



Different A β 43 deposition patterns in the brains of aged dogs, sea lions, and cats

Kei TAKAHASHI¹⁾, James K CHAMBERS^{1)*}, Yuta TAKAICHI¹⁾, Kazuyuki UCHIDA¹⁾¹⁾Laboratory of Veterinary Pathology, Graduate School of Agricultural and Life Science, The University of Tokyo, Tokyo, Japan

ABSTRACT. Cerebral amyloid β (A β) deposition is a pathological hallmark of Alzheimer's disease (AD). There are several molecular species of A β , including A β 40, A β 42, and A β 43, and the pathological roles of A β 43 have attracted particular attention in recent years. A β 43 is mainly deposited as senile plaques (SPs) in AD brains, and is known to be more amyloidogenic and neurotoxic than A β 42 and A β 40. A β 40 and A β 42 deposition have been demonstrated in several animal species, while A β 43 deposition has not been studied in animals. The brains of sea lions, dogs, and cats exhibit unique age-related A β pathologies. In the present study, the deposition patterns of A β 40, A β 42, and A β 43 were examined immunohistochemically in the brains of aged dogs (n=52), sea lions (n=5), and cats (n=17). In dogs, most cerebral amyloid angiopathy (CAA) lesions and primitive SPs were positive for A β 42, A β 43, and A β 40. However, diffuse SPs and capillary CAA lesions were negative for A β 40. In sea lions, all SPs and most CAA lesions were positive for A β 42, A β 43, and A β 40, while capillary CAA lesions were negative for A β 40. In cats, A β 42-immunopositive granular aggregates and arteriole and capillary CAA lesions were positive for A β 43, but negative for A β 40. Double-labelling immunohistochemistry revealed the co-localization of A β 42 and A β 43. These findings suggest that A β 43 and A β 42 are frequently deposited in the brains of Carnivora animals and may play an important role in A β pathology.

KEYWORDS: A β 43, Carnivora, cerebral amyloid angiopathy, senile plaque

J. Vet. Med. Sci.

84(12): 1563–1573, 2022

doi: 10.1292/jvms.22-0386

Received: 18 August 2022

Accepted: 14 October 2022

Advanced Epub:

25 October 2022

Alzheimer's disease (AD) pathology is characterized by the deposition of amyloid β (A β) in the brain neuropil as senile plaques (SPs) and the accumulation of hyperphosphorylated tau in neurons as neurofibrillary tangles. The accumulation of A β in the vascular walls of the brain, which is known as cerebral amyloid angiopathy (CAA), is also seen in AD patients' brains. CAA is further classified into CAA-type1, which involves the capillaries in addition to the leptomeningeal and cortical small arteries, and CAA-type2, which does not involve capillaries [43].

A β is produced through the cleavage of the APP into peptides of either 48 or 49 amino acids by γ -secretase. *In vitro* study of human cells or Chinese hamster ovary cells revealed that A β 49 is then sequentially cleaved at three amino acids in its C-terminus to produce A β 46, A β 43, and A β 40, and A β 48 is cleaved in a similar manner to produce A β 45 and A β 42 (Fig. 1) [4, 33, 42]. Among these molecules, A β 40 and A β 42 are the most studied A β isoforms. *In vitro* study of human neuroblastoma cell showed that A β 40 and A β 42 are produced at a ratio of 9:1 [1]. Also, the amount of A β 40 in human cerebrospinal fluid is higher than A β 42 [32, 38]. A β 40 is the predominant species in CAA, whereas the more aggregation-prone A β 42 is the main component of SPs in the brains of AD patients [17, 35, 49].

Recent research has pointed to the potential of A β 43, which has an additional threonine residue in its C-terminus relative to A β 42, to contribute to the pathogenesis of AD. Some studies have suggested that A β 43 is highly amyloidogenic [13] and neurotoxic [7, 37]. A β 43 is often found in the cores of SPs in the brains of AD patients and transgenic mouse models [19, 21, 37, 47].

SPs and CAA have been reported in non-human primates [9, 14, 16, 18, 31] and other mammals. The patterns of A β accumulation differ among the various types of animals belonging to Carnivora. In the suborder Caniformia, aged dogs [10, 29, 45], bears [46], and pinnipeds (sea lions, seals, and walrus) [40, 41] develop numerous SPs and CAA lesions in their brains. On the other hand, Feliformia species, such as domestic cats [11, 15, 28], leopard cats [12], and cheetahs [39], exhibit no SPs, but show small granular deposits of A β in the neuropil and a few CAA lesions. In Carnivora brains, A β 40 and A β 42 are the most studied A β isoforms, which is also true for the human brain. In contrast, A β 43 deposition in Carnivora brains has not been studied.

In the present study, we investigated the accumulation of A β 43 in the neuropil and vascular walls in aged Carnivora animals (dogs,

*Correspondence to: Chambers JK: achamber@mail.ecc.u-tokyo.ac.jp, Laboratory of Veterinary Pathology, Graduate School of Agricultural and Life Science, The University of Tokyo, Tokyo 113-8657, Japan

(Supplementary material: refer to PMC <https://www.ncbi.nlm.nih.gov/pmc/journals/2350/>)

©2022 The Japanese Society of Veterinary Science



This is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial No Derivatives (by-nc-nd) License. (CC-BY-NC-ND 4.0: <https://creativecommons.org/licenses/by-nc-nd/4.0/>)

sea lions, and cats). As a result, it was found that each of these animals exhibit specific A β 43 deposition patterns in their brains. We compared A β 43 deposition with the deposition of other A β isoforms, examined the differences between each type of animal, and discussed the effects of A β 43 on A β deposition in aged Carnivora brains.

MATERIALS AND METHODS

Tissue samples and case selection

Brain tissues from 52 dogs, 5 sea lions, and 17 cats, which were confirmed to exhibit A β 42 deposition in their brain parenchyma and/or blood vessels, were examined (Supplementary Tables 1–3). The frontal cortex region was selected for the examination. All samples were obtained through routine necropsies performed at the Laboratory of Veterinary Pathology, The University of Tokyo. The brains were fixed in 10% phosphate-buffered formalin, coronally sliced, and then conventionally embedded in paraffin blocks.

Immunohistochemistry

Consecutive sections were used for immunohistochemistry. After deparaffinization and rehydration, the tissue sections were pretreated with 98% formic acid for 5 min. To deactivate endogenous peroxidase, the sections were immersed in 10% hydrogen peroxide in methanol for 5 min, before being immersed in 8% skimmed milk in Tris-buffered saline (TBS) in order to prevent non-specific binding of the antibodies. The following primary antibodies were used: rabbit anti-A β 43 (1:100, IBL, Fujioka, Japan), mouse anti-A β 42 (clone 12F4, 1:1,000, Millipore, Temecula, CA, USA), and mouse anti-A β 40 (clone 11A5-B10, 1:1,000, Millipore) antibodies. According to the product datasheets, these antibodies do not react with non-target A β isoforms. After incubation had been performed with each primary antibody at 4°C overnight, the immunolabeled antigens were visualized using the Dako Envision + System (Dako, Glostrup, Denmark). In brief, the sections were incubated with peroxidase-conjugated polymer at 37°C for 40 min, reacted with 0.05% 3'-diaminobenzidine plus 0.03% hydrogen peroxide in Tris-hydrochloric acid buffer, and then counterstained with hematoxylin.

Double-labeling immunohistochemistry

The double-labeling immunohistochemistry was performed to examine the relationship between primitive plaques and capillaries in dogs. Sections were initially incubated with the mouse anti-A β 42 and then visualized with 0.05% 3'-diaminobenzidine plus 0.03% hydrogen peroxide in Tris-hydrochloric acid buffer as a chromogen. Secondary, the slides were incubated with the rabbit anti-collagen IV (1:500, abcam, Cambridge, UK) and visualized with New Fuchsin (Nichirei Corp., Tokyo, Japan) as a chromogen, and then counterstained with hematoxylin.

