Reduced enteric BDNF-TrkB signaling drives glucocorticoid-mediated GI dysmotility

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Abstract:

Stress affects gastrointestinal (GI) function causing dysmotility, especially in *disorders of gut-brain interactions (DGBI)* patients. GI motility is regulated by the enteric nervous system (ENS), suggesting that stress alters ENS biology to cause dysmotility. While stress increases glucocorticoid levels through the hypothalamus-pituitary-adrenal axis, how glucocorticoids affect GI motility is not known. Glucocorticoid signaling reduces expression of specific transcriptional isoforms of brain-derived neurotrophic factor (BDNF) in the central nervous system, altering signaling through its receptor Tropomyosin-related kinase B (TrkB) to cause behavioral defects. However, since the nature of ENS-specific *Bdnf* isoforms and their response to glucocorticoids remains unknown, we are limited in studying how stress impacts the ENS to cause dysmotility. Here, in male and female mice, we establish that stress-responsive *Bdnf* isoforms that are transcriptionally regulated at exons 4 and 6 represent >85% of all *Bdnf* isoforms in the post-natal ENS, and that *Bdnf* and *Ntrk2* (TrkB) are expressed by enteric neurons. We further show using male mice dosed with a synthetic glucocorticoid receptor (GR) agonist dexamethasone (Dexa), that increased glucocorticoid signaling in ENS significantly reduces the expression of *Bdnf* transcripts and protein and that it significantly reduces GI motility. Finally, by using HIOC, a specific synthetic agonist of TrkB, we observe that HIOC treatment significantly improved GI motility of a cohort of Dexa-treated male mice, when compared to Dexa-treated and HIOC-untreated mice. Our results implicate BDNF- TrkB signaling in the etiology of stress-associated dysmotility and suggest that TrkB is a putative therapeutic target for dysmotility in DGBI patients.

Significance statement:

The mechanism through which stress-associated increase in glucocorticoid signaling causes

gastrointestinal (GI) dysmotility is not well understood. GI motility is regulated by the enteric

nervous system, which depends on optimal signaling between brain-derived neurotrophic factor

(BDNF) and its receptor tropomyosin related kinase B (TrkB). The lack of clarity on whether

glucocorticoid impact BDNF signaling in the ENS, analogous to the manner they affect BDNF in

brain, has limited our understanding of stress-associated dysmotility. Here, by identifying the

nature of *Bdnf* isoforms expressed in ENS, studying their response to increased glucocorticoid

signaling, and testing the effect of TrkB agonist to promote healthy gut motility in a model of

glucocorticoid-driven dysmotility, we implicate altered BDNF-TrkB signaling as the mechanism

driving stress-associated dysmotility.

Introduction:

Stress-associated gastrointestinal (GI) dysmotility afflicts large numbers of patients and is an important factor in the development of irritable bowel syndrome (IBS) (Qin et al., 2014; Sperber et al., 2021; Leigh et al., 2023). GI motility is regulated by the enteric nervous system (ENS) (Wood, 2016), suggesting that stress-associated GI dysmotility occurs due to ENS dysfunction. Healthy ENS function relies on optimal neurotrophin signaling, which include interactions between neurotrophins, which are secreted by diverse gut cell types, and their specific receptor that is expressed by ENS neurons (Liu, 2018; Chalazonitis et al., 2020; Sharkey and Mawe, 2023). Brain-derived neurotrophic factor (BDNF) and its receptor tropomyosin kinase B (TrkB, coded by *Ntrk2*) constitutes one such significant neurotrophin system known to regulate neuronal signaling in the central nervous system (CNS) (Martinowich et al., 2007). Stress also causes significant changes in CNS neuronal function resulting in significant and observable changes in behavior (Zheng et al., 2024), and stress-induced reductions in BDNF expression and hence BDNF–TrkB signaling is known to be a significant mechanism through which stress affects CNS function (Begni et al., 2016). However, whether a similar BDNF-dependent mechanism drives stress-associated GI dysmotility is not known.

Studies on rodent models of health and disease have informed that BDNF regulates GI motility as its presence accelerates gastrointestinal transit, likely through a combination of its neuromodulatory role and more direct effects on the excitatory potential of the muscularis externa (Boesmans et al., 2008; Chen et al., 2012; Chen et al., 2014; Singh et al., 2020). This prokinetic effect of BDNF observed in rodents appears to translate to slow-transit constipation (STC) patients, as decreased BDNF presence was detected in colonic tissues from this cohort (Chen et al., 2014) and exogenous BDNF supplementation restored intestinal transit measures in constipated patients (Coulie et al., 2000). These data suggest that mechanisms regulating BDNF levels are important for the pathobiology of GI dysmotility. Further, significant alterations in *Bdnf* transcript levels in distressed IBS patients (Konturek et al., 2020; Zhang et al., 2021) suggest that this regulation may extend to stress-induced GI dysmotility. However, how stress affects enteric BDNF and TrkB and if stress-induced reduction in enteric BDNF levels and BDNF–TrkB signaling mediate the development of GI dysmotility is not known.

BDNF levels are regulated at the level of transcription. The *Bdnf* gene consists of nine exons of which the first 8 are non-coding exons (e1 – e8) that are transcribed but not translated, and only the 9th exon (e9) contains the translated coding sequence (Aid et al., 2007). Transcription results

in *Bdnf* isoforms containing any one of the eight e1 – e8 exons spliced to the protein coding exon

e9. The non-coding exons each provide alternative transcription start sites for *Bdnf* isoforms, and

each non-coding exon contains an exon-specific promoter sequence that is differentially regulated

(Aid et al., 2007). Variation in promoter usage allows for context-dependent regulation of *Bdnf*

expression, as has been demonstrated for activity-dependent synaptic plasticity in the CNS (Hong

et al., 2008; Pruunsild et al., 2011). Additionally, physiological stress has been implicated as a

potent regulator of *Bdnf* expression and abundance (Murakami et al., 2005; Tsankova et al., 2006;

Hill and Martinowich, 2016; Linz et al., 2019). Stress manifests its many effects on viscera through

the hypothalamic-pituitary-adrenal (HPA) axis, whereby corticotropin-releasing hormone (CRH)

released by hypothalamic neurons in response to stress induces the release of

adrenocorticotropic hormone (ACTH) from pituitary. This, in turn, directs the adrenal glands to

release the glucocorticoid hormone cortisol (Russell and Lightman, 2019). Chen et al.(Chen et

al., 2017) observed that Glucocorticoids (GCs) specifically repress the expression of *Bdnf*

isoforms IV (transcription from promoter of *Bdnf*-e4) and VI (transcription from promoter of *Bdnf*-

e6) by binding to the glucocorticoid responsive elements (GREs) in e4 and e6 promoter

sequences. While the effect of both stress and glucocorticoid supplementation on altering gut

motility in adult mice has been observed (Schneider et al., 2023), whether stress-associated GI

dysmotility is driven by a similar glucocorticoid-mediated repression of *Bdnf* in the ENS is not

known. This lack of understanding has been driven by a lack of clarity on the nature of BDNF and

TrkB-expressing cells in the gut wall, the nature of *Bdnf* isoform expression and their susceptibility

to glucocorticoid stimulation in the adult ENS, and whether stimulating TrkB signaling reverts the

effect of glucocorticoid-induced GI dysmotility.

