

Neuroinflammation in depression: microglia activation and dysfunction

Dora Brites, PharmD, PhD



Conference Presentation Synopsis

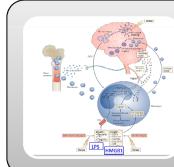


europsychiatry

People with HIV infection suffer from depression and inflammation spreading

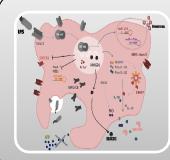
- Decline in attention, learning and executive function are associated to depression
- Elevated viral load in CNS HIV crosses BBB (cell-free virus and within infected monocytes and T cells)
- Increased production of IL-1 β and TNF- α and passage through BBB to activate microglia and astrocytes

http://slideplayer.com/slide/3023319/



Depression is a disorder of multifactorial origin, often associated with neuroinflammation

- Stress/Impaired neurogenesis/Defects in synaptic plasticity
- Loss of oligodendrocytes
- Astrocyte deficits (low density of GFAP+ cells)
- Abnormal activation of microglia (excessive cell activation and increased cell number, microglia decline and senescence)

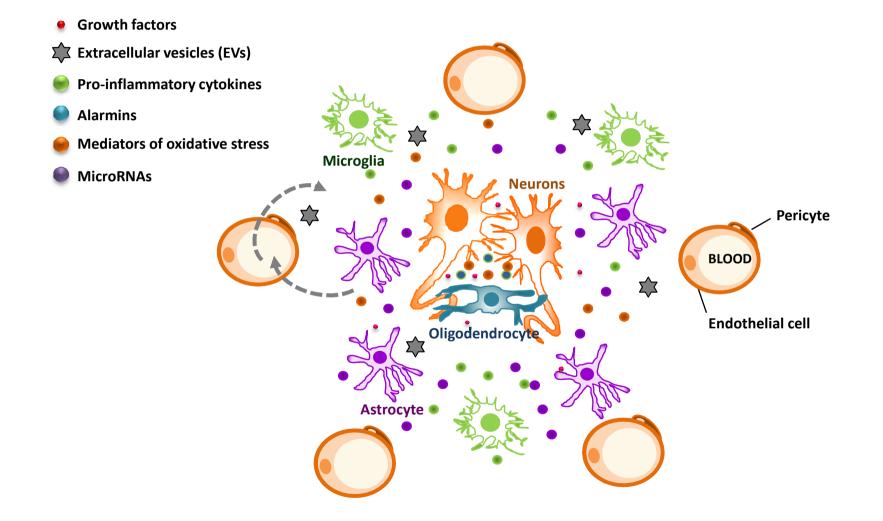


Development of symptoms of depression results from chronic inflammation and impaired microglia function (microgliopathy)

- Increased levels of proinflammatory cytokines
- NLRP3-inflammasome activation in microglial cells
- Induced nuclear factor kappaB (NF-kB) inflammatory pathway
- Pathogenic extracellular vesicles/exosomes (altered microRNA cargo? Not known)



Neuron glia biology in health and disease

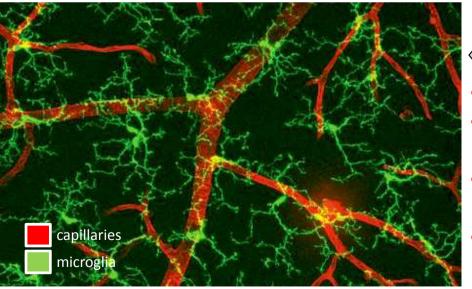


Adapted from: http://imed.ulisboa.pt/research/program-areas/drug-discovery/neuron-glia-biology-in-health-and-disease/

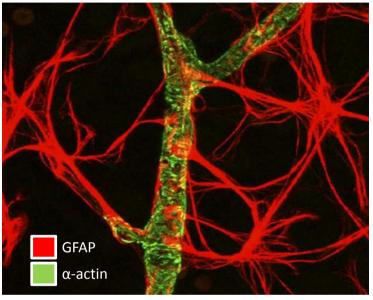


Role of astrocytes and microglia in homeostatic conditions

- Astrocytes are the most abundant cells in the central nervous system (CNS) that provide nutrients, recycle neurotransmitters and contribute to intercellular network homeostasis
- Astrocytes also regulate neuronal functions including the generation of new nerve cells and participate in functional synapse remodeling



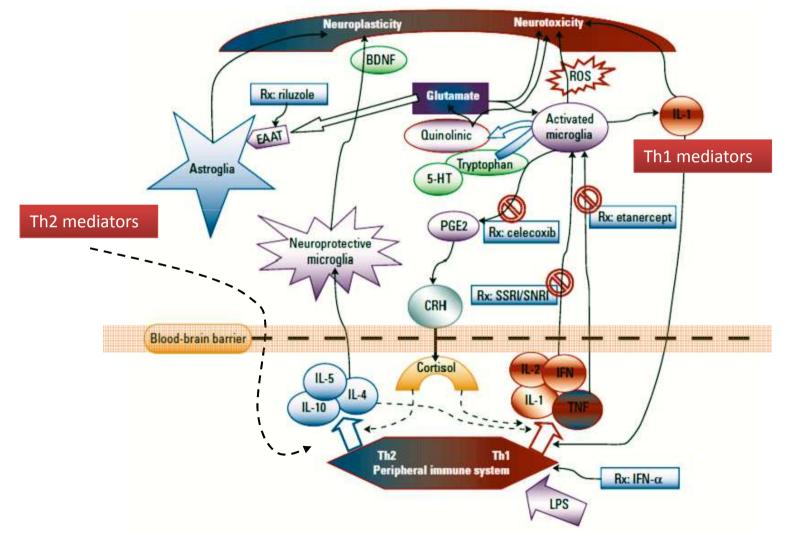
http://usceye.org/vitreoretinal-correction/



Pekny and Pekna , Physiol Rev 2014

- Microglia play a role in the innate immunity
- Microglia are involved in neural plasticity (synapse remodeling) and homeostasis
- Microglia have highly motile processes to monitor the microenvironment
- Microglial reactivity to stimuli can be reparative but if in excess is detrimental

Dysruption of neuroprotective/neurotoxic balance may lead to neuroinflammation and depression



Neuropsychiatry

From Mcnally et al. CNS Spectr 2008, 13, 501-10



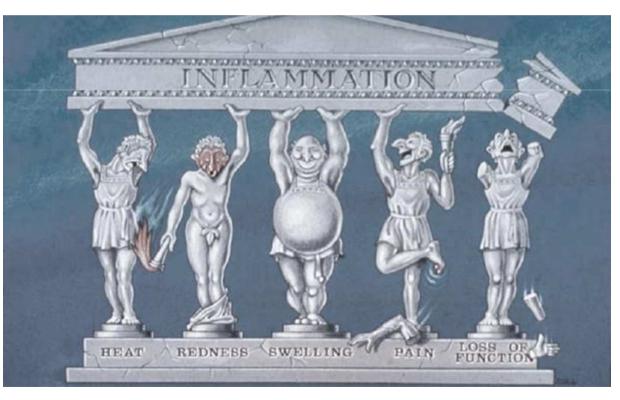
Inflammation in Chronic HIV Infection



http://www.thebodypro.com /content/art58344.html

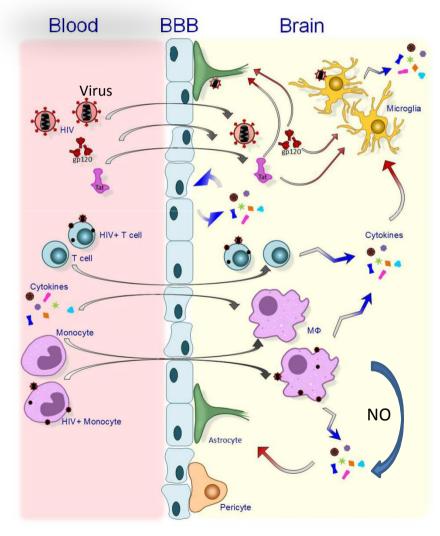
"HIV-infected persons have persistent, low-grade inflammation and immune activation that are strongly associated with a heightened risk for depression"

Erlandson and Campbell J Infect Dis. 2015



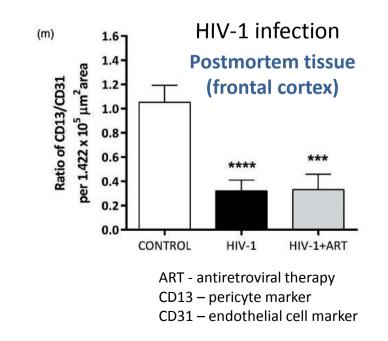
http://www.precisionnutrition.com/research-review-inflammation-exercise

Viral and cellular transmigration from peripheral blood to the brain in neuroinflammation by HIV



Veuropsychiatry

HIV-infected monocytes and T cells not only infect brain resident cells upon migration into the CNS but also produce proinflammatory cytokines, such as TNF- α and IL-1 β that further activate microglia and astrocytes, while causing a diminished BBB coverage by pericytes



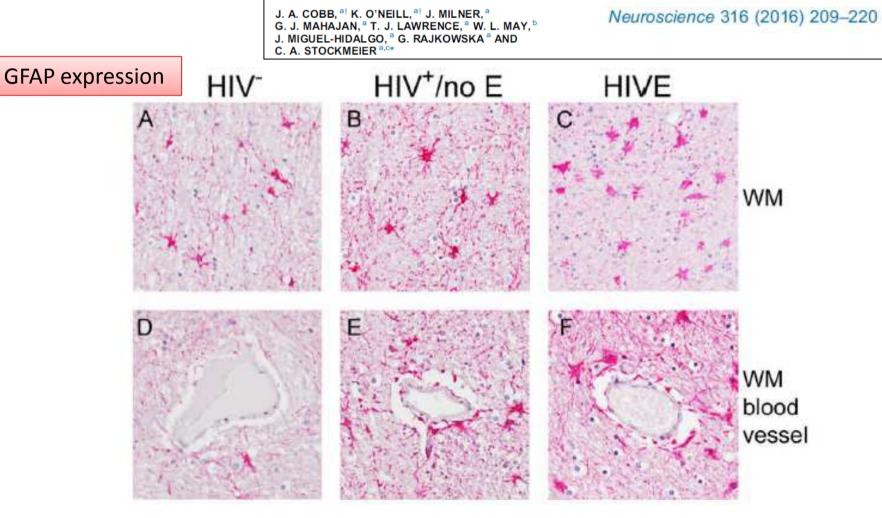
From Persisky et al J Cereb Blood Flow Metab. 2016

