



Effects of Physical Exercise on Mitochondrial Biogenesis of Skeletal Muscle Modulated by Histones Modifications in Type 2 Diabetes

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Abstract

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Epigenetic modification in skeletal muscle induced by environmental factors modulates several metabolic pathways that underlie Type 2 diabetes mellitus (T2DM) development. Mitochondrial biogenesis is a vital process for maintaining lipid metabolism homeostasis, as well as epigenetic modifications in proteins that regulate this pathway were detected in T2DM subjects' skeletal muscle. Physical exercise affects several metabolic pathways attenuating metabolic deregulation observed in T2DM. The pathways that regulate mitochondrial homeostasis are critical components for understanding such beneficial effects of physical exercise. Consequently, in this research, we investigate the epigenetic mechanisms characterizing mitochondrial biogenesis in the skeletal muscle in T2DM, focusing on histone modifications and the mechanisms by which physical exercise delays or inhibits T2DM onset. The results indicate that exercise enhances metabolism in cells by increasing enzymes of the antioxidant system, AMPK and ATP-citrate lyase activity, acetyl-CoA concentration, and enhancing the acetylation of histones. A key mediator of mitochondrial biogenesis, including peroxisome proliferator-activated receptor gamma coactivator 1 alpha coactivator-1 α , seems to be upregulated by exercise in T2DM. This factor positively modulates the skeletal muscle mitochondrial biogenesis, which improves energy metabolism and glucose homeostasis, inhibiting or delaying insulin resistance and further T2DM.

Introduction

Type 2 diabetes mellitus (T2DM) is a metabolic condition defined by above-normal glycemic levels caused first by insufficient insulin action in target tissues and more advanced stages of the reduction of insulin synthesis [1]. T2DM has recently reached dangerous global rates, with an approximate global incidence of 8.4%, or 451 million individuals in 2018. This figure is expected to rise to 693 million patients by 2045 [2].

Unhealthy eating habits and sedentarism are modifiable risk factors that highly induce overweight and obesity. High concentrations of triglyceride lipase (TGL) in adipocytes lead to inflammation in tissues because of macrophage migration into fat tissues [3]. This inflammatory condition induces alterations in cellular metabolism and mitochondrial homeostasis, which affects glucose uptake, leading to resistance to insulin [4], [5].

Dysfunction of mitochondria induces the increase of oxidative stress, which is substantially

linked to T2DM as well as insulin resistance. Over the past decades, it has been indicated that the molecular mechanisms underlying T2DM are epigenetic modifications, usually associated with lifestyle and alterations in gene expression modulating mitochondrial homeostases [6], such as myocyte enhancer factor-2 (MEF2), mitochondrial transcription factor (TFAM), and nuclear respiratory factor 1 (NRF1), as well as peroxisome proliferator-activated receptor gamma coactivator 1 alpha (PGC1 α) [7]. Mitochondrial biogenesis is substantially regulated by a signaling pathway and depends on proteins transcribed in the cell nucleus and transported to mitochondria. Down regulation of PGC1 α has been related to the development of insulin resistance in skeletal striated muscle [8], [9]. The expression of PGC1 α is lower in the skeletal muscle of individuals with T2DM than in healthy individuals [10].

Numerous epidemiological investigations have linked the positive impact of physical exercise in the regulation of metabolic illnesses for decades [11], [12]. These studies have shown that exercise alleviates

low-density lipoprotein as well as TGL and elevates high-density lipoprotein, which is an efficient molecule in the removal of cellular cholesterol [13]. Moreover, the inflammatory process of tissues resulting from lipid deposition and oxidative stress can be attenuated by physical exercise [14].

Because epigenetic changes are reversible and possibly tempting to pharmaceutical research aimed at the regulation of metabolic illnesses, there has been a growing interest in evaluating them. The present review attempts to categorize scientific as well as academic research on histone epigenetic modifications, homeostasis, and mitochondrial biogenesis impairment found in T2DM, culminating in changes in the metabolic characteristics of this pathology and the potential effects of exercise to reverse these changes.

Methods

This review presents a synthesis of studies from the past decade that evaluated the relationship between epigenetic modifications and T2DM and physical exercise effect on histone epigenetic alternations of gene expression associated with the regulation of cell metabolism. The recommended report items for meta-analysis (PRISMA), as well as systematic review procedures, were utilized [15]. Animal and human clinical and laboratory research, as well as non-randomized trials, were included in the study. Studies with a pharmacological intervention focused on other metabolic pathways or that evaluated epigenetic modifications in pathologies not related to metabolic syndrome were excluded from the study. The articles published in the interval between 2009 and 2020 in the MEDLINE database (PubMed) were included in the study, yielding 1237 articles, reaching 162 papers after analyzing the inclusion criteria. Finally, 68 articles were included as per the flow chart in Figure 1 [15].

