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Cryptosporidiosis as a model of environmental gut-brain axis dysfunction





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Localize-nos no mapa:





Cryptosporidium parvum cycle in humans and innate immune response

Stoyanova & Pavlov, Biom Rev, 2019



Oriá et al., 2017. Arginine and Its Use in Ameliorating *Cryptosporidium parvum* Infection in Undernourished Children. in: L-*Arginine in Clinical Nutrition*, Springer.

Cryptosporidium was found to be the second leading cause (5–15%) of moderate-to-severe diarrhea (MSD) in infants at all 7 GEMS study sites and third cause of MSD in toddlers age 12–23 months



Kotloff, K.L et al, The Lancet, 2013, 382(9888):209-22

The Critical First 2 Years of Life for Brain And Gut:

Most (>75%) of Human Brain Growth & Synaptic Development



Human postnatal visual cortex



Highest Rates of Diarrhea and Enteric Infections



Normal ileum



Cryptosporidium-infected

+ only 1 opportunity for neuronal connections or 'forever lost'

Ileal Cryptosporidium infection Environmental enteric dysfuntion

Impaired epithelial barrier function

Villus blunting

villus:crypt ratio

Hyperplastic crypt

Poor nutrient absorption

•

- Intestinal inflammation
- Intestinal dysbiosis
- Increased bacterial translocation

Eosin<mark>ophils</mark>

Neu<mark>t</mark>rophils

HYPOTHESIS

We hypothesize that systemic inflammation and/or EE biomarkers (intestinal barrier dysfunction and inflammation) due to *Cryptosporidium* infection and/or malnutrition will lead to meningeal macrophage and brain microglia activation with neuroinflammation.

Target brain region: prefrontal cortex

Prefrontal cortex development is critical for executive function



Function	Coordinated Retrieval ("Executive Function" and "Motivation")	Conceptual Memory (Long-term semantic category storage)
Site	Frontal Cortex Sub cortical Neural Networks	Temporal Cortex with Median Hippocampus
Main Diseases	Huntington's/Parkinson's diseases Frontal lobe or sub cortical lesions	Alzheimer's disease Temporal lobe lesions Early Childhood Diarrhea?
Test(s)	Phonemic and semantic performance	Only semantic performance







Mid-age controls Huntington's patients

Oria et al, Medical Hypotheses, 2009

Environmental enteropathy biomarkers in children living in the northeast of Brazil



Neutrophil-related granule content



Membrane proteins Azurophil granules Specific granules Gelatinase granules Secretory vesicles CD11b/CD18, CD66, CD67 CD11b/CD18, CD67 CD11b/CD18, CD67 N.a. Gp91phox/p22phox Gp91phox/p22phox Gp91phox/p22phox N.a. MMP25 MMP25 N.a. TNFR⁶, uPAR **TNFR[®]** LIR1-4,-6,-7,-9°; CD35; CD16; C1a-R; N.a. IFN-αR1 and IFN-αR2^c;IFN-γR1 and IFN-γR2^c; TNFR1 and TNFR2°; IL-(1,4,6,10,13,17,18)R°; TGF-BR2°; CXCR-1°; CXCR-2°; CXCR-4°; CCR-1, -2, -3°; Ig(G,A,E)FcR^c; TLR-1, -2, -4, -6, -8^c; CD14; MyD88^c; MD-2^c; fMLPR; TREM1^c CD63, CD68, SNAP-23, VAMP-2, SNAP-23, VAMP-2, SNAP-23, VAMP-2, Nramp1, alkaline phosphatase, DAF, CD10, CD13 Stomatin, PGLYRP⁶ presenilin Nramp1 Matrix Proteins Collagenase, Elastase. Gelatinase. Plasma proteins Gelatinase, uPA, cathepsin G. arginase 1 cvstatin C⁶, cvstatin F⁶ proteinase 3 Defensins, hCAP18, NGAL, B12BP, Lysozyme N.a. BPI, MPO, lysozyme, lactoferrin, haptoglobin, lysozyme pentraxin 3, prodefensin Sialidase, α1-anti-trypsin⁶, SLPI, B2-microglobulin, N.a. Azurocidin. orosomucoid, heparanase, CRISP3 β-glucoronidase, B2-microglobulin, CRISP3 azurocidin