To address these gaps in the field, here, we further our mechanistic understanding of stress-

associated GI dysmotility by using immunofluorescence, RNAScope, bulk transcriptomic, and

quantitative PCR-based assays to study the expression of BDNF and TrkB in the gut wall tissue

containing myenteric neurons. Further, we used restraint stress and a synthetic glucocorticoid

receptor agonist Dexamethasone to assess how stress and glucocorticoid receptor stimulation

influence BDNF levels to drive dysmotility. Finally, we test whether stimulating BDNF-TrkB

signaling promotes healthy GI motility in a mouse model of glucocorticoid-induced GI dysmotility.

Our results show that both BDNF and TrkB are expressed by adult enteric neurons, and that

stress-responsive isoforms of *Bdnf* represent the majority of all *Bdnf* isoforms in the post-natal

myenteric plexus tissue. We find that dexamethasone exposure causes a significant reduction in

BDNF protein levels, driven by a significant reduction in expression of the stress-responsive *Bdnf*

isoforms, and that dexamethasone-induced abnormalities in GI motility can be reversed by
stimulating TrkB signaling using a specific TrkB agonist HIOC.

Methods

<u>Human tissue procurement and immunohistochemistry:</u> Paraffin sections of the adult small
intestinal full-thickness gut from deidentified human tissues were obtained from the Department
of Pathology at Beth Israel Deaconess Medical Center, and the Institutional Review Board
approved using the deidentified human tissues. Antigen retrieval was performed on 5 um thick
sections at 97ºC for 40 minutes using citrate buffer at pH 6.0, followed by immunostaining with
anti-BDNF antibody (abcam, Cat. No. ab108319, dilution 1:500). The tissue sections were then
counterstained with DAB chromogen staining, mounted with Cytoseal, and imaged under 40X
brightfield. Microscopy was performed using the Nikon Eclipse Ni-U Upright microscope with 40x
Nikon Plan Fluor objective. Images were acquired using the Nikon DS-Fi3 camera and NIS-
Elements BR software (Version 5.20.01). During image acquisition, exposure time was adjusted
using the Color DS-Fi3 settings to obtain a clear definition of tissue structure. Images were
acquired in the TIFF format.

<u>Animals</u>: We used male and female wildtype C57BL/6J mice from the National Institute on Aging
colony (at the ages of 1, 6, and 17 months) for the bulk RNA sequencing experiment. For all other
experiments, we used adult male wildtype C57BL/6J mice (between the ages of 12 and 20 weeks)
from the National Institute on Aging colony. Mice were housed in a controlled environment under
a 12 h light/dark cycle at $22 \pm 2℃$, $55 \pm 5\%$ humidity with access to food and water ad libitum. All
animal procedures were carried out strictly under protocols approved by the Animal Care and Use
Committee of Johns Hopkins University and of Beth Israel Deaconess Medical Center (BIDMC)
in accordance with the guidelines provided by the National Institutes of Health.

<u>Bulk RNA sequencing (bulkRNA-seq) experiments:</u>

Tissue Isolation for bulkRNA-seq: Mice of three ages (1-month, 6-month, and 17-month) and both
sexes (n=3 per unique condition) were anesthetized with isoflurane and sacrificed by cervical
dislocation. For small intestinal tissue isolation, a laparotomy was performed, and the entire small
intestine was removed and flushed with ice-cold nuclease-free 1X PBS. The ileum, defined as the
distal third of the small intestine, was cut into 3 cm sections for peeling. Next, tissues were placed
over a sterile plastic rod and a superficial longitudinal incision was made along the serosal surface
and the longitudinal muscle containing myenteric plexus (LM-MP) was peeled off from the
underlying tissue using a wet sterile cotton swab. Each gut muscle strip was immediately flash

frozen in liquid nitrogen before storage at -80°C. The average time from sacrifice to flash freeze
was 10 minutes. Animals were processed in three batches, balanced across age/sex composition
and order of processing.

Library Prep & Sequencing: RNA isolation, library preparation, and sequencing were completed
at the JHU Single Cell and Transcriptomic Core. Samples with RIN >= 7.0 were used for library
preparation, with all samples being high-quality except one 17-month female (resulting n=2,
average RIN of 17 samples that passed this threshold > 9.0). Frozen tissue samples each in
1.5mL tubes were submerged in 375 uL of RLT buffer with β-mercaptoethanol. Tissue and buffer
were transferred to a ice-cold 2 mL Qiagen sample tube with a 5mm stainless steel bead and
lysed in a TissueLyzer at full speed for 3 minutes. RNA isolation was completed with the Qiagen
RNeasy Mini, Animal Tissue and Cells with DNA Digest protocol. cDNA libraries were prepared
with the TruSeq Stranded mRNA Library Prep with unique dual indexes. Paired-end (2x-50bp)
sequencing was completed on a NovaSeq 6000 system.

Preprocessing: Isoform-level transcript abundances were estimated by pseudoalignment via
Kallisto 'quant' (version 0.48.0) to the GENCODE vM27 reference genome assembly. Default
parameters were used, except the number of bootstraps was set to 100 to estimate uncertainty
("-b 100"). The median fragment length, as estimated by Kallisto, was 168.7 base pairs. Across
all sequenced samples, the median number of reads per sample was 46,756,241 (range: 34.6 M
to 58.2 M) and 94.2% of reads were successfully pseudoaligned to the reference.

Quality control & analysis: For quality control analyses, isoforms were collapsed to gene-level
and abundances were normalized by the "scaledTPM" option within tximport, and further analyzed
with DESeq2 (v1.30.1, R v4.0.2). Genes were removed from the analysis if they had fewer than
10 counts across all samples or were not detected in at least three samples. At the sample level,
PCA and Cook's distance were used to identify potential outliers. Both approaches identified one
17-month male sample as a source of outlier expression, and this sample also had the lowest
RIN (7.0). With this outlier sample removed, isoform-level abundances of the remaining 16
samples were analyzed with IsoformSwitchAnalyzeR (v2.1.2, R v4.2).