Adapted from Hong and Banks Brain Behav Immun 2015



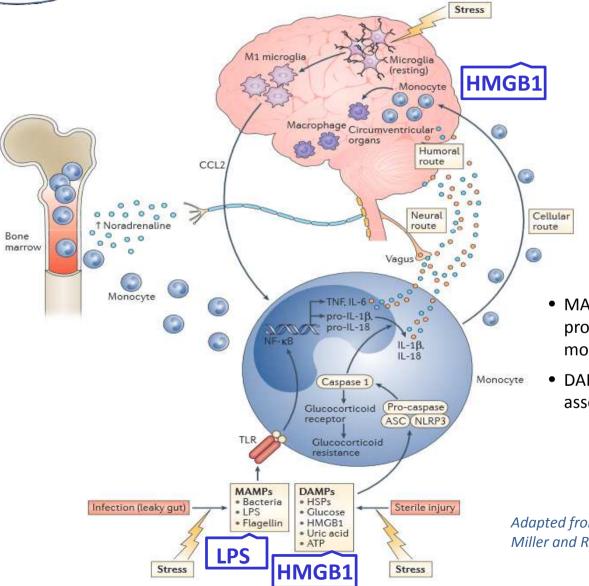
GFAP expression and astrocyte morphology in HIV infected patients with/without encephalitis

DENSITY OF GFAP-IMMUNOREACTIVE ASTROCYTES IS DECREASED IN LEFT HIPPOCAMPI IN MAJOR DEPRESSIVE DISORDER



Tavazzi et al Curr HIV Res 2014

Transmission of stress-induced inflammatory signals from the periphery to brain

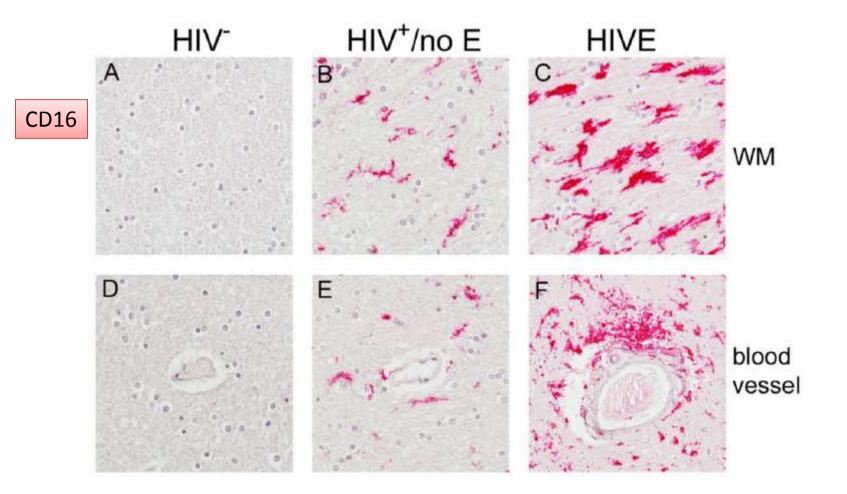


Veuropsychiatry

- MAMPs Bacteria and bacterial products such as microbial-associated molecular patterns leaked from the gut
- DAMPs Stress-induced damageassociated molecular patterns



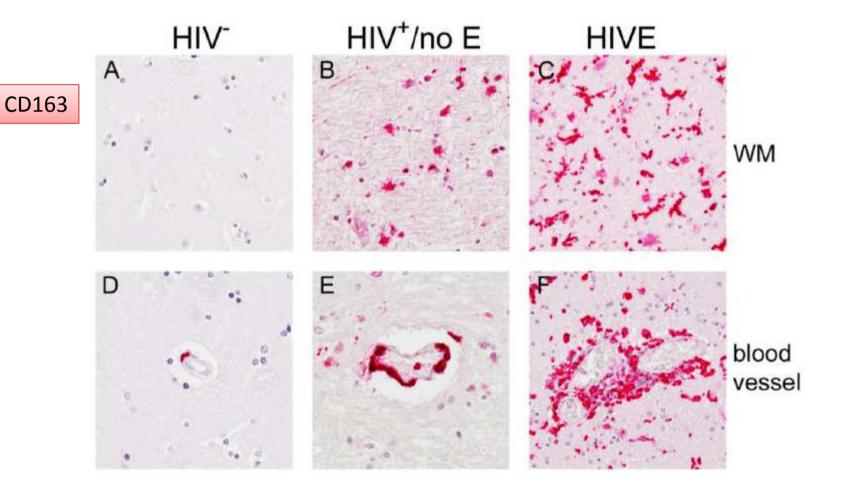
CD16⁺ MΦs/microglia are observed in the CNS of HIV+ patients with/without encephalitis



Neuropsychiatry

Tavazzi et al Curr HIV Res 2014

CD163⁺ MΦs/microglia are observed in the CNS of HIV+ patients with/without encephalitis



Neuropsychiatry

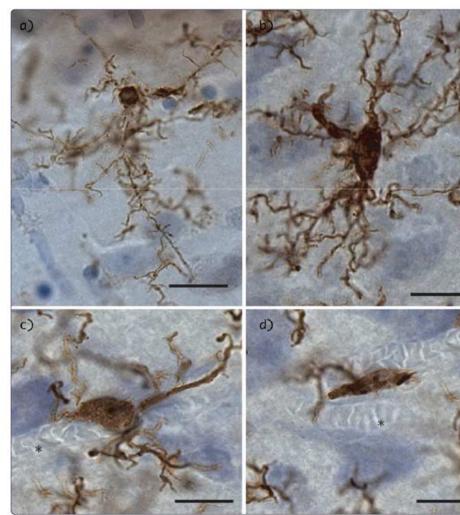
Tavazzi et al Curr HIV Res 2014

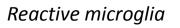


Microglia morphologies and morphometric characterization

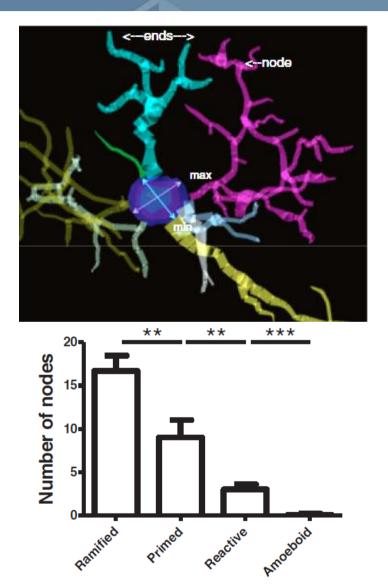
Ramified microglia

Primed microglia





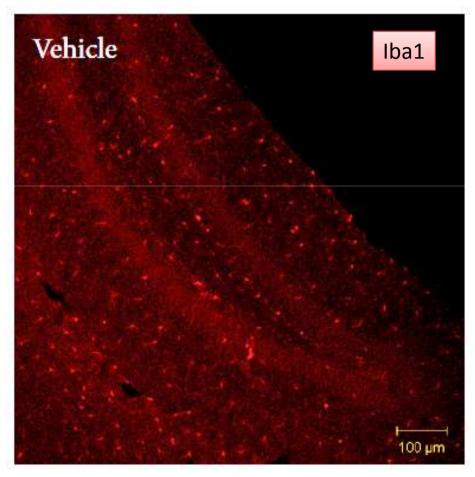
Amoeboid microglia



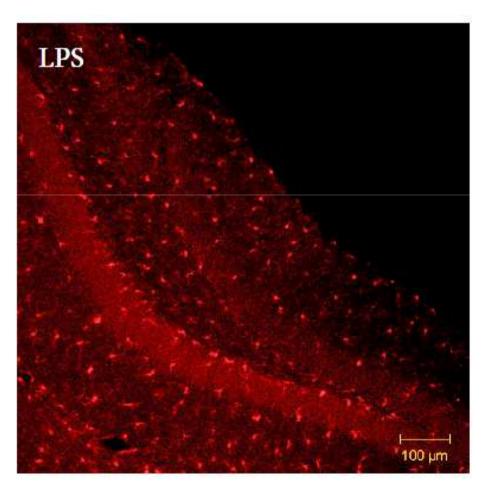
From Torres-Platas et al. J Neuroinflammation 2014

Neuropsychiatry

Peripheral LPS increases IBA1 immunoreactivity in the hippocampal dentate gyrus



LPS injection (0.63 mg/kg, i.p.) induces microglial activation (increased IBA1 immunoreactivity) 24 h after administration



From Biesmans et al. Mediators Inflamm. 2013



RESEARCH



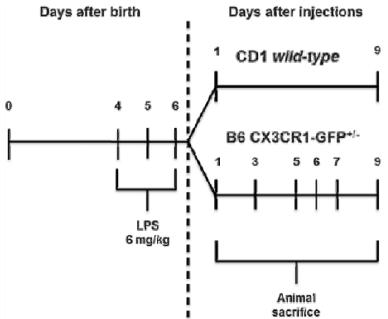
Open Access

Systemic inflammation in early neonatal mice induces transient and lasting neurodegenerative effects

Filipa L Cardoso¹, Jasmin Herz², Adelaide Fernandes^{1,3}, João Rocha¹, Bruno Sepodes¹, Maria A Brito^{1,3}, Dorian B McGavern^{2*} and Dora Brites^{1,3*}

