Editor's Highlights

**Designer drugs and liver toxicity:** Cathinone designer drugs (derivatives of β-keto amphetamines) have been increasingly used for recreational purposes, but the assessment of their adverse effects has been limited. One of the more notable adverse effects of these drugs, colloquially referred to as bath salts, is significant liver damage. The paper by Valente et al. (pp. 89-102) examines common indicators of cellular stress and toxicity using primary rat hepatocytes and HepaRG cells. The authors observed that each of the 4 drugs tested (hydrochloride salts of methylene, 3,4-methylenedioxyprovalerone, pentedrone, and 4-methylthecathinone) were capable of eliciting reactive oxygen and nitrogen species, and depleting glutathione. The 2 most toxic compounds, 3,4-methylenedioxyprovalerone and pentedrone, were also capable of depleting ATP levels. The study identifies oxidative stress and mitochondrial dysfunction as key mechanisms in the apoptotic cell death of hepatic cells that may contribute to liver damage in users of these drugs. View Abstract—Nathan Cherrington

**Occupational exposure to man-made stone products:** The report by Pavan et al. (pp. 4-17) addresses the concern that processing of man-made artificial stone, a composite of quartz, metals, and agglomerated pigments and resins, is promoting occupational pulmonary fibrosis. The work carefully analyzes particle composition and characterizes the potential for cytotoxicity, cell membrane lysis, and epithelial-to-mesenchymal cell transition in relevant cell types compared to the well-characterized effects of the reference quartz material Min-U-Sil 5. The authors showed that the resin content of the dusts can reduce the membrane lysing and cytotoxic effects of the particles; however, the resin is lost in biologically relevant thermal degradation, revealing the underlying toxicity of the quartz/metal composites. The high metal content of the particles produces excess oxidant generation and promotes epithelial-to-mesenchymal transition, a hallmark and potential underlying mechanism of fibrosis. This study provides evidence that exposure to highly reactive particles of respirable size can increase risk of fibrosis, which may inform regulations for the safe production of products from the artificial stone. As indicated in the title, advanced man-made materials may generate ancient dust-related disease that has been an occupational health concern for millennia. View Abstract—Gary W. Miller

**Role of choline in PFOS-mediated liver toxicity:** Perfluorooctane sulfonate (PFOS) has been shown to cause hepatic steatosis and reduce total serum cholesterol levels, but the mechanism underlying these effects is not known. In the article by Zhang et al. (pp 186-197) the investigators tested the hypothesis that PFOS forms an ion pair with choline. Mice were fed either choline-deficient or choline-supplemented diets to determine the effects of altered choline on PFOS-mediated steatosis and cholesterol homeostasis. Previous studies have shown that severe restriction of dietary choline can cause steatosis. Reduced dietary choline exacerbated the effects of PFOS, while increased dietary choline mitigated the adverse effects of choline. The authors conducted an extensive analysis of PFOS distribution, cholesterol levels, oxidative stress, and hepatic function to support the hypothesis that PFOS binds to choline, thereby reducing available choline needed for cholesterol biosynthesis and export. View Abstract—Gary W. Miller

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Perfluorooctane Sulfonate-Choline Ion Pair Formation: A Potential Mechanism Modulating Hepatic Steatosis and Oxidative Stress in Mice

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ABSTRACT

The mechanisms underlying perfluorooctane sulfonate (PFOS)-induced steatosis remain unclear. The hypothesis that PFOS causes steatosis and other hepatic effects by forming an ion pair with choline was examined. C57BL/6 mice were fed either a control diet or a marginal methionine/choline-deficient (mMCD) diet, with and without 0.003, 0.006, or 0.012% potassium PFOS. Dietary PFOS caused a dose-dependent decrease in body weight, and increases in the relative liver weight, hepatic triglyceride concentration and serum markers of liver toxicity and oxidative stress. Some of these effects were exacerbated in mice fed the mMCD diet supplemented with 0.012% PFOS compared with those fed the control diet supplemented with 0.012% PFOS. Surprisingly, serum PFOS concentrations were higher while liver PFOS concentrations were lower in mMCD-fed mice compared with corresponding control-fed mice. To determine if supplemental dietary choline could prevent PFOS-induced hepatic effects, C57BL/6 mice were fed a control diet, or a choline supplemental diet (1.2%) with or without 0.003% PFOS. Lipidomic analysis demonstrated that PFOS caused alterations in hepatic lipid metabolism in the PFOS-fed mice compared with controls, and supplemental dietary choline prevented these PFOS-induced changes. Interestingly, dietary choline supplementation also prevented PFOS-induced oxidative damage. These studies are the first to suggest that PFOS may cause hepatic steatosis and oxidative stress by effectively reducing the choline required for hepatic VLDL production and export by forming an ion pair with choline, and suggest that choline supplementation may prevent and/or treat PFOS-induced hepatic steatosis and oxidative stress.

