeletal muscle and adipose tissue. NMN supplementation can increase NAD^+ levels of obese mice, which reduces adiposity and improves relevant metabolic abnormalities. Some clinical trials have shown that NMN can enhance the metabolic function of obese individuals as a dietary supplement. However, the precise mechanisms of NMN have not been fully clarified and further studies are needed to carefully assess its safety and efficacy as clinical therapeutics. In this short review, we try to summarize the cellular metabolic process of NMN, explain its regulatory role in obesity and related metabolic disorders, and also indicate the possible safety problems, which will provide new ideas for the intervention and treatment of obesity-related metabolic diseases.

Key Words: nicotinamide mononucleotide; nicotinamide adenine denuclearize; obesity

肥胖及其相关的代谢紊乱与2型糖尿病、非酒精性脂肪肝和动脉粥样硬化等疾病的发生密切相关

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关^[1]。随着经济和社会的飞速发展,人们的饮食结构和生活方式也发生了变化,近年来,中国超重和肥胖人群比例呈增长趋势,肥胖已成为我国较严重的公共卫生问题之一^[2]。多个研究报道,外源性补充烟酰胺单核苷酸(nicotinamide mononucleotide, NMN)可以提高机体的代谢功能,改善肥胖及相关的代谢紊乱症状。本文将对NMN在肥胖治疗中的作用进行综述。

1 细胞内NMN代谢过程

1.1 NMN的来源

NMN是一种天然存在的维生素B族衍生物,结构上由烟酰胺基团、核糖和磷酸基团组成,相对分子质量为334.221。NMN有 α 型和 β 型两种差向异构体,其中, β 型具有生物活性^[3]。除自身合成之外,机体中部分NMN来源于日常饮食。NMN广泛存在于蔬菜、水果和肉类等多种食物,每100 g黄瓜、西蓝花和卷心菜等蔬菜中含有0.25~1.88 mg NMN;鳄梨和番茄等水果中NMN含量为0.26~1.60 mg/100 g;生牛肉和海虾中NMN含量相对较少,仅有0.06~0.42 mg/100 g^[4]。

1.2 NMN的入胞机制

组织和细胞吸收NMN的过程尚不十分清楚。目前普遍认为,NMN可在细胞膜胞外受体CD73催化作用下,转化生成烟酰胺核糖(nicotinamide riboside, NR),然后通过细胞膜上的平衡型核苷转运载体进入细胞,再在胞内重新被磷酸化生成NMN;或经受体CD38催化,NMN降解生成烟酰胺(nicotinamide, NAM)进入细胞^[5]。相关研究显示,CD73在NMN调控内皮细胞的NAD⁺含量和生物学功能方面发挥重要作用^[6],然而一些肿瘤细胞对NMN的摄取却不依赖于CD73^[7]。近年来,有文献报道,转运蛋白Slc12a8对小鼠肠道NAD⁺的代谢具有重要的调控作用,可能是NMN直接入胞的转运载体,但这一结论存在很大争议^[8,9]。鉴于机体内复杂的结构和微环境,NMN入胞的机制可能具有组织和细胞特异性,有待进一步探究。

1.3 NMN的生物转化

NMN是合成NAD⁺的前体物质,其生理功能的行使主要通过转化生成NAD⁺来实现。NAD⁺有三种不同的合成途径:一是以色氨酸为原料的从

头合成途径;二是以烟酸为原料的Preiss-Handler合成途径;三是以NAM或NR为原料的补救合成途径。在哺乳动物细胞中,补救途径是合成NAD⁺的主要来源^[1]。此途径中,限速酶即烟酰胺磷酸核糖转移酶(nicotinamide phosphoribosyltransferase, NAMPT)可催化NAM和5-磷酸核糖-1-焦磷酸生成NMN;或由烟酰胺核糖激酶(nicotinamide riboside kinase, NRK)催化NR生成NMN。NMN进一步可被烟酰胺单核苷酸腺苷转移酶(nicotinamide mononucleotide adenylyl transferase, NMNAT)腺苷化,转化生成NAD⁺。

NAD⁺是人体最常见的代谢物之一,在细胞内的能量代谢、DNA损伤修复、表观遗传修饰、炎症反应和氧化应激等多种生理过程中发挥着重要作用^[10,11]。首先,NAD⁺作为辅酶参与细胞内的氧化还原反应,它从糖酵解、三羧酸循环和脂肪酸氧化等代谢过程中接受氢生成还原型烟酰胺腺嘌呤二核苷酸(reduced nicotinamide adenine dinucleotide, NADH),随后NADH作为供氢体,主要经线粒体氧化磷酸化合成大量ATP,为细胞代谢提供能量^[12]。其次,NAD⁺也可作为聚ADP-核糖聚合酶(poly ADP-ribose polymerases, PARPs)、NAD⁺依赖性去乙酰化酶(sirtuins, SIRT6)、CD38和CD157等多种酶的底物,调控细胞内的信号转导过程^[13,14]。此外,NAD⁺还可作为核苷酸类似物,修饰RNA^[15,16]以及参与DNA的连接修复过程^[17]。

