

Genetic variants in selenoprotein genes modulate biomarkers of selenium status in 1 response to Brazil nut supplementation (the SU.BRA.NUT study) 2

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25 Abstract

26 Background: The beneficial effects of selenium (Se) to human health are exerted by 27 selenoproteins, which can be quantified in blood and used as biomarkers of Se status. 28 Different responses of Se biomarkers after supplementation with selenomethionine and 29 sodium selenite have been observed and some of them could be due to genetic 30 polymorphisms, mainly single nucleotide polymorphisms (SNPs). Brazil nuts are 31 known to be the richest natural source of Se. Objective: Investigate how genetic 32 variations in selenoprotein genes modulate biomarkers of Se status in response to Brazil 33 nut supplementation. Methods: The SU.BRA.NUT study was a four month 34 interventional trial which involved healthy volunteers of both genders, selected in 35 University of Sao Paulo. The supplementation was done with one Brazil nut a day for 8 36 weeks, followed by 8 weeks of washout. Blood samples were collected at 5 time points: 37 baseline, 4 and 8 weeks of supplementation and 4 and 8 weeks of washout for analysis 38 of five biomarkers of Se status – erythrocyte GPx1 (Glutathione Peroxidase 1) activity, plasma GPx3 activity, plasma Se, erythrocyte Se, and plasma selenoprotein P. The gene 39 40 expression of GPX1, SELENOP, SELENOF and SELENOS was done before and after 8 41 weeks of supplementation. The volunteers were genotyped for SNPs in GPX1 42 (rs1050450, rs3811699 and rs1800699), GPX4 (rs713041), SELENOP (rs3877899 and 43 rs7579), SELENOF (rs5845) and SELENOS (rs34713741). Results: A total of 130 44 volunteers finished the protocol. The concentrations of four biomarkers of Se status 45 increased significantly after 4 and 8 weeks of supplementation, being modulated by 46 gender. In addition, erythrocyte GPx1 activity was associated with rs1050450, rs713041 47 and rs5845. Plasma Se was associated with rs7579 and selenoprotein P with plasma Se 48 at baseline. Nut supplementation significantly increased GPX1 mRNA expression only 49 in subjects with CC genotype at rs1050450. SELENOP mRNA expression was

50	significantly lower in subjects with GG genotype at rs7579 before and after
51	supplementation. Conclusion: Genetic variations in GPX1 and SELENOP genes are
52	associated with different responses of molecular and biochemical biomarkers of Se
53	status after Brazil nut supplementation in healthy Brazilians. The SU.BRA.NUT study
54	was registred at www.clinicaltrials.gov as NCT 03111355.
55	Keywords: Glutathione Peroxidase, SNPs, selenium, polymorphisms, nutrigenetics
56	Abbreviations
57	Se, Selenium; Sec, selenocysteine; SNP, single nucleotide polymorphisms; GPx,
58	glutathione peroxidase enzyme; GPX1, cytosolic glutathione peroxidase gene or
59	erythrocyte glutathione peroxidase gene ; GPX3, plasma glutathione peroxidase gene ;
60	GPX4, phospholipid glutathione peroxidase gene; SELENOP, Selenoprotein P gene;
61	SELENOS, Selenoprotein S gene; SELENOF, Selenoprotein 15 gene; SePP,
62	Selenoprotein P protein; SU.BRA.NUT, Supplementation with Brazil Nuts study.
63	

64 Funding source

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69

70 INTRODUCTION

71 The regular intake of nuts has been proposed to decrease risk for chronic diseases such as cancer, cardiovascular disease and type 2 diabetes ¹⁻⁴. Brazil nuts (*Bertholletia* 72 73 excelsa, family Lecythidaceae) are known to be the richest source of selenium (Se), an 74 essential micronutrient for human health. The main form of Se in Brazil nuts are selenomethionine⁵. Se is incorporated as the amino acid selenocysteine (Sec) during 75 76 translation into 25 selenoproteins encoded by the human genome, many of which show 77 a wide range of functions, including antioxidant defense, redox function, thyroid hormone metabolism, immune function, reproduction and fertility ^{6,7}. 78 79 Low Se status has been associated with increased risk for several diseases, such 80 as cancer, cardiovascular disease, viral infections, male infertility and inflammatory disorders ⁷. Potentially, genetic variations could modulate this risk by affecting 81 responses to Se intake⁸. Several studies have demonstrated that polymorphisms in 82 genes encoding selenoproteins have functional consequences⁹. For instance, the 83 84 rs1050450 (Pro198Leu) in GPX1 (Glutathione Peroxidase 1) gene was associated with lower erythrocyte GPx1 activity ^{10,11} and lower plasma Se in humans ¹². Although the 85 86 regulation of selenoproteins expression is mainly during translation, the mRNA 87 expression of selenoproteins, such as SELENOF (Selenoprotein 15), SELENOK and SEPHS1 can be altered by Se status, as shown previously ¹³. Nevertheless, human 88 89 studies have failed to demonstrate an association between Se status and selenoprotein transcripts $^{14-16}$. Only three studies have observed a positive association between Se 90 91 supplementation and increased selenoprotein expression in humans (SELENOF, SELENOK, GPX1 and SELENOP) ^{13,17,18}. 92

Glutathione peroxidase 1 (GPx1) activity is sensitive to alterations in Se status in
 individuals with low to moderate intake ¹⁹. The *GPX1* gene contains a single nucleotide

95 polymorphism (SNP) in the coding region, which causes a Proline to Leucine amino acid change at position 198 (rs1050450)²⁰. This variation has been associated with 96 increased risk for lung, breast, prostate and bladder cancers ^{11,21–23} and has been found 97 to modulate the response to Se supplementation in healthy subjects ^{12,24}. Carriers of the 98 99 minor allele T had lower plasma Se at baseline and after one year of supplementation with selenomethionine they had increased urinary Se excretion ^{12,24}. Glutathione 100 peroxidase 4 (GPx4) is the only GPx that can reduce phospholipid hydroperoxides in 101 cell membranes²⁵. There is a C>T substitution located in the 3'UTR of the GPX4 gene 102 (rs713041) and this variant affects Se incorporation in cell culture models ²⁶ and the 103 response to Se supplementation in healthy adults ²⁷. It was demonstrated that subjects 104 105 with the TT genotype had lower GPx3 activity after 6 weeks of supplementation with 106 sodium selenite and lower GPx4 activity during the washout period. Also, females with 107 the TT genotype had lower GPx1 and TR1 concentration during the supplementation 108 and the washout period 27 .

