

Quantitative Systems Toxicology Approach Integrates Simcyp PBPK and Core Hepatocyte Metabolism: a Case Study with Valproic Acid

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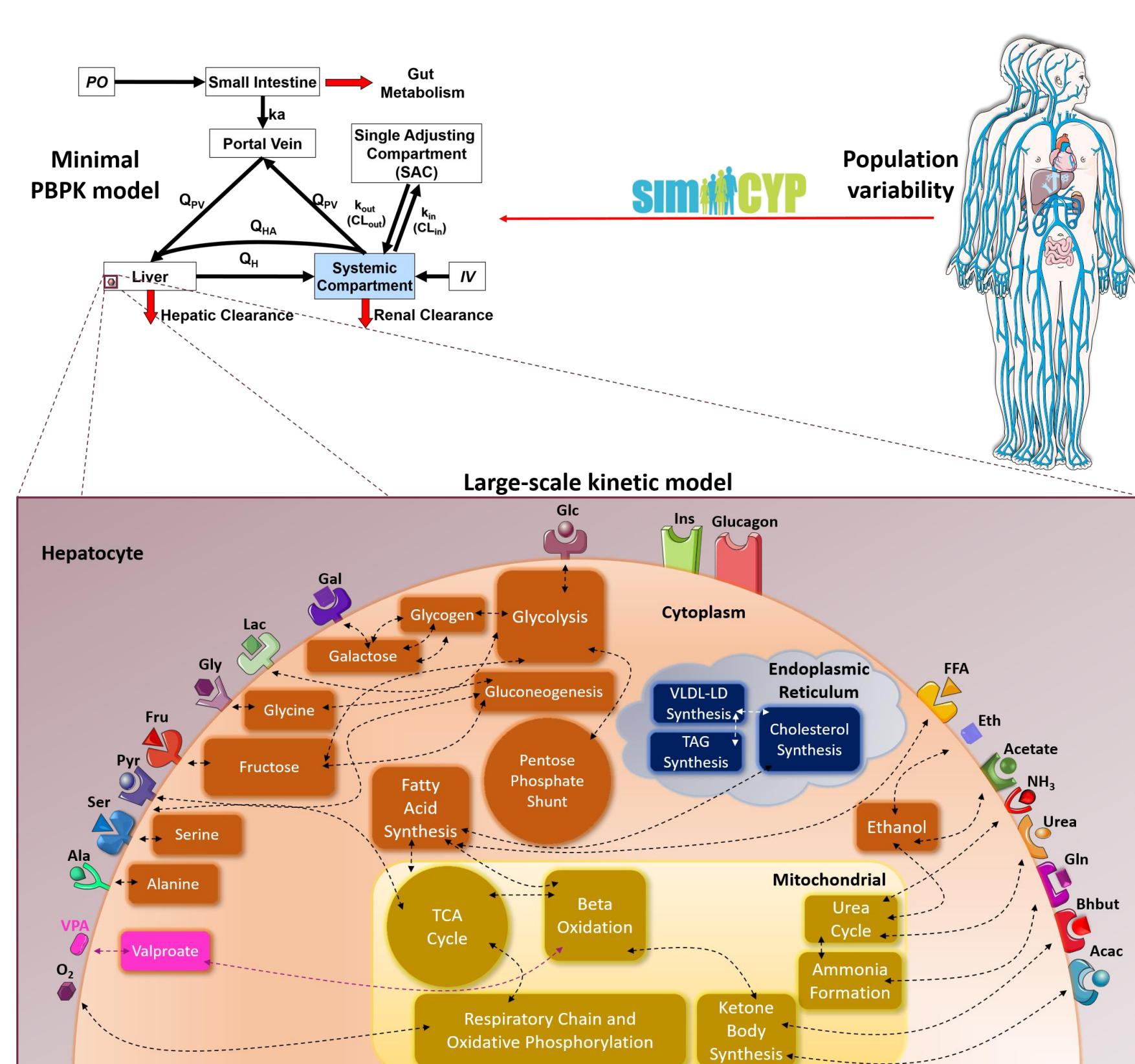
Quantitative systems toxicology modelling approach characterizes effect of valproic acid on lipid metabolism



