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#### Review

## Controlling a master switch of adipocyte development and insulin sensitivity: Covalent modifications of PPAR $\gamma$

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#### ABSTRACT

Adipocytes are highly specialized cells that play a central role in lipid homeostasis and the maintenance of energy balance. Obesity, an excessive accumulation of adipose tissue, is a major risk factor for the development of Type 2 diabetes mellitus (T2DM), cardiovascular disease, and hypertension. A variety of studies suggest that obesity and T2DM can be linked to a breakdown in the regulatory mechanisms that control the expression and transcriptional activity of PPARγ. PPARγ is a nuclear hormone receptor that functions as a master switch in controlling adipocyte differentiation and development. Also important in controlling glucose homeostasis and insulin sensitivity, PPARγ is a ligand-dependent transcription factor that is the functional receptor for the anti-diabetic thiazolidinediones (TZDs). In the last fifteen years, a variety of covalent modifications of PPARγ activity have been identified and studied. These covalent modifications of PPARγ represent key regulatory mechanisms that control both PPARγ protein stability and transcriptional activity. A variety of PPARγ transgenic models, including mice heterozygous for PPARγ, have demonstrated the importance of PPARγ expression in glucose homeostasis and insulin resistance. In the following review, we have highlighted the regulation of PPARγ by covalent modifications, the interplay between these interactions and how these post-translational modifications impact metabolic disease states.

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#### 1. Introduction

#### 1.1. Role of PPARy in disease

Our understanding of adipose tissue biology and the role of adipocytes in obesity-related diseases such as type 2 diabetes (T2DM) has benefited greatly from the discovery that the lipid-activated peroxisome proliferator-activated receptor gamma (PPARv. NR1C3) nuclear receptor is essential for adipocyte development [1-3]. Subsequent to its discovery as a critical adipogenic transcription factor, PPARy was identified as the pharmacological target of the insulinsensitizing thiazolidinediones (TZD) that have been widely used to treat insulin resistance associated with T2DM [4,5]. Since that time, various genetic studies using animal models of tissue-specific PPARy deletions have shown that activation of PPARy in adipose tissue is central to the insulin-sensitizing effects of the TZDs. Mice lacking white adipose tissue [6] are not responsive to TZDs and deletion of PPARy in adipose tissue causes insulin resistance in adipose and liver, but not in skeletal muscle [7]. Inhibiting PPARy activity in mature adipocytes leads to insulin resistance associated with decreased

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expression of key genes required for insulin signaling in adipocytes, reduced uptake of free fatty acids by adipocytes and increased lipolysis [8,9]. Gain-of-function experiments show that adipocyte-specific constitutive activation of PPAR $\gamma$  in mature adipocytes can regulate whole body insulin sensitivity [10] without stimulating adipogenesis. Collectively, these observations indicate that PPAR $\gamma$  activation is as important to lipid and glucose metabolism in fully formed adipocytes as it is for adipocyte development.

1.2. Regulation of PPAR $\gamma$  activity by protein–protein interactions and ligand binding

PPARγ is a ligand-activated transcription factor that is expressed in adipocytes as PPARγ2 and PPARγ1; the two forms differing by a thirty amino acid N-terminal extension found in PPARγ2 (refer to Fig. 1). While PPARγ1 is expressed in multiple tissues [11], PPARγ2 is expressed primarily in adipocytes [12]. PPARγ2 is the more adipogenic PPARγ isoform *in vitro* [13] and it is also the isoform transcriptionally regulated by nutrition [11]. PPARγ has an overall domain structure typical of nuclear hormone receptors. This includes an N-terminal activation function-1 (AF-1) domain that functions as a ligand-independent activation domain and confers specificity of target gene activation [14]. PPARγ also contains a DNA binding domain followed by a hinge domain and a large ligand binding domain that contains a short region at the C-terminus called the activation