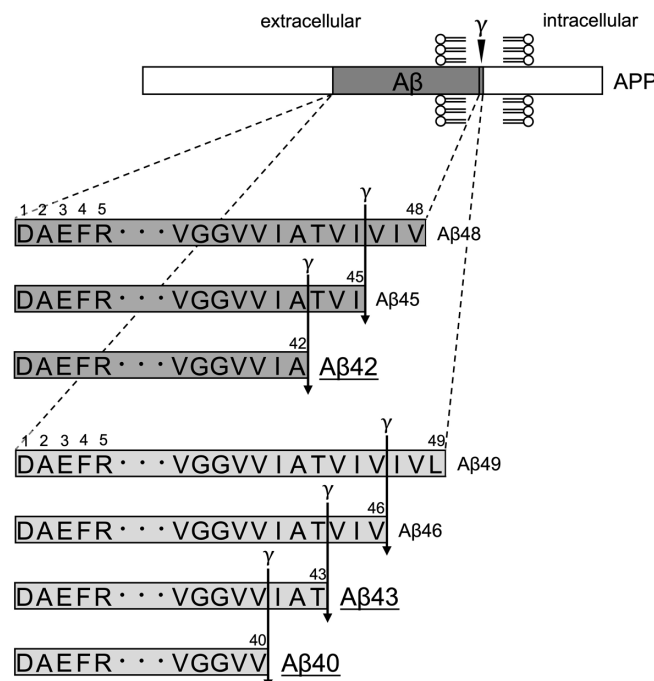


Fig. 1. Schematic diagram of A β 43, A β 42, and A β 40 processing. A β 48 and A β 49 are produced through the cleavage of the transmembrane domain of the amyloid precursor protein by γ -secretase. A β 49 is then sequentially cleaved by γ -secretase to produce A β 43 and A β 40 (A β 49 \rightarrow A β 46 \rightarrow A β 43 \rightarrow A β 40). A β 48 is cleaved in the same manner to produce A β 42 (A β 48 \rightarrow A β 45 \rightarrow A β 42). This schematic diagram was prepared with reference to Bolduc *et al.* [4], and Takami *et al.* [42].

Double-labeling immunofluorescence

To examine the co-localization of A β 43 and A β 42, double-labeling immunofluorescence was performed. The sections were deparaffinized and rehydrated, and antigen retrieval was performed using formic acid. After being incubated with the primary antibodies at 4°C overnight, the sections were washed with TBS. As secondary antibodies, Alexa Fluor 488-conjugated goat anti-mouse IgG (1:100, Life Technologies, Eugene, OR, USA) and Alexa Fluor 594-conjugated goat anti-rabbit IgG (1:100, Life Technologies) antibodies were mixed in TBS. The sections were incubated with secondary antibodies at 37°C for 1 hr and then mounted with Vectashield (H-1500, Vector Laboratories, Burlingame, CA, USA). The immunolabeled antigens were visualized using a Carl Zeiss LSM700 Confocal Laser Scanning Microscope (Carl Zeiss, Tokyo, Japan).

Scoring of A β deposition

The A β deposits in the brain parenchyma and blood vessels were semi-quantitatively scored. The scoring system for parenchymal A β deposition was comprised of the following 4 categories: 0, no A β deposits; 1, mild (A β deposits were detected in less than 25% of the cortical circumference); 2, moderate (A β deposits were detected in 25% to 50% of the cortical circumference); 3, severe (A β deposits were detected in more than 50% of the cortical circumference). A β deposition in the meningeal blood vessels was scored as 0, no A β deposits; 1, mild (A β deposits were detected in less than 25% of the meningeal blood vessels); 2, moderate (A β deposits were detected in 25% to 50% of the meningeal blood vessels); 3, severe (A β deposits were detected in more than 50% of the meningeal blood vessels). To score cortical CAA (affecting arterioles and capillaries), areas of 0.55 mm² in which more than 10 A β -positive vessels were detected were defined as “strongly CAA-affected areas”. The following scoring system was used for cortical CAA: 0, no A β deposits; 1, mild (less than 10 A β -positive blood vessels or only one strongly CAA-affected area was seen in the entire cortical circumference); 2, moderate (2 to 4 strongly CAA-affected areas were seen in the entire cortical circumference); 3, severe (more than 5 strongly CAA-affected areas were seen in the entire cortical circumference). These scoring systems were designed for the present study. The Friedman test and the Bonferroni post-hoc method were used to compare the score distribution for A β 43 with those for the other A β subtypes (A β 42 and A β 40). *P*-values of <0.05 were considered significant. All statistical analyses were performed with EZR (Saitama Medical Center, Jichi Medical University, Saitama, Japan), which is a graphical user interface for R (The R Foundation for Statistical Computing, Vienna, Austria) [24].

RESULTS

Immunohistochemical features of parenchymal A β deposits

In dogs, A β 42 deposits were observed in the cortical parenchyma in 90.3% (47/52) of the examined dogs (Table 1 and Supplementary Table 1) and were mostly observed as SPs in the cerebral cortex. There were two types of SP: most SPs were diffuse plaques (Fig. 2A), whereas primitive plaques with dense aggregates were rarely seen in the canine brain (Fig. 2D). The diffuse plaques were positive for

Table 1. Score distribution of Amyloid- β (A β) 42, A β 43, and A β 40 in examined animals

Examined animals (n=cases) and lesions		A β deposition score											
		A β 42				A β 43				A β 40			
		0	1	2	3	0	1	2	3	0	1	2	3
Dog (n=52)													
Parenchymal deposition	Cases	5	21	9	17	19	30	3	0	44	8	0	0
	(%)	(9.6)	(40.4)	(17.3)	(32.7)	(36.5)	(57.7)	(5.8)	(0)	(84.6)	(15.4)	(0)	(0)
Meningeal CAA*	Cases	0	10	9	33	0	18	14	20	14	33	4	1
	(%)	(0)	(19.2)	(17.3)	(63.5)	(0)	(34.6)	(26.9)	(38.5)	(26.9)	(63.5)	(7.7)	(1.9)
Cortical CAA**	Cases	4	29	9	10	4	31	7	10	36	16	0	0
	(%)	(7.7)	(55.8)	(17.3)	(19.2)	(7.7)	(59.6)	(13.5)	(19.2)	(69.2)	(30.8)	(0)	(0)
Sea lion (n=5)													
Parenchymal deposition	Cases	1	0	1	3	1	1	2	1	1	4	0	0
	(%)	(20)	(0)	(20)	(60)	(20)	(20)	(40)	(20)	(20)	(80)	(0)	(0)
Meningeal CAA	Cases	0	0	2	3	0	4	0	1	0	4	1	0
	(%)	(0)	(0)	(40)	(60)	(0)	(80)	(0)	(20)	(0)	(80)	(20)	(0)
Cortical CAA	Cases	0	1	1	3	0	1	2	2	0	4	1	0
	(%)	(0)	(20)	(20)	(60)	(0)	(20)	(40)	(40)	(0)	(80)	(20)	(0)
Cat (n=17)													
Parenchymal deposition	Cases	1	4	8	4	1	5	8	3	17	0	0	0
	(%)	(5.9)	(23.5)	(47.1)	(23.5)	(5.9)	(29.4)	(47.1)	(17.6)	(100)	(0)	(0)	(0)
Meningeal CAA	Cases	17	0	0	0	17	0	0	0	17	0	0	0
	(%)	(100)	(0)	(0)	(0)	(100)	(0)	(0)	(0)	(100)	(0)	(0)	(0)
Cortical CAA	Cases	8	6	3	0	10	4	3	0	17	0	0	0
	(%)	(47.1)	(35.3)	(17.6)	(0)	(58.8)	(23.6)	(17.6)	(0)	(100)	(0)	(0)	(0)

*CAA: cerebral amyloid angiopathy, **cortical CAA: CAA in both arteriole and capillary.

