Multiple two-photon targeted whole-cell patch-clamp recordings from monosynaptically connected neurons in vivo

Running title: Multiple whole-cell recordings in vivo

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Abstract

Although we know a great deal about monosynaptic connectivity, transmission and integration in the mammalian nervous system from *in vitro* studies, very little is known *in vivo*. This is partly because it is technically difficult to evoke action potentials and simultaneously record small amplitude subthreshold responses in closely (< 150 µm) located pairs of neurons. To address this, we have developed *in vivo* two-photon targeted multiple (2 – 4) whole-cell patch clamp recordings of nearby neurons in superficial layers 1 to 3 of primary somatosensory cortex. Here we describe a step-by-step guide to this approach in the anesthetised mouse, including: the design of the setup, surgery, preparation of pipettes, targeting and acquisition of multiple whole-cell recordings, as well as in vivo and post-hoc histology. The procedure takes ~ 4 hours from start of surgery to end of recording and allows examinations both into the electrophysiological features of unitary excitatory and inhibitory monosynaptic inputs and the synaptic mechanisms of correlated neuronal activity.

INTRODUCTION

Monosynaptic transmission underpins action potential generation and the flow of information within neural circuits. Over the last decades, *in vitro* approaches have provided an enormous amount of data on the connectivity rates and the electrophysiological and anatomical properties of synapses. In the intact brain, however, synapses function during different behavioural and network states as well fluctuating levels of neuromodulators and far less is known about monosynaptic transmission and the activity of connected neurons in vivo.

In vivo approaches to identify connected pairs of neurons in the mammalian nervous system have typically performed electrophysiological recordings of multiple single neurons and examined the average response of one neuron to spontaneously occurring action potentials in another neuron. "Spike triggered averaging" of cortical neurons has been performed both with multiple extracellular recordings (Bartho, 2004; Csicsvari et al., 1998; English et al., 2017; Fujisawa et al., 2008; Reid and Alonso, 1995; Swadlow and Gusev, 2002) and a combination of extracellular and intracellular membrane potential recordings (Bruno, 2006; Crochet et al., 2005; London et al., 2010; Matsumura et al., 1996; Yu and Ferster, 2013). However, because it is not yet possible to record the activity of all neurons presynaptic to the cells of interest and cortical neurons can fire simultaneously, it is difficult to confirm whether correlated activity is the result of a direct synaptic connection between the two recorded neurons or input from a third, unrecorded, neuron with similar firing dynamics. One approach to get around the problem of synchronous input is to have experimental control of action potential timing using single cell stimulation, while simultaneously recording the evoked membrane potential response from a second neuron. While, care has to be taken in concluding that any synaptic response is the result of a monosynaptic rather than polysynaptic input (Berry and Pentreath, 1976; Parker, 2010), this approach has been used in vivo to characterise the wiring and functional properties of synaptic connections in a number of non-mammalian species (Burrows, 1996; Parker, 2003; Poulet and Hedwig, 2006; Roberts et al., 2010).

Mapping the synaptic properties and monosynaptic connectivity rates in neocortex has been a central aim of in vitro slice studies, with visually guided multiple whole-cell patch clamp membrane potential recordings being the method of choice (Deuchars and Thomson, 1995; Edwards et al., 1989; Feldmeyer and Radnikow, 2016; Feldmeyer et al., 2006; Geiger et al., 1997; Lalanne et al., 2016; Lefort et al., 2009; Markram et al., 1997; Mason et al., 1991; Wozny and Williams, 2011; Yassin et al., 2010).The whole-cell recording technique has been adapted for use in vivo (Lee and Brecht, 2018; Margrie et al., 2002; Petersen, 2017) with more recent studies using dual, blind, whole-cell recordings to assess correlations of sub- and supra-threshold V_m activity between pairs of cortical neurons (Arroyo et al., 2018; Gentet et al., 2010; Poulet and Petersen, 2008; Zhao et al., 2016). While dual membrane potential recordings provide a technical basis for testing for monosynaptic connectivity, the likelihood of two cortical

neurons being connected is low, dependent on cell type and negatively correlated with inter-
somatic distance (Holmgren et al., 2003; Perin et al., 2011). Therefore, to identify connected
pairs of neurons in vivo, it would help to be able to record from nearby, genetically labelled
neurons using visual control.

Here we describe a new approach using in vivo two-photon microscopy to target whole-cell
recordings to neighboring, fluorescently labelled layer 2/3 cortical neurons. We show that this
technique can be used to evoke action potentials and isolate unitary excitatory and inhibitory
postsynaptic potentials in postsynaptic neurons (Ferrarese et al., 2018; Jouhanneau et al.,
2015; 2018). A troubleshooting table is provided (**Table 1**) and we go on to discuss potential
improvements and future applications of this technique in assessing the link between
monosynaptic transmission and cortical function.

MATERIALS AND METHODS

The aim of this article is to provide a description of multiple, 2-photon targeted patch-clamp recordings to monitor monosynaptic connectivity in vivo. The procedure is described for an acute one-day experiment in anaesthetised mice. All experiments were performed according to protocols approved by the Berlin Animal Ethics committee (Landesamt für Gesundheit und Sociales, LAGeSo) and comply with the European animal welfare law.

