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Chronic rhein treatment improves recognition memory in high-fat diet-induced obese male mice

Abstract

High-fat (HF) diet modulates gut microbiota and increases plasma concentration of lipopolysaccharide (LPS) which is associated with obesity and its related low-grade inflammation and cognitive decline. Rhein is the main ingredient of the rhubarb plant which has been used as an anti-inflammatory agent for several millennia. However, the potential effects of rhein against HF diet-induced obesity and its associated alteration of gut microbiota, inflammation and cognitive decline have not been studied. In this study, C57BL/6J male mice were fed an HF diet for 8 weeks to induce obesity, and then treated with oral rhein (120 mg/kg body weight/day in HF diet) for a further 6 weeks. Chronic rhein treatment prevented the HF diet-induced recognition memory impairment assessed by the novel object recognition test, neuroinflammation and brain-derived neurotrophic factor (BDNF) deficits in the perirhinal cortex. Furthermore, rhein inhibited the HF diet-induced increased plasma LPS level and the proinflammatory macrophage accumulation in the colon and alteration of microbiota, including decreasing Bacteroides-Prevotella spp. and Desulfovibrios spp. DNA and increasing Bifidobacterium spp. and Lactobacillus spp. DNA. Moreover, rhein also reduced body weight and improved glucose tolerance in HF diet-induced obese mice. In conclusion, rhein improved recognition memory and prevented obesity in mice on a chronic HF diet. These beneficial effects occur via the modulation of microbiota, hypoendotoxinemia, inhibition of macrophage accumulation, anti-neuroinflammation and the improvement of BDNF expression. Therefore, supplementation with rhein-enriched food or herbal medicine could be beneficial as a preventive strategy for chronic HF diet-induced cognitive decline, microbiota alteration and neuroinflammation.

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Chronic rhein treatment improves recognition memory in high-fat diet-induced obese mice

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1 Abstract

High-fat (HF) diet modulates gut microbiota and increases plasma concentration of 2 lipopolysaccharide (LPS), metabolic endotoxemia, which is associated with obesity and its 3 related low-grade inflammation and cognitive decline. Rhein is the main ingredient of the 4 rhubarb plant which has been used as an anti-inflammatory agent for several millennia. 5 However, the potential effects of rhein against HF diet-induced obesity and its associated 6 7 alteration of gut microbiota, inflammation and cognitive decline have not been studied. In this study, C57BL/6J male mice were fed a HF diet for 8 weeks to induce obesity, and then 8 treated with oral rhein (120 mg/kg body weight per day in HF diet) for a further 6 weeks. 9 Chronic rhein treatment prevented the HF diet-induced recognition memory impairment 10 assessed by novel object recognition test, neuroinflammation and BDNF deficits in the 11 12 perirhinal cortex. Furthermore, rhein inhibited the HF diet-induced increased plasma LPS level and the pro-inflammatory macrophage accumulation in the colon and alteration of 13 microbiota, including decreasing Bacteroides-Prevotella spp. and Desulfovibrios spp. DNA 14 and increasing Bifidobacterium spp. and Lactobacillus spp. DNA. Moreover, rhein also 15 reduced body weight and improved glucose tolerance in HF diet-induced obese mice. In 16 conclusion, rhein improved recognition memory and prevented obesity in mice on a chronic 17 HF diet. These beneficial effects occur via the modulation of microbiota, hypoendotoxinemia, 18 inhibition of macrophage accumulation, anti-neuroinflammation and the improvement of 19 BDNF expression. Therefore, supplementation with rhein-enriched food or herbal medicine 20 could be beneficial as a preventive strategy for chronic HF diet-induced cognitive decline, 21 microbiota alteration and neuroinflammation. 22

- 23 Keywords: rhein; gut microbiota; recognition memory; lipopolysaccharide; inflammation;
- 24 perirhinal cortex

25

26 1. Introduction

Obesity is a major risk factor for the development of insulin resistance, type 2 diabetes, and 27 cognitive decline in neurodegenerative diseases such as Alzheimer's disease (AD) and 28 vascular dementia [1, 2]. Patients with AD have been characterized by deficits in recognition 29 memory [3]. The perirhinal cortex plays an important role in higher object recognition 30 memory [4]. Lesions in the perirhinal cortex severely disrupt object recognition [5], 31 object-in-place memory, and temporal order recognition memory [6, 7] in rodent studies. 32 Empirical evidence has linked high-fat (HF) diet-induced obesity with impairments in 33 learning and memory, including a decline in recognition memory [8] as assessed with the 34 novel object recognition test. 35

