

Lipoatrophy and severe metabolic disturbance in mice with fat-specific deletion of PPAR γ

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Adipose tissue is an important metabolic organ, the dysfunction of which is associated with the development of obesity, diabetes mellitus, and cardiovascular disease. The nuclear receptor peroxisome proliferator-activated receptor gamma (PPAR γ) is considered the master regulator of adipocyte differentiation and function. Although its cell-autonomous role in adipogenesis has been clearly demonstrated in cell culture, previous fat-specific knockouts of the murine PPAR γ gene did not demonstrate a dramatic phenotype in vivo. Here, using Adipoq-Cre mice to drive adipose-specific recombination, we report a unique fat-specific PPAR γ knockout (PPAR γ FKO) mouse model with almost no visible brown and white adipose tissue at age 3 mo. As a consequence, PPAR γ FKO mice had hugely enlarged pancreatic islets, massive fatty livers, and dramatically elevated levels of blood glucose and serum insulin accompanied by extreme insulin resistance. PPAR γ FKO mice also exhibited delayed hair coat formation associated with absence of dermal fat, disrupted mammary gland development with loss of mammary fat pads, and high bone mass with loss of bone marrow fat, indicating the critical roles of adipose PPAR γ in these tissues. Together, our data reveal the necessity of fat PPAR γ in adipose formation, whole-body metabolic homeostasis, and normal development of fat-containing tissues.

Adipose tissue is an important organ that is critical for whole-body energy and metabolic homeostasis. White adipose tissue (WAT) stores excess energy as lipids, whereas brown adipose tissue (BAT) participates in thermogenesis (1). Adipose tissue also produces various adipokines, which regulate physiology at multiple levels (1). Dysfunction of adipose tissue is closely related to metabolic and cardiovascular diseases (2–6). Indeed, both too much fat (obesity) and too little fat (lipoatrophy or lipodystrophy) lead to insulin resistance and diabetes (3, 5, 7, 8).

In 1994, the nuclear receptor peroxisome proliferator-activated receptor gamma (PPAR γ) was identified as the central regulator of adipocyte biology (9–11). Shortly thereafter, PPAR γ was identified as the cellular target of antidiabetic thiazolidinedione drugs, implicating this transcription factor as a key player in the maintenance of metabolic homeostasis (12). There are two PPAR γ isoforms, γ 1 and γ 2, which differ only in their amino termini and are both highly expressed in adipocytes (9, 10, 13). Convincing evidence for a critical role of PPAR γ in adipogenesis has been mainly derived from cell culture experiments, in which ectopic expression of PPAR γ activates adipocyte-specific genes and triggers morphologic adipogenesis (11), whereas PPAR γ -null mouse embryonic fibroblasts cannot undergo adipogenesis in vitro (14, 15).

The study of PPAR γ function in vivo has been hindered because homozygous deletion of PPAR γ is embryonic lethal, due to a defect in placental function (14, 16). Several approaches have been adopted to study the in vivo functions of PPAR γ . First, a chimeric rescue strategy was used to demonstrate that PPAR γ -null cells cannot contribute to fat formation (17). Additionally, a single viable PPAR γ -null pup generated by placental reconstitution exhibited an absence of fat and multiple hemorrhages (16). Furthermore, mice with PPAR γ 2 absent in the whole body and PPAR γ 1 largely reduced in WAT had almost no WAT, smaller BAT, mild glucose intolerance, and no fatty liver

at the adult stage (18). More dramatic lipodystrophy and insulin resistance were observed in another global PPAR γ -deficient mouse model driven by Mox2-Cre with normal liver morphology (19). Finally, dominant-negative mutations in human PPAR γ were associated with severe insulin resistance and diabetes mellitus (20). Together, these global PPAR γ deletion models suggest that PPAR γ is critical for adipose tissue development and whole-body insulin sensitivity.

Cre/loxP strategies for tissue-specific gene deletion have permitted further investigation, and the adipocyte protein 2 promoter-driven Cre line (aP2-Cre) has been used to interrogate the adipose-specific functions of PPAR γ in transgenic mice. One such model displayed a progressive but minor reduction in fat mass, with a mild fatty liver (21). Blood glucose, glucose tolerance, and insulin tolerance were normal, but modest insulin resistance was observed on a high-fat diet (HFD) (21). By contrast, a second aP2-Cre-driven PPAR γ -deficient mouse line exhibited modest reduction in WAT mass and major loss of BAT, yet improved systemic insulin sensitivity on HFD (22).