Two-photon microscope

In vivo two-photon microscopy with galvanometric scanning (Femto2D, Femtonics) is used to visualize neurons and the whole-cell recording pipettes (**Figure 1**). Two, photomultiplier tubes (PMTs) (Hamamtsu GasAsP detectors) are used to detect light, one fitted with a 498 – 570 nm band pass filter and the second with a 598 – 700 nm filter to enable detection of green and red fluorophores respectively. A CCD camera is coupled to the microscope and used at the start of the experiment to place the electrodes over the region of interest using a 4X objective (Olympus UPLFLN 4X, NA 0.13, W.D 17 mm). Subsequently a 40X water immersion objective with a long working distance (Olympus LUMPLFLN 40XW, NA 0.8, W.D 3.3 mm) is used to target cell soma of interest. The tuneable (680 – 1080 nm), mode-locked Ti:Sapphire laser (Chameleon Ultra II, Coherent) is used to excite a wide range of fluorophores (eg GFP, Alexa 488, Alexa 594, tdTomato). The Pockel cell (E.O. Modulator, Conoptics) enables a fine control of the laser beam intensity and prevent tissue damage. All these devices are controlled by a Matlab (mathworks) based imaging data acquisition software (MES v4.0 software, Femtonics).

Mice

The technique works with both wild type mice and strains expressing fluorescent proteins in subsets of neurons. In this article, we used mice aged between P18 – P30 from C57bl6J, NEX-cre (Goebbels et al., 2006) x Ai9 (Madisen et al., 2010), fosGFP (Barth et al., 2004), GAD67-GFP (Tamamaki et al., 2003), PV-cre (Hippenmeyer et al., 2005) x Ai9, or SST-cre (Taniguchi et al., 2011) x Ai9 background. Mice were maintained on a 12h light – dark cycle and had food and water *ad libitum*.

Surgery

To expose the brain for recordings, mice are first anesthetised with 1.5% isoflurane and show an absence of tail pinch reflex and whisker movements. Eye ointment (Bei trockenen Auge, Visidic) is used to protect the eyes and body temperature is maintained at 36ºC using a closed loop system with rectal probe and heating pad (DC Temperature controller, FHC). All tools are cleaned and dry heat sterilized using hot glass beads steriliser (Steri 250, Keller, Fine Science Tools) prior to surgery. The head is shaved and 70% alcohol followed by iodine solution are

applied before performing the first skin incision. If necessary, intrinsic optical imaging through the skull can be performed at this stage if functional localisation of recording site is required. The conjunctive tissue is next carefully removed using forceps and micro-scissors (Fine science Tools) and the skull is cleaned using a microcurette (Fine science Tools) to remove any remaining tissue on the surface of the bone. 3% hydrogen peroxide (H_2O_2) solution can be applied for 30 seconds at this stage to help clean the exposed bone surface, however the bone can also be cleaned by gently scraping the bone with a razor blade. Next the skull is washed thoroughly with Ringer's solution (135 NaCl, 5 KCl, 5 HEPES, 1.8 CaCl$_2$, and 1 MgCl$_2$135 NaCl, 5 KCl, 5 HEPES, 1.8 CaCl$_2$, and 1 MgCl$_2$) and thoroughly dried. Avoiding the recording site, the exposed skull is then lightly scratched with a 25G syringe needle to create grooves in the skull. It is important to remove any remaining hairs or dirt at this stage to avoid possible infection. Next, superglue (Loctite 401) is applied first at the edges of the exposed skull, to glue the skin to the bone, and then to the entire exposed skull surface avoiding the recording site. A lightweight metal head implant is then placed on the hemisphere contralateral to the recording site and covered with glue. To secure the head implant, dental cement is applied on top of the entire layer of glue. As the dental cement viscosity increases, a recording chamber with access for the recording pipettes can be modelled around the area of interest using a spatula. It is important to completely cover the head implant with glue and dental cement to avoid any possible contact between the Ringer's solution and the metal of the head implant during the recording which can lead to electrical noise and voltage offsets.

Once hardened, the recording chamber is filled with Ringer's solution. After a few minutes, the skull will become translucent and the blood vessels visible. Then, the Ringer's solution should be removed to let the bone dry and a 500 µm diameter dental drill head (Komet, Brassler) operated by a dental drill (Success 40, Osada) is used to thin the skull over the recording site. Drilling is stopped as soon as blood vessels become clearly visible through the bone. This corresponds to a bone thickness of ~ 100 µm (Papadopoulos et al., 2017). Bone dust is removed with wet tissue paper and the chamber is refilled with Ringer's solution. A 27G syringe needle is used to pick away the final layer of bone with great care. Next, a duratomy is made using a 25G needle with a handmade small hook at the tip of the needle. Adjusting the angle of illumination of the craniotomy is key to visualizing the dura (~ 30º). The handmade hooked-tip of the needle is used to gently lift the dura away from the future spot of pipette insertion.

Whole-cell pipettes and electrophysiological equipment

We use a four-step pulling custom program on a Sutter puller (Model P-1000, Sutter instrument) with 2 mm diameter borosilicate capillaries (Hilgenberg) to pull 5 – 7 MΩ pipettes. The first two lines of the pulling program are identical and used to create a taper of ~ 6 mm

and a tip of ~ 2µm (**Figure 1E, F**), while the third and fourth step are used to decrease the diameter and defining the tip shape and resistance. Three to four pipettes are filled with intracellular solution containing, in mM: 135 potassium gluconate, 4 KCl, 10 HEPES, 10 phosphocreatine, 4 MgATP, 0.3 Na3GTP (adjusted to pH 7.3 with KOH), 25 µm Alexa-594 (Invitrogen) and 2 mg/ml biocytin. Pipettes are next fixed to a pipette holder (Molecular Devices) mounted on a LN Junior 3-axis (X, Y, and Z) micromanipulator with low drift and a long traverse path (up to 22 mm on the X axis) where the X axis is angled at 35 – 40º (**Figure 1D**) (Luigs and Neumann). An Ag/AgCl ground electrode is next placed into the recording chamber filled with Ringer's solution and electrophysiological signals are amplified using the Axon Instruments amplifier Multiclamp 700B (Molecular Devices). The analog signals recorded are filtered at 10 kHz and digitized at 20 kHz using the analog/digital converter ITC-18 board (Heka) and IgorPro (Wavemetrics) running on a Windows PC. For online visualization of the electrophysiological signal we use an oscilloscope (Tektronix TDS2024C) with a max sample rate 2 GS/s. To allow easier and faster access to the exposed brain, all pipettes are positioned on one side of the preparation (**Figure1B**).

