

DYSREGULATED PATHWAYS IN SPINOCEREBELLAR ATAXIA TYPE 2 AND ATAXIA TELANGECTASIA

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Nothing in Biology makes sense except in the light of evolution

Theodosius Dobzhansky, 1973

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1 INTRODUCTION

1.1 Degeneration of the cerebellum: cerebellar ataxias

Cerebellar ataxias are a group of neurodegenerative disorders primarily affecting the cerebellum in addition to other areas such as the basal ganglia and cerebral cortex. Imbalance and coordination problems are broader symptoms exhibited by patients (Akbar & Ashizawa 2015). There is currently no cure for ataxias and although mutations in several genes have been identified as causative, there is a lack of understanding of why some neurons are more sensitive than others. For example affecting more severely the cerebellum over other areas of the central nervous system (CNS).

Deciphering the mechanisms through which certain neuron populations are affected is important for not only understanding ataxias, but also neurodegenerative disorders in general. A lot of effort has been dedicated to elucidating pathological mechanisms with little success in understanding and developing treatment for this type of diseases. Continued research into the most fundamental neurological, genetic, and molecular mechanisms is crucial given the debilitating and life-shortening nature of neurodegenerative disorders.

1.2 The cerebellum

The cerebellum (CB) is a well-organized, evolutionary conserved structure that controls smooth and skillful movements, and is involved in higher cognitive and emotional functions (Lee et al 2015, Rodriguez et al 2005). Functional and anatomical abnormalities of the cerebellum have been linked to psychological disorders like autism (Sathyanesan et al 2019), while pathological defects, such as spinocerebellar ataxias, cause abnormal motor coordination (Zoghbi 2000).

The different neuronal types in the CB are classified based on their excitatory or inhibitory function. The excitatory glutamatergic neurons are the granule cells (GC), unipolar brush cells, and the deep cerebellar neurons. The inhibitory

GABAergic neurons, which use γ -aminobutyric acid or glycine as neurotransmitters, are Purkinje neurons (PN), Golgi cells, stellate cells, and basket cells.

There are two major afferent fibers to the cerebellum; climbing fibers that originate from the inferior olive, and the mossy fibers that originate from the pontine nuclei, spinal cord, and vestibular system (Figure 1.1).

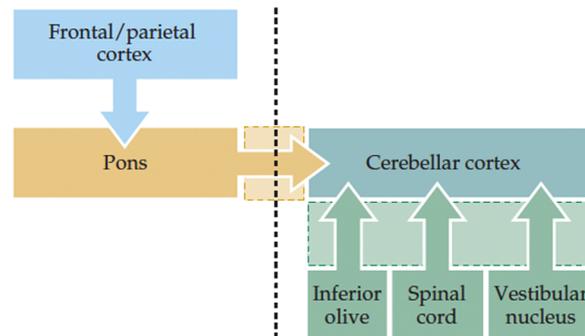


Figure 1.1. Diagram of the major inputs to the cerebellum. Modified from (Purves 2004).

Mossy fibers form synapses on the GC layer. GC have specialized axons called parallel fibers, which ascend to the molecular layer and make excitatory synapses onto the distal domain of the dendritic tree of the PN. In contrast, climbing fibers innervate the proximal domain of PN dendrites (Figure 1.2). Therefore, PN are the final destination of the afferent pathways to the CB (Purves 2004), receiving numerous inputs from parallel fibers and input from a single climbing fiber.

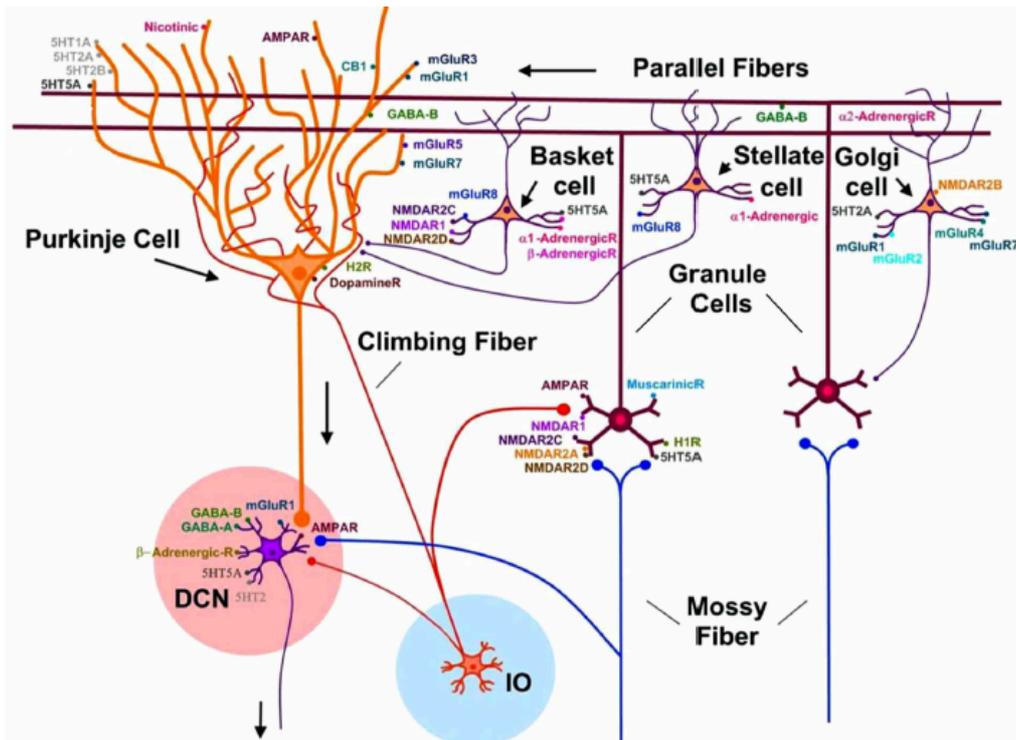


Figure 1.2. Representation of connectivity of cerebellar neurons and expression of receptors. Two categories of inputs reach the cerebellar cortex: (1) the mossy fibers targeting granule cells and cerebellar nuclei (DCN), and (2) the climbing fibers originating from the inferior olivary complex (IO) and projecting to cerebellar nuclei and Purkinje neurons. Granule cells give rise to parallel fibers, which make numerous synapses with dendritic spines of Purkinje cells. Inhibitory interneurons of the cerebellar cortex include basket cells, stellate cells and Golgi cells (Marmolino & Manto 2010).

Purkinje neurons are the sole output of the cerebellar cortex projecting to the deep cerebellar nuclei, being wholly inhibitory. Deep cerebellar nuclei also receive excitatory input from collaterals of mossy and climbing fibers (Figure 1.2), therefore the inhibitory output of PN serves to modulate the level of this excitation.

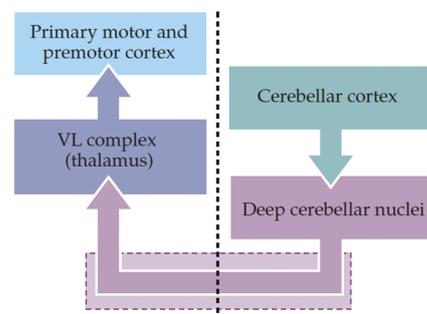


Figure 1.3. Functional organization of the outputs from the cerebellum to the cerebral cortex. The axons of the deep cerebellar nuclei cross in the midbrain before reaching the thalamus. Modified from (Purves 2004).

The deep cerebellar nuclei projects to the thalamic nuclei, which directly projects to the primary motor and premotor cortices. The cerebellum signals to the upper motor neurons to coordinate voluntary movements through this pathway.

1.3 Classification of cerebellar ataxias

Cerebellar ataxias can be acquired, inherited or sporadic (without defined genetic cause or acquired etiology). Common causes of acquired ataxias are a result of vascular insults, tumors, traumas, or demyelinating diseases like multiple sclerosis. Inherited ataxias, those with a defined genetic cause, can be classified in four different categories: dominant ataxias, recessive ataxias, mitochondrial ataxias, and X-linked ataxias (Figure 1.4).

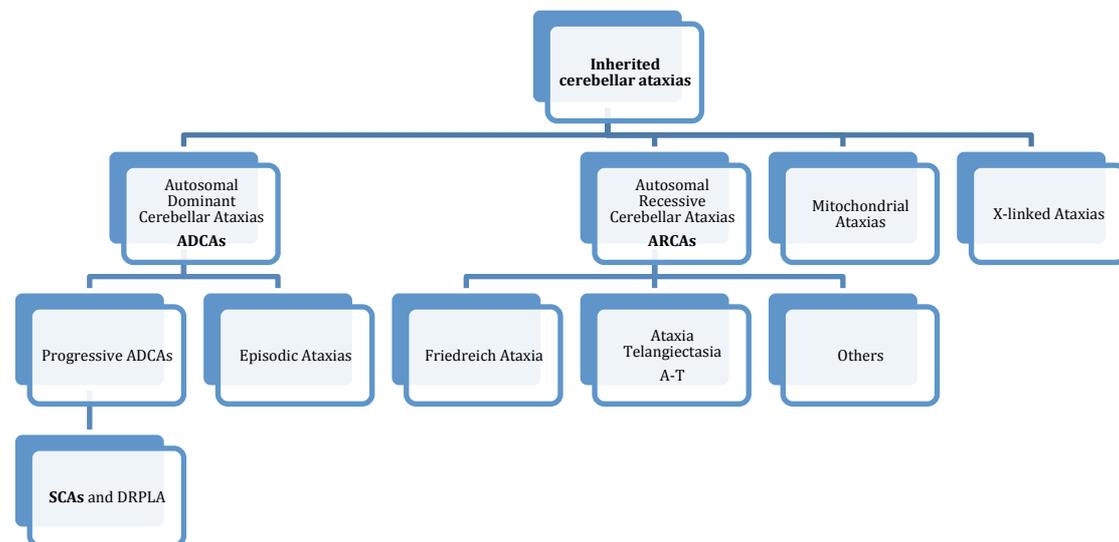


Figure 1.4 Classification of the inherited cerebellar ataxias. They can be divided into autosomal dominant, recessive dominant, X-linked, and mitochondrial ataxias. The most common autosomal dominant ataxias are the Spinocerebellar ataxias (SCAs). DRPLA stands for Dentatorubral-pallidolusian atrophy.

1.4 Autosomal dominant cerebellar ataxias

Autosomal dominant cerebellar ataxias (ADCAs) are a type of dominantly inherited ataxias that develop during adulthood. There are three types of ADCAs: Spinocerebellar ataxias (SCAs), Denatorubral-pallidolusian atrophy (DRPLA), and episodic autosomal dominant ataxias. Once symptoms appear they worsen over time with the exception of episodic ataxias.

1.4.1 Spinocerebellar ataxias

Spinocerebellar ataxias (SCAs) are a group of neurodegenerative disorders causing motor deficits due to cerebellar dysfunction. It is a group of genetically heterogeneous disorders and, so far, 48 different types have been described (Kuo 2019, Matilla-Duenas et al 2014). Despite the existence of so many genetic variations, patients show common symptoms of ataxic gait, poor coordination, speech and eye affected movements; all caused by pathological defects in the cerebellar circuits (Matilla-Duenas et al 2014). Cerebellar dysfunction results in an altered cerebellar output pointing to an impairment of the sole cerebellar output, the Purkinje neurons. This can be caused by the direct affection of the PN, by the alteration of the input that they are receiving, or by a combination of both. Disease onset is usually between 30 and 50 years of age, although early onset in childhood (Mao et al 2002) and onset after 60 years of age have been reported (Duenas et al 2006). Nine SCA subtypes, including SCA 1, 2, 3, 6, 7, 8, 10, 17 and DRPLA, are associated with repeat expansion sequences in coding regions (Table 1.1).

SCA subtype	Protein	Expansion	Reference
SCA 1	Ataxin 1	CAG	(Orr et al 1993)
SCA 2	Ataxin 2	CAG	(Imbert et al 1996, Pulst et al 1996, Sanpei et al 1996)
SCA 3	Ataxin 3	CAG	(Kawaguchi et al 1994)
SCA 6	CACNA1A ^a	CAG	(Zhuchenko et al 1997)
SCA 7	Ataxin 7	CAG	(David et al 1997)
SCA8	ATXN8 ^b and ATXN8OS ^c	CTG	(Ikeda et al 2008, Koob et al 1999)
SCA10	Ataxin 10	ATTCT	(Grewal et al 1998, Zu et al 1999)
SCA 17	TATA box binding protein	CAG	(Nakamura et al 2001)
DRPLA	Atrophin 1	CAG	(Koide et al 1994)

Table 1.1. Summary of SCAs and DRPLA caused by CAG expansion sequences in coding regions. ^aCACNA1A stands for 1A-voltage-dependent calcium channel. ^bATXN8 stands for Ataxin 8. ^cATXN8OS stands for Ataxin 8 Opposite Strand.

Seven of the previous disorders are caused by exonic CAG repeats (coding for glutamine) and are referred to as polyglutamine (polyQ) disorders (SCA 1,2,3, 6,17 and DRPLA). These SCAs show common features like progressive

neurodegeneration of distinct brain areas, and formation of nuclear or cytoplasmic poly-glutamine-containing protein aggregates (Zoghbi & Orr 2000). However affected proteins do not share similar structure or motif homologies. Moreover, the critical length of the CAG repeats varies among them.

Two other neurological disorders that are part of the polyQ disorders are Huntington's disease (HD) (Walker et al 1981) and Spinal and bulbar muscular atrophy (SBMA) (La Spada et al 1991), caused by mutations in the protein huntingtin (HTT) and the androgen receptor (AR) respectively.

1.4.2 Spinocerebellar ataxia type 2

Spinocerebellar ataxia type 2 (SCA2) is caused by repeat expansion mutations in the *ATXN2* gene, which encodes the protein Ataxin2 (ATXN2) (Table 1.1). Three independent labs identified the genetic cause of SCA2 in 1996 (Imbert et al 1996, Pulst et al 1996, Sanpei et al 1996). A polyglutamine (polyQ) tract consisting of CAG repeats interrupted by CAA was identified at exon 1 of *ATXN2*. Healthy individuals have between 22 and 23 glutamines (Qs), with a sequence of (CAG)₈CAA(CAG)₄CAA(CAG)₈, while expansions longer than 33 CAG repeats cause SCA2 (Fernandez et al 2000). A strong correlation between age of onset and CAG repeat length has been described (Figure 1.5) (Pulst et al 2005, Velazquez-Perez et al 2014). Moreover, CAG repeat length in other polyQ proteins like *CACNA1A* and *ATXN7* affects SCA2 onset (Pulst et al 2005, Tezenas du Montcel et al 2014). Intermediate expansions of the polyQ tract have been associated with autosomal-dominant Parkinson's disease (PD) (Gwinn-Hardy et al 2000, Sen et al 2016) and expansions between 27-33 Qs were linked to amyotrophic lateral sclerosis (ALS) (Elden et al 2010, Gispert et al 2012, Ross et al 2011).

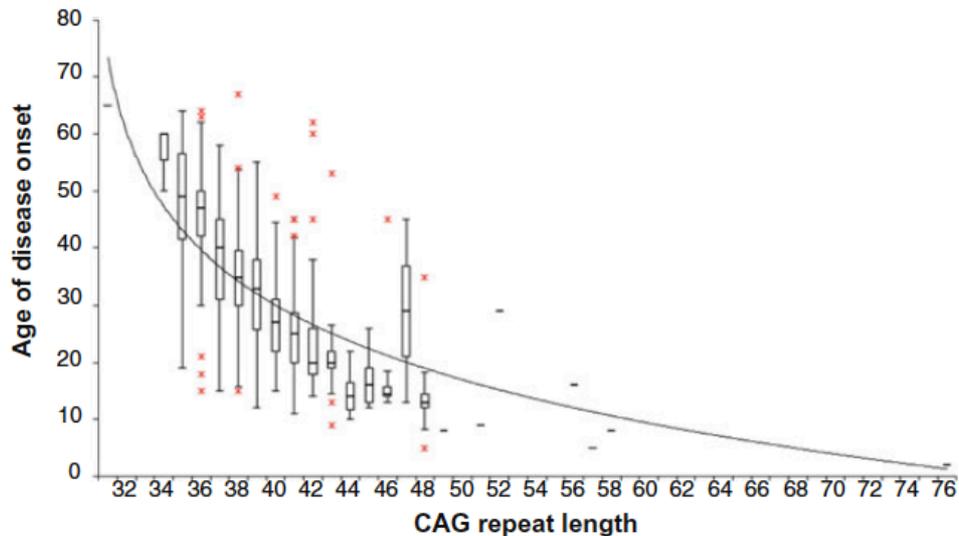


Figure 1.5. Age at onset and CAG repeat length are inversely related. SCA2 age of onset is negatively correlated with *ATXN2* CAG repeat length (Pulst et al 2005).

The most noticeable symptom that SCA2 patients show is ataxic gait; however they also show cerebellar dysarthria, dysdiadochokinesia, and ocular dysmetria caused by the progressive cerebellar degeneration. Slow or absent saccade velocity is one predominant ocular symptom from SCA2 patients due to degeneration of the oculomotor brainstem. Apart from the cerebellar and oculomotor symptoms, patients also suffer from areflexia of the upper and lower limbs (peripheral neuropathy) and some cases show fasciculations and amyotrophy (involvement of motor neurons) (Auburger 2012, Lastres-Becker et al 2008b, Velazquez-Perez et al 2011). Histological analysis of *post-mortem* samples from SCA2 patients showed a general reduction of the brain size with significant atrophy of the cerebellum, brainstem, and frontal lobe. A reduction of the cerebral and cerebellar white matter was also detected (Estrada et al 1999). Further studies of spinal cord samples showed severe and widespread neurodegeneration of the central somatosensory system (Rub et al 2007).

1.4.3 Ataxin 2

Ataxin 2 (*ATXN2*) is an evolutionary conserved RNA binding protein (RBP) (Jiménez-López & Guzmán 2014). All vertebrates, except birds, have two *ATXN2* homologs (*ATXN2* and *ATXN2-like*), probably generated by gene duplication (Zu et al 1999). *ATXN2* is a member of the Like-Sm (LSm) protein family, having RNA processing and metabolism roles (Tharun 2009, Wilusz & Wilusz 2005).

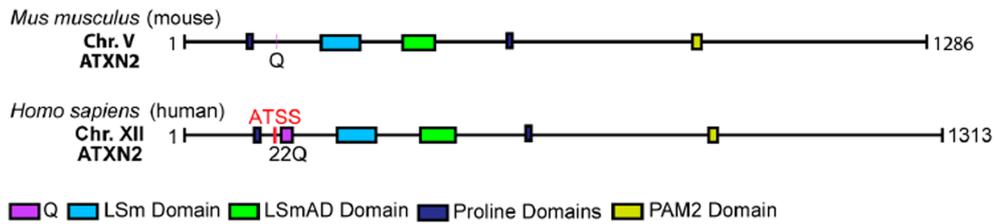


Figure 1.6. Structure of ATXN2 and its conserved domains in *Mus musculus* and *Homo sapiens*. ATSS stands for alternative translational start site. Modified from Ostrowski et al 2017.

Downstream of the polyQ tract, at the N-terminal region, ATXN2 presents an LSm domain and an LSm-associated domain (LSmAD) (Figure 1.6) responsible for its physical interaction with RNAs (Yokoshi et al 2014). Moreover, the LSm and LSm-AD domains are sufficient to interact with DDX6 and LSM12 and carry ATXN2 posttranscriptional activity (Lee et al 2017, Nonhoff et al 2007). Towards the C-terminal there are two more conserved domains, a proline-rich domain and a PAM2 domain (Figure 1.6), mediating the interaction with poly(A)-binding protein 1 (PABP1) (Kozlov et al 2010, Mangus et al 1998). PABP1 is an RBP important for poly-A tailing, translation, and mRNA decay (Xie et al 2014). The proline-rich domain has been described to mediate the association of ATXN2 with the receptor endocytosis apparatus and influence the trophic state of the cells (Drost et al 2013, Nonis et al 2008).

1.4.4 Molecular functions of Ataxin2: RNA metabolism

ATXN2 has been linked to several RNA processing roles based on experimental studies in *Saccharomyces cerevisiae* (yeast), *Caenorhabditis elegans* (worms), *Drosophila melanogaster* (flies), mouse models and humans.

As previously mentioned, ATXN2 interacts with PABP1 through its PAM2 domain. Based on studies with *S. cerevisiae*, PBP1 (Pab1-binding protein 1; ATXN2 ortholog in yeast) promotes mRNA stability and protein production influencing RNA polyadenylation (Mangus et al 1998, Ralser et al 2005). Although the 3' end of pre-mRNA were found to be properly cleaved, Pbp1 knock-out yeast cells show shorten polyadenylated (poly(A)) tails (Mangus et al 1998). Moreover, ATXN2 can bind to uridine-rich elements (AU-rich element,

ARE) at the 3'UTRs of its mRNA targets through the LSM domain, thereby stabilizing the mRNA targets (Yokoshi et al 2014). Based on PAR-CLIP (photoactivatable-ribonucleoside-enhanced crosslinking and immunoprecipitation) experiments, ATXN2 was found to up-regulate proteins involved in RNA splicing, polyadenylation and 3' end processing (Yokoshi et al 2014). In the same publication, the authors showed how the deletion of the polyQ domain affected ATXN2 role in mRNA stabilization while the absence of the PAM2 domain did not alter its role significantly (Yokoshi et al 2014). Furthermore, the *Atxn2*-KO mouse model showed a global reduction in protein synthesis, supporting the role of ATXN2 in general translation (Fittschen et al 2015). In *C. elegans* experiments, the ATXN2 ortholog ATX2, was shown to play a role in regulation of translation (Ciosk et al 2004). The ATX2 loss elevated the protein levels of GLD1 (defective in germ line development; ortholog of human QKI) and MEX3 (muscle Excess; ortholog of human MEX3B) without affecting their mRNA level, both of them containing KH-domains (RNA recognition domain). Through studies in *D. melanogaster*, dATX2 (ATXN2 ortholog in flies) was shown to be necessary for regulating synapse-specific plasticity via microRNA-mediated translational repression (McCann et al 2011, Sudhakaran et al 2014). Human ATXN2 and dATX2 had been shown to physically assemble with polyribosomes being part of the messenger ribonucleoprotein (mRNP) complexes (Satterfield & Pallanck 2006). The domains responsible for direct assembly with polyribosomes are the Lsm and LsmAD. The PAM2 domain in dATX2 was shown to be necessary to bind to polysome-bound dPABP1 in *D. melanogaster* (Satterfield & Pallanck 2006). Based on all these data, the promotion of RNA stability and translation by Ataxin2 seems to be evolutionarily conserved among species.

In periods of cellular stress such as a decreasing source of energy, the translation has to be stalled until favourable conditions return. Stress granules (SG) and processing bodies (P-bodies) are two distinct conserved cytoplasmic mRNP (messenger ribonucleoproteins) granules rich in untranslating mRNA (Buchan & Parker 2009, Kedersha et al 2013). SG contain mRNA stalled at the translation initiation step, 40S ribosomal subunits, various translation initiation factors,

RBPs, and many non-RNA-binding proteins (Buchan & Parker 2009, Jain et al 2016, Protter & Parker 2016). SG are formed as a response to cellular stress when the translation initiation is inhibited (Anderson & Kedersha 2009). On the contrary, P-bodies contain mRNA associated with translational repressors and the mRNA decay machinery. These mRNAs can be targeted for decapping and degradation (Aizer et al 2014, Parker & Sheth 2007). SG and P-bodies are dynamic structures that can exchange components and are functionally linked (Buchan & Parker 2009, Kedersha et al 2005) (Figure 1.7).

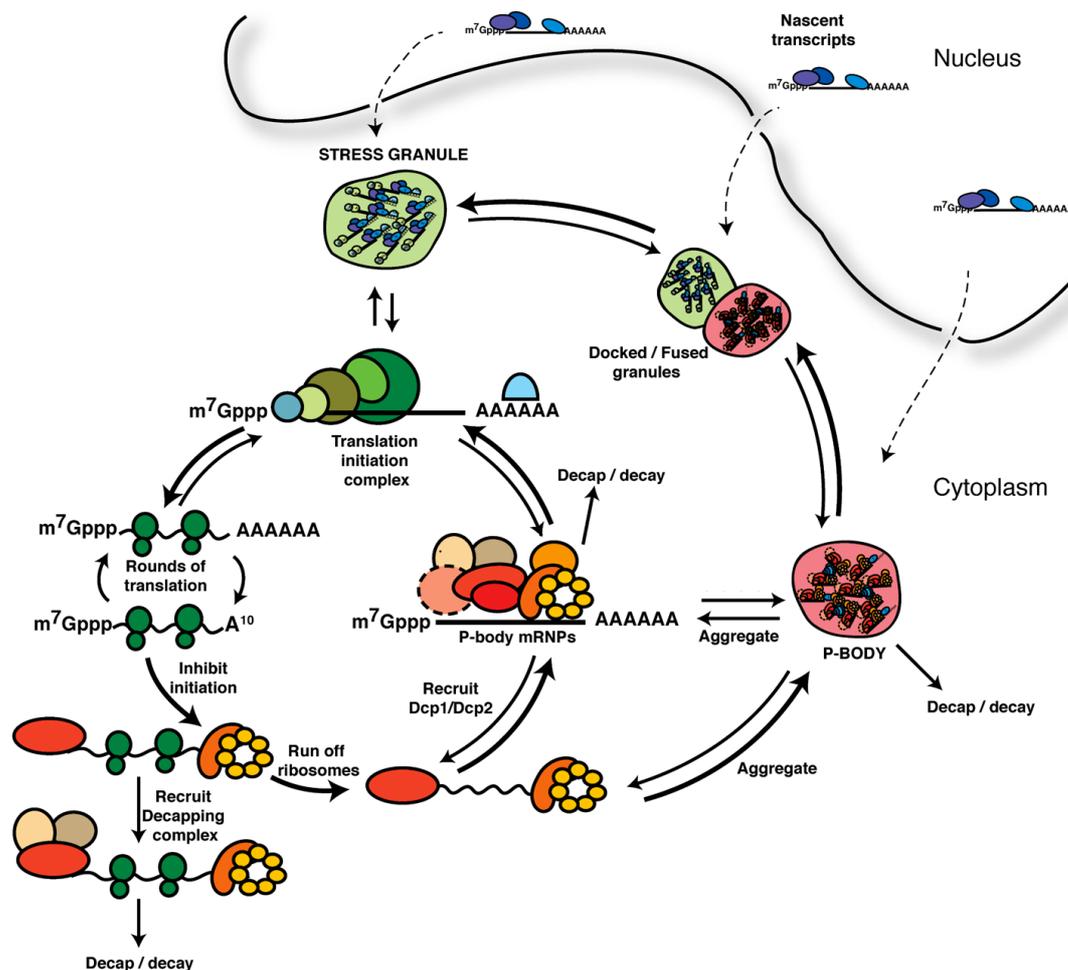


Figure 1.7. Model integrating Stress Granules and P-bodies into an mRNP cycle. Proposed model for mRNP transitions, particularly during stress. Dashed arrows indicate possible destination of exported nascent transcripts. Modified from Buchan & Parker 2009.

An increasing number of RBPs have been described to localize in SG and/or P-bodies (Nunes et al 2019) one of them being ATXN2. There is extensive evidence that ATXN2 acts as a stress response factor in different models (Nonhoff et al 2007, Ralser et al 2005) localizing to SG together with other RBPs, such as

PABP1 and TIA1 (Kedersha et al 1999, Ralser et al 2005, Swisher & Parker 2010). Nonhoff and colleagues showed that the absence of ATXN2 leads to an impairment of SG formation and a higher level of PABP1 (a key protein in mRNA translation and stability) while P-bodies are not affected. In contrast, overexpression of ATXN2 leads to a reduced number of P-bodies, no effect on SG assembly, and lower levels of PABP1 (Nonhoff et al 2007). The effect of reduced numbers of P-bodies in the presence of high levels of ATXN2 seems to be mediated by the Lsm and LsmAD domains interacting with the conserved DEAD/H-box RNA helicase DDX6, an important component of P-bodies involved in mRNA decay (Coller et al 2001, Cougot et al 2004, Fischer & Weis 2002). Therefore, ATXN2 and its ortholog seem to act as stress response factors promoting the assembly of SG formation and influencing components of the P-bodies. Since ATXN2 levels are altered in a number of diseases such as neurodegenerative disorders and cancer, its dysregulation might contribute to the disruption of mRNP granules underlying some of these pathologies.

1.4.5 Physiological functions of Ataxin2: metabolism and circadian rhythm

Ataxin2 has been implicated in numerous physiological processes such as embryonic development (Kiehl et al 2000), apoptosis (Wiedemeyer et al 2003), cellular proliferation (Drost et al 2013), and various metabolic processes (Carmo-Silva et al 2017). Its role in these processes may be a result of its molecular functions, for example through stabilizing some of its mRNA targets.

Increase in body weight, insulin sensitivity, and reduced fertility were reported from the two *Atxn2*-KO mouse mutants (Kiehl et al 2006, Lastres-Becker et al 2008a). A similar effect in body weight and growth increase was observed in *C. elegans* when *Atx2* was knocked-down (Bar et al 2016). In contrast, the *Atxn2*-CAG42 and BAC-72 SCA2 mouse models (described in the *Mouse models of SCA2* section) showed reduced body weight compared to wild-type (WT) mice (Damrath et al 2012, Dansithong et al 2015). Moreover, the *Atxn2*-KO mice showed dyslipidemia, increased serum cholesterol levels, and down-regulation of ACADS (acetyl-CoA dehydrogenase, implicated in fatty acid β -oxidation),

suggesting that the absence of *Atxn2* leads to a lipid metabolism dysregulation (Lastres-Becker et al 2008a, Meierhofer et al 2016). Several studies in SCA2 patients corroborate the lipid pathology including apolipoproteins C-II and C-III down-regulation (Abdel-Aleem & Zaki 2008, Dominiczak & Caslake 2011, Swarup et al 2013).

The mTOR (mammalian target of rapamycin protein kinase) signaling cascade is the best-described pathway for nutrient sensing in the cell. There are two different mTOR complexes: complex 1 and complex 2 (mTORC1/2) (Wullschleger et al 2006). Evidence points to a conserved inhibition of mTOR by *ATXN2* (Bar et al 2016, DeMille et al 2015, DeMille et al 2014, Lastres-Becker et al 2016, Takahara & Maeda 2012). During heat stress, which promotes the formation of SG, TORC1 is inhibited via sequestration within SG in yeast. The same happens when overexpressing *PBP1* (*ATXN2* ortholog in yeast); TORC1 activity is reduced, and both *PBP1* and TORC1 localize into SG (Takahara & Maeda 2012). Further experiments in yeast showed that a signaling cascade upstream of TORC1, including nutrient-sensing kinases AMPK/SNF1 and PSK1 (yeast ortholog of PAS kinase), is implicated in the *PBP1*-dependent inhibition of TORC1 (DeMille et al 2014). Adverse growth conditions in yeast promote the phosphorylation of PSK1 by AMPK/SNF1, which then enhances TORC1 sequestration via *PBP1* (DeMille et al 2015). In addition, MEFs (mouse embryonic fibroblasts) from *Atxn2*-KO mice exhibited increased phosphorylation of RPS6 (ribosomal protein 6) and 4E-BP (eukaryotic initiation factor 4E-binding protein), both of which are substrates of the mTORC1 complex (Lastres-Becker et al 2016). Mice lacking RPS6 and 4E-BP show hypoinsulinemia, glucose intolerance, and reduction of adipose tissue (Ruvinsky et al 2005, Tsukiyama-Kohara et al 2001). Experiments in the SH-SY5Y neuroblastoma cell line showed how under starvation and in the presence of rapamycin (mTOR inhibitor), *ATXN2* mRNA levels are increased (Lastres-Becker et al 2016). These suggest that *ATXN2* could act as a metabolic sensor either directly or through SG modulating the mTOR pathway (Figure 1.8).

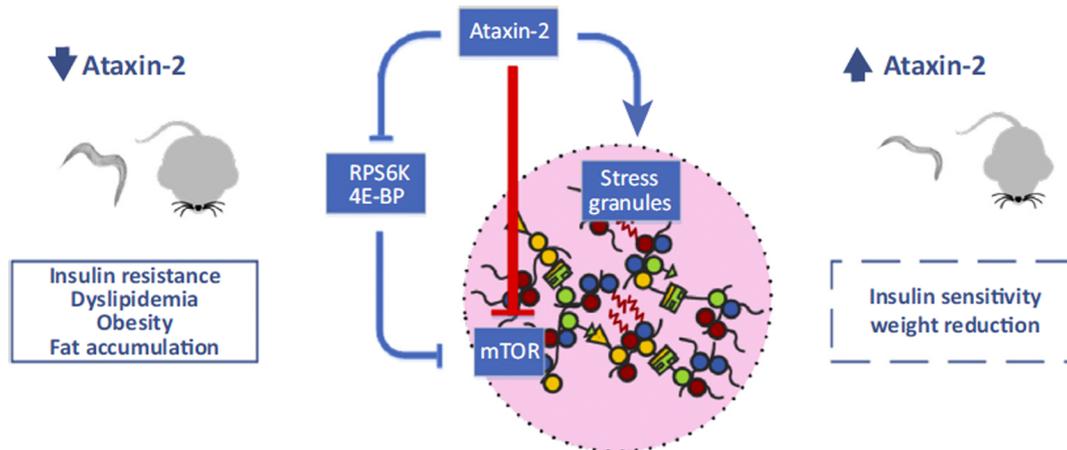


Figure 1.8. Ataxin2 as a metabolic modulator. Ataxin2 deficiency has been linked to metabolic dysfunction in mice and worms leading to fat accumulation and obesity. ATXN2 has been reported to modulate mTOR pathway. ATXN2 is influenced by nutritional status of the cell and could be blocking mTOR via promoting reduced phosphorylation of RPS6 (ribosomal protein S6) and 4E-BP (eukaryotic initiation factor 4E-binding protein). On the other hand, mTOR RNA may be sequestered into SG blocking its translation. As a consequence, an up-regulation of ATXN2 might be the cause of weight reduction in SCA2 patients through mTOR pathway (Carmo-Silva et al 2017).

Ataxin2 also plays a role in the function of the circadian clock; it modulates the expression of intrinsic timekeepers genes that oscillate through a 24 hour light-dark period determining the timing for functions such as behaviour and photosynthesis (Salmela & Weinig 2019). Circadian rhythm is important to maintain optimal functions in organisms: circadian sleep-wake disruptions or chronic alterations often lead to psychiatric and neurodegenerative disorders (Wahl et al 2019). Two independent groups showed the requirement of dATXN2 for Period mRNA translation (Lim & Allada 2013, Zhang et al 2013b). Period (dPER in flies) is a key component of the circadian pacemaker in *Drosophila* which is regulated at multiple levels (Kozlov & Nagoshi 2019). Lower levels of dPER were detected when *dAtxn2* was knocked-down causing longer period of constant darkness behaviour in the flies (Lim & Allada 2013, Zhang et al 2013b). *Atxn2*-KO mice showed longer period of re-adjusting after transient dysregulation of the circadian cycle compared to WT, although no effects on PER (PER1 and PER2) expression levels were detected (Pfeffer et al 2017). Moreover, SCA2 patients suffer from sleep disorders and disturbed REM (rapid eye movement) sleep, regulated by the circadian clock, which can be detected before

the onset of ataxia symptoms (Lastres-Becker et al 2008b, Tuin et al 2006, Velazquez-Perez et al 2011).

1.4.6 Ataxin2 role in other neurodegenerative disorders: Amyotrophic lateral sclerosis

ALS is a fatal neurodegenerative disease where the motor neurons in the brain and spinal cord degenerate. Only 10% of ALS cases are genetically transmitted, with high penetrance (Taylor et al 2016). *SOD1* (superoxide dismutase) was the first ALS gene identified (Rosen et al 1993) and since then more than 50 potential ALS genes have been published. *ATXN2* has been shown to interact with some of these gene products such as C9ORF72 (chromosome 9 open reading frame 72), FUS (fused in sarcoma), and TDP43 (TAR DNA-binding protein 43) (Vucic et al 2014).

Heterozygous hexanucleotide expanded repeat (HRE) mutations located in the intronic region between exons 1a and 1b of the C9ORF72 gene were identified as a genetic cause in families with autosomal dominant frontotemporal dementia (FTD) and/or ALS (DeJesus-Hernandez et al 2011, Renton et al 2011). The function of the C9ORF72 gene product is unknown but so far it is the most commonly affected gene in familial ALS and FTD. Studies in French and Indian cohorts showed co-occurrence for *ATXN2* intermediate poly(Q) expansions and C9ORF72 HRE in both ALS and FTD-ALS patients (Lattante et al 2014, Narain et al 2017). At the molecular level, loss of C9ORF72 function dysregulates autophagy in animal and cellular models (Ji et al 2017, Ugolino et al 2016) and it synergizes with intermediate poly(Q) expanded *ATXN2* (Ciura et al 2016, Sellier et al 2016). Sellier *et al* showed how the motor neuron dysfunction and neuronal cell death was more significant in C9ORF72 deficiency together with ALS-linked expanded *ATXN2* rather than only loss of C9ORF72 (Sellier et al 2016). Moreover, *ATXN2* has been linked to cell death and SCA2-poly(Q) expansion caused apoptosis and caspase-3 activation in primate and rat cell lines (Huynh et al 2003).

Fused in sarcoma (FUS) is a nucleoprotein involved in DNA and RNA metabolism such as DNA repair, RNA splicing, and export to the cytoplasm. FUS gene was identified in 1993 as part of a fusion gene with the transcript factor gene CHOP

in tumor tissue from liposarcoma (Rabbitts et al 1993). Later on, several mutations in FUS were linked to ALS (Corrado et al 2010, Kwiatkowski et al 2009, Vance et al 2009). Intermediate poly(Q) expansions in ATXN2 were shown to interact with *wildtype* FUS, and more strongly with FUS containing R521C (arginine 521 to cysteine) or R521H (arginine 521 to histidine) mutations (Farg et al 2013). This interaction increased cytoplasmic FUS levels, ER stress, Golgi fragmentation, and apoptosis (Farg et al 2013). FUS with ALS-linked mutations were found to localize in cytoplasmic SG and interact with PABPC1 in an RNA-dependent manner while *wildtype* FUS was not detected (Vance et al 2013).

TAR DNA-binding protein 43 (TDP43) is an RNA/DNA-binding protein with important roles in RNA processing and metabolism. TDP43 is able to shuttle between the nuclei and the cytoplasm and during cellular stress localizes in SG (Birsa et al 2019). Several dominant mutations in the TDP43 gene have been linked to ALS (Buratti & Baralle 2010), potentially leading to an abnormal accumulation of TDP43 forming pathologic cytoplasmic inclusions (Neumann et al 2006). These inclusions were found to contain a hyperphosphorylated, ubiquitinated, and cleaved form of TDP43 (pathologic TDP43) in neurons, and glia, from both ALS and FTLD patients (Arai et al 2006, Neumann et al 2006). Ataxin2 is a potent modifier of TDP43 toxicity based on animal and cellular models of ALS (Elden et al 2010). ATXN2 and TDP43 can interact in an RNA-dependent manner, and up-regulation of ATXN2 increases toxicity of TDP43 shortening the life span of flies and yeast models (Elden et al 2010). It was also shown how intermediate poly(Q) expansions enhanced the ATXN2 stability and promote its association with TDP43 (Elden et al 2010). In addition, ATXN2 has been involved in Caspase3 (CASP3) activation and increased cleavage of TDP43 leading to pathological accumulation of cleaved fragments (Hart & Gitler 2012). Hart *et al* showed a lower caspase activation threshold in presence of intermediate poly(Q) expansions in ATXN2, causing aberrant TDP43 cleavage leading to neuronal death (Hart & Gitler 2012). Recent research using TDP43 overexpression mice showed that reducing ATXN2 could rescue the mouse phenotype and extend their life span (Becker et al 2017).

Ataxin2 has also been implicated in other neurodegenerative disorders such as Parkinson's disease (Sen et al 2016), Spinocerebellar ataxia type 1 (Al-Ramahi et

al 2007, Lim et al 2006), and Machado-Joseph disease (also known as SCA3) (Ding et al 2016, Nobrega et al 2015).

1.4.7 Mouse models of SCA2

Until recently, five mouse models for SCA2 have been described; four of which are transgenic and only one *Knock-in* (KIN) (Alves-Cruzeiro et al 2016). The first model was reported in 2000 and this SCA2 mouse model overexpressed a full length cDNA of human *ATXN2* with 58 CAG repeats (Huynh et al 2000). The introduced cDNA is under control of the *Pcp2* promoter (Purkinje cell protein 2) limiting the expression of the transgene to the PN. This model showed a late-onset progressive motor phenotype and, around 12 months of age, shrinkage of the molecular layer and reduction of calbindin staining. The next SCA2 mouse model generated was a transgenic overexpression line with the full-length human *ATXN2* gene without expansion, including the promoter region (Aguiar et al 2006). Compared to the previous mouse model, this model achieved ubiquitous expression of the transgene in the entire animal. In 2012, the first report of a KIN mouse model of SCA2 was published (Damrath et al 2012). This mutant mouse was generated via homologous recombination in embryonic stem cells in order to introduce 42 CAG repeats in the murine *Atxn2* gene, *Atxn2-CAG42*. A reduction in the weight of these animals compared to the *wild type* (WT) was detected starting at the age of 10 days and the locomotor behaviour characterization showed significant deficits on the accelerating rotarod at the age of 18 months. Following the same idea as the first mouse model described (Huynh et al 2000), the third transgenic SCA2 mouse model was generated introducing a longer CAG repeat expansion (127 CAGs) into the overexpressed human *ATXN2* cDNA under control of the *Pcp2* promoter (Hansen et al 2013). They aimed to generate a model with a stronger phenotype and an earlier degenerative onset than the first model (with 58 CAG repeats). In 2015, Dansithong and colleagues generated the most recent transgenic mouse model of SCA2 (Dansithong et al 2015), the BAC-72Q. They used the bacterial artificial chromosomes (BACs) approach to overexpress the entire *ATXN2* human gene (with 72 CAG repeats) including introns and regulatory regions within the mouse genome. A total of four copies of the *ATXN2* transgene were integrated in

a tandem manner. The ATXN2-72CAG protein was detected in the CB, spinal cord, brain, heart, and liver of this mouse model.

Although the previously described mouse models have been highly relevant in the field of SCA2, there are some limitations. For example, the random integration of the BAC approach that could affect the endogenous expression of other genes or the fact that overexpression of Ataxin2 will mask the relevance of partial ATXN2 loss-of-function effects for the disease mechanisms. To overcome some of these limitations, we generated a new mouse model where 100 CAG repeats were introduced in the mouse *Atxn2* gene as previously described for the *Atxn2*-CAG42 (Damrath et al 2012), which showed ataxic phenotype at the old age of 18 months. Increasing the CAG expansion caused an early and more severe phenotype without the risk of affecting other gene expression, a limiting factor in the BAC-72Q, and without altering the expression pattern of the *Atxn2* gene (Sen et al 2019).

Two other important mouse mutants for the field are the two *Atxn2*-Knock-out mouse lines independently generated in Los Angeles and in Frankfurt (*Atxn2*-KO) (Kiehl et al 2006, Lastres-Becker et al 2008a). These two KO models have been useful to get a better understanding of the functions and pathways of ATXN2, like its role in insulin resistance and obesity (Auburger et al 2014), or translation rate (Fittschen et al 2015).

1.5 Autosomal Recessive Cerebellar Ataxias

Autosomal Recessive Cerebellar Ataxias (ARCAs) are autosomal recessive inherited disorders with an early onset typically occurring before the age of 20. ARCAs are characterized by degeneration or abnormal development of the cerebellum and spinal cord (Palau & Espinos 2006). Although there is not a unique classification for ARCAs, they can be divided into three categories based on their neuropathy characteristics: 1) cerebellar ataxias with predominant sensory neuronopathy (Table 1.2); 2) with sensorimotor axonal neuropathy (Table 1.3); and 3) without sensory neuropathy (Table 1.4) (Kuo 2019).

Disease	Gene mutated	Age of Onset	References
Friedreich ataxia	<i>FXN</i>	Childhood – 30s	(Chamberlain et al 1988)
SANDO ^a	<i>POLG</i>	20-60s	(Van Goethem et al 2003)

Table 1.2. Common causes of cerebellar ataxia with predominant sensory neuropathy. ^aSANDO stands for Sensory ataxic neuropathy, dysarthria, and ophthalmoparesis.

The most common recessive ataxia is Friedreich ataxia (FRDA) occurring in approximately 1 in 50.000 individuals. It is characterized by progressive gait and limb ataxia with limb muscle weakness, absence of lower limb reflexes, dysarthria, and decreased vibratory sense and proprioception (Delatycki et al 2000). FRDA is caused by a GAA trinucleotide repeat expansion in intron 1 of the Frataxin gene (*FXN*) (~98% of cases) or by point mutations (~2% of cases), leading to a reduction of FXN levels (Delatycki et al 1999, Lodi et al 1999).

Disease	Gene mutated	Age of Onset	References
A-T ^a	<i>ATM</i>	<5 years	(Gatti et al 1988)
AOA1 ^b	<i>APTX</i>	<20 years	(Date et al 2001, Moreira et al 2001)
AOA2 ^c	<i>SETX</i>	Childhood-30s	(Moreira et al 2004)
CTX ^d	<i>CYP27</i>	Childhood	(Cali et al 1991)

Table 1.3. Common causes of cerebellar ataxia with sensorimotor axonal neuropathy. ^aAOA1 stands for Ataxia with oculomotor apraxia type 1. ^bAOA2 stands for Ataxia with oculomotor apraxia type 2. ^cCTX stands for Cerebrotendinous xanthomatosis

Disease	Gene mutated	Age of Onset	References
ARCA1/SCAR8 ^a	<i>SYNE1</i>	20-30s	(Gros-Louis et al 2007)
ARCA2/SCAR9 ^b	<i>ADCK3</i>	Childhood	(Lagier-Tourenne et al 2008, Mollet et al 2008)
NPC ^c	<i>NPC1</i> and <i>NPC2</i>	20-30s	(Carstea et al 1997, Naureckiene et al 2000)

Table 1.4. Common causes of cerebellar ataxia without sensory neuropathy. ^aARCA1 stands for Autosomal recessive cerebellar ataxia type 1; SCAR8 stands for Spinocerebellar ataxia autosomal recessive type 8. ^bARCA2 stands for Autosomal recessive cerebellar ataxia type 2; SCAR9 stands for Spinocerebellar ataxia autosomal recessive type 9. ^cNPC stands for Niemann-Pick disease type C.

1.5.1 Ataxia Telangiectasia

Ataxia-telangiectasia (A-T) is an autosomal recessive disorder with childhood onset. A-T patients show severe cerebellar atrophy manifesting as ataxia when the child starts to walk and symptoms generally plateau at 2 to 5 years of age

(Chun & Gatti 2004). Other movement symptoms are hypotonia, dystonia, myoclonus, choreoathetosis, tremor, and Parkinsonism (Boder & Sedgwick 1958, Meneret et al 2014, Nissenkorn & Ben-Zeev 2015, Perlman et al 2012, Shaikh et al 2013). A-T patients show systemic and neurological features like dilatation of blood vessels (telangiectasia), oculomotor apraxia (Nissenkorn & Ben-Zeev 2015), dysarthria (Lohmann et al 2015), axonal sensorimotor neuropathy (Woods & Taylor 1992), immune defects (Carbonari et al 1990), predisposition to malignancies (Bigbee et al 1989), and hypersensitivity to radiotherapy. Patients also show endocrine abnormalities including growth retardation, gonadal atrophy, delayed pubertal development and insulin resistant diabetes (Nissenkorn et al 2016). In 1972, it was shown that the levels of alpha-fetoprotein (AFP), which probably originate from the liver (Ishiguro et al 1986), were elevated in A-T patients' blood (Waldmann & McIntire 1972) and increasing over time (Stray-Pedersen et al 2007). AFP blood levels can be used to follow the progression of the disease (Rothblum-Oviatt et al 2016).

1.5.2 Ataxia Telangiectasia mutated

The genetic cause of A-T are loss-of-function-mutations in the Ataxia Telangiectasia Mutated gene (*ATM*) (Gatti et al 1988, Savitsky et al 1995). ATM protein is a 370 kDa Serine/Threonine kinase with the kinase domain located at the C-terminus, exhibiting homology to the phosphatidylinositol3 (PI3) family of lipid kinases (PI3Ks). In contrast to the other PI3K-like protein kinases (PIKKs), ATM does not phosphorylate phosphatidylinositol (Jung et al 1997). Several enzymes involved in DNA damage response (DDR) are part of the PIKKs family: ATM, ataxia-telangiectasia and Rad3-related (ATR), and DNA-dependent protein kinase catalytic subunit (DNA-PKcs). These three factors are associated directly with DNA-damaged regions. Members of this family also include the mammalian target of rapamycin (mTor) protein kinase, the suppressor of morphogenesis in genitalia 1 (SMG1), and the kinase-dead adaptor protein TRRAP (transformation/transcription domain-associated protein) (Abraham 2004) (Figure 1.9).

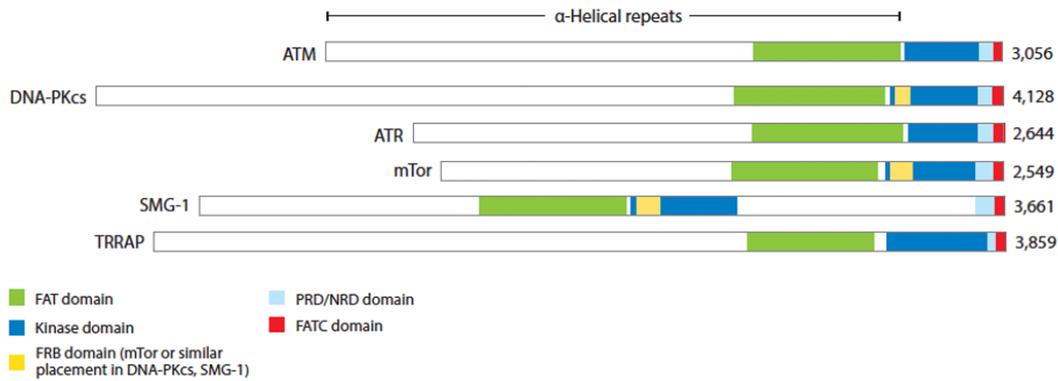


Figure 1.9. PIKK enzymes. Numerals refer to amino acids. Green represents the FAT domain (FRAP-ATM-TRAP transformation/transcription domain-associated protein); blue, the kinase domain; yellow, insertions in kinase domain (FKBP12/rapamycin-binding (FRB) in mTor; unknown function in DNA-PKcs and SMG-1); and red the FATC (FAT C-terminal) domain. Light blue represents the sequence between the kinase domain and the FATC domain, also known as the PIKK regulatory domain (PRD) or the negative regulatory domain (NRD) (Paull 2015).

The FRAP-ATM-TRRAP domain (FAT) and the FAT C-terminal (FATC) are closely intertwined with the Kinase domain (KD). Mutations in these domains are associated with effects on the catalytic activity of the kinase (Awasthi et al 2015). This FAT-KD-FATC structure is exclusive to the PIKKs family, while the FAT and FATC domains haven't been identified in other protein families (Baretic et al 2019).

Two general attributes are shared between PI3K enzymes and the PIKKs family. First, the PI3K enzymes in resting state are strongly and redundantly autoinhibited. In absence of stimulus, they are inactive and located in the cytoplasm. Second, PI3K enzymes require re-localization for their full activation. Similarly, ATM is found in an inactive resting state but can be rapidly activated and re-located to DNA damage sites (Blackford & Jackson 2017, Paull 2015).

1.5.3 ATM in DNA damage response and oxidative stress

Damage to DNA caused by endogenous or exogenous agents such as ionizing radiation (IR), ultraviolet radiation (UVR), pathogens, reactive oxygen species (ROS), and others can lead to alterations of the genetic code (Burger et al 2019a). DNA double-strand breaks (DSBs) are one of the most cytotoxic lesions, which impair DNA replication, impair RNA synthesis, and can lead to cell death (Jackson & Bartek 2009). Two major types of repair pathways have evolved in

order to maintain genome stability: homologous recombination (HR) (Her & Bunting 2018) and non-homologous end joining (NHEJ) (Hnizda & Blundell 2019). ATM is involved in DNA damage response (DDR), together with ATR and DNA-PK, being necessary to initiate a cascade of kinase-dependent phosphorylation in the DSB signaling (Burger et al 2019a, Paull 2015).

ATM is generally found in the nuclei in the form of a noncovalent inactive homodimer (Bakkenist & Kastan 2003). In case of DNA damage, ATM can quickly convert to its monomeric active form and phosphorylate a large number of substrates involved in cell-cycle checkpoints, DNA repair, and other cellular processes (Bensimon et al 2010, Matsuoka et al 2007). Autophosphorylation of ATM was one of the first steps described together with monomerization and activation in response to DNA damage (Bakkenist & Kastan 2003). To date, several autophosphorylation sites in ATM have been identified and their role in optimal ATM-mediated response demonstrated (Bensimon et al 2010, Graham et al 2017). The highly conserved MRN complex (Mre11, Rad50 and Nbs1), which plays a key role in DSB repair, can also activate ATM in response to DNA damage recruiting it to the affected site (Lee & Paull 2005). Moreover, activated ATM has been shown to localize at the DSBs in a protein complex with FOXO3a and KAT5/Tip60. This complex relies on MRN complex for proper substrate recognition (Adamowicz et al 2016). Other factors such as Mdc1 have been identified as necessary for the localization of ATM to the DNA damage site, a key event for its activation (Lou et al 2006). Therefore, the activation of ATM seems to be crucial in maintaining genomic stability and depends on the interaction with other complexes (Her & Bunting 2018, Jackson & Bartek 2009, Paull 2015). Interestingly, ATM was found to localize mainly in the cytoplasm of postmitotic neurons, PN, and SH-SY5Y cells (Barlow et al 2000, Boehrs et al 2007, Oka & Takashima 1998). Fractions of ATM were also found to associate with organelles and proteins involved in vesicle trafficking (Lim et al 1998). Therefore, it is accepted that ATM has separate functions between the nuclei and the cytoplasm, and it has been shown to be via genetically separable pathways (Lee et al 2018). The respiratory chain in the mitochondria is responsible to produce the majority of ROS. In addition to causing DNA damage, ROS can also damage lipids and proteins. Studies in A-T patients' fibroblasts demonstrate their higher sensitivity

to oxidative damage caused by hydrogen peroxide than normal cells (Ward et al 1994, Yi et al 1990). Several tissues from *Atm*^{-/-} were also found to suffer from oxidative damage (Barlow et al 1999). Guo and colleagues showed for the first time how hydrogen peroxide and oxidant agents directly activate ATM in absence of DNA DSBs and the MRN complex (Guo et al 2010). They also showed how mutations in the cysteine 2991 at the FATC domain impaired ATM response to oxidative stress, but not its response to DSBs (Guo et al 2010). Therefore, ATM can be dually activated either for oxidative stress or DNA damage response. Recent experimental results managed to delineate which activities of ATM are specific to its activation by oxidation, or to DNA damage related functions (Lee et al 2018). The platelet-derived growth factor receptor β (PDGFRB) has been implicated in a neuronal survival-signaling pathway linking ATM to the transcription factor ATBF1 during of oxidative stress (Kim et al 2010). Inhibitors of PDGFRB suppressed the activation of ATM under oxidative stress but did not alter ATM activation by X-ray irradiation (Kim et al 2010). Based on their results, the authors suggested ATM has a role in autophagy in protection of neurons and elimination of damaged organelles (Kim et al 2010).

1.5.4 Implication of ATM in mTOR pathway, insulin resistance, and autophagy

The mTOR Serine/Threonine kinase is also a member of the PIKK family as ATM, and it has been implicated in cellular growth. Environmental stresses such as hypoxia, DNA damage, and nutrient availability, can affect cellular growth and viability (Reiling & Sabatini 2006, Wullschleger et al 2006). The mTOR complex 1 (mTORC1) activity inhibits autophagy; a process necessary to eliminate damaged organelles and recover nutrients. In response to oxidative stress, ATM has been indirectly implicated in down-regulation of mTORC1 activity. ATM activates TSC2 (tuberous sclerosis2) tumor suppressor in the cytoplasm in response to elevated ROS and repress mTORC1 to induce autophagy (Alexander et al 2010). Under hypoxic conditions, ATM also seems to inhibit mTORC1 activity indirectly. REDD1 (regulated in development and DNA-damage response 1) protein is a negative regulator of mTORC1 (Cam et al 2010) under the transcription factor HIF-1 α . Under hypoxic conditions, HIF-1 α dimerizes with HIF- β and translocates

to the nucleus to induce the expression of hypoxia-inducible genes, including *REDD1* (Majmundar et al 2010). ATM is activated under hypoxic conditions (Bencokova et al 2009) in a DNA-damage independent manner. Hypoxia-activated ATM stabilizes HIF-1 α via phosphorylation (Cam et al 2010). On the contrary, ATM deficient cells showed a significantly impaired translocation of HIF-1 α to the nucleus and reduced *REDD1* transcript levels (Cam et al 2010).

A-T patients have an increased risk of developing insulin resistance and diabetes type 2 (Nissenkorn et al 2016). ATM has been shown to participate in insulin signaling through phosphorylation of 4E-BP1 (eIF-4E-binding protein 1) (Yang & Kastan 2000). Cells lacking ATM kinase activity exhibit a significant down-regulation of the insulin-induced dissociation of 4E-BP1 from eIF-4E, a critical step during response to insulin (Yang & Kastan 2000). Moreover, studies in muscle cells demonstrate the ATM mediated activation of Akt and regulation of the GLUT4 (glucose transporter 4) translocation during insulin signaling (Halaby et al 2008). Muscle cells from insulin resistant rats had reduced ATM levels and decreased AKT phosphorylation in comparison to WT (Halaby et al 2008). Further experiments with mouse embryonic fibroblast (MEF) *Atm*^{-/-} and WT confirmed the role of ATM in activating Akt (Halaby et al 2008). The translocation of GLUT4 to the cell surface was markedly inhibited in transfected cells with kinase-dead ATM (Halaby et al 2008).

Autophagy is a regulated mechanism through which the cell can degrade and recycle unnecessary or damaged components/organelles (Klionsky 2008, Kobayashi 2015). Basal levels of autophagy are necessary to maintain cell homeostasis under normal conditions (Anding & Baehrecke 2017). It is also an important process during of cellular stress such as starvation (Wei et al 2015), hypoxia (Choi et al 2016), oxidative stress (Alexander et al 2010, Tripathi et al 2013), and others. Since ATM can be activated to respond to the previous mentioned stimuli, it is not surprising that ATM plays a role in autophagy (Alexander et al 2010, Liu et al 2013, Mahemuti et al 2018). Although autophagy has been considered as non-selective process, increasing number of studies have pointed to a more selective type (Rogov et al 2014). Selective autophagy can degrade specific cellular components into membrane vesicles even under nutrient-rich conditions in a selective manner (Rogov et al 2014). Several

selective autophagy receptors such as SQSTM1 (sequestosome1, also known as p62), linking the cargo to the autophagic machinery, have been characterized (Johansen & Lamark 2011) (Figure 1.10).

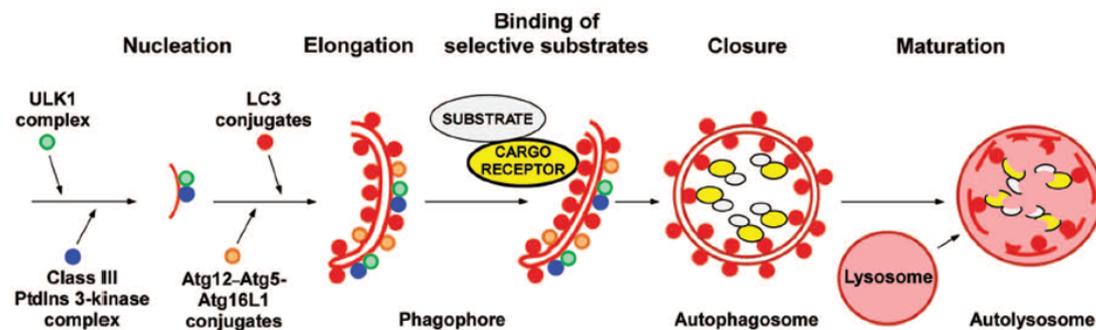


Figure 1.10. Model for selective autophagy in mammalian cells. Briefly, selective autophagy depends on binding of substrates to the inner surface of the growing phagophore, and this can be achieved by cargo receptors associated to both substrate and with ATG8 family proteins anchored to the phagophore. Closure results in the formation of a double-membrane autophagosome. The maturation step (fusion with lysosome) is required for the formation of the autolysosomes where the substrates are degraded (Johansen & Lamark 2011).

