

# Environmental PPAR $\gamma$ Agonists: What are they doing to our metabolic and bone health?

Jennifer Schlezinger, PhD

Associate Professor of Environmental Health



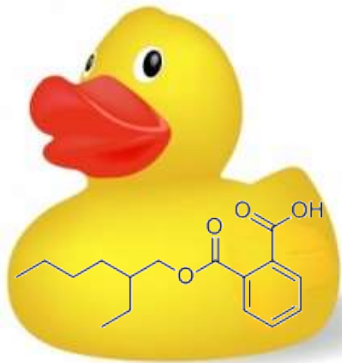
**Boston University**  
Superfund Research Program



**Boston University** School of Public Health

# Environmental PPAR $\gamma$ Agonists?

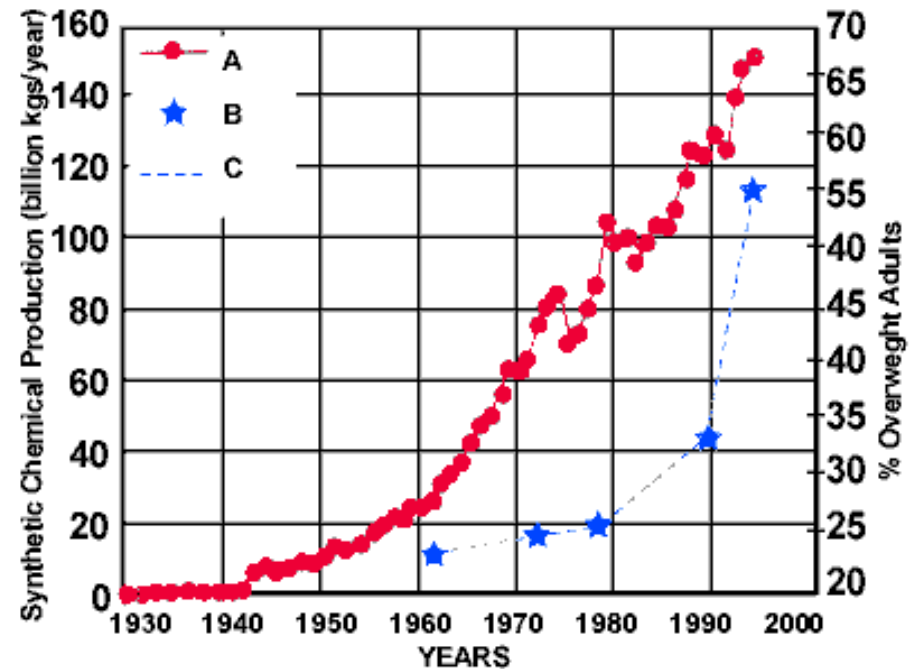
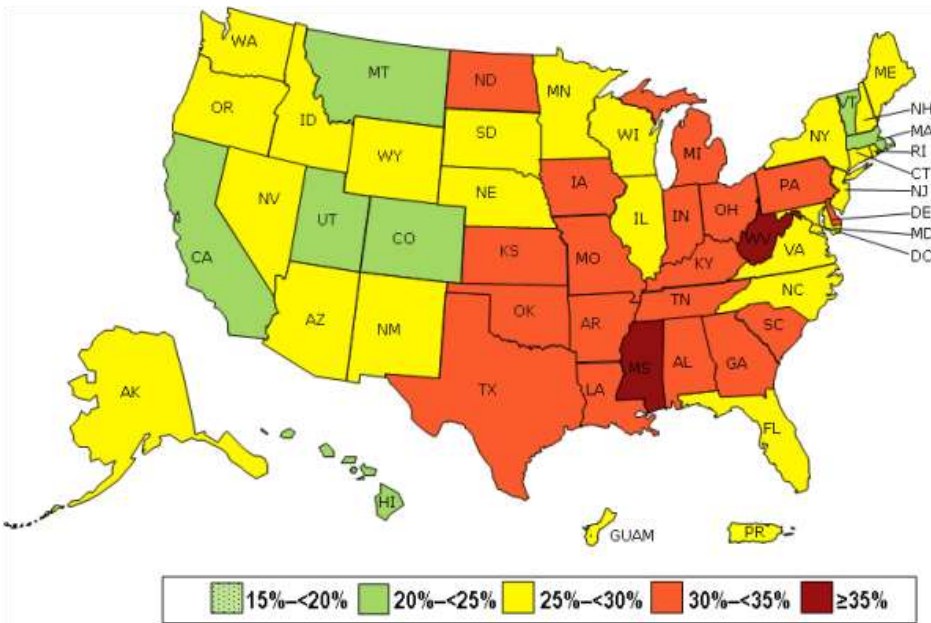
- PPAR $\gamma$  – a protein that controls fat formation. Fat is found under the skin, around the organs and in the bone marrow
- Agonists – turn on fat cell formation and fat storage programs by binding to PPAR $\gamma$
- Where do we find PPAR $\gamma$  agonists? Everywhere!



