

Universidade de Lisboa
Faculdade de Medicina de Lisboa



**Brain-derived neurotrophic factor and adenosine
signalling on amyloid- β peptide induced toxicity:
impact on hippocampal function**

André Jerónimo Santos

Doutoramento em Ciências Biomédicas
Especialidade em Neurociências

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Tese orientada por Professora Maria José Diógenes

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Abbreviations list

5-FU	5-Fluoracil
Aβ	Amyloid-beta
A₁R	Adenosine A1 Receptor
A_{2A}R	Adenosine 2A Rreceptor
A_{2B}R	Adenosine 2B Receptor
A₃R	Adenosine 3 Receptor
aCSF	Artificial Cerebrospinal Fluid
AD	Alzheimer's Disease
ADA	Adenosine Deaminase
ADDLs	A β -derived Diffusible Ligands
ADK	Adenosine Kinase
AFM	Atomic Force Microscopy
AICD	APP Intracellular Domain
AIF	Apoptosis-Inducing Factor
ALLN	N-Acetyl-Leu-Leu-Nle-CHO
AMP	Adenosine 5'-Monophosphate
AMPA	Alpha-Amino-3-Hydroxy-5-Methyl-4-Isoxazolepropionic Acid
AMPA R	AMPA Receptor
ANOVA	Analysis Of Variation
AOAA	Aminooxyacetic Acid
Apaf-1	Apoptotic protease activating factor 1
APH1	Anterior Pharynx-defective 1
APOE	Apolipoprotein E
APP	Amyloid Precursor Protein
ATP	Adenosine Triphosphate
BACE1	Beta-site APP Cleaving Enzyme 1
BAD	Bcl-2-Associated Death promoter
BAK	Bcl-2 homologous Antagonist/Killer
BBB	Blood-Brain Barrier
Bcl-XL	B-cell lymphoma-extra large
BDNF	Brain-Derived Neurotrophic Factor
CA1	Cornu Ammonis area 1
CaMK	Ca ²⁺ -Calmodulin-regulated Kinase
CaMKK	Calcium/calmodulin-dependent protein kinase kinase
cAMP	Cyclic Adenosine Monophosphate
CaMPDB	Calpain for Modulatory Proteolysis Database
CANP	Calcium-activated Neutral Proteinase
CAPN1	Calpain-1 catalytic subunit
CAPN2	Calpain-2 catalytic subunit
CAPNS1	Calpain small subunit 1
CAST	Calpastatin
CDK5	Cyclin-dependent kinase 5
cDNA	Complementary DNA
CNS	Central Nervous System

CRE	cAmp-Responsive Element
CREB	CRE binding protein
CRF	Corticotropin-Releasing Factor
CSF	Cerebrospinal Fluid
CTR	Control
CypD	Cyclophilin D
DAG	Diacylglycerol
DEVD-pNA	Ac-Asp-Glu-Val-Asp-pNA
DIV	Days <i>In-Vitro</i>
DMSO	Dimethylsulphoxide
DNA	Deoxyribonucleic Acid
DTT	1,4-dithiothreitol
EC	Enzyme Classification
EDTA	Ethylenediaminetetraacetic Acid
EF-hand	Helix-loop-helix structural domain
EGF	Epidermal Growth Factor
eIF4E	Initiation Factor 4E
E-LTP	Early LTP
EphB2	Ephrin type B receptor 2
ER	Endoplasmic Reticulum
ERK	Extracellular Signal-Regulated Kinase
FDG	Fluorodeoxyglucose
fEPSP	Field Excitatory Postsynaptic Potential
FL	Full-length
G0/Gi	Gi alpha subunit G protein
Gab1/2	Grb-associated binding protein
GABA	Gamma-Aminobutyric Acid
GAP-43	Growth Associated Protein 43
GAPDH	Glyceraldehyde 3-phosphate Dehydrogenase
GDP	Guanosine 5'-Diphosphate
GFAP	Glial Fibrillary Acidic Protein
GluR	Glutamate receptor
GPCR	G-Protein-Coupled Receptor
Grb2	Growth factor receptor-bound protein
GSK3	Glycogen Synthase Kinase 3
GTPase	Guanosine-5'-triphosphate hydrolase
HBSS	Hanks' Balanced Salt Solution
HEPES	N-2-Hydroxyethylpiperazine-N'-2-Ethanesulfonic Acid
HFS	High Frequency Stimulation
HRP	Horseradish Peroxidase
IAPs	Inhibitors of Apoptosis
ICD	Intracellular Domain
IgG	Immunoglobulin G
IP₃	Inositol 1,4,5-triphosphate
IP3R	IP ₃ Receptor
ISF	Interstitial Fluid
IκB	Inhibitor of kappa B
JNK	C-Jun N-Terminal Kinase

KHR	Krebs-Henseleit Rinsing
KW6002	Istradefylline
LDH	Lactate Dehydrogenase
LilrB2	Leukocyte immunoglobulin-like receptor B2
LL-37	Human Cathelicidin
L-LTP	Late phase of LTP
LTD	Long Term Depression
LTP	Long-Term Potentiation
MAP	Microtubule-Associated Protein
MAPK	Mitogen-Activated Protein Kinase
MCI	Mild Cognitive Impairment
MDL28170	N-[N-[(Phenylmethoxy)carbonyl]-L-valyl]-phenylalaninal
MEK	Mitogen-activated protein kinase kinase
MG132	Z-Leu-Leu-Leu-CHO
mGluR	Metabotropic Glutamate Receptor
MPTP	1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine
mPTP	Mitochondrial Permeability Transition Pore
MRI	Magnetic Resonance Imaging
mRNA	Messenger Ribonucleic Acid
NAIP-1	Neuronal Inhibitors of Apoptosis Protein 1
NF-κB	Nuclear Factor Kappa-light-chain-enhancer of activated B cells
NGF	Nerve Growth Factor
NMDAR	N-Methyl-D-Aspartate Receptor
NT	Neurotrophin
NTRK2	Neurotrophin Tyrosine Kinase 2
p75NTR	P75 Neurotrophin Receptor
PBS	Phosphate Buffered Saline
PC12	Pheochromocytoma cell line
PCR	Polymerase Chain Reaction
PEN2	Presenilin enhancer 2
PET	Positron Emission Tomography
PI3K	Phosphatidylinositol 3-Kinase
PiB	Pittsburgh compound B
PIP₂	Phosphatidylinositol-4,5-bifosphate
PIP3	Phosphatidylinositol-3,4,5-trisphosphate
PKA	Protein Kinase A
PKC	Protein Kinase C
PKMζ	Atypical Protein Kinase C Isoform
PLC	Phospholipase C
PMSF	Phenylmethylsulfonyl Fluoride
pNA	p-nitroaniline
PPF	Pair-pulse facilitation
ProBDNF	Precursor of BDNF
PrPc	Cellular Prion Protein
PS1	Presenilin-1
PSD	Postsynaptic Density
PSEN	Presenilin gene
p-Tau	Phosphorylated tau protein

PTB	Phosphotyrosine Binding
PVDF	Polyvinylidene Difluoride
qPCR	quantitative Polymerase Chain Reaction
RAGE	Receptor For Advanced Glycation End products
RhoGDI	Rho GDP-dissociation inhibitor
RIPA	Radioimmunoprecipitation Assay Buffer
RNA	Ribonucleic Acid
ROS	Reactive Oxygen Species
RSK	Ribosomal S6 Kinase
RTK	Receptor Tyrosine Kinase
RT-PCR	Reverse Transcription-Polymerase Chain Reaction
SBDP	Spectrin Breakdown Product
SCH-58261	A _{2A} R antagonist
SDS-PAGE	Sodium Dodecyl Sulfate-Polyacrylamide gel electrophoresis
SEM	Standard Error Of The Mean
SH2	Src-Homology 2
siRNA	small interfering RNA
SOS	Son of Sevenless
TBS	Theta-burst Stimulation
TBS-T	Tris-buffered Saline-Tween 20
ThT	Thioflavin T
TLR2	Toll-like Receptor 2
TM	Transmembrane
TNF	Tumor Necrosis Factor
tPA	Tissue Plasminogen Activator
Trk	Tropomyosin-related Kinase
TrkB-FL	TrkB full-length
TrkB-T'	TrkB truncated (calpain-generated)
TrkB-T1	TrkB truncated isoform 1
TrkB-Tc	TrkB truncated (total pool)
VGCC	Voltage-gated Calcium Channels
zVAD-FMK	Z-Val-Ala-Asp(OMe)-FMK

Resumo

O factor neurotrófico derivado do cérebro (*Brain-derived neurotrophic factor*- BDNF) e o seu receptor de alta afinidade, TrkB-FL, desempenham um papel central no sistema nervoso, dado que promovem suporte trófico aos neurónios e que regulam a transmissão e plasticidade sinápticas.

A sinalização mediada pelo BDNF encontra-se diminuída na doença de Alzheimer (*Alzheimer's disease* -AD), uma doença neurodegenerativa na qual ocorre acumulação do péptido beta amilóide (*amyloid-beta* -A β). Apesar dos mecanismos envolvidos na redução da sinalização mediada pelo BDNF na AD não serem totalmente conhecidos, o restabelecimento das acções do BDNF tem sido considerado como uma estratégia promissora para a terapêutica desta doença.

Na última década tornou-se claro que a maioria das acções sinápticas do BDNF, incluindo as acções na transmissão e plasticidade sinápticas e também na libertação de neurotransmissores, é dependente da activação dos receptores A_{2A} da adenosina (A_{2A}R). Contudo, o uso de antagonistas dos A_{2A}R tem sido apontado como uma possível estratégia terapêutica para o tratamento da AD.

Dada a falta de evidências que clarifiquem os mecanismos envolvidos nas alterações da sinalização mediada pelo BDNF e o conhecimento de que a activação dos A_{2A}R facilita a maioria das acções sinápticas do BDNF, o objectivo principal desta tese foi estudar o impacto dos péptidos A β e dos A_{2A}R na sinalização mediada pelo BDNF.

Este trabalho revelou que, em culturas primárias de neurónios corticais, o A β aumenta os níveis de mRNA dos receptores TrkB truncados, TrkB-T1 e TrkB-T2, sem afectar os níveis de mRNA dos receptores TrkB completos, TrkB-FL. Por outro lado, verificou-se que o A β aumenta os níveis proteicos do conjunto de receptores TrkB truncados e que diminui os níveis proteicos dos receptores TrkB-FL, por um mecanismo independente da proliferação glial e da activação de caspases. Foi ainda possível concluir que o A β induz a clivagem, mediada por calpaínas, dos receptores TrkB-FL, esta clivagem dá-se após o local de ligação da Shc e antes do início do domínio de cinase de tirosina, pelo que origina um novo receptor TrkB truncado (TrkB-T'), contendo o local de ligação à Shc, e um novo fragmento intracelular (TrkB-*intracellular domain*- ICD), contendo a totalidade do domínio da cinase. No entanto, a presença destes fragmentos, não mostrou afectar a fosforilação do receptor TrkB-FL induzida pela exposição ao BDNF. Interessantemente, foi possível detectar o fragmento TrkB-ICD em uma amostra, *post-mortem*, de cérebro humano. Mostrou-se também que a inibição das calpaínas previne as alterações dos níveis proteicos das isoformas do TrkB, induzidas pelo A β , sem afectar as alterações ao nível do mRNA do TrkB. Por outro lado, este trabalho revelou que o

BDNF exógeno reduz a activação da caspase-3 e das calpaínas induzida pelo A β , de uma forma independentemente dos A_{2A}R.

Em fatias de hipocampo de ratos adultos, este trabalho mostrou que o A β diminui as acções do BDNF na plasticidade sináptica, nomeadamente na potenciação de longa duração (*Long-term potentiation*, LTP) na área CA1 do hipocampo, bem como no seu efeito sobre libertação de neurotransmissores (GABA e glutamato) de sinaptosomas. Notavelmente, o inibidor das calpaínas, MDL28170, mostrou restabelecer os efeitos do BDNF, na presença do péptido A β , tanto na plasticidade sináptica como na libertação de neurotransmissores.

Este trabalho permitiu ainda concluir que o bloqueio crónico dos A_{2A}R, *in-vivo*, através da administração de um antagonista selectivo (KW-6002), previne o efeito potenciador do BDNF na LTP, registada *ex-vivo* na área CA1 do hipocampo, e que diminui os níveis de mRNA e de proteína do receptor TrkB-FL, no hipocampo de rato.

Em suma, o presente trabalho revelou que o péptido A β induz a clivagem dos receptores TrkB-FL, mediada pelas calpaínas, e que bloqueia as acções mediadas pelo BDNF na plasticidade sináptica e na libertação de GABA e glutamato por um mecanismo dependente da actividade das calpaínas. Se por um lado, o efeito do BDNF na plasticidade sináptica é perdido aquando da inibição crónica dos A_{2A}R, o efeito protector desta neurotrofina contra a toxicidade induzida pelo A β mostrou-se independente da activação dos A_{2A}R.

Palavras-Chave:

Doença de Alzheimer; neurodegeneração, neurotrofinas, potenciação de longa duração, libertação de neurotransmissores, TrkB, KW-6002, istradefylline, neuroprotecção

Abstract

Brain-derived neurotrophic factor (BDNF) and its high-affinity full-length receptor, TrkB-FL, play a central role in the nervous system by providing trophic support to neurons and by regulating synaptic transmission and plasticity.

BDNF signalling is impaired in Alzheimer's disease (AD), a neurodegenerative disorder characterized, among other features, by the accumulation of the amyloid- β ($A\beta$) peptide. Although the mechanisms implicated in the reduction of BDNF signalling in AD were not clarified, the reestablishment of BDNF actions is considered as a promising strategy for AD treatment.

In last decade it became clear that most of synaptic actions of BDNF, including the ones upon synaptic transmission, plasticity or upon neurotransmitter release, are fully dependent on adenosine A_{2A} receptors ($A_{2A}R$) activation. However, evidences indicate that $A_{2A}R$ antagonists can prevent the deficits in AD animal models.

Given the lack of data clarifying the mechanisms behind the changes on BDNF signalling, namely changes on TrkB receptors, and the knowledge that $A_{2A}R$ activation facilitates most of BDNF synaptic actions, the main goal of this project was to study the impact of $A\beta$ peptides and $A_{2A}R$ on BDNF signalling.

This work revealed that in rat primary neuronal cultures $A\beta$ selectively increases mRNA levels for the truncated TrkB-T1 and TrkB-T2 isoforms without affecting TrkB full-length (TrkB-FL) mRNA levels. Moreover, $A\beta$ increases protein levels of total pool of truncated TrkB receptors (TrkB-Tc) and decreases TrkB-FL protein levels. This effect is explained by the $A\beta$ -induced calpain-mediated cleavage on TrkB-FL receptors, downstream of Shc binding site, which results in the formation of a new truncated TrkB receptor (TrkB-T') and a new intracellular fragment (TrkB-ICD), which is also detected in *post-mortem* human brain samples. In hippocampal slices it was observed that $A\beta$ impairs BDNF function in a calpain-dependent way, upon modulation of GABA and glutamate release from hippocampal nerve terminals, and upon modulation of long-term potentiation (LTP). Finally, the exogenous BDNF strongly reduces the $A\beta$ -induced activation of caspase-3 and calpain in neuronal cultures, an effect not affected by $A_{2A}R$ agonist or antagonist.

Moreover, for the first time it was shown that chronic *in vivo* blockade of $A_{2A}R$ by a selective antagonist, prevents the facilitatory action of BDNF upon *ex-vivo* CA1 hippocampal LTP and decreases both mRNA and protein levels of the TrkB-FL receptor in rat hippocampus.

In conclusion, the present work shows that $A\beta$ induces a TrkB-FL cleavage mediated by calpain and impairs BDNF-mediated effects in synaptic plasticity and neurotransmitter release in a calpain-dependent way. While the BDNF action upon synaptic plasticity is abolished under

chronic *in vivo* A_{2A}R blocking conditions, the protective actions of this neurotrophin against A β toxicity were found to be dependent on A_{2A}R activation.

Keywords:

Alzheimer's disease, neurodegeneration, neurotrophins, long-term potentiation, neurotransmitter release, TrkB, KW-6002, istradefylline, neuroprotection

1. Introduction

1.1. *Neurotrophins*

Neurotrophins (NTs) are a closely related group of secreted proteins that promote growth, survival and differentiation of developing neurons and provide trophic support and regulate synaptic plasticity in mature neurons [1]. The first neurotrophin was discovered in 1949, by Rita Levi-Montalcini. After a transplantation of a rat sarcoma tumour into chicken embryos she observed an increased growth and a hypertrophy of sensory and sympathetic neurons [2]. This observation led to the postulation that the tumour was able to release a soluble factor which induced the abnormal neuronal growth and differentiation. Later, with the collaboration of Stanley Cohen, the soluble factor was isolated and named as nerve growth factor (NGF). These findings were rewarded with Nobel Prize in physiology and medicine in 1986. After the discovery of NGF, more neurotrophins were identified in vertebrates, namely the Brain-derived neurotrophic factor (BDNF), Neurotrophin-3 (NT3) and NT-4 [3-5].

1.1.1. Neurotrophin release

Neurotrophins are initially synthesised as a precursor form (pro-neurotrophin) and secreted as homodimeric proteins [6, 7]. Pro-neurotrophins can be subsequently cleaved intracellularly by furin, or extracellularly by plasmin to produce the mature form (neurotrophins). Intracellular pro-neurotrophins can be released after the cleavage of the pro-domain (released as a mature neurotrophin), or can be released as an unprocessed pro-neurotrophin [6]. The pro-neurotrophins and mature neurotrophins preferentially activate different type of receptors, p75NTR and Trk, respectively, which triggers different signalling pathways producing opposite cellular responses. Neurotrophins can be constitutively released, due to the spontaneous fusing of vesicles with plasma membrane, or can be released in a regulated-way dependent on neuronal activity. In particular, high frequency synaptic activity, such as theta-burst stimulation (TBS), increases the synaptic levels of mature BDNF by either increasing its release and the extracellular plasmin-dependent cleavage of pro-BDNF into mature BDNF. In opposition, low frequency stimulation, which induces synaptic depression, increases the release of pro-BDNF which remains uncleaved at the synapse (see Figure 1.1) [6, 8].

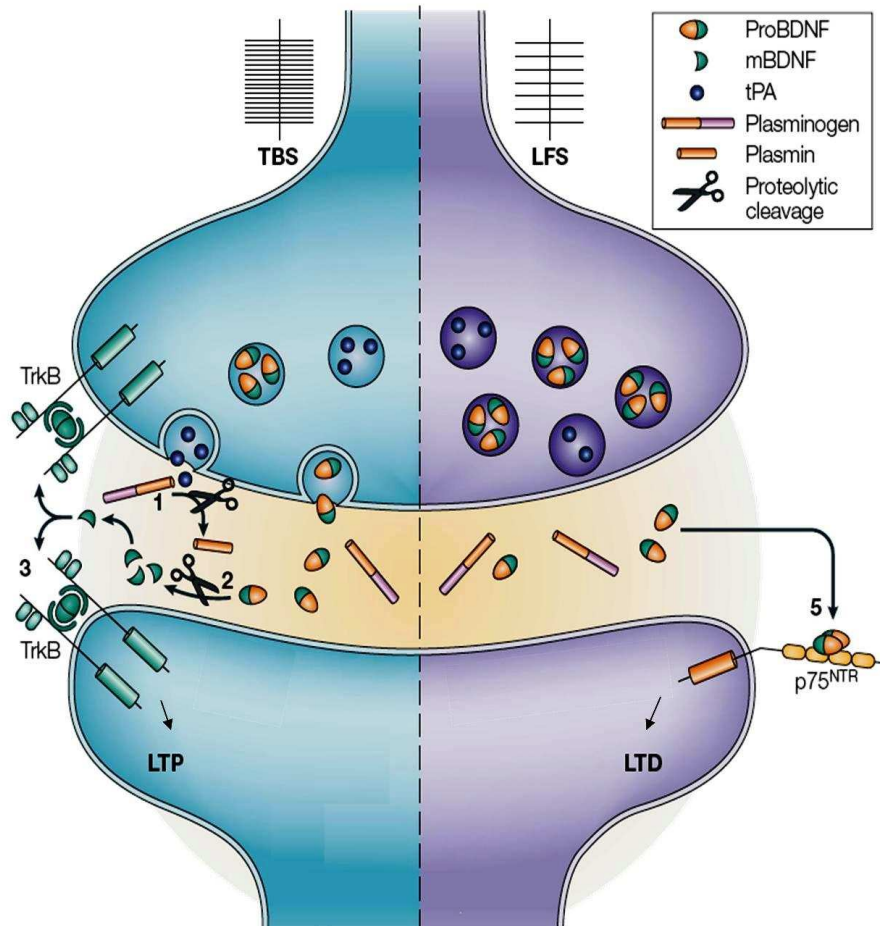


Figure 1.1 – Regulation of BDNF release upon synaptic activity.

Left: In response to theta-burst stimulation (TBS), tissue plasminogen activator (tPA) and proBDNF are released into synaptic cleft. 1) Then, tPA cleaves plasminogen producing the active protease plasmin. 2) Plasmin cleaves proBDNF producing the mature BDNF. 3) BDNF then binds to its high-affinity receptor (TrkB-FL) triggering multiple intracellular signalling pathways which in turn contribute to long-term potentiation (LTP). Right: During low-frequency stimulation (LFS) proBDNF is secreted into the synapse and remains uncut in the synapse. Uncleaved proBDNF binds to its high-affinity receptor (p75^{NTR}) and facilitates the induction of long-term depression (LTD). Figure adapted from [8].

1.1.2. Neurotrophin receptors

The biological actions of neurotrophins are mediated by the activation of their cognate tropomyosin-related kinase receptor (TrkA, TrkB or TrkC) and by the activation of the common p75 neurotrophin receptor (p75^{NTR}), which has been shown to modulate the affinity and selectivity of Trk activation [9]. Trk receptors are members of receptor tyrosine kinase (RTK) superfamily and promote neuronal survival and plasticity, while p75^{NTR} is a member of tumour necrosis factor (TNF) receptor superfamily and can promote neuronal death under certain circumstances [1]. TrkA is the cognate receptor for NGF [10, 11], while TrkB was identified as the receptor for BDNF and NT-4/5 [12, 13], and TrkC as the receptor for NT-3 [14].

The Trk receptors and p75^{NTR} receptor can function synergistically, antagonistically or independently of each other [8]. The mature neurotrophins bind with high affinity to Trk receptors, and p75^{NTR} may act synergistically as a co-receptor [15]. In opposition, the pro-neurotrophins bind with high affinity to the p75^{NTR} with Sortilin acting as a co-receptor. The effects of neurotrophins upon neuronal survival, differentiation and synaptic plasticity are mediated by the Trk receptors system [16], while the opposing effects of pro-neurotrophins, such as cell death and decreased synaptic function, are mediated by p75^{NTR} and Sortilin complex [17-19].

All Trk receptors share a significant sequence homology and a conserved domain organization. The extracellular region of Trk receptors are composed by a leucine rich domain flanked by two cysteine rich regions. Under those domains, and prior to the transmembrane region, there are two immunoglobulin-like domains which define the ligand binding specificities of the receptor [20, 21]. Intracellularly, the Trk receptors are composed by a juxtamembrane sequence that includes the Shc binding site, a tyrosine kinase domain and a C-terminal tail containing the phospholipase C gamma (PLC γ) binding site [21].

Considering the focus of the present thesis, henceforth only BDNF and its receptor TrkB will be explored in more detail.

1.1.3. Truncated TrkB receptors

The TrkB gene (*NTRK2*) can originate a full-length TrkB receptor (TrkB-FL) and, by an alternative splicing mechanism, it also can originate truncated receptors (TrkB-T1, TrkB-T2 and TrkB-T-Shc) [22-24]. The TrkB-T1 and TrkB-T2 have a unique short C-terminal tail (T1 with 11 aminoacid residues and T2 with 9 aminoacid residues) [22], while the TrkB-T-Shc is a human brain-specific isoform which lacks the tyrosine kinase domain but contains the Shc

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binding site. The truncated TrkB receptors cannot activate the canonical signalling pathways of full-length receptors, since they lack the intracellular kinase domain [24]. Additionally, truncated TrkB receptors can inhibit the BDNF effects by acting as dominant negative inhibitors of the TrkB-FL receptors [23, 25-27]. Indeed, multiple studies have shown that increased levels of truncated TrkB receptors have a negative impact in neuronal function and survival in both artificial and pathological conditions [28-30].

While the TrkB-FL is the most abundant isoform expressed in the early developmental period, in the post-natal period, and throughout aging, the truncated TrkB-T1 receptor became the most predominant TrkB isoform expressed in forebrain [31, 32]. TrkB-T1 can be expressed by neurons and astrocytes depending on the brain region. Accordingly, TrkB-T1 is highly expressed in astrocytes from pre-frontal cortex and subcortical white matter, but it is not present in astrocytes of the cerebellum and motor and visual cortex [33].

One possible biological role of TrkB-T1 is to regulate extracellular levels and localization of BDNF in the brain. When extracellular BDNF is abundant, TrkB-T1 binds and sequesters the available BDNF, and it is internalized along with its ligand. After BDNF and TrkB-T1 internalization, the BDNF can be degraded in lysosomes or can be sorted to another cellular location and be released by exocytosis [34, 35]. Although the *in-vivo* function of truncated receptors remains unknown, it was shown that TrkB-T1 deficient mice have increased anxiety in association with morphological abnormalities in dendrites of basolateral amygdale neurons. The same study showed that the depletion of TrkB-T1 can also partially rescue the BDNF haploinsufficiency phenotype, further suggesting that TrkB-T1 at physiological levels may regulate and attenuate TrkB-FL signalling [36]. Despite the lack of intracellular kinase domain, some studies have shown that TrkB-T1 receptor activates distinct signalling cascades in astrocytes. In fact, TrkB-T1 alone can promote Ca^{2+} release from the endoplasmic reticulum (ER) in astrocytes, through the activation of G-protein and PLC γ , with consequent inositol-1,4,5-triphosphate (IP3) formation (see Figure 1.2) [37]. Moreover, TrkB-T1 can bind to Rho GDP dissociation inhibitor I (RhoGDI1) and regulate actin cytoskeleton and glial morphology by modulating RhoGTPase activity [38].

1.1.4. TrkB-mediated signalling cascades

The binding of BDNF to TrkB receptor homodimers, activates the intrinsic tyrosine kinase domain of the receptor promoting an auto-phosphorylation of specific tyrosine residues located in the intracellular domain of TrkB [39, 40]. In particular, the binding of BDNF to TrkB results in a fast phosphorylation of 5 tyrosine residues of the receptor, within seconds to minutes. These phosphorylated residues include 3 tyrosines in the kinase activation loop of

TrkB (Y701, Y705 and Y706) which regulate the kinase activity, and 2 tyrosines residues (Y515 and Y816) responsible for the activation of signalling cascades [41]. Phosphorylation of Y515 of TrkB (or equivalent residues in other Trks receptors) forms an adaptor binding site that couples the receptor to phosphatidylinositol-3 kinase (PI3K) and mitogen-activated protein kinases (MAPK) signalling pathways, while phosphorylation of Y816 recruits and initiates PLC γ signalling pathway (see Figure 1.2) [42].

PI3K / Akt signalling pathway:

When phosphorylated at Y515, TrkB receptors recruit Src homology 2 domain containing (Shc) adaptor protein through its phosphotyrosine-binding (PTB) domain [43]. In turn, Shc protein associates with Growth factor receptor-bound protein 2 (Grb2), Grb-associated binding protein (Gab1/2) and son of sevenless (SOS), culminating in the transient activation of small GTPases, such as Ras. Active Ras stimulates signalling through c-Raf/MEK/ERK (MAPK pathway) and class I PI3 kinase (PI3K) pathway (see Figure 1.2) [44]. Activated PI3K phosphorylates phosphatidylinositol-4,5-bisphosphate (PIP₂), producing the second messenger phosphatidylinositol-3,4,5-trisphosphate (PIP₃), which in turn stimulates the serine-threonine kinase Akt.

The signalling through the PI3K and Akt pathway are necessary and sufficient for the survival of certain populations of neurons [45]. The Akt kinase modulates the function of several substrates involved in the regulation of cell survival and growth. Akt phosphorylates and inactivates several pro-apoptotic proteins, such as procaspase-9 and Bcl2-associated death promoter (BAD), as well as Forkhead 1 transcription factor [46, 47]. Activated Akt can also inactivate GSK-3 β , a kinase which has been implicated in neuronal apoptosis and inhibition of axon growth [48, 49]. On the other hand, Akt activates transcription factors that regulate the expression of anti-apoptotic proteins, such as cyclic AMP response element-binding protein (CREB) and nuclear factor- κ B (NF κ B) [50].

Ras/MAPK pathway:

As mentioned above, the binding of Shc adaptor protein to the phosphorylated Y515 of TrkB activates the Ras protein. Activated Ras stimulates the MAPK/ERK kinase (MEK) which in turn activates the extracellular signal regulated-kinases (ERK). The ERK/MAPK signalling cascade activates transcription factors such as CREB [51], which in turn control the expression of several proteins implicated in survival, growth and differentiation of neurons. ERK activates, by phosphorylation, the ribosomal s6 kinase (RSK), which in turn further activates transcription factors, such as CREB, c-Fos and NF- κ B [52-54]. Additionally, BDNF enhances protein translation in neurons through the Erk/MAPK pathway, by phosphorylating eukaryote initiation factor 4E (eIF4E) and its binding protein (eIF4E-binding protein-1) [55].

PLC γ pathway:

Phosphorylated Y816 of TrkB directly recruits PLC γ 1 which in turn is phosphorylated and activated by the TrkB kinase domain. Activated PLC γ 1 hydrolyses PIP₂ and generates inositol triphosphate (IP3) and diacylglycerol (DAG) [56]. While DAG activates DAG-regulated protein kinase C (PKC) isoforms, the IP3 promotes the release of Ca²⁺ from intracellular stores, such as ER, through activation of IP3 receptor (IP3R). The increase in cytosolic Ca²⁺ activates diverse enzymes, including Ca²⁺-regulated PKC isoforms and Ca²⁺-calmodulin-dependent kinases (CaMKII, CaMKK and CaMKIV). PLC γ pathway is crucial for synaptic plasticity, since mice with point mutations on Y816 of TrkB, but not on Y515, have impaired long-term potentiation. The PLC γ also promotes the activation of CREB transcription factor through CaMKIV, and point mutation on Y816 strongly impairs CREB activation [57].

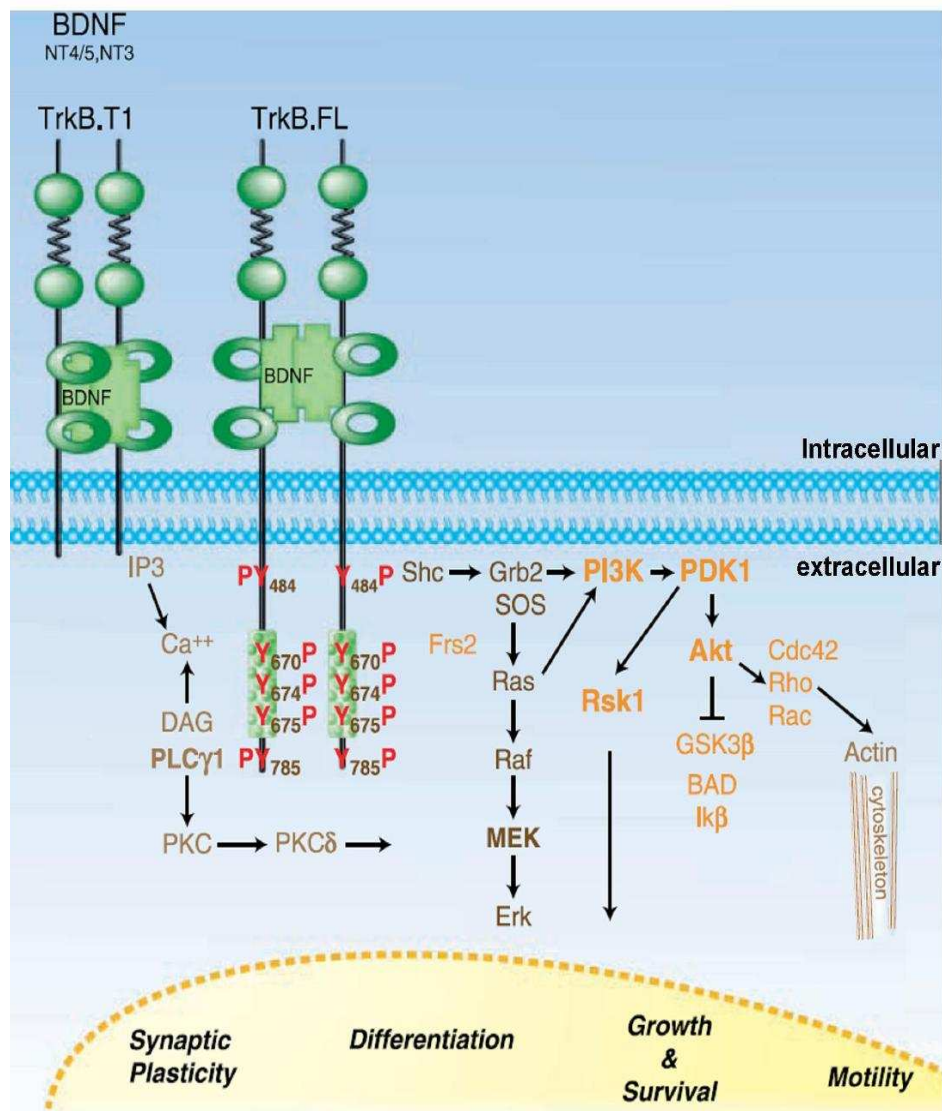


Figure 1.2 – Schematic representation of TrkB receptors signalling pathways.

BDNF binds to the extracellular region of TrkB receptor, which is equal in both TrkB truncated T1 and full-length (FL) receptor. After the binding of homodimeric BDNF to homodimeric TrkB-FL, the kinase domain of the receptor became active and trans-phosphorylates the receptor in the tyrosine 515 and 816 (also named as Y484 and Y785, respectively, when the TrkB signal peptide is ignored for the aminoacid counting). Phosphorylated tyrosine 515 recruits the binding of Shc adaptor protein, which in turn lead to the activation of Ras/MEK/ERK (MAPK pathway) and PI3K/Akt signalling pathway. PLCγ signalling pathway is triggered after the binding of PLCγ to phosphorylated tyrosine 816 of TrkB. The signalling mediated by TrkB-FL promotes transcriptional programs that regulate synaptic plasticity, neuronal differentiation, growth and survival and motility. TrkB-T1 lacks the tyrosine kinase domain, however, evidences show that its activation can trigger Ca²⁺ waves in astrocytes. Figure adapted from [58]

1.1.5. BDNF and long-term potentiation

Long-term potentiation (LTP) is a long-lasting increase in synaptic strength induced by some patterns of synaptic stimulation, such as high-frequency stimulation (HFS) or TBS, and it is commonly accepted as the neurophysiological basis for learning and memory [59, 60]. In opposition, long-term depression (LTD) is a long-lasting depression on synaptic transmission after a period of low-frequency stimulation of the synapse. Thus, synaptic plasticity is the ability of synapses to change their efficacy depending on their activity.

The LTP on Cornu Ammonis 1 (CA1) area in the hippocampus is dependent on NMDAR, a glutamate receptor permeable to Ca^{2+} ions, in which the pore is usually occluded by Mg^{2+} at a resting membrane potential. During high-frequency stimulation the synaptic release of glutamate depolarizes the post-synaptic terminal, through an AMPAR-dependent Na^+ influx, and allows the removal of Mg^{2+} and the consequent activation of the NMDAR by the glutamate in the synapse. The NMDAR-mediated influx of Ca^{2+} at the post-synaptic terminal activates Ca^{2+} -dependent proteins, such as CaMKII, which trigger intracellular cascades necessary for LTP induction. The increased cytosolic Ca^{2+} on post-synaptic terminal also triggers the AMPARs trafficking to post-synaptic density (PSD), resulting in a greater post-synaptic response to glutamate [61]. LTP is classically divided into early LTP (E-LTP) and late LTP (L-LTP). E-LTP requires modifications in existing proteins, whereas L-LTP is only induced by strong stimulation and requires *de-novo* proteins synthesis and structural modifications on synapses [62]. Despite years of intensive investigation on hippocampal LTP induced by HFS, only recently it was proven that learning actually induces LTP in the hippocampus of behaving animals [63, 64].

The first evidence that neurotrophins are important for synaptic function arise in early 1990s, when it was discovered that exogenous BDNF or NT-3, but not NGF, enhances synaptic activity on neuromuscular synapses [65]. Later, it was found that BDNF or NT-3, but not NGF, increases the basal synaptic transmission in hippocampal CA1 area [66]. The finding that BDNF might also have a role in hippocampal LTP came from experiments performed in a BDNF-deficient mice. In this mice model, a significant impairment on hippocampal LTP magnitude was detected [67]. Interestingly, LTP was restored after reintroduction of BDNF gene in CA1 area by a virus-mediated gene transfer [68], or by exogenous addition of BDNF [69]. Several other works have been demonstrating the central role of BDNF in synaptic plasticity. Accordingly, intrahippocampal infusion of BDNF in living rats was shown to elicit long-term synaptic potentiation [70]; the application of exogenous BDNF to hippocampal slices from young mice enhanced the L-LTP induced by tetanic stimulation, which in the absence of BDNF only elicit a short-term potentiation (E-LTP) [71]; the scavenger of endogenous BDNF by

soluble TrkB-IgG fusion protein or by specific antibodies resulted in a reduced hippocampal LTP magnitude [71, 72] not seen for NT-3 or NT-4 [72]. The TrkB or BDNF null mice have severe phenotype and die between birth and weaning age, hampering the study of these proteins in LTP in an adult stage. However, a conditional TrkB knockout mouse, where the gene deletion was restricted to the forebrain neurons in the post-natal period, showed impaired LTP on CA1 hippocampal synapses, and impaired learning behaviour in the adult stage, without gross phenotypical aberrations [73]. Together, these evidences clearly showed that endogenous BDNF is required for normal LTP and learning, and that exogenous BDNF can induce or facilitate the LTP expression.

Other studies have provided mechanistic clues through which BDNF and TrkB activation facilitates LTP at glutamatergic hippocampal synapses (see Figure 1.3). Endogenous BDNF is released from glutamatergic synapses, in a Ca^{2+} -dependent way, in response to stimulus used to induce LTP, such as TBS (see Figure 1.1) [74, 75]. Released BDNF can facilitate LTP at excitatory CA1 synapses by increasing presynaptic release of glutamate, and by amplifying the postsynaptic response to this neurotransmitter [76]. In particular, BDNF increases the Ca^{2+} -dependent release of glutamate in cortical and hippocampal nerve terminals (synaptosomes) [77, 78] and in cultured hippocampal neurons [79]. The presynaptic stimulation of glutamate release by BDNF is mediated by a MAPK-dependent phosphorylation of the synaptic vesicle protein synapsin-I. In mice lacking the synapsin the effect of BDNF upon glutamate release is strongly attenuated [80]. On the other hand, BDNF, through its postsynaptic TrkB receptor, stimulates tyrosine kinase Fyn, which in turn phosphorylates the NMDAR and increases its activity [81, 82]. In cultured neurons, BDNF further modulates glutamatergic synapse at postsynaptic level, by increasing the levels and the trafficking of AMPAR to membrane [83, 84]. Moreover, exogenous BDNF, at nanomolar concentration, depolarizes and excites hippocampal and cortical neurons just as quickly and effectively as glutamate at a micromolar concentration [85]. In fact, BDNF induces a fast neuronal depolarization, in a TrkB dependent-way, by activating Na^+ channel $\text{Na}_v1.9$ allowing the influx of sodium ions [85, 86]. Consequently, the BDNF-induced depolarization activates voltage-gated Ca^{2+} channels (VGCC) evoking Ca^{2+} transients which are detectable in the dendrites and spines of hippocampal neurons, but not at presynaptic sites [87]. In this way, BDNF cooperates with NMDAR during LTP induction by promoting an additional influx of Ca^{2+} in the postsynaptic terminal. Thus, pairing a brief application of BDNF in dendrites and a weak burst of synaptic stimulation, elicit a fast and robust induction of LTP [87].

Interestingly, a recent study showed that acute or gradual increases in BDNF elicit distinct signalling and neuronal effects. While a gradual increase in BDNF concentration (slow perfusion rate) selectively facilitates LTP in hippocampal slices, a rapid increase in BDNF concentration (fast perfusion rate) increases the synaptic basal transmission instead [88]. This

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study highlighted the importance of the kinetics of TrkB activation, and explained, in part, some conflicting results in the literature, regarding the pre- and post-synaptic effects of BDNF.

On top of BDNF-mediated fast changes in synaptic efficacy, BDNF has also a crucial role in maintenance of late-phase LTP (L-LTP), synaptic consolidation and long-term memory storage [89, 90]. BDNF synthesis is found to be increased in hippocampal neurons 2-4 hours after L-LTP-inducing stimuli, such as strong TBS [91, 92]. Unlike E-LTP, the L-LTP expression is dependent on protein synthesis. Surprisingly, application of exogenous BDNF is able to rescue L-LTP in the presence of protein synthesis inhibitors [93]. This perplexing result was recently demonstrated to be dependent on PKM ζ , an atypical PKC isoform present in brain [94]. Weak TBS normally induce an E-LTP, which last less than 2 hours, and fail to elicit an L-LTP. However, when pairing BDNF perfusion and weak TBS, it produces a reliable L-LTP in CA1 area of hippocampus [93]. Moreover, mice lacking tissue plasminogen activator (tPA), a protease involved in the conversion of pro-BDNF into BDNF, have a selective deficit in L-LTP expression without affecting E-LTP in hippocampus [95]. Moreover, perfusion of BDNF in tPA null mice prevented the L-LTP impairment [93]. Indeed, evidences suggest that BDNF may trigger L-LTP by regulating local dendritic protein translation and concomitantly increasing synthesis of LTP-associated proteins, such as Arc, GluR1, CaMKII, PSD-95 among others. BDNF can also regulate actin cytoskeletal dynamics which are required for structural changes of synapses and L-LTP formation [96].

