



# Genomics of Obesity

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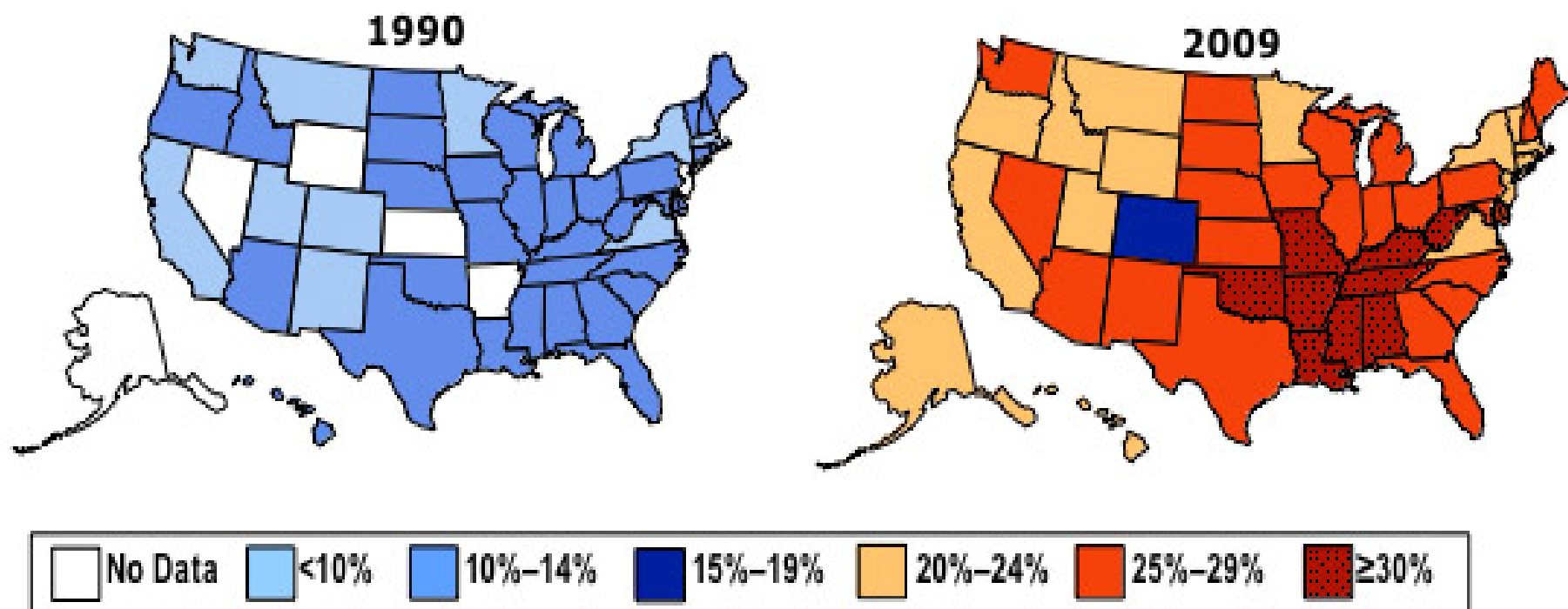


