

# Investigating the neuroprotective effect of AAV-mediated $\beta$ -synuclein overexpression in a transgenic model of synucleinopathy

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## 24 ABSTRACT

Parkinson's disease (PD) and multiple system atrophy (MSA) are neurodegenerative diseases 25 26 characterized by inclusions mainly composed of  $\alpha$ -synuclein ( $\alpha$ -syn) aggregates. The 27 objective of this study was to investigate if  $\beta$ -synuclein ( $\beta$ -syn) overexpression could have beneficial effects by inhibiting the aggregation of α-syn. The M83 transgenic mouse is a 28 model of synucleinopathy, which develops severe motor symptoms associated with 29 30 aggregation of  $\alpha$ -syn. M83 neonate or adult mice were injected with adeno-associated virus 31 vectors carrying the human  $\beta$ -syn gene (AAV $\beta$ -syn) or green fluorescent protein gene 32 (AAVGFP) using different injection sites. The M83 disease was - or not - accelerated using extracts of M83 brains injected with brain extract from mouse (M83) or human (MSA) 33 34 origins. AAV vectors expression was confirmed using Western blot and ELISA technics. AAV mediated  $\beta$ -syn overexpression did not delay the disease onset or reduce the  $\alpha$ -syn 35 phosphorylated at serine 129 levels detected by ELISA, regardless of the AAV injection route 36 37 and the inoculation of brain extracts. Instead, a proteinase-K resistant  $\beta$ -syn staining was 38 detected by immunohistochemistry, specifically in sick M83 mice overexpressing  $\beta$ -syn after 39 inoculation of AAV $\beta$ -syn. This study indicated for the first time that viral vector-mediated  $\beta$ syn overexpression could form aggregates in a model of synucleinopathy. 40

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## 43 Introduction

Parkinson's disease (PD), dementia with Lewy bodies (DLB) and multiple system 44 atrophy (MSA) are synucleinopathies, characterized by inclusions mainly composed of an 45 46 aggregated form of  $\alpha$ -synuclein ( $\alpha$ -syn) in the central nervous system (CNS). As for prions, aggregated forms of a-syn propagate within the CNS during the associated neuro-47 degenerative diseases. This characteristic was initially suggested in humans by Braak's 48 49 description of PD stages, and was confirmed later in experimental models of synucleinopathies, in particular in the M83 transgenic mouse model<sup>1</sup>. M83 mice express the 50 51 human A53T mutated  $\alpha$ -syn found in some familial PD forms, under the control of the mouse prion promoter<sup>1</sup>. These mice spontaneously develop severe motor impairment at 8-16 months 52 53 of age at the homozygous state. The symptomatology is associated with the accumulation in the CNS, of a pathological form of  $\alpha$ -syn ( $\alpha$ -syn<sup>P</sup>), heavily phosphorylated at serine 129 54 residue. We previously showed that, in M83 mice, disease onset can be accelerated by the 55 intracerebral inoculation of brain homogenates from sick M83 mice<sup>2</sup>. This model was further 56 characterized by development of an original ELISA that specifically detects, and allows to 57 easily quantify, the pathological  $\alpha$ -syn in sick M83 mice <sup>3-5</sup>. This *in vivo* model may be useful 58 for testing novel therapeutic strategies, particularly targeting progression of the  $\alpha$ -syn 59 aggregation. 60

61 β-synuclein (β-syn) is another member of the synuclein family, lacking a part of the non-62 amyloid component, a specific region suggested to be amyloidogenic in α-syn. According to 63 *in vitro* studies, unlike α-syn, β-syn alone is not able to form aggregates, but could instead 64 interact with α-syn and reduce its capacity to aggregate <sup>6</sup>. These anti-aggregative features 65 have been investigated *in vivo*, and some of these studies indeed reported a neuroprotective 66 effect and reduction of α-syn inclusions after overexpression of the human β-syn mediated by 67 DNA microinjection or lentiviral vectors in the transgenic D mouse model, overexpressing

human wild-type α-syn <sup>7,8</sup>. Another study also suggested that crossing mice overexpressing human β-syn with M83 mice delayed the M83 disease onset and reduced the α-syn aggregation <sup>9</sup>. However, two recent studies by Taschenberger *et al* and Landeck *et al* which analyzed the impact of human β-syn overexpression mediated by adeno-associated viral vectors (AAV) on nigral dopaminergic neurons in rats, described a neurodegeneration with βsyn aggregates <sup>10,11</sup>.

Here, in order to assess the effects of  $\beta$ -syn overexpression in the context of these recent and 74 unexpected data suggesting that  $\beta$ -syn produced using AAV may be able to aggregate, we 75 investigated the impact of human  $\beta$ -syn overexpression mediated by AAV on the onset of the 76 synucleinopathy of M83 mice. Two strategies of inoculation of the AAV vector were 77 78 sequentially tested: (i) an intracerebroventricular (ICV) inoculation at birth, in order to generate a widespread overexpression of the vector in the central nervous system <sup>12</sup>, and (ii) 79 an inoculation of the AAV vector into the ventral tegmental area (VTA)<sup>13</sup>, a region of the 80 mesencephalon in which prominent  $\alpha$ -syn aggregation occurs in sick M83 mice<sup>1</sup>. Our results 81 82 indicate that, regardless of the AAV inoculation strategy, continuous AAV-mediated  $\beta$ -syn overexpression in neurons did not delay the onset of the disease and did not modify the  $\alpha$ -syn<sup>P</sup> 83 84 levels measured by ELISA, strongly suggesting that  $\beta$ -syn may not protect against  $\alpha$ -syn 85 aggregation and propagation.

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#### 87 **Results**

## Human β-syn is widely expressed after intracerebroventricular injection of AAVβ-syn in neonates

90 To overexpress  $\beta$ -syn in the M83 CNS, we used self-complementary (sc)AAV9 vectors 91 expressing human  $\beta$ -syn (AAV $\beta$ -syn) gene or, as a control, the green fluorescent protein 92 (AAVGFP) gene under the control of the human synapsin1 promoter and with a post-93 transcriptional WPRE regulatory sequence (Supplementary figure 1A).

To functionally evaluate the AAV vectors, we first inoculated AAV $\beta$ -syn in the right and left cerebral ventricles of wild-type B6C3H newborn mice (genetic background of M83 transgenic mice) to obtain a widespread expression of the transgene in the CNS<sup>12</sup>. One month later, using viral specific primers, vector mRNA was detected in all regions of the brain and in the spinal cord (Supplementary figure 1B), as described<sup>14</sup>, with higher levels in rostral regions of the brain (olfactory bulbs, cortex, hippocampus, striatum) and mesencephalon.