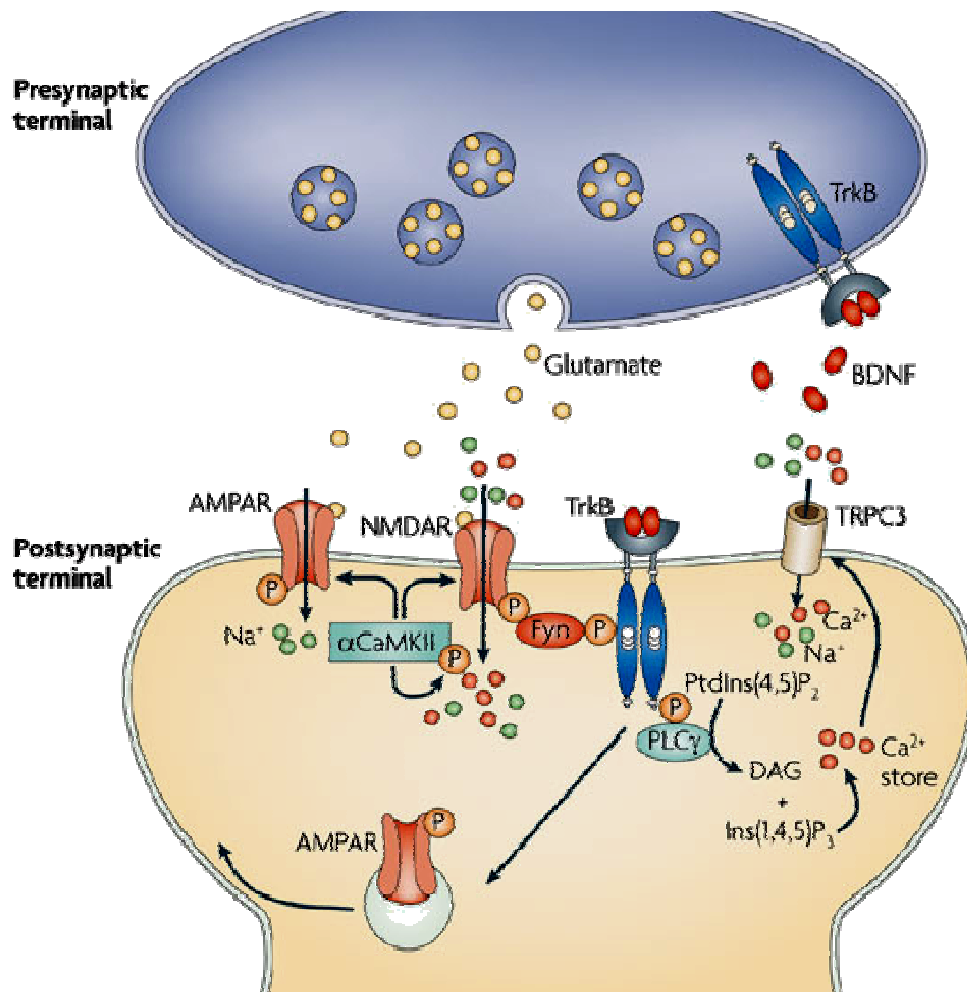


Figure 1.3 – Modulation of glutamatergic synapse by BDNF.

BDNF can enhance the transmission and plasticity of glutamatergic synapses. Presynaptic activation of TrkB-FL by BDNF increases the glutamate release. Postsynaptic activation of TrkB-FL increases the postsynaptic response to glutamate by distinct mechanisms: 1) TrkB induces the phosphorylation of NMDAR, through Fyn kinase, increasing its activity; 2) TrkB depolarizes the postsynaptic terminal by promoting the influx of cations through transient receptor potential channels (TRPC) which might facilitate the Ca²⁺ entry through NMDAR and voltage-gated channels and 3) TrkB modulates AMPAR expression and trafficking to the postsynaptic membrane. Figure adapted from [97].

1.1.6. Facilitation of BDNF synaptic actions by adenosine

Adenosine is a ubiquitous nucleotide that acts as an extracellular signalling molecule. Adenosine is a neuromodulator that regulates synaptic activity, by modulating the presynaptic neurotransmitter release, by depolarizing or hyperpolarizing the postsynaptic neuron or even by regulating glial cells activity. Overall, adenosine acts as a depressant of excitatory glutamatergic transmission and reduces excitability [98]. Extracellular adenosine can derive from the direct release of intracellular adenosine by equilibrative nucleoside transporters (ENT), or from catabolism of extracellular adenosine triphosphate (ATP) [99]. Adenosine can be released constitutively, or in an active-dependent manner through a calcium-dependent presynaptic release [100]. Extracellular adenosine has a short half-life time, since it is quickly reuptaked or converted to inosine or to adenosine monophosphate (AMP) by adenosine deaminase (ADA) or by adenosine kinase (ADK), respectively [99].

Extracellular adenosine exerts its actions through activation of four distinct G protein-coupled receptors (GPCR) namely, A_1 , A_{2A} , A_{2B} and A_3 receptors. Adenosine A_1 receptors (A_1R) are prevalent in the brain, being highly expressed in the cortex, cerebellum, hippocampus and spinal cord. A_1R and $A_{2A}R$ are high affinity receptors, with a K_d of 70 and 150nM, respectively [101]. A_1R are coupled to inhibitory G-proteins (G_0/G_i) which inhibit synaptic transmission by inhibiting cyclic adenosine monophosphate (cAMP) production [102]. In opposition, the $A_{2A}R$ are coupled to stimulatory G_s -proteins and potentiate synaptic transmission by increasing cAMP production [101, 102]. $A_{2A}R$ are mainly expressed in olfactory bulb and striatum, being also present in hippocampus at lower levels [103, 104]. Both $A_{2A}R$ and A_1R can be present in the same synapse, and activated simultaneously by adenosine [99]. Regarding the adenosine $A_{2B}R$ and A_3R , both have low affinity for adenosine ($K_d = 5$ and $6\mu M$, respectively) and are weakly expressed in CNS [98].

In addition to the modulatory actions of adenosine upon neurotransmitter release and synaptic plasticity, adenosine also modulates the actions of other modulators, such as neurotrophins [99]. The first direct evidence for the cross-talk between adenosine and neurotrophins, arose from the observation that adenosine, or a $A_{2A}R$ agonist, trans-activates TrkA or TrkB receptors in PC12 cells or hippocampal neurons, respectively, in the absence of neurotrophins [105]. Nevertheless, the $A_{2A}R$ -mediated transactivation of Trk receptors has different aspects when comparing to the conventional Trk activation by the respective neurotrophins. In particular, $A_{2A}R$ activation promotes the phosphorylation of an immature, non-glycosylated, sub-population of Trk receptors associated mainly with Golgi membranes. In addition, this Trk transactivation is only detectable after 3 hours of $A_{2A}R$ activation, while the

classical phosphorylation of Trk receptors by the cognate neurotrophin, occurs in the mature, fully-glycosylated, receptors within seconds to minutes [106, 107].

In functional experiments, multiple evidences have been shown that $A_{2A}R$ activation is necessary for synaptic effects of BDNF in hippocampus. Indeed, in hippocampal slices from young rats, exogenous application of BDNF increases basal synaptic transmission only when a previous depolarization stimulus is made, an effect blocked by an $A_{2A}R$ antagonist. Moreover, pre-synaptic stimulation, or activation of $A_{2A}R$ by a selective agonist or by adenosine, triggered the excitatory action of BDNF upon synaptic transmission, in a process dependent on PKA signalling [108, 109]. Thus, it is concluded that BDNF effects upon synaptic transmission require an activity-dependent presynaptic release of adenosine and consequent $A_{2A}R$ activation. In addition, in hippocampal slices from adult rats, where both levels and actions of $A_{2A}R$ are increased, the addition of exogenous BDNF spontaneously increases basal synaptic transmission, an effect fully blocked by an $A_{2A}R$ antagonist [109]. Interestingly, in ADK-deficient mice, which have increased levels of extracellular adenosine, the spontaneous increase in hippocampal synaptic transmission induced by BDNF is observed even in young animals, an effect not present in age-matched wild-type mice. In opposition, the BDNF-induced spontaneous increase in hippocampal synaptic transmission present in adult wild-type mice, is not detected in age-matched ADK-overexpressing mice, which have lower adenosine levels [110]. Furthermore, the genetic deletion of $A_{2A}R$ abolished the excitatory effects of BDNF upon synaptic transmission in mice [111]. Similarly to hippocampus, it was also found that $A_{2A}R$ and PKA activation are required for the excitatory BDNF effects upon transmission in neuromuscular junction [112]. In addition to synaptic transmission, the effects of BDNF upon synaptic plasticity, both in LTP and LTD, are also fully dependent on $A_{2A}R$ activation, since both effects are lost when extracellular adenosine is removed or when PKA or $A_{2A}R$ are inhibited [108, 111, 113-116]. Together, these results indicate that $A_{2A}R$ activation, and subsequent PKA signalling, are essential to trigger the BDNF excitatory effects upon synaptic plasticity and transmission. Since that exogenous BDNF spontaneously facilitates LTP induction and expression in hippocampal slices from young animals, it suggests that the release of adenosine and its precursor ATP induced by the high-frequency stimulation is enough to activate $A_{2A}R$ and trigger the BDNF actions [99].

Recently, it was shown that $A_{2A}R$ activation promotes the translocation of TrkB-FL to lipid rafts domains in the membrane. Importantly, high-frequency stimulation resulted in increased levels of TrkB in lipid rafts, an effect abolished by the removal of endogenous extracellular adenosine. Thus, adenosine, through $A_{2A}R$ activation, promotes an activity-dependent insertion of TrkB in lipid rafts, facilitating the phosphorylation of TrkB-FL and the BDNF-mediated actions [117].

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Furthermore, the effects of BDNF upon GABA and glutamate release in synaptosomes are also dependent on A_{2A}R activation (*unpublished data from our lab*). Conversely, the effects of BDNF upon neuronal branching [118], or upon GABA uptake at nerve endings [119], do not depend on tonic activation of A_{2A}R (see Figure 1.4). However, pharmacological activation of A_{2A}R in synaptosomes enhances the inhibitory effect of BDNF upon GABA uptake [119].

The findings that many synaptic actions of BDNF are dependent on A_{2A}R activation may open new therapeutic possibilities to boost the BDNF effects in neurodegenerative diseases where its signalling is known to be impaired. Multiple evidences showed that BDNF administration into the brain produces substantial benefits in *in-vitro* and *in-vivo* models of neurodegeneration. However, the translation of this approach to patients has been hampered by difficulty of BDNF to cross the blood-brain barrier (BBB) and by the poor bioavailability and stability of BDNF, which has a short half-life time in biological fluids [120]. Thus, small-molecules that modulate A_{2A}R activity, or its signalling, might constitute a way to promote BDNF synaptic effects in situations where BDNF signalling is compromised. Moreover, in opposition to the indiscriminate administration of BDNF into the brain, the approach of A_{2A}R modulation has the advantage of only stimulating BDNF effects on neuronal subpopulations which co-express A_{2A}R, TrkB and BDNF, such as hippocampus or cerebral cortex, both regions affected in Alzheimer's disease (AD) [105, 121].

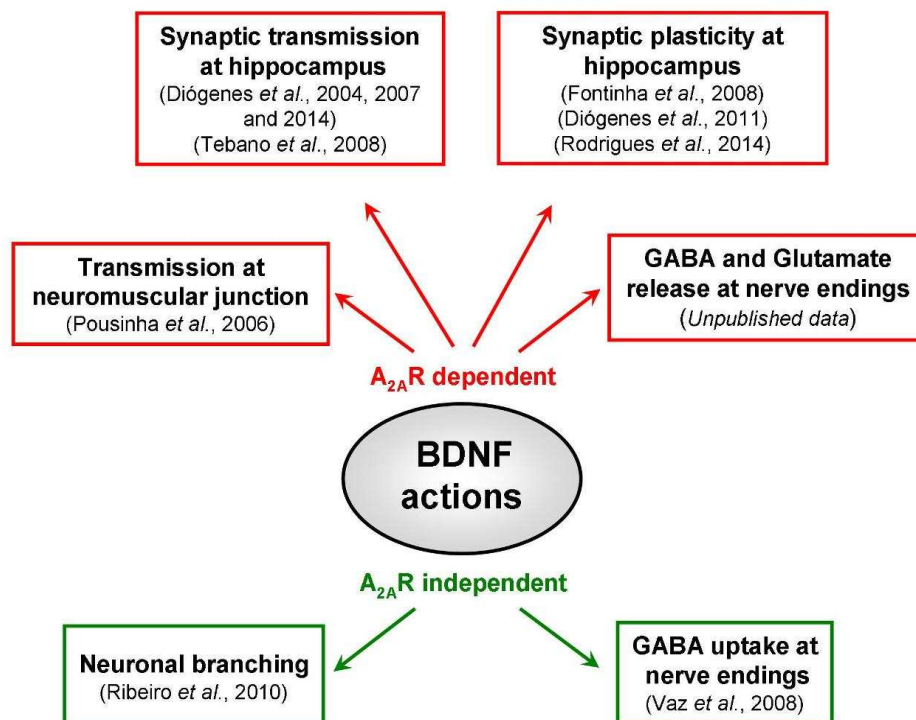


Figure 1.4 – Cross-talk between TrkB and A_{2A} receptors.

BDNF actions upon synaptic transmission in hippocampus and neuromuscular junction, as well as, synaptic plasticity in hippocampus are fully dependent on A_{2A}R activation. Figure adapted from [99]

1.2. Calpain system

Proteases are a class of enzymes that catalyse the hydrolysis of peptide bonds. Depending on mechanism of catalysis, proteases are currently classified into 6 subgroups: aspartic, glutamic, cysteine, metalloproteases, serine, and threonine proteases. Cysteine proteases, also known as thiol proteases, use a nucleophilic cysteine thiol in the active site to attack the carbonyl-carbon of the amide bond and hydrolyse the peptide bond [122]. In the protease classification system of MEROPS database [123], the pure cysteine proteases are currently divided into 10 clans accordingly to their evolutionary relationship, tertiary structure and sequence motifs around catalytic site. Each clan of proteases can be further divided into several families based on their sequence homology. Calpains, papain and cathepsins are all members of clan CA, however, papain and cathepsins belong to the C1 family and are synthesized as inactive proenzymes with N-terminal propeptides, while calpains belong to the family C2 and are not synthesized as classical proenzymes [124].

1.2.1. Calpains

Calpains (EC 3.4.22.17), previously named as Ca^{2+} -activated neutral protease, are cytosolic proteases ubiquitously expressed in mammals and have the peculiarity of being activated by a Ca^{2+} -induced conformational change [125]. Calpains were discovered 50 years ago, in 1964, when a Ca^{2+} -dependent protease activity was found in soluble fractions of rat brain at neutral pH [126]. The prototypical members of calpain family are the μ -calpain and m-calpain. These proteases differ in the Ca^{2+} concentration required for their activation *in-vitro*. The μ -calpain requires 3-50 μM of Ca^{2+} for half-maximal activity, while m-calpain requires 400-800 μM of Ca^{2+} [127]. Both proteases are heterodimers consisting in an 80 kDa catalytic large subunit (calpain-1 in μ -calpain and calpain-2 in m-calpain), associated with a common 30-kDa small regulatory subunit, CAPNS1 (see Figure 1.5). In 1984 the catalytic large subunit of μ -calpain (calpain-1) was cloned, and its primary sequence revealed that it contained 4 domains. The Domain II of calpain-1 is the catalytic domain and is similar to papain-like thiol proteases, while the domain IV is similar to calmodulin-like Ca^{2+} -binding proteins. These findings suggest that calpains are evolutionary derived from the fusion of a thiol protease with a Ca^{2+} -binding protein [128].

Until now, it was found 15 human isoforms of calpain large subunit based on human genome sequence, being these homologs classified as ubiquitous or tissue-specific [129]. For instance, the mRNA of calpain-3a and calpain-8a are mainly found in muscle, while calpain-6 is found in placenta and calpain-11 in testis [127]. Although the protease domain (domain II) is

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conserved in calpain family, there are members that lack, or have different, domains resulting in atypical calpains that may not dependent on Ca^{2+} (eg: Calpain-3) or may not have regulatory subunits. Moreover, there are also a calpain member (Calpain-6), that lacks the essential cysteine residue of the catalytic triad and may not even have proteolytic activity [129]. Nevertheless, atypical calpains have a biological function, and recent evidences showed that the non-catalytic calpain-6 regulates microtubule dynamics in cultured cells and regulates skeletal muscle development in mice [130].

The prototypical calpain-1 and calpain-2 (the large subunits of μ - and m-calpain, respectively) are ubiquitously expressed in mammalian cells and are the most abundant and characterized isoforms in the brain [131]. The calpain small regulatory subunit (CAPNS1) are also expressed in the brain [132]. It was shown that calpain-2 mRNA levels were 15-fold higher than calpain-1 levels in whole mice brain homogenate, whereas the distribution of calpain-1 mRNA was uniform throughout the brain, calpain-2 mRNA was enriched in certain neuronal populations including hippocampal and cortical pyramidal neurons [133]. Subcellular localization of calpains is widely attributed to soluble (cytosolic) fraction; however, recent studies showed that calpains are also associated with different subcellular compartments. In fact, evidences obtained from neuroblastoma cells, neuronal cultures and rat cortex, showed that μ -calpain is present at mitochondrial intermembrane space, placing it in proximity to its mitochondrial substrates and to Ca^{2+} released from mitochondrial stores [134]. During ischemic neuronal injury, the intra-mitochondrial μ -calpain can cleave and activate mitochondrial pro-apoptotic proteins, such as apoptosis inducing factor (AIF), which in turn mediate neuronal death signalling [135]. The m-calpain was also found in the nucleus of cultured neurons, where this nuclear calpain regulates Ca^{2+} -dependent signalling by cleaving the CaMKIV [136].

The crystal structure of Ca^{2+} -free m-calpain revealed that the catalytic site located in domain II (in large subunit), is not assembled in the absence of Ca^{2+} , suggesting that Ca^{2+} may trigger conformational changes necessary to form a functional active site. Moreover, in opposition to classical proenzymes (eg: papain) whereas the N-terminal propeptide blocks the active site, the structure of calpain-2 revealed that the N-terminal anchor (Domain I) does not occupy the active site but inhibits its assembly. In addition, the structure indicated that the N-terminal anchor regulates the calpain affinity to Ca^{2+} by interacting with the small regulatory subunit (CAPNS1) [137]. The N-terminus of Domain I is autolysed during initial Ca^{2+} -induced calpain activation. Although calpain autolysis reduces the requirement for Ca^{2+} , it is not a prerequisite for its activation [124, 127, 138]. Furthermore, the domain III of the large subunit contains C2 subdomains that are implicated in conformational changes during Ca^{2+} binding and may be involved in binding to membrane phospholipids [139, 140]. The carboxy-terminal domain IV of calpain large subunit is a calmodulin-like domain and contains five Ca^{2+} -binding EF-hand motifs, in which the fifth motif promotes the dimerization and binding to the small

subunit CAPNS1 [141]. In addition, the 30-kDa CAPNS1 has two distinct domains. The N-terminal domain (domain V) contains a hydrophobic sequence of aminoacids that may interact with plasma membrane [142, 143]. During calpain activation this domain is autolysed [144]. The Domain VI of CAPNS1 also contains a penta EF-hand domain and is very similar to the domain IV of the large subunit (see Figure 1.5). The biological function of CAPNS1 is not fully understood, and early evidences show that this small subunit is not required for catalytic activity of the large subunit [136]. Nevertheless, *in-vitro* experiments showed the small subunit acts as a chaperone and assists in the folding of the catalytic large subunit [136].

Either the large subunit of m-calpain (calpain-2) or the small subunit CAPNS1 are essential for mammalian life, since the genetic deletion of these proteins cause early embryonic lethality in mice [145, 146]. Interestingly, knockout mice for the large subunit of μ -calpain (calpain-1) are viable and fertile, despite showing a reduced platelet function [147].

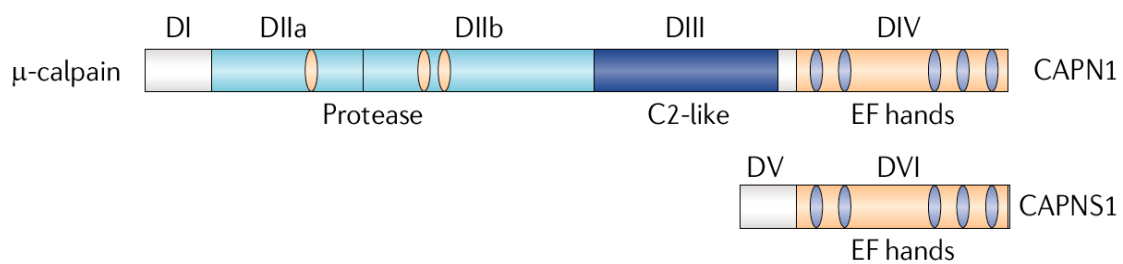


Figure 1.5 – Schematic representation of μ -calpain structure.

The 80-kDa large subunit of μ -calpain (CAPN1 or calpain-1), or m-calpain (CAPN2 or calpain-2), contains four domains (DI to DIV), while the 30-kDa small subunit (CAPNS1) contains two domains (DV and DVI). CAPNS1 associates with CAPN1, or with CAPN2, to form a heterodimer (μ -calpain and m-calpain, respectively). Domain I is autolysed upon calpain activation. The Domain IIa and IIb constitute the protease core, and contain the catalytic triad residues (shown with ovals). C2-like domain (DIII) is involved in binding to phospholipids and Ca^{2+} , and influences the calcium-induced activation of calpain. The domain IV and VI contain five calcium-binding EF hands motifs (shown with ovals), and associate to form the heterodimeric calpain. Domain V is a glycine-rich domain and may interact with cell membranes. The m-calpain large subunit, CAPN2, is structurally similar to CAPN1. The figure was adapted from [148].

1.2.2. Calpain substrates and cleavage specificity

The substrate specificities of the conventional calpains (m- and μ -calpain) are very similar. Calpains usually cleaves the substrates in inter-domain regions, producing large fragments rather than small peptides [127]. Thus, in opposition to digestive enzymes, the limited hydrolysis of calpains indicates their function as modulatory proteases [149]. The crystallography structure of Ca^{2+} -bound m-calpain showed that the active site of this protease is deeper and narrower than others papain-like proteases. The constrains imposed by the cleft size indicate that the substrate should be in an extended conformation to fit the cleft, and may explain why calpains usually cleave unstructured inter-domain regions [150]. Although the protease domain (domain II) is highly conserved in calpain family, the substrate specificities of non-conventional calpains differ from the conventional μ - and m-calpain [151]. These differences suggest that the cleavage in the active site may depend on interactions between the substrate and other calpain interfaces. In opposition to other cysteine proteases, such as caspases, the cleavage mediated by calpains is not merely determined by the aminoacids sequence in the substrate. For calpains, the cleavage site is strongly determined by the conformation of the substrate rather than its primary aminoacid sequence [127]. Studies of bioinformatics have been attempted to predict calpain cleavage sites based on known cleavage sites determined experimentally. The most advanced predicting tool uses a machine learning process instead of the standard sequence analysis algorithms, such as the position-specific scoring-matrix method [152]. However, the accuracy of calpain cleavage site prediction still needs further improvements [153].

Calpains cleave a wide range of substrates. Accordingly to Calpain for Modulatory Proteolysis Database (CaMPDB – www.calpain.org) there are currently 97 experimentally confirmed mammalian calpain substrates and more than 1.000 computationally predicted mammalian substrates [154]. The confirmed calpain substrates include several proteins, such as: **1)** cytoskeletal proteins (eg: integrins, cadherin, microtubule-associated proteins MAP1 and MAP2, neurofilament 1 and 2, glial fibrillary acidic protein - GFAP, spectrin, tau); **2)** signal transduction proteins (CaMKIV, epidermal growth factor receptor kinase, protein kinase A and C, GSK3 β , IP3R, calcineurin, I κ B, protein tyrosine phosphatase 1B); **3)** apoptotic controllers (Apaf-1, AIF, Bax, Bid, Bcl-XL, BAK, caspase-3, 7, 8, 9, 12 and 14); **4)** transcription factors (p53, c-jun, c-fos) and **5)** synaptic proteins (APP, metabotropic and ionotropic glutamate receptors, dynamin-1, GAP-43, PSD-95), among others [155]. Interestingly, calpains often produce fragments with a reduced, enhanced or even different activity than the original substrate. For instance, a recent study showed that, in hippocampal neurons, an NMDAR-

dependent activation of calpain induces a cleavage in β -catenin at the membrane, producing a stable fragment that translocates to the nucleus and induces gene transcription [156].

The prototypical substrate of calpains is the α II-spectrin, a structural protein that maintains cell shape and links the cytoskeleton to plasma membrane. The cleavage of α II-spectrin by calpain was firstly described in neurons. Calpain initially cleaves α II-spectrin (280kDa) producing two products with identical electrophoretic mobility (150kDa), and then it subsequently cleaves one product producing a 145 kDa spectrin breakdown product (SBDP 145). In addition, caspase-3 cleaves the full-length α II-spectrin or the SBDP145, to produce an apoptosis-specific SBDP120 [157].

1.2.3. Regulation of calpain activity

Calpain activity is regulated by its endogenous inhibitor calpastatin, and by other mechanisms including phosphorylation, Ca^{2+} requirements modifications and most likely subcellular localization [127].

Calpastatin

Calpastatin is a ubiquitous endogenous protein that specifically inhibits the activity of μ -calpain and m-calpain. Calpastatin is encoded by *CAST* gene in humans, and due to multiple promoter usage and alternative splicing, it can originate distinct isoforms with N-terminal variation [148].

The prototypical calpastatin (~80kDa) contains an N-terminal domain (L Domain), which function is not completely known, and four repetitive inhibitory domains (I-IV) in which all four domains have a similar and very high inhibitory activity against μ - and m-calpain [158]. Calpastatin is an intrinsically unstructured protein capable of simultaneously binding to four molecules of calpain, in the presence of Ca^{2+} [159]. Each inhibitory domain of calpastatin contains three conserved subdomains (A, B and C). In the presence of Ca^{2+} , subdomain A and C binds to the calmodulin-like domains of calpain (to domain IV in the large subunit and to domain VI in the small subunit, respectively) [160], while a peptide derived from subdomain B inhibits the catalytic activity, indicating that this region interacts with domain II [161]. Recently, two groups simultaneously resolved the crystallographic structure of calpastatin bonded to m-calpain in the presence of Ca^{2+} [139, 162]. This structure showed that m-calpain binds to ten Ca^{2+} atoms, and that the inhibitory domains of calpastatin recognize the Ca^{2+} -bound m-calpain conformation wrapping around the protease in a tight and specific way. The subdomain B of calpastatin inhibitory domain occludes the catalytic cleft, but it avoids its own

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cleavage by looping out and around the active cysteine residue (see Figure 1.6) [139, 162]. Taken together, multiple crystallographic structures of calpains have been shown that Ca^{2+} switches calpain from the inactive to the active state, allowing the binding of calpastatin and consequent calpain inhibition [137, 139, 162].

Calpastatin can be cleaved by calpains in its inter-domains regions, but the proteolytic fragments retain their inhibitory activity [163]. Nevertheless, calpastatin is cleaved by caspases during apoptosis, and in this case, it loses its inhibitory activity allowing the activation of calpains [164-166]. Studies have shown that calpastatin is usually found in an aggregated and phosphorylated state inside the cell, and upon an increase in intracellular Ca^{2+} , calpastatin is dephosphorylated and becomes progressively soluble. The aggregation of calpastatin is regulated by a PKA-mediated phosphorylation [167, 168]. In addition, PKC phosphorylates calpastatin, in a different site than PKA, reducing its inhibitory activity [169]. The regulation of calpastatin availability and activity through PKA and PKC-mediated phosphorylation, respectively, can constitute a way in which active calpains escape from the endogenous calpastatin inhibition.

Interestingly, mice deficient for calpastatin are fertile and viable, and do not show detectable calpain activation during normal conditions. Similarly, mice overexpressing calpastatin display no adverse phenotype. However, the degenerative changes upon neurotoxic and traumatic brain insults were limited in the calpastatin overexpressing mice and exacerbated in calpastatin-deficient mice [170-172].

Calcium requirements

Probably the major unresolved question in the calpain field is how calpains are activated intracellularly. Calpains in *in-vitro* conditions require high Ca^{2+} concentration to become active ($\sim 30\mu\text{M}$ or $\sim 500\mu\text{M}$ of Ca^{2+} for half-maximal activity for μ -calpain and m-calpain, respectively). However, physiological intracellular Ca^{2+} levels is within nanomolar range, and reaches, at most, very low micromolar concentrations in stimulated cells [173]. This non-physiological high Ca^{2+} demand raised questions regarding the conditions under calpains could be activated *in-vivo*. Thus, it has been suggested several mechanisms that lowers the Ca^{2+} requirement of calpains, in particular the m-calpain, inside the cell. These include autolysis [138], phosphorylation [174], interaction with plasma membrane phospholipids [138, 175] or binding to an activator protein [176].

Interestingly a study has shown that m-calpain can be activated independently of Ca^{2+} , by a Erk/MAPK-mediated phosphorylation [177]. Recently it was showed that BDNF and EGF rapidly activate m-calpain in cultured neurons, via a MAPK-dependent phosphorylation, confirming the previous observations [178]. In addition, m-calpain is inhibited by PKA

phosphorylation [179]. Recent evidences showed that PKA-mediated phosphorylation on m-calpain reduces the binding of phosphatidylinositol-4,5-bisphosphate (PIP₂) to the domain III of m-calpain. In opposition, ERK-mediated phosphorylation increases the binding of PIP₂ to m-calpain. The PIP₂ acts as a co-factor to m-calpain and it promotes anchorage of m-calpain to the plasma membrane. In this way, PKA or ERK control the activity and cellular distribution of m-calpain by regulating its anchorage to the membranes [180, 181].

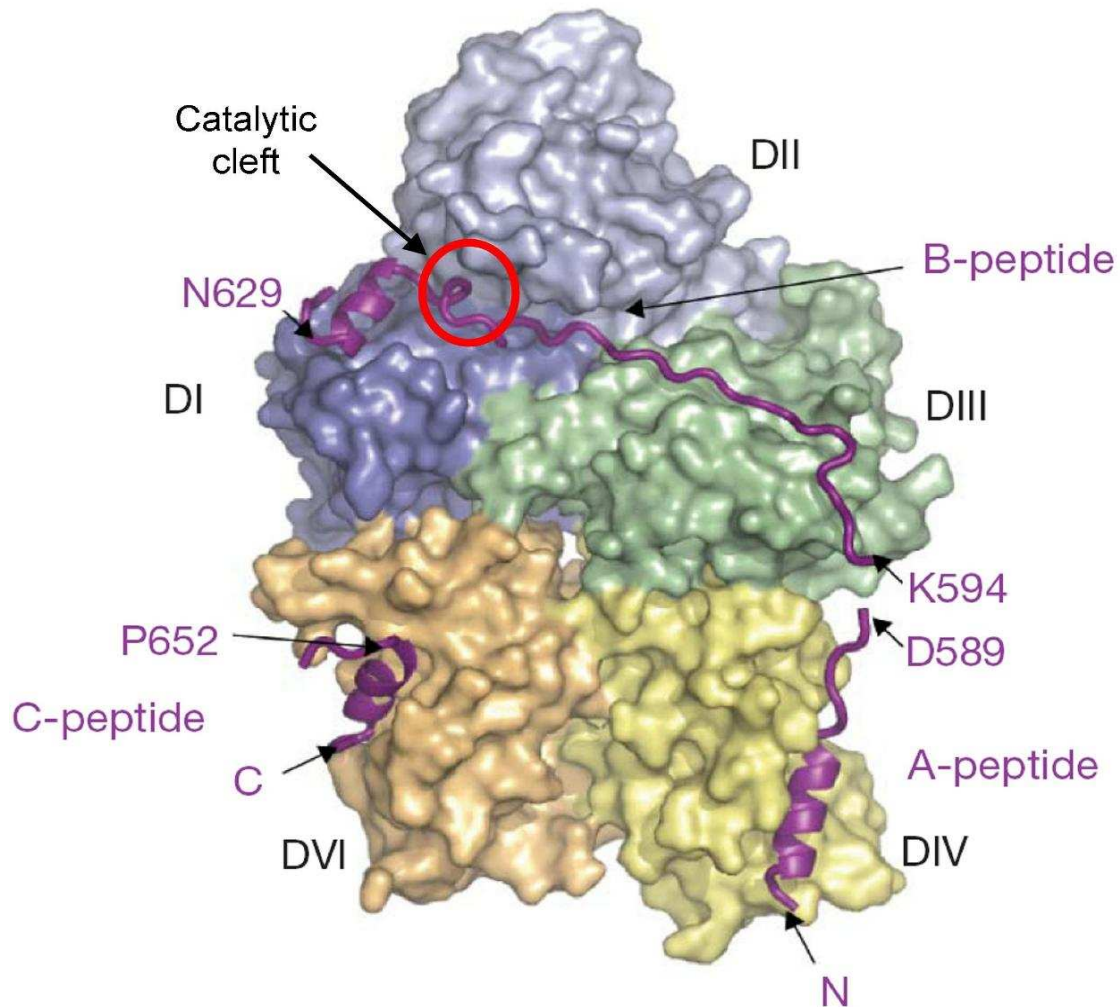


Figure 1.6 – Crystallographic structure of calcium-bound m-calpain enclosed by calpastatin.

Overall 2.4 Å-resolution crystal structure of calcium-bound m-calpain (composed by domains DI to DIV) associated with the inhibitory domain IV of calpastatin (CAST4). CAST4 (in purple) contains the subdomains A, B and C (as shown in the figure). CAST4 is unstructured in the absence of calpain, however, the subdomains of CAST4 form α -helices when associated with calcium-bound m-calpain. Helices of subdomain A and C interact with calpain domain DIV (yellow) and DVI (orange), respectively. The helix of the subdomain B, which is essential for the inhibitory activity of CAST, contacts with the protease core DII (light blue), but escapes from cleavage by looping out and around the catalytic site (red circle). Gaps in the structure of CAST4 are indicated by missing residues. Figure was adapted from [139].

1.2.4. Function in physiology and pathophysiology

At physiological conditions, calpains are involved in multiple biological functions including cell development, proliferation, differentiation, motility, apoptosis, growth cone guidance, LTP and memory [127]. Dysregulation of calpain activity is implicated in several diseases, including acute and chronic neurological disorders, muscle disorders, diabetes, cancer, among others [127, 150, 182]. For instance, calpain activity is increased in many types of cancer, and it contributes to survival, migration and invasion of tumor cells by cleaving oncogenes (eg: c-Fos, c-Jun, Myc), tumor suppressor genes (p53) and focal adhesion proteins [148]. In neurons, when Ca^{2+} homeostasis is disrupted, for example during excitotoxicity, epileptic seizures and acute ischemic and hypoxia injury, the overactivation of μ -calpain and m-calpain may occur, leading to neuronal damage and death [182, 183]. Altered calpain activity has also been found in chronic neurodegenerative disorders such as Alzheimer's, Huntington's and Parkinson's diseases and multiple sclerosis [184]. While physiological calpain activation seems to be essential in many biological processes, the excessive calpain activation contributes to disease and pathology. Considering the focus of this work, here it will be discussed in more detail the importance of calpains on physiology, in particular upon LTP and memory, and in pathology, in particular upon AD.

Calpains in LTP

The hypothesis that calpains are implicated in memory started in 1984. This hypothesis postulated that calpains contribute to LTP by promoting synaptic remodeling through cleavage of structural proteins, including spectrin, and by increasing the number of glutamate receptors in the post-synaptic membrane [185, 186]. Multiple evidences collected until now have reinforced this initial hypothesis. Indeed, TBS in CA1 hippocampal area, induces Ca^{2+} influx and calpain activation in PSDs as determined by the formation of calpain-specific spectrin breakdown products [187]. Additionally, multiple studies have shown that the inhibition or downregulation of calpains, by synthetic inhibitors or siRNA, respectively, greatly reduced the induction and magnitude of hippocampal LTP [188-190]. Recently, a study showed that conditional deletion of calpain-1 and calpain-2 in the CNS does not critically impair brain development, but reduces spine density and dendritic branching complexity of CA1 pyramidal neurons and impairs hippocampal LTP and spatial memory of the mice [191]. Interestingly, BDNF, which is released during TBS and importantly contributes to LTP induction and memory encoding, promotes m-calpain activation through ERK activation [178]. On the other hand, genetic deficiency of calpastatin enhances hippocampal LTP [192]. Another recent study showed that μ -

calpain is necessary for synaptic potentiation during E-LTP, while m-calpain activation limits the magnitude of the potentiation during L-LTP consolidation [193].

Calpains in Alzheimer's disease

Growing evidence has shown that calpains are overactivated in AD, and this excessive activation may contribute to the progression of the disease [194-199]. In association to calpain overactivation, in AD brains, there is a markedly depletion on calpastatin. The depletion of calpastatin in the dendrites of AD neurons is mediated by caspase-1 and 3 cleavages, and coincides topographically with m-calpain activation and tau phosphorylation [200]. Another recent study also observed a correlation between calpain activation and tau phosphorylation in close proximity to amyloid plaques in *post-mortem* AD brain and in APP transgenic mice (an AD mice model) [199]. The same study showed that genetic deficiency of calpastatin increased A β amyloidosis, tau phosphorylation, microgliosis, neuronal dystrophy and increased mortality in APP transgenic mice. In opposition, the overexpression of calpastatin in APP mice had the opposite effect [199]. A similar conclusion was obtained in another study, using transgenic APP mice and a synthetic calpain inhibitor [201]. Furthermore, a third study showed that calpain inhibition reestablishes normal synaptic function and plasticity, and improves spatial-working memory in the APP transgenic mice [202]. Together, these findings highlighted the importance of the calpain-calpastatin system in AD.

1.3. Alzheimer's disease

AD is the most common chronic progressive neurodegenerative disease which affects about 24 million people worldwide and it increases in incidence with age [203]. In an early stage of AD the symptoms may begin as a short term memory loss and incapacity to make new memories, a process which depends on hippocampus and its cholinergic inputs from basal forebrain nuclei [204]. As the disease progresses other symptoms may occur, such as cognitive dysfunction, psychiatric symptoms, behavioural disturbances and long-term memory loss.

AD was firstly described in 1906 by Alois Alzheimer, a German psychiatrist, who examined the brain tissues of a woman who died from an unusual mental illness. He described a general atrophy and neuronal loss in cortical regions, and the presence of extracellular amyloid plaques and intracellular neurofibrillary tangles in about 1/4 to 1/3 of all cortical neurons [205]. In fact, in AD there is a widespread loss of neurons and synapses in cortical areas, being the temporal lobes (hippocampus, parahippocampus and amygdala) the most affected areas [206].

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For instance, while the number of neurons in temporal lobe remains constant between non-demented subjects, in AD patients more than 50% of these neurons are lost [207]. As a consequence of the substantial neuronal loss, the grey matter thickness in cerebral cortex is diminished and ventricles are enlarged (see Figure 1.7). In addition, multiple evidences indicate that synapse loss in AD is an early event that precedes neuronal loss [208], and is a major correlate of cognitive impairment [209, 210].

After 80 years of the initial description of AD, it was discovered that A β peptides are the main component of amyloid plaques [211] and that neurofibrillary tangles are composed by hyperphosphorylated tau (p-Tau) protein [212]. While the distribution pattern of amyloid plaques varies throughout the brain between AD patients, the tau pathology progresses in a highly regular pattern. Indeed, the neurofibrillary tangles occur first in the transentorhinal cortex, spreading sequentially to entorhinal cortex, to hippocampus and then to cerebral cortex [213].

Currently, several evidences obtained with biomarkers in AD patients, indicate that the initiating event in AD disease is the abnormal processing of A β and accumulation of amyloid plaques, which occurs while the individuals are still cognitively normal. Indeed, the first alterations in biomarkers detected are the decrease of A β 42 levels in cerebrospinal fluid (CSF) and shortly after, amyloid accumulation in the brain measured by PET amyloid imaging. After a latency period that varies between individuals, markers of taupathology appear, with increased levels of total and phosphorylated tau detected in CSF. Alterations in tau biomarkers precede synaptic dysfunction and brain atrophy, which are indicated, respectively, by decreased ¹⁸F-fluorodeoxyglucose uptake in PET and structural alterations in magnetic resonance imaging (MRI). Initial brain atrophy correlates with neuronal loss, and initiates the early memory symptoms present in mild-cognitive impairment (MCI) stage. Acceleration in hippocampal atrophy rates in MCI stage lead to the progression to clinical AD stage (see Figure 1.7A and B) [214-216].

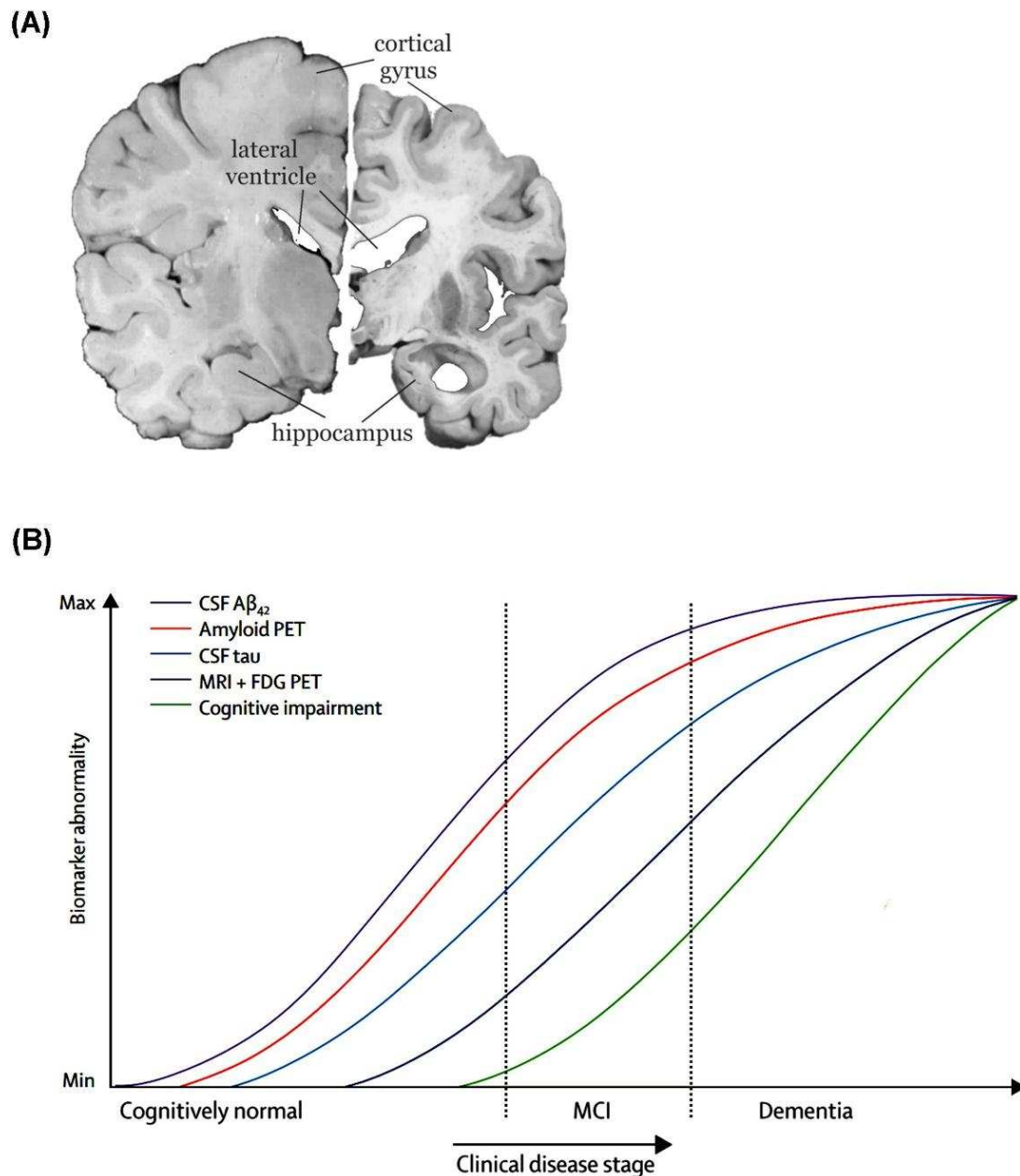


Figure 1.7 – Brain atrophy and hypothetical progression model in AD.

