



# Retinal Progenitor Sheet Transplants to Rats with Retinal Degeneration – Circuitry between Transplant and Host



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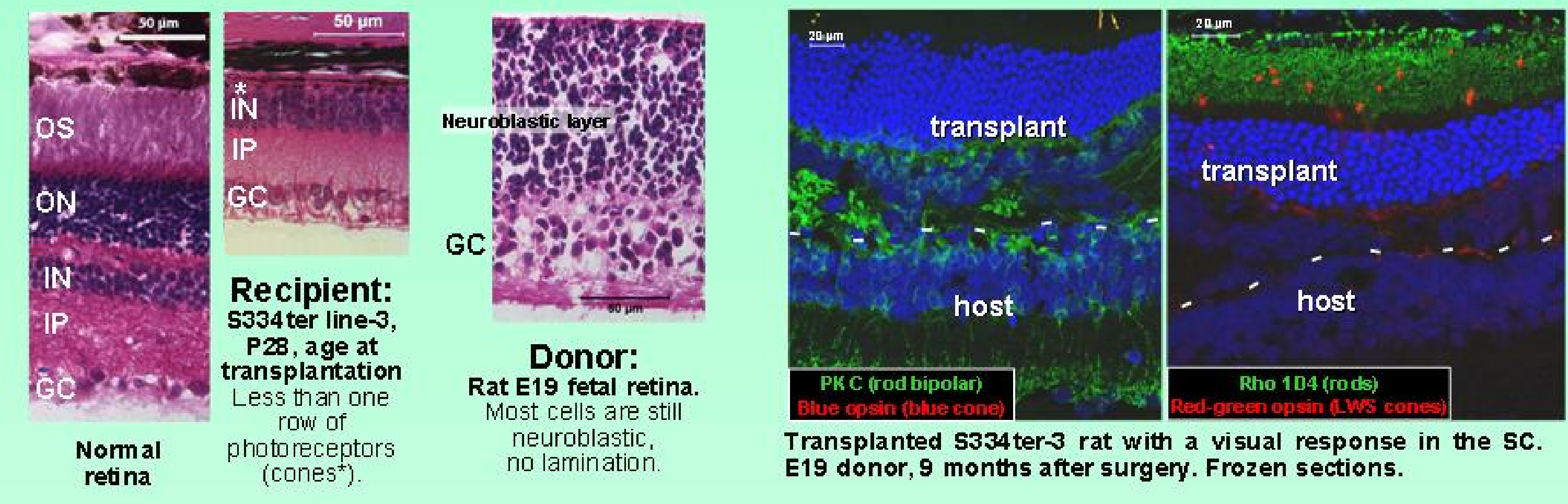
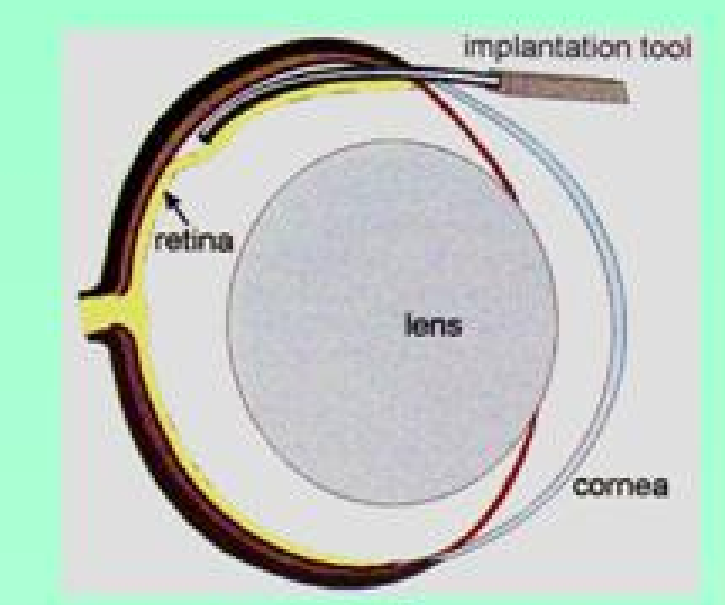
## PURPOSE

To investigate the transplant and host circuitry in long-term retinal progenitor sheet transplants that can restore visual function in rats with retinal degeneration.