Recent studies have underscored the need for caution when interpreting data obtained using aP2-Cre mice (23, 24). This finding, together with the modest phenotypes and contradictory findings about insulin sensitivity in the aP2-Cre-driven adipose PPAR γ knockout mouse models, made it of interest to reevaluate the effects of PPAR γ deletion in fat. Here we generated a unique fat-specific PPAR γ knockout mouse model using a transgenic Cre line driven by the regulatory region of mouse adiponectin (Adipoq-Cre), which has been shown to direct Cre expression in a more specific and efficient manner (23–25). By using this model, fat-specific deletion of PPAR γ led to a nearly complete lipoatrophy, accompanied by dramatically impaired

Significance

Obesity, due to increased adipose (fat) tissue, predisposes to metabolic diseases, including diabetes. Thus, it is important to understand adipose development and function. Peroxisome proliferator-activated receptor gamma (PPAR γ) is widely believed to be the master regulator of adipocyte biology. Surprisingly, however, previous studies attempting to delete the PPAR γ gene specifically in mouse adipose tissue did not demonstrate a dramatic phenotype. By using newer methods, the present study reports that fat-specific loss of PPAR γ causes dramatic loss of adipose tissue, severe insulin resistance and diabetes, fatty liver, and abnormalities of bone, skin, and mammary glands, all of which contain adipose tissue. We show that adipocyte PPAR γ is required for normal fat development and metabolic function in vivo.

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adipokine secretion; massive hepatomegaly; profound insulin resistance and hyperglycemia; and abnormal bone, mammary glands, and skin. These results prove the *in vivo* necessity of adipose PPAR γ for fat formation, whole-body metabolic homeostasis, and normal development of fat-related tissues.

Results

Adipose-Specific PPAR γ Deletion in PPAR γ Fat-Specific Knockout Mice. Adipoq-Cre mice were crossed to PPAR γ floxed (PPAR γ f/f) mice to generate fat-specific PPAR γ heterozygous mice (Adipoq-Cre, PPAR γ f/+). To avoid any potential nursing deficiency in female heterozygous mice, male heterozygous mice were bred to female PPAR γ f/f to yield the PPAR γ fat-specific knockout mice (Adipoq-Cre, PPAR γ f/f; referred to as PPAR γ FKO), heterozygous (Adipoq-Cre, PPAR γ f/+; referred to as PPAR γ FHet), and control (PPAR γ f/f and PPAR γ f/+) littermates (Fig. S1B). Pups were born at the expected Mendelian ratio, although a small fraction (~15%) of PPAR γ FKO mice died by the time of weaning.

Quantification of mRNA in PPAR γ FHet mice demonstrated the expected ~50% reduction of PPAR γ expression specifically in inguinal WAT (IWAT), gonadal WAT (GWAT), and BAT but not in control tissues, including liver, muscle, and brain (Fig. 1A). Phenotypic evaluation revealed no significant differences in the weights of the whole body and various organs (IWAT, GWAT, BAT, and liver) (Fig. S2A and B) or the metabolic profiles [blood glucose, serum insulin, triglyceride (TG), and free fatty acid (FFA) levels] (Fig. S2C–F) of 3-mo-old control and PPAR γ FHet mice. PPAR γ mRNA was more completely deleted in fat (Fig. 1B) but not other tissues of the homozygous PPAR γ FKO mice, including liver where PPAR γ mRNA actually increased, consistent with the marked hepatosteatosis that is described below (Fig. S3). In adipose tissue, both PPAR γ protein isoforms were deleted (Fig. 1C), as expected, because the *loxP* sites were located on both sides of exons 1 and 2, which are shared by PPAR γ 1 and PPAR γ 2. These results demonstrate that the knockout of PPAR γ in the PPAR γ FKO mouse was fat-specific and efficient.

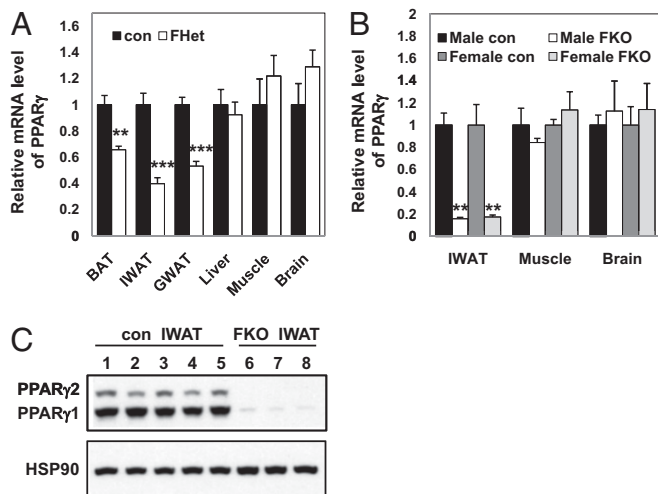


Fig. 1. Specific deletion of PPAR γ in adipose tissues. (A) PPAR γ mRNA level of 3-mo-old control and PPAR γ FHet mice in BAT, IWAT, GWAT, liver, muscle, and brain. Values are mean \pm SEM ($n = 4$ –5). PPAR γ primers are designed to span exon1 and exon2 of PPAR γ transcripts, which are targeted for deletion. (B) PPAR γ mRNA level of 8-d-old control and PPAR γ FKO pups in IWAT, muscle, and brain. Values are mean \pm SEM ($n = 3$ –4). The same PPAR γ primers in A are used here. (C) Western blot analysis of PPAR γ 1, PPAR γ 2, and heat shock protein 90 (HSP90; loading control) in IWAT samples of 8-d-old control and PPAR γ FKO pups. For lanes 1–5, each lane includes IWAT sample from individual control pup. For lanes 6–8, each lane includes pooled IWAT samples from two or three PPAR γ FKO pups. ** $P < 0.01$; *** $P < 0.001$ vs. controls.

