

Neuropathology and Neuroimaging Integrated Education Course for Movement Disorders

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International Parkinson and
Movement Disorder Society
Asian & Oceanian Section

Neuropathology of MSA and SCAs

Brain Research Institute
Niigata University, Japan
Akiyoshi KAKITA
kakita@bri.niigata-u.ac.jp
<https://pathology-bri-niigata-u.jp/en/>

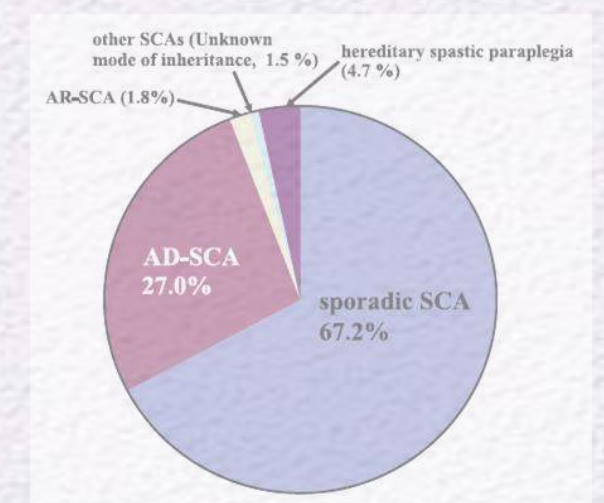
Presentation outline

1 pathologic features of a representative α -synucleinopathy
MSA – Sporadic disorder

2 for a better understanding of systemic degeneration
Cerebellum: anatomy

pathologic features of spinocerebellar ataxias
3 **Autosomal Dominant disorders**
SCA6, DRPLA, SCA3/MJD, SCA2, SCA31

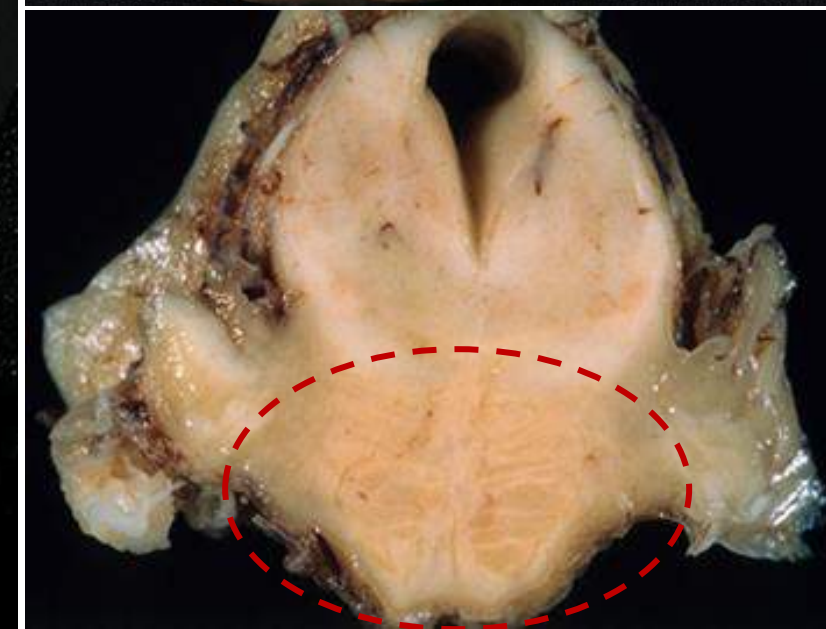
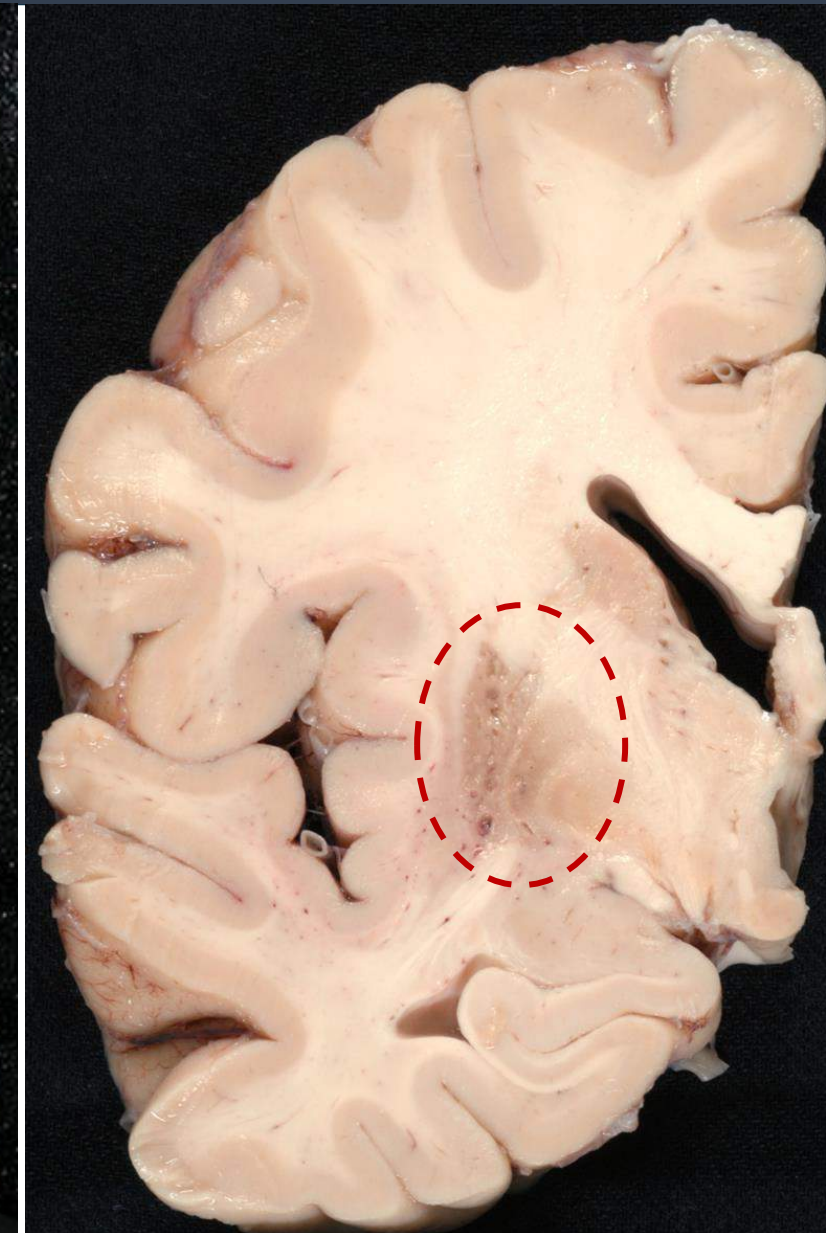
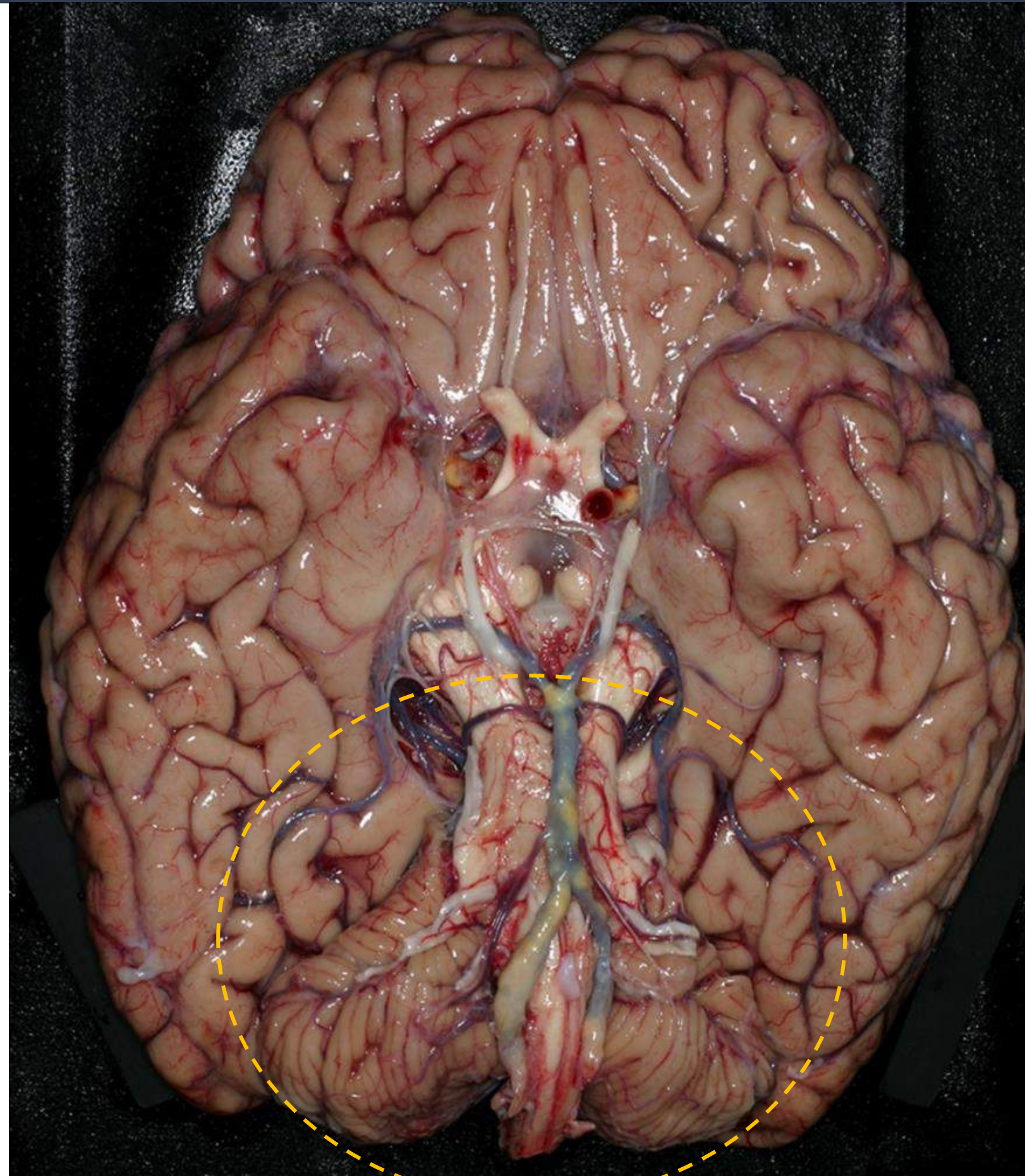
pathologic features of spinocerebellar ataxias
4 **Autosomal Recessive disorders**
ARCA-*CHP1*, *SYNE1*-ataxia, SCA17-DI



All the presenting cases were experienced at
the Brain Res Inst, Niigata Univ, Japan

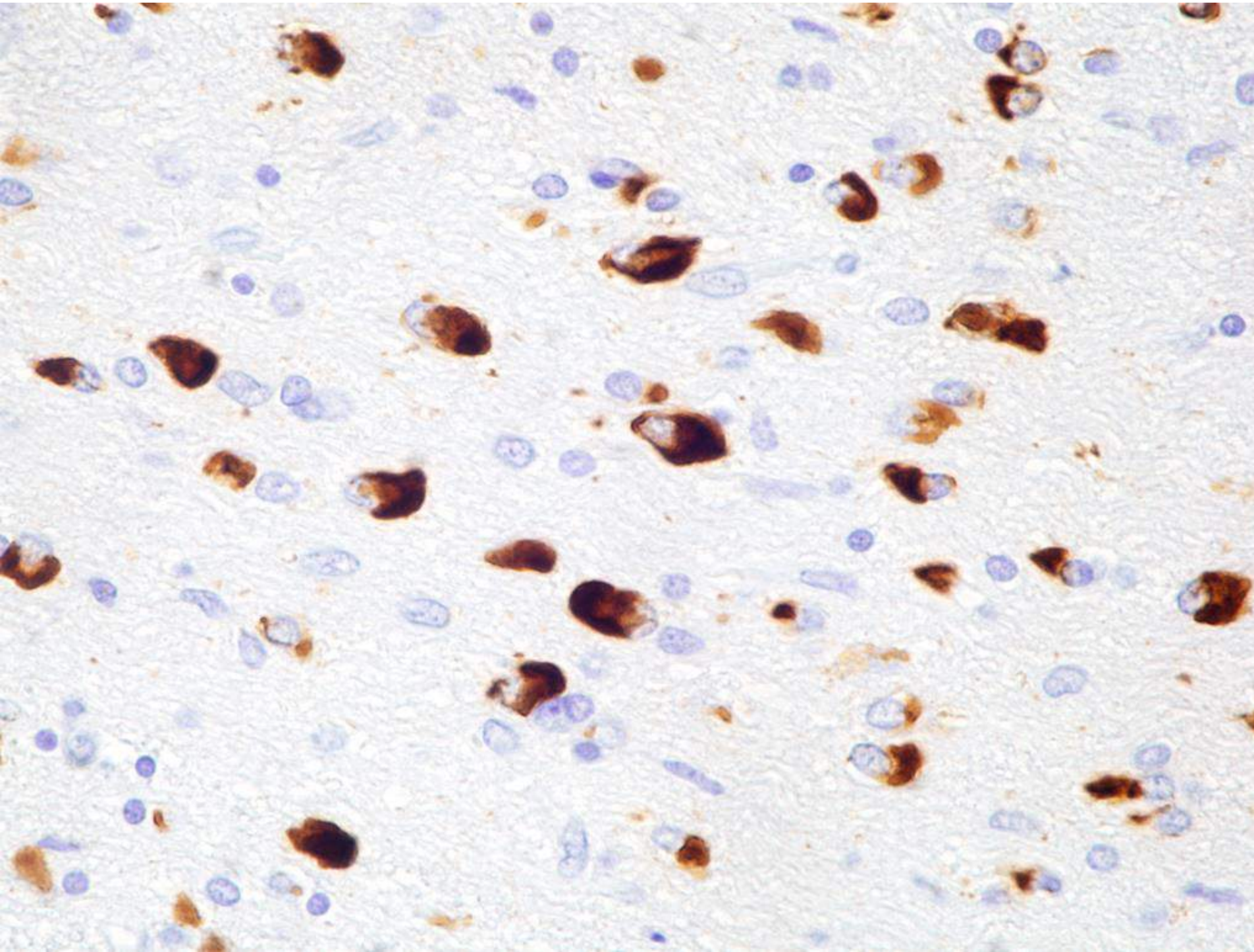
Multiple System Atrophy

- A sporadic adult-onset neurodegenerative disorder
- autonomic dysfunction, cerebellar ataxia, and parkinsonism, each due to degeneration of the autonomic, olivopontocerebellar, and striatonigral systems
- accumulation of α -synuclein protein

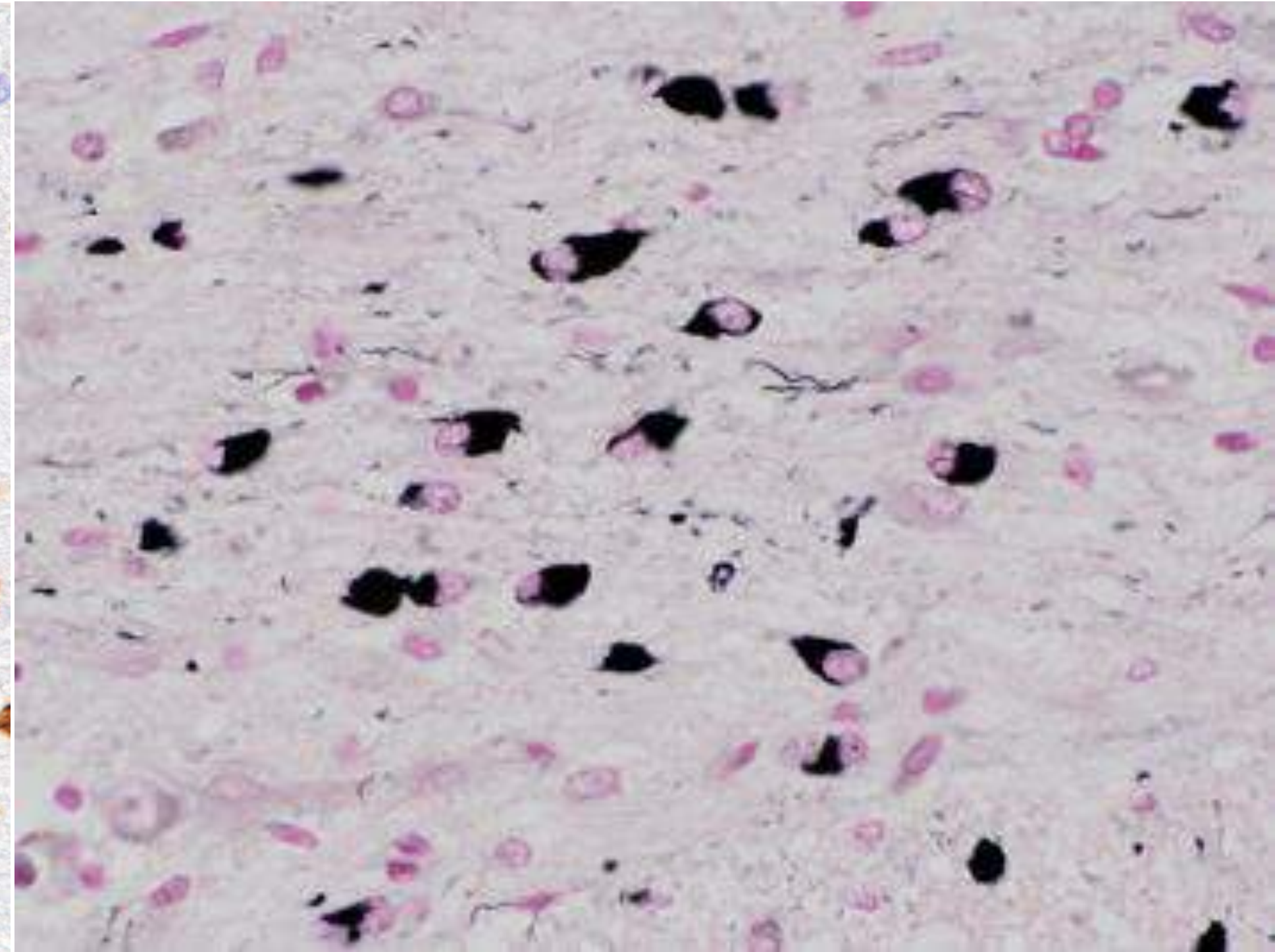


MSA: glial cytoplasmic inclusions

α -synuclein-immunostain



Gallyas-Braak silver stain



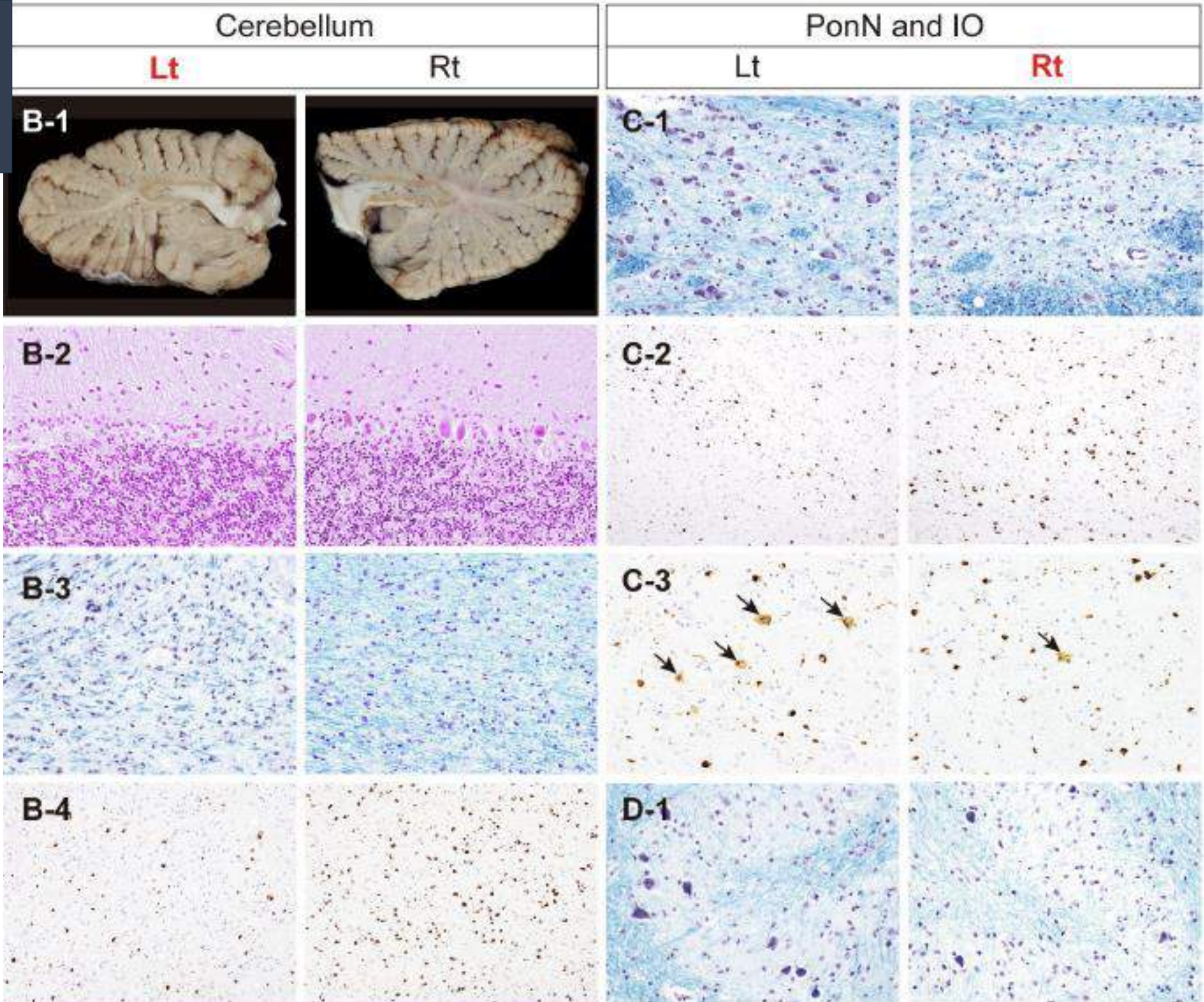
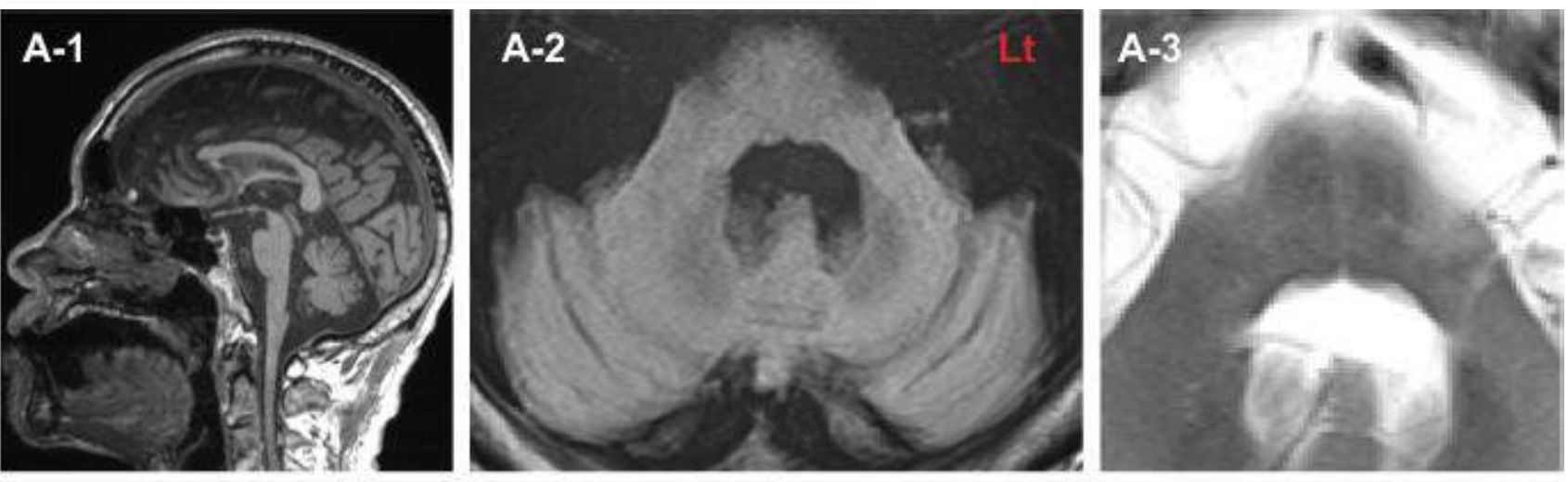
“argyrophilia”

MSA: recently experienced case

Marked laterality of olivopontocerebellar pathology in an autopsied patient with MSA: Implications for degeneration and α -synuclein propagation

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Misato Ozawa^{1,2}, Rie Saito¹,
Takuya Konno³, Reiji Koide²,
Shigeru Fujimoto², Osamu Onodera³,
Akiyoshi Kakita¹

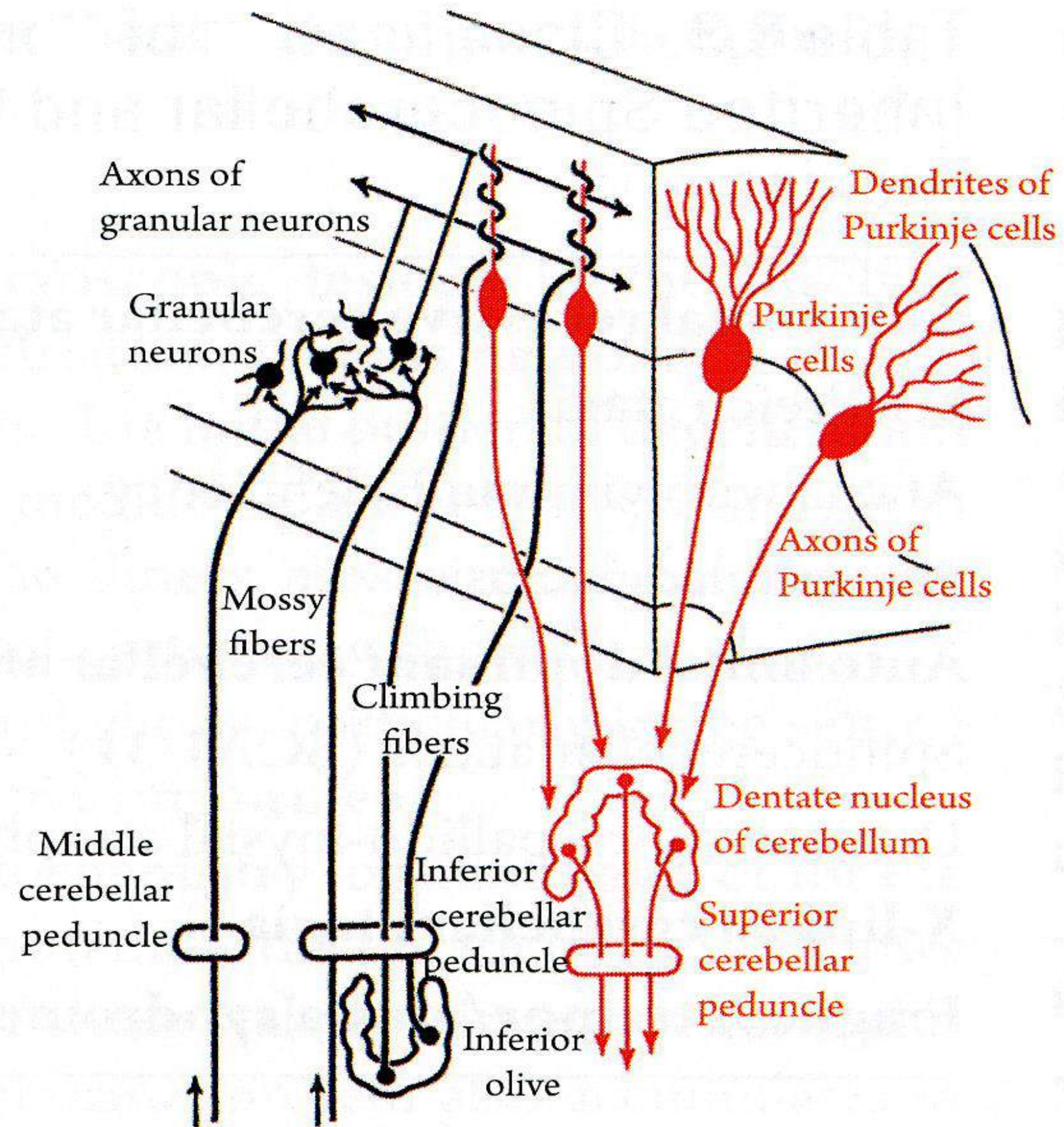


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E	Degeneration	α -syn (GCI)	α -syn (NNI, NCI)
Cerebellar cortex	Lt > Rt 3/2	None	None
Cerebellar white matter	Lt > Rt 3/3	Lt < Rt	NA
Pontine nucleus	Lt < Rt 1/2	Lt < Rt	Lt > Rt
Inferior olivary nucleus	Lt < Rt 1/2	Lt < Rt	Lt > Rt



