# MODULE A

### ELECTRICAL SYNAPSE

- Current (ions) flows via GAP junctions
- Very fast; almost instantaneous.

### CHEMICAL SYNAPSE

- Greater gap b/w pre and post syn mem: *synaptic* cleft
- Neurotransmitter secretion:
  - → Caused due to Ca2+ influx via voltage-gated channels.
  - → Increase in Ca2+= fusion of pre syn and plasma membrane
  - → Releases content.
- 1. Transmitters synthesised and stored in vesicles.
- 2. Action potential.
- 3. Depolarization of pre-syn = Ca2+ voltage gated channels open.
- 4. Influx of ca2+
- 5. Ca2+ causes vesicles to fuse w/ pre-syn.
- 6. Neurotransmitter is exocytosed into the pre-syn cleft.
- 7. Trans binds to receptor on post syn mem.
- 8. postsynaptic mem opens/ close -> inhibitory or excitatory response.

### WHAT DEFINES A NEUROTRANSMITTER

- 1. MUST be clearly present w/in pre-syn neuron
  - Can't sec w/o it being there
- 2. MUST be released bc of depolarization + Ca2+ dependant.
  - Needs ca2+ influx to be released.
- 3. MUST have spec receptors on the post syn membrane.

### Lecture: 1 TOPIC 1

### Axons:

- connect to other neurons
- Polarised cells
- Outgoing info
- Presynaptic
- Most common neurotransmitter: GLUTAMATE.
- Active zone
- Synthesise vesicles
- Release neurotransmitters ( E info  $\rightarrow$  chemical)

### Dendrites:

- Site of synapse
- Incoming info
- Postsynaptic density: increased conc of proteins. High in plasticity.
- Receptors for neurotransmitters (chem info  $\rightarrow$  Electrical info).

### Synapse:

- Highly specialized sites of contact.
- Rapid communication of info (millisec)
- Transform electrical info to chemical and back to electrical. ( $E \rightarrow C \rightarrow E$ )

### **SNAREs Protein**

- Some on vesicles and post syn mem
- Twirl/intertwine and ensure fusion of both occurs.
- Ca2+ enters + induces Synaptotagmin + synaptobrevin (on vesicles) to intertwine with syntaxin + SNAP-25 (on presyn)
- Important in regulating neurotransmitter transmission
- Does not work properly in Autism

# **POST-SYN RECEPTORS**

- ligand-gated ion channels = rapid
- G-protein coupled receptors = modulatory // regulate things on a longer timeframe.

### INHIBITORY

- Medicated by interneurons\*
- \* always inhibitory.
- Don't release glutamate: -releases GABA\* and Glycine
- Don't release glutamate
  - → releases GABA\* and glycine
  - → Permeable to Cl-
- Causes hyperpolarization of resting membrane potential.

### EXCITATORY

- Mainly glutamate (90%)
- 3 receptors:
  - $\rightarrow$  AMPA\*\*\* ion channels, different channel properties.
  - → NMDA\*\*
    - → mGluR\*

activates 2nd messengers.

**AMPA:** only perm to Na+ and K+

NMDA: Mainly perm to Ca2+

- Voltage-gated.
- At rest: Blocked by Mg2+
- Depolarised: Mg2+ unbound and Ca2+ can enter.
- Needs pre & post syn membrane to DEPOLARISE to open: "coincidence detector"
- Increased level of activation of pre & post; increase in the magnitude of Ca2+ influx.

#### Lecture: 2

### MEASURING SYNAPSE FUNCTION:

- Electrical stimulation of presyn axon = action potential + glutamate release.
- Current flows measured electro physically.

- Gives a measure of synaptic function.
  - → Transmitter release (axons)
  - → Postsynaptic current flow (how much).

