

Crosstalk between sphingolipids and vitamin D3: potential role in the nervous system.

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Running title: Crosstalk between sphingolipids and vitamin D₃

Abstract

Sphingolipids are both structural and bioactive compounds. In particular ceramide and sphingosine 1-phosphate regulate cell fate, inflammation, and excitability. 1- α ,25-dihydroxyvitamin D₃ (1,25(OH)₂D₃), is known to play an important physiological role on growth and differentiation in a variety of cell types, including neural cells, through genomic actions, mediated by its specific receptor, and non-genomic actions resulting in the activation of specific signalling pathways. 1,25(OH)₂D₃ and sphingolipids, in particular sphingosine-1-phosphate, share many common effectors, including calcium regulation, growth factors and inflammatory cytokines, but whether they could act synergistically is still unknown. Alterations in the signalling and content of sphingolipids and 1,25(OH)₂D₃ have been found in neurodegenerative diseases and fingolimod, a structural analogue of sphingosine, has been approved for the treatment of multiple sclerosis. This review, after a brief description of the role of sphingolipids and 1,25(OH)₂D₃, will focus on the potential crosstalk of sphingolipids and 1,25(OH)₂D₃ in neural cells.

Abbreviations:

1,25(OH)₂D₃, 1- α ,25-dihydroxyvitamin D₃; 6-OHDA: 6-hydroxydopamine; A β , amyloid beta peptide; AD, Alzheimer disease; AMPK, AMP-dependent PK; APP, amyloid precursor protein; BACE1, b-secretase 1; Bcl-XL, B-cell lymphoma protein extralarge; Bcl-Xs, shorter isoform of B-cell lymphoma protein; BDNF, brain derived neurotrophic factor, C1P, ceramide-1-phosphate; CBS, cystathionine- β -synthase; CDase, ceramidase; Cer, ceramide; CerK, ceramide kinase; CerS, ceramide synthase; CSF, cerebrospinal fluid; cGSN, cytoplasmatic gelsolin; cPLA2, cytosolic phospholipase A2; CNTF, ciliary neurotrophic factor; DRG: dorsal root ganglion; GBA1, lysosomal glucosylceramidase; GBA2: cytosolic glucosylceramidase; GC, glucosylceramide; GCS, Glucosylceramide synthase; GCDase, glucosylceramidase; GDNF, glial derived neurotrophic factor, HDAC, histone deacetylases; HO, hemoxygenase; IGF-1, insulin-like growth factor 1; iNOS, inducible NOS; KO, Knockout; LRM, lipid rich microdomains; LRP1, low-density lipoprotein receptor-related protein 1; LVSCC, L-type voltage-sensitive calcium channels; MBP, myelin basic protein; MPP⁺, 1-methyl-4-phenylpyridinium; MPTP, 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine; MS, multiple sclerosis; NADPH, Nicotinamide adenine dinucleotide phosphate; nd, not determined; NGF, nerve growth factor; NR3A: NMDA receptor subunit 3A; NT-3, neurotrophin 3; OPC, oligodendrocyte precursor cell; PD, Parkinson disease; pGSN, plasma gelsolin; PHB2, prohibitin 2; PP, protein phosphatase; RAGE: receptor for advanced glycation end products; S1P, sphingosine 1-phosphate; S1P(1-5)R: S1P receptor type 1-5; S1PL, S1P lyase; S1PR, S1P receptor; SGPPS1 PPase, S1P phosphatase, si, small interference RNA; SL, sphingolipid; SM, sphingomyelin; SMase, sphingomyelinase; aSMase, acid SMase; nSMase,

neutral SMase; SMS, sphingomyelin synthase; Sph, sphingosine; SPHK SphK, sphingosine kinase; SPL, sphingosine-1-phosphate lyase; spns2, spinster 2; TRAF2, TNF receptor-associated factor 2; VDCC, voltage-dependent calcium channel; VDR, 1-alpha,25-dihydroxyvitamin D3 receptor; VDRE, vitamin D3 response element.

Roles of bioactive SLs in the nervous system

Sphingolipids (SLs) have long been regarded as inactive and stable structural components of the membrane but some of them including ceramide (Cer), sphingosine (Sph), ceramide-1-phosphate (C1P) and sphingosine-1-phosphate (S1P) are biologically active molecules. The cellular effect of SLs results from the combination of the effects of several interconvertible SLs (Fig. 1), which are localized in distinct subcellular compartments and regulate distinct cellular processes and functions, including neural cell survival, apoptosis, autophagy, differentiation, migration, inflammation, and neurotransmitter release (see Table 1) (Colombaioni and Garcia-Gil, 2004; Mencarelli and Martinez-Martinez, 2012; Shamseddine et al., 2015; Ghasemi et al., 2016).

The intracellular levels of these bioactive SLs are fine-tuned and alterations of the SL profile in nervous system contribute to the development of neurological and neuroinflammatory diseases such as photoreceptor degeneration, retinitis pigmentosa, Alzheimer disease (AD), Parkinson (PD) disease, multiple sclerosis (MS) (see Table 2) and major depression, Huntington disease, and epilepsy (Acharya et al., 2003; Strettoi et al. 2010; Haughey et al., 2010; Grimm et al., 2013; Mielke et al., 2010; Pyszko and Strosznajder, 2014; Halmer et al., 2014; Desplats et al., 2007; Gulbins et al., 2015; Vanni et al., 2014). Moreover, inherited defects of both synthesis and catabolism of SLs cause varying degrees of central nervous system dysfunction such as in inherited sensory and autonomic neuropathy, Niemann Pick disease type A and B and lysosomal storage disorders (Sabourdy et al., 2015).

The modulatory role of Cer in growth and 1,25(OH)₂D₃-induced differentiation was first reported in leukemic HL60 cells (Okazaki et al., 1989; Bielawska et al., 1992). Twenty years ago it was proposed that the ratio of the intracellular content of S1P and Cer was a major determinant of cell fate (Cuvillier et al., 1996): S1P enhances growth and survival, whereas its precursors (Cer and Sph) promote growth arrest and cell death (Colombaioni and Garcia-Gil, 2004; Mencarelli and Martinez-Martinez, 2012; Shamseddine et al., 2015; Ghasemi et al., 2016). However, there is increasing evidence showing that the Cer containing specific acyl chain lengths (Cer species) have different functions (Ben-David and Futerman, 2010; Hannun and Obeid, 2011): C18:0-Cer is

synthesized by Cer synthase 1 (CerS1), an isoenzyme abundant in the brain, and it has been suggested to act as a protective factor because the lack of CerS1 caused neural death in mice cerebellum and impaired motor coordination (Zhao et al., 2011; Ginkel et al., 2012); however, CerS1 ablation decreases gangliosides levels, and this might be one of the causes of neural cell death in mice (Ginkel et al., 2012). Moreover, serum deprivation-induced apoptosis in embryonic hippocampal cells determine the increase of C16:0-Cer and the decrease of C24:0-Cer content (Garcia-Gil et al., 2015). It is worth noting that compensatory mechanism can occur following gene knockout (KO) or decrease of protein expression by siRNA. For example, the treatment of neuroblastoma cells with CerS2 siRNA results in higher CerS5 and CerS6 expression with reduction of C24-Cer and -SM and increase of C14- and C16-Cer levels (Spassieva et al., 2009).

Other facts, in addition to the different acyl chain composition, increase the complexity of the study of the role of SLs on cell fate: i) S1P acts non only intracellularly, but also as ligand of specific G-protein coupled receptors (Maceyka et al., 2012) (Fig. 1B); ii) other SL metabolites, such as C1P, can also mediate apoptosis or proliferation depending on the cell type (Miranda et al., 2011, Bini et al., 2012, Presa et al., 2016); iii) the SL synthesis and signaling that can occur at different cellular compartments (Newton et al., 2015).

