1 Protein tyrosine phosphatase receptor kappa regulates glycolysis and *de novo* lipogenesis

2 to promote hepatocyte metabolic reprogramming in obesity

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48 Abstract

49 Fat accumulation, *de novo* lipogenesis, and glycolysis are key drivers of hepatocyte 50 reprogramming and the consequent metabolic dysfunction-associated steatotic liver disease 51 (MASLD). Here we report that obesity leads to dysregulated expression of hepatic protein-52 tyrosine phosphatases (PTPs). PTPRK was found to be increased in steatotic hepatocytes in 53 both humans and mice, and positively correlated with PPAR γ -induced lipogenic signalling. 54 High-fat-fed PTPRK knockout mice displayed reduced weight gain and hepatic fat 55 accumulation. Phosphoproteomic analysis in primary hepatocytes and hepatic metabolomics 56 identified fructose-1,6-bisphosphatase 1 and glycolysis as PTPRK targets in metabolic 57 reprogramming. Silencing PTPRK in hepatoma cell lines resulted in reduced colony-forming 58 ability and PTPRK knockout mice developed smaller tumours after diethylnitrosamine-59 induced hepatocarcinogenesis. Our study defines a novel role for PTPRK in regulating hepatic 60 glycolysis, lipid metabolism, and tumour development. PTPRK inhibition may provide 61 therapeutic possibilities in obesity-associated liver diseases.

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74 Highlights

- 75 Hepatic receptor-type PTPs are increased in MASLD
- 76 PTPRK is expressed in hepatocytes and upregulated in obesity
- 77 PTPRK deficiency reduces body fat mass and liver steatosis in diet-induced obesity
- 78 PTPRK regulates hepatic glycolysis and lipogenesis, promoting tumorigenesis

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99 Introduction

Consumption of processed industrialized foods with high caloric density and reduced 101 energy expenditure results in nutrient overload. In response, cells adapt by storing energy in 102 the form of triglycerides, generating adipose tissue expansion and ectopic fat deposition in 103 organs such as the liver. The presence of a lipid-rich environment has deleterious pathological 104 consequences, including insulin resistance and dyslipidaemia. If not resolved, it can 105 evolve into non-alcoholic fatty liver disease (NAFLD), recently renamed metabolic 106 dysfunction-associated steatotic liver disease (MASLD), affecting a quarter of the global adult 107 population^{1,2}. Non-alcoholic steatohepatitis (NASH), a severe necro-inflammatory form of 108 NAFLD/MASLD, poses a significant health problem^{3,4}. Moreover, NAFLD/MASLD has 109 emerged as a leading cause of hepatocellular carcinoma (HCC), a highly heterogeneous and 110 aggressive malignancy⁵.

111 The liver is central to nutrient sensing and has a significant impact during obesity, 112 resulting in abnormal lipid accumulation and hepatocyte metabolic reprogramming. This 113 involves the intricate reorganization of anabolic and catabolic processes, all under the 114 transcriptional control of nutrient-sensitive receptors. In the context of obesity and HCC, 115 several transcription factors, including PPARs, SREBP1c, ChREBP, and HIF, participate 116 in the reshaping of metabolic pathways^{3,4}. In addition, post-translational modifications, 117 including phosphorylation of protein tyrosine residues, are dysregulated in nutrient overload 118 and obesity⁶.

Hepatic expression of Protein Tyrosine Phosphatases (PTPs) is affected in steatotic 120 livers and NASH. PTPs were conventionally perceived as enzymes responsible for 121 terminating or modulating signals initiated by tyrosine kinases⁷. Accumulating evidence 122 reveals their potential as signal propagators^{6,8}. For example, PTPN2 facilitates signalling 123 through both STAT1 and STAT3, exerting distinct influences on NASH and HCC⁹. Oxidative 124 inactivation of PTPN2 induces an insulin-STAT5-IGF-1-growth hormone pathway in 125 conditions of selective insulin resistance, contributing to obesity¹⁰. Receptor-type PTPs 126 (RPTPs) are transmembrane enzymes adapted to sense and transduce extracellular cues into 127 intracellular catalytic events¹¹. In obesity, inflammatory signals induce the expression of 128 PTPRG in the liver¹². Deleting or overexpressing PTPRG enhances or suppresses hepatic 129 insulin sensitivity, respectively¹². However, a lack of comprehensive studies to understand 130 liver PTPomes in obesity means that the role of PTPs in regulatory mechanisms and their 131 potential use as biomarkers or therapeutic targets remain largely unexplored.

132 PTPRK is a transmembrane receptor belonging to the R2B subfamily of RPTPs, 133 known to engage in homophilic interactions and localises to cell-cell contacts¹¹. Cell adhesion 134 proteins have been proposed as PTPRK substrates, and accumulating data associate PTPRK 135 with several human diseases¹³⁻¹⁵. The regulation of PTPRK involves a proteolytic cascade 136 (furin, ADAM10, and γ -secretase), potentially releasing the intracellular catalytic domain to 137 interact and dephosphorylate proteins in the cytoplasm or nucleus¹⁶. PTPRK is 138 transcriptionally regulated by transforming growth factor- β (TGF- β) and Notch signalling¹⁷. 139 Despite its potential in cell signalling, the downstream events regulated by PTPRK remain 140 unknown. In this study, we demonstrated that PTPRK is upregulated in fatty hepatocytes and 141 investigated its role in obesity-associated liver dysfunction. PTPRK deficiency leads to severe 142 metabolic changes in hepatocytes, culminating in reduced diet-induced obesity and hepatic fat 143 accumulation in mice. We identified fructose-1,6-bisphosphatase 1 (FBP1), a gluconeogenic 144 enzyme, as PTPRK target, bearing significant implications for glucose metabolism and liver 145 tumour growth. These findings underscore the pivotal role of PTPRK as key driver in the 146 metabolic reprogramming of hepatocytes induced by obesity.

147 Results

148 Hepatic PTP expression is dysregulated in obesity-associated liver dysfunction

149 The presence and potential contribution of PTP expression in the progression to 150 NAFLD/MASLD in obesity and the development of HCC remains unknown. Therefore, we 151 conducted a comprehensive analysis of the complete proteome and PTP expression patterns, 152 using liquid chromatography-tandem mass spectrometry (LC-MS/MS) analysis of human 153 liver samples (Fig. 1A). The cohort included liver biopsies obtained from individuals 154 exhibiting varying degrees of liver disease, encompassing simple steatosis (Metabolic 155 Associated Fatty Liver (MAFL)), NASH, HCC, and control samples from individuals without 156 evidence of liver damage (healthy liver). The heatmap illustrating the total proteome 157 alterations showed variations in protein expression and sample heterogeneity across different 158 stages of liver dysfunction (Supplementary Fig. 1A). KEGG pathway analyses revealed that 159 several protein modifications are related to metabolic dynamics. When comparing steatosis 160 with healthy livers, we observed activation of oxidative phosphorylation, starch, and sucrose 161 metabolism. We also observed activation of glutathione metabolism, alongside the 162 suppression of the tight junction pathway (Supplementary Fig. 1B). Activated pathways in 163 NASH included ECM receptor interaction, oxidative phosphorylation, and focal adhesion 164 (Supplementary Fig. 1C). Conversely, pathways related to the pentose phosphate pathway 165 (PPP), purine metabolism, histidine metabolism, and cysteine and methionine metabolism 166 were suppressed. Further, comparing NASH to steatosis, oxidative phosphorylation was 167 suppressed in NASH, while ECM receptor interaction, focal adhesion, and ribosome pathways 168 were activated (Supplementary Fig. 1D). Proteome analysis revealed key enzymes involved 169 in fatty acid uptake and metabolism, CD36, CPT1, and SCD, upregulated in steatosis and 170 NASH samples (Fig. 1B). Among the samples, 18 out of the 37 human PTP proteins were 171 identified (Fig. 1C). Analysis of the PTPome revealed that samples within the same disease 172 stage displayed similar PTP expression patterns (Fig. 1D), while analysis of RPTPs and non173 receptor protein tyrosine phosphatases (PTPNs) revealed opposing patterns across the stages 174 of the disease (Fig. 1E). Several PTPNs were downregulated with disease, while RPTPs 175 generally exhibited low expression levels in healthy liver samples but showed a marked 176 upregulation in steatosis and NASH. Specifically, PTPRK, PTPRE, PTPRM, PTPRF, and 177 PTPRA were elevated in steatosis and NASH (Fig. 1F). Single-cell RNA sequencing of 178 healthy-obese livers¹⁸ revealed that PTPRK is the most abundant RPTP in hepatocytes, 179 followed by PTPRG and PTPRM, with PTPRE mainly found in dendritic cells (Fig. 1G, 180 Supplementary Fig. 1E). Additionally, RPTP displayed comparable mRNA patterns in the 181 E-MEXP-3291 dataset (Fig. 1H). Correlation analysis showed that hepatic PTPRK, PTPRG, 182 and PTPRE transcript levels positively correlate with PPAR_γ (Fig. 1I), a master regulator of 183 lipid accumulation in hepatocytes. Immunohistochemistry (IHC) analyses in human liver 184 samples showed that PTPRK levels were higher in steatosis and NASH, whereas healthy liver 185 displayed relatively lower expression. The PTPRK intracellular domain localised within 186 various cellular regions, including the nucleus of steatotic hepatocytes (Fig. 1J). The striking 187 remodelling of PTPomes with disease onset indicates a potential causative role in fat 188 accumulation and liver dysfunction.