Cerebellum: anatomy



cerebellar cortex

Purkinje cells
granule cells

cerebellar “**efferent**” fibers

dentate nucleus → red nucleus
superior cerebellar peduncle

cerebellar “**afferent**” fibers

pontine nucleus
middle cerebellar peduncle

inferior olivary nucleus

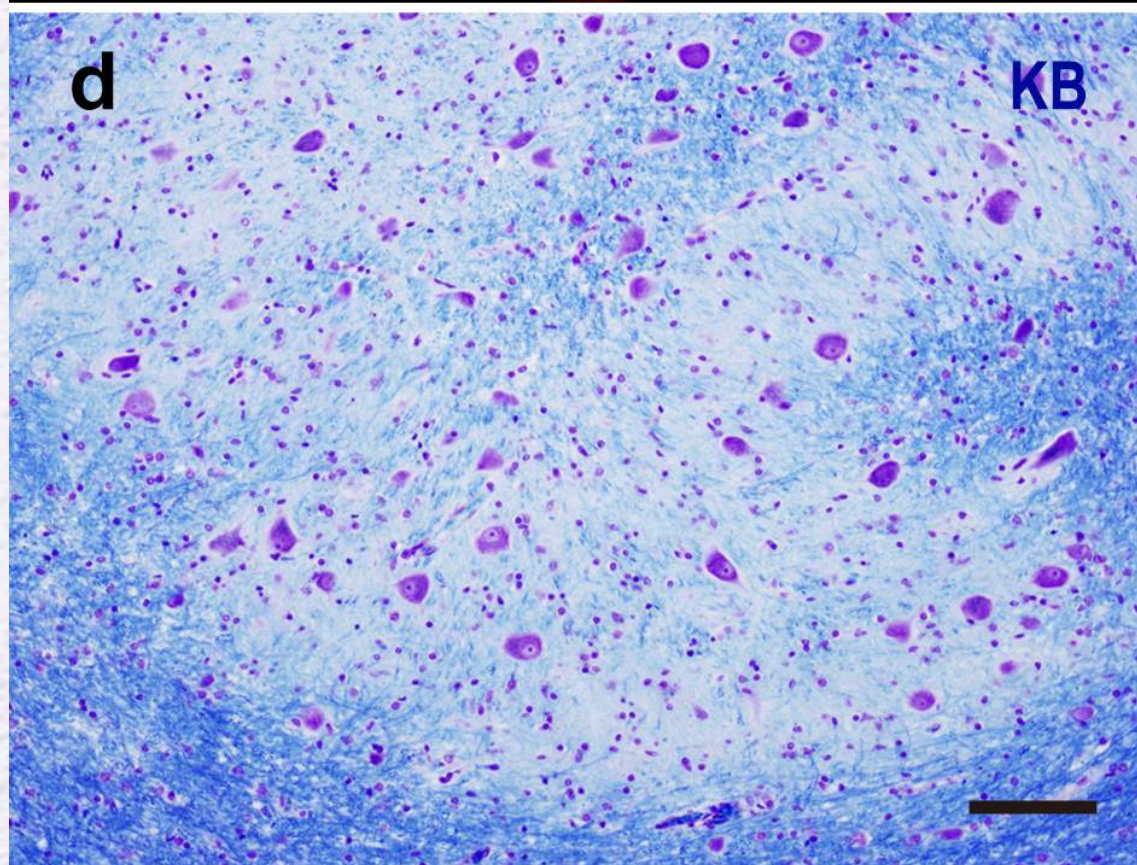
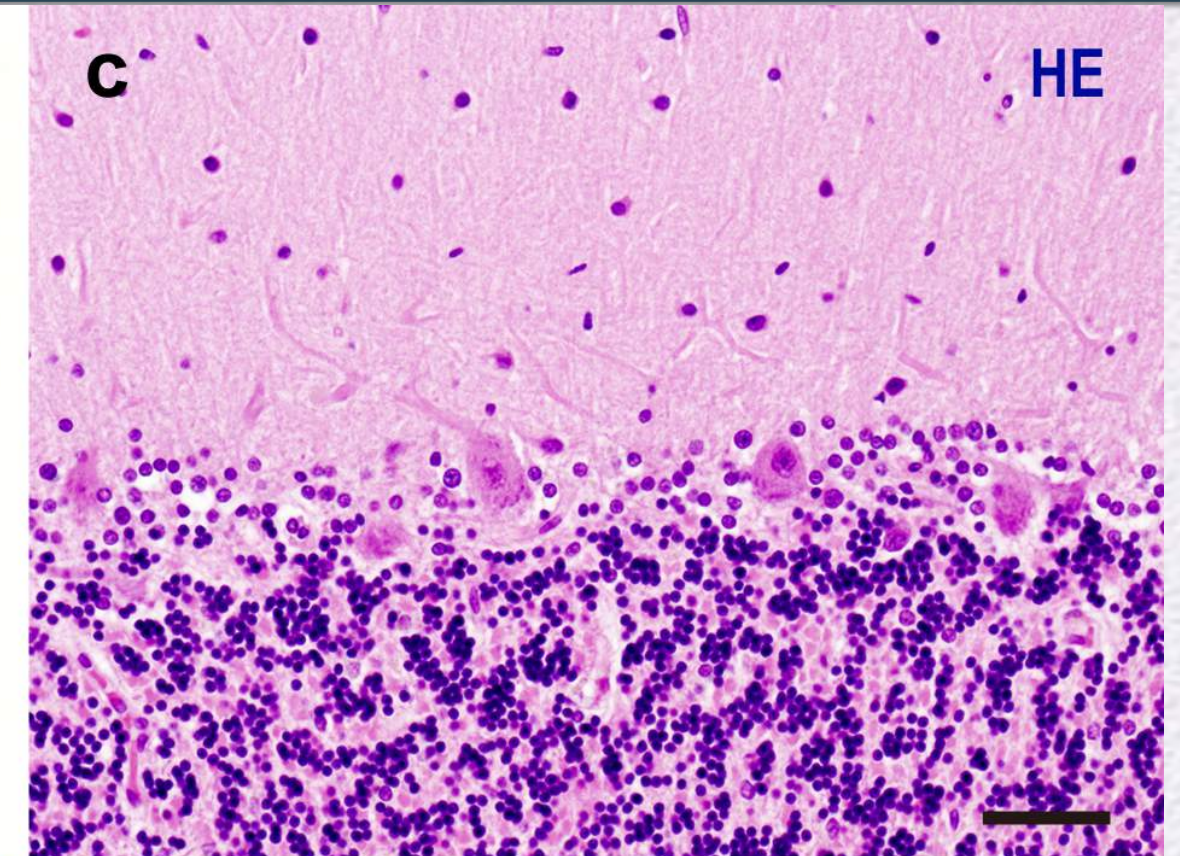
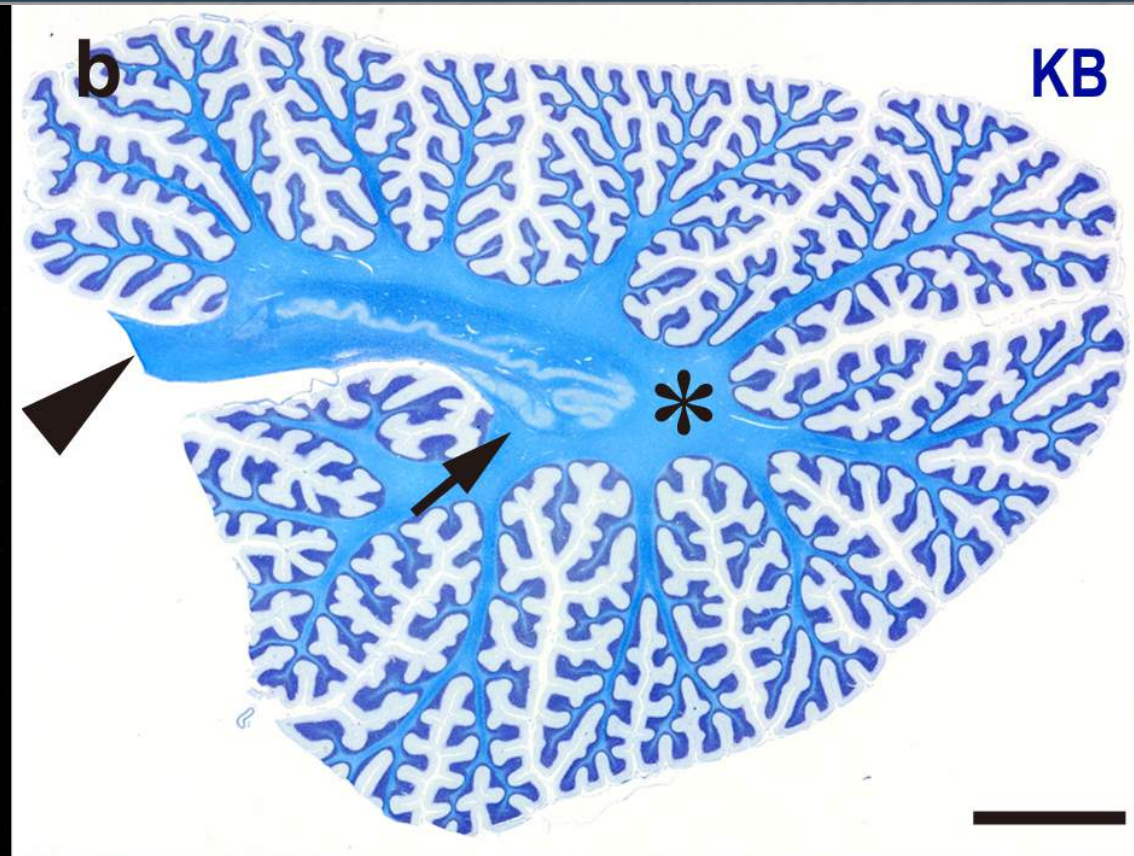
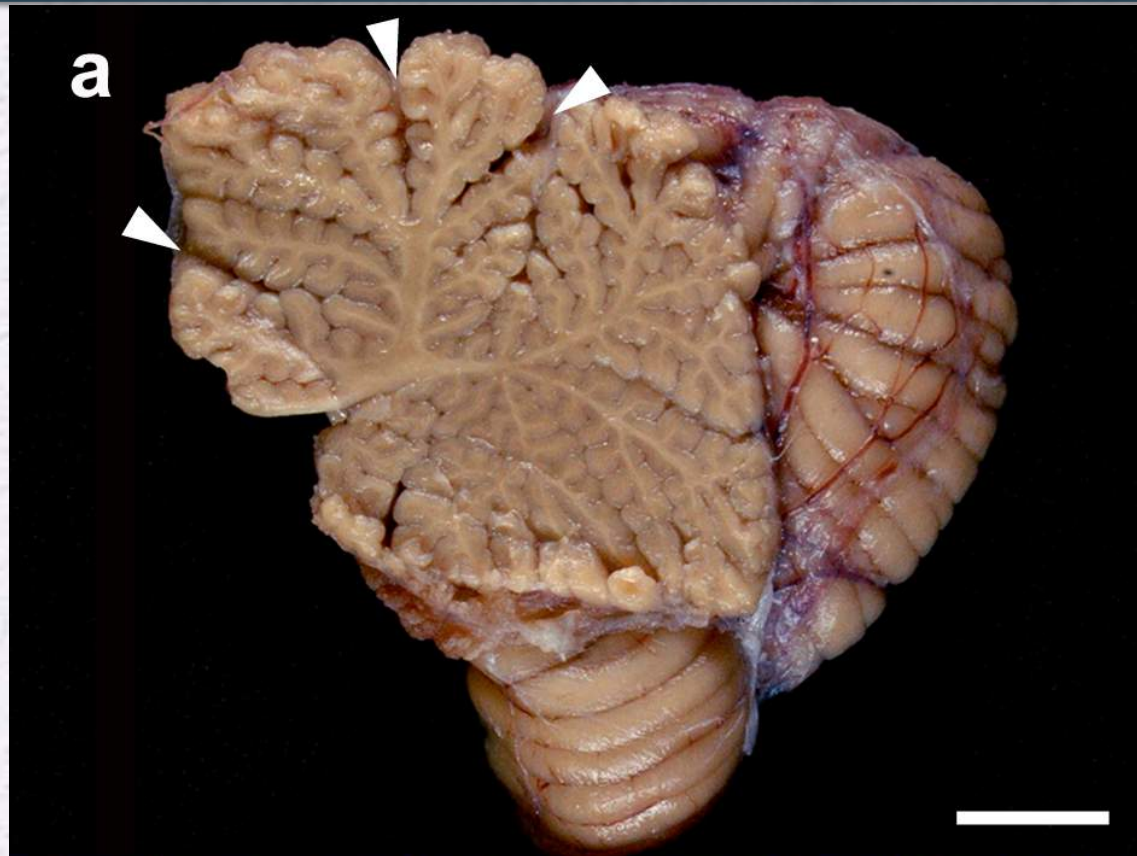
Clark’s nucleus

accessory cuneate nucleus

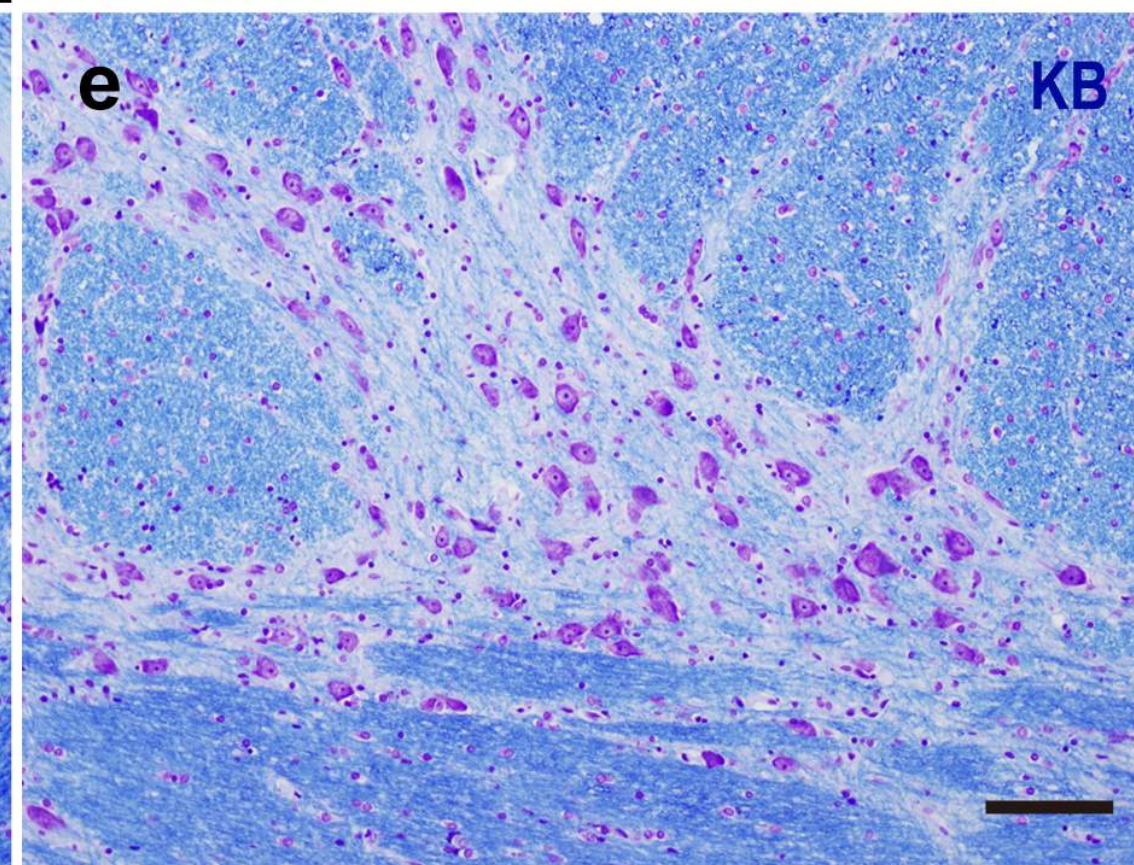
inferior cerebellar peduncle

Control

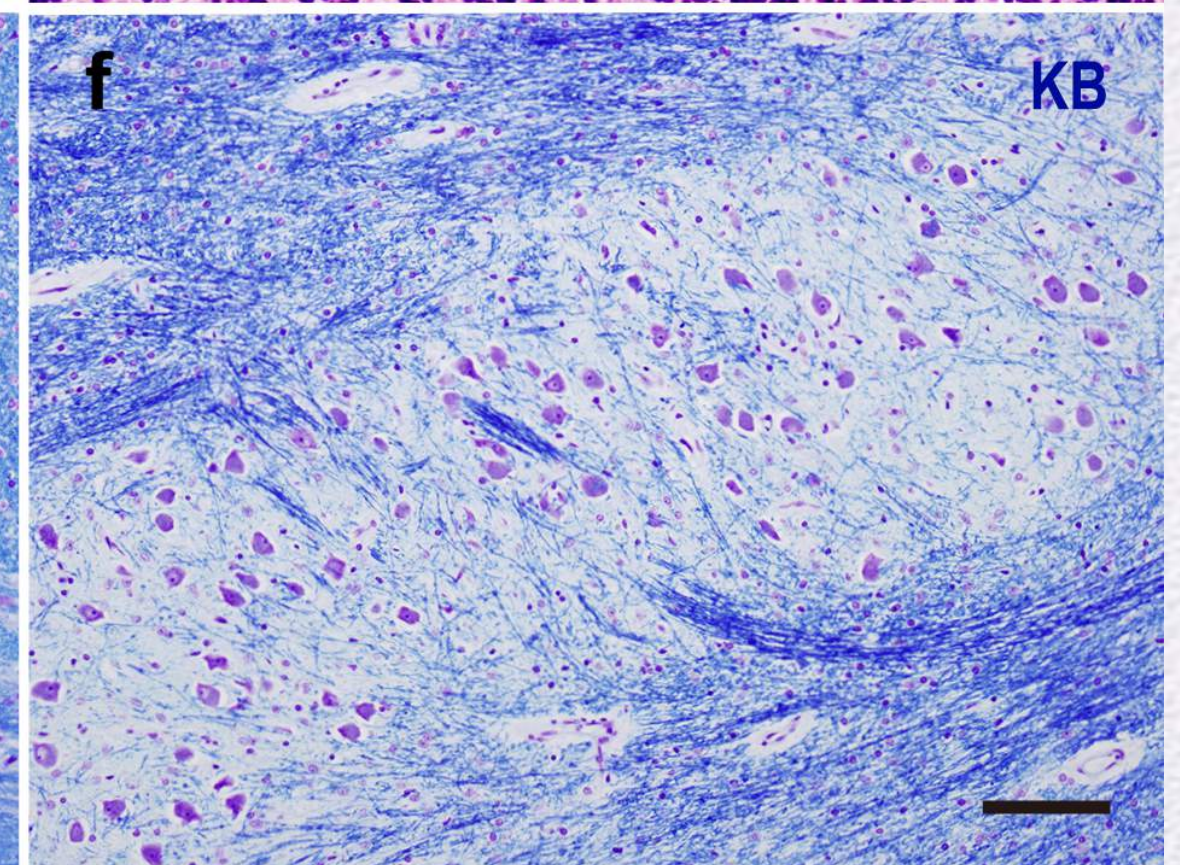
cerebellum and efferent/afferent nuclei



d: cerebellar dentate nucleus
"efferent"



e: pontine nucleus
"afferent"



f: inferior olivary nucleus
"afferent"

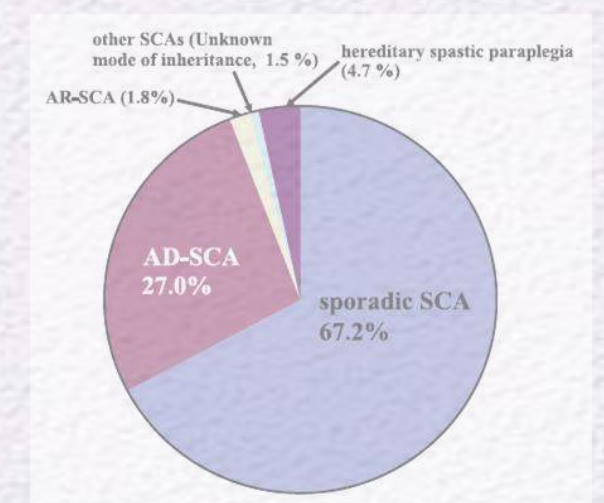
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SCAs: lesional distributions

			SCA2	SCA3/MJD	SCA6	DRPLA	SCA31
Cerebellar system	Cerebellar cortex	Purkinje cells	●		●		●
		granule cells			●		
	"efferent" tracts	dentate nucleus		●		●	
		red nucleus	●			●	
	"afferent tracts"	pontine nucleus	●	●			
		inferior olivary nucleus	●				
		Clarke nucleus	●	●			
Others	substantia nigra	●	●				
	globus pallidus		● (internal)		● (external)		
	subthalamus		●		●		
	cerebral cortex	●					
	pyramidal tract	●	●				
	lower motor neurons	●	●				
	dorsal root ganglia	●	●				

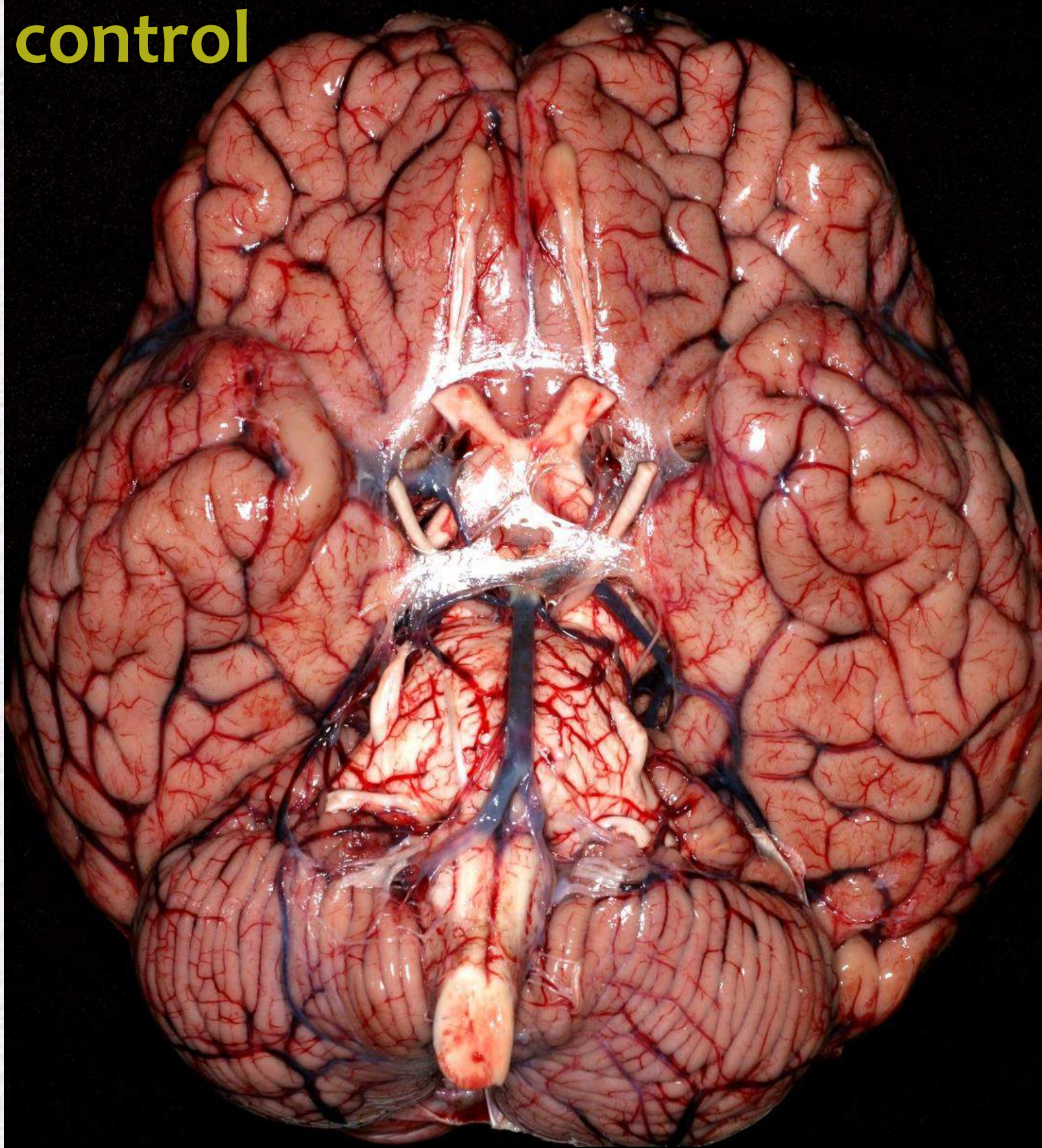
● : neuronal loss

polyglutamine disorders

↑
pentanucleotide
repeat expansion
in an intronic region

SCA6

control

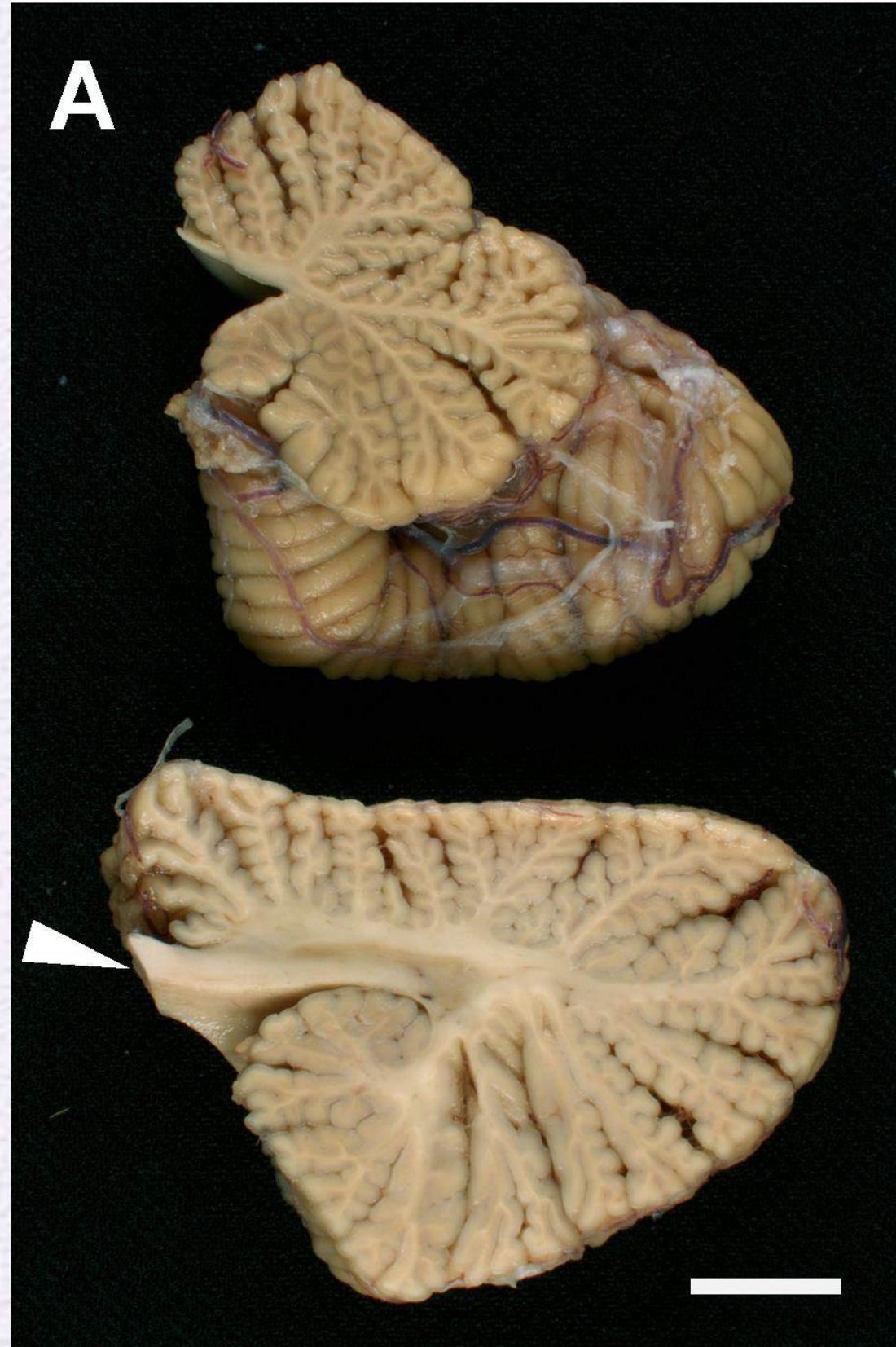


SCA6



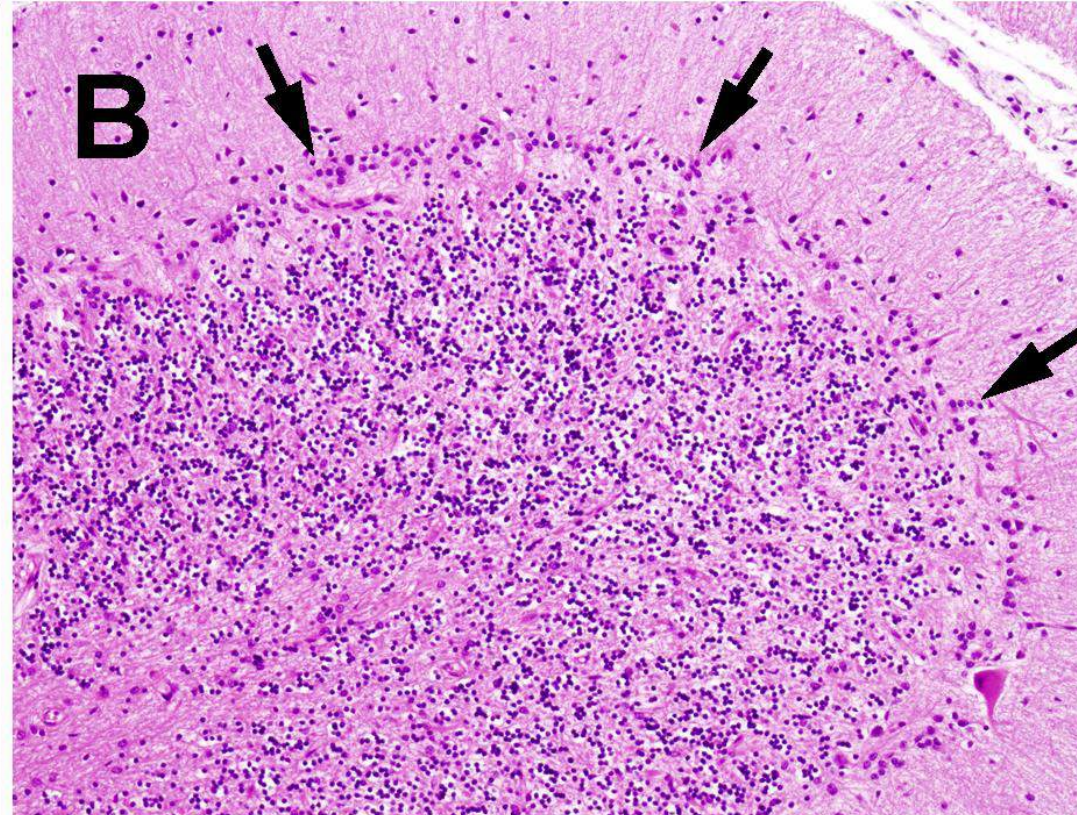
SCA6: cerebellum

cbll cortical atrophy

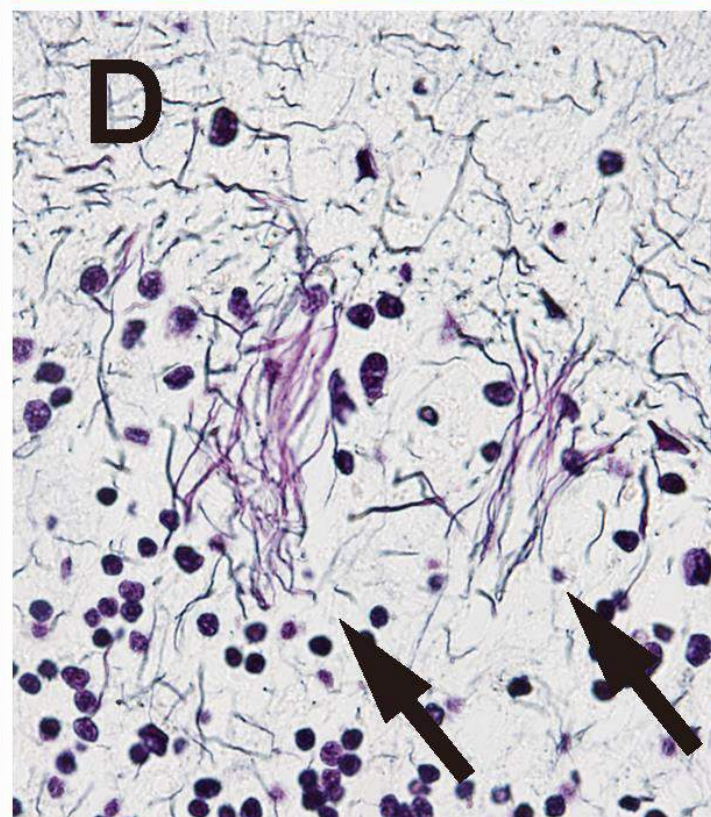
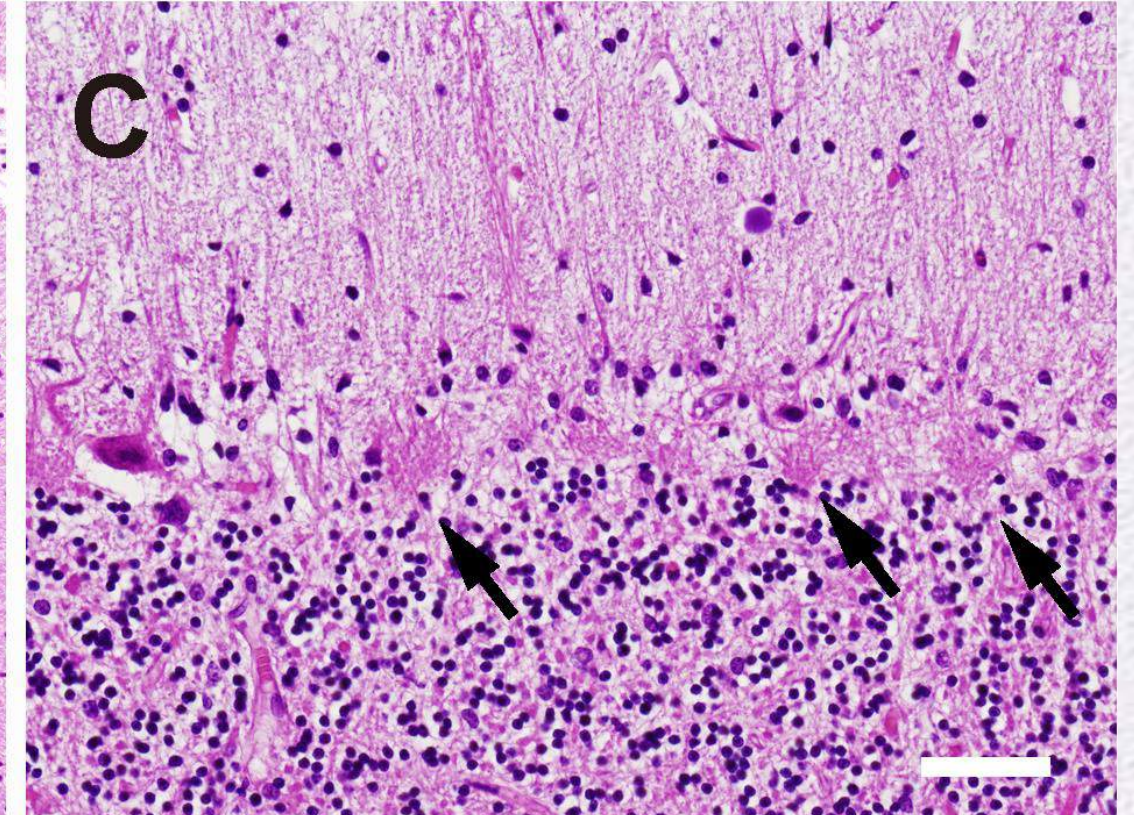


preservation of the dentate n. & sup. cbll peduncle

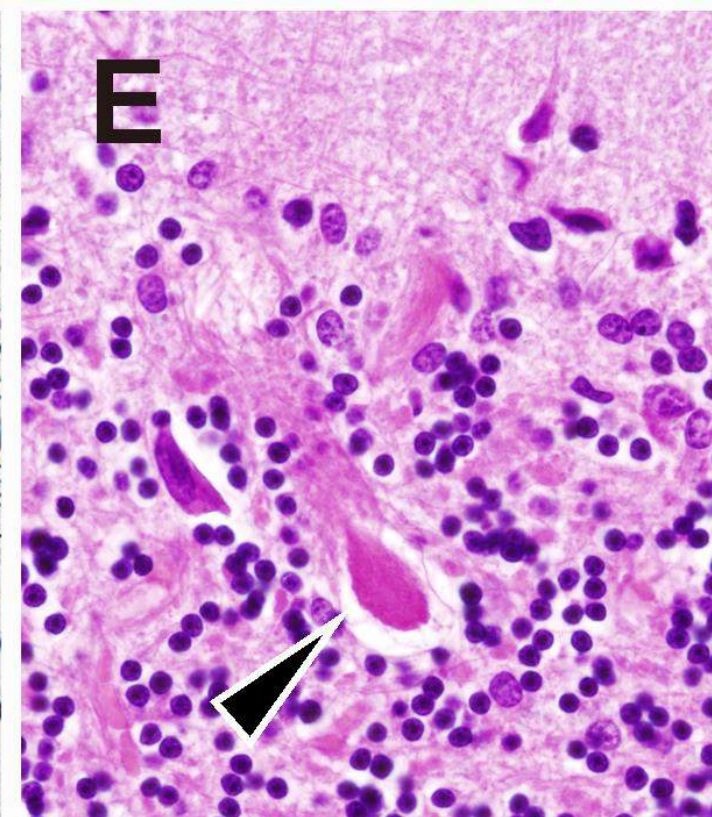
Purkinje cell loss & Bergmann gliosis



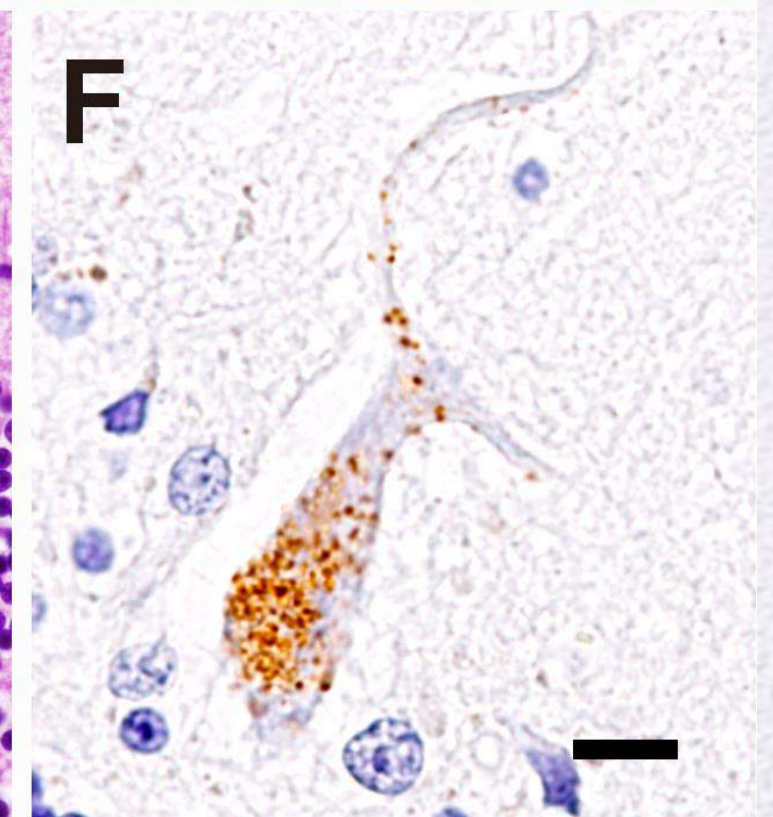
empty baskets (processes of basket cells)



empty baskets
(Bodian silver stain)



torpedos
(proximal axon swelling)

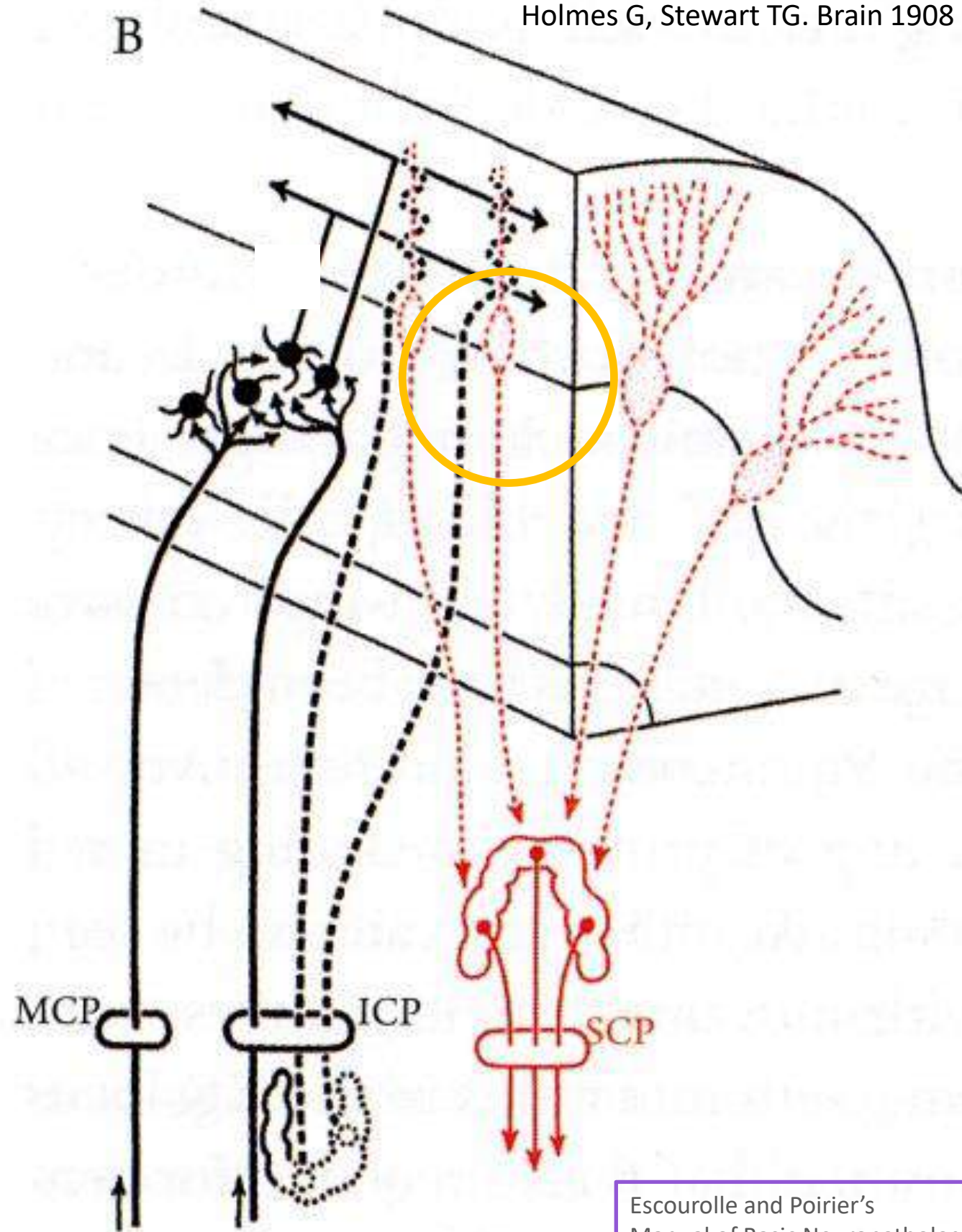


1C2 (polyQ): NCI

SCA6: inf. olivary n.