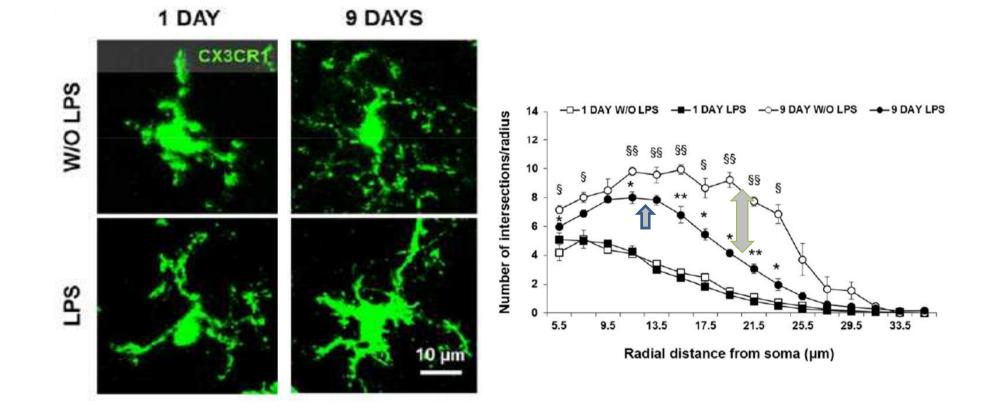


From: http://www.ahwla.org.uk/site/tutorials/BVA/BVA05-Mouse/Mouse.html

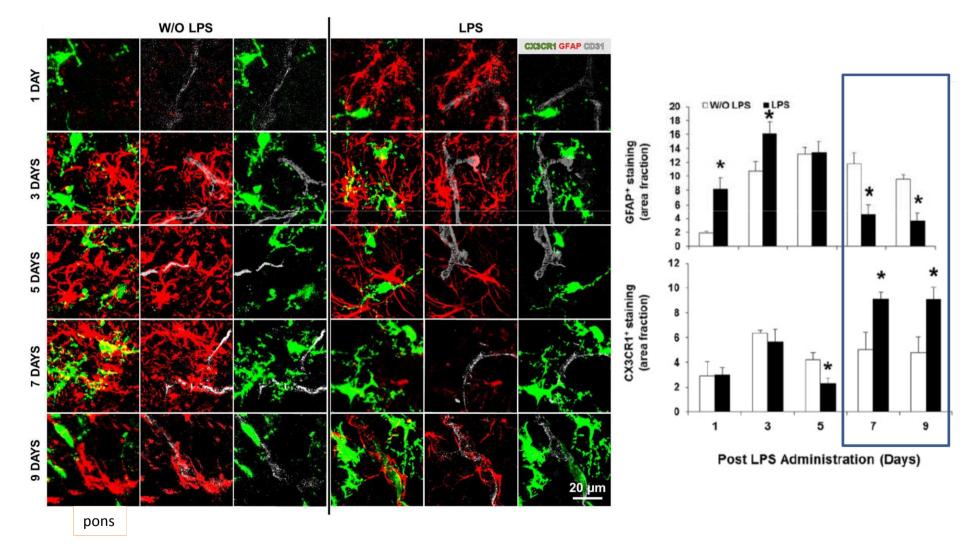




Systemic LPS triggers microglia amoeboid morphology

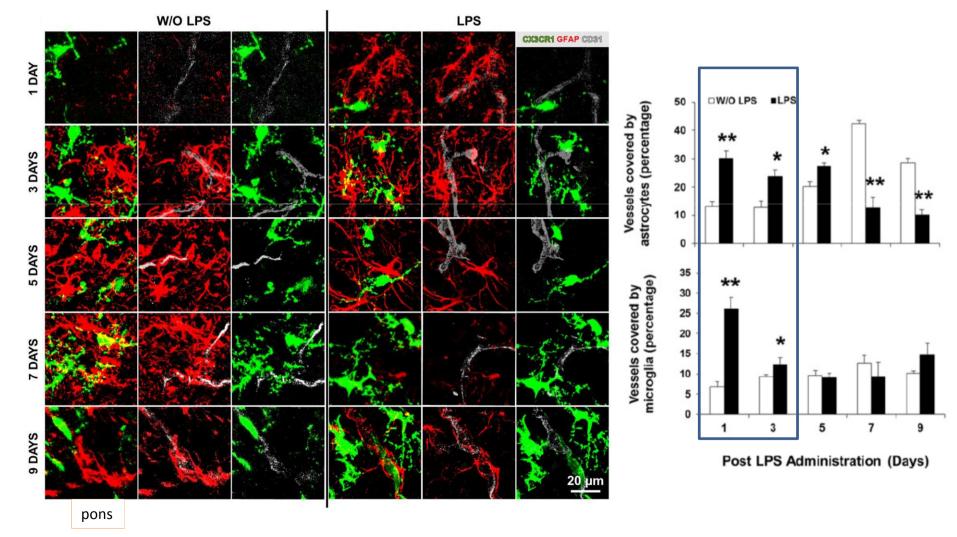


Astrocyte reactivity precedes microglia activation



Neuropsychiatry

LPS triggers an early activation of astrocytes and microglia located near the blood vessels



Neuropsychiatry

Conclusions

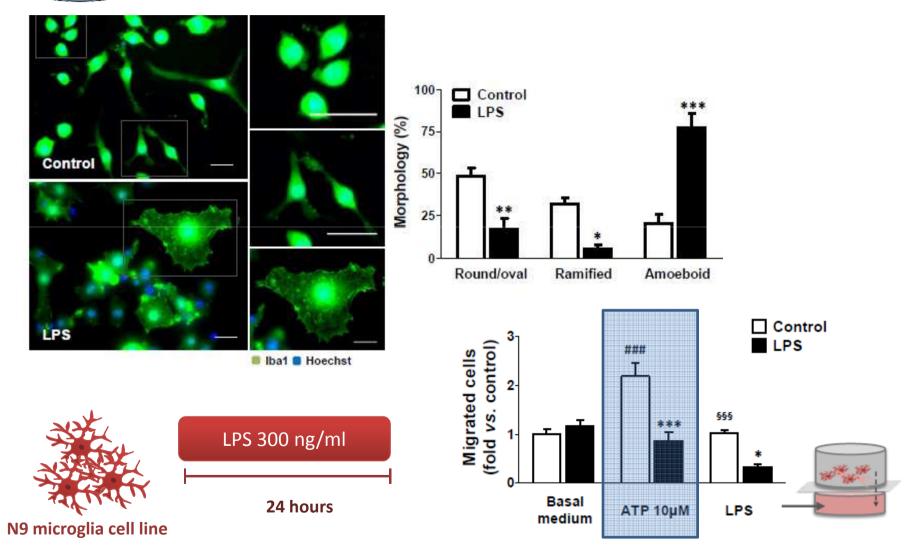
 Peripheral inflammation by LPS leads to neuroinflammation and changes in microglia cell shape

iropsychiatry

- First changes are produced at the blood-brain barrier with increased *astrogliosis* and *microgliosis*
- Delayed effects of LPS effects include *decreased density of astrocytes* and *proliferation of microglia* in the brain parenchyma



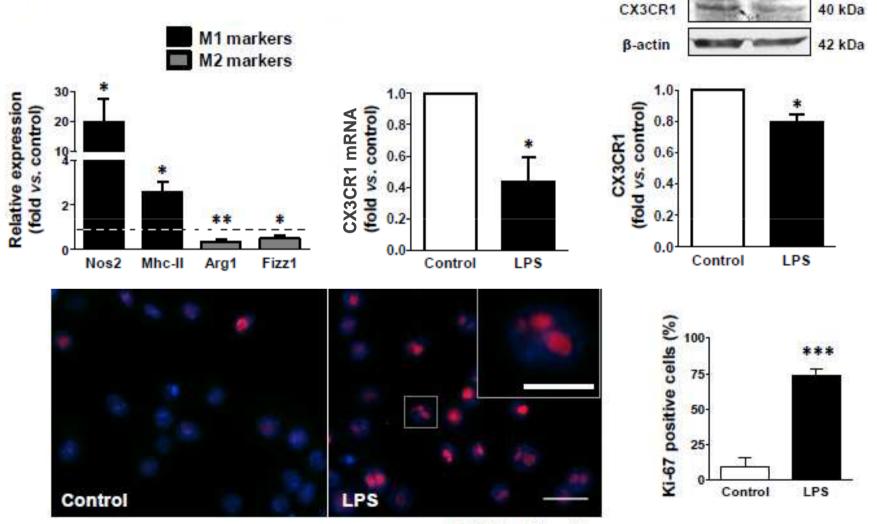
LPS switches microglia morphology towards an amoeboid shape and decreases cell migration



Veuropsychiatry

Adapted from from Cunha et al Mediators Inflamm (submitted by invitation)

LPS switches microglia towards the M1 subtype and leads to increased cell proliferation



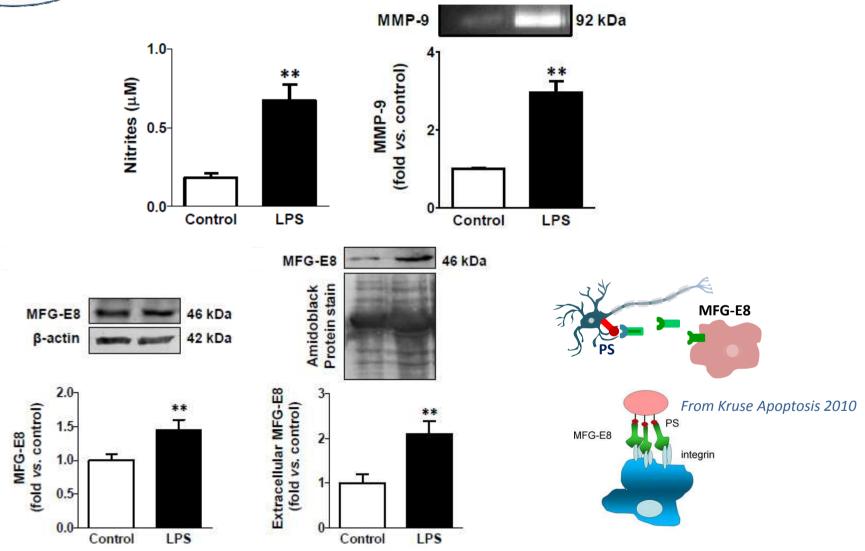
Veuropsychiatry

Ki-67 Hoechst

Adapted from from Cunha et al Mediators Inflamm (submitted by invitation)

