



Needs in omega 3 and ocular pathologies

Lionel Brétillon

► To cite this version:

| Lionel Brétillon. Needs in omega 3 and ocular pathologies. Journées Chevreul 2011 - Lipids and Brain
| 2, Mar 2011, Paris, France. pp.1-27. hal-02804634

HAL Id: hal-02804634

<https://hal.inrae.fr/hal-02804634v1>

Submitted on 5 Jun 2020

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.



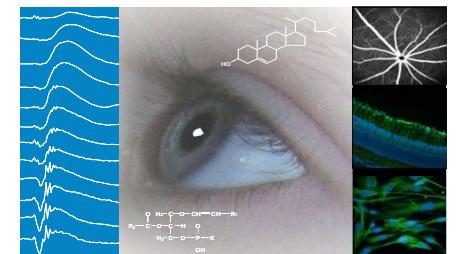
Needs in omega-3 and ocular pathologies

Lionel BRETILLON, PhD

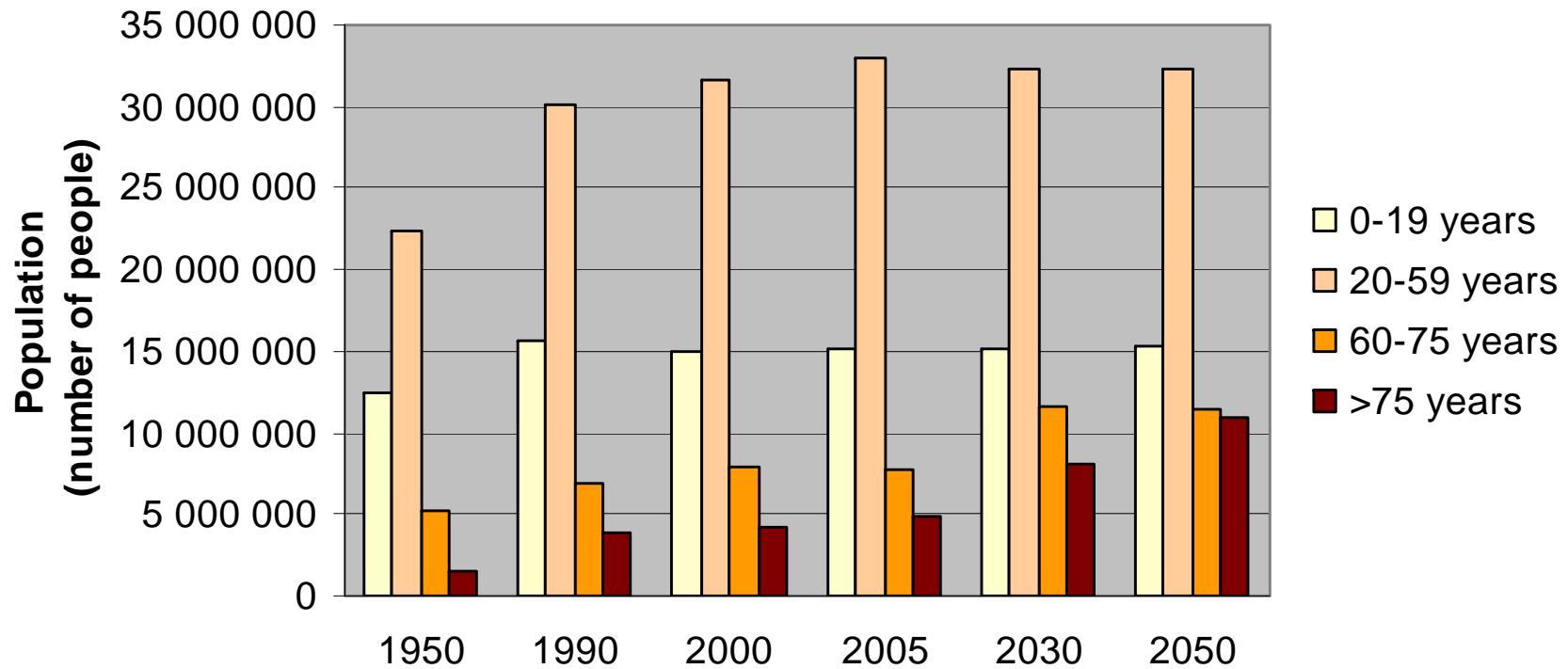
Eye & Nutrition Research Group

Dijon

FRANCE



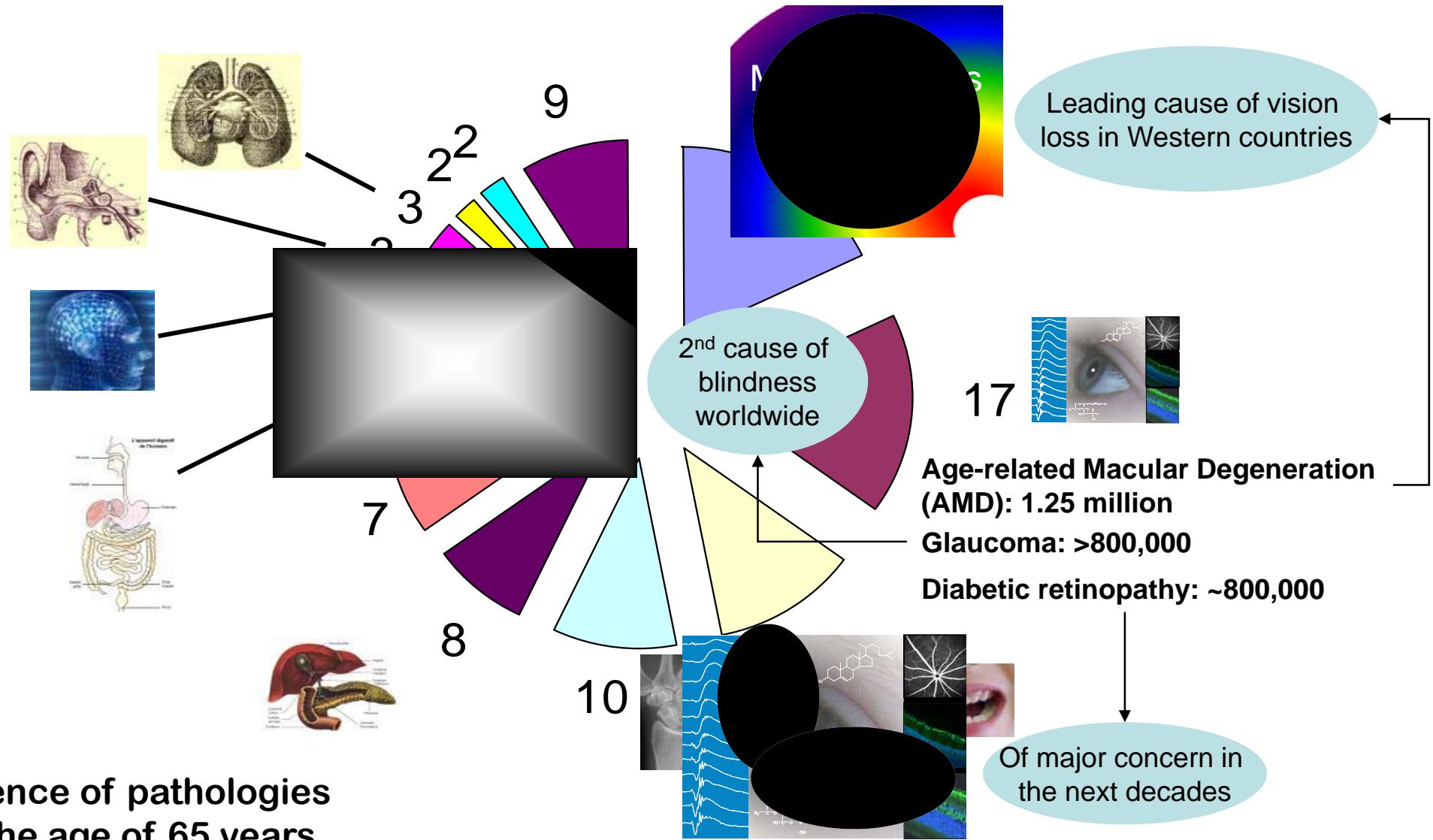
Aging: a socio-economic issue in the future



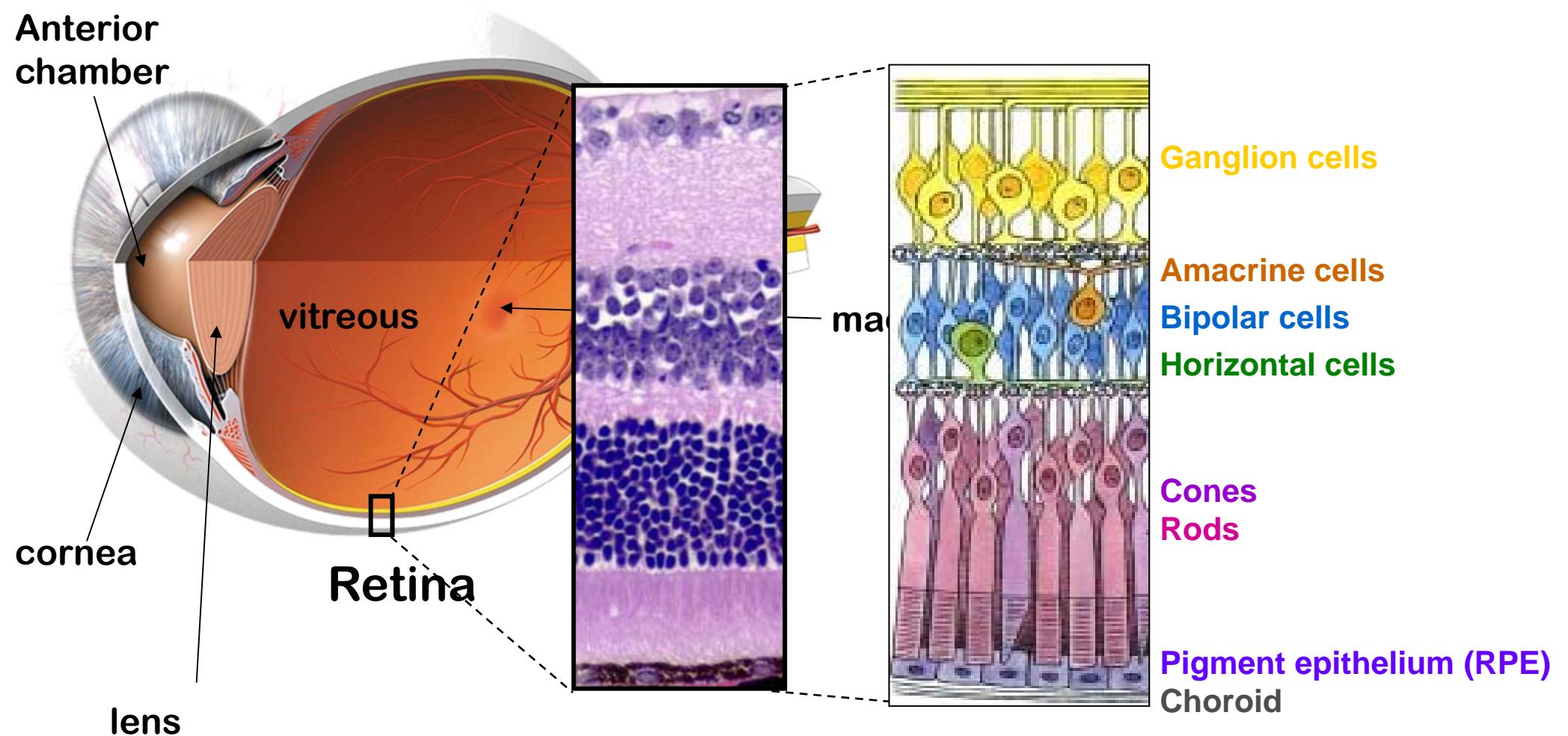
Population 2050 vs 2000
>60 years: ×2
>75 years: ×3
>85 years: ×5