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## 101 Intracerebroventricular injection of AAVβ-syn did not modify the disease of M83 mice

102 AAV vectors were first tested in M83 mice challenged by inoculation of brain extracts from sick M83 mice, an experimental design which is characterized by a quicker onset of the 103 disease with a lower intragroup variability as compared to unchallenged M83 mice<sup>2</sup>. AAV 104 vectors were ICV inoculated at birth and two months later challenged with different brain 105 106 extracts of sick M83 mice, one derived from a second passage of a sick M83 brain extract in 107 M83 mice (M83/M83 inoculum), and the other from a second passage of a human brain 108 extract from a MSA patient in M83 mice (MSA/M83 inoculum) (Figure 1A, Supplementary table 1)  $^{5}$ . M83 mice were euthanized after the detection of the first symptoms of disease, *i.e* 109 110 balance disorders or hind limb paralysis, identified by two independent observers.

In both experiments, no delay in the onset of the disease was observed in AAV $\beta$ -syn injected mice as compared to control AAVGFP mice, regardless of the type of inoculum (M83/M83 or MSA/M83). Instead, AAV $\beta$ -syn injection significantly accelerated the onset of the disease in animals challenged with the M83/M83 extract as compared to control mice (log rank test p<0,05) (Figure 1B). In contrast, no difference was observed in animals challenged with the MSA/M83 extract (Figure 1E). In each experiment, we did not detect any difference

concerning the clinical symptoms of sick mice after the injection of AAVB-syn or AAVGFP. 117 After dissection of the brains, biochemical analyses were realized. As the vector expression 118 119 was higher in the rostral regions of the brain than in other CNS regions after ICV injections, 120 we first checked the vector expression by detecting total  $\beta$ -syn in the hippocampus. An ELISA test adapted from Krassnig *et al.* allowed to detect a significant overexpression of  $\beta$ -121 122 syn (both murine  $\beta$ -syn and human  $\beta$ -syn produced by the vector) in the hippocampus, confirming the continuous expression of the AAV $\beta$ -syn until the disease onset (Figure 1C, 123 124 and F). We next focused on the mesencephalon, the brainstem and the spinal cord because these CNS regions are known to be strongly positive in  $\alpha$ -syn<sup>P</sup> in sick M83 mice <sup>3-5</sup>. A 125 126 significant overexpression of  $\beta$ -syn was only detected in the mesencephalon, the brain stem and in the spinal cord of sick M83 mice injected with AAV $\beta$ -syn challenged with M83/M83 127 inoculum, but not in mice challenged with the MSA/M83 inoculum (Figure 1C and F). Since 128 the M83 disease is associated with moderate or high  $\alpha$ -syn<sup>P</sup> levels into different brain regions 129 and in the spinal cord <sup>5</sup>, we quantified  $\alpha$ -syn<sup>P</sup> using ELISA in order to detect a potential effect 130 of β-syn on this biochemical marker of the disease. Our analyses did not show any significant 131 difference in the  $\alpha$ -syn<sup>P</sup> levels in any of the examined CNS regions after AAV $\beta$ -syn 132 133 inoculation, regardless of the nature of the inoculum used to accelerate the disease (Figure 1D, and G). 134

To further study the levels of  $\beta$ -syn protein after AAV injections in M83 mice throughout the CNS, we used Western blot and ELISA which allowed to detect total  $\beta$ -syn in specific brain regions. Comparing total  $\beta$ -syn levels of 5 to 7 months old sick M83 mice inoculated at birth with AAV $\beta$ -syn or AAV GFP then challenged with the MSA/M83 inoculum (same mice as in Figure 1E), an overexpression of  $\beta$ -syn protein was detected by ELISA in the olfactory bulbs, cortex, striatum, hippocampus, but not in the other regions (Figure 2A), consistent with the results obtained by qRT-PCR at one month after AAV inoculation (Supplementary figure 1B). Western blot analyses confirmed an overexpression of β-syn protein in the hippocampus of the same mice after AAVβ-syn inoculation (Figure 2B and C). Most of the animals inoculated with AAVβ-syn showed a β-syn overexpression detectable until the disease onset (Figure 1C, F). Only a few animals did not show significant overexpression of β-syn detected by ELISA or by immunohistochemistry (5/48 animals, in the entire study); these animals were excluded for the study analyzing the onset of disease.

We next examined the possible effects of AAVβ-syn ICV injection on the spontaneous development of the M83 disease during aging, without any challenge to accelerate the disease (Figure 3A). Here again, AAVβ-syn injection neither delayed the disease onset of M83 mice nor modified the  $\alpha$ -syn<sup>P</sup> levels (Figure 3B and D), despite a sustained expression of the transgene, at least in the hippocampus, up to the disease onset (Figure 3C) (ELISA data correspond to 2 mice for the treated group and 3 mice for the control group; consequently, no statistical analysis was done here).

Altogether, these results indicated that AAVβ-syn injection in the ventricles resulted in a widespread expression of the transgene in the CNS, but at a moderate level, especially in the structures that are the most heavily affected by the synucleinopathy lesions. We thus considered another strategy by inoculating the AAV vectors in the ventral tegmental area (VTA), which is located into the mesencephalon, where major brain lesions and accumulation of  $\alpha$ -syn<sup>P</sup> are detected in sick M83 mice and which is also connected to multiple brain areas

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## β-syn is overexpressed mostly in the mesencephalon after injection of AAVβ-syn in the VTA of adult mice

165 In order to validate this injection protocol of AAV vectors into the VTA, two months old 166 wild-type mice were first inoculated with AAV $\beta$ -syn in the VTA and sacrificed one month later. After dissection of the brains, vector mRNA was mostly detected in the mesencephalon,
but also in the cortex, striatum, hippocampus and brainstem; only traces of vector mRNA
were identified in the other regions of the brain (except the olfactory bulbs) and in the spinal
cord, as compared to mesencephalon (Supplementary figure 1C).

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## 172 Injection of AAVβ-syn in the VTA did not modify the disease of M83 mice

173 The same protocol was then applied to M83 mice. After the inoculation of AAV in the VTA 174 in two months old M83 mice, the disease was accelerated by intracerebrally inoculating the 175 mice one month later with the M83/M83 or the MSA/M83 inoculum (Figure 4A). No 176 significant difference in the survival was observed between the AAV $\beta$ -syn and AAVGFP injected mice, between 3 and 8 months (Figure 4B, E). As before, we did not detect any 177 difference concerning the clinical symptoms of sick mice after the injection of AAVβ-syn or 178 AAVGFP. Importantly, analyses by ELISA confirmed the strong overexpression of  $\beta$ -syn in 179 the mesencephalon although no difference was detected in the levels of pathological  $\alpha$ -syn<sup>P</sup> at 180 181 the disease stage (Figure 4C, D, F, and G).

