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BILE ACIDS – A PHARMACO-NUTRACEUTICAL APPROACH

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Introduction

Due to amphipathic properties, bile acids (BAs) a major constituent of the bile, have several physiological functions including solubilization and absorption od dietary lipids and lipophilic xenobiotics, solubilization of cholesterol in bile, stimulation of bile flow and biliary phospholipid secretion and cholesterol excretion. BAs have also antibacterial properties, significantly influencing the composition of intestinal bacterial flora and maintaining the sterility of biliary tree.

Aim

The aim of this study was to summarize the present knowledge in the innovative field of BAs pharmacology, to reveal novel mechanisms of their action, focusing on clinically-relevant aspects.

Results and Conclusion

Initial mainly mechanistic function of BAs has been expanded to diverse and versatile regulatory functions involving cell homeostasis, hepatic and extra-hepatic metabolic processes, regulation of cell proliferation and death, and carcinogenesis. BAs are now recognized as signaling molecules capable to activate specific nuclear and membrane receptors, multiple cellular kinase signaling pathways. BAs can directly and through epigenetic mechanisms regulate the expression of genes involved in integrative metabolism and homeostasis. Disturbances in BA homeostasis contribute to the development of intestinal dysbiosis, dyslipidemia, obesity, inflammatory diseases, common metabolic diseases such as diabetes, non-alcoholic fatty liver disease, liver cirrhosis, hepatobiliary and intestinal disorders, carcinogenesis, even the disorders of central nervous system. The field of research of natural and semisynthetic derivatives of BAs and BA-receptors ligands has been extensively expanding and several BA-based therapeutics have been approved for the treatment liver and intestinal diseases. These biomolecules may also influence the drug bioavailability and metabolism, by interacting with nuclear receptor-transcriptional networks, the expression of membrane transport proteins and drug-metabolizing enzymes. Bile acids can be utilized in the formulation of conventional dosage forms, but also of novel micellar, vesicular and polymer-based therapeutic systems.

aspects.

Material and methods

Detailed and comprehensive analisys of original and review articles published on PubMed and Scopus databases in the period 1999-2020.



Endothelial cells: Anti-hypertension phenotype •Increased NO release •Decreased ET-1 release

Decreased intestinal cholesterol absorption

Decreased level of HDL cholesterol
Reduction of ApoA1 expression
Increased clearance via hepatic SR-BI

Increased clearance of LDL Increased LDL-receptor activity

Increased clearance of VLDL
Enhanced activity of lipoprotein lipase
Increased VLDL-receptor activity
Induction of syndecan-1

Promotion of fatty acid oxidation •Induction of PPARα Decreased gluconeogenesis •Repression of hepatic PEPCK and G6Pase expression

Increased hepatic glycogen synthesis •Increased phosphorylation of GSK3β

Improved insulin transcription and secretion

Improved hepatic insulin sensitivity •Induction of GLUT4 expression

Decreased peripheral insulin resistance
 Induction of GLUT4 expression in white adipose tissue
 Reduction of FFA contribute to restoration of insulin signaling in muscle

Smooth muscle cells: Anti-atherogenic phenotype •Inhibition of proliferation •Inhibition of migration •Inhibition of inflammatory IL-1β phenotype •Increased PLTP expression •Increased ATR-2 expression

Macrophages: Supression of inlflammatory cascade •Decreased IL-1β, IL-6 and TNF-α release

ABBREVIATIONS: FXR Farnesoid X Receptor, BA Bile Acid, FXRE FXR-Response Element, ApoA1 Apolipoprotein-A1, SR-B1 Scavenger Receptor Class B Member 1, PPARα Peroxisome Proliferator-Activated Receptor α, PECPK Phosphoenolpyruvate Carboxykinase, G6Pase Glucose-6-Phosphatase, GLUT4 Glucose Transporter Type 4, FFA Free Fatty Acid, NO Nitric Oxide, ET-1 Endothelin-1, IL-1β Interleukin-1β, PLPT Phospholipid Transfer Protein, ATR-2 Angiotensin Type 2 Receptor

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