Nowadays, it is widely accepted that obesity and its associated cognitive decline is 36 37 associated with low-grade systemic and central inflammation, despite the fact that the molecular origin of the inflammation is poorly understood [9, 10]. Increased fat intake has 38 been found to be strongly correlated with increased plasma lipopolysaccharide (LPS), 39 endotoxemia [10]. LPS is a major component of the outer membrane in Gram-negative 40 bacteria. Emerging evidence from animal studies suggests a link between the alteration of gut 41 microbiota, increased intestinal permeability, and endotoxemia in HF diet-induced obesity 42 [11]. An imbalance of Bacteroidetes and Firmicutes, the primary bacterial phyla comprising 43 the gastrointestinal microbiota, has been reported in rodents fed a HF diet and obese 44 individuals [12, 13]. The plasma LPS level was closely correlated with altered intestinal 45 microbiota, in which the number or diversity of the Gram-negative, Bacteroidetes phylum, 46 were significantly reduced in animals fed a HF diet [14]. The endogenous LPS is considered 47

to be continuously produced in the gut by the death of Gram-negative bacteria and its 48 translocation into intestinal capillaries via the increased intestinal permeability in HF 49 diet-induced obesity [15]. Endotoxinemia in turn can trigger systemic inflammation and 50 neuroinflammation. It has been shown that an intraperitoneal (ip) injection of LPS induces 51 neuroinflammation, cognitive impairment and memory dysfunction [16]. LPS binds to 52 Toll-like receptor (TLR) 4 coupled with myeloid differentiation primary-response protein 88 53 (MyD88)-dependent pathway, and activates c-Jun N-terminal kinase (JNK) and nuclear 54 factor-kappa B (NFkB), two important inflammatory signaling molecules [17]. The activation 55 56 of the TLR4-MyD88-JNK/NFkB signaling pathway leads to the production of pro-inflammatory cytokines, such as interleukin-1ß (IL-1ß), interleukin-6 (IL-6), and tumor 57 necrosis factor- α (TNF- α), and contributes to the development of neurodegenerative diseases 58 59 [18-21].

Brain-derived neurotrophic factor (BDNF) is known to play an important role in neuronal 60 development and synaptic plasticity in the brain regions involved in cognitive function [22]. 61 In the perirhinal cortex, BDNF has been shown to be important for object recognition 62 memory [23]. Studies have found that BDNF expression in the perirhinal cortex has a 63 positive relationship with recognition memory in rats [23, 24], and that treatment with 64 anti-BDNF serum inhibited long-term recognition memory in rats [25]. An intraperitoneal 65 injection of IL-1ß or LPS significantly decreases BDNF mRNA expression in the rat 66 hippocampus [26]. Furthermore, the oral administration of antimicrobials 67 in specific-pathogen-free mice transiently altered the composition of the microbiota and 68 increased exploratory behavior and the level of BDNF in the brain [27]. Moderate colonic 69

inflammation induced anxiety-like behavior and decreased BDNF mRNA expression in the brain [28]. Our previous study found that a HF diet impaired recognition memory, decreased BDNF, and increased inflammation in the prefrontal cortex of mice [29]. Notably, numerous studies have shown that the beneficial effects of prebiotics and probiotics in obesity occur via the modulation of gut microbial homeostasis [30]. Accordingly, the maintenance of a healthy gut microbial environment is important for the treatment of obesity and its related BDNF and cognitive decline.

77 Rhubarb is usually considered to be a vegetable in western countries. The dried rhubarb rhizome is an important herbal medicine and has been used for thousands of years. Rhubarb 78 or extract of rhubarb has been reported to possess antibacterial, anti-inflammation, 79 antioxidative, antidiabetic, and neuroprotective properties [31, 32]. Rhein (4, 5'-80 81 dihydroxy-anthraquinone-2-carboxylic acid) is the main ingredient of rhubarb. It has been shown that rhubarb-exposed rats have increased bacterial diversity in the ileum [33]. Several 82 reports have shown that rhein prevents activation of NF-kB and the ERK1/ERK2 pathway 83 [34], and inhibits the synthesis and activity of proinflammatory cytokines [35, 36]. It has 84 been shown that rhubarb-exposed rats have increased bacterial diversity in the ileum [33]. 85 Rhein has also been reported to be an antibacterial agent which inhibits Staphylococcus 86 aureus [37]. Previously rhein has been reported to decrease body weight gain and fat 87 accumulation in HF diet-induced obese mice [38-40]. However, the potential effects of rhein 88 against alteration of gut microbiota and cognition in HF diet-induced obesity have not been 89 studied. The present study used a chronic HF diet-induced obese mouse model to investigate 90 whether rhein supplementation prevents endotoxinemia, alteration of gut microbiota, 91

92 recognition memory decline, body weight gain, and glucose intolerance in these mice.
93 Furthermore, the neuroinflammatory TLR4-MyD88-JNK/NFκB signaling pathway,
94 pro-inflammatory cytokines (TNF-α, IL-6 and IL-1β), and neurotrophin BDNF were assessed
95 in the perirhinal cortex.