109 Selenoprotein P (SELENOP) is the major component of blood Se and the key Se transporter in the body ²⁸. Two SNPs with functional consequences are present in this 110 111 gene; one G>A substitution in the coding region causes an amino acid substitution 112 Alanine to Threonine at position 234 of the protein (rs3877899), and the other G>A 113 substitution is located in the 3'UTR, important for Sec insertion (rs7579). Both SNPs modulate the response to Se supplementation in healthy adults⁸. It was demonstrated 114 115 that carriers of the minor allele A for both SNPs had higher SePP concentrations after 116 supplementation. Also, males with the AA genotype for rs7579 had lower GPx3 activity 117 after supplementation and during the washout period compared with males with the GG genotype⁸. Selenoprotein S (*SELENOS*) is an endoplasmic reticulum (ER) 118 119 selenoprotein involved in protecting ER from stress caused by misfolded proteins²⁹. A

120 C>T substitution located in the promoter region of the gene (rs34713741) has been associated with increased risk for rectal cancer ³⁰. Selenoprotein 15 (SELENOF) is 121 another selenoprotein involved in maintaining ER integrity³¹. A SNP in the 3'UTR of 122 123 this gene, a G>A substitution in position 1125 (rs5845), has been associated with increased risk for rectal cancer ³⁰ and lung cancer ³². 124 125 Most of the studies investigating the effect of Se supplementation on biomarkers 126 of Se status were conducted using different chemical forms of selenium in different concentrations^{8,12,27,33,34}. The studies with Brazil nut supplementation were conducted 127 128 only in specific groups of the population and considered mainly three SNPS in 129 selenoproteins (rs1050450, rs3877899 and rs7579) genes with just three biomarkers 130 evaluated before and after supplementation. No study was conducted in healthy 131 Brazilians using other functional SNPs in selenoproteins, other plasma biomarkers and 132 evaluated the washout period to investigate how the biomarkers return after 133 supplementation withdraw. Therefore, this study was conducted to evaluate if the six 134 functional polymorphisms in selenoprotein genes modulate the response of biomarkers 135 of Se status, on both molecular and biochemical levels, during supplementation with 136 Brazil nuts and the washout period in healthy Brazilians.

137

138 SUBJECT AND METHODS

139 Study population and supplementation protocol

140 The present study involved 130 unrelated healthy volunteers selected at

141 University of Sao Paulo who took part of the Supplementation with Brazil Nuts study

142 (SU.BRA.NUT) described previously ³⁵. Subjects were excluded if they were pregnant,

143 younger than 20y and older than 60y taking multivitamins and mineral supplements,

144 anti-inflammatory drugs, with excessive alcohol consumption, athletes, with chronic

145 diseases such as cancer, diabetes, and cardiovascular disease and obese (BMI > 35). At 146 the beginning of the study (baseline), 20 mL venous blood samples were drawn and the 147 volunteers received. plastic bottles with nuts enough for four weeks. They were oriented 148 to take a daily supplement of one Brazil nut a day with a meal. At the end of four weeks 149 of supplementation, they returned and received another plastic bottle with nuts for the 150 last four weeks. At the end of four (4-week-intervention) and eight weeks (8-week 151 intervention) of supplementation, another 20 mL blood sample was taken, and then two 152 more blood samples were taken after a further four (4-week washout) and eight weeks 153 without intervention (8-week washout). Volunteers were asked to complete a control 154 calendar and mark with an "x" when they consumed each nut throughout the 155 intervention period. Written informed consent was obtained from all volunteers before 156 blood sampling. The protocol was approved by Faculty of Pharmaceutical Sciences 157 Ethical Committee (CAE: 00961112.3.0000.0067) and was conducted according to the 158 Helsinki Declaration. The SU.BRA.NUT study was registred at clinicaltrials.gov as 159 NCT 03111355.

160 Composition and Se content of Brazil nuts

161 The Se content of a random sample of Brazil nuts representative of the four 162 batches used in the study was analyzed using hydride generation flame atomic 163 absorption spectrometry as described previously ³⁶ and the centesimal composition was 164 done as proposed by the Association of Official Analytical Chemists ³⁷.

165

166 Sample collection

Fasting blood samples (20 mL) were drawn by venipuncture into four 5 mL
EDTA tubes for quantification of the five biomarkers of Se status. An aliquot of 1.5 mL
of whole blood from one EDTA tube was stored into 1,5mL sterile plastic tubes used

170 for DNA extraction and subsequent genotyping, and an aliquot of 500 µL of whole 171 blood from the same EDTA tube was stored into 1,5mL sterile plastic tubes used for 172 RNA extraction and subsequent gene expression. Another 5mL of blood were collected 173 in a tube without anticoagulant to obtain serum for determination of the lipid profile which was described previously ³⁵. The total volume of blood samples collected was 174 175 25mL. Plasma was separated by centrifugation at 3,000 rpm for 15 min at 4 °C. The 176 erythrocyte pellet was washed three times with 5 mL sterile 9 g/L NaCl solution, slowly 177 mixed by inversion, and centrifuged at 10,000 rpm for 10 min (Eppendorf, C5408) at 4 178 °C, and the supernatant fluid was discarded. Aliquots of whole blood, plasma and 179 erythrocytes were frozen at -80 °C in sterile, demineralized tubes until the analyses 180 were performed.

181 **Biomarkers of Se status**

182 Plasma Se and erythrocyte Se concentrations were determined by inductively 183 coupled plasma mass spectrometry (ICP-MS, Perkin Elmer DRC II) as described 184 previously ³⁸. Samples were diluted 1:50 into a 15 mL polypropylene tube with a 185 solution containing 0.01% (v/v) Triton X-100, 0.5% (v/v) nitric acid and 10 µg/L of 186 each one of the internal standards. The certified reference material Seronorm Trace 187 Elements Serum (SERO AS, Billingstad, Norway) was used for the quality control 188 assessment. Erythrocyte GPx activity was determined using commercial kit (Randox, 189 Labtest, Minas Gerais, Brazil) according to manufacturer's instructions. The enzyme 190 activity was evaluated spectrophotometrically at 37 °C at 340 nm using an automated 191 biochemical analyzer Labmax 240 (Labtest, Minas Gerais, Brazil). Hemoglobin (Hb) 192 concentration was also determined spectrophotometrically in order to express 193 erythrocyte GPx activity in U/g Hb. Plasma GPx (GPx3) activity was calculated by the method of Paglia and Valentine (1967), as modified previously ³⁹, using hydrogen 194

195 peroxide as a substrate. One unit of GPx3 activity is defined as that which oxidizes 1 196 umol NADPH/min. SePP concentration was determined in plasma using an in-house SePP ELISA (Enzyme Liked Immunosorbent Assay) assays as described previously ⁴⁰ 197 198 using a 96-well microplate reader (FLUOstar Omega microplate reader, BMG Labtech, 199 Ortenberg, Germany). Each sample was analyzed in duplicate with aliquots of purified 200 SePP incubated alongside (range 0.25–16 ng/well) acting as the standard curve. A 201 pooled plasma from a previous study conducted at The Rowett Institute was used as a 202 quality control.

