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## New developments on the role of NMDA receptors in Alzheimer's disease

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### Abstract

Since the initial findings that NMDA receptors play important roles in cellular models of learning as well as neurotoxicity, abnormal function of this receptor has been considered a potential mechanism in the pathophysiology underlying Alzheimer's disease. Treatment of Alzheimer's disease with an NMDA receptor antagonist began several years ago, with some limited success. More recent mechanistic studies have examined the role of NMDA receptors in the synaptic effects of beta amyloid.

### Introduction

The NMDA receptor has played a dominant role for many years in studies focusing on learning and memory [1] as well as neurotoxicity [2]. This dual role has naturally led to the question of its potential role in the pathophysiology underlying Alzheimer's disease [3]. Recently, a number of studies (discussed below) have examined the relation between NMDA receptors and beta amyloid (A $\beta$ ). Notably, a Pubmed search of "A $\beta$ " and "NMDA" produced 354 entries, only a small fraction of which will be discussed.

The amyloid hypothesis [4], proposing that an excessive amount of A $\beta$  is responsible for the cognitive impairment in Alzheimer's disease, is the most widely accepted model for the pathophysiology underlying the disease. In theory, there are several potential roles for the NMDA receptor in A $\beta$ -related mechanisms. 1) the NMDA receptor may be a receptor for A $\beta$  – or it may associate indirectly, by interacting with molecules that bind A $\beta$ ; 2) NMDA receptors may be necessary, either by mediating or acting permissively, in the actions of A $\beta$  on synaptic transmission and plasticity; 3) NMDA receptor function may be an important downstream target of A $\beta$ , i.e. A $\beta$  may cause a reduced or enhanced function of NMDA receptors; and 4) NMDA receptor activity may control the formation of A $\beta$ .

### How to define the A $\beta$ receptor

A number of molecules have been proposed to act as A $\beta$  receptors [5–10]. The key question is not if some molecule binds to A $\beta$  (as A $\beta$  is quite sticky, it may bind to many innocent bystanders, including plastic), but if an interaction between A $\beta$  and molecule X plays a key role in the deleterious effects of A $\beta$ . Thus, the question of receptors for A $\beta$  is inextricably linked to the toxic effects of A $\beta$ . What are the toxic effects of A $\beta$ ? This question is also

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complex, as it may rely on many factors. The mode of exposure in the temporal domain – minutes, hours, days, weeks, months, years is potentially important; while the disease requires years to progress, it may still be that the actions of A $\beta$  in minutes gives key clues as to the pathophysiological mechanisms. There may be a series of effects that could be triggered by the actions of A $\beta$  at minutes leading to compensatory effects which have manifestations after years. Alternatively, for each time domain A $\beta$  may produce different independent effects and very likely each time domain must be studied in different preparations, which makes comparisons difficult. The mode of exposure in the concentration domain – the concentration(s) of A $\beta$  that are relevant to the disease are not known – certainly may produce different effects. It should be kept in mind that there is considerable inhomogeneity in concentrations of A $\beta$  in the Alzheimer's brain, with sites of release/production (such as neurons) or potential sources like amyloid plaques, being higher than distant sites. Sites of origin and sites of action of A $\beta$  will be important to delineate. A recent study from our laboratory examined potential neuronal subcellular sources of A $\beta$  release [11]. We acutely overexpressed APP in either presynaptic or postsynaptic neurons in organotypic hippocampal slices. We observed an effect on dendritic spine density and plasticity in dendritic segments of non-overexpressing neurons that were close (<10  $\mu$ m) to dendritic segments or (<3  $\mu$ m) presynaptic terminals overexpressing APP. These studies indicate that both presynaptic and postsynaptic sites can release A $\beta$ , and the target of action may be quite near to the source of A $\beta$  production. Similar distance-dependent findings have been observed in studies using calcium imaging to measure neuronal activity. In this case, neurons within ~60  $\mu$ m of amyloid plaques showed abnormal activity[12]. It is notable that A $\beta$  may have different effects on different brain regions or different neurons. For instance, different effects on dentate granule cells and CA1 neurons have been documented [13]. Thus, to find the receptor for A $\beta$ , one must first identify effects of A $\beta$  on neuronal function that are relevant to the disease.