(A) Severe atrophy of human brain in late stage of AD (right), compared with normal brain (left). In advanced stage of AD, the neuronal loss results in the enlargement of lateral ventricles, hippocampal shrinkage and thinning of cortical gyrus. **(B)** Hypothetical model of AD progression showing the temporal order of biomarkers abnormalities across the progression of the disease. In this model, biomarkers of $A\beta$ accumulation become abnormal early before tau accumulation, neurodegeneration and clinical symptoms occur. $A\beta$ accumulation biomarkers include with decreased levels of $A\beta$ in CSF and increased $A\beta$ levels in brain measured by PiB-PET. Tauopathy is indicated by increased levels of total and phosphorylated tau in CSF. Neurodegeneration is measured by FDG-PET and structural MRI. MCI=mild cognitive impairment. Figure adapted from [217] and [215]

1.3.1. Amyloid- β peptides

Based on A β peptide sequence, it was found that A β derived from another protein, the amyloid-precursor protein (APP) [218]. Shortly after APP identification, it was detected an autosomal dominant mutation in the *APP* gene in some families with early-onset familial AD [219]. This point mutation, which was closely located to the carboxy-terminus of A β peptide, provided an important support to the amyloid cascade hypothesis of AD. Then, new findings showed that familial AD could also be caused by mutations in presenilin-1 (*PSEN1*) [220] and presenilin-2 (*PSEN2*) genes [221]. Both presenilins are members of the γ -secretase protease complex. The sequential cleavage of APP by β -secretase (BACE1) and γ -secretase produces the A β peptide (see Figure 1.8A and B) [222, 223]. Until now, dozens mutations were found to be associated with early-onset familial AD in the *APP*, *PSEN1* and *PSEN2* genes [224]. The majority of those mutations are associated with increased A β production or with increased A β 42/A β 40 peptides ratio [225-227]. For instance, some mutations in APP near γ -secretase cleavage site affect the cleavage by γ -secretase and shift the amyloid production to A β 42, instead of A β 40 [228]. The critical factor for the rate of amyloidogenesis is the relative concentration of A β 42 rather than the total A β concentration [227, 229, 230]. A β 42 is the most hydrophobic and amyloidogenic form of the peptide, and it is also more neurotoxic than A β 40 [231, 232]. A β is present in plasma, CSF and brain interstitial fluid (ISF) mainly as soluble A β 40 peptide [233], however, the major form present in the parenchymal amyloid plaques in AD is the A β 42 [234, 235].

In sporadic AD, which constitutes more than 95% of all AD cases, there is no known associated mutation in APP or presenilins [236]. Unlike APP and presenilins, no known mutations in BACE are linked to familial early-onset AD. Interestingly, a recent work identified a mutation in APP gene that protects against AD and against cognitive decline in non-demented elderly subjects. This mutation (A673T) is located close to β -secretase cleavage site and reduces cleavage efficacy, lowering A β production up to 40% *in-vitro* [237]. In opposition, in the AD brain the β -secretase activity and protein levels were found to be increased [238, 239]. Thus, all the above evidences imply a crucial role of A β in AD, and sustain the hypothesis that A β is the leading cause of AD.

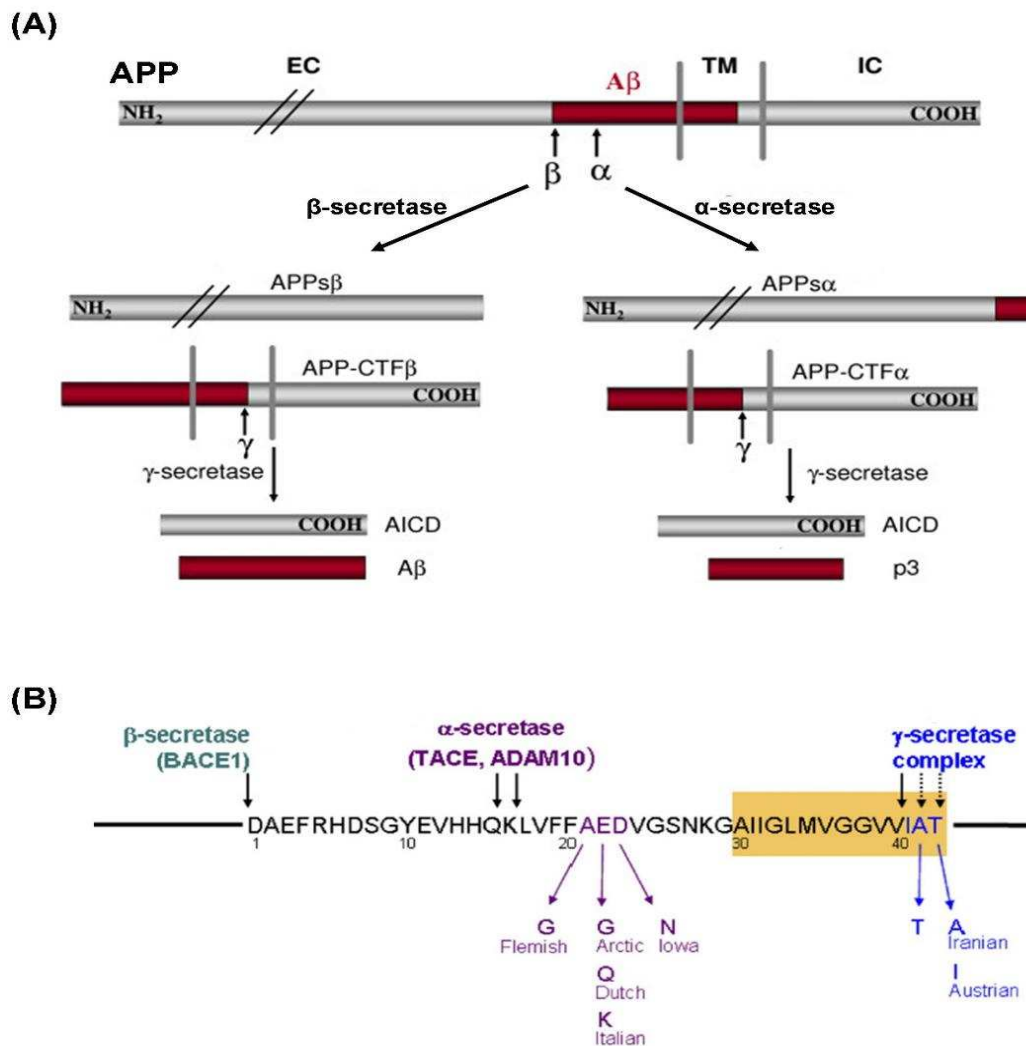


Figure 1.8 – APP processing and A β formation.

(A) APP is a transmembrane protein composed by 770 aminoacid residues. APP can be processed by the non-amyloidogenic α -secretase pathway, or by the amyloidogenic β -secretase pathway. In the non-amyloidogenic pathway, α -secretase cleaves APP in an extracellular (EC) position (aa. 687), releasing a large extracellular soluble fragment (sAPP- α). The remaining c-terminal membrane-bound APP fragment (named APP-CTF α , or C83) is subsequently cleaved by γ -secretase complex in the transmembrane region (TM), producing the p3 fragment and the AICD. In the amyloidogenic pathway, APP is firstly cleaved by β -secretase (BACE1) in the extracellular portion (aa. 671) generating the sAPP- β fragment and the membrane-bound APP-CTF β (also named as C99). The APP-CTF β is then cleaved by γ -secretase complex generating the AICD and the A β peptide. The γ -secretase complex, which is composed by presenilin 1 and 2, nicastrin, APH1 and PEN2, cleaves APP in distinct positions, producing A β peptides ranging from 38 to 43 aminoacids length, being the longer peptides (A β -42 and A β -43) the main pathogenic species. **(B)** Aminoacid sequence of A β region within APP, showing some APP point mutations associated with familial AD. The transmembrane region of APP is highlighted in orange and the secretase cleavage sites are indicated. The figure was adapted from [240, 241].

1.3.2. Neurotoxicity mediated by Amyloid- β peptides

After the discovery of A β peptide as the main component of amyloid plaques in AD, soon it was discovered that the peptide had neurotoxic properties. Indeed, the incubation of neuronal cells with synthetic A β produces significant neuronal death [30, 242, 243]. Moreover the *in-vivo* administration of A β into the mice brain also produces significant neurodegeneration and cognitive deficits [244, 245]. In addition, genetically engineered mice that over produce A β , either by overexpression of APP and/or presenilin containing mutations linked to familial AD, also recapitulate some key features of AD, including synaptic loss and cognitive impairments [236]. Nevertheless, many AD mice models fail to recapitulate a robust neuronal loss and an evident presence of neurofibrillary tangles [236].

Mechanisms underlying the neurotoxic actions of A β peptides are not fully understood, but the existing data suggests the involvement of multiple mechanisms such as oxidative stress, interaction of A β with receptors and ion channels, excitotoxicity, synaptic dysfunction, inflammation, mitochondrial dysregulation, membrane permeability alterations and activation of caspases and calpains (Figure 1.9) [246-256]. Here, it will be discussed in more detail the main molecular mechanisms that may contribute for A β toxicity.

Oxidative stress

An increase in markers for DNA, RNA, lipids and protein oxidation have been found in AD brain, suggesting an involvement of oxidative stress in the disease [246]. The A β peptide found in amyloid plaques, can itself bind to transition metals with high affinity, such as iron, zinc or copper, and possess the ability to reduce them to a lower oxidation state. This redox reaction produces reactive oxygen species (ROS) which will react and damage cellular components contributing to A β neurotoxicity [241].

Calcium homeostasis disruption

A β disrupts Ca²⁺ homeostasis and synaptic function by interacting with several neurotransmitters receptors and ion channels. For instance, A β binds with high affinity to the nicotinic receptor $\alpha 7$ -nAChR, and this interaction leads to an inhibition in acetylcholine release and in $\alpha 7$ -nAChR-dependent Ca²⁺ influx, leading to neuronal demise [257]. In addition, A β peptide affect glutamatergic synapses by interacting with AMPA and NMDA glutamate receptors, two major players involved in synaptic plasticity and memory formation. In particular, studies have shown that A β alters the kinetics of AMPAR and it reduces its surface

membrane expression by increasing intracellular Ca^{2+} and phosphorylation of GluR2 subunit [258]. However, one of the most studied targets of $\text{A}\beta$ is the Ca^{2+} -permeable NMDA receptor.

The ionotropic receptor NMDAR plays a central role in synaptic plasticity, however when over-activated it contributes to excitotoxic cell-death by causing a persistent influx of Ca^{2+} . Studies have shown that $\text{A}\beta$ oligomers can trigger an increase of Ca^{2+} influx mediated by NMDAR, resulting in mitochondrial and synaptic dysfunction, excitotoxicity and ROS production [259-262]. $\text{A}\beta$ can also inhibit astrocytic glutamate uptake, leading to an accumulation of extracellular glutamate and an enhanced NMDAR activation [261, 263]. By exacerbating the influx of Ca^{2+} , $\text{A}\beta$ leads to an exacerbated calpain activation, which in turn mediates pathogenic effects by cleaving synaptic substrates. Calpain modulates synaptic function by cleavage of membrane receptors (such as NMDAR), kinases, cytoskeletal proteins and post-synaptic density (PSD) proteins, leading to changes in synaptic organization and stability [264]. By increasing Ca^{2+} influx through NMDAR, $\text{A}\beta$ also induces a calpain-mediated cleavage of dynamin-1, a protein essential for recycling of synaptic vesicles [265]. Calpain over-activation also reduces the activity of protein kinase A (PKA), which in turn contributes to a down-regulation of cAMP response element-binding protein (CREB), a key molecule for synaptic plasticity, learning and memory [266]. Additionally, the toxic effects of $\text{A}\beta$ are attenuated by NMDAR antagonists further supporting the role of NMDAR in $\text{A}\beta$ toxicity [261, 267, 268]. Besides the ionotropic receptors, $\text{A}\beta$ can also disturb intracellular Ca^{2+} homeostasis by changing the activity of VGCCs [269] and by evoking the release of Ca^{2+} from intracellular stores, such as ER [270, 271]. Moreover, studies have shown that $\text{A}\beta$ can associate with lipid bilayers and spontaneously form novel Ca^{2+} -permeable pores by which uncontrolled Ca^{2+} influx may perturb intracellular Ca^{2+} homeostasis [272]. Although it has been difficult to observe this pores in cell membranes, a recent study used a new single-channel Ca^{2+} imaging technique and provided evidences for an intrinsic Ca^{2+} -permeable pore formed by $\text{A}\beta$ oligomers in cell membrane [273]. Membrane permeabilization and pores formation are features also observed in many antimicrobial peptides, such as human LL-37 [274]. Interestingly, a recent study showed that $\text{A}\beta_{42}$ binds to bacterial membranes and has high antimicrobial activity against several microorganisms, suggesting that $\text{A}\beta$ belongs to innate immune system and may be a defence mechanism to infections in CNS [275].

Calpain activation

As briefly mentioned above, A β perturbs Ca²⁺ homeostasis in neurons and promotes calpain activation [199, 276, 277], an outcome also observed in *post-mortem* human AD brains [194, 195, 197-199, 266, 278]. Interestingly, recent data have suggested a bidirectional link between calpain activation and A β deposition. Particularly, in APP overexpressing mice, the genetic deficiency in calpastatin (an endogenous calpain-specific inhibitor) not only increased calpain activity, but it also increased A β amyloidosis and Tau phosphorylation, with additional increased somatodendritic dystrophy and mice mortality [199]. This study suggested that calpain activation can also contribute to A β production and Tau phosphorylation (two major hallmarks of AD). Actually, both A β peptides and calpain activation have already been linked with tau hyperphosphorylation. In one hand, it has been shown that aggregated A β peptides can significantly increase tau phosphorylation levels in primary septal neuronal cultures [279]. This study also showed that A β activates kinases involved in phosphorylation of tau, such as GSK3 and MAPK [279]. On the other hand, it has been shown that calpain activation enhances the activity of several kinases that mediate tau phosphorylation. For instance, calpains can cleave the inhibitory domain of GSK3, enhancing the kinase activity [280]. Calpain also cleave the CDK5-regulator p35, generating a truncated product, the p25, which causes a constitutive activation of CDK5 and a consequent hyperphosphorylation of Tau [196, 281-283]. The p25 fragment was also detected in higher levels in AD brains than age-matched controls [196, 284]. To evaluate the role of the calpain cleavage fragment p25, it was developed a transgenic mouse that overexpresses the p25 protein under the CaMKII promoter. The overexpression of this single fragment was able to recapitulate many hallmarks of AD, such as progressive neuronal loss in cortex and hippocampus, forebrain atrophy, tau pathology, amyloid plaques, intraneuronal A β accumulation, impaired synaptic plasticity and cognitive dysfunction [285-287]. Inhibition of CDK5, as well as inhibition of c-Jun N-terminal Kinase (JNK) and p38 mitogen-protein activated kinase (p38 MAPK), is sufficient to prevent the impairment of LTP induced by A β [288]. Moreover, inhibition of CDK5 by a synthetic inhibitor, or an antisense oligonucleotide, prevents A β -induced death in cultured hippocampal neurons [289]. Recently, it was shown that calpain-deficient neurons do not convert p35 to p25 and are more resistant to excitotoxicity and mitochondrial toxicity. Interestingly, these calpain-deficient neurons became sensitive to the same toxic stimulus after the infection with a p25 expressing adeno-associated virus [191].

In addition, calpain can also cleave tau protein generating a neurotoxic ~17kDa fragment which has been detected in hippocampal neurons treated with A β oligomers [290] and in cortex of AD brain [195]. The expression of this toxic fragment induces neuronal death in hippocampal cultures [290]. Taken together, the evidences suggest that A β triggers calpain

activation, by perturbing Ca^{2+} homeostasis, and consequently it activates several kinases, such as CDK5, which can mediate hyperphosphorylation of Tau, A β production and neurodegeneration (Figure 1.9).

Receptors interaction

Several studies have shown that A β can interact with many receptors. There is evidence that A β oligomers can bind to cellular prion protein (PrP^c) and Ephrin type B receptor 2 (EphB2) and the downstream signalling from both receptors alters NMDAR function contributing to decreased synaptic plasticity [291, 292]. A β oligomers can also interact with human leukocyte immunoglobulin-like receptor B2 (LilrB2) engaging signalling pathways for neuronal actin organization that results in synapse elimination [293]. Additionally, it has been shown that the neurotrophin receptor p75^{NTR} is a receptor for A β and it is required for A β -induced neuronal death [294]. A β oligomers also compete with insulin for binding to insulin receptor [295] and disrupt insulin signalling, which suggests that A β may contribute to insulin resistance observed in AD brain [296]. Previous experiments shown that the receptor for advanced glycation end products (RAGE) also binds to A β [297] and mediates A β -induced neuronal toxicity [298, 299]. Additionally, aggregated A β 42 can trigger neuroinflammatory activation in microglia by binding and activating the innate immune receptor Toll-like receptor 2 (TLR2) [300].

Mitochondrial dysfunction

Challenging the classical view that A β accumulates extracellularly, emerging evidence have shown that A β also accumulates intracellularly, further contributing to AD progression [301]. In fact, the amyloidogenic cleavage of APP also occurs in intracellular membranes of Golgi and ER, whereas the A β peptide is released to the intracellular space (cytosol). In addition, extracellular A β can bind to several receptors, producing A β -receptor complexes that can also be internalized into early endosomes [301-303].

It has been shown that intracellular A β accumulates in mitochondria from the brain of transgenic mice expressing mutant human APP and also accumulates in mitochondria from cultured cortical neurons from the transgenic mice, and most importantly, in the brains of AD patients [304, 305]. Interestingly, exogenous A β applied to human neuroblastoma cells can be internalized and accumulate within mitochondria [306]. The accumulation of A β within mitochondria correlates with lower enzymatic activity of respiratory chain complexes III and IV, lower oxygen consumption and higher levels of hydrogen peroxide and oxidative damage

1. Introduction

[304, 305, 307]. In addition to the increased ROS production, mitochondrial A β also promotes the opening of the mitochondrial permeability transition pore (mPTP) by directly interacting with Cyclophilin D (CypD), a modulator of mPTP formation [308]. Genetic deficiency of CypD reduces A β -induced mitochondrial stress as well as it improves behavioural and synaptic function in the transgenic APP mice [308]. The opening of the mPTP releases pro-apoptotic proteins, such as Cytochrome c, which activates caspase-3 and triggers the intrinsic apoptotic pathway. Activation of caspase-3 in synapses promotes early synaptic dysfunction and behavioural impairment in transgenic APP mice [309].

Complexity of A β effects

A β toxicity is a complex process, involving multiple and distinct mechanisms. The study of A β toxicity mechanisms is further hampered by the fact that distinct A β preparations (monomers, oligomers or fibrils) evoke different pathways. For instance, naturally secreted A β oligomers, but not fibrils or monomers, potently inhibit *in-vivo* hippocampal LTP [310]. Although initial studies described insoluble A β fibrils as neurotoxic, most recent evidences have shown that soluble A β oligomers are also neurotoxic and most probably are the main responsible for neurodegeneration, and particularly for synaptic failure in AD [311].

In top of A β species complexity, A β may also trigger different effects depending on its concentration. For example, it has been shown that oligomeric and monomeric A β preparations can markedly increase hippocampal LTP at low picomolar concentration, while at high nanomolar concentrations the same preparations lead to the well-established reduction in LTP [312]. These evidences suggest a dual role for A β , whereas at sub or low-nanomolar levels it may have a physiological role and beneficial effects, while at high nanomolar or micromolar concentration it can trigger synaptic dysfunction and neurodegeneration.

The effects of A β may also differ depending on the length of the peptide. For instance, the A β ₂₅₋₃₅ peptide, which is the shortest peptide sequence that retains the biological activity of A β ₄₂, showed enhanced toxicity and enhanced aggregation rate in aqueous solution, when compared to A β ₄₂ [243, 313].

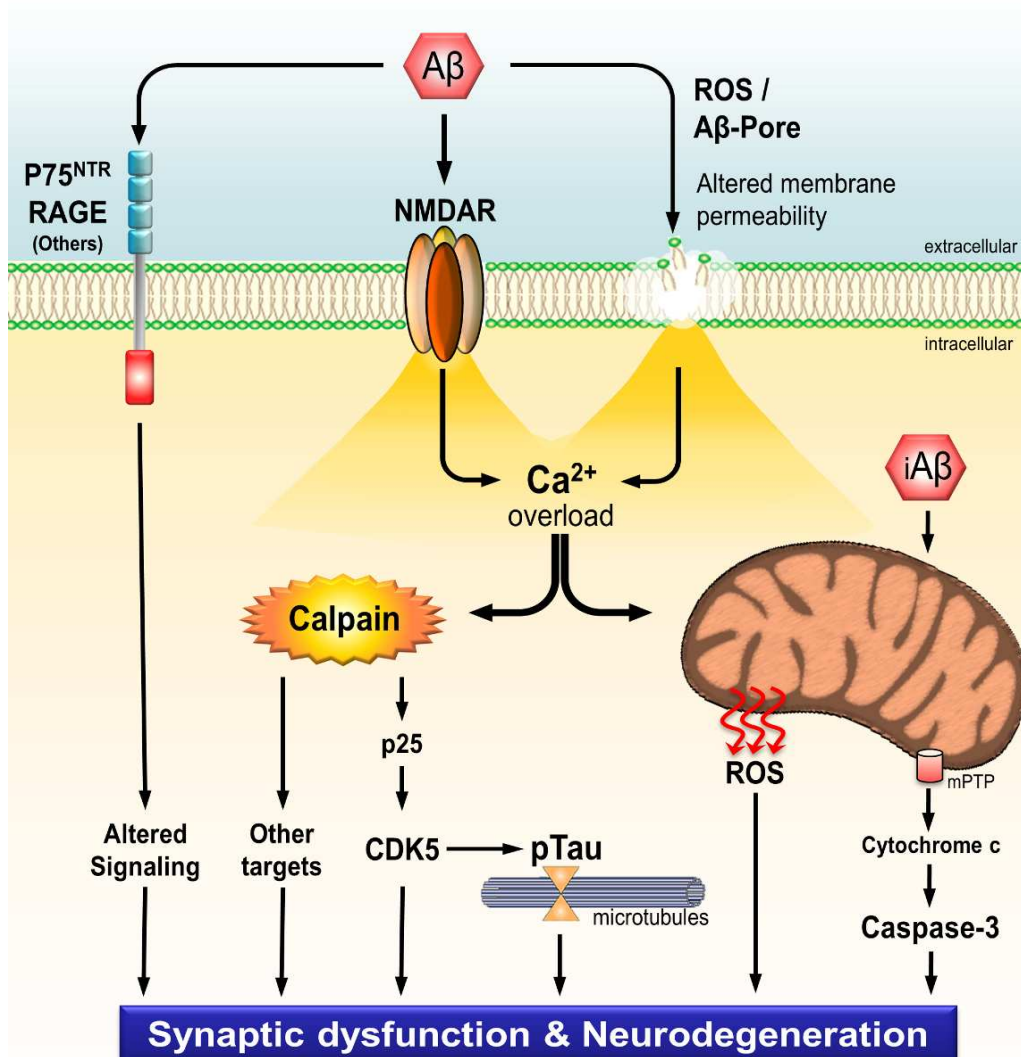


Figure 1.9 – Simplified schematic representation of Aβ toxicity mechanisms.

Extracellular Aβ peptides induce synaptic dysfunction and neurodegeneration by multiple mechanisms. Evidences indicate that Aβ dysregulates signalling pathways by interacting with several receptors (eg: p75NTR, RAGE, PrPc, α7-nAChR, mGluR, insulin receptor, among others) and induces a sustained Ca²⁺ influx by either interacting with ionic receptors, such as NMDA receptor, or by promoting cell membrane leakage through a pore formation or reactive oxygen species (ROS) production. The prolonged Ca²⁺ influx induces calpain overactivation and mitochondrial calcium overload. Intracellular Aβ (iAβ) further impairs mitochondrial function by interacting with mitochondrial respiratory chain complexes, which decreases ATP production and increased ROS formation. In addition, the iAβ triggers mitochondrial permeability transition pore (mPTP) formation, with consequent release of pro-apoptotic proteins, and caspase-3 activation. On the other hand, calpain overactivation cleaves and changes the function of several proteins (eg: synaptic proteins, structural proteins, signalling proteins, among others). Importantly, calpains activate cyclin-dependent kinase 5 (CDK5) by cleaving the CDK5-modulator p35 into p25. Increased CDK5 activity leads to neurodegeneration, Aβ formation, and tau hyperphosphorylation.

1.3.3. BDNF signalling in AD

The neurotrophin BDNF prevents the neuronal death induced by a wide variety of *in-vitro* insults, including serum-deprivation, oxidative stress, glutamate excitotoxicity, ischemia, and A β peptides [120, 243]. BDNF is required for the maintenance of dopaminergic neurons and it confers protection against neurotoxins, such as MPTP and 6-OHDA, in both *in-vitro* and *in-vivo* Parkinson's disease models [314]. In addition, BDNF delivery into entorhinal cortex or hippocampus reverses the neurodegeneration and improves cognitive performance in rodent and primate models of AD [243, 315-317]. Notably, the BDNF administration does not reduce amyloid plaques number in transgenic AD models, indicating that amyloid load reduction is not necessary to achieve neuroprotective effects [315-317]. In addition to neuroprotective effects, BDNF also rescues the impairment in the HFS-induced LTP in hippocampal slices treated with oligomeric A β [318].

In addition to the benefits of increasing BDNF actions in AD models, it is noteworthy that multiple evidences support that BDNF signalling is reduced in AD patients. In fact, it was reported that in *post-mortem* brain samples from end-stage AD patients, the mRNA levels of BDNF are substantially reduced in hippocampus and parietal cortex [319-321], whereas the levels of BDNF protein are reduced in hippocampus and in multiple areas of cortex [322-324]. In addition, in pre-clinical stages of AD it was also detected, in parietal cortex, a reduction in protein levels of both BDNF and its precursor pro-BDNF [325, 326]. This reduction of BDNF and pro-BDNF levels positively correlates with disease progression and the loss of cognitive function [325]. The importance of BDNF in AD is further enhanced by a number of studies that associated BDNF polymorphisms with the disease. The BDNF Val66Met polymorphism is probably the most investigated one, and influences intracellular trafficking and activity-dependent secretion of BDNF [327]. Multiple studies have shown that the synergetic interaction between APOE ϵ 4 and BDNF Val66Met polymorphisms is associated with increased risk and progression to AD [328-331]. Interestingly, in non-demented elderly individuals, BDNF Val66Met polymorphism increases amyloid load in brains from the APOE ϵ 4 carriers, but not in APOE ϵ 4 noncarriers, and this A β deposition negatively correlates with episodic memory encoding [332].

Beyond the reduction on BDNF levels, alterations in the levels of TrkB receptors have also been found in AD brain. In particular, it was reported that TrkB-FL is decreased in hippocampus and in temporal and frontal cortex of patients with advanced AD [322, 333]. A substantial decrease in TrkB, but also in TrkA and TrkC, was also found in AD patients in the cholinergic neurons from the nucleus basalis, an area severely affected during the disease [334, 335]. Similarly to what was observed for BDNF, the downregulation in Trk receptors levels is

progressive, starting in pre-clinical stages, and it correlates with the cognitive decline of patients [335]. Conversely, the levels of truncated TrkB receptor, a negative regulator of the full-length isoform, have been found to be increased in association with senile plaques in frontal cortex [322] and hippocampus [336] of AD patients. Moreover, in a recent study, it was reported an increase in protein levels of truncated TrkB receptors in hippocampus and temporal cortex of AD brains. The same study also found a selective increase in the mRNA levels of the neuron-specific TrkB-T-Shc isoform, without detecting differences in TrkB-T1 and TrkB-FL transcripts [337]. Although the overall evidences suggest that levels of truncated TrkB are increased in AD, in a previous study, no alterations on truncated TrkB levels were detected in temporal and frontal cortex of AD brain [333]. On the other hand, it was found that TrkB-T1 expression is increased in the APP/PS1 mice model, and its expression increases with age and amyloid load in frontal and parietal cortex, but not in hippocampus [30]. Interestingly, overexpression of TrkB-T1 in the APP/PS1 mice exacerbated their spatial memory deficits, while the overexpression of TrkB-FL ameliorates the deficits [30]. Finally, a recent family-based study observed a genetic association between polymorphisms in *NTRK2* (TrkB gene) and AD, enhancing the importance of TrkB in the susceptibility to this disease [338].

Interestingly, recent works suggested that BDNF and TrkB may be mechanistically involved in the pathogenesis of AD. Indeed, in a neuroblastoma cell line, it was shown that BDNF increases APP transcription and shifts the APP processing towards the non-amyloidogenic α -secretase cleavage, promoting the accumulation of AICD and sAPP- α [339, 340]. Conversely, blockade of BDNF signalling rapidly activates the amyloidogenic pathway and causes apoptotic death in cultured hippocampal neurons [341]. The role of BDNF in APP processing might be related with the observation that certain BDNF polymorphisms are associated with increased A β production in the brain [332]. In addition to the effects of BDNF in APP processing, it has been showed that acute activation of TrkB, by BDNF stimulation, induces a rapid decrease in levels of phosphorylated tau in cultured neurons, by a mechanism dependent on PI3K and GSK3 activity [342]. However, recent evidences showed that genetic reduction in BDNF levels (heterozygous BDNF knockout) did not exacerbate the amyloid load and tau pathology in aged transgenic AD mice models [343, 344]. Nevertheless, similarly to what was described for TrkB-FL, the genetic down-regulation of BDNF also exacerbated the spatial learning impairment in the APP/PS1 AD mice model [344].

In summary, the observations that 1) BDNF and TrkB-FL receptor are required for synaptic plasticity and neuronal survival on CNS [345], 2) Increased TrkB and BDNF signalling ameliorate the neurodegeneration and cognitive impairment in multiple AD models and 3) BDNF and TrkB levels are reduced in AD brain; raised the hypothesis that the loss of BDNF signalling contribute to the progression of AD. Whether the loss of neurotrophic support is a cause or a consequence of the disease, is a question far from being resolved.

2. Aims

The main goal of this project was to study the impact of A β peptides and adenosine A_{2A} receptors on BDNF signalling.

Multiple evidences suggest that BDNF signalling is impaired in Alzheimer's disease (AD). Indeed, both BDNF and its TrkB-FL receptor levels are decreased in AD *post-mortem* brain samples, while the truncated TrkB-T1 levels are increased. In the first part of this work, we aimed to test whether A β peptide, by itself, could induce similar alterations on TrkB receptor isoforms, and to study the mechanisms involved and the functional impact (Chapter 4).

BDNF synaptic actions are dependent or potentiated by adenosine A_{2A} receptors (A_{2A}R) activation. Therefore, in the second part of the work, we evaluated whether the *in-vivo* chronic blockade of A_{2A}R receptors, a therapeutic strategy already stated for AD, would affect BDNF effect upon CA1 hippocampal LTP (Chapter 5) and whether A_{2A}R inhibition would also affect the neuroprotective effects of BDNF upon A β -induced toxicity (Chapter 6).

3. Methods

The methods presented in this chapter were published in Kemppainen et al., 2012 [30], Jerónimo-Santos et al., 2014a [116] and Jerónimo-Santos et al., 2014b [346]. Experiments in Figure 3.1 were performed by H.V. Miranda. The methods described in chapters 3.14, 3.15 and 3.16 were used by S.H. Vaz, S. Parreira and S. Rapaz-Lérias to perform the experiments in chapter 4.8. The KW-6002 administration to animals (chapter 3.17) was in part performed by V.Batalha.

3.1. Materials

Unless stated otherwise all reagents were purchased from Sigma (St. Louis, MO, USA). Culture reagents and supplements were from Gibco (Paisley, UK). Recombinant human BDNF was a gift from Regeneron Pharm. (Tarrytown, NY). Rat recombinant m-calpain was from Calbiochem (MA, USA) and the N-terminal His6 tagged recombinant human TrkB active (aa.455-end) was from Millipore (Billerica, MA, USA). MG132, ALLN, MDL28170 and Pepstatin A were from Tocris Bioscience (Bristol, UK). A β ₂₅₋₃₅ and A β ₃₅₋₂₅ peptide and zVAD(OMe)-FMK were purchased from Bachem (Bubendorf, Switzerland), and A β ₁₋₄₂ peptide was purchased from rPeptide (Georgia, USA). [³H]GABA (4-amino-n-[2,3-³H]butyric acid, specific activity 92.0 Ci/mmol) and [³H]glutamic acid (L-[3,4-³H] glutamic acid, specific activity 49.6Ci/mmol) were purchased from PerkinElmer Life Sciences.

3.2. Amyloid- β peptides

Most of the experiments with A β were performed using the truncated A β ₂₅₋₃₅ form, and in selected key experiments also the full-length A β ₁₋₄₂ and the reverse A β ₃₅₋₂₅ peptide were used. Stock solutions of A β ₂₅₋₃₅, A β ₁₋₄₂ and A β ₃₅₋₂₅ peptides were performed in MilliQ water to a final concentration of 1mg/mL. To analyse the structural properties of the different species applied to neuronal cultures, both ThT binding assays and atomic force microscopy (AFM) were performed. Both A β ₁₋₄₂ and A β ₂₅₋₃₅ peptides showed a ThT emission wavelength shift followed by a fluorescence intensity enhancement, typical of β -sheet amyloid structures interaction (Figure 3.1A). By AFM the A β ₁₋₄₂ and A β ₂₅₋₃₅ peptides show similar structures as a heterogeneous population exhibiting protofibrillar and fibrillar ones (Figure 3.1B) [30].

The concentration of A β 42 present in interstitial fluid (ISF) of human AD brain parenchyma is not known and difficult to predict. Nevertheless, it is estimated that A β 42 is

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present in ISF at a concentration within nanomolar range [230]. A β toxicity may differ according to the duration of A β exposure, the species present (monomeric, oligomeric or fibrillar ones) and the length of A β peptide (e.g. 25-35, 1-42). It is, therefore, difficult to use conditions that mimic exactly what happen in human AD patients. The concentrations of A β used in our work were 25 μ M for A β ₂₅₋₃₅ and 20 μ M for A β ₁₋₄₂, similar to used by others [243]. It is worthwhile to note that, although the A β concentration used is relatively high, the exposure period to the peptide was much smaller (24 hours for the cultures, 3 hours in the acute slice preparations) than what happen in human AD patients (several years). Importantly, as a control, reverse A β ₃₅₋₂₅ peptide was used, also at a concentration of 25 μ M.

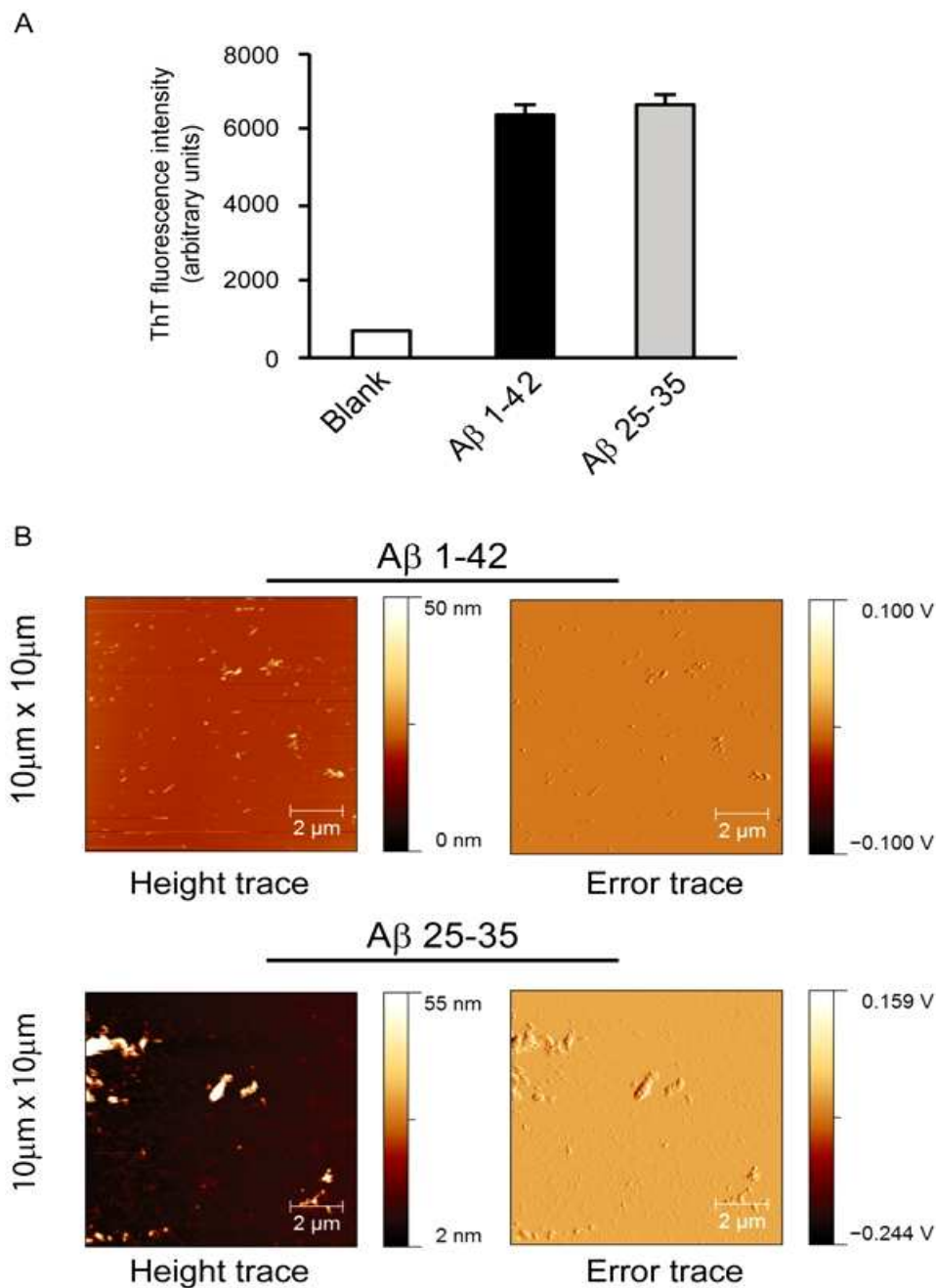
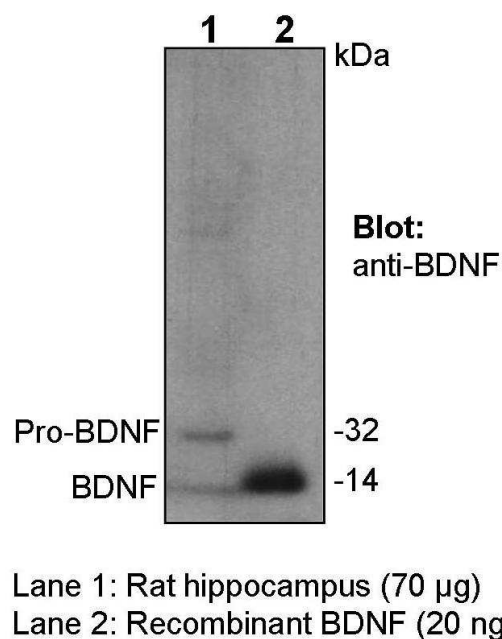


Figure 3.1 – A β ₁₋₄₂ and A β ₂₅₋₃₅ peptides have fibrillary structures.

(A) ThT fluorescence assay with excitation and emission wavelengths of 450 nm and 490 nm, respectively. Both peptides interacted with ThT, suggesting that they display an increased β -sheet structure, typical of fibrillary species. (B) AFM analysis of the A β ₁₋₄₂ and A β ₂₅₋₃₅. Both peptides appear as heterogeneous population with protofibrillar and fibrillar structures.

3.3. BDNF

BDNF used was a recombinant human-met-BDNF (supplied by Regeneron pharmaceuticals and manufactured by Amgen Inc.). The stock formulation of BDNF was: recombinant Human-met-BDNF 1.0mg/ml diluted in 150mM NaCl, 10mM sodium phosphate buffer, pH 7.2 and 0.004% Tween-20. The stock solution was diluted by a factor of 50.000, to achieve a final concentration of BDNF 20ng/ml (corresponding to 750 pM). To confirm the purity, a western-blot using 20ng of supplied BDNF was performed and probed with an antibody selective for BDNF (Abcam ab46176). It was only detected a band at ~14kDa, corresponding to mature BDNF (Figure 3.2).

**Figure 3.2 – Recombinant BDNF purity.**

Western-blot probed with the anti-BDNF (Abcam ab46176) antibody (raised against N-terminal of mature BDNF) with [lane 1] 70 μ g of protein from rat hippocampal homogenate (8week-old) and [lane 2] 20ng of recombinant Human-Met-BDNF. Pro-BDNF (~32kDa) was detected only on hippocampal homogenate.

3.4. Animals and brain areas used

Sprague-Dawley and Wistar rats were purchased from Harlan Interfauna Iberica, SL (Barcelona, Spain) and were housed in a temperature ($21 \pm 1^\circ\text{C}$) and humidity-controlled ($55 \pm 10\%$) room with a 12:12 hour light/dark cycle with food and water *ad libitum*. All animals were handled according with the current Portuguese Laws and with the European Union Directive (86/609/EEC) on the protection of Animals used for Experimental and other scientific purposes. All efforts were made to minimize animal suffering. Rats were deeply anesthetized with halothane before decapitation and tissue preparation. For functional studies we used the hippocampus, which is a brain area severely affected in AD, and where the effects of BDNF are extensively characterized. Since A β -induced TrkB alterations are similar in cortical and hippocampal cultures [30], we used cortical cultures for the molecular studies in order to increase the culture yield and reduce the number of animals.

3.5. Primary Neuronal cultures and drug treatments

Neurons were isolated from foetuses of 18-day pregnant females. The foetuses were collected in Hanks' balanced salt solution (HBSS-1) and brains were rapidly removed. The cerebral cortices were isolated and mechanically fragmented. Further tissue digestion was performed with 0.025% (wt/vol) trypsin solution in HBSS without Ca^{2+} and Mg^{2+} (HBSS-2) for 15 min at 37°C . After trypsinization, cells were washed and resuspended in Neurobasal medium supplemented with 0.5mM L-glutamine, 25mM glutamic acid, 2% B-27 and 25U/mL penicillin/streptomycin. Cells were plated at a density of 7×10^4 cells/cm², on 10 $\mu\text{g/ml}$ poly-D-lysine-coated dishes, and maintained at 37°C in a humidified atmosphere of 5% CO_2 . Incubations with A β peptides were performed at 7 or 14 DIV for 24 hours. In the experiments where protease inhibitors were used, the inhibitors were incubated 20 min before A β treatment.

3.6. Human brain sample

Frontal cortex from a control case was obtained from the Lille Neurobank, France (Male, 41 years old, *Post-mortem* Interval: 11hours) after scientific committee agreement.

3.7. Western-blot

For neuronal cultures, cells were washed with ice cold phosphate buffered saline (PBS) (137 mM NaCl, 2.7 mM KCl, 8 mM Na₂HPO₄·2H₂O and 1.5 mM KH₂PO₄, pH 7.4) and lysed with 1% NP-40 lysis buffer containing (in mM): 50 Tris-HCl (pH 7.5), 150 NaCl, 5 ethylenediamine tetra-acetic acid (EDTA), 2 dithiothreitol (DTT) and protease inhibitors (Roche, Penzberg, Germany). In experiments where rat hippocampi were homogenized, it was used a Radio-Immunoprecipitation Assay (RIPA) buffer containing: 50mM Tris-HCl (pH 7.5), 150mM NaCl, 5mM ethylenediamine tetra-acetic acid (EDTA), 0.1% SDS and 1% Triton X-100 and protease inhibitors cocktail (Roche, Penzberg, Germany). Cell lysates or homogenates were clarified by centrifugation (16.000g, 10min) and the amount of protein in the supernatant was determined by Bio-Rad DC reagent. All samples were applied with same amount of total protein and separated on 10% sodium dodecyl sulphate-polyacrylamide gel electrophoresis (SDS-PAGE) and transferred onto PVDF membranes (GE Healthcare, Buckinghamshire, UK). Membranes were stained with Ponceau S solution to check for protein transference efficacy. After blocking with a 5% non-fat dry milk solution in TBS-T (20 mM Tris base, 137 mM NaCl and 0.1% Tween-20), membranes were incubated with the primary (overnight at 4°C) and secondary antibodies (1hour at room temperature). Finally, immunoreactivity was visualized using ECL chemiluminescence detection system (Amersham-ECL Western Blotting Detection Reagents from GE Healthcare, Buckinghamshire, UK) and bands intensities were quantified by digital densitometry (ImageJ 1.45 software). The intensities of α -tubulin or Ponceau S bands were used as loading control.

