

1 **Paternal obesity and epigenetic inheritance of breast cancer: The role of systemic effects**  
2 **and transmission to the second generation**

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20

21 **Abstract**

22 **Background:** While genetics explains some familial breast cancer cases, we showed that  
23 environmentally-induced epigenetic inheritance of breast cancer can also occur in rodent  
24 models. We previously reported that paternal consumption of a high-fat diet and ensuing obesity  
25 increased breast cancer susceptibility in the offspring (F1). Nevertheless, it is still unclear  
26 whether paternal-induced programming of breast cancer in daughters is associated with systemic  
27 alterations or mammary epithelium-specific factors. It also remains to be determined whether  
28 the ancestrally programmed breast cancer predisposition in F1 progeny can be transmitted to  
29 subsequent generations.

30 **Methods:** Male mice (F0) were fed either a control (CO) diet or an obesity-inducing diet (OID)  
31 for seven weeks and then mated with female mice (F0) reared on a CO diet. The resulting  
32 offspring (F1), also exclusively fed CO diet, were either used for mammary gland and tumor  
33 transplantation surgeries or to generate the F2 generation. To induce the mammary tumors,  
34 female mice were treated with 7,12 dimethylbenz[a]anthracene (DMBA). Total RNA extracted  
35 from F0 or F1 males sperm was used for small RNA-Seq analysis.

36 **Results:** Mammary glands from F1 CO female offspring exhibited enhanced development when  
37 transplanted into OID females [OID(CO-MG)], as shown by higher mammary gland area,  
38 epithelial branching and elongation, compared to CO females that received a CO mammary  
39 gland [CO(CO-MG)]. Similarly, mammary tumors from F1 CO female offspring transplanted  
40 into OID females [OID(CO.T)] displayed improved growth with a higher proliferation/apoptosis  
41 rate. We also found that granddaughters (F2) from the OID grand-paternal germline showed  
42 accelerated tumor growth compared to COxCO granddaughters (F2). Transmission of breast

43 cancer predisposition to the F2 generation through OID male germline was associated with  
44 alterations in specific sperm tRNA fragments (tRF) in both F0 and F1 males.

45 **Conclusions:** Our findings indicate that systemic metabolic and mammary stromal alterations  
46 are the most significant contributors to paternal programming of mammary gland development  
47 and cancer predisposition in female offspring rather than mammary epithelium confined factors.  
48 Our data also show breast cancer predisposition in OID daughters can be transmitted to  
49 subsequent generations and could explain some familial cancers, if confirmed in humans.

50

51

## 52 **Introduction**

53 Genetic predisposition explains most but not all familial diseases, including breast  
54 cancer[1]. It is increasingly evident that epigenetic inheritance of disease can also occur and  
55 may explain some inherited conditions. There is strong indication that, at conception, parents  
56 pass more than genetic material to their offspring. They also transmit a molecular memory of  
57 past environmental exposures [2, 3] which can result in offspring's predisposition for certain  
58 chronic diseases [4].

59 Life-style and environmental insults have been shown to reprogram the sperm epigenome in  
60 humans and in animal models [5, 6]. Recently published studies demonstrated that the small  
61 RNA load in paternal sperm can convey phenotypes to the progeny [3, 7-9]. Some of those  
62 reports implicate t-RNA fragments (tRFs)— which are the most abundant small RNA sub-type  
63 in sperm—in the transmission environmentally-induced information from fathers to offspring  
64 and show that they can recapitulate disease phenotypes [7-10].

65 Because mammary gland development starts during fetal development, multiple studies report  
66 that maternal exposure during gestation can epigenetically reprogram the daughters' mammary  
67 tissue and increase breast cancer development [11-14]. However, a role for paternal exposures in  
68 modulating breast cancer predisposition in offspring has emerged in recent years. We recently  
69 showed that paternal obesity, malnutrition and consumption of a high-fat diet all lead to  
70 increased breast cancer development in offspring [15-17], a phenotype associated with changes  
71 in normal mammary gland development. We also found that a recurrent phenotype  
72 accompanying offspring's cancer predisposition is metabolic dysfunction [16-18], raising the  
73 possibility that paternally-induced cancer development could be a function of both systemic  
74 effects as well as tissue specific changes.

75 Paternal effects on the F1 generation include alterations in the germline epigenome [19],  
76 suggesting that disease traits in offspring could be passed on to future generations. Indeed, it has  
77 been reported that paternally-induced phenotypes observed in the F1 can be transmitted to the F2  
78 generation [19, 20]. It is still not clear, however, whether paternally-induced breast cancer  
79 predisposition observed in the offspring can be transmitted through successive generations  
80 without continuous exposure to the initial insult.

81 Here, we used a mouse model of paternal obesity and aimed to address the role of systemic  
82 metabolic alterations and the local mammary epithelial and/or stromal changes on breast cancer  
83 development in the F1 generation. We also investigated whether the breast cancer predisposition  
84 observed in daughters of obese fathers could be transmitted to granddaughters.

85

## 86 **Material and Methods**

### 87 *Dietary Exposures and Breeding*

88 The C57BL/6 mouse strain was used in all experiments. Male mice were fed AIN93G-based  
89 diets containing either 17.2 % (Control, CO, Envigo-Teklad #TD160018) or 57.1% (Lard-based,  
90 Obesity-Inducing-Diet, OID, Envigo-Teklad #TD160019) energy from fat (Diet details in  
91 supplementary **Table S1**, see the section on supplementary data) starting after weaning (3 weeks  
92 of age). Males' body weight was recorded weekly (**Fig. S1**). At 10 weeks of age, OID-fed and  
93 CO-fed F0 male mice were mated with female mice reared solely on the CO diet to generate the  
94 F1 generation. Males were kept in female cages for 3 days. Female mice were kept on the CO  
95 diet during the breeding period, for the extent of pregnancy (21 days) and after giving birth. The  
96 birth weight and number of pups per litter were determined 2 days after birth. To avoid litter-  
97 effect, pups were cross-fostered one day after dams gave birth. Pups from 2–3 dams were pooled

98 and housed in a litter of 8–10 pups per nursing dam. All pups were weaned on postnatal day 21  
99 and fed the CO diet throughout the experiment. Pups body weight was recorded weekly.  
100 To obtain the F2 generation, F1 male offspring from OID fathers were mated with F1 females  
101 from either CO [OIDxCO] or OID [OIDxOID] groups. Similarly, F1 male offspring from CO  
102 fathers were mated with F1 females from either the CO [COxCO] or OID [COxOID] groups.  
103 No sibling mating was carried out. F1 and F2 generation females from the CO or OID lineages  
104 were used to study body weight, metabolic function, mammary tumorigenesis and mammary  
105 transplantation, as described in the following sections. The experimental design is shown in **Fig.**  
106 **S2**.

107 F1 and F2 litters' gender distribution and number of offspring used in each experiment are  
108 shown in **Table S2** and **Table S3**, respectively. All animal procedures were approved by the  
109 Georgetown University Animal Care and Use Committee, and the experiments were performed  
110 following the National Institutes of Health guidelines for the proper and humane use of animals  
111 in biomedical research.

### 112 ***Metabolic Function***

113 Insulin tolerance test (ITT) was performed after the mice fasted for 6 h, according to the method  
114 described by Takada et al [21]. The insulin load (75 mU/100 g body weight) was injected as a  
115 bolus, and the blood glucose levels were determined at 0, 3, 6, 9, 12, and 30 minutes after  
116 injection in female offspring. The area under the curve (AUC) was calculated according to the  
117 trapezoid rule. Differences in ITT were analyzed using two-way ANOVA (group, time),  
118 followed by post-hoc analyses.

### 119 ***Mammary Transplantation***

120 Three-week old F1 female offspring of CO and OID males underwent a mammary gland  
121 transplantation surgery as previously described [22, 23]. The experimental design is shown in  
122 Fig. S3. Females undergoing surgery were anesthetized using isoflurane flowing in oxygen and  
123 maintained with isoflurane flowing at 1-3%. Before transplantation, the 4<sup>th</sup> inguinal mammary  
124 gland of **host** females was cleared from their endogenous epithelium by removing the fat pad of  
125 the 4<sup>th</sup> gland up to its proximal lymph node. Special care was taken to cut off the connection  
126 between the 4<sup>th</sup> and 5<sup>th</sup> mammary glands to ensure complete clearing of the 4<sup>th</sup> mammary fat pad  
127 and to avoid later epithelial contamination from the 5<sup>th</sup> mammary gland. The excised fat pad  
128 containing the epithelial cells were stained with carmine aluminum solution to check cleared  
129 margins.

130 For transplantation, the **donor** fat pad containing the epithelial cells was excised and divided into  
131 small pieces (1mm<sup>3</sup>) and placed into a tissue-culture plate containing DMEM/F12 to keep it  
132 moist. Mammary tissue fragments of the donor mouse, either CO or OID F1 female offspring,  
133 were then implanted into a pocket made in the cleared fat pad of the host (CO or OID). The skin  
134 incision was closed with surgical wound clips. The transplantations were performed from CO  
135 female offspring donors to both CO [CO(CO-MG)] and OID [OID(CO-MG)] female offspring  
136 hosts, as well as from OID female offspring donors to CO [CO(OID-MG)] female offspring  
137 hosts. Mammary glands transplants were collected approximately 10 weeks post-surgery and  
138 used for analysis of epithelial branching density, epithelial elongation and number of Terminal  
139 End Buds (TEBs) as described in the next sections.

