

# PLACENTA N-6/N-3 PUFA RATIO IS ASSOCIATED WITH VISCERAL ADIPOSITY AND CARDIOVASCULAR RISK IN THE OFFSPRING AT 6 YEARS OF AGE

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# BACKGROUND

Long chain polyunsaturated fatty acids (LC-PUFA) **Table 1:** Relative abundance (%) of the analyzed placental fatty acids. Mean±SD are essential nutrients for the development of the fetus and are supplied by the mother through the placenta. Omega-6 (n-6) arachidonic acid (AA) and both omega-3 (n-3) eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) stand out for their functional roles. Recent studies show that the concentrations of these fatty acids in maternal blood and umbilical cord are associated with adiposity in the offspring. Indeed, prenatal exposure <sup>2</sup> to AA n-6 promotes adipocyte maturation while 20 DHA n-3 is known to inhibit it.

# **OBJECTIVES**

- To study the placental levels of n-6 and n-3 functional LC-PUFA.
- To determine its **association** with **anthropometric** and cardio-metabolic parameters in the offspring at **6 years** of age.

# **METHODS**

The n-6 and n-3 PUFA profile was analyzed in 117<sup>2</sup> placentas from a population cohort of pregnant women-newborn pairs by gas chromatography.

Total n-6 and n-3 PUFA content as well as the ratios of LC-PUFA (AA/EPA and AA/DHA) were calculated from the percentages of relative abundance of each PUFA.

These PUFA were subsequently correlated with anthropometric (weight, height and body mass index) and cardio-metabolic parameters [visceral fat and carotid intima-media thickness (cIMT)] in the offspring followed-up at 6 years of age (N=85).

Table 2: Descriptive characteristics of the offspring at the age of 6 years.

	Relative	
Lipid Profile	Abundance	Follow-up (6 year)
	(%)	Anthropometry
OTAL SFA	54.22±6.07	Girls (%)
OTAL MUFA	15.64±2.71	Age (years)
8:2n6 (linoleic) LA	9.69±1.39	Weight (kg)
0:2n6 (eicosadienoic)	0.1±0.07	Weight-SDS
0:3n6 (dihomo-γ-linolenic)	0.61±0.1	Height (cm)
0:4n6 (arachidonic) AA	12.47±3.84	Height-SDS
2:4n6 (adrenic)	0.5±0.17	Hip (cm)
2:5n6 (osbond)	0.1±0.06	Waist (cm)
OTAL PUFA n6	23.47±5.63	BMI (kg/m²)
8:3n3 (α-linolenic) ALA	0.22±0.07	BMI-SDS
8:4n3 (stearidonic)	0.65±0.58	Cardio-metabolic
0:3n3 (eicosatrienoic)	3.5±1.17	Fat mass (%)
0:5n3 (eicosapentaenoic) EPA	0.88±0.25	% Fat mass-SDS
2:5n3 (docosapentaenoic) DPA	0.25±0.08	Visceral fat (mm <sup>3</sup> )
2:6n3 (docosahexaenoic) DHA	1.17±0.53	cIMT (cm)
OTAL PUFAn3	6.67±2.68	Glucose (mg/dl)
Δ/ΓΡΔ	14.49±4.14	Insulin (mlU/L)
	11	HOMA-IR
Α/υμα		Triglycerides (mg/dl)
A/EPA+DHA	6.2/±1.58	Total cholesterol (mg/dl)
otal PUFAn6/Total PUFAn3	3.55±0.57	HDL cholesterol (mg/dl)

A higher ratio of LC-PUFA n-6/n-3 (AA/EPA and AA/DHA) in placenta is associated with higher visceral fat and thicker cIMT at 6 years of age. The n-6 and n-3 fatty acids provided by the mother during pregnancy may influence visceral adiposity and cardiovascular risk in the offspring at 6 years of age.

#### RESULTS

Placental concentrations of AA (n-6) and total PUFA n-6 were positively correlated with visceral fat (r = 0.229, p = 0.036 and r = 0.211, p = 0.045, respectively). DHA (n-3) and total PUFA n-3 were negatively correlated with cIMT (r = -0.228, p = 0.036 and r = -0.254, p = 0.019, respectively). The AA/EPA ratiowas **positively correlated with visceral fat** (r = 0.337, p = 0.002) while the **AA/DHA** ratio was positively correlated with cIMT (r = 0.243, p = 0.025). All these associations remained significant in multivariate analysis after adjusting for possible confounding variables (maternal age, gestational weight gain, gestational age, sex, and birth-weight).





**Figure 1:** Graphical representation of the correlations between the main placental PUFA and the anthropometric and cardio-metabolic parameters of the offspring at the age of 6 years.

#### CONCLUSIONS



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