Borregaard et al, Trends in Immunology, 2007

Aims and Methods summary:

Evaluate the gut-brain axis, with a focus on environmental enteropathy markers leading to meningeal and brain inflammation following crypto infection and malnutrition

EE BIOMARKERS: Intestinal inflammation: Cecal MPO and fecal lipocalin-2 SYSTEMIC INFLAMMATION: Serum Amyloid A (SAA)

PARASITE BURDEN

Stool C. parvum oocyst shedding

BRAIN/MENINGEAL IMMUNOLOGY: Meninge flow cytometry NF-κb, MPO, and cytokines expression.

GROWTH MARKERS

Weight, body and tail length curves

No studies have addressed Crypto infection effects in the brain and meninges before.

Methods

- Monitoring: growth curves (weight gain and tail length), parasite stool shedding, and stool inflammatory markers.
- Blood samples for serum amyloid A (SAA), as biomarker of systemic inflammation.

After euthanasia (euthanasia: days 14th, on day 6 post-inf)

Flow cytometry of meningeal cell suspension

NOS2 immunohistochemistry for meninges

PFC IBA-1 immunostaining

Luminex assay for brain cytokines

Cecal and PFC myeloperoxidase (MPO) content analyses

Methodology/design



• 3-week-old C57BL/6 mice



After infection, stools were assessed for *C. parvum* oocyst shedding and inflammatory biomarkers. Mouse tail and body length were measured at the endpoint.

Undernourished mice challenged with a defined protein deficient diet (dPD) for 8 days showed impaired weight gain.



Undernourished mice challenged with a defined protein deficient diet (dPD) for 8 days showed higher stool lipocalin-2 levels



Undernourished C. parvum infected mice showed significantly lower weight gain as compared with uninfected controls.



Undernourished mice were infected by an innoculum of 2 X 10⁷ unexcysted C. parvum occysts by gavage. Nourished controls were not infected.

Real-time qPCR with 10²⁻⁷ Crypto. oocysts in fecal samples (using 18S rRNA primers; showing quantification in stool to test *in vivo* infection)



Parr, Sevilleja, Vieira, Oria et al. 2005.

Undernourished C. parvum infected mice showed sustained stool oocyst shedding following infection



Cryptosporidium stool shedding

Days of experiment

The primers target the 18 s rRNA gene of the parasite in the stools by RT-PCR

Undernourished C. parvum infected mice showed significantly lower tail and body length as compared with uninfected controls.



Body length





p<0.001 vs nourished control, by *one-way ANOVA and Bonferroni



Representative ileal H&E histology from uninfected (nourished or dPD) and infected mice (dPD + Crypto) at day 7 post-infection. *C. parvum* induces ileal mucosal disruption



Histopathology Damage Score (sum of epithelial and cell infiltration scores): 0=no damage; 1= mild; 2=moderate, 3=extensive. Max. Damage Score=6) Undernourished C. parvum infected mice showed significantly higher fecal lipocalin-2 (LCN-2) compared with uninfected controls.



Undernourished C. parvum infected mice showed significantly higher cecal MPO on day 14 (6 days post-infection)



Cecal MPO

Myeloperoxidase (MPO) is a marker of tissue neutrophil infiltration and inflammation. MPO is found in the azurofilic granules from neutrophils. Serum amyloid A (SAA) is significantly higher after dPD and Crypto infection compared with uninfected nourished controls



6 days post-infection

Serum amyloid A (SAA), a marker of systemic inflammation, may affect LPS neutralization.



Adapted from Wu, A. et al, Shock, 2004 Ye, RD, Sun L. J. Leuk. Biol, 2015

Brain meningeal cell population in homeostasis



Kipnis, J. et al, Nature Reviews Immunology, 2012

Would changes in the meningeal B or T cell compartment increase the risk of brain inflammation?