96

97 **2. Methods**

98 2.1. Animals and treatments

Twenty-four C57Bl/6J male mice (8 weeks old) were obtained from the Australian 99 Bio-Resource Centre (Moss Vale, NSW), and housed in environmentally controlled 100 101 conditions (temperature 22°C, 12 hour light/dark cycle). Eight mice were fed a lab chow diet as a control (Con group). Sixteen mice were fed a HF diet (HF group) containing 60% fat by 102 103 calories (SF13-092; Specialty Feeds, Glen Forrest, WA). After 8 weeks, the 16 mice fed a HF diet were divided into two groups: 8 mice continued to receive the HF diet, and the other 8 104 mice received the rhein treatment (HF+R group) for 6 weeks. Rhein was mixed in the HF diet 105 (dosage: 120 mg/kg body weight per day) [41]. Rhein (98%, C15H8O6, MW = 284.21) was 106 purchased from Sangon Biotech Co. Ltd, China. Body weight was measured on the last day 107 in every week. Food intake was recorded on the first day in every week. A weighed amount 108 109 of fresh diet was given at the beginning of the dark cycle. The remaining food in the cage plus spillage were collected and weighed 24 hours later. After 6 weeks of treatment, the novel 110 object recognition test and the intraperitoneal glucose tolerance test (IPGTT) were carried 111 out. The mice were asphyxiated in chambers prefilled with CO₂ 4 days after the tests were 112 carried out. Plasma, cecal contents and brain tissue were collected, snap frozen and stored at 113

-80 °C for further analyses as detailed below. The colon tissue was fixed in 10% buffered
formalin for immunohistochemistry. The study was approved by the University of
Wollongong Animal Ethics Committee (AE13/11) and all animal experiments were
conducted in compliance with the National Health and Medical Research Council Australian,
Code of Practice for the Care and Use of Animals for Scientific Purposes (2004).

119

120 2.2. Real-time PCR (qRT-PCR) to quantify microbial strains from cecal content

121 The cecal contents of mice were collected immediately after the mice were sacrificed and 122 stored at -80°C. The QIAamp DNA Stool Minikit (QIAGEN, Germany) was used to extract DNA from cecal contents according to the manufacturer's instructions. Group-specific 123 primers based on 16S rDNA sequences PCR assay were forward Bacteroides- Prevotella, 124 125 GAGAGGAAGGTCCCCCAC; reverse *Bacteroides*-Prevotella, CGCTACTTGGCTGGTTC AG; forward Lactobacillus, GAGGCAGCAGTAGGGAATCTTC; reverse Lactobacillus, GG 126 CCAGTTACTACCTCTATCCTTCTTC; forward Bifidobacterium, CGCGTCTGGTGTGA 127 AAG; reverse Bifidobacterium, CCCCACATCCAGCATCCA; forward Desulfovibrios, CC 128 GTAGATATCTGGAGGAACATCAG; reverse Desulfovibrios, ACATCTAGCATCCATC 129 GTTTACAGC. Quantitative real-time PCR was performed in a 20-µL final reaction volume 130 using a SYBR green I master in a Lightcycler 480 (F. Hoffmann-La Roche Ltd, Switzerland). 131 Amplification was carried out with 40 cycles of 95°C for 5 seconds, 60°C for 10 seconds, and 132 72°C for 10 seconds. Each assay was performed in duplicate in the same run. The level of 133 expression for each gene was calculated using the comparative threshold cycle value (Ct) 134 method, using the formula $2^{-\Delta\Delta Ct}$ (where $\Delta\Delta Ct = \Delta Ct$ sample - ΔCt reference). The final 135

results were expressed as normalized fold values relative to the normal group as describedpreviously [42].

138

139 2.3. Lipopolysaccharide (LPS) determination

The concentration of plasma LPS was measured by enzyme-linked immunosorbent assay (LAL assay kit, Hycult Biotech, The Netherlands). The absorbance at 405 nm was measured with a spectrophotometer. A measurable concentration ranges from 0.04 to 10 EU/ml. All samples for LPS measurements were performed in duplicate.

144

145 2.4. Immunohistochemistry

The immunohistochemical staining has been described in our previous work (Dinh et al., 146 147 2015). Fixed colon tissues were embedded in paraffin and sectioned at 5 μ m. The sections were rehydrated in xylene and then in graded ethanol solutions. The sections were then 148 washed in 0.3% H₂O₂ in methanol for 10 min, blocked with 5% normal rabbit serum or goat 149 serum, and incubated overnight at 4 °C with primary antibodies. Primary antibodies were 150 anti-F4/80 (1: 500 dilution; ab6640), anti-CD11c (1: 1000 dilution; ab6640), and anti-CD206 151 (1: 1000 dilution; ab6640) (all from Abcam Inc, Cambridge, MA). Sections were then washed 152 3 times with TBST and incubated consecutively with the appropriate biotinylated secondary 153 antibodies: rabbit anti-rat IgG (1: 500 dilution; ab6733), goat anti-Armenian hamster IgG 154 H&L (1: 500 dilution; ab5744) and goat anti-rabbit IgG H&L (1: 500 dilution; ab6720) (all 155 from Abcam Inc, Cambridge, MA) for 30 minutes at room temperature. The sections were 156 then washed and incubated with streptavidin-HRP polymer conjugate (#2438, Sigma-Aldrich 157

