Topographic projection of retinal ganglion cell axons at single-cell precision underlies retinotopy in the mouse superior colliculus

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Abbreviated title: retinotopic RGC axon tiling in SC.

Key words: retinal ganglion cells; retinotopy; axonal imaging; superior colliculus; mouse.

Acronyms: 2D, two-dimensional; AAV, adeno-associated virus; CNMF, constrained non-negative matrix factorization; RF, receptive field; RGC, retinal ganglion cells; SC, superior colliculus; SD, standard deviation.

1 Abstract

Retinotopy, like all long-range projections, can arise from the axons themselves or their targets, but details of the connectivity remain unknown. Using two-photon axonal imaging, we functionally mapped the mouse retinocollicular projection at single-cell resolution. We found a near-perfect match between the spatial patterns of retinal ganglion cell axon terminals in the superior colliculus and their corresponding receptive fields, indicating that retinotopy arises from topographic axonal organizations at single-cell precision.

8 Main

Topographic organization is essential for the brain function (Jbabdi et al., 2013; Patel et al., 2014). Connections between brain regions are often spatially arranged to have one-to-one mappings, and sensory perception fundamentally relies on the transmission of topographically preserved information from receptor organs. In the visual system, for example, topographic visual representations are first formed in the retina and conveyed to the brain by retinal ganglion cells (RGCs) whose axons are bundled into an optic nerve (Masland, 2012). In general, neighboring RGCs project to neighboring regions in their targets (Frisén et al., 1998; McLaughlin et al., 2003; Cang and Feldheim, 2013; Arroyo and Feller, 2016). This forms a retinotopic map in the primary retinorecipient areas, such as the lateral geniculate nucleus (Malpeli and Baker, 1975) and the superior colliculus (SC; Dräger and Hubel, 1976; Cang et al., 2018), and retinotopy is likewise transferred throughout the entire visual pathways (Wandell et al., 2007; Cang and Feldheim, 2013).

How precisely is topographic information transmitted between brain regions? Only global-level relationship is known even for the best characterized connections, such as the retinal projection to SC (Frisén et al., 1998; McLaughlin et al., 2003; Cang and Feldheim, 2013; Arroyo and Feller, 2016), because such long-range projections of dense axonal fibers preclude a precise anatomical characterization of the connectivity patterns at a single-cell resolution (Hong et al., 2011). In the optic nerve, RGC axons are mixed and they lose retinotopic

organization (Figure 1; Horton et al., 1979; Colello and Guillery, 1998). A fundamental question

is then if RGC axons can nevertheless find precise targets even after they get "lost" in the

long-range projection (Figure 1A), or if target neurons need to reconstruct the topography by

elaborating local circuitry (Figure 1B). A recent study using Neuropixel probes has

demonstrated a more precise one-dimensional mapping of RGC projections to the mouse SC

(Sibille et al., 2021); however, local two-dimensional (2D) organizations of RGC axon terminals

remain elusive in any retinorecipient area.

Figure 1: Possible retinocollicular projection models. Retinotopy in SC (color-coded) can
arise from either (A) precisely retinotopic projection of RGC axons, innervating exact target
locations in SC; or (B) roughly retinotopic projection of RGC axons while SC neurons identify
appropriate partners. Note a loss of retinotopic organization in the optic nerve (Horton et al.,
1979; Colello and Guillery, 1998).

To address this question, we performed functional mapping of the RGC projections to

the superficial layer of SC at a single-cell resolution in awake head-fixed mice. Specifically,

we expressed axon-targeted calcium indicators (GCaMP6s; Broussard et al., 2018) in RGCs

via intravitreal injection of recombinant adeno-associated viruses (AAVs) harboring the pan-

neuronal human synapsin (hSyn) promoter, and monitored the visual responses of the labeled

RGC axons in SC using *in vivo* two-photon microscopy (Figure 2A). To segment axonal

patches of individual RGCs and isolate their activity, we used constrained non-negative matrix

factorization (CNMF) that allows to extract morphological and temporal features from noisy

time-lapse calcium activities based on their spatiotemporal correlations (Giovannucci et al.,

2019). For a field of view of approximately 0.3 mm^2 (0.57-by-0.57 mm), we detected up to 29

axonal patches displaying independent activity patterns (21 ± 5; mean ± standard deviation

(SD) here and thereafter; *N* = 23; e.g., Figure 2B). The size of the individual axonal patches

(0.016 ± 0.008 mm^2; *N* = 491) is consistent with the past anatomical measurement (Hong et

al., 2011), with a substantial overlap between them over the SC surface (40 ± 11 %). This

supports a successful signal extraction and a good coverage of RGC axonal labelling. These

data allowed us to faithfully reconstruct the local 2D map of the individual RGC axon terminals

in the mouse SC (Figure 2B).