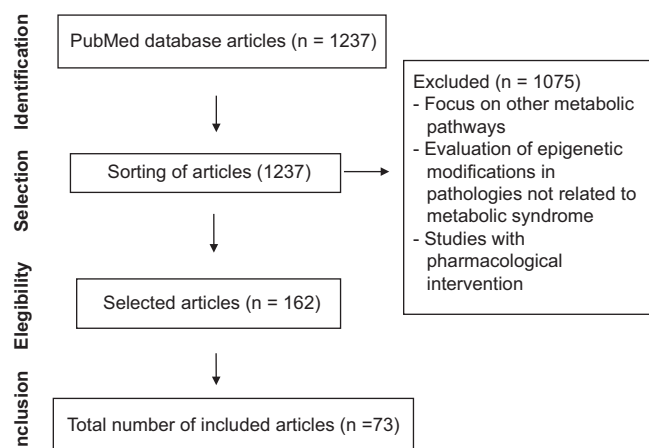


Figure 1: Schematic diagram of article selection according to Prisma methodology

Discussion

Histones and epigenetic modifications

Because they mediate related-chromatin proteins' recruitment, reversible alterations in histone structure are critical for modulating the connection between histone as well as DNA. Four types of histones involve nuclear DNA. H2A, H2B, H3, and H4 histones are involved in nuclear DNA and are crucial for genome structure when changed following translation, affecting chromatin and hence gene expression [16]. This structural structure is integrally engaged in all DNA-related functions such as DNA repair, transcription, and replication [17].

Because of several of these alterations, histones' N terminal structure affects their connection with DNA. Adding the acetyl group to these amino acids neutralizes their positive charges. This mechanism reduces the bond between DNA phosphate groups as well as histones, causing chromatin to relax. Acetylated chromatin areas are often linked with active transcription. Hypo acetyl areas, on the contrary, make chromatin thicker and contribute to a less active transcription process. Histone acetyltransferases (HAT) is the key enzyme for catalyzing acetyl group loading from histones, whereas histone deacetylase (HDAC) is responsible for removing these acetyl groups (Figure 2) [17].

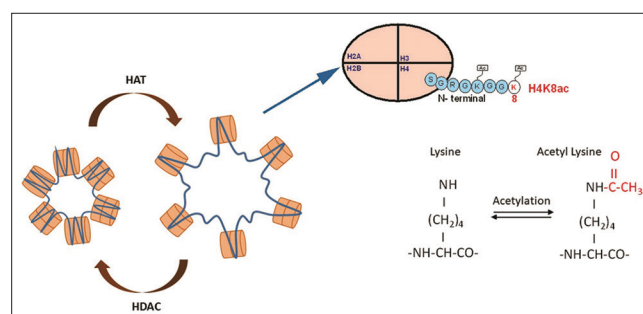


Figure 2: Acetylation of histone 4-lysine 8 by the addition of an acetyl group in the positively charged amino acid residues in the N-terminal portion of the histone, catalyzed by the enzyme histone acetyl transferase that weakens the histone DNA bond, and thus relaxing chromatin and increasing transcription. The deacetylation promoted by the enzyme histone deacetylase will result in reduced transcription

Aside from deacetylation as well as acetylation, there is histone methylation (Figure 3), a process in which terminal areas such as lysine (K) may be methylated once, twice, or three times, resulting in activating specific gene phenotypes and suppressing others. The monomethylated (H3K9me) histone 3 lysine 9 results in activated expression, whereas double or triple methylation, stimulates gene expression suppression [18].

