Enhanced *in vivo*-imaging in fish by optimized anaesthesia, fluorescent protein selection and removal of pigmentation

Short title:

Enhancing *in vivo*-imaging in fish

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Abstract

Fish are ideally suited for *in vivo*-imaging due to their transparency at early stages combined with a large genetic toolbox. Key challenges to further advance imaging are fluorophore selection, immobilization of the specimen and approaches to eliminate pigmentation.

We addressed all three and identified the fluorophores and anaesthesia of choice by high throughput time-lapse imaging. Our results indicate that eGFP and mCherry are the best conservative choices for *in vivo*-fluorescence experiments, when availability of well-established antibodies and nanobodies matters. Still, mVenusNB and mGFPmut2 delivered highest absolute fluorescence intensities *in vivo*. Immobilization is of key importance during extended *in vivo* imaging. Here, traditional approaches are outperformed by mRNA injection of α-Bungarotoxin which allows a complete and reversible, transient immobilization. In combination with fully transparent juvenile and adult fish established by the targeted inactivation of both, *oca2* and *pnp4a* via CRISPR/Cas9-mediated gene editing in medaka we could dramatically improve the state-of-the art imaging conditions in post-embryonic fish, now enabling light-sheet microscopy of the growing retina, brain, gills and inner organs in the absence of side effects caused by anaesthetic drugs or pigmentation.

Introduction

Fish (Zebrafish, *Danio rerio* [1,2]; Medaka, *Oryzias latipes*, [3,4]) have become popular model systems for *in vivo* imaging due to their transparent embryos and their extended genetic toolbox [5,6].

In contrast to the first hours of development, imaging of subsequent stages of development and adult life is obscured by increasing pigmentation and the active movements of the growing animals. Thus, the biggest challenge does not reside on the level of instrumentation, but rather within the specimen itself. They need to be tackled to fully exploit the excellent genetic toolbox. Long term

lineaging approaches in both species [7,8] will only deliver dynamic data on fate decisions, once

these challenges have been addressed.

This requires a systematic comparative analysis to combine the best suited fluorescent proteins *in*

vivo with an improvement of the long-term immobilisation/anaesthesia not interfering with the

viability of the organisms and approaches to further enhance the transparency of juvenile and adult

fish. All three major challenges are addressed below.

So far, the choice of a given fluorescent protein (FP) as a reporter or tag has often been based on a

subjective or pragmatic decision, rather than on quantitative comparison identifying the one best

suited. In order to address this, we systematically compared a library of widely used green and red

FPs and compared their fluorescence intensities during development upon mRNA injection in

medaka and zebrafish embryos.

For this purpose, we scored the respective fluorescence intensities over time and assessed whether a

given intensity of a FP is determined exclusively by its amino acid sequence or can be further

improved by codon optimization.

The second challenge was identifying a suitable means of anaesthesia for *in vivo* imaging of fish. This

is necessary since the standard anaesthetic, Tricaine or MS222, has been shown to only result in

incomplete anaesthesia accompanied by adverse effects on heart development (Culver and

Dickinson, 2010). Together with Tricaine, we systematically tested the anaesthesia induced by the

GABA modulating agent Etomidate and α-Bungarotoxin, a potent nicotinic acetylcholine receptor

(nAChR) inhibitor.

The third challenge was overcoming the optical obstructions posed by the pigmentation of eye and

peritoneum which prevent the efficient imaging of the underlying cells, tissues and organs. The

melanin-containing pigments are not only absorbing light, but are also auto-fluorescent and

consequently interfering with fluorescence microscopy [9]. Similarly, the light reflecting properties of

the iridescent iridophores interfere with deep *in vivo* imaging. [9]. Both represent a challenge for

light microscopy, in particular true for light-sheet microscopy, where the illumination axis is

positioned perpendicular to the detection axis [1,2]. Retinal pigmentation completely shields the eye

and pigmentation of the head interferes imaging of the brain or any other cranial structure. The most

widely used method to suppress the formation of pigment in developing teleost embryos is the

application of the toxic and teratogenic drug 1-phenyl 2-thiourea (PTU) [10]. While PTU prevents

formation of new melanin pigment, it neither abolishes already present melanin pigmentation, nor

blocks formation of iridophore pigment. Consequently, the limited efficacy of PTU towards

iridophores together with its severe and toxic side effects highlights the need for alternative

experimental approaches.

To overcome these limitations large efforts have been made to systematically breed medaka with

reduced pigmentation, suitable for *in vivo* imaging [11,12]. However, since these lines were

established by combining several different gamma-ray induced mutant alleles affecting

pigmentation, the resulting individuals, mutant in five different loci, are severely affected in life span

and fecundity and are consequently challenging to maintain [12]. In order to eliminate pigmentation

and light reflection in any genetic background without the need for extensive breeding we devised a

CRISPR/Cas9-based knockout strategy to establish pigment-free lines in any background by the

parallel targeted inactivation of *oca2* and *pnp4a*. This highly efficient strategy is even applicable for

transient approaches upon microinjection.

Taken together, the combination of the approaches presented in this study (double pigment

knockout, *α-Bungarotoxin mRNA*, *eGFP* and *H2A-mCherry*) facilitated the imaging of post-embryonic

medaka with a MuVi-SPIM (Multiview selective plane illumination microscope) [13,14] highlighting

their immediate impact.

