

1 **Post-exercise cold-water immersion modulates skeletal muscle PGC-1 α**
2 **mRNA expression in immersed and non-immersed limbs: evidence of**
3 **systemic regulation**

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Running Head: Cold-water immersion and PGC-1 α

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42 **New & Noteworthy**

43 We report for the first time that post-exercise cold-water immersion of one limb also
44 enhances PGC-1 α expression in a contra-lateral non-immersed limb. We suggest increased
45 systemic β -adrenergic stimulation, and not localised cooling per se, exerts regulatory effects
46 on local signalling cascades thereby modulating PGC-1 α expression. These data therefore
47 have important implications for research designs that adopt contralateral non-immersed limbs
48 as a control condition, whilst also increasing our understanding of potential mechanisms
49 underpinning cold-mediated PGC-1 α responses.

50 **Author Contributions**

51 Conception and design of the experiments: RA, WG, JM, APS, BD; Collection, analysis and
52 interpretation of data: RA, APS, JD, JM, WG, SS, GC; Drafting the article and Critical
53 Revision of the article for important intellectual content: RA, APS, GC, SS, BD, JD, JM,
54 WG. All authors approved the final version for publication and agree to be accountable for all
55 aspects of the work.

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63 **Abstract**

64 Mechanisms mediating post-exercise cold-induced increases in PGC-1 α gene expression in
65 human skeletal muscle are yet to be fully elucidated, but may involve local cooling effects on
66 AMPK and p38 MAPK related signalling and/or increased systemic β -adrenergic stimulation.
67 We aimed to therefore examine whether post-exercise cold-water immersion enhancement of
68 PGC-1 α mRNA is mediated through local or systemic mechanisms. Ten subjects completed
69 acute cycling (8x5 min at ~80% peak power output) followed by seated-rest (CON) or single-
70 leg cold-water immersion (CWI; 10 min, 8°C). Muscle biopsies were obtained pre-, post- and
71 3 h post-exercise from a single limb in the CON condition but from both limbs in CWI
72 (thereby providing tissue from a CWI and non-immersed limb, NOT). Muscle temperature
73 decreased up to 2 h post-exercise following CWI (-5°C) in the immersed limb, with lesser
74 changes observed in CON and NOT (-3°C; $P<0.05$). No differences between limbs were
75 observed in p38MAPK phosphorylation at any time point ($P<0.05$), whilst a significant
76 interaction effect was present for AMPK phosphorylation ($P=0.031$). Exercise (CON)
77 increased gene expression of PGC-1 α 3 h post-exercise (~5-fold; $P<0.001$). CWI augmented
78 PGC-1 α expression above CON in both the immersed (CWI; ~9-fold; $P=0.003$) and NOT
79 limbs (~12-fold; $P=0.001$). Plasma Normetanephrine concentration was higher in CWI vs.
80 CON immediately post-immersion (860 vs. 665 pmol/L; $P=0.034$). We report for the first
81 time that local cooling of the immersed limb evokes transcriptional control of PGC1- α in the
82 non-immersed limb, suggesting increased systemic β -adrenergic activation of AMPK may
83 mediate, in part, post-exercise cold-induction of PGC-1 α mRNA.

84 **Key Words:** PGC-1 α , CWI, Normetanephrine, AMPK

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87 **Introduction**

88 It is well established that the transcriptional co-activator peroxisome proliferator-activated
89 receptor γ coactivator-1 α (PGC-1 α), the proposed “master regulator” of skeletal muscle
90 mitochondrial biogenesis (37), is sensitively controlled by acute and chronic exercise (3, 4,
91 10, 36). Upstream control of PGC-1 α includes phosphorylation by energy and stress sensing
92 kinases AMP-activated protein kinase (AMPK) (23) and p38 mitogen-activated protein
93 kinase (p38 MAPK) (2). Consistent with its initial discovery as cold-inducible (34, 38),
94 recent studies have examined the potential of acute post-exercise cold exposure to also
95 modulate PGC-1 α expression. For example, in human tissue, both cold-ambient temperatures
96 (42, 43) and post exercise cold-water immersion (18, 20) enhances the skeletal muscle PGC-
97 1 α gene transcription and protein translational response versus exercise alone. The precise
98 mechanism(s) mediating cold-induced regulation of the PGC-1 α transcriptional pathway have
99 yet to be fully determined, though the cooling-induced alterations in muscle blood flow (14,
100 30) are unlikely to mediate these effects (33, 45). It is noteworthy, however, that chronic
101 cold-induced changes in PGC-1 α protein content arise in conjunction with increased activity
102 of signalling kinases AMPK and p38 MAPK (18). These data suggest that cooling of the
103 skeletal muscle tissue may play a role in mediating the post-exercise cold-induction of PGC-
104 1 α mRNA through activation of local signalling kinases.

105 Alternatively, systemic control via increased β -adrenergic activity is suggested to play a
106 potent role in mediating the effects of cold exposure on PGC-1 α expression via AMPK (29)
107 and β 2-adrenergic receptor (31) mechanisms. Indeed, plasma norepinephrine concentrations
108 remain higher following high-intensity exercise after cold-water immersion versus control
109 conditions (13). Studies to date have utilised the non-immersed limb as the control condition
110 without the use of a true control (no cooling) condition (11, 18, 20). By assuming the
111 response to cold-water immersion is mediated locally, such experimental designs do not

112 permit examination of the role of systemic versus localised mechanisms in mediating cold-
113 induced changes in PGC-1 α . Indeed, Ihsan et al. (20) observed that PGC-1 α gene
114 transcription was not induced in a non-immersed control limb, despite the limb having
115 previously been exercised, and exercise being a potent stimulus to induce PGC-1 α
116 expression. This would therefore suggest that an induction of PGC-1 α expression in an
117 immersed limb occurred by way of cold-induced mechanisms. In this regard, we suggest that
118 the increased systemic β -adrenergic activity associated with post-exercise cooling of the
119 immersed limb could also modulate PGC-1 α expression in the non-immersed contralateral
120 limb.

121 Therefore, the aim of the present study was to examine whether the cold-water induced
122 increase in PGC-1 α mRNA observed post exercise is mediated through local or systemic
123 mechanisms. To this end, we employed a novel experimental design (in a repeated measures
124 crossover design) where ten recreationally active males completed an acute cycling protocol
125 (8x5 min at ~80% peak power output) followed by a seated-rest condition (CON) or single-
126 leg cold-water immersion (CWI; 10 min, 8°C). Muscle biopsies were obtained pre-, post- and
127 3 h post-exercise from a single limb in the CON condition but from both limbs post-exercise
128 in the CWI trial (thereby providing tissue from a CWI and non-immersed limb, NOT). In this
129 way, our design allowed us to obtain tissue from true control conditions but yet, also sample
130 tissue from an immersed and non-immersed limb that was subject to the same hormonal
131 milieu.

132

133 **Methods**

134 *Subjects.* Ten recreationally active healthy males (age 26 ± 4 y; body mass 79.29 ± 6.73 kg;
135 height 180 ± 5 cm; $\dot{V}O_{2peak}$ 51.46 ± 9.07 mL.kg⁻¹.min⁻¹; peak power output (PPO) $265.2 \pm$

136 38.33 W; mean \pm SD) participated in this study. Subjects were instructed to refrain from
137 exercise, alcohol and caffeine 48 hours prior to the test day. All subjects gave written
138 informed consent to participate after details and procedures of the study had been fully
139 explained. Subjects had no history of neurological disease or musculoskeletal abnormality
140 and none were under any pharmacological treatment during the course of the study. Each
141 subject was medically screened by a practising GP prior to participation for their individual
142 risk associated with high-intensity exercise, muscle biopsy procedures and immersion in cold
143 water. All procedures performed in the study were approved by the Ethics Committee of
144 Liverpool John Moores University and in accordance with the 1964 Helsinki declaration and
145 its later amendments.