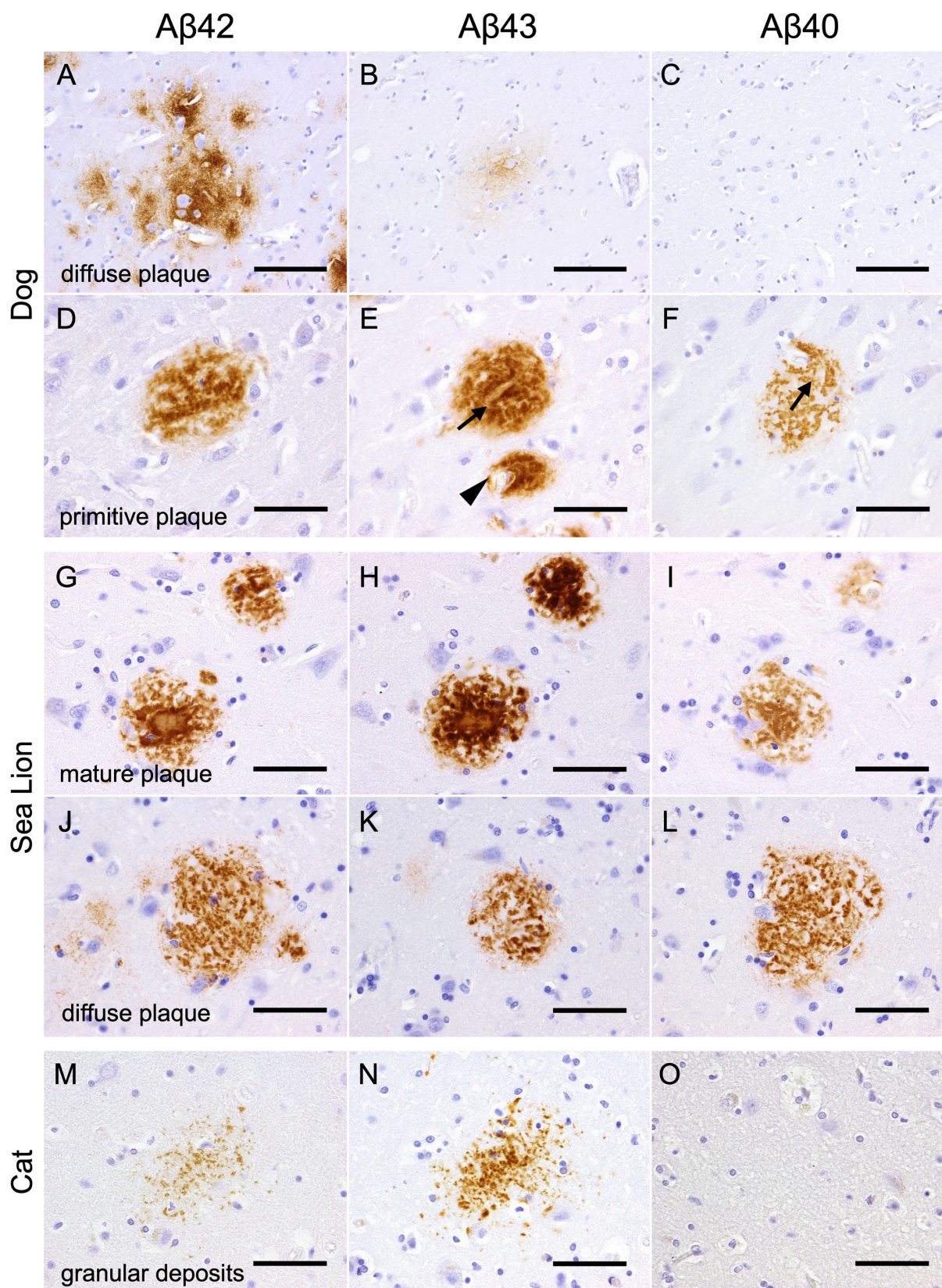


Fig. 2. A–O: Serial sections of parenchymal A β deposits in dog (diffuse plaque: case No. D7 A–C, primitive plaque: case No. D35 D–F), sea lion (mature plaque: case No. S5, diffuse plaque: case No. S4), and cat (case No. C17) brains. The diffuse plaque in the dog was positive for A β 42, partially positive for A β 43, and negative for A β 40 (A–C), whereas the primitive plaque in the other dog was positive for all A β subtypes examined (D–F). The primitive plaque contained tubular structures (arrows) and was located adjacent to a capillary CAA lesion with dispersed A β aggregates (arrowhead). In the sea lions, both the mature and diffuse plaques were positive for A β 42 (G, J), A β 43 (H, K), and A β 40 (I, L). In the cat, the small granular deposits of A β 42 (M) were also positive for A β 43 (N), but negative for A β 40 (O). Scale bars: 100 μ m (A–C), 50 μ m (D–O).

A β 42, partially and weakly positive for A β 43, and negative for A β 40 (Fig. 2A–C), while the primitive plaques were positive for A β 43 and A β 40 to a similar extent (Fig. 2E, 2F). Some primitive plaques contained blood vessel-like structures (Fig. 2E, 2F, arrows) and were located adjacent to capillary CAA lesions with dispersed A β aggregates (Fig. 2E, arrowhead). In double-labeled immunohistochemistry, the vessel-like structures were positive for collagen IV and considered capillaries (Supplementary Fig. 1).

In sea lions, A β 42 deposits were observed in the cortical parenchyma in 80% (4/5) of the examined sea lions (Table 1 and Supplementary Table 2). Two types of SP were found in their brains: mature plaques with a central core (Fig. 2G) and diffuse plaques without a dense core (Fig. 2J). The SPs were also positive for A β 43 and A β 40 (Fig. 2H, 2I, 2K, 2L). The cores of mature plaques were strongly immunopositive for A β 43 (Fig. 2H).

In cats, A β 42 deposits were observed in the cortical parenchyma in 94.1% (16/17) of the examined cats (Table 1 and Supplementary Table 3). These deposits were composed of small granular aggregates of A β 42 and did not form plaques (Fig. 2M). The granules were also positive for A β 43, but negative for A β 40 (Fig. 2N, 2O).

Score distributions for parenchymal A β deposits

Among the 52 examined dogs, no A β 42 deposits were seen in 5 cases (9.6%), while mild A β 42 deposition was observed in 21 cases (40.4%), moderate A β 42 deposition was seen in 9 cases (17.3%), and severe A β 42 deposition was noted in 17 cases (32.7%) ($P < 0.01$). No A β 43 deposits were seen in 19 cases (36.5%), while mild A β 43 deposition was observed in 30 cases (57.7%) and moderate A β 43 deposition was seen in 3 cases (5.8%). No A β 40 deposits were seen in 44 cases (84.6%), while mild A β 40 deposition was observed in 8 cases (15.4%) ($P < 0.01$) (Table 1 and Fig. 3A).

Among the 5 examined sea lions, no A β 42 deposits were seen in 1 case (20%), while moderate A β 42 deposition was observed in 1 case (20%) and severe A β 42 deposition was noted in 3 cases (60%) ($P = 0.45$). No A β 43 deposits were seen in 1 case (20%), while mild A β 43 deposition was observed in 1 case (20%), moderate A β 43 deposition was noted in 2 cases (40%), and severe A β 43 deposition was seen in 1 case (20%). No A β 40 deposits were seen in 1 case (20%), while mild A β 40 deposition was observed in 4 cases (80%) ($P = 0.52$) (Table 1 and Fig. 3B).

Among the 17 examined cats, no A β 42 deposits were seen in 1 case (5.9%), while mild A β 42 deposition was observed in 4 cases (23.5%), moderate A β 42 deposition was noted in 8 cases (47.1%), and severe A β 42 deposition was seen in 4 cases (23.5%) ($P = 1.0$). No A β 43 deposits were seen in 1 case (5.9%), while mild A β 43 deposition was observed in 5 cases (29.4%), moderate A β 43 deposition was noted in 8 cases (47.1%), and severe A β 43 deposition was seen in 3 cases (17.6%). No A β 40 deposits were seen in any of the 17 cases (100%) ($P < 0.01$) (Table 1 and Fig. 3C).

Immunohistochemical features of CAA

Meningeal CAA: Meningeal CAA was defined as A β 42 deposition in the meningeal blood vessel walls. In dogs, A β 42 deposits were observed in the meningeal blood vessels (Fig. 4A) of all examined dogs (Table 1 and Supplementary Table 1). These blood vessels were also positive for A β 43 and A β 40 (Fig. 4B, 4C). The degree of deposition of each subtype in a meningeal arteriole wall was in the order of A β 42 > A β 43 > A β 40. Each A β subtypes was deposited in the same area of an arteriole.

In sea lions, A β 42 deposits were observed in the meningeal blood vessels (Fig. 4D) of all examined sea lions (Table 1 and Supplementary Table 2). These blood vessels were also positive for A β 43 and A β 40 (Fig. 4E, 4F). The degree of deposition of each subtype in a meningeal arteriole wall was in the order of A β 42 > A β 43 > A β 40. Each A β subtypes was deposited in the same area of an arteriole.

In cats, no meningeal CAA was seen in any case, and all meningeal blood vessels were negative for A β 42, A β 43, and A β 40 (Fig. 4G–I).

Cortical CAA: Cortical CAA was defined as when A β 42 deposition was seen in arteriole and/or capillary walls. In dogs, A β 42 deposits were observed in the cortical blood vessels (Fig. 5A, 5D) of 92.3% (48/52) of the examined dogs (Table 1 and Supplementary Table 1). The arteriole walls were also positive for A β 43 and A β 40 (Fig. 5B, 5C), and the deposition pattern of A β subtypes in the same vessel wall was similar to that of meningeal vessel walls. The capillary walls were positive for A β 43 to the same extent as A β 42 but negative for A β 40 (Fig. 5E, 5F). A β 42 and A β 43 was deposited in the same area of the vessels.

