Cdon mutation and fetal alcohol converge on Nodal signaling in a

mouse model of holoprosencephaly

Mingi Hong[1], Annabel Christ[2], Anna Christa[2], Thomas E. Willnow[2], and Robert S. Krauss[1,*]

[1]Department of Cell, Developmental, and Regenerative Biology, Icahn School of Medicine at

Mount Sinai, New York, NY 10029, USA; [2]Max-Delbruck-Center for Molecular Medicine, 13125

Berlin, Germany

*Corresponding Author:

Robert S. Krauss, Department of Cell, Developmental, and Regenerative Biology, Icahn School

of Medicine at Mount Sinai, New York, NY 10029.   Phone: 212-241-2177; Fax: 212-860-9279;

e-mail: Robert.Krauss@mssm.edu

Abstract

Holoprosencephaly (HPE), a defect in midline patterning of the forebrain and midface, arises ~1 in 250 conceptions. It is associated with predisposing mutations in the Nodal and Hedgehog (HH) pathways, with penetrance and expressivity graded by genetic and environmental modifiers, via poorly understood mechanisms. CDON is a multifunctional co-receptor, including for the HH pathway. In mice, *Cdon* mutation synergizes with fetal alcohol exposure, producing HPE phenotypes closely resembling those seen in humans. We report here that, unexpectedly, Nodal, not HH, signaling is the point of synergistic interaction between *Cdon* mutation and fetal alcohol. Window-of-sensitivity, genetic, and in vitro findings are consistent with a model whereby brief exposure of *Cdon* mutant embryos to ethanol during gastrulation transiently and partially inhibits Nodal pathway activity, with consequent effects on downstream HH signaling during midline patterning. These results illuminate mechanisms of gene-environment interaction in a multifactorial model of a common birth defect.

Introduction

Many common structural birth defects appear to arise from a complex and ill-defined combination of genetic and environmental factors (Krauss and Hong, 2016). The notion that environmental agents affect penetrance and expressivity of predisposing mutations is speculated to underlie many human congenital anomalies, but has been difficult to demonstrate. Animal models are therefore required, but these have been slow to emerge. Some recent successful examples are a zebrafish model of craniofacial defects (*Pdgfra* mutations and fetal alcohol), and mouse models of scoliosis (Notch pathway mutations plus hypoxia), facial clefting (*Pax3* mutations plus 2,3,7,8-tetrachlorodibenzodioxin (TCDD)), and holoprosencephaly (Hedgehog pathway mutations and fetal alcohol) (Hong and Krauss, 2012; Kietzman et al., 2014; McCarthy et al., 2013; Sparrow et al., 2012; Zalc et al., 2015).

Holoprosencephaly (HPE) is a common developmental defect in midline patterning of the forebrain and/or midface (Muenke and Beachy, 2001). HPE occurs approximately once per 250 human conceptions, with an associated in utero lethality of ~97% (Leoncini et al., 2008; Shiota and Yamada, 2010). HPE is characterized by an unbroken continuum of rostroventral midline anomalies that range from complete failure to partition the forebrain into hemispheres plus cyclopia, through progressively less severe defects including partially partitioned forebrain, single nostril, and midface hypoplasia (Cohen, 2006; Krauss, 2007; Muenke and Beachy, 2001).

Development of the rostroventral midline is initiated by signals derived from the prechordal plate (PCP) (Kiecker and Niehrs, 2001; Marcucio et al., 2011). The PCP produces Sonic hedgehog (SHH), initiating a sequence of events that progressively patterns the forebrain and midface. *Shh* is expressed in a temporal cascade: first in the PCP, subsequently in the ventral midline of the diencephalon and telencephalon, and finally in the midfacial ectoderm (Aoto et al., 2009; Cordero et al., 2004; Geng and Oliver, 2009; Kiecker and Niehrs, 2001; Rubenstein and Beachy, 1998; Zhang et al., 2006). SHH induces midline cell fates and structures throughout this process. HH ligands initiate signaling by binding the primary receptor

Patched1 (PTCH1). In the absence of ligand, PTCH1 constrains the activity of a second

membrane protein, Smoothened (SMO). HH binding inhibits PTCH1 function, allowing SMO-

dependent signals to activate GLI transcription factors and pathway-specific gene expression.

HH ligand availability and signal reception are also regulated by a series of co-receptors and

additional HH-binding proteins, including CDON, BOC, GAS1, and LRP2 (Beachy et al., 2010;

Kong et al., 2019; Lee et al., 2016; Petrov et al., 2017; Willnow and Christ, 2017).

The PCP develops from the anterior primitive streak (APS) under the influence of Nodal

pathway signaling (Robertson, 2014; Schier, 2009; Shen, 2007). Therefore, the Nodal pathway

is developmentally upstream of the HH pathway in rostroventral midline patterning. Consistent

with this conclusion, defective Nodal signaling at the primitive streak stage of development

leads to defects in HH signaling and HPE (Krauss, 2007). Nodal is a TGFβ superfamily member

and signals through a receptor complex including the type I and type II receptors, ALK4 and

Activin receptor IIA/B (ActRIIA/B), and a GPI-linked co-receptor, Cripto (Robertson, 2014;

Schier, 2009; Shen, 2007). Receptor activation results in phosphorylation of the transcription

factors SMAD2 and SMAD3, and activation of genes required for PCP induction (Robertson,

2014; Schier, 2009; Shen, 2007). Among these genes are *FoxA2* and *Gsc* (Ang and Rossant,

1994; Belo et al., 1998; Filosa et al., 1997). Nodal signaling also induces expression of *Lefty1*

and *Lefty2*, which encode secreted inhibitors of the pathway that bind to Cripto and Nodal itself

(Robertson, 2014; Schier, 2009; Shen, 2007).

The etiology of HPE is complex, involving both genetic and environmental risk factors

(Dubourg et al., 2018; Hong and Krauss, 2018; Johnson and Rasmussen, 2010; Krauss, 2007;

Miller et al., 2010; Muenke and Beachy, 2001; Roessler et al., 2018a; Roessler et al., 2018b;

Summers et al., 2018). Heterozygous, loss-of-function mutations in components or regulators of

the HH, Nodal, and FGF signaling pathways are associated with HPE (Roessler et al., 2018a;

Roessler et al., 2018b). Epidemiology of HPE is less advanced than genetic analyses, but

among the environmental risk factors implicated is fetal alcohol exposure (Abe et al., 2018;

Cohen and Shiota, 2002; Croen et al., 2000). A full range of clinical phenotypes is observed in

both sporadic and familial HPE (Muenke and Beachy, 2001; Solomon et al., 2010). Many

mutation carriers in pedigrees lack clinical manifestation, and many apparently sporadic cases

have inherited a mutation from a minimally affected parent (Lacbawan et al., 2009; Solomon et

al., 2012). It is likely, therefore, that HPE-associated mutations are not sufficient to produce

midline defects, but are the substrate on which a complex landscape of genetic and/or

environmental modifiers act. Statistical analysis is consistent with a multifactorial, "autosomal

dominant with modifier" model, wherein the penetrance and expressivity of a heterozygous

driver mutation is graded by the modifier landscape (Dubourg et al., 2018; Hong and Krauss,

2018; Roessler et al., 2012).