Key words: perfluorooctane sulfonate; liver; choline; steatosis; mechanism.

Perfluorooctane sulfonate (C8F17SO3 −, PFOS) is an exceptionally stable, highly electronegative fluorosurfactant resistant to environmental and metabolic degradation. The principal use of PFOS is in extreme environments such as aqueous film forming foam in firefighting and acid mist suppression in electroplating. PFOS may also arise from the degradation of its manufacturing precursors, perfluoroctane sulfonyl fluoride (C8F18SO2, POSF), or perfluoroctane sulfonamide-based compounds (Xu et al. 2004). PFOS has been detected in human serum at concentrations in the ng/ml range in the general population (Hansen et al.)
results in insufficient choline supply leading to steatosis. Although this ion pair was not detected in liver from PFOS-treated mice, or from naïve rat liver spiked with PFOS in vitro, such detection may be hampered by the energies required for the LC-MS/MS analysis.

In this study, the hypothesis that an hepatic in situ ion-pair forms between PFOS and choline in vivo after oral exposure to PFOS and contributes to the mechanism for the PFOS-induced hepatic steatosis was examined. This hypothesis was tested by examining whether feeding a marginal MCD diet (mMCD) would exacerbate the hepatic steatotic effects of dietary PFOS, and mitigated by feeding a diet supplemented with choline.

**MATERIALS AND METHODS**

**Animals.** Male C57BL/6 mice, 8- to 10-weeks old, were used for all the experiments reported herein. Mice were housed in an Association for Assessment and Accreditation of Laboratory Animal Care accredited facility, with a temperature (25°C) and light (12-h light/12-h dark) controlled environment. All animal use protocols were approved by The Pennsylvania State University Institutional Animal Care and Use Committee.

**Chemicals.** Potassium PFOS (K+PFOS; FC-95, Lot 217, 87% purity) was provided by the 3M Company. Impurities in PFOS have been previously described and consisted primarily of shorter chain homologues of PFOS (Seacat et al., 2002). Chemicals and reagents used in the biochemical and lipidomic studies were of the highest purity available.

**Diets.** A summary of the diets used for all studies is provided in Table 1. The diets were prepared by Dyets, Inc. (Bethlehem, Pennsylvania). A semi-purified AIN-93G diet was used as the control diet for all studies. An mMCD diet was prepared using a formulation that caused gradual progression of steatosis, based on previous unpublished data. The control and mMCD diets were prepared with identical macro- and micronutrients except the control diet contained 3.0 g L-methionine/kg diet and 4.2 g choline bitartrate/kg diet, whereas the mMCD diet contained 0.009 g L-methionine/kg diet and 0.012 g choline bitartrate/kg diet. The control and mMCD diet were prepared with 0.000, 0.003 (30 mg/kg), 0.006 (60 mg/kg), or 0.012% (120 mg/kg) K+PFOS (not adjusted for the purity of PFOS). Stock K+PFOS powder was mixed with sucrose, then added to the diet formulation to achieve target dietary concentrations of K+PFOS while maintaining a constant level of added sucrose. The dietary content of PFOS was confirmed by LC-MS/MS. The dietary PFOS concentrations were designed to achieve estimated ratios of PFOS to choline ranging from 0, 1, 2, and 4. For the supplemental choline diet study, the control diet (with or without 0.003% K+PFOS) was prepared with either 4.2 or 12.0 g choline bitartrate/kg diet.

**MS/MS of PFOS/choline ion pair.** PFOS (10 μM) was incubated at room temperature with 10 μM choline (Sigma) in 60% aqueous acetonitrile modified with 10 mM ammonium acetate. The solution was infused (5 μl/min) into a Waters Synapt G2S quadrupole time-of-flight mass spectrometer operating in electrospray ionization positive mode (ESI+). Product ion tandem mass spectra of the parent ion [M+H] = 707.1+ representing the putative PFOS bound by two choline molecules were obtained following fragmentation using a fixed collision energy (35 V).

