

THE IMPACT OF THE PERICONCEPTIONAL ENVIRONMENT (IN VIVO AND EX VIVO)

ON FETO-PLACENTAL DEVELOPMENT IN THE SHEEP

Severence Michael MacLaughlin B.S. (Hons)

Discipline of Physiology

School of Molecular and Biomedical Science

The University of Adelaide

A thesis submitted for the degree of Doctor of Philosophy
to
The University of Adelaide

March 2006

Table of contents

ABSTR	RACT	VIII
DECLA	ARATION	XIII
LIST O	F TABLES AND FIGURES	xxII
1. LI1	TERATURE REVIEW	2
1.1	THE EVOLUTION OF THE "BARKER H	IYPOTHESIS"2
1.2	PERICONCEPTIONAL ORIGINS OF AL	DULT HEALTH7
1.2	2.1 Periconceptional undernutrition: Huma	n epidemiology studies7
1.2	Periconceptional Undernutrition: Anima	al models and outcomes10
1.2	2.3 Periconceptional environment: Effect of	of fetal number16
1.3	EARLY EMBRYO DEVELOPMENT	20
1.4	MATERNAL-ZYGOTIC TRANSITION (N	MZT)23
1.5	EMBRYO DEVELOPMENT FROM HAT	CHING TO IMPLANTATION 24
1.6	MATERNAL RECOGNITION OF PREG	NANCY25
1.7	UTERINE PREPARATION FOR PREGI	NANCY27
1.8	ASYNCHRONY BETWEEN EMBRYO A	AND UTERINE DEVELOPMENT
	31	
1.9	EMBRYO AND UTERINE SYNCHRONY	Y: THE ROLE OF
PRO	GESTERONE	34
1.10	OVINE PLACENTATION	36
1.1	0.1 Implantation	36
1.1	10.2 Placental development: introduction	
	0.3 Placental development: terminology	
1.1	0.4 Placental development: gross morphol	ogy41
1.1	0.5 Placental development: growth	43
1.1	0.6 Placental development: metabolism	45
1.1	0.7 Placental development: transport	46
1.1	0.8 Placental development: twin pregnanci	ies47
1.11	FETAL GROWTH AND DEVELOPMEN	T48
1.1	1.1 Fetal growth and development: Twins.	50
1.1	1.2 Fetal growth and development: Organ	systems 50
1.1	1.3 Fetal growth and development: Endocr	rine control52

		<u></u>
1.11.4	Fetal growth and development: metabolism	53
1.12 FET	TOPLACENTAL GROWTH AND DEVELOPMENT: MATER	RNAL
INFLUENC	CES	53
1.12.1	Maternal frame size	54
1.12.2	Interaction of maternal and fetal genotypes	55
1.12.3	Maternal weight at conception	56
1.12.4	Maternal body condition at conception	58
1.13 MA	TERNAL UNDERNUTRITION DURING EARLY AND MID-	
PREGNAN	NCY: EFFECTS ON CONCEPTUS GROWTH AND DEVEL	OPMENT
60		
1.13.1	Maternal undernutrition during follicular, oocyte and embryo de	velopment
	61	·
1.13.2	Maternal nutrition and plasma progesterone concentrations	63
1.13.3	Maternal nutrition and plasma cortisol concentration	64
1.13.4	Maternal undernutrition during early and mid-gestation	65
1.13.4.1	Placental development	65
1.13.4.2	Petal development	68
1.13.4.3	B Heart development	70
1.13.4.4	Adrenal development	371
1.13.4.5	Kidney development	72
1.14 <i>EX</i>	VIVO NUTRITION OF THE EMBRYO: EFFECTS OF IN VI	TRO
CULTURE	ON DEVELOPMENT	74
1.14.1	In vitro culture: development in man and mouse	75
1.14.2	In vitro culture: sheep and cows	77
1.14.2.1	Large Offspring Syndrome: fetal effects	78
1.14.2.2	P. Large Offspring Syndrome: placental effects	81
1.14.3	Large Offspring Syndrome: culture conditions	83
1.14.3.1	IVC undefined: co-culture	84
1.14.3.2	? IVC undefined: serum as a protein source	85
1.14.3.3	3 IVC defined	86
1.14.3.4	Effects of embryo transfer	87
1.14.4	Large Offspring Syndrome: just a phenotype?	88
1.14.5	In vitro culture: fetal number?	89

