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### <u>Abstract</u>

Pharmacological treatments can extend mouse lifespan, but lifespan effects often differ between sexes. 17-α estradiol (17aE2), a less feminizing structural isomer of 17-β estradiol, produces lifespan extension only in male mice, suggesting a sexually-dimorphic mechanism of lifespan regulation. We tested whether these anti-aging effects extend to anatomical and functional aging – important in late-life health – and whether gonadally-derived hormones control aging responses to 17aE2 in either sex. While 17aE2 started at four months of age diminishes body weight in both sexes during adulthood, in late-life 17aE2-treated mice better maintain body weight. In 17aE2-treated male mice, the higher body weight is associated with heavier skeletal muscles and larger muscle fibers compared with untreated mice during aging, while treatedfemales have heavier subcutaneous fat. Maintenance of skeletal muscle in male mice is associated with improved grip strength and rotarod capacity at 25 months, in addition to higher levels of most amino acids in quadriceps muscle. We further show that sex-specific responses to 17aE2 – metabolomic, structural and functional – are regulated by gonadal hormones in male mice. Castrated males have heavier quadriceps muscles than intact males at 25 months, but do not respond to 17aE2, suggesting 17aE2 promotes an anti-aging skeletal muscle phenotype similar to castration. Finally, 17aE2 treatment benefits can be recapitulated in mice when treatment is started at 16 months, suggesting that 17aE2 may be able to improve aspects of late life function even when started after middle-age.

#### <u>Introduction</u>

- With an increased proportion of individuals living to older ages, a greater proportion of the
- 47 human population suffers from frailty and impaired physical function. Demographic models
- predict that the number of people living to old ages in high income countries will increase (Colby
- 49 & Ortman, 2017; Robine & Cubaynes, 2017), which presents a potentially substantial burden for

50 healthcare and economic systems. Interventions that can slow age-related physical decline and improve health later in life would help to ameliorate this burden, while improving the quality of 51 52 life for elderly adults. Pharmacological treatments are increasingly being recognized as potential 53 methods to slow functional declines during aging in humans (Longo et al., 2015), in addition to reducing the incidence of age-associated morbidities and neurological decline. 54 One area of pharmacological research that has already received attention in the context of aging 55 56 is steroid treatments that seek to redress alterations in circulating sex-hormone concentrations that occur during later life. Manipulation of testosterone and estrogens can improve aspects of 57 physical function in the elderly (Horstman et al., 2012; Stanworth & Jones, 2008), but can also 58 elevate risks of certain diseases, including cancers and cardiovascular disease (Basaria et al., 59 60 2010; Chen & Colditz, 2007), potentially because of their strong binding affinity to classical steroid receptors across the body. More recently, other steroids, with lower binding affinities to 61 62 classical sex-hormone receptors, have been suggested as alternative treatments to protect against aging, while lessening side-effects of diseases linked to classical sex hormone signaling 63 64 (Gonzalez-Freire et al., 2016; Madak-Erdogan et al., 2016). 17-α estradiol (17aE2), a less feminizing structural isomer of 17-β estradiol, has been shown to extend lifespan in male mice 65 66 (Strong et al., 2016), while also improving glucose tolerance and lowering the abundance of circulating inflammatory cytokines (Garratt et al., 2017; Stout et al., 2016). Effects of 17aE2 on 67 68 lifespan and metabolism are strongly sex-specific, with neither lifespan (Strong et al., 2016) nor adult glucose tolerance (Garratt, et al., 2017) detectably affected by 17aE2 in female mice. 69 70 While 17aE2 has male-specific benefits for survival, we have limited understanding of whether 71 these effects extend to functional, pathological or biochemical age-associated changes, and 72 whether slowed aging responses outside of survival also differ between males and females. 73 Furthermore, we currently have a poor understanding of what mechanisms underlie sexual 74 dimorphism in response to anti-aging interventions, observed with 17aE2, but also an increasing 75 number of other pharmacological and genetic interventions (Austad & Fischer, 2016), including 76 reduced IGF1 (Garratt et al., 2017; Holzenberger et al., 2003) and mTORC1 signaling (Garratt et 77 al., 2016; Lamming et al., 2012; Selman et al., 2009). Our previous research has shown that sex-

specific metabolic responses to 17aE2 in adulthood are linked to the presence of male gonads,

such that male-specific improvements in glucose tolerance are inhibited if males are castrated

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- prior to the onset of treatment (Garratt, et al., 2017; Garratt et al., 2018). However, whether
- gonadal hormones control the anti-aging effects of 17aE2, or any other sexually dimorphic anti-
- aging manipulation, has not been tested.
- In this study we show that 17aE2 treatment has anti-aging effects for body weight regulation,
- muscle weight and physical function, and that these effects differ strongly between males and
- 85 females. We used two independent cohorts of mice to probe these effects, while establishing the
- 86 underlying hormonal causes for the observed sex-specificity, and to test whether the anti-aging
- effects of this treatment can be recapitulated by treatment beginning in middle-age. In cohort 1,
- all mice underwent a brief surgery at 3 months of age, where gonads (testes or ovaries) were
- 89 either removed (gonadectomy) or exposed but remained in place (sham gonadectomy). These
- animals then began 17aE2 treatment at 4 months of age, or stayed on a control diet, and were
- euthanized at 25 months. Animals in cohort 2 did not undergo any surgery and were euthanized
- at 22 months. The main cohort of animals began 17aE2 treatment at 4 months, while a subset
- remained on the control diet until 16 months of age, but were then switched to 17aE2 treatment
- at 16 months of age. This allowed us to test whether a late onset treatment of 17aE2 can also
- 95 produce functional benefits later in life, and to compare the anti-aging effects of treatment onset
- at these two time points.