## Background

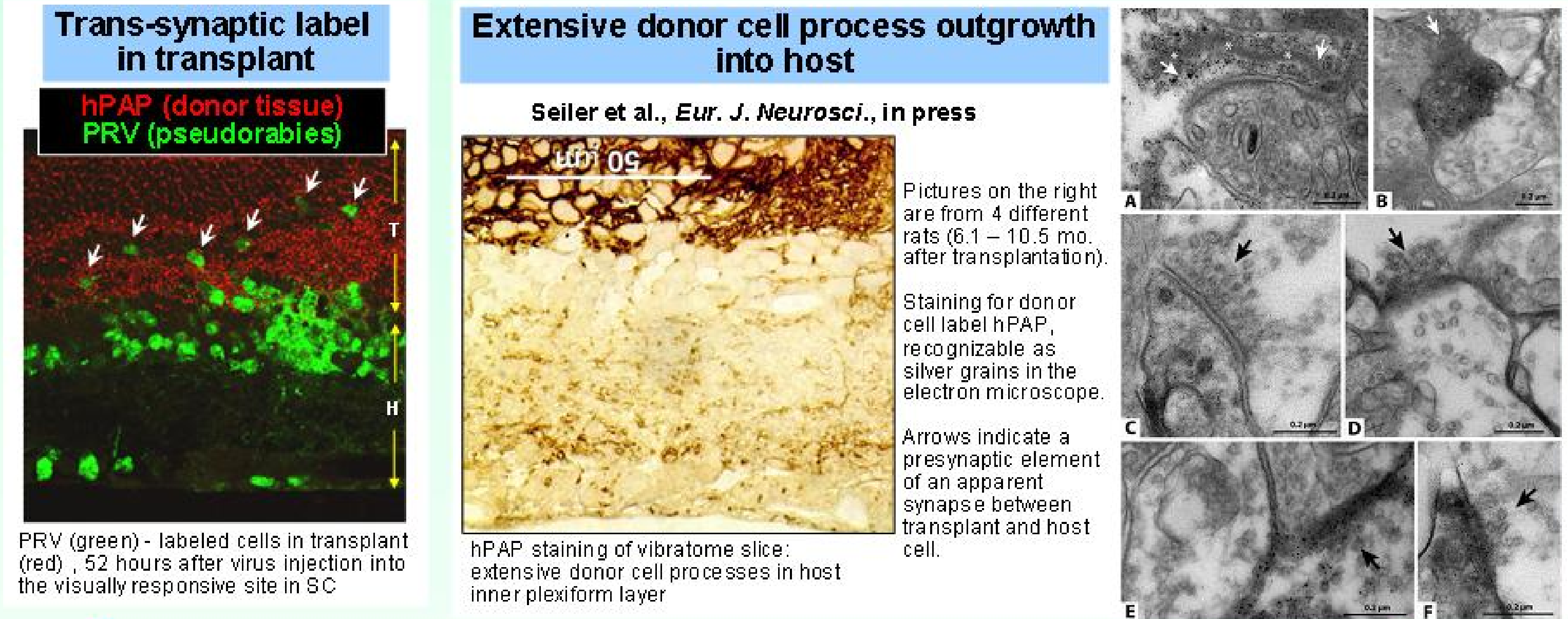
### Transplantation of retinal sheets

Sheets of retinal progenitor cells can be transplanted to the subretinal space of different rodent retinal degeneration models and develop lamination like a normal retina.