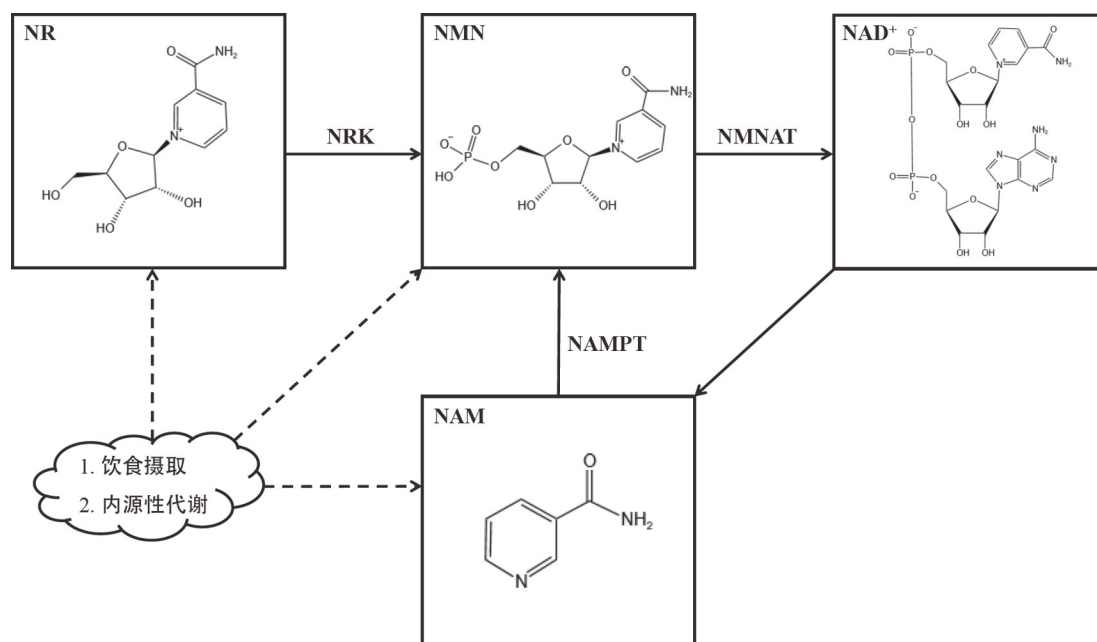
研究表明,在衰老、肥胖和相关病理过程中,机体NAD⁺含量下降,外源性补充NMN可以显著提高胰腺^[18]、肝脏^[18,19]、脂肪组织^[20]、骨骼肌^[21]、心脏^[22]、肾脏^[23]、脑^[24]和眼^[25]等多种组织和器官的NAD⁺含量,改善机体的代谢功能。

2 NMN与肥胖及相关代谢紊乱

肥胖易引发多器官的胰岛素抵抗和慢性炎症,与多种代谢疾病的发展密切相关^[1,27]。外源性补充NMN可以提高机体的NAD⁺水平,改善肥胖相关的代谢紊乱症状。

2.1 NMN在肥胖动物模型中的作用

流行病学研究显示,母性肥胖与子代罹患肥胖及相关代谢疾病的风险相关^[28,29],遗传因素、妊娠期生长发育的调节以及出生后生长环境的影响



NRK: 烟酰胺核糖激酶; NMNAT: 烟酰胺单核苷酸腺苷转移酶; NAMPT: 烟酰胺磷酸核糖转移酶

图1 NMN的代谢过程^[26]

都是造成这种现象的原因^[30]。NMN可以显著改善肥胖子代的代谢功能。研究发现,对肥胖母鼠的子代在断奶后用高脂饮食饲喂,腹腔注射NMN,可以提高子代肥胖小鼠的糖耐量,降低体脂含量;上述小鼠肝脏中NAD⁺含量显著升高,脂质代谢和线粒体功能也得到改善^[31,32],表明对于母性肥胖诱发的子代糖脂代谢紊乱,补充NMN可能是一种有效的干预措施。

