

RESEARCH PAPER

Ketogenic diet improves motor and anxiety-like behaviors plus cerebellar inflammation via axonal remyelination in the BTBR mouse model of autism

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Abstract

Different evidence suggests that ketogenic diet (KD) ameliorates neurological dysfunctions including core symptoms of autism spectrum disorders (ASD). In view of this, we have hypothesized that KD may induce a positive effect even on some ASD comorbidities, such as motor impairment and anxiety, along with cerebellar inflammation and axonal demyelination. BTBR T+ Itpr3tf/J (BTBR) and C57BL/6 (C57) mice were fed with a standard chow diet (CD) or KD for 5 weeks. Modified beam walking (MBW) and open field (OFT) tests were used to examine locomotor activity and anxiety-related behaviors. At the same time, cerebellar pro-inflammatory cytokines TNF- α , IL-1 β , and IL-6 were evaluated together with g-ratio of myelinated axons, detected by TEM. The levels of different isoforms (21.5, 18.5/17, and 14-kDa) of the myelin basic protein (MBP) were also analyzed. As expected, KD improved motor deficits and anxiety in BTBR mice as displayed by significant increases ($P < .001$) in the number of peeking and laps during MBW test rather than BTBR treated with CD. Furthermore, reduced path speed and enhanced path length ($P < .001$) in OFT were reported for the same KD-fed mice strain. Contextually, some pro-inflammatory cytokines (TNF- α and IL-1 β) were significantly ($P < .05$) reduced in the cerebellum of BTBRs exposed to KD. Such ameliorations were correlated to a reduction of g-ratio ($P < .001$), together with an upregulation ($P < .05$) of the MBP isoform 18.5/17-kDa. Overall, these findings support a promyelinating and anti-inflammatory action of KD, which very likely determined mitigation of motor disorder and anxiety-like behaviors.

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1. Introduction

Autism spectrum disorder (ASD) is a multisystem neurodevelopmental disorder that is featured by impaired social interaction and communication, coupled with repetitive patterns of behavior [1]. Aside from the core symptoms, ASD displays a higher burden of co-occurring medical conditions such as epilepsy, psychiatric/behavioral complaints, and gastrointestinal disorders, especially in subjects with intellectual disability [2,3]. Among the different factors, immune profile dysregulation during early life is considered a major factor contributing to ASD pathogenesis [4] as also supported by increased levels of several types of cytokines [5].

A growing body of current literature suggests that, in some cases, motor skill impairments can emerge before the onset of core diagnostic symptoms in ASD [6,7]. For this reason, motor abnormalities are indicated as an ASD behavioral biomarker, regardless of the level of symptom severity and age [8]. Recent findings have reported that ASD children suffer from higher levels of anxiety associated with alterations in amygdala subnuclei structure, which may in turn reflect morphological changes in the neurocircuitry of anxiety [9]. In addition, it has been shown that both motor deficits [10] and anxiety [11] are related to social communication and social motivation among individuals with ASD. While the cerebellum (Cb) has long been recognized for its role in motor coordination, emerging evidence suggests that it also contributes to a range of nonmotor functions, notably acting as a modulator of anxiety responses [12,13].

In the case of an abnormal cerebellar development, its atypical structure and altered functional connectivity may be a pri-

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mary risk for ASD [14,15]. Indeed, increased excitability of presynaptic interneurons and decreased intrinsic excitability of postsynaptic Purkinje neurons result in low Purkinje cell firing rates in Cb of BTBRs [16]. Moreover, a marked disruption in the histological structure of the cerebellar cortex with significant decrease in the number and surface area of Purkinje cells have been revealed in both the adolescent and adult rats treated with valproic acid (VPA) [17]. Other studies on the same experimental model have documented signs of neuronal degeneration, such as vacuolations, irregularly shrunken with dark small heterochromatic nuclei and apoptotic blebs in the Purkinje and granule cells with vacuolated cerebellar glomeruli, alongside rarefaction of the myelinated nerve fibers and loss of their neurofilaments [18]. Moreover, hypomyelination in specific cortical and subcortical regions may affect brain connectivity, since white matter integrity correlates with the severity of the disorder, suggesting an important role for myelin in ASD [19].

Recently, ketogenic diet (KD), a high-fat, adequate-protein, low-carbohydrate diet, is considered a valuable tool for balanced pro and antioxidant processes [20], since it forces the body to use fats and proteins as a source of energy thereby leading to diminished inflammatory events of numerous neurodegenerative syndromes [21]. Furthermore, KD can improve behaviors in ASD by modulating inflammation and by changing composition of the intestinal microbiota [22,23]. Evidence also indicates that KD is beneficial for individuals with ASD, especially for the mitigation of symptoms like anxiety, attention, cognition, language/communication, social interactions, and understanding [24]. However, the interplay between KD-mediated neuroprotection, Cb dysfunction, and their downstream effects on motor impairments, anxiety-like behaviors, neuroinflammation, and axonal myelination remains a critical knowledge gap.

On this basis, we have hypothesized that such dietary intervention could support cerebellar myelination and exert anti-inflammatory effects, thereby improving both motor and anxiety-like symptoms in ASD. Therefore, the aim of the current study was to investigate KD effects on neurobehavioral activities in two mouse strains, and namely BTBR-T+ Itpr3 tfl/J (BTBR), a validated model for idiopathic autism [25], and the highly social C57BL6/J (C57) strain. Specifically, locomotion, exploratory and anxiety-related behaviors were evaluated by using the modified beam-walking (MBW) and the open field (OFT) tests. In addition, the proinflammatory cytokines TNF- α , IL-6, and IL-1 β were detected. Regarding axonal myelination, some ultrathin sections of Cb were analyzed by using transmission electron microscopy (TEM) and measuring myelin g-ratio (the ratio of the inner-to-outer diameter of myelinated axons). Such a parameter was correlated to the expression of some classical isoforms (21.5-, 18.5/17-, and 14-kDa) of the myelin basic protein (MBP), which is essential for elaboration and maintenance of myelin sheath in the central nervous system (CNS), and its reduced accumulation results in hypomyelination [26]. Overall, differences in behavioral/inflammatory profiles would help us to strengthen the effectiveness of KD on Cb in relation to motor skills and anxiety behaviors in ASD. Furthermore, studies on ultrastructural morphology could provide new insights into the pathogenetic mechanisms of ASD and a possible role of KD as an appropriate therapeutic approach to reduce hypomyelination in ASD.

