

A rat model of oligomeric forms of beta-amyloid (A β) peptide: neuronal loss, synaptic alteration, astrogliosis, and calcium-binding proteins activation in vivo

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SUMMARY

Oligomers of Beta-amyloid (A β) peptide are presumed to cause synaptic and cognitive dysfunction in Alzheimer's disease (AD). However, their contribution to other pathological features of AD remains unclear. To address the latter, we applied microinjections of A β 1-42 oligomers into the retrosplenial cortex of the rat. We observed that A β 1-42 induced a greater reduction in neuronal density as compared with that seen at control (A β 42-1) injections. Oligomers of A β 1-42 peptide caused synaptic alterations, as evidenced by the decrease in the presynaptic marker synaptophysin and the increase in chromogranin A. We also detected a marked interaction between GFAP-, and A β -immunoreactive material in a time-dependent manner. To address the possible mechanisms involved in astrocyte activation, we analyzed the interaction between the calcium-dependent protease, calpain-1, and the calcium-binding protein, S100B, and astrogliosis in response to A β toxicity. Calpain-1 activation

was studied by immunoblotting. Three immunopositive protein bands (80kDa, 76kDa, and 18kDa) were detected. Densitometry analyses revealed a significant increase in calpain-1 at 76kDa and at position 18kDa in A β 1-42-treated animals as compared with the corresponding bands in control animals. Confocal analysis showed codistribution of A β -, and calpain 1-immunoreactivities in cortical cells, and in reactive astrocytes surrounding the injection of A β , and both cortical and leptomeningeal blood vessels. A colocalization of GFAP and S100B proteins was observed in astrocytes that surrounded the A β injection, and also in reactive astrocytes in close association with blood vessels. In conclusion, our results suggest that calpain-1 and S100B might play a critical role in astrogliosis in response to A β toxicity.

Key words: Alzheimer's disease – Retrosplenial cortex – Astrocytosis – S100B – Calpain-1

INTRODUCTION

Alzheimer's disease (AD) is a neurodegenerative disease characterized by a progressive memory loss and cognitive decline (Selkoe, 2002H). The pathological hallmarks of AD are extracellular plaques containing amyloid- β ($A\beta$), dystrophic neurites, activated microglia, reactive astrocytes and synapse loss (Selkoe and Schenk, 2003). *In vitro* and *in vivo* studies have supported the amyloid cascade hypothesis, in which the seeding of insoluble $A\beta_{1-42}$ is a causative factor in the pathogenesis of AD (Hardy and Selkoe, 2002H). However, amyloid plaques do not always correlate with neurodegeneration and cognitive decline (Mucke et al 2000H).

There are clear indications that increased levels of soluble $A\beta$ is the primary cause of neuronal pathology in AD (Haass and Selkoe, 2007; Klein, 2002; Walsh and Selkoe, 2007). *In vivo*, small stable oligomers of $A\beta_{1-42}$ have been isolated from the brain of AD patients (Gong et al., 2003H), and the levels of soluble $A\beta$ are well correlated with synaptic dysfunction (Kokubo et al., 2005; Lacor et al., 2007, Selkoe, 2008; Walsh et al., 2002), and cognitive deficits (Cleary et al 2005; Lesné et al., 2006) in the AD brain. Recently, the oligomeric and protofibrillar forms of $A\beta$ have been the subject of numerous studies employing a variety of experimental approaches (Hernández et al., 2010; Oddo et al., 2006; Perez et al., 2010, Tomiyama et al., 2010). In addition, there is extensive evidence that exogenous application of synthetic $A\beta$ peptide or oligomeric aggregates leads to a rapid and aberrant regulation of Ca^{2+} homeostasis, resulting in structural and functional disruption of neuronal networks (Berridge, 2010; Demuro et al., 2005H; Ferreira et al., 2008; Resende et al., 2007; 2008). Calcium dysregulation, in turn, increases calpain activation, as seen in post mortem human AD patients' brains (Nixon et al., 1994; Saito et al., 1993; Vosler et al., 2009; Wu et al., 2007). Alterations in calpain activation associated with calcium homeostasis have also been proposed to play an important role in the degeneration of neurons (Adamec et al., 2002; Lebart and Benyamin, 2006; Nixon, 2003H), as well as in reactive astrocytes (Gray et al., 2006; Lee et al., 2000).

Accumulating evidence also indicates that $A\beta$ induces the glial-mediated inflammatory

response that contributes significantly to cognitive decline and oxidative stress-dependent neurodegeneration (Akiyama et al., 2000; Griffin et al., 1998; McGeer and McGeer, 2001; Meda et al., 2001). Past research has focused on $A\beta$ plaque-associated activated microglia because of their well documented roles in exacerbating or mitigating AD pathology (Akiyama, 2000; Town et al., 2005). However, recent evidence suggests that activated astrocytes may play a dichotomous role in several brain pathologies, including AD (Domenici et al., 2002; Johnstone et al., 1999; Malchiodi-Albedi et al., 2001; Rodriguez et al., 2009; Simpson et al., 2010). Reactive astrocytes are normally characterized by an overexpression of the glial fibrillary acidic protein (GFAP), the major component of the astrocytic cytoskeleton (Reymond et al., 1996; Ridet et al., 1997). Importantly, astrocyte activation, seen in an increase in the expression of GFAP, has been observed after exogenous application of oligomers of $A\beta$ peptide (Perez et al., 2010), and proteomic analyses have revealed a complex GFAP pattern, with different patterns of modification and degradation (Korolainen et al., 2005; Perez et al., 2010; Riederer et al., 2009). Little is known, however, about the precise mechanism(s) by which the expression of GFAP is increased in response to exogenous application of oligomers of $A\beta$ peptide.

Based on our previous results (Pérez et al., 2010), together with increasing evidence supporting the functional importance of calcium (Ca^{2+})-mediated astrocyte activation (Araque et al., 2001; Mattson and Chan, 2003; Takuma et al., 2004) and the fact that the Ca^{2+} -binding protein, S100B, and the Ca^{2+} -dependent protease, calpain-1, are thought to play a pivotal role in reactive astrocytes (Donato, 2001; Gray et al., 2006; Lee y cols., 2000), we draw this study to determine, in addition to the neuronal loss and the synaptic alterations in the early stages of $A\beta$ toxicity, the expression of calpain-1 and S100B proteins in reactive astrocytes in response to microinjections of $A\beta_{1-42}$ oligomers into the retrosplenial cortex of the posterior cingulate gyrus, a key brain region intimately involved in learning and memory processes (Albasser et al., 2007; Lukoyanov and Lukoyanova, 2006; Nestor et al., 2003; Vann and Aggleton, 2002). In order to analyze further the specificity of $A\beta_{1-42}$ peptide, the reversible form

of A β 1-42 (A β 42-1 peptide) was used as a control. This study should provide insight into the discrete and perhaps early mechanisms through which astrocytes are stimulated to acquire a reactive phenotype in response to A β peptide.

MATERIALS AND METHODS

Experimental animals and anaesthesia

Female Wistar rats (n = 64; 250 to 300g) were used. They were kept under standard laboratory conditions (20°C ambient temperature, 12 h light/dark cycle, tap water and regular rat chow *ad libitum*). All possible efforts were made to minimize animal suffering and to reduce the number of animals used. All animals were anaesthetised with equitesine (0,33ml/100g, injected intraperitoneally) for the surgical procedure (injection of either A β 1-42 peptide or its reverse sequence A β 42-1). Prior to perfusion with fixative, all animals were re-anaesthetized in the same manner, but with up to double the dose used for the surgical procedure. In each case the animals were housed and handled according to Spanish legislation and the guidelines approved by the Animal Care Committee of the University of Valladolid, which comply with, or are even more stringent than Spanish Directive 1201/2005 and European Directive 86/609.

Preparation of A β oligomers

A β 1-42 oligomers were prepared as reported previously (Klein, 2002), following the protocol described by Perez et al. (2010). In brief, A β 1-42 (Bachem) was initially dissolved to 1mM in hexafluoroisopropanol and separated into aliquots in sterile microcentrifuge tubes. Hexafluoroisopropanol was removed under vacuum in a speed vac., and the peptide film was stored desiccated at -20°C. For the aggregation protocol, the peptide was first resuspended in dry dimethyl sulfoxide at a concentration of 5 mM and then, for the preparation of oligomers, Ham's F-12 was added to bring the peptide to a final concentration of 100 μ M; this was incubated at 4°C for 24 h. The preparation was then centrifuged at 14,000g for 10 min at 4°C to remove insoluble aggregates (protofibrils and fibrils) and the supernatants containing soluble A β 1-42 oligomers were transferred to clean tubes and stored at 4°C. A β 42-1 peptide (Bachem) was prepared following the protocol

described above for preparation of A β 1-42 oligomers.

Western blot analysis of samples of A β 1-42 and A β 42-1 peptides

Western blotting was performed as described earlier (Perez et al., 2010). In brief, a standard 15% PAGE-SDS was prepared and 5 μ l samples of either A β 1-42 oligomers or A β 42-1 at a 100 μ M concentration were incubated with 1X loading buffer. The samples were loaded in the gel without boiling, after which the gel was run at constant amperage of 40 mA and transferred to nitrocellulose. The membranes were blocked for 1h in a solution of 5% nonfat-dry milk in TBS-T, and then incubated with either 6E10 (1:800), a mouse monoclonal A β antibody to residues 1-17 (Sigma), or 4G8 (1:800), a mouse monoclonal A β antibody to residues 17-24 (Sigma). After incubation with the primary antibody, the membranes were washed in TBS-T and then incubated with HRP-conjugated secondary antibodies. The blots were washed again, followed by detection with an enhanced chemiluminescence (ECL) kit (GE Healthcare) and exposed to films. Molecular masses were estimated by Rainbow molecular weight markers (Bio-Rad).

Injection of either A β 1-42 oligomers or A β 42-1 sequence peptide

The anaesthetized animals (n = 64) were placed in a stereotaxic frame. A hole was made in the parietal bone with a dental drill and the dura was opened with a fine hypodermic needle. In one group of animals (n = 36), under equitesine anaesthesia, a single unilateral microinjection of A β 1-42 oligomers (BACHEM, at a concentration of 2 μ g) was performed in the left retrosplenial cortex, using stereotaxic coordinates derived from the atlas of Paxinos and Watson (1986). Oligomeric species of synthetic A β 1-42 peptide were prepared as described above, and reported previously by Perez et al. (2010). The dose of the A β protein was selected on the basis of our previous studies (Arévalo-Serrano et al., 2008; Gonzalez et al., 2008). All microinjections were administered using a 10 μ l Hamilton syringe with a 26-gauge stainless steel needle, which was slowly lowered into place. The needle was left in place for 3-5 min before the injection was started, after which the fragments were injected slowly at a rate of 0.2 μ l/min. The needle was left in place

for an additional 3-5 min before being slowly withdrawn. As a control, in a second group of animals ($n = 28$), also under equitiesine anaesthesia and using a different microsyringe, a single unilateral microinjection of A β 42-1 peptide (BACHEM, 2 μ g) was administered into the corresponding regions of the left retrosplenial cortex. After the injection, the scalp was sutured and the animals were allowed to recover from the anaesthetic.

Immunocytochemical and immunofluorescence studies

Fixation

Following post-injection survival periods of 24h, 72h, 7d, and 14d, one group of animals [($n = 32$), A β 1-42 treated animals, $n = 20$, 5 animals/each time period; A β 42-1/control group, $n = 12$, 3 animals/each time period] were re-anaesthetized and the brain tissue was fixed by intracardiac perfusion of 60 ml of 0.9% saline at 20°C containing heparin (1.000 IU) to flush blood from the vascular system, followed by ca 350-400 ml of fixative solution containing 4% paraformaldehyde and 0.1% glutaraldehyde in 0.1M phosphate buffer (PB) at pH 7.2 (also perfused at 20°C).

Tissue preparation, histochemical, and immunohistochemical procedures

Immediately after perfusion, the brain was removed, trimmed, sectioned in the coronal plane at 40 μ m using a freezing microtome, and collected serially as several series of adjacent sections. All sections were stored under similar conditions at 4°C (between 1 and 10 days) before they were processed for histochemical and immunocytochemical methods. In one group of A β 1-42 injected animals ($n = 20$) and in the control animals ($n = 12$) a series of adjacent sections, which contained the full antero-posterior extent of the injection site, were mounted on gelatinized slides and stained with 0.1% cresyl violet to identify the injection site, the area of toxicity, and to visualize neuronal nuclei and perikarya. Another series of sections that also contained the full antero-posterior extent of the injection site was processed for single antigen localization of the A β peptide (Method 1). A further series of adjacent sections, which contained the full antero-posterior extent of the injection site as well as the full antero-posterior extent of the hippocampus, temporal, frontal, and entorhinal cortices, were processed for the sequential

double-immunohistochemical or double-immunofluorescence localization of A β and glial fibrillary acid protein (GFAP), A β and synaptophysin, A β and chromogranin A, A β and calpain-1, GFAP and calpain-1, and GFAP and S100B (Method 2).

Method 1: Single-labelling immunohistochemistry (A β)

Immunostaining was performed on free-floating sections. Sections processed for the immunohistochemical localization of A β peptide were first immersed for 1 h in 10% normal goat serum (NGS) in 0.01M phosphate-buffered saline (PBS) containing 0.3% Triton X-100 and 0.1 M lysine. After rinsing in PBS, endogenous peroxidase activity was blocked with 1% hydrogen peroxide (H₂O₂) in PBS for 30 min. The sections were then incubated in a solution containing a mouse monoclonal antibody against A β (CLONE: 6E10, 1:1000 dilution; Sigma-Aldrich) for 18-24h at 4°C. After incubation in the primary antibody, the sections were washed in 1% NGS and then incubated in biotinylated goat anti-mouse IgG (Vector, 1:200 in PBS with 1% NGS) and immersed in an avidin: biotin-HRP complex (Vector, 1:100 dilution) for 60 min. The immunoreaction product was visualized using 0.005% DAB and 0.01% H₂O₂ in PB. The sections were rinsed through several changes of PB, mounted on gelatinized microscope slides, air-dried, dehydrated, covered with Permount, and examined and photographed under bright-field illumination.

