

Clustering and periodicity of neurofibrillary tangles in the upper and lower cortical laminae in Alzheimer's disease

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Abstract

In Alzheimer's disease (AD), neurofibrillary tangles (NFT) occur within neurons in both the upper and lower cortical laminae. Using a statistical method that estimates the size and spacing of NFT clusters along the cortex parallel to the pia mater, two hypotheses were tested: 1) that the cluster size and distribution of the NFT in gyri of the temporal lobe reflect degeneration of the feedforward (FF) and feedback (FB) cortico-cortical pathways, and 2) that there is a spatial relationship between the clusters of NFT in the upper and lower laminae. In 16 temporal lobe gyri from 10 cases of sporadic AD, NFT were present in both the upper and lower laminae in 11/16 (69%) gyri and in either the upper or lower laminae in 5/16 (31%) gyri. Clustering of the NFT was observed in all gyri. A significant peak-to-peak distance was observed in the upper laminae in 13/15 (87%) gyri and in the lower laminae in 8/12 (67%) gyri, suggesting a regularly repeating pattern of NFT clusters along the cortex. The regularly distributed clusters of NFT were between 500 and 800 μm in size, the estimated size of the cells of origin of the FF and FB cortico-cortical projections, in the upper laminae of 6/13 (46%) gyri and in the lower laminae of 2/8 (25%) gyri. Clusters of NFT in the upper laminae were spatially correlated (in phase) with those in the lower laminae in 5/16 (31%) gyri. The clustering patterns of the NFT are consistent with their formation in relation to the FF and FB cortico-cortical pathways. In most gyri, NFT clusters appeared to develop independently in the upper and lower laminae.

Key words: Alzheimer's disease, neurofibrillary tangles, pattern analysis by regression, clustering, cortico-cortico projections, peak-to-peak distance.

Introduction

In the cerebral cortex in Alzheimer's disease (AD), neurofibrillary tangles (NFT) occur within the larger pyramidal neurons in both the upper and lower cortical laminae [12,15,21,22,26]. These results suggest that NFT affect both the feedforward (FF) and feedback (FB) cortico-cortical pathways which

have their cells of origin mainly in laminae II/III and V/VI respectively [15] and that NFT pathology could spread between cortical areas via these projections [28]. Consistent with this hypothesis, NFT in the cerebral cortex are often clustered [20,26], the clusters being regularly distributed along the cortex parallel to the pia mater [1,3]. If NFT are related to

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the FF and FB pathways, there should be a pattern of regularly repeating NFT clusters of similar size to the cells of origin of the cortico-cortical pathways, estimated to be between 500 and 800 μm [20].

In addition, NFT could spread across the cortex within vertical columns of cells since cortical columns associated with these projections are heavily interconnected along the vertical axis but sparsely in the horizontal plane [24]. If spread of NFT occurs within a column then there should be a spatial correlation between the NFT clusters in the upper and lower laminae.

Previous methods of measuring the spatial patterns of NFT [1,3,6,26] have used the 'Poisson' method to estimate cluster size. This method, however, does not measure the cluster size accurately and does not provide an estimate of the spacing or 'periodicity' of the clusters [2]. Hence, the Poisson method has limited usefulness in testing specific hypotheses relating NFT distribution to anatomical projections. Pattern analysis by regression [4], however, provides a more accurate estimate of cluster size and a measure of the spacing of the clusters. Using this method, two hypotheses were tested: 1) that the spatial arrangement and cluster size of the NFT is consistent with degeneration of the FF and FB cortico-cortical pathways, and 2) that there is a spatial relationship between clusters of NFT in the upper and lower laminae consistent with spread of NFT within vertical columns of cells.

Materials and Methods

Cases

Ten cases of sporadic AD (details in Table I) were obtained from the Brain Bank, Department of Neuropathology, Institute of Psychiatry. Informed consent was given for the removal of all tissue and followed the principles embodied in the 1964 Helsinki declaration (as modified Edinburgh, 2000). Post-mortem (PM) delay was less than 20 hours in each case. The AD cases were clinically assessed and all fulfilled the 'National Institute of Neurological and Communicative Disorders and Stroke and Alzheimer's Disease and Related Disorders Association' (NINCDS/ADRDA) criteria for probable AD [29]. The histological diagnosis of AD was established by the presence of widespread neocortical senile plaques (SP) consistent with the 'Consortium to Establish a Registry of Alzheimer's Disease' (CERAD) criteria

[25]. In addition, NFT were abundant in the cerebral cortex and hippocampus of each case.