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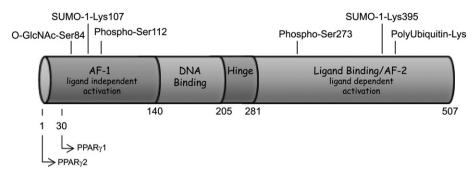


Fig. 1. Schematic of PPAR<sub>2</sub>2 covalent modifications.

function 2 (AF-2) domain that is responsible for ligand-dependent activation [12] (refer to Fig. 1). PPARy transcriptional activity is regulated at multiple levels. PPARy forms a heterodimeric complex with RXR $\alpha$  that is mediated by the PPAR $\gamma$  ligand binding domain. Interaction with RXR $\alpha$  is required for PPAR $\gamma$  to bind the PPAR $\gamma$ responsive element of its target gene promoters. Once bound to DNA, PPARy activation can be modulated by a large number of coregulators classified as corepressors and coactivators whose association with PPARy is determined by ligand binding to PPARy. Corepressor proteins that regulate PPARy activity include the nuclear receptor corepressor NCoR-1 and its homolog SMRT (silencing mediator for retinoid and thyroid receptors) [15,16] and the receptor interacting protein 140 (RIP 140) [17]. In recent studies of transgenic mice lacking NCoR in adipocytes, it was shown that deletion of this corepressor leads to increased adipogenesis, reduced inflammation, and enhanced systemic insulin sensitivity [18]. These observations are reminiscent of a TZD treatment and support other studies that show transcriptionally active PPARy promotes insulin sensitivity. In the absence of ligand, PPARy can be bound to target gene promoters while associated with the nuclear corepressors that recruit chromatin-modifying enzymes to regulate access to the DNA as has been shown in the glycerol kinase promoter [19]. Of note, the most active cis-regulatory elements bound by PPARy differ between mouse and man [20]. Also, studies in adipocytes and macrophages have demonstrated that PPARy DNA binding is predominantly cell type specific [21]. Upon ligand binding, the corepressor proteins are replaced by coactivating proteins that promote PPARy transcriptional activity. A major category of the coactivators is the p160 family of proteins that includes the cAMP response element binding protein (CBP)/p300 and Steroid Receptor Coactivators (SRC)-1,-2,-3, which recruit histone modifiers to the chromatin structure (reviewed in Ref. [22]). A second category of coactivators includes subunits of the mediator complex such as the PPAR-binding protein (PBP)/thyroid hormone receptor-associated protein (TRAP) 220/ vitamin D receptor-associated protein (DRIP) 205 [23–25]. These coactivators interact with the general transcriptional machinery to control assembly of the transcription preinitiator complex [23]. TRAP220/DRIP205, originally cloned as a coactivator of the vitamin D receptor [24], interacts directly with PPARy [25]. An additional coactivator, PRIP (peroxisome proliferators-activated receptor gamma interacting protein) serves to link TRAP220/DRIP205 bound PPARy to the CBP/p300 coactivator [26]. These coregulators orchestrate the selective binding of PPARy to an enormous array of gene promoters.

Our understanding of the genes regulated by PPAR $\gamma$  binding has greatly expanded from the set of genes initially identified as direct targets of this nuclear receptor. Earlier studies established that PPAR $\gamma$  controls the expression of genes that are required for lipid synthesis, transport, and storage [1,27–29] in adipocytes. Recent studies that take advantage of chromatin immunoprecipitation and genome-wide sequencing technology demonstrate the PPAR $\gamma$ /RXR $\alpha$  heterodimer binds to more than 5000 sites, directly activating the expression of a substantial number of genes involved in lipid and glucose metabolism

during adipogenesis and in mature adipocytes [30–32]. In a majority of the binding sites, C/EBP $\alpha$  is also present [30,32], in agreement with the accumulated evidence that PPAR $\gamma$  and C/EBP $\alpha$  activities coordinate to form a fully functional insulin sensitive adipocyte. The overlap between PPAR $\gamma$  and C/EBP $\alpha$  binding sites persists in mature adipocytes [32].

