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Neuroprotective effect of maternal resveratrol supplementation in a rat model of neonatal hypoxia-ischemia

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Conflict of interest statement

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest

Author contribution statement

UD has acquired and analyzed data, and has contributed to the final drafting of the article. SS has produced the HI neonate model. CR has participated to Western-Blot and RTqPCR experiments. MCB and JFC have contributed to the final drafting of the article. LP have contributed to the design of the experiments and wrote the article. AKBS and HR have conceived, designed, acquired and analyzed data, and wrote the article.

Keywords

polyphenol, resveratrol, Neonatal hypoxia-ischemia, brain metabolism, MRI

Abstract

Word count: 341

Neonatal hypoxia-ischemia (HI) is a major cause of death or subsequent disabilities in infants. HI causes brain lesions, which are induced by a strong reduction in oxygen and nutrient supply. Hypothermia is the only validated beneficial intervention, but not all newborns respond to it and today no pharmacological treatment exists. Among possible therapeutic agents to test, transresveratrol (RSV) is an interesting candidate as it has been reported to exhibit neuroprotective effects in some neurodegenerative diseases. This experimental study aimed to investigate a possible neuroprotection of RSV in rat neonatal HI, when administered to the pregnant rat female, at a nutritional dose. Several groups of pregnant female rats were studied in which RSV was added to drinking water either during the last week of pregnancy, the first week of lactation, or both. Then, 7-day old pups underwent an HI event. Pups were followed longitudinally, using both MRI and behavioral testing. Finally, a last group was studied in which breast-feeding females were supplemented one week with RSV just after the HI event of the pups (to test the curative rather than the preventive effect). To decipher the molecular mechanism of this neuroprotection, RT-qPCR and western blots were also performed on pup brain samples. Data clearly indicated that when dams were supplemented with RSV, HI pup brain lesions were significantly reduced. Moreover, inside the lesion, the severity of edema was considerably improved by RSV in the striatum and the hippocampus. Maternal RSV supplementation allowed to reverse HI pup sensorimotor and cognitive deficits caused by the insult. The best recoveries were observed when RSV was administered during both gestation and lactation (2 weeks before the HI event in pups). Furthermore, RSV neuroprotection was also observed in the curative group, but only at the latest stages examined. Our hypothesis is that RSV, in addition to the well-known neuroprotective benefits via the sirtuin's pathway (antioxidant properties, inhibition of apoptosis), has an impact on brain metabolism, and more specifically on the astrocyte-neuron lactate shuttle (ANLS), as suggested by RT-qPCR and western-blot data that contributes to the neuroprotective effects.

Contribution to the field

Dear Editor, Our manuscript entitled: « Neuroprotective effect of maternal resveratrol supplementation in a rat model of neonatal hypoxia-ischemia » by Dumont et al. has been submitted to your journal, Frontiers in Cellular Neuroscience, in the special issue "Polyphenols' Action on the Brain". In this study, we present a new therapeutic approach to counteract neonatal hypoxia-ischemia brain damages. The originality of our work is dual. First, we used Resveratrol, a polyphenol that is thought to be neuroprotective. Second, a transgenerational and nutritional approach was applied. Indeed, in our study, only the pregnant and breastfeeding female was supplemented with Resveratrol, to a much lower dose compared to what can be found in the literature. The impact of this supplementation was followed by MRI and we took advantage of this non-invasive technique to perform a longitudinal study coupled to behavioral tests. Neuroprotection on brain lesions on the pups that underwent hypoxia-ischemia was clearly demonstrated. Moreover, we performed gene and protein expression analysis to decipher the mechanism of this neuroprotection. In addition to the "classical" anti-oxidant and anti-apoptotic pathways, we demonstrated, for the first time, the role of resveratrol on brain metabolism modulation. We think that our results can be further transferred to the clinic. We believe that this study is perfectly within the scope of your journal and this special issue and that it will be of great interest for your readers. In the hope of receiving rapidly a positive answer from your journal, Sincerely yours, Dr Hélène Roumes PS: Please, note that this is my inaugural article, as I've benne recently nominated as an Associate Editor in Frontiers.

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Ethics statements

Studies involving animal subjects

Generated Statement: The animal study was reviewed and approved by Bordeaux ethic committee.

Studies involving human subjects

Generated Statement: No human studies are presented in this manuscript.

Inclusion of identifiable human data

Generated Statement: No potentially identifiable human images or data is presented in this study.

Data availability statement

Generated Statement: The datasets presented in this study can be found in online repositories. The names of the repository/repositories and accession number(s) can be found in the article/supplementary material.



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15 Keywords: Polyphenol, resveratrol, neonatal hypoxia-ischemia, brain metabolism, MRI

16

17 Abstract

18 Neonatal hypoxia-ischemia (HI) is a major cause of death or subsequent disabilities in infants. HI 19 causes brain lesions, which are induced by a strong reduction in oxygen and nutrient supply. 20 Hypothermia is the only validated beneficial intervention, but not all newborns respond to it and today 21 no pharmacological treatment exists. Among possible therapeutic agents to test, trans-resveratrol 22 (RSV) is an interesting candidate as it has been reported to exhibit neuroprotective effects in some 23 neurodegenerative diseases. This experimental study aimed to investigate a possible neuroprotection of RSV in rat neonatal HI, when administered to the pregnant rat female, at a nutritional dose. Several 24 25 groups of pregnant female rats were studied in which RSV was added to drinking water either during 26 the last week of pregnancy, the first week of lactation, or both. Then, 7-day old pups underwent an HI event. Pups were followed longitudinally, using both MRI and behavioral testing. Finally, a last group 27 was studied in which breast-feeding females were supplemented one week with RSV just after the HI 28 29 event of the pups (to test the curative rather than the preventive effect). To decipher the molecular 30 mechanism of this neuroprotection, RT-qPCR and western blots were also performed on pup brain samples. Data clearly indicated that when dams were supplemented with RSV. HI pup brain lesions 31 32 were significantly reduced. Moreover, inside the lesion, the severity of edema was considerably 33 improved by RSV in the striatum and the hippocampus. Maternal RSV supplementation allowed to 34 reverse HI pup sensorimotor and cognitive deficits caused by the insult. The best recoveries were

- 35 observed when RSV was administered during both gestation and lactation (2 weeks before the HI event
- 36 in pups). Furthermore, RSV neuroprotection was also observed in the curative group, but only at the
- 37 latest stages examined. Our hypothesis is that RSV, in addition to the well-known neuroprotective
- 38 benefits via the sirtuin's pathway (antioxidant properties, inhibition of apoptosis), has an impact on
- 39 brain metabolism, and more specifically on the astrocyte-neuron lactate shuttle (ANLS), as suggested
- by RT-qPCR and western-blot data that contributes to the neuroprotective effects. 40
- 41