182 By immunohistochemistry, using an antibody targeting total  $\beta$ -syn (human and murine  $\beta$ -syn), a specific  $\beta$ -syn staining punctate pattern was detected in the inoculated mesencephalon, as 183 well as in the striatum and brain stem which represent connected regions <sup>13</sup>, of all the sick 184 185 M83 mice inoculated with AAV $\beta$ -syn (5/5), but not in sick M83 mice inoculated with AAVGFP (0/2) (Figure 4H). Further analysis indicated that these  $\beta$ -syn immunoreactive dots, 186 which are specifically detected in mice inoculated with  $AAV\beta$ -syn, mostly co-localize with 187 188 the presynaptic protein synaptophysin (Supplementary figure 2A). Co-localization of GFP with neuronal marker  $\beta$ -tubulin type 3 in sick M83 mice inoculated with AAVGFP also 189 confirmed that these vectors allowed a neuronal specific expression of the transgene 190 (Supplementary figure 2B). Interestingly, the morphology of the inclusions containing  $\alpha$ -syn 191

phosphorylated at serine 129 detected by immunohistochemistry was not modified by  $\beta$ -syn 192 overexpression (Supplementary figure 3A). Furthermore, these inclusions only rarely co-193 194 localized with AAV-specific  $\beta$ -syn staining by immunofluorescence (Supplementary figure 195 3B). We further biochemically characterized vectors expression after injection in the VTA in M83 mice euthanized 4 months later. Total  $\beta$ -syn levels were quantified by ELISA and 196 197 showed a significant increase of the protein in the mesencephalon of mice injected with AAV $\beta$ -syn as well as in the hippocampus and brain stem compared to control mice injected 198 199 with the AAVGFP (Figure 5A).  $\beta$ -syn protein overexpression was also readily detected by 200 Western blot in the mesencephalon of most of these mice (Figure 5B).

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## 202 The absence of protective effect was not due to an insufficient dose of AAV vector 203 injected in the VTA

204 We finally asked whether the absence of any significant effect of AAV $\beta$ -syn could be due to an insufficient dose of AAV vector. We thus injected 4-times more vector in the VTA one 205 206 month before the challenge by intra-cerebral inoculation of the M83/M83 inoculum. This 207 AAV dose allowed to significantly increase the overexpression of  $\beta$ -syn at the disease stage 208 (p<0,05) (Figure 5C, D). However, the M83 disease was still not delayed by  $\beta$ -syn overexpression, but instead, as previously observed after ICV injection of AAV (Figure 1B), 209 the disease appeared significantly earlier in the AAV $\beta$ -syn injected mice as compared to 210 211 control AAVGFP animals (p<0,001) (Figure 5E). As in previous experiments, no impact was found on the  $\alpha$ -syn<sup>P</sup> levels even if  $\beta$ -syn was significantly increased at the stage of clinical 212 213 signs in all the CNS regions (Figure 5D, F).

By immunohistochemistry, as with the low dose of AAV, a specific  $\beta$ -syn staining punctate pattern was detected in the inoculated mesencephalon, as well as in the striatum and brain

stem in two sick M83 mice inoculated with AAVβ-syn, but not in one mouse inoculated with
AAVGFP (data not shown).

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## **AAV-mediated overexpression of β-syn might have formed aggregates of β-syn**

220 Proteinase K (PK)-resistant  $\beta$ -syn aggregates have been previously described after inoculation of AAV vectors expressing human  $\beta$ -syn in the *substantia nigra* of rats <sup>10,11</sup>. We thus analyzed 221 by immunohistochemistry the brain of several sick M83 mice after inoculation of AAVs in 222 223 the VTA (Figure 6). After PK digestion, total  $\beta$ -syn antibody revealed a punctate pattern 224 specifically detected after the inoculation of AAV $\beta$ -syn, in the mesencephalon of 7/7 sick 225 M83 mice (5 mice injected with low dose of AAV, of which 2 were challenged with M83/M83 inoculum and 3 with MSA/M83 inoculum, as well as 2 mice injected with high 226 dose of AAV and challenged with M83/M83 inoculum). This punctate pattern was also 227 228 detected in the striatum and the brain stem where the AAV is also expressed, but not in the cerebellum where the AAV is less expressed (Supplementary figure 4). A few cell bodies 229 230 were also stained with total  $\beta$ -syn antibody after PK digestion, particularly in the 231 mesencephalon of these mice (data not shown). Even if diffuse, PK resistant staining was also 232 detected in the hippocampal region of two sick M83 mice injected with AAV $\beta$ -syn and not challenged with brain extract inoculation, but not in one sick M83 control mouse (data not 233 234 shown). These results confirm that overexpression of  $\beta$ -syn resulted in PK-resistant  $\beta$ -syn 235 staining which could be detected independently of the vector dose, the inoculation site or the 236 age of inoculation. Interestingly, Western blot detection of  $\beta$ -syn in the brain homogenates 237 from sick M83 mice injected with high dose of AAVβ-syn showed the appearance of an 238 additional band, consistent with a dimer, that is not visible in the homogenates from sick M83 mice injected or not with AAVGFP (even after long exposure of the blot) (Supplementary 239 figure 5). 240

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## 242 Discussion

243  $\beta$ -syn was previously described as a neuroprotective protein, able to inhibit the aggregation process of  $\alpha$ -syn *in vitro* and having benefic effects on synucleinopathies *in vivo* <sup>6-9,15</sup>. Here, 244 245 we tried to slow down a synucleinopathy in a transgenic mouse model with dramatic clinical symptoms linked to pathological  $\alpha$ -syn aggregation. In particular, we analyzed the effects of 246 247 the overexpression of  $\beta$ -syn mediated by an AAV vector on  $\alpha$ -syn aggregation. We show here 248 that the delivery of the AAV $\beta$ -syn vector via two different injection routes 249 (intracerebroventricular or in the ventral tegmental area) in transgenic M83 mice, neither 250 delayed the disease onset nor reduced the levels of pathological  $\alpha$ -syn at the disease stage, 251 despite a sustained overexpression of  $\beta$ -syn. A limitation of our study remains the low number 252 of animals that were followed in each of the experimental groups, given the multiple strategies that were studied (different routes and ages of AAV inoculations, different AAV 253 254 doses, AAV effects during normal aging or after intracerebral experimental challenges of two 255 M83 sources (M83/M83 or MSA/M83) as summarized in supplementary Table 1. This 256 represents a statistical limitation of our study, although it is noteworthy that in the only two 257 experimental groups in which a statistically significant difference was found between the 258 survival of mice injected with AAVβ-syn and AAVGFP vectors, this rather suggested a deleterious effect of  $\beta$ -syn overexpression. Studies on larger cohorts will thus be required to 259 260 confirm our results. A previous study indeed suggested that constitutive overexpression of  $\beta$ -261 syn in transgenic M83 mice by generating double transgenic mice delays the M83 disease onset by several months  $^{9}$ . In our study, interestingly, M83 mice overexpressing  $\beta$ -syn showed 262 263 a higher spontaneous activity in experiments in which open field was performed and a 264 tendency to have more balance trouble in beam walking test (Supplementary figure 6). These results suggest that  $\beta$ -syn expression might have an impact on mice behavior without 265

