

# Exploring Inflammatory Predictors of Depressive Response to Exercise

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# Costs of Depression

- 11% of years lived with disability globally
- Associated with cancer, cardiovascular disease, and hypertension
- 210 billion in associated costs in U.S.

**Despite prevalence and impact, poorly understood**

# Cytokines and Depression

- Depressed patients have increased TNFa and IL-6
- Exogenous cytokine application increases depressive symptoms
- Antidepressant drugs decrease IL-1B and IL-6
- Anti-inflammatory drugs reduce depressive symptoms

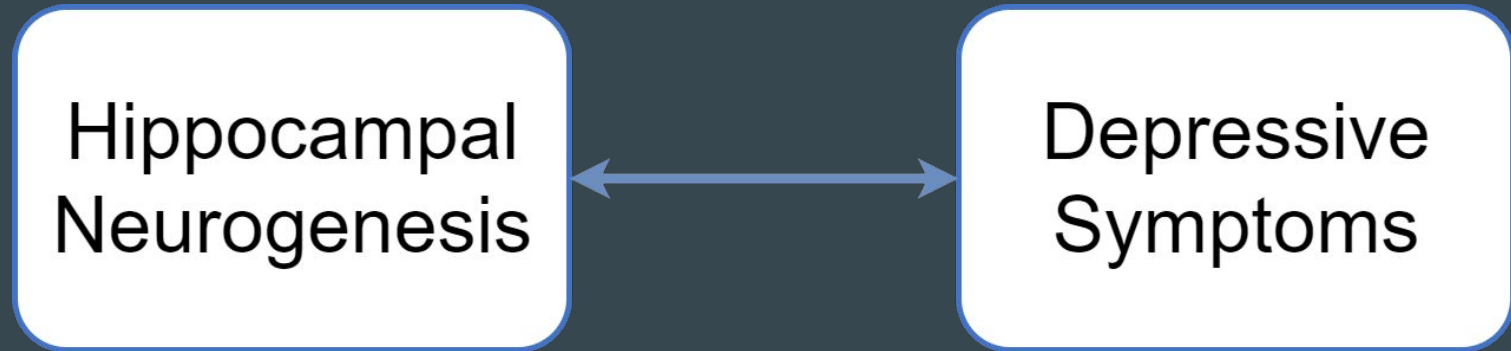
TNFa, IL-1B,  
IL-6



Depressive  
Symptoms

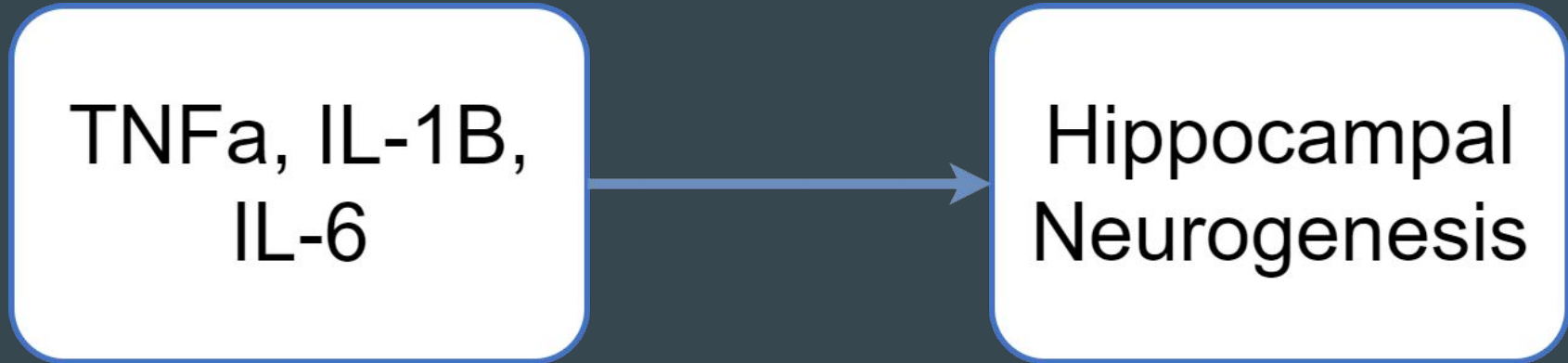
# Hippocampal Neurogenesis and Depression

- Hippocampal atrophy in depressed patients
- Antidepressant drugs increase neurogenesis
  - Is neurogenesis necessary for antidepressant effects?
- Increasing neurogenesis protects against stress-induced depressive symptoms