42 1 Introduction

43 Neonatal hypoxic-ischemic encephalopathy (HIE) is the most common cause of perinatal brain injury,

- which may lead to neonatal death or irreversible damages like permanent physical disabilities, cerebral 44
- 45 palsy and cognitive dysfunctions (Shankaran, 2012). HIE has a high global incidence of 1-8 per 1,000
- 46 live births, and remains a major cause of infantile mortality (Kurinczuk et al., 2010). It is caused by a
- massive reduction in cerebral blood flow and, therefore, oxygen and glucose supply to the brain. Today, 47
- 48 the only applied treatment is moderate hypothermia (Gluckman et al., 2005), which cools down 49
- newborns to 33-34°C and is used in a time-window of 72 h after the hypoxic-ischemic event (Bona et
- 50 al., 1998). However, this treatment is only partly efficient and is unsuccessful for nearly half of the 51 patients (Wu and Gonzalez, 2015). Therefore, there is an urgent need to find a complementary therapy
- 52 to further reduce the rate and severity of neurodevelopmental disabilities resulting from HIE.
- 53 According to the literature, evidence exists about the neuroprotective properties of *trans*-resveratrol
- 54 (RSV) in the context of neonatal HIE (West et al., 2007). RSV (3,5,4'-trihydroxystilbene) is a natural 55
- polyphenol present at relatively high concentrations in peanuts, grape skin and seeds. RSV possess 56 interesting biological properties such as anti-inflammatory (Das and Das, 2007), anti-oxidant (Gao et
- 57 al., 2018) and anti-apoptotic activities (Bian et al., 2017). These activities may have promising potential
- 58 therapeutic applications, as shown in vivo (Baur and Sinclair, 2006). Increasing evidence indicates that
- 59 RSV may also play a role in the prevention of neurodegenerative diseases, such as Alzheimer's disease
- 60 or Parkinson's disease (Sawda et al., 2017). Interestingly, blood-borne RSV can cross the blood-brain
- barrier (BBB) (Baur and Sinclair, 2006). 61
- 62 During the last decade, this polyphenol has shown a neuroprotective effect both as a *pre-* and *post-*
- 63 treatment in the context of neonatal hypoxia-ischemia (HI) (West et al., 2007; Karalis et al., 2011; 64 Arteaga et al., 2015; Pan et al., 2016; Bian et al., 2017; Gao et al., 2018). Indeed, when administered 65
- just after the HI event (intraperitoneal injection (i.p); 90mg/kg), data indicated that RSV is neuroprotective as demonstrated by a strong reduction of the infarct volume and by the recovery of 66
- some behavioral functions (Karalis et al., 2011). This neuroprotection was also observed when RSV 67
- 68 was administered before the HI event (Arteaga et al., 2015). When RSV was injected 10 minutes before 69 the HI event (i.p.; 20 mg/kg; using the classical Rice-Vannucci P7 pup model), a reduction in lesion
- 70 volumes and an improvement of cognitive and motor functions (long-term assessment) were observed
- 71 (Arteaga et al., 2015). The administration of RSV before the HI episode seems even more
- 72 neuroprotective than when administered after.
- 73 Taking into account the fact that (i) maternal supplementation has an impact not only on pregnant
- women but also on the fetus (Nnam, 2015), (ii) RSV has neuroprotective properties and (iii) RSV and 74
- 75 its metabolites can cross the placental and the BBB barriers (Bourgue et al., 2012; Shankaran, 2012), 76 we aimed to evaluate the neuroprotective role of maternal RSV supplementation, at nutritional dose,
- 77 in a context of neonatal HI. The originality of our approach combines (i) a transgenerational and

nutritional approach, (ii) a longitudinal study of brain lesion evolution using non-invasive MRI associated to several behavioral tests, and (iii) a study of some gene and protein expressions in the

80 brain of pups to try to decipher the molecular mechanisms of this neuroprotection. For this purpose, 81 expression of sirtuins (SIRT1), superoxide dismutase (SOD) and antiapoptotic proteins (Bcl2) was

measured in brain samples, as well as of different key partners in brain metabolism. More particularly

83 genes and proteins linked to the astrocyte-neuron lactate shuttle (ANLS; (Pellerin and Magistretti,

- 84 1994) such as astrocytic glutamate transporters (GLT-1 and GLAST), monocarboxylate transporters
- 85 (MCT1 and MCT2), lactate dehydrogenase isoforms (LDHa and LDHb) and the glial Na⁺/K⁺ATPase
- 86 α_2 isoform.
- 87

88 2 Materials and Methods

89 **Drug administration**

All animal procedures were conducted in accordance with the Animal Experimentation Guidelines of the European Communities Council Directive of November 24, 1986 (86/609/EEC). Protocols met the

92 ethical guidelines of the French Ministry of Agriculture and Forests and were approved by the local

ethics committee (9476). RSV was purchased from Sigma (Sigma-Aldrich, France). RSV stock solution was prepared by dissolving 100 mg of RSV in 2 ml of absolute ethanol (Sigma-Aldrich,

solution was prepared by dissolving 100 mg of RSV in 2 ml of absolute ethanol (Sigma-Aldrich,
 France). A pregnant Wistar rat female drinks on average 50 ml water/day. For RSV supplementation,

 $4 \,\mu$ l of the RSV stock solution were added in 200 ml of drinking water, which results in a nutritional

97 maternal consumption of 0.15 mg/kg/day. RSV solutions in drinking bottles were prepared and

98 changed every day. Because of RSV photosensitivity, drinking bottles were enwrapped in aluminum

99 foil to avoid oxidation. Four μ l of absolute ethanol were added in drinking water (200 ml) for all sham

100 groups during two weeks (last week of gestation + first week of breastfeeding).

101

102 **Experimental groups**

103 Pregnant Wistar female rats (Janvier Laboratories, France) were obtained at day 15 of gestation and

104 kept on a 12h/12h light/dark cycle with A03 food (SAFE, Augy, France) and water *ad libitum*. Seven

105 experimental groups were established according to the maternal supplementation plan (Figure 1).

106 Three control groups were first considered. The **sham** group for which there was no maternal RSV 107 supplementation and in which pups did not undergo a HI episode but only carotid exposition (n=18).

108 The **shamrsy group**, for which RSV was added to the dam's drinking water during the last week of

109 gestation and the first week of lactation and in which pups did not undergo a HI episode (only carotid

exposition). This control group was performed to ensure that RSV had no effect on healthy pups (see

supplementary Figure 1, n=6). Finally, the **HIC** group, without maternal RSV supplementation and in

112 which pups underwent an HI event at P7 (n=31). One preliminary study was performed on this **HIC**

group to ensure the reproducibility of the model (n=11).

114 In a second step, four supplementation groups in which pups underwent an HI event at postnatal day 7

(P7) were considered: pups from a pregnant female that received RSV supplementation in drinking

116 water (i) both during the first week of lactation and the last week of gestation (gestation + lactation $\frac{117}{100}$ around $\frac{117}{100}$ and $\frac{117}{$

- 118 (iii) only the first week of lactation (lactation group; rsvL; n=15), or (iv) only the second week of
- 119 lactation (one week after the HI event; curative group; rsvC group; n=15).
- 120

121 Model of neonatal hypoxic-ischemic brain injury

122 Cerebral HI was performed using the Rice and Vannucci model (Rice et al., 1981) as described 123 previously (Dumont et al., 2019). Briefly, postnatal day 7 (P7) rat pups of both genders were used in 124 the experiment (due to no statistical difference between males and females in our study, data from both 125 genders were pooled). Pups weighing 15-19 g were anesthetized using isoflurane (4 % for induction and 1.5 % for maintenance). For ischemia, neck skin and muscles along an anterior midline were 126 incised and the left common carotid artery was permanently ligated (surgery duration never exceeded 127 128 10 min per pup). After surgery, pups were placed in a heated atmosphere $(33 \pm 1^{\circ}C)$ during 30 min in 129 order to recover. Hypoxia was induced by placing animals during 2 h in a hypoxic chamber (Intensive 130 Care Unit Warmer, Harvard Apparatus, Les Ulis, France, 8 % O₂, 92 % N₂). The hypoxic chamber temperature was maintained at $33 \pm 1^{\circ}$ C to ensure a pup rectal temperature of $35.5 \pm 0.5^{\circ}$ C 131 132 (normothermia) and 80% humidity. For sham pups (sham and shamrsv groups), the left common 133 carotid artery was just exposed (under the same anesthetic procedure as described above) and after 30

- 134 min of recovery, pups were kept separated from the dam in a heated atmosphere $(33 \pm 1^{\circ}C, 2 h)$.
- 135

136 Longitudinal frame acquisition of in vivo MRI

137 MRI acquisitions were performed 2 h ¹/₂ after the carotid artery ligation (P7), then after 48 h (P9) and 23 days later (P30), on a horizontal 4.7T Biospec 47/50 system (Bruker, Ettlingen, Germany) equipped 138 139 with a 6 cm BG6 gradient system (1000 mT/m, $\Delta = 20$ ms, $\delta = 4$ ms). Pups were anesthetized with 140 isoflurane (4% for induction and 1.5 % for maintenance). Breathing was monitored by a ventral 141 pressure sensor and body temperature was maintained at 35.5 ± 0.5 °C during acquisition with a water-142 heated MRI bed. Anatomical T2-weighted images of the brain were obtained using a Rapid Acquisition 143 with Relaxation Enhancement (RARE) sequence with 20 axial slices 0.7 mm thick, echo time (TE) = 144 50 ms, repetition time (TR) = 3000 ms and a total duration of 4 min 48 s. Brain lesion volumes were 145 assessed by Diffusion Weighted Imaging (DWI: 20 axial slices of 7 mm, 30 directions, b-value 1000 s/mm2. TE = 24 ms, TR = 2 s, Δ = 8.11 ms, δ = 2.5 ms, total duration = 17 min 04 s). At P7, DWI was 146 147 systematically performed 3 h after carotid ligation. MR-angiography was performed to image the cerebral arterial blood flow using a Time-of-Flight (TOF)-3D-Fast low angle shot (FLASH) sequence 148 (axial slice, 20 mm thick, TE 2.2 ms, TR 13 ms, flip angle 15°, total duration = 10 min 59 s). 149 Angiography was used to validate the common carotid artery ligation and the reproducibility of our 150 151 neonatal HI model. Moreover, during the study, angiography was systematically performed for pups 152 presenting no lesion at P7 to ensure that the ligation was present (see supplementary Figure 2). In two 153 cases, pups presented no ligation and were excluded from the study.

