FGF overactivation underlies reduced neurogenesis in cerebellar organoid models of neurodevelopmental ciliopathy

Ludovica Brunetti[1,2,*], Antonia Wiegering[1,2], Isabelle Anselme[1,2], Lidia Pollara[3,4], Martin Catala[1,2], Christophe Antoniewski[2], Enza Maria Valente[3,4], Sylvie Schneider-Maunoury[1,2,#,*], Christine Vesque[1,2,#,*]

1. Sorbonne Université, CNRS, Inserm, Development, Adaptation and Aging, Dev2A, F-75005 Paris, France
2. Sorbonne Université, CNRS, Inserm, Institut de Biologie Paris Seine, IBPS, F-75005 Paris, France
3. Department of Molecular Medicine, University of Pavia, Pavia, Italy
4. Neurogenetics Research Center, IRCCS Mondino Foundation, Pavia, Italy

# These authors jointly supervised this work
* co-corresponding authors

ABSTRACT

Cerebellar hypoplasia and dysplasia are hallmark features of neurodevelopmental ciliopathies

such as Joubert syndrome. These disorders are caused by biallelic mutations in one of over 40

genes regulating the function of the primary cilium, a near-ubiquitous antenna-like organelle

involved in signal reception and transduction. To date, the pathogenetic mechanisms linking

ciliary gene dysfunction to Joubert syndrome neurodevelopmental defects are poorly

understood. In this study, we generate cerebellar organoids from human induced pluripotent

stem cells carrying either null mutations or patient-derived variants in *RPGRIP1L*, a Joubert

syndrome causal gene encoding a scaffold protein crucial for ciliary function. While control

organoids robustly express markers of cerebellar glutamatergic and GABAergic lineages

including Purkinje cells, *RPGRIP1L*-deficient organoids display a consistent and severe

reduction in Purkinje cell markers, along with impaired neurogenesis and increased progenitor

proliferation. These defects coincide with prolonged overactivation of the FGF signaling

pathway. Pharmacological inhibition of FGF signaling rescues both the

proliferative/neurogenic balance and Purkinje lineage formation in *RPGRIP1L*-deficient

organoids. Thus, our findings uncover early FGF pathway deregulation as a key driver of

cerebellar differentiation defects in an *in vitro* model of Joubert syndrome, providing new

insight into the developmental origin of cerebellar impairment in neurodevelopmental

ciliopathies.

INTRODUCTION

Cerebellar dysfunction is a common feature of several developmental disorders, associated with both motor disease and cognitive impairment [1]. The cerebellum originates from dorsal hindbrain rhombomere 1 (r1) under inductive cues from the isthmic organizer at the midbrain–hindbrain boundary, where fibroblast growth factor 8 (FGF8) expression defines the early cerebellar territory [2–4]. Two distinct germinal zones subsequently form: the ventricular zone (VZ), which produces inhibitory GABAergic neurons such as Purkinje, Golgi, and basket cells [5], and the rhombic lip (RL), which generates excitatory glutamatergic lineages including granule neurons (GNs) and unipolar brush cells [6,7]. In humans, Purkinje cell neurogenesis occurs between post-conception weeks (PCW) 8–10 [8,9], whereas granule cell progenitors (GCPs) proliferate extensively around 26 PCW [10]. Coordinated proliferation and differentiation of these populations are critical for establishing cerebellar size, morphology, and function [11].

Joubert syndrome (JBTS) is a rare neurodevelopmental disease affecting the cerebellum and brainstem, primarily characterized by hypoplasia/dysplasia of the vermis – the medial cerebellar structure. All JBTS patients share the diagnostic "molar tooth sign" on axial brain imaging, resulting from specific cerebellar and brainstem malformations [12,13]. Clinically, patients present with ataxia, ocular motor defects, developmental delay, and intellectual disability [14]. Over 40 causative genes have been identified, all encoding proteins involved in primary cilia structure or function [13,15]. Primary cilia are microtubular sensory organelles protruding from the surface of almost all vertebrate cells, acting as signaling hubs [16–18]. To ensure proper signaling their composition is controlled by the transition zone, composed of protein complexes such as the MKS, NPHP (NPHP1, NPHP4, NPHP8/RPGRIP1L), and CEP290 modules [19,20]. Among them, the JBTS gene *RPGRIP1L* encodes a scaffolding protein essential for transition zone integrity [21,22] and HH pathway activity [23,24]. Mutations in *RPGRIP1L* can also cause the more severe Meckel syndrome.

In the cerebellum, ciliogenesis is temporally regulated to ensure appropriate responsiveness to SHH and other signals [25–27]. In mice, a loss of cilia in the brain causes cerebellar hypoplasia and foliation defects due to loss of SHH-dependent GCP proliferation [28,29], while mouse

mutants for JBTS genes — including *Rpgrip1l* [30], *Ahi1* [31], *Tmem67* [32], *Jbts17 (CPLANE1)* [33],

Talpid3 [34], *Arl13b* [35] and Cep290 [31] — exhibit variable cerebellar phenotypes and divergent

effects on HH and WNT signaling. In humans, the analysis of JBTS fetal samples with a

confirmed diagnosis of cerebellar vermis hypoplasia revealed a reduction of GCP proliferation

associated with a lower expression of HH targets, with no differences between hemispheres

and vermis. These findings suggest that the specific vermis hypoplasia observed in JBTS

patients precedes and is independent of GCP proliferation defects, leaving its primary origin

unresolved [36]. Overall, the pathogenetic mechanisms linking cilia dysfunction to JBTS

neurodevelopmental defects remain largely unknown and may be of diverse origins.

This leaves us with several open questions: i) what are the early cellular and molecular

processes affected by JBTS gene depletion during human cerebellar development? ii) can

some of these defects account for cerebellar vermis hypo/dysplasia observed in JBTS patients?

iii) can we identify drug treatments that could potentially alleviate JBTS disease

manifestations? In order to address these questions, we turned to human iPSC-derived

cerebellar organoids, recently established as promising approaches to study human cerebellar

development and neurodevelopmental diseases [37–44]. By recapitulating developmental

pathways, these approaches are particularly well suited to study early steps of cerebellar

development. Moreover, in a previous work we demonstrated significant differences

concerning cilia formation and function in human and mouse spinal organoids in the absence

of JBTS proteins (RPGRIP1L and TMEM67) [45], further emphasizing the importance of using

human-based systems to investigate the developmental origin of cilia-related cerebellar

defects.

Here, we employ human iPSC-derived cerebellar organoids to investigate the role of *RPGRIP1L*

in cerebellar development. We chose *RPGRIP1L* for its central role in ciliary transition zone

assembly and severe brain defects in mouse models [46]. Using organoids derived from JBTS

patient iPSCs carrying biallelic *RPGRIP1L* mutations and CRISPR-engineered knockouts, we

uncover early ciliary abnormalities, morphological alterations, and aberrant FGF signaling

activation. Excessive FGF activity drives progenitor hyperproliferation and impaired

neurogenesis, defects that are rescued by pharmacological FGF inhibition after midbrain-

hindbrain boundary induction.

Our findings reveal a causal link between *RPGRIP1L* dysfunction, dysregulated FGF signaling,

and disrupted cerebellar neurogenesis, providing mechanistic insight into the developmental

origin of cerebellar malformations in JBTS.

RESULTS

Cerebellar organoids generated from human induced pluripotent stem cells recapitulate

early steps of cerebellar development

To unravel molecular mechanisms and biological processes that may be responsible for

cerebellar defects in JBTS pathogenesis, we used organoids to model early stages of human

cerebellar development *in vitro*. We optimized published protocols for generating cerebellar

organoids from human induced pluripotent stem cells (hiPSCs) [37,39]. To induce neural

commitment, mid-hindbrain boundary establishment and tissue self-organization, embryoid

bodies were sequentially treated with fibroblast growth factor 2 (FGF2), insulin, TGFß/SMAD

inhibitor (SB431542), FGF19 and stromal cell-derived factor 1 (SDF1) (**Fig. 1A).** Since dynamic

culture conditions have been shown to favor faster cerebellar commitment [47], embryoid

bodies were cultured under orbital agitation from day 7 onwards.

Immunostaining analysis on control organoid cryosections showed clusters of neural

progenitors (SOX2$^+$) and early-born neurons (HUC/D$^+$), already present at day 14

(**Supplementary Fig. 1A**), progressively expanding and self-organizing (**Supplementary Fig.**

1A-C). By day 28, early-born neurons are primarily located in deep regions of the organoid

tissue, adjacent to an outer layer of neural progenitors organized either at the organoid

periphery or into small internal rosettes (**Supplementary Fig. 1C**).

To assess the time-course of cerebellar cell type production in our experimental settings, we

performed bulk RNAseq analysis on cerebellar organoids derived from two independent

control hiPSC lines with different genetic backgrounds, PCIi033-A (Ph2) and UCSFi001-A

(Wtc11) at the hiPSC stage (day 0) and at five timepoints of the differentiation protocol (day

7, 14, 21, 28, 35) (see **Supplementary Excel File 1** for normalized gene expression data). First,

we validated that the control organoids faithfully recapitulated early stages of cerebellar

development, with the presence of midbrain, hindbrain and mid-hindbrain boundary markers

and the absence of anterior forebrain and posterior hindbrain markers **(Figure 1C)**. Concerning

cerebellar differentiation, the order of appearance of GABAergic Purkinje lineage markers

reflected the *in vivo* maturation stages of this cell population, with the progenitor marker

OLIG2 and the early post-mitotic marker *SKOR2* peaking at day 21, followed by the more

mature Purkinje marker *CALB1*, strongly expressed between day 28 and 35 **(Supplementary**

Fig 1D). As for the glutamatergic lineage, the RNA levels of progenitor markers were gradually

increased over time, first appearing at day 7 for *PAX6* and *BARHL1*, and at day 14 for *ATOH1*

(Supplementary Fig. 1E). Of note, the mature GN marker, *GABRA6*, was not detected over the

35 days short-term organoid culture, consistent with its post-natal onset in humans [9,48]

(Supplementary Fig. 1F). Given the well-established role of the SHH pathway in GCP pool

expansion during cerebellar development [49,29], we also examined SHH ligand expression.

However, almost no *SHH* mRNA was detected over the 35 days of cerebellar differentiation

(Supplementary Fig. 1G). Immunostaining analysis showed that the GCP marker BARHL1 and

the Purkinje marker CALB1 segregated in separated domains within the organoid tissue, with

few cells intermingled **(Supplementary Fig. 1H)**.

Altogether these data provide strong evidence for self-organization of a cerebellar

primordium and successful specification of the two main cerebellar lineages following our

differentiation protocol. They also show that this 35-days differentiation protocol models early

cerebellar developmental stages, preceding SHH endogenous expression by Purkinje cells.

RPGRIP1L KO and JBTS patient-derived cerebellar organoids present a severe reduction of

Purkinje Cell markers and a milder decrease in Granule Cell Progenitor markers

To compare the differentiation process between healthy and JBTS pathological conditions, we

used two independent *RPGRIP1L* KO hiPSC lines – generated in the two different genetic

backgrounds previously used for control organoid analysis (Ph2 and Wtc11) [45] – both

producing early truncated proteins within the first coiled coil domain **(Fig. 1B)**. In parallel we

also analyzed a hiPSC line derived from a severely affected JBTS patient (NG2266) carrying two

pathogenic variants in the *RPGRIP1L* gene (p.Q684X/c.2304+1G>T) [50] **(Fig. 1B)**. Both variants

of this patient are predicted by VarSome to be null variants and are classified as pathogenic

following the pathogenicity criterium "very strong" (PVS1) accordingly to the ACMG

(American College of Medical Genetics and Genomics) standards and guidelines [51] and encode

truncated proteins missing the second C2 domain and C-terminal RPGR-Interacting domain

(RID) of the protein (see Methods and **Supplementary Fig. 5**). We generated cerebellar

organoids from both *RPGRIP1L* KO hiPSC lines (Ph2 and Wtc11) in parallel with their isogenic

controls, and from the JBTS patient-derived hiPSC line (NG2266).

Using a specific antibody raised against the human RPGRIP1L RID domain, we showed the

presence of RPGRIP1L protein at its subcellular localization at the ciliary transition zone in

control organoids (**Supplementary Fig. 2A, A'**). On the contrary, no signal was detected in cilia

from both *RPGRIP1L* KO and JBTS patient-derived organoids (**Supplementary Fig. 2B-C'**).

Bulk RNAseq analysis was performed on hiPSC cells and on cerebellar organoids collected

every seven days from day 7 to day 35 from several independent experiments (see

Supplementary Excel File 1 for normalized gene expression data). We showed that both

RPGRIP1L KO and JBTS patient-derived organoids at day 7 expressed mid-hindbrain markers,

while being negative for anterior forebrain and caudal hindbrain markers **(Fig 1C),** thus

showing proper specification of their early anteroposterior identity. However, JBTS patient-

derived organoids displayed lower levels of WNT1 and EN1 than controls (**Fig. 1C**).

From day 14 onwards, transcriptome analysis revealed a consistent and severe reduction of

numerous Purkinje markers (*OLIG2, SKOR2, CALB1, FOXP2, PDE1C, ITPR1*) in both *RPGRIP1L*

KO and JBTS patient-derived organoids compared to controls **(Fig. 1D, Supplementary Fig. 2D)**.

Quantitative PCR analysis corroborated these results showing a significant decrease of *OLIG2,*

SKOR2 and *CALB1* markers in *RPGRIP1L* KO organoids derived from both hiPSC lines and in

JBTS patient-derived organoids, compared to controls **(Supplementary Fig. 2E)**.

In contrast, the expression levels of the glutamatergic lineage markers *ATOH1* and *BARHL1*

were not consistently affected across *RPGRIP1L*-deficient conditions compared to controls

(Figure 1E). This was confirmed by quantitative PCR analysis where the only significant defects

were a decrease in *BARHL1* expression in JBTS patient-derived organoids and an increase in

ATOH1 expression in *RPGRIP1L* KO organoids at d35 **(Supplementary Fig. 2F)**.