## Neuronal impact of A $\beta$

While neuronal death is a clear deleterious effect in Alzheimer's disease, there is growing evidence that synapses are initial targets of the disease [14]. One robust effect of A $\beta$  on synapses is to produce depression of glutamatergic synaptic transmission when overexpressed in hippocampal CA1 pyramidal neurons. This effect is observed for virally overexpressed APP [15](producing effects within 16 hours) as well as transgenically overexpressed (where it has been observed in 3 week old animals, [16]). The effect is seen both electrophysiologically (by a decrease in both AMPA-R and NMDA-R mediated transmission in CA1 region, with a selective reduction in NMDA-R mediated transmission in the dentate gyrus [13,15]) as well as structurally (by a reduction in dendritic spine density [17–22]). The reduction in surface glutamate receptors and other synaptic components produced by A $\beta$  has been seen in dissociated cultured hippocampal neurons[23–25]. It is notable that the cellular phenotype produced by acute (~16 hr) application or overexpression of A $\beta$  is similar to what is observed in transgenic mice overexpressing APP for months. This gives credence to the view that identifying mechanisms produced by transient overexpression or exposure to A $\beta$  will give insight into mechanisms observed following chronic exposure to A $\beta$ .

The depressive effect of A $\beta$  on excitatory transmission appears to use signaling pathways used by long-term depression (LTD)[19,20,26]; for instance the activity of calcineurin, a calcium-activated phosphatase, is required for LTD and A $\beta$ -induced synaptic depression. Recent studies have also found that caspase-3, an element of the apoptotic pathway, participates in both A $\beta$ -induced synaptic depression and LTD [27,28]. The effects of A $\beta$  on synapses are similar to those seen during LTD: loss of glutamate receptors and dendritic spines. A recent study showed that LTD can be facilitated by A $\beta$  [29], suggesting that

normal synaptic activity patterns in the brain may lead to an LTD-like synaptic weakening in the presence of A $\beta$ . Effects of A $\beta$  on long-term potentiation (LTP) have also been widely documented [15,26,30–35]. Nevertheless, it is somewhat perplexing as to why no decrement of LTP is observed in CA1 hippocampus from one strain of APP transgenic mice [16]. These mice do show a decrement in excitatory transmission in CA1 hippocampus [16]. Perhaps the intact LTP is due to lower levels of A $\beta$  reached in these transgenic mice or some issue related to genetic background of these mice; e.g. the genetic background rescues the effects of A $\beta$  on LTP in these mice (although it is notable that LTP in the dentate gyrus appears not to be rescued in these mice). In general, these studies provide the impression that an important link exists between A $\beta$ , glutamatergic transmission and synaptic plasticity.

## NMDA-R mediating effects of A $\beta$

The A $\beta$ -induced depression of glutamatergic transmission was first shown to be blocked by the NMDA-R antagonist D-APV [15]. Subsequently, NMDA-R antagonists were shown to block the structural effects of A $\beta$  [19,20] in organotypic slices. Using NMDA-R antagonists to rescue LTP (from the effects of A $\beta$ ) is somewhat counterintuitive, since LTP itself requires the function of NMDA-Rs. However, this has been achieved in two different manipulations. In one, organotypic slices overexpressing APP were exposed to an NMDA-R antagonist for 60 min prior to the induction of LTP and quickly washed out before LTP induction. Such a protocol rescued LTP, as measured by an increase in spine size [11]. In a separate strategy, selective blockade of NMDA-Rs containing NR2B rescued the block of LTP by A $\beta$  [36–38].

Our recent unpublished studies suggest an unusual mechanistic role of NMDA-Rs in the actions of A $\beta$ . We examined the effects of various NMDA-R antagonists on A $\beta$ -induced depression of glutamatergic synaptic transmission. Antagonists at the glutamate binding site (which lies in the NR2 subunit) block the effects of A $\beta$ . However, antagonists at the NMDA-R channel pore or at the glycine binding site, which lies in the NR1 subunit, have no effect on A $\beta$ -induced synaptic depression. The most efficacious drugs in blocking the effects of A $\beta$  are those acting on the NR2B subunit. These findings suggest that conformational changes in NR2B, but not calcium flux through the NMDA-R channel pore are important in the actions of A $\beta$ . Two such ligand-dependent, ion-flux independent functions of NMDA-Rs have been previously reported: ligand-driven endocytosis of NMDA-Rs, mediated by dephosphorylation of tyrosine residues close to the transmembrane domain [39] and ligand-driven exchange of NR2B-containing- to NR2A-containing NMDA-Rs [40]. It will be important to determine if mechanisms participating in these previously described ligand-driven NMDA-R functions participate in A $\beta$ -induced synaptic depression. Other important questions: are conformational changes in NR2B necessary for the NMDA-R to bind to other molecules that participate in A $\beta$ -induced synaptic depression? Or do such conformational changes trigger intracellular signaling that leads to synaptic depression? Does A $\beta$  activate ion-flux through native NMDA-R in neurons, as recently reported [41] for recombinant receptors expressed in oocytes?