Restraint stress model: Adult male mice were divided into two cohorts, control and stressed. Mice
in stressed cohorts were restrained for 1 hour every day for 5 consecutive days and were then
released back into their cages. The timing of the restraint during the day was varied across the 5
days to reduce habituation. By contrast, the mice in the control group were handled similarly, but
were not restrained and were returned to the cage immediately after handling. The whole gut

transit time (WGTT) of the mice in response to treatment was assayed on the day after the last day of restraint.

Dexamethasone induced model of GI dysmotility: Adult male mice were divided into two cohorts, control and DEXA. Mice in the control group were treated with vehicle (10% DMSO in saline, intraperitoneal route) and those in the DEXA group were treated with dexamethasone (MedChemExpress, Cat. No. HY-14648; 5mg/kg in 10% DMSO/body weight, intraperitoneal route) group. Dexamethasone is light sensitive so was shielded from bright light, both in powder form and in solution. Mice were first housed in individual cages and after a habituation phase lasting 30min, they were treated with vehicle or dexamethasone, which were administered intraperitoneally using a sterile 1 ml insulin syringe. The mice were subjected to WGTT assays 30 minutes after the treatment.

Another 2 cohorts of mice were similarly used, wherein one the control cohort was dosed similarly with vehicle and the DEXA group was dosed similarly with dexamethasone. 4 hours after the treatment, the mice were sacrificed, and their small intestinal LM-MP tissues were isolated and immediately snap-frozen in liquid nitrogen.

Effect of TrkB agonist HIOC on dexamethasone-induced model of GI dysmotility: HIOC (N-[2-(5-hydroxy-1H-indol-3-yl)ethyl]-2-oxopiperidine-3-carboxamide) is a known specific agonist of TrkB. Adult male mice were divided into two cohorts, DEXA and DEXA+HIOC. Mice were first housed in individual cages and then those in the DEXA+HIOC group were treated with HIOC (MedChemExpress, Cat. No. HY-101446; 50 mg/kg in 10% DMSO/body weight, intraperitoneal route), while those in DEXA group were treated with Vehicle (10% DMSO in saline, intraperitoneal route). The mice were then released back to their individual cages for 30 minutes after which both groups were treated with DEXA (50 mg/kg in 10% DMSO/body weight, intraperitoneal route) and again released back to their individual cages for an additional 30 minutes. Treatment was administered intraperitoneally using a sterile 1 ml insulin syringe. The mice were subjected to whole gut transit time assays 30 minutes after the DEXA treatment.

Whole gut transit time analyses (WGTT): These experiments were started between the times of 8 and 9 AM. Mice were individually caged in plastic cages without bedding and were left undisturbed 30 minutes. Water was provided to the mice before and during the experiment *ad libitum*. All mice received oral gavage of 300 µl of 6% (w/v) carmine red (Sigma C1022) in 0.5% (w/v) methylcellulose (Sigma M0512) in sterile water. The oral gavage was performed such that the entirety of the dye suspension was delivered into the animal's stomach. The mice were then

left undisturbed in their individual cages for 70 minutes after which their cages were checked

every 15 minutes for the presence of red colored fecal pellets. The time post-gavage for every

mouse to produce a red colored fecal pellet was measured, and the difference between the

gavage time and red fecal pellet production time was established as the whole gut transit time for

that mouse. The experiment was terminated at 250 minutes post-gavage and the WGTT of any

mice that did not expel the red dye at the termination was marked at the value of 265 (i.e. 250 +

15) min. The mean difference in WGTT (in minutes) between cohorts was analyzed statistically.

<u>Mouse small intestine LM-MP tissue isolation for non-sequencing experiments:</u> Mice were

anesthetized with isoflurane and sacrificed by cervical dislocation. Mouse placed in dorsal

recumbency on the surgical surface, disinfected skin with 70% EtOH then opened the abdominal

cavity and collected the small intestine (SI) into a petri dish containing PBS with 1x Pen-Strep.

Sterile PBS solution flushed through the intestine using a 20ml syringe to remove fecal matter.

Entire small intestine cut into 2cm pieces into a sterile petri dish containing Opti-MEM medium

with 1X Pen-Strep. SI segments were placed over a sterile 1ml pipette and LM-MP tissue was

peeled off from the underlying tissue using a wet sterile cotton swab. Tissues isolated for qPCR-

based assessment of *Bdnf* levels were snap frozen immediately after isolation. Tissues isolated

for culture were placed in a fresh sterile ice-cold Opti-MEM medium for further use. Tissues

isolated for RNAScope analyses were flattened and cryo-preserved in optimal cutting temperature

(OCT) compound (TissueTEK) on dry ice.

<u>*In Vitro* LM-MP tissue culture and treatments:</u> Isolated LM-MP tissues were placed in a sterile 24

well dish containing Stem cell media (SCM, made up of Neurobasal medium containing L-

glutamine, B27, and Pen-Strep (all Invitrogen) and Bovine Serum Albumin (Sigma)(Kulkarni et al.,

2017)) and treated with Vehicle (10% DMSO in saline) or Dexamethasone (1µM in 10% DMSO)

for 4 hrs. After the incubation, tissues were snap frozen in liquid nitrogen & stored at -80°C for

further experimental analysis.

<u>RNA isolation and quantitative real-time PCR:</u> Total RNA was extracted from frozen LM-MP

tissues with Direct-zol RNA miniprep kit (Zymo research) and 1 µg RNA was converted to cDNA

using SuperScript III (Therno, Cat.No.11752050) in a 20µl reaction. Quantitative real-time PCR

was performed on a QuantStudio3 real time PCR system (Life Technologies, USA) with TaqMan

Fast advanced qPCR Master Mix (Cat. No. 4444557, Thermo Scientific, USA) using gene specific

TaqMan assay probes. Mouse HPRT served as a housekeeping gene for normalization. Primer

and probe information is provided in Table 1. 20µl qRT-PCR reactions were incubated at 95 ℃ for

10 min, followed by 40 cycles at 95 ℃ for 10 s, 60℃ for 10 s, and 72 ℃ for 40 s. Relative fold

changes of genes between treatment groups were calculated using the $2^{-\Delta\Delta Ct}$ method.

Protein isolation and ELISA: Proteins from frozen LM-MP were extracted using a cell lysis buffer

containing RIPA buffer (150 mM NaCl, 50 mM Tris-HCl pH 8.0, 1% NP-40, 0.1% sodium

deoxycholate and 0.1% SDS, adjusted with distilled water). Succinctly, for every LM-MP peel, we

add 20 μl of 1X RIPA+++ buffer which contains RIPA with Halt Protease Inhibitor (Invitrogen, Cat.

No. 78438) at a conc. of 5-10X and Phosphatase Inhibitors 2 and 3 (Sigma Aldrich, Cat. Nos.