In order to strengthen these findings, we assayed protein expression of both Purkinje lineage

markers (OLIG2, CALB1) and glutamatergic lineage markers (ATOH1, BARHL1) by quantifying

the number of positive cells after immunostaining on organoid cryosections. Each marker was

analyzed at the timepoint of its highest expression in control organoids, as determined by bulk

RNA-seq data: day 21 for OLIG2 and day 28 for CALB1, ATOH1, and BARHL1. OLIG2- and CALB1-

positive cells were barely detected in *RPGRIP1L* KO and JBTS patient-derived organoids, while

strong and widespread labeling was observed in control organoids (**Fig. 1F-I, Supplementary**

Fig. 2I). Regarding the glutamatergic lineage, the number of BARHL1 positive cells was reduced

by 50% in *RPGRIP1L* KO and JBTS patient-derived organoids, along with a decrease in the

average labeling intensity of individual cells (**Fig. 1J, K, Supplementary Fig. 2J**). The number of

ATOH1 positive cells was only reduced in JBTS patient organoids (**Supplementary Fig. 2G, H)**

whereas the intensity of ATOH1 labelling was reduced by ~50% both in JBTS patient and

RPGRIP1L KO conditions (**Supplementary Fig. 2K**).

Overall, these data indicate a severe and significant impairment in the specification and

production of the Purkinje lineage in all *RPGRIP1L*-deficient conditions from day 21 onwards,

whereas glutamatergic lineage specification appeared to be modestly affected, mainly at

protein level from day 28.

Increased proportion of early neural progenitors in RPGRIP1L KO and JBTS patient cerebellar

organoids

We assessed whether these molecular alterations observed upon *RPGRIP1L* impairment might

be preceded by earlier defects in tissue organization. The first obvious morphological

alteration under brightfield observation was a size increase of *RPGRIP1L* KO and JBTS patient

organoids compared to controls, from day 21 onward **(Fig. 2A)**. Organoid area was measured

every 7 days along the differentiation protocol in several independent experiments. At day 28

and 35, both *RPGRIP1L* KO and JBTS patient-derived organoids presented a significant area

increase compared to controls (3.3-fold for *RPGRIP1L* KO and 2.3-fold for JBTS patient-derived

organoids over controls at day 35) **(Fig. 2B)**.

Moreover, the general tissue organization was already perturbed at day 14, before overt size

increase. In control organoids, early polarized neural progenitors (SOX2$^+$/ZO1$^+$) formed few

internal rosettes **(Fig. 2C left panels)**. By contrast, *RPGRIP1L* KO (Ph2 and Wtc11 lines) and

JBTS patient-derived organoids exhibited a higher number of internal rosettes. Additionally, in

all *RPGRIP1L*-deficient conditions, polarized neural progenitors (SOX2$^+$/ZO1$^+$) extended across

the entire organoid surface, with their apical side oriented outward, forming a continuous

neuroepithelium in contact with the medium **(Fig. 2C, middle and right panels)**.

The area occupied by ZO1 apical surface within the organoid was expanded by 12-fold in

RPGRIP1L-KO (Ph2 and Wtc11 lines) and by 15-fold in JBTS patient-derived organoids

compared to control condition at day 14 **(Fig. 2D).** Similarly, the number of SOX2+ neural

progenitors was doubled in all *RPGRIP1L*-deficient conditions compared to controls **(Fig. 2E)**.

Differential dependence on RPGRIP1L protein among neural progenitors for ciliogenesis

Given the well-established role of *RPGRIP1L* in building functional cilia [21,52,22] and the fact that

apical progenitors of the neural tube are ciliated [53–56], we investigated whether ciliogenesis

was affected in human cerebellar organoids. Immunostaining for the axonemal marker INPP5E

and for the basal body marker gamma-TUBULIN revealed numerous cilia pointing towards the

internal lumen of neural rosettes in both controls **(Fig. 3A, A')** and all *RPGRIP1L*-deficient

conditions **(Fig. 3B-C')**. Some cilia in *RPGRIP1L* KO and JBTS rosettes displayed a bulbous tip

(Fig. 3B', C'), a condition which was never observed in control rosettes. However, ciliary length

was not significantly changed in *RPGRIP1L* KO rosettes and only mildly decreased in JBTS

condition **(Fig. 3D)**.

In contrast, the analysis of non-polarized regions, characterized by random nuclear orientation

and distribution of gamma-TUBULIN+ basal bodies **(Fig. 3E-G)**, revealed a nearly two-fold

reduction in the number of cilia in *RPGRIP1L*-KO and JBTS patient organoids (48% in *RPGRIP1L*-

KO, 42% in JBTS-severe, versus 84% of mean percentage of ciliation in controls) **(Fig. 3H)**.

Moreover, INPP5E labeling intensity inside cilia was reduced **(Fig. 3I)** and ciliary length

increased **(Fig. 3J)**. Altogether these results indicate an impaired ciliogenesis and altered

ciliary trafficking in *RPGRIP1L*-depleted non-polarized cells. Consistent with the literature

indicating a cell type-specific requirement for *RPGRIP1L* at the ciliary transition zone [52], our

findings suggest that, in cerebellar organoids*,* *RPGRIP1L* is necessary for both proper

ciliogenesis and ciliary content in non-polarized neural progenitors, while it appears

dispensable for ciliogenesis in ZO1$^+$ early human cerebellar progenitors at day 14.

Nevertheless, the observation of numerous bulbous tips on cilia of apical progenitors suggests

that they might present an abnormal content, likely to modify their signaling properties.

FGF signaling upregulation and neurogenesis impairment in RPGRIP1L-deficient cerebellar

organoids

In order to identify specific molecular pathways disrupted upon RPGRIP1L depletion we

performed a DESeq2 analysis on our bulk RNAseq dataset, comparing both *RPGRIP1L* KO and

JBTS patient-derived organoids with controls at selected timepoints.

At day 14, many genes appeared deregulated in both *RPGRIP1L* KO (2146 genes, P adj <0.05,

|log2FC|>1) and JBTS patient-derived organoids (4304 genes, P value <0.05, |log2FC|>1)

compared to controls **(Supplementary Excel Files 2 and 3,** respectively). The Volcano plots

representing significant DEGs (P value <0.05, |log2FC|>1) for *RPGRIP1L* KO compared to

control **(Fig. 4A)** or JBTS patient compared to control **(Fig. 4B)** revealed many genes commonly

de-regulated in both RPGRIP1L-deficient conditions. Most importantly, FGF signaling emerged

as a severely disrupted pathway, with many FGF ligands (FGF8, FGF19, FGF17) and direct

downstream targets (ETV4, ETV5, SPRY1-2-4) strongly up-regulated in both *RPGRIP1L* KO and

JBTS patient-derived organoids. In particular, FGF8 emerged as the top up-regulated FGF

ligand gene, with a peak of maximal over-expression at day 14 in *RPGRIP1L* KO organoids

(log2FC=4.07, p adj=7.10E-30) and JBTS patient organoids (log2FC=6.01, p adj=3.24E-32). Real-

time quantitative PCR analysis of FGF8 expression confirmed this up-regulation between day

14 and day 21 in *RPGRIP1L* KO and JBTS patient conditions versus controls and a more

exacerbate phenotype in JBTS patient organoids **(Fig. 4C).** Several *SOX* and *HES* transcription

factors, important to maintain a neural progenitor state, were also significantly up-regulated

in both *RPGRIP1L* KO and JBTS patient-derived organoids compared to controls (**Fig. 4A, B**).

On the contrary, neurogenic master genes – *NEUROG1*, *NEUROD1* and *NEUROD4* – were

severely down-regulated as well as other genes involved in neurogenesis and early-born

neuron functions like *HES6* [57,58], *GDNF* and *RELN* (**Fig. 4A, B**). To illustrate the reproducibility

of the differentiation protocol as well as the similarity of transcriptional changes between

RPGRIP1L KO and JBTS patient-derived organoids, we generated a heatmap representation of

normalized RNA expression values for selected genes over time **(Fig. 4D)**. While in control

samples, FGF signaling peaked at day 7 and was turned off by day 14, in both *RPGRIP1L* KO

and JBTS patient-derived organoids this signaling was upregulated and longer maintained

(until day 21). Overall, these data suggest that the failure to down-regulate FGF signaling after

midbrain-hindbrain boundary specification in *RPGRIP1L*-deficient conditions may prevent

neurogenesis by maintaining early neural cells in their progenitor state.

To better characterize the massive upregulation of FGF signaling, we thus assessed which cells

were producing the FGF8 protein. Immunostaining analysis on cryosections of day 14

organoids revealed that the strongest FGF8 signal coincided with the apical surfaces of early

SOX2$^+$/ZO1$^+$ apical progenitors (**Supplementary Fig. 3**). In control organoids we could only

detect signal in cells bordering the few internal lumens (**Supplementary Fig. 3A, D).** In

RPGRIP1L KO and JBTS patient-derived organoids, FGF8 distribution was more widespread.

Indeed, FGF8 was enriched on both the apical sides of neural progenitors forming internal

lumens (**Supplementary Fig. 3B, C, E, F)** and the external layer covering the organoid surface

(**Supplementary Fig. 3B, C, G, H**). The overall increase of *FGF8* mRNA levels observed in

RPGRIP1L KO and JBTS patient-derived organoids is consistent with the increased number of

SOX2$^+$/ZO1$^+$ progenitors.

RPGRIP1L-deficient organoids display severe neuronal maturation and extracellular matrix
defects

To assess whether the impaired neurogenesis observed at early differentiation stages (day 14)
prevented the acquisition of a mature neuronal signature in *RPGRIP1L*-deficient conditions,
we analyzed DEG's profile at later stages. At day 28, we observed a significant downregulation
of numerous genes involved in neuronal maturation and function, both in *RPGRIP1L* KO and
JBTS patient conditions (**Supplementary Excel Files 4 and 5,** respectively) as illustrated by the
volcano plots (**Fig. 5A, B**) and on the heatmap representation of normalized RNA expression
values over time (**Fig. 5C, upper panel**). In absence of functional RPGRIP1L protein we also
observed a severe reduction of several genes encoding extracellular-matrix (ECM)
components, such as collagens and laminins, as well as integrin receptors **(Fig. 5A, B and Fig.
5C lower panel)**.

Gene ontology analyses performed to identify overrepresented gene categories in our DEG
lists corroborated these results. Indeed, the most significantly enriched GO terms among the
downregulated genes in both *RPGRIP1L* KO (**Fig 5D**) and JBTS patient (**Fig 5E**) conditions at day
28 included brain development, synaptic signaling/chemical synaptic transmission, regulation
of membrane potential/action potential, but also core matrisome and extracellular matrix
organization.

Altogether these results demonstrated a neuronal maturation impairment, following FGF
upregulation and neurogenesis defects at early stages, and highlighted a concomitant
transcriptional downregulation of major ECM components.

Blocking FGF signaling rescues neurogenesis and Purkinje cell progenitors in RPGRIP1L-
deficient cerebellar organoids

To test the hypothesis that the sustained and strong FGF signaling upon *RPGRIP1L* depletion
is at the origin of neurogenesis and neuronal differentiation impairment, we designed a drug
rescue experiment. Given that FGF8 expression is crucial for midbrain-hindbrain boundary
formation at early stages and that, in *RPGRIP1L*-deficient organoids, the over-expression of
FGF ligands and of their downstream targets started before day 14 and continued until day
21, we treated *RPGRIP1L*-deficient organoids (both KO and JBTS patient lines) with the pan-
FGFR inhibitor BGJ-398 (Infigratinib), from day 11 to day 18 (**Supplementary Fig. 4A**). Notably,

BGJ-398 treatment restored a normal size of *RPGRIP1L*-KO and JBTS patient organoids

(**Supplementary Fig. 4B**).

We then performed bulk RNAseq analysis on the BGJ treated samples and compared them to

their untreated counterparts. Heatmap representation of normalized RNA expression values

for selected genes over time clearly show that BGJ treatment was able to rescue defects of

FGF signaling, as well as neurogenesis, neuronal differentiation and extracellular matrix

production in both RPGRIP1L KO **(Fig. 6A)** and JBTS patient organoids **(Fig. 6B)** from several

independent experiments (see **Supplementary Excel File 6** for normalized gene expression

data)**.**

Quantitative PCR analysis confirmed these results: the RNA expression levels of *FGF8* and its

downstream targets (*ETV4, ETV5, SPRY1*) were completely restored by the drug treatment in

both RPGRIP1L KO and JBTS patient organoids at all timepoints analyzed **(Supplementary Fig.**

4E-H). The expression levels of proneural genes *NEUROG1* and *NEUROD1*, as well as Purkinje

markers *SKOR2* and *CALB1*, analyzed by quantitative PCR were partially rescued in *RPGRIP1L*

KO and JBTS patient organoids upon BGJ-398 treatment, in particular at their peak of

expression (**Supplementary Fig. 4I-L**). Immunofluorescence analysis on cryosections of day 14

organoids corroborated these results, showing a significant rescue in the number of positive

nuclei for either NEUROD1, HUC/D or SOX2 markers, upon BGJ-398 treatment in both

RPGRIP1L KO or JBTS patient-derived organoids (**Fig. 6C-F**). The expression level of the Purkinje

progenitor marker OLIG2 was also significantly rescued upon BGJ-398 treatment in both

RPGRIP1L KO and JBTS patient-derived organoids, as shown by immunofluorescence analysis

at day 21 **(Fig. 6G, H)**.

Thus, downregulating FGF signaling efficiently rescued the neurogenesis defect in *RPGRIP1L*-

deficient cerebellar organoids as well as the production of Purkinje cell progenitors.

Neural progenitor proliferation is increased in RPGRIP1L-deficient organoids and is rescued

by blocking FGF signaling

To test whether the size increase observed upon *RPGRIP1L* impairment could be due to

sustained proliferation caused by FGF overexpression, we assessed the proliferative potential

of neural progenitors in control, *RPGRIP1L* KO and JBTS patient-derived organoids by carrying

EdU pulse-chase experiments. We provided a 2h EdU pulse to the organoid cultures at day 18,

just before the onset of size increase. Some organoids were fixed 2h after the pulse. At this

stage (day 18), all *RPGRIP1L*-deficient organoids showed an increase of EdU positive cells

compared to controls (1.6-fold in *RPGRIP1L* KO, 2.6-fold in JBTS patient). BGJ-398 treatment

significantly reduced the number of EdU-incorporating cells in *RPGRIP1L* KO but not in JBTS

patient-derived organoids (**Fig. 7A, B**). Of note, similar results were obtained whether

considering the number of double EdU$^+$/SOX2$^+$ cells among the population of SOX2$^+$ cells,

indicating more progenitors in S-phase (**Fig. 7C**).