2. PE	ERICO	DNCEPTIONAL NUTRITION AND THE RELATIONSHIP BETW	/EEN
MATE	RNAL	BODY WEIGHT CHANGES IN THE PERICONCEPTIONAL	
PERIC	D AN	D FETO-PLACENTAL GROWTH IN THE SHEEP	92
2.1	SU	MMARY	92
2.2	INT	RODUCTION	94
2.3	MA	TERIALS AND METHODS	96
2.3	3.1	Collection of tissues	99
2.3	3.2	Placental histology and morphometry	99
2.3	3.3	Statistical Analysis	101
2.4	RE	SULTS	102
2.4	4.1	Singleton Pregnancies	102
2	.4.1.1	PCUN, maternal weight and condition	102
2	.4.1.2	PCUN, changes in maternal weight during the periconceptional p	eriod
а	nd ute	roplacental and fetal growth	105
2	.4.1.3	PCUN, maternal weight and body condition at d 53-56 and	
и	teropla	acental and fetal growth	111
2.4	4.2	Twin Pregnancies	111
2	.4.2.1	PCUN, maternal weight and condition	111
2	.4.2.2	PCUN, uteroplacental and fetal growth	112
	.4.2.3		
а	nd ute	eroplacental and fetal growth	113
2	.4.2.4	PCUN, maternal weight or maternal weight gain up to d 53-56	
р	regna	ncy and placental and fetal growth	113
	4.3	Effects of PCUN and fetal number on the histological development	
		in early pregnancy	
2.5	DIS	SCUSSION	123
3. IM	IPAC ¹	FOF MATERNAL UNDERNUTRITION DURING THE	
PERIC	ONC	EPTIONAL PERIOD AND FETAL NUMBER ON HEART AND	
ADREI	NAL (SROWTH AND ON ADRENAL IGF AND STEROIDOGENIC	
ENZYN	ME EX	(PRESSION IN THE SHEEP FETUS DURING EARLY	
PREGI	NANC	;Y	132
3.1	SU	MMARY	132
3.2	INT	RODUCTION	134
3.3	MA	TERIALS AND METHODS	137

	3.3.1	Collection of tissues	. 139
	3.3.2	Maternal blood samples	. 140
	3.3.3	FFA Assay	. 140
	3.3.4	Progesterone Radioimmunoassay	. 140
	3.3.5	Cortisol Radioimmunoassay	. 141
	3.3.6	RNA extraction and cDNA synthesis	.141
	3.3.7	Quantitative Real Time Reverse Transcription PCR	. 142
	3.3.8	Statistical Analysis	. 143
3	.4 RES	SULTS	. 145
	3.4.1	PCUN and maternal plasma progesterone and cortisol	. 145
	3.4.1.1	Progesterone:	.145
	3.4.1.2	Cortisol:	. 146
	3.4.2	PCUN, fetal number and placental 11- β HSD-2 mRNA expression	.148
	3.4.3	PCUN, fetal number and fetal adrenal weight at d 53 – 56	. 148
	3.4.4	PCUN and adrenal IGF-1, IGF-2, IGF-1R, IGF-2R and CYP 17 mRN	Α
	expression	on in singleton and twin fetuses	.151
	3.4.5	PCUN, and fetal heart weight at d 53 – 56 gestation	
3	.5 DIS	CUSSION	163
	3.5.1	Maternal progesterone and cortisol concentrations and placental 11-	
	βHSD-2 ι	mRNA expression in twin pregnancies	. 164
	3.5.2	Adrenal growth, IGFs and CYP 17 expression in singleton and twin	
	fetuses	165	
	3.5.3	Impact of PCUN on placental and adrenal growth and development	. 167
	3.5.4	PCUN, fetal heart growth and the influence of the developing HPA as	kis
		169	
	3.5.5	Summary	. 171
4.	IMPACT	OF MATERNAL UNDERNUTRITION DURING THE	
PEI	RICONCE	EPTIONAL PERIOD AND FETAL NUMBER ON KIDNEY GROV	VTH
AN	D ON KID	NEY IGF EXPRESSION IN THE SHEEP FETUS DURING EAR	RLY
PR	EGNANC	Y	173
1	.1 SUN	MMARY	172
		RODUCTION	
4		TERIALS AND METHODS	
	4.3.1	Collection of tissues	
	4.3.2	Maternal blood samples	. 178