154

155 MRI analysis

Measurements were performed with Paravision 6.0.1 (Bruker BioSpin, Karlsruhe, Germany). Lesion volumes were measured at P7, P9 and P30, on the diffusion-weighted images. For each rat, for each slice and on the 20 adjacent slices per rat, two region-of-interests (ROI) were manually delineated to

- 159 encompass the global brain area and injured area, respectively. Volume was obtained considering the
- 160 slice thickness (0.7 mm). Lesion volumes were expressed in percentage of the total brain volume.
- 161 Cytotoxic edema severity was evaluated by apparent diffusion coefficient (ADC, mm²/s) values at P7
- 162 calculated from the DWI sequences. ROIs were manually drawn such as delineating the brain lesion
- 163 inside the cortex and hippocampus in the same slice, and the striatum in another appropriate slice.
- 164

165 Behavioral tests

166 Behavioral tests were performed on pups from P8 to P45 (Figure 2).

167 Righting reflex (P8, P10 and P12)

168 Righting reflex was conducted on animals from HIC, rsvGL, rsvG and rsvL groups (only groups that

169 had completed their supplementation window: rsvGL, rsvG and rsvL). Pups were turned on their back.

- 170 The time required to turn over on all four paws was measured. Each pup was given three attempts and
- 171 the meantime of the 3 trials was calculated.

172 Modified neurological severity score (mNSS) (P24)

173 The mNSS test is a neurological scale widely used in the study of stroke in various models (Morris et 174 al., 2010). The assessment of neurological disorders is based on a scale ranging from 0 to 18. This

175 exam is composed of a series of motor (muscle condition, abnormal movement), sensory (visual, tactile

176 or proprioceptive), reflex and balance tests (18 tests). One point is awarded if the animal fails to

177 perform the task while no point is given if successful. Each rat was graded on the mNSS scale: the

178 higher the score, the more impaired the sensorimotor functions (0-1: no impairment; 2-6: moderate

179 impairments; 7-12: impairments; 13-18: severe impairments).

180 Novel object recognition test (P42, P43, P44 and P45)

The novel object recognition test is based on the natural tendency of rodents to explore novelty (Ennaceur and Delacour, 1988). Long-term memory was assessed in our task (Roumes et al., 2020). After a 10-min habituation period in the open field on day 1 (P42), pups were further allowed to freely explore two identical objects placed in opposite corners of the arena for 10 min on the next two days. On the last day (P45), one of the old objects was replaced by a new and different one, then pups were allowed to freely explore objects for 10 min. Durations of each object exploration were measured. The discrimination index (score between -1 and +1) was defined as the parameter for long-term memory

188 evaluation:

189 $I = \left(\frac{\text{time spent on new object} - \text{time spent on familiar object}}{\text{time spent on new object} + \text{time spent on familiar object}}\right)$

A positive score indicates more time spent with the new object. Closer to +1 the score is, lesser ismemory alteration.

- 192
- 193 Brain sample processing

Brains were collected at P9 from some pups in the supplementation group with the strongest neuroprotective effects (rsvGL group), as well as from some pups in the control and sham groups for

196 further RT-qPCR, western blots and histology.

197 RNA and protein extractions

198 P9 pups were lethally anesthetized with an intraperitoneal injection of Ketamine (100 mg/kg of 199 Imalgene, Merial Boehring, Centravet Lapalisse) and Xylazine (20 mg/kg of Paxman, Virbac France, 200 Centravet Lapalisse) then quickly decapitated. Brains were rapidly removed and placed on ice under 201 RNAse free conditions. Each structure (cortex, hippocampus and striatum) of both damaged (when 202 possible) and undamaged sides was quickly dissected. For RT-qPCR, each brain structure sample was stored in RNAlater and for western blots it was stored in RIPA solution (Tampon PierceTM RIPA lysis 203 204 buffer 1X + inhibitor proteases cocktail 10X, Thermofisher). Then, all samples were stored at -80°C. 205 For the most injured brains (mainly in the HIC group), the tissue loss caused by HI did not allow to 206 collect all structures from the injured side especially the hippocampus; data for hippocampus and 207 striatum in supplementary Figures 3 and 4).

208 Brain removal for Nissl staining

P9 pups were deeply anesthetized with isoflurane. Intra-cardiac perfusion with PBS 1X was performed
during 10 min (18 ml/min), followed by perfusion of a paraformaldehyde solution (PFA 4 %, in PBS
1X) during 10 min (18 ml/min). Then, brains were quickly sampled and post-fixed in PFA 4 %
overnight (4 °C), followed by cryoprotection in PBS 1X – Sucrose 20 % (24 hours, 4 °C) and PBS 1XSucrose 30% (24 hours, 4 °C). Brains were frozen with nitrogen vapor and kept at -80 °C until they
were cut into 16-µm sections with a cryostat.

215

216 Real-time quantitative polymerase chain reaction analysis (RT-qPCR)

217 Total RNA was extracted and purified from each brain structure using RNeasy Protect Mini Kit 218 (#74106, Qiagen, Hombrechtikon, Switzerland). For cDNA synthesis, 200 ng of total RNA were 219 reverse transcribed using the Multiscribe Reverse protocol: 50 µM Random Hexamers and RT Buffer 220 10X were added to 200 ng of samples. Samples were incubated in a thermocycler (Biometra ®, 221 Thermocycler) 10 min at 65°C. Then, 10 mM of dNTP, MgCl₂, RNase inhibitor and Multiscribe 222 Reverse were added to the mix reaction and incubated in a thermocycler 10 min at 25°C, 45 min at 223 48°C and 5 min at 95°C. Then, 1 µl of synthesized cDNA was subjected to RT-qPCR using the suitable 224 primers (reverse and forward: 0.3 µM; Table 1) and SYBR Green PCR Master Mix (Applied Biosystems, Luzern, Switzerland) to perform the PCR reaction in a total reaction volume of 10 µl. Each 225 226 sample was tested in triplicates. The RT-qPCR protocol was as follows: 2 ng of cDNA samples were 227 incubated at 95°C for 3 min then 40 cycles of 3 s at 95°C and 20 s at 60°C. mRNA expression levels were determined with the StepOnePlusTM Real-Time PCR System (Applied Biosystems, Luzern, 228 229 Switzerland) with RPS29 (Ribosomal Protein S29, Microsynth, Balgach, Switzerland) mRNA used as 230 endogenous control. For data analysis, differences were calculated using the $\Delta\Delta$ Ct method using the 231 RPS29 gene as housekeeping gene.

232

233 Western Blotting

234 After ending experiments, brain tissues and cell lysates were prepared and protein concentrations 235 determined with a Micro BCA Protein Assay Kit (ThermoScientific Pierce BCA Protein Assay), according to the manufacturer's recommendations. Protein concentration was adjusted in order to 236 237 obtain the same concentration for each sample, and they were mixed with Laemmli Buffer 4X. Samples and molecular standards (PageRuler Prestained Protein Ladder, ThermoFisher) were loaded on a SDS-238 239 PAGE 10% polyacrylamide gel electrophoresis (PAGE), and then proteins were transferred onto a 240 nitrocellulose membrane. Transfer (gel to membrane) was performed by semi-dry transfer (Trans Blot 241 Turbo transfer System Bio Rad). At the end of the transfer, membranes were blocked for 1h, under 242 agitation, at RT with TBS-T 1X (TBT-0,1% Triton x-100), 10% Milk and 1% BSA. Then, membranes 243 were incubated for 12h at 4°C under agitation with the appropriate primary antibody described in Table 244 2 (MCT1 MCT2, LDHa and LDHb, 1:1000 and GLAST, 1:500). Memcode Reversible Protein Stain (Pierce) served as loading control. Blots were revealed by chemiluminescence (WesternBright ECL; 245 246 Witec ag, Luzern, Switzerland) and imaged with a detection system (Chemidoc XRS+, Biorad, Switzerland). Densitometric analysis of chemiluminescent signals was performed using Image lab 247 248 software.