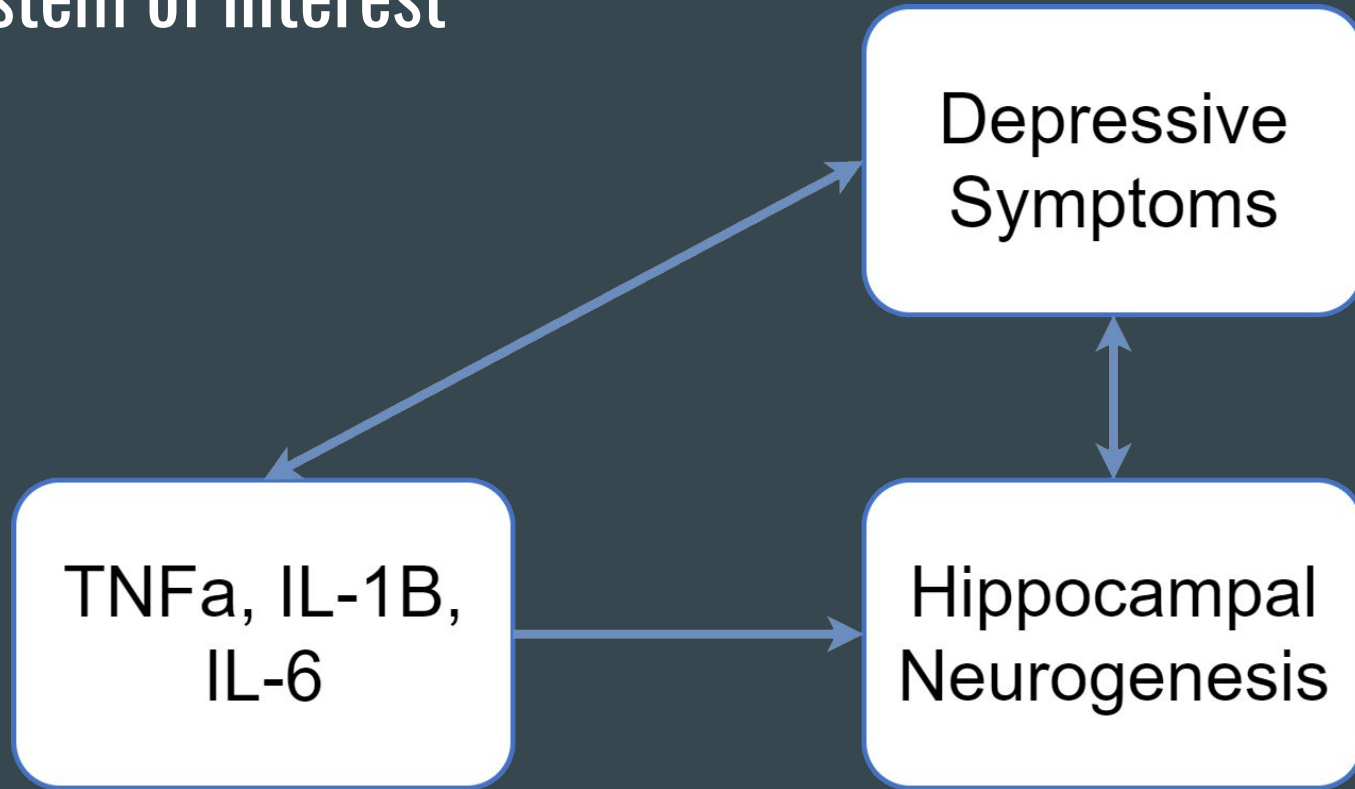


# Cytokines and Neurogenesis

- IL-1B, TNFa, IL-6 decrease neurogenesis
- Blocking cytokine actions reduces depressive and anti-neurogenic effects of chronic stress



# Our system of interest

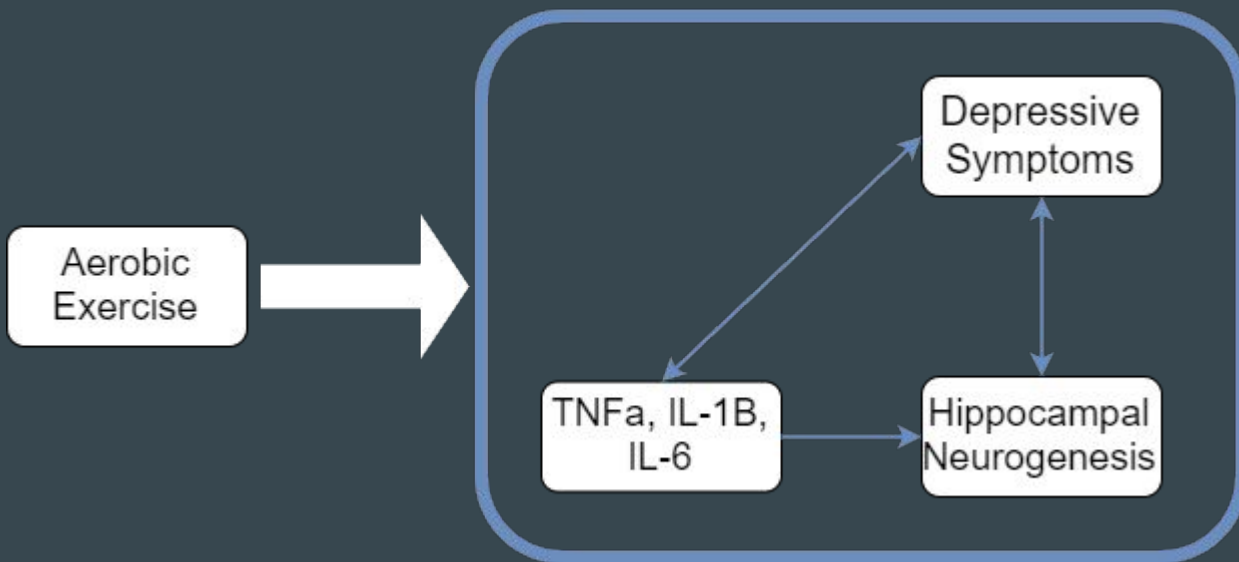


# How can we better understand it?

- Hard to directly manipulate these variables
- What about manipulating the system through another variable?
  - **Aerobic exercise!**

