

Chemosensory Changes in Obesity and after Metabolic Surgery

M. Yanina Pepino

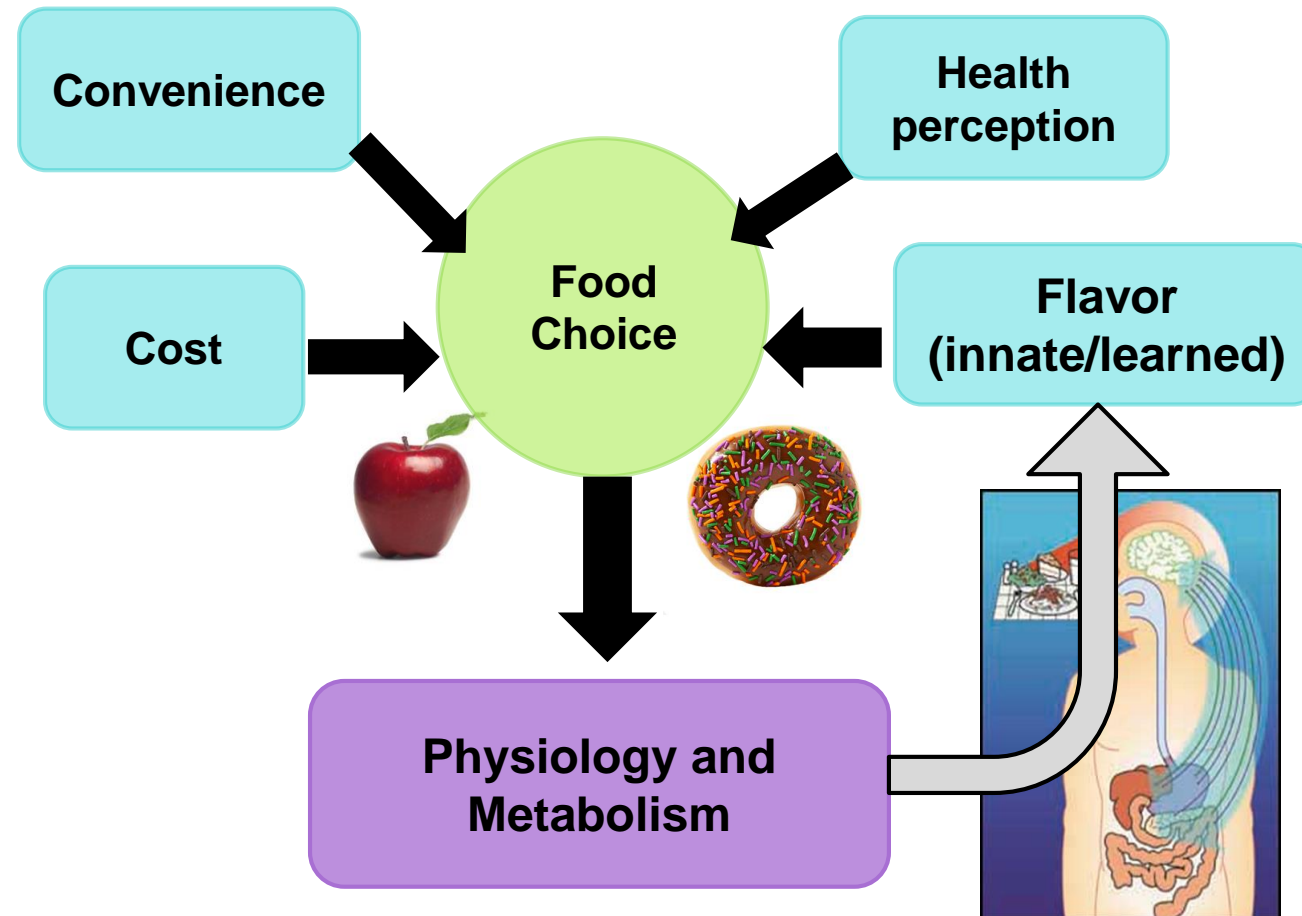
M. Yanina Pepino



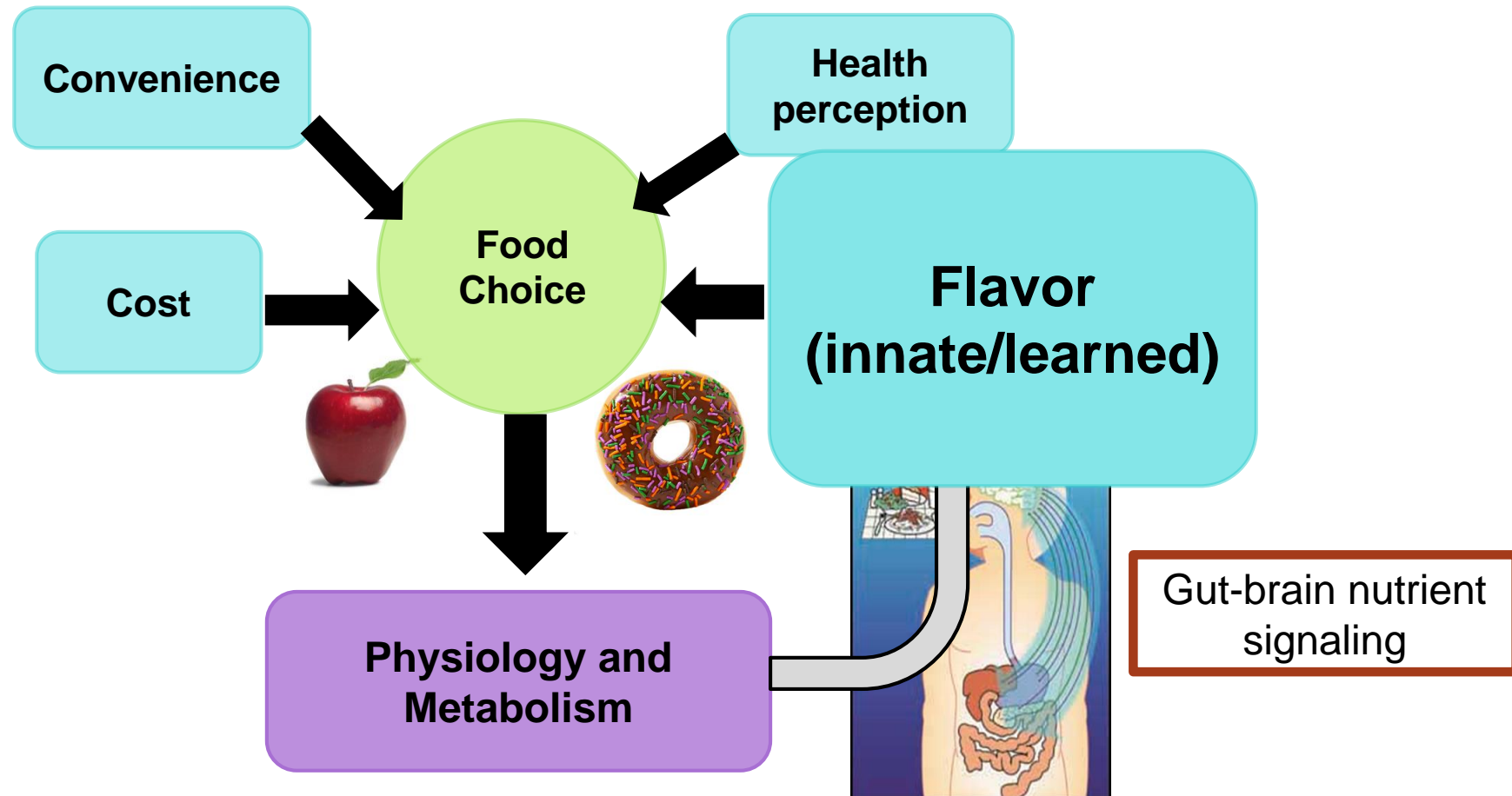
Department of Food Science and Human Nutrition, College of ACES

UNIVERSITY OF **ILLINOIS**
AT URBANA-CHAMPAIGN

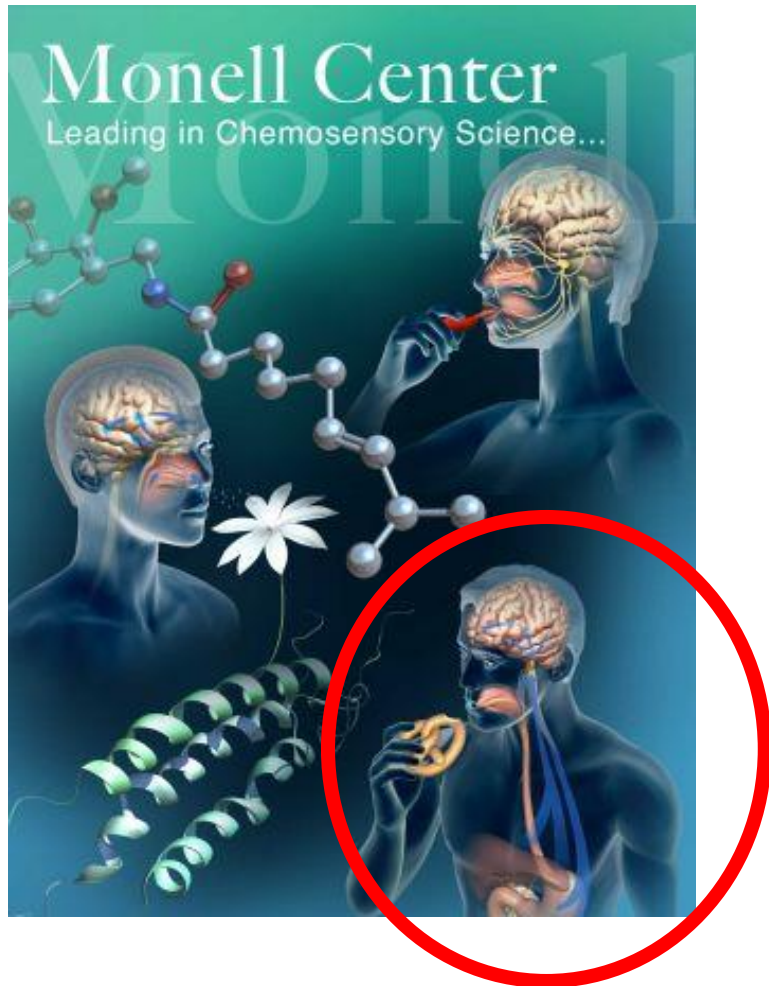
Food preferences and diet choices are fundamentally affected by how food tastes