#### 1.3. Regulation of PPARy by covalent modifications

As indicated above, PPAR $\gamma$  can be associated with a large number of proteins. These important protein–protein interactions are noncovalent, but these interactions control PPAR $\gamma$  activity and can be significantly regulated by covalent modifications of PPAR $\gamma$ . PPAR $\gamma$  is known to be modified by phosphorylation, SUMOylation, O-GlcNAcylation, and ubiquitylation (refer to Fig. 1). The multiple covalent modifications of PPAR $\gamma$  increase the levels of control of both PPAR $\gamma$  expression and transcriptional activity that contribute to its ability to modulate adipocyte development and insulin sensitivity.

#### 1.3.1. Phosphorylation of PPARy

The most well described of these modifications is phosphorylation of PPARy. Growth factor activation of the mitogen activated protein kinases (MAPK) results in phosphorylation of PPAR<sub>2</sub> in the N-terminal AF-1 domain at serine<sup>112</sup> (Ser<sup>82</sup> in PPAR $\gamma$ 1) [33–37], the single MAPK consensus recognition site in PPARy. The first studies on PPARy phosphorylation were prompted by observations of the MAPKinducing growth factors including epidermal growth factor (EGF), fibroblast growth factor (FGF) and platelet-derived growth factor (PDGF) inhibited adipogenesis. Mutation of serine 112 to alanine abolishes both the growth factor stimulated phosphorylation of PPARy at serine 112 and the inhibitory effect of PDGF and EGF on PPARy transcriptional activity [35]. In vitro studies have demonstrated that the non-phosphorylated Ser<sup>112</sup>Ala mutant form of PPARy is more active than wild-type PPARy in the presence of ligand [33,36,37]. The MAPK-mediated phosphorylation of PPARy at serine 112 in the AF-1 domain functions to inhibit PPAR activity by regulating ligand binding in the C-terminal ligand binding domain of PPARy [38]. The physiological relevance of PPARy phosphorylation at serine 112 was demonstrated in mice homozygous for the Ser 112 Ala mutation of PPARy2. Although diet-induced obesity is associated with insulin resistance, elimination of the phosphorylation site protected the Ser<sup>112</sup>Ala mice from diet-induced insulin resistance even though the mice were obese [39]. Preservation of insulin sensitivity in the obese Ser<sup>112</sup>Ala mice correlated with higher expression of PPARγ target genes and increased serum levels of adiponectin, an insulin-sensitizing factor secreted exclusively by adipocytes. An additional PPARy phosphorylation site at serine<sup>273</sup> in the PPARy ligand-binding domain that is regulated by Cdk5 [40,41] may have important implications for the treatment of T2DM. Cdk5-dependent phosphorylation is known to play a role in neurobiology and neurodegenerative diseases [42,43], but this kinase is also expressed in non-neuronal tissue, including the insulin secreting pancreatic beta cells [44], and adipocytes [40]. Cdk5 activity

can be regulated by TNF- $\alpha$  [45], a pro-inflammatory cytokine that is upregulated in adipose tissue in conditions of obesity and insulin resistance [46]. The Cdk5-mediated phosphorylation of PPARy in adipose tissue has been linked to obesity [40]. Importantly, treatment with thiazolidinediones, the insulin sensitizing drugs that act as high affinity PPARy ligands, increases PPARy transcriptional activity and decreases cdk5-dependent phosphorylation of PPAR<sub>7</sub>2 at serine<sup>273</sup>. However, Cdk5 phosphorylation at serine<sup>273</sup> of PPAR<sub>7</sub>2 does not regulate PPARy transcriptional activity in general, but does alter the expression of metabolically important target genes in adipocytes such as adiponectin. Moreover, PPARy ligands that are less potent agonists than the thiazolidinediones, but have insulin-sensitizing effects, also inhibit Cdk5-mediated phosphorylation in PPAR<sub>7</sub>2. Transgenic mice lacking the corepressor NCoR in adipocytes exhibit improvements in adipogenesis, reduced inflammation, and enhanced systemic insulin sensitivity and a notable decrease in CDK5-mediated PPAR $\gamma$  ser<sup>273</sup> phosphorylation [18]. These studies suggest that NCoR can function as an adaptor protein to enhance the ability of CDK5 to associate with and phosphorylate PPAR $\gamma$ . Collectively, these studies suggest that phosphorylation of PPAR $\gamma$ 2 at serine <sup>273</sup> by Cdk5 is a key determinant of whole body insulin sensitivity and that new classes of anti-diabetic drugs may emerge that are based on regulating Cdk5-mediated phosphorylation of the PPARy ligand binding domain. One compound that fits these criteria has recently been described [41].