affecting the ultimate development of the disease. Importantly, in this study of Fan and 266 colleagues, human  $\beta$ -syn was expressed from the pan-neuronal mouse prion promoter, which 267 268 is the same promoter used to express human mutated  $\alpha$ -syn in the M83 model. It is possible that the strategies used in our study did not provide sufficient expression of  $\beta$ -syn, in the CNS 269 regions targeted by the disease. Indeed, as expected, after the injection of AAV in the VTA, 270 271 we obtained a very high overexpression of  $\beta$ -syn in the mesencephalon in which the aggregation of  $\alpha$ -syn is high at the disease stage, but this region may not be the region where 272 the aggregation process of  $\alpha$ -syn begins <sup>16</sup>. It should be emphasized that the major signs of the 273 clinical disease of M83 mice are in relation with some - still poorly explained- disorders in the 274 spinal cord <sup>17</sup>. In an additional series of experiments, we were unable to identify a 275 degeneration of motor neurons in the lumbar spinal cord after the injection of preformed 276 fibrils of human  $\alpha$ -syn in M83 mice, as previously reported after intra-muscular injections <sup>17</sup>. 277 278 further interrogating the cause of the appearance of symptoms (Supplementary figure 7). The ICV injection of AAV9 vector in SMN∆7 mice, a severe model of spinal muscular atrophy, 279 allowed to express a codon-optimized human SMN1 coding sequence in the spinal cord, 280 which as a result, has improved significantly their survival <sup>18</sup>. After the ICV inoculation of 281 AAV  $\beta$ -syn, the overexpression of  $\beta$ -syn was diffuse and lower in caudal regions of the brain 282 and spinal cord, as described <sup>14</sup>, but it may have been insufficient to slow down the 283 284 synucleinopathy process. It must however be noted that an *in vitro* study using AAV vectors 285 suggests that  $\beta$ -syn overexpression is benefic on  $\alpha$ -syn linked toxicity only at a low ratio of  $\beta$ syn/ $\alpha$ -syn expression <sup>10</sup>. Even if it was not evaluated here, another study has described 286 287 transgene expression in the neuromuscular junction after AAV injection into the ventricles at birth; this may be important since the degeneration of the neuromuscular junction was also 288 described as a possible explanation of the appearance of symptoms in M83 mice <sup>14,17</sup>. At the 289 cellular level, human  $\beta$ -syn seems mostly localized in the presynaptic button and axons in sick 290

291 M83 mice, which seems appropriate because the aggregation of  $\alpha$ -syn was suggested to start at the presynaptic level in synucleinopathies <sup>19,20</sup>. Another study suggested that the benefic 292 effect of  $\beta$ -syn is the result of the down regulation of the expression of  $\alpha$ -syn, but we did not 293 294 detect any decrease of  $\alpha$ -syn expression, even in the brain regions overexpressing  $\beta$ -syn (data not shown). In another transgenic mouse model (D line) overexpressing human wild type  $\alpha$ -295 296 syn, two studies reported the reduction of the synucleinopathy by either generating bigenic 297 mice that also overexpress  $\beta$ -syn, or vehiculating the human  $\beta$ -syn transgene, under the control of cytomegalovirus (CMV) promoter, in a lentiviral vector <sup>7,8</sup>. As some reports 298 indicate a downregulation of the CMV promoter in the CNS over time<sup>21</sup>, we chose here to 299 300 use the human synapsin 1 promoter to obtain a long term expression of  $\beta$ -syn, which was confirmed in the present study, even in old mice. Importantly, as previously described <sup>22</sup>, the 301 synapsin 1 promoter also allowed to express human  $\beta$ -syn specifically in neurons, where  $\alpha$ -302 syn aggregates are found in the M83 model<sup>1</sup>. According to the study by Hashimoto *et al.*, the 303 neuroprotective effect of  $\beta$ -syn was associated to the activation of Akt, a neuroprotective 304 protein which could be indirectly down-regulated by  $\alpha$ -syn during the synucleinopathy 305 process <sup>23</sup>. However, we did not detect any significant increase of Akt activation by Western 306 307 blot in 6 months-old M83 mice inoculated with AAV $\beta$ -syn in the VTA at 2 months, and challenged one month later with the M83/M83 inoculum (Supplementary figure 8). It should 308 be noticed that such Akt changes were not consistently observed, as shown in a study with a 309 lentiviral vector used for  $\beta$ -syn overexpression<sup>24</sup>. 310

Surprisingly, in the present study, two experiments in mice challenged with a M83/M83 inoculum rather showed a significant acceleration of the disease after AAV  $\beta$ -syn injection (Fig 1B and 5E). Interestingly, several studies reported that  $\beta$ -syn could be implicated in the pathological process of synucleinopathies. Indeed, an axonal pathology with  $\beta$ -syn accumulation in axons was reported in patients with Parkinson's disease, DLB or

Hallervorden-Spatz syndrome  $^{25,26}$ . In addition, two mutations of  $\beta$ -syn, identified in DLB 316 cases, were suggested to be responsible for  $\alpha$ -syn aggregation and DLB<sup>27</sup>. Generating 317 transgenic mice co-expressing P123H mutated  $\beta$ -syn with human  $\alpha$ -syn resulted in an 318 enhanced pathology, suggesting that mutated  $\beta$ -syn could potentiate  $\alpha$ -syn aggregation <sup>28</sup>. 319 Variable results were also observed after overexpression of  $\beta$ -syn using a lentiviral vector 320 after inoculation into the hippocampus of transgenic mice overexpressing a mutated form of 321 the human  $\beta$ -amyloid precursor protein (APP) involved in Alzheimer's disease, as assessed by 322 examining plaque load, memory deficits, and anxiety<sup>24</sup>. However, it should be noted that the 323 324 expression level of  $\beta$ -syn was relatively low in this latter study (not detectable at the protein level). Also, it is interesting to notice that a truncated form of human recombinant  $\alpha$ -syn 325 lacking the 71-82 residues not able to form aggregates *in vitro*, like  $\beta$ -syn<sup>29</sup>, accelerated the 326 disease of a few M83 mice, after injection in the muscle or in the peritoneal cavity <sup>17,30</sup>. These 327 results raise the possibility that  $\beta$ -syn might be able to accelerate the aggregation of  $\alpha$ -syn in 328 329 M83 mice, although this has not been reported so far.

