

1 **Differential visual system organization and susceptibility to experimental**
2 **models of optic neuropathies in three commonly used mouse strains**

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26 **Abstract**

27 Mouse disease models have proven indispensable in glaucoma research, yet the complexity
28 of the vast number of models and mouse strains has also led to confusing findings. In this
29 study, we evaluated baseline intraocular pressure, retinal histology, and retinofugal
30 projections in three mouse strains commonly used in glaucoma research, *i.e.* C57Bl/6,
31 C57Bl/6-Tyr^c, and CD-1 mice. We found that the mouse strains under study do not only
32 display moderate variations in their intraocular pressure, retinal architecture, and retinal
33 ganglion cell density, also the retinofugal projections to the dorsal lateral geniculate nucleus
34 and the superior colliculus revealed striking differences, potentially underlying diverging
35 optokinetic tracking responses and visual acuity. Next, we reviewed the success rate of three
36 models of (glaucomatous) optic neuropathies (intravitreal N-methyl-D-aspartic acid injection,
37 optic nerve crush, and laser photocoagulation-induced ocular hypertension), looking for
38 differences in disease susceptibility between these mouse strains. Different genetic
39 backgrounds and albinism led to differential susceptibility to experimentally induced retinal
40 ganglion cell death among these three mouse strains. Overall, CD-1 mice appeared to have
41 the highest sensitivity to retinal ganglion cell damage, while the C57Bl/6 background was
42 more resistant in the three models used.

43

44 **Key words**

45 mouse, retina, visual system, glaucoma, disease models, mouse strains, genetic background

46

47 **Highlights**

- 48 • C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice were studied
- 49 • Intraocular pressure, retinal histology, and RGC density varied in these strains
- 50 • Different retinofugal projections to the dLGN and SC were observed
- 51 • Optokinetic tracking responses and visual acuity were strikingly different
- 52 • The three strains were differentially susceptible to experimental RGC death

53 **Abbreviations**

54	CTB	cholera toxin subunit β
55	dLGN	dorsal lateral geniculate nucleus
56	dpi	days post injury/injection
57	IOP	intraocular pressure
58	L-Dopa	L-3,4-dihydroxyphenylalanine
59	LP	laser photocoagulation
60	NMDA	N-methyl-D-aspartic acid
61	ONC	optic nerve crush
62	PBS	phosphate-buffered saline
63	PFA	paraformaldehyde
64	<i>rd1</i>	<i>retinal degeneration 1</i> mutation
65	RGC	retinal ganglion cell
66	ROI	region of interest
67	(SD-)OCT	(spectral domain-) optical coherence tomography
68	(s)SC	(superficial layers of the) superior colliculus
69	TBS	tris-buffered saline
70	<i>Tyr</i>	Tyrosinase gene
71	VGLUT2	vesicular glutamate transporter 2
72		

73 **1. Introduction**

74 Glaucoma is a heterogeneous group of disorders that have in common the progressive death
75 of retinal ganglion cells (RGCs) and degeneration of the optic nerve. Worldwide, over 60
76 million people are believed to be at risk to become irreversible blind, due to this
77 neurodegenerative disease (Quigley and Broman, 2006; Tham et al., 2014). Although
78 elevated intraocular pressure (IOP) is considered the major risk factor –and sole target for
79 clinical treatment– glaucoma etiology is still not completely understood and thought to
80 involve a dynamic interplay of genetic predisposition and age-related and environmental
81 stressors (Calkins, 2012; Calkins and Horner, 2012; Leske et al., 2007; Nickells, 2007). This
82 complexity and multifactorial nature of glaucoma is challenging scientists and clinicians to
83 understand the underlying mechanisms leading to neurodegeneration and to find novel
84 therapeutic approaches to fight this blinding disease. Mouse disease models have proven
85 indispensable in this quest, yet the complexity of the vast number of models and mouse
86 strains has also led to confusing findings.

87 Previous papers reported that CD1- mice are more susceptible to ocular hypertension-induced
88 glaucoma as compared to C57Bl/6 mice (Cone et al., 2010; Cone et al., 2012; Nguyen et al.,
89 2013). This greater susceptibility could derive from structural differences in the eye/visual
90 system of either mouse strain or from a differential response to elevated IOP. To assess
91 whether albinism alone is the main factor predisposing CD-1 mice to more severe
92 glaucomatous neurodegeneration, we tested CD-1, albino C57Bl/6 and pigmented C57Bl/6
93 mice in a model for ocular hypertension-induced glaucoma and two other optic neuropathy
94 models (*i.e.* intravitreal N-methyl-D-aspartic acid (NMDA) injection and optic nerve crush
95 (ONC)).

96 Whether or not related to albinism, many morphological and functional characteristics of the
97 eye have been shown to vary among mouse strains, including IOP (Cone et al., 2012; John et

98 al., 1997; Savinova et al., 2001), aqueous humor outflow resistance (Boussommier-Calleja
99 and Overby, 2013), scleral biomechanics (Nguyen et al., 2013), RGC and cone density
100 (Salinas-Navarro et al., 2009b; Whitney et al., 2011; Williams et al., 1996), congenital retinal
101 degeneration (Chang et al., 2013; Clapcote et al., 2005; Mattapallil et al., 2012; Serfilippi et
102 al., 2004; Wong and Brown, 2006), susceptibility to photoreceptor death (Matsumoto et al.,
103 2014), visual projection patterns (Drager and Olsen, 1980; Rebsam et al., 2012; Rice et al.,
104 1995), and performance in vision-guided behavior tasks (Balkema and Drager, 1991; Wong
105 and Brown, 2006). We therefore first investigated the baseline phenotype of the retina and
106 retinofugal projection in the three wild type mouse strains mentioned above, looking for traits
107 that might relate to the differential glaucoma susceptibility.

108

109 **2. Methodology**

110 **2.1. Experimental animals**

111 Three mouse strains/stocks¹ were used in this study: C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice.
112 The CD-1 and C57Bl/6-Tyr^c mouse strains both carry a homozygous Cys103Ser mutation
113 (designated *Tyr^c*) in the tyrosinase (*Tyr*) gene, resulting in oculocutaneous albinism
114 (Beermann et al., 2004; Lavado and Montoliu, 2006). Although C57Bl/6-Tyr^c and CD-1 are
115 both albino mice, they have a very distinct genetic background: while C57Bl/6-Tyr^c inbred
116 mice share the same genetic background as the C57Bl/6 strain, CD-1 mice are an outbred
117 strain, implying high genetic heterogeneity (Chia et al., 2005).

118 All studies were conducted in compliance with the European Communities Council Directive
119 of 22 September 2010 (2010/63/EU) and the Belgian legislation (KB of 29 May 2013), and

¹ Outbred colonies are usually referred to as 'stocks', whereas inbred ones are referred to as 'strains' or 'lines'. However, to facilitate reading we will refer to all of them as 'strains'.

120 were approved by the KU Leuven institutional ethical committee. Adult (2-4 months)
121 C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice were obtained from the university breeding colony.
122 Animals were kept under a 12/12 light-dark cycle and had *ad libitum* access to food and
123 water.

124

125 **2.2. Genotyping**

126 Mice were genotyped for the *retinal degeneration 1 (rd1)* mutation of the *Pde6b* gene.
127 Briefly, DNA was extracted from tail biopsies, and genotyping PCR was performed with the
128 Fast Hotstart Genotyping PCR kit (Kapa Biosystems), in 30 cycles at the following
129 temperatures: denaturation at 94°C for 30 seconds, annealing at 55°C for 30 seconds, and
130 polymerization at 72°C for 30 seconds. The amplified DNA products were analyzed by
131 electrophoresis on a 2% agarose gel. The following primer sequences were used, producing
132 237 bp and 562 bp bands for wild type and *rd1* genotypes, respectively:
133 5' ACCTGCATGTGAACCCAGTATTCTATC 3' (*Pde6b1*);
134 5' CTACAGCCCCTCTCCAAGGTTTATAG 3' (*Pde6b2*);
135 5' AAGCTAGCTGCAGTAACGCCATTT 3' (*Pde6b3*).