Figure 2: Retinal ganglion cell axons retinotopically tiled the mouse superior colliculus
at single-cell precision. *A*: Schematic diagram of experimental set up. *B*: RGC axon patches
in SC from a representative recording session. Different axon patches are shown in different
colors: M-L, medial-lateral axis of the contralateral SC; P-A, posterior-anterior axis. Double-
head arrows indicate the scale. *C*: Representative RF of RGC axons (#2 in B) from reverse-
correlation analysis. *D*: RFs of all the simultaneously recorded RGC axons (1 SD Gaussian

profile; same color code as in B): D-V, dorsal-ventral axis of the visual field; T-N, temporal-
nasal axis. *E,F*: Delaunay triangulation of the RGC axonal patch locations (E; from B) and the
RF centers (F; from D): blue, matched edges between the two triangulation patterns; red,
mismatched edges. *G*: Population data for the fraction of matched triangulation edges
between the RGC patch locations and their RF centers (*N* = 23). Dotted lines indicate the
chance level range at *α* = 0.05 (lower bound, 17%; upper bound, 39%). *H*: Summary diagram
of our result, showing fine-scale retinotopic projection from the retina to SC despite a lack of
retinotopy in the optic nerve (see also Figure 1A; Horton et al., 1979; Colello and Guillery,
1998).

Presence of a well-defined receptive field (RF) is a characteristic feature of all RGC

types (Masland, 2012; Baden et al., 2016). To map the RF of the RGC axons, we computed

the response-weighted average of the presented random checkerboard stimuli (frame rate, 4

Hz; rectangular fields 3.7° in width and 2.9° in height; "reverse-correlation"; Chichilnisky, 2001)

and fitted a 2D Gaussian at the peak latency to characterize the spatial RF profile (Figure

2C,D). Most identified axonal patches had RFs within the stimulation screen (±22° in elevation

and ±36.5° in azimuth from the mouse eye; Boissonnet et al., 2022). In accordance with *ex*

vivo retinal physiology (Baden et al., 2016), the average RF size of the RGC axons was 6.6°

± 3.9° (*N* = 443), estimated as the mean of the long- and short-axis diameters of the 2D

Gaussian profile at 1 SD. There was no significant correlation between the RF size and the

RGC axonal patch size (Pearson's *r* = 0.06, *p* = 0.18). The RFs (1 SD Gaussian profiles)

locally tiled the visual field with 9 ± 4 % overlap, where the center of every RF occupied a

unique location in the visual field (Figure 2D). This ensures that these RFs belong to different

RGCs because the RF center location of RGC axons should correspond well to the location

of their somata in the retina – hence, the RF tiling faithfully represents retinotopy.

How well does the tiling pattern of RGC axons in SC agree with that of their RFs? As

expected from the global retinotopy in SC (Dräger and Hubel, 1976; Cang et al., 2018), relative

positions of the RGC axonal patches agreed well with those of the corresponding RFs (e.g.,

Figures 2B,D). For quantification, we used the geometric centers of the individual axonal

patches and the RF center locations as landmark points in each space, and computed the

Delaunay triangulation, respectively, to characterize the Euclidean adjacency relationship

regardless of their absolute positions (Figure 2E, axonal patches; Figure 2F, RF centers).

Specifically, the edges of this triangulation connect all the adjacent pairs of the landmark points

in a given space as a dual graph of the Voronoi tessellation that separates the space into

territories close to each landmark point. We then calculated the fraction of the common edges

between the two Delaunay triangulations (blue edges in Figure 2E,F) as a measure of an

agreement between the two tiling patterns, and found a near-perfect match between them (88

± 5 %; N=23; Figure 2G). This observation is consistent with the precise axonal connectivity

model (Figure 1A) whereby RGC axons retinotopically tile the SC surface at single-cell

precision (Figure 2H). The axon terminals of each RGC can thus innervate an exact target

location despite the loss of topography in the optic nerve (Figure 1A; Horton et al., 1979;

Colello and Guillery, 1998).