189 Hepatocyte PTPRK is induced in obesity and positively correlates with PPARy in mouse 190 models and primary hepatocytes

To gain functional insights into the hepatic role of PTPRK we took advantage of 192 obesogenic mouse models. C57BL/6N mice were exposed to diet-induced obesity over a 12-193 week period. Both high-fat diet (HFD) and high-fat, high-fructose high-cholesterol diet 194 (HFHFHCD) resulted in a noticeable increase in body weight (**Fig. 2A**), primarily attributed 195 to increased body fat mass (**Fig. 2B**). This was accompanied by elevated fasting insulin levels 196 (**Fig. 2C**), glucose intolerance (**Fig. 2D**), and reduced insulin sensitivity (**Fig. 2E**). PTPRK is 197 expressed in hepatocytes, but undetectable in subcutaneous and visceral adipose tissues or 198 muscle (**Fig. 2F**). Mice fed with HFHFHCD exhibited a greater liver weight, liver-to-body 199 weight ratio, and liver fat mass compared to the control group (**Fig. 2G,H**), consistent with a 200 more advanced stage of fatty liver development. PTPRK protein expression is enhanced in 201 HFD and HFHFHCD-fed mice livers, accompanied by PPAR γ upregulation (**Fig. 2I**). In line 202 with these results, adenovirus-mediated overexpression of PTPRK in mouse livers resulted in 203 a concomitant increase in PPAR γ levels (**Fig. 2J**). These results demonstrate a consistent 204 involvement of PTPRK in lipid metabolism and diet-induced liver dysfunction.

205 Extended culture of primary mouse hepatocytes resulted in a loss of differentiation, 206 causing changes in metabolic pathways similar to those observed in vivo during the 207 progression of NAFLD/MASLD. We observed a gradual accumulation of lipid droplets in the 208 cytosol of hepatocytes (Fig. 2K). This was accompanied with increased protein levels of 209 PTPRK and PPARy (Fig. 2L). Acute and chronic treatment of primary hepatocytes with 210 insulin or pro-inflammatory cytokines TNFα, IL6 or IFNγ did not affect PTPRK expression 211 (Supplementary Fig. 2A-D). NOTCH2 is significantly increased in primary hepatocytes over 212 time in culture (Supplementary Fig. 2E), and the administration of the Notch signalling 213 inhibitor GSIXX effectively prevented upregulation of both PTPRK and PPARy in a dose-214 dependent manner (Fig. 2M). Treatment with lipopolysaccharide (LPS) significantly 215 increased both PTPRK and PPARy transcripts and protein levels (Fig. 2N,O). Additionally, 216 primary mouse hepatocytes treated with dimethyloxalylglycine (DMOG), an inhibitor of 2-217 oxoglutarate-dependent dioxygenases, resulted in reduced PTPRK and PPARy expression 218 levels (Fig. 2P). Together, these experiments provided compelling evidence of a positive 219 correlation between PTPRK and PPARy in hepatocytes, which can be regulated by diverse 220 signalling pathways.

221 **PTPRK** deletion protects against diet-induced obesity, insulin resistance, and hepatic 222 steatosis in mice To directly evaluate the metabolic relevance of PTPRK, we conducted loss-of-224 function studies using 8-week-old *Ptprk*^{-/-} and *Ptprk*^{+/+} mice subjected to either an HFHFHCD 225 or a chow diet. PTPRK deficiency had minimal impact on body weight gain and fat 226 accumulation in chow-fed mice (**Supplementary Fig. 3A-D**). Glucose and insulin tolerance 227 tests performed at 8 weeks of age showed no differences between *Ptprk*^{-/-} and *Ptprk*^{+/+} mice 228 (**Supplementary Fig. 3E-H**). At 20 weeks, *Ptprk*^{-/-} mice showed improved glucose 229 homeostasis (**Supplementary Fig. 3I-L**). The intake of chow diet was not affected 230 (**Supplementary Fig. 3M,N**). After 12 weeks of HFHFHCD feeding, *Ptprk*^{+/+} mice developed 231 obesity, characterised by substantial increases in body weight, fat mass, circulating insulin 232 levels, homeostasis model assessment of insulin resistance (HOMA-IR), glucose intolerance 233 and insulin resistance (**Fig. 3A-H, Supplementary Fig. 4A,B**). Strikingly, *Ptprk*^{-/-} mice 234 displayed resistance to HFHFHCD-induced obesity, as their body weight, fat mass, circulating 235 insulin levels, HOMA-IR, glucose sensitivity and insulin resistance were all significantly 236 lower (**Fig. 3A-H**). This protective effect was particularly prominent in female mice.

237 Consistent with the metabolic analyses, PTPRK-deficient mice exhibited elevated 238 energy expenditure, specifically during the dark cycle (**Supplementary Fig. 4C**). *Ptprk*^{-/-} mice 239 also displayed increased VO₂ levels during the night, and the respiratory exchange ratio (RER) 240 showed a downward trend (**Supplementary Fig. 4C**). No significant disparities were noted 241 in ambulatory activity or food and water intake (**Supplementary Fig. 4C,D**). The analysis of 242 food intake over a span of 12 weeks revealed no disparities in males, but lower levels in female 243 *Ptprk*^{-/-} mice, resulting in lower cumulative energy intake (**Supplementary Fig. 4E,F**). 244 PTPRK deficiency did not result in altered lipid excretion through faeces (**Supplementary** 245 **Fig. 4G**), suggesting that the reduced weight observed in *Ptprk*^{-/-} mice is not related to changes 246 in intestinal fat absorption. *Ptprk*^{-/-} livers exhibited significantly higher induction of p-IR and 247 p-AKT compared to *Ptprk*^{+/+} mice in response to insulin (**Fig. 31**). The phosphorylation levels 248 induced by insulin on IR and AKT displayed no discernible differences in primary hepatocytes 249 (**Supplementary Fig. 5A**), indicating that PTPRK does not directly affect IR phosphorylation. 250 We observed a significant reduction in hepatic lipid accumulation within the livers of *Ptprk*^{-/-} 251 mice (**Fig. 3J-O**). Collectively, these findings demonstrate that while PTPRK-deficiency 252 exerts minimal influence on normal development, it confers robust protection against diet-253 induced obesity, steatosis, and insulin resistance.

254 PTPRK expression shapes nutrient-driven metabolic reprogramming in hepatocytes

Having established that PTPRK plays a major metabolic role in obesity, we next to define the lipogenic pathways affected in HFHFHCD-fed mice. Immunoblot analysis showed that *Ptprk*-/- mice exhibited lower levels of hepatic PPARγ (**Fig. 4A, B**), while the plane of the plane showed that *Ptprk*-/- mice exhibited lower levels of hepatic PPARγ (**Fig. 4A, B**), while the plane of the

Next, we used adenoviral-mediated upregulation of PTPRK in four week high-fat fed mice and observed a significant increase in hepatic PPARγ expression following adenoviral efficient (**Fig. 4F**). Adenoviral PTPRK overexpression reverted the hepatic phenotype of obese *Ptprk^{-/-}*mice, including increased liver weight, liver-to-body weight ratio, and liver fat fat effig. **4G**). Histological examination of liver sections and lipid measurements revealed pronounced lipid deposition following PTPRK overexpression (**Fig. 4H**). These results ersults that hepatic PTPRK overexpression effectively reverses key phenotypic 272 characteristics observed in PTPRK-deficient mice. Primary hepatocytes with reduced PTPRK 273 levels (heterozygous) or complete deletion (knockouts) showed reduced kinetics of STAT1 274 phosphorylation in response to IFNγ (**Supplementary Fig. 5D,E**). STAT1 and Activator 275 Protein 1 (AP-1) play a pivotal role in driving PPARγ expression and lipid accumulation 276 within the liver^{19,20}. Notably, we observed significantly lower levels of c-Fos/AP-1 in *Ptprk*^{-/-} 277 livers (**Supplementary Fig. 5F**). Taken together, our results suggest that PTPRK acts 278 upstream of transcriptional regulators of *de novo* lipogenesis and lipid metabolism in obesity.

279 Phosphoproteomic analysis revealed FBP1 as a PTPRK substrate in hepatocytes during 280 steatosis

281 To explore the mechanisms by which PTPRK inactivation in hepatocytes might drive 282 the development of steatosis, we performed unbiased transcriptome and proteomic analysis. 283 Hepatocytes were isolated and separated based on their fat content (Fig. 5A). Immunoblot 284 analysis of high-fat content hepatocytes further established the positive correlation between 285 PTPRK and PPARy (Fig. 5B). Steatotic PTPRK-deficient hepatocytes have reduced Cd36 286 expression, a crucial PPARγ target in cellular fatty acid uptake (Fig. 5C). In contrast, Cpt1, 287 facilitating long-chain fatty acid transport for mitochondrial β-oxidation, displayed an 288 opposing pattern, with higher expression in *Ptprk*^{-/-} hepatocytes (Fig. 5C). We performed 289 RNA-Seq analysis in low/high fat $Ptprk^{-/-}$ and $Ptprk^{+/+}$ hepatocytes (Supplementary Fig. 290 6A). Volcano plot analysis revealed that the predominant significant differences occurred 291 among genes upregulated in low-fat hepatocytes compared to high-fat hepatocytes within the 292 same genotype (Supplementary Fig. 6B,C). In contrast, only a limited number of genes 293 exhibited significant transcriptional alterations resulting from PTPRK deletion in low-fat or 294 high-fat hepatocytes (Supplementary Fig. 6D,E). We also observed reduced PPAR 295 signalling in Ptprk^{-/-} hepatocytes (Fig. 5D). Comparison of low-fat to high-fat Ptprk^{+/+} 296 hepatocytes revealed enriched pathways, including cell adhesion molecules, MAPK

297 signalling, PI3K-AKT signalling, cytokine interaction, and chemokine signalling (Fig. 5E).
298 In *Ptprk^{-/-}* hepatocytes, the same comparison highlighted pathways including gap junction,
299 ECM receptor interaction, focal adhesion, cAMP signalling, PI3K-AKT signalling, and RAP1
300 signalling.

301 We next performed proteomics and phosphoproteomic analysis of hepatocytes with 302 high-fat content (Supplementary Fig. 6F). The Venn diagram illustrates that 1148 proteins 303 show modifications in both the phosphoproteomic and total proteome datasets. This suggests 304 an intricate relationship between these protein datasets, indicating regulatory mechanisms 305 acting at the translational level and post-translationally through phosphorylation 306 (Supplementary Fig. 6F). The heatmap displays diverse protein changes between *Ptprk*^{-/-} and 307 $Ptprk^{+/+}$ hepatocytes (Fig. 5F), revealing their dynamic response. In $Ptprk^{-/-}$ hepatocytes, an 308 upregulation of specific proteins has been observed, reflecting a complex interplay of 309 molecular events associated with altered mitochondrial function and redox balance, closely 310 linked to cellular metabolic reprogramming (Fig. 5G). Enriched pathways include 311 metabolism, phagosome, and biosynthesis of unsaturated fatty acids (Fig. 5H). PTPRK-312 deficiency increases phosphorylated residues across various proteins (Fig. 5I). These changes 313 are associated with crucial pathways, including insulin signalling, mTOR pathway, AMPK 314 signalling, insulin resistance, glucagon signalling, adherens junctions, and biosynthesis of 315 amino acids (Fig. 5J).