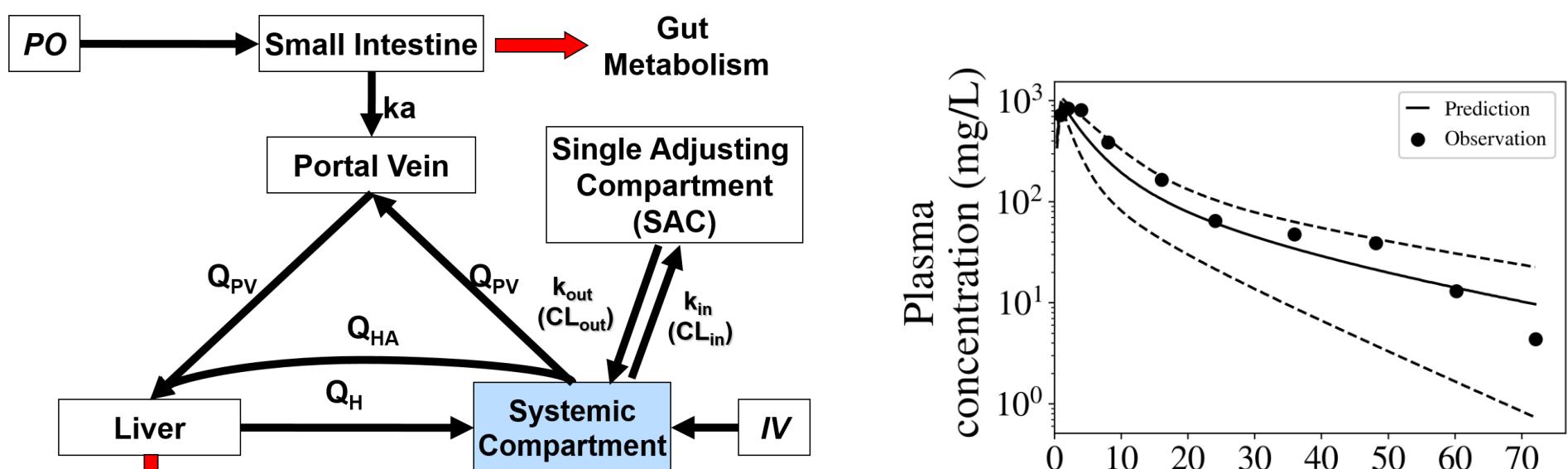
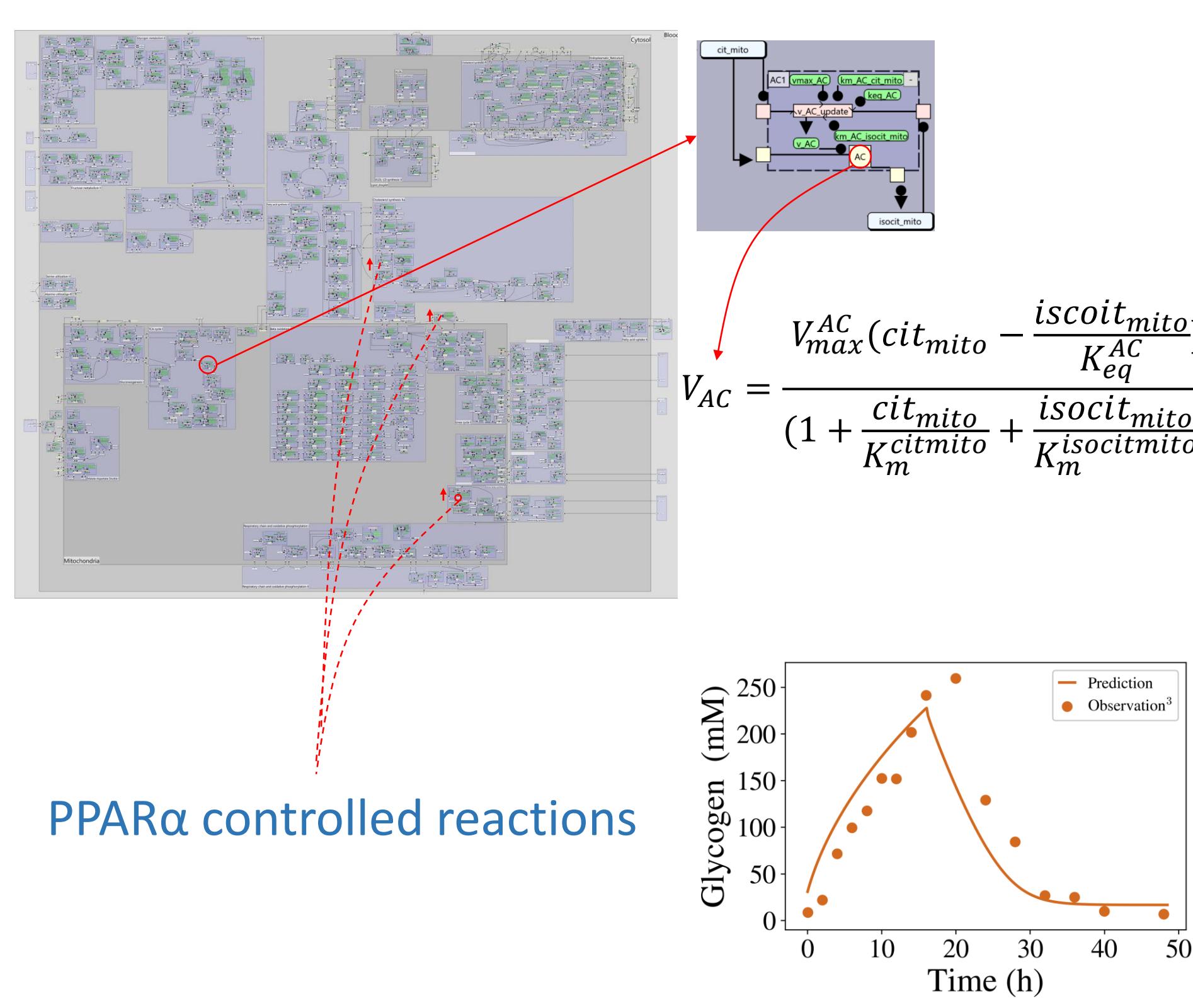
Introduction