In addition to modulating PPAR $\gamma$  transcriptional activity, MAPK signaling also affects PPAR $\gamma$  by regulating the subcellular location of PPAR $\gamma$ . These data demonstrate an interaction of MEK1 with the C-terminal AF2 domain of PPAR $\gamma$ , yet this interaction does not directly alter phosphorylation of PPAR $\gamma$  [47,48]. However, there is evidence that cytoplasmic–nuclear shuttling of PPAR $\gamma$  may be regulated by phosphorylation of PPAR $\gamma$  in the AF-1 domain at serines 46 and 51 of PPAR $\gamma$ 2 (Ser 16 and Ser 21 of PPAR $\gamma$ 1) [49]. In this instance, phosphorylation of PPAR $\gamma$  is mediated by casein kinase II (CK-II) and leads to cytoplasmic localization of PPAR $\gamma$  and decreased PPAR $\gamma$  transcriptional activity. These studies were largely performed in HEK 293 cells and in adipocytes the overall majority of PPAR $\gamma$  is found in the nucleus. Hence, the physiological relevance of these observations is still unclear.

#### 1.3.2. SUMOylation of PPARy

PPARy is reversibly modified by SUMO-1 (small ubiquitin-related modifier) at lysine<sup>107</sup> (lysine<sup>77</sup> in PPARγ1) and lysine<sup>395</sup> (lysine<sup>365</sup> in PPARy1) [50–53]. First identified in 1995 [54] as a suppressor of a centromere-associated protein, SUMO-1 is an approximately 10 kD protein that regulates protein activity, stability, or cellular location. Although found in the cytoplasm and nucleus, SUMO-1 is best described as regulating a wide range of nuclear functions, including replication, transcription, DNA repair, and cytoplasmic-nuclear protein transport [55]. SUMOylation of PPARy in the N-terminal AF-1 domain (lysine 107) strongly represses PPAR y transcriptional activity, suggesting that SUMO-1 modification of PPARy at lysine 107 accounts for the repressive effect of amino acids 100-138 [56]. The potential for "crosstalk" between SUMO-1 modification at lysine 107 and phosphorylation at serine 112 within this region is supported by at least one study showing that SUMOylation of PPARy is impaired in the phosphorylation deficient form of PPARγ2 (Ser<sup>112</sup>Ala) [52], consistent with the repressive effect of serine 112 phosphorylation.

SUMOylation-mediated repression of PPAR $\gamma$  transcriptional activity occurs even though only a small percentage of PPAR $\gamma$  protein is modified by SUMO-1 at steady-state. This disproportionate effect of SUMOylation on PPAR $\gamma$  activity is consistent with the effect of SUMOylation on other transcription factors and may be due to SUMO-dependent recruitment of "downstream" cofactors that regulate PPAR $\gamma$  activity. SUMOylation of PPAR $\gamma$  in the AF-1 domain occurs within a sequence specific context found in many nuclear receptors that is termed a "synergy control" motif [57,58]. At promoters