2. Materials and methods

2.1. Animals and diet

Male offspring of BTBR breeding pairs and the social counterparts C57 (Jackson Laboratory, Bar Harbor, ME, USA) were housed

in plastic cages (28 cm wide $\times$ 17 cm long $\times$ 12 cm high) at controlled humidity (60%) and temperature (22 $\pm$ 2°C) with a cycle of 12-h light/dark (lights on at 07:30 AM) plus free access to food and water. The offspring were kept with the dam (who had free access to food and water) until weaning at postnatal day 22 $\pm$ 1. Afterwards, mice of both strains (n =32) were grouped 3–5 per cage and assigned randomly to a standard chow diet (CD, 2019 Teklad Global Diet—9% fat, 19% protein, and 44.9% carbohydrate; Envigo RMS, Udine, Italy) or KD (PF4390 diet, 67.70% fat, 15.90% protein, and 1% carbohydrate; Mucedola, Milan, Italy) for 5 weeks, as recently reported [23]. Animal maintenance and experimental procedures were carried out in compliance with ethical provisions for care and use of Laboratory Animals reported in the legislative law no. 26 (04-03-2014) and authorized by the National Committee of the Italian Ministry of Health, approval number (n. 678/2019-PR, 08-10-2019). All measures were taken to minimize animal suffering and reduce the number of experiments.

2.2. Behavioral tests

At the end of 4 weeks of treatment, eight mice for each group were assessed for the different behavioral tests that lasted for 1 week until the end of KD treatment. Testing was conducted between 10:00 AM and 5:00 PM in an appropriate behavioral testing room in which mice were acclimatized for 60 min prior to each test. Motor activity and anxiety-like behaviors were evaluated by both MBW test and OFT. After each session, devices were cleaned with 70% ethanol and then water to prevent the influence of any lingering stimuli. Behavioral data were recorded and analyzed using ANY-maze software (version 7.20, Stoelting Co., Wood Dale, IL, USA).

2.2.1. MBW test

The apparatus consisted of a narrow beam measuring 120 cm in length and 5 cm in diameter, resting 50 cm above a tabletop on two poles. The beam contained dashed markings spaced 10 cm apart. At the end of the beam, a darkened box was placed as arrival point. The safe box had a circular opening of $\sim$ 15 cm in diameter, which allowed the subject to enter easily. The black-colored safe box mimics the Elevated Plus Maze enclosed arms [27] thus, since the beam was narrow and elevated, MBW test was also anxiogenic [28].

Before the first trial, mice were acclimated to the behavioral room for 30 min and 1 day prior to testing, mice were trained to cross the beam in the same conditions as the testing (three trials per animal, with a 10 min interval between each trial according to Sweis et al. [29] with some modifications). During the test, mice were placed at the end of the beam opposite the safe box and the time required to cross to the escape box at the other end plus the number of times the animal travelled along the cylindrical axis for its entire length were measured. The stopwatch started when the nose of the mouse began to cross the beam and stopped when the animal reached the escape box. Mice were then left in the safe box for 5 min after crossing the beam examining peeking behaviors from the safe box.

2.2.2. OFT

OFT was used to assay spontaneous locomotor activity, as a general measure of motor function as well as anxious behavior. The apparatus consisted of a square arena (42 $\times$ 42 $\times$ 30 cm) polyvinyl chloride box. The floor was divided by white lines: it had an inner zone (25 $\times$ 25 cm) and an outer zone [30]. The OFT was lit by a neon tube that yielded about 180 lux in the center of the field. All mice were accustomed to the apparatus 2 days before the test. On

the test day, each mouse was placed in the central zone of the apparatus. Each animal's behavior was recorded for 5 min by a photo camera placed at the top of the apparatus. The following parameters were scored: time (s) spent in the central zone, distance travelled (cm), and average speed (cm/s). Higher levels of anxiety corresponded to less time in the center and more time at the periphery. Conversely, increased duration in the central zone was indicative of lower anxiety and greater exploratory behaviors.

2.3. Pro-inflammatory cytokine assessment

The proinflammatory profile of the Cb was assessed by quantifying the key cytokines TNF- α , IL-1 β , and IL-6. Cb tissues of both hemispheres were dissected on ice from mice ($n=6$ per group) across each experimental condition, as also indicated by others [31]. Tissues were then processed for cytokine analysis, following manufacturers' protocols and as previously described [32]. Specifically, tissues were cut into ~ 0.5 – 1 mm pieces and homogenized by using a T10 basic IKA Ultra-Turrax in $1\times$ PBS or in the lysis buffer provided with the respective assay kits—according to the recommended tissue-to-buffer (w/v) ratio—supplemented with a protease inhibitor cocktail, and stored overnight at $\leq -20^\circ\text{C}$. Homogenates were then subjected to two freeze-thaw cycles, followed by centrifugation at $5,000\times g$ for 5 min. The resulting supernatants were collected and assayed immediately. TNF- α levels were measured using the “Mouse TNF alpha ELISA Kit” (MBS825075; MyBioSource, San Diego, USA), IL-1 β using the “Mouse IL-1 β ELISA Kit” (RAB0275; Sigma Aldrich, St. Louis, MO, USA), and IL-6 using the “Mouse IL-6 ELISA Kit” (RAB0309; Sigma Aldrich). Absorbance readings were obtained using a microplate reader (Multiskan SkyHigh, Thermo Fisher Scientific Inc., Waltham, MA, USA).

2.4. Myelination analysis

For TEM myelination analysis, Cb samples ($n=6$ per group) were collected from all animals immediately after sacrifice. Tissue specimens ($\sim 1\text{ mm}^3$) were fixed by immersion in 3% glutaraldehyde in 0.1 M phosphate buffer (pH 7.2) for 2 h at 4°C .

