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Quantitative evaluation of MRI and histological characteristics of the 5xFAD **Q4**1 Alzheimer mouse brain 9

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ABSTRACT

Assessment of β -amyloid (A β) plaque load in Alzheimer's disease by MRI would provide an important bio- 20 marker to monitor disease progression or treatment response. Alterations in tissue structure caused by the 21 presence of A β may cause localised changes that can be detected by quantitative T₁ and T₂ relaxation time 22 Q2 measurements averaged over larger areas of tissue than that of individual plaques. We constructed depth pro- 23 files of the T₁ and T₂ relaxation times of the cerebral cortex with subjacent white matter and hippocampus in 24 six 5xFAD transgenic and six control mice at 11 months of age. We registered these profiles with correspond- 25 ing profiles of three immunohistochemical markers: β -amyloid; neuron-specific nuclear protein (NeuN), a 26 marker of neuronal cell load; and myelin basic protein (MBP), a marker of myelin load. 27We found lower T_1 in the 5xFAD transgenic mice compared to wild type control mice at all depths, with max- 28 imum sensitivity for detection at specific layers. T_1 negatively correlated with A β staining intensity in the 29 5xFAD mice which had no changes in NeuN and MBP staining compared to wild type mice. We postulate 30 that these relaxation time changes are due to the presence of β -amyloid in the transgenic mice. It may be clin- 31 ically feasible to develop a similar layered analysis protocol as a biomarker for Alzheimer's disease in humans. 32 © 2013 Published by Elsevier Inc. 33

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Introduction 38

With the advent of new treatment and prevention strategies for 39 Alzheimer's disease (AD), it is increasingly important to have a clini-40 cal biomarker of the disease suitable for selecting at-risk individuals 41 for early intervention, as well as providing a means of pre-morbid di-42 43 agnosis and monitoring of disease progression.

The progression of AD is known to be associated with the accumu-44 lation and aggregation of a small (40-42-residue) peptide, termed 45 β -amyloid (A β). According to the amyloid hypothesis, A β aggregation 46 47 is thought to be a primary cause of the neuronal dysfunction and memory loss seen in the disease (Selkoe, 2008). It is possible to detect 48 AB in the living brain using the radiopharmaceutical compounds such 49 50as [11C]-Pittsburgh compound B (Klunk et al., 2005) and [18F]-AV-45 (Choi et al., 2009) and positron emission tomography. However, 51 52this imaging modality is only available in a few centres. On the other 53hand, magnetic resonance imaging (MRI) is widely available but

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there are not yet full clinically validated MRI imaging protocols for 54 directly assessing amyloid load and its effect on brain in Alzheimer's 55 disease. MR imaging has demonstrated visualisation of individual 56 plaques in transgenic Alzheimer mice using high-field MRI systems 57 with a number of different methodologies applied to in vivo and ex 58 *vivo* samples. The sizes of amyloid plaques are at the limit of the MRI 59 resolution available for rodent studies and detection requires careful 60 optimisation of imaging protocols and analysis. Using high magnetic 61 field strengths, high spatial resolution imaging and relatively long 62 acquisition times, individual amyloid plaques can be resolved on T₂ 63 and T_2^* weighted MR imaging without the use of exogenous contrast 64 agents (Benveniste et al., 1999; Jack et al., 2004, 2005; Lee et al., 65 2004; Poduslo et al., 2002; Vanhoutte et al., 2005; Zhang et al., 2004) 66 and the compartmentalisation of iron within plaques leading to in- 67 creased paramagnetic susceptibility has been postulated as the 68 major contributing factor to date (Benveniste et al., 1999; Braakman 69 et al., 2006; Falangola et al., 2005a, 2005b; Jack et al., 2004, 2005; 70 Lee et al., 2004; Vanhoutte et al., 2005). An alternative approach 71 uses the administration of exogenous contrast agents to enable the 72 detection of amyloid plaques in the brain by increasing the contrast 73 between the parenchyma and the amyloid deposits (Higuchi et al., 74 2005; Petiet et al., 2012; Poduslo et al., 2002; Sigurdsson et al., 2008; 75 Wadghiri et al., 2003). However there are major technical and image 76 sensitivity challenges to performing such high spatial resolution MRI 77 for routine clinical MRI studies in man. 78



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Abbreviations: 5xFAD, Five familial Alzheimer's disease mutations; Aβ, β-Amyloid; AD. Alzheimer's disease: FOV. Field of view: H. Hippocampus: LC. Lower cortex: MBP. Myelin basic protein; MRI, Magnetic resonance imaging; NeuN, Neuron-specific nuclear protein; ROI, Region of interest; SI, Signal intensity; TE, Echo time; TR, Repetition time; UC, Upper cortex; WM, White matter.

