Dietary folic acid increases neurogenesis in the ventral hippocampus of adult female rats

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ABSTRACT

Folate is an important regulator of hippocampal neurogenesis, and in utero spinal cord development. Due to the fortification of folic acid in our food, women may be receiving higher doses of synthetic folic acid than recommended. In addition, in patients with major depressive disorder, folate deficiencies, lower levels of hippocampal neurogenesis, elevated levels of homocysteine, and/or the stress hormone, cortisol, are all associated with depression. Here, we are interested in whether different doses of natural folate or synthetic folic acid diets can influence neurogenesis in the hippocampus, levels of plasma homocysteine, and serum corticosterone in adult female rats. Adult female Sprague-Dawley rats underwent dietary interventions for 29 days. Animals were randomly assigned two six different dietary groups: folate deficient + SST, low 5-MTHF, low 5-MTHF + Succinylsulfathiazole (SST), high 5-MTHF + SST, low folic acid, and high folic acid. (SST) was added to a subset of the 5-methyltetrahydrofolate (5-MTHF) diets to eliminate folic acid production in the gut. Before and after dietary treatment, blood samples were collected for corticosterone and homocysteine analysis, and brain tissue was collected for neurogenesis analysis. High folic acid increased the number of immature neurons within the ventral hippocampus compared to folate deficient controls. Low 5-MTHF without SST significantly increased the number of immature neurons compared to low 5-MTHF + SST, indicating that SST interfered with elevations in neurogenesis. Low folic acid reduced plasma homocysteine levels compared to controls, but there was no significant effect of diet on serum corticosterone levels. Overall, folic acid, rather than 5-MTHF dietary treatment, influenced neurogenesis and homocysteine clearance. Furthermore, the addition of SST negated the effects of 5-MTHF to increase neurogenesis.

Keywords: corticosterone, folic acid, folate, neurogenesis, homocysteine

1. INTRODUCTION

Folate is one of the natural B-complex vitamins, is responsible for one-carbon metabolism[1], and converts homocysteine to methionine[2]. This process of reducing homocysteine levels is crucial for DNA synthesis and overall health. The human body is incapable of making folate endogenously. Thus, folate must be obtained through diet, such as by eating leafy greens, legumes, and citrus fruits[3]. Folic acid is a synthetic folate analog and is added to several breads and cereal products to fortify folate levels within the general population. There are however, microorganisms within the human gut microbiome that are capable of synthesizing folic acid[4]. The antibacterial agent, succinylsulfathiazole (SST) is commonly added to folate diets in research studies to prevent folic acid synthesis through the gut microbiome[5].

Increased folic acid supplements are added to food products in part to help prevent fetal neural tube development defects during embryonic development[6]. Overall, folic acid is more bioavailable than natural folate[7]. It is important to distinguish the differences between natural folate such as 5-methyltetrahydrofolate (L-methylfolate; 5-MTHF) and synthetic folic acid. Overconsumption of folic acid can lead to excessive levels of unmetabolized folic acid accumulating in blood[8]. Increased and prolonged exposure to unmetabolized folic acid may confer some toxic effect of high folic acid intake in older female populations[9]. While there are numerous studies supporting folate supplementation in women for the benefit of child development, studies rarely examine whether 5-MTHF or folic acid can affect women's health. Here, we investigate two doses of both 5-MTHF and folic acid in diet to determine whether the effects of natural folate and synthetic folic acid are distinct on neurogenesis in the hippocampus of adult female rats.

Folate is an important regulator of neuroplasticity, including neurogenesis, during development[10,11], and during adulthood[12,13]. Particular attention has been paid to folate deficiencies during pregnancy as it is detrimental for fetal nervous system development in utero[14]. In adult mammals, the hippocampus retains the ability to generate new neurons throughout life[15,16] Although less well studied, folate levels also influence hippocampal neurogenesis in adult or aging populations[12,13]. However, to our knowledge no studies have been conducted examining neurogenesis in adult female rodents after folate manipulations and this

study sought to rectify this deficiency in the literature. Metabolites of the 5-MTHF and folic acid

metabolic cycle contribute to the formation of purine rings and the conversion of uracil to

thymidine for DNA synthesis[17]. Elevated homocysteine levels due to folate deficiencies are

associated with cell death and DNA damage [18–20] that may lead to reduced neurogenesis. In this

study we used the endogenous marker, doublecortin (DCX), as it is expressed in proliferating

progenitors up until 21-30 days in rats[21], we chose this endogenous protein to examine the effects

of 5-MTHF or folic acid over a wide range of immature neuron maturation (during earlier stages

of cell proliferation as a proxy for levels of DNA synthesis, or when cells are more mature).