A chase assay was performed by removing EdU from the medium after 2 hours and fixing

organoids five days after the EdU pulse (i.e. day 23). The number of EdU Label Retaining Cells

(LRCs) was strongly reduced in both *RPGRIP1L* KO and JBTS patient conditions compared to

controls (~2-fold decrease) **(Fig. 7D, E)**. This indicates that, in the time-window analyzed

(between day 18 and day 23), *RPGRIP1L* KO and JBTS patient-derived cells proliferated more

than controls, leading to the dilution of most EdU labeling. BGJ-398 treatment significantly

restored the number of LRCs in both *RPGRIP1L* KO and JBTS patient-derived organoids **(Fig.**

7D, E). EdU co-labeling with the progenitor marker SOX2 and the quantification of double

EdU$^+$/SOX2$^+$ cells among the SOX2$^+$ population showed similar results (**Fig. 7F**).

In addition, when dividing EdU+ cells into two categories—"strong" and "faint"—based on

labeling intensity, we observed that the "strong" EdU+ population, likely representing cells

that underwent at most one division after EdU incorporation, was the most affected in both

RPGRIP1L-deficient conditions and restored by BGJ-398 treatment **(Fig. 7G)**. Overall, FGF

overactivation in *RPGRIP1L*-deficient cerebellar organoids maintains SOX2+ progenitors in a

proliferative state and prevents their switch to neuronal differentiation and maturation,

reducing drastically Purkinje cell formation.

DISCUSSION

A crucial role of primary cilia for proper cerebellar development has been identified in mouse

mutants for ciliary genes, which present varying degrees of cerebellar hypoplasia [30–35].

However, the mechanisms linking mutations in ciliary genes to human cerebellar impairment,

as well as the developmental origin of specific JBTS patient cerebellar features, remain largely

unknown. Importantly, critical aspects of this disease may be missed in mouse models, as

cerebellar formation in humans presents unique features [9,10,59], and JBTS genes dysfunction

does not necessarily impact ciliogenesis the same way in both species [45]. To overcome this

issue, in this study we leveraged human cerebellar organoids to investigate the formation of

early cerebellar progenitors under healthy and pathological conditions linked to mutations in

RPGRIP1L, a JBTS causal gene. Our study uncovered an increased proliferation of neural

progenitors and a reduction of neurogenesis and Purkinje cell production in *RPGRIP1L*-

deficient cerebellar organoids. These defects are correlated with strong FGF pathway

upregulation. Rescue experiments by blocking FGF receptors (FGFRs) demonstrate the causal

link of FGF up-regulation with neurogenesis-proliferation imbalance and with the reduction of

Purkinje cell formation.

Given the important role of RPGRIP1L for ciliary functions, we analyzed cilia formation and

ciliary content in *RPGRIP1L*-deficient cerebellar organoids compared to controls. We showed

that the RPGRIP1L protein is differentially required for ciliogenesis in early neural progenitors,

since its loss causes severe ciliary defects in non-polarized progenitors, while mild

morphological defects are observed in polarized apical progenitors. This difference may result

from variations in ciliogenesis pathways and reinforces existing literature indicating a cell type-

specific requirement for RPGRIP1L at the ciliary transition zone. Indeed, studies in mice have

demonstrated that, in specific cell types, compensatory mechanism involving the RPGRIP1L

paralogue – RPGRIP1 – could overcome RPGRIP1L depletion [52]. Moreover, in depth analysis of

cilia distribution and morphology in the mouse cerebral cortex and cerebellum challenged the

traditional view that cilia are uniformly present and identical in all brain regions and cell types

[60,61,27], a variability that may, at least partially, contribute to the differential vulnerability of

brain regions to mutations in ciliary genes. A reduced number of cilia on non-polarized cells

could either result from decreased ciliogenesis, or increased ciliary instability/disassembly.

Anyhow, this reduction is unlikely to be a consequence of the FGF pathway up-regulation, as

FGF signaling has been shown to promote ciliogenesis [62,63] rather than inhibiting it.

Our data suggest that defects in RPGRIP1L-deficient cerebellar organoids appear after the

initial cerebellum induction stages: while midbrain-hindbrain boundary markers were

expressed at day 7 in all genotype conditions, temporal expression analysis of typical

cerebellar cell markers revealed a strong reduction of all analyzed markers of the Purkinje

lineage, from day 21 to 35. Whether this reflects a defect in Purkinje cell specification and/or

in their differentiation remains to be determined. Purkinje cells being early-born neurons in

the human cerebellum (8-10 PCW) [8,9], the strong defect in their production in *RPGRIP1L*-

deficient organoids might stem from the general neurogenesis defect. Indeed, the concurrent

rescue of neurogenesis and expression of the Purkinje markers OLIG2, SKOR2 and CALB1

following FGFR inhibitor treatment strongly suggests that the two defects are linked. The GCP

population appears less affected when considering GCP marker RNA levels. However, we did

observe a 50% reduction in the number and staining intensity of BARHL1-expressing cells at

day 28, suggesting that the glutamatergic lineage might also be affected at later stages,

consistent with the late maturation of GNs in humans [9,48]. Transcriptome analysis also

revealed a severe downregulation of several integrins and ECM components, perturbing the

ECM-receptor system in *RPGRIP1L*-deficient organoids. Although the causes of this alteration

are unclear, it might participate in the neurogenesis and neuronal maturation impairment in

RPGRIP1L-deficient organoids. Indeed, the expression of ECM molecules is dynamically

regulated during brain development and plays prominent roles in neurogenesis, cell

migration, neurite outgrowth and synaptogenesis [64–66].

FGF8 is known as the key morphogen to establish early cerebellar territory *in vivo* [67]. Notably,

the dose, the precise location and the time window of FGF8 expression need to be tightly

controlled to allow proper cerebellar development [68]. Ectopically upregulating *Fgf8* in

cerebellar precursors increases their proliferation and overrides their normal program of cell

specification [69]. Moreover, conditional inactivation in the mouse isthmus of *Sprouty* genes

(*Spry1-2-4*), which are FGF direct targets acting as feedback loop negative regulators [70], results

in overactivation of FGF signaling and aberrant cerebellar development [71]. A growing literature

emphasizes the role of the FGF pathway in regulating the proliferative/neurogenic balance in

early neural development, by promoting progenitor proliferation at the expense of neuronal

differentiation during embryonic spinal cord elongation [72–74] and corticogenesis [75,76].

Interestingly, the development of the vermis in mice relies on a higher and longer FGF8 dosage

than the hemispheres [68,77]. During early developmental stages, the region expressing FGF8

corresponds to the prospective vermis [78], which has been identified as a direct derivative of

these FGF8-expressing isthmic cells [79].

In our cerebellar differentiation protocol, control organoids downregulated *FGF8* after day 7,

while *RPGRIP1L*-deficient organoids displayed a massive FGF8 up-regulation from day 14 to

21. Consistent with current literature, we showed that the increased levels of FGF ligands

(*FGF8, FGF17, FGF19*) and pathway activation, as indicated by the expression of *ETV*4-5 target

genes, were responsible for the impaired neurogenesis and neuronal differentiation observed

upon *RPGRIP1L* depletion.

Which mechanisms could underlie FGF upregulation upon *RPGRIP1L*-deficiency remains an

open question. We revealed the presence of FGF8 protein mainly in apical neural progenitors,

suggesting that they are the FGF8 producing cells. It is difficult to establish whether the

increased number of apical progenitors is the initial cause or the consequence of higher FGF

production in RPGRIP1L-deficient conditions. Nevertheless, we provided evidence that, once

engaged, this mechanism could be self-sustaining, with FGF signaling promoting progenitor

proliferation. Alternatively, SP8 transcription factor, a well-known inducer and target of FGF8

[80–82], could participate in a self-amplification loop, being significantly upregulated in all

RPGRIP1L-deficient conditions at both day 14 and 21 (see DEGs tables).

An essential question raised by our study is the link between the early increased proliferation

observed in cerebellar organoids and the vermis hypoplasia found in JBTS patients. Although

we cannot exclude that the context of organoids could favor specific manifestations of the

RPGRIP1L mutant phenotype that are not revealed *in vivo*, several hypotheses could explain

these apparently opposite phenotypes. First, an early over-proliferation could trigger later cell

death. As an example, widespread apoptosis was observed after over-proliferation upon loss

of function of the kinase DYRK1A [83] and was interpreted as a consequence of uncoupling cell

cycle exit from neuronal differentiation. Another possibility would be that an increase in early

progenitor numbers would preferentially populate the cerebellar hemispheres at the expense

of the vermis. Indeed, lineage studies in mice highlight different medio-lateral distribution of

cerebellar VZ clones according to their birth dates [84,85]. Finally, an expansion of the midbrain-

hindbrain boundary signaling center due to FGF8 overexpression could impair morphogenetic

movements leading to midline fusion of the bilateral cerebellar primordia and thus vermis

formation, as shown in chicken embryos [86]. These morphogenetic movements do not happen

in organoids but could explain the vermis hypoplasia in ciliopathy patients. The long-term

consequences of impaired differentiation and sustained proliferation in cerebellar organoids

will have to be investigated.

Whatever the mechanism, increased proliferation in cerebellar organoids is consistent with

data obtained in mouse mutants for two JBTS causal genes, KIF17 [87] and SUFU. The case of

SUFU, a negative regulator of the HH pathway that acts at the cilium, is particularly striking.

In mice, conditional invalidation of SUFU in GCPs or Purkinje progenitors leads to protracted

proliferation and delayed differentiation, as well as to FGF8 pathway upregulation in cerebellar

progenitors [88–90]. Notably, early SUFU invalidation in the cerebellar anlage leads to loss of the

vermis [89], mimicking a ciliopathy phenotype. In humans, germline SUFU haploinsufficiency or

recessive hypomorphic mutations in SUFU can be associated with mild forms of JBTS

encompassing cerebellar vermis hypoplasia [91,92]. On the other hand, germline SUFU

haploinsufficiency is also a strong risk factor for the development of severe infantile

medulloblastoma (of SHH-MB class) [93,94]. Additionally, some SUFU variants have been

reported both in JBTS and cancer [92]. This, together with our data on *RPGRIP1L* deficiency in

cerebellar organoids, raises the puzzling question of potential common mechanisms between

early cerebellar progenitor hyperproliferation and later vermis hypoplasia.

The relevance of our study for JBTS pathology is emphasized by the similar phenotypes of

RPGRIP1L KO organoids with organoids derived from a JBTS patient's iPSC line. The JBTS

patient donor of the NG2266 cell line used in this study, exhibits a very severe neurological

phenotype, correlated with vermis hypoplasia and partial aplasia, as revealed by encephalic

magnetic resonance imaging (MRI). The patient carries two biallelic heterozygous mutations

in the *RPGRIP1L* gene: a nonsense mutation at the end of the first C2 protein domain, and a

splice variant that results in the generation of a stop codon at the beginning of the second C2

domain. Given the importance of both C2 domains for RPGRIP1L function [95,96,30,97,21], a stop

codon in these domains is likely to impair protein functionality. Indeed, similar to the

RPGRIP1L KO condition, JBTS patient (NG2266)-derived organoids lacked RPGRIP1L protein at

the ciliary transition zone. This further underscores the strong phenotypical similarity

observed between *RPGRIP1L* KO and JBTS patient (NG2266)-derived organoids. Furthermore,

targeted pharmacological inhibition of FGFR using BGJ-398/Infigratinib, an FDA-approved drug

currently used in oncology and to treat hypochondroplasia [98], is sufficient to rescue the

proliferative-neurogenic balance and to restore Purkinje cell lineage formation, both in

RPGRIP1L knockout hiPSC lines and in the Joubert syndrome patient line, establishing a

mechanistic link between FGF overactivation and the observed phenotypical alterations.

More generally, it will be crucial to determine whether the molecular alterations reported in

this study have broader relevance by also occurring in cerebellar organoids with mutations in

other JBTS genes, or if they are specific to *RPGRIP1L* depletion. Indeed, not all JBTS patients

present cerebellar vermis hypoplasia; in milder cases, the cerebellar vermis may be dysplastic

without a reduction in size [99]. It will be particularly helpful to investigate whether FGF signaling

could be specifically disrupted in cerebellar organoids from patients with severe vermis

hypoplasia, as it might be of predictive value for the severity of the neurological phenotype.

In conclusion, with this work we provide an example of a cerebellar organoid approach to

investigate potential pathogenetic mechanisms underlying a human disease. Our results

uncover unexpected defects in neurogenesis linked to increased FGF signaling, thereby

offering a novel framework for investigating the etiology of cerebellar defects in JBTS and

other neurodevelopmental diseases.

MATERIAL AND METHODS

Ethics

The work performed in this manuscript complies with all relevant ethical regulations. The

obtaining and manipulation of human iPSC lines were performed under ethical agreements

from the French Ministry of Higher Education and Research DC-2025-7003 (for the UCSFi001-

A and PCIi033-A lines, control and RPGRIP1L-KO) and DC-2025-7496 (for the JBTS patient line)

and under GMO authorization number DUO-9509.

hiPSC culture

hiPSCs were thawed in mTeSR+ medium (Stem Cell Technologies #100-0276) in the presence

of Rock-inhibitor Y-27632 (5µM, Stemgent-Ozyme #04-0012) and cultured on Matrigel

(Corning, VWR #354277) coated plates under standard conditions at 37°C upon confluency of

70-80%. The medium was changed every two days. Passaging was performed using ReLeSR

(Stem Cell Technologies #05872) and testing for potential mycoplasma contamination was

performed regularly by Eurofins genomic (Mycoplasmacheck). Accutase (Stem Cell

Technologies #07920) was used for the dissociation of hiPSC colonies into single cells prior to

the differentiation protocol.

Clinical features of the patient COR201 and characterization of the mutant Identification of

the RPGRIP1L RNA products derived from the NG2266 hiPSC c.2304+1G>T splice variant

allele.

The NG2266 cell line is derived from the male patient COR201 [50] who was last examined at

the age of 17. He presented a molar tooth sign on brain MRI and his neurological examination

revealed hypotonia, psychomotor delay, neonatal breathing dysregulation, ocular-motor

apraxia, nystagmus and severe intellectual disability. Post-axial polydactyly of the left hand

was present at birth. During evolution, he suffered severe visual impairment and strabismus,

severe renal dysfunction (chronic renal failure at the age of 11, which required renal

transplantation at age 14), as well as chronic liver disease.