Severe Lipoatrophy in Adult PPAR γ FKO Mice. One-month-old PPAR γ FKO mice tended to be of lower body weight than their control littermates, especially in females, but 3-mo-old PPAR γ FKO mice reached similar (in males) or even higher (in females) body weights compared with controls (Fig. S4A and B). To assess the effects of fat PPAR γ deletion in adult mice, examination was performed in 3-mo-old PPAR γ FKO and control mice. Remarkably, all adipose depots including GWAT (Fig. 2A), interscapular WAT, BAT (Fig. 2B), IWAT (Fig. 2C), mesenteric (Fig. 2D), perirenal (Fig. 2E), perivascular (Fig. S5H), and pericardial WAT (Fig. S5I) were nearly absent in male as well as female (Fig. S5A–E) PPAR γ FKO mice. Consistent with this dramatic lipoatrophy, serum levels of leptin, resistin, and adiponectin were reduced to near background levels in adult PPAR γ FKO mice (Fig. 2F–H). Histological analysis of residual tissue collected from 3-mo-old PPAR γ FKO mice at locations where adipose tissues would normally be found revealed a small number of adipocytes dispersed among a great number of stromal cells in both IWAT (Fig. 2I and Fig. S5F) and GWAT (Fig. 2J and Fig. S5G). These data clearly demonstrate dramatic lipoatrophy at multiple adipose depots in 3-mo-old PPAR γ FKO mice.

Hepatosteatosis and Extreme Insulin Resistance in Adult PPAR γ FKO Mice. Lipoatrophy is often accompanied by hepatic steatosis (8, 26), and, indeed, the livers of 3-mo-old PPAR γ FKO mice were pale and massively enlarged (Fig. 2A and Fig. S5A, yellow arrows), weighing three to four times greater than control livers in both males and females (Fig. 3A). Histological staining with H&E (Fig. 3B) or Oil Red O (Fig. 3C) confirmed substantial lipid accumulation in the livers of PPAR γ FKO mice. Serum TG and non-esterified fatty acid levels were also increased (Fig. S6A and B).

Adult PPAR γ FKO mice were also markedly hyperglycemic (Fig. 3D), with serum insulin levels elevated >60-fold compared with controls (Fig. 3E), suggesting severe insulin resistance. Consistent with this finding, insulin tolerance tests (ITTs) revealed marked resistance to insulin in 3-mo-old PPAR γ FKO mice (Fig. 3F). Histological analysis revealed hugely enlarged pancreatic islets in PPAR γ FKO mice (Fig. 3G). Thus, inactivation of PPAR γ in adipose tissue caused lipoatrophy-associated hepatic steatosis and extreme insulin resistance.

Early Development of the PPAR γ FKO Phenotype. PPAR γ FKO pups were noted to actively nurse, based on their milk-filled stomachs. On the first day after birth, intrascapular BAT was visibly absent in PPAR γ FKO pups, compared with the typical well-defined lobules of BAT that were easily identified between the shoulder blades in control pups (Fig. 4A). Transverse sections of 1-d-old pups revealed that the presumptive BAT depots of PPAR γ FKO mice were largely reduced in size and had very abnormal morphology compared with those of PPAR γ FHet littermates (Fig. 4B). Closer examination revealed that, whereas PPAR γ FHet BAT lobules contained well-arranged uniform brown adipocytes with eosinophilic plurivacuolated cytoplasm and centric nucleus, the PPAR γ FKO BAT displayed an abnormal organization pattern of cells with reduced volume of cytoplasm and pleomorphic nuclei, likely representing degenerative BAT adipocytes in newborn PPAR γ FKO pups (Fig. 4C).

WAT cannot be detected macroscopically at birth in rodents (27), which was the case at 1 d of age in either control or PPAR γ FKO mice. At 8 d of age, PPAR γ FKO pups were found to have IWAT depots that were visible but dramatically smaller than those of controls (Fig. 5A and Fig. S7A). In addition, PPAR γ FKO pups had a very small amount of interscapular WAT, whereas control pups had substantial interscapular WAT in the same location (Fig. 5B and Fig. S7B). Examination of the reverse side of interscapular fat depots revealed the expected butterfly-shaped BAT in control pups and the complete loss of BAT in PPAR γ FKO pups (Fig. 5C and Fig. S7C). Another striking observation was the cloudy serum in 8-d-old PPAR γ FKO mice (Fig. 5D), together with markedly increased serum TG and FFA levels (Fig. 5E and F), indicating