136

137 **2.3. Intra-ocular pressure measurement**

138 The IOP was measured in awake animals with a calibrated rebound tonometer (Tono-Lab,
139 iCare) (Haddadin et al., 2009; Haddadin et al., 2012). IOP was measured before LP (day 0)
140 and on day 1 till 7 following LP. In short, the mouse was hold with one hand by loosely
141 grabbing the fur in the neck and care was taken to avoid stress and pressure on the neck
142 region. Next, 10 independent IOP measurements were taken per eye, from which the highest
143 two and lowest two values are excluded in order to reduce variability. An average IOP for
144 each eye was calculated from the remaining six values. IOP measurements were always

145 performed in the morning, to avoid potential variability due to diurnal IOP variations. The
146 untreated, contralateral eye was used as a control.

147

148 **2.4. Spectral domain optical coherence tomography**

149 Thickness of the retinal layers was evaluated using a spectral domain optical coherence
150 tomography (SD-OCT) system (Envisu R2210, Biotigen) (Buys et al., 2013). Upon general
151 anesthesia (i.p. 75 mg/kg body weight ketamine, Anesketin, Eurovet; i.p. 1 mg/kg
152 medetomidine, Domitor, Pfizer), pupils were dilated by topical application of 0.5%
153 tropicamide (0.5% Tropicol, Thea). SD-OCT was performed using 100 consecutive B-scan
154 lines composed of 1000 A-scans, in a 1.4x1.4mm field. After the procedure, anesthesia was
155 reversed by means of atipamezol (i.p. 1 mg/kg, Antisedan, Pfizer) and antibiotic ointment
156 was applied to the eye (tobramycin 3 mg/g, Tobrex, Alcon). Total retinal thickness and
157 thickness of different retinal layers were analyzed using InVivoVue Diver 2.2 software
158 (Biotigen).

159

160 **2.5. Optokinetic tracking response**

161 The optokinetic tracking response was measured under photopic conditions in a virtual-
162 reality chamber (OptoMotry, Cerebral Mechanics), as described by Prusky *et al.* (Douglas et
163 al., 2005; Prusky et al., 2004). Briefly, a virtual cylinder comprised of a vertical sine wave
164 grating was projected on four computer screens facing into a box. The animal was placed on
165 a platform in the center of the arena and a video camera, situated above the animal, provided
166 real-time video feedback. Visual acuity was measured using a staircase procedure, in which
167 different spatial frequencies (100% contrast, 12° per second speed) varied randomly and
168 separate for each eye. The experimenter judged whether the mouse displayed optokinetic

169 tracking, and the maximum spatial frequency at which optokinetic tracking seen, was
170 determined.

171

172 **2.6. Surgical procedures**

173 All surgical procedures were performed under general anesthesia with ketamine and domitor
174 (see above). After the procedure, anesthesia was reversed by means of atipamezol (see
175 above), and antibiotic ointment (see above) was applied to avoid corneal desiccation and
176 infection of the eye. Untreated eyes from a separate cohort of untreated animals served as
177 controls.

178 2.6.1. Intravitreal injections

179 Intravitreal injections were performed as described (Lebrun-Julien et al., 2009), to deliver
180 either anterograde tracer or NMDA. Briefly, a total volume of 2 μ l (0.5 μ l/second) was
181 injected into the superior quadrant of the right eye using a glass capillary with a 50-70 μ m
182 outer diameter, connected to a Hamilton syringe. In addition to general anesthesia, eye drops
183 with topical anesthesia (oxybuprocaine 0.4%, Unicaine, Thea) were given. For anterograde
184 tracing of the dorsal lateral geniculate nucleus (dLGN) and the superior colliculus (SC),
185 Alexa Fluor-488-conjugated cholera toxin β subunit (CTB) (0.5% in phosphate-buffered
186 saline (PBS) containing 0.5% DMSO; Life Technologies) was injected in the right eye, and
187 mice were sacrificed at 7 dpi. In order to induce retinal excitotoxicity, NMDA (7.5 mM, in
188 PBS; Sigma-Aldrich) was injected, and animals were sacrificed at 4 days post injection (dpi).

189 2.6.2. Optic nerve crush

190 Intraorbital ONC was performed as described (Parrilla-Reverter et al., 2009). Briefly, an
191 incision was made in the skin overlying the superior orbital rim, the supero-external orbital
192 contents were dissected, and the superior and external rectus muscles were transected. The
193 exposed optic nerve was then crushed 1 mm from the globe with a watchmaker's forceps for

194 10 seconds. Funduscopy was performed before and after the procedure to assess retinal
195 perfusion. Animals were sacrificed at 7 days post injury (dpi).

196 2.6.3. Laser photocoagulation (LP)

197 Tropicamide eye drops (1% Mydriacyl, Alcon) were administered to ensure pupil dilatation.
198 Next, monocular hypertension in the left eye was induced via LP of the episcleral and
199 perilimbal vessels, as described (Salinas-Navarro et al., 2009a; Valiente-Soriano et al., 2015).
200 Briefly, a 532 nm diode laser (Vitra, Quantel Medical) was used to deliver a number of laser
201 burns in one single session. The number of spots, power, and duration of the laser pulse were
202 adjusted according to the mouse strain. For C57Bl/6 mice, the vessels were photocoagulated
203 with 140 spots, with a laser power and duration of 100 mW and 0.05 seconds, respectively.
204 For C57Bl/6-Tyr^c mice, the vessels were photocoagulated with 100 spots, with a laser power
205 and duration of 200 mW and 0.5 seconds, respectively. For CD-1 mice, the vessels were
206 photocoagulated with 70 spots, with a laser power and duration of 300 mW and 0.5 seconds,
207 respectively. Animals were sacrificed at 14 dpi.

208 2.6.4. Retrograde labeling from the superior colliculus

209 To identify the population of RGCs with functional retrograde axonal transport in the ocular
210 hypertension model, hydroxystilbamidine methanesulfonate (OHSt) (Life Technologies) was
211 applied to both SC (Galindo-Romero et al., 2013; Salinas-Navarro et al., 2009b). In brief,
212 after exposing the midbrain, a small pledge of gelatin sponge (Espongostan, Ferrosan) soaked
213 in saline containing 10% OHSt and 10% DMSO, was applied over the entire surface of both
214 SC following previously described methods (Salinas-Navarro et al., 2009). Retinas were
215 dissected 4 days post LP, and subsequently immunostained for Brn3a (see below). Mosaic z-
216 stack images of the entire retina were taken with a confocal microscope (FV1000, Olympus),
217 equipped with FluoViewer 4.0 software (Olympus).

218

219 **2.7. Hematoxylin and eosin staining**

220 Mice were deeply anaesthetized (i.p. 30 mg/kg sodium pentobarbital, Nembutal, Ceva),
221 perfused transcardially with 1% phosphate-buffered paraformaldehyde (PFA) and eyes were
222 dissected. Eyes were fixed overnight in 1% PFA, processed for paraffin-embedding and
223 transverse sections (10 μ m) of the whole eye were made. Sections were first deparaffinized
224 and rehydrated, followed by a histological staining with hematoxylin (Sigma) and 1% eosin
225 (Prosan). Next, sections were dehydrated and mounted using DPX neutral mountant (Prosan).
226 Images were taken with a light microscope (Zeiss Axio Imager Z.1), equipped with an
227 AxioCam MRm camera and ZEN software (Zeiss).