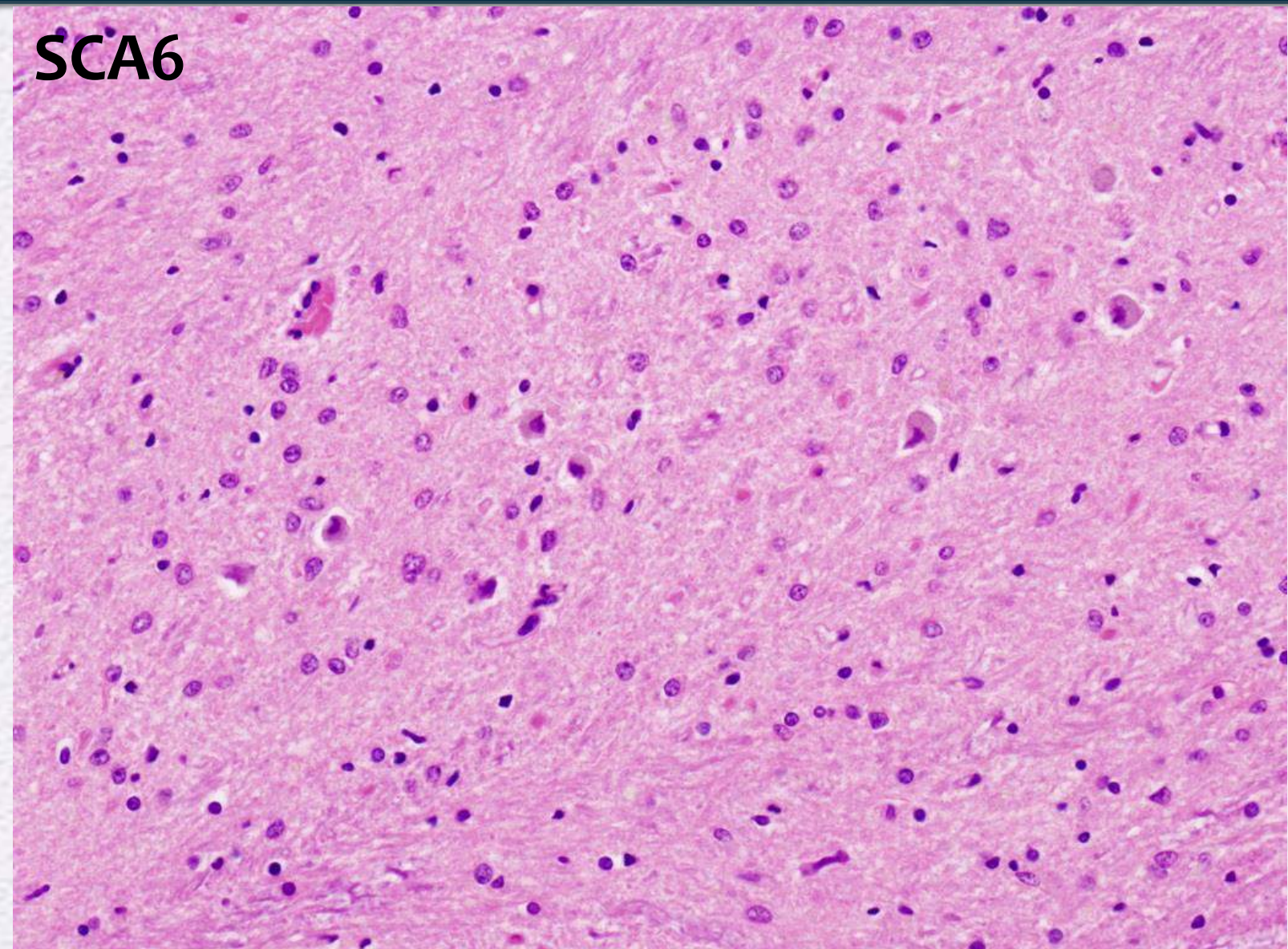
cerebello-olivary atrophy

Holmes G, Stewart TG. Brain 1908

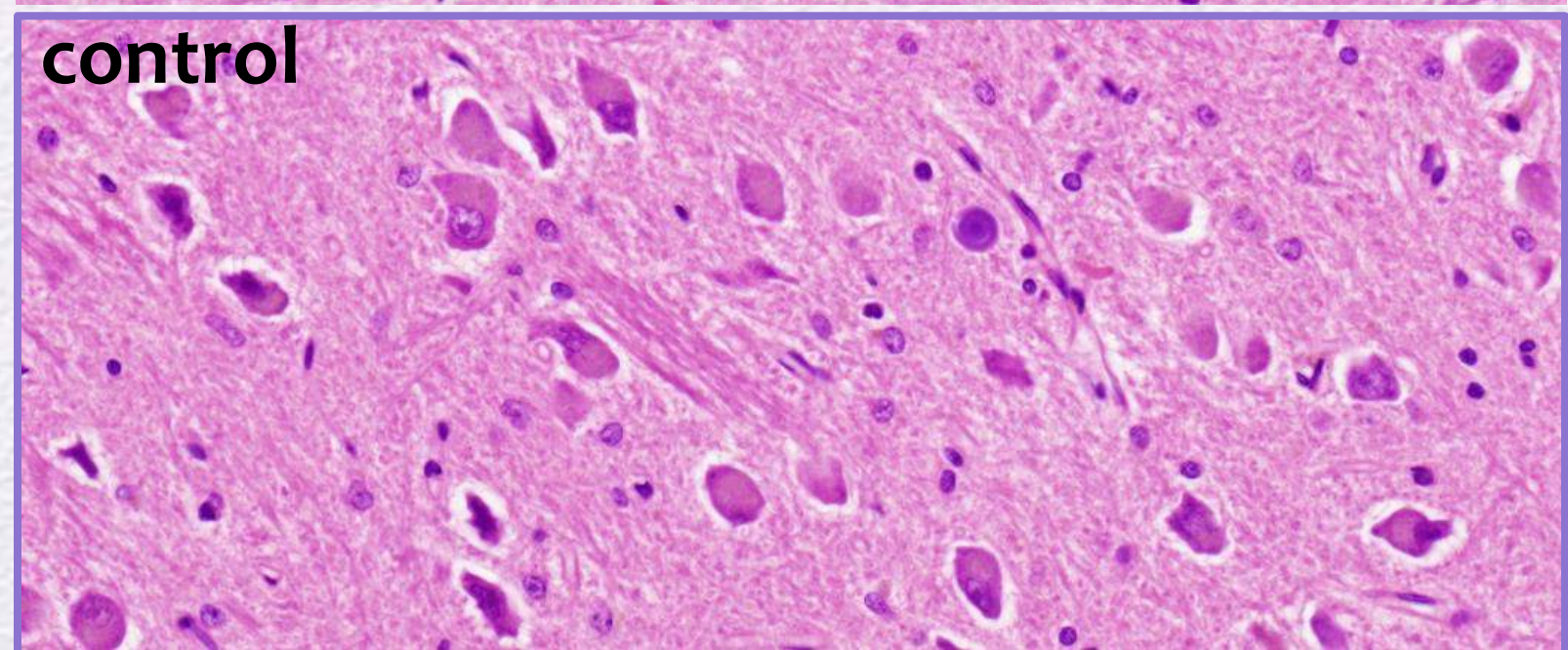


Escourolle and Poirier's
Manual of Basic Neuropathology

SCA6



control



SCA6

Pathology is simple!

Cortical cerebellar degeneration

Purkinje cells > granule cells

Purkinje cells

1C2 (+) NCIs

Torpedos: swelling of proximal axons

glial reaction

Bergmann glia proliferation

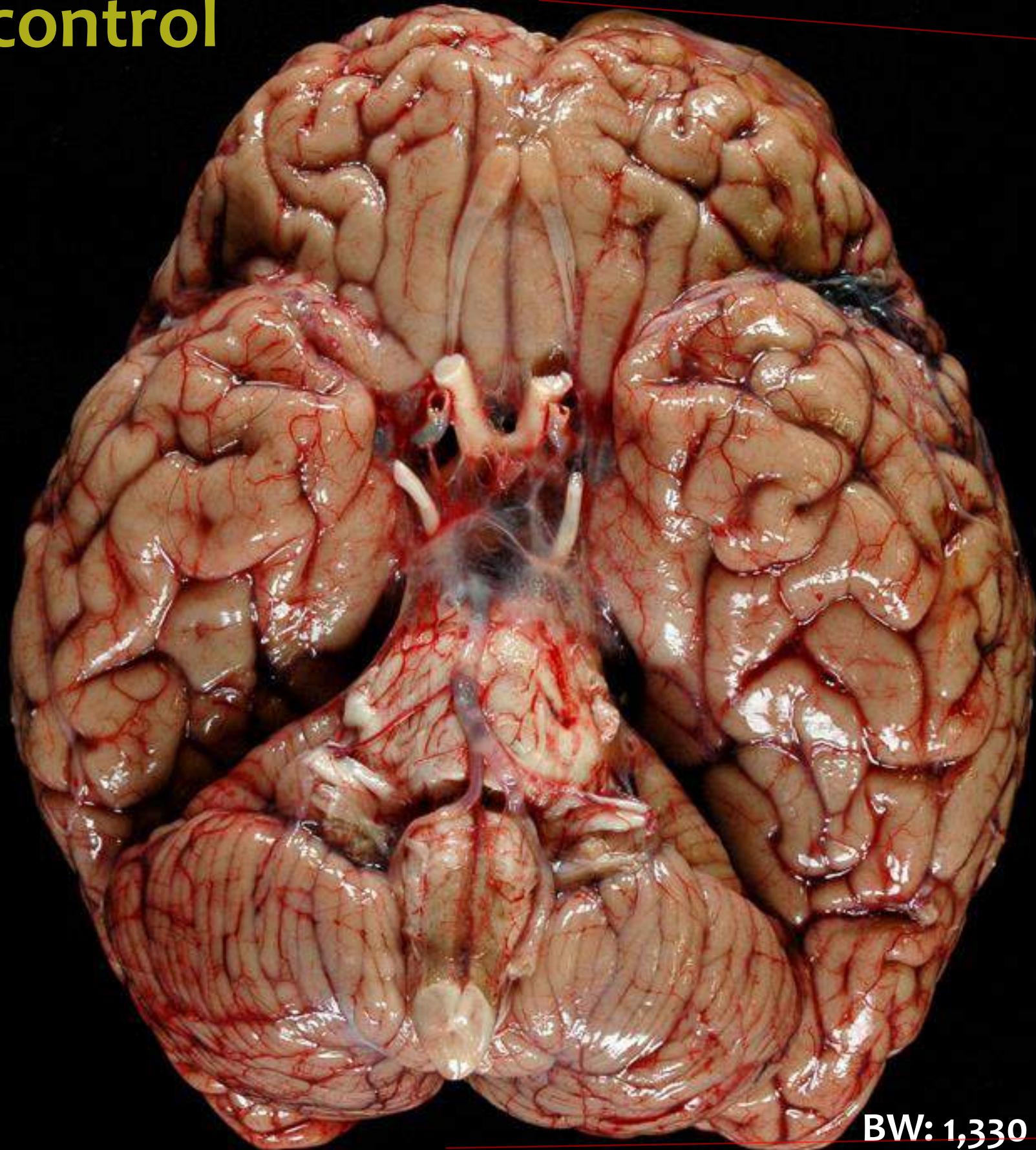
Empty baskets

Inferior olivary nucleus neuronal loss

secondary retrograde degeneration

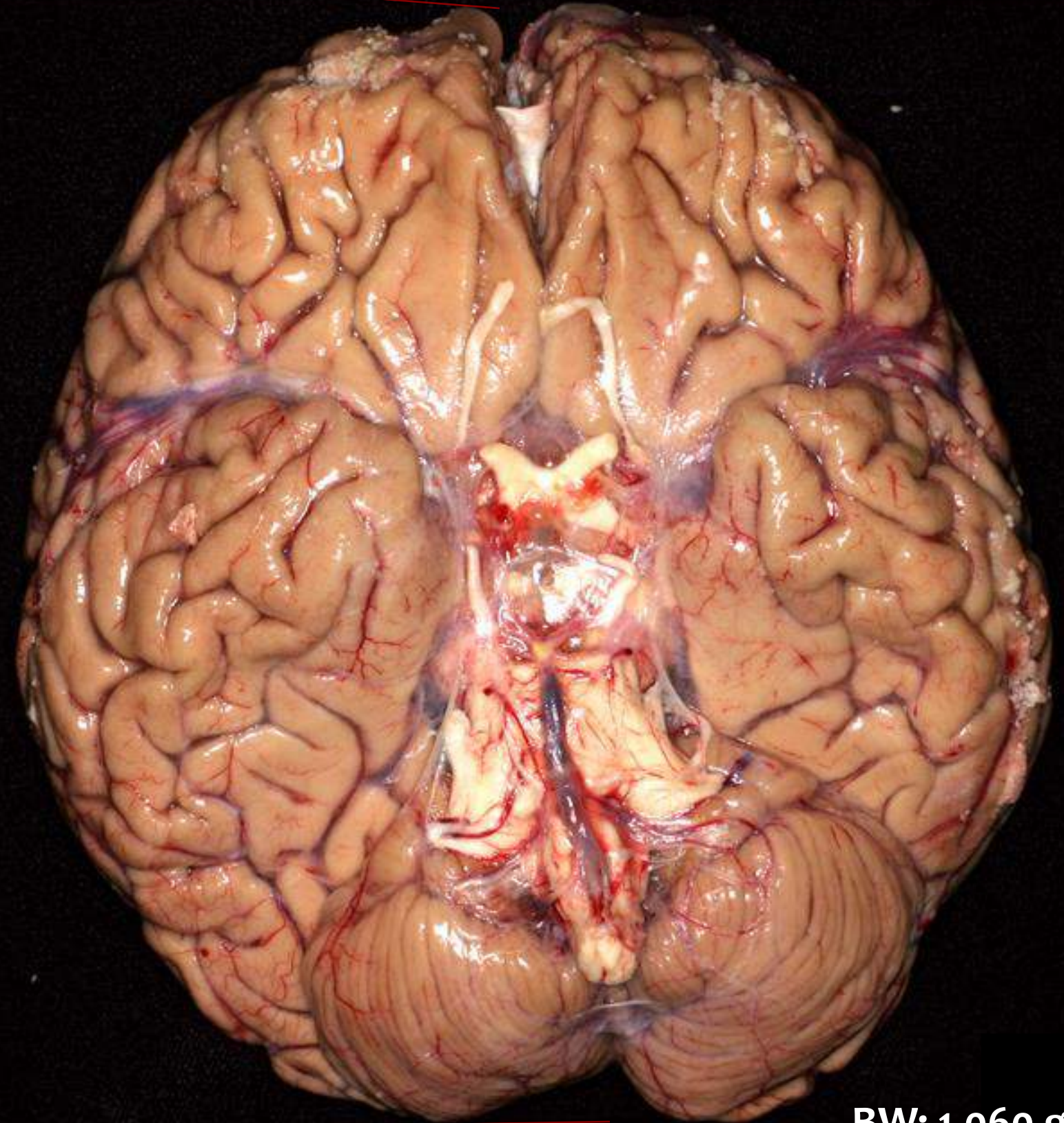
DRPLA: dentatorubral-pallidoluysian atrophy

control



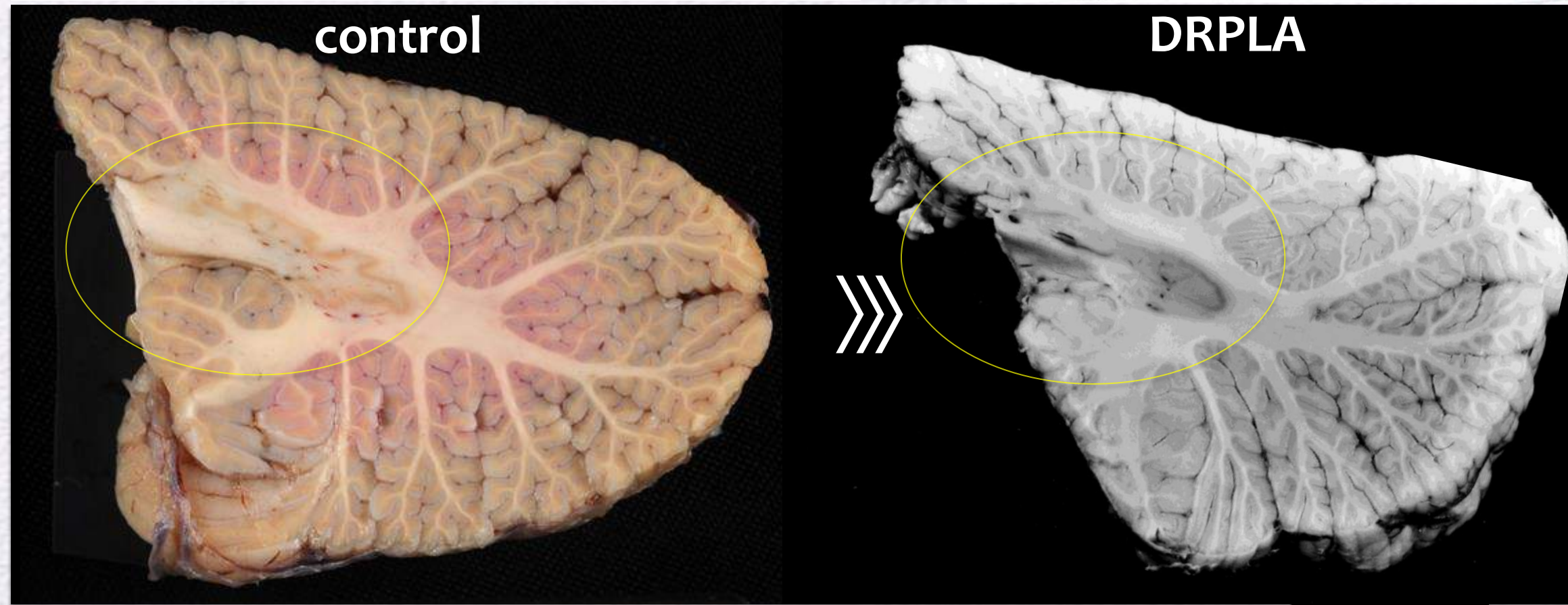
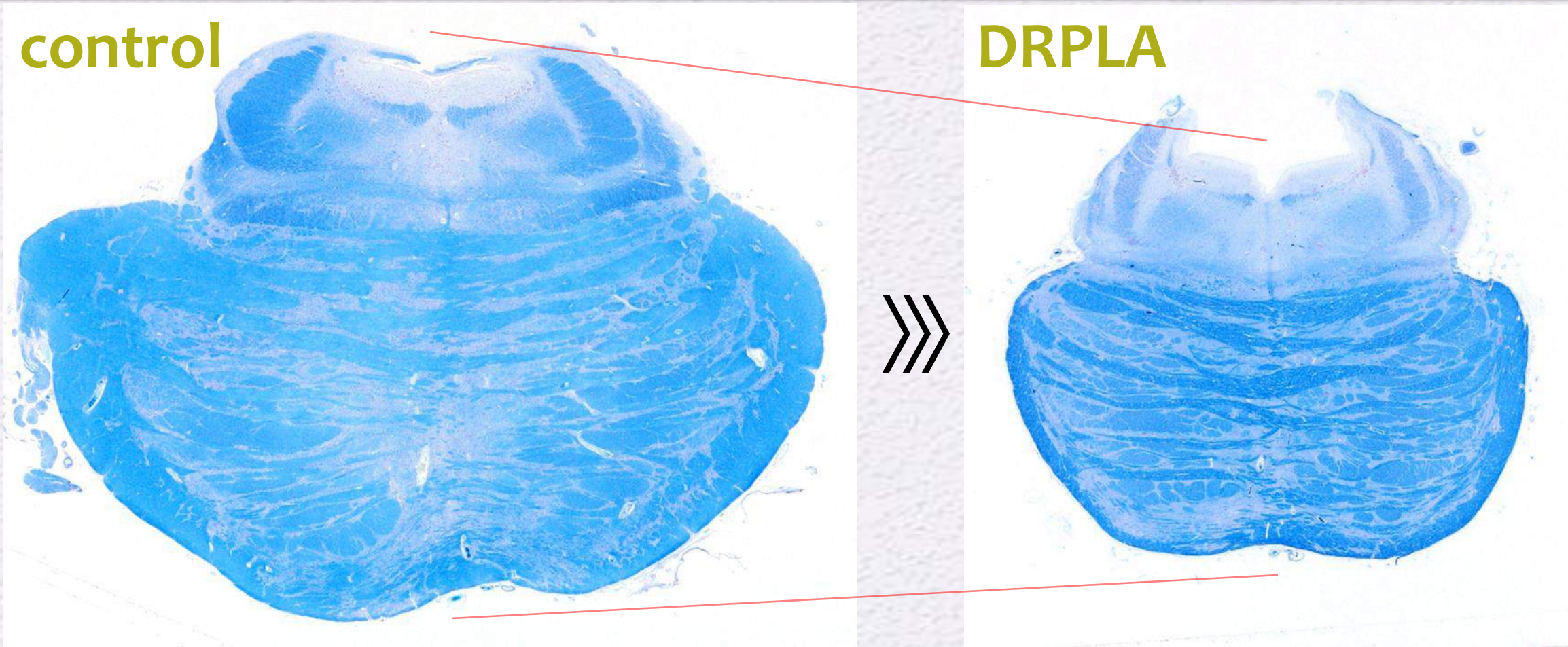
BW: 1,330 g

DRPLA

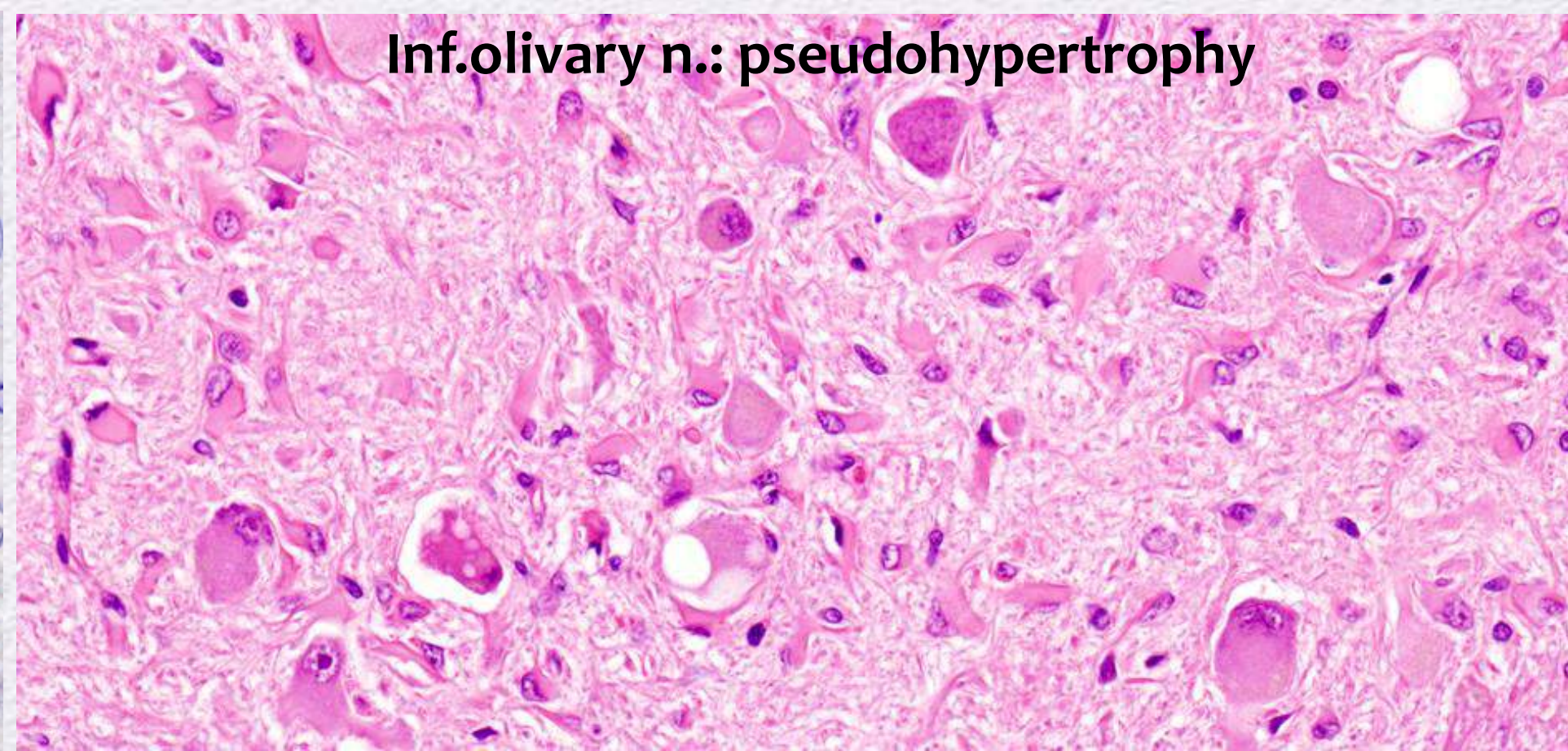
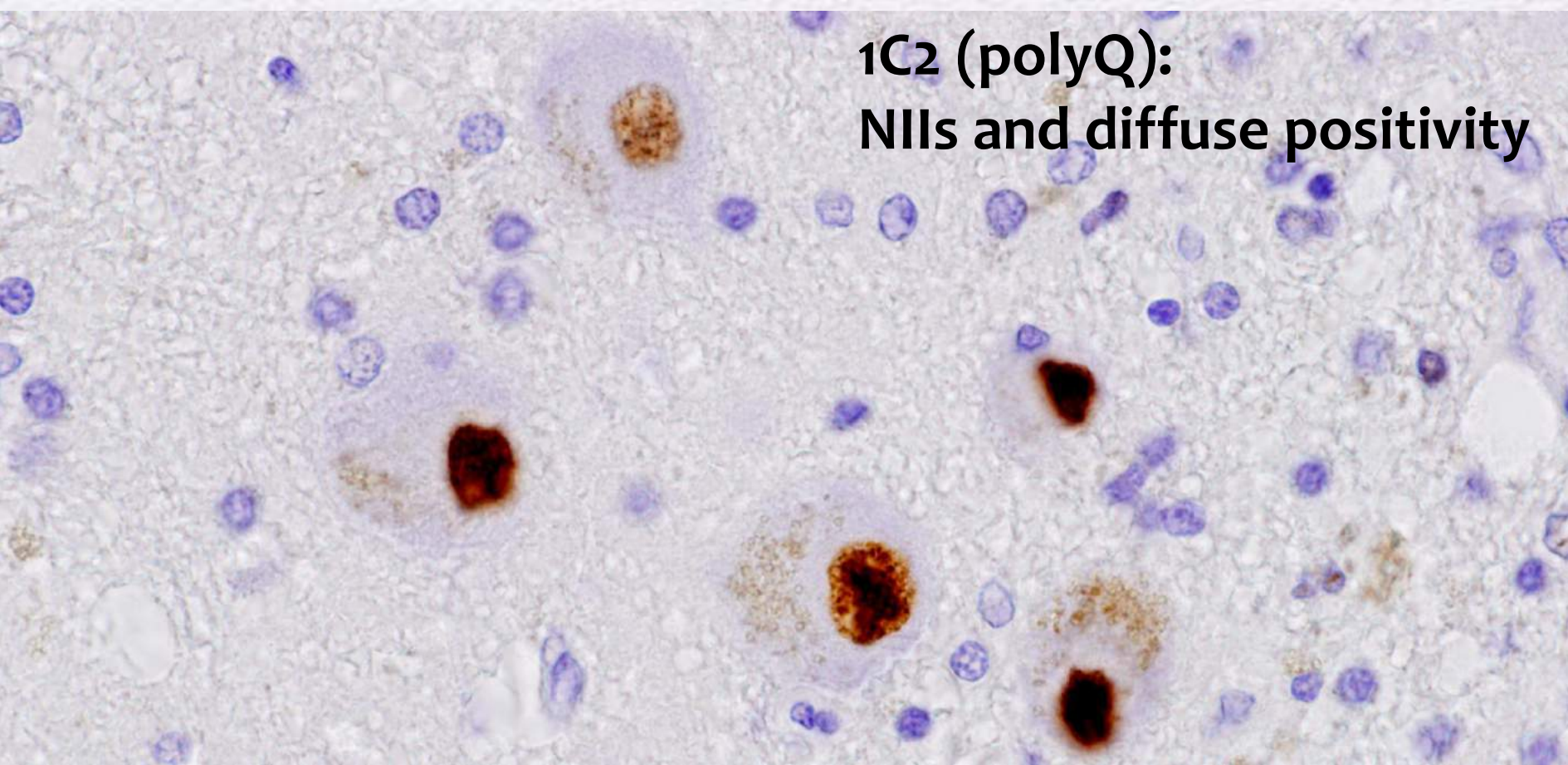
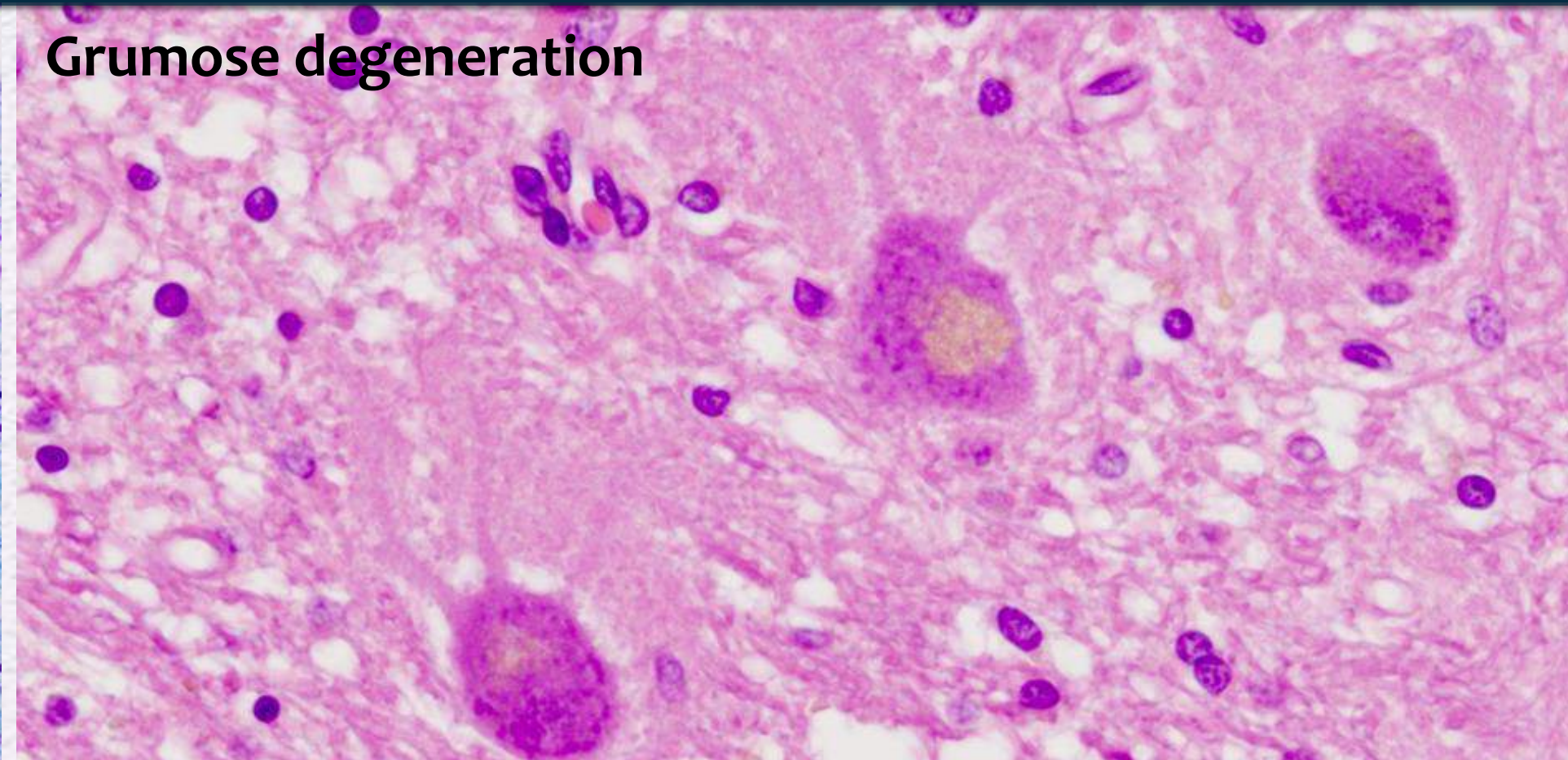
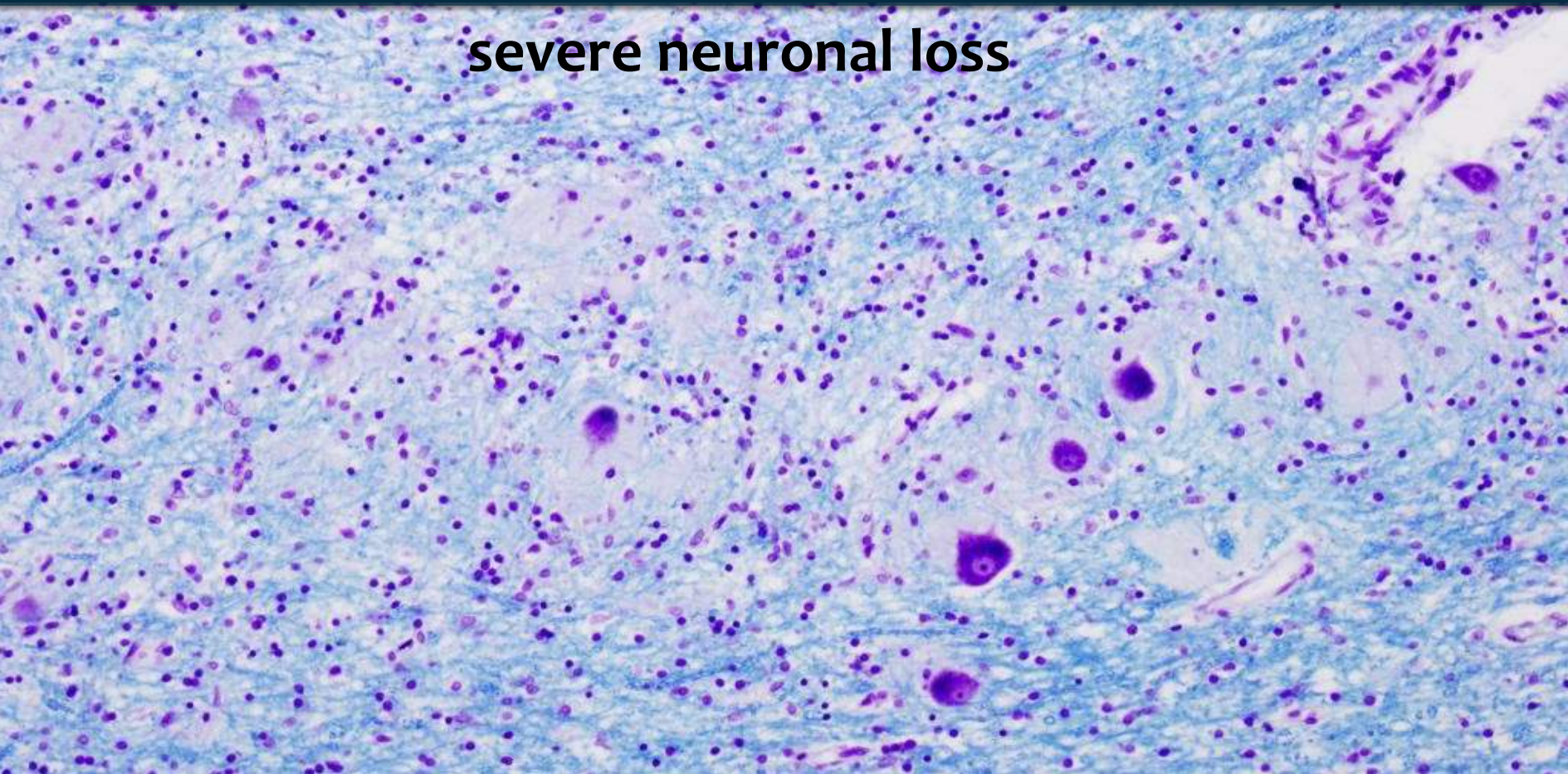


