

1 Midbrain organoids: A new tool to investigate Parkinson's disease

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9 10 11 Abstract

12 The study of human 3D cell culture models not only bridges the gap between traditional 2D *in*
13 *vitro* experiments and *in vivo* animal models, it also addresses processes that cannot be
14 recapitulated by either of these traditional models. Therefore, it offers an opportunity to better
15 understand complex biology including brain development. The brain organoid technology
16 provides a physiologically relevant context, which holds great potential for its application in
17 modelling neurological diseases.

18 Here, we compare different methods to obtain highly specialised structures that resemble
19 specific features of the human midbrain. Regionally patterned neural stem cells were utilised
20 to derive such human midbrain-specific organoids. The resulting neural tissue exhibited
21 abundant neurons with midbrain dopaminergic neuron identity, as well as astroglia and
22 oligodendrocyte differentiation. Within the midbrain organoids, neurite myelination and the
23 formation of synaptic connections were observed. Regular neuronal fire patterning and neural
24 network synchronicity were determined by multielectrode array recordings. In addition to
25 electrophysiologically functional neurons producing and secreting dopamine, responsive
26 neuronal subtypes, such as GABAergic and glutamatergic neurons were also detected. In order
27 to model disorders like Parkinson's disease *in vitro*, midbrain organoids carrying a disease
28 specific mutation were derived and compared to healthy control organoids to investigate
29 relevant neurodegenerative pathophysiology. In this way midbrain-specific organoids
30 constitute a powerful tool for human-specific *in vitro* modelling of neurological disorders with
31 a great potential to be utilised in advanced therapy development.

34 Introduction

35 The development of the organoid methodology counts today as a major technological
36 breakthrough in stem cell research. It enabled immense advances in the application of human
37 induced pluripotent stem cells (hiPSCs) and was even celebrated as the 'Method of the Year'
38 in 2017 ("Method of the Year 2017: Organoids," 2018).

40 Cerebral organoids

41 Initial experiments on self-organisation of pluripotent stem cells (PSCs) under 3D conditions
42 were performed more than ten years ago. Yet, it were the findings of MADELEINE LANCASTER
43 and co-workers that actually launched a new era in research on the human brain by introducing
44 the "cerebral organoids" in 2013 (Kelava & Lancaster, 2016b; Lancaster et al., 2013).
45 Supporting the conclusions of initial 3D culture experiments, LANCASTER et al. took advantage
46 of the PSCs' intrinsic self-organisation and derived neuroepithelium under 3D conditions
47 (Kadoshima et al., 2013). To avoid limitations on specific brain region identities, they did not
48 add patterning growth factors. Instead, after aggregation, the cells were embedded in Matrigel,
49 a surrogate matrix that was previously introduced for the generation of intestinal organoids
50 (Sato et al., 2009). This serves as a structural support, inducing the correct polarity stimulus to
51 promote the complex outgrowth of large, apicobasal neuroepithelial buds (Lancaster &
52 Knoblich, 2014c, 2014a; Wang et al., 2018). These buds expand during the course of culture
53 and acquire not only various brain identities but also fluid-filled lumina reminiscent of brain
54 ventricles. To improve nutrient supply and oxygen exchange, the floating cerebral organoids
55 were cultured in spinning bioreactors or on orbital shaker plates, allowing organoids to grow
56 up to 4 mm in diameter (Kelava & Lancaster, 2016b; Lancaster & Knoblich, 2014a). These
57 optimised growth conditions combined with the intrinsic self-organising capabilities of PSCs
58 resulted in the formation of a variety of brain regions within a single organoid, including
59 hindbrain, midbrain, forebrain, and even retinal tissue identities (Lancaster & Knoblich, 2014b;
60 Lancaster et al., 2013; Renner et al., 2017; Wang et al., 2018). Remarkably, a detailed study
61 about the patterning events during the course of cerebral organoid development and
62 differentiation indicates that spatial and temporal patterning events are reminiscent of those
63 determining the human brain development (Renner et al., 2017).

