Natural Cannabinoids Improve Dopamine Neurotransmission and Tau and Amyloid Pathology in a Mouse Model of Tauopathy

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Abstract. Cannabinoids are neuroprotective in models of neurodegenerative dementias. Their effects are mostly mediated through CB1 and CB2 receptor-dependent modulation of excitotoxicity, inflammation, oxidative stress, and other processes. We tested the effects of Sativex®, a mixture of Δ⁹-tetrahydrocannabinol and cannabidiol, acting on both CB1 and CB2 receptors, in parkin-null, human tau overexpressing (PK−/−/TauVLW) mice, a model of complex frontotemporal dementia, parkinsonism, and lower motor neuron disease. The animals received Sativex®, 4.63 mg/kg, ip, daily, for one month, at six months of age, at the onset of the clinical symptoms. We evaluated the effects of Sativex® on behavior, dopamine neurotransmission, glial activation, redox state, mitochondrial activity, and deposition of abnormal proteins. PK−/−/TauVLW mice developed the neurological deficits, but those treated with Sativex® showed less abnormal behaviors related to stress, less auto and hetero-aggression, and less stereotypy. Sativex® significantly reduced the intraneuronal, MAO-related free radicals produced during dopamine metabolism in the limbic system. Sativex® also decreased gliosis in cortex and hippocampus, increased the ratio reduced/oxidized glutathione in the limbic system, reduced the levels of iNOS, and increased those of complex IV in the cerebral cortex. With regard to tau and amyloid pathology, Sativex® reduced the deposition of both in the hippocampus and cerebral cortex of PK−/−/TauVLW mice and increased autophagy. Sativex®, even after a short administration in animals with present behavioral and pathological abnormalities, improves the phenotype, the oxidative stress, and the deposition of proteins in PK−/−/TauVLW mice, a model of complex neurodegenerative disorders.

Keywords: Amyloid, autophagy, cannabinoids, dopamine, frontotemporal dementia, lower motor neuron disease, parkin, parkinsonism, reactive oxygen species, Sativex®, tau

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INTRODUCTION

The pharmacological manipulation of the cannabinoid system is considered as a putative neuroprotective strategy in some neurodegenerative disorders, including Alzheimer’s disease, Parkinson’s disease, and...
Huntington’s disease [1–17]. The neuroprotective effects of cannabinoids are mediated through CB1 receptors, located in neurons, which modulate neuronal function, and CB2 receptors, mostly located in microglia, which play an important role in neuroinflammation. For instance, the activation of the CB2 receptors increases the removal of amyloid by human macrophages in vitro [18]. Cannabinoids have been postulated to increase neurogenesis in the adult brain, and to protect neurons from excitotoxicity, calcium influx, inflammation, and ischemia. These mechanisms have been postulated in the pathogenesis of Alzheimer’s disease and, therefore, cannabinoids may have beneficial effects in this disease [4, 7, 13–15]. Additional mechanisms of action, including activation of peroxisome proliferator-activated receptors and modulation of mitochondrial activity and oxidative stress, could also contribute to cannabinoid-induced neuroprotection [19–21].

The majority of the studies showing neuroprotective effects of cannabinoids have been performed in monogenic or pharmacological models of neurodegenerative diseases. However, very little is known about potential neuroprotective effects of these compounds on complex models of neurodegenerative diseases, which represent the complexity of the human diseases more faithfully. Sativex® is a cannabinoid-based medicine already approved for the treatment of spasticity in multiple sclerosis [22, 23]. Sativex® is a mixture of Δ9-tetrahydrocannabinol (THC) and cannabidiol (CBD). It combines several potential neuroprotective effects, such as the stimulation of both CB1 and CB2 receptors by THC with the antioxidant effects of CBD [24]. Sativex® is therefore especially adequate for the study of neuroprotective effects of cannabinoids on PK−/−/TauVLIW mice, a complex model of tauopathy, which has been previously described [25] and which combines cerebral and peripheral deposition of amyloid with lesions of the hippocampus, substantia nigra, and lower motor neuron and resembles a multisystemic neurological disease such as frontotemporal dementia FTD-17 and the parkin-null mutant mice (PK−/−) as previously described [25, 26].

Mice were obtained by breeding the animals according to the schema shown in Supplementary Figure 1 (available online: http://www.j-alz.com/issues/35/vol35-3.html#supplementarydata02). Mice and Phytocannabinoids

MATERIAL AND METHODS

Transgenic animals, cannabinoid treatment, and tissue collection

Our experiments were performed on littermates generated by a heterozygote intercross of human-mutated tau overexpressing mice (TauVLIW), overexpressing a human four-repeat tau isoform carrying three mutations (G272V, P301L, and R406W) linked to frontotemporal dementia FTD-17 and the parkin-null mutant mice (PK−/−) as previously described [25, 26]. Mice were obtained by breeding the animals according to the schema shown in Supplementary Figure 1 (available online: http://www.j-alz.com/issues/35/vol35-3.html#supplementarydata02).

