



PROBLEMS AND INFORMATICS-AIDED SOLUTIONS IN RESEARCH OF NEURODEGENERATION WITH AN EMPHASIS ON QUANTITATIVE MORPHOLOGY

Ph.D. Thesis by

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Introduction

The human nervous system contains hundreds of billions of neurons and glial cells, but their number and morphology change in almost any neuronal disease and even in healthy ageing. Therefore, to characterize cell number and morphological changes is essential in understanding pathological processes, which is the first step in a lengthy course of investigations to develop treatments to slow disease progression and ultimately cure the patients.

The type of neurons affected depends on the disease itself – for instance, in the case of amyotrophic lateral sclerosis (ALS), which is in the focus of our research, the motor neurons in the motor cortex and in the spinal cord are impacted by the degenerative processes. Thus, before counting or characterizing the morphology of cells, first, a sampling paradigm must be established, specifying tissue type, anatomical regions of interest, sub-regions, etc. (Figure 1.) Then, finding – or developing - a correct method to count cells, especially using conventional microscopy of thin sections is a delicate task.

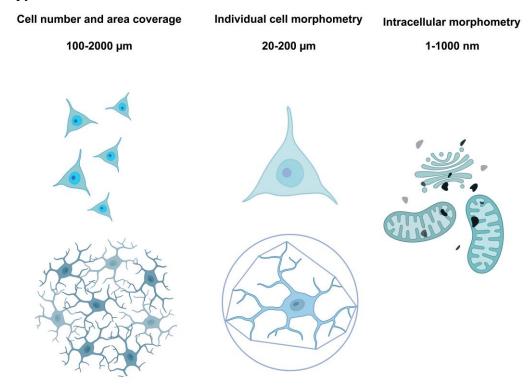


Figure 1. Scheme of hierarchic sampling for morphological characterization of neural and microglial cells at light (anatomical region, cell populations and individual cells) and electron microscopic (intracellular components) level.

The goal of experimental neurology research is to better understand the pathomechanisms underlying human neurodegenerative diseases, to slow down or eventually halt disease

progression. Since human brain samples, due to ethical considerations, are only available for direct examination in exceptional cases, experimental models mimicking certain aspects of the investigated disease are utilized. Since the spinal cord and brain samples of these animals could be similarly characterized, the observations in these regions of the central nervous system enabled the extrapolations to the human central nervous system. In the first part of the thesis, the relationship of the loss of spinal motor neurons and the change of their calcium homeostasis, which plays a central role in degenerative processes, is examined in an animal model of ALS.

Immunofluorescence (IF) microscopy has the advantage of multiple staining and simultaneous visualization of different cells and cellular compartments. However, IF with quantitative evaluation is rather challenging due to photobleaching, which is a well-known phenomenon that occurs when fluorophores lose their ability to emit fluorescence upon prolonged exposure to excitation light. This weakening in fluorescence may particularly affect the morphological characterization of objects with fine process arborization, for example, microglia and astrocytes, altering the obtainable data using image analysis. The magnitude of the effect of photobleaching on quantitative morphometric parameters of fluorescently labelled cells, however, is not known in detail. In the next part of the thesis, the results of our experiments characterizing this phenomenon are presented.

The utility of animal models of neurodegenerative diseases is not limited to the availability of the entire nervous system for different types of examinations but also provides a shorter duration for the development of the disease and the possibility of introducing and testing potential medical treatments. In human neurodegenerative diseases, however, any potential treatment is delayed by the relatively long diagnostic time. Since ALS shows heterogeneous progression and symptoms, there is no single test for the disease, thus, the diagnosis is based on a combination of inclusion and exclusion clinical criteria. Consequently, the disease has an exceptionally long diagnostic time (from symptom onset to confirmed diagnosis, the time range is from half to one and a half years).

The question asked by Mitchell et al. in the title of their paper published in 2010, "Can we do better?" was also investigated in the thesis by showing a simple, AI-generated example of automatizing repetitive image analysis and evaluating the potential supporting role of artificial intelligence in setting up or facilitating diagnosis of neurodegenerative diseases.