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79 In a more clinically feasible setting where lower magnetic field 80 strengths are used and there is a practical limit to patient imaging 81 time, currently obtainable spatial resolutions cannot resolve individu-82 al amyloid plaques. Alternatively, quantitative assessment of mean tissue relaxation times within regions of interest (ROI) may provide 83 indirect means to assess changes in the tissue-water environment 84 associated with amyloid burden. Studies using the low resolution 85 86 MRI approach in the Tg2576 and APP/PS1 transgenic mouse strains 87 have found T₂ reductions in some brain regions which also correlate 88 with amyloid deposition: in the subiculum (El Tannir El Tayara et al., 2006) hippocampus and cortical regions (Braakman et al., 2006; 89 Helpern et al., 2004; Teipel et al., 2011). The exact causes for the sig-90 nal changes remains unclear as no changes in T₂ were also seen in 9192other brain regions containing amyloid deposits. Given that brain regions containing intracellular amyloid are associated with gliosis 93 (a marker of neuroinflammation and a hallmark of AD) and neuronal 94 loss (Schmitz et al., 2004) it is likely that changes in T₁ and T₂ mea-95 surements may be due to a combination of factors. However, the re-96 gional variation of these tissue changes may be too subtle to detect 97 within large ROIs which also average over less affected areas. 98

The cerebral cortex has a multi-layered architecture of cortical re-99 gions each defined by a particular density of cell, myelin and receptors 100 101 (Zilles, 2004). The use of the profile analysis aids the visualisation of the specific changes in T_1 and T_2 associated with regional changes in 102 tissue architecture of individual layers and may help determine the 103 particular contributions to the T₁ and T₂ changes. MRI of human and 104 mouse brain has demonstrated that the layered structure of the cortex 105106 is characterised by variation of T₁ and T₂ relaxation times with depth and these MR relaxation rate changes correlate to the varying levels 107 of myelin and neuronal cell density (Boretius et al., 2009; Eickhoff et 108 al., 2005; Walters et al., 2003). Histological studies also suggest that 109 110 amyloid deposition is layered (Clinton et al., 1993). Hence, we have 111 performed a detailed correlation of relaxation time profiles with his-112 tology as a function of cortical depth in AD transgenic mice to establish whether MR relaxation rate profiles follow layer patterns of AB. This 113approach has a particular advantage over the standard ROI method be-114 cause it simplifies the visualisation of cortical regions most sensitive 115116 for T_1 and T_2 changes.

Using 5xFAD transgenic mice and wild type controls, we co-registered 117 T_1 and T_2 profiles of the cerebral cortex with subjacent white matter and 118 hippocampus with histological profiles of AB, neuron-specific nuclear 119 120 protein (NeuN) and myelin basic protein (MBP) staining in order to compare the MRI with underlying histology. Since it is known that 121 myelin and cell density can affect T₁ and T₂, we used these histological 122 123 markers as positive controls; to validate our method of mapping T_1 and T₂ changes with the anatomical variations in myelin and cell densi-124 125ty and; to confirm that relaxation rate differences between 5xFAD and control mice are associated with AB deposition patterns. 126

127 We found a spatial pattern of significant reductions in T_1 which 128 broadly corresponded to the pattern of A β deposition in the transgen-129 ic mice. We postulate that the reductions in T_1 are due to the presence 130 of A β or its effects on the structure of brain tissue and as such it may 131 be worth exploring the feasibility of using quantitative profile mea-132 sures of T_1 and through cortical layers as a biomarker of Alzheimer's 133 disease in humans.