BW: 1,060 g

DRPLA: small, but **well-proportioned** brain

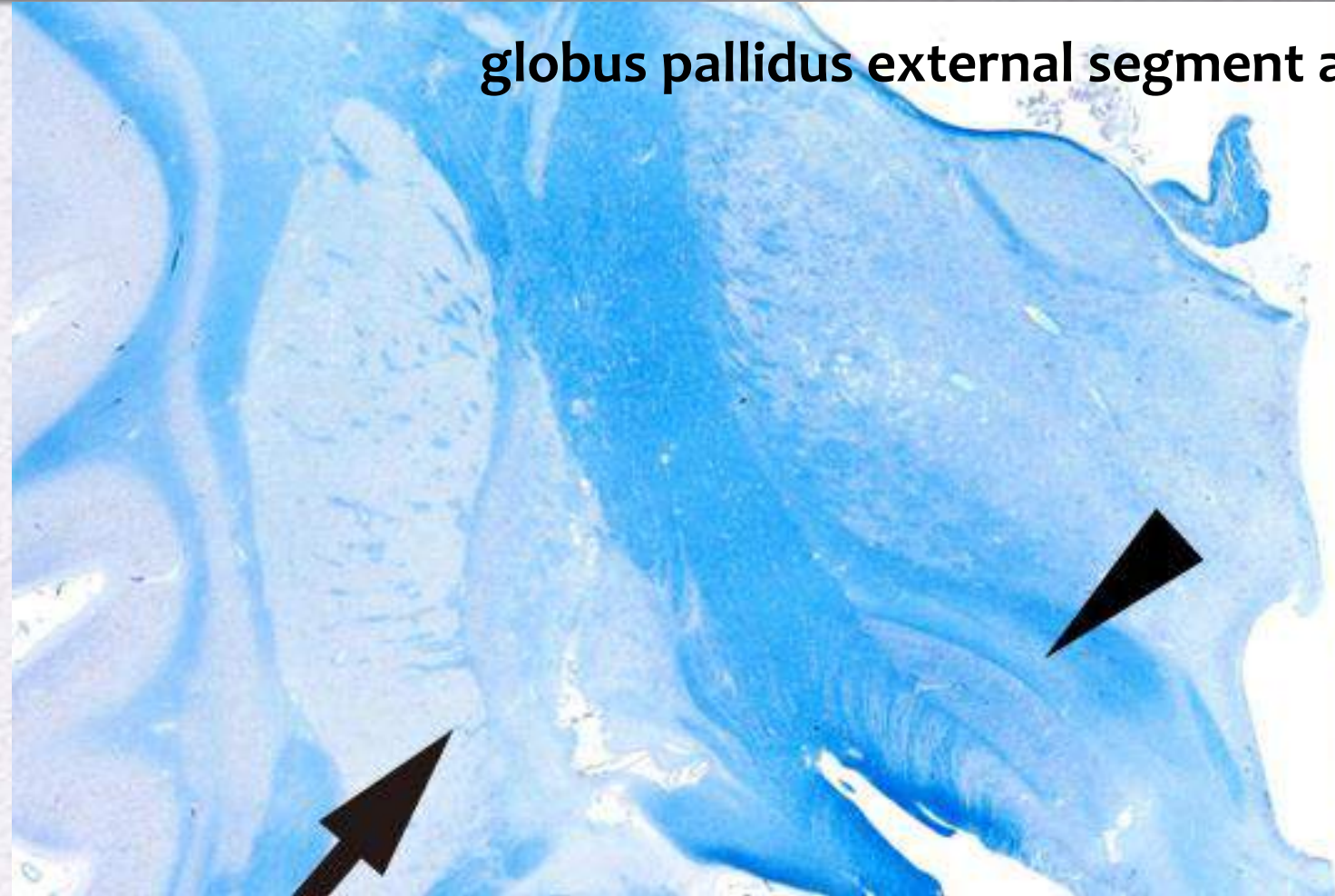


DRPLA: dentate nucleus

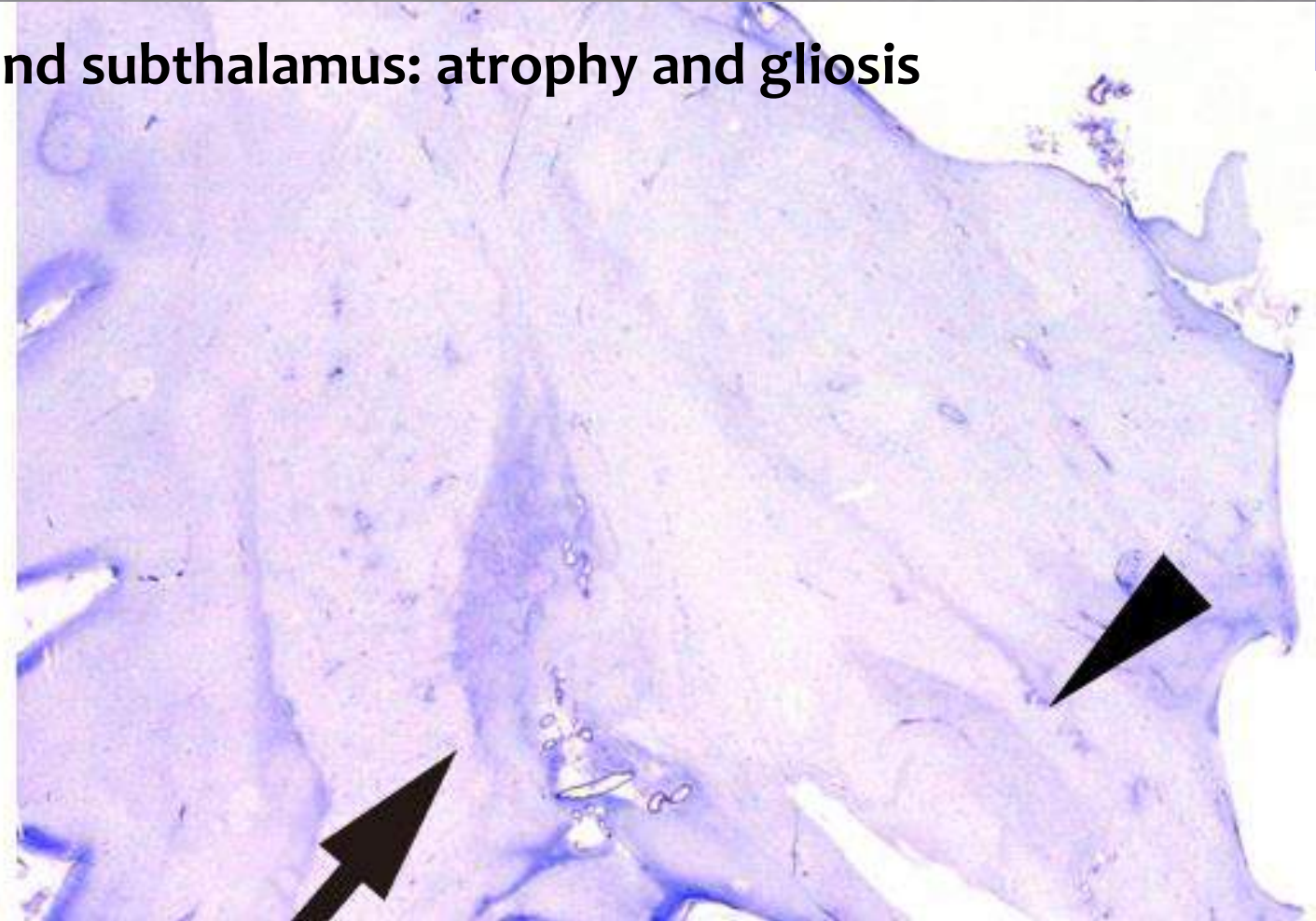


DRPLA: pallidoluysian

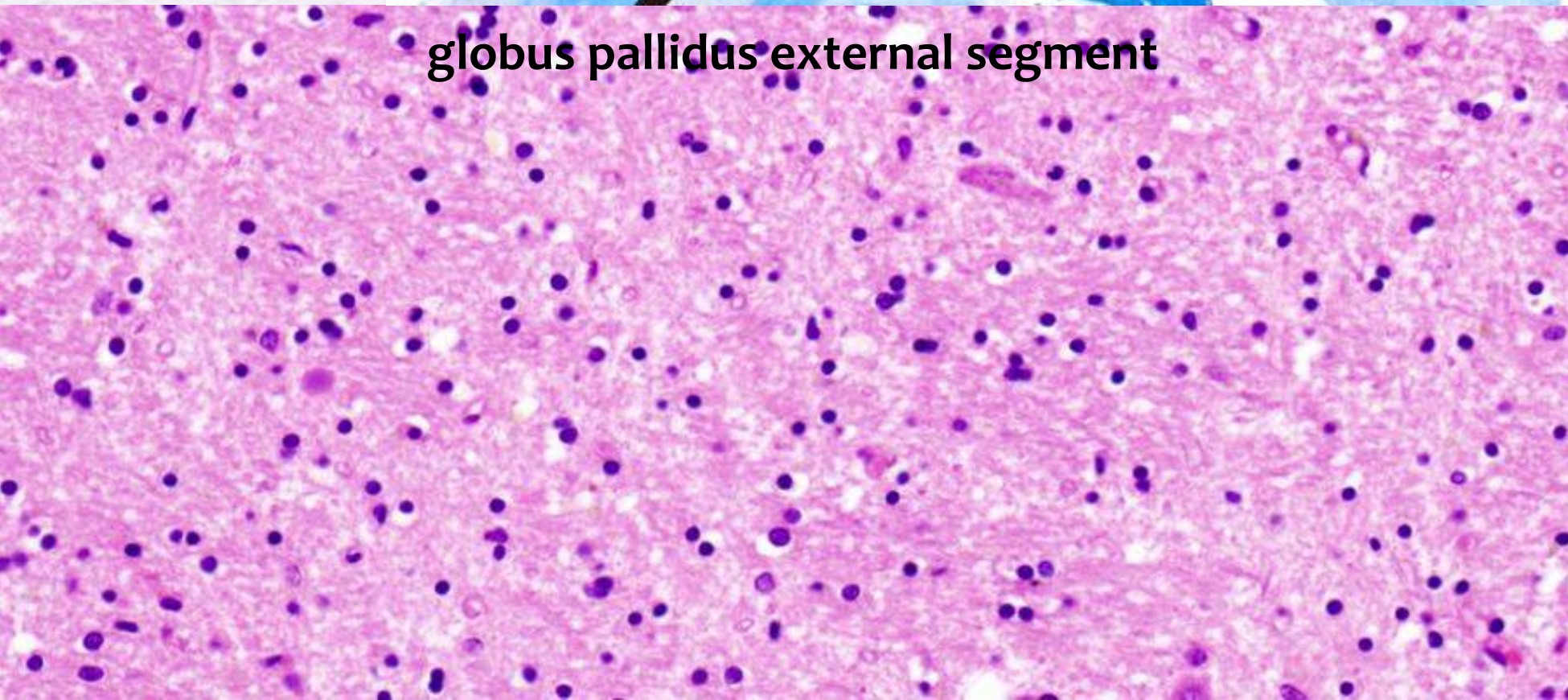
K-B stain for myelin



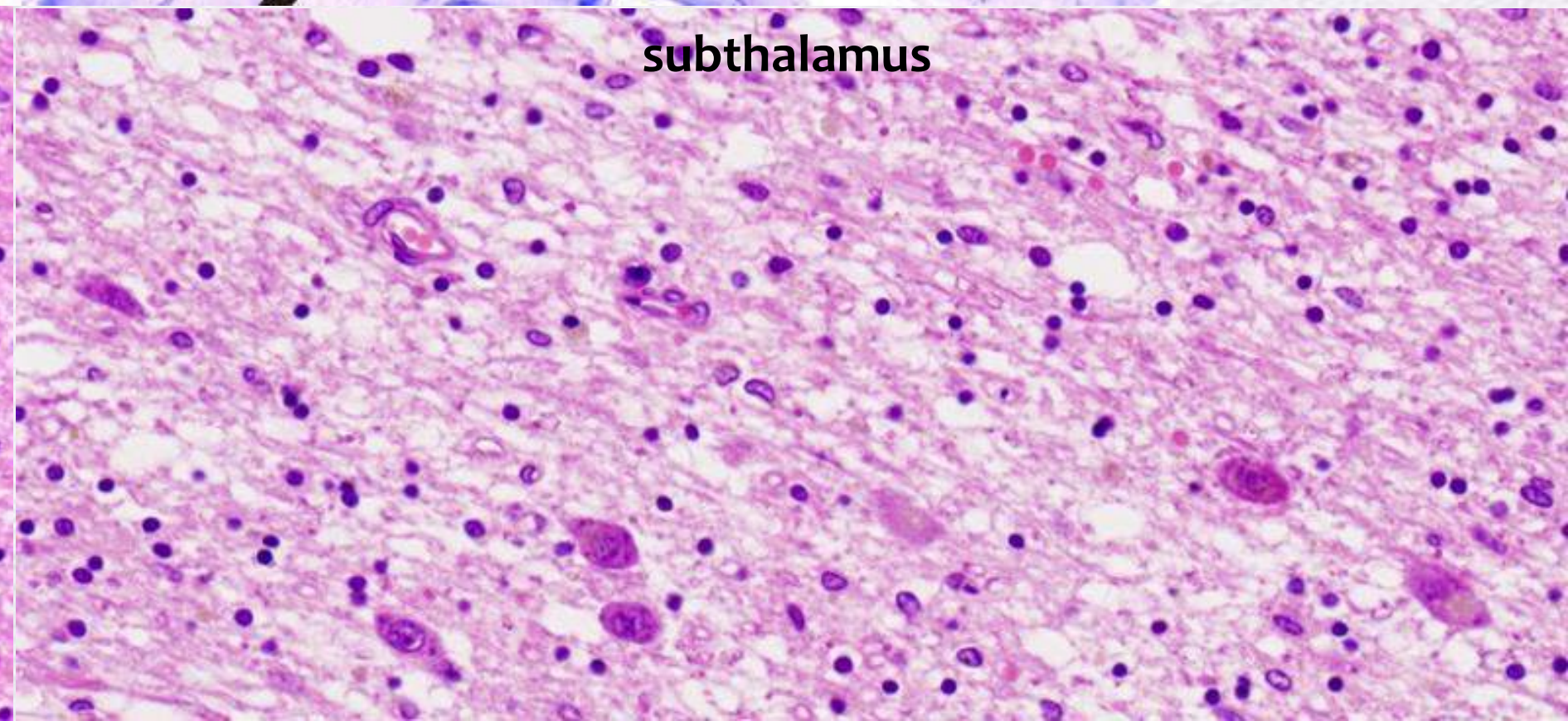
Holzer stain for gliosis



globus pallidus external segment

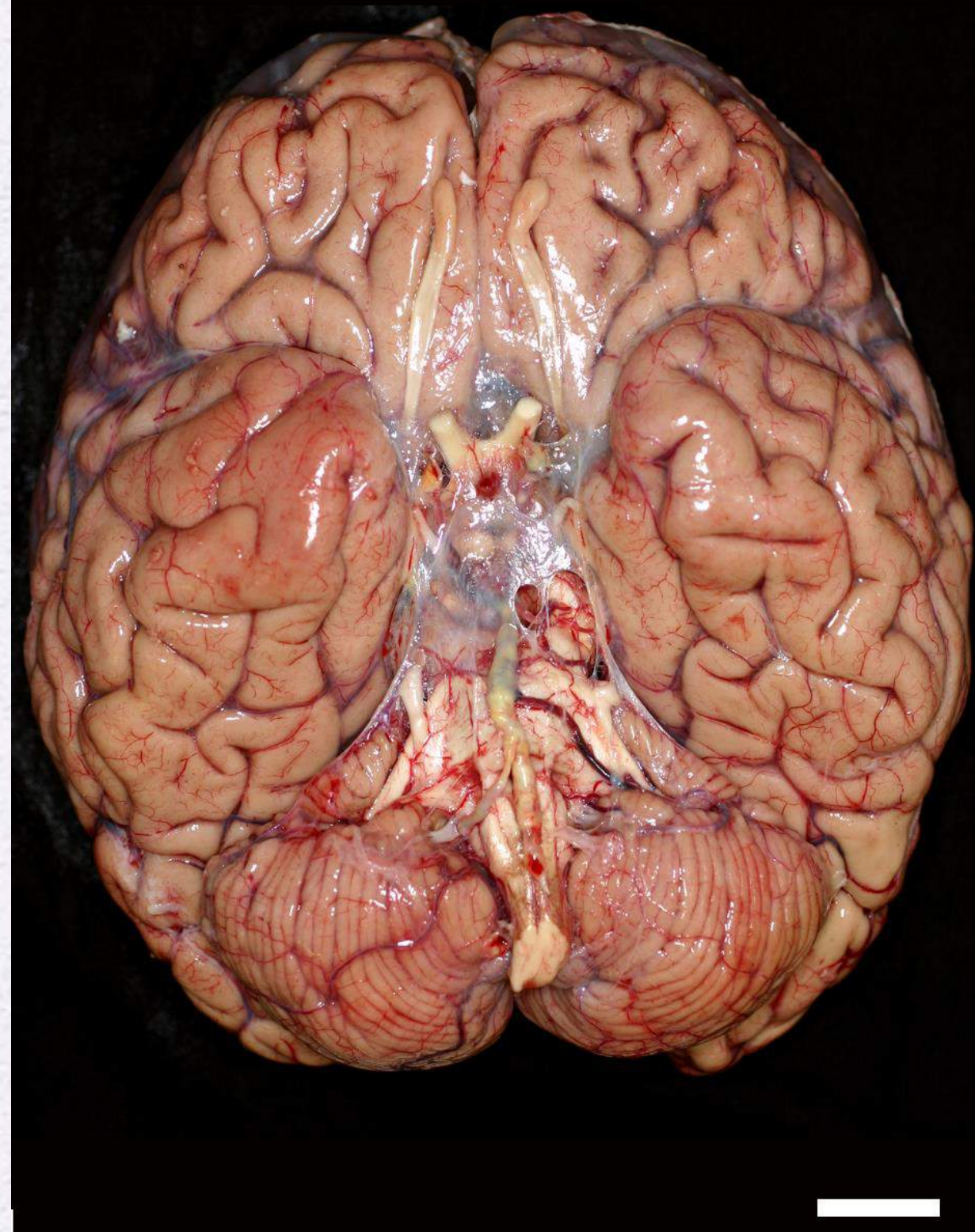


subthalamus

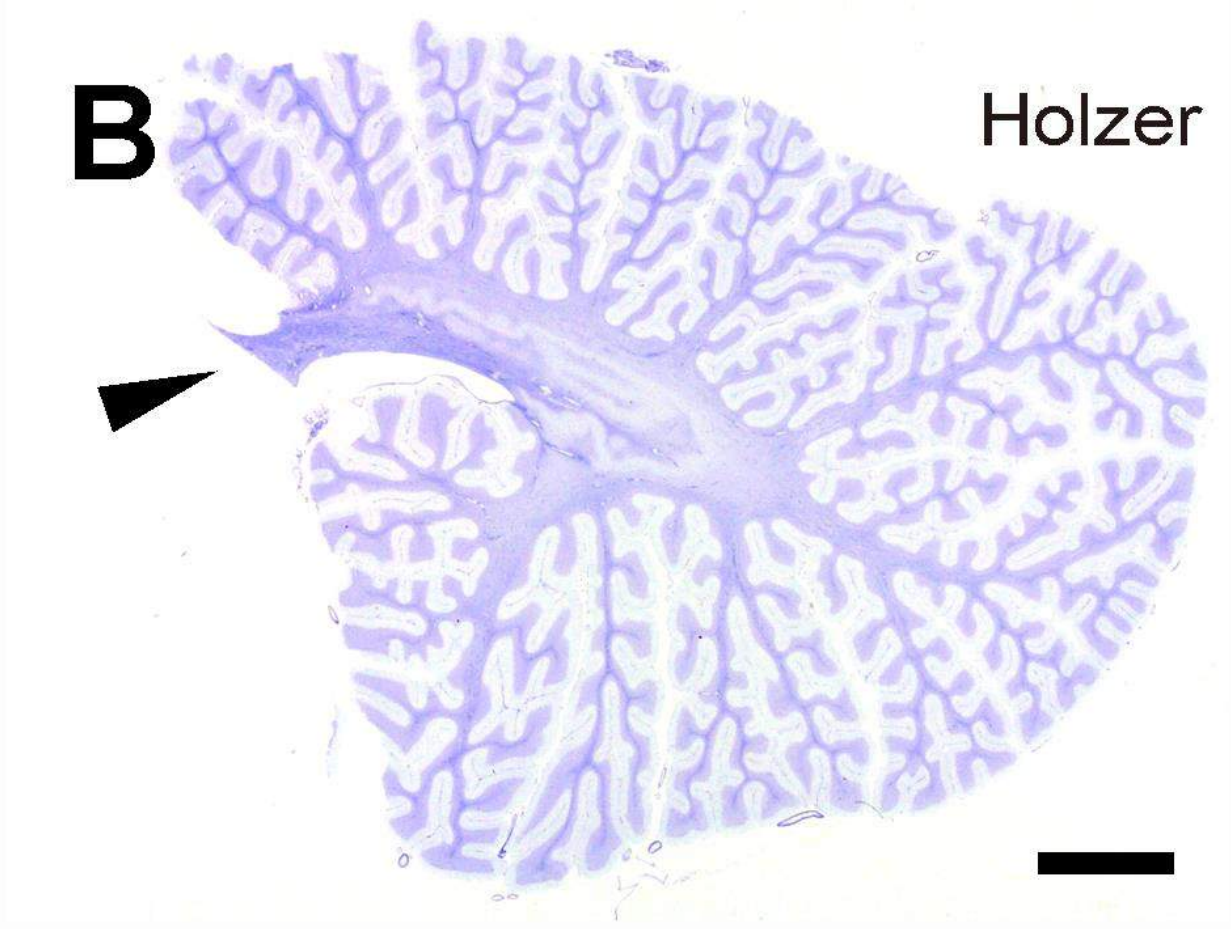


SCA3/MJD (Machado-Joseph disease)