Further analyzing the effects of  $\beta$ -syn expression in sick M83 mice inoculated with the AAV 330 331 vector in the VTA allowed detecting a punctate pattern of  $\beta$ -syn staining in the targeted brain 332 region and some connected regions, only in mice inoculated with AAV $\beta$ -syn. This staining was more resistant to PK digestion than that endogenous β-syn in control mice. This result 333 334 suggests that overexpressed  $\beta$ -syn formed aggregates which could explain why  $\beta$ -syn did not 335 act as expected, *i.e* as an  $\alpha$ -syn aggregation inhibitor. Landeck *et al.* have described the same staining of β-syn resistant to PK digestion referred as "dark punctae", two months after the 336 337 inoculation of AAV5 carrying human β-syn under the control of chicken beta-actin promoter including a CMV enhancer element (CBA) in the *substantia nigra* of rats <sup>11</sup>. Before this study, 338 339 Taschenberger *et al.* have also described the detection of PK-resistant  $\beta$ -syn aggregates *in* 340 vivo, as early as two weeks following the inoculation of AAV2 carrying human  $\beta$ -syn gene in

the substantia nigra of rats <sup>10</sup>. This time, the vector design was closer to ours, using the same 341 342 promoter (human synapsin) to express human  $\beta$ -syn, with a WPRE sequence to enhance transgene expression. It is interesting to notice that, even if the AAV serotype used as well as 343 the vector design can differ between studies, all these studies that used AAV to carry  $\beta$ -syn 344 also reported the detection of  $\beta$ -syn aggregates. Furthermore, our observations in 345 346 immunohistochemistry are supported biochemically in the present study, by the detection of a specific  $\beta$ -syn pattern in Western blot that could be a specific signature of  $\beta$ -syn aggregation, 347 348 in mice showing overexpression of  $\beta$ -syn after injection of high dose of AAV $\beta$ -syn 349 (Supplementary figure 5). All these observations suggest that the neuroprotective effect of  $\beta$ -350 syn may vary according to the strategy followed to overexpress it and the animal model. For example, it would be interesting to inject AAV vectors used in this study in transgenic D mice 351 352 in order to see if we obtain the same  $\beta$ -syn aggregates. The D line is indeed an example of 353 transgenic mice expressing the normal human  $\alpha$ -syn, which may thus be more representative of the common situation in humans. The interest of the M83 mouse line, which is well 354 355 illustrated in our study, is the possibility to easily quantify both survival of mice, ultimately 356 showing a major clinical disease, and levels of pathological  $\alpha$ -syn, using an ELISA test. The 357 A53T mutation in the human protein is however associated with a high propensity to aggregation  $^{31}$  and our observations with AAV-mediated  $\beta$ -syn overexpression may not be 358 representative of the situation of humans with non genetic synucleinopathies. Also, it is 359 360 important to point out that even if most of neurons express the transgene in the cerebral region 361 injected of mice in our study, there is an important variability of the expression of the 362 transgene in transduced cells after AAV vectors injection (Supplementary figure 9). It might explain at least partly the difficulty to detect a benefic effect of  $\beta$ -syn overexpression as it was 363 suggested to depend on a specific  $\alpha$ -syn/ $\beta$ -syn ratio in cell culture <sup>10</sup>. 364

The present study suggest for the first time that  $\beta$ -syn overexpression could not be benefic in a synucleinopathy model. This may be due at least partly to the formation of a PK-resistant  $\beta$ syn species after AAV $\beta$ -syn inoculation. According to a very recent study, a mildly acidic pH environment, found in several organelles, could induce  $\beta$ -syn aggregation, highlighting the complexity of  $\beta$ -syn fibrillation mechanisms occurring *in vivo* <sup>32</sup>. Further studies are needed to better understand how and to what extent  $\beta$ -syn could play a role in synucleinopathies.

371 However, even though we could not detect any protective effects of  $\beta$ -syn, our study confirms that an AAV vector is suitable for long-term overexpression of proteins into the CNS. 372 Notably, after ICV inoculations of AAV in neonates, we confirmed a widespread expression 373 of the protein, as this was also recently described using an  $\alpha$ -syn AAV vector <sup>33</sup>. The injection 374 of AAV in the VTA also allowed to express human  $\beta$ -syn in various connected regions, as 375 376 suggested in a previous study using serotype 9 AAV vector carrying a lysosomal enzyme gene <sup>13</sup>. Our data also illustrate the robustness of the experimental model of M83 mice 377 378 intracerebrally challenged by inocula containing aggregated  $\alpha$ -syn, showing rather short and relatively uniform survival periods before the appearance of characteristics clinical signs, 379 380 which can be used for the assessment of future therapeutic strategies.

381

#### 382 Methods

*Animals:* M83 transgenic mice were used in this study (B6;C3H-Tg[SNCA]83Vle/J, RRID:MGI:3603036, The Jackson Laboratory, Bar Harbor, ME, USA). These mice express A53T mutated human  $\alpha$ -syn protein and spontaneously develop severe motor impairment leading to early death <sup>1</sup>. Homozygous M83 mice develop characteristic motor symptoms between 8 and 16 months of life, beginning with reduced ambulation, balance disorders, partial paralysis of a hind leg and then progressing to prostration, difficulty in feeding, weight loss, hunched back and general paralysis <sup>1</sup>. The animals were housed per group in enriched cages in a temperature-controlled room on a 12h light/dark cycle, and received water and food *ad libitum*, in our approved facilities (No. C69 387 0801) for breeding and experimental
studies, in accordance with EEC Directive 86/609/EEC and French decree No. 2013-118. The
experimental studies described in this article were performed in containment level 3 facilities
and authorized by the « Comité d'éthique » CE2A – 16, ComEth ANSES/ENVA/UPEC and
by the « Ministère de l'enseignement supérieur, de la recherche et de l'innovation » (ref 16006). All experiments were performed in accordance with relevant guidelines and regulations.

AAV vectors: Recombinant self-complementary AAV9 vectors (scAAV9) encoding human β-398 399 syn or enhanced GFP (eGFP) were produced by calcium phosphate transfection of HEK-293 cells <sup>34</sup>. Three plasmids were transfected simultaneously: (i) a vector plasmid containing the 400 human gene of β-syn or eGFP under control of the neuron-specific synapsin 1 gene promoter 401 (Supplementary figure 1A) (ii) a helper plasmid pXX6<sup>35</sup> and (iii) a plasmid carrying rep2 and 402 cap9 genes <sup>36</sup>. Vector particles were extracted and purified on an iodixanol step gradient. 403 Titers were determined by quantitative polymerase chain reaction (qPCR) and expressed as 404 405 viral genomes per milliliter (vg/mL).

Inoculations: AAV vectors were injected at birth or at adulthood (two months of age), at 407 different sites of inoculation. Neonates were inoculated using 5 µL Hamilton syringe, with 408 9.38\*10<sup>8</sup> vg of AAV $\beta$ -syn or 2.73\*10<sup>8</sup> vg of AAVGFP vectors per lateral ventricle of the 409 viral solution with 0.05% Trypan blue  $^{12}$ . Adults mice were inoculated with 3.75\*10<sup>8</sup> vg of 410 AAV $\beta$ -syn or 1.09\*10<sup>8</sup> vg of AAVGFP (or with high dose: 1.5\*10<sup>9</sup> vg of AAV $\beta$ -syn or 411  $4.36*10^8$  vg of AAVGFP) of viral solution in the ventral tegmental area located in the 412 413 mesencephalon, using stereotaxic coordinates (anteroposterior: -3.16 mediolateral: +0.25 dorsoventral: -4.50). Two months after the inoculation of the viral solution in neonates or one 414

month after the inoculation of the viral solution in adults, M83 mice were inoculated with 415 416 brain homogenates from a second passage of a sick M83 brain sample in M83 mice 417 (M83/M83 inoculum) or a second passage of a patient with multiple system atrophy (MSA) brain sample in M83 mice (MSA/M83 inoculum) (same sample used in a previous publication 418  $^{5}$ ). These homogenates were injected in the left striatum, using stereotaxic coordinates (AP: 419 +0.14 ML: +2 DV: -2.75). Before each stereotaxic surgery (AAV or brain extract 420 inoculation), mice have been anesthetized with a xylazine (10 mg/kg) and ketamine (100 421 422 mg/kg) mixture.