Ceramide and C1P

The apoptotic role of Cer in the nervous system has been extensively reviewed (Garcia-Gil and Colombaioni, 2004; Mencarelli and Martinez-Martinez, 2012; Shamseddine et al., 2015). Cer is also involved in the control of autophagy (Daido et al., 2004; Spassieva et al., 2009), differentiation (Riboni et al., 1995), inflammation (Gu et al., 2013) and exosome release (Trajkovic et al., 2008; Wang et al., 2012). Generation of Cer by activation of nSMase2 is associated with increase in dopamine uptake (Kim et al., 2010) and modulates excitatory postsynaptic currents by controlling the insertion and clustering of NMDA receptors (Wheeler et al. 2009). Moreover, *Caenorhabditis elegans* mutants lacking Cer synthase have defects in synaptic transmission and in synaptic vesicle cycling (Chan and Sieburth, 2012). Cer directly regulates the activity of several enzymes including cathepsin D, phospholipase A2, kinase suppressor of Ras, Cer-activated protein serine–threonine phosphatases 1 and 2A, (PP1 and PP2A), PKC isoforms, and ion channels, such as the potassium channel Kv1.3 (Boch et al., 2003). It is also able to form channels in mitochondria, which are involved in the release of pro-apoptotic factors (Colombini et al., 2016). It directly inhibits mitochondrial complex III and increases generation of ROS (Garcia-Ruiz et al., 1997). Cer inhibits Akt pathway and stimulates the stress-activated kinase JNK and upregulates the apoptosis-

promoting variants Bcl-xS and caspase-9, while correspondingly downregulating the antiapoptotic variants Bcl-xL and caspase-9b (Chalfant et al., 2002).

Accumulating evidences support the involvement of Cer in the modulation of neural plasticity. For example, spatial memory and extinction learning are impaired when SMase2 is inhibited or Cer levels are reduced (Tabatadze et al., 2010, Carrasco et al., 2012; Huston et al., 2016). Furthermore, genetic deletion of CerS1 is associated with deficits in motor learning and spatial working memory, as well as reduced anxiety (Ginkel et al., 2012).

Astrocytes are mediators of CNS responsiveness to inflammation and injury (Claycomb et al., 2013). They display increased Cer following ischemia/reperfusion with nSMase2-dependent generation of the pro-inflammatory cytokines TNF- α , IL-1 and IL-6 (Gu et al., 2013). In neural stem and progenitor cells of the developing brain Cer influences cell polarity, motility and apoptosis (Bieberich, 2012) and induces ciliogenesis, a critical step in differentiation (He et al., 2014).

On the other hand, the phosphorylated form of Cer, C1P, induces proliferation and promotes survival and differentiation of photoreceptors in rat retina neuronal cultures (Miranda et al., 2011), while inhibition or downregulation of CerK, which appears to be the only enzyme responsible for its synthesis, decreases proliferation in human neuroblastoma cells (Bini et al., 2012). Moreover, C1P directly binds and activates α -type cytosolic phospholipase A2 (cPLA2) stimulating arachidonic acid release (Pettus et al., 2004). Activation of cPLA2 by C1P induces spinal neuronal death (Liu et al., 2014), while treatment of SH-SY5Y cells with TNF α increases CerK activity. Depleting CerK activity blocks NADPH oxidase activation and eicosanoid biosynthesis and rescues neuronal viability in the presence of TNF α (Barth et al., 2012). The CerK-null mouse has been generated. Although CerK is highly expressed in Purkinje cells, this mouse did not display histological abnormalities or impairment in motor coordination but emotional behavior was slightly affected (Mitsutake et al., 2007).

Outside of the nervous system, C1P stimulates migration of macrophages via a specific plasma membrane receptor coupled to Gi proteins (Presa et al., 2016) and it is released from damaged myocardial cells possibly leading to the recruitment of stem/progenitor cells to damaged organs (Kim et al., 2013). Whether C1P is also released from the injured nervous system or whether it induces migration in neural stem cells is unknown.

S1P

S1P modulates survival (Edsall et al., 1996), proliferation (Harada et al., 2004; Miranda et al., 2009), differentiation (Toman et al., 2004; Miranda et al., 2009), cell migration (Novgorodov et al.,

2007; Alfonso et al., 2017), calcium homeostasis (Sato et al., 2000; Giussani et al., 2007; Hagen et al., 2011), neurite retraction (Toman et al., 2004), angiogenic vascular maturation (Liu et al., 2001; Mizugishi et al., 2005) and cytoskeleton dynamics (Postma et al., 1996; Toman et al., 2004; Jaillard et al., 2005) (for recent reviews see Bieberich et al., 2012; Maceyka et al., 2012, Proia and Hla 2015, Ghasemi et al., 2016). In addition, it is able to modulate excitability (Li et al., 2015) by increasing glutamate release (Kajimoto et al., 2007, Kanno et al., 2011), and by regulating endocytosis and exocytosis (Chan and Sieburth 2012, Riganti et al., 2016).

Regarding S1P intracellular effects, S1P induces calcium release from the ER, inhibits histone deacetylases (HDAC), acts as a cofactor required for the E3 ligase activity of TNF receptor-associated factor 2 (TRAF2), activates recombinant human PKC α , and binds the mitochondrial protein prohibitin 2 (a highly conserved protein that regulates mitochondrial assembly and function (Maceyka et al., 2012) (Fig.2). In agreement with the role of S1P in proliferation, sphingosine kinase 1(SphK1) is overexpressed, while S1P lyase is often deleted in human cancers, including glioblastoma (Steck et al., 1995, van Brocklyn et al., 2005). SphK1 overexpression is associated with resistance to chemotherapeutic drugs and to a poor prognosis (van Brocklyn et al., 2005).

S1P functions not only inside cells, but also as ligand for five specific-protein coupled receptors (as reviewed in Spiegel and Milstien, 2003). S1P can be exported outside the cells by transporters belonging to the ATP-binding cassette family and the putative transporter Spinster 2 and, therefore, act as an autocrine or paracrine factor (Maceyka et al., 2012), (Fig.1B). S1P receptors are expressed in CNS cells (neurons, oligodendrocytes, astrocytes and microglia). Signalling through S1P receptors involves activation of Gi, Go, Gq or G12/13 (Figs. 1B and 2) and, therefore, signal transduction pathways involving PLC, MAPKs, PI3K/Akt, Rac, and Rho/Rho kinase (Spiegel and Milstien, 2003).

The G-coupled receptors specific for S1P [S1P(1-5)R] trigger different signalling pathways and are expressed and localized differently during tissue development or following stimulation. ~~(i.e.~~ S1P1 regulates migration of neural stem progenitor cells both during development (Alfonso et al., 2015) and in response to injury (Kimura et al., 2007). S1P1 is also involved in oligodendrocyte development, morphological maturation and early myelination (Jung et al., 2007; Dukala and Soliven, 2016), while the activation of S1P5 on the oligodendrocyte progenitor cells leads to process retraction and inhibits migration (Jaillard et al., 2005, Novgorodov et al., 2007).

During nerve growth factor- (NGF)-induced neuronal differentiation there is a relocalization of S1PRs: while S1P1R, which induces neurite growth is maintained in the plasma membrane, S1P2R is internalized (Toman et al., 2004) to prevent loss of neurites. Growth factors, such as

NGF, increase SphK activity and S1P formation and viceversa, S1P can induce growth factor release (Yamagata et al., 2003; Sobue et al., 2005; Murakami et al., 2007). Deletion of genes encoding S1P1R or both SphK1 and SphK2 in mice severely disrupts neurogenesis and angiogenesis leading to intrauterine death (Liu et al., 2000; Mizugishi et al., 2005) highlighting the role of S1P in the development of the nervous system.