The pan-TrkB mouse monoclonal antibody (1:1500), raised against the extracellular domain of human TrkB (aa. 156-322), was purchased from BD Bioscience (Franklin Lakes, NJ, USA) and its specificity was confirmed in Figure 3.3. The C-terminal of Trk-FL rabbit polyclonal antibody (1:2000), raised against the C-terminus (C-14), the α II-spectrin (C-3) mouse monoclonal antibody (1:2500), raised against human α II-spectrin (aa. 2368-2472), and the pan-Caspase-3 (H-277) rabbit polyclonal antibody (1:1000) were purchased from Santa Cruz, inc (CA, USA). The phospho-TrkA (Tyr 490) rabbit polyclonal antibody (1:1500), which detects TrkB receptor when phosphorylated on the corresponding residue (Tyr⁵¹⁵), was from Cell Signaling Technology (MA, USA). Phospho-TrkB (Tyr 816) antibody (1:1500) specifically detects TrkB when phosphorylated on Tyr⁸¹⁶. Anti-BDNF [ab46176] antibody (1:1000) and α -tubulin rabbit polyclonal antibody (1:5000) were purchased from Abcam (Cambridge, UK). The specificity of anti-BDNF antibody was confirmed (Figure 3.2). The IgG-horseradish peroxidase conjugated secondary antibodies used were goat anti-mouse and goat anti-rabbit (Santa Cruz,

3. Methods

CA, USA). Mouse anti-rabbit IgG light chain specific (Jackson ImmunoResearch Laboratories, West Grove, PA, USA) was used in immunoprecipitation experiment.

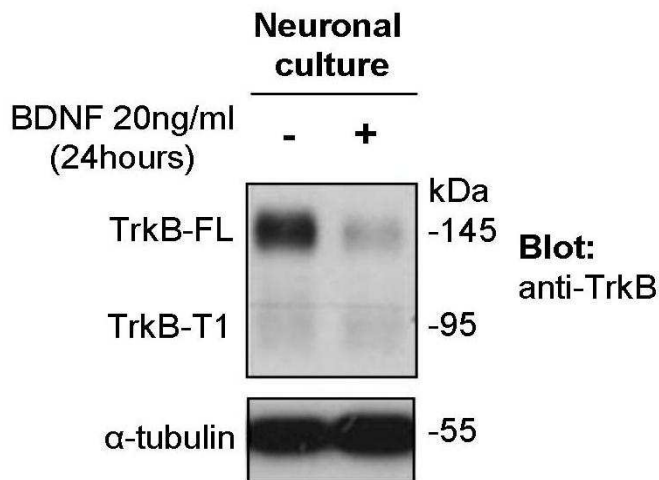


Figure 3.3 – Anti-TrkB antibody specificity

Western-blot probed with the anti-TrkB antibody (raised against extracellular portion of TrkB receptor) using non-treated neuronal cultures (7 days *in-vitro*) [lane 1] or treated with 20ng/mL of BDNF for 24hours [lane 2]. BDNF exposure leads to a selective down-regulation of TrkB-FL receptors without affecting TrkB-T1 levels as described in [347].

3.8. Cell death evaluation

Global cell death in neuronal cultures was evaluated by the lactate dehydrogenase (LDH) assay (Sigma) according to the manufacturer's instructions and using 120 μ l of the incubation medium. To specifically evaluate the degree of cell death induced by apoptosis, caspase-3 activation was measured in 50 μ g of total protein from cell lysates. General caspase-3-like activity was evaluated by enzymatic cleavage of p-nitroanilide chromophore (pNA) from the substrate N-acetyl-Asp-Glu-Val-Asp (DEVD)-pNA (Sigma). The proteolytic reaction was preceded in lysis buffer containing 50 μ M DEVD-pNA. The reaction mixtures were incubated at 37° C for 1 hour, and the release of pNA was determined by measuring absorbance at 405 nm using a 96-well plate reader. Active caspase-3 (17-kDa) levels were also evaluated by western-blot using a pan-caspase3 antibody (*Santa Cruz Biotech.*). Extension of neuronal degeneration was also evaluated by the breakdown of α II-spectrin, a cytoskeletal protein that is cleaved by caspase-3 and calpain.

3.9. N-sequencing

Five micrograms of TrkB active (Millipore) were incubated with purified m-calpain (2.5U) and CaCl₂ (2mM) in a final volume of 30µl for 30min at 25°C. The mixture was resolved by SDS-PAGE with 2mM of thioglycolic acid in upper running buffer and transferred to a PVDF membrane. After Ponceau S staining, the band of interest (TrkB-ICD) was cut with a sharp clean blade. The data was provided by the protein sequencing service of Instituto de Tecnologia Química e Biológica, Universidade Nova de Lisboa. Note that the proline residue is not detected by N-sequencing.

3.10. RNA extraction and qPCR

RNA isolation and qPCR were performed as previously described [348]. Briefly, total RNA was extracted from rat neuronal cultures or hippocampus (GE Healthcare RNAspin Mini RNA Isolation Kit). First-strand cDNA were synthesised from 1µg of total RNA (in 20µL) according to the manufacturer's recommendations (SuperScript First Strand Synthesis Systems for RT-PCR from Invitrogen, NY, USA). cDNA was amplified in Rotor-Gene 6000 real-time rotary analyser thermocycler (Corbett Life Science, Hilden, Germany) in the presence of SYBR Green Master Mix (Applied Biosystems, Foster City, CA, USA) and each specific gene primer (0.2µM for TrkB-FL and TrkB-T2 and 0.5µM for TrkB-T1). Primers specificity was confirmed by melting curves (Figure 3.4A). The threshold cycle (Ct) (Figure 3.4B) and the melting curves required for the relative quantification [349] were acquired with Rotor-Gene 6000 Software 1.7 (Corbett Life Science). β-actin was used as reference internal standard. Replica reactions were always performed. The primers used were: 5'-GTGATGCTGCTTCTGCTCAA-3' and 5'-CCTCCGAAG AAGACGGAGTG-3' for TrkB FL; 5'-TAAGATCCCCCTGGATGGGTAG-3' and 5'-AAGCAGCACTTCCTGGGATA-3' for TrkB T1; 5'-CGGGAGCATCTCTCGGTCT-3' and 5'-TCCACTTAAGAAGCAAATAAGC-3' for TrkB T2; 5'-AGCCATGTACGTAGC CATCC-3' and 5'-CTCTCAGCTGTGGTGGTGAA-3' for β-actin. The primers for TrkB-T2 were designed using the OligoAnalyzer 3.1 tool, provided by Integrated DNA Technologies (Coralville, IA, USA). The TrkB-T2 mRNA sequence from *Rattus norvegicus* was obtained from the GenBank sequence database of the National Center for Biotechnology Information (<http://www.ncbi.nlm.nih.gov/>). The primers were synthesized by Invitrogen.

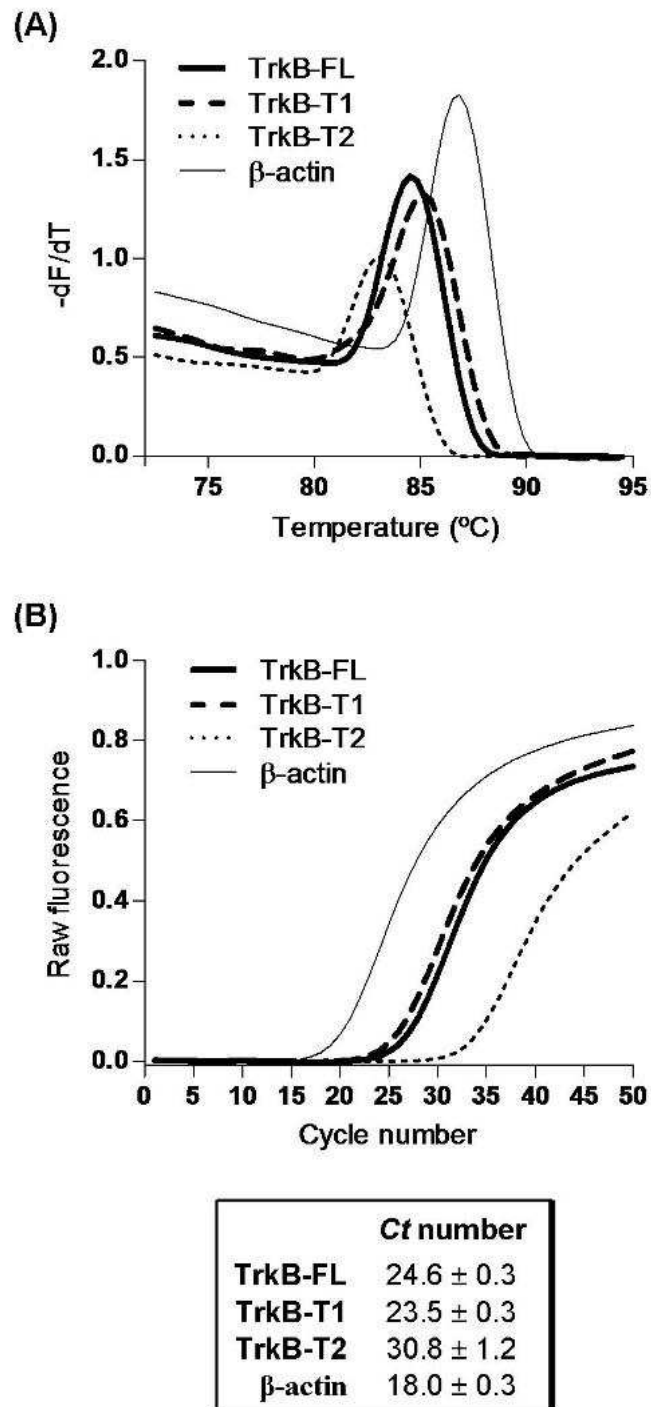


Figure 3.4 – Melting curves, amplification curves and Ct numbers from qPCR.

(A) Melting curves of TrkB isoforms (FL, T1 and T2) and β -actin transcripts obtained by qPCR in a control 8 DIV culture. The graph represents the first derivative of raw fluorescence plotted against the temperature. The single melting peak obtained for each curve indicates that a single PCR product is being amplified.

(B) Raw data obtained in a representative qPCR from a 8 DIV control neuronal culture for TrkB-FL, T1, T2 and β -actin transcripts. The graph represents raw fluorescence plotted against cycle number. The table represents the cycle threshold (Ct) values for TrkB-FL, T1, T2 and β -actin (values are mean \pm SEM of 8 independent control cultures).

3.11. Immunoprecipitation

Trk-FL receptors were immunoprecipitated from 500 μ l of neuronal cultures lysates (~1mg total protein) using 2 μ g of C-terminal Trk-FL (sc14) antibody. After overnight incubation at 4°C, 30 μ l of packed G-protein agarose beads were added for 24 hours at 4°C and then the tube was centrifuged and the supernatant (wash-flow) was collected. The remaining pellet of beads was washed 5 times with lysis buffer and resuspended in 100 μ L of calpain lysis buffer containing purified m-calpain and CaCl₂ (30min at 25°C, as described above). The reactions were boiled at 95°C in the presence of denaturing SDS-sample buffer.

3.12. Calpain in-vitro digestion

In calpain digestion assays, the cultured cells or brain tissue were homogenized on ice in 1% NP-40 buffer containing in (mM): 50 Tris-HCl (pH 7.5), 150 NaCl, 0.1 EDTA, 2 DTT, 1 phenylmethylsulfonyl fluoride (PMSF) and Aprotinin 5 μ g/ml. The homogenates were clarified by centrifugation (16.000g, 10min) and protein concentration was determined. In exogenous calpain digestion assays, the purified rat m-calpain (Calbiochem) was incubated for 30min at 25°C in a 100 μ l final volume of lysis buffer containing 100 μ g of homogenate protein and 2mM of CaCl₂ (unless stated otherwise). In endogenous calpain digestion assays, 5mM of CaCl₂ and/or MDL28170 were added to the homogenates for 4 hours at 25°C. In calpain digestion assays (exogenous or endogenous), each condition have the same amount of protein and total volume. For endogenous calpain activation in synaptosomes, CaCl₂ and/or MDL28170 (20 μ M) were added to the intact isolated synaptosomes suspended in KHR buffer, for 30min at 37°C. All reactions were stopped by boiling the samples at 95°C in the presence of the denaturing SDS-sample buffer.

3.13. Acutely prepared hippocampal slices

Male Wistar rats (8-10 weeks old) were deeply anesthetized with halothane before decapitation. The brain was quickly removed into ice-cold continuously oxygenated (O₂/CO₂: 95%/5%) artificial cerebrospinal fluid (aCSF) (124 mM NaCl, 3 mM KCl, 1.2 mM NaH₂PO₄, 25 mM NaHCO₃, 2 mM CaCl₂, 1 mM MgSO₄ and 10 mM glucose, pH 7.40) and the hippocampi were dissected out. The hippocampal slices were cut perpendicularly to the long axis of the hippocampus (400 μ m thick) and were allowed to recover functionally and energetically for at least 1 hour in a resting chamber filled with continuously oxygenated aCSF,

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at room temperature (22–25°C). In the experiments where the effects of KW-6002 were tested, the slices were used for electrophysiology recordings after the resting period. In the experiments where the effects of A β were tested, the slices were then incubated for 3 hours (the minimum time required to observe initial A β -induced changes in TrkB receptor) with oxygenated aCSF (control), or with aCSF containing A β ₂₅₋₃₅ peptide (25 μ M) or with aCSF containing A β ₂₅₋₃₅ and MDL28170 (calpain inhibitor, 20 μ M), or with A β ₁₋₄₂ (20 μ M), or with the inverted A β ₃₅₋₂₅. After the incubation period the slices were used for electrophysiology recordings or for synaptosomal isolation to evaluate GABA and glutamate release.

3.14. Isolation of synaptosomes

Hippocampal slices were homogenized in ice-cold isosmotic sucrose solution (0.32 M, containing 1mM EDTA, 1 mg/ml bovine serum albumin, and 10 mM HEPES, pH 7.4), and centrifuged at 3,000g for 10 min; the supernatant was centrifuged again at 14,000g for 12 min. The whole procedure was conducted at 4°C. The pellet was resuspended in 45% Percoll in KHR solution consisting of (in mM) NaCl 140, EDTA 1, HEPES 10, KCl 5, and glucose 5, and was centrifuged at 14,000g for 2 min. The synaptosomal fraction corresponds to the top buoyant layer and was collected from the tube. Percoll was removed by two washes with a KHR solution; synaptosomes were then kept on ice and used within 3 hours.

3.15. [³H] Neurotransmitter release from hippocampal synaptosomes

The [³H]GABA release experiments were performed as previously [350]. For each experiment, synaptosomes were prepared from approximately 60 hippocampal slices (30 per condition) from 6 hippocampi of 3 animals. Synaptosomes (protein concentration 1-2mg/ml) were resuspended in 2ml of oxygenated Krebs medium (in mM: NaCl 125, KCl 3, NaH₂PO₄ 1, glucose 10 NaHCO₃ 25, CaCl₂ 1.5 and MgSO₄ 1.2) and allowed to equilibrate for 5 min at 37°C. From this time onward, all solutions applied to the synaptosomes were kept at 37°C and continuously gassed with O₂/CO₂ (95%/5%). Aminooxyacetic acid (AOAA, 0.1 mM) was present in all solutions up the end of the experiments to prevent GABA catabolism by inhibition of GABA transaminase. The synaptosomes were loaded for 20 min at 37°C, with [³H]GABA (1.5 μ Ci/ml, 18.5 nM), together with 0.625 μ M unlabelled GABA to decrease specific activity of the [³H]GABA solutions to 2.3 μ Ci/nmol) and equally layered onto perfusion chambers over Whatman GF/C filters (flow rate, 0.8 ml/min; chamber volume, 90 μ l).

The [^3H]glutamate release assays were performed as routinely in our laboratory [350]. All procedures were similar to [^3H]GABA release experiments with the necessary modifications. Synaptosomes were loaded with 0.2 μM [^3H]glutamate (specific activity was 30–60 Ci/mmol) for 5 min and equally layered onto perfusion chambers over Whatman GF/C filters (flow rate, 0.6 ml/min; chamber volume, 90 μl).

After a 20 min washout period, the effluent was collected for 40 min in 2 min intervals. The GABA or glutamate release from synaptosomes was stimulated during 2 min with a high- K^+ solution (15 mM, isomolar substitution of Na^+ with K^+ in the perfusion buffer) at the 5th [first stimulation period (S_1)] and 29th [second stimulation period (S_2)] minute after starting sample collection. BDNF (30ng/ml) was added to the superfusion medium at the 9th minute, therefore before S_2 , and remained in the bath up to the end of the experiments, and its effect was quantified as percentage changes of the S_2/S_1 ratio compared with the S_2/S_1 ratio in the absence of BDNF in the same synaptosomal batch and under similar drug conditions. Thus BDNF effect upon S_2/S_1 ratio was determined from synaptosomes prepared from slices incubated without any drug, incubated with $\text{A}\beta$ or incubated with both $\text{A}\beta$ and MDL28170.

3.16. Calculation of drug effects on GABA and glutamate release

At the end of each experiment, aliquots (500 μl) of each sample as well as the filters from each superfusion chamber were analysed by liquid scintillation counting. The fractional release was expressed in terms of the percentage of total radioactivity present in the preparation at the beginning of the collection of each sample. The amount of radioactivity released by each pulse of K^+ (S_1 and S_2) was calculated by integration of the area of the peak upon subtraction of the estimated basal tritium release. In each experiment, two synaptosome-loaded chambers were used as control chambers, the others being used as test chambers. In the test chambers, the test drug was added to the perfusion solution before S_2 and the S_2/S_1 ratios in control and test conditions were calculated. The effect of the drug on the K^+ -evoked tritium release was expressed as percentage of change of the S_2/S_1 ratios in test conditions compared to the S_2/S_1 ratios in control conditions, in the same experiments (i.e., with the same pool of synaptosomes).

3.17. KW-6002 treatment

KW-6002 was synthesized according to described procedures [351]. The drug and the dose were selected according to described in [352]. Four to six week-old male rats were treated with an orally active $\text{A}_{2\text{A}}\text{R}$ antagonist, istradefylline (KW-6002), 3 mg/kg/day for 30 days in

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drinking water available *ad libitum* in light protected bottles. The vehicle (control) group were treated only with vehicle (0.025% methylcellulose in water) as described before [353]. The weight of the animals and the volume intake were assessed twice a week in both control and treated animals and the concentration of the solution adjusted so that the drug intake was constant. No differences in body weight or water intake were detected between the KW-6002 and vehicle group. The animals were sacrificed either immediately or after 24 h of KW-6002 withdrawal.

3.18. Ex-vivo electrophysiology recordings

Long-term potentiation (LTP) induction and quantification were performed as described previously [114]. Briefly, the hippocampal slices from 8-10 week-old Wistar rats were transferred to a recording chamber continuously superfused with oxygenated aCSF at 32°C (flow rate of 3ml/min in open system). The stimulation pulses were delivered every 10s alternately to two independent pathways through electrodes placed on Shaffer collateral/commissural fibres in stratum radiatum, and the fEPSPs were recorded in stratum radiatum of CA1 area (Figure 3.5A). LTP was induced by theta-burst protocol consisting of four trains of 100Hz, 4 stimuli, separated by 200ms (Figure 3.5B). We used theta-burst stimulation to induce LTP, since this pattern of stimulation is considered closer to what occurs physiologically in the hippocampus during episodes of learning and memory in living animals [354]. Furthermore, the facilitatory action of BDNF upon LTP is mostly seen under θ -burst [72]. In addition, we previously showed that the effect of BDNF upon CA1 LTP is more evident under weak (as the used in this work) than under strong θ -burst paradigms [113]. Therefore, we selected the optimal stimulation paradigm to observe an effect of BDNF upon LTP, so that we could evaluate the influence of A β upon the effect of BDNF.

One hour after LTP induction in one group of synapses, BDNF (20ng/ml) was added to the superfusion solution and LTP was induced in the other group of synapses, no less than 20min after BDNF perfusion. In experiments where CGS21680 was used, it was applied 15min before BDNF (which corresponds to 35min prior to LTP induction). Whenever an increase on the slope of fEPSP was detected in the presence of BDNF, the intensity of stimulation was adjusted before LTP induction for similar values recorded before BDNF application. LTP was quantified as percentual change in the average slope of the fEPSP taken from 46-60min after LTP induction in relation to the average slope of the fEPSP measured during the 14min before the induction of LTP. The effect of BDNF upon LTP was evaluated by comparing the magnitude of LTP in the first pathway in the absence of BDNF (control pathway), with the magnitude of LTP in the second pathway in the presence of BDNF (test pathway). The

independence of the two pathways was tested in the end of experiments by studying the pair-pulse facilitation (PPF) across both pathways, less than 10% facilitation being usually observed. In the absence of drugs, the LTP magnitude was similar in both independent pathways (Figure 3.5C).

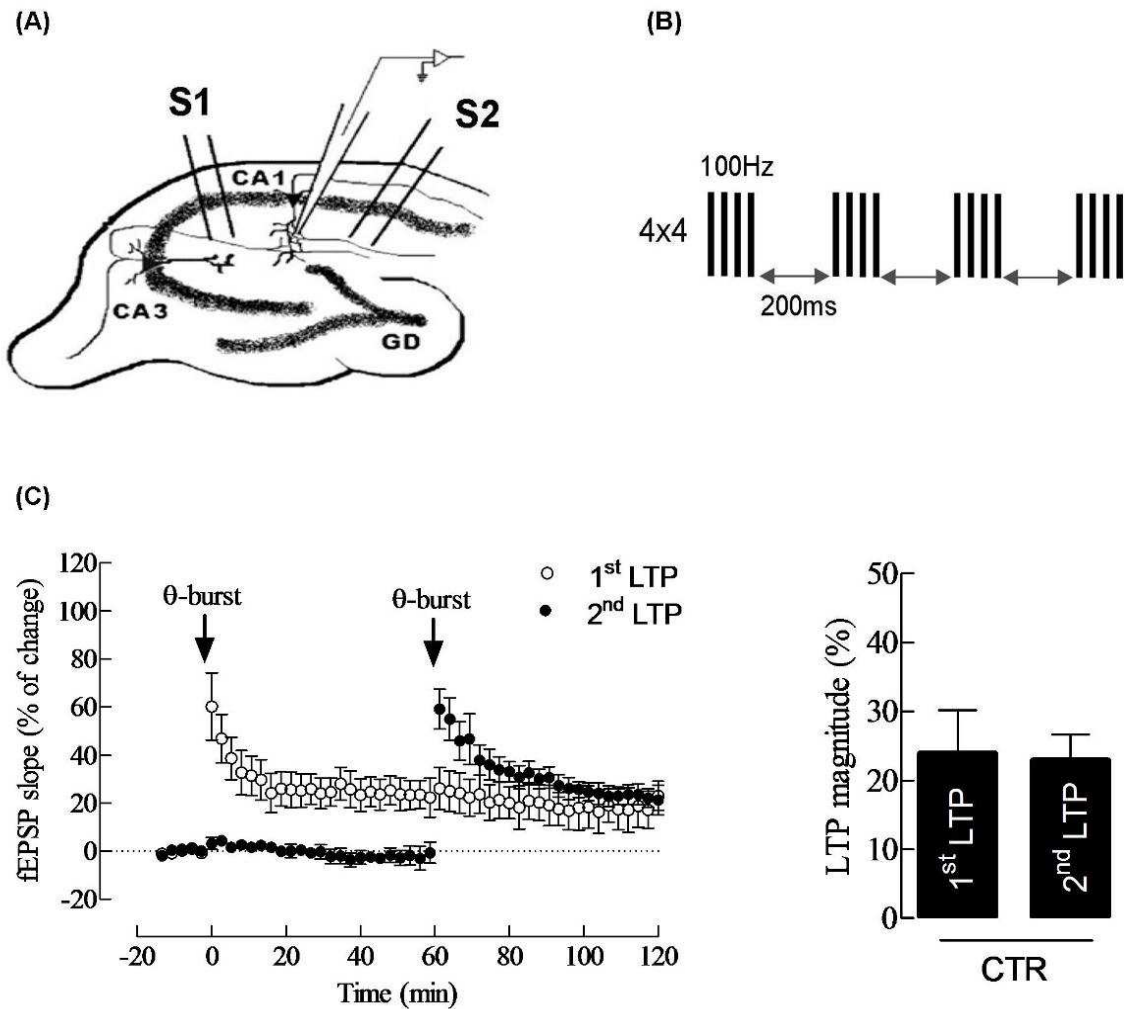


Figure 3.5 – Electrophysiology recording configuration and LTP magnitude on both pathways.

(A) Schematic representation of a hippocampal transverse slice showing the recording configuration used to obtain extracellular responses in the CA1 dendritic layer (stratum radiatum) evoked by stimulation of two separate sets of the Schaffer pathway (S1 and S2). (B) Schematic representation of the θ -burst stimulus paradigm used to induce LTP. (C) Left: Averaged time course changes in fEPSP slope on both independent pathways upon sequential θ -Burst stimulation in the first pathway (\circ) and 60 min after in the second pathway (\bullet) in rat hippocampal slices ($n=5$). Right: LTP magnitude (change in fEPSP slope at 46-60 minutes after θ -Burst stimulation) in relation to pre- θ -Burst values (0%) ($n=5$).

3.19. Input / Output curves

Input/output curves were performed after a stable baseline of at least 15 min. The stimulus delivered to the slice was decreased until no fEPSPs evoked and subsequently increased by steps of 20 μ A. Data from three consecutive fEPSPs were collected for each stimulation intensity. The range of all input delivered to the slice was typically from 60 μ A to a supramaximum stimulation amplitude of 360 μ A. The input/output curve was plotted as the relationship of fEPSP slope versus stimulus intensity.

3.20. Statistical analysis

The data are expressed as mean \pm SEM of the n number of independent experiments. The significance of differences between the means of two conditions was evaluated by Student's t-test. To perform multiple comparisons between the means of more than two conditions a one-way ANOVA followed by a Bonferroni post-test was performed. To perform comparisons on LTP magnitude in the presence or absence of BDNF between different slice treatments, a two-way ANOVA followed by a Bonferroni post-test was performed. Values of $p < 0.05$ were considered to represent statistically significant differences. *Prism GraphPad* software was used for statistical analysis.

4. Dysregulation of TrkB receptors and BDNF function by A β peptide is mediated by calpain

The work presented in subchapter 4.3 was published in Kemppainen et al., 2012 [30].

The remaining work described in chapter 4 was published in Jerónimo-Santos et al., 2014b [346].

The experiments described in subchapter 4.8 were performed by S. Vaz, S. Parreira and S. Rapaz-Lerias.

4.1. Summary

Brain-derived neurotrophic factor (BDNF) and its high-affinity full-length receptor, TrkB-FL, play a central role in the nervous system by providing trophic support to neurons and regulating synaptic plasticity and memory. TrkB and BDNF signalling are impaired in Alzheimer's disease (AD), a neurodegenerative disease involving accumulation of amyloid- β (A β) peptide. In the present study, we found that 1) A β selectively increases mRNA and protein levels of truncated TrkB isoforms, and strongly decreases TrkB-FL protein levels without affecting its mRNA levels; 2) A β induces a calpain-mediated cleavage on TrkB-FL receptors, downstream of Shc binding site, originating a new truncated TrkB receptor (TrkB-T') and an intracellular fragment (TrkB-ICD), which is also detected in *post-mortem* human brain samples; 3) A β impairs BDNF function in a calpain-dependent way, as assessed by the inability of BDNF to modulate neurotransmitter (GABA and glutamate) release from hippocampal nerve terminals, and long-term potentiation (LTP) in hippocampal slices. It is concluded that A β -induced calpain activation leads to TrkB cleavage and impairment of BDNF neuromodulatory actions.

4.2. Rational

Brain-derived neurotrophic factor (BDNF) is a neurotrophin that promotes neuronal survival, differentiation and synaptic plasticity through activation of its full-length receptor, TrkB-FL. Besides encoding for this receptor, the TrkB gene (*NTRK2*) also encodes for truncated isoforms [355], which may act as negative modulators of TrkB-FL signalling [25, 29]. Both decreases in the ratio between full-length (FL) and truncated (Tc) receptors and reduced BDNF signaling have been detected in several neurodegenerative disorders. Particularly, hippocampal and cortical *post-mortem* samples from AD patients revealed a decrease in both BDNF and TrkB-FL and an increase in TrkB-Tc levels [319, 321-323, 333]. These changes are thought to

4. Dysregulation of BDNF signalling by A β peptide

be involved in spatial memory impairments and, accordingly, the activation or overexpression of TrkB-FL has been associated to spatial memory improvements [30, 316, 356].

AD is characterized not only by the accumulation of intracellular neurofibrillary tangles made of hyperphosphorylated tau proteins, but also of extracellular plaques composed by amyloid- β peptides (A β). A β plaques are largely composed by A β ₄₀ and A β ₄₂, but also by A β fragments including the A β ₂₅₋₃₅ [357], which has been proposed to be the active region of the full-length A β peptide responsible for its neurotoxic effects [242]. Mechanisms underlying the neurotoxic actions of A β peptides are not fully understood, but the existing data suggests that oxidative stress, perturbation of Ca²⁺ homeostasis, mitochondrial dysfunction, synaptic loss and caspases and calpains activation are strongly involved [253-256]. Calpains are Ca²⁺-dependent proteases that play a physiologic role by the cleavage of several substrates, changing their function or localization. Abnormal activation of calpains and downregulation of its endogenous inhibitor (calpastatin) have been linked to AD [194, 358, 359]. In addition, calpain overactivation contributes to tau hyperphosphorylation, a hallmark of AD, through the activation of cyclin-dependent kinase 5 (CDK5), followed by the cleavage of its regulatory protein – p35 [282, 360, 361]. Moreover, calpain also contributes to the formation and accumulation of A β peptides and its inhibition prevents neurodegeneration and restores normal synaptic function and spatial memory in AD animal models [201, 202, 362].

4.3. A β increases truncated TrkB protein levels

Since in AD brain decreased TrkB-FL and increased truncated TrkB receptor levels have been reported, we hypothesized that amyloid-beta peptide (A β), by itself, could induce similar changes in TrkB receptor isoforms. To test this hypothesis, cortical and hippocampal cells were cultured for 7 DIV and treated with A β peptides and TrkB receptor immunoreactivity was evaluated by western-blotting. Incubation of cortical cells with A β_{25-35} (25 μ M) induced a dramatic increase in truncated TrkB receptor levels compared to control cells (100 ± 2.3 % vs. 223 ± 19.9 %; $n = 8$, $p < 0.01$, Student's-test, Figure 4.1A), whereas TrkB-FL receptor levels decreased (100 ± 1.7 % vs. 61 ± 6.3 %; $n=8$, $p < 0.01$, Student's-test, Figure 4.1A). The same pattern of alteration in TrkB receptor isoforms was also observed in hippocampal cultures (Figure 4.1A). The effects on TrkB receptors upon A β_{25-35} exposure were time and concentration-dependent (Figure 4.1B and C), so that longer incubation times with A β or higher concentrations of A β produced a more robust effect, with increasing changes on TrkB isoforms levels.

Since glial cells are enriched in truncated TrkB.T1 isoform [37], we tested the effect of the A β_{25-35} peptide on truncated TrkB in neuronal cultures previously treated with the antimitotic drug 5-Fluorouracil (5-FU). In spite of the marked reduction in the astrocytic marker, the glial fibrillary acidic protein (GFAP), observed in the cultures treated with 5-FU (Figure 4.2A, lower left panel), A β_{25-35} treatment still increased truncated TrkB receptor levels in a similar magnitude as that observed in cells from the same culture but not treated with 5-FU (Figure 4.2A, right panel). In cortical cultures (7 DIV) treated with the most frequent A β peptide in AD, the A β_{1-42} (10-20 μ M for 24h), also caused a concentration-dependent increase (≈ 28 % for 20 μ M) of the truncated TrkB and a concentration-dependent decrease (≈ 40 % for 20 μ M) in TrkB-FL levels (Figure 4.2B). We can therefore conclude that in primary neuronal cultures the A β peptide simultaneously increases the levels of truncated TrkB receptors and decreases levels of full-length TrkB receptors, producing a similar pattern of alterations as reported in the brain of AD patients.

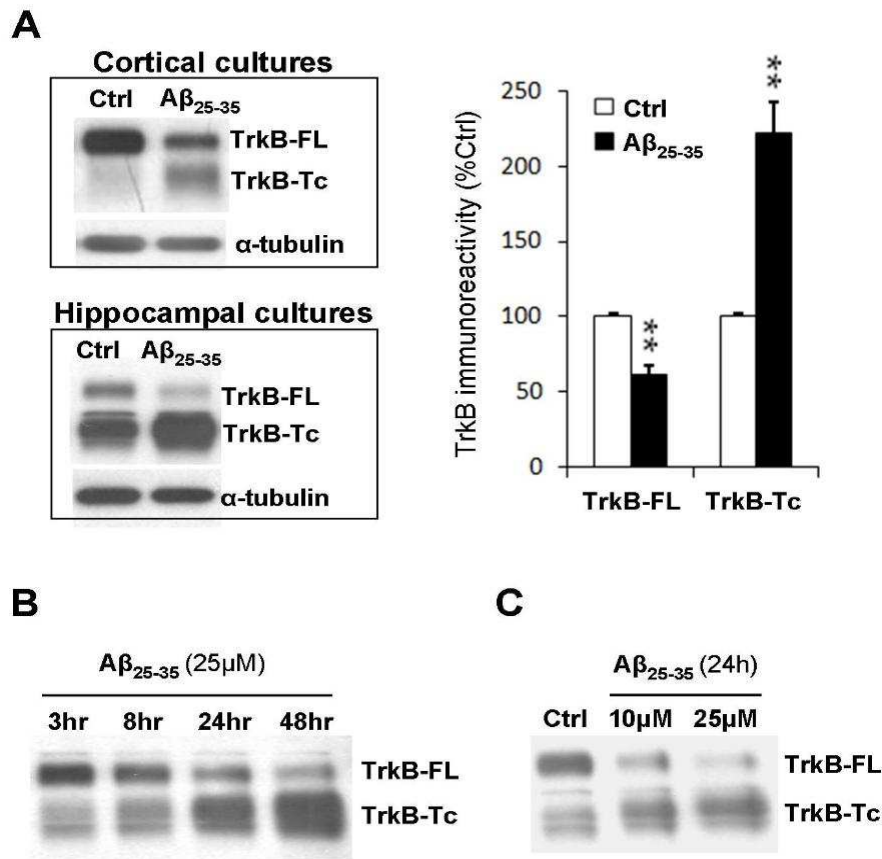


Figure 4.1 – Effect of A β 25-35 upon truncated and full-length TrkB receptors protein levels.

(A) Primary cultures of cortical cells (upper left panel) and hippocampal cells (lower left panel) were incubated at 7 DIV with A β_{25-35} (25 μ M) for 24h and levels of full-length (TrkB-FL) and truncated TrkB (TrkB-Tc) were determined by western-blotting. Average data from 8 independent cortical cultures is shown in right panel (** $p < 0.01$ compared to control (Ctrl), Student's t -test). (B) Time-dependent changes in TrkB-FL and TrkB-Tc densities after 3, 8, 24 and 48 hours of incubation of 7 DIV cortical cultures with A β_{25-35} (25 μ M). (C) Dose-dependent changes in TrkB-FL and TrkB-Tc levels after 24 hours of incubation of 7 DIV cortical cultures with A β_{25-35} .

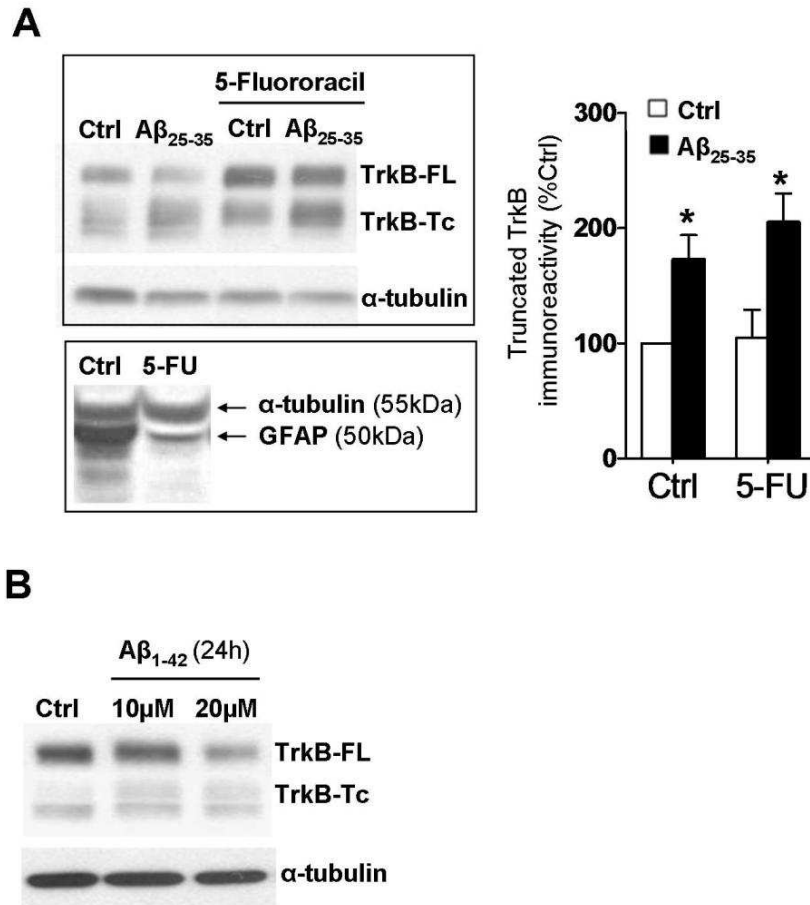


Figure 4.2 – Effect of glial cells upon A β -induced changes in TrkB isoforms levels.

(A) Comparison of the influence of A β_{25-35} (25 μ M) exposure in non-treated cortical cultures and in cultures treated with 5-Fluorouracil (5-FU) to markedly decrease glial cells number as confirmed by glial fibrillary acidic protein levels (GFAP). Average effect of A β_{25-35} (25 μ M) on truncated TrkB levels in 3 independent cultures both conditions were shown in left graph (* $p < 0.05$ as compared with non-treated control, Student's *t*-test). **(B)** Dose-dependent changes on TrkB-FL and TrkB-Tc levels on 7 DIV cortical cultures exposed for 24 hours to A β_{1-42} peptide.

Moderate cell death is expected to occur after A β peptide incubation. Indeed, 24h after incubating the neurons with A β_{25-35} (25 μ M) there was an increase (21 \pm 5%, $p < 0.05$, $n = 6$) in activity of lactate dehydrogenase (LDH), a soluble cytosolic enzyme that is released following loss of membrane integrity resulting from either apoptosis or necrosis [363], into incubation medium. The intracellular caspase-3 activity, a central mediator of apoptotic cell death, was even more markedly increased (3 fold increase, Figure 4.3B, $p < 0.01$, $n = 4$). The cell-permeable pan-caspase inhibitor, Z-VAD(OMe)-FMK, which is known to inhibit apoptotic cellular death [364], fully blocked the A β_{25-35} -induced activation of caspase-3 (Figure 4.3B, $p < 0.01$, $n = 4$).

4. Dysregulation of BDNF signalling by A β peptide

However, the pan-caspase inhibitor failed to influence the A β_{25-35} -induced increase in TrkB-Tc and decrease in TrkB-FL levels (Figure 4.3C and D, $p < 0.05$, $n = 4$). These results indicate that A β -induced alterations on TrkB receptors isoforms are not a direct consequence of apoptotic cellular death.

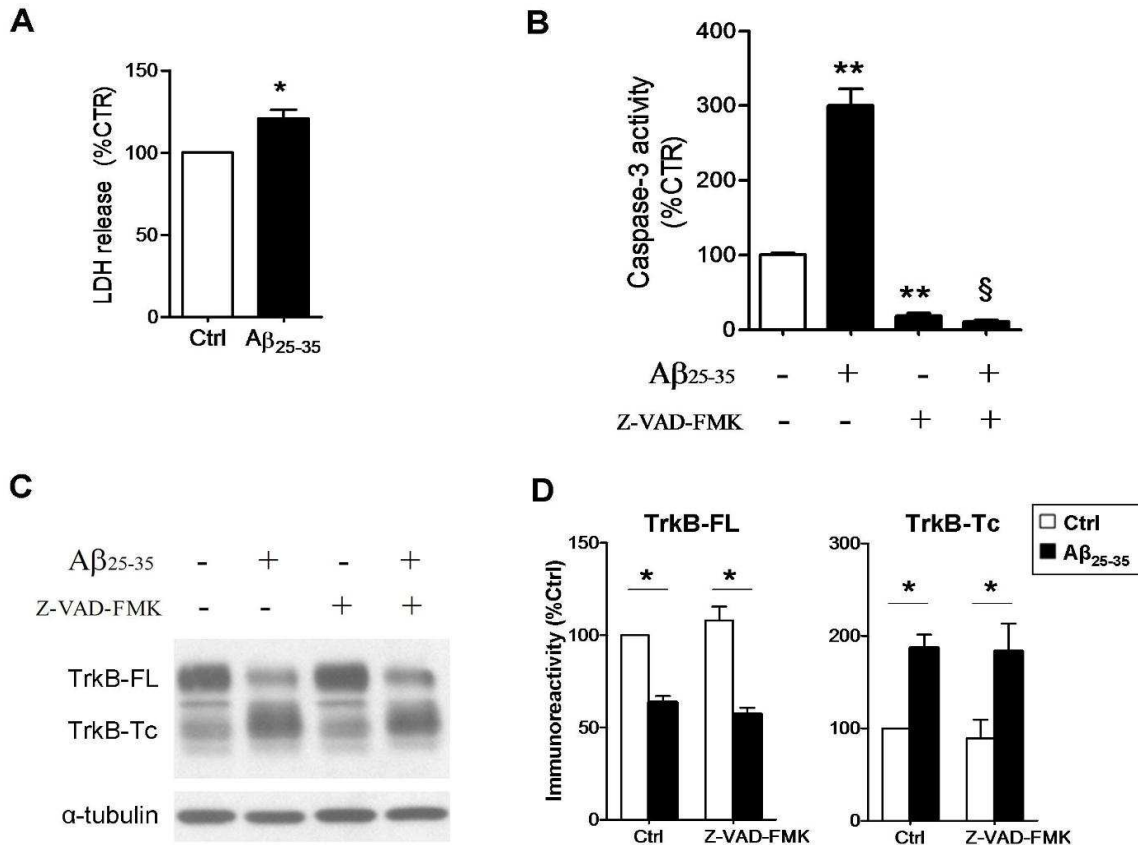


Figure 4.3 – Effect of caspases inhibition upon A β -induced changes in TrkB isoforms levels.

(A) Primary cultures of cortical cells were incubated at 7 DIV with A β_{25-35} (25 μ M) for 24h and levels of released lactate dehydrogenase (LDH) were measured. Average data from 6 independent cortical cultures is represented (* $p < 0.05$ compared to control (Ctrl), Student's t -test). (B) Caspase3-like activity of cell lysates measured after 24hours of A β_{25-35} (25 μ M) incubation of 7 DIV cortical cultures, in the presence and absence of the pan-caspase inhibitor Z-VAD(OMe)-FMK (20 μ M). (** $p < 0.01$ compared to control (Ctrl); § $p < 0.01$ compared to A β_{25-35} alone; ANOVA with Bonferroni's correction). (C) Representative western-blot image of TrkB-FL and TrkB-Tc levels detected in neuronal cultures from 7 DIV with A β_{25-35} (25 μ M) in presence or absence of Z-VAD(OMe)-FMK (20 μ M). (D) Average data from densitometry quantification of TrkB-FL (left) and TrkB-Tc (right) immunoreactivity (C) of 4 independent cortical cultures (* $p < 0.05$, Student's t -test).