Transplants can restore visual responses:

- Transplants preserve optokinetic responses (Thomas et al. 2004, *J Neurosci Meth*, 138:7-13)
- Light stimulation of the eyes can be recorded in the brain according to the retinotopic map (e.g., Seiler et al. 2008, *Eur J. Neurosci*, 28:208-220)
- Transplant neuronal cells can be labeled from the visually responsive site in the brain by trans-synaptic tracing (using labeled neurotropic pseudorabies virus)
- Transplants invade the host retina with processes which form synapses in the host inner plexiform layer (Seiler et al., *Eur J. Neurosci*, in press)



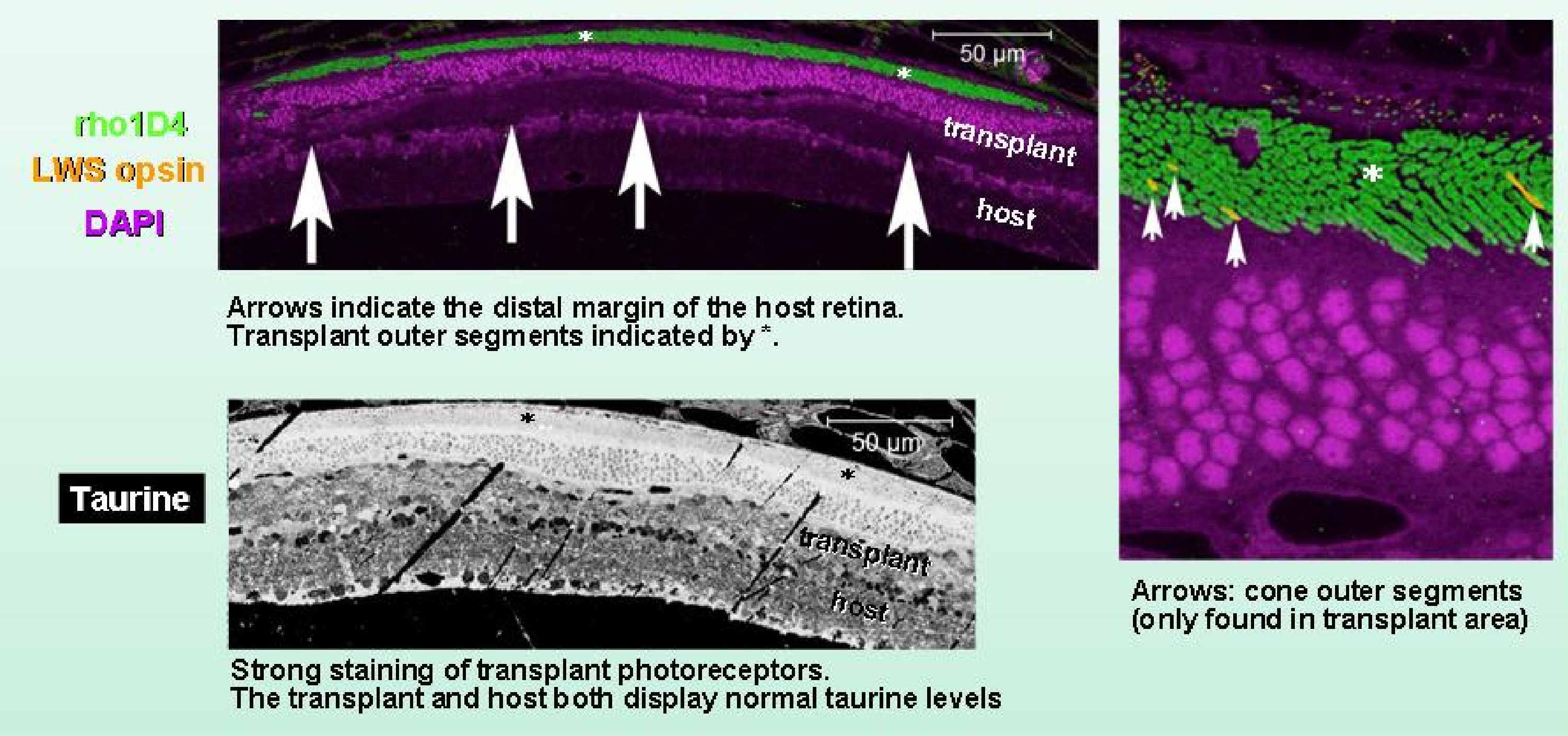
We need to know which specific cell types are involved in the circuitry between transplant and host retina.

