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

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ABSTRACT

Cerebellar hypoplasia and dysplasia are hallmark features of neurodevelopmental ciliopathies

such as Joubert syndrome. These disorders are caused by biallelic mutations in genes

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

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

ciliary gene dysfunction to Joubert syndrome neurodevelopmental defects are poorly

understood. Here, we generate cerebellar organoids from human induced pluripotent stem

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

syndrome-associated 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, accompanied by impaired neurogenesis and increased

progenitor proliferation. These defects coincide with prolonged overactivation of the

FGF/MAPK signaling pathway, consistent with the enrichment of MEK1/2 pathway effector at

cilia base. Pharmacological inhibition of FGF receptors reduces MEK1/2 activation at cilia base

and rescues both the proliferative-neurogenic balance and Purkinje lineage formation in

RPGRIP1L-deficient organoids. Together, our findings reveal FGF/MAPK signaling modulation

at the ciliary base in neural progenitors and identify early FGF pathway overactivation as a key

driver of cerebellar differentiation defects in an *in vitro* human model of Joubert syndrome.

This provides 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 [25].

In the cerebellum, ciliogenesis is temporally regulated to ensure appropriate responsiveness to SHH and other signals [26–28]. In mice, a loss of cilia in the brain causes cerebellar hypoplasia and foliation defects due to loss of SHH-dependent GCP proliferation [29,30], while mouse

mutants for JBTS genes — including *Rpgrip1l* [25], *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, given its central role in ciliary transition zone assembly and the

severe neurodevelopmental defects reported 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/MAPK signaling activation, including increased levels of phosphorylated pathway

effector MEK1/2 at the ciliary base. Excessive FGF activity drives progenitor hyperproliferation

and impaired neurogenesis, defects that are rescued by pharmacological inhibition of the FGF

pathway 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 [49,30], 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. 6**). 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 significant reduction

in the number of ciliated basal bodies in *RPGRIP1L*-deficient conditions (58% in *RPGRIP1L*-KO

and 47% in JBTS patient organoids, versus 85% in controls) **(Fig. 3H).** Moreover, ciliary length

increased **(Fig. 3I)** and INPP5E labeling intensity inside cilia was reduced **(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.

RPGRIP1L loss leads to neurogenesis impairment and transcriptional upregulation of FGF

pathway genes

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. Among the most downregulated genes

were neurogenic master genes – *NEUROG1*, *NEUROD1* and *NEUROD4* – as well as other genes

involved in neurogenesis and early-born neuron functions like *HES6* [57,58], *GDNF* and *RELN* (**Fig.**

4A, B). On the contrary, several SOX and HES transcription factors, important to maintain a

neural progenitor state, were significantly up-regulated in both RPGRIP1L KO and JBTS patient-

derived organoids compared to controls (**Fig. 4A, B**). Most importantly, FGF signaling emerged

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

downstream targets (ETV4, ETV5, SPRY1-2-4, SP8) strongly up-regulated in both *RPGRIP1L* KO

and JBTS patient-derived organoids **(Fig.4A, B)**. 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).** 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)**.

This showed that, in control samples, neurogenesis genes started to be expressed around day

14, concomitant with a downregulation of early progenitor marker genes. In *RPGRIP1L*-

deficient conditions, these changes were delayed or absent. Moreover, while in control

organoids 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.

FGF/MAPK pathway overactivation manifests as an increased number of SP8-expressing

cells and by pMEK1/2 enrichment at the ciliary base

To better characterize the upregulation of FGF signaling, we first investigated in which cells

FGF targets were upregulated. We performed immunofluorescence on organoid cryosections

for the transcription factor SP8, a known target of FGF8 in the brain [59–61]. In *RPGRIP1L* KO and

in JBTS patient-derived organoids, the number of SP8-expressing cells was increased by 5.7-

fold and 4.4-fold, respectively **(Fig. 4E).** Increased SP8 expression was found mostly, but not

only, on polarized progenitor cells of the organoid borders and internal rosettes. We then

assessed which cells were producing the FGF8 ligand. 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)**. While in control

organoids we could only detect FGF8 protein in cells bordering the few internal lumens