4.4. A β up-regulates TrkB-T1 mRNA levels

To evaluate the effects of A β upon TrkB receptors expression, we determined the mRNA levels of the main TrkB isoforms produced by alternative splicing (FL, T1 and T2). qPCR data showed that neuronal cultures incubated with A β_{25-35} (25 μ M) for 24 hours displayed a significant increase of truncated TrkB-T1 ($45 \pm 19\%$, $n=8$, $p<0.05$, Figure 4.4) and truncated TrkB-T2 ($58 \pm 17\%$, $n=8$, $p<0.05$, Figure 4.4) mRNA levels as compared to non-treated control cultures. Conversely, no significant change of TrkB-FL mRNA levels was detected upon A β_{25-35} incubation (Figure 4.4, $n=8$). As shown in Figure 3.4B, the TrkB-FL and TrkB-T1 are the main TrkB isoforms present in the cultures, while TrkB-T2 was expressed at lower levels. Thus, only TrkB-T1 will be mentioned henceforward, since it is the main spliced truncated isoform.

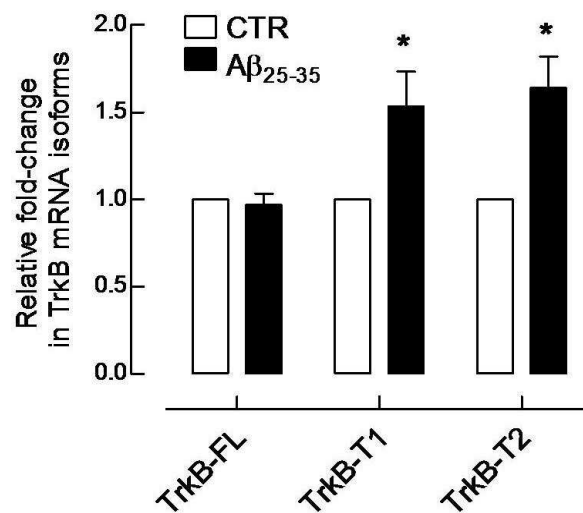


Figure 4.4 – A β peptide up-regulates mRNA levels of truncated TrkB-T1 and T2.

(A) Analysis of mRNA levels by relative qPCR of TrkB full-length (TrkB-FL) and truncated isoforms (TrkB-T1 and TrkB-T2) on 8 DIV cortical cultures treated with (black bars) or without (white bars-CTR) A β_{25-35} (25 μ M) for 24hours. β -actin was used as an internal loading control. * $p<0.05$ comparing to control (CTR) of the respective isoform ($n=8$, student's t -test). Values presented are mean \pm SEM.

4.5. A β induces a cleavage on TrkB-FL receptors

Although the above results clearly show that TrkB-FL mRNA levels were not significantly affected by A β_{25-35} , a strong decrease of $40 \pm 5\%$ in TrkB-FL protein levels was observed in A β_{25-35} -treated cells when compared to control (Figure 4.5A, n=10, p<0.01), as we previously observed for both A β_{25-35} and A β_{1-42} (Figure 4.1) [30]. Thus, in order to assess whether A β could also promote TrkB-FL cleavage, an antibody recognizing the intracellular C-terminal of TrkB-FL was used to detect a possible product of such cleavage. The results show that the decrease on TrkB-FL receptors, in A β_{25-35} -treated cultures, is concomitant with the formation of a ~32kDa band (Figure 4.5A, n=10, p<0.01 compared to control), indicating that A β induces a cleavage of TrkB-FL receptor, whereby it generates an intracellular domain (ICD) fragment (designated for now on as TrkB-ICD). Moreover, in cells treated with the full-length A β_{1-42} (20 μ M) there is also an increase in the formation of TrkB-ICD (Figure 4.6C).

Given that the cytosolic domain of rat TrkB-FL (starting at Lys⁴⁵⁴ until Gly⁸²¹) has a predicted molecular weight of 41.6 kDa, and since TrkB-ICD fragment migrates in SDS-PAGE with a relative molecular weight of ~32kDa, the cleavage site might be located ~10kDa downstream the transmembrane domain of the receptor. We thus anticipated that the A β -induced cleavage would lead to the generation of a new membrane-bound truncated TrkB receptor ~10kDa heavier than the natural truncated TrkB-T1 (which lacks the whole intracellular domain). To directly evaluate this possibility, we used a pan-TrkB antibody that recognizes an extracellular epitope and we increased the separation in SDS-PAGE electrophoresis, which allowed us to identify two distinct truncated TrkB bands: one broad band at ~90kDa corresponding to the natural truncated TrkB-T1 receptor, and another broad band around ~100kDa band corresponding to the new truncated receptor produced by the cleavage of TrkB-FL (henceforth designated as TrkB-T', Figure 4.5B). The TrkB-T' levels were very low in control neuronal cultures (Figure 4.5B and Figure 4.7C), being also negligible in control rat brain homogenates (Figure 4.7E), indicating that this fragment is only formed under conditions that trigger robust cleavage of TrkB-FL receptor.

Taken together, the data show that A β induces a selective up-regulation of truncated TrkB-T1 and T2 transcripts, while it simultaneously promotes TrkB-FL protein cleavage, thus producing a new truncated receptor (TrkB-T') and an intracellular fragment containing the C-terminal of the receptor (TrkB-ICD). The natural truncated receptors produced by alternative splicing (TrkB-T1 and -T2) and the cleavage-generated truncated receptor (TrkB-T'), all contribute to the total pool of truncated TrkB receptors, which will be referred in this work as TrkB-Tc.

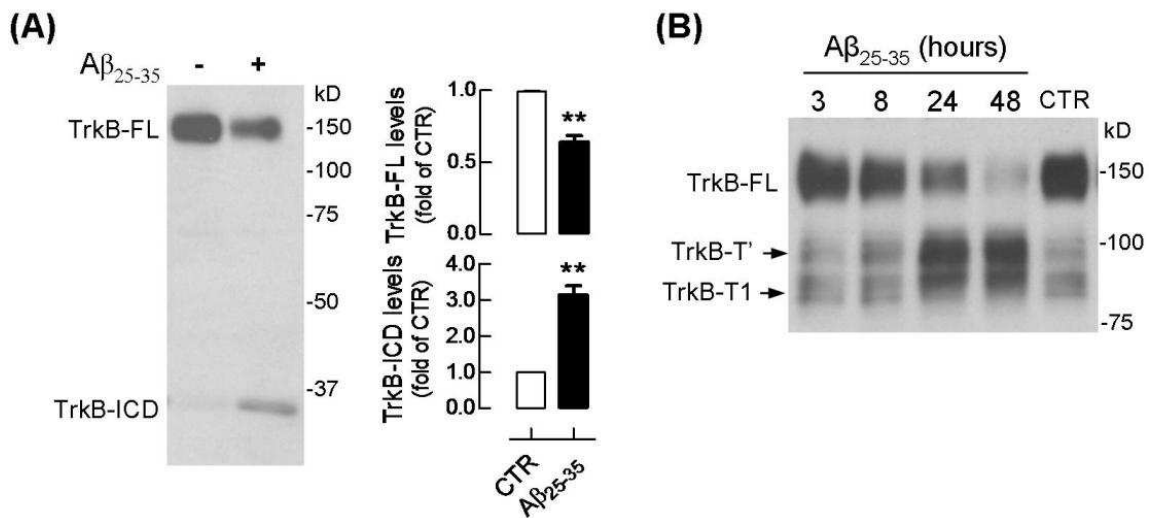


Figure 4.5 – A β peptide induces a TrkB-FL receptor cleavage.

(A) In left panel is a representative western-blot of 8 DIV neuronal cultures showing TrkB-FL receptor levels and the TrkB cleavage fragment (TrkB-ICD: ~32 kDa) after 24hours of A β_{25-35} incubation. The primary antibody used recognizes the C-terminal of Trk-FL. Right panels show the average band intensity of TrkB-FL (upper histogram) and TrkB-ICD (lower histogram). ** $p < 0.01$ comparing to control ($n = 10$, student's t -test). **(B)** Western-blot using a pan-TrkB antibody (extracellular TrkB epitope), which recognizes simultaneously the full-length (~145 kDa) and the truncated TrkB species: TrkB-T' (TrkB-FL cleavage product, ~100 kDa) and TrkB-T1 (natural truncated TrkB originated by alternative splicing, ~90 kDa). These bands were detected in neuronal cultures extracts prepared after the exposure to A β_{25-35} (25 μ M) for 3, 8, 24 and 48 hours or from control cultures (CTR) as indicated above each lane. All values presented are mean \pm SEM.

4.6. Calpain mediates the A β -induced TrkB-FL cleavage

The next series of experiments were designed to identify the enzyme involved in the cleavage of TrkB-FL by A β . The cell-permeable thiol proteases inhibitor, E-64d, caused a concentration-dependent inhibition of the TrkB-FL cleavage induced by A β_{25-35} , with a maximal effect achieved at the concentration of 100 μ M (Figure 4.6A). To identify which thiol proteases were involved in the cleavage, several inhibitors were tested, including the inhibitors of proteases with calpain-like activity, *N*-acetyl-Leu-Leu-norleucinal (ALLN 20 μ M), *N*-acetyl-Leu-Leu-methional (MG132 2 μ M) and MDL28170 (20 μ M), and the cell permeable pan-caspases inhibitor (z-VAD-FMK 20 μ M). In addition, a potent aspartyl proteases inhibitor, pepstatin A (1 μ M) was also tested. Neither the caspase inhibitor zVAD-FMK, nor pepstatin A,

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mitigated A β -induced cleavage of TrkB-FL receptors (Figure 4.6B). Conversely, the inhibitors of calpain-like activity ALLN, MG132 and MDL28170 significantly prevented A β -induced cleavage of TrkB-FL and the subsequent formation of TrkB-T' and TrkB-ICD fragments (Figure 4.6B, n=5, p<0.01).

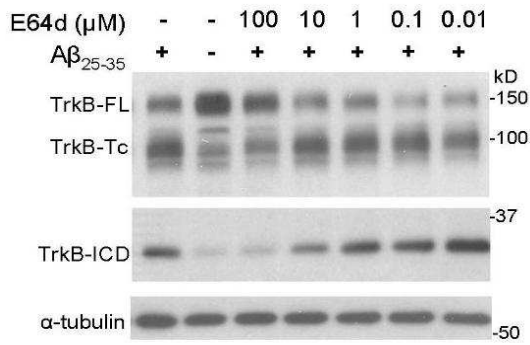
In parallel, we observed that the exposure of neuronal cultures to A β_{25-35} resulted in a strong activation of calpain, as confirmed by the 6-fold increase (Figure 4.6C, n=4, p<0.001) in the formation of the calpain-specific α II-Spectrin breakdown products (SBDP 150/145kDa), a standard assay for monitoring calpain activity. The A β_{1-42} peptide (20 μ M) also induced robust calpain activation on neuronal cultures (see Figure 4.6C).

Since calpains are calcium-dependent proteases, we next evaluated whether the activation of endogenous calpains by Ca²⁺ would induce TrkB-FL cleavage by itself, in the absence of A β . Therefore, cell lysates of neuronal cultures were incubated with 5mM of CaCl₂ for 4 hours at 25°C and, in these conditions, the characteristic TrkB-ICD band was detected, an effect fully blocked by the calpain inhibitor MDL28170 (Figure 4.7A, n=3, p<0.05). The cleavage of TrkB-FL by endogenous calpains was also detected in isolated nerve terminals (synaptosomes) prepared from adult rat hippocampus (Figure 4.7B). In addition, the cleavage of TrkB-FL and subsequent production of TrkB fragments was observed following the incubation of neuronal cell lysates, or cortical homogenates from adult rat, with purified recombinant rat m-calpain in presence of 2mM Ca²⁺ (~100kDa TrkB-T' and ~32kDa TrkB-ICD; Figure 4.7C). To confirm the specificity of the fragments detected, the full-length TrkB receptors were immunopurified from neuronal cultures and incubated with purified rat m-calpain. The results showed that rat m-calpain cleaved the immunopurified receptors producing the characteristic TrkB-T' and TrkB-ICD fragments, allowing to conclude that the fragments detected arise specifically from TrkB-FL receptors (Figure 4.7D).

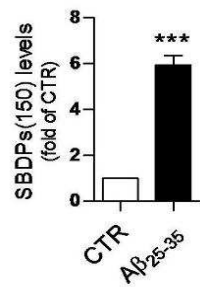
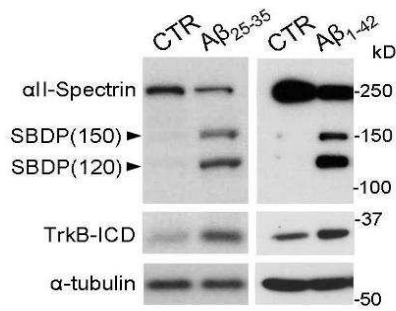
Human TrkB-FL and rat TrkB-FL share the same amino-acid sequence in the region of the calpain-cleavage site (Fig.3B). Thus, it is expected that human TrkB-FL could also be cleaved by human calpains. Indeed, basal levels of TrkB-ICD were detected in a parietal cortex homogenate from a human control case (Figure 4.7E). Addition of purified m-calpain completely cleaved human TrkB-FL, further enhancing the levels of TrkB-ICD fragment (Figure 4.7E). This result clearly showed that human TrkB-FL is also prone to be cleaved by calpains, leading to the production of TrkB-ICD. Contrary to the toxic A β_{25-35} , the reverse peptide A β_{35-25} (25 μ M) did not induce calpain activation and TrkB cleavage on neuronal cultures (Figure 4.8A and B, n=3).

As previously shown, A β selectively up-regulates TrkB-T1 mRNA levels (Figure 4.4). However, in opposition to what was observed for protein levels, the inhibition of calpains by MDL28170 did not affect the A β_{25-35} -induced changes upon mRNA levels of TrkB receptors (Figure 4.8, n=4).

(A)



(C)



(B)

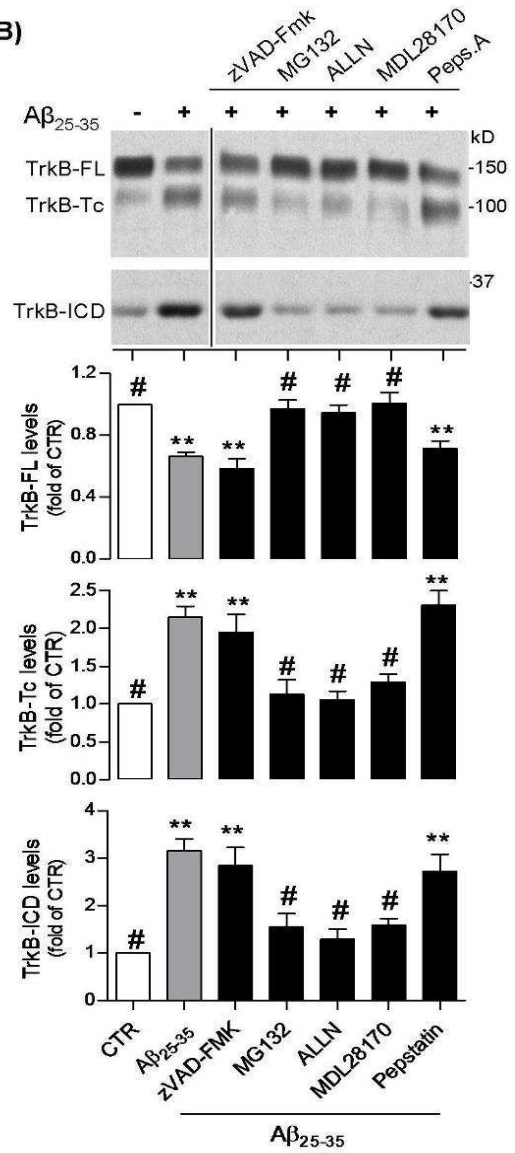


Figure 4.6 – A β -induced cleavage of TrkB-FL is repressed by inhibitors of calpain-like activity.

(A) Western-blot of 8 DIV neuronal cultures showing a concentration-dependent inhibition of A β_{25-35} -induced TrkB-FL cleavage and TrkB fragments production by E64-d (a general thiol proteases inhibitor).

(B) Upper image: Representative western-blot of 8 DIV neuronal cultures showing the impact of several protease inhibitors on the A β -induced TrkB-FL cleavage and TrkB fragments production. The protease inhibitors tested were: zVAD-FMK 20 μ M (pan-caspase inhibitor); MG132 2 μ M, ALLN 20 μ M, MDL28170 20 μ M (inhibitors of calpain-like activity) and Pepstatin A 1 μ M (aspartyl protease inhibitor). All bands represented in the image are from the same gel and the order of the first two lanes was rearranged. Lower panel: Average immunoreactive band intensity of TrkB-FL, TrkB-Tc and TrkB-ICD bands (upper, center and lower histogram, respectively). The order of the histogram bars is the same as the above lanes of the western-blot (** $p < 0.01$ compared to CTR, # $p < 0.05$ compared to A β_{25-35} , $n = 5$, one-way ANOVA with Bonferroni's multiple comparison test).

(C) Left image: Representative western-blot showing the effect of 24 hours of A β_{25-35} (25 μ M) and A β_{1-42} (20 μ M) incubation on 8 DIV neuronal cultures upon brain α -Spectrin levels and the formation of the calpain-specific spectrin breakdown products (SBDPs 145/150), caspase-3 specific SBDP (120) and TrkB-ICD fragment. Right histogram: Analysis of calpain-specific SBDPs (145/150) immunoreactive band intensity of control (white bar) and A β_{25-35} treatment (black bar), *** $p < 0.001$ comparing to control ($n = 4$, student's t -Test). All values presented are mean \pm SEM.

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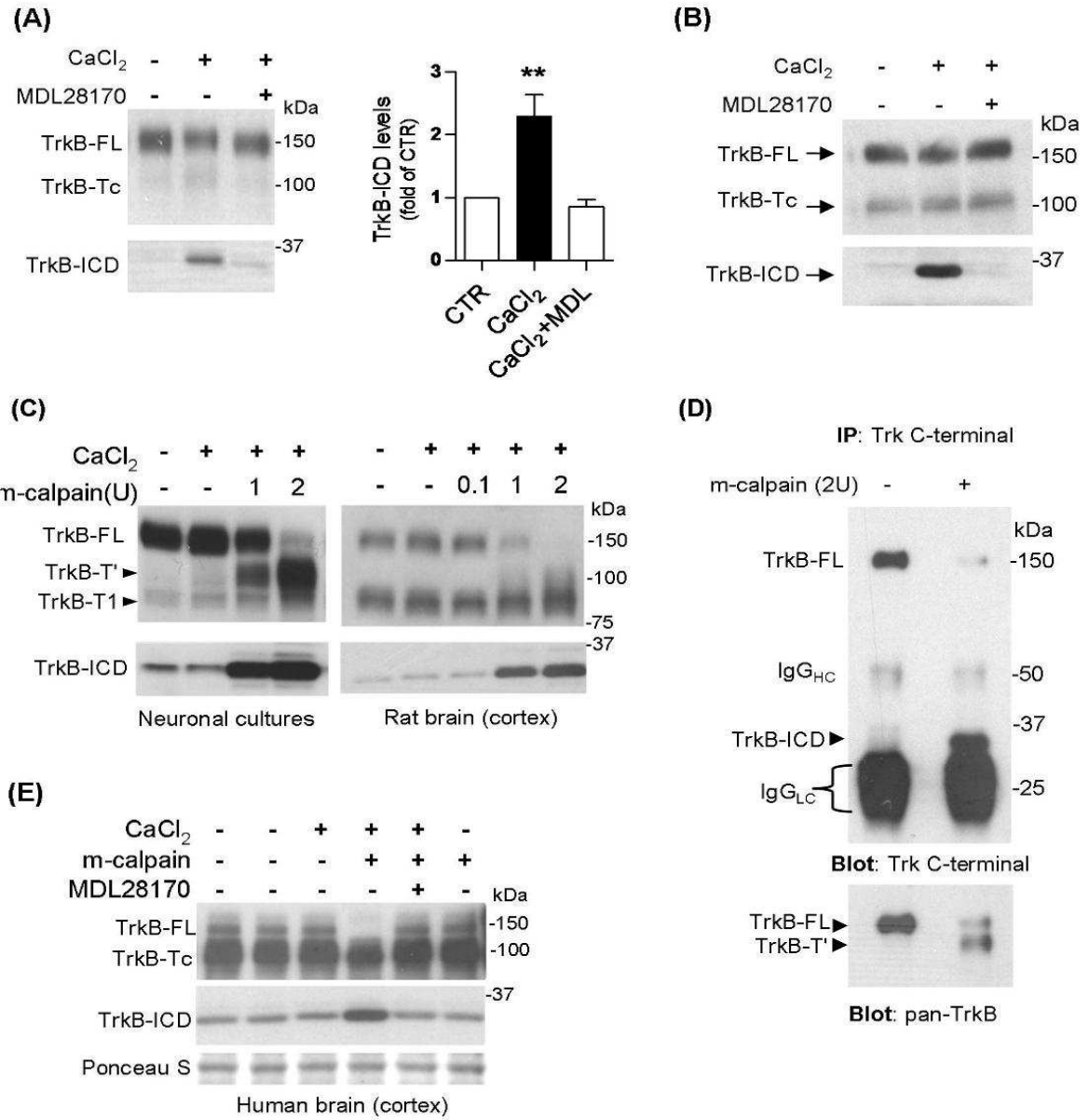


Figure 4.7 – Calpain cleaves rat and human TrkB-FL receptor.

(A) Left: Representative western-blot showing the production of TrkB-ICD upon CaCl₂ (5mM) incubation on cell lysates for 4h at 25°C. Right: Analysis of TrkB-ICD immunoreactive band intensity (**p<0.01, n=3, ANOVA). (B) Western-blot showing levels of TrkB-FL, truncated TrkB-Tc and TrkB-ICD fragment of isolated synaptosomes incubated in the absence or presence of CaCl₂ (5mM) or CaCl₂ with calpain inhibitor MDL28170 (20 μ M). (C) Cleavage of rat TrkB by exogenous m-calpain, with consequent production of TrkB-T' and TrkB-ICD in neuronal cultures lysates (left) and in adult rat brain homogenates (right). (D) Western-blot performed using anti- C-terminal of TrkB-FL antibody (upper panel) and the pan-TrkB antibody (lower panel). First lane: Immunopurified TrkB-FL receptors from neuronal culture lysates using the anti- C-terminal TrkB-FL antibody. Second lane: immunopurified TrkB-FL after an *In-vitro* digestion with m-calpain. IgG_{HC} (50kDa) and IgG_{LC} (20-30kDa) bands correspond, respectively, to the Heavy and Light chain of Immunoglobulin G of the antibody used for the immunoprecipitation. (E) Western-blot of *post-mortem* human cortical sample, showing endogenous levels of TrkB and TrkB-ICD (in control condition) and depletion of TrkB-FL with concomitant formation of TrkB-ICD when both exogenous m-calpain and Ca²⁺ were added in the absence of calpain inhibitor MDL28170. Ponceau S staining was used for loading control. All values presented are mean \pm SEM.

4.7. TrkB-FL calpain cleavage site is located downstream the Shc binding site

Given the molecular weight (~32kDa) of the TrkB-ICD band detected by western-blot, we hypothesized that the calpain cleavage site would be located close to the Shc binding site (Tyr⁵¹⁵). To clarify this possibility, 5 μ g of recombinant cytosolic domain of TrkB-FL (Human TrkB active, aa.455-end, Millipore) were digested by purified m-calpain. Following membrane staining after SDS-PAGE electrophoresis, we observed that the recombinant cytosolic domain of human TrkB-FL (~42kDa) were cleaved by m-calpain producing the same characteristic ~32kDa TrkB-ICD fragment band (Figure 4.9A), as detected in neuronal cultures exposed to A β . The TrkB-ICD band was then cut (as depicted in Figure 4.9A) and analysed by N-terminal sequencing (Edman degradation) in order to identify the first five N-terminal aminoacids, hence revealing the calpain cleavage site position. The five N-terminal aminoacids detected were Ser-Gln-Leu-Lys-Asp (S-Q-L-K-D), which allows to conclude that the TrkB-FL is cleaved between the Asn(N)⁵²⁰ and Ser(S)⁵²¹ residues, considering the rat TrkB sequence (Figure 4.9B). This cleavage site is located between the Shc binding site (Tyr⁵¹⁵) and the TrkB kinase domain (Figure 4.9B and C). Therefore, these data indicate that the truncated TrkB-T' receptor contains the Shc binding site (Tyr⁵¹⁵), whereas the TrkB-ICD fragment contains the complete tyrosine

kinase domain of TrkB-FL receptor (Ile⁵³⁷-Leu⁸⁰⁶), as well as the C-terminal tail of TrkB (Gln⁸⁰⁷-Gly⁸²¹), since the fragment is recognized by the antibody specific for the C-terminal tail of TrkB-FL, as shown above (Figure 4.5A).

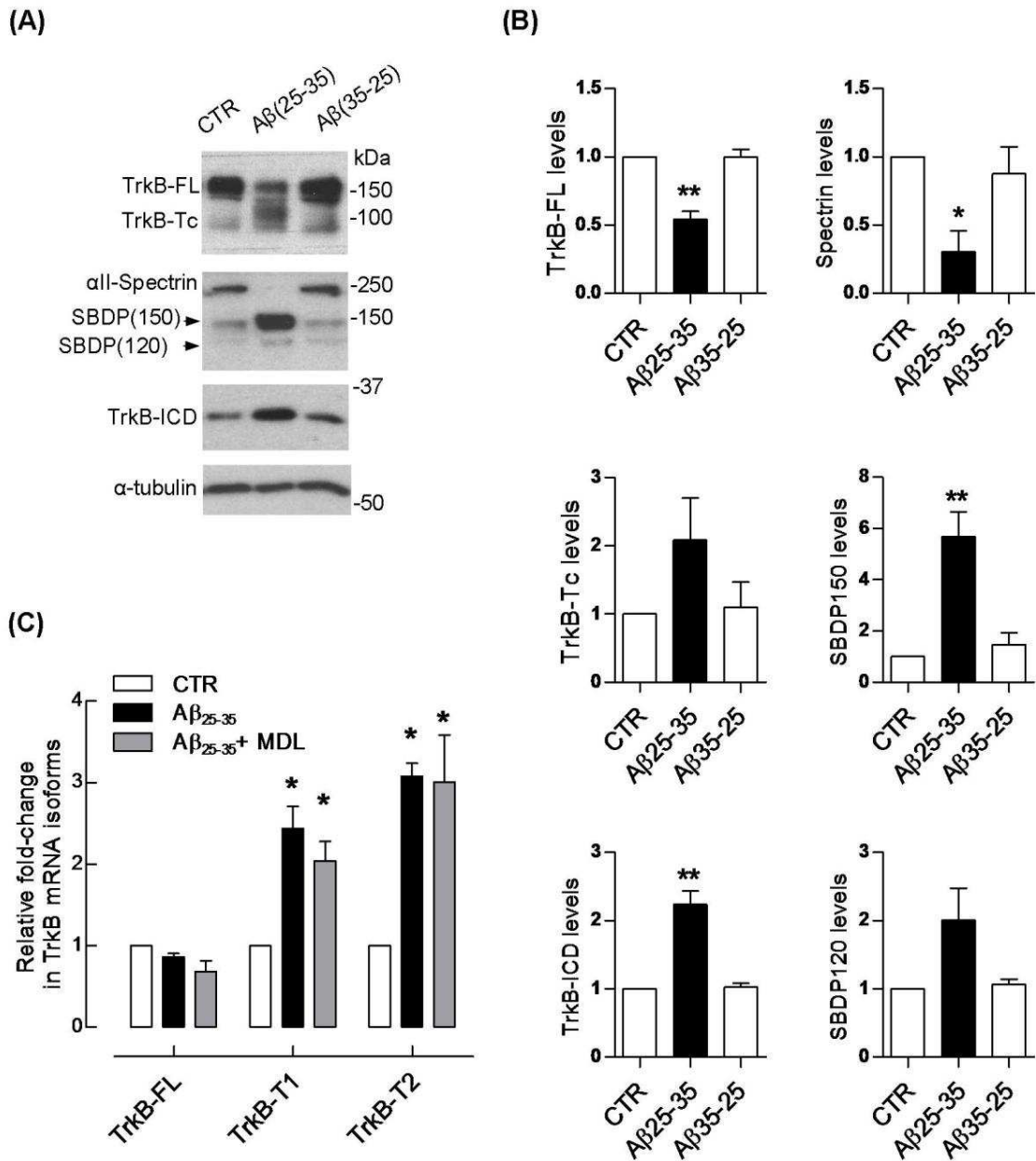


Figure 4.8 – Calpain inhibition does not block the A β -induced changes on TrkB mRNA levels.

(A) Western-blot showing the effect of A β ₂₅₋₃₅ and reverse A β ₃₅₋₂₅ peptide (both at 25 μ M) upon the levels of TrkB-FL, TrkB-Tc, TrkB-ICD and α I-spectrin along with its fragments (SBDP150 and 120), on 8DIV cortical neurons. **(B)** Analysis of bands intensities represented in (A) (* p <0.05, ** p <0.01, n =3, ANOVA). **(C)** mRNA levels obtained by qPCR of TrkB-FL, TrkB-T1 and TrkB-T2 on 8DIV cortical cultures treated with A β ₂₅₋₃₅ (25 μ M) (black bars) or with both A β ₂₅₋₃₅ (25 μ M) and MDL28170 (20 μ M) (gray bars) for 24hours. β -actin was used as an internal loading control. * p <0.05 comparing to control (white bars) of the respective isoform (n =4, ANOVA with Bonferroni's multiple comparison test).

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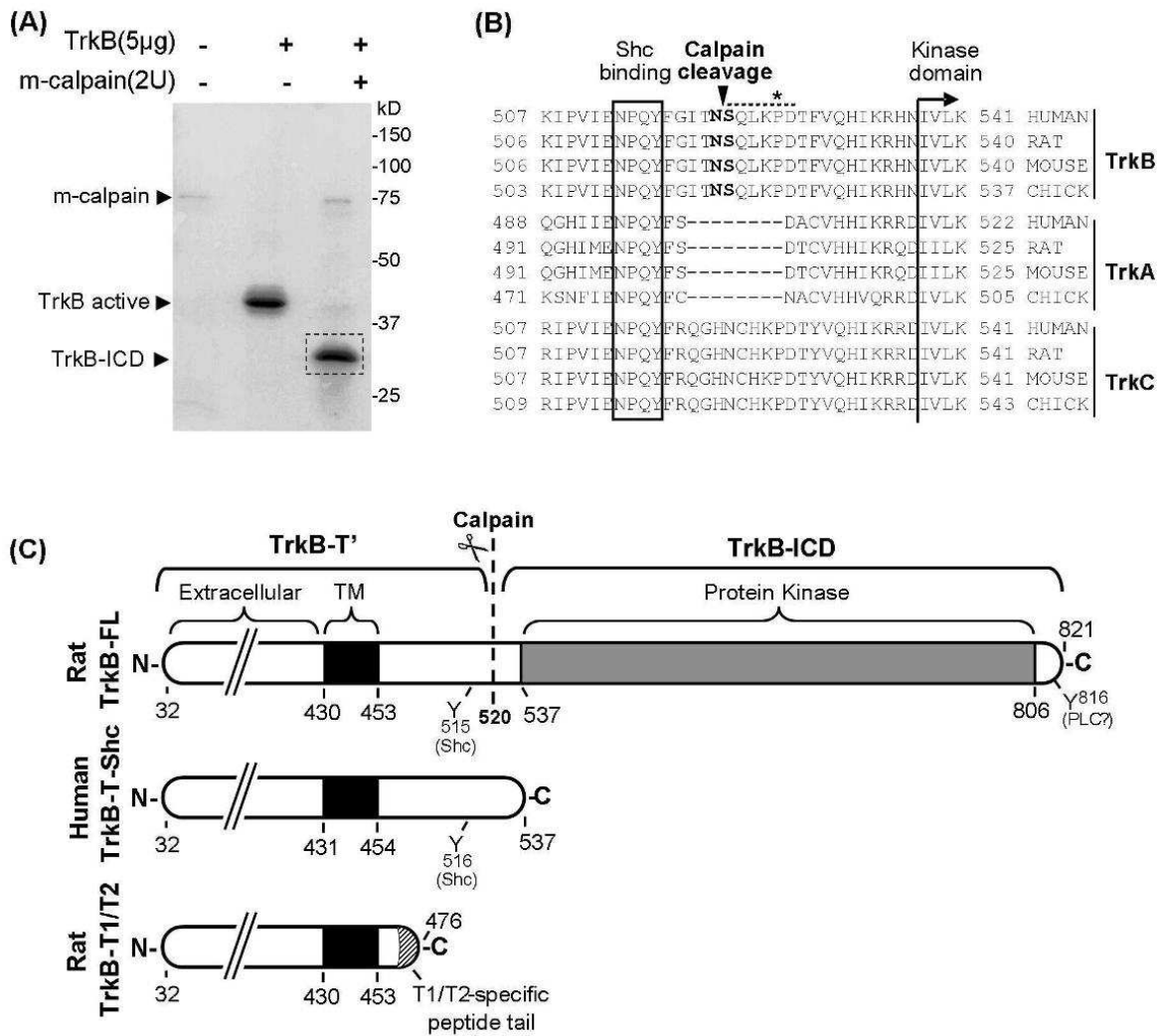


Figure 4.9 – Calpain cleaves TrkB downstream Shc binding site (Tyr 515).

(A) Ponceau S staining of a PVDF membrane after transfer from SDS-PAGE. Purified cytosolic domain of human TrkB (TrkB-active aa.450-end, Millipore) was digested with purified m-calpain, producing TrkB-ICD. TrkB-ICD band was cut (dashed square) and submitted for N-terminal sequencing (Edman degradation). CaCl₂ (2mM) was present in all conditions. **(B)** Multiple alignment of TrkA, TrkB and TrkC protein sequences for different species. The Shc binding motif, the Trk kinase domain, and the calpain-cleavage site identified by N-sequencing are identified in the sequence. Protein sequences were obtained in UniProtKD, and the multiple alignments were performed using the Clustal Omega tool. The proline residue (P) present in the TrkB sequence (*) was not detected by N-sequencing. **(C)** Schematic representation of mature rat TrkB-FL, TrkB-T1, T2, and human TrkB-T-Shc isoforms showing the relevant domains and aminoacid residues positions. Calpain-cleavage site (aa. 520) is represented based on N-sequencing data. Y⁵¹⁵ and Y⁸¹⁶ represent the phospho-tyrosine residues able to recruit Shc and PLC γ , respectively. Note that the first 31 aminoacid residues of TrkB compose the signal peptide and are not present in the mature protein. Protein sequences were obtained from UniProtKD database (Accession number: Q63604 for Rat and Q16620 for Human).

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Upon BDNF binding to TrkB-FL receptor, both Tyr⁵¹⁵ and Tyr⁸¹⁶ residues of the receptor are phosphorylated, allowing the binding of Shc adaptor protein and Phospholipase C- γ (PLC γ), respectively, with subsequent activation of signalling cascades [see 365]. By using specific antibodies against phosphorylated Tyr⁵¹⁵ and Tyr⁸¹⁶ of TrkB, we evaluated whether TrkB-T' or TrkB-ICD fragments could undergo phosphorylation on Tyr⁵¹⁵ or Tyr⁸¹⁶, respectively. In a first attempt, neurons were incubated with A β for 24hours to produce the TrkB fragments, and then, BDNF (20ng/mL) was briefly applied (10 min) to induce TrkB phosphorylation. Whereas BDNF incubation induced robust phosphorylation in Tyr⁵¹⁵ of TrkB-FL, such phosphorylation was not detected in the truncated TrkB-T' fragment (Figure 4.10A). The levels of phosphorylated (Tyr⁵¹⁵) TrkB-FL upon BDNF exposure were $40 \pm 9\%$ lower in the A β -treated cultures than in control cultures (Figure 4.10A, n=4, p<0.01), a reduction similar to that observed in total levels of TrkB-FL induced by A β (Figure 4.5A). Thus, the ratio between the levels of total TrkB-FL and BDNF-induced phosphorylated TrkB-FL does not differ when comparing control cultures with A β -treated cultures (Figure 4.10A, n=4), suggesting that TrkB-FL phosphorylation efficacy remained similar regardless A β treatment. A similar result was also obtained in more mature cortical cultures with 15 DIV (Figure 4.10B).

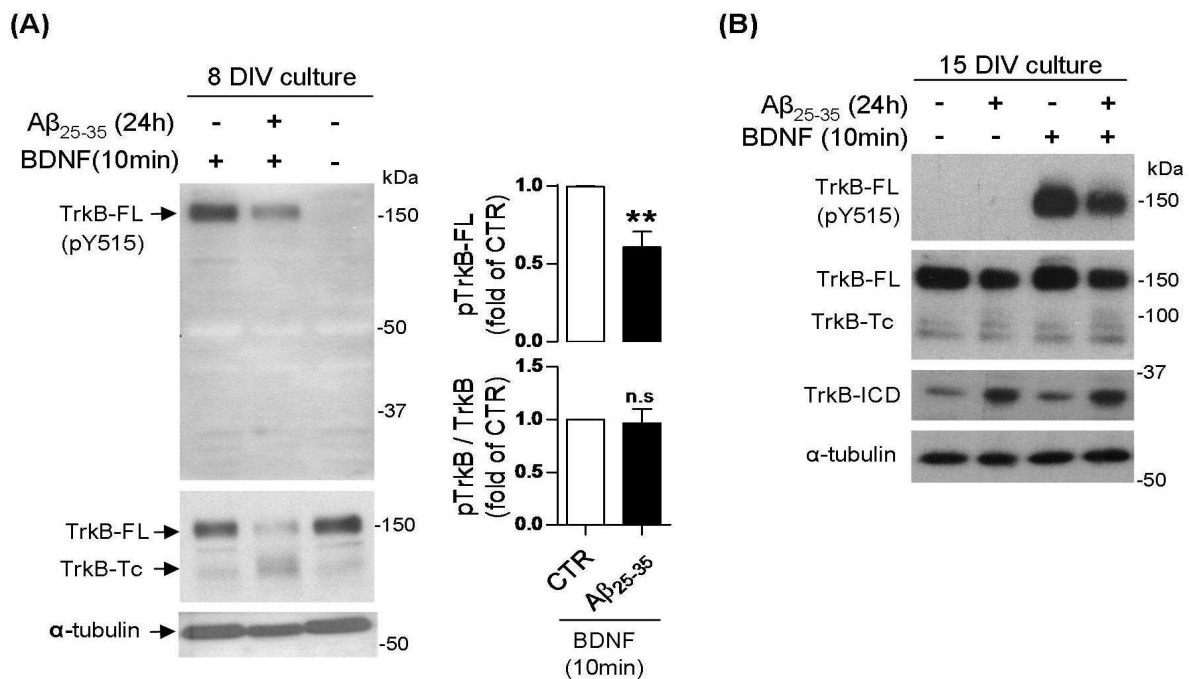


Figure 4.10 – Effect of A β upon BDNF-induced TrkB phosphorylation on Tyr 515.

(A) Left: Representative western-blot showing phosphorylated Tyr⁵¹⁵ of TrkB-FL (upper image), pan-TrkB (middle image) and α -tubulin (lower image) on 8 DIV neurons incubated firstly with (or without) 24hours of A β ₂₅₋₃₅ (25 μ M) and with (or without) 10min of BDNF (20ng/ml). Right: Levels of phosphorylated TrkB-FL (Tyr⁵¹⁵) normalized for α -tubulin (upper histogram) and ratio between phosphorylated and total TrkB-FL levels (lower graph) for control (white bars) and A β ₂₅₋₃₅ treatment (black bars). Values are mean \pm SEM (**p<0.01, n=4, student's *t*-Test, compared to CTR). (B) Western-blot showing phosphorylated Tyr⁵¹⁵ of TrkB-FL, pan-TrkB, TrkB-ICD and α -tubulin on a 15 DIV cortical culture incubated firstly with (or without) A β ₂₅₋₃₅ (25 μ M, 24hours) and then incubated with (or without) BDNF (20ng/ml) for 10min.

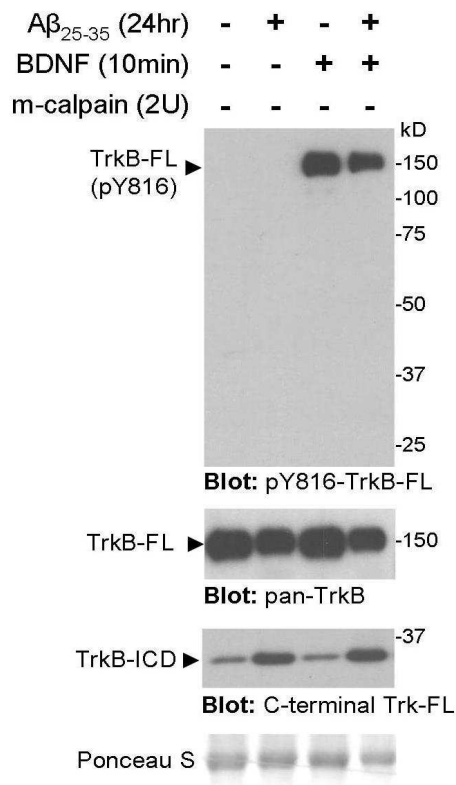


Figure 4.11 – Effect of A β upon BDNF-induced TrkB phosphorylation on Tyr 816.

Western-blot of 8 DIV neuronal cultures showing the levels of phosphorylated Tyr⁸¹⁶ of TrkB-FL; the total TrkB-FL; and total TrkB-ICD. The neurons were firstly incubated with or without A β (25 μ M) during 24hours, and then, briefly exposed for 10 min to vehicle or BDNF (20ng/ml) to induce TrkB phosphorylation. Ponceau S staining is shown as a protein loading control.

4.8. Calpain mediates detrimental effects of A β upon BDNF actions on GABA and Glutamate release.

The influence of A β upon the modulatory action of BDNF on glutamate and GABA release was evaluated on synaptosomes, which were prepared from rat hippocampal slices pre-treated with A β_{25-35} (25 μ M) or A β_{1-42} (20 μ M) for 3hours. The hippocampal synaptosomes were loaded with [3H]GABA or [3H]glutamate as previously described [350] and neurotransmitter release was evoked twice (S1 and S2) by perfusion with 15 mM KCl for 2 min.