Multiple two-photon targeted whole-cell patch clamp recordings

As soon as the pipettes are mounted on the holders a 180 – 200 mbar positive pressure is applied via a syringe. A manual-seal-sucker (Sigmann Elektronik GmbH) manometer is used to monitor the pressure applied to all channels independently. All electrodes are moved into the Ringer's solution in the recording chamber in voltage-clamp seal-test mode to monitor the pipette tip resistance on the oscilloscope.

Step 1: Positioning above brain (Figure 2A). Using the low magnification 4X objective and the CCD camera, the pipettes are lowered (~ 20 – 30µm apart) until they are ~300 µm above the region of interest. Then, by switching to the higher magnification 40X objective the pipettes are moved to the same focal plan. The position of the pipettes is recorded. A clean entry of the pipette into the brain is a critical indicator of successful future patching, so special care is taken to examine the brain surface and identify clear entry points without large blood vessels, dirt or irregular surfaces. The coordinates of the insertion point are noted and the focus is moved back up to the pipette tips which are then carefully aligned. The focal plan is next moved to the brain surface and the pipettes are lowered vertically using the Z-axis one by one using a medium control sensitivity of the micromanipulator control pads (28 µm per handwheel rotation). As the pipettes are lowered, slight lateral movements are performed to help visualize the tips. Because of the positive pressure applied to the pipette, a clear depression on the brain surface is seen as soon as the pipette gets closer to the brain. At this point, the

micromanipulator values are reset to zero. At the same time, the resistance of the pipette

should increase (as observed by a decrease in the current step amplitude on the oscilloscope).

Step 2: Entering the brain (Figure 2B). Subsequently, using the highest sensitivity speed on

the micromanipulator (3 µm per handwheel rotation), the pipettes are moved through the pia

one by one. As soon as the electrodes pass through the pia and enter the brain, as signalled

by a reduction in resistance with a subsequent sudden relaxation to the initial pipette resistance

value, the pressure is reduced down to 70 – 90 mbar and the pipette tips moved to – 50 µm

depth using X-axis. Two-photon imaging is used as soon as the pipettes are in the brain.

Because of the positive pressure the dye, Alexa-594, contained in the intracellular solution will

diffuse into the neuropil and highlight blood vessels, cell soma and dendrites as dark

"shadows".

Step 3: Targeting cells of interest (Figure 2C). Having lowered the pressure to 70-90 mbar,

using the same speed of 3 µm per handwheel rotation, the pipettes are moved one by one to

a depth of – 150 to – 200 µm (boarder of cortical layers 1 and 2). During pipette movement

great care is taken to avoid cells bodies and capillaries using both visual control from the two-

photon imaging and the seal test pulse on the oscilloscope. In wild-type mice, without

expression of fluorescent proteins, the contrast between the dye in the neuropil and the dark

unlabelled cells, the shadow patching technique (Kitamura et al., 2008) can be used to target

neurons of interest. With experience, the dendritic shape of the cell can help identify excitatory

from inhibitory neurons. A maximum of 100 µm of lateral movement per pipette is allowed but

the less the better. Then the pressure is decreased to 30 mbar and the micromanipulator

controller's pads switched to a stepping mode (2 µm per step).

Step 4: Sealing (Figure 2D). Next, the final approach and seal is performed sequentially, one

pipette at a time. The pipette voltage offset is set to 0 mV and the first pipette tip is lowered

using 2 µm steps onto the cell membrane using the X-axis while watching the oscilloscope

closely to observe changes in tip resistance. A sign of a good contact between the pipette tip

and the neuron occurs when the seal test pulse reduces in amplitude and fluctuates with a

wave like pattern. In contrast, an abrupt and sustained reduction in pulse amplitude without

fluctuations is typical of a contact with a capillary. Good contact can sometimes be visualised

during two-photon scanning as a small, expanding, fluorescent dimple in the cell membrane.

As soon as a good first contact has been observed, one or two further steps are made and the

positive pressure immediately released followed by a transient negative pressure to optimise

the seal. V_m holding voltage is immediately placed at – 70mV to help improve seal. Typically,

this leads to a large reduction in the amplitude of the test pulse and the formation of a giga-

seal, however light manual suction is sometimes required to improve the quality of the seal and/or transiently hyperpolarizing the cell to – 100mV. This procedure is then repeated with the other pipettes one after the other.

Step 5: Whole-cell configuration (Figure 2E). When all the pipettes are sealed onto the targeted neurons, a brief and gentle suction is used to break the membrane and enter whole-cell configuration on each of the neurons with a giga-seal. With the whole-cell configuration established, we next retract each pipette away from the cell body ~ 5 µm using the X axis used for the final approach to the cell, and the wheel at the lowest speed on the micromanipulator pads. All recordings are then switched to current clamp mode for membrane potential recordings.

