

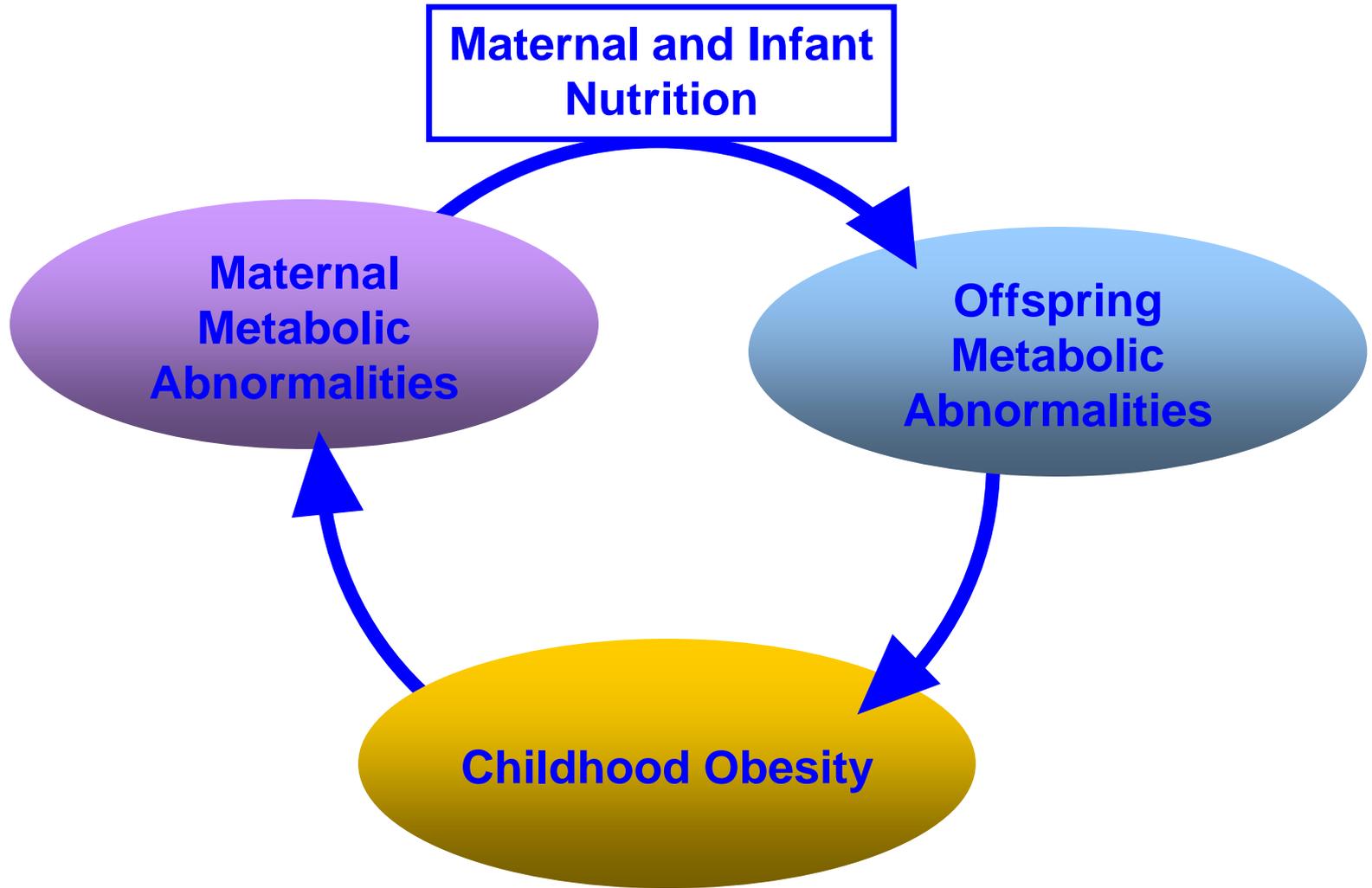
# **Gestational dietary intakes, metabolic abnormalities and human milk hormones**

**Sylvia Ley, RD, MSc, PhD(C)**

**CFDR Breakfast and Research Showcase**

**May 2012**





# Pregnancy



- Changes in carbohydrate and lipid metabolism
- 4-18% pregnant women develop gestational diabetes

Butte *Am J Clin Nutr* 2000; 71:1256S  
CDA *Can J Diabetes* 2008; 32:S1

# Consequences of Gestational Diabetes

	Mom	Offspring
pregnancy outcome	<ul style="list-style-type: none"><li>•c-section</li></ul>	<ul style="list-style-type: none"><li>•macrosomic infant</li></ul>
early postpartum / early life	<ul style="list-style-type: none"><li>•lactation performance</li></ul>	<ul style="list-style-type: none"><li>•compromised nutrition</li></ul>
long-term	<ul style="list-style-type: none"><li>•type 2 diabetes</li><li>•vascular disease</li></ul>	<ul style="list-style-type: none"><li>•obesity</li><li>•type 2 diabetes</li></ul>

Reece et al *Lancet* 2009;373:1789  
Hilson et al *J Hum Lact* 2004;20:18

# Dietary Intake and Glucose Metabolism

- Large prospective cohort studies
  - ↑total fat intake and ↑glucose intolerance
  - ↑*trans* fat, ↓polyunsaturated fat and ↑type 2 diabetes
- Clinical studies
  - ↑dietary fiber and ↑insulin sensitivity, ↓type 2 diabetes

Hu *et al.* *Diabetologia* 2001; 44:805  
Weickert *et al.* *J Nutr* 2008; 138:439

# Diet during 2<sup>nd</sup> Trimester of Pregnancy and Risk of Gestational Diabetes



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	RR (95% CI)	p
Substituting 1% fat for CHO	1.1 (1.02-1.10)	0.002

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Adjusted for BMI, maternal age, and ethnicity

# Diet during 1<sup>st</sup> Trimester of Pregnancy and Risk of Gestational Diabetes



A Study of Health for the Next Generation

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OR (95% CI)

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Substituting 1% fat for CHO

1.00 (0.96-1.05)