Obesity is one of the world's greatest public health challenges

# Obesity Trends\* Among U.S. Adults

## BRFSS, 1990, 1999, 2009

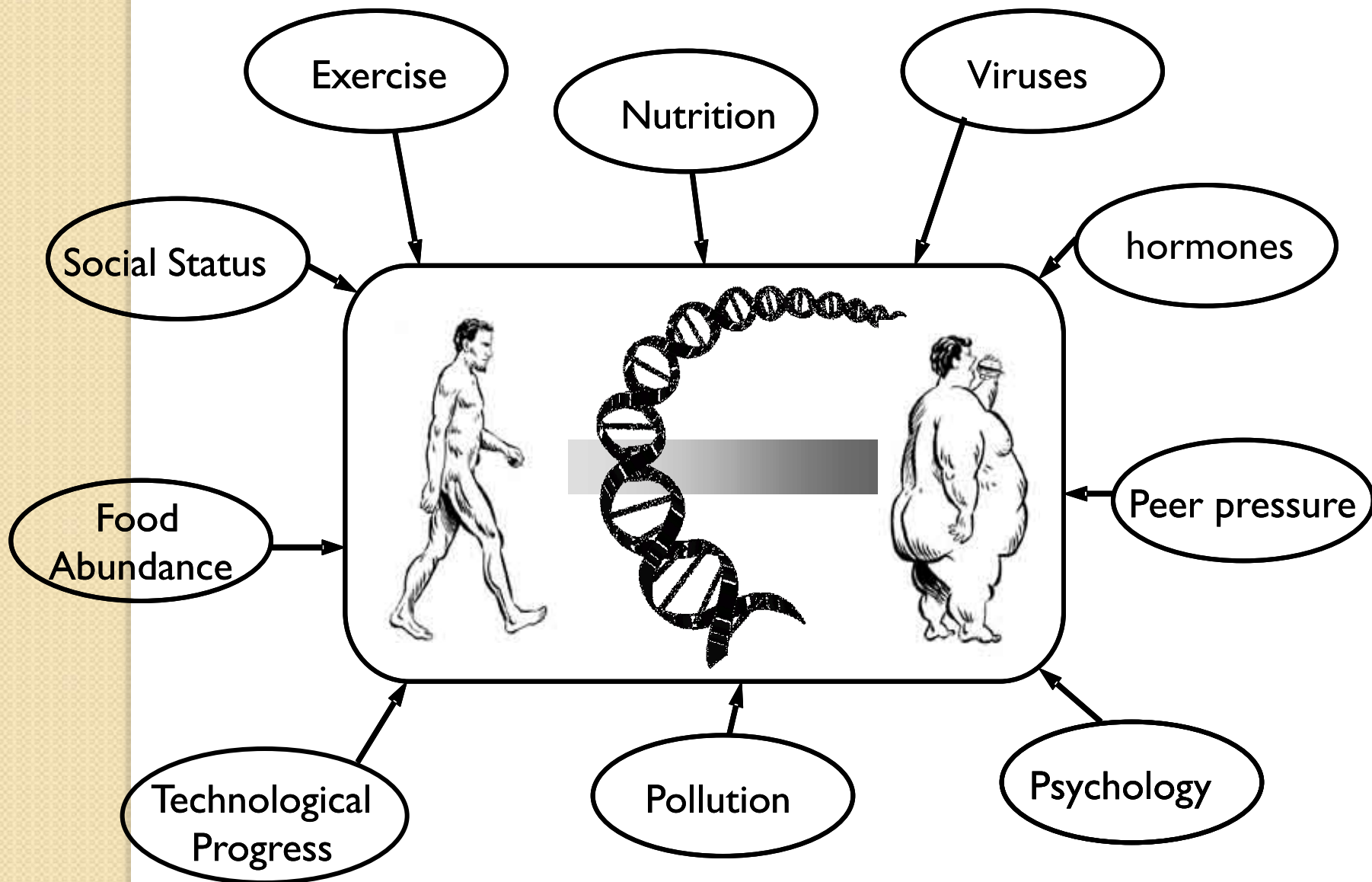
(\*BMI  $\geq 30$ , or about 30 lbs. overweight for 5'4" person)



Source: Behavioral Risk Factor Surveillance System, CDC.

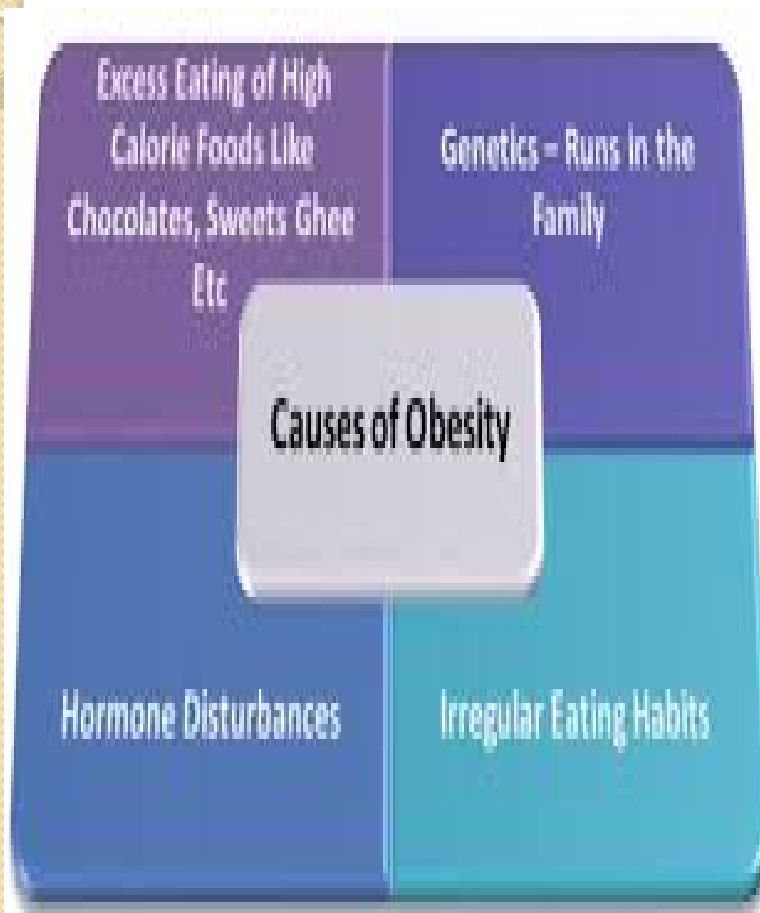


**WHO** was predicted that respectively **75** and **41** percent of the adult population will be **over weight** and **obese** by **2015**