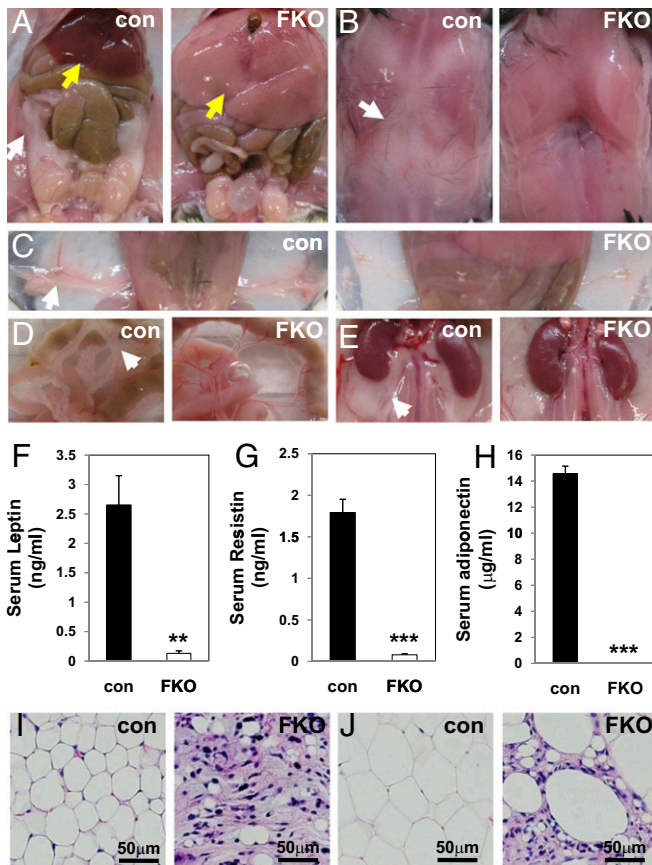


Fig. 2. Severe lipodatrophy in 3-mo-old PPAR γ FKO mice. (A–E) Gross morphology of GWAT (white arrow) and liver (yellow arrow) (A), interscapular fat (B), IWAT (C), mesenteric WAT (D), and perirenal WAT (E) from 3-mo-old male control and PPAR γ FKO mice. (F–H) Serum leptin (F), resistin (G), and adiponectin (H) levels are shown for 3-mo-old male control and PPAR γ FKO mice. Values are mean \pm SEM ($n = 3$ –6). ** $P < 0.01$; *** $P < 0.001$ vs. controls. (I and J) H&E staining of IWAT (I) and GWAT (J) from 3-mo-old male control and PPAR γ FKO mice.

the overflow of excess lipids into blood due to marked reduction of adipose tissues in PPAR γ FKO pups.

Histological examination was performed to determine the nature of the small amount of IWAT in the 8-d-old PPAR γ FKO mice. Stromal cell density was markedly increased, with interspersed vacuole-containing cells (Fig. 5G and Fig. S7D). Although most of these cells were much smaller than control adipocytes, immunohistochemical staining for the mature fat cell marker perilipin suggested that these cells were mature adipocytes (Fig. 5H). These data support the hypothesis that the failure of adipose tissue accumulation was not due to deficiency in the initiation of adipogenesis in PPAR γ FKO fat, which is consistent with the likely occurrence of Adipoq-Cre-mediated PPAR γ ablation in relatively mature adipocytes based on the endogenous *Adipoq* gene expression (28). In addition, the vast majority of lipid-laden adipocytes in control fat were positive for PPAR γ , whereas the total percentage of PPAR γ -positive cells dramatically decreased in PPAR γ FKO IWAT (Fig. 5H and Fig. S8). These data suggested that mature adipocytes initially formed in PPAR γ FKO IWAT, but these perilipin-positive cells had impaired lipid accumulation after Adipoq-Cre-mediated PPAR γ depletion.

Furthermore, caspase-3 staining revealed the elevated accumulation of apoptotic cells in PPAR γ FKO WAT (Fig. 5H and Fig. S8). In addition, increased macrophage infiltration was revealed by F4/80 staining in PPAR γ FKO WAT (Fig. 5H and Fig. S8), consistent with the inflammatory effects of adipocyte

death (29). These findings at 8 d of age suggest that the more severe lipodatrophy observed in 3-mo-old PPAR γ FKO mice is due to effects of apoptosis and inflammation over time.

Delayed Coat Formation in PPAR γ FKO Mice. PPAR γ FKO mice could be easily distinguished from their control littermates because they tended to be skinnier, had lighter-colored rough skin, and had reduced hair growth at 8 d of age (Fig. S9A). H&E staining indicated that the skin of PPAR γ FKO mice was indistinguishable from that of control littermates at day 1 (Fig. S9B). At this time point, there was no obvious lipid accumulation within the skin of either PPAR γ FKO or control mice demonstrated by Oil Red O staining (Fig. S9C). However, H&E and Oil Red O staining revealed that skin from 8-d-old PPAR γ FKO mice contained very few adipocytes and minimal lipid, with less