NMDA-Rs have also been suggested to mediate the effects of tau, a protein implicated in Alzheimer's disease and thought to be a downstream effector of elevated A $\beta$  [42]. In one study, tau, which has traditionally been considered as an axonal protein, is driven into dendritic spines once it becomes hyperphosphorylated [43]. In this location tau perturbs synaptic function by removing AMPA-R and NMDA-R from synapses. In another study [44] tau is proposed to transport the tyrosine kinase fyn to dendritic spines where it can phosphorylate the NR2 subunit of NMDA-Rs. Such phosphorylation increases the association with PSD-95 which increases the excitotoxic effects of NMDA-Rs. It is notable that this increased toxicity occurs in the absence of increase NMDA-R synaptic currents,

again suggesting that conformational changes in NMDA-R, or association with other molecules is important for the mechanism by which NMDA-R cause A $\beta$ -induced deleterious effects.

## The A $\beta$ receptor

But is the NMDA-R ‘the’ A $\beta$  receptor? One prominent recent study [10] has provided evidence that the EphB2 protein, a surface tyrosine kinase that binds the NMDA-R [45], is ‘the’ A $\beta$  receptor. This study provides evidence that A $\beta$  binds to EphB2, leads to EphB2 degradation, leading to loss of NMDA-R function and reduced LTP. It is notable that A $\beta$  has been observed to bind to synapses (in dissociated cultured neurons); although curiously A $\beta$  does not bind to all excitatory synapses [46]. Since all excitatory synapses appear to have NMDA-Rs [47], perhaps A $\beta$  binds to synapses that have EphB2 associated with NMDA-Rs. It will be important to determine if blockade of NMDA-R prevents the A $\beta$ -induced loss of EphB2. Also, these studies were conducted in dentate gyrus granule cells, which appear to respond differently to A $\beta$  as compared to other brain regions (e.g. CA1 hippocampus); it will thus be important to determine if the EphB2 receptor acts as the A $\beta$  receptor in all brain regions. In short, this study suggests that the NMDA-R downregulation is a key downstream effect of A $\beta$ .

## Neuronal activity and A $\beta$ production: role of NMDA-Rs

Several years ago our laboratory found that increased neuronal activity in cultured organotypic hippocampal slices made from mice overexpressing APP led to increased amount of A $\beta$  detected in the media [15]. This increase in A $\beta$  was found not to depend on basal levels of NMDA-R activity; the effect of increased levels of NMDA-R activation on A $\beta$  secretion was not examined. The neuronal activity-dependence of A $\beta$  secretion was demonstrated using in vivo microdialysis techniques in a subsequent study [48]. These studies have argued that the activity dependence lies in the presynaptic compartment [48] suggesting no NMDA-R dependence. However, more recent studies present a more conflicting picture of the role of NMDA receptors in the production of A $\beta$ . Some studies suggest that NMDA-R activation lowers A $\beta$  production[49,50]. A study in dissociated cultured neurons suggests that activation of extra-synaptic NMDA-Rs contribute to the release of A $\beta$  [51], while an in vivo study indicates that the level of NMDA-R activation may control the effect on A $\beta$  production: low levels of NMDA-R activation increase while higher levels reduce A $\beta$  production[52]. The role of NMDA-R in production of A $\beta$  is likely complex and requires more investigation.

## Concluding remarks

NMDA-Rs appear to mediate several A $\beta$ -induced effects. Delineating the exact mechanistic role of NMDA receptors in such effects will be important if a therapeutic target is sought. Since NMDA-Rs are necessary for normal neuronal function, blockade of NMDA-Rs using standard inhibitors is unlikely to have beneficial effects. However, A $\beta$  may drive some abnormal conformation of the NMDA-R, or deleteriously enhance the association of the NMDA-R with some molecule. Such events may be potential targets that do not disrupt normal NMDA-R function.