## Methods

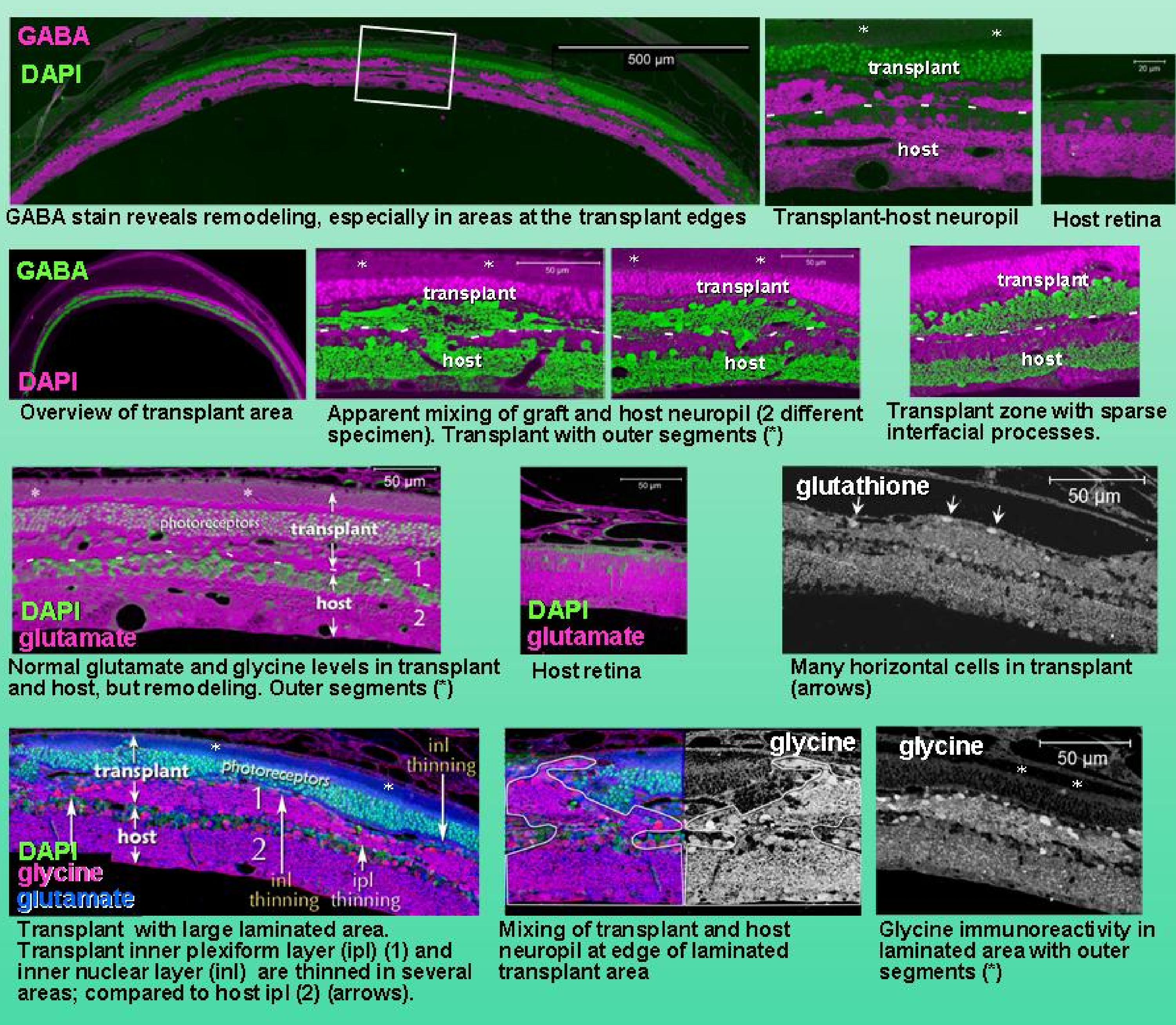
- 1. Transplantation**  
S334ter-line-3 rats with fast retinal degeneration received E19 retinal progenitor sheet transplants derived from hPAP (human placental alkaline phosphatase) expressing rats at the age 0.8 - 1.4 months. Some donor retinas were coated with BDNF microspheres or GDNF microspheres before implantation (Seiler et al. 2008). Rat eyes were imaged by 3D-Ocular Coherence Tomography (OCT) 0.4 - 2.2 months after surgery to determine transplant placement and layering. Fourteen transplanted rats (2 retina-only, 7 retina + GDNF, 5 retina + BDNF transplants) were selected for this analysis, based on Ocular Coherence Tomography (OCT) results, and sacrificed at 2.3 - 8.5 months after transplantation (age 3.4 - 9.9 months).
- 2. Tissue processing**  
Rats were perfused through the ascending aorta with 2.5% glutaraldehyde, 1% paraformaldehyde, 3% sucrose, 1mM MgSO<sub>4</sub> in 0.1M phosphate buffer. Eye cups were postfixed overnight after removal of the cornea and embedded in 4% agarose for vibratome sectioning. Selected vibratome slices were flat embedded in Eponate.
- 3. Immunohistochemistry for Molecular Phenotyping**  
Blocks were sectioned into serial ultrathin datasets and probed for aspartate, glutamate, glycine, glutathione, glutamine, arginine, taurine, GABA, rhodopsin, cone opsin, CRALBP, and DAPI (procedure after Jones et al. 2003 (*Comp. Neurol.* 464:1-16). [http://prometheus.med.utah.edu/~marclab/protocols\\_CMP.html](http://prometheus.med.utah.edu/~marclab/protocols_CMP.html)