Most studies have examined the effect of folate deficiencies on neurogenesis, rather than

folate supplementation. Previously, Kronenberg and colleagues[12] showed that in aged mice (sex

not specified), a chronic folic acid-deficient diet for 3 months reduced the number of immature

neurons in the dentate gyrus (DG) of the hippocampus compared to animals given a folic acid

enriched diet. In a separate study, one-month-old (juvenile) male mice maintained on a folate-

deficient standard rodent chow for 3.5 months showed reduced adult hippocampal neurogenesis

compared to a control diet[13]. While these reports show how folate and folic acid deficiencies can

reduce neurogenesis, no research to our knowledge has specifically investigated the effects of

folate dietary interventions on adult hippocampal neurogenesis in healthy female rodents.

Finally, folate and folic acid may have antidepressant properties as assessed in both clinical

and preclinical studies[22]. For example, women are less likely to present with perinatal depression

when not folate deficient[23]. In addition, female rodents express less depressive-like behaviour

with higher doses of folic acid[24] and, folic acid can eliminate depressive-like endophenotypes in

female mice that had undergone a corticosterone-induced model of depression[25], which was

comparable to pharmacological antidepressant treatment. Depression is associated with reduced

hippocampal neurogenesis[26], elevated cortisol levels[27], and lower levels of folic acid and

elevated homocysteine[28,29]. One mechanism by which folic acid may contribute to mood

elevation is via its effects on stress hormones via homocysteine metabolism[30]. For example,

acute restraint stress increased homocysteine levels in female rats[31], and 7 days of folic acid

supplementation (30mg/kg) slightly, but not significantly, reduced corticosterone levels in

female mice after three weeks corticosterone treatment[25]. This finding suggests that folic acid

may elicit antidepressant effects by reducing homocysteine and modulating the corticosterone

system. Thus, in the present study we examined homocysteine and corticosterone levels with

folate and folic acid diets.

Few studies have studied the differential effects of folic acid versus folate dietary

supplementation and thus this studied was designed to examine differences between the two diets

at different doses on hippocampal neurogenesis, plasma homocysteine and serum corticosterone

levels in adult female rats. As folic acid can be synthesized in the gut and not elsewhere in the

body, here we used 5-MTHF diets with or without SST to determine whether this would impact

our findings. We expected that there would be differential effects of 5-MTHF versus folic acid to

increase neurogenesis in the hippocampus of adult female rats that may be associated with

changes in plasma homocysteine and corticosterone and the use of SST.

Name of the Diet	Folic acid	L-methylfolate	1% SST	n
FD+ (Folate Deficient)	0 mg/kg	0 mg/kg	✓	5
LF+ (Low 5-methyltetrahydrofolate)	0 mg/kg	5 mg/kg	✓	5
HF+ (High 5-methyltetrahydrofolate)	0 mg/kg	15 mg/kg	✓	5
LF (Low 5-methyltetrahydrofolate	0 mg/kg	5 mg/kg	-	5
LFA (Low Folic Acid)	5 mg/kg	0 mg/kg	-	5
HFA (High Folic Acid)	15 mg/kg	0 mg/kg	-	5

Table 1. Description of dietary treatments.

2. MATERIALS AND METHODS

2.1 Animals

Thirty adult female Sprague-Dawley (Charles River, Quebec) rats (7 months old) were individually housed in transparent polyurethane bines (24 x 16 x 46 cm) with aspen chip bedding, in order to ensure proper monitoring of food consumption. Rats were maintained in a 12 h: 12 h light/dark cycle (lights on at 7:00 am) and provided rat chow in different groups as described below (folic acid and L-methylfolate was purchased from Vitcost.com, Boca Raton, FL, USA, and formulated with by Harlan Laboratories, Inc., Madison WI, US) and tap water *ad libitum*. All protocols were in accordance with ethical guidelines set by Canada Council for Animal Care and were approved by the University of British Columbia Animal Care Committee. For an overview of experimental procedures, refer to Figure 1.

Figure 1. Timeline of Experiment.