Current injection

After allowing the cells to recover (~ 2 – 3 min), we next use intracellular current stimulation protocol to characterize their intrinsic properties. In our experiments, each neuron receives 500 ms square current injections ranging in amplitude of – 200, – 100 pA, and then 50, 100, 150, 200 pA. This helps define rheobase, intrinsic excitability, and firing pattern of the recorded neurons. Next, hyperpolarizing current pulses of – 100 pA, 200 ms duration, 200 ms interval, are applied for 30 s to determine the input resistance and access resistance (ideally < 50 MΩ), followed by 30 s without stimulation to record spontaneous sub- and supra-threshold activity. Then, we define the square current pulse amplitude necessary to drive the recorded neuron to fire a single action potential. We aim to use the smallest duration possible, usually 10 to 20 ms of 100 to 400 pA amplitude. When these parameters have been set we repeat this stimulus for each cell at 0.5 or 1 Hz to trigger single action potential (**Figure 3B**). To study synaptic dynamics using pair of action potential to define pair pulse ratio we increase the current injection time to ~50 ms (for more details see (Jouhanneau et al., 2015)).

There was no tonic current injection applied during the recording to avoid misestimation of the V_m due to possible changes in the access resistance during the recording. Recordings are terminated when the most hyperpolarized sections of the Downstate V_m are more depolarized than – 50mV. Due to differences in ionic concentration, valency and mobility between the intracellular and extracellular solution, a Liquid Junction Potential (LJP) will be established when the pipette enters the recording chamber (Barry and Lynch, 1991). The LJP can be ~ 10 mV and is complex to calculate accurately in vivo, therefore to avoid miscalculation, we do not subtract the LJP from the recorded values.

Anatomy: live fluorescent two-photon imaging and post hoc biocytin staining

During a successful recording, Alexa fluorophore 594 diffuses into the neurons and allows live visualization of the cell's anatomy (**Figures 2E, 3A and 3D**). Stacks of scans at 820 nm wavelength separated by 2 μm can help identify the cell type using the somatic and dendritic anatomy as well as the presence of dendritic spines. However, for higher resolution anatomical reconstruction mice are deeply anaesthetized with an i.p. injection of urethane (2.5 g/kg, Sigma-Aldrich) before being transcardially perfused with cold Ringer's solution and then by 4% paraformaldehyde solution (PFA, Roti-Histofix 4%, Roth). After perfusion, the brain is removed and placed in 4% PFA overnight at 4ºC and then in phosphate buffer (Roti-CELL 10xPBS, Roth) and stored at 4ºC until further processing.

Tangential slices of 100 μm are cut using a Leica VT1000 S vibratome and stored in phosphate buffer. Intracellular staining with biocytin is then revealed using a standard ABC kit (Vectastain Elite ABC-Peroxidase kit, Biozol), with diaminobenzidine (DAB, Vector lab) enhancement. Treated slices are mounted on glass slides using a gel mounting agent (Moviol, Sigma-Aldrich), sealed with nail polish and stored at 4ºC. Reconstructions of the recorded neurons are performed using the software NeuroLucida (MicroBrightField).

Success rates

We next calculated the success rates of our approach during patching of layer 2 neurons (depth: -182.01 +/- 2.49 μm; distance: 38.99 +/- 1.84 μm) in 37 trials, each trial corresponding to one insertion of 3 pipettes into the brain, in 15 anesthetised wild-type mice (males, 21.97 +/- 0.25 days old) using the shadow patch method performed by a trained researcher. We calculated the number of times we were unsuccessful or obtained a single, dual or triple whole-cell recording. In 17/37 trials we obtained a triple recording, in 17/37 trials a dual, in 2/37 single and in 1/37 no recordings (**Figure 2G**). Thus in 92% of shadow patching trials using three pipettes we obtained at least a dual recoding that would allow a connectivity test. We then repeated this analysis for attempted triple recordings (3 pipettes) in mice expressing a fluorescently labelled indicator in a subset of GABA-ergic interneurons (PV-tdT or SST-tdT), where a successful recording trial had to include a least one fluorescently labelled neuron. In 11/41 trials from 18 mice we obtained a triple recording, in 15/41 trials double, 8/41 single (ie one td-T labelled neuron recorded) and were unsuccessful in 7/41 attempts (**Figure 2G**). Thus, in 63 % of trials with fluorescently labelled mice we obtained at least a dual recording including 1 fluorescent GABA-ergic neuron to allow for a connectivity test.

During these experiments, we noticed that for trials that took longer it seemed harder to perform a successful whole-cell recording. From our triple recording dataset in Figure 2, we therefore systematically recorded the time to go from Step A (positioning above brain) to Step E (whole-cell recording). Plotting the time taken against the success rates of successfully patching one neuron showed a significant negative correlation and confirmed that reducing the time taken to patch improves success rates for patching. In a different set of experiments where

the recordings were not terminated prematurely and the Downstate V_m was < -50 mV, we calculated a mean recording time of 14 minutes 54 seconds +/- 6 minutes 7 seconds (n = 143 cells) with a minimum recording time of 5 minutes and a maximum of 32 minutes.