In [3H]glutamate release assays, the S2/S1 ratio in control conditions was 0.75 ± 0.03 and it was increased up to 0.93 ± 0.04 when BDNF (20 ng/mL) was added before S2, corresponding to an enhancement of $27 \pm 7 \%$ in the evoked release of glutamate (Figure 4.12A, $n=5$, $p<0.05$). In [3H]GABA release assays, the S2/S1 ratio was, in control conditions, 1.06 ± 0.03 and it was significantly decreased to 0.82 ± 0.07 when BDNF (20ng/ml) was added before S2, corresponding to a decrease of $26 \pm 6 \%$ in the evoked release of GABA (Figure 4.12B, $n=7$, $p<0.05$). BDNF-induced inhibition of GABA and facilitation of glutamate release from hippocampal synaptosomes was expected based on our previous studies [77]. When synaptosomes were prepared from hippocampal slices that had been exposed for 3 hours to A β_{25-35} (25 μ M) or to A β_{1-42} (20 μ M), the S2/S1 ratios in GABA release assays (S2/S1 A β_{25-35} : 1.04 ± 0.06 , $n=13$; S2/S1 A β_{1-42} : 1.16 ± 0.02 , $n=3$, Figure 4.13A, E and Figure 4.12D) or glutamate release assays (S2/S1 A β_{25-35} : 0.85 ± 0.08 , $n=10$; S2/S1 A β_{1-42} : 0.85 ± 0.03 , $n=3$, Figure 4.13B, F and Figure 4.12C) were not significantly altered ($p>0.05$) as compared with control conditions. However, in synaptosomes prepared from A β_{25-35} - and A β_{1-42} -treated slices, BDNF lost its ability to decrease GABA release (S2/S1 A β_{25-35} +BDNF 0.96 ± 0.06 , $n=13$; S2/S1 A β_{1-42} +BDNF: 0.95 ± 0.17 , $n=3$ Figure 4.13A, E and Figure 4.12D) and to increase glutamate release (S2/S1A β_{25-35} +BDNF: 0.78 ± 0.07 , $n=10$; S2/S1A β_{1-42} +BDNF: 0.86 ± 0.07 , $n=3$ Figure 4.13B, F and Figure 4.12C). These results suggest that A β causes a functional impairment of BDNF modulatory actions upon glutamate and GABA release in the hippocampus.

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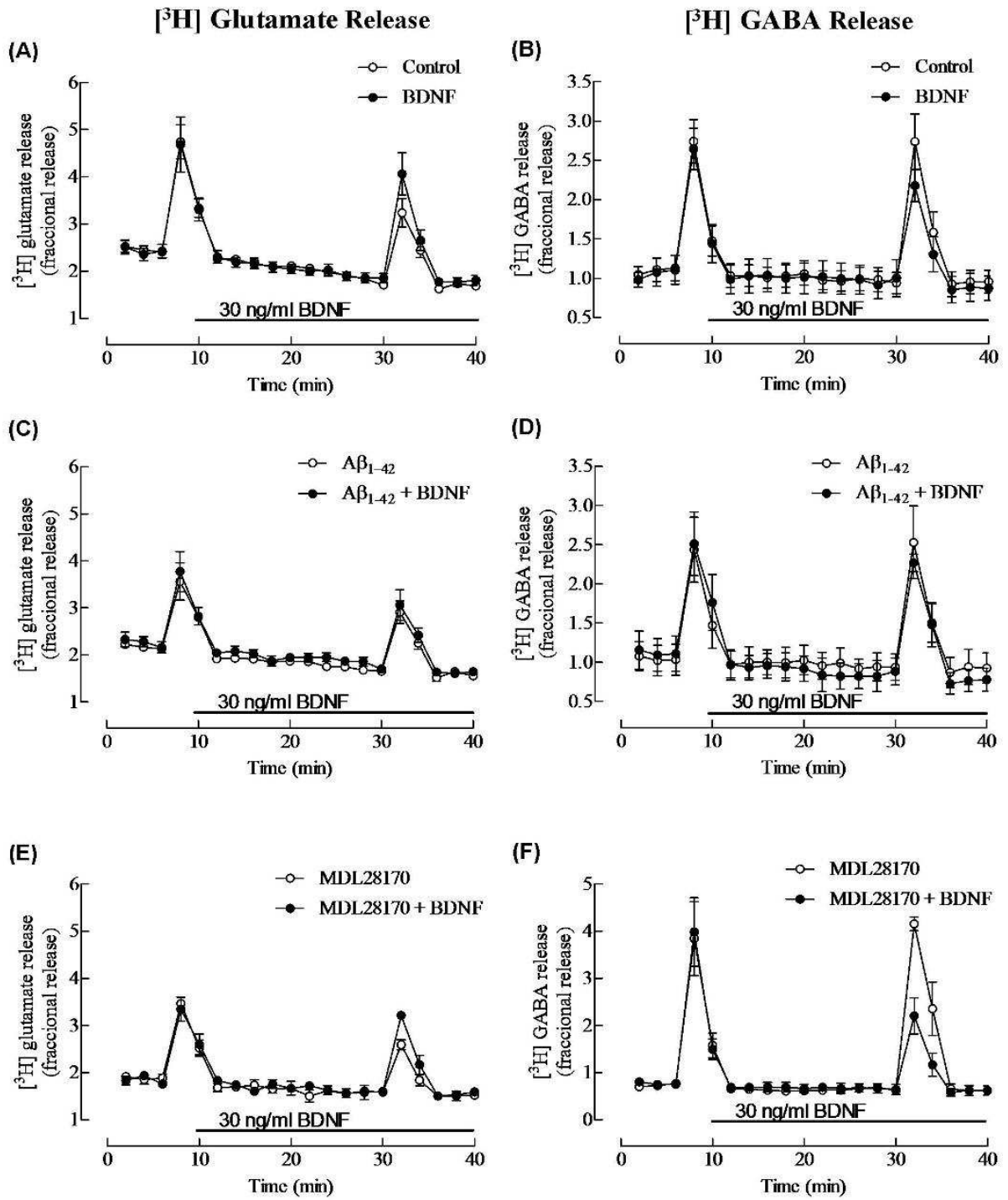


Figure 4.12 – Modulation of GABA and glutamate release by BDNF, A β ₁₋₄₂ and MDL28170.

Fractional release of [³H]glutamate (**A, C and E**) and [³H]GABA (**B, D and F**) evoked by two 15mM K⁺ stimuli of 2-minuts duration, at 5–7 min (S1) and 29–31 min (S2). BDNF (30 ng/ml) was added at 9 min and remained in the perfusion solution until the end of the experiments (closed circles), as indicated by the horizontal bar. Control curves in absence or in presence of A β ₁₋₄₂ (20 μ M) and in the presence of MDL (20 μ M), performed in parallel with the same synaptosomal batch, are represented by the open circles. BDNF effect upon [³H]glutamate fractional release (**A**), modulation of BDNF (30ng/ml) effect upon fractional release of [³H] glutamate by A β ₁₋₄₂ (20 μ M) (**C**) and by MDL (20 μ M) (**E**). BDNF effect upon [³H]GABA fractional release (**B**), and modulation of BDNF (30ng/ml) effect upon fractional release of [³H] GABA by A β ₁₋₄₂ (20 μ M) (**D**) and by MDL(20 μ M) (**F**). In each experiment, the S2/S1 ratio obtained while BDNF was present during S2 was normalized, taking as 100% the S2/S1 ratio obtained in parallel chambers under the same drug conditions but in the absence of BDNF. Data are represented as mean \pm SEM of three to ten independent experiments.

In order to determine the contribution of calpains towards the A β -dependent impairment of BDNF modulation of neurotransmitters release, hippocampal slices were incubated simultaneously with both A β ₂₅₋₃₅ (25 μ M) and MDL28170 (20 μ M) for 3 hours. In the absence of BDNF, MDL28170 did not impact S2/S1 ratios for both GABA (S2/S1 A β ₂₅₋₃₅+MDL: 1.13 \pm 0.05, n=4, Figure 4.13C,E) and glutamate release (S2/S1 A β ₂₅₋₃₅+MDL: 0.78 \pm 0.07, n=4, Figure 4.13D,F). On the contrary, in synaptosomes prepared from hippocampal slices incubated under similar conditions (A β ₂₅₋₃₅ and MDL28170), the addition of BDNF before S2 affected the S2/S1 ratio of GABA (S2/S1 A β ₂₅₋₃₅+MDL+BDNF: 0.78 \pm 0.15, p<0.05 vs S2/S1 A β ₂₅₋₃₅+MDL, n=4, Figure 4.13C,E) and glutamate (S2/S1 A β ₂₅₋₃₅+MDL+BDNF 0.96 \pm 0.08, p<0.05, vs S2/S1 A β ₂₅₋₃₅+MDL, n=4, Figure 4.13D,F) release similar to what had been observed when BDNF was added alone (Figure 4.13D,F and Figure 4.12A,B). The incubation of hippocampal slices with MDL28170 alone for 3 hours did not affect BDNF actions upon glutamate and GABA release (for glutamate: S2/S1 MDL+BDNF: 0.95 \pm 0.01, n=3, Figure 4.12E; for GABA: S2/S1 MDL+BDNF: 0.69 \pm 0.28, n=3, Figure 4.12F). These results strongly suggest that the impairment caused by A β upon the modulatory action of BDNF on neurotransmitter release is rescued by calpain inhibition.

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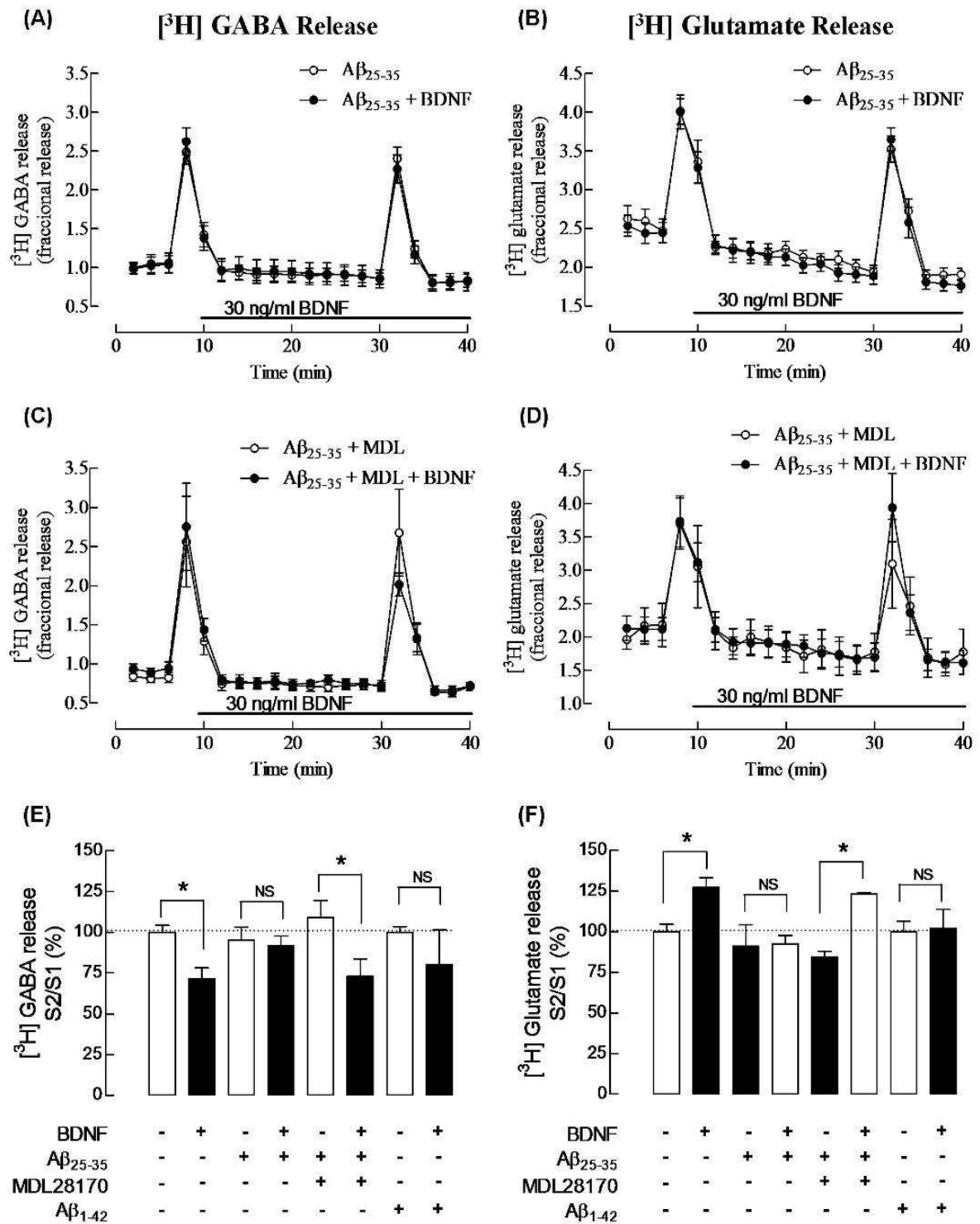


Figure 4.13 – A β inhibits BDNF effect upon neurotransmitter release in a calpain-dependent way.

Fractional release of [3 H] GABA (A and C) and [3 H] glutamate (B and D) evoked by two 15mM K $^+$ stimuli of 2min duration, at 5–7 min (S1) and 29–31 min (S2). BDNF (30 ng/ml) was added at 9 min and remained in the perfusion solution until the end of the experiments (closed circles), as indicated by the horizontal bar. Control curves in the presence of A β_{25-35} (25 μ M) or A β_{25-35} (25 μ M) and MDL28170 (20 μ M), performed in parallel with the same synaptosomal batch, are represented by the open circles. Modulation of BDNF (30ng/ml) effect upon fractional release of [3 H] GABA by A β_{25-35} (25 μ M) (A), or by simultaneous treatment with A β_{25-35} (25 μ M) and MDL28170 (20 μ M) (C). Modulation of BDNF (30ng/ml) effect upon fractional release of [3 H]glutamate by A β_{25-35} (25 μ M) (B), or by simultaneous treatment with A β_{25-35} (25 μ M) and MDL28170 (20 μ M) (D). E and F, S2/S1 ratios (%), calculated in each experiment from the fractional release curves, as described in Materials and Methods. BDNF (30 ng/ml) was tested in synaptosomes prepared from hippocampal slices treated or non-treated with A β_{25-35} (25 μ M) or A β_{1-42} (20 μ M), or treated simultaneously with A β_{25-35} (25 μ M) and MDL28170 (20 μ M), as indicated below each bar. In each experiment, the S2/S1 ratio obtained while BDNF was present during S2 was normalized, taking as 100% the S2/S1 ratio obtained in parallel chambers under the same drug conditions but in the absence of BDNF. Data are represented as mean \pm SEM of five to ten independent experiments. * p <0.05, compared with 100%, except when otherwise indicated (one-way ANOVA followed by Bonferroni's multiple comparison test).

4.9. Calpain mediates detrimental effects of A β upon BDNF actions on CA1 long-term potentiation

BDNF has a well-documented ability to increase LTP on hippocampal CA1 area through TrkB-FL activation [67, 71]. To evaluate the impact of A β upon BDNF effects on LTP, hippocampal slices were exposed for 3 hours to oxygenated aCSF with or without A β_{25-35} (25 μ M) or A β_{1-40} (20 μ M) or even the inverted A β_{35-25} (25 μ M) peptide. As mentioned in the methods section, the experiments were conducted using two independent stimulation pathways, being each pathway used as control or test in alternate days, in order to compare LTP magnitude in the absence and in the presence of BDNF, within the same slice. The LTP was firstly induced by θ -burst stimulation in one pathway and its magnitude quantified 60 min after LTP induction. BDNF was then added to the perfusing aCSF and allowed to equilibrate for at least 20 min before inducing LTP in the second pathway.

As expected [113], the θ -burst stimulus applied in the presence of BDNF (20 ng/mL) induced a robust LTP (LTP_{BDNF}: 40.0 \pm 1.7% increase in fEPSP slope), which was significantly

4. Dysregulation of BDNF signalling by A β peptide

higher ($P < 0.01$) than that obtained in the absence of BDNF (LTP_{CTR} : $22.1 \pm 3.9\%$ increase in fEPSP slope; $n = 11$, Figure 4.14A, E). Pre-treatment of hippocampal slices with A β for 3 hours did not affect LTP magnitude when compared to untreated slices ($LTP_{A\beta_{25-35}}$: $23.5 \pm 3.5\%$, $n = 10$ or $LTP_{A\beta_{1-42}}$: $17.6 \pm 7\%$, $n = 5$ vs LTP_{CTR} : $22.1 \pm 3.9\%$, $n = 11$, Figure 4.14E). However, in A β -treated slices, BDNF (20ng/mL) failed to enhance LTP magnitude ($LTP_{A\beta_{25-35}}$: $23.5 \pm 3.5\%$ vs $LTP_{A\beta_{25-35}+BDNF}$: $24.3 \pm 4.7\%$, $n = 10$, $p > 0.05$, Figure 4.14B, E and $LTP_{A\beta_{1-42}}$: $17.6 \pm 7\%$ vs $LTP_{A\beta_{1-42}+BDNF}$: $21.4 \pm 4.0\%$, $n = 5$, $p > 0.05$, Figure 4.14C, E).

In slices treated with $25\mu\text{M}$ of inverted A β_{35-25} (control peptide), the facilitation of BDNF upon LTP was not lost ($n = 4$, $p < 0.05$; Figure 4.15). To evaluate whether A β peptides could affect basal synaptic efficiency, input/output curves were performed and no significant differences were detected between control slices, and A β_{25-35} or A β_{1-42} -treated slices ($n = 4$, Figure 4.14F).

To explore if calpains played a role in the A β -induced loss of BDNF effect upon LTP, hippocampal slices were pre-treated simultaneously with the A β_{25-35} and the calpain inhibitor MDL28170 ($20\mu\text{M}$), for 3 hours. As shown in Figure 4.14D, pre-treatment with MDL28170 rescued the facilitatory effect of BDNF upon LTP ($LTP_{A\beta_{25-35}+MDL}$: $15.6 \pm 3.9\%$ vs $LTP_{A\beta_{25-35}+MDL+BDNF}$: $32.5 \pm 3.3\%$, $n = 6$, $p < 0.05$, Figure 4.14D, E). MDL28170 by itself did not significantly affect LTP magnitude in slices treated with A β_{25-35} (Figure 4.14D).

Taken together, these data demonstrate that A β severely hampers BDNF action on hippocampal LTP and neurotransmitter (GABA and glutamate) release and that these impairments are dependent on calpain activation. These functional results correlate with the results obtained in neuronal cultures treated with A β showing a calpain-mediated cleavage of the TrkB-FL BDNF receptor. Therefore, the data strongly suggest that A β impairs BDNF/TrkB mediated actions in hippocampal slices through a mechanism that involves calpain activation.

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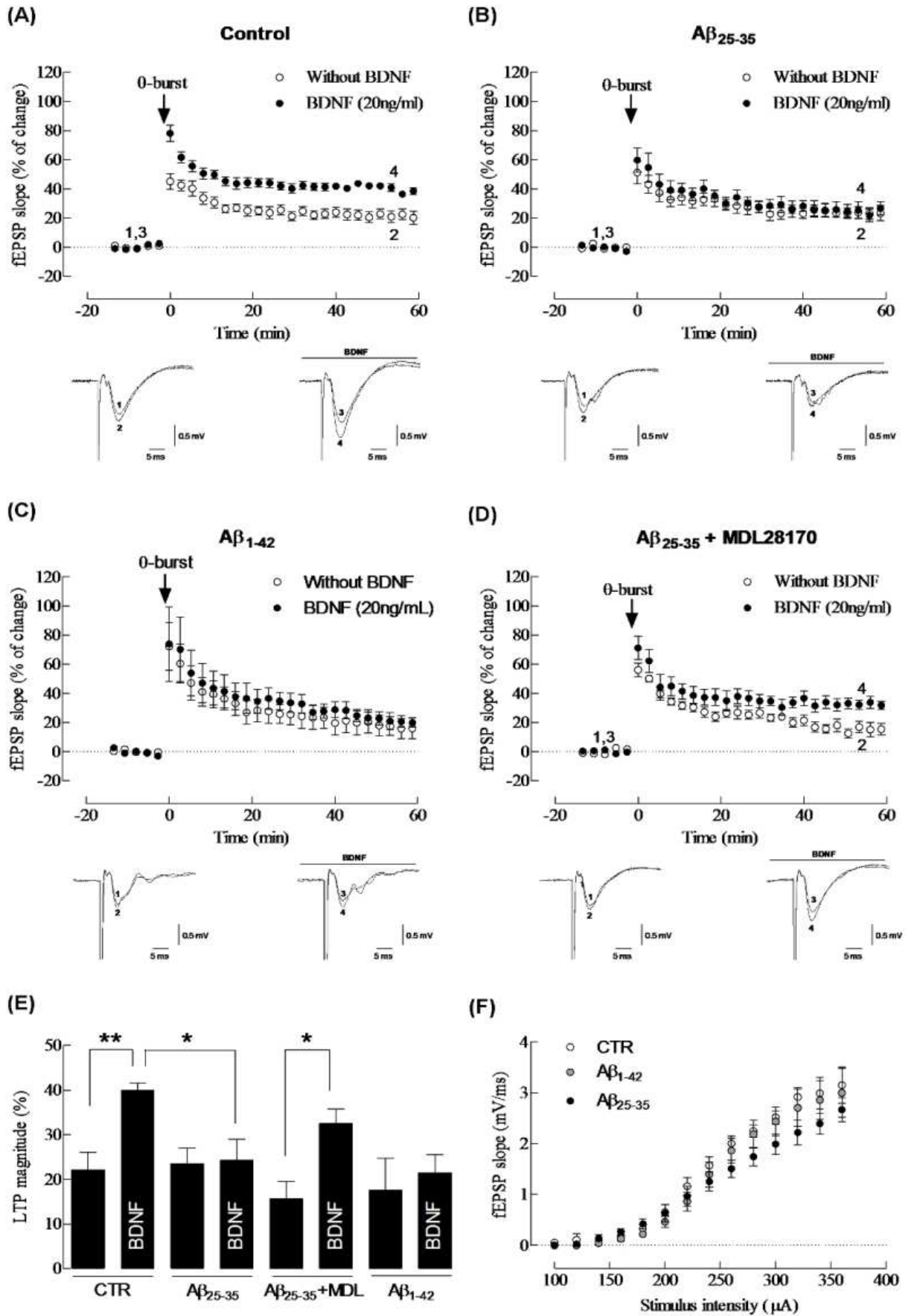


Figure 4.14 – A β decreases the effect of BDNF upon LTP, in a calpain-dependent way.

Panels (A-D) show the averaged time courses changes in field excitatory post-synaptic potential (fEPSP) slope induced by a θ -Burst stimulation in the absence (\circ) or in the presence of BDNF 20ng/ml (\bullet) in the second stimulation pathway in rat hippocampal slices without (A, n=11) or with a pre-exposure for 3 hours to aCSF solution containing 25 μ M A β_{25-35} (B, n=10); 20 μ M A β_{1-42} (C, n=5); or 25 μ M A β_{25-35} in the presence of 20 μ M MDL28170 (D, n=6). The traces from representative experiments are shown below panels (A-D); each trace is the average of eight consecutive responses obtained before (1 and 3) and 46–60 min after (2 and 4) LTP induction. The traces are composed by the stimulus artifact, followed by the pre-synaptic volley and the fEPSP. The traces (1 and 2) and traces (3 and 4) were obtained in the absence and presence of BDNF, respectively. (E) LTP magnitude (change in fEPSP slope at 46-60min) induced by θ -Burst stimulation in relation to pre- θ -Burst values (0%), for each group of pre-treated slices (Control, A β_{25-35} , A β_{25-35} + MDL28170, and A β_{1-42}). * p <0.05; ** p <0.01, one-way ANOVA followed by Bonferroni's multiple comparison test. Data are represented as mean \pm SEM. (F) Input/output curves corresponding to fEPSP slope evoked by various stimulation intensities (100–360 μ A) in non-treated hippocampal slices or treated for 3hours with A β_{25-35} (25 μ M) or A β_{1-42} (20 μ M) (n=4).

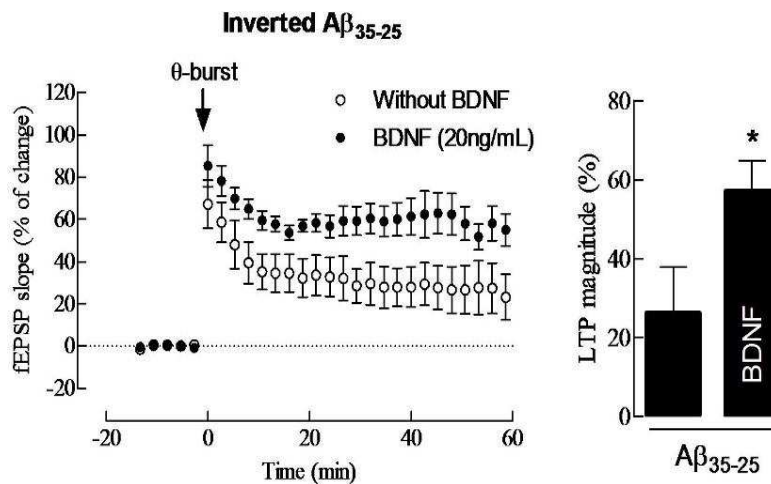


Figure 4.15 – Reverse A β_{35-25} peptide does not affect BDNF effect upon LTP

Left: averaged time courses changes in field excitatory post-synaptic potential (fEPSP) slope induced by a θ -Burst stimulation in the absence (\circ) or in the presence of BDNF 20ng/ml (\bullet) in the second stimulation pathway in rat hippocampal slices pre-exposed for 3hours to inverted A β_{35-25} peptide (25 μ M) (n=4). Right: LTP magnitude (change in fEPSP slope at 46-60 minutes after θ -Burst stimulation) in relation to pre- θ -Burst values (0%) (n=4, * p <0.05, student's t-test). Data are represented as mean \pm SEM.

4.10. Discussion

In this chapter, it was demonstrated that A β promotes a calpain-mediated cleavage of TrkB-FL receptor and that impairs, in a calpain-dependent manner, BDNF modulation of neurotransmitter release and synaptic plasticity. Moreover, we found that, in primary cortical cultures, A β significantly increases mRNA levels of truncated TrkB isoforms without affecting mRNA levels of TrkB-FL, in a mechanism independent of calpains.

The alterations at the transcriptional level, namely the increase in mRNA levels of truncated TrkB isoforms is in line with previous data showing a correlation between amyloid-load and up-regulation of TrkB-T1 mRNA levels in cortical regions of a transgenic AD mice model without affecting TrkB-FL mRNA levels [30]. A selective up-regulation of truncated TrkB mRNA levels (TrkB-T1 and TrkB-T-Shc), without changes in TrkB-FL mRNA levels, was also reported in the hippocampus of AD *post-mortem* human brain [337]. As we now clearly show, the influence of A β upon TrkB-FL occurs at the post-translational level, rather than at the transcriptional level since A β strongly reduces TrkB-FL protein levels. Remarkably this occurs through calpain-mediated cleavage of TrkB-FL receptor protein, leading to a truncated receptor with a different molecular weight than the known isoforms of the truncated TrkB receptors that we named as TrkB-T'. Interestingly, A β did not affect the proportion of BDNF-induced phosphorylated TrkB-FL over total TrkB-FL levels, in accordance with previous data showing that sub-lethal A β concentrations do not interfere with BDNF-induced phosphorylation of TrkB-FL [366]. Thus, A β may impair BDNF signalling through a decrease in the TrkB-FL/TrkB-Tc ratio (Tc referring to all isoforms of truncated receptors), rather than by affecting the phosphorylation of the remaining TrkB-FL. In addition, A β could also affect downstream mediators of TrkB signalling, such as the docking proteins of TrkB, as already described for sub-lethal concentrations of A β [366].

By performing a detailed characterization of TrkB-FL cleavage, it was possible to show that calpain cleavage of TrkB-FL occurs between the Asn⁵²⁰ and Ser⁵²¹ residues, producing two TrkB cleavage products: 1) the new truncated TrkB receptor (TrkB-T') which is heavier than the natural truncated TrkB-T1 and -T2 splicing products and 2) a fragment of ~32kDa which corresponds to the intracellular domain of TrkB-FL (TrkB-ICD). Moreover, we found that the calpain cleavage site of TrkB-FL is located downstream to the Shc binding site (Tyr⁵¹⁵), indicating that the new truncated TrkB-T' generated by calpain contains the Shc-binding site (Tyr⁵¹⁵). Thus, the TrkB-T' is only 16 aminoacid residues shorter than the described truncated TrkB-T-Shc isoform, a neuron-specific alternative splicing product of human TrkB gene [23]. Although TrkB-T-Shc function is poorly understood, it cannot be tyrosine phosphorylated [23], as the now described TrkB-T', and it could act as a negative regulator of BDNF function. Our results suggest that TrkB-T' may not act as a negative modulator of BDNF signalling since, in

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spite of its presence, the efficiency of TrkB-FL phosphorylation by BDNF, assessed as the ratio between pTrkB-FL/TrkB-FL, was not appreciably affected.

The second A β -induced TrkB-FL cleavage product, the TrkB-ICD, corresponds to the remaining intracellular domain (ICD) of TrkB-FL upstream to the cleavage site (Ser⁵²¹-Gly⁸²¹). The theoretical molecular weight of TrkB-ICD is 34.6kDa, which is similar to the relative molecular weight observed in SDS-PAGE (~32kDa). TrkB-ICD was also detected in *post-mortem* human brain samples showing that human endogenous calpains could also cleave human TrkB-FL receptor. However, we cannot exclude the possibility that the presence of basal levels of TrkB-ICD detected in the human brain sample could be exacerbated due to calpain activation during the *post-mortem* period. Nevertheless, in freshly prepared rat cortex homogenates, and therefore without a significant *post-mortem* delay, it was also possible to detect small amounts of TrkB-ICD, suggesting that TrkB-FL cleavage could also occur in the alive healthy brain.

It is known that some members of the receptor tyrosine kinase family can undergo proteolytic cleavage by caspases, metalloproteases or secretases, producing intracellular domain (ICDs) fragments that may possess a biological function [see 367], as it is the case of the proapoptotic fragment that results from caspase-mediated TrkC cleavage upon NT-3 deprivation [368]. Calpain-mediated proteolytic cleavage usually occurs between two domains of the substrate, releasing big stable fragments that can also have biological activity [see 127]. As an example, the calpain-generated fragment p25 from p35 cleavage constitutively activates the cyclin-dependent kinase 5 (CDK5), contributing to tau hyperphosphorylation, morphological degeneration and neuronal death [196]. Indeed, overexpression of p25 fragment in mice forebrain is sufficient to recapitulate the major hallmarks of AD, including hippocampal neuronal loss, aggregation of hyperphosphorylated tau, accumulation of A β and impairments on synaptic plasticity and cognition [285, 286]. Therefore, one may propose that calpains are a key element of a vicious cycle, since its activation leads to β -amyloid generation [361], which in turn leads to enhanced calpain activity with subsequent impaired signalling of key neurotrophic molecules such as BDNF (present work). Whether the resulting fragment, TrkB-ICD, also contributes to exacerbate neuronal damage, awaits further investigation.

The present work clearly demonstrates that A β impairs the facilitatory effects of BDNF upon glutamate release and the inhibitory effect of BDNF upon GABA release from isolated nerve terminals (synaptosomes). GABAergic and Glutamatergic hippocampal synaptosomes represent each one approximately 40% of total synaptophysin-positive nerve terminals, less than 5% of nerve terminals being cholinergic [369]. Interestingly, in spite of the greater vulnerability of the glutamatergic terminals to A β toxicity, as compared with the GABAergic ones [369, 370], the effect BDNF upon GABA release was also impaired by A β . Moreover, A β impairs BDNF-mediated effects upon LTP. In all cases it was possible to rescue the effect of BDNF by

adding a calpain inhibitor (MDL28170), indicating that the A β -induced loss of function of BDNF at the synapses is mediated by calpains. The finding that the calpain inhibitor prevents the molecular changes in TrkB receptors as well as prevents the loss of synaptic BDNF modulatory action, strongly suggests that a single mechanism underlies both phenomena, highlighting the functional consequence of the A β -induced cleavage of TrkB receptors.

Interestingly, A β did not affect LTP magnitude (without BDNF), or basal synaptic transmission, as evaluated by input/output curves. This provides evidence that A β may impair BDNF signalling, even before impairment of synaptic transmission and plasticity, suggesting that loss of neuromodulation by neurotrophins is a very early sign of synaptic impairments induced by A β . Nevertheless, there are evidences that A β peptides could impair LTP [eg: 371]. In our experimental conditions, we did not detect any significant change in LTP magnitude induced by a very-weak θ -burst in hippocampal slices exposed to A β . This absence of A β effect upon LTP, already seen by others [372], could be due to several factors such as the stimulation protocol, the A β preparation, the developmental age or genetic background of the animals used [372]. Interestingly, Smith and collaborators (2009) showed that soluble oligomeric A β_{1-42} significantly blocked hippocampal LTP when induced by high-frequency stimulation but not by θ -burst, the type of stimulation used in this work.

Our findings provide a possible biochemical mechanism for previous observations that TrkB-FL receptors are decreased in pathological situations, including AD [322, 333], where calpains are found overactivated [194]. Calpain-dependent down-regulation of TrkB-FL protein also occurs after acute insults, such as excitotoxicity and ischemia [373, 374]. It is not known whether calpains can also cleave other Trk receptors, such as TrkA or TrkC. However, by comparing the sequences of Trk receptors, we can predict that TrkA and TrkC are probably not cleaved by calpains, since they both lack the calpain cleavage site present in TrkB, which is conserved within species. Calpain overactivation has been associated with several neuropathological conditions, including prion-like diseases, muscular dystrophies, Huntington's disease, Parkinson's disease, Alzheimer's disease, multiple sclerosis, ischemia, stroke, and brain trauma. Calpain inhibition is therefore a promising therapeutic strategy with demonstrated efficacy in animal models. However, translation to clinical trials waits for the development of selective inhibitors of calpains to be used in humans [see 184].

In summary we highlighted the mechanisms responsible for A β -induced TrkB receptor dysregulation. Namely, we found that A β selectively increases the mRNA levels of truncated TrkB-T1 and T2 receptors and it induces a calpain-mediated cleavage of TrkB-FL protein. The cleavage of TrkB-FL occurs between Asn⁵²⁰ and Ser⁵²¹ and produces a new truncated receptor, containing the Shc-binding site (TrkB-T'), and a new intracellular cleavage product (TrkB-ICD), containing the complete kinase domain of TrkB-FL (see Figure 4.16). At a functional level, A β severely impairs BDNF effects upon GABA and glutamate release and upon synaptic

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plasticity, in a calpain-dependent way. Taken together, the data demonstrate that calpain overactivation induced by A β severely impairs BDNF/TrkB-FL signalling, affecting the synaptic actions of BDNF. By detailing the mechanisms involved in the endogenous dysregulation of TrkB receptors induced by A β , as well as the early functional consequences of this dysregulation, this work reinforces the rationale for the use of calpain inhibitors as a therapeutic tool in AD.

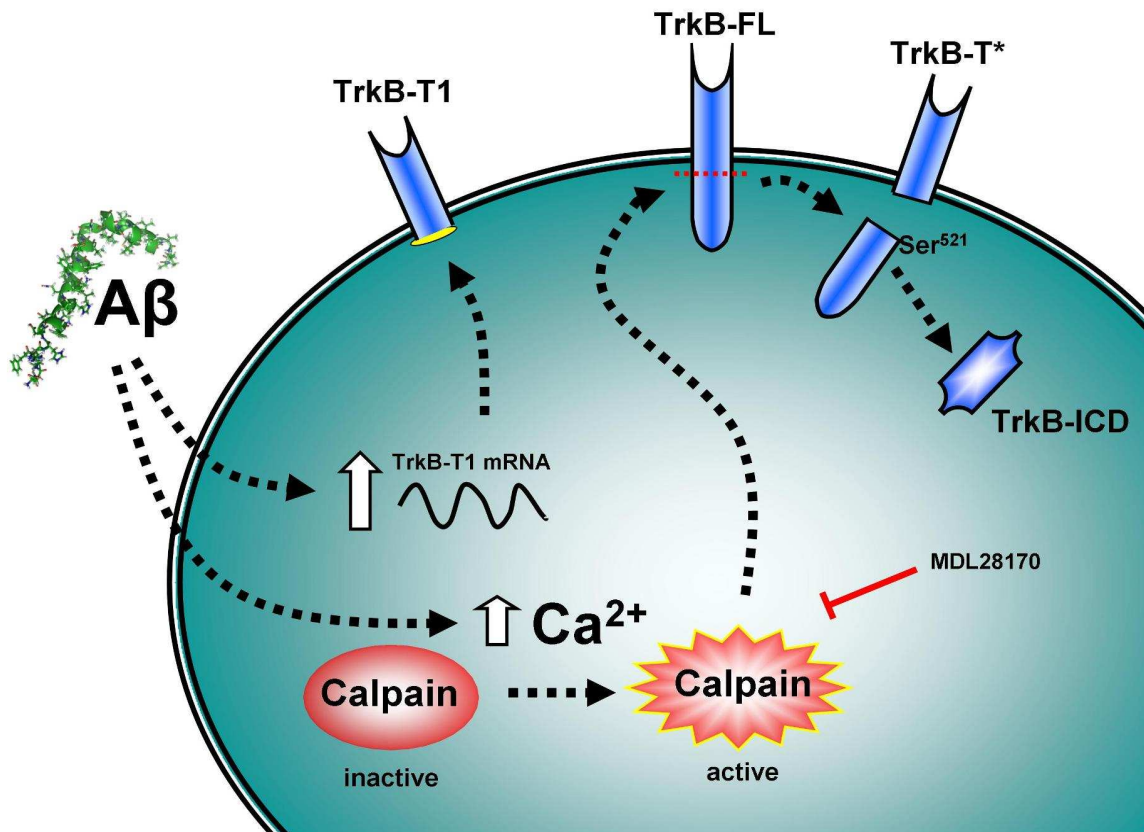


Figure 4.16 – Schematic representation of A β -induced dysregulation of TrkB receptors.

A β peptide selectively increases TrkB-T1 mRNA levels by an unknown mechanism and activates calpains by perturbing the intracellular Ca²⁺ homeostasis. Activated calpain cleaves TrkB-FL receptor in the intracellular domain (in the Asn⁵²⁰-Ser⁵²¹ peptide bond), producing a membrane-bound truncated TrkB-T' receptor and an intracellular fragment (TrkB-ICD). TrkB-ICD may have a putative biological function and may have a different structure when comparing to the original intracellular domain of TrkB-FL. The calpain inhibitor, MDL28170, inhibits calpain-mediated cleavage of TrkB-FL, and restores BDNF function upon synaptic plasticity and neurotransmitter release in A β -treated hippocampal slices (not shown).

5. Impact of *in-vivo* chronic blockade of A_{2A}R upon BDNF-mediated facilitation on LTP

The work presented in this chapter was published in Jerónimo-Santos et al., 2014a [116].

5.1. Summary

Brain-derived neurotrophic factor (BDNF) through the activation of its receptor (TrkB-FL) exert well-described neuroprotective effects playing a major role in hippocampal synaptic transmission and plasticity such as long-term potentiation (LTP), a molecular surrogate for learning and memory. Impairments in BDNF signalling have been associated to several neurodegenerative disorders such as Alzheimer disease (AD). Therefore, the reestablishment of BDNF actions is considered a promising strategy for AD treatment. While, most of BDNF synaptic actions, namely on LTP, require the activation of adenosine A_{2A} receptor (A_{2A}R), the antagonists of A_{2A}R have been proven to prevent AD induced deficits in several animal models. Therefore in this work we aimed to evaluate the impact of the chronic *in vivo* oral administration of the A_{2A}R antagonist, KW-6002, in the BDNF actions upon hippocampal CA1 LTP. The results showed that chronic blockade of A_{2A}R in male Wistar rats inhibits the facilitatory action of BDNF upon LTP and decreases both mRNA and protein levels of the TrkB-FL receptor in hippocampus. These findings imply that BDNF signalling may be affected in chronic A_{2A}R blocking conditions.

5.2. Rational

Brain-derived neurotrophic factor (BDNF) is a neurotrophin that, through activation of its high affinity full-length TrkB receptor (TrkB-FL), exerts well-described neuroprotective effects and plays major roles in hippocampal synaptic transmission and plasticity, such as LTP. LTP is a form of synaptic plasticity classically accepted as the neurophysiological correlate of learning and memory encoding [59]. In fact, in TrkB-FL or BDNF knockout mice, LTP induction is severely compromised [57, 67, 69, 71].

There are evidences that, in neurodegenerative disorders such as in AD, BDNF signalling is drastically impaired. In several regions of AD patient *post-mortem* brains, both BDNF and TrkB-FL receptor levels are decreased while the dominant-negative truncated TrkB receptors are increased [319, 321-323, 333]. Indeed, in AD animal models, where LTP

5. Chronic blockade of A_{2A}R abolishes BDNF actions upon LTP

induction is strongly impaired [see 375], the potentiation of BDNF actions ameliorate the observed LTP deficits [356]. The loss of endogenous BDNF neuroprotection in AD has been seen as part of the pathophysiology of AD. In fact, the administration of BDNF exerts neuroprotective actions in rodent and primate models of AD [315]. However the clinical use of BDNF has been hampered due to its inability to reach the brain and to its short half-life [120]. Therefore, the identification of molecules able to potentiate endogenous BDNF actions gained emphasis in recent years. One of the drugs attracting much attention is adenosine due to its ability to modulate the actions of BDNF [see 99]. Indeed, evidence has been accumulating that A_{2A}R activation is required for BDNF effects upon hippocampal synaptic transmission [108] and plasticity, namely facilitation of LTP [113, 114]. Moreover, it has been shown that A_{2A}R activation can induce phosphorylation of an intracellular pool of TrkB receptors (associated with Golgi membranes) without the involvement of neurotrophins [105, 107].

However, despite the requirement of A_{2A}R activation to promote BDNF actions upon LTP [113, 114], the administration of A_{2A}R antagonists has been proven to prevent AD induced deficits in different animal models [376-378]. Given this apparent paradox, it is crucial to understand whether *in vivo* A_{2A}R blockade impacts on BDNF effects upon synaptic plasticity. Therefore, in the present study we chronically administered an orally active A_{2A}R antagonist (istradefylline; KW-6002; 3mg/kg/day) for one month to 4-6 week-old male Wistar rats and assessed the impact on BDNF action upon hippocampal CA1 LTP.

5.3. Chronic blockade of adenosine A_{2A}R prevents BDNF-induced facilitation of CA1 LTP which is not restored by acute A_{2A}R activation

The θ -burst stimulation delivered to CA1 area of hippocampal acute slices prepared from hippocampus taken from 8-10 week old rats induced a statistically significant LTP (LTP_{CTR}: 22±3%, n=5; p<0.01 as compared with baseline, Student's t-test, Figure 5.1A, C). As expected [113], the θ -burst stimulus applied in the presence of BDNF (20 ng/mL) caused a marked facilitation of LTP which was significantly higher than that obtained in the absence of BDNF (LTP_{BDNF}: 42.0± 2%, n=5, p<0.01, Student's t-test, Figure 5.1A, C). To evaluate the ability of BDNF to potentiate LTP in hippocampal slices taken from rats under chronic A_{2A}R blockade, KW-6002, an A_{2A}R oral antagonist, was administered for 1 month (3 mg/kg/day). In the KW-6002 treated group, the θ -burst stimulation increased the slope of the fEPSP by 24± 2% (n=5, Figure 5.1B, C), which was not different from the LTP magnitude obtained in hippocampal slices of animals not treated with the A_{2A}R antagonist (LTP_{CTR}: 22± 3%, n=5, p>0.05, 2-way ANOVA, Figure 5.1A, C). However, in KW-6002 group, BDNF (20 ng/ml) lost

5. Chronic blockade of A_{2A}R abolishes BDNF actions upon LTP

its ability to further increase LTP magnitude ($LTP_{KW+BDNF}$: $26 \pm 3\%$; $p < 0.05$ when compared with $LTP_{CTR+BDNF}$: $42 \pm 2\%$, $n=5$, 2-way ANOVA, Figure 5.1B, C). No differences were observed in input-output curves obtained in slices from vehicle or KW-6002 treated group ($n=4$ and $n=6$, respectively, $p > 0.05$, 2-Way ANOVA, Figure 5.1D, E), indicating that KW-6002 treatment does not account for significant differences in basal synaptic efficiency.