249

250 Nissl staining

The 16-µm thick brain sections were stained with cresyl violet (0.5%, Sigma-Aldrich, France) for 10 min and washed in distilled water for 10 s. Sections were dehydrated in 95 and 100% ethanol (2 min each), defatted in xylene and mounted on coverslips in Depex mounting solution (Sigma Aldrich, Germany). Brain sections were observed using an optical microscope (Leica STP6000). Image J software (National institutes of Health, Bethesda, USA, <u>http://www.https://imagej.nih.gov/ij</u> v1.44 p) was used to count nuclei.

257

258 Statistical analysis

MRI quantifications were blindly performed by two separate experimenters (intra-experimenter variability < 1%; inter-experimenter variability < 5%). Statistical analysis and graphs were performed using GraphPad Prism 7.00 software. All data were expressed as mean \pm standard error of the mean (s.e.m). Number of pups is stated for each experiment within figure legends. Statistical significance of the differences between multiple groups was determined using One-Way ANOVA and Fischer's LSD post-hoc test. Statistical significance was defined as p < 0.05 (*p<0,05, **p<0,01, ***p<0,001 and ****p<0,0001).

266

267 3 Results

268 Brain damages in the neonatal HI model

All P7 pups which underwent an HI event without treatment (Rice-Vannucci model; HIC group) had a brain lesion (Figure 3A, first pie chart). Lesion volume (see typical DW image in Figure 3B, top left) represented 42 ± 2 % of the total brain volume (Figure 3 C), which reflects typical lesion size after an acute HI event in this model (Ashwal et al., 2007). Forty-eight hours after HI, a 50% decrease in brain lesion volume was observed (lesion volume decreases from 42 ± 2 % to 20 ± 2 %, for pups in the HIC group; Figure 3C). The stage reached at P9 seems to predict the final lesion size since no further evolution was measured at P30 (no statistical difference between P9 and P30) (Figure 3C and D). In addition, HI induced a drop in apparent diffusion coefficient (ADC) values in each structure (- 40%) (Figure 3E). Such a drop reflects water diffusion restriction due to cell swelling, a phenomenon typical

278 of this time window (latent period).

279 Maternal RSV supplementation improved HI-induced brain damages

Common carotid artery ligation was confirmed by angiography in all cases. Like in the control group (HIC), all pups from the gestation (rsvG) and curative (rsvC) groups exhibited brain lesions 3 h after common carotid artery ligation (P7) (Figure 3A; 3rd and 5th pie charts). When RSV was administered to the mother either during the gestation (last wk) + lactation period (1st week) (rsvGL) or during the 1st week of lactation (rsvL), 20% and 13% of the pups had no brain lesion, respectively (Figure 3A; 2nd and 4th pie charts). Only MRI data from P7 pups <u>with brain damages</u> are therefore presented for all groups.

287 Representative DW images of P7 and P30 pup brains from all groups are presented in Figure 3B. Brain 288 lesions appear as a hyposignal at P7 (edema) whereas they appear as a hypersignal at P30 (necrotic 289 zone). Brain lesion volumes (expressed as %, normalized to total brain volume) were calculated for 290 different time points and values are presented in Figure 3C. At P7, no significant difference was found 291 between pups from the HIC, rsvG and rsvC groups $(42 \pm 2\%, 42 \pm 1\% \text{ and } 41 \pm 3\%, \text{ respectively})$. 292 Pups from the rsvGL and rsvL groups had significantly smaller lesions compared to those in the other 293 HI groups $(33 \pm 2\%)$ and $31 \pm 3\%$, respectively). At P9, pups from the rsvGL group showed the smallest 294 brain lesion volume compared to the other HI groups $(9 \pm 2\% vs. 21 \pm 2\%, 22 \pm 3\%, 19 \pm 3\%$ and 16 295 ± 3% for HIC, rsvG, rsvL and rsvC groups, respectively). At P30, no significant difference was detected 296 for brain lesion volumes in pups from the HIC, rsvG and rsvL groups $(25 \pm 4\%, 17 \pm 4\%)$ and $25 \pm 5\%$, 297 respectively). The smallest brain lesion volumes at P30 were measured in pups whose mother had RSV 298 supplementation during the last week of gestation + the 1st week of lactation (rsvGL group) or during 299 the lactation period after the HI event (rsvC group) $(9 \pm 3\%)$ and $9 \pm 3\%$, respectively).

A temporal profile of brain lesion evolution was established (Figure 3D) for each group from P7 to P30. A decrease in brain lesion volume was detected in all groups within the first 48 hours post-HI due to the spontaneous recovery of part of the damaged tissue (penumbra without necrosis). The most extensive recovery was observed for pups in the rsvGL group (mother with the longest RSV supplementation, before the HI event). No statistical difference was found between P9 and P30, for all groups.

ADC values were measured in the cortex, hippocampus and striatum of all groups (Figure 3E). Independently of the considered structure, a significant drop in ADC values was detected in all HI groups compared to sham groups. There was no significant difference between ADC values measured in HI groups in the cortex, while in the hippocampus, pups from the rsvL group presented slightly but significantly higher ADC values compared to other HI groups, reflecting a less severe cytotoxic edema. The same increase in ADC values can be observed in the striatum in pups from rsvGL and rsvL groups compared to HIC.

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314 Maternal RSV supplementation preserves cognitive and sensorimotor functions of pups

- 315 Behavioral evaluations of each group are shown in Figure 4. Righting reflex was performed from P8
- to P12 (Figure 4A) for pups from sham, HIC, rsvGL, rsvG and rsvL groups. At P8 and P12, pups from
- 317 the HIC group took a significantly longer time to turn back on their four paws compared to pups from
- 318 the other groups. At P10, pups from all groups (RSV supplemented and sham) except from the rsvG
- 319 group performed significantly better than pups from the HIC group. Moreover, there was a statistical
- difference between sham pups and pups from the rsvG and rsvL groups, which took a longer time to
- turn back on their paws. In addition, at P12, sham pups were significantly better than pups from any of
- the RSV groups.
- Sensorimotor deficits were also assessed using the mNSS test (Figure 4B). While pups in the sham group showed no impairment (score < 1; 0.6 ± 0.2), pups in the HIC group had the highest neurological deficits (3.8 ± 0.4). Concerning pups whose mother received RSV supplementation, their mNSS scores were better (lower) than pups in the HIC group (1.6 ± 0.1 , 2.7 ± 0.3 , 1.7 ± 0.3 and 2.5 ± 0.3 for pups from the rsvGL, rsvG, rsvL and rsvC groups, respectively). Among the groups whose mothers were supplemented with RSV, pups from the rsvGL and rsvL groups presented the best (lowest) scores.
- 329 Long-term memory was evaluated with the novel object recognition test at P45 (Figure 4C). Pups from
- 330 HIC and rsvG groups showed a significantly lower discrimination index than sham pups

331 (discrimination index: 0.47 ± 0.06 and 0.48 ± 0.04 for HIC and rsvG groups, respectively vs. $0.76 \pm$

- 332 0.02 for sham group). No significant difference was detected between sham, rsvGL, and rsvL groups.
- Pups from the RsvC group exhibited heterogenous results but a tendency to be like those of the sham,
- 334 rsvGL and rsvL groups.
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336 Maternal RSV supplementation induces changes in the expression pattern of cortical genes involved 337 in sirtuin signaling and intercellular metabolic interactions

338 Mechanisms involved in short-term cortical neuroprotection by RSV were further evaluated using RT-339 qPCR on P9 cortical samples of pups from the rsvGL group (Figure 5; for hippocampus and striatum 340 data, see supplementary Figure 3 and 4). Putative anti-apoptotic and anti-oxidant effects of RSV 341 supplementation were assessed by quantification of SIRT1, Bcl2 and SOD2 mRNA expression in both 342 undamaged and damaged cortical hemispheres (Figure 5A). Possible impact of maternal 343 supplementation on glutamate uptake and astrocyte-neuron lactate shuttling was explored by 344 quantification of MCT1, MCT2, LDHa, LDHb, GLAST, GLT1 and Na⁺/K⁺ATPase α₂ subunit mRNA 345 expression in both undamaged and damaged cortical hemispheres (Figure 5B). Independently of the 346 considered structure, maternal RSV supplementation significantly enhanced SIRT1 mRNA expression 347 in both hemispheres (undamaged and damaged hemispheres) compared to sham and HIC groups. In 348 the cortex, a relative 50% increase in SIRT1 mRNA expression was thus measured in the undamaged 349 hemisphere compared to the sham group, while a 30% increase was observed in the damaged side. In 350 contrast, no significant difference for SIRT1 mRNA expression was measured between sham and HIC 351 groups, neither in the damaged nor in the undamaged hemisphere. Bcl2 mRNA expression also 352 increased with maternal RSV supplementation in both hemispheres (a relative 62% and 33% increase was measured compared to sham, in the undamaged and damaged cortex, respectively). The HI event 353 354 per se did not modulate Bcl2 mRNA expression. In addition, SOD2 mRNA content was higher in the 355 rsvGL group ($+31 \pm 6\%$ in the undamaged cortex compared to sham). In the damaged hemisphere, HI 356 induced a decrease of SOD2 mRNA expression, which was reversed by maternal RSV 357 supplementation.