228

229 **2.8. Immunohistochemistry**

230 In order to quantify retinal ganglion cell density, a Brn3 immunostaining was performed on
231 retinal flatmounts (Galindo-Romero et al., 2011; Nadal-Nicolas et al., 2009). Mice were
232 deeply anaesthetized with sodium pentobarbital (see above) and sacrificed by cervical
233 dislocation. Eyes were dissected and fixed for 1 hour in 4% PFA. Next, retinas were
234 flatmounted and again fixed for 1 hour in 4% PFA. Flatmounted retinas were frozen for 15
235 minutes at -80°C, before applying the primary antibody goat anti-Brn3a (Santa Cruz, C-20,
236 sc-31984) (1:750), which was diluted in PBS containing 2% Triton X-100 and 2% rabbit pre-
237 immune serum. The next day, Alexa Fluor-488-conjugated rabbit anti-goat IgG antibody
238 (Life Technologies) (1:500) was applied for 2 hours. Retinal flatmounts were rinsed with
239 PBS with 0.5% Triton X-100 in between steps, and mounted using mowiol mounting medium
240 (10% mowiol 4-88 (Sigma-Aldrich), 40% glycerol, 0.1% 1,4-diazabicyclo-[2,2,2]-octane in
241 0.2 M Tris-HCl [pH 8.5]). Mosaic z-stack images of the entire retina were taken with a
242 multiphoton microscope (BX61WI, Olympus), equipped with a MaiTai HP DeepSee laser
243 (690-1020 nm, Spectra Physics) and FluoViewer 4.0 software (Olympus).

244 In order to delineate dLGN boundaries and SC stratification, an immunostaining for vesicular
245 glutamate transporter 2 (VGluT2), a discrete marker for presynaptic glutamatergic terminals,
246 was performed (Dekeyster et al., 2015a; Fujiyama et al., 2003). Mice were deeply
247 anesthetized with sodium pentobarbital (see above) and perfused transcardially with 4% PFA.
248 Brains were dissected and post-fixed overnight in 4% PFA. Vibratome sections (50 μ m) of
249 the dLGN and SC brain regions, between Bregma -1.70 mm and -4.84 mm, were mounted on
250 gelatin-coated microscopy slides and dried overnight at 37°C. After rehydration, sections
251 were incubated in PaxD permeabilization buffer (PBS with 5 % bovine serum albumin, 0.3%
252 Triton X-100, and 0.3% sodium deoxycholate) and blocking solution (0.01 M Tris-buffered
253 saline (TBS) with 0.5% blocking reagent (Perkin-Elmer) and 20% normal donkey serum
254 (Life technologies)). Next, sections were incubated overnight with rabbit anti-VGluT2 (Life
255 Technologies, 42-7800) (1:300), diluted in PBS containing 0.3% Triton X-100 and 10%
256 normal donkey serum. The next day, Alexa Fluor-647-conjugated donkey anti-rabbit IgG
257 antibody (Life Technologies) (1:200) was applied for 2 hours. Sections were rinsed with
258 PaxD in between steps, and cover slipped using mowiol mounting medium (see above). 4',6-
259 diamidino-2-phenylindole (1 μ g/ml in PBS, Appllichem) was used as a fluorescent nuclear
260 counterstaining. Images were taken with an inverted confocal microscope (FV1000,
261 Olympus) and were processed with FluoViewer 4.0 (Olympus) and Photoshop CS5 (Adobe)
262 software.

263

264 **2.9. Morphometric analyses and quantification of RGC density**

265 Total retinal thickness, as well as thickness of the different retinal layers, was measured on 6
266 retinal sections per eye, using Fiji software (Schindelin et al., 2012). For each section,
267 measurements were performed at two locations in the peripheral retina and two locations in
268 the central retina.

269 RGC density was evaluated on entire retinal flatmounts after immunostaining for Brn3a.
270 RGC density (number of RGCs/mm²) was semi-automatically computed using Fiji software
271 and an in-house made macro (Geeraerts et al., 2015). Briefly, the mosaic picture of a full
272 Brn3a-stained retinal flatmount was subjected to a series of operations, consisting of noise
273 removal via Fiji's 'Remove Outlier' plugin, enhancement of the Brn3a⁺ signal of RGCs via
274 the determinant of the Hessian, and counting of the resulting local maxima as RGCs. Next,
275 the retinal flatmount was outlined, and its total area, total number of RGCs and average RGC
276 density were calculated.

277 The number of retrogradely labeled RGCs was manually counted after tracing with OHSt
278 using the "cell counter" plugin of Fiji software. OHSt⁺ RGCs were quantified in
279 twelve 250x250 μm frames per retina, by two independent, blinded observers.

280 RGC axon terminals, labeled via CTB tracing, were quantified using Fiji software. For the
281 dLGN, four regions of interest (ROI) were outlined: three ROIs in the contralateral dLGN (in
282 respect to CTB-injected eye) and one ROI in the ipsilateral dLGN. A schematic overview of
283 these ROIs, further referred to as 'contralateral', 'contra patch', 'contra in ipsi region', and
284 'ipsilateral', is depicted in Figure 2c. The ROIs 'contralateral', 'contra in ipsi region', and
285 'ipsilateral' were analyzed on three 100 μm-spaced coronal sections per animal within the
286 rostrocaudal region between Bregma -2.10 mm and -2.60 mm. The ROI 'contra patch' was
287 analyzed on all sections from Bregma -2.40 mm till -2.80 mm showing this feature.
288 Immunofluorescence intensity (per μm²) was analyzed in randomly placed frames (50 μm
289 diameter) in these ROIs and, after background subtraction, a mean value was calculated per
290 mouse. For the SC, CTB tracing was analyzed qualitatively on sections between Bregma -3.16
291 mm and -4.84 mm. The boundary between the visually driven superficial layers of the SC,
292 including the *stratum zonale*, *stratum griseum superficiale*, and *stratum opticum*, and the

293 underlying deep SC, was outlined based on a VGluT2 immunostaining. A scheme of the
294 theoretical contralateral and ipsilateral RGC projection zones in the SC is depicted in Figure 3b.

295

296 **2.10. Statistics**

297 Normal distribution was verified using a Kolmogorov–Smirnov test and parallel equal
298 variance between groups was tested. Outliers were identified and excluded, based on a
299 Grubbs' test. Statistical tests are mentioned in the figure captions. Briefly, all baseline
300 characteristics were either analyzed via a paired Student's *t*-test, a one-way ANOVA with
301 *post hoc* Turkey's multiple comparisons test, or a two-way ANOVA with *post hoc* Dunnett's
302 multiple comparisons test. Differences in experimentally induced RGC death were analyzed
303 among the different strains using a two-way ANOVA with *post hoc* Turkey's multiple
304 comparisons test. IOP profiles after LP were analyzed using a repeated measures two-way
305 ANOVA with *post hoc* Dunnett's multiple comparisons test. A probability level (α -level was
306 set to 0.05) of <0.05 was accepted as statistically significant (* $p<0.05$, ** $p<0.01$,
307 *** $p<0.005$). All data are presented as mean \pm SEM, unless indicated otherwise. For all
308 statistical analyses GraphPad Prism 6 (GraphPad Software) was used.

309

310 **3. Results**

311 **3.1. Evaluation of baseline characteristics of three commonly used mouse strains in** 312 **glaucoma research**

313 3.1.1. Ocular phenotype

314 As elevated IOP has been identified as one of the major risk factors for glaucoma, we first
315 evaluated baseline IOP in the three mouse strains under study. A significant difference in IOP
316 was seen between C57Bl/6 and CD-1 mice, which had an IOP of 14.2 ± 0.1 mmHg and 13.2
317 ± 0.1 mmHg, respectively ($p<0.0001$). C57Bl/6-Tyr^c mice displayed an even higher IOP,

318 which –with a value of $16,6 \pm 0.2$ mmHg–t was 2.4 mmHg and 3.4 mmHg higher than the
319 IOP of C57Bl/6 and CD-1 mice, respectively ($p < 0.001$).