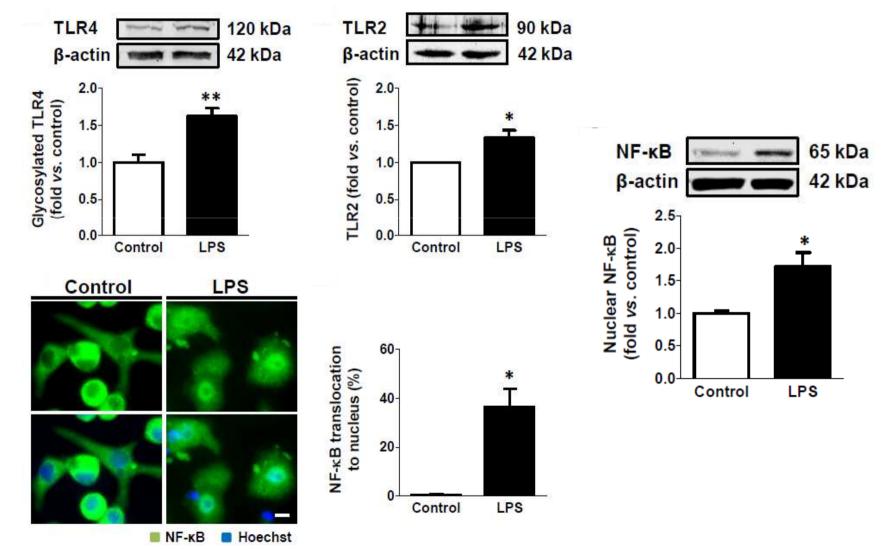


M1 polarized microglia release NO, MMP-9 and MFG-E8



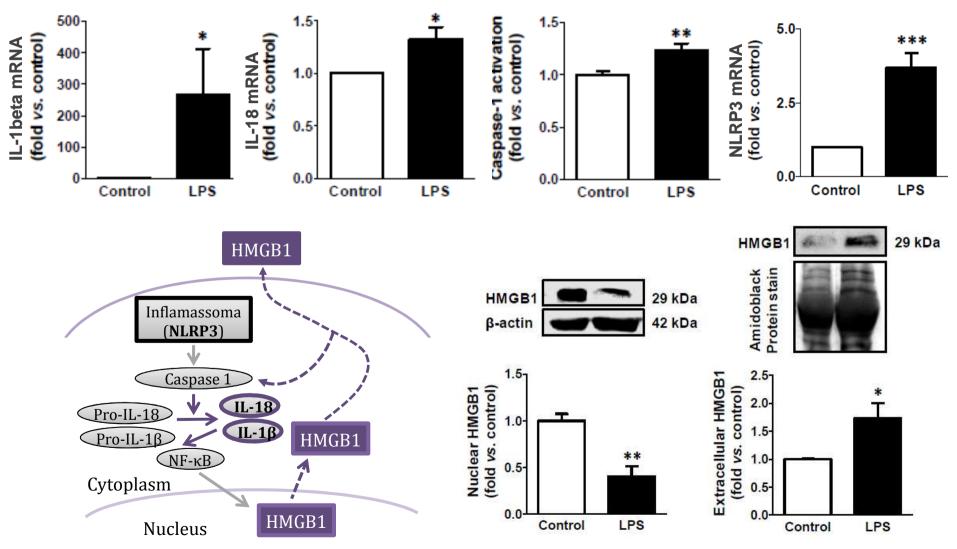
Adapted from from Cunha et al Mediators Inflamm (submitted by invitation)

M1-polarized microglia evidence activation of TLR4/TLR2/NF-κB signaling pathway



Veuropsychiatry

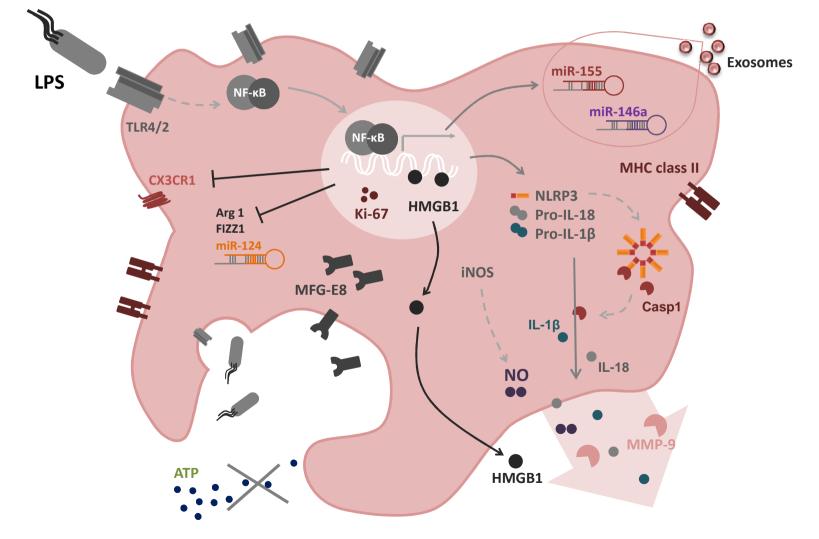




europsychiatry

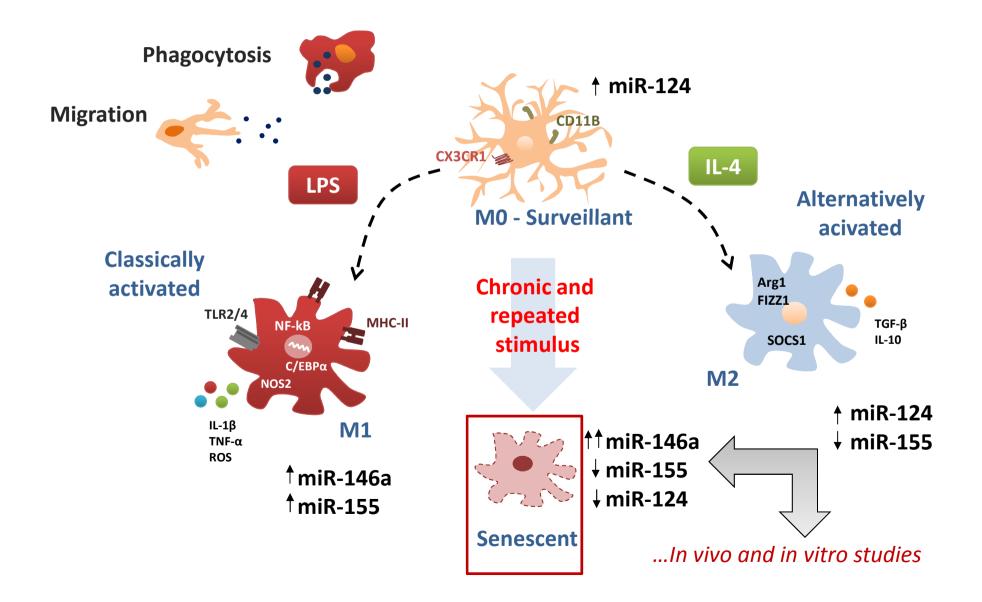
Adapted from from Cunha et al Mediators Inflamm (submitted by invitation)





Adapted from Cunha et al Mediators Inflamm (submitted by invitation)

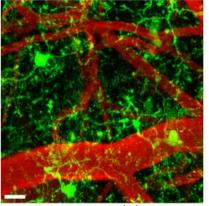
Diversity of microglia phenotypes



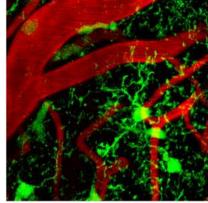
Neuropsychiatry



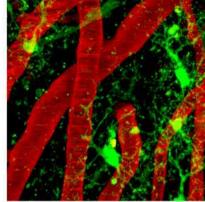
Age-related changes in microglia morphology assessed by in vivo imaging