66 Modification of cerebral organoids

67 The classic cerebral organoid protocol, describing the generation of general whole-brain
68 organoids, has been modified by many research groups in the last years and has resulted in the
69 formation of more regionally specific 3D cell cultures (Lancaster et al., 2016; Lancaster &
70 Knoblich, 2014a). In the study of ANCA PAŞCA and co-workers, both bone morphogenetic
71 protein (BMP) and transforming growth factor β (TGF- β) signalling pathways were inhibited
72 by the small molecules Dorsomorphin (DM) and SB-431542 (SB) to achieve an effective
73 neural induction (Paşca et al., 2015). This dual-SMAD inhibition, in combination with
74 fibroblast growth factor (FGF) 2, epidermal growth factor (EGF) and the absence of
75 extracellular scaffolding, gave rise to neural progenitors expressing the dorsal telencephalic
76 markers paired box protein 6 (PAX6) and forkhead box protein G1 (FOXP1). Further neuronal
77 differentiation was promoted by replacing FGF2 and EGF with brain-derived neurotrophic
78 factor (BDNF) and neurotrophic factor 3 (NT3) and led to the generation of various neural and
79 glial identities of the dorsal cortex within each spheroid, including superficial and deep cortical
80 layer neurons (Kelava & Lancaster, 2016b; Paşca et al., 2015). With this, PAŞCA et al. described
81 a method that gave rise to a 3D culture specific of a brain subregion; a culture that exhibited a
82 reduced number of ectodermal derivatives compared to the original cerebral organoid protocol.
83 A similar approach of using a dual-SMAD inhibition was published by QIAN et al. in 2016.

84 While maintaining the basis of the LANCASTER protocol, such as Matrigel embedding and
85 agitation, they demonstrated that it is possible to culture organoids in 3D printed miniaturised
86 bioreactors, thus enabling more feasible, scaled-up productions of neural 3D cultures (Qian et
87 al., 2016). Another advantage of the self-engineered multi-well spinning device is the
88 possibility of comparing numerous different culture conditions in parallel. PAŞCA et al. aimed
89 to reduce the tissue heterogeneity of the cerebral organoids and therefore pre-patterned the
90 embryoid bodies (EBs) to obtain specific brain regions. The inhibition of TGF- β signalling by
91 SB and activation of Wnt signalling by glycogen synthase kinase 3 (GSK-3 β) inhibitor CHIR-
92 99021 (CHIR) within the first two weeks of culture, resulted in forebrain organoids organised
93 in defined, multi-layered progenitor zones, including homologues to the ventricular zone (VZ),
94 the inner and outer subventricular zones (SVZ). Moreover, neuronal types of all six cortical
95 layers could be detected within these forebrain-specific organoids. With the help of the mini-
96 bioreactors, QIAN and co-workers also developed a method to derive hypothalamic-specific
97 organoids. After a dual-SMAD inhibition with SB and LDN-193189 (LDN), they patterned the
98 neuroectodermal cells to a hypothalamic fate by activating Wnt and sonic hedgehog (SHH)
99 signalling, applying WNT3a, SHH and Purmorphamine (PMA) to the culture. 40 days later,
100 these organoids contained cell populations expressing markers specific of hypothalamic
101 neuronal lineages (Qian et al., 2016).

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104 Disease modelling with brain organoids