Tissue preparation

Blocks of the temporal cortex, including the inferior temporal gyrus (ITG) and parahippocampal gyrus (PHG), were taken from each case at the level of the lateral geniculate body. Tissue was fixed in 10% phosphate buffered formal-saline and embedded in paraffin wax. 7 μm coronal sections were stained with the Gallyas silver impregnation method [18], which reveals the cellular NFT particularly clearly [10]. Sections were counterstained with haematoxylin to reveal the neuronal and glial cytoarchitecture.

Morphometric methods

Laminae II/III and V/VI contain the majority of pyramidal cells that give rise to the FF and FB projections respectively [16,17,30] and the majority of NFT in AD are associated with these laminae [14,21,23,27]. Hence, in each gyrus with sufficient densities of NFT, two guidelines were marked on the slide, one at the lamina I/II boundary to sample laminae II/III and one at the IV/V boundary to sample laminae V/VI. NFT were counted in horizontal strips of tissue using between 64 and 128 contiguous 125 \times 250 μm microscopic fields, the short dimension of the sample field being aligned parallel to the appropriate guideline.

Table I. Demographic data and cause of death of the cases studied

Patient	Gender	Age	Onset	Cause of death
A	M	82	78	bronchopneumonia
B	M	73	66	bronchopneumonia
C	F	87	82	myocardial infarction
D	F	82	75	bronchopneumonia
E	F	66	59	NA
F	F	70	64	bronchopneumonia
G	F	85	80	bronchopneumonia
H	F	70	NA	ischaemic heart disease
I	M	80	77	bronchopneumonia
J	M	88	72	bronchopneumonia

M – male, *F* – female, *NA* – data not available

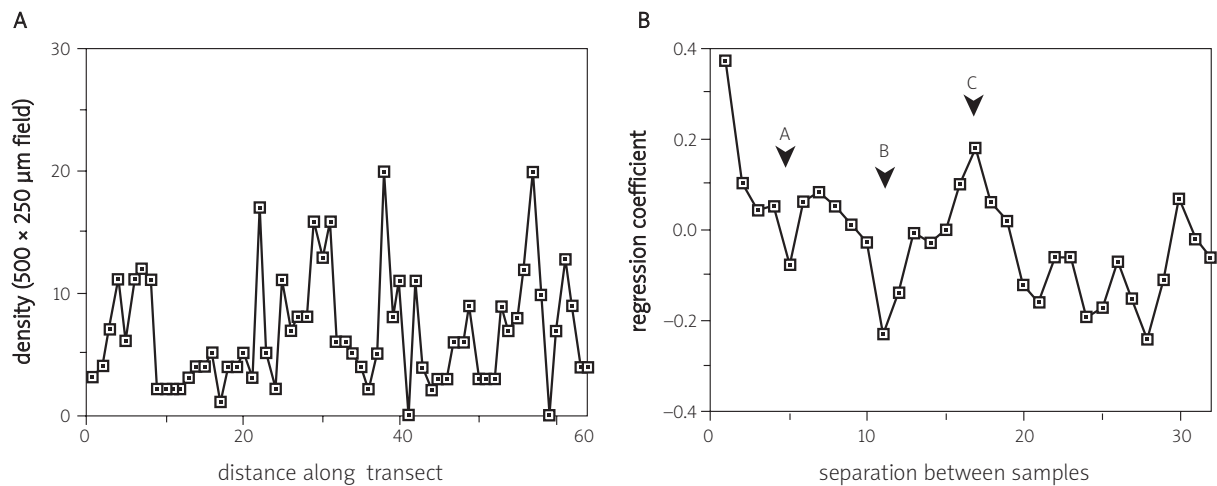


Fig. 1A-B. Spatial pattern analysis by regression of neurofibrillary tangles (NFT) along the inferior temporal gyrus of patient A: A) Density plot showing variation in the numbers of NFT along the cortex, B) pattern analysis plot of the density data. Arrows A and B indicate the cluster sizes present, and arrow C indicates the peak-to-peak distance

Spatial pattern analysis

The data were analysed using 'pattern analysis by regression' [4,13]. The method is based on the principle that if the NFT are clustered along the cortex, densities in adjacent sample fields (comprising the X and Y variables) will both be high if the fields are located over a cluster and low if they are located between two clusters. In such a case, adjacent pairs of values taken from all of the contiguous fields will be positively correlated as measured by the linear regression coefficient (β). If the spacing between the sample fields is increased, i.e. the sample fields are separated by one field, two fields, etc., it becomes increasingly probable that there will be pairs of values such that one member of the pair will be located over a cluster of NFT and the other over an adjacent space. Hence, the value of β will decrease as the degree of separation between the pairs of sample fields increases. The degree of spacing at which the maximum significant negative regression coefficient ($-\beta_{\max}$) occurs is an estimate of the mean cluster size [4]. In addition, if clusters are distributed more or less evenly along the strip of tissue sampled, a significant $+\beta_{\max}$ indicates the peak-to-peak distance of the clusters of NFT. This is because at greater degrees of separation, the sample fields are now so widely spaced that they span adjacent clusters or spaces. Hence, β is calculated for pairs of adjacent fields and then with an increasing degree of separation (i.e.

separated by 1, 2, 3, 4, 5,, n units). β is plotted as a function of the degree of separation between the sample fields and the significance of β determined by a 't' test of the regression coefficient [4].

