



The 3rd World Conference on Kisspeptin, “Kisspeptin 2017: Brain and Beyond”: Unresolved questions, challenges and future directions for the field

M. N. Lehman¹  | L. M. Coolen² | R. A. Steiner³ | G. Neal-Perry³ | L. Wang⁴ | S. M. Moenter^{4,5,6} | A. M. Moore¹ | R. L. Goodman⁷ | S.-H. Yeo⁸ | S. L. Padilla⁹ | A. S. Kauffman¹⁰ | J. Garcia¹¹ | M. J. Kelly^{12,13} | J. Clarkson¹⁴ | S. Radovick¹⁵ | A. V. Babwah¹⁵ | S. Leon¹⁶ | M. Tena-Sempere^{17,18,19,20} | A. N. Comninou²¹ | S. Seminara²² | W. S. Dhillo²¹  | J. Levine^{23,24} | E. Terasawa^{23,25} | A. Negron¹⁵ | V. M. Navarro²⁶ | A. E. Herbison¹⁴

¹Department of Neurobiology and Anatomical Sciences, University of Mississippi Medical Center, Jackson, MS, USA

²Department of Physiology and Biophysics, University of Mississippi Medical Center, Jackson, MS, USA

³Departments of Obstetrics and Gynecology and Physiology and Biophysics, University of Washington, Seattle, WA, USA

⁴Department of Molecular and Integrative Physiology, University of Michigan, Ann Arbor, MI, USA

⁵Department of Obstetrics and Gynecology, University of Michigan, Ann Arbor, MI, USA

⁶Department of Internal Medicine, University of Michigan, Ann Arbor, MI, USA

⁷Department of Physiology, Pharmacology and Neuroscience, West Virginia University, Morgantown, WV, USA

⁸Reproductive Physiology Group, Department of Physiology, Development and Neuroscience, University of Cambridge, Cambridge, UK

⁹Howard Hughes Medical Institute, University of Washington, Seattle, WA, USA

¹⁰Department of Obstetrics and Gynecology and Reproductive Sciences, University of California, San Diego, La Jolla, CA, USA

¹¹Endocrinology and Reproductive Physiology Training Program, University of Wisconsin-Madison Madison, WI, USA

¹²Department of Physiology and Pharmacology, Oregon Health and Science University, Portland, OR, USA

¹³Division of Neuroscience, Oregon National Primate Research Center, Beaverton, OR, USA

¹⁴Centre for Neuroendocrinology and Department of Physiology, University of Otago School of Biomedical Science, Dunedin, New Zealand

¹⁵Department of Pediatrics, Rutgers University – Robert Wood Johnson Medical School, New Brunswick, NJ, USA

¹⁶Division of Endocrinology, Diabetes and Hypertension, Department of Medicine, Harvard Medical School, Brigham and Women's Hospital, Boston, MA, USA

¹⁷Instituto Maimonides de Investigación Biomédica de Córdoba (IMIBIC), Córdoba, Spain

¹⁸Department of Cell Biology, Physiology and Immunology, University of Córdoba, Córdoba, Spain

¹⁹Hospital Universitario Reina Sofia, Córdoba, Spain

²⁰CIBER Fisiopatología de la Obesidad y Nutrición (CIBEROBN), Instituto de Salud Carlos III, Córdoba, Spain

²¹Section of Investigative Medicine, Imperial College London, Hammersmith Hospital, London, UK

²²Harvard Reproductive Sciences Center and Reproductive Endocrine Unit, Department of Medicine, Massachusetts General Hospital, Boston, MA, USA

²³Wisconsin National Primate Research Center, University of Wisconsin-Madison, Madison, WI, USA

²⁴Department of Neuroscience, University of Wisconsin School of Medicine and Public Health, Madison, WI, USA

²⁵Department of Pediatrics, University of Wisconsin-Madison, Madison, MA, USA

²⁶Division of Endocrinology, Diabetes and Hypertension, Harvard Medical School, Brigham and Women's Hospital, Boston, MA, USA

Correspondence

Dr Michael Lehman, Department of Neurobiology and Anatomical Sciences, University of Mississippi Medical Center, Jackson, MS, USA.

The 3rd World Conference on Kisspeptin, “Kisspeptin 2017: Brain and Beyond” was held on 30–31 March at the Rosen Centre Hotel in Orlando, Florida, providing an international forum for multidisciplinary scientists to meet and share cutting-edge

In Memoria: We dedicate this article to the memory of our dear friend and colleague Dr Kei-Ichiro Maeda, who contributed so much to our field.

Email: mlehman@umc.edu

Funding information

Eunice Kennedy Shriver National Institute of Child Health and Human Development, Grant/Award Number: R13HD092038; University of Mississippi Medical Center; British Society for Neuroendocrinology; Ferring; Millendo Therapeutics; NeRRe Therapeutics; Crenetics Pharmaceuticals; Ogeda SA; Myovant Sciences

research on kisspeptin biology and its relevance to human health and disease. The meeting built upon previous world conferences focused on the role of kisspeptin and associated peptides in the control of gonadotrophin-releasing hormone (GnRH) secretion and reproduction. Based on recent discoveries, the scope of this meeting was expanded to include functions of kisspeptin and related peptides in other physiological systems, including energy homeostasis, pregnancy, ovarian and uterine function, and thermoregulation. In addition, discussions addressed the translation of basic knowledge of kisspeptin biology to the treatment of disease, with the goal of seeking consensus about the best approaches to improve human health. The 2-day meeting featured a nontraditional structure, with each day starting with poster sessions followed by lunch discussions and facilitated large-group sessions with short presentations to maximise the exchange of new, unpublished data. Topics were identified by a survey prior to the meeting, and focused on major unresolved questions, important controversies and future directions in the field. Finally, career development activities provided mentoring for trainees and junior investigators, as well as networking opportunities for those individuals with established researchers in the field. Overall, the meeting was rated as a success by attendees and covered a wide range of lively and provocative discussion topics on the changing nature of the field of “kisspeptinology” and its future.

KEYWORDS

conference, GnRH, international, kisspeptin, neuroendocrine

1 | INTRODUCTION AND SCOPE OF THE CONFERENCE

Subsequent to the discovery that loss-of-function mutations in kisspeptin signalling genes cause reproductive deficits in humans and mice,^{1–4} the field of kisspeptin (KISS1) research has exploded. Two previous international meetings were held on kisspeptin biology, in 2008 and 2012, as a forum for capturing that progress, sharing new data and facilitating collaboration. Both earlier meetings focused predominantly on understanding the basic roles of kisspeptin and related peptides, such as neurokinin B (NKB), in the central control of reproduction via gonadotrophin-releasing hormone (GnRH) neurones. The 3rd World Conference on Kisspeptin built upon this foundation and expanded our perspective to explore the wider universe of kisspeptin biology extending to other homeostatic functions of the brain and beyond, including peripheral tissues such as the gonads, liver and placenta.

The avalanche of research on kisspeptin over the past decade and a half has demonstrated the quintessential role of kisspeptin neurones in awakening pulsatile GnRH secretion at puberty and supporting reproductive function in adulthood in all mammals. Kisspeptin neurones are now viewed as essential central processors of reproduction, regulating both pulsatile and surge modes of GnRH secretion. However, there is clearly much more to discover. Indeed,

with sophisticated new technologies and tools, including optogenetics, virally-introduced constructs for “designer receptors exclusively activated by designer drugs” or DREADDs, in vivo voltage-sensing and calcium-imaging technologies, we stand at the threshold of more discoveries and opportunities to improve human health and treat disorders of reproduction and beyond. At the level of the kisspeptin control of GnRH, current research is aimed at expanding our understanding of (i) the molecular, cellular and biophysical components of the kisspeptin-GnRH pulse generating mechanisms,^{5,6} as well as the inter- and intracellular signalling pathways that mediate physiological and developmental control of reproduction^{9,2}; (ii) the mechanisms by which peripheral and metabolic cues gate pubertal activation of kisspeptin and GnRH neurones; and (iii) the role of kisspeptin neurones in mediating the influence of other internal and environmental cues^{7–9} on the development and adult functioning of the reproductive axis.