- Valproic acid (VPA) is a treatment for epilepsy and bipolar disorder
- A known side effect is induction of hepatic steatosis¹ (lipid accumulation)
- We mechanistically examine and quantify the effect of VPA exposure on lipid metabolism
- We develop a general quantitative systems toxicology (QST) approach integrating Simcyp PBPK with core hepatic metabolism² regulated by PPARα and insulin signalling

Multi-scale QST model



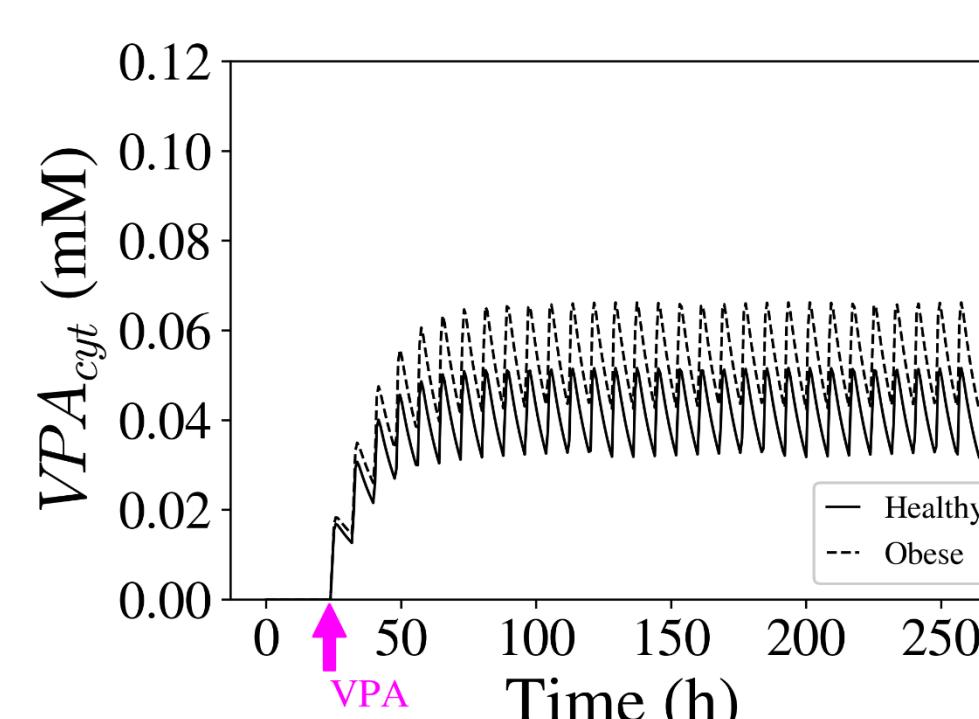
Schematic representation of QST approach