As a control, some sections were incubated as described above but without the addition of primary antibody or after replacing the primary antibody with normal goat serum. There was a complete absence of A β -immunoreactivity in such control sections.

Single-labelling immunofluorescence (Neuronal nuclei, NeuN)

Sections processed for the immunohistochemical localization of NeuN protein were first immersed for 1 h in 10% normal goat serum (NGS) in 0.01M phosphate-buffered saline (PBS) containing 0.3% Triton X-100 and 0.1 M lysine. After a rinse in PBS, endogenous peroxidase activity was blocked with 1% hydrogen peroxide (H₂O₂) in PBS for 30 min. The sections were then incubated in a solution containing a mouse anti-NeuN monoclonal antibody (1:100 dilution;

CHEMICON, Int) for 18-24h at 4°C. After incubation in the primary antibody, the sections were washed in 1% NGS and then incubated in biotinylated goat anti-mouse IgG (Vector, 1:200 in PBS with 1% NGS). Sections were then washed in PBS and incubated using fluorescein (FITC)-conjugated avidin D (Vector, 1:100 in PBS).

Method 2: Double-labelling immunohistochemistry (e.g., A β /calpain-1, GFAP/calpain-1, A β /synaptophysin, A β /chromogranin A)

The sections processed for the sequential double-immunohistochemical localization of A β /chromogranin A, A β /calpain-1, and GFAP/calpain-1 were first immersed for 1h in 10% normal goat serum (NGS) in PBS containing 0.3% Triton X-100 and 0.1 M lysine. After a rinse in PBS, endogenous peroxidase activity was blocked with 1% H₂O₂ in PBS for 30 min, after which the sections were rinsed in PBS again. Sections processed for the immunohistochemical localization of A β and GFAP were then incubated in a solution containing mouse monoclonal antibodies against A β (CLONE: 6E10, 1:1000 dilution; Sigma-Aldrich) or against GFAP (1:3500 dilution, Sigma-Aldrich) for 18-24h at 4°C. After incubation in the primary antibody, the sections were washed in 1% NGS and then incubated in biotinylated goat anti-mouse IgG (1:200 in PBS with 1% NGS). The sections were then washed in PBS and immersed in avidin-biotin-HRP complex (1:100 dilution) for 60 min. The immunoreaction product was visualized using 0.005% DAB and 0.01% H₂O₂ in PB. After immunostaining, the sections were rinsed in PBS over a period of 60 min. The sections were then incubated with another primary antibody, against the second antigen, using goat polyclonal antibodies against chromogranin A (1: 100 dilution; Santa Cruz Biotechnology, Inc), or calpain-1 (1:200 dilution; Santa Cruz Biotechnology, Inc.) for 18-24h at 4°C. After incubation with the primary antibody, the sections were washed in 1% normal rabbit serum (NRS) and then incubated in biotinylated rabbit anti-goat IgG (Vector, 1: 200 dilution in PBS with 1% NRS). The second antigen was then visualized with BDHC (Levey et al., 1986). This chromogen produced a blue-dark granular reaction product. After immunostaining, all sections were then rinsed through several changes of PB, mounted on gelatinized microscope slides, air-dried, dehydrated, covered with Permount,

and examined and photographed under bright-field illumination.

As a control, some sections were processed for the two-colour co-localization procedure as described above, but without the addition of primary antibody or after replacing the primary antibody with normal serum respectively. Control sections were processed through the secondary antiserum, DAB, and BDHC steps in exactly the same way as the other sections. There was a complete absence of single- or double-labelling neurons or neuropil in such control sections.

Double-labelling immunofluorescence (e.g., A β /calpain-1, A β /GFAP, GFAP/calpain-1, A β /chromogranin A, A β /synaptophysin, GFAP/S100B)

First, the sections processed for the sequential double-immunohistochemical localization of A β /calpain-1, A β /GFAP, A β /chromogranin A, and GFAP/calpain-1 were immersed for 1h in 10% NGS in PBS containing 0.3% Triton X-100 and 0.1M lysine, while those processed for sequential double-immunohistochemical localization of A β /synaptophysin, and GFAP/S100B were immersed for 1h in 10% NRS in PBS containing 0.3% Triton X-100 and 0.1M lysine. Sections processed for the immunohistochemical localization of A β were then incubated in a solution containing a mouse monoclonal antibody against A β (CLONE: 6E10, 1:1000 dilution; Sigma-Aldrich), whereas those processed for GFAP were incubated in a solution containing mouse monoclonal antibody against GFAP (1:3500 dilution, Sigma-Aldrich) for 18-24h at 4°C, and then incubated in biotinylated goat anti-mouse IgG (Vector, 1:200 in PBS with 1%NGS) for the immunolocalization of A β /calpain-1, A β /GFAP, A β /chromogranin A, and GFAP/calpain-1, or in biotinylated rabbit-anti-mouse IgG (Vector, 1:200 in PBS with 1%NRS) for the immunolocalization of A β /synaptophysin, and GFAP/S100B. Sections were then washed in PBS and incubated using either rhodamine-conjugated avidin D (Vector, 1:100 in PBS) or fluorescein (FITC)-conjugated avidin D (Vector, 1:100 in PBS). The sections were rinsed in PBS for more than 60 min and then incubated with another primary antibody, against the second antigen, using either goat polyclonal antibodies against calpain-1 (1:200 dilution, Santa Cruz Biotechnology, Inc), chromogranin A

(1:100, Santa Cruz, Biotechnology, Inc), and GFAP (1:200, Santa Cruz, Biotechnology, Inc), or rabbit polyclonal antibodies against synaptophysin (1:200, Santa Cruz Biotechnology, Inc), and S100B (1:50, abcam) for 18-24h at 4°C. After incubation in the primary antibody against the second antigen, the sections were washed either in 1% NRS (for A β , chromogranin A, or calpain-1) or in 1% NGS (for synaptophysin or GFAP) and then incubated in biotinylated rabbit anti-goat IgG (Vector, 1:200 in PBS with 1% NRS) for the immunolocalization of A β /GFAP, A β /chromogranin A, A β /calpain-1, and GFAP/calpain-1, or in biotinylated goat anti-rabbit IgG (Vector, 1:200 in PBS with 1% NGS) for the immunolocalization of A β /synaptophysin, and GFAP/S100B. The second antigen was visualized using either fluorescein (FITC)-conjugated avidin D (Vector, 1:100 in PBS) or rhodamine-conjugated avidin D (Vector, 1:100 in PBS).

As control, some sections were processed for the two-colour co-localization procedure as described above, but without the addition of primary antibody or after replacing the primary antibody with the respective normal serum. Control sections were processed through the secondary antiserum, rhodamine and FITC steps, in exactly the same way as the other sections.

Analysis of the immunohistochemical material

In each series of sections stained immunocytochemically with antibodies against A β , or double-labelled for A β /GFAP, A β /calpain-1, A β /chromogranin-A, A β /synaptophysin, GFAP/calpain-1, and GFAP/S100B, all sections through the full rostro-caudal extent of the injection site, the rostro-caudal extent of cerebral cortex, and the full rostro-caudal extent of the hippocampus (each separated by approximately 280 μ m) were examined systematically. Immunocytochemically-processed material was viewed under bright-field illumination with an Olympus microscope (BX50). The specificity of the immunoreaction was checked by comparing sections stained either with single antiserum (A β) or double-labelled (e.g., A β /calpain-1, GFAP/calpain-1) and control material, respectively. Structures immunostained by antibodies but not visualized in the control slides were considered to be specifically immunola-

belled and here are designated as A β -immunoreactive (IR). All single-IR and all double-labelled structures were scored at 20x magnifications using an ocular grid.

The double-fluorescence-labelled sections were examined with fluorescence microscope, and imaged using a confocal laser scanning imaging system attached to a microscope (Zeiss). Sections were illuminated by light with an excitation wavelength of 488 nm (argon laser) for FITC, and 568 nm (krypton laser) for rhodamine. Single and series of optical sections were transferred separately to channel 1 and channel 2 to avoid crosstalk, and then superimposed. Green and red images were acquired simultaneously and are either presented separately (e.g., Figs. 10A, B, 11A, B), or as a superimposed image (e.g., Figs. 10C, 11C).

Terminal deoxynucleotidyl transferase-mediated by immunoperoxidase labelling (TUNEL) assay

The amount of apoptosis at the injection site of A β 1-42 peptide was determined by direct immunoperoxidase detection of digoxigenin-labelled genomic DNA in paraffin sections of fixed tissue. TUNEL assays were performed using the Oncor ApopTag peroxidase detection kit, which detects the 3'-OH region of cleaved DNA during apoptosis, and the protocol recommend by the manufacturer. Briefly, microsections were incubated with Proteinase K (20 μ g/ml) for 15 min. TUNEL reaction mixture was added, and the tissue incubated in a humidified chamber for 1h at 37°C and then washed in PBS for 5 min at room temperature. The sections were then immersed in streptavidin-HRP complex, and the immunoreaction product was visualized using 0.005% DAB and 0.01% H₂O₂ in PB. Application of streptavidin-HRP allows the identification of apoptotic nuclei (dark brown colour) by light microscopy.

Western blotting of A β peptide and calpain-1 activity in the rat brain

Small portions (around 200 mg) of frozen retrosplenial cortex of A β 1-42 treated animals (n = 16, 4 animals each time point) and control (A β 42-1) animals (n = 16, 4 animals/time point) were homogenized as described by Ramonet et al. (2004). The protein concentration was determined using the DC protein Assay kit (Bio-Rad). Homogenate volumes

with 10 μ g of total protein were loaded in 15% gel, denatured by heating for 5 min at 100°C, and then the gel was run at constant amperage of 40 mA. After electrophoresis, the proteins were transferred onto nitrocellulose membranes, which were blocked for 1 h with Tris-buffer-saline containing 0.1% Tween-20 (TBS-T, pH 7.5), and 5% non-fat dry milk. After washing in TBS-T, the nitrocellulose membranes were incubated in a solution containing mouse monoclonal antibodies against either A β (CLONE 6E10, 1:800 in TBS-T, Sigma) or calpain-1 (1:50 in TBS-T, Santa Cruz Biotechnology, Inc.) overnight at 4°C. After incubation in the primary antibody, the membranes were washed in TBS-T and then incubated in biotinylated anti-mouse IgG (Vector, 1: 5000 in TBS-T) and immersed in ExtrAvidin peroxidase complex (Sigma, 1: 4000 in TBS-T) for 60 min. The immunoreactive A β and calpain-1 proteins were detected using a chemiluminescence (ECL) kit (GE Healthcare) and were exposed to films. The films were developed, scanned, and analyzed by computer-assisted image analysis (UN-SCAN-IT digitizing software, Silk Scientific, Inc.). Molecular masses were estimated by Rainbow molecular weight markers (Bio-Rad). Student's *t* test analysis was used to assess the significance of differences between groups if normal distribution could be assumed. If the normality was not valid, statistical differences among groups were calculated by means of the non-parametric Mann-Whitney U-test.

RESULTS

Characterization of A β peptide in samples of both A β 1-42 and A β 42-1 peptide, and following A β injections *in vivo* in the rat brain

As described in Material and Methods, we used the protocol reported by Klein (2002), and Perez et al. (2010) to prepare oligomers from A β 1-42 obtained from a commercial source (Bachem). Second, in order to confirm that the A β 1-42 peptide maintained the appropriate oligomeric conformation we characterized its quaternary structure using 15% SDS-PAGE gel. The size distribution of the sample of A β 1-42 oligomers was determined by Western blotting, using monoclonal antibodies against A β (e.g. 6E10 and 4G8)

(Fig.1). The preparations of A β 1-42 oligomers were not stained by 6E10 antibody (Fig.1), while samples of A β 1-42 oligomers stained by 4G8 antibody showed two reactive bands in the molecular weight range of a dimer-tetramer (10-20 kDa) conformation (Fig.1). Samples of A β 42-1 peptide were not stained by antibodies against A β (Fig.1). In A β 1-42 oligomer-injected animals, immunoblotting with 6E10 antibody revealed the presence of a certain amount of high-molecular weight species at the injection site at an early (24h) step of A β toxicity (Fig.1).