#### Results

- 98 17aE2 maintains body weight during aging in both sexes, but has sex-specific effects on
- 99 body composition: intact, sham operated animals (Cohort 1)
- In the first cohort of mice treated with 17aE2 from 4 months we recorded body weight monthly
- across life (Fig 1A). Effects of 17aE2 on body weight differed depending on life-stage (p = 0.001
- for the interaction between 17aE2 treatment and time in a repeated measures ANOVA of
- monthly body weights), but were similar in intact (sham-operated) animals of both sexes (p=
- 104 0.32 for the 3-way interaction between sex, treatment and time:; p = 0.61 for the interaction
- between sex and treatment; Fig 1B), as previously reported (Strong et al., 2016). 17aE2 reduces
- weight gain over approximately the first 12 months of life (Fig 1B), as shown by the change in
- weight between 4 to 9 months in figure 1B. This presumably reflects the reduction in adiposity
- that occurs with the onset of 17aE2 treatment (Steyn et al., 2018; Stout et al., 2016). However,

109	we observed that during aging 17aE2 slows the decline in body weight that occurs over late-life
110	periods. This is most clearly illustrated by the change in weight from between 19 to 24 months of
111	age (Fig 1B). At 25 months, all animals were euthanized, and major organs and fat pads
112	weighed, allowing us to test whether late-life weight effects were linked to alterations in the
113	weight of specific tissues (see Table S1 for weights of all tissues). In female mice, 17aE2
114	increased the weight of subcutaneous inguinal fat at 25 months (Fig 1C), apparently contributing
115	to the maintenance of body weight between 19-24 months in females. In males, 17aE2 did not
116	significantly alter the weight of inguinal fat (Fig 1C) but led to an increased skeletal muscle
117	weight at 25 months as assessed by quadriceps weight (Fig 1D). This effect of 17aE2 persists
118	whether assessing total muscle weight or muscle weight corrected by body weight (Fig 1E&F),
119	and represents a significant sex-specific response, in that there was a significant interaction
120	between sex and treatment in an ANCOVA model including body weight as a covariate (Table
121	1). The effect of 17aE2 on muscle weight was also age-specific, since quadriceps weight in a
122	subset of animals from cohort 1 euthanized at 12 months of age was not altered by 17aE2
123	treatment (Figure S1A), and muscle weight of 25 month old control animals was significantly
124	lower than in muscles taken from a set of 6 month old untreated animals of the same strain that
125	were euthanized, dissected and weighed over the same period (Figure S1B).
126	17aE2 maintains skeletal muscle fiber size during aging in male mice: intact animals
127	(Cohorts 1&2)
128	To understand whether the delay in sarcopenia represents changes at the level of the individual
129	muscle fibers, we first measured muscle fiber size at 25 months. Fiber cross-sectional areas
130	(CSA) were measured in gastrocnemius muscles collected from animals in cohort 1 and fixed in
131	10% buffered formalin immediately at dissection. Compared to samples taken from 6 month old
132	young controls, 25 month old intact control mice showed a reduction in average muscle fiber
133	CSA, an effect that was ameliorated in intact male mice treated with 17aE2 from 4 months (Fig
134	2A&B Table 1). Fiber CSA showed a similar response to 17aE2-treatment in intact female mice
135	(Fig 2B; Table 1). We also observed that intact male mice treated with 17aE2 maintained typical
136	muscle fiber morphology during aging, and did not present the severe angular deformation of
137	muscle fibers observed in untreated old animals (Hepple et al., 2004; Purves-Smith et al., 2012)
138	(Fig 2C). This represents a sex-specific response as indicated by the sex by treatment interaction

139	term (Table 1) and the fack of response in this parameter in 17aE2 treated females (Fig 2C). Old
140	animals also showed characteristic accumulation of fibers with central nuclei, a change that was
141	not significantly inhibited by 17aE2 treatment in either sex (Table 1; Fig 2D).
142	The gastrocnemius muscle is made up of a mix of muscle fiber types, although the large majority
143	are type 2b fast-twitch muscle fibers. Fast-twitch muscle fibers typically show the greatest
144	atrophy during aging, with fewer changes observed in slow-twitch oxidative fibers (Russ et al.,
145	2012). In the second cohort of mice sampled at 22 months, we assessed whether the effects of
146	17aE2 on muscle fiber size were fiber type specific, by examining the size of individual muscle
147	fibers of different fiber types within the gastrocnemius muscle. Given the increase in fiber size
148	observed in the gastrocnemius muscles of cohort 1, we also weighed gastrocnemius muscles of
149	animals in cohort 2, which showed that this skeletal muscle was significantly heavier in 17aE2-
150	treated male mice compared to controls ( $P = 0.006$ , data is plotted in a subsequent figure (Fig.
151	6)), with no change in females, demonstrating a sex-specific response (Table 1). 17aE2 treatment
152	increased the CSA of fast-twitch glycolytic type2b muscle fibers in gastrocnemius muscle (Fig
153	2E), without affecting the CSA of oxidative type 1 or type 2a fibers, which also did not change
154	significantly with age (Table 1; Figure S2; see Figure S2 for representative images for each
155	muscle fiber type). We also assessed CSA of muscle fibers in the soleus muscle, which is
156	comprised almost entirely of type 1 and type 2a muscle fibers, with type 2b fibers absent
157	(Kammoun et al., 2014). Data from soleus muscles further demonstrated a lack of change in the
158	size of these oxidative skeletal muscle fibers with aging (Fig S3) - consistent with previous
159	reports (Williams et al., 2002) - or 17aE2 treatment (Fig S3), indicating a predominant effect of
160	17aE2 on fast-twitch muscle fibers. In cohort 2, we also measured the weight of the quadriceps
161	muscles. Similar to the findings in the 25 month old mice of cohort 1, at 22 months, the
162	quadriceps muscle weight was greater in 17aE2 treated male mice than in untreated controls (Fig
163	S1C), although at this age the P value did not reach the traditional criterion for statistical
164	significance ( $P = 0.052$ ).
165	17aE2 treatment improves grip strength and rotarod performance in aging intact male
166	mice (Cohorts 1&2)
167	To test whether the effects of 17aE2 treatment on muscle aging are associated with
168	improvements in late life physical function we assessed forepaw grip strength and rotarod