#### 140 *Transplanted mammary gland growth and development*

141 Transplanted mammary glands collected approximately 10 weeks post-surgery were stretched  
142 onto a slide, placed in a fixative solution and stained with a carmine aluminum solution (Sigma

143 Chemical Co.) as previously described [24]. Whole mounts were examined under the microscope  
144 (AmScope) for ductal elongation and number of TEBs (undifferentiated structure considered to  
145 be the targets of malignant transformation), as previously described [24]. Whole-mount slides  
146 were also photographed (Olympus SZX12 250 Stereomicroscope), digitized and analyzed.  
147 Briefly, the portion surrounding the glandular epithelium was removed, color channels separated,  
148 and noise removed. The images were thresholded and skeletonized. Then, mammary epithelial  
149 area and branching (sum of intersections) were measured by Sholl analysis, a plugin ImageJ  
150 software (National Institute of Health, Bethesda, MD, USA) as previously described [25]. Once  
151 morphological analyses were completed, mammary whole mounts were removed from the slide,  
152 embedded in paraffin, sectioned (5  $\mu$ m) [26] and prepared for either hematoxylin and eosin  
153 (H&E) or ki-67 staining as described below. Differences between groups were analyzed using  
154 one-way ANOVA, followed by post-hoc analyses.

### 155 *Mammary tumor induction*

156 Mammary tumors were induced in F1 and F2 female offspring by administration of  
157 medroxyprogesterone acetate (MPA; 15 mg/100 $\mu$ l, subcutaneously) to 6 weeks of age female  
158 offspring, followed by three weekly doses of 1 mg 7,12-dimethylbenz[a]anthracene (DMBA;  
159 Sigma, St. Louis, MO) dissolved in peanut oil by oral gavage[27]. Tumors were detected by  
160 palpation once per week, starting at week 2 after the last dose of DMBA. Tumor growth was  
161 measured using a caliper, and the width and height of each tumor were recorded.

162 In the F1 generation, mammary tumors were harvested when reaching approximately 40 mm<sup>2</sup> in  
163 volume and used for mammary tumor transplantation surgery, as described in the next section. In  
164 the F2 generation, tumor development was monitored for a total of 20 weeks post-DMBA  
165 administrations. Animals in which tumor burden reached approximated 10% of total body weight



166 were euthanized before the end of the monitoring period, as required by our institution. Tumor  
167 growth was analyzed using two-way ANOVA (group and time), followed by post-hoc analyses.  
168 Kaplan-Meier survival curves were used to compare differences in tumor incidence, followed by  
169 the log-rank test. Differences in tumor latency and mortality were analyzed using two-way  
170 ANOVA.

### 171 ***Mammary tumor transplantation***

172 CO and OID F1 female offspring underwent a mammary tumor transplantation surgery at  
173 approximately 11 weeks of age. Females undergoing surgery were anesthetized using isoflurane  
174 flowing in oxygen and maintained with isoflurane flowing at 1-3%. Briefly, carcinogen-induced  
175 mammary tumor fragments (1 mm<sup>3</sup>) of a donor mouse, either CO or OID offspring, were  
176 implanted into a pocket made in the mammary fat pad of the host (CO or OID). The  
177 experimental design is shown in Figure S3. Mammary tumors grown from the transplants were  
178 collected approximately 6-8 weeks post-surgery. Differences between groups were analyzed  
179 using one-way ANOVA, followed by post-hoc analyses.

### 180 ***Analysis of cell proliferation***

181 Cell proliferation (Ki-67) was evaluated by immunohistochemistry in mammary gland and  
182 mammary tumors transplants. Briefly, tissues were fixed in 10% buffered formalin, embedded in  
183 paraffin, and sectioned (5 µm). Sections were deparaffinized with xylene and rehydrated through  
184 a graded alcohol series. Antigen retrieval was performed by immersing the tissue sections at  
185 98°C for 40 minutes in 1X Diva Decloaker (Biocare). Tissue sections were treated with 3%  
186 hydrogen peroxide and 10% normal goat serum for 10 minutes and were incubated with the  
187 primary antibody, overnight at 4°C. After several washes, sections were treated to the  
188 appropriate HRP labeled polymer for 30 min and DAB chromagen (Dako) for 5 minutes. Slides

189 were counterstained with Hematoxylin (Fisher, Harris Modified Hematoxylin), blued in 1%  
190 ammonium hydroxide, dehydrated, and mounted with Acrymount. The sections were  
191 photographed using an Olympus IX-71 Inverted Epifluorescence microscope at 40x  
192 magnification. Proliferation index (Ki-67 staining) was determined by immunoRatio, a plugin  
193 Image J software (National Institute of Health, Bethesda, MD, USA), to quantify hematoxylin  
194 and DAB-stained cells. Differences between groups were analyzed using one-way ANOVA,  
195 followed by post-hoc analyses.

#### 196 *Analysis of cell apoptosis*

197 Cell apoptosis analysis was performed in transplanted mammary glands and tumors by  
198 morphological detection. Tissues were fixed in neutral buffered 10% formalin, embedded in  
199 paraffin, sectioned (5  $\mu$ m) and stained with hematoxylin and eosin (H&E). Cells presenting loss  
200 of adhesion between adjacent cells, cytoplasmic condensation and formation of apoptotic bodies  
201 were considered apoptotic as described before[28]. Sections were photographed using an  
202 Olympus IX-71 Epifluorescence microscope at 40x magnification. Twenty areas were  
203 photographed randomly, and the number of apoptotic bodies counted. Images were evaluated  
204 with ImageJ software (NIH, USA). Differences between groups were analyzed using one-way  
205 ANOVA, followed by post-hoc analyses.

#### 206 *Mature spermatozoa collection and purification*

207 CO and OID-fed males (F0) and their male offspring (F1) were euthanized and their caudal  
208 epididymis dissected for sperm collection. The epididymis was collected, punctured, and  
209 transferred to tissue culture dish containing M2 media (M2 Medium-with HEPES, without  
210 penicillin and streptomycin, liquid, sterile-filtered, suitable for mouse embryo, SIGMA, product  
211 #M7167) where it was incubated for 1 hour at 37°C. Sperm samples were isolated and purified

212 from somatic cells. Briefly, the samples were washed with PBS, and then incubated with SCLB  
213 (somatic cell lysis buffer, 0.1% SDS, 0.5% TX-100 in Diethylpyrocarbonate water) for 1 hour.  
214 SCLB was rinsed off with 2 washes of PBS and the somatic cell-free purified spermatozoa  
215 sample pelleted and used for RNA extraction.

### 216 *Small RNA-Seq and Gene Ontology (GO) analyses*

217 Total RNA was isolated from sperm using Qiagen's miRNeasy extraction kit, according to the  
218 manufacturer's instructions. One hundred ng of column-purified sperm RNA was used to prepare  
219 individually barcoded small-RNA libraries. Samples were barcoded, pooled, precipitated and  
220 separated on a 15% polyacrylamide gel (PAGE). The gel was stained with SYBR® gold dye  
221 and the small non-coding RNA segment corresponding to transfer RNA fragments or tRFs (30-  
222 45 nucleotides) excised and purified using a cDNA library preparation method described  
223 previously [29]. This library preparation method was demonstrated to be highly reproducible  
224 using total RNA with RNA Integrity Numbers as low as 2.0[29]. Indexed, single-ended small-  
225 RNA sequencing libraries were prepared. For each individual barcoded library, at least 10  
226 million reads (raw data) were generated using an Illumina Hi-Seq 2500. The raw reads were  
227 subjected to 3' adapter trimming and low quality filtering using Trimmomatic program [30]. The  
228 high quality clean reads were aligned to the mouse genome. tRFs tags were mapped to the mouse  
229 genome (GRCm38/mm10 reference genome) in order to analyze their genomic distribution and  
230 expression in the different sperm RNA samples. Small RNA tags were annotated and aligned to  
231 known t-RNA sequences using Ref-seq, GenBank and Rfam database using blastn with standard  
232 parameters. To analyze the differential expression of tRFs between CO and OID groups, tRFs  
233 were normalized to TPM (Transcripts Per Kilobase Million). tRFs with a P value less than 0.05  
234 were considered significant, with an appropriate correction for multiple testing [31]. Target

235 genes for the 5 overlapping tRFs in OID F0 and F1 males were predicted using TargetScan  
236 Mouse custom seedmatch and modified miRanda algorithm (energy  $\leq -20$  and score  $\geq 150$ ).  
237 The common predicted genes were then uploaded to PANTHER 15.0 for GO term and pathway  
238 analysis, final lists were filtered by FDR  $< 0.25$ .

239

## 240 **Results**

### 241 *Offspring of OID fathers have impaired metabolic function and altered mammary gland* 242 *development*

243 We previously reported that paternal consumption of obesity-inducing diets (OID) at the pre-  
244 conception window increased female offspring's susceptibility to breast cancer [15, 16]. In those  
245 studies, we also described mammary gland morphological changes as well as metabolic  
246 dysfunction—a phenotype also reported by others—in offspring of obese fathers [16, 18, 19, 32].  
247 Our present results corroborate our previous findings as OID offspring (F1) displayed impaired  
248 metabolic function with both F1 males and females showing significantly reduced insulin  
249 sensitivity compared to CO offspring (P=0.002, P=0.011, **Fig. 1a-f**). In addition, mammary  
250 glands of OID daughters also showed increased number of terminal end buds (TEB), higher  
251 epithelial branching and elongation, although only the last parameter reached statistical  
252 significance compared to CO (**Table S4**). Those phenotypes were not associated with body  
253 weight gain (**Fig. S4**) as OID offspring weights either did not differ from or were lower than CO.

254

### 255 *Systemic effects play a larger role in normal mammary tissue and mammary tumor growth in* 256 *offspring of OID fathers*

257 Next, we examined the contributions of systemic alterations and mammary tissue specific factors  
258 (stroma *vs.* epithelium) to the increased breast cancer development in offspring of obese fathers.  
259 In the first experiment, female offspring of either CO or OID-fed males underwent a mammary  
260 gland transplantation surgery. CO mammary glands transplanted into OID females  
261 [OID(CO.MG)] exhibited accelerated development (**Fig. 2a-e**) as shown by higher mammary  
262 gland area ( $p=0.032$ , **Fig 2b**), higher mammary branching and higher epithelial elongation  
263 ( $p=0.014$ ;  $p=0.008$ , respectively, **Fig. 2c-d**), but not higher number of TEBs (**Fig. 2e**), compared  
264 to CO females that received a CO mammary gland [CO(CO.MG)]. This phenotype was  
265 associated with a higher proliferation index and lower apoptotic rates compared to compared to  
266 [CO(CO.MG)]) and [CO(OID.MG)] ( $P=0.021$  and  $P=0.026$ , respectively; **Fig. 2f-j**). While OID  
267 mammary glands transplanted into CO females [CO(OID.MG)] showed slightly higher  
268 mammary gland area, mammary branching and epithelial elongation and number of TEBS  
269 (**Fig.2b-e**) compared to [CO(CO.MG)], results did not reach statistical significance.

