

Investigation of the Protective Effects of Natural Compounds Sodium Butyrate and Dihydromyricetin on Chronic Alcohol-Induced Brain Damage

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Presentation Outline

- Introduction to Alcohol-Induced Brain Damage
- Addressing Critical Therapeutic Gap
- Dihydromyricetin (DHM) - A Naturally Derived Neuroprotective Candidate
- Sodium Butyrate (SB) - An Endogenously Occuring Beneficial Short-Chain Fatty Acid
- Experimental Design and Results
- Conclusions
- Limitations and Future Directions

The Problem of Alcohol Use Disorder (AUD)

Over 16 million Americans are affected by AUD — with more than 80% showing measurable brain damage.

AUD increases the risk of liver disease, cancers, accidents, and early mortality.

Population impact

Health impact

Social impact

Economic impact

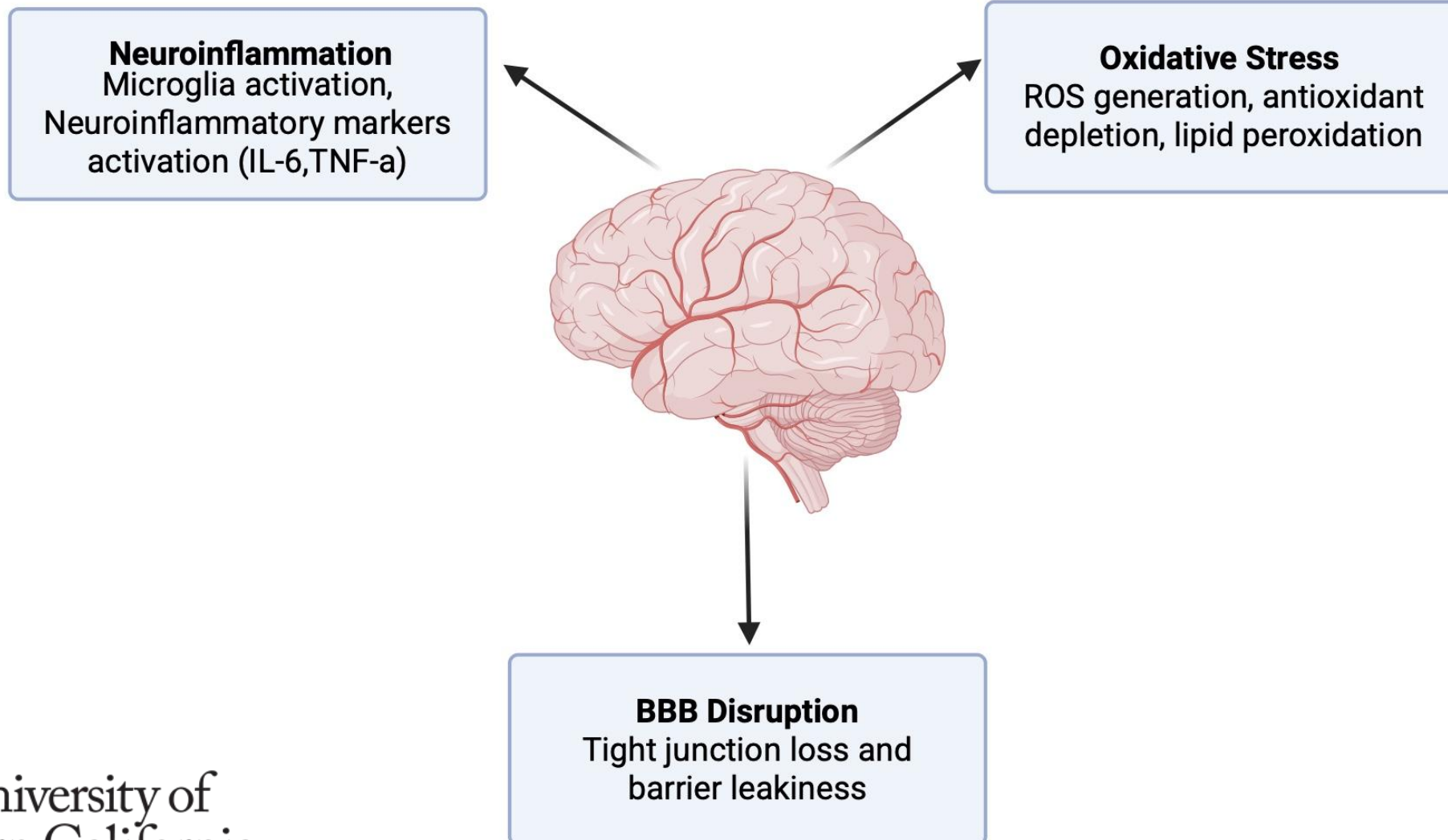


AUD strains relationships, parenting, and community safety through violence, crime, and neglect.