### FIELD RECORDING/ EXTRACELLULAR RECORDINGS:

- Recording electrode **amongst** synapses formed b/w incoming *axons* + *postsyn neurons*.
- Measures loss of positive ions (mainly Na+) as they move from extra synaptic space to postsynaptic.
- Measures the **strength** of syn from a **POPULATION** of neurons.
- Feedback from large # of cells.
- Loss of positive ion = downwards deflection
- Shows level of synaptic activity/strength

# WHOLE CELL (patch clamping) RECORDINGS:

- Electrode attached to **specific** neuron
- Becomes 'part' of neuron
- Measures current flow **into** neurons.
- Gives a measure of the strength of syn from **individual** neurons.
- Anything a neuron does; can be seen electrically.
- Specific info:
  - → AMPA/NMDA receptor activated (what ion channels involved)
  - → excitatory/inhibitory transmission

### MEASURING AMPA RECEPTORS:

- Always opens upon glutamate binding
- Postsynaptic mem is close to ~65mV
- Current flow can be measured through AMPA receptors
- Downwards deflection (diagram) means a current is coming *INTO* cell.
  - → Regardless of whether it's excitatory or inhibitory.
- EPSC

### PLASTICITY:

- Ability of synapse to change their strength in response to specific neuronal info.
- Can be increased or decreased.
- Affects the size and strength of current.
- Studied via hippocampal slice prep

### Stimulation that leads to:

↑ in strength = LTP → current goes from weaker to stronger ↓ in strength = LTD → current goes from stronger to weaker \*both underlie memory formation @ subcellular level.

### HIPPOCAMPUS STUDY:

- Dissect -> keep in oxygenated, artificial cerebrospinal fluid.
- Slices stay viable for hours

- Stimulation of specific axonal pathways + recordings from specific postsyn pyramidal cells in certain area.

### Trisynaptic loop: measure synaptic transmission in the hippocampus

- 1. Perforant path: entorhinal cortex to dentate gyrus\* *first site of LTP discovery*.
- 2. Dentate gyrus neurons (granule cells project mossy fibres) to CA3 pyramidal neurons
- 3. CA3 pyramidal neurons (project Schaffer collaterals) to CA1 pyramidal neurons

#### Lecture 3:

### LONG TERM POTENTIAL (LTP):

- Increase in strength
- Only occurs if paired activities of pre-syn & post-syn cells are tightly linked in time.
- Strong post-syn depolarisation occurs w/in 100 m/s of pre-syn release.
- Shows *input specificity*:
  - → If one neuron is induced by the stim, the other inactive + uncontacted synapses are unaffected.
  - → Only stimulated synapse are potentiated
  - → Restricted to ACTIVATED cells only.
- Associativity:
  - → Weak stim doesn't itself cause LTP
  - → One weakly activated pathway + strongly activated the neighbouring pathway = both undergo LTP.
  - $\rightarrow$  LTP req both depolarisation of post syn cell + pre syn to release glutamate.
  - → ^ like NMDA receptors
- □ LTP=  $\uparrow$  in syn strength
- □ Measured = amplitude of post syn AMPA receptor current.

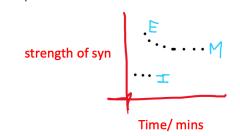
### 3 PHASES:

- Induction: stim that causes ↑ in syn strength. \*
- 2. **Expression:** how synapse strength is  $\uparrow$
- 3. **Maintenance:** how the syn strength is maintained.
- \*LTP **<u>NEEDS</u>** NMDA for induction phase.
  - LTP induction is Ca2+ influx via NMDA receptor dependent.
  - ... both need to occur simultaneously.

# **PROPERTIES OF LTP:**

- Input specificity.
- Associativity.
- Saturable: stimulated neurons can only be stimulated up to a MAXIMUM level.