169	performance. Forepaw grip strength was assessed at 22 months in cohort 2 and was lower in
170	these animals than in a comparable set of 6 month old controls (Fig 3A; Table 1). 17aE2
171	treatment improved male grip strength but had no effect on female grip strength (Fig 3A). We
172	assessed rotarod performance at 24 months of age in cohort 1 using an acceleration protocol
173	where mice where tested for their ability to balance on a progressively accelerating rotarod. The
174	ability of mice to maintain balance on the rod declines with age, while 17aE2 treatment
175	significantly improves balance ability in intact male mice (Fig 3B). Female performance was not
176	affected by 17aE2 treatment, and these sex-specific effects were also replicated independently in
177	cohort 2 (show in subsequent Figure 6). We also tested whether differences in performance
178	under these tests could be accounted for by changes in body weight that can occur with 17aE2
179	treatment. The relationship between grip strength and body weight across male mice was not
180	significant (p = 0.79 for effect of body weight as a covariate), suggesting that variation in body
181	weight between groups does not account for the improved grip strength in male mice treated with
182	17aE2. Rotarod performance was negatively related to body weight (Fig 3C; p = 0.002 for effect
183	of body weight as a covariate). When this negative relationship was accounted for by including
184	weight as a covariate, mice treated with 17aE2 still showed improved rotarod performance
185	relative to body weight (Fig 3C), although the p-value for an effect of 17aE2 treatment in cohort
186	1, when including body weight as a covariate, failed to reach statistical significance ( $p = 0.062$ ).
187	We note that the same relationship between body weight, rotarod performance and 17aE2
188	treatment was observed in males in cohort 2 at 22 months. Combining both datasets to increase
189	statistical power revealed a significant effect of 17aE2 treatment in male mice across both
190	cohorts ( $p = 0.015$ ), even when accounting for variation in weight by including body weight as a
191	covariate.
192	17aE2 generates sexually dimorphic responses in skeletal muscle amino acid abundance
193	(Cohort 1)
193	(Collort 1)
194	To test whether sex-specific morphological responses to 17aE2 during aging were matched by
195	sex-specific biochemical changes in muscle we conducted an untargeted analysis of primary
196	metabolites in quadriceps muscle sampled at 25 months from Cohort 1. Using a 2-way ANOVA
197	to identify metabolites showing a sex-specific response to 17aE2 in intact (sham-operated)
198	animals, we observed 8 metabolites that showed a significantly different response to 17aE2

199 treatment in each sex after correction for False Discovery Rate (i.e. a sex by treatment interaction 200 effect: Table 2), seven of which were amino acids, and the other was glycolic acid (Figs 4A; 201 Table 2). Additional analysis of other amino acids detected in this screen showed this was a 202 relatively consistent response in amino acids (Table 2; Fig S4), and reflects an increase in amino 203 acid abundance with 17aE2 treatment in males, but a reduction in females. Because the abundance of most amino acids is highly correlated we used principal component 204 205 analysis to convert the abundance data from all 15 amino acids generated from all samples in cohort 1 into fewer principal components that explained variation across amino acids. This 206 analysis produced one major principal component (PC1) that explained 51% of the variance 207 across the dataset and was significantly correlated with the abundance of all amino acids, 208 209 although the relationship was strongest with serine and weakest with alanine (Fig 4B), reflecting the strength of treatment responses seen for individual amino acids (Table 2). The second and 210 211 third principal components extracted in this model only explained 6% and 1% of variation, respectively. There is a strong sex by treatment interaction for PC1 scores in sham-operated 212 213 animals (P<0.001). This reflects an elevated abundance of amino acids in intact females on the control diet, but a switch under 17aE2 treatment, with intact males increasing amino acids and 214 215 females showing a significant reduction (Fig 4B). Sex-specific amino acid responses to 17aE2 are dependent on gonadal hormones (Cohort 1) 216 We used the principal component analysis to test whether the sex-specific amino acid responses 217 218 to 17aE2 were dependent on the production of gonadally-derived hormones, by comparing 219 metabolite responses to 17aE2 in mice that were gonadectomized at 3 months, prior to 17aE2 220 treatment, with responses observed in sham-operated (intact) animals. While intact males show an elevation in amino acids with 17aE2 treatment, this effect is blocked in males that were 221 222 castrated prior to drug treatment. This is reflected in the lack of response in PC1 to 17aE2-223 treatment in castrated males (Fig 4B), and the failure of 17aE2 treatment to increase the 224 abundance of any amino acid in castrated males (Table 2). In a 2-way ANOVA of PC1 scores 225 comparing the effect of surgical status (intact or castrated) and drug treatment (control or 17aE2) 226 in male mice, there is a strong interaction term (P = 0.003), further demonstrating that the male 227 response to 17aE2 depends on the presence of male gonads. In females, ovariectomy prior to 228 treatment also blocked the female-specific declines in amino acids (Fig 4B), and there was an

229	interaction between surgical status and treatment $(F = 0.011)$ , indicating that the animo acid
230	responses to 17aE2 in intact animals of both sexes were linked to the presence of male and
231	female gonads.
232	Increased amino acids in muscle may represent a consequence of altered protein synthesis or
233	breakdown, both of which can be regulated by the actions of gonadally-derived hormones
234	(Rossetti <i>et al.</i> , 2017). To explore whether sexually-dimorphic responses to 17aE2 extend to
235	mechanisms regulating protein synthesis and autophagy, we assessed the status of protein
236	substrates involved in autophagy and protein translation in samples taken from a subset of
237	animals in cohort 1 at 12 months of age. Males and females show a strong difference in relative
238	LC3BII to LC3BI levels, a marker of autophagosome formation, with females having greater
239	LC3BII relative to LC3BI, as previously reported (Tao <i>et al.</i> , 2018). This could be a
240	consequence of either greater autophagosome formation or slowed autophagic degradation in
241	female mice (Mizushima & Yoshimori, 2007). Importantly, the sex-difference is completely lost
242	with 17aE2 treatment, with males and females showing different responses to 17aE2 treatment
243	(sex by treatment interaction term: P =0.002). Specifically, males show an increase in relative
244	LC3BII abundance after 17aE2 treatment (Fig 4C), while LC3BII declines in 17aE2-treated
245	females. In untreated animals, male castration increases LC3BII, as previously reported (Serra et
246	al., 2013), and female ovariectomy reduces LC3II (Fig 4C). Neither castrated males nor
247	ovariectomized females show a significant change in LC3II levels with 17aE2 treatment. The
248	surgery by treatment interaction test within each sex provides statistical support for a different
249	response to $17aE2$ treatment in OVX females compared to intact females (P = $0.008$ ), but not in
250	the comparison of castrated to intact males $(P = 0.18)$ .
251	We also examined effects of 17aE2 on mTORC1 signaling, a key regulator of protein synthesis
252	that has sexually-dimorphic effects on physiology and aging in mice (Lamming et al., 2012). We
253	observed no changes in relative phosphorylation of S6 and 4EBP1, downstream targets of
254	mTORC1 (Fig S5). We also assessed total protein levels of 4EBP1, since genetically engineered
255	over-expression of 4EBP1 can protect against male-specific adiposity and dysregulated insulin
256	sensitivity (Tsai <i>et al.</i> , 2015). Relative 4EBP1 protein levels are strongly reduced in male mice
257	treated with 17aE2 (Fig 4D), but unaffected by treatment in females, with the sex-difference in
258	protein levels seen in animals on the control diet lost with 17aE2 treatment (sex by treatment