## 1 Photoreceptors (rods and cones)

In all specimen, rhodopsin+ and cone opsin+ structures were limited to the transplant region. There was never any opsin immunoreactivity (1D4 rho or LWS) in the host retina.



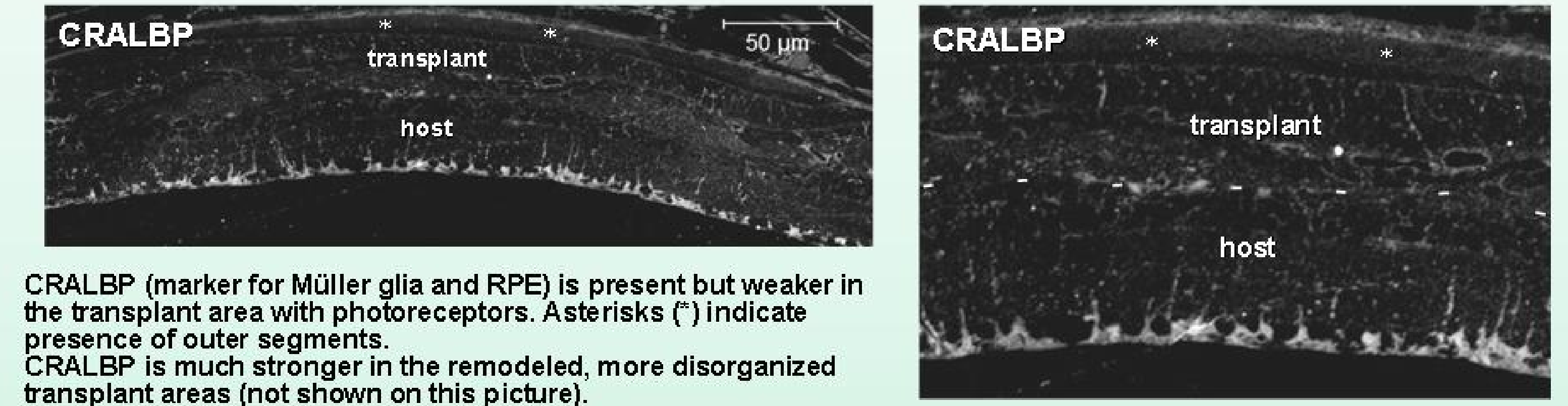
## 2 Inner retinal neurons (GABA, glutamate, glutathione)