Aims

Characterization of the motoneuronal calcium level and loss of motor neurons in a model of ALS using optimized dissector methods

Characterization of the effect of photobleaching on the morphometric analysis of fluorescently labeled cells in the central nervous system

Characterization of the potential supportive role of artificial intelligence in image analysis and the diagnosis of neurological diseases

Results

Effect of passive transfer of ALS sera on survival of motor neurons and intracellular calcium

Loss of lumbar motor neurons in mice after injection of ALS sera

Results did not show any alteration in the number of motor neurons (MNs) in the lumbar spinal cord after passive transfer from healthy individuals compared to the untreated animals (Figure 2A, B), however, passive transfer of ALS sera resulted in a prominent loss of MNs (Figure 2C).

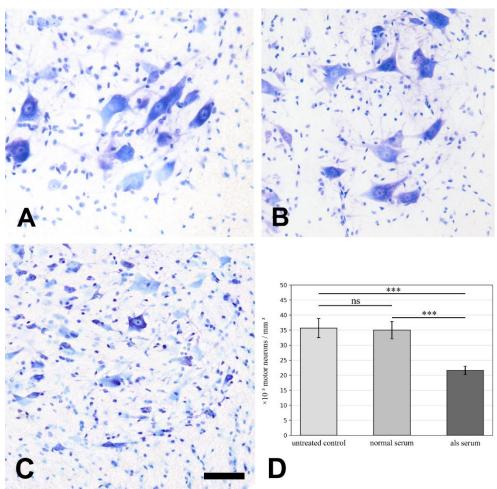


Figure 2. Large cells (>30 μ m of characteristic profile size) identified as MNs are detectable in high numbers in untreated mice (n = 3) (A) or after injection with sera from healthy individuals (n = 3) (B). A reduction in the number of MNs was observed after treatment with serum from ALS patients (n = 14) (C). Scale bar: 100 μ m.

Changes in the calcium content of motor neurons after Injection of ALS sera

Significant MN loss can be observed in the ventrolateral MN pool in the ALS model compared to the controls; however, subtler markers of degeneration can also be noted if we investigate

subcellular elements of the still-detectable cells. With electron microscopy, no ultrastructural alteration could be seen in MNs of untreated mice or after treatment with serum from healthy controls (Figure 3A, B). After inoculation with ALS sera, disorganized mitochondrial cristae, dilated endoplasmic reticulum and Golgi complex can be observed in the perikarya of MNs compared to controls. Increased cytoplasmic and mitochondrial calcium, visualized as a larger number of electron-dense deposits (EDDs), could be observed in MNs after treatment with sera from ALS patients (Figure 3C, Figure 4).

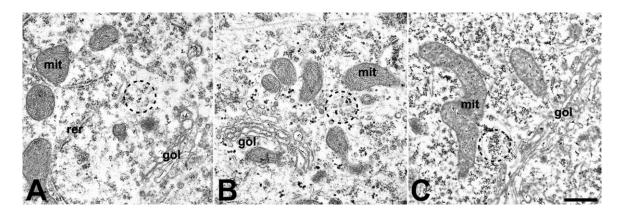


Figure 3. Ultrastructural alterations can be seen in the micrographs of motor neurons from mice treated with sera from amyotrophic lateral sclerosis (ALS) patients (C) compared to untreated (A) and the healthy serum-treated samples (B). Mit: mitochondrion; rer: rough endoplasmic reticulum; gol: Golgi complex; Scale bar: 500 nm.

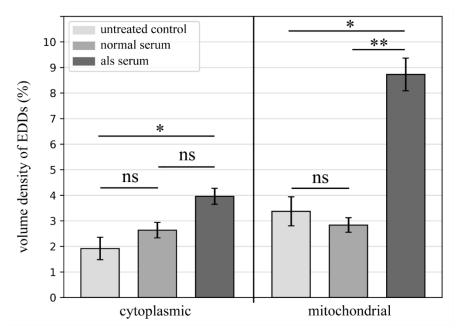


Figure 4. A significant elevation in electron-dense deposits can be observed in cytoplasmic and mitochondrial regions of the motor neurons (MNs) of the ALS sera-treated mice (n = 30)

compared to untreated mice (n = 3) or mice treated with serum from healthy individuals (n = 3).