1,25(OH)₂D₃ in nervous system physiology

The active form of vitamin D₃ has hydroxyl groups in the positions 1 and 25. The enzymes 1- α hydroxylase (CYP27B1), required to synthesize 1,25(OH)₂D₃, and the 24-hydroxylase (CYP24A1), needed to degrade 25-(OH)D₃ and 1,25(OH)₂D₃, are present in the brain (Zehnder et al., 2001; Naveilhan et al., 1993). The 1,25(OH)₂D₃ receptor (VDR) is expressed in both neurons and glial cells (microglia, astrocytes, oligodendrocytes, Schwann cells) in different regions of the nervous system (DeLuca et al., 2013). Neural stem cells constitutively express VDR, which can be upregulated by 1,25(OH)₂D₃ (Shirazi et al., 2015). Genomic 1,25(OH)₂D₃ effects require heterodimerization between VDR and retinoid X receptor. This complex binds to response elements (VDRE), thus regulating the transcription of genes (Christakos et al., 2016). It increases the transcription of the genes encoding growth factors, such as NGF, glial derived neurotrophic factor (GDNF), neurotrophin 3 (NT3), brain-derived neurotrophic factor (BDNF) and ciliary neurotrophic factor (CNTF), and for enzymes involved in the synthesis of neurotransmitters (tyrosine hydroxylase, tryptophan hydroxylase 2, glutamate decarboxylase), whereas it represses that of voltage-dependent calcium channel (VDCC) (DeLuca et al., 2013; Patrick and Ames, 2015; Shirazi et al., 2015). VDR is also localized in the caveolae and induces non-genomic rapid effects (Fig 3). Activation of PKA, Ca²⁺/calmodulin-dependent PK, PI3K, and MAPK p38 results in phosphorylation of neurofilaments, and in modulation of chloride, potassium and voltage-dependent calcium channels in rat cortical neurons (Zanatta et al., 2012). In addition, other kinases including ERK1/ERK2, ERK5 and JNK1/JNK2 and PKC and other enzymes, such as PLA₂, Src and p21ras (Bi et al., 2016; Hii and Ferrante, 2016) are also targets of 1,25(OH)₂D₃.

The combination of *in vitro*, and *in vivo* experiments provides compelling evidence that 1,25(OH)₂D₃ has a crucial role in synaptic transmission and neuroplasticity (Smith et al., 2006; Groves et al., 2013; Eyles et al., 2013; Patrick and Ames, 2015; Latimer et al., 2014; Grecksch et al., 2012; ~~Taghizadeh et al., 2014~~) as well as in proliferation, differentiation, and neuroprotection as summarized in Table 2. Increasing evidence derived from studies of 1,25(OH)₂D₃ deficiency and from VDR polymorphisms suggest that 1,25(OH)₂D₃ influences the susceptibility to a number of psychiatric and neurological diseases which include Alzheimer disease (AD), Parkinson disease (PD), schizophrenia, autism, depression, amyotrophic lateral sclerosis, epilepsy, and is especially

strong for multiple sclerosis (MS) (Eyles et al., 2013; Shen and Ji, 2015; Peterson et al., 2014; Spedding, 2014; Burton and Costello 2015). The effect of $1,25(\text{OH})_2\text{D}_3$ deficiency has been studied in female rats or mice fed with a $1,25(\text{OH})_2\text{D}_3$ -deprived diet during pregnancy and the pups showed increased overall brain size and larger lateral ventricles that were not modified by the addition of $1,25(\text{OH})_2\text{D}_3$ to the diet after birth. In adult life, the rats demonstrated subtle alterations in learning and memory (Eyles et al., 2013; Fernandes de Abreu et al., 2010; Hawes et al., 2015). Interestingly, prenatal $1,25(\text{OH})_2\text{D}_3$ -depleted rats exhibited the impairment of latent inhibition, mimicking some features found in schizophrenia (Grecksch et al., 2009). Offspring language impairment has been demonstrated in humans after maternal $1,25(\text{OH})_2\text{D}_3$ insufficiency during pregnancy (Whitehouse et al., 2012). The summistration of $1,25(\text{OH})_2\text{D}_3$ exerts a neuroprotective effect in cognitive decline of aging rats (Latimer et al., 2014). The hormone prevents the beginning and reversibly blocks progression of pathological manifestations of the experimental allergic encephalomyelitis, which is the animal model of MS. This protective effect is absent in VDR knockout mice (DeLuca et al., 2013; Eyles et al., 2013). The effect of $1,25(\text{OH})_2\text{D}_3$ depends on its neuroimmunomodulatory properties (Eyles et al., 2013) and also on its action on neural cells. In fact, $1,25(\text{OH})_2\text{D}_3$ increases both neural stem cell proliferation and differentiation into neurons and oligodendrocytes, the myelinating cells of central nervous system (Shirazi et al., 2015; de la Fuente et al., 2015).

Neurodegenerative diseases, including PD and AD show impairment in adult neurogenesis in hippocampal dentate gyrus and in the subventricular zone (Winner and Winkler, 2015). Therefore, the factors that promote neurogenesis are considered potential treatments for these disorders. The anti-proliferative and pro-differentiating effects of $1,25(\text{OH})_2\text{D}_3$ in neural cells were described more than 10 years ago (Brown et al., 2003; Ko et al., 2004) through the regulation of cyclin expression and NGF production in cultured hippocampal cells (Brown et al., 2003; Ko et al., 2004). Recently, CerK signalling pathway has been involved in the cell growth arrest promoted by $1,25(\text{OH})_2\text{D}_3$ in human neuroblastoma cells (Bini et al., 2012). In fact, the pharmacological inhibition and the silencing of CerK drastically reduced cell proliferation. $1,25(\text{OH})_2\text{D}_3$ and the VDR agonist ZK191784 induced a significant decrease in CerK expression and C1P content. The involvement of VDR/COUP-TFI/histone deacetylase complex in CerK regulation has also been reported in (Bini et al., 2012). Accumulating data suggest that $1,25(\text{OH})_2\text{D}_3$ has complex effects on neurogenesis of neural stem cells. Cui et al., (2007) have studied the effect of fetal $1,25(\text{OH})_2\text{D}_3$ deprivation and they have observed the formation of an increased number of neurospheres in cultures from the neonatal subventricular zone. Exogenous $1,25(\text{OH})_2\text{D}_3$ added to the culture medium reduced neurosphere number in control, (in agreement with the presumed anti-proliferative

effect of $1,25(\text{OH})_2\text{D}_3$), but not in cultures from the hormone-deprived pups (Cui et al., 2007). In contrast, *in vivo* experiments have shown that fetal $1,25(\text{OH})_2\text{D}_3$ deficiency leads to reduced neurogenesis in the dentate gyrus of the hippocampus (Keilhoff et al., 2010). In another model of $1,25(\text{OH})_2\text{D}_3$ deficiency, the 1α -hydroxylase knockout mice, $1,25(\text{OH})_2\text{D}_3$ increases proliferation, but decreases survival of newborn neurons in the dentate gyrus (Zhu et al., 2012). The different effects probably depend on the time window of exposition and/or the different sensibility to the hormone of distinct neurogenic niches.