To test if the loss of BDNF effect upon KW-6002 treatment was due to the presence of the A_{2A}R antagonist in the tissues, the animals were withdrawn from the drug prior to the experiment. Given that the maximum plasmatic concentration of KW-6002 decreases to half in around 2 hours [352] the treatment was interrupted 24 hours before sacrificing the animals to assure minimum plasmatic concentration of KW-6002. In these conditions BDNF was still not able to enhance LTP ($LTP_{KW(-24h)}$: $28 \pm 6\%$; $LTP_{KW(-24h)+BDNF}$: $18 \pm 6\%$, $n=3$, Student's t-test, $p > 0.05$, Figure 5.2A, C).

Given that A_{2A}R activation is required for the BDNF facilitatory actions on synaptic transmission [108, 109, 111] and synaptic plasticity [113, 114] we tested if acute A_{2A}R activation could rescue the BDNF facilitatory effect upon LTP, in the KW-6002 treated animals. Acute *ex-vivo* activation of A_{2A}R with the selective agonist, CGS21680 [379, 380] added 35 min before θ -burst stimulation, did not unravel the facilitatory effect of BDNF (20ng/ml) upon LTP (LTP_{KW} : $29 \pm 8\%$ vs $LTP_{KW+BDNF+CGS}$: $34 \pm 7\%$, $n=5$, Student's t-test, $p > 0.05$, Figure 5.2B, D). When applied alone, CGS21680 (30 μ M) was virtually devoid of effect upon LTP magnitude on KW-6002 treated animals (LTP_{KW} : $30 \pm 11\%$ vs LTP_{KW+CGS} : $30 \pm 7\%$, $n=3$, Student's t-test, $p > 0.05$, not shown).

Together these data show that chronic administration of KW-6002 *per se* did not affect the magnitude of θ -burst induced LTP comparing to vehicle animals, however, it prevented the facilitatory effect of BDNF upon LTP even if the pharmacological treatment had been stopped for 24 hours or if acute activation of A_{2A}R had been provided. Therefore, the result suggests that chronic blockade of A_{2A}R could induce irreversible or long-lasting changes in molecules involved in BDNF signaling.

5. Chronic blockade of $A_{2A}R$ abolishes BDNF actions upon LTP

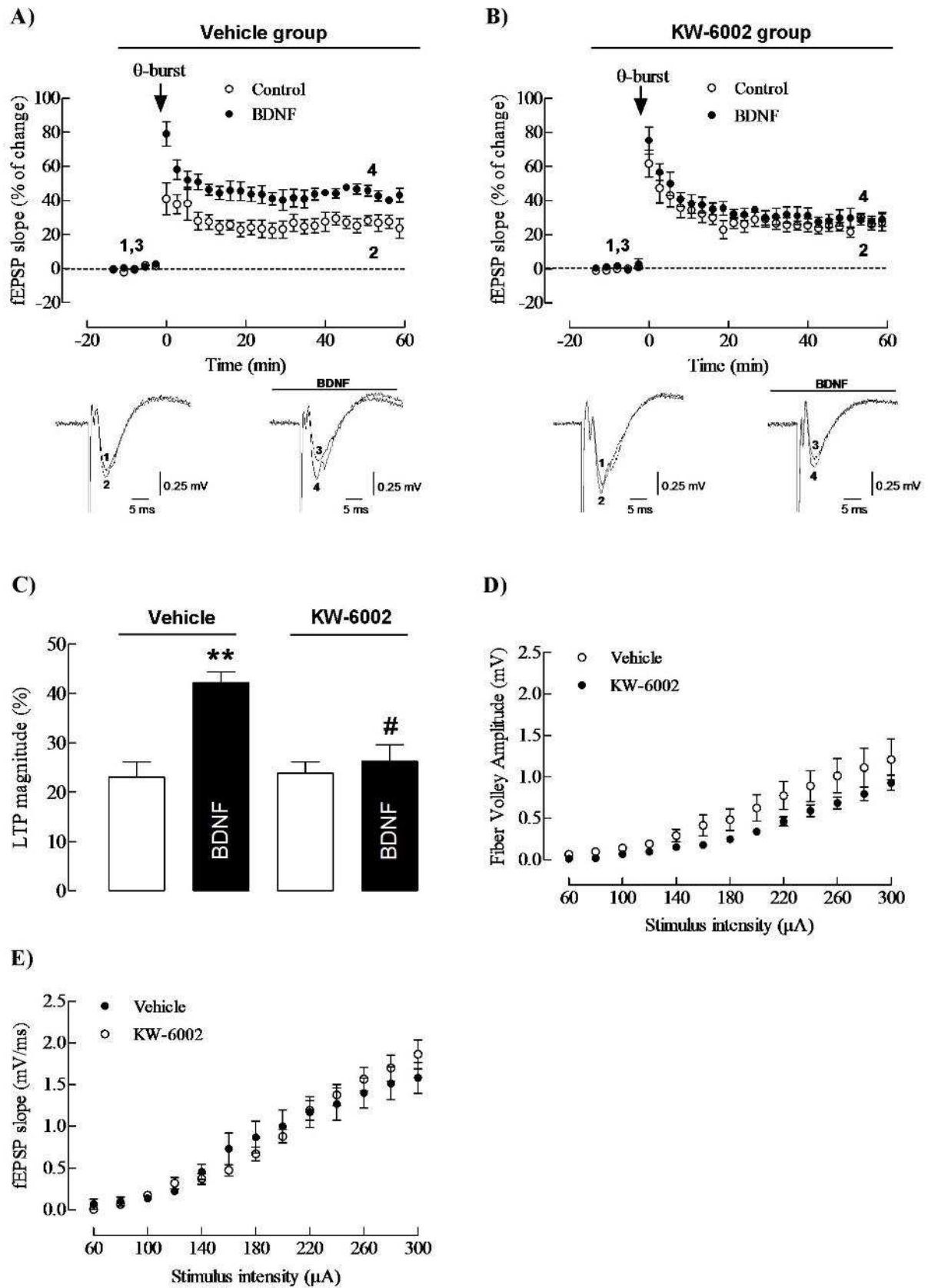


Figure 5.1 – Chronic treatment with KW-6002 abolishes the facilitatory effect of BDNF upon LTP.

Panels (A, B) show the averaged time courses changes in field excitatory post-synaptic potential (fEPSP) slope induced by a θ -burst stimulation in the absence (\circ) or in the presence of BDNF 20ng/ml (\bullet) in hippocampal slices obtained from: (A) animals treated with vehicle for 1 month ($n=5$); (B) animals treated with KW-6002 (3mg/kg/day) for 1 month ($n=5$). The traces from representative experiments are shown below the respective panels (A, B); each trace is the average of eight consecutive responses obtained before (1 and 3) and 46–60 min after (2 and 4) LTP induction. The traces are composed by the stimulus artifact, followed by the pre-synaptic volley and the fEPSP. The left traces (1 and 2) and right traces (3 and 4) were obtained in the absence or in the presence of BDNF, respectively. (C) LTP magnitudes (change in fEPSP slope at 46–60min) induced by θ -burst stimulation in relation to pre- θ -burst values (0%), for the panels A–D. ** $p<0.01$ compared to vehicle-control, # $p<0.05$ compared to vehicle-BDNF (ANOVA followed by Bonferroni post-test). (D) Input/output curves corresponding to responses generated between amplitude of pre-synaptic fibre volley and (E) fEPSP slope evoked by various stimulation intensities (60–300 μ A) in hippocampal slices taken from vehicle group (\circ , $n=6$) and KW-6002 treated group (\bullet , $n=4$). All values in the figure are represented as the mean \pm SEM of n independent experiments with different animals.

5.4. Chronic $A_{2A}R$ blockade reduces protein and mRNA levels of TrkB-FL receptor without affecting BDNF levels.

Since the prolonged administration of KW-6002 compromised BDNF effects upon LTP, which are known to be mediated by TrkB-FL receptor activation, we evaluated if the lack of effect observed after the pharmacologic treatment could be related to changes in the levels of TrkB-FL receptors. Using a specific pan-TrkB antibody that recognizes the extracellular portion of TrkB receptor, a significant reduction in protein levels of TrkB-FL in the hippocampus of KW-6002 treated rats was observed ($68 \pm 12\%$ vs 100%, $n=5$, Student's t-test, $p<0.05$, Figure 5.3A, B). Moreover, by relative qPCR, we found a significant reduction on TrkB-FL mRNA levels in hippocampus ($64 \pm 7\%$ vs 100%, $n=4$, Student's t-test, $p<0.05$, Figure 5.3C). No significant differences were observed on truncated TrkB-T1 mRNA and protein levels between vehicle and KW-6002 treated rats ($n=4$ and 5, respectively, $p>0.05$, Student's t-test, Figure 5.3B, C). Moreover, total levels of mature BDNF and Pro-BDNF were also analyzed by western-blot, using an antibody raised against BDNF, and no significant differences were detected between vehicle and KW-6002 treated group (Figure 5.3A and D, $n=5$, Student's t-test).

5. Chronic blockade of $A_{2A}R$ abolishes BDNF actions upon LTP

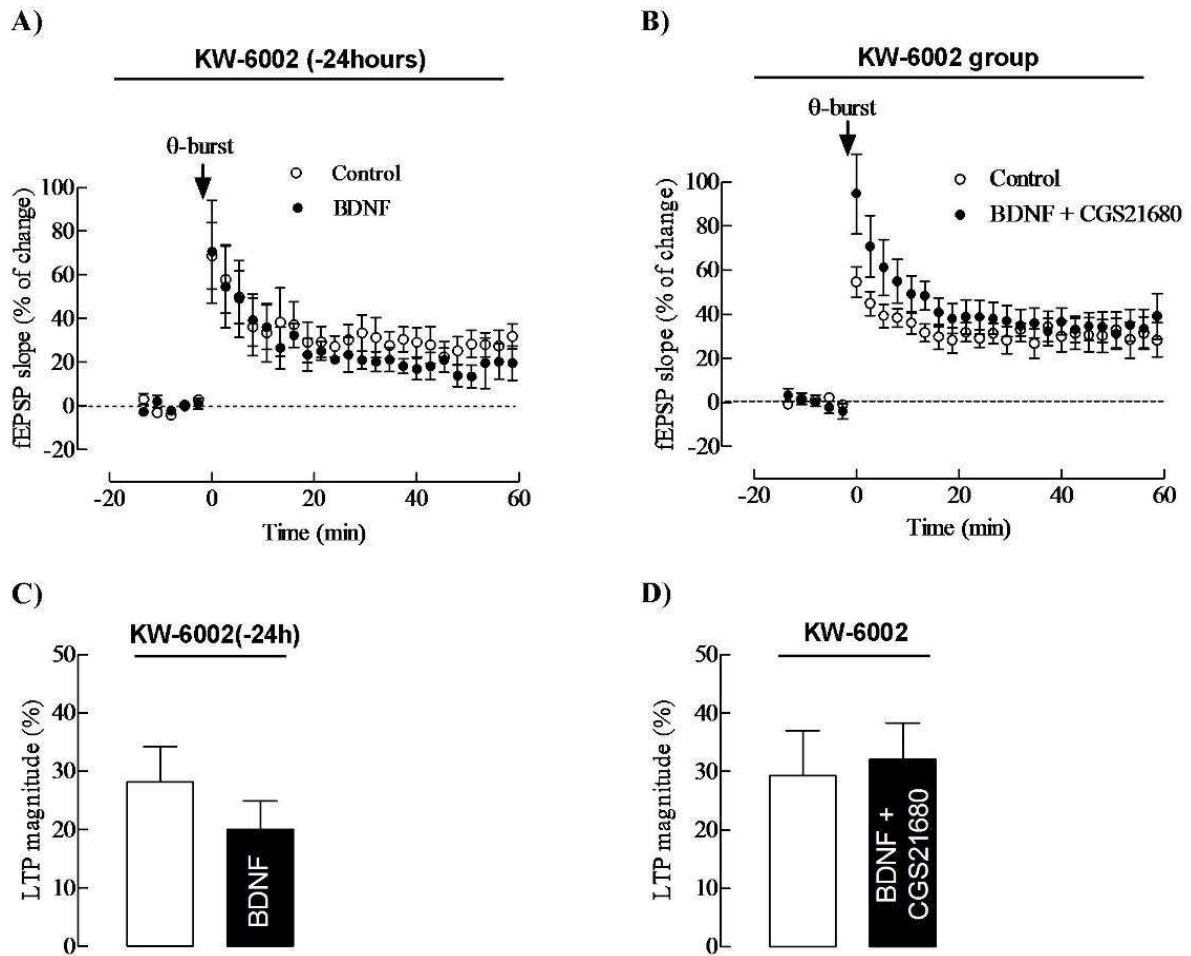


Figure 5.2 – Effects of KW-6002 are not reverted by treatment withdrawn or acute $A_{2A}R$ activation.

Panels (A, B) show the averaged time courses changes in field excitatory post-synaptic potential (fEPSP) slope induced by a θ -burst stimulation in the absence (\circ) or in the presence of BDNF 20ng/ml (\bullet , A) or in the presence of BDNF (20ng/mL) and CGS21680 (30nM) (\bullet , B) in hippocampal slices obtained from animals: (B) treated with KW-6002 (3mg/kg/day) for 1 month ($n=5$); or (A) animals treated with KW-6002 (3mg/kg/day) for 1 month and withdrawn from the drug 24 hours prior to the experiment ($n=3$). (C, D) LTP magnitudes (change in fEPSP slope at 46-60min) induced by θ -burst stimulation in relation to pre- θ -burst values (0%), for the panels A and B, respectively. All values in the figure are represented as the mean \pm SEM of n independent experiments.

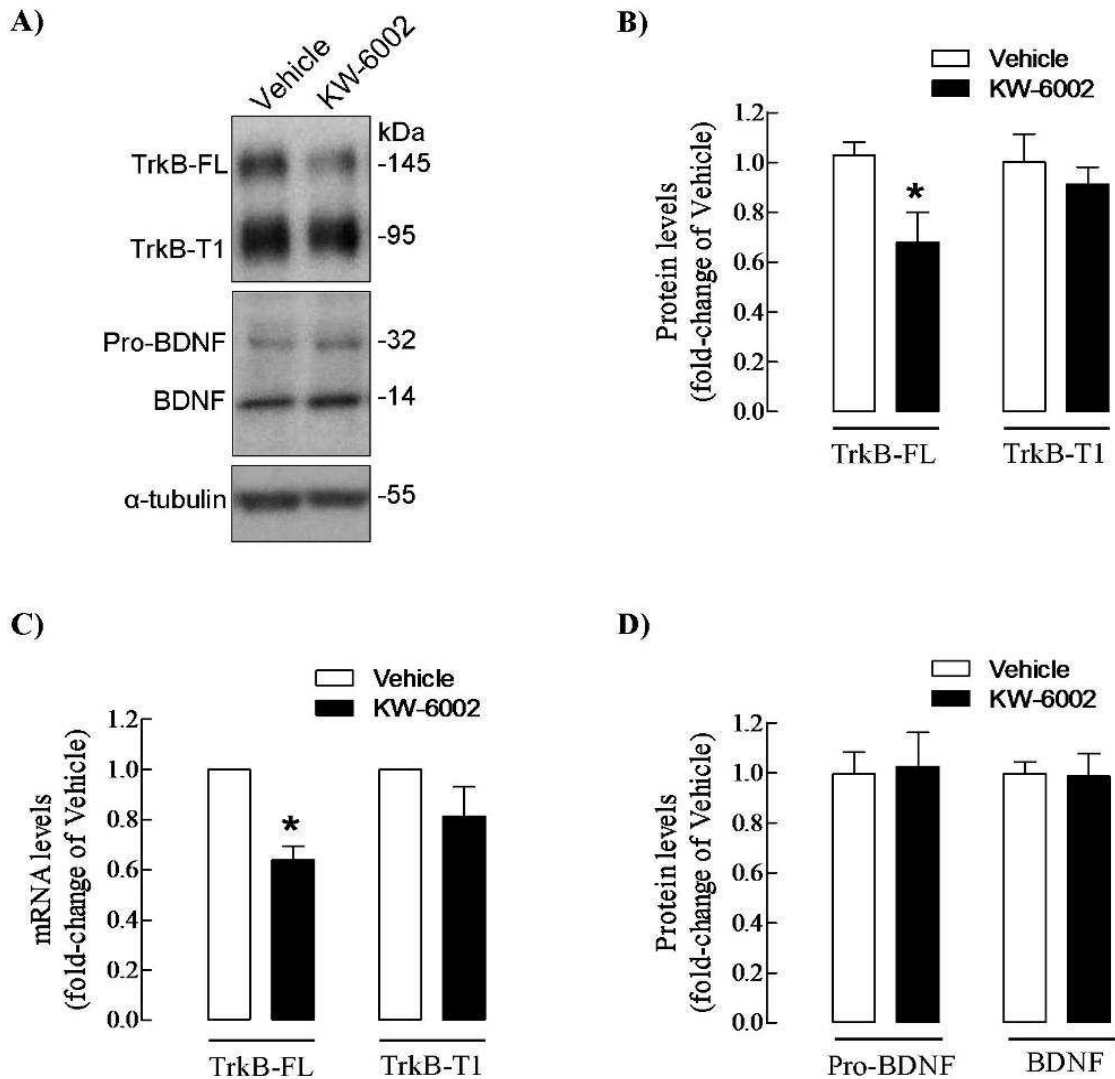


Figure 5.3 – Protein and mRNA levels of TrkB-FL receptor are decreased in KW-6002 treated rats.

(A) Representative western-blot comparing TrkB-FL, TrkB-T1, Pro-BDNF and mature BDNF levels in vehicle- and KW-6002-treated rats. The pan-TrkB antibody used recognizes both the TrkB-FL (~145 kDa) and truncated TrkB (TrkB-T1: ~95 kDa). The anti-BDNF antibody used in middle panel recognizes both pro-BDNF (~32kDa) and mature BDNF (~14kDa). α -tubulin was used as a loading control. (B) Quantification of TrkB-FL and TrkB-T1 band intensities obtained in western-blot for vehicle-treated (white bars) and KW-6002-treated (black bars) animals. Values were normalised with α -tubulin levels and represented as fold-change of vehicle (n=5). (C) Relative qPCR data showing mRNA levels of TrkB-FL and truncated TrkB-T1 from vehicle-treated animals (white bars) and KW-6002 treated animals (black bars). β -actin was used as an internal loading control. (D) Quantification of pro-BDNF and mature BDNF band intensities obtained by western-blot for vehicle-treated (white bars) and KW-6002 treated (black bars) animals. Values were normalised with α -tubulin levels and represented as fold-change of vehicle (n=5). Data are represented as the mean \pm SEM of *n* independent experiments. **p*<0.05 when compared to vehicle (Student's *t*-test).

5.5. Discussion

The results presented in this work reveal that *in vivo* chronic treatment with the $A_{2A}R$ antagonist, KW-6002, impairs BDNF actions upon LTP. Moreover, the data shows that this loss of BDNF effect is probably a consequence of the down-regulation of its full-length receptor (TrkB-FL) detected after the treatment with KW-6002.

Evidences show that the levels of BDNF and TrkB-FL are both decreased in several neurodegenerative disorders, particularly in AD [319, 321-323, 333]. Moreover, activation or overexpression of TrkB-FL in AD mice models improves cognitive function, suggesting that BDNF signalling deficits are an important contributor to the pathogenesis of AD [30, 316, 356]. Previous studies showed that the facilitatory effects mediated by BDNF upon synaptic transmission and plasticity are dependent or potentiated by $A_{2A}R$ activation [108, 113, 114]. However evidence is accumulating towards the beneficial effects of $A_{2A}R$ antagonists as a chronic pharmacologic treatment for neurodegenerative disorders such as AD [see 381]. Indeed, the neuronal death and memory impairments induced by amyloid- β peptide are prevented by $A_{2A}R$ antagonists and in the $A_{2A}R$ knock-out mice [382, 383]. Nevertheless $A_{2A}R$ activation or its downstream molecules such as cAMP were shown to also have putative beneficial effects on AD. Actually, the activation of $A_{2A}R$ is known to facilitate acetylcholine release [384, 385] promoting cholinergic transmission which is decreased in AD. Moreover, adenosine, acting at $A_{2A}R$, is an effective endogenous anti-inflammatory agent that can modulate inflammation both in the periphery and in the brain [386]. Neuronal maturation mediated by BDNF [see 387], is regulated by cAMP [388]; therefore, one could anticipate that this action of BDNF could also be influenced by activation of $A_{2A}R$. In addition, $A_{2A}R$ s activation can rescue neurite outgrowth impairment caused by interference with the NGF signalling cascade in PC12 cells [389] as well as to promote PC12 cell survival upon NGF withdrawal [105]. All this data together with the fact that synaptic actions of BDNF are fully dependent on $A_{2A}R$ activation [108, 109, 111-113] highlighted the need for cautious blockade of $A_{2A}R$ whenever aiming to protect neurons from excitotoxicity while aiming to exacerbate neuroprotection of BDNF.

In the present study we evaluated the effect of the chronic administration of KW-6002 for 1 month, which is known to be effective in blocking $A_{2A}R$ mediated actions [353], in the BDNF action upon CA1 hippocampal LTP. In previous studies the same dose regimen was used and it had no impact in behavioural tasks and in synaptic plasticity or neuronal branching in healthy animals [353]. However the consequences of this treatment for BDNF signalling were not evaluated. Here we show that chronic blockade of $A_{2A}R$ in living animals, avoids exogenous BDNF facilitatory effect upon CA1 hippocampal LTP, without affecting the magnitude of LTP in absence of BDNF. As previously reported [353] the KW-6002 treatment induces an up-

regulation on $A_{2A}R$, which could suggest that KW-6002 treatment may potentiate the $A_{2A}R$ /TrkB crosstalk. However the consequences of the pharmacological activation of $A_{2A}R$ upon synaptic transmission are similar between control and KW-6002 treated animals, suggesting that the increased levels of $A_{2A}R$ do not result in a gain of function at the synaptic level [390]. In addition, KW-6002 treated animals preserve hippocampal adenosine levels [390]. This implies that chronic KW-6002 treatment may not affect the expression of synaptic $A_{2A}R$, therefore explaining why the increase in $A_{2A}R$ levels does not impact into amplification of BDNF signalling in plasticity. Indeed it was already reported that different $A_{2A}R$ antagonists have different pharmacological profiles for specific populations of adenosine $A_{2A}R$ receptors [391, 392]. This would explain the increase in $A_{2A}R$ levels with no effect in their ability to modulate BDNF actions as well as the differential effect of the drug depending on the readout.

We previously reported [114] that θ -burst induced-LTP in hippocampal slices taken from young animals (the same age as that used in the present work), is independent on the endogenous BDNF since it is not altered by the prevention of TrkB-FL signaling. This might explain why KW-6002 treatment did not affect the basal LTP *per se*, in comparison with control slices. However one cannot preclude that KW-6002 treatment may reduce endogenous BDNF dependent LTP upon ageing [114].

The loss of BDNF effect upon CA1 hippocampal LTP in KW-6002 treated animals, even after 24hours of KW-6002 withdrawal, might be related to the decreased levels of TrkB-FL observed in these animals. One might speculate that the levels of TrkB-FL receptor could be decreased due to increased levels of endogenous BDNF, with the consequent over-activation and downregulation of TrkB-FL receptor as previously observed in [347] and Figure 3.3. However, our data do not support this hypothesis since no significant difference was detected on total BDNF or pro-BDNF levels in hippocampus from vehicle or KW-6002 treated animals. Moreover, it is known that cAMP regulates TrkB gene transcription because of its CRE promoter [393, 394]. Accordingly, since $A_{2A}R$ activation leads to cAMP formation [395], the chronic treatment with KW-6002 could result in a decrease of cAMP levels and a concomitant decrease in TrkB expression. This may explain the down-regulation of TrkB-FL receptors detected after $A_{2A}R$ antagonist treatment. Although the levels of the truncated TrkB-T1 receptor are not affected by KW-6002 treatment, the ratio TrkB-FL/TrkB-T1 is decreased given the significant decrease of TrkB-FL receptor levels. Given that TrkB-T1 receptors are dominant negative modulators of TrkB-FL receptors [25, 29], the decrease on TrkB-FL/TrkB-T1 ratio might aggravate the loss TrkB-FL signalling.

It is classically established that this particular type of synaptic plasticity, LTP, in the hippocampus is a prototypical experimental model that translates into forms of learning and memory associated with that brain area [396]. Although hippocampal dependent spatial memory was not affected in KW-6002 treated animals [353], which do not have any neurodegenerative

5. Chronic blockade of A_{2A}R abolishes BDNF actions upon LTP

disorder. The question remains whether in AD mice models, in which BDNF and TrkB-FL receptors are severely decreased, other forms of hippocampal dependent memory that require BDNF signalling [397, 398] could be affected.

The present work shows that *in-vivo* chronic blockade of A_{2A}R, by an orally active antagonist (KW-6002), ablated the facilitatory effect of exogenous BDNF upon hippocampal CA1 LTP and it promotes a reduction on mRNA and protein levels of the BDNF receptor (TrkB full-length).

6. BDNF mediates neuroprotection against A β -induced toxicity in a mechanism independent on A_{2A}R activation

The work presented in this chapter is in preparation for submission.

6.1. Summary

Brain-derived neurotrophic factor (BDNF) promotes neuronal survival through the activation of its TrkB-FL receptor.

Evidences have shown that activation of adenosine A_{2A} receptors (A_{2A}R) is essential for most of BDNF-mediated synaptic actions, such upon synaptic plasticity, transmission and neurotransmitter release. In this chapter we evaluated the influence of A_{2A}R upon BDNF-mediated neuroprotection against neuronal death induced by A β ₂₅₋₃₅ (25 μ M) peptide. By measuring caspase-3 activity and protein levels, and α II-spectrin breakdown, we showed that BDNF reduces the activation of caspase-3 and calpain induced by A β peptide, in cortical cultures. This BDNF-mediated neuroprotection was not affected by A_{2A}R activation or inhibition. Moreover neither activation nor inhibition of A_{2A}R, *per se*, significantly influenced the A β -induced neuronal death and the calpain-mediated cleavage of TrkB induced by A β . In conclusion, these results suggest that, in opposition to the fast synaptic actions mediated by BDNF, the neuroprotection mediated by this neurotrophin against a strong A β insult, does not require A_{2A}R activation.

6.2. Rational

Since the identification of A β peptide as the main component of amyloid plaques present in the brain of AD patients, multiple studies were developed in order to clarify the involvement of A β in the AD neurodegenerative process. Indeed, data show that A β is neurotoxic and promotes cell death and synaptic dysfunction.

In the brain of AD patients, BDNF and TrkB-FL levels are decreased comparing to age matched controls, and in opposition, the truncated TrkB, which is a dominant-negative modulator of TrkB-FL, is increased. Given the impairment on BDNF signalling in AD, the administration of this neurotrophin direct into the brain was considered a possible therapeutic approach. Indeed, *in-vivo* administration of BDNF to animals models of AD and also Parkinson's disease (PD), produced beneficial effects with improved synaptic and cognitive function and reduced neurodegeneration [120, 314]. However, despite the encouraging results from pre-clinical studies, the results from the BDNF-based clinical trials conducted so far (four in amyotrophic lateral sclerosis and one in diabetic neuropathy) have shown inconclusive results. However, there are no evidence that BDNF reached its target during the treatment [120]. Indeed, BDNF-based therapies have been hampered by multiple technical difficulties, such as the low penetrance of BDNF through blood-brain barrier and its rapid *in-vivo* clearance with consequent low half-life time in plasma or CSF [120]. Given these issues, an effort has been made to find small molecules that can activate directly the TrkB-FL, or that can boost BDNF actions in the brain, by an indirect mechanism. Molecularly, it has been shown that activation of A_{2A}R is able to transactivate a pool of immature TrkB receptors in the absence of BDNF [105, 107], and to induce the translocation of TrkB into lipid rafts microdomains in the membrane [117]. Functionally, it has been shown that most BDNF-mediated synaptic actions, such as in synaptic plasticity, transmission and neurotransmitter release, are fully dependent on A_{2A}R activation. However, some BDNF-mediated actions, such as in neuronal branching and GABA uptake, are not dependent on A_{2A}R activation [99].

Thus, agonists of A_{2A}R or activators of A_{2A}R-signalling pathways might be therapeutically relevant in neurodegenerative diseases where BDNF actions are decreased. In this chapter it was evaluated whether the neuroprotective effect of BDNF upon A β -induced neuronal death was also dependent, or potentiated, on A_{2A}R activation.

6.3. BDNF reduces cellular death induced by A β

It has been shown, in general cell viability assays, that BDNF protects neurons from A β toxicity [243]. Therefore, to reproduce this, 8 DIV neuronal cultures were incubated with A β ₂₅₋₃₅ peptide (25 μ M) and BDNF (20ng/mL), and neuronal death was evaluated by analysing caspase-3 and calpain activation. Caspase-3 is a central mediator of apoptotic cell death, while calpains have been seen as a central player in necrotic cell death [399]. Indeed, calpains rather than caspases have a prominent role in *in-vivo* excitotoxic neuronal death [171]. However, evidences indicate that calpains also play a central role in the execution of apoptosis [400, 401]. Accordingly, the calpain inhibition has shown protective effects in several models, including the *in-vivo* A β -induced neurodegeneration in rats [362]. Thus, both proteases, caspases and calpains, contribute to cellular architecture derangement and functional loss in neurons under degenerative conditions [399].

Incubation of 8 DIV cortical neurons with A β ₂₅₋₃₅ (25 μ M) for 24 hours induced robust caspase-3 activation, as evaluated by enzymatic activity assay and active caspase-3 formation by western blot (2.5-fold increase in caspase-3 activity and 5-fold increase in active 17-kDa caspase-3 protein levels, when compared to control, $p < 0.001$, $n = 5$, Figure 6.1). Conversely, A β ₂₅₋₃₅ induced a 4-fold increase in the levels of the caspase-3 specific α II-spectrin breakdown product SBDP120 ($p < 0.001$, $n = 6$, Figure 6.2C and D). As expected, A β also induced a very robust increase in SBDP150 levels indicating the activation of calpains ($p < 0.001$, $n = 6$, Figure 6.2B and D). When BDNF (20ng/mL) was simultaneously incubated with A β ₂₅₋₃₅ (25 μ M), the levels of caspase-3 activity and 17-kDa caspase-3 formation were significantly reduced by $39 \pm 7\%$ and $41 \pm 8\%$, respectively, when compared to A β ₂₅₋₃₅ ($p < 0.01$, $n = 5$, Figure 6.1). Moreover, BDNF reduced the A β -induced formation of SBDP120 and SBDP150, by $61 \pm 18\%$ and $58 \pm 26\%$, respectively ($p < 0.01$ when compared to A β , $n = 6$, Figure 6.2B-D). As a consequence of the inhibition of both calpain and caspase-3, BDNF also reduced the A β -induced cleavage of α II-spectrin by $59 \pm 11\%$ ($p < 0.01$, $n = 6$, Figure 6.2A and D).

Taken together this data show that BDNF significantly reduces the A β -induced activation of caspase-3 and calpain.

6. BDNF-mediated neuroprotection is $A_{2A}R$ -independent

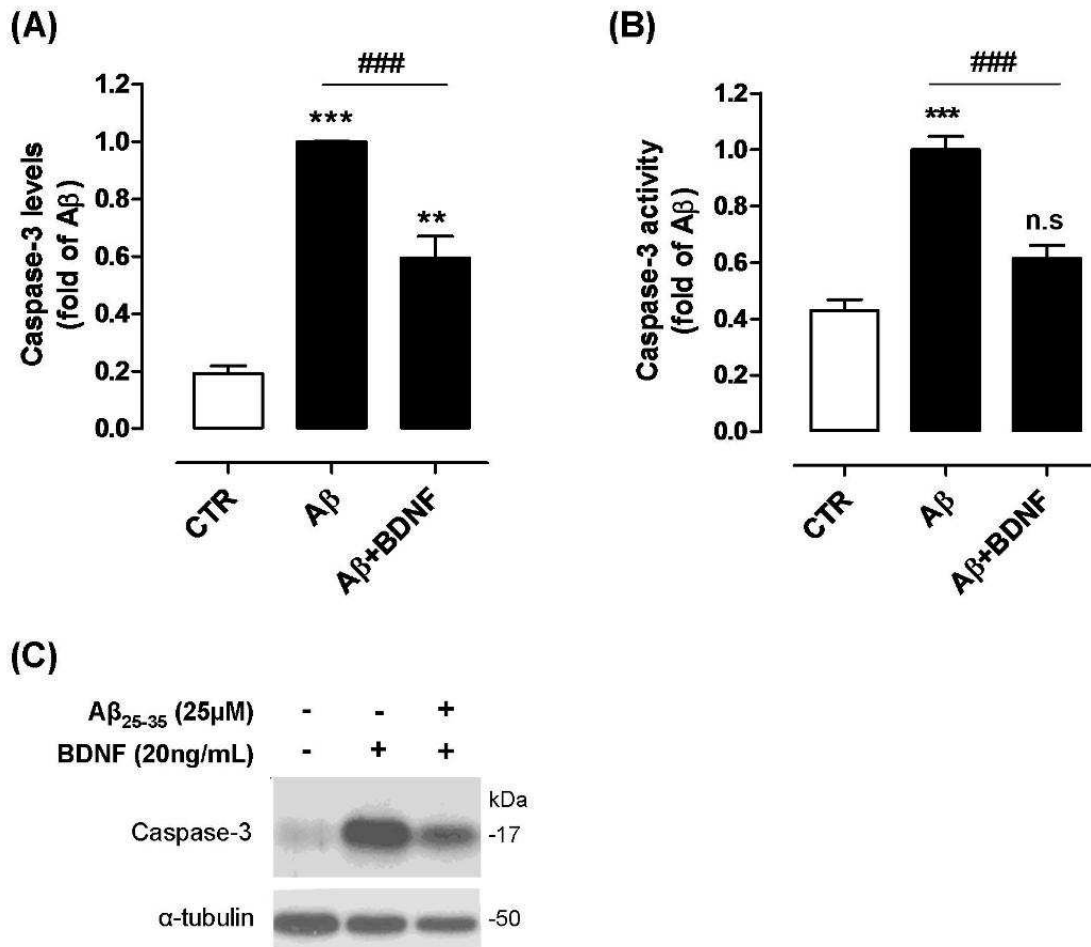


Figure 6.1 – BDNF reduces the caspase-3 activation induced by $A\beta$.

(A) Quantification of active Caspase-3 protein levels and (B) Caspase-3 activity, in 8 DIV cortical neurons non-treated or treated with $A\beta_{25-35}$ (25 μ M) for 24hours in the absence or presence of BDNF (20ng/mL). Data is normalized to $A\beta$ condition given the very low, almost undetectable, caspase activation in control condition. *** p <0.001, ** p <0.01, n.s (not significant) when comparing to control and ### p <0.001 when compared to $A\beta$ (n =5, ANOVA followed by Bonferroni post-test) (C) Representative western-blot used in (A), showing the protein levels of active Caspase-3 (17-kDa). α -tubulin was used as a loading control. Data represented are mean \pm SEM of n independent experiments.

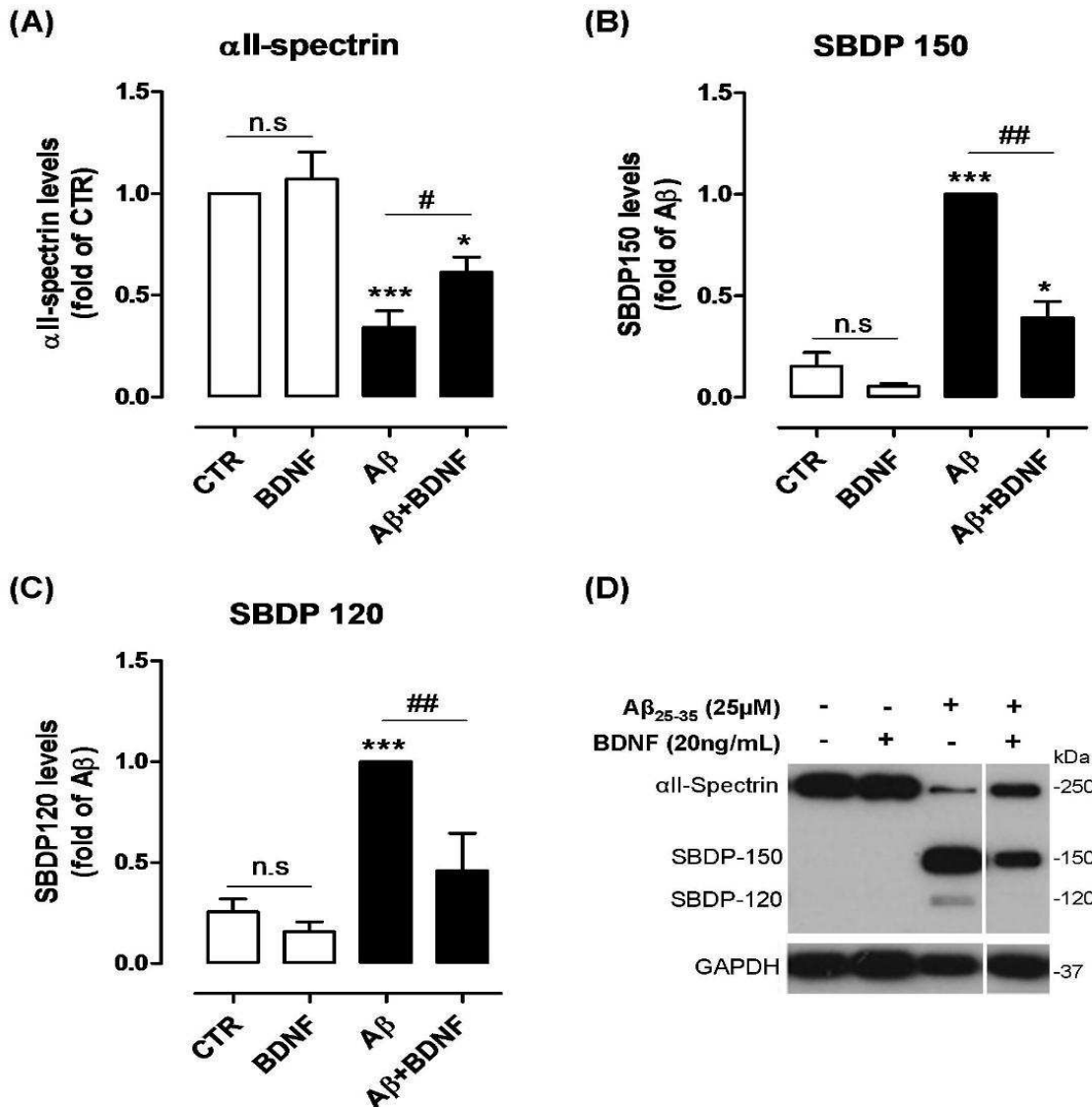


Figure 6.2 – BDNF reduces the all-spectrin breakdown induced by Aβ.

(A) Quantification of all-spectrin breakdown with consequent formation of (B) SBDP150 and (C) SBDP120 breakdown products. SBDP150 and SBDP120 levels are normalized to Aβ condition given their almost undetectable amount in control conditions. ****p*<0.001, **p*<0.05, n.s (not significant) when comparing to control and #*p*<0.05 and ##*p*<0.01 when comparing to Aβ (*n*=6, ANOVA followed by Bonferroni post-test) (D) Representative western-blot used in (A-C), showing the protein levels of all-spectrin, SBDP150 and SBDP120. GAPDH was used as a loading control. Data represented are mean ± SEM of *n* independent experiments.

6.4. Cellular death prevented by BDNF does not require A_{2A}R activation

To address if the activation of A_{2A}R was required for BDNF-mediated neuroprotection, as it is verified for most synaptic actions mediated by this neurotrophin, 8 DIV cortical cells were incubated with A β ₂₅₋₃₅ (25 μ M) and BDNF (20ng/ml) for 24 hours, in the presence or in the absence of the A_{2A}R antagonist, SCH58261 (100nM), or the A_{2A}R agonist, CGS21680 (10nM). Neither SCH58261 nor CGS21680, added 30 min prior of A β and BDNF, influenced the BDNF-mediated reduction of caspase-3 levels (Figure 6.3A, n=6) and activity (Figure 6.3B, n=6) upon A β toxicity. Regarding the data from α II-spectrin breakdown, similar results were obtained. Indeed, the reduction of α II-spectrin cleavage (Figure 6.4A) and correspondent reduction on SBDP150 (Figure 6.4B) and SBDP120 (Figure 6.4C) formation (cleavage product mediated by calpains and caspases, respectively) induced by BDNF, in cells incubated simultaneously with A β , was not influenced by the presence of both A_{2A}R antagonist and agonist (n=6). *Per se*, the incubation with SCH58261 (100nM) or CGS21680 (10nM), 30 minutes prior A β incubation, did not influenced the A β -induced activation of both caspase-3 (n=4, p>0.05, Figure 6.3 and Figure 6.4C) and calpain (n=6, Figure 6.4A, B and D).

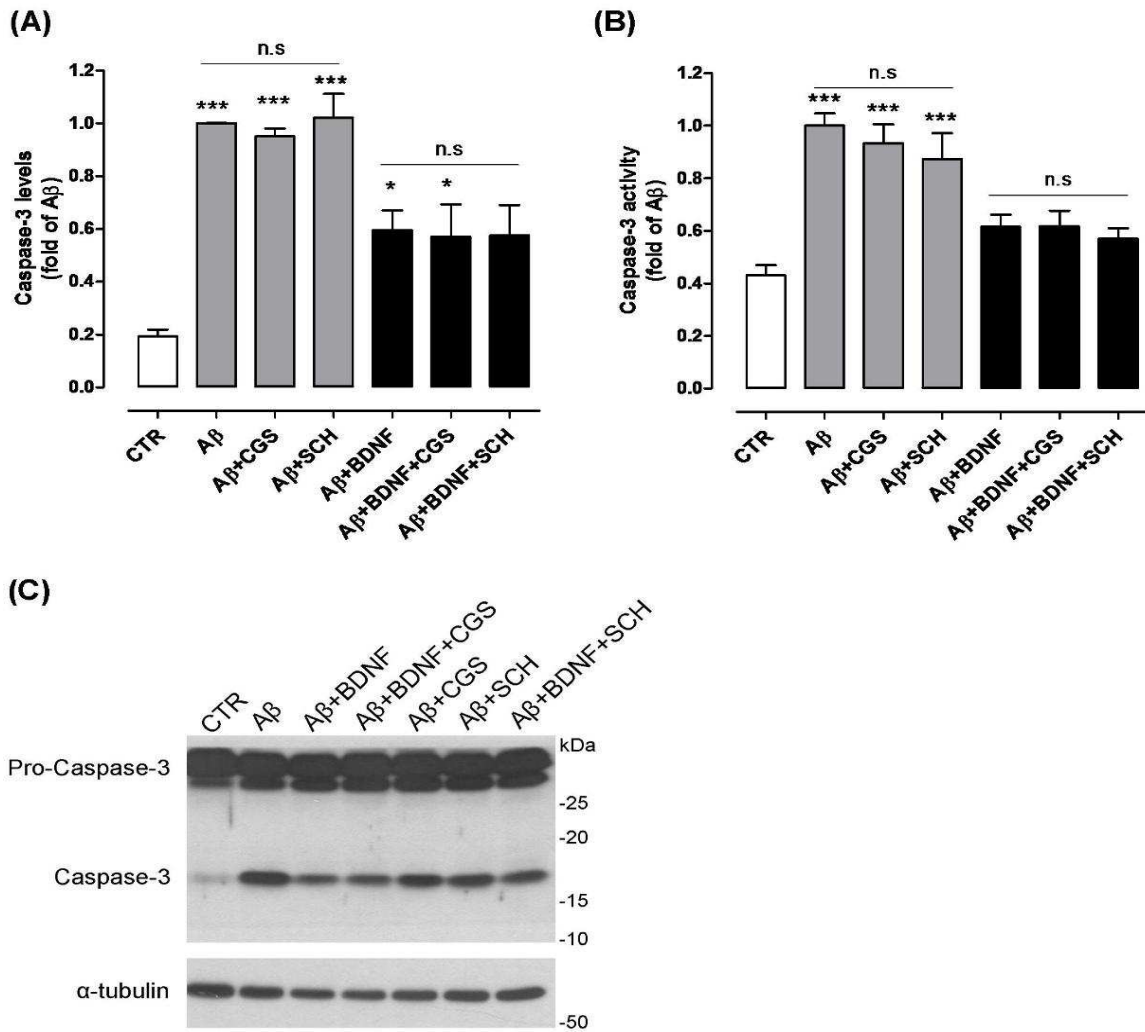


Figure 6.3 – $A_{2A}R$ does not influence BDNF-mediated reduction in $A\beta$ -induced Caspase-3 activation

(A) Quantification of active Caspase-3 protein levels and (B) Caspase-3 activity, in 8 DIV cortical neurons non-treated or treated with $A\beta_{25-35}$ ($25\mu\text{M}$) for 24hours in the absence or presence of BDNF (20ng/mL) and SCH58261 (100nM) or CGS21680 (10nM). Data is normalized to $A\beta$ condition given the very low, almost undetectable, caspase activation in control condition. *** $p < 0.001$, * $p < 0.05$, when comparing to control and n.s (not significant) when compared between the conditions indicated by the horizontal line ($n=6$, ANOVA followed by Bonferroni post-test) (C) Representative western-blot used in (A), showing the protein levels of the unprocessed Pro-Caspase-3 (32 kDa) and the active Caspase-3 (17-kDa). Note that the order of the conditions is different from (A). α -tubulin was used as a loading control. Data represented are mean \pm SEM of n independent experiments.