Flow cytometry analyses of meningeal cell suspension following C. parvum infection and controls (6 days post-infection)



B cells

80 × C14940





Flow cytometry gating strategy for T-cell analysis



Th-CD8⁺



Undernutrition with or without *Crypto* infection reduces the NOS2 labeling in the meninges (need to be replicated)



Scale bars: 50 μm DAPI (4',6-diamidino-2-phenylindole) binds strongly to A-T rich regions in DNA. Inflammatory biomarkers in the murine prefrontal cortex with representative immunostaining for IBA-1 and NF-Kb immunoblotting of the experimental mice after C. parvum infection and controls.



Oriá et al, Braz J Infec Dis, 2023



IBA-1=ionized calcium-binding adaptor molecule 1

Luminex assay of overall brain from C. parvum infected mice and controls (6 days post-infection)



Enteric infection/malnutrition

• C. parvum oocyst





MPO positive cells were found in the hippocampus from a *C. parvum* infected mouse (need to be replicated)



Adapted from Oriá et al, 2016, Nutrition Reviews.



Conclusions 1

1. Undernourished mice showed profound impaired weight gain followed 8 days of dPD

2. Undernourished mice showed increase stool LPC-2 levels than nourished counterparts.

3. Crypto infection caused robust oocyst shedding at least up to 6 days post-infection.

4. Crypto-infected mice showed a significant weight loss 3 days post-infection compared with uninfected nourished and undernourished controls

5. Crypto-infected mice showed impaired tail and body length, markers of skeletal growth.

6. Crypto-infected mice showed reduced the frequency of CD8-T cells (p<0.05) compared with the nourished counterparts and showed IL-10 reduction in the overall brain.

7. Undernutrition with or without infection reduces NOS2 labeling in the brain meninges and increased labeling of IBA-1 cells in the PFC.

8. Undernourished *C. parvum* infected mice showed increased in NF-KB expression and MPO activity in the PFC compared to uninfected controls.



APOE4 associates with lower diarrhea burdens (n=123 children; 246 alleles)



Introduction

Apolipoprotein E

(ApoE), a 35 KDa plasma protein synthesized mainly in the liver and in the brain, is critically involved in cholesterol transport and metabolism.

(Mahley & Rall, 2000; Yamouch et al, 1999, Liberman, et al, 2002).



Isoelectric separation of Apolipoprotein E



Isoelectric separation of the VLDL, after lipid extraction, showing 3 apoE homozygous patterns, E2/2, E3/3 & E4/4.

Three-dimensional structure of ApoE

Affinity to the LDL receptor

APOE2 is the only isoform which contains Cys-158



Mahley et al, Journal of Lipid Research, 2009

Affinity to the lipoprotein

APOE4 is the only isoform which contains Arg-112

Effect of APOE alleles on lipid parameters



ApoE phenotype





Methodology/design



• 3 week-old C57BL/6 (wild-type, APOE ko, APOE3 TR, APOE4 TR) mice



After infection, stools were assessed for *C. parvum* oocyst shedding and ileal inflammatory biomarkers (IL-1 β , IFN- γ , II-17, and TNF- α by Luminex), CAT-1, arginase-1, TLR-9, and iNOS (qRT-PCR) transcriptional levels. Mouse body and tail length were measured at the endpoint.

APOE target replacement (TR) mice

19p13.2-19p13.12-19p12-

19q12

19q13.12

19q13.2 19q13.32 19q13.41 19q13.43



F2 generation

List of study primers para qRT-PCR

Primers	Sequence (5'-3')
0 actin	AATTTCTGAATGGCCCAGGT
p-actin	TTTGTGTAAGGTAAGGTGTGC
Arginaca 1	TCTGCCAAAGACATCGTGTA
Arginase-1	GGTAGCTGAAGGTCTCTTCC
САТ 1	CACTGCTGATCTGTGTACCT
	GTGGGGACATAAGATGCTCA
DNA 19c from C naryum	CTGCGAATGGCTCATTATAACA
RNA IOS HOIII C. purvuin	AGGCCAATACCCTACCGTCT
INIOS	TCCTGGACATTACGACCCCT
	AGGCCTCCAATCTCTGCCTA
ΤΙ ΡΟ	TGGTGTTGAAGGACAGTTCTCTC
ILNJ	CACTCGGAGGTTTCCCAGC

ApoE deficiency leads to impaired growth. APOE4 TR mice recover the catch-up growth faster following *C.* parvum infection.



