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Abstract



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## Reducing Timp3 or vitronectin ameliorates disease manifestations in CADASIL mice.

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### Abstract

**OBJECTIVE:** CADASIL is a genetic paradigm of cerebral small vessel disease caused by NOTCH3 mutations that stereotypically lead to the extracellular deposition of NOTCH3 ectodomain (Notch3<sup>ECD</sup>) on the vessels. TIMP3 and vitronectin are two extracellular matrix proteins that abnormally accumulate in Notch3<sup>ECD</sup>-containing deposits on brain vessels of mice and patients with CADASIL. Herein, we investigated whether increased levels of TIMP3 and vitronectin are responsible for aspects of CADASIL disease phenotypes.

**METHODS:** Timp3 and vitronectin expression were genetically reduced in TgNotch3<sup>R169C</sup> mice, a well-established preclinical model of CADASIL. A mouse overexpressing human TIMP3 (TgBAC-TIMP3) was developed. Disease-related phenotypes, including cerebral blood flow deficits, white matter lesions and Notch3<sup>ECD</sup> deposition, were evaluated between 6 and 20 months of age.

**RESULTS:** Cerebral blood flow responses to neural activity (functional hyperemia), topical application of vasodilators, and decreases in blood pressure (CBF autoregulation) were similarly reduced in TgNotch3<sup>R169C</sup> and TgBAC-TIMP3 mice, and myogenic responses of brain arteries were likewise attenuated. These defects were rescued in TgNotch3<sup>R169C</sup> mice by haploinsufficiency of Timp3, although the number of white matter lesions was unaffected. In

contrast, haploinsufficiency or loss of vitronectin in TgNotch3<sup>R169C</sup> mice ameliorated white matter lesions, although cerebral blood flow responses were unchanged. Amelioration of cerebrovascular reactivity or white matter lesions in these mice was not associated with reduced Notch3<sup>ECD</sup> deposition in brain vessels.

**INTERPRETATION:** Elevated levels of TIMP3 and vitronectin, acting downstream of Notch3<sup>ECD</sup> deposition, play a role in CADASIL, producing divergent influences on early cerebral blood flow deficits and later white matter lesions. This article is protected by copyright. All rights reserved.

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