358 Concerning genes linked to glutamate transport and lactate shuttling, all (MCT1, MCT2, LDHa, LDHb, GLT1, GLAST and the Na⁺/K⁺ ATPase α_2 subunit) had at least a tendency to increase with the RSV 359 treatment. In the undamaged hemisphere, increases in mRNA expression were statistically significant 360 for MCT1 (+31 ± 11%), LDHa (+40 ± 5%), GLAST (+27 ± 8%), GLT1 (+30 ± 6%) and the 361 362 Na⁺/K⁺ATPase α_2 subunit (+28 ± 2%) compared to the sham group. In the damaged hemisphere, a strong decrease in MCT2 mRNA levels was measured in the HIC group vs. the sham group ($-80 \pm 5\%$). 363 364 This level was partially restored with maternal RSV supplementation. The HI event also reduced the 365 relative mRNA expression of LDHa and LDHb in the damaged cortex (-41 \pm 5% and -39 \pm 6%, 366 respectively, compared to sham group). Once again, RSV counteracted these reductions since no 367 significant difference was observed in LDHa and LDHb mRNA levels between the rsvGL and sham 368 groups. When looking at the astrocytic glutamate transporters, RSV increased the relative cortical GLAST mRNA expression in both hemispheres (relative GLAST expression compared to the sham 369 370 group: $+27 \pm 8\%$ and $+66 \pm 20\%$ in the undamaged and damaged cortex, respectively). In the 371 undamaged hemisphere, RSV led to an increase in GLT1 mRNA expression ($+30 \pm 6\%$, compared to 372 sham). While the HI event did not affect GLT1 mRNA levels in the undamaged hemisphere, its 373 expression was downregulated in the damaged cortex (-70 \pm 2%, compared to sham). Maternal RSV 374 supplementation allowed to restore GLT1 mRNA expression in the damaged cortex. Finally, the Na⁺/K⁺ATPase α_2 subunit mRNA content was modulated by maternal RSV supplementation in the 375 376 undamaged cortex only since its expression was increased ($+28 \pm 2\%$, compared to sham group). No statistical difference was observed between sham and HIC groups concerning the Na⁺/K⁺ATPase α_2 377 378 subunit mRNA levels.

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Maternal RSV supplementation increases cortical expression of key proteins linked to astrocyte-380 neuron lactate shuttle (ANLS). 381

382 Results at the mRNA level prompted us to further investigate if the protein expression of key elements 383 of the ANLS was modified. MCT1 protein expression showed no statistically significant change in 384 both cortices independently of the condition whereas maternal RSV supplementation partially restored 385 MCT2 protein expression altered by the HI event only in the damaged hemisphere (Figure 6). This was 386 not the case for LDHa, which exhibited a drop in protein expression for both damaged and undamaged 387 cortices that was unaffected by the RSV treatment. However, maternal RSV supplementation increased 388 LDHb protein levels in both cortices $(+99 \pm 30\% \text{ and } +146 \pm 53\% \text{ for undamaged and damaged cortex})$ 389 compared to sham, respectively) although the HI event had no effect per se. Finally, for the astrocytic 390 glutamate transporter GLAST, HI induced an up-regulation in the undamaged cortex (+96 \pm 38%, 391 compared to sham), which was unaffected by RSV supplementation. In the damaged cortex, only a 392 non-significant reduction in GLAST protein expression was observed with a tendency to prevent it by 393 the RSV treatment.

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395 Maternal RSV supplementation reduces neuronal cell death

396 Typical Nissl staining of cortical brain sections from one representative pup of the sham, HIC and 397 rsvGL groups are shown Figure 7A (striatum shown in supplementary Figure 5). The presence of Nissl bodies is widely employed to detect viable neurons. Staining indicated that neurons in the sham group 398 399 displayed typical and homogenous morphologies. In the undamaged cortex, HI did not lead to 400 significant neuronal cell death (Figure 7A and B). On the contrary, in the damaged hemisphere, several 401 neuro-morphological changes were observed after the HI event in pups from the HIC group, with an 402 increased number of pyknotic neurons and a strong decrease in Nissl body content. The HI event 403 induced neuronal necrosis and apoptosis, leading to neuronal loss in the cortex of the damaged 404 hemisphere in pups from the HIC group (-81 \pm 4%, in the damaged cortex, Figure 7A and B). In the 405 brain of pups whose mother received RSV supplementation during the last week of gestation and the 406 1st week of lactation, such a neuronal loss was not observed, even if they underwent the same HI event 407 compared to pups in the HIC group. No significant difference was detected in terms of the number of 408 viable neurons between sham and rsvGL groups in the damaged cortex (Figure 7A and B).

409

410 4 Discussion

411 Neonatal cerebral HI is an important cause of neonatal death and brain disorders with lasting 412 deficiencies. Brain HI during the neonatal period leads to well-documented damages of the affected 413 brain regions due to complex biochemical cascades (Kohlhauser et al., 1999). These activated 414 processes lead to excitotoxicity, oxidative stress, deficiency in ATP-dependent pumps and cell death. 415 In this study, we focused on maternal RSV supplementation, using a nutritional dose of RSV (0.15 416 mg/kg/d), which corresponds to the consumption of about 22 g of grapes (about thirty grape berries) 417 per day for a pregnant woman (Dumont et al., 2020) and we followed brain lesions in P7-pups related 418 to a HI event. In the control group (pregnant female without any RSV supplementation), a HI event in 419 pups induced severe HI lesions, since their volume represented around 40% of the total brain, as already 420 characterized in this Rice-Vannucci model (Ashwal et al., 2007). Maternal RSV supplementation was 421 tested during various time-windows (the last week of gestation or/and the first week of lactation 422 (preventive treatment) or the second week of lactation (curative treatment)). Results indicated that the 423 best neuroprotective effect was observed with the longest preventive supplementation period (rsvGL 424 group), as already observed with piceatannol, an analogue of resveratrol (Dumont et al., 2019). Indeed, 425 MRI measurements at P7, 3h post common carotid artery ligation, revealed a 21%-decrease in brain 426 lesion volume for pups from the rsvGL group compared to pups from the HIC group.

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428 Nutritional approach vs. direct treatment

429 Several publications have already reported that a direct pretreatment with RSV prevents neuronal 430 injury. In particular Arteaga and al. injected RSV (20mg/kg ; i.p) in P7-pups just before HI (same 431 Rice and Vannucci model) and they observed a 80% decrease in lesion volume 7 days after the HI 432 insult ($30 \pm 2\%$ for HI group compared to $5 \pm 1\%$ for RSV treated group 7 days after HI) (Arteaga et 433 al., 2015). Moreover, Gao and al. showed that a daily dose of RSV to pups (low dose 20 mg/kg or high 434 dose 40 mg/kg; i.p) for one week before HI could reduce the lesion size and cerebral edema in pups. 435 They observed a reduction of the lesion size around 40% for a low dose of RSV and 50% for a high 436 dose of RSV 3h post HI insult at P14 (Gao et al., 2018). RSV has neuroprotective effect leading to 437 functional benefits since, in addition to reduce the number of pups with lesion and decrease the infarct 438 area, it improves behavioral deficits caused by HI. Indeed, our results showed a better motricity, as 439 well as memory with RSV treatment, similarly to the results reported by Karalis and al. This study 440 showed that direct administration of RSV to pups (90mg/kg; i.p) immediately after P7-HI significantly 441 reduces HI-induced brain injury as well as short- and long-term behavioral impairments (Karalis et al., 442 2011). Strikingly, 24h after the HI insult, RSV-treated pups exhibited better performance in righting 443 reflex just like we observed in our experiments.

