

Resistance Training Modulation of Fat Metabolism in Postmenopausal Women with Obesity

Introduction

- Prediabetes, a comorbidity of obesity, affects more than one-half of women over 60 years of age, and is a precursor of many disease
- It is believed that obese individuals have a reduced response to both lipolytic and antilipolytic stimuli.
- The flexibility to adapt both basal lipolysis as well as the response to lipolytic and antilipolytic stimuli has been presented as a determinant of future weight gain, impaired glucose control, and eventually type 2 diabetes
- Lipolysis is the process of breaking down lipids. It entails hydrolysis as it breaks down a triglyceride into a fatty acid and a glycerol.

- It is known that endurance exercises improving cardiovascular endurance can help reduce the risk for these diseases, however, other exercise types have not been investigated.
- The increased plasma concentration of epinephrine, which activates betareceptors in adipocytes, is regarded to be the main component stimulating adipose tissue lipolysis during exercise.

Abstract

- Participants will undergo 12 weeks of either resistance or endurance training and both their regional lipolytic activity and whole-body fat metabolism will be assessed before and after the exercise training.
- Our study hopes to yield results that will have implications on improving health guidelines to prevent diabetes and other metabolism related disorders in postmenopausal women.
- Our hypothesis is that both resistance and endurance training will have positive impacts on fat metabolism by increasing lipolytic flexibility.

Methods

- 120 participants were chosen to reinforce statistical significance within the differences in lipolytic activity and other variables.
- For testing, each group was further subdivided into either acute exercise or glucose clamp treatment each of which is combined with microdialysis procedures in the subcutaneous adipose tissue.



- For the main testing procedure, each participant underwent microdialysis, a technique where a saline-ethanol mixture is perfused into probes inserted into fat deposits in the gluteal and abdominal fat tissues.
- The probes collected dialysate (fluid) samples, which give data on the participant's regional lipolytic activity as measured by the glycerol concentration in the dialysate sample

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Fatty acid

glycerol

Methods Continued



Key: = blood draws; = breath samples; = placement of dialysate tubes = dialysate collection; RMR = resting metabolic rate; == = time interval RMR; RER = respiratory exchange ration and O2 consumption; SM = standardized meal I.V. = intravenous; AT = adipose tissue;

Results



affecting lipid metabolism, and eating disorders

Characteristics of study participants

	Endurance (N = 8)		Resistance (N = 11)	
	Insulin Clamp (N = 5)	Acute Ex. (N = 3)	Insulin Clamp (N = 5)	Acute Ex. (N = 6)
Age (yrs.)	58.80 ± 2.10	56.67 ± 4.10	60.20 ± 2.22	59.67 ± 2.70
Height (cm)	160.0 ± 4.02	164.7 ± 1.53	166.6 ± 3.27	166.6 ± 2.33
Weight (kg)	87.22 ± 4.37	92.97 ± 2.33	97.14 ± 4.28	97.88 ± 3.59
BMI (kg/m²)	34.14 ± 1.45	34.26 ± 0.47	35.11 ± 1.93	35.40 ± 1.70
FBG (mg/dL)	111.5 ± 2.53	97.33 ± 4.91	106.0 ± 3.21	94.00 ± 4.27
HbA1c (%)	5.650 ± 0.10	5.700 ± 0.06	5.920 ± 0.28	5.860 ± 0.08
2-hr OGTT (mg/dL)	150.3 ± 11.76	139.0 ± 2.52	139.8 ± 19.54	145.0 ± 13.90
WHR	0.8650 ± 0.02	0.8733 ± 0.02	0.7920 ± 0.04	0.8620 ± 0.04

response to glucose; WHR= Waist-to-hip ratio

• Inclusion Criteria: Age: 50-70, postmenopausal at least 2 years, BMI: 30-39.9 kg/m², prediabetes, sedentary • Exclusion Criteria: Blood pressure above 140/90 mmHg, type 1 or 2 diabetes, use of tobacco, medications

• Data are shown as means ± SEM; BMI= Body Mass Index; FGB= Fasting Blood Glucose; HbA1c= Amount of blood sugar (glucose) attached to hemoglobin (oxygen carrier); OGTT= Glucose tolerance test, measures

References

Acknowledgements



Conclusions

• As our project is still in the experimental data collection stage, final results have not been determined

• However, preliminary data demonstrates that acute resistance exercise increases lipolysis in non-obese women.

• Additionally, it is known that endurance training increases lipolytic flexibility as per results of existing research.

• These studies inform our hypothesis that both endurance and resistance training will increase lipolytic flexibility.



• Plasma glycerol, glycerol Ra, and dialysate glycerol from microdialysis probes placed in abdominal and femoral sc adipose tissue before (•) and after (weeks of endurance training during a low dose (10 mU/m2·min) and moderate dose (20 mU/m2·min) insulin infusion.

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