Following primary fixation, samples were rinsed in the same buffer and postfixed in 1% osmium tetroxide in 0.1 M phosphate buffer for 2 h at 4°C . After rinsing, tissues were dehydrated through a graded acetone series and infiltrated with increasing concentrations of epoxy resin prior to embedding in Epoxy resin (Sigma-Aldrich). Polymerization was performed at 60°C for 72 h. Semithin sections (0.5 – $1\text{ }\mu\text{m}$) were cut and stained with toluidine blue for light microscopic evaluation and selection of representative areas. Ultrathin sections (~ 70 – 90 nm) were then obtained using a PT-PC PowerTome ultramicrotome (RMC Boeckeler) and mounted on copper grids. Importantly, ultrathin sections were not contrasted with uranyl acetate or lead citrate. Adequate image contrast was achieved by optimizing the objective aperture settings of TEM, allowing clear visualization of axons and myelin sheaths without additional staining.

Sections were examined with a JEOL JEM-1400 Plus TEM operating at 80 kV. Digital images were acquired at standardized magnifications for quantitative analysis.

The average number of g-ratios analyzed for each experimental group ranged from 60–81 measures. ImageJ software was used to manually measure g-ratio, which is conventionally defined as the ratio of the inner radius (representing the axon) to the outer radius (including the myelin sheath). The myelin g-ratio was calculated for each axon as the ratio between the inner (d) and the outer (D) diameter of the myelin sheath: $\text{g-ratio} = d/D$ [33]. The g-ratio is widely utilized as a functional and structural index of myelin

sheath thickness of individual axon fibers. The smaller the g-ratio, the thicker the myelin sheath layer.

2.5. Myelin basic protein isoforms

Cb tissues ($n=6/\text{group}$) were quickly removed and homogenized in ice-cold RIPA lysis buffer supplemented with a mixture of protease and phosphatase inhibitors and centrifuged at $15,000g$ for 20 min at 4°C , as reported in previous studies [34,35]. The supernatant was collected and used to determine the total protein concentration with a Bradford assay (Bio-Rad Protein Assay, Hercules, CA, USA) using bovine serum albumin as a standard. Equal amounts of proteins ($40\text{ }\mu\text{g}$) were separated on 15% SDS-PAGE gels for MBP and transferred to nitrocellulose membranes (Bio-Rad, Hercules, CA, USA). After incubation, in a blocking solution (5% dry nonfat milk, Sigma-Aldrich), membranes were incubated overnight at 4°C shaking with the primary antibody anti-MBP (A85322, antibodies, Stockholm, Sweden). β -Actin antibody (1:1,000) (SC-47778 C4) was used as loading control. Subsequently, the membranes were washed in TBS with 0.1% Tween-20 and incubated with the peroxidase-linked secondary antibody at room temperature for 1 h (antimouse, diluted 1:1,000). Immunodetection was visualized by a Clarity Western ECL Substrate (Bio-rad) using an imaging system (ChemiDoc MP Imaging Systems, Bio-Rad Laboratories). Densitometric analysis was carried out by ImageJ software (National Institutes of Health, Bethesda, MD, USA), as previously reported [35–37].

2.6. Statistical analysis

Statistical evaluations were performed by using two-way ANOVA followed by *post hoc* Bonferroni's multiple range test, when $P < .05$. Data are expressed as mean $\pm$ standard error of the mean (SEM) and P value less than .05 was considered statistically significant. The statistical analyses were all performed using the Software GraphPad Prism 5.

3. Results

3.1. KD effect on motor and anxiety-like behaviors

3.1.1. MBW test

In the present study, MBW test was used to evaluate both motor performances and anxiety-like behaviors. First of all, a significant interaction between strain and diet was reported for the time spent to travel along the cylindrical axis (Fig. 1A; $F_{(1, 28)} = 29.00$, $P < .001$) and the number of laps in the full length of the cylindrical axis (Fig. 1B; $F_{(1, 28)} = 21.00$, $P < .001$). Conversely, in the case of the number of peeking, only a main effect of diet (Fig. 1C; $F_{(1, 28)} = 19.80$, $P < .001$) and strain ($F_{(1, 28)} = 8.515$; $P = .007$) was detected.

Interestingly, KD was effective in reducing the time spent travelling along the cylindrical axis and reaching the safe box in BTBR as compared with the same mice strain fed with CD ($P < .001$; Fig. 1A). This was largely noticeable if we consider that this parameter turned out to be substantially higher ($P < .001$) in BTBR CD mice with respect to C57 CD. No difference was instead detected between C57 fed with CD and KD.

Concerning the number of laps along the cylindrical axis, a strong difference was observed between the two strains treated with a standard diet (Fig. 1B). Specifically, the value of BTBR CD appeared to be significantly lower ($P < .001$) than C57 CD. When BTBR mice received KD, this number of laps was significantly enhanced ($P < .001$).