444 Our study demonstrates a significant RSV neuroprotection that is comparable to the one reported in 445 the literature in a similar model but by direct treatment of pups. However, our approach is certainly more likely to be acceptable for a transfer to the clinic since the mode of administration of the treatment 446 (in dam's drinking water compared to i.p. injection) is less invasive and the dose (our daily dose of 447 448 0,15mg/kg compared to around 40mg/kg) is within a reasonable nutritional range. An important point 449 raised by the comparison between the literature and our results, is that the best results are observed 450 when RSV is present at the time of the HI event. Indeed, in rsvG (RSV treatment was stopped 7d before 451 HI insult), the neuroprotection is not as effective as observed for rsvGL or rsv L, suggesting that the

452 closest to the HI event occurs the supplementation, the more neuroprotective it becomes.

453 A HI insult leads to a deficiency in oxygen and glucose, inducing a decrease in ATP production and 454 an alteration of all energetically-dependent mechanisms. ATP-dependent pumps are no longer 455 efficient, which leads to an ionic imbalance and a cellular water influx responsible for cell swelling 456 and, at a larger scale, to cytotoxic edema (Badaut et al., 2011). ADC values, which decrease during the 457 first hours after the insult due to water movement restriction linked to the edema, were measured by 458 DWI, in the three most affected structures (cortex, hippocampus and striatum) (Vannucci et al., 1999). 459 A decrease in ADC values was measured, as observed in previous studies (Miyasaka et al., 2000; McKinstry et al., 2002). However, this decrease was slightly lower in the striatum of pups from the 460 461 rsvGL and rsvL groups, indicating that cytotoxic edema was less severe. This slight neuroprotective 462 effect has already been shown in another study, in the same model of P7-HI pups with lactate as 463 neuroprotective agent (Roumes et al., 2020). This striatal specific neuroprotective effect was also 464 observed after a middle cerebral artery occlusion in the mouse, since a lactate injection led to a 465 significant reduction of the lesion size, which was more pronounced in the striatum (Berthet et al., 466 2009). Indeed, Berthet et al., in order to understand why lactate protected mainly the striatum, measured lactate concentrations in each structure after lactate injection in healthy mice by MR 467 468 spectroscopy; they showed that the lactate concentration was higher in the striatum (Berthet et al., 469 2009). In addition, another study indicated that RSV decreased anoxia-induced dopamine release and appeared as a promising agent to improve the alterations occurring under anoxic-ischemic conditions 470 471 in striatal sections by protecting dopaminergic neurons (Gursoy and Buyukuysal, 2008). Indeed, dopamine was implicated in the development of an ischemic lesion in the striatum and a reduction of 472 dopamine release protects this structure against ischemic lesions (Globus et al., 1987). 473

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475 Correlation between lesion size and behavioral performance

476 MRI is a powerful technique that allows longitudinal follow-up of animals. Such a non-invasive 477 technique could thus be coupled with behavioral tests at different ages to correlate with cognitive 478 performance. Indeed, images alone are not necessarily predictive of brain functions, since rat pups have 479 high neuronal plasticity, which allows them to spontaneously recover some brain capacities (Wittmann 480 et al., 2004). Pups from the rsvGL group exhibited the smallest lesion volumes and the best 481 performance in all tests compared to the other groups. These results are in accordance with a previous 482 study showing a greater reduction in brain damages and a preservation of behavioral abilities after 483 maternal piceatannol (a RSV analogue) supplementation during gestation and breastfeeding than 484 during breastfeeding alone (Dumont et al., 2019). Interestingly, pups from the rsvL group showed the 485 same performance level than sham pups and pups from the rsvGL pups in behavioral tests, while their brain lesion volumes were bigger than the one measured in pups from the rsvGL group (at any time 486 487 point), and not statistically different from the brain lesion volumes of pups from the control group 488 (HIC). These results clearly indicate that (i) MRI alone just after the insult may not be accurately 489 predictive of eventual brain function impairments and (ii) behavioral tests are necessary to evaluate the 490 potential neuroprotection of a tested treatment. Concerning the time-window for maternal RSV 491 supplementation, data (MRI and behavior) indicated that when the RSV supplementation was stopped 492 one week before the neonatal HI event, the neuroprotective effect was the lowest. When RSV was 493 present only during the last week of gestation (rsvG), pups displayed a significant decrease in lesion 494 size only at P30 and minimal recovery of short-term behavioral performances (righting reflex and 495 mNSS scores). However, this neuroprotection was not sufficient to protect the hippocampus since long-496 term memory was not preserved. These data could be explained by the fact that the CA1 area of the 497 hippocampus is usually the most vulnerable structure, followed by the neocortex and then by the 498 striatum (Smith et al., 1984).

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500 Although maternal RSV supplementation administered before the HI event in pups was 501 neuroprotective, we also wanted to test its potential curative effect. Therefore, a rsvC group was 502 created, in which RSV was present in the drinking water of the breastfeeding female just after the 503 neonatal HI insult. Interestingly, even if administered after the HI insult, pups from the rsvC group had 504 better mNSS scores and performed better in the novel object recognition test than pups from the HIC 505 group. Such a curative effect of resveratrol was also observed in the same context but with a direct 506 treatment (Pan et al., 2016). Indeed, 3 doses of RSV (100mk/kg; i.p) in the post-HI P7 pup model at 507 0h, 8h and 18h reduced both the lesion size, as well as the expression levels of key inflammatory factors 508 and pro-apoptotic molecules 7 days after. These data confirm that MRI alone just after the insult is not 509 a predictive technique of the sensory-cognitive-motor functions and (ii) that it is necessary to evaluate 510 the effectiveness of a therapeutic approach using a long-term evaluation.

511

512 Putative molecular mechanisms involved in neuroprotective effects

513 To further understand the basis of these effects, we aimed at deciphering the molecular mechanisms 514 involved in RSV neuroprotection. For this purpose, only pup's brains from the most effective 515 supplementation regimen (pups from the rsvGL group) were analyzed in parallel with sham and HIC 516 groups. As a first step, we focused on some targets from a signaling pathway which is known to be 517 regulated by RSV (SIRT1 (Lagouge et al., 2006), SOD (Toader et al., 2013), Bcl2 (Pan et al., 2016)). 518 HI is characterized by two consecutive traumatic events: HI itself and the reperfusion period, which 519 induces oxidative stress and ROS production (Ten and Starkov, 2012). This increase in oxidative stress 520 leads to a dysfunction of the Na⁺/K⁺-ATPase, then brain edema and blood-brain barrier disruption 521 (Himadri et al., 2010). The Na⁺/K⁺-ATPase plays a major role in the maintenance of intracellular 522 electrolyte homeostasis and has been shown to be particularly sensitive to ROS-induced damages (Lima et al., 2009). In response to this insult, SOD, by stimulating the conversion of superoxide to 523 524 hydrogen peroxide, is one of the main antioxidant defense systems to scavenge ROS (Wang et al., 2018). Studies have described that the expression of SOD is regulated by SIRT1 through deacetylation 525 526 of the transcription factor FoxO3a and the transcriptional coactivator peroxisome proliferator-activated 527 receptor γ -coactivator 1 α (PGC-1 α) (Olmos et al., 2013). In our model, the neonatal HI insult induced 528 a decrease in SOD expression, which was partially counteracted by maternal RSV supplementation 529 which also enhanced SIRT1 levels. Our results agree with previous data reported by Shin et al. who 530 showed that RSV protected from ischemic stroke by upregulating the SIRT1-PGC-1a signaling 531 pathway leading to an antioxidant effect under ischemic stress (Shin et al., 2012). In another study, 532 using a P14-neonatal rat HI model, direct pre-treatment with RSV (20 or 40 mg/kg, for seven 533 consecutive days before HI induction) was shown to alleviate oxidative stress, in part by increasing 534 SOD expression just after the HI event (Gao et al., 2018). Likewise, in an adult rat model of transient global cerebral ischemia, it has been reported that RSV (30 mg/kg; i.p injections 7 d prior to ischemia) 535 536 is neuroprotective and restores Na⁺/K⁺-ATPase activity in the cortex and hippocampus back to normal 537 levels (Simao et al., 2011). Activation of SIRT1 signaling during neonatal HI by RSV was paralleled 538 by an increased expression of Bcl2. A SIRT1-dependent increase in Bcl2 has also been reported in a 539 stroke context after curcumin pretreatment and has been linked to anti-inflammatory properties (Miao 540 et al., 2016). Similarly, in oxygen-glucose deprivation (OGD) injury models, an upregulation of SIRT1 541 caused an increased expression of the anti-apoptotic Bcl2 and a decreased expression of the pro-542 apoptotic cleaved caspase-3 (Yan et al., 2013). In our study, the increase of SIRT1, Bcl2 and SOD2 543 expression was confirmed, as shown in previous studies which explored the direct impact of RSV. 544 These data confirm that our transgenerational and nutritional approach is as effective as a direct 545 treatment and that similar upregulations of SIRT1, Bcl2 and SOD2 are observed in pup's brains when 546 RSV was administered to the mother compared to a direct administration.