Selective autophagy can be classified into multiple categories depending on the location in which it occurs: mitophagy (monitoring the quantity and quality of mitochondria; further discussed), pexophagy (selective removal/degradation of excess and damaged peroxisomes), lipophagy (related to lipid metabolism), lysophagy (Figure 1.11), and others (Klionsky et al 2016).

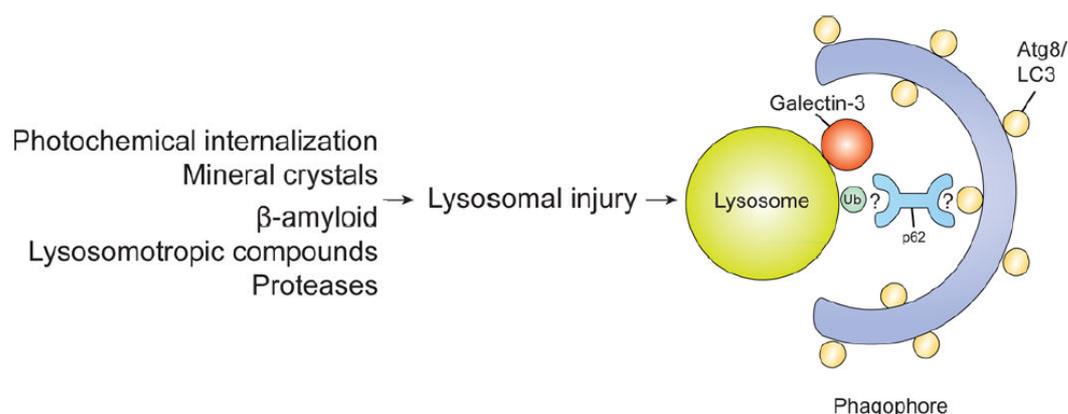


Figure 1.11. Model of lysophagy in mammalian cells. Lysophagy can be induced by a variety of stimuli that can lead to lysosome damage. Upon injury, lysosomal membranes are ubiquitinated and co-localize with p62. The exact mechanisms of lysophagy regulation are still unclear (Anding & Baehrecke 2017).

ATM was found to localize in the peroxisomes when activated by ROS (Watters et al 1999, Zhang et al 2015). Peroxisomes are organelles that can be degraded via proteases, autolysis, or pexophagy (selective removal) (Zhang et al 2015). In front of ROS, ATM is activated and phosphorylates the peroxisomal import receptor protein PEX5. Ubiquitination of PEX5 by SQSTM1 is the next step to signal for degradation (Zhang et al 2015). Therefore, ATM plays an important role in pexophagy, however more research in the exact mechanisms is needed.

1.5.5 Mitochondrial functions and mitophagy regulation by ATM

Mitochondria are double-membrane organelles found in eukaryotic organisms. They are responsible for generating most of the cell energy in form of ATP (adenosine triphosphate) through the electron transport chain/oxidative phosphorylation system (ETC/OXPHOS system) (Henze & Martin 2003). This process seems to be inefficient and can generate endogenous ROS. Moreover, mitochondrial dysfunction leads to an excessive production of ROS and is believed to contribute to diseases such as diabetes, many progressive neurodegenerative disorders, and cancer (de Moura et al 2010).

Based on data from ATM-deficient cells and *Atm*^{-/-} mice, mitochondrial functions were found to be abnormal and the mitochondria-specific superoxide dismutase (MnSOD) was elevated (Kamsler et al 2001). Mitochondrial respiration was also reported to be abnormal in *Atm*^{-/-} mice, pointing to an overall diminished mitochondrial respiratory activity in A-T and implicating ATM in the regulation of mitochondrial function (Ambrose et al 2007, Blignaut et al 2019, Stern et al 2002). Recent work from Zhang *et al* demonstrates ATM activation by mitochondria-derived hydrogen peroxide via dimerization, and ATM relocalization to the nuclei in HeLa cells (Zhang et al 2018). The authors also suggest that mitochondrial dysfunction and oxidative stress in A-T are due to the loss-of-function mutations in *ATM* linked to the loss of the redox-sensing function of ATM (Zhang et al 2018).

ATM has also been implicated in mitochondrial homeostasis by negatively regulating mitophagy (Valentin-Vega & Kastan 2012). Analysis of thymocytes from *Atm*^{-/-} mice revealed altered mitochondrial homeostasis as a result of abnormal mitophagy engagement (Valentin-Vega & Kastan 2012). Additionally,

spermidine treatment (a polyamine) induced ATM-dependent mitophagy via PINK1/Parkin pathway in human fibroblasts (Qi et al 2016). The formation of mitophagosomes and mitolysosomes were blocked by the ATM kinase inhibitor KU55933 (Qi et al 2016). Lead (Plumbum) toxicity was also reported to induce mitophagy on an ATM-dependent manner via PINK1/Parkin pathway (Gu et al 2018). Although ATM seemingly has a role in mitophagy, the exact mechanisms need further research.

1.5.6 ATM and synaptic function

Neurons show significant amounts of ATM in their cytoplasm rather than in the nuclei, as is typical in other cell types. Moreover, ATM was found to associate with organelles and proteins involved in vesicle trafficking (Barlow et al 2000, Lim et al 1998, Oka & Takashima 1998, Watters et al 1999). Using primary neuronal cultures from *Atm*^{-/-} mice, biochemical and physical relationships were demonstrated among ATM, ATR, VAMP2 (synaptobrevin) and synapsin-I, coupled with defects in LTP and spontaneous dye release (Li et al 2009). This association of ATM with synaptic function pointed to a new explanation for the neurological symptoms in A-T, where neurons seem to be subjected to synaptic dystrophy on top of cellular loss (Li et al 2009). Follow up work on ATM and ATR role in synaptic function showed a complementary role for these two kinases in maintaining the excitatory/inhibitory balance in the nervous system (Cheng et al 2018). Superresolution microscopy and coimmunoprecipitation experiments showed an exclusive association of ATM with excitatory (VGLUT1 positive) vesicles while ATR associated only with inhibitory (VGAT positive) vesicles suggesting a role in maintaining the excitatory/inhibitory (E/I) balance. Levels of ATM and ATR were also found to respond to each other meaning that when ATM is deficient, ATR levels rise (Cheng et al 2018). Epilepsy, anxiety disorders, and memory impairment have been linked to E/I imbalance and neuronal network dysfunction (Bateup et al 2013, Foerster et al 2013, Rudenko et al 2015). Cheng *et al* propose a model where both proteins have an important function in synaptic vesicle trafficking and potentially in vesicle endocytosis (Figure 1.12). ATM and ATR complementary roles may provide new neurological insights into A-T and perhaps other neurodegenerative diseases (Shen et al 2016).

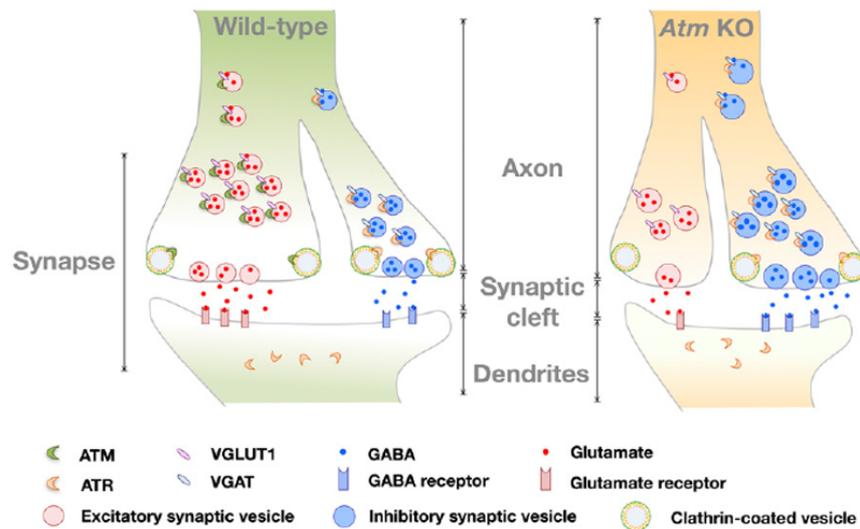


Figure 1.12. Diagram of the vesicle trafficking model of WT and *Atm*-KO synapses. This model proposes that in synapses, ATM protein localizes predominately in presynaptic terminals, while ATR localizes on both sides of the synapse. ATM binds exclusively to VGLUT1⁺ vesicles, while ATR localizes only to VGAT⁺ vesicles. Compared with WT, *Atm*-KO (*Atm* ^{-/-}) neurons show decreased E/I balance, impaired clathrin-mediated synaptic vesicle endocytosis, increased ATR protein levels, and larger vesicle size (Cheng et al 2018).

1.5.7 Mouse models for A-T

Three mouse models for A-T were generated in 1996 following different strategies to cause loss-of-function. All showed growth retardation, infertility, T-cell maturation defects, and sensitivity to gamma irradiation (Barlow et al 1996, Elson et al 1996, Xu & Baltimore 1996).

Further characterization of the A-T mouse model generated by Barlow and colleagues (Barlow et al 1996) showed oxidative damage in several target organs (Barlow et al 1999) and the requirement of ATM to prevent lysosomal accumulation in the mouse brain (Barlow et al 2000). Defects in calcium spikes and calcium currents were also detected in PN of this ATM-deficient mouse model (Chiesa et al 2000). No gross behavioural abnormalities were detected in this mouse model, nor loss of PN at histological level, probably due to thymic lymphomas limiting the life span of these mice to 4-6 months. In order to detect neuronal loss in the cerebellum, the life span of these animals had to be extended by bone marrow transplantation (Pietzner et al 2013).

Many more studies using these A-T mouse models have helped to define the function of ATM but still there isn't a therapeutic strategy to resolve or ameliorate the neurological symptoms of A-T patients.

1.6 Aim of the thesis

Despite all the efforts to elucidate the pathomechanisms implicated in ataxia there is still no cure or therapy to palliate the symptoms and improve the life standards of the patients. Therefore further research has to be done in the field.

In the framework of this thesis two different inherited ataxias have been analyzed: the autosomal dominantly inherited spinocerebellar ataxia type 2 and the autosomal recessively inherited ataxia telangiectasia.

The first aim of the thesis was to characterize the newly generated mouse model *Atxn2*-CAG100-KIN to determine its usefulness in the SCA2 research field and application in other neurodegenerative disorders such as ALS where ATXN2 has been implicated. Further questions rose during the characterization of this mouse model such as:

- How is the spinal cord pathology observed in the *Atxn2*-CAG100-KIN animals characterized?
- Does this pathology implicate the ALS linked protein TDP43 and other RBP?

Based on the strategy followed to generate this mouse model, conserving the exon-intron structure and intact murine promoter, the expanded ATXN2 preserves its native expression regulation. Thus, this model will allow understanding the implication of other non-neuronal cell types in the pathology. Moreover, neuroinflammation has been long implicated in several neurodegenerative disorders and more recently TDP43 depletion has been shown to alter microglia phagocytic functions. Therefore we aimed to answer the following questions:

- Are other non-neuronal cell types such as microglia and astrocytes implicated in the pathology seen in the *Atxn2*-CAG100-KIN mice?
- Could manipulating glia response help ameliorate the symptomatology?

After characterizing similar affection of the cerebellum and the spinal cord and following the generation of the transcriptome data sets, we aimed to define common and early affected pathways.

- Cholesterol metabolism alteration was identified as an early and common event. How are these alterations characterized at transcript level?
- Could the altered factors become reliable biomarkers for the progression of the disease?

The second part of this work was focused on a recessive form of ataxia, Ataxia Telangiectasia. In collaboration with Prof. Dr. Ralf Schubert's Lab, the second aim of this thesis was to analyze and gain deeper insight in the cerebellar pathology of A-T using proteomics data generated from patients' CSF and the cerebellar tissue from the *Atm*^{-/-} mouse model. We aimed to:

- Define novel biomarkers, which would allow following the neurodegeneration in extracellular fluid.
- Using the *Atm*^{-/-} mouse model, we further validate the results obtained in the patients' CSF proteome data in order to define altered pathways before the ataxic symptoms appear.

One general characteristic observed in A-T murine models is the short life span due to lymphomas, so they die before showing any behaviour alteration. Therefore, the cerebellar degeneration has not being studied in depth. Using bone marrow transplantation surgery, the life span of *Atm*^{-/-} animals could be extended and a transcriptomics data set was generated from 12-month-old cerebellar samples. Based on the data obtained the following questions rose:

- Which other known ataxia genes are implicated in the cerebellar degeneration based on the transcript evaluation?
- Which pathways are also altered in young pre-ataxic *Atm*^{-/-} animals?
- Could we define further blood biomarkers correlating with the neurologic affection observed in A-T patients?

2 MATERIALS AND METHODS

2.1 Animals

2.1.1 Housing and breeding

Atxn2-CAG100-Knock-in (*Atxn2*-CAG100-KIN), *Atxn2*-Knock-out (*Atxn2*-KO) and *Atm*-Knock-out (*Atm* -/-) animals were housed at the Central Animal Facility (ZFE) of the Goethe University Medical School, Frankfurt am Main Germany, a FELASA-certified facility. They were kept in individually ventilated cages in a 12-hour light / 12-hour dark cycle under routine health monitoring and fed *ad libitum*. The cages were supplemented with bedding and paper chipping and were cleaned weekly. Breeding took place in heterozygous matings for both lines. All procedures were in accordance with the German Animal Welfare Act, the Council Directive of 24th November 1986 (86/609/EWG), Annex II and the ETS123 (European Convention for the Protection of Vertebrate Animals).

2.1.2 Genotyping – DNA extraction and PCR

Ear punches were taken when the pups were between 10 and 12 days old, collected in 1.5mL tubes and immediately processed or frozen at -20°C. A tail sample was also collected after each dissection in order to verify the genotype. For the DNA extraction, 500 µL of Proteinase K buffer (10 mM Tris-HCl, 100 mM NaCl, 10 mM EDTA, 0.5% SDS, pH8.0) mixed with 25 µL of Proteinase K were used per sample and incubated at 55°C in a thermoshaker at 450 rpm overnight to ensure the digestion of the tissue. Next day, 250 µL of 6M NaCl were added to the samples to remove the proteins bound to the DNA, incubated on ice for 10 min and centrifuged at 5000 rpm for 10 min. 500 µL of the supernatant was transferred to a fresh 1.5 mL tube and the DNA was precipitated adding 1 mL of 100% ethanol (EtOH). In order to improve the precipitation, the samples were incubated at -80°C for 10 min before centrifuging at maximum speed for 10 min at room temperature (RT). The pellet was then washed with 1 mL of 70% EtOH,

centrifuged at 8000 rpm for 5 min, dried at RT for no more than 5 min and resuspended in 200 μ L of DNase/RNase free water.

For the *Atxn2*-CAG100-KIN mouse line, the polymerase TAKARA La Taq® was used to amplify the flanking region of the Neo-excised *Atxn2* locus that still contains a FRT (flippase recognition target) and a loxP (locus of X-over P1) site in the mutant animals.

Reaction		Condition					
		Step	Temperature	Time	Cycles		
10x LA Buffer	2.5 μ L	}	Initial denat.	94°C	3 min	1	
dNTPs (2.5 mM)	1 μ L each		Denaturation	94 °C	30 sec	35	
Primers	0.1 μ L		Annealing	68°C	30 sec		
LA Taq	0.25 μ L		Elongation	68°C	50 sec		
DNA	20-50 ng		}	Final elongation	68°C	7 min	1
Final volume	25 μ L						

Table 2.1. PCR conditions for La Taq® used to genotype the *Atxn2*-CAG100-KIN mouse line.

Name	Sequence	Genotype	Product size
Primer K	TGAGTTGACTCCACAGGGAGGTGAGC	WT	793 bp
Primer H	CCATCTCGCCAGCCCGTAAGATTC	KIN	984 bp

Table 2.2. Sequence of the primers used to genotype the *Atxn2*-CAG100-KIN mouse line.

To genotype the *Atxn2*-KO line, the Ampli-Taq-DNA Polymerase was used together with pink juice (2 mM Cresol, 12.5% 10x PE buffer, 2 mM dNTPs, 15% Sucrose), primers (*Atxn2* F2, *Atxn2* R3 and *Atxn2* R4) and DNA as specified in the Table 2.3.

Reaction		Condition					
		Step	Temperature	Time	Cycles		
Pink juice	16 μ L	}	Initial denat.	95°C	3 min	1	
Primer	1 μ L each		Denaturation	94 °C	30 sec	35	
AmpliTaq	0.1 μ L		Annealing	57°C	30 sec		
DNA	20-50 ng		Elongation	72°C	50 sec		
Final volume	20 μ L		}	Final elongation	72°C	7 min	1

Table 2.3. PCR conditions for Ampli-Taq-DNA Polymerase used to genotype the *Atxn2*-KO mouse line.

Name	Gene position	Sequence	Genotype	Product size
Atxn2 F2	14381	CATGTGCCATAACCAGGGG		
Atxn2 R3	14854	GAACTGGGTGATGGGGTCTC	WT	474 bp
Atxn2 R4	18512	CAGGCCCAGAAGTGAAAGAC	KO	229 bp

Table 2.4. Sequence of the primers used to genotype the *Atxn2*-KO mouse line.

Genotyping of the *Atm* $-/-$ animals was performed by members of Prof. Dr. Ralf Schubert's laboratory.

2.1.3 Ageing and behavioral tests

After genotyping, the animals were aged in pairs of mutant and WT of the same sex in order to reduce variation. After reaching the desired age, they were tested in different behavioral tests; no distinction between males or females was done. All tests were done in a separated and ventilated room at the same animal facility.

2.1.3.1 Rotarod

To evaluate the motor performance a Rotarod (model 7650 Robert & Jones, Ugo Basile, Comerio) was used. Wild type and mutant animals aged in the same cage were evaluated together. During the acceleration of the rotarod from 4-40 rpm, every mouse had four consecutive 6 min trials interrupted by at least 10 min of break, without previous training. The latency to fall was recorded for each trial; the mean value of the four trails was calculated and used for statistical analysis.

2.1.3.2 Open field

Open field arena (Versamax, Omnitech, Columbus, Ohio) was used to record the spontaneous activity. The arena consists of a 20 cm by 20 cm with infrared beams at each side therefore; vertical and horizontal movements were recorded.

2.1.3.3 Paw print

Paw prints were evaluated by painting the forepaws and hind limbs with a non-toxic red and blue ink, respectively. The mice were placed at one end of a dark tunnel, so that their walk to the other end would leave paw prints on the white paper that covers the floor (tunnel 6cm high x 9cm wide x 40cm long).

2.1.3.4 Grip strength

Grip strength was assessed by measuring the peak force of the fore limbs in 10 trials per mouse on an electronic grip strength meter (TSE, Bad Homburg). The average of the 10 trials was used for further statistical analyzes using GraphPad Prism version 7.02.

2.1.4 Fresh tissue - sample collection

After the behavioral tests or at the predetermined age, animals were sacrificed via cervical dislocation and the brain was dissected together with other tissues. The cerebellum, remainder of the brain, spinal cord, liver, heart, and skeletal muscle were collected in 1,5 mL tubes, immediately snap frozen in liquid nitrogen and kept at -80°C until further use.

2.1.5 Material used in Animals section

2.1.5.1 Mouse models

Mouse model	Mutation	Background	Reference
<i>Atxn2</i> -Knock-out	Excision of <i>Atxn2</i> exon 1	C57BL/6j	Lastres-Becker et al., 2008
<i>Atxn2</i> -CAG100-Knock-in	Insertion of 100 CAG in the exon 1 of <i>Atxn2</i>	C57BL/6j	Sen, Canet-Pons, Halbach et al., 2019
<i>Atm</i> -Knock-out	Insertion of truncation mutation at gene position 5790	129SvEv	Barlow et al., 1996

Table 2.5. Mouse models used.

2.1.5.2 Chemicals and reagents used for DNA extraction and genotyping

Chemicals/Reagents	Cat. No.	Company
Agarose	A9539	Sigma-Aldrich
Ampli-Taq-DNA Polymerase	P/N1000204	AB
Cresol Red sodium salt	50100	Sigma-Aldrich
DNase/RNase free water	10977-035	Invitrogen
dNTP set 100 mM (dATP, dCTP, dGTP, dTTP)	R0181	Thermo Scientific
Ethidium bromide	2218.1	ROTH
Ethylenediamine tetraacetic acid (EDTA,	E5134-1KG	Sigma-Aldrich

C ₁₀ H ₁₆ N ₂ O ₈)		
Ethanol (C ₂ H ₆ OH)	32221-1L-M	Sigma-Aldrich
Proteinase K	25530-015	Life Technologies
SDS pellets	CN30.2	ROTH
Sodium Chloride (NaCl)	31434-1KG-M	Sigma-Aldrich
Sucrose (C ₁₂ H ₂₂ O ₁₁)	84100	Sigma-Aldrich
TAKARA La Taq®	RR002M	Takara
TrackIt™ 1Kb DNA Ladder	10488-072	Life Technologies
Trizma® base (C ₄ H ₁₁ NO ₃)	T1503-1KG	Sigma-Aldrich

Table 2.6. Chemicals and reagents used for DNA extraction and genotyping.

2.1.5.3 Instruments used for behavioral tests

Instrument	Company
Grip strength	TSE
Rotarod 7650	Ugo Basile
Versamax Animal Activity Monitoring System	Accuscan Instruments

Table 2.7. Instruments used for the behavioral tests performed.

2.2 RNA work

All RNA work was performed after cleaning the work area, pipets and other necessary instruments with RNaseZap wipes. All reagents used were RNase/DNase free.

2.2.1 RNA extraction and quantification

The RNA extraction was performed using the phenol-chloroform extraction protocol. A total of 50 – 100 mg of tissue were homogenized in 300 µL of TRI Reagent and 700 µL more were added to a final volume of 1 mL. Samples were incubated at RT for 5 min, 200 µL of chloroform were added and were vigorously shaken for 15 sec. To allow the phases to start separating, the samples were kept at RT for 10 min before centrifuging them at 12000 xG for 15 min in a cooled centrifuge at 4°C. Three phases could be identified: a lower red phase (phenol-chloroform, DNA), a white interphase (proteins) and a transparent aqueous upper phase containing the RNA. In order to precipitate the RNA, the first step was to transfer the aqueous phase into a fresh 1,5 mL tube where 500 µL of isopropanol were added. Samples were then mixed by inversion, incubated at RT for 10 min, and centrifuged at 12000 xG for 10 min at 4°C. Sometimes a

white pellet could be visualized corresponding to the precipitated RNA. The supernatant was then discarded and the RNA was washed with at least 1 mL of freshly prepared 75% EtOH, briefly vortex, and centrifuged at no more than 7500 xG for 5 min at 4°C. The supernatant was again discarded and the pellet dried at RT for maximum 10 min. RNA was re-dissolved in RNase free water by pipetting several times and incubated at 55°C for 10 min in order to ensure its complete dissolution.

In case of extracting RNA from cells, the pellet from a 6-well plate was re-suspended in 1 mL of TRI Reagent and the protocol was followed as described for tissue samples.

A total of 2 µL of RNA sample were used to determine its quantity and quality with the TECAN Spark. After that, the samples were used for RT-PCR or stored at -80°C.

2.2.2 Reverse transcription PCR

Reverse transcription polymerase chain reaction (RT-PCR) was performed using the SuperScript IV VIL0 Master Mix following the manufacturer's protocol. The samples were kept on ice all the time and were spun down after the addition of each reagent. For the reaction, 1 µg of RNA was used in a final volume of 8 µL with DNase/RNase free water; 2 µL of a mix 1 to 1 of ezDNase enzyme and 10x ezDNase buffer were mixed with the samples in order to degrade any residual DNA present. The samples were incubated at 37°C for 2 min in a thermocycler, moved to 4°C, and 10 µL of Vilo IV master mix diluted in water (2:3) were added. The final reaction was carried out in the same thermocycler and consisted of an annealing step (10 min at 25°C), reverse transcription step (10 min at 50°C), and enzyme inactivation step (5 min at 85°C). After that, the samples were moved to 4°C, 180 µL of RNase free water were added and the samples were kept at -80°C until used.

2.2.3 Quantitative-PCR and data analysis

In order to evaluate differences in gene expression, quantitative PCR (Q-PCR) was performed from 20 ng of cDNA in a 96-well optical plate with a StepOnePlus

Real-Time PCR system. Replicates from each sample were included per assay. The reaction mix per sample consisted of 10 ng of cDNA, 0.5 μ L 20 \times TaqMan gene expression assay, 5 μ L of 2 \times FastStart Universal Probe Master, and 2.5 μ L DNase/RNase-free water. The Q-PCR conditions were 50 $^{\circ}$ C 2 min, 95 $^{\circ}$ C 10 min, 40 x (95 $^{\circ}$ C 15 sec, 60 $^{\circ}$ C 1 min). The data obtained from the StepOnePlus machine was processed following the $2^{-\Delta\Delta Ct}$ method (Schmittgen & Livak 2008) and the statistical analysis and graphics were done with GraphPad Prism version 7.02. *Tbp* was used as housekeeping gene for murine samples and HPRT1 for human cell lines.

2.2.4 Transcriptomics – Clariom D microarray and data analysis

1 μ g of RNA was pre-treated with DNase amplification grade (Invitrogen) as recommended. The Gene ChipTM WT PLUS Reagent Kit (Appliedbiosystems) was used to generate single-stranded cDNA (ss-cDNA) following the manufacturer's instructions. The ss-cDNA was fragmented and labeled right before the hybridization to a Clariom D Array (Thermo Fisher). The arrays were scanned with the Affymetrix Gene Chip Scanner and the data was processed with the Transcriptome Analysis Console (TAC) 4.0.1 (Appliedbiosystems) using default algorithm parameters.

2.2.5 Material used for RNA work

2.2.5.1 Reagents used for RNA extraction, cDNA synthesis and Q-PCR

Reagents	Cat.No.	Company
Chloroform	A3633.0500	AppliChem
Ethanol (C ₂ H ₆ OH)	32221-1L-M	Sigma-Aldrich
FastStart Universal Probe Master (ROX)	04914058001	Roche
Isopropanol	P/7500/15	Fisher Chemical
SuperScript IV VILO Master Mix	11766050	Thermo Fisher
Tri Reagent	T-9424	Sigma-Aldrich
Water DNase/RNase free	10977-035	Invitrogen

Table 2.8. Reagents used for RNA extraction, cDNA synthesis and Q-PCR.

2.2.5.2 Materials and instruments used for RNA extraction and quantification

Material	Cat. No.	Company
Pellet pestles polypropylene	Z359947	Sigma-Aldrich
RNaseZap wipes	AM9786	Invitrogen
TECAN Spark		TECAN
Kontes™ Pellet Pestle™ Cordless Motor		Sigma-Aldrich

Table 2.9. Materials and instruments used for RNA extraction and quantification.

2.2.5.3 TaqMan® assays

Gene	Assay ID	Gene	Assay ID
<i>Aar2</i>	Mm00503287_m1	<i>Gsr</i>	Mm00439154_m1
<i>Abca1</i>	Mm00442646_m1	<i>Gss</i>	Mm00515065_m1
<i>Abcg1</i>	Mm00437390_m1	<i>Gstp1</i>	Mm04213618_gH
<i>Ahnak</i>	Mm00613028_m1	<i>Hmgcs1</i>	Mm01304569_m1
<i>Ahnak2</i>	Mm03015444_s1	<i>Hnrnpa1b2</i>	Mm01332941_m1
<i>Aif1</i>	Mm00479862_g1	<i>Hnrnpd</i>	Mm01201314_m1
<i>Als2</i>	Mm00511896_m1	<i>Hnrnpk</i>	Mm04409831_s1
<i>Anapc5</i>	Mm01194479_m1	<i>Hnrnpu</i>	Mm00469329_m1
<i>Anxa2</i>	Mm01150673_m1	<i>Homer2</i>	Mm01314936_m1
<i>Apob</i>	Mm01545150_m1	<i>Homer3</i>	Mm00803747_m1
<i>Apoc3</i>	Mm00445670_m1	<i>Hsd11b1</i>	Mm00476182_m1
<i>Apod</i>	Mm01342307_m1	<i>Ighm</i>	Mm01718955_g1
<i>Apoe</i>	Mm00437573_m1	<i>Inpp5a</i>	Mm00805812_m1
<i>Apoer2</i>	Mm00474030_m1	<i>Insig1</i>	Mm00463389_m1
<i>Apoh</i>	Mm00496516_m1	<i>Irak1</i>	Mm01193538_m1
<i>Apoj (Clu)</i>	Mm00442773_m1	<i>Irak4</i>	Mm00459443_m1
<i>App</i>	Mm01344172_m1	<i>Itpka</i>	Mm00525139_m1
<i>Atm</i>	Mm01177457_m1	<i>Itpr1</i>	Mm00439907_m1
<i>Atp2a2</i>	Mm01201431_m1	<i>Kcna1</i>	Mm00439977_s1
<i>Atp2b2</i>	Mm00437640_m1	<i>Lamp1</i>	Mm00495262_m1
<i>Atr</i>	Mm01223626_m1	<i>Lamp2</i>	Mm00495267_m1
<i>Atxn2</i>	Mm01199902_m1	<i>Lcat</i>	Mm01247340_m1
<i>Atxn2L</i>	Mm00805548_m1	<i>Ldlr</i>	Mm01177349_m1
<i>Blmh</i>	Mm00724434_m1	<i>Lrp1</i>	Mm00464608_m1
<i>C1qa</i>	Mm00432142_m1	<i>Lrp1b</i>	Mm00466712_m1
<i>C1qb</i>	Mm01179619_m1	<i>Lrp2</i>	Mm01328171_m1
<i>C1qc</i>	Mm00776126_m1	<i>Lrp6</i>	Mm00999795_m1
<i>C3</i>	Mm01232779_m1	<i>Lrp8</i>	Mm00474030_m1
<i>Cacna1a</i>	Mm00432190_m1	<i>Lrp8 (exon 19)</i>	Mm01257937_m1
<i>Cadps2</i>	Mm00462577_m1	<i>Lsm1</i>	Mm01600253_m1
<i>Calb1</i>	Mm04886647_m1	<i>Lyn</i>	Mm01217488_m1
<i>Calm1</i>	Mm01336281_g1	<i>M6pr</i>	Mm04208409_gH
<i>Camk2a</i>	Mm00437967_m1	<i>M6prbp1</i>	Mm00482206_m1

<i>Car15</i>	Mm00472660_m1	<i>Msmo1</i>	Mm00499390_m1
<i>Car8</i>	Mm00801469_m1	<i>Mtcl1</i>	Mm01226260_m1
<i>Casp3</i>	Mm01195085_m1	<i>Npc1</i>	Mm00435300_m1
<i>Cbln1</i>	Mm01247194_g1	<i>Npc2</i>	Mm00499230_m1
<i>Cbln2</i>	Mm01261557_g1	<i>Nr1h2 (LXRβ)</i>	Mm00437262_m1
<i>Cbln3</i>	Mm00490772_g1	<i>Nr1h3 (LXRα)</i>	Mm00443451_m1
<i>Cbln4</i>	Mm00558663_m1	<i>Nr4a1</i>	Mm00439358_m1
<i>Cdr1</i>	Mm04178856_s1	<i>Nr4a2</i>	Mm00443060_m1
<i>Celf3</i>	Mm00549809_m1	<i>Nr4a3</i>	Mm00450074_m1
<i>Cirbp</i>	Mm00483336_g1	<i>Pabpc1</i>	Mm00849569_s1
<i>Cntn2</i>	Mm00516138_m1	<i>Pafah1b1</i>	Mm00443070_m1
<i>Cyba</i>	Mm00514478_m1	<i>Pafah1b2</i>	Mm00476594_m1
<i>Cybb</i>	Mm01287743_m1	<i>Pafah1b3</i>	Mm01177179_m1
<i>Cyp46a1</i>	Mm00487306_m1	<i>Pcbp1</i>	Mm00478712_s1
<i>Cyp51</i>	Mm00490968_m1	<i>Pcbp2</i>	Mm01296174_g1
<i>Dab1</i>	Mm00438366_m1	<i>Pcbp3</i>	Mm01149750_m1
<i>Dab2</i>	Mm01307290_m1	<i>Pcbp4</i>	Mm00451991_g1
<i>Dag1</i>	Mm00802400_m1	<i>Pms2</i>	Mm01200871_m1
<i>Dcp1a</i>	Mm00460131_m1	<i>Por</i>	Mm01208218_m1
<i>Dcp1b</i>	Mm01183995_m1	<i>Ppp1cb</i>	Mm01209998_m1
<i>Dcp2</i>	Mm01264061_m1	<i>Ppp1r17</i>	Mm00495458_m1
<i>Dcps</i>	Mm00510029_m1	<i>Prkcg</i>	Mm00440861_m1
<i>Ddx1</i>	Mm00506205_m1	<i>Prpf19</i>	Mm01208295_m1
<i>Ddx26b</i>	Mm00555431_m1	<i>Ptbp1</i>	Mm01731480_gH
<i>Ddx6</i>	Mm00619326_m1	<i>Pten</i>	Mm00477208_m1
<i>Dhcr24</i>	Mm00519071_m1	<i>Puf60</i>	Mm00505017_m1
<i>Dhx15</i>	Mm00492113_m1	<i>Pura</i>	Mm01158049_s1
<i>Efemp1</i>	Mm01295779_m1	<i>Reelin</i>	Mm00465200_m1
<i>Eif2a</i>	Mm01289723_m1	<i>Ripk1</i>	Mm00436354_m1
<i>Eif3a</i>	Mm00468721_m1	<i>Rnaset2a/b</i>	Mm02601904_m1
<i>Eif4e</i>	Mm00725633_s1	<i>Rora</i>	Mm01173766_m1
<i>Eif5a2</i>	Mm00812570_g1	<i>Scg2</i>	Mm04207690_m1
<i>Eif5b</i>	Mm01227247_m1	<i>Sema7a</i>	Mm00441361_m1
<i>Eif6</i>	Mm00550245_m1	<i>Sf3a1</i>	Mm00470710_m1
<i>Ephb2</i>	Mm01181021_m1	<i>Sf3a2</i>	Mm00449720_m1
<i>Fan1</i>	Mm00625959_m1	<i>Sgk1</i>	Mm00441387_g1
<i>Fat2</i>	Mm01295779_m1	<i>Slc17a6</i>	Mm00499876_m1
<i>Fgf14</i>	Mm00438914_m1	<i>Slc17a7</i>	Mm00812886_m1
<i>Fgfr1</i>	Mm00438930_m1	<i>Slc1a6</i>	Mm01173279_m1
<i>Fmr1</i>	Mm01339582_m1	<i>Slc44a5</i>	Mm01317372_m1
<i>Fos</i>	Mm00487425_m1	<i>Smad2</i>	Mm00487530_m1
<i>Fyn</i>	Mm00433373_m1	<i>Smad3</i>	Mm00489637_m1
<i>Gfap</i>	Mm01253033_m1	<i>Src</i>	Mm00436783_m1
<i>Gpnmb</i>	Mm01328587_m1	<i>Srrm2</i>	Mm00613771_m1
<i>Grb2</i>	Mm03023989_g1	<i>Srsf1</i>	Mm01152449_g1
<i>Gria1</i>	Mm00433753_m1	<i>Srsf2</i>	Mm00448705_m1

<i>Gria2</i>	Mm00442822_m1	<i>Ssb</i>	Mm00447374_m1
<i>Gria3</i>	Mm00497506_m1	<i>Stat1</i>	Mm01257286_m1
<i>Gria4</i>	Mm00444754_m1	<i>Stxbp5l</i>	Mm00552492_m1
<i>Grid2</i>	Mm00515053_m1	<i>Syne1</i>	Mm04238399_m1
<i>Grik2 (Grm6)</i>	Mm00599860_m1	<i>Tacr1</i>	Mm00436892_m1
<i>Grin1</i>	Mm00433800_m1	<i>Tardbp</i>	Mm00523866_m1
<i>Grin2a</i>	Mm00433802_m1	<i>Tcfef</i>	Mm00448968_m1
<i>Grin2b</i>	Mm00433820_m1	<i>Tharp3</i>	Mm01181269_g1
<i>Grin2c</i>	Mm00439180_m1	<i>Tlr3</i>	Mm01207404_m1
<i>Grin3a</i>	Mm01341722_m1	<i>Tlr7</i>	Mm00446590_m1
<i>Grin3b</i>	Mm00504568_m1	<i>Tlr9</i>	Mm00446193_m1
<i>Grind2d</i>	Mm00433822_m1	<i>Tpr</i>	Mm00460177_m1
<i>Grm1</i>	Mm00810219_m1	<i>Trem2</i>	Mm00451744_m1
<i>Grm3</i>	Mm00725298_m1	<i>Tyrobp</i>	Mm00449152_m1
<i>Grm4</i>	Mm01306128_m1	<i>Tyw5</i>	Mm01254171_m1
<i>Grm5</i>	Mm00690332_m1	<i>U2af2</i>	Mm01330812_g2
<i>Grm7</i>	Mm01189424_m1	<i>Vamp1</i>	Mm01185107_g1
<i>Grm8</i>	Mm00433840_m1	<i>Vldlr</i>	Mm00443298_m1
<i>Grn</i>	Mm00433848_m1	<i>Ybx1</i>	Mm00850878_g1
<i>Gsk3b</i>	Mm00444911_m1	<i>Zic4</i>	Mm00657066_m1

Table 2.10. Taqman assays used with murine samples.

Gene	Assay ID
<i>AHNAK</i>	Hs01102463_m1

Table 2.11. Taqman assay used with human cell line samples.

2.3 Protein work

2.3.1 Protein extraction – RIPA and SDS fraction

Protein extraction from tissue was performed homogenizing each sample in approximately 5-10 v/v of RIPA buffer (50 mM Tris-HCl pH8, 150 mM NaCl, 1% NP-40, 0.5% Sodium Deoxycholate, 0.1% SDS, 2 mM EDTA, 1 tablet of Proteinase inhibitor per 10 mL) using a pellet pestle. Samples were then incubated for 30 min at 4°C in a tube rotator to ensure a complete membrane disruption and centrifuged at 14000 xG for 15 min using a cooled centrifuge at 4°C. The supernatant (RIPA fraction) was then transferred to a fresh tube and the pellet was then re-suspended in 100-250 µL of SDS lysis buffer (137 mM Tris-HCl pH6.8, 4% SDS, 20% Glycerol, 1 tablet of Proteinase inhibitor per 10 mL). At this point, samples were normally quite viscous due to the release of DNA from the nuclei. To avoid problems during further experiments, the samples were

sonicated three times for 10 sec. After quantification (see section below), they were stored at -80°C.

The procedure to extract protein from cell cultures was similar to the one described above. Cells were grown in 6-well plates; 1 mL of DPBS was used to detach them from the plate and they were transferred to a 1.5 mL tube. Samples were then centrifuged at 1000 xG for 5 min, the supernatant was aspirated, and the pellet was re-suspended in 100-150 µL of RIPA buffer. Samples were kept at 4°C rotating and were then centrifuged at 14000 xG for 15 min at 4°C; the supernatant was transferred to a fresh tube. After quantification, the samples were stored at -80°C.

2.3.2 Protein Quantification

After the protein extractions, samples were quantified using the Pierce BCA Assay Kit. In a 96 well flat bottom plate, 150 µL of 0.9% NaCl were pipetted per well, 3 µL from each sample or standard curve and 150 µL BCA-mix (1:8 ratio of reagent A and B) were added. The plate was then incubated at 37°C for 30-45 min and the absorption at 560 nm was measured with the TECAN reader. The results were then compared to the standard curve and the final quantification was extrapolated.

2.3.3 SDS-PAGE

SDS-PAGE (sodium dodecyl sulphate-polyacrylamide gel electrophoresis) was used to separate the extracted proteins by size. 20 µg of total protein were mixed with 2x loading buffer (250 mM Tris-HCl pH6.9, 20% Glycerol, 4% SDS, 10% Mercaptoethanol, 0.01% Bromophenolblue, 5% MilliQ water), boiled at 90°C for 5 min and loaded onto the gel. Each gel contained two parts, an upper stacking gel (12.92% Acrylamide/Bisacrylamide-30%, 24.8% 0.5M Tris-HCl pH6.9, 0.99% SDS-10%, 0.5% APS-10%, 0.1% TEMED) and a lower running gel (27.6%-50% Acrylamide/Bisacrylamide-30%, 25% 1.5M Tris-HCl pH8.9, 1% SDS-10%, 0.33% APS-10%, 0.07% TEMED). The percentage of AA/BA depends on the size of your protein of interest, higher percentage of AA/BA resolves smaller proteins and

vice versa. The gels ran at 100 V for 15 min until the samples entered the running gel, and then at 120 V for another 50-60 min.

2.3.4 Western blot

Once proteins were separated by size, they were transferred to a 0.2 μm nitrocellulose membrane using a wet blot system in order to make them accessible to antibody detection. Each stack was composed of two sponges, 4 Whatman papers, the gel, and the membrane. The transfer was run at 50 V for 90 min, or at 20 V overnight at 4°C for bigger proteins. Membranes were blocked in 5% BSA in TBS-T buffer (20 mM Tris-HCl pH7.5, 150mM NaCl, 0.1% Tween20) for at least one hour at RT and incubated overnight with the primary antibody at 4°C. The next day, membranes were washed three times for 5 min each with TBS-T and incubated with the corresponding fluorescent-labeled secondary antibody for one hour at room temperature protected from the light. Membranes were washed again 3 times and scanned with LI-COR.

2.3.5 Analysis

Image Studio Lite Version 5.2.5 software was used to analyze the images obtained from LI-COR. The signal intensity of the band corresponding to the protein of interest was normalized against the Actin beta (ACTB) signal from the same sample. Again, the statistical analysis was done with GraphPad Prism version 7.02.

2.3.6 Material used for Protein work

2.3.6.1 Chemicals and reagents used for protein extraction, quantification and western blot

Chemicals/Reagents	Cat. No.	Company
Acrylamide/Bisacrylamide 30%	A0951.0500	PanReac AppliChem
Albumin Fraction V 98% (BSA)	8076.2	ROTH
Ammonium persulfate (APS)	9592.2	ROTH
Beta-Mercaptoethanol	A1108.0100	AppliChem
Bromophenolblue	B6131	Sigma-Aldrich
Protease inhibitor cocktail tablets	11836170001	Roche
Ethylenediamine tetraacetic acid (EDTA)	E5134	Sigma-Aldrich

Glycerol	G8773	Sigma-Aldrich
Glycine	10119CU	VWR Chemical
Methanol	M/4000/PC17	Fisher Chemical
NP-40 IGEPAL	198596	Biomedicals
Pierce BCA Protein Assay Kit	23227	Thermo Scientific
SDS pellets	CN30.2	ROTH
Sodium Chloride	31434-1KG-M	Sigma-Aldrich
Sodium Deoxycholate	D5670	Sigma-Aldrich
TEMED	2367.3	ROTH
Trizma® base (C ₄ H ₁₁ NO ₃)	T1503-1KG	Sigma-Aldrich
Tween® 20 (C ₅₈ H ₁₁₄ O ₂₆)	A1389	Appllichem

Table 2.12. Chemicals and reagents used for protein extraction, quantification and western blot.

2.3.6.2 Materials used for protein extraction, quantification and western blot

Material	Cat. No.	Company
96 well flat bottom transparent plate	655101	Greiner BioOne
Kontes™ Pellet Pestle™ Cordless Motor		Sigma-Aldrich
Lids for 96 well plate	656190	Greiner BioOne
Nitrocellulose membrane 0.2 µm	1620112	BIORAD
Pellet pestles polypropylene	Z359947	Sigma-Aldrich
SONOPLUS	HD2070	BANDELIN
TECAN Spark		TECAN

Table 2.13. Materials used for protein extraction, quantification and western blot.

2.3.6.3 Primary antibodies used for Western blot

Antibody	Cat. No.	Company	Dilution	Predicted size
ACTB	A5441	Sigma	1:10000	42 kDa
ApoB	ab20737	Abcam	1:250	500 kDa
ApoE	ab1906	Abcam	1:500	36 kDa
ApoER2	ab108208	Abcam	1:500	110 kDa
ApoJ (CLU)	AF2747_SP	Novus	1:500	52 kDa
ATXN2	21776-1-AP	Proteintech	1:500	150 kDa
CALB1	13176	Cell Signaling	1:1000	30 kDa
CASP3	9665	Cell Signaling	1:1000	31.5 kDa
GFAP	Z0334	Dako	1:2000	50 kDa
GPNMB	AF 2330	Biotechne	1:500	64 kDa
IBA1	019-19741	Wako	1:2000	17 kDa
NeuN	ABN78	Millipore	1:1000	41 kDa
PCBP1	14523-1-AP	Proteintech	1:250	37.5 kDa
PCBP2	PA5-22350	Thermo Scientific	1:250	39 kDa
PGRN	AF 2557	Biotechne	1:250	63.5 kDa
PQBP1	A302-802A-M	Biomol	1:500	38 kDa

PTBP1	32-4800	Thermofisher	1:250	56 kDa
PURA	ab79936	Abcam	1:250	35 kDa
RELN	ab78540	Abcam	1:500	387 kDa
RIPK1	3493S	Cell Signaling	1:500	75 kDa
TDP43	ab41881	Abcam	1:1000	45 kDa
VGLUT1	135 011	Synaptic Systems	1:5000	62 kDa
VLDLR	AF2258	R&D Systems	1:500	96 kDa
YBX1	ab12148	Abcam	1:500	36 kDa

Table 2.14. Primary antibodies used for western blot and their predicted size.

2.3.6.4 Secondary antibodies for western blot

Antibody	Cat.No.	Company	Dilution
IRDye 680RD goat anti-mouse	926-32220	LI-COR	1:10000
IRDye 800CW donkey anti-goat	926-32214	LI-COR	1:5000
IRDye 800CW goat anti-mouse	926-32210	LI-COR	1:10000
IRDye 800CW goat anti-rabbit	926-32211	LI-COR	1:10000

Table 2.15. Secondary antibodies used for western blot.

2.4 Immunohistochemistry and Immunocytochemistry

2.4.1 Perfusion and tissue processing

Mice were anesthetized with an overdose of Ketaset (300 mg/kg) and Domitor (3 mg/kg) by an intraperitoneal injection. To assess the anesthetic depth the withdrawal reflex was monitored. Intracardial perfusion was done with PBS (137 mM NaCl, 2.7 mM KCl, 10 mM Na₂HPO₄, 1.8 mM KH₂PO₄) followed by 4% paraformaldehyde (PFA) in 0.1 M PBS for at least 5 min each. The brain, cerebellum, spinal cord and liver were dissected and post-fixed overnight in 4% PFA at 4°C. Samples were then immersed in 30% sucrose until they sank, frozen, cut with a cryostat in 30-µm-thick slices, and kept in cryoprotection solution (30% ethylene glycol, 25% glycerin, 0.01% sodium azide in 0.1 M PBS) at -20 °C until used.

2.4.2 Staining - Immunohistochemistry and Immunocytochemistry

All immunohistochemistry was done in free-floating 30 µm sections. The selected tissue sections from WT and mutant animals were washed three times for 5 min each in PBS, blocked in blocking buffer (5% Goat Serum 0.03% Triton X-100 in PBS) at RT for 1 hour, and incubated with primary antibodies overnight

at 4°C with soft shaking. The next morning, the samples were washed three times in PBS and incubated with the corresponding secondary antibodies and DAPI at RT for one hour protected from the light. Last step was a series of three 5 min washing steps in PBS followed by mounting the samples on SuperFrost Plus slides with Mountant PermaFluor mounting media and storage at 4°C.

The protocol to stain organotypic cell cultures (OTC) was similar to the one followed for tissue. In this case, the slices were growing on milli-cell membranes and, after fixing with cold 4% PFA and washing three times with PBS, the membranes were cut around the tissue and the resulting pieces were moved to a 12-well plate. The samples were then permeabilized and blocked overnight at 4°C (~12 hours) with 0.5% Triton X-100, 20% BSA, PBS. The next day, using blocking buffer (5% BSA in PBS), primary antibodies were diluted and the samples were again incubated overnight at 4°C. They were washed three times for 5 min each with cold PBS and incubated with the corresponding secondary antibodies at room temperature for 3 hours. Three more washing steps were performed using cold PBS and samples were mounted carefully on SuperFrost Plus slides with Mountant PermaFluor mounting media and kept at 4°C.

Finally, immunocytochemistry was performed with fixed cells grown on poly-D-lysine (0.1 mg/mL) treated glass slides. Cells were fixed with 4% PFA at RT for 20 min, washed 3 times with DPBS, permeabilized with 0.1% Triton X-100 and blocked with 5% BSA for 30 min at RT. Primary antibodies were diluted in blocking solution and samples were incubated overnight at 4°C with soft shaking. The next day, the slides were washed three times with 1x PBS and incubated with the corresponding secondary antibodies and DAPI for 1 hour at RT protected from the light. Samples were washed three times, mounted using Mountant PermaFluor mounting media, and kept at 4°C.

2.4.3 Imaging and image processing

Images from the different staining were done with a Nikon Eclipse TE200-E confocal microscope. In all cases, Z-stacks were done and processed with Fiji (Schindelin et al 2012). Photoshop CS5.1 was used to generate the final figures and compositions.

2.4.4 Material used for Immunohistochemistry and Immunocytochemistry

2.4.4.1 Reagents and chemicals used for perfusion, processing of the tissue and immunohistochemistry

Reagent/Chemical	Cat. No.	Company
4',6-diamidino-2-phenylindol (DAPI)	D9542-5mg	Sigma-Aldrich
di-Potassium hydrogen phosphate (KH ₂ PO ₄)	A3620	Applichem
di-Sodium hydrogen phosphate (Na ₂ HPO ₄)	106559	Merck
Domitor (1 mg/mL)	779-376	Orion Pharma
Ethylenglycol (C ₂ H ₆ O ₂)	A1643,1000	Applichem
Glycerin (C ₃ H ₈ O ₃)	G8773	Sigma-Aldrich
Ketaset (100 mg/mL)	5841328	Zoetis
Mountant, PermaFluor	TA-030-FM	Thermo sicientific
Normal goat serum	G9023 - 10ml	SIGMA
Paraformaldehyde	16005	Sigma-Aldrich
Potassium chloride (KCl)	A2939	Applichem
Sodium azide (NaN ₃)	S8032	Sigma-Aldrich
Sodium chloride (NaCl)	31434	Sigma-Aldrich
Sucrose (C ₁₂ H ₂₂ O ₁₁)	84100	Sigma-Aldrich
Triton® X-100 (C ₃₀ H ₆₀ O ₉)	282103	Sigma-Aldrich

Table 2.16. Reagents and chemicals used for perfusion, tissue processing and immunohistochemistry

2.4.4.2 Material and instruments used for processing the tissue and imaging

Material	Cat. No.	Company
Cryostat	CM3050 S	Leica
Confocal microscope Nikon eclipse	TE2000-E	Leica

Table 2.17. Material and instruments used for tissue processing and imaging.

2.4.4.3 Primary antibodies used for immunohistochemistry and immunocytochemistry

Antibody	Cat. No.	Company	Dilution
1C2	MAB1574	Millipore	1:800
AHNAK	HPA026643	Atlas Antibody	1:500
ApoB	ab20737	Abcam	1:250
ATXN2	611378	BD Transduction	1:50
CALB1	C9848	Sigma	1:1000
CALBq	13176	Cell Signaling	1:1000
GFAP	ZO334	Dako	1:1000
IBA1	019-19741	Wako	1:1000
NeuN	ABN78	Millipore	1:1000

NF-H	18934-1-AP	Proteintech	1:500
P62/SQSTM1	sc25575	Santa Cruz	1:50
PABP1	ab21060	Abcam	1:100
PCBP1	14523-1-AP	Proteintech	1:100
PCBP2	PA5-22350	Thermo Scientific	1:100
PURA	ab79936	Abcam	1:500
RELN	ab78540	Abcam	1:500
TDP43	ab41881	Abcam	1:100
TIA1	sc-1751	Santa Cruz	1:100
VGLUT1	135 011	Synaptic Systems	1:1000
VLDLR	AF2258	R&D Systems	1:500

Table 2.18. Primary antibodies and dilutions used for immunohistochemistry and immunocytochemistry.

2.4.4.4 Secondary antibodies used for immunohistochemistry

Antibody	Cat. No.	Company	Dilution
Alexa Fluor 488 goat anti-mouse IgG	A11029	Invitrogen	1:1000
Alexa Fluor 488 goat anti-rabbit IgG	A11034	Invitrogen	1:1000
Alexa Fluor 565 rabbit anti-goat IgG	A11079	Invitrogen	1:1000
Alexa Fluor 568 donkey anti-sheep IgG	A21099	Invitrogen	1:1000
Alexa Fluor 568 goat anti-rabbit IgG	A11036	Invitrogen	1:1000

Table 2.19. Secondary antibodies used for immunohistochemistry and immunocytochemistry.

2.5 Cell culture

All cell culture work was done in a sterile hood and cells were kept in standard conditions (5% CO₂, 37°C).

2.5.1 Immortalized cell lines

2.5.1.1 SH-SY5Y and Starvation time-course

The human neuroblastoma derived cell line, SH-SY5Y (Biedler et al 1978), previously transduced with shRNA against ATXN2 mRNA or non-targeted shRNA (Sen et al 2016) were used to evaluate the effect of loss-of-function in an in-vitro model. They were cultured with DMEM, 10% FBS, and Puromycin as a selective antibiotic (1 µg/mL). Starvation time-course was performed in 6-well plates with 5x10⁵ cell per well. The day after seeding, the medium was changed to HBSS or

complete medium in case of the control. At specified time points, cells were collected and RNA was extracted for further analysis.

2.5.1.2 BV2 – NaArs and LPS treatment

Murine microglia cell line BV2 (Blasi et al 1990) was used as an in-vitro model to study the effect of ATXN2 CAG expansions in this cell type. Cells were cultured in DMEM supplemented with 10% FBS, 1x L-glutamine and 1x Pen/Strep. Two different stressors were used. To study the formation of stress granules, BV2 were seeded at 5×10^4 cells/well on poly-D-lysine (0.1 mg/mL) treated glass slides in a 12-well plate and the next day were stressed with 0.25 mM Sodium Arsenite (NaArs) for 15 min or 30 min. Cells were fixed with 4% PFA at RT for 20 min and washed three times with DPBS before staining them. The second stressor used was Lipopolysaccharide (LPS). 1.5×10^4 cells were seeded per well in a poly-D-lysine coated 6-well plate and next day were transfected with either the empty vector myc, myc-Atxn2-Q22, or my-Atxn2-Q79 using lipofectamine 3000 following the manufacturer's protocol. The medium was changed right before the transfection. The corresponding plasmid at 1 $\mu\text{g}/\text{mL}$ was mixed with the P3000 reagent and Opti-MEM. The mixture was mixed softly, shortly spun down and kept at RT for 5 min. Mean while, Lipofectamine 3000 was mixed with Opti-MEM. After the incubation time, the entire plasmid containing solution was added into the lipofectamine, mixed and incubated at RT for 15 min before adding 250 μL per well. After 36 hours the medium was changed and cells were challenged with different concentrations of LPS to assess their response. The next day, after 24 hours, cells were collected and protein and RNA were extracted from each well.

2.5.2 Primary cultures

2.5.2.1 Mouse Embryonic Fibroblasts – generation and Poly IC treatment

Mouse embryonic skin fibroblasts from *Atxn2*-CAG100-Knock-in mouse line were isolated around embryonic day 17 from heterozygous crosses (Lastres-Becker et al 2016). In order to synchronize the cycle, females were kept in cages with paper chipping from males for few days before the male was moved into the

cage. The pregnancy was followed and at day 17 females were decapitated and the pups were carefully separated from the placenta and surrounding membranes. During the procedure, the embryos were kept in DPBS supplemented with 5x Pen/Strep. One by one, each embryo was decapitated, dissected and a piece of tail was collected to run the genotyping PCR. Then, the tissue was minced; 5 mL of dissection medium (DMEM, 5x Pen/Strep) were added and transferred to a 15 mL falcon tube. 2 mL of 0.05% Trypsin-EDTA were added and incubated at 37°C for 10 min with occasional shaking. To stop the digestion, 4 mL of medium (DMEM, 15% FBS, 1x L-glutamine, 1x Pen/Strep) were added and tubes were centrifuged at 450 xG for 5 min. Supernatant was removed and cells were re-suspended in 12 mL and seeded in a T-75 flask. Once the genotype was determined and the culture was confluent, MEFs were split 1:3 and frozen.

MEFs were then stressed with poly(IC) following the protocol from (Reineke et al 2018a). They were seeded on top of poly-D-lysine treated slices in a 12 well plate at a confluence of 30.000 cells/well. The next day, they were treated with 100 ng of poly(IC) for 6 hours. After the treatment they were fixed with 4% PFA at RT for 20 min, washed with DPBS three times and further processed.

2.5.2.2 Primary mixed glia culture

P0-P3 pups from heterozygous crosses were used to establish the primary mixed glia cultures (Lian et al 2016). The first part of the protocol was performed in a semi-sterile hood and, once the cells were disaggregated, moved to a sterile hood. The pups were quickly decapitated, the brain was dissected in a sterile 6 cm petri dish, meninges were removed and the cortex and hippocampus were isolated. After moving the tissue to a fresh dish, it was minced using scissors in 5 mL of cold dissection medium (HBSS, 1 M HEPES, 3 gr glucose, 1x Pen/Strep) and moved to a 50 mL falcon. The tissue pieces were then allowed to sediment, the medium was carefully removed and 10 mL of 0.05% Trypsin-EDTA was added. Tubes were then incubated at 37°C for 15 min and occasionally stirred. To stop the digestion, 10 mL of culture medium (DMEM, 10% FBS, 1x L-Glutamine, 1x Pen/Strep) was added and carefully mixed by inversion. After one minute, 750 µL of 1mg/mL DNase were added to digest the released DNA during

the procedure. Samples were then centrifuged at 400 xG for 5 min, the supernatant was removed and cells were resuspended in 5 mL of warm culture medium. They were seeded on a poly-D-lysine coated T-75 flask in a final volume of 15 mL. The next day, the medium was changed in order to remove debris and then changed every 5 days. After approximately two weeks the culture showed a bottom layer of astrocytes while microglia and some oligodendrocytes were growing on top. To collect microglia, the flasks were tapped vigorously for 10-15 min and the medium with floating cells was moved to another coated T-75 flask, resulting in a purified microglia primary culture.

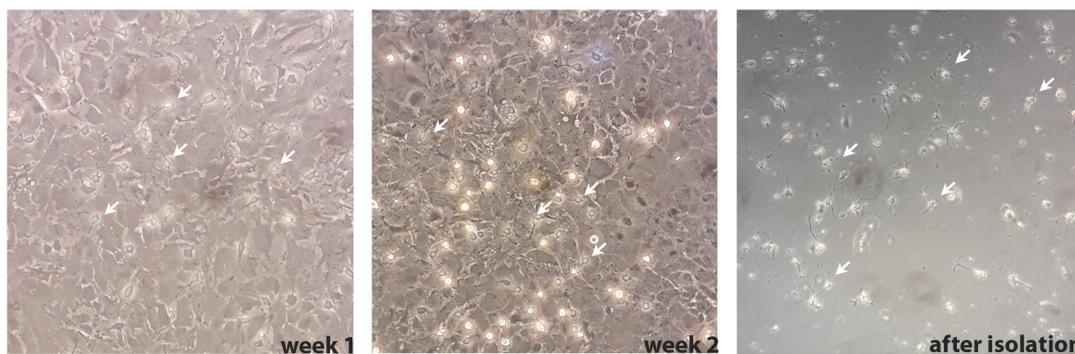


Figure 2.1. Primary mixed glia cultures at different time points and after isolating microglia. Images were acquired with a bright field microscope.