Food preferences and diet choices are fundamentally affected by how food tastes



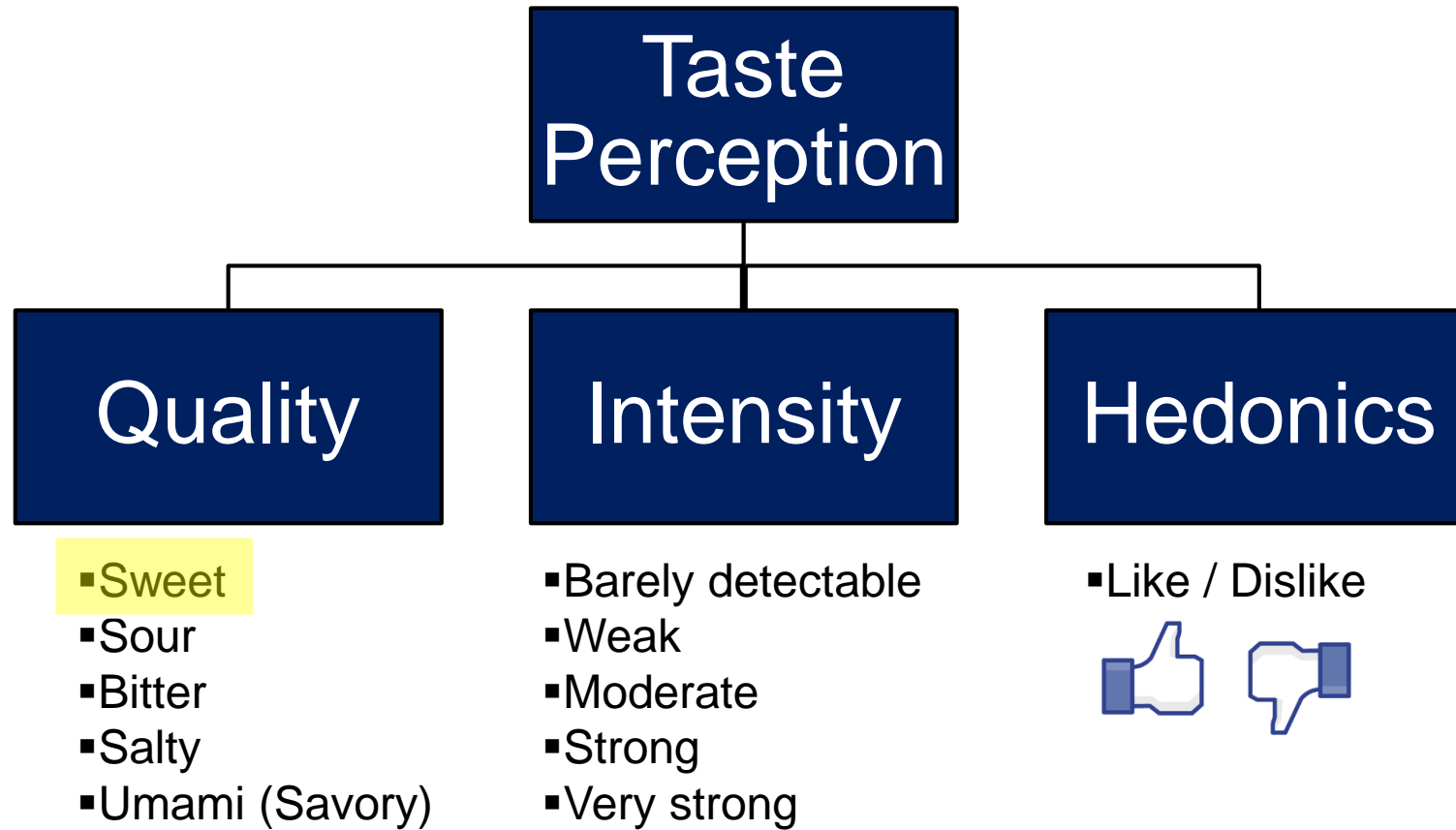
Chemosensory perception and body weight: is there a link?



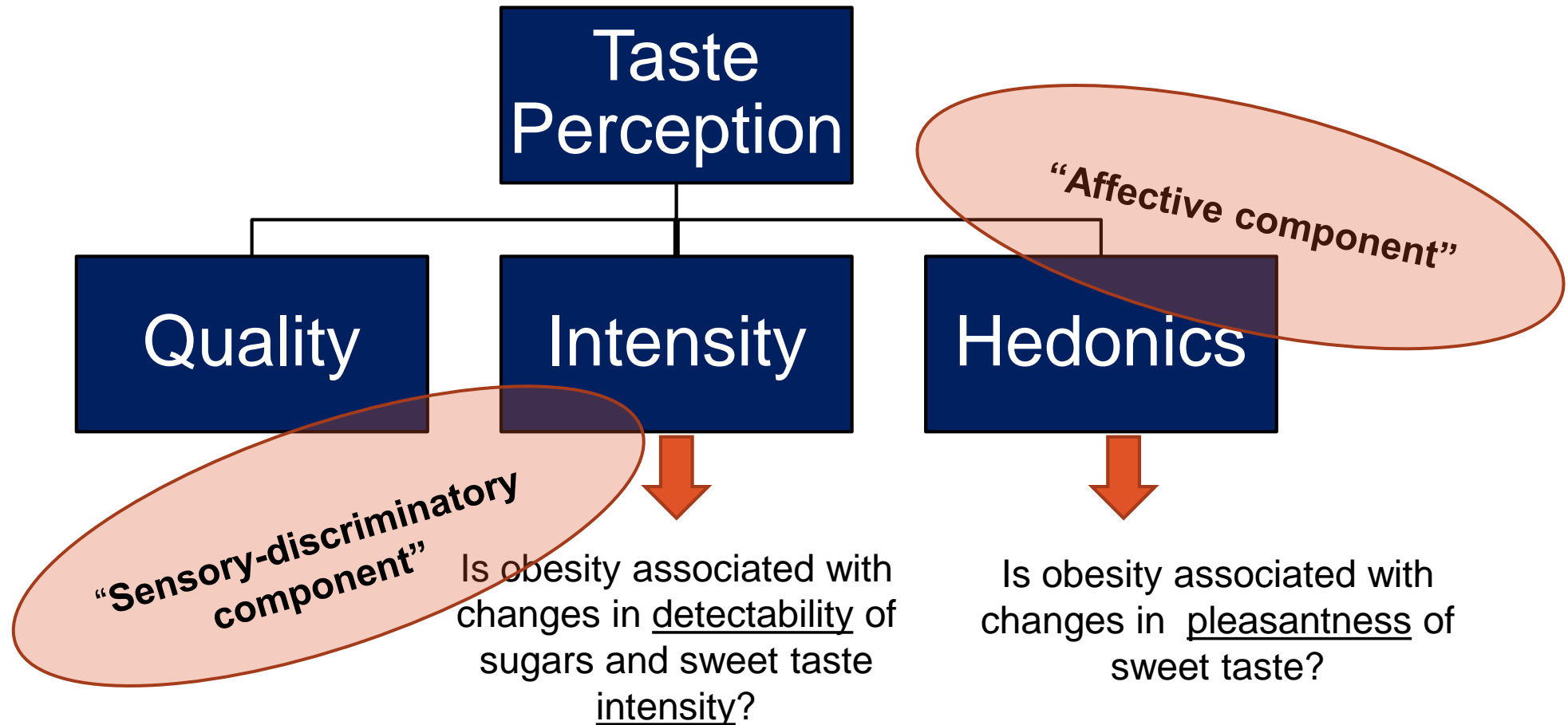
Disclosure:

- Psychophysical measurements of human taste function: changes associated with obesity and with weight-loss surgeries
- Review of the literature shows discrepant results: Inappropriate sensory methods?

The psychological attributes of taste



Obesity and taste function



Taste perception range

~5,800 mM (saturated solution)



~300 mM (6 tsp in 8 oz)



~35 mM (1/2 tsp in 8 oz)



~8 mM (1/7 tsp in 8 oz)



0 mM



Perceived Intensity Region
(above-threshold)

Undetectable
no perception
(below-threshold)

Maximal intensity



Recognition threshold (SWEET!)



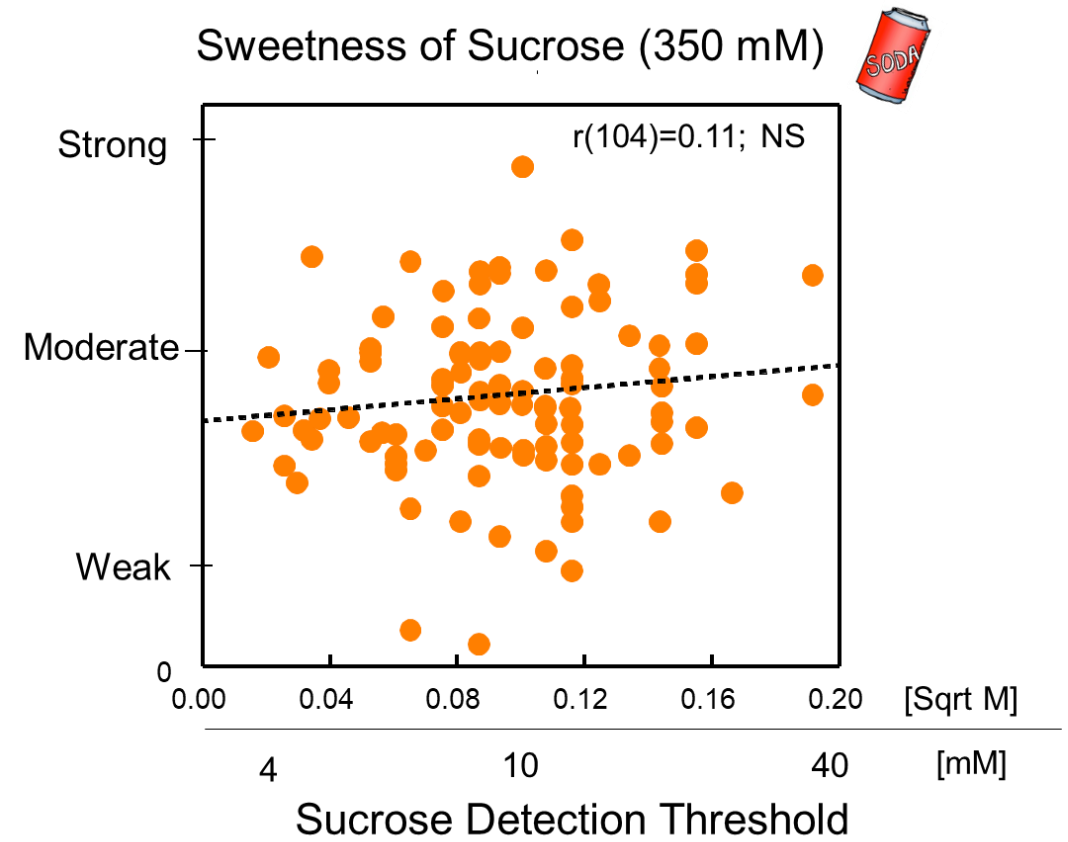
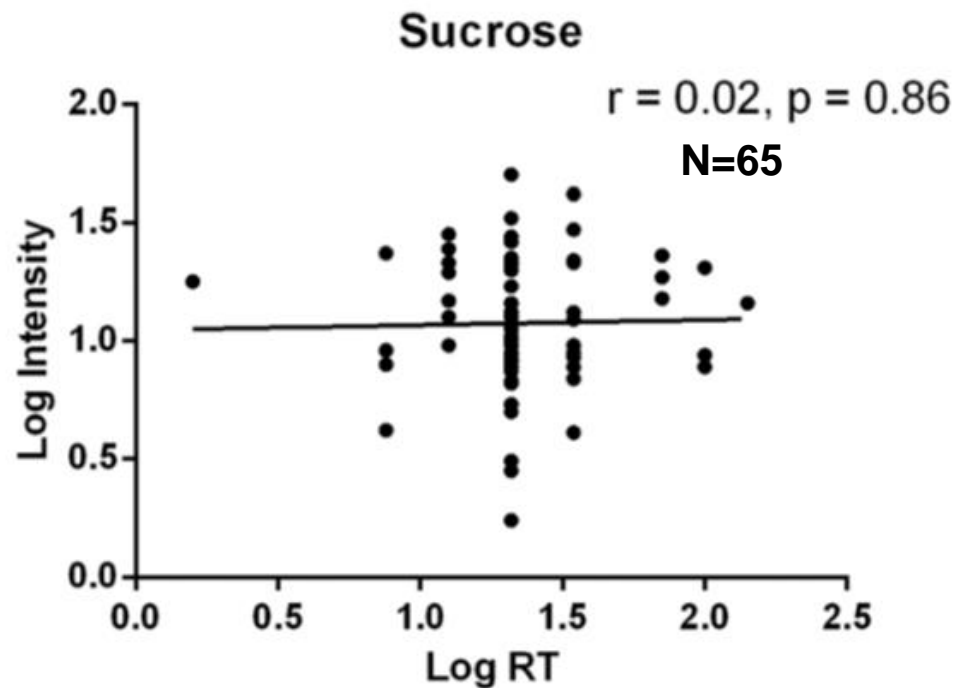
Detection threshold (DIFFERENT!)