547 In a second step, we looked at the potential impact of maternal RSV supplementation on neonatal brain 548 metabolism. Indeed, only a few studies have investigated the effect of RSV on cerebral metabolism under physiological or pathological conditions, and none looked at it in a transgenerational context. In 549 550 one study, it was observed first that transient forebrain ischemia in adult rat led to a decrease in GLT1 551 expression (Girbovan and Plamondon, 2015), the major astrocytic glutamate transporter. The decrease 552 in astrocytic glutamate uptake induced by HI is responsible for glutamatergic excitotoxicity, which is 553 a major cause of neuronal death. This decrease was reversed by RSV pretreatment (1 or 10 mg/kg dose; 554 i.p.) (Girbovan and Plamondon, 2015). In our model, HI also induced a decrease in astrocytic GLT1 555 mRNA content in the damaged hemisphere, which was counteracted by maternal RSV 556 supplementation. GLAST mRNA content was not downregulated by the neonatal HI event, but was 557 upregulated by maternal RSV treatment (in both hemispheres). This upregulation of glutamate 558 transporter mRNA expression by RSV may lead to a decrease in glutamatergic excitotoxicity 559 promoting neuronal survival, as confirmed by Nissl staining. Astrocytic glutamate uptake is also 560 implicated in astrocyte-neuron metabolic interactions. Indeed, astrocytic glutamate reuptake 561 (3Na⁺/glutamate co-transport) after neuronal activity has been shown to activate astrocytic glycolysis 562 (through the Na⁺/K⁺-ATPase activation, which excludes Na⁺) and lactate production, which is 563 transferred to neurons and used as a neuronal oxidative fuel (Pellerin and Magistretti, 1994). This 564 lactate shuttling process is named ANLS for astrocyte-neuron lactate shuttle. Lactate is shuttled from astrocytes to neurons via monocarboxylate transporters (MCTs), with different isoforms exhibiting a 565 566 preferential cellular localization (MCT2 on neurons, MCT1 on astrocytes and endothelial cells). In 567 previous studies, we have shown that i) RSV can activate glycolysis (ex vivo NMR spectroscopy study on perfused liver) (Beauvieux et al., 2013) and, more recently, ii) that lactate is neuroprotective after a 568 569 neonatal HI event (Roumes et al., 2020). Taken altogether, our results led us to hypothesize that RSV 570 supplementation, in addition to classical signaling pathways, may impact other metabolic pathways, and more particularly can modulate the ANLS. This hypothesis is supported by the increase in mRNA 571 572 levels of the key elements involved in the ANLS: the MCTs, the lactate dehydrogenase (LDH) isoforms 573 (that converts pyruvate into lactate and vice versa), the astrocytic glutamate transporters (GLAST and 574 GLT1) and the α_2 subunit of the Na⁺/K⁺-ATPase. In the context of HI, during the latent phase, lactate 575 may act as an alternative fuel to counteract the energy deficit that occurred during the HI event. This 576 is consistent with the increased expression of the LDHb isoform (which favors the conversion of lactate 577 into pyruvate and therefore favors lactate consumption) at the protein level, and not the LDHa isoform 578 (which favors pyruvate into lactate conversion, and therefore favors lactate production). There is a 579 selective distribution of these two subunits of LDH, the isoenzyme LDH-5 (4 LDHa subunits) is more 580 present in glycolytic tissues while the isoenzyme LDH-1 (4 LDHb subunits) is more predominant in 581 oxidative tissues (Markert et al., 1975). Another study has shown that neurons have a strong content in 582 LDHb-enriched isoenzymes while astrocytes have more LDHa-enriched isoenzymes (Bittar et al., 583 1996). These observations suggested a regulated lactate flux between astrocytes and neurons which 584 was recently demonstrated in vivo (Machler et al., 2016). These data reinforced the concept that 585 astrocytes actively produce and release lactate that is subsequently transferred to neurons as an 586 energetic substrate to be used in the tricarboxylic acid cycle (TCA). The metabolic use of lactate as an 587 energetic substrate for neurons allows to spare glucose for other important cellular repair mechanisms, 588 such as the pentose phosphate pathway (PPP), which activity is crucial for the production of glutathione 589 or ROS scavenger particularity for the neonates (Morken et al., 2014). PPP has a critical role in 590 neuronal survival during cerebral ischemia/reperfusion as it produces crucial antioxidant molecules in 591 order to reduce the oxidative stress and inflammation (Cao et al., 2017).

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593 Conclusion

594 A summary of all modulations observed in this study is provided schematically in Figure 8. Maternal 595 supplementation with RSV alleviates the negative impact of inflammatory, apoptotic and ROS 596 pathways in a context of neonatal HI. Furthermore, RSV modulates brain metabolism by upregulating 597 some key components of the ANLS. In fine, RSV promotes neuronal survival, and, more importantly, 598 preserves motor and cognitive abilities. The originality of this study was to combine different techniques (MRI, behavioral investigations, histology, gene and protein expression analyses) to 599 600 characterize brain lesions and their functional consequences, and to decipher the molecular 601 mechanisms behind this neuroprotection. Of note, our proposed nutritional and transgenerational 602 approach to administer RSV could be of great interest in the search for a realistic and easily 603 implementable neuroprotective strategy against the deleterious effects induced by neonatal HI.

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- 744
- 745 Tables
- 746

Genes	Forward 5'-3'	Reverse 5'-3'	
RPS29	GGCTTTTAGGATGGAAGGGAC	TGAAGGTGACAGCAGTCGGTTG	
SIRT1	CATACTCGCCACCTAACCTAT	AACCTCTGCCTCATCTACATTT	
Bcl2	GAGTACCTGAACCGGCATCT	GAAATCAAACAGAGGTCGCA	
SOD2	GAGCAAGGTCGCTTACAGA	CTCCCCAGTTGATTACATTC	
MCT1	CTTGTGGCGTGATCCT	GTTTCGGATGTCTCGGG	
MCT2	GCTCCGTATGCTAAGGAC	CGATAGTGACGAGCCC	
GLT1	GAGCATTGGTGCAGCCAGTATT	GTTCTCATTCTATCCAGCAGCCAG	
GLAST	CATCCAGGCCAACGAAACA	GAGTCTCCATGGCCTCTGACA	
Na ⁺ /K ⁺ ATPase	TGTGATTCTGGCTGAGAACG	CAAGTCAGCCCACTGCACTA	
LDHa	TGGCCTCTCCGTGGCAGACT	CCCCCAGACCACCTCAACACAA	
LDHb	AGACTGCCGTCCCGAACAA	ATCCACCAGGGCAAGCTCA	

- 748 **Table 1:** Forward and reverse oligonucleotide sequences of target gene primers for RPS 29, SIRT1,
- 749 Bcl2, SOD2, MCT1, MCT2, GLT1, GLAST, Na⁺/K⁺ATPase, LDHa and LDHb. The specificity of
- oligonucleotide primers was verified using the program BLAST (National Center for Biotechnology
- 751 Information, Bethesda, MD, USA).
- 752

Rabbit anti-MCT1	Hamamada		
	Homemade	Riderer Characterized in Pierre et al. (2000)	
Rabbit anti-MCT2	Homemade	Riderer Characterized in Pierre et al. (2000)	
Rabbit anti-LDHa	Cell signaling	20128	
Rabbit anti-LDHb	Sigma-Aldrich	AV48210	
Rabbit anti-GLAST	Abcam	ab416	

753

754 **Table 2:** List of antibodies for western blotting

755

756 6 Figure legends

757 Figure 1. Composition of experimental groups with different RSV regimens

Seven groups were studied: sham (water without any supplementation for the mother; no HI event for the pups), shamrsv (0.15mg/kg/day of RSV in the drinking water of the mother during last week of gestation + 1st week of lactation; no HI event for pups), HIC (water; HI at P7), rsvGL (0.15mg/kg/day of RSV during last week of gestation + 1st week of lactation; HI at P7), rsvG (0.15mg/kg/day of RSV during last week of gestation; HI at P7), rsvL (0.15mg/kg/day of RSV during 1st week of lactation; HI

- at P7), rsvC (0.15mg/kg/day of RSV during 1 week after HI; HI at P7).
- 764

765 Figure 2. Experimental design

At post-natal day 7 (P7), the left common carotid artery was permanently ligated. Pups were exposed to a hypoxic environment (8% oxygen, 33°C, 2 h). MRI acquisitions were performed at P7, P9 and P30. Behavioral tests were performed at different time points: righting reflex at P8, P10 and P12; mNSS at P24 and novel object recognition test from P41 to P45. Some brains were collected for mRNA and

protein analysis at P9.

