TV watching modifies obesity risk linked to the 27Glu polymorphism of ADRB2 gene in girls

Running title: TV and the 27Glu allele of ADRB2 gene in obese girls

Original article

*Ochoa MC, *Moreno-Aliaga MJ, [#]Martínez-González MA, *Martínez JA, ^{*}Marti A† and GENOI Members‡

* Department of Physiology and Nutrition,

Department of Preventive Medicine and Public Health,

University of Navarra, 31080-Pamplona (Spain).

† Corresponding author

Amelia Marti, PhD

Dept. of Physiology and Nutrition

C/Irunlarrea s/n

University of Navarra

31080-Pamplona (Spain)

amarti@unav.es

Phone 34-948425600 ext 6244.

‡ Other members of GENOI are: Azcona C, Chueca M, Oyarzabal M, Patiño A, Pelach R.

Objective

A matched case-control study was conducted in a Spanish children and adolescent population (5-18 years old), to assess the interaction between the Gln27Glu polymorphism of the ADRB2 and television (TV) watching on obesity risk.

Patients

Obese (n=165) and controls (n=165) matched by sex and age were recruited according to Spanish reference data.

Results

Using conditional logistic regression, we calculated the obesity risk linked to the polymorphism. A statistically significant association was found for 27Glu carriers allele girls (OR= 1.95; 95% CI= 1.02-3.70), but no association was apparent among boys. In the fully adjusted model, OR for obesity linked to the genotype Glu27Glu in the female population rose to 4.84 (95% CI=1.37-17.10).

Moreover, we found a significant negative interaction between hours of TV watching and the Gln27Glu polymorphism for obesity risk in girls. Surprisingly, among 27Glu carrier subjects, even girls with a low level of TV watching (<12.5 h/week) had a high obesity risk OR= 4.60 (95% CI= 1.01-20.02), which was not very different to the OR values for sedentary girls carrying the 27 Glu allele (TV watching more than 12.5 h/week, OR=6.05, 95% CI = 1.31-27.71).

Conclusion

A higher risk of obesity was found for girls carrying the 27Glu allele of the ADRB2 gene even when they spend less than 12.5h/week watching TV. In addition, our results suggest that the effect of sedentary lifestyle on obesity risk may depend on the genotype of the subject.

Keywords: ADRB2, Gln27Glu polymorphism, obesity risk, TV, children.

INTRODUCTION

There is some evidence that mutations of the ADRB2 gene may alter the lipolytic function contributing to fat accumulation. In adults, the Gln27Glu polymorphism of the ADRB2 gene has been associated with increased visceral fat (1-4) and *in vitro* studies indicate that this polymorphism seems to cause a resistance towards agonist-mediated downregulation (5). In an intervention study conducted by our group, we found that obese women homozygous for the 27Glu allele of the ADRB2 gene appear to have impaired exercise-stimulated lipolysis (1, 4). Moreover, in a case-control study, we showed that adult carriers of the 27Glu allele of the ADRB2 gene had higher BMI than non-carriers even when they were active during their leisure time (6).

Physical activity in children and adolescents seems to be declining, while their time spent in sedentary activities such as television (TV) watching is increasing (7). Time spent watching TV replaces more vigorous activities and exposes children to follow unhealthy habits about food intake so it is a risk factor for obesity (8, 9). This may explain why television viewing is a significant predictor of Body Mass Index (BMI) and overweight in childhood (10) and has been validated as a good index of sedentary behavior (11).

In this context, a matched case-control study was conducted to assess the interaction between the Gln27Glu polymorphism of the ADRB2 and TV viewing (as a proxy for sedentary lifestyles) in relation with obesity in a group of Spanish children and adolescents.