# Obesity: a multifactorial disorder



3,000  
metabolites

300,000  
proteins

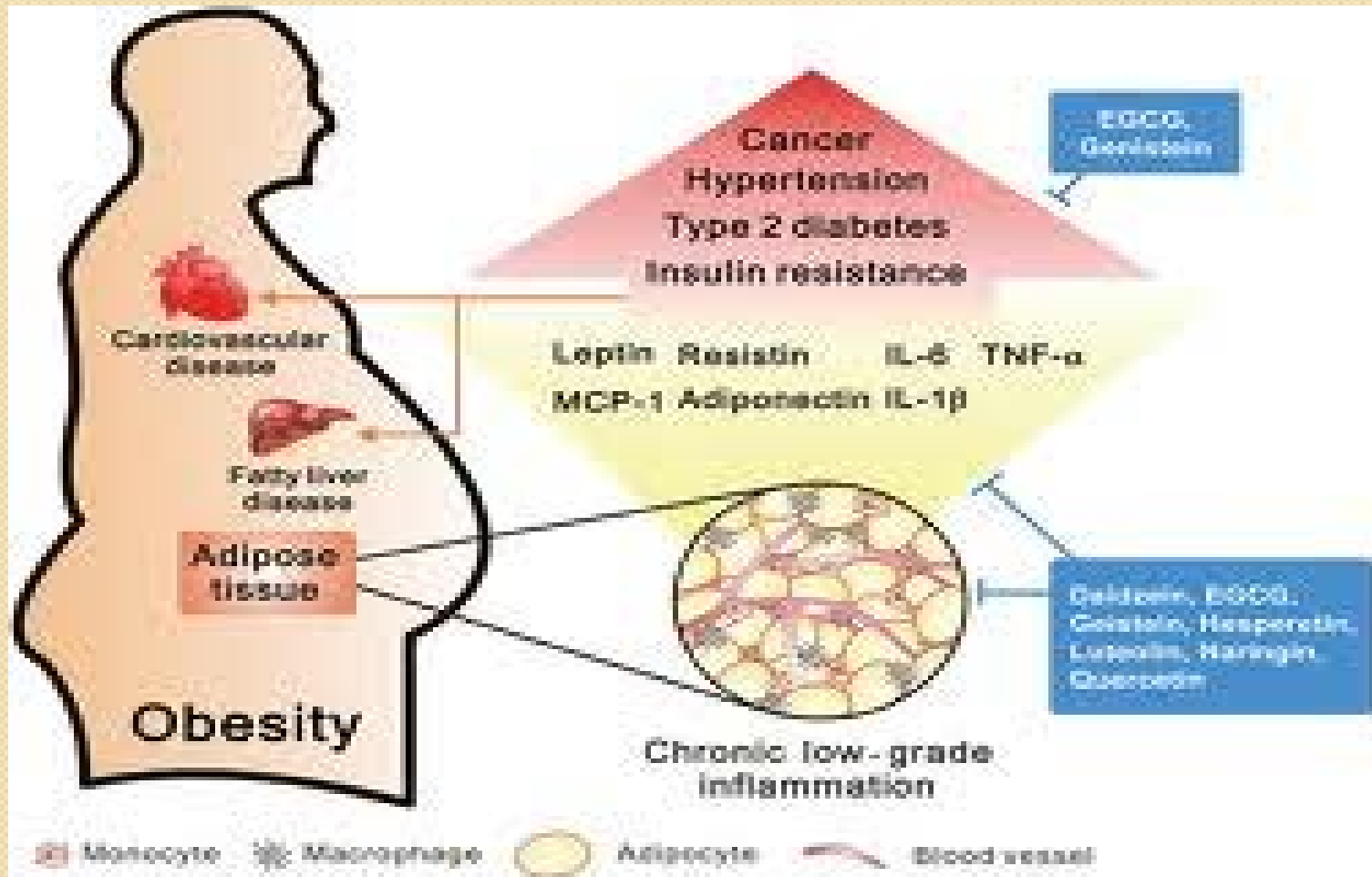
30,000  
genes



**Post-genomic explorers set out for the Magic Mountain**



Obesity, a chronic low-grade inflammatory condition is associated with the development of many comorbidities including dyslipidemia.



مصرف مقادیر زیاد کربوهیدرات

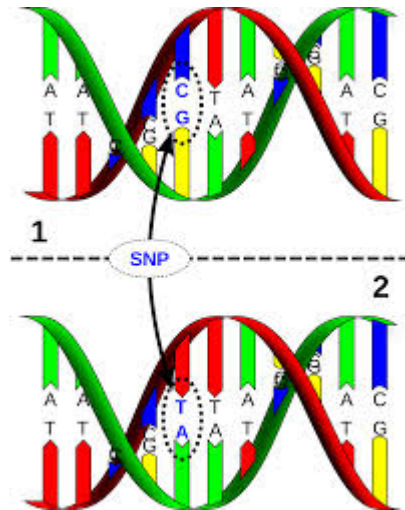
انسولین و گلوکز و  
فعال سازی مسیر  
سیگنالینگ

قسمتی از  
Upregulation  
توسط انسولین  
از طریق فاکتور تحریکی  
بالادست (USF)