Results

mVenNB and mCherry are the most intense fluorescent proteins in medaka

In order to assess the fluorescence intensity of different, commonly used FPs (CFP, Clover, eGFP, eGFPvar, eGFPvarA206K, Venus, YFP, mGFPmut2, mVenusNB), we performed a transient ratio-metric approach over extended periods of time. To do so we co-injected equimolar amounts of mRNAs encoding the respective green FP along with the mRNA encoding mCherry as reference. Embryos were injected at the one-cell stage and placed into a 96 well plate for imaging immediately after injection. We determined green and read fluorescence intensities every 20 minutes for at least 40 h at 28°C (exact timeframes are listed in S2 Table). We confirmed that the chorion does not negatively impact on the analysis of injected embryos by comparing embryos with and without chorion at 2, 3 and 4 dpf under the conditions detailed above. This analysis showed no interference of the chorion the determination of the fluorescence properties (Fig 1F, S1 Fig).

Fig 1. The brightest fluorescent proteins tested in medaka are mVenusNB in the green channel and mCherry in the red channel. (A) Embryos were injected with a green fluorescent protein mRNA to be tested and mCherry mRNA or with eGFP mRNA and a red fluorescent protein mRNA to be tested (1-cell stage modified from [15]). Embryos were mounted in a 96-well plate immediately after injection and automatically imaged for at least 40 h. These data were analysed semi-automated in Fiji and R. Therefore, the raw data were masked and cropped to exclude background. Subsequently, the injection volume was normalized per well by dividing with the value of the control channel at 10 hours post-fertilization. These values were plotted along their biological replicates in R. (B) Schematic overview of fluorescence intensity at 10 hpf, ordered by fluorescence intensity. The lookup table is indicated on the top of the panel, the green fluorescent proteins are shown on the left hand side and

the red fluorescent proteins are shown on the right hand side (embryos modified from [15]). (C)

Green fluorescent protein fluorescence comparison over time. Plotted is the fluorescence normalized

to mCherry per well against the hours post fertilization. Plates were normalized by internal control

for fusion of graphs (eGFP). (D) Red fluorescent protein fluorescence comparison over time. Plotted

is the fluorescence normalized to eGFP per well against the hours post fertilization. Plates were

normalized to internal control for fusion of graphs (mCherry). (E) Verification of previous results by *in*

vivo-microscopy of hatched medaka embryos (8dpf) in a light-sheet microscope, comparing the

fluorescence intensity of different fluorescent proteins (asterisks indicate P-values: **** $P \leq 0.0001$,

*** $P \leq 0.001$, ** $P \leq 0.01$, * $P \leq 0.05$, ns $P > 0.05$). (F) The influence of the chorion on

fluorescence intensity. Exemplary shown are eGFP and mCherry. There is a negligible influence of the

chorion of fluorescence intensity measurement. Further information can be found in S1 Fig.

Subsequently, embryos were demounted and image data were analysed in a semi-automated

manner by Fiji and R scripts (Fig 1A). In brief we determined the fluorescence intensities by first

automatically segmenting the outline of the embryo, followed by the extraction of the mean, median

and standard deviation of the resulting region of interest defined by the embryonic outline. The

values were normalized to the mean value of the reference mCherry fluorescence intensity at 10

hours post fertilization (hpf). For red fluorescent proteins (mCherry, mRFP, mRuby2, tagRFP, mRFP1*,

mScarlet-I), we used eGFP as ratiometric reference and performed an analogous analysis. The

resulting fluorescence intensities were ordered allowing instant comparison (Fig 1B). Our systematic

analysis revealed that mVenNB and mCherry show the highest fluorescent intensities *in vivo* (Fig 1).

We validated particularly high and low scoring candidates by high resolution imaging of mRNA

injected embryos at 8dpf in a selective plane illumination microscope (SPIM) (Fig 1E). This analysis

confirmed the initial assessments and underscores the impact of autofluorescence of pigment cells.

Previously Balleza and colleagues compared *in vitro* parameters to *in vivo* fluorescence in *E. coli* in

order to identify parameters predictive for *in vivo* fluorescence [16]. In order to assess whether this

holds also true for vertebrate systems we compared the fluorescence intensities obtained for the

different FPs above to their results (Fig 2A). Most FPs show a similar relative fluorescence intensity

compared to the normalization value in *E. coli* and *O. latipes*. However, some particularly intense

fluorescent proteins such as *mCherry* and *mVenNB* are prominently diverging from the predicted

parameters, underpinning the need of an *in vivo* assay to validate novel FPs in the model organism of

choice. Similar findings were reported from *C. elegans*, where the *in vitro* parameters are not a

sufficient predictor for *in vivo* fluorescence [17].

Fig 2. Codon adaptation of *eGFP* for medaka is not improving fluorescence. (A) Relative comparison

of *in vivo* fluorescence in medaka with *in vivo* fluorescence in *E. coli*. Indicated are red, green and

yellow fluorescent proteins and a diagonal line for orientation. While many of the fluorescent

proteins have similar properties, some are significantly different, reinforcing the need of a systematic

review of fluorescent proteins in medaka. (B) Codon adaptation indices (CAI) of all prior used

sequences. Codon adaptation index of each sequence is plotted for medaka and human along with a

diagonal line for orientation. Labelled are the two normalizing fluorescent proteins eGFP and

mCherry, and the outlier mRuby2. For a plot with full labelling, refer to S2 Fig. (C) Pure codon usage

table driven codon averaging does not improve fluorescence intensity of fluorescent proteins.