203 Genotyping

204 Total genomic DNA was extracted from whole blood using the Purelink 205 Genomic DNA Minikit (Invitrogen, Thermo Scientific, CA, USA) and the final 206 concentration and purity were measured by spectrophotometry at 260 and 280 nm 207 (NanoDrop ND 1000 Thermo Scientific, Wilmington, DE, USA). Genotyping was 208 carried out by real-time PCR using the StepOne Plus Real-Time system with Taqman 209 SNP Genotyping Assays (Applied Biosystems, Thermo Scientific, Foster City, CA, 210 USA). The allelic discrimination was obtained by performing an endpoint read. The 211 SNPs selected were located in GPX1 gene (rs1050450, rs3811699 and rs1800668), 212 GPX4 gene (rs713041), SELENOP gene (rs3877899 and rs7579), SELENOS gene 213 (rs34713741) and SELENOF gene (rs5845).

214

4 Selenoprotein gene expression

- 215 Total RNA was extracted from whole blood using the Ribopure Blood Kit
- 216 (Ambion, Thermo Scientific, Austin, TX, USA) and final concentration was measured
- 217 in a NanoDrop ND 1000 spectrophotometer (NanoDrop ND 1000, Thermo Scientific,
- 218 Wilmington, DE, USA). cDNA was synthesized by reverse transcription PCR using the
- 219 High Capacity Reverse Transcriptase kit (Applied Biosystems, Thermo Scientific,

220 Foster City, CA, USA). Analysis of gene expression was performed by real-time quantitative PCR (qPCR) in the QuantStudio 12K Real Time PCR System using 221 222 Taqman Gene expression Assays for GPX1, SELENOP, SELENOS and SELENOF 223 (Applied Biosystems, Thermo Scientific, Foster City, CA, USA). GPX4 mRNA 224 expression was not evaluated because the literature states that this protein is ranked high 225 in the hierarchy of selenoprotein expression with no predictable changes in gene 226 expression after supplementation. Glyceraldehyde phosphate dehydrogenase (GAPDH) 227 mRNA expression was used as a reference gene. Relative gene expression was calculated based on the $2^{-\Delta\Delta Cq}$ method ⁴¹. 228

229

230 Statistical Analysis

231 Continuous variables were tested for normality using the Kolmogorov–Smirnov 232 test. The data were presented as geometric means (CI 95%). Concentrations of the five 233 biomarkers were compared in the different time points using ANOVA repeated 234 measures or Friedman's test. The percentage of variation for each biomarker was 235 calculated considering the time point immediate before, for example, the percentage of 236 variation for GPx1 activity at 4weeks of nuts was calculated using the formula: 237 (GPx1 activity 4w) – (GPx1 activity baseline) * 100

(GPx1 activity 4w) – (GPx1 activity baseline) * 100

The variables used for multiple linear regressions in table 5 were done considering only 3 time points: baseline, 8 weeks of nuts and 8 weeks of washout. Therefore, change 1 was referring to the entire supplementation period (baseline until 8 weeks of nuts) and change 2 to the washout period (8 weeks of nuts until 8 weeks of washout. For example the variable "Change1_GPx1" was calculated using the formula: $\frac{(GPx1 \text{ activity 8w}) - (GPx1 \text{ activity baseline}) * 100}{(GPx1 \text{ activity baseline})}$

242 A genetic dominant model was used to evaluate differences in the presence of 243 the rare allele. In this model, individuals with the rare allele were combined together in 244 one category, leaving the common genotype in another category. Multiple linear 245 regression models were created using the biomarkers at each time of intervention as 246 response variables. Age, body fat percentage, gender, plasma Se, erythrocyte Se and six 247 SNPs were included as predictors. Only six SNPs were used because the three SNPs in 248 *GPX1* gene were in linkage disequilibrium with an r = 1 and D'> 0,5. Repeated 249 measures analysis of covariance (ANCOVA) was performed to investigate the effect of 250 the genotypes for SNPs appointed in the linear regression models. The Chi-square test 251 with continuity correction was used to determine whether genotype frequencies 252 followed the Hardy-Weinberg Equilibrium. The haplotype distribution and linkage 253 disequilibrium analysis were done in the software Haploview 4.2. SNPs were 254 considered in linkage disequilibrium when D' > 0.5. Differences were considered 255 significant at P < 0.05. The analyses were performed using the Statistical Package for 256 the Social Sciences software version 17.0 for Windows (SPSS, Chicago, IL, USA) and 257 GraphPad Prism (GraphPad Prism version 5.00 for Windows, GraphPad Software, San 258 Diego, CA, USA).

259 **RESULTS**

A total of 135 adults were enrolled in the study during 2013 and started the supplementation. Of these, 2 females stopped the supplementation complaining of side effects (ex. sickness), leaving 133 subjects that finished the 8 weeks of intervention. Of these 133 volunteers, 2 males withdraw during the first month of washout and one male during the second month, leaving a total of 130 volunteers that finished the entire protocol.

266

267 Characteristics of the volunteers and nut composition

268 The characteristics of the volunteers are summarized in **Table 1**. Mean age was 29.8 ± 9.2 y and mean BMI was 23.3 ± 3.3 kg/m². There was a 100% adherence to the 269 270 supplementation confirmed by the control calendar given at baseline, the empty plastic 271 bottles at the end of supplementation and the increase of three times in plasma Se after 8 272 weeks of supplementation with Brazil nuts. The Se content and centesimal composition 273 of Brazil nuts are shown in Table S1. Four different batches were used during the 274 supplementation. The mean \pm standard deviation for Se content of these four batches 275 was $100.4 \pm 5.3 \,\mu g/g$. The average weight of the nuts ranged from 3g to 4g, therefore 276 each nut provided from 300 µg of Se to 400 µg of Se, which is approximately six times 277 higher than the RDA (Recommended Dietary Allowances) for adults (55µg/d).

278

279 Effect of Brazil nut supplementation on five biomarkers of Se status

The concentrations of the five biomarkers of Se status measured during nut
supplementation and washout period are shown in **Table 2**. GPx1 activity decreased

significantly after 4 weeks of supplementation, increased by 8 weeks of

supplementation (P < 0.001) and remained high during the first 4 weeks of Brazil nut

- withdrawal; it finally decreased after 8 weeks washout (P = 0.004). Erythrocyte Se
- 285 concentrations increased after 4 and 8 weeks intervention and decreased after 8 weeks
- 286 washout (P < 0.001). There was a significant increase in GPx3 activity after 4 weeks of
- supplementation (P = 0.004). Similarly, plasma Se concentrations increased
- significantly after 4 and 8 weeks of supplementation (P < 0.001). During the washout
- 289 period, there was a sharp decrease in plasma Se compared to 8 weeks of
- Brazil nut intake (P < 0.001). The concentrations of plasma SePP were also increased
- after the supplementation and reduced after nut withdrawal (P = 0.001). The percentage
- 292 of the variation for each biomarker during the supplementation and the washout period
- is shown in **Figure 1**.