2.5.2.3 Organotypic slice cultures

Organotypic cultures (OTC) from cerebellum were established from P15-17 pups, once the Purkinje neurons had reached their final position. The protocol was carried out in a semi-sterile hood. Pups were decapitated nearby the hood and once the brain was isolated, moved to the semi-sterile hood in a 6 cm petri dish. The cerebellum was dissected from the rest of the brain and fixed on the vibratome-block with a small drop of tissue glue. The block was placed in the vibratome table, filled with dissection medium (MEM, 1x Glutamax, 45% glucose, 1 M HEPES, 1x Pen/Strep, 1 N NaOH, pH 7.3-7.4) and the cerebellum was cut in sagittal sections of 400 μ m at 0.14 mm/s. The sections were rescued from the table, moved to a sterile petri dish and transferred to a milli-cell previously equilibrated with 1 mL of dissection medium. The milli-cell containing maximum 3 slides was then moved to a well of a 6-well plate containing 1 mL of culture medium pre-warmed (MEM, BME, heat-inactivated Normal Horse Serum, 1x Glutamax, 1 M HEPES, 1x Pen/Strep, 7.5% Bicarbonat, pH 7.29-7.31). Medium

was changed every 3 days removing only part of the old medium and adding 1 mL of fresh culture medium. After minimum one week of culture, after the slices had flattened, cultures were processed for staining as previously described.

2.5.3 Material used in cell culture

2.5.3.1 Chemicals and reagents

Reagent/Chemical	Cat. No.	Company
0.05% Trypsin-EDTA	25300-054	Gibco
Basal Medium Eagle (BME)	41010026	Gibco
D-(+)-Glucose solution 45%	G8769	Sigma-Aldrich
Deoxyribonuclease I (DNase) 10kU	D4527	Sigma-Aldrich
Dulbecco's Modified Eagle Medium (DMEM)	21969035	Gibco
Dulbecco's Phosphate Buffered Saline (DPBS)	14190094	Gibco
Fetal Bovine Serum Qualified, One shot (FBS)	A3160801	Gibco
GlutaMAX	35050061	Gibco
Hank's Balanced Salt Solution (HBSS)	2402091	Gibco
HEPES 1 M	H0887	Sigma-Aldrich
L-glutamine 200mM	25030-024	Gibco
Lipofectamine 3000	L3000015	Thermo Fisher
Lipopolysaccharide from E. Coli (LPS)	tlrl-eblps	InvivoGen
Minimum Essential Medium (MEM)	21575-022	Gibco
Normal Horse Serum (NHS)	26050-088	Invitrogen
Opti-MEM	11058021	Gibco
P3000 (part of Lipofectamine 3000 kit)	L3000015	Thermo Fisher
Paraformaldehyde 4% in PBS pH 7.4 (PFA)	11762.01	MORPHISTO
Penicillin Streptomycin (Pen/Strep)	15140122	Gibco
Poly D- Lysine 1 mg/ml in H ₂ O	A-003-E	Millipore
Poly IC	tlrl-picwlv	InvivoGen
Puromycin dihydrochloride	P8833	Sigma-Aldrich
Sodium Arsenite (Na ₃ AsO ₃)	S-8032	Sigma-Aldrich
Sodium bicarbonat	25080-060	Invitrogen
Sodium hydroxide (NaOH) 1 N	01-830.1000	KMF OptiChem
Ultra pure distilled Water DNase/RNase free	10977-035	Invitrogen

Table 2.20. Chemicals and reagents used in cell culture and primary cell culture

2.5.3.2 Material

Material	Cat. No.	Company
Cell culture bench		Envirco
Cell culture bench Lamin Air	HB2448	Heraeus
Cell culture bench HSC Advantage		Thermo Scientific
CO ₂ incubator HERAcell 240i		Thermo Scientific

Vibratome MICROM	HM 650V	Leica
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Table 2.21. Material used in cell culture and OTC**2.5.3.3 Constructs used for transfection**

Construct	Selection Antibiotic	Source	Cat. No./ Ref.
ATXN2-22Q-Myc (pCMV)	Ampicillin	Custom made	Nonis <i>et al</i> 2008
ATXN2-74Q-Myc (pCMV)	Ampicillin	Custom made	Nonis <i>et al</i> 2008
Control-Myc (pCMV)	Ampicillin	Clontech	631604

Table 2.22. Constructs used for transfection in cell culture**2.6 Statistical analysis**

Statistical tests were performed as unpaired Student's t-test using GraphPad Prism software version 7.02 using the Welch t-test which assumes that both groups of data are sampled from Gaussian populations, but does not assume those two populations have the same standard deviation. Figures displaying mean values and standard error of the mean (SEM). Values $p < 0.05$ were considered significant and marked with asterisks: $p < 0.05$ *, $p < 0.01$ **, $p < 0.001$ ***, $p < 0.0001$ ****.

One-way or two-way ANOVA tests were also used for behavior or cell culture data analysis when comparing more than one variable.

3 RESULTS

Part 1 – The role of Ataxin 2 in SCA2 and ALS

3.1 Characterization of the novel *Atxn2*-CAG100-Knock-in mouse line

There is a lack of mouse models availability to study the endogenous effect of the CAG expansion in *Atxn2* gene as a cause of SCA2 and risk factor for ALS. Melanie Halbach started the characterization of the *Atxn2*-CAG100-Knock-in mouse line. This mouse model shows a significant reduction in lifespan, dying at the age of 14 months, together with a reduction in weight and substantial motor deficits. ATXN2 aggregates were also found at late stage (14 months) in different areas like the brain stem, pons, cerebellum and spinal cord. Overall, this model recapitulates the symptomatology of SCA2 patients, could help to understand its pathology and design therapies.

In order to better characterize the phenotype of these animals and the molecular changes caused by the introduction of 100 CAGs in the *Atxn2* gene, further behavioral and molecular biology experiments were performed.

3.1.1 The completion of Rotarod and Open field data shows motor deficits

The Rotarod test is widely used to assess motor behavior (Jones & Roberts 1968). The height of the rod is low enough to prevent lesions caused by a fall but high enough to induce avoidance of the fall. Therefore, measuring the time of the animal staying on the accelerating rod provides a measure of their balance, coordination, physical condition and motor planning. The performance of the *Atxn2*-CAG100-KIN animals showed a significant and stable deficit starting around 5 months of age, worsening over time (Figure 3.1).

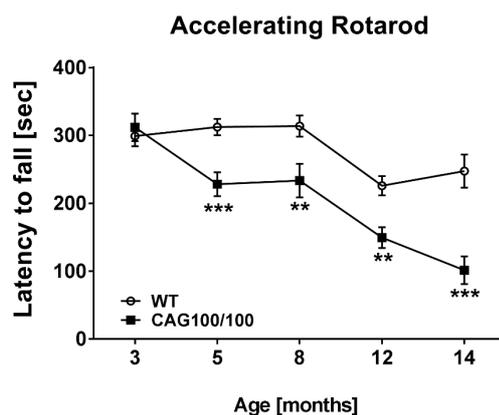


Figure 3.1. Rotarod performance of the CAG100-KIN animals at different ages compared to their WT littermates. A significant decrease in time staying on the accelerating rod for the CAG100/100 (*Atn2*-CAG100-KIN) animals is evident starting at the age of 5 months and it worsens over time.

Another useful test to evaluate the motor behavior is the Open field test (Drai et al 2001). It allows us to assess general locomotor activity levels, anxiety and willingness to explore. Here, only six parameters are shown to highlight the assessment of spontaneous activity and motor impairment starting at the age of 3 months. Specifically the vertical parameters of movement, activity and time were significantly affected over time indicating problems in balance (Figure 3.2).

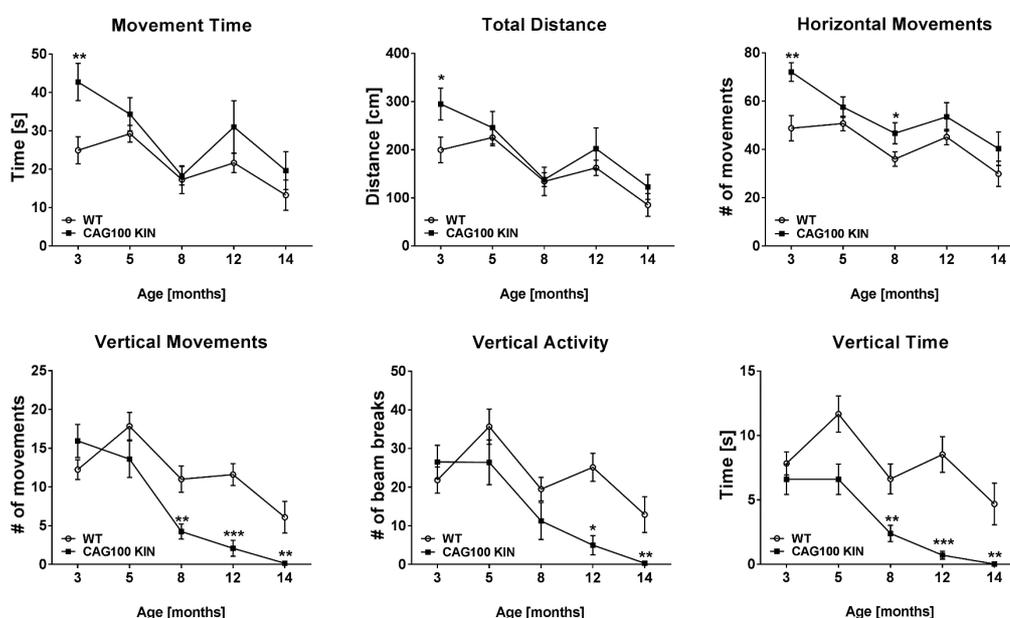


Figure 3.2. Horizontal and vertical activity assessment with Open field test. Overall, horizontal movements are increased in the *Atn2*-CAG100-KIN animals while the vertical movements are impaired.

3.1.2 Grip strength

The grip strength test is an easy way to evaluate the muscular strength of rodents (mouse or rat) and to assess the effect of neurodegenerative diseases on muscular degeneration (Meyer et al 1979). This is achieved by measuring the maximal peak force generated by a mouse, in this case, when it is gently being pulled by its tail. To do that, age and sex matched pairs from 3 to 13 months of age were assessed; ten measurements were recorded per animal.

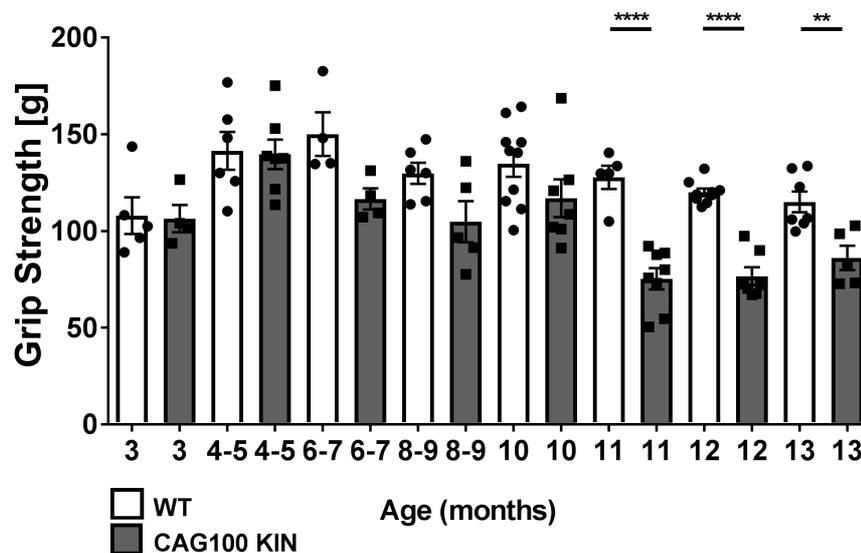


Figure 3.3. Grip strength from 3 to 13 month old CAG-KIN animals compared to their WT littermates. At the age of 11 months there is a significant decrease in the fore limb grip of the CAG100 animals compared to the WT. Un-paired t-test with Welch's correction for 11-months (p-value <0.0001), 12-months (p-value <0.0001) and 13-months (p-value 0.0069) groups.

A significant decrease in the maximal forelimb effort was detected ($p < 0.001$; $F = 10.219$ with 7 degrees of freedom; ANOVA). At the age of 11 months the forelimb strength started to decrease ($p < 0.001$; $F = 9.964$ with 15 degrees of freedom; two-way ANOVA) and was constant until 13 months while the WT remained unaltered.

3.1.3 Paw print

Paw print or foot print test were used to analyze the gait in rodents between the WT and mutant in order to assess potential motor deficits (Carter et al 1999). To perform this test, the paws are coated with non-toxic ink and the animals are allowed to freely walk over a sheet of white paper through a dark tunnel. The

generated pattern is then analyzed.



Figure 3.4. Examples of the walking pattern generated during the paw print test. Front paws were colored in red and hind paws in blue. On the left image, the more organized steps from a WT mouse can be appreciated while on the right the altered walking steps from an *Atxn2*-CAG100-KIN animal can be observed.

After several tests with 12 to 14-month old *Atxn2*-CAG100-KIN animals, it was evident that the irregularity of the steps displayed by the mutants made the analysis not possible. In the right panel of the Figure 3.4, the walking difficulties that these animals suffer at the end stage of the disease are easy to appreciate.

3.1.4 Histological analysis of the pathology progression in the cerebellum over time shows increase ATXN2 aggregation and co-localization with PABP1

Although detectable motor symptoms start to be evident around 6 months of age, molecular events can be detected earlier. To better understand the progression of the disease, immunohistochemistry was performed using samples from 3, 6, and 14-month-old animals. A well-known ATXN2 interactor, Poly(A)-binding protein (PABP1) (Mangus et al 1998) was used as a control since it is known to co-aggregate with ATXN2 during cellular stress into stress granules (SG).

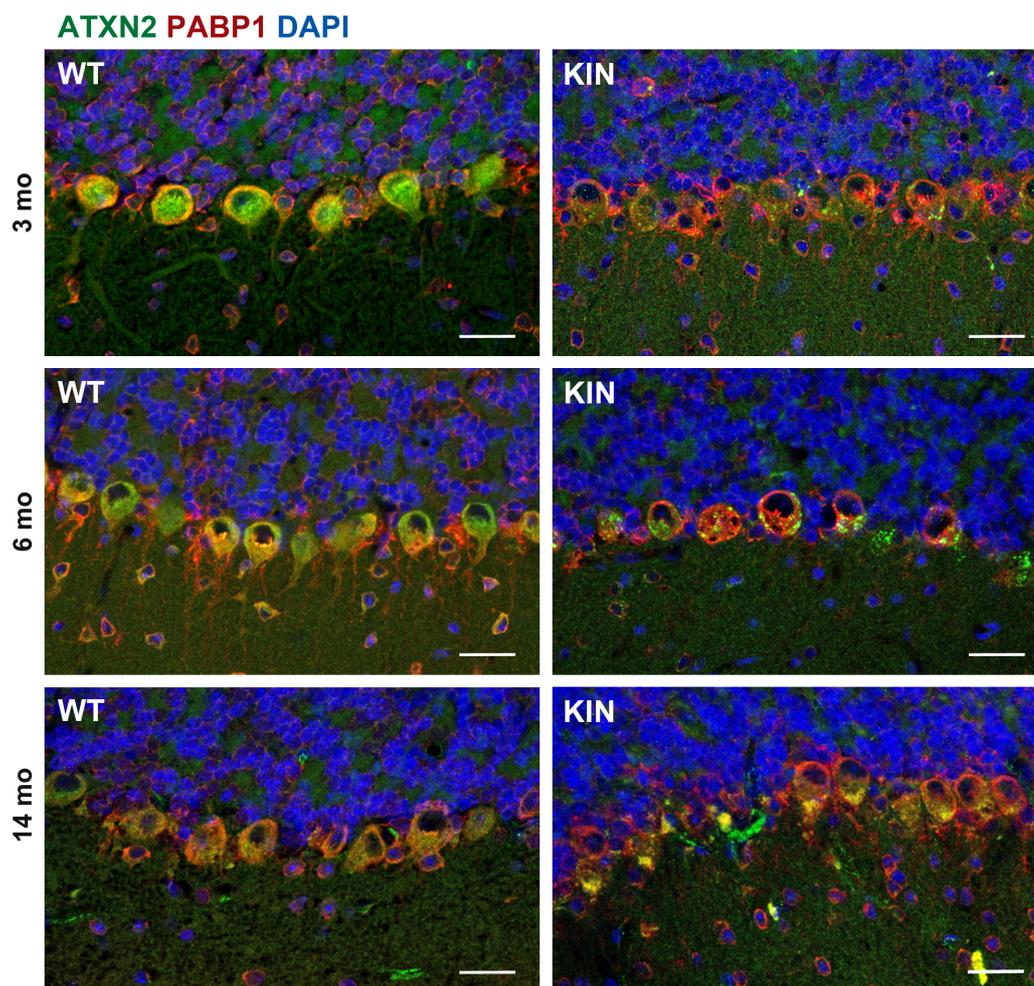


Figure 3.5 ATXN2 (green), PABP1 (red) and DAPI (labeling the nuclei in blue) staining in age- and sex-matched pair show an increasing amount and size of co-aggregates in Purkinje neurons over time. The staining shows the progression of the pathology at the molecular level with discrete aggregates at the early age of three months that increase with age until showing a plug-like structure at the apical base of the Purkinje neurons in 14-month-old animals. Scale bar represents 25 μm .

One of the most impressive results is the early aggregation of ATXN2 (green), already occurring at the age of 3 months, before any behavioral symptoms can be detected. While the cytoplasmic distribution of ATXN2 in the WT animals is constant from 3 to 14 months of age, its aggregates increase in size in the *Atxn2*-CAG100-KIN becoming a plug-like structure at an old age. This could affect the transport of other proteins and mRNA towards the dendrites. Despite the presence of smaller aggregates in the younger samples, the co-localization of PABP1 starts to be detectable around 6 months of age and becomes easily visible at 14 months. These data could suggest that other proteins are sequestered into aggregates over time, thus worsening the pathology due to their loss of function.

3.1.5 Histological analysis of the Purkinje in the cerebellum of *Atxn2*-CAG100-Knock-in over time compared to symptomatic *Atxn2*-Knock-out shows disconnection of the Purkinje at old age

One hallmark of neurodegenerative disorders is the progressive loss of different neuronal types like the predominant degeneration of the dopaminergic nigrostriatal system in Parkinson's disease (PD). The atrophy of the cerebellum is, therefore, a hallmark for spinocerebellar ataxias (Estrada et al 1999, Xia et al 2013). After detecting ATXN2 aggregates at the early age of 3 months and, taking advantage of the well-characterized Purkinje marker calbindin 1 (CALB1) (Barski et al 2003, Whitney et al 2008), we aimed to determine if there was detectable neuronal loss in the cerebellum of the *Atxn2*-CAG100-KIN mouse model. We used the same age points (3, 6, 14 months) as in prior sections to compare the *Atxn2*-CAG100-KIN mouse to the *Atxn2*-Knock-out (*Atxn2*-KO) mouse.

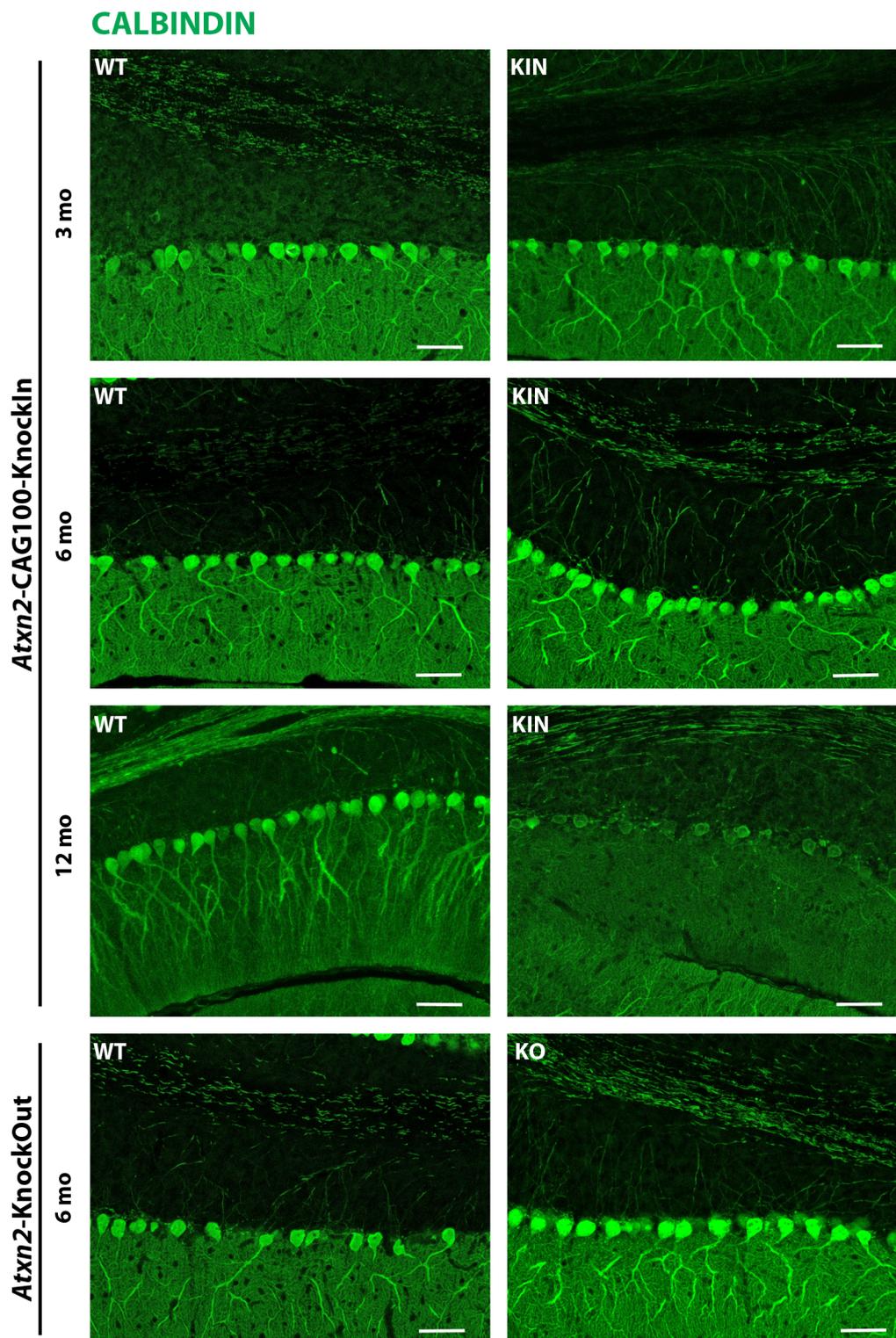


Figure 3.6 Calbindin staining at different ages of the *Atxn2*-CAG-100-Knock-in model compared to the *Atxn2*-Knock-out at 6 months. There was no obvious loss of Purkinje neurons over time since the soma was still evident at 14 months but a neuronal disconnection became evident in old age showing crisscrossing of the axons compared to the WT. Scale bar represents 25 μ m.

As mentioned in the introduction, the cerebellar structure is composed of: a molecular layer, where the dendritic tree of the Purkinje neurons (PN) is found together with other neuronal types; the Purkinje layer, where the cell bodies of these neurons are located; and the granular layer, mainly composed by the small granule neurons (GN). Staining with CALB1, the PN bodies can be visualized along with their dendritic tree and the axonal tracks going towards the cerebellar deep nuclei as a sole output. The most striking difference between stainings at different ages was the disconnection observed in the *Atxn2*-CAG100-KIN 14-month-old cerebellar section. The PN bodies were still visible but they appear disconnected and the axonal tracks were not as well organized as in the WT.

3.1.6 Defects in the input to the cerebellum: climbing fiber pathology in *Atxn2*-CAG100-KIN

Neurofilaments (NFs) are the main components of intermediate filaments in neurons and are essential in maintaining neuron structure. There are three different subunits: neurofilament protein L (low molecular weight, NF-L), M (medium molecular weight, NF-M) and H (high molecular weight, NF-H) (Hoffman & Lasek 1975). Moreover, abnormal expression levels, accumulation, or post-transcriptional modifications such as phosphorylation have been linked to neurodegenerative disorders like Alzheimer's disease (AD), PD and Amyotrophic lateral sclerosis (ALS) (Bridel et al 2019, Constantinescu et al 2019, Mattsson et al 2019, Mayeli et al 2019). Although they have been mainly described as crucial for axon structure, NFs can also be translocated to dendrites of specific neurons and seem to be important for proper dendritic arborization (Kong et al 1998, Zhang et al 2002). NF-L has also been associated with schizophrenia-associated behaviour (Yuan et al 2018) evidencing their role in synaptic plasticity. In order to study the neuronal structure in the cerebellum of the *Atxn2*-CAG100-KIN mice, immunohistochemistry for NF-H was performed using cerebellar slices from late stages of the disease (14 months) and compared to age- and sex-matched WT counterparts.

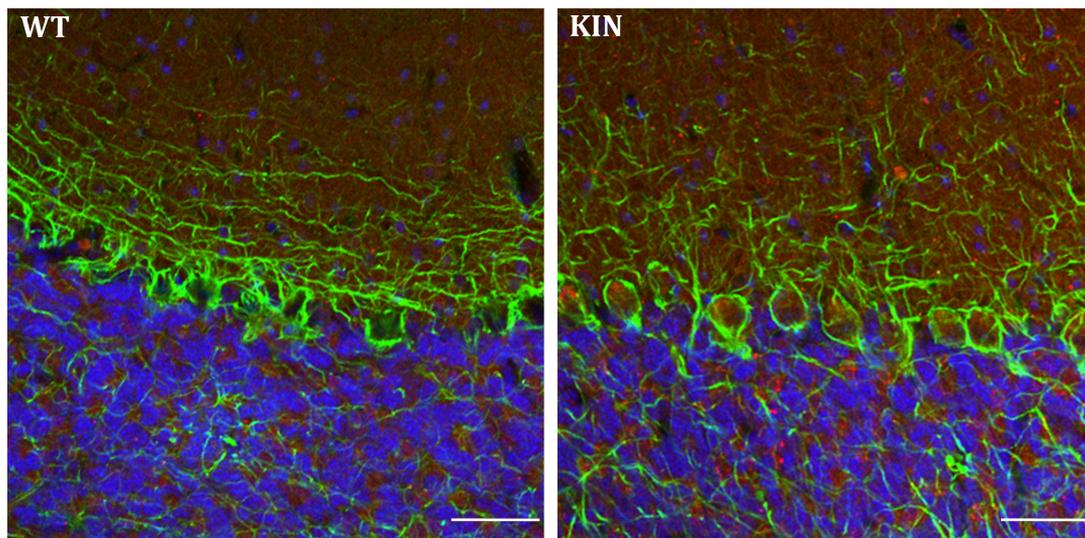
NF-H P62 DAPI


Figure 3.7. Immunohistochemistry for NF-H (green) and P62 (red) shows disorganization this intermediate filament in the *Atxn2*-CAG100-KIN and positive signal for P62 in the Purkinje soma. Scale bar represents 50 μ m.

Histological analysis of the cerebellar samples at 14 months showed the disorganization of the NF-H close to the proximal molecular layer. This can suggest defective innervation of the climbing fibers from the inferior olive to the Purkinje neurons. The alteration of the climbing fiber input to the PN has been suggested as a common feature of spinocerebellar ataxias (Smeets & Verbeek 2016).

Climbing fibers are one of two inputs to the cerebellum. They arise from the inferior olive (IO) and innervate the proximal Purkinje dendritic tree with a one-to-one ratio. During development, the climbing fibers arrive at the cerebellum between embryonic day 15.5 and 16.5 and make contact with the PN. At this point, and until approximately postnatal day 7, each Purkinje is innervated by four to five climbing fibers. Only the winning climbing fiber will remain and it will displace the other ones (Kakegawa et al 2015, Watanabe & Kano 2011). A recent study by Uesaka *et al* showed how the expression of *Sema7a* is essential in the retrograde signaling to determine which climbing fiber will be the winner (Uesaka & Kano 2018, Uesaka et al 2014). Therefore, the expression levels of *Sema7a* were assessed in RNA samples from the cerebellum of the *Atxn2*-CAG100-KIN and *Atxn2*-KO models. In all conditions, a significant down-regulation was detected (Figure 3.8) suggesting that the loss of ATXN2 can cause problems in the cerebellar network (*Atxn2*-KO FC 0.8 p-value 0.005; 3 months

Atxn2-CAG100-KIN FC 0.7 p-value 0.013; 14 months *Atxn2*-CAG100-KIN FC 0.7 p-value 0.016).

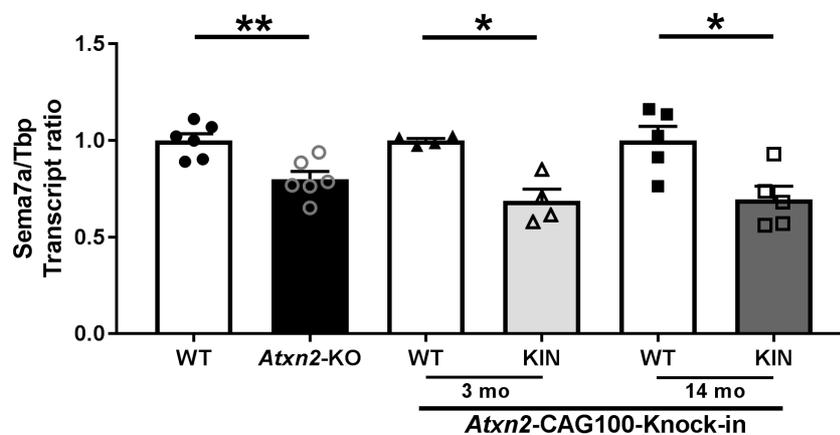


Figure 3.8. Transcript levels of Sema7a in the cerebellum of *Atxn2*-KO and *Atxn2*-CAG100-KIN models at different ages. A significant down regulation was detected in all conditions.

Moreover, climbing fiber deficits have been found in mouse models of SCA1, SCA7, SCA14 and SCA23. The deficits range from developmental changes to retraction of climbing fibers in adult mice. Alteration in the glutamatergic signaling has been found in SCA5 and SCA28, also pointing to a climbing fiber deficit and, as a result, in PN dysfunction (Smeets & Verbeek 2016). Climbing fiber pathology was found in the SCA2-58Q transgenic mice (Egorova et al 2018).

3.2 Proteome data set: RNA binding proteins appear up regulated

Prior to this thesis work and in order to gain a deeper insight into SCA2, the proteome data set was generated by free-label mass spectrometry using cerebellar and spinal cord samples of three 14-month-old *Atxn2*-CAG100-KIN mice and three age- and sex-matched WT. The most relevant commonly dysregulated proteins in the spinal cord and cerebellum involved RNA metabolism were further validated and investigated. Table 3.1 is a partial list of two categories related to RNA metabolism that are significantly affected in both tissues of the mouse model at late stage of the disease.

Category	Gene symbol	Protein	Sp. Cord FC	CB FC
Splicing	Dhx15	DEAH-Box Helicase 15	1.3	1.3
	Hcfc1	Host Cell Fctor C1	1.5	1.3

	hnRNPD	AU-Rich Element RNA Binding Protein1	1.5	1.6
	hnRNPE1	Poly(rC)Bining Protein 1	1.3	1.8
	hnRNPE2	Poly(rC)Bining Protein 2	1.3	1.4
	hnRNPF	Heterogeneous Nuclear Ribonucleoprotein F	1.6	1.2
	hnRNPH1	Heterogeneous Nuclear Ribonucleoprotein H1	1.2	1.2
	hnRNPL	Heterogeneous Nuclear Ribonucleoprotein L	1.2	1.2
	hnRNPLL	Heterogeneous Nuclear Ribonucleoprotein L Like	1.3	1.4
	hnRNPR	Heterogeneous Nuclear Ribonucleoprotein R	1.4	1.3
	hnRNPU	Polypyrimidine Tract Binding Protein 1	1.3	1.7
	Nhp211	Small Nuclear Ribonucleoprotein 13	0.74	0.71
	Numa1	Nuclear Mitotic Apparatus Protein 1	1.8	1.4
	Prpf19	Pre-mRNA Processing Factor 19	1.2	1.4
	Puf60	Poly(U) Binding Splicing Factor 60	1.3	1.3
	Sarnp	SAP Domain Containing Ribonucleoprotein	1.5	1.7
	Sf3a1	Splicing Factor 3a Subunit 1	1.4	1.4
	Srrm2	Serine/Arginine Repetitive Matrix 2	1.5	1.4
	Srsf1	Serin and Arginine Rich Splicing Factor 1	1.4	1.4
	Thrap3	Thyroid Hormone Receptor Associated Protein 3	1.3	1.5
	U2af2	U2 Small Nuclear RNA Auxiliary Factor 2	1.5	1.6
Stress	Atxn2l	Ataxin 2 Like	1.6	1.3
Granule	Ahnak	AHNAK Nucleoprotein	2	1.6
	Cirbp	Cold Inducible RNA Binding Protein	1.4	1.9
	Ddx1	DEAD-Box Helicase 1	1.2	1.3
	Ddx6	DEAD-Box Helicase 6	1.2	1.5
	Habp4	Hyaluronan Binding Protein 4	0.77	0.74
	Pura	Purine Rich Element Binding Protein A	0.62	0.80
	Syncrip	Synaptotagmin Binding Cytoplasmic RNA Interacting Protein	1.5	1.3
	Ybx1	Y-Box Binding Protein 1	1.7	1.4

Table 3.1 List of several common dysregulated peptides detected by free-label mass spectrometry. Fold change (FC) values for the spinal cord (Sp. Cord) and cerebellum (CB) samples are shown. The samples used to generate this data set were from animals of 14 months of age, WT n=3 and KIN n=3; analysis done with Perseus software.

RNA binding proteins (RBP) are a group of proteins with putative roles involving RNA metabolism that are part of the ribonucleoprotein complexes (RNP), and

are essential for gene expression (Kedersha et al 2013). A large number of them have been involved in neurodegenerative disorders like TDP43 in ALS or ATXN2 in SCA2. Therefore, it is of interest to further investigate the effect of the expanded ATXN2 with respect to RBPs and their functions.

3.3 Several RBPs transcript levels are altered in the *Atxn2*-CAG100-KIN mouse model

Since ATXN2 is an RNA binding protein and it is thought to play a role in translation (Mangus et al 1998, Satterfield & Pallanck 2006), the first hypothesis was that the expanded ATXN2 affected the mRNA levels of other RBPs, thus affecting their protein levels. In order to define this effect, several RBP transcripts were assessed by Q-PCR in the *Atxn2*-CAG100-KIN and *Atxn2*-KO mouse models, using samples from cerebellum and spinal cord at different ages.

3.3.1 AHNAK and AHNAK2 are strongly dysregulated in the proteome data set

AHNAK is a giant protein of 700 kDa also known as desmoyokin (Hashimoto et al 1993) that forms part of multi-protein complexes acting as a structural scaffold. Multiple protein interaction domains are scattered across the protein, especially at the C-terminal (Komuro et al 2004). It has been implicated in a broad range of cellular processes or pathways from the formation of the blood-brain barrier (Ballabh et al 2004, Boveri et al 2006, Gentil et al 2005), cell architecture and migration (Benaud et al 2004, Lee et al 2014, Lim et al 2013), to the regulation of calcium channels (Haase et al 2005, Jin et al 2019, Matza et al 2009, Matza et al 2008) and muscle repair (Huang et al 2007). AHNAK can be found in the nucleus, cytoplasm and plasma membrane (Benaud et al 2004, Masunaga et al 1995, Shtivelman et al 1992, Sussman et al 2001). Moreover, its mRNA has been found to re-localize to SG in stress conditions (Khong et al 2017) and it is one of the highest up-regulated proteins in the proteome data from the cerebellum (FC 1,6) and spinal cord (FC 2).

AHNAK2, or PLD4, is also a giant protein with approximately 600 kDa and shares several features with AHNAK, however its specific function is not known. This protein has been mainly described in cancer (Klett et al 2018, Lu et al 2017) and

also in lupus (Akizuki et al 2019). Most recently, it has been reported to be a genetic cause for Charcot-Marie-Tooth polyneuropathy in a Malaysian family (Tey et al 2019).

3.3.1.1 Ahnak transcript levels are up regulated in the spinal cord and cerebellum of 14-month-old *Atxn2*-CAG100-KIN model and not changed in the hemisphere or cerebellum at the younger ages

The transcript level of *Ahnak* was investigated at different ages in the cerebellum of *Atxn2*-CAG100-KIN animals and compared to their sex- and age-matched controls. A significant up-regulation (FC 1.33; p-value 0.003) was observed at old age, however no differences were detected in the younger (3 and 6 months) samples, nor in the *Atxn2*-KO (Figure 3.9, A). A significant up-regulation (FC 1.62; p-value 0.038) was detected in the spinal cord of the old *Atxn2*-CAG100-KIN (Figure 3.9, B) correlating with the higher up-regulation observed in the proteome data from the spinal cord (FC 2). Moreover, AHNAK has been reported to be significantly up-regulated after spinal cord injury (Von Boxberg et al 2006).

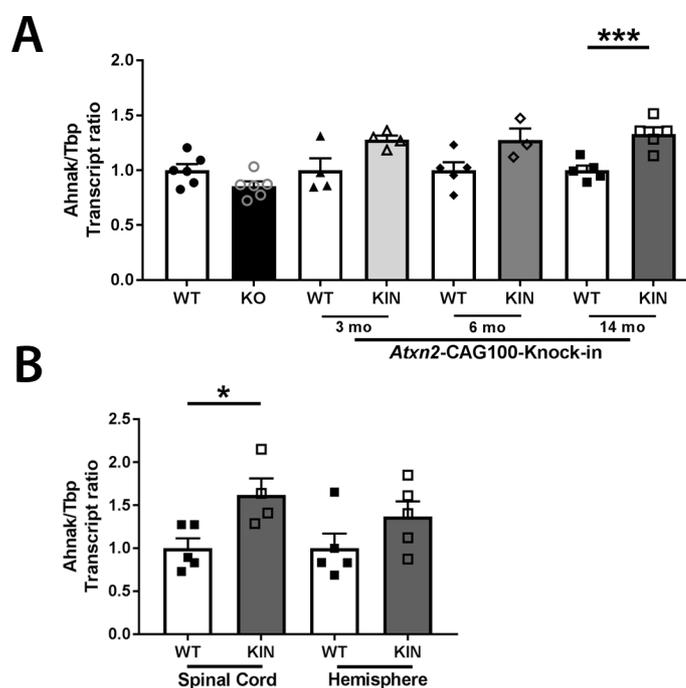


Figure 3.9. Ahnak transcript levels assessed by Q-PCR. (A) The transcript levels are significantly up-regulated in the 14 month old cerebellum of the *Atxn2*-CAG100-KIN mice compared to the age-matched controls. There are no differences in the levels of the *Atxn2*-KO and younger (3 and 6 month old) *Atxn2*-CAG100-KIN cerebellum. (B) A significant up-regulation was detected in the spinal cord samples of the 14-month-old *Atxn2*-CAG100-KIN animals.

3.3.1.2 *Ahnak2* transcript levels are down regulated in the spinal cord of 14 month old *Atxn2*-CAG-100 animals

The other member of the Ahnak family, Ahnak2, was also checked at the transcript level. Only a down-regulation in the spinal cord of the old *Atxn2*-CAG100-KIN animals was detected (FC 0.62 p-value 0.003) showing again a stronger affection in the spinal cord rather than in other regions of the CNS.

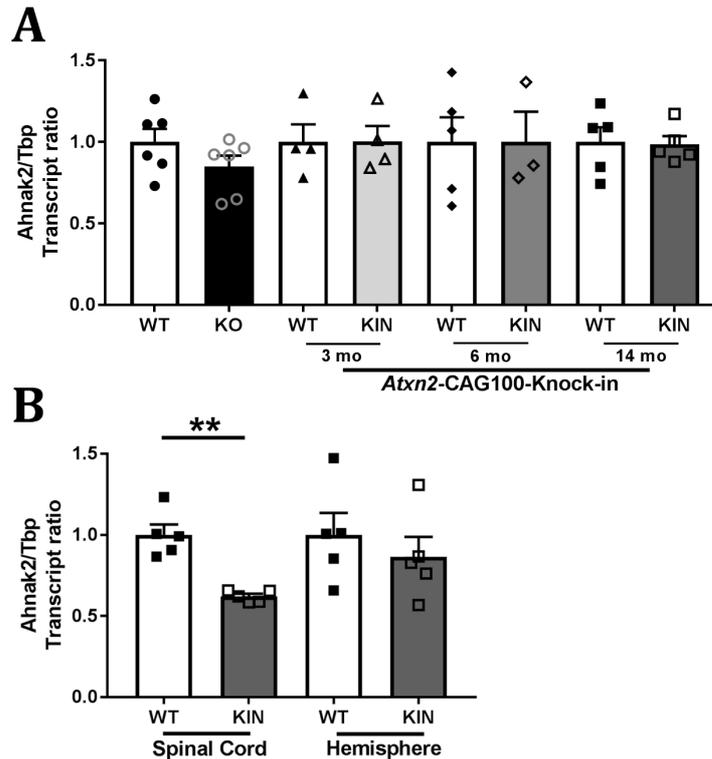


Figure 3.10. Transcript levels of *Ahnak2* assessed by Q-PCR. No differences were detected in the cerebellum of *Atxn2*-KO and *Atxn2*-CAG100-KIN animals (A) nor in the hemisphere of *Atxn2*-CAG100-KIN (B) but a significant down-regulation was observed in the spinal cord of the *Atxn2*-CAG100-KIN animals at 14 month of age (FC 0.62 p-value 0.003) (B).

3.3.1.3 Co-staining of ATXN2 and AHNAK in the spinal cord of old *Atxn2*-CAG100-KIN animals shows co-aggregation of this two proteins

Because the results from Q-PCR and the proteome data showed a larger effect in the spinal cord at old age rather than in the cerebellum or the hemisphere, immunohistochemistry was performed on 30 μ m spinal cord cryosections from 14 month-old *Atxn2*-CAG100-KIN animals (Figure 3.11).

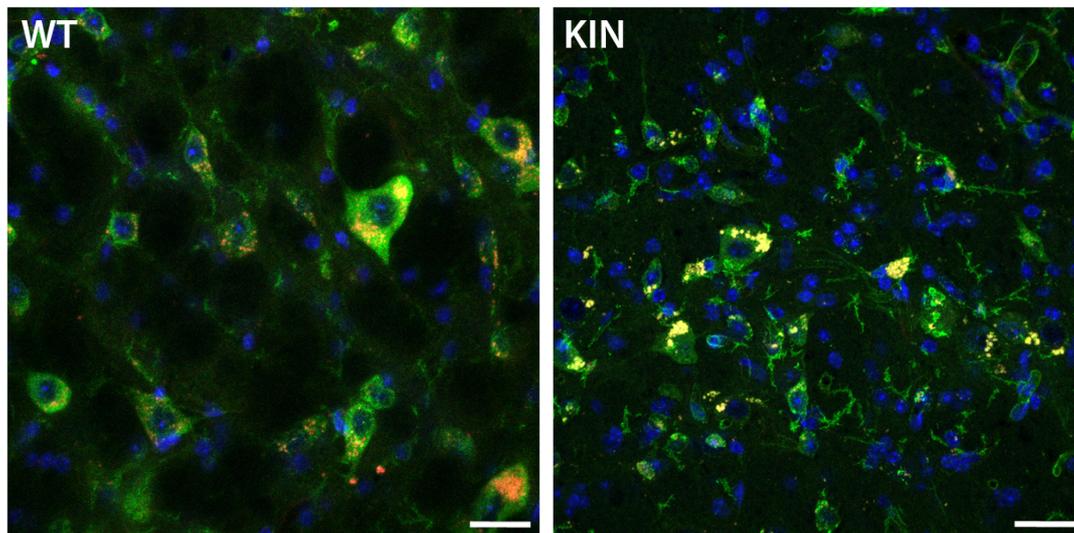
ATXN2 AHNAK DAPI

Figure 3.11. Co-staining of ATXN2 and AHNAK in the spinal cord of 14 months old *Atxn2*-CAG100-KIN animal compared to its WT littermate. Co-aggregates (yellow) and ATXN2 aggregates (green) can be observed in the KIN section while ATXN2 has a cytoplasmic distribution in the WT littermate. Scale bar represents 25 μm .

In the left image (Figure 3.11, WT) the normal cytosolic distribution of ATXN2 can be observed (green signal) while AHNAK (red signal) seems to localize around the nuclei probably at the endoplasmic reticulum or close to it of the spinal cord neurons. On the other hand, in the *Atxn2*-CAG100-KIN (right image), a strong yellow signal can be seen corresponding to the co-aggregation of ATXN2 (green) and AHNAK (red) suggesting their interaction in neurons. Another green signal coming from what seem to be glia cells appears in the KIN pointing to an increased expression of ATXN2 in these types of cells.

3.3.1.4 Assessment of *Atxn2*, *Ahnak* and *Ahnak2* in the stress response to sodium arsenite in mouse embryonic fibroblasts

Since AHNAK is a 700 kDa protein, assessing its levels in a WB was difficult to optimize. Therefore, using the mouse embryonic fibroblasts (MEFs) established from the *Atxn2*-CAG100-KIN mouse model, further investigations were carried out regarding *Ahnak* and *Ahnak2* mRNA expression levels. Sodium Arsenite (NaArs) was used at different concentrations (0.5 mM and 1 mM) to induce stress for 30 or 60 min. After the treatment, total RNA was isolated and Q-PCR was used to determine the mRNA level of *Ahnak*, *Ahnka2* and *Atxn2* compared to the non-treated-control for WT and KIN.

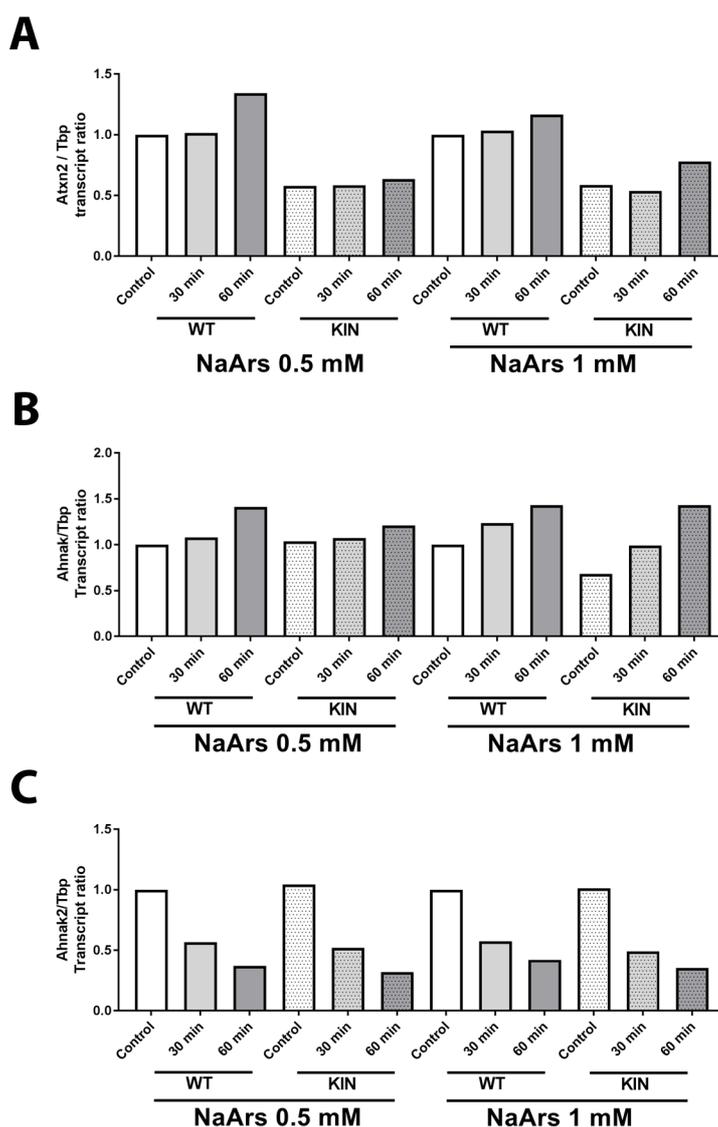


Figure 3.12. Transcript level of *Atxn2* (A), *Ahnak* (B) and *Ahnak2* (C) in mouse embryonic fibroblasts (MEF) from *Atxn2*-CAG100-KIN mice and WT. MEFs (KIN n=1 and WT n=1) were stressed with NaArs at different concentrations (0.5 mM and 1 mM) at two time points (30 min and 60 min) compared to their control.

Only one WT versus one KIN was assessed since KIN MEFs showed half of the *Atxn2* transcript level compared to WT without treatment, mimicking a partial loss-of-function. Consequently, it was not possible to evaluate the effect of the CAG100 expansion and no statistical analysis was performed. However, a constant reduction of *Ahnak2* transcript (Figure 3.12, C) was detected in all cases compared to their controls.

3.3.1.5 Assessment of *AHNAK* transcript levels in SH-SY5Y *ATXN2*-knock-down under starvation stress

After working with MEFs and failing to detect strong changes in the transcript level of *Ahnak* and *Ahnak2*, one hypothesis was that the *ATXN2* loss-of-function might strongly affect the transcript levels of *Ahnak* in neuronal cell types since MEFs seem to be quite resistant to stress. To test this hypothesis, the immortalized human neuroblastoma cell line SH-SY5Y was used. The *ATXN2*-Knock-down (*ATXN2*-KD) and Non-Target-Knock-down (Non-Target-KD) cell lines were generated prior to this work and the response of *ATXN2* transcript level changes in starvation course experiments were reported (Sen et al 2016).

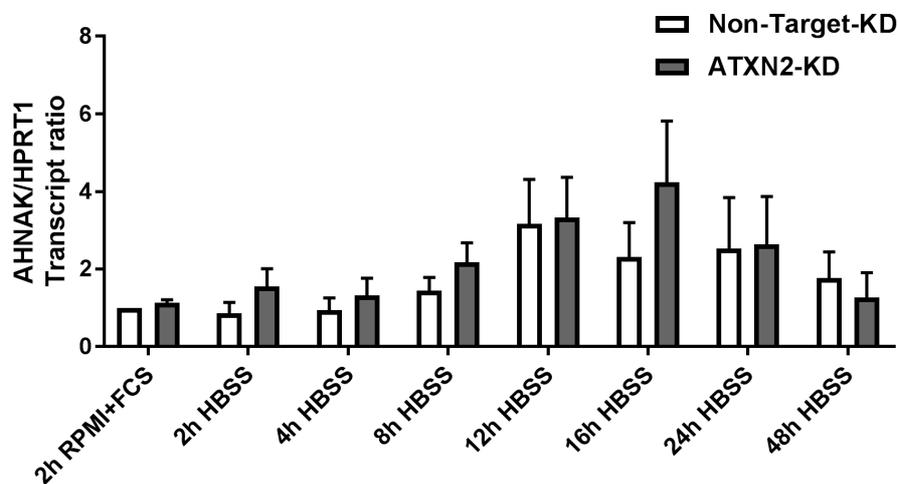


Figure 3.13. Assessment of *AHNAK* transcript levels in SH-SY5Y *ATXN2*-Knock-down and Non-Target-Knock-down under starvation show no significant changes. *HPRT1* was used as housekeeping gene.

Three different sets of Non-Target-KD and *ATXN2*-KD were assessed to determine the transcript expression level of *AHNAK* under starvation and the effect of the *ATXN2* loss for several time points. No significant changes were detected for *AHNAK* even though *AHNAK* protein levels were up-regulated in the *Atxn2*-CAG100-KIN mouse model, suggesting that either *AHNAK* transcript level was unaffected in SH-SY5Y cultures, or that starvation-induced stress was not affecting *AHNAK* role/pathways

3.3.2 PCBP1 and PCBP2 are also highlighted by the proteome data

Other altered RBPs found in the cerebellar and spinal cord proteome are PCBP1 and PCBP2. They are part of the heterogeneous nuclear ribonucleoprotein

(hnRNPs) family that can be divided into further categories. The poly(C)-binding protein (PCBP) is one of these categories containing the hnRNP K and hnRNP E1 through 4, also known as α -CPs or PCBP1 through 4. All of these contain three KH domains, first described in hnRNP K (Siomi et al 1993). KH domains consist of 70 amino acids and show high affinity and specificity to polypyrimidine or C-rich regions in RNA, ssDNA or dsDNA (Valverde et al 2008). Their main functions include several RNA and DNA metabolism processes like alternative splicing, mRNA stabilization and transport, translational silencing and enhancement, and iron turnover (Nazarov et al 2019). In 2016, Ghanem *et al.* showed that *Pcbp1* and *Pcbp2* are individually necessary for embryonic development *in vivo* (Ghanem et al 2016), supporting the hypothesis that these two proteins have different roles in the organism even though *Pcbp1* was generated from a retrotransposition event from the most abundant *Pcbp2* mRNA (Makeyev et al 1999). Moreover, they have been shown to affect the translation and gene expression of poliovirus and HIV respectively (Blyn et al 1997, Woolaway et al 2007). PCBP1 has been recently linked to oxidative RNA damage response (Ishii & Sekiguchi 2019).

3.3.2.1 Transcript levels of *Pcbp1* and *Pcbp2* are not changed in the cerebellum, spinal cord, nor hemisphere of the *Atxn2*-CAG-100-KIN mouse model

Similar to the previous section, the transcript levels of *Pcbp1* and *Pcbp2* were evaluated in the cerebellum of *Atxn2*-CAG100-KIN at different ages and *Atxn2*-KO mouse models. No dysregulations were detected, neither in the spinal cord nor hemisphere of the old *Atxn2*-CAG100-KIN animals (Figure 3.14).

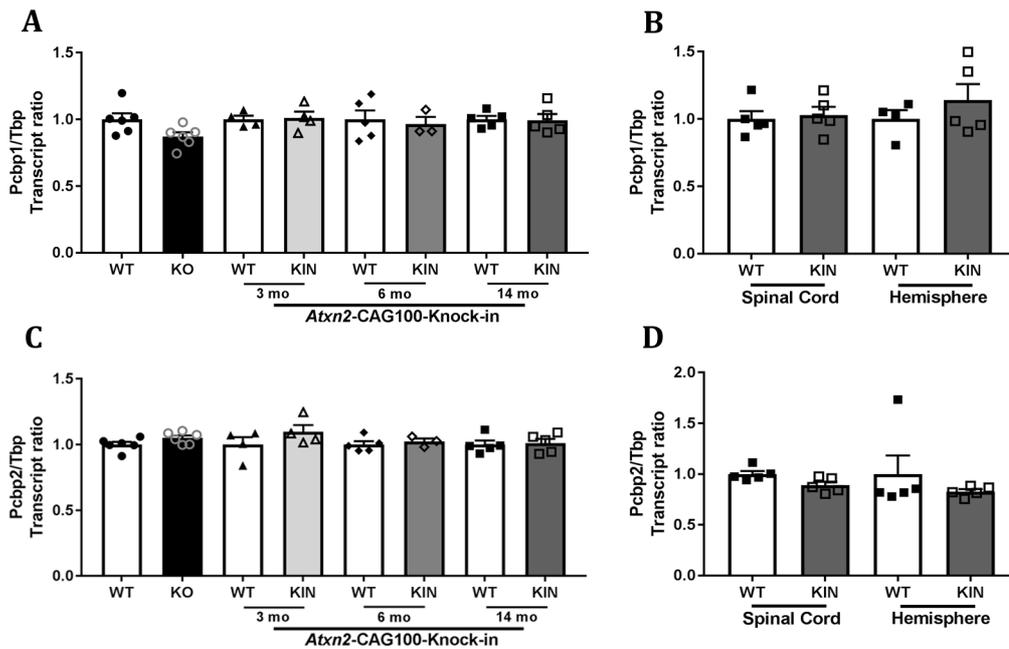


Figure 3.14. Assessment of the transcript levels of Pcbp1 and Pcbp2 shows no alterations. (A, C) Cerebellar samples from *Atxn2*-KO and *Atxn2*-CAG100-KIN at different ages, and (B, D) spinal cord and hemisphere of 14-months-old *Atxn2*-CAG100-KIN samples.

3.3.2.2 Histology PCBP1 and PCBP2 in the cerebellum of old *Atxn2*-CAG100-KIN mice compared to WT shows different pattern

Although the transcript levels of these two proteins did not change under any test conditions, alteration of the protein level or localization could still have occurred. Therefore, immunohistochemistry was used to determine protein localization in 30 μ m cerebellar cryosections from 14-month-old *Atxn2*-CAG100-KIN and WT animals.

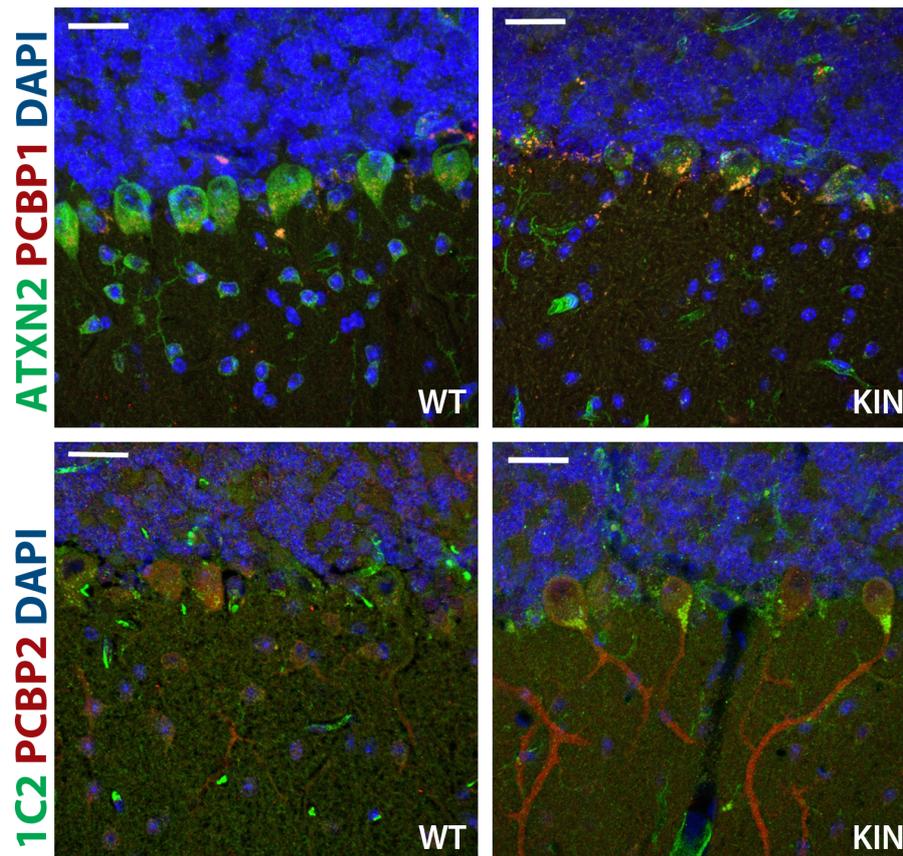


Figure 3.15. Co-immuno staining of PCBP1/PCBP2 (red) with ATXN2/1C2 (green) in the cerebellum of old *Atxn2*-CAG100-KIN mouse compared to its WT shows a different distribution in the KIN. Scale bar represents 25 μ m.

In the upper panels of the Figure 3.15, the distribution of PCBP1 can be observed. In the WT, the PCBP1 signal was barely detected; only some discrete punctate can be appreciated in the cytoplasm of the Purkinje neurons (PN). By contrast in the KIN it seems to co-aggregate with ATXN2 towards the apical base of the PN. The lower panels of Figure 3.15 show the co-staining of 1C2 antibody (able to detect the expanded PolyQ section) and PCBP2. Similar to the PCBP1 case, the detected signal for PCBP2 in WT was weak and mainly localized in the cytoplasm of the PN. On the other hand, the KIN shows an increase of PCBP2 signal in PN, especially in the main dendrite. Again, the 1C2 antibody showed aggregates at the apical base of the PN corresponding to the expanded ATXN2. Overall, the different distribution of PCBP1 and PCBP2 in the KIN cerebellar tissue may reflect their different neuronal roles suggested by prior publications (Ghanem et al 2016) and how they are individually affected by the expanded ATXN2 in the *Atxn2*-CAG100-KIN mouse.