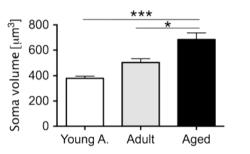
young adult



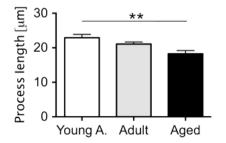
adult



aged animal





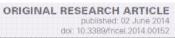


Hefendehl et al. Aging Cell 2014

HIVE

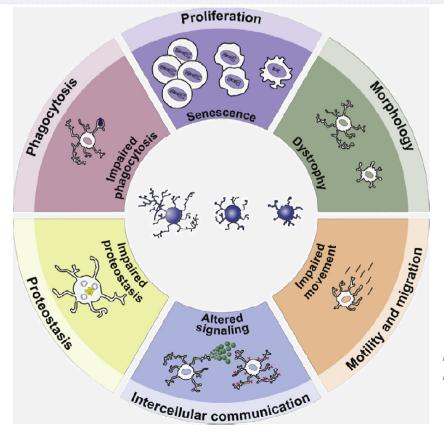
Microglia senescence

frontiers in CELLULAR NEUROSCIENCE



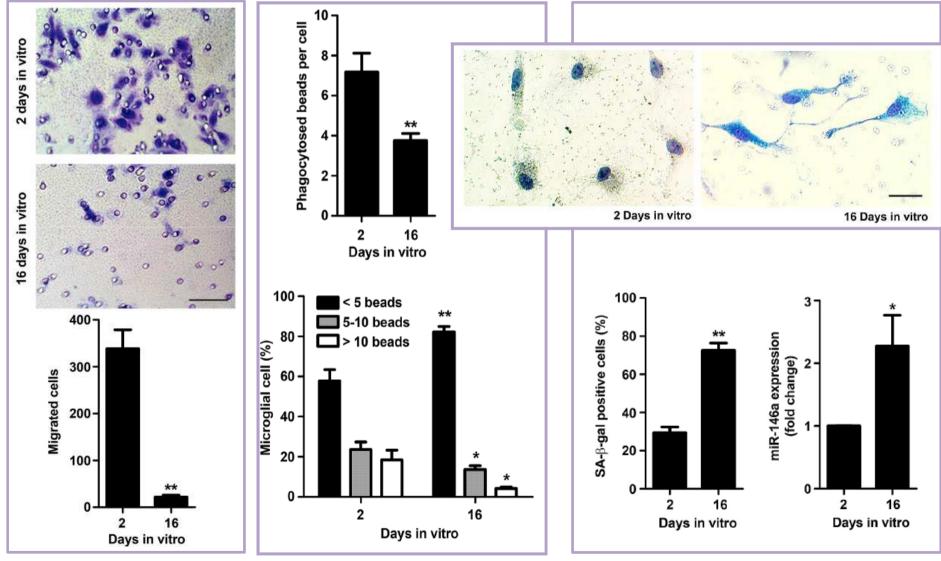
Microglia change from a reactive to an age-like phenotype with the time in culture

Cláudia Caldeira^{1,2}, Ana F. Oliveira¹, Carolina Cunha¹, Ana R. Vaz^{1,3}, Ana S. Falcão^{1,3}, Adelaide Fernandes^{1,3} * and Dora Brites^{1,3} *



Mosher and Wyss-Coray, Biochem Pharmacol 2014

Aged microglia lose migration and phagocytic abilities, and show markers of cell senescence

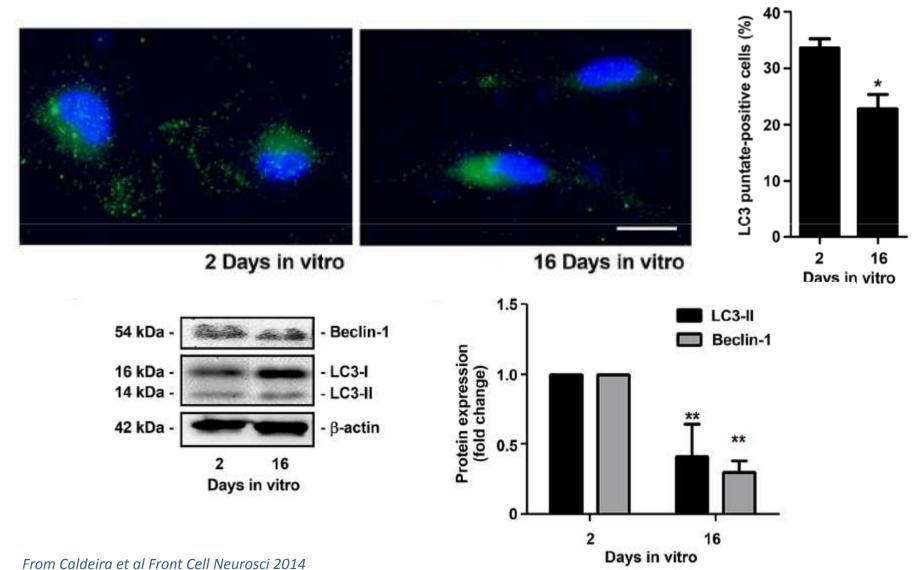


Veuropsychiatry

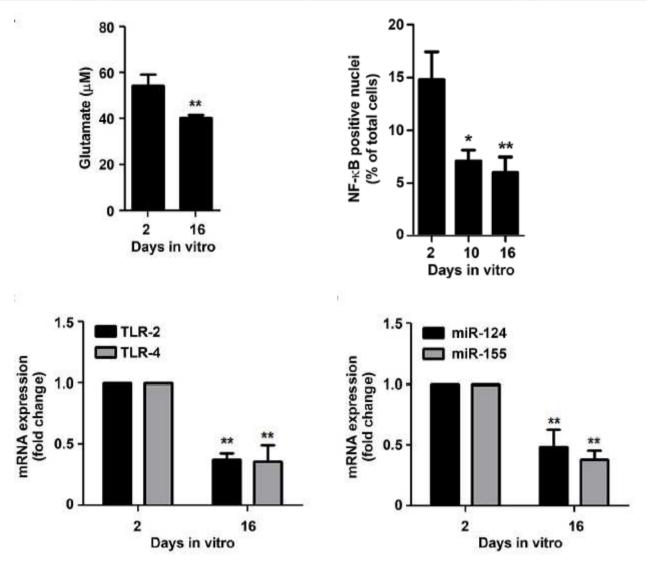
From Caldeira et al Front Cell Neurosci 2014



Senescent microglia show reduced autophagic capacity



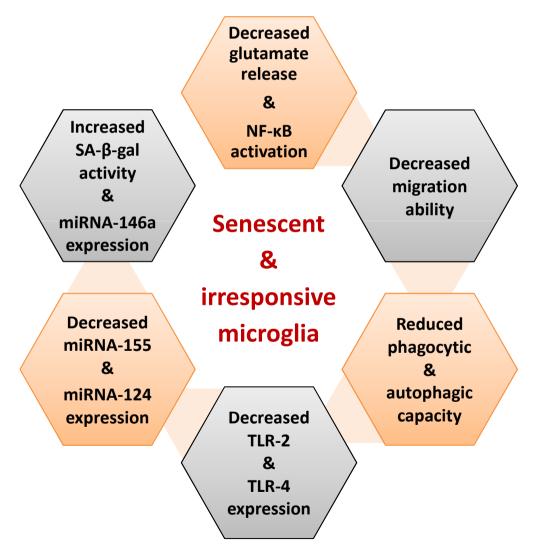
Senescent microglia show reduced glutamate release, NF-κB activation, and TLRs & inflamma-miRs expression