2.2 Dietary Interventions

Animals were randomly assigned to one of the following diets (n=5/group; total n=30): 1. Folate deficient + 1% SST (FD+) that will serve as the control group, 2. Low 5MTHF + 1% SST (LF+), 3. Low 5-MTHF (LF), 4. High 5-MTHF + 1% SST (HF+), 5. Low folic acid (LFA), 6. High folic acid (HFA). The antibacterial agent, succinylsulfathiazole (SST) was added to folate diets to prevent folate synthesis through the gut microbiome[5]. In animals with SST treatment, it was assumed that there would not be any *de novo* folic acid synthesis by gut bacteria. Doses were chosen based on studies in which similar doses showed efficacy in increasing neurogenesis in male rats in a model of cerebral ischemia[32]. Food consumption was monitored for weekly intake of folic acid or folate diets. Body mass was also monitored every 7 d. All other vitamins as well as caloric value remained the same among all 6 diets. For an overview of details regarding the diets, refer to Table 1. Diets were given for 29 days.

2.3 Blood collection, corticosterone, and homocysteine analysis

Twenty-four hours prior to dietary interventions and again after 29 days of dietary intervention, blood samples were collected via tail vein. All blood samples were collected within 3 min of touching the cage.

Plasma samples were collected with the anticoagulant EDTA. Plasma blood was then centrifuged at 10,000 g for 15 min immediately. Serum blood samples were stored overnight at 4ºC to allow blood to clot completely, and then centrifuged at 10,000 g for 15 min. The serum and plasma were collected and stored at -20ºC until radioimmunoassay.

Total CORT (bound and free) was measured on the serum samples using the ImmuChem Double Antibody 125I radioimmunoassay Kit (MP Biomedicals, Solon, OH, USA). The antiserum cross-reacts 100% with CORT, 0.34% with deoxycorticosterone, 0.05% with cortisol, and does not cross-react with dexamethasone (<0.01%). All reagents were halved, and samples run in duplicates. Percent change in serum CORT was calculated following the formula ((CORT levels after treatment – CORT levels prior to treatment)/CORT levels prior to treatment) * 100.

Plasma homocysteine levels were measured by liquid chromatography-tandem mass spectrometry in the Analytical Core for Metabolomics and Nutrition laboratories located at BC

163 Children's Hospital Research Institute at the University of British Columbia as described by

164 Dominguez-Salas et al.[33].

2.4 Tissue Collection

On Day 29, rats were then weighed and given an overdose of Euthanyl. Adrenal glands

and ovarian tissue were collected and weighted. Rats were then transcardially perfused with 60

ml cold saline followed by 120 ml cold 4% paraformaldehyde. Brains were then extracted and

placed in a vial containing 4% paraformaldehyde overnight at 4ºC. Brains were then transferred

to 30% sucrose in phosphate buffer at 4ºC. Hippocampus was rapidly frozen and sectioned using

a freezing microtome (Leica, Richmond Hill, ON, Canada) at 30 μm in a series of 10. Sections

were stored in antifreeze (30 % ethylene glycol/ 20% glycerol; Sigma) and stored at -20ºC until

processing.

2.5 DCX Immunohistochemistry

Immunohistochemistry for DCX was conducted as previously described [34,35]. Briefly,

brain slices were rinsed with $0.1M$ phosphate-buffered saline, then treated with 0.3% hydrogen

peroxide (30 min). Tissue was rinsed then incubated in primary DCX antibody solution (1:1000,

goat anti-DCX, Santa Crux Biotechnology, Santa Cruz, CA, USA) at 4˚C for approximately

24hrs. Rinsed tissue section were then incubated in secondary antibody solution (1:500, rabbit

anti-goat, Vector Laboratories, Burlington, ON, Canada) at 4˚C for approximately 24 h. Rinsed

tissues were then incubated in Avidin Biotin complex (ABC elite kit, 1:1000, Vector) for 4 h.

Sections were developed using 3,3'-diaminobenzidine + nickel (DAB Peroxidase substrate kit,

Vector). Sections were mounted on superfrost slides, dehydrated with increasing concentrations

of ethanol, cleared with Xylene, and coverslipped with Permount (Fisher Scientific) for

microscopy.