PATIENTS AND METHODS

The study population, recruited from the Pediatric Departments at the Virgen del Camino Hospital, University Hospital and some Primary Care Centers, comprised 330 Spanish children and adolescent. Cases (n=165) were subjects aged 5-18, with body mass index (BMI above the 97th percentile of the Spanish BMI reference data for age and gender (12)). Should we have used the International Obesity TaskForce (IOTF) standards, only 71% of Spanish obese children would have been classified as such (13, 14). Exclusion criteria were exposure to hormonal treatment or development of secondary obesity due to endocrinopathy or serious intercurrent illness. Controls (n=165) were healthy subjects with a BMI below the 97th percentile of the same reference, matched with cases by sex and age (\pm 6 months). They were recruited when went to the Primary Care Centers for routine medical examination or to be vaccinated. The study was approved by the Ethics Committee of the University of Navarra and all parents and subjects over 12 years old provided written informed consent.

Anthropometric measurements were all collected in a medical environment by standard procedures. All the skinfolds were measured using a Holtain[©] skinfold caliper. Percentage of body fat was determined by bioelectrical impedance (TBF-300A Body Composition Analyzer/Scale, TANITA[©], Tokyo, Japan). Blood samples were taken for the extraction of genomic DNA from leukocytes and the polymorphism was analyzed by PCR-RFLP (3).

Trained researchers conducted face-to-face interviews with participants and their parents with standardized procedures. A previously validated physical activity questionnaire was used (15). The questionnaire included 17 activities (sports and games) and nine response categories for frequency ranged from "never/almost never" to "six hours or more time per day". A multiple of resting metabolic rate (MET score) was

assigned to each activity and an activity metabolic equivalent index (METs-h/week) was computed (16-18). This index represents the physical activity during the week for each participant. In addition, sedentary lifestyle was assessed through the number of hours spent watching TV or videos, during school days and on week-ends.

Statistical analyses

Descriptive values are given as mean and standard error of the mean (SEM). Univariate statistical analysis to compare the characteristics of each genotype group was performed using ANOVA and the Chi square test (for frequencies). When the data distribution was non-parametric, Kruskall-Wallis test was used. The p-value considered significant was <0.050 and between 0.050 and 0.100 was considered borderline significant.

Multivariate conditional logistic regression was used to estimate *odds ratios* (ORs) and to adjust for potential confounding factors. The results were adjusted for sex and age following the matched design. Four statistical models were built by introducing different variables: 1- the Gln27Glu polymorphism, 2- hours of TV watching, 3- physical activity and 4- a interaction product term (hours of TV watching x the Gln27Glu polymorphism). The same models were calculated to compare the homozygous genotype for the 27Glu allele (Glu27Glu) with the rest of the subjects (Gln27Gln and Glu27Gln carriers). The statistical analyses were done with SPSS (Statistical Package for the Social Sciences, Chicago, USA) 10.0.6 for Windows.

RESULTS

As expected, there was a significant difference in BMI between the obese subjects (27.8 $[0.30] \text{ kg/m}^2$) and the controls (18.8 $[0.20] \text{ kg/m}^2$; p<0.001). The frequencies of 27Glu allele of the ADRB2 gene were 0.439 in cases and 0.430 in controls, without

statistically significant differences between cases and controls either in boys or girls (Table 1). The genotype frequencies for these groups fulfilled the Hardy-Weinberg equilibrium (for girls, p=0.250; for boys, p=0.990).

Anthropometric and lifestyle data were similar in boys and girls, carriers or non carriers of the Gln27Glu polymorphism of the ADRB2 gene (Table 2). Using logistic regression analysis, we found that the Glu27Glu genotype of the ADRB2 gene was not associated with obesity in boys in the fully adjusted model (OR= 0.65; 95%CI= 0.19-2.19, Table 4). However, female subjects carriers of the 27Glu allele (25 homozygous: Glu27Glu and 93 heterozygous: Glu27Gln) had a significantly higher risk of obesity (OR=1.95; 95%CI=1.02-3.70) in the completely adjusted model (Table 3). When the ORs for obesity in girls were calculated for the presence of the 27Glu allele in homozygosis, the values were higher (OR=2.83; 95% CI=1.12-7.19). In the fully adjusted model, when physical activity (METs-h/week) and the usual time spent in watching TV were also taken into account and introduced in the model, the adjusted OR for obesity linked to the genotype Glu27Glu in the female population rose to 4.84 (95%CI=1.37-17.10).