	4.3.3	Cortisol radioimmunoassay	178
	4.3.4	RNA Isolation and cDNA Synthesis	178
	4.3.5	Quantitative Real Time Reverse Transcription PCR	178
	4.3.6	Statistical Analysis	179
	4.4 RES	SULTS	180
	4.4.1	PCUN, fetal outcomes and fetal kidney growth	180
	4.4.2	Fetal kidney growth, maternal weight change and maternal cortis	ol
	concentra	ations	183
	4.4.2.1	Control Group:	183
	4.4.2.2	PCUN Group:	186
	4.4.3	PCUN and kidney IGF-1, IGF-1R, IGF-2, and IGF-2R mRNA exp 189	ression
	4.4.4	PCUN, fetal kidney and adrenal development	189
	4.5 DIS	CUSSION	194
	4.5.1	PCUN, maternal weight, maternal weight change and fetal kidney	/ weight
		194	
	4.5.2	PCUN, fetal number, maternal cortisol concentrations and fetal ki	idney
	weight	195	
	4.5.3	PCUN, fetal kidney weight and renal IGF mRNA expression	197
	4.5.4	PCUN, fetal kidney and adrenal growth	199
	4.5.5	Summary	199
5.	IMPACT	OF EMBRYO TRANSFER AND IN VITRO CULTURE IN TH	Ι Ε
PF	RESENCE	OR ABSENCE OF SERUM ON FETAL AND PLACENTAL	
DI	EVELOPMI	ENT DURING LATE GESTATION IN THE FETAL SHEEP: I	ARGE
OI	FFSPRING	SYNDROME REVISITED	203
	5.1 SUN	MMARY	ასა
		RODUCTION	
		TERIALS AND METHODS	
	5.3.1	Experimental design	
	5.3.2	Animals and management	
	5.3.3	Synchronization, superovulation and artificial insemination	
	5.3.3.1	Intermediate and final reginient owes	
	5.3.3.2 5.3.4	Intermediate and final recipient ewes Embryo collection: donor ewes	
		Embryo Culture	214
	2 5 2		715

•		•
•	,	
•	,	ı

	5.3.5.1	Preparation of amino acid stocks	215
	5.3.5.2	Preparation of in vitro culture medium	215
	5.3.6	In vivo culture	216
	5.3.7	In vitro culture: defined no serum (IVCNS)	217
	5.3.8	In vitro culture: undefined human serum (IVCHS)	217
	5.3.9	Embryo transfer to final recipients	218
	5.3.10	Collection of tissues	218
	5.3.11	Statistical analysis	219
5.	4 RES	SULTS	220
	5.4.1	Embryo development and survival	220
	5.4.1.1	Embryo transfer (ET) group	220
	5.4.1.2	In vitro culture no serum (IVCNS) group	220
	5.4.1.3	In vitro culture with human serum (IVCHS) group	220
	5.4.1.4	Natural mated control (NM) group	221
	5.4.2	Fetal Growth	223
	5.4.2.1	Singletons	223
	5.4.2.2	Twins	223
	5.4.3	Placental growth	227
	5.4.3.1	Singletons	227
	5.4.3.2	Twins	233
	5.4.4	Fetal and placental abnormalities	234
	5.4.5	Relationship between fetal and placental growth	234
	5.4.6	Fetal organ growth and development	237
	5.4.6.1	Singletons	237
	5.4.6.2	Twins	237
5.	5 DIS	CUSSION	241
	5.5.1	Impact of ET and in vitro culture on fetal growth	241
	5.5.2	Impact of ET and in vitro culture on placental growth	243
	5.5.3	Impact of ET and in vitro culture on cardiovascular and fetal organ of	growth
		246	
	5.5.4	Summary	248
6. S	UMMAR'	Y AND CONCLUSIONS	255

Abstract

A range of epidemiological, clinical and experimental studies have demonstrated that exposure of an embryo to a suboptimal environment *in vivo* or *ex vivo* during early embryo development is associated with altered development of cardiovascular, neuroendocrine and metabolic disorders in adult life. A number of perturbations during early embryo development result in developmental adaptations by the embryo to ensure immediate survival, whilst programming the embryo for altered fetal and placental development, resulting in the eventual onset of adult disease. It has been previously shown that maternal nutrient restriction during the periconceptional period results in a hyperactivation of the pituitary – adrenal axis and increased mean arterial blood pressure in twin but not singleton pregnancies.

It was therefore the first aim of this thesis to interrogate the impact of maternal undernutrition during the periconceptional period (defined as from at least 45 days prior until 7 days after conception) on fetal and placental development during early pregnancy at ~ day 55 of pregnancy, which coincides with the period of maximal placental growth. In Chapter 2, it has been demonstrated that there are important relationships between maternal weight gain during the periconceptional period and feto-placental growth during the first ~ 55 days of pregnancy and that periconceptional undernutrition has a differential effect on these relationships in singleton and twin pregnancies. In singleton pregnancies, periconceptional undernutrition disrupts the relationship between maternal weight

gain during the periconceptional period and utero-placental growth and in twin pregnancies, periconceptional undernutrition results in the emergence of an inverse relationship between maternal weight gain during early pregnancy and uteroplacental growth and in a dependence of fetal growth on placental growth. (Chapter 2)

In order to investigate the origins of the physiological adaptations that lead to the development of hyperactivation of the pituitary – adrenal axis and increased mean arterial blood pressure in late gestational fetuses after exposure as an embryo to periconceptional undernutrition, we investigated the development and steroidogenic capacity of the fetal adrenal gland and development of the fetal heart and kidney at ~ 55 days gestation (Chapter 3 and 4).