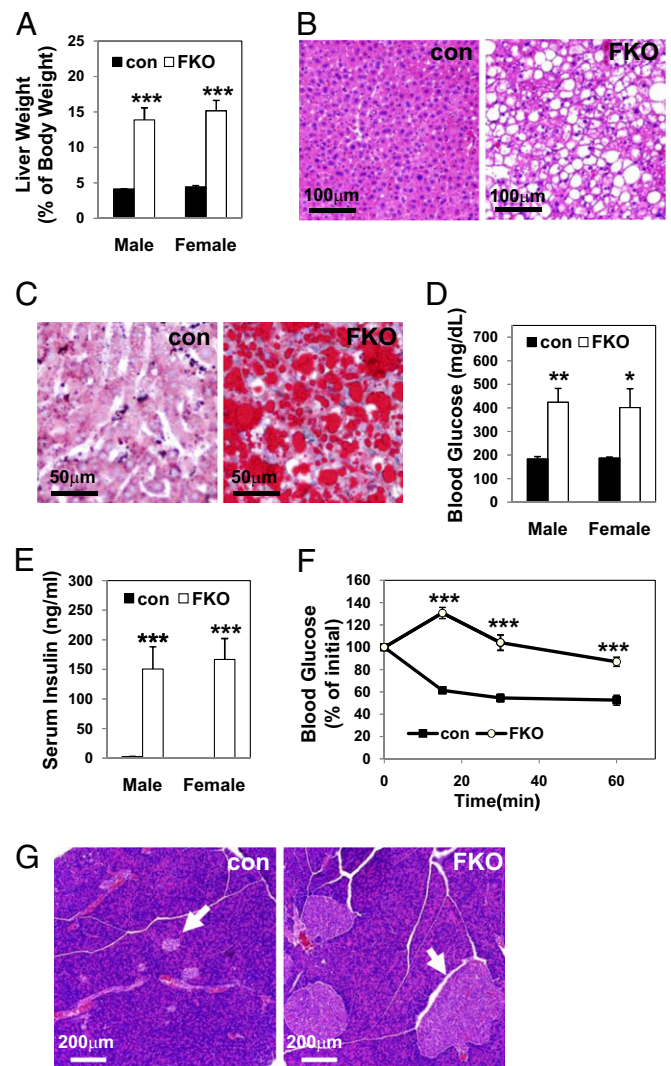


Fig. 3. Massive fatty livers and extreme insulin resistance in 3-mo-old PPAR γ FKO mice. (A) Liver weights from male or female 3-mo-old control and PPAR γ FKO mice. (B) H&E staining of livers from 3-mo-old female control and PPAR γ FKO mice. (C) Oil Red O staining of livers from 3-mo-old female control and PPAR γ FKO mice. (D) Nonfasting blood glucose levels in 3-mo-old male or female control and PPAR γ FKO mice. (E) Serum insulin levels in male or female 3-mo-old control and PPAR γ FKO mice in nonfasted state. (F) ITTs after 4-h fasting in female control and PPAR γ FKO mice. (G) H&E staining of pancreatic islets (arrows) from 3-mo-old female control and PPAR γ FKO mice. Values are mean \pm SEM ($n = 4$ –5). * $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$ vs. controls.

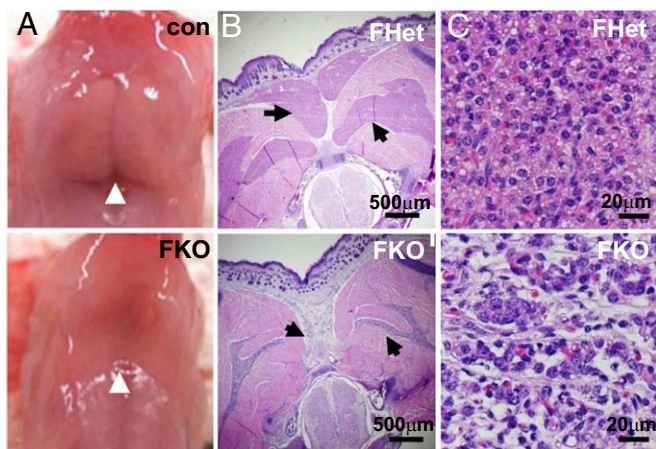


Fig. 4. Ablation of BAT in 1-d-old PPAR γ FKO mice. (A) Gross morphology of interscapular BAT (arrows) from 1-d-old male control and PPAR γ FKO pups. (B) H&E staining of transverse sections from the interscapular region of 1-d-old male PPAR γ FHet and FKO pups. Different BAT depots are indicated by arrows. (C) Microscopic view of BAT depots in B with higher magnification.

dense and underdeveloped hair follicles relative to controls (Fig. 6*A, i* and *ii*). Thus, PPAR γ FKO mice had delayed coat formation, indicating a critical role of PPAR γ in the early stages of hair development. The skin phenotype persisted for up to 1 mo in some PPAR γ FKO mice, with most recovering fully by adulthood.

Abnormal Mammary Gland Development in PPAR γ FKO Mice. Adipocytes are the predominant component in mammary gland volume and cell number, and they have been shown to play a key role in mammary gland biology (30). In PPAR γ FKO mice, the mammary ducts scarcely invaded into the fat pad, and ductal outgrowth was arrested at the prepubertal stage, in contrast to virgin controls (Fig. 6*B*), revealing the necessity of fat PPAR γ in ductal formation of mammary glands.