105 Similar characteristics on a molecular, cellular and physiological basis between human brain
106 organoids and the actual human brain justify their increasing application in studying brain
107 biology and modelling neurological disorders (Wang, Zhu et al. 2018). Already LANCASTER
108 and co-workers discovered the potential of cerebral organoids as a model to detect impaired
109 neurodevelopment and they derived organoids carrying a mutation that causes microcephaly
110 (Lancaster et al., 2013). It was also suggested that a Zika virus (ZIKV) infection was causing
111 microcephaly in neonates. In 2016, the World Health Organization (WHO) declared the ZIKV
112 and its associated complications an emergency of public health (Dutta et al., 2017; Qian et al.,
113 2016). This activation of the global research community led to an accelerated development of
114 vaccines and treatments, with many studies based on cerebral organoids, which were able to
115 recapitulate features of human cortical development *in vitro* (Cugola et al., 2016; Dang et al.,
116 2016; Garcez et al., 2016; Miner & Diamond, 2016; Nowakowski et al., 2016; Qian et al.,
117 2016; Wells et al., 2016; Xu et al., 2016). The results of these studies indicate that a ZIKV
118 infection affects the neurogenesis, disrupts the cortical layers of the organoids, and, in a similar
119 manner, causes microcephalic-like deficits in cortical development (Dutta et al., 2017). Due to
120 the specific embryonic formation of human brains, only a human-specific 3D cell culture model
121 exhibiting advanced organisational features could have led to the reported discoveries. Neither
122 murine nor 2D cell culture were able to address the potential link between ZIKV and
123 microcephaly (Dutta et al., 2017; Qian et al., 2016; Setia & Muotri, 2019). In addition to this
124 successful application, brain organoids have proven useful to study other neurological
125 disorders. Recently, so-called “tumouroids” have been established from human glioblastoma,
126 the most common and aggressive brain cancer (Dutta et al., 2017). The hypoxic gradients and
127 stem cell heterogeneity found in these tumouroids cannot be recreated via conventional culture
128 methods. Therefore, glioblastoma organoids offer a unique opportunity for their application in
129 brain cancer diagnostics and therapeutics (Bian et al., 2018; Dutta et al., 2017; Hubert et al.,
130 2016). Furthermore, two different approaches using 3D human neural cell culture systems were
131 reported to recapitulate Alzheimer's disease (AD) phenotypes *in vitro* (Choi et al., 2014; Raja
132 et al., 2016). These 3D cultures provide an environment that promotes the formation of
133 amyloid- β (A β) plaques and neurofibrillary tangles (NFTs), pathological events that could not

134 have been serially linked before by using 2D cultured human neurons (Choi et al., 2014, 2016;
135 D'Avanzo et al., 2015; Raja et al., 2016). This confirms that the evolving brain organoid
136 methodology facilitates the development of more precise human cellular models that can
137 support the research of neurodegenerative disorders. The technology of more complex 3D cell
138 culture systems not only bridges the gap between traditional 2D *in vitro* experiments and *in*
139 *vivo* animal models, but also addresses processes that cannot be recapitulated by these
140 traditional models. For example, drug failure or unanticipated side-effects upon translation to
141 humans can be a result of the different metabolisms of humans and animals. Therefore, human
142 organoids offer an opportunity to unravel complex biological processes, such as the
143 development of the human brain, where conventional models have not proven successful. The
144 establishment of stem cell-derived brain organoids allows the modelling of key aspects of
145 human brain development *in vitro*, by utilising the enormous differentiation potential of PSCs
146 and their ability to self-organise with a specific spatial orientation. Overall, this novel
147 technology provides a physiologically relevant context, such as interactions between glia cells
148 and neurons in a spatially organised microenvironment, which holds great potential for its
149 application in modelling neurological diseases.