The relative weight of the fetal adrenal and adrenal IGF-1, IGF-1R, IGF-2, IGF-2R and CYP 17 mRNA expression were lower in twin compared to singleton fetuses. There was evidence that in control singletons, IGF-2R expression plays an important role in the regulation of adrenal growth and CYP 17 mRNA expression during early pregnancy. In control twins, however, whilst there was a significant positive relationship between adrenal CYP 17 and IGF-2 mRNA expression, adrenal weight was directly related to the level of adrenal IGF-1 mRNA expression. There was no effect of periconceptional undernutrition on the level of expression of any of the placental or adrenal genes in the study. In PCUN ewes, carrying singletons, however, there was a loss of the relationships between either adrenal IGF-2, IGF-2R and IGF-1 mRNA expression and adrenal growth and CYP 17 expression which were present in control singletons. Similarly in

ewes carrying twins, maternal undernutrition during the periconceptional period resulted in the loss of the relationships between adrenal growth and IGF-1 expression and between adrenal CYP 17 and IGF-2 expression which were present in control twin fetuses. Whilst there was no effect of fetal number on fetal heart growth at ~ d55 in twin fetuses, there was a direct relationship between relative fetal heart and adrenal weights, which was present in both the PCUN and control groups. There was also a significant inverse relationship between maternal weight at conception and relative fetal heart weight in PCUN twin, but not PCUN singleton or control fetuses (Chapter 3).

In control pregnancies maternal weight gain during the periconceptional period is inversely related to the relative weight of the fetal kidney at ~55d pregnancy. In this group, relative kidney weight was also directly related to renal IGF-1 mRNA expression. In control twins maternal weight gain was inversely related to fetal kidney weight and this effect was ablated when the effects of maternal cortisol was controlled for in the analysis. In the PCUN group, whilst there was an inverse relationship between maternal weight gain during the periconceptional period and relative kidney weight, it was not possible to separate the independent effects of maternal weight loss during the periconceptional period and the subsequent weight gain during the period of refeeding. Renal IGF-1 mRNA expression was higher and renal IGF-1R and 2R expression were lower in twin fetuses compared to singletons. After exposure to PCUN, renal IGF-1 expression was also higher than in control pregnancies independent of the fetal number (Chapter 4).

Superovulation, artificial insemination, embryo transfer and *in vitro* embryo culture are used in a range of assisted reproductive technologies, and it has been demonstrated that varying the composition of the culture media can result in a change in pre and postnatal development. Culture of sheep embryos in media containing serum is associated with fetal overgrowth which is phenotypic of the Large Offspring Syndrome. It is not known how the combination of superovulation, artificial insemination and embryo transfer alone impacts fetoplacental development in late gestation of the sheep. There have been no studies, however, examining the differential impact of superovulation, artificial insemination and embryo transfer with or without *in vitro* embryo culture in the absence or presence of human serum on feto-placental development in singleton and twin pregnancies (Chapter 5).

I have therefore tested the hypothesis that superovulation, artificial insemination and embryo transfer with or without *in vitro* embryo culture in the presence or absence of human serum differentially alters the growth of the placenta, fetus and fetal organs during late gestation when compared to naturally conceived controls and that these effects are different in singleton and twin pregnancies. The fetal weight, CRL and abdominal circumference were significantly larger in IVCHS singleton fetuses. A novel finding in this study was lower fetal weights of twin fetuses in the ET and IVCNS groups compared to NM control twin fetuses. In addition, placental weights were lighter in twin fetuses in the ET, IVCNS and IVCHS treatment groups and this is partially due to a failure to initiate compensatory growth of placentomes in twin pregnancies (Chapter 5).

Abstract

The results of this thesis therefore highlight the complex interactions between the periconceptional environment (*in vivo* or *ex vivo*) and embryo or fetal number on the programming fetal and placental development. Maternal undernutrition during the periconceptional period and superovulation, artificial insemination and embryo transfer with or without *in vitro* culture in the absence or presence of serum alters fetal development, and I have demonstrated that these changes in fetal growth can be explained by changes in placental growth trajectory. Furthermore, a novel finding of this study is that perturbations of the periconceptional environment affect feto-placental development differently in singleton and twin pregnancies.