**mMCD diet study.** This study was performed in duplicate and in each replicate, mice were randomly divided into 8 groups...
Choline supplementation study. Mice were randomly divided into four groups (5 mice/group) and fed the control diet for 2 weeks. After this acclimation period, mice were fed one of the following diets for 6 weeks: the control diet (with or without 0.003% K⁺PFOS), or the control supplemental choline diet (with or without 0.003% K⁺PFOS; Table 1). Body weights were recorded weekly. The mice were euthanized after 6 weeks of feeding the experimental diets, and blood (processed to serum) and liver were collected. Liver samples were weighed, and a small section was fixed in PBF for histological analyses. Liver and serum samples were snap frozen in liquid nitrogen and stored at −80°C pending PFOS analyses as previously described in Chang et al. (2012).

Histopathology. Liver sections were fixed in 10% PBF for 48 h, transferred to 70% ethanol, and embedded with paraffin followed by 5 μm sectioning using a microtome. The thin sections were stained with hematoxylin and eosin (H&E), and examined with a light microscope and observations were noted by a board certified pathologist.

Serum markers of liver function. The VetScan Mammalian Liver Profile reagent rotors were used with the VetScan Chemistry Analyzer (Abaxis, Inc., Union City, California) to quantify serum markers of liver function: ALT activity, bile acids, and total bilirubin.

Oil red O and osmium tetroxide staining. Fresh liver samples were embedded in optimal cutting temperature compound, frozen, and cryosectioned. Frozen sections were stained with Oil Red O (ORO) or osmium tetroxide for qualitative examination and morphologic evaluation. The stained histologic sections were examined by light microscopy and observations were noted by a board certified pathologist. Histologic sections were of adequate size and quality for detailed evaluation, and the number of tissues examined from each treatment group was sufficient to allow detection of test article-related histologic alterations.

Liver slides stained with ORO were scanned at 20× magnification using the Hamamatsu NanoZoomer whole slide scanner (Hamamatsu Corp., Middlesex, New Jersey) and virtual slides were imported into the Visiopharm software platform (Visiopharm, Broomfield, Colorado). An image analysis protocol was created to identify the ORO positive tissue and 40% of the tissue section was sampled by systematic uniform random sampling at 20× magnification. The percentage of ORO positive area within the liver section was calculated automatically by the software for each animal (represented in the data tables as the percent area of lipid). White areas and artifacts such as folds, tears, and large air bubbles were excluded from the analysis.

Liver slides stained with osmium tetroxide were scanned at 20× magnification as described earlier. An image analysis protocol was created to identify the osmium positive tissue and

### Table 1. Composition of Diets Uses for Studies

<table>
<thead>
<tr>
<th>Study</th>
<th>Base diet</th>
<th>% PFOS</th>
<th>Choline* (g/kg diet)</th>
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<tr>
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<th>% PFOS</th>
<th>Choline* (g/kg diet)</th>
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<tr>
<td>PFOS uptake study</td>
<td>Control</td>
<td>0.012</td>
<td>4.2</td>
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<tr>
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<td>mMCD</td>
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<td>0.012</td>
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*Choline bitartrate.

(5–6 mice/group), and fed the control diet for 2 weeks. After this acclimation period, groups of mice were fed one of the following experimental diets: control diet with or without 0.003, 0.006, or 0.012% K⁺PFOS, or the mMCD diet with or without 0.003, 0.006, or 0.012% K⁺PFOS (Table 1), for either 23 days (first replicate) or 21 days (second replicate). Because 2 mice in the first replicate fed the mMCD diet with 0.012% K⁺PFOS became moribund and were euthanized between 21 and 23 days of treatment, the first replicate was terminated after 23 days and the second replicate was limited to 21 days of feeding. Accordingly, the final group size was 5 mice/group in the first replicate except for the mMCD + 0.012% K⁺PFOS group, which was 4. For the second replicate, the experiment was repeated as described earlier with all groups having 5 mice/group, except for the group fed the mMCD diet with 0.012% K⁺PFOS, where 6 mice were used, one of which became moribund and was euthanized just prior to scheduled termination of treatment, leaving a final group size of 5.