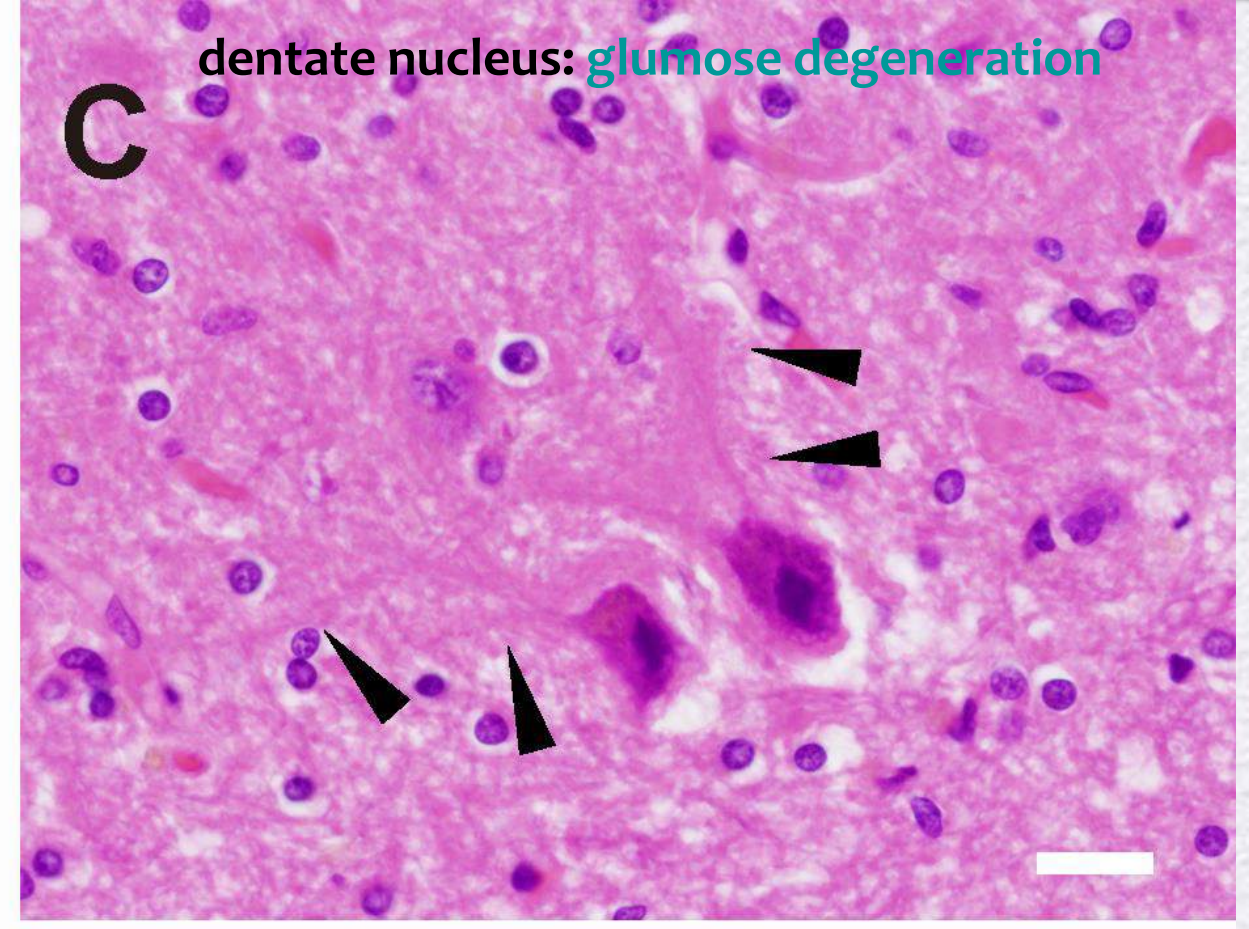
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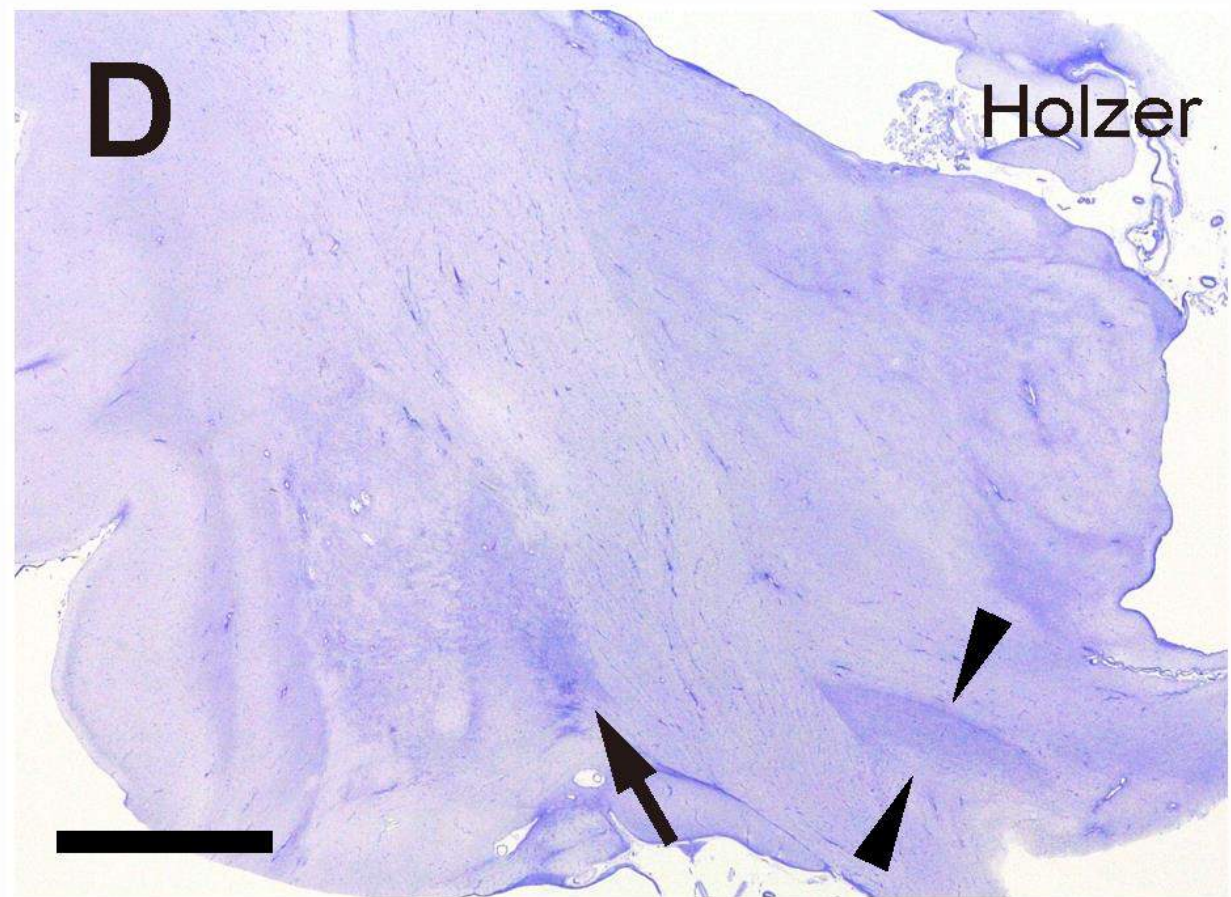
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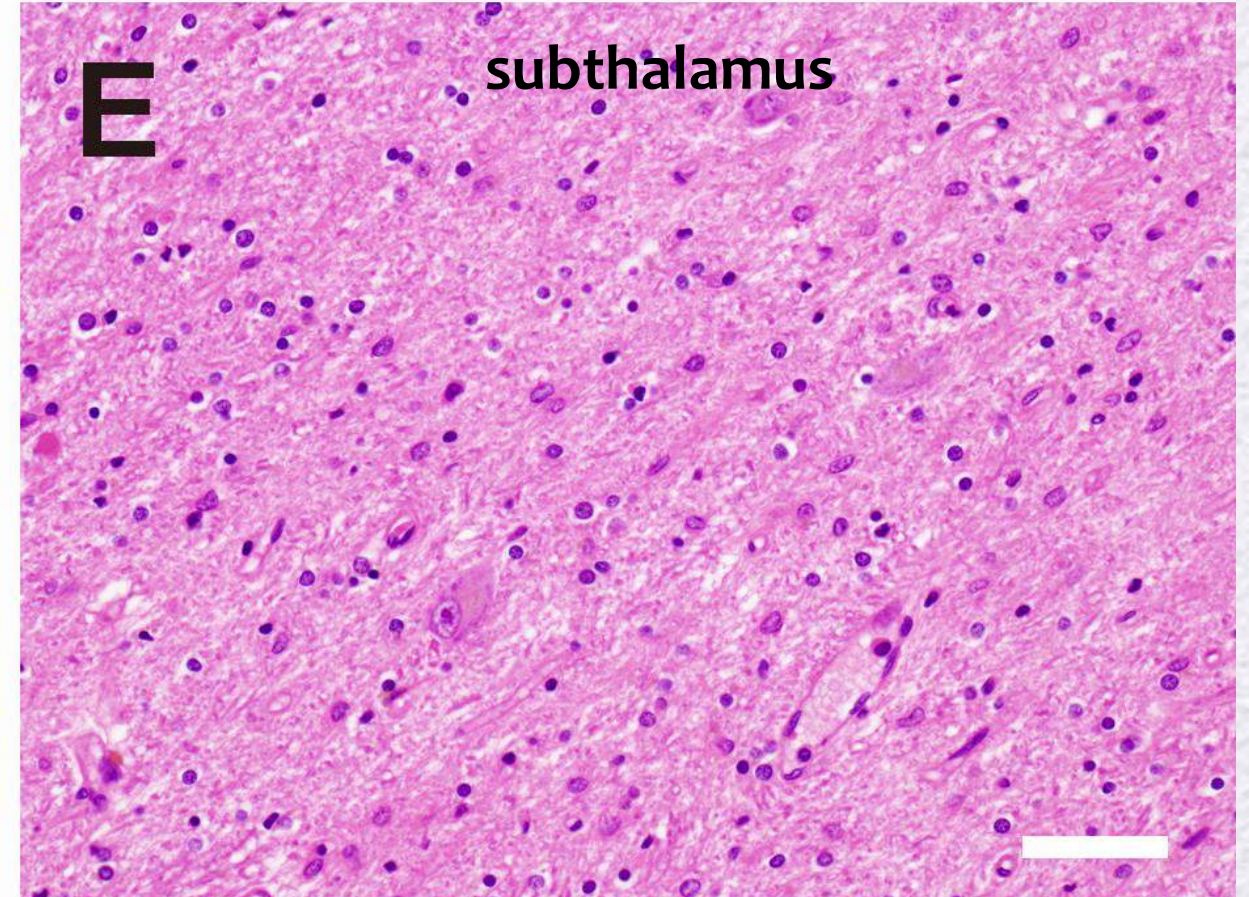
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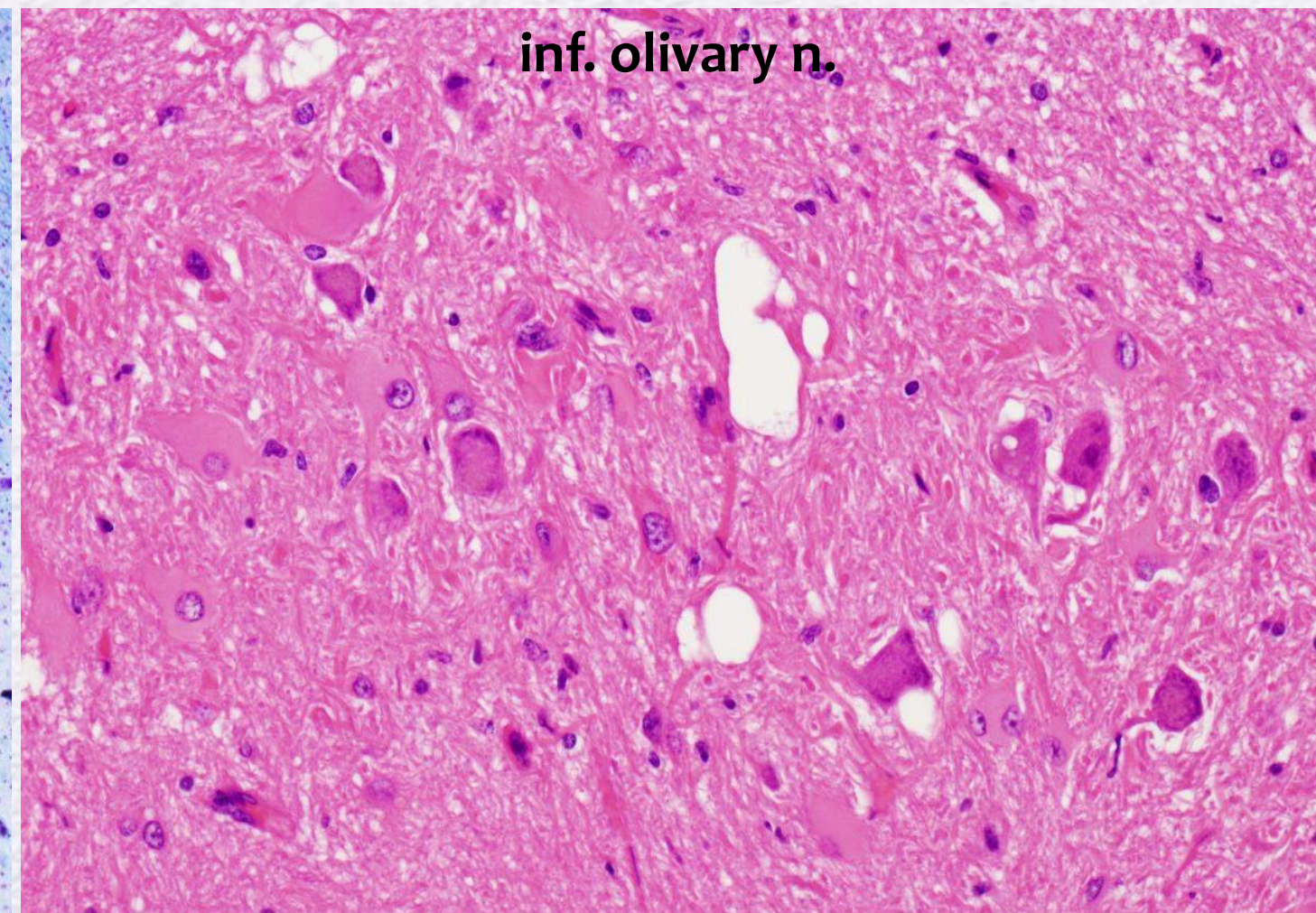
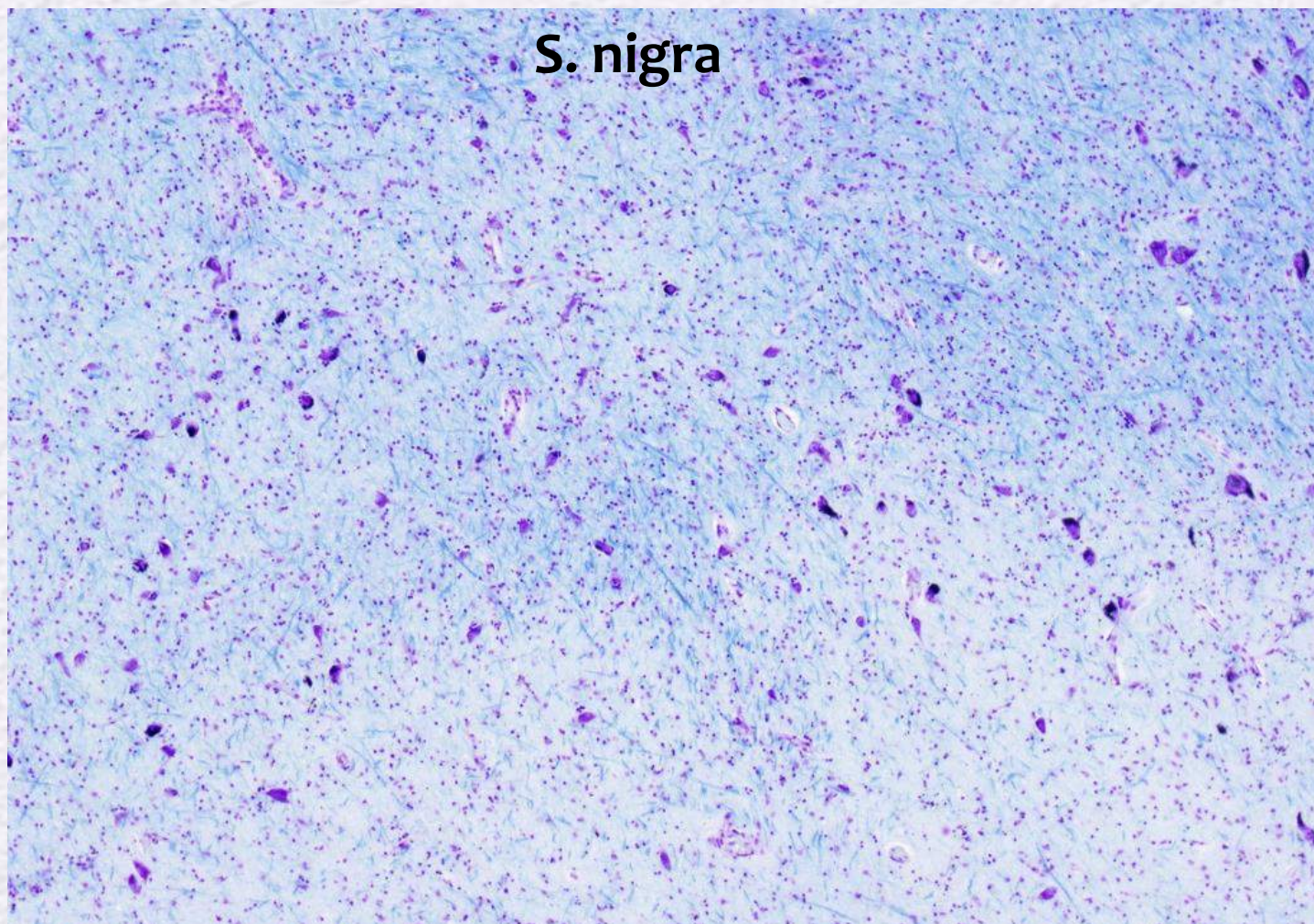
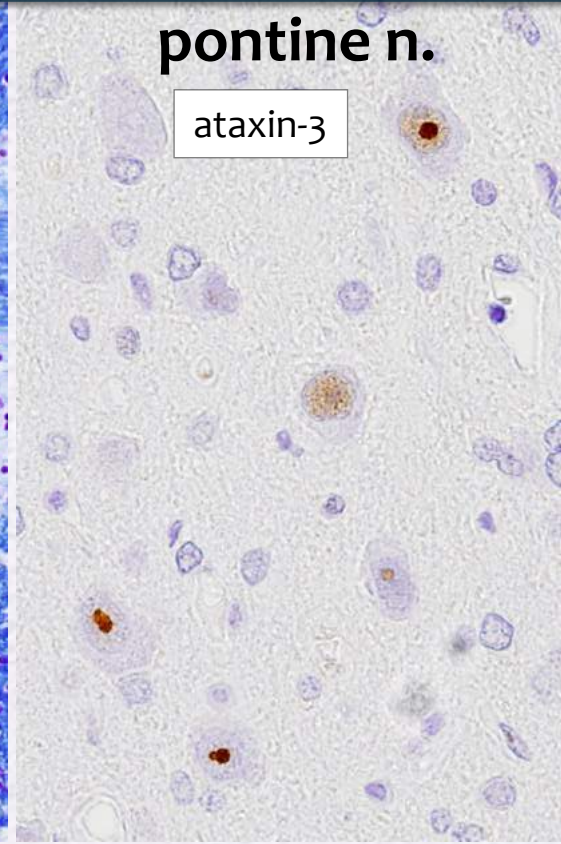
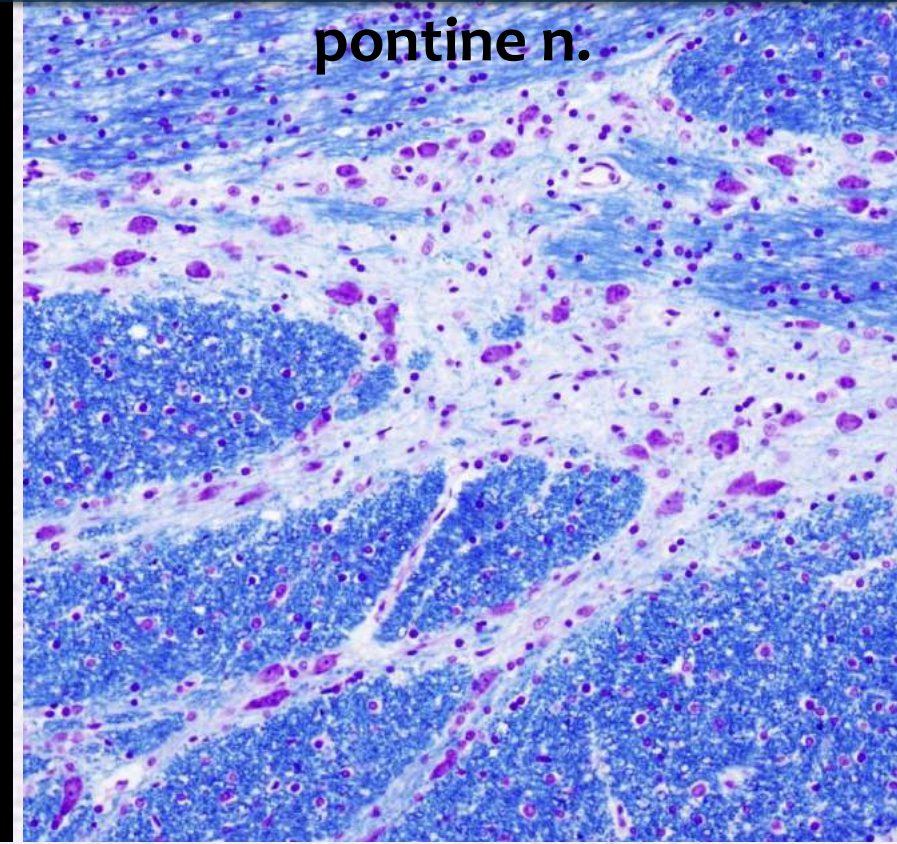
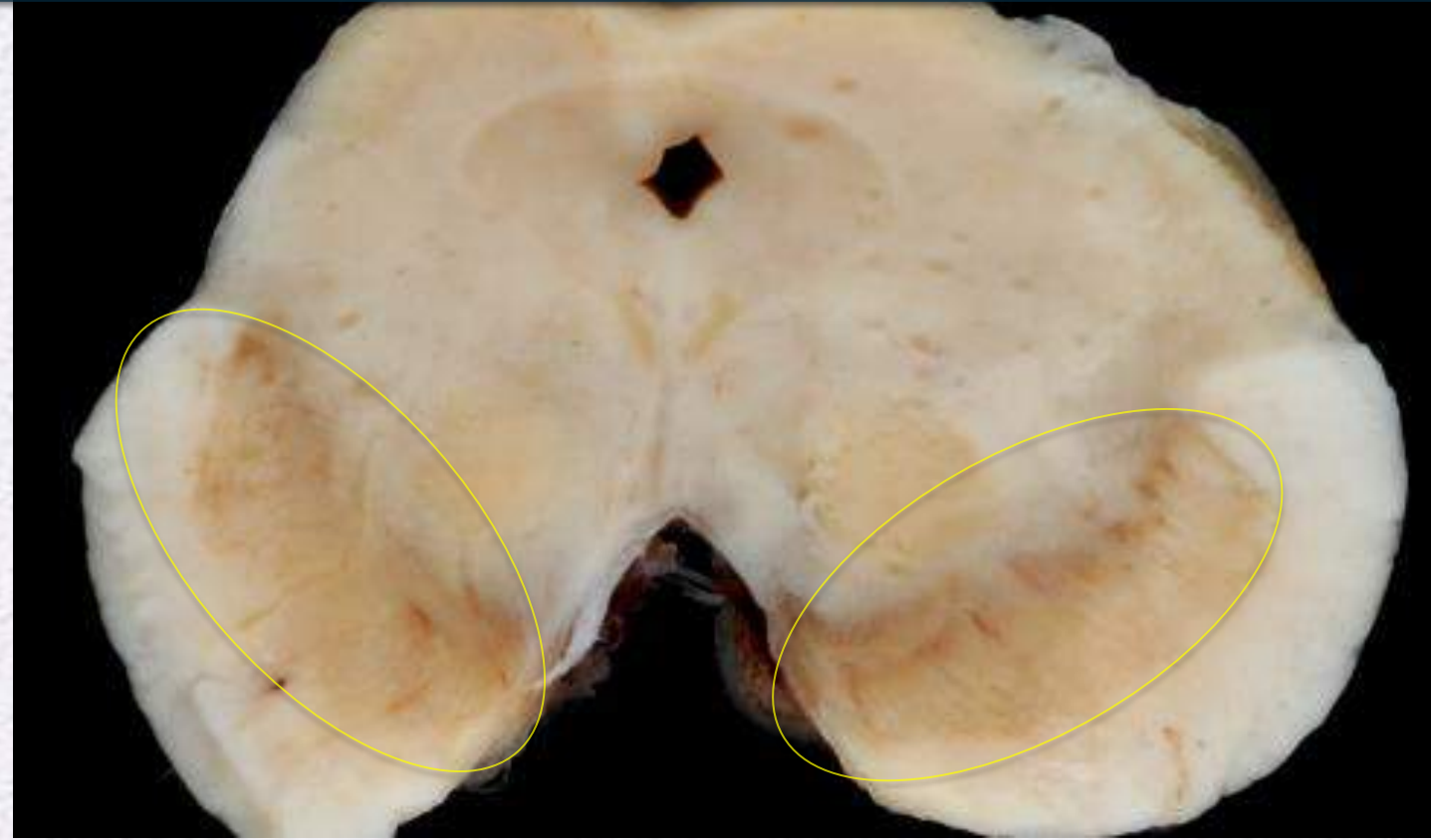
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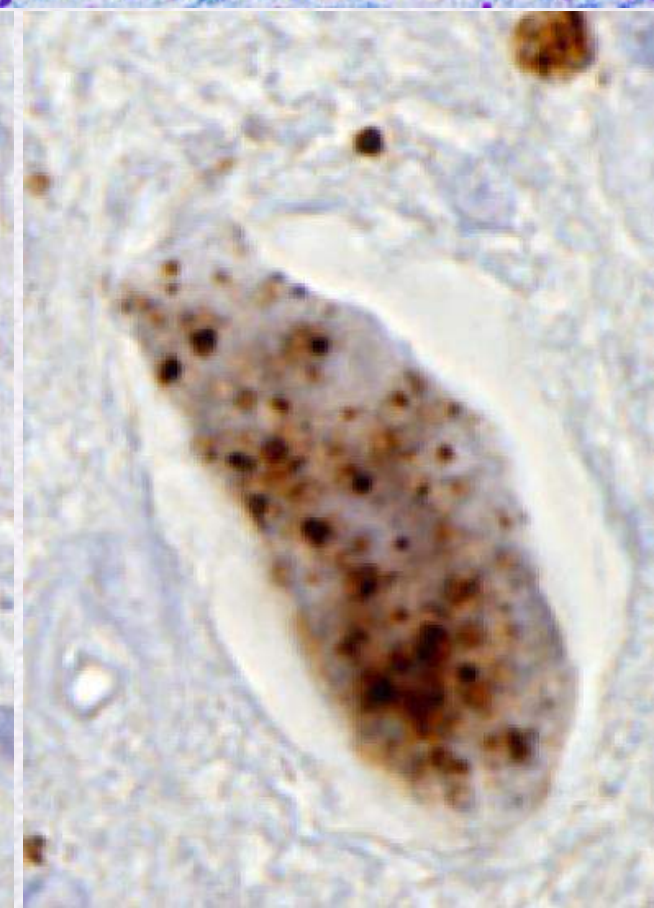
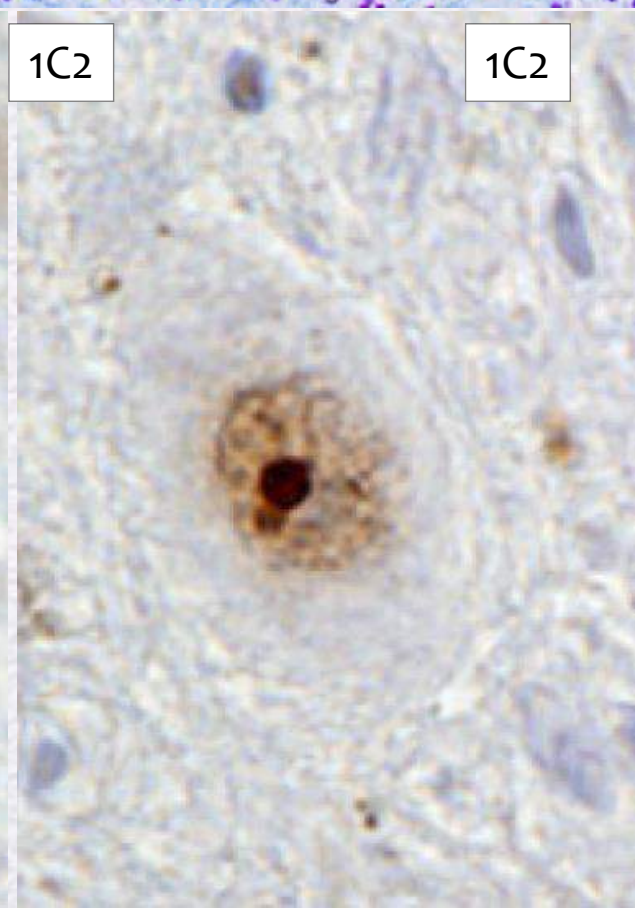
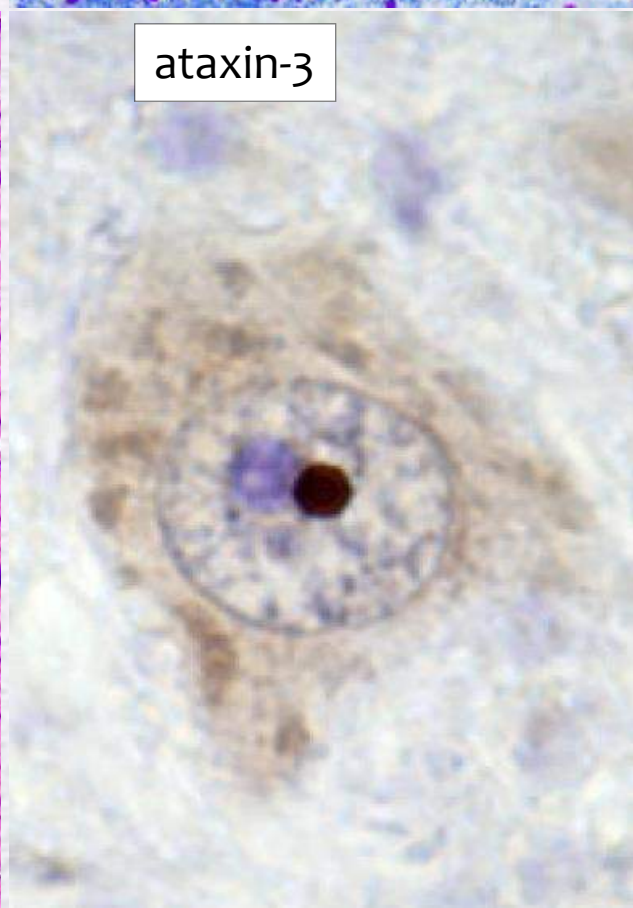
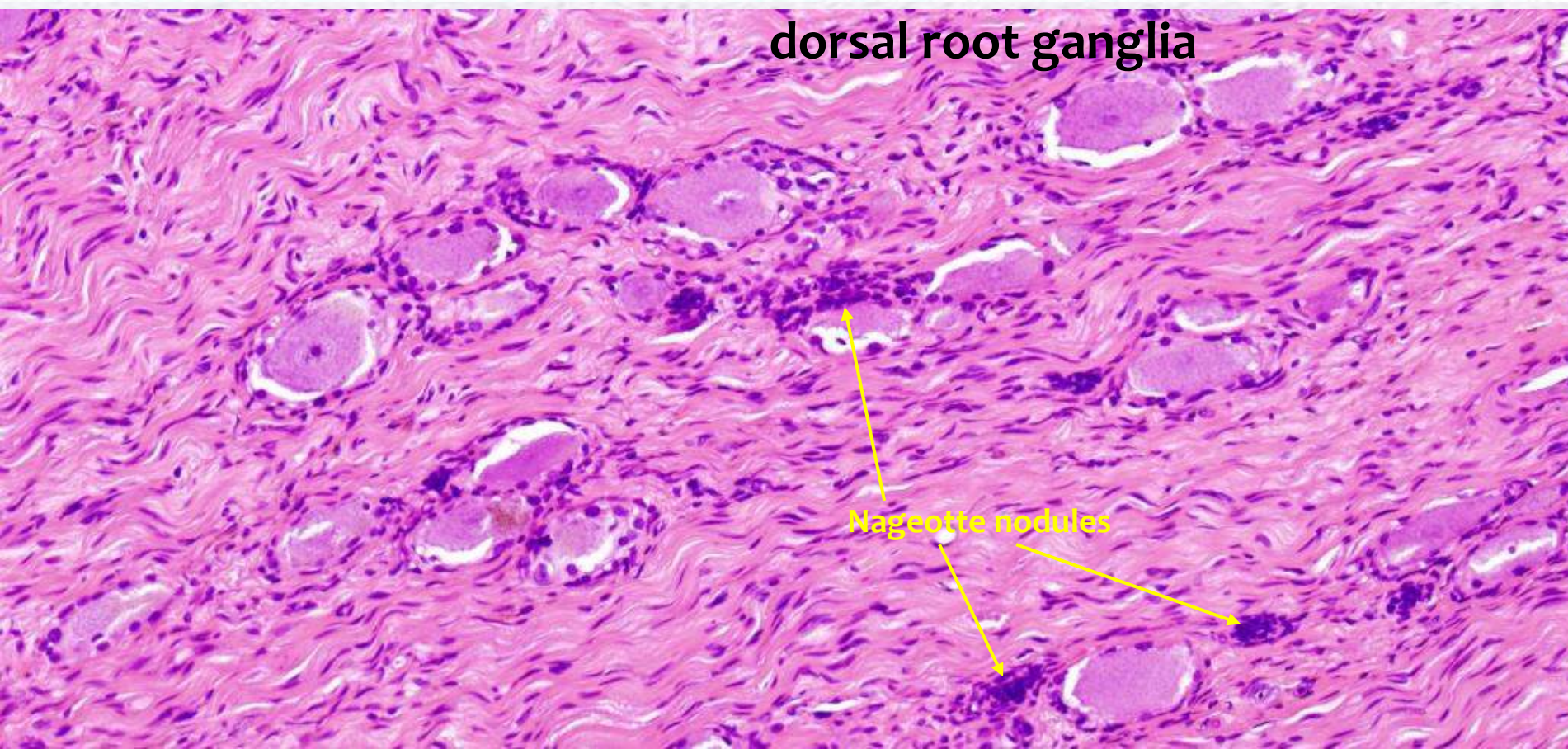
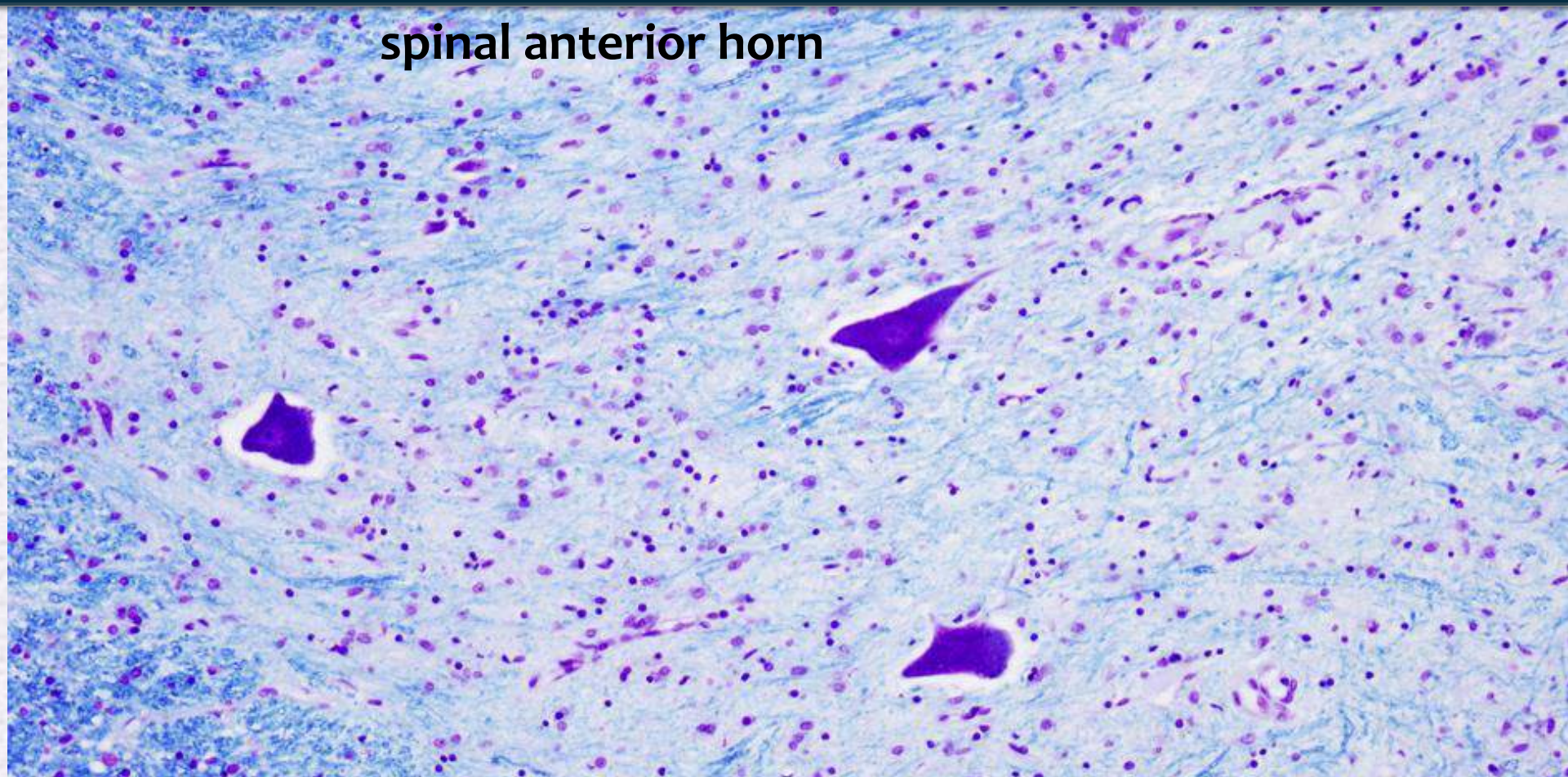
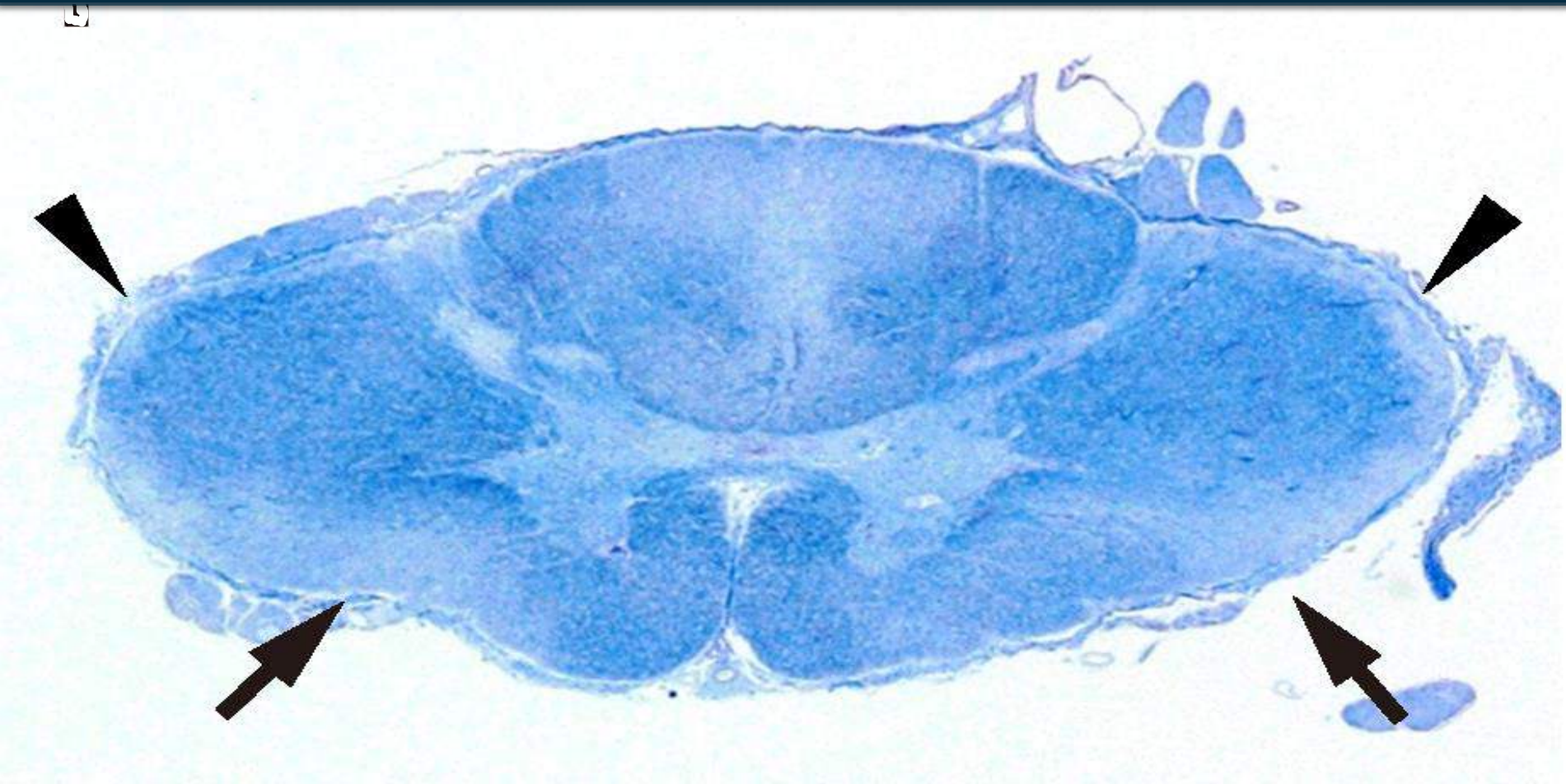
E