interaction: p = 0.006). The sex-difference in 4EBP1 protein levels is also not observed in gonadectomized animals on the control diet (Fig 4D), although these animals show a similar response to intact animals when treated with 17aE2 (surgery by treatment interaction P <0.1 in both sexes).

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#### Functional and structural responses to 17aE2 are blocked by male castration (Cohort 1)

We also assessed whether sex-specific responses to 17aE2 in muscle structure and function were regulated by gonadal hormones, by comparing responses to 17aE2 in sham operated and castrated animals in cohort 1. Males castrated prior to 17aE2 treatment showed no increases in the weight of the quadricep muscle with 17aE2 treatment (Fig 5A: data for sham-operated males are replicated from figures 1-2), indicating that the male-specific response only occurs in males exposed to testicular production of hormones from 3 months of age. Castrated males have larger quadricep muscle weights than intact males on the control diet at 25 months, and 17aE2 treatment in intact males causes an increase in quadriceps weight to the level seen in untreated castrated males. This effect was the opposite of the castration effect in untreated animals on muscle weight seen in a subset of animals dissected at 12 months of age, where castrated males tended to have a lighter quadriceps muscle weight (Fig S6), consistent with the short-term effects of castration on skeletal muscle weight in adulthood (Jiao et al., 2009). Similar to quadriceps weight, castrated male mice show no change in muscle fiber size with 17aE2 treatment, and again untreated castrated males have a larger skeletal muscle fiber CSA than that of equivalent untreated intact males (Fig 5B). This lack of responsiveness to 17aE2 treatment was also observed at the functional level, since castrated males showed no improvement in rotarod acceleration capacity with 17aE2 treatment (Fig 5C; intact male data is replicated from Fig 3). Intact and castrated males did not differ significantly in their rotarod scores in the untreated state. Females that were ovariectomized prior to treatment show similar treatment responses for each of these traits when compared to intact females (Table 1), and also showed an increase in inguinal fat mass similar to that observed in intact females (Figure 5D; surgery by treatment interaction: p = 0.81).

#### Anti-sarcopenic benefits of 17aE2 can be recapitulated by late-life treatment (Cohort 2)

In the second cohort of animals exposed to 17aE2 treatment, we evaluated a randomly selected subset of mice where treatment with 17aE2 began at 16 months of age. This allowed us to test whether the benefits of 17aE2 treatment for skeletal muscle aging and physical function could be recapitulated with a treatment beginning after middle-age, an approach that may have advantages in some clinical settings if applied to humans. Male mice treated with 17aE2 from 16 months showed a larger gastrocnemius muscle weight at 22 months when compared to untreated animals, with this improvement being equivalent to that seen in individuals treated from 4 months (Fig 6A). The line of best fit shown in Fig 6a overlaps in male mice treated from these two different age points, making it difficult to discern the two lines in the figure panel. Female mice treated with 17aE2 from 16 months do not show a change in gastrocnemius muscle weight when compared to controls or animals treated with 17aE2 from 4 months.

This cohort of animals was also assessed for accelerating rotarod balance capacity. Like cohort 1, intact male mice treated with 17aE2 in cohort 2 again showed an improved rotarod capacity, with males treated from 16 months of age showing an equivalent improvement in performance to that seen with treatment from 4 months (Fig 6B). We further assessed the endurance capacity of mice by testing them at lower and fixed rotation speed over a longer duration. Male mice treated with 17aE2 showed a longer endurance capacity than untreated males. The difference between control mice and mice treated with 17aE2 from 16 months was statistically significant, showing a benefit of late-life treatment, whereas the difference between mice treated from 4 months and controls did not reach statistical significance (Fig 6C).

#### Discussion

Pharmacological treatments that extend the lifespan of laboratory organisms deserve consideration as guides to interventions that could improve healthy aging in humans (Longo *et al.*, 2015). A key criterion is that lifespan extension should be associated with improved physical function and health, which has not always been met when functional tests have been performed on long-lived animals (Bansal *et al.*, 2015; Richardson *et al.*, 2015). In this study we show that the lifespan extension observed with 17aE2 is associated with reduced age-associated sarcopenia and improved late-life physical function, benefits that can be gained even from a 6 month treatment period beginning at middle-age. However, these effects largely occur in a sex-specific manner, matching the lifespan response seen with this treatment (Strong *et al.*, 2016). Among the