We demonstrated by sequencing PCR products from NG2266 hiPSCs cDNA that the splice

variant c.2304+1G>T resulted in intron retention leading to an early stop codon at position

788 (S788X). Primer 1 (Forward: GTATCCATAAACTAGAAGCCCAAT) was designed at the junction

between exon 14 and 15; primer 2 (Reverse: GGGTTAAGGTTACAGGGGATCTC) was placed in

the intron between exon 16 and 17; Primer 3 (Reverse: AATATTCCTGAGATACACCTGTC) was

positioned at the junction between exon 17 and 18 **(Supplementary Fig. 5A)**. PCR products

were analyzed on agarose gel and showed that primer pair 1-2 amplified an 813 bp region in

the cDNA derived from JBTS patient (NG2266) hiPSCs but not from the control condition

(Supplementary Fig. 5B). Primer pair 1-3 amplified a 1009 bp region, both in the control and

in JBTS patient cDNA. As expected, NG2266 second allele (c.2050C>T/p.Q684X) presents a

nonsense mutation that does not affect the cDNA structure, resulting in a PCR product of the

same size as control alleles. On the contrary, using the primer pair 1-3, the c.2304+1G>T allele

could not be amplified from cDNA given that intron retention would give rise to a 3969 bp PCR

product **(Supplementary Fig. 5B')**.

Primer pair 1-2 PCR product from NG2266 hiPSCs was sequenced to confirm the intron

retention. An ATG stop codon appear 29 nt after the beginning of the intron sequence, most

likely giving rise to a truncated form of the protein **(Supplementary Fig. 5C)**.

Moreover, an additional mutation was identified in the exon 16: c.2231 G>A (p. R744Q).

Differentiation of hiPSCs into cerebellar organoids

After two amplification passages, hiPSC lines (characterized in [50,52]) were dissociated into single cells using Accutase (Stem Cell Technologies #07920) and resuspended in mTeSR+ medium supplemented with 10 µM ROCK inhibitor. Then, cells were promptly re-aggregated using AggreWell™800 microwell plates (StemCell Technologies) following the manufacturer's instructions. Cells were seeded at a density of 1.8 × 10^6 cells per well (6,000 cells per microwell). This corresponded to day 0 of the cerebellar differentiation protocol. Two days later the entire medium was replaced with the chemically defined medium (gfCDM), slightly modified compared to [37], consisting of vol:vol Isocove's modified Dulbecco's medium (Thermo Fisher #12440053)/Advanced DMEM/F-12 (Thermo Fisher #12634028), chemically defined lipid concentrate (1% v/v, Thermo Fisher #11905031), monothioglycerol (450 µM, Sigma #M6154), apo-transferrin (15 µg/ml, Sigma #T1147), crystallization-purified BSA (5 mg/ml, >99%, Sigma #5470), and 50 U/ml penicillin/50 µg/ml streptomycin (P/S, Thermo Fisher #15140122). The medium was also supplemented with insulin (7 µg/ml, Sigma #I9278) and used from day 2 to day 21. Different factors were added to the medium at different timepoints as represented in Fig. 1A. Recombinant human basic FGF (FGF2, 50 ng/ml, PeproTech # 100-18B) and SB431542 (SB, 10 µM, Stemgent-Ozyme #04-0010) were added to the culture on day 2. On day 4, floating aggregates were transferred from microwell plates to ultra-low attachment dishes (Corning #3261) and total medium change with drug refreshment was performed. On day 7 embryoid bodies(EBs)-containing dishes were transferred to an orbital shaker (3 mm orbit, Thermo Scientific #88881102B) and maintained under orbital agitation of 100 rpm until the end of the protocol. Total medium change with 2/3 of the initial amount of FGF2 and SB431542 was performed on day 7, day 9 and day 11. On day 14, FGF2 and SB431542 were replaced by medium change supplemented with recombinant FGF19 (100 ng/ml; PeproTech #100-32). The same medium change was also performed at day 16 and 18. From day 21 onward, the aggregates were cultured in Neurobasal medium (Thermo Fisher #21103049) supplemented with GlutaMax I (Thermo Fisher #35050061), N2 supplement (Thermo Fisher #17502048), and P/S 1% (Thermo Fisher #15140122). Total medium changes were performed on day 23, 25, 28, 30 and 32. Recombinant human SDF1 (300 ng/ml, PeproTech #300-28A) was added to the culture from day 28 onward (**Fig. 1A**). For pan-FGFR inhibition, BGJ-398/Infigratinib was first added at day 11 at a concentration of 100 nM and

renewed on days 14 and 16. At day 18 total medium was replaced by fresh medium devoid of

BGJ-398.

EdU treatment and labeling

Cerebellar organoids at day 18 were incubated using 10 μM EdU (Click-iT EdU Imaging Kit,

Invitrogen) dissolved in growth medium for 2 h at 37 °C and then washed twice with PBS.

Around 30 organoids per genotype were collected and fixed for 20 minutes at room

temperature in 4% cold PFA. The remaining organoids, around 30 per genotype, were kept in

culture after washing for a 5-day chase until day 23 of the differentiation protocol, when they

were collected and fixed in the same way.

Fixed organoids were embedded in OCT following the procedure described in the section

Organoids embedding and Cryosectioning. EdU labeling detection on cryosections was

performed according to the Click-iT EdU Imaging Kit manufacturer's instruction at the end of

our immunostaining protocol (refer to the following section "Immunofluorescence").

Organoid Size Analysis

To monitor the organoid size, bright-field images were acquired at different time-points (every

seven days). Organoid area was calculated by manually dragging a line with the freehand

selections tool on Fiji (ImageJ; National Institutes of Health) and subsequently measuring the

object area. Organoid area was measured in several independent experiments (N=3 Ph2 line,

N=3 Wtc11 line, N=3 NG2266 line), n=10-60 organoids were analyzed per experiment per

condition. Results are presented as the mean ± SEM of organoid averages from each individual

experiment.

Organoids embedding and Cryosectioning

Organoids were collected every seven days during differentiation from day 7 to 35, rinsed with

PBS and fixed in cold PFA (4 %) for 20 min at 4 °C. Then organoids were rinsed in PBS and

incubated in 30 % sucrose in PBS until completely saturated. Cryoprotected organoids were

embedded in OCT matrix (Cell Path #KMA-0100-00A) in plastic molds and stored at -80 °C. 12

μM cryostat sections were prepared and stored at -20 °C.

Immunofluorescence

Cryostat sections of organoids were washed in PBS/0.1% Triton X-100. An optional step of antigen-retrieval with Citrate-Buffer was performed only for cilia staining (INPP5E and Gamma-TUBULIN antibodies). After washing, cryosections were incubated with a blocking solution containing 10% NGS in PBS/0.1% Triton-X100 for at least 2 hours. The sections were incubated overnight at 4 °C with primary antibodies **(Supplementary Table 5)** diluted in a solution containing 1% NGS in PBS/0.1% Triton-X100. Next day, the slides were washed 3 x 10 min with PBS/0.1% Triton-X100 and incubated with secondary antibodies at 1:400 dilution **(Supplementary Table 6)** and DAPI (Merck #1.24653) in 1% NGS/PBS/0.1 % Triton X-100 for 2 hours. After final washing steps with PBS/0.1 %Triton X-100 for at least 1 hour, sections were mounted with Mowiol (Roth #0713.2).

Image acquisition

Fluorescence image acquisition of cerebellar progenitors and neuronal markers was performed at room temperature using a Zeiss Observer Z1 equipped with an Apotome module, an Axiocam 506 monochrome cooled CCD camera and a 20x objective. Z-stacks with 1 µM step were acquired. All images were processed with Zen software (blue edition). For cilia analyses, fluorescence images were acquired at room temperature using a confocal microscope (LSM 980 upright, Carl Zeiss AG) and a 63x oil objective with a NA 1.4 and a monochrome charge-coupled device camera. Z-stacks with 0.25 µM step were acquired. Images were processed with Zen software (black edition).

Quantification of immunofluorescent staining and statistical analyses

The number of positive cells in immunofluorescence staining was quantified on 7µm Z-projections using the Cellpose environment (https://cellpose.readthedocs.io/en/latest/installation.html) for cell segmentation. Each image was segmented using the DAPI channel to generate a mask identifying all nuclei. The intensity of the target channel was then measured for each nucleus by uploading the MAX-projection image and the corresponding ROI mask (generated with Cellpose) into Fiji (ImageJ; National Institutes of Health). Mean intensity was calculated for each ROI, and a threshold was applied to distinguish marker-positive cells from background immunostaining. Only cells above this threshold were counted, and the ratio to the total number of nuclei (ROIs in the

mask) was determined. Nuclei smaller than 20 µm² were excluded, as they were considered

pycnotic cells.

For quantitative analyses of ZO1 staining at the apical side of the cells, positive areas were

defined and measured by manually setting common thresholds in Fiji for all genotypes. For

each image, the DAPI positive area was also determined and measured by manually setting

thresholds. The percentage of ZO1 positive area per organoid slice was determined after

dividing the ZO1 calculated area by the DAPI area.

Analysis of ciliary density was performed by manually counting the number of cilia axonemes

(INPP5E staining) over the number of basal bodies (Gamma-Tubulin staining). Measurements

of axonemal INPP5E intensity and ciliary length were performed on unprocessed images (raw

data) using a custom Matlab script for recognizing and measuring ROIs (cilia) properties. After

quantifications were performed, representative images were processed by means of

background subtraction and contrast settings via Fiji.

All data are presented as mean ± SEM. One-Way ANOVA Kruskal-Wallis and Dunn's test were

performed and the following statistical significances were considered: *$P<0.033$, **$P<0.0021$,

***$P<0.0002$ and ****$P<0.0001$. All statistical data analysis and graph illustrations were

performed using GraphPad Prism (GraphPad Software).

Total RNA isolation and qPCR analyses

Control, *RPGRIP1L* KO and JBTS patient-derived cerebellar organoids from different hiPSCs

lines (Ph2, Wtc11, NG2266) and several independent experiments were collected every seven

days from day 7 to 35 of the differentiation protocol and washed with PBS. RNA was isolated

using the RNeasy Kit (Qiagen #74104) and RNAse-free DNase Set (Qiagen #79254) following

manufacturer's instructions. 1µg of isolated RNA was retro-transcribed into cDNA using the

GoScript Reverse Transcriptase Kit (Promega #A5001). For quantitative real-time PCR, a cDNA

dilution (equal to 15 ng of starting RNA per well) was used in a Maxima SYBR Green/ROX qPCR

Master Mix 2x (Thermo Scientific #K0222). Duplicate reactions for each sample were prepared

and the samples were run in a Step One Real-Time PCR System Thermal Cycling Block (Applied

Biosystems #4376357). GAPDH housekeeping gene was used as reference. Primer pairs are

listed in **Supplementary Table 7.** The analysis of real-time data was performed using the

included StepOne Software version 2.0 and graphs were generated using GraphPad Prism

(GraphPad Software).

Total RNA isolation and Bulk RNAseq analysis on cerebellar organoids

RNA was isolated as described above using the RNeasy Kit (Qiagen #74104) and RNAse-free

DNase Set (Qiagen #79254) from control, *RPGRIP1L* KO and JBTS patient-derived cerebellar

organoids at different timepoint and from several independent experiments (see

Supplementary Tables 2-4 for sample details and N). RNA quality was determined by

measuring the RNA integrity number (RIN) via the High Sensitive RNA Screen Tape Analysis kit

(Agilent Technologies #5067) on the TapeStation system (Agilent Technologies). A RIN above

9.5 was considered as good quality RNA and 250 ng RNA in a total volume of 25 µl was

prepared per sample for further procedure. Bulk RNAseq was realized by the Genotyping and

Sequencing Core Facility of the Paris Brain Institute (iGenSeq, ICM Paris). Poly A stranded cDNA

libraries were built with the kit "Illumina® Stranded mRNA Prep" and their quality checked on

"AGILENT Tapestation 2100". 125 ng of each library was sequenced on both strands to produce

between 33-44 Millions reads (100 bases long) using a Novaseq6000 ILLUMINA.

RNAseq data processing was performed in Galaxy under supervision of the ARTBio platform

(IBPS, Paris). Paired-end RNA reads were aligned against the homo sapiens hg38 genome by

using the STAR aligner (v2.7.10, Galaxy wrapper v4) [100] and the gene annotations gtf files

GRCh38.109. Quality of sequencing was controlled with fastQC (Galaxy wrapper

v0.74+galaxy0) and MultiQC (Galaxy wrapper v1.11+galaxy1) [101]. Gene expression was

assessed by counting sequencing reads aligned to gene exons with featureCounts (Galaxy

wrapper v2.0.3+galaxy2) [102]. Raw counts were further converted to normalized gene

expression values using the log2(tpm+1) transformation where tpm is the count of transcript

aligned reads per length of transcript (kb) per million of total mapped reads (Galaxy tool

"cpm_tpm_rpk" v0.5.2) and heatmap visualizations were produced with the Galaxy tool

"high_dim_heatmap" (v3.1.3+galaxy0) using the normalized gene expression values.

Differentially expressed genes (DEGs) were selected from the gene raw read counts using

DESeq2 (Galaxy wrapper v2.11.40.8+galaxy0) [103] and the Benjamini-Hochberg p-adjusted

cutoff 0.05. DESeq2 statistical tables were used for generation of Volcano Plots (Galaxy tool id

"volcanoplot" v0.0.5) [104] and for the analysis of overrepresented gene ontology (GO)

categories (Metascape online software, https://metascape.org/gp/index.html#/main/step1)

[105].

ACKNOWLEDGEMENTS

We particularly thank Chloé Chaumeton and France Lam from the IBPS imaging platform I2PS for their help on image acquisition. We thank the IBPS Bioinformatics facility of which C.A. is a former member. We thank the iGenSeq sequencing platform at the ICM for reliable and fast processing of our samples. We are very grateful to Stéphane Nedelec for providing advice on BGJ-398/Infigratinib drug usage in hiPSCs and to Aline Stedman for scientific discussions and advices on manuscript organization. We thank Alexis Eschstruth for his kind contribution to the PCR analysis to identify the cDNA product of JBTS patient c.2304+1G>T splice variant. We are very grateful to Pierre Luc Bardet for his advice in generating custom Matlab scripts for cilia analysis. We thank Virginie Sottile for her support. This work was supported by funding to SSM from the *Fondation pour la Recherche Médicale ("Equipe FRM"* projects EQU201903007943 and EQU202503020010), from the *Fondation pour la Recherche sur le Cancer* (ARCPJA2024080008603), from the *Agence Nationale de la Recherche* - ERA-NET Neuron 2021 "NDCil" (ANR-21-NEU2-0009-03) project and PRC AAPG2024 "CiCerO" project, from the *Fondation Maladies Rares* and the *Association Mieux vivre avec le syndrome de Joubert* under the reference "ASSOJoubert_2024_Schneider". L.B.'s PhD was funded by Sorbonne Université (Doctoral school *Complexité du Vivant* ED515). A.W. received funding from the German Research Foundation (DFG; WI 5451/1-1). Work in E.M.V.'s lab was supported by Italian Ministry of Health - ERA-NET Neuron 2021 "NDCil" (ERP-2021-23680733).

