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## PEGylated glucagon-like peptide-1 displays preserved effects on insulin release in isolated pancreatic islets and improved biological activity in *db/db* mice

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**Abstract** *Aims/hypothesis:* The rapid degradation and clearance of glucagon-like peptide-1 (GLP-1) by the enzymes dipeptidyl peptidase-IV and neutral endopeptidase 24.11 are the main impediments to the development of GLP-1 as a potential glucose-lowering agent. In this study, new enzyme-resistant polyethylene glycol (PEG)-conjugated GLP-1 analogues were designed and examined for metabolic stability and biological potency. *Materials and methods:* Two mono-PEGylated GLP-1 analogues, N-terminally modified N-PEG/GLP-1 and Lys-modified Lys-PEG/GLP-1, were prepared. Stability was tested in plasma and tissue extracts. In vitro insulin release studies were performed using isolated rat pancreatic islets, while in vivo glycaemic responses were measured in *db/db* mice. *Results:* The half-life of Lys-PEG/GLP-1 was 40-, 10- and 28-fold longer than that of GLP-1 in plasma, liver and kidney homogenates, respectively. Lys-PEG/GLP-1 stimulated insulin secretion in the islets in a dose- and glucose-dependent manner, and was as potent as GLP-1. In contrast, N-PEG/GLP-1 showed extended metabolic stability but had significantly lower biological activity. The administration of Lys-PEG/GLP-1 (9 nmol/kg i.p.) to non-fasted *db/db* mice stabilised glycaemia ( $p<0.001$ ), whereas GLP-1 (9 nmol/kg) only caused small changes in glucose level. During OGTT in fasted *db/db* mice, Lys-PEG/GLP-1 administered at 1, 3 and 9 nmol/kg (i.p.) reduced the glucose AUC<sub>0-3h</sub> by 48.7±9.4, 55.0±2.9 and 63.4±2.5%, respectively, compared with placebo ( $p<0.01$ ),

whereas GLP-1 (9 nmol/kg) lowered the glucose level by 39.5±12.9% ( $p<0.01$ ). *Conclusions/interpretation:* This study demonstrates that site-specific PEGylated GLP-1 analogues are resistant to degradation. The enhanced biological potencies of these analogues highlight their potential as new, GLP-1-like glucose-lowering agents.

**Keywords** GLP-1 · Metabolic stability · PEGylation · Pancreatic islets · Type 2 diabetes

**Abbreviations** DPP-IV: dipeptidyl peptidase-IV · GLP-1: glucagon-like peptide 1 · NEP: neutral endopeptidase · PEG: polyethylene glycol

### Introduction

Glucagon-like peptide-1 (7–36)amide (GLP-1) is a polypeptide hormone secreted from L cells in the gastrointestinal tract in response to the ingestion of nutrients [1]. GLP-1 is viewed as a potent therapy for type 2 diabetes [2, 3]. However, its short circulating half-life means that high doses must be administered frequently, which limits its clinical application. The short half-life of GLP-1 is due to its rapid inactivation and clearance under physiological conditions by proteolytic enzymes such as dipeptidyl peptidase-IV (DPP-IV) [4] and neutral endopeptidase (NEP) 24.11 [5].

We recently proposed a novel and potent enzyme-resistant form of a site-specific polyethylene glycolated (PEGylated) GLP-1 [6], and hypothesised that the covalent coupling of PEG to a specific site of GLP-1 would profoundly improve its enzymatic stability against DPP-IV and NEP 24.11, whilst retaining its biological activity. To this end, two series of mono-PEGylated GLP-1 analogues, N-terminally modified N-PEG/GLP-1 and Lys modified Lys-PEG/GLP-1, were prepared. These PEGylated GLP-1 analogues were clearly resistant to purified DPP-IV. Moreover, a pharmacokinetic evaluation in rats showed that the PEGylation process confers both an extended plasma half-life and a lower clearance rate, which result in

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a substantial improvement in the mean plasma residence time of GLP-1 after i.v. or s.c. administration.