We have modeled this phenomenon in mice with high fidelity. *CDON* encodes a multi-

functional co-receptor, including for the HH pathway, (Lu and Krauss, 2010; Sanchez-Arrones et

al., 2012), and *CDON* mutations are associated with human HPE (Bae et al., 2011; Roessler et

al., 2018a). *Cdon*^{-/-} mice on a 129S6 genetic background have a subthreshold defect in HH

signaling and are subject to HPE induced by genetic and environmental modifiers; among the

latter is ethanol (EtOH) (Hong and Krauss, 2018). *Cdon* mutation or in utero EtOH exposure

individually yielded little effect on 129S6 mice; the combination, however, synergized to inhibit

HH signaling in the developing forebrain and produced a complete spectrum of HPE

phenotypes with high penetrance (Hong and Krauss, 2012). Furthermore, fetal EtOH induced a

low penetrance of HPE in C57BL/6J mice, and this was exacerbated by heterozygosity for *Shh*

or *Gli2* (Kietzman et al., 2014). Consistent with the notion that a threshold of HH signaling

activity is rate-limiting in midline patterning, genetic removal of one copy of the negative

pathway regulator, *Ptch1*, rescued 129S6 *Cdon*^{-/-} mice from EtOH-induced HPE (Hong and

Krauss, 2013).

Defective HH pathway function may be a final common mechanism for all classical forms

of HPE, so these results do not prove that HH signaling is the direct synergistic target of *Cdon*

mutation and in utero EtOH exposure. Several lines of evidence argue that EtOH itself, rather

than a consequence of its metabolism, is the HPE-inducing teratogen (Hong and Krauss, 2017).

In this study, we demonstrate that the window of sensitivity to EtOH-induced HPE in 129S6

Cdon$^{-/-}$ mice is closed by embryonic day (E) 7.5, prior to *Shh* expression in the PCP (Echelard et

al., 1993). The sensitivity period of EtOH-induced HPE overlaps with Nodal-mediated

specification of the PCP from the APS. Furthermore, we find that CDON interacts genetically

and physically with regulators of Nodal signaling. Finally, EtOH inhibits Activin/Nodal pathway

signaling in vitro in mouse epiblast stem cells (mEpiSCs), which have transcriptional and

functional properties that resemble APS cells (Kojima et al., 2014; Tsakiridis et al., 2014).

Together these results argue that, unexpectedly, *Cdon* mutation and fetal alcohol synergize to

induce HPE by interfering with Nodal signaling. These results illuminate mechanisms of gene-

environment interaction in a high fidelity, multifactorial model of a common birth defect.

Results

The window of sensitivity to EtOH-induced HPE coincides with Nodal, not Hh, signaling

All studies were performed with mice on a 129S6 background and are referred to only by

genotype unless otherwise noted. Our model uses one-hour timed mating of $Cdon^{+/-}$ mice,

allowing rigorous identification of a window of sensitivity for EtOH's teratogenic effects. The

standard EtOH treatment regimen involves one dose at E7.0 and a second dose four hours

later; this results in a full range of HPE phenotypes in $Cdon^{-/-}$ mice with overall penetrance of

~75% (Hong and Krauss, 2012). The protocol is analogous to the original regimen developed to

model fetal alcohol spectrum disorders in C57BL/6J mice, wherein ~19% developed HPE

phenotypes (Aoto et al., 2008; Sulik et al., 1981). HPE phenotypes were not induced in wild type

C57BL/6J mice when EtOH was administered at E6.5 or E7.5 (Aoto et al., 2008). We have

shown that EtOH is ineffective in $Cdon^{-/-}$ mice when administered at E8.0 (Hong and Krauss,

2012). To further refine the temporal window of sensitivity, we assessed the ability of EtOH to

induce HPE in $Cdon^{-/-}$ animals when administered at E7.25 and E7.5, with embryos examined

for external HPE phenotypes at E14.0. EtOH was effective at E7.25, but not at E7.5 (Table 1).

EtOH itself is the HPE-inducing teratogen in this system (Hong and Krauss, 2017). The

developmental processes directly perturbed by EtOH must therefore occur: 1) during the

sensitive time window; and 2) prior to EtOH clearance, even if defects in midline development

occur later. *Shh* expression in the midline begins at E7.5-E7.75 (Echelard et al., 1993). When

administered at E7.0, maternal blood EtOH levels peaked at E7.25 and were no longer

detectable by ~E7.75 (Hong and Krauss, 2012). Critically, EtOH is no longer effective at E7.5, a

time prior to SHH function in prechordal plate-mediated rostroventral midline patterning

(Echelard et al., 1993; McMahon et al., 2003). Therefore, it is very unlikely that direct inhibition

of HH signaling is the mechanism of EtOH-induced HPE. Consistent with this conclusion, the

time of peak sensitivity to HPE induced by the direct SMO inhibitor, Vismodegib, was E7.5, 6 –

12 hours later than for EtOH (Heyne et al., 2015).

Both the window of sensitivity to EtOH and peak EtOH levels overlap with induction of

the PCP by Nodal signaling. We previously observed that expression of *FoxA2* and *Gsc*, genes

regulated by Nodal that mark the APS (from which the PCP is derived), was diminished at E7.25

in EtOH-treated *Cdon*^{-/-} embryos. Both *Cdon* mutation and EtOH exposure were required for this

effect (Hong and Krauss, 2012). Expression of *Lefty2*, a direct Nodal pathway target gene, was

also reduced at E7.25 specifically in EtOH-treated *Cdon*^{-/-} embryos (Figure 1). Taken together,

these results showed that the synergy between *Cdon* mutation and in utero EtOH exposure

occurred during Nodal-dependent specification of the PCP and that reduction of Nodal target

gene expression required a combination of mutation and teratogen. The observation that loss of

CDON was required for the effect suggests that, in addition to its role as a SHH co-receptor,

CDON functions earlier in development to promote midline patterning, potentially via the Nodal

pathway. In fact, *Cdon* expression initiates during gastrulation and is seen in embryonic

mesoderm and ectoderm (Hong and Krauss, 2012; Mulieri et al., 2000).

Cdon interacts genetically with Nodal pathway components

Mice with mutations resulting in complete loss of Nodal signaling gastrulate abnormally and die

early in development, but hypomorphic pathway mutants display a range of HPE phenotypes

(Andersson et al., 2006; Chu et al., 2005; Lowe et al., 2001; Nomura and Li, 1998; Schier, 2009;

Shen, 2007; Song et al., 1999). To further probe the linkage between CDON and regulation of

Nodal signaling, we assessed whether *Cdon* interacted genetically with *Cripto* and *Lefty2*, direct

positive and negative regulators of the Nodal pathway, respectively. When analyzed at E10,

~14% of *Cdon*^{-/-} embryos treated with EtOH had alobar HPE and cyclopia, dying in utero by E11

(Hong and Krauss, 2012, 2013). When studied at E14, ~70% of such embryos displayed lobar

HPE and a range of craniofacial midline phenotypes, including fused upper lip and single nostril

(Hong and Krauss, 2012, 2013). To address genetic interactions between *Cdon* and Nodal

pathway regulators, we took advantage of the high penetrance of phenotypes at E14 and

analyzed embryos at this stage for these unambiguous, easily scored phenotypes.