An effect modification (interaction) for obesity risk linked to the Gln27Glu polymorphism of the ADRB2 gene was observed with hours of TV watching (p=0.023) after adjustment for physical activity (Fig. 1). In order to calculate different ORs for sedentary and non-sedentary subjects, we split the female population using the median of hours spent watching TV (12.5 hours per week, Fig. 2). In homozygous subjects for the wild-type genotype, the risk of obesity increased 7 times for sedentary (i.e. they spent >12.5 h/week watching TV, OR= 7.27, 95%CI=1.42-37.13) as compared to non-sedentary girls (<12.5 h/week of TV watching). Surprisingly, among 27Glu carrier subjects, even girls with a low level of TV watching (<12.5 h/week) had a high obesity

risk OR=4.60 (95% CI= 1.01-20.02), which was not very different to the OR values for sedentary girls (TV watching more than 12.5 h/week, OR=6.05, 95% CI = 1.31-27.71).

DISCUSSION

Our results show that the Gln27Glu and Glu27Glu genotypes of the ADRB2 gene are associated with obesity in girls, but they do not appear to be related with obesity in males. A gender-dependent effect of the ADRB2 polymorphism has been previously reported in the literature (3, 6, 19, 20). This gender-dependent effect may be partially explained because the regulation of lipolysis differs markedly between men and women and may also be influenced by the ADRB2 polymorphism (2, 6).

A gene-physical activity interaction has been seen in different studies on energy expenditure regulatory genes (UCP3, ADRB3, ADRA2B, ADRB2), suggesting that the protective effect of physical activity for obesity development may depend on the individual genotype (21). For this reason, we analyzed the interaction between sedentary lifestyle and the Gln27Glu polymorphism of the ADRB2 using TV viewing as an index of a sedentary lifestyle for children and adolescents (11). In homozygous girls for the wild-type genotype, the relative risk of obesity proved to be directly related to the usual time spent in TV watching. However, carriers of the 27Glu allele of the ADRB2 gene had a high obesity risk independent of the time spent watching TV. Thus, a reduction in the usual time spent in TV watching may not be equally effective at preventing or treating obesity in these girls. These data are consistent with previous studies performed by our group and others suggesting that the Gln27Glu variant of the ADRB2 gene may decrease energy expenditure during physical activity, therefore leading to a resistance to weight loss in subjects with high to moderate levels of physical activity (1, 6, 22, 23). As our study is relatively small in size, it is not possible

8

to definitively rule out a type 1 error, although the matched design meant that less adjustment of variables is necessary and this increases the power of the study.

This is the first report studying the effect of the interaction between the Gln27Glu polymorphism of the ADRB2 gene and TV watching on obesity risk in a children and adolescent population, to our knowledge. The results suggest that carriers of the 27Glu allele of the ADRB2 gene may not benefit from a reduction in sedentary behaviors as much as the subjects who do not carry the polymorphism. Obesity is one of the most common chronic disorders in children and adolescents, so providing effective interventions is mandatory (24). However, more studies using bigger samples are needed to confirm these results. In this context, it is important to take into consideration these findings and to continue conducting research in order to design programs for keeping children physically active in order to prevent obesity.

Acknowledgments

The authors are grateful for the participation of subjects and their families and the collaboration of the medical teams from Virgen del Camino Hospital, University Clinic and Health Center of Barañain. This work was supported by grants from the Navarra Government (Departamentos de Salud y Educación) and Línea Especial – Nutrición y Obesidad (University of Navarra). We are grateful for the technical assistance of Ana Lorente.

References

1. Macho-Azcarate T, Marti A, Gonzalez A, Martinez JA, Ibanez J. Gln27Glu polymorphism in the beta2 adrenergic receptor gene and lipid metabolism during exercise in obese women. Int J Obes Relat Metab Disord 2002; 26: 1434-41.