In vivo glutamatergic excitatory monosynaptic inputs to excitatory pyramidal neurons and GABA-ergic inhibitory interneurons

During slow wave sleep and under anaesthesia the membrane potential of cortical neurons fluctuates between hyperpolarized, synaptically quiescent, Downstates and depolarized, synaptically active, Upstates (Steriade et al., 1993). We first examined synaptic transmission between excitatory pyramidal neurons in Downstates. In wild type mice, pyramidal neurons were targeted using their pyramidal shaped soma and apical trunk visible as shadows against the fluorescent extracellular space and after each successful recording, confirmed using Z-stack images to visualise the somatic and dendritic morphology (e.g. spines). Moreover, we used transgenic mice expressing fluorophore in excitatory neurons using offspring of the NEX-cre line crossed with the Ai9 YFP reporter mouse to study excitatory pyramidal neurons (PYR) to PYR monosynaptic connectivity. To trigger spikes and measure synaptic transmission we depolarized each neuron with injection of a short depolarising current 100 – 400 pA of 20 – 50 ms duration at 0.5 Hz to evoked a single action potential (**Figure 3B**) and used spike trigger averages to look at the corresponding unitary excitatory postsynaptic potential ($_u$EPSP). To study short term synaptic dynamics, further action potentials could be triggered by longer current pulses or by trains of shorter pulses. For further details on the properties of the connections see (Jouhanneau et al., 2015).

We went on to use the same approach to examine excitatory connections from PYRs to different subtypes of GABA-ergic neurons including parvalbumin (PV), somatostatin (SST) and vasoactive intestinal polypeptide (VIP) expressing neurons. The PV-cre, SST-cre and VIP-cre mice were crossed with the Ai9 reporter line to visualise the subpopulation of GABA-ergic neurons of interest. The approach to target recordings of interneurons is technically similar to that of excitatory neurons. However, in some cases, during the sealing step, the positive pressure was lower than usual (~ 10 mbar) in order to target small diameter neurons like VIP interneurons. For further details on inputs to PV and SST interneurons in vivo see (Jouhanneau et al., 2018).

Inhibitory monosynaptic connections to PYRs and INTs in vivo

We next used multi-patch targeted recordings to examine inhibitory monosynaptic neurotransmission in vivo. Here we recorded inhibitory connections from GABA-ergic INTs to PYRs and also from INT to INT. The recording procedure is similar to that described above, but because interneurons often have a higher input resistance, less positive current is typically

349 used to trigger single action potentials. Moreover, because of their hyperpolarized reversal

350 potential, $_u$IPSPs are more visible at more depolarized V_m values. This was evident in our

351 recordings, where the amplitude of $_u$IPSPs was larger in Upstates compared to Downstates

352 (Jouhanneau et al., 2018).

  DISCUSSION

Understanding the link between monosynaptic connectivity and the functional properties of cortical neurons is a key goal of neuroscience. Here we have described an approach that allows V_m recordings of monosynaptically connected cortical neurons in vivo. The setup uses a standard in vivo two-photon microscope, whole-cell patch clamp amplifiers and motorised micromanipulators. With training, multiple whole-cell recordings of neurons in layer 2 can be performed with a success rate of forming a dual recording of ~ 90% and recording duration (~ 15 mins) similar to single electrode blind in vivo patch clamp recordings. In **Table 1** we have outlined a list of common problems with targeted patch clamp recordings and possible solutions. Future studies could now use this method to assess cell-type specific synaptic connectivity in vivo and the synaptic mechanisms of correlated cortical spiking.

Recent results using in vivo targeted whole-cell recordings of synaptically connected neurons

Because of tissue slicing and differences in neuromodulator and extracellular ion concentrations, it was unclear whether basic properties of excitatory connections would be similar in the living animal as compared to prior cortical slice work. Therefore, in a first study, we used two-photon targeted multiple whole-cell recordings to examine glutamatergic monosynaptic transmission between layer 2 pyramidal neurons (Jouhanneau et al., 2015). Overall, we observed that the rates of connectivity, the amplitude and kinetics were similar to in vitro studies in this cortical region (Feldmeyer et al., 2006; Lefort and Petersen, 2017) with layer 2 excitatory neurons connected by non-random, sparse, small amplitude connections.

Cortical neurons in vivo are constantly active with action potentials generated during depolarized phases of spontaneous synaptic activity. The impact of the network activity on synaptic transmission, however, has been debated (Bruno, 2006; Crochet et al., 2005; Destexhe et al., 2003; Pala and Petersen, 2014; Reig et al., 2015), in part because of the lack of methods to record from synaptically connected neurons in vivo. Recently, two studies investigated the impact of slow network activity on monosynaptic transmission in anaesthetized and awake resting mice (Ferrarese et al., 2018; Pala and Petersen, 2014). Despite the 10 – 15 mV depolarization during a depolarized phase of slow activity, there was little modulation in the $_u$EPSP amplitude at the population level (Ferrarese et al., 2018; Pala and Petersen, 2014). However, we observed that smaller (< 400uV) amplitude inputs are increased in amplitude during periods of depolarized V_m, whereas larger amplitude inputs are decreased (Ferrarese et al., 2018). We went on to use intracellular pharmacology to show that this amplification effect was mediated by postsynaptic voltage gated ion channels. Interestingly, recent work in awake animals using single cell optogenetic stimulation has shown an increase in $_u$EPSP amplitude during periods of movement compared to periods of quiet

wakefulness (Pala and Petersen, 2018). Further work is required to understand the mechanisms underlying this increase, but one possibility is that it is the result of neuromodulatory inputs to cortex during movement (Urban-Ciecko et al., 2018).

Spike triggered averaging of the V_m of excitatory L2/3 cortical pyramidal neurons has shown large amplitude and cell-specific pre-spike depolarizations (Poulet and Petersen, 2008; Zhao et al., 2016), indicating that summation of many inputs are and/or non-linear dendritic events are required to drive spiking in excitatory neurons in vivo. Indeed, we were unable to evoke APs in excitatory neurons with $_u$EPSPs, even during depolarized Upstates (Jouhanneau et al., 2018). In contrast, GABA-ergic interneurons show smaller amplitude pre-spike depolarizations (Gentet et al., 2010), and, using the multi-patch approach, we showed that single excitatory synaptic inputs can trigger action potentials in PV-expressing GABA-ergic neurons during Upstates (Jouhanneau et al., 2018). This difference was the result of a combination of larger amplitude and faster rising inputs to PV neurons as well as an overall more depolarized V_m during Upstates. Single excitatory input evoked spiking in PV neurons led to fast disynaptic inhibition of neighbouring pyramidal neurons and may contribute to their sparse firing rates.