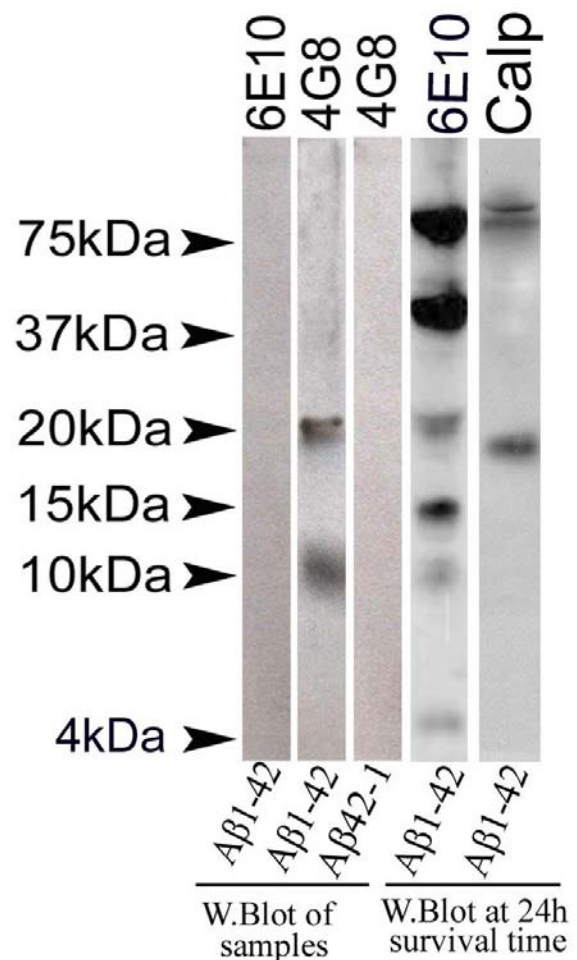


Figure 1. Synthetic A β 1-42 and A β 42-1 samples were run on 15% PAGE-SDS gels, transferred to nitrocellulose and incubated with 6E10 and 4G8 antibodies. A β 1-42 oligomers samples contain bands that react with 4G8 ranging from dimers to tetramers, while this sample does not stain with 6E10 antibody. Samples of control (A β 42-1) peptide do not stain with 4G8 antibody. Western blotting analyses of A β peptide from rat brain extracts incubated with 6E10, following injections of A β 1-42 oligomers into the retrosplenial cortex, detected bands ranging from monomers-dimers-trimers-tetramers to large aggregates (75-80 kDa molecular weight), while Western blotting analysis of calpain-1 from rat brain extracts showing the proteolysis of three calpain-1 subunits, at approximately positions 80-kDa, 76-kDa, and 18-kDa.

Neuronal loss and synaptic alterations in A β -injected animals

The findings reported here are based on all animals that received a single microinjection of A β 1-42 oligomers into the left retrosplenial cortex. As controls, a second group of animals received microinjections of A β 42-1 peptide into the corresponding regions of the left retrosplenial cortex. Immunocytochemical analysis revealed an intense A β -immunoreactivity at the level of A β 1-42 injection site, particu-

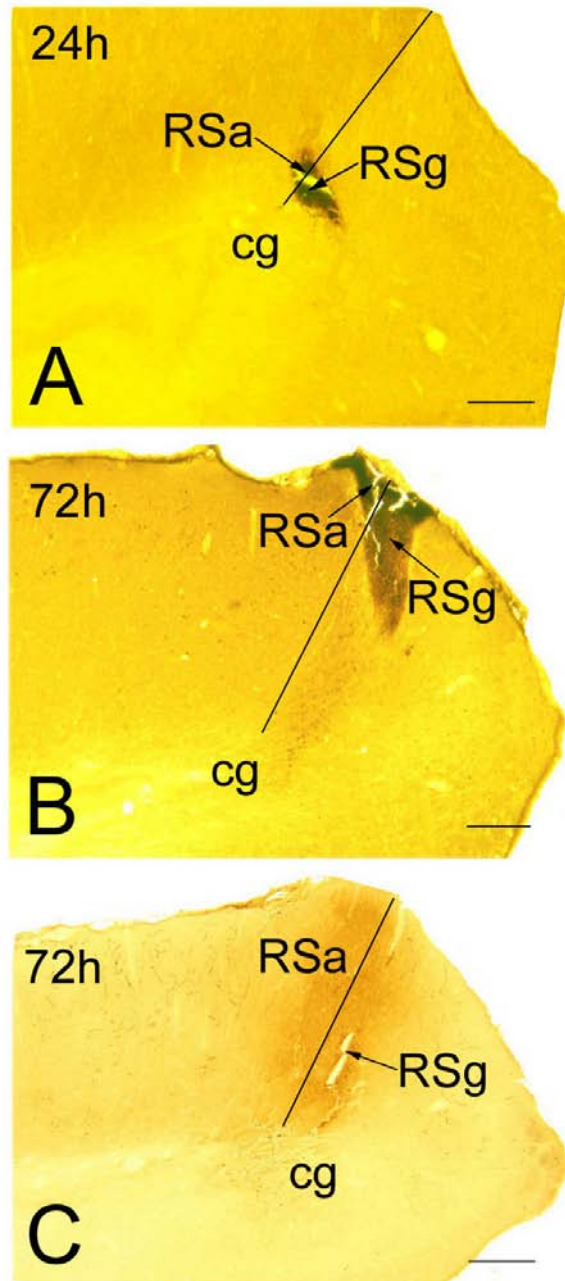


Figure 2. A-C. Photomicrographs of coronal sections through the retrosplenial cortex from sections subjected to A β -immunohistochemistry (using 6E10 antibody) showing a dark staining at the level of representative injections of A β 1-42 into the left RSg, at 24h (A, arrow), and 72h (B, arrow) post-injection time, whereas a weak staining was observed at level of injection of A β 42-1 (control injection) at 72h post-injection time (C, arrow). Scale bars: 250 μ m (A-C).

larly in the retrosplenial granular (RSg) and retrosplenial agranular (RSa) cortices at an early (24h) post-injection time (e.g., Fig.2A), and slight increases at later (72h) time points (e.g., Fig.2B). Control injection of A β 42-1 peptide showed a light background staining surrounding the injection site in the corresponding regions of the left retrosplenial cortex at all time point (e.g., Fig.2C).

Qualitative analysis of Nissl-stained sections revealed that all injections of A β 1-42 peptide (e.g., Fig. 3A) resulted in a marked reduction in the numbers of cresyl violet-stained cells as compared with those seen in the control (A β 42-1) injected animals (e.g., Fig. 3B). As reported previously (Gonzalo-Ruiz et al., 2006), the results of the qualitative analysis and quantitative measurements revealed considerable variance in the reduction of neurons between groups and according to the injection type (data don't shown). Brain sections from the A β 1-42 injected animals, stained with an antibody to NeuN, exhibited a marked decrease in NeuN-positive cells at the level of A β 1-42 injection site at early time points (e.g. Fig. 3C). We next examined whether neuronal loss in A β 1-42 injected animals occurred via apoptosis, which is associated with programmed cell death in response to highly selective cytotoxic agents. In paraffin-embedded tissue sections from the A β 1-42-injected animals, TUNEL assays were performed using the Oncor ApopTag peroxidase detection kit, which detects the 3'-OH region of cleaved DNA during apoptosis. In the A β 1-42 injected animals, the DNA Fragmentation Kit allowed the identification of a few apoptotic like-nuclei surrounding the injection site into the retrosplenial cortex at an early (24h) time point (e.g., Fig.3D). These findings suggested that A β 1-42 oligomers *in vivo* in the rat brain were triggering pathological cascades, leading to neuronal death at early stages of A β toxicity, and that the retrosplenial cortex appears to be particularly vulnerable to toxic effects of A β oligomers.

To examine synaptic alterations *in vivo*, brain sections from A β oligomer-injected rats were stained with antibodies against synaptophysin and chromogranin A proteins. In A β oligomer-injected animals we observed a marked decrease in synaptophysin immunoreactivity at the center of the injection of A β peptide, whereas an increase in synaptophysin-immunopositive grains was observed

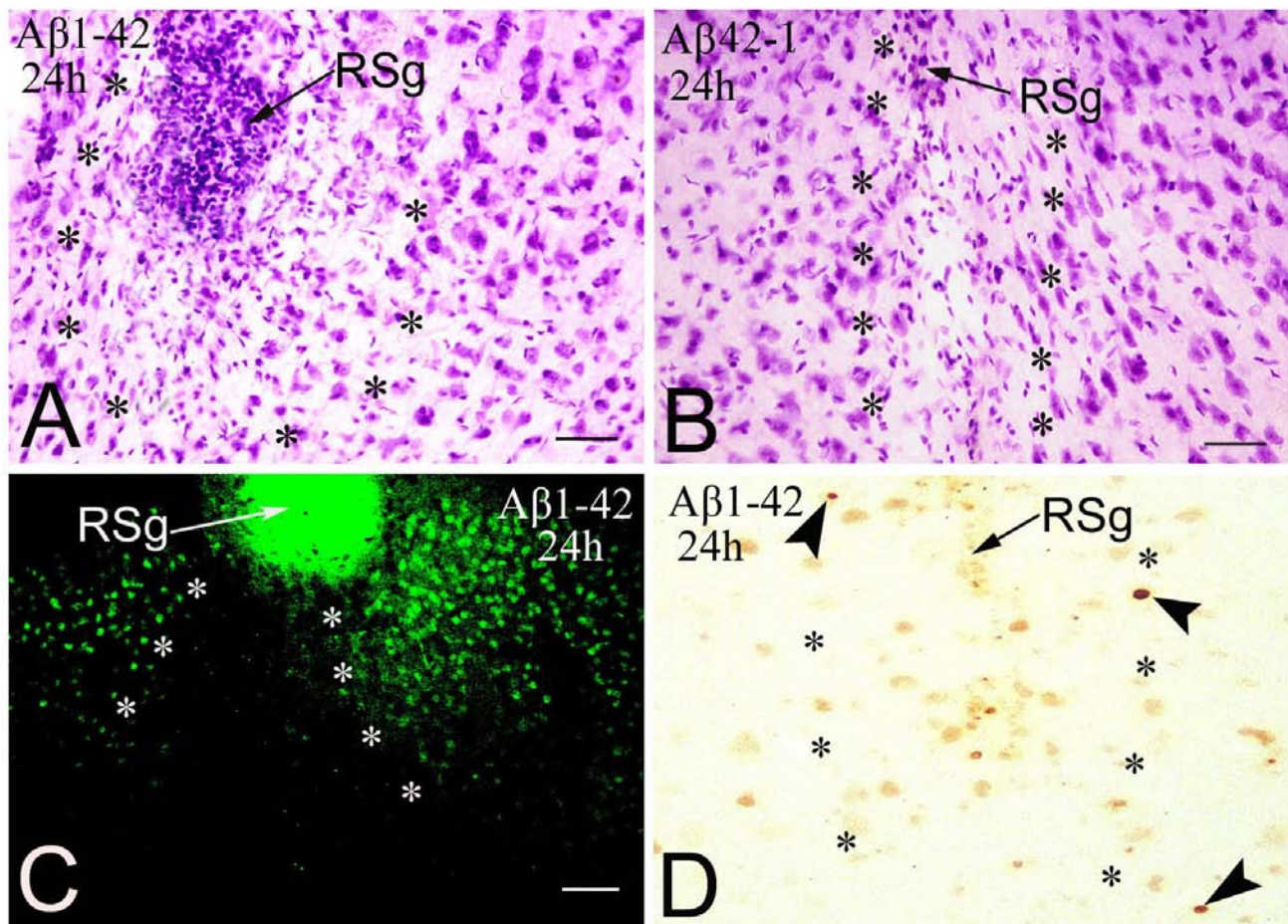


Figure 3. A, B. Cresyl violet-stained sections through the RSg following an injection of A β 1-42 oligomers (A), and a control (A β 42-1) injection (B). The area of the lesion and the reduction in cresyl violet-stained cells are considerably higher in A β 1-42 injected animals (A) as compared with controls (B). The field in (C) shows a marked decrease in NeuN-immunopositive cells at the injection of A β oligomers into the RSg. Note also a few apoptotic like-nuclei in close association with the injection of A β 1-42 (D, arrowheads) at an early time point. Asterisks delineate the area of lesion induced by A β peptide. Scale bars: 50 μ m (A-D)

surrounding the deposit of A β deposit at an early time point (Fig. 4A,B), increasing in an age-dependent fashion. Confocal image analysis of sections immunostained for co-localization of A β and synaptophysin proteins revealed that all injections of A β oligomers centred on the retrosplenial cortex (Fig.4C) resulted in A β -, and synaptophysin-immunoreactive material surrounding the injection site of A β (Fig.4C,D). A β - and synaptophysin-immunopositive material co-localized in small granules associated with presynaptic vesicle protein (Fig. 4E). Brain sections from A β oligomer-injected animals stained with antibody against chromogranin A showed a marked increase in chromogranin A-immunoreactivity at the centre of the injection of A β peptide at early (24h-72h) time points (Fig. 4F,G). Confocal image analysis of sections immunostained for the co-localization of A β and chromogranin A proteins revealed a marked increase in chromogranin A-immunoreactivity that infiltrated the injection site of A β peptide (Fig. 4H). Immunoreactivity

for A β was also observed at the center of the injection site (Fig. 4I), and A β - and chromogranin A-immunopositive material co-localized in small granules, particularly at the centre of the injection of A β peptide (Fig. 4J).