294 Genotypes and haplotypes in selenoprotein genes

Genotype and allele frequencies of SNPs in selenoprotein genes are shown in Table 3. 295 296 All SNPs were in Hardy-Weinberg Equilibrium. Haplotype analyses showed evidence 297 of linkage disequilibrium for SNPs in GPX1 gene: rs1050450 x rs1800668 (D'= 1.0 and 298 $r^2 = 0.98$) and rs1050450 x rs3811699 (D'= 1.0 and $r^2 = 1.0$). In fact, in Table 3 the 299 genotypes frequencies of the three SNPs are exactly the same. Only two haplotypes 300 were observed, the common haplotype CCG for rs1050450, 1800668 and rs3811699 301 with a frequency of 74% and the rare haplotype TTA with 25%. Therefore, only 302 rs1050450 was used for further analysis. For the SNPs in the GPX4, SELENOF and 303 SELENOS genes, the frequency of the rare genotypes was between 19% and 8%. No 304 haplotype analysis was performed in those genes because only one SNP was genotyped 305 in each gene. Variables influencing biomarkers of Se status during Brazil nut 306 supplementation and washout period

307	Multiple linear regression models for the five biomarkers of Se status in each time
308	point of the protocol are shown in Table 4. GPx1 activity was associated with
309	rs1050450 after 4 ($P = 0.037$) and 8 weeks ($P = 0.017$) of intervention and with rs5845
310	after 4 weeks ($P = 0.003$) of intervention with both SNPs reducing GPx1 activity. After
311	8 weeks of washout, GPx1 activity was associated with rs5845 in SELENOF, which was
312	lower in the presence of the rare allele A ($P = 0.049$) and with rs713041 in <i>GPX4</i> ,
313	which increased GPx1 activity in individuals carrying the rare allele T ($P = 0.036$). The
314	SNP rs713041 in GPX4 gene was associated with Erythrocyte Se concentrations at
315	baseline, reducing its concentrations in the presence of the rare allele T ($P = 0.038$).
316	Plasma Se concentration was associated with rs7579 in SELENOP ($P = 0.034$)
317	and rs34713741 in SELENOS ($P = 0.038$) after 4 weeks of supplementation, which was
318	lower in the presence of the rare allele for both SNPs. Plasma SePP concentrations
319	were positively associated with plasma Se at baseline and GPx3 activity was positively
320	associated with plasma Se after 4 ($P = 0.050$) and 8 weeks ($P = 0.025$) of
321	supplementation, as expected due to the same blood compartment location of both
322	biomarkers (Table 4). A complete table of the biomarkers stratified by all functional
323	SNPs can be seen at Supplementary table 2 (Table S2).
324	Erythrocyte GPx1 activity was stratified by rs1050450, as appointed in the
325	multivariate regression analysis (Figure 2). During the intervention, GPx1 activity was
326	lower in carriers of the rare allele T (CT+TT), almost reaching statistical significance at
327	4 weeks of supplementation ($P = 0.057$, Figure 2a). SePP concentrations were stratified
328	by rs7579 (Figure 2b). At baseline, SePP concentrations were higher for carriers of the
329	rare allele A, when the interaction with gender was considered ($P = 0.048$).

330 The percentage of variation on the concentrations of biomarkers of Se status is331 shown in **Table 5**. The difference in GPx1 activity comparing baseline and 8 weeks of

332 supplementation (Change1_GPx1) was associated with rs7579 in SELENOP (P = 0.044) 333 and with rs5845 (P < 0.001), in which the presence of the rare allele increased this 334 difference, meaning that the values were higher for carriers of the rare allele A after 8 335 weeks of supplementation. The difference in Erythrocyte Se concentrations during the 336 supplementation (Changel_ Erythrocyte Se) was associated with rs34713741 in 337 SELENOS (P = 0.010), in which the presence of the rare allele T also increased this 338 difference. BMI and gender had a negative effect on the variation in Erythrocyte Se, in 339 which individuals with higher BMI and females had higher values at baseline. The 340 change in GPx3 activity in response to the supplementation (Change1_ GPx3 activity) 341 was negatively associated with rs5845 in SELENOF (P = 0.014), in which carriers of 342 the rare allele A had higher GPx3 activity at baseline. However, interaction with BMI 343 increased the variation (P = 0.011). The only two variables affecting the variation in 344 Plasma Se were gender and BMI, both having a negative effect. The difference in GPx1 345 activity comparing 8 weeks of washout and 8 weeks of supplementation 346 (Change2_GPx1) was negatively associated with gender, in which females had higher 347 GPx1 activity after 8 weeks of supplementation. However, the interaction with 348 rs713041 had the opposite effect: females carriers of the variant allele T had higher 349 GPx1 activity at 8 weeks of washout. Finally, the difference in SePP concentrations 350 comparing 8 weeks of washout and 8 weeks of supplementation (Change2 SePP) was 351 negatively associated with rs5845 in SELENOF gene, in which carriers of the rare allele 352 A had higher SePP concentrations after supplementation (Table 5).

353

Effect of Brazil nut supplementation on mRNA expression of selenoprotein genes

354 Gene expression of four selenoprotein genes (*GPX1, SELENOP, SELENOS* and 355 *SELENOF*) was analyzed on previously genotyped volunteers before and after 8 weeks

356 of Brazil nut supplementation. The results are shown in Figure 3. GPX1 mRNA

357 expression increased after supplementation in individuals with the CC genotype for 358 rs1050450 (P = 0.026) while it did not change for carriers of the T allele (Figure 3a). 359 Consequently, after Brazil nut supplementation, GPX1 mRNA expression was lower in 360 individuals with the CT and TT genotypes compared to the CC group (P < 0.05). 361 SELENOP mRNA expression was higher in carriers of the rare allele A for rs7579 362 either before or after supplementation (Figure 3b, P < 0.05), and nut supplementation 363 did not significantly changed SELENOP mRNA expression whatever the genotype 364 group. No effect of genotypes on SELENOF and SELENOS mRNA expression was 365 observed either before or after the supplementation (Figure 3c and 3d).

366 **DISCUSSION**

367 The influence of genetic variants on the response to Se supplementation have been proposed before ^{8,12,27,34}. Our results not only confirm these earlier observations, 368 369 but also extend them by demonstrating that the rs5845 in SELENOF gene modulated 370 erythrocyte GPx1 activity, the variation of GPx1, GPx3 activity after supplementation 371 and the variation on SePP after nut withdraw. This study is the first to report this 372 unexpected association between rs5845 in SELENOF and Se biomarkers after 373 supplementation with Brazil nuts, the first to use SePP concentrations as a biomarker of 374 Se status in Brazilians and the first to measure all five biomarkers during the washout 375 period. Moreover, this study demonstrated that Brazil nut supplementation was effective 376 in increasing mRNA expression of GPX1 and SELENOP and that this effect was 377 modulated by functional polymorphisms on those genes. 378 It was observed a delayed response of the two erythrocyte biomarkers of Se 379 status to Brazil nut supplementation, with values increasing up to the first four weeks of

the washout period. This apparently slow response could be explained by erythrocytes

having a lifespan of 120 days so that it takes time for changes in selenoprotein synthesis

16

to appear in the mature red cell population 42,43 . This is the first study to use plasma 382 383 SePP concentrations as a biomarker of Se status in healthy Brazilians. The baseline 384 plasma Se concentration of 96.7 µg/L (1.22 µmol/L) would be expected to maximize 385 plasma GPx activity, but not SePP concentration since earlier work has shown that the plasma Se concentration needed to maximize GPx3 activity is about 90 μ g/L ⁴⁴ and to 386 maximize plasma SePP concentration it is approximately $120 \mu g/L^{45}$. As a result, the 387 388 studied population could be considered to have a moderate to adequate Se status which 389 was able to respond to Se supplementation with an increase in concentrations of plasma Se and SePP ^{43,46}. We suggest that the threshold for maximize GPx3 activity be 390 391 reviewed, as our work demonstrated that this population with a baseline plasma Se of 392 90µL/L had a significant increase in GPx3 activity after 4 weeks of supplementation.