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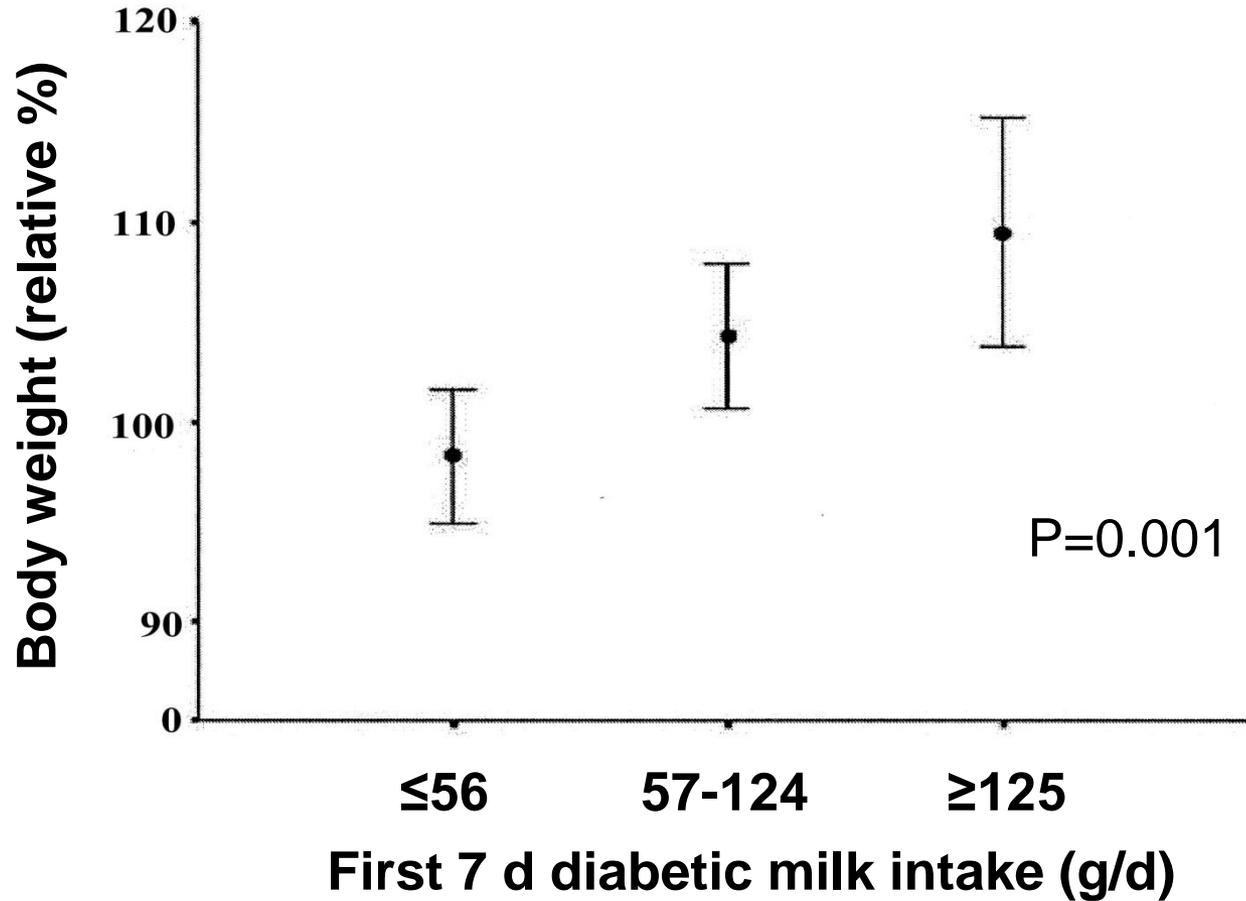
Adjusted for maternal age, pre-pregnancy BMI, ethnicity, previous GDM, history of diabetes in participant's mother, smoking during pregnancy

# Consequences of Gestational Diabetes

	Mom	Offspring
pregnancy outcome	•c-section	•macrosomic infant
early postpartum / early life	•lactation performance	•compromised nutrition
long-term	•type 2 diabetes •vascular disease	•obesity •type 2 diabetes

Reece *et al.* *Lancet* 2009; 373:1789  
Hilson *et al.* *J Hum Lact* 2004; 20:18

# Milk from women with diabetes and offspring body weight at 2 years



# Detection of Metabolic Hormones in Human Milk

- Insulin

- Kulski *et al. Endocrinol Exp* 1983; 17:317
- Read *et al. Pediatr Res* 1984; 18:133
- Hamosh *et al. Pediatr Clin North Am* 2001; 48:69

- Adiponectin

- Martin *et al. Am J Clin Nutr* 2006; 83:1106
- Bronsky *et al. Clin Chem* 2006; 52:1763
- Weyermann *et al. Clin Chem* 2006; 52:2095

# Knowledge Gaps

1. Only a few reports have investigated the impact of diet during pregnancy on risk of gestational diabetes, and none have studied this question using comprehensive glucose homeostasis profile
2. A number of studies have detected insulin and adiponectin in human milk, but none have investigated the impact of maternal metabolic status assessed during pregnancy on these hormones in milk