I

adapted from Keast & Roper; Chem Senses 2007

Sucrose thresholds do not predict perception of intensity of above threshold concentrations



Webb, Bolhuis, Cicerale, Hayes and Keast, Chemosens Percept. 2015
(Consistent with Bartoshuk, AJCN, 1978; Jayasinghe et al., Nutrients 2017)

Pepino et al., unpublished

Methods

- Using “sip-and spit” technique:

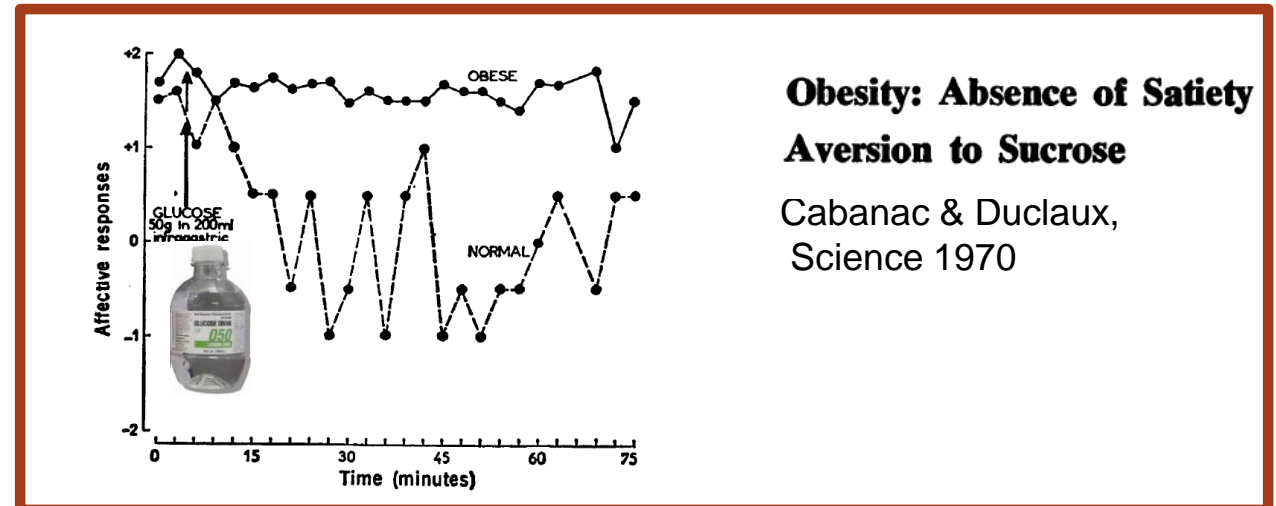
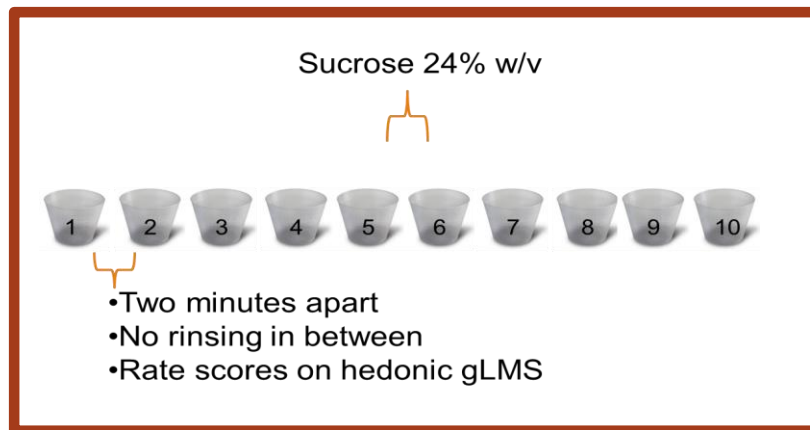
- Taste sensitivity (glucose, sucrose, NaCl, MSG)

- a. Detection thresholds: 2 alternative force choice procedures (Pribitkin et al., Ann Otol Rhinol Laryngol. 2003)
- b. Intensity at above-threshold concentrations general Labeled Magnitude Scale (Bartoshuk et al., Phil Trans R. Soc. B., 2006)

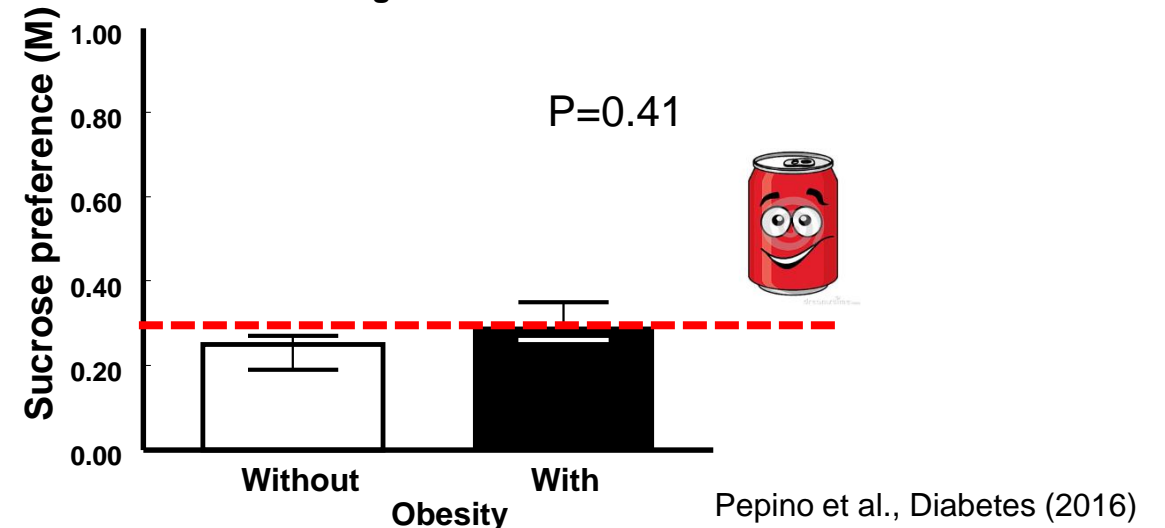
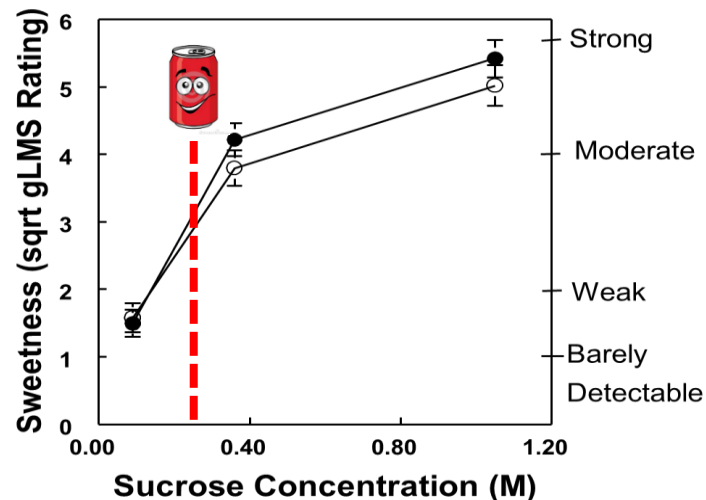
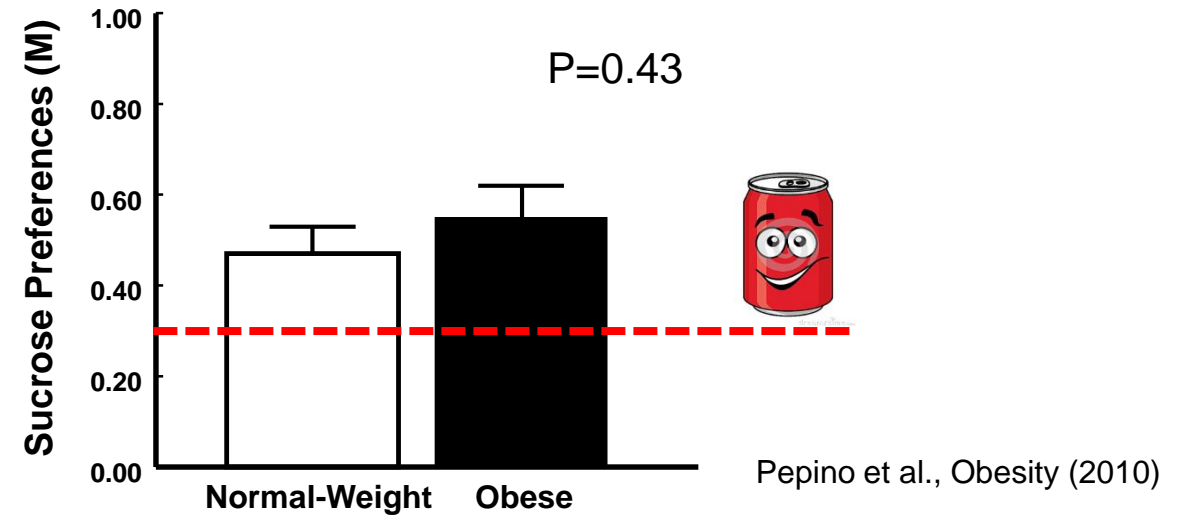
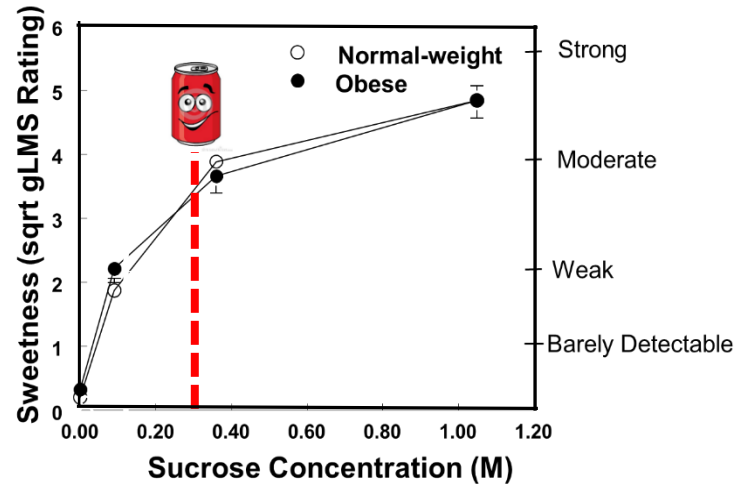