# PPAR $\gamma$ Agonists: Environmental Obesogens

Obesogens – toxicants that interfere with the ability to maintain a metabolic steady state

Prevalence of Obesity, 2011



A – chemical production

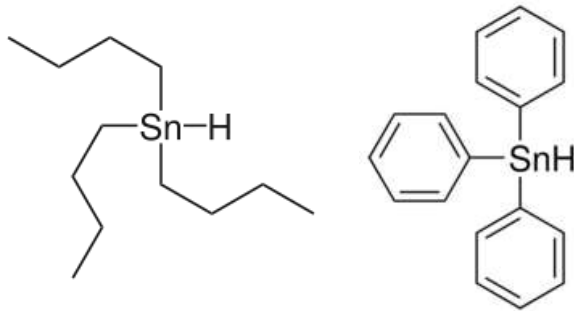
B – Percent overweight adults

www.cdc.gov

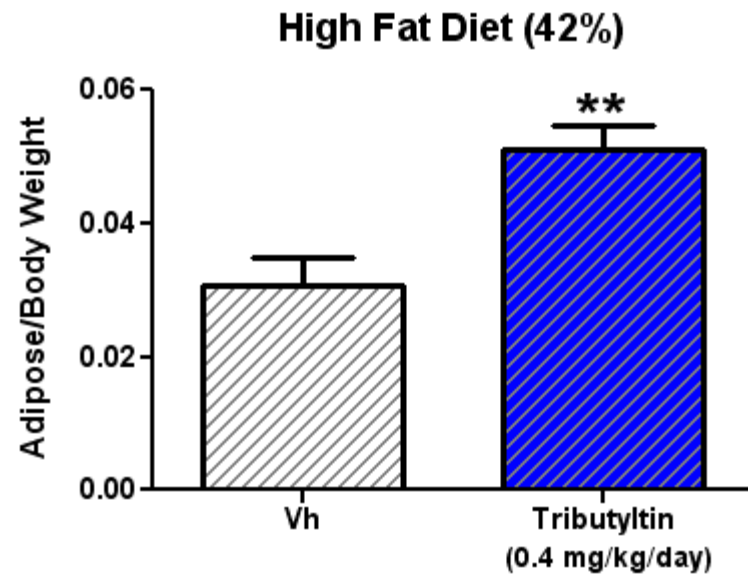
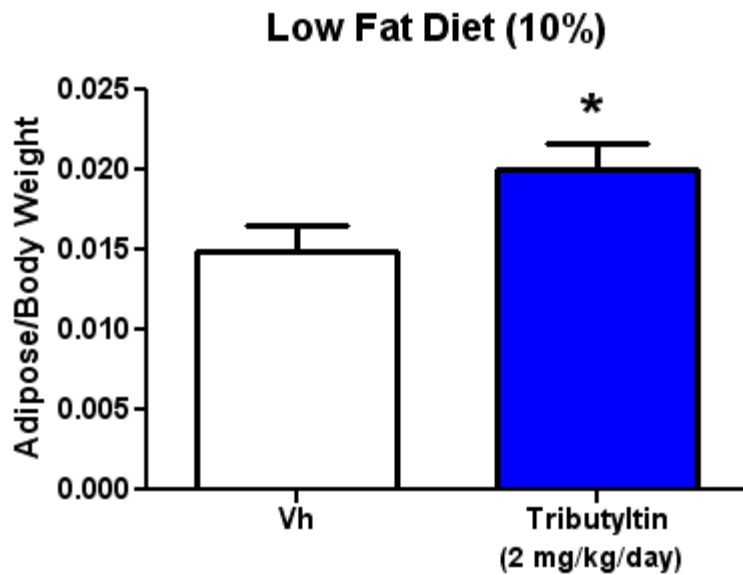
Grun and Blumberg. 2006. Endocrinology

Baillie-Hamilton. 2002. J. Altern. Complement Med.