Pty. Ltd, Sydney, NSW, Australia) for 30 min at room temperature. The sections were then 158 washed and developed using the ImmPACT DAB peroxidase substrate kit (#4100, Vector 159 laboratories Inc., Burlingame, CA, USA) and counterstained with haematoxylin (POCD 160 Scientific, Artarmon, NSW, Australia). Six fields from three sections of each mouse were 161 viewed under a Leica microscope and digital photographs were captured. Image J software 162 163 was used to quantify the area of F4/80, CD11c, and CD206 immunoreactivity on each fields. The immunohistochemical staining F4/80, CD11c, and CD206 were quantified as a 164 percentage of positive area per image. The Immunoreactivity is quantified as the % of pixels 165 in an area of interest that have intensity greater than the background using Image J computer 166 software, http://rsb.info.nih.gov/ij/docs/pdfs/examples.pdf. 167

168

169 2.5. Western blotting

Perirhinal cortexes were dissected and homogenized in a NP-40 lysis buffer. The following antibodies were used: MyD88 (sc-74532), NF κ B (sc-7178), p-JNK (sc-81502), IL-1 β (sc-7884), BDNF (sc-20981), and IL-6 (sc-7920) from Santa Cruz Biotechnology (Santa Cruz, CA); TNF- α (#11948) and TLR4 (#2219) from Cell Signaling Technology (Beverly, MA). The bands corresponding to the proteins of interest were scanned and band densities were analyzed using the automatic imaging analysis system, Quantity One (Bio-Rad Laboratories, Hercules, CA). All quantitative analyses were compared to the control group.

177

178 2.6. Novel object recognition test

179 Recognition memory was assessed by performing a novel object recognition test based on

our group's previous studies [29]. Briefly, a white open-field square box measuring 55 cm in 180 length, 55 cm in width, and 35 cm in height was used. The open-field box was located in a 181 sound proof room, and lit at approximately 14 lux. The experimental procedure consisted of 182 habituation, training, and retention sessions, which were recorded using a video camera 183 placed above the open-field box. All objects and the open-field box were cleaned with 70% 184 ethanol between each mouse. For habituation, mice were individually placed in the box for 5 185 minutes to explore the environment in the absence of objects. During the training session, two 186 identical objects (A) were placed at opposing corners of the box, 5 cm from the adjacent wall. 187 188 Each mouse was then placed in the middle of the open-field box and left to explore the objects for 5 minutes. A mouse was considered to be exploring the object if it was sniffing, 189 touching, or facing the object within 2 cm or less, and measurements were recorded in 190 191 seconds. For the retention session, one familiar object (A) was replaced with one novel object (B) and measurements were taken according to how much time each mouse spent at each 192 object as per the training session. The retention session commenced upon placing each mouse 193 in the middle of the open-field box 90 minutes after its training session, and leaving it to 194 explore for another 5 minutes. Novel object exploration time and the discrimination index (DI 195 = [(Novel Object Exploration Time/Total Exploration Time) – (Familiar Object Exploration 196 Time/Total Exploration Time)] \times 100) were used to evaluate the recognition memory of 197 the mice [43]. 198

199

200 2.7. Intraperitoneal glucose tolerance test

201 Mice were fasted overnight before a glucose tolerance test was performed to assess glucose

clearance, following an intraperitoneal injection of glucose (0.5 g/kg; Sigma-Aldrich, St
Louis, MO, USA). Blood samples were taken from the tail vein at 0, 15, 30, 60 and 120
minutes following the injection of glucose. Blood glucose was measured using an Accu-Chek
glucometer (Roche Diagnostics GmbH Mannheim, Germany).

206

207 2.8. Statistical analysis

Data were analyzed using the statistical package SPSS 20 (SPSS, Chicago, IL). Data was 208 first tested for normality before differences among the Con, HF, and HF+R groups were 209 determined using one-way analysis of variance (ANOVA). This was followed by the post hoc 210 Tukey-Kramer honestly significant difference (HSD) test for multiple comparisons among the 211 groups. A *p* value of <0.05 was considered to be statistically significant. Values are expressed 212 213 as mean \pm SEM. Pearson's correlations were used to examine the relationship between the discrimination index in the novel object recognition test and plasma LPS and BDNF levels in 214 the perirhinal cortex. 215