europsychiatry



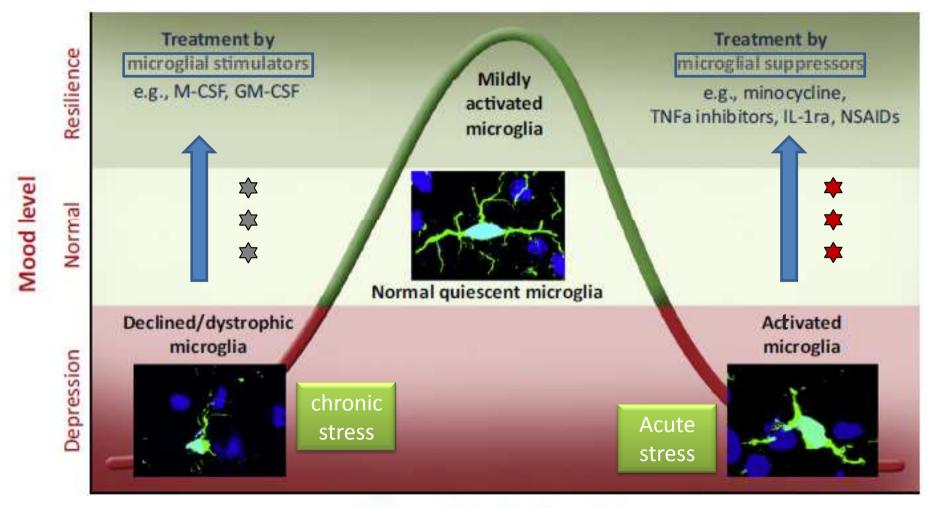
Conclusions



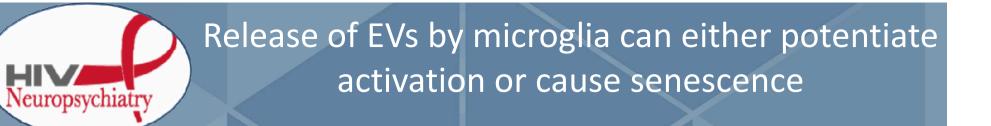
Adapted from Brites D AIMS 2015

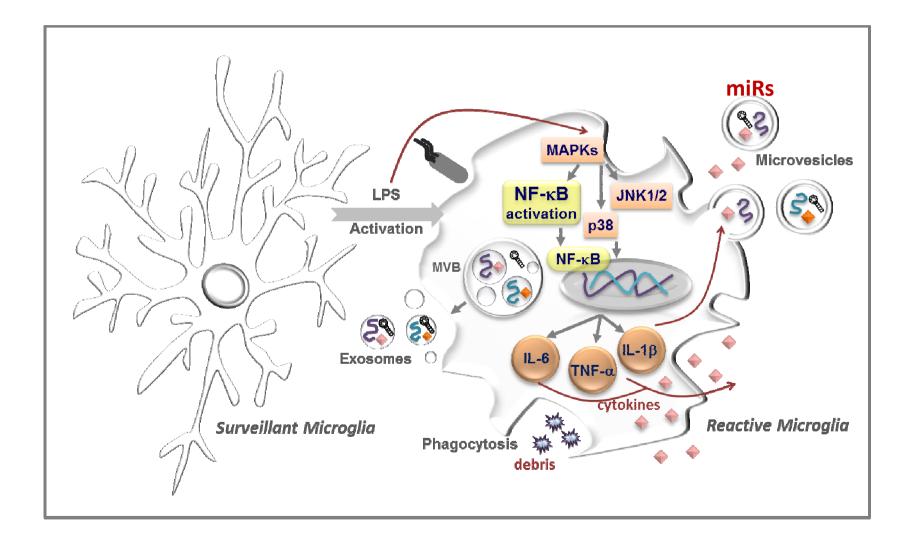


Summary of microglia subtypes in mood disorders



Microglial activation status





From Brites and Fernandes, Front Cell Neurosci 2015

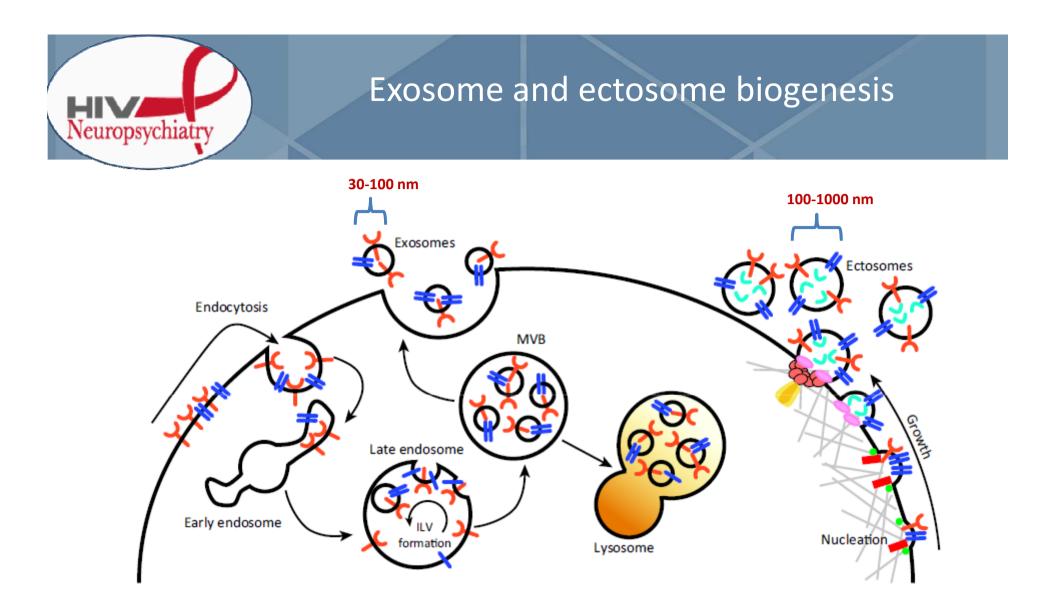


Long and short cell-to-cell communication

Extracellular vesicles (EVs):

- Exosomes
- Ectosomes

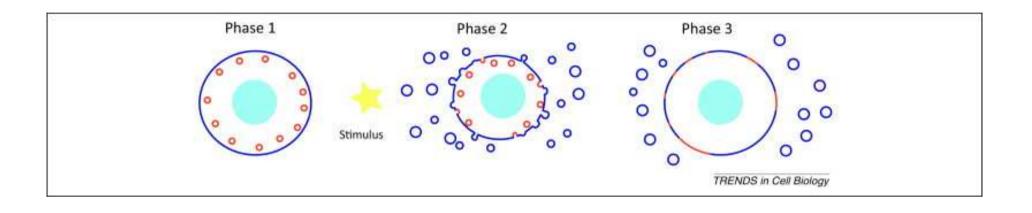
also... shedding vesicles, microvesicles, exosome-like vesicles, nanoparticles, microparticles and oncosomes



ILVs – intraluminal vesicles MVB – multivesicular bodies

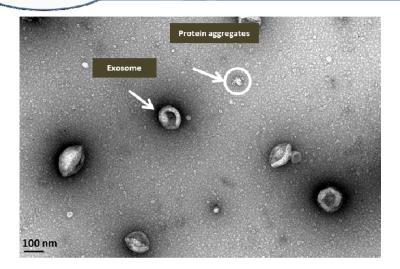


Ectosome release is compensated by the exocytosis of intracellular vesicles

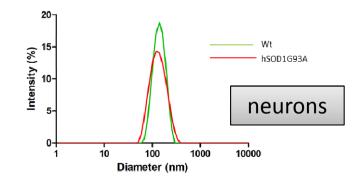


- Phase 1 Resting cell with ability to release ectosomes
- Phase 2 Same cell a few tens of seconds after stimuli (e.g. ATP) with the *shrinkage* of the cell after releasing ectosomes (blue)
- Phase 3 Exocytosis of intracellular vesicles (red) and *compensation* of plasma membrane loss

TEM and DLS of exosomes from motor neurons and astrocytes after differential centrifugation

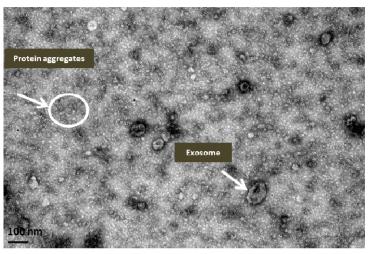


Neuropsychiatry

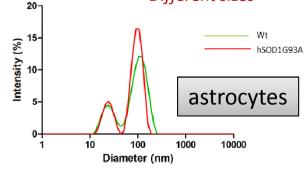


Sample	Size (diam. nm)	% Intensity
Wt	144.9	100
hSOD1G93A	141.4	100

From Vaz et al New Developments in Astrocytes Research, Nova Science 2016 (in press)



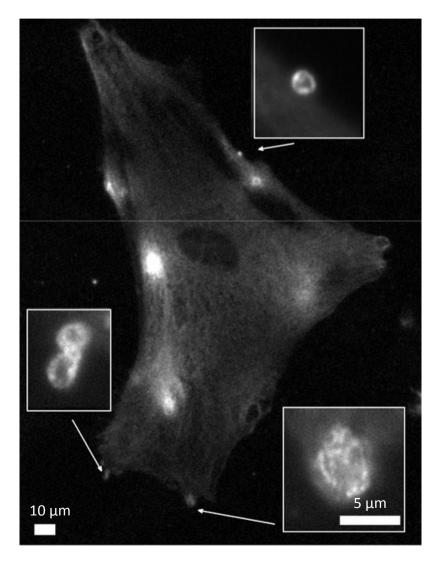


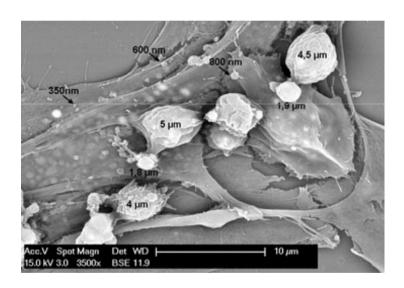


Sample	Size (diam. nm)	% Intensity
Wt	113.3 25.5	76.1 23.9
hSOD1G93A	99.0 24.4	77.5 22.5

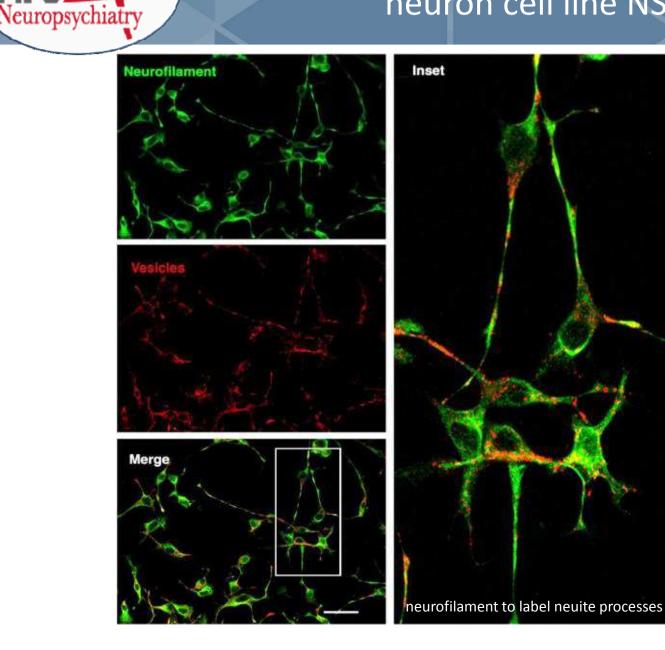


Human fetal astrocytes in culture shed membrane vesicles of several dimensions





Uptake of labelled vesicles (red) by the motor neuron cell line NSC-34



Motor neuron cell line NSC-34 exposed to fluorescently labelled vesicles for 3 hours, and stained for neurofilament (neurite processes)

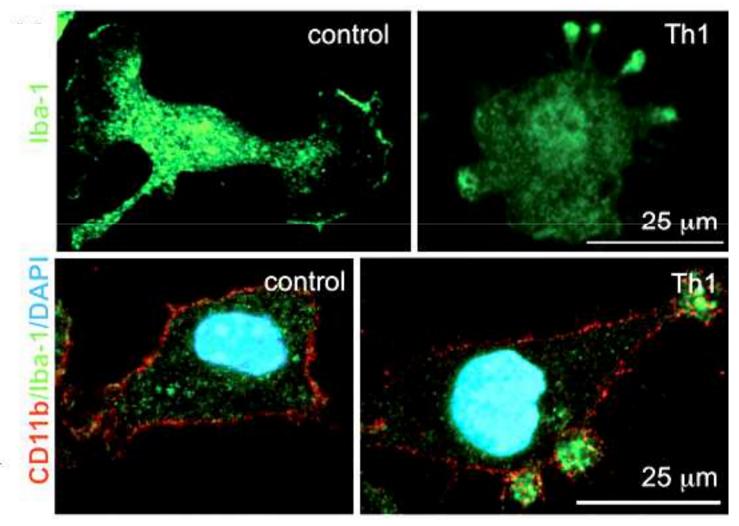
It is observed extensive uptake of labelled vesicles by the neurite processes

Size bar=50 microns.