423

424 *qRT-PCR*: B6C3H brains were dissected and RNA was extracted from brain regions using 425 RNeasy lipid tissue Minikit (ref 74804, Qiagen, Courtaboeuf, France). RNA samples were tittered using Nanodrop (Nanodrop 1000, Thermo Fisher scientific, Villebon sur Yvette, 426 427 France). 500 ng of RNA were reverse-transcripted with Quanta qScript cDNA Super Mix (ref 95048-100, VWR international, Fontenay-sous-Bois, France) on a Biorad iCycler. After a 428 429 1:10 dilution, complementary DNA samples were analyzed by qPCR using primers specific 430 for the WPRE region of viral mRNA, and primers specific for GAPDH mRNA. We used the 431 LC 480 SYBR Green 1 Master kit (ref 04887 352 001, Roche, Boulogne-Billancourt, France) on a Roche Light Cycler 480 to perform the qPCR and analyzed the results on the LC 480 432 software. 433

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*ELISA:* Brains were dissected as described <sup>4</sup> and proteins were extracted in high salt buffer
(50 mM Tris-HCl, pH 7.5, 750 mM NaCl, 5 mM EDTA, 1 mM DTT, 1% phosphatase and
protease inhibitor cocktails), using a mechanical homogenizer (grinding balls, Precellys 24,
Bertin Technologies, Montigny-le-Bretonneux, France) to obtain a 10% homogenate (w/v).

Each sample was titered using the DC<sup>TM</sup> protein assay kit (ref 5000111, Biorad, Marnes-laCoquette, France).

As already described for  $\alpha$ -syn<sup>P</sup> detection <sup>3,5</sup>, plates were saturated with Superblock T20 441 (Thermo Scientific, Rockford, IL, USA) for 1 h at 25°C, under agitation (150 rpm). After 5 442 washes in PBST, 10  $\mu$ g of protein (for  $\alpha$ -syn<sup>P</sup> detection) diluted in PBST were incubated for 2 443 h at 25°C, under agitation (150 rpm).  $\alpha$ -syn<sup>P</sup> was detected with a rabbit polyclonal antibody 444 against PSer129 α-syn (ref ab59264, Cambridge, UK) diluted to 1:3,000 in PBST with 1% 445 bovine serum albumin (BSA); plates were incubated for 1 h at 25°C under agitation. After 5 446 washes, anti-rabbit IgG HRP conjugate (ref 4010-05, SouthernBiotech, Birmingham, AL, 447 USA) was added at 1:2,000 (for  $\alpha$ -syn<sup>P</sup> detection). After washing, 100 µL of 3,3',5,5'-448 tetramethylbenzidine solution (ref. T0440, Sigma, Saint-Quentin-Fallavier, France) were 449 450 added to each well and plates were incubated for 15 min with shaking. The reaction was stopped with 100 µL of 1 N HCl, and the absorbance was measured at 450 nm with the 451 452 microplate reader Model 680 (Clariostar, BMG Labtech, Champigny sur Marne, France).

453 ELISA allowing total  $\beta$ -syn quantification was adapted based on an ELISA already published <sup>24</sup>. Briefly, 2  $\mu$ g or 0.2  $\mu$ g (for Figure 5) of brain homogenate was diluted in carbonate-454 bicarbonate buffer 50mM (pH 9.6) and incubated at 4°C overnight. After 5 washes in PBST, 455 456 plates were saturated with Superblock T20 for 1 h at 25°C, under agitation (150 rpm). After 5 457 washes in PBST, plates were incubated with 1:2,000 of an anti- $\beta$ -syn antibody ab76111 (ref EP1537Y, Abcam, Cambridge, UK). After 5 washes in PBST, plates were incubated with an 458 459 anti-rabbit IgG HRP conjugate (ref 4010-05, SouthernBiotech, Birmingham, AL, USA) at 1:4,000. After washing, immunoreactivity was revealed with the same protocol as for  $\alpha$ -syn 460 461 ELISA.

Western blot: 50 µg (for phosphorylated Akt detection) or 10 µg of proteins (for total Akt 463 detection) or 2  $\mu$ g of proteins (for GFP and  $\beta$ -syn detection) were separated in 12% SDS-464 465 polyacrylamide gels and electroblotted onto polyvinylidene fluoride (PvF) membranes 0,45 466 μm (Bio-Rad). The membranes were washed 3 times in Tris-Buffered Saline (TBS) for 5 min 467 at room temperature (RT) under agitation and were saturated 1 h with 5% BSA in TBS 0.1% 468 Tween20 (TBST). Membranes were incubated with rabbit antibody against phosphorylated Akt at Ser473 (ref 9271S, Ozyme, Montigny-le-Bretonneux, France) at 1:1,000 or with rabbit 469 470 antibody against total Akt (ref 9272, Ozyme, Montigny-le-Bretonneux, France) at 1:1,000 or with anti-β-syn antibody ab76111 (ref EP1537Y, Abcam, Cambridge, UK) at 1:5,000 or with 471 472 anti-GFP antibody (ref ab290, Abcam, Cambridge, UK) at 1:1,000 or with anti-β-actin antibody (ref ab8226, Abcam, Cambridge, UK) at 1:2000 overnight at 4°C. After 3 washes, 473 the membranes were incubated for 1 h at RT with anti-rabbit HRP-linked antibody (ref 474 475 7074P2, Ozyme, Montigny-le-Bretonneux, France) for detection of total Akt and phosphorylated Akt at 1:2,000, or with anti-rabbit HRP-linked antibody (ref 4010-05, 476 SouthernBiotech, Birmingham, AL, USA). The immunocomplexes were revealed with 477 chemiluminescent reagents (Supersignal WestDura, ref 34076, Pierce, Interchim, MontLucon, 478 479 France), and analyzed using the ChemiDoc system (Bio-Rad) and Image Lab software (Bio-Rad) which allowed to quantify the intensity of the bands. 480