2. Lange LA, Norris JM, Langefeld CD, *et al.* Association of adipose tissue deposition and beta-2 adrenergic receptor variants: the IRAS family study. Int J Obes Relat Metab Disord 2005; 29: 449-57.

3. Corbalan MS, Marti A, Forga L, Martinez-Gonzalez MA, Martinez JA. Beta(2)adrenergic receptor mutation and abdominal obesity risk: effect modification by gender and HDL-cholesterol. Eur J Nutr 2002; 41: 114-8.

4. Ochoa MC, Marti A, Martinez JA. [Obesity studies in candidate genes]. Med Clin (Barc) 2004; 122: 542-51.

5. Leineweber K. Beta-adrenergic receptor polymorphism in human cardiovascular disease. Ann Med 2004; 36 Suppl 1: 64-9.

6. Corbalan MS, Marti A, Forga L, Martinez-Gonzalez MA, Martinez JA. The 27Glu polymorphism of the beta2-adrenergic receptor gene interacts with physical activity influencing obesity risk among female subjects. Clin Genet 2002; 61: 305-7.

7. Fox KR. Childhood obesity and the role of physical activity. J R Soc Health 2004; 124: 34-9.

8. Caroli M, Argentieri L, Cardone M, Masi A. Role of television in childhood obesity prevention. Int J Obes Relat Metab Disord 2004; 28 Suppl 3: S104-8.

9. Hernandez B, Gortmaker SL, Colditz GA, *et al.* Association of obesity with physical activity, television programs and other forms of video viewing among children in Mexico city. Int J Obes Relat Metab Disord 1999; 23: 845-54.

10. Hancox RJ, Poulton R. Watching television is associated with childhood obesity: but is it clinically important? Int J Obes (Lond) 2006; 30: 171-5.

11. Patrick K, Norman GJ, Calfas KJ, *et al.* Diet, physical activity, and sedentary behaviors as risk factors for overweight in adolescence. Arch Pediatr Adolesc Med 2004; 158: 385-90.

12. Ochoa MC, Marti A, Azcona C, *et al.* Gene-gene interaction between PPAR gamma 2 and ADR beta 3 increases obesity risk in children and adolescents. Int J Obes Relat Metab Disord 2004; 28 Suppl 3: S37-41.

13. Cole TJ, Bellizzi MC, Flegal KM, Dietz WH. Establishing a standard definition for child overweight and obesity worldwide: international survey. BMJ 2000; 320: 1240-3.

14. Zimmermann MB, Gubeli C, Puntener C, Molinari L. Detection of overweight and obesity in a national sample of 6-12-y-old Swiss children: accuracy and validity of

15. Martinez-Gonzalez MA, Varo JJ, Santos JL, *et al.* Prevalence of physical activity during leisure time in the European Union. Med Sci Sports Exerc 2001; 33: 1142-6.

16. Ainsworth BE, Haskell WL, Leon AS, *et al.* Compendium of physical activities: classification of energy costs of human physical activities. Med Sci Sports Exerc 1993; 25: 71-80.

17. Harrell JS, McMurray RG, Baggett CD, *et al.* Energy costs of physical activities in children and adolescents. Med Sci Sports Exerc 2005; 37: 329-36.

18. Spadano JL, Must A, Bandini LG, Dallal GE, Dietz WH. Energy cost of physical activities in 12-y-old girls: MET values and the influence of body weight. Int J Obes Relat Metab Disord 2003; 27: 1528-33.

19. Hellstrom L, Large V, Reynisdottir S, Wahrenberg H, Arner P. The different effects of a Gln27Glu beta 2-adrenoceptor gene polymorphism on obesity in males and in females. J Intern Med 1999; 245: 253-9.