## Aerobic exercise...

- Reduces inflammation
- Increases neurogenesis
- Decreases depressive symptoms
- Easy to manipulate



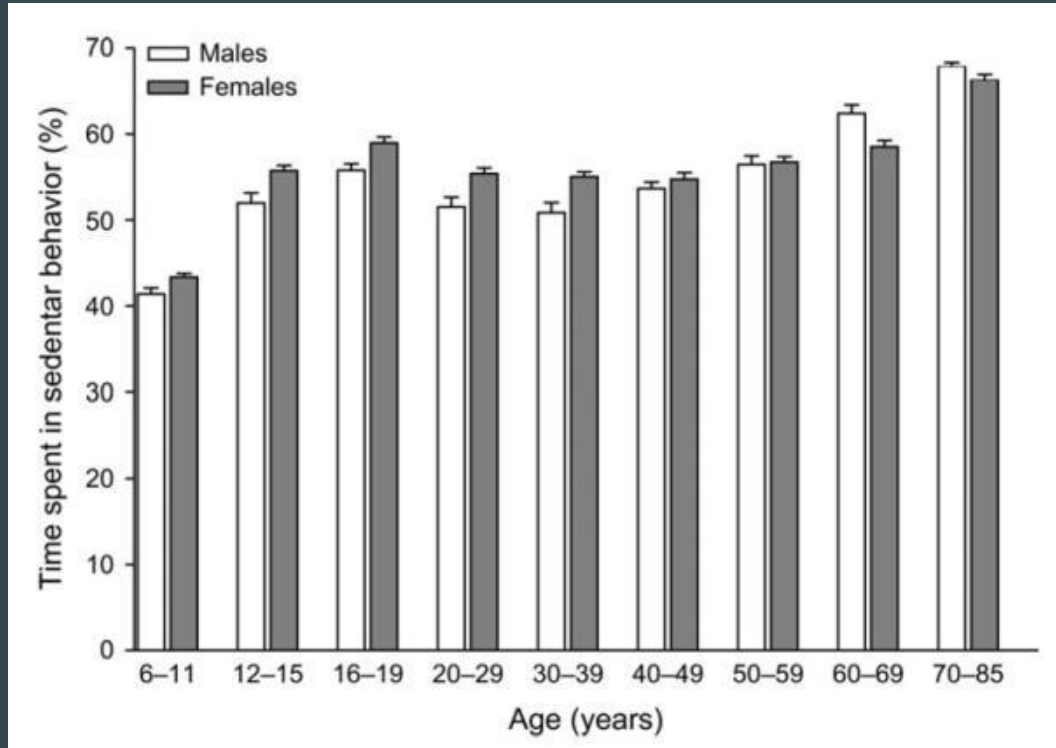


# Older adults as an ideal population

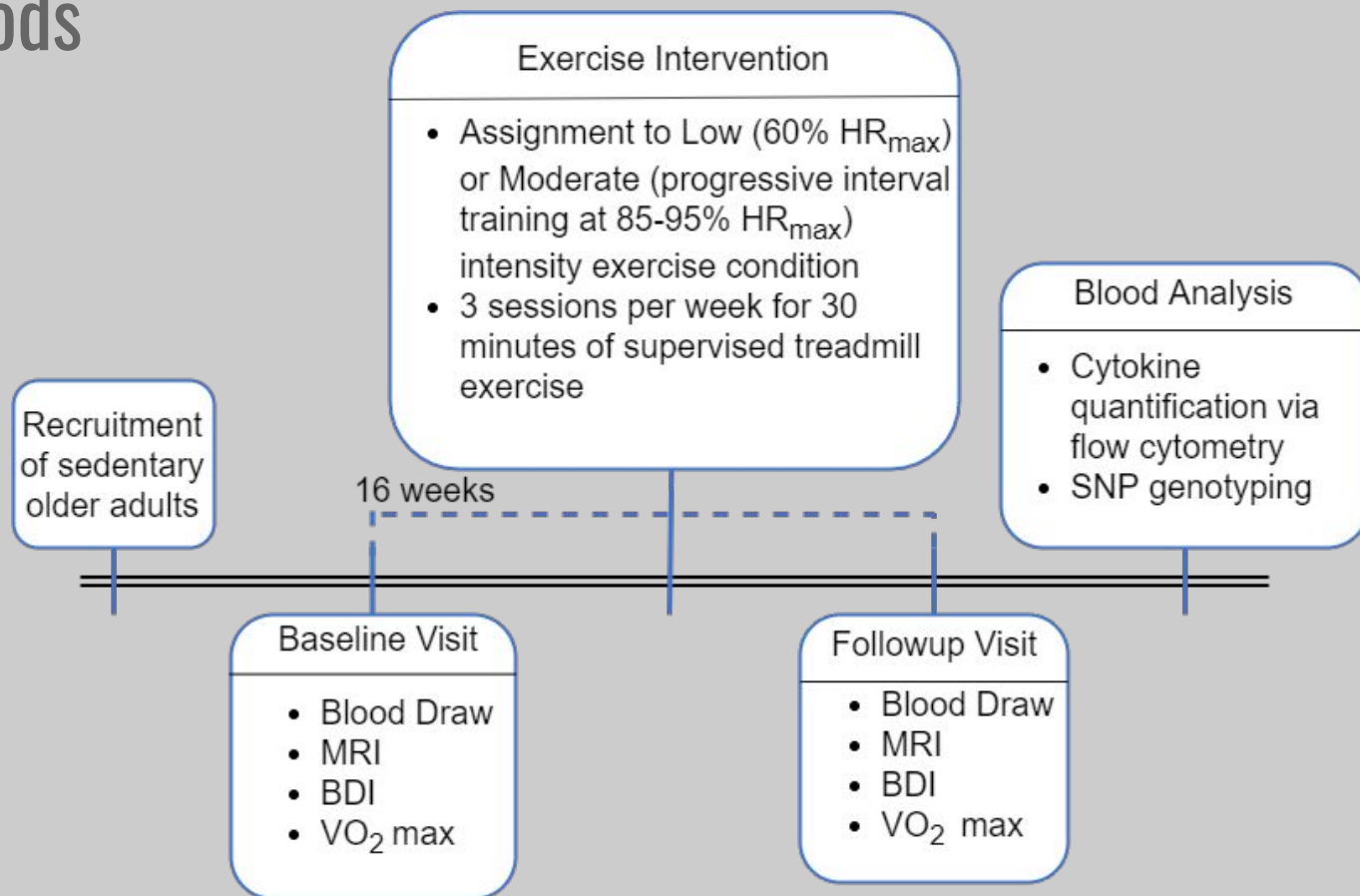
- Inflamed
- Sedentary
- Prevalent depression