P5726 and P0044) at a concentration of 2-3% to locking sterile Eppendorf tubes and then add 6-

8 sterile autoclaved silicon beads. Tissue was homogenized using bead beater in cold room at 7-

8 speed setting for 5 mins, after which the tubes were shaken at 200-250 rpm for 30-40 mins in

cold room, centrifuged at over 12,000rpm for 20 mins at 4ºC. Supernatant thus generated was

collected to be used for ELISA. The levels of BDNF in the LM-MP tissues cultured with and without

dexamethasone were measured using the BDNF DuoSet kit (R&D Systems; DY248). In brief,

sterile and clean ELISA-grade 96-well (Corning) were coated with 100 μl of diluted capture

antibody/well and incubated overnight at room temperature. On the second day, the plates were

washed and blocked with reagent diluent (300 μl for 1 hour at room temperature and 100 μl of

protein extract, standards in reagent diluent, or appropriate diluent were added to the prepared

wells and incubated for 2 hours at room temperature. Following this, 100 μl each of detection

antibody, working dilution of streptavidin-HRP, substrate solution, and 50 μl of stop solution were

sequentially added to each well. The optical density of each well was measured using a microplate

reader set to 540 nm. The BDNF concentration was expressed in picograms of BDNF per

microgram of protein.

RNAScope: 15 μm thick sections of adult murine small intestinal LM-MP tissues that were fresh

frozen in OCT were processed for RNAscope® 2.0 assay for labeling and detecting *Bdnf, Ntrk2*

(TrkB) and pan-neuronal *Tubb3* transcripts, which was performed using manufacturer's

instructions(Wang et al., 2012). The information on the probes used is provided in Table 1.

RNAscope® labeling was provided by the Neurobiology Imaging Facility (NIF) at Harvard Medical

School, Boston, MA. The tissue sections after labeling were labeled with DAPI (nuclear dye) and

mounted with Prolong Gold Anti-fade mountant (Invitrogen) and imaged under Zeiss 880 Confocal

microscope using 40X water immersion objective. The images were analyzed with Fiji (ImageJ,

NIH).

Results

Restraint stress and glucocorticoid receptor agonism in adult mice slows down whole gut motility. The Thaiss group recently studied the effect of restraint stress on GI motility and found that this physiological stress significantly slows down whole GI motility (Schneider et al., 2023). We recreated this model and found concordance with these results, as restraint stress applied in our adult male C57BL/6 mice also caused a significant slowing of whole gut motility, as assayed by the carmine-red dye method (n = 5/cohort; mean ± S.E. of WGTT (in min): Control: 93.0 ± 5.612; Stress: 123.0 ± 8.746, p = 0.02, Students' t-test; **Fig 1**). Since stress manifests its effects through the HPA axis to increase glucocorticoid levels resulting in increased glucocorticoid receptor (GR) agonism, we tested whether a synthetic GR agonist dexamethasone (Dexa) similarly causes a similar slowdown in whole GI motility. Expectedly, mice dosed with Dexa showed a significant delay in their whole GI motility, when compared to vehicle-treated Control mice (n = 5/cohort; mean ± S.E. of WGTT (in min): Control: 145.0 ± 20.12; Dexa: 214.0 ± 17.49, p = 0.03, Students' t-test; **Fig 2**).

Stress-responsive isoform *VI* is the dominant *Bdnf* isoform expressed in the murine longitudinal muscle - myenteric plexus tissue. We first characterized the expression profile of *Bdnf* in the motility-regulating myenteric plexus tissue of post-natal gut across three ages and in the two sexes. We isolated longitudinal muscle and myenteric plexus (LM-MP) tissue from the ileum of juvenile (1 month), adult (6 month), and aging (17 month) male and female mice (n = 3/sex for 1-month and 6-month-old mice, n = 3 males and 2 females for 17-month-old mice) and performed bulk RNA sequencing. First, we confirmed that *Bdnf* transcripts are detected in the ileal tissues of male and female mice at all ages. We next analyzed whether the stress-responsive *Bdnf IV* (from e4) and *Bdnf VI* (from e6) are expressed in the ileal LM-MP tissue across ages and in the two sexes. We found that at all profiled ages, *Bdnf VI* is the dominant isoform, making up 85.3% (95% CI [81.5%, 89.0%]) of all detected *Bdnf* transcripts (**Fig 3**). Similarly, *Bdnf V* (from e5) expression is detected at all ages and in both male and female tissues (percent representation of *Bdnf V* at 1-month: 9.7%, 6-month: 9.4%, and 17-month: 6.2%). By contrast, the other stress-responsive isoform *Bdnf IV* is detected at 1-month and 6-months of age in both male and female ileal LM-MP (percent representation of *Bdnf IV* at 1-month: 5.3%, and 6-month: 2.3%), but it is not detected in the aging ileal LM-MP – suggesting that the expression of this isoform is reduced or lost with aging. On the other hand, the expression of *Bdnf II* (e2) is not detected at 1-month of

age but is detected at 6-months and 17-months of age (percent representation of *Bdnf II* at 6-
month: 3.3%, and 17-month: 5.1%). 6-months age is the only age we queried where we detected
the expression of *Bdnf-III* in the murine ileal LM-MP (representing 2.9% of all *Bdnf* transcripts at
this age) (**Extended Fig 3-1**). These data show that stress-responsive *Bdnf* isoforms (*IV* and *VI*)
represent about or more than 85% of all *Bdnf* transcripts at any age in the murine ileal myenteric
plexus.

BDNF and TrkB are expressed by myenteric neurons. Prior data have used
immunohistochemical and conditional transgenic mice to establish the expression of BDNF in
myenteric ganglia in the post-natal gut (Kovler et al., 2021; Singh et al., 2022). The secreted
nature of BDNF and the non-inducible conditional animals used for these experiments have thus
left open the question about the exact nature of myenteric cells that express this neurotrophin. By
contrast, using a reporter transgenic mouse, have previously shown that TrkB is expressed by
myenteric neurons in the adult gut (Nestor-Kalinoski et al., 2022). Here, we use RNAScope to test
the expression of transcripts of *Bdnf* and *Ntrk2* (TrkB gene) in the adult murine myenteric plexus.
By using RNAScope probes for *Bdnf, Ntrk2*, and the pan-neuronally expressed gene *Tubb3* that
were hybridized with fresh-frozen sections of the small intestinal LM-MP tissues, we observed
that *Bdnf* and *Ntrk2* transcripts were detected in *Tubb3*$^+$ enteric neurons (**Fig 4A**). This data shows
that *Bdnf* and *Ntrk2* (TrkB) are neuronally expressed genes in the myenteric plexus. We next
performed immunohistochemistry on formalin fixed paraffin embedded (FFPE) tissue sections
from the adult small intestine of human patients without any known motility disorder and again
found that while BDNF protein was present in the myenteric ganglia, its abundance was
significantly higher in neuron-like cells. This again suggests that BDNF is a neuronally expressed
protein in the adult myenteric ganglia (**Fig 4B**).