393 In our study subjects with the rare allele T for rs1050450 in GPX1 gene had lower GPx1 activity. This observation is consistent with previous studies ^{10,11,47,48}. It is 394 395 hypothesized that the change of the amino acid Proline to Leucine alters the secondary structure of the protein, which can have profound effects on its activity and stability²¹. 396 397 This was confirmed by *in vitro* studies where Se supplementation reduced enzyme thermostability for the Leu-variant ⁴⁹. It was observed that the SNPs rs1050450, 398 399 rs3811699 and rs1800668 were in linkage disequilibrium. This linkage was also observed in a Japanese study conducted with type 2 diabetic patients ¹⁰. One possible 400 401 explanation for the reduced GPx1 activity is that the presence of these three genetic 402 variations affected the transcriptional process and, as a result, the final enzyme activity 403 was lower. Moreover, in our work, the Brazil nut supplementation was effective in 404 increase GPX1 mRNA expression in whole blood, only in individuals with the CC 405 genotype at rs1050450. Previous studies did not find a positive association of Se supplementation and selenoprotein gene expression ^{14–16}, however, three studies confirm 406

407 our results 13,17,18 . Differences may be explained by the lack of the genotype analysis on 408 previous studies, maybe to observe this effect of Se supplementation on mRNA levels 409 of *GPX1* is necessary to stratify by genotypes.

410 The presence of rs7579 in the SELENOP gene influenced not only SePP plasma 411 concentrations but also SELENOP mRNA expression. SePP protein concentrations were 412 higher at baseline in carriers of the variant allele A for this 3'UTR SNP. Furthermore, 413 A-carriers had higher SELENOP mRNA levels than GG at baseline and after 414 supplementation. Previous work with humans have not found an association between Se supplementation and *SELENOP* mRNA expression in white blood cells ^{14,16}. It should 415 416 be noted that the present work used whole blood for the mRNA expression. Only one 417 study found a positive association by showing that rs7579 influenced SELENOP mRNA 418 expression ¹⁷. The SePP protein has two isoforms in plasma, the 50kDa and the 60kDa, 419 that are influenced by the genotype for both SNPs in SELENOP gene. Individuals with 420 the GA genotype for rs3877899 had a lower proportion of the SePP 60kD, with the Secrich domain ⁵⁰. This difference in the proportion of SePP isoforms may affect Se 421 422 availability in plasma for selenoprotein synthesis in different tissues. 423 The 3'UTR region of SELENOF gene has two SNPs which are in the same 424 haplotype. The first one is a located a C>T substitution at position 811 (rs5859) and the 425 other is a G>A substitution at position 1125 (rs5845). The two possible haplotypes are 811C/1125G or 811T/1125A⁵¹. Previous work has demonstrated that the SECIS 426 427 element containing the A variant is less responsive to Se supplementation and may influence the translation of Selenoprotein 15 protein ⁵². Two biomarkers of Se status 428 429 were associated with rs5845 in SELENOF gene in our study: erythrocyte Se

430 concentrations and GPx1 activity. We also observed that this SNP modulated the

431 percentage of variation of GPx1 and GPx3 activities after supplementation and the

variation in SePP during washout period. To our knowledge, this is the first time that
rs5845 is associated with these biomarkers. These were unexpected associations, since
the SNP is located in the SELENOF gene and the biological effect was observed in
other selenoproteins. However, the biological function of the Selenoprotein 15 is still
unknown and maybe the hierarchy of selenoprotein expression may help explain these
associations with other selenoproteins.

438 This study has several limitations. The first one is the small sample size, which 439 could have masked significant associations of the genotypes with the biomarkers. The 440 second one is the absence of a control group, however, since the main goal of this 441 before-after interventional trial was to investigate the effect of the genotypes on the 442 response to the dietary intervention, we decided that each person before 443 supplementation would be a better control. The other limitation is the small number of 444 males in the study group which could have biased the gender effect in the statistical 445 modeling.

In summary, the results of this study suggest that genetic variants in selenoprotein genes and gender influence the response of plasma and erythrocyte biomarkers of Se status to a daily supplementation with one unit of Brazil nut in healthy adults in Brazil. Furthermore, the genotypes for rs1050450 and rs7579 affected the gene expression of *GPX1* and *SELENOP*. Future nutritional interventions with Brazil nuts should consider the genetic background of the volunteers when evaluating the biomarkers of Se status used in this study.

453

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- 457 JLSD: conducted research; FB Jr: was responsible for quantification of Plasma and
- 458 Erythrocyte Selenium; AS: provided essential reagents for Selenoprotein P
- 459 concentrations and Glutathione Peroxidase 3 activity; JLSD, EMGS, CD, PB:
- 460 performed data analysis and statistics; JLSD, MMR, JH, PB: wrote the manuscript. All
- 461 authors read and approved the final version of the manuscript for submission. The
- 462 authors declare no conflict of interest.

References

- 1. Blomhoff R, Carlsen MH, Andersen LF, Jacobs DR. Health benefits of nuts: potential role of antioxidants. Br J Nutr. 2006;96(S2):S52.
- 2. Tapsell LC, Probst YC. Nutrition in the prevention of chronic diseases. World Rev Nutr Diet. 2008;98:94–105.
- 3. Donaldson MS. Nutrition and cancer: a review of the evidence for an anti-cancer diet. Nutr J. 2004;3:19.
- 4. Grosso G, Yang J, Marventano S, Micek A, Galvano F, Kales SN. Nut consumption on all-cause, cardiovascular, and cancer mortality risk: a systematic review and meta-analysis of epidemiologic studies. Am J Clin Nutr. 2015 Apr;101(4):783–93.
- 5. Fairweather-tait SJ, Collings R, Hurst R. Selenium bioavailability: current knowledge and future research. Am J Clin Nutr. 2010;91(2):1484S–91S.
- Kryukov G V, Castellano S, Novoselov S V, Lobanov A V, Zehtab O, Guigó R, et al. Characterization of mammalian selenoproteomes. Science. 2003;300(5624):1439–43.
- 7. Rayman MP. Selenium and human health. Lancet. Elsevier Ltd; 2012;379(9822):1256–68.
- 8. Méplan C, Crosley LK, Nicol F, Beckett GJ, Howie AF, Hill KE, et al. Genetic polymorphisms in the human selenoprotein P gene determine the response of selenoprotein markers to selenium supplementation in a gender-specific manner (the SELGEN study). FASEB J. 2007;21(12):3063–74.
- 9. Hesketh J. Nutrigenomics and selenium: gene expression patterns, physiological targets, and genetics. Annu Rev Nutr. 2008;28:157–77.
- Hamanishi T, Furuta H, Kato H, Doi A, Tamai M, Shimomura H, et al. Functional variants in the glutathione peroxidase-1 (GPx-1) gene are associated with increased intima-media thickness of carotid arteries and risk of macrovascular diseases in Japanese type 2 diabetic patients. Diabetes. 2004;53(9):2455–60.
- Ravn-Haren G, Olsen A, Tjønneland A, Dragsted LO, Nexø B a., Wallin H, et al. Associations between GPX1 Pro198Leu polymorphism, erythrocyte GPX activity, alcohol consumption and breast cancer risk in a prospective cohort study. Carcinogenesis. 2006;27(4):820–5.
- 12. Combs GF, Jackson MI, Watts JC, Johnson LK, Zeng H, Idso J, et al. Differential responses to selenomethionine supplementation by sex and genotype in healthy adults. Br J Nutr. 2012;107(10):1514–25.
- Pagmantidis V, Méplan C, Van Schothorst EM, Keijer J, Hesketh JE. Supplementation of healthy volunteers with nutritionally relevant amounts of selenium increases the expression of lymphocyte protein biosynthesis genes. Am J Clin Nutr. 2008;87(1):181–9.