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152 Discussion

153 The lack of advanced experimental *in vitro* models that truly recapitulate the complexity of the
154 human brain is one of the main limitations in neuroscience and in the field of disease modelling.
155 Current *in vitro* approaches to model physiology and pathology of human neurons are primarily
156 based on cultures of neurons grown under 2D conditions. While the resulting monolayer cell
157 cultures have proven useful as a tool to study disease mechanisms and to identify potential
158 neuroprotective compounds (Cooper et al., 2012; Nguyen et al., 2011; Qing et al., 2017;
159 Reinhardt, Schmid, et al., 2013; Ryan et al., 2013; Sánchez-Danés et al., 2012; Spathis et al.,
160 2017), these culture conditions do not model several characteristics which are relevant to the
161 human brain. Features such as cell-cell interactions and cytoarchitecture might be crucial to
162 predict the effectiveness of *in vitro* tested compounds in clinical trials (Abe-Fukasawa et al.,
163 2018). In this case, the *in vitro* human brain organoid technology is a valuable tool, it allows
164 to opportunity to understand complex biology in a physiologically relevant context and also
165 enables advances in translational applications (Fatehullah et al., 2016). Originally, brain
166 organoid approaches relied on the endogenous capacity of PSCs to self-organise under 3D
167 conditions, intrinsically following early steps of the brain development (Arlotta, 2018). These
168 approaches resulted in ectodermal derivatives with complex cytoarchitectures beyond what is
169 possible with 2D PSC derivatives (Kadoshima et al., 2013; Lancaster et al., 2013; Paşca et al.,
170 2015). Since neurons form functional networks with other neurons and non-neuronal cells in
171 the brain, it is essential to expand the research of neurodegenerative diseases by exploiting 3D
172 models that are able to reproduce these interactions. In general, 3D conditions are able to more
173 closely mimic *in vivo* environments and therefore enable an accelerated neuronal
174 differentiation and network formation *in vitro* (D'Avanzo et al., 2015; Haycock, 2011).
175 Moreover, it has been shown that neurons developed in a 3D environment express a more
176 representative range of neuronal genes than neurons derived in 2D conditions (Seidel et al.,
177 2012). A monolayer of neurons cannot provide as many connections between individual cells
178 as a 3D neuronal culture, and the smaller synaptic distances in a 3D neuronal network promotes
179 functional signal transduction (Cullen et al., 2012; D'Avanzo et al., 2015). By creating a third
180 dimension, neurons develop in an environment that is closer to nature and actually relevant to
181 human physiology, consequently gaining morphological and physiological properties similar
182 to those *in vivo*.

183 Specifically, the generation and characterisation of a novel midbrain-specific 3D cell culture
184 system provides an advanced *in vitro* model to study neurodevelopmental processes as well as
185 neurodegenerative diseases of the human midbrain. In order to achieve the formation of these
186 highly specialised structures, distinctively resembling the human midbrain, organoids have
187 been derived from regionally patterned neural stem cells. This particular starting population,
188 already committed to the ventral neural tube fate of the mesencephalon with further application
189 of spatio-temporal specific signalling under 3D culture conditions, has led to the establishment
190 of novel human midbrain-specific organoids (hMO). Here, we compare and evaluate newly
191 derived hMO methods that create a powerful tool for human-specific *in vitro* disease modelling
192 of neurological disorders.

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195 Derivation of midbrain-specific organoids

196 To achieve the *in vitro* derivation of the human midbrain, additional stimuli of specific
197 pathways along with the 3D PSC culture are required. To date, six 3D cell culture approaches
198 have been published by different research groups for deriving tissue that resembles features of
199 the human midbrain (Jo et al., 2016; Kim et al., 2019; Monzel et al., 2017; Qian et al., 2016;
200 Smits, Reinhardt, et al., 2019; Tieng et al., 2014). All of these approaches can be attributed to
201 previous 2D cell culture experiments, which explored the fundamental principles for the
202 generation and characterisation of midbrain fate-specific cells, derived from PSC via
203 exogenous patterning cues (Kirkeby et al., 2012; Kriks et al., 2011; Reinhardt, Glatza, et al.,
204 2013). For instance, QIAN et al. were inspired by 2D experiments performed by KRIKS et al.
205 and also initial midbrain-like tissue experiments reported by TIENG and co-workers (Kriks et
206 al., 2011; Qian et al., 2016; Tieng et al., 2014). In the same year, another protocol describing
207 the generation of hMOs was published (Jo et al., 2016). JO and co-workers and later KIM et al.
208 based their derivation on the findings of CHAMBERS et al. (Chambers et al., 2009). Additionally,
209 hMO protocols described by MONZEL et al. and SMITS et al. are based on 2D experiments by
210 REINHARDT et al. (Monzel et al., 2017; Reinhardt, Glatza, et al., 2013; Smits, Reinhardt, et al.,
211 2019).