containing multiple response elements, complex protein-protein interactions with transcription factors give rise to synergistic interactions that control gene expression patterns [59,60]. The repressive activity of the synergy control motif is determined by SUMO-1 (or SUMO-2) modification of a lysine within the synergy control region and the SUMO-1 modification provides a surface for interactions with transcriptional repressors such as p300 [61] and the histone deacetylases [62]. Evidence of the effect of SUMOylation on the PPARy AF-1 domain synergy control motif awaits additional experiments to examine the interactions of PPARy when modified at lysine 107 by SUMO-1. However, ligand-dependent SUMOylation of PPAR<sub>2</sub>1 at lysine<sup>365</sup> (lysine<sup>395</sup> in PPAR<sub>2</sub>2) has been shown to promote the interaction of PPARy with nuclear receptor corepressor (NCoR)-histone deacetylase-3 (HDAC3) complexes in macrophages [53]. This SUMO-1 dependent interaction prevents removal of the NCoR-HDAC3 complexes by proteasomal degradation and maintains repression of PPARy activity. The physiological relevance of PPARy SUMOvlation has been observed in FGF21 null mice that have alterations in PPARy signaling. Mice lacking FGF21 are lipodystropic and have less body fat and decreased expression of PPARy target genes [63]. These transgenic mice also have increased PPARy SUMOylation and FGF21 is capable of inhibiting PPAR SUMOylation at lysine 107. Collectively, these observations suggest that hormones including FGF21 modulate PPARy transcriptional activity by regulating SUMOylation at lysine<sup>107</sup> and contribute to whole body insulin sensitivity. To date, no studies have examined the SUMOylation of the PPARγ2 ligand-binding domain in adipocytes. Hopefully, future studies will determine if this modification occurs in adipocytes and if there is any "cross-talk" between SUMO-1 modification at lysine 395 and Cdk5-dependent phosphorylation at serine<sup>273</sup>.

#### 1.3.3. Ubiquitylation of PPARy

SUMO-1 is structurally related to ubiquitin, an 8.5 kD polypeptide that regulates myriad cellular functions ranging from receptor-mediated endocytosis to regulation of transcription when covalently attached to targeted proteins [64]. Proteins modified by multiple ubiquitin polypeptides can be targeted to a number of possible fates, including proteasomal degradation, the best described endpoint for a polyubiquitylated protein. Covalent modification of proteins by ubiquitin occurs *via* a highly regulated cascade of enzymes that catalyze the activation of ubiquitin followed by the transfer of ubiquitin to the targeted protein. The process of activating and transferring ubiquitin to a substrate is repeated multiple times to form the polyubiquitin chains that are recognized by the proteasome.

PPARy proteins have a short half-life in adipocytes [65] and the turnover rate of PPARy proteins is regulated by the ubiquitinproteasome system under ligand-independent and ligand-dependent conditions [66,67]. Ligand binding increases ubiquitin modification of PPARy and proteasomal degradation of PPARy and in vitro assays indicate that PPAR $\gamma$  is modified by ubiquitin in the ligand binding domain, although the exact site of ubiquitylation has not been identified [66,68]. Although ubiquitylation occurs in the absence of the AF2 domain, the AF2 domain is required for maximal ubiquitin modification of the PPARy ligand binding domain [68]. This suggests ubiquitylation of PPARγ may precede coactivator binding of the AF-2 domain and that ubiquitin modification of PPARy functions as an integral part of PPAR $\gamma$  transcriptional activation. The link between ubiquitin modification of PPAR $\gamma$  and activation of PPAR $\gamma$  is further supported by the observations that inhibiting proteasome activity increases PPARy activity and ubiquitylation in general is required for PPARy activity in adipocytes [50,68].

The simplest interpretation of the studies on PPAR $\gamma$  ubiquitylation is that ubiquitin modification of PPAR $\gamma$  regulates PPAR $\gamma$  activity by controlling the abundance of PPAR $\gamma$  proteins. Regulation of PPAR $\gamma$  protein steady state levels by promoting ubiquitin modification of PPAR $\gamma$  may represent an important aspect of the action of the insulin

sensitizing thiazolidinediones. Genetic studies using mouse models of insulin resistance show decreased PPAR $\gamma$  gene expression is as effective as thiazolidinedione activation of PPAR $\gamma$  in improving insulin sensitivity [69–71]. The decreased PPAR $\gamma$  gene expression is associated with lower steady state levels of PPAR $\gamma$  protein in adipose tissue [72], lending substantial support to the possibility that modification of PPAR $\gamma$  by the ubiquitin–proteasome in adipocytes is an important regulation of systemic insulin sensitivity that can be exploited in the treatment of type 2 diabetes.