Crosstalk between SLs and $1,25(\text{OH})_2\text{D}_3$ actions

One or more components of the signal transduction pathway promoted by $1,25(\text{OH})_2\text{D}_3$ affects SLs metabolism and viceversa (Fig. 4). For example, $1,25(\text{OH})_2\text{D}_3$ regulates the expression of S1P-phosphatase 2 (Reardon et al., 2013) and of CerK (Bini et al., 2012). Cholecalciferol, the non hydroxylated precursor of $1,25(\text{OH})_2\text{D}_3$ induces activation of SMase, increase of Cer and cell death in human glioblastoma cells (Magrassi et al., 1998). On the other hand, $1,25(\text{OH})_2\text{D}_3$ increases the transcription of neurotrophic factors, such as NGF and BDNF, which require SphK activity to execute the neuroprotective or prodifferentiating activity (Saini et al., 2005; Edsall et al., 1997; Culmsee et al., 2002; Murakami et al., 2007) or the modulation of excitability (Zhang et al., 2008). Similarly, many protective or differentiating actions of $1,25(\text{OH})_2\text{D}_3$ in non neural cells are due to stimulation of SMase, and of SphK and S1P generation (Okazaki et al., 1989; Kleuser et al., 1998; Manggau et al., 2001; Sauer et al., 2003).

$1,25(\text{OH})_2\text{D}_3$ is able to modulate S1PR expression: the hormone reduces the chemorepulsive S1P2R levels on circulating osteoblast precursors (Kikuta et al., 2013) and decreases S1P3R expression in human breast cancer cells (Dolezalova et al., 2003). Interestingly, VDR expression is correlated with calcitriol-mediated reduction of migration in glioblastoma multiforme (Salomón et al., 2014) but it is unknown whether this effect involves differential expression of S1P receptors.

SLs and $1,25(\text{OH})_2\text{D}_3$ have some common targets, including cathepsins. Cer and C1P directly interact and activate cathepsin D (Heinrich et al., 2000; Zembrakowska et al., 2011) which is involved in cell death in many cell types. For example, gemcitabine activates aSMase, leading to lysosomal accumulation of Cer, cathepsin D activation and glioma cell death (Dumitru et al., 2009). Cathepsin D is able to migrate to the nucleus. Indeed, nuclear translocation of mitochondrial cytochrome c, lysosomal cathepsins B and D, and other death-promoting proteins has been observed within the first 60 minutes of generalized seizures (Zhao et al., 2010). Both cathepsin D and its inhibitor cystatin A have VRE in their promoters (Wang et al., 2005). This may explain, at least in part, the prosurvival and pro-death effects of $1,25(\text{OH})_2\text{D}_3$ in different cells.

Histone acetylation and methylation are often present at sites of VDR action and 1,25(OH)₂D₃-induced binding of the VDR to these sites is associated with an increase in the level of histone modification as well as in changes in chromatin packaging (Carlberg and Campbell, 2013). . Similarly, S1P formed inside the nuclei by SphK2 activation can inhibit HDACs and regulate gene transcription (Fig.2). Therefore, it could be possible that both 1,25(OH)₂D₃ and S1P epigenetically modulate the same genes (Huang et al., 2015; Hait et al., 2009).

Furthermore, SLs are important components of lipid rich microdomains (LRM), also named lipid rafts, fluctuating nanoscale assemblies that can be stabilized to coalesce, forming platforms that function in membrane signaling and trafficking (Lingwood and Simons, 2010; Gulbins and Grassmé 2002). LRM have been described in the plasma membrane, mitochondria and nuclei. In the inner nuclear membrane LRM play a role in active chromatin anchoring, transcription factor binding and DNA duplication (Cascianelli et al., 2008; Albi et al., 2009, 2012, 2013; Cataldi et al., 2014). VDR seems to be partly localized in nuclear LRM (Marini et al., 2010, Bartoccini et al., 2011). Changes in SM levels and/or a shift in SM composition (from C24:0-SM to C16:0-SM) have been associated with a reduction of VDR content in nuclear LRM of tumour cells (Lazzarini et al., 2015) and embryonic hippocampal cell differentiation (Bartoccini et al., 2011). Whether these alterations in nuclear LRM are involved in neurodegeneration is unknown. In the nervous system, LRM play a role in many processes, including neurotrophic factor signaling, cell adhesion and migration, axon guidance and myelin formation and stabilization (Aureli et al., 2015). Notably, recent evidence also suggests that LRM alterations are implicated in neurodegenerative disorders including PD, AD, amyotrophic lateral sclerosis, Huntington's disease, and prion diseases (Schengrund, 2010; Marin et al., 2016; Aureli et al., 2015).

Recent data have uncovered that the crosstalk between S1P and 1,25(OH)₂D₃ also occurs in the extracellular fluids. It has been reported that patients with acute or chronic inflammation exhibit a low content of plasma gelsolin (pGSN) (Osborn et al., 2008; Lee et al., 2009). Gelsolin has two isoforms with similar structure and function: the cytoplasmic actin-binding protein form, important for the regulation of cell shape and motility (cGSN), and pGSN, a multifunctional protein that acts as an extracellular actin scavenger system crucial for the removal of actin released from injured cells (Chauhan et al., 2008; Carro, 2010). Although the functions of pGSN and the mechanisms of its protective action are poorly known, it is clear that low levels of pGNS are indicator of poor prognosis or critical care complications. Notably, pGNS is able to bind to S1P in humans. This pGSN-S1P interaction in extracellular fluids may have several important consequences by impairing either the ability of gelsolin to bind actin or that of S1P to bind to S1PR. In fact, pGSN-S1P complex affects the S1P-S1P1R module that regulates lymphocyte distribution and the

immunomodulatory balance at inflammatory sites (Bucki et al., 2010). It has been observed that patients suffering from lymphatic meningitis show low concentration of pGSN and a high concentration of S1P in the cerebrospinal fluid (CSF) samples (Bucki et al., 2010). Notably, another recent study has demonstrated that $1,25(\text{OH})_2\text{D}_3$ treatment can affect either S1P and pGNS. In fact, the hormone alleviates inflammation in experimental allergic encephalomyelitis, a model of MS, and this therapeutic effect might be derived from the ability of the hormone to reduce S1P (which is elevated in CSF and spinal cord of rats with experimental allergic encephalomyelitis). However, this effect might be limited by its simultaneous action in reducing pGSN and cGSN (Zhu et al., 2014).

All together, the accumulating evidences suggest that $1,25(\text{OH})_2\text{D}_3$ and SLs can converge and share some targets: 1) the activation of similar pathways (through activation of protein kinases); 2) the modulation of enzyme expression/activity (i.e, cathepsin); 3) the control of genes encoding for key enzymes of SLs metabolism and, likely, of S1PRs by $1,25(\text{OH})_2\text{D}_3$; 4) the modulation by S1P-dependent histone acetylation of VDR-dependent transcription. In addition, changes in SLs composition in LRM can also affect the localization and therefore the function of VDR.

SLs / $1,25(\text{OH})_2\text{D}_3$ crosstalk: potential role in neurogenerative diseases

AD

The actual most common form of dementia is AD, a neurodegenerative disorder of the CNS characterized by extracellular amyloid-containing plaques, intracellular neurofibrillary tangles consisting of hyperphosphorylated Tau protein and by the death of cholinergic neurons of the basal forebrain. Amyloid plaques are mainly formed by aggregated amyloid beta peptide ($\text{A}\beta$) generated by the hydrolysis of amyloid precursor protein (APP), first, by β -secretase 1 and, then, by γ -secretase. The fibrils of the senile plaques are mainly formed by the self-assembled $\text{A}\beta_{1-42}$ peptide that forms a heterogeneous mixture of oligomers and protofibrils. The small soluble $\text{A}\beta_{1-42}$ oligomers are considered to be the major neurotoxic species in AD and it has been hypothesized that cerebral accumulation of $\text{A}\beta_{1-42}$ precedes and drives the deposition of the Tau protein in neuronal perikarya and their processes (Selkoe and Hardy, 2016).