At the same time, previously unimagined new chapters on kisspeptin signalling have begun to emerge involving its role in cells, tissues and physiological systems beyond GnRH. For example, recent data suggest that kisspeptin signalling plays a critical role in oocyte development and sperm motility,^{10–14} although we have only begun to scratch the surface of this new realm of KISS1 biology. Other recent studies have implicated hepatocyte-derived KISS1 in the regulation of glucose homeostasis and insulin secretion,¹⁵ which dovetails with

new ideas about the role of kisspeptin signalling in the regulation of metabolism and body weight regulation.¹⁶ Kisspeptin may play a role in trophoblast invasion,¹⁷ and recent evidence supports a role for kisspeptin with respect to implantation and the maintenance of early pregnancy.^{18–20} The interplay between kisspeptin and NKB present in the brain may even extend to the placenta, although little known about this placental dialogue and its possible implications for placental physiology and disorders, such as pre-eclampsia.²¹

As noted above, a pressing frontier of knowledge in this field is an understanding of the translation of basic knowledge of kisspeptin and related peptides to the treatment of disease. As such, it is important to consider both reproductive and nonreproductive aspects of KISS1 biology, such as with respect to pharmacotherapeutics related to kisspeptin, NKB, and dynorphin signalling for treatment of infertility, polycystic ovary syndrome (PCOS) and other disorders.^{22–25} Indeed, the discovery of the role of NKB as a key component of the GnRH pulse generator^{5,6} has opened a completely new frontier in translational research. For example, NKB antagonists are now being investigated as treatments for PCOS,²⁵ as well as for postmenopausal hot flashes (also commonly referred to as “hot flashes”).^{26,27,83} Finally, given growing evidence for the role of kisspeptin in the central and peripheral control of body weight and metabolism,^{15,16,86} the possibility exists for future therapeutic interventions in humans that act at the intersection of reproduction and metabolism.

The 3rd World Conference was convened as a forum to share information on all of these new roles for kisspeptin and related peptides in human health and disease, as well as to frame the conversation within the context of major unresolved questions and controversies in the field. As noted above, We also considered the present and future of the translational pipeline that leads from drug discovery to clinical application, and what challenges lay ahead regarding the development of drugs that mimic or antagonise kisspeptin and related peptides. In addition to expanding the scope of the meeting, early discussions among the members of the Organizing and Program Committees (see Supporting information, Figure S1) also led to the decision to take a nontraditional approach to the planning and format of the conference (Appendix 1). In brief, topics for the meeting were solicited from a large, international group of prospective attendees, who were asked to identify the “big questions” that remain in our field. Based on this survey, issues and areas were selected as topics for large and small group sessions. In addition, the meeting format was purposely designed to promote informal interaction and discussion; facilitated large group sessions were centered around short informal presentations of unpublished data and unresolved issues, and small group lunch table discussions focused on additional questions and controversies. Finally, poster sessions, career development activities for trainees and junior faculty, and social events all served as vehicles for further interactions, both formal and informal. Our hope was that, by providing this type of interactive forum for sharing new ideas, and promoting networking among established scientists, new investigators and trainees, we would lay a path for future research in the field. We hope that this report will provide a useful summary for

those who attended the meeting, as well as others who were unable to attend, and will also serve as a possible template for future scientific gatherings in this expanding area of research.

2 | MAJOR UNRESOLVED QUESTIONS, CONTROVERSIES AND RESEARCH DIRECTIONS FOR THE FUTURE

As noted in the Introduction, a major aim of the conference was to stimulate open and speculative discussions of unresolved major issues related to the emerging functional roles of kisspeptin, including current obstacles and challenges to future progress and eventual clinical/translational impact.

The following are synopses of the discussions held in each of the facilitated large group sessions, reflecting those areas identified by the pre-meeting interest survey. Other topics concerning unresolved questions and future directions were the subject of the informal lunch table discussions held on each day of the conference. These smaller table discussions were just as fruitful as the large group sessions. The individual topics and questions addressed during the luncheons are listed in the scientific program (see Supporting information, Figure S2) but due to space limitations, they are not summarised here.

2.1 | How do kisspeptin neurones participate in the gating of puberty?

Over a decade ago, *Science* magazine identified “what triggers puberty?” as 1 of 125 questions needing an answer.⁹⁴ This was 2 years after the discovery of kisspeptin as a major excitatory neuromodulator of reproductive neuroendocrine function. Over the intervening period, arcuate kisspeptin neurones have been postulated to mediate steroid negative-feedback and potentially rhythm generation for GnRH release, both of which are critical aspects of the pubertal transition. In this session, 5 leaders in the field briefly presented their latest research relevant to the questions of whether or not sex differences in the tempo of puberty and pubertal disorders are a result of kisspeptin sex differences, and what turns on kisspeptin at puberty. The session leaders then held a group discussion on these and other topics.

Consensus emerged on a number of major issues. One point was that sex differences in puberty of both primate and rodent species may involve later development of arcuate kisspeptin (KNDy) neurones in males.⁸⁷ Precisely which attributes of KNDy neurones are critical remains a point of debate, with signs pointing to NKB in some species and kisspeptin in others. This suggests that NKB and kisspeptin may act as independent signals at different stages of reproductive neuroendocrine development. Some of these differences may arise from the mechanisms of oestradiol feedback, which in itself is still controversial as a basis for prepubertal restraint of GnRH neurone output. Does oestradiol merely regulate expression of neuromodulators and, if so, how (eg, epigenetic changes)?

Does centrally-synthesised oestradiol play a role and is this species-specific? Another area of lively debate was the definition of puberty. This arose from a disconnect between typical external measures of puberty (eg, vaginal opening and oestrous cycles in females, preputial separation in males) vs a desire to directly assess maturation of underlying neural circuit function, which may be happening at a different developmental time. For example, oestrogens are needed for the external manifestation of puberty in females and a common presumption has been that this is subsequent to activation/reactivation of neuroendocrine systems. In control animals, this likely means neuroendocrine puberty occurs before external signs. In some infertile models, there may be early development of external pubertal signs (eg, early vaginal opening in kisspeptin-targeted knockout of oestrogen receptor α) but a failure to complete the pubertal process. Should that animal be considered postpubertal because of vaginal opening or still in the process because oestrous cyclicity and fertility are not established? Another area of discussion was whether or not there are neuronal circuits upstream of kisspeptin neurones (eg, glutamatergic, GABAergic, Tac1, substance P) that participate in the pubertal process. Both new unpublished data on additional tachykinins (substance P and neurokinin A) that arise outside KNDy neurones and a plethora of historical data from the “prekisspeptin” era suggest the functional reproductive neuroendocrine system extends upstream from hypothalamic kisspeptin populations.

Although the field has made progress, the question posed in *Science* 12 years ago (“what forces childhood to end?”) remains unanswered. The focus of the field has been on what is measurable: peptide and mRNA levels, cycles and genital development. This can be used as a starting point for further mechanistic studies. For example, how does neuronal connectivity and activity change over development? What is the role of glia, neural immune cells, androgens and the microbiome? Can puberty or reproduction happen (under the right circumstances) without kisspeptin? When critical functional elements are identified, what are the main controlling factors (eg, epigenetics, microRNAs?). How different and how similar are the sexes and species? Ultimately, can responsiveness to kisspeptin and GnRH be used to make clean diagnoses of pubertal disorders at younger ages in children to optimise therapeutic interventions?

2.2 | What is the mechanistic basis of pulse generation?

This session began with a summary of the development of the KNDy model for GnRH pulse generation, with an emphasis on similarities and differences of it in rodents and ruminants.²⁸ Two speakers presented evidence in mice that optogenetic inhibition of KNDy neurones in vivo inhibited episodic luteinising hormone (LH) secretion and that optogenetic stimulation of KNDy neurones in a slice preparation stimulated this population in the contralateral arcuate and induced a circuit-wide excitation via an NKB-driven slow excitatory postsynaptic potential (EPSP). The third presentation demonstrated that endogenous dynorphin was released during the entire period of an NKB-induced LH pulse in sheep and the fourth speaker moved

beyond the hypothalamus with data indicating that kisspeptin acts in the medial amygdala of rats to increase LH release and that optogenetic stimulation of kisspeptin neurones in this area induces an LH pulse in mice.

The attendees discussed differences in the colocalisation of the 3 KNDy peptides among rodent, ovine, human and nonhuman primate species. First, in the rodent^{29,30} and ovine brain,³¹ kisspeptin is highly colocalised with neurokinin B and dynorphin in the arcuate nucleus of the hypothalamus. However, dual-immunolabelling studies within the infundibular nucleus (arcuate nucleus) and stalk of the human³² revealed either few or no dynorphin cell bodies, despite previous reports of dynorphin mRNA within the area.³³ The inability to detect dynorphin colocalisation with kisspeptin or NKB cells was considered a challenge to the translational value of the KNDy neurone hypothesis generated in sheep and rodents. However, it was debated whether the lack of labeling reflects a paucity in the dynorphin protein, or a lack in the sensitivity of currently available immunolabelling techniques. Second, despite strong data obtained from the ewe³⁴ and goat,³⁵ pharmacological and electrophysiological studies in rodents have not supported the proposed role of endogenous dynorphin in terminating the GnRH/LH pulse,^{36–39} although recent in vitro data on the control of slow EPSPs are consistent with this hypothesis.⁴⁰ Thus, a major unresolved issue is whether dynorphin or an alternate signal terminates the GnRH/LH pulse in rodents.