146 *Experimental Design.* In a repeated-measures crossover design, subjects completed two high-
147 intensity intermittent cycling protocols followed either by 10 min seated rest (CON) or
148 single-leg CWI (10 min at 8°C). Muscle biopsies were obtained from the vastus lateralis
149 immediately before, post- and 3 h post-exercise. During the CWI trial muscle biopsies in the
150 post-exercise period were taken from both the immersed and non-immersed leg. This design
151 allowed us to assess the impact of the cold stimulus locally (immersed leg) and systemically
152 (non-immersed leg) against a relevant resting control. Both experimental trials were
153 conducted in a counterbalanced, randomized order with at least 10 days between conditions.

154 *Experimental Protocol.* Subjects attended the laboratory on 3 separate occasions. On the first
155 occasion, subjects completed an incremental exercise test to fatigue for the determination of
156 $\dot{V}O_{2max}$ and PPO (15). Results from this test were used to determine the power output
157 necessary for cycling at a proportion of PPO on subsequent test days (detailed below). Prior
158 to the first test day, subjects completed a 24-hour food diary to be replicated before the
159 second trial. Upon arrival at the laboratory (0900h) subjects were fitted with a heart-rate
160 monitor (Polar RS400, Kempele, Finland), skin and rectal temperature probes (MHF-18050-

161 A and MRV-55044-A, Ellab, Rodovre, Denmark). Legs were marked for subsequent
162 insertion of muscle temperature needles; area of insertion was calculated as half the length of
163 the femur, over the 'belly' of the vastus lateralis. The needle thermistor was then placed at a
164 depth of 3cm, plus one-half of the skinfold measurement, for the determination of deep
165 muscle temperature (3cm). Following 10-min resting in a supine position, baseline measures
166 of heart rate (HR), temperature and oxygen uptake ($\dot{V}O_2$; Oxycon Pro, Jaeger, Wuerzberg,
167 Germany) were assessed. Resting venous blood samples were drawn from a superficial vein
168 in the anti-cubital crease of the forearm using venepuncture cannulation (BD Nexiva Closed
169 IV Catheter 22G Blue, Becton Dickinson, Oxford, UK). Resting muscle temperature was
170 assessed using a needle thermistor (13050; Ellab, Rodovre, Denmark) inserted into the vastus
171 lateralis at 3cm depth as previously described (30). Finally, resting muscle biopsy samples
172 from the vastus lateralis (~30–50 mg wet wt) were obtained under local anaesthesia (0.5%
173 marcaine) using a Pro-Mag 2.2 biopsy gun (MD-TECH, Manan Medical Products,
174 Northbrook, IL). At rest only a single leg was biopsied in the cooling trial (CWI) in attempt
175 to reduce the stress experienced by subjects. This leg was randomised between the immersed
176 and non-immersed limbs to exclude potential variation caused by leg dominance; all
177 subsequent biopsies were completed in both legs, at each time point, 2cm proximal to the
178 previous incision.

179 Following the resting biopsy, subjects completed a high-intensity intermittent cycling
180 protocol consisting of 8×5 min bouts at 82.5% PPO separated by 1 min rest (adapted from
181 44) followed by either single-legged CWI (CWI: 10 min at 8°C; NOT: non-immersed leg i.e.
182 10 min at room temperature) or a control condition (CON; seated rest). CWI was conducted
183 using a specialised seated mechanical hoist to lower the subject so that one leg was placed
184 inside the cold-bath, allowing the other (NOT) to remain outside, and dry. Subjects then
185 recovered in a semi-reclined position under normal laboratory temperatures (~21°C) until 3-

186 hours post-exercise. Measures of heart rate, skin temperature (thigh and calf) and rectal
187 temperature were recorded throughout the exercise and recovery periods. Oxygen uptake was
188 measured during the final minute of each high-intensity bout of exercise, during immersion,
189 immediately post-immersion and again at 1, 2 and 3 h post-exercise. Ratings of perceived
190 exertion (RPE) were assessed during the final minute of each exercise bout (5), whilst
191 subjective measures of perceived shivering were assessed throughout water immersion and
192 the 3h recovery period using a visual analogue scale from 1 (No shivering) to 5 (Intense
193 Shivering) (24). Laboratory temperatures remained stable throughout ($21.18 \pm 0.76^{\circ}\text{C}$) and at
194 no point were subjects allowed to rub themselves dry or shower (changing into dry shorts
195 after immersion was allowed). Subjects were advised to wear the same clothes between trials.
196 Muscle temperature was assessed post-exercise, immediately post-immersion and at 1, 2 and
197 3h post-exercise. Venous blood samples were also drawn at these times. Bi-lateral muscle
198 biopsies occurred immediately after exercise and 3h post-exercise.

199 Venous blood samples were drawn from a superficial vein in the anti-cubital crease of the
200 forearm using standard venepuncture techniques (BD Nexiva Closed IV Catheter 22G Blue,
201 Becton Dickinson, Oxford, UK). Blood samples (~10ml) were collected into vacutainer tubes
202 (Becton Dickinson, Oxford, UK) containing EDTA and stored on ice until centrifugation at
203 $1500 \text{ rev. min}^{-1}$ for 15-min at 4°C . Following centrifugation, aliquots of plasma were stored at
204 -80°C for later analysis. Plasma metanephrine and Normetanephrine concentrations were
205 measured using liquid chromatography tandem mass spectrometry as previously described
206 (35). All samples were analysed in duplicate, with the mean value employed.

207 *rt-qRT-PCR*. Skeletal muscle samples (~30 mg) were transferred to 2 ml lysing tubes
208 containing 1.4 mm ceramic beads (Lysing Matrix D, MP Biomedicals, UK) containing 1 ml
209 ice-cooled TRI- reagent (Life Technologies Ltd, UK) and homogenised at 6 m/s for 3 x 40
210 seconds, separated by 5 minutes cooling on ice (MP Fastprep-24, MP Biomedicals, UK).

211 RNA was extracted according to the TRI-reagent manufacturer's instructions. RNA
212 concentration and purity were assessed by UV spectroscopy at ODs of 260 and 280 nm using
213 a Nanodrop 3000 (Fisher, Roskilde, Denmark). A target of A_{260} / A_{280} ratio was set at 1.8 to
214 2.2. Seventy ng RNA was used for each PCR reaction. Primer sequences (Table 1) were
215 identified using Gene (NCBI, <http://www.ncbi.nlm.nih.gov/gene>) and designed using Primer-
216 BLAST (NCBI, <http://www.ncbi.nlm.nih.gov/tools/primer-blast>). Sequence homology
217 searches ensured specificity and that all primers had no potential unintended targets. The
218 primers were ideally designed to yield products spanning exon-exon boundaries to prevent
219 any amplification of gDNA. Three or more GC bases in the last five bases at the 3' end of the
220 primer were avoided. Secondary structure interactions (hairpins, self-dimer and cross dimer)
221 within the primer were avoided. All primers were between 16 and 25 bp, and amplified a
222 product of between 67-212 bp. Primers were purchased from Sigma (Suffolk, UK).

223 rt-qRT-PCR amplifications were performed using QuantiFastTM SYBR[®] Green RT-PCR one
224 step kit on a Rotor-gene 3000Q (Qiagen, Crawley, UK) supported by rotor-gene software
225 (Hercules, CA, USA). rt-qTR-PCR was performed as follows: hold 50°C for 10 min (reverse
226 transcription/cDNA synthesis), 95°C for 5 min (transcriptase inactivation and initial
227 denaturation step) and PCR steps of 40 cycles; 95°C for 10s (denaturation), 60°C for 30s
228 (annealing and extension). Upon completion, dissociation/melting curve analysis were
229 performed to reveal and exclude non-specific amplification or primer-dimer issues (all melt
230 analysis in this study presented single reproducible peaks for the reference gene and each
231 target gene suggesting amplification of a single product). Following initial screening of
232 suitable reference genes, GAPDH showed the most stable C_t values across all RT-PCR runs,
233 subjects and regardless of experimental condition ($23.54 \pm 1.69 C_t$; 7% Co-efficient of
234 variation) and was selected as the reference gene in all RT-PCR assays. The average PCR
235 efficiency was 90% and variation for all genes was less than 4.3%. The relative gene

236 expression levels were calculated using the comparative C_t ($\Delta\Delta C_t$) equation (41) where the
237 relative expression was calculated as $2^{-\Delta\Delta ct}$ and where C_t represents the threshold cycle.
238 mRNA expression for all target genes was calculated relative to the reference gene (GAPDH;
239 subject's own samples reference) within same subject and condition and to a calibrator of
240 Pre-exercise.