#### 1.3.4. O-GlcNAcylation of PPARy

A type of glycosylation that occurs on both cytosol and the nuclear proteins is the  $\beta$ -O-linked N-acetylglucosamine (O-GlcNAc) post-translational modification. Recent mutational analysis and mass spectrometry studies have revealed that the threonine<sup>54</sup> in the AF-1 domain of PPAR $\gamma$ 1 (threonine<sup>84</sup> in PPAR $\gamma$ 2) is a major O-GlcNAc site [73]. The transcriptional activity of wild type PPAR $\gamma$  was inhibited in the presence of an inhibitor of this modification, whereas the threonine mutant (Thr<sup>54</sup>Ala) was unresponsive to inhibitor treatment. Although these studies were conducted *in vitro* in cultured 3T3-L1 adipocytes, the results clearly show that O-GlcNAcylation of PPAR $\gamma$  functions to reduce PPAR $\gamma$  transcriptional activity.

#### 1.3.5. Potential interplay of PPARy post-translational modifications

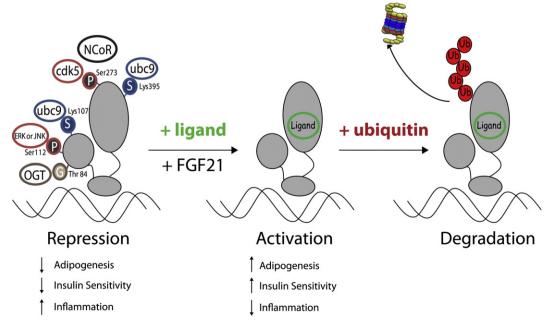
The phosphorylation and SUMOylation sites in the AF-1 domain of PPARγ are contained within a highly conserved motif (ψKxExxSP, where  $\psi$  is a hydrophobic residue; in PPAR $\!\gamma$  the sequence is IK  $^{107}$ VEPAS<sup>112</sup>P) that is considered to be a phosphorylation-dependent SUMOylation motif. Many of the proteins containing this motif are transcription factors, including the nuclear receptors [74]. In PPARy, phosphorylation and SUMOylation in the AF-1 domain function to repress transcriptional activity. Although phosphorylation within the "phospho-SUMO switch" in other nuclear receptors acts to block SUMOylation of the AF-1 domain [75], the evidence that SUMOylation is impaired in the phosphorylation-deficient form of PPARy [52] supports the possibility that phosphorylation of serine 112 regulates SUMOvlation of lysine 107 to repress PPARy activity. In addition, phosphorylation of serine<sup>112</sup> may affect ubiquitylation of PPARγ since inhibition of MAPK signaling alters the stability of PPARy and the level of PPARy ubiquitylation [66,67]. This may also be the case

for SUMOylation. While SUMOylation of lysine  $^{107}$  can occur in the absence of ubiquitylation, inhibiting SUMO-1 modification of lysine  $^{107}$  increases proteasomal degradation of PPAR $\gamma$  [50], suggesting SUMOylation regulates ubiquitin modification of the PPAR $\gamma$  ligand-binding domain. Stabilization of PPAR $\gamma$  protein via SUMO-1 modification is consistent with studies that indicate SUMOylation and ubiquitylation have opposing functions, but the interplay between SUMOylation and ubiquitylation in PPAR $\gamma$  may be more complex and involve cooperative as well as antagonistic functions [76].

