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1	Aerobic interval exercise improves parameters of Non Alcoholic Fatty Liver Disease (NAFLD) and
2	other alterations of metabolic syndrome in obese Zucker rats.
3	

- Garyfallia Kapravelou<sup>1</sup>, Rosario Martínez<sup>1</sup>, Ana M. Andrade<sup>1</sup>, Elena Nebot<sup>1</sup>, Daniel CamilettiMoirón<sup>1</sup>, Virginia A. Aparicio<sup>1</sup>, Maria Lopez-Jurado<sup>1</sup>, Pilar Aranda<sup>1</sup>, Francisco Arrebola<sup>2</sup>, Eduardo
  Fernandez-Segura<sup>2</sup>, Giovanna Bermano<sup>3</sup>, Marie Goua<sup>3</sup>, Milagros Galisteo<sup>4</sup>, and Jesus M. Porres<sup>1</sup>\*
- 7
- 8 <sup>1</sup>Department of Physiology. Institute of Nutrition and Food Technology. Doctoral Program in Nutrition and
- 9 Food Sciences. University of Granada. Campus Universitario de Cartuja s/n. Granada 18071, Spain.
- <sup>2</sup>Department of Histology, Institute of Neurosciences, University of Granada. Avenida de Madrid s/n.
  Granada 18071, Spain.
- <sup>3</sup>*Institute for Health and Wellbeing Research, Robert Gordon University, Aberdeen, UK*
- <sup>4</sup>Department of Pharmacology, School of Pharmacy, University of Granada. Campus Universitario de
  Cartuja s/n. Granada 18071, Spain.
- 15
- 16

17 \* Corresponding author: Departamento de Fisiología. Facultad de Farmacia. Universidad de Granada.
18 Campus Universitario de Cartuja s/n. Granada 18071 Telephone: 34-958-243879, Fax: 34-958-248959, E19 mail: <u>jmporres@ugr.es</u>

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#### 21 Abstract

22 Metabolic syndrome (MS) is a group of metabolic alterations that increase the susceptibility to 23 cardiovascular disease and type II diabetes. Non Alcoholic Fatty Liver Disease (NAFLD) has been described 24 as the liver manifestation of MS. We aimed to test the beneficial effects of an aerobic interval training (AIT) 25 protocol on different biochemical, microscopic, and functional liver alterations related to the MS in the 26 experimental model of obese Zucker rat. Two groups of lean and obese animals (6 weeks old) followed a 27 protocol of aerobic interval training (4 min at 65-80% of  $VO_2$  max, followed by 3 min at 50-65% of  $VO_2$ 28 max, 45-60 min, 5 days/week, 8 weeks of experimental period), whereas two control groups remained 29 sedentary. Obese rats had higher food intake and body weight (P < 0.0001), and suffered significant 30 alterations in plasma lipid profile, area under the curve (AUC) after oral glucose overload (P < 0.0001), liver 31 histology and functionality, and antioxidant status. The aerobic interval training protocol assayed 32 ameliorated the severity of alterations related to glucose and lipid metabolism, and increased the liver protein 33 expression of PPAR- $\gamma$ , as well as the gene expression of Glutathione Peroxidase 4 (P < 0.001). The training 34 protocol also showed significant effects on the activity of hepatic antioxidant enzymes, although this action 35 was greatly influenced by rat phenotype. The present data suggest that AIT protocol is a feasible strategy to 36 improve some of the plasma and liver alterations featured by the MS.

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38 *Key words*: metabolic syndrome, non-alcoholic fatty liver disease, aerobic interval training, aerobic capacity,

39 lipid metabolism, hepatic metabolic pathways, liver antioxidant status

40

#### 41 Introduction

42 Metabolic syndrome (MS) is a cluster of interrelated metabolic conditions which increase the risk of 43 developing cardiovascular disease (Kaur 2014). MS is characterized by central obesity, dyslipidemia, 44 elevated blood pressure, and elevated plasma glucose (Grundy 2005). Patients with MS are also more 45 susceptible to develop type 2 diabetes mellitus (Reaven 2004).

Hepatic morphology and function can be adversely affected by MS leading to the development of Non Alcoholic Fatty Liver Disease (NAFLD) (Marchesini et al. 2003) which is characterized by steatosis, lobular and portal inflammation, hepatocyte ballooning, and fibrosis (Brunt and Tiniakos 2010). Furthermore, this hepatic pathology is now considered as the liver manifestation of MS (Angelico et al. 2005). Although the exact mechanisms leading to it are not yet completely understood, insulin resistance and chronic oxidative stress have been reported to play a major role in liver damage and development of NAFLD (Polyzos et al. 2009; Rolo et al. 2012)

53 The effects of different types of exercise on MS have been studied. In 2009, Haram et al. (2009) reported 54 that high-intensity aerobic interval training was more effective at reducing cardiovascular disease risk in rats 55 with MS than moderate-intensity continuous training. Aerobic interval exercise has also been described as a 56 feasible and efficient strategy to restore mitochondrial dysfunction in rats after myocardial infarction by 57 inhibiting dynamic pathological remodelling (Jiang et al. 2014). With regard to liver metabolism, several 58 authors have studied the effect of moderate or vigorous intensity exercise on different aspects of NAFLD. 59 Moderate intensity exercise training showed beneficial effects on intrahepatic triglyceride content, although 60 it did not improve hepatic lipoprotein kinetics in obese individuals with NAFLD (Sullivan et al. 2012). On 61 the other hand, vigorous exercise in humans was associated with a decreased adjusted odds of having non-62 alcoholic steatohepatitis (NASH), whereas doubling the recommended time of vigorous exercise was 63 associated with a decreased adjusted odds of advanced fibrosis (Kistler et al. 2011). Furthermore, Linden et 64 al. (2015) have reported that vigorous-intensity interval exercise training (40 m/min, 15% incline,  $6 \times 2.5$ 65 min bouts/day, 5 days/week treadmill running) was as effective as a longer moderate intensity protocol in 66 lowering hepatic triglycerides, serum alanine aminotransferase (ALT), perivenular fibrosis, and hepatic 67 collagen 1a1 mRNA expression in OLETF rats.

68 Although a direct relationship has not been established, insufficient aerobic capacity is the basis of 69 several cardiovascular and metabolic diseases (Tjønna et al. 2008). Therefore, an improvement in such 70 capacity could result in health benefits reported for aerobic interval training.

71 Oxidative stress is responsible for part of the initiation of obesity associated co-morbidities including 72 NAFLD and NASH (Rolo et al. 2012; Tariq et al. 2014). The obese status is characterised by oxidative stress 73 partly caused by insulin resistance and partly by low chronic inflammation (Al Rifai et al. 2015). Conditions 74 in which antioxidant status is altered by prevailing oxidative forces can be reflected in altered activity or 75 expression of liver antioxidant enzymes (Soltys et al. 2001; Videla et al. 2004). The regulation of glucose 76 and lipid metabolism at hepatic level can be significantly affected by metabolic alterations such as those 77 related to the development of NAFLD. Several molecular pathways are involved in glucose and lipid 78 metabolism. There are specific components of the former pathways like 5' AMP-activated protein kinase 79 (AMPK) or Peroxisome Proliferator Activator Receptor (PPAR) that play a key role in their activation. 80 AMPK is a regulator of energy homeostasis that down-regulate the expression of gluconeogenic and 81 lipogenic enzymes (Galisteo et al. 2010; Lochhead et al. 2000) in energetic deficiency situations. PPARs are 82 a family of nuclear transcription factors related to the management of lipogenic and lipolitic pathways in 83 liver and adipose tissue (Souza-Mello 2015). The up-regulation of PPAR- $\gamma$  isoform has been related to 84 different factors such as AMPK pathway (Sakai et al. 2014) or reactive oxygen species (ROS) generation 85 (Ristow et al. 2009). Animal experimental models are an accepted tool to study the multifactorial effects of 86 exercise on MS associated conditions. In this context, the obese Zucker rat model shares many similarities 87 with humans affected by MS, including obesity, dyslipidaemia, insulin resistance, hepatomegalia, altered 88 antioxidant status, and inflammatory process (Galisteo et al. 2010; Hey-Mogensen et al. 2012). According to 89 Kucera and Cervinkova (2014), this experimental animal model exhibits the initial stages of NAFLD mainly 90 characterized by steatosis, but does not spontaneously progress to stage 2 of the disease. This study aimed 91 therefore: 1) to assess the potentially beneficial effects of AIT protocol on aerobic capacity, glucose and lipid 92 metabolism parameters, liver histology and functionality, and hepatic antioxidant status in an animal 93 experimental model of MS, the obese Zucker rat, that presents hepatic alteration related to early stages of 94 NAFLD, 2) to study the role of AMPK and PPAR- $\gamma$  in the signaling pathways involved in exercise-derived 95 effects.

#### 96 Materials and methods

#### 97 Animals and experimental design

98 Twenty young male obese (fa/fa) (O) and 20 lean heterozygous (fa/+) (L) Zucker rats (6 weeks old) with 99 an initial mean body weight of 179±2.8 and 148±3.4g, respectively, were allocated to four different 100 experimental groups (two obese and two lean groups, n=10 rats each). Two of the experimental groups (an 101 obese and a lean one) performed aerobic interval exercise according to an established training protocol (OE, 102 LE) while the two remaining groups were considered as sedentary groups (OS, LS). The experiment lasted 103 for 8 weeks, during which the animals were housed in a well ventilated, thermostatically controlled room 104 (21±2°C). A reversed 12:12 light/dark cycle was implemented so the animals would perform the training 105 protocol in darkness. Throughout the trial, animals had free access to type 2 water and consumed the 106 experimental diet (see below) ad libitum. Food intake was recorded daily whereas body weight was 107 measured once a week. At the end of experimental period, a glucose tolerance test following the protocol 108 described by Prieto et al. (2004) was performed 24 h after the last training session in order to re-establish the 109 normal physiological conditions altered in response to the energetic demand induced by the aerobic interval 110 exercise. Blood glucose concentration from the animals' tail was recorded at periods 0, 15, 30, 90 and 120 111 min after the glucose overload ingestion (BREEZE® 2, Bayer), and the area under the curve (AUC) was 112 determined. The animals were allowed to recover for 24 h prior being fasted for a further 8 h, anesthetized 113 with xylazine/ketamine and sacrificed. Blood was collected by puncture of the abdominal aorta (with heparin 114 as anticoagulant) and centrifuged at  $1458 \times g$  for 15 min to separate plasma that was subsequently frozen in 115 liquid  $N_2$  and stored at -80°C. The liver was extracted, weighed, photographed for macroscopic studies, 116 divided into various portions and immediately frozen in liquid N2 and stored at -80°C. All experiments were 117 undertaken according to Directional Guides Related to Animal Housing and Care (EUC 2010) and all 118 procedures were approved by the Animal Experimentation Ethics Committee of the University of Granada, 119 Spain.