Post-Infection Weight



p<0.05 APOE 4/4 TR vs APOE 3/3 TR and APOE Ko

Representative histology of ileal samples from *C. parvum*-infected undernourished mice and controls according to APOE genotype



APOE 3/3 TR



Scale bar: 10 µm.

Yellow arrow heads point to increased inflammation and blood vessel congestion in the ileum from APOE ko mice. Blue arrow heads indicate improved villus architecture in the ileum from APOE 4/4 TR mice

APOE Ko

APOE 4/4 TR





Crypt depth

Wild-type APOE Ko APOE 3/3 TR APOE 4/4 TR





Fecal shedding of parasites in weaned undernourished C57BL/6 mice orally inoculated with 10⁷ -unexcysted *C. parvum* oocysts per mouse on day 7 after the onset of the low protein diet.



Results are shown in a log scale a mean±SEM.

Data were expressed as number of parasites per mg of stool. N above the bars means the number of mice still showing oocyst shedding

Significant reduction of *C. parvum* stool shedding in APOE4 TR mice following infection

Days	Wild-type	APOE Ko	APOE TR 3/3	APOE TR 4/4	
Day 1	12 (100%)	10 (100%)	6 (100%)	14 (100%)	
Day 3	11 (91.67%)	10 (100%)	6 (100%)	13 (92.85%)	92 86%
Day 5	8 (66.67%)	10 (100%)	4 (66.67%)	10 (71.42%)	92.00 /0
Day 7	4 (33.33%)	5 (50%)	1 (16.67%)	1 (7.14%)	

Luminex assay of ileal inflammatory markers from C57BL6J wildtype, APOE ko, APOE3 and APOE4 TR mice



IL-17

a:p<0.05 wild-type MNC vs Wild-type MNI by r-Student test. b: p<0.05 Wild-type MNI vs APOE Ko MNI by r-Student test. c: p<0.05 APOE Ko MNC vs APOE Ko MNI and APOE 3/3 TR by r-Student test.





a:p<0.05 APOE KO MNI vs APOE KO MNC, wild type MNI and APOE TR 3/3 MNI by ANOVA and Bonferroni





Lipid profile of experimental undernourished mice following *C. parvum* infection (orally infected with 10⁷ unexcysted oocysts).

Analytes (mg/dL)	Wild-type (n=5)	ApoE Ko (n=5)	ApoE TR 4/4 (n=5)	ApoE TR 3/3 (n=4)
Total Cholesterol	60.8 ± 18.5	615.8 ± 69.6*	112 ± 16.9†	96.75 ± 14.0
HDL	52 ± 9.3	50 ± 5.7	58 ± 6.2**	47 ± 7.8
LDL	29.80 ± 6.5	576 ± 65.8***	45.8 ± 10.4	38.50 ± 7.0
Triglycerides	53.20 ± 17	59 ± 4.0#	48.6 ± 8.0	68.5 ± 24.0

* p<0.001 ApoE Ko vs all

** p=0.05 ApoE TR 4/4 vs ApoE TR 3/3

*** p<0.001 ApoE Ko vs all

p<0.05 ApoE Ko vs ApoE TR 4/4

† P<0.05 vs wild-type mice

APOE4 TR mice showed increased ileal Arg1, TLR9, and CAT-1 transcriptional levels. Arg1 is key for mucosal recovery after following *C. parvum* infection



a: p<0.05 Wild-type vs APOE Ko by ANOVA and Bonferroni b:p<0.05 APOE 4/4 TR vs all by ANOVA and Bonferroni







Castro et al, Nutrition, 2012







Conclusions 2

1. APOE-deficient mice had significantly less *C. parvum* oocyst shedding measured by quantitative PCR in stools on the 1st and 3rd days post-infection, when the infection peaks.