in France

The neurosensory retina: a sensitive target of aging



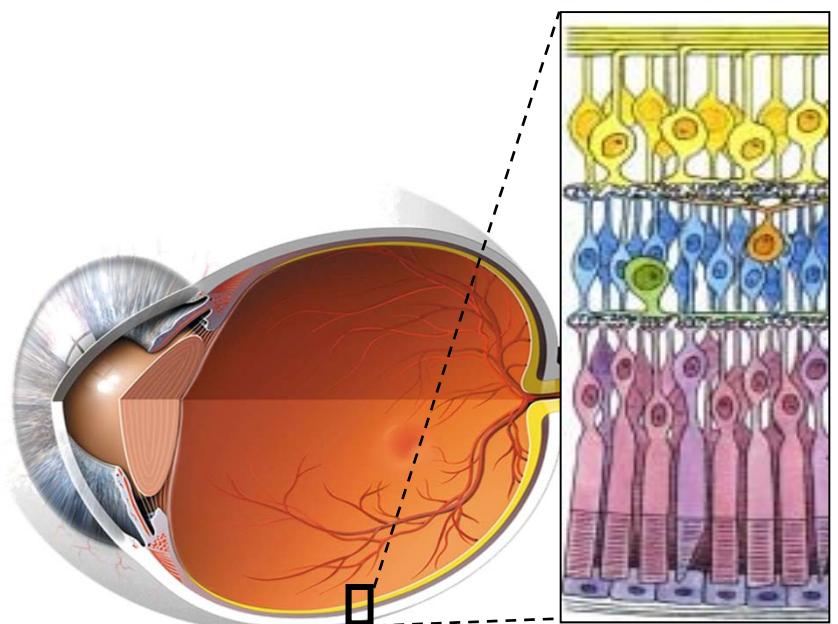
Structural organization of the retina



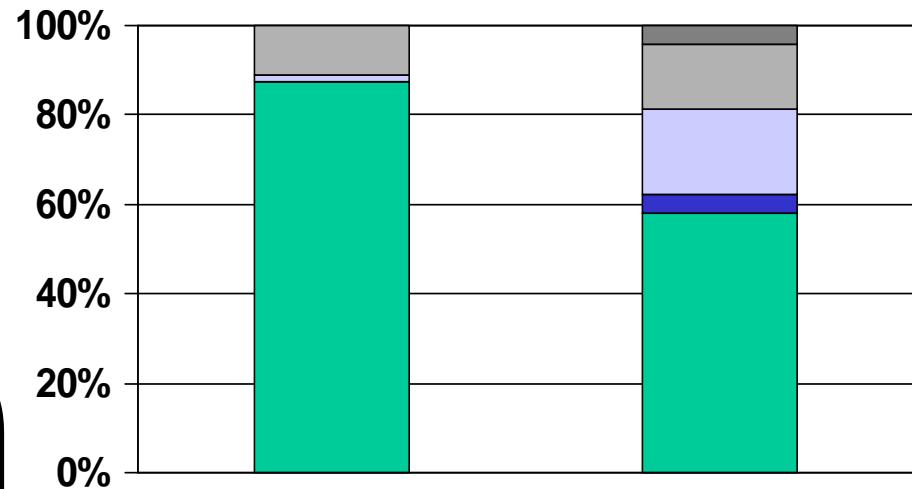
Lipids in the retina



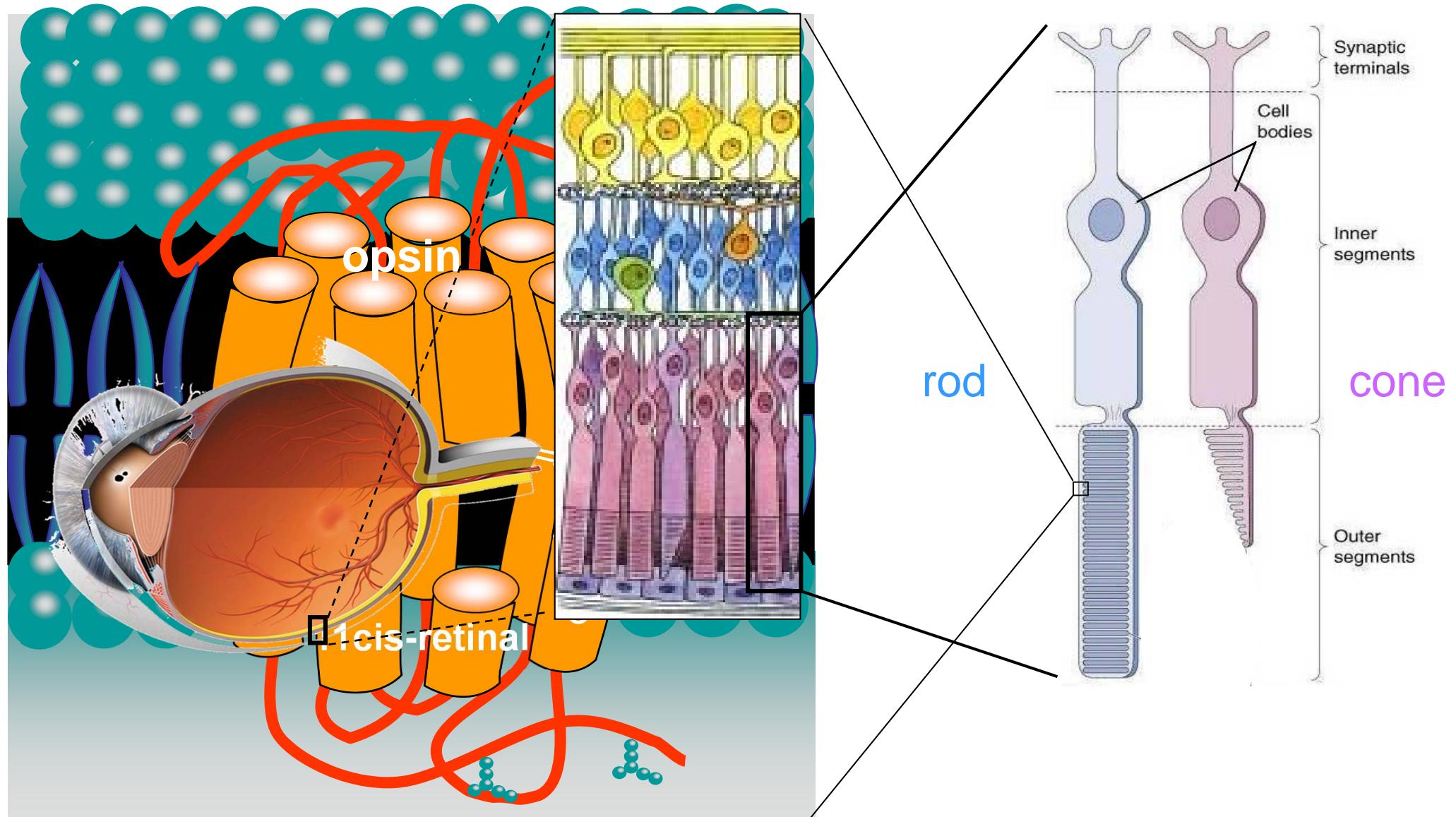
Lipids: 25% of dry matter

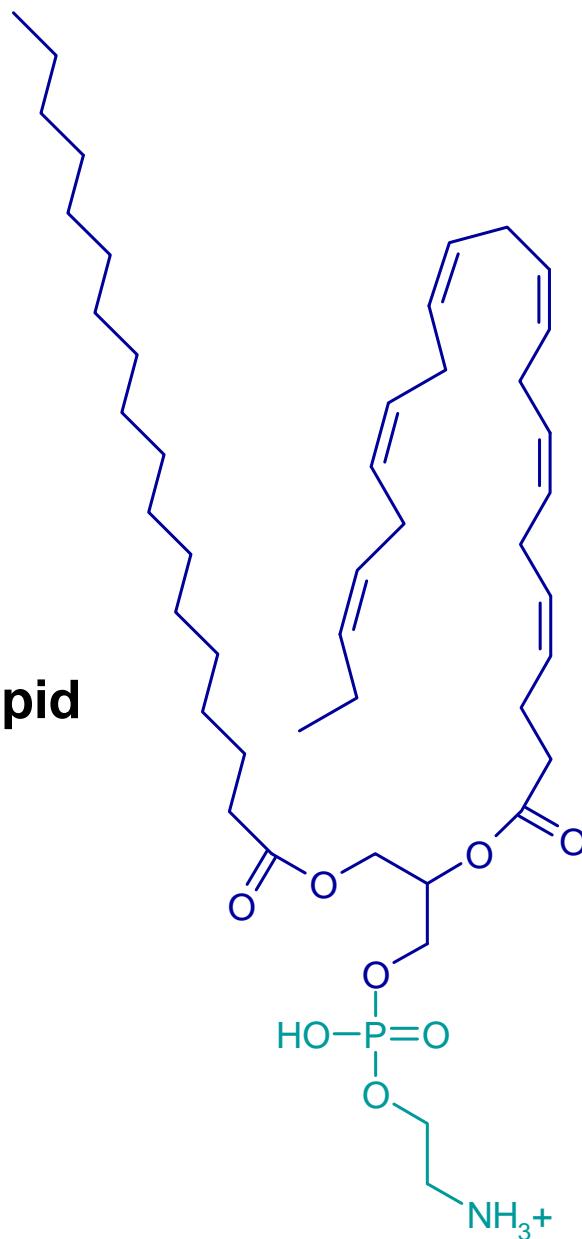
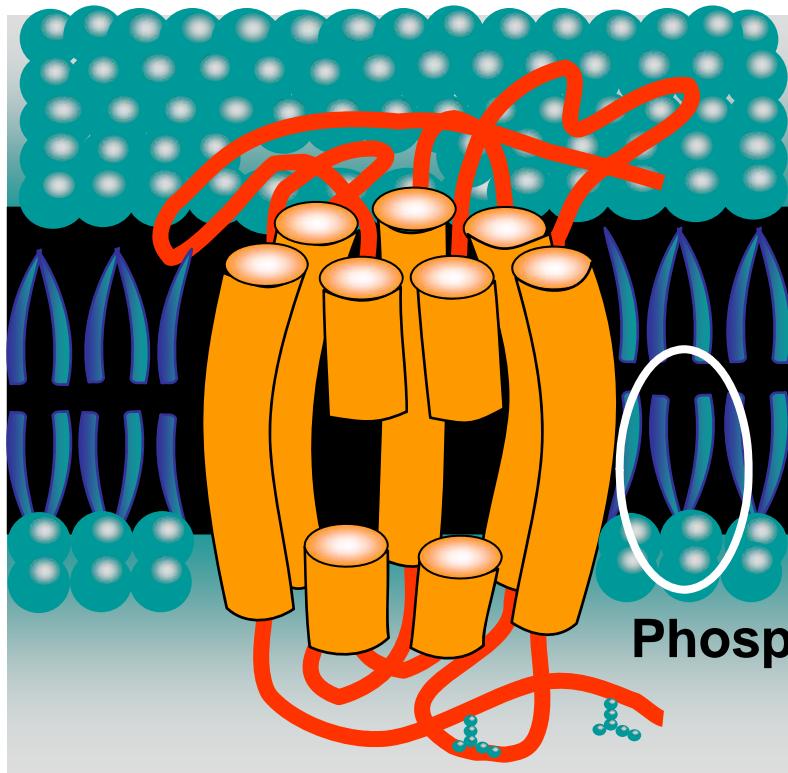