#### 120 Experimental diet

The experimental diet was formulated following the guidelines of the American Institute of Nutrition (AIN-93M; Reeves et al. 1993), in order to meet the nutritional recommendations of adult rats (NRC 1995), with casein (70%) and whey (30%) as protein sources, to reach a 12% protein level. Dietary insoluble fiber was added as cellulose to provide a dietary level of 10%, while 4% of fat was provided as sunflower oil. There was no further addition of saturated fat or cholesterol.

#### 126 Exercise Protocol

127 The exercise groups followed a protocol of aerobic interval training five days a week during the eight 128 weeks of the experimental period. The training protocol was performed in a motorized treadmill specially 129 designed for rats (Panlab Treadmills for five rats, LE 8710R), and all sessions were performed during the 130 dark cycle of the animals (active period). This training protocol was designed based on recent studies that 131 have demonstrated that a high intensity interval training (65-80% of VO<sub>2</sub>max combined with periods of 50-132 65% of VO<sub>2</sub>max) promotes best results on weight reduction and blood lipid profile (Donnelly et al. 2009). 133 One week before the start of the study, the animals were adapted to the training procedures through a low 134 intensity running protocol every day for 20 min in the treadmill at 18m/min. The running sessions of 1 h 135 started with a 10 min warm up at 40% VO<sub>2</sub>max, and consisted of successive 4 min exercise periods at 65-136 80% of VO<sub>2</sub> max, followed by 3 min recovery periods at 50-65% of VO<sub>2</sub> max. The intensities and length of 137 the training were gradually incremented every week (Table 1). To establish the velocity that would 138 correspond to the VO<sub>2</sub>max of each rat, a maximal incremental test was performed at the start of the study. A 139 final incremental test was performed 96 h prior the end of the study to test the maximal aerobic capacity and 140 physical performance achieved by the animals as a result of the intervention. The maximal incremental test 141 was carried out following the protocol described by Clemente et al. (2011) and Wisloff et al. (2001) with 142 slight modifications. This protocol ran by the computer software SeDaCom V2. (Panlab. Harvard apparatus), 143 first measures 5 min ambient air and then air within the treadmill to determine the appropriate ratio VO<sub>2</sub>: 144  $VCO_2$ . The test ends when the animal is visibly exhausted and rested on the shock bar for > 5 seconds. Basal 145 and final blood lactate concentrations were measured at the start and at the end of the incremental test in 146 blood obtained from the animals' tail (Lactate Pro, Arkray, The Netherlands).

During the experimental trial, the sedentary groups were subjected to a 15 min of low velocity (15 m/min)
training protocol twice a week, to reflect a human sedentary lifestyle (Morris et al. 2007).

#### 149 Plasma and liver biochemical analysis

Biochemical parameters of glucose and lipid metabolism, and liver function were measured in plasma using a Shenzhen Midray BS-200 Chemistry Analyzer (Bio-Medical Electronics) at the Bioanalysis Unit of the Scientific Instrumentation Centre (Biomedical Research Park, University of Granada). Plasma insulin concentration was quantified using a rat insulin enzyme immunoassay kit (Spibio, Montigny le Bretonneux, France). A portion of liver was lyophilized in order to determine the percentage of water. Hepatic lipids were extracted from the freeze-dried liver portion using the method described by Folch et al. (1957) with slight modifications (Kapravelou et al. 2013). The extracted lipids were dissolved in 1mL of 96% hexane to measure triglycerides content (Spinreact, S.A., Girona, Spain).

#### 159 Macroscropic and microscopic liver study

160 Liver area of the macroscopic image was estimated in all the liver images of the four experimental groups 161 assayed by morphometric study using the software Image Pro Plus 6.0. A portion of liver was fixed in 10% 162 phosphate-buffered formalin, dehydrated in ethanol, embedded in paraffin, and sectioned for histological 163 examination using hematoxylin-eosin (HE), and Masson's trichrome (MT) staining for general microscopy 164 morphology and fibrosis development, respectively. Four different preparations of each staining were 165 analyzed for each animal, and 10 animals were evaluated in each experimental group (n=40). Histological 166 alterations were evaluated according to the following grading score: -, non-existent; +, mild; ++, 167 mild/moderate; +++, moderate; ++++, abundant; +++++, severe.

#### 168 Antioxidant activity assays

169 Liver was homogenized (1:10 w/v) in 50 mM phosphate buffer (pH 7.8) containing 0.1% Triton X-100 170 and 1.34 mM of DETAPAC using a Micra D-1 homogenizer (ART moderne labortechnik) at 18,000 rpm for 171 30 sec followed by treatment with Sonoplus HD 2070 ultrasonic homogenizer (Bandelin) at 50% power three 172 times for 10 sec. Liver homogenates were centrifuged at 13 000  $\times$  g, 4°C for 45 min and the supernatant was 173 used to determine the activity of antioxidant enzymes. Catalase activity was measured by the method of Aebi 174 (1984) and the enzyme unit was defined as µmol of H<sub>2</sub>O<sub>2</sub> consumption per min. Total cellular GPX activity 175 was determined by the coupled assay of NADPH oxidation (Lawrence et al. 1974) using cumene 176 hydroperoxyde as substrate. The enzyme unit was defined as nmol of GSH oxidized per min. Total SOD 177 activity was measured as described by Ukeda et al. (1997). Mn-SOD activity was determined by the same 178 method after treating the samples with 4mM KCN for 30 min. Cu,Zn-SOD activity resulted from subtracting 179 the Mn-SOD activity from the total SOD activity. One unit of SOD activity was defined as the enzyme 180 needed to inhibit 50% XTT reduction. Protein concentration was assayed by the method of Lowry et al. 181 (1951).

#### 182 Liver protein expression analyses

183 Liver samples were homogenized in 20mM Tris HCl buffer containing 0.1% Igepal, 100mM EGTA, and 184 a cocktail of protease inhibitors (Sigma, St Louis, MO) that provided a final concentration of 100mM 185 dichloro dipheny thrichloroethane (DDT), 100mM orthovanadate, 1mM EDTA, 2mM AEBSF, 130µM 186 Bestatin, 14µM E-64, 1µM Leupeptin and 1µM Apoprotin. Samples were homogenized as before. Liver 187 homogenates were centrifuged at 13 000  $\times$  g for 45 min, at 4°C and supernatants were aliquoted and stored at 188 -80°C, until further use for western blot analysis. Protein concentration was measured by the method of 189 Lowry et al. (1951). Equal amounts of total protein for each sample were loaded per lane (two samples from 190 each experimental group were run per gel), subjected to 12% SDS-PAGE, and electrophoretically transferred 191 to nitrocellulose membranes (Schleicher&Schuell, Dassel, Germany) by wet transfer at 90 V for 2 h using a 192 Mini Trans-Blot cell system (Bio-Rad Laboratories, Hercules, CA). Membranes were blocked using 5% non-193 fat dry powered milk dissolved in Tris-Buffered saline Tween-20 (TBST) for 90 min at room temperature. 194 The primary antibodies for 5'-AMP-activated protein kinase (AMPK), phosphorylated-AMPK (PAMPK) 195 (Cell Signaling Technology, Inc. Danvers, MA, USA), and proliferator activating receptor- $\gamma$  (PPAR- $\gamma$ ) 196 (Abcam, Cambridge, UK) were used according to the manufacturer recommended dilutions (1:1000) and 197 were incubated overnight at 4°C. The membranes were then washed three times for 10 min with TBST, 198 before incubation for 2 h at room temperature with secondary peroxidase conjugated goat anti-rabbit 199 antibody (Sigma, St Louis, MO) diluted at 1:2000 in 5% nonfat dry milk-TBST. Membranes were washed as 200 before, and the bound antibodies were visualized by an ECL Pro system (PerkinElmer, Boston, USA) using a 201 Fujifilm Luminescent Analyzer LAS-4000 mini System (Fujifilm, Tokyo, Japan). PAMPK expression was 202 determined in relation to AMPK expression while PPAR-y was normalized to ponceau reagent. Results were 203 expressed in relative density units.

#### 204 Liver gene expression analyses

Total RNA was extracted from 10-20 mg of frozen liver tissue using Trizol<sup>TM</sup> reagent (Invitrogen; UK) and following the manufacturer's instructions. RNA purity was determined by the A=260/A=280 ratio, using a UV/VIS spectrophotometer (Thermo Spectronic, Helios  $\gamma$ ). Expression of GPX1 and GPX4 genes was measured by semi-quantitative RT PCR. GAPDH gene expression was used as housekeeping gene. Total RNA (100ng) was reverse transcribed using SuperScript III Reverse Transcriptase (Invitrogen, UK), 10mM of each dNTP (Promega, UK), 10-20U RNaseOUT (Invitrogen), 1mg/mL BSA (BioLabs, UK), and 500µg/ml of Random Hexamers (Promega, UK) as primers. The amplification of cDNA was performed by 212 adding 10x PCR buffer (w/o MgCl<sub>2</sub>), 1.75mM MgCl<sub>2</sub>, 1U TaqDNA polymerase and 1 µM of each specific 213 primer for GPX1, GPX4 and GAPDH (Table 2). After a hot start (95°C) and 4 min at 94°C, 25 cycles of 1 214 min at 94°C, 2 min at 59°C and 2 min at 72°C, were performed. Samples were further incubated at 72°C for 8 215 min to complete any elongation reaction. PCR products were then separated by gel electrophoresis on a 1.5% 216 agarose gel containing GelRed<sup>TM</sup> (1:10,000, Biotium, UK). PCR amplified gene products were visualized 217 under UV light and, images were captured using Fusion Fx7 imaging system (PEQLAB Biotechnologies, 218 UK). Optical density of the obtained products was quantified by Image J software. Expression of GPX1 and 219 GPX4 was related to expression of GADPH. To test the expression stability of GAPDH, equal amounts of 220 PCR product from liver samples of rats within each experimental group were loaded per lane and the band 221 density of the corresponding samples measured and compared among them. The average band density of LS 222 group was assigned with a value of 1, and relative values for the rest of samples in the three remaining 223 experimental groups were calculated and averaged. After statistical comparisons, no significant differences 224 were found for GAPDH expression among the four groups assayed.

