



Commentary: Immunochemical Markers of the Amyloid Cascade in the Hippocampus in Motor Neuron Diseases

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A Commentary on

Immunochemical Markers of the Amyloid Cascade in the Hippocampus in Motor Neuron Diseases

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In case we needed reminding, age-related neurodegenerative diseases such as Alzheimer's disease (AD), Parkinson's disease (PD), and motor neurone disease (MND) have two factors in common: (i) advancing age as the single biggest risk factor and (ii) the fact that they are characterized by neuronal degeneration. A recent article (1) encourages us to focus on some of the similarities of these diseases by demonstrating that features characteristically associated with AD are also commonly found in MND.

In their study (1), the group measured key biomarkers of the amyloid cascade [amyloid precursor protein (APP), transactive response DNA-binding protein 43 (TDP-43), phosphorylated TDP-43 (pho-TDP43), amyloid-beta peptide (A β), and amyloid precursor protein-binding protein family B (Fe 65)] immunohistochemically in postmortem samples of the hippocampus of amyotrophic lateral sclerosis (ALS) and ALS-frontotemporal dementia patients. Compared to controls, they report increased levels of APP and A β peptide in MND patients; the latter change also correlating with cytoplasmic pho-TDP-43 expression. In addition, they found decreased Fe65 expression and increased expression of pho-tau. Interestingly, these molecular alterations were similar for both ALS and ALS-FTD, albeit more pronounced in the latter group. This indicates that the "amyloid cascade," resulting in the accumulation of amyloid β , is activated in the hippocampus of patients with ALS and ALS-FTD, and that such activation correlates with alterations in TDP-43.

This is an important finding, because it adds to the growing body of evidence that age-related neurodegenerative diseases, rather than being discrete entities, may in fact be different points on a continuum, and the corollary of this is that they may all have similar underlying mechanisms. Indeed, a brief survey of three age-related neurodegenerative diseases (AD, PD, and MND) reveals that there is much overlap in the features associated with these conditions (Table 1), and that they have more in common than anything else (Figure 1).

The paper by Gomez-Pinedo et al. (1) is a timely reminder that researchers should perhaps not get tied up with the details of these individual diseases that are so important for differential diagnoses. Instead, those seeking to illuminate basic underlying mechanisms might do well to pool data for

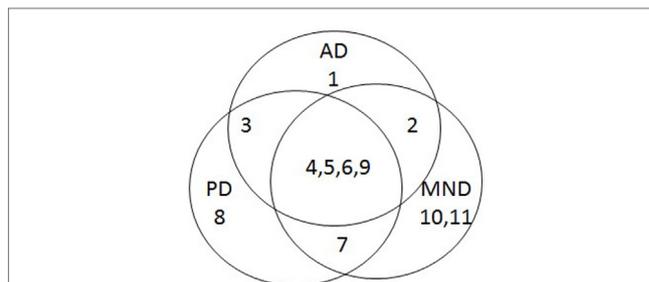
TABLE 1 | Typical and associated features of Alzheimer's disease (AD), Parkinson's disease (PD), and motor neurone disease (MND).

Condition	Typical features	Associated features
AD	<ol style="list-style-type: none"> 1. Aβ deposition (amyloid plaques), intraneuronal aggregation of pho-tau 2. Increased amyloid precursor protein (APP), accumulation of Aβ and pho-tau 3. Cholinergic dysfunction 4. Cognitive changes 5. Sustained neuroinflammation 6. Accumulation of ubiquitinated proteins 	<ol style="list-style-type: none"> 9. Movement disorder
PD	<ol style="list-style-type: none"> 5. Sustained neuroinflammation 6. Accumulation of ubiquitinated proteins 7a. Intracellular accumulation of α-synuclein amyloid-like fibrils (Lewy bodies) 8. Nigral dopamine loss 9. Movement disorder 	<ol style="list-style-type: none"> 3. Cholinergic dysfunction 4. Cognitive changes
MND	<ol style="list-style-type: none"> 5. Sustained neuroinflammation 6. Accumulation of ubiquitinated proteins 9. Movement disorder 10. C9ORF72 mutation 11. Intracellular accumulation of aggregated proteins (TDP-43, FUS, and SOD1) 	<ol style="list-style-type: none"> 2. Increased APP, accumulation of Aβ and pho-tau 4. Cognitive changes 7b. Intracellular α-synuclein/SOD1 co-aggregation in amyotrophic lateral sclerosis

Numbers refer to the following references: (1) Hinz and Geschwind (2); Aday and Sze (3); (2) Vilemagne et al. (4); Gomez-Pinedo et al. (1); (3) Ballinger et al. (5); Park et al. (6); (4) Brandt et al. (7); (5) Chen et al. (8); Amor et al. (9); (6) Atkin and Paulson (10); Jansen et al. (11); (7a) Uchiyama and Giasson (12); (7b) Helferich et al. (13); (8) Kalia and Lang (14); (9) Brandt et al. (7); (10) Ticozzi et al. (15); (11) Guerrero et al. (16).