Additional future directions discussed in this forum included investigation of non-KNDy neurones that could contribute to the control of GnRH/LH pulse generation, such as kisspeptin neurones of the medial amygdala. The continued investigation of the mechanistic basis of GnRH/LH pulse generation will use exciting new tools in neuroscience that can correlate the activity of isolated neuronal circuits with GnRH and LH release, such as optogenetics, fast-scan cyclic voltammetry and calcium imaging.⁸⁴

2.3 | Negative-feedback and hormone regulation of arcuate (ARC) kisspeptin cells

Based on observations of brain region-specific regulation of kisspeptin mRNA and peptide in response to gonadal steroids,⁴¹ one of the first functional roles proposed for kisspeptin was that of the ARC subpopulation of kisspeptin cells in mediating the negative-feedback control of pulsatile GnRH secretion. Although considerable progress has been made subsequently, there are still a number of important unresolved questions concerning this central role of kisspeptin, and multiple issues were considered during this session. These included the enduring major question of whether ARC kisspeptin cells are necessary for oestrogen negative-feedback to occur, independent of the questions of where and on what neurones is the direct action of oestrogens required? Related questions discussed included the possible role of neuronal-derived oestrogens in negative-feedback, as well as the interactions between oestrogens and progesterone required for feedback control under normal physiological conditions.^{88,89}

Several major obstacles were identified as challenges to answering questions related to the role of ARC kisspeptin neurones in

negative-feedback. Among these was the challenge of determining oestrogen receptor α expression in the membrane of ARC kisspeptin neurones, in conjunction with understanding the functional roles of nonclassical oestrogen receptor in mediating oestrogen negative-feedback. Current controversies discussed include the issue of possible species difference in the role of dynorphin in oestrogen negative-feedback, as well as differences between ruminants and rodents in neuronal activation in ARC kisspeptin cells following removal of oestrogen negative-feedback.

A number of exciting new pieces of data and directions for future research were discussed in this session. This included recent electrophysiological findings⁴² showing that oestradiol decreases glutamatergic inputs to ARC kisspeptin neurones, and also that glutamatergic transmission to the same cells is increased in female mice bearing kisspeptin-specific knockout of oestrogen receptor α . Perhaps most exciting was evidence indicating that serial LH pulse bleeds in kisspeptin-ER knockout mice showed significant impairment in oestrogen negative-feedback, in contrast to the lack of changes seen in previous studies involving single measurements of LH. Finally, as an unresolved issue for the future, the question of whether oestrogen negative-feedback is really necessary for regulation of neuronal firing or electrical activity of ARC kisspeptin neurones was raised.

2.4 | Positive-feedback and hormone control of preoptic kisspeptin neurones

Ovulation in female mammals is gated at the neuroendocrine level by an oestrogen-mediated positive-feedback induction of LH secretion. This "surge" release of LH is itself controlled by a preceding surge in GnRH secretion from the brain. The secretion of GnRH is itself tightly regulated by a collection of hormones and upstream neurotransmitters and neuropeptides. The neural and molecular mechanisms that underlie the neuroendocrine GnRH and LH surges still remain incompletely characterised, although mounting evidence in rodents supports kisspeptin neurones in the anteroventral periventricular and rostral periventricular (AVPV/PeN) region (also called the rostral periventricular area of the third ventricle, R3PV) as key participants in this preovulatory event. Presentations in this session reviewed a number of pieces of evidence regarding this role, as well as unanswered questions. For example, oestradiol positive-feedback and the LH surge are also dependent on proper progesterone signalling, although how this works has not been entirely clear. It was recently demonstrated that progesterone signalling directly in KISS1 neurones is required to mount an LH surge using an oestradiol-positive-feedback model,^{43,44} suggesting these neurones integrate both oestradiol and progesterone steroid signalling to generate the surge.

In rodents and other species, the GnRH/LH surge is precisely timed in a circadian fashion, occurring just before or at the onset of nightly activity. Circadian gating of the LH surge depends on temporal input from the brain's master circadian clock, the suprachiasmatic nucleus (SCN)⁴⁵ and current evidence points to AVPV/PeN kisspeptin neurones as targets of the SCN. For example, data from

multiple rodent species demonstrate a circadian pattern of AVPV/PeN KISS1 gene expression and neuronal activation.^{46,47} Moreover, recent evidence indicates that the SCN-derived neuropeptide, vasopressin, induces AVPV/PeN KISS1 neuronal activity and may serve as the circadian integrating signal for the LH surge.⁴⁸ Along with other data, this supports the notion that AVPV/PeN KISS1 neurones can incorporate both ovarian positive-feedback (oestrogen) and circadian cues (vasopressin) to drive GnRH activity and mount a bolus surge of LH that ultimately triggers ovulation. How the circadian and steroid hormone cues are integrated within the KISS1 neurone and what intra-cellular signalling pathways and processes are activated (or inhibited) still remain to be determined.

Based on receptor expression and hormone treatment studies, AVPV/PeN kisspeptin neurones are sensitive to both ovarian sex steroids (oestradiol and progesterone) and also prolactin,⁴⁹⁻⁵¹ although the functional relevance of the latter remains unknown. AVPV/PeN kisspeptin neurones project not only to multiple downstream brain regions, including areas containing GnRH neurones, but also to other areas, such as the PVN and ARC. Likewise, the AVPV/PeN neurones receive synaptic input from neurones in several regions, including the SCN and ARC.^{40,52} The projections from the ARC may include glutamate or dynorphin, although their role in the surge process remains to be fully explored. Indeed, aside from the temporal input of SCN onto the kisspeptin cells, it is unclear whether and how these other inputs and downstream targets are involved in AVPV/PeN kisspeptin-induced GnRH/LH surge or whether they are involved in other processes unrelated to the surge. It is also unknown whether there are "sub-populations" of kisspeptin neurones within the larger AVPV/PeN population and, if so, do these sub-populations serve different physiological processes? Continued *in vivo* work using advanced genetic and viral technology will help to uncover the mechanism(s) by which AVPV/PeN kisspeptin neurones function to trigger the LH surge and ovulation, as well as contribute to other nonsurge processes.

2.5 | How do kisspeptin neurones participate in the regulation of body temperature, stress and other nonreproductive functions?

This session addressed the issue of how kisspeptin neurones participate in the regulation of body temperature and stress and, more broadly, how kisspeptin neurones participate in the control of autonomic functions. Because reproduction is a fundamental homeostatic function, it is possible that a set of central "command" neurones coordinates all of these other functions with reproduction. Therefore, this session covered diverse functions, such as temperature, circadian rhythms, parturition, lactation, energy homeostasis, stress and even aspects of social behaviour. Emphasised throughout this session was the role of the co-localised neurotransmitters in the kisspeptin neurones of ARC and those in the AVPV/PeN. One of the highlights of this session was a review and update on the role of neurokinin B, originating from ARC kisspeptin (KNDy) neurones in the steroidal regulation of

body temperature. Because all 3 KNDy peptides are increased in the postmenopausal state, it has been postulated that NKB transmission may play a role in hot flushes. Indeed, basic findings on the critical role of KNDy neurones and their NKB projections to the medial preoptic area in the control of body temperature⁹⁰ set the stage for exciting clinical trials for treating hot flushes in postmenopausal women with NKB receptor (NK3R) antagonists.⁸³ A point of discussion was where exactly at the cellular level are the NK3R antagonists acting to block KNDy neuronal transmission: presynaptically or postsynaptically?

Other talks in this session highlighted the role of arcuate KISS1 neurones in the regulation of circadian rhythms and nonrapid eye movement sleep. Studies were presented in which synaptic transmission of KNDy neurones was blocked using a viral vector containing tetanus toxin targeted to arcuate *Kiss1-cre* neurones. However, questions arose as to what transmitter or transmitters released from KNDy mediate these actions and whether they have direct or indirect actions on suprachiasmatic neurones. Evidence was also presented for a role of AVPV/PeN kisspeptin neurones in parturition via synapses on oxytocin neurones. This communication (via fibre projections) is enhanced in late gestation and may provide excitatory input to oxytocin neurones for parturition. Although i.c.v. kisspeptin increases oxytocin cell neural firing, the exact cellular site of action is still not known. Additional evidence presented suggested that kisspeptin may be involved in lactation and prolactin secretion through its actions on dopamine neurones, and these actions are via the neuropeptide FF receptor 1 (NPFFR1). A general point of discussion was the fact that we are lacking the pharmacological tools (ie, selective KISS1R and NPFFR1 antagonists) to appropriately and rigorously parse out this pathway. Finally, interesting findings were presented on the role of kisspeptin in mediating social behaviour in the *medaka* fish. A kisspeptin homologue activates KISS1R in neuropeptide B neurones that synapse on and excite vasotocin/isotocin neurones in this species, regulating social behaviours associated with mating.