BIBLIOGRAPHY

1. Stoodley, C. J. The Cerebellum and Neurodevelopmental Disorders. *The Cerebellum* **15**, 34–37 (2016).
2. Leto, K. *et al.* Consensus Paper: Cerebellar Development. *The Cerebellum* **15**, 789–828 (2016).
3. Crossley, P. H., Martinez, S. & Martin, G. R. Midbrain development induced by FGF8 in the chick embryo. *Nature* **380**, 66–68 (1996).
4. Chi, C. L., Martinez, S., Wurst, W. & Martin, G. R. The isthmic organizer signal FGF8 is required for cell survival in the prospective midbrain and cerebellum. *Development* **130**, 2633–2644 (2003).
5. Hoshino, M. *et al.* Ptf1a, a bHLH Transcriptional Gene, Defines GABAergic Neuronal Fates in Cerebellum. *Neuron* **47**, 201–213 (2005).

6. Ben-Arie, N. *et al.* Math1 is essential for genesis of cerebellar granule neurons. *Nature* **390**, 169–172 (1997).

7. Machold, R. & Fishell, G. Math1 Is Expressed in Temporally Discrete Pools of Cerebellar Rhombic-Lip Neural Progenitors. *Neuron* **48**, 17–24 (2005).

8. Rakic, P. & Sidman, R. L. Histogenesis of cortical layers in human cerebellum, particularly the lamina dissecans. *J. Comp. Neurol.* **139**, 473–500 (1970).

9. Aldinger, K. A. *et al.* Spatial and cell type transcriptional landscape of human cerebellar development. *Nat. Neurosci.* **24**, 1163–1175 (2021).

10. Haldipur, P. *et al.* Spatiotemporal expansion of primary progenitor zones in the developing human cerebellum. *Science* **366**, 454–460 (2019).

11. Sillitoe, R. V. & Joyner, A. L. Morphology, Molecular Codes, and Circuitry Produce the Three-Dimensional Complexity of the Cerebellum. *Annu. Rev. Cell Dev. Biol.* **23**, 549–577 (2007).

12. Maria, B. L. *et al.* 'Joubert Syndrome' Revisited: Key Ocular Motor Signs With Magnetic Resonance Imaging Correlation. *J. Child Neurol.* **12**, 423–430 (1997).

13. Bachmann-Gagescu, R. *et al.* Healthcare recommendations for Joubert syndrome. *Am. J. Med. Genet. A.* **182**, 229–249 (2020).

14. Bachmann-Gagescu, R. *et al.* Joubert syndrome: a model for untangling recessive disorders with extreme genetic heterogeneity. *J. Med. Genet.* **52**, 514–522 (2015).

15. Serpieri, V. *et al.* Recurrent, founder and hypomorphic variants contribute to the genetic landscape of Joubert syndrome. *J. Med. Genet.* **60**, 885–893 (2023).

16. Mitchison, H. M. & Valente, E. M. Motile and non-motile cilia in human pathology: from function to phenotypes: Motile and non-motile ciliopathies. *J. Pathol.* **241**, 294–309 (2017).

17. Reiter, J. F. & Leroux, M. R. Genes and molecular pathways underpinning ciliopathies. *Nat. Rev. Mol. Cell Biol.* **18**, 533–547 (2017).

18. Mill, P., Christensen, S. T. & Pedersen, L. B. Primary cilia as dynamic and diverse signalling hubs in development and disease. *Nat. Rev. Genet.* **24**, 421–441 (2023).

19. Goetz, S. C. & Anderson, K. V. The primary cilium: a signalling centre during vertebrate development. *Nat. Rev. Genet.* **11**, 331–344 (2010).

20. Reiter, J. F., Blacque, O. E. & Leroux, M. R. The base of the cilium: roles for transition fibres and the transition zone in ciliary formation, maintenance and compartmentalization. *EMBO Rep.* **13**, 608–618 (2012).

21. Jensen, V. L. *et al.* Formation of the transition zone by Mks5/Rpgrip1L establishes a ciliary zone of exclusion (CIZE) that compartmentalises ciliary signalling proteins and controls PIP $_2$ ciliary abundance. *EMBO J.* **34**, 2537–2556 (2015).

22. Wiegering, A. *et al.* Rpgrip1l controls ciliary gating by ensuring the proper amount of Cep290 at the vertebrate transition zone. *Mol. Biol. Cell* **32**, 675–689 (2021).

23. Besse, L. *et al.* Primary cilia control telencephalic patterning and morphogenesis via Gli3 proteolytic processing. *Development* **138**, 2079–2088 (2011).

24. Andreu-Cervera, A. *et al.* The ciliopathy gene *ftm/rpgrip1l* controls mouse forebrain patterning via region-specific modulation of hedgehog/gli signaling. *J. Neurosci.* 2199–18 (2019) doi:10.1523/JNEUROSCI.2199-18.2019.

25. Chang, C.-H. *et al.* Atoh1 Controls Primary Cilia Formation to Allow for SHH-Triggered Granule Neuron Progenitor Proliferation. *Dev. Cell* **48**, 184-199.e5 (2019).

26. Ong, T., Trivedi, N., Wakefield, R., Frase, S. & Solecki, D. J. Siah2 integrates mitogenic and extracellular matrix signals linking neuronal progenitor ciliogenesis with germinal

zone occupancy. *Nat. Commun.* **11**, 5312 (2020).

27. Ott, C. M. *et al.* Permanent deconstruction of intracellular primary cilia in differentiating
granule cell neurons. *J. Cell Biol.* **223**, e202404038 (2024).

28. Chizhikov, V. V. *et al.* Cilia Proteins Control Cerebellar Morphogenesis by Promoting
Expansion of the Granule Progenitor Pool. *J. Neurosci.* **27**, 9780–9789 (2007).

29. Spassky, N. *et al.* Primary cilia are required for cerebellar development and Shh-
dependent expansion of progenitor pool. *Dev. Biol.* **317**, 246–259 (2008).

30. Delous, M. *et al.* The ciliary gene RPGRIP1L is mutated in cerebello-oculo-renal
syndrome (Joubert syndrome type B) and Meckel syndrome. *Nat. Genet.* **39**, 875–881
(2007).

31. Lancaster, M. A. *et al.* Defective Wnt-dependent cerebellar midline fusion in a mouse
model of Joubert syndrome. *Nat. Med.* **17**, 726–731 (2011).

32. Abdelhamed, Z. A. *et al.* The ciliary Frizzled-like receptor Tmem67 regulates canonical
Wnt/β-catenin signalling in the developing cerebellum via Hoxb5. *Sci. Rep.* **9**, 5446
(2019).

33. Damerla, R. R. *et al.* Novel Jbts17 mutant mouse model of Joubert syndrome with cilia
transition zone defects and cerebellar and other ciliopathy related anomalies. *Hum.*
Mol. Genet. **24**, 3994–4005 (2015).

34. Bashford, A. L. & Subramanian, V. Mice with a conditional deletion of *Talpid3* (
KIAA0586) – a model for Joubert syndrome. *J. Pathol.* **248**, 396–408 (2019).

35. Suciu, S. K., Long, A. B. & Caspary, T. Smoothened and ARL13B are critical in mouse for
superior cerebellar peduncle targeting. *Genetics* **218**, iyab084 (2021).

36. Aguilar, A. *et al.* Analysis of human samples reveals impaired SHH-dependent cerebellar
development in Joubert syndrome/Meckel syndrome. *Proc. Natl. Acad. Sci.* **109**, 16951–
16956 (2012).

37. Muguruma, K., Nishiyama, A., Kawakami, H., Hashimoto, K. & Sasai, Y. Self-Organization
of Polarized Cerebellar Tissue in 3D Culture of Human Pluripotent Stem Cells. *Cell Rep.*
10, 537–550 (2015).

38. Nayler, S. P. & Becker, E. B. E. The Use of Stem Cell-Derived Neurons for Understanding
Development and Disease of the Cerebellum. *Front. Neurosci.* **Volume 12-2018**, (2018).

39. Silva, T. P. *et al.* Maturation of Human Pluripotent Stem Cell-Derived Cerebellar
Neurons in the Absence of Co-culture. *Front. Bioeng. Biotechnol.* **8**, 70 (2020).

40. Atamian, A. *et al.* Human cerebellar organoids with functional Purkinje cells. *Cell Stem*
Cell **31**, 39-51.e6 (2024).

41. Kagermeier, T. *et al.* Human organoid model of pontocerebellar hypoplasia 2a
recapitulates brain region-specific size differences. (2024).

42. Guerra, M., Medici, V., La Sala, G. & Farini, D. Unravelling the Cerebellar Involvement in
Autism Spectrum Disorders: Insights into Genetic Mechanisms and Developmental
Pathways. *Cells* **13**, (2024).

43. Ryu, S. *et al.* Modeling Friedreich's ataxia with Bergmann glia-enriched human
cerebellar organoids. *bioRxiv* 2025.05.16.654315 (2025)
doi:10.1101/2025.05.16.654315.

44. Aprile, D. *et al.* Benchmarking cerebellar organoids to model autism spectrum disorder
and human brain evolution. *bioRxiv* 2025.05.14.653684 (2025)
doi:10.1101/2025.05.14.653684.

45. Wiegering, A. *et al.* A differential requirement for ciliary transition zone proteins in
human and mouse neural progenitor fate specification. *Nat. Commun.* **16**, 3258 (2025).

46. Andreu-Cervera, A., Catala, M. & Schneider-Maunoury, S. Cilia, ciliopathies and
hedgehog-related forebrain developmental disorders. *Neurobiol. Dis.* **150**, 105236
(2021).

47. Silva, T. P. *et al.* Transcriptome profiling of human pluripotent stem cell-derived
cerebellar organoids reveals faster commitment under dynamic conditions. *Biotechnol.*
Bioeng. **118**, 2781–2803 (2021).

48. Li, M. *et al.* Integrative functional genomic analysis of human brain development and
neuropsychiatric risks. *Science* **362**, eaat7615 (2018).

49. Wechsler-Reya, R. J. & Scott, M. P. Control of Neuronal Precursor Proliferation in the
Cerebellum by Sonic Hedgehog. *Neuron* **22**, 103–114 (1999).

50. Pollara, L. *et al.* Production and characterisation of four Joubert syndrome patient-
derived induced pluripotent stem cell (iPSC) lines with mutations in either RPGRIP1L or
CPLANE1 genes. *Stem Cell Res.* **86**, 103734 (2025).

51. Richards, S. *et al.* Standards and guidelines for the interpretation of sequence variants:
a joint consensus recommendation of the American College of Medical Genetics and
Genomics and the Association for Molecular Pathology. *Genet. Med.* **17**, 405–424
(2015).

52. Wiegering, A. *et al.* Cell type-specific regulation of ciliary transition zone assembly in
vertebrates. *EMBO J.* **37**, (2018).

53. Taverna, E. & Huttner, W. B. Neural Progenitor Nuclei IN Motion. *Neuron* **67**, 906–914
(2010).

54. Das, R. M. & Storey, K. G. Apical Abscission Alters Cell Polarity and Dismantles the
Primary Cilium During Neurogenesis. *Science* **343**, 200–204 (2014).

55. Laguesse, S., Peyre, E. & Nguyen, L. Progenitor genealogy in the developing cerebral
cortex. *Cell Tissue Res.* **359**, 17–32 (2015).

56. Sokpor, G., Brand-Saberi, B., Nguyen, H. P. & Tuoc, T. Regulation of Cell Delamination
During Cortical Neurodevelopment and Implication for Brain Disorders. *Front. Neurosci.*
16, 824802 (2022).

57. Gratton, M.-O. *et al.* Hes6 Promotes Cortical Neurogenesis and Inhibits Hes1
Transcription Repression Activity by Multiple Mechanisms. *Mol. Cell. Biol.* **23**, 6922–
6935 (2003).

58. Murai, K., Philpott, A. & Jones, P. H. Hes6 Is Required for the Neurogenic Activity of
Neurogenin and NeuroD. *PLoS ONE* **6**, e27880 (2011).

59. Behesti, H., Kocabas, A., Buchholz, D. E., Carroll, T. S. & Hatten, M. E. Altered temporal
sequence of transcriptional regulators in the generation of human cerebellar granule
cells. *eLife* **10**, e67074 (2021).

60. Arellano, J. I., Guadiana, S. M., Breunig, J. J., Rakic, P. & Sarkisian, M. R. Development
and distribution of neuronal cilia in mouse neocortex. *J. Comp. Neurol.* **520**, 848–873
(2012).

61. Wu, J. Y. *et al.* Mapping of neuronal and glial primary cilia contactome and connectome
in the human cerebral cortex. *Neuron* **112**, 41-55.e3 (2024).

62. Jenks, A. D. *et al.* Primary Cilia Mediate Diverse Kinase Inhibitor Resistance Mechanisms
in Cancer. *Cell Rep.* **23**, 3042–3055 (2018).

63. Nita, A. *et al.* FGFR2 residence in primary cilia is necessary for epithelial cell signaling. *J.*
Cell Biol. **224**, e202311030 (2025).

64. Long, K. R. & Huttner, W. B. How the extracellular matrix shapes neural development.
Open Biol. **9**, 180216 (2019).