#### 225 Statistical analyses

226 Time-repeated measurement analysis was applied to weekly food intake and body weight data as well as 227 to blood glucose content after an oral glucose overload in order to analyze within subject effects (time) or 228 within group effects (phenotype or aerobic interval training protocol) on the above parameters. The effect of 229 phenotype and AIT protocol on final body weight, aerobic capacity and physical performance, plasma and 230 liver biochemical parameters, hepatic antioxidant enzyme activity, protein and gene expression was analyzed 231 by  $2 \times 2$  factorial ANOVA with phenotype and AIT protocol as main treatments. Results are given as mean 232 values and pooled standard error of the mean. Bonferroni's test was used to detect differences between 233 treatment means. The analyses were performed with SAS, version 9.0, and the level of significance was set 234 at P < 0.05.

235 Results

#### 236 Food intake and body weight

Changes observed in weekly food intake and body weight during the study are presented in Fig. 1A and 1B. Time-repeated measurement analysis revealed a significant time effect, phenotype effect, and exercise effect on food intake that was 20% higher in the obese compared to the lean Zucker rats (P < 0.0001) and 240 decreased by 5% as a result of the aerobic interval training (P < 0.05). Body weight was significantly

affected by phenotype and the aerobic interval training, with lower values being found for lean vs obese (P < P

242 0.0001), and trained vs sedentary (P < 0.0001) rats, respectively. The effect of exercise on body weight was

243 more pronounced in the obese when compared to lean rats.

#### 244 Aerobic capacity and physical performance

The effects of phenotype and AIT protocol on aerobic capacity and physical performance of Zucker rats during an incremental test are shown in Table 3. Blood lactate content at the end of incremental tests was lower in lean when compared to obese rats (P < 0.0001), whereas the opposite was observed for the total running time and maximal speed achieved (P < 0.0001). Exercise increased all the above parameters (P < 0.0001) with the exception of final blood lactate that decreased in the obese rats (P < 0.001) and was not affected in the lean ones. The effects of exercise on running time and maximal speed were significantly affected by phenotype, a finding that was reflected in significant phenotype × exercise interactions.

#### 252 Plasma parameters

253 The effects of phenotype and AIT protocol on blood and plasma parameters of glucose and lipid 254 metabolism of Zucker rats are presented in Figure 2 and Table 4. With regards to the plasma parameters 255 related to glucose metabolism affected by phenotype (glucose, insulin, and AUC, P < 0.0001), the training 256 protocol only had a significant effect on the AUC. Exercise tended to decrease both glucose and insulin 257 concentrations in the obese rats and increase them in the lean ones, although the effects were not significant. 258 AUC was differentially affected by exercise depending on the rat phenotype, a finding that was reflected in 259 phenotype  $\times$  exercise interaction (P < 0.0001). Exercise caused a 2.7-fold reduction in the AUC of obese rats, 260 returning this index to values similar to those found in lean animals, among which no appreciable effect of 261 this intervention was found. When blood glucose content of lean and obese Zucker rats prior to or at different 262 time points after an oral glucose overload was represented (Fig. 2), the rise in blood glucose during the initial 263 stages after oral administration was more pronounced in obese when compared to lean rats, and higher levels 264 were observed among the former animals for sedentary when compared to trained individuals. Blood glucose 265 levels of obese sedentary animals remained higher than the rest of experimental groups during the 120 min 266 post administration period, whereas those of obese trained animals were not significantly different from the 267 lean ones from 30 min post administration time.

The plasma parameters related to lipid metabolism (Total-, LDL-, and HDL-cholesterol, triglycerides) were all significantly affected by phenotype. There was a significant effect of exercise on Total- and LDLcholesterol contents that were considerably diminished in the obese groups that carried out the training protocol (20 and 41%, respectively) and to a lesser extent in the lean animals, giving rise to a significant phenotype × exercise interaction. Triglyceride content was considerably reduced by exercise (P = 0.0845) in both the obese and lean animals (12 and 74%, respectively).

#### 274 Liver surface, lipid composition, functionality and antioxidant status

275 The effects of phenotype and AIT protocol on liver weight and surface, lipid composition, and 276 functionality, are presented in Table 5 and Fig. 3. There was a significant effect of phenotype on liver weight 277 and surface, total fat, and triglyceride content that was higher in obese compared to lean rats. The liver of 278 obese rats showed clear signs of hepatomegalia and steatosis compared to their lean counterparts (Fig. 3). 279 The training protocol caused 8.6 and 9.3% decrease in liver weight and surface, respectively, and significant 280 reductions in hepatic total fat and triglyceride contents in the obese animals (35 and 50%, respectively). Such 281 AIT-induced improvements in the hepatic outcomes of lipid metabolism were associated to a lower body 282 weight exhibited by trained animals (Fig. 1B) and, to a lesser extent, to the lower weight of their abdominal 283 fat pad ( $6.4\pm0.2$  vs  $5.7\pm0.2$  g in OS and OE groups, respectively)

Liver function was measured as plasma AST, ALT, ALP, GGT activities. All of these parameters were affected by phenotype, showing a significant increase in the obese animals. The training protocol was effective at reducing the activity of AST in both lean and obese animals, and ALP in obese but not in lean rats, thus giving rise to a significant phenotype × exercise interaction. However, it did not have any major effect in ALT and GGT activity.

With regard to the hepatic antioxidant enzyme activities, there was a significant phenotype effect on SOD activity reflected by lower values for Cu/Zn-SOD and higher values for Mn-SOD in obese compared to lean rats. The training protocol caused a 40% increase in Cu/Zn-SOD activity of obese but no appreciable effect on lean rats, and a 43% increase in Mn-SOD activity of lean rats that in contrast was significantly reduced in their obese counterparts (20%). Such differential effects of exercise depending on rat phenotype gave rise to significant phenotype × exercise interactions (P=0.049 and P<0.0001, respectively). GPX activity was significantly affected by phenotype, with lower values in the obese when compared to the lean sedentary rats. The training protocol caused a 17% decrease in GPX activity of lean compared to a 100% increase in obese rats. Such differential effects of the training protocol gave rise to a strong phenotype × exercise interaction (P < 0.0001). Exercise also exhibited a differential effect on catalase activity depending on rat phenotype (P = 0.0053), decreasing as a result of the training protocol in the obese rats whereas it increased in their lean controls.

The effects of phenotype and AIT protocol on the liver expression of GPX1 and GPX4 genes are shown in Fig. 4. The expression of GPX1 and GPX4 genes, two major redox enzymes that take part in the antioxidant defence system of the liver of Zucker rats, was not affected by phenotype. Exercise had only a significant enhancing effect on the expression of liver GPX4 gene.

#### 305 Liver histology

Several phenotype-related changes in liver histology were observed under the experimental conditions of the present study (Fig. 5, Table 6). The obese sedentary rats exhibited clear signs of microvesicular steatosis and fatty droplets (Fig. 5C), lipogranulomas and portal inflammation (Table 6) when compared to their lean counterparts. The training protocol improved microvesicular steatosis, reduced the number of fatty droplets (Fig. 5D), and decreased the amount of lipogranulomas and portal inflammation. However, it caused the appearance of multinucleic cells and necrosis (Table 6) followed by the development of fibrosis (Fig. 5H).

#### 312 Liver protein expression

The effects of phenotype and AIT protocol on the liver expression of AMPK, PAMPK, and PPAR- $\gamma$  are shown in Fig. 6. Western blot analysis indicated a significantly lower expression and activation of AMPK (shown by the ratio PAMPK/AMPK) (Figure 6A) in the liver of obese compared to lean animals, and the training protocol did not induce major effects on AMPK phosphorylation. No significant differences in PPAR- $\gamma$  expression were observed between obese and lean rats, whereas the training protocol caused 1.7fold increment in the obese and lean phenotypes (OE, LE), respectively (Figure 6B).

#### 319 Discussion

The study of MS and the development of strategies for its prevention and treatment has attracted increasing attention in recent years due to its growing prevalence and associated comorbidities exemplified by cardiovascular disease and NAFLD (Kaur 2014; Marchesini et al. 2003). Changes in lifestyle, i.e. caloric restriction and physical activity, are the primary interventions chosen to improve this condition. However, the type and intensity of exercise are still a matter of debate. In this study, the influence of an aerobic interval 325 training protocol consisting of successive 4 min periods at 65-80% of VO<sub>2</sub>max, followed by 3 min recovery 326 periods at 50-65% of VO<sub>2</sub>max on plasma and liver biochemical parameters, was studied in obese and lean 327 Zucker rats. Obese rats exhibited higher food intake and body weight, and suffered significant alterations in 328 MS-associated parameters such as plasma lipid profile, OGTT and AUC after oral glucose overload, liver 329 histology and functionality, and antioxidant status. Exercise increased the aerobic capacity of both rat 330 phenotypes and diminished the severity of MS alterations, especially those related to glucose and lipid 331 metabolism, affecting the levels and activity of proteins involved in metabolic and antioxidant pathways and 332 the gene expression of GPX4, a key antioxidant enzyme, in the liver. The effects of exercise on glucose and 333 lipid metabolism were independent of hepatic AMPK activation, but matched significant increments in the 334 protein expression of PPARy.