The overarching theme throughout this session was the observation that kisspeptin neurones are very complex with respect to the neurotransmitters that they express, how they are regulated during different physiological states, and the projections/synapses that they establish. One aspect that has been largely ignored is the fact that they also express fast amino acid neurotransmitters, predominantly GABA in the AVPV/PeN kisspeptin neurones and glutamate in ARC kisspeptin neurones, which may be conveying some of these functions. Also, are the postsynaptic actions of substances released by kisspeptin cells determined by the selectivity of the postsynaptic receptors and/or are the peptide and amino acid neurotransmitters differentially released at different firing frequencies as earlier findings⁴⁰ would suggest? Key to addressing these and other challenges is the need for better pharmacological tools (peptide agonists and antagonists) to parse out specific functions. Cellular physiological studies will help to establish the efficacy and selectivity of agonists and antagonists such that they can be moved forward into whole animal experiments and ultimately into the clinic. Certainly, the current ongoing development of NKB antagonists for treatment

of postmenopausal hot flushes is a strong proof of concept for this approach.⁸³

2.6 | What are the reproductive functions of kisspeptin/KISS1R systems in the periphery?

Although KISS1 and KISS1R are expressed widely outside of the brain, the roles of KISS1R signalling in the periphery remain relatively poorly understood. KISS1 and/or KISS1R are expressed in reproductive tissues such as the ovary, testes, endometrium and the placenta,⁵³ leading to the hypotheses that KISS1R signalling is involved in the local regulation of reproduction within these tissues. This session featured presentations and discussions that focused on the roles of the kisspeptin signalling system in these tissues.

The use of genetically-modified mice has revealed potential roles for KISS1/KISS1R signalling in ovarian and endometrial function, with a loss of KISS1R signalling causing defects in ovarian reserve, implantation and pregnancy. Whether or not these findings are relevant to human disorders of reproduction is an important, outstanding question. It was reported that a woman bearing a mutation in the KISS1R,⁵⁴ who had a failed pregnancy, was later able to become pregnant following in vitro fertilisation treatment and carry the pregnancy to term. Whether the mutation resulted in a complete loss-of-function⁵⁵ or may be associated with spontaneous reversal of infertility⁵⁶ was not resolved. A published study⁵⁷ further highlighted species differences by revealing that kisspeptin, although detectable in very high levels in the blood during pregnancy in humans and some primates, is barely detectable in other species. The role of circulating kisspeptin in humans and the reason for its potential absence in other species remains to be clarified.

The ability to study the role of KISS1/KISS1R signalling in the periphery remains difficult and further research, particularly in humans, is required. A recently developed mouse model lacking peripheral signalling but retaining intact central signalling⁸⁵ has served as a powerful tool for investigating the peripheral roles for the ovarian and endometrial KISS1/KISS1R in regulating fertility.²⁰ However, many questions remain, including whether circulating kisspeptin originates from the placenta, the liver¹⁵ or elsewhere; does it regulate placental function and/or the timing of parturition; and can its levels be used as a biomarker for pre-eclampsia risk? Furthermore, if circulating kisspeptin is important for pregnancy, is there a compensatory mechanism in the absence of KISS1R signalling in humans? These important questions must be addressed as progress is made to better understand the reproductive functions of kisspeptin/KISS1R systems in the periphery.

2.7 | Metabolic functions of kisspeptin in the periphery

There is an obvious connection between gonadal function and metabolism, via multiple convergent regulatory pathways, acting in the brain and peripheral tissues.⁵⁸ Although evidence indicates that metabolic signals can influence, directly or indirectly, KISS1

neurones to modulate reproductive function, recent, as yet fragmentary evidence suggests a reverse interplay in which KISS1 signalling may operate as an important regulator of metabolism, glucose homeostasis and, eventually, adipose function.

However, the nature and physiological relevance of such direct metabolic actions of kisspeptins are yet to be fully defined and are still a matter of considerable debate. Although the initial results failed to document any detectable effects of kisspeptin on food intake,⁵⁹ more recent data showed that congenital, whole body absence of kisspeptin signalling increased body weight and adiposity, as well as glucose intolerance, in female mice, irrespective of gonadal status.¹⁶ This would suggest there is a primary role of kisspeptin signalling in body weight/glucose homeostasis, whose underpinnings remain unclear. Intriguingly, KISS1R null mice eat less, pointing out potential alterations in the thermogenic program that need to be investigated to explain the conundrum of lower food intake but yet higher body weight. In addition, liver-derived kisspeptin also has been suggested to participate in glucose homeostasis, via a bidirectional pancreatic-liver loop, whereby glucagon stimulates hepatic kisspeptin output to suppress β -cell insulin production.¹⁵ Dysregulation of such a circuit has been suggested to be causative for hyperglycaemia and type-2 diabetes. Yet, no conclusive evidence for dysregulated glycaemia has emerged so far from pharmacological studies addressing the impact of kisspeptin administration to laboratory animals and humans, and data for stimulatory rather than inhibitory effects of kisspeptin on insulin secretion,⁶⁰ depending on prevailing glucose concentrations, have been also reported. Finally, fragmentary evidence suggested that the adipose tissue may express KISS1 itself⁶¹; yet, the magnitude and functionality of such adipose expression remain obscure, and further investigation is warranted regarding the actual roles, if any, of kisspeptin, its receptor and eventual co-transmitters, in key aspects of adipocyte biology, such as differentiation, thermogenic programming and potential secretory activity.

Given the gaps in the existing evidence, additional efforts are needed to fully clarify the metabolic roles of kisspeptin, teasing apart its genuine direct effects from the potential secondary actions as a result of its capacity to modulate gonadal steroid secretion. Similarly, the actual impact and pathophysiological relevance of kisspeptin not only from the liver, but also from the placenta⁶² in the control of glucose homeostasis need to be defined, as a prerequisite for safety validation and/or eventual new indications of kisspeptin-based therapies. Likewise, the as yet undefined roles of kisspeptin signalling in the control of thermogenesis or adipocyte biology warrant further investigation. All these efforts will allow us to elucidate the putative metabolic dimension of kisspeptin, its eventual physiological relevance and possible therapeutic implications.

2.8 | What are the challenges and likely outcomes of drug development in the field?

Basic and translational research has identified kisspeptin and the neurokinins as key regulators of various aspects of reproductive

physiology and pathology.^{63–65} In parallel to this, several agonists and antagonists for both kisspeptin and NKB receptors are under development.⁶⁶ The combination of these developments appears to comprise a perfect route to clinical applications, although several challenges remain.

First, there is still a need to clearly delineate the roles of these peptides in both physiological and pathophysiological states. These include both common disorders such as PCOS,⁶⁷ as well as more rare conditions such as idiopathic hypogonadotrophic hypogonadism.⁶⁸ Human studies often generate greater impact when they are able to draw upon observations made in animal models.^{69–71} These complex and time-consuming mechanistic studies are critical for ensuring appropriate and evidence-based clinical applications.

Second, to target central reproductive and nonreproductive pathways, agonists and antagonists for kisspeptin and NKB receptors may need to access the brain and cross the blood-brain-barrier (BBB). For example, brain penetration for neurokinin 3 antagonists may prove to be fundamental to their efficacy for treating hot flushes and PCOS.^{25,72,73} In addition, recent data suggests that different formulations of kisspeptin have different capabilities with respect to crossing the BBB when administered peripherally.⁷⁴ Probing these considerations is not only important in understanding the biology of these neuropeptides but also will be relevant when considering which form of kisspeptin to use in a clinical setting.

Third, clinical trial protocols should be developed in reflection of important unmet clinical needs while at the same time balancing the unique requirements of vulnerable populations such as adolescents⁷⁵ and pregnant women.⁷⁶ Clear, well-defined end-points, better assay tools and a thorough understanding of off-target effects will be essential. In addition, appropriate doses and routes of administration need to be determined for the current and future arsenal of agonists, antagonists and mixed agonists-antagonists.⁷⁷

Finally, advancing fundamental basic and translational research to produce meaningful clinical impact requires the development of fruitful partnerships between academia and the pharmaceutical industry. Academic organisations and pharmaceutical companies often have different expectations for drug development, with difficulties encountered in technology transfer and carrying out trials for “off the shelf” compounds. Furthermore, these difficulties vary from country to country. However, with potentially exciting new diagnostic and treatment options for a variety of disorders, including idiopathic hypogonadotrophic hypogonadism,^{68,78} hypothalamic amenorrhoea,⁷⁹ hyperprolactinaemia,⁸⁰ infertility,²² menopausal hot flushes,⁷³ psychosexual disorders^{81,82} and PCOS²⁵ already on the horizon, overcoming the challenges in drug development for the kisspeptin field is an important and worthy goal.

2.9 | What are the biggest technical and conceptual impediments or concerns to progress in the field?