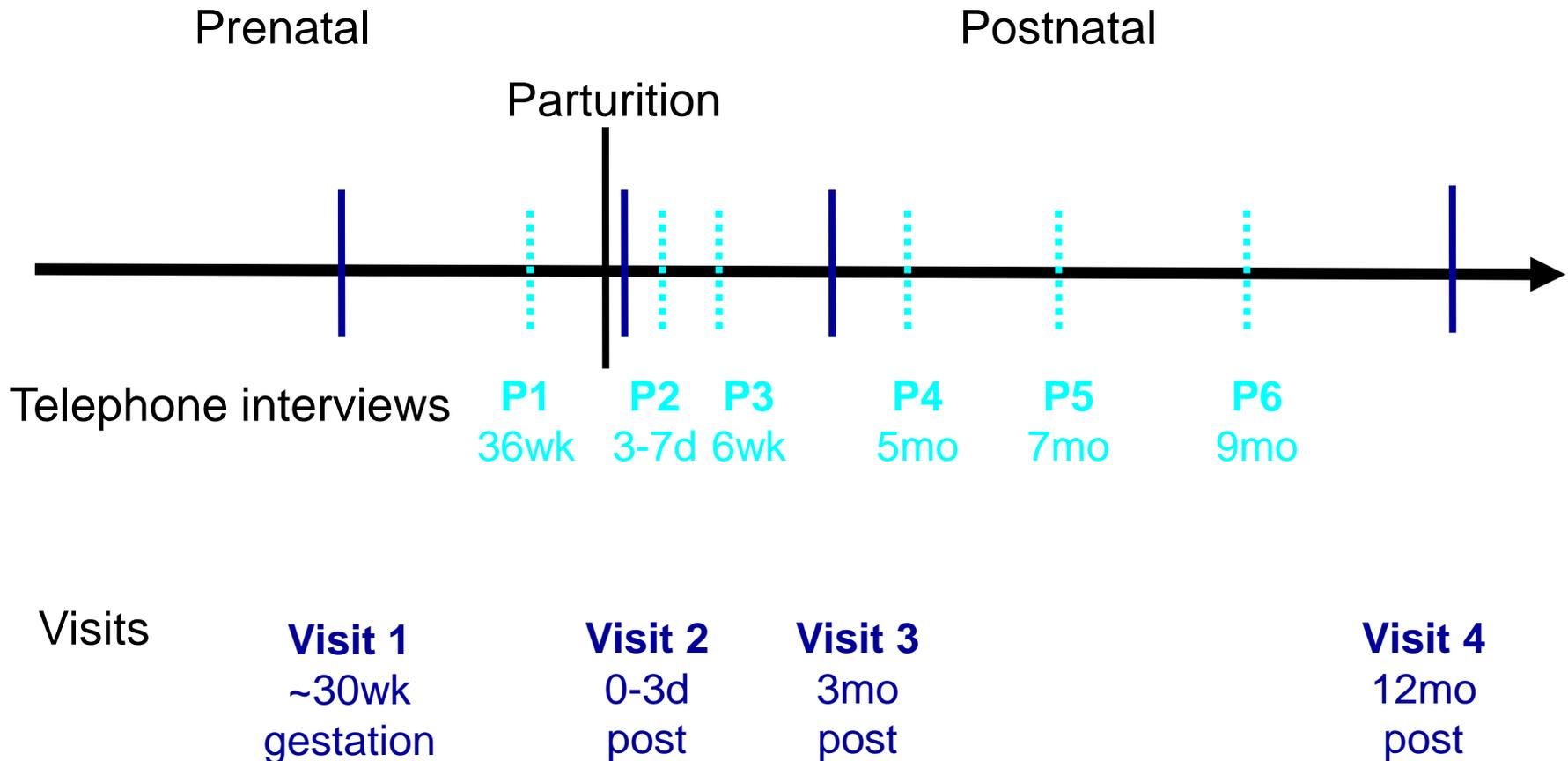


**SickKids**  
**MOUNT SINAI HOSPITAL**  
Joseph and Wolf Lebovic Health Complex

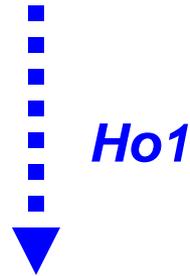


# Maternal and Infant Nutrition Study

# Scheduled Visits and Interim Interviews



**2<sup>nd</sup> trimester  
macronutrient intake**

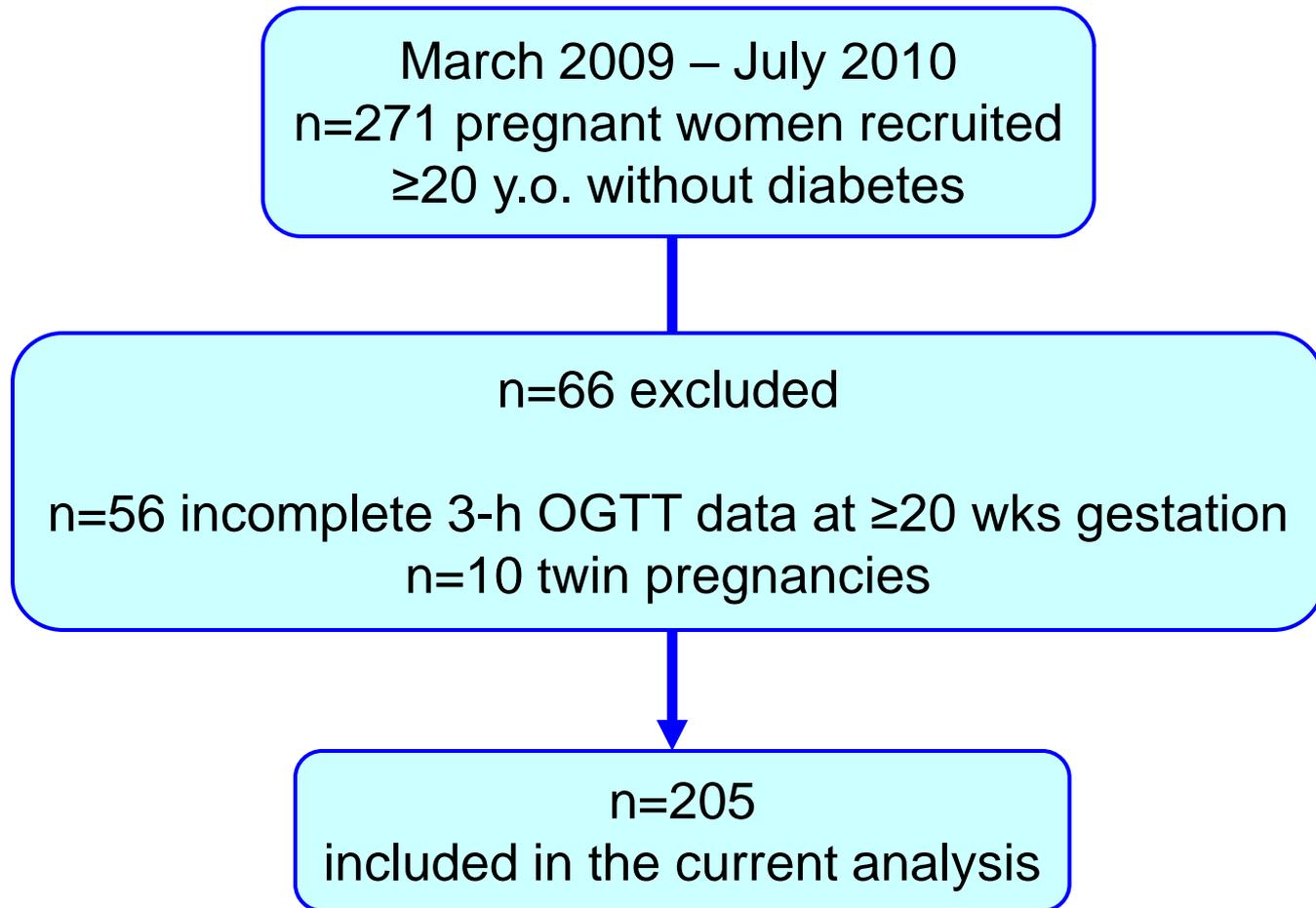


**Pregnancy  
metabolic status**



**Human milk**  
 $\Delta$  milk metabolic hormones

# Methods: Study Participants



# Results: Characteristics of participants by GDM status at 30±2.6 wks gestation

	<b>No GDM (n=158)</b>	<b>GDM (n=47)</b>
Age (years)	34.3 ± 4.2	35.5 ± 4.5
Ethnicity*		
White	<b>100 (62.9)</b>	<b>22 (47.8)</b>
Non-White	<b>58 (36.7)</b>	<b>25 (53.2)</b>
Family history of type 2 diabetes*	<b>79 (50.0)</b>	<b>33 (70.2)</b>
Pregravid BMI (kg/m <sup>2</sup> )	24.7 ± 4.8	26.5 ± 6.6
Nulliparous	90 (57.3)	21 (44.7)