OleGFP (medaka codon-averaged eGFP) fluorescence intensity is overall lower than SceGFP (yeast

codon-averaged) and 25 to 30-fold lower than eGFP. (D) Codon adaptation indices of sequences used

in order to score for the effect of codon averaging. Additional to the prior used sequences are an

eGFP codon optimized for medaka (OleGFP) and an eGFP codon optimized for yeast (SceGFP).

We addressed a potential impact of protein structure or codon usage on the fluorescence intensities.

We first plotted the codon adaptation index (CAI) [18] for medaka and for human for each of the FP

sequences used (Fig 2B). To address the question experimentally, we designed codon optimized eGFP

for medaka (OleGFP) by OPTIMIZER [19] and plotted it along with an eGFP codon optimized for

Saccharomyces cerevisiae (SceGFP, Fig 2D). For experimental validation, both mRNAs were injected

into medaka embryos, each together with *mCherry* mRNA as injection control and compared to an

eGFP mRNA control injection. Analysis was performed as described above. The results indicate that

codon averaging does not improve the fluorescence intensity. In contrast, the fluorescence intensity

of OleGFP is even lower than that of SceGFP, hinting at inefficient translation in case of the codon

optimized mRNA (Fig 2C). Taken together, those experiments and the overall similar temporal

intensity patterns of all FPs assayed are reflecting a comparable translation efficiency of the different

mRNAs and comparable stability of the resulting proteins respectively (Fig 1C-D). Codon optimization

does not additionally improve the respective fluorescence properties.

The most intense fluorescent proteins in medaka were also tested in zebrafish and analysed

accordingly. Embryos were visualized by the mean over all timepoints, since the trend was not

persistent over time (Fig 3A). Green fluorescent proteins (Fig 3B) and red fluorescent proteins (Fig

3C) were normalized to control injections and visualized over time. Strikingly and in contrast to

medaka, the trend is not persistent for all FPs, but fluorescence intensity ratios rather vary with time.

So, the time of the assay is of crucial importance for the choice of the optimal FP during early

zebrafish development.

Fig 3. The most suitable fluorescence intensity in zebrafish varies during development. (A)

Schematic overview of the mean of the tested fluorescent proteins. The lookup table is indicated at

the top of the panel, the green fluorescent proteins are shown on the left hand side and the red

fluorescent proteins are shown on the right hand side (embryos modified from [20]). (B) Green

fluorescent protein fluorescence comparison over time. Plotted is the fluorescence normalized to

mCherry per well against the hours post fertilization. Analysis was conducted as outlined in Fig 1A.

(C) Red fluorescent protein fluorescence comparison over time. Plotted is the fluorescence

normalized to eGFP per well against the hours post fertilization. Analysis was conducted as outlined

in Fig 1A.

α-Bungarotoxin mRNA injection most efficiently anesthetises medaka embryos

To improve the quality of anaesthesia in medaka, different forms of anaesthesia were compared by

scoring movements over time. We either treated embryos with the established anaesthetic Tricaine,

or Etomidate or injected one cell stage embryos with mRNA encoding α-Bungarotoxin [21]. All

embryos were dechorionated at stage 28 [15], when uninjected embryos were treated with Tricaine,

Etomidate, and the respective controls (DMSO, 1xERM). To avoid position effects in the 96-well

plate, embryos were loaded randomly and imaged in 20 minute intervals for up to 40 hours. To

detect movements, we performed semi-automated image analysis in Fiji [22] and R [23] (Fig 4A). Our

analysis workflow delivered a quantitative readout of embryonic movement assessing the efficacy of

the anaesthetics (Fig 4B). Strikingly, α-Bungarotoxin was the only anaesthetic efficiently blocking

embryonic movement. In contrast, Tricaine and Etomidate did not anesthetize efficiently and treated

embryos exhibited strong movements over time (Fig 4B, S1 Movie). Importantly, *α-Bungarotoxin*

mediated anaesthetics was reversible and embryos demounted after the analysis eventually showed

startle responses, comparable to that of the control treated groups (Fig 4C). S3 Fig gives a visual

impression of different projection types of a single well for immediate appreciation. While projection

of moving embryos results in a heavy blur, α-Bungarotoxin injected embryos are still visible after

projection, with only growth-related movements were detected. Taken together, these results

indicate that only *α-Bungarotoxin* functions as effective anaesthetic over extended periods of time.

To assess the optimal concentration for reversible anaesthesia suitable for imaging that ensures

proper embryonic development, we performed microinjections with different concentrations of *α-*

Bungarotoxin (Fig 4D). We determined effective concentrations that are functional even for sensitive

lines with limited fecundity facilitating ongoing development and breeding microscopy. In addition

we addressed potential effects on cardiac functionality [21], and carefully assayed heart morphology

and function after extended imaging in demounted embryos (S4 Fig). Only embryos injected with α-

Bungarotoxin exhibited normal cardiac function and development, in contrast to the Etomidate or

Tricaine treated embryos where heart function was clearly affected by the treatment (S4 Fig).