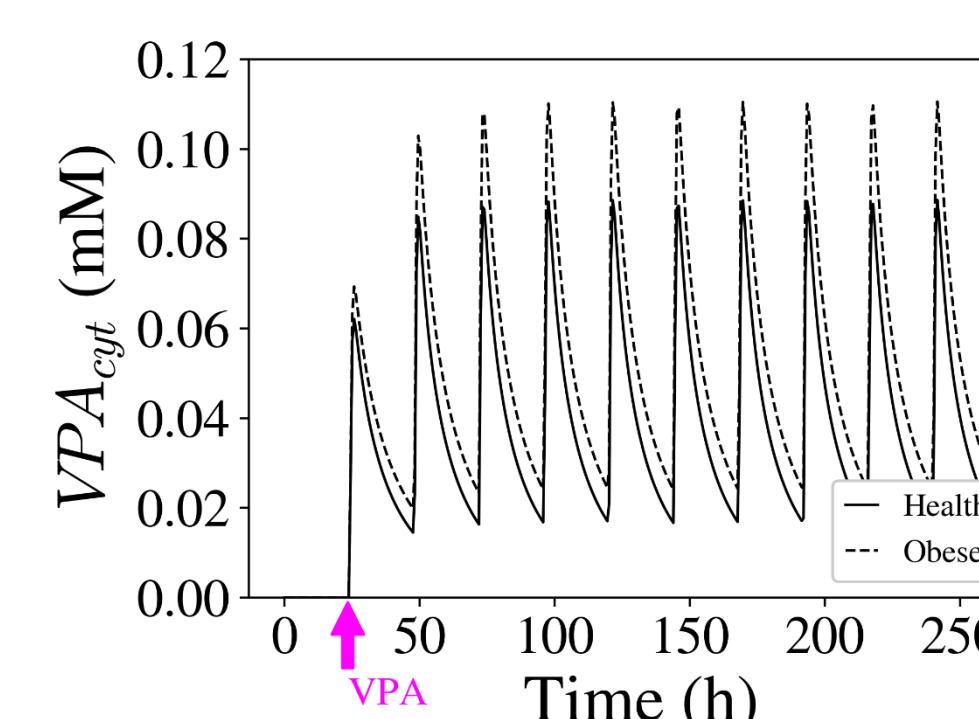
Models are verified independently

Liver concentration of VPA

Oral dose: 250 mg ($\tau = 8\text{h}$)