\*P<0.05; mean ± SD or n (%)

## Results: Dietary composition and insulin resistance among those with a family history of diabetes<sup>1</sup>

	<b>beta ± SE</b>	<b>p</b>
Energy	-0.0001 ± 0.0002	0.63
% carbohydrate	-0.038 ± 0.023	0.10
% total fat	0.023 ± 0.026	0.37
% saturated fat	0.104 ± 0.057	0.07
% <i>trans</i> fat	0.295 ± 0.361	0.42
P : S fat ratio	-0.938 ± 0.551	0.09
Total fibre <sup>2</sup>	-0.031 ± 0.024	0.20
Veggie&fruit fiber <sup>2</sup>	<b>-0.100 ± 0.029</b>	<b>0.0008</b>

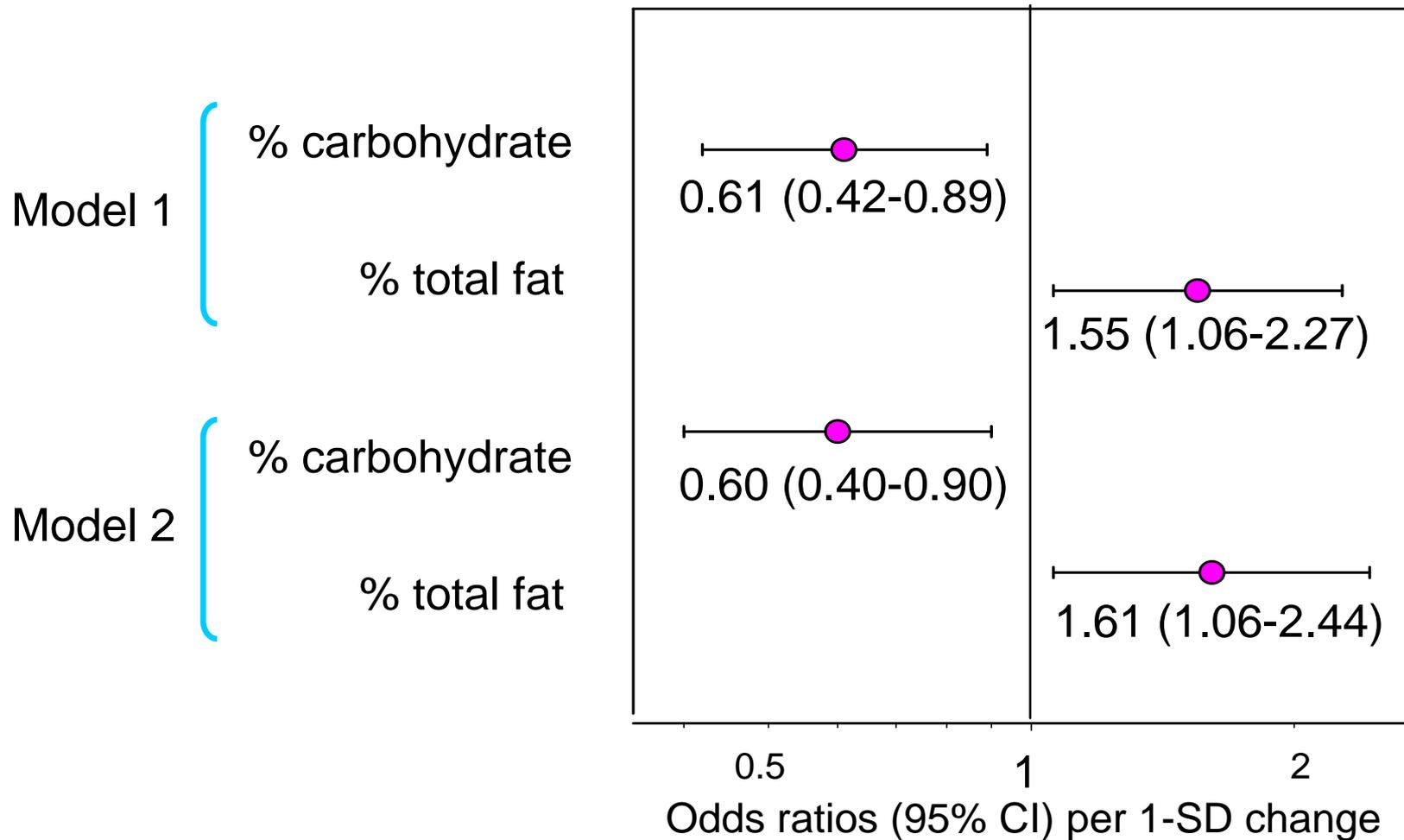
<sup>1</sup>Adjusted for age, ethnicity, pregravid BMI, parity, previous GDM, pregnancy weight gain up to the OGTT, and gestational weeks at the time of OGTT; <sup>2</sup>Additionally for energy intake

## Results: Dietary composition and insulin sensitivity among those with a family history of diabetes<sup>1</sup>

	<b>beta ± SE</b>	<b>p</b>
Energy	0.00003 ± 0.00008	0.73
%carbohydrate	0.010 ± 0.009	0.28
% total fat	-0.0004 ± 0.010	0.97
% saturated fat	-0.020 ± 0.023	0.39
% <i>trans</i> fat	0.022 ± 0.143	0.88
P : S fat ratio	0.206 ± 0.220	0.35
Total fibre <sup>2</sup>	0.003 ± 0.009	0.78
Veggie&fruit fiber <sup>2</sup>	<b>0.029 ± 0.012</b>	<b>0.01</b>

<sup>1</sup>Adjusted for age, ethnicity, pregravid BMI, parity, previous GDM, pregnancy weight gain up to the OGTT, and gestational weeks at the time of OGTT; <sup>2</sup>Additionally for energy intake