6. BDNF-mediated neuroprotection is $A_{2A}R$ -independent

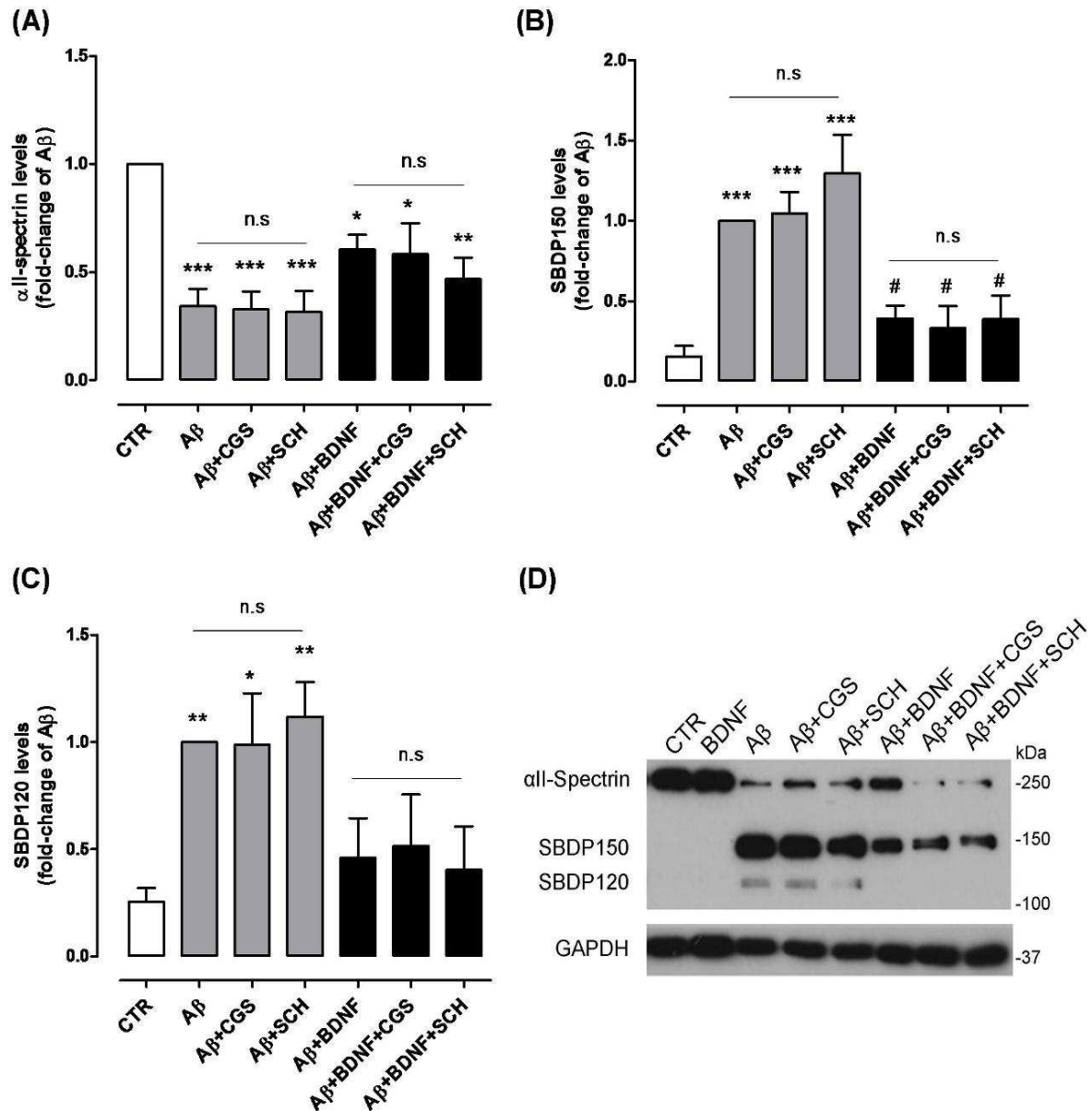


Figure 6.4 – $A_{2A}R$ does not influence BDNF-mediated reduction in $A\beta$ -induced spectrin breakdown.

(A) Quantification of α II-spectrin breakdown with consequent formation of (B) SBDP150 and (C) SBDP120 breakdown products in 8 DIV cortical neurons non-treated or treated with $A\beta_{25-35}$ ($25\mu\text{M}$) for 24hours in the absence or presence of BDNF (20ng/mL) and SCH58261 (100nM) or CGS21680 (10nM). SBDP150 and SBDP120 levels are normalized to $A\beta$ condition given their almost undetectable amount in control conditions. *** $p < 0.001$, ** $p < 0.01$, * $p < 0.05$, when comparing to control, n.s (not significant) when compared between the conditions indicated by the horizontal line and # $p < 0.05$ when comparing to $A\beta$ ($n=6$, ANOVA followed by Bonferroni post-test) (D) Representative western-blot used in (A-C), showing the protein levels of α II-spectrin, SBDP150 and SBDP120. GAPDH was used as a loading control. Data represented are mean \pm SEM of n independent experiments.

6.5. A β -induced TrkB truncation is not influenced by A_{2A}R activation

As previously shown (Chapter 4.6), A β induces a calpain-mediated truncation on TrkB-FL receptor, with concomitant formation of an intracellular fragment (TrkB-ICD) and an increase on truncated receptor (TrkB-Tc) levels [346]. As we showed previously, A_{2A}R do not influence calpain activation induced by A β . However, given that A_{2A}R activation is able to induce the translocation of TrkB receptors into lipid rafts microdomains [117], we considered noteworthy to test the hypothesis that A_{2A}R might protect TrkB receptors from calpain-mediated cleavage, by allocating them in a different location in the membrane.

To test this hypothesis, the levels of TrkB-FL, TrkB-Tc and TrkB-ICD were analysed in 8 DIV cortical cultures treated with A β ₂₅₋₃₅ (25 μ M), in the presence or absence of SCH58261 (100nM) or CGS21680 (10nM).

The results show that, upon A β incubation the A_{2A}R agonist, did not protected the TrkB-FL receptor from the A β -induced cleavage ($p < 0.05$, $n = 6$, Figure 6.5A-D). Conversely, the A_{2A}R antagonist did not change the magnitude of TrkB cleavage induced by A β ($p < 0.05$, $n = 6$, Figure 6.5A-D). Moreover, the incubation with the A_{2A}R agonist, or antagonist, for 24 hours did not significantly change TrkB expression ($p > 0.05$, $n = 6$, Figure 6.5A and D).

In addition, we also evaluated if BDNF can prevent the A β -induced TrkB truncation. The results show that 24 hours of BDNF (20ng/mL) incubation on neuronal cultures prevent the A β -induced formation on TrkB-ICD and TrkB-Tc ($p < 0.05$, $n = 6$, Figure 6.5B,C and D), an effect unaffected by the presence of the A_{2A}R agonist or antagonist ($p > 0.05$, $n = 6$, Figure 6.5B,C and D). However, the BDNF incubation also strongly reduced the levels of TrkB-FL, even in the absence of A β ($p < 0.001$, $n = 6$, Figure 6.5A and D).

6. BDNF-mediated neuroprotection is $A_{2A}R$ -independent

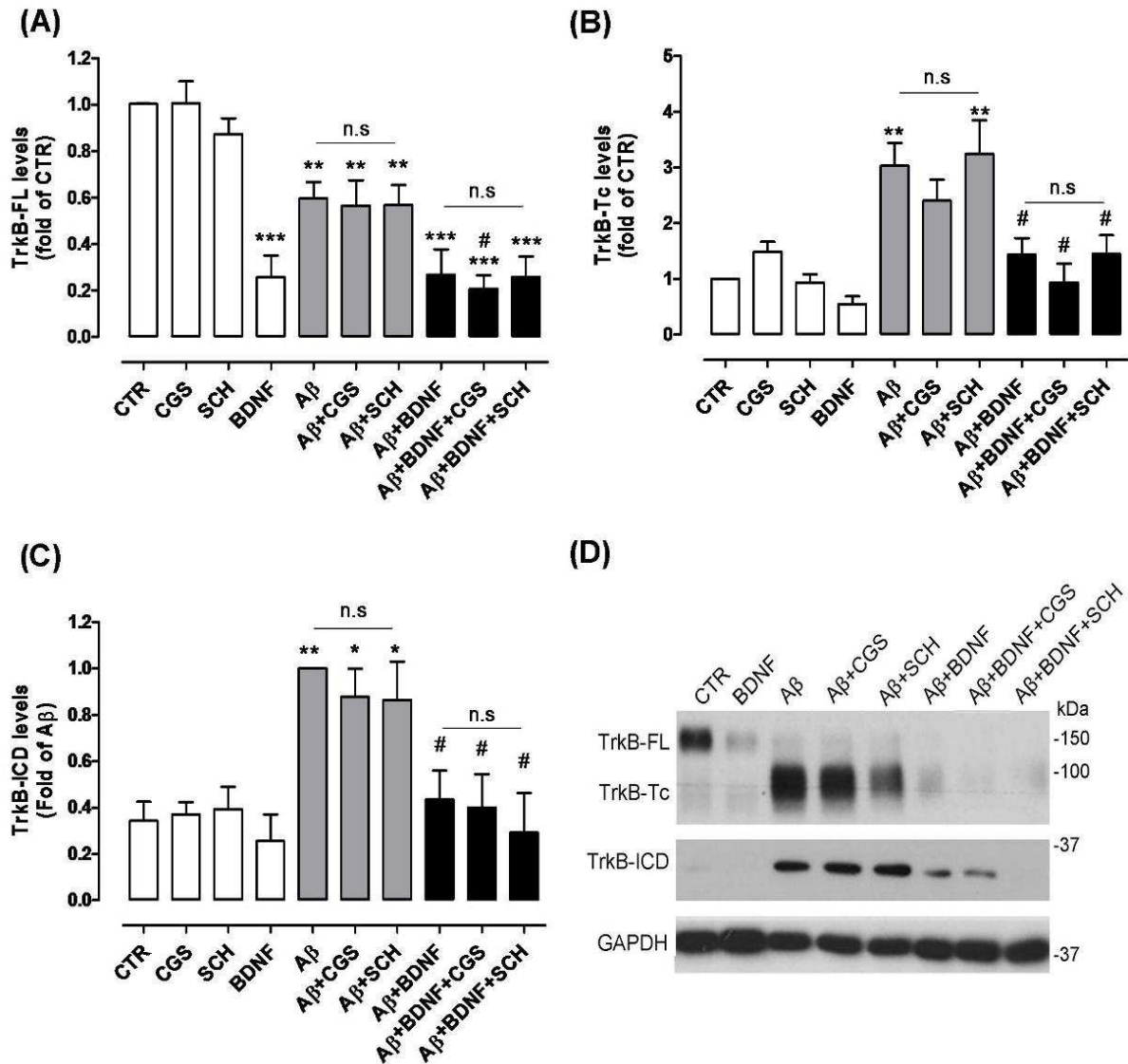


Figure 6.5 – Effect of $A_{2A}R$ and BDNF upon $A\beta$ -induced TrkB truncation

(A) Quantification of TrkB-FL cleavage with consequent formation of (B) truncated TrkB and (C) TrkB-ICD fragment, in 8 DIV cortical neurons non-treated and treated with $A\beta_{25-35}$ ($25\mu\text{M}$) for 24hours in the absence or presence of BDNF (20ng/mL) and SCH58261 (100nM) or CGS21680 (10nM). TrkB-ICD levels are normalized to $A\beta$ condition given their almost undetectable amount in control conditions. *** $p < 0.001$, ** $p < 0.01$, * $p < 0.05$, when comparing to control, n.s (not significant) when compared between the conditions indicated by the horizontal line and # $p < 0.05$ when comparing to $A\beta$ ($n=6$, ANOVA followed by Bonferroni post-test) (D) Representative western-blot used in (A-C), showing the protein levels of TrkB-FL, TrkB-Tc and TrkB-ICD. GAPDH was used as a loading control. Data represented are mean \pm SEM of n independent experiments.

6.6. Discussion

The results described in this chapter show that the BDNF exerts protective effects by reducing the caspase-3 and calpain activation upon A β ₂₅₋₃₅ toxicity, an effect independent on A_{2A}R activation.

The BDNF effects are widely described in several *in-vitro* and *in-vivo* models of neurodegenerative disorders, as Parkinson's and Alzheimer's disease [120, 402]. In particular, BDNF is able to increase cell viability of neurons incubated with toxic concentrations of A β peptide [243]. By evaluating the levels of caspase-3 and calpain activation, both proteases involved in cellular death, it was confirmed the BDNF neuroprotective effects upon A β toxicity. Accordingly, the cortical neurons incubated with A β together with BDNF present a robust reduction in conversion of pro-caspase-3 into active caspase-3 and in the caspase-3 activity. Moreover, BDNF reduced the breakdown of α II-spectrin, a neuronal cytoskeletal protein highly susceptible to neurodegeneration, and consequently, reduced the formation of the calpain- and caspase-3-specific spectrin breakdown products (SBDP150 and SBDP120, respectively).

Caspases and calpains may act synergistically to induce neuronal death. It is now known that: 1) both calpains and caspases share multiple common substrates; 2) calpains can cleave a variety of caspases leading to their activation, or inhibition; 3) caspases can cleave calpastatin leading to the activation of calpains [256, 399, 403, 404]. In accordance to the results described in this chapter, others have shown that A β triggers the activation of both calpains and caspases in septal cultured neurons [256]. Therefore, caspases or calpains inhibitors can markedly protect cultured neurons against A β -induced toxicity. However the effects of calpain and caspases inhibitors are not additive, suggesting that other pathways might be involved [256]. Here we show that BDNF can reduce the A β -induced activation of both caspase-3 and calpain. It has been shown that BDNF can also block caspase-3 activation in neurons submitted to different types of insults, such as radiation or hypoxia-ischemia [405, 406]. The signalling pathways implicated in the BDNF-mediated inhibition of both caspase-3 and calpain were not evaluated in this work. Nevertheless, it is known that BDNF can activate PI3K/Akt signalling pathway, which in turn can halt apoptosis through phosphorylation and inhibition of pro-apoptotic proteins such as Bad and caspase-9 [407]. Importantly, other member of neurotrophin family, the neurotrophin-3 (NT-3), also protects cortical neurons from A β -induced toxicity by inhibiting caspase-3, -8 and -9, in an Akt-dependent and ERK/MAPK-independent way. In particular, NT-3 incubation activates Akt, which in turn induces the expression of NAIP-1, a member of the inhibitors of apoptosis proteins (IAPs), which can directly inhibit caspase activation [408]. Although the BDNF-mediated inhibition of caspase-3 is most likely Akt-dependent, the mechanism that contributes to calpain inhibition is not known and awaits further elucidation.

6. BDNF-mediated neuroprotection is $A_{2A}R$ -independent

Strikingly, BDNF and EGF can activate m-calpain in a MAPK dependant way [178]. However, although calpains could play multiple biological roles upon physiological activation, when overactivated, these enzymes, promote neuronal death and contribute to neurodegeneration. Thus, upon physiological conditions the BDNF-mediated activation of m-calpain might be relevant for some BDNF actions, while upon pathological conditions, the BDNF might normalize calpain activity by reducing its excessive activation, and preventing the neurodegenerative process.

The actions of BDNF upon synaptic transmission and plasticity are well characterized as being dependent on $A_{2A}R$ receptor activation [108-116]. However, the results presented in this work indicate that $A_{2A}R$ activation is not required for BDNF neuroprotective actions upon $A\beta$ insult to 8 DIV primary cortical cultures. Similarly to the results obtained here, $A_{2A}R$ activation is not required for the effect of BDNF upon neuronal branching [99, 118]. Thus, taken together this data might indicate that the trophic and survival actions of BDNF do not depend on $A_{2A}R$ activation. However, it is not clear why the BDNF actions could be dependent or independent on $A_{2A}R$ activation, in distinct situations. Nevertheless, most $A_{2A}R$ -dependent actions of BDNF are synaptic and fast-mediated actions, while the trophic and neuroprotective actions of BDNF are slow and long-lasting events that require protein synthesis. Thus, one possibility that might explain the discrepancy in $A_{2A}R$ dependence is the fundamental difference between the slow and fast-mediated actions of BDNF, which in turn involve different signalling pathways.

One might speculate whether the lack of $A_{2A}R$ expression, in the cultures, could explain the absence of $A_{2A}R$ effects. However, this is not the case since although $A_{2A}R$ are not abundantly expressed in the hippocampus or neocortex [98], the $A_{2A}R$ is detected in 6 DIV cortical cultures by immunocytochemistry [409], and also by western-blot and RT-PCR in 9 DIV cortical cultures [410]. Controversial data have shown protective effects against insults either by blocking or activating $A_{2A}R$. Accordingly, it has been shown that $A_{2A}R$ activation, by CGS21680, reduces kainite-induced excitotoxicity by 40%, in 6DIV cortical cultures [409]. In opposition, the blockade of $A_{2A}R$ by SCH58261 improves cell viability against the glutamate (20-1000 μ M, 24h) insult, whereas $A_{2A}R$ activation does not protect neurons, in 9 DIV cortical cultures [410]. In addition, both caffeine (a non-selective adenosine receptor antagonist) and $A_{2A}R$ antagonists prevent the toxicity induced by 48h of $A\beta_{25-35}$ (25 μ M) incubation on cultured cerebellar granule neurons [411]. Moreover, $A_{2A}R$ blockade, or genetic deletion of $A_{2A}R$, prevents synaptotoxicity and memory dysfunction caused by intracerebroventricular administration of 2nmol of $A\beta_{1-42}$ in mice [383, 412]. Finally, blockade of $A_{2A}R$, by SCH58261, prevented the reduction in cell viability induced by the incubation of oligomeric-enriched $A\beta_{1-42}$ (500nM), in hippocampal cultures [383]. In this work, using cortical neurons, no significant protective effect of the $A_{2A}R$ agonist, or antagonist, against the toxicity induced by the

incubation of fibrillary-enriched A β ₂₅₋₃₅ (25 μ M) [30] was seen. Considering that A_{2A}R inhibition exerts protective actions, probably it was not sufficient to prevent the strong toxic insult used in this work. Indeed, previous results obtained showed that the same preparation of A β ₂₅₋₃₅ (25 μ M, 24hours) decreased cell viability by around 45%, while glutamate (1000 μ M, 24h) only decreased viability by around 30% [409]. Moreover, the same study showed that the neuroprotection afforded by A_{2A}R blockade against glutamate insult (100 μ M, 24h) requires the activation of the corticotrophin-releasing factor (CRF) receptor subtype 2. Interestingly, the agonist of the CRF receptors was able to protect cortical neurons when glutamate was present at lower concentrations (50 and 100 μ M, 24hour), but failed to protect neurons at a higher concentration of glutamate (500 and 1000 μ M) [409]. Thus, this results support the hypothesis that A_{2A}R inhibition might be not able to revert the toxicity of a strong insult such as A β ₂₅₋₃₅ (25 μ M). Nevertheless, it is noteworthy to highlight that BDNF was able to reduce, very significantly, both caspase-3 activation and α II-spectrin breakdown, upon the A β ₂₅₋₃₅ (25 μ M) insult.

Despite that TrkB gene transcription can be regulated by Ca²⁺ or cAMP [393, 394], the results obtained here show that the activation of A_{2A}R, which is known to increase cAMP levels, does not significantly change TrkB-FL expression. Although incubation of cortical neurons with forskolin, which stimulates cAMP production, increased mRNA transcripts of both full-length and truncated TrkB within 1 hour, the increase on protein only appear to be evident after 16 hours [393]. Thus, it is possible that A_{2A}R activation had not been sufficient to significantly increase TrkB protein levels after 24hours. In addition, the results also show that acute blockade of A_{2A}R for 24hours does not changed TrkB expression. However, the *in-vivo* chronic blockade of A_{2A}R for one month decreased both protein and mRNA levels of TrkB-FL [116].

Finally, we evaluated whether BDNF was able to prevent the A β -induced truncation of TrkB, which is known to be mediated by calpains, as we previously described in [346]. We found that BDNF significantly reduces the levels of TrkB-FL cleavage fragments (TrkB-Tc and TrkB-ICD). However, in accordance to what had been initially described [347], the present results confirm that BDNF strongly downregulates TrkB-FL protein levels after 24 hours of incubation. This BDNF-mediated downregulation of TrkB-FL is a fast event, in which total TrkB-FL receptor levels decrease by 80% in just 3 hours after the ligand binding, a value that remain almost constant up to 24 hours, at least [347]. Given that the calpain-mediated cleavage of TrkB-FL has a much slower time course (Figure 4.5B)Figure 4.5 – A β peptide induces a TrkB-FL receptor cleavage. [346], it is likely that when calpains became active and begin to cleave TrkB-FL, the levels of the receptor are almost fully reduced due to the BDNF-mediated downregulation. Thus, the observation that BDNF prevent the formation of TrkB-FL cleavage fragments might be explained by both calpain inhibition and by BDNF-mediated downregulation of TrkB-FL.

6. BDNF-mediated neuroprotection is $A_{2A}R$ -independent

Together, these results show that BDNF exerts a robust neuroprotective effect upon $A\beta$ -induced toxicity, by reducing calpain and caspase-3 activation. In opposition to most fast synaptic actions of BDNF, the neuroprotective effect of this neurotrophin does not depend on $A_{2A}R$ activation.

7. General discussion and conclusions

Multiple studies have shown the vital importance of BDNF in the brain. Indeed, BDNF is not only essential for the regulation of synaptic plasticity and memory formation, but also confers strong protection to neurons against a wide variety of toxins and insults [120]. Interestingly, a growing number of studies have shown that BDNF signalling is impaired in several chronic neurodegenerative disorders, including AD [319-326, 333-337]. Thus, the dysregulation of BDNF signalling might be a consequence of the disease which in turn could aggravate the progression of the degenerative process, or might be one of the leading causes of the pathology. Indeed, BDNF administration or upregulation of TrkB and BDNF signalling on AD animal models have shown strong beneficial effects, including the reduction of neurodegeneration and increased cognitive performance [120, 243, 315-317, 344, 413]. Despite the importance of BDNF on AD, the mechanisms that contribute to the loss of BDNF signalling upon AD remained largely unknown.

In this work, it was found that A β induces a dysregulation on TrkB receptors levels and abolishes BDNF actions upon synaptic plasticity and neurotransmitter release, in a calpain-dependent mechanism. In particular, A β induces calpain activation on cortical cultures, resulting in the cleavage of TrkB-FL receptor in the juxtamembrane region, producing a new truncated receptor (TrkB-T') which contains the Shc binding site and an intracellular domain fragment (TrkB-ICD) which contains the entire TrkB kinase domain. Interestingly, the presence of TrkB-ICD was detected in human brain sample, indicating that endogenous human calpains are able to cleave human TrkB receptor. Moreover, A β selectively increases the mRNA levels of truncated TrkB isoforms, an effect independent on calpains.

In addition, the exposure of hippocampal slices to A β results in the abolishment of BDNF action upon LTP and upon glutamate and GABA release, an effect reverted by the inhibition of calpains.

Several studies have demonstrated the benefits of calpain inhibitors in animal models of neurodegenerative disorders. In particular, calpain inhibitors reduce neurodegeneration and improved cognitive performance in AD animal models [199, 201, 202]. The present work shows that calpain inhibition prevents TrkB receptors changes induced by A β and also restores BDNF actions reinforcing the rationale for the use of calpain inhibitors in the therapeutics AD.

Interestingly, most of BDNF synaptic actions are dependent or facilitated by A_{2A}R activation [108-116]. However, inhibitors of A_{2A}R, in particular the orally-active KW-6002 inhibitor, have been proposed as a therapeutical tool against Parkinson's disease and AD [376-378]. Here, we evaluated the effect of the chronic *in-vivo* administration of KW-6002 on the BDNF actions upon synaptic plasticity. It was shown that KW-6002 administration for one

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month to young rats, reduces the mRNA and protein levels of TrkB-FL in the hippocampus, and also abolishes the facilitatory effect of exogenous BDNF upon LTP in hippocampal slices. Thus, we conclude that A_{2A}R inhibition might impair BDNF signalling, at least in young rats.

A_{2A}R inhibition has been associated to the reduction of neuronal excitability and to neuroprotection against toxic insults such as A β [376-378, 383, 411, 412]. Here, by evaluating the extension of caspase-3 and calpain activation, it was possible to show that acute A_{2A}R inhibition does not protect cortical neurons against a strong A β insult. Moreover, the activation of A_{2A}R also does not influence neuronal death induced by A β . However, BDNF reduces the activation of caspase-3 and calpain induced by A β insult, an effect that it is also observed in the presence of the A_{2A}R agonist or antagonist. Thus, it is possible to conclude that, in opposition to synaptic plasticity, the protective action of BDNF upon caspase-3 and calpain activation, in A β toxicity, does not depend on A_{2A}R activation.

Together, the present work shows that A β dysregulates TrkB receptors and BDNF actions on synaptic plasticity and neurotransmitter release, by a calpain-dependent mechanism. This data reinforces the rationale of using calpain inhibitors for the therapeutics of AD. Moreover, the acute blockade, or activation, of A_{2A}R does not influence the protective effect mediated by BDNF against A β peptide. Interestingly the chronic *in vivo* blockade of A_{2A}R, which has been considered as a useful therapeutical strategy against neurodegenerative disorders, abolishes BDNF actions upon hippocampal synaptic plasticity and decreases TrkB-FL receptors levels. This data highlight the caution that must be taken whenever studying A_{2A}R antagonist as pharmacological tools to treat neurodegenerative disorders where BDNF signalling is impaired.

8. Future perspectives

One interesting question raised in chapter 4, that would be interesting to address is whether the TrkB intracellular cleavage fragment (TrkB-ICD) has any biological function. Calpains usually cleave proteins in interdomain regions, releasing big stable fragments that can have a distinct or enhanced biological activity [127]. For instance, calpain cleave p35 protein into p25, enhancing its activity and promoting an aberrant activation of CDK5, which in turn contributes to neurodegeneration [196, 282, 285, 361]. In another study closely-related to this work, it was described that calpain cleaves Src kinase upon excitotoxicity, both *in-vivo* and *in-vitro*, releasing a cytosolic 52kDa fragment which contains the Src kinase domain. The expression of this fragment in neuronal cultures was sufficient to induce neuronal death, possibly by inactivating Akt kinase [414]. Our preliminary results suggest that TrkB-ICD fragment released after the cleavage, has a different conformation than the native TrkB-FL protein (see subchapter 10.1). Moreover, TrkB-ICD appears to be enriched in the non-cytosolic fraction (probably located within the nucleus or another organelle, or even associated with membranes). Thus, in future, it would be interesting to confirm the subcellular localization of TrkB-ICD and its putative biological function. To help addressing this issue we already have cloned the TrkB-ICD fragment and generated an expressing vector containing the fragment, the pcDNA-TrkB-ICD-V5 (see subchapter 10.2). As future work, we would like to transfect neurons or neuronal lines and evaluate: 1) the subcellular localization of the fragment by microscopy; 2) cell viability alterations (since many of calpain-generated fragments have a pro-apoptotic role); 3) phosphorylation status of the signalling pathways associated with TrkB-FL (Akt, ERK, PLC γ), since TrkB-ICD might be phosphorylating these proteins, or TrkB-ICD might be not functional and attenuating the phosphorylation of these signalling molecules by competing with native kinase receptors. Additionally, as a major goal, we would like to evaluate if the *in-vivo* administration of calpain inhibitors increases BDNF signalling in a neurodegenerative AD mice model.

Finally, regarding chapter 6, it would be important in future to identify the molecular pathways by which BDNF inhibits the A β -induced calpain overactivation.

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10. Appendix

10.1. *TrkB-ICD: putative conformation and localization.*

Preliminary data obtained in this thesis, indicate that the TrkB-ICD fragment, which is produced upon calpain-mediated cleavage of TrkB-FL receptor, adopts a different conformation after the cleavage. Indeed, it was observed that the c-terminal TrkB antibody is only able to immunoprecipitate TrkB-FL, but not TrkB-ICD (Figure 10.1A). Given that both TrkB-FL and TrkB-ICD share the same c-terminal domain (see Figure 10.1B) and are both recognized by the c-terminal TrkB antibody in western-blot (denaturing conditions), our hypothesis would be that after the cleavage of TrkB-FL, the TrkB-ICD fragment would adopt a different structure in solution, masking the c-terminal epitope and preventing the immunoprecipitation with the c-terminal TrkB antibody in native conditions.

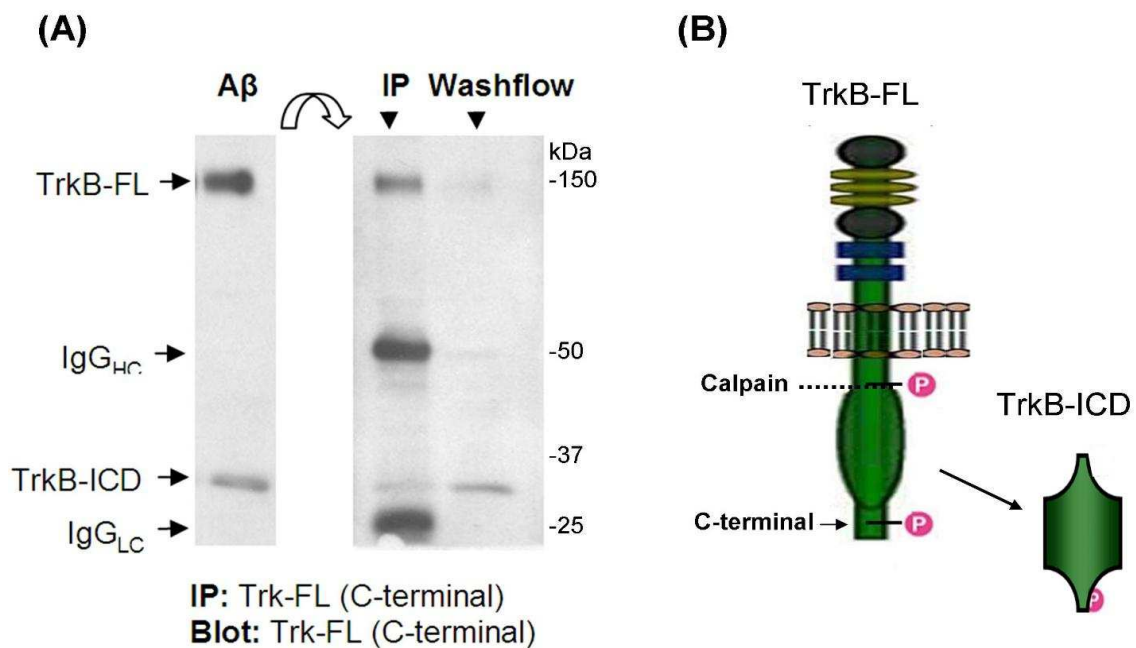


Figure 10.1 – TrkB-ICD conformation

(A) Left: Western-blotting, probed with TrkB c-terminal antibody, showing the presence of TrkB-FL and the TrkB-ICD fragment on A β -treated neuronal cultures. Right: Immunoprecipitation (IP) of A β -treated neuronal cultures lysate with the TrkB c-terminal antibody. This antibody fully immunoprecipitates TrkB-FL from the A β -treated neurons, but it failed to immunoprecipitate the 32kDa TrkB-ICD. Thus, the supernatant (washflow) does not contain TrkB-FL, since it was fully immunoprecipitated, and it contains almost all original amount of TrkB-ICD. **(B)** Schematic representation of TrkB-FL, showing calpain cleavage site, c-terminal, Y515 and Y816 (indicated with P), and TrkB-ICD with a different conformation.

To identify the subcellular localization of TrkB-ICD, it was performed a cytosolic and nuclear protein extraction, as described in [415], from A β -treated cortical neurons. By analysing the levels of GAPDH (a cytosolic protein), we observed that TrkB-ICD is not enriched in cytosolic (GAPDH) fraction. However, we cannot conclude that TrkB-ICD is enriched in nuclear (Lamin) fraction, since this fraction was contaminated with other fractions and it was also detected the presence of TrkB-FL (transmembrane protein located in plasma membrane and intracellular membranes). Thus, our preliminary data suggests that TrkB-ICD is not enriched in the cytosolic fraction.

The indication that TrkB-ICD has a different conformation and that TrkB-ICD seems to be enriched in nucleus or inside other organelles, suggest that this fragment may have a distinct function.

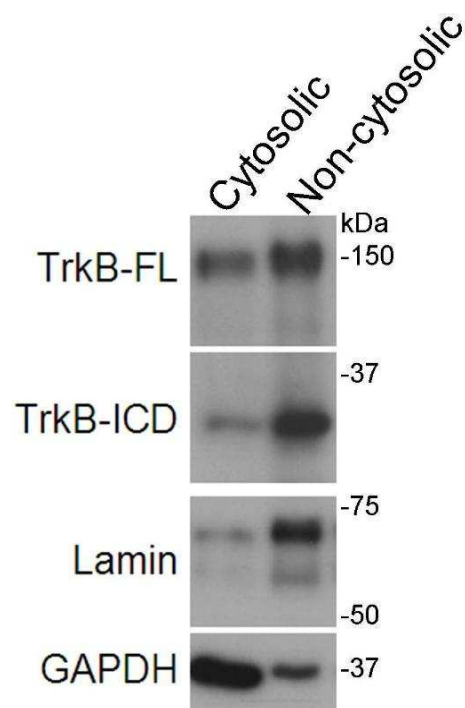


Figure 10.2 – TrkB-ICD subcellular localization

Western-blot of cytosolic and non-cytosolic fractions from A β -treated cultured neurons, showing the levels of TrkB-ICD and TrkB-FL (transmembrane protein), Lamin A/C (nuclear protein) and GAPDH (cytosolic protein).

10.2. *TrkB-ICD: cloning and transfection*

In order to study the putative biological role of TrkB-ICD fragment, and also to evaluate its subcellular localization by microscopy, we already cloned the fragment sequence into a mammalian expression vector (by using a PCR cloning kit – pcDNA Gateway Directional TOPO expression by *Invitrogen*).

Given that we identified the TrkB cleavage site by N-sequencing, we were able to design a pair of PCR primers with the proper sequences to amplify the TrkB-ICD sequence. In addition, to be able to amplify the TrkB-ICD sequence, the primers must also have the required sequence to facilitate directional cloning and the required Kozak sequence to promote the initiation of translation. Moreover, the reverse primer should not contain the termination codon in order to fuse the TrkB-ICD product in frame with the c-terminal V5 tag. Thus, the forward primer was: 5'-CACCAATGAGCCAGCTCAAGC-3' (the first 4 nucleotides CACCA will promote directional cloning, and the ATG is the initiation codon); and the reverse primer was 5'-GCCTAGGATGTCCAGGTAGAC-3'.

By performing a RT-PCR with the selected primers, we were able to amplify a ~910bp product, which as the expected size of TrkB-ICD product (Figure 10.3A). The TrkB-ICD band obtained with 64°C of annealing temperature was cut and gel-purified using a DNA extraction kit. One fifth of total purified TrkB-ICD DNA was applied in the agarose gel, and its purity was confirmed by the appearance of a single band (Figure 10.3B).

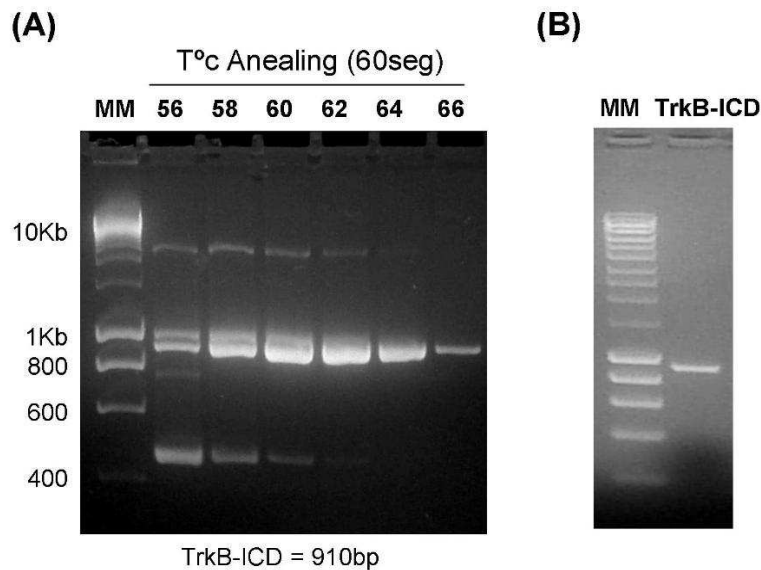


Figure 10.3 – Amplification of TrkB-ICD by RT-PCR

(A) Agarose electrophoresis showing the amplification of TrkB-ICD fragment by RT-PCR in different annealing temperatures, from the total mRNA extracted from a rat hippocampus. The expected size of TrkB-ICD product is 910bp. (B) Agarose electrophoresis showing the gel-purified TrkB-ICD product.

After the purification process, 3 ng of purified TrkB-ICD amplification product were cloned into 3 ng of linearized pcDNA 3.2 TOPO vector (*Invitrogen*). After the cloning reaction, the chemically competent *E.coli* cells (TOP10, *Invitrogen*) were transformed and plated in selective media overnight at 37°C. Then, six colonies were picked and analysed by colony PCR and three of them contained the plasmid of interest with the TrkB-ICD inserted in the correct direction (Figure 10.4). The results were further confirmed by restriction analyses (not shown). One of the plasmids was selected and its sequence was ultimately confirmed by DNA sequencing.

Finally, after the successful cloning of TrkB-ICD into pcDNA 3.2, a neuroblastoma cell line (SH-SY5Y) was lipo-transfected with the expression vector (Figure 10.5). The results obtained indicate the presence of a ~35kDa protein containing the V5-tag, which matches with the expected weight of TrkB-ICD plus the linker and V5-Tag (4 kDa). This TrkB-ICD-V5 was not detected by the c-terminal antibody of TrkB (not shown), possibly due to the epitope alteration on c-terminus. The results obtained also indicate a slight increase in the levels of SBDP120 (caspase-3 specific SBDP) in the presence of the TrkB-ICD-V5 (Figure 10.5).

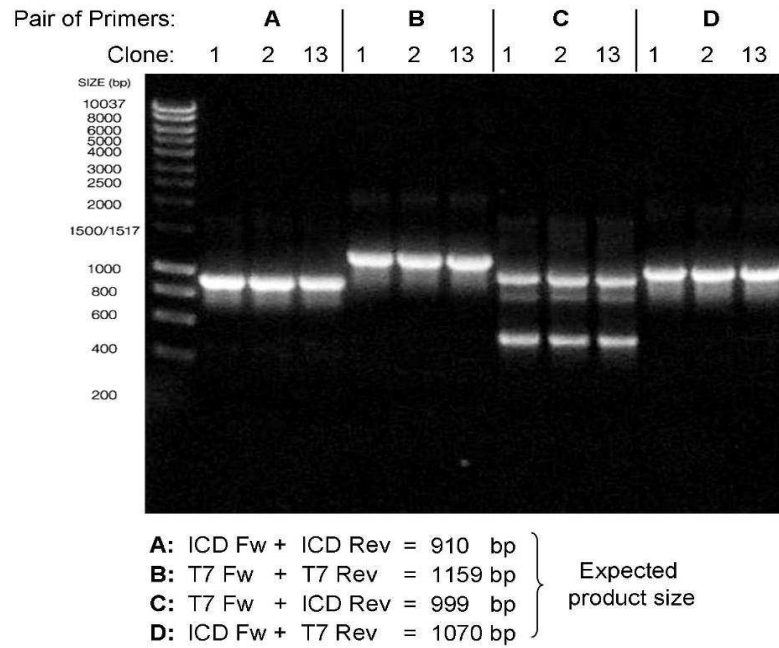


Figure 10.4 – Analysis of selected E.coli colonies by RT-PCR.

Agarose electrophoresis showing the RT-PCR amplification of distinct products based on the mentioned primers combination. T7 sequences are located on the plasmid and flank the TrkB-ICD insertion product. All products sizes observed matched with the expected sizes for a plasmid with the TrkB-ICD inserted in the correct direction.

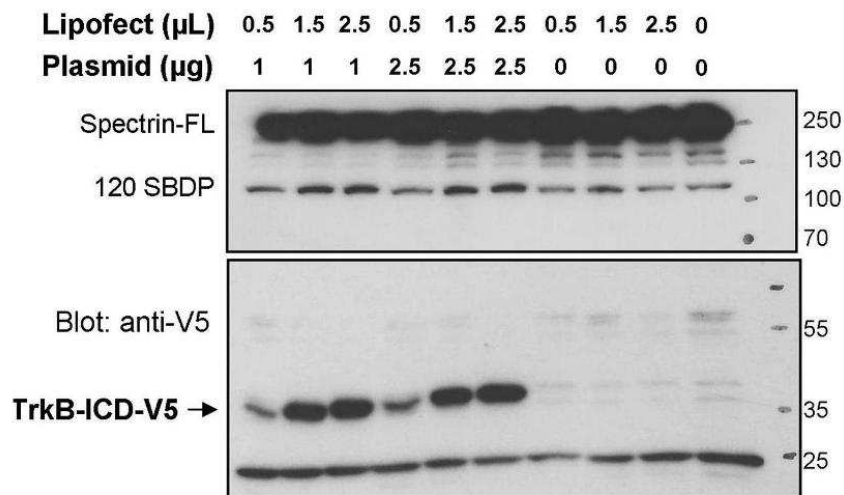


Figure 10.5 – Transfection of SH-SY5Y cell line with pcDNA-TrkB-ICD-V5.

Western-blot probed with anti- α -spectrin antibody (upper panel) and anti-V5-tag antibody (lower panel) for SH-SY5Y cells 72hours after transfection with different amounts of lipofectamine2000 and plasmid in 24-well plates (0.25×10^6 cells/ well).