241 *SDS-PAGE and Western Blotting.* Approximately 30 mg of frozen muscle was homogenized
242 using 2.4 mm ceramic beaded tubes (6 m/s for 3 x 40 seconds, separated by 5 minutes
243 cooling on ice; MP Fastprep-24, MP Biomedicals, UK), in 500 μ l of ice-cold lysis buffer [25
244 mM Tris·HCl (pH 7.4), 50 mM NaF, 100 mM NaCl, 5 mM EGTA, 1 mM EDTA, 10 mM
245 Na-pyrophosphatase, 1% Triton X-100] and supplemented with a protease phosphatase
246 inhibitor cocktail (Halt Protease and Phosphatase Inhibitor 186 Cocktail, Thermo Scientific, #
247 78442). The resulting homogenates were centrifuged at 14,000 g for 10 min at 4°C, and the
248 supernatant was collected. The protein content of the supernatant was determined using a
249 bicinchoninic acid assay (Sigma, UK). Each sample was diluted with an equal volume of 2X
250 Laemmli buffer (National Diagnostics) and boiled for 10 min at 100°C. Forty μ g of total
251 protein from each sample was loaded (65 μ g for phosphorylated analytes) and then
252 separated in Tris-glycine running buffer (10x Tris/glycine, Geneflow, Staffordshire, UK)
253 using self-cast 10% separating [33% Protogel; (30% w/v acrylamide: 0.8% (w/v) Bis-
254 Acrylamide stock solution (37.5:1)), 25% Protogel resolving buffer (1.5M Tris-HCL, 0.4%
255 SDS, pH 8.8), 41% ddH₂O, 100 μ l 10% APS, 20 μ l TEMED] and 4% stacking [13% Protogel,
256 25% Protogel Stacking buffer (0.5M Tris HCL, 0.4% SDS, pH 6.8), 61% ddH₂O, 100 μ l 10%
257 APS, 20 μ l TEMED] gels (National Diagnostics, Geneflow, UK). Gels were transferred
258 semidry onto nitrocellulose membrane (Transblot Turbo, BioRad) for 30 min at 25V and 1.0
259 mA in transfer buffer [10% TRIS/glycine (Sigma), 20% methanol, 70% ddH₂O). After
260 transfer, membranes were briefly washed in TBST (0.19 M Tris pH 7.6, 1.3 M NaCl, 0.1%

261 Tween-20] before being blocked for 1 h at room temperature in TBST with 1% BSA. The
262 membranes were then washed for 3 x 5 min in TBST before being incubated overnight at 4°C
263 with antibodies for anti-phospho-AMPK Thr172 (cat no: 2532), p38 MAPKThr180/Tyr182
264 (cat no: 9211) (Cell Signalling) as well as total protein content of AMPK (cat no: 2531), p38
265 MAPK (cat no: 9212) (Cell Signalling, UK), GAPDH (25778; Santa Cruz), and PGC-1 α
266 (Calbiochem, Merck Chemicals, UK) all at concentrations of 1:1000 in 1 x TBS. The
267 following morning, membranes were washed for a further 3 x 5 min in TBST and
268 subsequently incubated with goat anti-rabbit horseradish peroxidase-conjugated secondary
269 antibody (Bio-Rad, UK) for 1h at room temperature. After a further 3 x 5 min washes in
270 TBST, membranes were exposed in a chemiluminescence liquid (SuperSignal, Thermo Fisher
271 Scientific, Rockford, IL) for 5 min (30 sec for GAPDH). Membranes were visualized using a
272 Bio-Rad Chemi-doc system, and band densities were determined using Image Lab image-
273 analysis software (Bio Rad, UK). Samples from each subject for all exercise conditions were
274 run on the same gel and statistical analysis conducted on raw densitometry data.
275 Phosphorylated AMPK^{Thr172} and p38 MAPK^{Thr180/Tyr182} were normalised to their total
276 protein, as these did not change significantly across blots or samples ($P > 0.05$). PGC-1 α was
277 normalised to GAPDH.

278 *Statistical analysis.* All data are presented as mean \pm SD, unless otherwise stated. Baseline
279 data, distance cycled, exercise HR and RPE were compared between conditions using a
280 Paired Samples T-test. A two-factor (two condition \times time) within-participants general linear
281 model was used to evaluate the effect of time (baseline v post exercise) with shared baseline
282 data used for NOT and CWI (Statistical Package for the Social Sciences version 21.0; SPSS
283 Inc., Chicago, IL). A two-factor (three condition \times time) within-participants general linear
284 model was subsequently used to evaluate the influence of the cooling intervention following
285 exercise and the 3h post exercise period. The main effects for condition and time was

286 followed up using planned LSD multiple contrasts. Where a significant condition by time
287 interaction was observed, the post exercise to 3h post exercise change scores were calculated
288 and compared across the 3-conditions using LSD multiple contrasts. The ES magnitude was
289 classified as trivial (<0.2), small (>0.2-0.6), moderate (>0.6-1.2), large (>1.2-2.0) and very
290 large (>2.0-4.0) (17). The α level for evaluation of statistical significance was set at $P < .05$.

291

292

293 **Results**

294 *Exercise Response.*

295 Distance cycled (CON 32.52 ± 4.21 km, CWI 32.33 ± 4.33 km; $P = 0.629$, ES 0.04 Trivial),
296 heart rate ($P = 0.309$, ES 0.13 Trivial), $\dot{V}O_2$ (ml/kg.min⁻¹; $P = 0.855$, ES 0.02 Trivial) and
297 RPE ($P = 0.637$, ES 0.08 Trivial) were similar between CON and CWI trials (data not
298 shown). Mean HR during the final minute of exercise was 182 ± 8 beats.min⁻¹ in CON and
299 183 ± 8 beats.min⁻¹ in CWI, equating to ~94% HR max. The RPE in the final exercise bout
300 was 19 ± 1 AU and 19 ± 1 AU in the CON and CWI trials respectively.

301

302 *Recovery Response.*

303 *Metabolic Responses.* Heart rate (ES 0.90 Moderate) and $\dot{V}O_2$, (ES 1.20 Moderate) was
304 higher in CWI vs CON during the post-exercise recovery period (Table 2; $P < 0.001$). The
305 change in HR and $\dot{V}O_2$, over time was also different between conditions ($P < 0.001$) with
306 increases in HR and $\dot{V}O_2$, occurring during the initial 2 minutes of immersion. Following
307 immersion, HR and $\dot{V}O_2$ dropped below pre-immersion values and remained lower

308 throughout the 3h recovery period (HR, ES >0.92 Moderate; $\dot{V}O_2$, ES >1.25 Large) ($P <$
309 0.05).

310 *Thermoregulatory Responses.* Rectal temperature was similar between conditions throughout
311 the post-exercise period (CON $37.52 \pm 0.24^\circ\text{C}$, CWI $37.48 \pm 0.05^\circ\text{C}$, ES 0.49 Small, $P =$
312 0.217. The change in rectal temperature over time was different between conditions, with a
313 small decline in rectal temperature occurring after 3 minutes of immersion until 3h post-
314 exercise ($P=0.034$, ES >0.22 Small). Thigh skin temperature was generally lower throughout
315 the post-exercise recovery period in CWI versus CON (ES 6.26 Very Large) and NOT (ES
316 6.46 Very Large) (Figure 1a, $P < 0.001$). The change over time was also different between
317 conditions, with thigh skin temperature continually decreasing in CWI and remaining lower
318 than pre-immersion values until 1h post exercise (ES 3.0 Very Large, $P < 0.001$). Values in
319 CON and NOT limbs remained similar to pre-immersion throughout the 3h recovery period
320 ($P = 0.10$, ES 0.57 Small).