- Hedonic value of sweetness

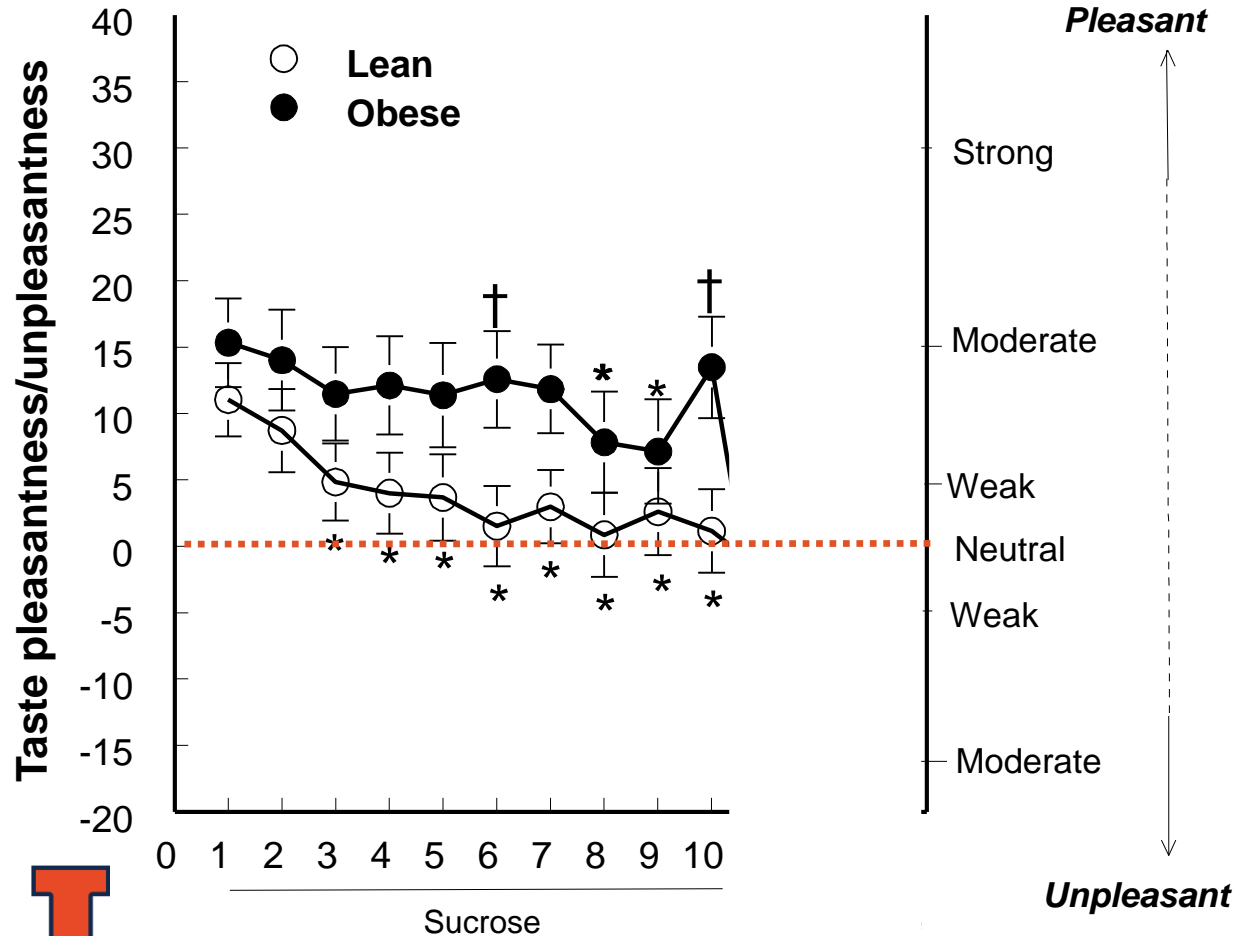
- a. Sucrose preferences (Monell tracking technique)
- b. Sweet taste reactivity taste: changes in hedonic value with repeated experience (Pepino and Mennella, Appetite, 2012)



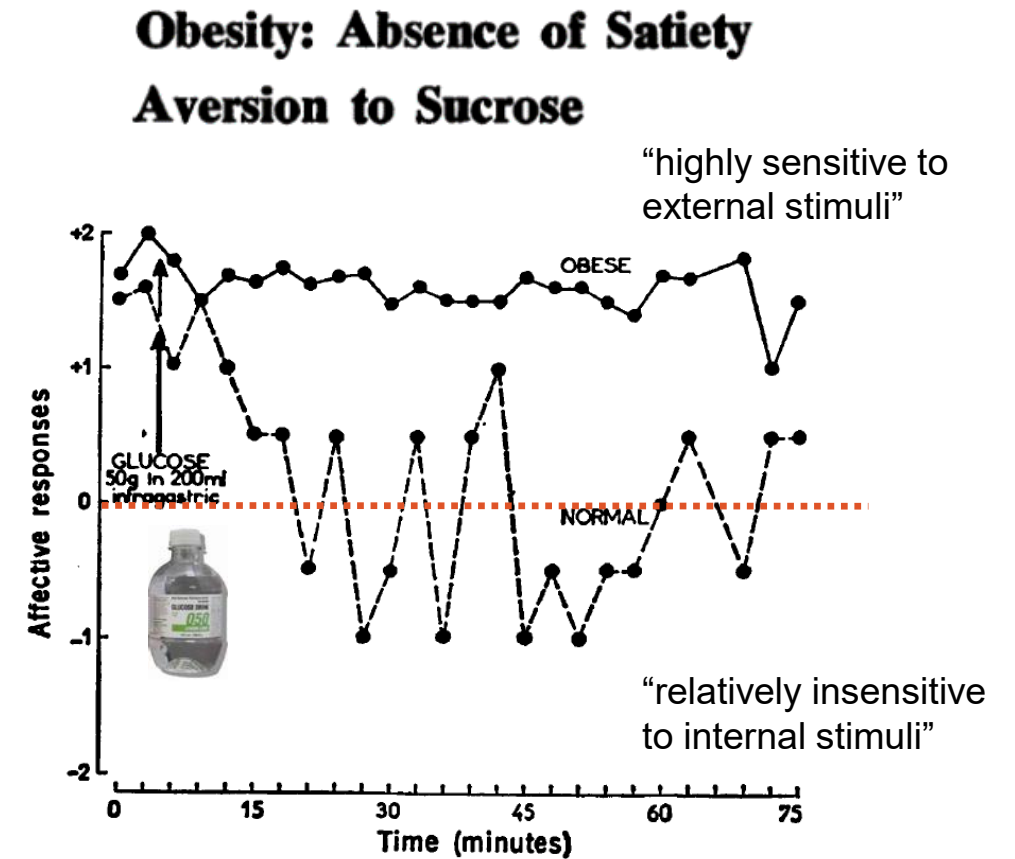
Obesity is not associated with changes in perceived sweetness of sucrose or sucrose preferences



Compared to lean peers, women with obesity perceive more pleasure when repeatedly tasting sweetness

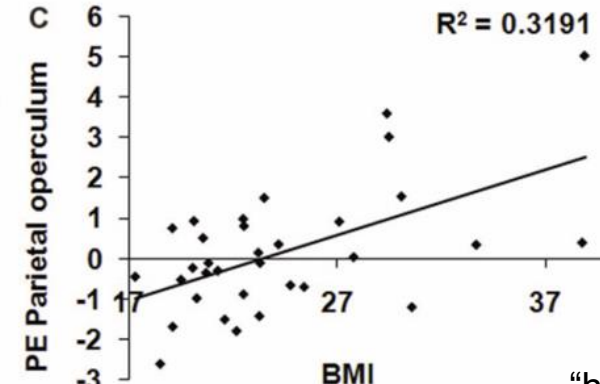
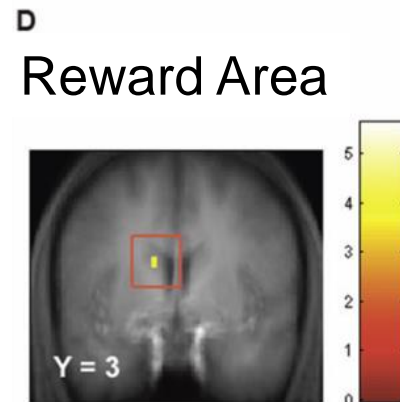
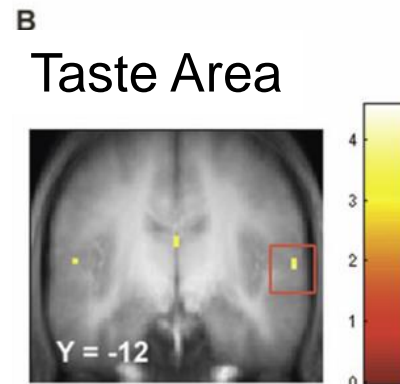
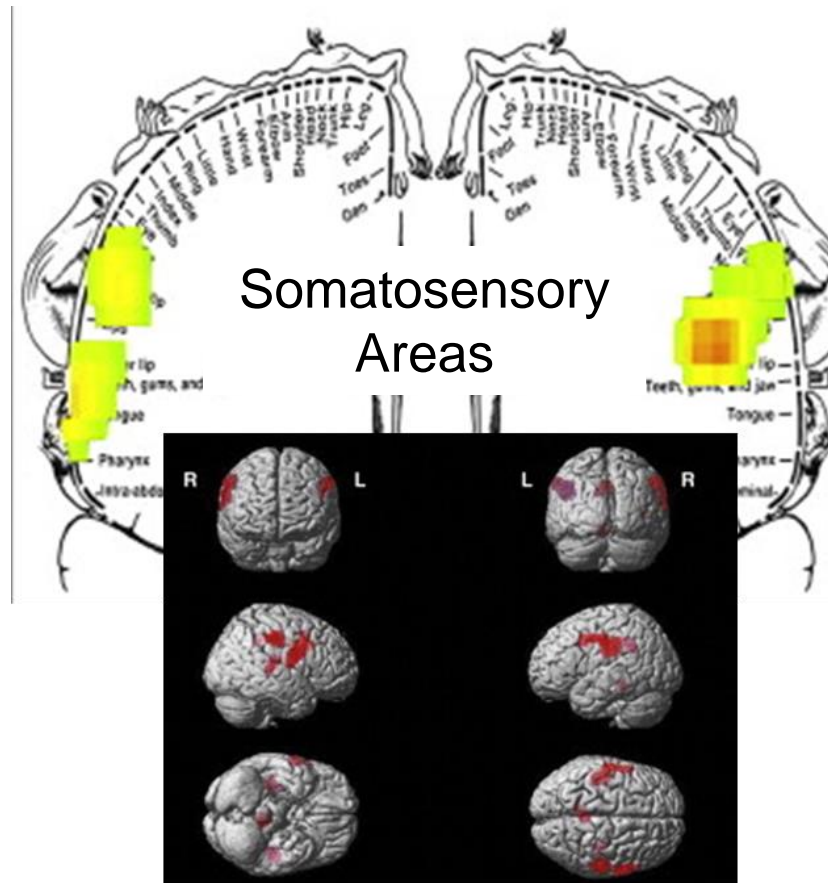