运动可以提高机体NAD⁺含量,促进线粒体的生物合成,改善肥胖及相关代谢异常^[33-35]。与运动相比,对高脂饮食饲喂的肥胖小鼠腹腔注射NMN,同样能够提高线粒体的氧化代谢,改善小鼠的葡萄糖耐受能力;同时,补充NMN可以提高小鼠肌肉和肝脏的NAD⁺含量,但运动仅提高了肌肉的NAD⁺含量,表明这两种干预措施的影响可能具有组织特异性^[36]。

并且,运动联合NMN补充疗法对肥胖相关代谢紊乱的改善可能不具有协同效应。让15周龄高脂饮食饲喂的肥胖小鼠进行每周6天、每天45分钟的跑台运动,并在饮水中按体重标准添加NMN(400 mg/kg),持续8周^[37]。结果显示,运动提高了肥胖小鼠的葡萄糖耐量,降低了其肝脏脂质的积累,并增强了胰岛β细胞的功能。但联合NMN处理

减弱了对上述代谢功能的改善程度,而且使胰岛和肌肉组织中谷胱甘肽过氧化物酶4和超氧化物歧化酶2的表达上调、NADPH氧化酶4的表达下调,进而导致氧化还原稳态的失调^[37]。提示尽管普遍认为,补充NAD⁺前体如NMN等对多种疾病都有很好的疗效,但在机体NAD⁺含量充足的情况下,可能不会带来额外的益处。

2.2 NMN临床试验

鉴于NMN在多种小鼠疾病模型中显现出良好的功效,目前也有大量的人体试验探究其临床适用性。根据已发表的公开数据,首个NMN临床I期试验(UMIN000021309)显示,单次口服高达500 mg的NMN在健康受试者中可以被正常代谢,且未引起明显的不良反应,NMN表现出良好的耐受性,初步验证了其作用于人体的安全性^[38]。目前,仍有许多临床试验对NMN的安全性进行持续评估。

NMN作为膳食补充剂可以改善肥胖受试者机体的代谢功能,有关临床试验(NCT 03151239)显示,对于肥胖且患有前驱糖尿病的绝经女性,连续10周每天口服250 mg的NMN,与安慰剂组相比,检测发现其血浆中NMN的代谢产物增多,肌肉中NAD⁺转化过程也相对加快。并且,服用NMN

增强了与葡萄糖摄取相关的血小板源生长因子信号通路,显著提高了骨骼肌的胰岛素敏感性,但受试者肝脏和脂肪组织的胰岛素敏感性、腹腔内脂肪含量、血浆胰岛素和脂联素浓度等代谢指标却没有显著变化^[39]。表明NMN虽有益于骨骼肌的糖代谢过程,但并未使其他糖脂代谢相关的指标得到改善。鉴于此,NMN对预防或干预肥胖及相关代谢紊乱的临床效果仍需要更深入的研究。

3 NMN的安全性

尽管外源性补充NMN能够促进NAD⁺的合成,在多种小鼠模型中也能改善机体不良的生理和病理状态,但其具体的下游机制仍不完全清楚。

NAD⁺能参与体内多种生化反应,调控细胞内的能量代谢和DNA损伤修复等过程。肿瘤细胞内的NAD⁺含量高于正常细胞^[40],目前已有靶向NAD⁺合成途径的抗肿瘤化疗药物的开发^[41]。然而,也有研究表明,NAD⁺含量提高能够促进肿瘤浸润T细胞的活化,增强肿瘤免疫治疗的效果^[42]。因此,NAD⁺在肿瘤发生和进展过程中的作用机制有待深入探究,但NMN可能促进肿瘤生长的风险仍不可忽视。

使用过高剂量的NMN也可能对机体造成不良影响:相关研究显示,高剂量NMN会降低精子活力,对机体生殖能力造成不良影响^[43]。适当剂量的NMN对缺血后脑损伤具有较强的神经保护作用,NMN过量反而无益^[44]。因此,探究不同生理条件下NMN的最佳剂量范围十分必要。

虽然许多研究揭示了NMN具有延缓衰老和治疗代谢相关疾病等潜力,但其毒理学和临床作用效果尚未得到充分研究,仍需谨慎使用。

4 结语

NMN是NAD⁺补救合成途径中的中间体,体内NAD⁺含量下降与线粒体产能减少、氧化应激增加、DNA损伤和炎症反应等有关。相关研究显示,NMN可以通过提高体内NAD⁺含量达到抗衰老、治疗肥胖及相关代谢紊乱和改善认知功能等作用。但大多数研究都是在体外或动物模型中进行的,NMN在人体中长期作用的安全性和有关临

床疗效的报道比较少。许多NMN膳食补充剂和保健产品已经上市,但NMN在人体中详细的毒理学、药理学和安全性相关的研究仍十分匮乏,NMN的疗效仍需要临床试验的长期观察和评估。

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