212 The initial step for the derivation of hMOs is the formation of embryoid bodies and induction
213 of the neuroectoderm via dual-SMAD inhibition. In all hMO protocols compared here, SB was
214 used to inhibit the Activin/TGF- β signalling pathway (**Table 1**). The combination with BMP
215 pathway inhibitors enabled a full neural conversion of the PSCs. The use of BMP antagonists
216 Noggin, LDN, and DM has been shown in 2D (Chambers et al., 2009; Kriks et al., 2011;
217 Reinhardt, Glatza, et al., 2013) and applied in 3D stem cell cultures (**Table 1**). To control the
218 specification of the neural progenitor cells, CHIR, a potent chemical inhibitor of GSK-3 β , was
219 used to dose-dependently activate the WNT signalling pathway (Kirkeby et al., 2012). The
220 final patterning, towards midbrain floor plate precursors, requires a treatment with small
221 molecule activators of the SHH signalling pathway, such as recombinant SHH, PMA or
222 smoothened agonist (SAG) (Kriks et al., 2011; Smits, Reinhardt, et al., 2019). This composition
223 of exogenous patterning cues results in neural progenitors that can give rise to authentic,
224 midbrain-specific dopaminergic neurons (mDANs) (Doi et al., 2014; Kirkeby et al., 2012;
225 Kriks et al., 2011; Nolbrant et al., 2017).

226 The further development of these protocols allowed the derivation of 3D cultured hMO. In
227 contrast to 2D monolayer cultures, hMOs can recapitulate complex interactions of mDANs
228 with other cell types of the central nervous system (CNS) in a 3D environment. Cluster
229 analysis, comparing the differentially expressed genes of hMOs, 2D-cultured mDANs, and
230 human prenatal midbrain samples indicated that hMOs share features of gene expression
231 profiles of the prenatal midbrain, which cannot be recreated via the conventional 2D derivation
232 method for mDANs (Jo et al., 2016). This demonstrates that the specific cellular structure and