Zucker obese rats are known to present a genetic defect in leptin receptor that causes the development of hyperphagia and other metabolic disturbances leading to obese phenotype (Galisteo et al. 2008). The anorectic effects of exercise on Zucker rats have been described by (Kibenge and Chan 2002) that related such effects to an increased production of corticotrophin-releasing hormone. Such anorectic effects would in turn lead to a lower weight gain both in obese and lean animals. Decrease in weight gain is among the most widespread recommendations for the treatment of metabolic syndrome and has been associated to significant improvements in cardiovascular health and metabolic disorders intrinsic to that disease.

342 Physical performance was always lower in obese when compared to lean Zucker rats due to the severe 343 metabolic disturbances, impaired skeletal muscle perfusion, and muscular atrophy inherent to this 344 experimental model. Low intrinsic aerobic capacity in rats has been related to lower energy expenditure and 345 reduced whole body and hepatic mitochondrial lipid oxidation, which in turn made the animals more 346 susceptible to dietary-induced hepatic steatosis (Morris et al. 2014). Our results show a clear improvement in 347 the aerobic capacity of lean and obese rats that followed the aerobic interval training protocol although the 348 effect of exercise on VO<sub>2</sub>max did not reach statistical significance. The adaptation changes in blood lactate, 349 maximal speed, and running time were significantly improved in trained rats. The enhancement in aerobic 350 capacity derived from aerobic interval exercise has been reported by other authors (Haram et al. 2009; 351 Tjønna et al. 2008) that related such changes to amelioration in several risk factors of MS associated 352 cardiovascular disease. Under our experimental conditions, the higher physical performance of trained 353 Zucker rats was related to significant changes in glucose and lipid metabolism as well as to improved hepatic

354 histology and function altered in NAFLD.

The experimental model of obese Zucker rat has been described to exhibit impaired lactate transport by the skeletal muscle that can be alleviated by endurance exercise (Metz et al. 2005). The aerobic training protocol tested in our study achieved a consistent reduction in blood lactate after the incremental oxygen consumption test. Since lactate release under exercise conditions is mostly related to skeletal muscle metabolism, our results suggest that the benefits of the AIT protocol on lactate uptake and metabolism are clear. Such improvement represents an important benefit on glucose metabolism in relation to hyperlactatemia and aggravation of insulin resistance (Juraschek et al. 2013; Souto et al. 2011).

362 The beneficial effects of different types of aerobic exercise on glucose and lipid metabolism have been 363 extensively reported in the literature (Johnson et al. 2009; Rosety-Rodriguez et al. 2012). Our results confirm 364 such positive actions of AIT protocol, and point out to training-induced enhanced insulin sensitivity in the 365 obese animals as seen by changes in blood glucose levels and AUC after an oral glucose load, rather than to 366 changes in insulin secretion. Moreover, the specific action of the training protocol at decreasing total- and 367 LDL-cholesterol, while leaving HDL-cholesterol unchanged, suggests a direct protection against well known 368 cardio-metabolic risk factors. Such effects on the plasma lipid profile could be explained by a lower free 369 fatty acid uptake and lipogenesis in the adipose tissue (Haram et al. 2009). In addition, it has been reported 370 that physical exercise can elicit a significant improvement in the content and functionality of mitochondria 371 measured by increased citrate synthase activity, and palmitate oxidation (Linden et al. 2015). Moreover, 372 physical exercise is a successful strategy to prevent and mitigate NASH-induced mitochondrial bioenergetics 373 impairment, thus improving lipid metabolism in liver (Gonçalves et al. 2014).

374 The aerobic interval training triggered a clear improvement in liver lipid composition (lower total fat and 375 triglyceride content) as described by other authors in different human and animal models (Johnson et al. 376 2009; Linden et al. 2015). AIT can lead to such improvements in lipid composition through increases in 377 mitochondrial content and oxidative phosphorylation, or greater lipid and carbohydrate oxidation (Barker et 378 al. 2014; Larsen et al. 2015). Indeed, a long term aerobic training, for 3 months, at 60-75% of VO<sub>2</sub>max has 379 been shown to induce a decrease in intrahepatic lipids in obese female adolescents (Lee et al. 2013), whereas 380 a 7-day aerobic training protocol during 1 h at 80-85% of maximum heart rate in obese individuals with 381 hepatic steatosis resulted in increased resting fat oxidation and favourable effects in hepatic lipid

composition by increasing polyunsaturated lipid index (Haus et al. 2013). Furthermore, the beneficial effect
of a 12 week interval training on lipid oxidation was also proven in healthy, sedentary subjects (Astorino et
al. 2013).

Fatty liver has been associated to high plasma AST and ALT activities, resulting from hepatic damage mediated by inflammation and oxidative stress reflected in higher levels of hepatic nitrate and malondialdehyde (Jung and Kim 2013; Linden et al. 2015). Significant improvements of hepatic plasma parameters have been observed under our experimental conditions related to the fat composition changes in the obese Zucker rats. It is worth mentioning that our exercise training protocol has been beneficial both in acute and chronic hepatic markers (AST and ALP activities, respectively) of altered functional status.

391 Oxidative stress is one of the main factors involved in the development of NAFLD (Rolo et al. 2012; 392 Tariq et al. 2014). Indeed, the "two-hit" hypothesis on NASH development points out to oxidative stress as 393 one of the factors directly promoting the progress from steatosis to the advanced stages of the pathology. A 394 decrease in antioxidant defence system has been described as a major promoting factor in the development of 395 oxidative stress in patients with NASH (Videla et al. 2004), whereas obese Zucker rats with fatty liver have 396 been described to exhibit an altered antioxidant status as shown by the decrease in liver content of GSH, 397 tocopherol, and catalase activity (Soltys et al. 2001). Exercise is a useful lifestyle intervention strategy to 398 improve oxidative stress in the muscle of type 2 diabetic rats (Qi et al. 2011; Rosety-Rodriguez et al. 2012) 399 and plasma of obese middle-age women (Shin et al. 2008). Furthermore, in obese individuals with hepatic 400 steatosis, short-term aerobic exercise has proved to favourably alter hepatic lipid composition, insulin 401 resistance and oxidative stress, risk factors that influence the severity of NAFLD (Haus et al. 2013). 402 However, the effects of exercise on oxidative stress may vary depending on parameters such as age, health 403 status, severity of pathology of the individual, and/or type and intensity of the exercise protocol applied. 404 Although, the effect of exercise on SOD, GPX, and catalase activities differed between obese and lean rats 405 under our experimental conditions, a finding that can be attributed to the compromised antioxidant status of 406 the obese animals associated to their fatty liver condition, exercise was in general terms an effective strategy 407 to lower oxidative stress and balance SOD and GPX activities that were altered in obese sedentary rats, 408 returning them to levels closer or even higher than those of lean animals. Of particular interest was the 409 increment in GPX activity attained by trained obese rats that nearly doubled that of their sedentary 410 counterparts and led us to conduct further experiments to confirm if such increments were related to the 411 induced expression of two relevant genes belonging to the GPX group of selenoenzymes such as GPX1 and 412 GPX4. Nevertheless, neither exercise nor phenotype had a significant effect on the hepatic GPX1 gene 413 expression under our experimental conditions. Similar findings have been observed in pediatric patients with 414 NASH that underwent liver biopsy (Desai et al. 2014) or mononuclear cells isolated from peripheral blood 415 samples of active or inactive healthy participants after completing a 30-min treadmill run at 75-80% 416 VO<sub>2</sub>max (Jenkins et al. 2009). A possible explanation for this lack of coincidence between enzymatic 417 activity and gene expression pattern is the existence of different members within the group of GPX 418 selenoenzymes that are not taken into account when the total GPX activity is measured. Furthermore, 419 Bermano et al. (1995) reported that both the activity of the selenoenzymes and the abundance of their 420 respective mRNAs are not regulated in a similar manner in the liver of rats with different Se status.

While GPX4 deficiency has been linked to disorders associated with reactive oxygen species and lipid peroxides generated in mitochondria (Imai and Nakagawa 2003), its overexpression is associated with the inhibition of atherosclerosis development in  $ApoE^{-/-}$  mice (Guo et al. 2008) and lipid peroxidation in endothelial cells (Sneddon et al. 2003). In our study, hepatic GPX4 gene expression was up-regulated by exercise in both lean and obese groups. Similar results were obtained by (Daussin et al. 2012) in the expression of GPX4 after endurance training for 10 days.

427 The improvement in liver histological features associated to changes in lipid composition and function 428 exerted by the training protocol in the obese Zucker rat shows the prospective benefits of this type of 429 exercise in ameliorating hepatic morphological and histological alterations present in the early stages of 430 NAFLD characteristic of the experimental animal model selected for this study. Nevertheless, although the 431 training protocol has shown interesting results on glucose and lipid parameters in plasma, as well as lower 432 lipid content and decreased fatty droplet accumulation and microvesicular steatosis in liver of obese rats, the 433 potentially deleterious effects of that intensive type of exercise on individuals prone to liver damage (e.g. 434 suffering from MS), should be considered, since necrosis and fibrosis were detected in the liver of trained 435 rats, especially in the obse animals. It has been described that the obse Zucker rat does not spontaneously 436 progress from steatosis to steatohepatitis but needs an additional intervention (Kucera and Cervinkova 2014). 437 It seems that the experimental training protocol assayed was protective against steatosis but triggered some 438 distinctive features of NASH. In fact, exhaustive or strenuous exercise has been shown to increase certain 439 biomarkers of liver damage like AST and ALT and cause oxidative damage to nuclear DNA (Ogonovszky et 16

440 al. 2005; Ramos et al. 2013). Moreover, some authors have used exhaustive acute exercise to induce liver 441 injury in experimental animal models (Huang et al. 2013; Praphatsorn et al. 2010). Histopathological lesions 442 described in such models were mediated by pro-inflammatory cytokines and consisted on extensive nuclear 443 pyknosis, severe necrosis with haemorrhage and neutrophil infiltration, edema and necroinflammation, as 444 well as accelerated apoptosis. Under conditions of demanding physical exercise blood flow is preferentially 445 derived to skeletal muscle at the expense of other tissues like the liver in which decreased blood flow may 446 induce ischemic hypoxia-reperfusion of hepatocytes and lead to necrosis.