A β -immunopositive material in reactive astrocytes *in vivo* in the rat brain

In keeping with our earlier results (Perez et al., 2010), confocal image analysis of sections immunostained for the co-localization of A β and GFAP proteins, revealed that all injections of A β 1-42 oligomers centred on the retrosplenial cortex (e.g., Fig. 5A) resulted in reactive astrocytes (e.g., Fig.5B), and in an intense accumulation of A β -immunopositive material in astrocytes that surrounded and infiltrated the injection of A β (e.g., Fig. 5C). In A β oligomer-injected animals, immunoreactivity for A β was also highly localized within the cytoplasm and in an elaborate network of reactive astrocytes that surrounded blood vessel at the early time point

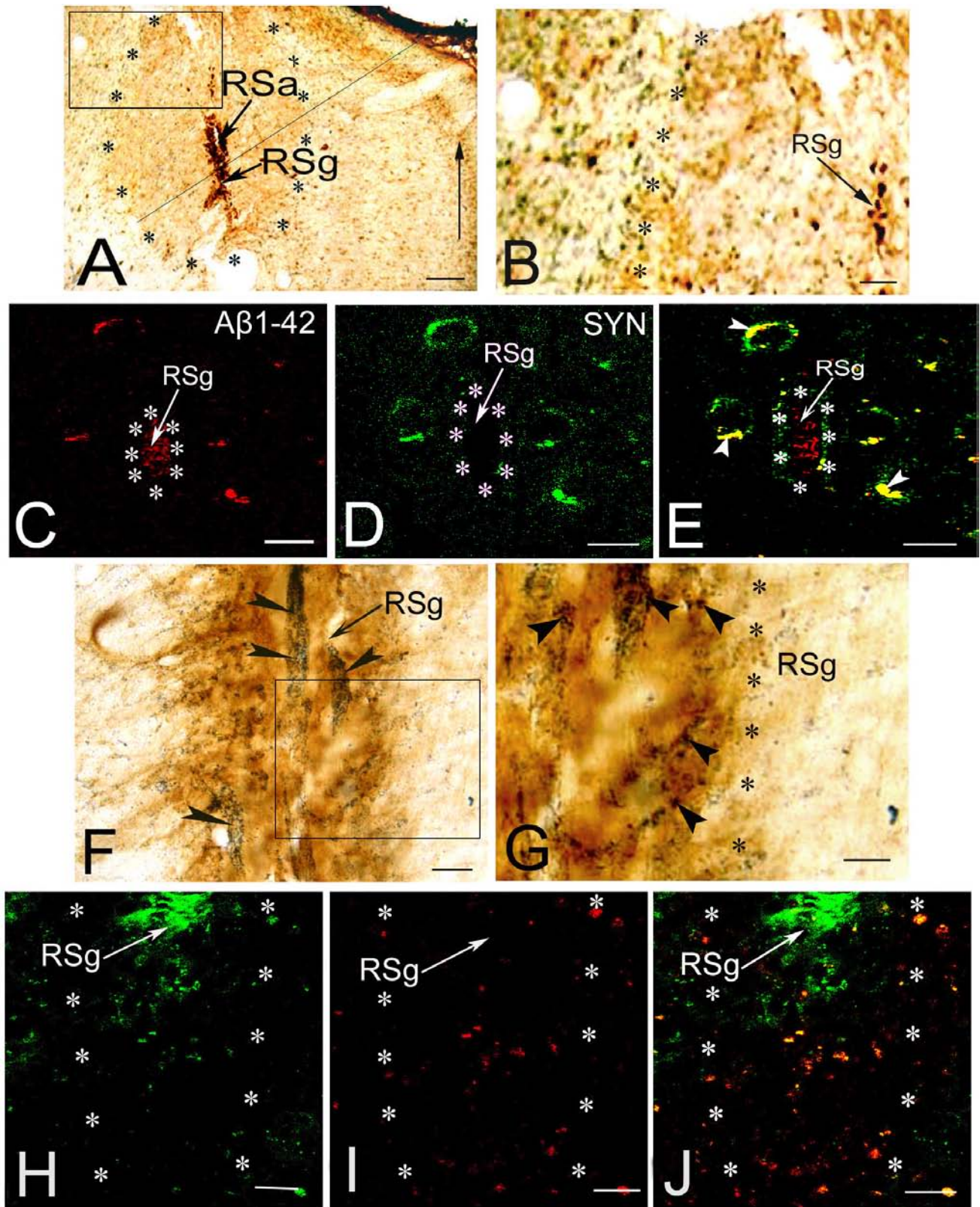


Figure 4. A, B. Photomicrographs of coronal sections through the RSg following an injection of AB1-42 oligomers into the left RSg (arrows). Asterisks delineate the AB-injected site. The straight arrow indicates the midline. The sections processed for co-localization of AB peptide (DAB) and synaptophysin (using BDHC) show a dark brown staining for AB and weak immunoreactivity for synaptophysin at the centre of the injection site (A), while an increase in synaptophysin-immunopositive material is seen at the periphery of AB-injected site (B, dark-blue granules). C-E. Confocal images of the left RSg processed for co-localization of AB peptide (using rhodamine, C) and synaptophysin (using FITC, D), following an injection of AB1-42 oligomers into the left RSg (C, D, arrows). The field in E shows synaptophysin-immunopositive granules co-labelled with AB peptide (yellow, arrowheads) surrounding the center of the AB-injected site (red, delimited by asterisks). F. Photomicrograph of coronal sections through the RSg following the injection of AB1-42 oligomers into the left RSg (arrow). The section processed for co-localization of AB peptide (DAB) and chromogranin A (using BDHC), shows a dark brown staining for AB and a marked immunoreactivity for chromogranin A at the centre of the injection site (dark blue, arrowheads). The boxed area is enlarged in (G). G. Higher magnification of part of Fig. 4E, showing a marked increase in chromogranin A-IR (dark blue, arrowheads) at the centre of the AB deposit (brown). Asterisks delineate the AB-injected site. H-J. Confocal image of the left RSg processed for co-localization of chromogranin A (using FITC, H), and AB peptide (using rhodamine, I). The field in J shows chromogranin A-immunopositive grains co-labelling with AB-immunopositive material at the centre of the AB-injected site (yellow). Scale bars: 250 μ m (A), 100 μ m (C-F), 50 μ m (B, G-J).

of A β toxicity (e.g., Fig. 5D, E). Confocal image analysis also revealed prominent granules of A β -immunopositive material infiltrating the endothelial blood vessels (e.g., Fig. 5E). In addition, intense A β -immunopositive material was observed in the cytoplasm and in astrocyte processes of reactive astrocytes, extending along the subventricular zone of the lateral ventricle, ipsilateral and contralateral to the injection of A β (e.g., Fig. 5F).

Oligomers of A β 1-42 increase the activity of calpain-1 in rat brain

Western blotting analysis of the retrosplenial cortex from A β 1-42-treated animals and from control (A β 42-1) animals showed that the anti-calpain-1 antibody yielded a pattern of three immunopositive bands located at the large calpain-1 subunit (80 kDa), approximately at its 76 kDa fragment, and at 18 kDa molecular weight (Figs. 6A, 7A). The results

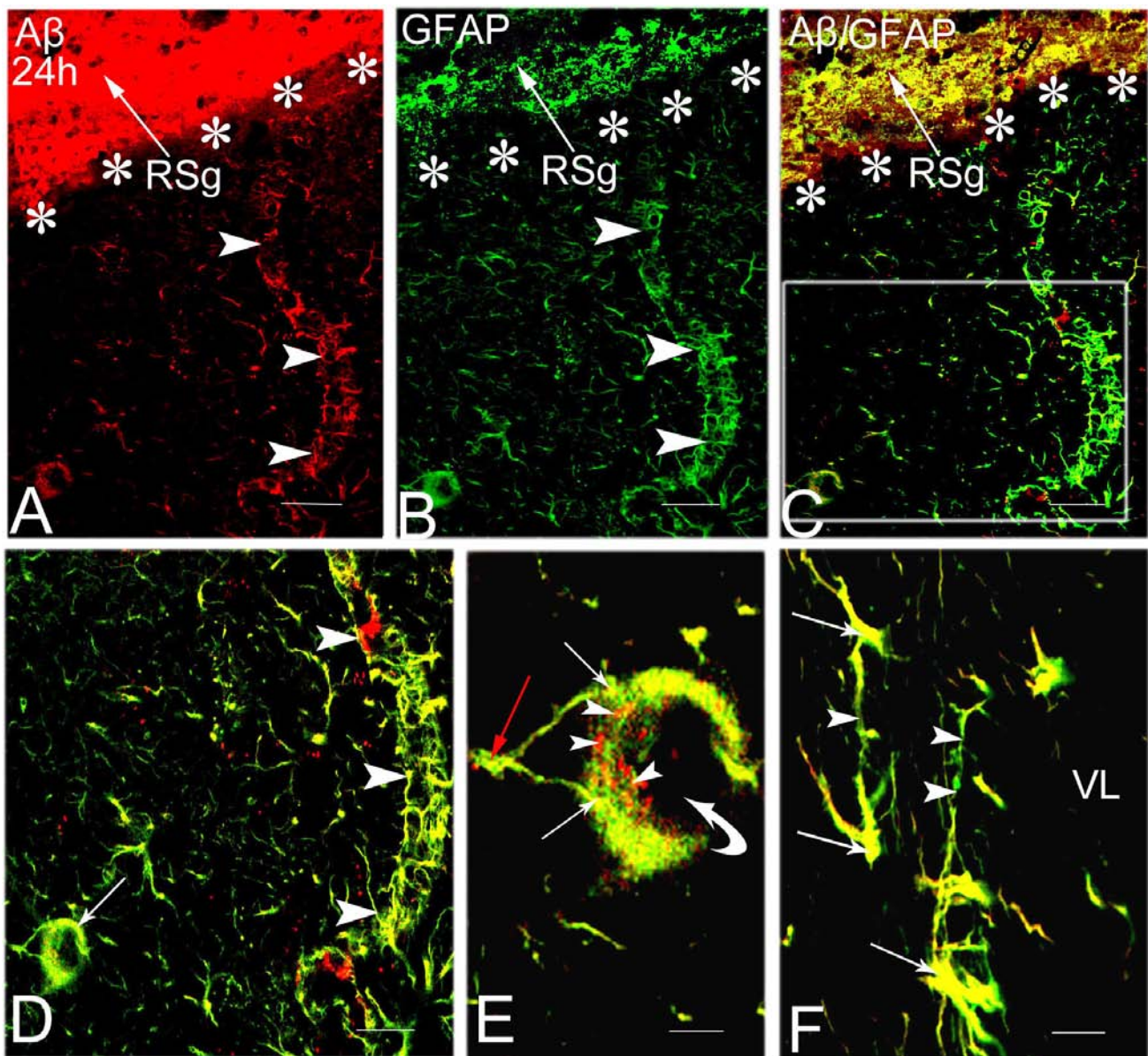


Figure 5. A-C. Confocal images of a coronal section through the RSg following an injection of A β oligomers into the left RSg, at an early (24h) time point. The section was processed for the co-localization of A β peptide (using rhodamine) and GFAP (using FITC). The field in (A) shows A β -immunoreactivity at the level of the A β -injected site (red, large arrow). The area of A β -immunoreactivity is delineated by asterisks. Note also A β -immunopositive material surrounding a blood vessel (arrowheads). The field in (B) shows reactive astrocytes (green), that surround the A β -injected site (large arrow), delineated by asterisks, and a blood vessel (arrowheads). The field in (C) shows co-labelling of both proteins (A β /GFAP, yellow) surrounding and infiltrating the injection site (arrow) marked by asterisks. The boxed area is enlarged in (D). D. Co-labelling for A β and GFAP-immunoreactivity surrounding and infiltrating a blood vessel (arrowheads). The blood vessel indicated with an arrow is enlarged in (E). E. Higher magnification of a blood vessel (curved arrow) showing A β -immunopositive material infiltrating the endothelial blood vessel (red, arrowheads). Note also a double-labelled astrocyte (red arrow) and astrocyte processes in close association with the endothelial blood vessel (arrows). F. Double-labelled astrocytes (yellow, arrows), and astrocyte processes (arrowheads) extend along the subventricular zone of the lateral ventricle. Scale bars: 75 μ m (A-C), 50 μ m (D), 25 μ m (F), 10 μ m (E).

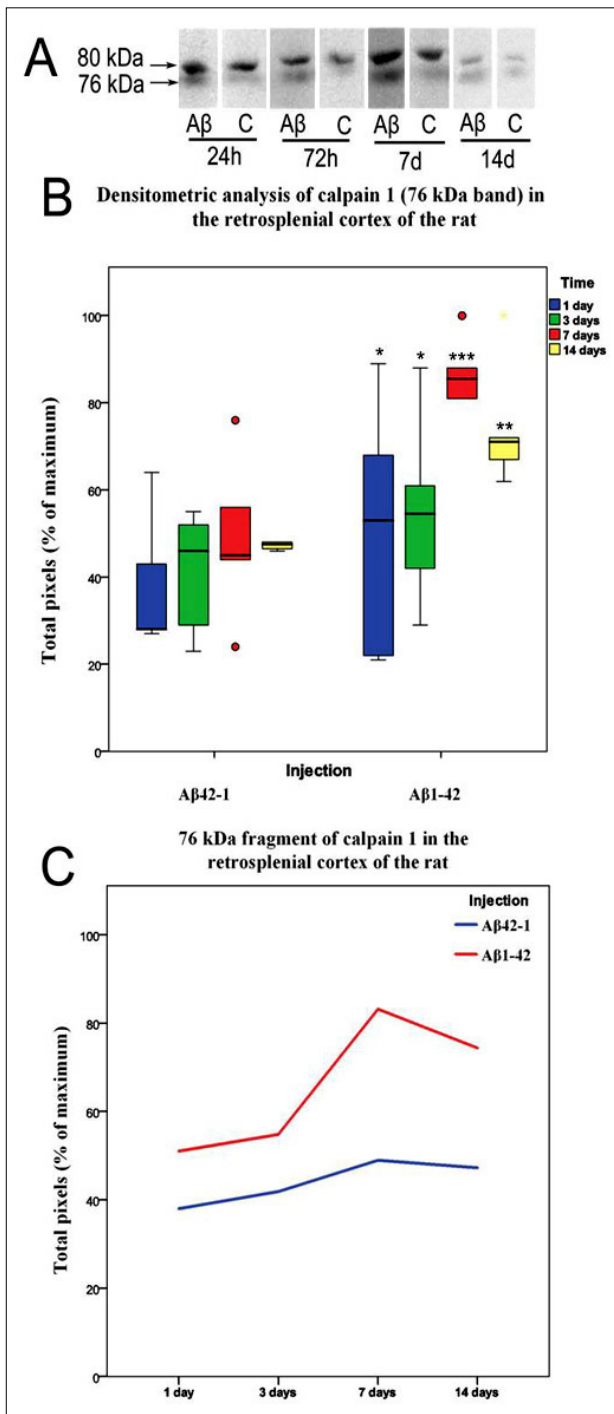


Figure 6. A. Representative pattern of calpain-1 protease bands at positions 80 kDa and 76 kDa, corresponding to Aβ1-42 (Aβ)- or Aβ42-1 (control, C)-treated rats, following 24h, 72h, 7d, and 14d after treatment. B. Densitometric analysis of a 76 kDa band in the retrosplenial cortex following injections of either Aβ1-42 peptide or Aβ42-1 (control animals) in the different situations tested. C. Time-course graph of active calpain-1 at its 76 kDa fragment in Aβ1-42- or Aβ42-1-treated rats (mean values). In B and C, the data correspond to values obtained in at least three experiments for each situation tested (four rats per group). Statistical differences among groups were calculated by means of Student's *t*-test if normal distribution could be assumed or with the non-parametric Mann-Whitney U-test if normality was not valid. **p* < 0.5, ***p* < 0.05, ****p* < 0.01, Aβ1-42-treated rats *versus* Aβ42-1 animals (control rats)