SCA3/MJD

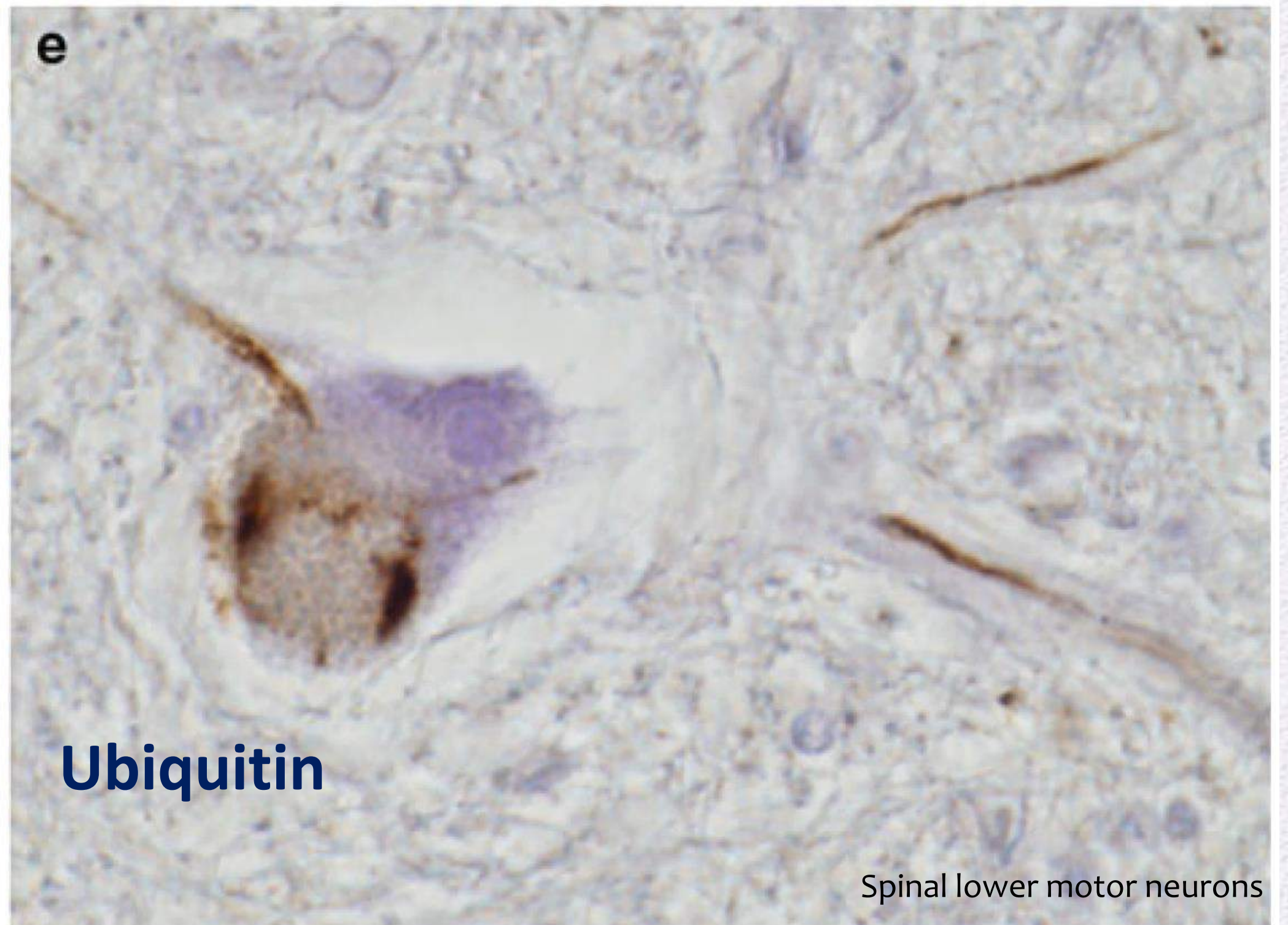
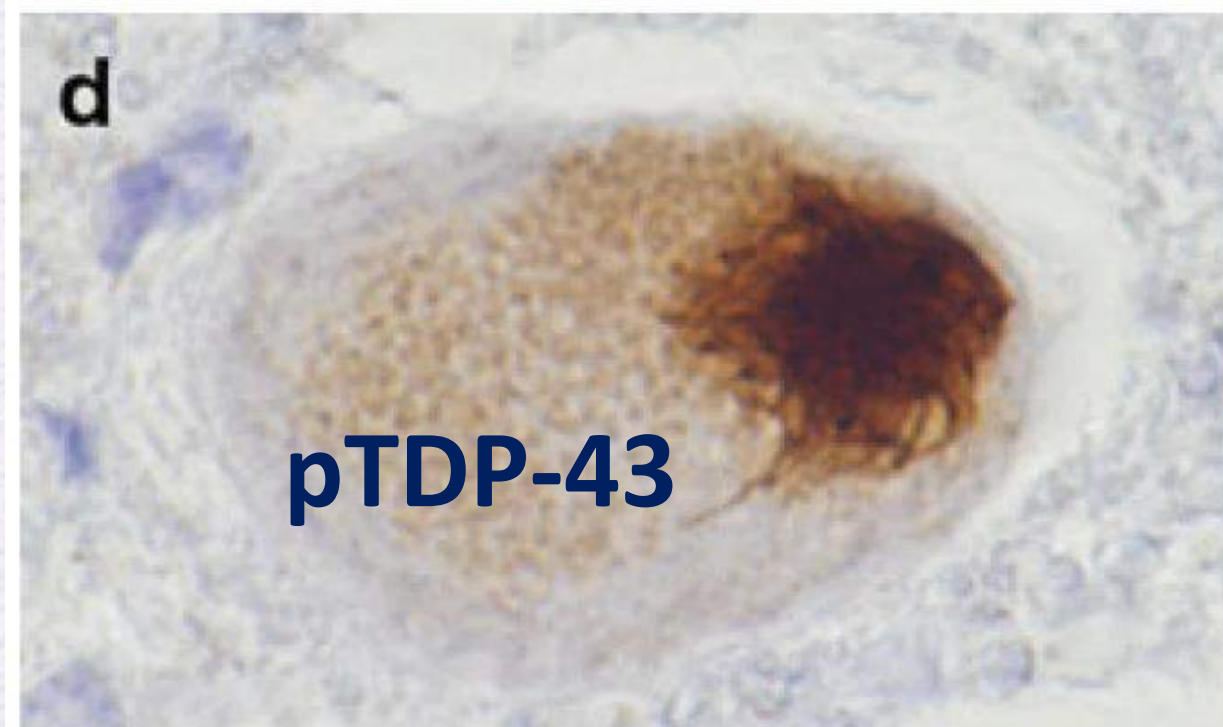
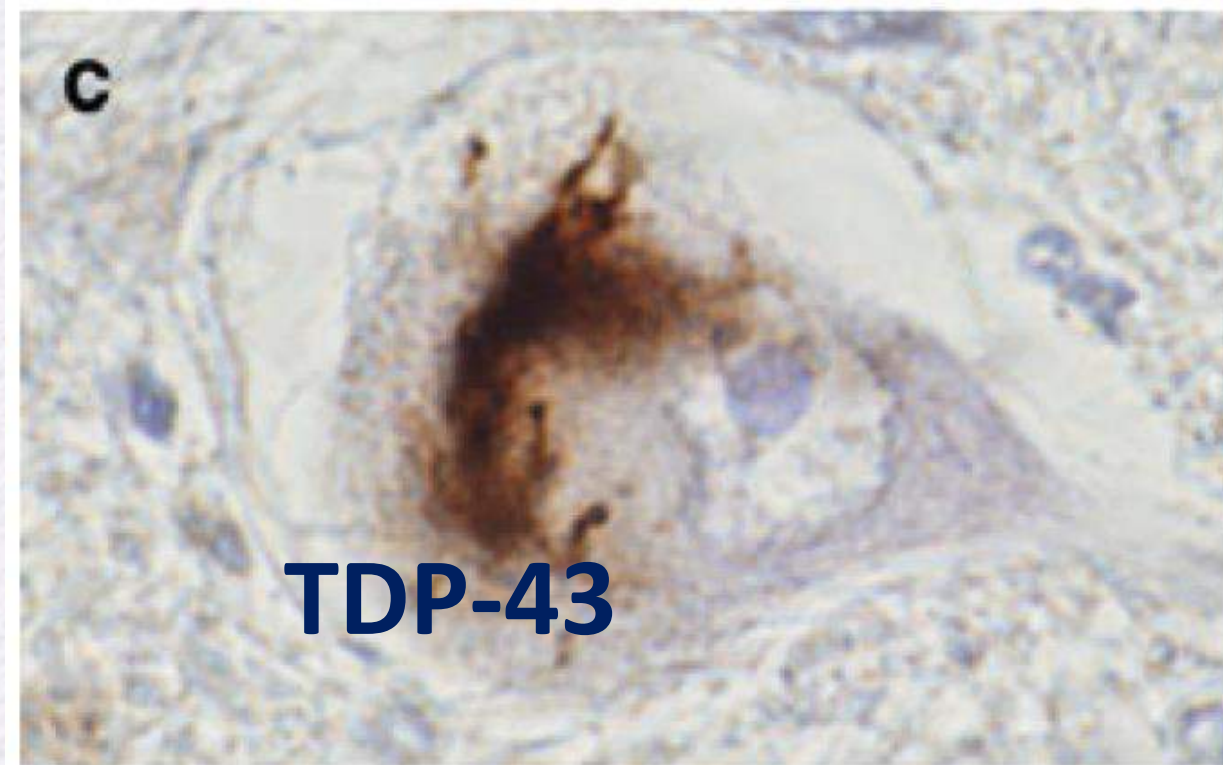


SCA3/MJD

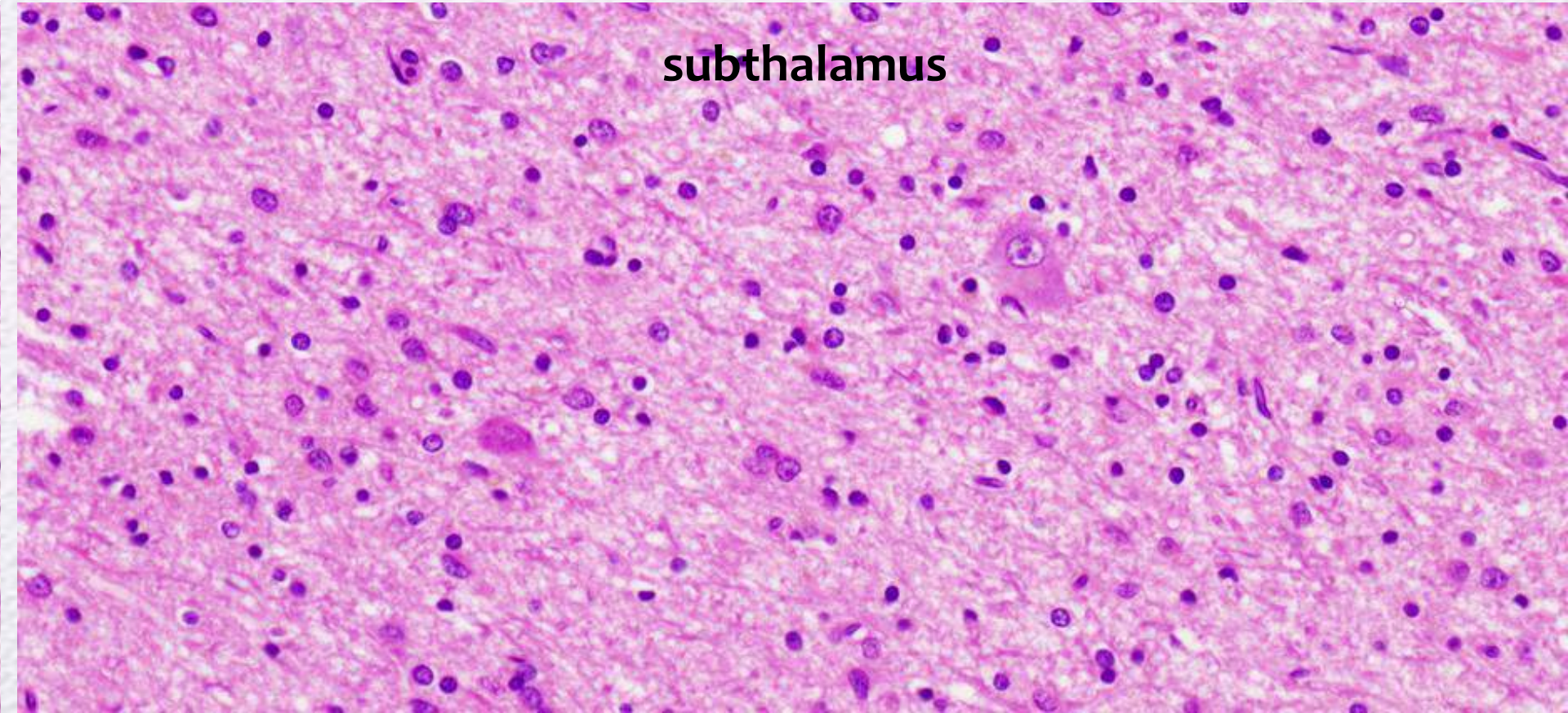
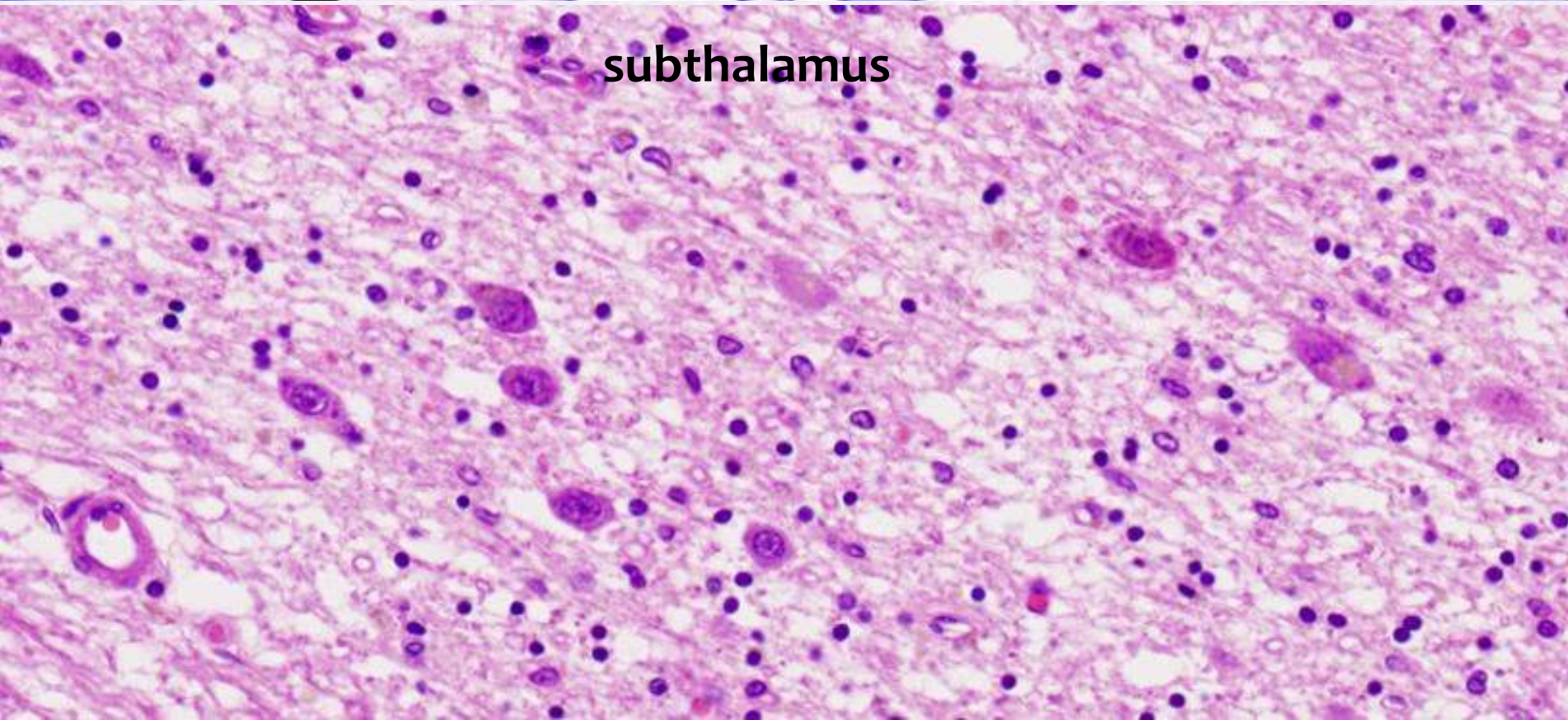
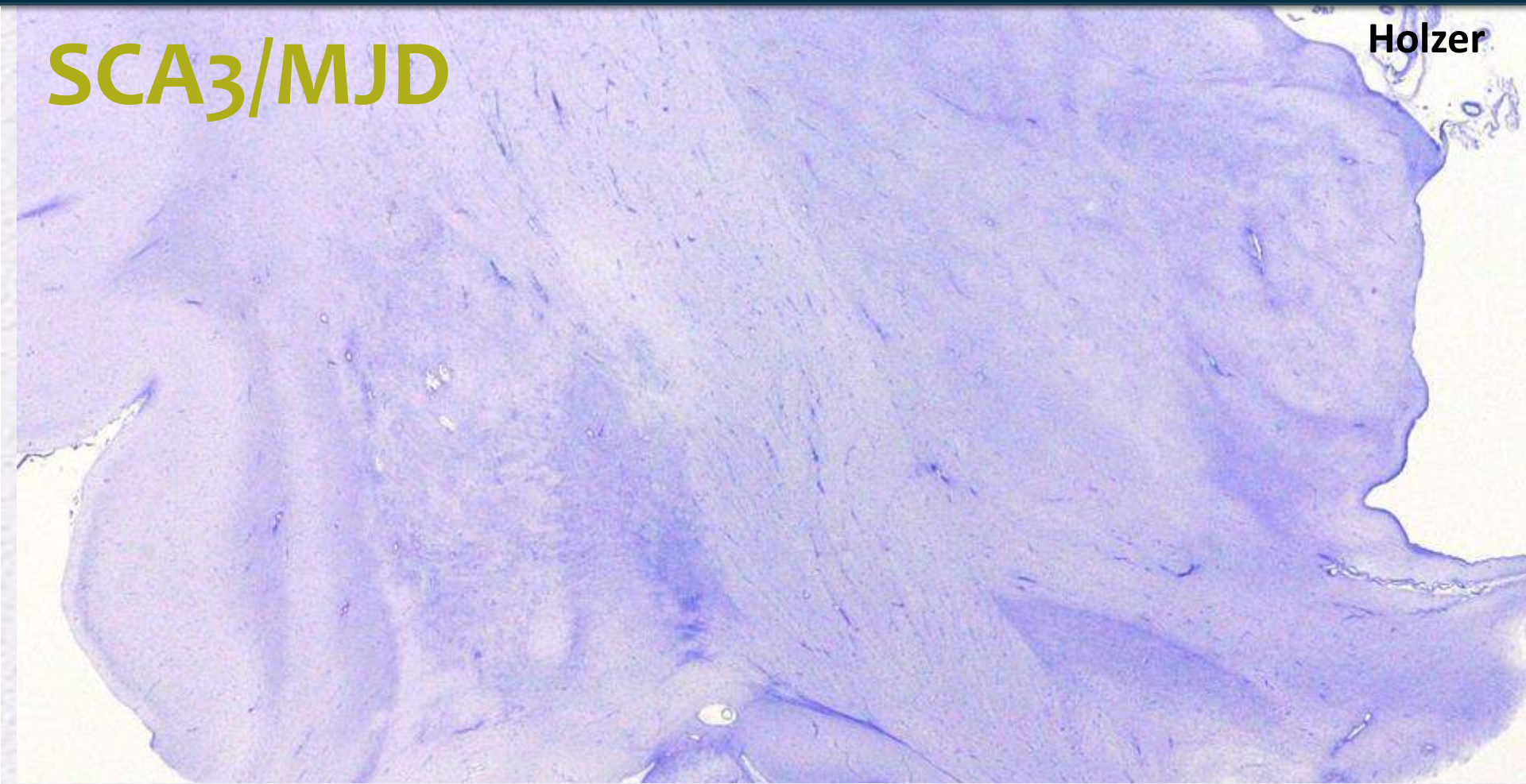
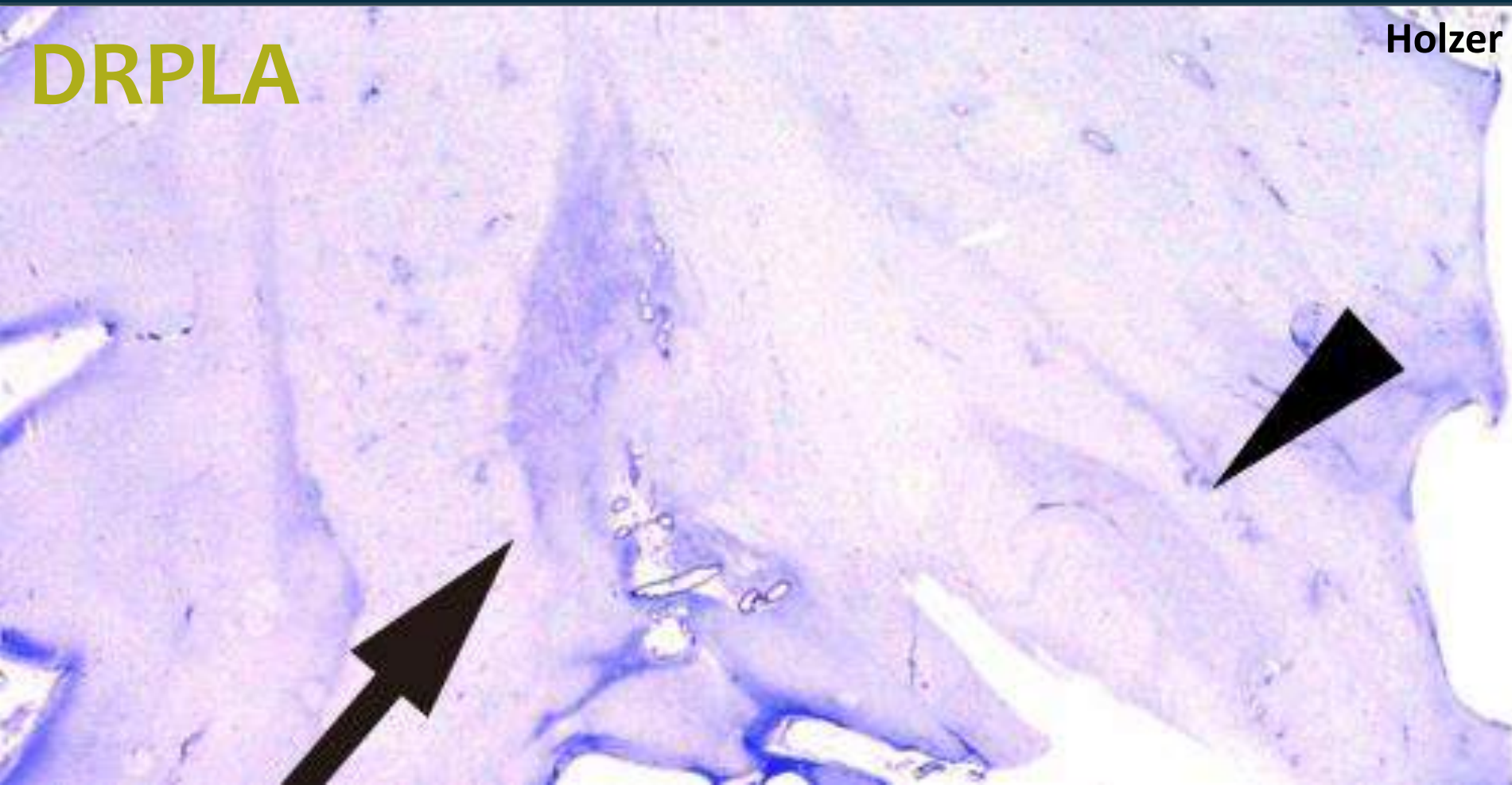


SCA3/MJD

TDP-43 inclusions in the cytoplasm and processes



DRPLA vs SCA3/MJD



DRPLA vs SCA3/MJD

Multi-system degeneration !

DRPLA

Cbll dentate n. > red n.
 grumose degeneration
 pseudohypertrophy of the inf. olivary n.

Globus pallidus (ext. seg. > int. seg.)
 > subthalamus

1C2 (+) inclusions
 diffuse nuclear staining
 widespread, including the cbr cortex

VS

SCA3/MJD

Cbll dentate n. > red n.
 grumose degeneration
 pseudohypertrophy of the inf. olivary n.
cerebellar “afferent” tracts
 pontine n., Clarke column

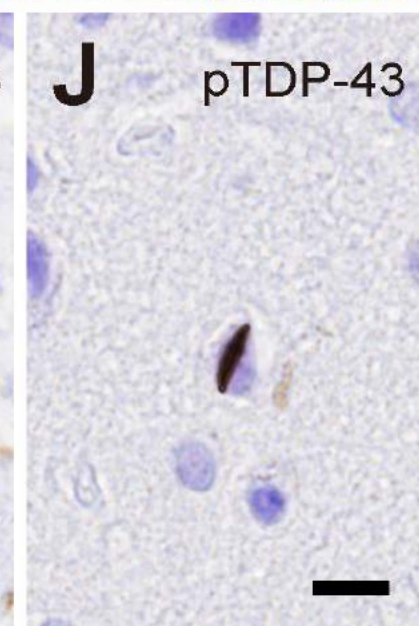
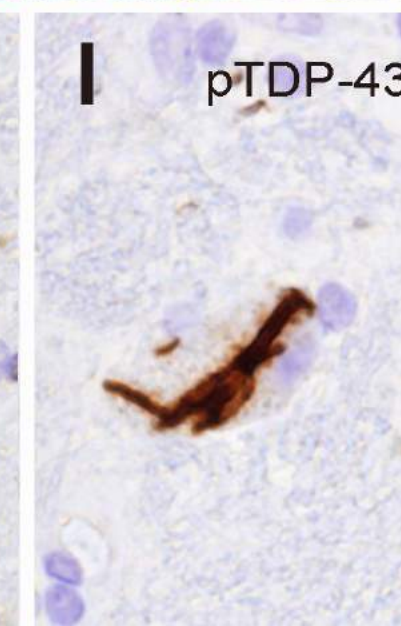
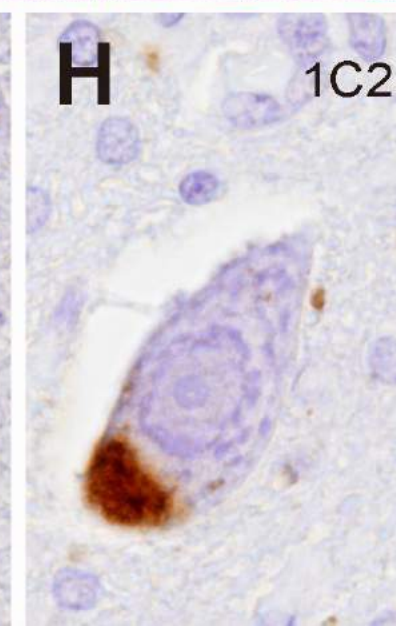
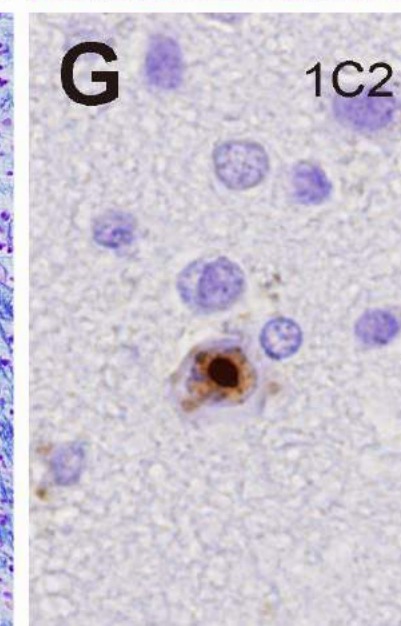
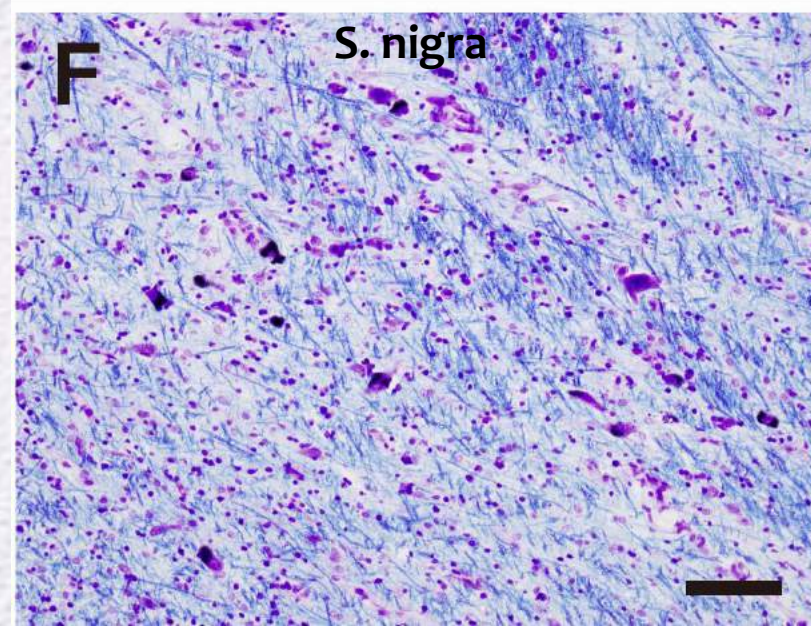
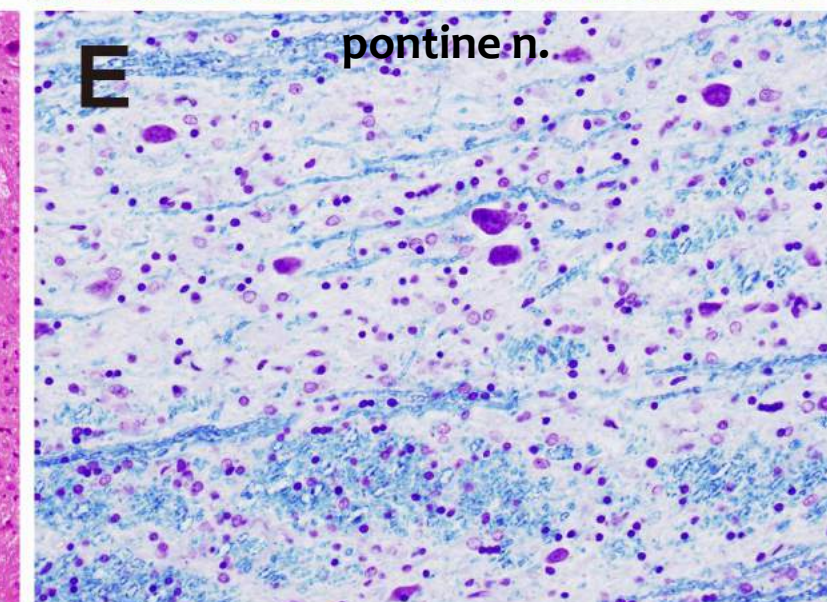
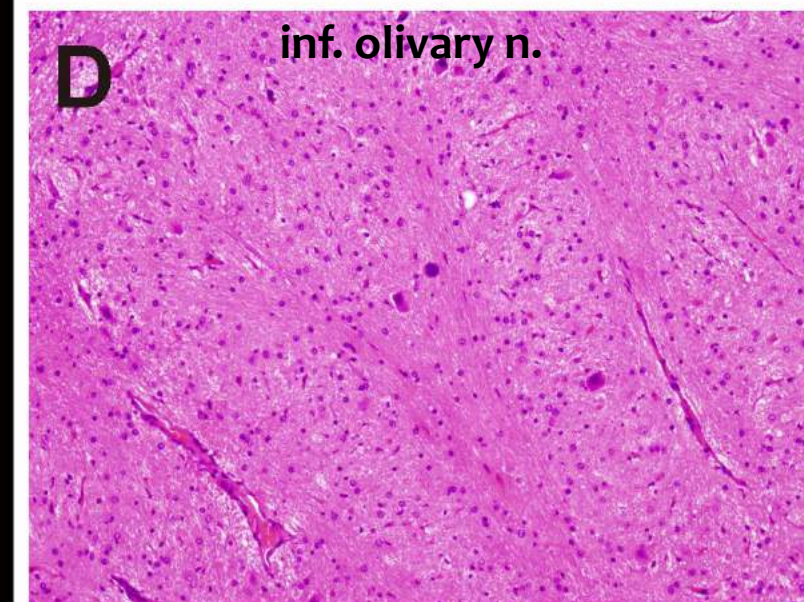
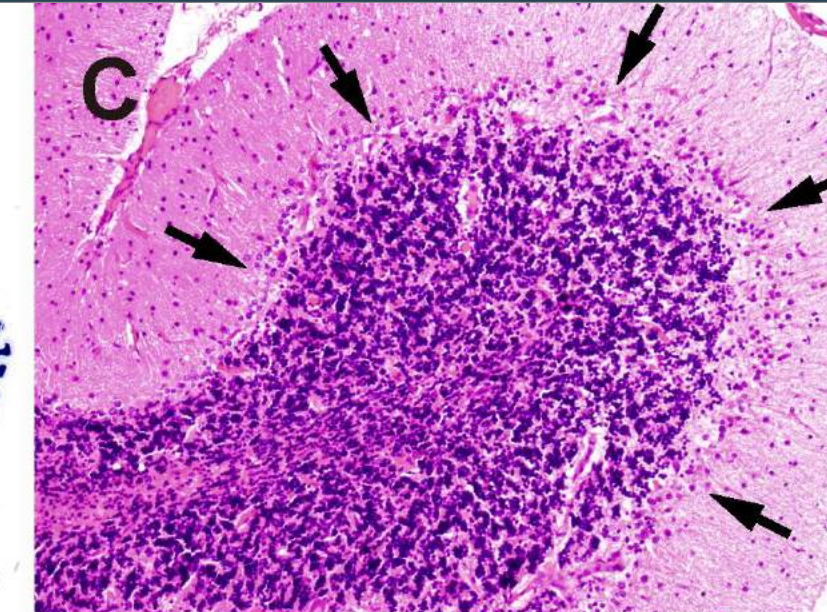
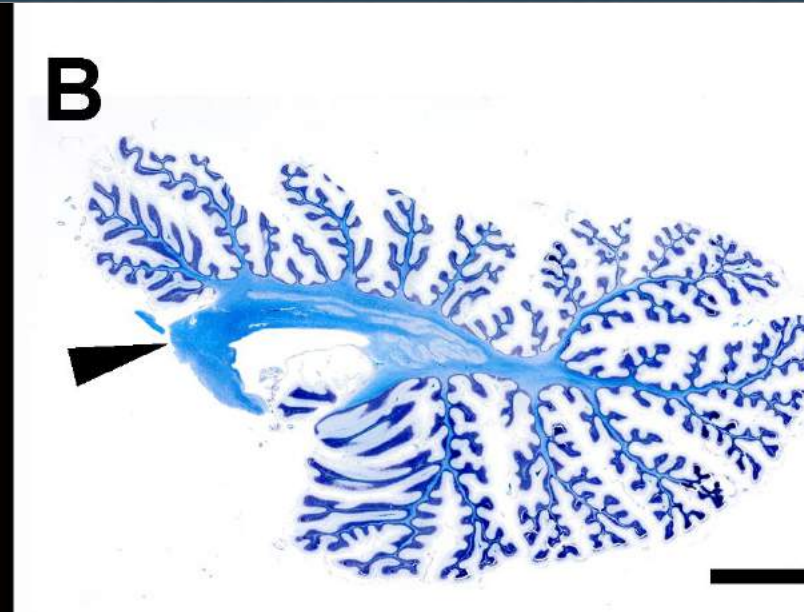
Globus pallidus (ext. seg. < int. seg.)
 < subthalamus