In each experimental replicate, mice were euthanized after termination of the experimental dietary treatment. Blood was obtained from each mouse and serum fractions were isolated and frozen (−80°C) until further analyses. Livers were carefully dissected, weighed and either fixed in 10% phosphate buffered formalin (PBF) or snap frozen in liquid nitrogen and stored at −80°C until further analyses as described below. Average body weight and relative liver weight per group were calculated. From the first replicate, serum was analyzed for markers of liver toxicity (alanine aminotransferase (ALT), bile acids, and total bilirubin), and both serum and liver concentration of PFOS as previously described. (Chang et al., 2012) From the second replicate, serum and liver samples were used for metabolomic analysis (data not shown). Histopathological analyses were performed on liver samples from both experimental replicates.

PFOS uptake/excretion analyses. Mice were randomly divided into four groups (5 mice/group) and fed the control diet for 2 weeks. After this acclimation period, groups of mice were fed either the control diet (with or without 0.012% K⁺PFOS), or the mMCD diet (with or without 0.012% K⁺PFOS) (Table 1). After 1 week of dietary treatment, mice were placed in metabolic cages for urine and feces collection. After 24 h, urine and fecal samples were weighed/measured and body weights were recorded. Mice were then euthanized followed by blood (collected to serum) and liver collection (weight recorded). All the samples collected (urine, feces, serum, and liver) were snap frozen in liquid nitrogen and stored at −80°C before PFOS analyses as previously described (Chang et al., 2012).
100% of the tissue section was sampled by systematic uniform random sampling at 20x magnification. The percentage of osmium positive area within the liver section was calculated automatically by the software for each animal (represented in the data tables as the percent area of lipid). White areas and artifacts such as folds, tears, and large air bubbles were excluded from the analysis.

Lipidomics. Lipids were extracted from flash frozen liver samples using the Folch extraction method (Folch et al., 1957). Briefly, liver samples (~50 mg) were homogenized using a PreCelssy Tissue Homogenizer (Bertin Technologies, Rockville, Maryland) for 30 s at 6500 rpm in 1 ml 2:1 chloroform/methanol solution with zirconium beads. The samples were then allowed to incubate at room temperature for five minutes, vortexed briefly, and centrifuged at 4°C for 20 min at maximum speed and the lower organic phase transferred to a new microcentrifuge tube. Two hundred microliters of HPLC grade water was added to the separated organic phase, vortexed for 30 s, and centrifuged at 2000 rpm. for 5 min and the lower organic phase transferred to a new microcentrifuge tube. The samples were then dried under a gentle stream of nitrogen (Savant speedvac, ThermoScientific, Waltham, Massachusetts) and reconstituted in 0.1% formic acid, 10 mM ammonium formate, and 300 μl of a solution containing isopropanol:acetonitrile:water (45:35:20 v/v/v).

Samples (5 μl) were separated by reverse phase HPLC using a Prominence 20 UFLCXR system (Shimadzu, Columbia, Maryland) with a Waters (Milford, Massachusetts) CSH C18 column (100 × 2.1 mm 1.7 μm particle size) maintained at 55°C and a 20-min aqueous/acetonitrile/isopropanol gradient, at a flow rate of 225 μl/min. Solvent A was 40%water, 60% acetone with 10 mM ammonium formate and 0.1% formic acid, and solvent B was 90% isopropanol 10% acetone 10 mM ammonium formate, and 0.1% formic acid. The initial conditions were 60% solvent A and 40% solvent B, increasing to 43% solvent B at 2 min, 50% solvent B at 2.1 min, 54% solvent B at 12 min, 70% solvents B at 12.1 min, and 99% solvent B at 18 min, held at 99% solvent B until 20 min before returning to the initial conditions. The eluate was delivered into a 5600 TripleTOF using a Duospray ion source (SCIEX, Framingham, Massachusetts). The capillary voltage was set at 5.5 kV in positive ion mode and 4.0 kV in negative ion mode with a declustering potential of 80 V used in both modes. The mass spectrometer was operated in Information Dependent Acquisition mode with a 100 ms survey scan from 100 to 1200 m/z, and up to 20 MS/MS product ion scans (100 ms) per duty cycle using collision energy of 50 V with a 20 V spread.