In the present study we investigated the therapeutic potential of site-specific PEGylated GLP-1 by examining the impact of PEGylation on the biological activity and metabolic stability of GLP-1 *in vitro*, and its *in vivo* antihyperglycaemic effect in diabetic *db/db* mice.

## Materials and methods

**Preparation of mono-PEGylated GLP-1** The PEG molecule was mono-substituted covalently at the N-terminus position His<sup>7</sup> or at Lys<sup>34</sup>, and these analogues were designated N-PEG/GLP-1 and Lys-PEG/GLP-1, respectively [6].

**Enzymatic stability in plasma and tissue homogenates** The peptides were incubated at 37°C with the individual plasma and tissue homogenates, as described previously [7]. Half-life was estimated as the time (min) needed for the peptide concentration to be reduced by 50%, as determined by calculating the peak area following reversed phase HPLC analysis.

**Insulinotropic actions using isolated rat pancreatic islets** Islets of Langerhans were isolated from male Sprague-Dawley rats, as described previously [8]. In vitro biological activity was evaluated by incubating 20 islets in 2 ml of Krebs Ringer bicarbonate HEPES buffer (containing 16.7 mmol/l glucose) containing the respective stimuli at various concentrations for 2 h at 37°C in an atmosphere of 95% air, 5% CO<sub>2</sub>. We carried out a separate set of experiments, incubating islets in the presence of 2.8, 5.5, 11.1 and 16.7 mmol/l glucose and 10 nmol/l of the respective peptides. Levels of insulin release were measured using radioimmunoassay kits (Insulin Kit; ICN Pharmaceuticals, Orangeburg, NY, USA).

**Animals** The animals were cared for according to the National Institutes of Health (NIH) guidelines for the care and use of laboratory animals (NIH publication 85-23, revised 1985). C57BL/6 *db/db* female mice (7–10 weeks old; from the Korea Research Institute of Bioscience and Biotechnology, Daejon, Korea) were used. In order to determine the biological potency of the peptides, non-fasted diabetic rodents were given a single i.p. injection of 9 nmol/kg of the peptides. Blood samples were collected from a tail vein, and blood glucose levels were determined using a one-touch blood glucose monitoring system (Glucocard II; Arkay, Kyoto, Japan).

**OGTT** Overnight-fasted diabetic mice received an i.p. injection of either saline or one of the peptides. At time −30 min, saline or 1, 3 or 9 nmol/kg of the peptides were administered i.p. At 0 min, 1.5 g/kg of glucose in PBS (10 mmol/l, pH 7.4) was given orally to each group (*n*=6). Blood glucose was monitored as described above.

**Data analysis** Data are expressed as means±SD in the text and as means±SEM in the figures. The Mann–Whitney non-parametric test or the *t*-test were used, depending on variances, to assess the statistical significance of differences. A *p* value of <0.05 was considered significant.