Fig 4. Anaesthesia of medaka is most efficient with α-Bungarotoxin mRNA injection. (A) Embryos

were injected with eGFP mRNA or eGFP mRNA along with α-Bungarotoxin mRNA (1-cell stage

modified from [15]). Injected embryos and uninjected embryos were dechorionated. Uninjected

embryos were treated with Tricaine, Etomidate (experiments), DMSO or 1x ERM (controls). Embryos

were randomly loaded in a 96-well plate and imaged automatically. Plates were adjusted by starting

stage of imaging and fused into one dataset. Consecutively, image analysis was performed semi-

automatically in FIJI and R. Therefore, the difference between each timepoint n and its following

timepoint $n + 1$ was calculated and squared. These values were imported into R and plotted along

with their biological replicates. (B) Movement index of injected/treated embryos over time. Data was

analysed as described in A. Strikingly, only α-Bungarotoxin is completely anesthetizing the embryos

leading to nearly no detectable difference between the different timepoints (time resolution: 20 min,

n as fish per condition is indicated in the legend). (C) α-Bungarotoxin-treated embryos are catching

up in startle response ability. Fish were startled 10 times each and the number of responses was

noted. Same legend as in Fig 4B applies. (α-Bungarotoxin: n = 12 fish, mock injected: n = 5 fish, wild-

type control: n = 8 fish, asterisks indicate P-values: **** P <= 0.0001, *** P <= 0.001, ** P <= 0.01, *

P <= 0.05, ns P > 0.05). (D) Different dilutions of α-Bungarotoxin were tested in order to adjust the

concentration so fish would wake up after microscopy. Embryos were injected with 0, 3, 6, 12 or 25

ng/μl α-Bungarotoxin mRNA along with eGFP mRNA as an injection control. The number of hatched

embryos per condition was scored (0 ng/μl: n = 33 fish, 3 ng/μl: n = 34 fish, 6 ng/μl: n = 16 fish, 12

ng/μl: n = 24 fish, 25 ng/μl: n = 22 fish).

Efficient CRISPR/Cas9-based double pigment ablation in the injected generation

We employed the CRISPR/Cas9-system in medaka embryos [24] to co-eliminate melanophores in the

retina and iridophores two subtypes of pigment cells already in the injected generation. We co-

injected of mRNA encoding Cas9 together with sgRNAs targeting a key gene for retinal melanin

formation *Oca2* [25] and for the formation of light reflective iridophores, *Pnp4a* [26] to efficiently

target melanophores and iridophores simultaneously. Bi-allelic targeting of both loci facilitated by

our approach established a high rate (12.5%) of pigment free embryos (Fig 5A) suitable for

immediate imaging. The established mutants a fully viable and breed successfully, resulting in

translucent embryos and young fish (Fig 5B, S2 Movie). We named the double mutants *spooky*, due

to the near-invisibility in petri dishes. These pigment-free fish are amenable to whole mount imaging

from embryonic stages up to young adults (S5 Fig). The loss of obstructing pigments in the eye

facilitates imaging of the brain by light-sheet microscopy. We combined all approaches described

above, injected mRNA encoding the most efficient fluorophores (*eGFP* and *H2A-mCherry* mRNA) into

spooky mutant fish (*Oca2$^{-/-}$*, *Pnp4a$^{-/-}$*) anesthetized with α-Bungarotoxin and performed long-term

imaging of retinal and brain structures previously obstructed by pigmentation (Fig 6). The results

obtained underscore the importance of combining all approaches related to the specimen to move

whole mount *in vivo* imaging to new frontiers.

Fig 5. The acute double pigment knockout utilizing the CRISPR/Cas9-system can be deployed in the

injected generation. (A) Medaka zygotes were microinjected with Cas9 mRNA, sgRNA (Oca2_1),

sgRNA (Oca2_2) and sgRNA (Pnp4a). The ratio of the embryos suitable for imaging was determined

(representative examples shown). At least 12.5 % of the injected embryos were suitable for imaging

in the injected generation. (B) Injected medaka as shown in panel A were raised, screened and

imaged in F1 to compare the effects of sgRNA injection. Wild-type embryos exhibit a dense, black

pigment in the eyes, whereas adults additionally exhibit a non-translucent peritoneum. Fish injected

with sgRNAs against *oca2* and *pnp4a* show dramatic loss of pigmentation surrounding the eye and

the peritoneum, rendering the fish more accessible for microscopy.

267 Discussion

In medaka there is a clear trend of fluorescence intensity, which is maintained throughout the

imaging time, i.e. ratios between fluorescent proteins remain stable. This allows for the scoring of

fluorescent proteins by fluorescence intensity.

The GFP derived fluorescent proteins mVenNB and mGFPmut2 are ranking highest in fluorescence

intensity. The most popular and standard fluorescent protein, eGFP, with a considerable toolset

available including antibodies, nanobodies, split-GFP, etc. [27–29] only scores number three with

respect to fluorescence intensity. Since the eGFP toolset is likely also applicable to mVenNB and

mGFPmut2, the balance between necessary tools and absolute fluorescence intensity will determine

the final choice. In some instances, optimization and evaluation could be done *in silico* assessing e.g.

antibody binding sites or *in vitro* by immunostaining with antibodies or nanobodies. In addition, the

establishment of split fluorescent proteins may be possible. Furthermore, both fluorescent proteins

carry an A206K mutation, preventing dimerization making those more amenable for fusion proteins

[30]. In conclusion, eGFP remains a solid choice if the experiment heavily relies on secondary factors,

which are not entirely based on *in vivo* fluorescence readout.