270 Given that both the mammary microenvironment and systemic response could play a role in  
271 tumor progression, we also asked whether the metabolic-induced mammary stroma milieu could  
272 affect the growth potential of tumors. Thus, in our second experiment, a DMBA-induced  
273 mammary tumor of F1 female offspring from CO (donor) was transplanted into the fat pad of a  
274 CO or OID female offspring (host) and *vice versa*. Tumor growth was followed for 6-8 weeks  
275 post-surgery. Consistent with what we observed for mammary gland transplants, we found that  
276 CO tumors transplanted into OID females [OID(CO.T)] displayed improved growth (**Fig. 3a**)  
277 and shorter latency (**Fig. 3b**) compared to CO or OID tumors transplanted in CO females  
278 [CO(CO.T) and CO (OID.T)], although differences among the groups did not reach statistical  
279 significance. [OID(CO.T)] tumor also showed significantly increased cell proliferation to

280 apoptosis ratio, compared to both [CO(CO.T)] and [CO (OID.T)] ( $p=0.043$ ,  $P=0.032$ ,  
281 respectively; **Fig. 3c-g**).

282

### 283 *Consumption of OID alters the tRF content in sperm of fathers (F0) and their sons (F1)*

284 Recent studies have suggested that sperm non-coding RNAs play a role in transmitting  
285 environmentally-induced information from fathers to offspring. Transfer RNA fragments or tRFs  
286 make up the majority of small RNAs in mature sperm and can recapitulate the effects of paternal  
287 obesity in offspring [3]. As reported before, GlyGCC and GlutCTC were the most abundant  
288 tRFs in sperm of both fathers (F0) and their male offspring (F1), representing about 70% of all  
289 tRFs (**Fig. 4a-b**) [8, 19]. We also found that consumption of OID altered specific tRFs in both  
290 father (**Fig. 4c**) and sons (**Fig. 4d**), with five tRFs overlapping between the two generations  
291 (**Fig.4e**): Levels of ValTAC and SerCGA were increased while those of ArgCCG, ArgTCG and  
292 SeCTCA were decreased in sperm of OID F0 and F1 males compared to CO. Putative targets of  
293 these five tRFs were significantly enriched for molecular functions related to DNA binding,  
294 transcription factor activity, transcriptional regulation, and transmembrane transporters among  
295 others (**Fig. 4f**).

296

### 297 *Breast cancer predisposition in OID daughters is transmitted to a second generation*

298 Given the tRF alterations observed in the F1 OID offspring germline, we then asked whether  
299 breast cancer predisposition in OID daughters could be inherited by a second generation of  
300 females. To this question, we produced the F2 generation by mating F1 male offspring from OID  
301 fathers with F1 females from either CO [OIDxCO] or OID [OIDxOID] groups. Similarly, F1  
302 male offspring from CO fathers were mated with F1 females from either the CO [COxCO] or

303    OID [COxOID] groups (**Fig.S2**). Indeed, we found that the female F2 generation derived from  
304    either the F1 OID male and female lineage (OIDxCO and COxOID, respectively) or both  
305    (OIDxOID) developed carcinogen-induced mammary tumors that grew significantly faster,  
306    compared to COxCO group ( $p<0.001$ , **Fig.5a**). The incidence of mammary tumors at the end of  
307    the monitoring period was also significantly higher in F2 OIDxOID females compared to the  
308    COxCO group ( $p=0.037$ ; **Fig. 5b**), suggesting a synergistic effect of both the male and female  
309    OID germlines. Tumor latency and tumor mortality rates in the OIDxCO group were slightly  
310    shorter than in all other groups, however results did not reach statistical significance (**Fig.5c-d**).  
311    While all F2 females derived from the OID grand-paternal lineage (COxOID, OIDxCO,  
312    OIDxOID) showed higher mammary tumor growth with significantly larger tumors (**Fig. 5a**)  
313    when compared to COxCO, only OIDxOID females developed insulin insensitivity as shown by  
314    higher ITT and AUC values ( $p=0.007$ ,  $P=0.017$ , **Fig. 5e-f**). However, OIDxCO females were  
315    significantly heavier overtime compared to all other groups (COxCO, COxOID, OIDxOID,  
316     $p=0.0004$ , **Fig. S5**).

## 317    Discussion

319    We previously reported that paternal obesity increases tumorigenesis in offspring, including  
320    breast cancer [15, 16, 18]. In this follow-up study, we showed that metabolic disturbances in the  
321    F1 generation play a key role in the increased breast cancer development observed in offspring  
322    of obese fathers in a mouse model. We also report that the paternal obesity leads to higher cancer  
323    development in two successive generations. Transmission of the increased breast cancer  
324    phenotype into the F2 generation was associated with epigenetic changes in the germline, namely  
325    alterations in the abundance of tRFs present in OID F1 male sperm.

326 The first aim of our study was to dissect the distinct contributions of systemic effects and  
327 mammary tissue-confined factors to increased breast cancer development in daughters of obese  
328 fathers, as we had observed both metabolic dysfunction and mammary gland abnormalities in  
329 previous studies[15, 16]. Our results showed that systemic metabolic effects, likely acting  
330 through the mammary stroma, in OID daughters play a larger role compared to the mammary  
331 epithelium. Further, tumors from CO offspring transplanted into OID daughters acquired a  
332 growth advantage compared to those transplanted in controls, suggesting that the stroma in OID  
333 females allows for better implantation and tumor growth. It is still possible that mammary  
334 epithelium confined factors play a role in the increased tumor development in OID offspring,  
335 however, they play a reduced role compared to systemic and mammary stromal effects according  
336 to our data. While it has been traditionally thought that the epithelium is the compartment with  
337 the dominant contribution regarding breast cancer initiation and growth and mammary tissue  
338 regeneration, some studies have highlighted the importance the stroma microenvironment,  
339 particularly adipocytes, on normal mammary development and malignant transformation of the  
340 mammary epithelium[33-36]. Our analyses are in agreement with those findings and suggest that  
341 the stroma plays an important enabling role for tumor growth.

342 It is also well established in epidemiologic studies that metabolic conditions such as obesity,  
343 metabolic syndrome and diabetes are important risk factors for breast cancer and other  
344 malignancies [37-40] and data from animal models offer support to those findings [41, 42]. In  
345 line with that, we demonstrated that a milieu of metabolic dysfunction and altered stromal  
346 microenvironment creates conditions for increased proliferation and survival of both normal and  
347 tumorigenic mammary cells as demonstrated by our transplantation studies.



348 While we have not directly investigated the molecular mechanisms behind the findings reported  
349 here, it is known that metabolic dysfunction contributes to cancer development via extrinsic and  
350 tumor-intrinsic factors [43]. Metabolic-induced alterations in growth factors signaling,  
351 inflammation and the associated microenvironment, as well as changes in tumor metabolism  
352 itself are all major contributors to cell proliferation and cancer development [43]. Not  
353 surprisingly, our previously reported results show that paternal obesity or malnutrition alters the  
354 molecular make-up of tumors which show increased growth factor and energy sensing signaling  
355 and altered amino-acid metabolism[15-18].

356 We also examined whether the offspring's breast cancer predisposition programmed by paternal  
357 obesity could be inherited by a second unexposed generation. We found that the risk of breast  
358 cancer is passed down to the OID grandchildren equally via the F1 male and female germ lines.  
359 Our data also suggest that there is a synergistic effect when both F1 parents had an obese father,  
360 with their descendants showing not only accelerated tumor growth but also higher tumor  
361 incidence. As with the F1 generation, F2 females from the OID lineage showed signs of  
362 metabolic dysfunction which depended whether they originated from the male or female lineage  
363 or both.

364 Our study offers some insights into the potential mechanism of transmission of breast cancer risk  
365 from one generation to another. Given the increased mammary tumorigenesis in the  
366 granddaughters of OID males in the absence of any further exposure, transmission of this  
367 phenotype conceivably occurs via F1 germ cells, which give rise to the F2 generation. In support  
368 of that, we found that F1 male germline showed alteration in tRFs, a class of small non-coding  
369 RNAs abundant in sperm, recently shown to transmit environmentally-induced information from  
370 one generation to another [7, 8]. While details on the functional role of tRFs in embryonic

371 development are still under investigation, these small RNAs have been implicated in the  
372 regulation of translation, stress granule formation, viral replication and retrotransposons[44, 45].  
373 Unfortunately, the inherent technical challenge of collecting enough eggs for molecular analysis  
374 precluded us from evaluating the F1 female germline. However, given that both the F1 male and  
375 female OID germline were able to transmit the increased predisposition to breast cancer  
376 phenotype to a second generation it is likely that we would have observed changes in the female  
377 germline as well. Nevertheless, we cannot rule out that some of the effects observed in F2  
378 generation are due to maternal metabolic dysfunction in pregnancies of F1 OID females.  
379 Interestingly, we found overlap in tRFs altered in sperm of F1 and F0 males. This suggests either  
380 that the F1 male germline is programmed by paternal obesity or that sperm non-coding RNAs are  
381 re-set in the F1 generation. Although, no changes in body weight were detected in F1 OID males,  
382 they did show metabolic dysfunction (impaired insulin sensitivity) later in life. However, others  
383 have shown that changes in the germline of male offspring of obese fathers occur in the absence  
384 of overt metabolic dysfunction[19], suggesting that F2 generation phenotypes represent true  
385 epigenetic inheritance.  
386 The mechanisms for how germline epigenetic programming lead to phenotypes in offspring are  
387 still being investigated. However, given the short half-life of sperm small non-coding RNAs such  
388 as tRFs, is likely that they act early in embryonic development, setting a cascade of molecular  
389 events which biases cellular programming during subsequent divisions and culminate in disease  
390 phenotypes [3, 6]. Our gene ontology analysis of targets of the five overlapping tRFs in OID F0  
391 and F1 OID males' sperm showed an enrichment for functions related to DNA binding,  
392 transcription factor activity, transcriptional regulation, and transmembrane transporters. It is  
393 possible that an imbalance in the amount of those specific tRFs in sperm can disrupt embryonic

394 development post-fertilization, programming the organism to be more to be more amenable and  
395 tolerant to cellular growth which would translate in increased cancer development. The exact  
396 mechanisms, however, need to be further investigated in a follow-up study.