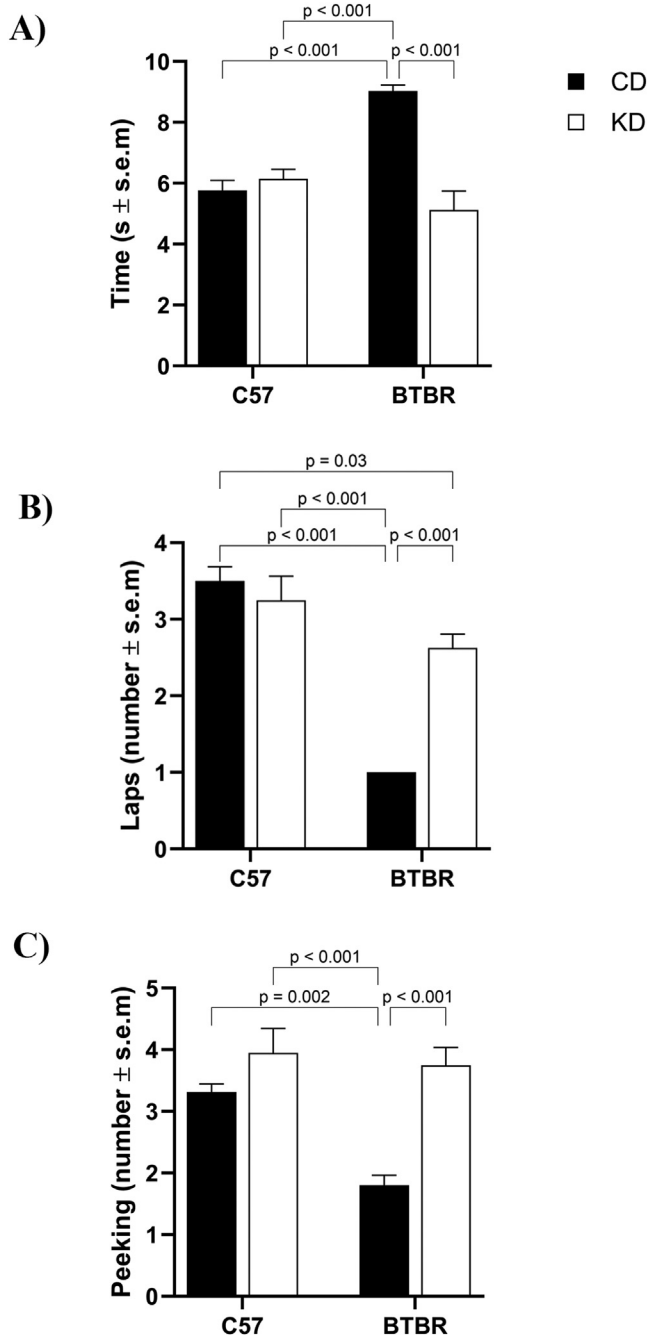


Fig. 1. Effect of ketogenic diet (KD) on motor and anxiety-like behaviors in the modified beam walking test. (A) Time (s $\pm$ s.e.m.) spent in reaching the safe box and traveling the cylindrical axis, (B) number of laps ($\pm$ s.e.m.) in the full length of the cylindrical axis and (C) number of peeks ($\pm$ s.e.m.) were evaluated in both BTBR and C57 mice treated with a standard chow diet (CD) or KD ($n=8$ /group). The data were statistically carried out by a two-way ANOVA with Bonferroni's multiple comparisons *post hoc* test to compare two variables when $P<.05$ as reported in Materials and Methods. Only statistically significant differences are indicated.

A similar trend was also observed for the number of peeks, with BTBR CD mice performing fewer ($P<.01$) peeks than C57 CD whereas BTBR KD mice showed a strong increase ($P<.001$) of this behavior compared with BTBR CD, which was close to the level of the C57 group (Fig. 1C). No significant variation was observed in C57 following treatment with KD ($P>.05$).

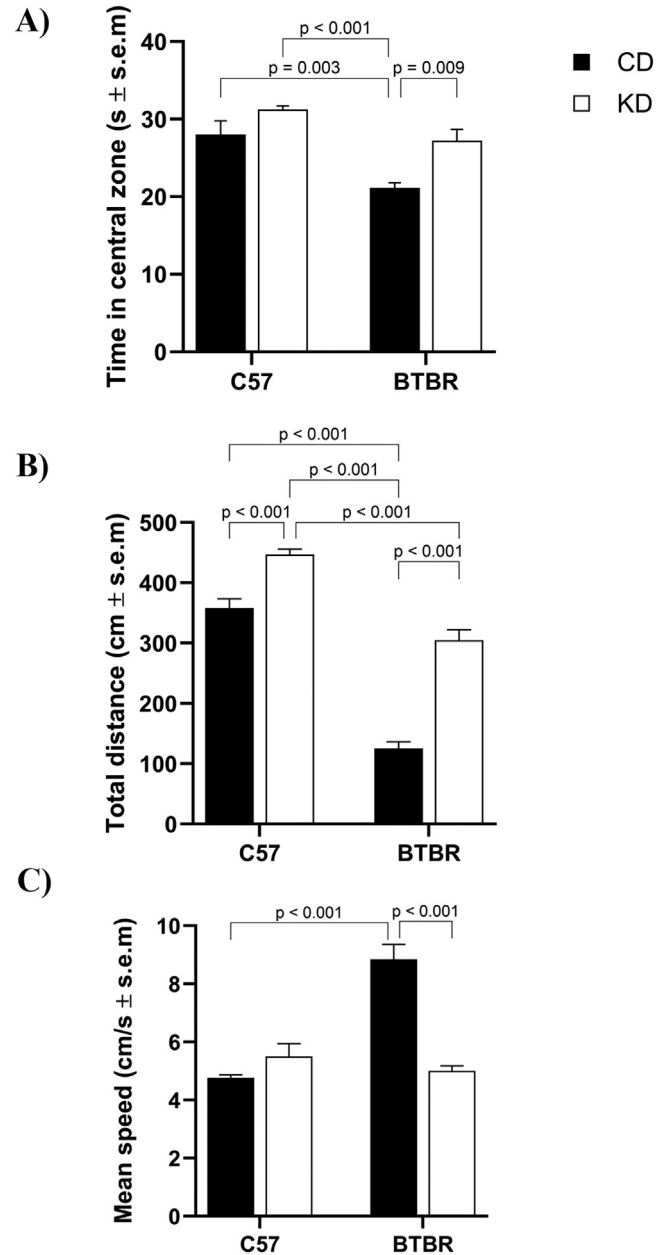


Fig. 2. Effect of ketogenic diet (KD) on motor and anxiety-like behaviors in the open field test. (A) Time spent (s $\pm$ s.e.m.) in the central zone, (B) total distance traveled (cm $\pm$ s.e.m.) and (C) mean speed (cm/s $\pm$ s.e.m.) were evaluated in both BTBR and C57 mice treated with a standard chow diet (CD) or KD ($n=8$ /group). The data were statistically carried out by a two-way ANOVA with Bonferroni's multiple comparisons *post hoc* test to compare two variables when $P<.05$ as reported in Materials and Methods. Only statistically significant differences are indicated.

3.1.2. OFT

Even OFT was used to assess the impact of KD on locomotor activity and anxiety-related behaviors of mice. An interaction between diet and strain was detected for the time spent in the central zone ($F_{(1,28)}=19.25$; $P<.001$) and for the average speed ($F_{(1,28)}=42.17$; $P<.001$). Conversely, only a main effect of the diet ($F_{(1,28)}=38.75$; $P<.001$) and of the strain ($F_{(1,28)}=147.7$; $P<.001$) was reported for the total distance traveled. *Post hoc* analysis demonstrated that BTBR CD mice spent less time in the central zone with respect to C57 CD (Fig. 2A; $P<.01$) while no significant differences were detected for the time spent in central zone in C57

KD mice compared with C57 CD ($P > .05$). On the other hand, BTBR mice treated with KD spent most of the time in the central zone with respect to BTBR CD (Fig. 2A; $P < .01$).