317	outcomes we tested, only elevations in skeletal muscle fiber size and reduced body weight
318	occurred to a similar degree in both sexes. The similar changes in body weight in both sexes are
319	particularly notable, since reductions in body weight with the onset of 17aE2 treatment have
320	been linked to reduced feeding behavior as a consequence of actions at hypothalamic pro-
321	opiomelanocortin (POMC) expressing neurons (Steyn et al., 2018). The observation that body
322	weight declines in both sexes with 17aE2, but functional benefits occur only in males, could
323	suggest that the beneficial anti-aging effects of 17aE2 are not purely a consequence reduced
324	body weight and consumption of fewer calories, because we would expect this to be beneficial
325	both sexes. Ultimately normalization of food intake between controls and 17aE2 is required to
326	definitively test this, either via a controlled feeding approach or by using a mouse model without
327	functional POMC-expression. Previous use of mice lacking POMC-expression has shown some
328	metabolic responses to 17aE2 can occur without changes in weight and feeding (Steyn et al.,
329	2018), supporting the hypothesis that health benefits of 17aE2 are independent of reductions in
330	calorie intake.
331	We used an untargeted primary metabolism screen to identify metabolic responses that are linked
332	to the observed male-specific elevations in skeletal muscle weight during aging. This
333	demonstrated that 17aE2-treated males show an increase in amino acids in quadriceps at 25
334	months. Notably female mice instead showed a decline in the abundance of some amino-acids
335	with 17aE2, although these females had muscle weights equivalent to control animals, indicating
336	the relationship between 17aE2, muscle weight and amino acid abundance is not bidirectional. In
337	a previous study, we observed that this elevation in males (and decline in females) is not
338	observed in quadriceps taken from animals with equivalent treatment at 12 months of age,
339	indicating that effects of 17aE2 on the metabolome may differ depending on age (Garratt et al.,
340	2018), matching the age-specific effects on muscle weight. To directly test whether the observed
341	elevations in amino acid levels occur as a consequence of net alterations in protein synthesis or
342	breakdown requires metabolic flux analysis, which was not possible in the long-term aging
343	studies designed here. However, our results suggest that 17aE2 induces changes in cellular
344	processes involved in both protein synthesis and autophagy in adult mice, and these responses
345	correspond to changes in amino acids in terms of reducing a sex-difference observed in animals
346	on a control diet. LC3BII levels were elevated in male mice treated with 17aE2, indicating
347	altered autophagosome formation. In addition, total 4EBP1 abundance was reduced, without

348	altered phosphorylation at sites activated by mTORC1. 4EBP1 is a translation initiation factor
349	that when associated with eIF4E inhibits cap-dependent translation. A reduction in abundance of
350	4EBP1 is expected to promote protein translation (Morita et al., 2013). Given the role of both
351	autophagy and protein translation in the causal control of the aging in some species (Hansen &
352	Rubinsztein, 2018; Steffen & Dillin, 2016), detailed studies that directly assess the effects of
353	17aE2 on autophagic flux, protein synthesis and metabolomic flux, in both sexes, may provide
354	an insight into sexually dimorphic cellular processes that modulate muscle mass and turnover
355	during aging.
356	Our study was designed to provide causal insight into the endocrine mechanisms that underlie
357	sex-specific responses to 17aE2, and demonstrates that anti-aging responses to this treatment are
358	controlled by the presence of sex-specific gonads. These results are consistent with our previous
359	research showing that metabolic responses to 17aE2 in adult life are also dependent on gonadal
360	hormones (Garratt, et al., 2017; Garratt et al., 2018). We observed that skeletal muscle
361	phenotypes induced by 17aE2 resemble those observed in untreated castrated males, and that
362	castrated males do not respond to 17aE2 treatment, either in relation to muscle weight, physical
363	function or in their quadriceps metabolomic response. We have tested whether 17aE2 reduces
364	circulating levels of testosterone in male mice but detected no observable decline in circulating
365	testosterone levels in response to this treatment (Figure S7). However, testosterone is released
366	from the testes in a pulsatile manner (Coquelin & Desjardins, 1982), making it difficult to
367	accurately assess some measures of testosterone exposure without detailed kinetic studies. In a
368	new cohort of C57BL/6J mice treated with 17aE2 from 3 months of age for seven weeks we
369	observed a highly consistent reduction in seminal vesicle weight (Figure S7), a reproductive
370	organ that is very sensitive to circulating testosterone and its metabolite dihydrotestosterone
371	(DHT), a more potent androgen in terms of binding affinity to the androgen receptor. This
372	indicates that 17aE2 does reduce aspects of androgenic signaling, potentially explaining the
373	resemblance of specific phenotypes to castrated males, and the lack of response in castrated
374	males that already have low testosterone and DHT.
375	Although male mice treated with 17aE2 resemble castrated males in a set of skeletal muscle
376	phenotypes, it is important to note that other aspects of sexual dimorphism normally controlled
377	by gonadal hormones remain intact after 17aE2 treatment. Sex-differences in the circulating

concentrations of IGF1, leptin and adiponectin persist with 17aE2 treatment (Garratt, et al.,
2017), in spite of the dependence of these sexual dimorphisms on gonadal hormones. The role of
testicular and ovarian hormone release in control of sexual dimorphism is governed by sex
steroids and their metabolites at various different levels, and at different developmental time
points, and we speculate that adult-onset 17aE2 treatment may interfere with steroidogenic
actions at specific sites while leaving others intact. For example, 17aE2 is capable of suppressing
5-alpha reductase activity <i>in vitro</i> , the main enzyme that mediates conversion of testosterone to
DHT (Schriefers et al., 1991). This would be expected to dampen signaling through the androgen
receptor, including reducing the weight of seminal vesicle glands, without major feedback effects
on other aspects of the hypothalamic-pituitary-gonadal axis (HPG) (Mahendroo et al., 2001).
Alternatively, 17aE2 could alter HPG axis feedback through binding to estrogen receptors in
specific brain areas, which in male mice is partly mediated by negative feedback of the HPG axis
after aromatization of testosterone to $17\beta$ estradiol (Fisher <i>et al.</i> , 1998). At the dose provided in
this study 17aE2 is capable of activating classical estrogen receptors (ER) in mice, as evidenced
the uterotrophic effects observed in ovarectomized female mice (Strong et al., 2016). Such
stimulation in regions like the hypothalamus and pituitary could elicit negative feedback for the
HPG axis, suppressing LH and FSH release and subsequent gonadal hormone release, while
maintaining ER activation in the brain. In female mice, 17aE2 reduced the abundance of amino
acids in muscle, and this female-specific metabolomic effect was not seen in ovariectomized
females, similar to ovarian hormone-dependent female-specific metabolomic responses in the
liver (Garratt et al., 2018). This indicates that some female-specific responses to 17aE2 are also
dependent on ovarian hormones and would be consistent with the idea that 17aE2 interferes with
the HPG axis in both sexes, but that this interference has observable beneficial health effects
only in males. We have also shown that treating male mice with 17aE2 leads to a major male-
specific increase in hepatic estriol levels (Garratt et al., 2018), suggesting that 17aE2 may also be
metabolized to additional estrogens in a sex-specific way. Understanding the causal role
individual aspects of steroid signaling in aging, in central and peripheral tissues, may provide a
major insight into the role of specific components of the HPG axis in aging in both sexes. This
might ultimately lead to more precise pharmacological agents that provide the beneficial effects
of sex-steroid signaling while minimizing or ablating their negative effects on other aspects of
aging.