3.3.2.3 The protein level of PCBP1 is up regulated in the cerebellum of 14-month-old *Atxn2*-CAG100-KIN

To further investigate the protein level of PCBP1 in the cerebellum of 14-month-old animals, western blot (WB) were performed using the same antibody as used for the immunohistochemistry. Unfortunately, a clear signal was not detected for PCBP2 so the potential up-regulation observed in the proteome data could not be validated.

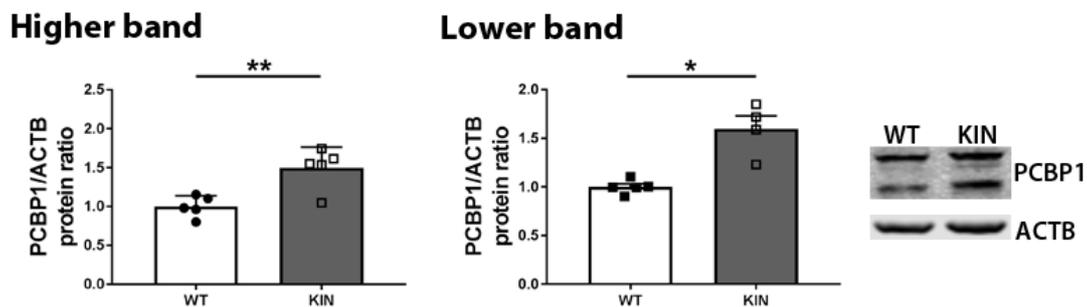


Figure 3.16. WB of PCBP1 shows up-regulation in cerebellar of *Atxn2*-CAG100-KIN compared to WT. A 5 versus 5 sex- and age-matched set of samples were used to determine the protein level of PCBP1 in the old cerebellum of the mouse model.

The antibody against PCBP1 showed two bands around the right size for the protein (37 kDa). Although no isoforms have been described for this protein, both bands were quantified and both showed a significant up-regulation (Higher band FC 1.5 p-value 0.009; Lower band FC 1.6 p-value 0.017). It is possible that the antibody is detecting a similar region from both PCBP1 and PCBP2 proteins, which are exposed after denaturing them when boiled with the loading buffer.

3.3.2.4 Evaluation of PCBP2 in *Atxn2*-CAG100-KIN MEFs in response to poly(IC) treatment

PCBP2 has been involved in different virus infections (Li et al 2019a, Walter et al 2002) and has also been described as a stress granule component (Fujimura et al 2008, Kattuah et al 2019). Therefore, the response to treatment with poly(IC), mimicking a viral infection, was evaluated in the *Atxn2*-CAG100-KIN MEFs with regard to the localization of PCBP2. For that, WT and KIN MEFs were treated with 100 ng of poly(IC) for 6 hours as previously published (Reineke et al 2018b).

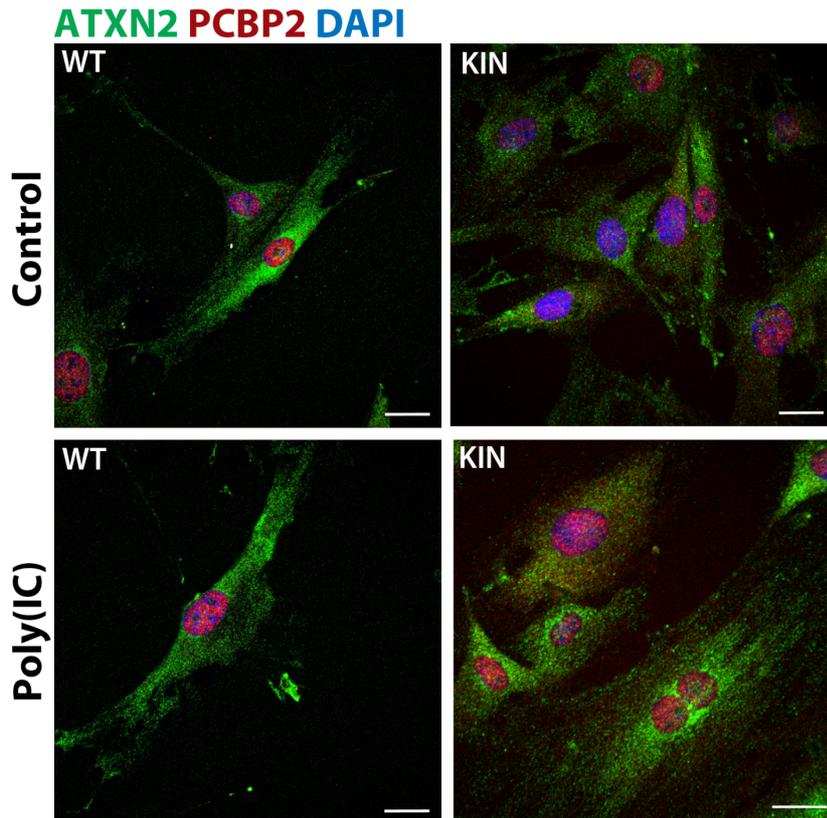


Figure 3.17. Immunocytochemistry for ATXN2 (green) and PCBP2 (red) in MEF control (WT and KIN) compared to MEFs treated with Poly(IC) (WT and KIN). No stress granule formation was detected. Scale bar represents 25 μ m.

Although stress granule formation was expected in WT conditions based on the publication of Reineke *et al* 2018, none were detected, nor was any relocalization of the PCBP2 (Figure 3.17).

3.3.3 Several other RBPs appear dysregulated in the proteome data set but only a few are altered at their transcript level

Several other nucleic acid binding proteins were found to be dysregulated in the proteome data set, especially those involved in RNA metabolism. Thus, their transcript levels were investigated by Q-PCR using cerebellar samples from *Atxn2*-KO and *Atxn2*-CAG100-KIN at the late stage of the disease.

The results are shown in tables depending on their properties. Candidate genes have been divided in five categories: RNA metabolism, Heterogeneous Nuclear Ribonucleoprotein (hnRNP), P-body component, Eukaryotic Translation Initiation Factor, and DNA damage response. All categories, excluding the DNA damage response, interact with RNA.

Gene symbol		<i>Atxn2</i> -KO FC	<i>Atxn2</i> -CAG100-KIN FC
RNA metabolism			
<i>Aar2</i>	AAR2 Splicing Factor	1.022 <i>n.s.</i>	0.765 ***
<i>Celf3</i>	CUGBP Elav-Like Family Member 3	1.171 *	1.104 <i>n.s.</i>
<i>Cirbp</i>	Cold Inducible RNA Binding Protein	0.876 <i>n.s.</i>	1.733 **
<i>Ddx1</i>	DEAD-Box Helicase 1	0.981 <i>n.s.</i>	0.931 <i>n.s.</i>
<i>Ddx26b</i>	DEAD/H Box Polypeptide 26B	1.01 <i>n.s.</i>	1.121 **
<i>Ddx6</i>	DEAD-Box Helicase 6	0.911 <i>n.s.</i>	0.917 *
<i>Dhx15</i>	DEAH-Box Helicase 15	0.868 <i>n.s.</i>	1.013 <i>n.s.</i>
<i>Fmr1</i>	Fragile X Mental Retardation 1	0.928 <i>n.s.</i>	0.918 <i>n.s.</i>
<i>Lsm1</i>	LSM1 Homolog, MRNA Degradation Associated	0.884 *	0.946 <i>n.s.</i>
<i>Pabpc1</i>	Poly(A) Binding Protein Cytoplasmic 1	1.059 <i>n.s.</i>	1.21 *
<i>Prpf19</i>	Pre-mRNA Processing Factor 19	1.038 <i>n.s.</i>	0.896 *
<i>Puf60</i>	Poly(U) Binding Splicing Factor 60	1.089 <i>n.s.</i>	0.869 **
<i>Pura</i>	Purine Rich Element Binding ProteinA	0.89 *	1.078 <i>n.s.</i>
<i>Sf3a1</i>	Splicing factor 3a protein	1.229 <i>n.s.</i>	0.991 <i>n.s.</i>
<i>Sf3a2</i>	Splicing factor 3a protein	1.098 <i>n.s.</i>	0.853 *
<i>Srrm2</i>	Serine/Arginine Repetitive Matrix 2	0.968 <i>n.s.</i>	0.97 <i>n.s.</i>
<i>Srsf1</i>	Serine/Arginine Rich Splicing Factor 1	0.963 <i>n.s.</i>	1.039 <i>n.s.</i>
<i>Srsf2</i>	Serine/Arginine Rich Splicing Factor 2	0.916 <i>n.s.</i>	1.039 <i>n.s.</i>
<i>Ssb</i>	Small RNA Binding Exonuclease Protection Factor	1.026 <i>n.s.</i>	0.938 <i>n.s.</i>
<i>Thrap3</i>	Thyroid Hormone Receptor Associated Protein 3	1.042 <i>n.s.</i>	0.963 <i>n.s.</i>
<i>Tpr</i>	Translocated Promoter Region	1.058 <i>n.s.</i>	1.021 <i>n.s.</i>
<i>U2af2</i>	U2 Small Nuclear RNA Auxiliary Factor2	0.961 <i>n.s.</i>	0.973 <i>n.s.</i>
<i>Ybx1</i>	Y-Box Binding Protein 1	1.257 ***	1.172 <i>n.s.</i>

Table 3.2. Evaluation of the transcript level of several RNA Binding Proteins involved in RNA metabolism, especially in RNA splicing, by Q-PCR. Comparing cerebellar samples from *Atxn2*-KO and old *Atxn2*-CAG100-KIN, no common dysregulated genes were found.

A total of 23 RBPs were investigated at the transcript level; many of them have been found in SGs (Nunes et al 2019). Although they appear mainly up-regulated at the proteome data set, only three up-regulations were detected in *Atxn2*-CAG100-KIN (Table 3.2). Five down-regulations affecting splicing factors were also found to be significant in the cerebellar samples of *Atxn2*-CAG100-KIN; all of them quite discrete. No common dysregulations were found in this category for *Atxn2*-KO and *Atxn2*-CAG100-KIN samples. Only the transcript levels of four genes were found dysregulated in the *Atxn2*-KO; two up and two down-regulated.

Gene symbol		<i>Atxn2</i> -KO FC	<i>Atxn2</i> -CAG100-KIN FC
Heterogeneous Nuclear Ribonucleoprotein			
<i>hnRNP A2B1</i>	Heterogeneous Nuclear Ribonucleoprotein A2/B1	0.927 <i>n.s.</i>	1.327 **
<i>hnRNP I</i>	Heterogeneous Nuclear Ribonucleoprotein I	1.121 <i>n.s.</i>	1.042 <i>n.s.</i>
<i>hnRNP D</i>	Heterogeneous Nuclear Ribonucleoprotein D	0.927 <i>n.s.</i>	1.03 <i>n.s.</i>
<i>hnRNP K</i>	Heterogeneous Nuclear Ribonucleoprotein K	1.019 <i>n.s.</i>	1.026 <i>n.s.</i>
<i>hnRNP U</i>	Heterogeneous Nuclear Ribonucleoprotein U	1.172 <i>n.s.</i>	0.965 <i>n.s.</i>
<i>Pcbp 3</i>	Poly(RC) Binding Protein 3	1.056 <i>n.s.</i>	0.911 <i>n.s.</i>
<i>Pcbp 4</i>	Poly(RC) Binding Protein 4	1.129 <i>n.s.</i>	0.865 <i>n.s.</i>

Table 3.3. Evaluation of transcript level of several Heterogeneous Nuclear Ribonucleoprotein involved in RNA metabolism, especially in RNA transport. Only the ALS-linked *hnRNP A2B1* gene showed a significant but mild up-regulation in the 14-month-old cerebellar *Atxn2*-CAG100-KIN samples compared to the WT.

Heterogeneous Nuclear Ribonucleoproteins (hnRNPs) are a group of RBP that have been involved in several RNA metabolism functions like splicing, transport and translation (Bryant & Yazdani 2016, Geuens et al 2016, Han et al 2010). Neurons need to closely regulate mRNA homeostasis due to their non-dividing nature. Therefore, it is not surprising that many hnRNPs have been linked to neurodegenerative disorders like Alzheimer's disease (AD), amyotrophic lateral sclerosis (ALS) and fronto-temporal lobe dementia (FTLD) (Appocher et al 2017, Hoek et al 1998, Liu et al 2015, Mohagheghi et al 2016). This group of RBPs has four unique RNA binding domains (RBDs): RNA recognition motif (RRM), quasi-RRM, glycine rich domain RGG box, and KH domain. Under normal conditions, hnRNP are located mainly in the nucleus but they are able to translocate to the cytoplasm after either recruitment or post-translational stimulation. Thus, the transcript levels of 7 hnRNPs were determined by Q-PCR and only one up-regulation for *hnRNP A2/B1* was detected (FC 1.327 p-value 0.003) in the *Atxn2*-CAG100-KIN (Table 3.3). This protein has been linked to ALS and FTLD, and plays an important role in oligodendrocytic and neuronal mRNA trafficking (Shan et al 2003).

Gene symbol		<i>Atxn2</i> -KO FC	<i>Atxn2</i> -CAG100-KIN FC
P-body components			
<i>Dcp1a</i>	Decapping mRNA 1A	0.844 <i>n.s.</i>	0.893 <i>n.s.</i>
<i>Dcp1b</i>	Decapping mRNA 1B	0.946 <i>n.s.</i>	1.104 <i>n.s.</i>
<i>Dcp2</i>	Decapping mRNA 2	0.655 *	0.785 **
<i>Dcps</i>	Decapping Enzyme Scavenger	0.989 <i>n.s.</i>	0.919 <i>n.s.</i>

Table 3.4. Evaluation of transcript level of several processing bodies components involved in RNA decay by Q-PCR. These genes are involved in the degradation of RNA and localize in p-bodies. Only one of them was dysregulated and a down-regulation was found in both mouse models, *Dcp2* (highlighted in grey).

During periods of stress it might be necessary to stop translation or degrade some mRNAs. Two different cytoplasmic aggregates or sites have been described as responsible for these events; the previously mentioned stress granules (SGs) and the processing bodies (PBs). They are not independent of each other, both are induced by stress and are functionally linked (Kedersha et al 2005). PBs were first described in yeast as a site of mRNA turnover based on deadenylation and decapping (Sheth & Parker 2003) and similar structures were shown in mammalian cells (Cougot et al 2004, Ingelfinger et al 2002). Since ATXN2 has been described to have a role in global mRNA stability and translation (Fittschen et al 2015, Tadauchi et al 2004, Yokoshi et al 2014), several components of PBs were analyzed at their transcript level (Table 3.4). Interestingly, a common down-regulation for *Dcp2* was detected in the cerebellar samples from *Atxn2*-KO and old *Atxn2*-CAG100-KIN animals when compared to their controls.

Gene symbol		<i>Atxn2</i> -KO FC	<i>Atxn2</i> -CAG100-KIN FC
Eukaryotic Translation Initiation Factor			
<i>Eif2a</i>	Eukaryotic Translation Initiation Factor 2 A	1.042 <i>n.s.</i>	1.024 <i>n.s.</i>
<i>Eif3a</i>	Eukaryotic Translation Initiation Factor 3 A	0.956 <i>n.s.</i>	0.929 <i>n.s.</i>
<i>Eif4e</i>	Eukaryotic Translation Initiation Factor 4 E	0.853 <i>n.s.</i>	0.975 <i>n.s.</i>
<i>Eif5a2</i>	Eukaryotic Translation Initiation Factor 5 A2	0.589 *	0.589 ****
<i>Eif5b</i>	Eukaryotic Translation Initiation Factor 5 B	0.73 *	0.92 <i>n.s.</i>
<i>Eif6</i>	Eukaryotic Translation Initiation Factor 6	1.174 <i>n.s.</i>	0.897 <i>n.s.</i>

Table 3.5. Evaluation of the transcript level of several Eukaryotic Translation Initiation Factors that were found dysregulated in the proteome data set. A common down-regulation for *Eif5a2* (highlighted in grey) was found for both mouse models.

Translation initiation is a key regulatory step in protein synthesis controlled by several protein factors known as eukaryotic translation initiation factors (Eifs). These factors are responsible for recruiting the ribosomal subunits to the right position to start translation (Obayashi et al 2017). Therefore, they are potential targets for diseases linked to altered protein synthesis like cancer (Chu et al 2016). As previously mentioned, ATXN2 has been linked to mRNA stability (Yokoshi et al 2014) and translation (Tadauchi et al 2004). To explore any potential dysregulation of Eifs caused by the expanded ATXN2 in the *Atxn2*-CAG100-KIN model, several Eifs transcript levels were determined by Q-PCR (Table 3.5). Only one down-regulation was detected in the cerebellum of *Atxn2*-CAG100-KIN mice when compared to their WT, corresponding to *Eif52a* (FC 0.6 p-value <0.0001). A similar down-regulation of *Eif5a2* was detected in the *Atxn2*-KO samples (FC 0.6 p-value 0.0118) in addition to a more discrete down-regulation of *Eif5b* (FC 0.73 p-value 0.038). Interestingly, *Eif5a* has been shown to not only participate on the initiation step but also in the elongation step of protein synthesis (Saini et al 2009).

Gene symbol		<i>Atxn2</i> -KO FC	<i>Atxn2</i> -CAG100-KIN FC
DNA damage response			
<i>Atm</i>	Ataxia Telangiectasia Mutated	0.974 <i>n.s.</i>	0.844 **
<i>Atr</i>	Ataxia Telangiectasia Related	1.039 <i>n.s.</i>	1.042 <i>n.s.</i>
<i>Blmh</i>	Bleomycin hydrolase	1.147 <i>n.s.</i>	0.931 <i>n.s.</i>
<i>Pms2</i>	Pms1 Homolog 2, Mismatch Repair	1.127 <i>n.s.</i>	0.941 <i>n.s.</i>

Table 3.6. Evaluation of the transcript level of several genes related to DNA damage response. No altered transcript levels were found for *Atxn2*-KO mouse model and only *Atm* was found significantly down regulated for *Atxn2*-CAG100-KIN.

The last category, to which their transcript levels were evaluated, corresponds to genes involved in DNA damage response. Several neurodegenerative disorders caused by unstable CAG repeats in the DNA have been linked to defects in DNA damage response (Iyer et al 2015). ATXN2 has also been shown to have a role in

preserving genome integrity by preventing the accumulation of R-loops and maintaining rDNA-repeats stability (Abraham et al 2016, Ostrowski et al 2018). A total of 4 genes were evaluated at the transcript level and only the recessive ataxia gene *Atm* was down regulated (FC 0.84 p-value 0.0035) in the *Atxn2*-CAG100-KIN samples (Table 3.6).

3.4 Exploring the Spinal Cord pathology in the *Atxn2*-CAG100-KIN mouse model

After analyzing the expression of several RBP in the cerebellum and spinal cord, it was clear that the spinal cord was affected more severely by the CAG expansion. Few publications focusing on SCA2 patient pathology in the spinal cord are available (Estrada et al 1999, Velazquez-Perez et al 2018, Velazquez-Perez et al 2017). Moreover, ATXN2 intermediate expansions have been linked to the pathology of ALS as a risk factor (Elden et al 2010, Gispert et al 2012, Ross et al 2011). Therefore, it is of interest to further investigate the pathology affecting this tissue in the *Atxn2*-CAG100-KIN line at different ages compared to the *Atxn2*-KO, and to understand the effects caused by toxic-gain-of-function compared to those caused by the loss-of-function.

3.4.1 TAR DNA-binding protein 43 is up-regulated in the spinal cord but not in the cerebellum of the *Atxn2*-CAG100-KIN model while *Tardbp* transcript levels remain unchanged

It has been shown recently that targeting *Atxn2* in a mouse model of ALS overexpressing TDP43 extends the life span of these animals significantly (Becker et al 2017), strongly suggesting a functional interaction between these two proteins. One question that rose from this publication was if the pathology in the spinal cord of the *Atxn2*-CAG100-KIN resembles the pathology observed in TDP43-ALS cases. The first step to answer this question was to determine the protein level of TDP43 in the spinal cord of *Atxn2*-CAG100-KIN animals at 3 months and 14 months compared to cerebellar levels. The *Atxn2*-KO mouse model was also investigated in order to decipherer the differences between the toxic-gain-of-function and loss-of-function. Protein level of the neuronal marker NeuN was also checked since a reduction would point to a decrease in neuronal

count in the spinal cord. NeuN levels were also checked in the cerebellar samples to determine if other neuronal populations aside from PN are affected. A discrete but significant reduction of the Purkinje marker calbindin 1 (CABL1) was already known (Sen et al 2019).

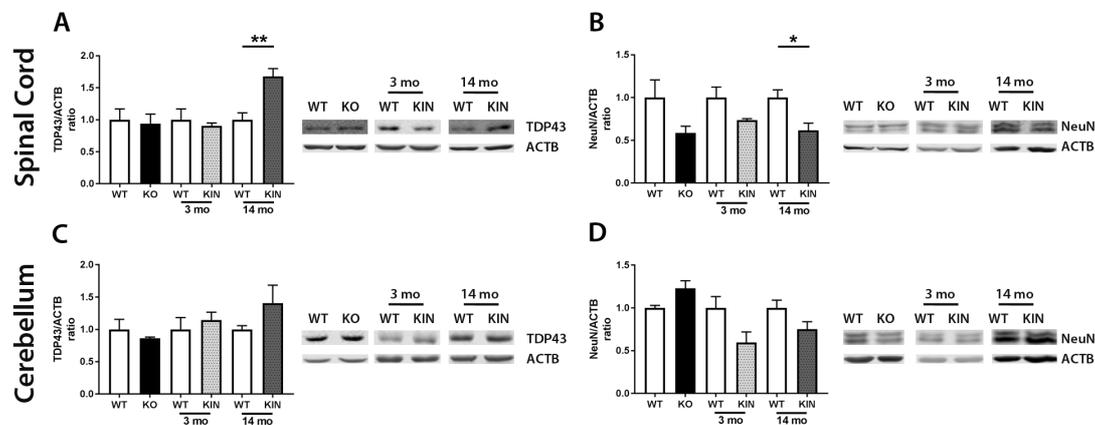


Figure 3.18. Western blots of TDP43 (A, C) and NeuN (B, D), as neuronal marker, in the Spinal Cord and Cerebellum of *Atxn2*-KO and *Atxn2*-CAG100-KIN at 3 and 14 month. An evident increase of TDP43 (FC 1.68 p-value 0.003) in the spinal cord of the old KIN animals can be appreciated together with lower levels of NeuN. No significant dysregulations were detected in the spinal cord nor cerebellum of *Atxn2*-KO and young *Atxn2*-CAG100-KIN animals for these two proteins.

A clear increase of TDP43 protein (FC 1.68 p-value 0.003) was observed in the spinal cord of the old *Atxn2*-CAG100-KIN animals compared to their WT (Figure 3.18,A). No other dysregulation with regards to TDP43 was significant in the spinal cord of the younger and *Atxn2*-KO animals, nor in any cerebellar sample set (Figure 3.18,A and C). These data demonstrates the specific and different affection of the spinal cord compared to the cerebellum. A down-regulation of NeuN level was also detected for the old spinal cord samples (FC 0.61 p-value 0.012) pointing to a loss of neurons in this tissue (Figure 3.18,B).

Next, the transcript levels of *Atxn2* and *Tardbp* were investigated. It is possible that the transcript levels of *Atxn2* were altered due to the addition of 100 CAGs, or that the effects seen in the TDP43 levels were due to an increase of the *Tardbp* transcript levels.

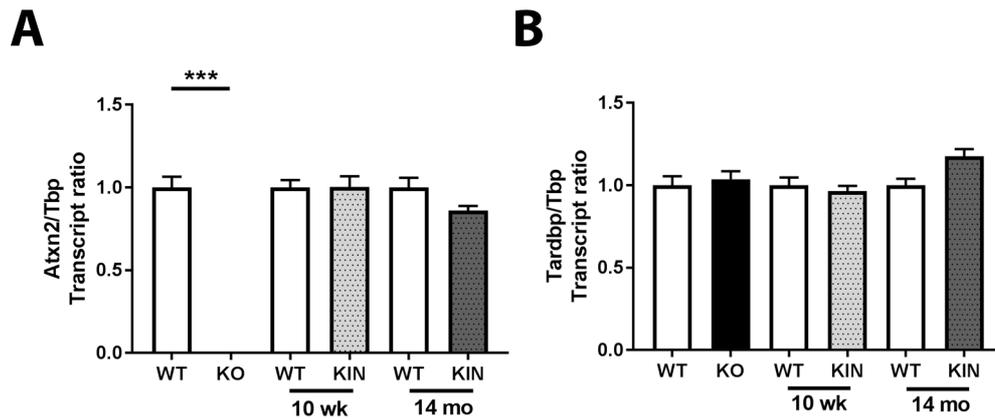


Figure 3.19. Transcript levels of *Atxn2* and *Tardbp* in the spinal cord of *Atxn2*-KO and *Atxn2*-CAG100-KIN at 3 and 14 months compared to their WT. There are no differences except for the case of *Atxn2* levels in the spinal cord of *Atxn2*-KO animals, confirming the Knock out.

No differences in *Atxn2* and *Tardbp* levels were detected in the spinal cord samples (Figure 3.19). Except for the absence of *Atxn2* in *Atxn2*-KO animals. This was as expected, confirming that the CAG expansion is not affecting the transcript levels of *Atxn2* and that the increased levels of TDP43 protein are not caused by an up-regulation of its transcript.

3.4.2 Co-immunofluorescence staining for ATXN2 and TDP43 show co-aggregation in a time dependent manner

TDP43 is known to shuttle from the nuclei to the cytosol in periods of cellular stress and to be part of the stress granules where several mRNAs stall until the non-favorable conditions have passed. ATXN2 also takes part in the formation of stress granules and the expanded ATXN2 forms aggregates in the Purkinje neurons of the *Atxn2*-CAG100-KIN over time (Figure 3.5). After observing an increase of TDP43 levels, it was key to investigate the formation of ATXN2 aggregates in the spinal cord over time and see if TDP43 was also localizing in the same location. To do that, 30 μ m cryosections from the thoracic part of the spinal cord of 3, 6 and 14-months-old *Atxn2*-CAG100-KIN and their sex and age-match WT were used. To again confirm that the alterations are caused by a toxic-gain-of-function and not due to the loss-of-function of ATXN2, the *Atxn2*-KO mouse model was used. To verify that the signal detected was the ATXN2 aggregates, PABP1 was again used as a control since it is a known interactor during periods of stress.

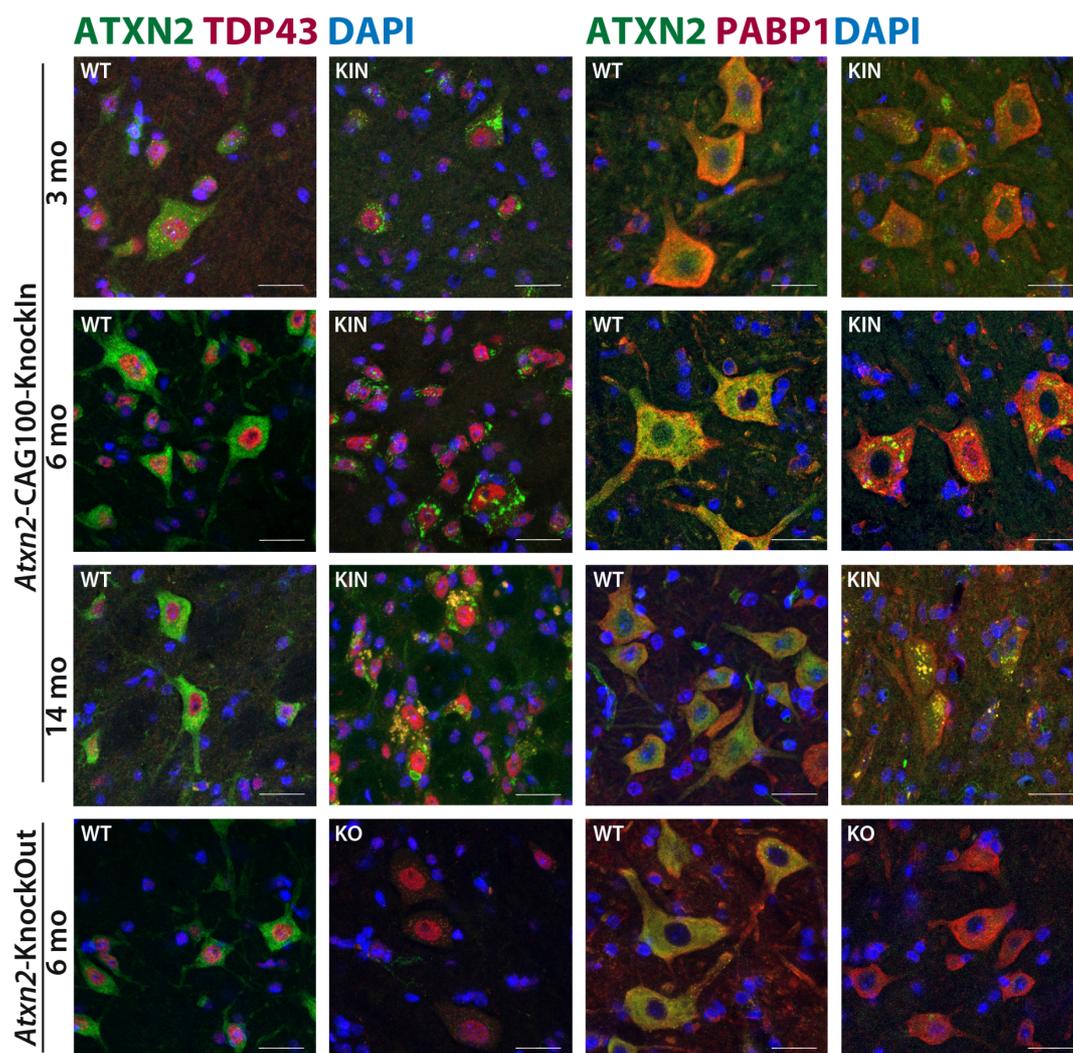


Figure 3.20. Co-immuno staining of ATXN2 (green) with TDP43 or PABP1 (red) in the spinal cord of *Atxn2*-KO or *Atxn2*-CAG-100 animals compared to their WT at different ages shows ATXN2 aggregates and co-localization of TDP43 and PABP1 over time. Nuclei were detected with DAPI (blue). Scale bar represents 25 μ m.

In the left-most panels of Figure 3.20 the co-staining of ATXN2 (green) and TDP43 (red) for WT and KIN or KO is displayed. The WT animals show a cytoplasmic distribution for ATXN2 and an exclusive nuclear signal for TDP43 for all ages and genotypes. When comparing the KIN it becomes evident that, like in the cerebellar staining (Figure 3.5), the ATXN2 aggregates start at 3 months of age and increase in number and size over time filling the cytoplasmic space during advanced stage of the disease. TDP43 discretely starts to co-aggregate at 6 months being strongly evident at the age of 14-month-old. To confirm these observations, the right side of the figure shows the co-staining of ATXN2 (green) and PABP1 (red). In the WT pictures, ATXN2 shows a cytoplasmic distribution

like PABP1, while in the KIN pictures the time-dependent co-aggregation can be also observed for PABP1.

3.4.3 Co-immunofluorescence staining of ATXN2 and TIA1 also shows co-aggregation in the spinal cord of old *Atxn2*-CAG100-KIN animals compared to WT

To further characterize the spinal cord pathology, another RBP implicated in ALS was studied: T-Cell-Restricted Intracellular Antigen-1 (TIA-1). TIA-1 is a RBP that mainly localizes in the nuclei but can shuttle to the cytoplasm where it can be part of the stress granules during of environmental stress (Kedersha et al 2000, Kedersha et al 1999). Therefore, immunohistochemistry was performed on the old spinal cord of *Atxn2*-CAG100-KIN and compared to its WT.

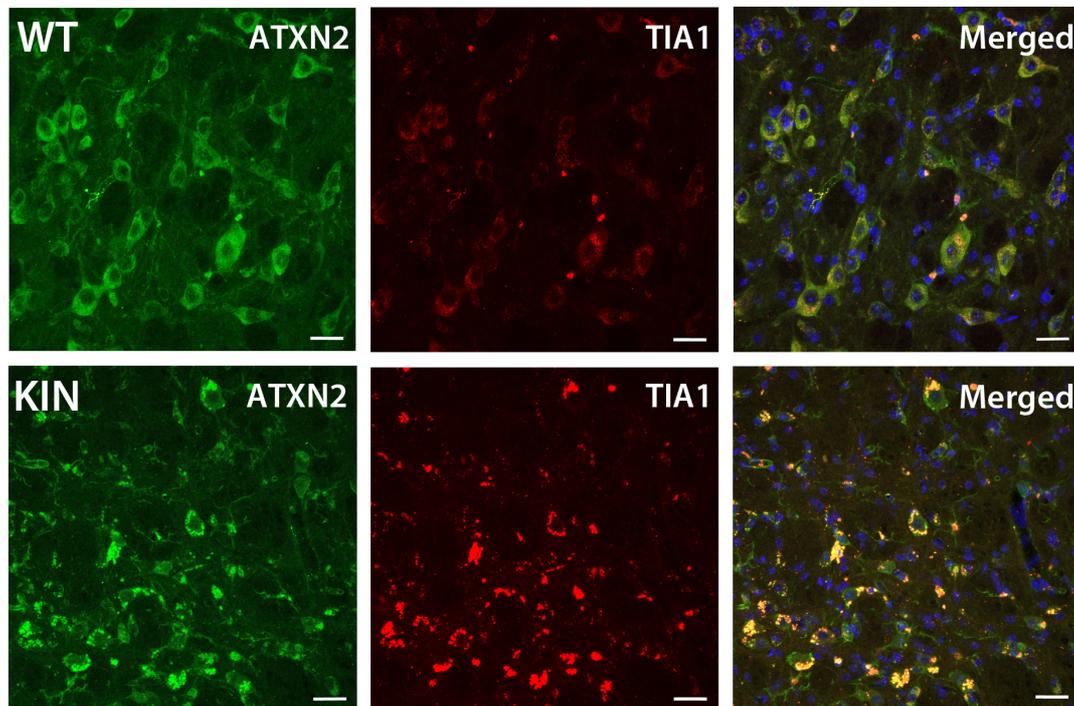


Figure 3.21. Staining of ATXN2 (green) and TIA1 (red) in the spinal cord of old *Atxn2*-CAG100-KIN animal shows co-aggregation. Nuclei were detected with DAPI (blue). Scale bar 25 μ m.

As expected, the TIA 1 (red) signal also co-aggregated with ATXN2 (green) at the late stage of the disease in the *Atxn2*-CAG100-KIN model suggesting an alteration of several ALS-implicated RBP functions (Figure 3.21). Thus, this model would be an excellent option to study the progression and development of spinal cord degeneration without overexpression, nor expression of human genes, allowing a better understanding of the biology of the mouse model.

3.4.4 The protein level of non-cleaved CASP3 is up-regulated specifically in the spinal cord of old *Atxn2*-CAG100-KIN mice while its transcript level is not changed

Several studies showed that TDP43 can be cleaved into C-terminal fragments by caspase 3 (CASP3) (Dormann et al 2009, Nishimoto et al 2010, Zhang et al 2007), accumulating in affected neurons and glia (Igaz et al 2008, Neumann et al 2006). As a follow-up to describing the involvement of ATXN2 as a risk factor in ALS (Elden et al 2010), the same lab investigated the implicated mechanisms (Hart & Gitler 2012). Using three different in vitro models (HEK293T cells, ALS-patient-derived lymphoblast cell lines and differentiated human M17 neuroblastoma cells), they identified the activation of CASP3 in presence of the ATXN2 intermediate-length polyQ expansion responsible for enhancing the production of this C-terminal fragments from TDP43. Caspases are cysteine-aspartic proteases implicated in programmed cell death (apoptosis, pyroptosis and necroptosis) and inflammation. They play an important role in the CNS during neuronal development, axon guidance and ageing (Shalini et al 2015). On the other hand, over-activation of some caspases, like CASP3, has been linked to several neurodegenerative disorders leading to an excess of apoptosis. Moreover, in a mouse model of SCA7 and a drosophila model of SCA3, cleaved fragments of Ataxin 3 and Ataxin 7 were shown to exacerbate the pathology (Jung et al 2009, Young et al 2007). Therefore the levels of CASP3 were determined for its transcript and protein in the *Atxn2*-CAG100-KIN mouse model at different ages comparing to the *Atxn2*-KO mouse model in the spinal cord.

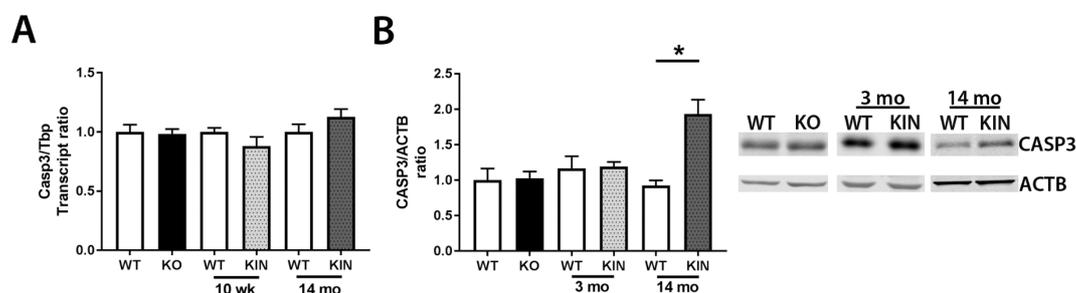


Figure 3.22. Transcript level (A) and protein level (B) of CASP3 in the spinal cord of *Atxn2*-KO and *Atxn2*-CAG100-KIN mice compared to their WT shows an up-regulation at protein level in the old mouse model. While the transcript level stayed unchanged, a significant up-regulation of CASP3 was identified in the spinal cord at old age. No changes were detected for the *Atxn2*-KO model.

No changes were detected in the transcript level (Figure 3.22, A) in either models, although a significant increase of protein was detected in the old samples of the *Atxn2*-CAG100-KIN model (Figure 3.22, B; FC 1.93 p-value 0.011). The antibody used only allows the detection of the non-cleaved CASP3 corresponding to the non-activated form; therefore the activated CASP3 could not be quantified.

The protein levels of CASP3 were also determined for old cerebellar samples of *Atxn2*-CAG100-KIN model and showed no change (Figure 3.23).

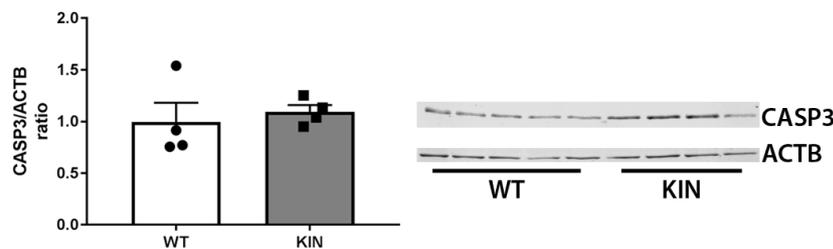


Figure 3.23. Protein levels of CASP3 in the cerebellum of 14-month-old *Atxn2*-CAG100-KIN show no difference compared to their sex- and age-matched WT. Protein homogenates from 5 WT versus 5 KIN were used.

3.5 Transcriptomics from spinal cord of 3 and 14-month-old *Atxn2*-CAG100-KIN mice

After showing all the RBP alterations in the protein level in the spinal cord of the *Atxn2*-CAG100-KIN model, it was of interest to determine which transcripts were altered in the model at the late stage of the disease and which ones were early events. The transcriptomics data sets were generated using the Affymetrix Clariom™ D mouse arrays from ThermoFisher. This type of array allowed us to analyze more than 65000 transcripts. The Transcriptome Analysis Console (TAC) software was used to analyze the data using standard parameters and self-determined filter criteria (fold change < -1.2 or > 1.2; p-value ≤ 0.05).

3.5.1 Experiment design

After reaching the desired age (3 and 14 month) a group of three WT versus three *Atxn2*-CAG100-KIN were sacrificed and dissected. As mentioned before, the tissue was snap frozen in liquid nitrogen to avoid RNA degradation. In both cases, the RNA extraction was performed in parallel for both genotypes in order to reduce technical variation. The entire procedure was performed in an RNase-

free hood to ensure the quality of the resulting RNA. Panel A in the Figure 3.24 shows the workflow followed, and Panel B the genes that passed the filter criteria, highlighted in green for down-regulations or red for up-regulations.

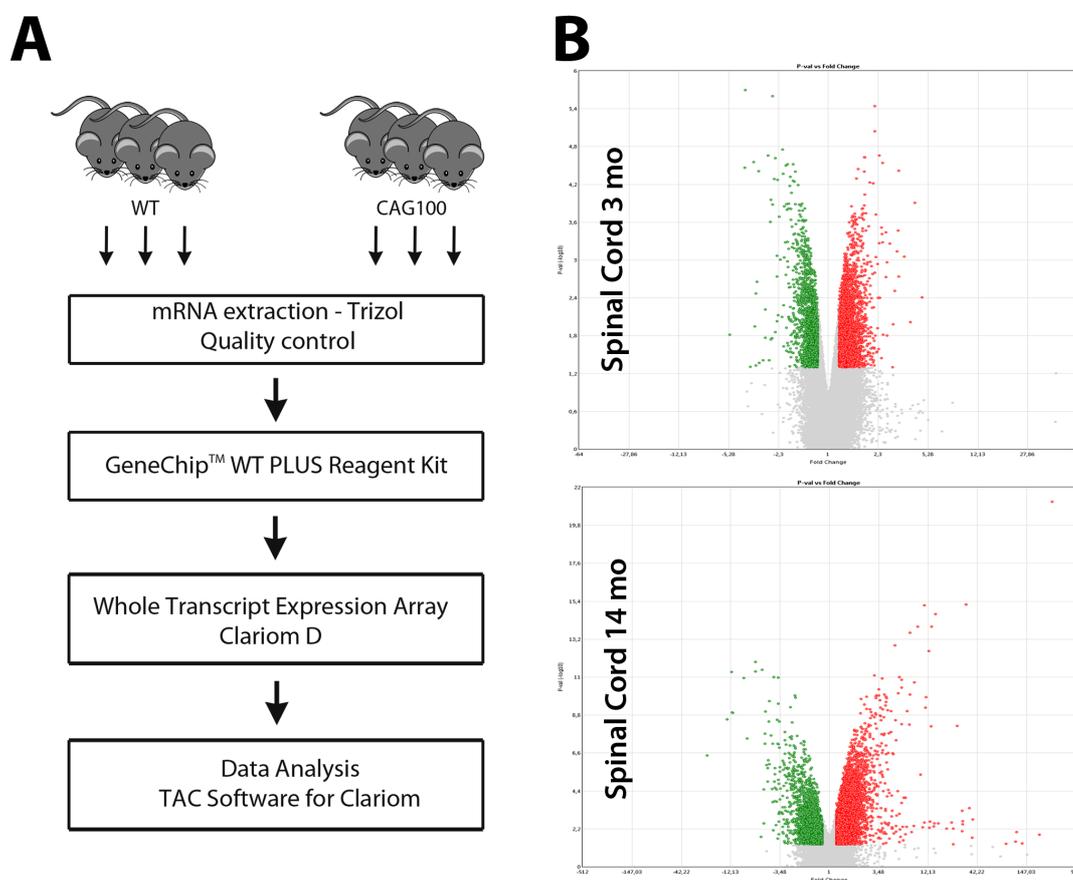


Figure 3.24. (A) Workflow scheme followed to generate the transcriptomics data set. (B) Volcano plots showing the distribution of the generated data. X axis represent fold change and Y axis log(p-value). Up-regulated factors are showed in red and down-regulated in green.

3.5.2 General data from the arrays

As expected for a degenerative disease, a higher number of genes were dysregulated in the old than the young samples. The higher number of up-regulated genes than down-regulated genes was also notable for both young and old cases (Table 3.7).

	Passed filter criteria	Up-regulated	Down-regulated
Spinal cord			
3 months	4642	2952	1690
14 months	11599	7470	4129

Table 3.7. Genes that passed the filter criteria established from a total of 65956 screened transcripts in the spinal cord samples. In both cases, young and old, 3 WT vs. 3 KIN were used to generate the data set.

There are nine different groups in the array: Non-Coding, Multiple Complex (containing more than one of the other groups), Coding, Pseudogene, Precursor microRNA, small RNA, Ribosomal, Unassigned, and tRNA. Since this thesis has been mainly focused on the up-regulations, the representative percentage of each group is only showed only for up-regulations Figure 3.25.

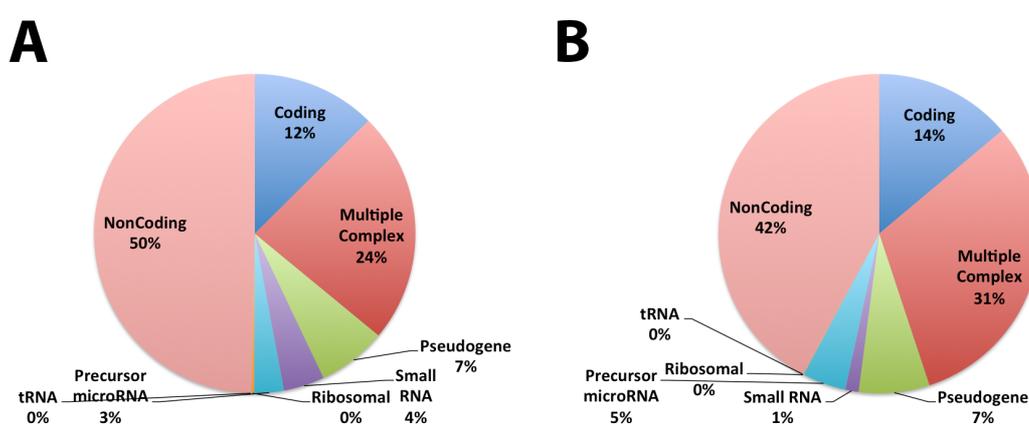


Figure 3.25. Group distribution of the significantly up-regulated transcripts from the array, the non-coding group was prevalent in both conditions. (A) Data from 3-month spinal cord samples, (B) data from 14-month spinal cord samples.

Interestingly, at both ages the Non Coding category shows a higher percentage of up-regulated transcripts (Figure 3.25). Together the Coding and Multiple Complex categories (known protein coding genes) represent 36% of up-regulated transcripts in 3-month-old samples and 45% in 14-month-old samples.

3.5.3 Several Ataxia, ALS and RNA toxicity genes appear to be dysregulated at the transcriptomics level in the old spinal cord of *Atxn2*-CAG100-KIN mouse line

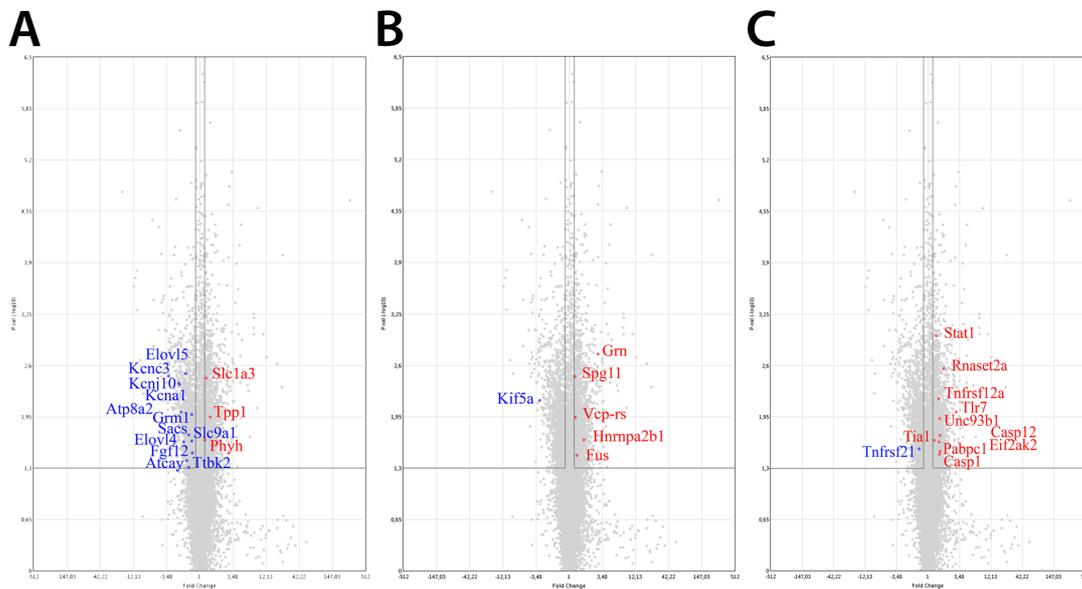


Figure 3.26. Volcano plots showing several affected transcripts related to (A) Ataxia, (B) ALS and (C) RNA toxicity. On the X-axis the p-value is represented and on the Y-axis the Fold Change. The down regulated genes are shown in blue while the up regulated are in red.

Looking closer at the transcriptomics results, several ataxia- and ALS-related genes were dysregulated, strengthening the potential of the mouse model in SCA2 and ALS research (Figure 3.26, A and B). Interestingly, a high number of genes linked to RNA toxicity response (Figure 3.26, C) were also found to be up-regulated pointing to a possible RNA toxic problem caused by the presence of the expanded *Atxn2* mRNA, the transcripts regulated by ATXN2, or both.

3.5.4 Analysis of the 14-months-old spinal cord transcriptomics data with STRING

STRING (Search Tool for the Retrieval of Interacting Genes/Proteins) is a free, constantly updated database and online platform of known and predicted protein-protein interactions (Snel et al 2000, Szklarczyk et al 2015). Therefore, assessing the generated transcriptomics data using this platform allows investigation of affected networks and permits a deeper understanding of cellular processes in the model at different ages.

3.5.4.1 Analysis of the 2-fold down-regulations in the spinal cord of the 14-month-old group shows membrane components to be highly affected

One platform that STRING uses to determine interactions is the Gene Ontology (GO) database. This database takes advantage of the known biological domains and their interactions (geneontology.org) to define functional networks. It takes three different aspects into consideration: Molecular Function (molecular activities performed by the gene-product), Cellular Component (location relative to cellular structures where the gene product performs its function), and Biological Process (larger processes accomplished by multiple molecular activities; e.g., DNA repair).

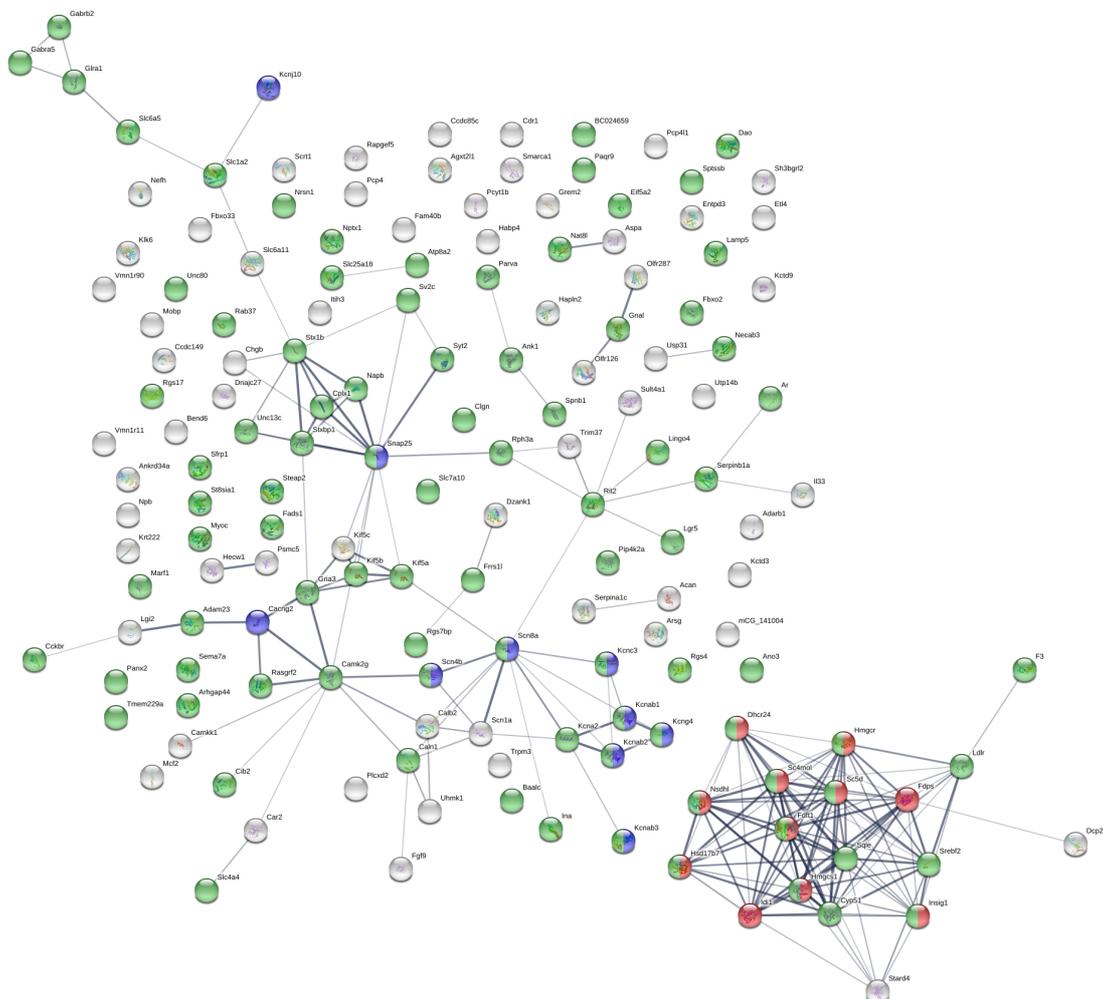


Figure 3.27. Network representation from the 2-fold-down dysregulations found in the 14-month spinal cord transcriptomics. The predominant green bullets correspond to the Cellular Component (GO) *membrane*; red bullets represent the Biological Process (GO) *sterol biosynthetic process*; and blue bullets highlight the *voltage-gated cation channel activity* in the Molecular Function category (GO).

An expected, protein-protein interaction enrichment (p-value <1.0e-16) was detected for the 2-fold down-regulations (Figure 3.27). Among the biological processes defined by GO, the *sterol biosynthetic process* showed enrichment for ten down-regulated factors ($q= 5.65e-12$ red bullets). It is interesting to note the number of affected proteins localizing at the membranes (defined by cellular component *membrane* (GO); $q= 9.34e-09$ green bullets), especially those linked with sterol synthesis (red and green bullets) since cholesterol is an important structural lipid in membranes and myelin sheaths (Dietschy & Turley 2004). The *voltage-gated cation channel activity* (Molecular function in GO) also shows enrichment for ten factors ($q= 6.51e-05$ dark blue bullets), eight of them localizing at the membrane (green and dark blue bullets).

Overall, the 2-fold-down transcripts point to a reduction in sterol biosynthesis and strong alteration of membrane-bound protein transcripts.

3.5.4.2 Analysis of the 2-fold up-regulations in the spinal cord for the 14-month-old group shows a strong network of microglia-enriched genes

Apart from GO, STRING also uses other databases to generate networks like KEGG pathways. This database is based on manually drawn pathway maps showing molecular interaction, reaction, and relation networks for: metabolism, genetic information processing, environmental information processing, cellular processes, organismal systems, human diseases, and drug development (genome.jp/keg/pathway.html).

When the two-fold up-regulations were analyzed with STRING, significant protein-protein interaction enrichment was detected (p-value <1.0e-16) (Figure 3.28). A high number of lysosomal factors described by the KEGG pathways were flagged ($q= 8.9e-10$ purple bullets), together with the biological process *immune system* defined by GO ($q= 6.2e-13$ turquoise bullets). These genes are strongly expressed by microglia in the murine CNS (Zhang et al 2014). Two other GO categories also showed enrichment: *protein binding* in Molecular function ($q= 2.02e-06$ fuchsia bullets) and *extracellular region* in Cellular component ($q= 3.7e-10$ yellow bullets). The *core histone* component, defined by PFAM protein domains, was enriched for seven factors ($q= 0.0032$ dark yellow bullets).

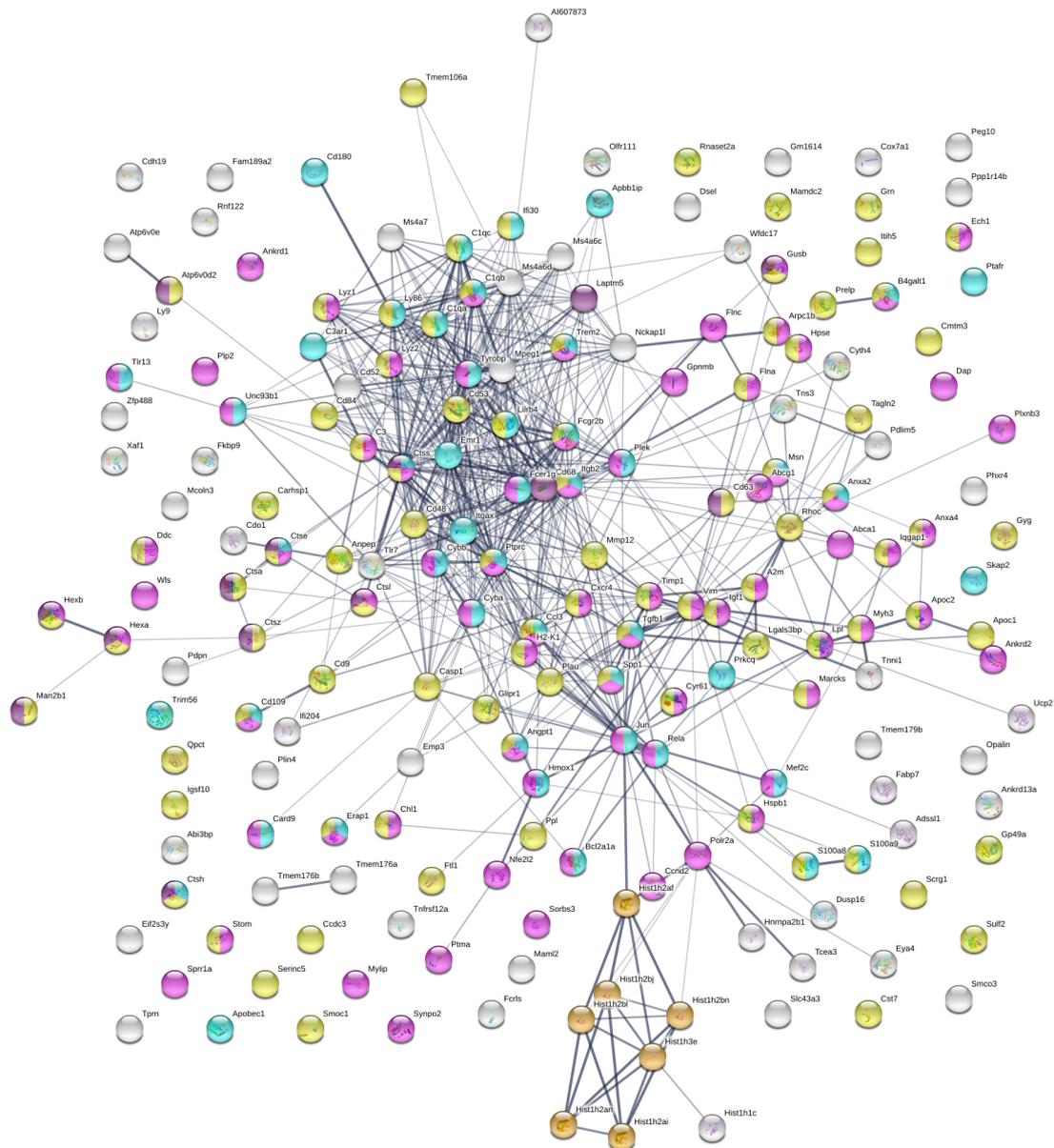


Figure 3.28. Network representation of the 2-fold-up dysregulations found in the 14-month spinal cord transcriptomics. The three categories from Gene Ontology were enriched; bullets in turquoise represent *immune system process* (Biological Process), bullets in fuchsia represent *protein binding* (Molecular Function) and bullets in light yellow represent *extracellular region* (Cellular Component). Bullets in purple represent the Lysosomal pathway based on KEGG Pathways and highlighted in dark yellow the Core Histone defined by PFAM Protein Domains.

Overall, the 2-fold-up dysregulations showed a large quantity of immune and lysosomal factors. A strong microglia response has been long linked to neurodegenerative disorders, especially in AD. It raises the question of whether this non-neuronal cell population is also affected by the CAG expansion in cell-autonomous manner, or if it is an indirect consequence of neuronal affection.