321 Post-exercise muscle temperature (3 cm depth) was similar between CON (38.75°C), CWI
322 (38.86°C) and NOT (38.54°C) (Figure 1b; $P > 0.05$). During the 3 h recovery period muscle
323 temperature (3cm) was lower in CWI versus CON (ES 1.60 Large) and NOT (ES 1.77 Large)
324 ($P < 0.001$). The change in muscle temperature over time was also different between
325 conditions ($P < 0.001$). Muscle temperature declined to a large extent immediately after
326 immersion in the CWI limb, followed by a further gradual reduction during the remaining 3h
327 post-exercise period ($P < 0.001$). In CON and NOT conditions, muscle temperature was
328 reduced to a lesser extent immediately following immersion followed by a further gradual
329 reduction during the 3h post-exercise period ($P = 0.246$, ES 0.34 Small) (See Figure 1b).

330 Subjective shivering ratings were greater in CWI vs CON during the post-exercise recovery
331 period (ES 1.20 Large, $P = 0.067$). The change in shivering over time also tended to be

332 different between conditions ($P = 0.062$), with ‘slight’ shivering observed in the CWI
333 condition during the first 2 minutes following immersion (ES >0.60 Moderate). Slight
334 shivering was also observed 2h post exercise in the CWI condition (ES 0.95 Moderate).

335 *AMPK and P38 MAPK activity and total abundance*

336 Phosphorylation of AMPK^{Thr172} was not increased post-exercise ($P = 0.242$, ES 0.20 Small).
337 At post-exercise and 3h post-exercise phosphorylation of AMPK^{Thr172} was similar between
338 conditions ($P = 0.846$, ES 0.03 Trivial). However, the change in AMPK^{Thr172} between these
339 time points was different between conditions ($P = 0.031$; Figure 2). AMPK^{Thr172}
340 phosphorylation increased in CWI vs. CON ($P = 0.027$, ES 1.22 Large) with a moderate
341 increase in AMPK^{Thr172} phosphorylation also observed in NOT vs. CON ($P = 0.145$, ES 0.70
342 Moderate). Representative Western blots are shown in Figure 5.

343 Exercise induced a small increase in phosphorylation of p38MAPK^{Thr180/Tyr182} ($P = 0.056$, ES
344 0.44 Small, Figure 3). At post exercise and 3h post-exercise phosphorylation of
345 p38MAPK^{Thr180/Tyr182} was similar between conditions ($P = 0.672$; ES 0.03, Trivial). No
346 differences in the change in phosphorylation between these time points was observed
347 between conditions ($P = 0.268$, Figure 3). Representative Western blots are shown in Figure
348 5.

349 *PGC-1alpha mRNA and protein abundance.*

350 PGC-1 α mRNA expression was moderately increased with exercise ($P = 0.066$, ES 0.92
351 Moderate, Figure 4a). At 3h post-exercise, expression was greater in CWI (ES 1.2 Moderate,
352 $P = 0.003$) and NOT (ES 1.6 Large, $P = 0.001$) versus CON, but was similar between CWI
353 and NOT (ES 0.6 Small, $P = 0.141$) (Figure 4a). This reflected the greater change in
354 expression in CWI and NOT conditions between post exercise and 3h post exercise time

355 points ($P = 0.001$, Figure 4a). PGC-1 α protein content was not influenced by exercise ($P =$
356 0.092) or CWI ($P = 0.471$, Figure 4b). Representative Western blots are shown in Figure 5.

357 *Additional gene expression*

358 Exercise induced increases in SIRT1 ($P = 0.057$, ES 0.8 Moderate) and NRF2 ($P = 0.028$, ES
359 0.6 Moderate) mRNA (data not shown). No changes were seen between conditions, or
360 between conditions over time ($P > 0.05$). Gene expression analysis for p53, COXIV, CS,
361 TFAM, SIRT1, NRF2 and ERR α mRNA was not influenced by exercise or CWI ($P > 0.05$;
362 data not shown).

363

364 *Plasma Metanephrine and NorMetanephrine.*

365 Metanephrine concentrations were similar between conditions ($P = 0.159$, ES 0.15 Trivial).
366 The change in metanephrine over time was also similar between conditions ($P = 0.299$).
367 Metanephrine concentration was increased post-exercise (ES 2.46 Very Large) and post-
368 immersion (ES 0.77 Moderate) vs. baseline ($P \leq 0.02$). Normetanephrine values were greater
369 in CWI vs. CON ($P = 0.034$, ES 0.43 Small) with the largest difference seen post-immersion
370 (860 vs. 665 pmol/L, CWI vs. CON, respectively). The change in Normetanephrine over time
371 was similar between conditions ($P = 0.821$). Normetanephrine concentrations increased with
372 exercise (ES >4.70 ; $P < 0.001$) and remained above baseline post-immersion (ES 1.52 Large)
373 and 1hr post-exercise (ES 1.06 Moderate) ($P < 0.001$). Concentrations returned to baseline at
374 2hr post-exercise (See Table 3).

375

376 **Discussion**

377 The aim of the present study was to examine whether the post-exercise cold-water induced
378 increase of PGC-1 α mRNA is mediated through local or systemic mechanisms. Using a novel
379 experimental design, we report for the first time the appearance of systemic “cross-talk”
380 between immersed and non-immersed limbs, as evidenced by the similar increase in PGC-1 α
381 mRNA in these limbs after single-legged CWI. Additionally, we suggest that this effect
382 could be mediated by β -adrenergic induced stimulation of AMPK. In addition to providing
383 novel data on the potential mechanisms mediating post-exercise cold-induced enhancement
384 of PGC-1 α expression, our data also have potential implications for research designs that
385 utilise as non-immersed limbs as control conditions.

386 Since its initial discovery (38) the importance of the post-exercise PGC-1 α response to the
387 oxidative adaptive process has been examined extensively, with mRNA increases ranging 5
388 to 10-fold commonly observed at 3-4 hours following exercise (3, 4, 21, 36). More recently,
389 cold-ambient temperatures (42, 43) and post exercise cold-water immersion (18-20, 24), have
390 also been shown to enhance (~2- to 4- fold greater) the skeletal muscle PGC-1 α gene
391 transcription and protein translational response versus exercise alone. In line with such
392 observations, the high-intensity intermittent cycling protocol used in the present study elicited
393 a ~5-fold increase in PGC-1 α mRNA at 3 hours post-exercise. Furthermore, CWI
394 enhanced this response to a greater extent than exercise alone (~9-fold increase vs. Pre in the
395 CWI immersed limb).

396 There have been suggestions that reduced tissue temperature may be responsible for the
397 differences observed between cold-treated and control limbs. This stems from the initial
398 discovery that PGC-1 α was cold inducible in animals (6, 9, 38). In humans, recent data
399 from Ihsan and colleagues (18, 20) implicates a reduction in tissue temperature in the cold-
400 induced increases of PGC-1 α , as increases in mRNA (3h post-exercise) and protein content
401 (after 4 weeks of training) were seen only in a cooled limb, and not in the contralateral non-

402 immersed limb. Potential mechanisms underpinning such responses include activation of
403 non-noxious thermoreceptors via reduced skin temperature (Hensel & Boman, 1960, 22).
404 Within the present study, both the NOT and CWI limbs displayed similar acute PGC-1 α
405 mRNA expression in the 3 h recovery period, whilst skin and muscle temperature were
406 significantly reduced in the CWI limb only. Indeed, the non-immersed limb (NOT) showed a
407 similar temperature profile (skin and muscle temperature) to that of CON, where the
408 magnitude of PGC-1 α mRNA response was almost half when compared with CWI and NOT.
409 When taken together, these data suggest that alterations to local muscle temperature do not
410 play a significant role in cold-induced regulation of PGC-1 α expression.