## **Experimental procedures**

A detailed outline of all experimental procedures and statistical approaches is found in the supplementary information. UM-HET3 mice were produced and maintained as previously described (Miller et al., 2014; Strong et al., 2008). Mice were given free access to water and were fed Purina 5LG6 after weaning. Mice were group housed in ventilated cages and were transferred to fresh cages every 14 days. Temperature was maintained within the range of 21–23 °C. At three months of age all animals in cohort 1 went through castration, ovariectomy or a sham procedure as previously described (Garratt et al. 2017; Garratt et al. 2018). Cohort 2 did not go through surgeries and had normal gonadal hormone production.

#### Diets: Cohorts 1&2

At four months of age, animals were randomly allocated to control or 17aE2 treatment. Animals in the control group remained on the 5LG6 diet, while animals allocated to 17aE2 had their diet switched to a food containing this drug at 14.4 ppm (see Harrison *et al.* 2016). In cohort 2, a randomly selected subset of animals was maintained on the control diet until 16 months of age, and then were switched to be treated with 17aE2 for the last 6 months of treatment.

#### **Rotarod and Grip strength tests**

Animals in cohort 1 were tested for their ability to balance on an accelerating rotarod at 24 months of age. Animals were placed on the rotarod and the trial began with the spindle revolving at 5 revolutions per minute (RPM) and increased to 40 RPM gradually over a 5 min period. The time at which the animal fell off the rotarod was used as a score, with each animal tested three times and the mean score used in analysis. The second cohort underwent the same testing protocol at 22 months of age. A subset of animals in cohort 2 were tested for grip strength using an EB1-BIO-GT3 grip strength meter with an EB1-GRIP-Mouse Grid. Subjects were removed from their cage by the base of the tail and suspended above the grip until their forepaws griped the grid. The tail was gently pulled in a horizontal direction away from the grid until the mouse released its grip. The maximal force was recorded. Each animal was tested six times with a 10

- sec rest between each. The mean of the six tests was used for analysis. All tests were conducted
- by an experimenter blind to treatment group and surgery status.

### Euthanasia, tissue harvesting and processing

- Animals were euthanized and tissues harvested during the morning after 18 hr of fasting. Tissues
- were weighed and then immediately frozen with liquid nitrogen and stored at -70 °C unless
- otherwise stated. Deleted methodology for western blots, metabolomics, histology and
- immunofluorescence are in the supplementary information.

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581	

# Figure Legends

582

Figure 1. Changes in body weight, skeletal muscle and subcutaneous fat weight in male and female mice treated with 17aE2. Data presented in (A) shows the mean body weights of male and female mice from

585	cohort 1 on control or 17aE2 diets across life, while in (B) the change in weight is shown calculated from
586	two specific time points. Data in (C) and (D) show the weights of inguinal fat and quadriceps weight at
587	dissection, either plotted against body weight individually for each mouse, or the mean weight of each
588	group. Error bars represent the standard error of the mean (S.E.M.). P values for quadriceps and inguinal
589	weight were calculated from a Student's t-test. N = 11-20 per group.
-00	
590	<b>Figure 2.</b> Increased skeletal muscle fiber size and reduced atrophy in 17aE2 treated male mice. (A)
591	Representative images of cross-sections of gastrocnemius muscles (X20 magnification) from young (6
592	months), old (25 months) and old mice treated with 17aE2. (B) Average fiber CSA determined from
593	cross-sections of the gastrocnemius muscle, while (C) and (D) show scores for degree of angular atrophy
594	and centralization of nuclei across different treatment groups in cohort 1 (25 months). (E) Type-2b fiber
595	CSA from mice in cohort 2 (sampled at 22 months). Error bars represent S.E.M. P values are calculated
596	from a Student's t-test. $N = 8-15$ per group for panels A-D, 5-6 for Fig 2E.
597	Figure 3. 17aE2 increases grip strength and rotarod capacity of aging male mice. (A) forepaw grip
598	strength in 22 month old male and female mice treated with 17aE2, and young (6 month) and old (22
599	month) controls (Cohort 2, $N = 8-9$ per group for males, $8-29$ for females). (B) rotarod capacity in 24
500	month old male and female mice treated with 17aE2, young (6 month) and old controls (24 month) (n =
501	15-20 per group). (C) The relationship between grip strength/rotarod capacity and body weight in old
502	male mice, with each dot representing values for an individual mouse. Error bars represent S.E.M. and P
503	values are calculated from a Student's t-test.
505	values are calculated from a Student's t-test.
504	Figure 4. 17aE2 causes a sex-specific amino acid response in quadriceps that is regulated by gonadal
505	hormones. (A) metabolites showing a sex-specific treatment response. Box plots tails show min and max
506	values. (B) Principal component analysis showing amino acid factor loadings for PC1 and sex, treatment
507	and surgery scores for PC1. (C) LC3BII and (D) 4EBP1 abundance in mice of different surgical, sex and
508	treatment status, assessed in whole cell muscle homogenate using western blot. Error bars represent
509	S.E.M. and P values are calculated from a Student's t-test. $N = 6-8$ per group.
510	<b>Figure 5.</b> Functional and structural benefits of 17aE2 treatment in males are inhibited in males castrated
511	prior to treatment. (A) Quadriceps weight ( $N = 9-16$ per group) (B) gastrocnemius muscle fiber size ( $N = 9-16$ per group) (B) gastrocnemius muscle fiber size ( $N = 9-16$ per group)
512	8-16 per group) and (C) rotarod capacity (N = 11-20 per group) in sham operated and gonadectomized
513	males and females, examined at 25 months of age (24 m for rotarod capacity). Error bars represent S.E.M.
514	and P values are calculated from a Student's t-test.