(Supplementary Fig. 3A), 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. 3A)** and the external layer

covering the organoid surface **(Supplementary Fig. 3B)**. Thus, the upregulation of FGF

signaling observed in transcriptomic experiments may relate both to an increased number of

cells expressing the FGF8 ligand and to an increased response of downstream pathway targets

such as SP8, also known to activate FGF8 expression [59,60]. To link the FGF pathway upregulation

to cilia defects, we analyzed the subcellular localization of pathway members. FGFR1 and

FGFR2 and downstream MAPK pathway effectors have recently been reported to be localized

at the cilium of epithelial cells in culture [62]. While we could not detect ciliary FGFR localization

with available antibodies in our organoids, we found that an activated form of MEK1/2

(pMEK1/2), a MAPK pathway effector, localized at the cilium base in cerebellar organoid

cryosections at day 14. More precisely, pMEK1/2 was detected between the centriole labelled

with gamma-TUBULIN and the axoneme labelled by ARL13B, thus possibly at the transition

zone **(Fig. 4F)**. This was the major site of pMEK1/2 localization in non-mitotic cells of organoids

from all genotypes analyzed **(Supplementary Fig. 3C)**. In *RPGRIP1L* KO and JBTS patient-

derived organoids, pMEK1/2 localized to the distal end of centrioles even in the absence of an

axoneme and showed a global increase in intensity compared to controls, although levels

varied between organoids. **(Fig. 4F).** Thus, the loss of RPGRIP1L increased the activity of the

core FGF/MAPK signaling effector pMEK1/2 at the cilium base during cerebellar organoid

differentiation, showing FGF pathway overactivation within individual cells.

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 progenitor markers 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) [63], from day 11 to day 18 (**Fig. 6A**). Notably, BGJ-398

treatment restored a normal size of *RPGRIP1L*-KO and JBTS patient organoids (**Fig. 6B**).

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 the

expression of FGF pathway related genes, as well as neurogenesis, neuronal differentiation

and extracellular matrix genes in both RPGRIP1L KO **(Fig. 6C and Supplementary Fig. 4A)** and

JBTS patient organoids **(Fig. 6D and Supplementary Fig. 4B)** 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.**

4C-F). 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. 4G-J**). 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 or JBTS patient-derived organoids (**Fig. 6E-H**). 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 **(Supplementary Fig. 4K).**

To confirm that BGJ-398 indeed acted on FGF signaling, we analyzed both targets and pathway

members by immunostaining on *RPGRIP1L* KO and JBTS patient-derived organoids with or

without drug treatment. BGJ treatment significantly reduced the number of SP8-expressing

cells in both *RPGRIP1L*-deficient conditions **(Fig 7A)**. In addition, pMEK1/2 amount at cilia

base was also significantly reduced by the drug treatment **(Fig. 7B)**.

Finally, to investigate whether reducing FGF signaling could act on cilia formation and content

in *RPGRIP1L*-deficient conditions, we analyzed cilia features in rescue experiments. We found

that BGJ-398 treatment had no impact on either cilia density **(Fig. 7C)**, cilia length **(Fig. 7D)** or

ciliary INPPP5E amount **(Fig. 7E)** in *RPGRIP1L* KO and in JBTS patient-derived organoids.

Thus, downregulating FGF signaling in *RPGRIP1L*-deficient cerebellar organoids efficiently

rescued the neurogenesis defect without rescuing cilia features.

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 **(Supplementary Fig. 5A, 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 **(Supplementary Fig. 5C).**

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

was strongly reduced in both *RPGRIP1L* KO and JBTS patient conditions compared to controls

(~2-fold decrease) **(Fig. 7F, G)**. 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 label-retaining cells in both *RPGRIP1L* KO and JBTS patient-derived organoids **(Fig.**

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

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

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. 7I)**. 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 markers.

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 [25,31–35].