Pepino & Mennella, Appetite, 2012

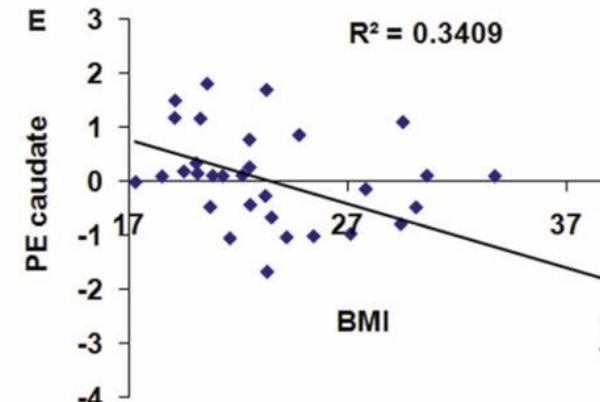


Cabanac & Duclaux, Science 1970

Brain activation to palatable food (and in resting state) in subjects with obesity is different from lean subjects



"highly sensitive to external stimuli"



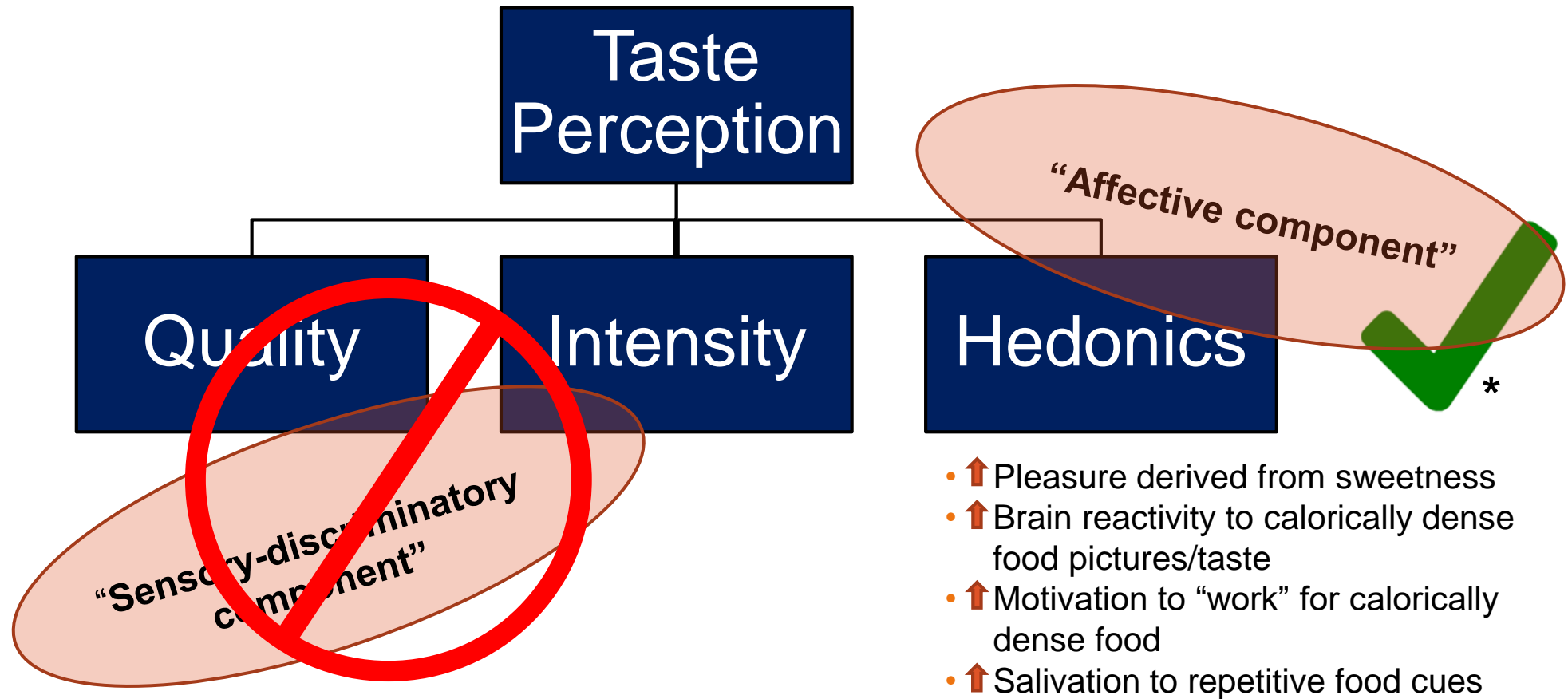
"relatively insensitive to internal stimuli"



Wang et al., Neuroreport, 2002

Stice et al., J Abnorm. Psychol. 2008

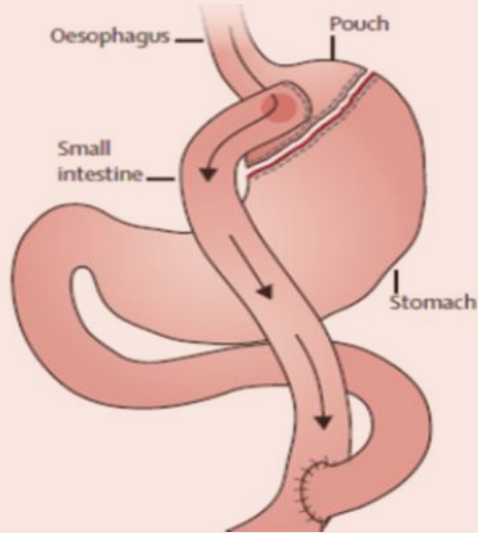
Summary (1): Obesity and taste perception



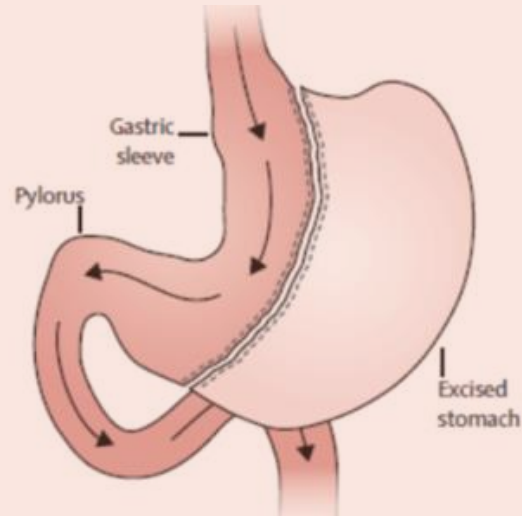
(*Consistent with: Epstein et al., 1996; Wang et al., 2002; Stice et al., 2008; Epstein et al., 2008; DelParigi et al., 2004)

Bariatric surgery and taste perception

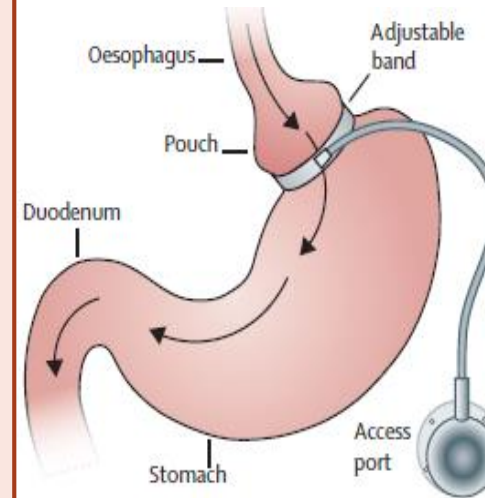
Roux-en-Y gastric bypass (RYGB)



Sleeve gastrectomy (SG)

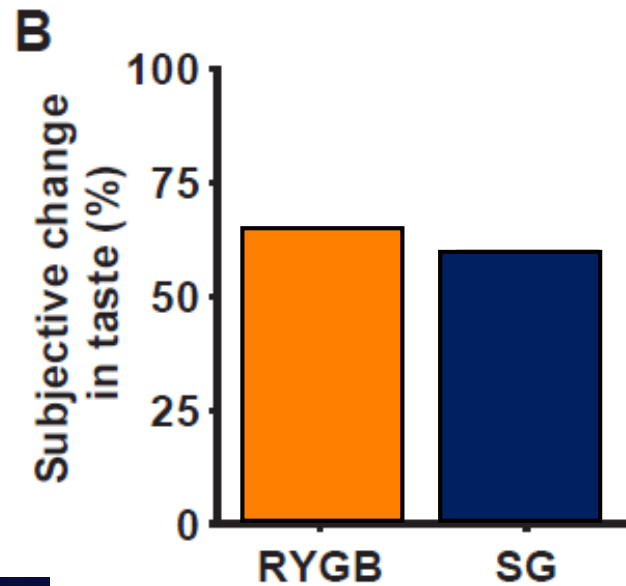


Laparoscopic Gastric banding (LAGB)

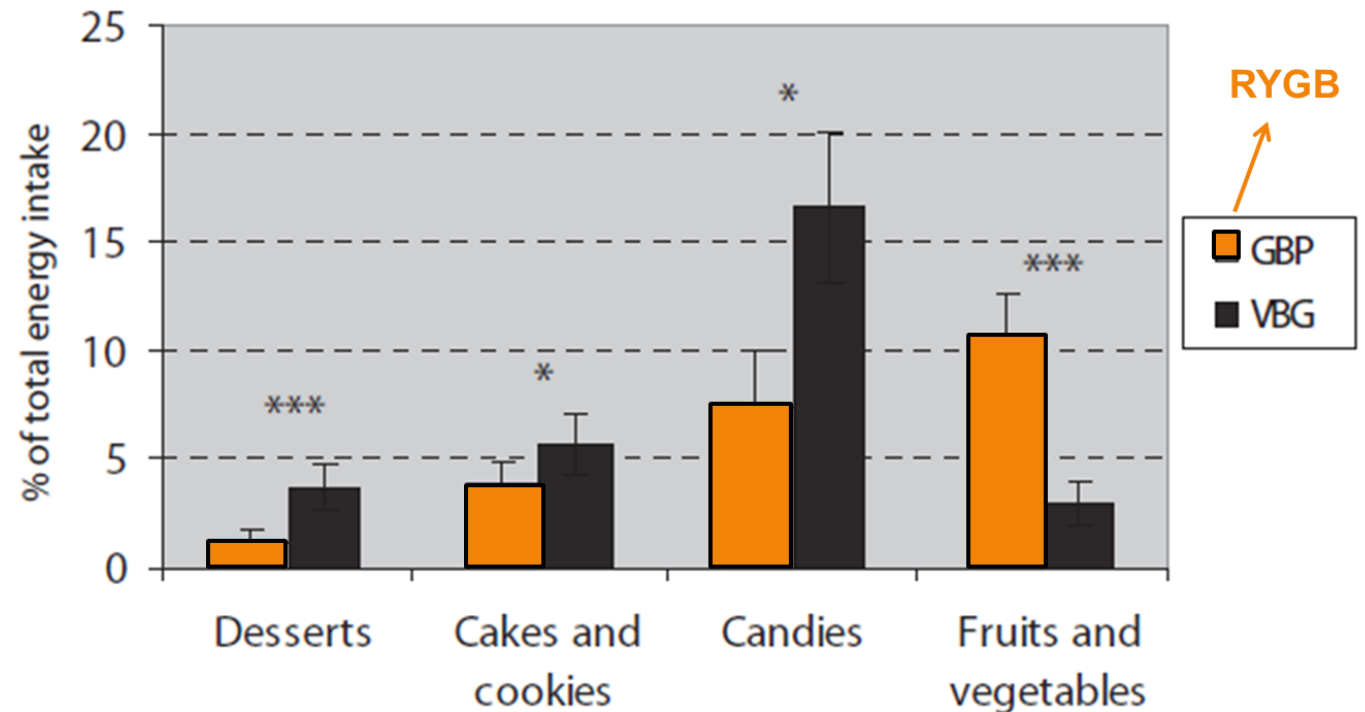


- People lose ~30% body weight, ~60-70% excess body weight and keep it off in the long term (Chang et al., JAMA Surgery, 2014)