2.6 Microscopy

Hippocampal sections (1/10th) were exhaustively counted for DCX-expressing cells using

the 40x objective of an Olympus C×22LED brightfield microscope. Sixty cells (n = 30 within the

dorsal regions; n = 30 within the ventral region) were randomly selected and were classified by

type into 1 out of 3 developmental stages of DCX-expressing neurons (proliferative,

intermediate, and postmitotic) based on morphological attributes for cell maturity analysis[34–36].

Total DCX-expressing cell counts were then averaged by the number of slices per region (dorsal

or ventral) to obtain an averaged DCX-expressing cell count data. Areas of these sections were

quantified using ImageJ (NIH, Bethesda, MD, USA) and used for relative $1/10^{th}$ volume

calculations (areas × 30 µm). Experimenters were blind to the treatment conditions when

conducting microscopy analyses.

2.7 Data Analyses

All data were analyzed using one-way analysis of variance (ANOVA) unless otherwise

specified with diet (FD+, LF+, LF, HF+, LFA, and HFA) as between-subject factors. Adrenal

mass, and ovarian mass were analyzed using one-way analysis of covariance (ANCOVA) using

body mass as a covariate. DCX-expressing cells and relative $1/10^{th}$ hippocampal volume was

analyzed using repeated measures ANOVA with diet as between-subject factors, and region

(dorsal, ventral) as the within-subjects factor, and an additional within-subject factor of

developmental stages (proliferative, intermediate, and post-mitotic) for cell maturity analysis.

Effect sizes are reported for significant effects. Post hoc comparisons used Newman-Keuls. *A*

priori comparisons were subjected to Bonferroni correction. Pearson product-moment

correlations were conducted between body mass, relative organ mass, and serum CORT, dorsal

and ventral DCX-expressing cells, and homocysteine levels. All data were analyzed using

Statistica software (v. 9, StatSoft, Inc., Tulsa, OK, USA). All effects were considered statistically

significant if $p \leq 0.05$, trends are discussed if $p \leq 0.10$.

Figure 2. Mean and + SEM of adrenal mass, and individual data points of adrenal mass

dependent on dietary interventions. HFA animals showed increased adrenal mass when

controlling for final body mass compared to FD+ and LF+ animals, α = 0.05.

3. RESULTS

3.1 High folic acid increased adrenal mass, and low folic acid diets reduced homocysteine levels

diets did not influence body mass, ovarian mass, or percent change in serum CORT levels

The HFA group had a significant increase in adrenal mass compared to FD+ ($p = 0.037$,

Cohen's $d = 2.900$) and LF+ groups ($p = 0.033$, Cohen's $d = 3.307$; main effect of diet: $p =$

0.025, $\eta_p^2 = 0.409$), but there were no other significant effects on adrenal mass (all $p's \geq 0.126$;

Figure 2). Diet did not statistically influence body mass or ovarian mass (all $p's \geq 0.480$). Diet

did not statistically influence percent change in serum CORT levels ($p = 0.169$). Diet did not

statistically influence the relative $1/10^{th}$ volume of the hippocampus ($p = 0.811$).

LFA animals showed a significantly lower homocysteine levels compared to FD+

controls ($p = 0.049$, Cohen's $d = 1.501$; main effect of diet $p = 0.025$, $\eta_p^2 = 0.408$.), and a slight

trend towards significance compared to LF animals ($p = 0.073$). HF+ animals also showed a

trend towards significance of reduced homocysteine levels compared to FD+ ($p = 0.060$) and LF

($p = 0.081$) animals but no other significant differences were evident (Figure 3).

Figure 3. Mean and +SEM of plasma homocysteine levels (uM) and individual data points of homocysteine levels. LFA animals showed a significant decrease in homocysteine levels compared to FD+ controls. LFA animals also showed a trend towards significance compared to LF animals. HF+ animals showed a trend towards significance compared to both LF and FD+ animals, $\alpha = 0.05$.

3.2 High folic acid and low folate (without SST) increased DCX expression in the ventral dentate gyrus

The HFA diet significantly increased the number of ventral hippocampal DCX-expressing cells compared to LF+ group ($p < 0.001$, Cohen's $d = 1.384$), LFA group ($p = 0.009$, Cohen's $d = 1.094$), FD+ group ($p = 0.008$, Cohen's $d = 0.894$), and the HF+ group ($p = 0.012$, Cohen's $d = 0.909$; with a significant interaction between diet and dentate gyrus region, $p = 0.018$, $\eta_p^2 = 0.416$). Furthermore, the LF diet significantly increased the number of DCX-expressing cells compared to the LF+ group ($p = 0.003$, Cohen's $d = 1.164$); a trend towards significance emerged when LF diet was compared to the LFA group ($p = 0.097$, Cohen's $d = 0.888$). There was a main effect of region ($p < 0.001$, $\eta_p^2 = 0.683$ but no significant main effect of diet $p = 0.392$). No other significant pairwise comparisons were observed (all p's ≥ 0.116; Figure 4).