447 Activation of AMPK depends on the ADP:ATP ratio, and it is reduced in the liver of obese Zucker rat 448 due to an excess of energetic substrates entering this tissue (Galisteo et al. 2010). Furthermore, AMPK 449 activity has been shown to be inhibited by insulin and glucose in several tissues, a finding that would be 450 supported by the hyperinsulinemia characteristic of this experimental animal model. Although exercise can 451 activate AMPK in the skeletal muscle, and subsequently up-regulate PPAR-y expression (Sasaki et al. 2014). 452 the aerobic interval protocol tested under our experimental conditions was not able to ameliorate high plasma 453 insulin levels of obese rats or show any effect on liver PAMPK expression. In contrast, liver AMPK activity 454 in obese Zucker rats has been described to be activated by different nutritional and pharmacological 455 strategies like diet supplementation with *Plantago ovata* or chronic treatment with polyphenols (Galisteo et 456 al. 2010; Rivera et al. 2009). On the other hand, it has been reported that activation of liver PPAR $\gamma$  improves 457 insulin sensitivity and NASH in human patients (Neuschwander-Tetri et al. 2003) and this correlates with the 458 significant increase of liver PPAR- $\gamma$  protein expression by our exercise protocol. Therefore PPAR- $\gamma$ 459 activation under our experimental conditions appeared to be independent of the AMPK pathway.

In conclusion, the AIT protocol used in this study is a feasible intervention strategy to improve plasma and hepatic biochemical parameters as well as hepatic histological alterations inherent to early stages of NAFLD in obese Zucker rats, although it caused the development of fibrosis. The training protocol was especially efficient to improve insulin sensitivity and decrease the hepatic lipid content, as well as ameliorating the oxidative stress conditions in this organ. Such effects run in parallel to an increased expression of liver PPAR-γ.

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#### 474 References

- 475 Aebi, H. 1984. Catalase in vitro. Methods Enzym. 105: 121–126. doi: 10.1016/S0076-6879(84)05016-3.
- 476 Al Rifai, M., Silverman, M.G., Nasir, K., Budoff, M.J., Blankstein, R., Szklo, M., et al. 2015. The 477 association of nonalcoholic fatty liver disease, obesity, and metabolic syndrome, with systemic 478 inflammation and subclinical atherosclerosis: the Multi-Ethnic Study of Atherosclerosis (MESA).
- 479 Atherosclerosis. 239(2): 629-633. doi: 10.1016/j.atherosclerosis.2015.02.011
- 480 Angelico, F., Del Ben, M., Conti, R., Francioso, S., Feole, K., Fiorello, S., et al. 2005. Insulin resistance, the 481 metabolic syndrome, and nonalcoholic fatty liver disease. J. Clin. Endocrinol. Metab. 90(3): 1578-1582. 482 doi: 10.1210/jc.2004-1024.
- 483 Astorino, T.A., Schubert, M.M., Palumbo, E., Stirling, D., and McMillan, D.W. 2013. Effect of two doses of
- 484 interval training on maximal fat oxidation in sedentary women. Med Sci Sports Exerc 45(10): 1878–1886. 485
- doi: 10.1249/MSS.0b013e3182936261.
- 486 Barker, A.R., Day, J., Smith, A., Bond, B., and Williams, C.A. 2014. The influence of 2 weeks of low-
- 487 volume high-intensity interval training on health outcomes in adolescent boys. J. Sports Sci. 32(8): 757-
- 488 765. doi: 10.1080/02640414.2013.853132...
- 489 Bermano, G., Nicol, F., Dyer, J., Sunde, R., Beckett, G., Arthur, J., et al. 1995. Tissue-specific regulation of
- 490 selenoenzyme gene expression during selenium deficiency in rats. Biochem. J. 311: 425-430. PMID: 491 7487877
- Brunt, E.M., and Tiniakos, D.G. 2010. Histopathology of nonalcoholic fatty liver disease. World J. 492 493 Gastroenterol. 16(42): 5286–5296. doi: 10.3748/wjg.v16.i42.5286.

- 494 Clemente, V.J.C., Martín, S., Porres, J., Fuentes, S., and Aranda, P. 2011. Efecto de la suplemenación de
- 495 vitamina en el rendimiento de una prueba incremental de consumo máximo de oxígeno en ratas wistar.
- 496 Arch. Med. Dep. XXVIII: 168–173.
- 497 Daussin, F.N., Rasseneur, L., Bouitbir, J., Charles, A.-L., Dufour, S.P., Geny, B., et al. 2012. Different
  498 timing of changes in mitochondrial functions following endurance training. Med. Sci. Sports Exerc.
  499 44(2): 217–224. doi: 10.1249/MSS.0b013e31822b0bd4.
- 500 Desai, S., Baker, S.S., Liu, W., Moya, D.A., Browne, R.W., Mastrandrea, L., et al. 2014. Paraoxonase 1 and
- 501 oxidative stress in paediatric non-alcoholic steatohepatitis. Liver. Int. 34(1): 110–117. doi:
  502 10.1111/liv.12308.
- 503 Donnelly, J.E., Blair, S.N., Jakicic, J.M., Manore, M.M., Rankin, J.W., and Smith, B.K. 2009. Appropriate
- 504 Physical Activity Intervention Strategies for Weight Loss and Prevention of Weight Regain for Adults.
- 505 Med. Sci. Sports Exerc. **41**(2): 459–471. doi: 10.1249/MSS.0b013e3181949333.
- 506 European Union Council. Directional on the protection of animals used for scientific purposes. 2010,
  507 October 20. Official Journal of the European Union.
- 508 http://ec.europa.eu/environment/chemicals/lab\_animals/legislation\_en.htm.
- 509 Folch, J., Lees, M., and Sloane Stanley, G.H. 1957. A simple method for the isolation and purification of 510 total lipids from animal tissues. J Biol Chem **226**(1): 497–509. PMID: 13428781
- Galisteo, M., Duarte, J., and Zarzuelo, A. 2008. Effects of dietary fibers on disturbances clustered in the
  metabolic syndrome. J. Nutr. Biochem. 19(2): 71–84. doi: 10.1016/j.jnutbio.2007.02.009.
- 513 Galisteo, M., Morón, R., Rivera, L., Romero, R., Anguera, A., and Zarzuelo, A. 2010. Plantago ovata husks-
- 514 supplemented diet ameliorates metabolic alterations in obese Zucker rats through activation of AMP-
- 515 activated protein kinase. Comparative study with other dietary fibers. Clin. Nutr. 29(2): 261–267. doi:
- 516 10.1016/j.clnu.2009.08.011.
- 517 Gonçalves, I.O., Passos, E., Rocha-Rodrigues, S., Diogo, C.V., Torrella, J.R., Rizo, D., et al. 2014. Physical
- 518 exercise prevents and mitigates non-alcoholic steatohepatitis-induced liver mitochondrial structural and
- 519 bioenergetics impairments. Mitochondrion **15**: 40–51. doi: 10.1016/j.mito.2014.03.012.
- 520 Grundy, S.M. 2005. Metabolic Syndrome Scientific Statement by the American Heart Association and the
- 521 National Heart, Lung, and Blood Institute. Arterioscler. Thromb. Vasc. Biol. 25(11): 2243–2244. doi:
- 522 10.1161/01.ATV.0000189155.75833.c7.

- 523 Guo, Z., Ran, Q., Roberts, L.J., Zhou, L., Richardson, A., Sharan, C., et al. 2008. Suppression of
- atherogenesis by overexpression of glutathione peroxidase-4 in apolipoprotein E-deficient mice. Free
  Radic. Biol. Med. 44(3): 343–352. doi: 10.1016/j.freeradbiomed.2007.09.009.
- Haram, P.M., Kemi, O.J., Lee, S.J., Bendheim, M., Al-Share, Q.Y., Waldum, H.L., et al. 2009. Aerobic
  interval training vs. continuous moderate exercise in the metabolic syndrome of rats artificially selected
  for low aerobic capacity. Cardiovasc. Res. 81(4): 723–732. doi: 10.1093/cvr/cvn332.
- 529 Haus, J.M., Solomon, T.P.J., Kelly, K.R., Fealy, C.E., Kullman, E.L., Scelsi, A.R., et al. 2013. Improved
- 530 hepatic lipid composition following short-term exercise in nonalcoholic fatty liver disease. J. Clin.
- 531 Endocrinol. Metab. **98**(7): E1181–E1188. doi: 10.1210/jc.2013-1229.
- 532 Hey-Mogensen, M., Jeppesen, J., Madsen, K., Kiens, B., and Franch, J. 2012. Obesity augments the age-
- 533 induced increase in mitochondrial capacity for H2O2 release in Zucker fatty rats. Acta Physiol. **204**(3):
- 534 354–361. doi: 10.1111/j.1748-1716.2011.02347.x.
- Huang, C.-C., Huang, W.-C., Yang, S.-C., Chan, C.-C., and Lin, W.-T. 2013. *Ganoderma tsugae*hepatoprotection against exhaustive exercise-induced liver injury in rats. Molecules. 18(2): 1741–1754.
  doi: 10.3390/molecules18021741.
- Imai, H., and Nakagawa, Y. 2003. Biological significance of phospholipid hydroperoxide glutathione
  peroxidase (PHGPx, GPx4) in mammalian cells. Free Radic. Biol. Med. 34(2): 145–169. PMID:
  12521597
- Jenkins, N.T., Witkowski, S., Spangenburg, E.E., and Hagberg, J.M. 2009. Effects of acute and chronic
  endurance exercise on intracellular nitric oxide in putative endothelial progenitor cells: role of NAPDH
  oxidase. Am. J. Physiol. Heart Circ. Physiol. 297(5): H1798–1805. doi: 10.1152/ajpheart.00347.2009.
- Jiang, H.K., Wang, Y.H., Sun, L., He, X., Zhao, M., Feng, Z.H., et al. 2014. Aerobic Interval Training
  Attenuates Mitochondrial Dysfunction in Rats Post-Myocardial Infarction: Roles of Mitochondrial
  Network Dynamics. Int. J. Mol. Sci. 15(4): 5304–5322. doi: 10.3390/ijms15045304.
- 547 Johnson, N.A., Sachinwalla, T., Walton, D.W., Smith, K., Armstrong, A., Thompson, M.W., et al. 2009.
- 548 Aerobic exercise training reduces hepatic and visceral lipids in obese individuals without weight loss.
- 549 Hepatology. **50**(4): 1105–1112. doi: 10.1002/hep.23129.