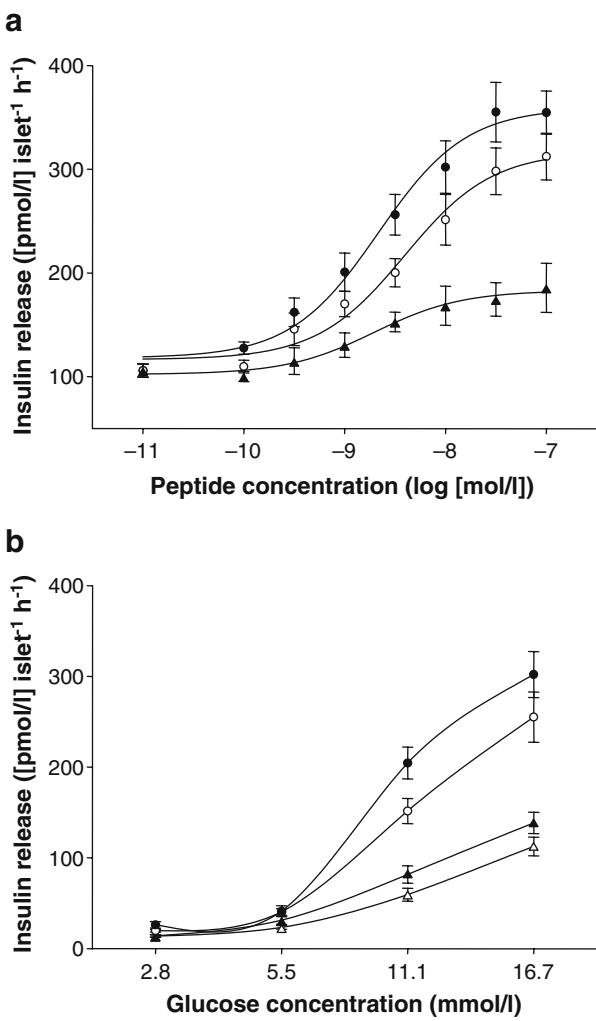
## Results

**Proteolytic stabilities** GLP-1 was rapidly degraded in rat plasma, liver and kidney homogenates *in vitro* (*t*<sub>1/2</sub> values of 114±28, 6±0.5, 1±0.2 min, respectively). In contrast, Lys-PEG/GLP-1 and N-PEG/GLP-1 were found to have significantly longer half-lives than native GLP-1, with *t*<sub>1/2</sub> values in plasma, liver and kidney homogenates of 4471±1822, 62±23 and 28±1 min for Lys-PEG/GLP-1, and 7560±5635, 250±117 and 23±7 min for N-PEG/GLP-1, respectively (*p*<0.01 vs GLP-1).

**In vitro biological activities** In order to determine *in vitro* dose-response curves in terms of insulin released by GLP-1 and PEGylated GLP-1 analogues, peptide concentrations in media containing 16.7 mmol/l glucose were varied from 0.1–100 nmol/l (Fig. 1a). GLP-1 and Lys-PEG/GLP-1 showed dose-dependent responses. Furthermore, at concentrations of 100 nmol/l, Lys-PEG/GLP-1 proved as effective as GLP-1 at stimulating insulin secretion (354.6±59.0 vs 312.2±63.7 [pmol/l] islet<sup>−1</sup> h<sup>−1</sup>, respectively, *p*=0.19) and was significantly more potent than N-PEG/GLP-1, which showed a 1.7±0.6-fold increase in insulin secretion per islet compared with the control, which contained no peptide.

Islets were cultured in different glucose concentrations (2.8, 5.5, 11.1 and 16.7 mmol/l) with or without the peptides (10 nmol/l) to determine if PEGylated GLP-1 could retain its glucose-dependent insulinotropic profile (Fig. 1b). Islets cultured in 11.1 and 16.7 mmol/l of glucose showed rates of insulin secretion 4.0±1.5 and 8.2±1.3 times higher than those observed in islets cultured in basal glucose (2.8 mmol/l), respectively. The addition of GLP-1 (10 nmol/l) further enhanced the level of insulin release by 14.8±2.8-fold and 21.8±5.2-fold at 11.1 and 16.7 mmol/l glucose, respectively. Lys-PEG/GLP-1 showed insulin secretion patterns that were comparable to those of native GLP-1 (increases of 11.0±2.2 and 17.1±5.8-fold at 11.1 and 16.7 mmol/l glucose, respectively). N-PEG/GLP-1 exhibited a lower biological activity.