2. APOE-deficient mice had greater inflammatory cytokine responses and mucosal atrophy in the ileal tissue one week-post inoculum, accompanied by greater weight deficits following 7 days of infection.

3. APOE4 mice had increased ileal TLR9 transcripts compared with APOE knockout mice. TLR9immune mediated responses have been found important to control C. parvum infection in a neonatal mouse model.

4. APOE4 contributes to elimination of *C. parvum* infection with a more regulated inflammatory response compared to the uncontrolled cytokine production noted in ApoE deficient mice.

5. APOE4 has been shown to up-regulate ileal L-arginine cationic protein transporter (CAT-1) and arginase 1 transcription levels.

mRNA Microarray of Gene Expression in

undernourished non-infected vs infected mice



Upregulation	Gene list (MN vs MN 10e6 crypto infected)
>1000 fold	RIKEN cDNA 4933439A12 gene
>100 fold	serine (or cysteine) proteinase inhibitor, clade A, member 1a, inactive X specific transcripts, secreted phosphoprotein 2, inactive X specific transcripts, some morphogenetic protein 7,, N-acetylneuraminate pyruvate lyase, inactive X specific transcripts, alpha fetoprotein glutathione S-transferase, alpha 3
61-100 fold	, coagulation factor X, NADPH oxidase 4, NADPH oxidase 4, RIKEN cDNA E130002L11 gene, eukaryotic translation initiation factor 2C, 3 fibroblast growth factor receptor 4 restin (Reed-Steinberg cell-expressed intermediate filament-associated protein), alpha tetoprotein, transtnyretin, fibrinogen, B beta polypeptide
31-60 fold	afamin, solute carrier family 39 (metal ion transporter), member 8, claudin 8, chymotrypsinogen B1, phosphoglycerate mutase 2, mucolipin 3, Ros1 proto-oncogene, leucine rich repeat protein 1, neuronal, arylacetamide deacetylase (esterase), transthyratin, fibrinogen, alpha polypeptide, alpha fetoprotein, opposite strand transcription unit to Stag 1, folate receptor 1 (adult) neuritin 1, antigen p97 (melanoma associated) identified by monoclonal antibodies 133.2 and 96.5, RIKEN cDNA 3110057012 gene, Similar to Lactase- phlorizin hydrolase precursor (Lactase-glycosylceramidase) (LOC226413), mRNA, ATP-binding cassette, sub- family A (ABC1), member 13, AT rich interactive domain 4B (Rbp1 like), coagulation factor X, ectonucleotide pyrophosphatase/phosphodiesterase 3, ectonucleotide pyrophosphatase/phosphodiesterase 3, transthyretin, mucolipin 3, solute carrier family 19 (sodium/hydrogen exchanger), member 3, renin binding protein. transthyretin, afamin, RIKEN cDNA 2610019F03 gene, sema domain, immunoglobulin domain (Ig), and GPI membrane anchor, (semaphorin) 7A, galactosylceramidase [lecithin-retinol acyltransferase] (phosphatidylcholine-retinol-O-acyltransferase), dipeptidylpeptidase 7
20-30 fold	DNA-damage inducible transcript 3, alpha 1 microglobulin/bikunin, membrane-associated protein 17, complement component factor i, transcription factor EC, ectonucleotide pyrophosphatase/phosphodiesterase 3, Similar to apical early endosomal glycoprotein precursor (LOC381352), mRNA, bone morphogenetic protein 7, potassium voltage-gated channel, delayed-rectifier, subfamily S, member 3, RIKEN cDNA 2010317E24 gene, expressed sequence Al317395, coagulation factor X, Similar to Aldo-keto reductase family 1 member C13, (LOC238465) mRNA, RIKEN cDNA 2600014C01 gene 0 day neonate thymus cDNA, RIKEN full-length enriched library, clone:A430006A04 product:unknown EST, full insert sequence,ribosomal protein S15a, RIKEN cDNA 1810015P03 gene, lecithin-retinol acyltransferase (phosphatidylcholine-retinol-O-acyltransferase), interleukin 1 alpha,, leukocyte cell-derived chemotaxin 2, solute carrier family 17 (anion/sugar transporter), member 5, cytochrome P450, family 3, subfamily a, polypeptide 11, glutathione S-transferase, alpha 2 (Yc2), v-erb-b2 erythroblastic leukemia viral oncogene homolog 3 (avian), nuclear receptor subfamily 2, group E, member 3, RIKEN cDNA 9430065F17 gene, peptidyl arginine deiminase, type III, fructose bisphosphatase 1, N-acetyl galactosaminidase, alpha, RIKEN cDNA 9530096D07 gene,, fibronectin type III domain containing 5, GATA binding protein 4, dopachrome tautomerase, ATPase, class VI, type 11A, S100 calcium binding protein A1