In sea lions, A β 42 deposits were observed in the cortical blood vessels (Fig. 5G, 5J) of all examined sea lions (Table 1 and Supplementary Table 2). The arteriole walls were also positive for A β 43 and A β 40 (Fig. 5H, 5I), and the deposition pattern of A β

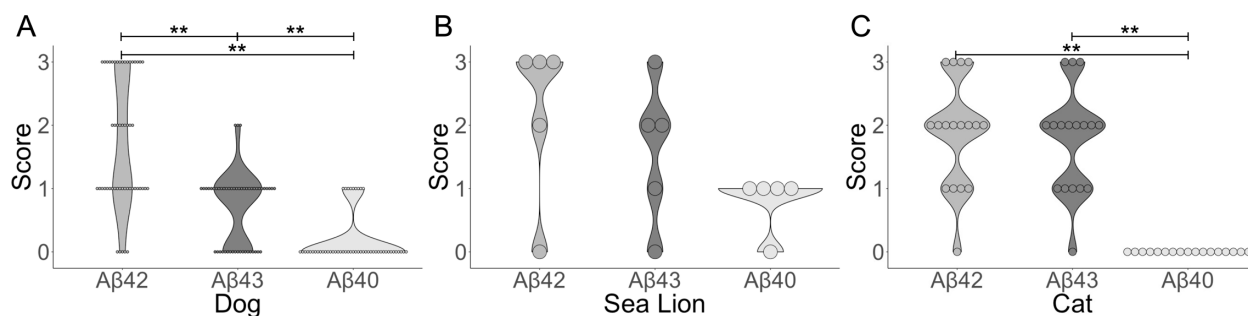


Fig. 3. Score distributions for parenchymal A β deposition in dogs (A), sea lions (B), and cats (C). ** $P < 0.01$.

subtypes in the same vessel wall was similar to that of meningeal vessel walls. The capillary walls were positive for A β 43 to the same extent as A β 42 but negative for A β 40 (Fig. 5K, 5L). A β 42 and A β 43 was deposited in the same area of the vessels.

In cats, A β 42 deposits were observed in the cortical blood vessels (Fig. 5M, 5P) of 52.9% (9/17) of the examined cats (Table 1 and Supplementary Table 3). The arteriole and capillary walls were positive for A β 43 (Fig. 5N, 5Q), but negative for A β 40 (Fig. 5O, 5R).

Score distributions for CAA

Meningeal CAA: In the 52 examined dogs, mild A β 42 deposition was observed in 10 cases (19.2%), moderate A β 42 deposition was seen in 9 cases (17.3%), and severe A β 42 deposition was noted in 33 cases (63.5%) ($P < 0.01$). In addition, mild A β 43 deposition was observed in 18 cases (34.6%), moderate A β 43 deposition was seen in 14 cases (26.9%), and severe A β 43 deposition was noted in 20 cases (38.5%). No A β 40 deposition was seen in 14 cases (26.9%), while mild A β 40 deposition was observed in 33 cases (63.5%), moderate A β 40 deposition was seen in 4 cases (7.7%), and severe A β 40 deposition was noted in 1 case (1.9%) ($P < 0.01$) (Table 1 and Fig. 6A).

In the 5 examined sea lions, moderate A β 42 deposition was observed in 2 cases (40%), and severe A β 42 deposition was seen in 3 cases (60%) ($P = 0.28$). Mild A β 43 deposition was observed in 4 cases (80%), and severe A β 43 deposition was noted in 1 case (20%). Mild A β 40 deposition was observed in 4 cases (80%), and moderate A β 40 deposition was noted in 1 case (20%) ($P = 1.00$) (Table 1 and Fig. 6B).

In the 17 examined cats, no deposits of any of the three molecular species of A β (A β 42, A β 43, and A β 40) were seen in any case (Table 1 and Fig. 6C).

Cortical CAA: In the 52 examined dogs, no A β 42 deposits were seen in 4 cases (7.7%), while mild A β 42 deposition was observed in 29 cases (55.8%), moderate A β 42 deposition was noted in 9 cases (17.3%), and severe A β 42 deposition was seen in 10 cases (19.2%)

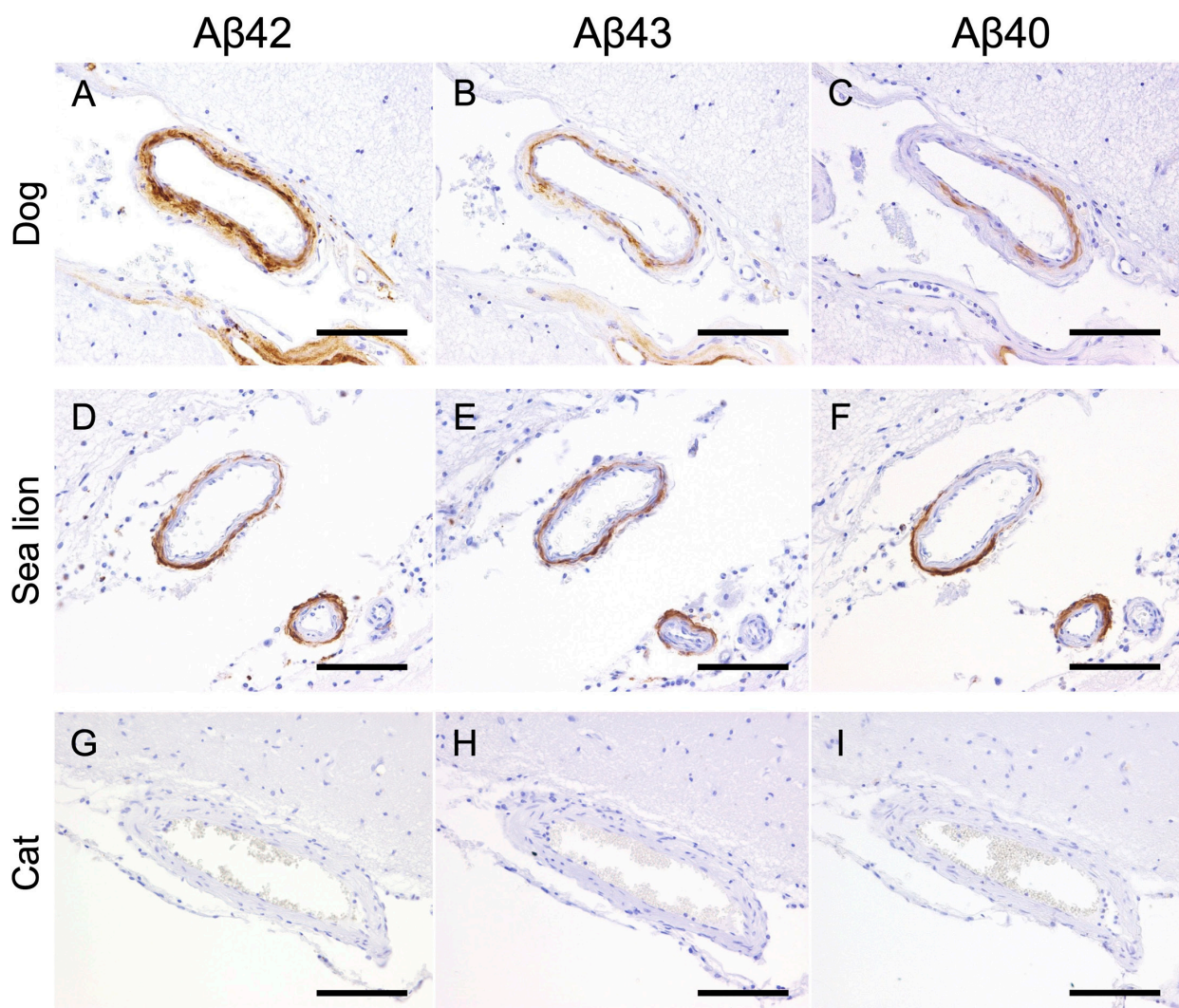


Fig. 4. A–I: Serial sections of meningeal CAA lesions in a dog (case No. D51: A–C), sea lion (case No. S4: D–F), and cat (case No. C17: G–I). In the dog and sea lion, the A β deposits in the meningeal blood vessels were positive for A β 42 (A, D), A β 43 (B, E), and A β 40 (C, F). In the cat, the meningeal blood vessels were negative for A β 42, A β 43, and A β 40 (G–I). Scale bar: 100 μ m.

($P=1.0$). No A β 43 deposits were seen in 4 cases (7.7%), while mild A β 43 deposition was observed in 31 cases (59.6%), moderate A β 43 deposition was seen in 7 cases (13.5%), and severe A β 43 deposition was noted in 10 cases (19.2%). No A β 40 deposits were seen in 36 cases (69.2%), while mild A β 40 deposition was observed in 16 cases (30.8%) ($P<0.01$) (Table 1 and Fig. 6D).

In the 5 examined sea lions, mild A β 42 deposition was observed in 1 case (20%), moderate A β 42 deposition was seen in 1 case (20%), and severe A β 42 deposition was noted in 3 cases (60%) ($P=1.00$). Mild A β 43 deposition was observed in 1 case (20%), moderate A β 43 deposition was seen in 2 cases (40%), and severe A β 43 deposition was noted in 2 cases (40%). Mild A β 40 deposition was observed in 4 cases (80%), and moderate A β 40 deposition was seen in 1 case (20%) ($P=0.27$) (Table 1 and Fig. 6E).