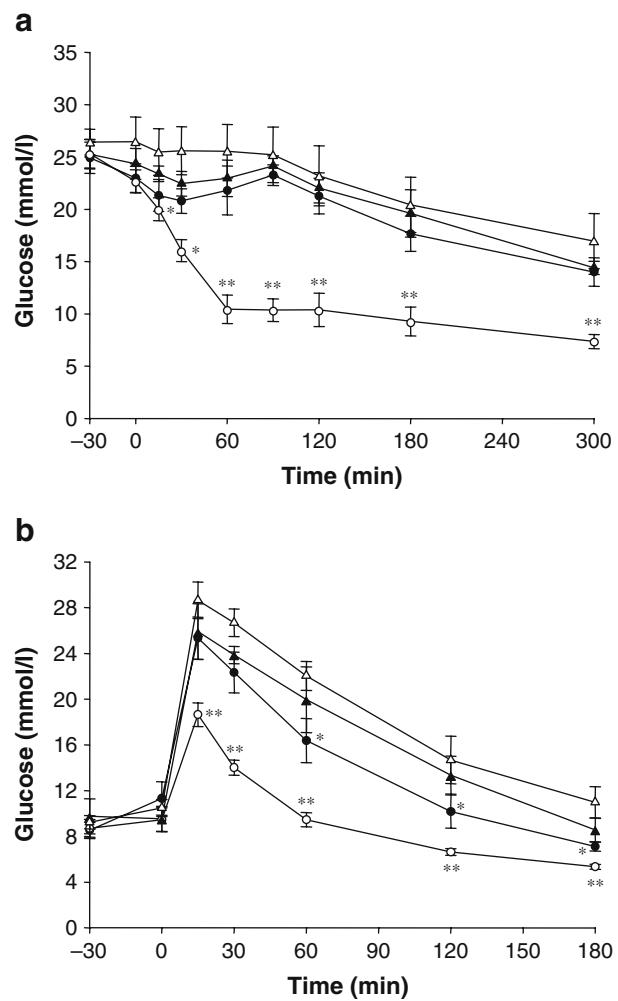
**Glucodynamic profiles *in vivo*** To investigate the biological potency of PEGylated GLP-1 *in vivo*, equivalent doses (9 nmol/kg) of the peptides were administered to *db/db* mice by i.p. injection (Fig. 2a). Blood glucose reduced significantly after the administration of Lys-PEG/GLP-1 as compared with GLP-1 or saline. Furthermore, Lys-PEG/GLP-1 reduced basal glycaemia by 59.0±10.5% within 2 h (10.4±2.7 vs 25.2±5.9 mmol/l for saline, *p*<0.01), and glycaemia remained stabilised for up to 5 h post-injection. The glucose AUC<sub>0–5h</sub> for Lys-PEG/GLP-1 was also significantly (*p*<0.001) reduced compared with that for



**Fig. 1** In vitro biological activities of PEGylated GLP-1 analogues. **a** Stimulation of insulin secretion from isolated rat pancreatic islets in the presence of various doses of GLP-1 (filled circles), Lys-PEG/GLP-1 (empty circles) or N-PEG/GLP-1 (filled triangles). Rat islets were isolated and then statically incubated (20 islets per sample) for 2 h at 37°C in the presence of 16.7 mmol/l glucose. Insulin release was measured by RIA. **b** Insulin secretion stimulation from isolated rat pancreatic islets by 10 nmol/l of GLP-1, Lys-PEG/GLP-1 or N-PEG/GLP-1, or without peptide (empty triangles) in the presence of various glucose concentrations for 2 h at 37°C. Results are presented as means±SEM ( $n=6$ )

saline, whereas GLP-1 only induced small changes (glucose AUC<sub>0-5 h</sub> values for saline, GLP-1, Lys-PEG/GLP-1 and N-PEG/GLP-1 were 109.7±28.5, 95.0±13.2, 53.4±13.7, and 101.2±12.6 [mmol/l] h<sup>-1</sup>, respectively).