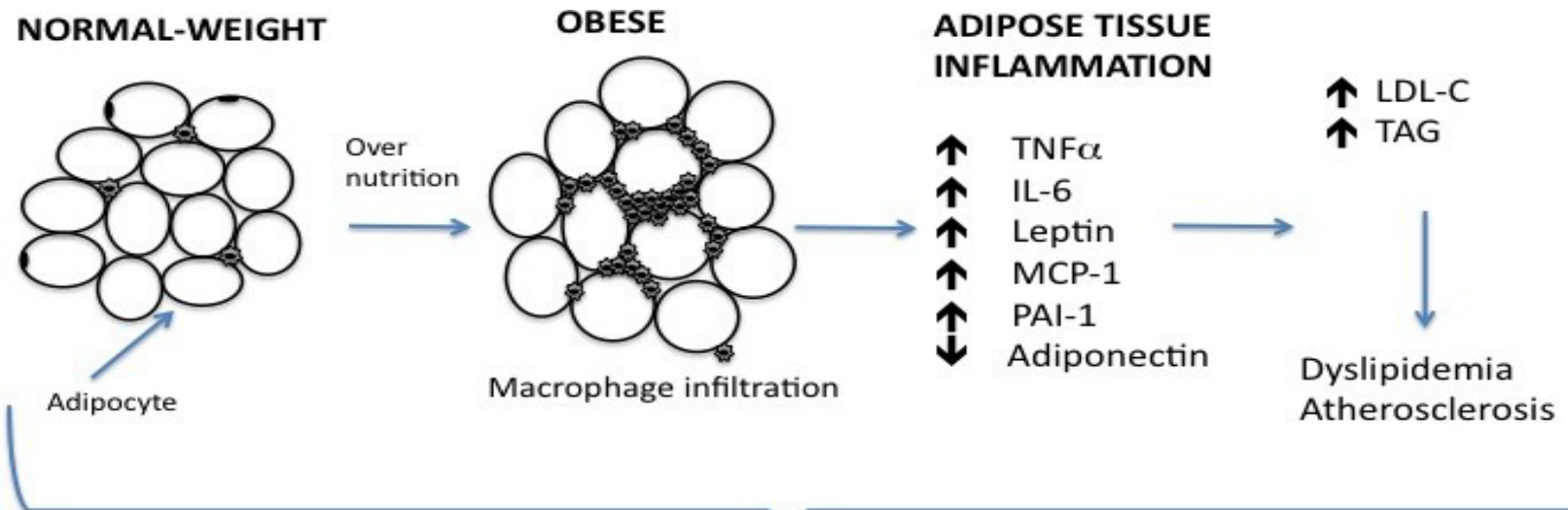
Upregulation  
آنزیمهای گلیکولیتیک و  
لیپوژنیک در کبد