Targeted mutations in *Cripto* and *Lefty2* (Ding et al., 1998; Meno et al., 1999) were

placed onto the 129S6 genetic background and then crossed to *Cdon* mutants to generate

double heterozygotes. Offspring of intercrosses of these mice were further crossed and

pregnant females were treated with EtOH or saline as a control. *Cripto* is essential for Nodal

signaling. *Lefty2* is induced in response to Nodal signaling to provide critical negative feedback

as an inhibitor of the pathway. Since CDON and EtOH may act together at the level of Nodal

signaling in HPE, we predicted that removal of one copy of *Cripto* would sensitize $Cdon^{-/-}$

embryos to EtOH-induced HPE. In contrast, removal of one copy of *Lefty2* would be predicted to

rescue $Cdon^{-/-}$ embryos from EtOH-induced HPE. (Null mutations in *Cripto* and *Lefty2* result in

early lethality due to strong gastrulation defects (Ding et al., 1998; Meno et al., 1999), so

studying homozygous double mutants with *Cdon* is impossible.) To permit the detection of

sensitization by *Cripto* heterozygosity, we used a dose of EtOH which we previously reported

gives ~30% penetrance of HPE at E14 (2.9 g/kg) (Hong and Krauss, 2012). With this regimen,

28% of EtOH-treated $Cdon^{-/-};Cripto^{+/+}$ embryos had HPE, whereas 55% of $Cdon^{-/-};Cripto^{+/-}$

embryos did (p<0.014) (Table 2, Figure S1). With the exception of a single EtOH-treated

$Cdon^{+/-};Cripto^{+/-}$ embryo, EtOH-treated mice of other genotypes and saline-treated control mice

did not display HPE. Removal of one copy of *Cripto* therefore sensitized $Cdon^{-/-}$ mice to EtOH-

induced HPE.

$Nodal^{-/-}$ and $Lefty2^{-/-}$ embryos have opposite defects in gastrulation and display dosage-

dependent genetic interactions, with *Lefty2* functioning as a negative regulator of the pathway

(Meno et al., 1999). To test for phenotypic suppression in EtOH-induced HPE, we used the

standard dose of EtOH (3.48 g/kg) for these analyses, as it results in high penetrance. All

embryos with HPE at E14 display a fused upper lip, while only some show the more severe

single nostril phenotype. Approximately 70% of EtOH-treated $Cdon^{-/-};Lefty2^{+/+}$ embryos had a

fused upper lip, similar to our previous findings (Hong and Krauss, 2012, 2013), whereas 54%

of $Cdon^{-/-};Lefty2^{+/-}$ embryos did, revealing a trend toward overall reduction of HPE frequency

(p=0.14). However, while 21% of EtOH-treated $Cdon^{-/-};Lefty2^{+/+}$ embryos had a single nostril,

only 6% of $Cdon^{-/-};Lefty2^{+/-}$ embryos did (p<0.05) (Table 3, Figure S1). Again, EtOH-treated

mice of other genotypes and saline-treated control mice did not display HPE. Therefore,

removal of one copy of *Lefty2* rescued a more severe form of HPE associated with EtOH

treatment. Taken together, these studies revealed that the Nodal signaling components *Cripto*

and *Lefty2* act as heterozygous enhancer and suppressor genes, respectively, of EtOH-induced

HPE in $Cdon^{-/-}$ embryos.

EtOH inhibits Activin/Nodal signaling in mEpiSCs

The APS is a small, transiently existing cell population, making it hard to study directly. Cultured

mEpiSCs have transcriptional and functional properties resembling APS cells (Kojima et al.,

2014; Tsakiridis et al., 2014), making them a tractable in vitro surrogate model. mEpiSCs rely on

FGF2 and Activin/Nodal signaling for maintenance as self-renewing, pluripotent stem cells

(Brons et al., 2007; Vallier et al., 2009). Activin A and Nodal use the same receptor and

signaling mechanism, except that Nodal, but not Activin A, requires the co-receptor Cripto.

Therefore, we evaluated the effects of EtOH on Activin/Nodal signaling in mEpiSCs.

A direct readout of Nodal signaling activity is receptor-mediated phosphorylation of

SMAD2 at its C-terminus (Robertson, 2014; Schier, 2009; Shen, 2007). We assessed C-

terminally phosphorylated SMAD2 (p-SMAD2C) and total SMAD2 levels in the mEpiSC line,

EpiSC9 (Najm et al., 2011), after treatment with EtOH for 6 hours. A relatively short treatment

duration was chosen because: 1) the in vivo model is an acute exposure regimen; 2) the

window of sensitivity to EtOH-induced HPE is <12 hours; and 3) high EtOH levels last only

about 10 hours in pregnant females (Hong and Krauss, 2012). EtOH dose-dependently

diminished p-SMAD2C levels in mEpiSCs, without altering total SMAD2 levels (Figure 2A, B).

EtOH stimulates activation of the MAP kinase, JNK, in specific cell types (McAlhany et

al., 2000; Ren et al., 2017). SMAD2 is phosphorylated in its linker region by MAP kinases

(Massagué, 2003; Rezaei et al., 2012), usually leading to inhibition of SMAD2 function (Grimm

and Gurdon, 2002; Kretzschmar et al., 1999; Lessard et al., 2018). We therefore assessed total

and phosphorylated (activated) forms of JNK1 MAP kinase in EtOH-treated mEpiSCs. EtOH

dose-dependently increased phospho-JNK1 (T183/Y185) levels (p-JNK1; Figure 2A, B).

Consistent with EtOH-induced p-JNK1 activation, phosphorylation of the SMAD2 linker region

(p-SMAD2L) also occurred in an EtOH dose-dependent manner, with production of p-JNK1 and

p-SMAD2L correlating well (Figure 2A, B).

Human embryonic stem cells (hESCs) resemble mEpiSCs (Pauklin and Vallier, 2015).