Ganglion cells
Amacrine cells
Bipolar cells
Horizontal cells
Cones
Rods
Pigment epithelium
Choroid



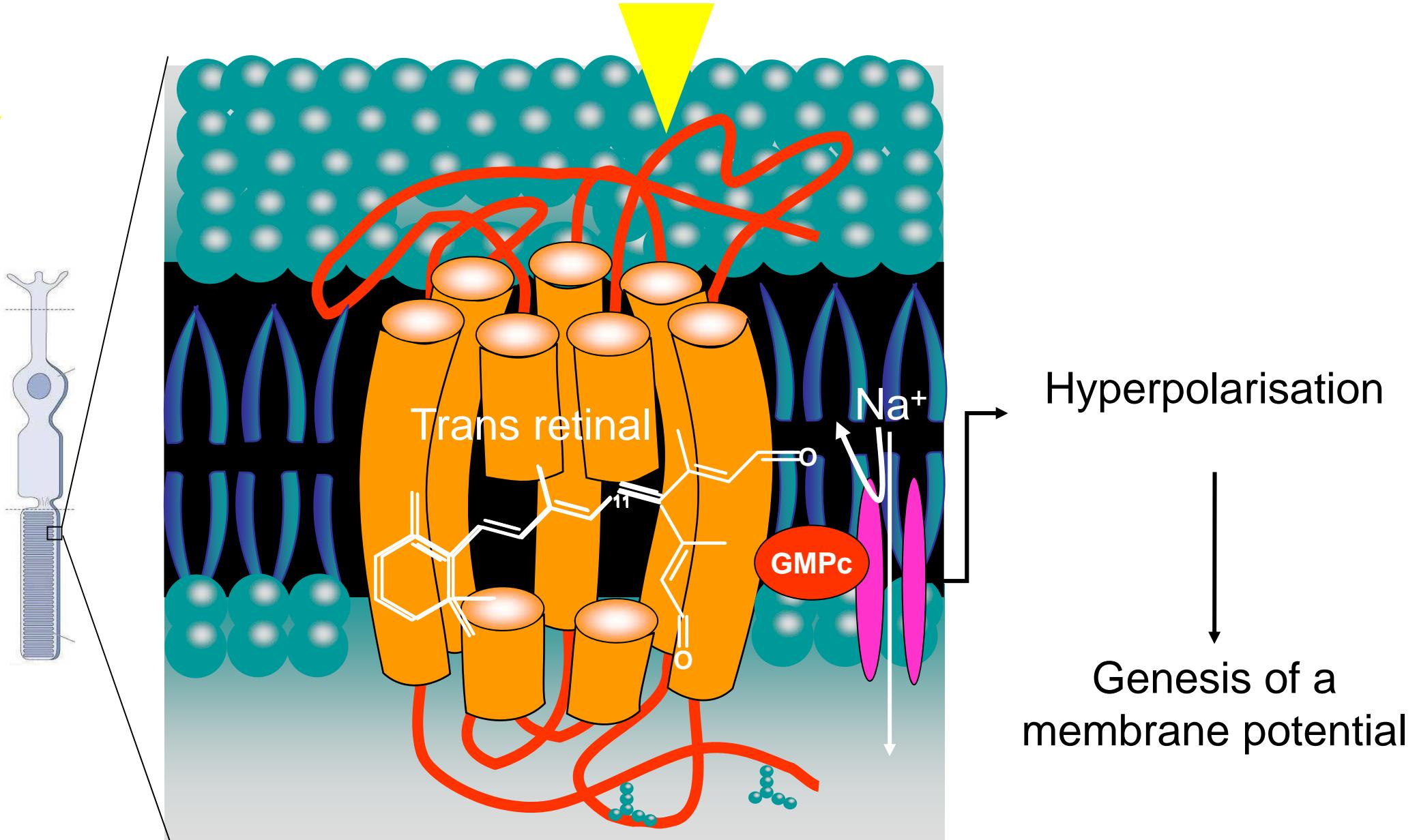
Bretillon et al., Exp Eye Res 2008



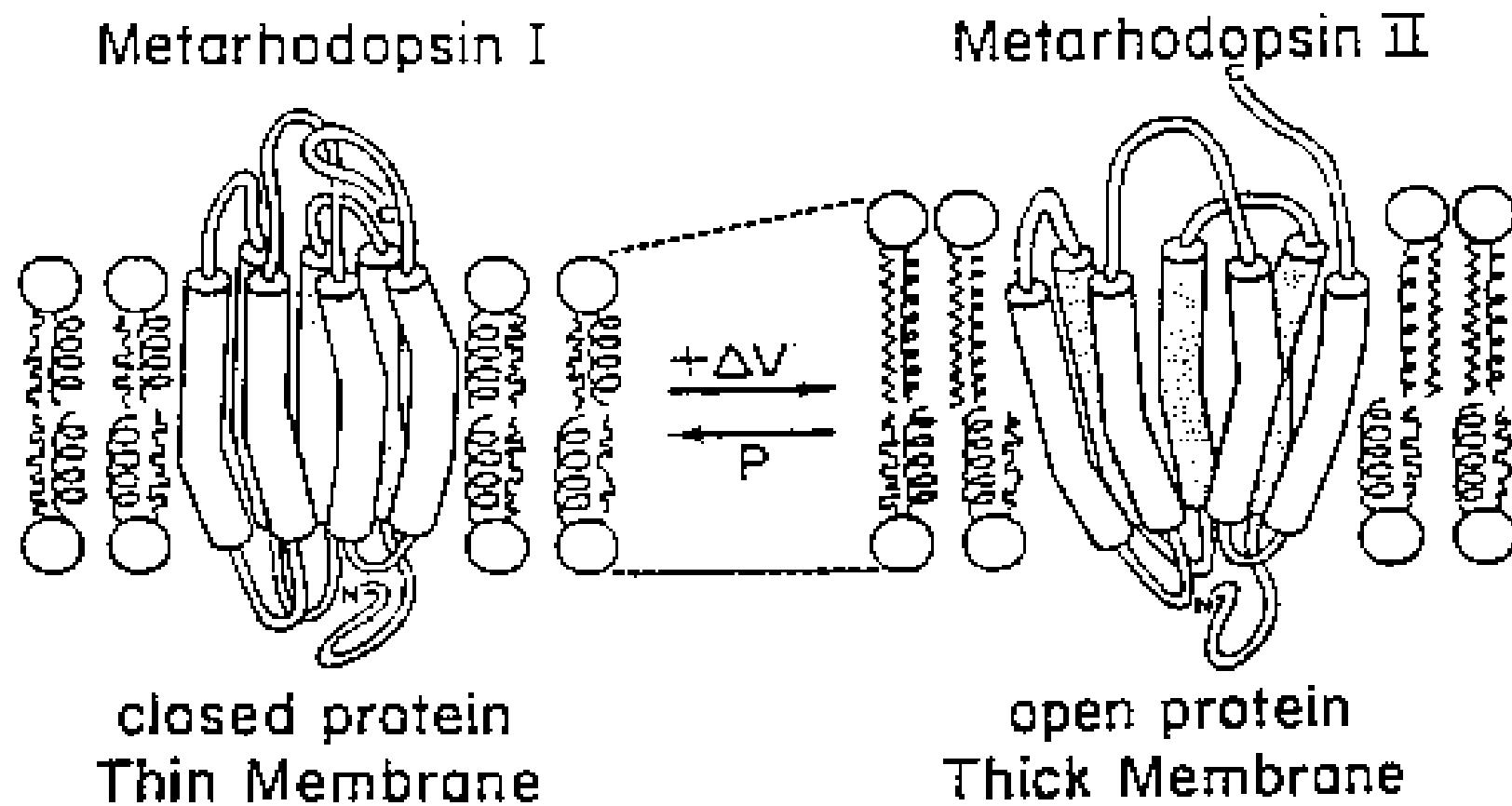


DHA
C22:6n-3

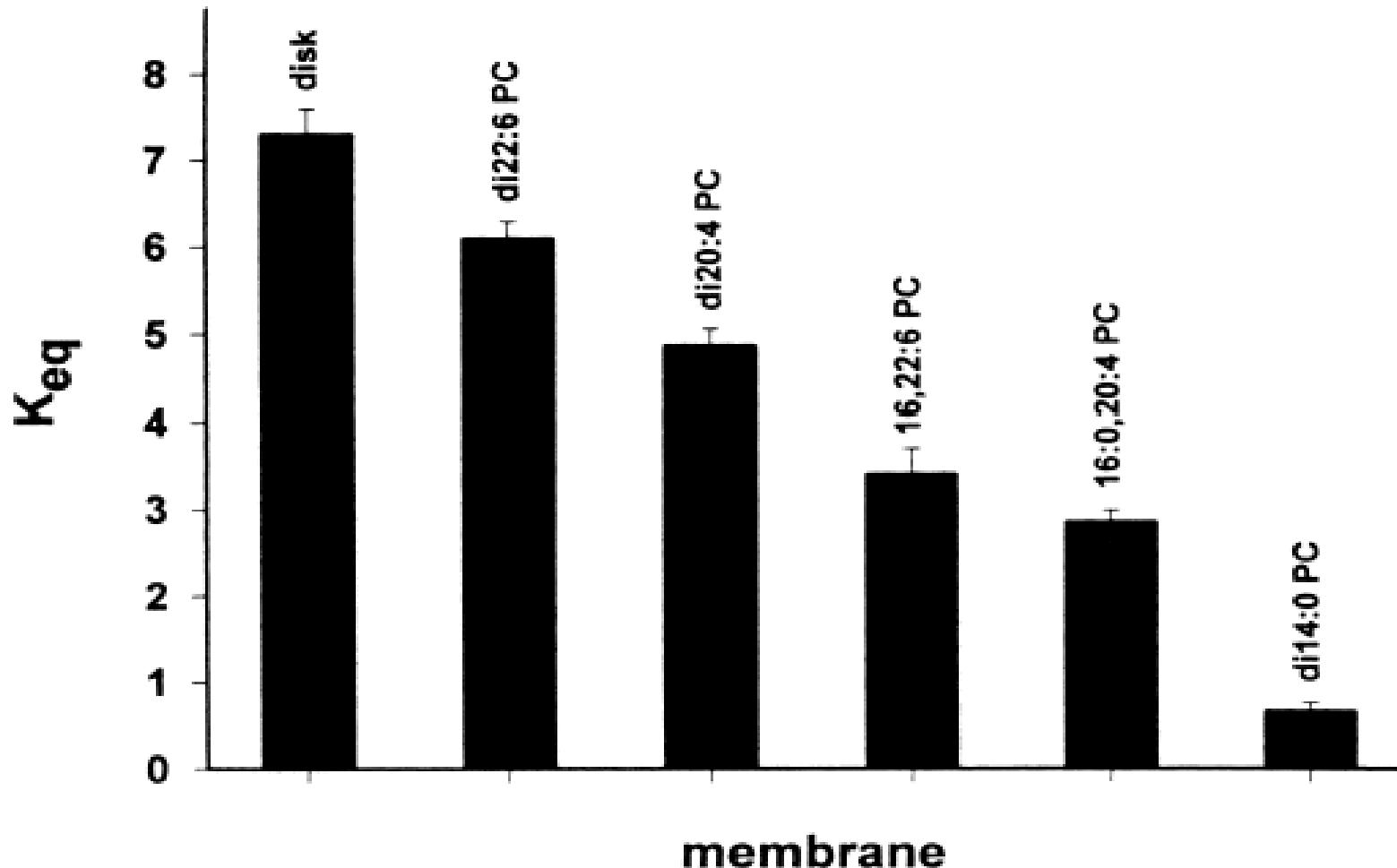
25-30% in the rat
15-20% in humans



The efficacy of the transduction pathway is dependent to the activation of rhodopsin



DHA is crucial in rhodopsin activation



Litman & Mitchell, Lipids 1996

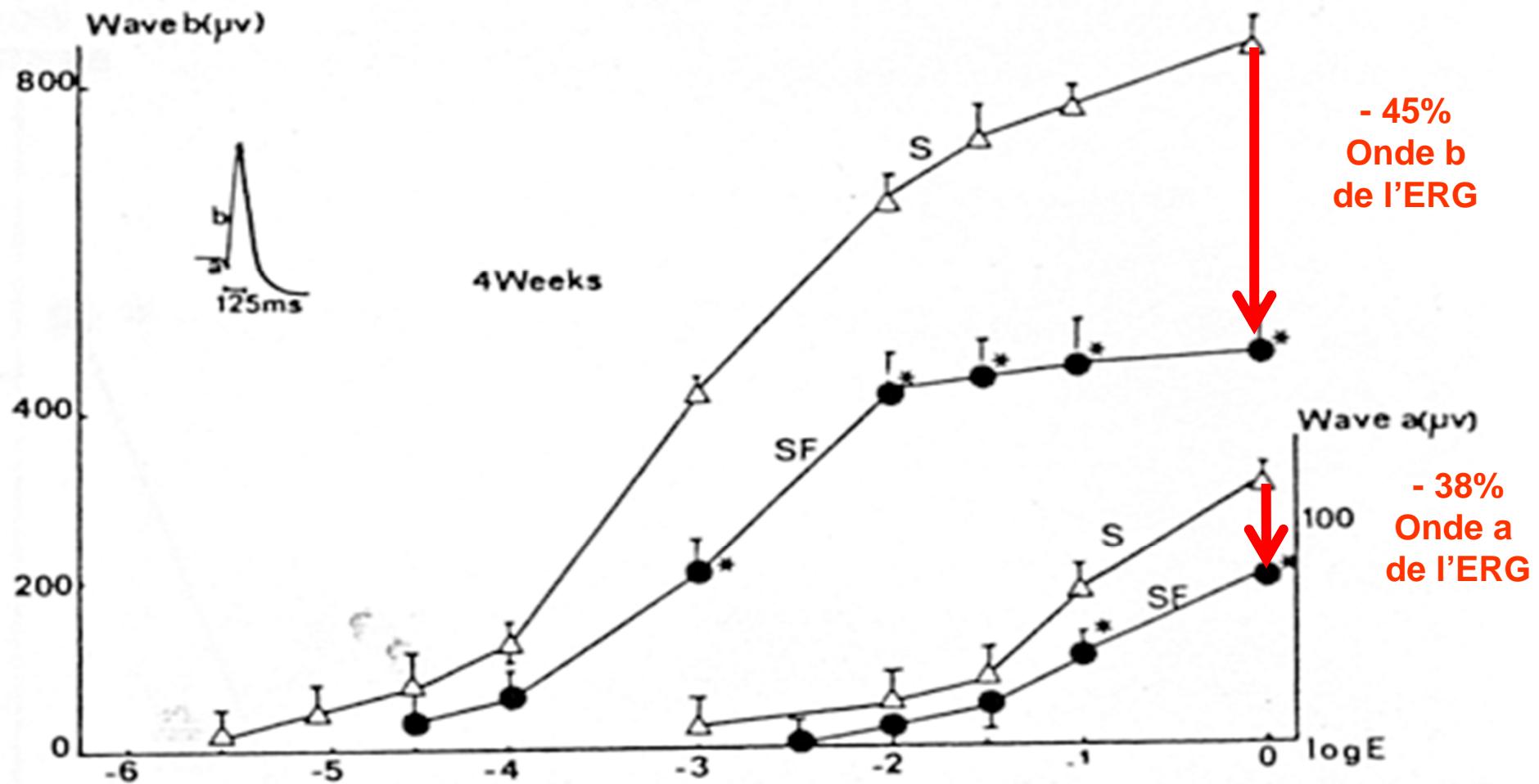
Chronic dietary deficiency in omega 3 impairs retinal function

- 1976 Lamptey & Walker, *J Nutr*
- 1989 Bourre et al, *J Nutr*
- 1993 Yehuda et al, *Proc Natl Acad Sci USA*
- 1999 Wainwright et al, *J Nutr*