Figure 6. Benefits of 17aE2 treatment for muscle weight and rotarod function are recapitulated with
treatment starting from 16 months. (A) The relationship between gastrocnemius muscle weight and body
weight in 22 month old mice on a control diet, 17aE2 from 4 months of age or 17aE2 treatment beginning
at 16 months of age. (B) Rotarod acceleration and (C) endurance capacity in mice at 22 months. Each dot
represents a value for an individual mouse ( $N = 9-36$ per group). P values are calculated from an LSD
post-hoc test after establishing an overall group effect in a 1-way ANOVA.

Cohort	Effect o	f age	Effect of 17aE2	Sex by 17aE2	Surgery by	Surgery by treatment
	Change	P value		treatment	treatment	interaction: Female
	J			interaction	interaction: Male	
Quadriceps 1&2	Decreased	<0.001	Increased in males	0.004	<0.001	0.34
weight						
Gastrocnemius1	Decreased	0.006	Increased (P =0.010	0.91		
fiber size			for both sexes)			
Angular atrophy 1	Increased	0.001	Decreased in males	0.030	0.010	0.78
of fibers						
Rotarod 1&2	Decreased	0.006	Increased in males	0.064	0.010	0.80
Performance						
Centralization of 1	Increased	0.006	-	-		
fiber nuclei						
Gastrocnemius 2	Decreased	0.058	Increased in males	0.041	Not tested	
weight				0.041		
Grip strength 2	Decreased	P<0.001	Increased in males	0.047	Not tested	
Type 2b fiber 2	Decreased	0.037	Increased (P = 0.018	0.047		
CSA (gastroc)	Decreased	0.037	for both sexes)	0.24		
Type 2a fiber 2	Unchanged		ioi botti sexes)			
• •	Unchanged	-	-			
CSA (gastroc)						
Type 1 fiber 2	Unchanged	-	-			
CSA (gastroc)						
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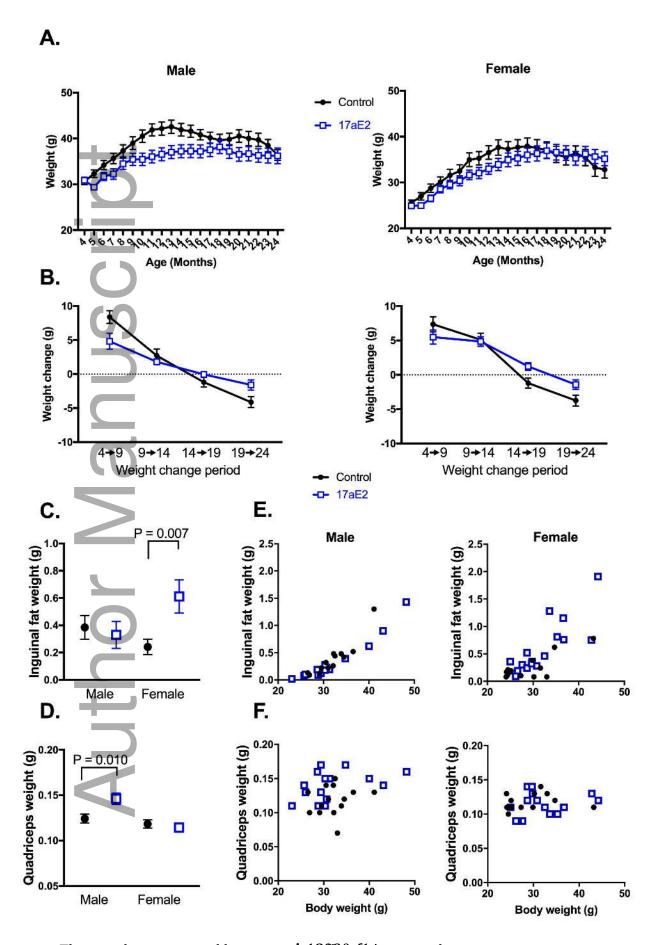
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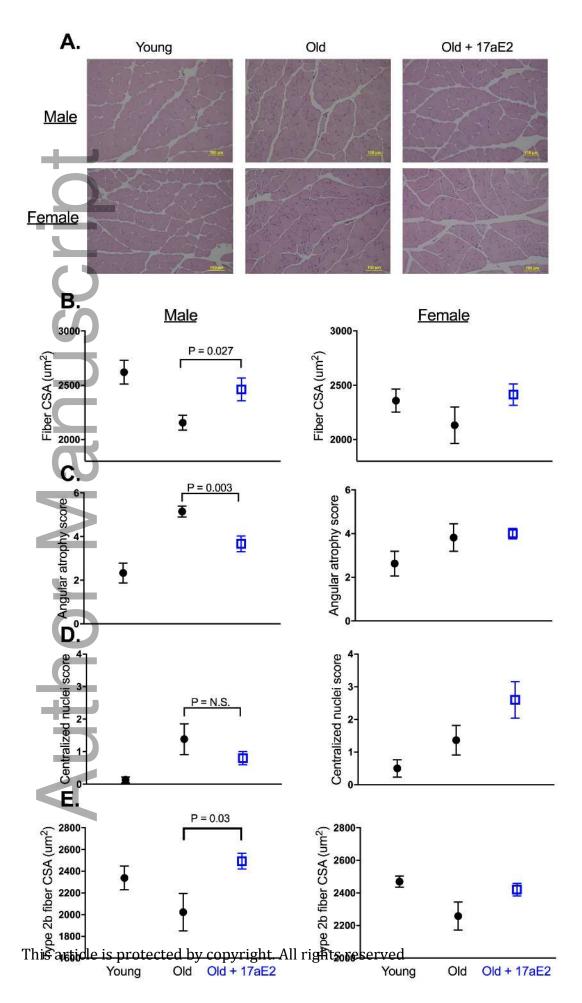
Table 1. Effect of age, 17aE2 treatment and sex on skeletal muscle and functional traits. P values for age effects represent the main effect of age in a 2-way ANOVA, including both age and sex as variables. P values for interaction terms were also calculated from a 2-way ANOVA, including a effect of treatment (control or treatment) and a second term representing either sex or surgical status. For quadriceps weight, body weight was also included as a continuous covariate in the analysis to account for variation in body weight across mice.

**Table 2.** Quadriceps muscle metabolites showing a sex-specific response to 17aE2 treatment. Sex-specific metabolites represent those metabolites that show a significant sex by treatment interaction after correction for FDR. P values presented in this table are uncorrected for multiple comparisons.