To determine the spatial correlation between the clusters of NFT in the upper and lower laminae, the degree of correlation between the NFT densities was tested using Pearson's correlation coefficient ('r') [5]. The degree of spatial correlation depends on the field size at which densities are measured [5]. Hence, adjacent lesion densities were added together successively in pairs to create larger field sizes, viz., $125 \times 250 \mu\text{m}$, $250 \times 250 \mu\text{m}$, $500 \times 250 \mu\text{m}$, etc., up to a size limited by the number of original sample fields. Pearson's 'r' was calculated between the densities at each field size to establish the scale at which the correlation was most evident. Significant correlations present at the smallest field size suggests a close spatial relationship between the lesions at field sizes less than $250 \times 250 \mu\text{m}$, whereas correlations present at larger scales only, e.g. $500 \times 250 \mu\text{m}$ or $1000 \times 250 \mu\text{m}$, could be due to the general abundance of NFT in the upper and lower cortex [5].

Results

An example of a pattern analysis plot using the regression method (ITG, upper laminae of Patient A) is shown in Fig. 1. The clustering of NFT along the cortical strip is evident from the density plot (Fig. 1A). The

Table II. Clustering and periodicity of neurofibrillary tangles (NFT) in the upper and lower cortical laminae in gyri of the temporal lobe in ten patients with sporadic Alzheimer's disease

Case	Region	Upper cortex		Lower cortex	
		Cluster size (µm)	PD (µm)	Cluster size (µm)	PD (µm)
A	ITG	625, 1375	2125	5875	–
	PHG	>4000	7000	2750	4750
B	ITG	1125	3750	750	2500
	PHG	>4000	–	–	–
C	ITG	1375	4750	1000	3375
	PHG	750	2500	1500	–
D	PHG	625	1500	–	–
E	ITG	250	1500	–	–
	PHG	500	1875	–	–
F	PHG	1125	2875	1000	3375
G	PHG	–	–	1875	–
	ITG	1375	4000	500	1125
H	PHG	500	3000	1875	–
	ITG	250	1125	1125	2375
I	PHG	1625	5125	1125	2375
	ITG	875	–	1000	3250

PD – peak-to-peak distance. Comparison of mean dimensions between upper and lower laminae: cluster size $t = 0.70$ ($P > 0.05$); peak-to-peak distance $t = 0.41$ ($P > 0.05$); correlations between upper and lower laminae: cluster size $r = 0.45$ ($P > 0.05$); peak-to-peak distance $r = -0.06$ ($P > 0.05$)

spatial pattern analysis plot (Fig. 1B) indicates three significant peaks: a negative peak 'A' at a degree of separation of 5 units indicates the presence of clusters of NFT approximately 625 µm in diameter (5×125 µm), 2) a negative peak 'B' at a degree of separation of 11 units suggesting aggregation of NFT into larger clusters approximately 1375 µm (11×125 µm) in diameter, 3) and a positive peak 'C' at degree of separation of 17 units, indicating that the larger clusters are distributed with a peak-to-peak distance of approximately 2125 µm (17×125 µm). There is some evidence that the smaller clusters may also be regularly distributed but the positive peak at a separation distance of 7 units was not significant.

Table III. Correlations (Pearson's 'r') between the densities of neurofibrillary tangles (NFT) in the upper and lower cortex in 10 cases of Alzheimer's disease. Data indicate the field sizes (µm) at which there was a significant correlation

Case	Region	Correlation
A	ITG	ns
	PHG	125***, 250**, 500***, 1000***, 2000**
B	ITG	125*
C	ITG	ns
	PHG	ns
F	PHG	500*, 1000*
H	ITG	ns
	PHG	800*
I	ITG	ns
	PHG	2000*
J	ITG	ns

*** $P < 0.001$; ** $P < 0.01$; * $P < 0.05$; ns – not significant

The spatial patterns of the NFT in all 16 gyri studied are shown in Table II. NFT were present in both the upper and lower laminae in 11/16 (69%) gyri, and in either the upper or lower laminae in 5/16 (31%) gyri. Clustering of the NFT was evident in all gyri. A significant peak-to-peak distance was observed in the upper laminae in 13/15 (87%) gyri and in the lower laminae in 8/12 (67%) gyri, suggesting a repeating pattern of NFT clusters along the cortex. Clusters were in the size range 500-800 µm in 6/13 (46%) analyses of the upper cortex and 2/8 (25%) analyses of the lower cortex. In gyri with NFT in the upper and lower laminae, there were no significant laminar differences in cluster size ($t = 0.70$, $P > 0.05$) or peak-to-peak distance ($t = 0.41$, $P > 0.05$). In addition, there were no significant correlations between either the cluster size ($r = 0.45$, $P > 0.05$) or peak-to-peak distance ($r = -0.06$, $P > 0.05$) in the upper laminae compared with corresponding values in the lower laminae.