Limitations, uses and possible improvements

The success rates of obtaining a visually targeted whole-cell recording is strongly dependent on the cleanliness of the tip of the pipette. In addition, we noted that clean removal of the dura and entering the brain at a clean entry point devoid of dirt were important aspects of a successful experiment. Likewise, the longer the time to patch a neuron the lower the likelihood of success (**Figure 2**).

Increasing the number of pipettes per trial helps test more possible connections giving the opportunity to look at higher order connectivity motifs (Guzman et al., 2016; Peng et al., 2017) and provides the experimenter with a higher chance of obtaining a dual recording. While we have successfully used 4 pipettes to obtain quadruple whole-cell recordings (**Figure 2A-E**), our data on success rates (**Figure 2G-H**) was taken from a series of experiments using 3 pipettes. During wildtype shadow patching, the extra time to use 4 rather than 3 is not considerable and can be a significant advantage to increase the yield recorded cells. However, for targeting fluorescently labelled subsets of neurons, the experimenter needs to weigh the advantage of using a 4th pipette against the extra time taken to insert 4 pipettes into the brain.

A limitation of the method described above is the use of anaesthesia during the recording session. An important future aim is therefore to perform this technique in awake and behaving animals. While multiple whole-cell recordings have been performed in awake animals (Arroyo et al., 2018; Gentet et al., 2010; Poulet and Petersen, 2008; Zhao et al., 2016), little data exists on synaptic transmission in awake animals (Pala and Petersen, 2018). In part this

is because of worse control of the mechanical stability of the brain during behavior. However,
the use of agarose or cover slips on the brain surface has helped reduce movement for imaging
experiments and trackball systems have helped reduce pressure exerted on the head during
leg movements may help stabilise the brain and allow recordings in behaving mice.

The method and data presented above has focussed on closely positioned (< 150 µm
apart) neurons in superficial layers of neocortex. It would, of course, be interesting to examine
synaptic transmission between deeper layer neurons or between neurons positioned further
apart, perhaps even in different cortical regions; something not easy to achieve in brain slice
studies. Electrodes can easily be positioned to target different parts of the brain, but both the
recording depth and field of view are determined by the optical properties of the microscope.
The combination of cell type specific mouse lines (Daigle et al., 2018; Gerfen et al., 2013;
Harris et al., 2014) with improved depth resolution 2-photon microscopes (Papadopoulos et
al., 2017) allows optical access to granular and subgranular layers and may make multiple
recordings possible in deeper layers. Moreover, new two-photon microscope designs with
larger fields of view could provide the possibility to examine neurons situated 1000s of microns
apart (Sofroniew et al., 2016).

Cortical excitatory neurons are sparsely connected and therefore a key limitation to the
throughput of any connectivity study is identifying connected pairs of neurons. Both in vitro and
in vivo studies are normally made blind to connectivity which can lead to many frustrating
recordings from unconnected pairs of neurons. One way to address this is to increase the
numbers of recording pipettes to allow the testing of more connections per recording session
(Peng et al., 2017; Perin et al., 2011). Another could be to use transsynaptic tracing to visulaise
connected pairs of neurons prior to recording (Wickersham et al., 2007). So far, however,
single cell initiated transsynaptic tracing has been used with sequential rather than
simultaneous anatomical tracing (Vélez-Fort et al., 2018), or calcium imaging (Wertz et al.,
2015) of presynaptic neurons. With the use of less toxic rabies virus variants (Ciabatti et al.,
2017), this approach could now be attempted with simultaneous whole-cell recordings from
pre- and post-synaptic neurons.

To understand synaptic integration, it will be important to be able to activate unitary
inputs from more than 1 neuron with high temporal precision. The recent development of in
vivo single cell optogenetic stimulation (Packer et al., 2015; Rickgauer et al., 2014), has
provided a way to activate multiple single neurons with different spatial and temporal patterns.
A combination of this technique with in vivo whole-cell recording to monitor small amplitude
subthreshold synaptic inputs, could provide an exciting avenue to investigate the computations
underlying the integration of multiple unitary inputs in single cells.

An in vivo patch clamp recording session can be slow, especially when learning the
technique or using multiple electrodes. In particular the replacement of old pipettes with

unused ones at each new recording attempt takes up valuable time. A recent study has circumvented this problem with the use of a commercially available detergent and rinsing procedure (Kolb et al., 2016). This allowed the reuse of the same pipettes with no degradation in signal fidelity both in vitro and in vivo. Robotic assistance to move the pipettes also may help speed up this process and has recently been implemented for the entire visualised patching process (Annecchino et al., 2017; Suk et al., 2017).

The craniotomy and glass recording pipette exposes the brain and requires the use of extracellular Ringer's solution as well as an intracellular solution. These solutions are made in the lab and therefore provide an access point for the application of extra- and intra-cellular pharmacological agents in vivo. For example, we recently applied intracellular blockers of different ion channels via the intracellular solution to investigate their impact on synaptic integration during network activity (Ferrarese et al., 2018), and extracellular antagonist to monitor the impact of acetylcholine on monosynaptic excitatory transmission between PYR neurons and neighbouring SST GABA-ergic neurons (Urban-Ciecko et al., 2018). Future work could therefore use specific pharmacological agents to help understand the ionic mechanisms of synaptic transmission in active, intact networks.

