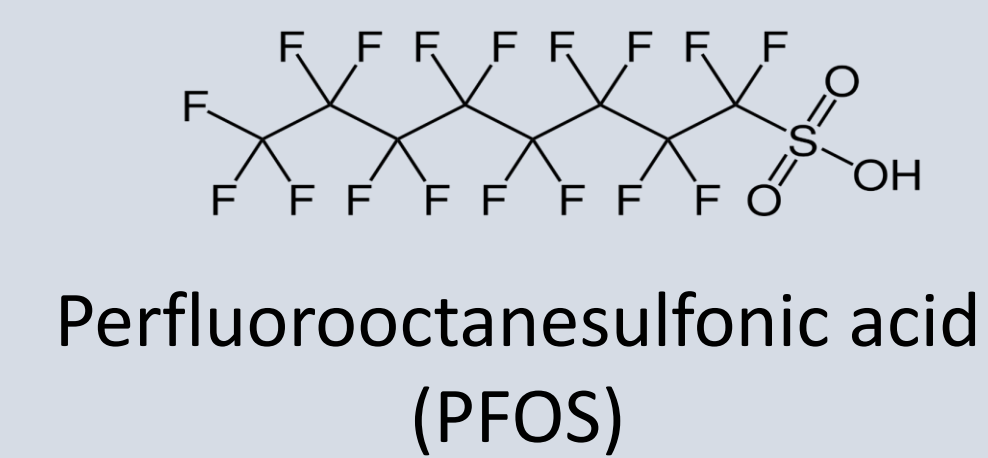


# Metabolomic and toxicokinetic *in vitro* approach for studying chemically-induced chronic liver diseases



## INTRODUCTION AND BACKGROUND

- Acute or chronic exposures of the human body to chemicals can lead to **acute or chronic liver diseases** such as nonalcoholic fatty liver disease (NAFLD).
- NAFLD is an umbrella term covering a range of liver conditions, from a **build-up of fat in the liver (steatosis)** to **permanently damaged liver (cirrhosis)** [1][2].
- Additionally, PFAS has an association with **worsening NAFLD** and the **development of hepatic steatosis** [5].
- Our preliminary *in vitro* results suggest a **structure-dependent effect on lipid homeostasis** since **PFOS did induce lipid accumulation** in the 2D HepG2 cell-based model, but **PFOA did not** (Figure 1).