216

217 **3. Results**

218 *3.1. Rhein reversed the alteration of gut microbiota induced by a HF diet*

To investigate the effect of rhein on intestinal microbiota, we used qRT-PCR to evaluate the abundance of several vital strains of gut flora in the cecal content, including *Bacteroides-Prevotella* spp, *Lactobacillus* spp., *Bifidobacterium* spp. and *Desulfovibrios* spp. A chronic HF diet significantly altered gut microbiota in the HF group compared to the control group. The amounts of *Bacteroides-Prevotella* spp. and *Desulfovibrios* spp. DNA

were significantly decreased (p < 0.001, p < 0.001), while *Bifidobacterium* spp. and 224 Lactobacillus spp. DNA were significantly increased (p < 0.001, p = 0.003) (Fig 1). A 225 226 6-week rhein oral treatment reversed the altered gut microbiota induced by the HF diet. The amount of *Bacteroides-Prevotella* spp. and *Desulfovibrios* spp. DNA were significantly 227 increased in the HF+R group compared to the HF group (p = 0.044, p = 0.044), although the 228 amount of Bacteroides-Prevotella spp. DNA in the HF+R group was still lower than the 229 control mice (p < 0.001) (Fig. 1). Meanwhile, the rhein treatment prevented the HF 230 diet-induced alteration of the amount of Bifidobacterium spp. DNA in the HF+R group 231 compared to the HF group (p < 0.001). There was no significant difference in 232 *Bifidobacterium* spp. DNA between the HF+R group and the control group (p = 0.997) (Fig. 233 1). The amount of *Lactobacillus* spp. DNA of the HF+R group was lower than the HF group 234 235 (p = 0.003), but there was no significant difference between the HF+R group and the control group (p = 0.159) (Fig. 1). 236

237

238 3.2. Rhein decreased plasma LPS concentration in obese mice induced by a HF diet

To further determine whether changes in the gut microbiota could be associated with systemic inflammation, we measured the plasma concentration of LPS, a trigger of inflammation. The concentration of plasma LPS was 59% higher in the HF group than the control group (HF: 1.02 ± 0.12 EU/ml, Control: 0.64 ± 0.11 EU/ml, p < 0.001) (Fig. 2A). The rhein treatment for 6 weeks prevented an increase of plasma LPS induced by the HF diet (HF: 1.02 ± 0.12 EU/ml, HF+R: 0.64 ± 0.13 EU/ml, p < 0.001). There was no difference between the control and HF+R groups in the plasma LPS concentrations (p = 1.000). 246

3.3. Rhein reduced M1 macrophage accumulation in the colon of HF diet-induced obese mice 247 248 To investigate the effect of rhein on macrophage accumulation in the colon of HF diet mice, we stained macrophages with F4/80 antibody (Fig 2B and C). The positive immunoreactivity 249 250 of F4/80 was significantly increased in the colon of obese mice, however this was reduced by the rhein treatment (Fig. 2B). Furthermore, we characterized the type of macrophages. CD11c 251 was used to detect M1 macrophages which produce pro-inflammatory cytokines, and CD206 252 was used to detect M2 macrophages which produce anti-inflammatory cytokines [44, 45]. 253 Rhein significantly reduced the CD11c positive staining in the colon of obese mice compared 254 to the obese mice without rhein treatment (Fig. 2B and C). There were no significant 255 differences in the CD206 staining in the colon of obese mice compared to the obese mice 256 257 without rhein treatment (Fig. 2B and C).

258

3.4. Rhein suppressed the inflammation in the perirhinal cortex in HF diet-induced obese
mice

To investigate whether endotoxemia could be related to neuroinflammation, we examined the TLR4-My88-NF κ B/JNK signaling pathway and pro-inflammatory cytokines (TNF- α , IL-6 and IL-1 β) in the perirhinal cortex, an important brain region for recognition memory. Western blotting revealed that the TLR4 and MyD88 level in the perirhinal cortex was significantly higher in the HF group than the control group (p = 0.049, p < 0.001), while the TLR4 and MyD88 level was significantly decreased in the HF+R group (rhein treatment group) compared to the HF group (p = 0.038, p = 0.001) (Fig. 3). There was no statistical

difference in the TLR4 and MyD88 level between the HF+R group and the control group 268 (both p > 0.005). Furthermore, the NF κ B and p-JNK level was significantly higher in the HF 269 group compared to the control group (p = 0.047, p = 0.008), while the rhein treatment 270 prevented an increase of NF κ B and p-JNK (p = 0.036, p = 0.003) (Fig. 3). The 271 272 pro-inflammatory cytokine IL-1, IL-6, and TNF- α levels were significantly higher in the HF group compared to the control group (p = 0.025, p = 0.011, p = 0.011) (Fig. 3). The IL-1 and 273 IL-6 levels were significantly lower in the HF+R group than the HF group (p = 0.032; p =274 0.006). However, the rhein treatment did not significantly decrease the TNF- α level. 275