In the case of the total distance traveled, BTBR CD traveled a considerably shorter distance than C57 CD (Fig. 2B; $P < .001$). Even for this parameter, KD has proven to be significantly effective ($P < .001$) in increasing the total distance traveled by BTBR compared with its counterpart treated with CD (Fig. 2B).

Moreover, BTBR CD mice demonstrated significantly ($P < .001$) higher average speed than C57 mice treated with the same standard diet (Fig. 2C). However, statistical analyses showed that KD ameliorated motor behaviors in BTBR mice by also decreasing ($P < .001$) the average speed when compared to BTBR mice treated with CD.

3.2. KD effect on cerebellar pro-inflammatory cytokines

TNF- α , IL-1 β , and IL-6 levels were analyzed in Cb of the different experimental groups. In the case of TNF- α , although no interaction effect was observed ($F_{(1, 20)} = 3.069$; $P = .10$), a significant main effect was recorded for both strain ($F_{(1, 20)} = 26.33$; $P < .001$) and diet ($F_{(1, 20)} = 5.218$, $P = .03$). Notably, TNF- α levels were markedly higher in BTBR CD mice compared with C57 ($P < .001$). Following KD exposure, this cytokine showed a significant reduction ($P < .05$) in BTBR mice but not at the same level of C57 ($P < .001$; Fig. 3A).

Similarly, for IL-1 β (Fig. 3B) no interaction effect was observed ($F_{(1, 20)} = 3.323$; $P = 0.08$), although a significant main effect was detected for both strain ($F_{(1, 20)} = 33.24$; $P < .001$) and diet ($F_{(1, 20)} = 5.71$; $P = .03$). *Post hoc* analysis revealed that even this cytokine was upregulated in BTBR CD when compared with C57 CD and C57 KD ($P < .001$). On the contrary, there was a significant reduction of IL-1 β levels in BTBR KD compared with BTBR CD ($P < .05$).

The evaluation of IL-6 (Fig. 3C) revealed only a main effect of strain, with no significant effects attributed to the diet or interaction for both (strain $\times$ diet: $F_{(1, 20)} = 2.087$; $P = 0.16$ Diet: $F_{(1, 20)} = 2.694$, $P = .12$ Strain: $F_{(1, 20)} = 54.03$; $P < .001$). Indeed, KD tended to reduce ($P < .05$) the elevated IL-6 levels observed in BTBR CD mice even when compared with C57 controls ($P < .001$).

3.3. Relationship among KD diet, myelin sheath thickness, and MBP

To assess whether KD was able to modulate the thickness of the myelin sheath, we evaluated the myelinated axons ultrastructure of C57 CD and C57 KD (Fig. 4A and B, respectively) as well as BTBR CD and BTBR KD (Fig. 4C and D), and calculated g-ratios (Fig. 4E). From the TEM analysis, it appeared that myelin thickness, as measured in ultrathin Cb sections, was influenced by KD ($F_{(1, 96)} = 117.6$; $P < .001$). Indeed, BTBR CD mice had a significantly higher ($P < .001$) g-ratio compared to C57 CD (Fig. 4E). In contrast, a significant reduction in the g-ratio value occurred in C57 KD compared with C57 CD ($P < .01$) and, above all, in BTBR KD compared with BTBR CD ($P < .001$).

For this part, we also conducted a Western blot analysis to determine KD effects on the expression levels of the main MBP isoforms in Cb of all experimental groups (Fig. 5A). Such an evaluation revealed that BTBR mice exposed to CD were featured by a general downregulation ($P < .05$) of all MBP isoforms, i.e., 21.5 kDa (Fig. 5B), 18.5/17-kDa (Fig. 5C), and 14 kDa (Fig. 5D) when compared with C57 CD mice. Noteworthy, an increase ($P < .05$) of 18.5/17-kDa isoform was observed in BTBR after KD treatment compared with BTBR CD mice.

No significant variation was observed for the other two MBP isoforms following exposure to KD.

4. Discussion

The present work correlates, for the first time, the impact of KD on motor and anxiety disorders to neuroinflammation and axonal myelination in Cb of an idiopathic model of ASD, the BTBR mouse. A growing number of reports highlighted the effects of KD on a variety of neurological and non-neurological disorders, including core symptoms and comorbidities of ASD [38,24], but until now little is known about KD effects on motor and anxiety behaviors. In view of this, 3-week-old BTBR mice were fed KD for 5 weeks, which overlaps with adolescence, a critical period for the maturation of neural circuits [39] and myelin plasticity [40]. The adolescence period is beginning to receive considerable attention since recently it has been reported that different motor assessments lead to differing patterns of age-related group differences in motor skills of autistic youth compared with nonautistic youth [41]. Additionally, since autism-relevant behavioral traits of the BTBR mouse model are already reliably detectable in early postweaning and adolescent stages [42], this time window may be considered ideal for evaluating environmental interventions.

Here, we demonstrated that a 5-week treatment of KD promotes motor function and modulates anxiety-related activities in BTBR mice. When fed CD, they displayed a tendency to take longer time to travel to the beam of the MBW and to reach the safe box, even though they did not show loss of balance (i.e., absence of slips). Such feature may be correlated to poor sensorimotor integration of this experimental model as reflected by a shorter stride length causing a greater latency (i.e., time spent to traverse the bar) on the balance beam task [43]. Other studies reported similar movement impairments when BTBR were subjected to the rotarod test. It was found that, instead of concentrating on the motor learning, animals ignored the unstable rotating rod exhibiting a latency to fall from the accelerated rod [42]. Additionally, our BTBR mice exhibited a fewer number of times in which they travelled the entire length of the cylindrical axis (laps) on the MBW test and similarly they peeked or fully emerged out of the safe box less. Such a behavioral feature may be considered a novel anxiety index that captures similar aspects to the standard anxiety index obtained from the elevated plus maze [44]. Moreover, both the time spent in the central zone and the total distance traveled in OFT were reduced in BTBR CD compared with C57 mice indicating that BTBR strain is more anxious than C57 and this is in accordance with other studies [45]. Contextually, the average speed was increased thus suggesting greater hyperactivity [46]. Nonetheless, others reported a lower level of anxiety in adolescence BTBRs since they are more prone to risk taking, impulsive behavior, and novelty seeking rather than juvenile and adult rodents [47,48]. Even though these parameters are somewhat different among research groups [49], possibly due to differences in experimental procedures, our behavioral data plus other indications [50] support an evident anxiogenic profile of BTBR that, in addition to ASD-like behaviors, make it a valid model for ASD with psychiatric comorbidity [3].