### HOW IS LTP INDUCED:

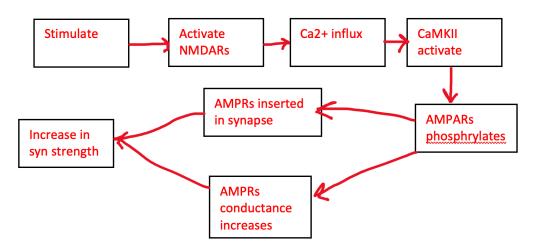


- **TETANIC STIM:** brief burst of  $\uparrow$  freq stim (100 Hz) for 1 min to presyn axon.
  - →  $\uparrow$  # of glutamate receptors.
  - →  $\uparrow$  AMPA receptors.
  - $\rightarrow$   $\uparrow$  in Na+
  - → more/faster depolaristion of post syn neuron.
  - **PAIRING:** stim 1 Hz/ sec + postsynaptic depolarization via current injection for 1 min.
- THETA BURST STIM: Theta rhythm (6-10 Hz oscillations).
  - $\rightarrow$  Mimics the freq in the hippocampus.
- ALL HAVE THE SAME PURPOSE: induce LTP by activating presyn (via glutamate release) and depolarise postman @ SAME TIME.

#### AMPA RECEPTORS + CaMKII:

- CaMKII = calcium calmodulin dependant protein kinase II.
  - → Phosphorylates. (↓ after Ca2+ influx)
  - → CaMKII phosphorylates AMPA receptors.
  - → CaMKII injection in post syn is adequate to induce LTP
  - → Makes up 2% of total proteins in neurons.
  - → S831p is a major site of CaMKII phosphorylation.
- □ Makes conduction of existing AMPA receptors.
  - Phosphorylation ↑ AMPA receptor conductance.
- $\Box$   $\uparrow$  in # of AMPA receptors @ post syn neuron.
  - ↑ synapse strength ∴ ↑ in LTP.

### LTP SUMMARY:



#### Lecture 4:

### LONG TERM DEPRESSION (LTD):

- Induces  $\downarrow$  in syn strength.
- $\downarrow$  in size of amplitude of AMPAR current.
- Prevents saturation
- LFS: low freq stimulation

### HOW IS LTD INDUCED:

- Extended period of ↓ freq (1 Hz) over a long period of time @ presyn axon.
  causes depression in the population of post syn neurons.
- LFS NOT accompanied by large depolarisation.

### **PROPERTIES OF LTD:**

- Input specific: only neurons stim w/ 1Hz are depressed.
- NMDAr induced Ca2+ influx dependent.
  - application of NMDA blockers (eg. APV) during LTD induction blocks LTD.

# Ca2+ INFLUX TRIGGERS LTP & LTD:

- When LTD induced:
  - → Post syn is WEAKLY depolarised;  $\downarrow$  Ca2+ influx.
  - → LTP = more depolarised  $\therefore$  more Ca2+ influx.
- LTP or LTD = depends on LEVEL of Ca2+ influx vida NMDAR.

### PHOSPHATASES (LTD):

- Prolonged levels of ↓ Ca2+ levels activates protein PHOSPHATASES.
- Opposite action of protein kinases.
  - → Dephosphorylation of AMPAR.
  - → Leads to removal of AMPAR @ post syn. \**unanchored, endocytosed back into cell via clathrin-dependent endocytosis.*
  - →  $\downarrow$  # of AMPAR
  - →  $\downarrow$  current.

### **LTP:** = ↑ depolarisation

= : 1 Ca2+ influx(HFS)

**LTD:** =  $\downarrow$  depolarisation

- =  $\therefore \downarrow$  Ca2+ influ**(LFS)**.
- = long, slow stimulation.

= phosphatase activation  $\rightarrow$  dephosphorylation of AMPAR  $\rightarrow$  loss of high conductance AMPAR.

# PLASTICITY & MEMORY:

- LTP & LTD can be induced in awake, behaving animals.
- Contralateral hippocampus provided excellent control.
- LTP/LTD can be induced w/ brief trains of stimulation.
- \*mimic real life currents.
- Robustly expressed in all major pathways.
- Agents that block LTP & LTD also prevent/ block spatial learning. (*presence of NMDA blockers*)
- Genetic removal of CaMKII gene prevents LTP + induces learning deficits in rodents.
  Smart mouse = \# CaMKII & NMDAR.
- LTP & LTD lasts for long periods of time (months).