Dexamethasone exposure significantly downregulates myenteric BDNF expression. Since
dexamethasone (Dexa), a synthetic glucocorticoid receptor (GR) agonist which mimics the effect
of stress-induced increase in cortisol (Dubashynskaya et al., 2021), significantly slows down GI
motility (**Fig 2**), we next tested whether exposure to Dexa causes a significant reduction in the
expression of stress-responsive *Bdnf IV* and *VI* isoforms. In small intestinal LM-MP of adult male
mice treated with Dexa or vehicle, we assessed the abundance of these *Bdnf* at 4 hours post
treatment, a timepoint aligning with the duration our WGTT experiments. By performing
quantitative real time PCR (qRT-PCR) with isoform-specific TaqMan probes, we found that
expression of both *Bdnf IV* and *VI* were significantly reduced in small intestinal LM-MP of mice
treated with Dexa when compared to vehicle treated control (n = 3/cohort; mean ± S.E. fold

change of *Bdnf IV*: Control: 1.011 ± 0.104; Dexa: 0.536 ± 0.087, p = 0.025; mean ± S.E. fold

change of *Bdnf VI*: Control: 1.012 ± 0.110; Dexa: 0.422 ± 0.042, p = 0.007; Students' t-test; **Fig**

5A).

Bdnf is an immediate early gene whose expression may be triggered by tissue damage (Ballarín
et al., 1991; Hughes et al., 1993). To ensure that our results are not affected by the dissection of
tissues immediately before RNA isolation, we cultured peeled adult small intestinal LM-MP tissues
from male mice in SCM with vehicle (DMSO) or Dex (1 μM) for 4 hours, and again performed
qRT-PCR with *Bdnf* isoform-specific probes. Again, we found that exposure to Dex significantly
reduced the expression of both stress responsive isoforms *Bdnf IV* and *Bdnf VI* (n = 3/cohort;
mean ± S.E. fold change of *Bdnf IV*: Control: 1.002 ± 0.047; Dexa: 0.510 ± 0.099, p = 0.030;

mean ± S.E. fold change of *Bdnf VI*: Control: 1.018 ± 0.140; Dexa: 0.520 ± 0.079, p = 0.028;

Students' t-test; **Fig 5B**).

Next, we repeated these experiments and used the adult murine small intestinal LM-MP tissues
cultured with and without Dex for assessing whether exposure to Dex caused change in BDNF
protein levels in tissue. By performing an ELISA, we found that LM-MP cultured with Dex for 4
hours showed significant reduction in the levels of BDNF proteins when compared to LM-MP
cultured with vehicle (n = 3/cohort; mean ± S.E. BDNF levels (in pg/g of tissue): Control: 473.0 ±

45.32; Dexa: 85.5 ± 32.63, p = 0.002; Students' t-test; **Fig 5C**).

Targeted activation of TrkB restores motility in Dex-induced delayed transit models. Our
observations that reduced *Bdnf* expression is associated with slowed whole gut motility in Dexa-
treated mice suggests that the effect of Dexa on whole gut motility may be mediated by a reduced
BDNF–TrkB signaling. This would suggest that increasing TrkB signaling would improve gut
motility of Dexa-treated mice. To test this hypothesis, we studied whether a synthetic and specific
agonist of TrkB can restore whole gut motility of Dexa-treated mice. In rodent models, the
serotonin-derived compound HIOC has been demonstrated to be a specific agonist of TrkB
(Dhakal et al., 2021). We found that cohorts of mice that were pre-treated with HIOC and then
treated with Dexa had significantly lower whole gut transit times on average than Dexa-treated
mice that were not treated with HIOC (n = 9/cohort; mean ± S.E. of WGTT (in min): Dexa: 228.3

± 7.12; Dexa + HIOC: 150.0 ± 21.94, p = 0.003, Students' t-test; **Fig 5D**). Of note, we find higher

variability in the whole gut transit time in the dual-agonist (Dexa + HIOC) cohort compared to

Dexa cohort.

Discussion

Our study establishes that altered BDNF–TrkB signaling in the adult ENS is an important

mechanism through which the stress-induced glucocorticoid pathway manifests GI dysmotility.

Our study is the first to interrogate the nature of the *Bdnf* isoforms present in the post-natal gut of

juvenile, adult, and aging mice, and establishes that at all ages, the stress-responsive (also the

glucocorticoid-responsive) isoform *Bdnf VI* is the dominant *Bdnf* isoform expressed in the gut wall.

Further, by demonstrating the localization of *Bdnf* and *Ntrk2* transcripts in *Tubb3*-expressing

myenteric neurons in the adult murine gut wall, we show that the BDNF–TrkB crosstalk is neuronal

in nature. Since stress downregulates the expression of *Bdnf-IV* and *Bdnf-VI* through a

glucocorticoid-mediated mechanism, we tested and found that glucocorticoid receptor (GR)

agonism (using a synthetic GR agonist dexamethasone) significantly downregulated BDNF

expression in the adult LM-MP, and that this was associated with a significant slowdown of

intestinal motility. Finally, we established the involvement of the BDNF–TrkB signaling in

glucocorticoid-mediated GI dysmotility by showing that TrkB agonism significantly improves GI

motility in a mouse model of dexamethasone-induced GI dysmotility. These results together show

that GR agonism, an important downstream effect of physiological stress, significantly reduces

the expression of *Bdnf-VI* and *IV* isoforms in a subpopulation of myenteric neurons, which results

in reduced TrkB signaling in another subpopulation of myenteric neurons to cause GI dysmotility.

Promoting TrkB signaling in myenteric neurons thus holds the key to improving GI motility in

stress-induced GI dysmotility conditions.

Prior studies have shown that stress and the stress hormone corticotrophin-releasing factor (CRF)

in the central nervous system (CNS) induce a slowdown of gastric, small intestinal, and whole gut

transit (Zhao et al., 2021; Lobo et al., 2023). Through stimulation of the HPA axis, stress causes

increased release of the glucocorticoid cortisol, which has been previously simulated by using the

glucocorticoid receptor (GR) agonist dexamethasone. The Thaiss lab demonstrated that GR

(*Nr3c1*) is expressed by enteric neurons, and that both stress and dexamethasone similarly slow

GI motility (Schneider et al., 2023). Using dexamethasone to simulate the glucocorticoid effect of

physiological stress, we identified glucocorticoid-mediated reduction in BDNF–TrkB signaling as
a key pathway driving stress-associated GI dysmotility.