The role of kisspeptin-KISS1R signalling in regulating and maintaining reproductive function is well established. However, many obstacles

exist regarding the optimal approach for studying the mechanisms and physiological impact of kisspeptin signalling at the level of the brain and in the periphery.

Important questions regarding kisspeptin neurocircuitry remain to be answered to move the field forward. Although hypothalamic kisspeptin neurones are well established as being intricately involved with the regulation of GnRH neurones and gonadotrophin release, pinpointing the exact nuclei (AVPV, PeN and ARC) responsible for different modes of GnRH release is very difficult. The field needs to adopt and develop methodologies that enable specific kisspeptin populations (and sub-populations) to be regulated in freely behaving mice. In part, this can be achieved through the viral transduction of specific regional kisspeptin populations with optogenetic and chemogenetic tools. The investigation of neurochemically-defined subgroups within the AVPV/PeN and ARC kisspeptin populations may be achieved by intersectional transgenic strategies. Accordingly, the development of mice in which specific kisspeptin neural populations express Cre in an inducible manner would be invaluable in deciphering adult physiology.

It is also necessary to better understand the mechanistic processes by which kisspeptin targets are triggered and regulated. The further development of selective KISS1R antagonists and the generation of antisera specific for KISS1R would be extremely useful for identifying and understanding the cells targeted by kisspeptin and their responses. Moreover, the generation of mice in which KISS1R is epitope-tagged (eg, HA or FLAG) could enable the localisation, tracking and interactions of KISS1R within cells to be examined in a variety of tissues.

Improved assays for measuring kisspeptin output and its functional effects on various organ systems are also needed. Several kisspeptin-secreting cell lines have recently become available and will enable assessment of mechanistic interactions between receptors and second messenger cascades within the kisspeptin cell. The eventual validation of these cell lines as being specific models of AVPV/PeN or ARC (or other) kisspeptin-secreting cells will be critical. Although it has been possible to use conventional approaches to measure kisspeptin concentrations in serum of some species and, indeed, even in the monkey mediobasal hypothalamus, it would be invaluable to develop more advanced kisspeptin biosensing or bioassay methodologies. This would facilitate greatly the dynamic measurement of kisspeptin concentrations even in small tissues or brain regions of the rodent. From the perspective of measuring the output of the kisspeptin neurones themselves, the substantial advances in voltage sensing and calcium imaging technologies will make it possible to record the activity of specific kisspeptin cell types in freely behaving rodents.⁸⁴

Recently, the emergence of single-cell RNA sequencing has provided the most direct and unbiased method for defining a cell type based on its transcriptional profile, which can provide additional insights into connectivity and function of the cell. This method can facilitate the discovery of gene expression profile of Kiss1 neurones, identifying the repertoire of surface receptors that may mediate physiological responses.^{91,92} This approach

can help provide tremendous insights into upstream signals that converge on Kiss1 neurones to modulate the reproductive axis. Furthermore, an advanced approach for translational profiling of neurones based on connectivity using viral translating ribosome affinity purification has been reported recently.⁹³ In this approach, CRE-dependent adeno-associated virus or other retrograde viruses (rabies or canine adenovirus) are engineered to express an enhanced green fluorescent protein-tagged ribosome protein enabling rapid access to translating mRNAs from a discrete CRE-expressing neural population. Projection-specific translational profiling is achieved by selectively precipitating neuronal ribosomes based on connectivity. A quantitative polymerase chain reaction is then used for selected target genes or high-throughput RNA sequencing to determine the neuronal identity without the need for detailed anatomical or electrophysiological investigation.⁹³

Much has been achieved in the kisspeptin field. The ongoing revolutions in techniques will enable the detailed investigation of defined populations of cells and their interactions at both network and whole organism levels to continue to produce exciting insights. The application of these methodologies will provide unprecedented opportunities to advance kisspeptin research and generate a comprehensive understanding of physiology of kisspeptin signalling throughout the body.

3 | SUMMARY AND CONCLUSIONS

The 3rd World Conference on Kisspeptin was attended by a total of 166 registrants, of whom over 40% were trainees. Registrants represented 17 countries from Africa, Asia, Australia/Oceania, Europe, North and South America. Seventy-three abstracts were presented in the 2 morning poster sessions. Over 120 of the attendees participated in the small group lunch table discussions on each of the 2 days.

To assess the effectiveness of the meeting and its format (see Supporting information, Figure S2), attendees were asked during the session to complete a brief survey (see Supporting information, Figure S3) before leaving the conference hall for the concluding social event. Attendees were very positive about the meeting experience, with a large majority either being satisfied or very satisfied with the major elements of the conference. For example, 92% of the survey respondents were either satisfied or very satisfied with the overall structure of the meeting and its emphasis on informal discussions, 89% were satisfied or very satisfied with the opportunities offered for networking, and 82% were satisfied or very satisfied with the facilitated, large group discussions. There were a number of comments and specific suggestions for improvements: a number of participants suggested increasing the length of short presentations in the facilitated group sessions to 5 minutes each, blending in longer presentations as needed at the same time as maintaining time for questions and discussion. In general, attendees were enthusiastic about the different type of meeting structure, and comments

included “amazing format”, “format very informative and productive” and “I really liked this meeting format that encourages engaging discussions”.

Overall, the 3rd World Conference on Kisspeptin, “Kisspeptin 2017: Brain and Beyond”, provided a comprehensive and forward-looking view of a scientific field that is continuing to evolve in both scientific scope and range of impact. The interactive, non-traditional meeting format was well received and facilitated the informal exchange of new data and ideas, interactions between researchers at varying career stages, and open discussion of the challenges and obstacles to be overcome for the field to move forward. The participation of researchers from a number of pharmaceutical companies added value to the discussions of the clinical translation and potential impact of basic discoveries in kisspeptin biology on human health. Although the field of “kisspeptinology” is clearly at a crossroads, transitioning beyond its initial focus on 1 peptide and physiological system, opportunities for new discoveries, based on the array of tools and technologies recently available, have never been greater and the coming years are certain to be exciting ones.

ACKNOWLEDGEMENTS

The authors would like to acknowledge the generous support of the financial sponsors of the 3rd World Conference on Kisspeptin: Millendo Therapeutics, Ferring Pharmaceuticals, Myovant Sciences, Ogeda SA, Crinetics Pharmaceuticals, NeRRe Therapeutics, the British Society for Neuroendocrinology, the University of Mississippi Medical Center and NIH Eunice Kennedy Shriver NICHD R13HD092038 to MNL. WSD is supported by an NIHR Research Professorship. We thank Dr Alex Comninou who proposed the meeting tagline of “Kisspeptin 2017: Brain and Beyond” and designed the conference logo. Finally, we would like to gratefully acknowledge the following individuals for their superb administrative and logistical support: Ms Vicki Skinner, Beverly Brooks, Caitlan Carreiro and Christy Wilson of the University of Mississippi Medical Center, as well as Ms Ayuko Kimura-Fay and the staff of the Endocrine Society.