# Results: Macronutrient Intake and Risk for GDM



1. adjusted for age, ethnicity, family history of diabetes, pregravid BMI; 2. additionally for parity, previous GDM, pregnancy weight gain up to the OGTT, and gestational weeks at the OGTT

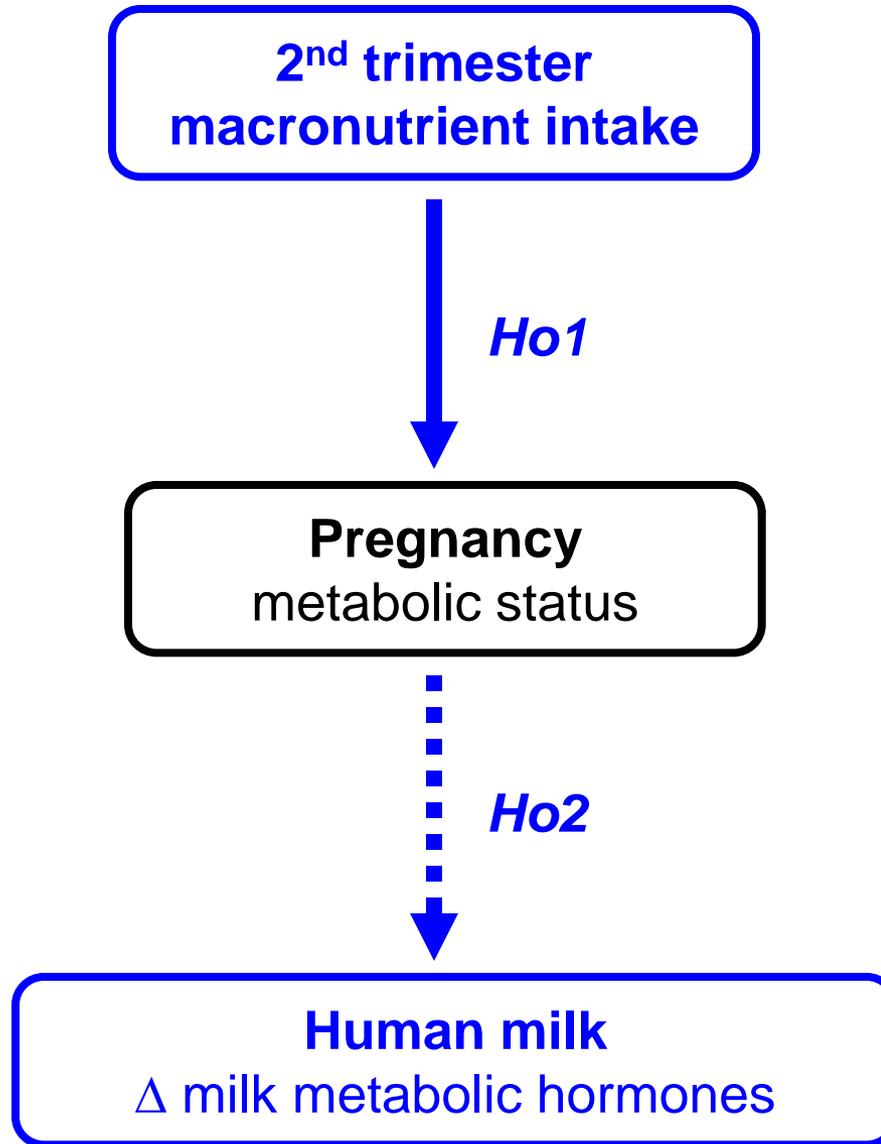
**2<sup>nd</sup> trimester  
macronutrient intake**