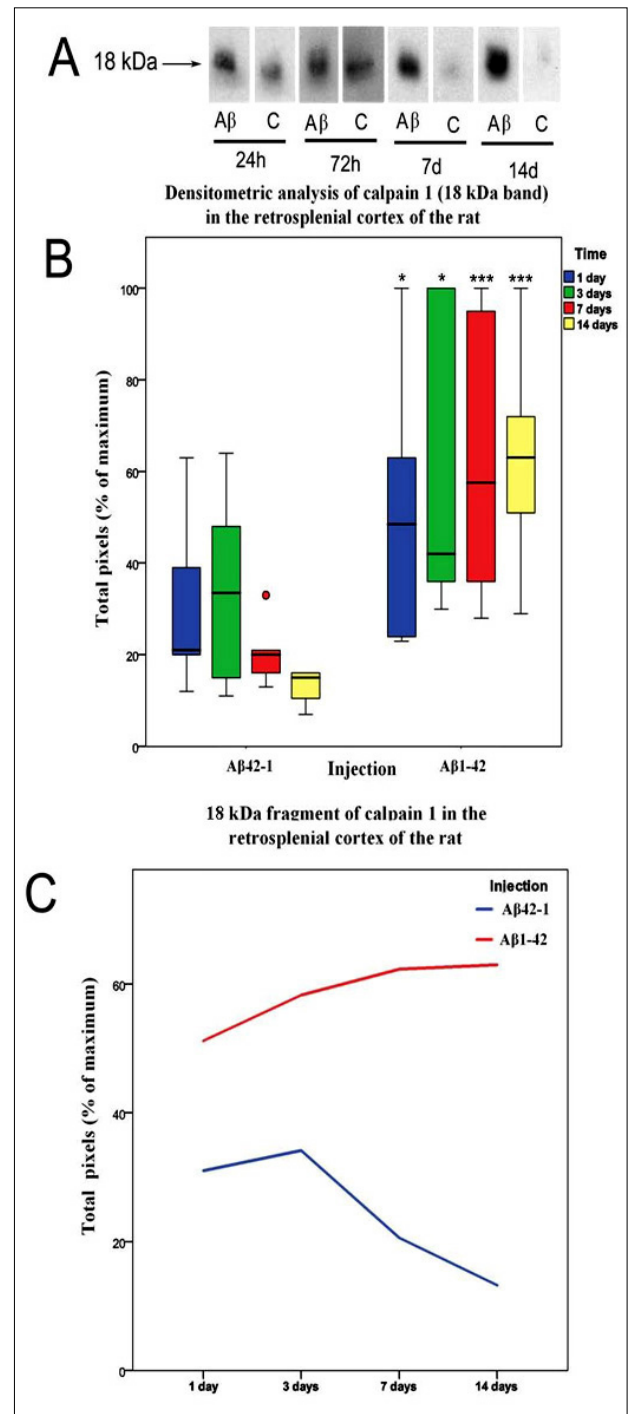


Figure 7. A. Representative pattern of immunoblot detection of active calpain-1 at position 18 kDa from Aβ1-42 (Aβ)- or Aβ1-42 (control, C)-treated rats, at 24h, 72h, 7d, and 14d after treatment. B. Densitometric analysis of the 18 kDa fragment in the retrosplenial cortex after injections of either Aβ1-42 or Aβ42-1 (control animals) in the different situations tested. C. Time-course graph of active calpain-1 at position 18 kDa in Aβ1-42- or Aβ42-1-treated rats (mean values). In B and C, the data correspond to the values obtained in at least three experiments for each situation tested (four rats per group). Statistical differences among groups were calculated by means of Student's *t*-test if normal distribution could be assumed or with the non-parametric Mann-Whitney U-test if normality was not valid. **p* < 0.5, ****p* < 0.01, Aβ1-42-treated rats *versus* Aβ42-1 (control rats)

of the densitometry analysis revealed significant differences in the levels of active calpain-1 at the 76 and 18 kDa positions by injection type and by survival time (Figs. 1E, 6A-C, 7A-C). Thus, in A β 1-42 oligomer-treated animals we found statistically significant increases of 41% ($p < 0.01$, Mann-Whitney U-test) and of 36.49% ($p < 0.05$, Mann-Whitney U-test) in the density of a 76kDa band after 7d and 14d, respectively, as compared with that seen in the corresponding band in the control (A β 42-1) animals at the same time points (Table 1A, Fig. 6B,C). In oligomer-treated animals, there was also a significant increase of 38.63%, and of 31.35% in the density of the band at the 76 kDa position at 7d and 14d, respectively, as compared with the corresponding band at the earlier (24h) time point (Table 1B, Fig. 6B, C). In the control animals, injections of A β 42-1 peptide into the retrosplenial cortex resulted in a non-statistically

significant difference of 22.45% in the density of a 76 kDa band at 7d post-injection, as compared with that seen in the corresponding fragment of calpain-1 at the early time points (Table 1C, Fig. 6C).

In A β 1-42 oligomer-injected animals, immunoblot staining with anti-calpain 1 antibody also revealed statistically significant increases of 67% ($p < 0.01$, Mann-Whitney U-test), and of 79% ($p < 0.01$, Mann-Whitney U-test) in the density of a 18 kDa band after 7d and 14d, respectively, as compared with that seen in the corresponding band in control animals at the same time points (Table 2A, Fig. 7B, C). In A β oligomer-treated animals, there was a non-statistically significant difference of 18%, and of 18.8% in the density of the band at the 18 kDa position at 7d and 14d, respectively, as compared with the corresponding band at the

Table 1. Quantitative analysis of the expression of a 76-kDa fragment of calcium-dependent protease calpain-1 following injections of A β 1-42 oligomers and of a reversible form of A β 1-42 peptide (control injection) into the left retrosplenial cortex.

INJECTION	SURVIVAL TIME	% OF MAXIMUM TOTAL PIXELS (MEAN \pm S.D)	95% CONFIDENCE INTERVAL OF THE DIFFERENCE	% DIFFERENCE	P VALUE
A A β 1-42		23 ^a			
	24h	51 \pm 9.4	16.05-29.95 ^a	25.49% ^a	<0.5 ^a (Mann-Whitney U)
	72h	54.83 \pm 8.1 32.4 ^c	5.84-20.16 ^b	23.7% ^b	<0.5 ^b (Mann-Whitney U)
	7d	83.17 \pm 5.5 27.1 ^d	41.73-23.1 ^c	41% ^c	<0.01 ^c (Mann-Whitney U)
	14d	74.40 \pm 6.6	10.24-44 ^d	36.49% ^d	<0.05 ^d (Mann-Whitney U)
A β 42-1	24h	38.00 \pm 7.1			
	72h	41.83 \pm 5.3			
	7d	49.00 \pm 8.4			
	14d	47.25 \pm 0.4			
B A β 1-42			6.16 ^e		
	24h	51 \pm 9.4	0.2-12.1 ^e 22.16 ^f	7% ^e	0.589 ^e (Mann-Whitney U)
	72h	54.83 \pm 8.1	34.8-9.5 ^f 13.35 ^g	38.63% ^f	<0.5 ^f (Mann-Whitney U)
	7d	83.17 \pm 5.5	21.7-5.0 ^g	31.35% ^g	<0.5 ^g (Mann-Whitney U)
C A β 42-1			6.17 ^h		
	24h	38.00 \pm 7.1	2.34-10 ^h 12.6 ⁱ	9.16% ^h	0.537 ^h (Mann-Whitney U)
	72h	41.83 \pm 5.3	9.12-16.15 ⁱ 18.3 ^j	22.45% ⁱ	0.421 ⁱ (Mann-Whitney U)
	7d	49.00 \pm 8.4	9.0-27.61 ^j	19.58% ^j	0.190 ^j (Mann-Whitney U)
	14d	47.25 \pm 0.4			

The density of a 76-kDa fragment of calcium-dependent protease calpain-1 in the retrosplenial cortex was analyzed as described in Material and Methods.

(a-d) Differences in the density of a 76-kDa fragment of calpain-1 between A β 1-42 injected animals and control (A β 42-1) animals following 24h (a), 72h (b), 7days (c), and 14 days (d), survival time.

(e-g) Differences in the density of active calpain-1, at 76-kDa molecular weight, between 24h and 72h (e), 24h and 7 days (f), 24h and 14 days (g), after injections of A β 1-42 oligomers.

(h-j) Differences in the density of a 76-kDa fragment of calpain-1 between the first 24h and 72h (e), 24h and 7 days (f), and 24h and 14 days (g), following injections of A β 42-1 peptide.

earlier (24h) time point (Table 2B, Fig. 7B,C). By contrast, in control animals, the 18 kDa band of active calpain-1 showed a maximum density at 72h post-injection time, after which the intensity of this band yield a statistically significant decrease of 33.5%, and of 57.26% at 7d and 14d, respectively, as compared with the earlier (24h) survival time (Table 2C, Fig. 7B, C).

In conclusion, immunoblot staining with anti-calpain 1 revealed that the most extensive increase in the density of the bands at approximately 76 and at 18 kDa molecular weight occurs at 7d and 14d after the injection of Aβ1-42 oligomers into the retrosplenial cortex.

Colocalization of Aβ-immunopositive material and calpain 1-immunoreactivity in the rat brain

Double-labelling immunohistochemical studies for Aβ and calpain-1 revealed that injections of Aβ1-42 oligomers centred on the retrosplenial cortex resulted in an intense colocalization of both proteins which surrounded and infiltrated the entire rostro-caudal extent of the injection of Aβ (e.g., Fig. 8A). The central region of the Aβ injection showed a dense amorphous calpain 1-immunopositive material, whereas the periphery of the injection had large numbers of calpain 1-immunoreactive cell bodies (e.g., Fig. 8A, B). In the Aβ oligomer-injected animals, immunoreactivity for calpain-1 was also local-

Table 2. Quantitative analysis of the expression of a 18-kDa fragment of calcium-dependent protease calpain-1 following injections of Aβ1-42 oligomers and of a reversible form of Aβ1-42 peptide (control injection) into the left retrosplenial cortex.

INJECTION	SURVIVAL TIME	% OF MAXIMUM TOTAL PIXELS (MEAN ± S.D)	95% CONFIDENCE INTERVAL OF THE DIFFERENCE	% DIFFERENCE	P VALUE
A					
Aβ1-42	24h	20.18 ^a 51.2 ± 6.5 20.6 ^b	15.6-24.7 ^a	35.4% ^a	<0.5 ^a (Mann-Whitney U)
	72h	58.3 ± 3.4 23.1 ^c	4.0-37.2 ^b	41.4% ^b	<0.5 ^b (Mann-Whitney U)
	7d	62.3 ± 9.8 34.5 ^d	16.0-30.2 ^c	67% ^c	<0.01 ^c (Mann-Whitney U)
	14d	63.0 ± 7.3	23.5-45.5 ^d	79% ^d	<0.01 ^d (Mann-Whitney U)
Aβ42-1	24h	31.0 ± 9.1			
	72h	34.1 ± 8.2			
	7d	20.6 ± 3.4			
	14d	13.2 ± 2.1			
B					
Aβ1-42	24h	7.2 ^e 51.2 ± 6.5 11.1 ^f	2.7-11.6 ^e	12.8% ^e	0.818 ^e (Mann-Whitney U)
	72h	58.3 ± 3.4 11.3 ^g	9.8-12.4 ^f	18% ^f	0.485 ^f (Mann-Whitney U)
	7d	62.3 ± 9.8	8.8-13.9 ^g	18.8% ^g	0.329 ^g (Mann-Whitney U)
	14d	63.0 ± 7.3			
C					
Aβ42-1	24h	7.5 ^h 31.0 ± 9.1 16.2 ⁱ	0.8-14.2 ^h	9.1% ^h	0.429 ^h (Mann-Whitney U)
	72h	34.1 ± 8.2 18.5 ^j	9.4-23.0 ⁱ	-33.5% ⁱ	0.792 ⁱ (Mann-Whitney U)
	7d	20.6 ± 3.4	0.85-36.2 ^j	- 57.2% ^j	<0.5 ^j (Mann-Whitney U)
	14d	13.2 ± 2.1			

The density of an 18-kDa fragment of calcium-dependent protease calpain-1 in the retrosplenial cortex was analyzed as described in Materials and methods.