411 As a result of increased local PGC-1 α gene expression in the non-immersed exercised limb to
412 a similar magnitude as the immersed limb, we sought to consolidate the role of the upstream
413 kinases AMPK and p38-MAPK (7, 23, 47) in their ability to regulate PGC-1 α transcription.
414 p38MAPK is a stress activated kinase that has been shown extensively to be phosphorylated
415 after acute exercise, independent of intensity (10). Moreover, p38MAPK can exert its effect
416 upon PGC-1 α transcription via upregulated ATF2 activity at the PGC-1 α promoter (2). In the
417 current study, exercise induced a small (ES 0.44, 1.5-fold) increase in phosphorylation with
418 no further response to cooling. Moreover, our data supports previous data showing acute
419 post-exercise phosphorylation of p38MAPK locally in skeletal muscle tissue occurs
420 systemically (46). Exercise-induced intensity dependant AMPK phosphorylation is a well
421 reported phenomenon (8, 12, 28) in rodent and human studies (34, 10). Moreover, AMPK is
422 implicated in PGC-1 α activity via direct phosphorylation, initiating many of the important
423 gene regulatory functions of PGC-1 α in skeletal muscle (23). The post-exercise increase in
424 phosphorylation of AMPK in the present study was similar in magnitude to previous work (3)
425 from our laboratory, albeit failing to achieve statistical significance. Notwithstanding this,
426 large and moderate effect sizes were observed at 3 h post-exercise in the CWI and NOT limbs

427 vs. CON, respectively. These greater increases from post-exercise to 3 h post-exercise in the
428 immersion trial (CWI and NOT limbs), compared to a slight decline in CON suggest the
429 increases in phosphorylation of AMPK during the post-cooling period are controlled by a
430 systemic mechanism, possibly adrenergic control via cold-augmented plasma
431 Normetanephrine.

432 Epinephrine and norepinephrine are both dual α - and β - adrenergic agonists. Previous in
433 vivo and in vitro incubation techniques utilising α - and β - adrenergic agonists have reported
434 increased AMPK activation in rodent skeletal muscle (32), adipose tissue (26) and cell
435 cultures (48) implicating catecholamines as a potential AMPK activator. Despite this, support
436 for the above hypothesis is currently conflicting, and is limited by distinct differences in
437 methodological design and species studied. In rodent muscle, acute infusion of adrenergic
438 agonists/antagonists have previously shown to be ineffective at altering PGC-1 α
439 transcriptional activity (39, 40) and its upstream effector p38-MAPK (25). In contrast,
440 treatment with β -adrenergic agonists/antagonists has been shown to induce and inhibit PGC-
441 1 α respectively (31), whilst incubation of rodent skeletal muscle with the adrenergic agonist
442 phenylephrine increased the activity of the upstream regulator of PGC-1 α , AMPK (32).
443 When results from these studies are taken together, it could be suggested that adrenergic
444 activation of AMPK is a potential mechanism to explain the systemic increases in PGC-1 α
445 gene expression described herein.

446 In humans, one study has investigated the impact of higher catecholamine levels on AMPK
447 phosphorylation in human skeletal muscle (27). These authors assessed muscle biopsies from
448 an exercised and non-exercised limb in conditions of heightened catecholamine release.
449 Results showed AMPK activity was restricted to contracting muscle only, with no systemic
450 effects notable in the non-exercised limb despite the increased catecholamine levels.
451 Importantly, in our study all limbs were exercised before undergoing cold exposure. It

452 therefore may be that the cold induction of β -adrenergic pathways (via increased
453 catecholamines) presented in this manuscript allows an additive response to exercise
454 stimulated AMPK phosphorylation. Further studies are now required to verify this signalling
455 response in related experimental conditions in human skeletal muscle.

456 Another pathway by which increased catecholamine's may enhance PGC-1 α transcription is
457 via increased activation of β -adrenergic receptors. Activation of these receptors increases
458 intracellular cAMP, which could ultimately activate CREB function on the PGC-1 α promoter
459 (1). However, evidence exists to show β -adrenergic stimulation does not activate a
460 p38MAPK - ATF2 - CREB - PGC-1 α signalling axis in skeletal muscle (25). These findings
461 resonate with results from the present study as no changes in phosphorylation of p38MAPK
462 were observed alongside increased plasma Normetanephrine concentrations. Further work is
463 required to investigate the influence of the dual stress of exercise and cold temperature upon
464 this signalling axis.

465 Downstream of PGC-1 α , Slivka and colleagues (42) noted that recovery in cold ambient
466 temperatures (4h in 7°C ambient air) reduced the expression of the transcription factors
467 Nuclear-respiratory factor 2 (NRF2) and estrogen-related receptor α (ERR α), whilst having
468 no effect on mitochondrial transcription factor a (TFAM). Their importance to the adaptive
469 response is highlighted by their roles in oxidative metabolism. Our data suggest the
470 immersion protocol used herein was not sufficient to induce such changes. Indeed, 10
471 minutes of single-legged immersion offers a much smaller cooling stimulus than the 4 hours
472 in cool ambient temperatures, as used by Slivka et al. (42). In addition, an acute increase in
473 PGC-1 α gene expression was not followed by changes in PGC-1 α total protein content,
474 perhaps due to the acute time-frame of sampling applied in the present study. With this lack
475 of change in total protein content it is however, unlikely that changes in gene expression of
476 downstream genes such as NRF2, TFAM, COXIV, CS, ERR α presented here, would be

477 affected by its upstream protein function as a transcription factor (PGC-1 α). More research is
478 required to understand the effect and dose response of a cold stimulus on downstream targets
479 of PGC-1 α .

480 It is difficult to explain the differences in PGC-1 α mRNA results between the present
481 study and Ihsan et al. (20), particularly the difference in non-immersed limbs. Moreover,
482 reasons as to why Ihsan and colleagues failed to see the expected exercise-induced response
483 in their non-immersed control limb, with minor changes from baseline at 3h post-exercise
484 (1.5-fold increase vs. 3-5-fold increase usually seen), remain unclear. One possible
485 explanation might include the differing muscle recruitment patterns occurring between the
486 exercise protocols utilised (cycling vs. running). Ultimately, results from the present study
487 have future implications on scientific study designs. Those wishing to investigate cold
488 induced post-exercise responses in skeletal muscle must be aware of the evidence that
489 implicates a systemic response of Normetanephrine, and a local response of p-AMPK in both
490 immersed and non-immersed limbs. Further evidence is required to support the impact of
491 systemic transcriptional responses in unilateral research designs, as such designs may be
492 liable to error; potentially underestimating the actual response occurring in the immersed
493 limb if relativized to a non-immersed limb instead of a resting control. Ultimately, the choice
494 of scientific design lies with the question posed, as contralateral designs remain useful for
495 understanding both local and systemic responses.

496 In summary, the present study characterises for the first time the mechanistic control of cold
497 induced PGC-1 α mRNA expression. Data herein indicate a reduction in tissue temperature
498 (2-3°C) plays a limited role as similar levels of PGC-1 α mRNA expression are observed in an
499 immersed and non-immersed limb despite a reduction in tissue temperature in the CWI limb
500 only. Moreover, a cold-induced systemic increase in plasma Normetanephrine may impact
501 localised phosphorylation events of the signalling kinase AMPK^{Thr172}, with potential

502 downstream effects upon rates of PGC-1 α mRNA expression. Future studies should
503 investigate the role of β -adrenergic receptors in Normetanephrine induced AMPK
504 phosphorylation and the signalling role of MEF2 and CRE/ATF2 sites to confirm a link
505 between catecholamines and PGC-1 α . Moreover, due to the acute nature of the present study
506 more work is required to investigate whether the response seen herein is maintained over a
507 more chronic term.

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513 **Disclosures**

514 The authors report no conflicts of interest.

515

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6 **Table 1:** Primer sequences used for real-time PCR.