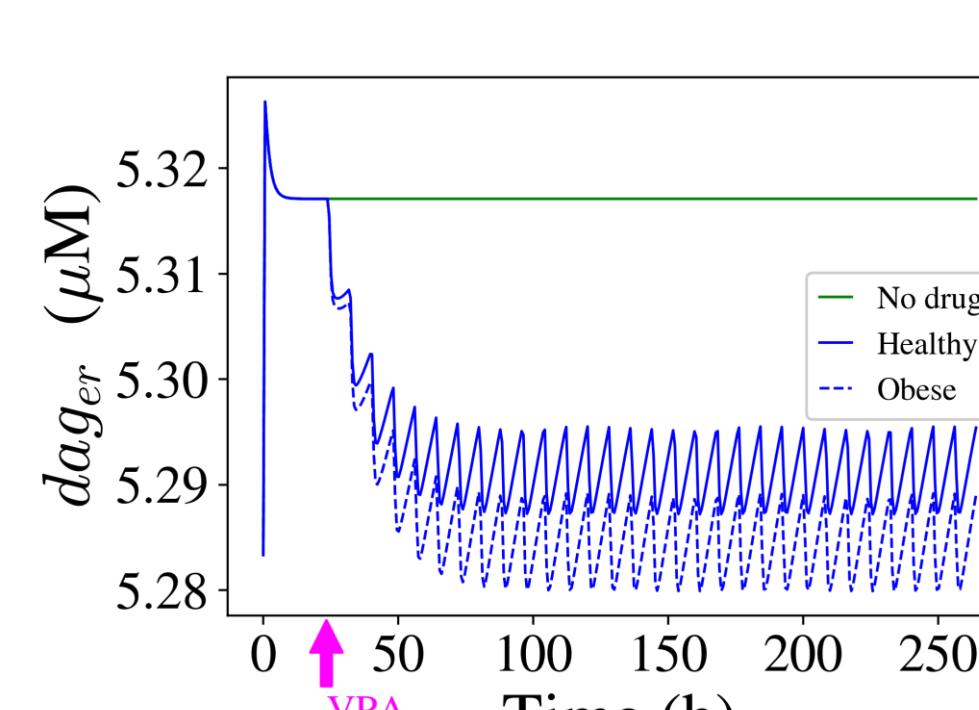


Oral dose: 750 mg ($\tau = 24\text{h}$)