134 Methods

135 Transgenic mice

The 5xFAD transgenic mouse developed by Oakley et al. (2006) using three mutations in amyloid precursor protein and two in presenilin-1, achieve massive amyloid burden with gliosis and neuronal loss by 9 months of age with amyloid deposition starting at 2 months. 5xFAD transgenic mice were purchased from Jackson Laboratory [stock number 006554; strain name B6SJL-Tg(APPSwFILon, PSEN1*M146L*L286V)6799Vas/Mmjax]. A colony of transgenic and 142 wild type controls were produced by crossing hemizygous 5xFAD 143 mice with non-carrying (wild type) mice, B6SJF1/J (stock number 144 100012). Mice were genotyped using polymerase chain reaction and 145 gel electrophoresis. Six 5xFAD transgenic mice of 11 months of age 146 were used. Six age-matched non-transgenic littermates served as con- 147 trols. A mixture of males and females were used in both groups. 148

In vivo MRI

In vivo MR images were acquired on a 4.7 T Varian horizontal bore 150 MRI system with a mouse brain coil setup comprising a volume trans-151 mit coil and surface coil receive (RAPID Biomedical GmBH, Würzburg-152 Rimpar, Germany). Mice were initially anesthetised with isoflurane, 153 consisting of an O_2 mixture (2 l/min), administered in a sealed tank 154 fitted to an isoflurane scavenger system. Subsequently, a 1:2:1 mixture 155 of Hypnorm (0.315 µg/ml fentanyl citrate and 10 mg/ml fluanisone); 156 Q3 sterile water and; Hypnovel (5 mg/ml Midazolam) was administered 157 intraperitoneally at 10 mg/kg bodyweight. Body temperature was maintained by a warming bed integrated into the imaging coil apparatus. 159

A spin echo multi-slice sequence was used for T_2 and T_1 mea- 160 surements. For T_2 measurements: repetition time (TR) = 2000 ms; 161 echo time (TE) = 15, 25, 40 and 60 ms; field of view (FOV) = 30×162 30 mm; matrix = 128×128 ; nine contiguous slices of 1 mm thick- 163 ness; total acquisition time = 20 min. For T_1 measurements, TR = 164 250, 500, 1000, 2000, 4000 ms; TE = 14 ms; FOV = 30×30 mm; 165 matrix = 128×128 ; nine contiguous slices of 1 mm thickness; 166 total acquisition time = 17 min. The most anterior of the nine slices 167 was positioned just behind the olfactory bulb and the same slice posi- 168 tioning was used for both T_2 and T_1 measurements. The selection of TE 169 and TR times were chosen to adequately quantify the range of T_2 and 170 T_1 relaxation times in the mouse brain.

ImageJ software (Rasband, W.S., ImageJ, U. S. National Institutes of 172 Health, Bethesda, Maryland, USA, http://imagej.nih.gov/ij/, 1997–2012) 173 was used to generate T₂ and T₁ quantitative maps. For each dataset, a 174 stack of images was created for each slice with increasing TE (T₂ map) 175 or TR (T₁ map) and Stackreg (Thevenaz et al., 1998) was applied to 176 co-register image slices prior to generating quantitative relaxation 177 time maps. The MRI Analysis Calculator ImageJ plugin by Karl Schmidt 178 was used to transform the image stacks into T₁ and T₂ quantitative 179 maps by fitting signal intensities (SI) to the equations, SI = M₀ [1 - 180 exp(-TR/T₁)] and SI = M₀ [exp(-TE/T₂)], respectively, on a pixel-181 by-pixel basis.

Histology

Immediately after MR imaging, mice were culled by decapitation 184 and whole skulls collected and placed into formalin for 7 days. Brains 185 were removed from the skull and sliced into 1 mm thick coronal sec- 186 tions using a matrix to match the imaging slices taken during MRI. 187

Serial sections taken from the 1 mm mouse brain slices were stained 188 for AB (Novocastra monoclonal B-amyloid clone 6F/3D (Leica Micro- 189 systems, Newcastle-upon-Tyne, UK)); vertebrate neuron-specific nu- 190 clear protein (NeuN, Millipore monoclonal NeuN clone A6, Fisher 191 Scientific UK Ltd, Leics, UK) and; myelin basic protein (MBP, Novocastra 192 monoclonal clone 7H11, Leica Microsystems, Newcastle-upon-Tyne, 193 UK). The A β antibody epitope is aa8–17 of mature amyloid A4/A β , 194 which is the same as aa660–669 of human amyloid A4/A β protein pre- 195 cursor. Staining is transmembrane for APP and extracellular for AB. 196 After treatment of sections with epitope retrieval solution pH 9 at 197 100 °C for 30 min and 90% (v/v) formic acid for 5 min, A β antibody 198 was applied for 15 min at a dilution of 1:50. For NeuN and MBP staining, 199 sections were treated first with antigen retrieval solution at pH 6 for 200 30 min at 100 °C. NeuN reacts with most neuronal cell types through- 201 out the nervous system of mice. NeuN antibody was applied for 202 15 min at a dilution of 1:100. The MBP antibody is reactive with 203

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