#### Lecture 5: TOPIC 2

### **BRAIN CELLS & RECEPTORS:**

#### GLIA, aka neuroglia: create the myelin sheath.

- Oligodendrocytes
- Astrocytes
- Microglia: immune sys cells.

#### MICROGLIA CELLS:

- Immune cells (innate immune system)
  - → monocytic/myeloid origin.
- Express diff immunological markers.
- Brain's "professional phagocytes"
  - → Extremely good/ experts.
  - → Designed to recognise debris
  - $\rightarrow$   $\uparrow$  # of receptors.
- Mobile.
- Secrete proinflammatory cytokines; may present antigens (APC).
- Types:
  - 1. Perivascular
  - 2. Foamy
  - 3. APC via MHC
  - 4. Activated (inflam)
  - 5. phagocytic/ non-phagocytic.
  - 6. Ramified.
- CD163- scavenger receptor.
- Elude to cellular function; but highly context dependent.
  - → Some microglial cells have a subset

### POTENTIAL THERAPEUTIC TARGET:

1.

# a) Phagocytosis

- b) inflammatory response
- c) Suppression of APC activity
- 2.
- a) Microglia = functionally heterogeneous
  - Target specific,
  - APC vs phagocytic functioning.
- b) Drugs targeting the brain  $\Rightarrow$  get across BBB.
- →NO CURRENT DRUGS

### ASTROCYTES:

- Support for neurons: always @ synapses.
  - → Neurotransmitter: clearance/levels/production.
  - → Nutrient supply, H2O removal.

- → O2 provider.
- Maintenance/ support of the neurovascular unit.
  - → Important source of neurotrophic factors.
  - → Progenitor qualities/ capabilities.
  - Have immunological functions too (innate immunity).
  - → During neuroinflammation.
- Actively migrate towards injury.
- Produce cyto/chemokine\*.
  - → MCP-1, IR10, IL-8, MIP1

\*chemokines = attract other immune cells.

- Produce neurotrophic factors  $\rightarrow$  help in protecting neurons from cell death
  - Express **GFAP** glial fibrillary acid protein.

→ Used to stain for astrocytes.

- Astrocytes wrap around neurons = forming complex network.
- Loss of neuronal support cells = :(
- Loss of vascular integrity = :(
- Produce neurotrophic factors
  - → CDNF \*important growth factors for neurons
  - → NGF
  - → FGF
  - → VEGF
- Important for neuroinflammation
  - → Very plastic/dynamic cells

# Lecture 6:

### DISEASES:

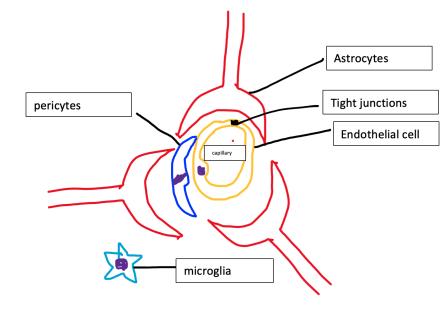
- Neurons = alzheimers
- Astrocytes = astrocytoma
- Microglia = anti MG antibiotics in AD patients.
- Endothelial cells = stroke, vascular disease
- Oligodendrocytes = infections, multiple sclerosis

# NEUROVASCULAR UNIT + B.B.B:

- Brain's highly vasculated
- Small capillary: 20µm
- Large vessels: 100-150µm
- Every neuronal cell is w/in 200μm of vessels

# NVU

- endothelial cells + pericytes + astrocytes + perivascular macrophages
- Tight junctions between endothelial cells