S. nigra
pyramidal tract, lower motor neurons
dorsal root ganglia
cerebral cortical neurons

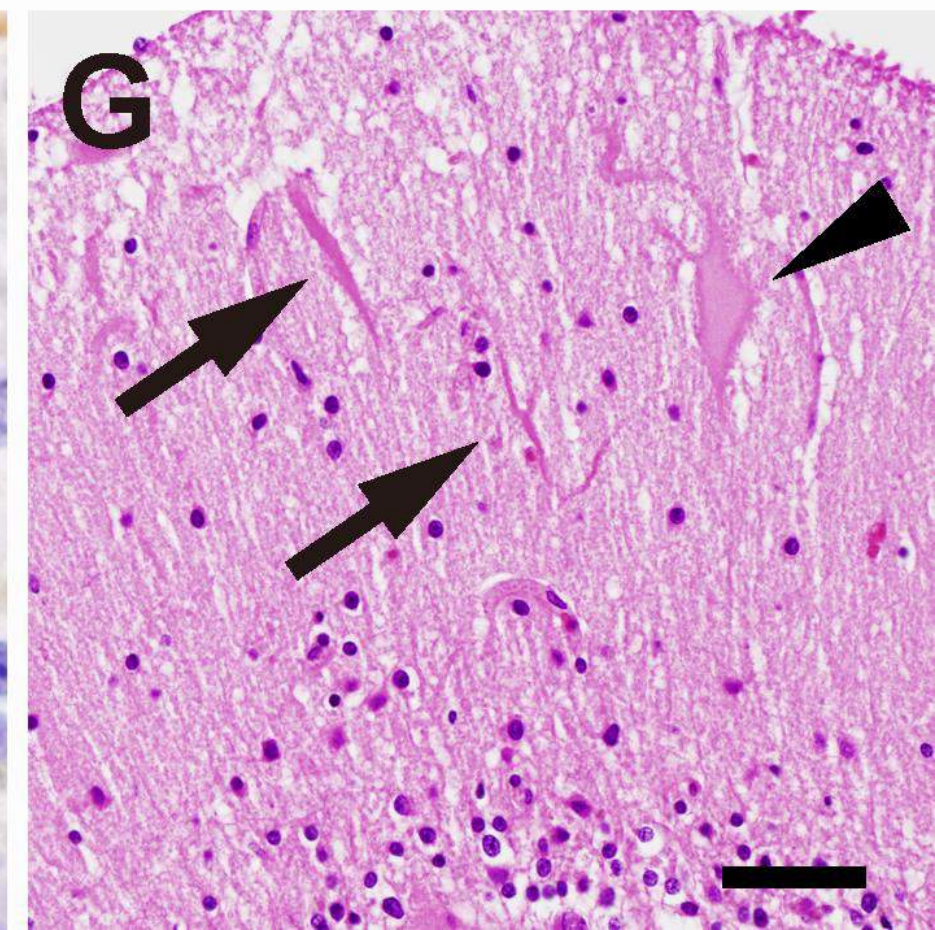
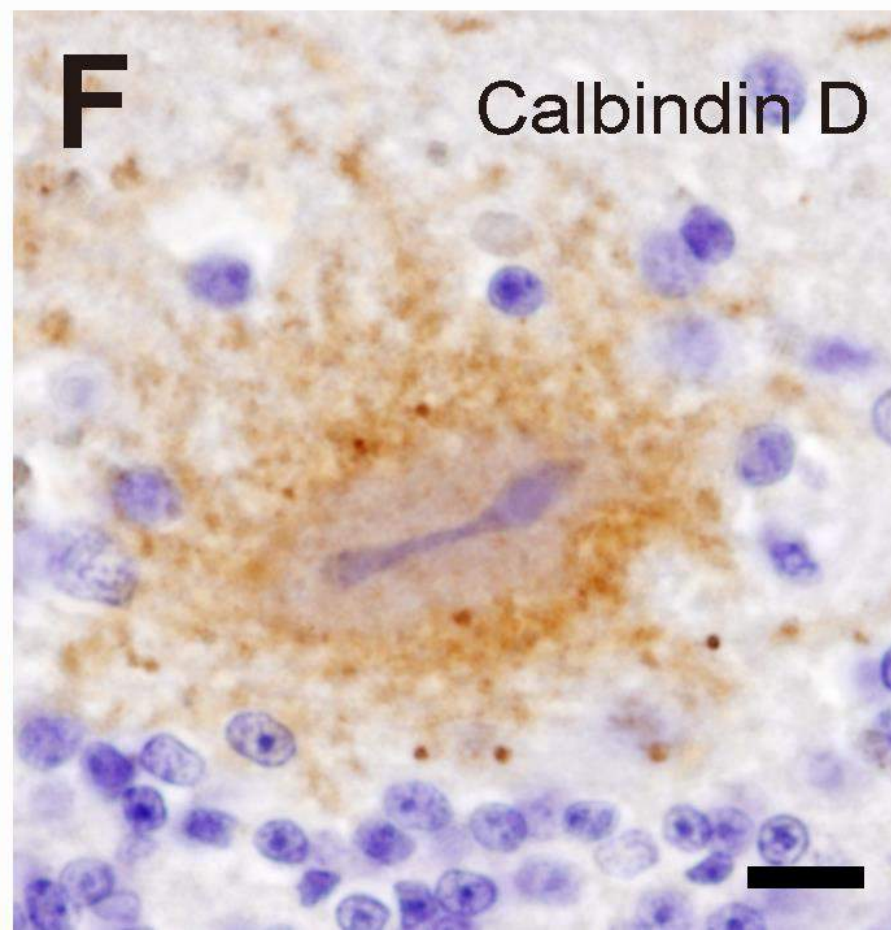
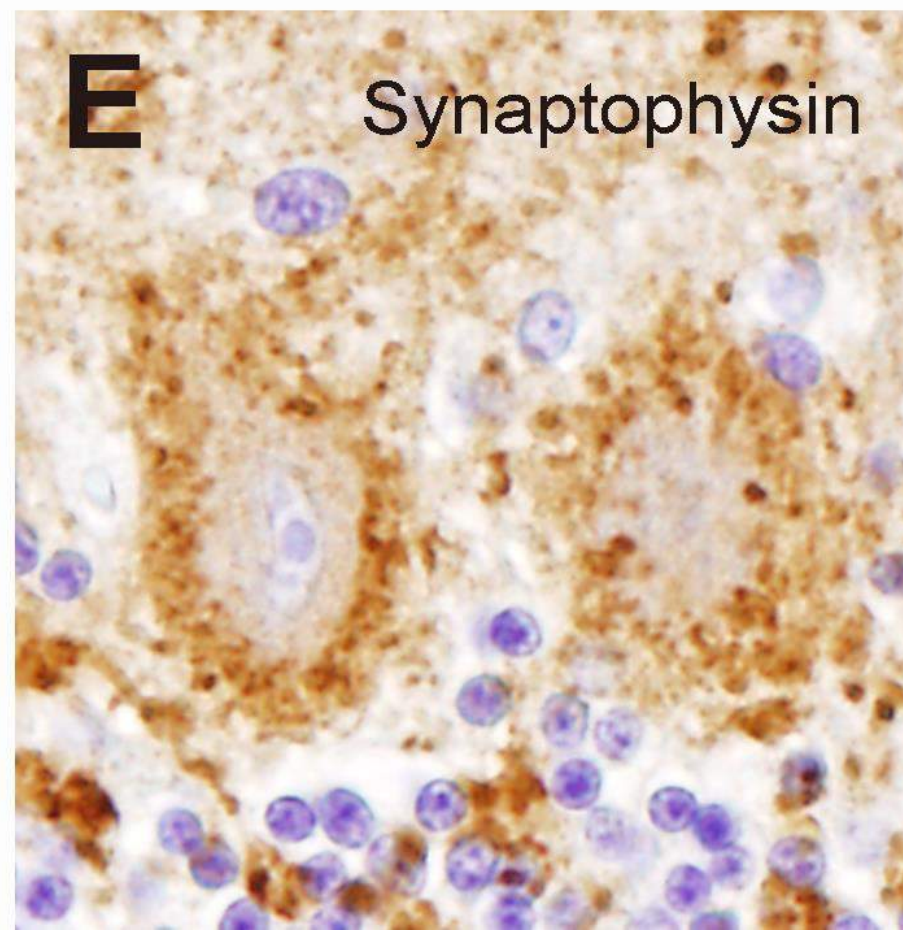
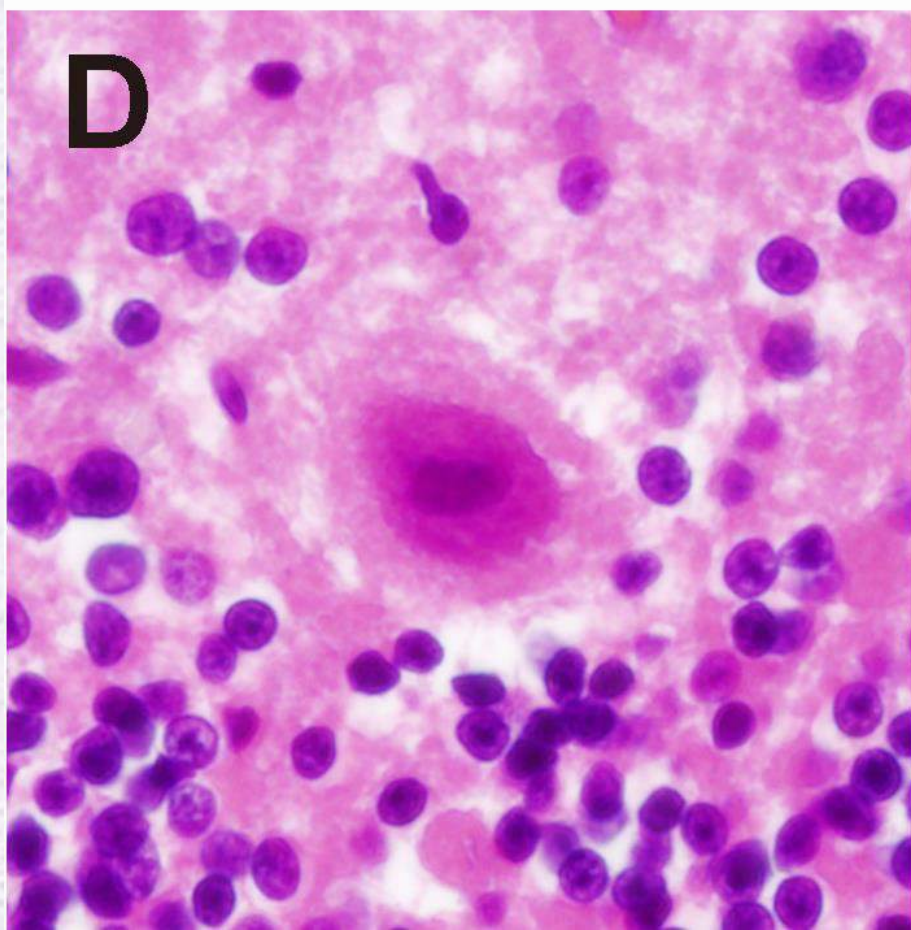
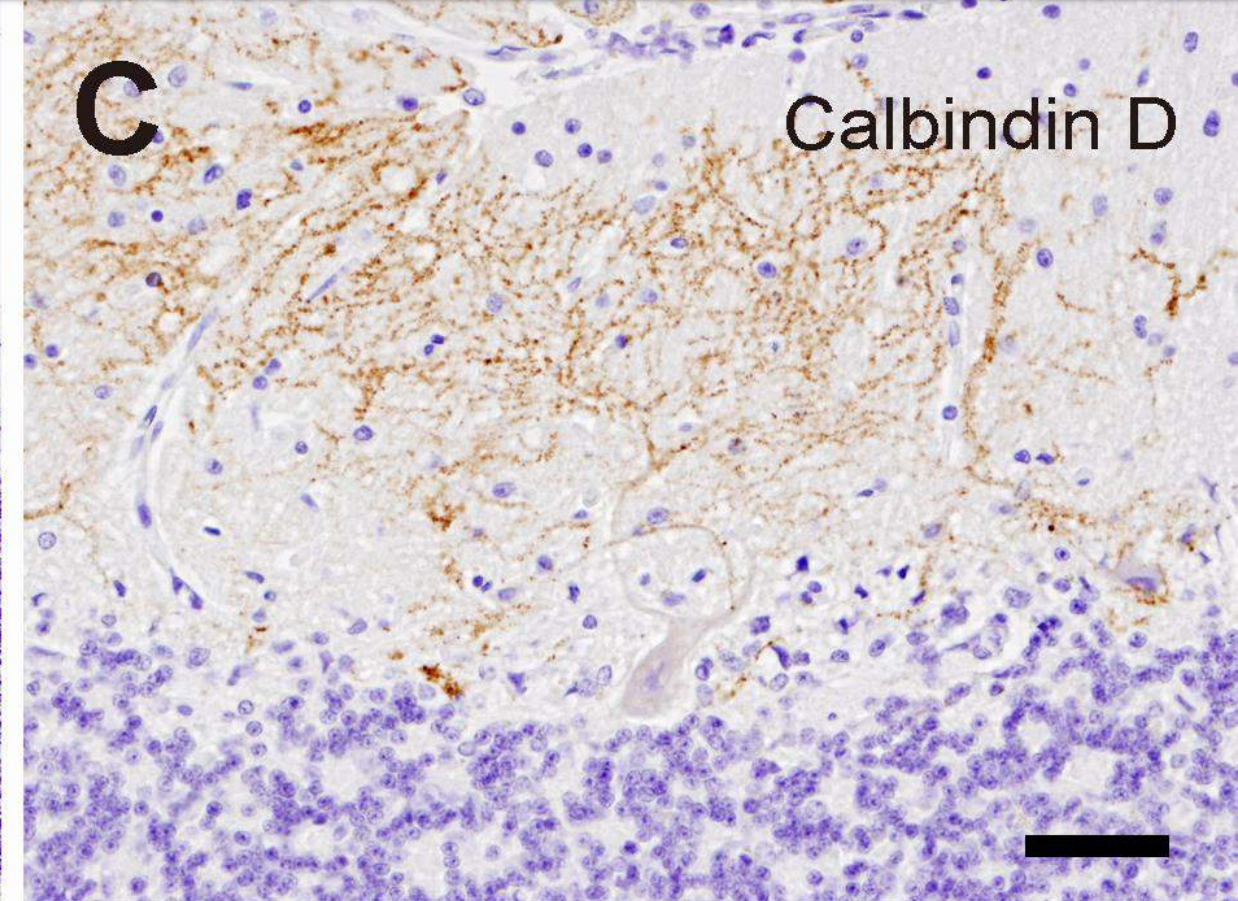
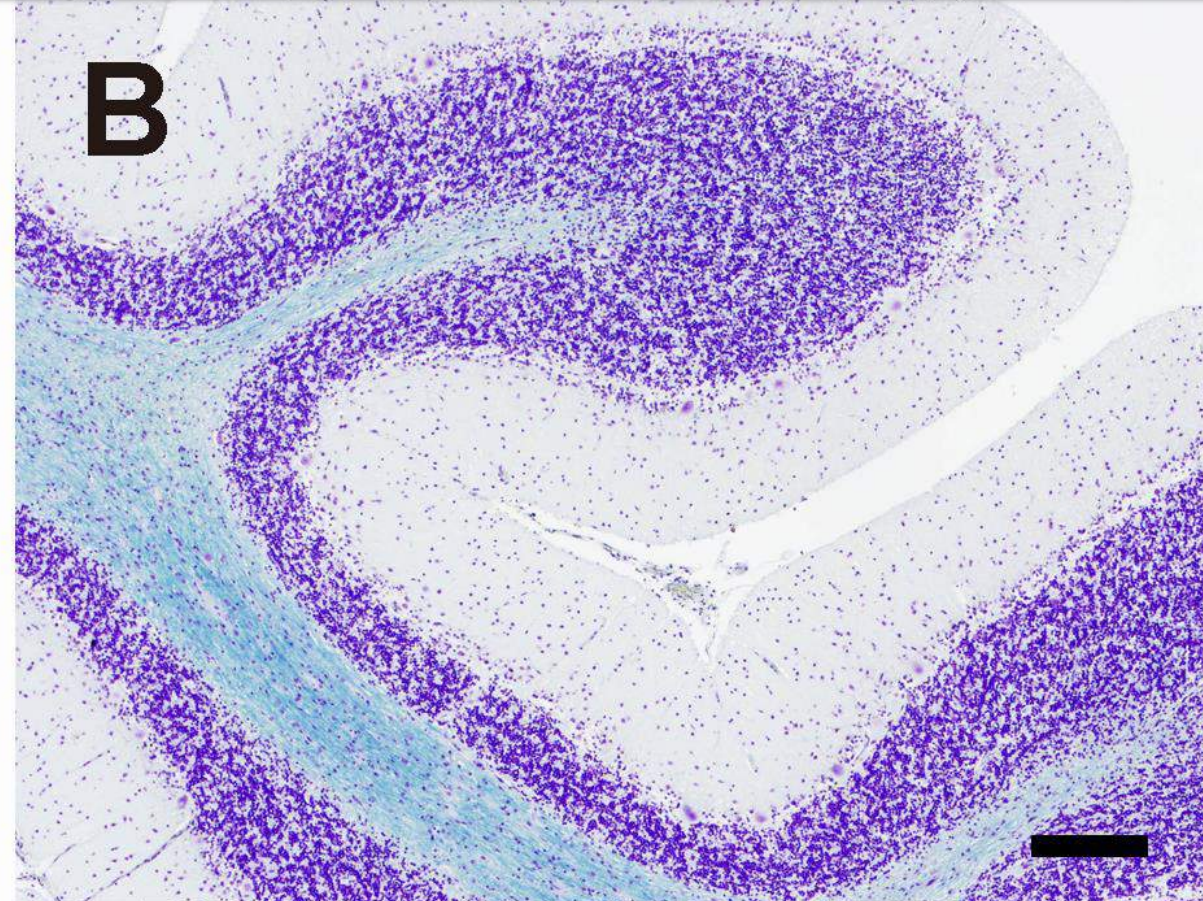
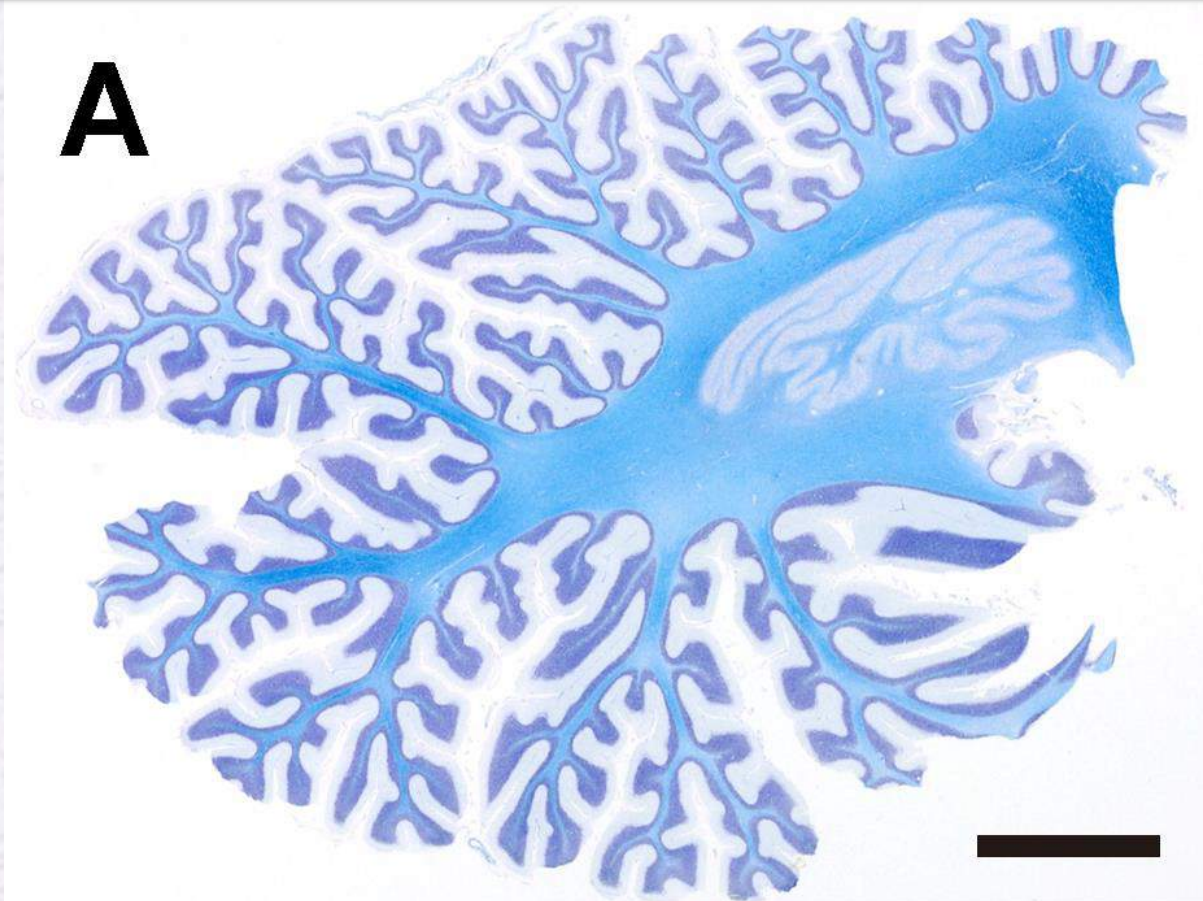
1C2 (+) inclusions
 NIs, diffuse nuclear staining
 widespread, including the cbr cortex

SCA2

- Widespread atrophy in the cerebrum, cerebellum, brain stem, spinal cord, and peripheral nerves.
- Purkinje cell loss, but the superior cerebellar peduncle is preserved.
- Degeneration in the inferior olivary nucleus, pontine nucleus, S. nigra, brain stem motor nuclei, and spinal anterior horn cells is a feature.
- 1C2-positive neuronal cytoplasmic and nuclear inclusions.
- pTDP-43-positive cytoplasmic inclusions in neurons and glia.



SCA31



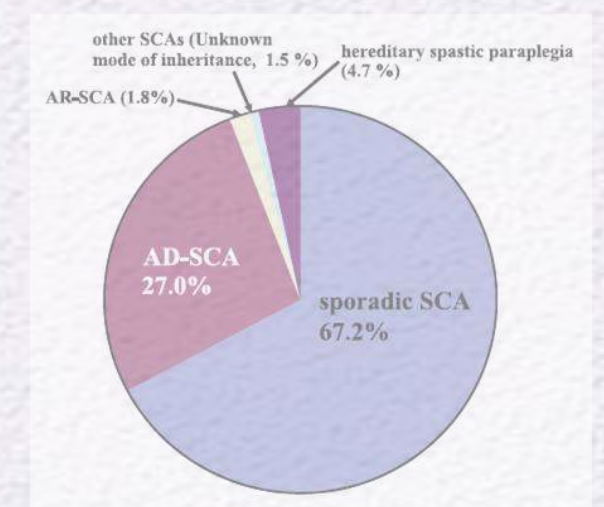
Presentation outline

1 pathologic features of a representative α -synucleinopathy
MSA – Sporadic disorder

2 for a better understanding of systemic degeneration
Cerebellum: anatomy

pathologic features of spinocerebellar ataxias
3 **Autosomal Dominant disorders**
SCA6, DRPLA, SCA3/MJD, SCA2, SCA31

pathologic features of spinocerebellar ataxias
4 **Autosomal Recessive disorders**
ARCA-*CHP1*, *SYNE1*-ataxia, SCA17-DI



All the presenting cases were experienced at
the Brain Res Inst, Niigata Univ, Japan

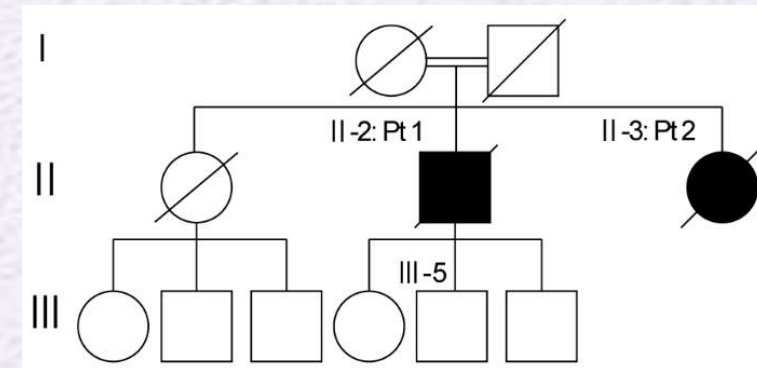
ARCA-CHP1

Patient 1 (Pt 1)*

- 30 y.o. Drunken gait and slurred speech
- 52 y.o. Cognitive impairment followed by depression, delusion and restless
- 55 y.o. **Cognitive impairment (WAIS-R: IQ 34)**, slurred speech, areflexia, adiadochokinesis and ataxia **Romberg sign +** and **hearing loss. SCD dx.**
- 62 y.o. Nystagmus, bulbar palsy, bilateral extensor plantar reflex and dysuria appeared
- 65 y.o. Bedridden
- 66 y.o. Died from repeated melena (autopsy)

Patient 2 (Pt 2)*

- Mild mental retardation from childhood
- 56 y.o. Deteriorated gait disturbance **Cognitive decline (HDS-R: 17/30)**
- 61 y.o. Nystagmus, **hearing loss**, slurred speech, extensor plantar reflex, adiadochokinesis and ataxic gait. Cerebellar atrophy on CT. **SCD dx.**
- 66 y.o. Dysuria
- 69 y.o. **Worsened cognitive function (WAIS-R: IQ 30)**
- 76 y.o. Died from pneumonia (autopsy)



Saito et al. *Acta Neuropathologica Communications* (2020) 8:134
<https://doi.org/10.1186/s40478-020-01008-2>

Acta Neuropathologica
Communications

LETTER TO THE EDITOR

Open Access

Novel *CHP1* mutation in autosomal-recessive cerebellar ataxia: autopsy features of two siblings

Rie Saito^{1†}, Norikazu Hara², Mari Tada^{1†}, Yoshiaki Honma³, Akinori Miyashita², Osamu Onodera⁴, Takeshi Ikeuchi² and Akiyoshi Kakita¹