320 Next, we evaluated retinal histology via *in vivo* OCT imaging (Figure 1a-d) and on
321 hematoxylin and eosin-stained retinal cross-sections (Figure 1e-h). No significant differences
322 in the thickness of any individual retinal layer, and no signs of neurodegeneration were seen
323 (Figure 1i). In addition, RGC density was quantified on retinal flatmounts, revealing a small
324 yet significant, biological variation. Despite their elevated IOP, C57Bl/6-Tyr^c mice showed a
325 similar RGC density as C57Bl/6 mice, which share an identical genetic background. CD-1
326 mice, on the other hand, exhibited significantly higher RGC densities than C57Bl/6 and
327 C57Bl/6-Tyr^c mice (+28.5% and +22.4%, respectively) ($p < 0.0001$) (Figure 1j). A similar
328 accordance was seen for the total RGC counts in these strains (data not shown).

329 Overall, the histological architecture of the three strains in this study is highly similar. Small,
330 biological variations do exist, yet seem to be unrelated to developmental or
331 neurodegenerative differences.

332 Importantly, OCT imaging and histological analysis sporadically revealed severe retinal
333 dystrophy in CD-1 mice: the outer plexiform layer, outer nuclear layer, and photoreceptor
334 layer were completely absent in a subset of these animals (Figure 1d, h). A large-scale
335 genotyping experiment (N=106) confirmed that 21% of the mice in our CD-1 colony were
336 homozygous for the *rd1* mutation of the *Pde6b* gene, leading to photoreceptor degeneration.
337 These mice were excluded from the study.

338

339 3.1.2. Retinofugal projections

340 Retinofugal projections to the two major subcortical relay stations, the dLGN and SC, were
341 studied after anterograde tracing with fluorescently labeled CTB (Figure 2c). Analysis of the
342 CTB signal (fluorescence intensity/ μm^2) on coronal brain sections, unveiled prominent

343 differences in the patterns of RGC synapses in the dLGN and SC of C57Bl/6, C57Bl/6- Tyr^c,
344 and CD-1 mice.

345 In the dLGN, ipsilateral projections from the CTB-injected eye (ROI 'ipsilateral') appeared
346 more diffuse in C57Bl/6- Tyr^c and CD-1 mice, as compared to C57Bl/6 mice ([y] $p < 0.05$)
347 (Figure 2a, b). In addition, when looking at the contralateral dLGN, the area with ipsilateral
348 termini was not devoid of CTB signal (ROI 'contra in ipsi region') in C57Bl/6-Tyr^c and CD-1
349 mice: a black hole in the CTB⁺ contralateral dLGN signal is seen in C57Bl/6 mice, but not in
350 the albino mice ([z] $p < 0.001$ *versus* C57Bl/6-Tyr^c, $p < 0.01$ *versus* CD-1) (Figure 2a (arrow),
351 b). Moreover, in C57Bl/6 animals, the density of RGC synapses did not differ between the
352 contralateral zone of the contralateral dLGN (ROI 'contralateral') and the ipsilateral zone of
353 the ipsilateral dLGN (ROI 'ipsilateral'). However, in C57Bl/6-Tyr^c and CD-1 mice,
354 ipsilateral projections showed lower fluorescence intensity/ μm^2 values *versus* contralateral
355 projections (ROI 'ipsilateral' *versus* ROI 'contralateral') ([x] $p < 0.05$ for C57Bl/6-Tyr^c,
356 $p < 0.001$ for CD-1) (Figure 2a, b).

357 Finally, a cluster of contralaterally projecting axon terminals that appeared separated from the
358 other contralateral projections (ROI 'contra patch') was found in the contralateral, caudal
359 dLGN, adjacent to the optic tract (Figure 2d). Interestingly, this phenomenon was only
360 sporadically observed in CD-1 mice, in which it spanned a distance of less than 200 μm ,
361 while it was seen in all C57Bl/6-Tyr^c mice in this study, spanning a distance of approximately
362 500 μm along the rostrocaudal axis. Quantification of the CTB signal in this ROI 'contra
363 patch' in the C57Bl/6-Tyr^c strain, showed that RGC axon termini were more dense as
364 compared to the adjacent contralateral zone (ROI 'contra') ($p < 0.05$) (Figure 2e).

365 In summary, these results confirm a less strict segregation of ipsilateral and contralateral
366 projections to the dLGN, and reduced – or at least more diffuse –, ipsilateral projections in
367 C57Bl/6-Tyr^c and CD-1 albino animals, compared to the C57Bl/6 strain. Moreover, a spatial

368 segregation of densely packed contralateral RGC terminals was described in the caudal
369 dLGN of C57Bl/6-Tyr^c, and to a lesser extent CD-1, mice.

370 In the SC, in all three mouse strains, contralateral RGCs terminated in the superficial layers
371 of the SC (sSC), including the stratum zonale, stratum griseum superficiale, and stratum
372 opticum, and no apparent changes were noted in this dominant projection zone. In contrast,
373 differential segregation of the ipsilateral RGC axons to the lower stratum opticum was seen
374 (Figure 3a, b). In the rostral sSC, these ipsilateral projections were packed in a series of
375 delineated patches along the lateromedial axis (Figure 3a, cross-section 1). Similar to the
376 dLGN, ipsilateral projections to the SC were less dense and more diffuse in C57Bl/6-Tyr^c and
377 CD-1 mice, compared to C57Bl/6 animals, and seemingly interconnected (Figure 3a, cross-
378 section 1). More caudal along the rostrocaudal axis, the ipsilateral RGC axons bundled in a
379 tube running parallel to the brain midline (Figure 3a, cross-sections 2 and 3). In CD-1 mice,
380 this rostrocaudal tube appeared somewhat stretched along the lateromedial axis, rather than
381 being round, as was seen in the C57Bl/6 mice (Figure 3a, cross-section 3 (arrow)). Of note,
382 these disparities of the retinocollicular projections were most pronounced when comparing
383 C57Bl/6 with CD-1. The organization of the retinocollicular ipsilateral projections in
384 C57Bl/6-Tyr^c mice appeared to be somewhat in between the C57Bl/6 and CD-1 phenotypes,
385 with rostral patches being more delineated as compared to CD-1 mice, yet less dense as
386 compared to C57Bl/6. Furthermore, the rostrocaudal tube appeared less delineated and
387 slightly larger as compared to C57Bl/6 strain, but not as stretched as seen in the CD-1 mice.

388 Strikingly, all C57Bl/6 and C57Bl/6-Tyr^c mice displayed a small, densely labeled patch of
389 ipsilaterally projecting RGC axons terminating in the medial stratum zonale (Figure 3a,
390 cross-section 1 (arrowhead)), which was only visible over a rostrocaudal distance of less than
391 200 μ m. This was never observed in CD-1 animals and might therefore be linked to the
392 C57Bl/6 genetic background. Of note, the strain-related differences in the visual projection to

393 the SC shown in this study relate to the ipsilateral projection zones, which make up only 1 to
394 3% of the SC. Anterograde/retrograde axonal tracing to/from the SC therefore remains a
395 legitimate ways of assessing axonal transport differences in these strains (see below).
396 Taken together, as with the retinogeniculate projections, ipsilateral projections to the SC were
397 more diffuse in C57Bl/6-Tyr^c and CD-1 albino animals, compared to the C57Bl/6 strain.
398 Moreover, their segregation pattern seemed to be affected as well, with interconnected
399 patches of ipsilateral termini in the stratum opticum, and a deformation of the rostrocaudal
400 tube of ipsilateral axons. Finally, in the C57Bl/6 genetic background, a densely labeled patch
401 of ipsilateral RGC termini was seen in the medial stratum zonale. Importantly, while these
402 strain differences seem to be confined to the ‘subordinate’ – in comparison to the dominant,
403 contralateral projections to the sSC – ipsilateral projection areas in the SC, behavioral
404 analyses suggest that they may have major implications on SC function (see below).