Treatment of hESC or mEpiSC cultures with the ALK4 inhibitor, SB43152, led to reduction of

Activin/Nodal target gene expression and, eventually, induction of early markers of

neuroectoderm differentiation (Chng et al., 2010; Li et al., 2015; Liu et al., 2018; Vallier et al.,

2009). These studies generally used time courses of days to weeks, but Vallier et al. assessed

expression of five Activin/Nodal target and/or pluripotency-related genes in hESCs treated with

SB43152 for 6 hours, the same amount of time we treated mEpiSCs with EtOH. Levels of

Nanog, *Nodal*, and *LeftyA* mRNA were reduced by SB43152, whereas levels of *Oct4* and *Sox2*

underwent little or no change (Vallier et al., 2009). We assessed expression of these five genes

in mEpiSCs treated with EtOH for 6 hours (Figure 2C). Similar to SB43152-treated hESCs,

EtOH-treated mEpiSCs displayed significantly reduced levels of *Nanog* and *Nodal* mRNAs,

while *Oct4* and *Sox2* mRNA levels were largely unchanged. Expression of the additional

SB43152-inhibitable mEpiSC markers *Fgf5* and *T* (Liu et al., 2018) were also reduced by EtOH

treatment (Figure 2C). In contrast, EtOH did not alter levels of *Lefty1* or *Lefty2* in mEpiSC

cultures (Figure S2). As these are known Activin/Nodal target genes, this result might be related

to differences in SB43152 vs. EtOH treatment, or differences in half-lives of these mRNAs in

human vs. mouse cultures. Therefore, acute EtOH treatment of mEpiSCs resulted in an

inhibitory SMAD2 phosphorylation pattern and changes in gene expression similar to those

induced by a direct Activin/Nodal pathway inhibitor. Induction of neuroectoderm-specific genes

(e.g., *HoxA1*, *Six1*, and *Gbx2*) was observed in hESCs treated with SB43152 for 2 – 6 days

(Chng et al., 2010; Vallier et al., 2009). After 6 hours of EtOH treatment, we found a varied

response, with *HoxA1* levels strongly induced, *Six1* expression displayed a biphasic dose-

response, and *Gbx2* levels reduced (Figure S2).

***Cdon* and *Lrp2* genetically interact in mice to generate phenotypes resembling Nodal**

pathway hypomorphs, and both bind to Cripto

Our findings argue that CDON plays an earlier role in development than its known function as a

SHH co-receptor. The need for EtOH exposure to reveal this role suggests that CDON's effects

in primitive streak embryos may be redundant with other factors. The Hh co-receptors BOC and

GAS1 are not likely to be such factors, as *Cdon;Boc;Gas1* triple knockout mice had a phenotype

that is close to a complete loss of embryonic HH pathway function, but not Nodal pathway-like

phenotypes (Allen et al., 2011). LRP2 is an endocytic and auxiliary receptor for multiple

morphogenetic ligands and receptors (Willnow and Christ, 2017). *Lrp2$^{-/-}$* mice have HPE of

variable penetrance and severity (Christ et al., 2012; Spoelgen et al., 2005; Willnow and Christ,

2017; Willnow et al., 2012)**.** We therefore constructed mice with mutations in *Cdon* and *Lrp2*.

Some *Cdon;Lrp2* double mutants at E11.5 had a severe truncation of anterior head and face

structures, a phenotype neither single mutant displayed (Figure 3A). Surviving embryos

displayed a range of phenotypes, including milder craniofacial truncation and strong HPE

(Figure 3B, C). Loss of anterior head structure is a more severe phenotype than that seen even

in *Smo* mutants, which lack all HH signaling (Zhang et al., 2001). These phenotypes – anterior

truncations and HPE – are similar to those observed in mice with partial loss of Nodal pathway

function (e.g., hypomorphic *Nodal* and *Cripto* mutants, and *Nodal*^{+/-};*Smad2*^{+/-} mutants, each

have phenotypes that include truncation of anterior head structures and severe HPE)

(Andersson et al., 2006; Chu et al., 2005; Lowe et al., 2001; Nomura and Li, 1998; Song et al.,

1999). The *Cdon*/*Lrp2* genetic interaction is specific and selective: the *Cdon* paralog *Boc* is not

expressed in primitive streak-stage embryos (Mulieri et al., 2002; Zhang et al., 2001), and *Boc*

mutant mice do not synergize with *Lrp2* mutants (unpublished results), nor are they sensitive to

EtOH-induced HPE (Hong and Krauss, 2012).

CDON is a multifunctional co-receptor and promotes SHH-independent signaling when

associated with various other receptors and cell adhesion molecules. In addition to binding HH

ligands and PTCH1, CDON interacts with and influences signaling by classical cadherins; the

Netrin receptor, Neogenin; and the WNT co-receptor, LRP6 (Bae et al., 2011; Bae et al., 2009;

Izzi et al., 2011; Jeong et al., 2014; Kang et al., 2003; Kang et al., 2004; Lu and Krauss, 2010;

Tenzen et al., 2006). We hypothesized that CDON might work similarly in Nodal signaling. To

address this possibility, we assessed whether CDON binds to Nodal receptor components. A

secreted CDON ectodomain fused in-frame at its carboxy terminus with the IgG Fc region

(CDON-Fc) was expressed in HEK293T cells with individual ectodomains of the Nodal receptor

(ActRIIA, ActRIIB, ALK4, and Cripto) fused in-frame at their carboxy termini with alkaline

phosphatase (AP). As positive and negative controls, SHH-N-AP and CD164-AP were used,

respectively (SHH-N is the active portion of SHH, CD164 is a cell surface sialomucin) (Kang et

al., 2002; Tenzen et al., 2006). The use of secreted ectodomains reduces the possibility that

unknown, cell surface bound factors promote binding or contribute directly to the complex.

Conditioned medium was collected, and equivalent amounts of AP fusion proteins from

conditioned media were pulled down and blotted for captured CDON-Fc. Conversely, equivalent

levels of Fc were pulled down, and associated AP activity was quantified. Similar results were

obtained in each pull-down: CDON-Fc interacted efficiently with Cripto-AP, similar to the

interaction between CDON-Fc and SHH-N-AP (Figure 4A, B). CDON-Fc did not bind to the

negative control CD164-AP, and it interacted only weakly with the AP-tagged versions of ALK4,

ActRIIA, and ActRIIB (Figure 4A, B).

As CDON and LRP2 interacted genetically to produce Nodal hypomorph-like

phenotypes, we asked whether LRP2, like CDON, binds to Cripto. The extracellular region of

LRP2 harbors four repetitive modules, each comprising a cluster of complement-type repeats

followed by EGF-type repeats and β-propellers. Each module is likely capable of independently

binding ligands, as shown for the related receptor, LRP1 (Croy et al., 2003). LRP2 is a huge

polypeptide of 4660 amino acids, making it difficult to express in vitro. Therefore, we

constructed a series of soluble "mini-receptors" (designated sR1, sR2, sR3, and sR4) spanning

virtually the entire ectodomain in four non-overlapping pieces, each fused in-frame at their

carboxy termini to the IgG Fc region (see Figure 4C). Each soluble ectodomain segment and

Cripto-Fc were expressed in HEK293T cells and assessed for their ability to bind to each other.

LRP2 binds SHH-N (Christ et al., 2012; McCarthy et al., 2002), so this ligand was used again as

a positive control, with CD164-AP serving as a presumptive negative control. Each soluble

LRP2 mini-receptor ectodomain (i.e., sR1 to sR4) pulled down SHH-N-AP, revealing that LRP2

harbors multiple SHH-N binding sites (Figure 4D). These results were confirmed by expressing

each ectodomain segment joined with the native LRP2 transmembrane and cytoplasmic

domains (mini-receptors R1, R2, R3, and R4; Figure 4C) in NIH3T3 cells. These cultures were

incubated with recombinant SHH-N-GST fusion proteins for 2 hours, followed by

immunoprecipitation with anti-LRP2 antibody recognizing all mini-receptors and Western blotting

with antibodies to LRP2 or GST. Again, all four mini-receptors pulled down SHH-N, whereas no

pulldown of SHH-N was seen in control transfectants lacking LRP2 mini-receptors (Figure 4E).