Conclusions

Two-photon targeted multiple-whole cell recordings provide a high resolution and cell-type specific way of identifying monosynaptically connected neurons *in vivo*. This approach will allow studies into the impact of network activity on synaptic transmission and the synaptic mechanisms underlying action potentials generation. Moreover, the possibility to record the V_m of both pre- and post-synaptic neurons now provides a way to examine the synaptic basis of correlated spiking activity of cortical neurons.

AUTHORS CONTRIBUTIONS

JSJ performed the experiments and analysed the data. JSJ and JFAP designed the study and wrote the manuscript.

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505 **FIGURES**

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Figure 1. In vivo two-photon targeted multiple whole-cell patch-clamp setup.
(A) Photograph of the setup showing (1) Two-photon microscope, micromanipulators and pre-
amplifier fixed on an air-damped table; (2) Chameleon Ultra II laser; (3) Luigs and Neumann
micromanipulator control units; (4): Sigmann Electronik air pressure controller; (5) Sigmann
Electronik dual piezo amplifier (6) Light source to illuminate the preparation, (7) FHC
temperature controller, (8) Tektronix Oscilloscope, (9) Luigs and Neumman micromanipulator
and shifting table control pads, (10) ITC-18 Heka analogue to digital converter board; (11)
Multiclamp 700B amplifier; (12) Data acquisition computer.
(B) Schematic top-down view of recording area showing arrangement of electrode holders,
light, reference electrode and somatosensory/optogenetic stimulator.
(C) Cartoon showing mouse position and head support.
(D) Schematic showing the angle of pipettes defined by the X-axis used to allow access under
the objective.
(E) Photograph of the glass recording pipette showing optimal taper for two-photon targeted
patch-clamp recording.
(F) Photograph showing a zoom of the pipette tip from (E).
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Figure 2. Two-photon targeted whole-cell patch-clamp procedure.

(A) Top: Schematic showing position, movement direction (arrow) and movement order (1-4) of dye-filled (Alexa 594) recording pipettes from ~ 300 µm above the craniotomy to the brain surface, high positive pressure is maintained to avoid pipette tip clogging. Bottom: photograph taken using a CCD camera illuminated with green light showing example craniotomy used for anesthetised patching (~ 500 µm diameter) in which the dura has been removed.

(B) As in (A), but showing, top: the insertion of the pipettes through the pia under visual control (820 nm) using high positive pressure to ~ – 100µm from pial surface. As soon as the pipettes enter the brain the pressure is reduced to 100 mbar and then 30 mbar when closer to the cell body positions. Bottom: In vivo two-photon image showing the position of 4 pipettes in same focal plan near the cell bodies of interest. Positioning is performed sequentially, one pipette at a time. Cell bodies are revealed as dark shadows contrasting with the fluorescent signal of the extracellular dye.

(C) Top: the targeting phase where the excitation light wavelength is altered to visualize the cells of interest; in this case, excitatory glutamatergic neurons expressing the red fluorophore tdT (white arrows). Bottom: in vivo fluorescent image of pyramidal neurons expressing tdT corresponding to the photo in (B).

(D) Top: the final sealing phase of the procedure. A recording pipette is pushed into the cell soma membrane and then, upon strong contact, the pressure is released to achieve a giga-seal. The cells are sealed sequentially under visual control. Bottom: in vivo image following

sealing of all 4 pipettes. Note the reduction in background fluorescence during sealing because

of the reduction in extracellular dye.

(E) Top: entering whole-cell configuration following seal-breaking by applying a transient

negative pressure. As soon as the membrane patch is ruptured the dye within the pipettes will

fill the neurons revealing anatomy. Bottom: in vivo image of neurons filled with Alexa 594 after

the recording experiments.

(F) Simultaneous example in vivo whole-cell V_m recordings of the four excitatory pyramidal

neurons shown in (E) showing spontaneous activity with Up- and Downstates under urethane

anaesthesia.

(G) Proportion of triple, double, single and no recordings from trials using three pipettes in (left)

wild type mice using the shadow patching method and (right) in mice expressing a cell type

specific fluorophore (PV x Ai9 and SST x Ai9). Data from fluorescent mice included at least 1

fluorescent neuron in the single/double/triple recordings.

(H) Plots showing the negative correlation between the success rate of achieving a whole-cell

patch clamp recording in wild type and fluorescent mice (same data as in (G)) and the time

taken from phases (A) to (E) described above. Each dot represents the mean success rate for

a 1 min time bin from 15 wild type mice (37 trials) and 18 mice expressing fluorescent proteins

(SST-cre x Ai9 and PV-crex Ai9; 42 trials).

Figure 3: Example of monosynaptic connections in vivo.

(A) in vivo two-photon fluorescent imaging of three filled with Alexa 594 excitatory pyramidal neurons.

(B) Membrane potential fluctuation of the pyramidal neurons recoded in (A) showing the stimulation protocol consisting of brief current injection to evoke a single action potential in each neuron every 2 seconds.

(C) Example monosynaptic excitatory connection from neuron PYR1 to the neuron PYR3 shown in (A) and (B).

(D) In vivo image of a triple recording including a PV-tdT expressing interneuron.

(E) Excitatory monosynaptic connection from presynaptic neuron PYR2 and the PV interneurons from experiment shown in (D).

(F) Inhibitory monosynaptic connection from presynaptic PV expressing interneurons to the postsynaptic excitatory PYR1 neuron shown in (D).