405

406 3.1.3. Optokinetic tracking response

407 In addition to the morphological study of the retinofugal projections to the dLGN and SC, the
408 retinocollicular circuit was also evaluated by means of a functional test, *i.e.* the optokinetic
409 tracking response. Visual acuity, measured as the highest spatial frequency (cycles/degree)
410 eliciting an optokinetic response, was found to be divergent among the C57Bl/6, C57Bl/6-
411 Tyr^c, and CD-1 mouse strains ($p < 0.0001$ for ANOVA). C57Bl/6 mice displayed normal
412 visual acuity (0.40 ± 0.004 c/d) (Figure 3c), conform to what has been reported for this strain
413 (Prusky et al., 2004), yet the optokinetic tracking response in C57Bl/6-Tyr^c and CD-1 mice
414 was severely affected. Strikingly, normal tracking reflexes were almost completely absent in
415 these albino mice, rather they displayed counter-directive head movements. As this behavior
416 clearly consisted of reflexive movements in response to the moving gratings, we decided to
417 catalog them as true responses and to determine visual acuity based on these optokinetic

418 'anti-tracking' responses. Still, in comparison to C57Bl/6 mice, reduced and more variable
419 visual acuities of 0.32 ± 0.01 c/d and 0.28 ± 0.01 c/d were found for C57Bl/6-Tyr^c ($p < 0.001$)
420 and CD-1 mice ($p < 0.001$), respectively (Figure 3c).

421 To summarize, assessment of the optokinetic tracking response revealed that vision is
422 preserved in all three mouse strains. Nevertheless, visual acuity is lower in albino mice as
423 compared to the C57Bl/6 mice, and their optokinetic tracking behavior is severely disturbed.
424 Of note, the latter might potentially relate to the differential segregation of ipsilateral
425 projections to the SC seen in these albino strains.

426

427 **3.2. Evaluation of the three most commonly used glaucoma models in C57Bl/6, C57Bl/6-** 428 **Tyr^c, and CD-1 mice**

429 In a second part of this study, we evaluated differences in the success and applicability of
430 three commonly used glaucoma models in C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice. In
431 addition, we also evaluated the susceptibility of each of the three mouse strains to these
432 disease models. Importantly, given the complexity of the disease, there is still no ideal animal
433 model that mimics all aspects of glaucoma pathogenesis. Nonetheless, a variety of different
434 models does exist, each with their strengths and limitations, which allow to investigate at
435 least defined processes contributing to glaucomatous damage.

436 The first optic neuropathy model tested, consisted of an intravitreal injection of the glutamate
437 analogue NMDA. The importance of this excitotoxic model is often somewhat underscored,
438 due to the controversy about excitotoxicity as a contributing factor to glaucoma.
439 Nevertheless, it is a valuable model to investigate neuroprotective strategies to treat
440 secondary RGC loss and excitotoxic insults in the central nervous system (CNS) (Almasieh et
441 al., 2012; Casson, 2006; Kalia et al., 2008; Tilleux and Hermans, 2007). Intravitreal injection
442 of NMDA had a nearly 100% success rate in inducing RGC death, although a moderate

443 degree of variability existed. Intriguingly, intravitreal injection of NMDA in the three mouse
444 strains resulted in very divergent degrees of RGC degeneration ($p < 0.001$ for ANOVA).
445 Evaluation of RGC survival at 4 dpi, proved C57Bl/6 mice to be the most resistant to
446 NMDA-induced RGC death, while CD-1 mice were the most sensitive (Figure 4a).

447 Next, we evaluated the effect of ONC on RGC survival in C57Bl/6, C57Bl/6-Tyr^c, and CD-1
448 mice. Although the acuteness of this model does not correspond to human glaucoma patients,
449 at least part of the glaucomatous damage in patients with ocular hypertension is believed to
450 result from IOP-induced mechanical forces damaging the optic nerve axons. As such, the
451 ONC model is of particular benefit when studying the contribution of axonal damage to
452 glaucoma pathogenesis (Johnson and Tomarev, 2010; McKinnon et al., 2009). Evaluation of
453 RGC survival at 7 dpi revealed that C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice responded
454 identically to ONC, resulting in highly reproducible, low-variability results among the three
455 strains under study (Figure 4b).

456 Finally, RGC degeneration following LP-induced monocular hypertension was investigated.
457 Given that elevated IOP remains the most important modifiable risk factor for glaucoma,
458 animal models of OHT are highly valued in the elucidation of the pathology of RGC
459 degeneration in humans (Vidal-Sanz et al., 2012). Monocular hypertension models have been
460 extensively described in CD-1 mice (Cuenca et al., 2010; Dekeyster et al., 2015a; Fu and
461 Sretavan, 2010; Salinas-Navarro et al., 2009a). Due to pigmentation of the sclera, ciliary
462 body, and iris, as well as strain-related differences in the size of the eye, however, the laser
463 settings used for CD-1 mice are insufficient to induce monocular hypertension in C57Bl/6
464 and C57Bl/6-Tyr^c mice. Therefore, laser settings were optimized to yield an optimal set of
465 parameters for each of the three mouse strains (own observations, (Valiente-Soriano et al.,
466 2015)). These settings resulted in an IOP profile that mimics the well-established response in
467 CD-1 mice, with a success rate of nearly 100% in all three strains. More in detail, a steep rise

468 in IOP was seen at 1 day post LP, resulting in an average IOP of 41.9 ± 1.6 mmHg. In
469 general, this IOP elevation was sustained for 5 days (4 days for C57Bl/6-Tyr^c mice)
470 ($p < 0.001$), after which the IOP gradually decreased to return to its baseline value by day 6
471 (Figure 4c).

472 At 14 dpi, a sectorial pattern of RGC death, in addition to diffuse loss of RGCs, was observed
473 in all three mouse strains under study. However, notwithstanding the overlap in IOP profiles,
474 the extent of RGC degeneration following LP-induced temporary monocular hypertension did
475 vary. While no significant difference in average RGC death was observed between C57Bl/6
476 and C57Bl/6-Tyr^c mice ($26.0 \pm 3.8\%$ *versus* $41.0 \pm 10.0\%$), RGC death was significantly
477 higher in CD-1 mice ($86.9 \pm 2.1\%$) as compared to the C57Bl/6 background ($p < 0.0001$)
478 (Figure 4d). A correlation analysis for each strain, plotting individual IOP exposure (X, *i.e.*
479 integral Δ IOP) and RGC loss (Y) for each animal, revealed that the observed intra-strain
480 variation in RGC loss is unrelated to IOP for CD-1 (Pearson R = -0.3429 ; $p > 0.05$) and
481 C57Bl/6-Tyr^c (Pearson R = -0.4957 ; $p > 0.05$), but not for C57Bl/6 mice (Pearson R =
482 -0.8524 ; $p < 0.01$). Overall, as no correlation between RGC survival and IOP exposure was
483 found for two out of the three strains, these results confirm that the inter-strain differences in
484 RGC death that were observed in this study reflect the effect of ‘strain-related’ factor(s)
485 rather than IOP differences.