Interestingly, marked improvements occurred after KD administration in BTBR mice compared with BTBR CD and C57 in both MBW test as well as in OFT. In particular, KD accounted for a reduction in anxiety and improvements in motor performance. This should not be so surprising since it has been widely demonstrated in both preclinical and clinical studies that KD has evident effects on mood, cognitive function and depression severity [51] with fewer adverse effects than traditional psychiatric/seizure medication [24]. Recently, in a pilot study, mediterranean diet plus KD accounted for reduced pain frequency and intensity in patients with chronic migraine [52]. Moreover, our results are also

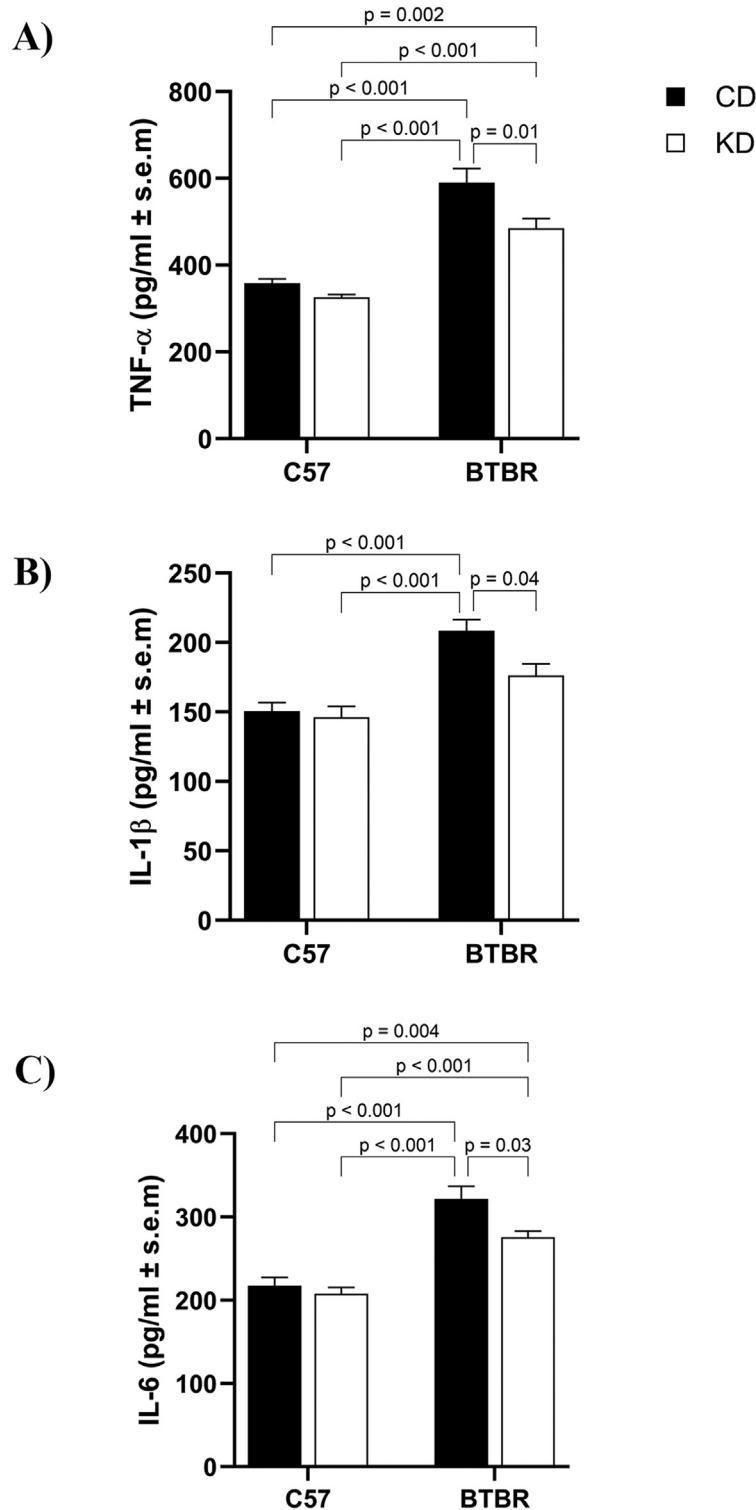


Fig. 3. Effect of ketogenic diet (KD) on the levels of key pro-inflammatory cytokines. Data were expressed as pg/mL ($\pm$ s.e.m.) of TNF- α (A), IL-1 β (B), and IL-6 (C) in the Cb of both BTBR and C57 mice fed a standard chow diet (CD) or KD ($n=6$ /group). The data were statistically carried out by a two-way ANOVA with Bonferroni's multiple comparisons *post hoc* test to compare two variables when $P < .05$ as reported in materials and methods. Only statistically significant differences are indicated.

in line with KD being able to restore aberrant cortical motor maps and excitation-to-inhibition imbalance in BTBR mice [53]. Parallely, administration of a ketone ester-enriched diet ameliorates motor deficits in a mouse model of Parkinson's disease [54].