- 1999 Scheaff Greiner et al, *Lipids*
- 2001 Moriguchi et al, *J Lipid Res*
- 2004 Niu et al, *J Biol Chem*
- 2007 Connor et al, *Nat Med*



Low DHA in the retina is associated with reduced retinal function

DHA deficient rats showed reduced electroretinographic response



Bourre et al, J Nutr 1989

Where does DHA come from?

Plants

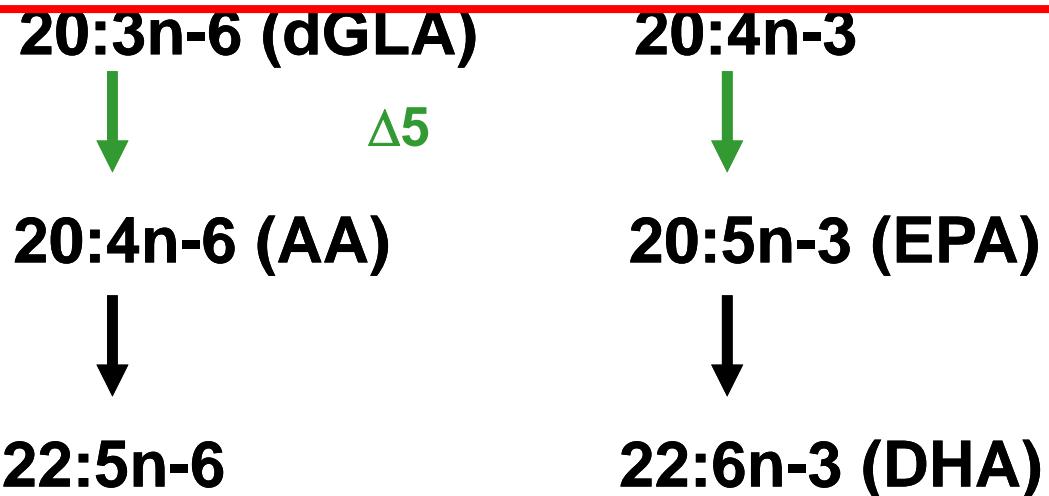


Animals

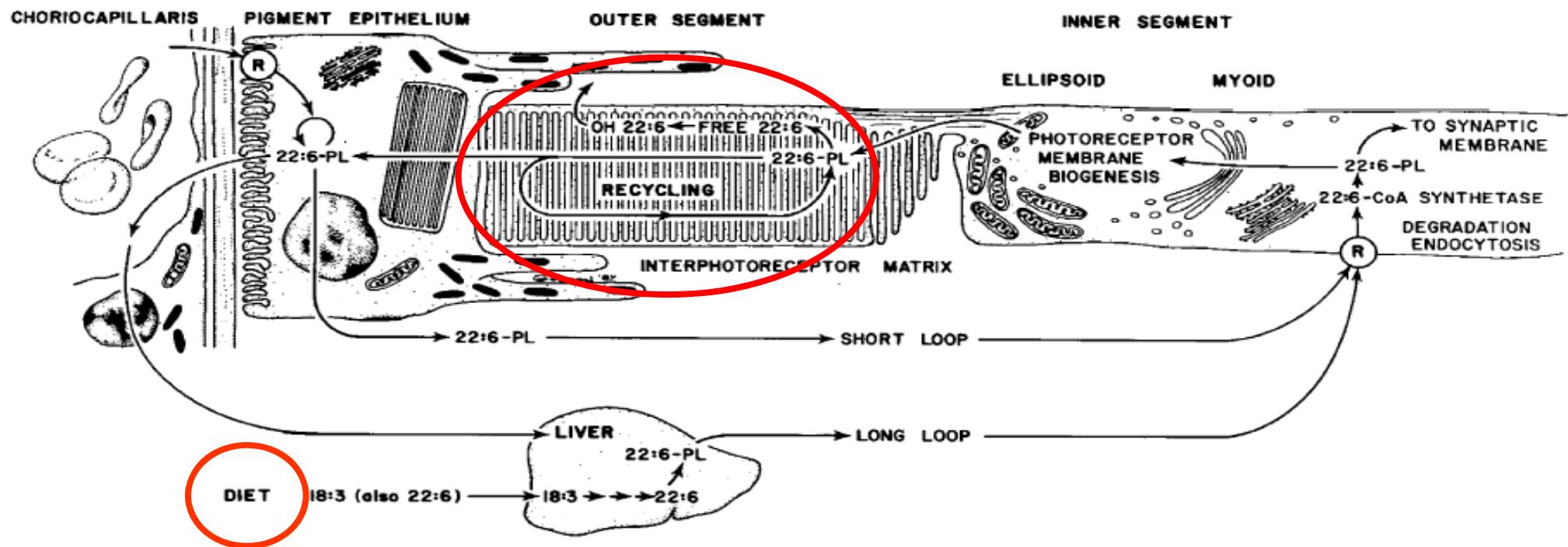


But poor efficacy of the conversion pathway (<1-2%)

Desaturation
Elongation



A balance between diet and endogenous recycling



Bazan NG, in: *Inherited and environmentally induced retinal degenerations*, LaVail MM, Anderson RE, Hollyfield JG eds 1989

Would adipose tissue DHA correlate with retinal levels?