A total of 2572 phosphosites were significantly upregulated in *Ptprk*^{-/-} hepatocytes 317 compared with 258 found at lower levels (**Supplementary Fig. 6G**). Phosphotyrosine 318 residues of CPSM (pY162), CH10 (pY76), WASL (pY253), GSTP1 (pY8), and FBP1 319 (pY265, pY216) were increased in *Ptprk*^{-/-} hepatocyte (**Fig. 5K**). The focussed analysis of 320 FBP1, a hepatic tumour suppressor²¹, revealed changes also at the positions pS273, pS248, 321 pY265, pY245 and pY216 in *Ptprk*^{-/-} steatotic hepatocytes (**Fig. 5L**). FBP1 is a key enzyme 322 active in gluconeogenesis and glucose homeostasis. Structural modelling highlights conserved 323 helical regions (**Fig. 5M**) that engage with the PTPRK D2 domain (**Fig. 5N**), placing 324 phosphorylated tyrosine residues near the PTPRK catalytic D1 domain. Computational 325 simulations confirmed PTPRK and tyrosine phosphorylated complex predictions with a range 326 of different assemblies (**Supplementary Fig. 7A-F**). Pervanadate-treated hepatocyte lysates, 327 combined with recombinant PTPRK intracellular domain (PTPRK-ICD), demonstrated FBP1 328 dephosphorylation (**Fig. 5O**). Liver analyses in female *Ptprk*^{-/-} mice following a 12-week 329 HFHFHCD showed higher pFBP1 (pY265) levels (**Supplementary Fig. 8A**). We analysed 330 glycolysis dynamics using HYlight, a biosensor designed to track real-time changes in 331 intracellular levels of the FBP1 substrate, fructose 1,6-bisphosphate²². We observed a 332 reduction in fructose 1,6-bisphosphate levels in *Ptprk*^{-/-} hepatocytes when stimulated with 333 glucose (**Fig. 5P**). Our results demonstrate the dynamic interplay between PTPRK and FBP1, 334 significantly impacting glucose metabolism.

335 Deletion of PTPRK induces metabolic reprogramming in the liver during diet-induced 336 obesity

To assess the importance of hepatic PTPRK in glycolytic control, we cultured primary mouse hepatocytes after adenovirus-mediated PTPRK overexpression or silencing (**Fig. 6A**). Glucose-starved hepatocytes overexpressing PTPRK displayed increased glycolytic activity. How the extracellular acidification rates measured after acute glucose injection and after oligomycin blockade of mitochondrial respiration (**Fig. 6B**). Elevated glycolysis channels pyruvate towards acetyl-CoA synthesis, triggering *de novo* lipogenesis. Hepatocytes with PTPRK overexpression exhibited increased lipid droplet accumulation (**Fig. 6C**). In addition, lipid droplet accumulation occurred to a greater extent in PTPRK overexpressing hepatocytes after fatty acid administration (**Fig. 6C**). Inhibition of glucose oxidation resulted addition decreased PPARy expression, while PTPRK was not affected (**Supplementary Fig. 8B**). We next sought to validate our results in human hepatocytes. *PTPRK*-/- and *PTPRK*+/+ 348 human embryonic stem cells (hESC) were differentiated into hepatocyte-like cells (HLCs, 349 **Supplementary Fig. 8C-E**). Deletion of PTPRK did not affect hESC hepatocyte 350 differentiation nor the ability of HLCs to produce and secrete albumin (**Supplementary Fig.** 351 **8C-E**). Similar to mouse hepatocytes, PTPRK-deficient HLCs exhibited a reduced glycolytic 352 rate following glucose stimulation (**Supplementary Fig. 8F**). Together, these observations 353 indicate that PTPRK leads to steatosis indirectly by stimulating glycolytic activity and directly 354 by accelerating fatty acid esterification and lipid droplet formation in response to fatty acids.

Liver metabolites from $Ptprk^{-/-}$ and $Ptprk^{+/+}$ mice fed HFHFHCD for 12 weeks were 355 356 quantified by mass spectrometry (Fig. 6D). Ptprk^{-/-} livers showed decreased levels of 357 dihydroxyacetone phosphate and glyceraldehyde-3-phosphate, with a corresponding 358 reduction in the lactate/pyruvate ratio. *Ptprk*^{-/-} livers displayed elevated α -ketoglutarate levels 359 and increased pyruvate. Despite elevated pyruvate levels, Ptprk^{-/-} livers exhibited reduced 360 concentrations of acetyl-CoA, and increased free coenzyme A compared to $Ptprk^{+/+}$. This 361 aligns with our findings of decreased levels of pyruvate dehydrogenase phosphatase in Ptprk-362 /- mice, while no differences were observed for pyruvate dehydrogenase kinase 363 (Supplementary Fig. 8G). PTPRK deficiency also led to heightened pentose phosphate 364 pathway (PPP) intermediates, particularly ribulose-5-phosphate and erythrose 4-phosphate 365 (Fig. 6D). Enhancing the flux through the PPP could reinforce essential production of 366 reducing equivalents, and increase oxidative stress management. Parallel to shifts in lactate-367 to-pyruvate ratio, *Ptprk^{-/-}* livers unveiled elevated GSSG (Fig. 6D) and methionine sulfoxide 368 levels (Supplementary Fig. 8H), indicative of an oxidised environment. The ratio of the 369 classical redox indicators NAD+/NADH, NADP+/NADPH, and GSSG/GSH showed no 370 significant changes (Supplementary Fig. 8I), although the total levels of NADP⁺ were 371 significantly lower in *Ptprk*^{-/-}(Fig. 6D). No differences were found in phosphorylated adenine

372 nucleotides (ATP, ADP and AMP, **Supplementary Fig. 8J**) and amino acids 373 (**Supplementary Fig. 8K**). We observed heightened expression of Pck1, a pivotal 374 gluconeogenic driver, in *Ptprk*^{-/-} livers (**Fig. 6E**), consistent with lower glycolysis. *Ptprk*^{-/-} 375 female mice, subjected to a 12-week HFHFHCD obesogenic diet, exhibited elevated blood 376 glucose levels compared to *Ptprk*^{+/+} after pyruvate injection, supporting a shift to a more 377 gluconeogenic state upon PTPRK deletion (**Fig. 6F**). Taken together, PTPRK plays a crucial 378 role in controlling liver metabolism through the regulation of glycolytic intermediates and 379 altered lipid dynamics.

380 PTPRK contributes to hepatocyte transformation in obesity-associated HCC

Glycolytic and gluconeogenic proteins, including FBP1 (**Supplementary Fig. 9A**), 382 contribute to HCC development²¹. We observed a stratification pattern based on PTPRK 383 mRNA expression levels in human samples (**Fig. 7A**) that bifurcated into two distinct clusters: 384 one characterised by high PTPRK expression and the other marked by low PTPRK expression 385 (**Fig. 7B**). Normal liver samples uniformly exhibited low PTPRK expression was correlated 386 context of NASH, peritumour, and tumour conditions, high PTPRK expression was correlated 387 with elevated hepatic expression of glycolytic genes. The analysis of all liver samples and the 388 focused analysis of tumour samples revealed a positive correlation between elevated PTPRK 389 expression and hepatic expression of lipogenic genes (**Fig. 7B**). The enriched pathways 390 associated with elevated PTPRK expression in liver tumour samples, as defined through 391 KEGG pathway enrichment analysis, underscored the activation of fatty acid metabolism, 392 type 1 diabetes mellitus, glycolysis/gluconeogenesis, TCA cycle, primary bile acid 393 biosynthesis, biosynthesis of unsaturated fatty acids, PPAR signalling pathway, steroid 394 biosynthesis, and oxidative phosphorylation (**Fig. 7C**). 395 To investigate the implications of PTPRK deletion in the context of liver cancer, 396 diethylnitrosamine (DEN), a potent hepatocarcinogen, was administered by a single injection 397 into $Ptprk^{-/-}$ and $Ptprk^{+/+}$ mice at the age of two weeks. $Ptprk^{-/-}$ male mice showed reduced 398 body fat accumulation, while Ptprk-/- females exhibited diminished body weight and fat 399 accumulation at the end of the experimental timeline compared with $Ptprk^{+/+}$ (Fig. 7D,G). 400 Livers from *Ptprk*^{-/-} male and female mice were smaller, with reduced absolute hepatic lipid 401 content, although the relative liver fat content was unaltered (Fig. 7D,G). PTPRK deficiency 402 did not affect DEN-mediated tumour formation (Fig. 7E,H). However, macroscopic 403 evaluation showed reduced tumour size in $Ptprk^{-/-}$ females (Fig. 7H). This was confirmed by 404 histological analysis of liver sections, where *Ptprk*^{-/-} tumours exhibited significantly 405 diminished dimensions and reduced fat accumulation regardless of gender (Fig. 7E.F and 406 7H,I). In line with these findings, silencing of PTPRK using siRNA in HepG2, HLE, and 407 Huh6 cell lines (Fig. 7J,K and Supplementary Fig. 9B) led to a substantial attenuation of 408 colony-forming capacity. Overall, our experiments support an oncogenic role of PTPRK in 409 promoting rapid hepatic tumour growth.