The transplant and host both display normal GABA, glutamate, glycine and glutathione levels. There is extensive remodeling, especially in regions of the transplanted retina at the transplant edges that has lost its photoreceptors.

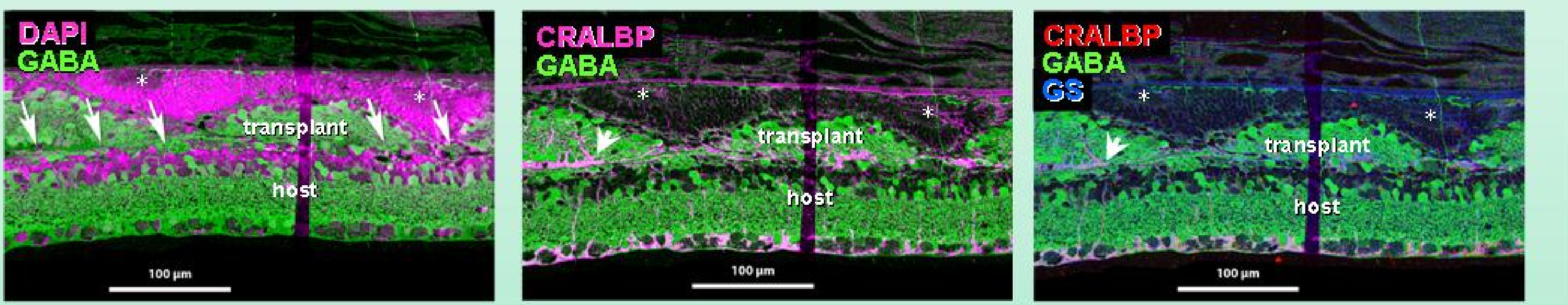
## RESULTS

## 3 Glial markers (glutamine synthetase, CRALBP) and neuronal marker (GABA)



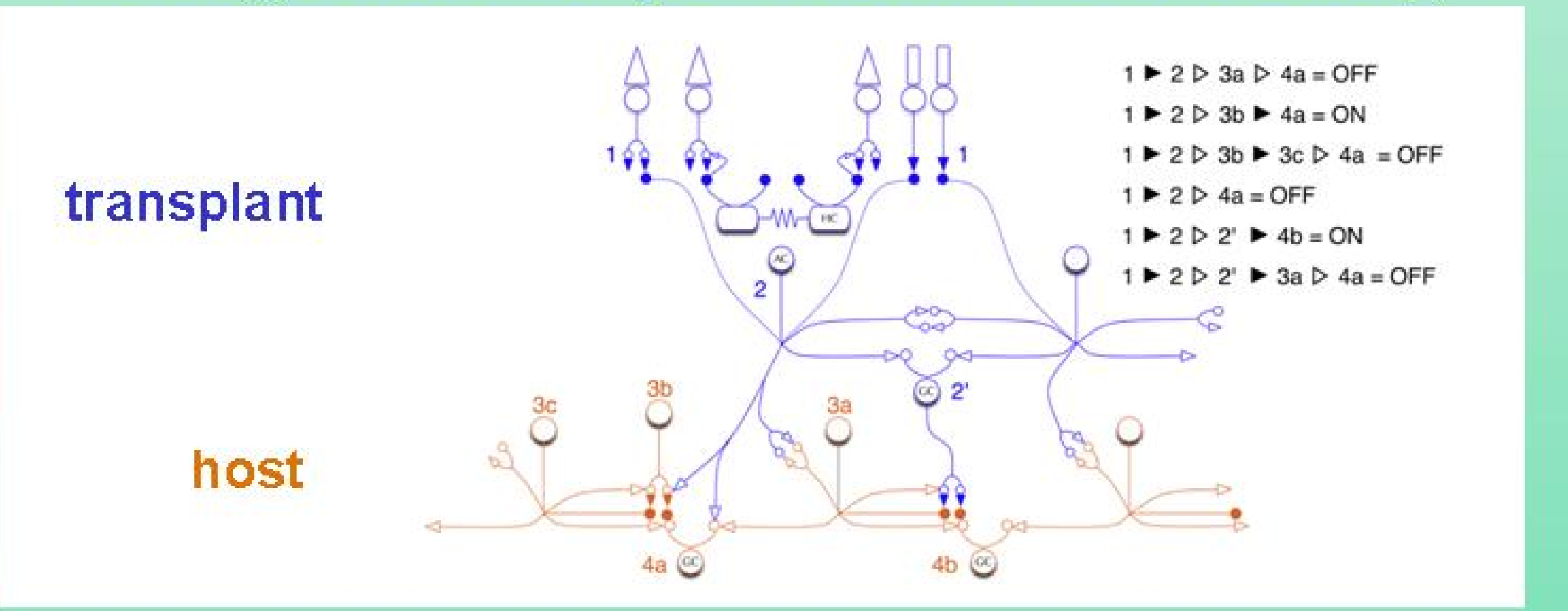
CRALBP (marker for Müller glia and RPE) is present but weaker in the transplant area with photoreceptors. Asterisks (\*) indicate presence of outer segments. CRALBP is much stronger in the remodeled, more disorganized transplant areas (not shown on this picture).

In the region with two inner plexiform layers, there is often a wide glial seal between the host and transplant. However it is clearly interrupted in spots and there are processes passing between host and transplant.



Transplant area showing some disorganization, imaged with 3 different marker combinations. Arrows indicate transplant-host interface. Glial seal on left side (arrow head in middle and right picture) is interrupted through most of the area, and neural processes crossing the transplant-host interface can be seen.