Alterations in the expression or in the activity of enzymes involved in SLs metabolism have been found in the brain of AD patients (Table 2, Fig. 4). They include SMases (Katsel et al., 2007; He et al., 2010), CDase (Huang et al., 2004), S1P lyase and SphK (Ceccom et al., 2014), serine palmitoyl transferase, UDP-glucose Cer glucosyltransferase, CerS1,2,6 (Katsel et al., 2007; Couttas

et al., 2016). Changes in SL content (Cer, S1P, SM, gangliosides and sulfatides) have also been reported in animal models of AD (see ref. in Grimm et al., 2013) and in brain tissue and CSF of AD patients (Han et al., 2002; Cutler et al. 2004; He et al., 2010; Couttas et al., 2014; Couttas et al., 2016; Sato et al., 2005, Mielke et al., 2010; Fonteh et al., 2016).

In vitro experiments indicate that A β 1-42 directly binds and activates neutral SMase, decreasing SM content (Grimm et al., 2005). A β 1-42 also activates aSMase through increased ROS accumulation via NADPH oxidase activation and reduced glutathion depletion (Jazvinščak Jembrek et al., 2015). Cer generated by the degradation of SM due to the activation of SMase induces neuronal apoptosis (Jana and Pahan, 2004; Sato et al., 2005; Malaplate-Armand et al., 2006) or impairs autophagy (Yang et al., 2014). Cer increases the stability, while S1P increases the activity of β -secretase 1 (Puglielli et al., 2003; Takasugi et al., 2011). On the other hand, SM decreases A β 1-42 production by inhibiting the γ -secretase (Grimm et al., 2005). Therefore, some SLs might be protective by lowering A β levels (either by decreasing its production or by increasing its clearance), while others might increase A β 1-42 oligomerization and toxicity. Simultaneously, APP processing also leads to changes in lipid metabolism, resulting in complex regulatory feedback cycles, which appear to be dysregulated in AD (Grimm et al., 2013).

Recently it has been demonstrated that exosome release in neural cells requires SMase activity (Wang et al., 2012). The role of exosomes in AD is controversial. One study shows that *in vitro* neuronal exosomes are able to capture A β and their infusion into brains of AD mice decreases A β and amyloid depositions (Yuyama et al., 2015). More recently, it has been suggested that Cer-enriched exosomes promote the aggregation of A β (Dinkins et al., 2016) since an AD mouse model lacking nSMase2, exhibits decrease of exosome release associated with reduction of plaque burden and improved cognition (Dinkins et al., 2016).

Increasing evidence derived from epidemiological studies indicates that 1,25(OH) $_2$ D $_3$ deficiency and VDR polymorphisms influence susceptibility to AD (Gezen-Ak et al., 2012; Annweiler et al., 2014), whereas A β 1-42 may disrupt the hormone-VDR pathway and cause defective utilization of 1,25(OH) $_2$ D $_3$ by suppressing the level of the VDR, and by elevating the level of 24-hydroxylase, and, thereby, increasing the catabolism of the hormone (Dursun et al., 2011, 2013a). In addition to neuroprotective effects involving calcium homeostasis, decrease of ROS and inflammation, 1,25(OH) $_2$ D $_3$ is able to exert other specific effects important for AD. For example, 1,25(OH) $_2$ D $_3$ may regulate the expression of many genes associated with AD, and attenuate the build up of A β deposits either by enhancing its clearance (transport to the blood or to the CSF) or by stimulating the phagocytosis of A β . Likely, the hormone may alter APP processing and prevent the Ach defect by increasing the activity of choline acetyltransferase (thus Ach synthesis) in the

brain (Annweiler et al., 2014; Briones and Darwish, 2012; Durk et al., 2014, Landel et al., 2016).

Epigenetic modifications are involved in the regulation of many genes and aberrant epigenetic changes are associated with AD. For example, hyperacetylation of histone H4 at lysine 12 in peripheral monocytes appears to be an early event in AD-pathology (Plagg et al., 2015). Recently, HDAC inhibitors have emerged as promising compounds to rescue cognitive deficits in a mouse model of AD (Kilgore et al., 2010). Therefore, upon treatment with 1,25(OH)₂D₃ or /and FTY7120, a possible effect on acetylation and DNA methylation of AD-related genes (i.e. β -secretase 1) could result in beneficial effects against A β -induced toxicity.

Niemann-Pick type C (NPC)

Niemann-Pick type C (NPC) disease is an autosomal recessive storage disorder due to mutations of two proteins NPC1 and NPC2 which mediate intracellular cholesterol trafficking in mammals. NPC is characterized by abnormal sequestration of unesterified cholesterol within the late endolysosomes and accumulation of Sph and gangliosides, formation of meganeurites and neurofibrillary tangles, neuroinflammation and axonal dystrophy. As the disease progresses, neuronal death of Purkinje cells of the cerebellum becomes prominent. AD and NPC share some molecular pathways, including abnormal cholesterol metabolism, and involvement of A β and Tau pathology (Malnar et al., 2014; Vanier et al., 2015). Miglustat is an inhibitor of the enzyme GCS that converts Cer into glucosylCer (Fig. 1), the first step in the synthesis of gangliosides. Miglustat has neuroprotective effects in NPC models (Table 2). It has been approved for the use in several gangliosidosis and recently, for NPC (Patterson et al., 2015). Therefore, SLs appear to play a role in the pathogenesis of NPC. Indeed, it has been demonstrated that SM inhibits while Cer increases NPC2-mediated cholesterol transport (Abdul-Hammed et al., 2010). On the other hand, Lloyd-Evans et al., (2008) have proposed that Sph, by altering calcium homeostasis, could play a role in the onset of NPC.

It is possible that 1,25(OH)₂D₃ and S1P could have some protective effect on NPC. It is already known that stem cells induce survival of cerebellar NPC1^{-/-} cells (Lee et al., 2010) by increasing S1P and, as discussed above, that 1,25(OH)₂D₃ is able to reduce A β load in AD models. In addition, autophagy is dysregulated in NPC and 1,25(OH)₂D₃ exerts some neuroprotective effects through the modulation of autophagy (Li et al., 2015a).

PD

PD is a neurodegenerative disease characterized by loss of dopamine cells in the basal ganglia, and accumulation and/or aggregation of α -synuclein. Mutations in genes causing lysosomal storage disorders, such as those encoding GCDase A, aSMase, and NPC1 may increase the risk for developing PD (for a recent review see Migdalska-Richards and Schapira, 2016). Moreover, reduced GCDase activity (GBA1) has been found in patients with sporadic PD (Murphy et al.,