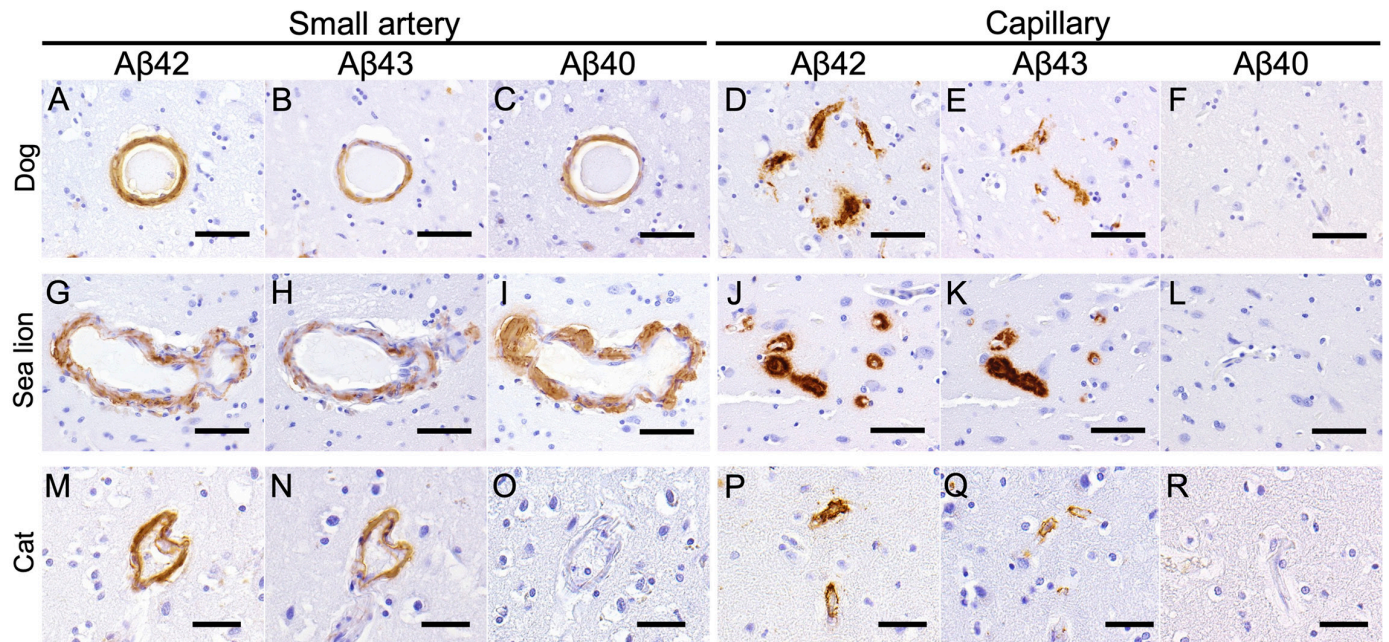


Fig. 5. A–R: Serial sections of cortical CAA lesions (arteriole and capillary) in a dog (case no. D51: A–F), sea lion (case No. S5: G–L), and cat (case No. C17: M–R). In the dog and sea lion, the small artery CAA lesions were positive for A β 42 (A, G), A β 43 (B, H), and A β 40 (C, I). In these animals, the capillary CAA lesions were positive for A β 42 (D, J) and A β 43 (E, K), but negative for A β 40 (F, L). In the cat, the small artery and capillary CAA lesions were positive for A β 42 (M, P) and A β 43 (N, Q), but negative for A β 40 (O, R). Scale bars: 50 μ m (A–L), 30 μ m (M–R).

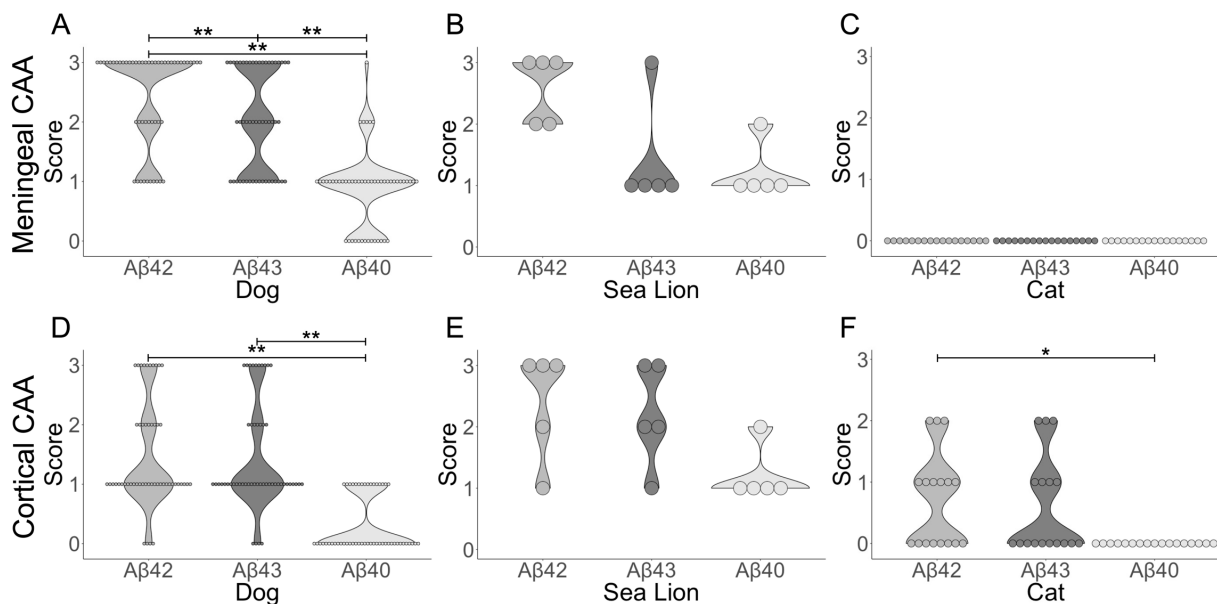


Fig. 6. Score distribution for CAA in dogs, sea lions, and cats. A–C show the score distributions for meningeal CAA in dogs (A), sea lions (B), and cats (C). D–F show the score distributions for cortical CAA in dogs (D), sea lions (E), and cats (F). * $P<0.05$; ** $P<0.01$.

In the 17 examined cats, no A β 42 deposition was seen in 8 cases (47.1%), while mild A β 42 deposition was observed in 6 cases (35.3%), and moderate A β 42 deposition was noted in 3 cases (17.6%) ($P=1.0$). No A β 43 deposition was seen in 10 cases (58.8%), while mild A β 43 deposition was observed in 4 cases (23.6%), and moderate A β 43 deposition was noted in 3 cases (17.6%). No A β 40 deposition was seen in any of the 17 cases (100%) ($P=0.058$) (Table 1 and Fig. 6F).

Double labelling immunofluorescence for A β 43 and A β 42

In dogs, the diffuse plaques were positive for A β 42 but the co-localization of A β 43 and A β 42 was not observed in the present study (Fig. 7A). However, the co-localization of A β 43 and A β 42 was observed in the primitive plaques as well as in the meningeal CAA and cortical (capillary) CAA lesions (Fig. 7B–D). In sea lions, the co-localization of A β 43 and A β 42 was observed in the diffuse plaques and mature plaques and in the meningeal and cortical (capillary) CAA lesions (Fig. 7E–H). The cores of the mature plaques