*Ho1*

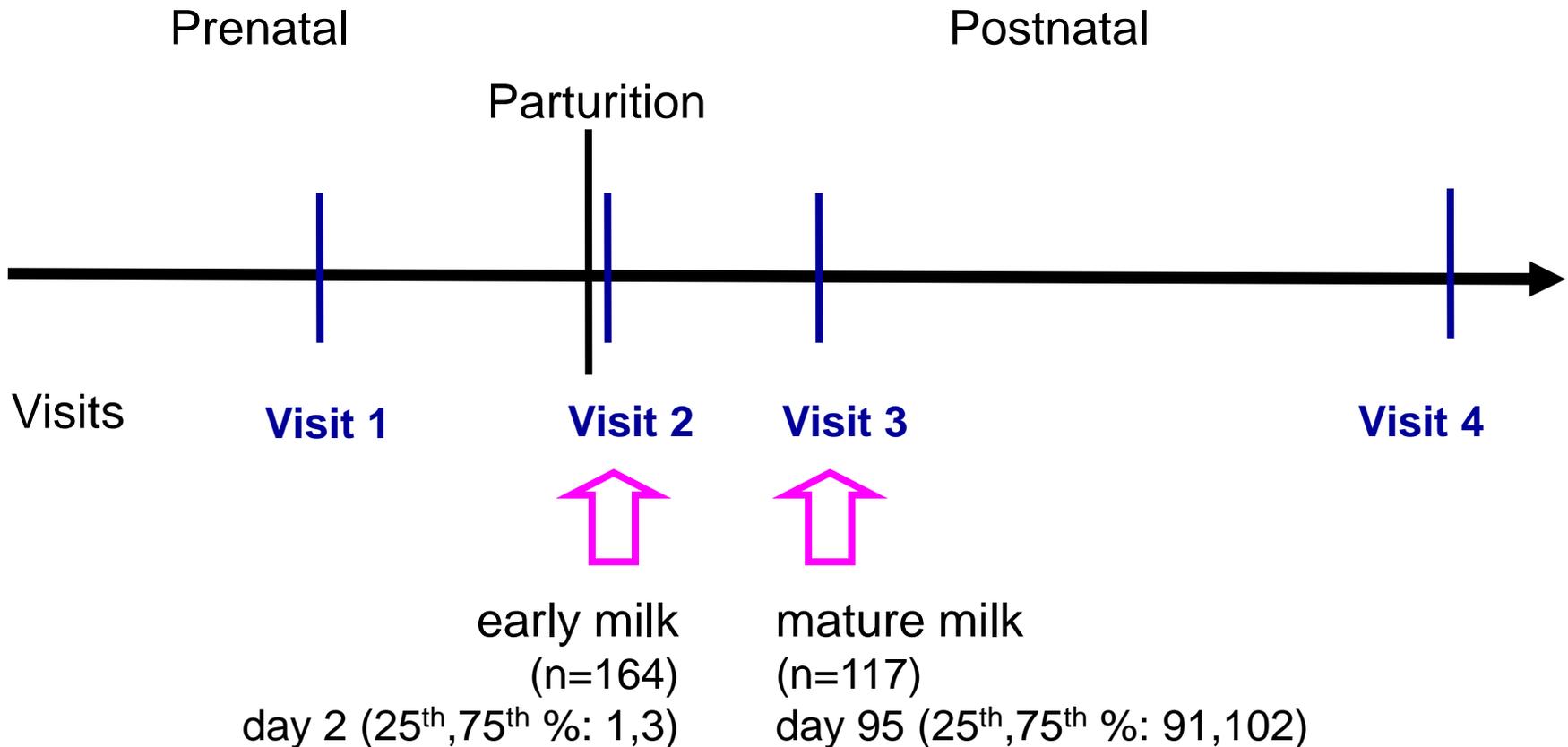
**Pregnancy  
metabolic status**

*Ho2*

**Human milk**  
 $\Delta$  milk metabolic hormones

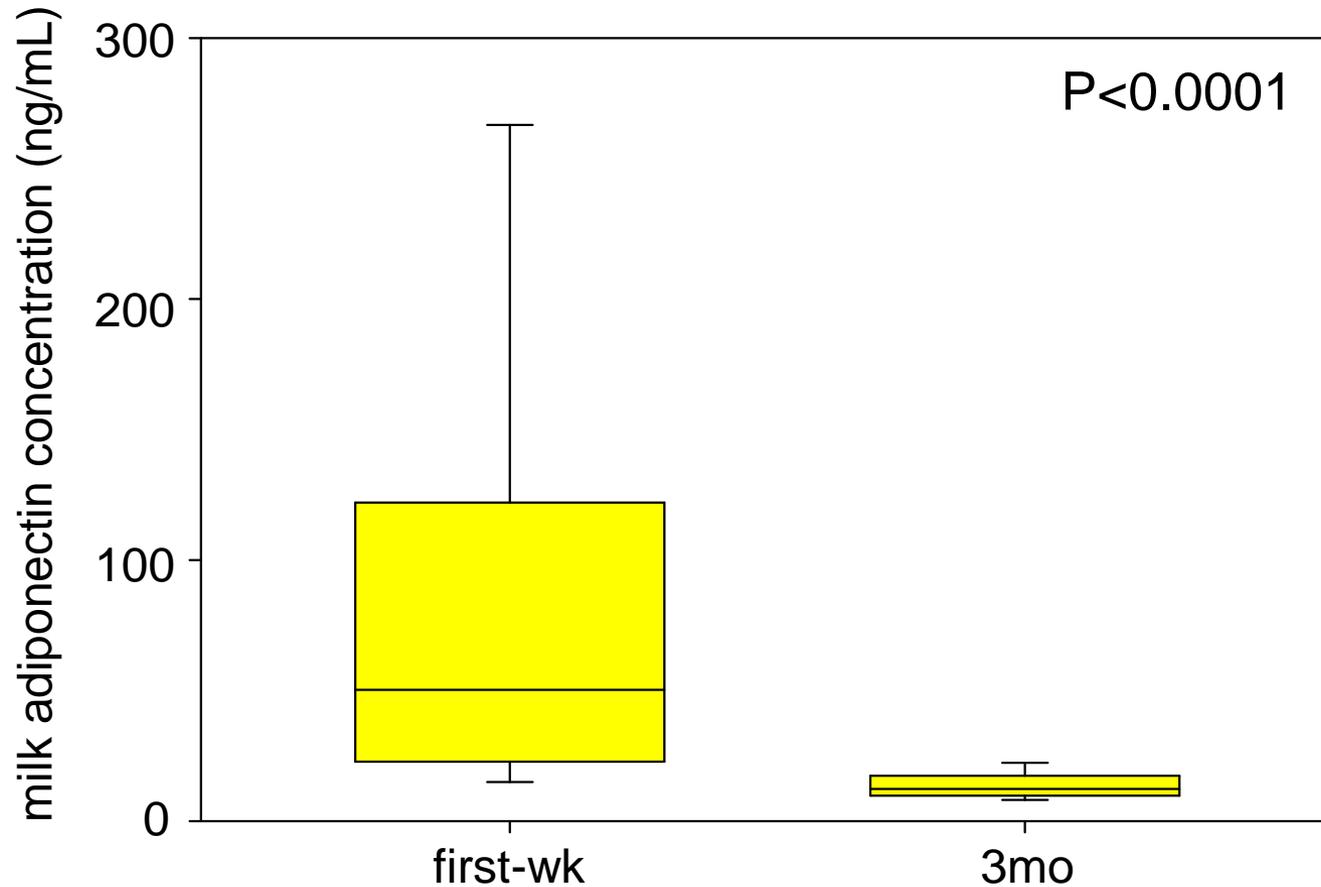


# Scheduled Visits



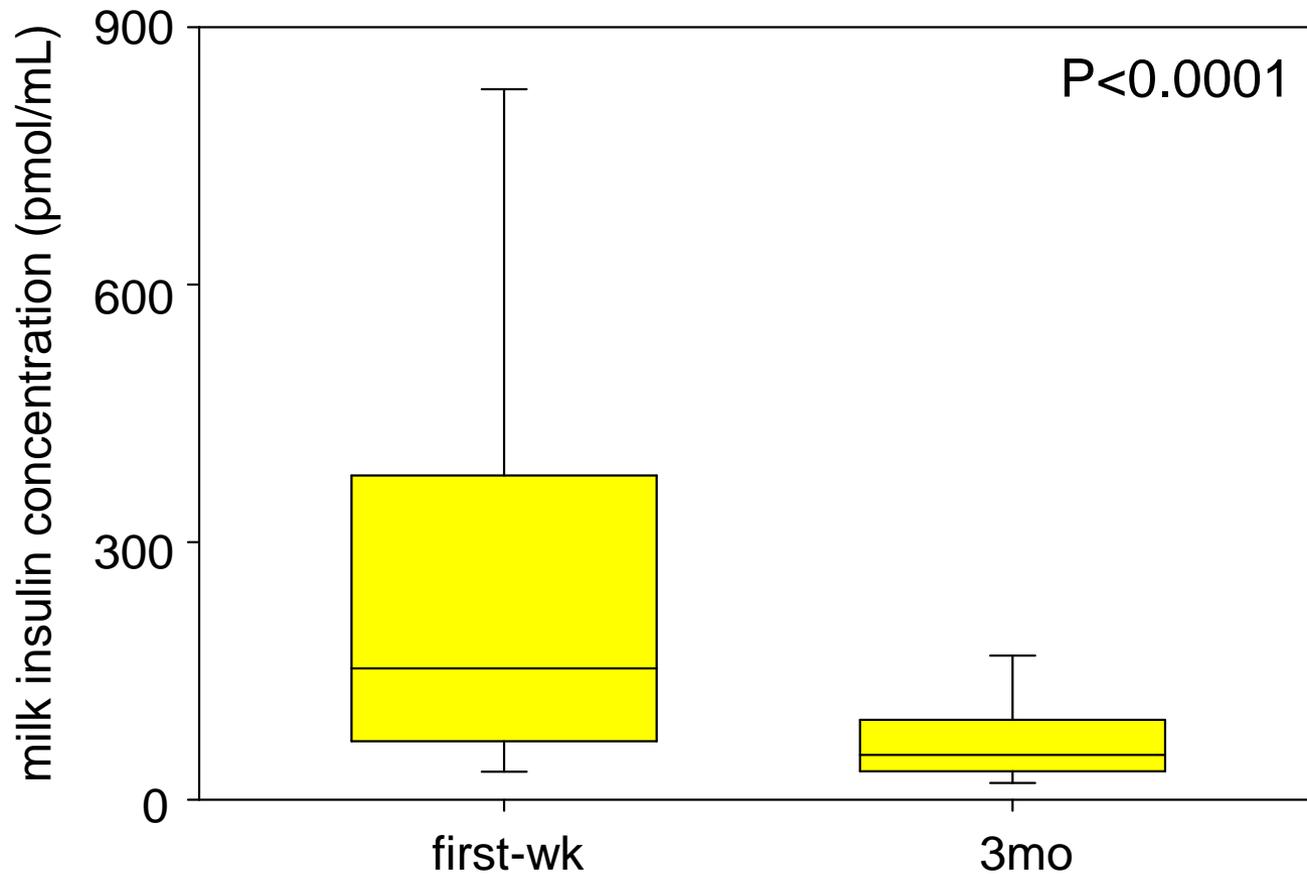
# Results: Milk adiponectin concentrations in first-week v. 3-month postpartum

(n=111; paired t test)



# Results: Milk insulin concentrations in first-week v. 3-month postpartum

(n=111; paired t test)



# Results: Maternal prenatal metabolic measures and milk adiponectin<sup>1</sup>

	1 <sup>st</sup> week		3mo	
	beta±SE	p	beta±SE	p
Pregravid BMI	0.003±0.014	0.81	-0.019±0.010	0.06
Serum Fasting Glucose	-0.048±0.139	0.73	-0.036±0.060	0.55
Serum HOMA-IR	0.027±0.053	0.61	-0.056±0.035	0.12
Serum ISogtt	-0.088±0.125	0.48	0.071±0.079	0.37
Serum adiponectin	<b>0.102±0.032</b>	<b>0.002</b>	<b>0.045±0.020</b>	<b>0.03</b>
Gestational diabetes	-0.129±0.180	0.47	-0.081±0.117	0.49

<sup>1</sup>General linear model analyses were used with adjustment for maternal age, ethnicity, and postpartum time

Ley *et al.* *Am J Clin Nutr* 2012; 95:867

# Results: Maternal obstetrical measures and milk adiponectin<sup>1</sup>

	1 <sup>st</sup> week		3mo	
	beta±SE	p	beta±SE	p
Nulliparous	<b>0.546±0.146</b>	<b>0.0002</b>	0.138±0.098	0.16
Scheduled C-section <sup>2</sup>	<b>-0.422±0.186</b>	<b>0.02</b>	-0.231±0.120	0.06
Unscheduled C-section <sup>2</sup>	<b>0.387±0.162</b>	<b>0.02</b>	-0.158±0.107	0.14
Length of gestation	<b>0.171±0.058</b>	<b>0.004</b>	-0.027±0.040	0.50

<sup>1</sup>General linear model analyses were used with adjustment for maternal age, ethnicity, and postpartum time

<sup>2</sup>v. spontaneous delivery