One of the most remarkable features of SC is a co-alignment of visual, sensory and

motor maps (Cang et al., 2018). This is likely essential for sensorimotor transformation in SC,

where spatial information from different sensory modalities need to be properly integrated to

generate premotor outputs for visual reflexes. Given the precise retinotopy in SC (Figure 2),

the other topographic maps in SC may also be organized at a fine-scale to match the spatial

resolution between them.

Having a precise retinotopy facilitates spatial information processing not only at a

global level, but also at local circuit levels. For example, looming detection has been

suggested to arise *de novo* in the superficial layer of SC (Lee et al., 2020). In principle, this

can be achieved even in the absence of retinotopy by elaborating the wiring among local

neurons. It is, however, much more efficient to exploit precise topographical information

because the connectivity length and its complexity can be minimized to process spatial

information locally at any point in the visual field. The precise connectivity we demonstrate

here suggests that the wiring efficiency indeed matters for local circuit computation.

How can then such a precise retinotopic projection be formed? The retinotopic map

formation in SC occurs during the first postnatal week in mice, involving both genetic and

activity-dependent factors (Cang and Feldheim, 2013; Arroyo and Feller, 2016). These factors

also play a key role in the development of a fine-scale organization in other sensory systems,

such as the chemotopic map in the olfactory bulb where olfactory sensory neurons expressing

the same olfactory receptor type project exclusively to the same single glomerulus (Imai et al.,

2010). While overall sensory map formation is genetically predetermined by molecular cues

(e.g., ephrin-Eph signaling; Frisén et al., 1998), a precise topography is established only after

refinement that involves spontaneous activity, such as retinal waves during development

(Arroyo and Feller, 2016), and eventually experience-driven alignment (McLaughlin et al.,

2003). In particular, here we suggest that this refinement process of the retinocollicular

projection should be extremely precise, to the extent that retinotopy arises at a single-cell

resolution regardless of the RGC types in adult animals (Figure 2). It is then possible that

neuronal circuits are in general wired more precisely than previously thought to exploit

topographic information for their function, including long-range projections to other retinal

targets (Liang, et al., 2018) as well as those in other systems, such as the callosal projections

and entorhinal-hippocampal networks (Jbabdi et al., 2013; Patel et al., 2014).

In summary, here we performed *in vivo* functional mapping of the retinocollicular

projection in awake mice and showed a precise retinotopic tiling of RGC axon terminals in SC

at a single-cell resolution (Figure 2). These axons can thus innervate their exact target

locations even after a loss of topographic organization through the long-range projection

pathway (Figure 1A; Horton et al., 1979; Colello and Guillery, 1998). Such precise connectivity

is likely beneficial for efficiently processing visual information at different spatial scales, both

locally and globally. It is a future challenge to investigate the precision of the topographic

organization in other brain regions, including the retinotopy in the downstream visual pathways

(Wandell et al., 2007); and how precisely different topographic maps in the same brain area

are aligned with each other to function coherently, such as the retinotopy, orientation, and

ocular dominance maps in the mouse SC (Feinberg and Meister, 2015; de Malmazet et al.,

2018).

Methods

149 No statistical method was used to predetermine the sample size. All experiments involving

150 animals were performed under the license 233/2017-PR from the Italian Ministry of Health.

151 The data analyses were done in Python and MATLAB (Mathworks). All data statistics are

152 reported in the format of mean ± standard deviation (SD). The significance level was 0.05.

Animals

154 A total of 10 female C57BL/6J mice were used at around 6-10 weeks of age at the time of the

155 first surgery. Mice were kept on a 12-h light / 12-h dark cycle and given water and food *ad*

156 *libitum*. After surgery, the animals were kept in groups operated on the same day. Mice were

157 between 12-24 weeks of age at the time of imaging experiments.