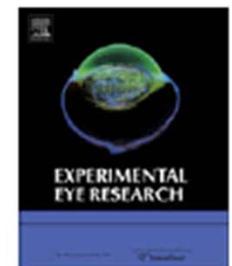
Experimental Eye Research 87 (2008) 521–528



Contents lists available at ScienceDirect

Experimental Eye Research

journal homepage: www.elsevier.com/locate/yexer



Lipid and fatty acid profile of the retina, retinal pigment epithelium/choroid, and the lacrimal gland, and associations with adipose tissue fatty acids in human subjects

Lionel Bretillon ^{a,*}, Gilles Thuret ^b, Stéphane Grégoire ^a, Niyazi Acar ^a, Corinne Joffre ^a, Alain M. Bron ^{c,d}, Philippe Gain ^b, Catherine P. Creuzot-Garcher ^{c,d}

^aEye and Nutrition Research Group, UMR1129 FLAVIC, INRA, 17 rue Sully, BP 86510, F21065 Dijon cedex, France

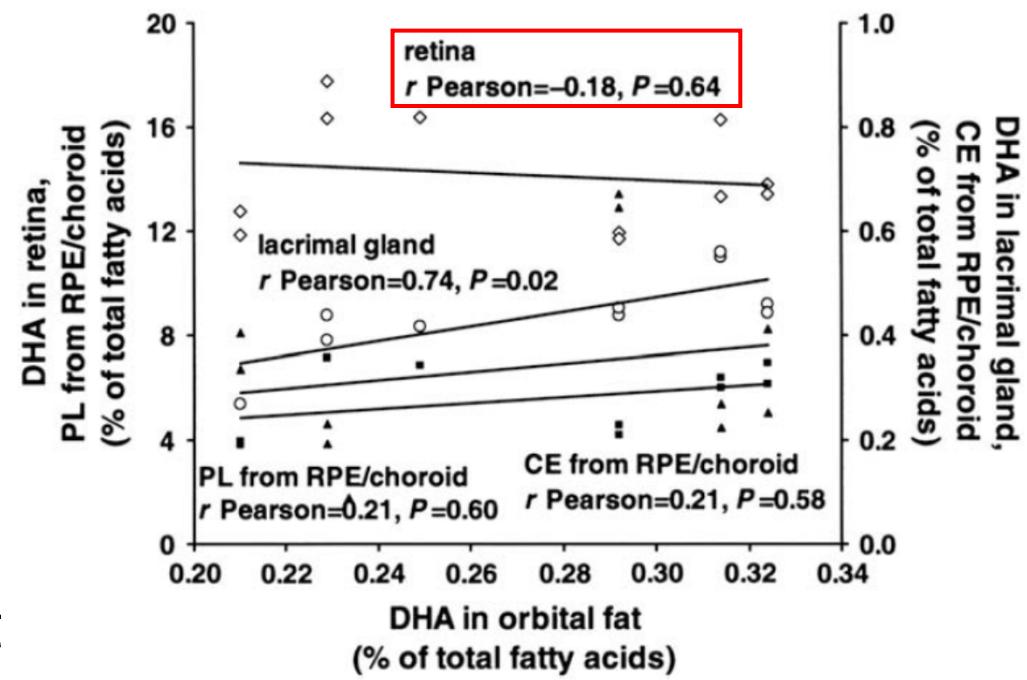
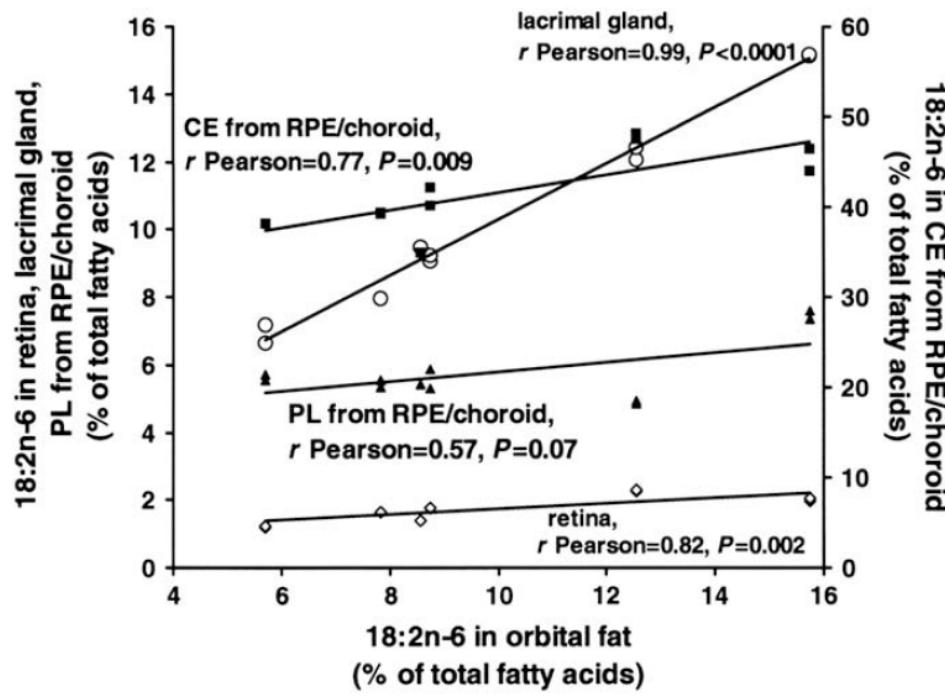
^bDepartment of Ophthalmology, Biology, Imaging, and Engineering of Corneal Grafts, Faculty of Medicine, Saint Etienne, France

^cEye and Nutrition Research Group, UMR1129 FLAVIC, University of Burgundy, Dijon, France

^dDepartment of Ophthalmology, University Hospital, Dijon, France



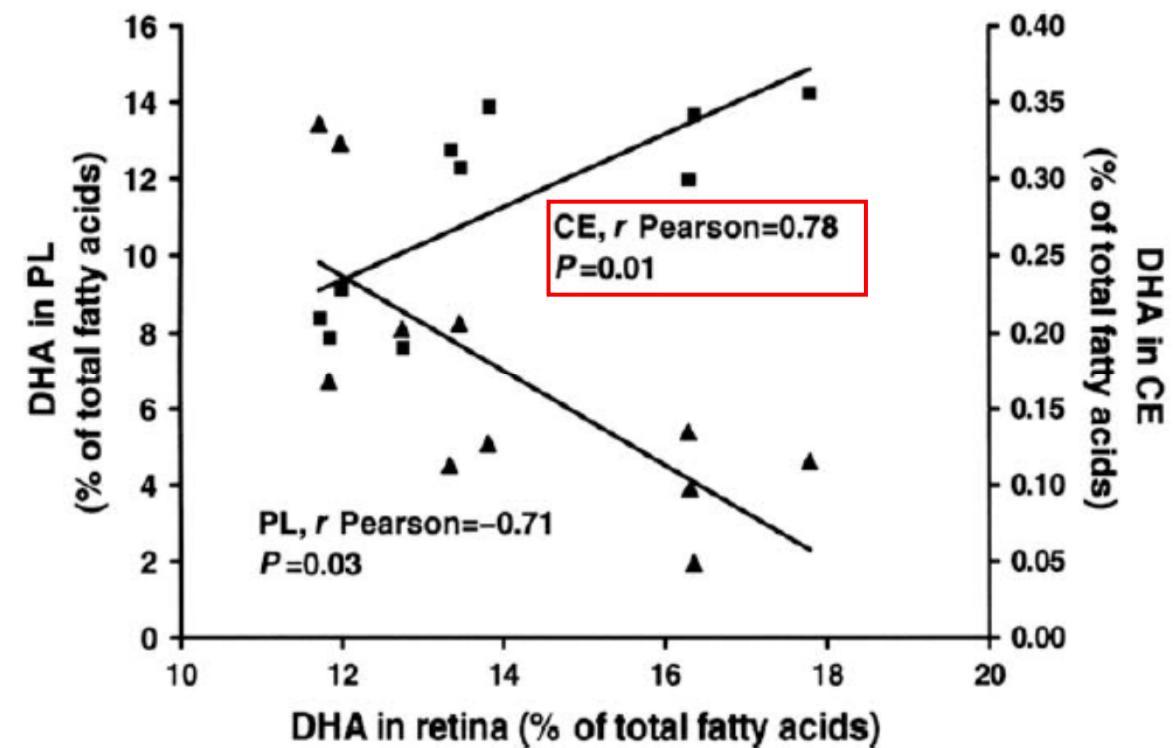
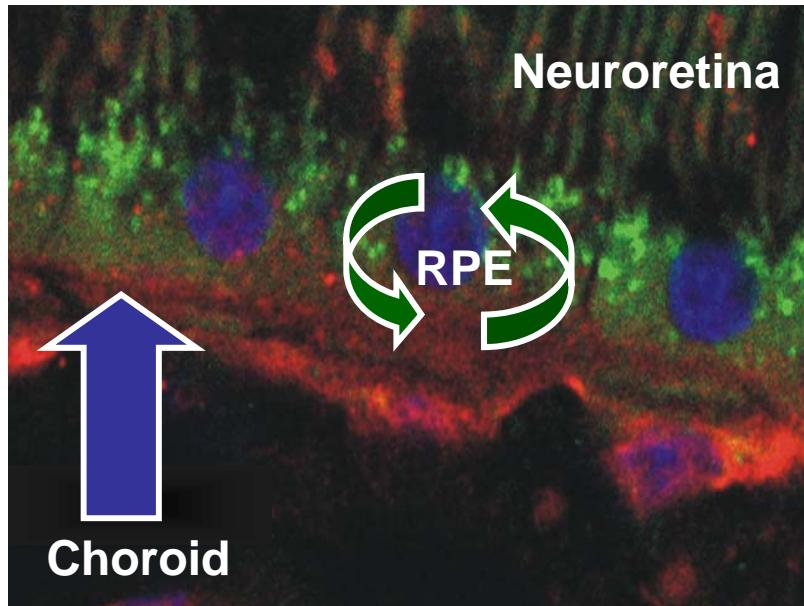
DHA in adipose tissue is not associated with DHA in the retina



Circulating DHA (to some extent dietary) poorly participates to the retinal levels

