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4 **Class IIa HDACs inhibit cell death pathways and protect muscle integrity in response to**
5 **lipotoxicity**
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7 Running title: Skeletal muscle lipotoxicity and cell death pathways
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ABSTRACT

Lipotoxicity, the accumulation of lipids in non-adipose tissues, alters the metabolic transcriptome and mitochondrial metabolism in skeletal muscle. The mechanisms involved remain poorly understood. Here we show that lipotoxicity increased histone deacetylase 4 (HDAC4) and histone deacetylase 5 (HDAC5), which reduced the expression of metabolic genes and oxidative metabolism in skeletal muscle, resulting in increased non-oxidative glucose metabolism. This metabolic reprogramming was also associated with impaired apoptosis and ferroptosis responses, and preserved muscle cell viability in response to lipotoxicity. Mechanistically, increased HDAC4 and 5 decreased acetylation of p53 at K120, a modification required for transcriptional activation of apoptosis. Redox drivers of ferroptosis derived from oxidative metabolism were also reduced. The relevance of this pathway was demonstrated by overexpression of loss-of-function HDAC4 and HDAC5 mutants in skeletal muscle of obese *db/db* mice, which enhanced oxidative metabolic capacity, increased apoptosis and ferroptosis and reduced muscle mass. This study identifies HDAC4 and HDAC5 as repressors of skeletal muscle oxidative metabolism, which is linked to inhibition of cell death pathways and preservation of muscle integrity in response to lipotoxicity.

INTRODUCTION

Obesity is driving an epidemic of chronic disease, including type 2 diabetes. Linked to these diseases are adverse cellular responses arising from the accumulation of lipids in non-adipose tissues, a process termed lipotoxicity[1]. The deleterious effects of lipotoxicity include altered cellular signalling, metabolic reprogramming and cell death[2].

Lipotoxicity alters skeletal muscle metabolism, inducing insulin resistance and impairments in aspects of oxidative metabolism. Reduced rates of both glucose and lipid oxidation have been observed in the skeletal muscle of obese subjects[3, 4] and data describing impairments in amino acid metabolism are also emerging[5, 6, 7]. Experimental induction of acute lipotoxicity in humans through lipid infusion results in many of the same skeletal muscle metabolic alterations[8, 9]. These impairments in oxidative metabolism are associated with reduced expression of a metabolic and mitochondrial transcriptional program controlled by the peroxisome proliferator-activated receptor-gamma coactivator 1 alpha (PGC-1α) transcriptional coactivator[10], encoded by the *PPARGC1A gene*. It is not known why repression of the metabolic transcriptome and reduced oxidative metabolism is an adaptation to lipotoxicity and the molecular pathways involved remain unclear.

Studies from our group and others have found that the class IIa histone deacetylase (HDAC) isoforms 4 and 5 are regulators of PGC-1α expression in skeletal muscle[11, 12]. HDAC4 and 5 act co-operatively as heterodimers to repress the myocyte-enhancer factor 2 (MEF2) family of transcription factors[13, 14]. Binding sites for the MEF2 transcription factor are found in the *PPARGC1A* promoter[12] and in the promoters and enhancer regions of other genes involved

in oxidative metabolism[11]. However, the role of the class IIa HDAC transcriptional repressors

in the context of lipotoxicity is unknown. We hypothesised that HDAC4 and 5 are increased

in response to lipotoxicity and contribute to the suppression of metabolic genes and

oxidative metabolism and sought to understand why these adaptations occur.

MATERIALS AND METHODS

Cell culture

Mouse C2C12 myoblasts and myotubes were cultured using standard methods. Cells stably

overexpressing HDAC4 and 5 were analysed as myoblasts as HDAC4 and 5 prevented

myogenic differentiation of these cells to myotubes. Treatment doses of palmitate,

camptothecin, Erastin, 1S,3R-RSL 3 (Merck, Melbourne, Australia) and Ferrostatin

(Selleckchem, Houston, Tx, USA) are reported in Figure legends and were applied for 24h

unless otherwise stated. Palmitate was dissolved in ethanol at $70^{o}C$ and diluted in ultrapure

H_2O before conjugation to fatty acid-free BSA at 1:10 ratio (w/v). An ethanol/BSA solution

without palmitate was prepared at the same time for use as a vehicle.

Animal models

All animal experimentation was approved by the Deakin University Animal Ethics Committee

(G27-2012 and G21-2015). Mice were acquired from the Animal Resources Centre (Perth,

Australia) and were group housed with a 12hr light/dark cycle, temperature 21± 3°C,

humidity 30-70% with *ad libitum* access to standard rodent chow and water. Heterozygous

db/+ and homozygous *db/db* mice on a C57BL/6J background were fasted for 5 hr prior to

humane killing by cervical dislocation for rapid excision of tissues, which were snap frozen in

liquid nitrogen. C57BL/6J mice were administered recombinant serotype 6 adeno-associated

viral (AAV6) (rAAV6) vectors via intramuscular injection into the anterior and posterior

compartments of the lower hind limbs. Each compartment of the left limb received $2e^{10}$

vector genomes (vg) of empty rAAV6, whilst each compartment of the right limb received

$1e^{10}$ vg of WT HDAC4 rAAV6 and $1e^{10}$ vg of WT HDAC5 rAAV6. *db/db* mice were similarly

administered rAAV6 vectors via intramuscular injection. Each compartment of the left limb

received $5e^{10}$ vg of empty rAAV6, whilst each compartment of the right limb received $2.5e^{10}$

vg of DN HDAC4 rAAV6 and $2.5e^{10}$ vg of DN HDAC5 rAAV6. Experiments were performed ~8

weeks after rAAV6 administration. At the conclusion of experiments mice were fasted for 4

hours before humane killing by cervical dislocation. Tissues were rapidly excised and snap

frozen in liquid nitrogen or fixed in 10% formalin.