- 550 Jung, J.H., and Kim, H.S. 2013. The inhibitory effect of black soybean on hepatic cholesterol accumulation
- 551 in high cholesterol and high fat diet-induced non-alcoholic fatty liver disease. Food Chem. Toxicol. 60:
- 552 404–412. doi: 10.1016/j.fct.2013.07.048.
- Juraschek, S.P., Selvin, E., Miller, E.R., Brancati, F.L., and Young, J.H. 2013. Plasma lactate and diabetes
- risk in 8,045 participants of the Atherosclerosis Risk in Communities (ARIC) study. Ann Epidemiol.
- 555 **23**(12): 791–796. doi:10.1016/j.annepidem.2013.09.005
- 556 Kapravelou, G., Martínez, R., Andrade, A.M., Sánchez, C., Chaves, C.L., López-Jurado, M., et al. 2013.
- 557 Health promoting effects of Lupin (Lupinus albus var. multolupa) protein hydrolyzate and insoluble fiber
- in a diet-induced animal experimental model of hypercholesterolemia. Food Res. Int. **54**(2): 1471–1481.
- doi: 10.1016/j.foodres.2013.10.019.
- Kaur, J. 2014. A Comprehensive Review on Metabolic Syndrome. Cardiol. Res. Pract. 2014: e943162. doi:
  10.1155/2014/943162.
- Kibenge, M.T., and Chan, C.B. 2002. The effects of high-fat diet on exercise-induced changes in metabolic
  parameters in Zucker fa/fa rats. Metabolism 51(6): 708–715. doi: 10.1053/meta.2002.32727.
- 564 Kistler, K.D., Brunt, E.M., Clark, J.M., Diehl, A.M., Sallis, J.F., and Schwimmer, J.B. 2011. Physical
- 565 Activity Recommendations, Exercise Intensity, and Histological Severity of Nonalcoholic Fatty Liver

566 Disease. Am. J. Gastroenterol. **106**(3): 460–468. doi: 10.1038/ajg.2010.488.

- Kucera, O., and Cervinkova, Z. 2014. Experimental models of non-alcoholic fatty liver disease in rats.
  World. J. Gastroenterol. 20(26): 8364-8376. doi: 10.3748/wjg.v20.i26.8364.
- Larsen, S., Danielsen, J.H., Søndergaard, S.D., Søgaard, D., Vigelsoe, A., Dybboe, R., et al. 2015. The effect
- 570 of high-intensity training on mitochondrial fat oxidation in skeletal muscle and subcutaneous adipose
- 571 tissue. Scand. J. Med. Sci. Sports. **25**(1):e59-69. doi: 10.1111/sms.12252.
- Lawrence, R., Sunde, R., Schwartz, G., and Hoekstra, W. 1974. Glutathione peroxidase activity in rat lens
  and other tissues in relation to dietary selenium intake. Exp Eye Res. 18: 563–569. PMID: 4852169
- 574 Lee, S., Deldin, A.R., White, D., Kim, Y., Libman, I., Rivera-Vega, M., et al. 2013. Aerobic exercise but not
- 575 resistance exercise reduces intrahepatic lipid content and visceral fat and improves insulin sensitivity in
- 576 obese adolescent girls: a randomized controlled trial. Am. J. Physiol. Endocrinol. Metab. **305**(10):
- 577 E1222–E1229. doi: 10.1152/ajpendo.00285.2013.

- 578 Linden, M.A., Fletcher, J.A., Morris, E.M., Meers, G.M., Laughlin, M.H., Booth, F.W., et al. 2015. Treating
- 579 NAFLD in OLETF Rats with Vigorous-Intensity Interval Exercise Training. Med. Sci. Sports Exerc.
- 580 **47**(3): 556–567. doi: 10.1249/MSS.00000000000430.
- 581 Lochhead, P.A., Salt, I.P., Walker, K.S., Hardie, D.G., and Sutherland, C. 2000. 5-aminoimidazole-4-
- 582 carboxamide riboside mimics the effects of insulin on the expression of the 2 key gluconeogenic genes
- 583 PEPCK and glucose-6-phosphatase. Diabetes. **49**(6):896-903. PMID: 10866040
- Lowry, O.H., Rosebrough, N.J., Farr, A.L., and Randall, R.J. 1951. Protein Measurement with the Folin
  Phenol Reagent. J. Biol. Chem. 193(1): 265–275. PMID: 14907713
- Marchesini, G., Bugianesi, E., Forlani, G., Cerrelli, F., Lenzi, M., Manini, R., et al. 2003. Nonalcoholic fatty
  liver, steatohepatitis, and the metabolic syndrome. Hepatology 37(4): 917–923.
  doi: 10.1053/jhep.2003.50161.
- 589 Metz, L., Vermaelen, M., Lambert, K., Broca, C., Sirvent, P., Raynaud, E., et al. 2005. Endurance training
- increases lactate transport in male Zucker fa/fa rats. Biochem. Biophys. Res. Commun. 331(4): 1338–
  1345. doi: 10.1016/j.bbrc.2005.04.054.
- 592 Morris, E.M., Jackman, M.R., Johnson, G.C., Liu, T.-W., Lopez, J.L., Kearney, M.L., et al. 2014. Intrinsic
- solution aerobic capacity impacts susceptibility to acute high-fat diet-induced hepatic steatosis. Am. J. Physiol.

594 Endocrinol. Metab. **307**(4): E355–E364. doi: 10.1152/ajpendo.00093.2014.

- 595 Morris, R.T., Fine, D.M., Lees, S.J., Booth, F.W., Link, C.D., Ferrario, C.M., et al. 2007. Exercise training
- 596 prevents development of cardiac contractile dysfunction in hypertensive TG(mREN2)27 rats. J. Am. Soc.
- 597 Hypertens. 1(6): 393–399. doi: 10.1016/j.jash.2007.09.001.
- 598 Neuschwander-Tetri, B.A., Brunt, E.M., Wehmeier, K.R., Oliver, D., and Bacon, B.R. 2003. Improved
- 599 nonalcoholic steatohepatitis after 48 weeks of treatment with the PPAR-gamma ligand rosiglitazone.
- 600 Hepatology. **38**(4): 1008–1017. doi: 10.1053/jhep.2003.50420.
- 601 Nutrient Requirements of Laboratory Animals, Fourth Revised Edition, 1995.
- 602 Ogonovszky, H., Sasvári, M., Dosek, A., Berkes, I., Kaneko, T., Tahara, S., et al. 2005. The effects of
- 603 moderate, strenuous, and overtraining on oxidative stress markers and DNA repair in rat liver. Can. J.
- 604 Appl. Physiol. **30**(2): 186–195. doi: 10.1139/h05-114.

605	Polyzos, S.A., Kountouras, J., and Zavos, C. 2009. Nonalcoholic Fatty Liver Disease: The Pathogenetic
606	Roles of Insulin Resistance and Adipocytokines. Curr. Mol. Med. 9(3): 299-314. doi:
607	10.2174/156652409787847191.
608	Praphatsorn, P., Thong-Ngam, D., Kulaputana, O., and Klaikeaw, N. 2010. Effects of intense exercise on
609	biochemical and histological changes in rat liver and pancreas. Asian Biomedicine. 4(4): 619-625.
610	Prieto, P.G., Cancelas, J., Villanueva-Peñacarrillo, M.L., Valverde, I., and Malaisse, W.J. 2004. Plasma D-
611	glucose, D-fructose and insulin responses after oral administration of D-glucose, D-fructose and sucrose
612	to normal rats. J. Am. Coll. Nutr. 23(5): 414-419. doi: 10.1080/07315724.2004.10719386
613	Qi, Z., He, J., Zhang, Y., Shao, Y., and Ding, S. 2011. Exercise training attenuates oxidative stress and
614	decreases p53 protein content in skeletal muscle of type 2 diabetic Goto-Kakizaki rats. Free Radic. Biol.
615	Med. 50(7): 794–800. doi: 10.1016/j.freeradbiomed.2010.12.022.

- 616 Ramos, D., Martins, E.G., Viana-Gomes, D., Casimiro-Lopes, G., and Salerno, V.P. 2013. Biomarkers of
- 617 oxidative stress and tissue damage released by muscle and liver after a single bout of swimming exercise.
- 618 Appl. Physiol. Nutr. Metab. **38**(5): 507–511. doi: 10.1139/apnm-2012-0302.
- Reaven, G. 2004. The metabolic syndrome or the insulin resistance syndrome? Different names, different
  concepts, and different goals. Endocrinol. Metab. Clin. North Am. 33(2): 283–303. doi:
  10.1016/j.ecl.2004.03.002.
- 622 Reeves, P.G., Nielsen, F.H., and Fahey Jr, G.C. 1993. AIN-93 purified diets for laboratory rodents: final
- 623 report of the American Institute of Nutrition ad hoc writing committee on the reformulation of the AIN-
- 624 76A rodent diet. J Nutr **123**(11): 1939–1951. PMID: 8229312
- Ristow, M., Zarse, K., Oberbach, A., Klöting, N., Birringer, M., Kiehntopf, M., et al. 2009. Antioxidants
  prevent healthpromoting effects of physical exercise in humans. Proc Natl Acad Sci USA. 106(21): 8665–
- 627 8670. doi: 10.1073/pnas.0903485106.
- 628 Rivera, L., Morón, R., Zarzuelo, A., and Galisteo, M. 2009. Long-term resveratrol administration reduces
- metabolic disturbances and lowers blood pressure in obese Zucker rats. Biochem Pharmacol. 77(6):10531063. doi: 10.1016/j.bcp.2008.11.027.
- Rolo, A.P., Teodoro, J.S., and Palmeira, C.M. 2012. Role of oxidative stress in the pathogenesis of
  nonalcoholic steatohepatitis. Free Radic. Biol. Med. 52(1): 59–69. doi:
  10.1016/j.freeradbiomed.2011.10.003.