276

3.5. Rhein improved recognition memory and increased BDNF levels in the perirhinal cortex
of HF diet-induced obese mice

279 To assess whether rhein treatment can prevent HF diet-induced recognition memory deficits, we performed a novel object recognition test in mice fed a HF diet and given rhein 280 treatment. During the training session of the test, the percentage of time spent exploring the 281 identical objects in the open-field was not significantly different among the control group 282 (18.06%), the HF group (17.05%), and the HF+R group (16.50%). One day after the training 283 session, all mice were presented with the familiar object and a new object. The exploration 284 time on the novel object of the HF group was significantly decreased compared to the control 285 mice (HF: 26.43 ± 3.78 seconds, Control: 31.13 ± 2.98 seconds, p = 0.023) (Fig. 4A), 286 suggesting that the HF diet significantly impaired novel object recognition performance. 287 However, the rhein treatment increased novel object exploration time in the HF mice (HF+R: 288 33.57 ± 3.29 seconds, HF: 26.43 ± 3.78 seconds, p = 0.002) (Fig. 4A). Consistent with the 289

result of novel object exploration time, the rhein treatment significantly improved recognition memory as assessed by the discrimination index. The HF diet decreased the discrimination index by 60.60% compared to the control group (p = 0.009), while the rhein treatment increased the discrimination index by 178.57% compared with the HF group (p = 0.013) (Fig. 4B). There was no difference between the HF+R group and the control group in novel object exploration time and the discrimination index (p = 0.230, p = 0.785). These results show that recognition memory deficits caused by a HF diet may be prevented by rhein treatment.

We evaluated the effect of rhein on the level of BDNF in the perirhinal cortex of HF diet 297 298 fed mice using western blotting analysis. The BDNF level was significantly lower in the HF group than the control group (p < 0.001) (Fig. 4C), while the rhein treatment significantly 299 increased the BDNF level in the HF+R group compared to the HF group (p < 0.001). 300 However, the BDNF level was still lower in the HF+R group than the control group (p =301 0.036) (Fig. 4C). Pearson's correlation analysis revealed a significantly positive correlation 302 between the discrimination index of the novel object recognition test and the BDNF level in 303 the perirhinal cortex (r = 0.622, p = 0.008) (Fig. 4D). Furthermore, there was a negative 304 correlation between the discrimination index value and the plasma LPS level (r = -0.705, p =305 0.002) (Fig. 4E). 306

307

308 3.6. Rhein reduced body weight and food intake, and improved glucose tolerance in HF
309 diet-induced obese mice

Before the HF diet feeding, there was no significant difference in body weight between the control group and the HF group (Control: 22.82 ± 1.73 g, HF: 23.06 ± 1.73 g, p > 0.05) (Fig.

312 5A). After 8 weeks on the HF diet, the HF group had significant higher body weight than the control group (HF: 33.11±2.41 g, Control: 25.80±1.56 g, p < 0.05). The rhein treatment 313 314 prevented the body weight gain from week 9. After the rhein treatment for 6 weeks, the body weight was significantly lower in the HF+R group than the HF group (HF+R: 33.37±2.85 g, 315 HF: 38.22 ± 3.56 g, p < 0.05), although it was still higher than the control group (HF+R: 316 33.37 ± 2.85 g, Control: 27.47 ±1.93 g, p < 0.05) (Fig. 5A). Furthermore, the energy intake was 317 significantly decreased on the first day following rhein treatment compared to the HF diet (p 318 < 0.001) (Fig. 5B). However, there was no significantly difference in the energy intake for 319 the remaining 5 weeks of treatment between HF+R and HF group (all p > 0.05). 320

Glucose tolerance tests were performed to assess glucose homeostasis. The highest blood glucose level in the HF group and the HF+R group occurred at 30 minutes, while the highest blood glucose level in the control group occurred at 15 minutes (Fig. 5C). The blood glucose level of the rhein treatment group significantly decreased at 15, 30, 60, and 120 minutes compared with the HF group (all p < 0.05), but they were still higher than those of the control group (all p < 0.05).

327

328 **4. Discussion**

In this study, we found that a chronic HF diet altered gut microbiota, increased plasma LPS, increased macrophage accumulation in colon, increased the neuroinflammation response, and decreased the BDNF level in the perirhinal cortex, and impaired recognition memory in obese mice. Rhein oral treatment for 6 weeks significantly ameliorated the altered gut microbiota, lowered plasma LPS, reduced macrophage accumulation, decreased neuroinflammation, and increased BDNF in the perirhinal cortex and improved recognition memory in diet-inducedobese mice.

336 Previous studies have provided compelling evidence to suggest an association between the gut microbiota, HF diet and body weight regulation [46, 47]. Firmicutes and Bacteriodetes 337 338 account for more than 90% of the total gut microbiota [48]. The 8-week HF diet increased 339 Firmicutes and reduced Bacteriodetes. It has also been reported that the HF diet for 8 weeks post-weaning changes the microbiota, decreases the overall bacterial abundance, and 340 increases the ratio of Firmicutes to Bacteriodetes in mice [47]. Ley et al. observed that a 341 342 reduced abundance of Bacteroidetes and an increased abundance of Firmicutes were observed in leptin-deficient obese mice compared with their lean littermates [13]. Consistent with 343 animal models, a similar difference of an increased ratio of Firmicutes/Bacteroidetes in the 344 345 gut microbiota has also been reported in obese humans [49]. In the present study, we found that a chronic HF diet decreased the DNA level of Bacteroides-Prevotella spp. and increased 346 the DNA level of Lactobacillus spp. belonging to Bacteroidetes and Firmicutes respectively 347 at the species level [50]. Therefore, our study at the species level supports the finding from 348 previous studies at the phylum level that a HF diet alters the microbiota in Bacteroidetes and 349 Firmicutes [13, 47]. Importantly, we also found that the rhein treatment prevented the 350 alteration of gut microbiota induced by a HF diet in obese mice, which may contribute to 351 rhein's ability to prevent HF diet-induced obesity. 352