233 heterogeneity of the midbrain-specific organoid cultures allows biological aspects to be
234 modelled, which cannot be mimicked with current 2D stem cell cultures. Additionally,
235 enormous amounts of disease-relevant mDANs can be produced in a rapid and reproducible
236 way, which is required for disease modelling and drug discovery in the field of Parkinson's
237 disease (PD). Numerous published protocols describe the generation of ventral mDANs from
238 human PSCs in 2D by replicating mDAN's *in vivo*-specification *in vitro* (Doi et al., 2014;
239 Kirkeby et al., 2012; Kriks et al., 2011; Nolbrant et al., 2017). Although current protocols are
240 based on the generation of LMX1A/FOXA2 positive midbrain floorplate progenitors,
241 differentiations starting from PSCs are time-consuming and typically result in cultures
242 containing various neuronal identities (Grealish et al., 2014; Hargus et al., 2010; Kirkeby et
243 al., 2012; Kriks et al., 2011). Typically, brain organoids are generated from PSCs by exploiting
244 developmental processes (Clevers, 2016; Lancaster et al., 2013) or by creating an environment
245 favouring specific stem cell niches (Jo et al., 2016; Kim et al., 2019; Qian et al., 2016; Tieng
246 et al., 2014). However, the utilisation of neural stem cells (NSCs) as a starting population for
247 hMOs has the advantage that already patterned cells differentiate more efficiently into the
248 desired structures. Other adult stem cell-derived organoid cultures have been established for
249 instance, for the generation of intestinal or lung organoids. They contain cell types that are
250 present in the organ from which they were derived and recapitulate some degree of its spatial
251 organisation (Clevers, 2013; Drost & Clevers, 2017; Huch & Koo, 2015). Similarly, the
252 presence of midbrain-specific stem cell niches and clusters of mDANs was shown in a NSC-
253 derived hMO model and approaches to efficiently differentiate mDANs within hMOs by
254 starting from expandable neural precursor cells (NPCs) were reported (Monzel et al., 2017;
255 Smits, Magni, et al., 2019; Smits, Reinhardt, et al., 2019) (**Table 3**). In these approaches NPCs
256 that received already some patterning towards the midbrain have been used. Both hMO models
257 have been already used in other studies (Berger et al., 2018; Jan et al., 2018; Jarazo et al.,
258 2019). Among the published hMO protocols, different approaches have been presented to
259 estimate the number of mDANs that arise during the organoid development (**Table 2**). TIENG
260 and QIAN dissociated their 3D structures and cultured the resulting single cells as a monolayer
261 (Qian et al., 2016; Tieng et al., 2014). Their quantification resulted in more than 60% TH-
262 positive cells in 21 day-old cultures (Tieng et al., 2014) and around 55% TH-positive cells after
263 65 days (Qian et al., 2016). A more straightforward method to quantify the mDAN population
264 is flow cytometry via fluorescence-activated cell sorting (FACS), which also requires
265 dissociated hMOs. By doing so, it has been shown that after 61 days of culture around 64%
266 cells were triple-positive for the mDAN markers TH, LMX1A, and FOXA2 (Monzel et al.,
267 2017). Surprisingly, with the same method, JO and co-workers identified only around 22% of
268 MAP2-positive neurons co-expressing TH in their hMOs after 60 days of culture (Jo et al.,
269 2016). A third approach to estimate the percentage of mDANs within hMOs has been described
270 recently (Bolognin et al., 2019; Smits, Reinhardt, et al., 2019). Here, image analysis algorithms
271 enabled the automated segmentation of nuclei and neurons, with around 62% TH-positive cells
272 after 35 days and around 54% TH-positive cells after 70 days of 3D culture were quantified.
273 The application of high-content image-analysis allows entire organoid sections to be examined,
274 rather than dissociated single cells, which preserves the original morphology and cell-cell
275 interactions of the mDANs. TH is a marker commonly used for mDAN detection, as it is a rate-
276 limiting enzyme for DA biosynthesis. However, it is also expressed in other catecholaminergic
277 cell types and does not represent a unique marker specifically for mDANs, as in the case of the
278 dopamine transporter (DAT) for example or the actual presence of the neurotransmitter DA
279 (Abeliovich & Hammond, 2007). DAT expression has been reported in almost every hMO
280 model (Jo et al., 2016; Kim et al., 2019; Monzel et al., 2017; Qian et al., 2016; Smits, Reinhardt,
281 et al., 2019) (**Table 2**).