65. Álvarez, Z. *et al.* Artificial extracellular matrix scaffolds of mobile molecules enhance
maturation of human stem cell-derived neurons. *Cell Stem Cell* **30**, 219-238.e14 (2023).
66. Yang, L., Wei, M., Xing, B. & Zhang, C. Extracellular matrix and synapse formation.
Biosci. Rep. **43**, BSR20212411 (2023).
67. Joyner, A. L., Liu, A. & Millet, S. Otx2, Gbx2 and Fgf8 interact to position and maintain a
mid–hindbrain organizer. *Curr. Opin. Cell Biol.* **12**, 736–741 (2000).
68. Sato, T. & Joyner, A. L. The duration of *Fgf8* isthmic organizer expression is key to
patterning different tectal-isthmo-cerebellum structures. *Development* **136**, 3617–3626
(2009).
69. Green, M. J. *et al.* Independently specified *Atoh1* domains define novel developmental
compartments in rhombomere 1. *Development* **141**, 389–398 (2014).
70. Suzuki-Hirano, A., Harada, H., Sato, T. & Nakamura, H. Activation of Ras-ERK pathway by
Fgf8 and its downregulation by Sprouty2 for the isthmus organizing activity. *Dev. Biol.*
337, 284–293 (2010).
71. Yu, T., Yaguchi, Y., Echevarria, D., Martinez, S. & Basson, M. A. Sprouty genes prevent
excessive FGF signalling in multiple cell types throughout development of the
cerebellum. *Development* **138**, 2957–2968 (2011).
72. Del Corral, R. D., Breitkreuz, D. N. & Storey, K. G. Onset of neuronal differentiation is
regulated by paraxial mesoderm and requires attenuation of FGF signalling.
Development **129**, 1681–1691 (2002).
73. Wilcock, A. C., Swedlow, J. R. & Storey, K. G. Mitotic spindle orientation distinguishes
stem cell and terminal modes of neuron production in the early spinal cord.
Development **134**, 1943–1954 (2007).
74. Olivera-Martinez, I. & Storey, K. G. Wnt signals provide a timing mechanism for the FGF-
retinoid differentiation switch during vertebrate body axis extension. *Development* **134**,
2125–2135 (2007).
75. Lukaszewicz, A., Savatier, P., Cortay, V., Kennedy, H. & Dehay, C. Contrasting Effects of
Basic Fibroblast Growth Factor and Neurotrophin 3 on Cell Cycle Kinetics of Mouse
Cortical Stem Cells. *J. Neurosci.* **22**, 6610–6622 (2002).
76. Gantner, C. W. *et al.* FGF-MAPK signaling regulates human deep-layer corticogenesis.
Stem Cell Rep. **16**, 1262–1275 (2021).
77. Basson, M. A. *et al.* Specific regions within the embryonic midbrain and cerebellum
require different levels of FGF signaling during development. *Development* **136**, 1962–
1962 (2009).
78. Catala, M. Development of the Central Nervous System. in *Textbook of Pediatric*
Neurosurgery (eds. Di Rocco, C., Pang, D. & Rutka, J. T.) 1–99 (Springer International
Publishing, Cham, 2019). doi:10.1007/978-3-319-31512-6_1-1.
79. Watson, C., Shimogori, T. & Puelles, L. Mouse *Fgf8* -Cre-LacZ lineage analysis defines the
territory of the postnatal mammalian isthmus. *J. Comp. Neurol.* **525**, 2782–2799 (2017).
80. Kasberg, A. D., Brunskill, E. W. & Steven Potter, S. SP8 regulates signaling centers during
craniofacial development. *Dev. Biol.* **381**, 312–323 (2013).
81. Wagner, A. E. *et al.* SP8 Promotes an Aggressive Phenotype in Hepatoblastoma via FGF8
Activation. *Cancers* **12**, (2020).
82. Sahara, S., Kawakami, Y., Izpisua Belmonte, J. C. & O'Leary, D. D. Sp8 exhibits reciprocal
induction with Fgf8 but has an opposing effect on anterior-posterior cortical area
patterning. *Neural Develop.* **2**, 10 (2007).
83. Hämmerle, B. *et al.* Transient expression of Mnb/Dyrk1a couples cell cycle exit and

differentiation of neuronal precursors by inducing p27KIP1 expression and suppressing
NOTCH signaling. *Development* **138**, 2543–2554 (2011).

84. Sudarov, A. *et al.* Ascl1 Genetics Reveals Insights into Cerebellum Local
Circuit Assembly. *J. Neurosci.* **31**, 11055 (2011).

85. Cerrato, V. *et al.* Multiple origins and modularity in the spatiotemporal emergence of
cerebellar astrocyte heterogeneity. *PLOS Biol.* **16**, e2005513 (2018).

86. Louvi, A., Alexandre, P., Métin, C., Wurst, W. & Wassef, M. The isthmic neuroepithelium
is essential for cerebellar midline fusion. *Development* **130**, 5319–5330 (2003).

87. Waas, B. *et al.* Dual and opposing roles for the kinesin-2 motor, KIF17, in Hedgehog-
dependent cerebellar development. *Sci. Adv.* **10**, eade1650.

88. Jiwani, T., Kim, J. J. & Rosenblum, N. D. Suppressor of Fused (Sufu) controls cerebellum
granule cell proliferation by suppressing Fgf8 and spatially regulating Gli proteins.
Development dev.170274 (2020) doi:10.1242/dev.170274.

89. Kim, J. J. *et al.* Suppressor of Fused Controls Mid-Hindbrain Patterning and Cerebellar
Morphogenesis via GLI3 Repressor. *J. Neurosci.* **31**, 1825–1836 (2011).

90. Yabut, O. R. *et al.* Aberrant FGF signaling promotes granule neuron precursor expansion
in SHH subgroup infantile medulloblastoma. https://doi.org/10.7554/elife.100767.2
(2024) doi:10.7554/elife.100767.2.

91. De Mori, R. *et al.* Hypomorphic Recessive Variants in SUFU Impair the Sonic Hedgehog
Pathway and Cause Joubert Syndrome with Cranio-facial and Skeletal Defects. *Am. J.*
Hum. Genet. **101**, 552–563 (2017).

92. Serpieri, V. *et al.* SUFU haploinsufficiency causes a recognisable
neurodevelopmental phenotype at the mild end of the Joubert syndrome spectrum. *J.*
Med. Genet. **59**, 888 (2022).

93. Brugières, L. *et al.* High Frequency of Germline SUFU Mutations in Children With
Desmoplastic/Nodular Medulloblastoma Younger Than 3 Years of Age. *J. Clin. Oncol.* **30**,
2087–2093 (2012).

94. Guerrini-Rousseau, L. *et al.* Germline SUFU mutation carriers and medulloblastoma:
clinical characteristics, cancer risk, and prognosis. *Neuro-Oncol.* **20**, 1122–1132 (2018).

95. Roepman, R. *et al.* Interaction of nephrocystin-4 and RPGRIP1 is disrupted by
nephronophthisis or Leber congenital amaurosis-associated mutations. *Proc. Natl. Acad.*
Sci. **102**, 18520–18525 (2005).

96. Arts, H. H. *et al.* Mutations in the gene encoding the basal body protein RPGRIP1L, a
nephrocystin-4 interactor, cause Joubert syndrome. *Nat. Genet.* **39**, 882–888 (2007).

97. Sang, L. *et al.* Mapping the NPHP-JBTS-MKS Protein Network Reveals Ciliopathy Disease
Genes and Pathways. *Cell* **145**, 513–528 (2011).

98. Demuynck, B. *et al.* Infigratinib low dose therapy is an effective strategy to treat
hypochondroplasia. *J. Bone Miner. Res.* zjaf088 (2025) doi:10.1093/jbmr/zjaf088.

99. Poretti, A. *et al.* Joubert syndrome: neuroimaging findings in 110 patients in correlation
with cognitive function and genetic cause. *J. Med. Genet.* **54**, 521 (2017).

100.Dobin, A. *et al.* STAR: ultrafast universal RNA-seq aligner. *Bioinformatics* **29**, 15–21
(2013).

101.Ewels, P., Magnusson, M., Lundin, S. & Käller, M. MultiQC: summarize analysis results
for multiple tools and samples in a single report. *Bioinformatics* **32**, 3047–3048 (2016).

102.Liao, Y., Smyth, G. K. & Shi, W. featureCounts: an efficient general purpose program for
assigning sequence reads to genomic features. *Bioinformatics* **30**, 923–930 (2014).

103.Love, M. I., Huber, W. & Anders, S. Moderated estimation of fold change and dispersion

for RNA-seq data with DESeq2. *Genome Biol.* **15**, 550 (2014).

104. Zink, R. C., Wolfinger, R. D. & Mann, G. Summarizing the incidence of adverse events

using volcano plots and time intervals. *Clin. Trials* **10**, 398–406 (2013).

105. Zhou, Y. *et al.* Metascape provides a biologist-oriented resource for the analysis of

systems-level datasets. *Nat. Commun.* **10**, 1523 (2019).

1041

FIGURE 1. *RPGRIP1L*-**deficient cerebellar organoids present a severe reduction of Purkinje**

cell markers and a mild decrease of glutamatergic lineage markers

(A) Diagram of the 3D cerebellar differentiation protocol. Time-line and drugs (SB: SMAD

antagonists SB-431542; FGF2: Fibroblast growth factor 2; FGF19: Fibroblast growth factor 19;

SDF1: stromal cell-derived factor 1) are indicated on top, culture media at the bottom. The

blue circular arrow on top indicates orbital rotation. Protocol modified after [39] **(B)** Schematic

representation of the RPGRIP1L protein and relative position of the mutations present in

hiPSC lines. In both *RPGRIP1L* KO lines (Ph2 in purple, Wtc11 in pink) homozygous frameshift

mutations result in premature stop codon before the first coiled-coil (CC) domain. JBTS

patient (NG2266 in green) variants p.Q684X and c.2304+1G>T result in stop codons between

the first and the second C2 domain. **(C)** Brain marker gene expression in cerebellar organoids

at day 7. Heatmap based on the normalized expression values of selected brain marker genes.

Z score was calculated on the log2(tpm+1) data from the bulk RNASeq analysis. Right: scheme

of the gene expression domains in the E9.5 mouse brain. MHB: midbrain-hindbrain boundary.

Thinner box for Wnt1: expression restricted to the roof plate. See supplementary Table 1 for

number of independent experimental replicates (N) and sample numbering. **(D, E)** Graphs

showing temporal gene expression analysis of Purkinje cells (*OLIG2* and *CALB1*) (D) and

glutamatergic (*BARHL1* and *ATOH1*) (E) lineage markers in control (blue), *RPGRIP1L* KO

(magenta), and JBTS patient-derived (green) organoids throughout differentiation.

Normalized gene expression (Log2(tpm+1)) values from bulk RNASeq analysis are displayed

as mean ± SEM. More than 20 organoids were analyzed per condition per experiment. For

control and *RPGRIP1L* KO, data were obtained from both Ph2 and Wtc11 lines. Day 0 (hiPSCs):

N=2 for controls, N=2 for RPGRIP1L KO, N=1 for JBTS patient line; day 7-35 organoids: see

Supplementary Table 2 for number of independent experimental replicates. **(F)**

Immunofluorescence for OLIG2 (Purkinje progenitors) on cryosections from control,

RPGRIP1L KO and JBTS patient organoids at day 21. **(G)** Graph showing the % of OLIG2+ over

DAPI+ nuclei. Each dot represents an organoid section. Several sections from different

organoids were analyzed per condition (control: Ph2 N=1, *RPGRIP1L* KO: Ph2 N=1; JBTS

patient: NG2266 N=1). Data are shown as mean ± SEM. Asterisks denote statistical

significance according to One-Way ANOVA Kruskal-Wallis test with Dunn's correction

(***P<0.0002 and ****P< 0.0001). **(H)** Immunofluorescence for CALB1 on cryosections from

day 28 control, *RPGRIP1L* KO and JBTS patient organoids. **(I)** Quantification of the % of CALB1+

cells over DAPI+ nuclei, on > 15 sections from different organoids per experiment per

condition (control and *RPGRIP1L* KO: Ph2 line N=2 – round dots; JBTS patient: NG2266 line

N=2 – squared dots). Data are shown as mean ± SEM. Asterisks denote statistical significance

according to One-Way ANOVA Kruskal-Wallis test with Dunn's correction (****P<0.0001). **(J)**

Immunofluorescence for BARHL1 on cryosections from day 28 control, *RPGRIP1L* KO and JBTS

patient organoids. **(K)** Quantification of the % of BARHL1+ over DAPI+ nuclei, in > 15 sections

from different organoids per experiment per condition (control and *RPGRIP1L* KO: Ph2 line

N=2 – round dots, Wtc11 line N=1 – triangular dots; JBTS patient: NG2266 line N=2 – squared

dots). Data are shown as mean ± SEM. Asterisks denote statistical significance according to

One-Way ANOVA Kruskal-Wallis test with Dunn's correction (****P<0.0001). N: number of

independent experimental replicates. Scale bars: 100 µm in F, H and J.

1085

FIGURE 2. Organoid size and area of SOX2⁺/ZO1⁺ progenitors are increased in *RPGRIP1L*-

deficient cerebellar organoids.

(A) Representative bright field images of cerebellar organoids at the indicated time points.

(B) Graph representing the organoid growth rate, measured every 7 days from day 7 to day

35. Data are shown as the mean ± SEM of average organoid area from several independent

experiment (N=3 Ph2 line, N=3 Wtc11 line, N=3 NG2266 line, n=10-60 organoids analyzed per

experiment per condition). For control and *RPGRIP1L* KO conditions, data from Ph2 and Wtc11

lines were pooled. Asterisks denote statistical significance according to Two-Way ANOVA test

(*P<0.033, ***P<0.0002, ****P<0.0001). **(C)** Immunofluorescence for SOX2 neural

progenitor marker (magenta) and ZO1 apical marker (green) on cryosections from control,

RPGRIP1L KO and JBTS patient organoids at day 14. Examples of small neural rosettes are

circled by dotted lines. **(D)** Quantification of the ZO1+ area over the DAPI+ area in sections

from control, *RPGRIP1L* KO and JBTS patient organoids at day 14. Each dot represents an

organoid section. Several sections from different organoids were analyzed per condition:

control and *RPGRIP1L* KO: N=2 (Ph2 N=1 – round dots, Wtc11 N=1 – triangular dots), JBTS

patient: NG2266 N=1 – squared dots). Mean ± SEM are indicated. Asterisks: statistical

significance according to One-Way ANOVA Kruskal-Wallis test with Dunn's correction (****P<

0.0001) **(E)** Graph showing the % of SOX2⁺ cells in sections from control, *RPGRIP1L* KO and

JBTS patient organoids at day 14. Each dot represents an organoid section. Several sections

from different organoids were analyzed per condition: control and *RPGRIP1L* KO: N=3 (Ph2

N=1 – round dots, Wtc11 N=2 – triangular dots), JBTS patient: NG2266 N=1 – squared dots).