Respiration and mitochondrial function analysis

Mitochondrial function in cells treated with vehicle (BSA) or palmitate was assessed as

previously described[15] and respiratory analysis of skeletal muscle biopsies was also

performed as previously described[11].

Lipidomics and metabolite analysis

To determine cellular lipid profiles, ~$1e^6$ cells were collected in 100µl of PBS and frozen at -

80°C, or ~10mg of muscle was homogenised in 100µl of PBS, and lipids were determined as

previously described [16]. For detection of Glu and GSH, cells in 6-well plates underwent

metabolic arrest by washing in 1mL ultrapure water before being frozen instantaneously by

the addition of liquid nitrogen. To extract polar metabolites, ice-cold methanol:chloroform

(9:1) containing internal standards (0.5nM 13C-sorbitol and 5nM 13C, 15N-valine) was

added. Metabolites were detected using LC and high resolution QTOF mass spectrometry

previously described[17] with the following modifications. Samples (10µL) were injected onto

an Agilent 1290 LC fitted with a SeQuant ZIC®-pHILIC column (2.1 x 150 mm, 5µm; Merck)

using 20mM ammonium carbonate, pH 9.0 (Sigma-Aldrich) and 100% acetonitrile as the

mobile phases.

Microarray and gene expression analysis

For comparative transcriptomics analysis, each group consisted of three biological replicates and microarray analysis was performed as previously described[11] and conform to MIAME guidelines. Genes found to be significantly altered in the same direction in both cell and skeletal muscle data sets (n = 236) were analysed by gene set enrichment analysis using KEGG pathways. Gene expression was measured using real time RT-PCR as previously described[18]. Primer sequences are available in Table S1.

Immunoprecipitation and western blot analysis

Cells were collected in lysis buffer (50mM Tris pH 7.5, 1mM EDTA, 1mM EGTA, 10% glycerol, 1% Triton X-100, 50mM NaF, 5mM sodium pyrophosphate, 1mM DTT, 1X protease inhibitor cocktail (Merck)) and ~20mg skeletal muscle was homogenised in 10 volumes of lysis buffer using a handheld homogeniser. Protein concentration was determined using the BCA assay (Pierce). Immunoprecipitation and western blotting were performed as previously described[19]. Antibody details are listed in Table S2.

Insulin/isotopic glucose administration and stable isotope metabolomics

Mice were administered 200uCi/kg of 2[1,2-^{3}H]-deoxyglucose and 100uCi/kg of 1-^{14}C glucose, with or without 1.2U/kg insulin, following a 5hr fast. Blood glucose was determined using a handheld glucometer (Accu-Chek Performa, Merck) and ~5μL blood was obtained from the tail tip prior to tracer administration and 5, 15 and 30min after tracer administration. Plasma tracer concentration and tissue 2-deoxyglucose clearance were determined as we have previously described [20]. To determine 1-^{14}C glucose incorporation

into glycogen, ~10-15mg of tibialis anterior muscle was digested in 1M KOH at 70°C for 20

min and glycogen was precipitated with saturated Na_2SO_4, washed twice with 95% ethanol

and resuspended in acetate buffer (0.84% sodium acetate, 0.46% acetic acid, pH 4.75)

containing 0.3mg/mL amyloglucosidase (Merck). Glycogen was digested overnight at 37°C

before glucose content was quantified using the glucose oxidase method[15] and ^{14}C-glucose

incorporation was measured. To determine 1-^{14}C glucose incorporation into lipids, 5-10mg

of TA muscle was homogenised in chloroform/methanol (2:1) and mixed overnight at room

temperature. Organic and inorganic phases were separated, and the lower organic phase

was collected and evaporated under N_2 at 45°C. The dried extract was resuspended in

absolute ethanol and TG content was assayed using TG GPO-PAP reagent (Merck) and ^{14}C-

glucose incorporation was measured.

To assess oxidative glucose utilisation, mice were administered a bolus of 50mg of [U-^{13}C]

glucose (Sigma-Aldrich) via oral gavage. At 60 min later, mice were humanely killed by

cervical dislocation and skeletal muscles were immediately collected. Targeted

metabolomics and analysis of [U-^{13}C] labelling was performed as we have previously

described[20].

Measurement of apoptosis and cell viability.

Analysis of apoptotic cells was performed by dual staining with FITC-conjugated Annexin V

(Merck) and propidium iodide (PI; Thermo-Fischer, Waltham, MA, USA) and was optimised

for adherent cells. For measurement of apoptosis in tissues, caspase 3 activity was

measured using Caspase-Glo 3/7 assay (Promega, Alexandria, Australia). Quantification of

viable cells was performed by staining with 7-aminoactinomycin D (7-AAD; Merck) and flow

cytometry or with crystal violet staining with colorimetric detection.

Reactive oxygen species detection

In cells, hydrogen peroxide (H_2O_2) was detected using Amplex Red assay (Invitrogen, Mt

Waverly, Australia). Cells were seeded into a 96-well plate at 25,000 cells/well. The

following day, cells were treated with vehicle (DMSO), 100µM mitoTEMPO or 100µM

apocynin for 30 min at 37°C. Cells were then co-incubated with 50µM Amplex Red and

0.1U/ml horseradish peroxidase (HRP) for a further 30 min at 37°C. Mitochondrial ROS was

designated as that sensitive to MitoTEMPO, while NADPH oxidase ROS was designated as

that sensitive to apocynin. For tissues, the OxiSelect In Vitro ROS/RNS Assay kit (Green

Fluorescence) (Cell Biolabs Inc., San Diego, CA, USA) was used according to the

manufacturer's instructions.

GPX4 activity and lipid peroxidation

Glutathione dependent peroxidase activity was measured using a colorimetric Glutathione

Peroxidase Assay Kit (AbCam). Cells were plated into 10cm tissue culture plates at $4x10^6$

cells per dish. After 3hrs, media was refreshed and cells incubated for 1hr, washed and

collected in 250ul of supplied assay buffer. For tissues, muscle lysate was analysed. Data

was then analysed as described by the manufacturer with results normalized to protein

concentration. Lipid peroxidation in both cells and muscle lysates was assessed using a lipid

peroxidation kit (Sigma). The assay was performed according to manufacturer's instructions,

including addition of butanol to the reaction.