410 Discussion

411 Modern diets and lifestyles pose a chronic challenge to the ancestral mechanisms 412 designed to control energy balance in humans. In the present study, we observed increased 413 expression of hepatic RPTPs in steatosis and NASH, suggesting an adaptive response. The 414 upregulation of PTPRK may serve as a part of a compensatory mechanism to mitigate the 415 impact of disrupted cell adhesion components and mechanotransduction in fat-loaded 416 hepatocytes. PTPRK seems to play a pivotal role in disease progression, influencing 417 glycolysis, *de novo* lipogenesis signalling, and associated metabolic pathways. We demonstrated that the upregulation of hepatocyte PTPRK-PPAR γ correlates with 419 NOTCH2 activation and that the inhibition of Notch signalling suppresses PTPRK-PPAR γ 420 expression in hepatocytes^{17,23}. In addition, LPS boosts PTPRK-PPAR γ , while HIF2 α represses 421 it. These results suggest that inflammation and hypoxia influence PTPRK expression, 422 potentially contributing to the differences observed in human liver samples. The correlation 423 between elevated PTPRK expression and the activation of glycolytic and lipogenic genes is 424 consistent with the role played by PTPRK in regulating these metabolic pathways.

425 Obesogenic diets lead to hepatic PTPRK overexpression, and global PTPRK knockout 426 mice are resistant to diet-induced metabolic dysfunction. The absence of PTPRK resulted in 427 delayed onset of obesity and NAFLD/MASLD with suppression of nutrient-sensitive factors PPARy, SREBP1c, and ChREBP, relevant for metabolic 428 transcription 429 reprogramming^{24,25}. We found that PTPRK deletion leads to c-Fos downregulation and lower 430 STAT1 activation in response to IFNy. Both c-Fos and STAT1 are known to promote PPARy 431 expression^{19,20}. Interestingly, we demonstrated that inhibition of glucose oxidation suppresses 432 PPARy expression in hepatocytes without altering PTPRK expression. Thus, PTPRK-induced 433 glycolysis can contribute to increased PPARy expression. Glucose oxidation provides the 434 energy, metabolites, and reducing agents necessary for the execution of *de novo* lipogenesis 435 and sustains a shift in fatty acid metabolism from a catabolic to an anabolic direction²⁶. 436 PTPRK deficiency results in lower expression of the PPARy target gene CD36, a long-chain 437 free fatty acid transporter that promotes the growth of HCC cells by increasing glycolysis²⁷. 438 In overnutrition, PTPRK mediates the shift towards glycolysis and fat storage. PTPRK 439 deletion also protected mice against insulin resistance and hyperinsulinemia after obesogenic 440 diet feeding. Hepatic PTPRK overexpression is sufficient to reverse the phenotype. Elevated 441 insulin levels, insulin resistance, and excessive fat accumulation in hepatocytes are key drivers

442 of metabolic reprogramming, fuelling the phenotypic changes necessary for malignant 443 transformation of hepatocytes^{4,28}.

In aerobic conditions, pyruvate and cytosolic NADH are readily oxidised in the 445 mitochondria. However, as mitochondrial energy production meets cellular energy demand, 446 counterregulatory mechanisms are activated to slow down the TCA cycle and mitochondrial 447 function²⁹. If the glycolytic activity remains active, an excessive supply of acetyl-CoA 448 originating from pyruvate may accumulate, along with increased pyruvate fermentation into 449 lactate³⁰. The accumulated acetyl-CoA is then converted to malonyl-CoA, serving as a 450 substrate for *de novo* lipogenesis and an allosteric inhibitor of CPT1 α^{26} . We found that the 451 metabolic balance is regulated by PTPRK and favoured the conversion of pyruvate into acetyl-452 CoA by the pyruvate dehydrogenase complex. Indeed, we observed PTPRK-dependent 453 increased lactate/pyruvate ratio, reduced PDHK1/PDP1 ratio, accumulation of acetyl-CoA, 454 and upregulation of ACC and FASN. All these factors collectively contribute to the increased 455 lipogenic capacity of PTPRK-expressing hepatocytes, ultimately resulting in higher steatosis.

Glycolytic and gluconeogenic rates are reciprocally regulated, and the suppression of d57 gluconeogenic reactions favours glycolysis. The involvement of PTPRK in hepatic glucose d58 metabolism is an important determinant of the metabolic phenotype of PTPRK knockout mice d59 and the outcome of liver tumour formation experiments. Discrepancies in the role of PTPRK d60 in tumour development and growth in extrahepatic tissues³¹ may be due to the PTPRK–FBP1 d61 regulation and its hepatic role in gluconeogenesis. Our experiments revealed that pyruvate and d62 α -ketoglutarate are elevated in PTPRK knockout mice. α -ketoglutarate is a TCA cycle d63 metabolite, that can supply carbons for gluconeogenesis; however, its accumulation reduces d64 liver gluconeogenesis³² and is associated with cancer suppression mechanisms³³. The buildd65 up of these gluconeogenic substrates indicates that even with a higher gluconeogenic capacity, d66 the livers of PTPRK knockout mice still possess regulatory mechanisms to prevent 467 uncontrolled gluconeogenesis. In line with this interpretation, hyperglycaemia was not 468 observed in PTPRK knockout mice, but higher glucose production was found during the 469 pyruvate tolerance test, in which animals were fasted to stimulate gluconeogenesis.

Fat-loaded hepatocytes isolated from PTPRK knockout mice showed an accumulation 471 of phosphorylated FBP1, and real-time detection of the metabolite fructose 1,6-bisphosphate 472 in primary hepatocytes lacking PTPRK revealed lower levels after glucose stimulation. Lower 473 fructose 1,6-bisphosphate levels during glycolysis may also be a direct implication of the 474 FBP1 tyrosine phosphorylation status. Thus, the observed outcome implies a futile cycle 475 between FBP1 and PFK1 activities during glycolysis and optimised glucose production during 476 gluconeogenesis. The substrate cycling at this step of glycolysis leads to wasteful ATP 477 consumption³⁴, in agreement with the observed increased energy expenditure in PTPRK 478 knockout mice and the substantial disparities observed for fat accumulation despite minor 479 differences in food intake. Further research is needed to explore the precise implications of 480 tyrosine phosphorylation on FBP1. Additionally, it is crucial to identify the tyrosine kinases 481 responsible for phosphorylating FBP1 and to examine the potential role of substrate cycling 482 in glycolysis in maintaining energy homeostasis.

Besides PTPRK, several classical PTPs present promising therapeutic opportunities. 484 However, developing selective and bioavailable PTP inhibitors has proved challenging³⁵. 485 Recent studies have shown the effectiveness of competitive inhibitors for closely related 486 PTPN2 and PTPN1^{36,37}. RPTPs can additionally be inhibited by inducing their dimerization. 487 For example, antibodies targeting PTPRD ectodomains induce protein dimerization and 488 degradation, thereby suppressing PTPRD-dependent cell invasion in a metastatic breast 489 cancer cell line³⁸. Therapeutic options for end-stage liver diseases are limited³⁹. PTPRK 490 inhibitors may hold potential in high-expressing PTPRK livers, as an alternative or adjuvant 491 treatment for obesity-associated liver dysfunction. In conclusion, PTPRK expression is increased in diseased human and mouse livers. 493 Elevated hepatic PTPRK expression triggers heightened glycolysis, culminating in the 494 activation of PPAR γ and the stimulation of *de novo* lipogenesis. In mice, genetic PTPRK 495 inhibition offers protection against the rapid development of liver dysfunction associated with 496 obesogenic diet. Therefore, PTPRK emerges as a dual role player – serving as a biomarker for 497 hepatic metabolic adaptations that influence the risk of metabolic liver disease and as a target 498 for the development of new therapies. Screening and stratification of patients with 499 NAFLD/MASLD based on hepatic PTPRK expression levels could guide therapeutic 500 decisions to attenuate metabolic dysfunction associated with obesity.

501 Materials and Methods

502 Reagents

503 Human insulin solution, sodium pyruvate, sodium palmitate, oleic acid, bovine serum 504 albumin, 2-deoxy-D-glucose, D-glucose, mannoheptulose, DMOG, and LPS were obtained 505 from Sigma-Aldrich. Recombinant murine IFNγ (315-05-100ug PeproTech), recombinant 506 human IL6 (206-IL-010, R&D Systems), insulin ProZinc (NDC 0010-4499-01, Boehringer 507 Ingelheim, Rhein, Germany) were used for *in vivo* experiments.

508 Human samples

We studied 19 biopsy specimens of patients undergoing a liver biopsy for medical 510 reasons. The clinical characteristics of these patients are shown in **Supplementary Table 1**. 511 Biopsies were collected after approval of the Hôpital Erasme Ethics Committee. Written 512 informed consent was obtained from each participant.

513 Extraction of proteins from human liver biopsies, enrichment of PTPs, and proteomics 514 analysis

515 Frozen human liver biopsies were subjected to disruption using beads beating and 516 sonication. Lysates were treated with lysis buffer containing 10% glycerol, 1% NP-40, 517 cOmplete[™]EDTA-free protease inhibitor cocktail (Roche Diagnostics), and 1× phosphatase 518 inhibitor (Sigma-Aldrich). After sonication, centrifugation at 20,000g for 1h at 4°C separated 519 insoluble debris, retaining the supernatant for total proteome analysis. The obtained lysates 520 were enzymatically digested using trypsin, targeting C-terminal lysine and arginine residues, 521 except when adjacent to a C-terminal proline. Purification of the resulting peptides was 522 performed using reverse-phase Sep-Pak C-18 cartridges, removing salts and buffers. By 523 employing a strategy that explores the oxidation of cysteine in the catalytic site of PTPs, 524 peptides containing cysteine residues within the PTP signature motif HCX5R were enriched 525 through immunoprecipitation. Immunoprecipitated peptides, resuspended in 0.2% formic 526 acid, were injected in triplicate for LC-MS/MS analysis. A 40-min reverse-phase gradient 527 separation on UHPLC 1290 (Agilent Technologies) was followed by analysis on an Orbitrap 528 Q Exactive HF mass spectrometer (Thermo Fisher Scientific), with MS scans spanning the 529 375–1500m/z range at 60,000 resolution. Data were acquired in Data-Dependent Acquisition 530 mode, selecting the top 7 precursor ions for HCD fragmentation, followed by MS/MS analysis 531 at 30,000 resolution. MaxQuant (version 2.0.3.0) processed spectral files, searching the Homo 532 sapiens Uniprot database with FDR restricted to 1%.