486 Intriguingly, the effect of the genetic background on RGC survival within the ocular
487 hypertension model, was also apparent when axonal transport integrity and visual function
488 were evaluated. At 4 dpi, all RGCs were still alive, yet the earliest signs of dysfunctional
489 axonal transport became apparent, similar to what has been reported previously (Salinas-
490 Navarro et al., 2009a; Valiente-Soriano et al., 2015; Vidal-Sanz et al., 2012) (Figure 5).
491 Indeed, the number of retrogradely labeled RGCs was immediately lower in CD-1 mice as
492 compared to mice with a C57Bl/6 background ($p < 0.001$ *versus* C57Bl/6, $p < 0.05$ *versus*

493 C57Bl/6-Tyr^c) (Figure 5b). Also the rate of visual acuity deterioration was faster in CD-1
494 mice ($p < 0.001$ for ANOVA) (Figure 5d), indicative for a higher susceptibility of the RGCs
495 and their axons to ocular hypertension-induced neurodegeneration.

496 Overall, genetic background appeared to have a clear impact on RGC degeneration, although
497 this was very much depending on the kind of glaucoma disease models used. While RGC
498 degeneration resulting from ONC proved to be equal in the three mouse strains studied,
499 NMDA- and ocular hypertension-induced RGC death were dramatically modulated by the
500 genetic background. Notably, in both models, CD-1 mice appeared to display the highest
501 sensitivity, while the C57Bl/6 background was the most resistant to RGC damage.

502

503 **4. Discussion**

504 In this study, we set out to discover whether differential susceptibility to glaucomatous RGC
505 degeneration in CD-1, albino C57Bl/6 and pigmented C57Bl/6 mice, is related to structural
506 differences in the eye/visual system of either mouse strain, to a differential response to
507 elevated IOP, and/or to other not-yet-known factors. A central question in this investigation
508 was whether albinism alone is the main factor predisposing mice to more severe
509 glaucomatous neurodegeneration, or whether other factors inherent to the genetic background
510 are at play as well.

511

512 **4.1. Differential ocular morphology and visual system organization in pigmented *versus*** 513 **albino mice**

514 No fewer than 30.000 genes are believed being expressed in the mammalian nervous system,
515 and it is to be suspected that a small yet important subset of alleles of this extraordinarily
516 large number of genes has well-defined effects on the structure and function of the
517 mammalian CNS (Williams et al., 1996). In the eye/retina, many morphological and

518 functional characteristic have been shown to vary among mouse strains: IOP and aqueous
519 humor outflow resistance, scleral biomechanics, RGC and cone density, congenital retinal
520 degeneration, visual projection patterns, performance in vision-guided behavior tasks, *etc.*
521 (see introduction). In a first step of this investigation, we set out by defining to what extent
522 albinism (*i.e.* the *Tyr^c* mutation) contributes to these baseline characteristics – that might
523 ultimately influence the response to glaucomatous injury. Unraveling this research question,
524 we took advantage of the genetic lineage of C57Bl/6 and C57Bl/6-*Tyr^c* mice, which share the
525 exact same genetic background except for one mutation in the *Tyr^c* gene. Besides, CD-1 mice
526 were included as a third strain, sharing the *Tyr^c* mutation with the C57Bl/6-*Tyr^c* mice yet
527 further belonging to a very distinct genetic background. As such, the combinatorial study of
528 these three mouse strains allowed us to dissect the relative importance of albinism *versus*
529 genetic background.

530 Given the crucial role of L-3,4-dihydroxyphenylalanine (L-Dopa) during the development of
531 the iridocorneal angle and retinofugal projections (Bhansali et al., 2014; Cronin et al., 2003;
532 Eisenhofer et al., 2003; Gimenez et al., 2004; Jeffery et al., 1997; Jeffery et al., 1994; Libby
533 et al., 2003; Roffler-Tarlov et al., 2013; Savinova et al., 2001), we hypothesized that L-Dopa
534 depletion in albino mice with the *Tyr^c* mutation – tyrosinase is a rate-limiting in L-Dopa
535 biosynthesis – would result in ocular hypertension and misguidance of RGC axons at the
536 optic chiasm. Indeed, significant differences in baseline IOP were observed amongst the three
537 mouse strains included in this study. However, although a higher IOP was seen in
538 C57Bl/6-*Tyr^c* mice, confounding genetic factors appear to counteract IOP elevation in CD-1
539 mice. Second, and in agreement with the hypothesis, missegregation of retinogeniculate
540 projections came to light in C57Bl/6-*Tyr^c* and CD-1 mice: a reduced density and rather
541 diffuse appearance of ipsilateral projection zones was seen in the dLGN, and to a lesser
542 extent also in the SC. Moreover, these disturbed retinotopic visual field representations

543 appeared to affect visual functioning, as C57Bl/6-Tyr^c and CD-1 mice not only had reduced
544 visual acuity, but also displayed so-called optokinetic ‘anti-tracking’ responses. Of note, this
545 striking ‘misbehavior’ of albino mice in the optomotor test has never been described before,
546 and suggests that the full implications of axonal misrouting in the albino visual system are
547 still being uncovered. The present study furthermore discovered a densely labeled, well-
548 delineated patch of ipsilaterally projecting RGCs in the medial stratum zonale of the SC, in
549 C57Bl/6 and C57Bl/6-Tyr^c mice, but not in CD-1 animals. By consequence, this feature
550 seems to be related to the C57Bl/6 genetic background, not to tyrosinase deficiency.

551 Also related to the genetic background rather than directly originating from the Tyr^c mutation,
552 is the variance in RGC numbers in different mouse strains (Williams et al., 1996). Significant
553 differences, both in the total number and density of the RGC population, were seen between
554 the C57Bl/6 and the CD-1 genetic background in this study, yet not among C57Bl/6 and
555 C57Bl/6-Tyr^c mice. In contrast, the gross organization of the retina, *i.e.* the thickness of its
556 different layers, was similar in C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice. Our data confirm
557 previous reports (Salinas-Navarro et al., 2009b; Williams et al., 1996) and once more point
558 out that CD-1 mice carrying a homozygous *rd1* mutation of the *Pde6b* gene – which does not
559 occur in the C57Bl/6 background – are doubtfully suited for research into ocular pathologies
560 (Hart et al., 2005; Serfilippi et al., 2004). It is thus advisable for any retina study using this
561 albino strain, to determine the presence of the mutation and to monitor potential interference
562 with experimental outcomes.

563 Altogether, in the visual system, albino mutations in the mouse *Tyr* gene appear to result in a
564 set of diverging phenotypes that are the result of differential modifier genes in the genetic
565 background. While the function of tyrosinase in melanin synthesis results in a phenotype, *i.e.*
566 oculocutaneous albinism, that remains unaltered regardless of the genetic background, L-

567 Dopa depletion in these mice leads to a set of developmental abnormalities that are modified
568 by complex, multifactorial influences of the genetic background.

569

570 **4.2. Why are mouse strains differentially susceptible to RGC degeneration induced by** 571 **different optic neuropathy models?**

572 In a second aspect of this study, we continued to investigate whether the greater susceptibility
573 to RGC degeneration that has been reported in CD-1 mice (Cone et al., 2010; Cone et al.,
574 2012; Nguyen et al., 2013), could derive from the aforementioned structural differences in the
575 eye/visual system, from a differential response to elevated IOP, or from other disease-
576 modifying genes encoded in the genetic background.

577 Altogether, susceptibility to RGC degeneration is a complex trait modulated by several
578 distinct genomic loci (Dietz et al., 2008; Li et al., 2007; Templeton et al., 2009). The present
579 results can be interpreted in the context of a study by Libby *et al.*, who dissected the
580 multifactorial complexity of genetic susceptibility factors into two broad classes of genes that
581 can affect the outcome of glaucomatous damage. The first class modulates the intrinsic
582 susceptibility of RGCs and comprises genes that directly affect RGC survival, including pro-
583 and anti-apoptotic genes, genes encoding free radical scavengers and heat shock proteins, *etc.*
584 The second class of genes modulates extrinsic susceptibility of RGCs, e.g. genes predicted to
585 influence micro- and macroglia reactivity, ECM composition and dynamics, density and
586 regulation of retinal and optic nerve vasculature, the immune responses in the eye (Li et al.,
587 2007; Libby et al., 2005).