Histology

Fixed TA muscles were embedded in paraffin before transverse sections were obtained at

5µm thickness and stained for H&E and Masson's trichrome. Slides were scanned (Aperio,

Leica Biosystems) and were analysed using photoshop and image J.

Statistical analysis.

All data are expressed as mean ± SEM. Individual data points identified as greater than two

standard deviations away from the mean were designated as outliers and removed. Data

was assessed for normality using the Shapiro-Wilk test. Differences between groups were

assessed using t-test, Kruskal-Wallis test, one-way ANOVA or two-way ANOVA as

appropriate using GraphPad Prism. Specific differences between groups were identified

using Dunn's or Tukey's multiple comparisons tests. For animal experiments where

opposing hind limbs were administered different rAAVs, such that control and experimental

conditions were contained within the one animal, paired t-tests were used. Differences

were considered statistically significant where $p < 0.05$.

RESULTS

HDAC4 and 5 are increased in models of lipotoxicity

To test the hypothesis that HDAC4 and 5 are increased by lipotoxicity, C2C12 myotubes

were exposed to 0.25 or 0.5mM palmitate, or BSA (vehicle), for 16 hr. Application of 0.5mM

palmitate induced alterations consistent with lipotoxicity in muscle cells, including increased

ceramide, diglyceride (DG) and triglyceride (TG) levels (Fig. 1A and S1A), lower *Ppargc1a*

gene expression (Fig. 1B) and a reduction in cellular respiration (Fig. 1C). The abundance of

both HDAC4 and HDAC5 protein was increased by 0.5mM palmitate, while HDAC5 protein

abundance was also increased by 0.25mM palmitate (Fig. 1D). There were no differences in

Hdac4 or *Hdac5* gene expression between groups (Fig. S1B).

To examine whether skeletal muscle HDAC4 and 5 are increased in an *in vivo* model of

lipotoxicity, the TA skeletal muscle of obese *db/db* and control heterozygous littermate mice

was analysed. Total ceramide and DG were were increased in skeletal muscle of *db/db* mice,

while there was a trend for TG to also be higher (Fig. 1E and S1C). Increased muscle lipid

concentrations in were associated with decreased *Ppargc-1α* gene expression (Fig. 1F),

reduced skeletal muscle respiratory responses (Fig. 1G) and increased HDAC4 and 5 protein

abundance (Fig. 1H). Skeletal muscle gene expression levels of *Hdac5*, but not *Hdac4*, were

increased in *db/db* mice (Fig. S1D). Notwithstanding the complex physiology of the *db/db*

model, these data suggest that skeletal muscle HDAC4 and 5 are increased in response to

lipotoxicity and are associated with reduced *Ppargc1a* expression and impaired oxidative

metabolism.

250 **Overexpression of HDAC4 and 5 in skeletal muscle represses *Pppargc1a* expression and**

251 **oxidative capacity**

252

253 To examine whether increased HDAC4 and 5 impacts skeletal muscle metabolism, a bilateral

254 skeletal muscle HDAC4 and 5 mouse model was developed using rAAV6 vectors expressing

255 HDAC4 and HDAC5 (Fig. 2A). In TA muscle, this model had increased *Hdac4* and *Hdac5* gene

256 expression (Fig. 2B) and protein (Fig. 2C). Overexpression of HDAC4 and 5 reduced *Ppargc1a*

257 expression (Fig. 2D) and the expression of a range of MEF2 and PGC-1α target genes

258 involved in oxidative and mitochondrial metabolism (Fig. 2E). These changes in metabolic

259 transcripts were associated with reduced protein abundance of ATP synthase subunits, but

260 not other subunits of electron transport chain complexes (Fig. 2F). Reduced ATP synthase

261 components was associated with blunted respiratory responses in muscles overexpressing

262 HDAC4 and 5 when driven by both succinate (Fig. 2G) and malate (Fig. 2H) as substrates.

263 Overexpression of HDAC4 and 5 was not associated with lipid accumulation (Fig. 2I). These

264 data indicate that increasing HDAC4 and 5 represses *Ppargc1a* gene expression and

265 oxidative capacity in skeletal muscle.

266

267 **Overexpression of HDAC4 and 5 in skeletal muscle inhibits oxidative glucose utilisation**

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269 Reduced skeletal muscle oxidative capacity associated with lipotoxicity is linked with

270 reduced insulin action and impaired glucose utilisation[4, 21, 22]. In bilateral skeletal muscle

271 HDAC4 and 5 mice administered either vehicle or insulin and glucose tracers, glucose

272 clearance was increased in skeletal muscles overexpressing HDAC4 and 5 (Fig. 3B). When

273 expressed relative to control skeletal muscle within each mouse, HDAC4 and 5

overexpression increased glucose clearance in vehicle but not insulin-stimulated conditions

(Fig. 3C). Insulin reduced the excursion of both glucose tracers (Fig. S2A-B). Overexpression

of HDAC4 and 5 increased glucose incorporation into glycogen (Fig. 3D) and increased

glycogen concentration (Fig. S2C). In contrast, insulin increased glucose incorporation into

lipids (Fig. 3E), which was associated with increased Akt phosphorylation at T308 (Fig. 3G)

and S473 (Fig. 3H). Consistent with glucose clearance, phosphorylation of TBC1D4 at S642

was increased in skeletal muscle overexpressing HDAC4 and 5 (Fig. 3I).