Oxidative stress, inflammation, and histone acetylation

T2DM is induced by insulin action or secretion defects in peripheral tissues. Contributing factors

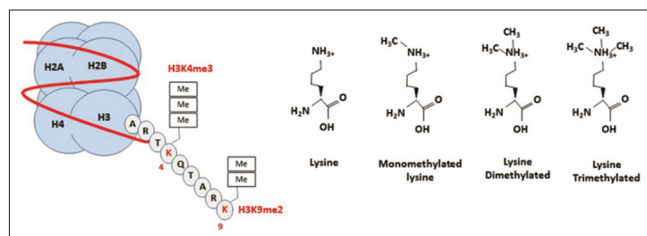


Figure 3: Methylation of histone 3 lysine 9 and histone 3 lysine 4 histones. Mono, di, or trimethylation of the amino acids methyl group (-CH₃) can occur in the N-terminus. Monomethylation and trimethylation of H3K4me result in increased expression, while di and trimethylation results and silencing of gene expression

such as poor eating habits, obesity, and sedentarism, obesity was proven as causes of oxidative stress and inflammatory processes, as well as accumulating fat tissues [19], [20], [21], which can evolve into insulin resistance and T2DM. Following a high-fat diet (HFD) and/or elevated body weight, mostly adipose tissue causes elevated reactive species of oxygen (ROS) secretion. The exacerbated oxidative stress as well as activated proinflammatory cytokines, including TNF- α , IL6, and IL1, impede insulin signaling through suppressing PI3K as well as the signal transducer and activator of transcription 3 [22]. The associations between ROS and the inflammatory process are usually intensified in T2DM and trigger local and systemic chronic inflammation [23]. Prattichizzo *et al.* illustrated the inflammation impact on T2DM progression; even in a non-obese population with poor dietary habits, the induced inflammatory process might lead to epigenetic alternations associated with metabolic diseases, such as T2DM. In addition, they propose that intervention through antioxidants and physical exercise can be the optimum method to alleviate the inflammation-induced process as well as oxidative stress that results in T2DM [24].

ROS is generated endogenously through mitochondria respiration and exogenous oxidizing agents and affects a wide range of biological processes through various mechanisms [25]. Different hypotheses have been proposed regarding the responses of the components that can affect epigenetic machinery, such as HDACs and HATs classes. Few prior investigations focus on oxidative stress and inflammation impact on such epigenetic modifications in skeletal muscle [26]. In other tissues, there is evidence of the effect of chronic oxidative stress modulating the pattern of epigenetic modifications to histones. A clinical study with adipocytes of normal-weight, obese, diabetic, or non-diabetic showed that T2DM and overweight are associated with global epigenetic modifications of histones, including the trimethylation of histone 3 lysine 4 (H3K4me3) and di-methylation of histone 3 lysine 4 (H3K4me2), damaging the metabolic homeostasis. H3K4me3 was 40 percent more elevated in overweight and diabetic individuals' adipocytes than in overweight as well as average-weight non-diabetics.

H3K4me2 level was 37% lower in overweight individuals' adipocytes compared to average weight. By comparing the overweight cohort (T2DM as well as non-diabetic) individuals, the H3K4me2 level was substantially diminished compared to normal-weight individuals' adipocytes [27]. In another study on mice oocytes, Bisphenol AF (BPAF), commonly used in industrial products such as cans and plastic, was shown to consistently increase ROS associated with histones modifications, methylation, and acetylation. In addition, it was observed decreased expression of H3K9me3 and H3K27ac caused by BPAF exposure and mediated by extensive oxidative stress [28].

Therefore, analysis of the effect of oxidative stress associated with systemic inflammations on methylation or acetylation patterns of histones in skeletal muscle with T2DM contributes to interpreting the detrimental effect of this deregulation on the epigenetic mechanisms that cause T2DM and comorbidity development [29], [30]. When cellular ROS increases, the compensatory response of mitochondria is increased biogenesis mediated by PGC1 α , a regulatory factor related to mitochondrial biogenesis that modulates antioxidant defense expression in cells. PGC1 α elevates MnSOD/SOD2 and catalase levels, preventing cellular death related to the failure of mitochondria. Nevertheless, PGC1 α levels are downregulated under inflammatory conditions, resulting in an enhanced inflammatory response, allowing inflammatory infiltration in the cells [31].

In fact, in chronic diseases, such as T2DM, it has been described to reduce the expression of PGC1 α and increase inflammatory response [32], [33]. Furthermore, PGC1 α expression is reduced in aging muscles and linked to systemic inflammations in mice [34] and humans [24], [29], [30]. Besides, PGC1 α translocation from cytosol to the mitochondria has been demonstrated to be modulated by AMPK, as illustrated by Smith *et al.* (2013) that in humans, mice, and rat translocations of PGC1 α to the mitochondria, stimulated by muscle contraction, we are dependent on AMPK activation [35]. Consequently, it can be hypothesized that AMPK could be a correlation between metabolic status in diabetes and biogenesis.