Then, we obtained the PK−/−/TauVliW homozygote strain selecting them after a heterozygote intercross. The animals therefore have the same genetic background. The confirmation of the genotype in each mouse was performed by standard PCR techniques of genomic DNA obtained from its tail, marking every animal with a specific chip number (Supplementary Figure 1). Eighteen male mice were used, half of them being injected intraperitoneally (i.p.) with Sativex® and half with saline for controls (9:9). All mice were used for behavioral experiments (depending on the specific trial); twelve males for biochemical, monoamines, and glutathione and six for histological assays. The Sativex® treatment was administrated for a month, starting at 6 months of age and the animals were sacrificed at 7 months. Procedures using laboratory animals were in accordance with the European Union Directives and the Ramón y Cajal University Hospital
Animal Care Committee. The mice were housed 9 per cage, in an enriched environment with tissue paper and cardboard tubes. All efforts were made to minimize the number of animals used and their suffering.

Sativex® is a drug whose principal active components are the cannabinoids THC and CBD. It is generated by mixing a THC botanical extract (containing 67.1% THC, 0.3% CBD, 0.9% cannabigerol, and 1.9% other phytocannabinoids) and a CBD botanical extract (containing 64.8% CBD, 2.3% THC, 1.1% cannabigerol, 3.0% cannabichromene, and 1.5% other phytocannabinoids) (both provided by GW Pharmaceuticals Ltd, Cambridge, UK) in a 1:1 proportion. The extracts were dissolved in ethanol and mixed 1:1 to make a 20 mg/ml Sativex® stock solution in siliconed tubes and covered in order to protect it from direct light. The Sativex® solution was prepared as previously described [2, 10, 17]. The total dose of cannabinoid administered was always 4.63 mg/kg of Sativex® (equivalent to 10, 17]. The total dose of cannabinoid administered was prepared as previously described [2, 10, 17] (both provided by GW Pharmaceuticals Ltd, Cambridge, UK) in a 1:1 proportion. The extracts were dissolved in ethanol and mixed 1:1 to make a 20 mg/ml Sativex® stock solution in siliconed tubes and covered in order to protect it from direct light. The Sativex® solution was prepared as previously described [2, 10, 17]. The total dose of cannabinoid administered was always 4.63 mg/kg of Sativex® (equivalent to 1.5 mg/kg of pure CBD and 1.5 mg/kg of pure THC), which is within the range of effective doses of both compounds when they were administered in pure form in other experimental models of neurodegenerative diseases [2, 10, 17] and in human studies [30]. This was also the effective dose in a previous study with Sativex® like combination of phytocannabinoids in a model of Huntington’s disease [17]. The vehicle (Tween-80:Saline) was prepared in a similar manner, except that the drug was omitted. Solutions were freshly made every day and administered in 1 ml/kg body weight. Mice were subjected to i.p. injections of Sativex® or vehicle for 30 days, with one injection per day always between 10:00 and 11:00 AM.

Six mice of each experimental group were used for biochemical studies and three for histology. Motor, cognitive, and anxiety behavioral testing was performed every week. At the end of the treatment, the mice were sacrificed and their brains were dissected into different brain regions which were used for the analysis of the metabolism of monoamines, protein expression, and the levels of glutathione. Three mice of each experimental group were perfused with 4% paraformaldehyde and used for histological studies (see below).

Genotype determination by PCR

PK−/−/TauVLW mice were genotyped by PCR screening (Supplementary Figure 1). Genomic DNA was extracted from mouse tail after proteinase K digestion (16 h at 55°C) in lysis buffer (50 mM Tris-HCl pH 8.3, 100 mM NaCl, 5 mM EDTA, 0.8% SDS) and phenol/chloroform isoamyl alcohol (25:24:1 ratio) extraction, followed by DNA precipitation with 1/10 volume of 3 M sodium acetate (pH 5.2), and 1 volume of absolute ethanol. The pellet was washed with 70% ethanol and allowed to air-dry. The nucleic acids were dissolved in 150 μl of sterile water. For PCR, 150 ng of genomic DNA was denatured for 3 min at 94°C and subjected to 35 cycles of 1 min at 94°C, 1 min at 53°C, and 1 min at 72°C, followed by 5 min of a final extension at 72°C. PCR was performed in a final volume of 40 μl containing 1 U of Taq DNA polymerase (Promega: 5 U/μl), 1 mM dNTP (4×0.25 mM), 2.5 mM MgCl2, 5 mM Tris-HCl (pH 8.0), and 1 μl of specific sense and antisense primers at 50 ng/μl (listed below):

PK1F: TGC TCT GGG GTT C GTT C
TT1: CTC TGC CCT CTG TCT GCT G
PK2F: TTG TTT TGC CAA GTT CTA AT
TT2: CCT GTC CCC CAA CCA GGC GTA CG
PKR: TCC ACT GGC AGA GTA AAT GT
THY: GCC TGA TGG CTG GGT TCA TG

Twenty-microliter volumes of PCR products were analyzed by electrophoresis on a 1.8% agarose gel that was subsequently stained with ethidium bromide for visualization of DNA bands. DNA molecular weight markers (Roche, Spain) were used to provide a size reference for the test reactions [25, 26].