This was further explored using a targeted stable isotope metabolomics approach in

bilateral skeletal muscle HDAC4 and 5 mice (Fig. 3J). Overexpression of HDAC4 and 5

increased the abundance of lactate and succinate (Fig. 3K) and total ^{13}C labelling of

succinate and malate (Fig. 3L). Isotopologue analysis revealed accumulation of both M+0

and M+2 lactate in muscle overexpressing HDAC4 and 5 (Fig. 3M), suggesting both increased

non-oxidative glucose utilisation and increased malate/pyruvate cycle flux, respectively[23].

Succinate M+0, M+1 and M+2 isotopologues were increased in muscle overexpressing

HDAC4 and 5 (Fig. 3N), consistent with a major impairment in SDH activity[24], which is

bifunctional for both the TCA cycle and the electron transport chain. These data are also

supported by reduced succinate-driven respiration in muscles overexpressing HDAC4 and 5

(Fig. 2G). Similarly, HDAC4 and 5 overexpression was associated with increased malate M+0

and M+1 isotopologues (Fig. 3O). Together, these data indicate that increased HDAC4 and 5

is linked with defective oxidative glucose utilisation and increased non-oxidative glucose

utilisation in skeletal muscle.

297 HDAC4 and 5 enhance cell survival in response to lipotoxicity and supress the apoptosis

298 and ferroptosis cell death pathways

To better understand why this metabolic reprogramming occurs, important genes regulated

by HDAC4 and 5 in the context of lipotoxicity were identified using a comparative

transcriptomics approach. Specifically, the transcriptome altered in the skeletal muscle of

db/db mice in which HDAC4 and 5 was increased (Fig. 1J) was compared to the

transcriptome altered in myogenic C2C12 myoblasts stably overexpressing HDAC4 and 5

(Fig. S3A). Overexpression of HDAC4 and 5 in these cells reduced *Ppargc1a* gene expression,

suppressed OXPHOS and TCA cycle genes, and reduced oxidative capacity (Fig. S3B-D). The

comparative transcriptomic analysis and subsequent pathway analysis of coregulated genes

revealed the p53 signalling pathway related to cell survival as the only significantly

regulated pathway (Fig. S3E).

Profiling of downstream genes in this pathway in C2C12 myoblasts overexpressing HDAC4

and 5 revealed that several pro-apoptosis genes were reduced, including *Casp3* and *9, Cycs,*

Pmaip1 and *Bbc3* (Fig. 4A), consistent with suppression of apoptosis. Similarly, genes

involved in ferroptosis, a form of iron-mediated cell death involving lipid peroxidation [25],

were altered in ways that indicated suppression of ferroptosis, including increased *Slc7a11*

expression and reduced *Sat1* and *Alox15* expression (Fig. 4A). These data suggest that

increased HDAC4 and 5 inhibit apoptotic and ferroptotic cell death pathways. Indeed,

overexpression of HDAC4 and 5 in C2C12 myoblasts reduced the number of apoptotic cells

following exposure to the apoptosis-inducing agent camptothecin (Fig. 4B). Similarly, cell

viability was higher in cells overexpressing HDAC4 and 5 following exposure to the

ferroptosis-inducing agent RSL3 (Fig. 4C). These data raised the possibility that suppression

of the apoptosis and ferroptosis pathways by HDAC4 and 5 enhances cell survival in

response to lipotoxicity. To test this hypothesis, cells were exposed to increasing

concentrations of palmitate intended to challenge cell viability. Overexpression of HDAC4

and 5 enhanced the viability of cells exposed to both 1 and 2mM of palmitate compared

with control cells and resulted in cells being largely resistant to lipotoxicity (Fig. 4D). This

protection of cell viability was associated with reduced cleavage of caspase 3 and 9, the

irreversible events that trigger apoptosis (Fig. 4E), as well as fewer apoptotic cells (Fig. 4F) in

response to increasing concentrations of palmitate. Overexposure of western blots showed

that endogenous HDAC4 and 5 were increased by these high concentrations of palmitate

(Fig. S3F), similar to the lower concentrations of palmitate characterised previously (Fig. 1E).

Similarly, overexpression of HDAC4 and 5 reduced lipid peroxidation, the trigger for

ferroptosis induced-cell death, in response to increasing concentrations of palmitate (Fig.

4H). These data indicate that increased HDAC4 and 5 inhibit the apoptosis and ferroptosis

cell death pathways and enhance cell viability in response to lipotoxicity.

HDAC4 and 5 inhibit apoptosis by reducing p53 K120 acetylation

In several cancer cell types, HDAC5 has been linked with reduced acetylation of p53 at K120,

which inhibits p53 transcriptional activity and the expression of apoptosis genes, which

reduces apoptosis sensitivity[26, 27, 28]. Furthermore, acetylation of p53, including at K120, can

contribute to the transcriptional regulation of ferroptosis[29]. To explore whether reduced

acetylation of p53 at K120 is involved in suppression of apoptosis and ferroptosis by HDAC4

and 5 in myogenic cells, C2C12 myoblasts stably overexpressing HDAC4 and 5 were

transfected with wild type p53, or p53 in which K120 was mutated to either glutamine

(K120Q; acetylation mimetic gain-of function) or arginine (K120R; deacetylation mimetic

loss-of-function) (Fig. 5A). The acetylation of p53 at K120 was reduced by the

overexpression of HDAC4 and 5 (Fig. 5A). In cells overexpressing HDAC4 and 5, introduction

of the p53^{K120Q} acetylation mimetic mutant restored the expression of the pro-apoptosis

genes *Casp3, Casp9* and *Cycs* (Fig. 5B). However, the expression of *Slc7a11*, which opposes

ferroptosis, was not influenced by expression of this mutant (Fig. 5B). This suggests that

reduced acetylation of p53 at K120 by HDAC4 and 5 suppresses apoptosis, but not

ferroptosis, transcriptional programs. Expression of p53^{K120Q} also restored apoptosis in

HDAC4 and 5 overexpressing cells exposed to the apoptosis-inducing agent camptothecin

(Fig. 5C). Although p53 is also known to regulate aspects of cellular metabolism[30], gain and

loss-of-function K120 p53 mutants had no effect on either oxidative (Fig. S4A) or glycolytic

flux (Fig. S4B). To determine whether p53 K120 acetylation determines cell viability in

response to lipotoxicity, cells expressing WT p53 or p53^{K120R} were exposed to 2mM

palmitate. However, the p53^{K120R} mutant did not influence cell viability in response to

palmitate exposure (Fig. 5D). Furthermore, the apoptosis inhibitor, Z-DED-FMK, had no

effect on cell viability in response to palmitate exposure (Fig. 5E), suggesting that other

mechanisms are also involved in the cell death response to lipotoxicity.