Figure 4. A. Mean and + SEM of DCX-expressing cell counts, and individual data points of DCX-expressing cell counts dependent on dietary interventions within the ventral dentate gyrus region of the hippocampus. HFA group showed significantly more DCX-expressing immature neurons within the ventral region compared to all other groups except the LF group. LF group showed higher DCX-expressing immature neurons only compared to the LF+ group, $\alpha = 0.05$. **B.**

255   Mean and + SEM of DCX-expressing cell counts, and individual data points of DCX-expressing

256   cell counts dependent on dietary interventions within the dorsal dentate gyrus region of the

257   hippocampus. No statistically significant differences were found within the dorsal region, α =

258   0.05.

3.3 Animals showed significantly higher numbers of proliferative doublecortin cells overall

Post-hoc analysis indicated significantly more DCX-expressing cells in the proliferative

stage than in the other two stages: intermediate ($p > 0.001$, Cohen's d = 4.007) and post-mitotic

stages ($p > 0.001$, Cohen's d = 6.473; significant main effect of cell maturity stages, $p < 0.001$,

$\eta_p^2 = 0.909$). No significant main effect of diet ($p = 0.676$). A trend emerged towards

significance between the interaction of dentate gyrus region and cell maturity, $p = 0.065$, this was

only driven by the differences in cell maturity within regions (all p's < 0.001), and not between

regions (all p's ≥ 0.058; Figure 5).

Figure 5. Mean and + SEM of % type of DCX-expressing cells, and individual data points of %

type of DCX-expressing cells. All animals showed higher proliferative type cells within both the

dorsal and ventral dentate gyrus, regardless of dietary interventions, α = 0.05.

3.4 Within low folate without SST animals, relative adrenal mass negatively correlated with

serum CORT levels. Ventral DCX cell counts weakly negatively correlated with serum CORT

levels after dietary interventions

Within the LF group, relative adrenal mass was negatively correlated with serum CORT

levels after dietary treatment both before and after removing the outlier, r = -0.997, $p > 0.001$.

No other significant differences were found ($p \geq 0.282$; Figure 6).

When looking at all dietary groups together, for total DCX-expressing cells (dorsal +

ventral regions) there was a trend for a negative correlation with serum CORT levels after

dietary intervention, r = -0.337, $p = 0.074$, as well as the dorsal region, r = -0.341, $p = 0.071$.

DCX-expressing cells in the ventral region negatively correlated with serum CORT levels r = -

0.359, $p = 0.060$. When correlating between specific dietary groups to serum CORT levels after

dietary interventions after removing the outlier, no statistically significant correlations emerged

after correcting for multiple comparisons. (all p's ≥ 0.026). However, after an outlier was

removed, both the trends towards significance were eliminated, but a trend towards significance

emerged.

Figure 6. Correlation matrix between serum CORT after dietary treatment and relative adrenal
mass, where no statistically significant correlation was observed when all dietary animals were
group together, $\alpha = 0.05$. When separating animals by dietary interventions, only within the LF
group, a significant positive correlation emerged after Bonferroni's correction, $\alpha = 0.0083$.

4. DISCUSSION

In the present study, we find that high folic acid increased the number of DCX-expressing cells in the ventral hippocampus compared to the folate deficient diet. Furthermore, the addition of SST inhibited neurogenesis in the low 5-MTHF group as the low 5-MTHF diet group without SST had higher number of DCX-expressing cells in the ventral hippocampus compared to the low 5-MTHF group given SST. The diet-dependent changes in DCX-expressing cells did not affect the maturation of immature neurons, as all dietary groups showed elevated levels of type I (proliferative) immature neurons. High folic acid increased adrenal mass compared to folate deficient animals and low folic acid decreased plasma homocysteine levels compared folate deficient animals. Diet did not influence the percent change in serum CORT levels across treatment but there was a suggestion that the ventral DCX-expressive cells were negatively correlated with CORT levels. Collectively, these data suggest that there may be beneficial, dose-dependent effects of 5-MTHF and/or folic acid on ventral hippocampal neurogenesis in the adult female rat, and that SST may interfere with these neurogenic effects.