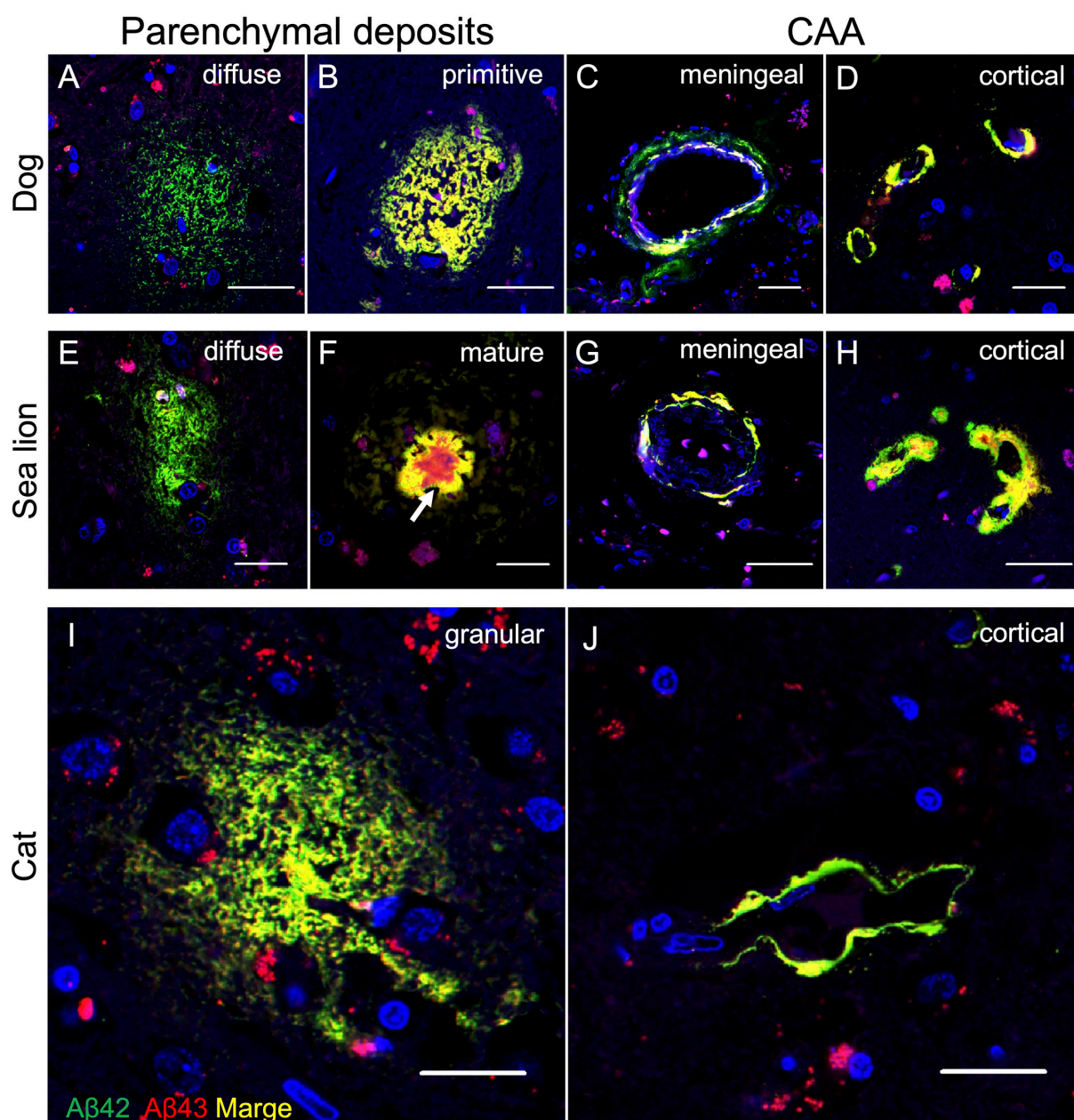


Fig. 7. Double-labeled immunofluorescence of A β 43 (red) and A β 42 (green) in dogs (case No. D38: **A, B**; case No. D51: **C, D**), sea lions (case No. S5: **E, F, H**; case No. S3: **G**), and a cat (case No. C17: **I, J**). In the dogs, the diffuse plaques were only positive for A β 42 (**A**), but the co-localization of A β 43 and A β 42 was observed in the primitive plaques (**B**), meningeal CAA lesions (**C**), and cortical CAA lesions (**D**). In the sea lions, A β 43 and A β 42 co-localized in the SPs (**E, F**) and CAA lesions (**G, H**). In the cat, the co-localization of A β 43 and A β 42 was detected in granular deposits (**I**) and cortical CAA (**J**). Scale bars: 40 μ m (**A, B, G, H**), 50 μ m: **C**, 20 μ m (**D–F, I, J**).

were strongly immunopositive for A β 43 (Fig. 7F, arrow). In cats, the co-localization of A β 43 and A β 42 was observed in the granular deposits and cortical CAA lesions (Fig. 7I, 7J).

DISCUSSION

Parenchymal and vascular A β 40 and A β 42 deposits have been reported in various animal species. Conversely, an aged gorilla is the only animal that has been reported to exhibit A β 43 deposition in its brain [27]. In this study, A β 43 deposition in Carnivora brains was examined and compared with A β 40 and A β 42 deposition.

Previous studies have shown that capillary CAA (CAA-type1) is frequently seen in the canine brain [30]. The present study revealed that A β 43 is deposited in the small arteries and capillaries in the canine brain, as is the case for A β 42. In dogs, diffuse plaques were weakly immunopositive for A β 43, and primitive plaques were strongly immunopositive for A β 43. A previous study showed that canine primitive plaques contain several capillaries and may be CAA-type1-related lesions caused by the fusion of capillary CAA lesions with perivascular A β deposits [44]. In humans, a type of amyloid plaque called coarse-grained plaques contain vascular components (laminin, collagen IV, and norrin) and are reported to be associated with CAA-type1 [5]. The canine primitive plaques examined in the present study also contained capillaries and were located adjacent to capillary CAA lesions with dispersed A β aggregates called dysphoric capillary CAA lesions [34]. These findings suggest that A β 43 deposition in dogs is associated with CAA-type1 and has different properties from the A β 42 deposition associated with SP formation.

Two types of SP (mature and diffuse plaques) and CAA have been reported in aged sea lion brains [40, 41]. The present study showed that A β 43 was frequently deposited in small arteries and capillaries in sea lion brains, as was seen in the canine brains. On the other hand, A β 43 positive plaques were found more frequently in sea lion brains than in canine brains. In human AD and transgenic mouse brains, A β 43 has been found in diffuse and mature (dense-cored) plaques, and A β 43 was localized in plaque cores [21, 37]. The current study revealed that A β 43 was present in the cores of mature plaques in sea lion brains. These findings suggest that in sea lions A β 43 is associated with both CAA-type1 and plaque formation. Thus, different A β 43 deposition patterns were observed in dogs and sea lions.

Aged cats show no SPs but exhibit small granular deposits of A β and few CAA [11, 15, 28]. This deposition pattern is thought to be associated with the 7th amino acid substitution of feline A β amino acid sequence compared to that of humans, dogs, and sea lions which exhibit SPs [6, 22, 41]. The present study revealed that A β 43 aggregated to form granular deposits and cortical CAA lesions, which was similar to the deposition pattern of A β 42 in the feline brain. The aggregation properties of the various A β subtypes differ, and A β 43 has the strongest propensity to aggregate, followed by A β 42 and A β 40 [37]. The deposition pattern of A β is also affected by the subtype (A β 43: plaques, A β 42: plaques and CAA, A β 40: CAA) [21]. In the present study, there was no significant difference between the A β 43 and A β 42 deposition scores for the feline brains. These results imply that A β 43 and A β 42 exhibit similar A β aggregation behavior in the feline brain.

The A β in meningeal and arterial CAA is predominantly composed of A β 40 [17, 23], but capillary CAA is characterized by A β 42 deposits [2]. In the present study, A β 43 was frequently deposited in capillary and arteriole walls, as was found for A β 42 deposition in dog and sea lion brains. A β 40 was mainly deposited in larger CAA-affected blood vessels and absent from capillary CAA lesions in dogs and sea lions. The intramural periarterial drainage (IPAD) pathway is the perivascular clearance pathway through which interstitial fluid containing A β accumulates around capillaries and leaves the brain between the smooth muscle cell basement membranes in the tunica media of arterioles and arteries [3, 8]. CAA is considered to be strongly associated with the IPAD pathway since the observed A β accumulation patterns are consistent with this pathway [48]. A β 40, a comparatively soluble subtype of A β , can diffuse along perivascular drainage pathways and accumulate in the smooth muscle cell basement membranes of arterioles and meningeal blood vessels, which are located downstream of the IPAD pathway [25]. On the other hand, A β 42 mainly accumulates in capillaries, which are located upstream of the IPAD pathway because of their strong propensity to aggregate [2]. Accordingly, our findings suggested that A β 43 is mainly deposited upstream of the IPAD pathway in dog and sea lion brains, possibly because A β 43 has a stronger propensity to aggregate than A β 42 [37].

In the human brain, A β 43 mainly accumulates as SPs, and it accumulates as CAA lesions less often [47]. In the present study, A β 43 mainly accumulated as cortical CAA lesions and accumulated less often as SPs in the brains of dogs and sea lions. An *in vitro* study found that the toxicity of A β to human cerebrovascular cells (smooth muscle cells and brain pericytes) decreases in the following order: A β 40 > A β 42 > A β 43 [20]. Furthermore, the propensity of A β species to form CAA lesions follows the same order [21]. The smooth muscle cells in the tunica media are involved in the IPAD pathway [26], and Jäkel *et al.* suggested that the lower vulnerability of human smooth muscle cells to A β 43 may be associated with less A β 43 deposition occurring in the blood vessel walls in the human brain because of A β 43 having less toxic effects on the IPAD pathway. In the present study, a different correlation between peptide length and cortical CAA formation (A β 40 < A β 42 \approx A β 43) was seen in the Caniformia brains than has been observed in human brains. The vulnerability of Caniformia (dog and sea lion) cerebrovascular smooth muscle cells to A β may differ from that of human cerebrovascular smooth muscle cells.