ORCID

M. N. Lehman  <http://orcid.org/0000-0002-9076-5108>

W. S. Dhillon  <http://orcid.org/0000-0001-5950-4316>

REFERENCES

- De Roux N, Genin E, Carel J-C, Matsuda F, Chaussain J-L, Milgrom E. Hypogonadotropic hypogonadism due to loss of function of the KiSS 1-derived peptide receptor GPR54. *Proc Natl Acad Sci USA*. 2003;100:10972-10976.
- Seminara SB, Messager S, Chatzidaki EE, et al. The GPR54 gene as a regulator of puberty. *N Engl J Med*. 2003;349:1614-1627.
- Topaloglu AK, Tello JA, Kotan LD, et al. Inactivating KiSS1 mutation and hypogonadotropic hypogonadism. *N Engl J Med*. 2012;366:629-635.
- d'Anglemont de Tassigny X, Fagg LA, Dixon JPC, et al. Hypogonadotropic hypogonadism in mice lacking a functional KiSS 1 gene. *Proc Natl Acad Sci USA*. 2007;104:10714-10719.
- Navarro VM, Gottsch ML, Chavkin C, Okamura H, Clifton DK, Steiner RA. Regulation of gonadotropin-releasing hormone secretion by kisspeptin/dynorphin/neurokinin B neurons in the arcuate nucleus of the mouse. *J Neurosci*. 2009;29:11859-11866.
- Lehman MN, Coolen LM, Goodman RL. Minireview: kisspeptin/neurokinin B/dynorphin (KNDy) cells of the arcuate nucleus: a central node in the control of gonadotropin-releasing hormone secretion. *Endocrinology*. 2010;151:3479-3489.
- Bartzen-Sprauer J, Klosen P, Ciofi P, Mikkelsen JD, Simmonneaux V. Photoperiodic co-regulation of kisspeptin, neurokinin B and dynorphin in the hypothalamus of a seasonal rodent. *J Neuroendocrinol*. 2014;26:510-520.
- Kinsey-Jones JS, Li XF, Knox AM, et al. Down-regulation of hypothalamic kisspeptin and its receptor, KiSS1r, mRNA expression is associated with stress-induced suppression of luteinising hormone secretion in the female rat. *J Neuroendocrinol*. 2009;21:20-29.
- Tena-Sempere M. Kisspeptin/GPR54 system as potential target for endocrine disruption of reproductive development and function. *Int J Androl*. 2010;33:360-368.
- León S, Barroso A, Vázquez MJ, et al. Direct actions of kisspeptins on GnRH neurons permit attainment of fertility but are insufficient to fully preserve gonadotropic axis activity. *Sci Rep*. 2016 Jan;12:19206.
- Dorfman MD, Garcia-Rudaz C, Alderman Z, et al. Loss of Ntrk2/KiSS1r signaling in oocytes causes premature ovarian failure. *Endocrinology*. 2014;155:3098-3111.
- Saadelin IM, Koo OJ, Kang JT, et al. Paradoxical effects of kisspeptin: it enhances oocyte in vitro maturation but has an adverse impact on hatched blastocysts during in vitro culture. *Reprod Fertil Dev*. 2012;24:656-668.
- Salehi S, Adeshina I, Chen H, et al. Developmental and endocrine regulation of kisspeptin expression in mouse Leydig cells. *Endocrinology*. 2015;156:1514-1522.
- Pinto FM, Cejudo-Román A, Ravina CG, et al. Characterization of the kisspeptin system in human spermatozoa. *Int J Androl*. 2012;35:63-73.
- Song WJ, Mondal P, Wolfe A, et al. Glucagon regulates hepatic kisspeptin to impair insulin secretion. *Cell Metab*. 2014;19:667-681.
- Tolson KP, Garcia C, Yen S, et al. Impaired kisspeptin signaling decreases metabolism and promotes glucose intolerance and obesity. *J Clin Invest*. 2014;124:3075-3079.
- Bilban M, Ghaffari-Tabrizi N, Hintermann E, et al. Kisspeptin-10, a KiSS-1/metastin-derived decapeptide, is a physiological invasion inhibitor of primary human trophoblasts. *J Cell Sci*. 2004;117:1319-1328.
- Jayasena CN, Abbara A, Izzi-Engbeaya C, et al. Reduced levels of plasma kisspeptin during the antenatal booking visit are associated with increased risk of miscarriage. *J Clin Endocrinol Metab*. 2014;99:E2652-E2660.
- Calder M, Chan YM, Raj R, et al. Implantation failure in female KiSS1^{-/-} mice is independent of their hypogonadic state and can be partially rescued by leukemia inhibitory factor. *Endocrinology*. 2014;155:3065-3078.
- León S, Fernandois D, Sull A, et al. Beyond the brain – peripheral kisspeptin signaling is essential for promoting endometrial gland development and function. *Sci Rep*. 2016;6:29073.
- Page NM, Woods RJ, Gardiner SM, et al. Excessive placental secretion of neurokinin B during the third trimester causes pre-eclampsia. *Nature*. 2000;405:797-800.
- Jayasena CN, Abbara A, Comninou AN, et al. Kisspeptin-54 triggers egg maturation in women undergoing in vitro fertilization. *J Clin Invest*. 2014;124:3667-3677.

23. MacLean DB, Matsui H, Suri A, Neuwirth R, Colombel M. Sustained exposure to the investigational kisspeptin analog, TAK-448, down-regulates testosterone into the castration range in healthy males and in patients with prostate cancer: results from two phase 1 studies. *J Clin Endocrinol Metab*. 2014;99:E1445-E1453.
24. Fraser GL, Hoveyda HR, Clarke IJ, et al. The NK3 receptor antagonist ESN364 interrupts pulsatile LH secretion and moderates levels of ovarian hormones throughout the menstrual cycle. *Endocrinology*. 2015;156:4214-4225.
25. George JT, Kakkar R, Marshall J, et al. Neurokinin B receptor antagonism in women with polycystic ovary syndrome: a randomized, Placebo-Controlled Trial. *Clin Endocrinol Metab*. 2016;101:4313-4321.
26. Mittelman-Smith MA, Williams H, Krajewski-Hall SJ, McMullen NT, Rance NE. Role for kisspeptin/neurokinin B/dynorphin (KNDy) neurons in cutaneous vasodilatation and the estrogen modulation of body temperature. *Proc Natl Acad Sci USA*. 2012;109:19846-19851.
27. Jayasena CN, Comninou AN, Stefanopoulou E, et al. Neurokinin B administration induces hot flushes in women. *Sci Rep*. 2015;16:8466.
28. Goodman RL, Lehman MN. Kisspeptin neurons from mice to men: similarities and differences. *Endocrinology*. 2012;153:5105-5118.
29. Burke MC, Letts PA, Krajewski SJ, Rance NE. Coexpression of dynorphin and neurokinin B immunoreactivity in the rat hypothalamus: morphologic evidence of interrelated function within the arcuate nucleus. *J Comp Neurol*. 2006;498:712-726.
30. Navarro VM, Gottsch ML, Chavkin C, Okamura H, Clifton DK, Steiner RA. Regulation of gonadotropin-releasing hormone secretion by kisspeptin/dynorphin/neurokinin B neurons in the arcuate nucleus of the mouse. *The Journal of neuroscience : the official journal of the Society for Neuroscience*. 2009;29:11859-11866.
31. Goodman RL, Lehman MN, Smith JT, et al. Kisspeptin neurons in the arcuate nucleus of the ewe express both dynorphin A and neurokinin B. *Endocrinology*. 2007;148:5752-5760.
32. Hrabovszky E, Sipos MT, Molnar CS, et al. Low degree of overlap between kisspeptin, neurokinin B, and dynorphin immunoreactivities in the infundibular nucleus of young male human subjects challenges the KNDy neuron concept. *Endocrinology*. 2012;153:4978-4989.
33. Rometo AM, Rance NE. Changes in prodynorphin gene expression and neuronal morphology in the hypothalamus of postmenopausal women. *J Neuroendocrinol*. 2008;20:1376-1381.
34. Goodman RL, Hileman SM, Nestor CC, et al. Kisspeptin, neurokinin B, and dynorphin act in the arcuate nucleus to control activity of the GnRH pulse generator in ewes. *Endocrinology*. 2013;154:4259-4269.
35. Wakabayashi Y, Nakada T, Murata K, et al. Neurokinin B and dynorphin A in kisspeptin neurons of the arcuate nucleus participate in generation of periodic oscillation of neural activity driving pulsatile gonadotropin-releasing hormone secretion in the goat. *J Neuroscience*. 2010;30:3124-3132.
36. Mostari P, Ieda N, Deura C, et al. dynorphin-kappa opioid receptor signaling partly mediates estrogen negative feedback effect on LH pulses in female rats. *J Reprod Dev*. 2013;59:266-272.
37. Ruka KA, Burger LL, Moenter SM. Regulation of arcuate neurons coexpressing kisspeptin, neurokinin B, and dynorphin by modulators of neurokinin 3 and κ -opioid receptors in adult male mice. *Endocrinology*. 2013;154:2761-2771.
38. Grachev P, Li X, Kinsey-Jones J, et al. Suppression of the GnRH pulse generator by neurokinin B involves a κ -opioid receptor-dependent mechanism. *Endocrinology*. 2012;153:4894-4904.
39. de Croft S, Boehm U, Herbison AE. Neurokinin B activates arcuate kisspeptin neurons through multiple tachykinin receptors in the male mouse. *Endocrinology*. 2013;154:2750-2760.
40. Qiu J, Nestor CC, Zhang C, et al. High-frequency stimulation-induced peptide release synchronizes arcuate kisspeptin neurons and excites GnRH neurons. *eLife*. 2016;5:e16246.
41. Oakley AE, Clifton DK, Steiner RA. Kisspeptin signaling in the brain. *Endocrine Rev*. 2009;30:713-743.
42. Wang L, Burger LL, Greenwald-Yarnell ML, Meyer MG, Moenter SM. Glutamatergic transmission to hypothalamic kisspeptin neurons is differentially regulated by estradiol through estrogen receptor α in adult female mice. *J Neurosci*. 2018;38:1061-1072.
43. Stephens SB, Tolson KP, Rouse ML Jr, et al. Absent progesterone signaling in kisspeptin neurons disrupts the LH Surge and impairs fertility in female mice. *Endocrinology*. 2015;156:3091-3097.
44. Mittelman-Smith MA, Wong AM, Micevych PE. Estrogen and progesterone integration in an in vitro model of RP3V kisspeptin neurons. *Neuroendocrinology*. 2017;106:101-115.
45. de la Iglesia HO, Schwartz WJ. Minireview: timely ovulation: circadian regulation of the female hypothalamo-pituitary-gonadal axis. *Endocrinology*. 2006;147:1148-1153.
46. Robertson JL, Clifton DK, de la Iglesia HO, Steiner RA, Kauffman AS. Circadian regulation of KISS1 neurons: Implications for timing the preovulatory GnRH/LH surge. *Endocrinology*. 2009;150:3664-3671.
47. Williams WP 3rd, Jarjisian SG, Mikkelsen JD, Kriegsfeld LJ. Circadian control of kisspeptin and a gated GnRH response mediate the preovulatory luteinizing hormone surge. *Endocrinology*. 2011;152:595-606.
48. Piet R, Fraissenon A, Boehm U, Herbison AE. Estrogen permits vasopressin signaling in preoptic kisspeptin neurons in the female mouse. *J Neurosci*. 2015;35:6881-6892.
49. Silveira MA, Furigo IC, Zampieri TT, et al. STAT5 signaling in kisspeptin cells regulates the timing of puberty. *Mol Cell Endocrinol*. 2017;448:55-65.
50. Brown RS, Herbison AE, Grattan DR. Prolactin regulation of kisspeptin neurones in the mouse brain and its role in the lactation-induced suppression of kisspeptin expression. *J Neuroendocrinol*. 2014;26:898-908.
51. Kokay IC, Petersen SL, Grattan DR. Identification of prolactin-sensitive GABA and kisspeptin neurons in regions of the rat hypothalamus involved in the control of fertility. *Endocrinology*. 2011;152:526-535.
52. Yeo SH, Herbison AE. Projections of arcuate nucleus and rostral periventricular kisspeptin neurons in the adult female mouse brain. *Endocrinology*. 2011;152:2387-2399.
53. Bhattacharya M, Babwah AV. Kisspeptin: beyond the brain. *Endocrinology*. 2015;156:1218-1227.
54. Pallais JC, Bo-Abbas Y, Pitteloud N, Crowley WF Jr, Seminara SB. Neuroendocrine, gonadal, placental, and obstetric phenotypes in patients with IHH and mutations in the G-protein coupled receptor, GPR54. *Mol Cell Endocrinol*. 2006; 254-255: 70-77.
55. Ahow M, Min L, Pampillo M, et al. KISS1R signals independently of Galphq/11 and triggers LH secretion via the beta-arrestin pathway in the male mouse. *Endocrinology*. 2014;155:4433-4446.
56. Sidhoum VF, Chan YM, Lippincott MF, et al. Reversal and relapse of hypogonadotropic hypogonadism: resilience and fragility of the reproductive neuroendocrine system. *J Clin Endocrinol Metab*. 2014;99:861-870.
57. Herreboudt AM, Kyle VR, Lawrence J, Doran J, Colledge WH. KISS1 mutant placentas show normal structure and function in the mouse. *Placenta*. 2015;36:52-58.
58. Roa J, Tena-Sempere M. Connecting metabolism and reproduction: roles of central energy sensors and key molecular mediators. *Mol Cell Endocrinol*. 2014;397:4-14.
59. Thompson EL, Patterson M, Murphy KG, et al. Central and peripheral administration of kisspeptin-10 stimulates the hypothalamic-pituitary-gonadal axis. *J Neuroendocrinol*. 2004;16:850-858.
60. Hauge-Evans AC, Richardson CC, Milne HM, Christie MR, Persaud SJ, Jones PM. A role for kisspeptin in islet function. *Diabetologia*. 2006;49:2131-2135.