20. Gonzalez Sanchez JL, Proenza AM, Martinez Larrad MT, *et al.* The glutamine 27 glutamic acid polymorphism of the beta2-adrenoceptor gene is associated with abdominal obesity and greater risk of impaired glucose tolerance in men but not in women: a population-based study in Spain. Clin Endocrinol (Oxf) 2003; 59: 476-81.

21. Phares DA, Halverstadt AA, Shuldiner AR, *et al.* Association between body fat response to exercise training and multilocus ADR genotypes. Obes Res 2004; 12: 807-15.

22. Moore GE, Shuldiner AR, Zmuda JM, *et al.* Obesity gene variant and elite endurance performance. Metabolism 2001; 50: 1391-2.

23. Meirhaeghe A, Helbecque N, Cottel D, Amouyel P. Beta2-adrenoceptor gene polymorphism, body weight, and physical activity. Lancet 1999; 353: 896.

24. Baur LA. Childhood obesity: practically invisible. Int J Obes Relat Metab Disord 2005; 29: 351-2.

Figure 1. Change in the magnitude of the OR for obesity risk in girls depending on hours of TV watching according to the presence of the Glu27 allele of the ADRB2 gene (\blacktriangle =carriers, \Box = non-carriers).

Figure 2. Odds Ratio (OR) for obesity risk for groups of girls who watch TV more than 12.5h/week or less according to genotype (presence or absence of the 27Glu allele). ORs are adjusted for physical activity.





Giris	UK	95% CI	r
Gln27Glu genotype	7.92	1.89-33.19	0.005
Physical activity (METs-h/week)	0.92	0.88-0.96	<0.001
TV watching (h/week)	1.14	1.05-1.24	0.003
Interaction term (product = Gln27Glu X TV watching)	0.92	0.85-0.99	0.023

Figure 2



	А	ll subjects			Boys			Girls	
otupo	Obese	Control	n*	Obese	Control	n *	Obese	Control	n*
otype	(n=165)	(n=165)	p.	(n=82)	(n=82)	h.	(n=83)	(n=83)	þ.
27Gln	51	49		29	23		22	26	
27Glu	83	90		40	40		43	50	
27Glu	31	26	0.683	13	19	0.403	18	7	0.058
elic frequency									
ln	0.561	0.570		0.597	0.524		0.524	0.614	
lu	0.439	0.430	0.814	0.403	0.476	0.394	0.476	0.386	0.096

Table 1 Prevalence of the Gln27Glu polymorphism of the ADRB2 gene in a populationof Spanish children and adolescents.

*p-value by Chi-square test

Boys $(n=164)$	Gln27Gln	Gln27Glu	Glu27Glu	n [†]
D0y3 (II=10+)	(n=52)	(n=80)	(n=32)	Р
Age (years)	12.3 (0.30)	11.6 (0.27)	12.0 (0.46)	0.261
BMI (kg/m ²)	24.8 (0.85)	23.0 (0.66)	22.4 (0.99)	0.146
BMI z-score	2.56 (0.35)	1.98 (0.26)	1.59 (0.38)	0.189
% Body fat	24.7 (1.69)	24.6 (1.50)	20.4 (1.95)	0.332
Triceps skinfold (mm)	20.0 (1.17)	19.8 (0.94)	19.4 (1.37)	0.851
Subscapular skinfold (mm)	20.7 (1.96)	17.0 (1.21)	15.1 (1.64)	0.196
Height/Waist perimeter (m/cm)	0.51 (0.01)	0.51(0.01)	0.50 (0.02)	0.854
METs-h/week	34.9 (2.91)	34.4 (2.70)	34.4 (3.18)	0.722
TV watching (h/week)	12.1 (1.17)	14.2 (0.99)	15.6 (1.79)	0.189
	Gln27Gln	Gln27Glu	Glu27Glu	÷
Giris (n=166)	(n=48)	(n=93)	(n=25)	p '
Age (years)	11.8 (0.48)	11.1 (0.28)	10.8 (0.60)	0.293
BMI (kg/m ²)	23.6 (0.98)	22.5 (0.51)	24.6 (1.34)	0.336
BMI z-score	1.87 (0.34)	1.64 (0.19)	2.56 (0.46)	0.182
% Body fat	30.9 (1.46)	28.9 (1.12)	33.7 (1.94)	0.120
Triceps skinfold (mm)	20.7 (1.12)	21.3 (0.73)	22.9 (1.18)	0.452
Subscapular skinfold (mm)	19.5 (1.55)	18.5 (0.98)	21.3 (1.74)	0.329
Height/Waist perimeter (m/cm)	0.50 (0.02)	0.49 (0.01)	0.51(0.02)	0.728
METs-h/week	22.4 (1.97)	21.1 (1.42)	20.1 (2.81)	0.592
TV watching (h/week)	16.9 (1.36)	13.3 (0.82)	14.3 (1.72)	0.072