- (a-d) Differences in the density of an 18-kDa fragment of active calpain-1 between Aβ1-42 injected animals and control (Aβ42-1) animals after 24h (a), 72h (b), 7days (c), and 14 days (d), survival time.
- (e-g) Differences in the density of calpain-1 at 18-kDa molecular weight between 24h and 72h (e), 24h and 7 days (f), and 24h and 14 days (g), following injections of Aβ1-42 peptide.
- (h-j) Differences in the density of calpain-1 at 18-kDa molecular weight between 24h and 72h (e), 24h and 7 days (f), and 24h and 14 days (g), following injection of Aβ42-1 peptide.

ized in structures-like diffuse aggregates forms, showing profiles with features of filaments in several cortical regions, such as in the frontal, and temporal cortices, ipsilateral and contralateral to the A β -injected site (e.g., Fig. 8C). In A β -immunopositive aggregate forms, calpain 1-immunoreactive material was most commonly localized in prominent granules distributed without a defined outline

(e.g., Fig. 8C). Control injections of A β 42-1 peptide, by contrast, showed a rather homogenous and weak calpain-1 staining at the injection site (e.g., Fig. 8D). In A β oligomer-injected animals, in addition to the pattern of labelling described above A β -, and calpain 1-immunopositive material was observed in cortical cells (e.g., Fig. 8E, F,H,I), which displayed a triangular soma and had large apical

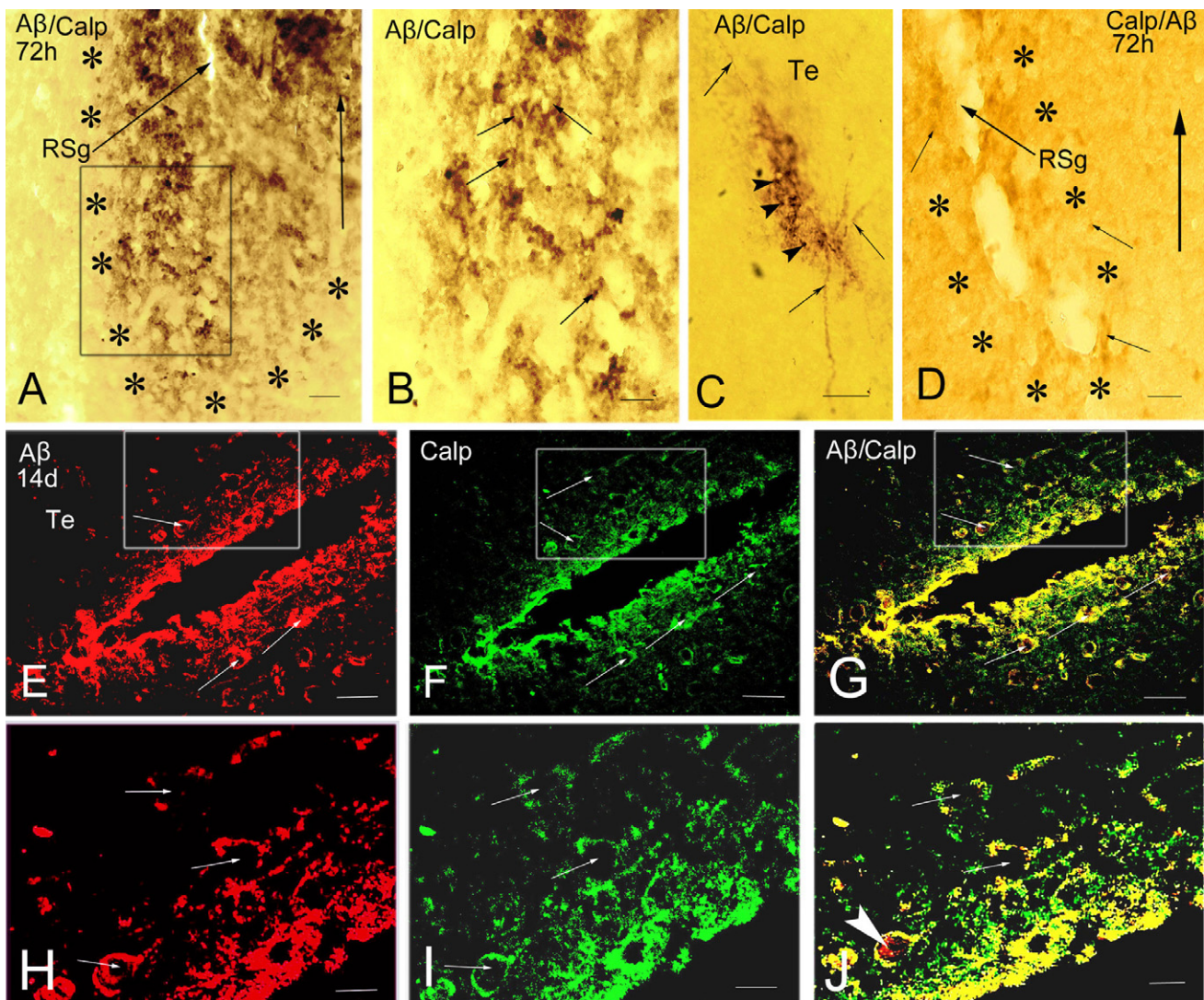


Figure 8. A. Photomicrograph of coronal sections through the RSg following an injection of A β 1-42 oligomers into the left RSg (arrow). Asterisks delineated part of the A β -injected site. The straight arrow indicates midline. The sections processed for co-localization of A β peptide (using DAB) and calpain-1 protease (using BDHC) show co-labelling of both proteins (A β /calpain-1) at the centre (dark brown area) and at the periphery of A β -injected site (e.g., labelling marked by a rectangle). B. High magnification of the boxed area in (A), showing double-labelled (A β /calpain-1) cell bodies (arrows). C. Calpain 1-immunopositive material (arrowheads) accumulates in A β -immunoreactive aggregate form with apparently diffuse filaments (arrows) in the temporal cortex. D. Representative example of sections processed for the co-localization of calpain-1 (using DAB) and A β peptide (using BDHC), after an injection of A β 42-1 (control injection) into the left RSg (large arrow). Asterisks mark part of the injection site. The straight arrow indicates the midline. The field shows slightly calpain-1 immunoreactive cell bodies at the injection of A β 42-1 peptide (brown, small arrows). E-G. Confocal images of coronal sections through the temporal cortex of the rat brain processed for co-localization of A β peptide (using rhodamine) and calpain-1 (using FITC) following an injection of A β oligomers into the left RSg at 14 days survival time. The field in (E) shows A β -immunoreactivity surrounding a blood vessel (red). Note also A β -immunopositive material in cortical cells (arrows). The field in (F) shows calpain 1-immunoreactivity surrounding a blood vessel and infiltrating endothelial blood vessel (arrows). The field in (G) shows co-labelling for A β and calpain 1-immunoreactivity, surrounding a blood vessel (yellow) and in cortical cell bodies (arrows). The boxed areas in (E), (F), and (G) are enlarged in (H), (I), and (J), respectively. H-J. Higher magnification of boxed areas in (E), (F), and (G) showing cortical cells immunoreactive either for A β (H, arrows) and calpain-1 (I, arrows), or co-labelling for both proteins (A β /calpain-1) (J, arrows). Note that the immuno-labelling is localized in cortical cells, which have a triangular shaped soma, and large apical process arising from the apex of the cell bodies (H-J, arrows). The field in (J) also shows A β -immunopositive material accumulated in the cytoplasm of a cortical cell (red, arrowhead), which apparently exhibits co-localization of A β - and calpain 1-immunoreactivity in the plasma membrane (yellow). Scale bars: 75 μ m (A), 50 μ m (B, D-G), 25 μ m (H-J), 10 μ m (C).

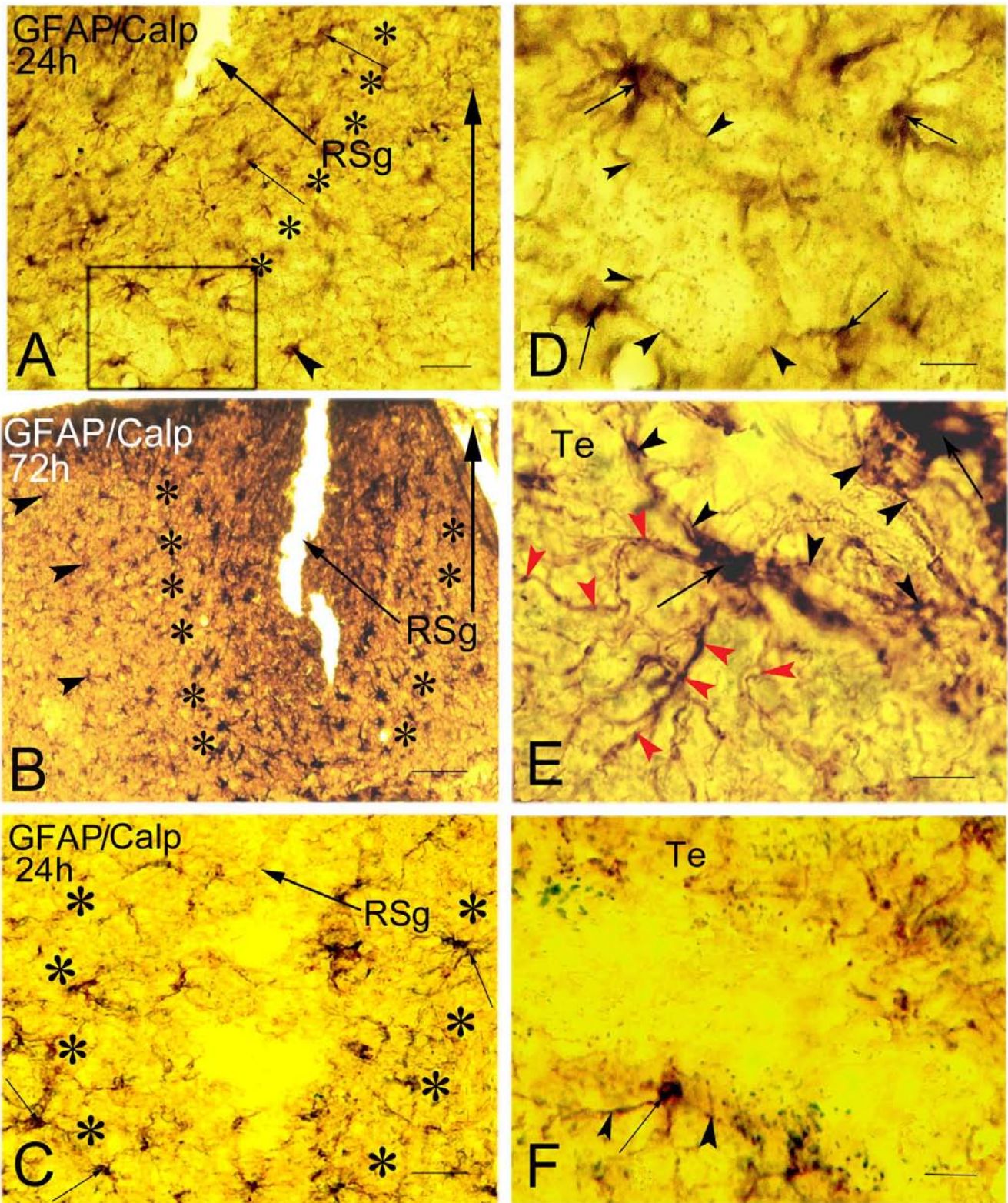


Figure 9. A, B. Photomicrographs of coronal sections through the retrosplenial cortex following injections of Aβ₁₋₄₂ oligomers into the left RSg cortex at early (24h) (A, large arrow) and later (72h) (B, large arrow) time points. Asterisks delineated part of the Aβ-injected site. The sections processed for the co-localization of GFAP (using DAB) and calpain-1 (using BDHC) show double-labelled astrocytes surrounding (arrowheads) and infiltrating (small arrows) the injection site. The straight arrows in (A) and (B), indicate the midline. The boxed area in (A) is enlarged in (D). C. Photomicrograph of coronal section through the RSg after a control injection of Aβ₄₂₋₁ peptide into the left RSg (large arrow). The area of lesion is marked by asterisks. The section processed for co-localization of GFAP and calpain-1 immunohistochemistry shows few GFAP-immunoreactive cells surrounding the injection site (small arrows). D. High magnification of the boxed area in (A), showing co-localisation for GFAP and calpain-1 in astrocyte cell bodies (arrows) and astrocyte processes (arrowheads) surrounding a blood vessel. E. Representative example of a section through the right temporal cortex after the injection of Aβ oligomers shown in (B). The section processed for the co-localization of GFAP and calpain-1 shows double-labelled reactive astrocytes around a blood vessel (arrows). Note also calpain-1-immunopositive material in the astrocyte processes that surround a blood vessel (black arrowheads) and extend further to adjacent cortical tissue (red arrowheads). F. Photomicrograph of a coronal section through the temporal cortex following the injection of Aβ₄₂₋₁ peptide shown in (C). The section processed for co-localization of GFAP and calpain-1 shows a double-labelled astrocyte (arrow) and astrocyte processes (arrowheads), surrounding a blood vessel. Scale bars: 100 μm (B), 50 μm (A, C, F), 25 μm (D), 20 μm (E).

process arising from the apex of the cell's somata (e.g., Fig. 8H, I). Confocal images also revealed the co-localization of proteins (A β and calpain-1), surrounding and infiltrating the endothelial blood vessels (e.g., Fig. 8G, J).