Upregulation	Gene list (M 10e6 crypto infected vs N 10e6 crypto infected)
>100 fold	
	inactive X specific transcriptsinactive X specific transcriptsserine (or cysteine) proteinase inhibitor, clade A, member 1aRIKEN cDNA 4933439A12 geneinactive X specific transcripts
31-60 fold	
	N-acetylneuraminate pyruvate lyase
20-30 fold	bone morphogenetic protein 7 glutathione S-transferase, alpha 3 ankyrin repeat and SOCS box-containing protein 11 antigen p97 (melanoma associated) identified by monoclonal antibodies 133.2 and 96.5 coagulation factor X
10-19 fold	folate receptor 1 (adult), claudin 8, secreted phosphoprotein 2, Similar to apical early endosomal glycoprotein precursor (LOC381352), mRNAretinoic acid receptor responder (tazarotene induced) 1, renin binding protein, coagulation factor X, bone morphogenetic protein 7, metallothionein 2, fibroblast growth factor 15, cytochrome P450, family 3, subfamily a, polypeptide 25mucolipin 3

Future directions

1. Run meningeal macrophage IBA-I IHC with co-localization with arginase I and NOS2, as markers of M1 and M2 macrophages, respectively, by confocal microscopy.

2. Increase the number of mice in some experiments that still require more statistical power.

3. Analyze CSF, meninges and brain metabolomics following *Crypto* infection and diets (testing TMAO translocation to the brain and meninges).

4. Run ELISA and WB for BDGF in the PFC from *C. parvum*-infected mice.

6. Run RT-PCRs for TLR, NOD-1 signaling in the meninges, and PFC of *C.parvum*-infected mice.

TMAO affects in the brain following C. parvum infection in mice?

The Journal of Infectious Diseases MAJOR ARTICLE



Increased Urinary Trimethylamine *N*-Oxide Following *Cryptosporidium* Infection and Protein Malnutrition Independent of Microbiome Effects

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Cryptosporidium infections have been associated with growth stunting, even in the absence of diarrhea. Having previously detailed the effects of protein deficiency on both microbiome and metabolome in this model, we now describe the specific gut microbial and biochemical effects of *Cryptosporidium* infection. Protein-deficient mice were infected with *Cryptosporidium parvum* oocysts for 6–13 days and compared with uninfected controls. Following infection, there was an increase in the urinary excretion of choline- and antion-acid-derived metabolites. Conversely, infection reduced the excretion of the microbial-host cometabolite (3-hydroxyphenyl) propionate-sulfate and disrupted metabolites involved in the tricarboxylic acid (TCA) cycle. Correlation analysis of microbial and biochemical profiles resulted in associations between various microbiota members and TCA cycle metabolites, as well as some microbial-specific degradation products. However, no correlation was observed between the majority of the infection-associated metabolite and the fecal bacteria, suggesting that these biochemical perturbations are independent of concurrent changes in the relative abundance of members of the microbiota. We conclude that cryptosporidial infection in protein-deficient mice can mimic some metabolic changes seen in malnourished children and may help elucidate our understanding of long-term metabolic consequences of early childhood enteric infections.