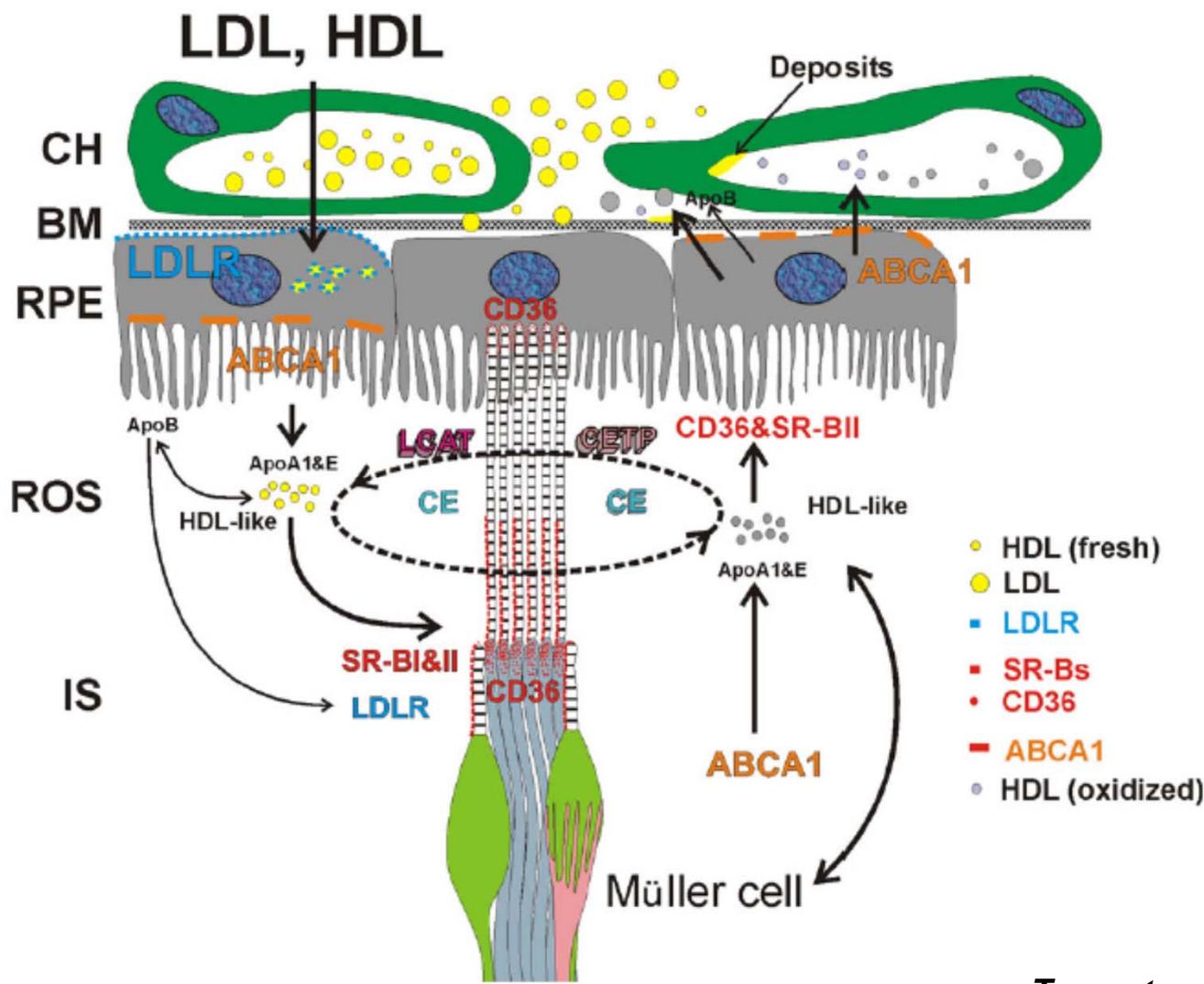
Bretillon et al., Exp Eye Res 2008

Despite cholesteryl esters in the RPE would be carriers of DHA and dietary fatty acids entering the retina



Bretillon et al. Exp Eye Res, 2008

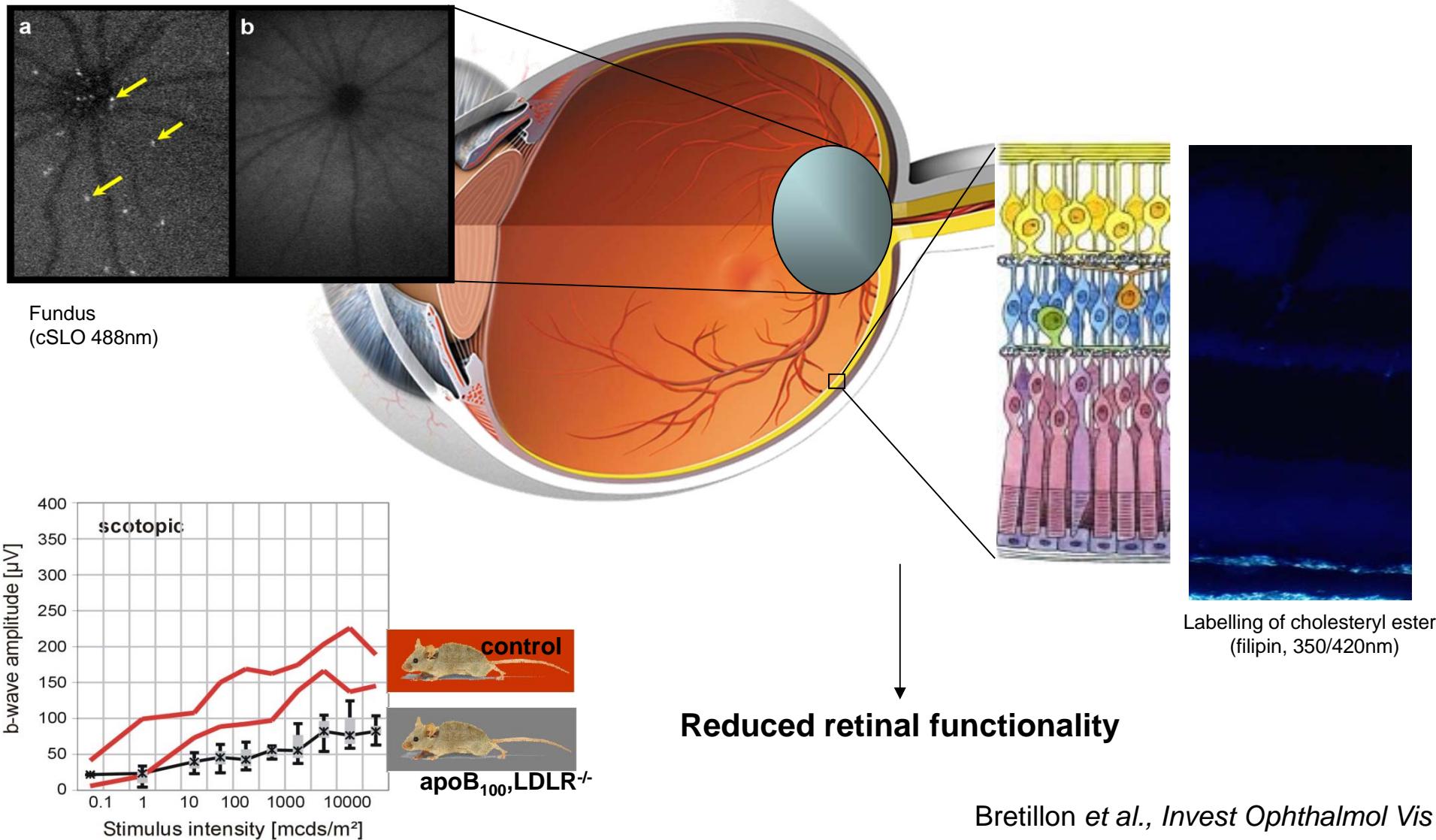
Intraretinal lipid metabolism



Tserentsoodol et al., Mol Vis 2006

Abrogating LDLR expression mimicks aging of the retina

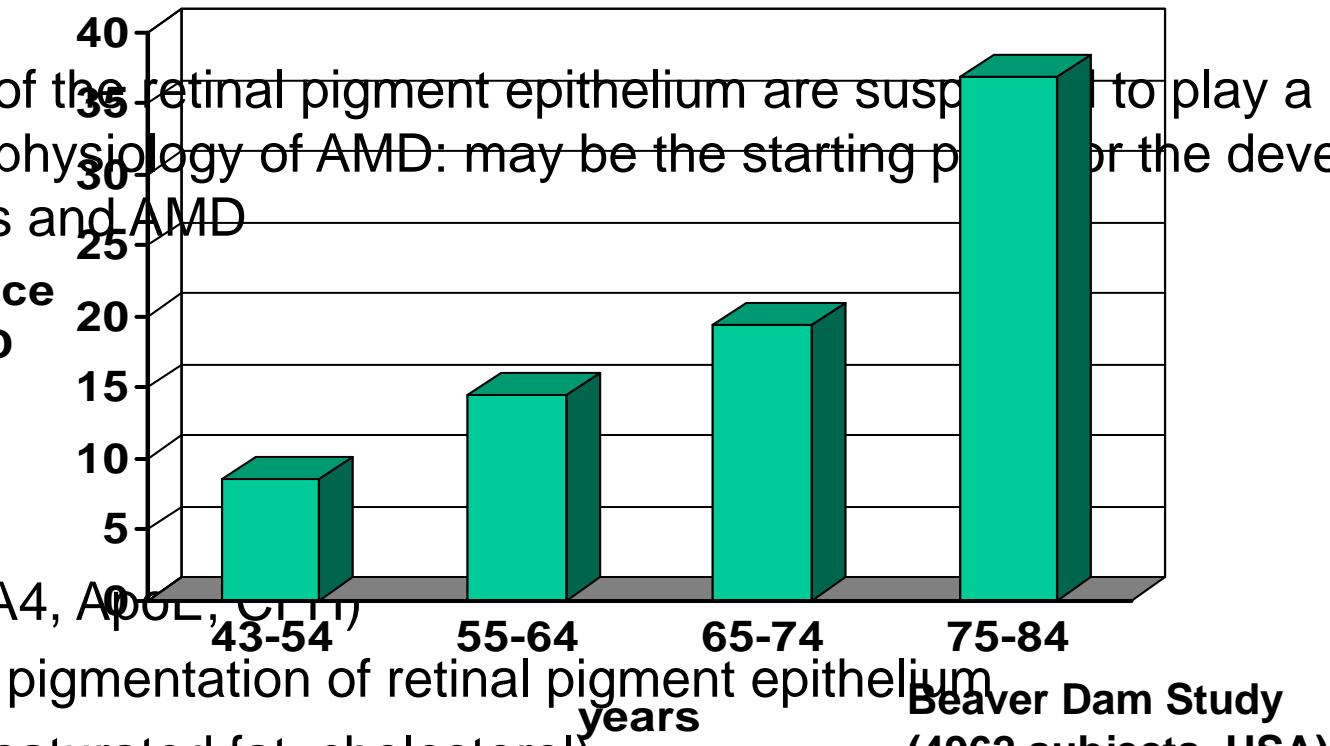
Accumulation of lipids (incl. cholesterol)