3.5.5 Validation of the transcriptomics data confirms the altered levels of neuroinflammation linked factors *Grn* and *Ripk1*

Receptor-interacting serine/threonine-protein kinase 1 (RIPK1) is a kinase that controls programmed cell death via apoptosis and necroptosis (Meng et al 2018) and was altered in the transcriptomics data set from the old spinal cord samples. Apoptosis is essential for development of the nervous system and is mediated by activation of caspases, a family of protease enzymes (Yuan & Yankner 2000). Caspase-knock-out mice show severe developmental defects (Zheng & Flavell 2000), underscoring the importance of eliminating redundant connections and refining the neuronal network as an evolutionary conserved program (Conradt et al 2016). In contrast, mature neurons become resistant to this intrinsic apoptosis pathway and more independent from trophic factors for survival compared to immature ones (Kole et al 2013, Putcha et al 2000). This resistance can be overcome under pathological conditions like neurodegenerative disorders (ALS, AD, and PD). The extrinsic apoptosis pathway or necroptosis can then be activated, for example due to an increase of the tumor necrosis factor (TNF), inducing cellular death and inflammation (Habbas et al 2015, Kuhle et al 2009, Tarkowski et al 2003, Tarkowski et al 1999, Tateishi et al 2010). Thus, targeting RIPK1, as a mediator of necroptosis, or upstream factors can help and slow-down their progression (Ito et al 2016, Xu et al 2018). Moreover, patients with rare biallelic mutations in *Ripk1* have severe immune deficiency, arthritis, intestinal inflammation and developmental delay (Cuchet-Lourenco et al 2018, Li et al 2019b, Uchiyama et al 2019). Therefore, we aimed to assess if RIPK1 was altered in the *Atxn2*-CAG100-KIN spinal cord and cerebellum.

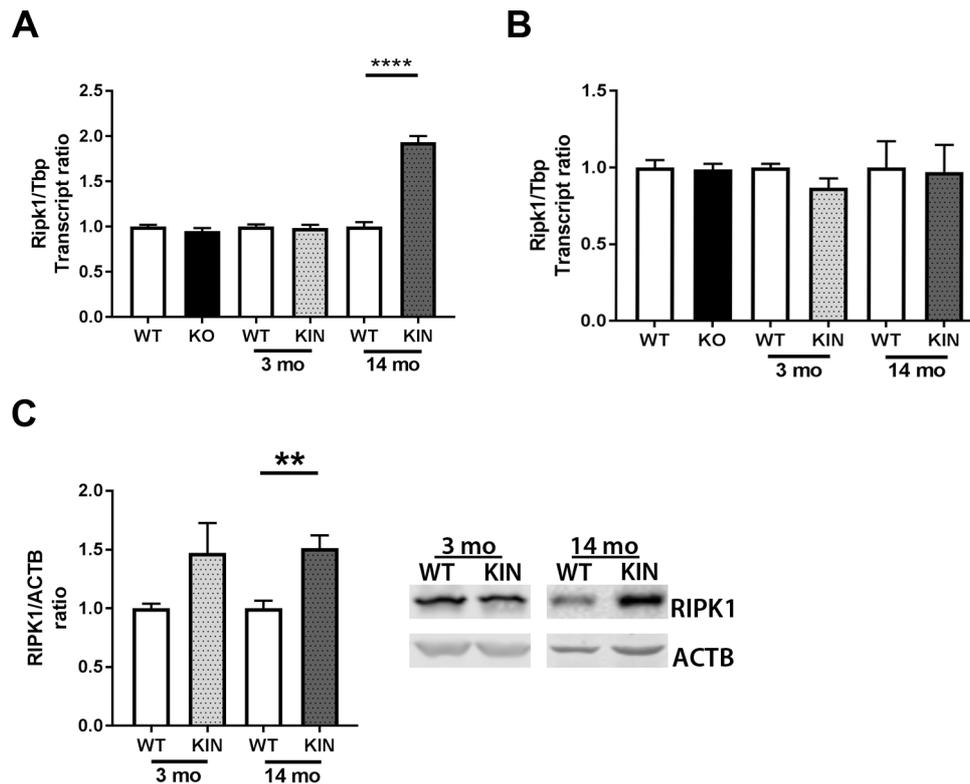


Figure 3.29. Validation of the ALS linked gene *Ripk1* at the transcript and protein level confirms its up-regulation. (A) Transcript evaluation in the spinal cord at 3 and 14 months of *Atxn2*-CAG100-KIN model compared to the *Atxn2*-KO shows a specific effect at the old age of the KIN mice compared to their WT. In contrast, no dysregulation was found in the cerebellar samples of these mouse models (B). The protein level of RIPK1 is also up-regulated in the old spinal cord samples of *Atxn2*-CAG100-KIN animals (C).

An induction of *Ripk1* at transcript (Figure 3.29, A; FC 1.93 p-value <0.0001) and protein level (Figure 3.29, C; FC 1.51 p-value 0.0033) was confirmed in old spinal cord samples of *Atxn2*-CAG100-KIN mice compared to their WT. No dysregulation was detected in young samples or in the *Atxn2*-KO mouse model. Although *Ripk1* was only investigated at the transcript level in the cerebellum, no dysregulation was found there, suggesting a stronger affection of the spinal cord (Figure 3.29,B).

Another factor that was found altered in the transcriptomics data set was progranulin. Progranulin (PGRN) is an evolutionarily conserved glycoprotein with 7.5 conserved granulin domains connected by linker regions (Palfree et al 2015, Tolkmachev et al 2008). Individual granulins can be released when PGRN is proteolytically processed. PGRN and its cleaved products, granulins, were

identified first as growth factors involved in wound healing, vessel growth and cancer (Bateman et al 1990, He et al 2002, He et al 2003). Shortly after, mutations in PGRN gene (GRN) were linked to frontotemporal dementia (FTD), frontotemporal lobar degeneration (FTLD), neuronal ceroid lipofuscinosis (NCL), and Alzheimer's disease (AD) (Almeida et al 2016, Baker et al 2006, Gass et al 2006, Smith et al 2012, Tanaka et al 2014). In FTD-spectrum cases, nonsense mutations and missense mutations in the PGRN gene result in lower protein expression or secretion pointing to haploinsufficiency as predominant mechanism (Shankaran et al 2008, Yu et al 2010). On the other hand, homozygous mutations in *GRN* are the cause of NCL, a lysosomal storage neurodegenerative disease (Smith et al 2012), confirming the dosage effects of PGRN in the disease manifestation and suggesting a role for the regulation of lysosomes (Almeida et al 2016). Additionally, PGRN is a modulator of immune function (Jian et al 2013). In the nervous system, microglia produce and secrete PGRN especially once activated during an insult or trauma (Moisse et al 2009, Naphade et al 2010, Philips et al 2010). Moreover, PGRN has been linked to microglia activation, migration, phagocytosis, and synapse pruning (Lui et al 2016, Martens et al 2012, Pickford et al 2011, Yin et al 2010). Thus, PGRN seems to have a role in microglia-mediated inflammation in neurodegenerative diseases. We further validate and investigate the involvement of PGRN, therefore WB and Q-PCR were performed.

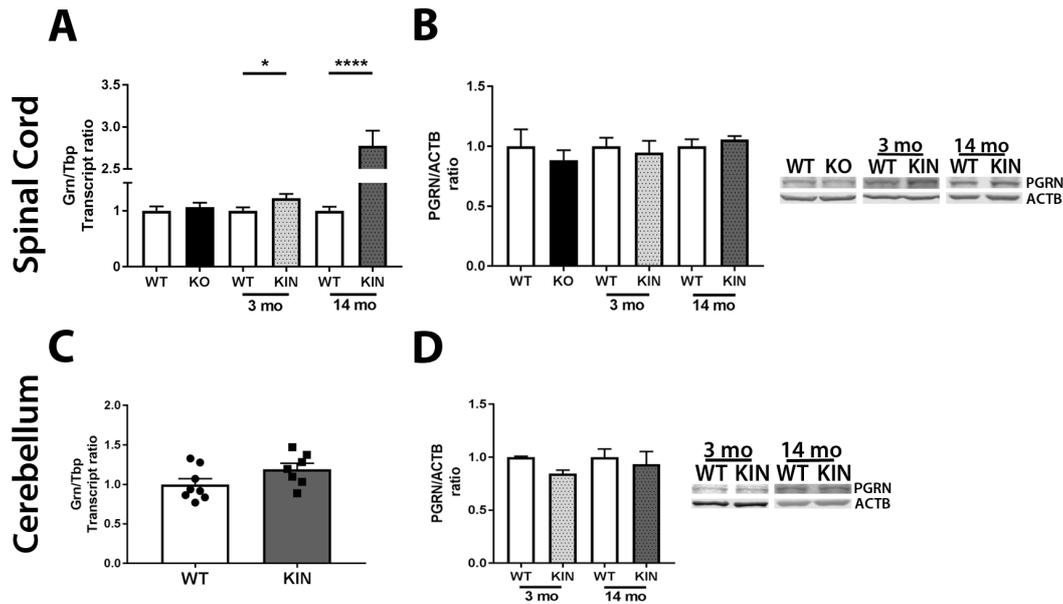


Figure 3.30. Progranulin transcript levels were up-regulated in the spinal cord of *Atxn2*-CAG100-KIN animals starting at the age of 3 month while protein levels were unchanged. (A) *Grn* transcript levels were specifically up-regulated starting at 3 months in the spinal cord of *Atxn2*-CAG100-KIN but not changed in the cerebellum at old age (C). Despite their up-regulation at transcript level, PGRN levels were not changed either in the spinal cord (B) or the cerebellum (D).

The transcript level of *Grn* was found up-regulated in the spinal cord of *Atxn2*-CAG100-KIN animals at ages of 3 (FC 1.22 p-value 0.049) and 14 months (FC 2.775 p-value <0.0001), while no changes were detected in the spinal cord of *Atxn2*-KO (FC 0.94 p-value 0.5912) (Figure 3.30, A) or in the 14-month-old cerebellar samples of *Atxn2*-CAG100-KIN (Figure 3.30, C; FC 1.192 p-value 0.093). The protein level of PGRN was not changed in the spinal cord of the *Atxn2*-CAG100-KIN model suggesting either a translational problem or a high degradation rate. The antibody used didn't show the level of granulins (the cleaved product of PGRN), therefore they couldn't be quantified. The PGRN levels were not changed in the cerebellum or *Atxn2*-KO samples either.

Interestingly, two common features of RIPK1 and PGRN are their involvement in neuroinflammation and their high expression in microglia.

3.5.6 Validation of the transcriptomics data confirms the up-regulation of microglia activation and synaptic-pruning related transcripts

Following up with the 2-fold-up STRING analysis we validated and further investigated the involvement of the immune and lysosomal transcript

dysregulations in the spinal cord of *Atxn2*-CAG100-KIN and *Atxn2*-KO mouse models. We specifically focused on those that are highly expressed in microglia, since they are tightly linked to homeostatic maintenance of the nervous system. The first set of transcripts evaluated were those related to the complement system, TREM2 and DAP12. The classical complement system is the major mediator of inflammation against infections and has been implicated in brain development, homeostasis, and disease (Stevens et al 2007). Complement proteins (C1q, C3 and C4) participate in synapse elimination by tagging weak synaptic connections for removal via phagocytic microglial activity during development (Schafer et al 2012), the so-called synaptic pruning. The complement cascade components C1q and C3 were shown to be crucial for pruning of retino-thalamic axons during development (Stevens et al 2007). Moreover, it has been demonstrated that microglia plays a major role in synaptic pruning during postnatal development in mice actively engulfing synaptic material (Paolicelli et al 2011), and that deficient neuron-microglia signaling impairs functional brain connectivity and alters behaviour (Zhan et al 2014). Altered synaptic pruning caused an excess of dendritic spines and immature synapses leading to an immature brain circuitry and potentially to neurodevelopmental disorders (Matcovitch-Natan et al 2016, Paolicelli et al 2011).

On the other hand, gliosis and neuroinflammation are hallmarks of Alzheimer's disease (AD), PD, ALS and FTD (Salter & Stevens 2017). Recent results point to an inappropriate activation of the complement-dependent pathway and excess of pruning by microglia as mediators of early synapse loss in AD (Hong et al 2016). Furthermore, a high number of loci linked to AD by GWAS (genome wide association studies) are expressed or exclusively expressed by microglia (Efthymiou & Goate 2017). Among these, *TREM2* R47H variant has been also linked to ALS, PD, and FTD (Lill et al 2015). TREM2 (triggering receptor expressed on myeloid cells 2) is an innate immune receptor expressed by microglia and myeloid cells, which mediates inflammatory and phagocytic signaling in immune cells through its co-receptor DAP12. Therefore, mutations impairing TREM2 signaling could affect microglial phagocytosis,

neuroinflammation, and microglia survival in neurodegenerative disorders (Salter & Stevens 2017).

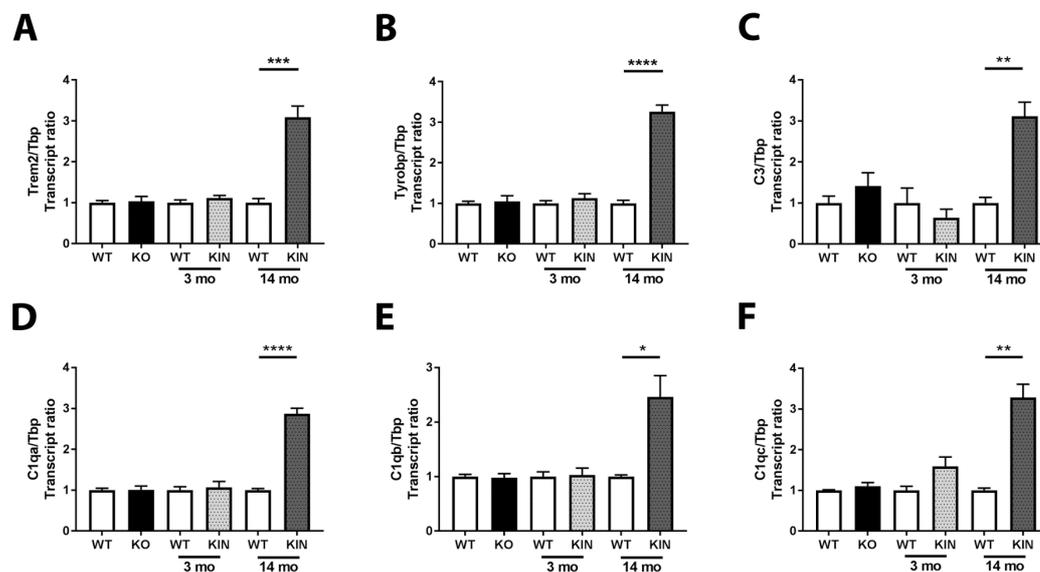


Figure 3.31. Validation of the complement system implicated in synaptic pruning, TREM2 and DAP12 transcripts. Q-PCR data from *Atxn2*-CAG100-KIN and *Atxn2*-KO spinal cord samples show a selective affection for the 14-month-old samples of *Atxn2*-CAG100-KIN mice.

All transcripts evaluated were up-regulated in the spinal cord of the 14-month-old *Atxn2*-CAG100-KIN mice (Figure 3.31). The phagocytic-related receptors *Trem2* (FC 3.09 p-value <0.0001) and *Tyrobp* (coding for DAP12; FC 3.26 p-value <0.0001) were found to be significantly up-regulated (Figure 3.31, A and B). All complement proteins involved in synaptic pruning analyzed were also up-regulated (*Cq1a* FC 2.87 p-value <0.0001; *C1qb* FC2.46 p-value 0.0138; *C1qc* FC 3.28 p-value 0.0019; *C3* FC 3.11 p-value 0.001) (Figure 3.31, C, D, E, and F). These results raised questions related to the activation of microglia and the implications of mutations in RBP, such as TDP43 and ATXN2.

3.5.7 Validation of transcripts involved in RNA/DNA immune response and lysosomal function

Several toll-like receptors (TLR) that recognize intracellular nucleic acids at the endosome were found to be up-regulated at the transcriptome data set from the 14-month-old spinal cord samples (Kawai & Akira 2010). Specifically, *Tlr3* (recognizing double stranded RNA), *Tlr7* (recognizing single stranded RNA), and

Tlr9 (recognizing DNA) were found to be strongly up-regulated. These receptors are part of the innate immune system, the first line of defense against viral, bacterial, fungal, and protozoa infections. Different types of receptors, called pattern recognition receptors (PRRs), are able to recognize pathogen associated molecular patterns (PAMPs) and are part of this system. PRRs are also able to activate a series of defense mechanisms to eliminate the infection (Chen et al 2017).

Aside from the TLR family, there are five more families classified based on their protein domains: RIG-I like receptors (RLRs), NOD-like receptors (NLRs), C-type lectin receptors (CLRs), AIM2-like receptors (ALRs), and the cytosol DNA sensing PRR cyclic GMP-AMP synthases (cGAS) (Chen et al 2017). PRRs also recognize endogenous damage associated molecular patterns (DAMPs) from the host, therefore they are also important to maintain homeostasis. However, PRR dysregulation can lead to autoimmune diseases (Chen et al 2017). Interestingly, TLR3 is up stream of RIPK1, which also localizes in the membrane of astrocytes and microglia (Verma & Bharti 2017), while granulins (PGRN cleaved products) are cofactors for TLR9 signaling (Park et al 2011). Further down-stream from the TLR activation, interleukin receptor-associated kinase 1 and 4 (IRAK1 and IRAK4) (Flannery & Bowie 2010) were also up-regulated. As a result of the TLR activation, proinflammatory cytokines, and anti-viral type I interferon (IFN) inducing factors are activated (Kawai & Akira 2010). Other factors involved in pathogen/immune response that were found dysregulated in the transcriptome data are the Signal transducer and activator of transcription 1 (STAT1), LYN Proto-Oncogene Src Family Tyrosine Kinase (LYN), and cerebellar degeneration-related autoantigen 1 (CDR1) (Stoeger et al 2013). The Ribonuclease T2 (RNASET2), implicated in the innate immune system, has been shown to participate in the lysosomal degradation of ribosomal RNA in zebrafish (Haud et al 2011). RNASET2 transcript was also up-regulated in the transcriptome data set. Moreover, both Cytochrome B-245 Beta chain and Alpha chain (CYBB and CYBA) transcripts, as critical components of the membrane-bound oxidase of phagocytes responsible for generating microbicidal superoxide, were up-regulated as well. Based on the implication of all of these factors in RNA/DNA immune response, proinflammatory response, degradation of RNA, and

phagocytosis, we validated the transcriptome results by Q-PCR in the spinal cord of 3-month-old and 14-month-old *Atxn2*-CAG100-KIN and 6-month-old *Atxn2*-KO animals.

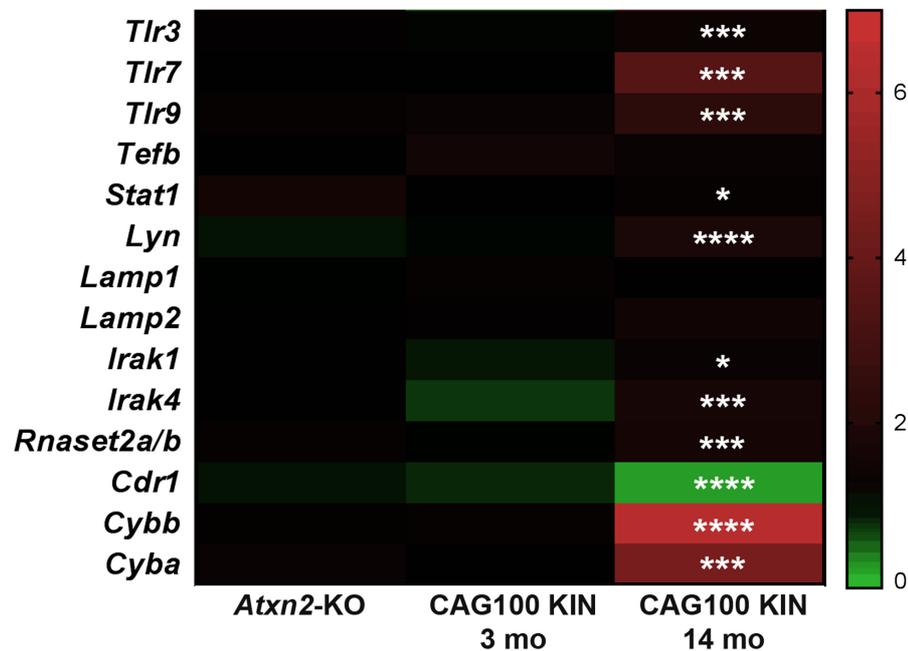


Figure 3.32. Heatmap validation by Q-PCR of genes involved in RNA/DNA immune response and lysosomal function. Validation of the selected factors by Q-PCR in 3-month-old (3 mo) *Atxn2*-CAG100-KIN, 14-month-old (14 mo) *Atxn2*-CAG100-KIN and *Atxn2*-KO spinal cord samples.

All of the transcripts that were found dysregulated in the transcriptome data set of *Atxn2*-CAG100-KIN 14-month-old spinal cord samples were validated by Q-PCR (*Tlr3* FC 1.33 p-value 0.0002; *Tlr7* FC 3.47 p-value 0.0001; *Tlr9* FC 2.26 p-value 0.0002; *Stat1* FC 1.2 p-value 0.0434; *Lyn* FC 1.76 p-value <0.0001; *Irak1* FC 1.27 p-value 0.0195; *Irak4* FC 1.62 p-value 0.0004; *Rnaset2a/b* FC 1.59 p-value 0.0001; *Cdr1* FC 0.23 p-value <0.0001; *Cybb* FC 6.36 p-value <0.0001; *Cyba* FC 4.478 p-value 0.0003). Moreover, the transcript levels of the transcription factor EB (*Tfeb*), the master gene for lysosomal biogenesis (Sardiello et al 2009), and the two lysosomal markers lysosomal-associated membrane protein 1 and 2 (*Lamp1* and *Lamp2*), were evaluated in order to determine the lysosomal response. All three (*Tfeb*, *Lamp1*, *Lamp2*) were not dysregulated in the 14-month-old spinal cord samples, suggesting that overall lysosomal mass was unchanged. No dysregulation was detected for the 3-month old *Atxn2*-CAG100-

KIN or *Atxn2*-KO spinal cord samples regarding these transcripts pointing to a time-dependent response in the tissue.

3.5.8 Glia markers are affected in the spinal cord and cerebellum of the *Atxn2*-CAG100-KIN mouse model

After validation of the spinal cord transcriptome data regarding factors related to immune response and lysosomal function implicated in RNA toxicity, we wanted to define the response from glia in the mouse model. Over time, more important roles in the CNS have been attributed to glia cells; therefore the classic view of exclusive neuronal dysfunction in neurological diseases has been challenged. Two different glia cell types were investigated by Q-PCR and WB: microglia (Figure 3.33) and astroglia (Figure 3.34).

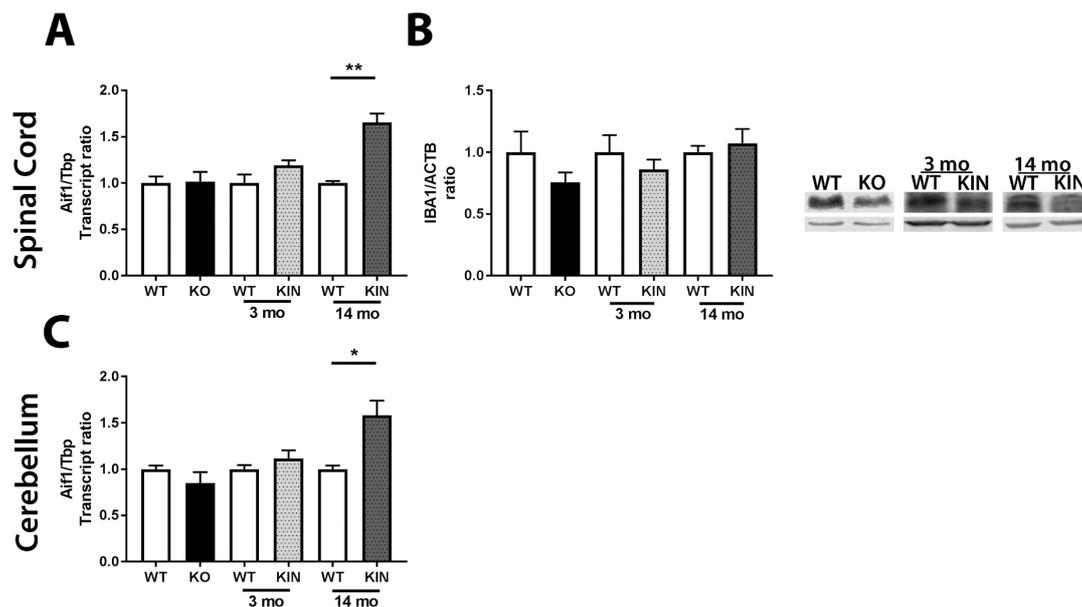


Figure 3.33. Evaluation of the transcript level of *Aif1* and protein level of IBA1 as microglia marker in the *Atxn2*-CAG100-KIN and *Atxn2*-KO mouse models. The well-established microglia marker IBA1, product of the *Aif1* gene, was used to analyze the microglia response in the spinal cord and cerebellum. A higher significant up-regulation was observed for the transcript level of *Aif1* in the 14-month-old samples of *Atxn2*-CAG100-KIN mice (A; FC 1.65 p-value 0.0002) compared to the up-regulation in the cerebellum in the same animals (C; FC 1.45 p-value 0.0296). No differences were observed in the 3-month-old samples (cerebellar and spinal cord) of *Atxn2*-CAG100-KIN nor for *Atxn2*-KO samples regarding *Aif1* levels (A and C). No dysregulation was detected at the protein level for IBA1 (B) in any condition.

As expected, the microglia/macrophage gene marker *Aif1* (Allograft inflammatory factor 1) was also up-regulated in the 14-month-old spinal cord samples (Figure 3.33, A; FC 1.65 p-value 0.0002). *Aif1* is strongly and specifically

expressed in microglia in the CNS and its product, IBA1 (ionized calcium-binding adapter molecule 1), is a widely used marker to detect microglia. Despite all the up-regulations seen in transcripts related to microglia activation and synaptic pruning in the 14-month-old spinal cord samples, the protein level of IBA1 was not changed in WB experiments (Figure 3.33,B). The transcript level of *Aif1* was also investigated in the cerebellum of 3-month-old and 14-month-old *Atxn2-CAG100-KIN* and *Atxn2-KO* animals by Q-PCR. An up-regulation of *Aif1* was again detected for the 14-month-old samples (Figure 3.33, C; FC 1.45 p-value 0.0296). The protein level of IBA1 in the cerebellum wasn't determined, since recent publications point to higher rates of basal turnover and increased expression of proinflammatory genes in this tissue (Stowell et al 2018).

Astrocytes are the largest cell population in the CNS with increasing presence with phylogeny and brain complexity (Nedergaard et al 2003). In the human cortex there are 1.4 astrocytes for every neuron (Bass et al 1971, Nedergaard et al 2003). They are also the most heterogeneous group of glia cells and are distributed in a non-overlapping manner throughout the entire CNS (Sofroniew & Vinters 2010). The classical view of the astrocytes as only providing structural support has been discarded after their implication in a wide variety of essential functions in the CNS such as synapse development, neurotransmitter homeostasis, glycogen storage, and blood brain barrier maintenance (Palmer & Ousman 2018, Sofroniew & Vinters 2010). Moreover, astrocyte dysfunction has been implicated in neurodegenerative diseases such as AD, PD and ALS (Palmer & Ousman 2018). Therefore, we aimed to characterize the astrocyte activation by quantifying the levels of GFAP (glial fibrillary acidic protein), since it is highly specific to the astroglial lineage (Reeves et al 1989) and since it has been shown to be up-regulated in reactive astrocytes (Nedergaard et al 2003, Palmer & Ousman 2018).

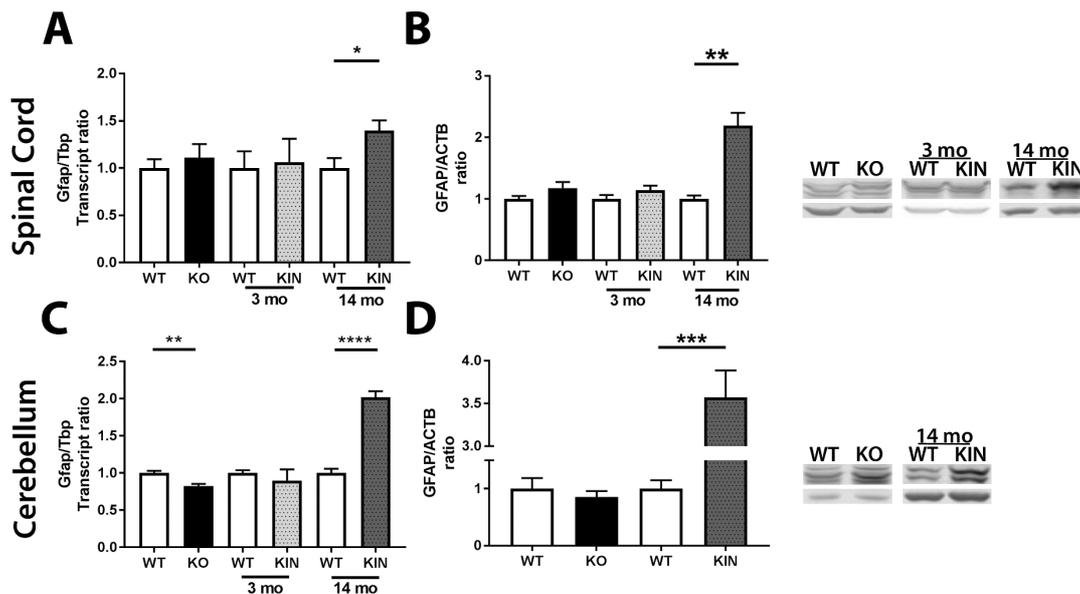


Figure 3.34. Evaluation of the transcript level of *Gfap* and protein level of GFAP as an astroglia marker in *Atxn2*-CAG100-KIN and *Atxn2*-KO mouse models. An up-regulation for *Gfap* was detected in spinal cord (FC 1.4 p-value 0.021) and cerebellar (FC 2.02 p-value <0.0001) samples from the 14-month-old *Atxn2*-CAG100-KIN mice. A significant increase of GFAP levels were also detected in spinal cord (FC 2.19 p-value 0.0017) and cerebellar (FC 3.57 p-value 0.0004) samples from the 14-month-old *Atxn2*-CAG100-KIN mice. A slight but significant down-regulation of *Gfap* was detected in the cerebellar samples (FC 0.83 p-value 0.0012) of *Atxn2*-KO mice but without changes at the protein level.

Similar to the transcript levels of *Aif1*, *Gfap* showed an up-regulation at 14-month-old in both tissues (cerebellum and spinal cord) at the age of 14 months from the *Atxn2*-CAG100-KIN mouse model. An up-regulation of GFAP level was also detected by WB in both tissues pointing to an activation of astrocytes over time. Interestingly, a discrete but significant down-regulation of *Gfap* was detected in the cerebellar samples of *Atxn2*-KO.

These data point to a pathologic ageing in this mouse model affecting glia cells, which could aggravate the underlying pathology.

3.5.9 Stress granule formation in BV2 murine microglia cell line under NaArs stress

As mentioned in the introduction, stress granules (SG) are cytoplasmic regions with a high density of RNA and RBP where translation has been stalled. SG form during cellular stress, such as oxidative stress, starvation, or Sodium Arsenite (NaArs) treatment. Using the murine microglia cell line BV2, we decided to determine if stress granules were formed during NaArs stress by

immunocytochemistry. PABP1 was used as a marker since its presence in SG has been established (Kedersha et al 2000, Kedersha et al 2005) together with ATXN2 (Figure 3.35, A). Moreover, TDP43 has been recently implicated in microglia function (Paolicelli et al 2017), thus it was also of interest to determine its localization during NaArs treatment, and specifically if it was co-localizing with ATXN2 in SG.

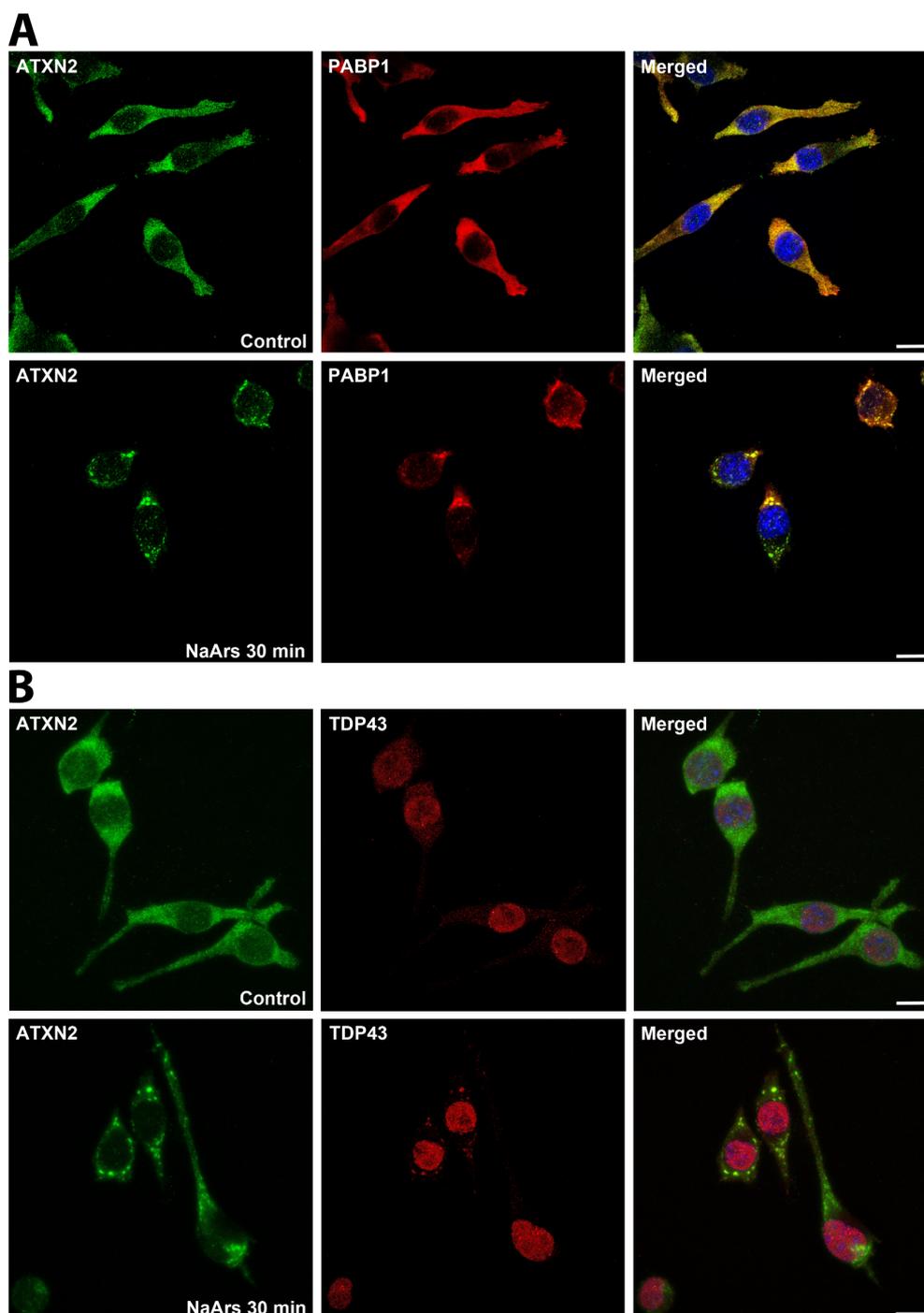


Figure 3.35. Immunocytochemistry of non-stressed (control) and NaArs-stressed BV2 cells. ATXN2 is stained in green and PABP2 (A) or TDP43 (B) in red. In all of the merged panels, DAPI was used to stain the nuclei in blue. Scale bar 50 μ m.

As expected, ATXN2 and PABP1 localize in the cytosol and TDP43 in the nuclei under control conditions (Figure 3.35, A and B). However, when BV2 cells were stressed with NaArs for 30 min, ATXN2 and PABP1 co-localized in granule-like structures suggesting SG formation in the BV2 microglia cell line (Figure 3.35, A). TDP43 discretely shuttled out of the nuclei after NaArs treatment and seemed to co-localize with ATXN2 in SG (Figure 3.35, B).

Stress granule formation seems to be a widely evolutionary conserved mechanism among different types of cells in mammalian organisms necessary to deal with translation during periods of stress. These data show the formation of SG and the participation of disease associated RBP, such as ATXN2 and TDP43 in the microglia cell line BV2.

3.5.10 Microglia shows ATXN2 positive aggregates in the spinal cord of 14-month-old *Atxn2*-CAG100-KIN mice

After confirming that ATXN2 is present in the murine microglia cell line BV2 and localizes in SG during cell stress periods, the next step was to examine the presence of aggregates in microglia in the spinal cord by immunohistochemistry. The microglia marker IBA1 was used to first detect these small cells and then look for ATXN2 presence within IBA1-positive cells. Spinal cord sections from 6-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO animals were used together with sex- and age-matched WT sections to confirm that the signal detected by the monoclonal antibody against ATXN2 was indeed detecting the signal in microglia (IBA1-positive) cells.

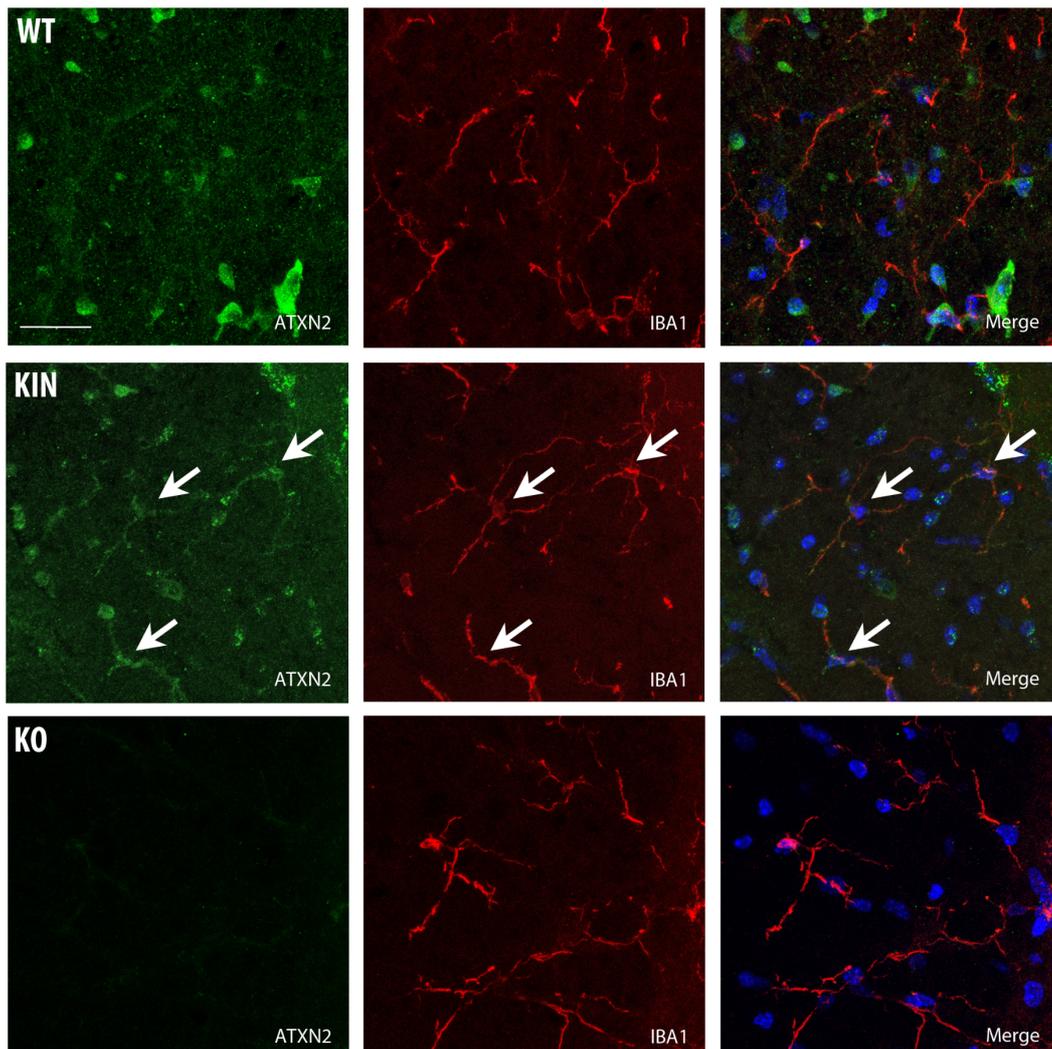


Figure 3.36. Co-immunohistochemical staining of ATXN2 (green) and IBA1 (red) in spinal cord sections of 6-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO animals compared to sex- and age-matched WT shows increase of ATXN2 signal in the IBA1-positive cells in the *Atxn2*-CAG100-KIN section. Nuclei were detected with DAPI (blue). Scale bar represents 25 μ m.

Immunohistochemistry of ATXN2 (green) in WT sections of 6-month-old animals did not show a highly positive signal in the microglia cells detected with IBA1 (red) (Figure 3.36, first row). Microglia are small cells, therefore the cytoplasm area where ATXN2 localizes under normal conditions is rather limited. On the other hand, microglia detected in the spinal cord of *Atxn2*-CAG100-KIN sections showed a stronger signal for ATXN2 (Figure 3.36, second row) suggesting a time-dependent accumulation of this protein in microglia. In the spinal cord sections of *Atxn2*-KO animals, no signal for ATXN2 was detected but IBA1-positive cells

were also observed, corresponding to microglia in this mouse model (Figure 3.36, third row).

To follow up, immunohistochemistry in the 14-month-old spinal cord sections of *Atxn2*-CAG100-KIN mice was performed. We aimed to elucidate the presence of ATXN2 aggregates in microglia at the old stage of the disease for this model.

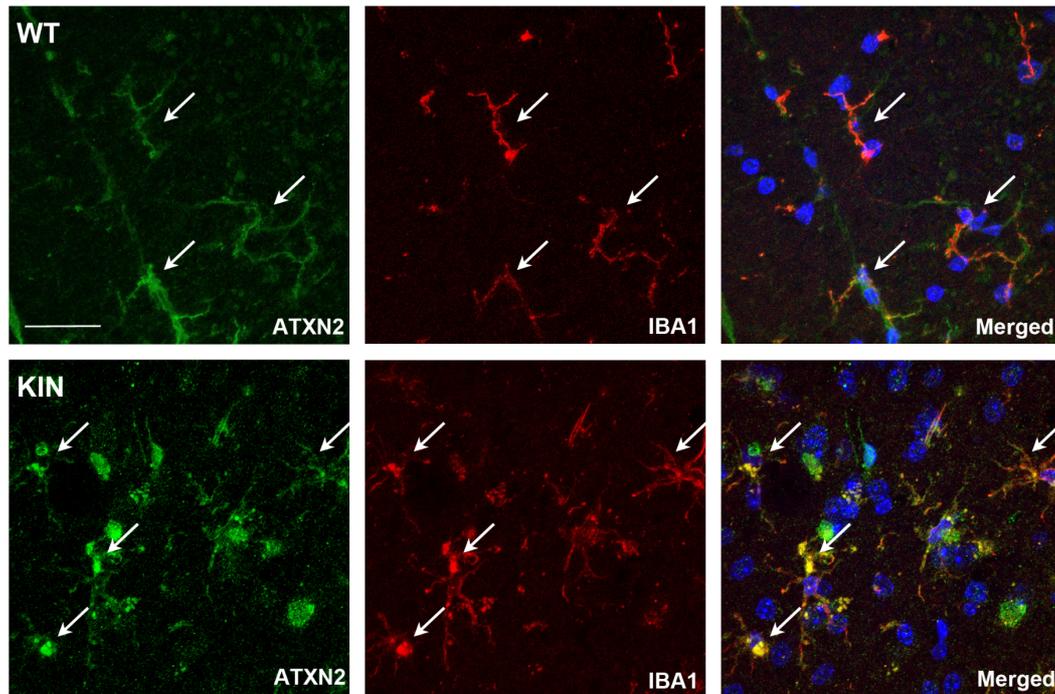


Figure 3.37. Co-immunohistochemical staining of ATXN2 (green) and IBA1 (red) in the spinal cord sections of 14-month-old *Atxn2*-CAG100-KIN mice compared to sex- and age-matched WT shows ATXN2 aggregates in IBA1-positive cells. Nuclei were detected with DAPI (blue). Scale bar represents 25 μ m.

By comparing the WT samples from 6-month-old (Figure 3.36, first row) and 14-month old (Figure 3.37, first row) animals, an increase of positive ATXN2 signal can be seen. Over time, microglia turnover slows down and their transcript profile also changes (Fuger et al 2017), thus ATXN2 could be accumulating under normal conditions. In case of the *Atxn2*-CAG100-KIN samples, ATXN2 aggregates were detected in microglia (IBA1-positive) cytoplasm, pointing to a potential accumulation of endogenous ATXN2 and/or phagocytosis of debris from dying neurons.

3.5.11 Establishing new tools to study the effect of ATXN2 in microglia function

One of the big limitation points of working with tissue homogenates is the inability to determine the response from a specific cell type. For example, one cannot define if a transcript is being up-regulated exclusively in microglia or if neurons also play a role. In order to overcome this problem, primary microglia cultures were established from postnatal day 0 (P0) pups. Heterozygous crosses were used to have both genotypes, WT and KIN (*Atxn2*-CAG100-KIN), as offspring from the same animals, to reduce variation.

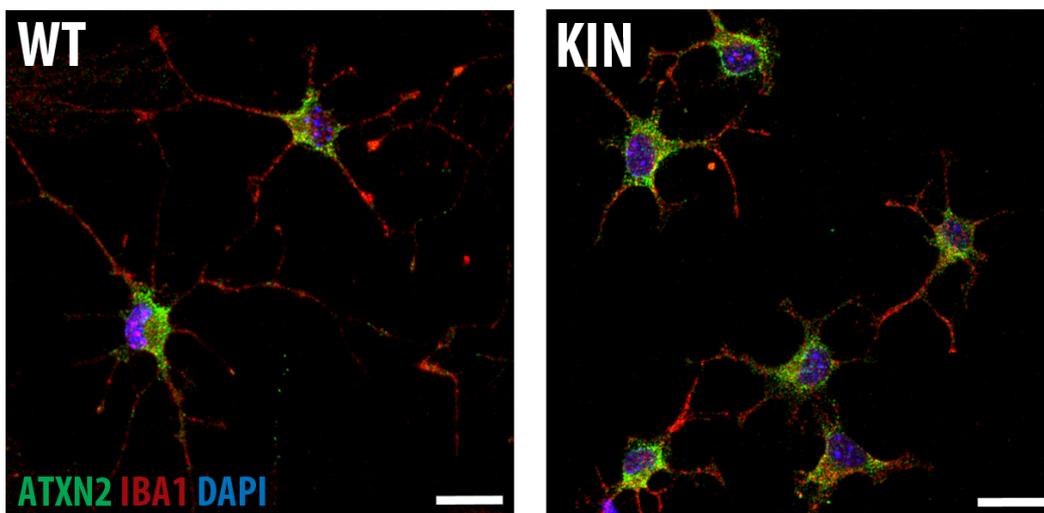


Figure 3.38. Immunocytochemistry of primary microglia cell cultures from P0 pups. The cultures were established in parallel from the same litter. ATXN2 (green) was detected in all microglia cells, which are IBA1-positive (red). Nuclei were detected with DAPI (blue). Scale bar represents 15 μ m.

Following the protocol specified in Material and Methods, and once the cultures were confluent and the microglia cells were growing on top of the astrocyte layer, microglia were isolated. To check the purity of microglia after isolating them, IBA1 was used as a marker (Figure 3.38). To further demonstrate the expression of ATXN2 by microglia, it was co-immunohistochemically stained with IBA1 (Figure 3.38). The positive signal of ATXN2 antibody in the purified microglia primary cultures verified once more its presence in this cell type.

Despite the clear advantages of working with primary cultures, there are several points to consider such as the number of pups used and the challenges in continuously generating such cultures. Therefore, a second tool was proposed in

order to evaluate the effect of different size expansions in ATXN2 in microglia. The murine microglia cell line BV2 was previously employed to demonstrate the presence of ATXN2 and its response to NaArs-stress (Figure 3.35). In addition, BV2 cells are easy to culture and manipulate making them a perfect model for further experiments. In order to understand the effect of ATXN2 expansion in microglia function, we stressed them with LPS, mimicking a bacterial infection instead of stressing them with NaArs. The BV2 cells were transfected with the empty vector myc, myc-Atxn2-Q22 (ATXN2 with an expansion of 22 glutamines), myc-Atxn2-Q79 (ATXN2 with 79Q), or only treated with the transfection agent lipofectamine 3000 (control). Independent triplicates were generated for each condition and the non-LPS treated control (Lipo) was used as reference point in the analysis.

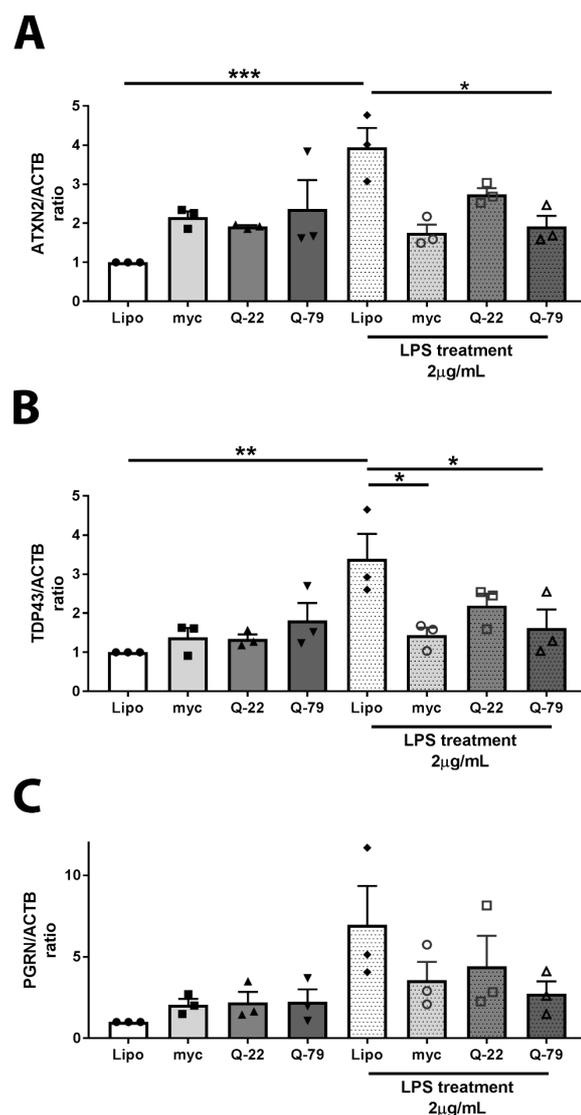


Figure 3.39. Two-way ANOVA from WB quantification data of ATXN2, TDP43 and PGRN in control and LPS-treated BV2 RIPA fraction. Evaluation of the LPS effect on transfected BV2 cells compared to non-LPS-treatment and lipofectamine control by WB.

Although lipofectamine is widely used to transfect BV2 cells and the reagent itself does not induce microglia activation (Smolders et al 2018), we cannot rule out unspecific effects via introducing foreign DNA into this cell type. A significant up-regulation of ATXN2 levels were detected between the Lipo-control and the Lipo-treated with LPS (FC 2.95 p-value 0.0003), while ATXN2 levels did not increase significantly in the myc-Atxn2-Q79 LPS treated when compared to the Lipo-treated group (p-value 0.0123). Similarly, TDP43 levels were up-regulated in the control group when treated with LPS (FC 2.4 p-value 0.0044), however the other groups did not up-regulate TDP43 levels (Lipo-treated vs myc-treated: p-value 0.023; Lipo-treated vs Q-79 treated: p-value 0.047). PRGN levels did not

reach any significance in the statistical analysis due to high variance in the LPS-treated groups.

3.6 Transcriptomics from 3- and 14-month-old cerebellum of *Atxn2*-CAG100-KIN mice

To complete the description at the mRNA level of the *Atxn2*-CAG100-KIN mouse model, two more transcriptomics data sets were generated using the Affymetrix Clariom™ D mouse arrays from ThermoFisher. The experimental design was the same as previously described (Figure 3.24, A) and the analysis was carried out with the TAC software following the same standard parameters and self-determined filter criteria as for the spinal cord samples (fold change <-1.2 or > 1.2; p-value ≤ 0.05).

3.6.1 General data from the arrays shows a higher number of up-regulated genes at both ages

Similar to the data obtained from the spinal cord transcriptomics, the cerebellar data shows a higher number of up-regulations that passed the filter criteria compared to down-regulations (Table 3.8). In the volcano plots (Figure 3.40) the distribution of dysregulated genes can be appreciated.

	Passed filter criteria	Up regulated	Down regulated
Cerebellum			
3 months	2041	1378	663
14 months	3857	2222	1635

Table 3.8. Genes that passed the filter criteria established from a total of 65,956 screened transcripts. Three WT and three KIN were used in each condition; 3 and 14 months.

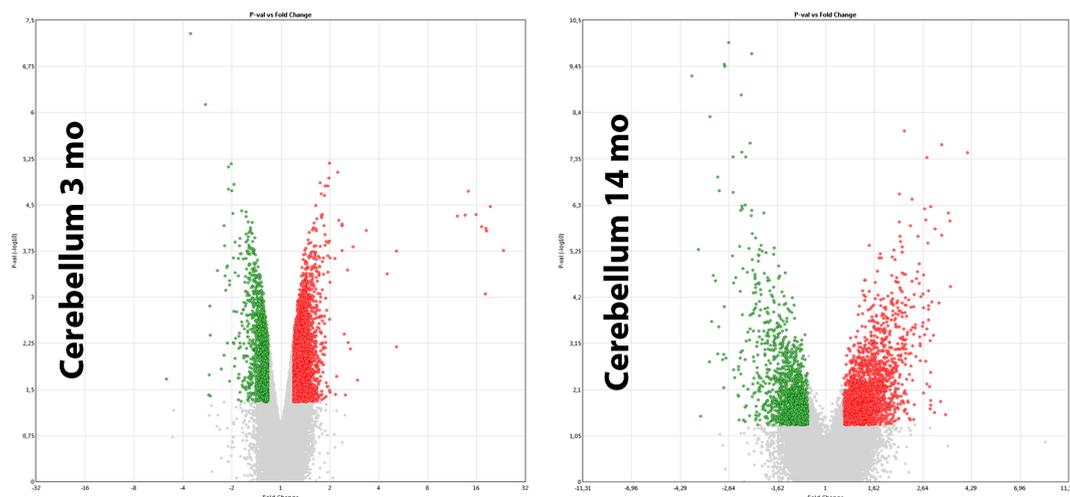


Figure 3.40. Volcano plot showing the distribution of the genes that passed the filter criteria. Significantly up-regulated transcripts are highlighted in red and significantly down-regulated in green. Fold-change values are plotted.

When comparing the different groups in the array with the percentages corresponding to the significantly dysregulated transcripts, the Non-Coding group shows the highest percentage of all; 59% in the 3-month-old and 68% in the 14-month-old cerebellar samples. This effect was also observed in both spinal cord transcriptomic data sets (50% of Non-Coding in the significantly up-regulated transcripts in the 3-month-old data set and 42% in the 14-month-old spinal cord data set).

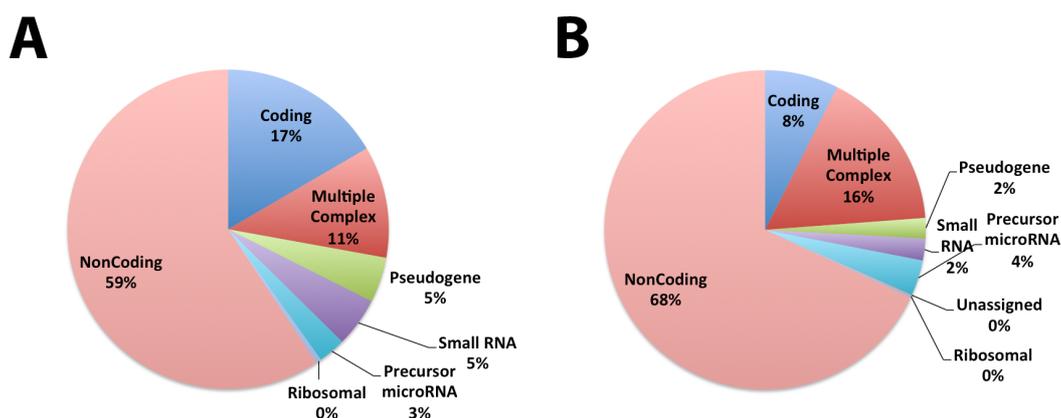


Figure 3.41. Percentage distribution of the significantly up-regulated transcripts in the different categories from the array corresponding to (A) 3 mo and (B) 14 mo. The highest percentage of significantly up-regulated transcripts corresponds in both cases to the Non-Coding category followed by the Multiple Complex and Coding categories.

3.6.2 A common significant dysregulated pathway in all transcriptomics data sets is the Cholesterol metabolism

The Transcriptome Analysis Console (TAC) software generates lists of differentially expressed genes and determines pathways of interest from publicly available databases such as *Wikipathways*. A commonly affected pathway that was identified in all data sets was the Cholesterol metabolism. When the data sets were screened for transcripts involved in biosynthesis, degradation, and transports of cholesterol, a high number of them were dysregulated in all conditions. Therefore, we wanted to visualize the distribution of the raw data corresponding to these transcripts to further identify candidates in the *Atxn2-CAG100-KIN* mouse model that could be useful to follow the progression of the disease. The expression values were first normalized to define background values in the microarray and then plotted in a heatmap with Spotfire Decision site 9.1.2 software to better compare the different ages and tissues used (Figure 3.42). The normalized expression values were only visualized in the heatmap, therefore no statistical analysis was performed at this point.

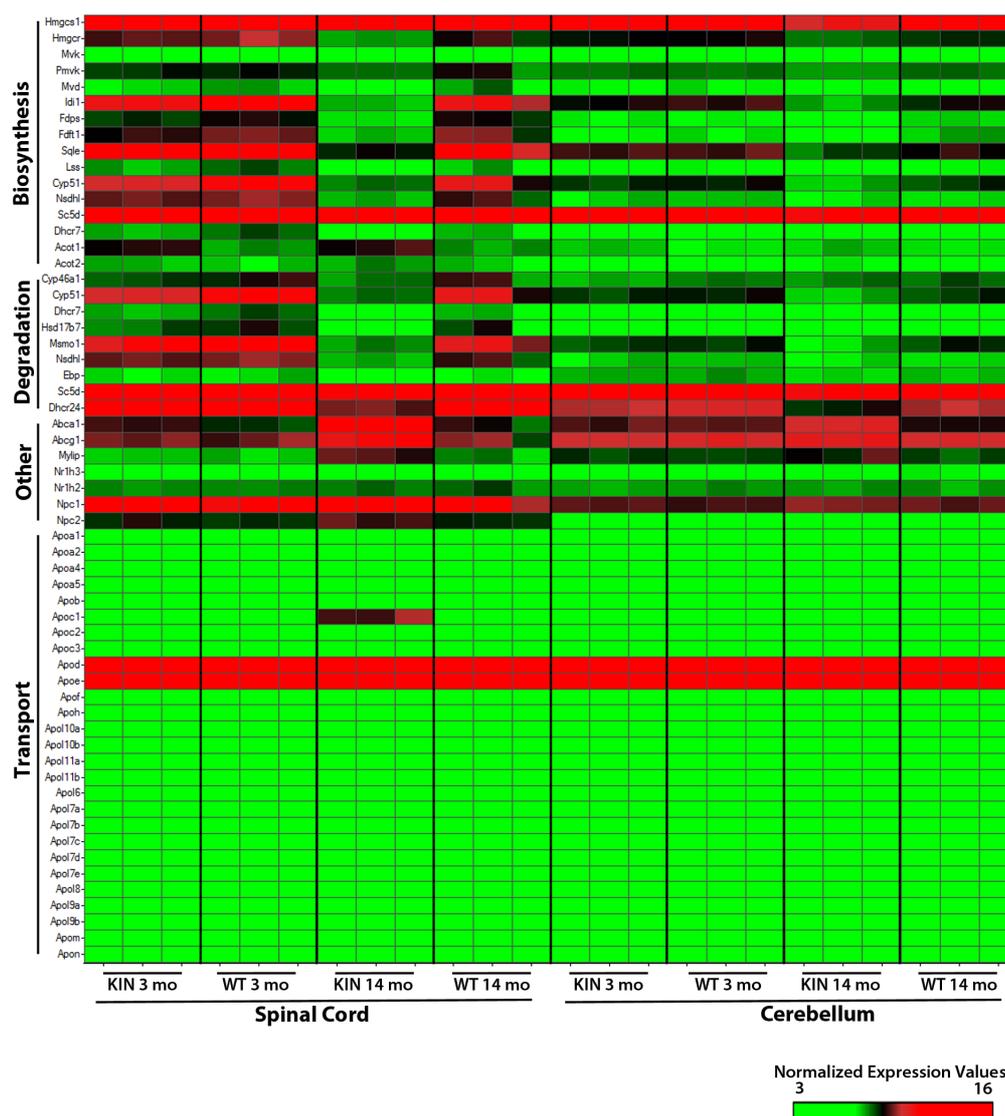


Figure 3.42. Heatmap generated with the Spotfire Decision site 9.1.2 software showing the normalized expression values from the array corresponding to the Cholesterol metabolism pathway. The heatmap allows us to visualize the differences in the raw expression values and compare them between the different age and tissue conditions used to generate the transcriptomics data sets.