- 14. Ravn-Haren G, Bügel S, Krath BN, Hoac T, Stagsted J, Jørgensen K, et al. A short-term intervention trial with selenate, selenium-enriched yeast and selenium-enriched milk: effects on oxidative defence regulation. Br J Nutr. 2008;99(4):883–92.
- 15. Ravn-Haren G, Krath BN, Overvad K, Cold S, Moesgaard S, Larsen EH, et al. Effect of long-term selenium yeast intervention on activity and gene expression of antioxidant and xenobiotic metabolising enzymes in healthy elderly volunteers from the Danish Prevention of Cancer by Intervention by Selenium (PRECISE) pilot study. Br J Nutr. 2008;99(6):1190–8.
- 16. Sunde R a, Paterson E, Evenson JK, Barnes KM, Lovegrove J a, Gordon MH. Longitudinal selenium status in healthy British adults: assessment using biochemical and molecular biomarkers. Br J Nutr. 2008;99 Suppl 3:S37–47.
- 17. Cardoso BR, Busse AL, Hare DJ, Cominetti C, Horst MA, Mccoll G, et al. Pro198Leu polymorphism affects the selenium status and GPx activity in response to Brazil nut intake. Food Funct. Royal Society of Chemistry; 2015;9.
- 18. Jablonska E, Raimondi S, Gromadzinska J, Reszka E, Wieczorek E, Krol MB, et al. DNA damage and oxidative stress response to selenium yeast in the nonsmoking individuals: a short-term supplementation trial with respect to GPX1 and SEPP1 polymorphism. Eur J Nutr. Springer Berlin Heidelberg; 2015;1–16.
- 19. Ashton K, Hooper L, Harvey LJ, Hurst R, Casgrain A, Fairweather-Tait SJ. Methods of assessment of selenium status in humans: A systematic review. Am J Clin Nutr. 2009;89(Suppl):2025S–39S.
- 20. Moscow J a, Schmidt L, Ingram DT, Gnarra J, Johnson B, Cowan KH. Loss of heterozygosity of the human cytosolic glutathione peroxidase I gene in lung cancer. Carcinogenesis. 1994;15(12):2769–73.
- 21. Ratnasinghe D, Tangrea J a., Andersen MR, Barrett MJ, Virtamo J, Taylor PR, et al. Glutathione peroxidase codon 198 polymorphism variant increases lung cancer risk. Cancer Res. 2000;60(22):6381–3.
- 22. Karunasinghe N, Han DY, Goudie M, Zhu S, Bishop K, Wang A, et al. Prostate disease risk factors among a New Zealand cohort. J Nutrigenet Nutrigenomics. 2012;5(6):339–51.
- 23. Zhao H, Liang D, Grossman HB, Wu X. Glutathione peroxidase 1 gene polymorphism and risk of recurrence in patients with superficial bladder cancer. Urology. 2005;66(4):769–74.
- 24. Combs GF, Watts JC, Jackson MI, Johnson LK, Zeng H, Scheett AJ, et al. Determinants of selenium status in healthy adults. Nutr J. 2011;10:75.
- 25. Bellinger FP, Raman A V, Reeves M a, Berry MJ. Regulation and function of selenoproteins in human disease. Biochem J. 2009;422(1):11–22.
- 26. Bermano G, Pagmantidis V, Holloway N, Kadri S, Mowat N a G, Shiel RS, et al. Evidence that a polymorphism within the 3'UTR of glutathione peroxidase 4 is functional and is associated with susceptibility to colorectal cancer. Genes Nutr. 2007;2(2):225–32.

28. Burk RF, Hill KE. Selenoprotein P-Expression, functions, and roles in mammals. Biochim Biophys Acta - Gen Subj. Elsevier B.V.; 2009;1790(11):1441–7.

27.

2008;87(4):1019-27.

- Bos SD, Kloppenburg M, Suchiman E, van Beelen E, Slagboom PE, Meulenbelt I. The role of plasma cytokine levels, CRP and Selenoprotein S gene variation in OA. Osteoarthr Cartil. Elsevier Ltd; 2009;17(5):621–6.
- 30. Sutherland A, Kim DH, Relton C, Ahn YO, Hesketh J. Polymorphisms in the selenoprotein S and 15-kDa selenoprotein genes are associated with altered susceptibility to colorectal cancer. Genes Nutr. 2010;5(3):215–23.
- 31. Ferguson AD, Labunskyy VM, Fomenko DE, Araç D, Chelliah Y, Amezcua C a., et al. NMR structures of the selenoproteins Sep15 and SelM reveal redox activity of a new thioredoxin-like family. J Biol Chem. 2006;281(6):3536–43.
- 32. Jablonska E, Gromadzinska J, Sobala W, Reszka E, Wasowicz W. Lung cancer risk associated with selenium status is modified in smoking individuals by Sep15 polymorphism. Eur J Nutr. 2008;47(1):47–54.
- 33. Rayman MP, Searle E, Kelly L, Johnsen S, Bodman-Smith K, Bath SC, et al. Effect of selenium on markers of risk of pre-eclampsia in UK pregnant women: a randomised, controlled pilot trial. Br J Nutr. 2014;112(1):99–111.
- 34. Mao J, Vanderlelie JJ, Perkins A V., Redman CWG, Ahmadi KR, Rayman MP. Genetic polymorphisms that affect selenium status and response to selenium supplementation in United Kingdom pregnant women. Am J Clin Nutr. 2016;103(1):100–6.
- 35. Donadio JLS, Rogero MM, Guerra-shinohara EM, Desmarchelier C, Borel P, Cozzolino SMF. SEPP1 polymorphisms modulate serum glucose and lipid response to Brazil nut supplementation. Eur J Nutr. 2017;
- 36. Cominetti C, de Bortoli MC, Garrido AB, Cozzolino SMF. Brazilian nut consumption improves selenium status and glutathione peroxidase activity and reduces atherogenic risk in obese women. Nutr Res. 2012 Jun;32(6):403–7.
- 37. AOAC Association of Official Analytical Chemists. Official methods of analysis. 15th ed. Washington; 1990.
- 38. Batista BL, Rodrigues JL, Nunes JA, Souza VC de O, Barbosa F. Exploiting dynamic reaction cell inductively coupled plasma mass spectrometry (DRC-ICP-MS) for sequential determination of trace elements in blood using a dilute-andshoot procedure. Anal Chim Acta. 2009 Apr 20;639(1–2):13–8.
- 39. Brown KM, Pickard K, Nicol F, Beckett GJ, Duthie GG, Arthur JR. Effects of organic and inorganic selenium supplementation on selenoenzyme activity in blood lymphocytes, granulocytes, platelets and erythrocytes. Clin Sci (Lond). 2000;98(5):593–9.