Alterations and mutations in *Bdnf* and *Ntrk2* have been associated with GI dysmotility (Bonfiglio
et al., 2021; Weaver et al., 2022; Linsalata et al., 2023), and exogenous supplementation of BDNF
has been observed to have a prokinetic effect in patients (Coulie et al., 2000; Chen et al., 2014).
However, the cellular and molecular mechanisms that regulate BDNF levels in these diseases of
gut-brain interactions (DGBI) that are often associated with aberrant stress responses were
unknown. Our study, which identifies the neuronal nature of BDNF and TrkB and that stress and
glucocorticoid-responsive *Bdnf VI* isoform is the most abundant isoform across ages in the post-
natal ENS, is the first to establish the mechanism through which this clinically relevant
biomolecule is altered in the gut. Previously, the Belgian group (Boesmans et al., 2008) showed
that BDNF amplifies neuronal responsiveness of enteric neurons to stimuli, suggesting that this
neurotrophin regulates the '*gain*' of TrkB-expressing neurons. These observations, along with our
and others' observation of the neuronal nature of TrkB (Boesmans et al., 2008; Nestor-Kalinoski
et al., 2022), and our data showing that increasing TrkB signaling in dexamethasone-treated mice
improves GI motility suggests that stress-mediated downregulation of BDNF reduces the
sensitivity or responsiveness of TrkB-expressing myenteric neurons to cause dysmotility.
Together, this identifies that TrkB is an important therapeutic target for the amelioration of GI
dysmotility in DGBI patients.

It is important to note that while stress-mediated change in glucocorticoid signaling is an important
mechanism through which stress manifests dysfunction, stress also drives changes in other
hormones in the viscera, which include changes in adrenaline and in the peripheral release of
corticotrophin releasing factor (CRF) from mast cells (Kempuraj et al., 2017; Pace and Myers,
2023). It is currently unclear how these alternate stress-mediated pathways affect the enteric
BDNF–TrkB signaling, and future studies will focus on elucidating this biology further. In addition,
our study also identifies important age-associated changes in abundance of *Bdnf* isoforms other
than *Bdnf VI*, and future studies will test whether the glucocorticoid-mediated changes in the
expression of *Bdnf VI* and other isoforms occurs differentially in an age-associated manner.

Thus, by establishing the mechanism through which stress-associated changes in glucocorticoid
signaling alters the BDNF–TrkB crosstalk in the adult enteric nervous system, our study provides
an important pathway through which stress causes GI dysmotility and provides a putative
therapeutic target which can be used for improving GI motility in many DGBI patients.

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 Figures:

Figure 1. Restraint stress significantly increases whole gut transit time in adult male mice.
Graphical representation of the mean ± standard error of the whole gut transit times (assayed
using the carmine-red dye method) of two cohorts of mice, where the mice in the 'Stress' cohort
were restrained for an hour every day for 5 days, and the 'Control' cohort mice were handled
similarly but not restrained. Mice in the Stress cohort showed significantly longer whole gut transit
times on average than mice in the control cohort. $*p < 0.05$. Student's t-test.

Figure 2. Dexamethasone treatment significantly increases whole gut transit time in adult
male mice. Graphical representation of the mean ± standard error of the whole gut transit times
(assayed using the carmine-red dye method) of two cohorts of mice, where the mice in the 'Dexa'
cohort were dosed once with dexamethasone (5mg/Kg body weight), and the 'Control' cohort mice
were dosed with Vehicle (10% DMSO in Saline). Mice in the Dexa cohort showed significantly
longer whole gut transit times on average than mice in the control cohort. $*p < 0.05$. Student's t-
test.

Figure 3. *Bdnf VI* **is the dominant** *Bdnf* **isoform in the ileal LM-MP at all post-natal ages.**
Graphical representation of the proportions of various *Bdnf* isoforms whose transcripts were
detected in the murine ileal LM-MP layer in two different sexes across three different ages of 1-
month (juvenile), 6-month (mature adult), and 17-month (aging). This representation shows that
stress-responsive *Bdnf VI* is the dominant isoform found in the murine ileal LM-MP at all ages,
with its proportions accounting for >80% of all isoforms. The isoform *Bdnf V* is the second most
represented isoform at all ages in the murine LM-MP layer but little is known about the
mechanisms that regulate its expression. In addition to *Bdnf VI, Bdnf IV* is another stress-
responsive isoform detected in the juvenile and adult mice but is not detected in aging murine
ileal LM-MP. In contrast to *Bdnf IV, Bdnf II* isoform is detected in the adult and aging ileal tissues,
but not in the juvenile tissues. Finally, *Bdnf III* isoform is detected only in the adult ileal LM-MP
and not at the other ages.

Extended Figure 3 – 1: **Gene and isoform expression of** *Bdnf* **by age**. (A) *Bdnf* expression is
detected in 1-month, 6-month, and 17-month-old mice. Isoform-level abundance estimates were
collapsed to gene-level after inter-library normalization with edgeR (TMM method). Across all
ages, average expression of *Bdnf* is 0.38 ± 0.02 TPM. Independently, gene-level differential
expression across age was conducted with DESeq2 (counts ~ age + RIN + batch, Wald test) and
Bdnf was not identified as differential by age across any comparison. (B) Abundance estimates
of individual *Bdnf* isoforms identify the e6 isoform (ENSMUST00000111045) as the majority

isoform in each condition. The average expression of this isoform is 0.32 ± 0.08 TPM. Other lowly

detected isoforms include e5 (ENSMUST00000176893), e4 (ENSMUST00000111050), e3

(ENSMUST00000111046), and e2 (ENSMUST00000111047), while remaining isoforms were not

detected. Differential isoform usage by age was tested via the DEXSeq wrapper within

IsoformSwitchAnalyzeR (Likelihood ratio test, full model: ~ sample + exon + age:exon, reduced

model: ~ sample + exon). No *Bdnf* isoforms were identified as having significant differential usage

by age. (C) Isoform level expression was transformed to isoform fraction (IF) measures by age

(for each age, sum of IF's is 1).

Figure 4. *Bdnf* is a neuronally expressed gene in the adult murine small intestinal ENS.

Transcriptomic and proteomic evidence of neuronal expression of BDNF. (A) Confocal microscopy

image of a 14 µm thick section of adult murine ileal LM-MP tissue which was probed with

RNAScope-probes against all *Bdnf* (green)*, Ntrk2* (red) transcripts and against the pan-neuronal

Tubb3 (grey) transcript show that off (i, ii) all the *Tubb3*-expressing myenteric neurons, distinct

neurons express *Bdnf* (yellow arrow, (i, iii)) and *Ntrk2* (TrkB, red arrow, (i, iv)). That *Bdnf* and *Ntrk2*

expressing neurons are distinct neurons can also be observed in (v) an image representation

where the dominant *Tubb3* transcripts are not visualized. No other cellular subset inside or outside

the ganglia shows expression of *Bdnf* or *Ntrk2* transcripts providing evidence that BDNF and TrkB

in the adult small intestine are neuronally restricted. Nuclei are labeled with DAPI (blue). Scale

bar represents 10 µm. (B) Immunostaining a human small intestinal tissue section with antibodies

against BDNF also shows that while the secreted form of BDNF is present inside and outside of

the myenteric ganglia, the highly enriched presence of BDNF in the cytoplasm of a myenteric

neuron (black arrow) suggests its likely source of expression. Scale bar represents 100 µm.