Image Credit:

Matthews et al., 2008



# Methods



# Hypotheses

## Replication:

- Anti-inflammatory effects of exercise
  - Increase in hippocampal volume
  - Decrease in depressive symptoms
  - At baseline, lower inflammation -> larger hippocampus, less depression
    - Larger hippocampus -> less depression
- Higher intensity exercise  
↓  
greater change

# Hypotheses (cont.)

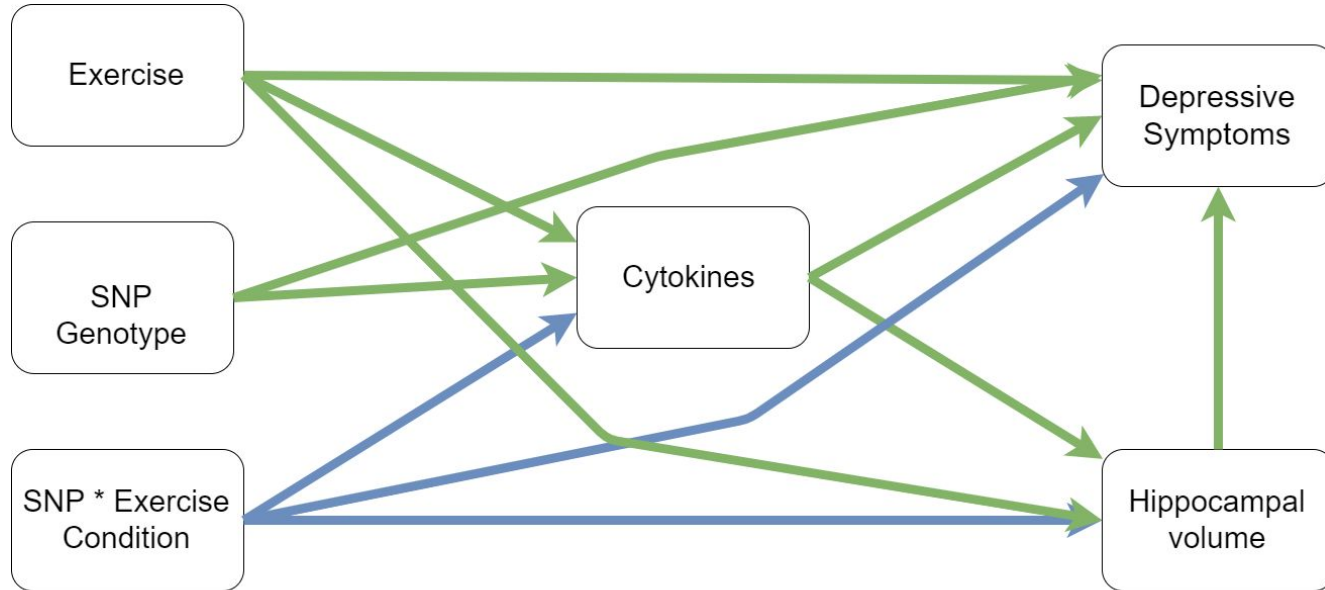
Novel:

- Larger increase in hippocampus -> larger decrease in depression
- Changes in inflammation, exercise condition, changes in hippocampal volume predict changes in depression

# Exploratory hypotheses

- Attempt to understand genetic component to depression, individual variation in depressive responses.
- Examination of 3 SNPs (rs16944, rs1800797, rs1800629) involved in cytokine regulation, depression, or both

Generally, people with SNP genotypes that increase cytokine expression will have higher depression and smaller hippocampi at baseline. Exercise by SNP genotype interactions will influence hippocampal and depressive responses to the exercise intervention.