High Trabecular Bone Mass in PPAR γ FKO Mice. Tail vertebrae in the 4-mo-old control mice contained highly adipocytic bone marrow,

whereas the bone marrow in PPAR γ FKO mice was almost adipocyte-free (Fig. 6*C, i*). Osteoblasts and adipocytes are derived from a common mesenchymal stem cell in bone marrow, and interactions between fat and bone are thought to be vital for normal bone integrity (31–33). Three-dimensional images generated by trabecular bone microcomputed tomography (μ CT) analysis of the fourth lumbar vertebrae clearly demonstrated increased bone mass in PPAR γ FKO mice compared with control mice (Fig. 6*C, ii*). Quantitative analysis confirmed that PPAR γ FKO mice had increased bone volume fraction (Fig. S10*A*), trabecular number (Fig. S10*B*), and bone mineral density (Fig. S10*C*). Consistent with this finding, PPAR γ FKO mice had a noticeable decrease in trabecular separation (Fig. S10*D*), without a significant difference in trabecular thickness (Fig. S10*E*). Finally, a dramatic decrease in the structure model index revealed a preference for parallel plate formation in PPAR γ FKO bones compared with a cylindrical rod model in controls (Fig. S10*F*). Together, these results indicate a critical role for adipose PPAR γ in bone biology.

Discussion

Although PPAR γ has been unequivocally shown to be necessary for fat cell formation *in vitro* (11, 15), the role of adipocyte PPAR γ in fat depot formation and function *in vivo* has not been as clear. The present study demonstrates that fat-specific PPAR γ ablation leads to severe lipoatrophy, insulin resistance, and other related metabolic disturbances in 3-mo-old PPAR γ FKO mice. Moreover, delayed hair coat formation, arrested mammary gland growth, and elevated bone mass in PPAR γ FKO mice identify adipose PPAR γ as an important regulator of the development and functions of these fat-containing tissues.

Consistent with the essential roles of PPAR γ in adipose tissue development proposed by whole-body PPAR γ knockout studies (16, 18, 19), BAT and WAT depots, bone marrow fat, and intradermal fat were almost completely absent in 3-mo-old PPAR γ FKO mice. This lipoatrophy phenotype in PPAR γ FKO mice initiated in both BAT and WAT as early as the first week of life. The dramatic phenotype of these mice is very different from the relatively minor fat reduction (especially WAT) in aP2-Cre-mediated PPAR γ -deficient mice (21, 22). This result is likely due to greater effectiveness in Adipoq-Cre-mediated ablation of fat PPAR γ (23, 24). The rapid, dramatic, and generalized fat loss in

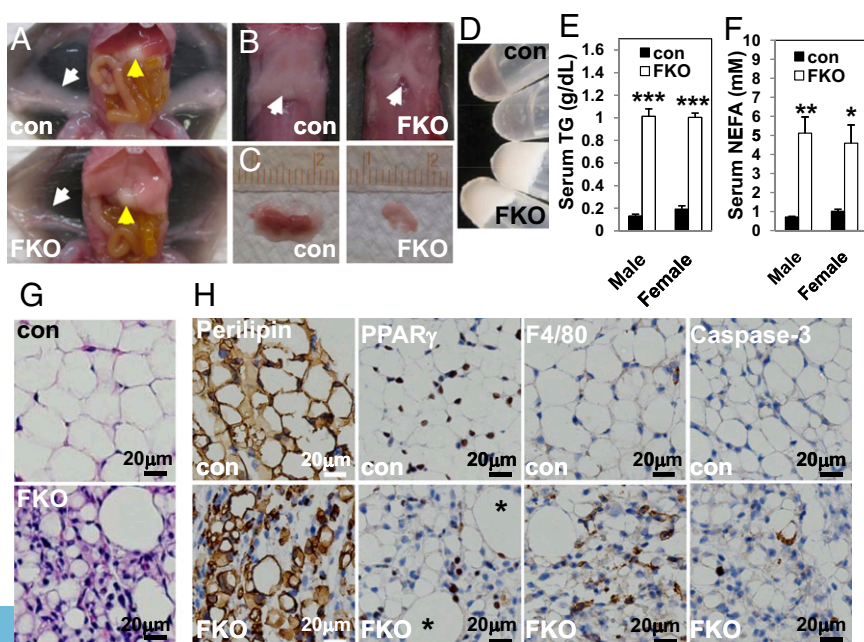


Fig. 5. Loss of WAT, pale liver, and hyperlipidemia in 8-d-old PPAR γ FKO pups. (A) Exposed ventral view of the 8-d-old male control and PPAR γ FKO mice, illustrating the pale liver (yellow arrows) and reduction of IWAT depots (white arrows) in PPAR γ FKO pups. (B) Exposed dorsal view of interscapular WAT (arrows) in 8-d-old male control and PPAR γ FKO mice. (C) Flip side of isolated interscapular fat depots in B from 8-d-old control and PPAR γ FKO pups, demonstrating the absence of BAT in PPAR γ FKO pups. (D–F) Photographs (D) and TG (E) and FFA (F) levels of the serum samples collected from 8-d-old control and PPAR γ FKO pups. Values are mean \pm SEM ($n = 3-7$). * $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$ vs. controls. (G) H&E staining of IWAT from 8-d-old male control and PPAR γ FKO pups. (H) Immunohistochemistry staining of perilipin, PPAR γ , F4/80, and caspase-3 proteins in IWAT from 8-d-old male control and PPAR γ FKO pups. Two large PPAR γ -positive adipocytes are indicated by asterisks.