Overall, the cholesterol biosynthesis related transcripts were highly expressed in the 3-month-old spinal cord samples, showing a similar pattern between the mutant and WT. Regarding the 3-month-old cerebellar samples, overall fewer transcripts seem to be highly expressed compared to the spinal cord. Therefore, a more discrete affection of the biosynthesis of cholesterol was expected especially in the cerebellum of 3-month-old *Atxn2*-CAG100-KIN animals compared to the sex- and age-matched WT. On the other hand, when comparing the cholesterol biosynthesis in the spinal cord of 14-month-old *Atxn2*-CAG100-

KIN animals to the WT there was a clear reduction in expression values for an important number of implicated factors. A similar effect was also observed for the cerebellar samples where the *Atxn2*-CAG100-KIN showed lower expression values than the WT. Next, factors implicated in degradation of cholesterol were also visualized (Figure 3.42); the cholesterol is known to have a slow turnover in the CNS. Interestingly, in both spinal cord and cerebellar samples from 14-month-old *Atxn2*-CAG100-KIN a different pattern for the transcripts plotted could be observed, suggesting that not only biosynthesis, but also degradation of cholesterol was affected.

3.6.3 Validation of dysregulated transcripts identified via transcriptomics regarding cholesterol metabolism in cerebellar samples of *Atxn2*-CAG100-KIN and *Atxn2*-KO mouse models

Ataxin2 has been implicated in lipid metabolism and *Atxn2*-KO mice show an increase of weight and insulin resistance (Kiehl et al 2006, Lastres-Becker et al 2008a). Moreover, these animals present an increase of cholesterol levels in serum, lipid and glycogen accumulation in the liver, and alteration of lipids and lipid metabolism-related molecules in the cerebellum pointing to a general dysregulation of lipid metabolism in absence of *Atxn2* (Lastres-Becker et al 2008a, Meierhofer et al 2016).

Cholesterol is an essential structural component for cellular membranes. The brain is the most cholesterol-rich organ containing around 20% of the body's cholesterol (Björkhem & Meaney 2004), thus it is an essential component for neuronal physiology. The cholesterol metabolism in the brain is independent from the peripheral tissues due to the presence of the blood brain barrier (BBB) (Jeske & Dietschy 1980). An important percentage of cholesterol in the adult brain forms the myelin sheaths to insulate axons with the rest present in plasma membranes to maintain the morphology and synaptic transmission in neurons and other cell types, such as astrocytes (Dietschy & Turley 2004). Moreover, cholesterol depletion in neurons impairs synaptic vesicle exocytosis, neuronal activity, and neurotransmission, leading to dendritic spine and synapse degeneration (Zhang & Liu 2015). Defects in brain cholesterol have been linked to neurodegenerative disorders such as AD, PD, and Huntington's disease (HD).

Therefore, validation efforts were made to further investigate the cholesterol metabolism in the cerebellum of the *Atxn2*-CAG100-KIN model. Several transcripts that were identified via transcriptomics in both spinal cord and cerebellar tissue were analyzed in 3-month-old and 14-month-old *Atxn2*-CAG100-KIN cerebellar samples together with *Atxn2*-KO samples.

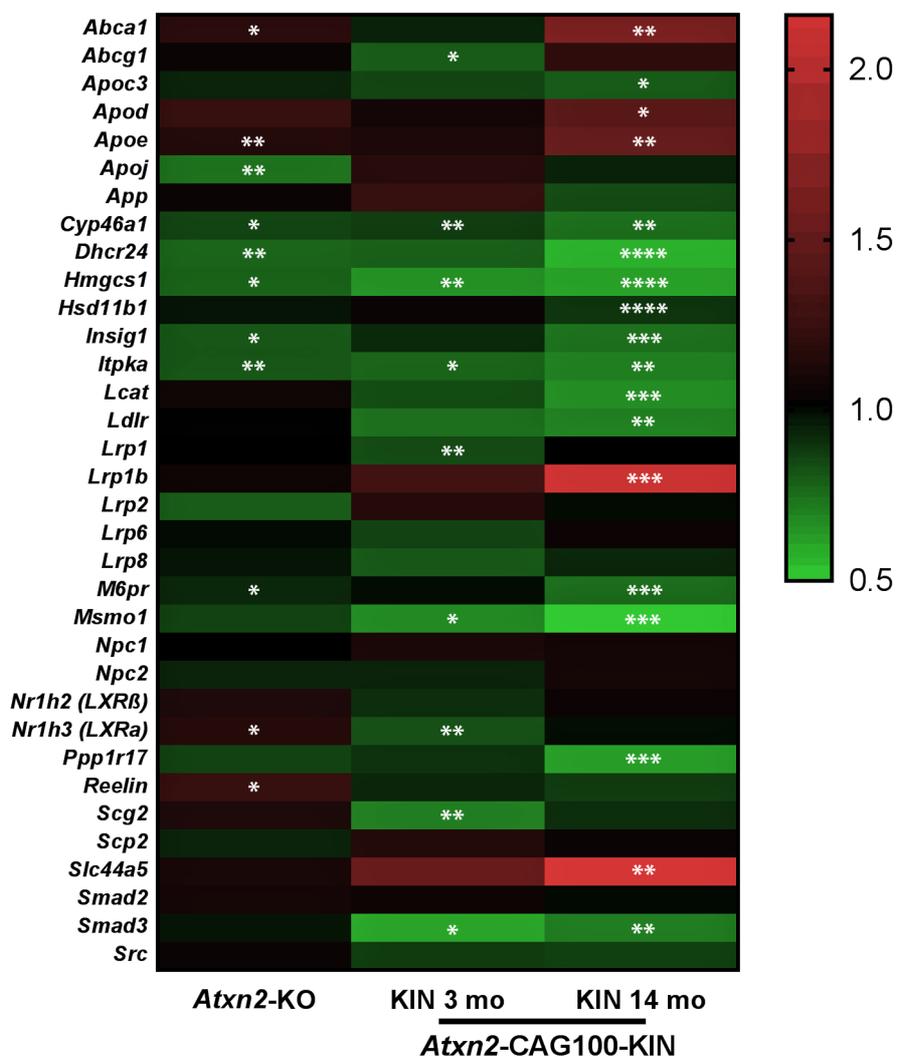


Figure 3.43. Heatmap generated with GraphPad plotting the Fold-Change values from Q-PCR experiments. Validation of several dysregulated genes in the cerebellum of *Atxn2*-KO and *Atxn2*-CAG100-KIN mice at different ages compared to their WT. Stars correspond to significances obtained from GraphPad analysis.

Three important enzymes implicated in the biosynthesis and degradation of cholesterol were found to be down-regulated in almost all conditions tested: *Cyp46a1* (Cytochrome P450 family 46 subfamily A member 1, implicated in degradation), *Dhcr24* (24-Dehydrocholesterol reductase, implicated in degradation), and *Hmgcs1* (3-Hydroxy-3-methylglutaryl-CoA synthase 1,

implicated in biosynthesis). The upstream factor of *Hmgcs1*, *Insig1* (Insulin induced gene 1), was also found to be down-regulated in *Atxn2*-KO and 14-month-old *Atxn2*-CAG100-KIN samples thereby suggesting a loss of feedback control in cholesterol synthesis. On the contrary, the astrocyte membrane cholesterol transporter *Abca1* (ATP binding cassette subfamily A member 1) was found up-regulated in both *Atxn2*-KO and 14-month-old *Atxn2*-CAG100-KIN samples sets. The Apolipoprotein E transcript (*ApoE*), which has been long implicated in AD, was found significantly up-regulated in *Atxn2*-KO and 14-month-old *Atxn2*-CAG100-KIN samples. Overall, these data suggest that the loss-of-function of ATXN2 either via knocking out or via aggregation due to poly(Q) expansions affects the synthesis and degradation of key factors in cholesterol metabolism, likely leading to an imbalance of this essential component in membranes and myelin sheaths.

Part 2 – Ataxia Telangiectasia Mutated

Ataxia Telangiectasia (A-T) is a recessive form of ataxia caused by loss-of-function mutations in the ataxia telangiectasia mutated (ATM) gene. Affected patients suffer from a progressive cerebellar ataxia that develops into general motor dysfunction, immunodeficiency, and radiosensitivity, predisposing them to cancer (Chun & Gatti 2004, Shiloh & Lederman 2017). The evaluation of alpha-fetoprotein in blood serum is used as a biomarker since it is usually detectable early in disease progression (Schieving et al 2014). We aimed to characterize new molecular biomarkers using cerebrospinal fluid (CSF) samples from patients and controls, and to obtain novel insights into the progression of the ataxia. This work was done in collaboration with the laboratory of Professor Ralf Schubert in the department for children and adolescents at Goethe University; they kindly provided all the murine samples and patients' data used in this part.

3.7 A-T patient cerebrospinal fluid shows progressive elevation of protein albumin

In order to identify novel molecular biomarkers of risk and progression in A-T, the CSF from 12 patients and 12 sex- and age-matched control individuals was analyzed. In addition to diagnostic tests such as neuroimaging (Figure 3.44, A), clinical ataxia scores and determination of alpha-fetoprotein levels were documented (Table 3.9).

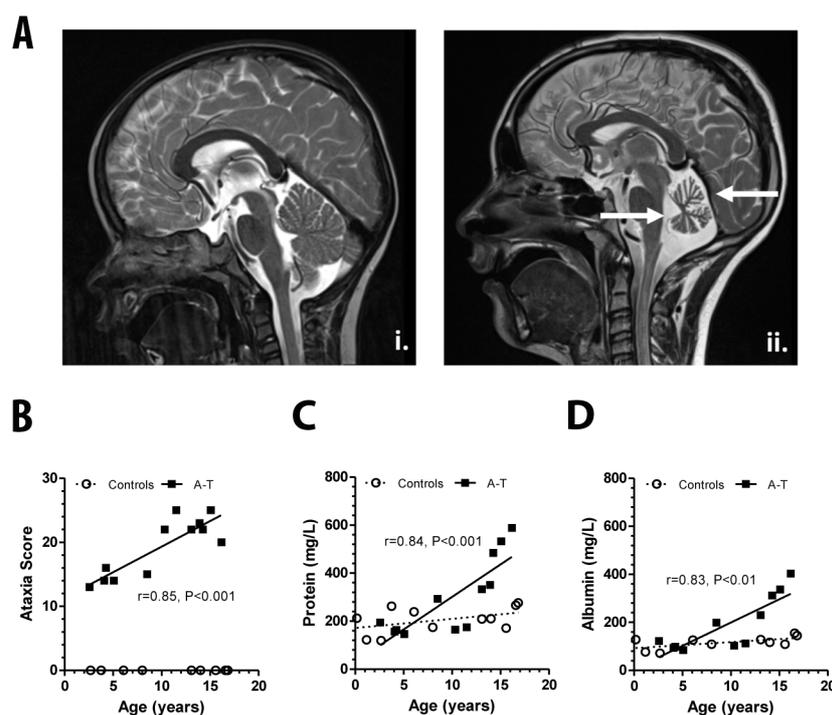


Figure 3.44. Progressive neurodegeneration in A-T: (A) MRI images from (i) a 3-year-old and (ii) a 16-year-old patient with A-T. The shrinking cerebellum of the older A-T patient is surrounded by an excess amount of CSF (highlighted by white arrows). This extracellular fluid generates high intensity values (shown as light gray or white) in the T2-weighted magnetic resonance image. (B) Age-associated progression of ataxia scores is documented for 12 patients. Controls showed no signs of ataxia (score = 0). (C) Total protein and (D) albumin concentrations analyzed in CSF of the 12 A-T patients and control individuals. Correlation between these parameters and age in A-T was assessed by calculating Pearson's correlation coefficient.

Parameters	Controls ($n=12$)	A-T patients ($n=12$)
Age [years]	8.5 ± 6.4	10.0 ± 4.8
Sex [female/male]	4/8	5/7
Height [cm]	128 ± 40.4	128 ± 26.3
Weight [kg]	32.0 ± 23.7	31.1 ± 19.4
Ataxia score	0 ± 0.0	20.2 ± 4.2
α -Fetoprotein [ng/mL]	<10.0	334 ± 215
Number of identified CSF proteins in MS ^{a, b}	678 ± 95	685 ± 56^b

Table 3.9. Patient's characteristics. ^aWith at least two unique peptides. ^bDerived from 11 A-T patients and 9 controls.

The CSF data from A-T patients showed an increase in total protein and albumin levels compared to the controls (Figure 3.44 C and D), in good correlation with the ataxia score (Figure 3.44, B) and the determination of alpha-fetoprotein levels (Table 3.9). Among patients aged 10 to 16 years, total protein and albumin levels showed better correlation to age than ataxia scores.

3.7.1 Global proteomics reveals several dysregulations in the reelin signaling pathway

The three oldest patients (14-16 years) with the strongest increase in total protein and albumin were selected to study the most advanced pathology in comparison to their matched controls. The analysis of the proteome data from the CSF identified a similar number of proteins in the two groups (Table X); 678 proteins were detected in A-T patients and 685 in controls. A total of 68 proteins were found with significant differences in expression: 47 were down-regulated and 21 up-regulated (Canet-Pons et al 2018). Our data confirm all 13 priority proteins reported previously in the CSF of A-T patients (Dziedziatowska et al 2011), however only secretogranin (CHGB; Log₂FC -1.58; MinusLog(p-value) 2.71), SPARC (Log₂FC -1.28; MinusLog(p-value) 1.79) and cathepsin D (CTSD; Log₂FC -0.97; MinusLog(p-value) 1.34) dysregulations were significant.

Visualization of the data in a volcano plot (Figure 3.45, A), showed a prominent PN vulnerability with a marked reduction of CALB1 (Log₂FC -2.49, decreased to 18%) (Figure 3.45, C). CALB1 is an abundant calcium-homeostasis factor, specific for GABA-ergic PN, which usually shows reduced content in cerebellar ataxias (Barski et al 2003, Koeppen 2005, Xia et al 2013). This deficiency contrasted with the up-regulation of the PN-generated apolipoprotein J, or clusterin (CLU, increase to 287%) (Figure 3.45, G). Moreover, several factors expressed and secreted by the glutamatergic granular neurons (GN) were also abnormal: reelin (RELN) down to 21%; cerebellin-1 (CBLN1) down to 8%; and cerebellin-3 (CBLN3) down to 6% (Figure 3.45, B, D and E). A strong up-regulation to 1085% was also detected for apolipoprotein B100 (APOB).

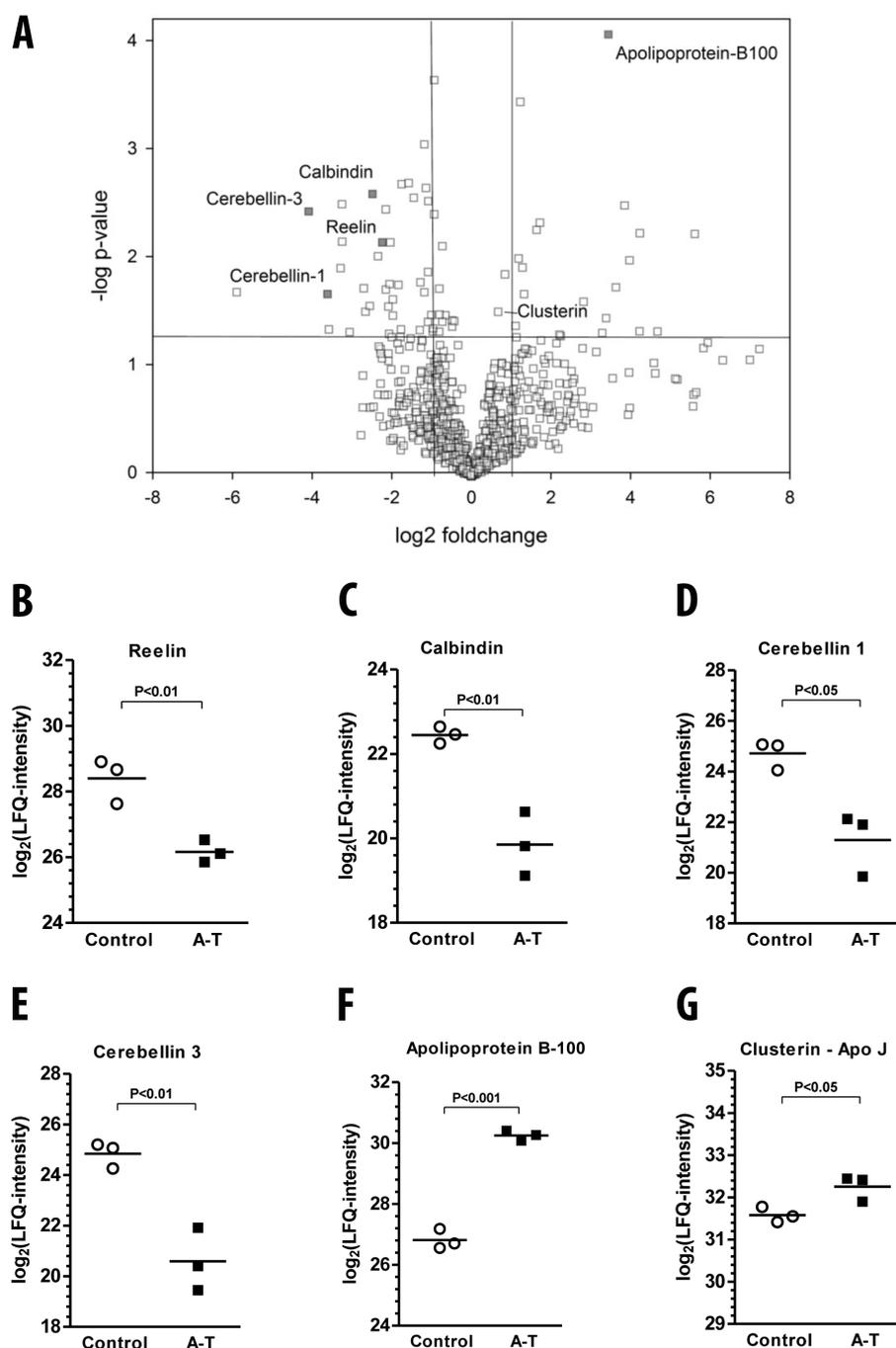


Figure 3.45. Proteomic analysis of the CSF collected from the three oldest patients and three controls (age 14-17 years), performed by a label-free protein quantification approach using nano-ultra-high performance liquid chromatography/ nano-electrospray mass spectrometry (nano-UPLC/ nano-ESI-MS). (A) Analysis of the data was performed with the MaxQuant and Perseus quantitative proteomic software and is illustrated by a volcano plot. Label-free quantification is shown for (B) reelin, (C) calbindin (D) cerebellin-3, (E) cerebellin-1, (F) apolipoprotein B-100, and (G) clusterin in the three oldest A-T patients compared to their controls.

Among all 68 dysregulations previously mentioned (Canet-Pons et al 2018), 10 factors had previously been implicated in the pathogenesis of ataxia: APOB (up to 1085%) (Berezki et al 2008, Hentati et al 2012), RELN (down to 21%) (Hirotsume et al 1995), CALB1 (down to 18%) (Airaksinen et al 1997), CBLN1 (down to 8%) (Hirai et al 2005), MANBA (beta-mannosidase, down to 60%) (Labauge et al 2009), CTSD (down to 51%) (Ehling et al 2013, Hersheson et al 2014), FAT2 (FAT atypical cadherin 2, to 11%) (Nakayama et al 2002, Nibbeling et al 2017), CNTN6 (contactin 6, to 44%) (Takeda et al 2003), LAMA4 (laminin subunit alpha 4, to 29%) (Wallquist et al 2005), and NEU1 (neuraminidase 1, to 24%) (Seyrantepete et al 2003).

Age correlation plots (**Figure 3.46**) and linear regression models (data not shown) were employed in the CSF proteome of 11 patients versus 9 controls to assess which of these factors seem most useful as potential molecular biomarker in view of its correlation with age and genotype. As expected, CALB1 levels in patients progressively declined with age (data not shown). Interestingly, RELN appeared to decrease earlier and correlate with age more strongly (**Figure 3.46, B**). Reelin levels also showed a strong correlation with ataxia scores (**Figure 3.46, A**), and a normalization of its depletion versus the progressive increase of CSF protein content enhanced the steepness of the regression.

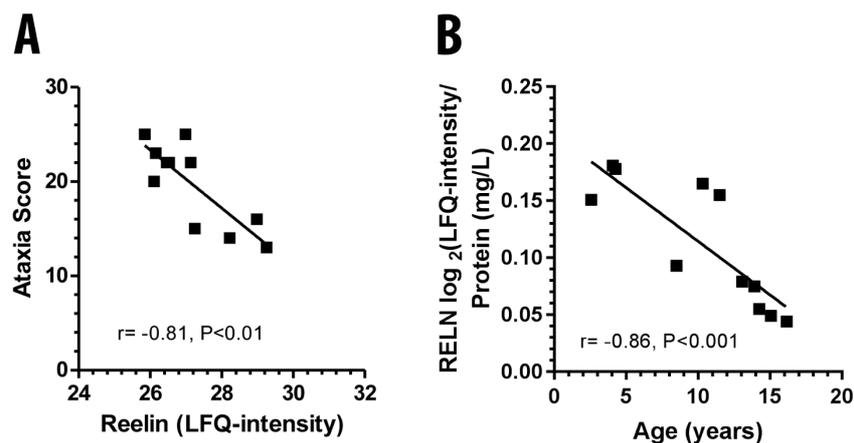


Figure 3.46. Reelin levels showed strong correlation with ataxia scores. A normalization of its depletion versus the progressive increase of CSF protein content enhanced the steepness of the regression line.

3.7.2 Protein interaction bioinformatics suggest glutamatergic axon input to Purkinje neurons as site of pathology, while identifying molecular biomarkers of neuroinflammation

Additional unbiased bioinformatics analysis with STRING of all significantly dysregulated proteins was performed. The analysis was performed to look for enrichment of specific GO terms (*cellular components, biological processes, and molecular function*), of KEGG pathways, and of protein domains.

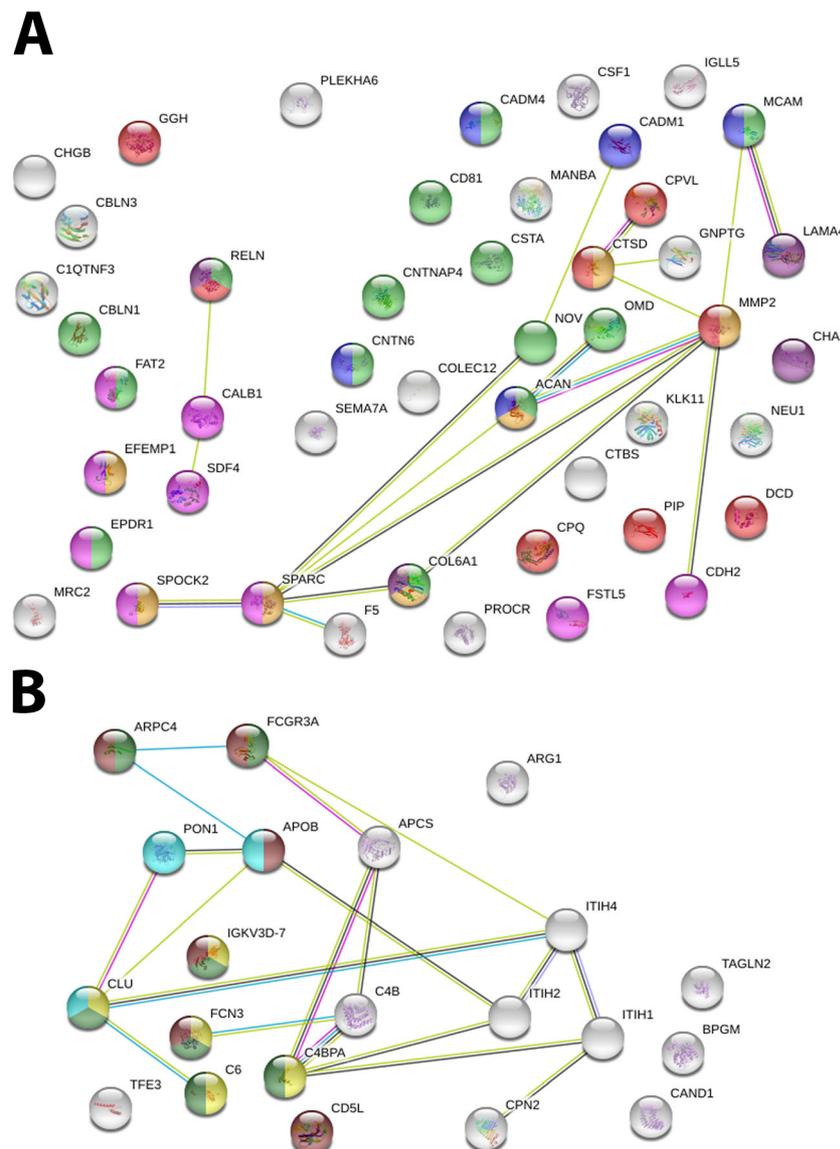


Figure 3.47. STRING diagram of protein-protein interactions and pathway enrichments among all 68 dysregulated factors in the CSF from the three oldest A-T patients, separately for down- and up-regulations. (A) Among the significant down-regulated factors, there were pathways enrichments for *extracellular matrix-receptor interaction* (purple bullets), *biological adhesion* (green bullets), *extracellular matrix organization* (dark yellow bullets) *calcium ion binding* (fuchsia bullets), *peptidase activity* (red bullets), and *immunoglobulin subtypes* (dark blue bullets). (B) Among the

significant up-regulations, there was pathway enrichment for *complement activation* (yellow bullets), *immune effector process* (dark green bullets), *endocytosis* (brown bullets), and *plasma lipoprotein particles* (blue bullets).

As expected, significant protein-protein interaction enrichment was observed for both down-regulations (pvalue 0.00948) and up-regulations (pvalue 1.11e-15). Among the *cellular components*, enrichment for the extracellular region was detected for 36 down-regulated (false discovery rate $q=9.36e-14$) and 18 up-regulated proteins ($q=3.96e-08$), typical for a CSF study.

Focusing on the 47 down-regulations (Figure 3.47, A), for the GO *biological processes*, “biological adhesion” showed a significant enrichment of 14 factors ($q=0.0001$, green bullets), including CNTN6 (contactin6, down to 44%), CBLN1, and CBLN3. “Extracellular matrix organization” was enriched too ($q=0.03$, dark yellow bullets), also in the *biological processes* category. A total of seven factors were down-regulated including SPARC (secreted protein acidic and cysteine rich, to 41%), which is involved in the response to irradiation (Chetty et al 2012). Among the GO *molecular functions*, the category “calcium ion binding” showed an enrichment of 9 factors ($q=0.04$, fuchsia bullets). One of these factors was FAT2, previously implicated in ataxia pathology (Nakayama et al 2002, Nibbeling et al 2017). In *molecular functions*, “peptidase activity” showed enrichment for 8 factors ($q=0.04$, red bullets). A significant enrichment for the KEGG pathway “extracellular matrix-receptor interaction” of 4 factors was also detected ($q=0.01$, purple bullets). InterPro is another resource integrated in the STRING platform that provides functional analysis of protein sequences, classifies them into families, and predicts the presence of domains and important sites (<https://ebi.ac.uk/interpro/>). Among its defined domains, the “immunoglobulin subtype” showed an enrichment of 5 factors ($q=0.002$, dark blue bullets). Overall, key factors of PN connectivity with their glutamatergic input axons are prominent among the down-regulations.

Regarding the 21 up-regulations (Figure 3.47, B), the GO *biological process* categories of “complement activation” (5 factors, $q=8.83e-06$, yellow bullets) and “immune effector process” (7 factors, $q=0.0002$, dark green bullets) were enriched. One up-regulated factor in these categories was C4BPA (complement component-4 binding protein A, to 4884%) that binds abnormal DNA to inhibit DNA-mediated complement activation and inflammatory responses against

necrotic cells (Trouw et al 2005). Three other factors involved in immune response weren't identified by automated bioinformatics: IGHM (immunoglobulin heavy constant mu chain, to 1567%), CPN2 (carboxypeptidase-N subunit-2, to 1238%), and CD5L (CD5 like, to 1876%) (Matthews et al 2004, Sanjurjo et al 2015). Overall, neuroinflammatory responses are prominent among the up-regulations, but the dysregulation of lipoprotein particles and endocytosis pathways may be a direct effect of ApoB/RELN and ATM membrane functions.

3.8 Validation in *Atm*-KO cerebellar mRNA confirms the excess of *ApoE/ApoH* and deficit of reelin receptor transcripts

To assess whether these pathways have a prominent role in cerebellar tissue of an A-T mouse model, we used 1.5 to 3 month cerebellar samples from *Atm* *-/-* animals (Barlow et al 1996). These animals die at an age of 4 to 6 months due to thymic lymphomas without showing signs of cerebellar degeneration. A hallmark of these mice is the high level of oxidative stress by reactive oxygen species (ROS) that affects several tissues, including the cerebellum (Barlow et al 1999). We aimed to identify which of the candidates detected in the CSF of A-T patients are early events occurring in the cerebellum. Instead of quantifying secreted factors or studying their extracellular turnover, we analyzed transcript levels of key components of cholesterol-apolipoprotein trafficking, reelin signaling, glutamatergic input to PN, glutamate receptors, calcium homeostasis, oxidative stress, neuroinflammation, and cell adhesion pathways (Figure 3.48).

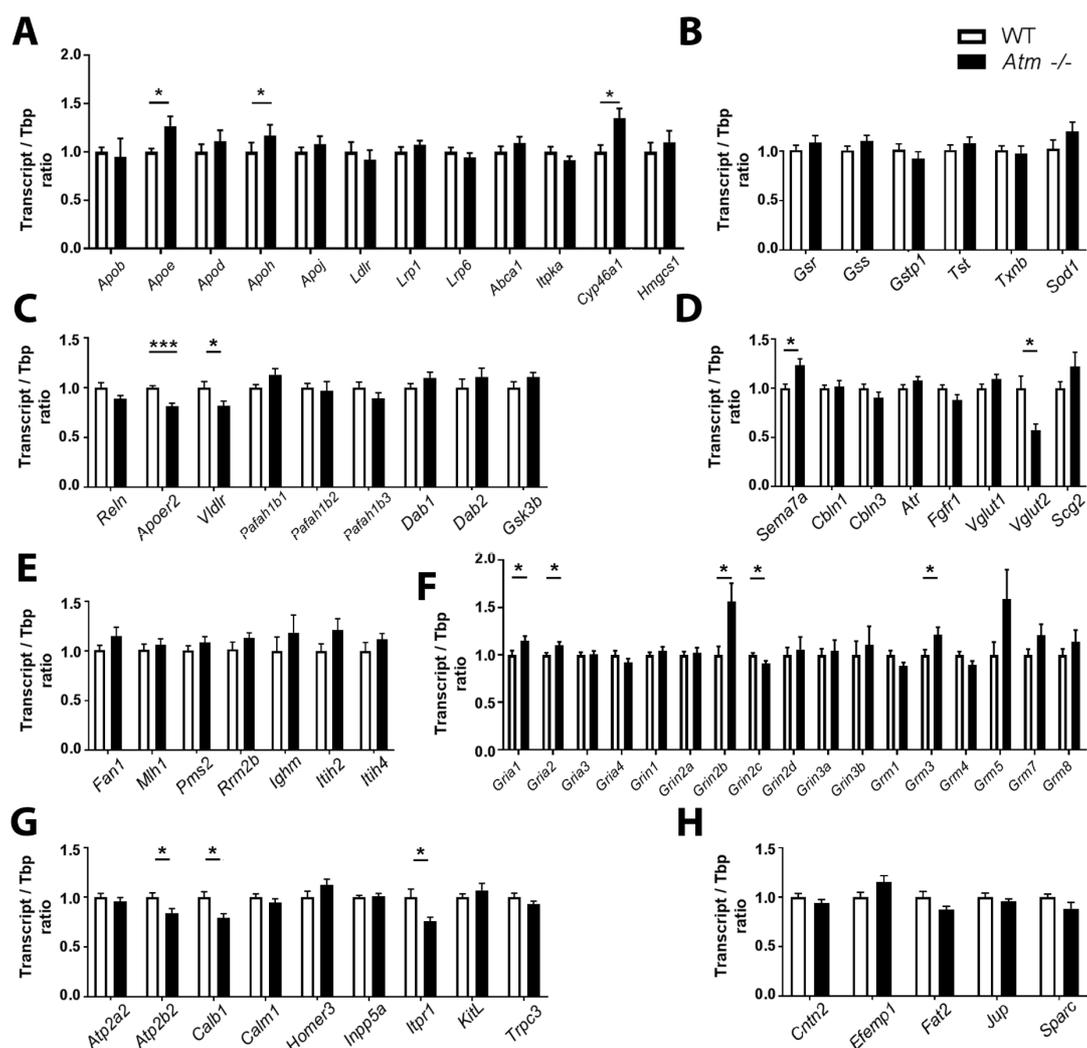


Figure 3.48. In cerebellar tissue from 2-month-old *Atm*^{-/-} (n=8, black bars) versus WT mice (n=8, white bars), the mRNA levels were assessed by Q-PCR for crucial factors in several relevant pathways. (A) Key factors of apolipoprotein and cholesterol trafficking, significant up-regulations were detected for *ApoE*, *ApoH* and *Cyp46a1*. (B) No changes were detected at this age for any factor in the oxidative stress response. (C) In the reelin signaling pathway, both receptors (*Apoer2* and *Vldlr*) showed significantly reduced transcript levels. (D) Among modulators between PN and afferent excitatory presynapses, an elevation of *Sema7a* and reduction of *Vglut2* were detected, both of them linked to climbing fiber pathology. (E) No DNA damage repair or neuroinflammation markers were found altered. (F) Glutamate receptor exhibited elevation of the NMDA subunit *Grin2b* transcript level, decrease of *Grin2c* and increase for the AMPA subunit *Gria1* and *Gria2*, as well as the metabotropic subunit *Grm3*. (G) The essential factors of calcium-dependent excitability *Atp2b2*, *Calb1* and *Itp1* were found significantly down-regulated, reflecting the incipient dysfunction of PN. (H) Despite various changes in PN postsynapses and glutamatergic synapses, no alterations of the specific cell adhesion factors between cerebellar circuits were detected at this stage. The Y-axis shows the ratio of a transcript of interest versus Tbp as housekeeping gene, normalized versus WT, reflecting the fold change in mutants.

Significant increases were observed for the cholesterol-transporting apolipoproteins *ApoE* (FC1.27 p-value 0.033), *ApoH* (FC 1.59 p-value 0.032) and the cholesterol efflux regulator *Cyp46a1* (FC 1.35 p-value 0.02), while markers

for oxidative stress showed no dysregulation at this stage (Figure 3.48, B). These changes serve as evidence that altered cholesterol trafficking and increased synthesis of ligands may substitute for reelin (Figure 3.48, A). A crucial confirmation of the reelin reduction in patients' CSF was that the *Atm*^{-/-} cerebella showed significant mRNA reduction for reelin receptors, *Vldlr* (FC 0.82 p-value 0.037) and *Apoer2* (FC 0.82 p-value 0.0003), even at a young age (Figure 3.48, C). The transcript levels of *Reln* and its intracellular transducers *Pafah1b1*, *Pafah1b2*, *Pafah1b3*, *Dab1*, *Dab2*, and *Gsk3b* were not changed (Figure 3.48, C).

3.9 Validation in *Atm*-KO cerebellar tissue confirms the excess of ApoB protein and deficit of the VLDL receptor

In order to gain deeper insight at the protein level and determine whether the dysregulation of apolipoprotein signaling pathways precedes the neurodegeneration, quantitative immunoblots were used. Three different apolipoproteins were checked (ApoB, ApoE and ApoJ), together with the levels of RELN and its receptor VLDLR. CALB1 and NeuN were used as neuronal markers, for PN and GN respectively, to confirm that at the age of ~2 months there is no degeneration in the cerebellum of *Atm*^{-/-} mice.

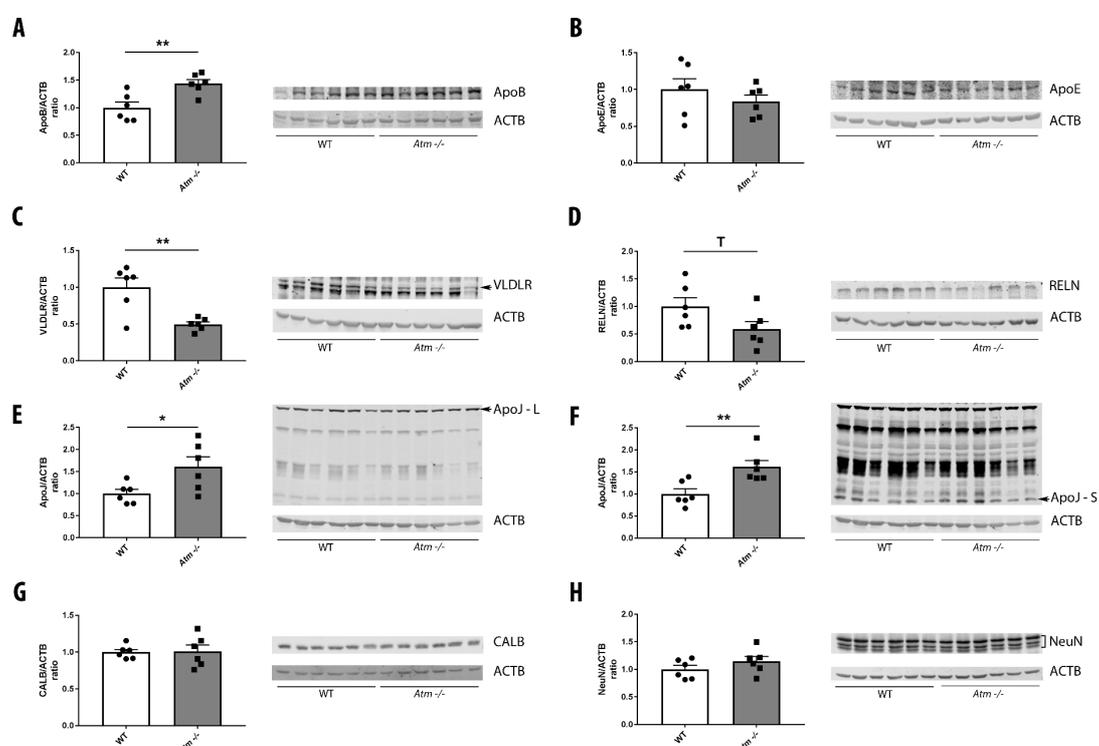


Figure 3.49. In cerebellar tissue from 2-month-old *Atm*^{-/-} (n=6, gray bars) versus WT mice (n=6, white bars), the protein levels were assessed by quantitative

immunoblots for crucial factors in several relevant pathways. (A) ApoB (FC 1.43 p-value 0.0007); (B) ApoE (FC 0.84 p-value 0.36); (C) VLDLR (FC 0.49 p-value 0.0095); (D) RELN (to 60% p-value 0.08, illustrated by T for statistical Trend); (E) ApoJ full-length and glycosylated isoform as uppermost band (FC 1.61 p-value 0.04); (F) ApoJ cleaved and deglycosylated isoform as lowest band (FC 1.61 p-value 0.008); (G) CALB1 (FC 1, p-value 0.92); (H) NeuN (FC 1, p-value 0.24). The Y-axis of each plot shows the ratio of a protein of interest versus ACTB as loading control, normalized versus WT, reflecting the fold change in mutants.

These experiments confirmed that ApoB showed an increase to 143% (FC 1.43 p-value 0.0007; in RIPA fraction) and VLDLR showed a decrease to 50% (FC 0.49 p-value 0.0095; SDS fraction). Among ApoJ isoforms, the large full-length glycosylated band exhibited an increase to 160% (FC 1.61 p-value 0.04; RIPA fraction) and the smallest cleaved and deglycosylated band an elevation to 161% (FC 1.61 p-value 0.008; RIPA fraction). No evidence of PN or GN loss was apparent at this stage (CALB1: FC 1 p-value 0.92; NeuN: FC 1 p-value 0.24).

These results are in agreement with previous literature showing that ApoB and VLDLR levels are inversely correlated (Kobayashi et al 1996) and that ATM depletion modulates specific isoforms of ApoJ (Luo et al 2014). Interestingly, an up-regulation of ApoB protein levels occurred before RELN steady-state levels changed significantly.

3.10 Co-immunofluorescence staining confirms the absence of neuronal death

Co-immunofluorescence studies with the same antibodies used for WB confirmed the absence of neuronal death as well as the preferential PN localization of VLDLR (Figure 3.50, C). As receptor ligands, both the GN-secreted reelin (Figure 3.50, A) and GN/PN secreted ApoB (Figure 3.50, B) were found to accumulate in PN.

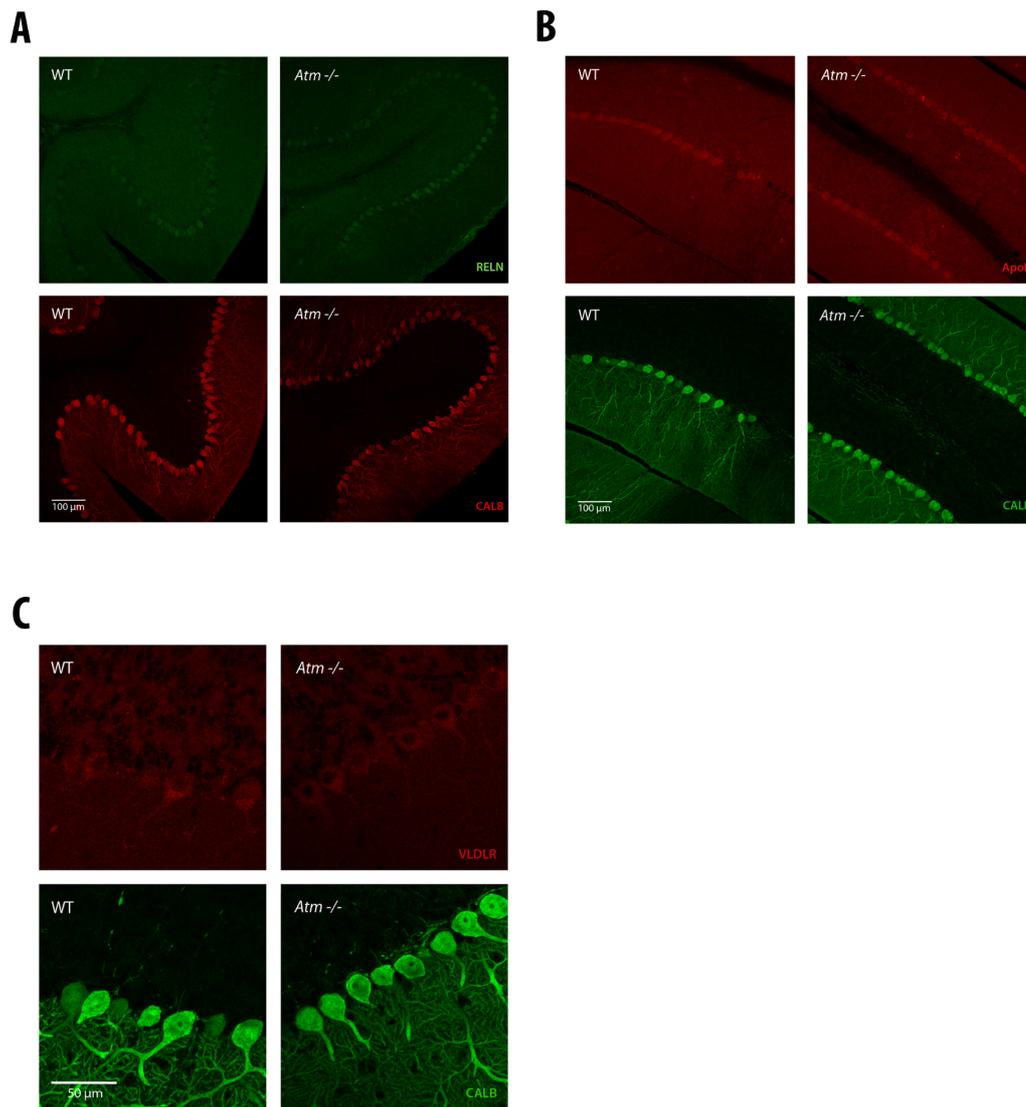


Figure 3.50. Coimmunofluorescence stainings confirming the absence of neuronal death and the preferential PN localization of VLDLR. (A) Labeled in green RELN and in red CALB1, no obvious differences were found between the WT and *Atm*^{-/-}. (B) Labeled in green CALB1 and in red ApoB, showing a preferential localization to the PN. (C) Labeled in green CALB1 and in red VLDLR, showing again preferential localization at the PN layer.

3.11 Schematic representation of the altered pathways identified in patients and validated in the *Atm*^{-/-} mouse model

As an attempt to summarize and integrate all the data presented until now, a schematic representation of the potential events happening in the mouse model at early ages was generated (Figure 3.51). Red letters were used to highlight up-regulated factors and blue letters for down-regulations.

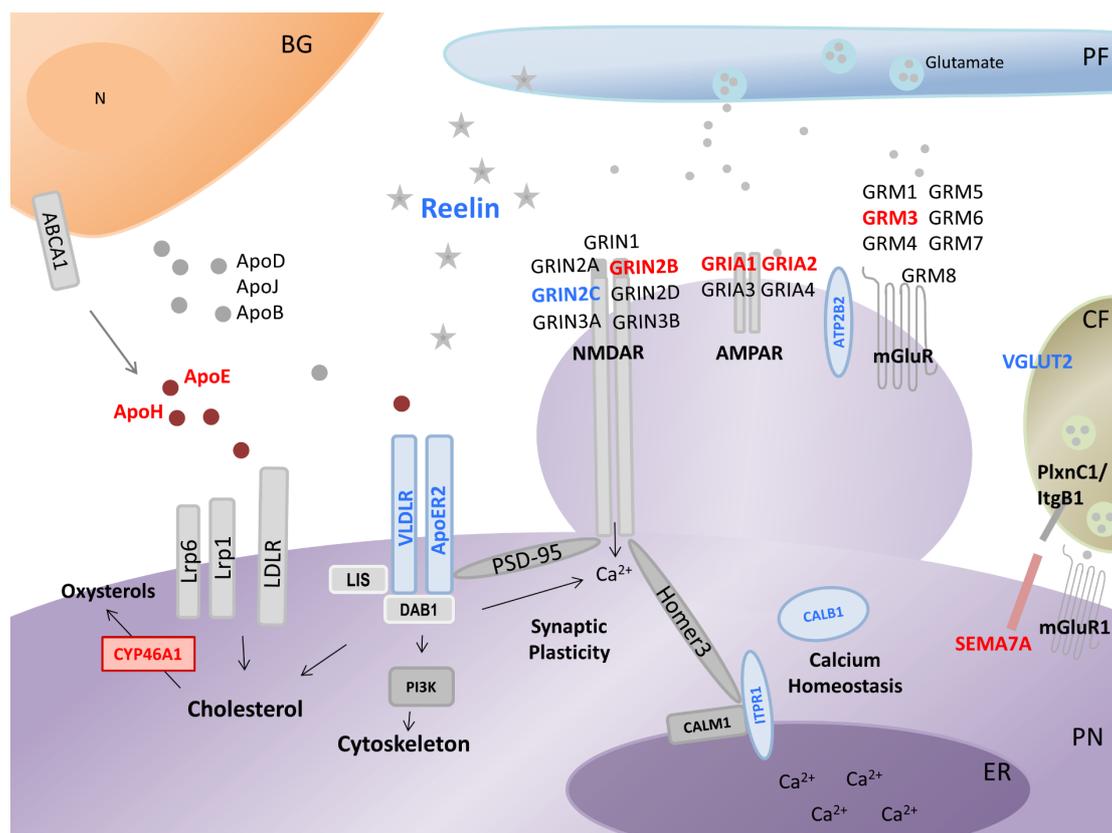


Figure 3.51. Schematic overview of apolipoprotein and glutamate signaling modulated via reelin within neural circuits of the cerebellum (PN for Purkinje neuron, CF for climbing fiber, PF for parallel fiber, BG for Bergmann glia, ER for endoplasmic reticulum, N for nucleus). Relevant Q-PCR and immunoblot findings in the 2-month-old *Atm*^{-/-} cerebellum were highlighted (red for up-regulations, blue for down-regulations).

3.12 The generation of a transcriptomics data set from 12-month-old *Atm*^{-/-} cerebellum versus WT mice shows a higher number of down-regulations

As previously mentioned, the lifespan of the *Atm*^{-/-} mice is decreased by a number of lymphomas that cause animal death around 6 months, making it impossible to study the degeneration of the cerebellum in this model (Barlow et al 1999, Xu et al 1996). A way to overcome this time limitation is through bone marrow transplantation. After the intervention, these animals can live up to 12 months of age and show loss of PN (Pietzner et al 2013). After investigating the pathology in the cerebellum of younger animals, a novel transcriptomics data set was generated using cerebellar samples from four 12-month-old *Atm*^{-/-} animals versus their sex and age-matched WT. Affymetrix Clariom™ D mouse arrays from Thermo Fisher were used and the analysis was carried out with the

Transcriptome Analysis Console (TAC) software using standard parameters and self-determined filter criteria (fold change <-1.2 or >1.2 ; p-value ≤ 0.05).

3.12.1 Experiment design

The bone marrow transplantation of *Atm*^{-/-} mice was crucial to generate this data set from older cerebellar samples (Figure 3.52, A). To perform the transplant, an *Atm*^{-/-} recipient was conditioned administrating 0.125 mg/mL of anti-CD4 antibody and 0.125 mg/mL of anti-CD8 antibody seven days before the intervention. One day before the surgery, a second dose of each antibody was administered together with 200 mg/kg of cyclophosphamide for non-myeloblastic conditioning. Bone marrow cells were harvested in sterile manner from CD-90.2 depleted donors on the same day of the intervention, and 5×10^6 cells were injected intravenously into the conditioned recipients (Bagley et al 2004, Pietzner et al 2013).

Once the animals reached the desired age, four mutants and four WT were sacrificed and the cerebellum was dissected. RNA extraction was performed in parallel for both genotypes in order to reduce technical variation. All procedures were performed in an RNase-free hood to ensure the quality and integrity of the resulting RNA. Panel B in Figure 3.52 shows the genes that passed the filter criteria plotted in a volcano plot. Down-regulations are highlighted in green and up-regulations are highlighted in red.



Figure 3.52. Work flow scheme followed to generate the transcriptome data set. (A) Scheme of the generation of the transplanted bone marrow *Atm*^{-/-}. (B) Volcano plot showing the distribution of the significant down-regulations (green) and up-regulations

(red) after the analysis of the data set with the TAC software. The Y-axis shows p-value and the X-axis Fold Change.

3.12.2 General data from the array

A closer look at the genes that passed the filter criteria previously established showed that only 3.43% were found dysregulated (representing 2260 out of more than 65000 genes detected by the array). Of these, 58.32% were down- and 41.68% were up-regulated as shown in the Table 3.10.

	Passed filter criteria	Up-regulated	Down-regulated
Cerebellum			
12 months	2260 (3.43%)	942 (41.68%)	1318 (58.32%)

Table 3.10. General distribution of the genes that passed the filter criteria. Among the 3.43% total genes that passed the filter criteria the majority of them were found down-regulated.

There are nine defined groups in the array: Non-Coding, Multiple Complex (containing more than one of the other groups), Coding, Pseudogene, Precursor microRNA, small RNA, Ribosomal, Unassigned, and tRNA. In Figure 3.53 the percentages corresponding to each category are plotted in pie charts for up-regulations (Figure 3.53, A) and down-regulations (Figure 3.53, B). Interestingly, a high number of non-coding RNAs (ncRNA) were detected among the significant down-regulations. A number of ncRNA have been implicated in neuronal development, homeostasis, and neurodegenerative and psychiatric disorders (Salta & De Strooper 2012).

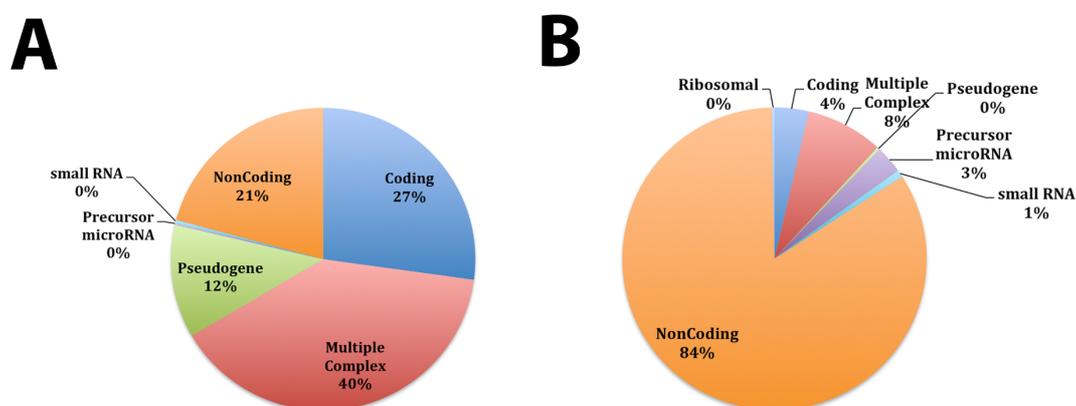


Figure 3.53. Percentages of the different dysregulated categories from the transcriptomics data set. (A) Up-regulated genes corresponding to each category are

enrichments for *somatodendritic compartment* ($q=1.08e-14$, blue bullets) and *neuron projection* ($q=9.95e-14$, green bullets) were observed. The *somatodendritic compartment* corresponds to the cell body (soma) and dendrites from neurons but excludes axons, while the *neuron projection* shows all genes and gene products annotated to neuron projections (axon or dendrite). Based on the GO cellular compartments, a total of 24 up-regulations out of the 99 analyzed with STRING are part of the dendritic compartment (blue/green bullets). Six are located at the axons (solid green bullets) and 3 at the soma (solid blue bullets). These data could point to an impaired input to PN as an explanation for the PN degeneration observed in A-T patients.

3.12.4 STRING analysis of the 1.5-fold-down-regulated genes show altered secreted factors

Of the significant down-regulations detected in the array, only few of them were part of the coding or multi complex categories. Therefore, the 1.5-fold-down-regulations were analyzed by STRING.

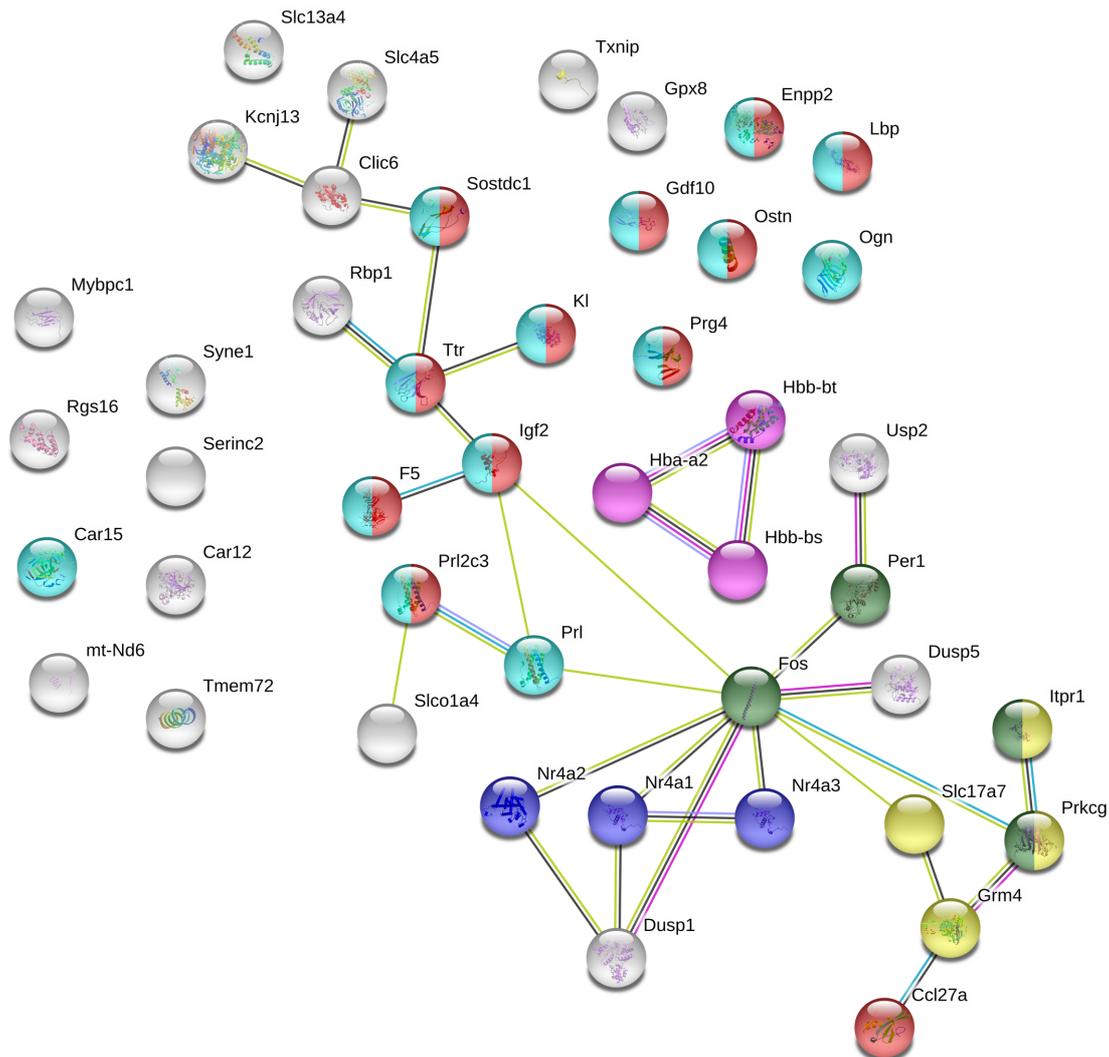


Figure 3.55. STRING analyses of the 1.5-fold-down-regulations show a high number of secreted factors altered. Significant KEGG pathway enrichment was detected for “glutamatergic synapse” (yellow bullets) and “circadian entrainment” (green bullets)

Significant protein-protein interaction enrichment was detected for the 1.5-down-fold-regulations (p-value $2.81e-12$). Among the GO *cellular compartment* category the GO-term “extracellular space” showed an enrichment of 12 factors ($q = 0.0016$, red bullets). Two KEGG Pathways were enriched as well: “Glutamatergic synapse” ($q=0.0036$, yellow bullets) and “Circadian entrainment” ($q = 0.0036$, green bullets). Based on another database integrated in STRING called Reactome (reactome.org) that provides interpretation and analysis of known pathways, the “nuclear receptor transcription pathway” showed enrichment of three factors ($q = 0.0376$, dark blue bullets). These three factors pertain to the orphan nuclear receptors 4A subfamily and have been proposed as potential targets to modulate response to chronic inflammation (Rodriguez-

Calvo et al 2017). Based on the UniProt Keywords, “secreted” showed an enrichment of 14 factors ($q= 0.0082$, turquoise bullets). The alpha (Hba) and beta (Hbb-bt, Hbb-bs) hemoglobins, part of the “globin” PFAM protein domain ($q=0.00046$, fuchsia bullets), were also highlighted by the STRING analyses.