Following RYGB and SG, the majority of patients report changes in “taste”



Makaronidis et al., Appetite, 2016



Pre-clinical data: Sclafani et al., Physiol. & Behav. 1985; Hajnal et al., AJPGLP, 2010; Shin et al., IJO, 2011; Berthoud et al., Ann N Y Acad Sci, 2012; Mathes et al., AJPREG 2015

Olbers et al., Annals of Surg 2006

Studies on RYGB and taste sensitivity

Study	Subjects	Methods	Finding
Scruggs et al., Obes Surg, 1994	6 before-after RYGB 10 lean	Taste thresholds	Increased bitter and sour sensitivity after RYGB
Burge et al., J Am Diet Assoc, 1995	14 before - after RYGB 4 in very-low- calorie diets	Taste thresholds	Increased sweet, sensitivity after RYGB
Bueter et al., Physiol Behav, 2011	9 before-after RYGB 9 lean	Taste thresholds	Increased sweet sensitivity after RYGB



Studies on SG and taste sensitivity

Study	Subjects	Methods	Finding
El Labban et al., Nutrition, 2016	9 RYGB; 12 SG (post surgery)	Detection thresholds Sucrose acceptability	~ sweetness, saltiness, bitterness sensitivity (sourness < in RYGB) ~ sucrose acceptability
Altun et al., Ann Otol, Rhin & Laryng., 2016	52 SG (pre-, 1m & 3 m post- surgery)	Taste strip test	Improvement in taste acuity

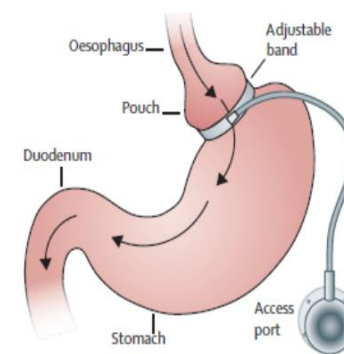
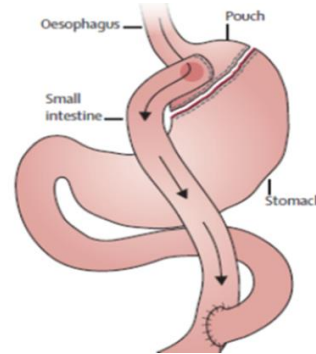
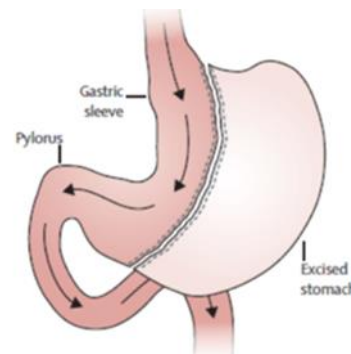
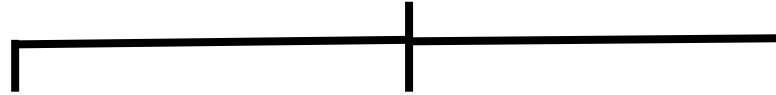


Study Design

20-70 year old scheduled to undergo bariatric surgery



Taste Test + Eating Behavior (3 separate visits)



Individual supervised weight management
program (20% weight loss)



6 to 12 months

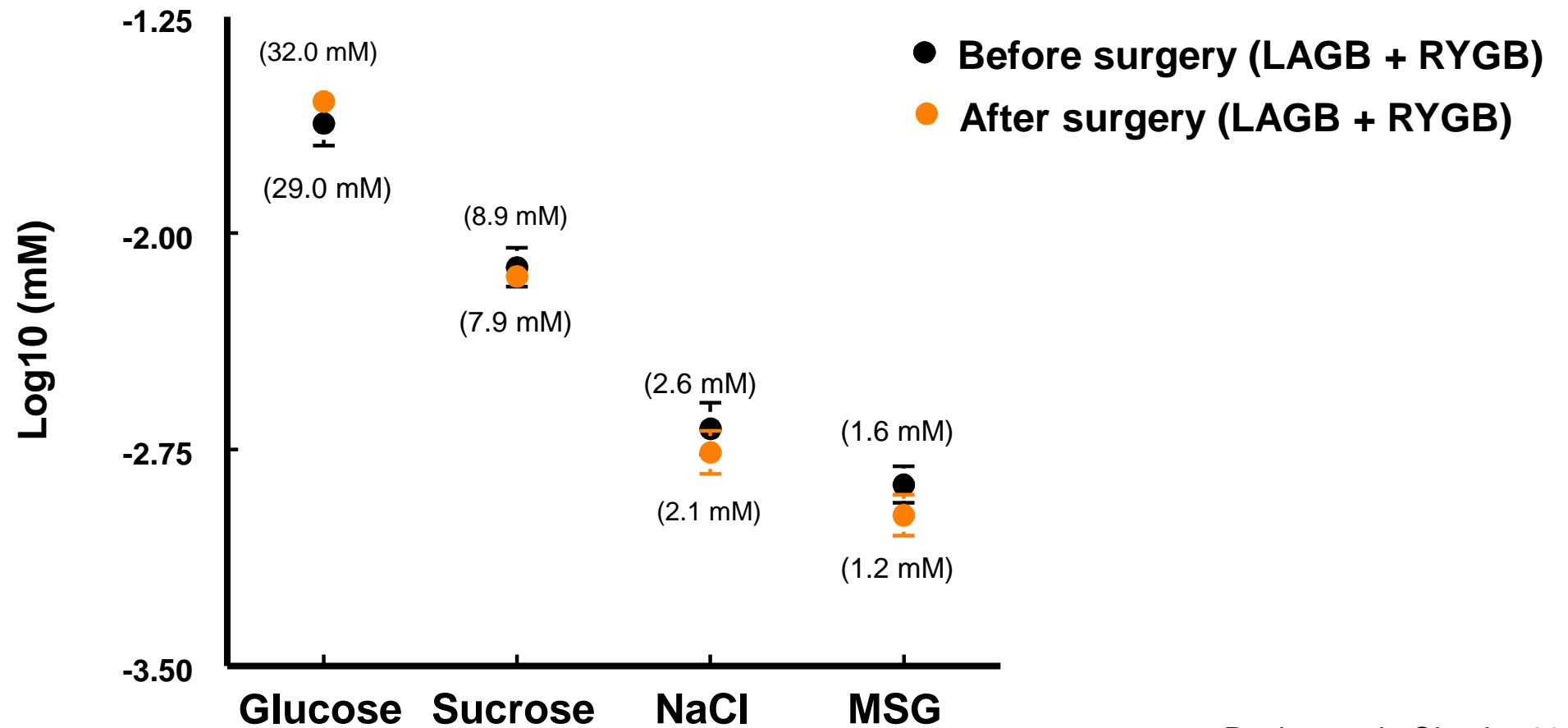
Taste Test + Eating Behavior (3 separate visits)