- 634 Rosety-Rodriguez, M., Rosety, I., Fornieles-Gonzalez, G., Diaz-Ordonez, A.J., Camacho, A., Rosety, M.A.,
- 635 et al. 2012. A 6-week training program increased muscle antioxidant system in elderly diabetic fatty rats.
- 636 Med. Sci. Monit. 18(9): BR346-BR350. doi: 10.12659/MSM.883343.
- 637 Sasaki, T., Nakata, R., Inoue, H., Shimizu, M., Inoue, J., and Sato, R. 2014. Role of AMPK and PPARy1 in 638 exercise-induced lipoprotein lipase in skeletal muscle. Am. J. Physiol. Endocrinol. Metab. 306(9):
- 639 E1085-1092. doi: 10.1152/ajpendo.00691.2013.
- 640 Shin, Y.-A., Lee, J.-H., Song, W., and Jun, T.-W. 2008. Exercise training improves the antioxidant enzyme
- 641 activity with no changes of telomere length. Mech. Ageing Dev. 129(5): 254-260. doi: 642 10.1016/j.mad.2008.01.001.
- 643 Sneddon, A.A., Wu, H.-C., Farquharson, A., Grant, I., Arthur, J.R., Rotondo, D., et al. 2003. Regulation of 644 selenoprotein GPx4 expression and activity in human endothelial cells by fatty acids, cytokines and 645 antioxidants, Atherosclerosis, 171(1): 57-65, doi: 10.1016/j.atherosclerosis.2003.08.008
- 646 Soltys, K., Dikdan, G., and Koneru, B. 2001. Oxidative stress in fatty livers of obese Zucker rats: Rapid 647 amelioration and improved tolerance to warm ischemia with tocopherol. Hepatology 34(1): 13–18. doi: 648 10.1053/jhep.2001.25452.
- 649 Souto, G., Donapetry, C., Calviño, J., and Adeva, M.M. 2011. Metabolic acidosis-induced insulin resistance
- 650 and cardiovascular risk. Metab Syndr Relat Disord. 9(4):247-253. doi: 10.1089/met.2010.0108.
- 651 Souza-Mello, V. 2015. Peroxisome proliferator-activated receptors as targets to treat non-alcoholic fatty liver 652 disease. World J Hepatol. 7(8):1012-1019. doi: 10.4254/wjh.v7.i8.1012.
- 653 Sullivan, S., Kirk, E.P., Mittendorfer, B., Patterson, B.W., and Klein, S. 2012. Randomized trial of exercise 654 effect on intrahepatic triglyceride content and lipid kinetics in nonalcoholic fatty liver disease. 655
- Hepatology. 55(6): 1738-1745. doi: 10.1002/hep.25548.

656

657 the progression from hepatic steatosis towards non-alcoholic steatohepatitis (NASH)? Liver Int. 658 34(7):e180-90. doi: 10.1111/liv.12523.

Tariq, Z., Green, C.J., and Hodson, L. 2014. Are oxidative stress mechanisms the common denominator in

- 659 Tjønna, A.E., Lee, S.J., Rognmo, Ø., Stølen, T.O., Bye, A., Haram, P.M., et al. 2008. Aerobic interval
- 660 training versus continuous moderate exercise as a treatment for the metabolic syndrome. A pilot study.
- 661 Circulation 118(4): 346–354. doi: 10.1161/CIRCULATIONAHA.108.772822.

662	Ukeda, H., Maeda, S., Ishii, T., and Sawamura, M. 1997. Spectrophotometric assay for superoxide dismutase
663	based on tetrazolium Salt 3'-{1-[(Phenylamino)-carbonyl]-3,4-tetrazolium}-bis(4-methoxy-6-
664	nitro)benzenesulfonic acid hydrate reduction by xanthine-xanthine oxidase. Anal. Biochem. 251(2): 206-
665	209. doi: 10.1006/abio.1997.2273.
666	Videla, L.A., Rodrigo, R., Orellana, M., Fernandez, V., Tapia, G., Quiñones, L., et al. 2004. Oxidative stress-
667	related parameters in the liver of non-alcoholic fatty liver disease patients. Clin. Sci. 106(3): 261-268. doi:
668	10.1042/CS20030285.
669	Wisløff, U., Helgerud, J., Kemi, O.J., and Ellingsen, Ø. 2001. Intensity-controlled treadmill running in rats:
670	VO <sub>2max</sub> and cardiac hypertrophy. Am. J. Physiol. Heart Circ. Physiol. 280(3): H1301-H1310. PMID:

- 671 11179077
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673	Table 1.	Details	of the	AIT	protocol.
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Week	Work Time	% VO <sub>2</sub> max
(5 days/week)	(min/day)	
1	45′	50%→3 min
		65%→4 min
2	50'	55%→3 min
		70%→4 min
3	50′	60%→3 min
		75%→4 min
4	55′	60%→3 min
		75%→4 min
5-8	60′	65%→3 min
		80%→4 min

Gene	Primer's 5	Primer's 5'-3' sequence						
GPX1	Forward	CACCGAAATGAATGATCTGC						
	Reverse	TGTATCTGCGCACTGGAACA						
GPX4	Forward	CCGGCTACAATGTCAGGTTT						
	Reverse	CGGCAGGTCCTTCTCTATCA						
GAPDH	Forward	ATGGGAAGCTGGTCATCAAC						
	Reverse	GTGGTTCACACCCATCACAA						

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677 GPX1: Glutathione peroxidase 1; GPX4: Glutathione peroxidase 4.

678	Table 3. Effect of AIT	protocol on aerobic of	apacity and	physical	performance of lean and	d obese Zucker rats.
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	Le	an	Obese						
	Sedentary	Exercise	Sedentary	Exercise	SEM	R <sup>2</sup>	Phenotype Effect	Exercise Effect	Phenotype × Exercise
Exercise Lactate (mmol/L)	6.8 <sup>A</sup>	6.2 <sup>A</sup>	15.7 <sup>C</sup>	10.4 <sup>B</sup>	0.79	0.7822	P < 0.0001	P = 0.0003	P = 0.0076
VO <sub>2</sub> max (mL/min/kg <sup>0.75</sup> )	18.7 <sup>A</sup>	19.9 <sup>A</sup>	17.7 <sup>A</sup>	19.5 <sup>A</sup>	1.01	0.1049	P = 0.3318	P = 0.1380	P = 0.7525
Running Time (min)	13.3 <sup>B</sup>	23.6 <sup>°</sup>	7.6 <sup>A</sup>	11.2 <sup>B</sup>	0.72	0.9204	P < 0.0001	P < 0.0001	P < 0.0001
Maximal Speed (cm/sc)	55.8 <sup>B</sup>	85.6 <sup>C</sup>	38.9 <sup>A</sup>	49.8 <sup>B</sup>	2.2	0.9161	P < 0.0001	P < 0.0001	P = 0.0002

 $\overline{A,B,C}$  Results are mean of 8-10 rats. Means within the same row with different superscripts differ significantly (P < 0.05). SEM, pooled standard error of the mean.

	Lean Obese								
	Sedentary	Exercise	Sedentary	Exercise	SEM	R <sup>2</sup>	Phenotype Effect	Exercise Effect	Phenotype × Exercise
Glucose (mg/dL)	177.6 <sup>A</sup>	238.3 <sup>A</sup>	400.2 <sup>B</sup>	341.9 <sup>B</sup>	30.5	0.5114	P<0.0001	P=0.9679	P=0.0607
Insulin (ng/mL)	0.062 <sup>A</sup>	0.126 <sup>A</sup>	0.685 <sup>B</sup>	0.558 <sup>B</sup>	0.081	0.6929	P < 0.0001	P = 0.6687	P = 0.1992
AUC (arbitrary units)	2417 <sup>A</sup>	2516 <sup>A</sup>	7054 <sup>B</sup>	2599 <sup>A</sup>	301	0.8470	P < 0.0001	P < 0.0001	P < 0.0001
T-Cholesterol (mg/dL)	74.9 <sup>A</sup>	74.2 <sup>A</sup>	209.2 <sup>C</sup>	167.5 <sup>B</sup>	6.1	0.9224	P<0.0001	P=0.0016	P=0.0021
LDL-Cholesterol (mg/dL)	4.9 <sup>A</sup>	3.4 <sup>A</sup>	19.9 <sup>c</sup>	11.8 <sup>B</sup>	1.27	0.7772	P<0.0001	P=0.0007	P=0.0148
HDL-Cholesterol (mg/dL)	27.5 <sup>A</sup>	29.4 <sup>A</sup>	51.0 <sup>B</sup>	45.3 <sup>B</sup>	3.88	0.4619	P<0.0001	P=0.6331	P=0.3395
Triglycerides (mg/dL)	100.2 <sup>A</sup>	26.5 <sup>A</sup>	279.3 <sup>B</sup>	246.2 <sup>B</sup>	29.9	0.6025	P<0.0001	P=0.0845	P=0.5051

Table 4. Effect of AIT protocol on plasma parameters of lean and obese Zucker rats.

 $^{A,B,C}$  Results are mean of 8-10 rats. Means within the same row with different superscripts differ significantly (P < 0.05). AUC, Area under the curve. SEM, pooled

standard error of the mean.