# A high fat diet and obesogen exposure are a bad combination!

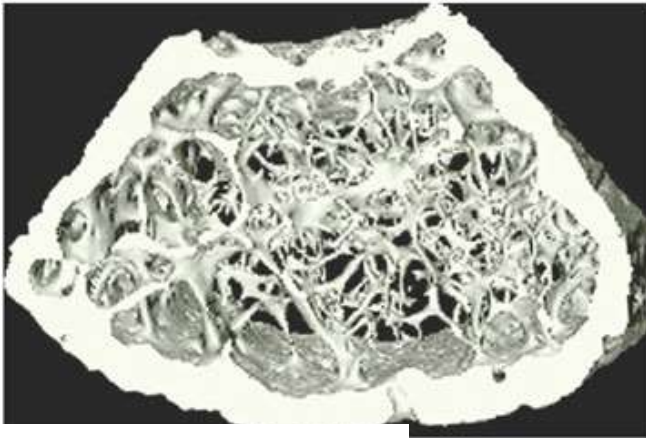


Organotins are used in:  
Antifouling agents  
Food crop fungicides  
Plastics

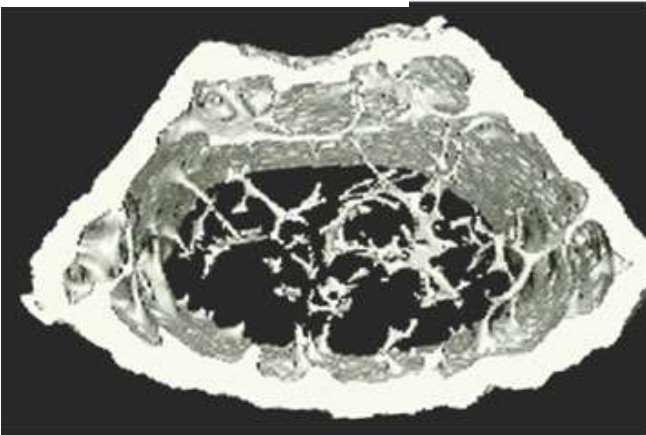


# Bone marrow: an unexpected but detrimental site of fat formation.

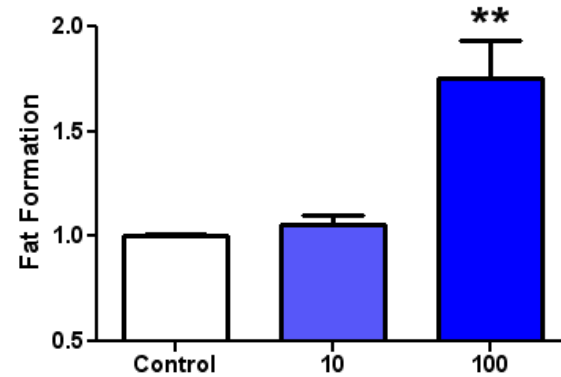
Normal bone



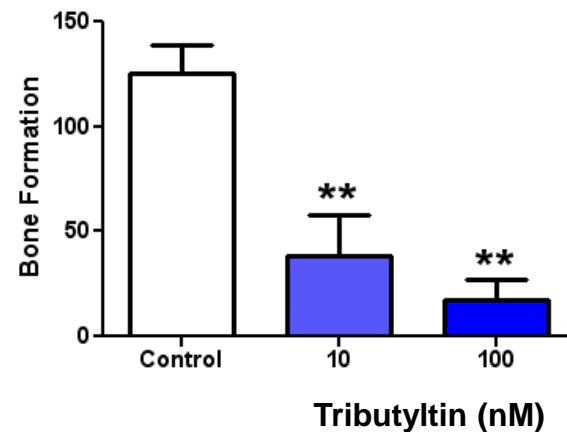
Osteoporotic bone



When fat is being made...

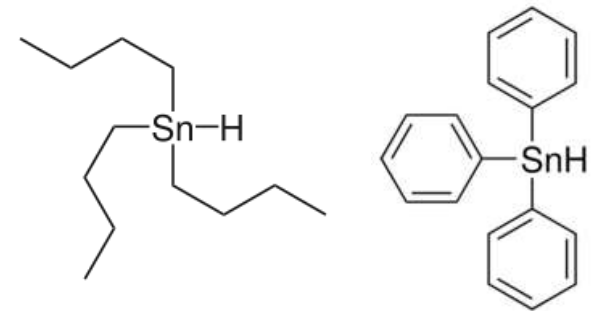
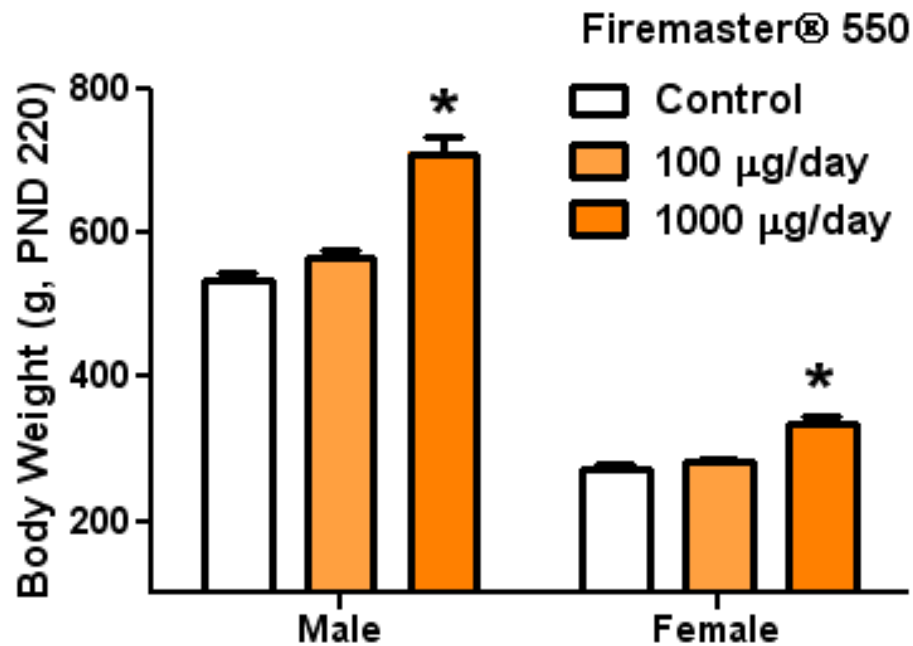