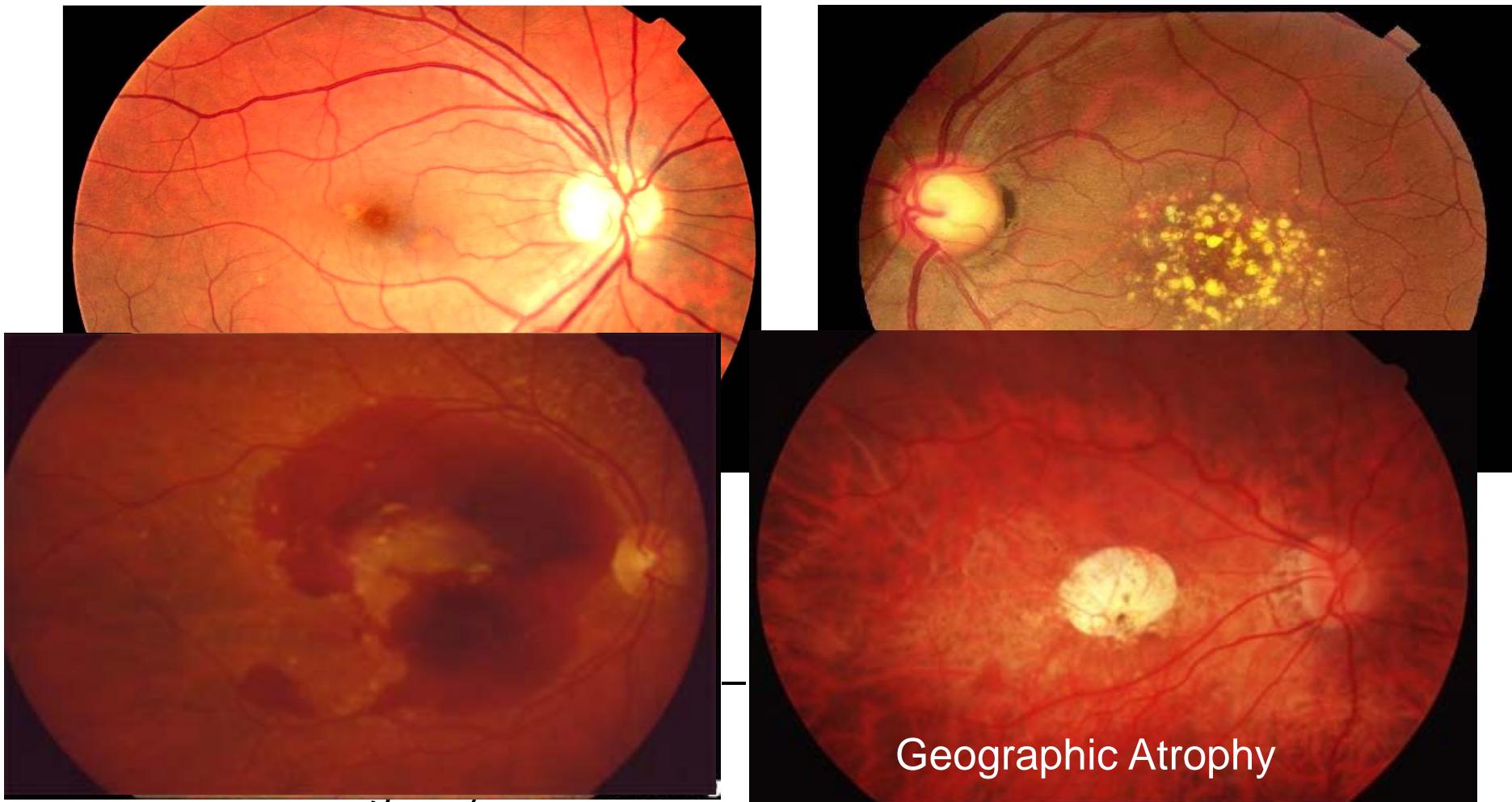
ω 3 fatty acids and Age-related Macular Degeneration (AMD)

- The leading cause of visual loss in Western countries

- Dysregulations of the retinal pigment epithelium are suspected to play a major role in the pathophysiology of AMD: may be the starting point for the development of maculopathies and AMD
- Risk factors:
 - age
 - smoking habits
 - genetics (ABCA4, APOE, CRGB1)
 - light, abnormal pigmentation of retinal pigment epithelium
 - dietary habits (saturated fat, cholesterol)



Grading AMD: from maculopathy to severe forms



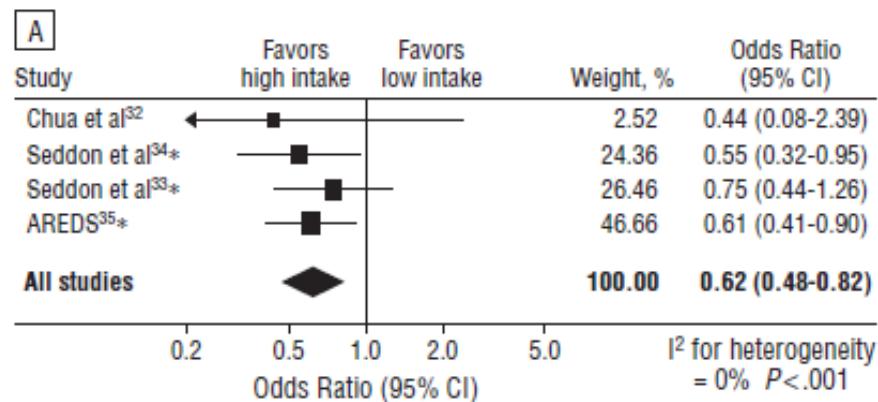
- Pigment abnormalities affecting 1 eye or both
- Geographic atrophy
- Neovascularization

4 grades: from
maculopathy to AMD

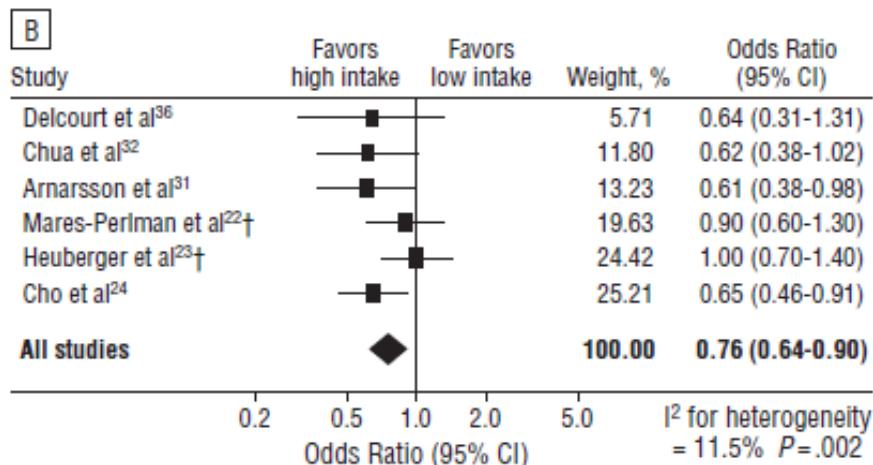
Fish intake, ω3 fatty acids and AMD

Meta-analysis from 7 databases (88,974 people including 3204 AMD)

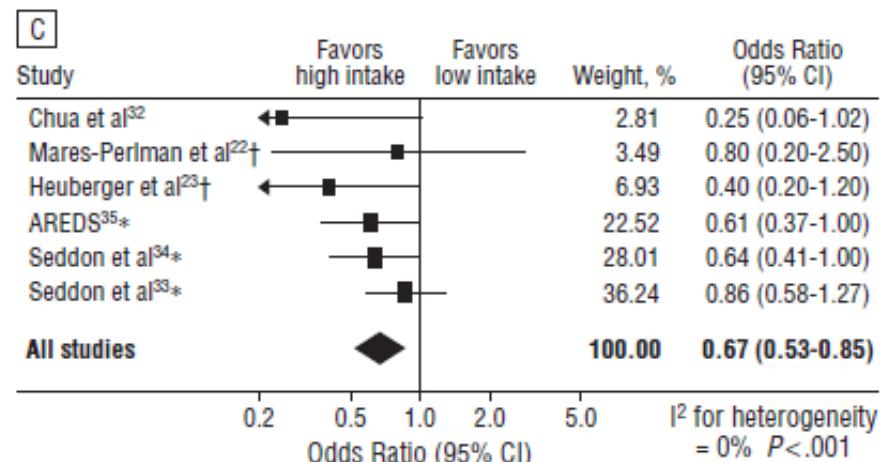
ω3 and late AMD



Fish intake and early AMD



Fish intake and late AMD



Chong et al., Arch Ophthalmol 2008

Protection from AMD is associated above 2 servings of fish per week

Table 2. Odds Ratios for AMD According to Fish Intake

	<1 Serving/wk	1 Serving/wk	≥2 Servings/wk	P Trend
Cases/controls, No.	74/131	75/144	73/184	
Median intake (servings per day)	0.080	0.18	0.36	
Adjusted OR*	1.0	0.97	0.68	.07
Multivariate OR1 (95% CI)†	1.0	0.94 (0.64-1.38)	0.63 (0.41-0.97)	.03
Multivariate OR2 (95% CI)‡	1.0	1.0 (0.67-1.48)	0.64 (0.41-1.00)	.04

Abbreviations: AMD, age-related macular degeneration; CI, confidence interval; OR, odds ratio.

*Adjusted for age (60-69, 70-79, and 80+ years), log calories (continuous), and protein intake (quartiles).

†Adjusted for education (\geq high school vs <high school); smoking (current/past/never in the multivariate fish models); age (60-69, 70-79, and 80+ years); body mass index, calculated as weight in kilograms divided by the square of height in meters (<25, 25-29.9, and 30+); systolic blood pressure; cardiovascular disease; log calories (continuous); protein intake (quartile); log calorie-adjusted beta-carotene intake (continuous); alcohol intake (continuous); and physical activity (continuous, times per week vigorous).

‡Adjusted for variables in model 1 plus total intake of zinc, vitamin C, and vitamin E (log scale for all 3).