Alcohol-related problems create billions in healthcare, productivity, and social-cost burdens.



Alcohol-Induced Brain Damage: Key Molecular Pathways



AUD Treatment Options

There are three FDA approved pharmacotherapies for AUD:

- Acamprosate
- Disulfiram
- Naltrexone

However, none address the molecular pathways associated with alcohol-induced brain damage.

Goal: Target neuroinflammation, oxidative stress, and blood-brain barrier dysregulation to address alcohol-associated brain damage

Dihydromyricetin



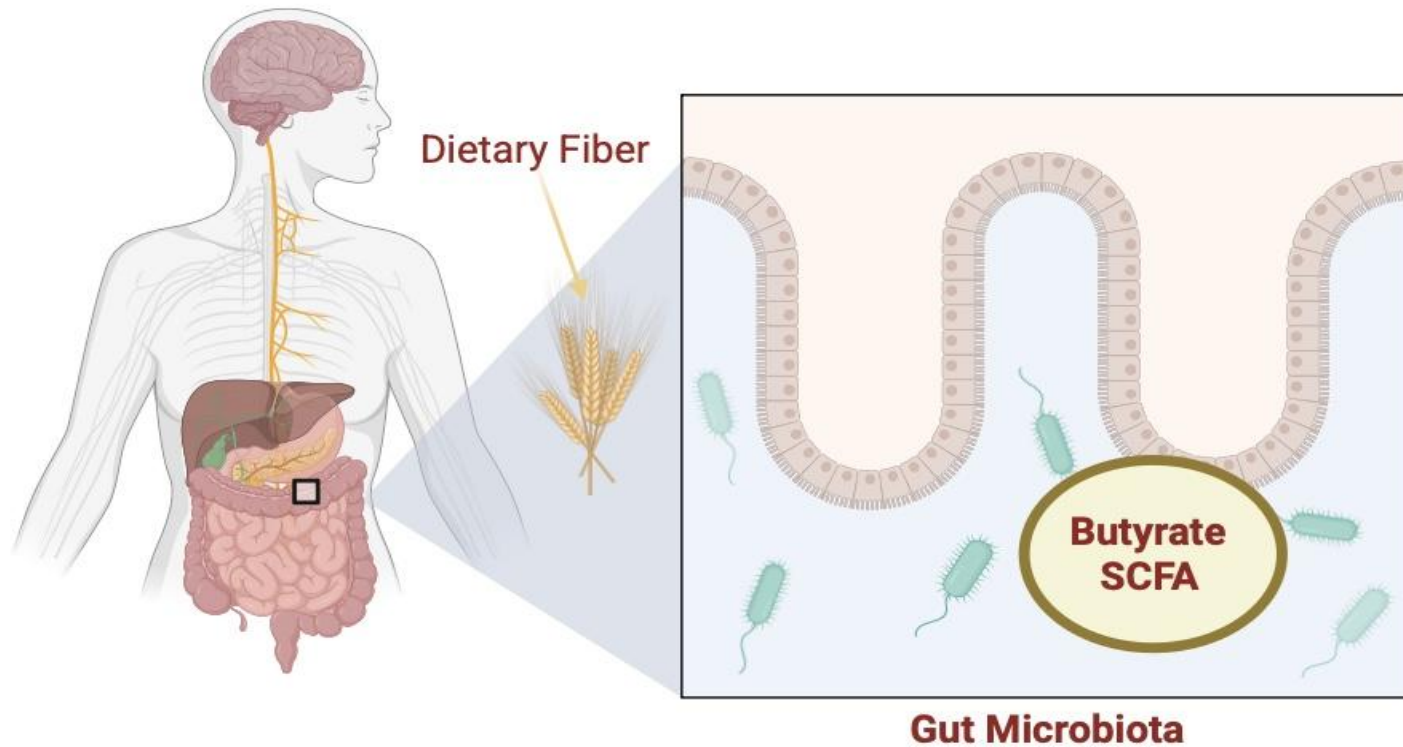
Ampelopsis grossedentata (Chinese Vine Tea)



Therapeutic Benefits

- Exhibits antioxidant and anti-inflammatory properties across multiple organ systems.
- Used in TCM as an anti-hangover remedy, and has been demonstrated to enhance alcohol metabolism and reduce liver injury.
- Formulated DHM (DHM-TEA) significantly improves solubility and enables effective oral administration.