Viral injections

Intravitreal injection of recombinant adeno-associated virus (AAV) chimeric serotype 1/2 was

used to deliver hSyn-axon-GCaMP6s expression cassette (Broussard et al., 2018) to the

mouse retinal ganglion cells (RGCs). For the viral injection, mice were anesthetized (induction,

4% isoflurane in oxygen; maintenance, 1.8-2.0%) and kept on a heated plate (Supertech

Physiological Temperature Controller) to avoid hypothermia. Both eyes were protected by

saline drop or viscous eye ointment (VitA-POS, Ursapharm). The scleral surface on the left

eye was exposed and a small piercing was made with a sterile 28-30G needle in between the

sclera and the cornea. An injection pipette (~50 µm tip diameter with 30-40° bevel) prefilled

with a virus solution (~1.5×10^{14} vg/mL in phosphate-buffered saline with 0.001% pluronic F68

and 0.001% FastGreen) was then inserted into the vitreous chamber approximately 1 mm

deep. The injection pipette was made from a borosilicate glass capillary (1B120F-3, WPI) with

a pipette puller (DMZ, Zeitz) and a microgrinder (EG-45, Narishige). After a good sealing of

the pipette was formed, 1.2 µL of the virus solution was injected at a rate of 10 nL/s using a

microinjection pump (either Neurostar NanoW or WPI NanoLiter 2010) with mineral oil (Sigma

M5904) filled in the displacement space by a stainless steel plunger. The pipette was slowly

withdrawn at least 5 minutes after the completion of the injection, and the treated eye was

covered with the eye ointment. The animal was then allowed to recover from anesthesia in a

warmed-up chamber and brought back to its home cage.

Cranial implantations

We adapted methods described in Feinberg and Meister (2015) for the cranial window

implantation over the mouse superior colliculus (SC). A cranial window assembly was made

in advance, where the surface of a circular glass coverslip (5 mm diameter, 0.13-0.15 mm

thickness; Assistent Karl Hecht) was activated by a laboratory corona treater (BD-20ACV

Electro-Technic Products) and fused to a cylindrical silicone plug (1.5 mm diameter, 0.75 mm

height; Kwik-Sil, WPI) by baking if for 24 hours at 70-80°C.

For the implantation, animals were anesthetized (induction, 4% isoflurane in oxygen;

maintenance, 1.5-2.0%) and placed inside a stereotaxic apparatus (Stoelting 51625).

Throughout the surgery, temperature was maintained at 37°C using a heated plate (Supertech

Physiological Temperature Controller) to avoid hypothermia, and the eyes were protected with

eye ointment (VitA-POS, Ursapharm). After disinfecting and removing the scalp (Betadine

10%, Meda Pharma), the skull surface was scratched and cleaned to ensure good cement

adhesion. A craniotomy of a size about 3.0 mm (anterior-posterior; AP) by 2.5 mm (medial-

lateral; ML) was made over the right SC using a high-speed surgical drill (OmniDrill35, WPI)

with a 0.4 mm ball-tip carbide bur (Meisinger). To prevent bleeding, the craniotomy was treated

by haemostatic sponges (Cutanplast, Mascia Brunelli) soaked with sterile cortex buffer (NaCl

125 mM, KCl 5 mM, Glucose 10 mM, HEPES 10 mM, $CaCl_2$ 2 mM, $MgSO_4$ 2 mM, pH 7.4).

The implant was then placed in a way to push the transversal sinus and posterior cortex

approximately 0.5 mm forward and position the silicone plug over the medial-caudal region of

the right SC. Tissue adhesive (Vetbond, 3M) was used to fix and seal the implant. A custom-

made titanium headplate (0.8 mm thick) was then cemented to the skull using acrylic cement

powder (Paladur, Kulzer) pre-mixed with cyanoacrylate adhesive (Loctite 401, Henkel).

After the surgery, the animal was recovered from anesthesia in a warmed-up chamber

and returned to its home cage. For postoperative care, animals were given intraperitoneally 5

mg/kg Rimadyl (Zoetis) and 5 mg/kg Baytril (Bayer) daily for 3-5 days. We waited for another

10-15 days until the cranial window completely recovered before starting *in vivo* two-photon

imaging sessions.

Visual stimulation

Visual stimuli were presented to the subject animals as described previously (Boissonnet et

al., 2022). In short, a custom gamma-corrected digital light processing device was used to

project images (1280-by-720 pixels; frame rate, 60 Hz) to a spherical screen (radius, 20 cm)

placed ~20 cm to the contralateral side of an animal's eye, stimulating the visual field ±22° in

elevation and ±36.5° in azimuth (Figure 2A). We presented 1) random water-wave stimuli (10

min) for generating binary masks for signal source extraction in calcium image analysis (see

below); and 2) randomly flickering black-and-white checkerboard stimuli (10 min) for the

receptive field mapping, with rectangular fields 3.7° in width and 2.9° in height, each modulated

independently by white noise at 4 Hz.