Finally, we assessed LRP2 binding to Cripto with the soluble ectodomain binding assay. Similar

to its multivalent interaction with SHH-N, each soluble LRP2 ectodomain segment (sR1 to sR4)

pulled down Cripto-AP (Figure 4D). The efficiency of LRP2 mini-receptor ectodomains to bind

SHH-N-AP and Cripto-AP was similar to that of CDON-Fc (Figure 4D).

Discussion

HPE is a common developmental disorder, but its etiology remains poorly understood.

Mutations in the Nodal, HH, and FGF pathways are associated with HPE (Roessler et al.,

2018a), but these alone are insufficient to drive aberrant development. Identifying and

understanding the critical phenotypic modifiers of such mutations is important but still in its

infancy. Many birth defects are thought to be caused by poorly defined interactions between

genetic and environmental risk factors, but the mechanistic bases of these interactions are

largely unknown (Krauss and Hong, 2016). *Cdon* mutation and fetal alcohol are each implicated

in human HPE (Abe et al., 2018; Bae et al., 2011; Cohen and Shiota, 2002; Croen et al., 2000;

Roessler et al., 2018a). The *Cdon* mutation plus fetal alcohol model is noteworthy for its

specificity and fidelity to many aspects of human HPE (Hong and Krauss, 2012). Therefore,

illumination of how loss of *Cdon* interacts with in utero EtOH exposure provides insight into

mechanisms of HPE and how fetal alcohol functions as a teratogen in this anomaly.

The Nodal pathway is developmentally upstream from the HH pathway in patterning the

rostroventral midline. While CDON is clearly a component of the HH pathway, it regulates

signaling within several additional pathways as well (Bae et al., 2011; Bae et al., 2009; Izzi et

al., 2011; Jeong et al., 2014; Kang et al., 2003; Kang et al., 2004; Lu and Krauss, 2010; Tenzen

et al., 2006). Multiple lines of evidence presented here argue that CDON also regulates Nodal

signaling and that the Nodal pathway is the point of synergistic interaction between mutation of

Cdon and fetal EtOH exposure. The evidence includes: 1) EtOH-treated *Cdon*^{-/-} embryos display

defects in expression of Nodal target genes in the APS, whereas EtOH treatment or *Cdon*

mutation alone do not; 2) the window of sensitivity to EtOH-induced HPE is very narrow and

closed by E7.5, prior to *Shh* function in rostroventral midline patterning; 3) EtOH itself is the

likely HPE-inducing teratogen and peak circulating EtOH levels coincide with Nodal signaling in

the APS; 4) *Cdon* interacts genetically with the critical Nodal pathway factors *Cripto* and *Lefty2*

in EtOH-induced HPE; 5) acute EtOH treatment dose-dependently diminishes p-SMAD2C and

elevates p-SMAD2L levels, and inhibits Activin/Nodal-dependent gene expression in mEpiSCs;

6) *Cdon;Lrp2* double mutants display phenotypes similar to mice with hypomorphic Nodal

pathway mutations, including anterior truncations, a phenotype not seen in mice lacking all HH

signaling; and 7) CDON and LRP2 both bind efficiently to Cripto, an essential component of the

Nodal receptor.

Together our findings are consistent with the following model: CDON and LRP2 function

with overlapping or compensatory roles to regulate Nodal pathway signaling in the APS during

induction of the PCP. Brief exposure of *Cdon$^{-/-}$* embryos to EtOH during this period transiently

and partially inhibits Nodal pathway activity. While all the mice successfully gastrulate, they

emerge from this period predisposed towards development of HPE in a stochastic manner. If

HH signaling strength fails to reach a required threshold early during rostroventral midline

patterning, at the PCP stage, the outcome is alobar HPE and cyclopia; if it occurs at later stages

of development, the outcomes are progressively less severe. Aspects of the model will require

additional experimentation, but it is logically consistent with the synergistic effects of fetal

alcohol and *Cdon* mutation within a narrow window of sensitivity, and also with the "mutation

plus modifier" view of human HPE.

The specific mechanisms whereby acute EtOH treatment reduces expression of Nodal

target genes in the APS of *Cdon$^{-/-}$* mice and diminishes Activin/Nodal signaling in mEpiSCs are

not known. EtOH itself, rather than consequences of its oxidative metabolism, is very likely the

HPE-inducing teratogen (Hong and Krauss, 2017). An alternative mechanism to metabolism-

based toxicity is that EtOH itself functions to perturb cell membranes via its hydrophobicity

(Lyon et al., 1981; McCarns et al., 1997). One possibility is that EtOH's hydrophobic nature

perturbs trafficking of Nodal receptor components or their stable assembly at the cell surface.

Cripto is a GPI-linked protein, so might be especially vulnerable to hydrophobic membrane

perturbation. However, exogenously provided Activin A is the major activator of SMAD2 in

cultured mEpiSCs, and Activin does not require Cripto to signal through ActRII/Alk4. EtOH

reduces p-SMAD2C levels in these cultures, so Cripto may not be a direct critical target of

EtOH. Nevertheless, mEpiSCs endogenously express Nodal (Kojima et al., 2014), which does

require Cripto, and its contribution to SMAD2 signaling in these cultures is not fully clear.

Additionally, EtOH activates JNK1 in mEpiSCs, with a corresponding increase in p-SMAD2L

levels. Phosphorylation of SMAD2 by MAP kinases is generally inhibitory to SMAD2 activity,

independent of p-SMAD2C phosphorylation status (Massagué, 2003; Rezaei et al., 2012), so

EtOH appears to promote or inhibit multiple signals that converge on SMAD2 phosphorylation.

CDON regulates several signaling pathways, but it has not previously been implicated in

Nodal signaling. How CDON functions to regulate Nodal signaling is of obvious interest.

Cdon;Lrp2 double mutant mice display phenotypes that resemble Nodal pathway hypomorphs,

and CDON and LRP2 each bind to Cripto. Therefore, as with the effects of EtOH, Cripto is a

possible point of regulation. One potential mechanism is that CDON and LRP2 might function as

components of a larger Nodal receptor complex, contributing via interaction with Cripto.