Table 2 Anthropometric and lifestyle parameters in boys and girls according to thepresence or absence of the Gln27Glu polymorphism of the ADRB2 gene.

Mean (SEM). [†]p-value by Kruskall-Wallis or ANOVA test.

 Table 3 OR of obesity (95% CI) associated with the polymorphism Gln27Glu of the

 ADRB2 gene in girls. The reference categories were 27Gln carriers in case of

 Glu27Glu genotype and Gln27Gln carriers in case of Gln27Glu plus Glu27Glu

 genotypes. Estimates are adjusted for the other variables shown in the table for

 in each statistical model.

Girls	OR	95%CI	Р				
Gln27Glu and Glu27Glu genotypes							
	Model 1						
Gln27Glu and Glu27Glu	1.53	0.94-2.47	0.084				
	Model 2						
Gln27Glu and Glu27Glu	1.68	1.00-2.84	0.051				
TV watching (h/week)	1.05	1.01-1.09	0.023				
	Model 3						
Gln27Glu and Glu27Glu	1.95	1.02-3.70	0.042				
Physical activity (METs-h/week)	0.93	0.90-0.97	<0.001				
TV watching (h/week)	1.06	1.01-1.11	0.026				
Glu27Glu genotype							
	Model 1						
Glu27Glu genotype	2.83	1.12-7.19	0.028				
	Model 2						
Glu27Glu genotype	3.58	1.32-9.70	0.012				
TV watching (h/week)	1.05	1.01-1.09	0.019				
Model 3							
Glu27Glu genotype	4.84	1.37-17.10	0.014				
Physical activity (METs-h/week)	0.93	0.90-0.97	<0.001				
TV watching (h/week)	1.06	1.01-1.11	0.024				

Table 4 OR of obesity (95% CI) associated with the polymorphism Gln27Glu of theADRB2 gene in boys. The reference categories were 27Gln carriers in case ofGlu27Glu genotype and Gln27Gln carriers in case of Gln27Glu and Glu27Glugenotypes. Estimates are adjusted for the other variables shown in the table forin each statistical model.

Boys	OR	95%CI	Р				
Gln27Glu and Glu27Glu genotypes							
	Model 1						
Gln27Glu and Glu27Glu	0.71	0.44-1.14	0.162				
Model 2							
Gln27Glu and Glu27Glu	0.74	0.45-1.20	0.229				
TV watching (h/week)	1.00	0.96-1.04	0.951				
	Model 3						
Gln27Glu and Glu27Glu	0.74	0.39-1.38	0.344				
Physical activity (METs-h/week)	0.93	0.89-0.96	<0.001				
TV watching (h/week)	0.99	0.94-1.05	0.972				
Glu27Glu genotype							
Model 1							
Glu27Glu genotype	0.57	0.24-1.36	0.207				
Model 2							
Glu27Glu genotype	0.72	0.29-1.81	0.495				
TV watching (h/week)	1.00	0.96-1.04	0.988				
Model 3							
Glu27Glu genotype	0.65	0.19-2.19	0.494				
Physical activity (METs-h/week)	0.93	0.90-0.96	<0.001				
TV watching (h/week)	0.99	0.94-1.05	0.969				