2014; Table2). The concentration of glucosylCer and that of α -synuclein are inversely correlated. Total Cer and SM levels are reduced in anterior cingulate cortex of PD patients compared to controls (Abbot et al., 2014). A shift towards Cer containing short acyl chains and an upregulation of Cer1S gene expression (which could be a compensatory effect to the reduction of Cer) have also been reported (Abbot et al., 2014). S1P and 1,25(OH)₂D₃ have a neuroprotective effect in cellular models of PD (Shinpo et al., 2000; Smith et al., 2006; Pyszko and Strosznajder, 2014; see Table 3). 1,25(OH)₂D₃ has shown neuroprotection also in different animal models of PD that have been correlated with increase in GDNF, increase in tyroxine hydroxylase expressing cells and decrease in inflammation (Smith et al., 2006; Wang et al., 2001, Kim et al., 2006). 1,25(OH)₂D₃ supplementation was associated with significantly reduced risk of PD (Shen and Li, 2015a). The mechanism by which GCDase deficiency increases risk for developing PD is still unclear but it is known that GlucosylCer can stabilize α -synuclein oligomers (Mazulli et al., 2011) and that activation of GCDase reduces accumulation of α -synuclein and restores lysosomal function *in vitro* (Mazzulli et al., 2016). Indeed, small increases in GlucosylCer or GlucosylSph have been reported primary cultured cortical neurons with GCDase knockdown (Mazulli et al., 2011), and in dopaminergic neurons harboring heterozygote GCDase/GBA1 mutations (Schöndorf et al., 2014) and in the hippocampus of PD patients without GBA1 mutation (Rocha et al., 2015) (Table 2). Another possibility is that the changes in SL metabolism derived from GCDase deficiency impair autophagy, which has been suggested to contribute to α -synuclein accumulation in cellular and animal models of GCase deficiency (Mazzulli et al., 2011; Schöndorf et al., 2014).

SLs, in particular S1P, and 1,25(OH)₂D₃ display their neuroprotective actions through common effectors such calcium regulation, synaptic modulation, growth factor expression, etc., but whether 1,25(OH)₂D₃ and SLs, could act synergistically on neuroprotection and/or neurogenesis in neurodegenerative diseases, such as AD, PD and NPC is still unknown and deserves further investigation. Preliminary results in our laboratory indicate that the crosstalk between SLs and 1,25(OH)₂D₃ leads to a specific balance between neurodegeneration/neuroprotection in neuronal cells. In particular, in human SH-SY5Y differentiated cells we found that 1,25(OH)₂D₃ treatment counteracts the downregulation of S1P1-mediated signalling promoted by A β 1-42 (Pierucci et al., 2016, submitted).

Potential implications for 1,25(OH)₂D₃ and FTY720 supplementation in AD

Several observations in clinical trials have demonstrated that 1,25(OH)₂D₃ supplementation may

have protective effects in AD, however, in other studies no beneficial outcome has been reported (Landel et al., 2016, DeLuca et al., 2013) and evidence for a correlation between hypovitaminosis D and reduced neuroprotection against AD or AD progression is missing. Similarly, the ability of 1,25(OH)₂D₃ supplementation to prevent other neurodegenerative diseases, such as MS, needs further investigation. On the other hand, some data suggest that the combination of 1,25(OH)₂D₃ supplementation with the anti-neurodegenerative drug nemantidine could contrast the cognitive decline better than that with the single compound (Annweiler et al., 2014).

On the contrary, the neuroprotective effect of S1P analogues in neurodegenerative diseases is well established. Fingolimod, the commercial name of FTY720, is an analogue of Sph which acts as an immunosuppressant and has been recently approved for the treatment of MS. Phosphorylation of FTY720 by SphK generates FTY720-phosphate, a molecule structurally similar to S1P that can bind to all the S1P receptors, except S1P2. In lymph nodes, it acts as a highly potent functional antagonist of S1P1, leading to S1P1 receptor internalization in T cells that become unable to egress from the nodes. FTY720 also is active on different cells of the nervous system, including neurons, astrocytes, oligodendrocytes, microglia (Brunkhorst et al., 2014) and its protective function affects the process of myelination, the activation of microglia, proliferation and migration of precursor cells, neuronal differentiation and survival (Kawabori et al., 2013). In vivo, it has been shown that experimental allergic encephalomyelitis was attenuated by FTY720 supplementation, and no effect was observed in astrocytes that did not express S1P1. However, neurons lacking S1P1 were positively affected by the compound (Choi et al., 2011). In vitro, FTY720 decreases A β production in cultured neuronal cells (Takasugi et al., 2013).

Regarding the therapeutical potentiality in AD, it has been reported that when FTY720 supplementation was given to rats injected with A β 1-42, there was a reduction in hippocampal and cortex cell death as well as an increase of memory compared with control rats (Asle-Rousta et al., 2013; Hemmati et al., 2014). The in vivo beneficial effect on the nervous system is due to many factors including the increase in BDNF production which leads to increase in striatum size (Deogracias et al., 2012) and contributes to favour neuronal repair in diseases linked to a decrease of BDNF levels, such as Huntington disease (Di Pardo et al., 2014; Miguez et al., 2015).

Recently, it has been shown that FTY720 has also inhibitory effects on epigenetic modifications by reducing HDAC and regulating gene expression programs associated with memory and learning (Hait et al. 2014). All together these observations lead to speculate that 1,25(OH)₂D₃ supplementation and FTY720 could act synergically in the prevention of neurodegenerative diseases. Preliminary studies in vivo performed in our laboratory suggest the possibility of a crossaction between the hormone and FTY720. In fact, damage was reduced when

1,25(OH)₂D₃ supplementation in mice injected with a submaximal dose of Aβ₁₋₄₂ was combined with FTY720 treatment. Further investigations are in progress (Meacci et al., personal communication).

In conclusion, the potential for expanding the use of 1,25(OH)₂D₃ to neurodegenerative diseases is worth investigating. Additionally, the therapeutic potential of 1,25(OH)₂D₃ structural analogues (see ref. in Leyssens et al., 2014) remains unexplored. In the long term, 1,25(OH)₂D₃ and its analogues might provide valuable tools either for basic research in the dissection of the mechanisms of neuroprotection and for subsequent designer drug development. The combined treatments with 1,25(OH)₂D₃ and agonists/antagonists of S1P(1-5)R and the improvement of the characterization and quantification of Cer species, may offer significant advances in terms of understanding of, and ability to predict, the protein aggregation-induced toxicity in vivo.

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Author contributions

MG-G and EM conceived the outline of the review and wrote the manuscript. FP and AV contributed to some parts of the manuscript.

Conflict of interest

The authors declare no conflicts of interest.

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Table 1. Role of SLs on proliferation, survival, differentiation, neurodegeneration, ischemia, and inflammation

PROLIFERATION				
Cell/Tissue	Method	Effect	Mechanism	Reference
Neural progenitor cultured cells	A, exogenous S1P	↑ proliferation		Harada et al., 2004
Oligodendrocyte precursors	A, siS1P1R	↑ proliferation	S1P1R	Jung et al., 2007
Neuronal progenitors retina	A	↑ proliferation	S1P	Miranda et al., 2009
Human neuroblastoma cell	A, siCerK	↓ proliferation	↓ CerK expression	Bini et al., 2012
Neuronal progenitors retina	A	neuronal progenitors retina	C1P	Miranda et al., 2011
SURVIVAL				
Photoreceptor	A	↑ survival	C1P	Miranda et al. 2011
SH-5YSY, TNF α ,	A, si CerK	↑ survival	↓ CerK expression	Barth et al., 2012
Photoreceptor	A	↑ survival	S1P	Miranda et al., 2009
SH-SY5Y, MPP ⁺	A	↑ survival	S1P	Pyszko and Strosznajder, 2014
Mature oligodendrocyte	A, si S1P5R	↑ survival	S1P5R/AKT	Jaillard et al., 2005
Drosophila mutants	B	↑ photoreceptor survival	CDase expression	Acharya et al., 2003
Retinitis pigmentosa mouse (eye)	B	↑ photoreceptor survival	SPT inhibition	Strettoi et al., 2010
DIFFERENTIATION				
Neuronal progenitors retina	A	↑ differentiation	S1P	Miranda et al., 2009
PC12	A	neurite retraction ↓ differentiation	S1P/S1P2R	Toman et al., 2004
PC12, dorsal root ganglion neurons	A	↑ differentiation ↑ neurite	S1P/S1P1R	Toman et al., 2004