Among the red fluorescent proteins the number one candidate in medaka is mCherry, which is not

only the fluorescent protein with the highest fluorescence intensity, but also with the best

established toolbox such as nanobodies, antibodies, etc. [31].

Interestingly, when comparing the measured fluorescence intensities to the theoretical values such

as quantum yield and excitation efficiency [32], we observed a discrepancy between measured

values and expected results. This might be due to the different physiological conditions inherent to

each model organism or underlying non-optimal excitation of fluorescent proteins by single

wavelengths.

Verification of fluorescent proteins by light-sheet microscopy [1,33] is in line with previous

observations. Green fluorescent proteins do differ in contrast to more prominent differences among

the red fluorescent proteins. Notably, after mRNA injection fluorescence intensity steadily decreases

during development, partially accounting for the small distribution of values. It is important to

consider that in transgenic lines or after endogenous tagging by CRISPR/Cas9, the most intense

fluorescent proteins are continuously expressed and therefore exhibit their fluorescence intensity

and maturation time.

The optimal fluorescent protein in zebrafish is not as easy to score by fluorescence intensity. This is

due to varying intensities depending on fluorescent protein and developmental stage of the fish.

Here, the choice of the optimal fluorescent protein depends on the experimental condition, including

the stage of embryos at the time of analysis. Given that we employed standard cassettes ensuring

comparable mRNA stability, this may be due to different kinetics of protein maturation and turnover,

affecting the quantitative measurements.

Strikingly, most fluorescent proteins show similar *in vivo* fluorescence after normalization in medaka

and *E. coli*. However, some of the tested proteins diverge from this trend, reinforcing the need for

testing novel fluorescent proteins specifically in the species of choice. Species specific differences

may arise from differences in their translational or maturation machinery, cellular pH-values or any

combination of components different between the cells of both species.

In our hands the optimization of codon usages according to establish codon usage tables does not

improve, but rather decreases fluorescence intensity [24]. While it had been shown previously in

Ciona intestinalis that that codon averaging can positively impact on the fluorescence intensity of fluorescent proteins [34]. Our results, in contrast, show that codon-usage table driven averaging is not effective in improving fluorescence intensity, and rather decreased intensity by 25- to 30-fold likely due to changes in mRNA stability or translation efficiency due to repetitive codons.

Even though widely used for fish, the anaesthetic MS222 (Tricaine) has several drawbacks such as non-complete anaesthesia and developmental cardiac defects during extended *in vivo*-imaging [35]. Several groups were therefore trying to supplement Tricaine with different anaesthetics such as Isoflurane [36], Etomidate [37] or increasing the dosage of Tricaine itself [38]. The injection of α-Bungarotoxin as alternative approach has previously been suggested for zebrafish, with apparent influence on development or heart morphology [21]. An obvious concern in long-term imaging experiments is the photostability of the anaesthetics. Since α-Bungarotoxin is delivered as an mRNA, the resulting protein is already at the site of action and will be resynthesized proportional to the amount of initially injected RNA, the number of cell division and the stability of the injected mRNA. The ultimate choice of the anaesthetics to be employed finally depends on the biological process to be studies. If those are affected by α-Bungarotoxin, irreversibly binding to nicotinic acetylcholine receptors [21], Tricaine blocking the sodium channels in neuronal membranes [39] or Etomidate potentiating GABA-receptors in the central nervous system [40] might be valid alternatives with the limitations discussed above.

The pigment double knockout *spooky* is a valuable addition to toolbox since it is readily established in any existing transgenic of mutant background overcoming time consuming complex breeding schemes to re-establish the transparency of e. g. see-through medaka, homozygously mutant for 5 loci. Already the injected generation facilitates instant deep imaging.

The approaches presented here facilitate efficient and deep long-term, *in vivo* imaging of fish embryos and juveniles employing fluorophores with the at best quantum yields in steady, highly transparent embryos e. g. by light-sheet microscopy (Fig 6). We present a streamlined strategy for

the optimization of additional species-specific fluorophores and provide cross-validated reference

points for immediate comparison of new fluorophores developed.

Fig 6. The established toolbox enables imaging of previously challenging organs and tissues, such as the retina and the brain. Using the pigment double knockout in combination with α-Bungarotoxin, eGFP and mCherry coupled to histone2a the imaging was conducted in a single plane illumination microscope (SPIM) we could image the head region of wild-type and *spooky* embryos. Hollow arrowheads point towards the eyes in A and B. (A) Maximum projection of *H2A-mCherry* signal of a lateral view of a wild-type medaka embryo. The eye is not penetrable and no nuclei are visible within or behind it. (A') Maximum projection of *H2A-mCherry* signal of a lateral view of a *spooky* medaka embryo. The eye is penetrable and nuclei are visible within or behind it. (B) Maximum projection of *H2A-mCherry* signal of a dorsal view of a wild-type medaka embryo. The eye is not penetrable and no nuclei are visible within it. (B') Maximum projection of *H2A-mCherry* signal of a dorsal view of a *spooky* medaka embryo. The eye is penetrable and nuclei are visible within it. (C) Stitched maximum projections of a dorsal view of a *spooky* embryo. This embryo was imaged for 48 hours, which can be seen in S3 Movie.