397 In conclusion, the findings described here builds on our previous works and show that  
398 paternally-induced cancer development is largely due to systemic alterations in offspring and that  
399 the offspring's breast cancer predisposition, as evaluated in this study, can be transmitted to a  
400 subsequent generation. While our study was conducted in an animal model, it could have  
401 important implications for human health. It is well known that family history is a strong  
402 predictor of cancer risk [46], yet not all familial cancers can be explained by genetic mutations[1,  
403 47]. Though it is estimated the up to 30% of breast cancers cluster in families, only about one  
404 third of those are due to mutations in high penetrance genes such as *BRCA1* and *BRCA2*, leaving  
405 a sizable portion of familial breast cancers without a biological explanation [48]. Our study  
406 suggests that ancestral history of obesity from the paternal lineage could account for some  
407 familial cancers and that some organisms may be predisposed to the tolerance of cancer cells or  
408 may provide adequate conditions for their growth and development. This notion is supported by  
409 our prior findings showing that maternal exposure to an endocrine disruptor or dietary fat can  
410 also lead to multigenerational risk of breast cancer through both the male and female germlines  
411 in rats[12]. Given that the current study was performed in mice, our findings have now been  
412 confirmed in two different animal species.

413 It is also important to note that conditions such as obesity and malnutrition often occur in  
414 minorities and disadvantaged populations [49]. Our findings would suggest that social  
415 determinants of cancer predisposition and outcomes may be imprinted even before birth and are  
416 epigenetically mediated. However, it remains to be determined whether the biological insights

417 uncovered by our study can account for some of the familial breast cancer predisposition or  
418 cancer disparities in humans.

419

420

421

422

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429 The small RNA-seq data has been deposited in GEO (Gene Expression Omnibus) database with  
430 accession code pending.

431

432

433 **Author contributions:** C.C.F, A.W. and S.D.A. conceived the study. S.D.A. oversaw the  
434 research and wrote the manuscript with the help of C.C.F, R.S.C., A.W. and O.L.; C.C.F  
435 performed most of the experiments with the help of A.W., R.S.C., A.K., E.B. M.I.C. and V.T.;  
436 C.C.F. and R.S.C. analyzed the data; O.L. performed the sperm small RNA-seq profiling and L.J.  
437 performed the RNA-seq data and GO analysis.

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## Figure Legends

**Figure 1: Paternal OID causes metabolic disturbance in offspring.** Insulin tolerance test (ITT) and area under curve (AUC) in all gender (**a-b**), female (**c-d**) and male (**e-f**) F1 offspring (n=7-8/gender/group) from CO and OID-fed fathers. The data are expressed as mean  $\pm$  SEM. Significant differences versus the control group were determined by two-way ANOVA followed by post-hoc analysis. \*P $\leq$ 0.05; \*\*P $\leq$ 0.01.

**Figure 2: Development of transplanted mammary glands in CO or OID daughters (F1).** Histological depiction of transplanted mammary gland in (**a**) [CO(CO-M.G)], [CO(OID-M.G)], and [OID(CO-M.G)] groups. Graphs below show values for mammary gland area (**b**), epithelial branching (**c**), epithelial elongation (**d**) and number of terminal end buds (TEB) (**e**), (**b-e**, n=6-13); Photomicrograph of Ki-67 immunostaining (**f**) (20x, staining indicated by arrows) and apoptotic cells (**g**) (H&E morphological assessment, 40x, cells indicated by arrows). Graphs below show proliferation index (**h**), number of apoptotic cells (**i**) and proliferation/apoptosis ratio (**j**), (**f-i**, n=4-12). The data are expressed as mean  $\pm$  SEM. Significance differences between groups were determined by one-way ANOVA followed by post-hoc analysis (mammary gland area, branching density, epithelial elongation, number of TEBs, cell proliferation and apoptosis numbers). “a” indicates statistically significant difference (P $\leq$  0.05) between OID(CO-M.G) and CO(CO-M.G); “b” indicates statistically significant difference (P $\leq$ 0.05) between OID(CO-M.G) and CO(OID-M.G).

**Figure 3: Development of transplanted mammary tumors in CO or OID daughters (F1).** Tumor volume (**a**) and latency (**b**) (**a-b**, n=10-18/group) in [CO(CO-M.G)], [CO(OID-M.G)], and [OID(CO-M.G)] groups after a six-week monitoring period. Photomicrograph of Ki-67 immunostaining (**c**) (20x, staining indicated by arrows) and apoptotic cells (**d**) (H&E morphological assessment, 20x, cells indicated by arrows). Graphs below show proliferation index (**e**), number of apoptotic cells (**f**), and proliferation/apoptosis ratio (**g**), (**c-g**-n=3-11/group). The data are expressed as mean  $\pm$  SEM. Significance differences between groups were analyzed by repeated measures ANOVA (mammary tumor volume) and one-way ANOVA (tumor latency, proliferation index and number of apoptotic cells) followed by post-hoc analysis. “a” indicates statistically significant difference (P $\leq$ 0.05) between OID(CO.T) and CO(CO.T); “b” indicates statistically significant difference (P $\leq$ 0.05) between OID(CO.T) and CO(OID.T).

**Figure 4: Paternal OID reprograms the sperm small non-coding RNA load in fathers (F0) and sons (F1).** (**a-b**) Scatterplot of sperm tRNA fragments (tRF) from OID (y-axis) fathers (F0, **a**) and OID sons (F1, **b**) versus their respective controls (x-axis) (n=3-4/group) assessed by RNA-seq. GluCTC and GlyGCC are the dominant tRFs. (**c-d**) Heat-map showing differentially expressed tRNA fragments (tRFs) in sperm from OID fathers (**c**) and sons (**d**) compared to CO, highlighting overlapping tRFs in F0 and F1 (boxes). (**e**) Levels (fold change) of the 5 tRFs with overlapping differential expression in both OID fathers(F0) and sons (F1) compared to CO. (**f**) Gene ontology molecular functions significantly enriched in the targets of ValTAC, SerCGA, ArgCCG, ArgTCG and SeCTCA.

**Figure 5: Paternal OID programs breast cancer development and metabolic dysfunction in granddaughters (F2).** (**a-d**) Carcinogen-induced mammary tumorigenesis in CO and OID



female **F2** offspring. Mammary tumor volume (**a**), tumor incidence (**b**), tumor latency (**c**) and tumor mortality (**d**) (n=25/group). Insulin tolerance test (ITT) (**e**) and (**f**) area under curve (AUC) in CO and OID female **F2** offspring (n=8/group). Tumor incidence is shown as percentage of animals with tumors. All other data are mean  $\pm$  SEM. Significant difference were determined by Kaplan-Meier analysis followed by log-rank test (tumor incidence), repeated measures ANOVA (mammary tumor volume), one-way ANOVA (tumor latency, mortality and area under curve), or two-way ANOVA (ITT) followed by post-hoc analysis. “a” indicates statistically significant difference ( $P \leq 0.05$ ) between OIDxOID and COxCO; “b” indicates statistically significant difference ( $P \leq 0.01$ ) between OIDxOID and COxOID.