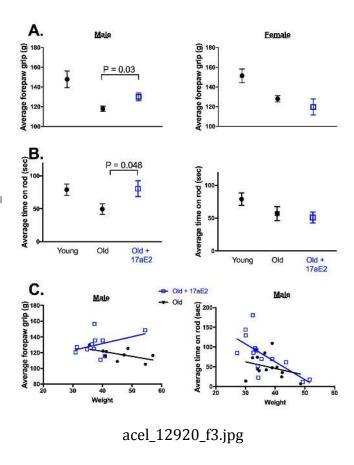
Metabolite	Treatment interaction (P-value 2 – way ANOVA)				Effect of 17aE2 (P-Value Student's t-test)							
+	Sex	Cast	OVX	Male		Female		Cast Male		OVX Female		
	(intact mice)	(male)	(female)									
Sample size control				8		7		8		8		
Sample size 17aE2				9		8		8		8		
Sex-specific metabolites												
Isoleucine	0.00003	0.015	0.15	<b>↑</b>	0.011	•	0.001					
Serine	0.00011	0.005	0.018	<b>↑</b>	0.003	•	0.019					
Aspartic acid	0.0005	0.003	0.002	<b>↑</b>	0.019	•	0.009	•	0.087	<b>1</b>	0.066	
Leucine	0.00075	0.52	0.029			•	0.001					
Valine	0.001	0.020	0.039	<b>↑</b>	0.056	•	0.005					
Glycolic acid	0.00152					<b>↑</b>	<0.0001					
Phenylalanine	0.0027	0.010	0.031	<b>↑</b>	0.028	•	0.044					
Methionine	0.0027	0.001	0.039	<b>↑</b>	0.006					<b>1</b>	0.092	
Other amino acids												
Tryptophan	0.030	0.008	0.17	<b>↑</b>	0.073							
Threonine	0.006	0.005	0.24	<b>↑</b>	0.002							
Lysine	0.021	0.001	0.15	<b>↑</b>	0.015			•	0.042			
Glycine	0.018	0.048	0.25	<b>↑</b>	0.062							
Glutamic acid	0.12	0.50	0.044			•	0.087					
Cysteine	0.005	0.029	0.054	<b>↑</b>	0.072	•	0.032					
Alanine	0.86	0.48	0.76			<b>↑</b>	0.093					

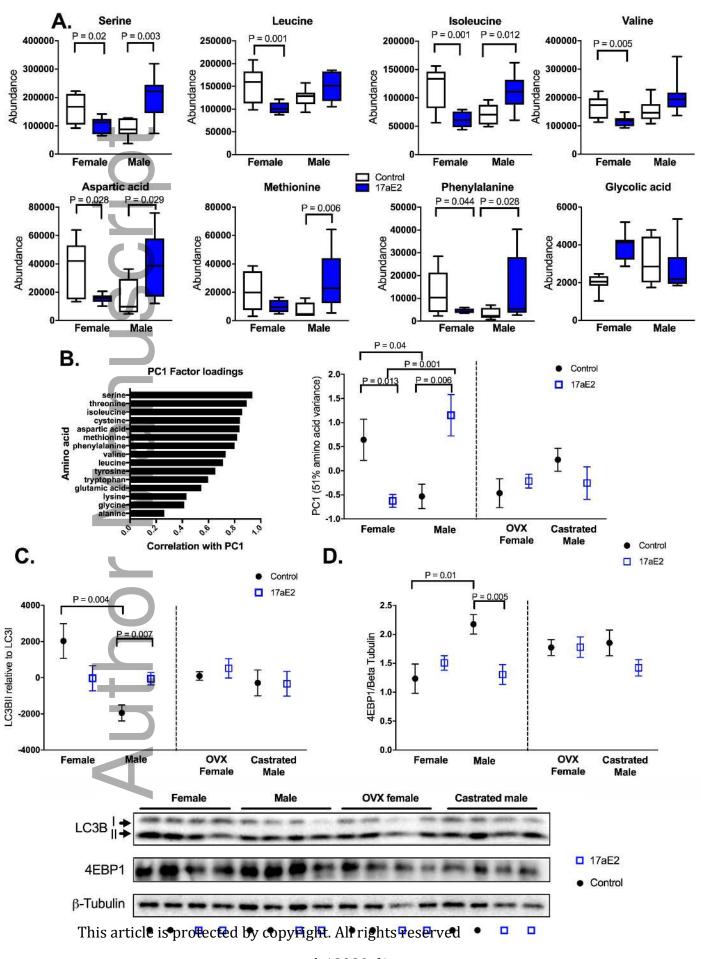


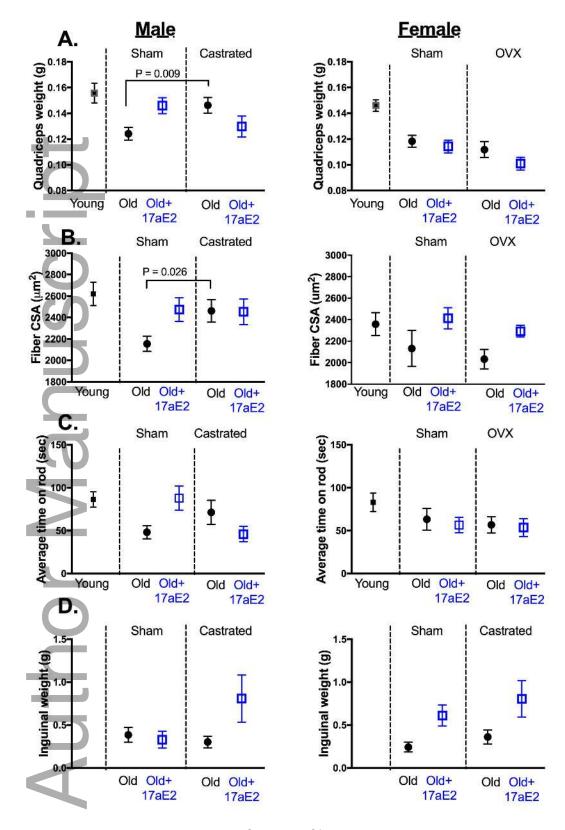
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