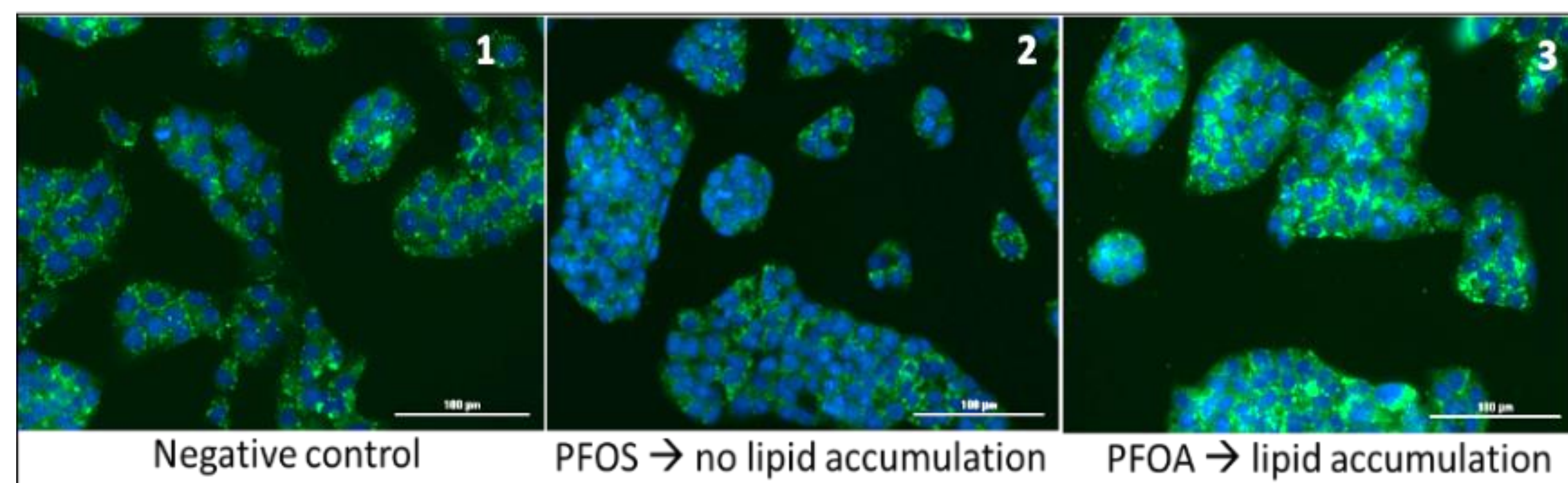
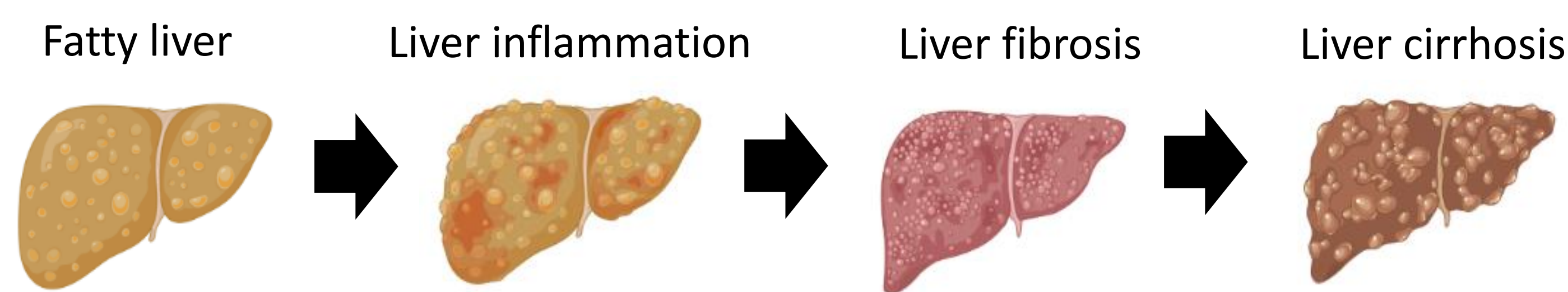


Figure 1: Preliminary data showing 2D HepG2 cells after the 48-h exposure to 25 μM PFOA (3) and PFOS (2) as well as a negative control (solvent-treated cells) (1). The exposed cells stained with BODIPY 493/503 (green) and DAPI (blue) (scale bar = 100 μm)

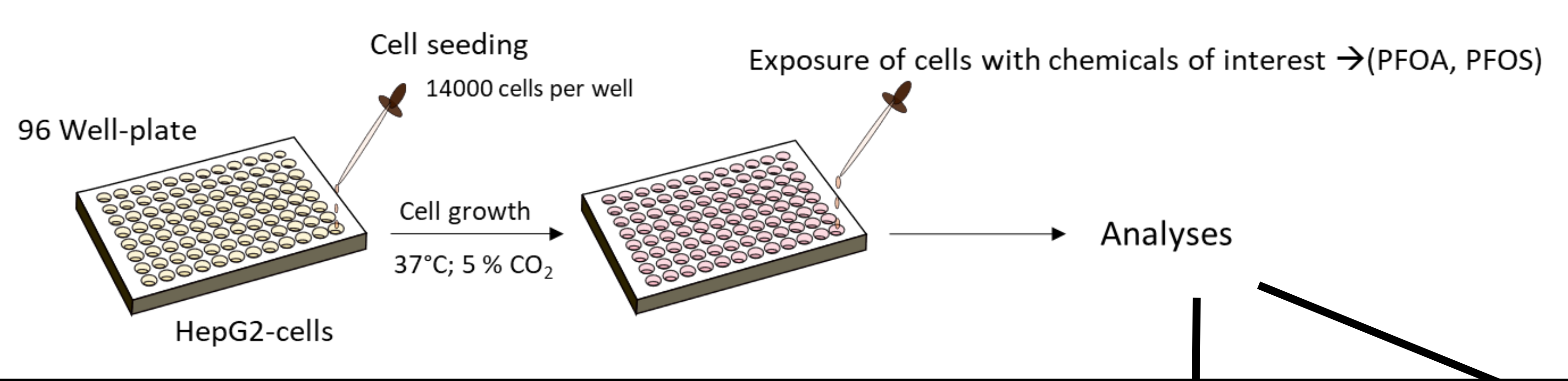
- Underlying mechanisms of NAFLD development include disruption of lipid metabolism in the liver cells. It is strongly associated with metabolic and cardiovascular disorders, such as obesity and type 2 diabetes [3].
- Perfluorooctanesulfonic acid (PFOS)** and **perfluorooctanoic acid (PFOA)** have been repeatedly associated with **metabolic disruptions**, manifested e.g., as **increased concentrations of cholesterol** in the blood as well as **elevated triglyceride levels** [4].