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*Immunohistochemistry/Immunofluorescence:* After dissection, brain samples were fixed in 4% paraformaldehyde and paraffin embedded to be cut into serial 6  $\mu$ m sections. After deparaffinization, endogeneous peroxidase activity was directly blocked with oxygenated water 3% during 5 minutes at RT. Brain sections were pretreated with a citrate solution (ref C9999, Sigma, Saint-Quentin-Fallavier, France) with heat antigen retrieval. For the detection of  $\alpha$ -syn phosphorylated at serine 129 by immunohistochemistry, we did an additional antigen 488 retrieval step in which sections were treated with a 4 M solution of guanidinium thyocyanate during 20 min. After washing, sections were saturated using a blocking reagent (ref 489 490 11096176001, Roche), 1 h at RT and incubated with antibody against  $\beta$ -syn ab76111 in PBST (ref EP1537Y, Abcam, Cambridge, UK) diluted at 1:500, anti-synaptophysin antibody SY38 491 (ref ab8049, Abcam, Cambridge, UK) diluted at 1:10 or anti-GFP antibody (ref ab290, 492 493 Abcam, Cambridge, UK) diluted at 1:500 or anti-tubulin  $\beta$ -3 antibody (ref MMS-435P, Biolegend, San diego, USA) diluted at 1:100) at 4°C overnight. For the detection 494 495 phosphorylated at S129  $\alpha$ -syn we used a rabbit antibody (ref. ab51253, Abcam, Cambridge, GB) diluted at 1:300 in TBST for immunohistochemistry, and a mouse antibody (ref: 496 497 pSyn#64, FUJIFILM Wako Pure Chemical Corporation, China) diluted at 1:1000 in TBST for immunofluorescence analysis (with the rabbit anti- $\beta$ -syn antibody, Supplementary figure 3), 498 at 4°C overnight. After another blocking step 30 minutes at RT, for immunohistochemistry, 499 500 sections were incubated 1 h at RT with anti-rabbit IgG HRP conjugate (ref 4010-05, SouthernBiotech, Birmingham, AL, USA) diluted at 1:250 in PBST or TBST. Antibody 501 binding was detected using DAB peroxidase substrate (ref SK-4100, Vector Laboratories, 502 503 Burlingame, CA USA) intensified with nickel chloride for  $\beta$ -syn or ImmPACT DAB 504 peroxidase (HRP) substrate (ref SK-4105, Vector Laboratories, Burlingame, CA USA) for phosphorylated  $\alpha$ -syn detection. For immunofluorescence, sections were incubated 1 h at RT 505 with anti-rabbit IgG AlexaFluor 488 or 555 (ref A-11008 and ref A21428, respectively, 506 507 Thermofischer scientific, Villebon sur Yvette, France) or with anti-mouse IgG AlexaFluor 508 488 or 555 (ref A11001 and A21127 respectively, Thermofischer scientific, Villebon sur 509 Yvette, France) diluted at 1:1000. After washings in PBST then in PBS, sections were treated 510 with an autofluorescence eliminator reagent (ref 2160, Millipore, Temecula, USA), before mounting. 511

513 *PK digestion:* After being deparaffinized, sections were incubated with a 10  $\mu$ g/mL solution 514 of proteinase K (ref EU0090-B, Euromedex, Souffelweyersheim, France) diluted in PBS, 10 515 minutes at RT (protocol adapted from <sup>10</sup>). Sections were washed three times in water before 516 blocking the endogenous peroxidase activity and pursuing the immunohistochemistry staining 517 protocol.

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Statistical analysis: Survival time was defined as the time from birth until death (Figure 3A, 519 520 exclusively) or as the time from the inoculation of the brain extract until the appearance of the 521 first specific M83 symptoms and euthanasia of the mouse. The detection of these specific 522 symptoms was done blindly with regard to the initial AAV ( $\beta$ -syn or GFP) treatment. We right-censored mice found dead without M83 disease identification. Survival times were 523 compared using log-rank test. Concerning statistical analysis of ELISA tests results, means 524 525 were compared using Wilcoxon test. The difference was significant when p < 0.05 (\*), p < 0.01(\*\*), p < 0.001(\*\*\*). 526

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535

## 536 Author contributions

- 537 DS, DB, MD, DG, performed experiments. JV, JNA contributed to biochemical and
- immunohistochemistry assays respectively. LL supervised animal experiments in containment

level 3 facilities. AS supervised all the construction and the production of viral vectors. TB,

- 540 DB designed experiments and supervised the study. DS, TB, DB, AS wrote the paper. All
- authors read and approved the final manuscript.
- 542

## 543 **Conflicts of interest**

- 544 The authors declare that they have no competing interests.
- 545

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## 662 LEGENDS

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## 664 Figure 1. Impact of the intracerebroventricular inoculation of AAV on the accelerated

disease of M83 mice. (A) M83 mice were injected at birth (Week 0) with AAV $\beta$ -syn or

- 666 AAVGFP vectors per lateral ventricle and challenged two months later (Week 8) by the
- 667 injection of M83/M83 (B-D) or MSA/M83 (E-G) inoculum in the striatum to accelerate the
- disease. After the appearance of the first specific symptoms of M83 disease (from 3 months to
- 869 8 months after challenge), mice were sacrificed and dissected in order to perform biochemical

analysis. (B) M83 disease-associated survival after the inoculation of the M83/M83 brain 670 extract is represented (significant difference according to log rank test, p<0.05). (C, D) 671 672 Quantification of total  $\beta$ -syn (mouse  $\beta$ -syn and human  $\beta$ -syn produced by the vector) (C) or of pathological Ser129-phosphorylated form of  $\alpha$ -syn ( $\alpha$ -syn<sup>P</sup>) (D) by ELISA in CNS regions of 673 674 the same sick M83 mice groups (n=6 for the treated and the control group). (E) M83 disease-675 associated survival after the inoculation of the MSA/M83 brain extract (no significant difference according to log-rank test). (F, G) Quantification of total  $\beta$ -syn (F) or  $\alpha$ -syn<sup>P</sup> (G) by 676 677 ELISA in CNS regions of the same sick M83 mice groups (n=6 for the treated group and n=5 678 for the control group). Hi: hippocampus, Mes: mesencephalon, BS: brain stem, CSC: cervical 679 spinal cord, TSC: thoracic spinal cord, LSC: lumbar spinal cord. Data are shown as mean  $\pm$ sd. \*p<0,05; \*\*p<0,01; according to Wilcoxon test. 680

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682 Figure 2. Characterization of the AAV vectors expression after their intracerebroventricular inoculation in M83 mice. M83 mice were injected with AAV 683 684 vectors in the ventricles at birth and challenged with MSA/M83 inoculum (same mice than in Figure 1 E-G). (A) Detection of total  $\beta$ -syn synthesis by ELISA in cerebral regions and spinal 685 686 cord of sick M83 mice 5 to 7 months after ICV injection of AAV. (B) Detection of total  $\beta$ -syn or GFP protein in the hippocampus of the same M83 mice by Western blot. Recombinant  $\beta$ -687 syn was loaded as a positive control. Numbers refer to each mouse (n=6 in the treated group 688 689 and 5 in the control group). Full blots are shown in Supplementary figure 10. (C) 690 Quantification of total  $\beta$ -syn levels detected by WB. OB: olfactory bulbs, Cx: cerebral cortex, 691 Str: striatum, Hi: hippocampus, Mes: mesencephalon, BS: brain stem, CSC: cervical spinal 692 cord, TSC: thoracic spinal cord, LSC: lumbar spinal cord. Data are shown as means  $\pm$  sd. 693 \*p<0,05; \*\*p<0,01 according to Wilcoxon test.