Correlation of intracellular calcium increase and loss of motor neurons

Correlation analysis revealed a strong negative correlation between the number of surviving MNs and intracellular calcium level increase in the spinal cord MNs (Figure 5). The data representing the control groups (untreated and control serum-treated groups) were separated from the ALS serum-treated patients' data. Furthermore, in the ALS serum-treated group, one subpopulation emerged; as cluster analysis separated the data representing the mice which received serum from ALS patients with a mutation in the chromosome 9 open reading frame 72 (C9ORF72) gene. This subpopulation of ALS serum-treated mice displayed more severe MN loss and highly increased intracellular calcium levels.

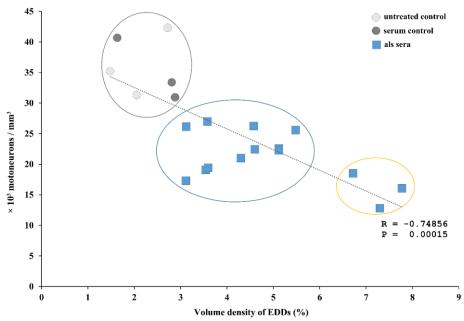


Figure 5. Each symbol (except for the untreated animals) represents a patient who served as a serum donor. The number of surviving spinal motor neurons negatively correlated with the increase in intracellular calcium levels. Three clusters could be identified: the control group (at the left side), the majority of the ALS patients (at the middle), and a subgroup of ALS patients with chromosome 9 open reading frame 72 hexanucleotide repeats (at the right side).

Effect of photobleaching on the morphometric analysis of fluorescently labeled cells Effect on mean signal intensity In order to determine the adequate method for a larger-scale (individual cell morphology and cell populational measurements) morphological evaluation on neurons and microglia, first, mean signal intensity was measured in large field of view images after neuronal and microglial staining using A488 and A546 fluorophores (Figure 6).

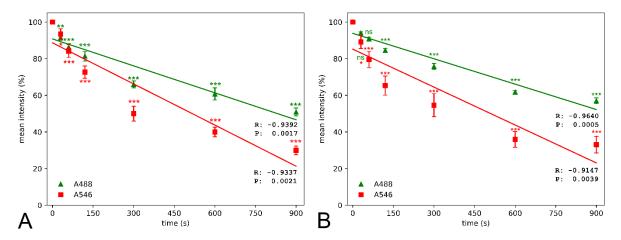


Figure 6. Quantitative determination of mean pixel intensity revealed that photobleaching led to a significant decrease of the fluorescent light as early as after 30-60 seconds compared to values at zero illumination time of microglial (A) (Iba1) and neuronal staining (B) (NeuN).

Effect on the number of detectable neurons

Neurons in the spinal cord were counted in the same area with different illumination times, if their nuclei could still be identified (Figure 7). The number of detectable neuronal profiles was reduced by approximately 10% after 60 seconds of illumination of samples, regardless of the fluorophore. At the end of the experiment, A488 showed a 22% decrease in the number of detectable neurons, but more than half of the initial number of neuronal profiles became unidentifiable if samples were stained with A546.

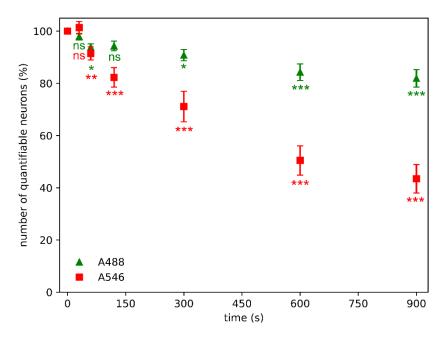


Figure 7. Photobleaching has a significant effect on quantifiable neuronal number (stained neurons with discernible nucleus) even after 60 seconds of illumination time using Alexa Fluor 546 (A546) (n = 15) and Alexa Fluor 488 Plus (A488) (n = 15) compared to the values measured at zero sec illumination time.

Effects on relative area coverage and area fraction of microglial cells

The cell-to-background-relative microglial profile area coverage measurement maps the background density and standard deviation of the background to provide a cut-off value of the image of interest for segmentation. Same areas at different time points were acquired, and the relative differences between the actual image and the initial image were calculated (Figure 8).