From Maddison et al J Extracellular Vesicles 2014

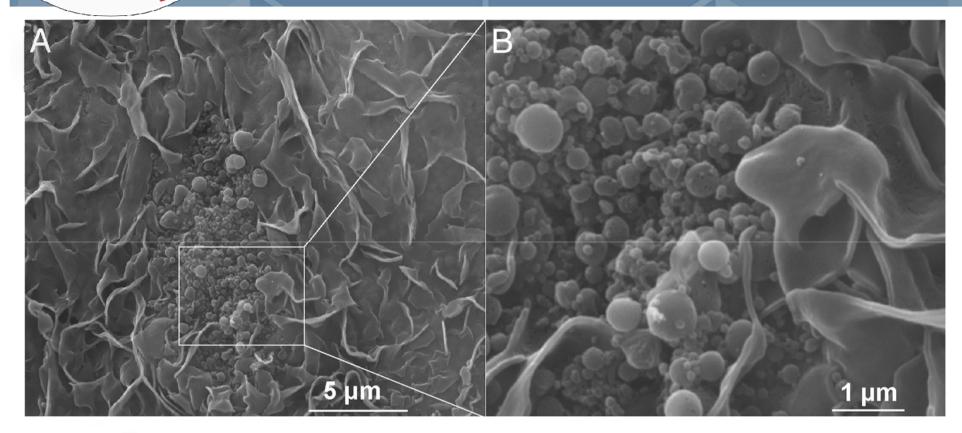


Microglial ectosomes after **Th1 cytokine** stimulation

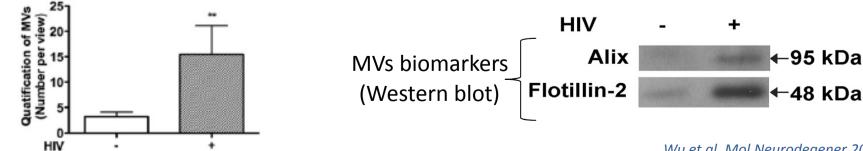


Cd11b – surface staining Iba-1 – Intracellular staining

HIV-1 infection leads to an increased release of monocyte-derived MVs into the cell medium



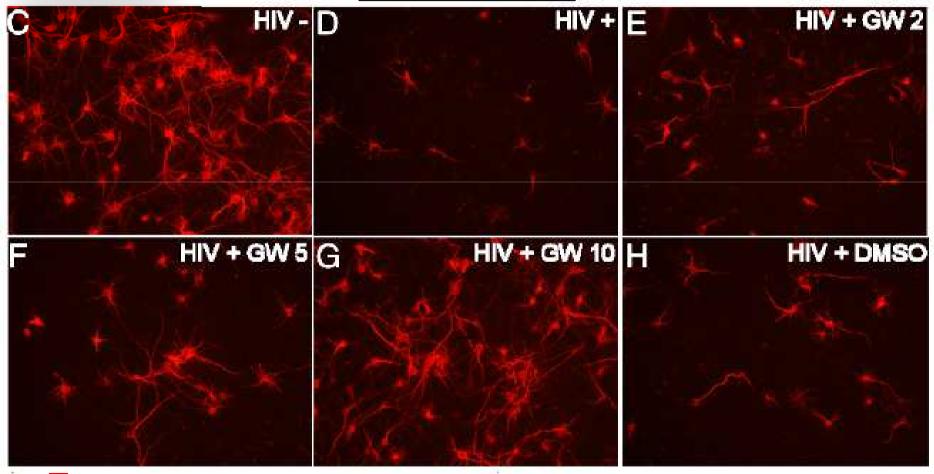
Neuropsychiatry



Wu et al. Mol Neurodegener 2015

Exosomes collected from HIV-1 infected macrophages induce neurotoxicity

Rat cortical neurons

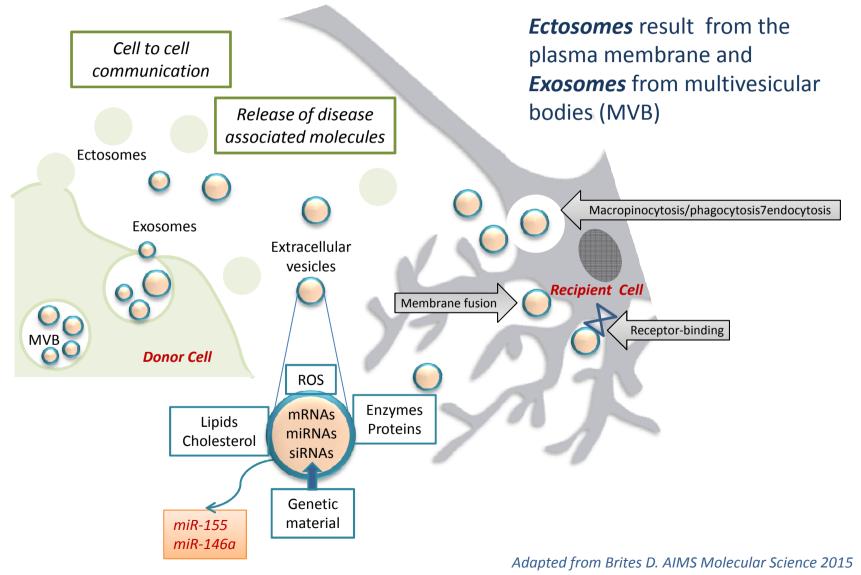


MAP2; GW4869, MV inhibitor; DMSO , GW solvent

Neuropsychiatry

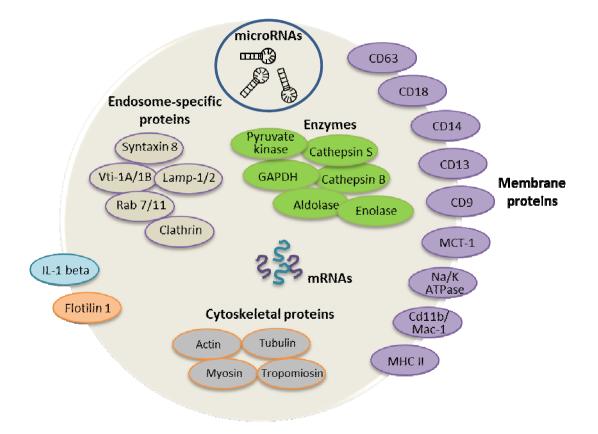


EVs cargo and disease spread





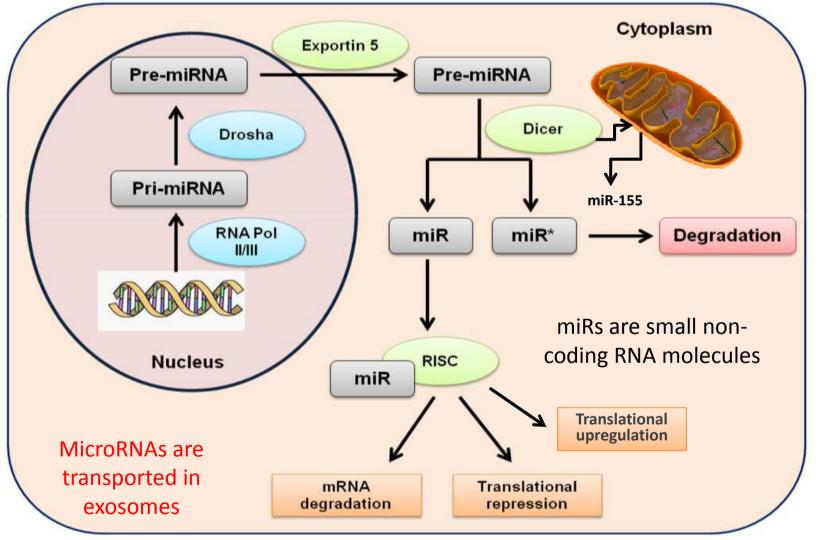
Composition of typical microglial exosomes



From Brites and Fernandes, Front Cell Neurosci 2015



miRNAs regulate gene expression



Fenoglio et al. Int. J. Mol. Sci. 2012 Wang et al Exp Neurol 2015



MicroRNAs are transported in exosomes



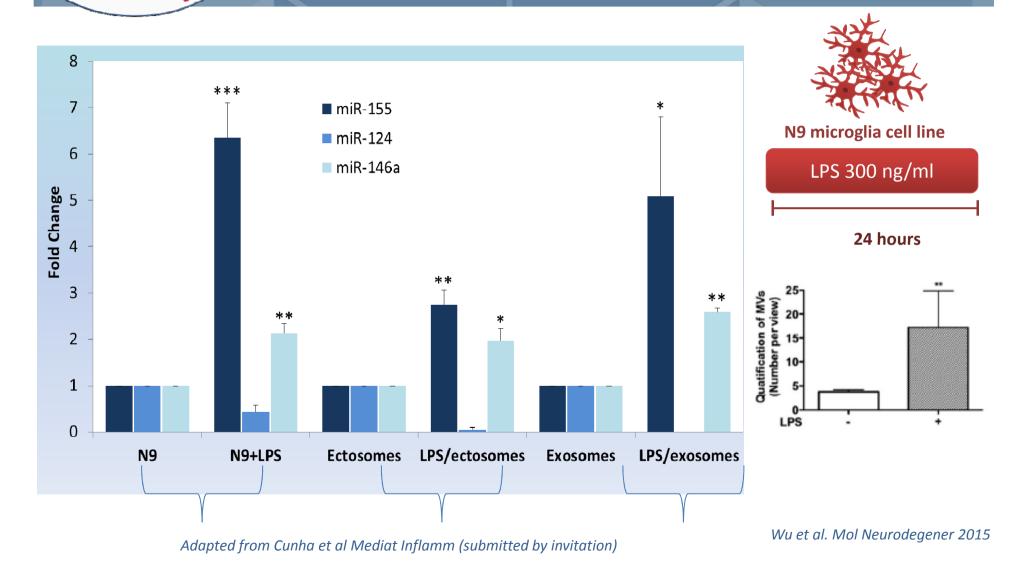
Exosome-delivered microRNAs modulate the inflammatory response to endotoxin

Margaret Alexander¹, Ruozhen Hu¹, Marah C. Runtsch¹, Dominique A. Kagele¹, Timothy L. Mosbruger², Tanya Tolmachova³, Miguel C. Seabra³, June L. Round¹, Diane M. Ward¹ & Ryan M. O'Connell¹

As exosomes appear to be a natural way that cells transfer miRNAs they may be used as:

- Transportation of **specific miRNAs or their inhibitors**
- Disease biomarkers by their levels and presence in serum
- Ideal vehicle for autologous therapies
- **Repressors or promoters of target genes** and altered inflammatory responses
- miR-155 promotes and miR-146a represses inflammation (when induced by endotoxin)
 - ... However a great deal of future work is required to understand their role in EVs!