# Results: Maternal prenatal metabolic measures and milk insulin<sup>1</sup>

	1 <sup>st</sup> week		3mo	
	beta±SE	p	beta±SE	p
Pregravid BMI	-0.002±0.020	0.91	<b>0.053±0.014</b>	<b>0.0003</b>
Serum Fasting Glucose	-0.185±0.200	0.36	<b>0.218±0.087</b>	<b>0.01</b>
Serum HOMA-IR	0.015±0.077	0.85	<b>0.255±0.047</b>	<b>&lt;0.0001</b>
Serum ISogtt	-0.217±0.180	0.23	<b>-0.521±0.108</b>	<b>&lt;0.0001</b>
Serum adiponectin	-0.022±0.048	0.65	<b>-0.116±0.029</b>	<b>&lt;0.0001</b>
Gestational diabetes	-0.200±0.259	0.44	0.102±0.174	0.56

<sup>1</sup>General linear model analyses were used with adjustment for maternal age, ethnicity, and postpartum time

# Results: Maternal obstetrical measures and milk insulin<sup>1</sup>

	1 <sup>st</sup> week		3mo	
	beta±SE	p	beta±SE	p
Nulliparous	-0.191±0.219	0.38	<b>-0.310±0.144</b>	<b>0.03</b>
Scheduled C-section <sup>2</sup>	-0.178±0.279	0.53	0.301±0.180	0.10
Unscheduled C-section <sup>2</sup>	0.099±0.246	0.69	0.144±0.160	0.37
Length of gestation	-0.074±0.086	0.39	0.056±0.059	0.34

<sup>1</sup>General linear model analyses were used with adjustment for maternal age, ethnicity, and postpartum time

<sup>2</sup>v. spontaneous delivery

# Conclusions

- Prenatal metabolic abnormalities are associated with higher insulin in mature milk
- Obstetrical parameters are associated with higher adiponectin in early milk

# Discussion

- animal models
  - oral insulin stimulated gut maturation/ function and attenuated atherosclerosis progression
- preterm infants
  - tube-fed insulin enhanced intestinal function and reduced feeding intolerance
- milk metabolic hormones might have a role through local and/or systemic mechanisms regulating infant development