771

Figure 3. Visualization and quantification of brain lesion size with or without RSV treatment after a HI event

774 (A) Percentage of P7 pups with brain lesion for HIC, rsvGL, rsvG, rsvL and rsvC groups, 3 h after 775 injury. Pups with brain lesion volume < 1% of the total brain volume were considered without brain 776 lesion. (B) Typical DW trace images at P7 (top) and T2 images at P30 (bottom) of pup brains for HIC, 777 rsvGL, rsvG, rsvL and rsvC groups, acquired on a 4.7T magnet. DW Images were systematically 778 acquired 3h after common carotid artery ligation. Damage appeared as a hyposignal at P7 (decrease in 779 ADC values due to the edema and cell swelling) and as a hypersignal at P30 (necrotic zone, water and 780 cell death). (C) Lesion volumes (% total brain volume) at P7 (3h after the common carotid artery 781 ligation; n=31, n=12, n=15, n=13 and n=15 for HIC, rsvGL, rsvG, rsvL and rsvC groups, respectively), 782 at P9 (48h after the HI event; n=25, n=14, n=13, n=14 and n=12 for HIC, rsvGL, rsvG, rsvL and rsvC 783 groups, respectively) and P30 (23 days after the HI event; n=22, n=13, n=12, n=13 and n=12 for HIC, 784 rsvGL, rsvG, rsvL and rsvC groups, respectively). (D) Evolution of lesion volumes as a function of time (% relative to lesion volume at P7 for each pup. (E) ADC values (mm²/s) in cortical, hippocampal 785 786 and striatal lesions at P7. Results are mean values \pm SEM. C, D and E one-way analysis of variance (ANOVA) with Fisher's LSD post-hoc test. *: Significant difference between two groups (*: p < 0.05, 787 **: p < 0.01, ***: p < 0.001 and ****: p < 0.0001). 788

789

790 Figure 4. Behavioral investigations in animals with or without RSV treatment after a HI event

791 (A) Righting reflex for sham, HIC rsvGL, rsvG, rsvL groups (n=23, n=20, n=17, n=12 and n=15 for 792 sham, HIC, rsvGL, rsvG and rsvL groups, respectively) at P8, P10 and P12. (B) mNSS score at P24 793 for sham, HIC, rsvGL, rsvG, rsvL and rsvC groups (n= 14, n= 13, n=17, n=13, n=15 and n= 13 for 794 sham, HIC, rsvGL, rsvG, rsvL and rsvC groups, respectively). Scoring between 0 and 18 points with: 795 <1, no impairment; 1-6, moderate impairment; 7-12, impairment and 13-18, severe impairment. *: different from the HIC group (**: p < 0.01), +: different from the sham group (+: p < 0.05, ++: p < 0.05796 797 0.01) and #: different from the rsvGL (p < 0.05). (C) Discrimination index of the novel object recognition test (performed at P45) for sham, HIC, rsvGL, rsvG, rsvL and rsvC groups (n=17, n=17, 798 799 n=13, n=10, n=14 and n=11, respectively). Results are mean values \pm SEM; one-way analysis of variance (ANOVA) with Fisher's LSD post-hoc test. *: Significant difference between two groups (*: 800 p < 0.05, **: p < 0.01 and ****: p < 0.0001). 801

802

Figure 5. Impact of maternal RSV supplementation on cortical expression of some mRNAs linked to signaling or metabolism

RT-qPCR performed at P9 on cortical samples from damaged and undamaged hemispheres of sham, 805 rsvGL and HIC groups (n=6 for each group, hippocampus and striatum (supplementary Figure 3 and 806 807 4). (A) Signaling pathway: SIRT1, Bcl2 and SOD2 mRNA levels were quantified using appropriate primer sequences (see Table 1). (B) Metabolic pathway: MCT1, MCT2, LDHa, LDHb, GLAST, GLT1 808 809 and Na⁺/K⁺-ATPase α_2 subunit mRNA levels were quantified using appropriate primer sequences (see 810 Table 1). Results are mean values ± SEM and one-way analysis of variance (ANOVA) with Fisher's 811 LSD post-hoc test. *: Significant difference between two groups (*: p < 0.05, **: p < 0.01, ***: p < 0.01, **: p < 0.01, 0.001 and ****: p < 0.0001). 812

813

814 Figure 6. Impact of maternal RSV supplementation on expression of key ANLS proteins

815 Cortical expression levels of MCT1, MCT2, LDHa, LDHb, GLAST, GLT1 and the Na⁺/K⁺-ATPase

816 α_2 subunit proteins were quantified by Western blots (n=6 for each group). Quantifications were

817 normalized to Memcode staining. Results are mean values \pm SEM and one-way analysis of variance

- 818 (ANOVA) with Fisher's LSD post-hoc test. *: Significant difference between two groups (*: p < 0.05,
- 819 **: p < 0.01 and ****: p < 0.0001).
- 820

821 Figure 7. Evaluation of neuronal cell death with or without RSV treatment after a HI event

822 Nissl staining on 16 μ m-thick cortical brain sections. (A) Percentage of neuronal cell death for sham, 823 HIC and rsvGL groups in either undamaged or damaged cortex (n=6). Results are mean values ± SEM, 824 one-way analysis of variance (ANOVA) with Fisher's LSD post-hoc test. *: Significant difference 825 between two groups (****: p < 0.0001). (B) Cortical section of a sham control pup, which shows the

826 normal architecture with many Nissl bodies. Several neuro-morphological changes are observed in the

- 827 pup from the HIC group, with increased numbers of pyknotic neurons (dead neurons) and less Nissl
- bodies. Maternal RSV supplementation increased the number of Nissl bodies (viable neurons).
- 829 Magnification $\times 20$; scale bar: 100 μ m.
- 830

831 Figure 8. Summary scheme of maternal RSV neuroprotection on HI damages.

832 Scheme explaining (i) the deleterious effect of HI on each targeted gene and (ii) the beneficial effects 833 of maternal RSV supplementation on the three main pathways (anti-apoptotic, anti-oxidant and

- 834 metabolic pathway).
- 835

836 7 Conflict of Interest

The authors declare that the research was conducted in the absence of any commercial or financialrelationships that could be construed as a potential conflict of interest.

839

840 8 Author Contributions

UD has acquired and analyzed data, and has contributed to the final drafting of the article. SS has produced the HI neonate model. CR has participated to Western-Blot and RTqPCR experiments. MCB and JFC have contributed to the final drafting of the article. LP have contributed to the design of the experiments and wrote the article. AKBS and HR have conceived, designed, acquired and analyzed data, and wrote the article.

846

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- 853





 \rightarrow RSV in the drinking water for the dams

Нур	★ oxia - Ischemia ↓			
	P7 P9	P20	<1	P45
MRI	P7 P9	revie	P30	
Righting Reflex	P8 P10	P12		
mNSS		P24		
Novel object recognition			_	P42 P43 P44 P45

>>> Collected samples

Figure 3.TIFF





Fold changes of cortical mRNA relative expression 250-* <u>**</u> 200-<u>***</u> (primer/RPS29) ** 150-*<u>**</u> ** •• sham ••• ••• 100-• • HIC •• • • • • rsvGL € **50**-0 SIRT1 Bcl2 SOD2 SIRT1 Bcl2 SOD2 undamaged damaged



Α

Β





undamaged

damaged





Figure 8.TIFF