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Differential effects of spinal cord transection on glycinergic and GABAergic synaptic signaling in sub-lesional lumbar motoneurons.

Helene Bras ¹ and Sylvie Liabeuf ¹

¹ Institut de Neurosciences de la Timone, UMR 7289, CNRS and Aix Marseille Université, Campus Santé Timone, 13385, Marseille, France.

Corresponding author: Hélène Bras: helene.bras@univ-amu.fr

Abstract

This review takes stock on the impact of complete spinal cord transection (SCT) on the plasticity of the inhibitory synaptic transmission on sub-lesional lumbar motoneurons (MNs), differentiating between studies in neonate and adult rats.

After neonatal SCT, normal maturational up-regulation of glycine receptors was observed. On the other hand, the developmental downregulation of the GABA^A receptors, as well as the upregulation of the co-transporter KCC2, but not the normal decrease of NKCC1, were prevented. In adult SCT rats, glycinergic synaptic transmission, which is the major contributor to spinal MNs inhibition in adulthood, had normal control levels 2 months post-injury. On the other hand, the GABAergic transmission was altered through an up-regulation of the pre-signaling levels and a down-regulation in the density of post synaptic receptors. KCC2 membrane expression was down-regulated at all post-injury times tested (24h to 4 months), thereby depolarizing the Cl− equilibrium potential and reducing the strength of postsynaptic inhibition.

The preservation of glycinergic pre- and post signaling, is probably a key factor in the success of locomotor rehabilitation programs in adult SCT rats. However, these data highlight the need to develop strategies to restore KCC2 levels in lumbar MNs, to stabilize the excitation/inhibition balance, which is essential to the effective control of skeletal muscle activity.

Highlights

- Rats with complete spinal cord transection (SCT) are unambiguous models of paraplegia.
- We review the plasticity of inhibition on spinal MNs in neonate *vs* adult SCT rats.
- In both models, glycinergic pre- and post-synaptic signalings were normal.
- On the contrary, the levels GABA_AR and KCC2 were dysregulated.
- After SCT, KCC2 levels must be restored to increase glycinergic inhibition strength.

Introduction

More than 53% of patients with traumatic spinal cord injury are paraplegic. This justifies the use of rats with low thoracic spinal cord transection (SCT) rats, unambiguous models of paraplegia, to study the plasticity of the neural networks below the lesion (Edgerton *et al.*, 2001; Rossignol, 2006). Among the changes resulting from the loss of supra-spinal descending inputs in SCT rats, alterations in inhibitory synaptic transmission to lumbar motoneurons (MNs), mediated by glycine receptors (GlyR) and γ -aminobutyric acid receptors (GABA_AR) (for reviews see (Fritschy, 2015; Legendre, 2001)), have been the subject of several studies over the last 20 years. They include changes in size and density of pre-synaptic inhibitory inputs (glycinergic and/or GABAergic) (Edgerton *et al.*, 2001; Ichiyama *et al.*, 2011; Khalki *et al.*, 2018), post-synaptic expression of GlyR and GABAAR subunits (Edgerton *et al.*, 2001; Khristy *et al.*, 2009; Sadlaoud *et al.*, 2020; Sadlaoud *et al.*, 2010), anchoring protein gephyrin (Edgerton *et al.*, 2001; Sadlaoud *et al.*, 2010), and cation chloride co-transporters KCC2 (and/or NKCC1) that regulate intracellular chloride levels required for inhibition (Bos *et al.*, 2013; Boulenguez *et al.*, 2010; Chopek *et al.*, 2015; Cote *et al.*, 2014; Jean-Xavier *et al.*, 2006; Khalki *et al.*, 2018; Liabeuf *et al.*, 2017). However, the variability of the experimental procedures and particularly of the onset of the lesion (cord-transected neonates *vs* adults) and the post-lesional delays, prevent a clear overview of the time course of this alteration. The purpose of the present work is to take stock of these data, based on the works in the literature listed in Table 1. Although some early studies have been done in SCT cats (Tillakaratne *et al.*, 2002; Tillakaratne *et al.*, 2000), only those done in SCT rats, which are the majority, have been considered here.

Developmental membrane expression of GlyR and GABAAR in spinal MNs: Glycinergic ionotropic receptors form pentameric transmembrane quaternary structure. In fetal rat spinal cord neurons, GlyRs have a dominant homomeric form composed of 5α 2 subunits. Expression of α2 subunits decreases after birth, in favour of α1 expression, and GlyR becomes heteromeric with an invariant stoichiometry of $3\alpha/2\beta$ (Legendre, 2001). During development, the density of GlyR increased from P1 to P7 (See Fig.1) to reach a plateau that remains stable at P12 (Sadlaoud *et al.*, 2010). In adults, glycine and strychnine bind to α subunits only (Legendre, 2001).