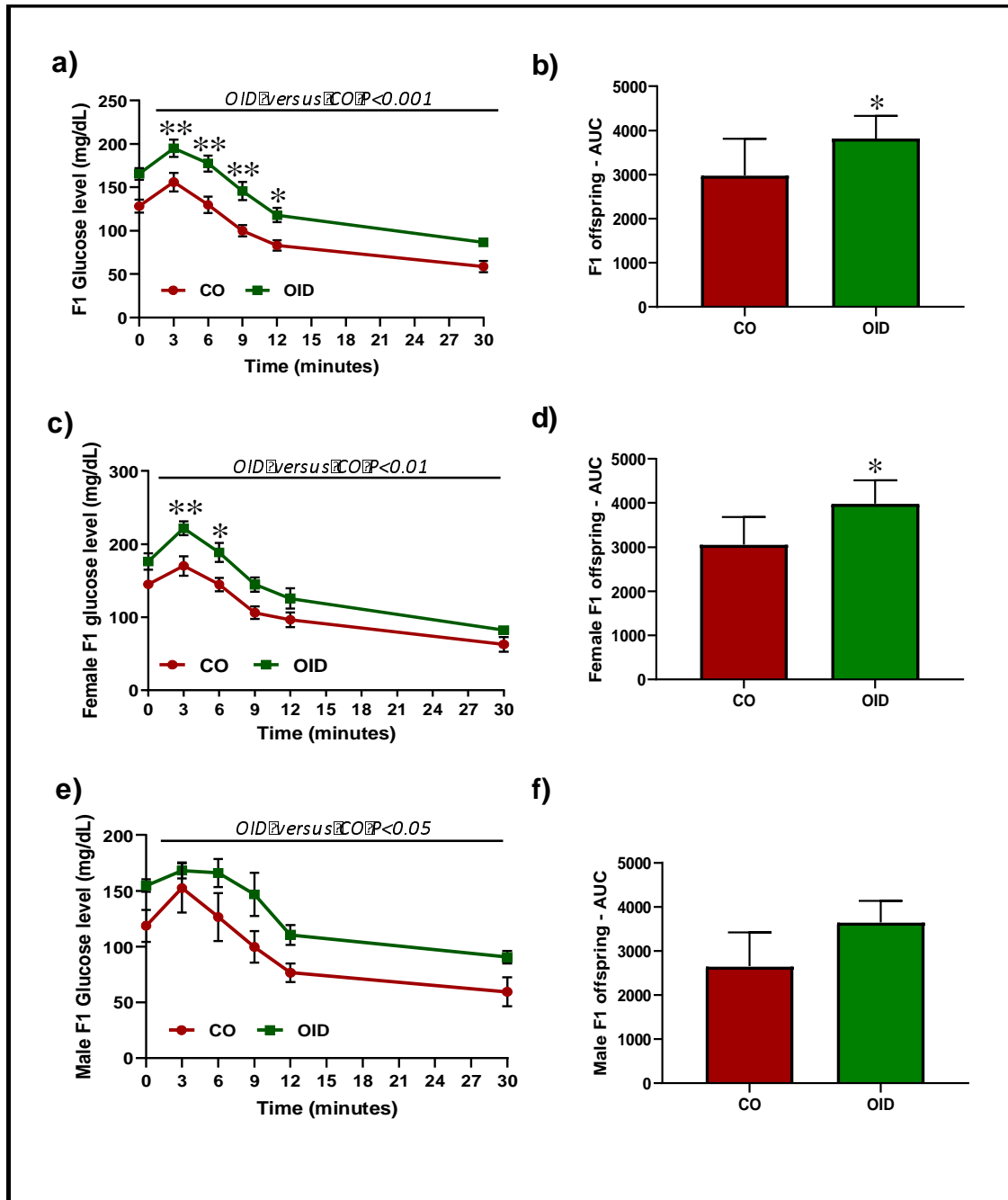


Figure 1

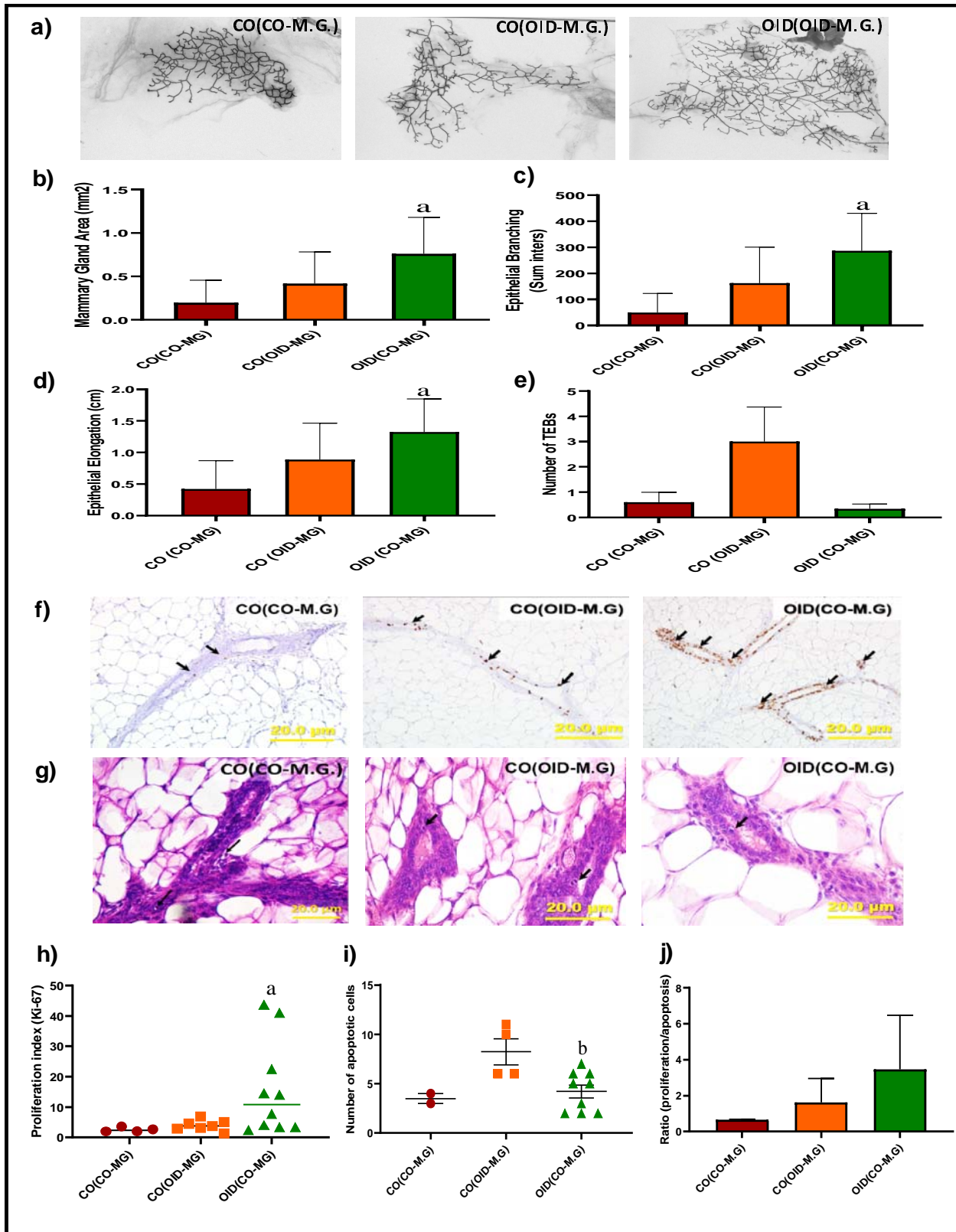


Figure 2

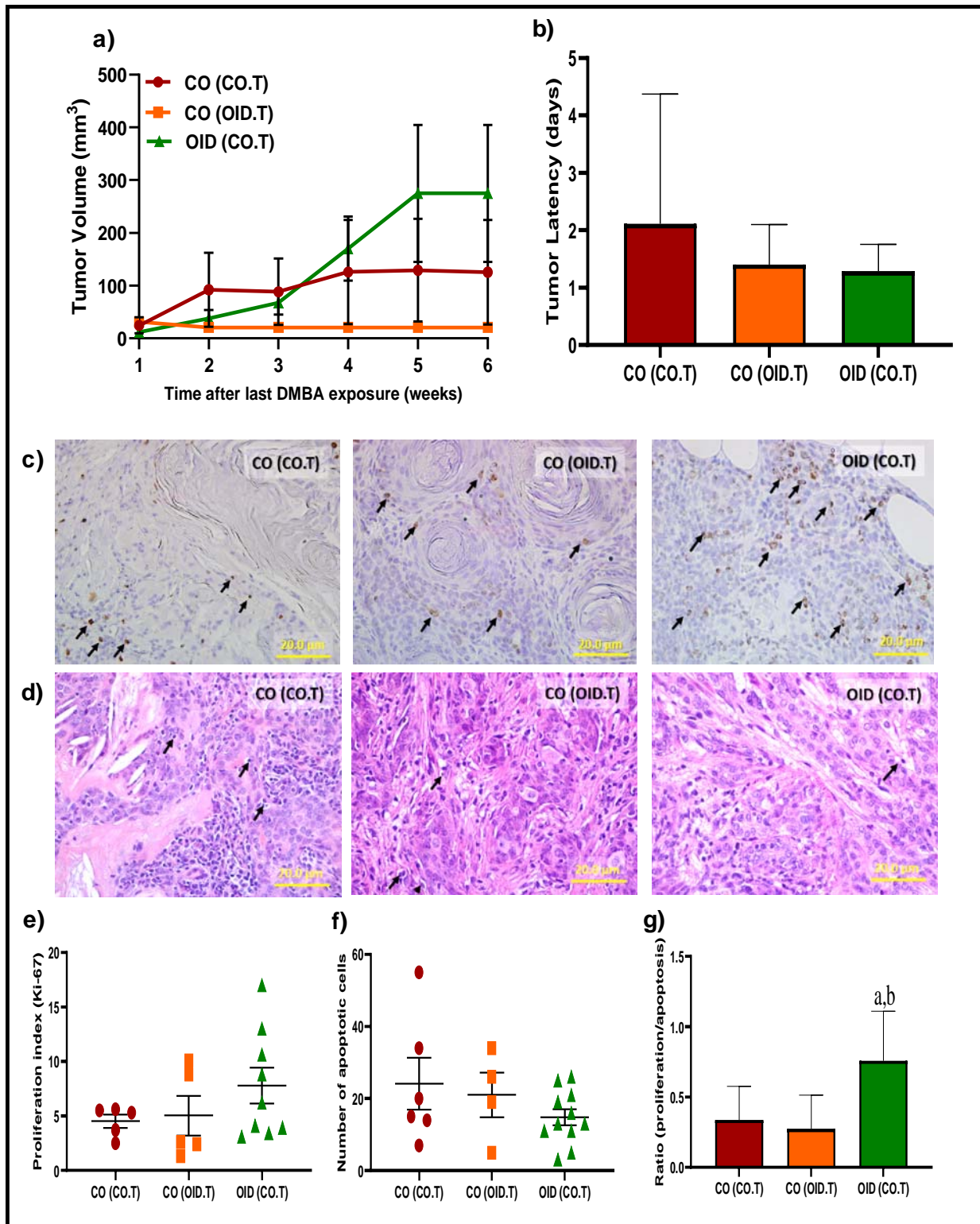
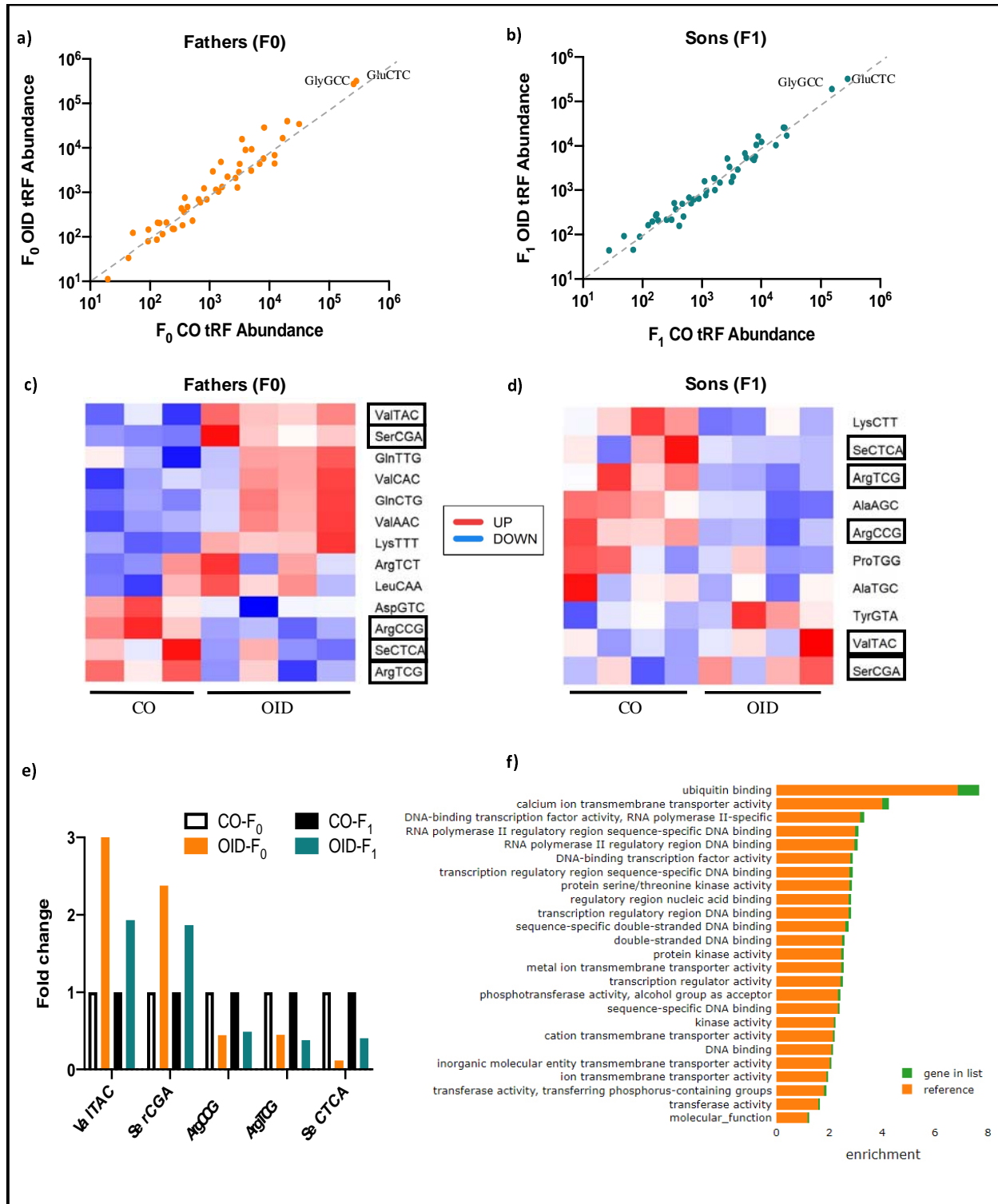