Alternatively, they may work with Cripto in processing and trafficking of Nodal or other receptor

components, or play a role in processing and trafficking of Cripto itself (Constam, 2009). There

is evidence in other systems that CDON and LRP2 can act in such a manner. LRP2 is best

understood as an endocytic receptor that controls internalization and intracellular trafficking of

both soluble and membrane-bound proteins, including PTCH1, the Na^+/H^+ exchanger NHE3,

and the intrinsic factor receptor, cubilin (Willnow and Christ, 2017). Furthermore, CDON

regulates subcellular localization of N-cadherin during neural crest migration in zebrafish

(Powell et al., 2015). Similarly, the *Drosophila* orthologs of CDON act not only as co-receptors

for HH, but in trafficking of the primary HH receptor, PTC (Zheng et al., 2010). Another

possibility is in regulation of cell-cell contact and adhesion. CDON is localized to sites of cell-cell

contact and functions with N-cadherin in cell adhesion-dependent signaling (Kang et al., 2003;

Lu and Krauss, 2010). In zebrafish, a positive feedback loop exists between Nodal signaling, E-

cadherin expression, and duration of cell-cell contact that directs PCP specification, at the

expense of endoderm specification (Barone et al., 2017). It is conceivable that CDON could play

a role in adhesion-mediated, higher order regulatory events like this as well. These varied

potential mechanisms are not mutually exclusive.

Our findings offer insight into how *Cdon* mutation synergizes with fetal alcohol in mice to

produce a wide spectrum of HPE phenotypes, closely resembling the complex etiology and

variable outcomes seen in humans at the population level. A combination of approaches,

including window of sensitivity studies, genetic interactions in mice, and in vitro analyses

revealed that, unexpectedly, the point of synergy is at the level of Nodal, not HH, signaling.

These findings illuminate gene-environment interactions in the causation of a common birth

defect and serve as a conceptual framework for additional developmental anomalies.

Materials and Methods

Mice

All animal procedures were conducted in accordance with institutional guidelines for the care

and use of laboratory animals as approved by the Institutional Animal Care and Use Committee

(IACUC) of the Icahn School of Medicine at Mount Sinai and according to Max-Delbruck-Center

guidelines following approval by local authorities (X9007/17). B6.129P2-*Lefty2*^{tm1Hmd} mice were

provided by Hiroshi Hamada. *Cripto-LacZ* mice were provided by Michael Shen. Both strains

were transferred onto the 129S6/SvEvTac (129S6) background with the Taconic Speed

Congenic Program, by backcrossing and mapping with the 1450 SNP array. Mice used for these

experiments were estimated to be over 98% 129S6/SvEvTac background. These lines were

crossed with *Cdon*$^{+/tm1Rsk}$ (*Cdon*$^{+/-}$) mice on the 129S6 background (Cole and Krauss, 2003;

Hong and Krauss, 2012) to generate 129S6.*Cdon*$^{+/-}$;*Lefty2*$^{+/-}$ and 129S6.*Cdon*$^{+/-}$*Cripto*$^{+/-}$ double-

mutant mice. Because *Cdon* and *Cripto* are both located on chromosome 9, *Cdon*$^{+/-}$;*Cripto*$^{+/-}$

mice were crossed with wild type mice and offspring screened for those that carried a

recombinant chromosome 9 carrying both *Cdon* and *Cripto* mutant alleles. Offspring of

intercrosses of these mice were further crossed (see Tables 2 and 3 for details) and pregnant

females treated with EtOH or saline as a control (Hong and Krauss, 2012). Briefly, two- to three-

month old mice were mated for one hour in the dark and plugged females were collected. The

time of the plug was designated as embryonic day (E) 0.0. Pregnant female mice were injected

intraperitoneally twice with 15 μl per g body weight of solution of 30% EtOH in saline (3.48 g/kg)

at E7.0 and again 4 hours later, with the exception of studies involving *Cdon;Cripto* mutants. For

these experiments, a lower dose of ethanol (25% EtOH in saline, 2.9 g/kg) was used. Saline

injections were used as controls.

Mice with targeted gene disruption of *Lrp2* (*Lrp2*^{tm1Her}) have been described (Willnow et

al., 1996). *Lrp2*$^{+/tm1Her}$ (*Lrp2*$^{+/-}$) mice were kept on the C57BL/6N genetic background and

crossed with *Cdon*^{+/-} mice on the C57BL/6N genetic background. Offspring were further

intercrossed, and *Lrp2*^{+/-}*;Cdon*^{+/-} mice were subjected to timed mating to collect embryos at the

depicted embryonic day. Neither *Cdon*^{-/-} mice nor   *Lrp2*^{-/-} mice on the C57BL/6N display

anterior truncation phenotypes.

Whole mount in situ hybridization

Whole mount RNA in situ hybridization was performed according to standard protocols (Hong

and Krauss, 2012). Briefly, embryos were dissected out and fixed in 4% paraformaldehyde in

phosphate-buffered saline (PBS), dehydrated through a graded methanol series, and stored at -

20°C. Rehydrated embryos were treated with 10 μg/ml proteinase K (Qiagen) in PBS, 0.1%

Tween-20 (PBST) according to stage. Embryos were rinsed with PBST, post-fixed and

hybridized with digoxygenin (DIG)-labeled probe in hybridization mix (50% formamide, 1.3x SSC

pH 5.0, 5 mM EDTA, 50 μg/ml yeast tRNA, 100 μg/ml heparin, 0.2% Tween-20, and 0.5%

CHAPS) overnight at 65°C. They were washed, blocked with 2% Roche blocking reagent, 20%

heat-inactivated lamb serum in Tris-buffered saline with 0.1% Tween-20 (TBST) and incubated

with alkaline phosphate-conjugated anti-DIG antibody (1:2000, Roche) in blocking buffer

overnight at 4°C. After washing with TBST and NTMT (100 mM NaCl, 100 mM Tris pH9.5,

50mM $MgCl_2$, and 0.1% Tween-20), embryos were stained with BM Purple AP substrate

(Roche) in the dark. Stained embryos were cleared in 80% glycerol and photographed with a

Jenoptik ProgRes C3 camera attached to Nikon SMZ 1500 stereomicroscope. Captured images

were assembled by Helicon Focus software (Helicon Soft).

Mouse epiblast stem cell culture and Western blot and qRT-PCR analysis

Mouse epiblast stem cells (EpiSC9 cells) were obtained from Jianlong Wang and cultured as

described (Huang et al., 2017). Briefly, cells were cultured on 0.1% fibronectin-coated plates

(MilliporeSigma, 10 μg/ml/cm^2) in N2B27 media supplemented with 20 ng/ml Activin A (R&D

Systems) and 12 ng/ml Fgf2 (R&D Systems). Media were changed daily. EpiScs were treated

with EtOH for six hours in fresh EpiSC media with supplements. For protein analysis, cells were

harvested with RIPA buffer plus protease inhibitor (Sigma) and phosphatase inhibitor (Sigma).

Western blotting was as described (Bae et al., 2009). Images were scanned and quantified

using ImageJ software. Statistical significance was calculated using Student's t-test and a cutoff

of $p < 0.05$. Primary antibodies used for Western blot: SMAD2 (Cell Signaling #5339), p-

SMAD2C (Cell Signaling #3108), p-SMAD2L (Cell Signaling #3104), JNK (Cell Signaling

#9252), p-JNK (Cell Signaling #9251), and GAPDH (Cell Signaling #97166). For mRNA

analysis, total RNA was extracted from EpiSCs using the RNAeasy kit (Quiagen). Reverse

transcription and cDNA production were performed with Superscript III first strand synthesis

system (Invitrogen). qPCR was performed using iQ SyBR green supermix (BioRad) on an

iCycler iQ5 (BioRad). Gene expression levels were normalized to *Gapdh*. qPCR primers are in

Supplemental Table 1.