533 *Mice*

534 Mice were housed and managed in compliance with the Belgian Regulations for 535 Animal Care, and the animal protocols underwent approval from the Commision d'Ethicque 536 du Bien-Être Animal (CEBEA), Faculté de Médecine, Université libre de Bruxelles (dossier 537 No. 732). Animals were housed at 22°C on a 12:12-h light-dark cycle with ad libitum access 538 to food and water. *Ptprk* knockout mice were generated at The Jackson Laboratory (Ptprk-539 8356J-M669 project) by CRISPR/Cas9 technology and were bred on a pure C57BL/6N 540 background. The strategy involved an intragenic deletion spanning 555 base pairs on 541 Chromosome 10. This genetic alteration led to the excision of exon 3 within the *Ptprk* gene, 542 accompanied by the removal of 283 base pairs from adjacent intronic sequences. The resulting 543 mutation is predicted to induce an alteration in the amino acid sequence following residue 74 544 and an early truncation by 2 amino acids.

By breeding $Ptprk^{+/-}$ mice we obtained $Ptprk^{-/-}$ and $Ptprk^{+/+}$ males and females 546 littermates. $Ptprk^{+/+}$ and $Ptprk^{-/-}$ mice, aged 8 weeks, were randomly assigned to experimental 547 diet-induced obesity feeding with unrestricted access to the specific diets: a HFD (60 kcal% 548 fat D09100310i), a HFHFHCD (40 kcal% Fat, 20 kcal% Fructose, and 2% Cholesterol, 549 D09100310i), or a control diet (10 kcal% Fat, D09100304i) from Research Diets (New 550 Brunswick, NJ, USA). The duration for which the animals were subjected to the experimental 551 diets ranged from 4 to 24 weeks, as indicated.

552 Metabolic analysis

Evaluation of body and liver lean and fat mass was performed with EchoMRI[™] 3-in1 (NMR) body composition analyser from EchoMedical Systems (Houston, TX, USA).

Glucose tolerance tests were performed in 6h fasted mice with an intraperitoneal Glucose (2g D-Glucose/kg body weight). For pyruvate tolerance tests, mice for were fasted overnight and administered pyruvate (2g/kg). Insulin tolerance tests were formed on mice fasted for 4h, with an intraperitoneal injection of insulin (0.75U/kg body weight). Fresh D-glucose, pyruvate, or insulin solutions were prepared in PBS immediately for before the injections. Blood samples were obtained from the tail tip, and glycemia was for measured using a glucometer (Accu-Check Performa, Roche, Basel, Switzerland). Blood serum was collected in a fed state (9am) or 6h after fasting (3pm) and insulin levels measured by ELISA (Crystal Chem Inc.). At 18 weeks of age, $Ptprk^{-/-}$ and $Ptprk^{+/+}$ mice fed HFHFHCD for 10 weeks, were 565 placed in metabolic cages TSE Phenomaster setup (TSE, Germany) for a duration of 72h. 566 Following a 24h period of acclimatization, metabolic parameters, including physical activity, 567 energy expenditure, and substrate utilization were assessed by indirect calorimetry.

568 DEN-induced HCC

Liver tumour formation was induced by administering 25mg/kg of DEN in PBS via 570 intraperitoneal injection into the underbelly region of 14-day-old mice. The mice were 571 maintained on a chow diet. At 40 weeks of age, the mice were euthanized through cervical 572 dislocation, and their livers were extracted for comprehensive analysis, including macroscopic 573 and histological assessment of tumour number and size.

574 Histological analysis

575 Mouse liver tissues intended for histological analysis were collected from euthanized 576 mice, dissected, and subsequently rinsed with PBS. The tissues were fixed in 4% buffered 577 formaldehyde (pH 7.4), embedded in paraffin blocks, sectioned into slices measuring 5-7 μ m 578 using a Leica rotator microtome and stained with haematoxylin and eosin (H&E).

579 For immunohistochemistry analysis of PTPRK in human liver samples, 7µm thick 580 paraffin sections were situated on positively charged slides. Antigen unmasking was 581 performed with a heated citrate buffer (10mM, pH6.0). The sections were permeabilized using 582 triton (0.1%), subsequently blocked with 2% milk, and incubated with 10% normal goat serum 583 to prevent nonspecific binding. Primary antibodies were incubated overnight at 4°C, followed 584 by incubation with goat anti-rabbit horseradish peroxidase secondary antibody (P044801). 585 Negative controls were established by subjecting specimen slices solely to the secondary 586 antibody. Lipid accumulation was assessed by Nile Red staining (Sigma-Aldrich N3013). 588 Primary hepatocytes were isolated and seeded onto chambered coverslips (IBIDI, 80806) at a 589 density of 50,000 cells per well, 4h before adenoviral transfection for either PTPRK 590 overexpression or silencing. After 24h of transfection, the culture medium was replaced with 591 BSA-conjugated free fatty acids (sodium palmitate 0.4mmol/L, oleic acid 0.8mmol/L) or free 592 fatty acid-free 1% BSA control-enriched medium with 1% FBS. The hepatocytes were fixed 593 in 4% formaldehyde solution for 20min and stained with a 5 μ g/mL Nile Red solution and the 594 nucleus were stained with DAPI. The stained cells were observed using an inverted 595 fluorescence microscope (Axio Observer D1, Carl Zeiss, Oberkochen, Germany). The same 596 staining procedure was applied to hepatocytes with high-fat and low-fat content, fixed and 597 stained following an overnight culture period.

Hepatic lipid content was assessed in frozen sections of both *Ptprk*^{+/+} and *Ptprk*^{-/-} livers 599 through Oil Red O (ORO) (Sigma-Aldrich, O1391) staining. Liver sections from cryostat cuts 600 were equilibrated for 30min at room temperature in laminar flow hood. ORO working solution 601 (0.3% ORO in 60% isopropanol) was applied to ensure complete coverage and incubated at 602 37°C. After counterstaining with haematoxylin, images were captured using NanoZoomer 603 Digital Pathology (Hamamatsu Photonics K.K., version SQ 1.0.9) at 40x magnification.

604 Lipid extraction

Total hepatic lipid content was evaluated by gravimetry after lipid extraction. Livers twee removed, immediately freeze-clamped in liquid nitrogen, and stored at -80°C. The liver twee for samples (100mg) were homogenized using a bead tissue homogenizer with cold methanol. After sonication, the homogenate was transferred to Falcon tubes. Chloroform was added, and the mixture was vortexed. Following agitation overnight at 4°C, the samples were centrifuged to at 13,500g for 10min. The organic phase was collected, allowed to air-dry at room 611 temperature, and the resulting pellet was weighed for total fat quantification. The solid middle612 layer formed during centrifugation was dried and weighed to determine the protein content.613 The results were expressed as mg of fat/100g of liver and g of fat/g of protein in the liver.

614 LC-MS analysis of glycolytic, tricarboxylic acid (TCA) cycle, and pentose phosphate 615 pathway (PPP) intermediates

The metabolomics analysis was conducted at the VIB Metabolomics Core (Leuven, 617 Belgium). Polar metabolites were extracted using a two-phase methanol-water-chloroform 618 method⁴⁰. Dried metabolite samples were reconstituted in a solution of 60% acetonitrile and 619 then transferred to LC-MS vials. For the analysis, an UltiMate 3000 LC System (Thermo 620 Scientific) was coupled to a Q-Exactive Orbitrap mass spectrometer. Separation was achieved 621 using a SeQuant ZIC/ pHILIC Polymeric column (Merck Millipore). A gradient of solvent A 622 (95% acetonitrile-H₂O, 2 mM ammonium acetate pH 9.3) and solvent B (2 mM ammonium 623 acetate pH 9.3) was employed. Mass spectrometry was performed in the negative ion mode, 624 encompassing both full scans and a targeted Selected Ion Monitoring (SIM) approach. Data 625 acquisition was managed using Xcalibur software (Thermo Fisher Scientific)⁴¹. The data is 626 presented as raw abundances corrected for sample weight.

627 Primary mouse hepatocyte isolation, cell culture and treatments

Mouse primary hepatocytes were isolated from $Ptprk^{-/-}$ and $Ptprk^{+/+}$ mice following overnight ad libitum feeding, utilizing a two-step collagenase perfusion method through the were cava. The process was initiated by anaesthetizing the mice through an intraperitoneal injection of a ketamine (100mg/kg) and xylazine (10mg/kg) mixture, peritoneum was opened, and the infra-hepatic segment of the vena cava was cannulated for perfusion. The portal vein was cut to clear blood from the liver. In the first perfusion step, the liver was exposed to HBSS (Thermo Fisher Scientific) supplemented with 10mM HEPES (pH 7.4), saturated with O₂/CO₂ 635 (95:5 vol/vol), at 37 °C for 10min. The second step involved adding collagenase type IV 636 (0.3 mg/mL) to William's E Medium (Thermo Fisher Scientific) and further perfusing for 637 10min, effectively digesting the liver tissue. The digested liver was transferred to a sterile 638 plastic dish, and cells were dispersed using a coarse-toothed comb in cold William's E 639 Medium, followed by filtration through a 100- μ m cell filter to eliminate cell clumps. The 640 resulting clump-free cell suspension was pelleted through centrifugation at 50g for 5min at 641 4 °C, the pellet was resuspended in William's E Medium and layered onto Percoll[®] solution 642 (Sigma-Aldrich) (10ml Percoll[®] + 1.25ml PBS 10X + 1.25 ml H₂O.) and centrifuged for 10 643 min at 1000 RPM. The pellet was resuspended in William's E Medium and washed 3 times 644 (centrifugation at 50g for 5min at 4 °C). Viability assessment using the trypan blue exclusion 645 test yielded approximately 15-20 million cells with 85% viability.

Hepatocytes with high-fat and low-fat content were isolated from steatotic livers⁴². 647 Viable hepatocytes with different lipid contents were separated from dead hepatocytes and 648 non-parenchymal cell types in the cell suspension using Percoll[®] gradient and differential 649 centrifugation. The hepatocytes were resuspended, washed, and assessed for cell number and 650 viability using trypan blue and a hemacytometer and immediately plated for experiments or 651 pelleted and stored at -80°C for further RNA or protein extractions used in RNA-Seq and 652 proteomic/phosphoproteomic analyses.