282 TIENG and co-workers did not show the presence of DAT in their engineered nervous tissues
283 (ENTs), but they were able to prove the synthesis of DA via high-performance liquid
284 chromatography (HPLC) after cell lysis (Tieng et al., 2014). Also JO and KIM also applied the
285 same method to assess the DA content within the hMOs (Jo et al., 2016; Kim et al., 2019). To
286 verify that the mDANs were not only able to produce DA, but actually able to release the
287 neurotransmitter, the supernatant of the 3D cultures can be analysed with an enzyme-linked
288 immunosorbent assay (ELISA). SMITS et al. detected a DA release that increased as the hMOs
289 matured (Smits, Reinhardt, et al., 2019). An interesting observation was reported for the first
290 time by JO et al., where they detected insoluble, dark-coloured deposits in their hMOs after
291 approximately 60 days (Jo et al., 2016). Using a Fontana-Masson staining they confirmed that
292 these granules were neuromelanin (NM), which is a by-product of DA biosynthesis and
293 accumulates postnatally in the *substantia nigra pars compacta* (SNc) of the human brain (Kim
294 et al., 2019; Pasca, 2018; Zecca et al., 2003). Other hMO culture protocols have also stimulated
295 the production of NM (Monzel et al., 2017; Smits, Reinhardt, et al., 2019) (**Table 2**). The
296 presence of NM is a unique feature of the primate brain (Pasca, 2018). It is neither apparent in
297 mice brains nor murine midbrain-specific organoids (Dawson et al., 2010; Fedorow et al.,
298 2005; Jo et al., 2016; Marton & Paşca, 2016). Wild-type mDANs, derived and cultured in
299 monolayer conditions, only produce NM after an artificial inductions of progerin expression,
300 which is associated with premature ageing (Miller et al., 2013; Sternecker et al., 2014).
301 Membrane-bound, dense pigmented NM was also detected in long-term cultures of
302 homozygous DJ-1 mutant and idiopathic PD patient-derived mDANs (Burbulla et al., 2017).
303 Currently, it is unknown whether NM has a protective or damaging effect on the cell survival,
304 however it is proven that NM-containing mDANs of the SNc are especially vulnerable during
305 the course of PD (Jo et al., 2016; Marton & Paşca, 2016; Zecca et al., 2003). Therefore, NM
306 containing hMOs have a great potential to be used for *in vitro* PD modelling, possibly revealing
307 specific phenotypes that are not present in wild-type 2D cultures or murine models. Moreover,
308 hMOs provide the basis for future studies about the role of NM in PD (Marton & Paşca, 2016;
309 Michel et al., 2016). Since mDANs are essential to model the human midbrain, hMO research
310 has so far focused mainly on this specific type of neurons. Nevertheless, detailed *in vivo* studies
311 have described that the released DA diffuses into synaptic regions of glutamatergic and
312 GABAergic synapses and directly affects other striatal cell types, including the neurons
313 forming the island-/striosome GABA pathway, striatal cholinergic interneurons and the striatal
314 GABA interneurons, all possessing DA receptors (Borrito-Escuela et al., 2018; Calabresi et
315 al., 2014). Furthermore, *substantia nigra* (SN) dopaminergic neurons are directly controlled by
316 GABAergic input (Tepper & Lee, 2007). Evidence from these studies suggest that the presence
317 of other neuronal subtypes is important to be able to model multifactorial disease like PD. A
318 first transcriptional characterisation of hMO was performed by JO and co-workers, showing
319 that aspects of prenatal midbrain gene expression profiles were found in the organoids in
320 contrast to the conventional 2D-derived mDANs (Jo et al., 2016; Lin et al., 2016; The GTEx
321 Consortium, 2015). For a further validation of the genetic expression profile during the course
322 of hMO development they suggested conducting a single-cell transcriptome analysis, as it has
323 been shown before for cerebral organoids (Camp et al., 2015; Kageyama et al., 2018). In a
324 recent study, single-cell transcriptomic data from hMOs demonstrated that there is an increased
325 expression of neuronal- and stem cell-specific genes in 35 day- compared to 70 day-old hMOs,
326 whereas exclusively the gene-gene correlations between only neuron-specific genes increased
327 considerably at day 70 (Smits, Magni, et al., 2019). This signifies an increasing commitment
328 of cells towards the neuronal cellular fate during the course of organoid development and
329 further supports the finding of a progressive maturation of post-mitotic neurons. The
330 identification of these neuron-specific genes revealed that the genes up-regulated at the earlier
331 time point are particularly relevant in the processes of neurogenesis, neuronal migration and