Protein-protein interactions

Expression vectors encoding soluble, tagged forms of CDON, SHH-N, CD164, ActRIIA, ActRIIB,

ALK4, Cripto, and LRP2, and LRP2 mini-receptors that encoded the LRP2 transmembrane and

intracellular domains, were constructed by standard methods; details are available on request.

HEK293T (293T) cells were cultured in DMEM with 10% FBS and 1x Penicillin/Streptomycin.

293T cells in 10 cm dishes were transfected with a total of either 2 or 3 μg of plasmid vectors

using Effectene reagent (Qiagen). Media were changed to 2% FBS two days after transfection.

Conditioned media were harvested five days afterwards. Soluble fusion proteins in conditioned

media were quantified by dot blotting with human IgG Fc protein (Jackson ImmunoResearch

Laboratories) as a standard, and by alkaline phosphatase (AP) enzyme activity using AP yellow

liquid substrate (Sigma). For analysis of CDON-Fc interactions with soluble AP-tagged proteins,

the factors were coexpressed in HEK293T cells. For Fc pull down and AP activity assays with

CDON-Fc, soluble fusion proteins were incubated with protein G agarose beads (Roche) for 2

hours at 4°C. For analysis of soluble LRP2-Fc mini-receptors interactions with soluble AP-

tagged proteins, LRP2 sR1-sR4 and the AP-tagged counterparts were generated separately in

individual transfections and CM mixed together. Pull down complexes were washed five times

with ice-cold HNTG buffer (20 mM HEPES pH 7.5, 150mM NaCl, 0.1% Triton X-100, 10%

glycerol). Endogenous AP was inactivated by heat inactivation. AP activity in pull-down

complexes was measured using AP yellow liquid substrate (Sigma). For AP pull down followed

by Western blot analysis, soluble fusion proteins were incubated with anti-AP conjugated

agarose beads (Sigma) overnight at 4°C. Pull-down complexes were washed five times with

HNTG buffer, eluted from the beads by boiling, and separated by SDS-PAGE. Antibodies used

for Western blot were HRP conjugated with goat anti-human Fc.

To test SHH-N interaction with membrane-bound LRP2 mini-receptors, NIH3T3 cells

were transfected with the four individual LRP2 mini-receptors encoding transmembrane and

intracellular domains and incubated with 20μg/ml GST-SHH-N in the medium for two hours. Cell

lysates were immunoprecipitated with polyclonal LRP2 antibody directed against full-length

LRP2, and subjected to Western blot analysis with anti-LRP2 and anti-GST antibodies.

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Competing interests

The authors declare no competing interests.

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919 **Table 1: Time course of EtOH-Induced HPE in *Cdon*$^{-/-}$ Embryos**

EtOH treatment:	E7.25				E7.5	
	Saline		EtOH		EtOH	
Phenotype*	*Cdon*$^{+/-}$	*Cdon*$^{-/-}$	*Cdon*$^{+/-}$	*Cdon*$^{-/-}$	*Cdon*$^{+/-}$	*Cdon*$^{-/-}$
Fused upper lip	0/17	2/14	0/21	13/24**	0/13	0/22
Single nostril	0/17	0/14	0/21	5/24	0/13	0/22
Proboscis	0/17	0/14	0/21	2/24	0/13	0/22

* All embryos with HPE had fused upper lip, a fraction of these showed single nostril and proboscis.

**p=0.0165 by Fisher's two-tailed exact test, when compared to EtOH-treated *Cdon*$^{+/-}$ embryos.

928 **Table 2: *Cripto* Heterozygosity Enhances EtOH-Induced HPE in *Cdon*^{-/-} Embryos**

Treatment	Genotype (# embryos with HPE/total (%))*		
	Cdon^{+/-}*;Cripto*^{+/-}	*Cdon*^{-/-}*;Cripto*^{+/+}	*Cdon*^{-/-}*;Cripto*^{+/-}
Saline	0/23 (0%)	0/11 (0%)	2/27 (7.4%)
EtOH (2.9 g/kg)	1/48 (2.1%)	9/32 (28.1%)	31/56 (55.4%)**

* Crosses between the following genotypes were used to generate the genotypes scored above:

Cdon^{+/-}*;Cripto*^{+/-} x *Cdon*^{+/-}*;Cripto*^{+/-}

Cdon^{+/-}*;Cripto*^{+/-} x *Cdo-*^{+/-}*;Cripto*^{+/-}

Cdon^{+/-} x *Cdon*^{+/-}*;Cripto*^{+/-}

Cdon^{+/-} x *Cdon*^{-/-}*;Cripto*^{+/-}

Cdon^{-/-} x *Cdon*^{+/-}*;Cripto*^{+/-}

No HPE was found in offspring genotypes other than those shown.

** p=0.014 by Fisher's two-tailed exact test, when compared to EtOH-treated *Cdon*^{-/-}*;Cripto*^{+/+} embryos.

940 **Table 3: *Lefty2* Heterozygosity Supresses EtOH-Induced HPE in *Cdon*^{-/-} Embryos**

Treatment	Genotype (# affected/total (%))*			
	Total HPE		Single nostril	
	Cdon^{-/-}*;Lefty2*^{+/+}	*Cdon*^{-/-}*;Lefty2*^{+/-}	*Cdon*^{-/-}*;Lefty2*^{+/+}	*Cdon*^{-/-}*;Lefty2*^{+/-}
Saline	1/12 (8.3%)	0/10 (0%)	0/12 (0%)	0/10 (0%)
EtOH (3.48 g/kg)	33/47 (70.2%)	26/48 (54.2%)	10/47 (21.3%)	3/48 (6.3%)**

* Crosses between the following genotypes were used to generate the genotypes scored above:

Cdon^{+/-}*;Lefty2*^{+/-} x *Cdon*^{+/-}*;Lefty2*^{+/-}

Cdon^{+/-}*;Lefty2*^{+/-} x *Cdo-*^{+/-}*;Lefty2*^{+/-}

Cdon^{+/-} x *Cdon*^{+/-}*;Lefty2*^{+/-}

Cdon^{+/-} x *Cdo*^{-/-}*;Lefty2*^{+/-}

Cdon^{-/-} x *Cdon*^{+/-}*;Lefty2*^{+/-}

No HPE was found in offspring genotypes other than those shown.

** p=0.04 by Fisher's two-tailed exact test, when compared to EtOH-treated *Cdon*^{-/-}*;Lefty2*^{+/+} embryos with a single nostril.

Figure 1. Defective Expression of *Lefty2* at the Primitive Streak Stage of EtOH-Treated *Cdon*^{-/-} Embryos

Whole mount in situ hybridization analyses of *Lefty2* in embryos of the indicated genotype and treatment

harvested at E7.25. *Lefty2* expression was decreased specifically in EtOH-treated *Cdon*^{-/-} embryos. Numbers

of embryos with similar results: *Cdon*^{+/-} (saline) = 6; *Cdon*^{+/-} (EtOH) = 4; *Cdon*^{-/-} (saline) = 9; *Cdon*^{-/-} (EtOH) = 9.