HDAC4 and 5 inhibit multiple metabolic inputs to the ferroptosis pathway

The role of ferroptosis-mediated mechanisms of cell death (Fig. 5F) were further explored.

The ferroptosis inhibitor Ferrostatin enhanced C2C12 myoblast viability following exposure

to 2mM palmitate (Fig. 5G). Overexpression of HDAC4 and 5 enhanced cell viability in

response to increasing concentrations of Erastin (Fig. 5H), an agent that induces ferroptosis

by inhibiting system x_c and glutamate and cysteine exchange[31], which in turn reduces

glutathione (GSH) levels and results in lipid peroxidation through multiple mechanisms (Fig.

5F). Consistent with HDAC4 and 5 increasing the expression of *Slc7a11* (Fig. 4A),

overexpression of HDAC4 and 5 reduced intracellular glutamate concentrations, tended to

increase intracellular GSH and increased the GSH/glutamate ratio (Fig. 5I). This was

associated with increased glutathione peroxidase (GPX) activity in cells overexpressing

HDAC4 and 5 (Fig. 5J) and reduced total H_2O_2 production (Fig. S4C), including from

mitochondria and NADPH oxidases (Fig. 5K). There were no differences in the levels of

phosphatidylcholine (PC), lysophosphatidylcholine (LPC), lysophosphatidyl-ethanolamine

(LPE) and phosphatidylethanolamine (PE) lipids that undergo peroxidation during

ferroptosis[32] in skeletal muscle of bilateral HDAC4 and 5 mice (Fig. S4D). Therefore, these

data indicate that increased HDAC4 and 5 alters redox inputs to ferroptosis that are

regulated by oxidative capacity.

HDAC4 and 5 are required to suppress apoptosis and ferroptosis and maintain muscle

mass in obese mice

To establish whether HDAC4 and 5 suppress apoptosis and ferroptosis in skeletal muscle in

response to lipoxicity *in vivo*, a bilateral skeletal muscle loss-of-function HDAC4 and 5 model

was developed in obese *db/db* mice using AAV6 vectors (Fig. 6A). This loss-of-function

approach employed active-site HDAC4 and 5 mutants (D832N HDAC4 and D861N HDAC5),

which we have previously described as acting in a dominant negative (DN) manner when

overexpressed[11]. Overexpression of these mutants in skeletal muscle increases the

expression of *Ppargc1a* and other metabolic genes and enhance oxidative metabolism[11].

Expression of DN HDAC4 and 5 to *db/db* mice increased HDAC4 and 5 gene (Fig. 6B) and

protein (Fig. 6C) expression and increased the expression of *Ppargc1a* (Fig. 6D). Consistent

with these findings, respiratory responses were increased in muscle expressing DN HDAC4

and 5 (Fig. 6E). Expression of DN HDAC4 and 5 increased caspase 3 activity (Fig. 6F) and lipid

peroxidation (Fig. 6G), functional readouts of apoptosis and ferroptosis, respectively.

Examination of the mechanisms involved in HDAC4 and 5-mediated apoptosis revealed that

p53 acetylation of K120 tended to be higher (Fig. 6H), and the expression of p53-dependent

pro-apoptosis genes, including *Casp3, Casp9* and *Bbc3* was increased (Fig. 6I). The

ferroptosis mechanisms regulated by HDAC4 and 5 were also examined. In contrast to

observations in myogenic cells, the expression of *Slc7a11* in skeletal muscle was low and

close to assay detection limits (Fig. S5A). This suggests that system x_c likely has only a minor

role in the regulation of ferroptosis in skeletal muscle. There were no differences in GPX

activity between groups (Fig. S5B). However, expression of DN HDAC4 and 5 increased ROS

(Fig. 6J) and increased *Sat1* and *Alox15* expression (Fig. 6K), indicating that increased

capacity for lipid peroxidation. Increased apoptosis and ferroptosis in skeletal muscles

expressing DN HDAC4 and 5 was associated with reduced mass of the gastrocnemius and

the TA muscles (Fig. 6L). In the TA muscle, there was no difference in fibre diameter

between groups (Fig. S5C). However, Masson's trichrome staining showed sporadic areas of

localised fibrosis in response to DN HDAC4 and 5 overexpression (Fig. 6M). In skeletal

muscles overexpressing DN HDAC4 and 5 there were also discreet regions of fibres with

centralised nuclei (Fig. 6N), indicative of regenerating muscle fibres. These data show that

HDAC4 and 5 are required to suppress apoptosis and ferroptosis and to maintain muscle

mass and integrity in obese mice.

DISCUSSION

Lipotoxicity has a major impact on the metabolism, function and survival of various tissues including skeletal muscle. The current study has revealed that increases in HDAC4 and 5 in response to lipotoxicity induce transcriptional repression of oxidative metabolism and of the apoptosis and ferroptosis cell death pathways in both myogenic cells and skeletal muscle. The impairment in oxidative metabolism also reduces redox inputs to the ferroptosis pathway. These data indicate that metabolic reprogramming in skeletal muscle in response to lipotoxicity is directly linked with cell survival responses.