Overall, the glutamatergic synapses have been consistently altered together with the extracellular space factors/secreted factors.

3.13 Validation of several ataxia related genes dysregulated in the transcriptome data set by Q-PCR

Among all dysregulated transcripts that appeared in the transcriptomics set, several of them had been previously linked to neurodegenerative disorders. A total of 32 factors of interest were identified based on literature knowledge. Some of them together with other related factors were further investigated by Q-PCR to validate their alteration in the 12-month-old cerebellar *Atm*^{-/-} samples (Table 3.11).

Gene symbol	Gene	Fold change	P-value
<i>Als2</i>	Amyotrophic Lateral Sclerosis 2 protein	0.94	0.704 n.s.
<i>Atm</i>	Ataxia Telangiectasia Mutated	0.58	0.0008 ***
<i>Atr</i>	Ataxia Telangiectasia Related	0.91	0.176 n.s.
<i>Cacna1a</i>	Calcium voltage-gated channel subunit alpha1 A	0.99	0.836 n.s.
<i>Cadps2</i>	Calcium dependent secretion activator 2	0.83	0.016 *
<i>Car8</i>	Carbonic anhydrase 8	0.81	0.048 *
<i>Car15</i>	Carbonic anhydrase 15	0.91	0.320 n.s.
<i>Cbln1</i>	Cerebellin 1	0.77	0.169 n.s.
<i>Cbln2</i>	Cerebellin 2	48.8	0.039 *
<i>Cbln3</i>	Cerebellin 3	0.79	0.129 n.s.
<i>Cbln4</i>	Cerebellin 4	13.8	0.029 *
<i>Fat2</i>	FAT atypical cadherin 2	1.11	0.460 n.s.
<i>Fgf14</i>	Fibroblast growth factor 14	0.75	0.011 *
<i>Fos</i>	AP-1 Transcription factor subunit	0.68	0.321 n.s.
<i>Grid2</i>	Glutamate ionotropic receptor delta subunit 2	0.84	0.001 **
<i>Grik2</i>	Glutamate ionotropic receptor kainate subunit 2	0.79	<0.0001 ****

<i>Grm4</i>	Glutamate metabotropic receptor 4	0.77	0.015 *
<i>Itp1</i>	Inositol 1,4,5-Trisphosphate receptor 1	0.82	0.215 n.s.
<i>Kcna1</i>	Potassium voltage-gated channel subfamily A member 1	0.88	0.445 n.s.
<i>Mtcl1</i>	Microtubule crosslinking factor 1	0.84	0.005 **
<i>Nr4a1</i>	Nuclear receptor subfamily 4 group A member 1	0.45	0.014 *
<i>Nr4a2</i>	Nuclear receptor subfamily 4 group A member 2	0.39	0.012 *
<i>Nr4a3</i>	Nuclear receptor subfamily 4 group A member 3	0.26	0.003 **
<i>Prkcg</i>	Protein Kinase C Gamma	1.09	0.460 n.s.
<i>Pten</i>	Phosphatase and tensin homolog	0.80	0.156 n.s.
<i>Rora</i>	RAR related Orphan Receptor A	0.92	0.191 n.s.
<i>Sgk1</i>	Serum/Glucocorticoid Regulated Kinase1	0.63	0.104 n.s.
<i>Slc1a6</i>	Solute carrier family 1 member 6	0.81	0.005 **
<i>Slc17a6</i>	Solute carrier family 17 member 6	0.80	0.047 *
<i>Slc17a7</i>	Solute carrier family 17 member 7	0.82	0.007 **
<i>Stxbp5l</i>	Syntaxin binding protein 5 like	0.76	0.007 **
<i>Syne1</i>	Spectrin repeat containing nuclear envelope protein 1	0.82	0.027 *
<i>Zic4</i>	Zic family member 4	0.99	0.933 n.s.

Table 3.11. Q-PCR validation of dysregulated transcripts detected in the cerebellum by the Clariom D Array comparing *Atm*^{-/-} (n=4) versus WT (n=4).

A total of 18 factors among the 32 investigated were found to be significantly dysregulated. Only two of them were found up-regulated and the rest, 16 factors, were down-regulated. Table 3.12 summarizes the validated dysregulated genes in the *Atm*^{-/-} mouse model and which human-diseases each gene has been shown to be implicated with.

Gene	Disease in humans	Reference
<i>Cadps2</i>	Autism and ataxia	Bovio <i>et al</i> 2018; Sadakata <i>et al</i> 2007
<i>Car8</i>	Cerebellar ataxia; implicated in SCA14 and SCA29	Lamont <i>et al</i> 2015; Ando <i>et al</i> 2018; Shimobayashi <i>et al</i> 2018
<i>Cbln2/4</i>		Seigneur <i>et al</i> 2018a Seigneur <i>et al</i> 2018b
<i>Fgf14</i>	SCA 27	Van Swieten <i>et al</i> 2003; Schesny <i>et al</i> 2019
<i>Grid2</i>	SCAR18	Veerapandiyan <i>et al</i> 2017; Hills <i>et al</i> 2013

<i>Grik2</i>	SCA11	Nieding <i>et al</i> 2016; Guzmán <i>et al</i> 2017
<i>Grm4</i>		Pekhletski <i>et al</i> 1996; Abitbol <i>et al</i> 2008; Antflick <i>et al</i> 2012; Power and Empson 2014
<i>Mtcl1</i>	Early-onset ataxia	Krygier <i>et al</i> 2019
<i>Nr4a1-3</i>		Rodríguez-Calvo <i>et al</i> 2017
<i>Slc1a6</i>	SCA5/SPARCA1	Ikeda <i>et al</i> 2006; Stankewich <i>et al</i> 2010; Perkins <i>et al</i> 2016
<i>Slc17a6</i>		Leo <i>et al</i> 2009; Cheng <i>et al</i> 2017
<i>Slc17a7</i>	SCA27	Tempia <i>et al</i> 2015; Cheng <i>et al</i> 2017; Lin <i>et al</i> 2017
<i>Stxbp5l</i>	Recessive neurodegeneration	Geerts <i>et al</i> 2015; Kumar <i>et al</i> 2015
<i>Syne1</i>	SCAR8	Gros-Louis <i>et al</i> 2007; Synofzik <i>et al</i> 2016

Table 3.12. Murine genes found dysregulated in the transcriptome data set and validated by Q-PCR, diseases they are implicated with in humans, and associated references.

3.14 Three novel factors appear dysregulated as early events in the ~2-month-old cerebellar samples of *Atm*^{-/-}

Using the ~2-month-old samples, we aimed to investigate if any of these new dysregulated candidates were altered before neurodegeneration is detected in the mouse model. This would help to understand which are the early events happening and to define new potential targets to stop or slow down the pathology. Using Q-PCR we checked the transcript levels of 11 new factors (Table 3.13).

Gene symbol	Gene	Fold Change	P-value
<i>Als2</i>	Amyotrophic Lateral Sclerosis 2 protein	0.99	0.938 n.s.
<i>Cadps2</i>	Calcium dependent secretion activator 2	0.97	0.683 n.s.
<i>Car15</i>	Carbonic anhydrase 15	0.77	0.002 **
<i>Fgf14</i>	Fibroblast growth factor 14	1.02	0.738 n.s.
<i>Grik2</i>	Glutamate ionotropic receptor kainate subunit 2	1.04	0.529 n.s.
<i>Grm4</i>	Glutamate metabotropic receptor 4	0.89	0.072 n.s.
<i>Mtcl1</i>	Microtubule crosslinking factor 1	0.88	0.008 **
<i>Slc17a7</i>	Solute carrier family 17 member 7	1.48	0.013 *
<i>Slc1a6</i>	Solute carrier family 1 member 6	0.82	0.015 *

<i>Stxbp5l</i>	Syntaxin binding protein 5 like	1.05	0.409 n.s.
<i>Syne1</i>	Spectrin repeat containing nuclear envelope protein 1	0.97	0.423 n.s.

Table 3.13. Transcript levels of several factors in the cerebellum of *Atm*^{-/-} (n=8) versus WT (n=8) from 1.5 to 3-month-old mice. Highlighted in gray are three factors that could be early events and were also dysregulated in the 12-month-old samples.

Four dysregulated factors were significantly dysregulated among the 11 we checked but only three were dysregulated in the 12-month-old samples. *Mtcl1* (microtubule crosslinking factor 1; FC 0.88 p-value 0.008) is a microtubule associated factor essential for axonal polarity in PN and its knockdown causes ataxia in mice (Satake et al 2017). Moreover, MTCL1 has been recently proposed as a genetic cause for autosomal recessive ataxia after a NGS (next-generation sequencing) analysis of a Polish ataxia cohort (Krygier et al 2019). Another commonly down-regulated gene was *Slc1a6*, which encodes the protein EAAT4 (excitatory amino acid transporter 4). The EAATs are an ion-gradient-dependent glutamate transporter family composed of 5 members or subtypes (EAAT1-5) (Machtens et al 2015). Each member of the family has a specific location in the nervous system; for example EAAT1 and EAAT2 are found in glia (Lehre et al 1995). EAAT4 is expressed in neurons and has been shown that its loss affects the spontaneous firing pattern and survival of PN (Perkins et al 2018). The last dysregulated factor was *Slc17a7*, which codes for VGLUT1 (vesicular glutamate transporter 1). Unlike EAATs, VGLUTs fill up the synaptic vesicles with glutamate so it can be released into the synapse when necessary and they do not depend on ion-gradients. VGLUT1 and VGLUT2 are widely expressed in the nervous system with almost no overlap (Liguz-Leczna & Skangiel-Kramska 2007). In the cerebellum VGLUT1 is expressed in the parallel fibers while VGLUT2 is present in climbing fibers and PN dendrites (Fremeau et al 2001, Hisano et al 2002). Most interestingly, it has been shown that ATM and ATR associate with excitatory (VGLUT1 positive) and inhibitory (VGAT positive) vesicles respectively (Cheng et al 2018, Li et al 2009). Thus, *Slc17a7* could be an interesting biomarker and potential target for future therapies.

3.15 VGLUT1 as a potential marker for A-T, shows no protein level changes in the cerebellum of 1.5-3-months old *Atm*^{-/-} mouse model

After validating the down-regulation of *Slc17a7* by Q-PCR analysis, we aimed to determine if the protein level of this factor coding for VGLUT1 was also altered in the cerebellum of young *Atm*^{-/-} mice compared to their sex and age-matched WT.

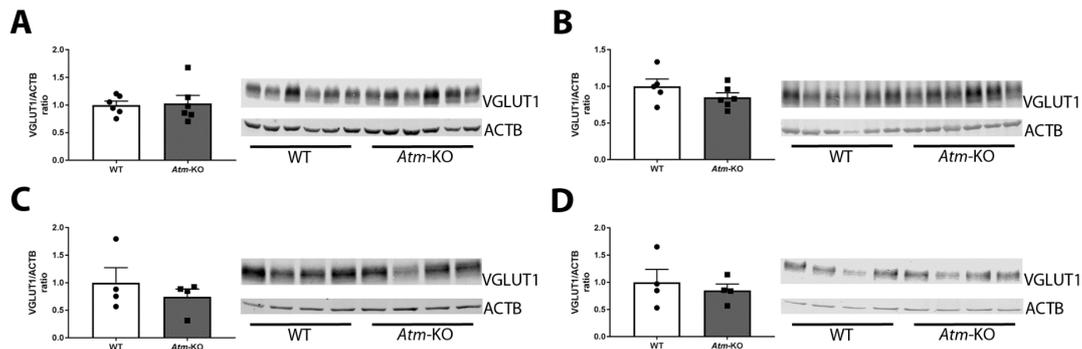


Figure 3.56. Western blot results for VGLUT1 protein levels. (A) RIPA and (B) SDS fraction of 2-month-old cerebellar samples from *Atm*^{-/-} (n=6) and WT (n=6) mice. (C) RIPA and (D) SDS fraction of 3 to 4-month-old cerebellar samples from *Atm*^{-/-} (n=4) and WT (n=4) mice.

Two different age groups' samples were used (~2-months-old and ~4-months-old) to determine if there were differences between the cerebellar samples of *Atm*^{-/-} and WT mice. In both groups there were not significant differences between the mutants and WT, neither with RIPA nor SDS fraction, although the transcript level was found down-regulated. This could be due to the sensitivity of the method or a later effect on the protein level compared to the transcript level.

3.16 No altered localization of VGLUT1 could be detected upon immunohistochemistry using 6-month-old cerebellar samples from *Atm*^{-/-} compared to its WT

Although the protein level was not affected, we checked the distribution of the VGLUT1 in sagittal free-floating sections of *Atm*^{-/-} cerebella compared to its WT. We hypothesized that due to the absence of ATM, VGLUT1 might show a different localization pattern in the mutant compared to the WT.

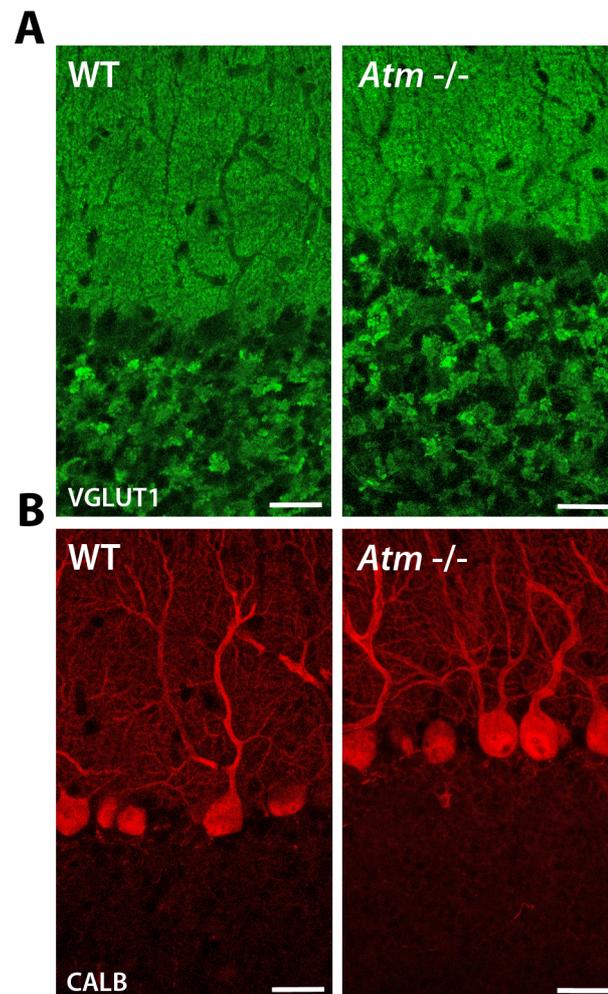


Figure 3.57. Staining for VGLUT1 and CALB in the cerebellum of 6-month-old WT and *Atm*^{-/-} mice (n=1 for each genotype) shows no difference. Scale bar 25 um.

In the cerebellum, VGLUT1 is expressed by parallel fibers rising from the GN that innervate the distal part of the PN dendritic tree. Due to the cut in sagittal orientation, the parallel fibers can't be properly appreciated although the GN layer is visible together with the PN dendritic arborization. No obvious differences were detected between the mutant (**Figure 3.57**, panels on the right) and WT (**Figure 3.57**, panels on the left).

3.17 Future perspectives: applications for Organotypic cell culture in A-T research

A limiting aspect of the *Atm*^{-/-} mouse model is that they die at the age of 6 months due to lymphomas before showing no gross ataxic symptoms or loss of PN (Barlow et al 1999, Barlow et al 1996, Barlow et al 2000) although deficient calcium spike bursts and calcium currents have been detected (Chiesa et al

2000). This is not entirely unexpected since neurodegenerative disorders are mainly characterized by their progression over time. Thus, the ataxic phenotype and loss of PN appears once the lifespan of this mouse model is extended by bone marrow transplantation (BMT) (Pietzner et al 2013). The BMT intervention opens a new possibility to study the degeneration of the cerebellum but is an expensive intervention and time is still a limiting factor since the animals have to be aged. Therefore, it would be interesting to establish another method that would allow identifying potential candidates and accelerating the research with the lifespan-extended *Atm*^{-/-} animals.

Organotypic cell cultures (OTC) were established in 1947 (Hogue 1947) and quickly became an important technique in the field of neuroscience. OTC allows the culture of different neuronal and cellular types while conserving the neuronal network. These advantages over dissociated neuronal cell cultures are of high importance for the cerebellum since PN are difficult to culture. OTCs also offer the possibility to test drugs or challenge the system using fewer animals than *in vivo* experiments. Therefore, we aimed to establish this culture from *Atm*^{-/-} mice to accelerate the research in the A-T field.

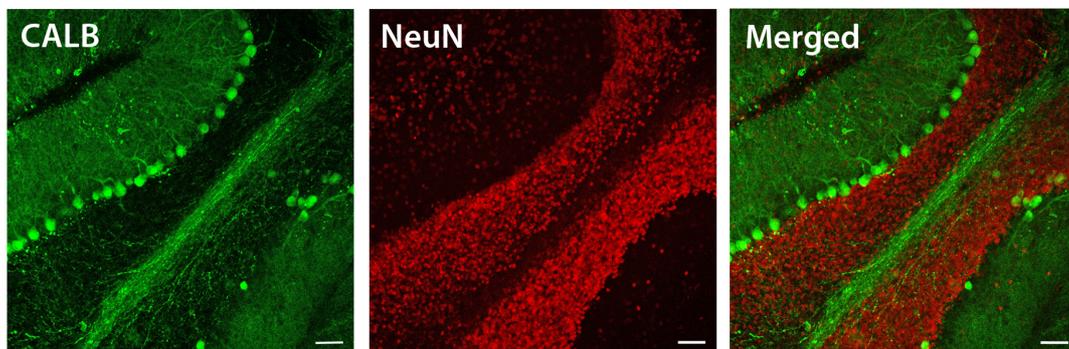


Figure 3.58. Organotypic cerebellar cultures from P17 WT mouse after one week *in vitro* shows PN axonal track and good neuronal viability. In the green channel, CALB1 was detected as PN marker. Labeled in red, NeuN, as a neuronal marker except PN. Scale bar represents 50 μ m.

The cerebellum reaches maturity around post-natal day 15 (P15), thus the first attempt of cultured cerebellar slices was done with P15 pups. Unfortunately, the results were not as good as expected since few PN showed proper localization and/or dendritic arborization (data not shown), therefore we decided to use older animals. The best results obtained were with P17 pups (Figure 3.58). The slices were cultured for a week, as specified in the materials and methods

section, to ensure their attachment to the membrane and recovery from the slicing process, which causes a strong gliosis. One important observation to determine the viability of the slice is if it starts to flatten and slightly spread on the membrane. In the left panel of the Figure 3.58, corresponding to the CALB staining, the axonal track, PN bodies and dendritic tree can be appreciated as crucial structures in the cerebellar architecture. The NeuN staining (Figure 3.58, middle panel) shows the viability of GN and the other neuronal types present in the different layers of cerebellum. The right panel of Figure 3.58 is the merged previous images showing the typical cerebellar architecture.

Overall, OCT is a promising technique that can be used to treat cerebellar slices with different drugs or recombinant RELN to evaluate the viability of PN in the *Atm*^{-/-} mice (Hellwig et al 2011) or other mouse models without depending on a prolonged period of ageing or using an excessive amount of animals to screen potential therapeutic approaches.

4 DISCUSSION

Ataxias are neurodegenerative disorders affecting mainly the cerebellum and its connections. There is currently no cure for ataxias, but specific mutations in several genes have been identified as underlying causes. Deciphering the pathomechanisms underlying these disorders can lead to a better understanding of neurodegeneration *per se* and enable the development of therapies to cure or delay the symptoms.

Part 1 – The role of Ataxin 2 in SCA2 and ALS

Spinocerebellar ataxia type 2 (SCA2) is an autosomal dominant neurodegenerative disorder caused by CAG expansions in the *ATXN2* gene. The most prominently affected neuron populations are the Purkinje neurons in the cerebellum and motor neurons in the spinal cord. CAG expansions larger than 33 repeats lead to SCA2 while intermediate expansions contribute to the risk to suffer from Parkinson's Disease (PD) and Amyotrophic Lateral Sclerosis (ALS).

4.1 Characterization of *Atxn2*-CAG100-KIN mouse model

Humans and mice share many common genetic features. Therefore, mouse models are extremely useful tools to gain deeper insight into human genetic disorders and to speed up the process towards developing new drugs and therapies.

A mouse model harboring a 42 CAG expansion in the mouse locus of *Atxn2* was previously generated (Damrath et al 2012). Unfortunately the first symptoms appeared at the late age of 18 months limiting the usefulness of the model. Since longer CAG repeats have been associated with earlier and stronger disease phenotype in SCA2 patients (Almaguer-Mederos et al 2013), a novel mouse model was generated introducing an expansion of 100 CAGs in the first exon of

Atxn2; the *Atxn2*-CAG100-KIN mouse model. Thus, the first part of this thesis was focused on the characterization of this new mouse model to define whether its phenotype mimics the pathology of SCA2 and if it permits us to elucidate the molecular and cellular underpinning.

4.1.1 *Atxn2*-CAG100-KIN shows loss of weight over time, genetic instability, and increased rate of death

One of our initial observations regarding the phenotype of this mouse model was the significant loss of weight over time. When the weight was recorded during the life span of these animals, an initial significant gain of weight in homozygous *Atxn2*-CAG100-KIN females was noticed. This pre-symptomatic stage was followed by a progressive loss of weight accompanied with locomotor problems and tremors in both genders (Sen et al 2019). Based on the prominent accumulation of lipids and obesity seen in the *Atxn2*-KO mouse model (Lastres-Becker et al 2008a), we suspect that the initial gain of weight corresponds to a loss-of-function of ATXN2 which is followed by deleterious gain-of-function. Moreover, other SCA2 mouse models also show reduced weight over time (Damrath et al 2012, Dansithong et al 2015) and longitudinal studies in SCA2 families also reported an initial gain of weight followed by a progressive loss (Abdel-Aleem & Zaki 2008). Differences in the brain size and weight were also detected in the homozygous pointing to a loss of lipid content and myelin in the CNS. Myelination defects have been shown in SCA2 patients with massive expansions (Paciorkowski et al 2011). In addition, instability of the expansion and somatic mosaicism were detected in the *Atxn2*-CAG100-KIN colony. Over generations, the repeat expansions can increase in SCA2 patients and mosaicism has been detected in somatic cells (Cancel et al 1997). Interestingly, the instability of the expansion leads to larger sizes, which correlates with the higher instability of pure CAG-repeat regions at the DNA level observed in patients, thereby leading to larger expansion in the following generations. Since larger repeat expansions lead to an earlier and stronger progression of the pathology with earlier death (Almaguer-Mederos et al 2013) in SCA2 patients, the lifetime of the *Atxn2*-CAG100-KIN mice (homozygous and heterozygous compared to WT

littermates) was followed over time. Decreased life span with higher number of sudden deaths was detected for the homozygous *Atxn2*-CAG100-KIN animals.

4.1.2 Behavioural tests demonstrate progressive motor deficits compatible with spinocerebellar ataxia

A rotarod was used to test the motor coordination of *Atxn2*-CAG100-KIN compared to sex- and age-matched WT. As expected, they showed significantly reduced performance starting at the age of 5 months when compared to WT. Over time, the deficit observed for the mutants worsened, correlating with the progression of the pathology (Figure 3.1). The open field test detected a significant decrease of vertical movements from the age of 8 months, which also worsened over time. However, the total distance and horizontal movements were significantly higher in the *Atxn2*-CAG100-KIN at 3 months (Figure 3.2). This initial hyperactivity correlates with the initial loss-of-function hypothesis, similar to the initial gain of weight observed in the homozygous mutant females. Motor hyperactivity was also reported for the *Atxn2*-KO animals (Lastres-Becker et al 2008a). The reduced vertical movements in the *Atxn2*-CAG100-KIN mice are due to balance problems, mirroring the ataxic gait in SCA2 patients. These data and further behavioural experiments, such as grip strength (Figure 3.3) and paw print (Figure 3.4), point to an early vulnerability of the cerebellar circuits and motor neurons.

4.1.3 Progressive brain atrophy and neuronal aggregates are detected upon immunohistochemical analysis

The previously mentioned loss of brain weight and size shrinkage in the *Atxn2*-CAG100-KIN animals compared to WT could reflect neuronal loss together with myelin and lipid loss. Although in SCA2 patients the cerebellum is the prominently affected area with an early and massive loss of PN, also degeneration in other brain regions has been detected. This affection in different brain areas varies between patients but it generally includes the pons, inferior olive, substantia nigra, cerebral cortex, and the anterior horn of the spinal cord (Auburger 2012, Estrada et al 1999, Rub et al 2013, Rub et al 2007). Therefore,

the general reduction of brain size in the mouse mutant correlates with the neuronal atrophy observed in SCA2 patients.

Another important hallmark of poly(Q) diseases is the neuronal accumulation of nuclear/cytoplasmic aggregates. While several spinocerebellar ataxias and HD show nuclear inclusions, SCA2 patients primarily present cytoplasmic aggregates (Rub et al 2013). Immunohistochemistry experiments at the terminal stage of the pathology of the *Atnx2*-CAG100-KIN showed positive ATXN2 aggregates in the typical SCA2-affected regions such as inferior olive, pons, cerebellum, cerebral cortex and hippocampus (Sen et al 2019). Aggregates were also detected in hippocampal neurons and in the spinal cord.

We next aimed to characterize the progression of the aggregation pathology in the cerebellum of this mouse model by comparing with sex- and age-matched WT. Immunohistochemical analyses were performed in *Atnx2*-CAG100-KIN cerebellar slices at different stages (Figure 3.5): at the presymptomatic stage of 3 months, symptomatic stage of 6 months, and final stage of 14 months. The time course aggregation of the expanded ATXN2 was compared with its known interactor PABP1, which was sequestered into insolubility in the *Atnx2*-CAG42-KIN mouse model (Damrath et al 2012, Mangus et al 1998). While ATXN2 signal in WT cerebellar sections showed a homogeneous distribution in the cytoplasm, in the mutant tissue the ATXN2 positive aggregates were detected as early as 3 months of age (Figure 3.5, first row). Interestingly, PABP1 was still showing a homogenous cytoplasmic signal at this age in almost all neurons, but as the aggregates became more obvious at the age of 6 months, the PABP1 signal started to colocalize in the ATXN2 aggregates (Figure 3.5, second row). This progression correlates with the first behavioural alterations observed in the mouse model, which worsened over time (Figure 3.1, Figure 3.2, Figure 3.3).

At the terminal stage of the disease for the *Atnx2*-CAG100-KIN mouse model, 14 months, the number of aggregates was reduced but the size notably increased. Moreover, these larger aggregates seem to localize towards the axon hillock of the PN and might be blocking the axonal transport, therefore impairing the output from the PN to the deep cerebella nuclei (Figure 3.5, bottom row). This

progressive accumulation of ATXN2 aggregates in the *Atxn2*-CAG100-KIN PN seems to correlate with the altered axonal organization observed in CALB1 immunostainings of cerebellar sections. These data suggest PN disconnection around the old age of 14 months in the mutants while there is no obvious loss of PN soma number (Figure 3.6). The PN disconnection could be caused directly by the toxic effect of the expanded ATXN2 in cell-autonomous manner, or by the combination with altered climbing fiber input to the PN. Climbing fiber alterations have been implicated in several spinocerebellar ataxias, including another SCA2 mouse model, and could lead to loss of motor control (Egorova et al 2018, Matilla-Duenas et al 2014, Smeets & Verbeek 2016).

Further immunohistochemical characterization with antibodies against the high molecular weight subunit of neurofilaments showed disorganization of these neuronal intermediate filaments towards the proximal molecular layer (Figure 3.7). Climbing fibers make synaptic contacts in this area and the disorganization of neurofilaments could reflect the altered input to the PN. In addition, significantly altered transcript levels of the gene *Sema7a* were identified starting at 3 months of age and were constantly down-regulated in 14-month-old cerebellar samples (Figure 3.8). *Sema7a* has been implicated in the retrograde signaling to target weak glutamate synapses, an important process to select the “winning” climbing fiber, which would innervate the proximal dendritic area of one PN (Uesaka & Kano 2018). Interestingly, a significant down-regulation of *Sema7a* was also detected in cerebellar samples of *Atxn2*-KO animals suggesting an ATXN2 loss-of-function being responsible for the alteration of this transcript levels even though no neurological symptoms have been reported for the *Atxn2*-KO mouse model (Lastres-Becker et al 2008a).

Overall this mouse model reproduces the characteristic olivo-ponto-cerebellar atrophy observed in SCA2 patients (Auburger 2012, Estrada et al 1999, Rub et al 2013). No electrophysiological analyses have been reported so far, but similar to other spinocerebellar ataxias and mouse models, climbing fiber pathology seems plausible based on the data discussed.

4.2 Proteome data shows a high number of dysregulated RNA binding proteins pointing to RNA metabolism alterations

Neurons, as post-mitotic cells with a complex architecture, need to tightly control all aspects of RNA metabolism, therefore RBP and other implicated factors are essential for proper neuronal function and survival (Bryant & Yazdani 2016, Hutten & Dormann 2016, Lenzken et al 2014, Sephton & Yu 2015). Ataxin 2 is an RNA binding protein that preferentially binds to the 3' UTR of transcripts to stabilize them (Yokoshi et al 2014). ATXN2 was found to up-regulate proteins involved in RNA splicing, polyadenylation, and 3' end processing, among others (Yokoshi et al 2014). A high number of dysregulated nucleic-acid-binding proteins were detected in the proteome data sets generated from 14-month-old *Atxn2*-CAG100-KIN cerebellum and spinal cord pointing to RNA metabolism dysregulations. However in contrast to the proteome profiles, validation efforts at the transcript level of 44 factors implicated in RNA metabolism (Table 3.2, Table 3.3, Table 3.4, Table 3.5) and DNA damage response (Table 3.6) in cerebella of 14-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO showed few significant dysregulations. Interestingly, the heterogeneous nuclear ribonucleoprotein A2/B1 (hnRNPa2/B1) was significantly up-regulated in the cerebellar samples from the *Atxn2*-CAG100-KIN animals (Table 3.3). Since no alterations were detected in the cerebellar samples of *Atxn2*-KO, this effect could be caused by the toxic gain-of-function of the expanded ATXN2. The factor hnRNPA2/B1 has been implicated in ALS and familial-inherited degeneration affecting muscle, brain, motor neuron, and bone (Kim et al 2013). ATXN2 has been already shown to interact with at least three more ALS-linked factors that serve as RNA-binding-proteins: FUS, C9ORF72 and TDP43 (Vucic et al 2014). Therefore, the up-regulation seen for *Hrn2ab1* could further implicate ATXN2 in the pathology of ALS. A commonly dysregulated factor significantly reduced to 60% in both *Atxn2*-KO and *Atxn2*-CAG100-KIN was *Eif5a2* (Table 3.5). This eukaryotic translation initiation factor has been implicated in the elongation step of protein synthesis (Saini et al 2009). ATXN2 has been found to associate with the translation apparatus (Tadauchi et al 2004) based on yeast experiments, but it is not essential for translation and its modulatory functions have not been elucidated. It is also interesting to note that Eif5a protein influences the

translation of viral RNA (Caceres et al 2016) and that ATXN2 has been implicated in the cell response to poliovirus (Jagdeo et al 2018). It would be highly interesting to further investigate the potential ATXN2 loss-of-function effect on this translation initiation and elongation factor during viral infections.

Four other dysregulated factors in cerebellum and spinal cord proteome data sets were investigated further. The first, AHNAK, acts as a structural scaffold having multiple protein interaction domains across its sequence (Komuro et al 2004). The interest for this factor arose from its implication in spinal cord injury (Von Boxberg et al 2006) and the localization of its mRNA in SG under stress conditions (Khong et al 2017). Moreover, AHNAK has been implicated in other cellular processes such as regulation of calcium channels (Haase et al 2005, Jin et al 2019, Komuro et al 2004, Matza et al 2009). Calcium signaling is essential in neuronal function (Kitamura & Kano 2013) and mutations in several calcium factors are causative of SCA, such as CACNA1A (SCA6) and ITPR1 (SCA15/29) (Huang et al 2012, van de Leemput et al 2007, Zhuchenko et al 1997).

The second factor was AHNAK2, the other member of the AHNAK family. The exact function of this protein is unknown but it recently it has been implicated in Charcot-Marie-Tooth disease (Tey et al 2019). The characterization at transcript level by Q-PCR showed up-regulation of *Ahnak* and down-regulation of *Ahnak2* in the 14-month-old *Atxn2*-CAG100-KIN spinal cord (Figure 3.9, Figure 3.10). Moreover, AHNAK was found to co-aggregate with ATXN2 in the spinal cord of these animals upon immunohistochemical analysis (Figure 3.11). Based on these results, it seems that pathological expansions in ATXN2 alter both AHNAK family members transcript and protein levels, and sequesters AHNAK into aggregates in the spinal cord. These events could alter the physiological functions of AHNAK and AHNAK2. Unfortunately, all other efforts to characterize the relationship between the AHNAK family and ATXN2 did not lead to any further conclusions (Figure 3.12, Figure 3.13).

The other two factors investigated were the Poly(C) binding proteins 1 and 2, PCBP1 and PCBP2. They are part of the heterogeneous nuclear ribonucleoprotein (hnRNP) family with RNA and DNA metabolism functions.

They are individually necessary for embryonic development (Ghanem et al 2016) and have been shown to have distinct roles affecting translation and gene expression in different types of viruses (Blyn et al 1997, Woolaway et al 2007). Stress granule formation has been implicated in viral infection as an important component of the host cell antiviral defense (Zhang et al 2019). Moreover, SG composition seems to vary according to the inducing stimulus, and different virus families have been reported to interact with different RBP (Zhang et al 2019). ATXN2 has been identified as a host cell substrate of poliovirus together with other RBP, pointing to a viral infection response role potentially through the formation of SG. The effect of ATXN2 regarding PCBP1 and PCBP2 seems to be exclusively at protein level since no dysregulations were detected at the transcript level of these two factors (Figure 3.14, Figure 3.16). Upon immunohistochemical analysis, PCBP1 seems to co-aggregate with ATXN2 in PN of 14-month-old *Atxn2*-CAG100-KIN cerebellar slices, while PCBP2 accumulates at the dendrites of this cell type (Figure 3.15). Further experiments employing mouse embryonic fibroblasts (MEF) established from *Atxn2*-CAG100-KIN animals and their WT littermates failed to show any altered localization of PCBP2 upon Poly(IC) treatment. This could be explained based on several reports showing that different viruses affect different SG components, and that host cell response might differ depending on origin.

Overall, comparing the results obtained via proteome analysis and transcript analysis by Q-PCR, ATXN2 seems to affect a higher number of RBP at their protein level rather than at the transcript level. Only a few dysregulations were detected upon Q-PCR analysis.

4.3 TDP43 pathology in the spinal cord of *Atxn2*-CAG100-KIN mouse model overlaps with ALS

The spinal cord controls the voluntary muscles of the trunk and extremities, while also receiving sensory input from these areas of the body. The spinal cord primarily transmits the nerve signals from the motor cortex to the body, and from the afferent fibers of the sensory neurons to the sensory cortex (Bican et al 2013). Recently, evidence of corticospinal tract dysfunction in pre-ataxic SCA2

patients has been published (Velazquez-Perez et al 2018) and motor neuron degeneration has been detected in SCA2 mutation carriers before the onset of cerebellar ataxia (Velazquez-Perez et al 2014, Velazquez-Perez et al 2011, Velazquez-Perez et al 2017). In addition, intermediate expansions of the poly(Q) domain in ATXN2 have been implicated in ALS, a neurodegenerative disorder also showing degeneration of corticospinal motor neurons (Elden et al 2010, Gispert et al 2012, Ross et al 2011, Taylor et al 2016). Further experiments with the TDP43 overexpressing mouse model strengthened the role of ATXN2 in ALS pathology after showing significantly longer lifespan when crossed with the mouse mutant *Atxn2*-KO (Becker et al 2017). Therefore, the *Atxn2*-CAG100-KIN mice, with conserved spatial and temporal expression of ATXN2, is an ideal model to study the spinal cord pathology observed in SCA2 patients, and gain deeper insight into the relationship between TDP43 and the expanded ATXN2.

Based on the accumulating evidence of ATXN2 and TDP43 interaction, questions regarding the similarities of ALS and SCA2 spinal cord pathology arose. To investigate these similarities, the transcript and protein levels of TDP43 in the spinal cord of the *Atxn2*-CAG100-KIN at 3 and 14 months were determined. To differentiate between a toxic gain-of-function or loss-of-function caused by the expansion in ATXN2, samples from the mouse mutant *Atxn2*-KO were also used. A significant up-regulation of TDP43 protein level was detected in the spinal cord at the age of 14 months, however no differences at the transcript level were detected, neither in the 3-month-old *Atxn2*-CAG100-KIN and 6-month-old *Atxn2*-KO samples (Figure 3.18, A and Figure 3.19,B). In addition, the transcript levels of *Atxn2* were determined in the spinal cord and no significant differences were detected in the *Atxn2*-CAG100-KIN mouse model. The depletion of *Atxn2* mRNA in the spinal cord of *Atxn2*-KO mice mutants was confirmed (Figure 3.19, A).

Alterations in the transcription and translation of *Atxn2* have been shown in the cerebellum of this mouse model (Sen et al 2019), the fact that no dysregulations were detected at the transcript level in the spinal cord may be due to tissue differences, however the protein level of ATXN2 was not determined in the spinal cord samples. Moreover, the protein levels of NeuN (as a neuronal

marker) were also investigated in the same sample sets, showing a significant reduction in the 14-month-old *Atxn2*-CAG100-KIN (Figure 3.18, B). This result points to a reduction in number of neurons in the spinal cord at the terminal stage of *Atxn2*-CAG100-KIN pathology. Previous differences in the level of CALB1 (as PN marker in the cerebellum) were identified in WB showing reduced levels of this marker, however the soma of PN was still visible in cerebellar immunohistochemistry experiments (Sen et al 2019).

To further characterize the differences between the cerebellum and the spinal cord, NeuN and TDP43 protein levels were investigated in the cerebellum of 3- and 14-month-old *Atxn2*-CAG100-KIN animals and *Atxn2*-KO mice (Figure 3.18, C and D). No differences were detected for either of these two proteins, meaning that no further neuronal loss aside from the PN could be detected, and that TDP43 protein levels were not altered in the cerebellum.

Characterization at the histological level of the spinal cord in this mouse model was performed using cryo-sections from 3-, 6-, and 14-month-old animals compared to WT and *Atxn2*-KO mutants. The aggregation pattern over time was similar to that in the cerebellum. ATXN2 positive aggregates were detected at 3 months and increased in size over time, sequestering PABP1 and TDP43 (Figure 3.20). Another SG marker, TIA1, was used to further confirm the presence of SG-related proteins into the ATXN2 positive aggregates (Figure 3.21). A hallmark of ALS is the presence of cytoplasmic TDP43-positive inclusions found in neurons and glia (Neumann et al 2006). Therefore, this mouse model reproduces, at least in part, the pathology observed in ALS.

TDP43 can be cleaved at its C-terminal domain by CASP3 (Dormann et al 2009, Nishimoto et al 2010, Zhang et al 2007), accumulating in neurons and glia (Igaz et al 2008, Neumann et al 2006). Reports implicating ATXN2 intermediate expansions in ALS, influencing TDP43 aggregation via enhanced CASP3 activation and production of pathological C-terminal fragments from TDP43, have been published (Elden et al 2010, Hart & Gitler 2012). In addition, cleaved fragments of Ataxin3 and Ataxin7 exacerbating the pathology have been detected

in mouse and *Drosophila* models (Jung et al 2009, Young et al 2007). CASP3 protein levels were found significantly up-regulated in the spinal cord of 14-month-old *Atxn2*-CAG100-KIN animals (Figure 3.22, B). No dysregulation was found at the transcript level in any condition tested, nor were the protein levels in the 3-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO spinal cord samples (Figure 3.22). In addition, CASP3 levels were investigated at 14 months in the cerebellum of *Atxn2*-CAG100-KIN and no alterations were detected. Thus, the pathology of TDP43 and accumulation of CASP3 seems to be spinal cord specific.

Overall, the alteration of TDP43 protein levels and the reduced amount of NeuN were specific events in the spinal cord while the cerebellum showed reduced levels of CALB1 and down-regulation of the expanded *Atxn2* transcript. The immunohistochemistry analyses revealed a similar time pattern of ATXN2 aggregation in the spinal cord as previously defined in the cerebellum of *Atxn2*-CAG100-KIN at 3, 6, and 14 months of the pathology. Moreover, increased CASP3 levels were only detected in the old spinal cord samples of *Atxn2*-CAG100-KIN, which could be linked to the TDP43 aggregation observed.

4.4 Transcriptomics of the spinal cord reveals RNA toxicity and microglia activation

The spinal cord pathology observed in the *Atxn2*-CAG100-KIN mice showed the implication of ATXN2 and other ALS-related RBP that co-localized into aggregates. Thus, to gain deeper insight in the RNA metabolism pathology pointed by the proteome data, we generated transcriptome data sets from 3- and 14-month-old spinal cord *Atxn2*-CAG100-KIN samples (Figure 3.24, A). The Clariom™ D mouse array from ThermoFisher was used to generate both transcriptomics data sets and the data were analyzed with TAC (Transcriptome Analysis Console) software. Standard parameters and self-determined criteria were used to determine the significant up- and down-regulations (Figure 3.24, B). At both ages, a high number of non-coding RNAs were found significantly up-regulated (Figure 3.25) that could reflect dysregulation of RNA-based regulatory mechanisms (Wei et al 2018). Due to a lack of tools to study these types of regulatory mechanisms, we did not further pursue this hypothesis.

Several ataxia- and ALS-related genes were found dysregulated in the 14-month-old transcriptome data set. In addition, a high number of genes linked to RNA toxicity response, such as several toll-like receptors, and TNF (tumor necrosis factor) receptors, were also found to be up-regulated (Figure 3.26). Further analysis of the significant two-fold up-regulations with the STRING platform showed a high number of lysosomal factors, described by KEGG pathway, and factors implicated in “immune system”, defined by GO biological process (Figure 3.28). Importantly, all of these factors are highly expressed in microglia (Zhang et al 2014).

Microglia are cells of myeloid lineage that populate the CNS during early development. These cells make up between 5 and 20% of the CNS cells depending on the brain structure, and constitute the main resident immune cell population (Grabert et al 2016, Lawson et al 1990, Stowell et al 2018). Microglia are actively involved in the refinement of neuronal connections during development (Verney et al 2010), eliminating redundant synapses through the chemokine signaling system (Paolicelli et al 2011), also referred to as synaptic pruning. Deficient neuron-microglia signaling during development leads to the impairment of functional brain connectivity and alters social behaviour (Kim et al 2017, Zhan et al 2014). More recently, a report identifying a stepwise developmental program of microglia in synchrony with the developing brain has been published (Matcovitch-Natan et al 2016), further associating microglia with neurodevelopmental disorders. Additionally, microglia have been implicated in the maintenance of the brain homeostasis during adulthood and ageing (Tremblay et al 2011). Surveying microglia, in their basal and ramified status, can phagocyte neuronal material without becoming activated (Sierra et al 2010). On the contrary, reactive microglia have been implicated in increasing severity of several neurodegenerative disorders (Block et al 2007). Recent evidence suggests that microglial reaction to CNS pathology is not uniform, and depends on the timing and diversity of microglial subtypes involved (Spiller et al 2018).

The transcriptome data set generated from the 14-month-old *Atxn2*-CAG100-KIN spinal cord samples showed significant up-regulations of factors implicated in

microglia activation, such as TREM2 and DAP12, and factors linked to synaptic pruning reactivation, like the complement system. Part of these factors was further validated via Q-PCR confirming the up-regulation observed in the microarray (**Figure 3.31**). Reactive gliosis and neuroinflammation are hallmarks of neurodegenerative diseases, such as AD, PD, ALS, and FTD (Salter & Stevens 2017). Reports based on transcriptomic studies have identified microglia-related pathways as central to AD risk and pathogenesis (Lambert et al 2013, Zhang et al 2013a). Additionally, genome wide association studies (GWAS) have identified more than 20 loci linked to AD that are expressed or exclusively expressed in microglia or myeloid cells (Efthymiou & Goate 2017, Villegas-Llerena et al 2016). Moreover, microglia accumulate in active sites of demyelination and neurodegeneration in multiple sclerosis (MS), and once activated they can damage other CNS cells, in particular oligodendrocytes and neurons (Zrzavy et al 2017).

Moreover, two neuroinflammation-linked factors that have been implicated in ALS, *Ripk1* and *Grn*, were also found up-regulated (Figure 3.29, Figure 3.30). RIPK1, a kinase controlling programmed cell death via apoptosis and necroptosis (Meng et al 2018), was up-regulated at the transcript and protein level in the 14-month-old *Atxn2*-CAG100-KIN spinal cord samples (Figure 3.29). No further dysregulations were detected at the transcript level in the 3-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO spinal cord samples, nor in cerebellar samples of any group. This kinase plays a central role in mediating neuroinflammation by promoting activation of microglia in ALS, AD, and MS (Caccamo et al 2017, Ito et al 2016). Indeed, RIPK1 has been implicated in regulating disease-associated microglia factors leading to impairment in the lysosomal pathway in an AD mouse model (Ofengeim et al 2017). RIPK1 can be suppressed by inhibitory phosphorylation mediated by TAK1 (Transforming growth factor-beta-activated kinase 1) whose expression is modulated by TBK1 (TANK-binding kinase 1) (Xu et al 2018). Both kinases, TAK1 and TBK1, are highly expressed by microglia (Xu et al 2018, Zhang et al 2014), and mutant *TBK1* alleles have been implicated in ALS and FTD (Freischmidt et al 2017). Haploinsufficiency of *Tbk1* in mice together with heterozygosity of myeloid TAK1 expression caused microgliosis

with activated amoeboid-like microglia and expression of 40 genes involved in innate immunity (Xu et al 2018). Therefore, the lack of RPIK1 suppression leads to neuroinflammation and microgliosis.

Progranulin is an evolutionary conserved glycoprotein that can be cleaved into individual granulins. PGRN is a key regulator of inflammation, and its deficiency causes an aberrant increase in phagocytosis and pro-inflammatory cytokine production in microglia and macrophages (Kao et al 2011, Martens et al 2012, Yin et al 2010). Rare homozygous *GRN* mutations in humans cause neuronal ceroid lipofuscinosis (NCL) sharing similar neuropathological characteristics with FTLN patients with *GRN* mutations (Smith et al 2012). In addition, a study comparing FTLN patients with *GRN* mutations (FTLN-GRN) and FTLN cases with C9ORF72 mutations (FTLN-C9ORF72) showed different microglia responses (Sakae et al 2019). FTLN-GRN patients showed more IBA1-positive amoeboid microglia and also had more microglia with nuclear condensation, possibly indicating apoptosis (Sakae et al 2019). PGRN has also been shown to mediate caspase-dependent cleavage of TDP43 (Zhang et al 2007) and has recently been implicated in the lysosomal homeostasis and lipid metabolism (Evers et al 2017). Moreover, progranulin deficiency has been shown to promote synaptic pruning by microglia via excessive complement production and to cause lysosomal defects (Lui et al 2016). As previously mentioned, STRING analysis of up-regulated factors in the 14-month-old spinal cord transcriptome data set pointed to an increase of lysosomal and immune related factors (Figure 3.28, **Figure 3.31**, Figure 3.32). Despite the up-regulation of *Grn* transcript levels detected at 3- and 14-month-old *Atxn2*-CAG100-KIN spinal cord samples, PGRN protein levels were not found dysregulated based on WB experiments (Figure 3.30). Additionally, PGRN seems to be under the control of the transcription factor EB (TFEB), which plays an important role in the regulation of lysosomal biogenesis and autophagy (Belcastro et al 2011, Sardiello et al 2009), and has been shown to up-regulate lysosomal biogenesis in microglia (Bao et al 2016). The subcellular localization and activity of TFEB is regulated by mTOR-mediated phosphorylation. Phosphorylated TFEB is retained in the cytoplasm while dephosphorylated TFEB can translocate to the nucleus and induce the transcription of target genes

(Napolitano & Ballabio 2016). Although the transcript level of TFEB was not dysregulated in the spinal cord of *Atxn2*-CAG100-KIN mice (Figure 3.32), posttranscriptional changes cannot be ruled out based on the inhibitory effect of ATXN2 on mTOR signaling (Bar et al 2016, DeMille et al 2015, DeMille et al 2014, Lastres-Becker et al 2016, Takahara & Maeda 2012).

Therefore, RIPK1 and PGRN further implicate microglia to the pathology observed in the *Atxn2*-CAG100-KIN mouse model, and raise questions regarding lysosomal function and autophagy in glia cells (Strohm & Behrends 2019).

In addition, *Aif1* and *Gfap* transcripts, as microglia and astroglia markers respectively, were found up-regulated in the 14-month-old *Atxn2*-CAG100-KIN spinal cord and cerebellar samples. Despite the up-regulation observed in *Aif1*, quantification of IBA1 did not show any dysregulations in WB. These data could point to an affection of microglia either caused by the neuronal dysfunction, by its endogenous CAG100-ATXN2 expression, or by a combination of both events, leading to an impaired proliferation of this self-renewal cell type. Additionally, microglia have been described as long-lived tissue-resident macrophages with low turnover (Fuger et al 2017) showing age-related changes that may contribute to age-related cognitive decline and neurodegenerative diseases (Hefendehl et al 2014).

4.5 Microglia express Ataxin 2 and show aggregates in the spinal cord

A functional screening of neurodegeneration-linked factors on microglia phagocytosis identified TDP43 as a regulator (Paolicelli et al 2017). No previous evidence was found regarding ATXN2 expression in microglia even though *Atxn2* transcript has been detected in this cell type (Zhang et al 2014). Therefore, we investigated the ATXN2 levels first in BV2 murine microglia cell line showing its presence through immunocytochemistry (Figure 3.35). Treatment with an oxidative stressor, NaArs, showed formation of SG detected by antibodies against ATXN2, PABP1, and TDP43 (Figure 3.35). Therefore, ATXN2 is expressed at the transcript and protein level, and it is functionally implicated in SG formation under oxidative stress in this microglia cell line.

Characterization of the microglia in the spinal cord of 6-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO via immunohistochemistry showed the presence of ATXN2 in microglia (IBA1-positive cells) from *Atxn2*-CAG100-KIN samples (Figure 3.36, second row). Interestingly, no signal was detected in the microglia from WT spinal cord at 6 months of age, probably due to the small size and cytoplasm area of these cells (Figure 3.36, first row). Indeed, primary cell cultures established from WT and *Atxn2*-CAG100-KIN littermates at postnatal day 0 showed ATXN2 signal upon immunocytochemistry (Figure 3.38) demonstrating ATXN2 protein expression in this cell type. No signal of ATXN2 was detected in the spinal cord sections of *Atxn2*-KO while IBA1 antibody was able to detect microglia cells (Figure 3.36, last row).

Further immunohistochemical analysis from 14-month-old spinal cord sections of *Atxn2*-CAG100-KIN and WT animals showed an increase of ATXN2 expression in WT (Figure 3.37, first row) and ATXN2 aggregates in *Atxn2*-CAG100-KIN (Figure 3.37, second row) microglia. The detection of ATXN2 in microglia from older spinal cord sections rather than 6-month-old sections from WT implicates this factor in the process of ageing, agreeing with prior reports showing that microglia expression profile changes during ageing (Grabert et al 2016, Sierra et al 2007, Streit et al 2009). While the levels of ATXN2 seem to increase in WT microglia and show homogeneous distribution in the cytoplasm of this cell type, *Atxn2*-CAG100-KIN microglia already shows increased expression of ATXN2 at 6 months of age and ATXN2-positive cytoplasmic aggregates at 14 months (Figure 3.36, Figure 3.37). Therefore, expanded ATXN2 seems to accumulate and aggregate over time in microglia either due to the endogenous ATXN2 protein, following phagocytosis of neuronal debris, or a combination of both events.

4.6 Evaluation of the spinal cord and cerebellar transcriptomics reveals common dysregulation of cholesterol degradation and biosynthesis

To complete the description at the transcript level, transcriptomics data was generated from 3- and 14-month-old *Atxn2*-CAG100-KIN cerebellar samples (Table 3.8). The same microarray kit was used, therefore the cerebellar and

spinal cord transcriptomics data sets of both age groups were directly comparable (Figure 3.40).

In looking for commonly dysregulated pathways among the data sets generated, we identified a consistent down-regulation of the cholesterol metabolism pathway (Figure 3.42). Cholesterol is an essential component of cell membranes influencing cellular structure and function (Levitan et al 2014, Lippincott-Schwartz & Phair 2010, Manes & Martinez 2004). This lipid also serves as a precursor to steroid hormone and bile acid synthesis, thus it has a critical role in body metabolism (Martin et al 2014). The brain is the organ richest in cholesterol (Björkhem & Meaney 2004), and within the brain, an important fraction of cholesterol forms part of the myelin sheath. Neurons and glia also contain large amounts of cholesterol to maintain their morphology and synaptic transmission (Bjorkhem 2006). Moreover, there is an increasing amount of evidence demonstrating that defects in brain cholesterol metabolism contribute to neurodegenerative disorders, such as AD, HD, PD, and Niemann-Pick disease Type C (Martin et al 2014).

Due to the blood brain barrier (BBB), all cholesterol in the CNS has to be locally synthesized (Björkhem & Meaney 2004). Cellular cholesterol is synthesized primarily at the endoplasmic reticulum (ER) from acetyl-CoA (acetyl coenzyme A) in a process that involves more than 30 enzymatic steps (Arenas et al 2017). The enzyme HMGCS, implicated in the second reaction to condense acetyl-CoA with acetoacetyl-CoA to form HMG-CoA (3-hydroxy-3-methylglutaryl-CoA), was consistently down-regulated in the transcriptome data sets and further validated in 3- and 14-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO cerebellar samples by Q-PCR (Figure 3.43). It is possible that the loss-of-function of ATXN2 in both mutants affects the production of cholesterol. This effect could be due to low levels of acetyl-CoA linking ATXN2 and metabolism control.

Acetyl-CoA participates in many biochemical reactions as an intermediate in various pathways, such as the citric acid cycle, fatty acid metabolism, steroid synthesis, acetylcholine synthesis, and melatonin synthesis. Moreover, proteomic

and metabolomics studies in *Atxn2*-KO have reported down-regulation of ACADS (Acyl-CoA dehydrogenases), which are involved in fatty acid β -oxidation (Meierhofer et al 2016). Moreover, *Atxn2*-KO liver also showed down-regulation of the BCAA (brain-chain amino acid) pathway, fatty acid metabolism, and the citric acid cycle (Meierhofer et al 2016). Therefore, alteration of cholesterol synthesis in absence or loss-of-function of ATXN2 seems plausible.

Transcript levels of *Dhcr24*, another enzyme implicated in the Bloch cholesterol biosynthesis pathway, were also found down-regulated in transcriptome data sets. Validation by Q-PCR showed consistency in the 14-month-old *Atxn2*-CAG100-KIN and *Atxn2*-KO cerebellum (Figure 3.43). The Bloch pathway is the predominant astrocyte pathway for cholesterol biosynthesis in this cell type. Missense mutations in its gene have been linked to desmosterolosis (Schaaf et al 2011). Therefore, it could be possible that astrocyte cholesterol syntheses, which have higher capability than neurons to produce cholesterol *de novo*, shows time-dependent impairment and further contributes in the cholesterol metabolism dysregulation.

Regarding the degradation of cholesterol, CYP46A1 (Cholesterol 24-hydroxylase) constitutes the major excretion pathway transforming cholesterol into the BBB permeable 24-OHC (24-Hydroxycholesterol) (Russell et al 2009). CYP46A1 is a brain-specific enzyme highly expressed in neurons, particularly in PN and cerebellar interneurons (Ramirez et al 2008). Moreover, CYP46A1 activates the mevalonate pathway of cholesterol synthesis, which intermediate compounds implicated in cellular pathways, such as endocytosis, autophagy, and synaptic transmission (Moutinho et al 2016). Additionally, loss of cholesterol during glutamate-mediated excitotoxicity has been reported, which was prevented by knocking-down CYP46A1 (Sodero et al 2012).

The transcript level of CYP46A1 was down-regulated in the transcriptomics data sets and further validated in the 3- and 14-month-old *Atxn2*-CAG100 and *Atxn2*-KO cerebellar samples (Figure 3.43). Moreover, down-regulation of CYP46A1 has been detected in mouse models of AD and SCA3, and affected brain regions of HD

patients (Boussicault et al 2016, Burlot et al 2015, Nobrega et al 2019). Recently, the administration of AAV-CYP46A1 (Adeno-associated virus) to the cerebellum of a transgenic SCA3 mouse model showed that it could significantly ameliorate their motor impairment (Nobrega et al 2019). Therefore, modulating the levels of *Cyp46a1* to compensate for the consistent down-regulation observed in the *Atxn2*-CAG100-KIN could improve their motor deficits and lead to therapeutic strategies for SCA2 patients.

4.7 Conclusions and perspectives

Overall, the characterization of the *Atxn2*-CAG100-KIN mice demonstrated that this mouse model reproduces the symptomatology observed in SCA2 patients. The significant loss of weight detected over time together with the brain atrophy could be based on the increased toxicity of the expanded ATXN2 forming aggregates. Moreover, this model allows us to study the effect of the ATXN2 poly(Q) expansions in non-neuronal cells and peripheral tissues since the expansion was inserted in the *Atxn2* mouse locus.

The characterization of the spinal cord pathology in the *Atxn2*-CAG100-KIN mouse model further evidences the pathology in the spinal cord suffered by the SCA2 patients and its spatio-temporal progressive affection by the disease. Despite the similar pattern observed in the formation of ATXN2-positive aggregates, the RBP-pathology seemed to be more pronounced in the spinal cord rather than the cerebellum evidencing differences between CNS areas. Therefore, this mouse model can help develop new therapies and evaluate their effect in differently affected areas.

Analyzing and validating the 14-month-old *Atxn2*-CAG100-KIN spinal cord transcriptomic data set helps to further understand the pathology observed in this tissue. The implication of a high number of up-regulated factors linked to immune response and lysosomes pointed to an implication of microglia in the pathology of this mouse model.

The time-dependent co-aggregation or protein-level alteration of several RBP caused by the 100 CAG expansion in ATXN2 could lead to a cytoplasmic accumulation of unprotected RNA. These increased levels of RNA could then trigger the innate immune system mimicking a viral infection. Moreover, *Atxn2* mRNA could also be toxic due to the presence of the expansion (Fischer & Krzyzosiak 2013) and further exacerbate the response to RNA. Although we cannot rule out the neuronal contribution to the alteration of many of these factors, the characterization of microglial response and the potentially deleterious effects of the expanded ATXN2 in this cell type could lead to therapies to improve patients' living standards or delay the symptoms' onset. For instance, peripheral administration of a detoxified TLR4 ligand (monophosphoryl lipid A) was shown to stimulate microglia phagocytosis without excessive inflammatory response, improving cognitive deficits in a mouse model of AD (Michaud et al 2013).

Establishing primary microglia cultures was the first step in further pursuing the research of this cell type involvement in the SCA2 pathology. The contribution of microglia to other neurodegenerative diseases, such as AD, PD, and ALS has already been proven and seems to be region- and time-dependent. Therefore, continuing the investigation of other non-neuronal cell type contribution to the pathology might lead to defining new therapeutic strategies that could slow down and ameliorate the progression of the disease in patients.