Nance et al., Nutrients, 2017

Pepino et al., Obesity, 2014



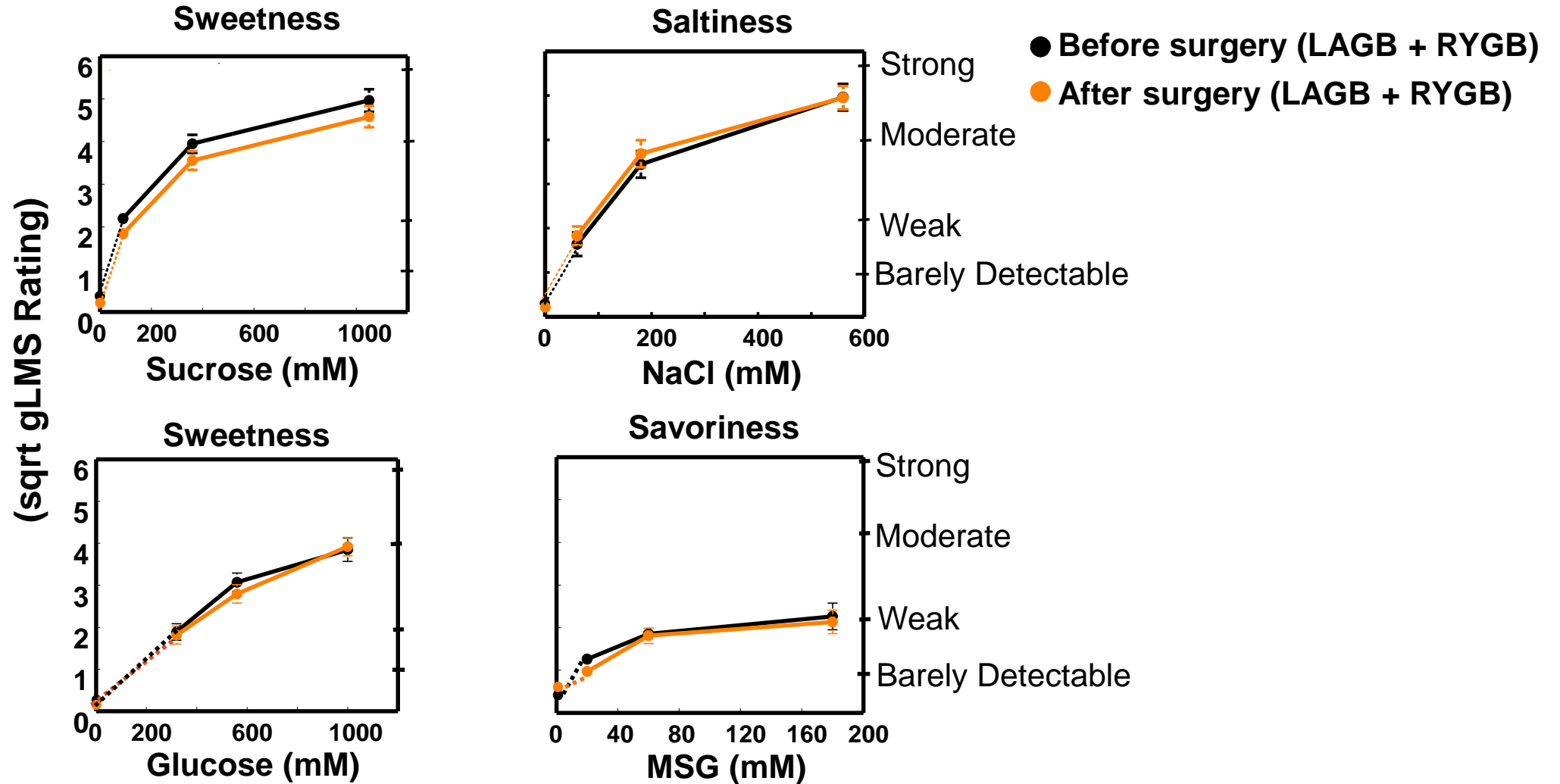
Taste detection thresholds: unchanged



Pepino et al., Obesity, 2014
Nance et al., Nutrients, 2017



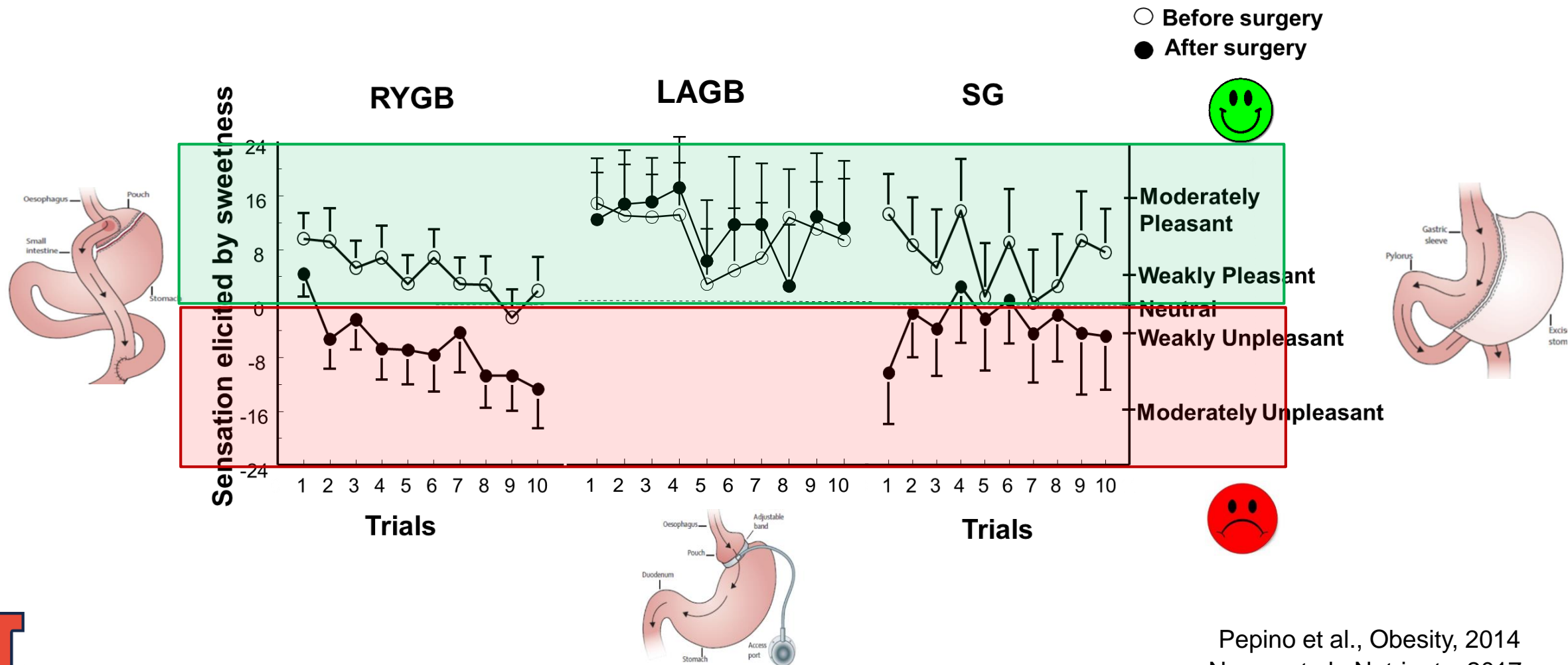
Taste intensity remained unchanged



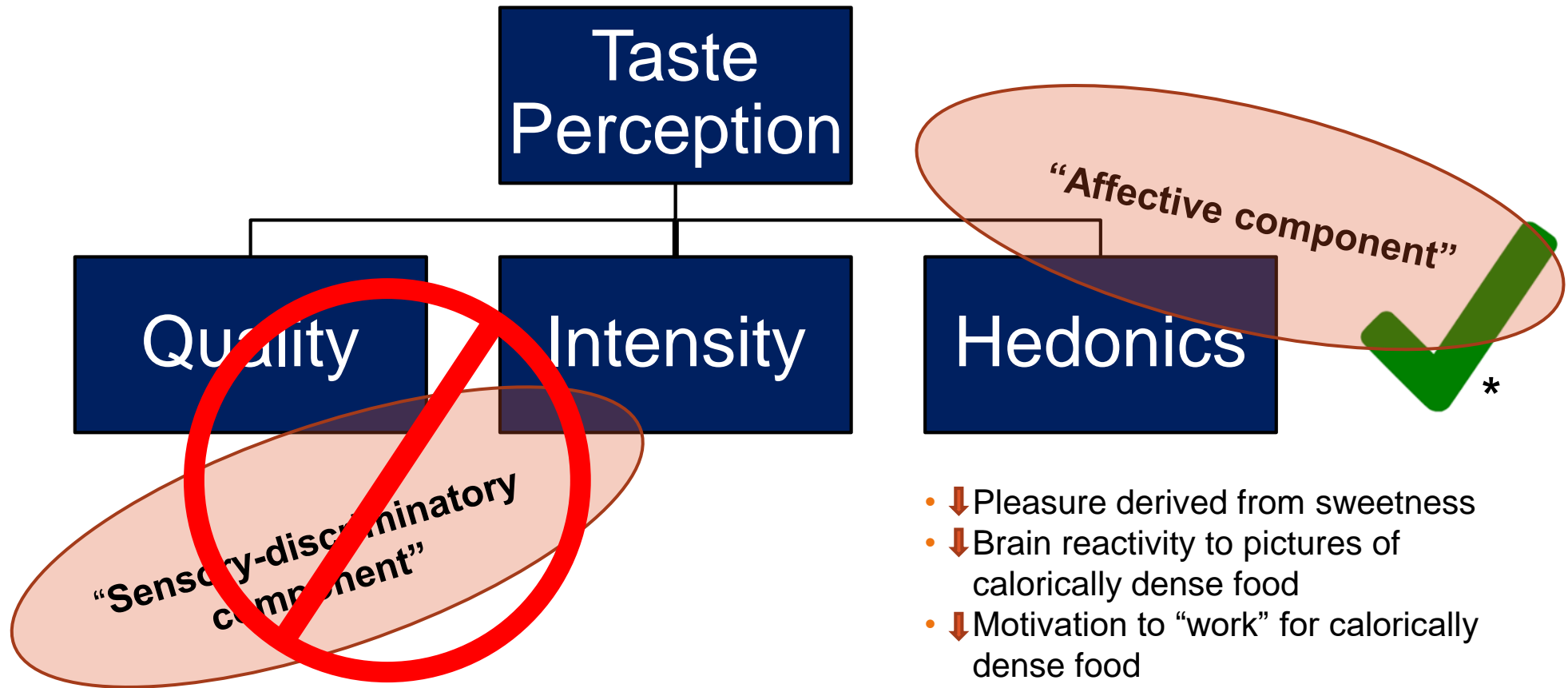
Pepino et al., Obesity, 2014; Nance et al., Nutrients, 2017; Consistent with Hubert et al., Nutrients, 2019



Sweet taste pleasantness decreased after both SG and RYGB but not after LAGB



Summary (II): Metabolic surgery and taste perception



(*Consistent with: Ochner et al., Ann Surg, 2011; Miras et al., AMJCN, 2012; Scholtz et al., Gut, 2013; Goldstone et al., JCEM, 2016; Hubert et al., Nutrients 2019)

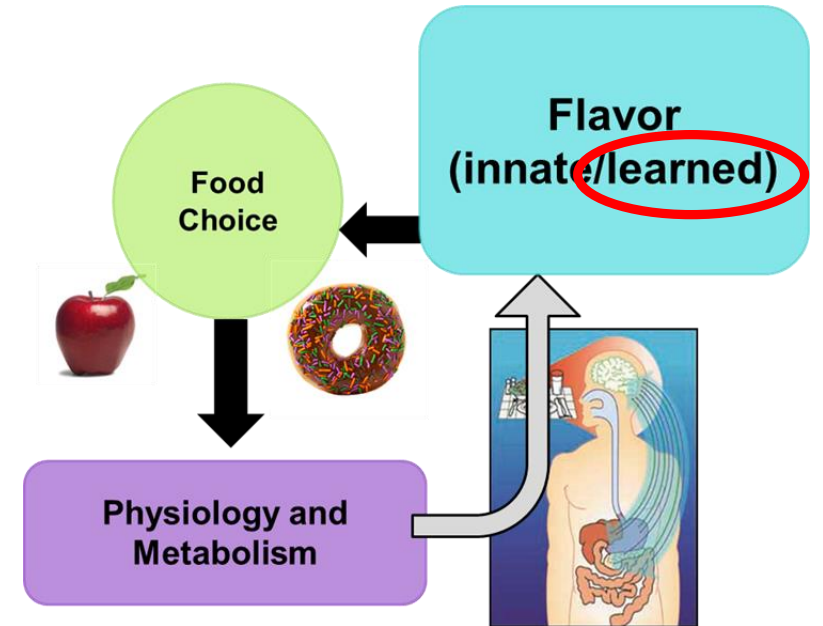
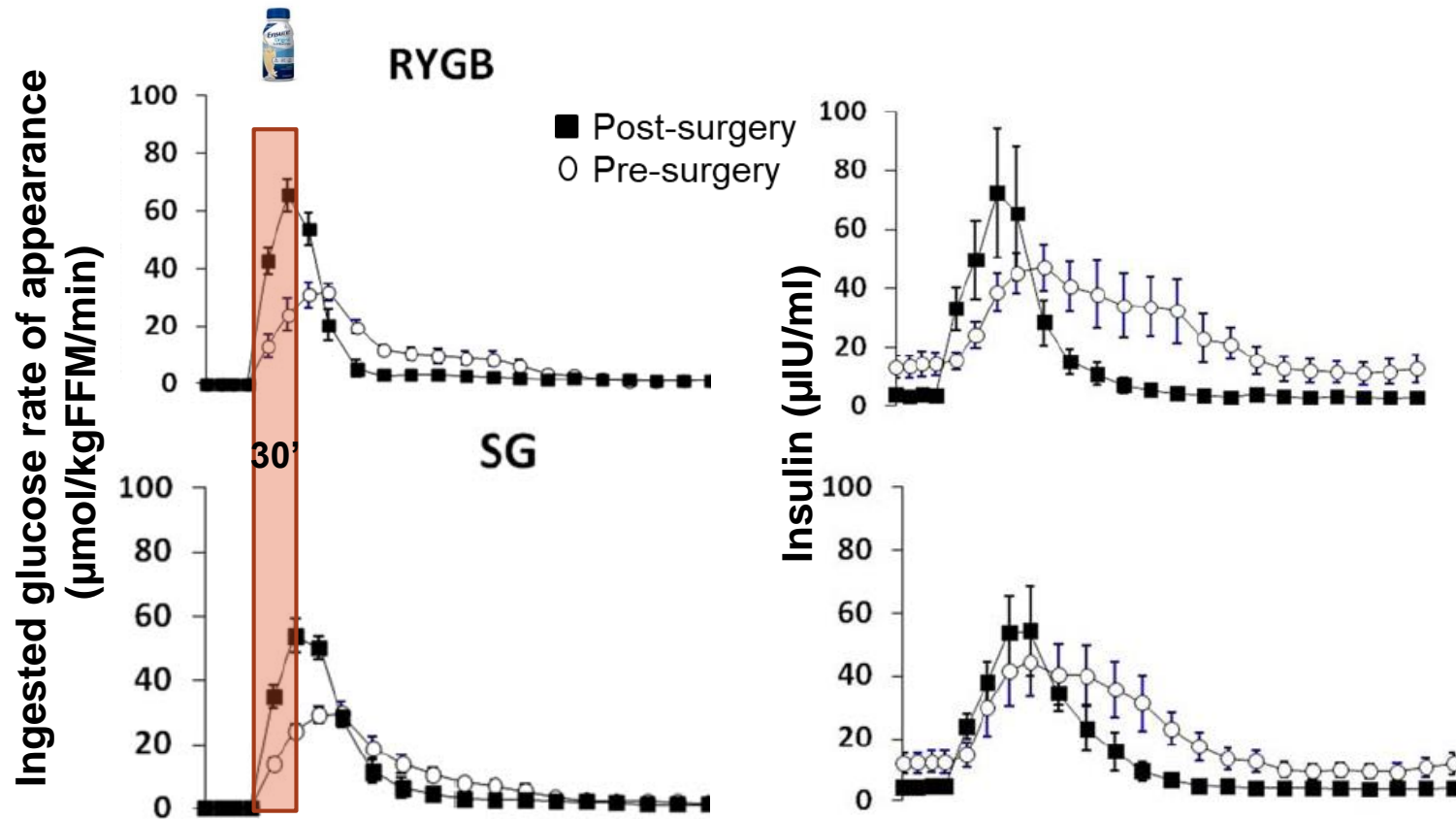
Future studies