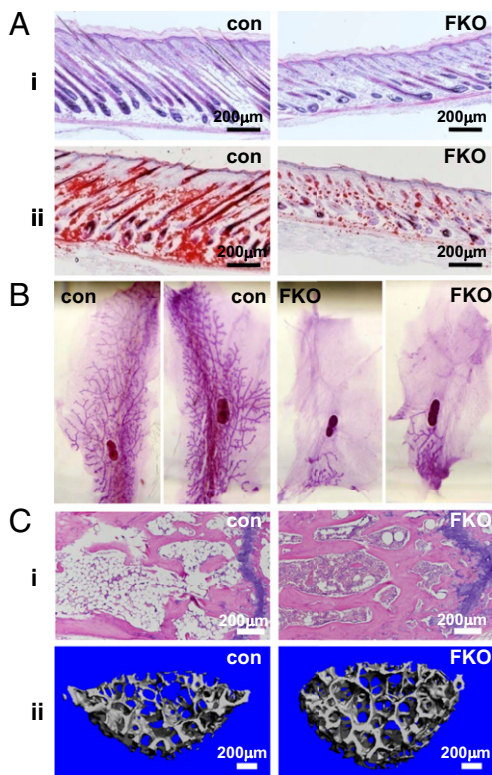


Fig. 6. Delayed hair coat formation, arrested mammary gland development and high bone mass in PPAR γ FKO mice. (A) H&E (i) and Oil Red O (ii) staining sections of skin from 8-d-old male control and PPAR γ FKO pups. (B) Whole-mount analysis of fourth inguinal mammary glands from 4-mo-old female control and PPAR γ FKO mice. (C) H&E staining sections of tail vertebrae (i) and μ CT 3D trabecular bone images of fourth lumbar vertebrae (ii) from 4-mo-old female control and PPAR γ FKO mice.

our PPAR γ FKO mice provides direct evidence for the cell-autonomous necessity of PPAR γ in healthy fat cell formation *in vivo*.

Because adiponectin is expressed late in adipogenesis (28), it is likely that Adipoq-Cre-mediated ablation of PPAR γ occurs in relatively mature adipocytes, explaining the existence of perilipin-positive adipocytes in the IWAT of 8-d-old PPAR γ FKO mice. The perilipin-positive cell population includes some PPAR γ -positive cells with large lipid droplets (Fig. 5H), as well as a large number of PPAR γ -negative cells with tiny vacuoles. This finding suggests that the initially formed large mature adipocytes lost lipids and shrank upon PPAR γ ablation, causing the lipoatrophy in 1-wk-old PPAR γ FKO pups. The more dramatic lipodystrophy in older PPAR γ FKO mice likely results from apoptosis and inflammation, consistent with the pivotal roles of PPAR γ in adipocyte function and survival previously revealed by a transient PPAR γ knockout mouse model that also noted cellular necrosis (34).

The extreme insulin resistance, massive hepatomegaly, and steatosis are consistent with other models of lipoatrophy-associated diabetes, both in mice and humans (7, 8, 26). It is worth pointing out that the blood glucose is markedly elevated despite hyperplastic pancreatic islets generating a >60-fold increase in insulin levels, suggesting that insulin resistance, rather than failure to produce copious amounts of insulin, is the primary cause of hyperglycemia in this model. This finding is strikingly different from the unchanged insulin sensitivity on normal chow in both or even improved insulin sensitivity on HFD in one of aP2-Cre-mediated PPAR γ -knockout mice (21, 22). Thus, the PPAR γ FKO mice provide a valuable reagent to investigate not only the net effects

of efficient fat-specific PPAR γ ablation, but also alterations in glucose homeostasis in severe insulin resistance.

Besides its central role in lipid and glucose homeostasis, our findings reveal that adipocyte PPAR γ is also a key factor in regulating the development of multiple other tissues, including skin, mammary gland, and bone. It was reported previously that targeted deletion of PPAR γ in follicular stem cells in mice causes a skin and hair phenotype that emulates scarring alopecia (CA), suggesting a crucial role of PPAR γ for healthy pilosebaceous units and that loss of this signaling pathway may be responsible for the pathogenesis of CA (35). However, the potential roles of adipocyte PPAR γ in regulating hair follicle biology have not been explored before. The delayed hair coat formation in PPAR γ FKO pups demonstrated that adipocyte PPAR γ is involved in initial hair follicle growth, potentially through interplay between dermal adipocytes and hair follicle cells, which would be consistent with recent studies showing essential roles of immature adipocyte precursor cells within skin in driving follicular stem cell activation during hair follicle regeneration (36).