Scale Bar, 200 μm.

Figure 2: Acute EtOH Treatment Diminishes p-SMAD2C Levels and Enhances p-JNK1 and p-SMAD2L Levels in mEpiSCs

(A) Representative Western blot of mEpiSCs treated with the indicated doses of EtOH for 6 hours. GAPDH was used as a loading control. (B) Densitometric quantification of p-SMAD2C levels, relative to total Smad2; p-JNK1 levels, relative to total JNK1; and p-SMAD2L levels, relative to total SMAD2, with the indicated doses of EtOH. N=3 experiments with two biological replicates (as shown in (A)) in each experiment. (C) qRT-PCR analysis of *Nanog*, *Nodal*, *Oct4*, and *Sox2* expression in mEpiSCs treated with the indicated doses of EtOH for 6 hours. Expression was normalized to *Gapdh* expression. N=3 experiments with two biological replicates in each experiment. Values for (B) and (C) are means ± SEM, *p<0.05, **p<0.01, ***p,0.001.

Figure 3: *Cdon* and *Lrp2* Interact Genetically to Produce HPE and Anterior Truncations in Mice

(A) Whole mount E11.5 embryos of the indicated genotype. Note the loss of anterior head structures in the

Cdon⁻ᐟ⁻;Lrp2⁻ᐟ⁻ embryo (arrow). (B) E18.5 embryos of the indicated genotype in whole mount and alizarin

red/alcian blue-stained skeleton preparations. Note the craniofacial truncation in the *Cdon⁻ᐟ⁻;Lrp2⁻ᐟ⁻* embryos

(arrows). (C) Whole mount P0 *Cdon⁻ᐟ⁻;Lrp2⁻ᐟ⁻* embryo showing severe HPE.

Figure 4: CDON and LRP2 Bind to Cripto

(A) The indicated AP-tagged proteins were co-expressed with CDON-Fc, and equivalent amounts of AP

proteins in conditioned medium (CM) were pulled down. Levels of CDON-Fc in CM and in the pull down were

detected by Western blot. (B) CDON-Fc was pulled down from CM derived from transfections as in (A), the

amount of CDON-Fc from various CM normalized, and associated AP enzyme activity quantified. N=3,

repeated four times for (A) and (B). (C) Schematic of full length LRP2 and recombinant mini-receptor variants

used. Each mini-receptor spans one of the four repetitive modules of the extracellular receptor domain and

was expressed either as soluble ectodomain fragments fused to IgG Fc (designated sR1- sR4) or as a

membrane-bound mini-receptor fused to the authentic transmembrane and intracellular domains of LRP2

(designated R1- R4). Soluble ectodomain fragments sR1 – sR4 were studied in panel (D), whereas mini-

receptors R1 – R4 were used in panel (E). Amino acid numbers next to the full length receptor polypeptide

indicate the extent of individual receptor domains. (D) The indicated Fc-tagged proteins were pulled down from

CM derived from transfections as in (A), the amount of Fc-tagged protein from various CM normalized, and

associated AP enzyme activity quantified. N=3, repeated four times. (E) Cell transfectants expressing the

indicated Lrp2 mini-receptor were incubated with GST-SHH-N, and cell lysates immunoprecipitated with

antibody to LRP2 and blotted with antibodies to LRP2 and GST.

Figure S1. *Cripto* **Heterozygosity Enhances, and** *Lefty2* **Heterozygosity Suppresses EtOH-Induced HPE**

in *Cdon*$^{-/-}$ **Embryos**

(A) Frontal views of E14.0 embryos. Removal of one copy of *Cripto* enhanced the response of *Cdon*$^{-/-}$ embryos

to a dose of 2.9 g/kg EtOH (see Table 2 for quantification). The EtOH-treated *Cdon*$^{-/-}$;*Cripto*$^{+/-}$ embryo displays

a fused upper lip (arrow). (B) Frontal views of E14.0 embryos. Removal of one copy of *Lefty2* suppressed

formation of single nostril in *Cdon*$^{-/-}$ embryos the response to a dose of 3.48 g/kg EtOH (see Table 3 for

quantification). The EtOH-treated *Cdon*$^{-/-}$ embryo displays a fused upper lip and single nostril (black arrow),

whereas the EtOH-treated *Cdon*$^{-/-}$;*Lefty2*$^{+/-}$ embryo has a fused upper lip and two nostrils (red arrow).

Figure S2. Analysis of gene expression in EtOH-treated mEpiSCs. qRT-PCR analysis of *Lefty1*, *Lefty2*, *HoxA1*, *Six1*, and *Gbx2* expression in mEpiSCs treated with the indicated doses of EtOH for 6 hours. Expression was normalized to *Gapdh* expression. N=3 experiments with two biological replicates in each experiment. Values for (B) and (C) are means ± SEM, *p<0.05, **p<0.01, ***p,0.001.

Table S1: PCR Primers

Primer	Sequence	Reference
Gapdh_F	AACGACCCCTTCATTGAC	(Dong et al., 2008)
Gapdh_R	TCCACGACATACTCAGCAC	(Dong et al., 2008)
Gbx2_F	GCAACTTCGACAAAGCCGAG	Harvard Primer Bank 133892275c2
Gbx2_R	CCTTGCCCTTCGGGTCATC	Harvard Primer Bank 133892275c2
HoxA1_F	CGCACAATGTTCTGATGTCC	(Matt et al., 2005)
HoxA1_R	TGCAAGCTTCATGACAGAGG	(Matt et al., 2005)
Lefty1_F	AACCGCACTGCCCTTAT	(Liu et al., 2018)
Lefty1_R	CGCGAAACGAACCAACTTGT	(Liu et al., 2018)
Lefty2_F	CAGCCAGAATTTTCGAGAGGT	(Liu et al., 2018)
Lefty2_R	CAGTGCGATTGGAGCCATC	(Liu et al., 2018)
Nanog_F	GGACTTTCTGCAGCCTTACG	(Chng et al., 2010)
Nanog_R	GCTTCCAAATTCACCTCCAA	(Chng et al., 2010)
Nodal_F	CCTGGAGCGCATTTGGATG	(Liu et al., 2018)
Nodal_R	ACTTTCTGCTCGACTGGACA	(Liu et al., 2018)
Oct4_F	AGTTGGCGTGGAGACTTTGC	(Liu et al., 2018)
Oct4_R	CAGGGCTTTCATGTCCTGG	(Liu et al., 2018)
SIX1_F	TTAAGAACCGGAGGCAAAGA	(Chng et al., 2010)
SIX1_R	GGGGGTGAGAACTCCTCTTC	(Chng et al., 2010)
Sox2_F	GCGGAGTGGAAACTTTTGTCC	(Liu et al., 2018)
Sox2_R	CGGGAAGCGTGTACTTATCCTT	(Liu et al., 2018)

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