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 [9,10,64], 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 upregulation of

several FGF pathway related genes and increased levels of phosphorylated MEK1/2 pathway

effector at the cilium base. Rescue experiments by blocking FGF receptors (FGFRs)

demonstrate the causal link of FGF up-regulation to both neurogenesis-proliferation

imbalance and 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, a 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

[65,66,28], 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 a direct effect of *RPGRIP1L* loss of function in cilia assembly or stability

[23,52] or from an indirect effect via FGF pathway deregulation. Indeed, FGF pathway activation

induces cilia lengthening in embryonic tissues and cell lines [67–69] while pathological sustained

FGF signalling induces shorter cilia [68]. In addition, a recent paper demonstrated the crucial

role of SP8 as a ciliogenesis inducer across embryonic cell types [70]. By performing FGF

signaling rescue experiments we found that BGJ-398 drug treatment neither improved nor

worsened cilia defects observed in *RPGRIP1L*-deficient conditions. This strongly suggests that

these ciliary alterations arise directly from *RPGRIP1L* loss of function, while dampening FGF

pathway restores the neurogenesis–proliferation balance downstream of cilia defects.

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 [71–73].

FGF8 is known as the key morphogen to establish early cerebellar territory *in vivo* [74]. Notably,

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

controlled to allow proper cerebellar development [75]. Ectopically upregulating *Fgf8* in

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

specification [76]. Moreover, conditional inactivation in the mouse isthmus of *Sprouty* genes

(*Spry1-2-4*), which are FGF direct targets acting as feedback loop negative regulators [77], results

in overactivation of FGF signaling and aberrant cerebellar development [78]. 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 [79–81] and corticogenesis [82,83].

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

than the hemispheres [75,84]. During early developmental stages, the region expressing FGF8

corresponds to the prospective vermis [85], which has been identified as a direct derivative of

these FGF8-expressing isthmic cells [86].

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.

We thus addressed the mechanisms that could underlie FGF upregulation upon *RPGRIP1L*-

deficiency. A recent paper showed that, in mouse embryos and in cell culture, FGF receptors

1 and 2 localize to the cilium, and that downstream activated MAPK effectors are present at

the cilium base. We found that in our cerebellar organoids, the activated form of the MAPK

kinase MEK1/2 localized almost exclusively to the cilium base in most cells, except in mitotic

cells where it is at the spindle poles. In RPGRIP1L-deficient organoids, activated MEK1/2 still

localized to the basal body, even in cells with no visible cilia. Moreover, the amount of

pMEK1/2 at cilia was increased. Thus, our data show that 1) FGF signaling is activated at the

cilium base in cerebellar progenitors, 2) RPGRIP1L and cilia are not required for FGF signaling

activation in these cells, nor for MEK1/2 recruitment adjacent to basal bodies and 3) on the

contrary, RPGRIP1L deficiency leads to a defect in signal attenuation.

In which cell types is FGF signaling active? We revealed the presence of FGF8 protein mainly

in apical neural progenitors, suggesting that they are the FGF8 producing cells. In terms of

responding cells, both apical and non-apical neural progenitors activate the pathway, as seen

with activated MEK1/2 and SP8 levels. We thus propose that the FGF pathway activation at

the cilium base initiates a positive loop by increasing the number of proliferating progenitors

that themselves activate the FGF pathway. We provide evidence that, once engaged, this

mechanism could be self-sustaining. We propose that the SP8 transcription factor, a well-

known inducer and target of FGF8 [87,88,59], participates in this self-amplification loop, being

significantly upregulated at both day 14 and 21 (see DEGs tables) and expressed by an

increased number of cells in all *RPGRIP1L*-deficient conditions.

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 observed upon loss of function of the kinase DYRK1A [89]. Alternatively, an increase in

early progenitor numbers could 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 [90,91]. 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 [92]. 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 [93] 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 [94–96]. Notably, early SUFU invalidation in the cerebellar anlage leads to loss of the

vermis [95], 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 [97,98]. On the other hand, germline SUFU

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

medulloblastoma (of SHH-MB class) [99,100]. Additionally, some SUFU variants have been

reported both in JBTS and cancer [98]. 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 [101,102,25,103,21], 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 [63], 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.
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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 [104]. 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.
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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 neurogenesis defects driven by increased FGF signaling, thereby offering a novel
framework for investigating the etiology of cerebellar defects in JBTS and other
neurodevelopmental diseases. We further highlight that RPGRIP1L ciliary protein performs

complex rheostat functions in signaling, revealing its crucial role for proper FGF signal

attenuation in human neural progenitors, while in other cellular contexts in mice, Rpgrip1l is

necessary to reach the highest level of Hedgehog activation [24].