Established Links



Hypothesized Links

# Subjects

	LICT	MICT+IT
N	55	60
Age (M±St. Dev.)	68.89 ± 1.61	68.28 ± 1.39
%Female	56.36	61.67
%White	92.7	93.3
BDI (M±St. Dev.)	8.61 ± 5.96	7.58 ± 6.92
Hippocampal Volume / ICV	0.0049 ± 0.00074	0.0051 ± 0.00092
	<u>rs16944</u>	
% A/A	5.5	16.7
%A/G	36.36	38.33
%G/G	41.82	35
%Undetermined	16.36	15
	<u>rs1800629</u>	
% A/A	3.6	1.67
%A/G	20	23.33
%G/G	67.27	70
%Undetermined	9	5
	<u>rs1800797</u>	
% A/A	18.18	20.5
%A/G	38.18	23.08
%G/G	24.54	43.57
%Undetermined	9.1	12.8

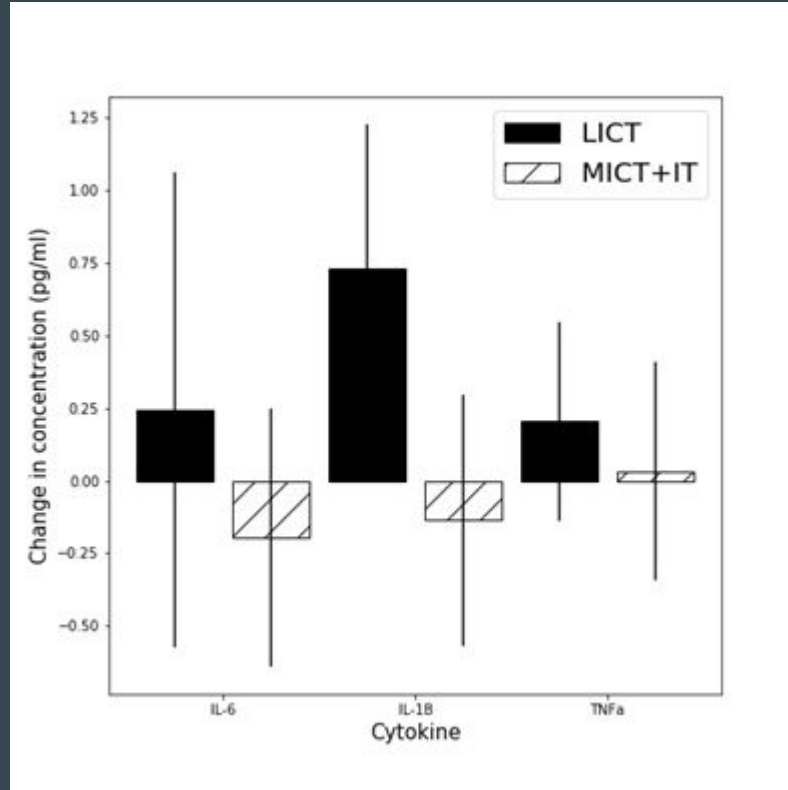
# Results and Discussion



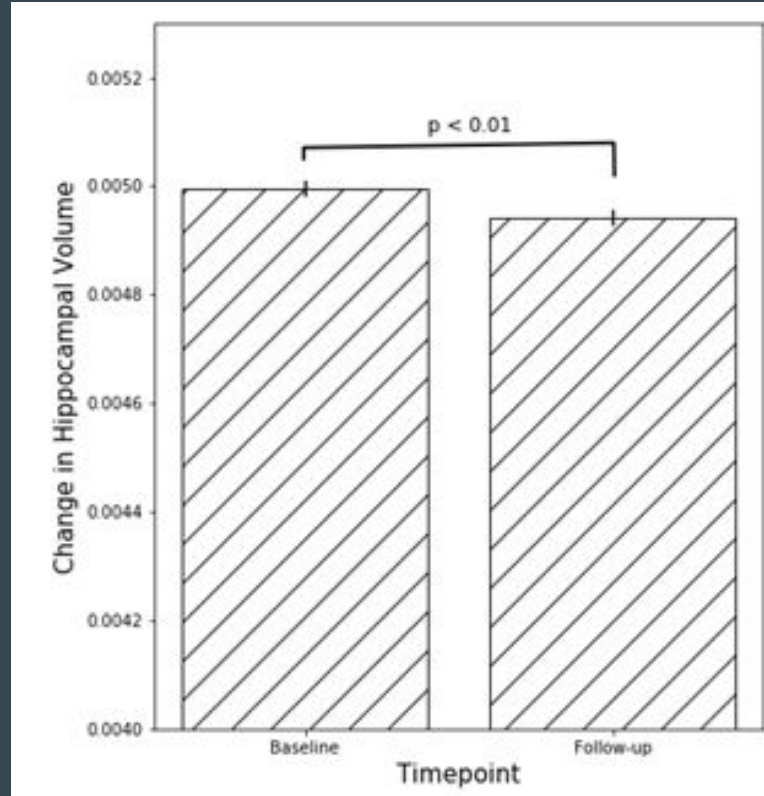
# Baseline relationships

	IL-1 $\beta$	IL-6	TNF $\alpha$	Hippocampal Volume
IL-6	0.53***			
TNF $\alpha$	0.72***	0.75***		
Hippocampal Volume	-0.11	-0.03	-0.02	
BDI	-0.04	0.21*	0.06	-0.01
<i>Note.</i> * indicates $p < 0.05$ , *** indicates $p < 0.001$				