Calpain 1- immunoreactivity in reactive astrocytes in the rat brain

Double-labelling (GFAP/calpain-1) immunohistochemical studies revealed that all injections of A β 1-42 oligomers centred on the retrosplenial cortex resulted in dense calpain 1-immunoreactivity in GFAP-positive cells, which surrounded and infiltrated the injection site of A β at an early (24h) time point of A β toxicity (Fig. 9A), increasing at a later (72h) stage (Fig. 9B). As shown in Figure 9B, calpain 1-immunopositive material in reactive astrocytes at the injection site of A β oligomers can be divided into a area closer to the centre of the injection site and a peripheral region. The closest region contained large numbers of GFAP-positive cell bodies densely labelled for calpain-1 (Fig. 9B), while the periphery of the injection site had boured smaller numbers of calpain 1-immunopositive astrocytic cell bodies (Fig.9B). In the control animals, the injection of A β 42-1 peptide resulted in a weak calpain immunoreactivity in GFAP-positive cells surrounding the injection site at an early (24h) time point (Fig. 9C). In addition, calpain 1-immunopositive material was also observed in a population of reactive astrocytes and in a dense meshwork of astrocyte processes surrounding blood vessels in close association with the injection of A β oligomers at the early time point (Fig. 9D), later (72h) increasing in blood vessels located some distance from the injection site, such as in the hippocampus and in several cortical regions (Fig.9E). In control animals, a weak calpain 1-labelling was also present in the cytoplasm and astrocyte processes surrounding blood vessels (Fig. 9F).

Double-labelling (GFAP/calpain-1) immunofluorescence studies confirmed that injections of A β oligomers centred on the retrosplenial cortex resulted in large numbers of reactive astrocytes surrounding and infiltrating the injection of A β (Fig.10A). Intensely stained calpain 1-immunopositive material was also observed in the cytoplasm and in astrocyte processes (Fig.10B). Confocal images

analyzed showed a marked increase in calpain-1 immunoreactivity in GFAP-positive cell bodies and along astrocyte processes at the injection of A β oligomers (Fig. 10C). In addition to the pattern of co-labelling described above, dense calpain 1-immunopositive material was also observed in the cytoplasm and astrocyte processes of reactive astrocytes that surrounded cortical blood vessels after a survival time of 72h (Fig.10C), while a weak immunoreactivity for calpain-1 was present in astrocytes surrounding blood vessels at an early (24h) time point (Fig. 10D-F). GFAP-positive cells and a meshwork of astrocyte processes densely labelled for calpain-1 were also detected surrounding and infiltrating leptomeningeal blood vessels (Fig. 10G-I).

S100B-immunopositive material in reactive astrocytes in the rat brain

Double-labelling (GFAP/S100B) immunofluorescence studies confirmed that injections of A β 1-42 oligomers centred on the retrosplenial cortex resulted in large numbers of reactive astrocytes surrounding the injection of A β 1-42 peptide (Fig.11A). Intense S100B-immunopositive material was also observed in the cytoplasm and in astrocyte processes that surrounded the injection site (Fig. 11B). The confocal images analyzed revealed that all injections of A β 1-42 oligomers centred on the retrosplenial cortex resulted in an intense accumulation of S100B-immunopositive material in reactive astrocytes at the injection of A β at 72h time point (Fig. 11C). In A β oligomer-injected animals, GFAP-positive astrocytes and S100B-immunoreactivity was also observed extending further away from the site of amyloid injection to several cortical regions, such as the temporal cortex (Fig.11D-F), and hippocampus (Fig. 11G-I). In addition, S100B-immunopositive material also infiltrated and dominated the cytoplasm and astrocyte processes of activated astrocytes that surrounded blood vessels after 72h survival time (Fig.11F), while a weak immunoreactivity for S100B was present in astrocytes surrounding blood vessels at an early (24h) time point (Fig. 11J-L). In the control (A β 42-1) animals, a weak S100B-immunoreactivity was observed in GFAP-positive astrocytes in association with the injection site (data not shown).

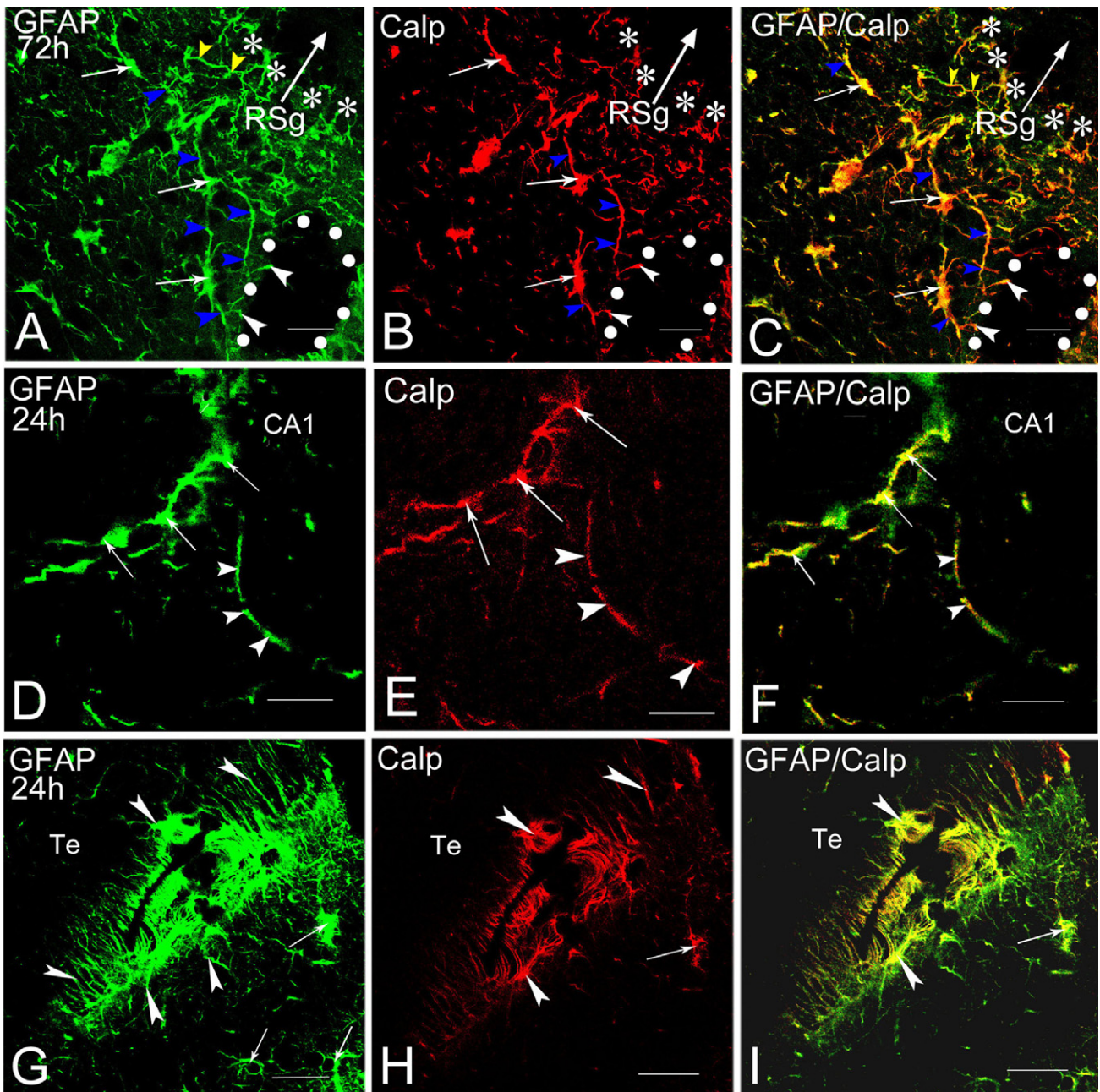


Figure 10. A-C. Confocal images of a coronal section through the RSg, after the injection of A β oligomers into the left RSg, at 72h time point. The section was processed for the co-localization of GFAP (using FITC) and calpain-1 (using rhodamine). The field in (A) shows GFAP-immunoreactivity in the cytoplasm of reactive astrocytes (small arrows) and in astrocyte processes (yellow arrowheads) surrounding the A β -injected site (large arrow), marked by asterisks. Note also astrocyte processes in contact with a blood vessel (white arrowheads), marked by spots and extending from the blood vessels to, and among, astrocytes (blue arrowheads). The field in (B) shows calpain 1-immunoreactivity in astrocytes (small arrows) around the area of lesion (large arrow), marked by asterisks. Note also immunoreactivity for calpain 1 in astrocyte processes in contact with a blood vessel (white arrowheads), delineated by spots, to and among reactive astrocytes (blue arrowheads). The field in (C) shows double-labelled astrocytes (yellow, small arrows) surrounding the A β -injected site (large arrow), marked by asterisks. Note also that calpain 1-immunopositive material accumulates in the astrocyte processes (yellow) surrounding the injection site (yellow arrowheads) and extending from the blood vessel (white arrowheads), marked by spots, to and among reactive astrocytes (blue arrowheads). **D-I.** Representative example of sections through the hippocampus (D-F) and temporal cortex (G-I) processed for the co-localization of GFAP (using FITC) and calpain-1 (using rhodamine) following an injection of A β oligomers into the left RSg at early (24h) time point. **D-F.** Cofocal images of a coronal section through the ipsilateral CA1 of the hippocampus showing GFAP-immunoreactivity in the cytoplasm of reactive astrocytes (D, arrows) and in astrocyte processes (D, arrowheads), surrounding and infiltrating a blood vessel. The field in (E) shows calpain 1-immunopositive material accumulated around a blood vessel (arrows), and in astrocyte processes (arrowheads). The field in (F) shows double-labelled astrocytes (yellow, arrows) and astrocyte processes (arrowheads) surrounding a blood vessel. **G.** Cofocal images of coronal section through the right temporal cortex, showing GFAP-immunoreactivity in astrocytes (arrows) and in astrocyte processes (arrowheads) infiltrating a leptomeningeal blood vessel. The field in (H) shows calpain 1-immunopositive material accumulated in a cortical cell body (arrow), and surrounding a leptomeningeal blood vessel (red colour, arrowheads). The field in (I) shows co-labelling for GFAP and calpain 1-immunoreactivity in a GFAP-positive cell (yellow, arrow), and infiltrating a leptomeningeal blood vessel (yellow, arrowheads). Scale bars: 25 μ m (A-I).

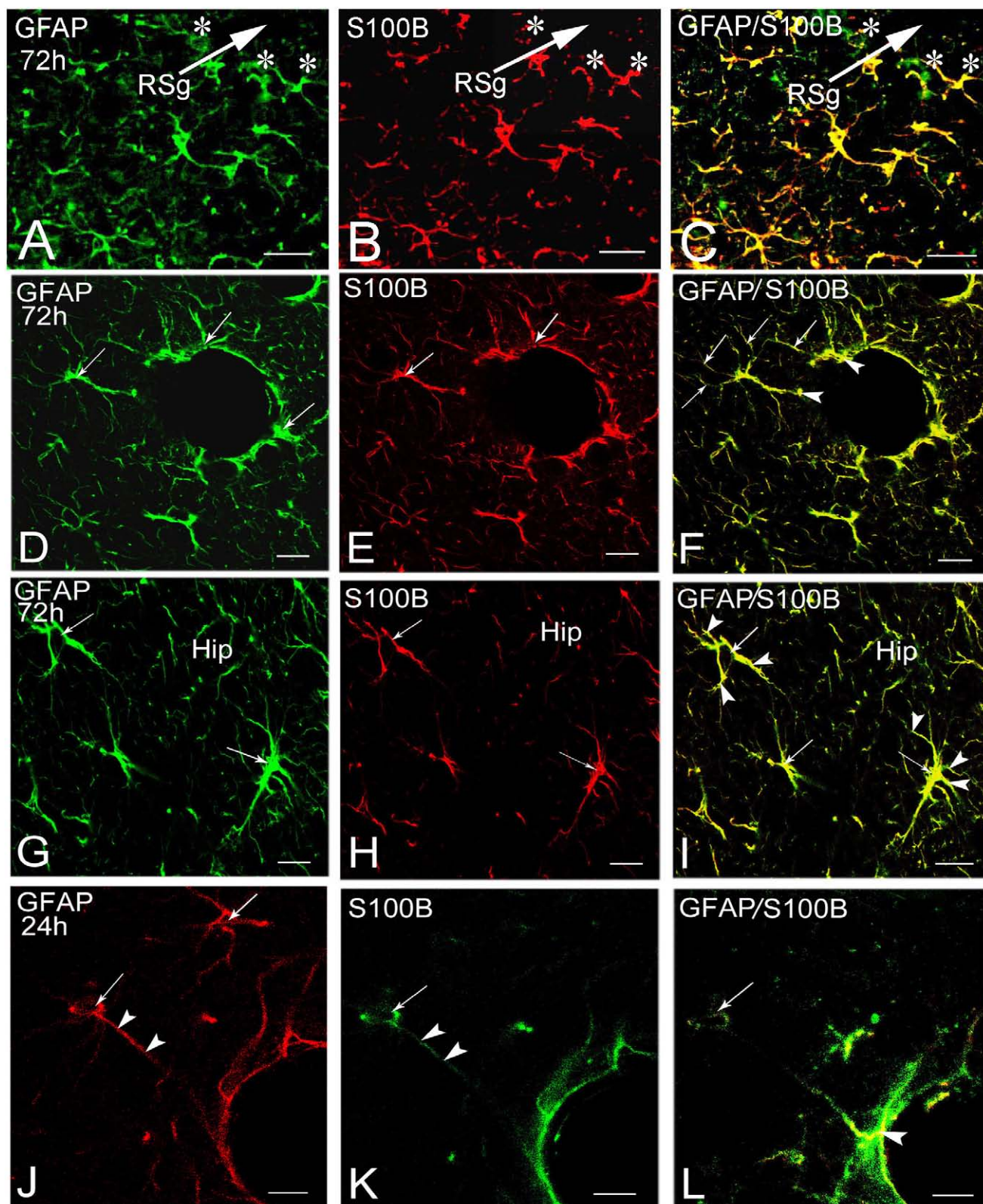


Figure 11. A, B. Confocal images of coronal section of through the RSg, following an injection of A β 1-42 oligomers into the left RSg. The section was processed for the co-localization of GFAP (using FITC, A) and S100B (using rhodamine, B) proteins. The field in (C) shows co-localization of GFAP and S100B proteins (yellow) surrounding the injection site (RSg, arrow), delineated by asterisks. D-F. Representative example of sections through the temporal cortex showing GFAP-immunoreactivity (D), S100B-immunopositive material (E), and a marked co-labelling of GFAP and S100B proteins (F) in the cytoplasm of reactive astrocytes surrounding a blood vessel (arrows). G-I. Cofocal images of a coronal section through the ipsilateral hippocampus showing GFAP-immunoreactivity (G, arrows) and S100B-immunopositive material (H, arrows) in reactive astrocytes. The field in (I) shows S100B-immunopositive material accumulated in the cytoplasm (arrows) and in astrocyte processes (arrowheads) of GFAP-positive astrocytes. J, K. A representative example of sections through the temporal cortex, processed for the co-localization of GFAP (using rhodamine, J) and S100B (using fluorescein, K), after an injection of A β oligomers into the left RSg, at an early (24h) time point. Note GFAP- and S100B-immunoreactivity in astrocytes (J, K, arrows) and in astrocyte process (J, K, arrowheads). The field in (L) shows S100B-immunopositive material in the cytoplasm (arrow) and in astrocyte process (arrowhead), in close association with a blood vessel. Scale bars: Scale bars: 25 μ m (A-L).