Rhein is the main ingredient of the rhubarb plant. An increased bacterial diversity was observed in the ileum of rhubarb-exposed rats [33]. The 380 bp product (region of the Bacteroides genome) was increased in the feces and bowel mucosa of rhubarb-exposed rats

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[33]. Furthermore, rhein has been considered as an antibacterial agent against *Staphylococcus* 356 aureus [37]. A synergistic or partial synergistic effect of rhein in combination with ampicillin 357 358 or oxacillin against methicillin-resistant Staphylococcus aureus has also been demonstrated [51]. In the present study, we found that rhein attenuated the HF diet-induced alteration of gut 359 microbiota. Furthermore, rhein administration prevented the elevation of HF diet-induced 360 plasma LPS. LPS is a major component of the outer membrane in Gram-negative bacteria. 361 The plasma LPS level was closely correlated with changes in intestinal microbiota, especially 362 the numbers of the Gram-negative Bacteroides-like intestinal bacteria which reside within the 363 364 Bacteroidetes phylum and were significantly reduced in animals fed the HF diet [14]. The elevated plasma LPS is related to the over-production of LPS in the gut by the death of 365 Gram-negative bacteria and their translocation into the bloodstream via an increased 366 367 intestinal permeability in HF diet-induced obesity [52]. In the present study, we found that a chronic HF diet decreased Bacteroides-Prevotella spp. and Desulfovibrios spp. DNA levels, 368 which belong to the Gram-negative bacterium Bacteroidetes and Proteobacteria respectively. 369 370 A deceased Gram-negative bacterium releases LPS which leads to an increased plasma LPS level in obese mice induced by a HF diet. Furthermore, in the present study, the rhein 371 treatment prevented the decrease of Gram-negative bacterium (including 372 Bacteroides-Prevotella spp. and Desulfovibrios spp.) induced by a HF diet. These data 373 strongly suggest that rhein affects the intestinal microbiota and is responsible for the 374 attenuation of metabolic endotoxemia in HF diet-induced obesity. 375

376 LPS induce macrophage activation and accumulation [53]. M1 macrophages produce 377 pro-inflammatory cytokines, such as TNF- α , IL-6, and IL-1 β , while M2 macrophages produce anti-inflammatory cytokines, such as IL-10 [44, 45]. This study showed that there is an increased level of plasma LPS concentration in obese mice on a chronic HF diet. This is accompanied by an increased M1 macrophage accumulation in the colon. These results support previous findings which show that TNF- α expression is significantly increased in the colon of obese mice [54, 55]. Importantly, our present study shows that rhein treatment significantly reduced colon inflammation in obese mice on a chronic HF diet.

TLR4 is the receptor for LPS and it plays a critical role in innate immunity [56]. The 384 stimulation of TLR4 activates the MyD88-dependent pathway to induce NFkB and JNK 385 activation, which in turn leads to the production of pro-inflammatory cytokines such as 386 TNF- α , IL-6, and IL-1 β [57]. In this study, we detected the activation of the 387 TLR4-My88-JNK/NFkB inflammatory signaling pathway. We also found an over-expression 388 389 of pro-inflammatory cytokines in the perirhinal cortex of mice on a chronic HF diet. It has previously been shown that peripheral inflammation acutely impairs object location memory 390 in humans with perirhinal cortex lesions [58]. Importantly, in the present study, rhein 391 treatment prevented the inflammatory response in the perirhinal cortex of HF diet-induced 392 obese mice. This suggests that the anti-inflammatory effect of rhein may contribute to its 393 prevention of recognition memory decline. 394

BDNF has been shown to be important for object recognition memory in the perirhinal cortex [23]. Previous studies found that BDNF expression in the perirhinal cortex has a positive relationship with recognition memory in rats [23, 24]. An intracerebroventricular injection of anti-BDNF serum inhibited recognition memory and altered Trk receptor and BDNF levels in the perirhinal cortex in rats [25]. In our study, the rhein treatment prevented

the HF diet-induced decrease in the BDNF level in the perirhinal cortex in mice. Several 400 rodent studies have demonstrated that inflammation affects the expression of BDNF within 401 the brain. For example, after an intraperitoneal injection of IL-1ß or LPS, the BDNF mRNA 402 expression was significantly decreased in the rat hippocampus [26]. A similar reduction of 403 404 BDNF at the protein level has also been observed in cortical regions [59]. The negative impact of inflammation has important implications for pathophysiology such as the decline of 405 cognitive function. For example, pro-inflammatory cytokines compromise general memory 406 [60] and spatial memory [61], and increase apoptosis in the brain [62]. Individuals with 407 obesity or diabetes with low grade inflammation have an increased risk of cognitive decline 408 [63]. Therefore, the chronic consumption of rhein may lower the neuroinflammation and 409 increase BDNF in the perirhinal cortex and thus improve recognition memory in HF 410 411 diet-induced obesity.