Behavioral studies

Exploratory behavior, social interaction, motor activity, food and water intake as well as body weight were measured during the experiment.

Actimeter

In order to analyze the motor activity, a computerized actimeter was used (Actitrack, Panlab, Barcelona, Spain). This allows for the analysis of the distance run in the actimeter (ambulation) and the zonal distribution of the movement (anxiety and exploratory index). The exploratory index is inversely proportional to the time spent and the distance traveled in the central area away from the walls. The analysis of motor activity was done for a period of 10 minutes.

Marble-burying test

The animals were transported from their site cages to the test site for 30 minutes of acclimation period prior to the start of the experiment. Tests were performed between 18:00 and 20:00 hours, in semi-light
in order to equal the 12:12 hour dark/light cycle of their vivarium. The mice were placed individually in plastic cages identical to their home cages, but without food or water, and with 9 marbles in 3 lines of 3 placed at equal distances between them. The animals were tested at the same time to avoid a potential confound of a within-cage order effect. A new cage, clean marbles, and fresh bedding were used for each mouse. Mice were placed in their test cages and left undisturbed for 30 minutes. At the end of that time, the number of marbles was recorded as: uncovered, buried completely, 2/3 covered, and half covered. This classification was used to obtain a “buried index”, as an indication of anxiolytic-like activity.

**Grooming activity after water mist spray**

The usual grooming routine may involve a mouse scratching itself with its hind feet; washing itself by spreading saliva on its hands and rubbing them over its face and fur; and grooming with its teeth. In normal conditions, low-stress comfort grooming is a spontaneous body care ritual, which occurs in a transition from rest to activity, and is a typical behavioral marker of low or no stress [31]. Each mouse was subjected to one squirt of sterile water mist spray to start a grooming conduct and this grooming activity was recorded for 5 minutes immediately after the mist spray. Once the test started, the percentage of the 5 minutes that the mice are in grooming activity was measured. The experimenters were blind to the mice with or without Sativex® treatment.

**Self-injurious behavior**

Barbering, or whisker removal, may represent stress-evoked behavioral response [32]. In most cases, it affects whiskers, a crucial sensor system of external information in mice. However, an abnormal barbering conduct, as seen in PK−/−/Tauvlw mice [25], may be due to a pathological neurobiological status in mice and a compulsive behavior because it represents a part of the waking activity of the mice [33]. This PK−/−/Tauvlw model showed an elevated level of self-injured wounds on the front of the face, due to their compulsive behavior and repetitive self-scratching [25]. The role of cannabinoids in mood and anxiety disorders has been described [34–36]. Each mouse was recorded to evaluate the extent of facial barbering in the different groups of the experiment.

**Rota-rod**

Motor coordination was evaluated in the Rota-Rod. The mice walked on a rod in movement, and after two tests of adaptation and a rest period, the mice performed three trials on the rod with a maximum time of 3 minutes at constant speed, and alternating breaks between trials. On the same day, the motor coordination was evaluated by the time of permanence (seconds) in the Rota-Rod with constant acceleration.

**Y-maze**

The spontaneous alternation behavior of mice in a Y-maze was used to measure short-term memory, motor activity, and anxiety. Each mouse was placed at the end of an arm and allowed to move freely throughout the maze during a 5-minutes session. The arm entries were recorded visually and with video (taping). General activity was measured as the total number of arm entries, while the basic mnemonic function was measured as the percentage of spontaneous alternation. Alternation was defined as successive entries into the three arms on overlapping triplet sets. The alternation behavior (%) was calculated as the ratio of actual alternations to possible alternations (defined as the total number of arm entries minus two), multiplied by 100.

**Determination of monoamines and their metabolites**

After decapitation, the brains were dissected as described [26]. The limbic, striatum, and midbrain brain regions were frozen on dry ice and the levels of monoamines and their metabolites were measured by HPLC with an ESA coulochem detector [26]. The following compounds were analyzed: 3-methoxytyramine (3-MT), 3,4-dihydroxyphenylacetic acid (DOPAC) and homovanillic acid (HVA), noradrenaline (NA), serotonin (5-HT) and its metabolite, 5-hydroxyindole-acetic acid (5-HIAA). Briefly, the tissue was sonicated in 6 volumes (weight/volume) of 0.4 N perchloric acid (PCA) with 0.5 mM Na2S2O5 and 2% EDTA and then centrifuged at 10,000 × g at 4°C for 20 minutes. Monoamine levels were determined from 20 μl of the resulting supernatant. The chromatographic conditions were as follows: a column (Nucleosil 5C18); the mobile phase, a citrate/acetate buffer 0.1 M, pH 3.9 with 10% methanol, 1 mM EDTA, and 1.2 mM heptane sulfonic acid; and the detector voltage conditions: D1 (+0.05), D2 (−0.39), and the guard cell (+0.40).