Mean ± SEM are indicated. Asterisks denote statistical significance according to One-Way

ANOVA Kruskal-Wallis test with Dunn's correction (****P< 0.0001). N: number of

independent experimental replicates. Scale bars: 500 μm in A and 100 μm in C.

1110

FIGURE 3. Differential requirement of RPGRIP1L protein for ciliogenesis in apical and non-

polarized neural progenitors.

(A-C) Immunofluorescence for INPP5E (green) and gamma-TUBULIN (magenta) on sections

from control (A), *RPGRIP1L* KO (B) and JBTS patient (C) organoids at day 14. Scale bar, 10 μm.

The schematic on the left represents the position of the scanned regions: i.e. internal lumen

of neural rosettes. **(D)** Graph showing the quantification of ciliary length. Measures for

individual cilia are represented and the mean value is indicated. Asterisks: statistical

significance according to One-Way ANOVA Kruskal-Wallis and Dunn's test (**P < 0.0021). **(E-**

G) Immunofluorescence for INPP5E (green) and gamma-TUBULIN (magenta) on sections from

control (E), *RPGRIP1L* KO (F) and JBTS patient (G) organoids at day 14. Scale bar, 10 μm. The

schematic on the left represents the position of the scanned regions: i.e. non-polarized tissue.

(H-J) Graphs showing quantifications of ciliary properties in non-polarized areas of control,

RPGRIP1L KO and JBTS patient cerebellar organoids. Asterisks denote statistical significance

according to One-Way ANOVA Kruskal-Wallis and Dunn's test (**P < 0.0021, ****P < 0.0001).

In **(H)** Ciliary density is calculated as the number of INPP5E+ axonemes over the total number

of gamma-TUBULIN basal bodies per field. Each dot on the graph represents one quantified

field representative for one organoid section. Data are from >15 organoids from independent

experiments and hiPSC lines. Control and *RPGRIP1L* KO: N=2 (Ph2 N=1, Wtc11 N=1); JBTS

patient: NG2266 N=1. In **(I-J)** each dot represents one individual cilium. Average axonemal

INPP5E intensity after background subtraction (I) and average cilia length (J) are calculated

from >200 cilia measured in >15 organoids from independent experiments and hiPSC lines.

Control and *RPGRIP1L* KO: N=2 (Ph2 N=1, Wtc11 N=1); JBTS patient: NG2266 N=1. N: number

of independent experimental replicates. Scale bars: 10 μm in A-C and E-G.

1134

FIGURE 4. Transcriptome analysis reveals early FGF signaling upregulation and neurogenesis

impairment in *RPGRIP1L*-deficient cerebellar organoids

(A, B) Volcano plots representing differentially expressed genes (DEGs) resulting from DESeq2

analysis (only genes with P<0.05; |log$_2$FC|>1 are colored) in *RPGRIP1L* KO versus control

condition (A) or in JBTS patient versus control condition (B) at day 14. Selected genes from

representative pathways and cellular processes are circled with different colors as indicated

in the legend on the top right of the panel. **(C)** qPCR analysis of *FGF8* expression levels on

cerebellar organoids at different timepoints (control and *RPGRIP1L* KO: N=6 (Ph2 N=2, Wtc11

N=4); JBTS patient: N=2). Data are shown as individual values; mean ± SEM are indicated.

Asterisks denote statistical significance according to ordinary Two-Way ANOVA performed on

control and *RPGRIP1L* KO samples (*P<0.033, ****P < 0.0001). **(D)** Heatmap representing

normalized RNA expression values of selected DEGs in control and *RPGRIP1L*-deficient

cerebellar organoids over time. 20 organoids were analyzed per condition; See

supplementary Table 2 for number of independent experiments and sample numbering. N:

number of independent experimental replicates.

1150

FIGURE 5. *RPGRIP1L*-deficient organoids display severe neuronal maturation and

extracellular matrix defects as shown by transcriptome analysis

(A-B) Volcano plots representing DEGs resulting from DESeq2 analysis (only genes with

P<0.001, |log$_2$FC|>2 are colored) in *RPGRIP1L* KO versus control condition (A) or in JBTS

patient versus control condition (B) at day 28. Selected genes involved in neuronal

differentiation or in building ECM are circled with different colors as indicated in the legend

on the top right of the panel. **(C)** Heatmap representing the normalized RNA expression values

of selected differentially expressed genes in control and *RPGRIP1L*-deficient cerebellar

organoids over time. 20 organoids were analyzed per condition. See supplementary Table 2

for number of independent experiments and sample numbering. **(D-E)** Selected GO-terms

overrepresented among *RPGRIP1L* KO (D) and JBTS patient (E) downregulated genes

extracted from bulk RNA seq DESeq2 lists at day 28. N: number of independent experimental

replicates.

1164

FIGURE 6. Blocking FGF signaling with BGJ-398 drug rescues neurogenesis in *RPGRIP1L*-

deficient cerebellar organoids.

(A) Heatmap representing the normalized RNA expression values over time of selected DEGs

in control and *RPGRIP1L* KO cerebellar organoids, untreated or treated with BGJ-398. See

supplementary Table 3 for sample numbering and number of independent experiments. At

least 20 organoids were analyzed per condition per experiment. **(B)** Heatmap representing

the normalized RNA expression values over time of selected DEGs in JBTS patient-derived

organoids, untreated or treated with BGJ-398. See supplementary Table 4 for sample

numbering and number of independent experiments. At least 20 organoids were analyzed

per condition per experiment. **(C)** Immunofluorescence for SOX2 (gray), NEUROD1 (green)

and HUC/D (magenta) on organoid cryosections from control and *RPGRIP1L*-deficient

untreated or treated with BGJ-398 at day 14. Scale bar, 100 μm. **(D-F)** Graphs showing the %

of NEUROD1+ (D), HUC/D+ (E) and SOX2+ (F) cells over DAPI+ nuclei., counted in > 15 sections

from different organoids per condition per experiment. Controls and *RPGRIP1L* KO: N=3 (Ph2

N=1 – circular dots, Wtc11 N=2 – triangular dots), JBTS: NG2266 N=1 squared dots. Each dot

in the graph represents one organoid; mean ± SEM are shown. Asterisks denote statistical

significance according to One-Way ANOVA Kruskal-Wallis test with Dunn's correction

(**P<0.0021; ****P<0.0001). **(G)** Immunofluorescence for OLIG2 (green) on organoid

cryosections from day 21 control and *RPGRIP1L*-deficient untreated or treated with BGJ-398.

Scale bar, 100 μm. **(H)** Graph showing the % of OLIG2+ over DAPI+ nuclei, counted in several

sections from different organoids per condition. Controls and *RPGRIP1L* KO: N=1 (Ph2 N=1);

JBTS: NG2266 N=1. Each dot in the graph represents one organoid; mean ± SEM are shown.

Asterisks denote statistical significance according to One-Way ANOVA Kruskal-Wallis test with

Dunn's correction (**P<0.0021; ***P<0.0002). N: number of independent experimental

replicates.

1190

FIGURE 7. EdU pulse-chase experiment shows that neural progenitor proliferation is

increased in *RPGRIP1L*-deficient organoids and can be rescued by blocking FGF signaling

(A) Immunofluorescence for SOX2 (magenta) and EdU (green) on organoid cryosections at

day 18 – 2h after EdU pulse, from control and *RPGRIP1L*-deficient (KO and JBTS patient),

untreated or treated with BGJ-398. **(B, C)** Graphs showing the % of EdU+ cells over the DAPI+

nuclei (B) and the % of EdU+/SOX2+ cells over the total number of SOX2+ cells (C) at day 18 –

2h after EdU pulse, counted in several sections from different organoids per condition.

Control and *RPGRIP1L* KO: N=1 (Wtc11); JBTS: N=1 (NG2266). Each dot in the graph represents

one organoid; mean ± SEM are shown. Asterisks: statistical significance according to Ordinary-

Way ANOVA after normal distribution testing (*P<0.033; ****P<0.0001) (B-C). **(D)**

Immunofluorescence for SOX2 (magenta), HUC/D (blue) and EdU (green) on organoid cryosections at day 23 – 5 days after the 2h EdU pulse (chase experiment), from control and *RPGRIP1L*-deficient (KO and JBTS patient) untreated or treated with BGJ-398. **(E, F)** Graphs showing the % of EdU+ cells over the DAPI+ nuclei (E) and the % of EdU+/SOX2+ cells over the total number of SOX2+ cells at day 23 (chase experiment). Cells were counted in several sections from different organoids per condition. Control and *RPGRIP1L* KO: N=1 (Wtc11); JBTS: N=1 (NG2266). Each dot in the graph represents one organoid; mean ± SEM are shown. Asterisks: statistical significance according to Ordinary-Way ANOVA after normal distribution testing (**P<0.0021; ****P<0.0001) **(G)** Graph showing the ratio between "strong" and "faint" EdU labeling in the % of EdU+ cells over total nuclei. Mean ± SEM are shown. N: number of independent experimental replicates. Scale bars: 100 μm in A and D.

Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6

Figure 7

Supplementary Figure 1. Cerebellar organoids generated from control human induced pluripotent stem cells recapitulate early steps of cerebellar development

(A-C) Immunofluorescence for SOX2 (magenta, neural progenitors) and HUC/D (green, early-born neurons) on cryosections from control organoids at indicated time-points. **(D-G)** Graph showing normalized temporal gene expression analysis from bulk RNAseq data **(D)**: Purkinje cell markers: OLIG2, SKOR2, CALB1, **(E)** Glutamatergic lineage markers BARHL1, PAX6, ATOH1, **(F)** Granule Neuron marker (*GABRA6*), and **(G)** *SHH*. Data are displayed as mean ± SEM and were obtained from both Ph2 and Wtc11 cell lines. Day 0 (hiPSCs): N=2; day 7-35 organoids: see Supplementary Table 2 for number of independent experimental replicates. **(H)** Immunofluorescence for BARHL1 (glutamatergic lineage marker) and CALB1 (Purkinje cell marker) on day 28 control organoid cryosection. Scale bars: 100 μm in A-C and H

Supplementary Figure 2. Altered RNA expression of Purkinje cell and glutamatergic lineage markers in *RPGRIP1L*-deficient cerebellar organoids

(A-C') Immunofluorescence for RPGRIP1L (in green), the ciliary marker ARL13B (in magenta) and the nuclear marker DAPI (blue, A, B, C) or the basal body marker GTUB (blue, A', B, C') on cryosections from control (A, A'), *RPGRIP1L* KO (B, B') and JBTS patient (C, C') organoids at day 21. Scale bars: 10 μm in A-C and 2 μm in A'-C'. **(D)** Graph showing normalized temporal gene expression analysis from bulk RNAseq data, displayed as mean ± SEM, of the Purkinje lineage markers *SKOR2, FOXP2, PDE1C* and *ITPR1* along the differentiation protocol. For control and *RPGRIP1L* KO conditions data were obtained from both Ph2 and Wtc11 cell lines. See Supplementary Table 2 for number of independent experimental replicates. **(E-F)** qPCR analysis of (E) the PC markers *OLIG2, SKOR2* and *CALB1* and (F) the glutamatergic lineage markers *PAX6, BARHL1, ATOH1*, in cerebellar organoids at different timepoints from several independent experiments. Each dot in the graph represents one independent experiment per timepoint and condition; circular dots represent Ph2 line, triangular dots represent Wtc11 line, squared dots represent NG2266 line. Mean ± SEM are shown. Asterisks denote statistical significance according to ordinary Two-Way ANOVA (*P<0.033, **P < 0.0021, ***P<0.0002 and ****P< 0.0001). **(G)** Immunofluorescence for ATOH1 (glutamatergic lineage) on cryosections from control, *RPGRIP1L* KO and JBTS patient organoid cryosections at day 28. **(H)** Graph showing the % of ATOH1-positive cells over the total number of nuclei stained with DAPI. Positive cells were counted in more than 15 sections from different organoids per

experiment per condition. Control and *RPGRIP1L* KO: N=3 (Ph2 N=2, Wtc11 N=1); JBTS patient: NG2266 N=2). Data are shown as individual values. Mean ± SEM are indicated. Asterisks denote statistical significance according to One-Way ANOVA Kruskal-Wallis test with Dunn's correction (****P<0.0001). **(I-K)** Graphs showing the average intensity of CALB1 (I), BARHL1 (J), ATOH1 (K) labeling on cryosections from control, *RPGRIP1L* KO and JBTS organoids at day 28. Average cell intensity was measured in more than 15 sections from different organoids per experiment per condition. Relative mean intensity was calculated considering the mean intensity in control organoid sections as the reference value (1). Data are shown as individual values. Mean ± SEM are indicated; circular dots represent Ph2 line, triangular dots represent Wtc11 line, squared dots represent NG2266 line. Asterisks denote statistical significance according to One-Way ANOVA Kruskal-Wallis test with Dunn's correction (*P<0.033, and ****P<0.0001). N: number of independent experimental replicates. Scale bars: 100 µm in H.

Supplementary Figure 3. FGF8 protein localization at the apical sides of early neural progenitors

(A-C) Immunofluorescence for SOX2 (in magenta) and FGF8 (in green) on cryosections from day 14 control (A), *RPGRIP1L* KO (B) and JBTS patient (C) organoids. Scale bar, 100 µm. **(D-H)** Confocal images of FGF8 (green) and ZO1 (red) immunofluorescence showing accumulation of FGF8 protein at ZO1+ apical sides of progenitor rosettes in control (D), *RPGRIP1L* KO (E) and JBTS patient (F) organoids. *RPGRIP1L* KO (G) and JBTS patient (H) organoids also present FGF8 protein accumulation at ZO1+ apical junctions at the organoid borders. Scale bars: 100 µm in A and 10 µm in B-F.

Supplementary Figure 4. FGF signaling inhibition rescues organoid size and gene expression in *RPGRIP1L* deficient organoids.