HepG2, HLE, and Huh6 cell lines were cultured using DMEM with 10% heat-654 inactivated FBS and Penicillin-Streptomycin. For mouse primary hepatocytes, 100,000 655 cells/well in a p24 plate using attachment medium (William's Medium with Glutamax, 10% 656 Foetal Bovine Serum (FBS), 1% Penicillin-Streptomycin, and 10 mM HEPES). After 657 attachment, the media was replaced with a maintenance medium (William's E Medium with 658 Glutamax, 10% FBS, 1% Penicillin-Streptomycin, 1% non-essential amino acids, 10mM 659 HEPES, and 5μM hydrocortisone). Cell death was measured using SYTOX green (Thermo 660 Fisher Scientific).

661 LC-MS analysis of total proteome and phosphoproteome changes

662 The cell pellets originating from primary hepatocytes were lysed in cold HEN Buffer 663 supplemented with PhosSTOP (Roche) and cOmplete[™], EDTA-free Protease Inhibitor 664 Cocktail (Roche). Lysates were precipitated twice using methanol/chloroform precipitation 665 (Sample:Methanol:Chloroform, 4:4:1). Pellets were resuspended using 2% SDS in 50mM 666 HEPES, and protein concentration was performed using DC protein assay (Bio-Rad 667 Laboratories). An equal amount of protein was subjected to reduction and alkylation by 668 incubating the samples with 5mM DTT for 1h at 37°C, followed by incubation with 20mM 669 iodoacetamide at room temperature for 30min. Pellets were dissolved using 6M Guanidine-670 HCl in digestion buffer (50mM ammonium bicarbonate, 1mM CaCl₂). 250µg of proteins were 671 diluted to 0.3M Guanidine-HCl in digestion buffer and digested using trypsin (protein:trypsin, 672 20:1, w/w). Peptides were desalted on Supel[™]-Select HLB SPE Tube (Sigma-Aldrich). 673 Eluates were evaporated under a vacuum until dryness. Peptides were dissolved in 80% 674 acetonitrile and 0.1% TFA. Before enrichment, digestion quality control was performed using 675 an Ultimate 3000 Nano Ultra High-Pressure Chromatography system with a PepSwift 676 Monolithic® Trap 200µm*5mm (Thermo Fisher Scientific). One part of the sample was kept 677 aside and dried again for total proteomic analysis. The phosphorylated peptides enrichment 678 was performed using Fe(III)-NTAcartridges (Agilent Technologies) using the AssayMAP 679 Bravo Platform (Agilent Technologies)⁴³. Cartridges were primed and equilibrated with 0.1% 680 TFA in ACN and 0.1% TFA, 80% ACN (loading buffer) solutions, respectively. Cartridges 681 were then washed with loading buffer and eluted using 1% NH₄OH. Peptides were 682 immediately acidified using 10% formic acid (FA) and dried in vacuum. Both total proteome 683 and phosphoproteome were analysed by high-resolution LC-MS/MS using an Ultimate 3000

684 Nano Ultra High-Pressure Chromatography system (Thermo Fisher Scientific) coupled with 685 an Orbitrap EclipseTM TribridTM Mass Spectrometer via an EASY-spray (Thermo Fisher 686 Scientific). For the total proteome analysis, peptide separation was carried out with an 687 Acclaim[™] PepMap[™] 100 C18 column (Thermo Fisher Scientific) using a 155min linear 688 gradient from 3 to 35% of B (84% ACN, 0.1% FA) at a flow rate of 250nL/min. The peptide 689 separation for the phosphoproteome analysis was carried out with an AcclaimTM PepMapTM 690 100 C18 column (Thermo Fisher Scientific) using a 155min non-linear gradient from 3 to 35% 691 of B (0 min, 3% B; 135min, 30% B; 155min, 42% B; B:84% ACN, 0.1% FA) at a flow rate 692 of 250nL/min. Both were analysed using the Orbitrap Eclipse[™] operated in a DDA mode. 693 MS1 survey scans were acquired from 300 to 1,500m/z at a resolution 120,000 using the 694 Orbitrap mode. MS2 scans were carried with high-energy collision-induced dissociation 695 (HCD) at 32% using the Normal speed IonTrap mode. Data were evaluated with Proteome 696 Discoverer software using 10ppm for precursor mass tolerance, 0.5Da for the fragment mass 697 tolerance, specific tryptic digest, and a maximum of 3 missed cleavages. 698 Carbamidomethylation (+57.021464Da) on C was added as a fixed modification. N-term 699 Acetylation (+42.010565Da) and methionine oxidation (+15.994915Da) were added as 700 variable modifications. Phosphorylation (+79.966331) on S, T, and Y was added as variable 701 modification only for the phospho-proteome analysis in addition to other mentioned 702 modifications. Peptide-spectrum matches and proteins were filtered at FDR 1%. Protein 703 abundancies (total proteome) were normalized using TIC. Phosphorylated peptide 704 abundancies were normalized using eigenMS⁴⁴ with R studio.

705 Adenoviral infection

Adenoviral-mediated hepatic PTPRK overexpression was performed by retro-orbital
707 injection of 1.8x10⁹ PFU (Ad-*Ptprk*, contruct Ad-m-PTPRK, SKU: ADV-269821) in 200μL
708 of PBS, and Adv-CMV-Null was used as control (Ad-control, #1300).

In primary mouse hepatocytes, we used adenoviral vectors to achieve PTPRK 710 overexpression (Ad-*Ptprk*, contruct Ad-m-PTPRK, SKU: ADV-269821) and silencing (Ad-711 shRNA *Ptprk*, contruct Ad-GFP-U6-m-PTPRK-shRNA, SKU: shADV-269821). The cells 712 were used for the experiments 48h after the exposure to the vectors. The vectors were obtained 713 from Vector Biolabs.

714 In vitro RNA interference and colony formation assay

To induce PTPRK knockdown, we transfected HepG2, HLE, and Huh6 cell lines with 716 siRNAs targeting PTPRK or a negative control siRNA (working concentration 30nmol/L; 717 QIAGEN). The delivery of siRNA was achieved using Lipofectamine[™] RNAiMAX 718 Transfection Reagent (Thermo Fisher Scientific) in Opti-MEM[™] I Reduced Serum Medium 719 (Thermo Fisher Scientific). The siRNA target sequences are detailed in **Supplementary** 720 **Table 2**.

48-h after siRNA transfection, the cells underwent trypsinization to attain a single-cell suspension. For the colony formation assays, 2,000 cells were seeded into P6 plates. After 1-23 2 weeks, depending on the specific cell line, the resultant colonies were fixed with 4% PFA 724 solution and staining with 0.5% crystal violet.

725 Dephosphorylation assay

The dephosphorylation assay employed pTyr-enriched lysates obtained from primary mouse hepatocytes treated with pervanadate¹³. The hepatocytes were incubated with a recombinant PTPRK intracellular domain (PTPRK-ICD, 150nM final concentration). The reaction was stopped after 90-min using SDS, and the resulting samples were subjected to r30 immunoblot analysis of phospho-FBP1 (pY265).

731 Extracellular acidification rates measurement during glycolytic stress test

Glycolytic rates were evaluated using the XFp Flux Analyzer from Seahorse Glycolytic rates were evaluated using the XFp Flux Analyzer from Seahorse Radio Context and Seahorse Plates and Seahorse Plates (10,000 cells/well). After attachment and adenoviral treatments, the cells were allowed to Radio Context and Seahorse Bioscience) supplemented with 2mM Glutamine at 37°C for 1h in a CO₂-depleted incubator. The XF Base media was refreshed again radio glutamine at 37°C for 1h in a CO₂-depleted incubator. The XF Base media was refreshed again radio conducted adding glucose (10mM), oligomycin (10 μ M), and 2-DG (100mM, divided into two radio consecutive injections of 50mM). After the test, the medium was removed, and the cells were radio immediately collected in 50 μ l of cell lysis buffer (Cell Signaling Technology) supplemented radio with Halt protease and phosphatase inhibitor cocktail (Thermo Fisher Scientific). The cells radio were stored at -80°C for posterior protein measurements and immunoblot analysis.

743 Western blotting

RIPA buffer (Cell Signaling Technology) was used to extract total protein lysates from r45 tissues, while cell total protein lysates were prepared using Cell Lysis Buffer (Cell Signaling r46 Technology). Both lysis buffers were supplemented with Halt protease and phosphatase r47 inhibitor cocktail (Thermo Fisher Scientific). Protein quantification was performed using a r48 BCA protein assay kit (Thermo Fisher Scientific). Separated by polyacrylamide gels, 20–50µg r49 of protein lysate was subsequently transferred to a 0.22µM nitrocellulose membrane (Bio-Rad r50 Laboratories). Primary antibodies (**Supplementary Table 3**) were diluted in milk-blocking r51 buffer. Detection of proteins employed goat anti-rabbit IgG (Dako Agilent), goat anti-mouse r52 IgG (Dako Agilent), and Peroxidase AffiniPure Donkey Anti-Human IgG (Jackson r53 ImmunoResearch) secondary antibodies. Immunoreactive bands were detected using a r54 Western blot imaging system (Amersham ImageQuant 800 Western blot imaging system, r55 Cytiva Life Science).

756 RNA extraction, qPCR, and transcriptomics analysis

Poly(A)+ mRNA extraction was performed with Dynabeads[™] mRNA DIRECT[™] 758 Purification Kit (Thermo Fisher Scientific). Reverse transcription was carried out with a 759 reverse transcriptase kit (Eurogentec). Quantitative real-time PCR was performed using a Bio-760 Rad CFX (Bio-Rad Laboratories) and SYBR Green reagents (Bio-Rad Laboratories). Probe 761 and primer details can be found in **Supplementary Table 4.** For tissues or isolated 762 hepatocytes with high-fat and low-fat content the total RNA was obtained using a RNeasy 763 Mini Kit (QIAGEN) following the manufacturer's instructions. cDNA synthesis and qPCR 764 were performed as described above. For the transcriptomics experiments, total RNA quality 765 analysis, library preparation, and sequencing were performed by the BRIGHTcore facility 766 (Brussels, Belgium). Sequencing was performed on an Illumina NovaSeq 600. An average of 767 25 million paired-end reads of 100 nucleotides were obtained per sample. The list of up-768 /downregulated genes/transcripts and association with canonical pathways were determined 769 with the use of the online Degust software with Limma/Voom and packages Bioconductor 770 EGSEA and ComplexHeatmap in RStudio.