588 For a start, the experimental outcomes in the NMDA and ONC models of optic neuropathy
589 are excellent illustrations of this concept of genes modulating the intrinsic *versus* extrinsic
590 susceptibility of RGCs to apoptosis. In the NMDA model, higher susceptibility to excitotoxic
591 neurodegeneration in C57Bl/6-Tyr^c and CD-1 mice can be directly related to the lack of

592 tyrosinase activity and the resulting shortage in L-Dopa – and therefrom synthesized
593 dopamine – in these mice. In this optic neuropathy model, the *Tyr* gene modulates extrinsic
594 susceptibility of RGCs via its profound effect on retinal dopamine levels and melanin
595 synthesis, which have been shown to confer neuroprotection by regulating physiological
596 glutamate signaling and restricting glutamate-induced excitotoxicity (Kitaoka et al., 2003;
597 Palumbo et al., 2000; Safa and Osborne, 2000), by inhibiting NMDA receptor activity
598 (Castro et al., 1999; Kashii et al., 1994; Kitaoka et al., 2003; Vaarmann et al., 2013), and by
599 scavenging free radicals (Bilgihan et al., 1995; Corsaro et al., 1995; Porebska-Budny et al.,
600 1992; Scalia et al., 1990; Valverde et al., 1996). Together these tyrosinase-dependent actions
601 explain the high rate of RGC death in C57Bl/6-*Tyr*^c and CD-1 mice *versus* pigmented
602 C57Bl/6 mice. However, with CD-1 mice being far more sensitive than C57Bl/6-*Tyr*^c mice,
603 an additional interplay of disease-modifying genes encoded in their distinct genetic
604 backgrounds seems to be at play as well. In contrast, given that axonal lesion is expected to
605 directly activate apoptosis, the subset of disease-modifying genes can likely be reduced to
606 intrinsic susceptibility genes in the ONC model (Li et al., 2007; Libby et al., 2005). As these
607 genes appear to be well-conserved among different genetic lineages (Reed et al., 2003), the
608 lower complexity of the of the ONC models – in terms of number and interplay of
609 contributing signaling pathways – might thus explain why genetic background seems to be
610 sidelined.

611 On the other hand, comparative studies revealed overlapping gene expression profiles in
612 murine models of ONC and ocular hypertension-induced glaucoma, indicating that a
613 glaucomatous insult with many of the same molecular changes is evoked in both models
614 (Panagis et al., 2011; Schlamp et al., 2001; Steele et al., 2006). This can also be deduced from
615 the fact that many neuroprotective strategies have been shown to be effective after ONC as
616 well as ocular hypertension-induced glaucoma. Of note, these therapeutic strategies, e.g. dual

617 leucine zipper kinase inhibition, neurotrophin supplementation, TNF- α inhibition (Dekeyster
618 et al., 2015b; Domenici et al., 2014; Fernandes et al., 2014; Roh et al., 2012; Tezel et al.,
619 2004; Welsbie et al., 2013), all act at somal degeneration pathways. Overall, we propose that
620 the neurodegeneration evoked by ONC mainly appeals to the intrinsic susceptibility of RGCs,
621 while ocular hypertension-induced RGC death – characterized by a complex interplay of risk
622 factors that go beyond the acute effects of the elevated IOP-related mechanical injury – is
623 influenced by a complexity of genetic susceptibility factors, both intrinsic and extrinsic. This
624 might explain why RGC survival rates were found to diverge in the latter model. Integration
625 of the data from the ONC and ocular hypertension-induced glaucoma models in this study,
626 comparing the C57Bl/6 *versus* CD-1 genetic background, indeed revealed a differential
627 strain-dependent effect on RGC survival after ONC and LP – *i.e.* the same RGC death after
628 ONC, but worse after LP for CD-1. First of all, these findings thus support the concept that
629 diverging RGC survival is due to factors other than the somal response to any kind of axonal
630 injury (*i.e.* intrinsic susceptibility), and is rather related to how and when the injury is
631 delivered (*i.e.* to differential involvement of extrinsic susceptibility factors). Second, strain-
632 related differences in RGC survival appear to be more centrally associated with ocular
633 hypertension-induced glaucomatous damage than broad optic neuropathy models such as
634 ONC.

635 Finally, what factors underlie the generally higher susceptibility of CD-1 mice to
636 glaucomatous RGC death (Cone et al., 2010; Cone et al., 2012; Li et al., 2007)? Current
637 knowledge of risk factors at play in CD-1 mice, is limited to altered scleral biomechanical
638 behavior and increased axial length (Cone et al., 2010; Nguyen et al., 2013). Nevertheless,
639 based on the present findings – relating independent outcomes of the RGC population, visual
640 projection and visual behavior –, we can suggest several other contributing factors that might
641 deserve more in-depth investigation in follow-up studies. First, it is to be noted that baseline

642 IOP appears to be irrelevant in the LP model used, as CD-1 mice – with the lowest IOP of all
643 three strains – would theoretically be at low risk for developing glaucoma. Second,
644 (secondary) RGC loss due to excitotoxicity is an integral component of ocular hypertension-
645 induced glaucoma (Almasieh et al., 2012; Casson, 2006). The increased susceptibility to
646 ocular hypertension-induced RGC death in CD-1 mice might therefore be (partially) related
647 to their decreased ability to cope with excitotoxic stress – note the similarities in the RGC
648 survival graphs for the NMDA and LP models (Figure 4a and d). In addition, given the higher
649 density of RGCs in the retina of CD-1 mice, glutamate release might be manifold and result
650 in an exponential cascade of paracrine pro-apoptotic signaling. Third, in line with e.g.
651 (Buckingham et al., 2008; Fahy et al., 2015; Martin et al., 2006; Vidal-Sanz et al., 2012), our
652 data suggest that RGC axonal transport deficits precede RGC loss in the LP model, and that
653 early changes in visual function may be caused by axonal dysfunction rather than by cell loss.
654 Furthermore, this loss in axonal transport integrity and visual acuity appeared to be larger –
655 already at day 1 post injury – and to progress faster in CD-1 mice, eventually resulting in a
656 higher RGC death. It remains entirely speculative whether the aberrant segregation of
657 retinofugal axons does confer to this increased susceptibility to axonal injury. Differential
658 axonal transport rates in albino *versus* pigmented animals (Lund, 1975), abrogated retrograde
659 (neurotrophic) support due to mistargeting to neurons in the dLGN and SC – *cfr.*
660 developmental refinement of mistargeted retinal projections by BDNF (Ernst et al., 2000;
661 Schmidt, 2004) –, as well as differential susceptibility to ocular hypertension-induced
662 damage depending on the anatomical position of the axon in the optic nerve head/visual
663 projection (Giolli and Creel, 1973; Osborne et al., 2001), are only a few possible explanations
664 for our observations. Moreover, our behavioral analyses suggest that visual acuity and SC
665 functionality is already severely disturbed at baseline in CD-1 mice, potentially leading to a
666 state that is more vulnerable to additional losses of axonal projections.

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676

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942

943 **Competing interests**

944 The author(s) declare that they have no competing interests.

945

946 **Authors' contributions**

947 LDG and ED designed the study, performed the experiments and prepared the manuscript;

948 EG, EL, and MSN performed the experiments; LDG, ED, IS, and LM contributed to the

949 analysis and interpretation of the data; LM designed the study and prepared the manuscript.