AMPK is a significant energy sensor that contributes to cellular energy homeostasis. The inhibition or reduction of mitochondrial function leads to diminished ATP as well as elevated ADP and AMP activation AMPK. Hence, AMPK maintains metabolic energy balance, triggering the production of energy as well as suppressing the processes consuming energy. In energy metabolism, AMPK inhibits glucose synthesis and stimulates hepatic fatty acid oxidation and ketogenesis, stimulates the oxidation of fatty acids, glucose uptake, inhibition of cholesterol, and triacylglycerol synthesis. In adipocytes, it inhibits lipolysis and lipogenesis and modulates pancreatic insulin secretion [36]. In people as well as animals with

metabolic syndrome and T2DM, it is evident that AMPK activity is impaired. On the contrary, the physiological or pharmacological activations of AMPK can improve insulin sensitivity and metabolic homeostasis [37]. Besides, in ROS-activated biogenesis mitochondria, the activation of AMPK is required for PGC1 α transcription in skeletal muscle [38].

Regarding the link between AMPK and mitochondrial biogenesis, the AMPK translocates from the cytoplasm to the nuclei, promoting the regulation of transcription through histone acetylation, activating particular HAT and therefore triggering acetylation of histone as well as PGC1 α transcription. In addition, nuclear AMPK might induce phosphorylation of HDAC and HDAC4, as well as HDAC5, eliciting their transportation from nuclei and consequently triggering the reactions of histone acetylation through the inhibition of HDAC.

The activation of AMPK might raise the acetyl CoA level as well through cholesterol syntheses and fatty acid suppression [39]. In this way, the histone acetylation or deacetylation depends on coenzyme metabolism, responding to the metabolic status because acetyl-CoA is used as a building block for lipid acetylation as well as synthesis [40], [41]. In mammalian cells, the major carbon source is glucose; thus, Acetyl-CoA secretion can occur through glucose by the enzyme ATP-citrate lyase (ACL), which triggers mitochondrial-derived citrate conversion into acetyl-CoA as well as oxaloacetate [42]. ACL in skeletal muscle contributes to homeostasis and mitochondrial biogenesis and enhances mitochondrial respiration [43].

Wellen *et al.* (2009) showed that ACL is a primary acetyl-CoA source for overall histone acetylation in many mammalian cell types under normal growth circumstances and may be directly connected to the pool of citrate-derived acetyl-CoA generated by ACL. Furthermore, silencing ACL or HAT (GCN5) resulted in a substantial decrease in histones H4, H3, and H2B acetylation and the diminished overall histone acetylation detected when lowering ACL silenced through inhibiting HDACs. As a result, in the absence of significant histone deacetylation, ACL activity has a less effect on core histones' net acetylation. Other important findings of the group were that under intracellular glucose deprivation conditions, such as in T2DM, the oxidation of fatty acids leads to mitochondrial acetyl-CoA production, but not nucleocytoplasmic acetyl-CoA. Similarly, supplying cells with fatty acids did not promote histone acetylation, leading the authors to conclude that only nucleocytoplasmic acetyl-CoA is available to be involved in the acetylation of histones [44]. Acetyl-CoA produced from the oxidation of fatty acids as well as pyruvate oxidation in the mitochondria cannot diffuse across phospholipid membranes, and mitochondrial citrate is transferred from the tricarboxylic acid cycle to the nucleus and cytosol through the citrate transporter. Nucleocytoplasmic citrate is subsequently reconverted to

acetyl-CoA ACL and employed in histone acetylation processes [45]. Furthermore, the glucose transporter type 4 (GLUT4) expression was reduced by acetylating histones H4 and H3 at the GLUT4 promoter and remarkably diminished when ACL was silenced and may be restored by acetate [44].

Aside from the effects of AMPK and Acetyl-CoA on HAT, HDAC inhibitors can modulate the expression of genes expression through suppressing histone deacetylation and were found to have anti-diabetic as well as anti-obesity properties. Lee *et al.* (2020) demonstrated the molecular mechanism characterizing the protective impact of class I HDAC suppression under lipotoxic conditions on the tissues of skeletal muscle in mice fed HFD and increased fructose drinking water compared to control results. The used diet elevated the protein expression of HDAC3, in addition to impairing the oxidation of mitochondria, inducing elevated mitochondrial ROS secretion as well as accumulated TG. Besides, extended exposure promoted elevated expression of insulin resistance as well as inflammatory cytokines, while a Class I HDAC inhibitor substantially diminished lipotoxicity, restricting the expression of inflammatory cytokines and insulin resistance, along with increased expression of PGC1 α and TFAM, restoring mitochondrial biogenesis [46].