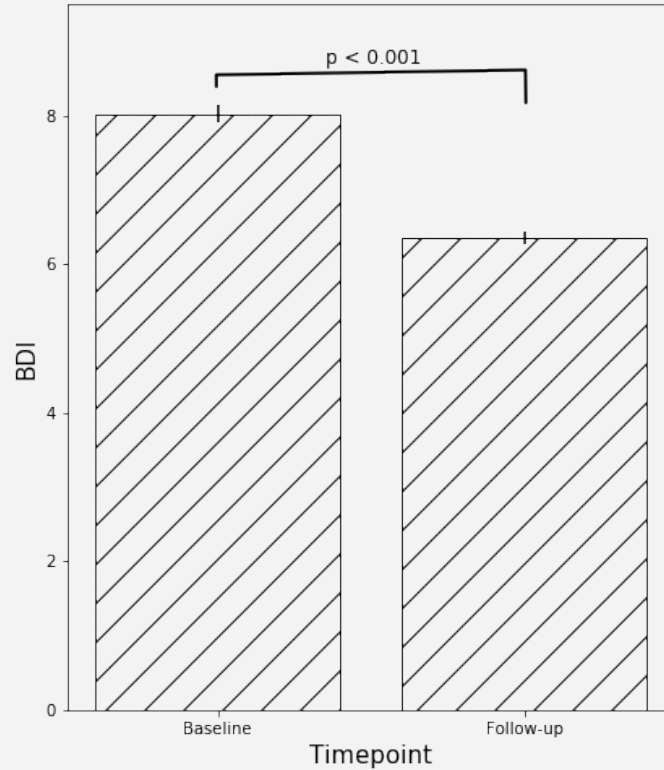
# No exercise regulation of cytokines



# Decreases in hippocampal volume after intervention



# Decrease in BDI after intervention



# Do these variables change together?

	IL-1 $\beta$	IL-6	TNF $\alpha$	Hippocampal Volume
IL-6	0.17 <sup>^</sup>			
TNF $\alpha$	0.65***	0.34***		
Hippocampal Volume	0.05	0.06	-0.06	
BDI	0.1	-0.08	0.12	-0.13
<i>Note.</i> <sup>^</sup> indicates $p < 0.1$ , *** indicates $p < 0.001$				

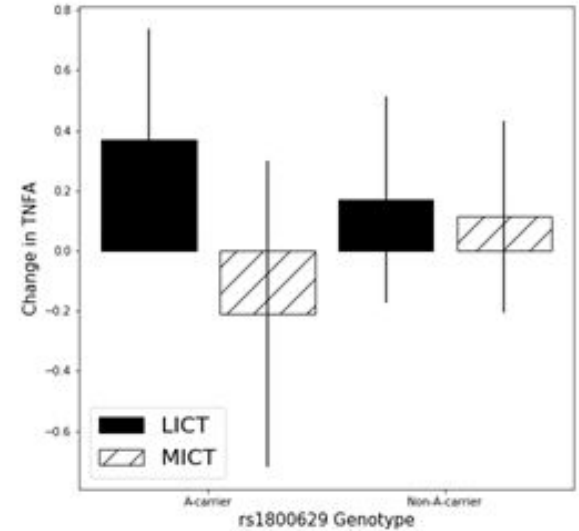
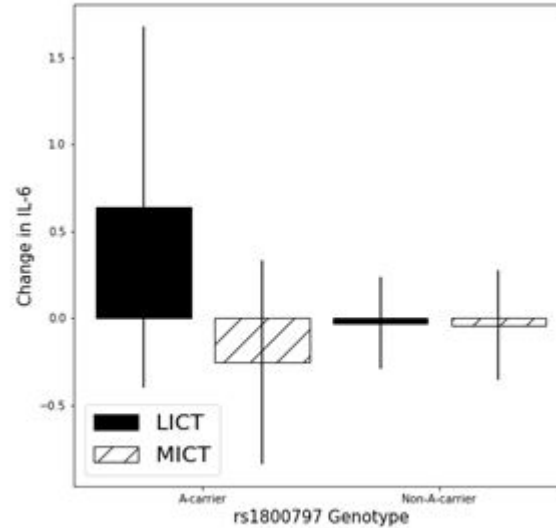
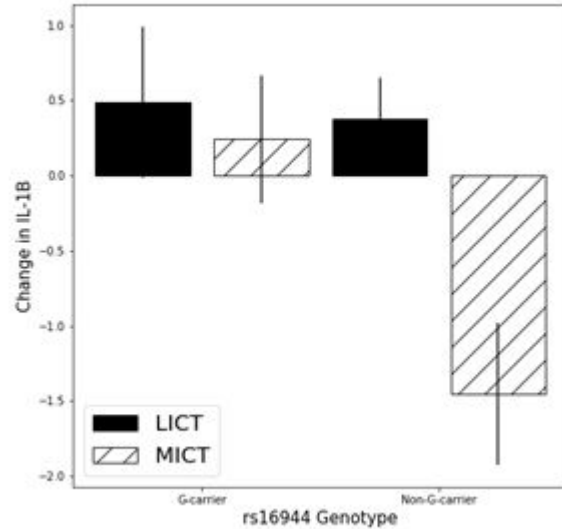
# Exploratory Analyses