Materials and Methods

Fish husbandry and microinjections

Medaka (*Oryzias latipes*) and zebrafish (*Danio rerio*) stocks were maintained as previously described [41]. All fish are maintained in the closed stocks of COS at Heidelberg University. Fish husbandry and experiments were performed according to local animal welfare standards (Tierschutzgesetz 111, Abs. 1, Nr. 1, Haltungserlaubnis) and in accordance with European Union animal welfare guidelines. The fish facility is under the supervision of the local representative of the animal welfare agency.

359 Embryos were staged according to Iwamatsu [15]. Medaka microinjections were performed as

360 previously described [3].

CRISPR/Cas9 and single guide RNAs

JDS246 was a gift from Keith Joung (Addgene plasmid # 43861). Cas9 mRNA was transcribed by

mMessage mMachine Sp6 Transcription Kit (Thermo Fisher). Single guide RNAs were predicted by

CCTOP [24] and subsequently cloned into DR274 [42]: sgRNA(Oca2_1): GAAACCCAGGTGGCCATTGC,

sgRNA(Oca2_2): TTGCAGGAATCATTCTGTGT, sgRNA(Pnp4a): CCTGGGGGCGGTGCTTAGTC. DR274 was

a gift from Keith Joung (Addgene plasmid # 42250) [42]. The vector was linearized by DraI-digest and

transcribed by MEGAscript T7 transcription Kit (Thermo Fisher). All RNAs were purified by RNeasy

Mini Kit (Qiagen). Injected concentrations were: 150 ng/µl Cas9 mRNA and 15 ng/µl per sgRNA.

Loading and imaging of 96-well plates

96-well plates were loaded with 150 µl volume per well, including the treatment solution and the

embryo. The plates were loaded based on a randomized loading scheme created by a customized R

script, which creates a loading scheme and a table of each well for further use in the analysis. The

plates were sealed by a gas permeable moisture barrier seal (4ti-0516/96, 4titude, Dorking, England),

loaded into the ACQUIFER Imaging Machine (DITABIS, Pforzheim, Germany) and imaged for a defined

time and channel composition. The plates were continuously incubated at 28°C. An overview of the

imaged plates can be found in S2 Table along with the timeframe, timestep and used channels. A

general description of the imaging condition can be found in the section about the semi-automated

analysis of the experiment, i.e. either anaesthetic or fluorescent protein analysis.

The used LEDs and filters in the ACQUIFER Imaging Machine were a 470 nm LED in combination with

LED-FITC-A-000 (Semrock, Inc.) for the green channel and a 550 nm in combination with a LED-TRITC-

A-000 (Semrock, Inc.) for the red channel.

Anesthesia reagents

α-Bungarotoxin mRNA was transcribed from pmtb-t7-alpha-bungarotoxin, which was a gift from

Sean Megason (Addgene plasmid # 69542) [43]. The vector was digested by EcoRV-digest and the

linearized plasmid transcribed by mMessage mMachine Sp6 Transcription Kit (Thermo Fisher) for 4h.

The mRNA was purified with the RNeasy Mini Kit (Qiagen). Embryos were microinjected with 3-25

ng/µl α-Bungarotoxin mRNA along with 50 ng/µl eGFP mRNA. Embryos were then either mounted

into a 96-well plate for assaying anaesthesia efficiency or the number of hatched and swimming

embryos was scored for developmental stages.

Etomidate solution was prepared as a 10 mg/l solution (7.5 µl of a 4 mg/ml stock solution in DMSO in

3 ml 1x ERM). The DMSO solution was prepared accordingly, yielding a 0.25% DMSO solution. A

solution of 1x Tricaine (0.02% w/v, A5040, Sigma- Aldrich) was prepared.

Heart morphology scoring and heart rate measurements

Embryos were imaged for 10 seconds with 25 frames per second in order to score heart morphology

and heart rates at 25°C. The data was imported into R [23] and plotted using ggpubr and xlsx libraries

[44].

Startle-response assay

Demounted, with α-Bungarotoxin mRNA injected embryos and control embryos were startled with a

pipette tip for 10 times. The number of responses was noted and plotted in R using the ggpubr

library.

Fluorescent protein cloning and transcription

All fluorescent proteins were cloned into pGGEV3 from the Golden GateWAY toolkit [45]. Each

construct was cloned with a start and stop codon to ensure maximum comparability of the resulting

mRNAs. Fluorescent proteins were cloned from present plasmids except for the following.

cytoplasmic EKAR (Cerulean-Venus) was a gift from Karel Svoboda (Addgene plasmid # 18679) [46],

mRuby2-C1 was a gift from Michael Davidson (Addgene plasmid # 54768) [47], pcDNA3-Clover was a

gift from Michael Lin (Addgene plasmid # 40259) [47], pmScarlet-i_C1 was a gift from Dorus Gadella

(Addgene plasmid # 85044) [43] and SceGFP was a gift from Sabine Strahl [48] eGFP was codon

optimized for medaka by OPTIMIZER [19] resulting in the sequence of OleGFP. OleGFP was

synthesized by GeneArt Gene Synthesis (Thermo Fisher). Cloned plasmids were linearized with SpeI

prior to transcription and transcribed by mMessage mMachine Sp6 Transcription Kit (Thermo Fisher).