- Patients report dramatic changes in “taste” perception: changes in “flavor” perception? Retronasal smell? Texture? Fat sensory perception?
- Do the observed changes in the affective component of sweetness last beyond the first-year post surgery? Can this sweetness response explain variation in weight-loss/regain trajectories?
- **Potential mechanisms?**
Changes in gut-brain nutrient signaling



Potential mechanisms

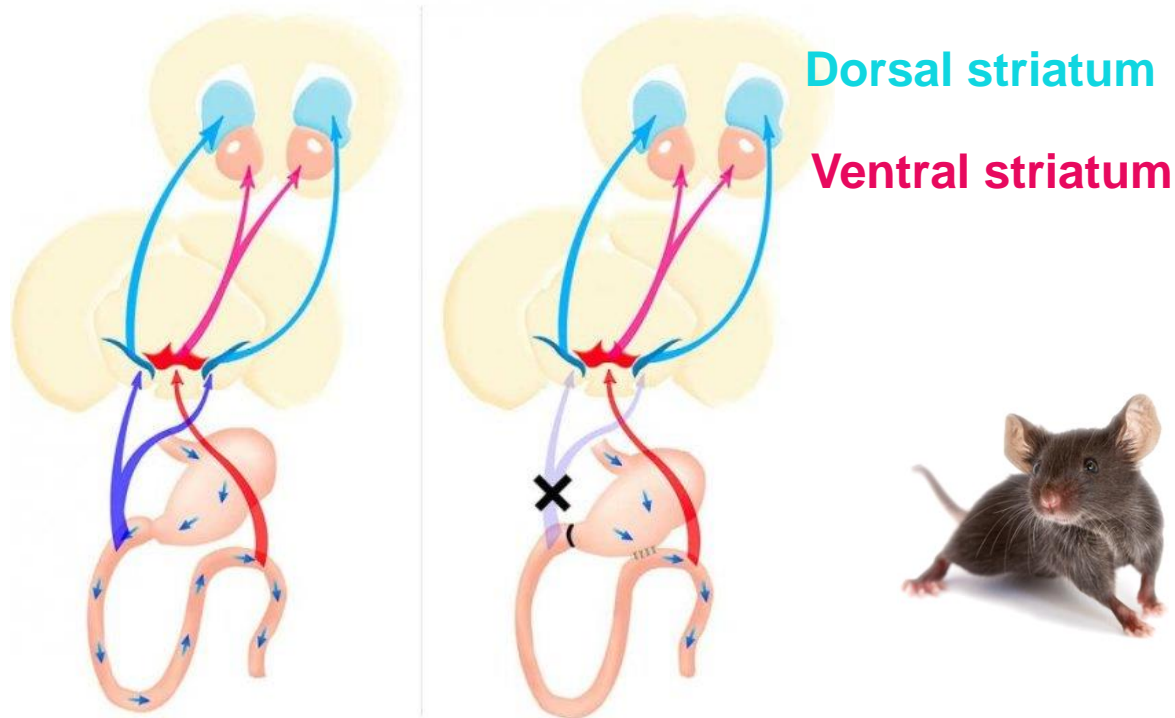
- **Enhanced conditioned satiety?** (Asarian and Geary, Appetite 2019)
- **Condition avoidance?** (Mathes et al., AJPR 2015)



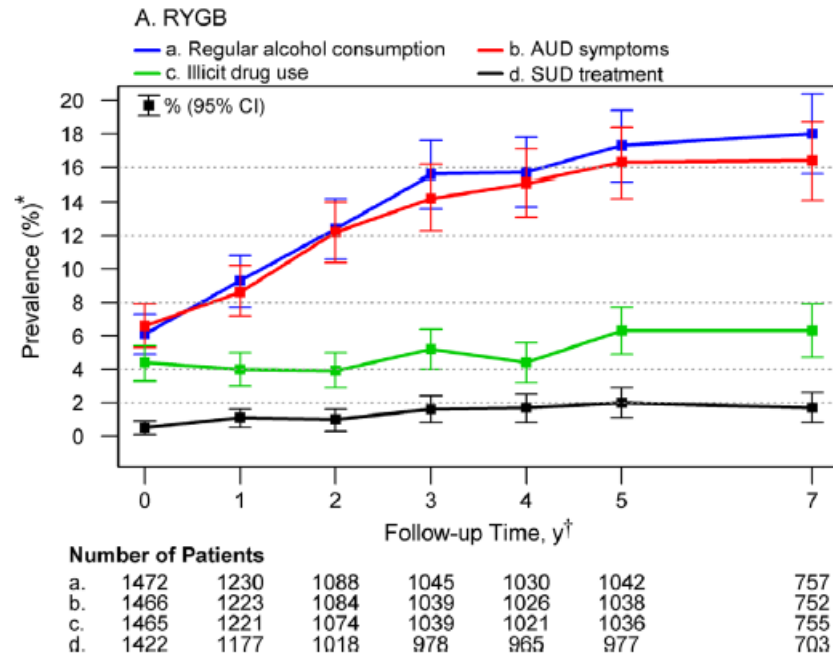
Potential mechanisms (II)

- Decreased “**appetition**”?
Preclinical data suggest the gastrointestinal rerouting plays a critical role for sugar-induced dopamine release in dorsal striatum (Han et al., Cell Metabolism, 2016)

“Intestinal sugar sensing has an appetite-stimulating action that enhances preferences for sweets” (Sclafani, Cell Metab. 2016)



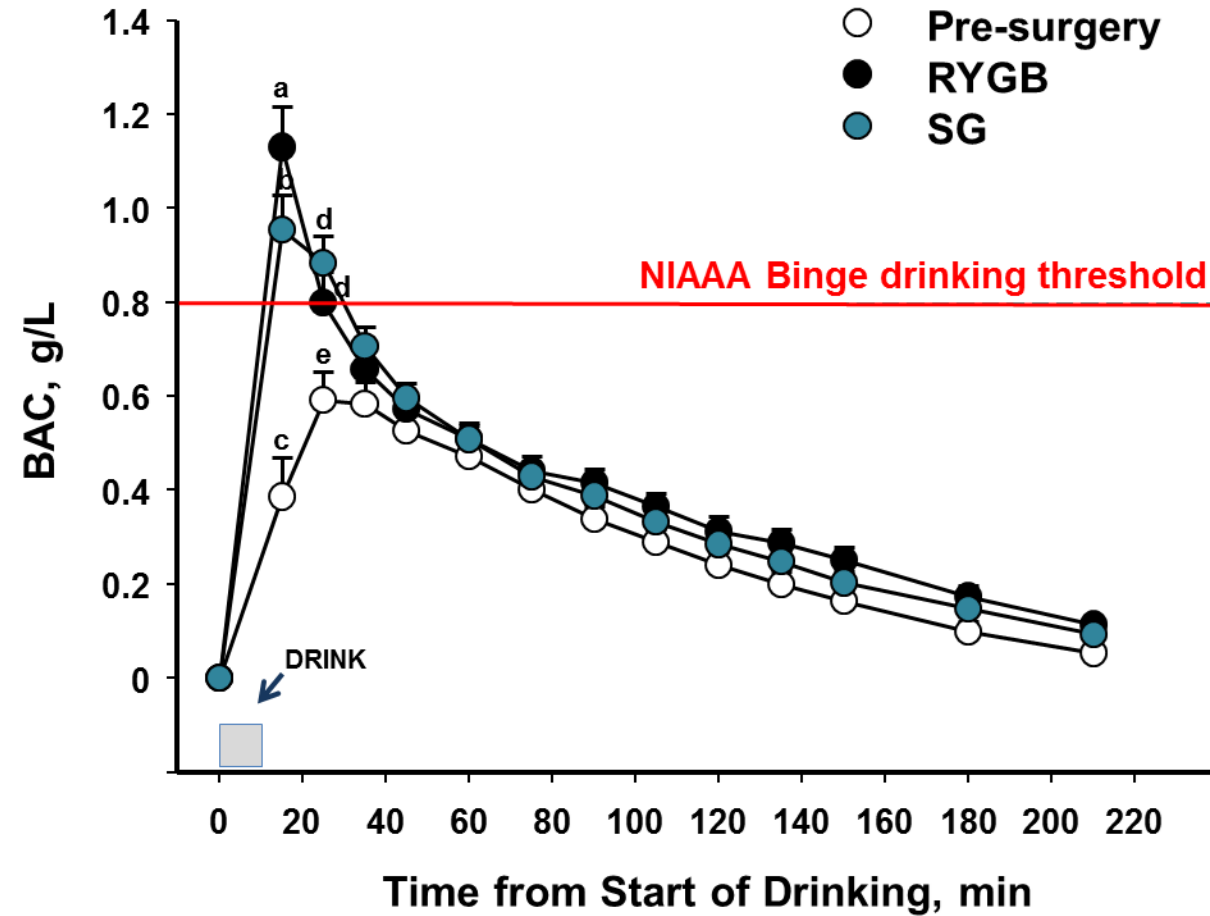
The dark side of metabolic surgeries



- ❑ 2-fold increase in likelihood to develop an alcohol use disorder (AUD) after RYGB compared to banding procedures (King et al., 2012, JAMA; Ostlund et al., JAMA Surg, 2013, King et al., SOARD 2017).
- ❑ Similar prevalence of AUD following SG and RYGB (Ibrahim, et al., Surg Endosc 2018).

W. King et al. / Surgery for Obesity and Related Diseases ■ (2017)

SG and RYGB convert 2 drinks to ~4



Thanks

Pepino Lab



Carle Foundation Hospital

- Blair Rowitz
- Christine Canfield

Belén Acevedo

Raul Alfaro Leiva

Rafael Troconis

Clara Salame

Sara Petty

Molly Black

Undergraduates

Ying Yang

Jennifer Zeng

Daphne Vahlenkamp

Katie O'Hara

Alumni

Alex Nichol

Katie Nance

Washington University

- Samuel Klein
- Kathleen Bucholz
- Chris Eagon
- Bruce Patterson
- Tamara Hershey

Funding



NIAAA (R01 AA024103-02)



Hatch Project # 698-921