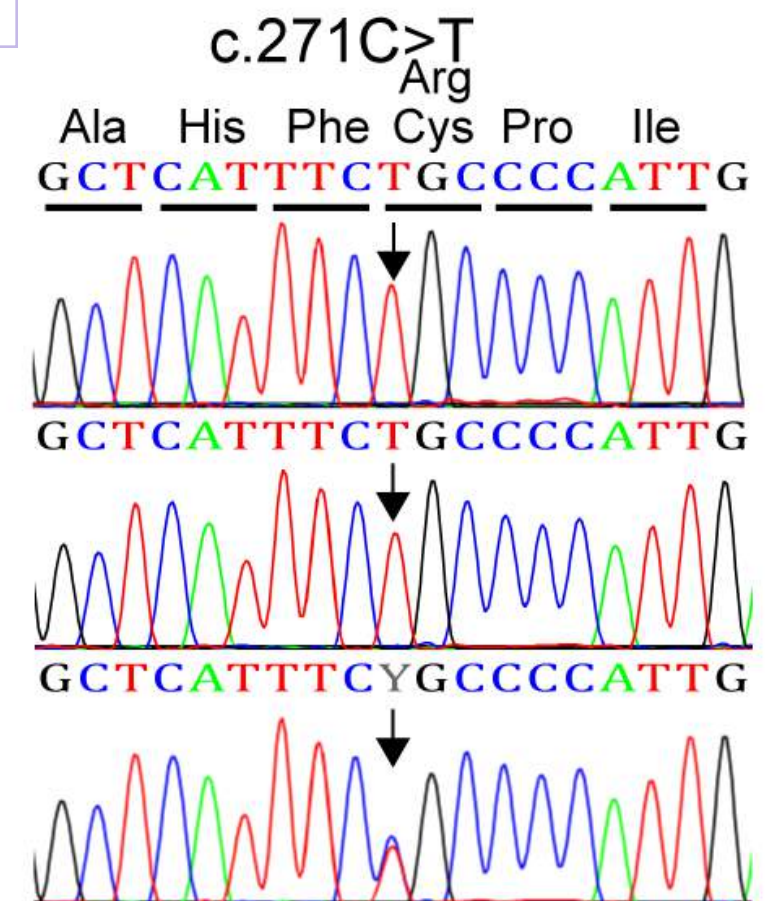
Whole-exome sequencing

novel *CHP1* mutation

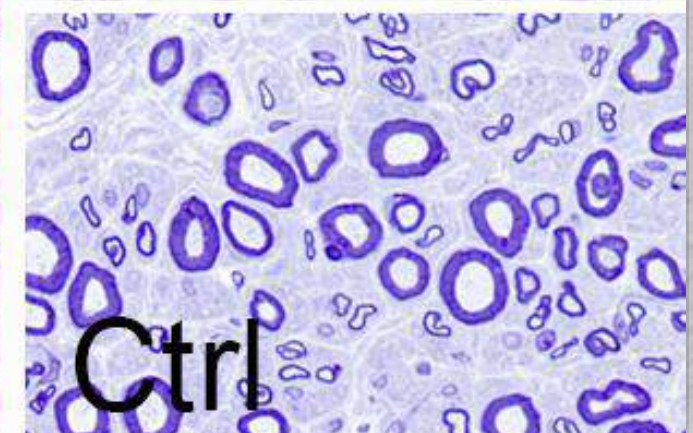
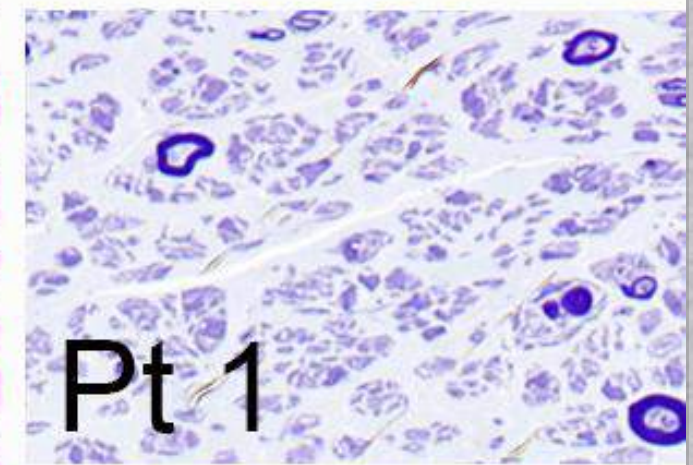
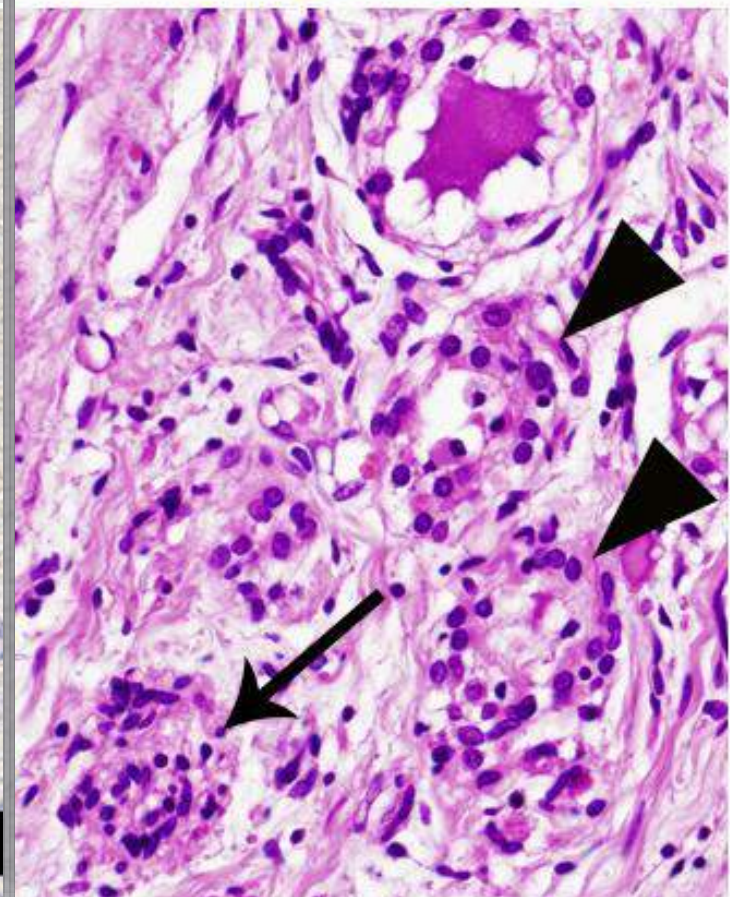
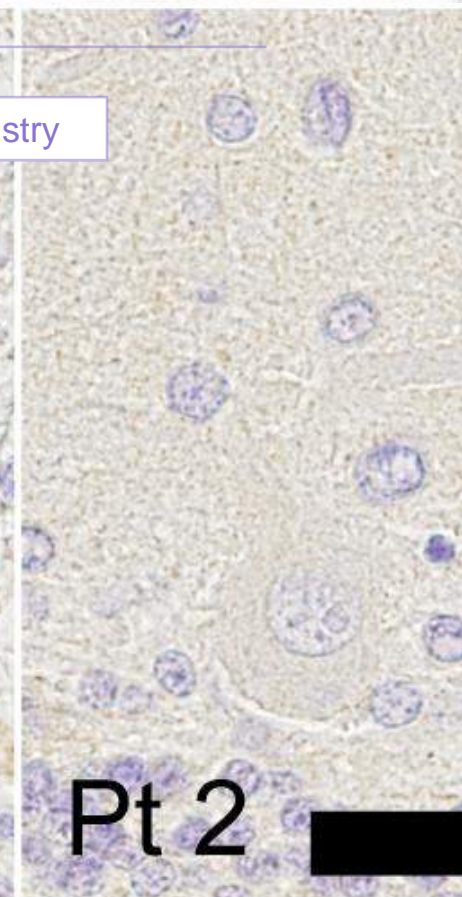
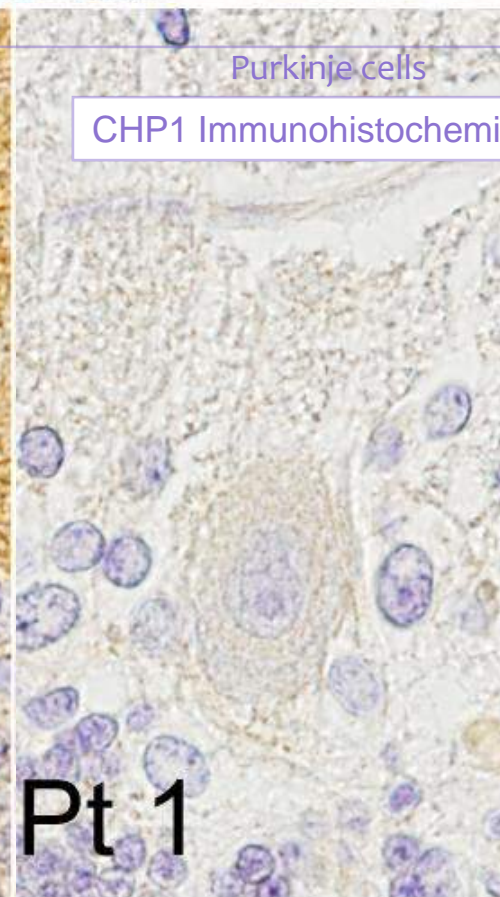
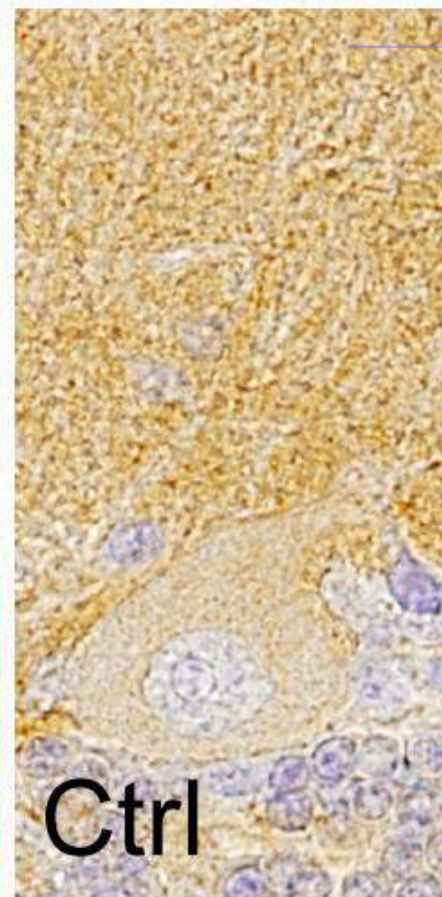
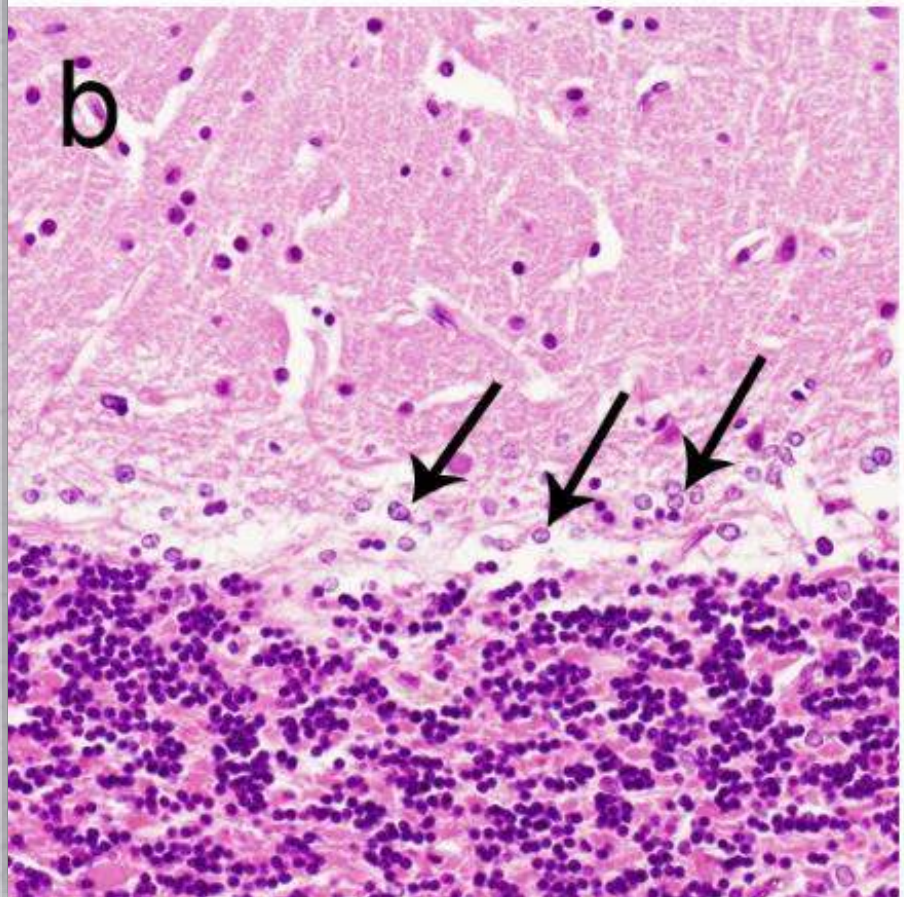
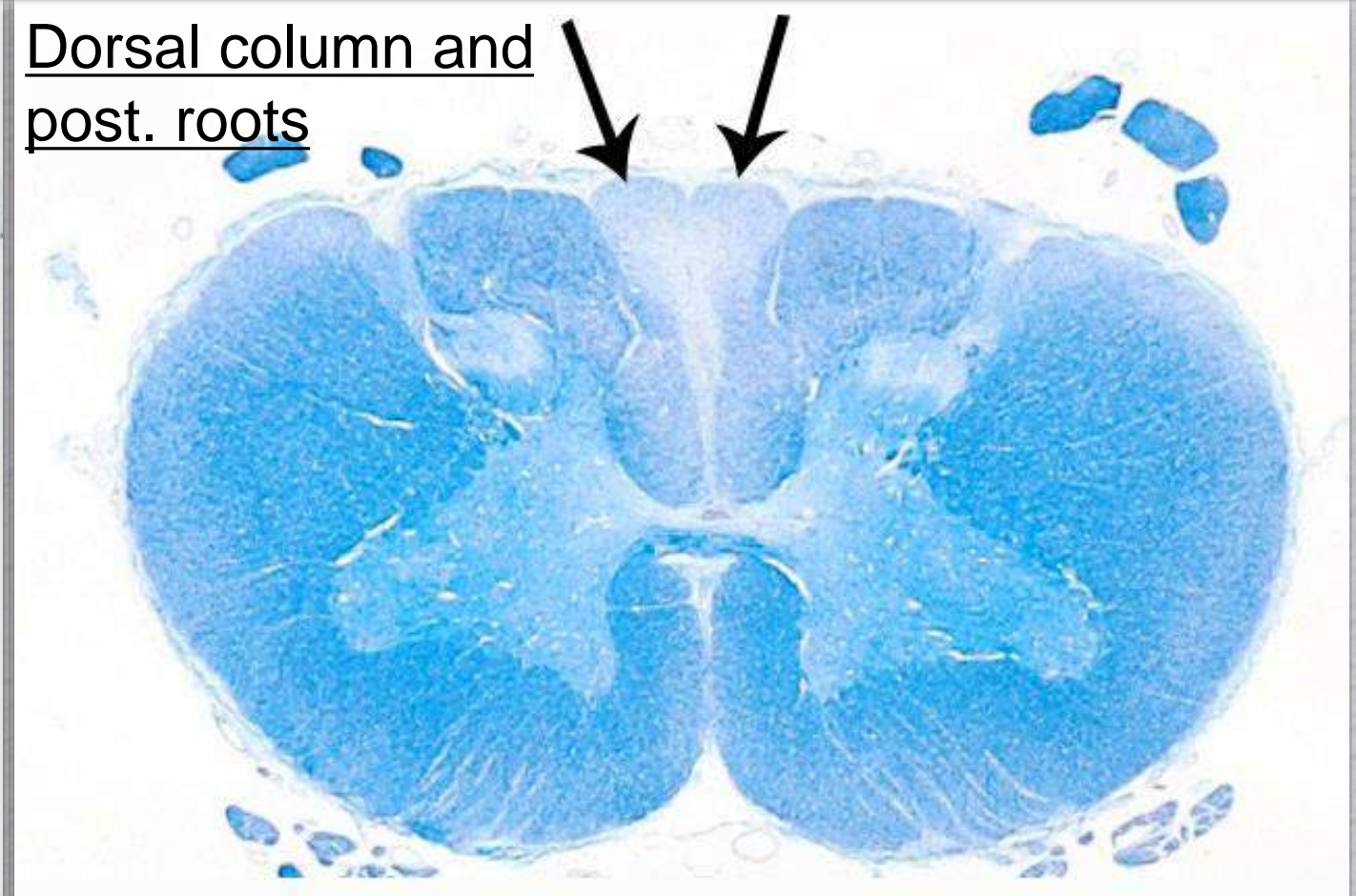
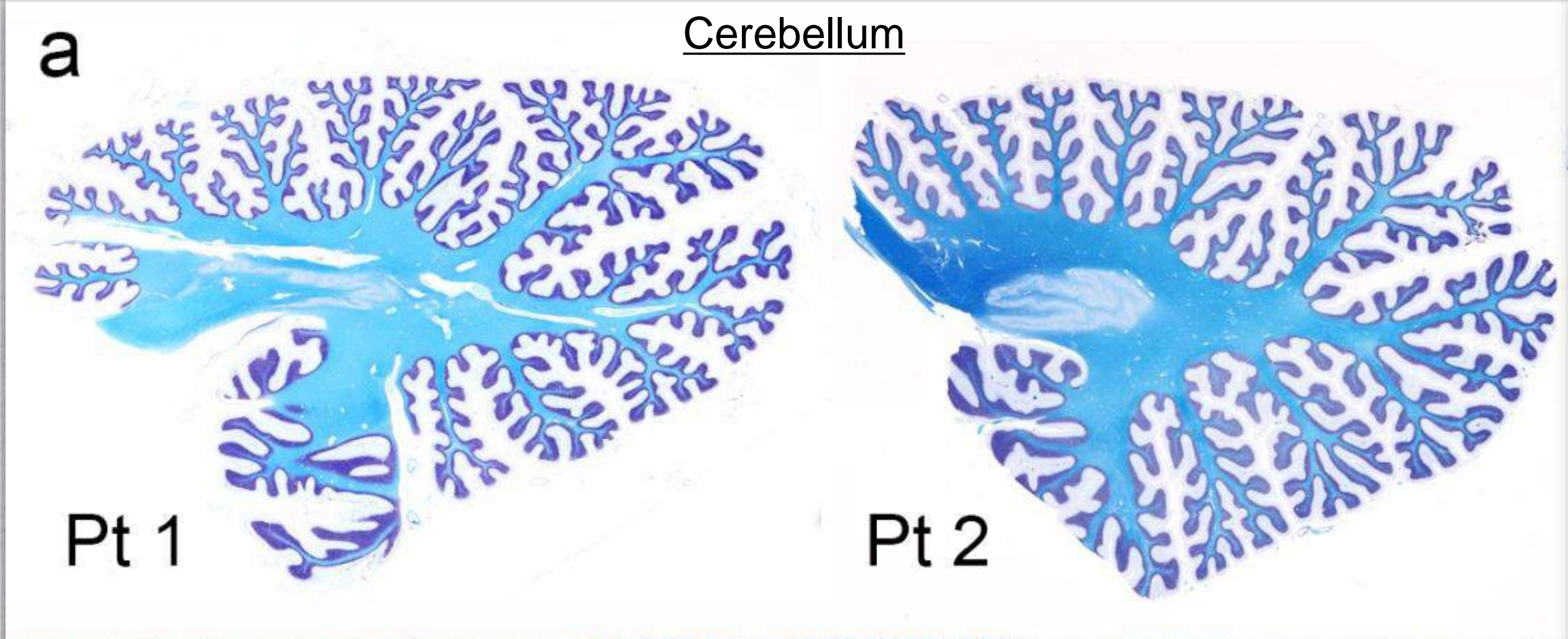
II -2: Pt 1
T/T

II -3: Pt 2
T/T

III -5
C/T



ARCA-CHP1




ARCA: *SYNE1*-ataxia

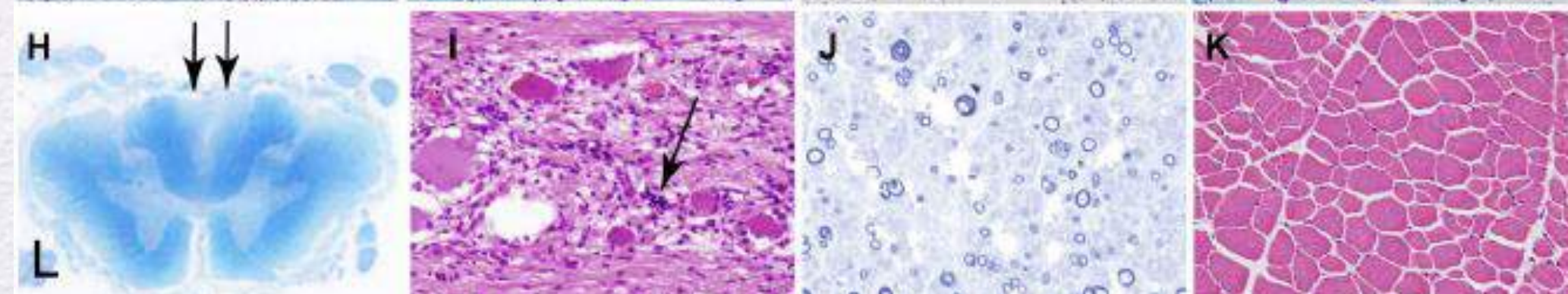
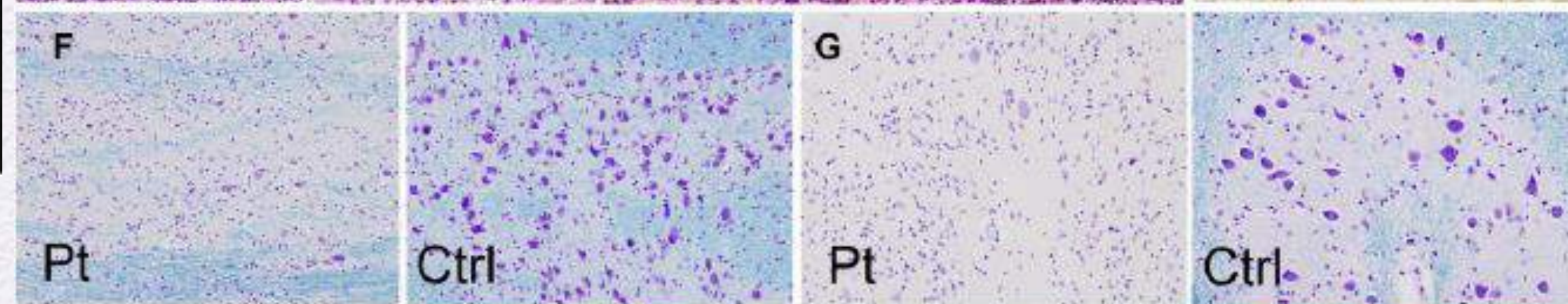
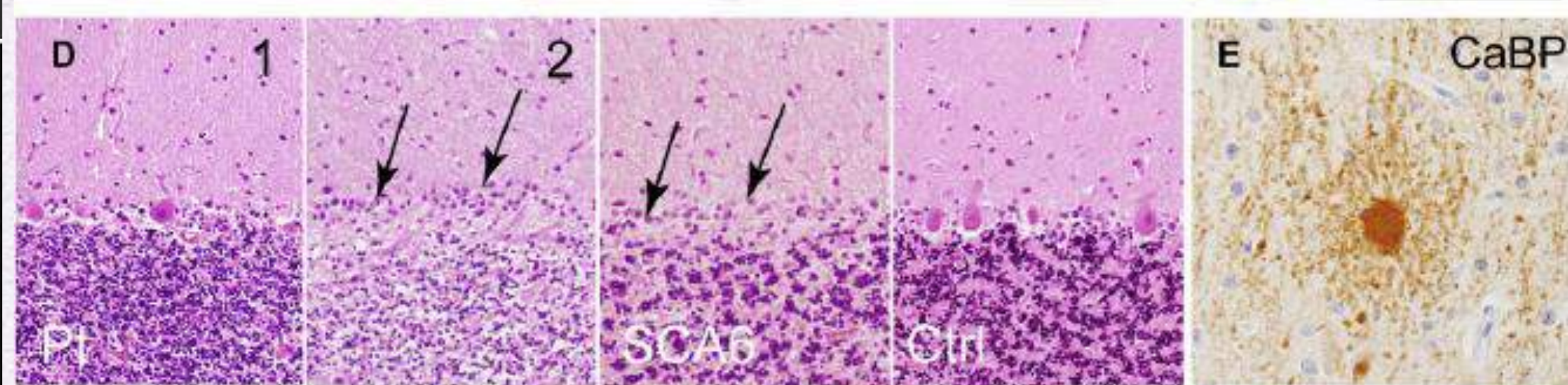
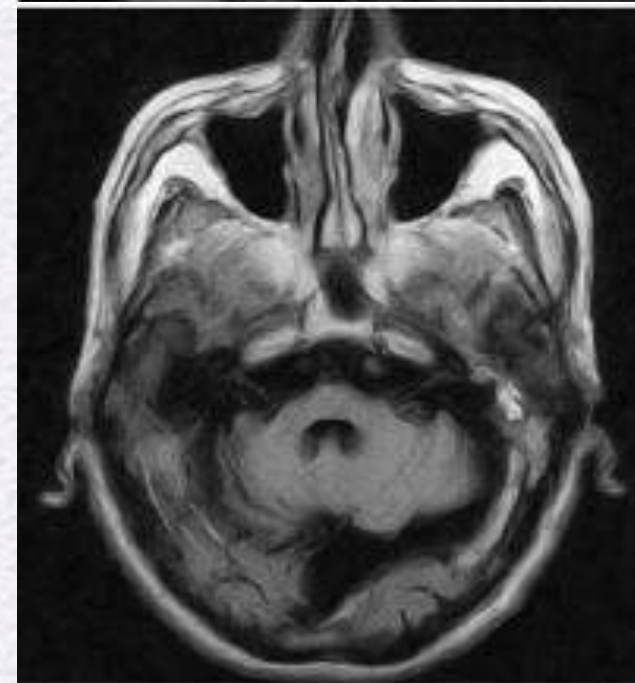
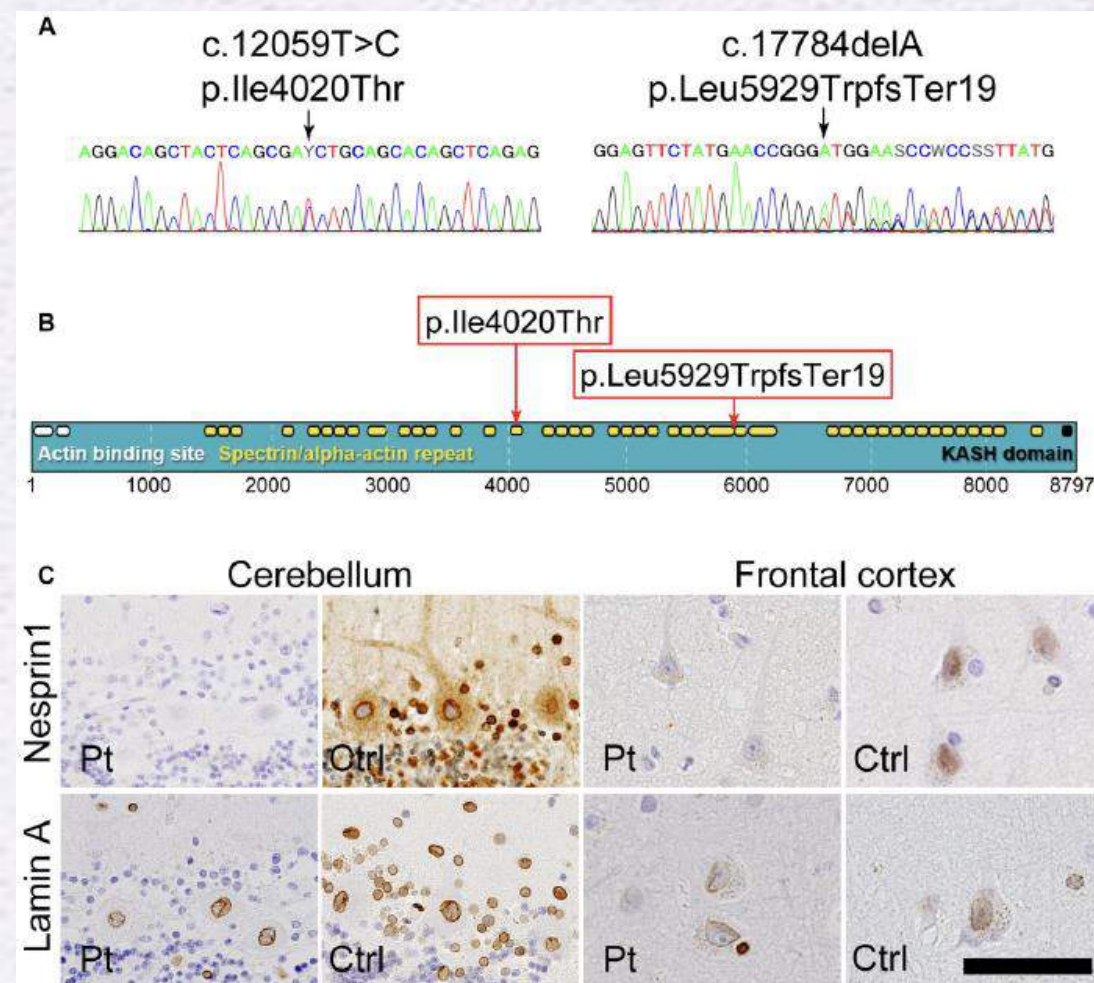
Journal of Neuropathology & Experimental Neurology, 2023, 82, 267–271
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 Letter to the Editor

OXFORD

Letter to the Editor

SYNE1-ataxia: clinicopathologic features of an autopsied patient with novel compound heterozygous mutations

Rie Saito , MD, PhD,¹ Norikazu Hara, PhD,² Mari Tada, MD, PhD,^{1*}
 Masatoshi Wakabayashi, MD, PhD,³ Akinori Miyashita, PhD,²
 Masatoyo Nishizawa, MD, PhD,⁴ Osamu Onodera, MD, PhD,⁴
 Takeshi Ikeuchi, MD, PhD,² Akiyoshi Kakita, MD, PhD¹



SCA17-digenetic *TBP/STYB1* disease

Saito et al.
Acta Neuropathologica Communications (2022) 10:177
https://doi.org/10.1186/s40478-022-01486-6

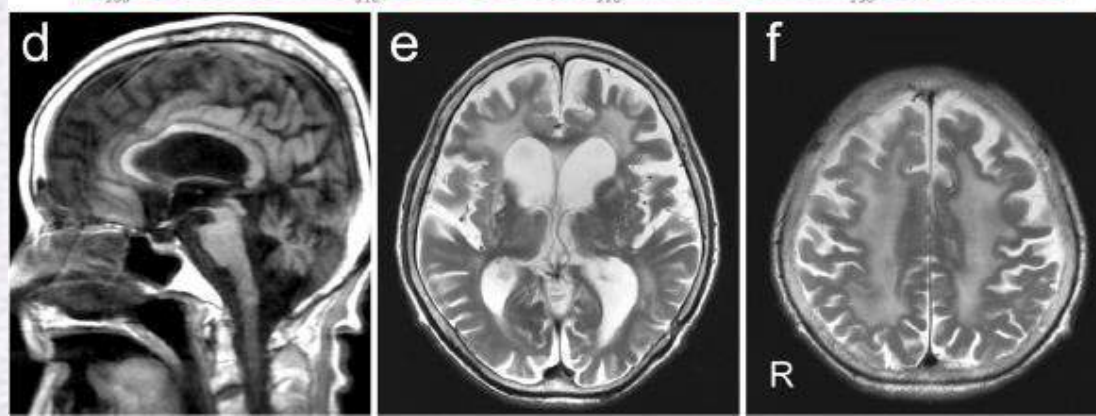
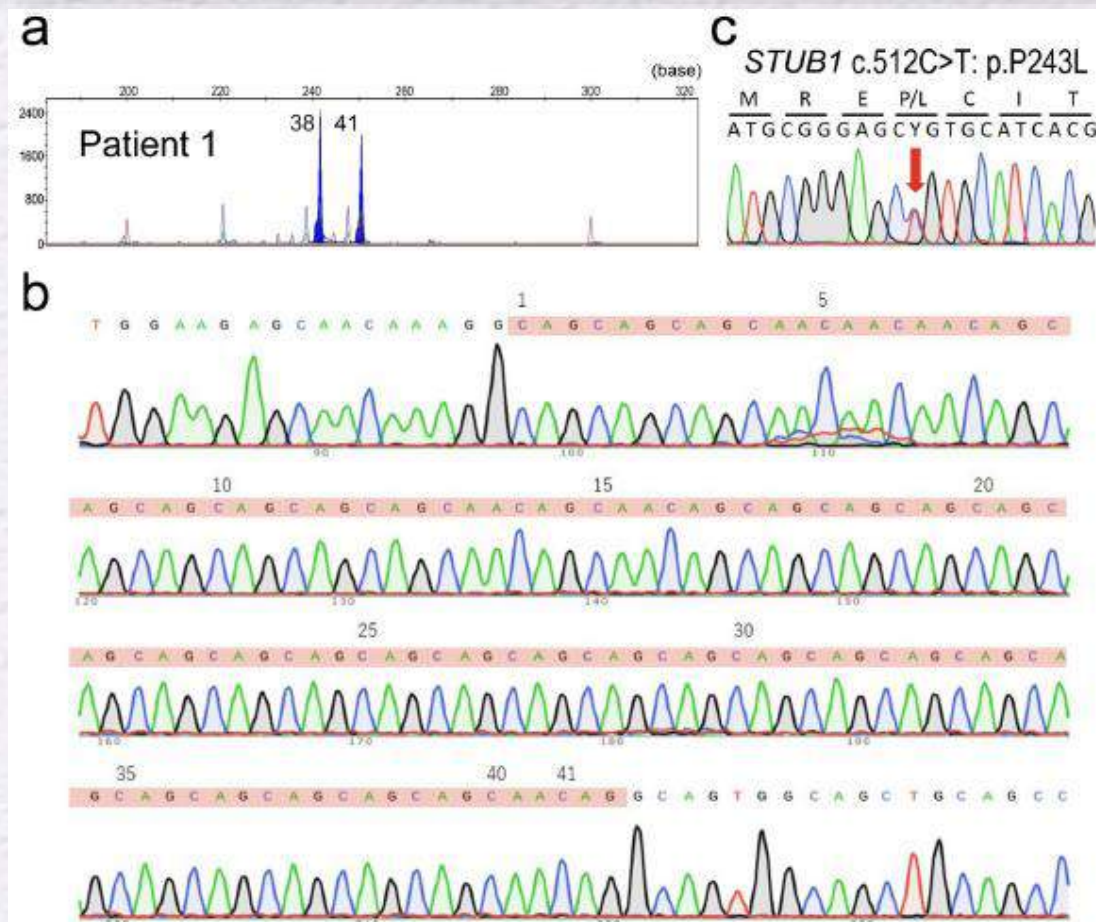
Acta Neuropathologica
Communications

CASE REPORT

Open Access

Spinocerebellar ataxia type 17-digenetic *TBP/STUB1* disease: neuropathologic features of an autopsied patient

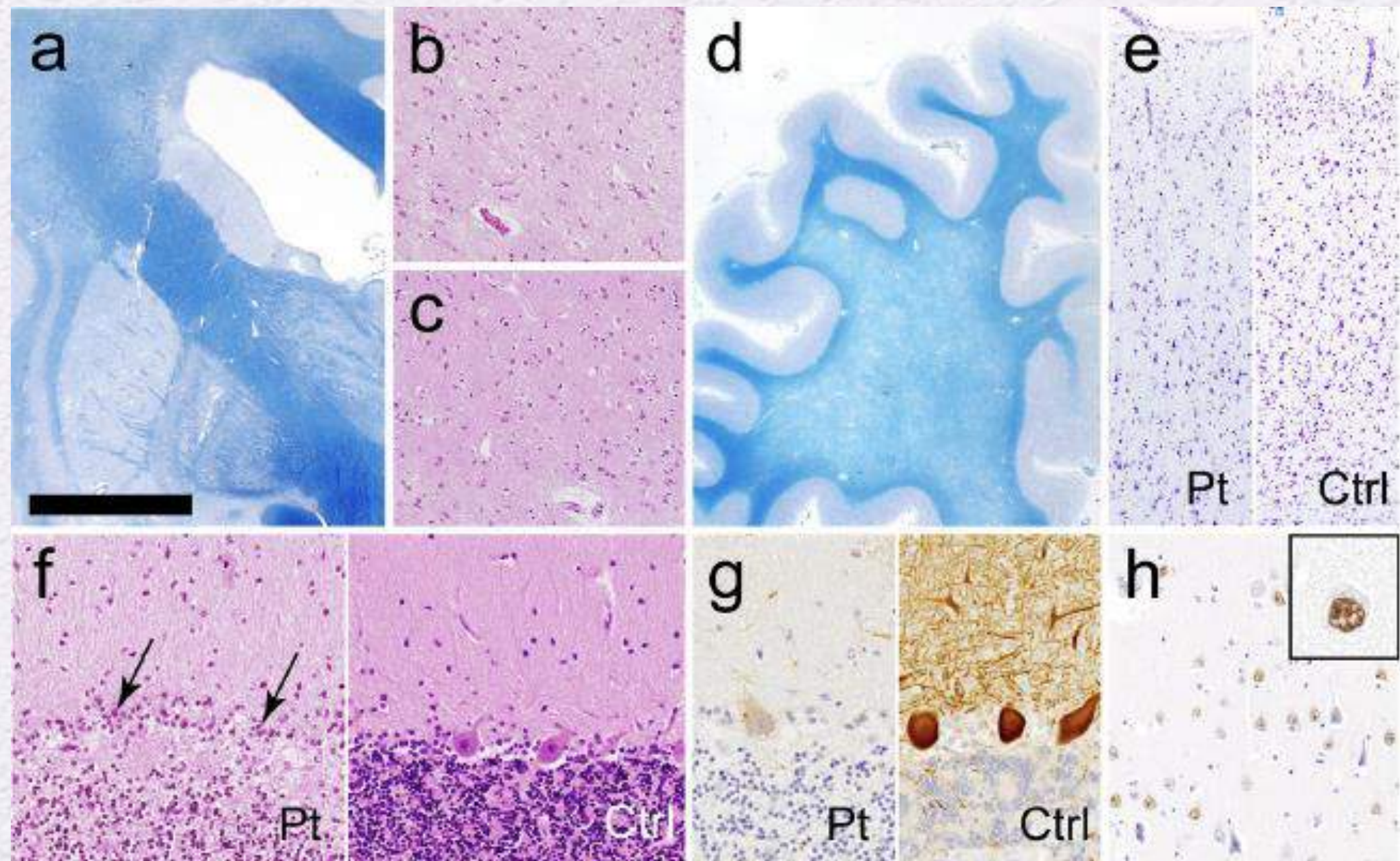
Rie Saito¹, Yui Tada², Daisuke Oikawa³, Yusuke Sato⁴, Makiko Seto⁵, Akira Satoh⁵, Kodai Kume⁷, Nozomi Ueki⁶, Masahiro Nakashima⁶, Shintaro Hayashi^{1,7}, Yasuko Toyoshima^{1,8}, Fuminori Tokunaga³, Hideshi Kawakami² and Akiyoshi Kakita^{1,9*}



Caused by digenic inheritance of two gene mutations

- (1) intermediate polyglutamine-encoding CAG/CAA repeat expansions (polyQ) in *TBP* (*TBP*41-49)
→ associated with SCA17
- (2) *STUB1* heterozygosity
→ associated with SCA48 and SCA16 (autosomal recessive)

We experienced identical twin siblings, one of whom was autopsied and was found to carry an intermediate allele (41 and 38 CAG/CAA repeats) in *TBP* and a heterozygous missense mutation in *STUB1* (p.P243L). These patients developed **autosomal recessive Huntington's disease-like symptoms**.



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Neuropathology of MSA and SCAs

MSA

Autosomal Dominant disorders

SCA6, DRPLA, SCA3/MJD, SCA2, SCA31

Autosomal Recessive disorders

ARCA-CHP1, SYNE1-ataxia, SCA17-DI

Brain Research Institute
Niigata University, Japan
Akiyoshi KAKITA

kakita@bri.niigata-u.ac.jp

<https://pathology-bri-niigata-u.jp/en/>