With regard to mammary biology, previous studies have mainly focused on the role of PPAR γ as a mammary tumor suppressor (37–40). Interestingly, conditional knockout of PPAR γ in mammary epithelium did not affect normal mammary development (41). By contrast, we found that adipocyte PPAR γ ablation arrested mammary gland growth in 4-mo-old mature virgins, indicating a critical role of PPAR γ that is most likely related to a key role of the fat pad in normal mammary gland development, as noted in other animal models of adipocyte ablation (42, 43). The adipocytes could function as a source of lipids, adipokines, and other molecules essential for normal mammary epithelial growth, although adipocyte-to-epithelial transdifferentiation has also been demonstrated in mammary gland (44).

The enhanced bone density of PPAR γ FKO mice also sheds light on the role of adipocyte PPAR γ in bone remodeling. The whole-body heterozygous PPAR γ -deficient mice exhibited high bone mass due to increased osteoblastogenesis (45). Intriguingly, mice with PPAR γ deletion in hematopoietic lineage cells (including osteoclasts) but not in mesenchymal lineage cells (including osteoblasts and adipocytes) also developed increased bone mass due to impaired osteoclast differentiation (46). The increased bone mass of PPAR γ FKO mice underscores the importance of adipocyte PPAR γ in maintaining bone homeostasis. Because osteoblasts and adipocytes are derived from a common mesenchymal precursor (31, 32), a likely mechanism would involve the preferential conversion of these precursors to osteoblasts in the absence of PPAR γ . The bone phenotype could also result from local or systemic reduction of adipocyte-secreted molecules following deletion of fat PPAR γ , including leptin, which has been identified as a potent inhibitor of bone formation (47, 48).

In summary, the striking phenotypes of PPAR γ FKO mice reveal the cell-autonomous necessity of fat PPAR γ in healthy adipose tissue formation, whole-body metabolism, and the homeostasis of several other fat-containing tissues. In addition, this mouse model provides a valuable reagent for delineating the functions of mature adipocytes in important physiological processes in the body. Finally, the pancreatic islet expansion in this model may also facilitate the development of novel therapeutic approaches to treat metabolic disorders.

Materials and Methods

Animals. Adipoq-Cre mice were a gift from Evan Rosen (Beth Israel Deaconess Medical Center, Boston, MA). PPAR γ *fl/fl* mice were obtained from Jackson Labs. Both lines are on a C57BL/6 background. They were maintained on a standard diet under 12-h light/12-h dark cycles and euthanized at approximately Zeitgeber time 10 (5:00 PM) for experiments. Blood glucose concentrations were measured by using a glucometer (OneTouch). For ITTs, insulin (Novolin R; 0.6 U per kg body weight) was injected *i.p.* after a 4-h fast. Serum TG (Stanbio), total FFA (Wako), insulin (Alpco), and adipokines (Millipore) were measured by using commercial kits. Animal care and use procedures followed the guidelines of the Institutional Animal Care and Use Committee of the University of Pennsylvania in accordance with the guidelines of the National Institutes of Health.

Reverse Transcription-Quantitative PCR. Total RNA was isolated from tissues by using TRIzol (Invitrogen) followed by purification with the RNEasy mini kit (Qiagen). One microgram of purified RNA was used to generate cDNA (Applied Biosystems), and quantitative PCR analysis was performed by using primers listed in Table S1. Amplicons were detected with Power SYBR green master mix (Applied Biosystems). Relative gene expression levels were determined by the standard curve method followed by normalization to the housekeeping gene *36B4*.

Immunoblotting. Primary antibodies for PPAR γ (Cell Signaling) and HSP90 (Santa Cruz) were detected by a secondary horseradish peroxidase-conjugated antibody (Sigma) and an enhanced chemiluminescent substrate kit (PerkinElmer Western Lightning).

Histology. Tissues were fixed in 4% (wt/vol) paraformaldehyde, and paraffin-embedded sections were subjected to H&E staining. For Oil Red O staining, fixed tissues were embedded in optimal cutting temperature compound and cryosectioned. Immunohistochemistry staining was performed on paraffin sections with antibodies to perilipin (Cell Signaling), PPAR γ (Thermo Scientific), F4/80 (Invitrogen), and caspase-3 (R&D Systems), according to standard protocols. Quantification of immunohistochemistry staining was done by calculating the percentage of specific marker-expressing cells out of total cells from at least 200 cells for each adipose specimen. For whole-mount

staining, fixed mammary tissues were stained with carmine alum solution overnight, washed in ethanol, and cleared in xylene.

μ CT Analysis. Fixed lumbar vertebrae samples were scanned at a 6- μ m resolution by using a specimen μ CT system (μ CT35; Scanco Medical AG). All parameters were determined by using manufacturer-provided software (Scanco Medical AG).

Statistics. A Student's two-tailed t test was performed for all experiments to determine the significance of the differences between two groups.

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