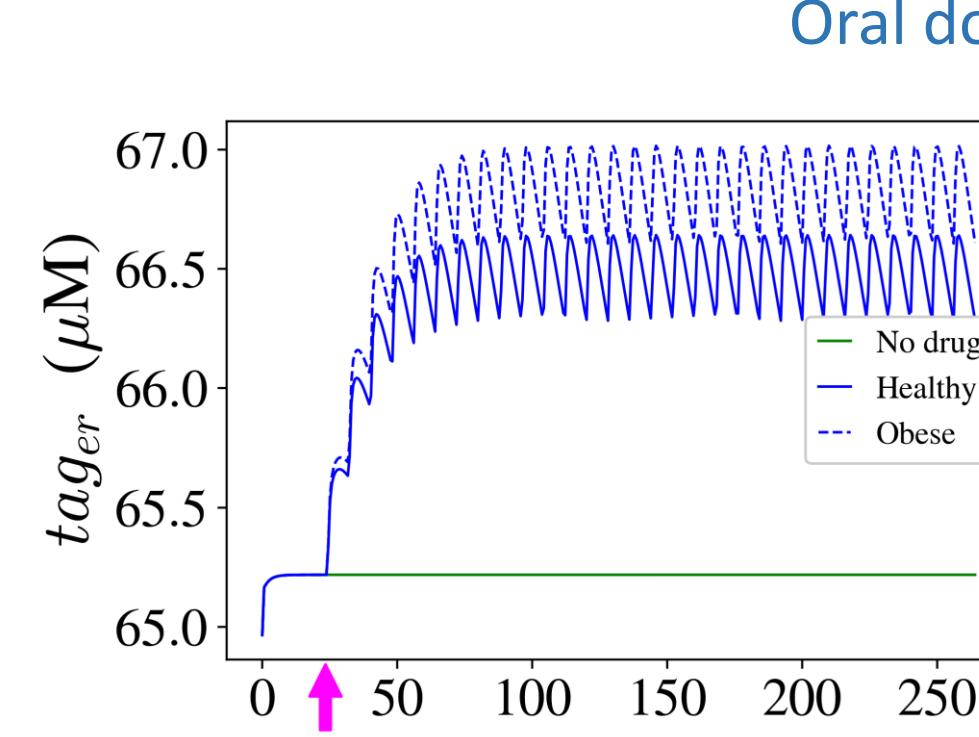
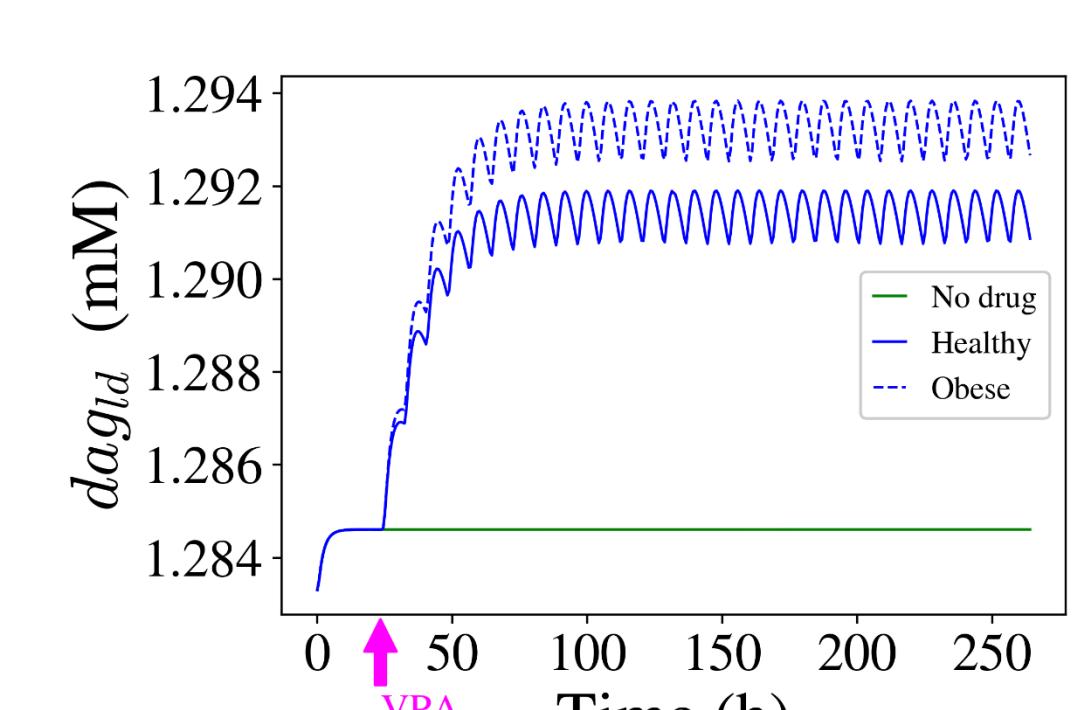