Figure 5. Dexamethasone causes a significant reduction in the abundance of enteric BDNF

to drive GI dysmotility. (A) Adult male mice dosed with dexamethasone (Dexa) and sacrificed 4

hours later showed a significant down regulation in the expression of stress and glucocorticoid-

responsive *Bdnf IV* and *Bdnf VI* transcripts in their small intestinal LM-MP tissues, when compared

to age- and sex-matched mice that were dosed with vehicle. *$p < 0.05$, **$p < 0.01$, Students' t-

test. (B) Small intestinal LM-MP tissues from adult male mice that were cultured with Dexa for 4

hours showed a significant down regulation in the expression of stress and glucocorticoid-

responsive *Bdnf IV* and *Bdnf VI* transcripts in their small intestinal LM-MP tissues, when compared

to tissues from age- and sex-matched mice that were cultured with vehicle. *$p < 0.05$, Students'

t-test. (C) Small intestinal LM-MP tissues from adult male mice that were cultured with Dexa for 4

hours showed a significant reduction in the abundance of BDNF protein as assessed by ELISA,

when compared to tissues from age- and sex-matched mice that were cultured with vehicle. **p

< 0.01, Students' t-test. (D) Dexa-treated adult male mice that were also dosed with the synthetic

and specific agonist of TrkB HIOS showed significant reduction in their whole gut transit time of

orally gavaged carmine-red dye, and hence improved gut motility, when compared to age- and

sex-matched mice that were dosed only with Dexa.

Table 1

Resource	Vendor	Cat. No.
BDNF antibody	Abcam	Ab108319
Bdnf RNAScope assay	RNAScope, ACD-Bio	457761
Ntrk2 RNAScope assay	RNAScope, ACD-Bio	423611-C2
Tubb3 RNAScope assay	RNAScope, ACD-Bio	423391-C3
TaqMan Primers & Probes		
Target	**Sequence/Cat. No.**	**Company**
Bdnf IV Fwd	CGTTTACTTCTTTCATGGGCG	IDT
Bdnf IV Rev	AGCTGCCTTGATGTTTACTTTG	IDT
Bdnf IV probe	56-FAM/AGGATGGTC/ZEN/ATCACTCTTCTCACCTGG/3IABkFQ	IDT
Bdnf VI Fwd	ATGCAACCGAAGTATGAAATAACC	IDT
Bdnf VI Rev	GGACCAGAAGCGTGACAAC	IDT
Bdnf VI probe	56-FAM/ACCAGGTGA/ZEN/GAAGAGTGATGACCATCC/3IBkFQ	IDT
Hprt TaqMan assay	Mm00446966_m1	Invitrogen

References:

Aid T, Kazantseva A, Piirsoo M, Palm K, Timmusk T (2007) Mouse and rat BDNF gene structure
and expression revisited. J Neurosci Res 85:525-535.
Ballarín M, Ernfors P, Lindefors N, Persson H (1991) Hippocampal damage and kainic acid
injection induce a rapid increase in mRNA for BDNF and NGF in the rat brain.
Experimental Neurology 114:35-43.
Begni V, Riva Marco A, Cattaneo A (2016) Cellular and molecular mechanisms of the brain-
derived neurotrophic factor in physiological and pathological conditions. Clinical Science
131:123-138.
Boesmans W, Gomes P, Janssens J, Tack J, Vanden Berghe P (2008) Brain-derived neurotrophic
factor amplifies neurotransmitter responses and promotes synaptic communication in
the enteric nervous system. Gut 57:314-322.
Bonfiglio F et al. (2021) GWAS of stool frequency provides insights into gastrointestinal motility
and irritable bowel syndrome. Cell Genom 1:None.
Chalazonitis A, Li Z, Pham TD, Chen J, Rao M, Lindholm P, Saarma M, Lindahl M, Gershon MD
(2020) Cerebral dopamine neurotrophic factor is essential for enteric neuronal
development, maintenance, and regulation of gastrointestinal transit. J Comp Neurol
528:2420-2444.
Chen F, Yu Y, Wang P, Dong Y, Wang T, Zuo X, Li Y (2014) Brain-derived neurotrophic factor
accelerates gut motility in slow-transit constipation. Acta Physiol (Oxf) 212:226-238.
Chen FX, Yu YB, Yuan XM, Zuo XL, Li YQ (2012) Brain-derived neurotrophic factor enhances the
contraction of intestinal muscle strips induced by SP and CGRP in mice. Regul Pept
178:86-94.
Chen H, Lombes M, Le Menuet D (2017) Glucocorticoid receptor represses brain-derived
neurotrophic factor expression in neuron-like cells. Mol Brain 10:12.
Coulie B, Szarka LA, Camilleri M, Burton DD, McKinzie S, Stambler N, Cedarbaum JM (2000)
Recombinant human neurotrophic factors accelerate colonic transit and relieve
constipation in humans. Gastroenterology 119:41-50.
Dhakal S, He L, Lyuboslavsky P, Sidhu C, Chrenek MA, Sellers JT, Boatright JH, Geisert EE,
Setterholm NA, McDonald FE, Iuvone PM (2021) A Tropomycin-Related Kinase B
Receptor Activator for the Management of Ocular Blast-Induced Vision Loss. J
Neurotrauma 38:2896-2906.
Dubashynskaya NV, Bokatyi AN, Skorik YA (2021) Dexamethasone Conjugates: Synthetic
Approaches and Medical Prospects. Biomedicines 9.
Hill JL, Martinowich K (2016) Activity-dependent signaling: influence on plasticity in circuits
controlling fear-related behavior. Curr Opin Neurobiol 36:59-65.
Hong EJ, McCord AE, Greenberg ME (2008) A biological function for the neuronal activity-
dependent component of Bdnf transcription in the development of cortical inhibition.
Neuron 60:610-624.
Hughes P, Beilharz E, Gluckman P, Dragunow M (1993) Brain-derived neurotrophic factor is
induced as an immediate early gene following N-methyl-d-aspartate receptor activation.
Neuroscience 57:319-328.

Kempuraj D, Selvakumar GP, Thangavel R, Ahmed ME, Zaheer S, Raikwar SP, Iyer SS, Bhagavan SM, Beladakere-Ramaswamy S, Zaheer A (2017) Mast Cell Activation in Brain Injury, Stress, and Post-traumatic Stress Disorder and Alzheimer's Disease Pathogenesis. Front Neurosci 11:703.

