

Irish Section Meeting, 16–18 June 2010, Nutrition – Getting the Balance Right in 2010

The metabolic effects of novel peptide-based glucagon receptor antagonists *in vitro* and in high fat fed mice

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Hyperglycaemia in type-2 diabetes is produced from a combination of impaired insulin secretion, tissue insulin resistance and enhanced secretion of glucagon, the latter resulting in increased hepatic glucose output. Thus, glucagon receptor antagonists have potential to alleviate glucagon-induced hyperglycaemia. In this study, we examined the efficacy of the novel peptide-based glucagon antagonists desHis¹(Glu⁹)glucagon and the C-terminal mini-PEGylated form, desHis¹(Glu⁹)glucagon[mPEG], on intracellular cAMP production and insulin secretion *in vitro* and glucagon-induced hyperglycaemia *in vivo* in insulin resistant high fat fed mice. Acute (20 min) *in vitro* cAMP production and insulin secretion studies were performed in glucagon receptor transfected HEK293S(GnT1) and clonal pancreatic BRIN-BD11 cells, respectively. *In vivo* studies were performed in National Institutes of Health Swiss mice maintained on high fat diet (45% fat) for 120 d. Groups of mice (*n* 8) were fasted for 4 h prior to injection (i.p.) with saline, glucagon alone and desHis¹(Glu⁹)glucagon or desHis¹(Glu⁹)glucagon[mPEG] with/without glucagon (all at 25 nmol/kg body weight). Blood glucose was measured at 0, 15, 30, 60 and 105 min post injection. Glucagon dose-dependently stimulated cAMP production in HEK293S(GnT1) cells. However, desHis¹(Glu⁹)glucagon and desHis¹(Glu⁹)glucagon[mPEG] alone did not stimulate cAMP production. Furthermore, both peptides antagonised glucagon-induced cAMP production *in vitro*. In BRIN-BD11 cells, glucagon dose-dependently (10^{-12} – 10^{-6} M) stimulated insulin secretion compared to 5.6 mM glucose control ($P < 0.05$ to $P < 0.001$). In contrast, desHis¹(Glu⁹)glucagon and desHis¹(Glu⁹)glucagon[mPEG] did not evoke insulin secretion above control levels. However, both peptides effectively antagonised glucagon-induced (10^{-7} M) insulin secretion *in vitro*. In high fat fed mice, glucagon significantly ($P < 0.01$) elevated the overall plasma glucose excursion (0–105 min AUC) compared to saline controls. In contrast, the administration of either desHis¹(Glu⁹)glucagon or desHis¹(Glu⁹)glucagon[mPEG] did not induce significant changes from saline controls. Moreover, when injected concomitantly with glucagon both analogues significantly ($P < 0.01$ to $P < 0.001$) lowered individual blood glucose levels when compared to glucagon treated mice. In addition, a combined administration of glucagon and desHis¹(Glu⁹)glucagon significantly ($P < 0.05$) lowered the overall glycaemic excursion (0–105 min AUC) when compared to glucagon-treated mice. In conclusion, desHis¹(Glu⁹)glucagon is a particularly effective glucagon receptor antagonist *in vitro* and *in vivo* and may have potential in alleviation of hyperglycaemia in diabetes.