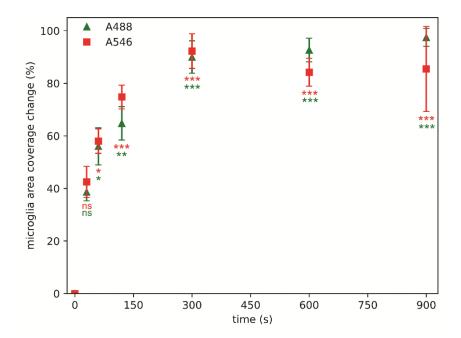


Figure 8. Photobleaching has a significant effect on microglial area coverage measurements even after 60 seconds of illumination time using Alexa Fluor 546 (A546) (n = 15) and Alexa Fluor 488 Plus (A488) (n = 15) compared to area coverage measured at zero time point.

The ImageJ-based, ChatGPT-generated macro, performing image transformations, user-controlled thresholding with binarization and area fraction parameter-retrieval, was used to evaluate the images, in parallel to the Image Pro-Plus macro-based quantification. Notable changes first occurred after 30 (A488) and 120 (A546) seconds of illumination (Figure 9). The ChatGPT-generated ImageJ macro revealed similar changes as the manually-prepared Image Pro-Plus macro (Figure 8, Figure 9).

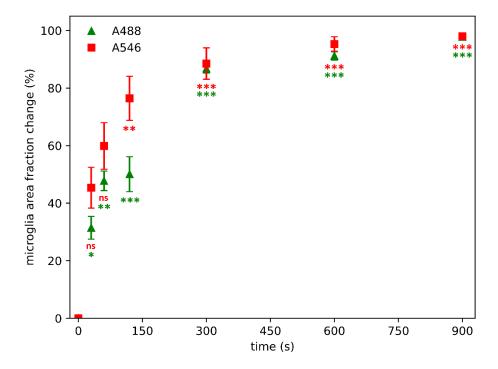


Figure 9. Quantification of microglial area coverage alterations with the ChatGPT-generated ImageJ macro. Photobleaching has a significant effect on microglial area fraction measurements even after 30 seconds of illumination time using Alexa Fluor 488 Plus (n = 15) compared to area fraction measured at zero time point.

Effects on fractal parameters of microglia cell profiles

Morphometric parameters were compared between individual cell profiles segmented from images taken at different time points (Figure 10). Based on the mean intensity changes and considering the time-consuming process of semi-manual segmentation, cell profiles were segmented at the 0-time point and at a determined endpoint of illumination time where the binarization process still could be done. This time was 120 seconds for A546 and 900 seconds for A488. Different parameters show different levels of resistance to photobleaching.

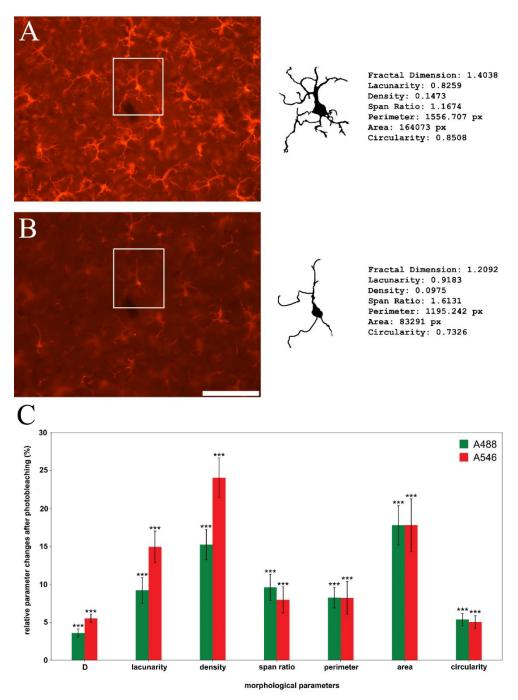


Figure 10. Photobleaching has a significant effect on morphological parameters of individual microglial cell profiles (A: initial image, B: faded image) using Alexa Fluor 546 (A546; red bars on panel C) (n = 30) and Alexa Fluor 488 Plus (A488; green bars on panel C) (n = 30). D: fractal dimension. Scale bar: $100 \, \mu m$.

Combination of the DAB-Based and the Fluorescent-Based Immunohistochemistry

For morphological quantification within identified anatomical structure, the DAB-based and the fluorescent based immunohistochemistry in a single section were combined (Figure 11). The fluorescently stained MNs are used to identify the border of the hypoglossal nucleus, which

border is then copied to the DAB-stained microglial stained image, and the microglial area coverage could be determined within this border. For illustration of the co-distribution, the two images are overlaid.