Figure 4 demonstrates a schematic model of oxidative stress impact associated with the inflammatory process [47] AMPK activity and acetyl CoA concentration reduced in the cytoplasm, common in T2DM disease, on histone acetylation processes, leading to impairment in the mitochondrial biogenesis through deregulation of HAT and HDAC activity [48], [49]. This process damages histone acetylation and may affect the mitochondrial biogenesis cascade's gene transcription and regulatory factors, such as PGC1 α [39], [42]. In contrast, ROS concentration balance improves the HAT activity leading to the transcription these factors as well as genes.

Physical exercise, oxidative stress, and inflammation

ROS levels rise in response to physical exertion, triggering intracellular alterations. The amount of ROS produced is determined by the intensity, duration, and kind of physical activity done. Nonetheless, tissue damage induced by exercise promotes various processes for healing the damaging tissues as well as skeletal muscle. Exercising regularly causes a physiologic adaptation through the activation of the antioxidant mechanism mediated by hydrogen peroxide (H₂O₂) and superoxide (O₂⁻) that triggers the activation of the catalase (CAT) of the antioxidant system, superoxide dismutase of manganese (MnSOD), and glutathione peroxidase (GPx), as well as enzyme superoxide dismutase (SOD). These enzymes donate electrons or atoms to the ROS and become stable