Fluorescent protein mRNA was microinjected in equimolar amounts compared to 50 ng/µl eGFP

mRNA.

SPIM image acquisition

Medaka embryos were anesthetized with 1x Tricaine or by α-Bungarotoxin mRNA injection and

stacks were acquired in a MuVi-SPIM (multiview selective plane illumination microscope) [13,14,49]

as described before [50] for the 25x detection setup, with the addition of a 488 nm illumination and

a corresponding 525/50 bandpass filter. For the measurements of fluorescence intensity the

resulting images were divided by the control channel, masked by the Otsu algorithm [51] and

subsequently measured.

The resulting tables were imported into R [23] and fused into one dataset. The measurements were

linked to conditions and plotted using ggplot2 [52]. The used R libraries were: data.table [53], zoo

[54], ggrepel [55], and ggpubr.

The stacks resulting in Fig 6 were recorded and imported into Fiji [22]. They were transformed with

the logarithm due to the varying expression of cell types and autofluorescence of leftover pigments.

Comparison of medaka and *E. coli in vivo* fluorescence intensity

427 *E. coli* values were extracted from supplementary material of Balleza et al. [16]. Medaka values were

428 calculated as a mean of all data of one fluorescent protein from 23 to 30 hpf from imaged data and

429 normalized to mRFP1* for red fluorescent proteins, eGFP for green fluorescent proteins and Venus

430 for yellow fluorescent proteins (set to a value of 1.2, according to the *E. coli* value).

Codon usage table driven codon averaging and adaptation index

432 Codon averaging was performed by OPTIMIZER [19], using the codon usage table, which can be

433 obtained from HIVE-CUTs [56]. Codon adaptation indices of all used sequences were scored by using

434 the seqinr library in R [57] and codon usage tables from HIVE-CUTs [56]. The data was plotted using

435 ggplot2 [52], readr [58], data.table [53], condformat [59] and ggrepel [55].

Semi-automated analysis anesthesia

One slice of each well was acquired by autofocus (16 steps with a distance of 25 µm, software-based)

per timepoint in brightfield with a CFI Plan Achromat UW 2x, N.A. 0.06 objective (Nikon). Illumination

was performed for 20 ms at an LED intensity of 100 %. The timelapse was recorded for at least 45

hours in 20 or 33 minute intervals. Subsequently the imaged medaka were staged for both uösed

plates and the timepoint 0 was set according to the higher starting stage (stage 28) in order to be

able to fuse the plate data. The following steps were performed in Fiji [22]. These images were

concatenated to a stack per well. Subsequently the square of the difference of timepoints was

calculated and exported as a table.

The resulting tables were loaded into R [23] and fused into one dataset. The negative wells (dead or

non-developing embryos) were dropped from the data set, the wells were linked to the

corresponding conditions and the data was plotted using ggplot2. The used R libraries were:

data.table [53] and ggplot2 [52]. Customized scripts are available through github

(https://git.io/fAPnh).

Semi-automated analysis of fluorescent proteins

A total of 12 z-slices with 100 µm step size were acquired with a CFI Plan Fluor 4x, N.A. 0.13 objective

(Nikon) per well, guaranteeing the embryo to be included in the image. These slices were acquired in

the previously described green and red channel. Illumination was performed for 50 ms at an LED

intensity of 50 % for both channels. Yellow and green fluorescent proteins were recorded in the

green channel due to the limitation of light-sheet microscopes of requiring the according filter. The

timelapse was recorded from directly after injection up to at least 40 hours for the longer

experiments, once each day for the 2, 3 and 4 dpf experiment and from injection to 48 hours for the

codon adaptation experiment. The following steps were performed in Fiji [22]. Each slice of each

channel was masked by both channels by applying an auto threshold with the Otsu algorithm and

cropping each channel by both resulting masks [51]. The resulting, masked images were measured by

excluding the background. All wells were checked for fluorescence at the maximum and the half-

maximum timepoint in order to exclude developmentally impaired or dead embryos.

The resulting tables were imported into R [23] and fused into one dataset. The negative wells were

discarded, the wells were linked to the corresponding conditions and normalized to the injection

control per well at 10 hpf. Used was the data masked by the channel of the injection control to

ensure automatic cropping. The data was plotted using ggplot2. The used R libraries were: data.table

[53], zoo [54], ggrepel [55] and ggplot2 [52]. Customized scripts are available through github

(https://git.io/fAPnh).

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Competing interests

No competing interests declared.

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Data availability

Not available, raw data used exceeds the reasonable limits of Dryad and Figshare (> 11 TB).

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650 Supporting information

S1 Fig. Wild-type vs. dechorionated fluorescence extraction. Embryos were injected as previously

mentioned. Half of each condition was dechorionated. Both conditions were imaged at 2, 3 and 4dpf

and compared to each other. Optical properties of the chorion were negligible and therefore

neglected in the analysis since dechorionation has a larger impact on development, especially when

performed in an early stage (2-4 dpf).