- Thus, these substances are great candidates to investigate chronic liver diseases of PFASs as **direct comparison of structurally similar substances**

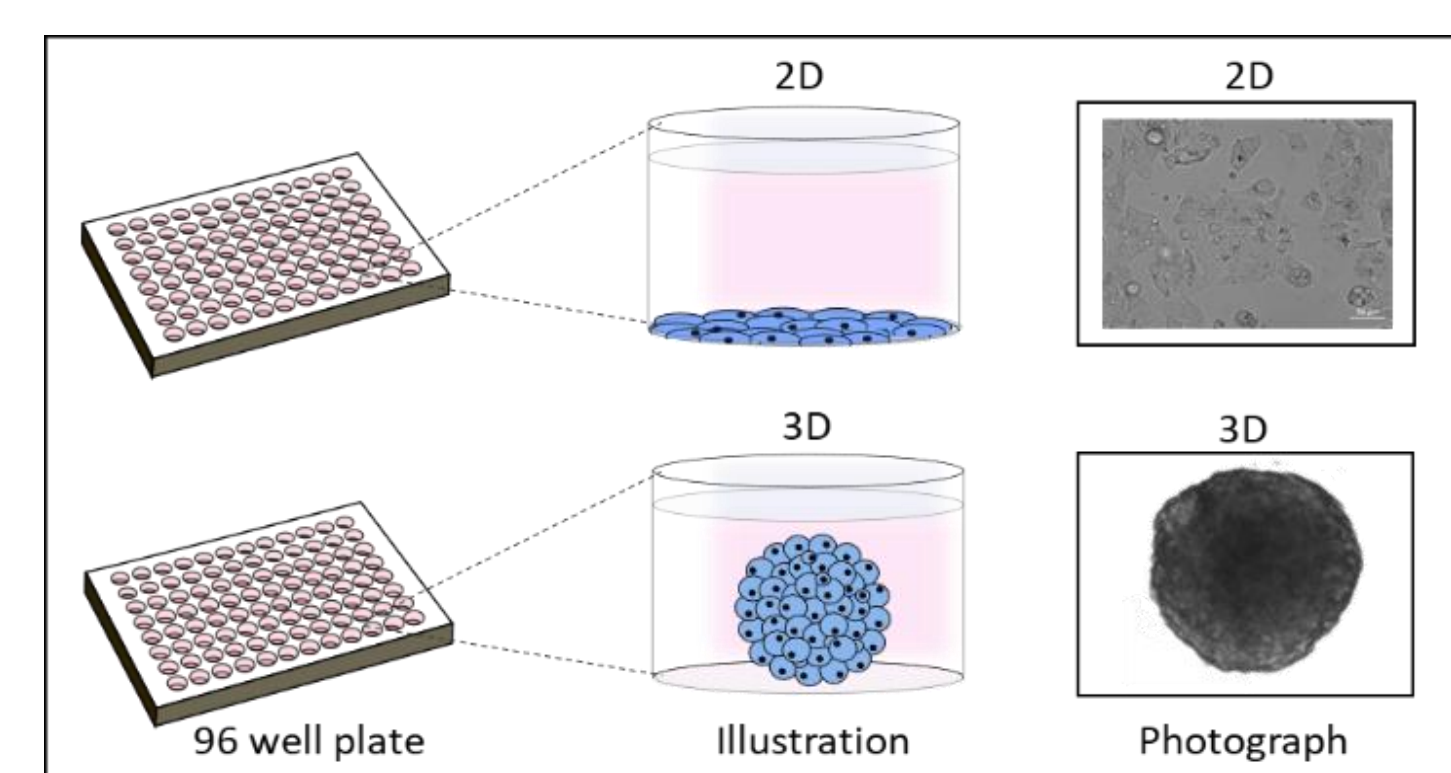
## RESEARCH QUESTION

What is the contribution of the perfluorinated compounds to the development of nonalcoholic fatty liver disease (NAFLD) and what are the cellular and molecular mechanisms involved?

## METHODS AND PLANS



I will use HepG2 cell-based traditional 2D and advanced 3D *in vitro* models for this project.