**Glutathione measurements**

Total glutathione (GSx) levels were measured by the method of Tietze [37]. A sample (40 μl) of the
supernatant of homogenated limbic, striatum, and midbrain regions in 0.4N PCA was neutralized with 4 volumes of phosphate buffer (0.2 M NaH2PO4, 0.2 M Na2HPO4, 0.5 M EDTA, and pH 7.5). Fifty microlitres of the resulting preparation were mixed with DTNB (0.6 mM), NADPH (0.2 mM), and glutathione reductase (1U), and the reaction was measured in a P96 automatic microtiter reader at 405 nm for 6 minutes. Oxidized glutathione (GSSG) was measured by the method of Griffith [38]. After neutralization with the phosphate buffer, the remaining sample (110 µl) was mixed with 2-vinylpyridine (1.1 µl) at room temperature for 1 hour, and the reaction was carried out as described above. Reduced glutathione (GSH) was obtained by subtracting GSSG levels from GSH levels.

**Histological studies**

**Immunohistochemistry**

The animals were anesthetized i.p. with a mixture (5:4:1) of ketamine (50 mg/ml), diazepam (1 mg/ml), and atropine (1 mg/ml) and perfused with 4% paraformaldehyde in PBS. After that, the whole brain was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Aβ1-42 (Abcam) diluted 1:200 for amyloid plaque evaluation. Mouse monoclonal anti tau 5 antibody diluted 1:100 was from Chemicon (Madrid, Spain). Rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit anti-GSK-3β [pY279] / β [pS216] (1:500) was from Invitrogen (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Dako (Denmark, Spain). Rabbit polyclonal anti-beclin-1 antibody diluted 1:100 was from MBL International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK).

**Protein analysis**

The different brain regions were sonicated (Vibra-Cell, level 2 for 30 seconds) in six volumes (W/V) of 0.4 N perchloric acid with 0.5 mM Na2S2O5 and 2% EDTA and then centrifuged at 12000 rpm for 20 minutes at 4°C. The pellet, with the proteins, was neutralized (W/V=1:6) with the lysis buffer (0.75% Na2CO3, 2% SDS, 0.25 mM PMSF, 10 mg/ml leupeptin, 2 mg/ml aprotinin, 10 mg/ml pepsin) and then sonicated and centrifuged at 13400 g for 30 minutes at 4°C. The supernatant was used for protein determination by BCA assay and for electrophoresis analysis. Samples (20–50 µg) were added to SDS sample loading buffer 2× (10% glycerol, 2% SDS, 0.1% bromophenol blue, 50 mM Tris, pH 6.8 and 5% β-mercaptoethanol), electrophoresed in 10% SDS-polyacrylamide gels and then electroblotted to 0.45 µm nitrocellulose membranes.

For immunolabeling, the blots were blocked with TTBS solution (20 mM Tris- HCl, pH 7.6, 137 mM NaCl plus 0.1% Tween 20, and 5% dry skimmed milk) for 2 hours at room temperature. After blocking non-specific binding, the membranes were incubated overnight with specific antibodies in blocking solution at 4°C. Later, blots were washed twice with blocking solution for 10 minutes followed by another two washes with TTBS for 5 minutes each. The blots were developed by chemiluminescence detection using a commercial kit (ECL-Amersham Biosciences) and quantified by computer-assisted video densitometry. β-actin was used as a control of charge. We used the following antibodies: mouse monoclonal anti-HSP70 (1:1000), goat polyclonal anti-p62 (SQSTM-1) (1:500), and anti-nitric oxide (NOS2) (1:1000) antibody from Santa Cruz (Temecula, California). Mouse monoclonal anti tau-5 antibody (for measurement of total tau protein) from Chemicon (Madrid, Spain) diluted 1:5000. Rabbit polyclonal to phospho-tau (phospho serine199 + serine202) (1:1000) was from Abcam (Cambridge, UK). Mouse monoclonal Aβ antibody 6E10 (Covance), diluted 1:1000. Mouse monoclonal anti-glia fibrillary acidic protein (GFAP) antibody diluted 1:5000 was from Chemicon (Madrid, Spain). Mouse monoclonal antibody against cytochrome C oxidase (complex IV) subunit I (1:500 to 1:1000) was from Molecular Probes (Invitrogen, Ltd, UK). Rabbit anti-GSK-3β (1:500) was from Invitrogen (Cambridge, UK). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1 was included in paraffin, sectioned in the microtome at a thickness of 4 microns. We used a rabbit polyclonal anti-Iba1 antibody, diluted 1:300, was from WAKO (Neuss, Germany). Rabbit polyclonal antibody anti-LC3 (Cambridge, UK). Mouse monoclonal Aβ42/43 (H9252) [pY216] (1:500) was from Invitrogen (Carlsbad, CA, USA). Rabbit polyclonal antibody anti-LC3 (1:1000) was from MBL, International Corporation (Hamburg, Germany). Rabbit polyclonal anti-beclin-1
RESULTS

Statistical analysis

Prior to statistical analysis, the data were tested, in order to assure that the values come from a Gaussian distribution, with a Kolmogorov-Smirnov test (with Dallal-Wilkinson-Lilliefors p value). Significant differences between the experimental groups were analyzed with Student t test. Differences were considered statistically significant when p < 0.05.