 Table 1: Troubleshooting during multiple whole cell patching

Step	Problem	Possible reason	Solution
Surgery	Edema	Brain surface damaged	Take care when removing the dura as damaging the pia will result in tissue swelling.
		Craniotomy too large	Keep size <1mm^2
		Anesthesia	Isoflurane increases plasma volume which can induce swelling (Hamada et al., 1993). Drill a smaller craniotomy and use 1.2% agarose in Ringer's solution on the craniotomy to damp the swelling. Or use urethane which does not increase plasma volume as much.
2	Pipettes unable to enter the brain	Dura intact	Re-attempt to remove the dura.
		Blood vessel in the way	Make sure your brain entry point is clear. The use of green light will help to increase the contrast between blood vessel and brain tissue.
3	Dye not flowing out the pipette	Pipette clogged	Make sure the positive pressure is on before entering the ringer solution this will help maintaining a clean pipette tip. Fresh pipette.
		Debris accumulating outside the pipette tip	Precipitate accumulating outside of the pipette could be a sign of grounding issue. Make sure the Ringer's solution in the recording chamber is not touching the head post.
		Pipette clogged, visible debris inside the pipette	Debris inside the pipette can come from the intracellular solution itself. Use a fresh 0.45 μm syringe filter (Minisart SRP4, Sartorius Stedium) for each experiment. Debris can also come from the silver chloride electrode. Make sure the end of the pipettes are flame polished to avoid removing pieces of silver chloride coating. Try clearing the tip of the pipette by increasing briefly the pressure (+ 50 mbar). If unsuccessful use new pipettes. Do not carry on with clogged pipettes even if the tip resistance is acceptable as it will most likely impair sealing.
		Faulty pressure system	Check air pressure system can maintain a stable pressure.
	No image	Laser off	Turn laser on.
		Shutter closed	Open shutter.
		PMT overload	Check external lights are switched off while the PMT's are on. Reset PMT.
	Poor imaging quality	High background fluorescence	Decrease the internal pipette pressure to reduce efflux of intracellular solution.
		Leak of Ringer's solution out of the recording chamber	Check the contact between Ringer's solution and the objective. Try fixing leak with Vaseline.
		Laser power is to high	Small spherical dark spots appearing in the image is a sign of tissue damage caused by high laser power. The quality of the preparation is compromised and experiment should be terminated.
4	Unable to seal	Pipette resistance not optimal	Although lower resistance pipette (< 5 MΩ) will give you a better access to the cell it can also decrease sealing success. Aim for pipette resistance of 5 – 8 MΩ.
		Dirt on pipette tip	Although the resistance of the dirty pipette tip might be in the expected range they will dramatically reduce chances to seal successfully on neurons. Fresh pipettes.
		Pressure while approaching the cell of interest	Decrease the pressure while approaching the cell. High pressure will tend to "push" away the targeted neuron. In addition, a slight negative pressure while sealing on the cell might be beneficial but also fatal.
		Intracellular solution	Check the osmolarity of your internal solution which usually need to be lower than the one of the Ringer's solution.
		Holding potential not set to -70 mV	Make sure the holding potential is set up to -70 mV while sealing on the cell. In some cases, it will help to bring gradually the cell to -100 mV during the sealing procedure and then holding it back to -70 mV before breaking in.

5	Unable to break in	Pipette resistance is too high	Pipette with a higher resistance than 8MΩ will tend to be more difficult to break in. The optimum pipette tip resistance is between 5 to 8 MΩ.
		Patched a blood vessel	On the same focal plan blood vessel might look like cell bodies. A quick up-down scan will usually help identifying clearly cells from capillaries. Fresh pipette.
		Patched on buddle of fibres	In some cases, the pipette might catch on fibres on the way to the cells of interest and even though a giga-seal will be made breaking in will fail. Fresh pipette.
		Faulty pressure system	Make sure the pressure system is reactive to your suction. Suction must be brief. If something is damping the change of pressure breaking in will be impaired.
Recording	Short duration recordings (<5 mins)	Brain movement	Breathing of the mouse might create movement. Check the position of the mouse head relative to the body. If movement persist use 1.2% agarose ringer solution to stabilise the brain movements, or stop the experiment. The pressure due to multiple pipettes entering the brain need to be accounted for. Eventually, the tissue will relax and "move back" to its original position which will create tension on the seal between the cell and the pipette. Visual check using two-photon scanning during the recording is valuable to adjust the pipette position in regard to the recorded neurons. New experiment with different anaesthesia.
		Craniotomy is too large	New experiment with smaller craniotomy.
		Unstable head implant	In case of chronic experiment it is possible that the head implant may loosened due to tissue regrowth or poor gluing.
		Location of the pipette relative to the cell of interest	Aim for the most dorsal third of the targeted neuron soma to increase success rate and stability.
	Unable to trigger action potentials	Patched on glial cell	Check firing pattern, glial cells do not spike and typically have a very hyperpolarized V_m with no spontaneous activity. Change pipette and start over.
		Access resistance is too high	Try to gain better access by transiently applying negative pressure to the pipette tip.
	V_m depolarized	Recording solution	Use fresh Ringer's and intracellular solutions with correct osmolarity.
	V_m drift	Reference electrodes	Change or re-chloridize the recording and reference electrodes.
		Metal head implant touching Ringer's solution	Isolate head implant from Ringer's solution in recording chamber.
	No spontaneous activity	Anaesthesia level too high	Reduce isoflurane levels.
		Body temperature is too low	Check the temperature of the mouse and feedback controller.

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