(A) Scheme representing the experimental plan for organoid treatment with FGFR-inhibitor (BGJ-398) along the 3D cerebellar differentiation protocol. Arrows on the top represent the timepoints of BGJ-398 pulses. Arrows at the bottom indicate the timepoints at which organoids were collected after receiving BGJ-398 treatment. **(B)** Graph representing the growth rate of cerebellar organoids (left) and representative bright field images of cerebellar organoids at day 28 (right). Organoid area was measured every 7 days from day 7 to day 35 of the differentiation protocol. Data are shown as the mean ± SEM of average organoid area

from several independent experiments. Control and *RPGRIP1L* KO: N=3 (Wtc11), JBTS patient: N=1 (NG2266 line); n=10-60 organoids analyzed per experiment per condition. Scale bar, 500 µm. **(C)** Heatmap representation of the normalized gene expression values of selected differentially expressed genes in control and *RPGRIP1L*-deficient, untreated or treated with BGJ-398, cerebellar organoids over time. Sample numbering at the bottom is explained in Supplementary Table 3. Control: N=4 for days 14, 21 and 28; *RPGRIP1L* KO untreated: N=4 for days 14, 21 and 28; RPGRIP1L KO BGJ-treated : N=3 for days 14, 21 and 28. At least 20 organoids were analyzed per experiment per condition. **(D)** Heatmap representation of the normalized gene expression values over time of selected differentially expressed genes in JBTS patient-derived cerebellar organoids, untreated or treated with BGJ-398, as indicated on top. Sample numbering at the bottom is explained in Supplementary Table 4. JBTS patient organoids untreated: N=4 for days 14, 21 and 28; JBTS patient organoids BGJ-treated : N=2 for days 14, 21 and 28. At least 20 organoids were analyzed per experiment per condition. **(E-L)** Graphs showing gene expression levels by qPCR analysis of *FGF8* (E), *ETV4* (F) *ETV5* (G)*, SPRY1* (H)*, NEUROD1* (I)*, NEUROG1* (J)*, SKOR2* (K) and *CALB1* (L) in control and *RPGRIP1L*-deficient, untreated or treated with BGJ-398, cerebellar organoids at different timepoints. Data are shown as individual values from independent experiments, mean ± SEM are indicated. For (E-G, L) control and *RPGRIP1L* KO: N=4 (Wtc11); JBTS patient: N=2 (NG2266). For (H-K) control and *RPGRIP1L* KO: N=3 (Wtc11); JBTS patient: N=1 (NG2266). N: number of independent experimental replicates.

Supplementary Figure 5. NG2266 splice variant c.2304+1G>T results in intron retention.

(A) Schematic representation of *RPGRIP1L* gene exons 14-18 and PCR primers position to analyze cDNA products of *RPGRIP1L* gene in JBTS patient cells (NG2266 line) compared to control (Ph2 line). **(B)** PCR products from JBTS patient and control cerebellar cDNAs, templated by primer pairs as indicated, were analyzed by agarose gel electrophoresis and visualized with ethidium bromide. The primer pair 1-2 only amplifies JBTS patient cDNA, showing intron 16-17 retention. The primer pair 1-3 amplify both the second JBTS patient allele (encoding the *RPGRIP1L* Q684X variant) and control cDNA. **(C)** Sequence of the PCR product templated by primer pair 1-2 on cDNA derived from NG2266 cell line.

Supplementary Figure 1

Supplementary Figure 2

Supplementary Figure 3

Supplementary Figure 4

Supplementary Figure 5

Supplementary Table 1.

Label	Condition	N per timepont	Cell line	Sample name
1	Control	Day 7 N=6	Ph2 cell line	CBI-ph2-25-WT-d7
2				CBII-ph2-25-WT-d7
3			wtc11 cell line	CBIV-wtc11-19-WT-d7
4				CBV-wtc11-19-WT-d7
5				CBVI-wtc11-19-WT-d7
6				CBVII-wtc11-19-WT-d7
7	RPGRIP1L KO	Day 7 N=6	Ph2 cell line	CBI-ph2-44-KO-d7
8				CBII-ph2-44-KO-d7
9			wtc11 cell line	CBIV-wtc11-65-KO-d7
10				CBV-wtc11-65-KO-d7
11				CBVI-wtc11-65-KO-d7
12				CBVII-wtc11-65-KO-d7
13	JBTS patient	Day 7 N=4	NG2266 JBTS patient derived cell line	CBI-NG-2266-d7
14				CBII-NG-2266-d7
15				CBVII-NG-2266-d7
16				CBVIII-NG-2266-d7

Supplementary Table 2.

Label	Condition	N per timepont	Cell line	Sample name
1	Control	Day 7 N=6	Ph2 cell line	CBI-ph2-25-WT-d7
2				CBII-ph2-25-WT-d7
3			wtc11 cell line	CBIV-wtc11-19-WT-d7
4				CBV-wtc11-19-WT-d7
5				CBVI-wtc11-19-WT-d7
6				CBVII-wtc11-19-WT-d7
7		Day 14 N=7	Ph2 cell line	CBI-ph2-25-WT-d14
8				CBII-ph2-25-WT-d14
9				CBIII-ph2-25-WT-d14
10			wtc11 cell line	CBIV-wtc11-19-WT-d14
11				CBV-wtc11-19-WT-d14
12				CBVI-wtc11-19-WT-d14
13				CBVII-wtc11-19-WT-d14
14		Day 21 N=7	Ph2 cell line	CBI-ph2-25-WT-d21
15				CBII-ph2-25-WT-d21
16				CBIII-ph2-25-WT-d21
17			wtc11 cell line	CBIV-wtc11-19-WT-d21
18				CBV-wtc11-19-WT-d21
19				CBVI-wtc11-19-WT-d21
20				CBVII-wtc11-19-WT-d21
21		Day 28 N=7	Ph2 cell line	CBI-ph2-25-WT-d28

22			CBII-ph2-25-WT-d28
23			CBIII-ph2-25-WT-d28
24		wtc11 cell line	CBIV-wtc11-19-WT-d28
25			CBV-wtc11-19-WT-d28
26			CBVI-wtc11-19-WT-d28
27			CBVII-wtc11-19-WT-d28
28		Ph2 cell line	CBI-ph2-25-WT-d35
29			CBII-ph2-25-WT-d35
30	Day 35 N=4		CBIII-ph2-25-WT-d35
31		wtc11	CBIV-wtc11-19-WT-d35
32		Ph2 cell line	CBI-ph2-44-KO-d7
33			CBII-ph2-44-KO-d7
34	Day 7 N=6	wtc11 cell line	CBIV-wtc11-65-KO-d7
35			CBV-wtc11-65-KO-d7
36			CBVI-wtc11-65-KO-d7
37			CBVII-wtc11-65-KO-d7
38		Ph2 cell line	CBI-ph2-44-KO-d14
39			CBII-ph2-44-KO-d14
40	Day 14 N=6	wtc11 cell line	CBIV-wtc11-65-KO-d14
41			CBV-wtc11-65-KO-d14
42			CBVI-wtc11-65-KO-d14
43			CBVII-wtc11-65-KO-d14
44		Ph2 cell line	CBI-ph2-44-KO-d21
45	RPGRIP1L KO		CBII-ph2-44-KO-d21
46		wtc11 cell line	CBIV-wtc11-65-KO-d21
47	Day 21 N=6		CBV-wtc11-65-KO-d21
48			CBVI-wtc11-65-KO-d21
49			CBVII-wtc11-65-KO-d21
50		Ph2 cell line	CBI-ph2-44-KO-d28
51			CBII-ph2-44-KO-d28
52	Day 28 N=6	wtc11 cell line	CBIV-wtc11-65-KO-d28
53			CBV-wtc11-65-KO-d28
54			CBVI-wtc11-65-KO-d28
55			CBVII-wtc11-65-KO-d28
56		Ph2 cell line	CBI-ph2-44-KO-d35
57	Day 35 N=3		CBII-ph2-44-KO-d35
58		wtc11	CBIV-wtc11-65-KO-d35
59		NG2266 JBTS patient derived cell line	CBI-NG-2266-d7
60	Day 7 N=4		CBII-NG-2266-d7
61			CBVII-NG-2266-d7
62	JBTS patient		CBVIII-NG-2266-d7
63			CBI-NG-2266-d14
64	Day 14 N=4		CBII-NG-2266-d14
65			CBVII-NG-2266-d14
66			CBVIII-NG-2266-d14

Label	Cell line	Condition	N per timepont	Sample name
67				CBI-NG-2266-d21
68		Day 21 N=4		CBII-NG-2266-d21
69				CBVII-NG-2266-d21
70				CBVIII-NG-2266-d21
71				CBI-NG-2266-d28
72		Day 28 N=4		CBII-NG-2266-d28
73				CBVII-NG-2266-d28
74				CBVIII-NG-2266-d28
75		Day 35 N=2		CBI-NG-2266-d35
76				CBII-NG-2266-d35

Supplementary Table 3.

Label	Cell line	Condition	N per timepont	Sample name
1			Day 14 N=4	CBIV-wtc11-19-WT-d14
2				CBV-wtc11-19-WT-d14
3				CBVI-wtc11-19-WT-d14
4				CBVII-wtc11-19-WT-d14
5			Day 21 N=4	CBIV-wtc11-19-WT-d21
6		Control		CBV-wtc11-19-WT-d21
7				CBVI-wtc11-19-WT-d21
8				CBVII-wtc11-19-WT-d21
9			Day 28 N=4	CBIV-wtc11-19-WT-d28
10				CBV-wtc11-19-WT-d28
11				CBVI-wtc11-19-WT-d28
12				CBVII-wtc11-19-WT-d28
13	wtc11 cell line		Day 14 N=4	CBIV-wtc11-65-KO-d14
14				CBV-wtc11-65-KO-d14
15				CBVI-wtc11-65-KO-d14
16				CBVII-wtc11-65-KO-d14
17			Day 21 N=4	CBIV-wtc11-65-KO-d21
18		RPGRIP1L KO		CBV-wtc11-65-KO-d21
19				CBVI-wtc11-65-KO-d21
20				CBVII-wtc11-65-KO-d21
21			Day 28 N=4	CBIV-wtc11-65-KO-d28
22				CBV-wtc11-65-KO-d28
23				CBVI-wtc11-65-KO-d28
24				CBVII-wtc11-65-KO-d28
25			Day 14 N=3	CBV-wtc11-65-KO-BGJ-d14
26				CBVI-wtc11-65-KO-BGJ-d14
27		RPGRIP1L KO +BGJ398 treatment		CBVII-wtc11-65-KO-BGJ-d14
28			Day 21 N=3	CBV-wtc11-65-KO-BGJ-d21
29				CBVI-wtc11-65-KO-BGJ-d21
30				CBVII-wtc11-65-KO-BGJ-d21

31				CBV-wtc11-65-KO-BGJ-d28
32			Day 28 N=3	CBVI-wtc11-65-KO-BGJ-d28
33				CBVII-wtc11-65-KO-BGJ-d28

Supplementary Table 4.

Label	Cell line	Condition	N per timepont	Sample name
1	NG2266 JBTS patient derived cell line	NG2266 untreated	Day 14 N=4	CBI-NG-2266-d14
2				CBII-NG-2266-d14
3				CBVII-NG-2266-d14
4				CBVIII-NG-2266-d14
5			Day 21 N=4	CBI-NG-2266-d21
6				CBII-NG-2266-d21
7				CBVII-NG-2266-d21
8				CBVIII-NG-2266-d21
9			Day 28 N=4	CBI-NG-2266-d28
10				CBII-NG-2266-d28
11				CBVII-NG-2266-d28
12				CBVIII-NG-2266-d28
13		NG2266 +BGJ398 treatment	Day 14 N=2	CBVII-NG-2266-BGJ-d14
14				CBVIII-NG-2266-BGJ-d14
15			Day 21 N=2	CBVII-NG-2266-BGJ-d21
16				CBVIII-NG-2266-BGJ-d21
17			Day 28 N=2	CBVII-NG-2266-BGJ-d28
18				CBVIII-NG-2266-BGJ-d28

Supplementary Table 5.

primary Antibody	host	company	reference	dilution
Atoh1(Math1)	rabbit	Cohesion Biosciences	CQA1401	1:200
Barhl1	rabbit	Atlas	HPA004809	1:300
Calbindin	rabbit	Swant	CB-38	1:300
Fgf8	mouse IgG1	ReD system	MAB323	1:40
HuC/HuD (16A11) Elav	mouse IgG2b	Molecular Probes	A-21271	1:200
Inpp5e	rabbit	Proteintech	17797-1-AP	1:300
NeuroD1	mouse IgG1	Proteintech	66691-1-Ig	1:200
Olig2	rabbit	Millipore	AB9610	1:200
Sox2	rabbit	Millipore	AB5603	1:200
Zo1	rabbit	Life technologie	617300	1:300
γ-Tubulin	mouse IgG1	Sigma	T6557	1:500

Supplementary Table 6.

secondary Antibody	host	conjugate	company
Mouse IgG1	goat	Alexa488	Molecular Probes
Mouse IgG1	goat	Alexa633	Molecular Probes
Mouse IgG2b	goat	Alexa568	Molecular Probes
Rabbit	goat	Alexa488	Molecular Probes
Rabbit	goat	Alexa568	Molecular Probes
Rabbit	goat	Alexa633	Molecular Probes

Supplementary Table 7.

Gene	Forward	Reverse
ATOH1	GTTATCCCGTCGTTCAACAACG	TGGGCGTTTGTAGCAGCTC
BARHL1	CGCGGAGGACTTTAGAGACAA	AGCTGGAGATCTCGCGGTC
CALB1	GGAAGTGGTTACCTGGAAGGA	CTCTTTGCCCATACTGATCCAC
ETV4	GTGGTGATCAAACAGGAACAGAC	TGTGTGGAGGTACATTGATGCG
ETV5	TGTTGTGCCTGAGAGACTGGA	GGTCATCAAGAAGGGTGACCA
FGF8	GACCCCTTCGCAAAGCTCAT	CCGTTGCTCTTGGCGATCA
GAPDH	CAACGGATTTGGTCGTATTGG	GCAACAATATCCACTTTACCAGAGTTA
NEUROD1	ATCATGAGCGAGTCATGAGTGC	GCACAGTGGGTTCGTTTCCC
NEUROG1	CCCTAGTCAGCAGGCAATAGAT	TCAGGTATCCCCGACTGCTTTA
OLIG2	GGGCCACAAGTTAGTTGGAA	GAGGAACGGCCACAGTTCTA
PAX6	TGCGACATTTCCCGAATTCTGC	CAGTCTCGTAATACCTGCCCA
SKOR2	ACACGCCTAAAGACACCCAG	ACGCCAGCAGGATGTCGTT
SPRY1	CTTTGCATTAGGCATTTCGGCC	ATTCCGCACGTTGGGCAAGT
SPRY4	CTCCTCAAAGGCCCCTAGAA	GGCTGGACCATGACTGAGTT