Sativex® improves stress and aggressive behavior of PK−/−/TauVLW mice

The amount of food and the volume of water consumed by the PK−/−/TauVLW mice did not change with Sativex® treatment. The vehicle and Sativex®-treated mice maintained the same levels of weight (data not shown). PK−/−/TauVLW mice have a reduced stride length, an index of parkinsonian involvement of gait, less distance covered in an open field [25, 27]. Sativex® treatment did not change these parameters (data no shown). However, in comparison with vehicle-treated PK−/−/TauVLW mice, the treatment with Sativex® showed a significant improvement of abnormal behaviors related to stress, such as auto and hetero-aggressive behavior and stereotypes. Sativex® decreased the marble burying index and increased the percentage of grooming (Fig. 1A–D). There was a significant reduction of self-injury facial masks, which was very severe in vehicle-treated PK−/−/TauVLW mice and very mild in the Sativex®-treated littermates (Fig. 1D).

Effects of Sativex® on monoamine metabolism in PK−/−/TauVLW mice. Cannabinoids modulate dopamine activity and reduce reactive oxygen species production

The levels of dopamine and its metabolites in the limbic system and striatum are reduced in PK−/−/TauVLW mice [26]. The treatment of these animals with Sativex® did not change significantly the levels of dopamine but significantly reduced the metabolites of dopamine, 3,4-dihydroxyphenylacetic acid (DOPAC) and homovanillic acid (HVA) in the limbic system (Table 1) and, therefore, the metabolism of dopamine, as represented by the ratio DOPAC/dopamine and HVA/dopamine (Fig. 2A–C). The metabolism of dopamine to DOPAC and HVA is mediated by monoamine oxidase (MAO) and, as such, linked to the production of free radicals with one molecule of H₂O₂ for each molecule of dopamine metabolized. The treatment with Sativex® of PK−/−/TauVLW reduced the production of free radicals linked to dopamine metabolism in dopamine rich areas such as the limbic system and striatum. No significant differences in the levels of other monoamines and metabolites were found in other brain areas, such as the midbrain, with lower concentrations of dopamine.

Effect of Sativex® on the brain redox state of PK−/−/TauVLW mice

We further investigated the effect of Sativex® on free radicals. One reliable oxidative stress indicator is the level of glutathione, a tri-peptide with antioxidant properties. The levels of reduced GSH were significantly increased in the limbic system of mice treated with Sativex® compared to those treated with vehicle (Table 2). The treatment with Sativex® induced a mild increase in the amount of GSx as well a non-significant decrease in the GSSG in the limbic system. The treatment with Sativex® significantly increased the GSH/GSSG ratio, an indirect indicator of the reserve of free radical scavengers. No difference of these parameters was found in striatum or midbrain.

Sativex® reduces gliosis and neuroinflammation in PK−/−/TauVLW mice

We used immunofluorescence and western blot analysis to estimate the effect of Sativex® on the expression of inflammatory proteins. Theastroglial reactivity, measured as the fluorescence intensity and the area occupied by GFAP+ cells, was reduced in the hippocampus of PK−/−/TauVLW mice treated with Sativex® (Fig. 3A). The levels of GFAP were also lower in the cerebral cortex of PK−/−/TauVLW mice treated with Sativex® than in those treated with vehicle (Fig. 3B).

The activation of microglia was assessed by western blot of Iba-1 expression and by immunohistochemistry with anti-Iba1 antibody. Likewise, in our findings with astrogia, Sativex® reduced the activation of microglia.
Fig. 1. Study of motor coordination, anxiety, and auto-lesion behavior in PK−/−/TauVLW treated with cannabinoids. A) Time spent in the barrel of the “Rota-rod” in a program of acceleration as an index of motor coordination. B) Index of marbles buried in the “Marble burying test”, considered index of anxiety (score: 1 = complete marble buried, 0.75 = 3/4 buried, 0.5 = half buried, and 0 = unearthed). C) Percentage of grooming time for 5 minutes, after vaporization of water to initiate behavior of “grooming”. Values are expressed as mean ± SEM \(n=9\) for each experimental group. Statistical analysis performed by Student t test. *\(p<0.05\), **\(p<0.01\) PK-Tau treated with Sativex® versus PK-Tau treated with solvent. D) Images of the outcome of the auto-lesion facial PK-Tau behavior in control and treated mice with Sativex®. A decrease of the self-injury “masks”, related to compulsive behavior in mice treated with Sativex® can be noticed.