As is widely known, the relationship between KD and ASD may be mediated in part by inflammatory markers [55,56], influencing neurogenesis, synaptogenesis and neuronal physiology related to behavioral alterations in different neurological conditions [57]. The delicate balance between pro and anti-inflammatory signals is

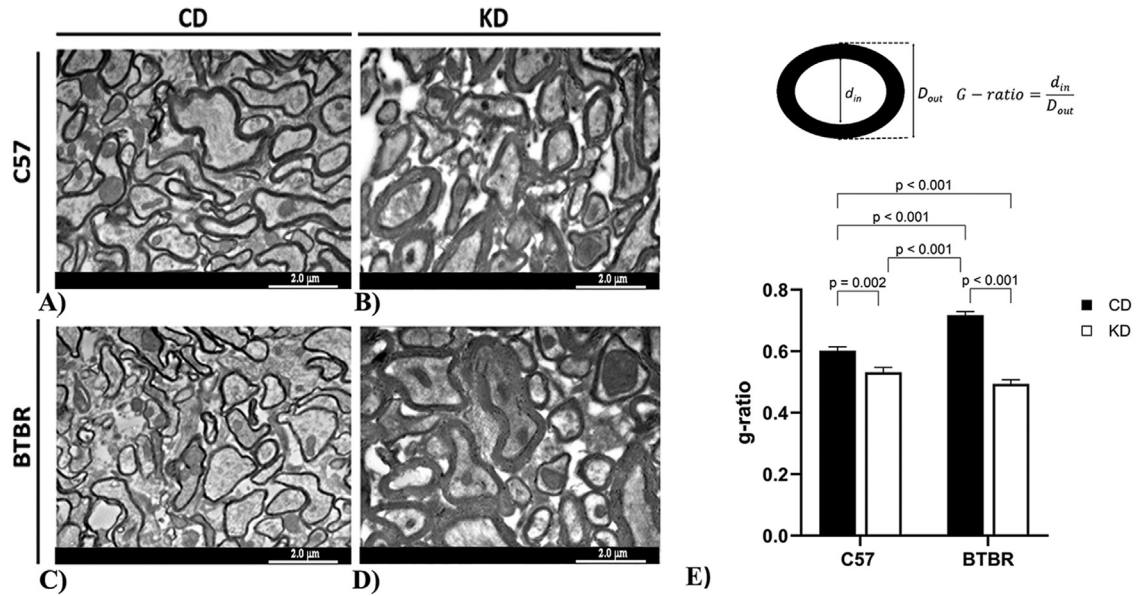


Fig. 4. Effect of ketogenic diet (KD) on the myelination of cerebellar axons. Representative TEM photomicrographs of coronal sections ($\times 6,000$ and scale bar $2 \mu\text{m}$) show cerebellar axons for both C57 (A and B) and BTBR (C and D) mice fed a standard chow diet (CD; A and C) or KD (B and D) ($n=6/\text{group}$). g-ratio ($\pm \text{s.e.m.}$) was calculated as the ratio of the inner (din) to outer (dout) diameter of myelinated axons (E) in all experimental groups. The data were statistically carried out by a two-way ANOVA with Bonferroni's multiple comparisons *post hoc* test to compare two variables when $P < .05$ as reported in materials and methods. Only statistically significant differences are indicated.

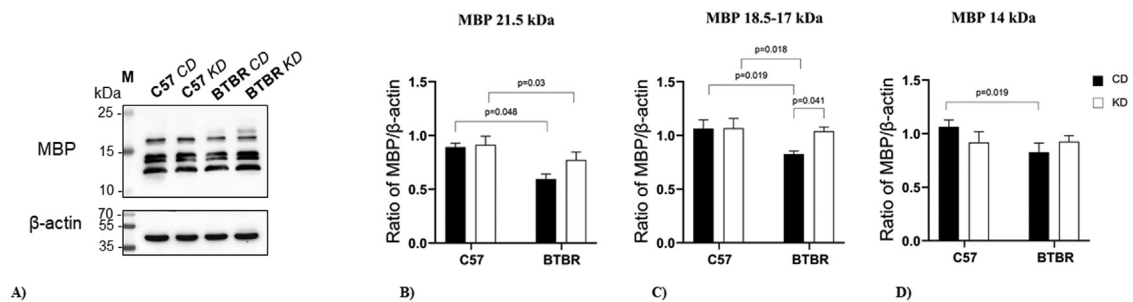


Fig. 5. Effect of ketogenic diet (KD) on different myelin basic protein (MBP) isoforms. (A) Representative immunoblots of MBP isoforms along with the loading control (β -actin) of both C57 and BTBR fed a standard chow diet (CD) or KD. Densitometric analysis of 21.5-kDa (B), 18.5/17-kDa (C) and 14-kDa (D) MBP isoforms. Data are expressed as the mean $\pm$ s.e.m. ($n=6/\text{group}$). The data were statistically carried out by a two-way ANOVA with Bonferroni's multiple comparisons *post hoc* test to compare two variables when $P < .05$ as reported in materials and methods. Only statistically significant differences are indicated.

fundamental for the correct proliferation, differentiation, and myelination of the oligodendrocyte lineage cells. Microglia affect oligodendrocyte development through cytokines, growth factors, and phagocytosis. Environmental factors may disrupt these regulatory processes, thus altering white matter development so leading to ASD symptomatology in social communication and sensory-motor function [58]. A typical trajectory of white matter development, observed in ASD with respect to age-matched neurotypical peers, is an initial hypermyelination at early postnatal stages, followed by marked hypomyelination, which lasts throughout lifespan.

In this regard, we observed a great variability of the g-ratio, a parameter widely used as a functional and structural index of the optimal axonal myelination [34]. Specifically, BTBR CD mice had a higher g-ratio compared with C57 CD and so, in the present study, a thinner myelin sheath layer was reported for the mouse model of idiopathic ASD. Such indications are fully in line with other studies in which myelination was significantly downregulated in BTBR mice compared with C57 mice [59]. Moreover, even the VPA-treated rats showed signs of neuronal degeneration, as indicated by the rarefaction and loss of neurofilaments in myelinated nerve

fibers [18]. Recently, a significant increase in myelinated axon density, accompanied by thinner myelin sheaths, has been reported in the corpus callosum of Shank3B ASD mouse model compared with the wild type [60]. These ultrastructural alterations were widespread across the corpus callosum, suggesting a global disruption of myelinated axon integrity. In contrast, a significant reduction of the g-ratio value occurred in BTBR treated with KD, further supporting an important role of such a treatment in ASD pathophysiology. Indeed, some genetic modifications linked to this specific diet intervention were found in BTBR, which after exposure to KD showed temporal cortex and hippocampus improvements associated with myelin formation and white matter development [61]. However, recent evidence indicated that there is a significant increase in the expression of SOX2-dependent oligodendrocyte/myelination markers but only with a long-term KD intervention, at least in the aging mouse brain [62]. Hence, proinflammatory cytokines may be indicated as potent biomarkers of ASD [63] in which motor and emotional impairments may be considered signs of cerebellar neuroinflammation [64]. This brain area belongs to the main circuits that orchestrate not only motor activities but also cognitive processing and social behavior [65,66], to-

gether with anxiety responses [13,67], even in relation to ASD [68]. Interestingly in this study, dietary intervention with KD reduced the levels of the proinflammatory cytokines TNF- α , IL-6 and IL-1 β in Cb of BTBR mice. Such an effect was similar to some functional foods that alleviate behavioral alterations, reversing the disorganization of the Cb and improving TLR-4/Myd88/NF- κ B signaling cascade in VPA-induced autism [69]. The normalization of proinflammatory cytokine levels in this brain area is correlated to improvements of motor/exploratory performance, as previously reported for experimental autoimmune encephalomyelitis mouse model in which KD prevented motor deficiency, suppressed microglial activation and inhibit demyelination [70].