Previous studies have reported that rhein treatment did not significantly influence energy 412 intake in either HF mice or db/db mice. For example, rhein delivered by gavage, did not 413 significantly decrease energy intake of HF mice over 6 weeks [64]. While others showed that 414 food intake was not significantly decreased by the rhein (oral gavage) over 2 weeks in *db/db* 415 mice [65]. In the present study, the energy intake of the rhein group only decreased on the 416 first day following rhein treatment but not thereafter. This initial drop in energy intake may 417 be due to an adaptation period of transition from the HF diet to HF diet mixed with rhein. 418 Consistent with rhein's hypoglycemic effect in streptozotocin-induced diabetic mice [66], our 419 study showed that rhein has an anti-obesity effect by reducing body weight and improving 420 glucose intolerance in HF diet-induced obese mice. Cognitive deficits have been observed in 421

older people with glucose intolerance or diabetes but these deficits appear to be attenuated by
improving glycemic control [67]. A previous study found that rhein oral treatment decreased
body weight gain with increased oxygen consumption suggesting that rhein increased energy
expenditure [64]. Furthermore, weight loss in obese older people can significantly improve
cognition [68]. Therefore, rhein-induced weight loss and improved glucose metabolism can
contribute to improved recognition memory.

In conclusion, this study demonstrated that rhein can improve recognition memory and 428 glucose intolerance and prevent weight gain in mice fed a chronic HF diet. The rhein 429 430 treatment also prevented the HF diet-induced alterations of gut microbiota, hyperendotoxinemia, macrophage accumulation in colon, neuroinflammation, and increased 431 BDNF in the perirhinal cortex in mice. The behavioral and neurochemical improvements 432 433 suggest that supplementation with rhein-enriched food could be a promising strategy to improve HF diet-induced obesity and cognitive decline. 434

435

436 Abbreviations

HF: high fat; LPS: lipopolysaccharide; IPGTT: intraperitoneal glucose tolerance test; BDNF: brain-derived
neurotrophic factor; TLR: Toll-like receptor; MyD88: myeloid differentiation primary-response protein 88;
JNK: c-Jun N-terminal kinase; NFκB: nuclear factor-kappa B; IL-1β: interleukin-1β; IL-6: interleukin-6;
TNF-α: tumor necrosis factor-α.

441

442 Competing interests

443 The authors declare no conflict of interest.

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445 Authors' contributions

Y.Y. and W.S. contributed to the experimental design, researched data, and wrote the manuscript. Z.P.,
W.H., and Z.Q., researched data and contributed to discussions. Y.S. and X.F.H contributed to data
analysis, and wrote and edited the manuscript.

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Figure 1. Bacteroides-Prevotella, Desulfovibrios, Bifidobacterium and Lactobacillus DNA expressions in gut microbiota of the control group (Con), high-fat diet group (HF), and HF with rhein treatment group (HF+R) (n = 8 per group). * p < 0.05 compared to the Con group, # p < 0.05 compared to the HF group, values are means ± SEM.



Con

HF

HF+R



30

Figure 2. The plasma LPS level of control group (Con), high-fat diet group (HF), and HF with rhein treatment group (HF+R) (n = 8 per group) (A). (B and C) The expression of F4/80, CD11c, and CD206 macrophages in the colon. B: Immunohistochemical staining, Bar = 100 μ M. C: Quantification of the F4/80, CD11c, and CD206-positive areas (%). * p < 0.05 compared to the Con group, #p < 0.05 compared to the HF group, values are means ± SEM.



Figure 3. Protein expression levels of TLR4, MyD88, p-JNK, NF κ B, IL-1 β , IL-6, and TNF- α in the perirhinal cortex of the control group (Con), high-fat diet group (HF), and HF with rhein treatment group (HF+R) (n = 8 per group). * p < 0.05 compared to the Con group, # p < 0.05 compared to the HF group, values are means ± SEM.







C.



Figure 4. The object exploration time (A) and the discrimination index (B) in the novel object recognition test of the control group (Con), high-fat diet group (HF) and HF with rhein treatment group (HF+R). (C) The level of BDNF expression in the perirhinal cortex of mice (n = 8 per group). The discrimination index in novel object recognition was positively correlated with BDNF in the perirhinal cortex (D), and negatively correlated with plasma LPS (E). * p < 0.05 compared to the Con group, # p < 0.05 compared to the HF group, values are means ± SEM.





Figure 5. Body weight (A), energy intake (B) and glucose tolerance (C) of the control group (Con), high-fat diet group (HF) and HF with rhein treatment group (HF+R). * p < 0.05 compared to the Con group, # p < 0.05 compared to the HF group, values are means ± SEM.