Table 1
Monoamine metabolism in brain regions of PK−/−/TauVLW mice treated with Sativex® or vehicle for one month

<table>
<thead>
<tr>
<th>Groups</th>
<th>Limbic System</th>
<th>Striatum</th>
<th>Midbrain</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Control</td>
<td>Sativex</td>
<td>Control</td>
</tr>
<tr>
<td>Dopamine</td>
<td>2420 ± 226</td>
<td>2250 ± 234</td>
<td>6915 ± 189</td>
</tr>
<tr>
<td>3-MT</td>
<td>218 ± 22</td>
<td>200 ± 9</td>
<td>46 ± 17</td>
</tr>
<tr>
<td>DOPAC</td>
<td>34 ± 27</td>
<td>246 ± 8</td>
<td>779 ± 32</td>
</tr>
<tr>
<td>HVA</td>
<td>314 ± 27</td>
<td>246 ± 8</td>
<td>779 ± 32</td>
</tr>
<tr>
<td>NA</td>
<td>685 ± 37</td>
<td>656 ± 48</td>
<td>522 ± 39</td>
</tr>
<tr>
<td>5-HT</td>
<td>1296 ± 80</td>
<td>1274 ± 90</td>
<td>947 ± 94</td>
</tr>
<tr>
<td>5-HIAA</td>
<td>346 ± 23</td>
<td>330 ± 25</td>
<td>216 ± 14</td>
</tr>
</tbody>
</table>

Results are expressed in nanograms per gram of fresh tissue and as percentage of controls. Values are expressed as the mean ± SEM (\(n=6\) animals in each experimental group). Statistical analysis was performed by Student t test. *\(p<0.05\) PK-Tau mice treated with Sativex® versus PK-Tau mice treated with vehicle.
Fig. 2. Cannabinoids modulate dopamine metabolism in dopamine-rich regions in PK−/−/TauVLW mice. MAO-B activity (A), MAO-A activity (B), and HVA/dopamine ratios (C) in limbic system, striatum, and midbrain. Results are expressed in nanograms per gram of fresh tissue. Values are the mean ± SEM (n = 6 mice in each experimental group). Statistical analysis was performed by Student t-test. *p < 0.05, **p < 0.01 PK-Tau-Sativex® versus PK-Tau-solvent.

PK−/−/TauVLW mice develop amyloid pathology and tau pathology [26] (Supplementary Figure 2). In order to determine the effects of Sativex® in tau pathology, we performed immunohistochemical studies in brain sections from PK−/−/TauVLW mice (4 slices/mice x 3 mice, 12 slices/group), treated with Sativex® or vehicle, with the phospho-specific anti-tau5 antibody. We observed strong anti-tau5 immunostaining in the hippocampus and cerebral cortex of these animals but the number of neuritic plaques and neurofibrillary tangles were significantly reduced in the Sativex® treated mice (Figs. 3A-B).

Next, we assessed changes in tau pathology and in the phosphorylation of proteins using biochemical methods. We performed western blots of tau with antibodies that bind to total tau, and phosphorylated tau at specific residues Ser199 and Ser202. The treatment with Sativex® reduced the levels of phosphorylated tau between 20 and 30%, in comparison with the vehicle treatment, in the cerebral cortex (Figs. 4C-D) and striatum (Figs. 4F-G). Sativex® also reduced the ratio p-GSK-3/total GSK-3 in comparison with vehicle in PK−/−/TauVLW (Fig. 4E).

Effect of Sativex® on Aβ pathology: Aβ plaques and oligomers

To determine the effects of Sativex® on Aβ pathology, we first analyzed whether this treatment altered plaque load in the PK−/−/TauVLW mice. We stained brain sections from PK−/−/TauVLW, treated with Sativex® or vehicle, with a specific anti-Aβ1-42 antibody. A widespread Aβ deposition was observed in different brain areas, including the hippocampus, less pronounced in Sativex® than in vehicle-treated PK−/−/TauVLW mice (Fig. 5A). The number of Aβ plaques in cortex and hippocampus of PK−/−/TauVLW mice was reduced in the Sativex® by 42% and 70%, respectively, in comparison with those treated with vehicle (Fig. 5B).

We measured the effect of Sativex® on Aβ oligomer levels by western blot analysis of cerebral cortex.
Table 2: Effects of Sativex® on glutathione homeostasis in brain regions of parkin−/−/tauVLW mice treated with Sativex® or vehicle for one month

<table>
<thead>
<tr>
<th>Limbic System</th>
<th>Striatum</th>
<th>Midbrain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control GSx</td>
<td>430 ± 14</td>
<td>480 ± 16*</td>
</tr>
<tr>
<td>Sativex GSx</td>
<td>587 ± 30</td>
<td>589 ± 27</td>
</tr>
<tr>
<td>Control GSH</td>
<td>14 ± 0.5</td>
<td>12 ± 0.6</td>
</tr>
<tr>
<td>Sativex GSH</td>
<td>19 ± 0.4</td>
<td>21 ± 0.9</td>
</tr>
<tr>
<td>Control GSSG</td>
<td>30 ± 1.9</td>
<td>30 ± 2.3</td>
</tr>
<tr>
<td>Sativex GSSG</td>
<td>27 ± 1.1</td>
<td>27 ± 1.1</td>
</tr>
</tbody>
</table>

Total glutathione (GSx), reduced (GSH), and oxidized (GSSG) glutathione levels expressed in microgram per gram of tissue. Values are the mean ± SEM (n=6 animals in each experimental group). Statistical analysis was performed by Student’s t-test. *p<0.05, **p<0.01 PK-Tau mice treated with Sativex® versus PK-Tau mice treated with vehicle.