**SickKids**



# Donor Human Milk Experimental Study

# Donor Human Milk

- There are increasing demands for donor milk when mother's own milk is not available
- Donor milk is pasteurized at 62.5°C for 30 min (Holder method) in North America
- Limited data are available on its impact on milk metabolic hormones

# Methods: Pasteurization Effects

Human Milk Bank Association of North America guidelines

- Milk samples from 34 mothers were pooled to produce 17 distinct batches (4 mothers / batch)
- Holder pasteurized (62.5°C for 30 min)
- Adiponectin, insulin, energy, fat, glucose and total protein concentrations were measured pre- and post-pasteurization

## Results: Concentrations (Mean $\pm$ SD) of milk components pre- and post-pasteurization

	<b>Pre</b>	<b>Post</b>	<b>% <math>\Delta</math></b>
<b>Adiponectin, ng/mL</b>	<b>13.91 <math>\pm</math> 4.84</b>	<b>9.34 <math>\pm</math> 2.96</b>	<b>-32.8**</b>
<b>Insulin, pmol/L</b>	<b>162.8 <math>\pm</math> 64.2</b>	<b>87.8 <math>\pm</math> 26.3</b>	<b>-46.1**</b>
<b>Energy, Kcal/dL</b>	71.5 $\pm$ 9.9	69.4 $\pm$ 8.8	-2.9
<b>Fat, g/L</b>	4.29 $\pm$ 0.95	3.91 $\pm$ 0.81	-8.9*
<b>Glucose, mmol/L</b>	0.97 $\pm$ 0.25	1.11 $\pm$ 0.22	1.4*
<b>Protein, g/L</b>	14.8 $\pm$ 1.5	14.8 $\pm$ 1.1	<1.0

\* $<0.05$ ; \*\* $<0.0001$

**2<sup>nd</sup> trimester  
macronutrient intake**

*Ho1*

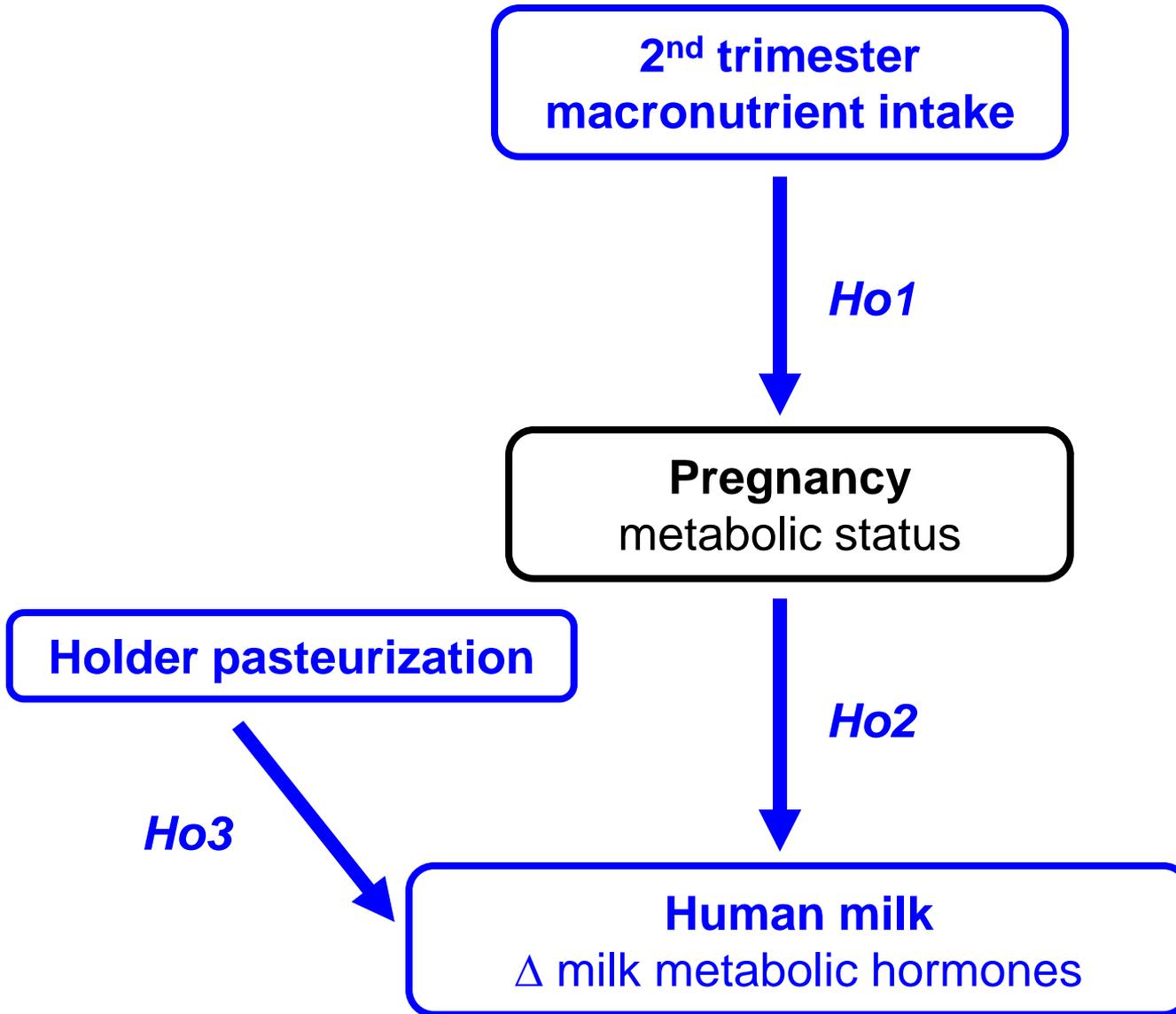
**Pregnancy  
metabolic status**

**Holder pasteurization**

*Ho2*

*Ho3*

**Human milk**  
 $\Delta$  milk metabolic hormones



# Limitations and future directions

- Observed association of vegetable and fruit fiber intake with insulin sensitivity might have been confounded by other components
- Impact of variations in milk hormones on infant development and subsequent risk for type 2 diabetes warrants further investigation

# Take Home Messages

A woman with blonde hair is looking down at a baby lying on a white surface. The woman's face is partially visible, and she appears to be holding the baby. The background is a soft, out-of-focus white.

Our findings support continued work to develop

1. prenatal nutritional strategies to prevent maternal metabolic abnormalities and
2. postnatal strategies to improve development of nutritionally vulnerable offspring exposed to maternal metabolic abnormalities

# Acknowledgements

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**Q and A**