Mass spectrometry data preprocessing, lipid annotation. After data acquisition, the spectral files were imported in MarkerView software (SCIEX, Framingham, Massachusetts) for data preprocessing. The positive and negative mode spectra were separately aligned using the following parameters: minimum spectral peak width, 3 ppm; minimum retention time peak width, 4 scans; RT tolerance, 0.80 min and mass tolerance, 25–30 ppm. The aligned spectra were normalized to total intensity. Lipid annotation was performed based on precursor ion search using METLIN. An additional MS/MS search was performed by matching experimental with predicted spectral fragmentation using LipidBlast (Kind et al., 2013). LipidMaps was also used for verification when applicable (Fahy et al., 2007). All mass spectral identifications were manually verified based on class characteristic fragmentation patterns involving their head groups and fatty acyl side chains. A chemical similarity score matrix was generated using PubChem. Cytoscape edge attributes were then built using MetaMapp. Finally the lipid network was plotted in Cytoscape (Shannon et al., 2003).

Malondialdehyde assay. The malondialdehyde (MDA) assay kit was purchased from Cayman Chemicals (Ann Arbor, Michigan) and hepatic MDA was quantified according to manufacturer’s recommended procedures.

Glutathione and oxidized glutathione measurements. Hepatic Glutathione (GSH) and oxidized glutathione (GSSG) were quantified as described previously in Lu et al. (2010).

Statistical analysis. Statistical analyses were performed using one-way ANOVA followed by Bonferroni’s post-hoc analyses (Prism 5.0d, GraphPad Software Inc., La Jolla, California). Average values were considered statistically significant when P ≤ .05 using post-hoc analyses.

RESULTS

Marginal Methionine/Choline Deficiency Exacerbates PFOS-Induced Hepatic Effects

For this study, for the control diets supplemented with K⁰ PFOS targeted at 0.003, 0.006, and 0.012%, respectively, the measured PFOS concentrations were (average ± SD): 0.0026% ± 0.0004, 0.0052% ± 0.0006, and 0.0127% ± 0.0006. For the marginal methionine/choline deficiency (mMCD) diets supplemented with K⁰ PFOS targeted at 0.003, 0.006, and 0.012%, respectively, the measured PFOS concentrations were 0.0022% ± 0.0001, 0.0044% ± 0.0004, and 0.0117% ± 0.0007.

When compared with mice fed the control diet, K⁰ PFOS caused a dose-dependent decrease in body weights, and the reduction was statistically significant in mice fed with 0.012% K⁰ PFOS at the end of week 2 and onward (Figure 2A). Mice fed the mMCD diet alone also exhibited weight loss as compared with control mice at the end of week 2 and onward (Figure 2A). Weight loss was more severe in mice fed the mMCD diet with 0.012% K⁰ PFOS as compared with all other groups at the end of week 2 and onward (Figure 2A).

Relative liver weight was increased by dietary K⁰ PFOS and this effect was similar between mice fed the control or the mMCD diet (Figure 2B). Dietary PFOS administration caused an increase in serum ALT, bile acids and bilirubin fed the control diet (Figure 2C). Serum ALT, bile acids and bilirubin were generally higher in the mice fed the mMCD diet as compared with those fed the control diet (Figure 2C). However, these increases were markedly higher in the mice fed the mMCD diet with 0.012% K⁰ PFOS as compared with mice fed the control diet with 0.012% K⁰ PFOS (Figure 2C).

Histological evaluation of fixed liver tissue revealed ground-glass cytoplasmic alterations that were present in hepatocytes of mice from all groups that received PFOS, independent of concentration or diet (control or mMCD; Figure 2D). The severity of the ground-glass cytoplasmic alteration was generally dose-associated in PFOS-treated groups. Macrovesicular hepatocellular vacuolation was present in mice fed the control diet with 0.006 or 0.012% K⁰ PFOS, but not in mice fed the control diet or control diet with 0.003% K⁰ PFOS (Figure 2D). In contrast, mice fed the mMCD diet with or without PFOS had a high incidence of macrovesicular vacuolation. It is of interest to note that the degree of macrovesicular vacuolation in mice fed the mMCD diet with 0.012% K⁰ PFOS was less pronounced than that in mice fed the mMCD diet with 0.0, 0.003, or 0.006% K⁰ PFOS.
The macrovesicular vacuolation was so pronounced in many liver slides that it interfered with evaluation of other cytoplasmic features of hepatocytes. Minimal to mild mixed inflammatory cell infiltration was present in the liver of a few mice fed the mMCD diet with and without K\(^+\)PFOS, with the notable exception of mice fed the mMCD diet with 0.012% K\(^+\)PFOS (data not shown). This histologic alteration was considered to be associated with the mMCD diet rather than PFOS exposure. Occasional coagulative hepatocellular necrosis was noted in mice fed either the control or MCD diet with K\(^+\)PFOS (data not shown). The hepatocellular necrosis was observed at a low incidence, and typically consisted of 1 or a few necrotic foci within the liver. Histiocytic infiltration was sometimes associated with the necrotic foci. The hepatocellular necrosis had no discernible association with the concentration of PFOS.