	Lea	an	Obe	ese					
	Sedentary	Francisa	Sadantary	Francisa	SFM	$\mathbf{P}^2$	Phenotype	Exercise	Phenotype ×
	Scuentary	Extrust	Stutintary	Excitise	SEM	ĸ	Effect	Effect	Exercise
Weight (g FW)	8.2 <sup>A</sup>	9.3 <sup>A</sup>	17.5 <sup>B</sup>	16.0 <sup>B</sup>	0.5	0.8738	P < 0.0001	P = 0.7508	P = 0.0255
Surface (cm <sup>2</sup> )	12.5 <sup>A</sup>	13.2 <sup>A</sup>	22.6 <sup>B</sup>	20.5 <sup>B</sup>	0.5	0.8450	P < 0.0001	P = 0.293	P = 0.048
Fat (g/100 g DM)	7.1 <sup>A</sup>	4.3 <sup>A</sup>	19.6 <sup>C</sup>	12.7 <sup>B</sup>	1.2	0.7412	P < 0.0001	P = 0.0005	P = 0.1040
Triglycerides (mg/g DM)	5.3 <sup>A</sup>	4.1 <sup>A</sup>	26.9 <sup>B</sup>	13.4 <sup>A</sup>	2.5	0.6139	P < 0.0001	P = 0.0096	P = 0.0204
Liver function plasma markers									
AST (U/L)	98.4 <sup>A</sup>	66.9 <sup>A</sup>	182.3 <sup>B</sup>	107.3 <sup>A</sup>	14.7	0.5226	P<0.0001	P=0.0010	P=0.1494
ALT (U/L)	25.7 <sup>A</sup>	31.8 <sup>A</sup>	61.0 <sup>B</sup>	59.7 <sup>B</sup>	4.7	0.5917	P<0.0001	P=0.6134	P=0.4287
ALP (U/L)	98.2 <sup>A</sup>	100.7 <sup>A</sup>	202.6 <sup>B</sup>	137.6 <sup>A</sup>	10.5	0.6823	P<0.0001	P=0.0055	P=0.0030
GGT (U/L)	0.10 <sup>A</sup>	0.70 <sup>A</sup>	13.9 <sup>B</sup>	9.3 <sup>B</sup>	1.56	0.6440	P<0.0001	P=0.2162	P=0.1098
Antioxidant enzymes									
Cu/Zn-SOD (Units/mg protein)	223.8 <sup>C</sup>	233.4 <sup>°</sup>	112.5 <sup>A</sup>	157.7 <sup>B</sup>	8.5	0.7987	P < 0.0001	P = 0.0047	P = 0.0494
Mn-SOD (Units/mg protein)	26.8 <sup>A</sup>	38.2 <sup>B</sup>	85.8 <sup>D</sup>	68.9 <sup>C</sup>	2.6	0.9019	P < 0.0001	P = 0.4839	P < 0.0001
Catalase (µmol H <sub>2</sub> O <sub>2</sub> /min/mg protein)	487.1 <sup>AB</sup>	551.8 <sup>B</sup>	503.9 <sup>AB</sup>	461.7 <sup>A</sup>	19.4	0.2803	P = 0.0630	P = 0.4260	P = 0.0053
GPX (nmol NADPH/min/mg protein)	9.2 <sup>B</sup>	7.6 <sup>AB</sup>	6.4 <sup>A</sup>	13.0 <sup>C</sup>	0.5	0.7040	P=0.03	P< 0.0001	P< 0.0001

**Table 5.** Effect of AIT protocol on liver weight, composition, and function of lean and obese Zucker rats.

 $^{A,B,C,D}$  Results are mean of 8-10 rats. Means within the same row with different superscripts differ significantly (P < 0.05). FW, fresh weight, DM, dry matter, AST, aspartate aminotransferase, ALT, alanine transaminase, ALP, Alkaline Phosphatase, GGT, Gamma-glutamyl transpeptidase, GPX, Glutathione peroxidase. SEM, pooled standard error of the mean.

	Microvescicular steatosis	Fatty droplets	Multinucleic cells	Lipogranulomas	Portal inflammation	Necrosis	Fibrosis
LS		_	-	_	_/+	-	_
LE	-	-	_	+	+	_/+	-
os	++++	++++	-	+++	+++	_	-
OE	+++	+++	++	++/+++	++/+++	++	++

Table 6. Effect of AIT protocol on liver histology of lean and obese Zucker rats.

LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing a protocol of aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing a protocol of aerobic interval exercise. Grading score of the histological alterations: -, non existent; +, mild; ++, mild/moderate; ++++, moderate; ++++, abundant; +++++, severe.

Fig. 1. Effect of AIT protocol on food intake and body weight of lean and obese Zucker rats. (A) Weekly food intake (grams Dry Matter/day). (B) Weekly body weight (grams). Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. Values are means ± SEM depicted by vertical bars (n = 8-10).

**Fig. 2.** Effect of AIT protocol on blood glucose levels of lean and obese Zucker rats prior to or at different time points after oral glucose overload. Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. Values are means  $\pm$  SEM depicted by vertical bars (n = 8-10). The following notation is used to express significant differences (P < 0.05) between groups pointed out by Dunnet's t-test: a, OS *vs* LS, b, OE *vs* LS, c, LE *vs* LS.

**Fig. 3.** Effect of AIT protocol on liver morphology of lean and obese Zucker rats. Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. Photographs are representative of livers of 8-10 different rats for each experimental group.

**Fig. 4.** Effect of AIT protocol on GPX1 and GPX4 mRNA levels in liver of lean and obese Zucker rats. Hepatic GPX1 and GPX4 mRNA relative expression. Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. GPX1 and GPX 4 levels are expressed as percentage of the mean value obtained from liver of the LS group (100%). Results represented in the graphs are means  $\pm$  SEM depicted by vertical bars (n = 10). Means within the same gene expression without a common letter differ, P < 0.05. Image of gel used for determination of GPX1 and GPX4 expression by semiquantitative RT-PCR is representative of RNA samples of 8-10 rats for each experimental group; all samples were derived at the same time and processed in parallel. The samples were analyzed for expression of GAPDH, GPX1, and GPX4. GAPDH expression was not different among the experimental groups.

**Fig. 5.** Effect of AIT protocol on liver histology of lean and obese Zucker rats. (A) Histological view of control LS liver HE stain, (B) Histological view of LE liver HE stain, (C) Histological view of OS liver HE stain with clear signs of microvesicular steatosis (mv) and fatty droplet accumulation (fd), (D) Histological view of OE liver HE stain with diminished signs of microvesicular steatosis (mv) and fatty droplet accumulation (fd), (E) Histological view of control LS liver MT stain, (F) Histological view of LE liver MT 33

stain, (G) Histological view of OS liver MT stain, (H) Histological view of OE liver MT stain with signs of fibrosis (fb). Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. Photographs are representative of livers of 8-10 different rats for each experimental group.

**Fig. 6.** Effect of AIT protocol on AMPKα/PAMPKα and PPARγ protein expression in the liver of lean and obese Zucker rats. Western blot analysis of (A) AMPKα/PAMPKα and (B) PPARγ expression. Groups: LS, Lean (fa/+) sedentary rats, OS, Obese (fa/fa) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OE, Obese (fa/fa) rats performing aerobic interval exercise. Immunoblots are representative of liver homogenates from eight different rats for each experimental group; two samples of each experimental group were loaded per gel and processed in parallel. The amount of sample loaded per lane was 100 µg of protein for AMPKα/PAMPKα and 80 µg of protein for PPARγ. Levels of PAMPK were normalized to the total AMPK. Levels of PPARγ were normalized to ponceau reagent. Densitometric analysis values represented in the graphs are means ± SEM depicted by vertical bars (n = 8). Means without a common letter differ, P < 0.05.





1587x1190mm (96 x 96 DPI)



Fig. 2. Effect of AIT protocol on blood glucose levels of lean and obese Zucker rats prior to or at different time points after oral glucose overload. Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. Values are means  $\pm$  SEM depicted by vertical bars (n = 8-10). The following notation is used to express significant differences (P < 0.05) between groups pointed out by Dunnet's t-test: A, OS vs LS, B, OE vs LS, C, LE vs LS.

Figure 3



Fig. 3. Effect of AIT protocol on liver morphology of lean and obese Zucker rats. Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. Photographs are representative of livers of 8-10 different rats for each experimental group.



#### **Figure 4**

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Fig. 5. Effect of AIT protocol on liver histology of lean and obese Zucker rats. (A) Histological view of control LS liver HE stain, (B) Histological view of LE liver HE stain, (C) Histological view of OS liver HE stain with clear signs of microvesicular steatosis (mv) and fatty droplet accumulation (fd), (D) Histological view of OE liver HE stain with diminished signs of microvesicular steatosis (mv) and fatty droplet accumulation (fd), (D) Histological view of OE liver HE stain with diminished signs of microvesicular steatosis (mv) and fatty droplet accumulation (fd), (E) Histological view of control LS liver MT stain, (F) Histological view of LE liver MT stain, (G) Histological view of OS liver MT stain, (H) Histological view of OE liver MT stain with signs of fibrosis (fb). Groups: LS, Lean (fa/+) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OS, Obese (fa/fa) sedentary rats, OE, Obese (fa/fa) rats performing aerobic interval exercise. Photographs are representative of livers of 8-10 different rats for each experimental group.
254x190mm (96 x 96 DPI)



Figure 6

Fig. 6. Effect of AIT protocol on AMPKa/PAMPKa and PPARγ protein expression in the liver of lean and obese Zucker rats. Western blot analysis of (A) AMPKa/PAMPKa and (B) PPARγ expression. Groups: LS, Lean (fa/+) sedentary rats, OS, Obese (fa/fa) sedentary rats, LE, Lean (fa/+) rats performing aerobic interval exercise, OE, Obese (fa/fa) rats performing aerobic interval exercise. Immunoblots are representative of liver homogenates from eight different rats for each experimental group; two samples of each experimental group were loaded per gel and processed in parallel. The amount of sample loaded per lane was 100 μg of protein for AMPKa/PAMPKa and 80 μg of protein for PPARγ. Levels of PAMPK were normalized to the total AMPK. Levels of PPARγ were normalized to ponceau reagent. Densitometric analysis values represented in the graphs are means ± SEM depicted by vertical bars (n = 8). Means without a common letter differ, P < 0.05.</li>