		outgrowth		
Oligodendrocyte precursor, S1P1R KO mouse	B	↓differentiation	↓S1P1R	Dukala and Soliven, 2016
INFLAMMATION				
Microglial cultured cells, brain	A, B	↓inflammation	C2-Cer ROS, MAPKs, PI3K/Akt, Jak/STAT	Jung et al., 2013
Murine ischemic brain Cultured neurons	A,B,a	↑inflammation ↓inflammation	SphK1 inhibition, KO SphK2 inhibition, KO	Zheng et al., 2015
NEURODEGENERATION				
Purkinje cell CerS1 mutants	A	↓cell number ↓ neurite branching	↓C18Cer , ↑C16Cer ↑Sph, ↑dhSph, ↑dhS1P, ↑S1P	Zhao et al., 2011
Purkinje cell, aSMase KO	A	↑ death	↑SM	Horinuchi et al., 1995
Neuroblastoma cell	A,siCerS2	cell growth arrest increased autophagy	↓CerS2, ↑C16Cer, ↓ C24Cer,	Spassieva et al., 2009
ISCHEMIA/HYPOXIA				
Rat brain,glia, chronic hypoxia	B		↑ Cer, ↑ aSMase, ↓GCS	Ohtani et al., 2004
Hypoxia/reoxygenation NT-2 neuronal precursor cells	A		↑ C14Cer, ↑C16 Cer , ↑ SMase, ↑CerS5	Jin et al., 2008
Ischemia, rat hippocampus astrocyte	B	↑TNF α , IL1, IL6	↑ nSMase	Gu et al., 2013

The table illustrates some examples of the involvement of SLs on proliferation and survival, indicating the experimental method used (A, in vitro; B, in vivo; MPP⁺, 1-methyl-4-phenylpyridinium; si: siRNA; ↑, increase; ↓, decrease).

Table 2. Involvement of SLs on neurodegenerative diseases

	Method	Effect	Mechanism	Reference
AD				
Cortical neurons, A β 1-42	A	↑exosome release, ↑apoptosis	↑nSMase,	Wang et al., 2012
Human primary neurons, A β	A	↑ apoptosis	↑ nSMase	Jana and Pahan, 2004
Cultured hippocampal neurons, A β	B	↑apoptosis	↑ C18Cer, C24Cer	Cutler et al., 2004
Presenilin knock-in mouse, primary cultured astrocytes	A	↑cell death	↑ C20Cer, C24Cer, ↑CerS1, ↑CerS4	Wang et al., 2008
Astrocytes, frontal cortex, cerebrospinal fluid, patients	B		↑Cer	Satoi et al., 2005
White matter temporal cortex, white and gray matter, patients	B		↑ C24:1Cer ↓sulfatides	Han et al., 2002
Medial frontal gyrus, patients	B		↑ C24:0 Cer	Cutler et al., 2004
Cultured neurons, A β	A	↑Apoptosis	↑a,nSMase, ↑acid CDase	He et al., 2010
Brain, patients	B		↑aSMase, ↑acid CDase, ↑Cer, ↓SM	
Entorhinal cortex, patients Hippocampus temporal gray matter	B	amyloid deposit	↓SphK1 , ↓S1P1R, ↑SPL ↓S1P, ↓SphK1,2 ↑C16:0 Cer	Ceccom et al., 2014
Brodman areas 46,10,20 patients,	B		↑ PPAP2B, ↑ SPL, ↓acid CDase, ↑CerS1,2, ↓CerS6	Katsel et al., 2007
PD				
Anterior cingulate cortex , patients	B		↓total Cer, ↓SM ↑CerS1 expression	Abbot et al., 2014
Anterior cingulate cortex , patients	B	↑ autophagy ↑ α -synuclein	↓GlucosylCDase, ↓Cer,	Murphy et al., 2014
MS				
White matter, patients	B		↓S1P, ↑Sph, ↑C16Cer, ↑C18Cer	Qin et al., 2010

Reactive astrocytes, patients	B		↑ C18:0 Cer	Kim et al., 2012
NPC				
NPC ^{-/-} mouse brain	B		↑GlucosylCer, GalactosylCer, GlucosylSph, GM2, GM3	Marques et al., 2015
NPC ^{-/-} mouse brain with GBA2 deletion,	B	improved motor coordination	↑Glucosyl Cer, GlucosylSph = cholesterol = gangliosides	Marques et al., 2015
NPC1 ^{-/-} mouse brain, Miglustat Patients, plasma Patients + Miglustat, plasma patients + Miglustat, CSF	B		GCS inhibition , ↑ monohexylCer ↑ monohexylCer ↑C16:0Cer, ↓Sph, ↑S1P ↓Cer, ↓GM1, ↓GM3 ↑monohexylCer	Fan et al., 2013
NPC1 ^{-/-} mouse brain, Miglustat,	B	↑synaptic plasticity	GCS inhibition	D'Arcangelo et al., 2016
Purkinje neurons from NPC1 ^{-/-} cat, Miglustat	A/B	↑survival	GCS inhibition	Stein et al., 2012
NPC1 ^{-/-} cat, Miglustat	B	↑lifespan ↓ motor deficit	GCS inhibition	Stein et al., 2012
Lymphocytes NPC patients, Miglustat	A	correction of abnormal lipid trafficking	GCS inhibition	Lachmann et al., 2004

The table illustrates some examples of the involvement of SLs on neuroinflammation, ischemia, and in neurodegenerative diseases such as PD, MS, AD and NPC, indicating the experimental method used (A: in vitro; B, in vivo; si: siRNA; GBA2, non-lysosomal glucosylCDase). The alterations in SLs content or in expression/activity of enzymes involved in SL metabolism are listed under Mechanism.

Table 3. Effects of 1,25(OH)₂D₃ on nervous system differentiation, protection and proliferation**DIFFERENTIATION**

Cell	Effect	Mechanism	References
Primary embryonic hippocampal cells	↑ neurite outgrowth	↑NGF	Brown et al., 2003
OPC	↑ differentiation	↑MBP	de la Fuente et al., 2015
Neuronal stem cell	↑ differentiation to oligodendrocytes	↑ CNTF	Shrirazi et al., 2015
Schwann cells	↑ differentiation	↑ IGF-1	Hao et al., 2015
HN9.10e	↑ neurite outgrowth	↑ NGF, Bcl-2	Marini et al., 2010