Keywords. choline; Cryptosporidium; malnutrition; metabonome; microbiome.

BMC Syst Biol. 2016 Aug 26;10 Suppl 3:63. doi: 10.1186/s12918-016-0307-y

Towards understanding brain-gut-microbiome connections in Alzheimer's disease.

Xu R1, Wang Q2

Author information

Abstract

BACKGROUND: Alzheimer's disease (AD) is complex, with genetic, epigenetic, and environmental factors contributing to disease susceptibility and progression. While significant progress has been made in understanding genetic, molecular, behavioral, and neurological aspects of AD, relatively little is known about which environmental factors are important in AD etiology and how they interact with genetic factors in the development of AD. Here, we propose a data-driven, hypotheses-free computational approach to characterize which and how human gut microbial metabolites, an important modifiable environmental factor, may contribute to various aspects of AD.

MATERIALS AND METHODS: We integrated vast amounts of complex and heterogeneous biomedical data, including disease genetics, chemical genetics, human microbial metabolites, protein-protein interactions, and genetic pathways. We developed a novel network-based approach to model the genetic interactions between all human microbial metabolites and genetic diseases. We identified metabolites that share significant genetic commonality with AD in humans. We developed signal prioritization algorithms to identify the co-regulated genetic pathways underlying the identified AD-metabolite (brain-guit) connections.

RESULTS: We validated our algorithms using known microbial metabolite-AD associations, namely AD-3,4-dihydroxybenzeneacetic acid, AD-mannitol, and AD-succinic acid. Our study provides supporting evidence that human gut microbial metabolites may be an important mechanistic link between environmental exposure and various aspects of AD. We identified metabolites that are significantly associated with various aspects in AD, including AD susceptibility, cognitive decline, biomarkers, age of onset, and the onset of AD. We identified common genetic pathways underlying AD biomarkers and its top one ranked metabolite trimethylamine N-oxide (TMAO), a gut microbial metabolite of dietary meat and fat. These coregulated pathways between TMAO-AD may provide insights into the mechanisms of how dietary meat and fat contribute to AD.

CONCLUSIONS: Employing an integrated computational approach, we provide intriguing and supporting evidence for a role of microbial metabolites, an important modifiable environmental factor, in AD etiology. Our study provides the foundations for subsequent hypothesisdriven biological and clinical studies of brain-gut-environment interactions in AD.

Functional Coupling of Human Microphysiology Systems: Intestine, Liver, Kidney Proximal Tubule, Blood-Brain Barrier and Skeletal Muscle

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Organ interactions resulting from drug, metabolite or xenobiotic transport between organs are key components of human metabolism that impact therapeutic action and toxic side effects. Preclinical animal testing often fails to predict adverse outcomes arising from sequential, multi-organ metabolism of drugs and xenobiotics. Human microphysiological systems (MPS) can model these interactions and are predicted to dramatically improve the efficiency of the drug development process. In this study, five human MPS models were evaluated for functional coupling, defined as the determination of organ interactions via an in vivo-like sequential, organ-to-organ transfer of media. MPS models representing the major absorption, metabolism and clearance organs (the jejunum, liver and kidney) were evaluated, along with skeletal muscle and neurovascular models. Three compounds were evaluated for organspecific processing: terfenadine for pharmacokinetics (PK) and toxicity; trimethylamine (TMA) as a potentially toxic microbiome metabolite; and vitamin D3. We show that the organ-specific processing of these compounds was consistent with clinical data, and discovered that trimethylamine-N-oxide (TMAO) crosses the blood-brain barrier. These studies demonstrate the potential of human MPS for multi-organ toxicity and absorption, distribution, metabolism and excretion (ADME), provide guidance for physically coupling MPS, and offer an approach to coupling MPS with distinct media and perfusion requirements.

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