Fig. 3: Glial markers and iNOS expression are decreased in cannabinoid-treated PK−/−/ TauVLW mice. A) Representative microphotographs showing GFAP hippocampus immunoreactive (scale bar = 90 μm) and the GFAP+ fluorescence area quantification (20 fields at 20× of 9–12 slices along hippocampus of 3 mice). B) Representative western blot of GFAP and the densitometric histogram in cortex (n=6 mice). C) The number and morphology of microglia cells were assessed by Iba1 staining in hippocampus and cerebral cortex. D) Activated microglia (OX-6) proteins (n=6 mice) and (E) effects of Sativex® on iNOS protein expression with their respective densitometric histogram in cortex (n=6 mice). F) Effects of Sativex® on activated microglia (OX-6) protein expression in limbic system. β-actin was used as a charge control. Values are the mean ± SEM (n=6). Statistical analysis was performed by Student’s t-test. *p<0.05, **p<0.01, ***p<0.001, Sativex®-treated mice versus control.
Fig. 4. Cannabinoid treatment decreases tau pathology in PK<sup>−/−</sup>/Tau<sub>V LW</sub> mice. A) Representative microphotograph of the hippocampus (scale bar=100 µm) and cortex (scale bar=30 µm), immunostained with tau-5 antibody. A portion of this micrograph has been magnified in the picture on the right. B) Quantification of neuritic plaques in hippocampus and cells with neurofibrillary tangles in cortex (number of neuritic plaques/slices), expressed as the mean ± SEM (9-12 slices/group of 3 mice). Representative western blot and densitometric analysis of total tau levels with anti-tau-5 (C), phosphorylated tau (phospho S199 + S202) (D) and representative western blot of GSK-3α (pY279)/β (pY216)/total GSK3 in cortex (E). Representative western blot of total tau levels (F) and phosphorylated tau (phospho S199 + S202) (G) in the striatum. The values are expressed as the mean ± SEM (n=6 mice in each experimental group). Statistical analysis was performed by Student’s t test. *p < 0.05, **p < 0.01, ***p < 0.001 Sativex®-treated mice versus control.

The treatment with Sativex® reduced the levels of Aβ oligomers in PK<sup>−/−</sup>/Tau<sub>V LW</sub>, in comparison with vehicle-treated animals (Figs. 5C-D).

Effects of Sativex® on the expression of chaperone Hop-70 protein, mitochondrial function, and autophagy markers

The levels of Hop-70, a chaperone protein that increases in situations of stress, were significantly lower in PK<sup>−/−</sup>/Tau<sub>V LW</sub> mice treated with Sativex® than in those treated with vehicle (Fig. 6A). Cytochrome c oxidase subunit IV (Complex IV) is a mitochondrial protein and an index of energy production. Western blots obtained from lysates from the cerebral cortex of PK<sup>−/−</sup>/Tau<sub>V LW</sub> mice showed higher levels of this Complex IV protein in Sativex® than in vehicle-treated mice (Fig. 6B), suggesting a higher metabolic activity.

The SQSTM1/p62 protein (hereafter referred to as p62), an endogenous autophagy substrate, is widely used to monitor the activation of autophagy. P62 has an ubiquitin-associated domain which is capable of interacting with ubiquitinated proteins and a LC3-interacting region and with LC3. In addition, p62 can transport ubiquitinated protein targets to autophagosomes that are destined for degradation. The amount of endogenous p62 protein was found to be lower in Sativex® than in vehicle-treated PK<sup>−/−</sup>/Tau<sub>V LW</sub> mice (Fig. 6C), indicating that Sativex® activates the
autophagic degradation pathway. In addition, other changes in the expression of components related to the autophagy pathway were monitored. Immunoblot assays revealed that Sativex® increased the turnover of LC3-I to LC3-II, a phosphatidylethanolamine-conjugated form of microtubule-associated protein 1 light chain 3 (LC3), as compared with vehicle control-treated mice (Fig. 6D), indicating that Sativex® induced autophagy in PK−/−/TauVLW mice. Beclin-1 is a component of the class III PI3 kinase complex and is required for autophagy initiation by various stimuli, such as nutrient starvation, hypoxia, growth factor withdrawal, and rapamycin treatment. The level of beclin-1 was markedly increased in Sativex® PK−/−/TauVLW treated mice (Fig. 6E).