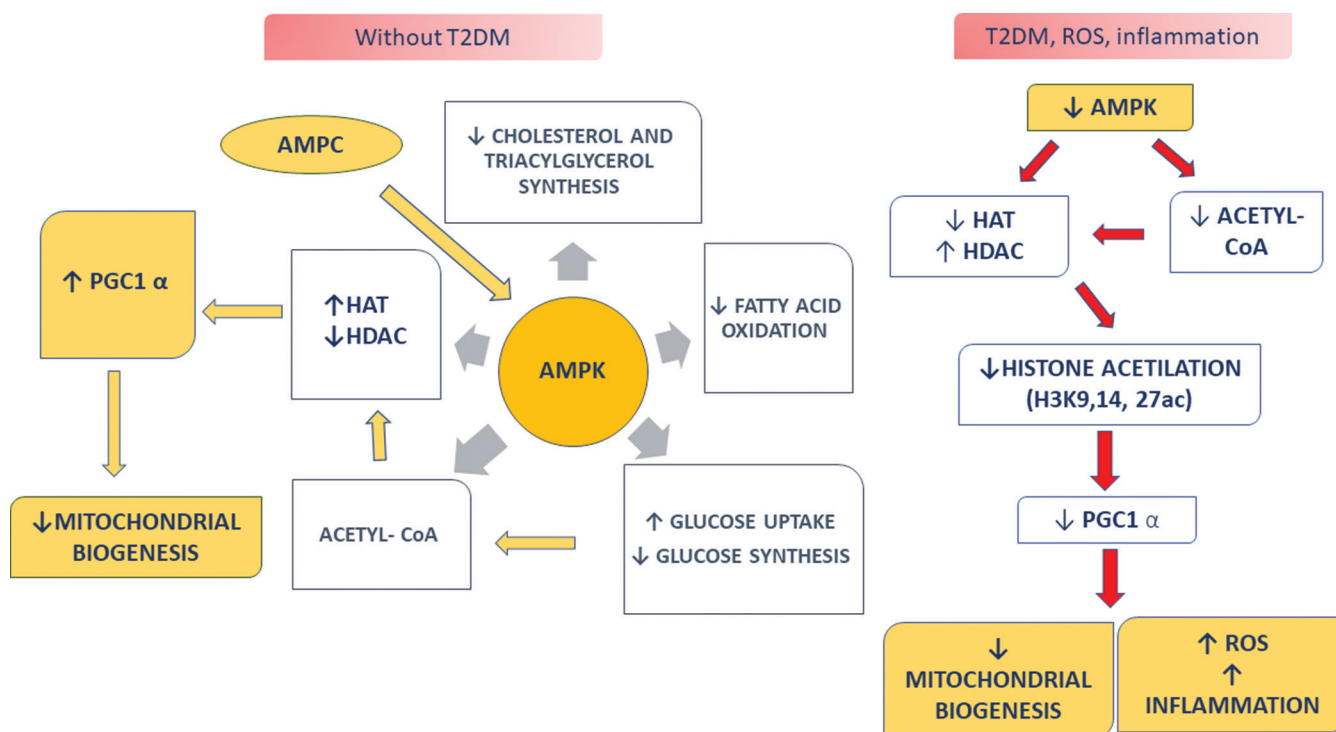


Figure 4: The effect of type 2 diabetes mellitus, oxidative stress, and inflammation on histones (H3K9, H3K14 e H3K27) acetylation. (a) In the subject without type 2 diabetes mellitus, AMP-activated protein kinase (AMPK) activity is normally regulated, thus it stimulates energy metabolism, inhibits glucose synthesis, and stimulates hepatic fatty acid oxidation and ketogenesis. AMPK stimulates fatty acid oxidation, glucose uptake, inhibition of cholesterol, and triacylglycerol synthesis. In adipocytes, it inhibits lipolysis and lipogenesis. AMPK also promotes the increased nucleocytoplasmic concentration of acetyl-CoA and makes it available to participate in the mechanism of histone acetylation. AMPK stimulates specific histone acetyltransferases (HAT), increasing histone acetylation and proliferator-activated receptor γ coactivator-1 α (PGC1 α) transcription. Moreover, nuclear AMPK can phosphorylate Type 2A histone deacetylases (HDACs) inhibiting it, supporting the histone acetylation, PGC1 α transcription and mitochondrial homeostasis and biogenesis and (b) When T2DM is established, increased reactive oxygen species and inflammatory process are exacerbated, and there is a decline in AMPK activity and Acetyl-CoA available in the nucleocytoplasmic compartment, generated by ATP-citrate Lyase, this results in diminished HAT as well as elevated HDAC activity. Therefore, it results in reduced histones acetylation, PGC1 expression, and impaired mitochondrial homeostasis and biogenesis. Dysregulation of PGC-1 α alters the redox homeostasis in cells and exacerbates inflammatory response. During inflammation, low levels of PGC-1 α downregulate mitochondrial antioxidant gene expression, induce oxidative stress, and impair mitochondrial biogenesis

since they metabolize the ROS in excess and maintain homeostasis [50]. In addition, oxidative stress caused by long-term exercise results in the stimulation of stress-activated protein kinase (SAPK) signaling, which increases the expression of genes and coactivator transcription in the skeletal muscle like MEF2 and PGC1 α [51].

Ristow *et al.* (2009) demonstrated the effect of increased stress caused by physical exercise on PGC1 α expression in humans. In the study, they were included 20 subjects previously trained and 20 untrained. About 50% of the previously trained and untrained received antioxidant supplementation (ascorbic acid and Vitamin E), and all subjects practiced physical exercise for 4 weeks. Physical exercise improved insulin resistance by elevating ROS mitochondrial formation in skeletal muscle to promote the expression of PGC1 α and SOD, and GPx. Furthermore, antioxidant supplements blocked the exercise-dependent formation of reactive oxygen species and the metabolic health effects of physical exercise [52].

Besides the impact of moderate long-term physical exercise in reducing oxidative stress, physical

exercise also has beneficial effects on the inflammatory process. Several epidemiologic investigations reveal that increased physical activity effectively reduces low-level systemic inflammation in metabolic syndrome, diabetes, and obesity, in addition to healthy people [53], [54], [55], [56]. However, the effects of intensity, duration, and the kind of physical exercise are still controversial. Prolonged high-intensity exercise has been demonstrated to cause muscle damage and increased inflammation-markers as IL6 and neutrophils and macrophages infiltrating. Nevertheless, moderate regular physical exercise can induce physiological adaptation and promote an anti-inflammatory phenotype, including an increased PGC1 α expression in skeletal muscle, an important initial mechanism involved in mitochondrial adaptations to physical exercise, coordinated by increased activation of AMPK [57], [58], [59].

AMPK activity increases in skeletal muscle with heavy exercise, and a reduced ATP/ADP ratio simultaneously increases AMPK, and this can occur either by inhibiting ATP production or by accelerating ATP consumption mediated by physical exercise [59]. In the mitochondria, the increased AMPK function stimulates