Konturek TJ, Martinez C, Niesler B, van der Voort I, Mönnikes H, Stengel A, Goebel-Stengel M (2020) The Role of Brain-Derived Neurotrophic Factor in Irritable Bowel Syndrome. Front Psychiatry 11:531385.

Kovler ML, Gonzalez Salazar AJ, Fulton WB, Lu P, Yamaguchi Y, Zhou Q, Sampah M, Ishiyama A, Prindle T, Jr., Wang S, Jia H, Wipf P, Sodhi CP, Hackam DJ (2021) Toll-like receptor 4-mediated enteric glia loss is critical for the development of necrotizing enterocolitis. Sci Transl Med 13:eabg3459.

Kulkarni S et al. (2017) Adult enteric nervous system in health is maintained by a dynamic balance between neuronal apoptosis and neurogenesis. Proc Natl Acad Sci U S A 114:E3709-e3718.

Leigh S-J, Uhlig F, Wilmes L, Sanchez-Diaz P, Gheorghe CE, Goodson MS, Kelley-Loughnane N, Hyland NP, Cryan JF, Clarke G (2023) The impact of acute and chronic stress on gastrointestinal physiology and function: a microbiota–gut–brain axis perspective. The Journal of Physiology 601:4491-4538.

Linsalata M, Prospero L, Riezzo G, Orlando A, D'Attoma B, Ignazzi A, Russo F (2023) Somatization is associated with altered serum levels of vitamin D, serotonin, and brain-derived neurotrophic factor in patients with predominant diarrhea irritable bowel syndrome. Neurogastroenterol Motil 35:e14512.

Linz R, Puhlmann LMC, Apostolakou F, Mantzou E, Papassotiriou I, Chrousos GP, Engert V, Singer T (2019) Acute psychosocial stress increases serum BDNF levels: an antagonistic relation to cortisol but no group differences after mental training. Neuropsychopharmacology 44:1797-1804.

Liu S (2018) Neurotrophic factors in enteric physiology and pathophysiology. Neurogastroenterol Motil 30:e13446.

Lobo B, Tramullas M, Finger BC, Lomasney KW, Beltran C, Clarke G, Santos J, Hyland NP, Dinan TG, Cryan JF (2023) The Stressed Gut: Region-specific Immune and Neuroplasticity Changes in Response to Chronic Psychosocial Stress. J Neurogastroenterol Motil 29:72-84.

Martinowich K, Manji H, Lu B (2007) New insights into BDNF function in depression and anxiety. Nat Neurosci 10:1089-1093.

Murakami S, Imbe H, Morikawa Y, Kubo C, Senba E (2005) Chronic stress, as well as acute stress, reduces BDNF mRNA expression in the rat hippocampus but less robustly. Neurosci Res 53:129-139.

Nestor-Kalinoski A, Smith-Edwards KM, Meerschaert K, Margiotta JF, Rajwa B, Davis BM, Howard MJ (2022) Unique Neural Circuit Connectivity of Mouse Proximal, Middle, and Distal Colon Defines Regional Colonic Motor Patterns. Cell Mol Gastroenterol Hepatol 13:309-337.e303.

Pace SA, Myers B (2023) Hindbrain Adrenergic/Noradrenergic Control of Integrated Endocrine and Autonomic Stress Responses. Endocrinology 165.

Pruunsild P, Sepp M, Orav E, Koppel I, Timmusk T (2011) Identification of cis-elements and
transcription factors regulating neuronal activity-dependent transcription of human
BDNF gene. J Neurosci 31:3295-3308.
Qin HY, Cheng CW, Tang XD, Bian ZX (2014) Impact of psychological stress on irritable bowel
syndrome. World J Gastroenterol 20:14126-14131.
Russell G, Lightman S (2019) The human stress response. Nature Reviews Endocrinology 15:525-
534.
Schneider KM et al. (2023) The enteric nervous system relays psychological stress to intestinal
inflammation. Cell 186:2823-2838.e2820.
Sharkey KA, Mawe GM (2023) The enteric nervous system. Physiol Rev 103:1487-1564.
Singh A, Singh J, Rattan S (2022) Evidence for the presence and release of BDNF in the neuronal
and non-neuronal structures of the internal anal sphincter. Neurogastroenterology &
Motility 34:e14099.
Singh A, Mohanty I, Singh J, Rattan S (2020) BDNF augments rat internal anal sphincter smooth
muscle tone via RhoA/ROCK signaling and nonadrenergic noncholinergic relaxation via
increased NO release. Am J Physiol Gastrointest Liver Physiol 318:G23-g33.
Sperber AD et al. (2021) Worldwide Prevalence and Burden of Functional Gastrointestinal
Disorders, Results of Rome Foundation Global Study. Gastroenterology 160:99-114.e113.
Tsankova NM, Berton O, Renthal W, Kumar A, Neve RL, Nestler EJ (2006) Sustained hippocampal
chromatin regulation in a mouse model of depression and antidepressant action. Nat
Neurosci 9:519-525.
Wang F, Flanagan J, Su N, Wang LC, Bui S, Nielson A, Wu X, Vo HT, Ma XJ, Luo Y (2012)
RNAscope: a novel in situ RNA analysis platform for formalin-fixed, paraffin-embedded
tissues. J Mol Diagn 14:22-29.
Weaver KR, Mustapic M, Kapogiannis D, Henderson WA (2022) Neuronal-enriched extracellular
vesicles in individuals with IBS: A pilot study of COMT and BDNF. Neurogastroenterol
Motil 34:e14257.
Wood JD (2016) Enteric Nervous System: Neuropathic Gastrointestinal Motility. Digestive
Diseases and Sciences 61:1803-1816.
Zhang Y, Bi YX, Chen J, Li S, Wu XX, Zhang L, Lin ZJ, Han S, Ding SZ (2021) Association of
Peroxiredoxin 1 and brain-derived neurotrophic factor serum levels with depression and
anxiety symptoms in patients with irritable bowel syndrome. Gen Hosp Psychiatry 68:59-
64.
Zhao Y-X, Cui C-X, Gao J-H, Liu J, Liu Q, Lu F-Y, Xin J-J, Yu X-C, Zhu B (2021) Electroacupuncture
ameliorates corticotrophin-releasing factor-induced jejunal dysmotility in a rat model of
stress. Acupuncture in Medicine 39:135-145.
Zheng Z, Liu Y, Mu R, Guo X, Feng Y, Guo C, Yang L, Qiu W, Zhang Q, Yang W, Dong Z, Qiu S, Dong
Y, Cui Y (2024) A small population of stress-responsive neurons in the hypothalamus-
habenula circuit mediates development of depression-like behavior in mice. Neuron.

month   6 month   17 month

AGE

A

B