S2 Fig. Codon adaptation indices of all used sequences. Codon adaptation index of each sequence is

plotted for medaka and human along with a diagonal line for orientation.

S3 Fig. Single well projections along time. Single wells were projected with three different projection

types along time: standard deviation, average projection. In case the embryos are not moving it is to

be expected to see the full contours of the embryo in the standard deviation and in the average

projection. This is not the case for most of the conditions, except for the α-Bungarotoxin mRNA

injected embryo.

S4 Fig. Injections of α-Bungarotoxin have no detectable impact on heart development. (A) Embryos

after demounting from the 96-well plate and finishing the assay (stage 31). No cardiac defects are

visible in both controls and embryos injected with α-Bungarotoxin mRNA. For Tricaine, mild defects

can be detected, whereas severe defects can be observed in Etomidate treated embryos. (B) Heart

rate of α-Bungarotoxin is statistically indistinguishable to its control (mock injection). Mild defects

and changes can be observed in Tricaine and Etomidate treated embryos (asterisks indicate P-values:

**** $P <= 0.0001$, *** $P <= 0.001$, ** $P <= 0.01$, * $P <= 0.05$, ns $P > 0.05$). (C) Different dilutions of α-

Bungarotoxin were tested in order to adjust the concentration so fish would wake up after

microscopy. Embryos were injected with 0, 3, 6, 12 or 25 ng/µl α-Bungarotoxin mRNA along with

eGFP mRNA as an injection control. The number of hatched embryos and the number of swimming

embryos per condition was scored (0 ng/µl: n = 33 fish, 3 ng/µl: n = 34 fish, 6 ng/µl: n = 16 fish, 12

ng/µl: n = 24 fish, 25 ng/µl: n = 22 fish).

S5 Fig. Adult medaka with pigment knockout. Addition to Fig 5B. Stage 27, hatched and juvenile fish

of the wild-type strain and the double pigment knockout line were imaged. In addition, $oca2^{-/-}$ fish

are shown at stage 36 and adult.

S1 Movie. Embryos with different anesthetics. Collection of embryos used in the analysis of Fig 4B.

Color code is matching the color code in Fig 4.

S2 Movie. Development of a wild-type and mutant embryo. Development of a wild-type and a $oca2^{-/-}$

pigment knockout embryo.

S3 Movie. A developing spooky embryo. Stitched stacks of a developing *spooky* embryo, injected

with with *α-Bungarotoxin*, *eGFP* and *mCherry* coupled to *histone2a.* The imaging time was 48 hours

and the time interval 1 hour between the stacks.

S1 Table. Fluorescent proteins used in this study. All fluorescent proteins used throughout this work

including addgene identifiers for comparisons, sequences and mutations from ancestor fluorescent

proteins. Furthermore, fluorescent proteins were compared to the classification in the recent

publication of Balleza et al., where they made an effort to distinguish the different fluorescent

protein versions [16].

S2 Table. All plates analyzed for this study.

Fig 1, Lischik et al. 2018

Fig 2, Lischik et al. 2018

B Green fluorescent proteins

fluorescence intensity normalized to mCherry control [A.U.]

eGFP (n = 6)
mGFPmut2 (n = 10)
mVenNB (n = 10)

time post fertilization [h]

C Red fluorescent proteins

fluorescence intensity normalized to eGFP control [A.U.]

mCherry (n = 6)
mRFP1* (n = 10)
mScarlet (n = 9)

time post fertilization [h]

Fig 3, Lischik et al. 2018

A

eGFP mRNA
α-Bungarotoxin mRNA

treating embryos
with different anesthetics

randomly mount in
96-well plate
automated imaging

semi-automated
image analysis
in FIJI / R

raw data

difference

squared

data matrix

data visualization in R

t_n

t_{n+1}

time resolution

movement index

time (hpf)

movement index

B

Comparison of anesthetics over time (mean with 95% confidence intervals)

normalized movement index [A.U.]

imaging time post stage 28 [h]

α-*Bungarotoxin* mRNA (n = 18)
DMSO (n = 16)
Etomidate (n = 20)
Mock injection (n = 23)
Tricaine (n = 16)
Wild-type control (n = 5)

C   Startle responses of 10 iteration   **D**   Hatched embryos injected with α-*Bungarotoxin*

st. 31 (6 dpf)   st. 36 (8 dpf)   st. 39 (12 dpf)   st. 40 (13 dpf)

** **

****

ns   ns   ns   ns

ns   *   ns

startle responses

Hatched embryos [% of alive]

Developmental Stage

Condition
0 ng/µl
3 ng/µl
6 ng/µl
12 ng/µl
25 ng/µl

Fig 4, Lischik et al. 2018

A

wild-type + Cas9 mRNA + sgRNA *oca2*_1 + sgRNA *oca2*_2 + sgRNA *pnp4a*

non-suitable for imaging
(70/80, 87.5%)

suitable for imaging
(10/80, 12.5%)

stage 36 F0

B

wild-type

oca2⁻/⁻, pnp4a⁻/⁻ (spooky)

stage 36 F1

adult F1

Fig 5, Lischik et al. 2018

Fig 6, Lischik et al. 2018