The spatial correlations between the densities of NFT in the upper and lower cortical laminae are shown in Table III. Variations in the density of NFT in the upper cortex were positively correlated with those in the lower cortex in 5/16 (31%) gyri. In gyri with a significant positive correlation, correlations

were present at the smallest field size in two gyri and at the larger field sizes only in three gyri.

Discussion

This study examined two hypotheses: 1) that the clustering patterns of NFT in the temporal lobe are attributable to the degeneration of the cells of origin of the FF and FB cortico-cortical projections, and 2) that there was a spatial relationship between the clusters of NFT in the upper and lower cortical laminae. The data provide evidence to support the first hypothesis but less evidence for the second hypothesis.

In primates, the cells of origin of the cortico-cortical projections are clustered and occur in bands that are regularly distributed along the cortex. Individual bands of cells, approximately 500-800 μm in width, traverse the cortical laminae in columns [20]. Hence, if NFT are associated with these cells, they should be distributed in clusters which have a regular periodicity along the cortex, and with a mean size between 500 and 800 μm . In most gyri, the NFT occurred in regularly distributed clusters consistent with the hypothesis [1]. In addition, in 46% of analyses of the upper laminae and 25% of analyses of the lower laminae, the sizes of the NFT clusters were within the predicted range of 500-800 μm [20]. In the remaining gyri, however, the clusters of NFT were either smaller or larger than predicted. A smaller than expected cluster could result from the development of NFT in relation to a subset of neurons within a column. Clustering on a larger scale, e.g. >1000 μm , could be due to a number of factors. First, the larger clusters of NFT may not be related to the cortico-cortical projections as hypothesised but to other anatomical or pathological features of the cortex that exhibit a regular distribution, such as the SP [9,11,19] or blood vessels [7]. However, clusters of NFT do not coincide with those of SP [8,9,11] and there is no evidence that cortical NFT are clustered around blood vessels in AD. Second, the cells of origin of the cortico-cortical projections may be larger than 500-800 μm in some cortical areas. Third, there may be a relationship between the size of NFT clusters and the stage of the disease. Initially, NFT may affect small numbers of neurons within a column but could then spread, first to involve the whole cell cluster, and second to adjacent columns via the intracortical circuits. Consistent with this hypothesis, a positive

correlation has been observed between cluster size and density of NFT [1].

Clusters of NFT were in phase in the upper and lower laminae in about a third of the gyri studied. In some of these gyri, however, a significant correlation was present only at larger field sizes (>500 μm), which may reflect the general abundance of NFT in the upper and lower cortex rather than a specific correlation within a column. In the majority of gyri, the NFT clusters appeared to be distributed independently in the upper and lower laminae. The bands of cells that constitute the cortico-cortical pathways form an irregular branching and rejoining pattern across the cortex [20]. Hence, neurons in the upper and lower cortex at a specific location may not belong to the same column. Moreover, the bands of cells associated with a particular connection alternate with other bands of cells of approximately similar size and which have afferent or efferent connections with a different brain area [20]. Hence, NFT in the upper and lower cortical laminae of a particular gyrus could be associated with different cortico-cortical connections. This pattern, however, would predict that the clusters of NFT in the upper cortex would be negatively correlated (out of phase) with those in the lower cortex, a pattern which was not observed. Hence, it is likely that the clustering of NFT in the cortex represents the spread of NFT independently in relation to the FF and FB circuits, and that in some gyri the result is a fortuitous spatial correlation in the upper and lower laminae.

In conclusion, NFT in gyri of the temporal lobe in AD exhibit a regularly repeating pattern of clusters in the upper and lower laminae, the size distribution and spacing of which is consistent with their development in relation to the FF and FB cortico-cortical pathways. It is likely that the distribution of NFT in the upper and lower cortex of the temporal lobe represents the spread of NFT in relation to the cortico-cortical pathways and that this spread occurs relatively independently in relation to the FF and FB pathways. The data provide less evidence that there is vertical spread of NFT across the cortex within columns of cells.

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