Dietary K\(^+\)PFOS administration was associated with an increase in the ORO staining in the liver (Figure 3A). The degree of ORO staining in the liver samples from mice fed the mMCD diet (with or without K\(^+\)PFOS) was more pronounced than observed in mice that were fed dietary K\(^+\)PFOS (Figure 3A). Interestingly, in mice fed the mMCD diet, the highest level of ORO staining was present in the low dose K\(^+\)PFOS group (0.003%) whereas the lowest level of ORO staining was present in the high dose K\(^+\)PFOS group (0.012%). The level of ORO staining in the 0.006% K\(^+\)PFOS group was intermediate, and generally equivalent to control levels (Figure 3A). In general, the observations noted for ORO staining were consistent with those found with osmium staining (data not shown).

Consistent with the ORO and osmium histological analyses, the concentration of hepatic triglycerides was increased by...
dietary K\(^+\) PFOS compared with mice fed the control diet (Figure 3B). The concentration of hepatic triglycerides was higher in mice fed the control mMCD diet as compared with control mice (Figure 3B). Although not statistically significant, there was a dose-dependent downward trend in hepatic triglycerides in mice fed the mMCD diet supplemented with K\(^+\) PFOS, which was consistent with the incidence of microvesicular/macrovesicular lipid accumulation seen with H&E staining (Figure 2D) and ORO staining (Figure 3A).

The hepatic concentration of PFOS increased dose-dependently in mice fed the control and the mMCD diet at the end of the experimental feeding period (Figure 3C). However, the concentration of PFOS in the liver of mice fed the mMCD diet was lower as compared with mice fed the control diet.
supplemented with similar concentrations of K⁺ PFOS (Figure 3C). There was also a dose-dependent increase in the average concentration of serum PFOS in mice fed the control or mMCD diet (Figure 3D). Although there was a dose-dependent increase in the average concentration of serum PFOS in mice fed the control diet supplemented with K⁺ PFOS, the average serum concentration was lower as compared with similarly PFOS-treated mice fed the mMCD diet (Figure 3D). These differences in liver and serum PFOS concentration were not due to differences in uptake/excretion of dietary PFOS as no differences in fecal or urinary PFOS content were observed regardless of the diet type (Figure 4). Regression analyses also verified these differences in hepatic and serum PFOS concentrations between the mice fed the control and mMCD diets with K⁺ PFOS (Figs. 5A and B). These differences in liver and serum PFOS concentration between mice fed the control or mMCD diet supplemented with K⁺ PFOS were noted after one and three weeks of treatment with 0.012% dietary K⁺ PFOS in the liver, but only after three weeks in serum (Figs. 5C and D).

**Supplemental Dietary Choline Prevents Hepatic Effects Induced by Low Dose Exposure to PFOS**

Because the previous studies suggested that limiting dietary choline enhanced the hepatic effects of PFOS, and in vitro evidence demonstrated the formation of a PFOS-choline ion-pair complex, whether supplemental dietary choline could prevent effects induced by PFOS was examined. A dietary concentration of 0.003% K⁺ PFOS was chosen because preliminary studies indicated that supplemental dietary choline had little impact on body weight when the concentration of K⁺ PFOS in the diet exceeded 0.006% (data not shown). The dietary regimen was extended to 6 weeks given the milder effect of relatively low dose exposure to PFOS.