950 All authors read and approved the final manuscript.

951

952 **Figure captions**

953 **Figure 1.**

954 **Retinal histology and RGC density in C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice.** (a-d) *In*
955 *vivo* OCT scans of C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice. Representative image of N=10
956 per strain; scale bar: 50 μm. (e-h) Hematoxylin and eosin-stained transverse sections of the
957 retina of C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice. Representative image of N=4 per strain;
958 scale bar: 20 μm. (d, h) In our colony, 21% of the CD-1 mice are carrying a homozygous
959 *rd1/rd1* mutation, resulting in a total loss of the outer retinal layers due to photoreceptor
960 degeneration. (i) A detailed morphometric analysis on retinal sections reveals, upon exclusion
961 of CD-1 mice carrying the *rd1* mutation, no significant differences in the thickness of any
962 retinal layer (N=4, two-way ANOVA). (j) Evaluation of RGC density on retinal flatmounts
963 points out a higher number of RGCs per mm² in CD-1 mice (N=10, one-way ANOVA). Data
964 are presented as mean ± SEM. NFL: nerve fiber layer, GCL: ganglion cell layer; IPL: inner
965 plexiform layer, INL: inner nuclear layer; OPL: outer plexiform layer, ONL: outer nuclear
966 layer; PRL: photoreceptor layer; total: thickness of the entire retina, measured from the NFL
967 till the ONL.

968

969 **Figure 2.**
970 **Anterograde tracing of retinofugal projections to the dLGN in C57Bl/6, C57Bl/6- Tyr^c,**
971 **and CD-1 mice, within the rostrocaudal region between Bregma -2.10 mm and -2.60**
972 **mm.** (a) The dLGN is outlined based on a VGluT2 immunostaining. In C57Bl/6-Tyr^c and
973 CD-1 mice, the ipsilateral retinogeniculate projection is more diffuse, as compared to the
974 C57Bl/6 mice, and the core of the ipsilateral zone within the contralateral dLGN (arrow) is
975 not well delineated. (b) In C57Bl/6 mice, there is no difference in the density of ipsilateral
976 *versus* contralateral RGC axon termini. In contrast, in C57Bl/6-Tyr^c and CD-1 mice,
977 ipsilateral termini are less dense compared to contralateral projections (N=3-4, two-way
978 ANOVA) [x]. When comparing ipsilateral projections among the three strains, both albino
979 strains show lower values as compared to the pigmented C57Bl/6 strain (N=3-4, one-way
980 ANOVA) [y]. In addition, C57Bl/6-Tyr^c and CD-1 mice have more contralateral projecting
981 RGCs terminating within the ipsilateral core (N=3-4, one-way ANOVA) [z]. (c) Transverse
982 section of the dLGN, with a schematic representation of the theoretical RGC projection
983 zones, along with the ROIs (cfr. methodology section) in which CTB labeling is analyzed. (d)
984 Separated from the bulk of contralateral axon terminals, a patch of contralateral termini
985 (arrowhead) is detected in all four C57Bl/6-Tyr^c and in two out of four CD-1 mice. This
986 phenotype is never observed in C57Bl/6 wild types. (e) In C57Bl/6-Tyr^c mice, the density of
987 these RGC axon terminals in the ROI ‘contra patch’ is higher compared to the density within
988 the neighboring contralateral zone (N=4, Student’s *t*-test). Data are presented as mean ±
989 SEM.
990

991 **Figure 3.**

992 **Anterograde tracing of retinofugal projections to the SC in C57Bl/6, C57Bl/6- Tyr^c, and**

993 **CD-1 mice, within the rostrocaudal region between Bregma -3.16 mm and -4.84 mm. (a)**

994 The boundary (dotted line) between the visually driven layers of the sSC, including the

995 stratum zonale (SZ), stratum griseum superficiale (SGS), and stratum opticum (SO), and the

996 underlying deep SC, is outlined based on a VGluT2 immunostaining. Ipsilateral

997 retinocollicular projections mainly terminate in the lower sSC. Cross-section 1: clearly

998 distinct ipsilateral patches in the SO are visible in the rostral sSC of C57Bl/6 and C57Bl/6-

999 Tyr^c mice, but this zone is more continuous in CD-1 animals. In addition, in C57Bl/6 and

1000 C7Bl/6-Tyr^c mice, a densely labeled small patch of ipsilateral projections is observed in the

1001 medial SZ (arrowhead). Cross-sections 2 and 3: the rostrocaudal tube-like ipsilateral

1002 projection zone (arrows) is densely labeled with CTB signal in C57Bl/6 mice, while in both

1003 albino strains, the CTB signal appears more diffuse. In CD-1 mice particularly, the shape of

1004 this tube is rather stretched along the lateromedial axis as compared to the round shape in

1005 C57Bl/6 and C57Bl/6-Tyr^c mice. Scale bars: 200 μ m. (b) Left: top view on both SCi, dotted

1006 lines mark the rostrocaudal position of the coronal sections. Right: coronal sections of the

1007 SCi, illustrating theoretical projections from the CTB-injected eye. (c) Visual acuity in albino

1008 mice is significantly reduced in comparison to the C57Bl/6 strain. Moreover, CD-1 mice

1009 display an even worse visual acuity than C57Bl/6-Tyr^c mice (N=10, one-way ANOVA). Data

1010 are presented as mean \pm SEM.

1011

1012 **Figure 4.**
1013 **RGC survival in C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice after induction of glaucoma by**
1014 **means of intravitreal injection of NMDA, ONC, and LP of the episcleral and perilimbal**
1015 **vessels. (a) At 4 dpi of NMDA, C57Bl/6, C57Bl/6-Tyr^c and CD-1 mice display significantly**
1016 **different RGC survival rates (N=5-9, two-way ANOVA). (b) Survival of Brn3a⁺ RGCs at 7**
1017 **days post ONC is identical in C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice (N=7-11, one-way**
1018 **ANOVA). (c) Adjustment of the laser parameters for each strain results in overlapping IOP**
1019 **profiles for C57Bl/6, C57Bl/6-Tyr^c, and CD-1 mice after LP of the episcleral and perilimbal**
1020 **vessels (N=10-11, repeated measures two-way ANOVA). (d) Average survival of Brn3a⁺**
1021 **RGCs at 14 days post LP is similar in C57Bl/6 and C57Bl/6-Tyr^c, yet lower in CD-1 mice**
1022 **(N=10-11, one-way ANOVA). Data are presented as mean ± SEM.**
1023

1024 **Figure 5.**
1025 **Loss of axonal transport and diminished visual function, precede ganglion cell loss in an**
1026 **ocular hypertension-induced glaucoma model.** (a) At 14 dpi, C57Bl/6 and C57Bl/6-Tyr^c
1027 *versus* CD-1 mice display significantly different RGC survival rates (N=9-10, two-way ANOVA).
1028 The number of Brn3a⁺ RGCs is expressed relative (%) to the number of Brn3a⁺ RGCs in naive
1029 retinas. (b) A similar trend, *i.e.* higher disease severity in CD-1 mice compared to the C57Bl/6
1030 background, is seen when axonal transport integrity is evaluated by means of OHSt retrograde
1031 labeling at 4 dpi (N=7-9, two-way ANOVA). The number of OHSt⁺ RGCs is expressed relative (%) to
1032 the number of OHSt⁺ RGCs in naive retinas. (c) At 4 dpi, no RGC death is observable, while the first
1033 signs of axonal transport deficits are emerging. As a result, all RGCs retain Brn3a labeling yet only a
1034 subset can still be visualized via retrograde labeling with OHSt. Arrow: example of Brn3a⁺ OHSt⁺
1035 RGC. Scale bar, 50 μ m. (d) Visual acuity starts to decrease as soon as 1 dpi, and this deterioration in
1036 visual function appears to progress faster in CD-1 mice as compared to C57Bl/6-Tyr^c mice (N=8-10,
1037 two-way ANOVA). Data are presented as mean \pm SEM.