Gene	Forward Primer	Reverse Primer	Product Length (base pairs)
GAPDH NM_002046.5	AAGACCTTGGGCTGGGACTG	TGGCTCGGCTGGCGAC	168
PGC-1alpha NM_013261.3	TGCTAAACGACTCCGAGAA	TGCAAAGTTCCTCTCTGCT	67
p53 NM_000546.5	ACCTATGGAACTACTTCCTGAAA	CTGGCATTCTGGGAGCTTCA	141
SIRT1 NM_012238.4	CGGAAACAATACCTCCACCT	CACATGAAACAGACACCCCA	186
COXIV NM_001861.4	CGAGCAATTTCCACCTCTGT	GGTCACGCCGATCCATATAA	94
CS NM_004077.2	CCTGCCTAATGACCCCATGTT	CATAATACTGGAGCAGCACCCC	137
TFAM NM_003201.2	TGGCAAGTTGTCCAAAGAAACCT GT	GTTCCCTCCAACGCTGGGCA	135
NRF2 NM_002040.3	AAATTGAGATTGATGGAACAGAGAA	TATGGCCTGGCTTACACATTCA	95
ERRα NM_004451.4	TGCCAATTCAGACTCTGTGC	CCAGCTTCACCCCATAGAAA	212

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9 **Table 2:** Heart rate and oxygen uptake during immersion and the post-immersion period ($n=10$, mean \pm SD).

		Immersion						Post-Immersion							
		PreIm	2min	4min	6min	8min	10min	2min	4min	6min	8min	10min	1hr	2hr	3hr
HR (beats. min ⁻¹)	CON	88 ± 10	86 [#] ± 9	86 ± 10	86 ± 9	87 ± 8	86 ± 9	85 [#] ± 9	85 [#] ± 9	84 [#] ± 9	83 [#] ± 9	85 [#] ± 10	85 [#] ± 10	76 [#] ± 11	76 [#] ± 10
	CWI	103 ± 14	117 [#] ± 18	109 ± 16	104 ± 13	102 ± 14	101 ± 13	90 [#] ± 13	90 [#] ± 12	89 [#] ± 12	88 [#] ± 11	88 [#] ± 11	89 [#] ± 11	75 [#] ± 13	73 [#] ± 14
$\dot{V}O_2$ (ml/kg ,min ⁻¹)	CON	4.6 ± 0.9	4.2 ± 0.8	4.3 ± 0.7	4.4 ± 0.8	4.3 ± 0.6	4.3 ± 0.9	4.4 [#] ± 0.8	4.5 [#] ± 0.8	4.3 [#] ± 0.8	4.2 [#] ± 0.7	4.3 [#] ± 0.9	4.5 [#] ± 0.8	4.3 [#] ± 0.6	4.0 [#] ± 0.6
	CWI	7.05 ± 1.4	8.1 ± 1.4	6.5 ± 1.2	6.3 ± 0.7	6.0 ± 1.0	5.9 ± 0.6	5.2 [#] ± 1.4	4.8 [#] ± 1.0	4.7 [#] ± 0.8	4.4 [#] ± 0.9	4.1 [#] ± 1.2	4.3 [#] ± 1.3	3.8 [#] ± 0.5	3.8 [#] ± 0.5

10 Values are mean \pm SD. A main effect for condition and time along with a significant interaction between condition and time were found for HR and $\dot{V}O_2$ ($P < 0.05$).

11 [#] Significant difference from pre-immersion ($P < 0.05$).

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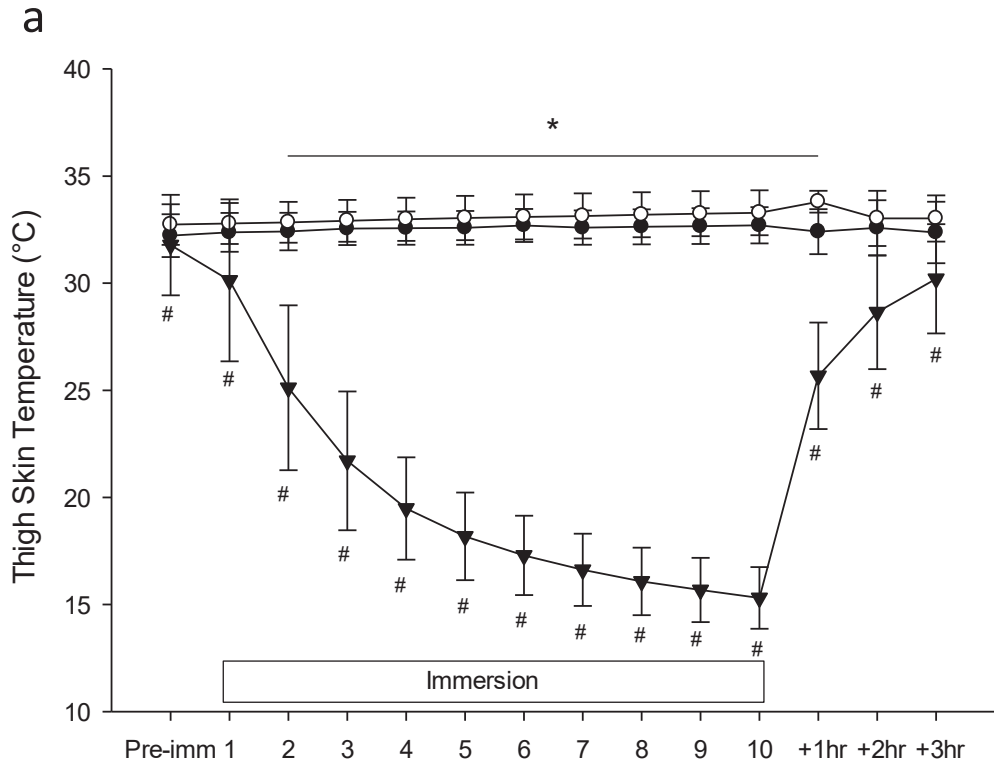
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16 **Table 3:** Catecholamine concentrations (pmol/L) pre and post exercise, with and without
 17 CWI ($n=10$, mean \pm SD).

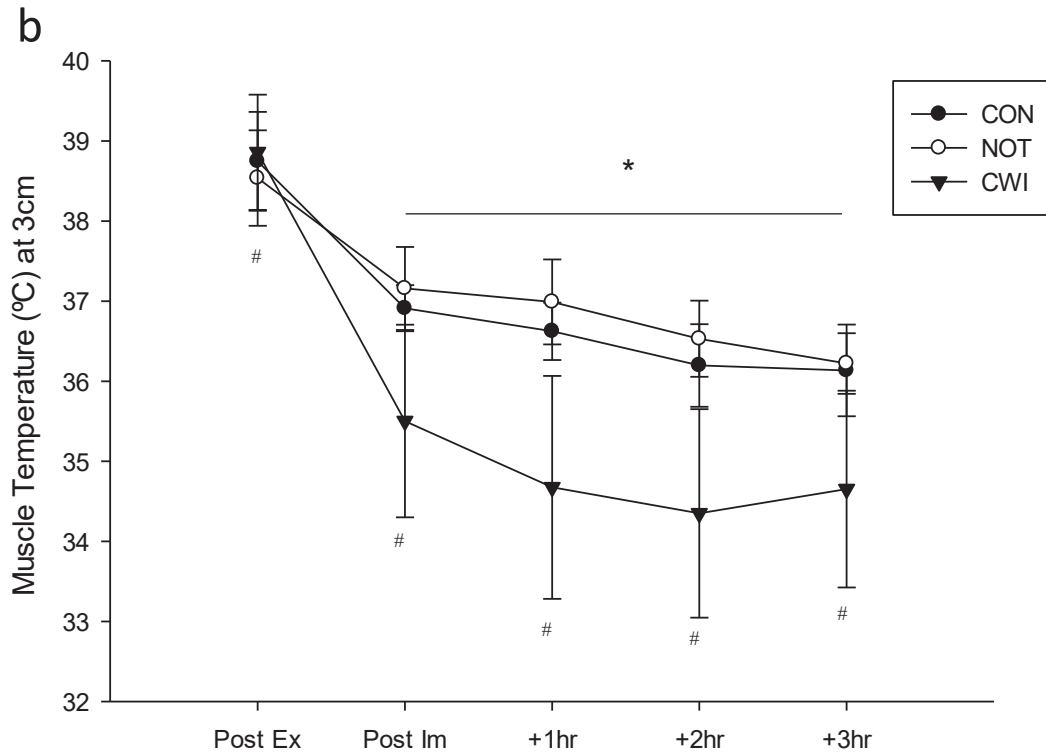
		Recovery					
		Baseline	Post-Exercise	Post-Immersion	1hr	2hr	3hr
Normetanephrine	CON	326.7	1711.9 [#]	665 [#]	615.7 [#]	489.3	426.9
		± 165.6	± 411.10	± 291.8	± 368.3	± 407.0	± 260.0
	CWI	478.2 [*]	1774.1 ^{*#}	859.8 ^{*#}	716.8 ^{*#}	621.2 [*]	517.2 [*]
		± 189.2	± 358.4	± 264.5	± 257.3	± 247.5	± 191.0
Metanephrine	CON	199.7	489.2 [#]	231.4 [#]	193.4	167.9 [#]	145.8 [#]
		± 62.0	± 234.4	± 90.5	± 75.2	± 62.1	± 68.4
	CWI	201.6	509.6 [#]	281.8 [#]	245.6	176.5 [#]	157.5 [#]
		± 36.7	± 153.9	± 104.8	± 78.3	± 43.9	± 46.4