771 Bioinformatic analysis

For the comparative analysis among healthy, steatosis and NASH conditions, the 773 Kruskal-Wallis test was employed. The comparison analysis was conducted on mRNA 774 expression data from the publicly available E-MEXP-3291 study, and the analysis was 775 executed using R (version 4.2.2). The correlation analysis focused on investigating the 776 relationship between Ppar mRNA (x-axis) and RPTPs mRNA (y-axis) using the Pearson 777 correlation method. The data was obtained from the publicly available E-GEOD-48452 study. 778 The analysis was performed in R (version R 4.2.2). To assess the statistical significance of the 779 correlation, a significance level (p < 0.05) was set, and p-values were calculated. To study the 780 expression of RPTPs in human liver, single-cell RNA-Seq dataset of human healthy-obese 781 livers was obtained from¹⁸. The dataset along with cell annotations were downloaded from 782 Gene Expression Omnibus (GEO), accession number GSE192740. Using the information 783 provided by the authors, the UMAP and gene expression were plotted using Seurat⁴⁵. Publicly 784 available transcriptomic data (RNA-seq) corresponding to GSE164760 was downloaded from 785 the NCBI Sequence Read Archive (SRA) in fastq format using version 3.0.0 of the SRA 786 Toolkit. Adapter sequences removed using TrimGalore version 0.6.0 were 787 with *Cutadapt* version 1.18⁴⁶. The clean reads were aligned to the reference genome using the 788 splice-aware aligner STAR version 02020147 based on the hg38 genome version. The aligned 789 reads were quantified using HTseq version 0.11.0. The trimmed mean of M values method 790 was used with *EdgeR*version 3.28.1⁴⁸, R software (version 3.6.3).

Heatmap visualization was carried out with *ComplexHeatmap* R package and all real samples were referred to the mean of the control groups, log2 transformed with trimmed real standard deviation in proteomic and transcriptomic databases.

794 Measurement of fructose 1,6-bisphosphate in cells using HYlight

The HYlight biosensor²² responds to changes in fructose 1,6-bisphosphate levels. Cells 796 were transfected with the pCS2+_HYlight plasmid²² using Lipofectamine 3000 797 (ThermoFisher). 1h before imaging, cells were subjected to glucose starvation using XF assay 798 medium. Live-cell imaging was conducted on a Nikon AX confocal system and a 20X 799 objective (NA 0.8, Plan Apo λ D 20x OFN 25 DIC N2) with the perfect focus system (PFS). 800 The transfected cells were excited at 488nm and 405nm, and emission was captured using a 801 525/25nm emission filter. Imaging was performed at 37°C. Image processing was performed 802 with NIS-Elements software (Nikon), single-cell regions of interest (ROIs) were manually 803 selected. The excitation ratio F_{488/405} was measured for each ROI over time.

804 PTP activity assay

Recombinant PTPRK intracellular domain (PTPRK ICD) was purified¹³, and the 806 pNPP phosphatase activity assay was conducted as previously described⁴⁹. PTP was buffer 807 exchanged to the activity assay buffer (20mM HEPES, 100mM NaCl, pH 7.4) using an 808 Amicron 10kDa MWCO. The assay buffer was degassed by flushing with Argon. PTP was 809 subjected to the indicated treatments (inhibitors or vehicle) and loaded into a 96-well plate. 810 The reaction was initiated by the addition of 15mM or the indicated concentrations of pNPP 811 to the reaction mixture. To determine the IC₅₀ value, the reactions were prepared by adding 812 the inhibitor or DMSO to a reaction mixture containing PTP, incubating at room temperature 813 for 5 min, and centrifuged at 14,000 rpm. The supernatant was transferred to a 96-well plate. 814 The reaction was initiated by the addition of 30mM pNPP to the reaction mixture. The 815 formation of p-nitrophenol was measured at absorbance of 405nm at 27°C on an ID5 816 spectrometer. Initial velocity (V₀) was determined using linear regression in GraphPad Prism.

817 Stem cell differentiation into HLCs

818 The differentiation of CRISPR/Cas12-edited hESC H1 (WiCell) into HLCs followed 819 the protocol previously described⁵⁰. Laminin-coated plates were prepared and stem cells were 820 detached, seeded into the laminin-coated plates, and allowed to reach optimal confluency 821 before differentiation. Albumin was measured in the cell culture medium by Human 822 ALB/Serum albumin ELISA Kit (Sigma-Aldrich) and in the cell lysate by qPCR. The 823 differentiated cells were used for glycolytic stress tests.

824 Statistical analysis

825 The results are presented as the mean ± standard error of the mean (SEM). Student's 826 t-test was used for comparisons between two groups. Differences among groups were assessed 827 by two-way ANOVA or repeated-measures ANOVA. Statistical analyses were assessed using 828 Prism software (GraphPad Software, Inc, La Jolla, CA, USA). Sample size was predetermined 829 based on the variability observed in prior experiments and on preliminary data. Differences 830 were regarded as statistically significant if p < 0.05; p < 0.01; p < 0.001.

831 Data and Resource Availability

The RNA-Seq dataset generated during the sequencing procedure is deposited in 833 the Gene Expression Omnibus database (access number GSE247670), the mass spectrometry 834 proteomics and peptidomics datasets have been deposited to the ProteomeXchange 835 Consortium via the PRIDE partner repository (access numbers PXD046949, PXD46506) and 836 available from the corresponding author upon reasonable request.

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990 Figures:



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992 Figure 1 – Enhanced PTPRK expression in human livers with steatosis and non-alcoholic 993 steatohepatitis (NASH). (A) Methodological approach schematic illustrating the

994 quantification of protein tyrosine phosphatase (PTP) profile and total proteome in human 995 livers. (**B**) Quantification of lipid metabolism-related proteins using label-free quantification 996 (LFQ) in healthy (H), steatotic (S) and NASH (N) livers. (**C**) Schematic representation of PTP 997 families and their characteristic domains. PTPs detected by mass spectrometry are labelled in 998 red. (**D**) Heat map displaying the hepatic PTP profile. (**E**) Spectral counts of total PTPs and 999 the proportional contribution of receptor and non-receptor PTPs among the identified PTPs. 1000 (**F**) The proportional contribution of PTPRK and other receptor PTPs to the total identified 1001 PTPs is shown. (**G**) Data extracted from GSE192740 showing hepatocyte expression of 1002 PTPRK. (**H**) RPTP mRNA levels in the E-MEXP-3291 dataset. (**I**) Correlation analysis 1003 between RPTPs and Pparg mRNA levels in the E-GEOD-48452 dataset. (**J**) Representative 1004 immunohistochemistry (IHC) images displaying PTPRK staining and quantitative results for 1005 nuclear PTPRK. Statistical significance is denoted as *p<0.05, **p<0.01, ***p<0.001. 1006



1007

1008 Figure 2 - Hepatocyte PTPRK is induced by Notch signalling and LPS, correlating 1009 positively with PPAR γ in obese mouse models and primary hepatocytes. (A-E). 8-week-1010 old C57BL6N mice were fed either a high-fat diet (HFD) or a high-fat high-fructose high-1011 cholesterol diet (HFHFHCD) for 12 weeks. We measured (A) body weight, (B) body 1012 composition, and (C) fasting insulinemia. Mice underwent (D) glucose and (E) insulin

1013 tolerance tests after 12 weeks of diet. (F) Primary hepatocytes, inguinal white adipose tissue 1014 (iWAT), epidydimal white adipose tissue (eWAT), and gastrocnemius (muscle) were 1015 harvested for immunoblot analysis of PTPRK. (G) The livers were extracted and assessed for 1016 liver weight and composition. (H) Histological analysis was conducted to quantify the 1017 vacuolation area, serving as an indicator of hepatic lipid inclusions. (I) Immunoblot analysis 1018 was carried out to determine the levels of PTPRK and PPARy. (J) 8-week-old C57BL6N mice 1019 receiving a chow (control) diet were transduced with an adenoviral vector to induce PTPRK 1020 overexpression (Ad-Ptprk). Two weeks later, immunoblot analysis was performed in liver 1021 samples to assess the levels of PTPRK and PPAR γ . (K) Primary mouse hepatocytes were 1022 cultured overnight under standard conditions and fixed at different time points (0, 4, 8, and 1023 24h) for Nile Red staining to visualise lipid droplets. (L) Immunoblot analysis of PTPRK and 1024 PPARy was performed on primary mouse hepatocytes collected at different time points as 1025 indicated. (M) Primary mouse hepatocytes were cultured overnight and treated with different 1026 concentrations of the Notch signalling inhibitor GSIXX for 24h. Immunoblot analysis was 1027 employed to evaluate the expression levels of PTPRK and PPAR γ . (N, O) Primary mouse 1028 hepatocytes were cultured overnight and treated with lipopolysaccharide (LPS) for 24h. The 1029 gene expression was analysed by quantitative PCR (qPCR, N) or immunoblot techniques (O). mouse hepatocytes were cultured overnight 1030 (**P**) Primary and treated with 1031 dimethyloxalylglycine (DMOG), an inhibitor of 2-oxoglutarate-dependent dioxygenases 1032 required for hypoxia-inducible factor (HIF) degradation, for 24h. Immunoblot analysis was 1033 performed to examine the expression of HIF2a, PTPRK, and PPARy. Statistical significance 1034 is denoted as *p<0.05, **p<0.01, ***p<0.001.