## Baseline differences by genotype

	rs16944		rs1800629		rs1800797	
	G-carrier	Non-G-carrier	A-carrier	Non-A-carrier	A-carrier	Non-A-carrier
IL-1 $\beta$	4.02 $\pm$ 3.72	5.51 $\pm$ 3.49				
TNF $\alpha$			3.66 $\pm$ 3.16	3.29 $\pm$ 2.27		
IL-6					4.1 $\pm$ 2.08	3.5 $\pm$ 2.63
BDI	8.52 $\pm$ 6.8	7.6 $\pm$ 4.4	9.93 $\pm$ 7.67^	7.41 $\pm$ 5.85^	8.57 $\pm$ 6.6	7.56 $\pm$ 6.13
Hippocampal Volume/ICV	0.0050 $\pm$ 0.00085	0.0048 $\pm$ 0.00093	0.0052 $\pm$ 0.00095	0.0049 $\pm$ 0.0078	0.0050 $\pm$ 0.00077	0.0050 $\pm$ 0.00095

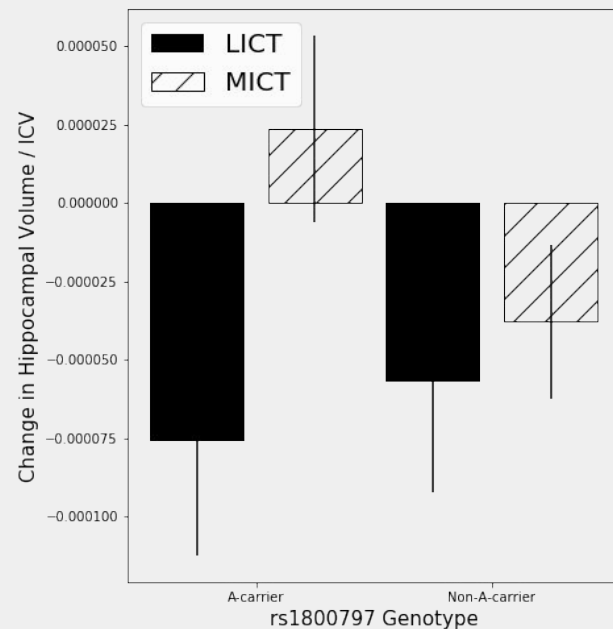
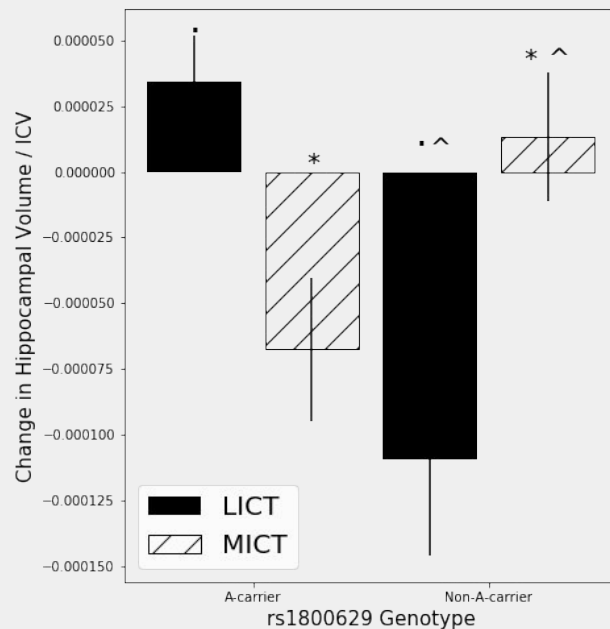
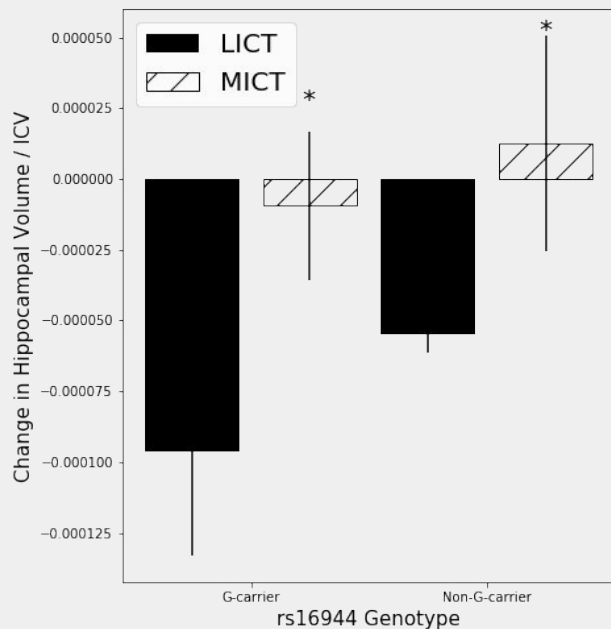
*Note.* ^ indicates  $p < 0.1$