### Highlights

>The multiple potential roles of NMDA receptors in the actions of beta amyloid on synapses are considered. >Specific examples of the impact of beta amyloid on synapses

are discussed. > Several mechanisms by which the NMDA receptor may mediate the actions of beta amyloid on synapses are proposed.

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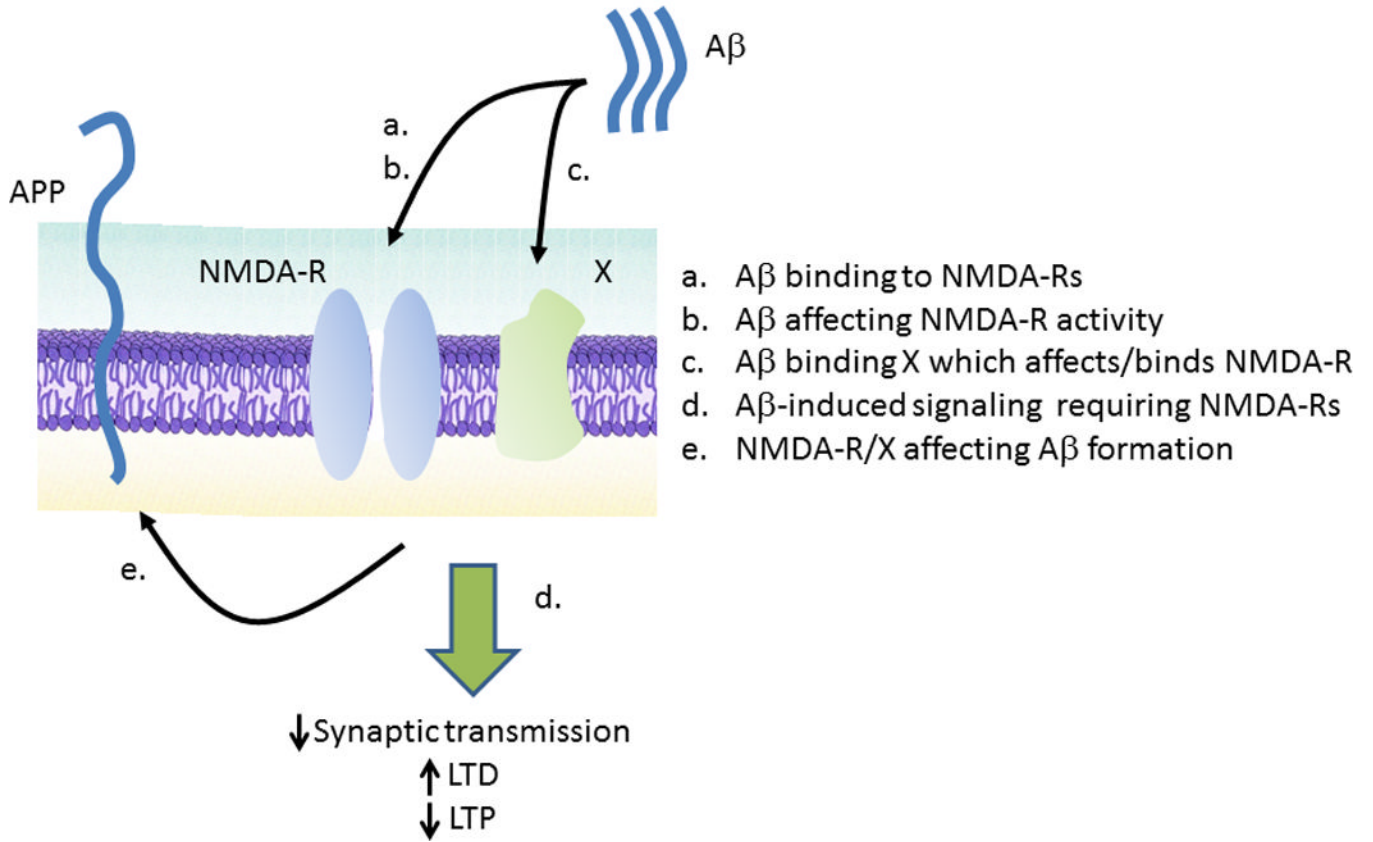
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### Potential roles for NMDA-Rs in Aβ effects



**Figure 1.** Several potential roles for NMDA-Rs in the effects of Aβ are depicted.