Effect of VPA on lipid metabolism

Endoplasmic reticulum



Lipid droplet

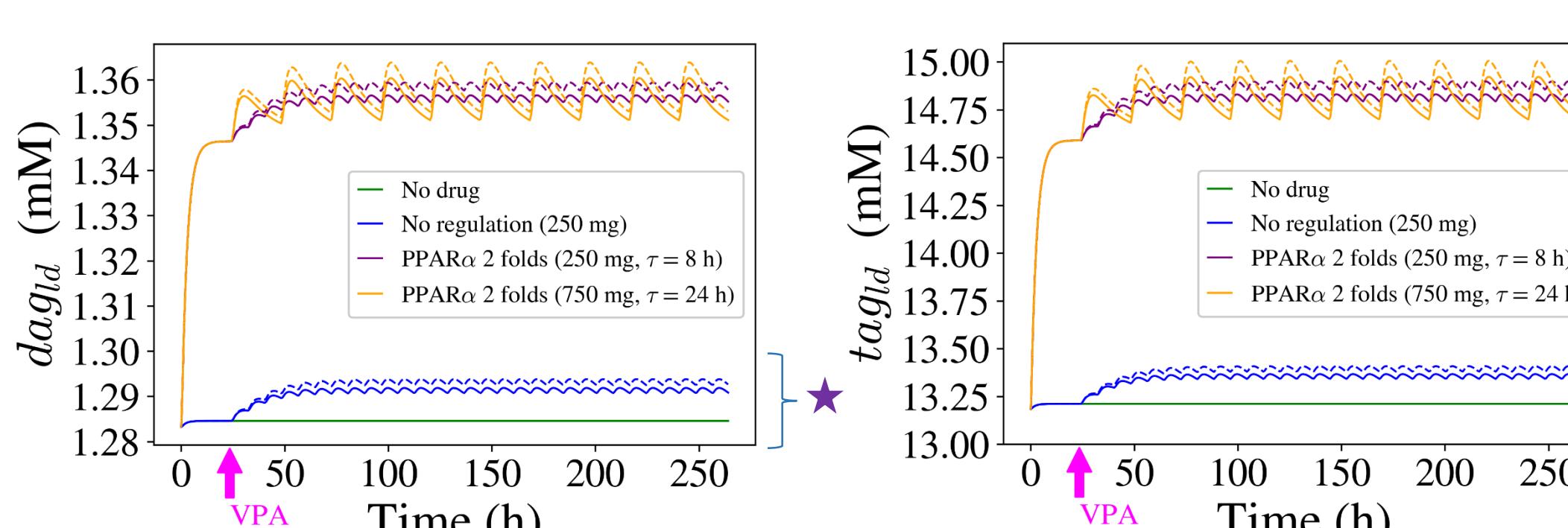


VPA causes persistent disturbance in lipid metabolism

Effect of PPARα on lipid metabolism

- PPARα is a key regulator of fatty acid metabolism

- Healthy -- Obese



PPARα regulation enhances the effect of VPA

Discussion

- We developed a general QST modelling approach to evaluate liver toxicity
- We identify that chronic treatment with VPA results in a persistent disruption in lipid metabolism
- We explore the impact of lipid dysregulation in obese individuals
- We are further evaluating how PPARα regulation affects lipid concentration

Additional Information

Reactions regulated by PPARα⁴

Enzyme	Reaction
AAT	$akg_{cyt} + ala_{cyt} \rightarrow glu_{cyt} + pyr_{cyt}$
ACC1/ACC2	$acoa_{cyt} + atp_{cyt} \rightarrow adp_{cyt} + p_{cyt} + malcoa_{imm}$
ACSL1/ACSL4/ACSL5	$atp_{cyt} + c16_{cyt} + coa_{cyt} \rightarrow amp_{cyt} + c16coa_{cyt} + pp_{cyt}$
ALDR	$gra_{cyt} + nadph_{cyt} \rightarrow glyc_{cyt} + nadp_{cyt}$
ALDDH/ALDDHII	$aald_{cyt} + nad_{cyt} \rightarrow acetate_{cyt} + nadh_{cyt}$
ALDDH _{gra}	$gra_{cyt} + nad_{cyt} \rightarrow glycinate_{cyt} + nadh_{cyt}$
ASL	$arg_{succy} \rightarrow arg_{pyr} + fum_{cyt}$
CACT	$c16car_{cyt} + car_{mito} \rightarrow car_{cyt} + c16car_{mito}$ $valcar_{cyt} + car_{mito} \rightarrow valcar_{cyt} + valcar_{mito}$
CPS	$2 \text{atp}_{mito} + \text{NH}_3_{mito} \rightarrow 2 \text{adp}_{mito} + \text{cmp}_{mito} + \text{p}_{mito}$
CPT1	$c16coa_{cyt} + car_{cyt} \rightarrow c16car_{cyt} + coa_{cyt}$ $valcoa_{cyt} + car_{cyt} \rightarrow valcar_{cyt} + coa_{cyt}$
G6P _{er}	$g1c6p_{er} \rightarrow g1c_{er} + p_{er}$
Glyck	$atp_{cyt} + glyc_{cyt} \rightarrow adp_{cyt} + g3p_{cyt}$
GLNASE	$gln_{mito} \rightarrow gln_{mito} + NH_3_{mito}$
HMG _{syn_cyt}	$acoa_{cyt} + kc4coa_{cyt} \rightarrow coa_{cyt} + hmgoa_{cyt}$
HMG _{syn}	$acoa_{mito} + kc4coa_{mito} \rightarrow coa_{mito} + hmgoa_{mito}$
ME	$mal_{cyt} + nadp_{cyt} \rightarrow nadph_{cyt} + pyr_{cyt}$
OTC	$cmp_{mito} + orn_{mito} \rightarrow ct1_{mito} + p_{mito}$
PEPCK	$gtp_{cyt} + oaa_{cyt} \rightarrow gdp_{cyt} + pep_{cyt}$

References

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