18 Values are mean \pm SD. A main effect for condition was found for NorMetanephrine ($P = 0.034$). A main effect for time was found for both
 19 NorMetanephrine and Metanephrine ($P < 0.001$). [#] Significant difference from baseline ($P < 0.05$). ^{*} Significant difference versus the CON
 20 condition ($P < 0.05$).

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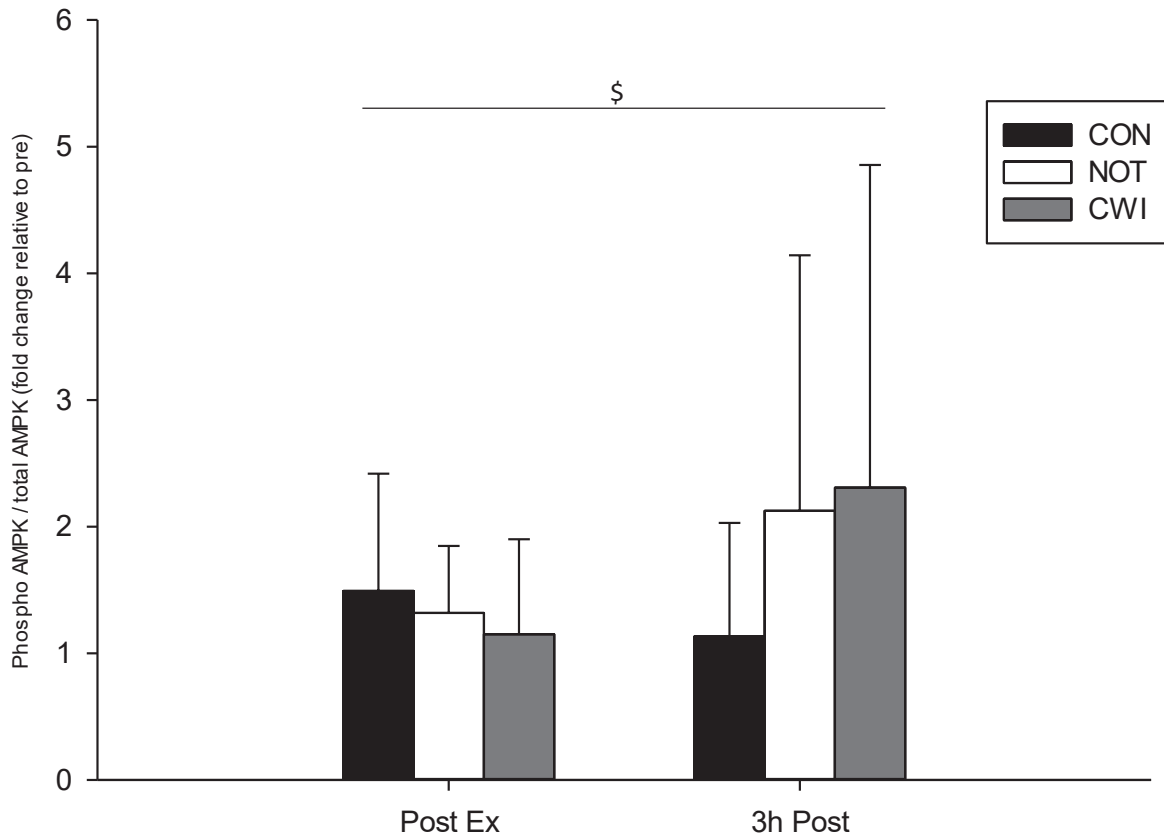
28

29 **Figure 1:** Temperature response post-exercise for thigh skin (a) and deep muscle (3cm depth)

30 (b) with/without CWI. Values are mean \pm SD. A main effect for time, condition and time*condition interaction was found in
 31 both thigh and muscle temperature measures ($P < 0.05$). *Significantly different from pre-immersion (Skin) or post-exercise (muscle) ($P <$
 32 0.05). # Significantly different from CON and NOT ($P < 0.05$).