Average body weight was decreased by 0.003% dietary K⁺ PFOS after 5 weeks of feeding as compared with controls (Figure 6A). Supplemental dietary choline did not prevent this PFOS-induced change in average body weight (Figure 6A). Similarly, average relative liver weight was increased by 0.003% dietary PFOS after 6 weeks of feeding as compared with controls but supplemental dietary choline did not prevent this PFOS-induced hepatic effect (Figure 6B). It is of interest to note that after six weeks of feeding 0.003% dietary PFOS, the average serum concentration of ALT was increased as compared with controls, but this effect was largely prevented by supplemental dietary choline (Figure 6C). In contrast, after 6 weeks of feeding 0.003% dietary PFOS, the average serum concentration of alkaline phosphatase was increased as compared with controls, but this effect was not prevented by supplemental dietary choline (data not shown).
Supplemental Dietary Choline Prevents PFOS-Induced Alterations in Lipid Metabolism and Oxidative Stress

To begin to determine the mechanisms by which exposure to 0.003% K⁺ PFOS in the diet influences the liver, lipidomic analyses were performed. The most striking differences observed between mice fed the control diet supplemented with 0.003% K⁺ PFOS compared with those fed the control diet was the increase in hepatic concentrations of triglycerides, sphingomyelins and phosphatidyl cholines (Figure 7A). These data are highly consistent with the biochemical measurements and histological examinations (Figs. 2A and B). Interestingly, supplemental dietary choline reversed or prevented these hepatic changes in large part as compared with mice fed the control diet with 0.003% PFOS (Figure 7B).

One mechanism by which PFOS can potentially elicit hepatotoxicity is through increased oxidative stress. This is thought to be mediated in part by PFOS and its ability to deplete the reduced form of GSH (Liu et al., 2007). Indeed, the ratio of GSH:GSSG was markedly reduced in the liver of mice fed either the control diet supplemented with 0.003% K⁺ PFOS or the mMCD diet as compared with control (Figure 8A). Interestingly, supplemental dietary choline reversed this effect in mice fed 0.003% K⁺ PFOS as compared with control (Figure 8A). To determine whether this change in the ratio of GSH:GSSG was associated with oxidative stress, the concentration of hepatic MDA was measured. Mice fed the control diet supplemented with 0.003% K⁺ PFOS exhibited higher hepatic MDA as compared with control, and supplemental dietary choline prevented this increase in hepatic MDA (Figure 8B). Similarly, mice fed the mMCD diet exhibited an average higher hepatic concentration of MDA, and this effect was exacerbated in mice fed the mMCD diet supplemented with 0.003% K⁺ PFOS (Figure 8B).

DISCUSSION

In laboratory studies, liver has been shown to be the target organ with exposure to PFOS and a hallmark histological observation is hepatic lipid accumulation and oxidative stress observed in non-clinical animal models (Seacat et al., 2002). Results from the present study are the first to provide evidence of a potential novel mechanism by which PFOS causes hepatic steatosis in male C57BL/6 mice (Figure 9A) and that dietary supplementation of choline may prevent and/or attenuate hepatic steatosis induced by PFOS in mice (Figure 9C).

Because PFOS is a surfactant that preferentially resides in the air/membrane surface, one plausible hypothesis that could explain these hepatic effects elicited by PFOS is its potential to interfere with the membrane function, in part, by interacting with choline, because it is one of the important precursors in the synthesis of phospholipid membrane bilayers. This hypothesis is supported by the present studies because the data demonstrated that PFOS can form a stable ion pair with choline in vitro (Figure 1), the observed distribution of tissue PFOS in a model with reduced dietary choline is consistent with the hypothesis that hepatic choline sequesters PFOS, and supplemental dietary choline prevents PFOS-induced oxidative stress. Alternatively, it has also been shown that PFOS may interfere with membrane function by directly influencing membrane fluidity (Xie et al., 2010).

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Previous studies in both rodents and humans demonstrate that dietary choline deficiency can cause hepatic steatosis (Anstee and Goldin, 2006; Buchman et al., 1995). Results from this study confirmed this effect but also showed that hepatic steatosis is found in mice fed a control diet supplemented with K⁺ PFOS. Although the hepatic effects induced by dietary PFOS are exacerbated when mice are co-administered an mMCD diet (Figure 9B), supplemental dietary choline attenuated the oxidative stress induced by feeding a control diet with 0.003% K⁺ PFOS.