Dose-response relationships between GLP-1 or PEGylated GLP-1 and glucose tolerance were investigated (Fig. 2b). The administration of GLP-1 at a dose of 1 or 3 nmol/kg did not appreciably improve glucose tolerance. However, GLP-1 at a dose of 9 nmol/kg showed enhanced glucose elimination. This was evident from reductions in the glucose level and the glucose AUC<sub>0-3h</sub> (42.1± 5.8 ( $p<0.05$ ) and 37.0±7.9 [mmol/l] h<sup>-1</sup> ( $p<0.01$ ), for 3 and 9 nmol/kg of GLP-1, respectively, vs 55.2±10.1 [mmol/l] h<sup>-1</sup> for saline). In contrast, Lys-PEG/GLP-1 markedly



**Fig. 2** Effect of a single i.p. injection of saline (empty triangles), GLP-1 (filled circles), Lys-PEG/GLP-1 (empty circles) or N-PEG/GLP-1 (filled triangles) in female *db/db* mice. **a** Blood glucose levels in fed *db/db* mice after an i.p. injection of saline or peptide (9 nmol/kg). **b** Blood glucose levels in overnight-fasted *db/db* mice during an oral glucose tolerance test (1.5 g/kg) performed 30 min after an i.p. injection of saline or the administration of 3 nmol/kg of peptide. Results are presented as means±SEM ( $n=6$ ). \* $p<0.05$  and \*\* $p<0.01$  vs saline-treated control mice

improved glucose tolerance, with significantly lower blood glucose levels achieved throughout the study period compared with saline and with native GLP-1. When Lys-PEG/GLP-1 (1, 3 or 9 nmol/kg) was administered, significant dose-dependent reductions in the peak blood glucose level and the glucose AUC<sub>0-3h</sub> were observed (31.3±5.7, 27.5±1.8 and 22.3±1.5 [mmol/l] h<sup>-1</sup>, respectively,  $p<0.01$  vs saline). The administration of N-PEG/GLP-1 did not alter blood glucose levels significantly.

## Discussion

In this study we investigated the metabolic stability, biological activity and the acute effects of site-specific PEGylated Lys-PEG/GLP-1 as a potential replacement for GLP-1. We first investigated the impact of PEGylation on

the metabolic stability of GLP-1 in vitro. It was hypothesised that conjugation of inert polymeric water-soluble substances on peptide surfaces could sterically hinder the approach of proteolytic enzymes [9], and that this would substantially improve in vivo stability. In the present study, compared with GLP-1, N-PEG/GLP-1 and Lys-PEG/GLP-1 showed much longer half-lives in plasma and in liver and kidney homogenates.

The biological activity of PEGylated GLP-1 analogues was investigated in vitro using pancreatic islets. Lys-PEG/GLP-1 was almost as potent at stimulating insulin secretion as GLP-1, and did so in a dose- and glucose-dependent manner. These findings suggest that the PEG molecule at lysine effectively protects GLP-1 from proteolytic enzyme attack without altering its biological activity. In contrast, N-PEG/GLP-1 showed improved stability but significantly lower biological activity compared with Lys-PEG/GLP-1.

In order to determine if the PEGylated GLP-1 analogues are potential treatments for type 2 diabetes, we evaluated the acute antihyperglycaemic effects by administering them by i.p. injection to diabetic *db/db* mice. Our findings show that Lys-PEG/GLP-1 produced the desired biological effect in a dose-dependent manner. Furthermore, Lys-PEG/GLP-1 significantly reduced peak blood glucose levels after OGTT. This finding is further substantiated by our previous pharmacokinetic results in rats [6]. Taken with our enzyme-resistance results, Lys-PEG/GLP-1 shows greater longevity than GLP-1 in plasma under physiological conditions. The combination of augmented beta cell insulin secretion, increased insulin sensitivity (i.e. by OGTT) and improved half-life in plasma explain the durable glucose-lowering effect of Lys-PEG/GLP-1. From this point of view, Lys-PEG/GLP-1 fulfilled all the features expected of a PEGylated GLP-1.

This study demonstrates that site-specific PEGylated GLP-1 analogues are resistant to degradation. In addition,

their enhanced biological potencies highlight their potential as new GLP-1-like glucose-lowering agents.

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**Duality of interest** The authors are not aware of any duality of interest.

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