Previous findings revealed that lipotoxicity is associated with suppression of a pro-apoptosis transcriptional program in skeletal muscle, with consequences for maintenance of muscle mass[33]. Our data show that the class IIa HDACs are essential for this response, as loss of HDAC4 and 5 function in skeletal muscle in a model of lipotoxicity increased apoptosis genes and markers of apoptosis, which was associated with reduced muscle mass. Furthermore, a readout of ferroptosis was also increased. The exact contribution of these cell death pathways to the reduction in muscle mass observed remains to be determined. However, inhibition of ferroptosis alone enhanced cell viability following palmitate exposure while inhibition of apoptosis alone did not, possibly revealing a greater importance for ferroptosis. The role of ferroptosis in skeletal muscle pathologies is just emerging but has been implicated in the development of sarcopenia, rhabdomyolysis and inflammatory myopathies[34]. Our study also implicates skeletal muscle ferroptosis in sarcopenic obesity.

While there is much debate in the literature about the relationship between mitochondrial

capacity and function and insulin action[35], the reduction in oxidative capacity induced by

HDAC4 and 5 did not result in overt insulin resistance. Overexpression of HDAC4 and 5

increased basal glucose clearance, with more glucose directed to glycogen synthesis.

Oxidative utilisation of glucose was impaired through the TCA cycle, particularly at the level

of succinate. The levels of succinate are thought to reflect the redox state of the

mitochondrial coenzyme Q pool, with higher concentrations of reduced CoQ ($CoQH_2$)

preventing the oxidation of succinate by SDH[36]. Oxidation of succinate by SDH is tightly

associated with reverse electron flow to complex I of the electron transport chain and

reduced ROS production[37]. Indeed, succinate oxidation-dependent ROS production is critical

for pro-inflammatory cytokine production by macrophages[38], adipose tissue

thermogenesis[39] and the activity of carotid body oxygen sensing K^+ channels[40]. In the

context of the present study, HDAC4 and 5-mediated impairments in succinate oxidation

and reduced ROS production likely contribute to inhibition of the ferroptosis pathway and

preservation of cell viability in response to lipotoxicity. Additionally, impairments in TCA

cycle activity have recently been found to promote cytosolic glutathione synthesis that

increases antioxidant capacity[24], which would also inhibit ferroptosis. Together, these data

indicate that inhibition of oxidative substrate utilisation is an important adaptation to

lipotoxicity.

In conclusion, this study provides evidence that in response to lipotoxicity the class IIa

HDACs unite impairments in skeletal muscle oxidative metabolism with inhibition of the

apoptosis and ferroptosis cell death pathways to preserve muscle integrity. These findings

provide key new insights into why certain metabolic adaptations occur in response to excess

lipids and advance our understanding of the aetiology of metabolic diseases driven by

lipotoxicity and excess nutrient availability.

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AUTHOR CONTRIBUTIONS

Conceptualization, SDM, TC and SLM; Methodology, SDM, TC, DDS, GMK, CRB, PG, FMC,

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Resources, DLT, PJM, CRB, PG, MAF and SLM; Writing – original draft, SDM, TC and SLM;

Writing – review and editing, all authors; Funding acquisition, SLM.

DECLARATION OF INTERESTS

The authors declare no competing interests related to this article.

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490 **AVAILABILITY OF DATA AND MATERIALS**

491 The microarray datasets and are available at Gene Expression Omnibus (GSE215185).

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     FIGURE LEGENDS

Figure 1: HDAC4 and 5 are increased in models of lipotoxicity. (A) Total Cer, DG and TG

lipids (One-way ANOVA; Cer p<0.0001 (F(2,14)=73.86, ^{f}Tukey's multiple comparisons test

p<0.0077 vs. 0mM, *Tukey's multiple comparisons test p<0.0001 vs. 0mM and vs 0.25mM;

DG p<0.0001 (F(2,14)=38.50 *Tukey's multiple comparisons test p<0.0001 vs. 0mM and vs

0.25mM; TG p<0.0017 (F(2,14)=10.38 *Tukey's multiple comparisons test p=0.0333 vs.

0mM); (B) *Ppargc1a* gene expression (One-way ANOVA p<0.0161 (F(2,21)=5.054, ^{f}Tukey's

multiple comparisons test p<0.0484 vs. 0mM *Tukey's multiple comparisons test p=0.0210

vs. 0mM); (C) Oxygen consumption rate (OCR; One-way ANOVA p<0.0255 (F(2,25)=4.262

*Tukey's multiple comparisons test p<0.0001 vs. 0mM and vs 0.25mM), and; (D) HDAC4 and

5 protein in C2C12 myotubes treated with 0mM (BSA vehicle), 0.25mM or 0.5mM palmitate

(PA) for 16 hrs (HDAC4, Kruskal-Wallis test, p=0.049 (X^2 = 5.591), *Dunn's multiple

comparison test p=0.0380; HDAC5, One-way ANOVA, p=0.038 (F(2,6)=5.903) ^{f}Tukey's

multiple comparisons test p=0.0318, *Tukey's multiple comparisons test p=0.0251). (E) Total

Cer, DG and TG lipids (Unpaired t-tests, Cer p=0.0094, DG p=0.0022, TG p=0.0616); (F)

Ppargc1a gene expression (Unpaired t-test, p=0.0357); (G) Basal, substrate and ADP-driven

OCR from muscle biopsies (Two-way ANOVA, $^\varnothing$genotype p=0.0493, F(1,33)=4.166), and; (H)

HDAC4 and 5 protein in Control and *db/db* mice (Unpaired t-tests, $^\#$HDAC4 p=0.0375,

$^\#$HDAC5 p=0.0308). Data are mean±SEM, n=3-6 biological replicates per group for cell

experiments and 6-8 per group for animal experiments.