GABA_ARs form pentameric complexes assembled from a family of at least 15 subunits (α 1-6, β1-3, γ1-3, δ, ρ1-2, (Bohlhalter *et al.*, 1996)). GABAARs are expressed early during ontogeny (E13), and α1, α2, α3 and α5 mRNAs are detected in the embryonic spinal cord (Ma *et al.*, 1993). At P1, only the GABA_AR $α2$ and GABA_AR $α3$ remain expressed on the spinal motoneuronal membrane (Sadlaoud *et al.*, 2010). During the first postnatal week, the expression of both subunits decreases but they are still observed in juvenile animals (P12), with a ratio of 5 GlyRα1 to 1 GABAARα2,α3 (Sadlaoud *et al.*, 2010). In the mature spinal cord, the α2β3γ2 and α 3β3γ2 combinations are preponderant (Fritschy and Brunig, 2003). The α and β subunits of the GABA_AR are required for GABA binding, and the α subunits determines the kinetics of deactivation and/or desensitization of the channel properties (Gingrich *et al.*, 1995). The coassembly of γ with α sub-units is required for benzodiazepine binding (Khristy *et al.*, 2009).

Membrane expression of GlyR and GABAAR in spinal MNs after neonatal SCT: After neonatal SCT (P0), normal densities of GlyRα1 were observed in the plasma membrane of triceps surae (TS) MNs at P7 (Sadlaoud *et al.*, 2010). On the contrary, the developmental downregulation of the α2 and α3 subunits of the GABAAR was prevented (Sadlaoud *et al.*, 2010) (see Fig.1), whereas the $GABA_A R\gamma2$ was down-regulated in soleus MNs and upregulated in tibialis anterior (TA) MNs (Khristy *et al.*, 2009). Moreover, the up-regulation of KCC2 normally observed from P0 to P7 was prevented after neonatal SCT in the region of MNs (Jean-Xavier *et al.*, 2006) as well as on TS MNs (Bos *et al.*, 2013). SCT eliminates the major supra spinal source of 5HT, and only 2–15% of the 5-HT levels remain below the lesion, partly due to intrinsic spinal 5-HT neurons (Kong at al 2010). $5-\text{HT}_{2A}$ receptors expression increases after SCI (Kong at al 2010) and their activation with the specific agonist TCB2 leads to the restoration of KCC2 expression (Bos et al 2013). In neonatal SCT rats treated with DOI, a nonselective agonist of 5-HT_{2A}, $_{\rm B}$ and $_{\rm C}$ receptors, GlyR α 1 expression remained stable, while that of GABAAR (Sadlaoud *et al.*, 2010) as well as KCC2 (Bos *et al.*, 2013) returned to control values. Interestingly, $5-HT_{2B}Rs$ and $5-HT_{2C}Rs$, but not $5-HT_{2A}Rs$ become constitutively active (spontaneously active without 5-HT) after SCI (Murray *et al.*, 2010) and this constitutive activity may be partly responsible for the depolarizing shift of the chloride equilibrium potential after SCI (Bos *et al.*, 2013). This suggested that the plasticity of GlyR is independent of supraspinal influences whereas that of GABA_AR and KCC2 is markedly influenced by descending pathways, in particular serotonergic projections (Jean-Xavier *et al.*, 2006; Sadlaoud *et al.*, 2010).

Membrane expression of GlyR and GABAAR in spinal MNs of adult SCT rats: In rats transected as adults, the expression of glycinergic and GABAergic synaptic signaling followed different time courses. The acute post-lesion phase was marked by an unstable temporal and spatial pattern of alterations in GlyR1-3 mRNA expression with different levels of up or down regulation occurring within 6h to 10 days after lesion (Esmaeili and Zaker, 2011). In the early chronic phase, 3 weeks post-injury, the levels of expression of GlyRα1 were significantly lower than in controls (Sadlaoud *et al.*, 2020). This is related to inflammatory responses, as early treatment with the corticosteroid methylprednisolone allows a return to normal values. This down-regulation of the levels of GlyRα1 was transitory, since at later times (8 weeks postlesion), GlyRα1 expression had normal control values in both TA and gastrocnemius (GS) MNs (Sadlaoud *et al.*, 2020). In this post-injury period, the density and size of pre-synaptic glycinergic inputs apposed on GS and TA MNs also displayed normal values (Khalki *et al.*, 2018), suggesting a matching between pre-synaptic inputs and post-synaptic membrane receptors, which is a prerequisite for efficient synaptic transmission (Lardi-Studler and Fritschy, 2007). Note that after very long post-injury periods (16 weeks), the expression of GlyRα1 was significantly lower than in controls, in both TA and GS MNs (Sadlaoud *et al.*, 2020).

In adult SCT rats, the sub-lesional spinal GABAergic synaptic system was differently affected than the glycinergic one. Three weeks after SCT, a down-regulation of GABAAR occurred, and could not be reversed by treatment with the anti-inflammatory methylprednisolone (Sadlaoud et al., 2020). Then, at longer times post-injury (8 and 16 weeks) the levels of GABA_AR at the membrane of GS and TA MNs remained significantly lower than in intact controls (Sadlaoud *et al.*, 2020). In this time window (11 weeks post-injury) an increase in the densities of GABAergic axon terminals apposed on lumbar MNs has been reported (Khalki *et al.*, 2018). Therefore, we are in the presence of a drastic mismatch between pre-synaptic and post-synaptic specializations, which suggests an impairment of the GABAergic synaptic transmission to sublesional MNs, from early to late chronic phase post-injury.