4.1 High folic acid increased the number of immature neurons within the ventral hippocampus,

Here, we show that high folic acid increased neurogenesis in the ventral dentate gyrus compared to folate deficient diet. Our findings are consistent with other reports indicating that folate deficiency induced by a folate deficient diet + SST treatment decreases hippocampal neurogenesis in male mice[13]. Our findings were specific to the ventral dentate gyrus, and this is intriguing because the ventral hippocampus is more involved in the stress response via its interaction to provide negative feedback to the hypothalamic-pituitary-adrenal (HPA) axis. Because regulating negative feedback of the HPA axis and antidepressant efficacy are closely linked in patients with major depressive disorder (Ising et al., 2007), increased ventral hippocampal neurogenesis as a result of increased folic acid intake may be a possible mechanism by which folic acid exerts its antidepressant effects. Given past evidence of the influence of folic acid to prevent depressive-like endophenotypes in female mice, increased neurogenesis in the ventral hippocampus may be one mechanism by which folic acid could exert its antidepressant effects[22]. Furthermore, low 5-MTHF without SST, significantly increased the number of ventral DCX-expressing cells compared to low 5-MTHF with SST. Because, SST prevents folic acid synthesis via the gut microbiota, this suggests that SST interfered with the ability of folate to

increase neurogenesis in the low 5-MTHF + SST group. Thus, we can infer that the addition of

SST reduced neurogenesis, which may have been due to its effects on the microbiota or the

reduction in folic acid. Interestingly, another study has shown that antibiotic use reduced

hippocampal neurogenesis in adult female C57BL/6 mice[37], consistent with our findings.

Overall, our results suggest that the introduction of SST (and consequently suppressing gut folic

acid synthesis) can interfere with any potential effects of 5-MTHF to promote neurogenesis in

the adult female rat.

4.2 The effects of folic acid and folate on neurogenesis, adrenal glands and CORT: Implications

for depression

In the present study, we found low folic acid diet reduced plasma homocysteine levels,

with a trend for high 5-MTHF to do the same. It is important to note that we utilized a folate

deficient diet as a comparative control group. The purpose of this study was to compare and

contrast the effects of different doses of 5-MTHF and folic acid to a folate deficient group.

Furthermore, we saw that high folic acid increased adrenal mass (but not serum CORT), and a

potential relationship between CORT following 5-MTHF/folic acid manipulations to

neurogenesis in the ventral dentate gyrus. As mentioned earlier, increased folate and folic acid

levels have been associated with antidepressant-like properties. Given that depression is

associated with higher levels of homocysteine[38] and elevated levels of cortisol[27,39] it may be that

these two measures are related via in part their effects following dietary folate. Other reports

show in a population of healthy middle-aged men and women, high cortisol levels were

negatively associated with serum folate levels[40], and positively associated with serum

homocysteine levels. In our study, we see suggestions of associations between reduced

homocysteine, increased adrenal mass and increased neurogenesis in the ventral hippocampus

and it is possible that with more prolonged exposure of the diets we would see stronger

associations between these variables.

We also found that high folic acid enhanced neurogenesis, specifically in the ventral

hippocampus, an area of the hippocampus that is more responsible for regulating stress and

mood[41]. While in this study, we did not assess depressive-like behaviour after dietary treatment,

the ability of folic acid and 5-MTHF to modulate neurogenesis in the ventral hippocampus

suggests a potential mechanism by which dietary folate could modify mood. Although, high folic

acid did increase neurogenesis, neurogenesis was not correlated to the change in serum CORT

levels, suggesting an independent effect of folic acid to increase neurogenesis than via the HPA

axis. Furthermore, as suggested above, the current study indicates that the introduction of the

antibacterial SST to eliminate gut folic acid synthesis negates the effects of natural 5-MTHF on

neurogenesis and should not be adopted in studies wishing to increase neurogenesis.

