

Isoflurane preconditioning enhances repair of damaged striatum in post-stroke adult mice

Ansgar M Brambrink, PhD, MD^{1,2}, Wenri Zhang, PhD, MD¹, Stephanie J Murphy, PhD¹, Patricia D Hurn, PhD^{1,2,3}

¹Department of Anesthesiology & Peri-Operative Medicine, ²Department of Neurology, ³Department of Physiology and Pharmacology, Oregon Health & Science University, Portland, OR, USA

INTRODUCTION

- Neurogenesis in the intact adult brain is found in two germinal areas: the dentate gyrus (DG) and the subventricular zone (SVZ). In the SVZ, situated alongside the lateral ventricles, newborn neurons develop and – under physiologic conditions - track along the rostral migratory tract towards the olfactory bulb and integrate accordingly.
- After cerebral ischemia, neuronal stem cell proliferation is stimulated and some newborn cells appear in damaged brain areas striatum and are believed to play an important role in post-ischemic functional recovery.
- Exposure to isoflurane prior to brain ischemia (“anesthetic preconditioning”) was shown to reduce stroke volume and improve functional outcome, which has been attributed to neuroprotective effects of the volatile anesthetic.

HYPOTHESIS

- Improved post-stroke outcome following isoflurane preconditioning (IsoPC) is associated with improved repair of damaged neuropil: more newborn neurons and more new dendrites are present in the injured striatum 6 weeks after reversible middle cerebral artery occlusion in adult mice.

METHODS

- Animals: male C57BL/6 mice
- Mice were exposed to 1 Vol% isoflurane for 4hr (IsoPC) or sham preconditioning (sham PC)
- 24hr after preconditioning, mice underwent 60min of right-sided middle cerebral artery occlusion (MCAO) via the intraluminal filament technique
- Subsequently, animals received intra-peritoneal injections of 5-bromo-2 -deoxyuridine-5 monophosphate(BrdU, 50 mg/kg, twice daily) for 4 days, and were then survived for 6 weeks
- Assessment of motor deficit 6 weeks after MCAO:** the mice were placed in a cylinder (height 15 cm; diameter 9 cm) and 4 cameras registered the sequence of the two paw touches per one rearing. A total of 20 rearing were recorded (10min) and *right side* vs. *total* paw touches was calculated

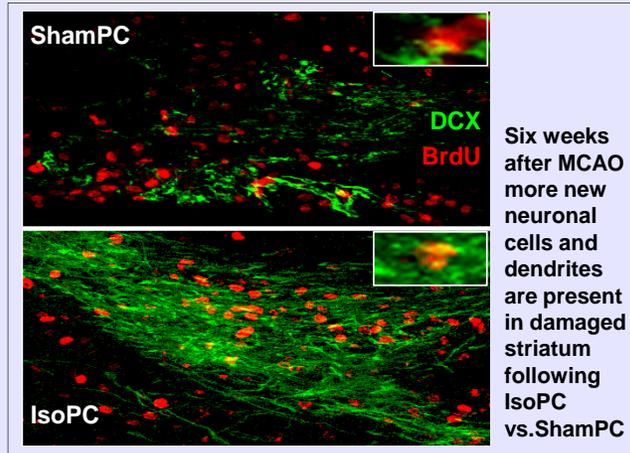
METHODS (cont'd)



- Assessment of new neurons/dendrites 6 weeks after MCAO:** brains were processed (intravital perfusion-fixation, 4% PFA, free-floating 40µm cryosections) and stained for BrdU (proliferating cells) and doublecortin (DCX, stains young newborn neuronal cells). Unbiased stereology was used to quantify DCX positive, double-labeled cells (BrdU/DCX) and DCX positive dendrites in damaged striatum

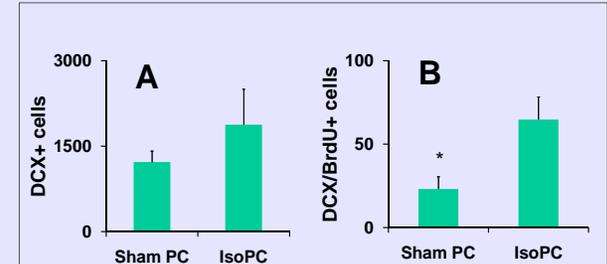
RESULTS

1. Newborn neuronal cells /dendrites in injured striatum



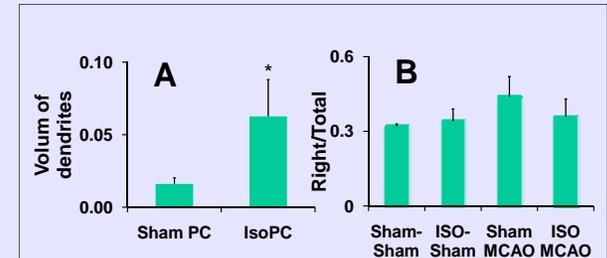
RESULTS (cont'd)

2. More new neurons in injured striatum with IsoPC



More new young neurons (A, DCX⁺), and more neurons born in the 4 days after the insult (B, BrdU/DCX⁺), are present in injured striatum of IsoPC vs. ShamPC mice 6 weeks after MCAO (n=5, each, *p<0.01)

3. More new dendrites, and reduced deficit with IsoPC.



Volume (mm³) of new dendrites in injured striatum was increased in IsoPC vs. ShamPC mice 6 w after MCAO (A; n=5 each; *p<0.01). **Paw Preference Test** revealed increased right paw preference after ShamPC+MCAO (L sided weakness), while motor performance with IsoPC+MCAO was similar to that in Sham+Sham animals [no insult] (B; n=5 each).

CONCLUSIONS

- Anesthetic preconditioning using isoflurane prior to MCAO increases the number of new neurons and dendrites in damaged striatum 6 weeks after the insult, which is paralleled by improved motor performance. Additional experiments are necessary to determine the underlying mechanisms.