تبدیل GLU به FA در کبد

# Associations between single nucleotide polymorphisms and phenotype



# Obesity is related to gene–environment interactions



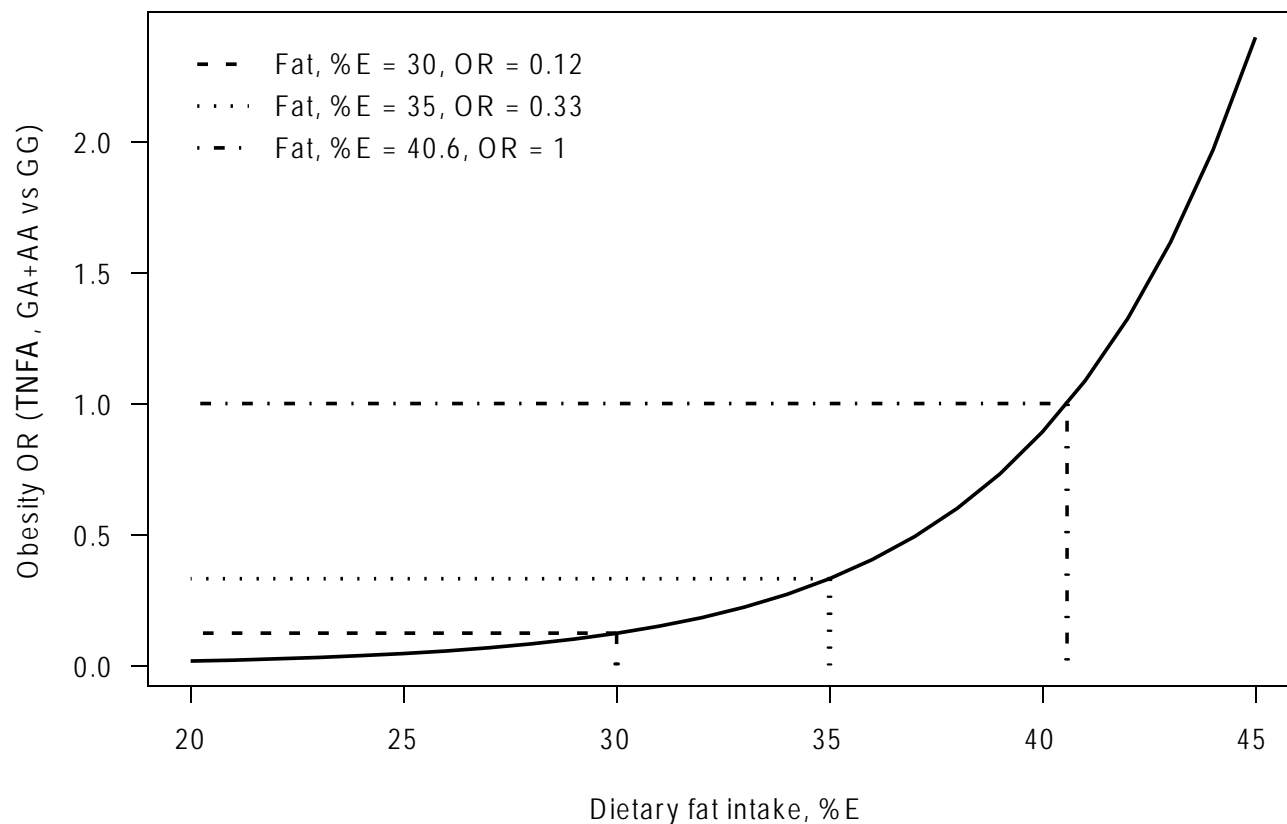
## GENETIC VARIATION

TNFA  
IL-6  
PPAR $\gamma$   
CRP  
ADIPONECTIN  
APOA  
APOB  
APOE

## ENVIRONMENTAL FACTORS

DIET  
Physical inactivity  
Stress

**Figure 2.** The modeled relationship between the odds of being obese (odds of being obese vs. being normal weight), TNFA  $-308$  genotype and dietary fat intake (%E) for black SA women. The curve gives the modeled obesity OR for genotype GA + AA versus genotype GG, at each fat intake (%E). Lines show the total dietary fat intake (%E) of equal odds (OR = 1, for the genotype groups), namely 40.6 (%E), the OR for fat intake = 30 (%E) namely 0.12 and the OR for fat intake = 35 (%E), namely 0.33 [3].

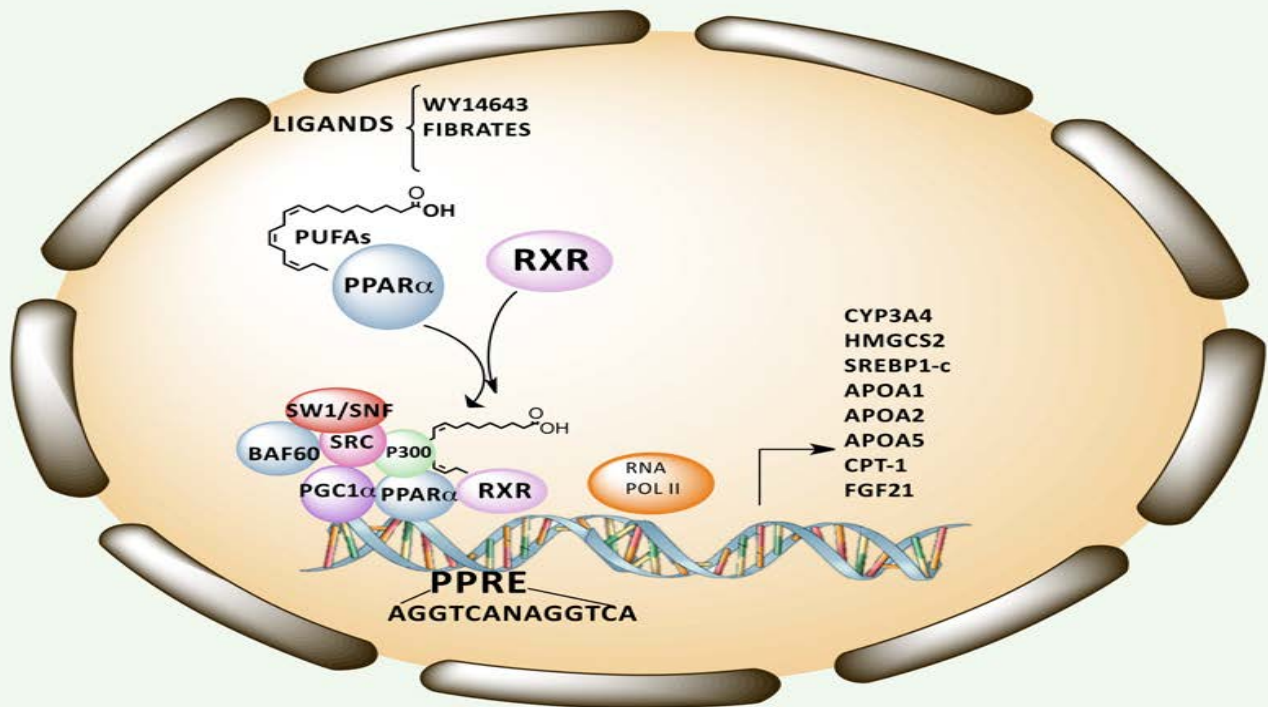
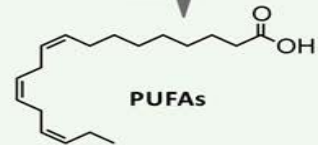
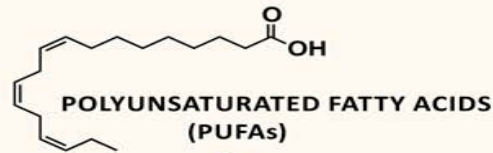




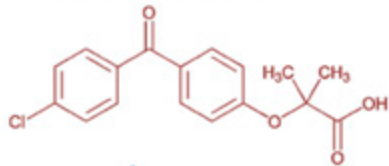
# The Role of Ethnicity and Gender as Confounders

- ❖ **Prevalence of obesity-associated comorbidities differ between ethnic groups by:**
  - Genotype and allele frequencies of SNPs
  - Diet and lifestyle, (dietary intake, physical activity level)
  - Body fat distribution (VAT vs. SAT) , .....
  - Cultural, behavioral and socio-demographic conditions
- ❖ **Gender (sex) of study participants may impact genotype-phenotype interactions**