Figure 2: Overexpression of HDAC4 and 5 in skeletal muscle suppresses *Pppargc1a*

expression and oxidative capacity. (A) The bilateral AAV6 HDAC4 and 5 overexpression

mouse model. (B) *Hdac4* and *Hdac5* gene expression (Paired t-test, [#]*Hdac4* *p*=0.0246,

[#]*Hdac5* *p*=0.0305); (C) HDAC4 and 5 protein; (D) *Pppargc1a* gene expression (Paired t-test,

p=0.0006); (E) Metabolic gene expression (Paired t-test, [#]*Ppard* *p*=0.0055, [#]*Cpt1b* *p*=0.0106,

[#]*Pdk4* *p*=0.0029, [#]*Cox7a* *p*=0.0087, [#]*CytC* *p*=0.0020, [#]*Idh1* *p*=0.0179, [#]*Fh* *p*=0.0015, [#]*Mcad*

p=0.0028, [#]*Hadh* *p*=0.0029, [#]*Echs1* *p*=0.0023); (F) Respiratory chain complex subunit protein

(Paired t-test, [#]Complex V *p*<0.0001); (G) Basal, succinate and ADP-driven oxygen

consumption rate (OCR) from muscle biopsies (Two-way ANOVA, [∅]genotype *p*=0.0247,

F(1,43)=5.417); (H) Basal, malate and ADP-driven OCR from muscle biopsies (Two-way

ANOVA, [∅]genotype *p*=0.0036, *F*(1,37)=9.661), and; (I) Ceramide (Cer), diglyceride (DG),

triglyceride (TG), phosphatidylethanolamine (PE), lysophosphatidylethanolamine (LPE),

phosphatidylcholine (PC), lysophosphatidylcholine (LPC), phosphatidylinositol (PI),

lysophosphatidylinositol (LPI), phosphoglycerol (PG) and phosphatidylserine (PS) lipids in

Control and HDAC4 and 5 overexpressing skeletal muscle. Data are mean±SEM, n=4-6 per

group.

Figure 3: Overexpression of HDAC4 and 5 in skeletal muscle inhibits oxidative glucose

utilisation. (A) Experimental overview of insulin and isotopic glucose tracers in the bilateral

AAV6 HDAC4 and 5 overexpression model. (B) Glucose clearance (Two-way ANOVA,

$^{\varnothing}$genotype p=0.0328, F(1,27)=5.061); (C) Glucose clearance in muscle overexpressing HDAC4

and 5 relative to Control (Paired t-test, [#]Vehicle p=0.0355); (D) ^{14}C-glucose incorporation

into glycogen (Two-way ANOVA, $^{\varnothing}$genotype p=0.0372, F(1,24)=4.864); (E) ^{14}C-glucose

incorporation into lipid (Two-way ANOVA, ^Insulin p=0.0009, F(1,21)=14.94); (F)

Representative images of insulin signalling components; (G) pT308 Akt (Two-way ANOVA,

^Insulin p=0.0010, F(1,27)=13.75); (H) pS473 Akt (Two-way ANOVA, ^Insulin p<0.0001,

F(1,28)=33.13), and; (I) pS642 TBC1D4 (Two-way ANOVA, $^{\varnothing}$genotype p=0.0011,

F(1,25)=13.60) in bilateral AAV6 HDAC4 and 5 mice administered insulin and isotopic

glucose tracers. (J) Experimental overview of stable isotope metabolomics in the bilateral

AAV6 HDAC4 and 5 overexpression model. (K) Total metabolite abundance (Paired t-test,

[#]Lactate p=0.0447, [#]Succinate p=0.0355); (L) Total ^{13}C labelling of glycolytic and TCA cycle

metabolites (Paired t-test, [#]Succinate p=0.0447, [#]Malate p=0.0355); (M) Lactate

isotopologue (Paired t-test, [#]M0 p=0.0448, [#]M2 p=0.0299); (N) Succinate isotopologues

(Paired t-test, [#]M0 p=0.0230, [#]M1 p=0.0002, [#]M2 p=0.0005), and; (O) Malate isotopologues

(Paired t-test, [#]M1 p=0.0178) in bilateral AAV6 HDAC4 and 5 mice administered [13]C- glucose

tracer. (E) Data are mean±SEM, n=5-8 per group.

Figure 4: HDAC and 5 enhance cell survival in response to lipotoxicity and supress the

apoptosis and ferroptosis cell death pathways. (A) Expression of p53-pathway genes

involved in pro-apoptosis, anti-apoptosis, intrinsic apoptosis and ferroptosis (Unpaired t-

test, [#]*Casp3* p=0.0451, [#]*Casp9* p=0.0057, [#]*Cycs* p=0.0015, [#]*Pmaip1* p<0.0001, [#]*Bbc3*

p=0.0253, [#]*Bcl2* p=0.0034, [#]*Bcl2l1* p=0.0008, [#]*Slc7a11* p<0.0001, [#]*Sat1* p<0.0001, [#]*Alox15*

p=0.0001); (B) Apoptotic cells in response to the apoptosis-inducing agent Camptothecin

(Two-way ANOVA, genotype p<0.0001 F(1,12)=349.3, treatment p<0.0001 F(2,12)=270.4,

interaction p<0.0001 F(2,12)=149.5; [#]p<0.05 vs Control for same treatment, *p<0.05 vs

vehicle by Tukey's multiple comparisons tests); (C) Cell viability in response to the

ferroptosis-inducing agent RSL3 (Two-way ANOVA, genotype p<0.0001 F(1,12)=1645,

treatment p<0.0001 F(1,12)=36.09, interaction p<0.0090 F(1,12)=9.665; [#]p<0.05 vs Control

for same treatment, *p<0.05 vs 0.25μM RSL by Tukey's multiple comparisons tests); (D) Cell

viability in response to palmitate (Two-way ANOVA, genotype p<0.0001 F(1,12)=3374,

treatment p<0.0001 F(2,12)=1012, interaction p<0.0001 F(2,12)=684.8; [#]p<0.05 vs Control

for same treatment, *p<0.05 vs vehicle by Tukey's multiple comparisons tests); (E) Full-

length (FL) and cleaved (CL) caspase 3 and 9 in response to palmitate; (F) Apoptotic cells in

response to palmitate (Two-way ANOVA, genotype p<0.0001 F(1,12)=1468, treatment

p=0.0001 F(2,12)=20.35, interaction p<0.0050 F(2,12)=8.498; [#]p<0.05 vs Control for same

treatment, *p<0.05 vs vehicle by Tukey's multiple comparisons tests); (G) Lipid peroxidation

in response to palmitate (Two-way ANOVA, genotype p<0.0001 F(1,12)=313.4, treatment

p<0.0103 F(2,12)=67.31; [#]p<0.05 vs Control for same treatment by Tukey's multiple

comparisons tests) in Control and HDAC4 and 5 overexpressing C2C12 myoblasts. Data are

mean±SEM, n=3-4 biological replicates per group.