MicroRNA profile in exosomes and ectosomes mimics the cell of origin



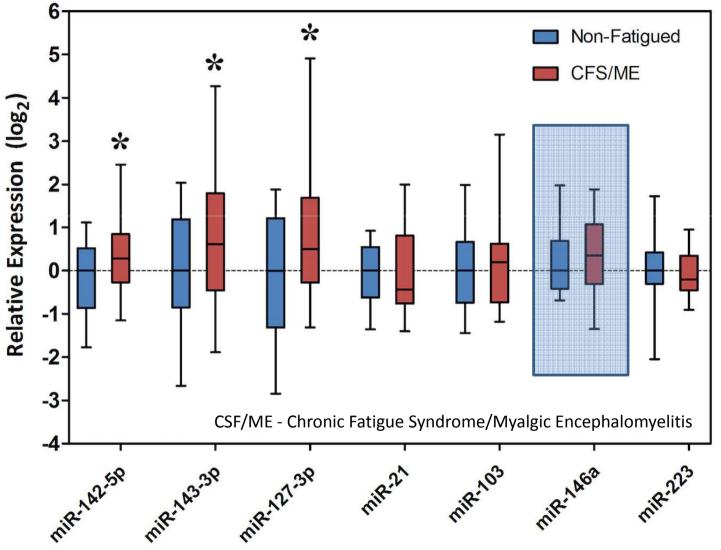
HIV Neuropsychiatry

MicroRNAs implicated in stress and depression

Restraint stress	Frontal cortex: miR-9, miR-9*, miR-26b, miR-29b, miR-30b, miR-30c, miR-30e, miR-125a, miR-126-3p, miR-129-3p, miR-207, miR-212, miR-351, miR-423, miR-487b, miR-494, miR-690, miR-691, miR-709, miR-711, and Let-7 a-e let-7a, miR-9, miR-26a/b, miR-30b/c, miR-125a
Immobilization stress	Hippocampus CA1, amygdala: miR-134, miR-183, miR-132, Let-7a-1, miR-9-1, miR-124a-1
Unpredictable chronic mild stress	Hippocampus: miR298, miR-130b, miR-135a, miR-323, miR-503, miR-15b, miR-532, and miR-125a and up-regulating miRNAs miR7a, miR-212, miR-124 miR-139, miR-182
Early life stress	Medial prefrontal cortex: pre-miRs 132, 124-1, 9-1, 9-3, 212, 29a
Animal model of depression	Learned helpless vs control frontal cortex: mmu-miR-184, mmu-miR-197,
	mmu-miR-107, mmu-miR-329, mmu-miR-125a-5p, mmu-miR-872, mmu-miR-181c, mmu-miR-18a*, mmu-miR-29b*, mmu-let-7a*, rno-let-7e*, rno-miR-20a*
Postmortem brain studies	Prefrontal cortex: hsa-miR-142-5p, hsa-miR-33a, hsa-miR-137, hsa-miR-489, hsa-miR-148b, hsa-miR-101, hsa-miR-324-5p, hsa-miR-301a, hsa-miR-146a, hsa-miR-335, hsa-miR-494, hsa-miR-20b, hsa-miR-376a*, hsa-miR-190, hsa-miR-155, hsa-miR-660, hsa-miR-552, hsa-miR-453, hsa-miR-130a, hsa-miR-27a, hsa-miR-497, hsa-miR-10a, hsa-miR-20a, hsa-miR-142-3p
Peripheral mononuclear cells	has-miR-107, miR-133a, miR-148a, miR-200c, miR-381, miR-425-3p, miR-494, miR-517b, miR-579, miR-589, miR-636, miR-652, miR-941, miR-1243
Whole blood cells (12 weeks of treatment with escitalopram)	hsa-miR-130b , hsa-miR-505 , hsa-miR-29b-2 , hsa-miR-26b, hsa-miR-22, hsa-miR-26a, hsa-miR-664, hsa-miR-494, hsa-let-7d, hsa-let-7g, hsa-let-7e, hsa-miR-34c-5p, hsa-let-7f, hsa-miR-629, hsa-miR-106b, hsa-miR-103, hsa-miR-191, hsa-miR-128, hsa-miR-502-3p, hsa-miR-374b, hsa-miR-132, hsa-miR-30d, hsa-miR-500, hsa-miR-770-5p, has-miR-589, hsa-miR-183, hsa-miR-574-3p, hsa-miR-140-3p, hsa-miR-335, hsa-miR-361-5p

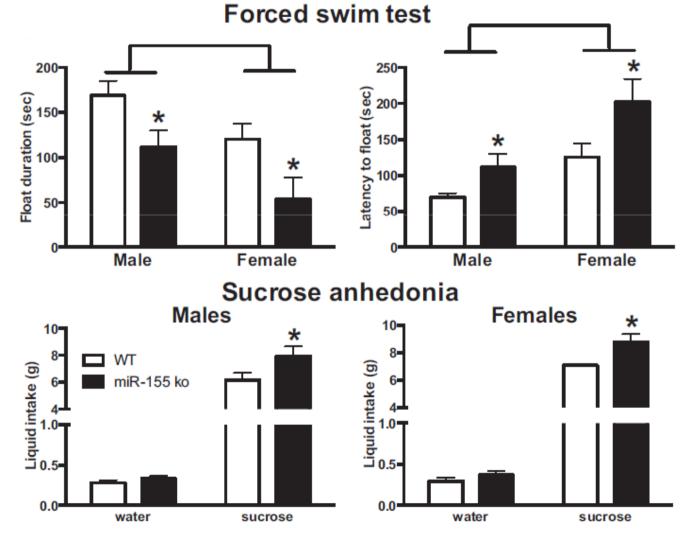


Plasma microRNA profile in CFS/ME



From Brenu et al. PLoS One 2014

MicroRNA-155 knockout mice show decreased depressive-like responses

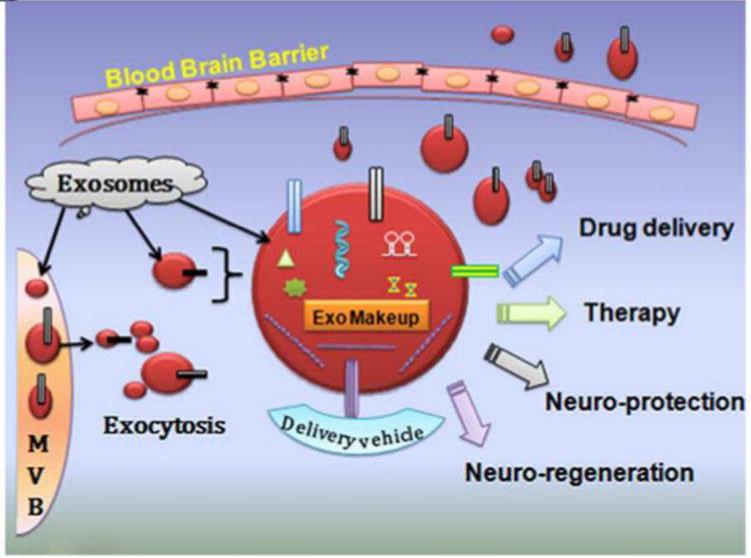


Veuropsychiatry

From Fonken et al Psychoneuroendocrinology 2016



Exosome makeup and their use as delivery vehicles



From Kalani et al Mol Neurobiol 2014



Conclusions

Future studies should establish whether:

- deleting *miR-155* is protective against the development of depressive-like responses in animal models of depression (e.g., following chronic stress)
- Evaluation of exosome cargo in *miR-155, miR-124 and miR-146a* should be determined to assess whether depression propagation is mediated by *exosomes/ectosomes* containing inflammatory microRNAs.

Results to be obtained may lead to the development of **novel therapies for depression** and other mood disorders.



Take-home message

Mechanisms of astrocyte deficits in depression are not clarified

Microglia subsets may determine the prevalence of responsive/activated cells or irresponsive/senescent subtypes in a clinical condition, including HIV

Clarification of microglia dysfunction may help in personalized medicine – microglial inhibitors or stimulators?

Release of extracellular vesicles (EVs) are important features in cell-to-cell communication and disease propagation, and **are increased by inflammation**

MicroRNAs are transported in EVs that mimic parenteral cells and may act as biomarkers, as well as repressors or promotors of inflammation

EVs may be helpful in regenerative medicine, tissue engineering and patient directed medicine

Team, Partners and Funding





Laurent Roybon, PhD



Ohio State University

Brian Kaspar, PhD





Dora Brites, PhD, group leader

Ana Rita Vaz. PhD Alexandra Brito, PhD Rui Silva, PhD Adelaide Fernandes. PhD Sofia Falcão. PhD Andreia Barateiro, PhD Carolina Cunha. PhD student Cátia Gomes, PhD student Cláudia Caldeira, PhD student Gisela Santos. PhD student Filipa Cardoso, PhD Maria Nunes, Master student

iMed. ULisboa Instituto de

Investigação do

Medicamento

Carla Ferreira, Master student Mafalda Monteiro, Master student Marta Barbosa. SCML research fellow Rui Pinheiro. Master student Sara Pinto, Master student



João Relvas. PhD Renato Socodato, PhD



Maria Conceição Lima, PhD Ana Luísa Cardoso, PhD **Ricardo Neves, PhD**

European

Commission





EU Joint Programme - Neurodegenerative Disease Research

Transnational project in the area of EU drugs policy – JUST/2014/JDRU/AG/DRUG



ご清聴ありがとうございました