Figure 3. Impact of the intracerebroventricular inoculation of AAVβ-syn or AAVGFP 695 696 on the spontaneous M83 disease. (A) M83 mice were injected at birth (Week 0) with 697 AAV $\beta$ -syn or AAVGFP vectors per lateral ventricle. After the appearance of the first specific symptoms of M83 disease (from 11 months to 20 months of age), mice were sacrificed and 698 dissected in order to perform biochemical analysis. (B) M83 disease-associated survival after 699 700 the intracerebroventricular (ICV) inoculation of AAV vectors at birth (no significant difference according to log-rank test). (C, D) Quantification of total  $\beta$ -syn (B) or  $\alpha$ -syn<sup>P</sup> (C) 701 702 by ELISA in CNS regions of the same sick M83 mice. No statistical analysis was done for 703 ELISA results because the number of mice analyzed was too small (2 mice for the treated 704 group and 3 mice for the control group). Hi: hippocampus, Mes: mesencephalon, BS: brain stem, CSC: cervical spinal cord, TSC: thoracic spinal cord, LSC: lumbar spinal cord. Data are 705 706 shown as means  $\pm$  sd (n=2 and 3).

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Figure 4. Impact of the inoculation of AAV in the ventral tegmental area on M83 708 disease. (A) Two months old M83 mice (Week 8) were injected with AAVβ-syn or AAVGFP 709 710 vectors in the ventral tegmental area (VTA) and challenged one month later (Week 12) by the 711 injection of M83/M83 (B-D) or MSA/M83 (E-G) inoculum in the striatum to accelerate the disease. As before, after the appearance of the first specific symptoms of M83 disease (from 3 712 months to 8 months after challenge), mice were sacrificed and the CNS was dissected in order 713 714 to realize biochemical analysis and immunohistochemistry /immunofluorescence studies 715 (Figure 4H, Supplementary figure 2, 3, 4). (B) M83 disease-associated survival after the 716 inoculation of the brain extract (no significant difference according to log-rank test). (C, D) Quantification of total β-syn (C) or pathological Ser129-phosphorylated form of α-syn (α-717 718 syn<sup>P</sup>) (D) by ELISA in CNS regions of the same sick M83 mice groups (n=5 for the treated group, n=5 for the control group). (E) The M83 disease-associated survival after the 719

inoculation of the MSA/M83 inoculum (no significant difference according to log-rank test). 720 (F, G) Quantification of total  $\beta$ -syn (F) or  $\alpha$ -syn<sup>P</sup> (G) by ELISA in CNS regions of the same 721 mice groups (n=5 for the treated group, n=5 for the control group). (H) 722 723 Immunohistochemistry pictures showing total  $\beta$ -syn staining (mouse  $\beta$ -syn and human  $\beta$ -syn 724 produced by the vector) in the mesencephalon of 7 months old sick M83 mice inoculated with 725 AAV  $\beta$ -syn or AAV GFP and challenged with MSA/M83 inoculum. Mes: mesencephalon, BS: brain stem, CSC: cervical spinal cord, TSC: thoracic spinal cord, LSC: lumbar spinal 726 727 cord. Data are shown as means  $\pm$  sd. \*p<0.05; \*\*p<0.01 according to Wilcoxon test. Scale bar 728 100µm.

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730 Figure 5. Characterization and impact of inoculation of AAV in the ventral tegmental 731 area of M83 mice. (A-B) Two months old M83 mice were injected with AAV $\beta$ -syn or 732 AAVGFP vectors in the VTA and challenged one month later by the injection of M83/M83 inoculum in the striatum to accelerate the disease. In this experiment, all mice were 733 734 euthanized 3 months after the challenge for biochemical analysis. (A) Detection of the total  $\beta$ syn by ELISA in the brain and the spinal cord of M83 mice after inoculation of AAVβ-syn or 735 736 AAVGFP in the VTA (n=4 and 6, respectively). (B) Detection of  $\beta$ -syn and GFP proteins by Western blot in the mesencephalon of the same sick M83 mice. Recombinant  $\beta$ -syn was 737 loaded as a positive control. Numbers refer to mice. Full blots are shown in Supplementary 738 739 figure 11. (C) Total  $\beta$ -syn protein quantification by ELISA test using 0,2 µg (instead of 2 µg) of mesencephalon homogenates extracted from sick M83 mice inoculated with 1,5\*10<sup>9</sup> vg 740 (high dose, 4-times more than the low dose) or  $3.75*10^8$  vg (low dose) of AAV $\beta$ -syn or 741 742 AAVGFP. These results were obtained with the same samples used in Figure 4C and 5D, but 743 10 times diluted. (D-F) Two months old M83 mice (Week 8) were injected with high dose of AAV vectors (4-times higher than in Figure 4 for each vector) in the VTA and challenged one 744

month later (Week 12) by injecting M83/M83 inoculum in the striatum. (D, F) Quantification of total  $\beta$ -syn (D) or  $\alpha$ -syn<sup>P</sup> (F) by ELISA in CNS regions of the same sick M83 mice groups (n=3 and 7 for the treated and control group). (E) M83 disease-associated survival after the inoculation of the brain extract (significant difference according to log-rank test, p<0,001). Mes: mesencephalon, BS: brain stem, CSC: cervical spinal cord, TSC: thoracic spinal cord, LSC: lumbar spinal cord. Data are shown as means  $\pm$  sd. \*p<0,05, \*\*p<0,01, according to Wilcoxon test. Scale bar 100µm.

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753 Figure 6. Proteinase K (PK)-resistant  $\beta$ -syn staining in sick M83 mice inoculated with 754 **AAV**  $\beta$ -syn. (A-D) Immunoreactivity to total  $\beta$ -syn antibody in mesencephalon sections of two sick M83 mice inoculated with low dose of AAV $\beta$ -syn or AAVGFP in the VTA and 755 challenged by MSA/M83 inoculum (mice from the study Figure 4E-G) is shown without PK 756 757 digestion (A, B) or after PK digestion (C, D). After PK digestion, these  $\beta$ -syn immunoreactive dots were detected in all mice analyzed by immunohistochemistry inoculated with the AAVβ-758 syn in the VTA (7/7 mice, comprising 2 mice challenged with M83/M83 inoculum, 3 mice 759 760 challenged with MSA/M83 inoculum, and also in 2 mice inoculated with high dose of AAV and challenged with M83/M83 inoculum), but not in sick M83 mice inoculated with 761 AAVGFP (3/3, comprising 2 mice challenged with MSA/M83 inoculum and 1 mouse 762 challenged with M83/M83 inoculum). Scale bars 100µm (low magnification) and 25µm (high 763 764 magnification).











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AAVGFP