- 40. Plonka-Poltorak E, Zagrodzki P, Nicol F, Kryczyk J, Barton H, Westermarck T, et al. Antioxidant agents and physiological responses in adult epileptic patients treated with lamotrigine. Pharmacol Reports. 2013;65(1):99–106.
- 41. Livak KJ, Schmittgen TD. Analysis of relative gene expression data using realtime quantitative PCR and the 2(-Delta Delta C(T)) Method. Methods. 2001;25(4):402–8.
- 42. Robberecht H, Cauwenbergh R Van, Hermans N. Blood selenium levels and factors influencing concentration values. Trace Elem Electrolytes. 2012;29(3).
- 43. Thomson CD, Chisholm A, Mclachlan SK, Campbell JM. Brazil nuts : an effective way to improve selenium status. Am J Clin Nutr. 2008;87:379–84.
- 44. Duffield AJ, Thomson CD, Hill KE, Williams S. An estimation of selenium requirements for New Zealanders. Am J Clin Nutr. 1999;70:896–903.
- 45. Hurst R, Armah CN, Dainty JR, Hart DJ, Teucher B, Goldson AJ, et al. Establishing optimal selenium status : results of a randomized , double-blind, placebo-controlled trial. Am J Clin Nutr. 2010;91(4):923–31.
- 46. Da Silva EG, Mataveli LRV, Zezzi Arruda MA. Speciation analysis of selenium in plankton, Brazil nut and human urine samples by HPLC-ICP-MS. Talanta. 2013;110:53–5.
- 47. Bastaki M, Huen K, Manzanillo P, Chande N, Chen C, Balmes JR, et al. Genotype-activity relationship for Mn-superoxide dismutase, glutathione peroxidase 1 and catalase in humans. Pharmacogenet Genomics. 2006;16(4):279–86.
- 48. Hansen RD, Krath BN, Frederiksen K, Tjønneland A, Overvad K, Roswall N, et al. GPX1 Pro198Leu polymorphism, erythrocyte GPX activity, interaction with alcohol consumption and smoking, and risk of colorectal cancer. Mutat Res. 2009;664(1–2):13–9.
- 49. Zhuo P, Goldberg M, Herman L, Lee BS, Hengbing W, Brown RL, et al. Molecular consequences of genetic variations in the glutathione peroxidase 1 selenoenzyme. Cancer Res. 2009;69(20):8183–90.
- 50. Méplan C, Nicol F, Burtle BT, Crosley LK, Arthur JR, Mathers JC, et al. Relative abundance of selenoprotein P isoforms in human plasma depends on genotype, se intake, and cancer status. Antioxid Redox Signal. 2009;11(11):2631–40.
- 51. Watrowski R, Castillo-Tong DC, Fabjani G, Schuster E, Fischer M, Zeillinger R. The 811 C/T polymorphism in the 3' untranslated region of the selenoprotein 15kDa (Sep15) gene and breast cancer in Caucasian women. Tumor Biol. Springer Netherlands; 2016 Jan 12;37(1):1009–15.
- 52. Hu YJ, Korotkov K V, Mehta R, Hatfield DL, Rotimi CN, Luke a, et al. Distribution and functional consequences of nucleotide polymorphisms in the 3'-untranslated region of the human Sep15 gene. Cancer Res. 2001;61(5):2307–10.

TABLE 1

Characteristics of the study volunteers¹

Parameters	Total (n= 130)			
Gender, <i>n</i> (%)				
male	32 (24.6)			
female	98 (75.4)			
Age (y), <i>n</i> (%)				
20 – 30y	92 (70.8)			
31 – 40y	20 (15.4)			
41 – 50y	9 (6.9)			
51 – 60y	9 (6.9)			
BMI (kg/m ²), <i>n</i> (%)				
< 25	93 (71.5)			
25 - 30	31 (23.8)			
> 30	6 (4.6)			
Smoking status, n (%)				
Never	104 (80.0)			
ex-smoker	20 (5.4)			
current	6 (4.6)			
Physical activity, <i>n</i> (%)				
yes	94 (72.3)			
no	36 (27.7)			
History of chronic diseases, n (%)				
yes	113 (86.9)			
no	17 (13.1)			
Race, <i>n</i> (%)				
caucasian	94 (72.3)			
black	26 (20.0)			
asian/indigen	10 (7.7)			
Plasma Se (µg/L)				
before supplementation	96.7 ± 29.6			
after supplementation	292.8 ± 95.4			

¹ Numerical variables are presented as mean \pm standard deviation (sd). Categorical variables are presented as n (%).

Biomarker	Supplementation period				
	baseline	4 weeks	8 weeks	P value ²	
GPx 1 activity (U/g Hb)	61.8 (58.8 – 65.1) ^a	54.4 (52.0 – 57.1) ^b	61.3 (57.7 – 65.1) ^a	< 0.001	
Erythrocyte Se (µg/L)	169.8 (158.8 – 181.4) ^a	360.2 (342.5 – 378.9) ^b	438.8 (406.6 – 464.8) ^c	< 0.001	
GPx 3 activity (U/L)	528.1 (510.2 – 546.6) ^a	574.1 (554.4 – 594.5) ^b	544.4 (523.5 – 566.2) ^{ab}	0.004	
Plasma Se (µg/L)	90.7 (86.4 – 95.2) ^a	219.5 (208.4 – 231.2) ^b	267.0 (252.8 – 282.0) ^c	< 0.001	
SePP (mg/L)	$3.4(3.2-3.5)^{a}$	na	$3.9(3.7-4.1)^{b}$	< 0.001	
Biomarker	Biomarker Washout period				
	8 weeks	4 weeks	8 weeks	P value	
GPx 1 activity (U/g Hb)	61.3 (57.7 – 65.1) ^a	68.5 (65.3 – 71.9) ^b	62.8 (58.9 – 67.0) ^{ab}	0.005	
Erythrocyte Se (µg/L)	438.8 (406.6 – 464.8) ^a	484.1 (452.7 – 517.5) ^b	332.1 (307.0 – 359.3) ^c	< 0.001	
GPx 3 activity (U/L)	544.4 (523.5 – 566.2) ^a	507.1 (486.9 – 528.2) ^{ab}	480.9 (457.7 – 505.2) ^b	0.021	
Plasma Se (µg/L)	267.0 (252.8 – 282.0) ^a	195.3 (186.8 – 204.2) ^b	160.2 (154.3 – 166.2) ^c	< 0.001	
SePP (mg/L)	$3.9(3.7-4.1)^{a}$	na ³	$3.5(3.4-3.7)^{b}$	0.001	

Concentrations of biomarkers¹ of Se status during supplementation with Brazil nuts and washout period in healthy adults (n = 130)

¹ Values are geometric means (CI 95%).