Dietary PFOS exposure caused a dose-dependent increase in PFOS concentrations in both liver and serum compared with...
FIG. 7. Supplemental dietary choline prevents the effects of low dose PFOS exposure on hepatic lipids. A, Comparison of hepatic lipid classes in response to PFOS. Note large number of increased changes in various lipids. B, Comparison of PFOS-induced changes in hepatic lipids after supplemental dietary choline. Note large decrease in many lipids in particular triglycerides.
mice fed the control diet. In contrast, it is of interest to note that serum PFOS concentrations were higher in mice fed the mMCD-based PFOS diets and liver PFOS concentrations were lower in mice that were fed PFOS incorporated in the mMCD diets. These observations support the hypothesis that PFOS causes hepatic steatosis and oxidative stress by forming an ion pair and reducing the available liver choline required for VLDL export. Efforts to measure the presence of this ion pair in vivo are challenging and further complicated by the fact these ion pairs form directly in the source of the mass spectrometer regardless if they exist as ion pairs or not in situ. Nevertheless, these observations are consistent with the notion that PFOS forms an ion pair with choline in the liver and reduces export of export lipids. It is possible when hepatic choline is reduced due to feeding an mMCD diet, this results in less PFOS-choline ion pair formation, causing PFOS to partition to the serum. However, further studies are needed to conclusively demonstrate the existence of an ion pair between PFOS and choline in vivo.

Interestingly, ORO staining was actually lower in the mice fed the mMCD diet with 0.012% K⁺ PFOS as compared with mice fed the control diet or the mMCD diet with lower concentrations of PFOS (0.003 or 0.006%). Although no experiments were performed to determine the mechanism(s) that underlie this effect, this observation could be due to the fact that lipid peroxides are not effectively stained by ORO as noted by others (Dixon et al., 1975). Given that increased dietary PFOS can increase lipid peroxidation and oxidative stress in part due to depletion of GSH, this suggests that the relatively lower level of ORO staining observed in mice fed the mMCD diet with 0.012% K⁺ PFOS may reflect enhanced lipid peroxidation.

FIG. 8. Supplemental dietary choline prevents PFOS-induced hepatic oxidative stress. A, Effect of mMCD diet, PFOS and supplemental dietary choline on hepatic GSSG-GSH ratio. B, Effect of supplemental dietary choline on hepatic MDA in response to PFOS. Values represent the mean ± SEM. *Significantly different than control at P ≤ 0.05. #Significantly different than mMCD control at P ≤ 0.05. Values with different letters are statistically significant at P ≤ 0.05.

FIG. 9. Hypothetical PFOS-choline ion pair contributes to hepatic steatosis and oxidative stress. A, Under normal conditions, PFOS forms an ion pair with 2 molecules of choline, which leads to depletion of available free choline required for VLDL export. PFOS also decreases hepatic GSH. Coupled with the accumulation of hepatic lipids, the decreased GSH collectively causes an increase in oxidative stress as detected by increased lipid peroxidation and oxidative stress. B, When fed a diet with marginal dietary choline, the hypothetical PFOS-choline ion pair cannot be formed as effectively, and the reduced dietary choline causes enhanced lipid accumulation. The free PFOS causes decreased GSH, which leads to enhanced lipid peroxidation and oxidative stress. C, Supplemental dietary choline causes an increase in the hypothetical PFOS-choline ion pair. This allows for “normal” VLDL export and the lack of lipid accumulation. The amount of free PFOS available to decrease GSH is also reduced due to increased PFOS-choline ion pair formation, thus GSH levels are not decreased significantly and this prevents increased lipid peroxidation and oxidative stress.
as compared with the other mice fed lower concentrations of PFOS in the mMCD diet.

PFOS can activate the nuclear receptor PPARα (Bjork et al., 2011; Elcombe et al., 2012; Wolf et al., 2008). Although there is some evidence that ligand activation of PPARα may be useful for preventing steatosis (Fuchs et al., 2016), there are many genes that are regulated by activation of hepatic PPARα that could also contribute to steatosis (Mattijssen et al., 2014). Further studies are necessary to determine whether this mechanism contributes to PFOS-induced steatosis, including whether the concentration of PFOS required to activate PPARα in vivo is achievable for this purpose.

Results from this study show that supplemental dietary choline can ameliorate PFOS-induced effects such as impaired oxidative stress in male C57BL/6 mice. These data strongly support the hypothesis that PFOS can form an ion pair with choline in the liver and that this molecular mechanism may be suitable to target to prevent steatosis and oxidative stress in mouse liver by supplemental dietary choline (Figure 9C).

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