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1036 Figure 3 – PTPRK deletion confers protection against diet-induced obesity, insulin 1037 resistance, and hepatic steatosis. (A-H) Male (\Diamond) and female (\heartsuit) C57BL6N *Ptprk*^{+/+} and 1038 *Ptprk*^{-/-} mice, aged 8 weeks, were subjected to a high-fat, high-fructose, high-cholesterol diet 1039 (HFHFHCD) for a period of 12 weeks. We measured body weight (A, D), body composition 1040 (B, E), insulinemia (C, F), and performed glucose and insulin tolerance tests (G, H). (I) At 1041 the end of HFHFHCD feeding, insulin was administered to female mice 10 min prior to liver 1042 collection. Immunoblot analysis was employed to examine the expression of pIR and pAKT

1043 in the liver. (J-O) Liver samples were analysed to assess fat accumulation through histological 1044 examination (J, K), measurements of liver weight and composition (L, M), and total liver 1045 lipid extraction (N, O). (I). Statistical significance is denoted as *p<0.05, **p<0.01, 1046 ***p<0.001.

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1047

1048 Figure 4 – PTPRK orchestrates the hepatic expression of metabolic enzymes and 1049 transcription factors promoting steatosis in mice fed an obesogenic diet. (A, B) Eight-1050 week-old male (\bigcirc) and female (\bigcirc) C57BL6N *Ptprk*^{+/+} and *Ptprk*^{-/-} were exposed to a high-1051 fat, high-fructose, high-cholesterol diet (HFHFHCD) for 12 weeks. Liver samples were 1052 analysed to examine the levels of PTPRK, PPAR γ , ACC (Acetyl-CoA Carboxylase), FASN 1053 (Fatty Acid Synthase), SREBP1 (Sterol Regulatory Element-Binding Protein 1), and ChREBP 1054 (Carbohydrate Response Element-Binding Protein). (C, D) Subcutaneous (inguinal fat, C and 1055 D) white adipose tissues were collected for immunoblot analysis of PPAR γ . (E) Liver mRNA 1056 expression of Ptprk, Ppar γ , Acc, Fasn, Scd1 (Stearoyl-CoA Desaturase 1), and Acly (ATP

1057 Citrate Lyase) was assessed. (F) Mice were subjected to HFHFHCD for four weeks and were 1058 administered an adenoviral vector to induce PTPRK overexpression (Ad-*Ptprk*). After a 2-1059 week period, liver samples were collected for immunoblot analysis of PTPRK and PPAR γ . 1060 (G) PTPRK knockout mice were subjected to HFHFHCD for four weeks and subsequently 1061 injected with Ad-*Ptprk*. After an additional two weeks on HFHFHCD, body weight was 1062 measured, and liver were collected for the evaluation of weight and composition. (H) Liver 1063 histological assessment and total lipid extraction were performed after PTPRK 1064 overexpression. Statistical significance is indicated as *p<0.05, **p<0.01, ***p<0.001. 1065 bioRxiv preprint doi: https://doi.org/10.1101/2023.12.01.569004; this version posted December 1, 2023. The copyright holder for this preprint (which was not certified by peer review) is the author/funder. All rights reserved. No reuse allowed without permission.



1066

1067 Figure 5 – Comprehensive analysis of the transcriptome, proteome, and protein 1068 phosphorylation changes in primary hepatocytes isolated from livers of $Ptprk^{+/-}$ and 1069 $Ptprk^{+/+}$ mice. (A) Methodological approach schematic illustrating the isolation of primary 1070 hepatocytes from mice fed HFHFHCD for 12 weeks, followed by separation based on cell

1071 density into hepatocytes with high-fat content and hepatocytes with low-fat content. (B) 1072 Immunoblot analysis revealing PTPRK and PPARy expression profiles of hepatocytes with 1073 high-fat content. (C) RT-qPCR analysis depicting changes in the expression of lipid 1074 metabolism-related genes. (D) RNA-Seq heatmap displaying alterations in PPAR pathway-1075 related genes. (E) RNA-Seq KEGG pathway enrichment analysis comparing $Ptprk^{+/+}$ low-fat 1076 vs. high-fat hepatocytes (left side) and the same comparison in *Ptprk*^{-/-} hepatocytes (right side). 1077 (F) Total proteome global heatmap showing significantly altered proteins. (G) Volcano plot 1078 illustrating the changes in the total proteomic profile between $Ptprk^{-/-}$ and $Ptprk^{+/+}$ high-fat 1079 hepatocytes. (H) Total proteome KEGG pathway enrichment analysis. (I) Phosphoproteome 1080 global heatmap showing significantly altered phosphoproteins. (J) Phosphoproteome KEGG 1081 pathway enrichment analysis. (K) Volcano plot displaying only the quantification of tyrosine 1082 phosphosites in $Ptprk^{-/-}$ and $Ptprk^{+/+}$ hepatocytes. Phosphosites with over 30% increase in 1083 Ptprk^{-/-} cells are marked in red (p < 0.05). (L) Heatmap showcasing the significantly changing 1084 phosphopeptides in fructose-1,6-bisphosphatase 1 (F16P1/FBP1). (M) Schematic 1085 representation of different F16P1/FBP1 amino acid sequences, indicating distinct boxes for 1086 interaction mapping experiments. The predicted helical regions are depicted in the three-1087 dimensional structure on the right side. (N) Conservation mapping of the predicted PTPRK-1088 FBP1 interface, illustrating the PTPRK-D2 complex (red, blue, and grey surface 1089 representation of their electrostatic surface potential) interacting with the FBP1 dimer (light 1090 green and light blue) and the proximity of the PTPRK catalytic site and increased FBP1 1091 phosphotyrosine residues. The D1 domain of PTPRK is shown in grey surface representation. 1092 (**O**) Immunoblot analysis of pervanadate-treated mouse hepatocyte lysates incubated with or 1093 without the recombinant PTPRK-ICD (ICD: intracellular domain) prior to pFBP1 (Y265) 1094 analysis (P) Primary mouse hepatocytes were transfected with HYlight to monitor fructose 1095 1.6-bisphosphate dynamics. After injection of 20 mM glucose, fluorescence ratios (R₄₈₈/R₄₀₅) 1096 were calculated and Min-Max normalized. Solid lines represent the mean across cells, while 1097 dots represent the mean±SEM. The presented data represent the average of multiple 1098 independent biological replicates. Statistical significance in panels B, C, and P is indicated 1099 as *p<0.05, **p<0.01, ***p<0.001. 1100



1101

1102 Figure 6 - Hepatic PTPRK induces metabolic reprogramming in the livers of mice fed 1103 an obesogenic diet. (A) Primary mouse hepatocytes were cultured and transduced with an 1104 adenoviral vector to induce either PTPRK overexpression (Ad-*Ptprk*) or silencing of PTPRK 1105 (Ad-shRNA *Ptprk*). Immunoblotting (triplicates representative of 4 independent experiments) 1106 confirmed the modulation of PTPRK expression and (B) real-time measurement of

1107 extracellular acidification rate (ECAR) in response to glycolytic modulators, revealed changes 1108 in glycolytic parameters. (C) Primary mouse hepatocytes were treated with a mixture of BSA-1109 conjugated fatty acids, palmitate (PA), and oleate (OA) (0.4 mM PA and 0.8 mM OA) to 1110 simulate triglyceride deposition, and subsequently stained with Nile Red to visualize lipid 1111 droplets rich in neutral lipids (triglycerides). (D) Untargeted metabolomics analysis was 1112 conducted in mouse livers from Ptprk^{-/-} and Ptprk^{+/+} female mice fed HFHFHCD for 12 1113 weeks. Metabolites exhibiting statistically significant changes are highlighted (light yellow). 1114 The data is presented as raw abundances corrected for sample weight. Enzymes associated 1115 with these metabolites, which showed significant differences in the levels of phosphorylated 1116 amino acids based on the analysis presented in Figure 5I, are indicated in red. Red arrows near 1117 highlighted enzymes indicate increased phosphorylation at specific amino acid residues, while 1118 blue arrows indicate reduced phosphorylation at those respective residues. (E) qPCR analysis 1119 was performed to assess Pck1 mRNA levels in the livers of $Ptprk^{-}$ and $Ptprk^{+/+}$ mice. (F) A 1120 pyruvate tolerance test was conducted in mice fed HFHFHCD for 12 weeks after overnight 1121 fasting to assess their gluconeogenic capacity in response to pyruvate administration. 1122 Statistical significance is indicated as p<0.05, p<0.01, p<0.01. 1123



1124

1125 Figure 7 – Influence of PTPRK in hepatocellular carcinoma (HCC) development. (A) 1126 RPTP mRNA expression profiling was conducted on human livers from dataset GSE164760 1127 encompassing various stages of obesity-associated liver dysfunction and 1128 hepatocarcinogenesis, including normal liver, non-alcoholic steatohepatitis (NASH), cirrhotic 1129 livers, peritumour regions, and hepatocellular carcinoma (HCC) tumours. (B) Based on the

1130 expression levels of PTPRK, the samples were categorized as high or low, and the normalized 1131 counts of genes involved in glycolysis/gluconeogenesis and lipogenesis were analysed. (C) 1132 KEGG pathway enrichment analysis was performed specifically on tumour samples with low 1133 or high PTPRK expression levels. (D-I) Male and female Ptprk^{-/-} and Ptprk^{+/+} mice were 1134 subjected to diethylnitrosamine (DEN) induction of liver cancer at 2 weeks of age. Tumour 1135 development was assessed when the animals reached 40 weeks of age. Measurements of body 1136 weight, fat body mass, liver weight, and fat liver mass were recorded (D, G). Tumours on the 1137 hepatic lobes were quantified and measured, considering tumours bigger than 0.2mm. The 1138 results are presented as the number of tumours per liver and the average tumour size (E, H). 1139 Microscopic tumours were quantified through histological analysis. Representative H&E-1140 stained sections showing nodules (F, I). (J, K) Human hepatoma cell lines HepG2 (J) and 1141 HLE (K) were transfected with siRNAs targeting PTPRK or siRNA control, and colony-1142 forming capacity was assessed. Immunoblot analysis confirmed the efficiency of transfection, 1143 and crystal violet staining was employed to visualise and quantify the colonies. Statistical 1144 significance is indicated as **p*<0.05, ***p*<0.01, ****p*<0.001. 1145