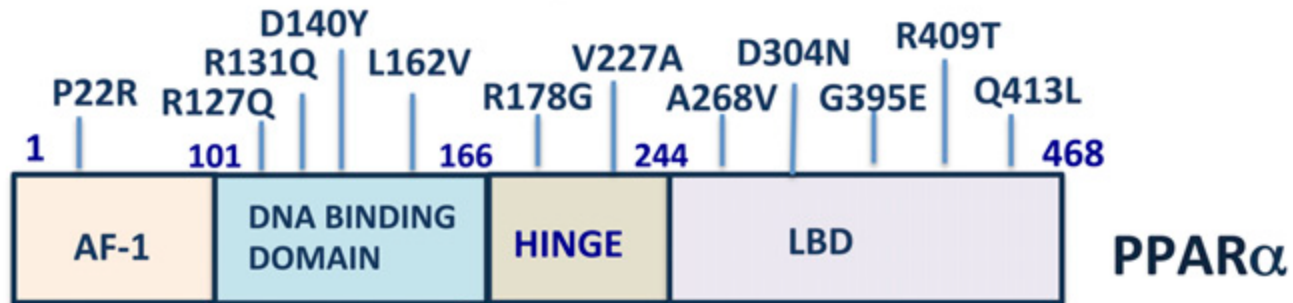
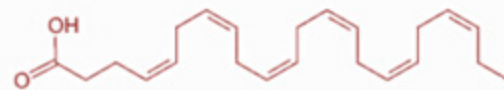
# DIET



Pharmacologica factors  
(Fenofibrate)



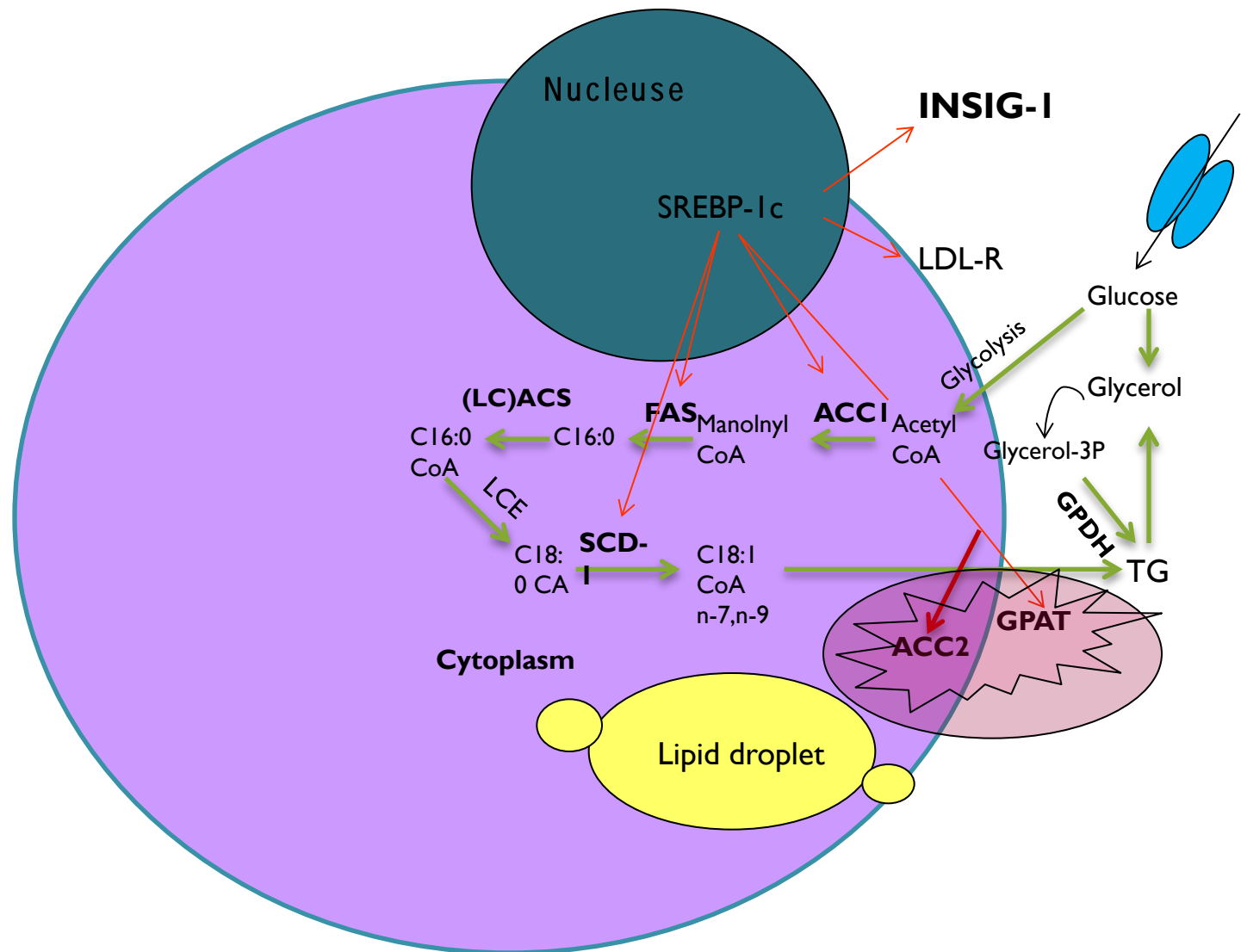
Dietary factors  
(PUFAs)