...primarily in patients with low intake in linoleic acid

Table 4. Odds Ratios for AMD by Quartile of Omega-3 Intake, Linoleic Acid Intake, and Omega-3 Intake Within Strata of Linoleic Acid Intake

Fatty Acid Intake	Quartile of Omega-3 Intake				P Trend
	1	2	3	4	
Omega-3 intake					
Cases/controls, No.	64/102	61/120	49/114	48/123	
Median intake, g	0.06	0.12	0.20	0.35	
Adjusted OR*	1.0	0.82	0.62	0.60	.02
Multivariate OR1 (95% CI)†	1.0	0.79 (0.52-1.21)	0.60 (0.36-0.97)	0.56 (0.33-0.94)	.01
Multivariate OR2 (95% CI)‡	1.0	0.80 (0.53-1.21)	0.60 (0.36-0.99)	0.55 (0.32-0.95)	.02
Linoleic acid intake					
Cases/controls, No.	43/127	60/110	65/107	54/115	
Median intake, g	7.12	10.45	13.34	18.46	
Adjusted OR*	1.0	1.72	1.81	1.37	.42
Multivariate OR1 (95% CI)†	1.0	1.89 (1.15-3.11)	2.07 (1.17-3.63)	1.56 (0.79-3.08)	.26
Multivariate OR2 (95% CI)‡	1.0	1.85 (1.12-3.08)	1.99 (1.12-3.54)	1.46 (0.72-2.96)	.32
Linoleic acid intake, quartiles 1 and 2 (≤ 11.79 g)					
Cases/controls, No.	41/66	35/65	17/54	10/52	
Median intake of omega-3, g	0.06	0.12	0.20	0.35	
Adjusted OR*	1.0	0.79	0.90	0.92	.001
Multivariate OR1 (95% CI)†	1.0	0.97 (0.54-1.76)	0.48 (0.22-1.04)	0.30 (0.12-0.74)	.002
Multivariate OR2 (95% CI)‡	1.0	0.94 (0.52-1.72)	0.39 (0.18-0.88)	0.23 (0.09-0.57)	<.001
Linoleic acid intake, quartiles 3 and 4 (≥ 11.80 g)					
Cases/controls, No.	23/36	26/55	32/60	38/71	
Median intake of omega-3, g	0.06	0.12	0.20	0.36	
Adjusted OR*	1.0	0.79	0.90	0.92	.98
Multivariate OR1 (95% CI)†	1.0	0.74 (0.37-1.47)	0.82 (0.40-1.69)	0.85 (0.41-1.77)	.93
Multivariate OR2 (95% CI)‡	1.0	0.73 (0.35-1.55)	0.84 (0.37-1.89)	1.07 (0.46-2.50)	.66

Abbreviations: AMD, age-related macular degeneration; CI, confidence interval; OR, odds ratio.

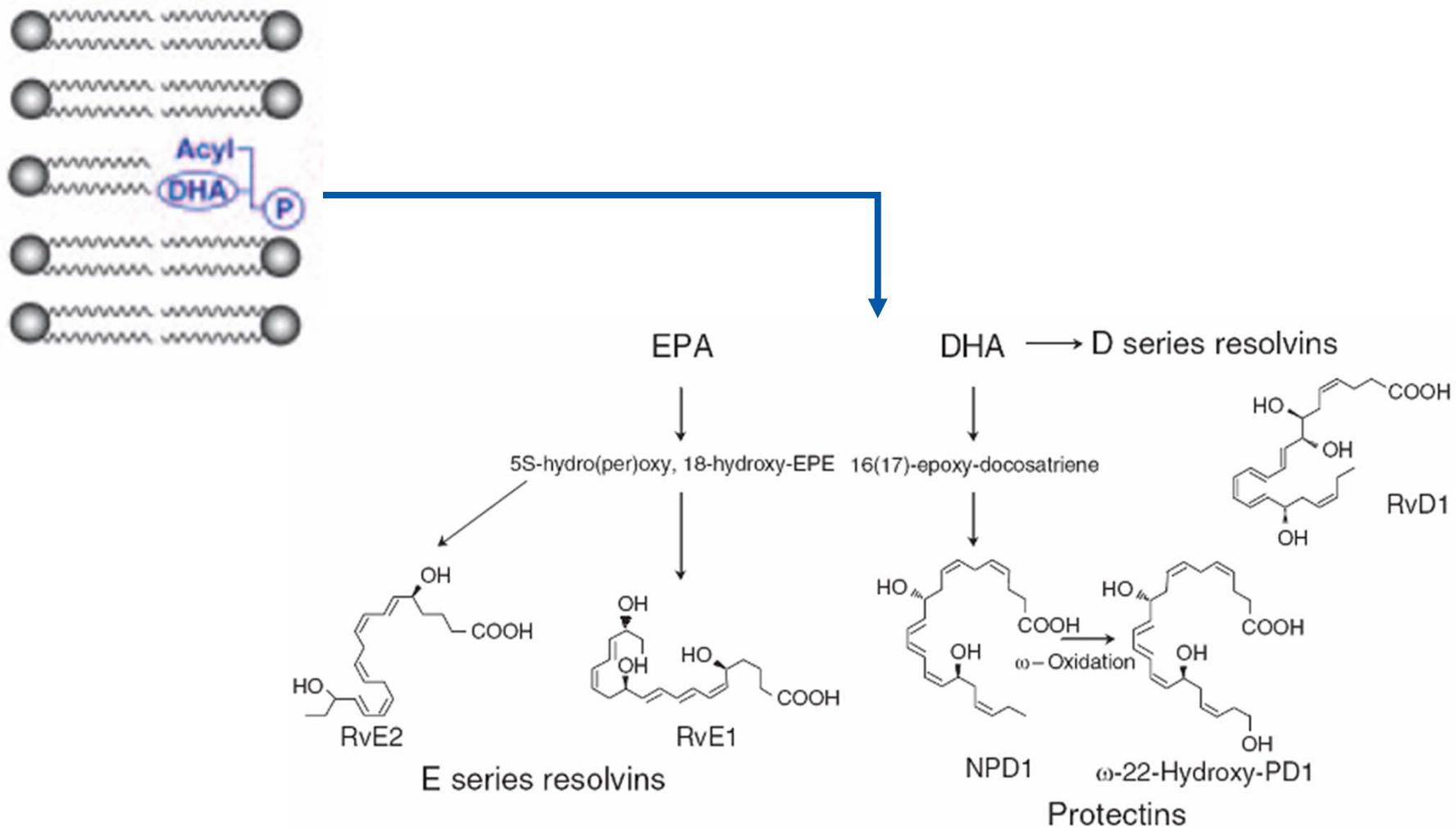
*Adjusted for log calories (continuous) and protein intake (quartile).

†Adjusted for education (\geq high school vs <high school); smoking (current/past/never); age (60-69, 70-79, and 80+ years); body mass index, calculated as weight in kilograms divided by the square of height in meters (<25, 25-29.9, and 30+); systolic blood pressure; cardiovascular disease; log calories (continuous); protein intake (quartile); log calorie-adjusted beta-carotene intake (continuous); alcohol intake (continuous); and physical activity (continuous, times per week vigorous).

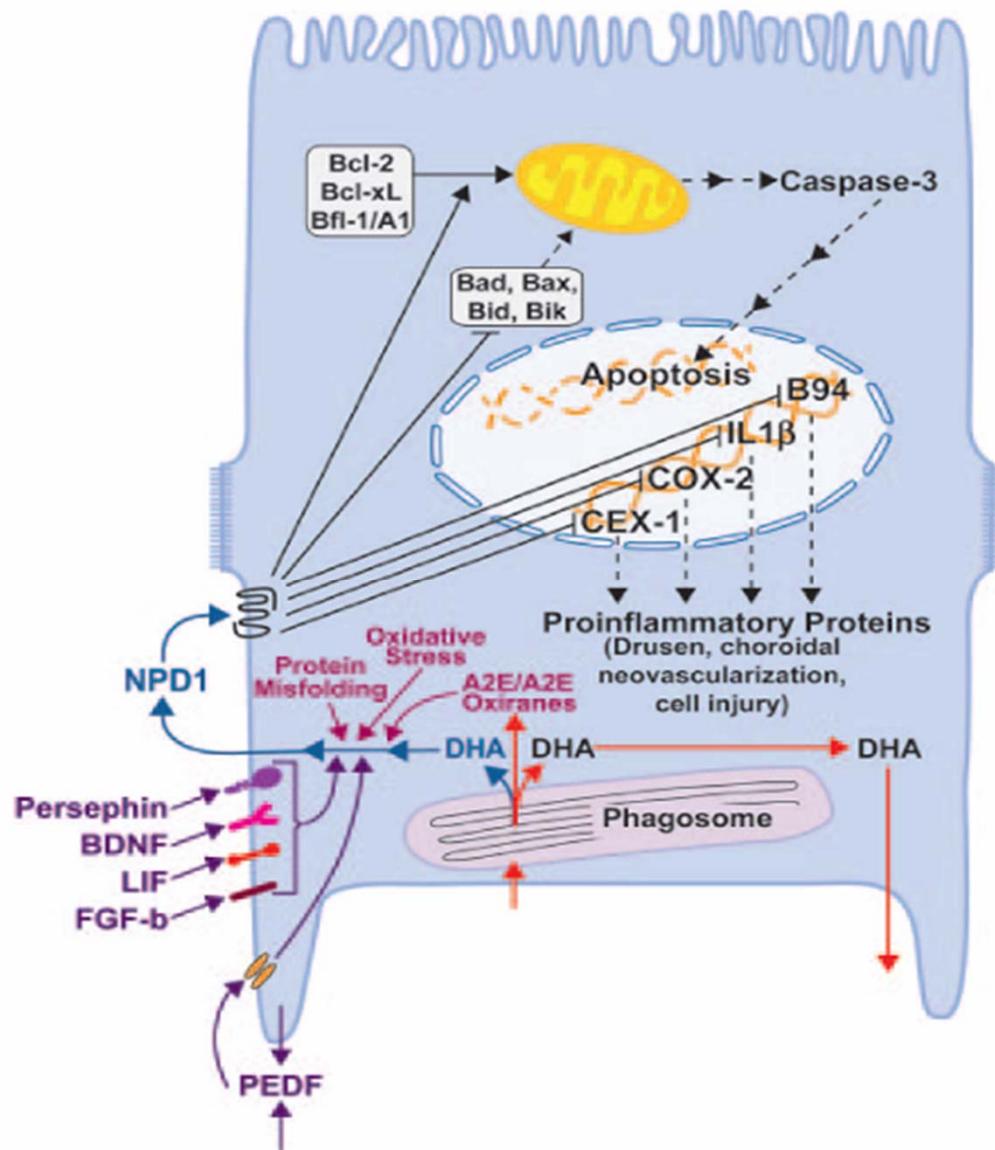
‡Adjusted for variables in model 1 plus total intake of zinc, vitamin C, and vitamin E (log scale for all 3).

Seddon et al., Arch Ophthalmol 2007

Mechanism: ω 3 fatty acids may be converted into active metabolites in the RPE



NPD1 exhibits protective properties against angiogenesis, apoptosis, inflammation



Bazan, Invest Ophthalmol Vis Sci 2007

Conclusion

- Lipids are essential components of the retina, ω3 key actors of its function
- Intraretinal lipid metabolism limits the influence of circulating (dietary) lipids to retinal profile in fatty acids
- Dietary lipids may participate to the prevention of retinal aging and AMD: not only by means of supplementations with ω3, but also via ameliorating the ratio between dietary linoleic acid and ω3
- The mechanisms of this prevention remains uncertain, but may involve intraretinal metabolism of fatty acids (active metabolites)