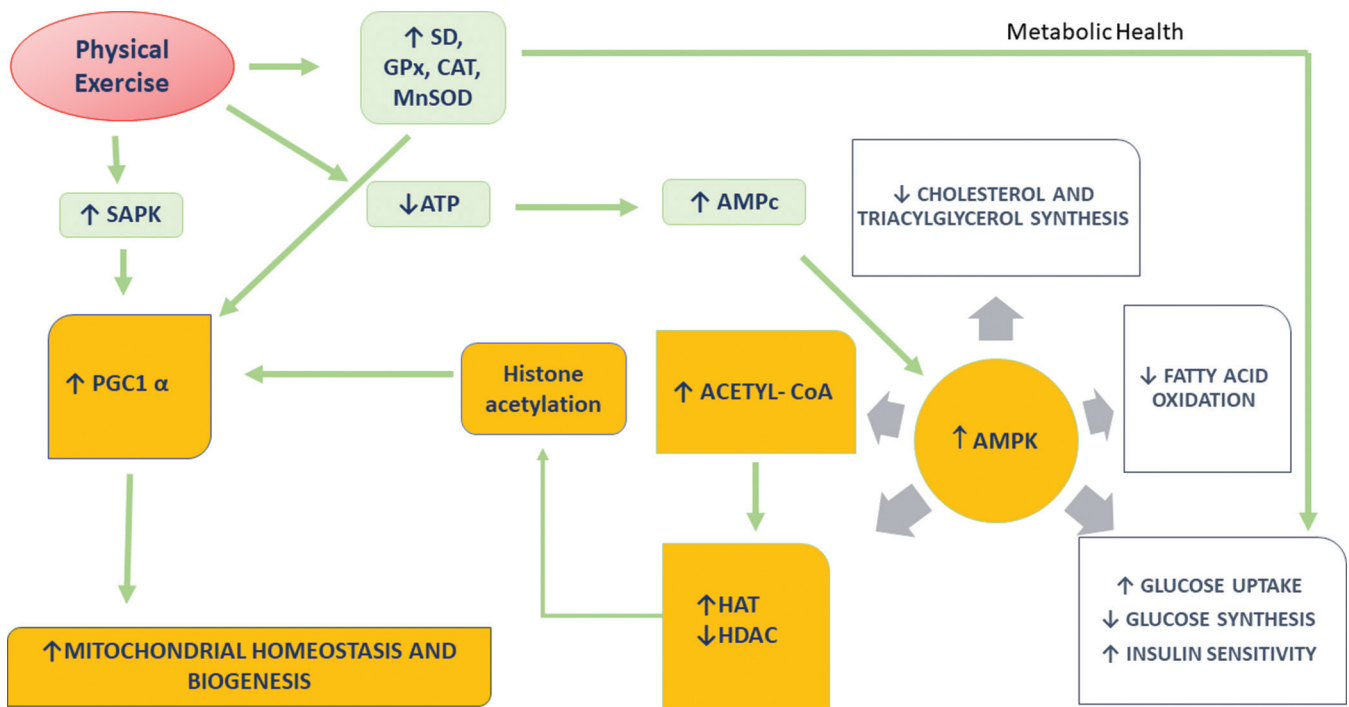


Figure 5: Mechanism in which regular exercise can improve the biogenesis and mitochondrial homeostasis in the skeletal muscle. Exercise elevates oxidative stress that triggers the physiological adaptation, producing enzymes of the antioxidant system, such as superoxide dismutase (SOD), glutathione peroxidase (GPx), catalase (CAT) and superoxide dismutase of manganese, CAT, and stress-protein kinase (SAPK) of the antioxidant system that reduces reactive species of oxygen. SOD, GPx, and SAPK increase insulin sensitivity and proliferator-activated receptor γ coactivator-1 α (PGC1 α) expression. Reduced ATP/ADP ratio increases intracellular AMPc that activates AMP-activated protein kinase (AMPK). AMPK enhances histone acetyltransferases activity and histones acetylation. AMPK also stimulates ATP-citrate lyase that increases Acetyl-CoA concentration, providing acetate to the histone acetylation. Increased histone acetylation enhances de PGC1 α expression and mitochondrial biogenesis and homeostasis

the PGC1 α expression and the signaling cascade, such as increased NRF1 and TFAM expression that culminates with mitochondrial biogenesis [60], [61].

Besides increasing AMPK activity, exercise can increase skeletal muscle acetyl-CoA levels through the effect of contraction on calcium-calmodulin/dependent protein kinase CaMKK [62], which activates AMPK. Therefore, AMPK can enhance ACL activity [59]. However, the ACL functions in skeletal muscle mediated

by physical exercise are poorly understood. Figure 5 demonstrates a schematic drawing of the effects of physical exercise.