Phosphorylation, SUMOylation, and ubiquitylation work in concert with acetylation in many transcription factors, including several of the nuclear receptors [77]. PPARγ contains twenty potential acetylation sites [78], although no sites in PPARγ have been definitively identified as modified by acetylation. However, the possibility of acetylation accompanying phosphorylation, SUMOylation, and ubiquitylation in regulating PPARγ activity is intriguing given that four of the potential sites for acetylation overlap or are in close proximity to SUMOylation and phosphorylation sites in the AF-1 (at lysines 107 and 119 of PPARγ2) and ligand binding domain (at lysine 268, 272 and 382). Although speculative, it seems highly likely that acetylation will participate with other covalent modifications in regulating the transcriptional activity of PPARγ.

## 1.4. The role of PPARy post-translational modifications in metabolic disease

It appears that all of the PPARγ covalent modifications identified to date including phosphorylation, SUMOylation, O-GlcNAcylation and ubiquitylation largely function to decrease PPARγ transcriptional activity and/or expression levels (see Fig. 2). For over a decade, we have known that PPARγ has been implicated in the regulation of systemic insulin sensitivity. This was first demonstrated when PPARγ was shown to be the functional receptor for the synthetic antidiabetic thiazolidinediones (5). Moreover, direct evidence from genetic studies in humans has revealed that mutations in the ligand-binding domain of PPARγ are associated with severe insulin resistance and T2DM [79]. To date, none of the naturally occurring genetic mutations in humans has been shown to occur at the exact residues in PPARγ where covalent modifications are known to occur. Nonetheless, these post-translational modifications have important



**Fig. 2.** Covalent modifications of PPARγ are associated with transcriptional repression.

**Table 1**Covalent Modifications of PPARv2.

Modification of PPARγ2	Site	Function
Phosphorylation	Serine 112	General decrease in transcriptional activity
	Serine 273	Decrease in activation of specific target genes
SUMOylation	Lysine 107 Lysine 395	Inhibits transcriptional activity Prevents NCoR removal to maintain repression of activity
Ubiquitylation	Ligand binding domain	Targets PPARγ for degradation to reduce protein expression
O-GlcNAcylation	Threonine 84	Inhibits ligand-independent transcriptional activity

effects on PPAR $\gamma$  activity and expression levels. However, a well documented missense mutation in the PPAR $\gamma$ 2 genes results in the conversion of proline to glutamine at position 115 and some studies indicate this polymorphism is associated with obesity [80,81]. Ectopic expression of this mutant PPAR $\gamma$  results in decreased serine phosphorylation and increased PPAR $\gamma$  transcriptional activity [80]. Collectively, these studies revealed that the Pro115Gln mutation in PPAR2 enhanced the differentiation of adipocytes and this phenotype was likely a result of decreased serine phosphorylation.

As reviewed above and summarized in Table 1, there are a large number of studies demonstrating how covalent modification of PPARy plays a role in modulating its activity and expression levels. In the last year, two new PPARy covalent modifications have been discovered including O-GlcNAcylation and CDK5 mediated serine phosphorylation. Also, FGF21 has recently been identified as a potent modulator of PPARγ SUMOylation [63]. It will be interesting to learn whether other insulin sensitizers act by modulating PPARy covalent modifications. Transgenic models of PPARy modulation have shown that the activity and expression of PPARy play a role in both adipocyte development and insulin sensitivity. Yet, few studies on covalent modification of PPARy have been performed in the whole animal setting. To date, the best evidence to support that covalent modifications of PPARγ may contribute to metabolic disease states comes from the Lazar laboratory. In these studies, mice containing a PPAR $\gamma$ 2 gene that cannot be phosphorylated on serine 112 developed obesity following high fat feeding but were partially protected from diet induced insulin resistance [34]. Hopefully, future studies will reveal equally important roles for other post translational modification of PPARy under physiological and/or pathological conditions. The ability to modulate PPARy activity and improve insulin sensitivity by specifically inhibiting a covalent modification of PPARy may represent a viable therapeutic option in the treatment of insulin resistance and T2DM.

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