### TOXICOKINETIC APPROACH (ongoing)

Evaluation of the behavior and toxicokinetic distribution of the chemicals within the 2D and 3D HepG2 cell-based *in vitro* systems (*in vitro* toxicokinetic assessment).

### METABOLOMIC APPROACH (starting this year)

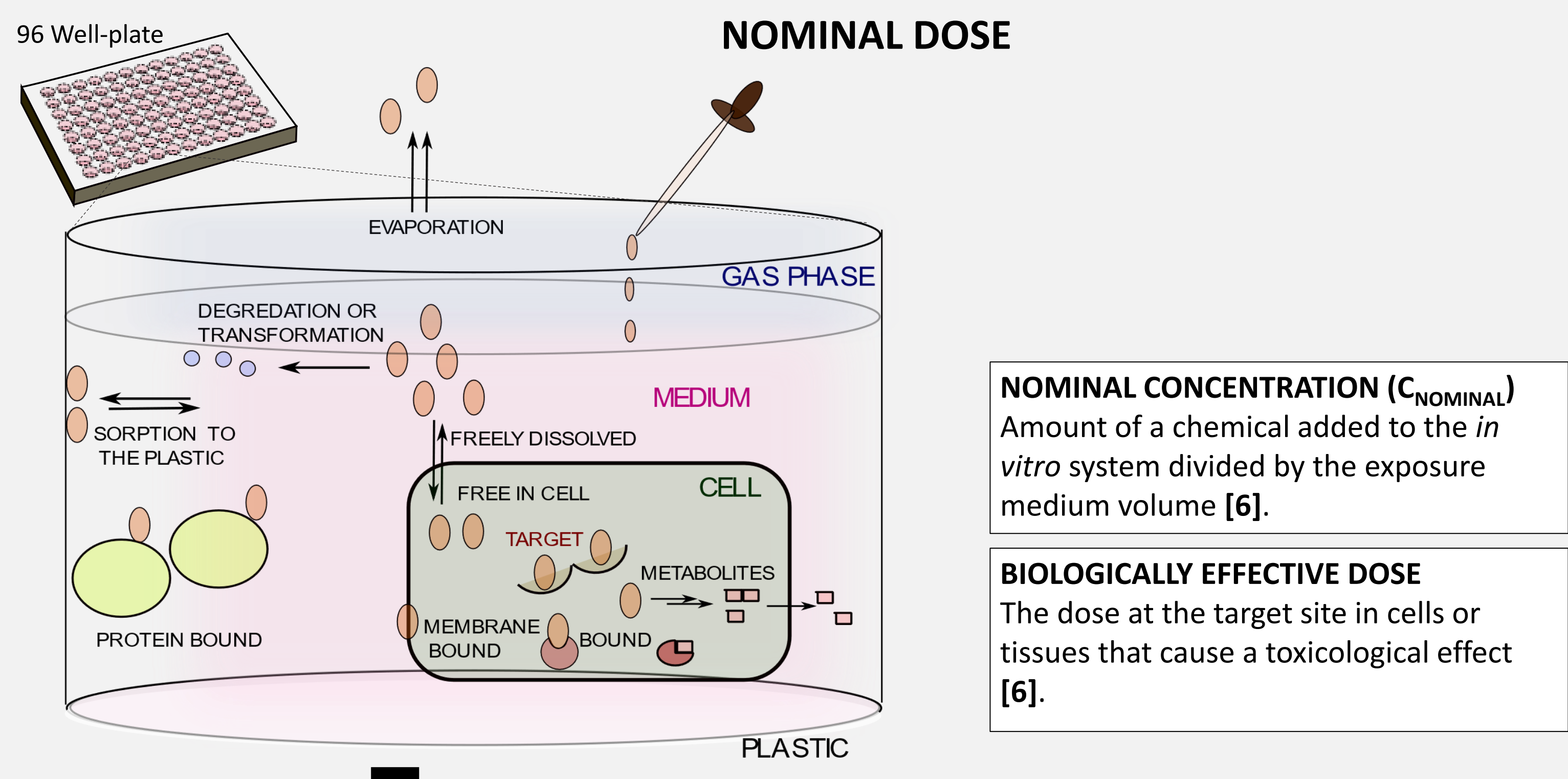
What are the effects of PFOS and PFOA on the 3D HepG2 *in vitro* models and what are the mechanisms involved (*in vitro* toxicodynamic assessment)?