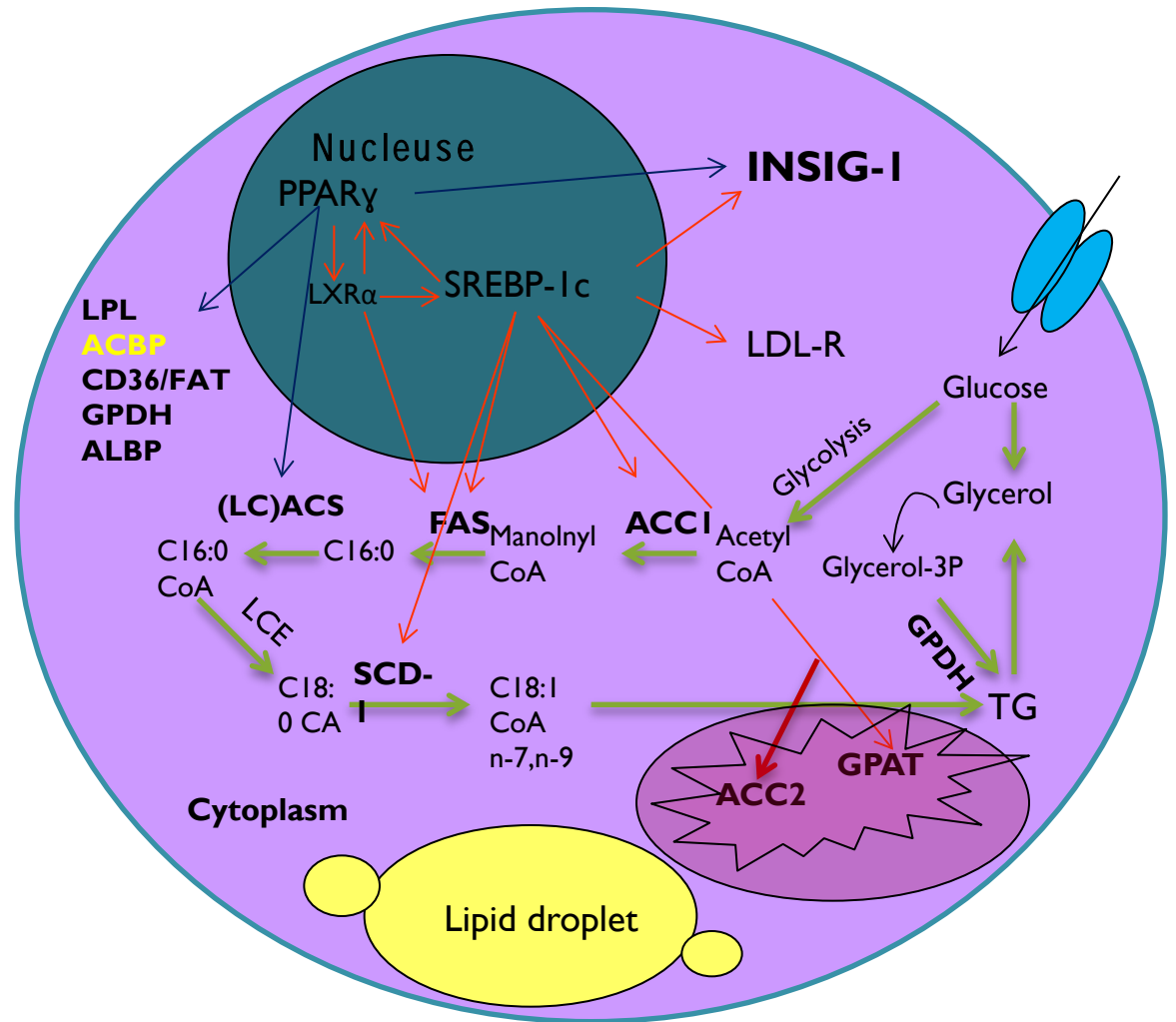


	L162V	V227A	Intron 7 G>C
Characteristics associated with the SNP	<ul style="list-style-type: none"> <li>↑TG<sup>80-82</sup></li> <li>↑TC<sup>69,73,79</sup></li> <li>↑LDL-C<sup>73,79</sup></li> <li>↑ApoB<sup>73,79</sup></li> <li>↑ApoCIII<sup>82</sup></li> <li>↑Risk for T2D<sup>74</sup></li> <li>↓HDL<sup>80</sup></li> </ul>	<ul style="list-style-type: none"> <li>↓TC<sup>86</sup></li> <li>↓TG<sup>86</sup></li> </ul>	<ul style="list-style-type: none"> <li>↑Dyslipidemia<sup>85,94</sup></li> <li>↑Risk of non fatal myocardial infarction<sup>83</sup></li> </ul>
Dietary interactions with PUFAs	<ul style="list-style-type: none"> <li>↓ApoA1<sup>104</sup></li> <li>↓TG<sup>102</sup></li> <li>↓ApoCIII<sup>102</sup></li> </ul>	<ul style="list-style-type: none"> <li>↓HDL<sup>88</sup></li> </ul>	
Pharmacological interactions with fenofibrate			<ul style="list-style-type: none"> <li>↓TG<sup>119</sup></li> </ul>