Figure 3



**Figure 4**

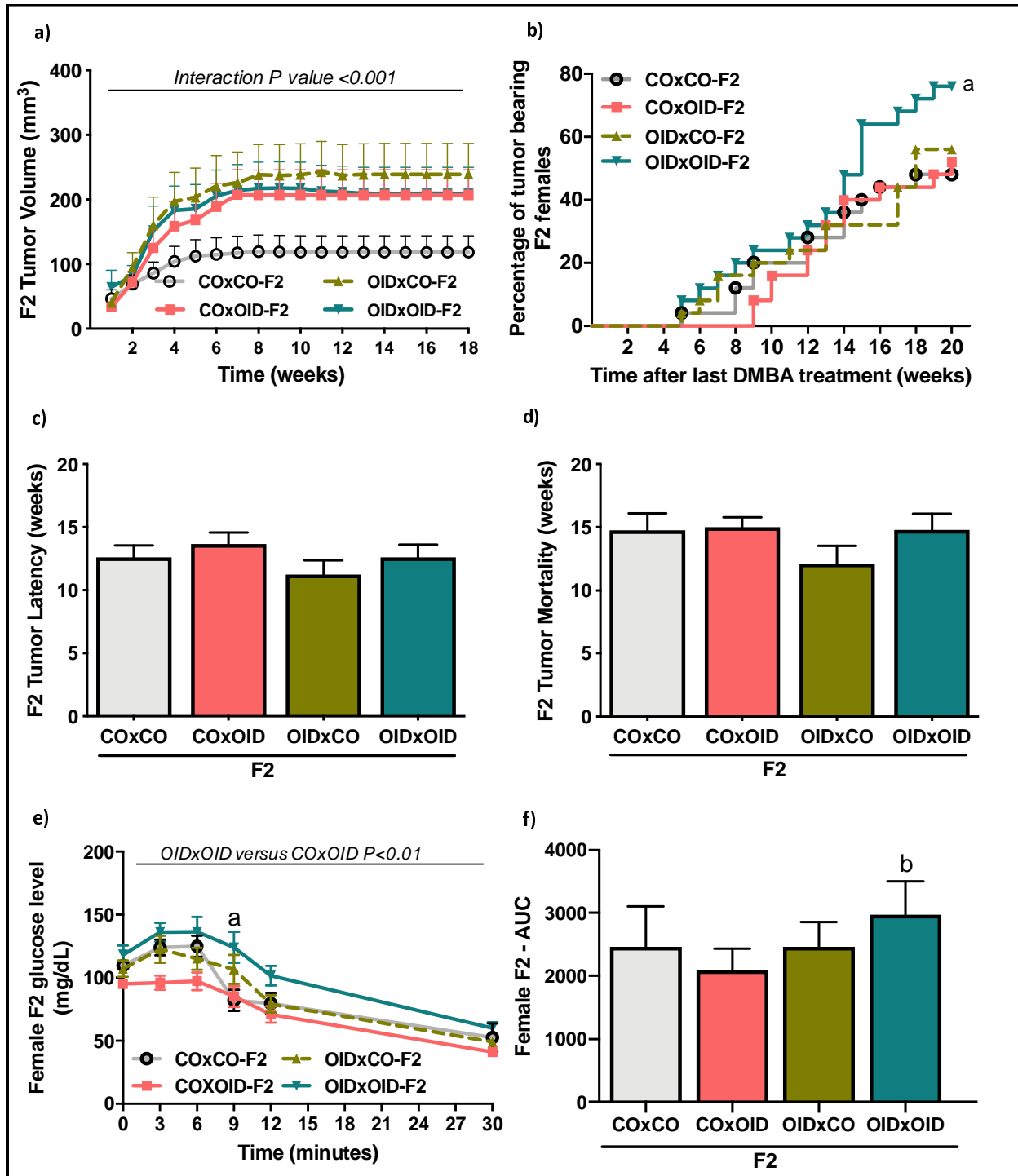


Figure 5



## Supplementary Material

### Supplementary Figures Legends

**Figure S1: Parental body weight gain:** **a)** Longitudinal body weight in control (CO, n=12) and obesity-inducing diet (OID, n=11) fed male mice sires. **b)** Longitudinal body weight of pregnant dams mated with CO (n=16) or OID (n=19) males. The data are expressed as mean  $\pm$  SEM. Significant differences versus the control group were determined by two-way ANOVA followed by post-hoc analysis. \* $P \leq 0.05$ ; \*\* $P \leq 0.01$ ; \*\*\* $P \leq 0.001$

**Figure S2: Breeding scheme to produce the F1 and F2 generations:** Male mice were fed the experimental diets [control (CO) or obesity-inducing diet (OID)] from 3 to 10 weeks of age. CO diet or an OID diet-fed male mice (**F0**) were mated with female mice that were reared on a CO diet only. The resulting male and female offspring (**F1**) were used to produce the **F2** generation. No sibling mating was carried out.

**Figure S3: Mammary transplantation study design:** **a)** CO diet or an OID diet-fed male mice (**F0**) were mated with female mice (**F0**) that were reared on a CO diet only. **F1** females, which consumed only CO diet, were submitted to either a **Mammary Transplantation (M.T.)** or to a **Tumor Transplantation (T.T.)**. **b)** For the M.T., female recipients (from both CO and OID groups) had their 4th inguinal mammary gland removed (1) and later received a mammary gland transplant (colored circles) (2) from either a donor from the same group or from the opposite group. **c)** For the T.T., female donors received 7,12-dimethylbenz[a]anthracene (DMBA) to induce mammary tumors. Later, female recipients (from both CO and OID groups) received, in their 4th inguinal mammary gland, a tumor transplant (colored triangles) from either a donor from the opposite or from the same group.

**Figure S4: OID and CO F1 generation offspring's body weight at different stages of life.** Birth (**a**), weaning (**b**), and longitudinal body weight in female (n=25/group) (**c**) and male (n=34-43/group) (**d**) **F1** generation offspring from fathers fed with CO and OID diets. The data are expressed as mean  $\pm$  SEM. Significant differences versus the control group were determined by two-way followed by post-hoc analysis. \* $P \leq 0.05$ ; \*\* $P \leq 0.01$ ; \*\*\* $P \leq 0.001$ .

**Figure S5: OID and CO F2 generation offspring's body weight at different stages of life.** Birth (**a**) and weaning (**b**) of male and female offspring; Longitudinal body weight (**c**) of female **F2** offspring (n=25/group). The data are expressed as mean  $\pm$  SEM. Significant differences were determined by two-way ANOVA followed by post-hoc analysis. "a" indicates statistically significant difference ( $P \leq 0.05$ ) between OIDxCO and COxCO group; "b" indicates statistically significant difference ( $P \leq 0.05$ ) between OIDxCO and OIDxOID; "c" indicates statistically significant difference ( $P \leq 0.05$ ) between OIDxCO and COxCO, OIDxCO and OIDxOID.