PROTECTION

Animal/Cell	Stimulus	Mechanism	References
Murine experimental allergic encephalomyelitis	MBP	nd	Lemire & Archer, 1991
Dopaminergic cell	MPTP+, sulfoximine	↓ROS, ↑glutathion	Shinpo et al., 2001
Mesencephalic cell	6OH-DA,	↑TH, ↑arborization	Wang et al., 2001
Hippocampal neuron	NMDA, glutamate	↓LVSSC	Brewer et al., 2001
Substantia nigra	Zn	↓lipid peroxidation, ↑ DA	Lin et al., 2003
Cortex	ischemia	↑HO-1, ↓ GFAP	Oermann et al., 2004
Cortical neuron	glutamate	↑MAP2, ↑GAP-43, ↑synapsin 1, ↑VDR	Taniura et al., 2006
Rat, substantia nigra	6OH-DA	↑DA	Smith et al., 2006
rat, mice	MPTP	↓ microglia activation, ↓TNF α mRNA, ↓INF γ mRNA	Kim et al., 2006
cortical cells	cyanide	↓ uncoupling, ↑Ikkb	Li et al., 2008
hippocampus	glutamate, ischemia	↓ caspase-3	Kajta et al., 2009
mesencephalic neuron		↑GDNF	Orme et al., 2013
rat hippocampus	ischemia/reperfusion	NR3A, ERK, pCREB	Fu et al., 2013
SH-SY5Y	Rotenone	↑ autophagy	Jang et al., 2014
Neuron-glia	endotoxin	↑LC3, beclin, AMPK	
mouse		↓ MAPK, ↓iNOS,	Huang et al., 2015
Cortex slices	MPTP	↓IL-6, ↓MIP-2 mRNA	
Schwann	hyperhomocysteinemia	↑ autophagy	Li et al., 2015
	High glucose	↓ ROS, ↓ iNOS	Longoni et al. 2016
	Methylglyoxal	↑ CBS, ↑H2S, ↓ ROS	Zhang et al. 2016
Tg2576 and TgCRND8 mice		↓plaque formation, ↓ lower soluble A β levels, ↑ P-glycoprotein	Durk et al., 2014
AD mouse (AbPP)		↓decrease memory deficit	Yu et al., 2011
Aging rats		↓plaque formation, ↑NGF	
		↓ inflammation	
		↓decrease memory deficit	Latimer et al., 2016
		Modulation proinflammatory cytokines	Briones and Darwish, 2012
		↓decrease amyloid	
		↓decrease amyloid	Yu et al., 2011
Hippocampal neurons and	A β	↓cytotoxicity ↓iNOS	Dursun et al., 2011;

cortical neurons	↓ LV CDCC A1C , ↑VDR	2013a,b
Mouse retina	↑ phagocytosis, ↓ Aβ	Lee et al. 2012
AD macrophages	Modulation IL1, IL1R	Mizwicki et al. 2012,2013
bEnd.3 cells	↑ phagocytosis, ↓ Aβ ↑Aβ1-40 brain-to-blood efflux of amyloid-β (Aβ) peptide LRP1 and RAGE regulation	Guo et al., 2016

PROLIFERATION

Cell/animal	Action	Mechanism	References
Neuroblastoma cells	↓	CerK	Bini et al., 2012
		nd	Gummireddy et al., 2003a,b Celli et al., 1999a,b Stio et al., 2001
Stem cells	↑	↑NT-3, BDNF, GDNF and CNTF	Shirazi et al., 2015
Primary embryonic hippocampal cells	↓		Brown et al., 2003
1,25(OH) ₂ D ₃ -deprived embryos E19, brain	↑	↑cyclin D ↓ cyclin B, ↓p21	Ko et al., 2004
Glioblastoma cells	↑, no effect		Diesel et al., 2005
1,25(OH) ₂ D ₃ -deprived neuroprogenitors, SVZ	↓		Cui et al., 2007
1α-hydroxylase knockout Mouse, dentate gyrus	↑		Zhu et al., 2012

The table illustrates the effect of 1,25(OH)₂D₃ in cell types and the mechanism involved. The noxious agent is listed under Stimulus. ↑, increase; ↓, decrease. Abbreviations: 6-OHDA: 6-hydroxydopamine; AMPK: AMP-dependent PK; BDNF: brain derived neurotrophic factor; GDNF: glial derived neurotrophic factor; CNTF: ciliary derived neurotrophic factor; bEnd.3: mouse brain microvascular endothelial cell line; CBS: cystathionine-β-synthase; DRG: dorsal root ganglion; HO: hemoxygenase; i NOS: inducible nitric oxide synthase; LVDCC: L-type voltage-sensitive calcium channels; LRP1: low-density lipoprotein receptor-related protein 1; MBP : myelin basic protein; MPTP : 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine ; nd: not determined; NR3A: N-Methyl-D-Aspartate receptor subunit 3A; OPC: oligodendrocyte precursor cell; RAGE: receptor for advanced glycation end products, SVZ, subventricular zone.

Figure legends

Figure 1. Metabolism of sphingolipids. A). *de novo* synthesis of sphingolipids leads to the formation of ceramide (Cer) and sphingosine 1-phosphate (S1P) through four reactions catalized by the serine palmitoyltransferase (SPT), which condenses palmitoyl-CoA and serine into 3-ketosphinganine (3-KS), the 3-ketosphinganine reductase (3-KR), which generates sphinganine (DHSph), the (dihydro) Cer synthase (CerS), which acylates sphinganine to dihydroceramide (DHCer), and the dihydroceramide desaturase (DES), which converts relatively inactive dihydroceramide to ceramide). The latter is converted to sphingosine (Sph) by ceramidase (CDase). Sph can be converted to S1P by sphingosine kinase (SphK) or to Cer by CerS. The degradation of S1P is achieved by the reversible reaction catalized by the S1P phosphatase (S1PPase) and the irreversible reaction catalized by S1P lyase which produces hexadecenal and ethanolamine phosphate. B). The cell membrane constituent sphingomyelinase (SMase/SMPD) generates Cer from sphingomyelin (SM). Phosphorylation of Cer by Cer kinase (CerK) generates ceramide-1-phosphate (C1P). In the Golgi, Cer is converted to SM by SM synthase, or to GlucosylCer by glucosylceramide synthase. GlcCer is then processed to more complex glycosphingolipids (not shown). Glucosylceramidase (also named glucosylcerebrosidase) (GCDase) produces Cer from glucosylCer.

B. S1P can be exported outside the cells by ABC transporters and the putative transporter Spinster 2 (spns2) and elicits autocrine or paracrine signaling by binding to and activating G-protein-coupled receptors (S1PR1-5). G-proteins are composed of three subunits: alpha, beta, and gamma and are classified as G(q), G(i/o), G(12/13) and G(s) depending on the function of their alpha subunits.

Figure 2. Biological function of S1P/S1P receptor signaling.

Phosphorylation activates SphK1 and promotes its translocation to the membrane (dashed arrow), where S1P is generated. The bioactive lipid can be released and then bind to S1PRs. Activation of each receptor subtype leads to distinct G-protein mediated signaling pathways. S1P can be also formed by SphK isoform 2 inside the nucleus and in this compartment it can inhibit p21 transcription and histone deacetylase activity (DHAC). ↑: activation; ⊥: inhibition

Figure 3. Biological function of 1,25(OH)₂D₃/ VDR signaling.

Non-genomic rapid actions of 1,25(OH)₂D₃ are mediated by membrane vitamin D₃ receptor (mVDR), localized at plasma membrane. Inactive form of VDR is present in the cytosol (VDR). mVDR activation through MARRS (membrane-associated, rapid response steroid-binding protein) promotes MAPK cascade, Raf kinase with the consequent activation of PKC, PI3K, and PKA. 1,25(OH)₂D₃ can interact with TGF and EGF receptors to modulate cell cycle processes. Activation of the G-protein coupled receptor S1P1R leads to specific Raf-MAPK-ERK cascade that may cross-talk with the classical VDR pathways.

1,25(OH)₂D₃ genomic action leads to gene expression regulation following the nuclear translocation of VDR, the formation of the complex of VDR and 9-cis-retinoic acid receptor (VDR/RXR), and its binding to the vitamin D₃ response elements (VDREs).

Figure 4. Effect of 1,25(OH)₂D₃ and A β on the key reactions involved in the sphingolipid metabolic pathway.

The effect of 1,25(OH)₂D₃ is shown in blue and dashed lines, whereas the effect of A β treatment or alterations associated with AD on the key enzymes involved in the reactions are shown in red and continuous line. \uparrow : activation or increased expression/activity; \top : inhibition or reduced expression/activity