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. 6A)**. 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. 6B). 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 appears 29 nt after the beginning of the intron sequence, most

likely giving rise to a truncated form of the protein **(Supplementary Fig. 6C)**.

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 [63] 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, Z-stacks images with 250 nM steps were acquired using a confocal

microscope (LSM 980 upright, Carl Zeiss AG) and a 63x oil objective with a NA 1.4. Phospho-

MEK1/2 images used for quantification were acquired as Z-stacks with 250 nM steps with

LSM980 confocal microscope using a 63x oil objective with a NA 1.4 and a zoom of 2. All

confocal images were acquired using a monochrome charge-coupled device camera and

processed with Zen software (black edition).

For Super-resolution imaging of the pMEK1/2 signal, the LSM980 Airyscan confocal (Zeiss) was

used in SR mode and image stacks were acquired every 20 nM with a 63x objective and a zoom

value of 3.

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 10 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 the segmented line tool on Fiji to draw ROIs corresponding to each cilium. Mean

gray value and length were then extracted for each ROI of an image. INPP5E mean intensity is

calculated by subtracting the mean background value of an image to the mean gray value of

each ROI in the image. Data are represented as "relative mean intensity" by setting the mean

value of all control cilia (ROIs) at 1. After quantifications were performed, representative

images were processed by means of background subtraction and contrast settings via Fiji.

pMEK1/2 quantifications were performed on Z-stacks (7.5μ thickness), tracing ROI manually

at the base of each cilium between the basal body stained with GAMMA-TUBULIN and the

axoneme labelled by ARL13B. The mean intensity of each ROI was measured using FIJI

software, after removing a background value. For each field of 67.3μm X 67.3μm, 20 to 100

ROIs were measured and the mean value for each field was plotted.

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

Welch's t test were performed as indicated in the figure legends 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) [105] 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) [106]. Gene expression was

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

wrapper v2.0.3+galaxy2) [107]. 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) [108] 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) [109] and for the analysis of overrepresented gene ontology (GO)

categories (Metascape software, https://metascape.org/gp/index.html#/main/step1) [110].

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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 lineage markers (*OLIG2* and *CALB1*) (D)

and glutamatergic lineage markers (*BARHL1* and *ATOH1*) (E) 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 lineage 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 (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 N=3: 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.

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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 at each timepoint). 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.

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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 with Dunn's correction (**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 test with Dunn's

correction (**P < 0.0021, ****P < 0.0001). Control and *RPGRIP1L* KO: N=4 (Wtc11 N=3 –

triangular dots, Ph2 N=1 – round dots); JBTS patient: NG2266 N=2 – squared dots. N: number

of independent experimental replicates. In **(H)** Ciliary density is calculated as the % of gamma-

TUBULIN+ basal bodies presenting an INPP5E+ axoneme over the total number of basal bodies

per field. Each dot on the graph represents one quantified field representative for one

organoid section. In **(I-J)** each dot represents one individual cilium. Average cilia length (I) and

average axonemal INPP5E intensity after background subtraction (J) are calculated from >400

cilia per condition measured in >20 organoids from independent experiments and hiPSC lines.

Scale bars: 10 µm in A-C and E-G.

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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 panels. **(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<0.0021, ***P<0.0002, ****P < 0.0001). N:

number of independent experimental replicates. **(D)** Heatmap representing normalized RNA

expression values of selected DEGs in control and *RPGRIP1L*-deficient cerebellar organoids

over time. >20 organoids per replicate per condition were collected at each timepoint; See

supplementary Table 2 for number of independent experiments and sample numbering. **(E)**

Confocal images of immunofluorescence for SP8 (green) on cryosections from control and

RPGRIP1L-deficient organoids at day 14. Nuclei are stained with DAPI (blue). Right: graph

showing the % of SP8+ over DAPI+ nuclei, counted in > 10 sections from different organoids

per condition per experiment. Controls and *RPGRIP1L* KO: N=3 (Wtc11 N=2 – triangular dots,

Ph2 N=1 – circular 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<0.0002; ****P<0.0001).