These results suggest that Sativex® reduces the tau and amyloid pathology in PK−/−/TauVLW brain through reduction of free radicals, enhancement of mitochondrial activity, and stimulation of autophagy.

DISCUSSION

We have used PK−/−/TauVLW mice, as a model of complex neurodegenerative disorders, to test the neuroprotective effects of Sativex®, a cannabinoid-based medicine already approved for clinical use, in complex neurological conditions. PK−/−/TauVLW mice display clinical features and pathological lesions similar to those observed in patients with frontotemporal dementia, parkinsonism, and lower motor neuron deficits; a syndrome that could be due to hereditary tauopathies as well as to mutations of other genes such as progranulin, TDP-43, and FUS [39]. In this animal model of multi systemic neurological disorders, we...
Fig. 6. Autophagy and reactive oxygen species related mechanisms of cannabinoid effects on PK −/−/TauVLW mice pathology. HSP-70 (A), Complex IV (B), P62 (C), and LC3II/I (D) ratios and Beclin protein expression (E). β-actin was used as charge control. Data are expressed as the mean ± SEM (n = 6 mice in each experimental group). Statistical analysis was performed by Student t test. **p < 0.01 Sativex®-treated mice versus control.

We have observed that Sativex® improves behavioral features, dopamine metabolism, oxidative stress, and glial function as well as tau and amyloid pathology. Behavior features improved by Sativex® were those mostly related with anxiety, such as self-injure behavior and facial masking, symptoms of involvement of the limbic system, which is one of the areas most severely involved in frontotemporal dementias. These effects are in agreement with the known role of cannabinoids in modulating emotional and non-emotional memory processes in the hippocampus [40]. In addition, the role of cannabinoids in mood and anxiety disorders has been described [34–36].

We also observed that these behavioral changes are associated with a reduction in dopamine metabolism, most importantly in the limbic area. Treatment with Sativex® also improved the oxidative stress observed in the PK −/−/TauVLW mice; the levels of proteins involved in mitochondrial energy production and normalized the levels of chaperones. Sativex® reduced astroglial and microglial activation. These effects could be mediated in part through CB2 receptors [9–11, 41, 42] and also through the improvement of the redox state. Free radical donors, including NO, compounds that were reduced by treatment with Sativex®, are known to activate glia [43].

Several mechanisms of action could explain the effects of Sativex® on PK −/−/TauVLW mice. Cannabinoids modulate dopamine activity, an effect mediated by CB1 receptors [44]. In addition, cannabinoids directly inhibit MAO activity in the mitochondria [45], in a receptor independent function. This inhibition of mitochondrial MAO could reduce free radical production by mitochondria and improve mitochondrial function.

Sativex® had an impressive effect on tau and Aβ pathology in PK −/−/TauVLW mice. The mechanisms of this effect appear to be related with potentiation of autophagy, without excluding other possibilities, such as improvement of the redox state. Excess tau, which
is present in some human fronto-temporal dementias and in PK−/−/TauLW mice, blocks the intracellular traffic of organelles, diminishes axonal transport, and impairs microtubule dynamics [46–49]. Autophagic vesicles accumulate in large numbers when fusion of autophagosomes with lysosomes is slowed by disrupting their transport in microtubules with vinblastine or nocodazole [50, 51]. Therefore, mutated tau overexpression may impair autophagy affecting microtubular transport of autophagic vesicles. Parkin suppression alters tau aggregation, degradation, and solubility in the brain of aged mice [38]. Parkin is protective for nigro-striatal dopamine neurons in a tau gene transfer neurodegenerative model [52]. Not surprisingly, parkin also protects dopamine neurons against microtubule-depolymerizing toxins [53]. Parkin and tau interaction has been described after overexpression of both proteins [54]. The protective effects of Sativex® on amyloid and tau pathology in PK−/−/TauLW mice may be mediated, at least partially, by autophagy induction. Sativex® increased LC3-II levels and beclin expression. On the other hand, Sativex® decreased p62 levels in cerebral cortex. In addition, we have shown decreased levels of tau and p-tau in different brain regions. This indicates that Sativex® not only affects autophagy induction, but could also improve the process of autophagosome-lysosome fusion or the lysosomal degradative activity.

Tau ubiquitination, however, takes place with the complex CHIP-HSP70, but not with parkin [54–56]. Therefore, the protective effects of parkin on tau pathology would most likely be mediated by autophagy rather than by the ubiquitin-proteasome system. In fact, in primary neuronal cultures, the increment in tau and pS2 levels after proteasome inhibition with epoxomicin is prevented in parkin-null cultures by compensatory stimulation of autophagic activity. The greater resistance of parkin null cultures to mild proteasome inhibition is eliminated by inhibition of autophagy [57].

In conclusion, Sativex® has significant neuroprotective effects in this complex model of neurodegeneration, thereby making it a promising therapeutic agent in multi-systemic neurological disorders.

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