REFERENCES

1. Gomez-Pinedo U, Villar-Quiles R, Galan L, Matias-Guiu J, Benito-Martin M, Guerrero-Sola A, et al. Immunochemical markers of the amyloid cascade in the hippocampus in motor neuron diseases. *Front Psychiatry* (2016) 7:195. doi:10.3389/fneur.2016.00195
2. Hinz F, Geschwind D. Molecular genetics of neurodegenerative dementias. *Cold Spring Harb Perspect Biol* (2016):a023705. doi:10.1101/cshperspect.a023705
3. Aday S, Sze S. Insight of brain degenerative protein modifications in the pathology of neurodegeneration and dementia by proteomic profiling. *Mol Brain* (2016) 9:92. doi:10.1186/s13041-016-0272-9
4. Vilemagne V, Dore V, Bourget P, Burnham S, Laws S, Salvado O, et al. A β -amyloid and Tau imaging in dementia. *Semin Nucl Med* (2017) 47:75–88. doi:10.1053/j.semnuclmed.2016.09.00
5. Ballinger E, Anath M, Talmage D, Role L. Basal forebrain cholinergic circuits and signalling in cognition and cognitive decline. *Neuron* (2016) 91:1199–218. doi:10.1016/j.neuron.2016.09.006
6. Park H, Park I, Oh Y, Yang D, Lee K, Choi H, et al. Subcortical white matter hyperintensities within the cholinergic pathways of patients with dementia and Parkinsonism. *J Neurol Sci* (2015) 2015(353):44–8. doi:10.1016/j.jns.2015.03.046
7. Brandt T, Caplan L, Dichgans J, Diener H, Kennard C. *Neurological Disorders. Course and Treatment*. San Diego, CA: Academic Press (1997).
8. Chen WW, Zhang X, Huang WJ. Role of neuroinflammation in neurodegenerative diseases (review). *Mol Med Rep* (2016) 13:3391–6. doi:10.3892/mmr.2016.4948
9. Amor S, Peferoen L, Vogel D, Breur M, van der Valk P, Baker D, et al. Inflammation in neurodegenerative diseases – an update. *Immunology* (2013) 142:151–66. doi:10.1111/imm.12233
10. Atkin G, Paulson H. Ubiquitin pathways in neurodegenerative disease. *Front Mol Neurosci* (2014) 7:63. doi:10.3389/fnmol.2014.00063

**FIGURE 1 | Venn diagram summarizing overlap of features associated with Alzheimer's disease (AD), Parkinson's disease (PD), and motor neurone disease (MND).**

neurodegenerative diseases in the hope that it will point them in the right direction. After all, these conditions have so far defied effective treatment or cure.

AUTHOR CONTRIBUTIONS

IJ wrote the initial draft. CR revised the initial draft and contributed with further writing. Both collected data from literature and revised the final manuscript.

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11. Jansen AH, Reits EA, Hol EM. The ubiquitin proteasome system in glia and its role in neurodegenerative diseases. *Front Mol Neurosci* (2014) 7:73. doi:10.3389/fnmol.2014.00073
12. Uchiyama T, Giasson BI. Propagation of alpha-synuclein pathology: hypotheses, discoveries, and yet unresolved questions from experimental and human brain studies (review). *Acta Neuropathol* (2016) 131(1):49–73. doi:10.1007/s00401-015-1485-1
13. Helferich AM, Ruf WP, Grozdanov V, Freischmidt A, Feiler MS, Zondler L, et al. α -Synuclein interacts with SOD1 and promotes its oligomerization. *Mol Neurodegener* (2015) 10:66. doi:10.1186/s13024-015-0062-3
14. Kalia LV, Lang AE. Parkinson's disease. *Lancet* (2015) 386(9996):896–912. doi:10.1016/S0140-6736(14)61393-3
15. Ticozzi N, Tiloca C, Calini D, Gagliardi S, Altieri A, Colombrita C, et al. C9orf72 repeat expansions are restricted to the ALS-FTD spectrum. *Neurobiol Aging* (2014) 35(4):e13–7. doi:10.1016/j.neurobiolaging.2013.09.037
16. Guerrero EN, Wang H, Mitra J, Hegde PM, Stowell SE, Liachko NF, et al. TDP-43/FUS in motor neuron disease: complexity and challenges. *Prog Neurobiol* (2016) 145-146:78–97. doi:10.1016/j.pneurobio.2016.09.004

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.

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