Butyrate



- Short-chain fatty acid (SCFA) produced by gut bacteria during fiber fermentation
- Energy source for enterocytes
- Preserves intestinal barrier
- Anti-inflammatory; HDAC inhibitor activity
- Readily available to tissues

Experimental Design



Male C57BL/6 mice

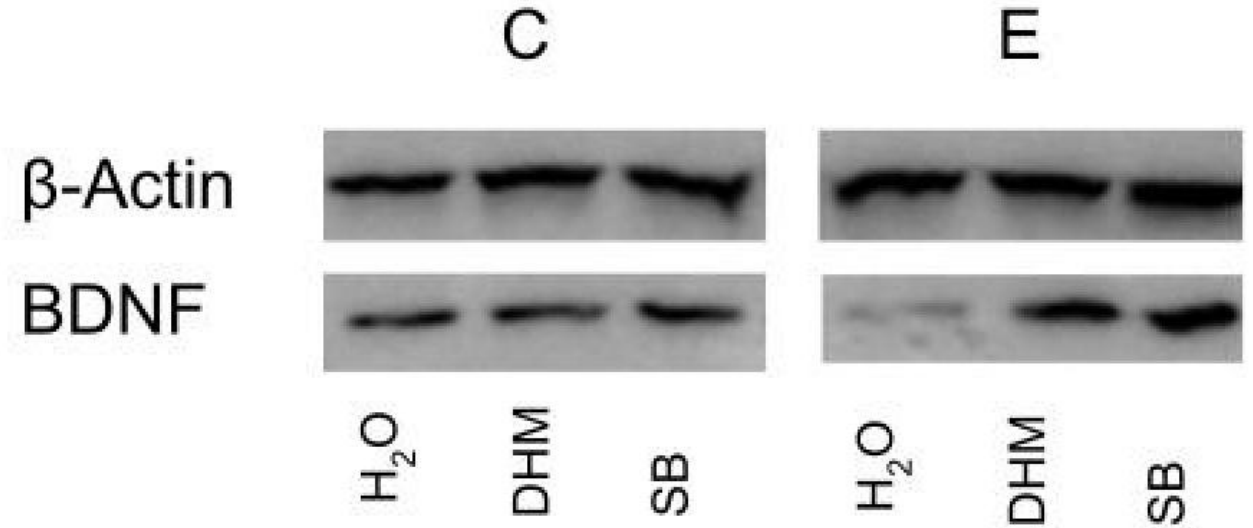
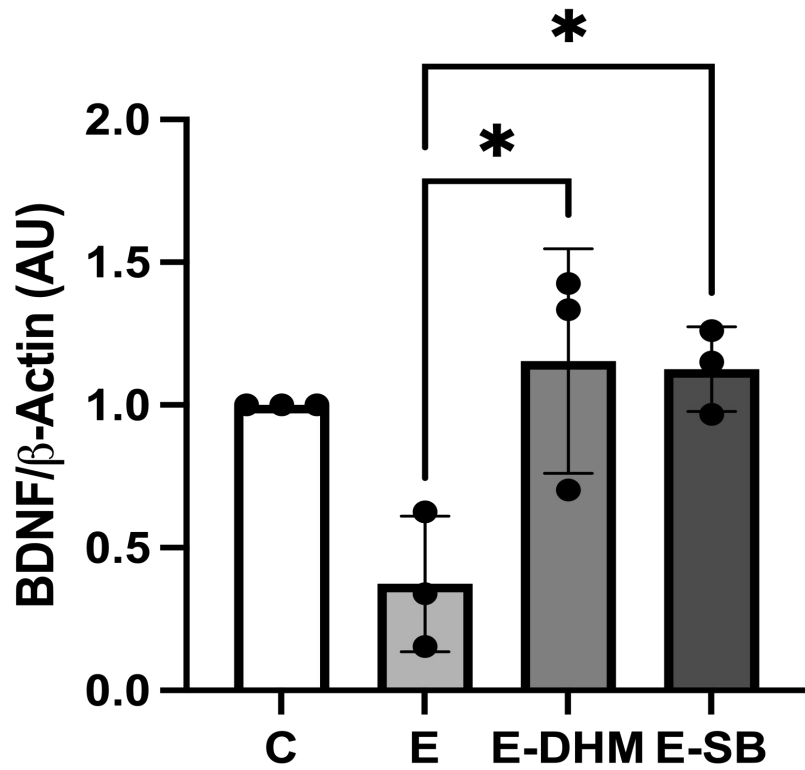


Experimental Groups

Control	Water	DHM-TEA (150 mg/kg)	SaB (300 mg/kg)
EtOH	EtOH	DHM-TEA+ EtOH	SaB+EtOH