Epigenetic modifications and physical exercise in histones

Several scientific studies have been conducted in recent decades to investigate the impact of epigenetic

Table 1: Types of physical activity

Reference	Type of physical activity	Tissue/Experimental model	Biogenesis/Signalling	Effect on histones	Metabolic effect
McGee et al. [65]	Acute exercise, 60-min cycling session	Vast side muscle/humans	RNApol II active; MPK and CaMK II activated. HDAC class II (4 and 5) exported from the core.	↑ H3K36ac	H3K36ac increases transcriptional activity. HDAC class II (4 and 5) exported from the core by activation of AMPK and CaMKII, prevents the suppression of acetylation.
Lochmann et al. [18]	Acute exercise, race for 60 min, being: 35 rpm/20 min; 40 rpm/30 min; 45 rpm/10 min	Quadriceps muscle/mice	↑ Total PGC1 α expression and isoforms	↑ H3K4me3 at the place where the transcription begins	↑ Mitochondrial biogenesis and oxidative metabolism
Joseph et al. [66]	Short-term exercise, 15 days of swimming	Gastrocnemius muscle/Wistar rats	CaMKII activation. ↑ NRF1 and MEF2	↑ H3 acetylation at the NRF1 gene site	↑ Transport and capture of glucose
Masuzawa et al. [67]	Acute exercise, running: 24 m/min for 20 min	Plant and soleus muscles/Wistar rats	↑ mRNA expression from PGC1 2 h after the race	↑ H3K27ac or ↑ RNA pol II	Activation of the transcription of PGC1 α in the rapidly contracting muscle fibers due to increased mobility of H3k27ac-induced RNApol II, improving oxidative metabolism
Ohswa et al. [64]	Long-term exercise, Running: Group 1: 30 min/day, 4 days/week, 8 weeks; Group 2: 15 min/day, 4 days/week, 8 weeks; Group 3: 60 min/day, 4 days/week, and 4 weeks	Plant muscle/Wistar rats	↑ citrate activity synthase in group 3	Variations in the acetylation of H3 and H4K20me3 between groups	↑ H3 and ↓ H4K20me3 acetylation in group 1, without stimulation of mitochondrial metabolism. An increase in the daily amount of exercise, group 3, caused a slight increase in mitochondrial metabolism.

PGC1 α : Peroxisome proliferator-activated receptor γ coactivator-1 α , NRF1: nuclear respiratory factor 1, MEF2: myocyte enhancer factor-2, HDAC: Histone deacetylase, AMPK: AMP-activated protein kinase.

changes induced by physical activity. Physical exercise contributes to extrapolating generations, maintaining health, and improving metabolic offspring [63]. Despite the reported promising effects of acute exercise presented in Table 1, we assumed that chronic exercise adaptation must be examined in an attempt to comprehend physical exercise's molecular impacts on epigenetic changes.

Among the analyzed articles (Table 1), Ohsawa *et al.* [64] assessed the impact of long-term physical activity (Table 1), while the other research investigated its impacts on the skeletal muscle following one session of exercising [18], [65], [66], [67] or a short exercise interval (15 days). All studies indicated an enhancement in mitochondrial biogenesis-related functions such as activation of gene transcription, glucose uptake, and oxidative metabolism. This impact was mediated by epigenetic alterations such as acetylation of H3K36ac histones as well as methylation of H3K4me3 histones, demonstrating the underlying processes of enhanced T2DM metabolic regulation.

Conclusion

PGC1 α expression control maintains a strong association with mitochondrial function, being essential in mitochondrial biogenesis and avoiding the metabolic deregulation related to T2DM. Physical exercise can reverse the epigenetic modifications found in T2DM, stimulating the expression of PGC1 α , mediated by increased histone acetylation and transcriptional activity. The mechanisms underlying histone acetylation seem to be related to oxidative stress, the systemic inflammatory process, and the metabolic state of cells. Exacerbated oxidative stress and inflammatory processes common in T2DM impair cell signaling processes related to mitochondrial biogenesis, for example, reducing the activation of AMPK and the concentration of Acetyl-CoA. The stimulus for the expression of PGC1 is impaired. Long-term physical exercise stimulates physiological adaptation by synthesizing antioxidants, reducing the inflammatory process, and increasing ATP expenditure, which will cause increased AMPK activity. Increased AMPK stimulates histone acetylation and Acetyl-CoA concentration, which is a substrate for the activity of HAT to histones acetylation, resulting in an enhanced expression of PGC1 α . However, investigations on the long-term impact of physical activity are fundamental to interpreting the comprehensive mechanism, which is the best types, frequency, and duration that have the most significant potential to induce increased mitochondrial biogenesis.

Declarations

Ethical approval

This article does not contain any studies with human participants or animals performed by any of the authors.

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