The antidepressant-like properties of folate or folic acid are still under debate. Folic acid

can either act as an antidepressant alone without co-current pharmacological agent[42] or as an

adjuvant with traditional antidepressants[43]. This effect may be more efficacious for women[43], and

only effective when dietary interventions are prolonged[44]. Elevated levels homocysteine and low

folic acid are associated with depressive symptoms in middle-aged cohorts of both men and

women[28,29]. The current study does show that within the folate deficient group, there are higher

homocysteine levels and lower ventral neurogenesis levels suggesting potential endophenotypes

of depression. In the present study, our dietary treatment was only for 29 days and it is possible

we would see a stronger influence on both blood corticosterone and hippocampal neurogenesis if

the dietary treatments were prolonged and future studies should investigate longer timelines.

Here, we showed that there are differences between synthetic folic acid and natural 5-MTHF,

different doses of folic acid, the addition of the antibacterial SST, and how they influenced

neurogenesis, homocysteine and CORT with just 29 days of dietary intervention.

4.3 Folic acid treatment can have different outcomes than 5-MTHF treatment

In the present study, we show some distinct differences in the effects of folic acid vs 5-

MTHF on homocysteine clearance and adult hippocampal neurogenesis. In the literature, there

are more studies utilizing folic acid compared to 5-MTHF, likely due to the fact that folic acid is

more bioavailable than other forms of folate and more stable[7,45], making it a clear benefit for diet

fortification, and more relevant for human studies and animal models. It is then important to note

that folic acid and other forms of folate such as 5-MTHF act through distinct pathways of

metabolism[17] and that the mode of delivery and amount consumed can change the efficacy of

both folic acid and folate[46]. In the present study, only animals with low folic acid or high folic

acid diets showed significantly reduced levels of plasma homocysteine levels compared to the

folate deficient group, with no significant change with 5-MTHF diets. Although high 5-MTHF

did reduce homocysteine levels this effect was not significant. Furthermore, only animals fed the

high folic acid diet, but not the 5-MTHF diets, showed increased neurogenesis compared to
controls. Thus, collectively these results suggest that folic acid diets have greater efficacy to
increase neurogenesis and reduce homocysteine levels than do 5-MTHF diets.

The differential effects of natural forms of folate such as 5-MTHF and folic acid may be
the result of their underlying modes of metabolism, differences in structure, and ultimately, their
functional pathways. While in general, elevated homocysteine levels are associated with cell
death and DNA damage that can lead to reduced neurogenesis, both in vitro[18–20], and in vivo[20]. In
older male rats and mice, folate supplementation lasting for at least 8-20 weeks is effective at
inducing genomic changes[47,48]. In the present study, supplement duration for 29 days may not be
sufficient to significantly reduce homocysteine levels and to have significant effects on
neurogenesis. It is also crucial to note that here, we utilized healthy female rats to determine
whether folate and folic acid could affect biomarkers of depression such as reduced
neurogenesis, high levels of CORT or homocysteine. This suggests that it is worthwhile to
investigate the effects of dietary folate and folic acid diet in an animal model of depression.

5. CONCLUSIONS

In summary, high folic acid increased the number of immature neurons in the ventral
hippocampus after 29 days of dietary treatment in adult female rats. Low 5-MTHF without the
antibacterial SST also increased neurogenesis compared to low 5-MTHF treated with the SST,
indicating that SST impaired the ability of 5-MTHF to enhance neurogenesis, perhaps via its
effects on the microbiome. High folic acid was the only dietary intervention that increased
adrenal mass compared to the folate deficient group but surprisingly higher adrenal mass did not
correspond to higher serum CORT levels, which may indicate some disturbances in the HPA
axes functioning. Low folic acid significantly reduced plasma homocysteine levels at the end of
dietary treatment but did not significantly affect neurogenesis levels. Overall, our findings
indicate that natural 5-MTHF and synthetic folic acid may act on different pathways to influence
hippocampal neurogenesis and homocysteine metabolism. The lack of effects of 5-MTHF diets
with SST compared to folate deficient animals suggests that modifications to the gut microbiota
(or reductions in folic acid) significantly alter the functionality and efficacy of 5-MTHF to
modulate neurogenesis in the hippocampus. The current study suggests that folic acid and 5-

MTHF have similar but differential effects on neurogenesis, homocysteine metabolism, adrenal

mass and serum CORT release. Thus, we suggest that folic acid and 5-MTHF are not

interchangeable. Furthermore, future research should be cautioned that the use of SST in folate

studies may interfere with neuroplasticity.

CONFLICTS OF INTEREST

416   The authors have nothing to declare.

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