Scale bar, 100 μm. N: number of independent experimental replicates. **(F)** High-resolution

AIRYSCAN immunofluorescence images for pMEK1/2 (green), ARL13B (magenta) and gamma-

TUBULIN (blue) on cryosections from control and *RPGRIP1L*-deficient organoids at day 14.

Scale bar, 1 μm. Right: graph showing the mean % of pMEK1/2+ over gamma-TUBULIN+ basal

bodies, counted in > 10 sections from different organoids per condition per experiment.

Controls and *RPGRIP1L* KO: N=3 (Wtc11 N=2 – triangular dots, Ph2 N=1 – circular dots), JBTS:

NG2266 N=1 squared dots. Each dot in the graph represents one section; mean ± SEM are

shown. Asterisks denote statistical significance according to Welch's t test (*P<0.033,

**P<0.0021). N: number of independent experimental replicates.

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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.

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

(A) Scheme representing the experimental plan for organoid treatment with FGFR-inhibitor
(BGJ-398) along the 3D cerebellar differentiation protocol. Bracket on the top represent the
time-window of 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, D)** Heatmaps
representing the normalized RNA expression values over time of selected DEGs in control and
RPGRIP1L KO (C) or control and JBTS patient-derived (D) cerebellar organoids, untreated or
treated with BGJ-398. For sample numbering and number of independent experiments see
Supplementary Table 3 (for C) and Supplementary Table 4 (for D). At least 20 organoids were
analyzed per condition per experiment. **(E)** Immunofluorescence for SOX2 (gray), NEUROD1
(green) and HUC/D (magenta) on cryosections from control and *RPGRIP1L*-deficient organoids
untreated or treated with BGJ-398 at day 14. Nuclei are stained with DAPI (blue). Scale bar,
100 μm. **(F-H)** Graphs showing the % of NEUROD1+ (F), HUC/D+ (G) and SOX2+ (H) cells over
DAPI+ nuclei., counted in > 15 sections from different organoids per condition per experiment.

Controls and *RPGRIP1L* KO: N=3 (Wtc11 N=2 – triangular dots, Ph2 N=1 – circular 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). N: number of independent

experimental replicates.

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FIGURE 7. Neural progenitor proliferation is increased in *RPGRIP1L*-deficient organoids and

can be rescued by blocking FGF signaling without restoring cilia features

(A) Left: Immunofluorescence for SP8 (green) on cryosections from day 21 control and

RPGRIP1L-deficient organoids untreated or treated with BGJ-398. Nuclei are stained with

DAPI. Scale bar, 100 µm. Right: Graph showing the % of SP8+ over DAPI+ nuclei, counted in

several sections from different organoids per condition. Controls and *RPGRIP1L* KO: N=3

(Wtc11 N=2 – triangular dots, Ph2 N=1 – circular 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<0.033; ***P<0.0002; ****P<0.0001). **(B)** Graph showing the relative mean intensity of

pMEK1/2 labeling adjacent to gamma-Tubulin+ basal bodies, quantified in > 10 sections from

different organoids per condition per experiment. Controls and *RPGRIP1L* KO: N=3 (Wtc11 N=2

– triangular dots, Ph2 N=1 – circular dots), JBTS: NG2266 N=1 squared dots. Each dot in the

graph represents the mean of all pMEK1/2 ROIs measured in one field (one organoid) ; mean

of the means ± SEM are shown. Asterisks denote statistical significance according to Welch's

t test (***P<0.0002; ****P<0.0001). N: number of independent experimental replicates. **(C-**

E) Graphs showing the quantification of cilia density (C), ciliary length (D) and INPP5E amount

in cilia (E) in control and *RPGRIP1L*-deficient organoids treated or not with BGJ-398. For cilia

density, each dot in the graph represents one organoid; mean ± SEM are shown. For cilia

length and INPP5E amount, measures for individual cilia (>200) are represented and the mean

value is indicated. Asterisks: statistical significance according to One-Way ANOVA Kruskal-

Wallis with Dunn's correction (****P<0.0001)**.** Control and *RPGRIP1L* KO treated with BGJ:

N=2 Wtc11 – triangular dots; JBTS patient: NG2266 N=1 – squared dots. N: number of

independent experimental replicates. **(F)** 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 organoids untreated or treated with

BGJ-398. **(G, H)** Graphs showing the % of EdU+ cells over the DAPI+ nuclei (G) and the % of
EdU+/SOX2+ cells over the total number of SOX2+ cells (H) 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) **(I)** 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.