Using the  $C_{NOMINAL}$  for risk assessment can lead to **FALSE RESULTS!**

→ **UNDERESTIMATION OF THE TOXIC POTENTIAL OF A COMPOUND.**

#### Factors which can affect the nominal concentration:

Protein or plastic binding, transformation, metabolism and evaporation of the chemical from the *in vitro* system → **Nominal concentration ≠ effective dose at the target site in cells!**



**NOMINAL CONCENTRATION ( $C_{NOMINAL}$ )**  
Amount of a chemical added to the *in vitro* system divided by the exposure medium volume [6].

**BIOLOGICALLY EFFECTIVE DOSE**  
The dose at the target site in cells or tissues that cause a toxicological effect [6].

Biologically effective concentration *in vitro* ??

Computational determination in collaboration with INERIS (France). VIVD [7]

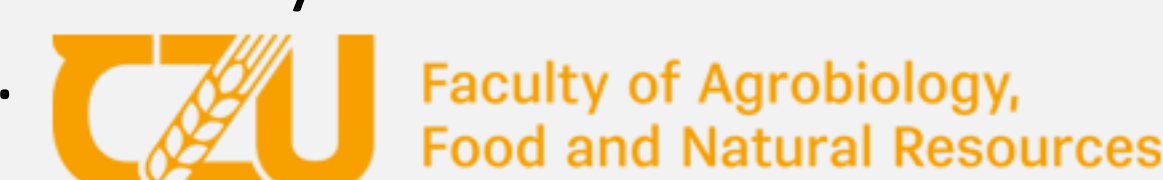


Experimental determination in 2D and 3D *in vitro* liver models

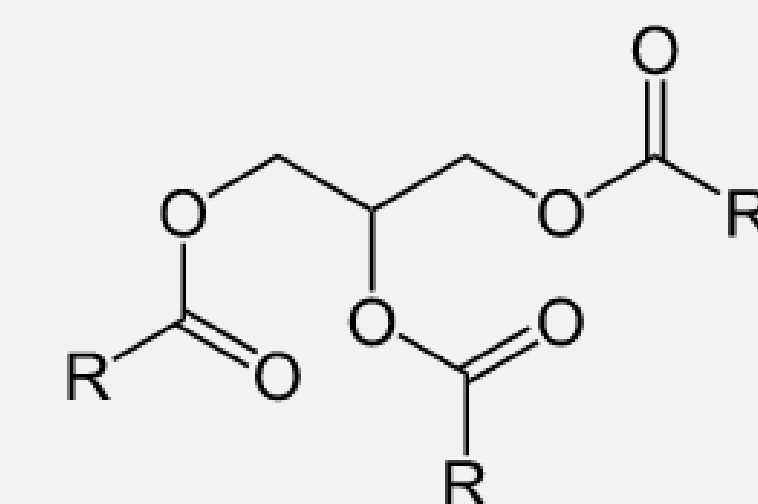
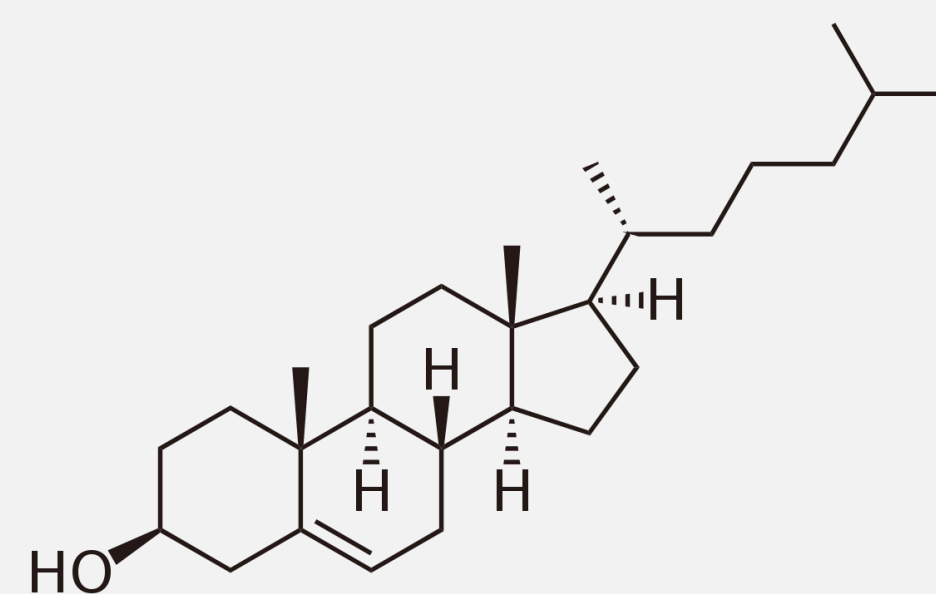
- Study the impact of the chemicals on the **metabolome** on the 3D HepG2 model by **NMR-based metabolomics**.



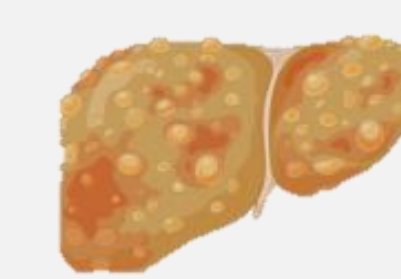
Collaboration with the lab of doc. Ing. Jaroslav Havlík, Ph.D. from the Dpt. of Food Science from the Czech University of Life Sciences Prague.



- Study the impact of the chemicals on **lipid homeostasis** in the 3D HepG2 model by **HPLC-MS-based metabolomics**.



- Study the impact of the chemicals on the **lipid droplet proteins** (e.g. **perilipins**) using targeted **HPLC-MS proteomics**.



Liver inflammation

## REFERENCES

[1] V. M. Lauschke, et al.: Chem. Res. Toxicology, 29 (2016) 1936–1955. [2] Z. M. Younossi, A. B., et al.: Hepatology, 64 (2016) 73–84. [3] M. E. Rinella: JAMA 313 (2015) 2263–2273. [4] S. Fragki et al.: Crit. Rev. Toxicology, 51 (2021) 141–164. [5] L. E. Armstrong, et al.: Curr. Environ. Heal. 6 (2019) 95–104. [6] F. A. Groothuis, et al.: Toxicology, 332 (2015) 30–40 [7] C. Fisher, et al.: Elsevier, 58 (2019) 42–50