## Supplementary Figures



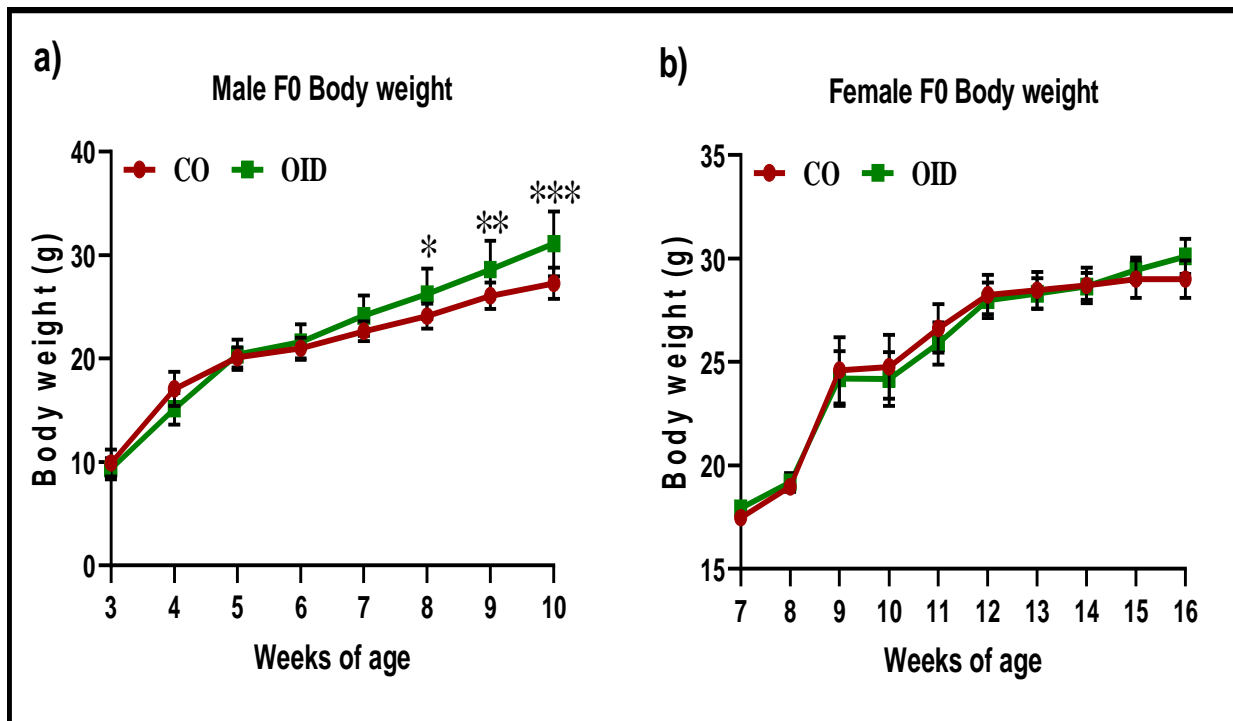


Figure S1

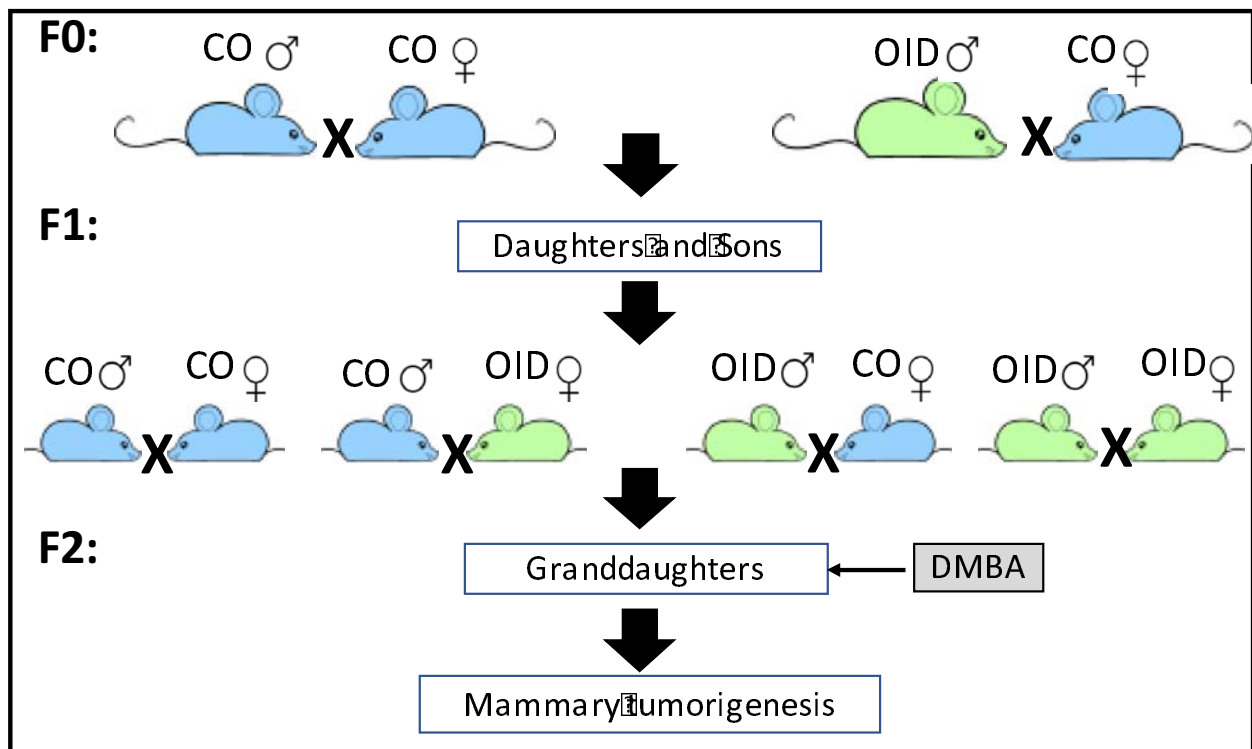


Figure S2

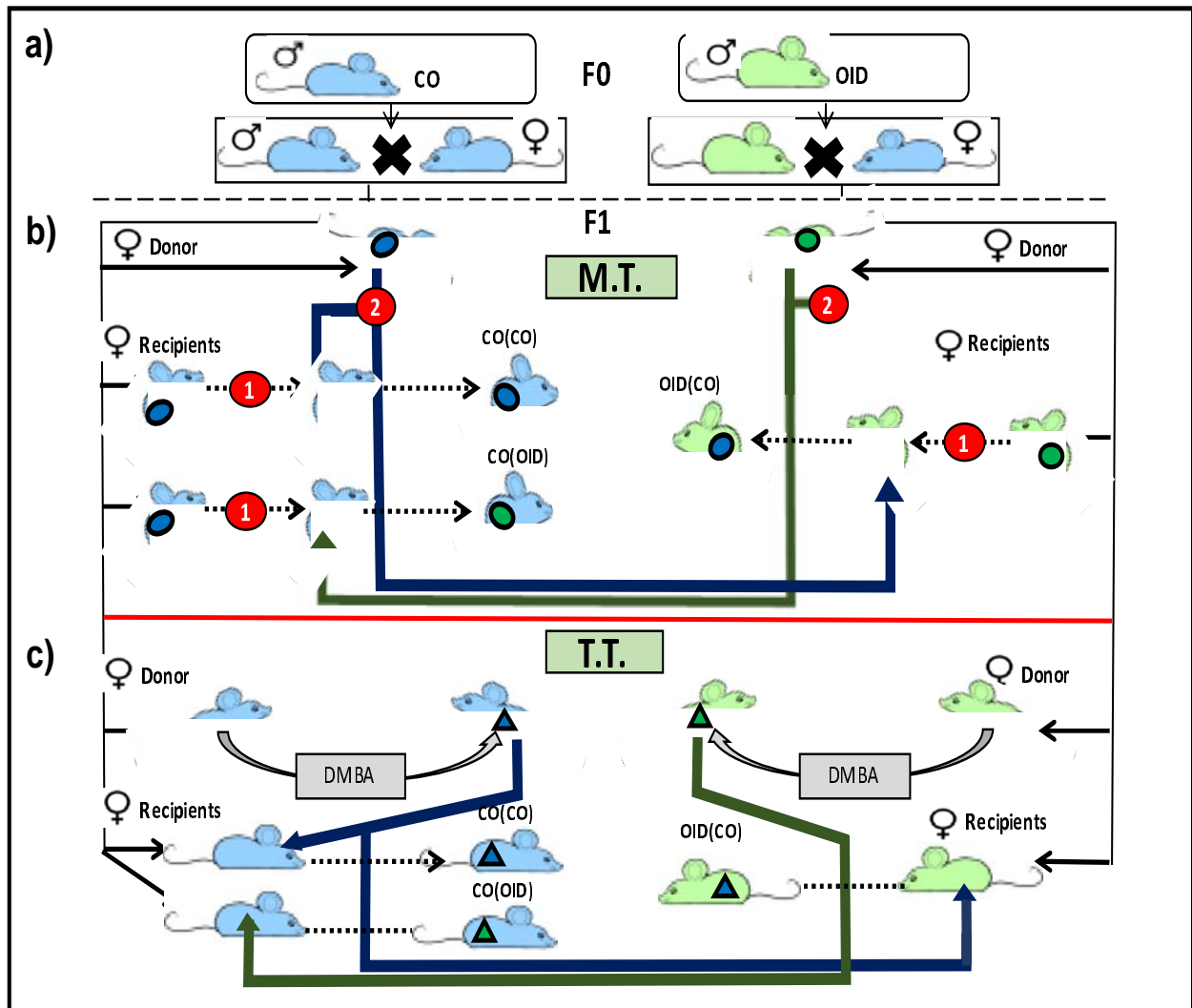


Figure S3

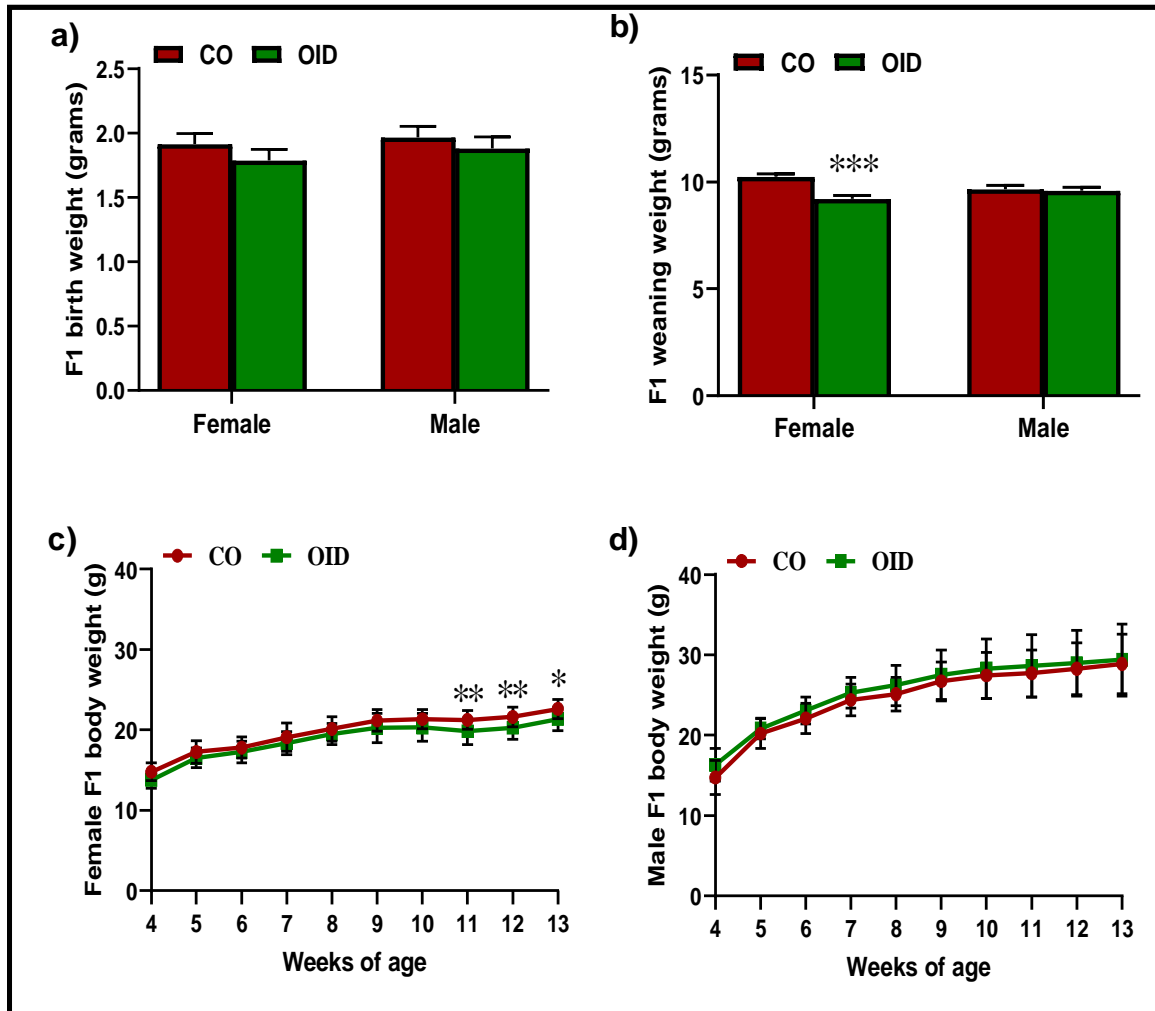


Figure S4

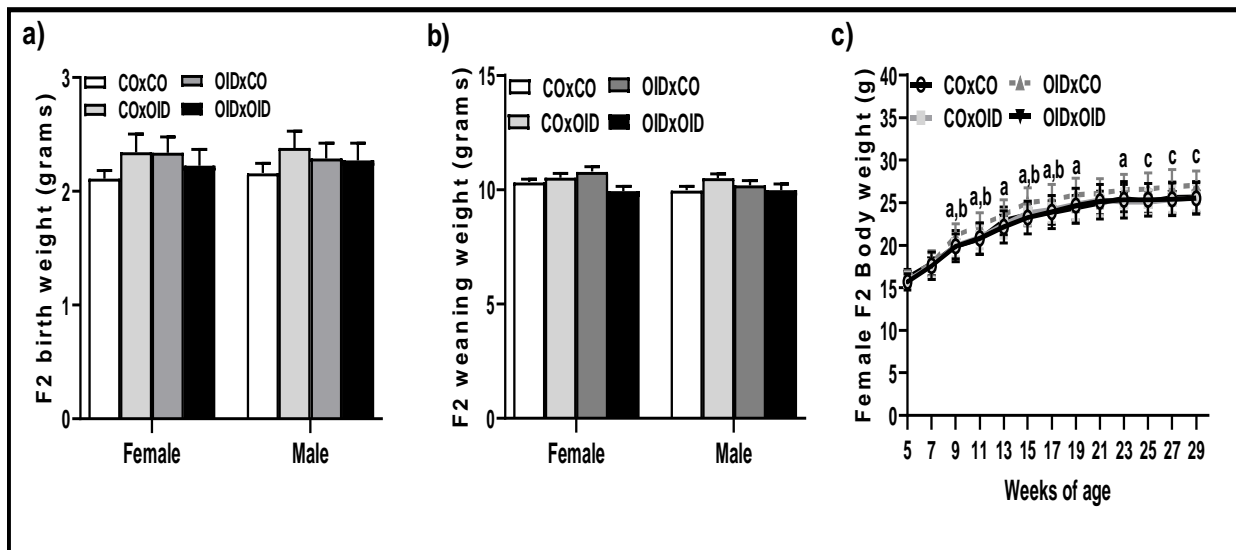


Figure S5

**Table S1:** Composition of the experimental diets

<i>Ingredients</i>	<i>g/kg</i>	
	<b>Control (CO) TD.160018</b>	<b>Obesity-inducing diet (OID) TD.160019</b>
Casein	200.0	288.0
L-Cystine	3.0	2.0
Corn Starch	397.386	-
Maltodextrin	132.0	150.45
Sucrose	100.0	142.0
Corn Oil	50.0	50.0
Lard	20.0	280.0
Cellulose	50.0	20.0
Mineral Mix, AIN-93-MX (94046)	35.0	49.7
Vitamin Mix, AIN-93-VX (94047)	10.0	14.2
Choline Bitartrate	2.50	3.55
TBHQ, antioxidant	0.014	-
Food Coloring	0.1	0.1
% protein by weight (% kcal)	17.7 ( <b>18.8</b> )	25.3 ( <b>19.3</b> )
% carbohydrate by weight (% kcal)	60.1 ( <b>63.9</b> )	31.0 ( <b>23.6</b> )
% fat by weight (% kcal)	7.2 ( <b>17.2</b> )	33.3 ( <b>57.1</b> )
<b>Kcal/g</b>	<b>3.8</b>	<b>5.2</b>

litters.

**Table S2:** Proportion of female and male offspring in CO and OID

<b>Generation</b>	<b>Group</b>	<b>Female</b>	<b>Male</b>
<b>F1</b>	<b>CO</b>	0.57±0.2	0.43±0.1
	<b>OID</b>	0.49±0.2	0.51±0.2
<b>F2</b>	<b>COxCO</b>	0.57±0.5	0.43±0.4
	<b>COxOID</b>	0.45±0.6	0.55±0.4
	<b>OIDxCO</b>	0.52±0.4	0.48±0.4