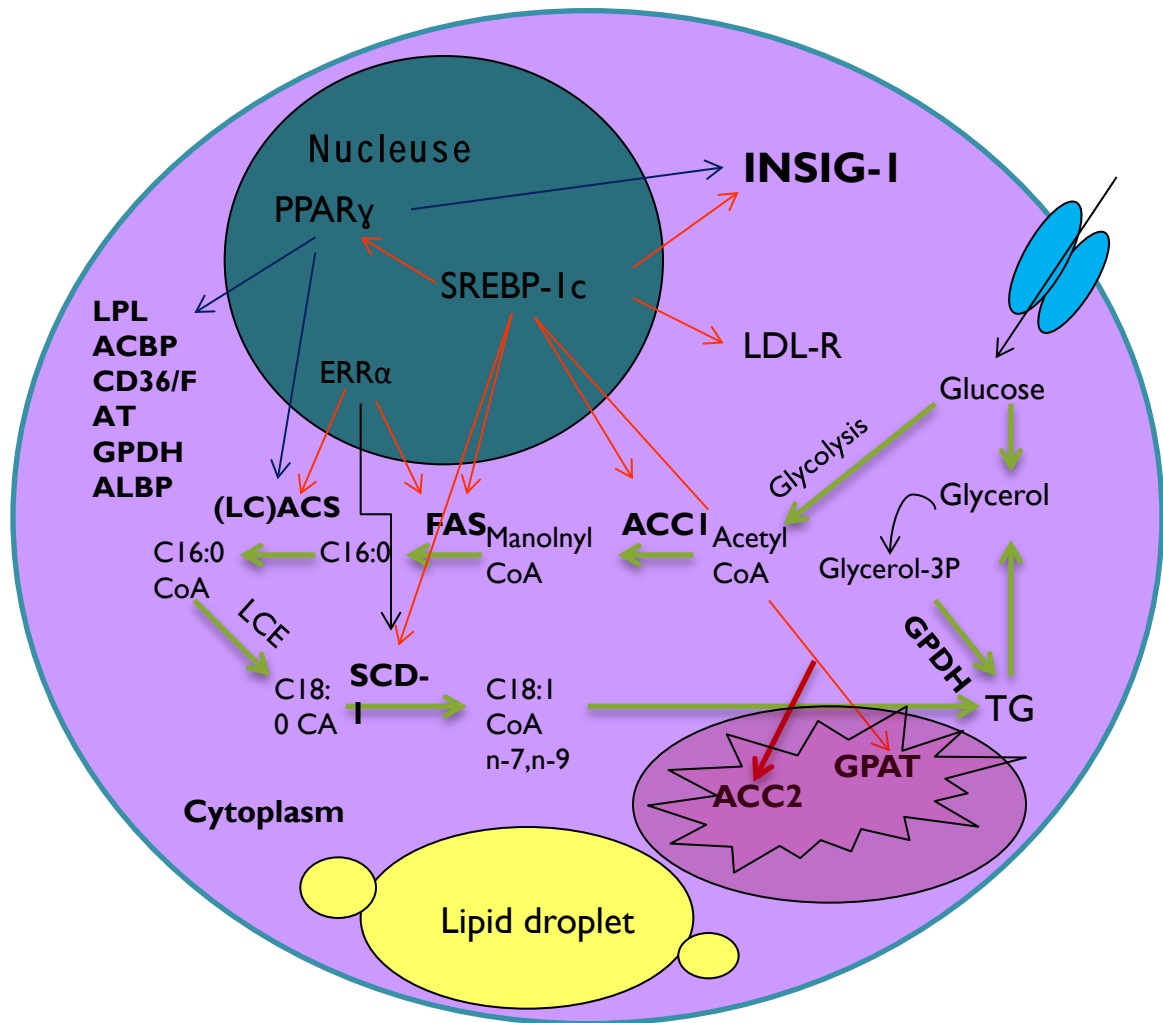
Ref: 2013 American Society for Nutrition.  
Adv. Nutr. 4: 439–452, 2013;  
doi:10.3945/an.113.003798

# ژنهای دلیپوژنیک دبه د عنوان دژنهای دهدف - SREBP- Ic ددر دآدیپوسیت دبالغ










# Conclusions

- These studies elucidate the reasons for inconsistencies of prior genetic association studies
- Support mechanistic relationships between genetic and nutritional factors,
- Provide a framework on which rational preventive nutritional strategies may eventually be based

# Association Studies

- A widely used approach to find genes involved in “common” obesity are association studies.
- A vast number of such studies have been performed for obesity related traits (Human Obesity Gene Map; <http://www.obesity.chair.ulaval.ca/genes.html>).

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- The coordinating scientific body of the HGP was provided by the Human Genome Organization (HUGO, [www.hugointernational.org](http://www.hugointernational.org)).
  - Another international project aimed at better understanding disease state is the **Human Epigenome Project** ([www.epigenome.org](http://www.epigenome.org)) in which genome-wide DNA methylation patterns are studied.