61. Brown RE, Imran SA, Ur E, Wilkinson M. KiSS-1 mRNA in adipose tissue is regulated by sex hormones and food intake. *Mol Cell Endocrinol*. 2008;281:64-72.
62. Horikoshi Y, Matsumoto H, Takatsu Y, et al. Dramatic elevation of plasma metastin concentrations in human pregnancy: metastin as a novel placenta-derived hormone in humans. *J Clin Endocrinol Metab*. 2003;88:914-919.
63. Silveira LG, Latronico AC, Seminara SB. Kisspeptin and clinical disorders. *Adv Exp Med Biol*. 2013;784:187-199.
64. Grachev P, Millar RP, O'Byrne KT. The role of neurokinin B signalling in reproductive neuroendocrinology. *Neuroendocrinology*. 2014;99:7-17.
65. Navarro VM, Bosch MA, León S, et al. The integrated hypothalamic tachykinin-kisspeptin system as a central coordinator for reproduction. *Endocrinology*. 2015;156:627-637.
66. Newton CL, Anderson RC, Millar RP. Therapeutic neuroendocrine agonist and antagonist analogs of hypothalamic neuropeptides as modulators of the hypothalamic-pituitary-gonadal axis. *Endocr Dev*. 2016;30:106-129.
67. Moore AM, Campbell RE. Polycystic ovary syndrome: understanding the role of the brain. *Front Neuroendocrinol*. 2017;46:1-14.
68. Lippincott MF, Chan YM, Delaney A, Rivera-Morales D, Butler JP, Seminara SB. Kisspeptin responsiveness signals emergence of reproductive endocrine activity: implications for human puberty. *J Clin Endocrinol Metab*. 2016;101:3061-3069.
69. Skrapits K, Borsay BA, Herczeg L, Ciofi P, Liposits Z, Hrabovszky E. Neuropeptide co-expression in hypothalamic kisspeptin neurons of laboratory animals and the human. *Front Neurosci*. 2015;9:29.
70. Comninou AN, Anastasovska J, Sahuri-Arisoylu M, et al. Kisspeptin signaling in the amygdala modulates reproductive hormone secretion. *Brain Struct Funct*. 2016;221:2035-2047.
71. Krull AA, Larsen SA, Clifton DK, Neal-Perry G, Steiner RA. A comprehensive method to quantify adaptations by male and female mice with hot flashes induced by the neurokinin B receptor agonist, senktide. *Endocrinology*. 2017;158:3259-3268.
72. Hoveyda HR, Fraser GL, Roy MO, et al. Discovery and optimization of novel antagonists to the human neurokinin-3 receptor for the treatment of sex-hormone disorders (Part I). *J Med Chem*. 2015;58:3060-3082.
73. Prague JK, Roberts RE, Comninou AN, et al. Neurokinin 3 receptor antagonism as a novel treatment for menopausal hot flashes: a phase 2, randomised, double-blind, placebo-controlled trial. *Lancet*. 2017;389:1809-1820.
74. d'Anglemont de Tassigny X, Jayasena C, Murphy KG, Dhillon WS, Colledge WH. Mechanistic insights into the more potent effect of KP-54 compared to KP-10 in vivo. *PLoS One*. 2017;12:e0176821.
75. Tena-Sempere M. Keeping puberty on time: novel signals and mechanisms involved. *Curr Top Dev Biol*. 2013;105:299-329.
76. Babwah AV. Uterine and placental KISS1 regulate pregnancy: what we know and the challenges that lie ahead. *Reproduction*. 2015;150:R121-R128.
77. Matsui H, Asami T. Effects and therapeutic potentials of kisspeptin analogs: regulation of the hypothalamic-pituitary-gonadal axis. *Neuroendocrinology*. 2014;99:49-60.
78. Chan YM, Lippincott MF, Butler JP, et al. Exogenous kisspeptin administration as a probe of GnRH neuronal function in patients with idiopathic hypogonadotropic hypogonadism. *J Clin Endocrinol Metab*. 2014;99:E2762-E2771.
79. Jayasena CN, Abbata A, Veldhuis JD, et al. Increasing LH pulsatility in women with hypothalamic amenorrhoea using intravenous infusion of Kisspeptin-54. *J Clin Endocrinol Metab*. 2014;99:E953-E961.
80. Sonigo C, Bouilly J, Carré N, et al. Hyperprolactinemia-induced ovarian acyclicity is reversed by kisspeptin administration. *J Clin Invest*. 2012;122:3791-3795.
81. Comninou AN, Wall MB, Demetriou L, et al. Kisspeptin modulates sexual and emotional brain processing in humans. *J Clin Invest*. 2017;127:709-719.
82. Hellier V, Brock O, Candlish M, et al. Female sexual behavior in mice is controlled by kisspeptin neurons. *Nat Commun*. 2018;26:400.
83. Cully M. Deal watch: neurokinin 3 receptor antagonist revival heats up with Astellas acquisition. *Nat Rev Drug Discov*. 2017;16:377.
84. Clarkson J, Han SY, Piet R, et al. Definition of the hypothalamic GnRH pulse generator in mice. *Proc Natl Acad USA*. 2017;114:E10216-E10223.
85. Kirilov M, Clarkson J, Liu X, et al. Dependence of fertility on kisspeptin-Gpr54 signaling at the GnRH neuron. *Nature Comm*. 2013;4:2492.
86. Tolson KP, Garcia C, Delgado I, Marooki N, Kauffman AS. Metabolism and energy expenditure, but not feeding or glucose tolerance, are impaired in young KISS1r KO female mice. *Endocrinology*. 2016;157:4192-4199.
87. Kauffman AS, Navarro VM, Kim J, Clifton DK, Steiner RA. Sex differences in the regulation of KISS1/NKB neurons in juvenile mice: implications for the timing of puberty. *Am J Physiol: Endocrinol and Metab*. 2009;297:E1212-E1221.
88. Kenealy BP, Kapoor A, Guerriero KA, et al. Neuroestradiol in the hypothalamus contributes to the regulation of gonadotropin releasing hormone release. *J Neurosci*. 2013;33:19051-19059.
89. Kenealy BP, Keen KL, Garcia JP, Kohlenberg LK, Terasawa E. Obligatory role of hypothalamic neuroestradiol during the estrogen-induced LH surge in female ovariectomized rhesus monkeys. *Proc Natl Acad Sci USA*. 2017;114:13804-13809.
90. Rance NE, Dacks PA, Mittelman-Smith MA, Romanovsky AA, Krajewski-Hall SJ. Modulation of body temperature and LH secretion by hypothalamic KNDy (kisspeptin, neurokinin B and dynorphin) neurons: a novel hypothesis on the mechanism of hot flashes. *Front Neuroendocrinol*. 2013;34:211-217.
91. Campbell JN, Macosko EZ, Fenselau H, et al. A molecular census of arcuate hypothalamus and median eminence cell types. *Nat Neurosci*. 2017;20:484-496.
92. Chen R, Wu X, Jiang L, Zhang Y. Single-cell RNA-seq reveals hypothalamic cell diversity. *Cell Rep*. 2017;18:3227-3241.
93. Nectow AR, Moya MV, Ekstrand MI, et al. Rapid molecular profiling of defined cell types using viral TRAP. *Cell Rep*. 2017;19:655-667.
94. So much more to know. *Science*. 2005;309:78-102.