DISCUSSION

Beta-amyloid peptide, synaptic pathology, neuronal loss and up-regulation of calpain-1 *in vivo*

A growing body of evidence supports the notion that soluble oligomeric forms of A β peptide may be the proximate effectors of neuronal injuries and death in the early stages of AD (Haass and Selkoe, 2007; Lacor et al., 2007; Lesné et al., 2006; Walsh and Selkoe, 2007). In the present study, we analyzed the ability of A β 1-42 oligomers to produce synaptic alteration, neuronal degeneration, and other neuropathological features of A β toxicity *in vivo* in the rat brain. Upon immunohistochemical examination, A β -oligomer-injected animals exhibited A β -immunopositive material in neurons in the cerebral cortex and hippocampus during the early (24-72h) phases of A β toxicity. Additionally Western blotting analysis confirmed that extracellular application of soluble A β 1-42 oligomers into the rat retrosplenial cortex alters the conformation of A β peptide and induces the accumulation of A β trimers, tetramers, and multimerizes to higher molecular forms (up to 75-80 kDa) in their brains at an early (24h) time point. This finding is consistent with our previous data showing that extracellular injections of A β 1-42 oligomers into the retrosplenial cortex enhance the formation of A β peptide intracellularly (Perez et al., 2010), and provides further support for the idea that A β oligomers and intraneuronal β -amyloid accumulation play a pathophysiological role in *in vitro* and *in vivo* models of AD (Gouras et al., 2005, 2010; Oddo et al., 2006; Takahashi et al., 2004; Tomiyama et al., 2010). Thus, it appears that this rat model is suitable for studying the contribution of both extracellular A β oligomers and intracellular A β accumulation to the neuropathological features induced by A β toxicity. In this context, here we examined whether loss of synapses occurred following injections of A β oligomers into the retrosplenial cortex, an important brain area involved in learning and memory processes (Albasser et al., 2007; Lukoyanov and Lukoyanova, 2006; Nestor et al., 2003; Vann and Aggleton, 2002). We analysed markers for small synaptic vesicles, such as synaptophysin, and for large dense-core vesicles, such as chromogranin A. Our findings showed that immunoreactivity for synaptophysin decreased at an early (24h) time point.

These findings are supported by studies showing that synaptic dysfunction, and in particular the loss of synaptophysin, in various lines of APP mice occurs before the onset of β -amyloid plaque pathology (Heinonen et al., 1995; Knobloch et al., 2007; Lacor et al., 2007; Selkoe, 2002), and brain injections of soluble A β inhibit long-term potentiation in rats (Walsh et al., 2002). Other studies have also demonstrated significant decreases in synaptophysin immunoreactivity in the brains of patients with mild cognitive impairment (Masliah, 2001). Additionally, our immunohistochemical data indicated that injections of A β 1-42 oligomers induced a marked increase in the immunoreactivity for chromogranin A at the centre of the injection of A β peptide in the early (72h) steps of toxicity induced by A β oligomers. Thus, our data strongly suggest that, in rats A β oligomers induce at least two patterns of synaptic dysfunction. These altered synaptic organelles were similar to those characterized previously in AD (Brion et al., 1991; Buttini et al., 2002; Lechner et al., 2004; Masliah et al., 1991). However, which of these synaptic proteins might be responsible for the dysfunction and degeneration of neurons in AD remains a matter of active study and debate. In this regard, further studies should be carried out to evaluate whether the synaptic dysfunction, particularly that associated with synaptophysin and/or with chromogranin A plays a critical role in the neurodegeneration processes induced by A β .

The most striking feature of AD pathology is neuronal loss. In the present study, we also detected neuronal deficits associated with the injection of A β oligomers into the retrosplenial cortex of the rat. In APP-Tg mice, the occurrence of neuronal loss has been reported only after an intense development of amyloid plaques (for a review, Duyckaerts et al., 2008). Recently studies, however, have shown that APP^{E693 Δ} Tg mice, a mouse model of A β oligomers, despite their lack of amyloid plaques, exhibit significant neuronal loss in the hippocampal CA3 region at 24 months (Tomiyama et al., 2010). Previous studies have shown that the reduction of neurons *in vivo* is associated with a deposition of A β deposits (Giovannelli et al., 1995; Gonzalo-Ruiz et al., 2002, 2003; Harkany et al., 1995). To our knowledge, the present contribution is the first report that neuronal loss is induced by A β oligomers *in vivo* in the rat brain, and our find-

ings provide new insight into the pathogenesis of A β and strongly suggest that A β oligomers play a pivotal role throughout the progression of A β toxicity.

Nevertheless, the molecular events associated with the cell death induced by soluble oligomers of A β remain only partially defined. One line of evidence has indicated that the neurotoxicity induced by oligomeric forms of A β 1-42 peptide results in a perturbation of Ca²⁺ homeostasis (DeFelice, 2007; Demuro et al., 2005; Ferreira et al., 2008; Kelly and Ferreira, 2006; Resende et al., 2007; 2008). Evidence has also been gathered to suggest that the disturbance in CA²⁺ homeostasis in turn leads to increased calpain activation (Adamec et al., 2002; Friedrich, 2004; Nixon 2003; Nixon et al., 1994; Raynaud and Marcilhac, 2006; Saito et al., 1993; Wu et al., 2007), and abnormal increases in calpain activity might contribute to A β -induced neuronal degeneration (Chen and Fernández, 2005; Mathews et al., 2002; Vosler et al., 2008; Wei et al., 2008).

Here, we observed that the injection of oligomers of A β 1-42 results in the proteolysis of three calpain-1 subunits, approximately at positions 80-kDa, a 76-kDa, and at 18-kDa. There are clear indications that, following calcium stimulation, the 80 kDa subunit is partially processed autocatalytically to a 76 kDa fragment, and the Ca²⁺-dependent autolysis of the small 30-kDa calpain regulatory subunit is processed to the 18-kDa subunit (Goll, 2003). In addition, previous studies have indicated that the 18-kDa calpain regulatory subunit is critical for calpain activity (Goll, 2003; Vosler et al., 2008). Therefore, the increased expression of the small (18kDa) fragment of active calpain-1 observed in A β 1-42-injected animals as compared with that seen in control (A β 42-1) animals points to a close link between soluble oligomers of A β 1-42 and the calpain-1-dependent pathways in the early steps of toxicity induced by A β . Although the mechanisms underlying the initial activation of calpain are as yet unknown, it is of particular interest to note that an early perturbation of Ca²⁺ homeostasis could play a role in this issue (Friedrich, 2004; Goll, 2003; Nixon, 2003; Vosler et al., 2009).

In addition, we here observed calpain 1-immunopositive material in different cell types, as well as a clear co-localization between calpain-1 and A β -immunoreactivity

in structures-like diffuse aggregate forms. How calpain-1 activity is regulated in cells is still unclear, but previous studies have indicated that the calpain-1 proteolytic system participates in a variety of cellular functions and metabolic process, including APP processing and A β production (Chen and Fernández, 2005; Mathews et al., 2002; Siman et al., 1990). Some evidence has also shown that calpain is involved in the activation of specific kinases, such as cdk5 (Goñi-Oliver et al., 2009), resulting in a cascade of pro-apoptotic processes through tau phosphorylation (Alzner et al., 2004). In light of the above, it seems reasonable to assume that A β 1-42 oligomers induce the activation of calpain-1 in different cell types, thereby promoting calcium influx as an early phenomenon involved in the neurotoxicity of A β and that A β oligomers might be important in the pathogenesis of AD, as has been indicated previously (LaFerla, 2002; Supnet and Bezprozvanny, 2010).

Calcium-dependent protease, calpain-1, and the calcium-binding protein, S100B, in reactive astrocytes

In our previous study, we showed that extracellular injection of soluble A β oligomers initiated a rapid increase in GFAP-immunoreactivity and produced a marked increase in the density of a 48kDa fragment of GFAP (Perez et al., 2010). Here, we confirmed our earlier results showing that A β immunoreactivity is expressed in reactive astrocytes that surround and infiltrate the injection of A β 1-42 peptide into the retrosplenial cortex. Similarly, the present findings show that extracellular injections of A β 1-42 oligomers lead to calpain-1 immunoreactivity, which is normally confined to neurons (Hamakubo et al., 1986; Siman et al., 1985), in reactive astrocytes at an early (24h) time point, increasing at later stages of A β toxicity. Thus, calpain-1 might be involved in the rapid increase in GFAP-IR in response to A β toxicity. Furthermore, our results suggest that the reversible (A β 42-1) peptide produces weak calpain-1 immunoreactivity in reactive astrocytes, most likely due to mechanical lesion of the cortical tissue adjacent to the needle tracts. This finding is consistent with previous reports (Du et al., 1999; Fujita et al., 1998; Lee et al., 2000), founding which calpain activation was found in reactive astrocytes in response to brain injury. Additionally, our results show clear a co-localization between GFAP and calpain 1-immunoreactiv-

ity in reactive astrocytes in close association with blood vessels, including those associated with the meninges, as well as in reactive astrocytes surrounding the subventricular zone of the lateral ventricle. The specific implications of the calcium-dependent protease calpain on astrocytosis are not yet known. One line of evidence indicates that the neurotoxicity induced by A β is primarily mediated by calcium-dependent activation in astrocytes (Abramov et al., 2003; 2004; Rossi and Volterra, 2009). Abnormalities in Ca²⁺ regulation in astrocytes have also been documented in studies of experimental models of AD, suggesting the contributions of these alterations to neuronal dysfunction and cell death in AD (Mattson and Chan, 2003). Since Ca²⁺ waves have been shown to propagate from astrocyte to astrocyte (Kuchibhotla et al., 2009), and from astrocyte to neurons via physical intercellular connections such as gap junctions (Bezzi et al., 2001; Blanc et al., 1998; Nedergaard, 1994), our results suggest that alterations in Ca²⁺ signalling in astrocytes *in vivo* are not confined to the domain of neighbouring synaptic transmission, but may instead elicit larger effects in both astrocytes and neurons, together with a generalized dysfunction in neuron-glia-vascular communications. Complementary to this, other studies have also shown that calpain is involved in the degradation of GFAP in response to brain injury (DeArmond et al., 1983). Indeed, calpain inhibitors have been reported to block proteolysis and the resulting GFAP cleavage, and they decrease reactive gliosis (Du et al., 1999; Gray et al., 2006). Therefore, inhibitors of calpain-1 activity might be useful as potential therapeutic drugs for preventing reactive astrocytosis in response to A β toxicity.

In addition, our results show that extracellular injections of A β 1-42 oligomers lead to an increase in S100B-immunoreactivity in reactive astrocytes at early stages of A β toxicity. This finding is consistent with previous reports showing that higher concentrations of the S100B protein, a calcium-binding protein, mediates glial activation predominantly in brain astrocytes (Mori et al., 2010; Ridet et al., 1997; Steiner et al., 2007; Zimmer et al., 1995). An aberrant production of S100B protein has also been observed in brain damage (Mori et al., 2008); in several neurodegenerative diseases including AD (Griffin et al., 1998; Mrazek and Griffin, 2001; Van Eldik and

Griffin, 1994), and in a transgenic mouse model of AD (Sheng et al., 2000). The S100B protein is thought to produce neuronal damage by causing over-expression of inducible nitric oxide synthase (iNOS) (Hu et al., 1996) and the subsequent release of nitric oxide (NO) from activated astrocytes (Donato, 2001; Hu et al., 1997; Petrova et al., 2000; Rothermundt et al., 2003). Therefore, the subsequent neuronal death might be the result of the oxidative stress generated, at least in part, by astrocytic dysfunction.

In conclusion, the data presented here call for more studies looking at astrogliosis and pathological neuronal alterations as integrated phenomena. In particular, it becomes more and more evident that astrocyte dysfunction cannot be simply considered as a marginal event or late reaction to neuronal injury, but rather as an intrinsic component of the neurodegeneration processes induced by A β .

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ABBREVIATION FOR FIGURES

CA1	field CA1 of Ammon's horn
cg	cingulum
RSa	retrosplenial agranular cortex
RSg	retrosplenial granular cortex
Te	temporal cortex
VL	lateral ventricle

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