² ANOVA repeated measures with post hoc Tukey for GPx1 activity; Friedman test with post hoc Dunn for Erythrocyte Se, GPx3 activity and Plasma Se; Wilcoxon test for SePP concentrations. Different letters in the row mean statistical difference in the time points. GPx1 activity and Erythrocyte Se measured in erythrocytes and GPx3 activity, Plasma Se and SePP measured in Plasma. GPx, Glutathione Peroxidase; SePP, Selenoprotein P. ³ na: not analyzed

Cana	CND	N			TT / A A	allalaa	MAE	HWE
Gene	SINP	IN	CC/GG	CI/GA	11/AA	aneles	МАГ	(p value)
GPX1	rs1050450	130	53.85	40.77	5.38	C > T	T: 0.25	0.560
	rs3811699	130	53.85	40.77	5.38	C > T	T: 0.25	0.560
	rs1800668	130	53.85	40.77	5.38	C > T	T: 0.25	0.560
GPX4	rs713041	130	38.46	42.31	19.23	C > T	T: 0.40	1.914
SELENOP	rs3877899	130	53.85	36.15	10.00	G > A	T: 0.28	1.428
	rs7579	130	38.46	42.31	19.23	G > A	T: 0.40	1.914
SELENOS	rs34713741	130	53.85	37.69	8.46	C > T	T: 0.27	0.332
SELENOF	rs5845	130	42.31	46.15	11.54	C > T	T: 0.35	0.050

Genotype and allele frequency of SNPs in selenoprotein genes

GPX1: Glutathione Peroxidase 1, GPX4: Glutathione Peroxidase 4, SELENOP: Selenoprotein P; SELENOF: Selenoprotein 15; SELENOS: Selenoprotein S.

Multiple Linear Regression models for biomarkers of Se status during daily supplementation with Brazil nuts and washout period in healthy subjects

Dependent	Predictors	β coefficient	Standard	P value		
Variables			error			
GPx1 activity (U/g Hb)						
Baseline	Erythrocyte Se	0.050	0.019	0.011		
4 weeks nuts	Erythrocyte Se	0.029	0.012	0.014		
	rs1050450 (GPX1)	-5.385	2.546	0.037		
	rs5845 (SELENOF)	-7.959	2.605	0.003		
8 weeks nuts	rs1050450	-8.300	3.424	0.017		
8 weeks washout	rs5845	-8.333	4.189	0.049		
	rs713041	8.955	4.231	0.036		
Erythrocyte Se conc	centration (µg/L)					
Baseline	Plasma Se	1.570	0.215	< 0.001		
	rs713041 (GPX4)	-26.698	12.752	0.038		
4 weeks nuts	Plasma Se	0.405	0.150	0.008		
8 weeks nuts	Plasma Se	0.692	0.158	< 0.001		
Plasma Se concentration (µg/L)						
4 weeks nuts	rs7579 (SELENOP)	-0.115	0.054	0.034		
	rs34713741	-0.110	0.053	0.038		
	(SELENOS)					
SePP concentration (mg/dL)						
Baseline	Plasma Se	0.007	0.003	0.015		
GPx3 activity						
(U/L)						
4 weeks nuts	Plasma Se	0.323	0.165	0.050		
8 weeks nuts	Plasma Se	0.304	0.134	0.025		

¹ Multivariate linear regression models were done separately in different time points for each biomarker using SPSS. Only significant p values (< 0.05) are shown in the table. GPx1 activity and Erythrocyte Se measured in erythrocytes and GPx3 activity, Plasma Se and SePP measured in Plasma. GPx, Glutathione Peroxidase; SePP, Selenoprotein P. All the models were adjusted for age, gender and body fat percentage.

Multiple Linear Regression models for the change¹ on biomarkers concentrations during daily supplementation with Brazil nuts

Dependent Variables	Predictors	β coefficient	Standard error	P value
Change1_GPx1	rs7579	7.372	3.624	0.044
	rs5845	54.582	11.334	< 0.001
Change1_Erythrocyte Se	rs34713741	262.445	100.909	0.010
	BMI	-11.849	4.348	0.007
	gender	-107.745	32.802	0.001
Change1_GPx3	rs5845	-397.353	158.625	0.014
	BMI*rs5845	17.412	6.769	0.011
Change1_ Plasma Se	gender	-57.110	18.159	0.002
	BMI	-8.429	2.440	0.001
Change2_GPx1	gender	-40.057	18.162	0.029
	gender*rs713041	26.269	10.728	0.016
Change2_SePP	rs5845	-3.110	1.521	0.043

¹: Change 1 = (8 weeks nuts) - (baseline) and Change 2 = (8 weeks washout) - (8 weeks nuts)All the models were adjusted for age, gender and body fat percentage. GPx, Glutathione Peroxidase; SePP, Selenoprotein P.



FIGURE 1. Percentage of variation¹ in five biomarkers of Se status during and after daily supplementation with one unit of Brazil nuts in healthy adults

¹ The variation was calculated comparing with the time point immediate before: 4 weeks nuts compared to baseline, 8 weeks nuts compared to 4 weeks nuts, 4 weeks washout compared with 8 weeks nuts and 8 weeks washout compared to 4 weeks washout. a) percentage of variation for GPx1 activity, b) percentage of variation for Erythrocyte Se, c) percentage of variation for GPx3 activity, d) percentage of variation for Plasma Se, e) percentage of variation for SePP.



FIGURE 2. Biomarkers of Se status stratified by SNPs in GPX1 and SELENOP genes¹.

¹ Values are geometric means \pm standard errors. Two way ANOVA repeated measures adjusted for multiple comparisons with Bonferroni test. a) Erythrocyte GPx1 activity stratified by rs1050450 genotypes, b) Plasma SePP concentration stratified by rs7579 genotypes.



FIGURE 3. Pattern of selenoprotein gene expression in response to Brazil nut supplementation on previously genotyped volunteers¹

¹ Gene expression relative to GAPDH a) GPx1 mRNA expression separated by rs1050450 genotypes, b) SELENOP mRNA expression separated by rs3877899 genotypes, c) SELENOP mRNA expression separated by rs7579 genotypes, d) SELENOS mRNA expression separated by rs34713741 genotypes, e) SELENOF mRNA expression separated by rs5845 genotypes.

* P < 0.05, Mann-Whitney test, ** P < 0.05, Wilcoxon test