Emerging studies link neuroinflammation to altered white matter trajectories [71] like in our study. Our attention was focused on Cb expression patterns of the classical isoforms (from 14–21.5 kDa) of MBP. MBP is the major myelin protein in CNS that interacts not only with structural membrane-associated and cytoskeletal proteins, but also with proteins involved in protein expression, including those of the transcription-translation machinery, as well as with mitochondrial proteins, thus playing a regulatory role in the myelination process [72]. Interestingly, a downregulation of all MBP isoforms has been reported in BTBR CD mice and this is in good agreement with significant temporal and regional differences with lower levels in the CNS of Shank3 Δ 11(–/–) [73]. Noteworthy is the reduction of both 18.5-kDa isoform, which predominates in mature myelinating oligodendrocytes, and 17.5-kDa isoform that alone can fulfill the functional tasks of all isoforms in the nervous system [74]. Reduction of such isoforms could be involved in the hypomyelination that we observed in Cb of BTBR CD as well as in the activation of microglia, which may affect oligodendrocyte development through alteration of the proinflammatory cytokines that, in turn, may impair motor and anxiety-like behaviors. This possibility has already been proposed in Fmr1-knockout mice during postnatal development [75]. Additionally, this is in line with histopathological examination of BTBR brain tissue that displayed a downregulation of myelin-related proteins together with reduced levels of staining with ferric alum, indicating myelin disruption [76]. Recently, histochemical and immunofluorescence data suggested age-related demyelination in the central tract of the vermis, as indicated by reduced level of MBP in the arbor vitae [77]. Surprisingly, only the expression of 18.5/17-kDa isoforms resulted to be increased in BTBR treated with KD. Indeed, it has been previously shown that KD was able to restore oligodendrocyte integrity and increase CNS myelination, therefore ameliorating axonal defects and normalizing motor functions in Pelizaeus–Merzbacher disease [78]. In this case, MBP isoform could be responsible for compaction of the myelin sheath in Cb of BTBR KD by interacting with lipid membranes since the lipid composition of the myelin leaflet has a high impact on the interaction between the membrane and MBP [79]. It must be underlined that an overexpression of 17.2 kDa MBP isoform, even when the only 17.2-kDa MBP isoform is present, is able to elicit CNS myelination in transgenic shiverer mice [80]. Moreover, the unmodified C1 component of 18.5 kDa bovine MBP can assemble tubulin into microtubules in a dose-dependent manner via filamentous intermediates thereby simultaneously promoting the formation of microtubule bundles [81]. Such a condition is essential for a correct microtubules' stability and dynamics, including axonal transport, cell signaling, and overall neuronal integrity.

Overall, our findings imply that Cb is sensitive to KD therapeutic intervention for ASD motor and anxiety-related symptoms, also emphasizing its modulatory role on neuroinflammation, as previously reported for other brain regions [23]. In addition, we further underline the crucial role of the different MBP isoforms in the remyelination capacity of Cb in a validated mouse model of ASD dur-

ing a crucial time window such as adolescence. Given the increasing evidence on individuals with ASD that exhibit impairments in white matter development and integrity [82,83], this study may represent a first preclinical step towards the understanding of the mechanisms by which metabolic interventions, such as KD, promote myelin plasticity and remyelination processes in ASD. This is in line with previous observations showing that, in another rat model of diffuse axonal injury, ketone bodies were able to protect myelin-forming oligodendrocytes and reduce axonal damage [84]. Moreover, the observed modulation of inflammatory markers supports the hypothesis that ketogenic metabolic states may exert beneficial effects through the attenuation of processes related to neuroinflammation very likely by remodeling gut–brain axis, as reported not only in animal models [23] but also in humans [22,85]. Indeed, it has been shown that KD provided a reduction in *Firmicutes*, *Bacteroidetes*, and *Proteobacteria* and a consistent increment in the alpha biodiversity thus indicating a new strategy to improve ASD-related symptoms. Nevertheless, there are still disagreements about the impact of gut microbiota-based interventions on patients with ASD, since clinical studies have reported heterogeneous outcomes in terms of behavioral improvement and gastrointestinal symptom relief [86]. We are still at the beginning and further studies will be necessary to clarify the contribution of KD in myelin plasticity and to evaluate whether the involvement of cerebro-cerebellar circuits may represent viable therapeutic targets for improving neurodevelopmental outcomes in individuals with ASD.

Declaration of competing interests

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper. The authors hereby affirm that they have no conflicts of interest.

CRediT authorship contribution statement

Raffaella Alò: Writing – review & editing, Writing – original draft, Validation, Funding acquisition, Data curation, Conceptualization. **Ilaria Olivito:** Methodology, Investigation, Formal analysis, Data curation. **Damiana Minervini:** Methodology, Investigation, Formal analysis, Data curation. **Ennio Avolio:** Methodology, Investigation, Data curation. **Anna De Bartolo:** Methodology, Investigation, Formal analysis, Data curation. **Ida Perrotta:** Writing – review & editing, Methodology, Investigation. **Maria Carmela Cerra:** Writing – review & editing, Formal analysis, Data curation. **Tommaso Angelone:** Writing – review & editing, Investigation, Formal analysis, Data curation. **Carmine Rocca:** Writing – review & editing, Methodology, Investigation, Formal analysis, Data curation. **Rosa Maria Facciolo:** Writing – review & editing, Writing – original draft, Validation, Funding acquisition, Data curation, Conceptualization.

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