SUPPORTING INFORMATION

Additional supporting information may be found online in the Supporting Information section at the end of the article.

How to cite this article: Lehman MN, Coolen LM, Steiner RA, et al. The 3rd World Conference on Kisspeptin, "Kisspeptin 2017: Brain and Beyond": Unresolved questions, challenges and future directions for the field. *J Neuroendocrinol*. 2018;30:e12600. <https://doi.org/10.1111/jne.12600>

APPENDIX 1

Kisspeptin 2017: a different kind of scientific meeting

Planning for this conference grew out of informal discussions among several reproductive neuroendocrinologists attending the annual meeting of the Endocrine Society in 2016. There was general agreement that the 2 previous Kisspeptin World Conferences (Cordoba, Spain in 2008 and Tokyo, Japan in 2012) had been extremely useful and that sufficient new information had been developed since 2012 to warrant a third meeting. It was thought that the only closely related meeting (International Congress of Neuroendocrinology that meets every 4 years) was too large and broadly focused to facilitate the informal, focused discussions planned for this meeting. Based on these discussions, Dr Allan Herbison emailed kisspeptin biologists from around the world to determine whether there was sufficient interest in another meeting. After email exchanges, the general consensus was to hold a 2-day meeting as a satellite conference with the 2017 meeting of the Endocrine Society (ENDO2017) in Orlando, Florida, to minimise travel costs and maximise participation. Organizing and Program Committees were quickly formed (for membership list, see the Supporting information, Figure S1), with Dr Michael Lehman serving as the meeting organiser and chair of the 2 committees.

There was also general agreement that the scope and topic of the meeting should build and expand on those of the previous conferences. The 1st World Conference occurred within 5 years of the first reports that the kisspeptin receptor, GPR54 (KISS1R), was essential for puberty and fertility in humans and focused on the role of kisspeptin signalling in puberty onset and control of gonadotrophin-releasing hormone (GnRH). The 2nd World Conference extended this focus to include the roles of neurokinin B (NKB) and dynorphin co-localised with kisspeptin in a subpopulation of kisspeptin neurones (KNDy neurones), the electrophysiology of these neurones, the control of kisspeptin release by internal (eg, oestradiol) and external (eg, nutrition and photoperiod) input, and potential clinical applications. As noted above, the 3rd World Conference expanded beyond these GnRH-centric topics to consider the functional roles of kisspeptin in other areas of the brain, as well as extending beyond the brain and the control of reproduction into other important physiological systems. The intent was to take the opportunity to ripen and harvest the fruits of this new research — morphing the field from a focus on one neuropeptide and reproduction to another that comprises a larger scope, to include the gonads, placenta, liver and beyond. In addition, the goal was to place this knowledge in the context of larger issues in physiology (eg, puberty, pregnancy, obesity, prenatal origins of disease) rather than to solely focus on the role of KISS1 by itself.

In addition, there was strong consensus for a meeting format that facilitated discussion centered around short, informal presentations of unpublished data and unresolved issues, rather than the more traditional plenary sessions with formal talks that largely present data that has been already published. Specifically, it was recognised that most scientific meetings invite presenters based on their general area of inquiry; these presenters then share with the audience their

particular question(s) and how they answered them. For this meeting, we flipped this approach — we asked a large, international group of prospective attendees to name the big questions (see below), and then invited presenters in these selected areas to share their ideas, either with their own data or provocative thinking. In addition, we reversed the usual placement of poster sessions at the end of the day and, instead, started each day with a poster session/breakfast grouped around specific topics related to the scientific questions to be featured later at lunch discussions and general sessions. Our goal was to use poster sessions to encourage people to share with others their most up-to-date research activity — then use the afternoon sessions to delve further into these areas, tackle unresolved matters and debate controversies.

To identify major themes and topics for group discussion, we sent an email to a large group of investigators in the field, including most attendees of the previous World Conferences, asking the following questions:

- What are the most important contemporary questions in the realm of kisspeptin biology?
- What are the biggest impediments (technically or otherwise) to answering these questions?
- What are the biggest controversies/debates/disagreements related to kisspeptin biology?

Based on the responses received, the Organizing and Program Committees identified major areas of interest for lunch table and large group discussions and began to shape the overall structure of the scientific program (see Supporting information, Figure S2).

On the first day of the meeting, there was a short welcome session that included a general orientation to the meeting format and process. Then, as mentioned, the morning of each day was taken up by posters followed by lunch table discussions on a variety of topics selected from responses to the pre-meeting questionnaire and not used for the large group, facilitated sessions. At each table, a member of the Organizing and Program Committees served as discussion leader. Attendees submitted their preferences for table topics before the meeting and were assigned tables (8–10 per table) for each day. We purposely assigned at least one senior investigator and several trainees to each table to ensure a mix of backgrounds and career stages, and thereby used this format as an additional opportunity for informal networking for trainees attending the meeting (also see Career Development activities below).

Afternoon sessions consisted of large group facilitated discussions for all attendees that were focused on the major unresolved questions, issues and controversies identified in the pre-meeting questionnaire (see Supporting information, Figure S2). Sessions ran in series, rather than in parallel, so that the entire group could attend each topic. Sessions were 45 minutes long and consisted of short presentations from a facilitator (5 minutes), 3–5 invited lead speakers (3 min each) and any additional attendees who wished to share unpublished data (1 min each). The facilitator provided a general background/setting for each session, identifying the major questions and

issues to be discussed. The facilitator also served as moderator, helping to move presentations and discussions along, and ensure that multiple points of view were expressed freely and openly. A large group session at the end of the meeting reviewed the highlights, consensus items, and discussed open questions, opportunities and next steps. Social events were held on each evening, aiming to further encourage informal networking and interactions among the meeting attendees.

In addition to the poster sessions, lunch table discussions and facilitated large group sessions, a number of activities were organised during the meeting to encourage and support the professional career development of early-stage investigators and trainees. With the support of a scientific conference grant from the National Institutes of Health, USA (NIH R13HD092038 to MNL), travel awards were given on a competitive basis for early-stage investigators and trainees. Awards to help defray the cost of child care during the meeting were also made available, with all attendees being eligible. Before

the meeting, each trainee attending the meeting (including but not limited to travel award recipients) was appointed a mentor with career track experience that matched the individual trainee's career goals, with the aim of providing trainees with networking opportunities. A breakfast event for mentor-mentee meetings was held on the first morning of the conference. On the second day of the conference, a career workshop was held featuring multiple speakers from academia and pharmaceutical companies attending the conference, who addressed research-related job opportunities in multiple career settings. These activities were held before the poster sessions so that there was no conflict with the remainder of the scientific program. Activities were mandatory for travel awardees, although all other trainees attending the meeting were welcomed and encouraged to participate. Participation in these events was very high, reflecting the high value with which they were viewed by trainees and early-stage investigators.