# No SNP regulation of cytokines

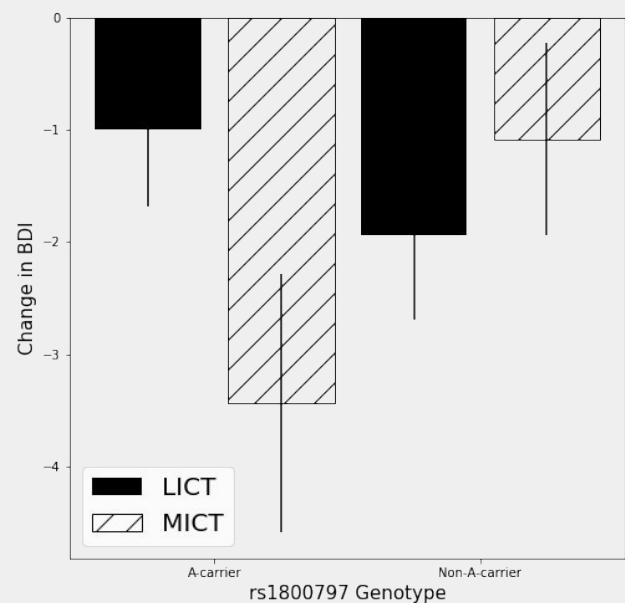
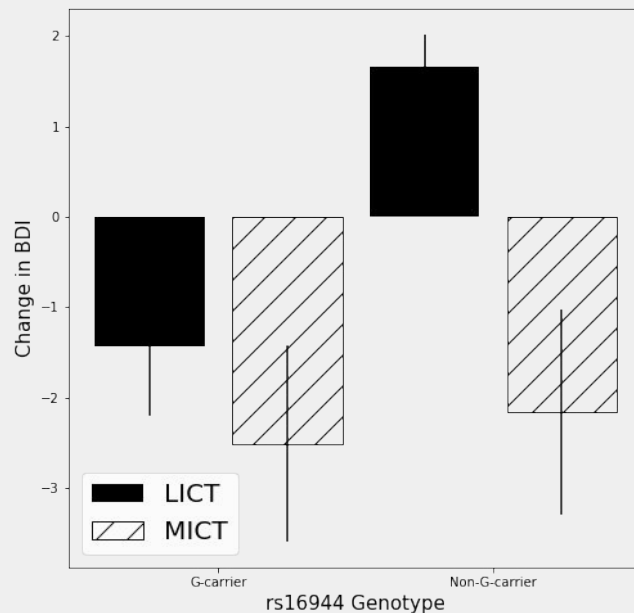
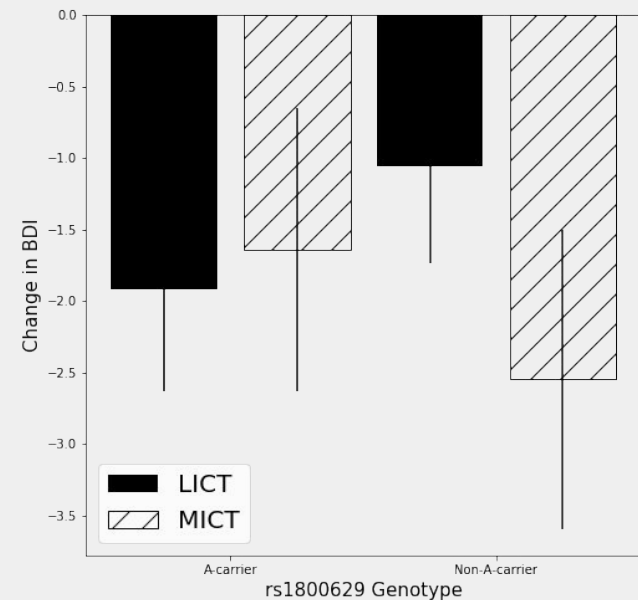




# SNP x Exercise Interactions on hippocampal volume



# No SNP x exercise condition effects on BDI



# Conclusions

- No evidence of pro-inflammatory cytokines influencing depressive symptoms through mediation of hippocampal neurogenesis
- Replication of IL-6 as a biomarker for depression and exercise alleviation of depressive symptoms
- Possible protective main effect of MICT+IT exercise on hippocampal atrophy
- Rs1800629 A-carrier status as protective against hippocampal atrophy in LICT exercise

# Limitations and Further directions

- Non-clinical sample
  - Age-matched sedentary control
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- More sensitive measurements (central cytokines, CBV vs. structural MRI)
  - Larger sample sizes

# Acknowledgements

Many thanks to Dr. Bryan for allowing me to use FORCE data, Tim Helmuth, and the FORCE team!

Questions?