Bone is not!

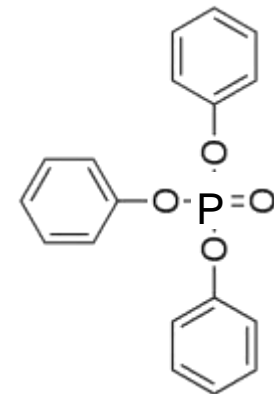




# Prenatal exposure to Firemaster 550<sup>®</sup> is obesogenic... why?



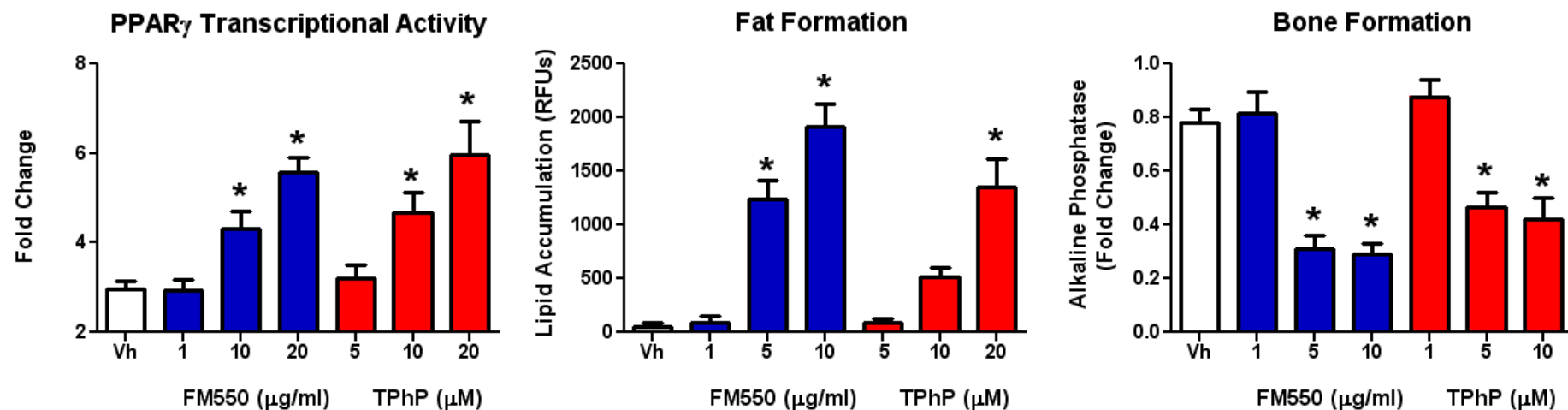
Organotins



Triphenyl Phosphate



# Firemaster<sup>®</sup> 550 and Triphenyl Phosphate turn on PPAR $\gamma$ , increase fat formation and decrease bone formation





# What remains to be understood?

1. PPAR $\gamma$  agonists are used as therapeutics to treat type 2 diabetes... how then can exposure to environmental ligands be bad for metabolic health?
2. Therapeutic PPAR $\gamma$  ligands are known to increase fracture risk... can exposure to environmental ligands enhance the negative side effects of drugs?
3. What contribution could environmental exposures make to the expected increase in prevalence of low bone density and osteoporosis?
4. Can exposure to environmental PPAR $\gamma$  ligands not only increase our risk of fracture, but also compromise the ability of our bones to heal?
5. We are exposed to a complex milieu of environmental PPAR $\gamma$  ligands that are likely to be acting in concert to impact health... can we predict how those mixtures will impact metabolic and bone health?