## 4 Diagram of possible circuitry



## CONCLUSIONS

- Transplants contain healthy rods and cones with outer segments whereas the host photoreceptors are degenerated.
- Loss of neurons, including bipolar cells, was observed in the transplant inner nuclear layer.
- In many areas, host and graft neuropil are mixed with no glial barriers between transplant and host.
- Donor and host amacrine cells (glycine, GABA) are likely the main cell types involved in the communication between transplant and host.

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**Abbreviations:**  
H – Host  
T – Transplant  
GC – Ganglion cell layer  
IP – inner plexiform layer  
IN – inner nuclear layer  
ON – outer nuclear layer  
OS – outer segments  
RPE – retinal pigment epithelium  
hPAP – Human placental alkaline phosphatase (donor marker)  
CRALBP – cellular retinaldehyde binding protein  
GS – glutamine synthetase

**References:**  
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Jones et al. 2003, *Comp. Neurol.* 464:1-16  
Jones & Marc 2005, *Exp. Eye Res.* 81:123-137  
Marc et al. 2007, *IOVS* 48:3364–3371  
Seiler et al. 2008, *Exp Eye Res.* 86:92-104  
Seiler et al. 2008, *Eur J. Neurosci*, 28:208-220  
Seiler et al., *Eur J. Neurosci*, in press