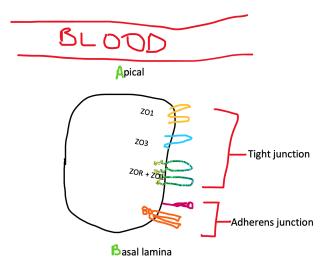
- Side facing blood = apical

### TIGHT JUNCTIONS: selective barrier

- Occludin
- Claudin

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- ZO-1 (zonula occludens)
- JAMS (junctional adhesion molecules)
- \*form paracellular space



### B.B.B & NEUROINFLAMMATION:

- Neurons don't survive well during inflammation
- T-cells survey (@ low frequency) for inflammation, infection, cancer
- Cytokines, IL-1/ TNF-α (by microglia)
  - → Upregulate cell adhesion (apical side) molecules
  - → Immune cells have to go through vasculature L.T.S.D
  - → Leukocyte-endothelial interaction
  - → Tethering/rolling
  - → Strong adhesion
  - → Diapedesis/extravasation
- VCAM-1 & ICAM-1 important endothelial cell adhesion molecules
  - → Promotes strong interaction w/ blood leukocytes
- Important for brain immune cells

### Lecture 7

### ENDO Cell Adhesion Molecules interacting w/ LEUKOCYTE CAM:

#### ENDO CAM

- ICAM-1
- VCAM-1
- E-Selectin
- P-Selectin
- CD99
- CD31

#### LEUKOCYTE CAM

- CD11a, CD11b, CD11c (LFA)
- CD49D/ CD29 (VLA4)
- CD15 & CD162
- CD24 & CD162
- CD99
- CD31

# MULTIPLE SCLEROSIS:

- Autoreactive disease → T-cells destroy *oligodendrocytes* (produce myelin sheath for neuronal axons)
- Immune cells almost "absent" in normal CNS but in large numbers in M.S
- M.S = chronic inflammation

- Vessels enlarged + inflamed
  - → Express ↑ amounts of adhesion/cytokines
- T-cells  $\Rightarrow$  antigen specific to *myelin*.

#### DRUGS & B.B.B:

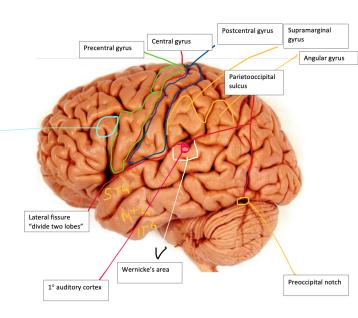
- Difficult to get through (lipophilic molecules can easily get through) \_
  - → a) passive diffusion
  - → b) ABC transporter EFFLUX
  - → c) solute carriers SLC
- Smaller drugs eg. paracetamol/NSAIDs can readily get through BBB
  - → Caffeine: adenosine R-antagonist
  - → Alcohol: NMDA/GABA receptor
  - → Cocaine: Blocks dopamine transporter
  - → Cannabis: CB1/CB2 receptors + others
- Larger drugs = excluded
- Most drugs excluded by endothelial export transporters & BBB tightness.

Brocha's area

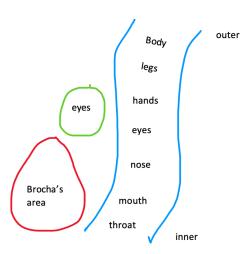
#### Lecture 8: TOPIC 3

#### **REVISION FROM MEDSCI142:**

- Left Hemisphere: dominant for language
- Right Hemisphere: spatial awareness, face recognition etc
- Precentral gyrus: 1° motor cortex
- Postcentral gyrus: 1° sensory cortex  $\rightarrow$ peripheral sensations
- 1° visual cortex: take sight in + organise the visual field
  - → Rest of occipital lobe: understand visual field



- 1° auditory cortex:
  - periphery sound  $\rightarrow$  pick up
    - sound + orders it according to tone
      - → Tonotopic rep of sound
- Wernicke's area: figures/understands WORDS
  - → Interprets sound // tonopic rep
- Temporal association cortex: Memory + anger
- Supramarginal Gyrus: reading
  - → Eye movements + understanding
- Angular Gyrus: Writing



- Primary motor cortex