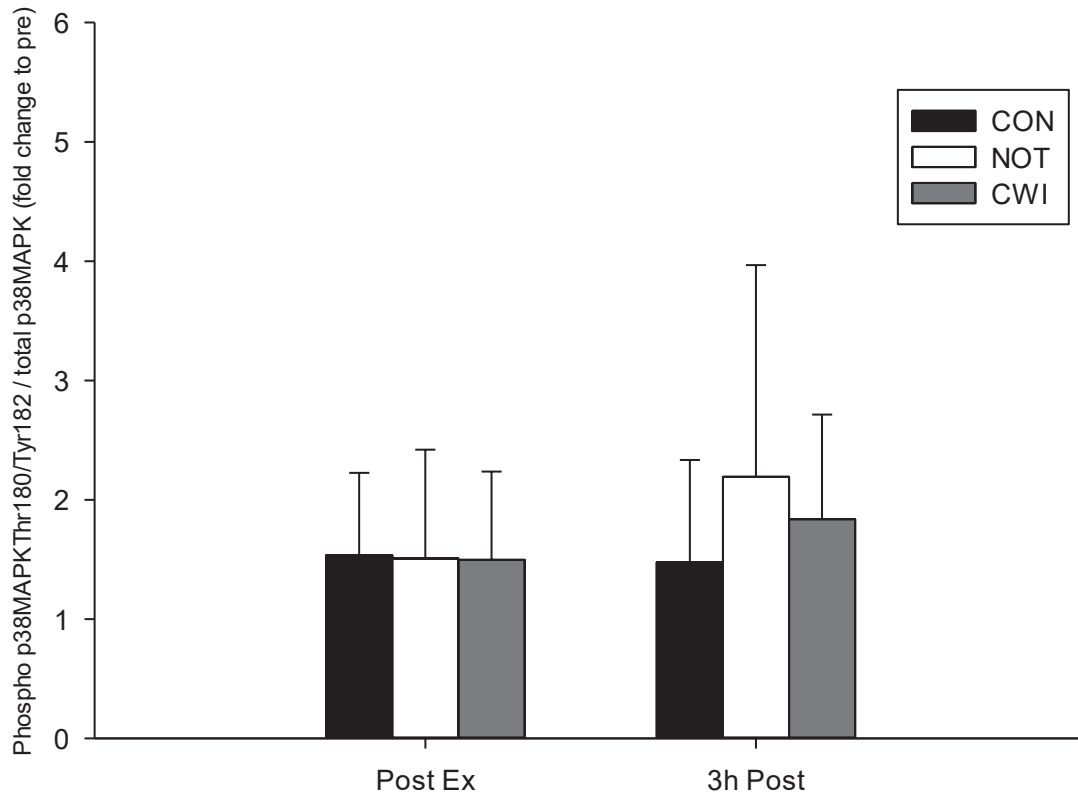
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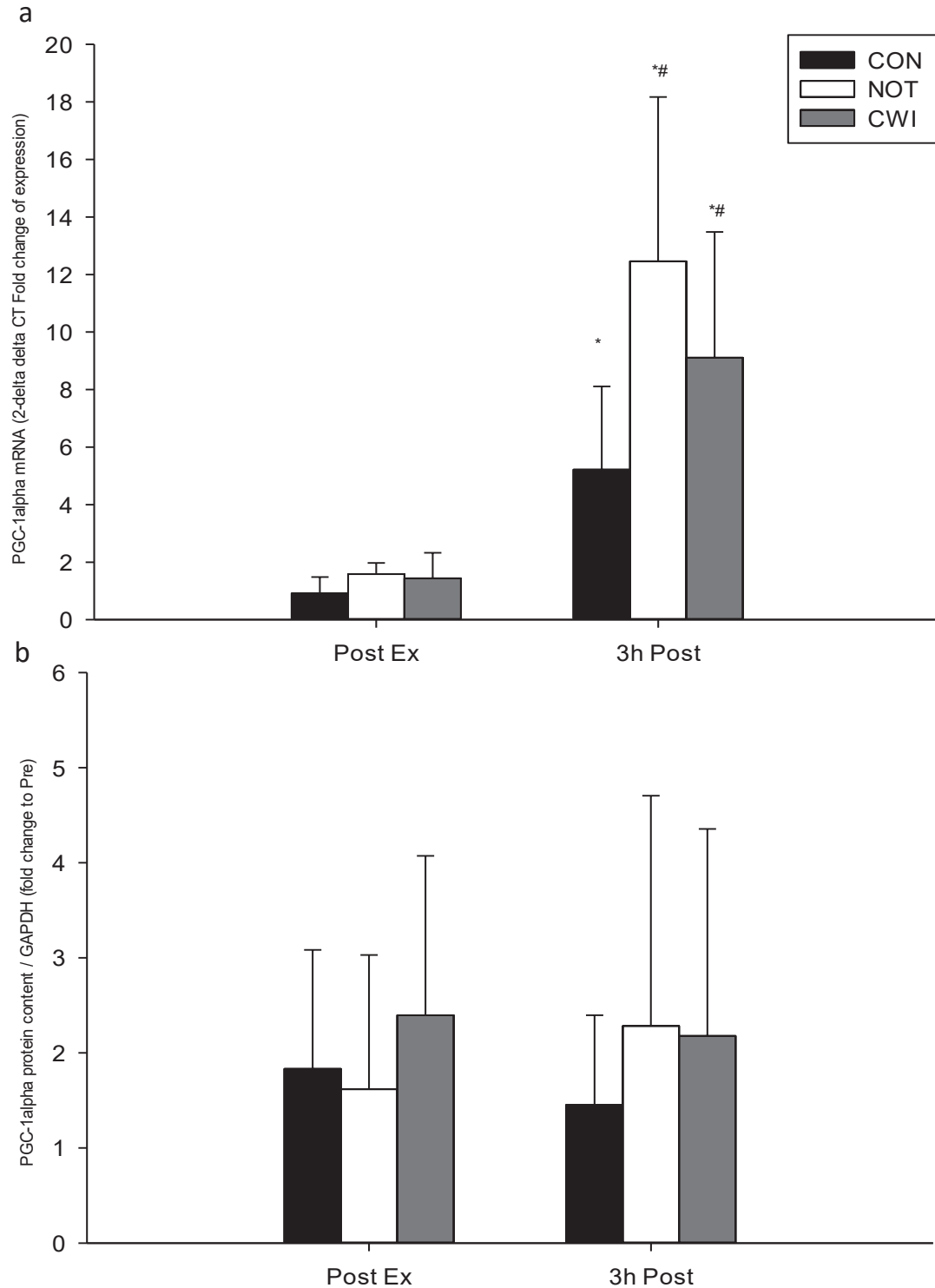
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36 **Figure 2:** Phosphorylation of AMPK^{Thr172} fold changes from Pre, expressed relative to total
37 AMPK as total AMPK did not change significantly across blots or samples ($P > 0.05$). Values
38 are mean \pm SD. \$ Significant time*condition interaction ($P = 0.031$).



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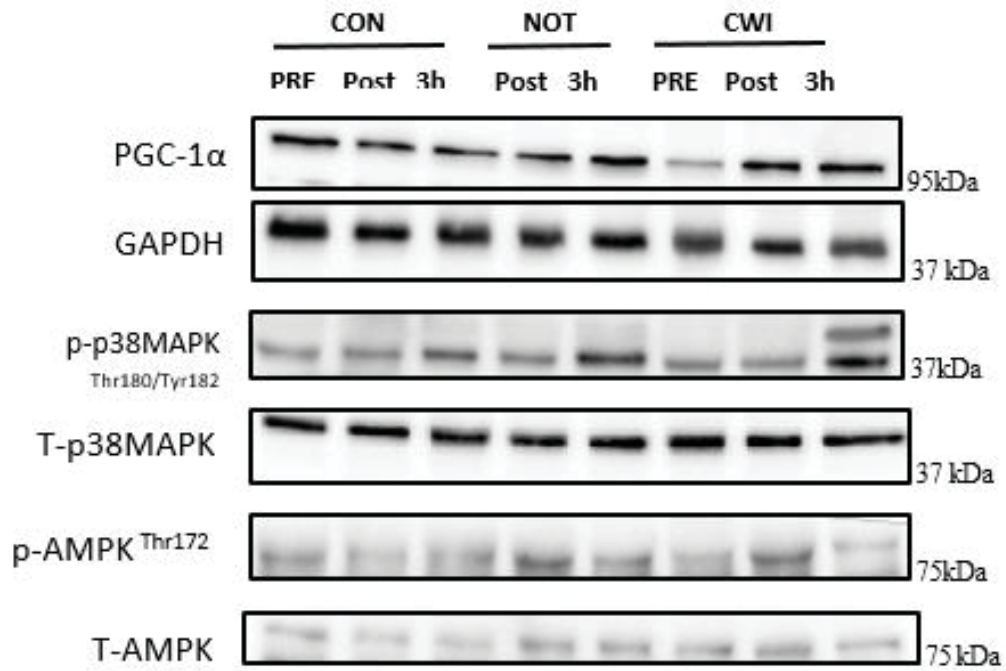
40 **Figure 3:** Phosphorylation of p38MAPK^{Thr180/Tyr182} fold change from Pre, expressed relative
 41 to total p38MAPK as total p38 MAPK did not change significantly across blots or samples (P
 42 > 0.05). Values are mean \pm SD.



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44 **Figure 4:** PGC-1α mRNA (A) and protein content (B) 2-ΔΔCT fold change in expression with
 45 the calibrator as pre-exercise and the reference gene as GAPDH (see methods for details).

46 Values are mean ± SD. A main effect for condition and time was found ($P < 0.001$). There was also a significant interaction between
 47 condition and time ($P = 0.001$) *Significantly different from baseline ($P < 0.05$). # Significantly different from CON ($P < 0.05$).



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49 **Figure 5:** Representative Western Blots from the control (CON) non-immersed (NOT) and
 50 immersed (CWI) legs before (Pre), after (Post), and 3h after (3h) exercise. p-, phosphorylated;
 51 t-, total. Phosphorylated AMPK Thr172 and p38 MAPK Thr180/Tyr182 were relativized to
 52 their total counterpart, as these did not change significantly across blots or samples ($P > 0.05$).
 53 PGC-1α was relativized to GAPDH.

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