	<b>OIDxOID</b>	0.56±0.6	0.44±0.5

All data are mean ± SEM.

**Table S3:** Number of offspring and number of contributing fathers per experiment.

<b>Samples</b>	<b>Assay</b>	<b>Group</b>	<b>Father</b>	<b>Female</b>
<b>F1 offspring</b>	<b>Insulin Tolerance Test</b>	<b>CO</b>	5	6
		<b>OID</b>	4	6
<b>Mammary gland transplantation of female F1 offspring</b>	<b>Mammary gland development</b>	<b>CO(CO)</b>	5	5
		<b>CO(OID)</b>	6	9
		<b>OID(CO)</b>	10	12
<b>Mammary tumor transplantation of female F1 offspring</b>	<b>Tumorigenesis</b>	<b>CO(CO)</b>	7	10
		<b>CO(OID)</b>	7	12
		<b>OID(CO)</b>	6	18
	<b>Ki67</b>	<b>CO(CO)</b>	5	5
		<b>CO(OID)</b>	4	5
		<b>OID(CO)</b>	4	9
	<b>Apoptosis</b>	<b>CO(CO)</b>	4	5
		<b>CO(OID)</b>	3	3
		<b>OID(CO)</b>	6	11
<b>F2 offspring</b>	<b>Insulin Tolerance Test</b>	<b>COxCO</b>	5	8
		<b>COxOID</b>	6	8
		<b>OIDxCO</b>	4	8
		<b>OIDxOID</b>	4	8
	<b>Tumorigenesis</b>	<b>COxCO</b>	10	25
		<b>COxOID</b>	10	25
		<b>OIDxCO</b>	10	25
		<b>OIDxOID</b>	7	25



**Table S4:** Mammary gland development in 3-week old female offspring of CO and OID male mice.

<b>Parameters</b>	<b>CO</b>	<b>OID</b>
<b>Epithelial Branching</b>	2.0±0.3	2.6±0.4
<b>Number of TEBs</b>	5.4±1.0	6.0±1.0
<b>Epithelial Elongation (cm)</b>	0.30±0.03	<b>0.41±0.03*</b>

All data are mean ± SEM (n=6/group). \*P≤0.05 by t-test.