Figure 5: HDAC4 and 5 inhibit apoptosis by reducing p53 K120 acetylation and reduces

multiple metabolic inputs to the ferroptosis pathway. (A) Acetylated p53 at lysine 120

(aK120 p53); (B) Expression of caspase 3 (*Casp3;* One-way ANOVA p=0.0040 X^2=0.8408,

^p<0.05 vs Control + WT p53 and HDAC4&5 + K120Q p53 by Tukey's multiple comparisons

test), caspase 9 (*Casp9;* One-way ANOVA p=0.0025 X^2=0.8650, ^p<0.05 vs Control + WT p53

and HDAC4&5 + K120Q p53 by Tukey's multiple comparisons test), cytochrome c (*Cycs;* One-

way ANOVA p=0.0033 X^2=0.8518, ^p<0.05 vs Control + WT p53 by Tukey's multiple

comparisons test) and the cystine/glutamate antiporter xCT (*Slc7a11;* One-way ANOVA

p<0.0001 X^2=0.9769, ^p<0.05 vs Control + WT p53 by Tukey's multiple comparisons test); (C)

Percentage of apoptotic cells following exposure to camptothecin (One-way ANOVA

p=0.0014 X^2=0.8875, ^p<0.05 vs Control + WT p53 and HDAC4&5 + K120Q p53 by Tukey's

multiple comparisons test); (D) Cell viability 16 hrs after palmitate exposure (Two-way

ANOVA, treatment p<0.0001 F(1,12)=50.44, genotype p=0.0361 F(1,12)=5.56; *p<0.05 vs

vehicle for same genotype by Tukey's multiple comparisons tests) in C2C12 myoblasts

expressing wild type (WT) or K120R (loss-of-function) p53 treated with vehicle or 2mM

palmitate for 24 hrs. (E) Cell viability following palmitate exposure and co-incubation with

vehicle (DMSO) or increasing concentrations of Z-DEVD-FMK (One-way ANOVA p=0.3282);

(F) Schematic showing key regulatory points in the ferroptosis pathway; (G) Cell viability

following palmitate exposure and co-incubation with vehicle (DMSO) or increasing

concentrations of Ferrostatin (One-way ANOVA p=0.0323 X^2=0.5337, *p<0.05 vs Vehicle by

Tukey's multiple comparisons test); (H) Cell viability following exposure to increasing

concentrations of Erastin (Two-way ANOVA, genotype p<0.0001 F(1,18)=293.7, treatment

p<0.0001 F(2,18)=139.6, interaction p<0.0001 F(2,18)=50.88; #p<0.05 vs Control for same

treatment, *p<0.05 vs Vehicle same genotype by Tukey's multiple comparisons tests); (I)

Glutamate (Glu), glutathione (GSH) and the GSH/Glu ratio (Unpaired t-tests, [#]Glu p=0.0049,

[#]GSH/Glu p=0.0023); (J) Glutathione peroxidase (GPX) activity (Unpaired t-test, p<0.0001),

and; (K) H_2O_2 derived from mitochondria (mito), NADPH oxidases (NOX) and other sources

(Unpaired t-tests, [#]Mito p=0.0105, [#]NAPDH Ox. p<0.0001, [#]Other p=0.0004) in Control or

HDAC4 and 5 overexpressing C2C12 myoblasts. Data are mean±SEM, n=4-10 biological

replicates per group.

Figure 6: HDAC4 and 5 are required to suppress apoptosis and ferroptosis and maintain

muscle mass in obese mice. (A) The bilateral AAV6 dominant negative (DN) HDAC4 and 5

overexpression *db/db* mouse model. (B) *Hdac4* and *Hdac5* gene expression (Paired t-tests,

[#]*Hdac4* *p*=0.0003, [#]*Hdac5* *p*=0.0002); (C) HDAC4 and 5 protein; (D) *Ppargc1a* gene

expression (Paired t-tests, *p*=0.0191); (E) Basal, substrate and ADP-driven oxygen

consumption rate (OCR) from muscle biopsies (Two-way ANOVA, genotype *p*=0.0482

F(1,42)=4.141); (F) Caspase 3 activity (Paired t-tests, *p*=0.0292); (G) Lipid peroxidation

(Paired t-tests, *p*=0.0013); (H) Acetylated p53 at lysine 120 (aK120 p53); (I) Expression of

apoptosis genes (Paired t-tests, [#]*Casp3* *p*=0.0036, [#]*Casp9* *p*=0.0064, [#]*Bbc3* *p*=0.0024); (J)

Reactive oxygen species (ROS; Paired t-tests, *p*=0.0292); (K) Expression of ferroptosis genes

(Paired t-tests, [#]*Sat1* *p*=0.0257, [#]*Casp9* *p*=0.0286); (L) Mass of the gastrocnemius (Gastroc.)

and tibialis anterior (TA) skeletal muscles (Paired t-tests, [#]Gastroc. *P*<0.0001, [#]TA *p*=0.0004);

(M) Masson's trichrome staining, and; (N) H&E staining of sections of the TA muscle in

Control and DN HDAC4 and 5 overexpressing skeletal muscle in *db/db* mice. Arrows indicate

fibres with centralised nuclei. Data are mean±SEM, n=6-10 per group.