A previous study showed that A β 43 accumulates more frequently than A β 40 in the brains of AD patients [37]. The present study revealed that A β 43 was deposited as SPs and CAA lesions in Carnivora brains, and the A β 43 deposition scores of these brains were higher than their A β 40 deposition scores. This indicated that A β 43 is one of the major components of A β pathology in the Carnivora brain. Furthermore, the co-localization of A β 43 and A β 42 was confirmed by double-labeling immunohistochemistry in the animal brains. It is known that A β 43 exhibits significant seeding activity and induces A β 42 aggregation [36]. The present study suggests that A β 43 plays a vital role in A β pathology by being associated with A β 42 deposition in the Carnivora brain.

CONFLICTS OF INTEREST. The authors report no conflicts of interest.

ACKNOWLEDGMENT. This research did not receive any specific grants from funding agencies in the public, commercial, or not-for-profit sectors.

REFERENCES

- Asami-Odaka A, Ishibashi Y, Kikuchi T, Kitada C, Suzuki N. 1995. Long amyloid beta-protein secreted from wild-type human neuroblastoma IMR-32 cells. *Biochemistry* **34**: 10272–10278. [Medline] [CrossRef]
- Attems J, Lintner F, Jellinger KA. 2004. Amyloid beta peptide 1-42 highly correlates with capillary cerebral amyloid angiopathy and Alzheimer disease pathology. *Acta Neuropathol* **107**: 283–291. [Medline] [CrossRef]
- Bakker EN, Bacskai BJ, Arbel-Ornath M, Aldea R, Bedussi B, Morris AW, Weller RO, Carare RO. 2016. Lymphatic clearance of the brain: perivascular, paravascular and significance for neurodegenerative diseases. *Cell Mol Neurobiol* **36**: 181–194. [Medline] [CrossRef]
- Bolduc DM, Montagna DR, Seghers MC, Wolfe MS, Selkoe DJ. 2016. The amyloid-beta forming tripeptide cleavage mechanism of γ -secretase. *eLife* **5**: e17587. [Medline] [CrossRef]
- Boon BDC, Bulk M, Jonker AJ, Morrema THJ, van den Berg E, Popovic M, Walter J, Kumar S, van der Lee SJ, Holstege H, Zhu X, Van Nostrand WE, Natté R, van der Weerd L, Bouwman FH, van de Berg WDJ, Rozemuller AJM, Hoozemans JJM. 2020. The coarse-grained plaque: a divergent A β plaque-type in early-onset Alzheimer's disease. *Acta Neuropathol* **140**: 811–830. [Medline] [CrossRef]
- Brinkmalm G, Portelius E, Öhrfelt A, Mattsson N, Persson R, Gustavsson MK, Vite CH, Gobom J, Månsson JE, Nilsson J, Halim A, Larson G, Rüttschi U, Zetterberg H, Blennow K, Brinkmalm A. 2012. An online nano-LC-ESI-FTICR-MS method for comprehensive characterization of endogenous fragments from amyloid β and amyloid precursor protein in human and cat cerebrospinal fluid. *J Mass Spectrom* **47**: 591–603. [Medline] [CrossRef]
- Burnouf S, Gorsky MK, Dols J, Grönke S, Partridge L. 2015. A β 43 is neurotoxic and primes aggregation of A β 40 in vivo. *Acta Neuropathol* **130**: 35–47. [Medline] [CrossRef]
- Carare RO, Bernardes-Silva M, Newman TA, Page AM, Nicoll JA, Perry VH, Weller RO. 2008. Solutes, but not cells, drain from the brain parenchyma along basement membranes of capillaries and arteries: significance for cerebral amyloid angiopathy and neuroimmunology. *Neuropathol Appl Neurobiol* **34**: 131–144. [Medline] [CrossRef]
- Chambers JK, Kuribayashi H, Ikeda S, Une Y. 2010. Distribution of neprilysin and deposit patterns of Abeta subtypes in the brains of aged squirrel monkeys (*Saimiri sciureus*). *Amyloid* **17**: 75–82. [Medline] [CrossRef]
- Chambers JK, Mutsuga M, Uchida K, Nakayama H. 2011. Characterization of A β pN3 deposition in the brains of dogs of various ages and other animal species. *Amyloid* **18**: 63–71. [Medline] [CrossRef]
- Chambers JK, Tokuda T, Uchida K, Ishii R, Tatebe H, Takahashi E, Tomiyama T, Une Y, Nakayama H. 2015. The domestic cat as a natural animal model of Alzheimer's disease. *Acta Neuropathol Commun* **3**: 78. [Medline] [CrossRef]
- Chambers JK, Uchida K, Harada T, Tsuboi M, Sato M, Kubo M, Kawaguchi H, Miyoshi N, Tsujimoto H, Nakayama H. 2012. Neurofibrillary tangles and the deposition of a beta amyloid peptide with a novel N-terminal epitope in the brains of wild Tsushima leopard cats. *PLoS One* **7**: e46452. [Medline] [CrossRef]
- Conicella AE, Fawzi NL. 2014. The C-terminal threonine of A β 43 nucleates toxic aggregation via structural and dynamical changes in monomers and protofibrils. *Biochemistry* **53**: 3095–3105. [Medline] [CrossRef]
- Edler MK, Sherwood CC, Meindl RS, Hopkins WD, Ely JJ, Erwin JM, Mufson EJ, Hof PR, Raghanti MA. 2017. Aged chimpanzees exhibit pathologic hallmarks of Alzheimer's disease. *Neurobiol Aging* **59**: 107–120. [Medline] [CrossRef]
- Fiock KL, Smith JD, Crary JF, Hefti MM. 2020. β -amyloid and tau pathology in the aging feline brain. *J Comp Neurol* **528**: 108–113. [Medline] [CrossRef]
- Gearing M, Tigges J, Mori H, Mirra SS. 1997. β -Amyloid (A β) deposition in the brains of aged orangutans. *Neurobiol Aging* **18**: 139–146. [Medline] [CrossRef]
- Gravina SA, Ho L, Eckman CB, Long KE, Otvos L Jr, Younkin LH, Suzuki N, Younkin SG. 1995. Amyloid β protein (A β) in Alzheimer's disease brain. Biochemical and immunocytochemical analysis with antibodies specific for forms ending at A β 40 or A β 42(43). *J Biol Chem* **270**: 7013–7016. [Medline] [CrossRef]
- Ichinohe N, Hayashi M, Wakabayashi K, Rockland KS. 2009. Distribution and progression of amyloid- β deposits in the amygdala of the aged macaque monkey, and parallels with zinc distribution. *Neuroscience* **159**: 1374–1383. [Medline] [CrossRef]
- Iizuka T, Shoji M, Harigaya Y, Kawarabayashi T, Watanabe M, Kanai M, Hirai S. 1995. Amyloid β -protein ending at Thr43 is a minor component of some diffuse plaques in the Alzheimer's disease brain, but is not found in cerebrovascular amyloid. *Brain Res* **702**: 275–278. [Medline] [CrossRef]
- Jäkel L, Biemans EALM, Klijn CJM, Kuiperij HB, Verbeek MM. 2020. Reduced Influence of apoE on A β 43 Aggregation and Reduced Vascular A β 43 Toxicity as Compared with A β 40 and A β 42. *Mol Neurobiol* **57**: 2131–2141. [Medline] [CrossRef]
- Jäkel L, Boche D, Nicoll JAR, Verbeek MM. 2019. A β 43 in human Alzheimer's disease: effects of active A β 42 immunization. *Acta Neuropathol Commun* **7**: 141. [Medline] [CrossRef]
- Johnstone EM, Chaney MO, Norris FH, Pascual R, Little SP. 1991. Conservation of the sequence of the Alzheimer's disease amyloid peptide in dog, polar bear and five other mammals by cross-species polymerase chain reaction analysis. *Brain Res Mol Brain Res* **10**: 299–305. [Medline] [CrossRef]
- Kakuda N, Miyasaka T, Iwasaki N, Nirasawa T, Wada-Kakuda S, Takahashi-Fujigasaki J, Murayama S, Ihara Y, Ikegawa M. 2017. Distinct deposition of amyloid- β species in brains with Alzheimer's disease pathology visualized with MALDI imaging mass spectrometry. *Acta Neuropathol Commun* **5**: 73. [Medline] [CrossRef]
- Kanda Y. 2013. Investigation of the freely available easy-to-use software 'EZR' for medical statistics. *Bone Marrow Transplant* **48**: 452–458. [Medline] [CrossRef]
- Keable A, Fenna K, Yuen HM, Johnston DA, Smyth NR, Smith C, Al-Shahi Salman R, Samarasekera N, Nicoll JAR, Attems J, Kalaria RN, Weller RO, Carare RO. 2016. Deposition of amyloid β in the walls of human leptomeningeal arteries in relation to perivascular drainage pathways in cerebral amyloid angiopathy. *Biochim Biophys Acta* **1862**: 1037–1046. [Medline] [CrossRef]
- Kim SH, Ahn JH, Yang H, Lee P, Koh GY, Jeong Y. 2020. Cerebral amyloid angiopathy aggravates perivascular clearance impairment in an Alzheimer's disease mouse model. *Acta Neuropathol Commun* **8**: 181. [Medline] [CrossRef]