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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. Nuclei are

stained with DAPI (blue). **(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.

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Supplementary Figure 2. Altered RNA expression of Purkinje cell and glutamatergic lineage

markers in *RPGRIP1L*-deficient cerebellar organoids

(A-C') Immunofluorescence on cryosections from control (A, A'), *RPGRIP1L* KO (B, B') and JBTS

patient (C, C') organoids at day 21, labeling RPGRIP1L (in green) and the ciliary marker ARL13B

(in magenta). Nuclei are stained with DAPI in A,B,C (blue) and basal bodies are stained with

GTUB in A', B', C' (blue). 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

organoids 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 –

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

dot in the graph represent one organoid. 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). Each dot in the graph

represent one organoid. Mean ± SEM are indicated;. 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.

1409

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

progenitors

(A, B) Confocal images of immunofluorescence labeling ZO1 (magenta) and FGF8 (green) on

cryosections from day 14 control, *RPGRIP1L* KO and JBTS patient organoids. Accumulation of

FGF8 protein is visible at ZO1+ apical sides of progenitor rosettes in control, *RPGRIP1L* KO and

JBTS patient organoids (A), as well as at ZO1+ apical junctions at the organoid borders in

RPGRIP1L KO and JBTS patient organoids (B). **(C)** Large field confocal images of

immunofluorescence on organoid sections for pMEK1/2 (green) showing pMEK1/2

localization at the cilium base in non-dividing cells, and at the spindle poles in dividing cells

(stars). Top images: non polarized organoid regions; bottom images: polarized rosettes. Scale

bars: 10 μm in A-C.

1421

Supplementary Figure 4. FGF signaling inhibition rescues organoid size and gene expression

in *RPGRIP1L* deficient organoids.

(A-B) Heatmap representation of the normalized gene expression values of selected

differentially expressed genes in control and in *RPGRIP1L* KO cerebellar organoids untreated

or treated with BGJ-398 (A) and JBTS patient-derived cerebellar organoids untreated or

treated with BGJ-398 (B). See supplementary Table 3 for number of independent experiments

and sample numbering in A and see supplementary Table 4 for number of independent

experiments and sample numbering in B. **(C-J)** Graphs showing gene expression levels at

different timepoints by qPCR analysis of *FGF8* (C), *ETV4* (D) *ETV5* (E)*, SPRY1* (F)*, NEUROD1* (G)*,*

NEUROG1 (H)*, SKOR2* (I) and *CALB1* (J) in control and *RPGRIP1L*-deficient cerebellar organoids

untreated or treated with BGJ-398. Data are shown as individual values from independent

experiments, mean ± SEM are indicated. For (C-E, J) control and *RPGRIP1L* KO: N=4 (Wtc11);

JBTS patient: N=2 (NG2266). For (F-I) control and *RPGRIP1L* KO: N=3 (Wtc11); JBTS patient:

N=1 (NG2266). N: number of independent experimental replicates.

(K) Left: Immunofluorescence for OLIG2 (green) on cryosections from day 21 control and

RPGRIP1L-deficient organoids untreated or treated with BGJ-398. Nuclei are stained with DAPI

(blue). Scale bar, 100 μm. Right: 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.

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Supplementary Figure 5. EdU incorporation experiment shows that neural progenitor

proliferation is increased in *RPGRIP1L*-deficient organoids and can be partially 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 organoids, 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).

1456

Supplementary Figure 6. 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

Figure 1

Supplementary Figure 1

Supplementary Figure 2

Figure 2

Figure 3

Figure 4

Supplementary Figure 3

Figure 5

Figure 6

Supplementary Figure 4

Figure 7

Supplementary Figure 5