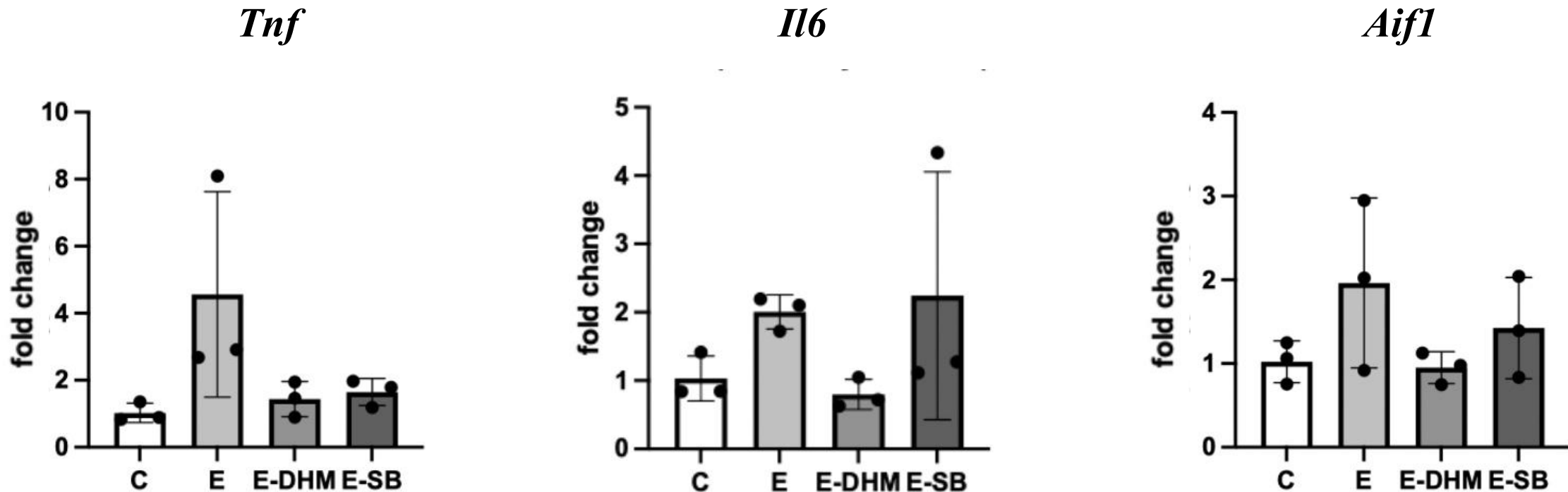


Effects of Treatments on Neuroplasticity Marker



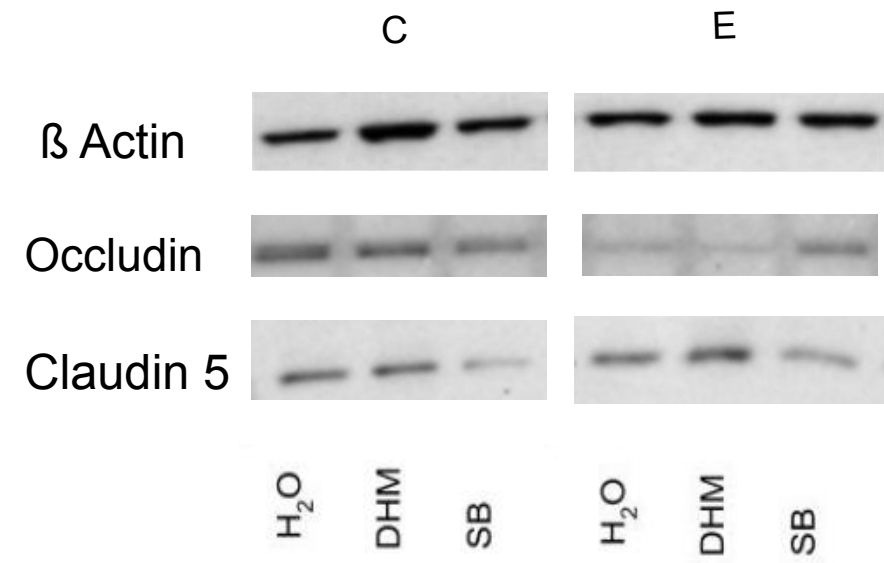
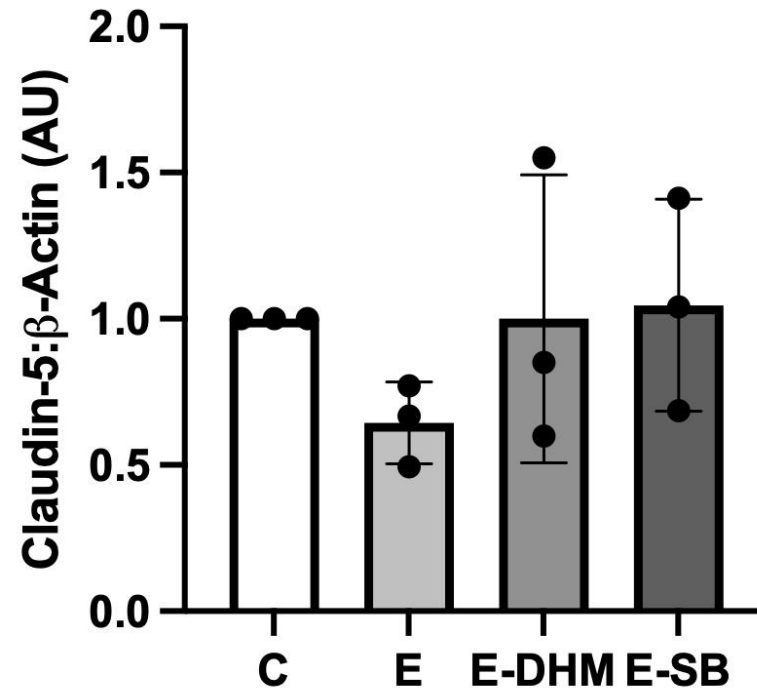
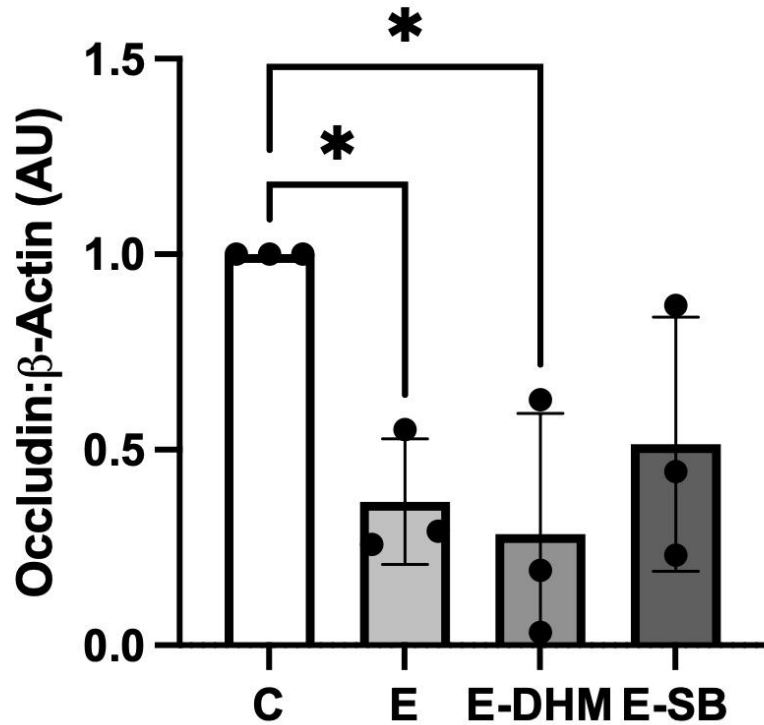
- Alcohol-induced BDNF reduction was restored by both DHM and SB treatments
- Suggests neurotrophic support

Effect of Treatments on Neuroinflammatory Markers



- Alcohol-induced increases in TNF- α , IL-6 and Iba-1 gene expression were restored by DHM
- SB treatment reduced TNF- α but not IL-6 and Iba-1 gene expression levels
- Note: Changes not significant

Effect of Treatment on Tight Junction Markers



- Alcohol decreased levels of Occludin and Claudin-5
- No significant effects of treatments were found

Conclusions

- Chronic alcohol exposure damages the brain through multiple connected mechanisms.
- DHM and sodium butyrate may protect the brain through complementary pathways.
- These compounds represent a promising foundation for future neuroprotective strategies.

Limitations

- The study exclusively used male C57BL/6 mice, limiting the generalizability of findings across sexes given known sex differences in alcohol metabolism and neurological responses.
- The 10-day Lieber-DeCarli model represents a relatively acute chronic exposure window and may not fully recapitulate the long-term neurological consequences of years of heavy alcohol consumption in humans.
- DHM's critically low oral bioavailability of approximately 4% and poor water solubility remain significant translational barriers, even with the TEA co-crystal formulation used in this study.
- Future investigations will address current methodological constraints while expanding our research scope into the broader physiological and behavioral dimensions of Alcohol Use Disorder.

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