27. Kimura N, Nakamura S, Goto N, Narushima E, Hara I, Shichiri S, Saitou K, Nose M, Hayashi T, Kawamura S, Yoshikawa Y. 2001. Senile plaques in an aged western lowland gorilla. *Exp Anim* **50**: 77–81. [[Medline](#)] [[CrossRef](#)]
28. Nakamura S, Nakayama H, Kiatipattanasakul W, Uetsuka K, Uchida K, Goto N. 1996. Senile plaques in very aged cats. *Acta Neuropathol* **91**: 437–439. [[Medline](#)] [[CrossRef](#)]
29. Nakamura S, Tamaoka A, Sawamura N, Kiatipattanasakul W, Nakayama H, Shoji S, Yoshikawa Y, Doi K. 1997. Deposition of amyloid β protein (A β) subtypes [A β 40 and A β 42(43)] in canine senile plaques and cerebral amyloid angiopathy. *Acta Neuropathol* **94**: 323–328. [[Medline](#)] [[CrossRef](#)]
30. Ozawa M, Chambers JK, Uchida K, Nakayama H. 2016. The Relation between canine cognitive dysfunction and age-related brain lesions. *J Vet Med Sci* **78**: 997–1006. [[Medline](#)] [[CrossRef](#)]
31. Perez SE, Sherwood CC, Cranfield MR, Erwin JM, Mudakikwa A, Hof PR, Mufson EJ. 2016. Early Alzheimer’s disease-type pathology in the frontal cortex of wild mountain gorillas (*Gorilla beringei beringei*). *Neurobiol Aging* **39**: 195–201. [[Medline](#)] [[CrossRef](#)]
32. Portelius E, Tran AJ, Andreasson U, Persson R, Brinkmalm G, Zetterberg H, Blennow K, Westman-Brinkmalm A. 2007. Characterization of amyloid beta peptides in cerebrospinal fluid by an automated immunoprecipitation procedure followed by mass spectrometry. *J Proteome Res* **6**: 4433–4439. [[Medline](#)] [[CrossRef](#)]
33. Qi-Takahara Y, Morishima-Kawashima M, Tanimura Y, Dolios G, Hirofumi N, Horikoshi Y, Kametani F, Maeda M, Saido TC, Wang R, Ihara Y. 2005. Longer forms of amyloid β protein: implications for the mechanism of intramembrane cleavage by gamma-secretase. *J Neurosci* **25**: 436–445. [[Medline](#)] [[CrossRef](#)]
34. Richard E, Carrano A, Hoozemans JJ, van Horssen J, van Haastert ES, Eurelings LS, de Vries HE, Thal DR, Eikelenboom P, van Gool WA, Rozemuller AJM. 2010. Characteristics of dyschoric capillary cerebral amyloid angiopathy. *J Neuropathol Exp Neurol* **69**: 1158–1167. [[Medline](#)] [[CrossRef](#)]
35. Roher AE, Lowenson JD, Clarke S, Wolkow C, Wang R, Cotter RJ, Reardon IM, Zürcher-Neely HA, Heinrichson RL, Ball MJ, et al. 1993. Structural alterations in the peptide backbone of β -amyloid core protein may account for its deposition and stability in Alzheimer’s disease. *J Biol Chem* **268**: 3072–3083. [[Medline](#)] [[CrossRef](#)]
36. Ruiz-Riquelme A, Mao A, Barghash MM, Lau HHC, Stuart E, Kovacs GG, Nilsson KPR, Fraser PE, Schmitt-Ulms G, Watts JC. 2021. A β 43 aggregates exhibit enhanced prion-like seeding activity in mice. *Acta Neuropathol Commun* **9**: 83. [[Medline](#)] [[CrossRef](#)]
37. Saito T, Suemoto T, Brouwers N, Slegers K, Funamoto S, Mihira N, Matsuba Y, Yamada K, Nilsson P, Takano J, Nishimura M, Iwata N, Van Broeckhoven C, Ihara Y, Saido TC. 2011. Potent amyloidogenicity and pathogenicity of A β 43. *Nat Neurosci* **14**: 1023–1032. [[Medline](#)] [[CrossRef](#)]
38. Schoonenboom NS, Mulder C, Van Kamp GJ, Mehta SP, Scheltens P, Blankenstein MA, Mehta PD. 2005. Amyloid beta 38, 40, and 42 species in cerebrospinal fluid: more of the same? *Ann Neurol* **58**: 139–142. [[Medline](#)] [[CrossRef](#)]
39. Serizawa S, Chambers JK, Une Y. 2012. Beta amyloid deposition and neurofibrillary tangles spontaneously occur in the brains of captive cheetahs (*Acinonyx jubatus*). *Vet Pathol* **49**: 304–312. [[Medline](#)] [[CrossRef](#)]
40. Takahashi E, Kuribayashi H, Chambers JK, Imamura E, Une Y. 2014. Senile plaques and cerebral amyloid angiopathy in an aged California sea lion (*Zalophus californianus*). *Amyloid* **21**: 211–215. [[Medline](#)] [[CrossRef](#)]
41. Takaichi Y, Chambers JK, Takahashi K, Soeda Y, Koike R, Katsumata E, Kita C, Matsuda F, Haritani M, Takashima A, Nakayama H, Uchida K. 2021. Amyloid β and tau pathology in brains of aged pinniped species (sea lion, seal, and walrus). *Acta Neuropathol Commun* **9**: 10. [[Medline](#)] [[CrossRef](#)]
42. Takami M, Nagashima Y, Sano Y, Ishihara S, Morishima-Kawashima M, Funamoto S, Ihara Y. 2009. gamma-Secretase: successive tripeptide and tetrapeptide release from the transmembrane domain of beta-carboxyl terminal fragment. *J Neurosci* **29**: 13042–13052. [[Medline](#)] [[CrossRef](#)]
43. Thal DR, Ghebremedhin E, Rüb U, Yamaguchi H, Del Tredici K, Braak H. 2002. Two types of sporadic cerebral amyloid angiopathy. *J Neuropathol Exp Neurol* **61**: 282–293. [[Medline](#)] [[CrossRef](#)]
44. Uchida K, Okuda R, Yamaguchi R, Tateyama S, Nakayama H, Goto N. 1993. Double-labeling immunohistochemical studies on canine senile plaques and cerebral amyloid angiopathy. *J Vet Med Sci* **55**: 637–642. [[Medline](#)] [[CrossRef](#)]
45. Uchida K, Tani Y, Uetsuka K, Nakayama H, Goto N. 1992. Immunohistochemical studies on canine cerebral amyloid angiopathy and senile plaques. *J Vet Med Sci* **54**: 659–667. [[Medline](#)] [[CrossRef](#)]
46. Uchida K, Yoshino T, Yamaguchi R, Tateyama S, Kimoto Y, Nakayama H, Goto N. 1995. Senile plaques and other senile changes in the brain of an aged American black bear. *Vet Pathol* **32**: 412–414. [[Medline](#)] [[CrossRef](#)]
47. Welander H, Frånberg J, Graff C, Sundström E, Winblad B, Tjernberg LO. 2009. Abeta43 is more frequent than Abeta40 in amyloid plaque cores from Alzheimer disease brains. *J Neurochem* **110**: 697–706. [[Medline](#)] [[CrossRef](#)]
48. Weller RO, Subash M, Preston SD, Mazanti I, Carare RO. 2008. Perivascular drainage of amyloid-beta peptides from the brain and its failure in cerebral amyloid angiopathy and Alzheimer’s disease. *Brain Pathol* **18**: 253–266. [[Medline](#)] [[CrossRef](#)]
49. Yamada M. 2015. Cerebral amyloid angiopathy: emerging concepts. *J Stroke* **17**: 17–30. [[Medline](#)] [[CrossRef](#)]