In vivo two-photon imaging

Prior to *in vivo* imaging sessions, animals were habituated to stay head-fixed and locomote

freely on a custom-made treadmill disc (8-10 habituation sessions in total over a week, each

for 2 hours). For the imaging session, animals were kept on the treadmill with their head fixed

for no longer than 2 hours (2-5 sessions/animal). Two-photon calcium imaging was done on a

galvo-resonant multiphoton microscope (Scientifica HyperScope with SciScan image

acquisition software) equipped with a mode-locked tunable laser (InSight DS+, Spectra-

Physics) and a plan fluorite objective (CFI75 LWD 16X W, Nikon). In each imaging session,

we performed single-plane time-lapse recordings (frame rate, 15.4 Hz) at a depth of 120-140

μm from the SC surface. The axon-GCaMP6 fluorescent signal (excitation wavelength, 920

nm; average laser power under the objective, 40-80 mW) was bandpass-filtered (BP 527/70,

Semrock) and detected with a non-descanned gallium arsenide phosphide photomultiplier

tube (Hamamatsu GaAsP PMT). Each frame was acquired at 1024-by-1024 pixels (16-bit

depth), corresponding to a field of view of around 0.65-by-0.65 mm.

Calcium image analysis

For preprocessing, the original images were first downsampled to 512-by-512 pixels (2-by-2

pixels averaging) to reduce noise. To correct motion artifacts, we performed 1) two iterations

of Fourier-based rigid image registration in ImageJ, followed by cropping the image border by

16 pixels; and then 2) ten iterations of non-rigid motion correction (NoRMCorre) in CaImAn

(Giovannucci et al., 2019), followed by a 12-pixel border crop. The resulting images (456-by-

456 pixels) represent a field of view of around 0.57-by-0.57 mm (1.3 µm/pixel).

From the preprocessed images, we identified the axonal patches of individual RGCs

and extracted their signals in CaImAn. Specifically, using a part of the recordings (3,000-5,000

frames representing the random water-wave stimulus presentation period), we first ran two

iterations of constrained non-negative matrix factorization (CNMF) in CaImAn, where we set

the number of expected components (*params.K*) to be 60 as an initialization parameter. From

the identified components, we manually selected those with a uniformly-filled oval-like shape

that had a size of around 50-150 µm as biologically relevant ones (Hong et al. 2011), and

converted them into binary spatial masks to run two iterations of masked CNFM for processing

the entire time-lapse recordings. The resulting set of spatial components (*estimates.A*) and

deconvolved neural activities (*estimates.S*) was used for the subsequent analyses.

The area of the individual RGC axonal patches P_i was estimated from the identified

spatial components in CaImAn (1.3 µm/pixel). The fraction of the overlap between them was

calculated as the ratio of the areas between the intersection of any two patches $\bigcup_{i \neq j}(P_i \cap P_j)$

and the union of all patches $\bigcup_i P_i$.

Receptive field analysis

The receptive fields (RFs) of the RGC axon patches were estimated by reverse-correlation methods using the random checkerboard stimuli (Chichilnisky, 2001). Specifically, we calculated the response-weighted average of the stimulus waveform (0.5 s window; 1/60 s bin width), and characterized its spatial profile by the two-dimensional (2D) Gaussian curve fit at the peak latency. The RF center was assigned to the center of that 2D Gaussian profile, and the RF size was estimated as twice the mean SD of the long and short axes. The fraction of the overlap between the RFs (1 SD Gaussian profiles) was computed similarly as for the axonal patches. The Pearson correlation coefficient between the RF size and the RGC axonal patch size was calculated with the 95% interval of the data to eliminate the outliers.

Tiling data analysis

To compare the tiling patterns between the RGC axon patches and their RFs, we first computed the Delaunay triangulation of their centroid locations using the Euclidean distance in each space. As a measure of similarity between the two tiling patterns, we then calculated the number of matched edges, divided by the mean of the total number of edges in each triangulation. The chance level was calculated by a bootstrap method (10,000 repetitions).

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