The last part of this work was the identification and validation of common altered pathways in all four transcriptome data sets generated. The cholesterol metabolism pathway was consistently dysregulated in both tissues, therefore modulating this pathway could be helpful for SCA2 and other neurodegenerative diseases, such as ALS. The characterization of *Cyp46a1* down-regulation seems to be of importance since it has been shown to be down-regulated in AD, HD and SCA3. Moreover, it opens a potential therapeutic approach since AAV-CYP46A1 administration to a SCA3 mouse model significantly improved their motor deficits. Additionally, CYP46A1 silencing caused accumulation of lysosomes and

endosomes in the mouse brain linking this enzyme to autophagolysosome accumulation and dysfunction (Menzies et al 2015).

Part 2 – Ataxia Telangiectasia Mutated

Autosomal recessive ataxia telangiectasia (A-T) is characterized by radiosensitivity, immunodeficiency, and cerebellar neurodegeneration. A-T is caused by inactivating mutations in the ataxia telangiectasia mutated (ATM) gene; a serine-threonine protein kinase involved in DNA damage response, oxidative stress, mitochondrial functions, mitophagy regulation, and excitatory neurotransmission.

4.8 Ataxia telangiectasia alters the ApoB and reelin pathway

OMICS technologies have become useful tools to understand and evaluate altered pathways in disorders such as cancer and neurodegenerative diseases. The application of these technologies in medicine would help to counsel families regarding disease risk, progression, and benefits of therapy (Hasin et al 2017).

For A-T diagnostics, the level of alpha-fetoprotein in blood is a well-established biomarker that allows monitoring of the progression diseases (Rothblum-Oviatt et al 2016, Stray-Pedersen et al 2007). During the course of this thesis, A-T cerebrospinal fluid (CSF) was evaluated through quantitative global screening and compared to healthy controls (Canet-Pons et al 2018).

4.8.1 Global proteomics reveals several dysregulations in the reelin signaling pathway

To identify further molecular biomarkers to follow the progression of A-T in extracellular fluids, we studied CSF from 12 patients and 12 sex- and age-matched control individuals. Studies were conducted using global proteome profiling with label-free mass spectrometry (MS). In addition, clinical ataxia scores and determination of alpha-fetoprotein levels were documented (Table 3.9). The ataxia scores showed a progressive increase during ageing. The CSF total protein and albumin levels also increased significantly in patients over time, but not in controls (Figure 3.44). Among patients aged 10 to 16 years, total

protein and albumin levels showed better correlation to age than the ataxia scores.

Global proteome bioinformatics analysis identified similar numbers of CSF proteins in patients and controls (Table 3.9). It also revealed prominent PN vulnerability in patients showing a strong reduction of calbindin (CALB1). Decreases of CALB1 levels have been reported in other cerebellar ataxias (Koeppen 2005) and CALB1 has been used as a PN marker (Whitney et al 2008), therefore its levels could be correlated with degeneration of the cerebellum (Barski et al 2003). Moreover, among the dysregulations detected in the A-T patients' CSF, ten factors have been previously implicated in the pathogenesis of ataxia. These findings may improve our mechanistic understanding of how ATM deficiency preferentially affects the cerebellum.

Looking for novel potential biomarkers using linear regression models we identified RELN. RELN appeared to decrease earlier and correlate with age better than CALB1 (**Figure 3.46**). Its protein levels also showed a strong correlation with ataxia scores, and a normalization of its insidious depletion versus the progressive increase of CSF protein content enhanced the steepness of the regression line (**Figure 3.46**). The strong RELN deficit in A-T patients around the age of 15 years is a novel finding.

The absence of reelin triggers programmed cell death in the cerebellum via apoptosis and autophagy mainly for GN after parallel fiber morphology changes (Castagna et al 2016). Therefore, the deficiency of GN-expressed reelin (Pesold et al 1998) could be upstream from PN degeneration in A-T. Deficiency in reelin has been implicated in a rare autosomal recessive ataxia with cerebellar hypoplasia and lissencephalopathy (Hong et al 2000). In addition, a spontaneous reelin deletion in mice (reeler mouse mutant) causes ataxia over time due to brain cortex foliation defects, which prominently affect cerebellar PN (D'Arcangelo et al 1995, Miyata et al 2010).

Reelin is a large secreted extracellular glycoprotein that activates the apolipoprotein receptors APOER2 and VLDLR. Their interaction controls neuronal positioning during brain development and synaptic plasticity during adulthood (Herz & Chen 2006, Nakamura et al 2016). Reelin also influences postsynapses in their glutamatergic NMDA receptor composition, modulating postnatal neurogenesis, and enhancing spine hypertrophy and long-term potentiation (Sinagra et al 2005).

The strong up-regulation observed for APOB further supports the central role of reelin signaling in this proteome profile. This lipid transporter shows preferential expression in GN and PN of the cerebellum, based on Allen mouse brain atlas data. The levels of APOB and VLDLR are known to inversely correlate (Kobayashi et al 1996). A significant up-regulation was also detected for the apolipoprotein J (ApoJ, also known as clusterin, CLU) in A-T patients' CSF. A secreted isoform of ApoJ acts as a ligand for VLDLR and APOER2 to signal via the reelin pathway (Leeb et al 2014). Additionally, ApoJ is a PN pathology marker and its plasma concentration is associated with brain atrophy (Thambisetty et al 2012). Thus, there is a clear enrichment of ataxia pathogenesis factors, reelin/ApoB signaling and apolipoprotein homeostasis factors among the A-T CSF dysregulations.

Additional unbiased bioinformatics analyses of the CSF data were done with the STRING server looking for enrichment of GO terms such as cellular components, biological processes, molecular functions, KEGG pathways, and protein domains. Among cellular components, enrichments for extracellular region were detected in the down-regulated factors. Further significant enrichment for down-regulations was found for the KEGG pathway "extracellular matrix-receptor interaction", the GO biological processes "biological adhesion" and "extracellular organization", the GO molecular functions "calcium ion binding" and "peptidase activity", and the INTERPRO domain "immunoglobulin subtype" (Figure 3.47, A). In summary, markers for the glutamatergic parallel fiber afferents to PN, which originate in cerebellar GN, appeared to be at least as diminished as PN markers.

Overall, key factors of PN connectivity with their glutamatergic input axons are prominent among the down-regulations. Regarding the analysis of up-regulated factors, novel insights included enrichments for the KEGG pathway “complement and coagulation cascades”; the GO biological processes “complement activation”, “immune effector process”, and “endocytosis”; and the GO cellular component “plasma lipoprotein particles” (Figure 3.47, B). Overall, neuroinflammatory responses are prominent among up-regulations, but the dysregulation of lipoprotein particles and endocytosis pathways may be a direct effect of ApoB/RELN and ATM membrane functions.

The CSF findings identified prominent and consistent changes of reelin/apolipoprotein signaling and possibly endocytosis/adhesion at sites of glutamatergic input to PN, accompanied by neuroinflammation activation. The deficiency of reelin may have specificity for A-T, since increased reelin levels were observed in the CSF of AD, FTD patients, and in the cerebellum of SCA37 patients (Corral-Juan et al 2018, Saez-Valero et al 2003). The molecular dysregulations observed may be part of the irradiation and DNA damage repair pathways but the pathogenesis may also relate to altered glutamatergic excitation of PN dendrites. The endosome-associated fraction of ATM in cerebellar GN (Kuljis et al 1999) was shown to be a crucial facilitator of synaptic excitatory vesicle release, in balance with ATR being responsible for inhibitory neurotransmission (Cheng et al 2018). ATM levels rise in response to blockade of NMDA receptors (Cheng et al 2018), so the influence of reelin on NMDA receptor composition and synaptic plasticity may play a key role in ATM deficiency. Dysfunction of the glutamatergic parallel fiber input is known to result in PN death (Slemmer et al 2005). Conversely, changed abundance of reelin was previously observed in mouse intestines to trigger transcript dysregulation of key factors in lipid metabolism, modulators of lipogenesis and gluconeogenesis, intracellular cholesterol flux gatekeepers, and glutamate receptors subunits (Garcia-Miranda et al 2012).

4.8.2 Validation in *Atm*^{-/-} cerebellar mRNA and tissue homogenates confirms Reelin pathway and ApoB alterations

Although patient data are extremely valuable, these types of samples are not always available. The use of mouse models has sped-up the research in many genetic based diseases and has allowed researchers to find new biomarkers or develop new therapies. Therefore, after analyzing the CSF proteome data from A-T patients and controls, we aimed to reproduce these findings in the *Atm*^{-/-} mouse model and gain deeper insights (Barlow et al 1996). A hallmark of these mice is the high level of oxidative stress by ROS, affecting several tissues including the cerebellum (Barlow et al 1999).

We analyzed transcript levels in ~2-month-old cerebellar tissue for key components of cholesterol-apolipoprotein trafficking, reelin signaling, glutamatergic input to PN, glutamate receptors, calcium homeostasis, oxidative stress, neuroinflammation, and cell adhesion suggested by the A-T patient CSF proteomic profiles (Figure 3.48). Our results showed up-regulation of transcripts implicated in cholesterol transport (Apolipoproteins *ApoE* and *ApoH*) and the cholesterol efflux regulator *Cyp46a1*. Significant mRNA reduction of both reelin receptors, *Vldlr* and *ApoER2*, were detected as a confirmation of the reelin pathway alteration in the patients' CSF (Figure 3.48, A and C). However, the transcript levels of reelin and intracellular transducers were not changed in the 2-month-old cerebellar *Atm*^{-/-} samples. The transcript level of *Sema7a*, a recently described factor implicated in the elimination of weak climbing fibers (Uesaka & Kano 2018, Uesaka et al 2014), was up-regulated while *Vglut2*, a marker for climbing fibers that is affected in the early pathology of SCA1 (Barnes et al 2011), was down-regulated pointing to an early climbing fiber affection in the *Atm*^{-/-} cerebellum (Figure 3.48, D). Consistent with the concept of altered lipid signaling and glutamatergic afferents, the glutamate NMDA receptor (N-methyl-D-aspartate receptor) subunit *Grin2b* transcript showed strong up-regulation. Reelin levels are known to modulate GRIN2B levels in a reverse correlation (Groc et al 2007, Sinagra et al 2005), the elevation of *Grin2b* levels supports the notion of deficient reelin signaling in *Atm*^{-/-} cerebellar samples as early as ~2 months of age. Regarding calcium homeostasis factors, a significant

decrease of the PN marker CALB1 was detected together with a more discrete reduction of *Atp2b2* (plasma membrane calcium ATPase) and *Itpr1* (ER-associated inositol-1,4,5-triphosphate-receptor1) transcripts. The reduction of these calcium homeostasis factors reflects the deficient excitability of PN downstream of reelin and glutamate signals. Interestingly oxidative stress, DDR, neuroinflammation, and adhesion markers analyzed showed no dysregulation (Figure 3.48, B, E, H).

The transcriptional analyses confirmed reelin signaling deficits before altered locomotor behaviour or PN death were detected. These data also point to alterations of the lipid and glutamate pathways with downstream calcium dependent excitability affected before DDR, oxidative stress response, neuroinflammation, and cellular adhesion show significant changes.

To determine if dysregulation of lipid transport and reelin signaling precedes the neurodegeneration in the ~2-month-old *Atm*^{-/-} cerebella, we used quantitative immunoblots. The apolipoproteins ApoB and two isoforms of ApoJ were found up-regulated while the reelin receptor VLDLR showed a decreased to 50% (Figure 3.49, A, C, E, and F). No evidence of cerebellar PN/GN loss was apparent at this stage; neither CALB1 nor NeuN protein levels were dysregulated (Figure 3.49, G and H), and coimmunofluorescence stainings confirmed the absence of neuronal death (Figure 3.50). No changes were detected for ApoE protein levels and only a statistical trend for reelin pointing to down-regulation was identified (Figure 3.49, B and D). Interestingly, an up-regulation of ApoB protein was detected before reelin protein levels changed significantly. These findings correlated with previous literature, which stated that ApoB and VLDLR levels show inverse correlation (Kobayashi et al 1996) and that ATM depletion modulates specific isoforms of ApoJ (Luo et al 2014).

Q-PCR and WB results in *Atm*^{-/-} cerebella from ~2-month-old mice are consistent and support a concept where ApoB and reelin signaling affection constitute a novel, early, and important feature in the pathogenesis of A-T neurodegeneration. Furthermore, our data suggested that the alterations in

signaling and excitability occurred before responses to DNA damage, oxidative stress, neuroinflammation, or cell adhesion deficits become notable. Our protein studies suggested that the ApoB excess and VLDLR decrease may even precede the reelin deficit, and that they certainly precede the cerebellar neuronal death. Deficiency of ApoB is a known cause of cerebellar ataxia and acanthocytosis in autosomal recessive disorders known as hypo- or a-betalipoproteinemia (Hentati et al 2012, Homer et al 2005). In addition, overexpression of ApoB-100 causes severe cerebellar degeneration (Berezcki et al 2008). Moreover, ATM is known to modulate the endocytosis of ApoB-48 influencing the up-take of cholesterol and vitamin E (Averna et al 1993, Homer et al 2005, Wu et al 2005, Wu et al 2014). Deficiency in cholesterol and vitamin E has been implicated in ataxia (Hentati et al 2012). This could explain the significantly reduced levels of vitamin E (alpha-tocopherol) detected in blood plasma of A-T patients (Reichenbach et al 1999).

4.8.3 Conclusions and perspectives

Overall, our findings support a scenario where the deficit of vesicle-associated ATM in cerebellar GN parallel fibers alters the secretion of ApoB, reelin, and glutamate (Figure 3.51). These defects would lead to postsynaptic adaptations in PN and synaptic plasticity via transcriptional changes. While a complete loss of reelin would result in neuron migration and connection problems at embryonal stages, it is possible that milder reelin deficiency permits the prenatal establishment of neural circuits while being insufficient to sustain differentiation and maintenance of synaptic contacts at older ages. This notion is consistent with analogous observations that the total loss-of-function in homozygous mutants in “staggerer” and “pcd” ataxia models have embryonal and postnatal difficulties to establish cerebellar circuitry, while the corresponding heterozygous mutants show adult age-associated neurodegenerative phenotypes (Hadj-Sahraoui et al 2001, Hadj-Sahraoui et al 1997).

To establish new approaches of neuroprotective value, it is interesting to note that the addition of recombinant reelin to hippocampal organotypic slice cultures via conditioned medium rescued the pathology of synaptic vesicles and paired-pulse facilitation in reeler mutant mice (Hellwig et al 2011). In addition,

the expression of reelin and VLDLR can be up-regulated by the administration of the psychotropic drug olanzapine (Fatemi et al 2009). Finally, the supplementation of A-T patients' diet with vitamin E could be beneficial for their cerebellar ataxia.

4.9 Evaluation of the 12-month-old cerebellar transcriptome data set from *Atm*^{-/-} animals reveals alteration of Ataxia-related gene network

Ataxia telangiectasia patients present progressive cerebellar ataxia starting in early childhood. Later on they develop conjunctival telangiectasia, other progressive neurologic degeneration, sinopulmonary infection, and malignancies (Gatti et al 1991). Prognosis for A-T patients has not changed since 1954 and the life expectancy is lower among patients with mutations in ATM causing total loss of function. Cancer and respiratory tract infections are the major risk factor for mortality among patients and treatment of malignancies with radiation can be fatal to AT patients (Micol et al 2011).

Bone marrow transplantation (BMT) with reduced-intensity conditioning regimen has been proposed as a therapy after being proved to restore immune system function and prevent lymphoma in *Atm*^{-/-} mice (Bagley et al 2004). Further studies using this mouse model showed bone marrow-derived cells (BMDCs) migrated to the thymus, spleen, and lung tissues but not to the CNS due to the blood-brain barrier (BBB) (Pietzner et al 2013). The life span of *Atm*^{-/-} animals is between 4 and 6 months due to malignant thymic lymphomas before ataxic and other neurologic symptoms appear (Barlow et al 1996).

Thanks to the BMT, the life expectancy of these animals was extended up to 12 months and ataxic behaviour together with loss of PN in the cerebellum was detected (Pietzner et al 2013). Using cerebellar samples of life-extended *Atm*^{-/-} animals via BMT can help to decipher the pathomechanisms implicated in the ataxia and other neurologic symptoms of A-T patients. Therefore, we generated a novel transcriptomics data set from 12-month-old cerebellar *Atm*^{-/-} samples.

4.9.1 Transcriptomics data set of 12-month-old *Atm*^{-/-} cerebella points to a non-coding RNA pathology and glutamatergic input deficiency

The transcriptomics data was analyzed with the TAC software using standard parameters and self-determined filter criteria. A higher number of down-regulations (58%) were detected compared to up-regulations (42%) regarding all transcripts that passed the filter criteria. Interestingly, 84% of the significant down-regulated transcripts were part of the Non-Coding category (Figure 3.53).

Thanks to improvements in sequencing technologies, an increasing number of non-coding RNA (ncRNA) have been implicated in neuronal development, homeostasis, and neurodegenerative and psychiatric disorders (Salta & De Strooper 2012). Moreover, recent evidence suggests the implication of ncRNA and interference RNA (RNAi) in efficient recognition and repair of DSBs (Burger et al 2019a). This effect could be mediated by c-Abl (Abelson kinase) that can be activated by ionizing radiation (IR) in a DNA-PK- and ATM-dependent manner (Burger et al 2019b). Therefore, the absence of ATM kinase activity might be affecting the response to DNA damage through c-Abl or other factors controlling the expression of key ncRNAs.

Further bioinformatics analyses with the altered transcripts part of the coding and multiplex categories were performed using the online platform STRING. Significant protein-protein interaction enrichment was detected for the significantly up-regulated and down-regulated transcripts analyzed. Among the up-regulations, enrichment for GO molecular functions “ion gated channel activity”, for GO cellular components “somatodendritic compartment” and “neuron projection” were identified. The highest number of up-regulated factors was identified to localize at the dendritic compartment (Figure 3.54), this effect could be as a result of compensatory effect to an impaired input from afferent projections. Among the down-regulations, enrichment for the GO cellular compartment “extracellular space”, for the KEGG pathway “glutamatergic synapse” and “circadian entrainment”, and the Reactome pathway “nuclear receptor transcription pathway” was detected. Overall, the affection of glutamatergic synapses has been consistent through all the data analyzed so far

together with extracellular space factors and secreted factors. The lack of glutamatergic input to the PN could be responsible for the compensatory effect observed for the up-regulation of dendritic compartment transcripts (Hoxha et al 2018).

4.9.2 Validation efforts confirm the down-regulation of several ataxia and neurodegeneration implicated factors

The 12-month-old *Atm*^{-/-} cerebellar transcriptome data set and Q-PCR validation efforts revealed the down-regulation to ~80% of six factors that have been previously implicated in the pathogenesis of ataxias: *Cadps2*, *Car8*, *Fgf14*, *Stxbp5l*, *Syne1*, and *Mtcl1*.

The calcium-dependent activator protein for secretion 2, *Cadps2*, was one of them and it is known to show the highest expression in the cerebellum (Nagase et al 2000). *Cadps2*-KO mice show autistic-like behaviour and BDNF (brain-derived neurotrophic factor) secretion impairment from neocortical and cerebellar neurons, leading to defects in the neocortical and hippocampal neurons differentiation and survival of cerebellar PN (Sadakata et al 2007).

Car8 (Carbonic anhydrase 8) transcript levels were also down-regulated in the microarray data, and CAR8 has been previously implicated in SCA14 (Shimobayashi & Kapfhammer 2018) and SCA29 (Ando et al 2018). “Waddles” mice show an ataxic phenotype due to homozygous mutation in *Car8* causing non-functional CAR8 protein (Lamont & Weber 2015). Moreover, abnormal extension of climbing fibers to distal PN dendrites in combination with abnormalities of parallel fibers and dendritic spines were detected in this mouse mutant, suggesting a role of CAR8 in maintenance of proper synaptic morphology and function in the cerebellum (Hirasawa et al 2007).

Stxbp5l, also known as Tomosyn-2, implicated in neurotransmitter release inhibition was also down-regulated in the transcriptome data set and validated via Q-PCR. Homozygous variants in *STXBP5L* have been identified in two patients with recessive neurodegeneration (Kumar et al 2015) and *Stxbp5l*-KO mice

showed impaired motor performance accompanied by synaptic changes at the neuromuscular junction (Geerts et al 2015).

Syne1 (Spectrin repeat-containing nuclear envelope protein 1) and *Fgf14* (Fibroblast growth factor 14) have already been implicated in SCAR8 (spinocerebellar ataxia recessive 8) and SCA27 (spinocerebellar ataxia type 27) previously (Synofzik et al 2016, van Swieten et al 2003). *Syne1* has been implicated in linking the nuclear plasma membrane to the actin cytoskeleton. The mouse model with C-terminal deletion of SYNE1 showed hindlimb weakness and abnormal gait (Puckelwartz et al 2009). On the contrary, *Fgf14* is important for neuron excitability and it has been shown to regulate the intrinsic excitability of cerebellar PN (Shakkottai et al 2009).

Therefore, these data points to alterations in maintenance of cerebellar morphology, survival of PN, and neuronal excitability. This could eventually help define the events taking place during the cerebellar degeneration in A-T patients and explain the stronger affection of the Purkinje neurons.

4.9.3 Three novel factors appear dysregulated in ~2-month-old *Atm*^{-/-} cerebella as early events in the degeneration of the cerebellum

Further efforts were made to identify novel early events that could help understand the cerebellar degeneration in A-T. Therefore, samples from ~2-month-old *Atm*^{-/-} cerebella were used to quantify the transcript levels of 11 factors dysregulated in the transcriptome data set (Table 3.13). Only three transcripts were found to be dysregulated in both ~2 months and 12 months *Atm*^{-/-} cerebellar samples sets: *Mtcl1*, *Slc17a7*, and *Slc1a6*.

The microtubule crosslinking factor 1, *Mtcl1*, showed a constant down-regulation to ~80% of its transcripts levels in *Atm*^{-/-} cerebella compared to WT. *Mtcl1* is a microtubule-associated factor necessary to maintain axonal polarity highly expressed in PN. *Mtcl* gene disruption in mice has been shown to cause abnormal coordination and PN degeneration (Satake et al 2017). In addition, *MTCL1* homozygous loss-of-function variants have been implicated in recessive

cerebellar ataxia (Krygier et al 2019). Therefore, its constant down-regulation at transcript level could result in a lower protein level that over time could impair the maintenance of microtubule bundles at the proximal axon of PN leading to impaired output from the cerebellum.

The two other commonly down-regulated factors, *Slc1a6* and *Slc17a7*, are glutamate transporters. *Slc1a6* encodes the ion-gradient-dependent glutamate transporter EAAT4 expressed in neurons. The loss of EAAT4 affects the spontaneous firing pattern and survival of PN (Perkins et al 2018). *Slc17a7* encodes the vesicular glutamate transporter 1, VGLUT1, which is expressed by parallel fibers in the cerebellum. This glutamate transporter caught our attention since ATM has been recently associated to excitatory neuronal vesicles, VGLUT1 positive vesicles (Cheng et al 2018). Therefore, the absence of ATM could affect the excitatory/inhibitory balance and could lead to neural network dysfunction (Bateup et al 2013). Additionally, A-T patients can also show degeneration in other brain regions in addition to suffering from cerebellar and non-cerebellar cognitive deficits (Hoche et al 2014, Hoche et al 2012, Sahama et al 2015).

4.9.4 Evaluation of VLGUT1 at protein level in ~2-month-old and ~4-month-old *Atm*^{-/-} cerebellar samples does not show significant dysregulation and no altered localization upon immunohistochemistry

Despite our efforts to detect changes at the protein level of VLGUT1 at ~2 and ~4 months of age in the *Atm*^{-/-} mouse model cerebella, none were detected via quantitative immunoblots (Figure 3.56). This method is less sensitive than transcript analysis via Q-PCR, therefore it could be possible that small changes are not being quantified and older tissue is necessary to confirm VGLUT1 levels alterations.

It can also be argued that before the protein level of VGLUT1 changes, its localization might be altered due to the absence of ATM (Cheng et al 2018, Li et al 2009). Thus, we decided to characterize the VGLUT1 location via immunohistochemistry experiments using slices from ~6-month-old *Atm*^{-/-} cerebellum compared to age- and sex-matched WT (Figure 3.57). Although the

staining was not repeated in a higher number of animals and no quantification was possible, no obvious alteration in the VGLUT1 signal was identified comparing the two genotypes.

4.9.5 Conclusions and perspectives

Overall, our data consistently shows alteration of the glutamatergic signal and the implication of ataxia/neurodegeneration factors that can explain the preferential affection in the cerebellum. The strong up-regulation of the adhesion factors *Cbln2* and *Cbln4* could be a consequence of compensatory efforts from the system due to the important number of down-regulations involved in neuron excitability and glutamate receptors (Rong et al 2018). The consistent down-regulation of *Slc17a7* in the different aged cerebellar samples tested from the *Atm*^{-/-} mouse model confirms the previous observations implicating ATM in excitatory (VGLUT1+) vesicle-associated functions (Cheng et al 2018) and could explain NMDA receptor alterations observed. Despite not being able to detect changes at protein level via WB or affected VGLUT1 localization via immunohistochemistry, further efforts to quantify VGLUT1/*Slc17a7* in blood of the *Atm*^{-/-} mouse model and A-T patients should be pursued since public RNAseq data shows expression (gtexportal.org). If VGLUT1/*Slc17a7* dysregulated levels can be detected in patients' blood, it could become an important biomarker for the degeneration of the cerebellum and complement the information obtained from alpha-fetoprotein levels coming from the liver (Ishiguro et al 1986, Rothblum-Oviatt et al 2016).

4.10 Cerebellar organotypic cultures as a tool to speed up A-T research

The limited life expectancy of the *Atm*^{-/-} mouse model due to lymphomas (Barlow et al 1996) has been overcome thanks to BMT (Bagley et al 2004, Pietzner et al 2013), opening new possibilities to study the cerebellar degeneration in this A-T mouse model. Unfortunately, BMT is an expensive intervention and, together with ageing the animals, time consuming. Therefore, we successfully established organotypic cell cultures (OTC) (Figure 3.58) as a

complementary method that will allow the identification of potential candidates and test drugs in a conserved neuronal network (Hellwig et al 2011).

5 SUMMARY

Cerebellar ataxias are a group of neurodegenerative disorders primarily affecting the cerebellum. Imbalance and coordination problems are broader symptoms exhibited by patients (Akbar & Ashizawa 2015). There is currently no cure for ataxias and although mutations in several genes have been identified as causative, there is a lack of understanding of why some neurons are more sensitive than others.

Cerebellar ataxias can be acquired, inherited or sporadic (without defined genetic cause or acquired etiology). Inherited ataxias, those with a defined genetic cause, can be classified in four different categories: dominant ataxias, recessive ataxias, mitochondrial ataxias, and X-linked ataxias.

Spinocerebellar ataxia type 2 (SCA2) is a dominant ataxia caused by repeat expansion mutations in the *ATXN2* gene, which encodes the protein Ataxin2 (ATXN2). A polyglutamine (polyQ) tract consisting of CAG repeats interrupted by CAA was identified at exon 1 of *ATXN2* (Imbert et al 1996, Pulst et al 1996, Sanpei et al 1996). Healthy individuals have between 22 and 23 glutamines (Qs), with a sequence of $(CAG)_8CAA(CAG)_4CAA(CAG)_8$, while expansions longer than 33 CAG repeats cause SCA2 (Fernandez et al 2000). The most noticeable symptom that SCA2 patients show is ataxic gait; however they also show cerebellar dysarthria, dysdiadochokinesia, and ocular dysmetria caused by the progressive cerebellar degeneration. Slow or absent saccade velocity is one predominant ocular symptom from SCA2 patients due to degeneration of the oculomotor brainstem (Auburger 2012, Lastres-Becker et al 2008b, Velazquez-Perez et al 2011). Histological analysis of *post-mortem* samples from SCA2 patients showed a general reduction of the brain size with significant atrophy of the cerebellum, brainstem, and frontal lobe. A reduction of the cerebral and cerebellar white matter was also detected (Estrada et al 1999). Further studies

of spinal cord samples showed severe and widespread neurodegeneration of the central somatosensory system (Rub et al 2007).

Ataxin 2 (ATXN2) is an evolutionary conserved RNA binding protein (RBP) (Jiménez-López & Guzmán 2014) that has been linked to several RNA processing roles. ATXN2 interacts with PABP1 through its PAM2 domain. PABP1 is an RBP important for poly-A tailing, translation, and mRNA decay (Xie et al 2014). Moreover, ATXN2 can bind to uridine-rich elements (AU-rich element, ARE) at the 3'UTRs of its mRNA targets through the LSm domain, thereby stabilizing the mRNA targets (Yokoshi et al 2014). ATXN2 also has a proline-rich domain towards the C-terminal that has been described to mediate the association of ATXN2 with the receptor endocytosis apparatus and influence the trophic state of the cells (Drost et al 2013, Nonis et al 2008).

To model the SCA2 disease, we generated a new mouse model where 100 CAG repeats were introduced in the mouse *Atxn2* gene via homologous recombination. The characterization of this mouse model, *Atxn2*-CAG100-KIN, demonstrated that it reproduces the symptomatology observed in SCA2 patients. These animals showed significant loss of weight over time, brain atrophy, and motor deficits (Sen et al 2019). Moreover, this model allowed us to study the effect of the ATXN2 poly(Q) expansions outside of the cerebellum since the expansion was inserted in the *Atxn2* mouse locus.

In addition, ATXN2 intermediate expansions have been linked to the pathology of Amyotrophic lateral sclerosis (ALS) as a risk factor (Elden et al 2010). ALS is a fatal neurodegenerative disease where the motor neurons in the brain and spinal cord degenerate. A hallmark of ALS is the presence of TDP43-positive inclusions in neurons and glia (Neumann et al 2006). Few publications focusing on SCA2 patient pathology in the spinal cord are available (Estrada et al 1999, Rub et al 2007, Velazquez-Perez et al 2018, Velazquez-Perez et al 2017). Therefore, it was of interest to further investigate the pathology affection this tissue in the *Atxn2*-CAG100-KIN line and the relationship between ATXN2 and TDP43 (Becker et al 2017).

The characterization of the spinal cord pathology via protein quantification, transcript quantification, and immunohistochemistry showed a preferential affection of RNA binding proteins (RBP) in the spinal cord rather than the cerebellum. The ALS-linked factors TDP43 and TIA1 showed time-dependent co-aggregation with ATXN2 in spinal cord sections together with an increase of CASP3 levels. Reports implicating ATXN2 intermediate expansions in ALS, influencing TDP43 aggregation via enhanced CASP3 activation and production of pathological C-terminal fragments from TDP43, have been published (Elden et al 2010, Hart & Gitler 2012). Therefore, this mouse model can help develop new therapies and evaluate their effect in differently affected areas.

The generation of a transcriptome data set from *Atxn2*-CAG100-KIN spinal cord samples at the final disease stage of this mouse model showed a strong up-regulation of RNA toxicity-, immune- and lysosome-implicated factors. These data pointed to a pathological reactivation of the synaptic pruning and phagocytosis in microglia. Moreover, two inflammation factors implicated in ALS that are highly expressed by microglia were also found up-regulated: *Ripk1* and *Grn*. Therefore, microglia seems to be implicated in the spinal cord pathology observed in the *Atxn2*-CAG100-KIN mouse model.

TDP43 levels have been shown to modulate microglia phagocytic activity (Paolicelli et al 2017). Thus, we aimed to determine the expression of ATXN2 in this cell type and further investigate their affection. Through immunocytochemistry we demonstrated the presence of ATXN2 in the murine microglia cell line BV2 and in microglia primary cell cultures derived from *Atxn2*-CAG100-KIN and WT animals. Based on immunohistochemical analysis we also demonstrated an increase of ATXN2 expression in microglia from *Atxn2*-CAG100-KIN spinal cord sections at the age of 6 months compared to sex- and age-matched WT. Moreover, a time-dependent ATXN2 aggregation was observed in 14-month-old spinal cord microglia from *Atxn2*-CAG100-KIN animals. This could be caused by an increase debris phagocytosis by microglia, an accumulation of endogenous ATXN2 protein, or both leading to an altered function of this cell type.

The characterization of microglial response and the potentially deleterious effects of the expanded ATXN2 in this cell type could lead to therapies to improve patients' living standards or delay the symptoms' onset. For instance, peripheral administration of a detoxified TLR4 ligand was shown to stimulate microglia phagocytosis without excessive inflammatory response, improving cognitive deficits in a mouse model of Alzheimer's disease (Michaud et al 2013).

The second part of this thesis was focused on an autosomal recessive form of cerebellar ataxia, Ataxia Telangiectasia (A-T), with childhood onset. A-T patients show severe cerebellar atrophy manifesting as ataxia when the child starts to walk (Chun & Gatti 2004). Other movement symptoms are hypotonia, dystonia, tremor, and Parkinsonism (Nissenkorn & Ben-Zeev 2015). Moreover, A-T patients show predisposition to malignancies, immune defects, hypersensitivity to radiotherapy, and endocrine abnormalities (Nissenkorn et al 2016). Alpha-fetoprotein (AFP) blood level is used to follow the progression of the disease (Rothblum-Oviatt et al 2016).

The genetic cause of A-T is loss-of-function-mutations in the Ataxia Telangiectasia Mutated gene (*ATM*). ATM is a Serine/Threonine kinase involved in DNA damage response (DDR) and oxidative stress. Moreover, ATM has been implicated in insulin resistance and autophagy through the mTOR (mammalian target of rapamycin) pathway (Alexander et al 2010, Zhang et al 2015). More recently, ATM has been implicated in synaptic function specifically associated with excitatory vesicles (Cheng et al 2018).

Working with proteome data from cerebrospinal fluid of 12 A-T patients and 12 healthy controls, we aimed to define novel biomarkers that would allow following the neurodegeneration in extracellular fluid. Among the dysregulated factors detected in the A-T patient's CSF, ten factors have been previously implicated in the pathogenesis of ataxia. Searching for novel potential biomarkers we identified Reelin (RELN), a secreted extracellular glycoprotein that activates the apolipoprotein receptors APOER2 and VLDLR. The down-regulation of RELN protein levels showed a strong correlation with ataxia scores.

Moreover, the apolipoprotein B and J were found up-regulated further supporting the implication of RELN signaling in this proteome profile.

Validation efforts using ~2-month-old *Atm*-knock-down (*Atm*^{-/-}) mouse cerebellar samples confirmed Reelin pathway and ApoB alterations before loss of Purkinje neurons (PN) or behaviour alteration can be detected in this mouse model (Barlow et al 1999, Barlow et al 2000, Chiesa et al 2000). No changes at the transcript level were detected for DNA damage response, oxidative stress, neuroinflammation, or cell adhesion suggesting that alterations in signaling and excitability are early events in the pathology. Overall, our findings support a scenario where the deficit of vesicle-associated ATM alters the secretion of ApoC, reelin, and glutamate. As extracellular factors, apolipoproteins and their cargo such as vitamin E may be useful for neuroprotective interventions (Canet-Pons et al 2018).

The life span of *Atm*^{-/-} animals is between 4 and 6 months due to malignant thymic lymphomas before ataxic and other neurologic symptoms appear (Barlow et al 1996). Thanks to bone marrow transplantation (BMT), the life expectancy of these animals was extended up to 12 months when ataxic behaviour and PN loss can be detected (Pietzner et al 2013). To gain deeper insight into pathomechanisms implicated in ataxia and other neurologic symptoms of A-T patients, we generated a novel transcriptomics data set from 12-month-old cerebellar *Atm*^{-/-} samples.

The data obtained from the transcriptome and further validation experiments via quantitative PCR (Q-PCR) showed the down-regulation of six factors that have been previously implicated in the pathogenesis of ataxias: *Cadps2*, *Car8*, *Fgf14*, *Stxbp5l*, *Syne1*, and *Mtcl1*. Among them, only *Mtcl1* (Microtubule crosslinking factor 1) was found to be an early event being down-regulated in both ~2-month-old and 12-month-old cerebellar samples. *Mtcl* gene disruption in mice has been shown to cause abnormal coordination and PN degeneration (Satake et al 2017). Moreover, *Slc1a6* and *Slc17a7* were commonly down-regulated in both age sample sets pointing to glutamate deficits. *Slc17a7* encodes the vesicular glutamate transporter 1, VGLUT1, which is expressed by parallel

fibers in the cerebellum. ATM has been associated to excitatory neuronal vesicles, VGLUT1 positive vesicles (Cheng et al 2018). The absence of ATM could affect the excitatory/inhibitory balance and could lead to neural network dysfunction (Bateup et al 2013). If *VGLUT1/Slc17a7* dysregulated levels can be detected in patient's blood, it could become an important biomarker for the degeneration of the cerebellum and complement the information obtained from alpha-fetoprotein levels (Rothblum-Oviatt et al 2016).

6 ZUSAMMENFASSUNG

Kleinhirntaxien sind eine Gruppe von neurodegenerativen Erkrankungen, die hauptsächlich das Kleinhirn betreffen. Ungleichgewichts- und Koordinationsprobleme sind umfassendere Symptome, die Patienten aufweisen (Akbar & Ashizawa 2015). Es gibt derzeit keine Heilung für Ataxien, und obwohl Mutationen in mehreren Genen als ursächlich identifiziert wurden, fehlt das Verständnis, warum einige Neuronen empfindlicher sind als andere.

Kleinhirntaxien können erworben, vererbt oder sporadisch (ohne definierte genetische Ursache oder erworbene Ätiologie) sein. Vererbte Ataxien, die eine definierte genetische Ursache haben, können in vier verschiedene Kategorien eingeteilt werden: dominante Ataxien, rezessive Ataxien, mitochondriale Ataxien und X-chromosomale Ataxien.

Spinocerebellare Ataxie Typ 2 (SCA2) ist eine dominante Ataxie, die durch wiederholte Expansionsmutationen im ATXN2-Gen verursacht wird, welches Protein Ataxin2 (ATXN2) kodiert. Ein Polyglutamin (polyQ) -Trakt, der aus durch CAA unterbrochenen CAG-Wiederholungen bestand, wurde im Exon 1 von ATXN2 identifiziert (Imbert et al 1996, Pulst et al 1996, Sanpei et al 1996). Gesunde Personen haben zwischen 22 und 23 Glutamine (Qs) mit einer Sequenz von $(CAG)_8CAA(CAG)_4CAA(CAG)_8$, während Expansionen, die länger als 33 CAG-Wiederholungen sind, SCA2 verursachen (Fernandez et al 2000). Das auffälligste Symptom bei SCA2-Patienten ist der ataxische Gang. Sie zeigen jedoch auch Kleinhirn-Dysarthrie, Dysdiadochokinese und Augendysmetrie, die durch die fortschreitende Kleinhirn-Degeneration verursacht werden. Langsame oder fehlende Sakkadengeschwindigkeit ist ein vorherrschendes Augensymptom bei SCA2-Patienten aufgrund einer Degeneration des okulomotorischen Hirnstamms (Auburger 2012, Lastres-Becker et al 2008b, Velazquez-Perez et al 2011). Die histologische Analyse von Obduktionsproben von SCA2-Patienten zeigte eine allgemeine Verringerung der Gehirngröße mit einer signifikanten Atrophie des

Kleinhirns, des Hirnstamms und des Frontallappens. Eine Reduktion der zerebralen und zerebellären weißen Substanz wurde ebenfalls festgestellt (Estrada et al 1999). Weitere Untersuchungen an Rückenmarksproben ergaben eine schwere und weit verbreitete Neurodegeneration des zentralen somatosensorischen Systems (Rub et al 2007).

Ataxin 2 (ATXN2) ist ein evolutionär konserviertes RNA-Bindungsprotein (RBP) (Jiménez-López & Guzmán 2014), das mit mehreren RNA-Verarbeitungsrollen verknüpft ist. ATXN2 interagiert mit PABP1 über seine PAM2-Domäne. PABP1 ist ein RBP, das für das Poly-A-Tailing, die Translation und den mRNA-Zerfall wichtig ist (Xie et al 2014). Darüber hinaus kann ATXN2 an den 3'UTRs seiner mRNA-Ziele über die LSM-Domäne an uridinreiche Elemente (AU-rich element, ARE) binden, wodurch die mRNA-Ziele stabilisiert werden (Yokoshi et al 2014). ATXN2 hat auch eine prolinreiche Domäne gegenüber dem C-Terminus, von der beschrieben wurde, dass sie die Assoziation von ATXN2 mit dem Rezeptorendozytoseapparat vermittelt und den trophischen Zustand der Zellen beeinflusst (Drost et al 2013, Nonis et al 2008).

Um die SCA2-Krankheit zu modellieren, haben wir ein neues Mausmodell erstellt, bei dem 100 CAG-Wiederholungen über homologe Rekombination in das Maus-Atxn2-Gen eingeführt wurden. Die Charakterisierung dieses Mausmodells, Atxn2-CAG100-KIN, zeigte, dass es die bei SCA2-Patienten beobachtete Symptomatik reproduziert. Diese Tiere zeigten im Laufe der Zeit einen signifikanten Gewichtsverlust, eine Hirnatrophie und motorische Defizite (Sen et al 2019). Darüber hinaus konnten wir mit diesem Modell den Effekt der ATXN2-Poly (Q) -Expansionen außerhalb des Kleinhirns untersuchen, da die Expansion in den *Atxn2*-Mauslocus eingefügt wurde.

Darüber hinaus wurden ATXN2-Zwischenexpansionen mit der Pathologie der Amyotrophen Lateralsklerose (ALS) als Risikofaktor in Verbindung gebracht (Elden et al 2010). ALS ist eine tödliche neurodegenerative Erkrankung, bei der die Motoneuronen im Gehirn und Rückenmark entartet sind. Ein Kennzeichen von ALS ist das Vorhandensein von TDP43-positiven Einschlüssen in Neuronen

und Glia (Neumann et al 2006). Es sind nur wenige Veröffentlichungen verfügbar, die sich mit der Pathologie von SCA2-Patienten im Rückenmark befassen (Estrada et al 1999, Rub et al 2007, Velazquez-Perez et al 2018, Velazquez-Perez et al 2017). Daher ist es von Interesse, die Pathologie dieses Gewebes in der Atxn2-CAG100-KIN-Linie und die Beziehung zwischen ATXN2 und TDP43 weiter zu untersuchen (Becker et al 2017).

Die Charakterisierung der Pathologie des Rückenmarks mittels Proteinquantifizierung, Transkriptquantifizierung und Immunhistochemie zeigte eine bevorzugte Beeinflussung von RNA-bindenden Proteinen (RBP) im Rückenmark anstelle nicht aber im Kleinhirn. Die ALS-verknüpften Faktoren TDP43 und TIA1 zeigten eine zeitabhängige Co-Aggregation mit ATXN2 in Rückenmarksschnitten zusammen mit einem Anstieg der CASP3-Spiegel. Es wurden Berichte veröffentlicht, die ATXN2-Zwischenexpansionen bei ALS implizieren und die Aggregation von TDP43 über eine verstärkte CASP3-Aktivierung und die Produktion pathologischer C-terminaler Fragmente aus TDP43 beeinflussen (Elden et al 2010, Hart & Gitler 2012). Daher kann dieses Mausmodell dazu beitragen, neue Therapien zu entwickeln und deren Wirkung in unterschiedlich betroffenen Bereichen zu bewerten.

Die Erzeugung eines Transkriptomdatensatzes aus Atxn2-CAG100-KIN-Rückenmarksproben im Endstadium der Erkrankung dieses Mausmodells zeigte eine starke Hochregulation der RNA-Toxizitäts-, Immun- und Lysosomen-implizierten Faktoren. Diese Daten wiesen auf eine pathologische Reaktivierung des synaptischen Schnitts und der Phagozytose in Mikroglia hin. Darüber hinaus wurden zwei Entzündungsfaktoren, die an ALS beteiligt sind und in hohem Maße durch Mikroglia exprimiert werden, als hochreguliert befunden: Ripk1 und Grn. Daher scheint Mikroglia mit der im Atxn2-CAG100-KIN-Mausmodell beobachteten Pathologie des Rückenmarks in Zusammenhang zu stehen.

Es wurde gezeigt, dass TDP43-Spiegel die phagozytische Aktivität von Mikroglia modulieren (Paolicelli et al 2017). Daher wollten wir die Expression von ATXN2 in diesem Zelltyp bestimmen und deren Affektion weiter untersuchen. Nach

Immunzytochemie zeigen wir das Vorhandensein von ATXN2 in der Maus-Mikroglia-Zelllinie BV2 und in Mikroglia-Primärzellkulturen, die von Atxn2-CAG100-KIN- und WT-Tieren stammen. Basierend auf einer immunhistochemischen Analyse zeigen wir auch einen Anstieg der ATXN2-Expression in Mikroglia aus Atxn2-CAG100-KIN-Rückenmarksschnitten im Alter von 6 Monaten im Vergleich zu geschlechts- und altersangepassten WT. Darüber hinaus wurde eine zeitabhängige ATXN2-Aggregation in 14 Monate alten Rückenmarksmikroglia von Atxn2-CAG100-KIN-Tieren beobachtet. Dies könnte durch eine erhöhte Trümmerphagozytose durch Mikroglia, eine Akkumulation von endogenem ATXN2-Protein oder beides verursacht werden, was zu einer veränderten Funktion dieses Zelltyps führt.

Die Charakterisierung der Mikroglia-Reaktion und die potenziell schädlichen Wirkungen des expandierten ATXN2 in diesem Zelltyp könnten zu Therapien führen, mit denen der Lebensstandard der Patienten verbessert oder der Beginn der Symptome verzögert werden kann. Beispielsweise wurde gezeigt, dass die periphere Verabreichung eines entgifteten TLR4-Liganden die Mikroglia-Phagozytose ohne übermäßige Entzündungsreaktion stimuliert und kognitive Defizite in einem Mausmodell der Alzheimer-Krankheit verbessert (Michaud et al 2013).

Der zweite Teil dieser Arbeit befasste sich mit einer autosomal rezessiven Form der Kleinhirnataxie, Ataxia Telangiectasia (A-T), mit Beginn während der Kindheit. A-T-Patienten zeigen eine schwere Atrophie des Kleinhirns, die sich als Ataxie manifestiert, wenn das Kind zu laufen beginnt (Chun & Gatti 2004). Andere Bewegungssymptome sind Hypotonie, Dystonie, Zittern und Parkinson (Nissenkorn & Ben-Zeev 2015). Darüber hinaus sind A-T-Patienten anfällig für Malignome, Immundefekte, Überempfindlichkeit gegen Strahlentherapie und endokrine Anomalien (Nissenkorn et al 2016). Der Blutspiegel von Alpha-Fetoprotein (AFP) wird verwendet, um das Fortschreiten der Krankheit zu verfolgen (Rothblum-Oviatt et al 2016).

Die genetische Ursache von A-T sind Funktionsverlustmutationen im Ataxia Telangiectasia Mutated Gen (ATM). ATM ist eine Serin / Threonin-Kinase, die an der DNA-Schadensantwort und dem oxidativen Stress beteiligt ist. Darüber hinaus wurde ATM über den mTOR-Signalweg (mammalian target of rapamycin) in die Insulinresistenz und Autophagie einbezogen (Alexander et al 2010, Zhang et al 2015). In jüngerer Zeit wurde ATM in die synaptische Funktion einbezogen, die spezifisch mit erregenden Vesikeln assoziiert ist (Cheng et al 2018).

In Zusammenarbeit mit Proteomdaten aus der Liquor cerebrospinalis von 12 A-T-Patienten und 12 gesunden Kontrollpersonen sollten neue Biomarker definiert werden, mit denen die Neurodegeneration in der extrazellulären Flüssigkeit verfolgt werden kann. Unter den dysregulierten Faktoren, die im Liquor des A-T-Patienten nachgewiesen wurden, waren zuvor zehn Faktoren an der Pathogenese der Ataxie beteiligt. Auf der Suche nach neuen potenziellen Biomarkern haben wir Reelin (RELN) identifiziert, ein sekretiertes extrazelluläres Glykoprotein, das die Apolipoproteinrezeptoren APOER2 und VLDLR aktiviert. Die Herunterregulierung der RELN-Proteinspiegel zeigte eine starke Korrelation mit den Ataxie-Scores. Darüber hinaus wurde festgestellt, dass das Apolipoprotein B und J hochreguliert sind, was die Implikation der RELN-Signalübertragung in diesem Proteomprofil unterstützt.

Validierungsversuche unter Verwendung von *Atm*-Knock-down (*Atm*^{-/-})-Maus-Kleinhirnproben bestätigten Reelin-Signalweg- und ApoB-Veränderungen, bevor in diesem Mausmodell ein Verlust von Purkinje-Neuronen (PN) oder eine Verhaltensänderung festgestellt werden kann (Barlow et al 1999, Barlow et al 2000, Chiesa et al 2000). Es wurden keine Veränderungen auf der Transkriptebene für die DNA-Schadensantwort, den oxidativen Stress, die Neuroinflammation oder die Zelladhäsion festgestellt, was darauf hindeutet, dass Veränderungen in der Signalgebung und der Erregbarkeit frühe Ereignisse in der Pathologie sind. Insgesamt stützen unsere Ergebnisse ein Szenario, in dem das Defizit an vesikelassoziiertem ATM die Sekretion von ApoC, Reelin und Glutamat verändert. Als extrazelluläre Faktoren können Apolipoproteine und ihre Ladung

wie Vitamin E für neuroprotektive Interventionen nützlich sein (Canet-Pons et al 2018).

Die Lebensdauer von *Atm*^{-/-} Tieren beträgt aufgrund von malignen Thymuslymphomen zwischen 4 und 6 Monaten, bevor ataxische und andere neurologische Symptome auftreten (Barlow et al 1996). Dank einer Knochenmarktransplantation (BMT) konnte die Lebenserwartung dieser Tiere auf bis zu 12 Monate verlängert werden, wenn ataktisches Verhalten und PN-Verlust festgestellt werden konnten (Pietzner et al 2013). Um einen tieferen Einblick in Pathomechanismen zu erhalten, die mit Ataxie und anderen neurologischen Symptomen von A-T-Patienten zusammenhängen, haben wir einen neuen Transkriptomik-Datensatz aus 12 Monate alten *Atm*^{-/-} Proben des Kleinhirns erstellt.

Die aus dem Transkriptom und weiteren Validierungsexperimenten mittels quantitativer PCR (Q-PCR) erhaltenen Daten zeigten die Herunterregulierung von sechs Faktoren, die zuvor an der Pathogenese von Ataxien beteiligt waren: *Cadps2*, *Car8*, *Fgf14*, *Stxbp5l*, *Syne1* und *Mtcl1*. Unter diesen wurde festgestellt, dass nur *Mtcl1* (Microtubule Crosslinking Factor 1) ein frühes Ereignis ist, das sowohl in ~2 Monate alten als auch in 12 Monate alten Kleinhirnproben herunterreguliert wird. Es wurde gezeigt, dass eine Unterbrechung des *Mtcl*-Gens bei Mäusen eine abnormale Koordination und PN-Degeneration verursacht (Satake et al 2017). Darüber hinaus wurden *Slc1a6* und *Slc17a7* in beiden Altersgruppen häufig herunterreguliert, was auf Glutamatdefizite hindeutet. *Slc17a7* codiert den vesikulären Glutamattransporter 1, VGLUT1, der durch parallele Fasern im Kleinhirn exprimiert wird. ATM wurde mit exzitatorischen neuronalen Vesikeln, VGLUT1-positiven Vesikeln, in Verbindung gebracht (Cheng et al 2018). Das Fehlen von ATM kann das Gleichgewicht zwischen Erregung und Hemmung beeinträchtigen und zu einer Funktionsstörung des neuronalen Netzes führen (Bateup et al 2013). Wenn dysregulierte VGLUT1/*Slc17a7*-Spiegel im Blut des Patienten nachgewiesen werden können, könnte dies zu einem wichtigen Biomarker für die Degeneration des Kleinhirns

werden und die Informationen aus den Alpha-Fetoprotein-Spiegeln ergänzen (Rothblum-Oviatt et al 2016).

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8.3 Abbreviations

4E-BP	Eukaryotic initiation factor 4E-binding protein
A-T	Ataxia telangiectasia
AA/BA	Acrylamide/Bisacrylamide
ACTB	Actin beta
AD	Alzheimer's disease
ADCA	Autosomal dominant cerebellar ataxia
AFP	Alpha-fetoprotein

AHNAK	AHNAK Nucleoprotein/ Desmoyokin
AHNAK2	AHNAK Nucleoprotein 2/ PLD4
AKT	Protein kinase B
ALS	Amyotrophic lateral sclerosis
AMPK	AMP-activated protein kinase
AR	Androgen receptor
ARCA	Autosomal recessive cerebellar ataxia
ATBF1	AT Motif-Binding Factor 1
ATM	Ataxia telangiectasia mutated
ATR	Ataxia-telangiectasia and Rad3-related
ATX2	Ataxin2 ortholog in <i>C. elegans</i>
ATXN2	Ataxin2
BAC	Bacterial artificial chromosome
bp	Base pare
BSA	Albumin fraction V
BV2	Murine microglia cell line
C9ORF72	Chromosome 9 Open Reading Frame 72
CALB1	Calbindin
CASP3	Caspase3
CB	Cerebellum
cDNA	coding DNA
CF	Climbing fibers
cm	centimeter
CNS	Central nervous system
dATP	Deoxyadenosine triphosphate
dATX2	Ataxin2 ortholog in <i>D. melanogaster</i>
dCTP	Deoxycytidine triphosphate
DDR	DNA damage response
DDX6	DEAD/H-box RNA helicase
dGTP	Deoxyguanosine triphosphate
DNA	Deoxyribonucleic acid
DNA-PK	DNA-dependent protein kinase catalytic subunit
dNTP	Nucleoside triphosphate
DPBS	Dulbecco's phosphate-buffered saline
dPER	PERIOD
DRPLA	Denatorubral-pallidoluyasian atrophy
DSBs	DNA double-strand breaks
dTTP	Deoxythymidine triphosphate
E/I	Excitatory/Inhibitory
EDTA	Ethylenediamine tetraacetic acid
eIF-4E	Eukaryotic initiation factor 4E
ETC/OXPHOS system	Electron transport chain/oxidative phosphorylation system
EtOH	Ethanol
FAT	FRAP-ATM-TRRAP domain
FATC	FAT C-terminal domain

FC	Fold change
FOXO3a	Forkhead box O3
FRDA	Friedrich ataxia
FRT	Flippase recognition target
FTD	Frontotemporal dementia
FTLD	Frontotemporal lobar dementia
FUS	Fus in sarcoma
FXN	Frataxin
GC	Granule cells
GFAP	Glial fibrillary acidic protein
GLD1	Female germline-specific tumor suppressor gld-1, <i>C. elegans</i>
GLUT4	Glucose transporter 4
GN	Granule neurons
GO	Gene ontology
HD	Huntington's disease
HeLA	Immortal cell line derived from cervical cancer cells taken from Henrietta Lacks
HIF-1 α	Hypoxia-inducible factor 1-alpha
HIV	Human immunodeficiency viruses
HR	Homologous recombination
HRE	Hexanucleotide expanded repeat
hRNP	Heterogeneous nuclear ribonucleoprotein
HTT	Huntingtin
IBA1	Ionized calcium-binding adapter molecule 1/ Allograft inflammatory factor 1
IO	Inferior olive
IR	Ionizing radiation
KD	Knock-down
KD	Kinase domain
kDA	Kilo Dalton
KEGG	Kyoto Encyclopedia of Genes and Genomes
KH-domain	K Homology domain
KIN	Knock-in
KO	Knock-out
Lipo	Lipofectamine
loxP	Locus of X-over P1
LPS	Lipopolysaccharide
LSm	Like-Sm
LSm-AD	LSm-associated domain
LTP	Long term potentiation
M	Molar
<i>Mdc1</i>	Mediator of DNA damage checkpoint 1
MEF	Mouse embryonic fibroblasts
MEX3	Muscle EXcess, <i>C. elegans</i>
mg	Mili gram
min	Minute
mL	Mili liter

mM	mili molar
MnSOD	Mitochondria superoxide dismutase
mo	Month
MRN	Mre11, Rad50, Nbs1 complex
mRNA	Messenger RNA
mRNP	Messenger ribonucleoprotein
mTOR	Mammalian target of rapamycin
mTORC1	mTOR complex 1
mTORC2	mTOR complex 2
NaArs	Sodium Arsenite
NeuN	Hexaribonucleotide Binding Protein 3
NF-H	High molecular weight NF
NF-L	Low molecular weight NF
NF-M	Medium molecular weight NF
NFs	Neurofilaments
ng	Nano gram
NHEJ	Non-homologous end joining
NMDR	N-methyl-D-aspartate receptor
°C	Celsius
OTC	Organotypic cell cultures
P-bodies/PBs	Processing bodies
P0	Postnatal day 0
P3	Postnatal day 3
PABP1	Poly(A)-binding protein
PAM2	PABP-interacting motif
PAR-CLIP	Photoactivatable-ribonucleoside-enhanced crosslinking and Immunoprecipitation
PARK	Parkin
PASK	PAS kinase
PBP1	Pab1-binding protein 1
PBS	Phosphate-buffered saline
PCBP	Poly(C)-binding protein
PCBP1	Poly(C) Binding Protein 1
PCBP2	Poly (C) Binding Protein 2
Pcp2	Purkinje cell protein 2
PCR	Polymerase chain reaction
PD	Parkinson's disease
PDGFRB	Platelet-derived growth factor receptor beta
PEX5	Peroxisomal Biogenesis Factor 5
PFA	Paraformaldehyde
PGRN	Progranulin
PI3	Phosphatidylinositol 3
PI3Ks	PI3 kinases
PIKK	PI3K-like protein kinase
PINK1	PTEN Induced Kinase 1
PN	Purkinje neurons

poly(A)	Polyadenylated
polyQ	Polyglutamine
PSK1	PASK ortholog in yeast
Q	Glutamine
Q-PCR	Quantitative polymerase chain reaction
RBD	RNA binding domain
RBP	RNA binding proteins
REDD1	Regulated in development and DNA-damage response 1
RIPK1	Receptor-interacting serine/threonine-protein kinase 1
RNA	Ribonucleic acid
RNP	Ribonucleoprotein complex
ROS	Reactive oxygen species
rpm	Revolution per minute
RPS6	Ribosomal protein 6
RRM	RNA recognition motif
RT	Room temperature
RT-PCR	Reverse transcription polymerase chain reaction
SBMA	Spinal and bulbar muscular atrophy
SCA	Spinocerebellar ataxia
SCA1	Spinocerebellar ataxia type 1
SCA2	Spinocerebellar ataxia type 2
SCA3	Spinocerebellar ataxia type 3
SDS-PAGE	Sodium dodecyl sulphate-polyacrylamide gel electrophoresis
sec	Second
SG	Stress granules
SH-SY5Y	Human neuroblastoma derived cell line
shRNA	Short hairpin RNA
SMG1	Suppressor of morphogenesis in genitalia 1
SNF1	Carbon carabolite-derepressing protein kinase, <i>S. Cerevisiae</i>
SOD1	Superoxide dismutase
Sp Cord	Spinal Cord
SQSTM1/p62	Sequestrosome 1
ss-cDNA	Single stranded cDNA
STRING	Search tool for the retrieval of interacting genes/proteins
TAC	Transcriptome Analysis Console
TDP43	TAR DNA-binding protein 43
TIA1	T-cell-restricted intracellular antigen-1
TNF	Tumour necrosis factor
TREM2	Triggering receptor expressed on myeloid cells 2
TRRAP	Transformation/transcription domain-associated protein
TSC2	Tuberous sclerosis2
TYROBP	TYRO protein tyrosine kinase-binding protein
UTR	Untranslated region
UVR	Ultraviolet radiation
V	Volts
VAMP2	Synaptobrevin

VGAT	Vesicular GABA transporter
VGLUT1	Vesicular glutamate transporter 1
WB	Western blot
WT	Wild type
xG	Times gravity (unit of relative centrifugal force, RCF)
μg	Micro gram
μL	Micro liter
μm	Micro meter

9 Acknowledgments

10 Publications

Sen NE*, [Canet-Pons J](#)*, Halbach MV*, Arsovic A, Pilatus U, Chae WH, Kaya ZE, Seidel K, Rollmann E, Mittelbronn M, Meierhofer D, De Zeeuw CI, Bosman LWJ, Gispert S, Auburger G (2019). **Generation of an Atxn2-CAG100 knock-in mouse reveals N-acetylaspartate production deficit due to early Nat8l dysregulation.** *Neurobiol Dis* 132: 104559.

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