In summary, these data suggest that SCT differentially affects the two inhibitory neurotransmissions to lumbar MNs caudal to the lesion, whether the lesion is done at birth or in adults. The glycinergic system remains relatively stable, at least up to 2 months post-injury, whereas the GABAergic transmission is strongly altered. In the other hand, SCT prevents the maturational up-regulation of KCC2 expression in neonate rats (Bos *et al.*, 2013; Jean-Xavier *et al.*, 2006) and results in a down-regulation of KCC2 levels in MNs of adult rats (Boulenguez *et al.*, 2010; Chopek *et al.*, 2015; Cote *et al.*, 2014; Khalki *et al.*, 2018), thereby depolarizing the Cl− equilibrium potential and reducing the strength of post-synaptic inhibition (see Figure 1) and contributing to spasticity (Boulenguez *et al.*, 2010).

Functional considerations: Since GlyR expression returns to control levels by 2 months postlesion, one would expect improvement of the hindlimb function at this stage. However, no spontaneous locomotor recovery could be observed in adult SCT rats (Alluin *et al.*, 2015). At all post-injury times tested $(1, 7, 15, 21, 28, 41, 45)$ days, 8 and 11 weeks, 3 and 4 months, see Table 1) there was a down regulation of the levels of KCC2 in sub-lesional MNs. Note that the expression rates of NKCC1, which decreases from P5 to low levels in adult spinal MNs (Still et al. 2009), are not significantly affected by SCI in adult rats (Boulenguez *et al.*, 2010; Cote *et al.*, 2012). A restoration of KCC2 levels has been observed in SCT adult rats using sensorimotor strategies (Chopek *et al.*, 2015; Cote *et al.*, 2014; Khalki *et al.*, 2018) or pharmacological treatments with the KCC2 activator prochlorperazine (Liabeuf *et al.*, 2017) or the calpain inhibitor MDL28170 (Plantier *et al.*, 2019). The effect of this up-regulation is twofold. It allows 1) a strengthening of inhibition through the preserved GlyR and chloride homeostasis and 2) a decrease of MNs hyperexcitability which resulted from the up-regulation of the persistent sodium current (INap) responsible for spasms (Brocard *et al.*, 2016; Plantier *et al.*, 2019). Therefore, the post lesional preservation of the glycinergic synaptic system, which is the major contributor to spinal MNs inhibition in adult (Gao *et al.*, 2001; Khalki *et al.*, 2018), is undoubtedly one of the factors that makes the locomotor rehabilitation possible in SCT adult rats. However, the search for strategies for restoring KCC2 levels, to maintain the chloride homeostasis and reduce the imbalance between excitation and inhibition, is a major issue to alleviate motor disorders affecting individuals with spinal cord injury, such as spasticity.

Table 1: Summary of literature data on the effect of SCT on the inhibitory pre- and postsynaptic signaling. IHF: Immunohistofluorescence; IHC: immunohistochemistry; ISH: In situ hybrydation; WB: Western blot; SCT: Complete spinal cord transection; MN: Motoneuron; TA: Tibialis anterior; GS: Gastrocnemius; TS: Triceps surae

Figure 1: **Regulation of intracellular Cl− concentration during development and after spinal cord injury**. A) The two inhibitory neurotransmitters glycine and GABA act through glycine and GABA_A receptors (GlyR and GABA_AR), respectively. Cation–chloride (Cl−) cotransporters NKCC1 (Cl- intruder) and KCC2 (Cl- extruser) are responsible for the regulation of intracellular chloride concentration ([Cl−]i). B) Dual immunohistochemistry of GlyRα1 and GABAARα2 on identified TA MNs in control (CTR) rats at P1 (B1), during development and on juvenile control rats (P12; B2), and P12 rats transected at P7 (SCT-12; B3). B4: Histograms of the densities of GlyR α 1 and GABA_AR α 2 per 100 μ m of somatic motoneuronal membrane, quantified in CTR-P1, CTR-P12 and SCT-P12, respectively. Adapted from (Sadlaoud *et al.*, 2010). C) In immature neurons, [Cl−]i is high and the equilibrium potential of Cl− (ECl) is above the resting membrane potential (Vm). Activation of GlyR and GABAAR leads to depolarization and may even trigger cell firing when ECl is above action potential threshold (VT). During development, because of the down-regulation of NKCC1 and up-regulation of KCC2, [Cl−]i decreases, ECl shifts to values below Vm. As a result, the strength of postsynaptic inhibition increases. Spinal cord transection rapidly transforms the actions of GABA and glycine from inhibition to excitation, by increasing the [Cl-]i via downregulation of KCC2. Adapted from (Vinay and Jean-Xavier, 2008).

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