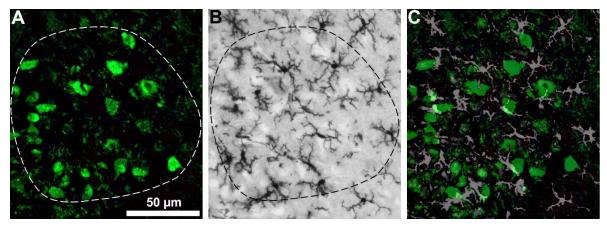


Figure 11. The fluorescently stained (ChAT-positive) motor neurons are used to identify the border of the hypoglossal nucleus (A), then the borderline is copied to the DAB-stained (Iba1-positive) microglial stained image (B), and the microglial area coverage could be determined within this border. For illustration of the co-distribution, the two images are overlaid (C). Scale bar: 50 μm.

Testing diagnostic potential of artificial intelligence in neurological diseases Diagnostic accuracy of ChatGPT in neurological disorders

To investigate the usefulness of informatics-aided solutions in another field, the diagnostic efficacy of a general large language model, ChatGPT, was evaluated. When provided with a short case history of neurology-related scenarios, ChatGPT was asked to deduce the 5 most likely diagnoses for each case. In parallel, medical doctors (MDs), and neurologist experts were also given the same fictional cases (Figure 12). The most likely diagnosis provided by ChatGPT matched the true diagnosis in $68.5\% \pm 3.28\%$ of the cases, which significantly surpassed the success ratio of the MDs group (57.15% \pm 2.64%) but did not reach the ratio of the expert group (81.66% \pm 2.02%).

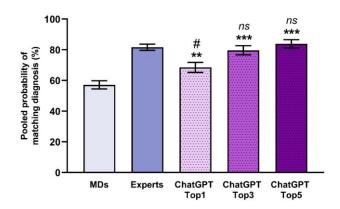


Figure 12. Diagnostic accuracy of ChatGPT in various cases, where patients presented with neurological symptoms. In the case of the ChatGPT group, three columns represent the most probable (ChatGPT Top1), three most probable (ChatGPT Top3), and five most probable diagnoses (ChatGPT Top5).

Neurological cases were further sorted into subcategories of "acute" (n=85) and "non-acute" (n=115) cases (Figure 13). In the "acute cases" category, the most likely diagnosis provided by the AI matched $71.76\% \pm 4.88\%$ of the original diagnoses, which is nearly indistinguishable from the success ratio of the MDs (Figure 13A). The "non-acute cases" subgroup represented a mixture of cases, including chronic neurological disorders, where the diagnostic procedure is often lengthy and complex, such as in the case of ALS. The diagnostic accuracy in the non-acute disease group was lower in all three groups (MDs, experts, and ChatGPT) compared to the acute neurological cases. ChatGPT achieved a diagnostic accuracy of $66.09\% \pm 4.41\%$, which was similar to the experts' diagnostic accuracy (Figure 13B).

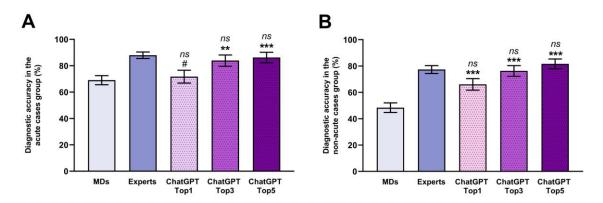


Figure 13. Pooled success ratio of correct diagnosis for (A) acute and (B) non-acute cases by medical doctors (MDs, n = 6), neurological experts (n = 6), and ChatGPT.

Summary

I.

It has been demonstrated that passive transfer of blood sera from ALS patients with identified mutations resulted in elevated motoneuronal calcium level and loss of motor neurons in the spinal cord of mice

II.

It has been characterized how photobleaching alters the morphometric analysis of fluorescently labeled neurons and microglial cells, and a solution has been proposed for how this effect could be compensated

III.

It has been demonstrated that general artificial intelligence could be a valuable and precise tool in the automatization of repetitive image processing steps, and in the diagnosis of neurological diseases

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Manuscripts in preparation

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