332 differentiation (for example, early B-cell factor 3 (EBF3), (Garcia-Dominguez, 2003) and L1
333 cell adhesion molecule (L1CAM), (Patzke et al., 2016)), whereas the up-regulated genes at the
334 later time point have been implicated *in vivo* in a modulatory contribution to neurite extension
335 (for example, repulsive guidance molecule B (RGMB), Ma et al. 2011)). This indicates a higher
336 commitment of the cells toward their intended fate and a progressive maturation of post-mitotic
337 neurons within the hMOs. Since the presence of neuronal subtypes, glutamatergic and
338 GABAergic neurons have been reported in hMOs before (Jo et al., 2016; Tieng et al., 2014),
339 the residence of specific neuronal subtypes has been addressed with the high-resolution single-
340 cell analysis (Smits, Magni, et al., 2019). The expression of genes typical for dopaminergic,
341 glutamatergic, GABAergic, and serotonergic neurons have been investigated and their
342 presence further confirmed by immunohistochemistry staining for the respective
343 neurotransmitters. This allows dopaminergic, glutamatergic and GABAergic neurons and a
344 few serotonergic neurons to be robustly detected within hMOs (**Table 2**). So far, detailed
345 analysis of the neuronal subtype's function and their interaction has not been addressed.
346 However, with regards to the fact that mDANs physiologically synapse in the striatum and not
347 in the midbrain *in vivo*, hMOs are potentially limited as an *in vitro* model in this case.
348 Besides the detailed characterisation of the neuronal population, also the analysis of astroglia
349 and oligodendrocyte differentiation is also crucial for accurately modelling the human
350 midbrain. The presence of astrocytes is essential for the formation of synapses and regular
351 neuronal activity (Chung et al., 2015). Astrocytes are defined later than neurons during
352 development, and their immunoreactivity is only detectable in hMOs after 35 days of
353 cultivation (Chaboub & Deneen, 2013; Molofsky et al., 2012; Monzel et al., 2017) (**Table 2**).
354 Fast information transmission between neurons depends on axonal myelination, which is
355 achieved by oligodendrocytes in the CNS. In most stem cell-based differentiation protocols,
356 the differentiation into oligodendrocytes is extremely inefficient (Bunk et al., 2016; Jablonska
357 et al., 2010). However, differentiation into oligodendrocytes and detected myelination of non-
358 dopaminergic neurons has been achieved in hMOs (Monzel et al., 2017). Some neurites in
359 these hMOs were ensheathed by oligodendrocytes and even structures such as the nodes of
360 Ranvier became apparent, which are of critical importance for electrochemical transmission of
361 signals in axons (Faivre-Sarrailh & Devaux, 2013). The feature of unmyelinated or thinly
362 myelinated neurons is particularly well described for SNc mDANs, and explains why only
363 about 30% of β III Tubulin (TUJ1) and myelin basic protein (MBP) overlapping cells have been
364 quantified in the hMO system (Braak & Del Tredici, 2004; Monzel et al., 2017; Orimo et al.,
365 2011; Sulzer & Surmeier, 2013). To allow for future applications and improve the impact of
366 hMOs in pathophysiological and pharmacological studies, the electrical activity and functional
367 maturity of the midbrain-specific 3D cultures have been assessed. The presence or rather the
368 co-localisation of the presynaptic marker SYNAPTOPHYSIN and the postsynaptic marker
369 PSD95 indicated direct contact between a pre- and a postsynapse (Monzel et al., 2017). The
370 exact morphology of hMO-derived synapses until now has not been addressed in detail,
371 although other hPSC-derived brain organoids already reflect many aspects of human synapse
372 formation and function (Wilson & Newell-Litwa, 2018). Whole-cell patch recordings have
373 been performed with sliced hMOs sections (Jo et al., 2016) or with neurons obtained from
374 hMOs (Smits, Reinhardt, et al., 2019). This is an established, but invasive method that allow
375 specific neuronal subtypes to be identified and analysed, however, the continuous development
376 of an individual organoid cannot yet be followed in such detail. Alternatively, non-invasive
377 recordings of extra cellular field potentials can be achieved by a MEA systems and allow
378 insights into physiological properties of *in vitro* cultures and chronological analysis (Luhmann
379 et al., 2016). TIENG and co-workers detected spontaneous and evoked electrophysiological
380 activities in their ENTs (Tieng et al., 2014). Furthermore, in the study of MONZEL et al., spikes
381 occurred closely in time on multiple electrodes, which indicates neuronal network

382 synchronicity, were detected (Monzel et al., 2017). To specifically determine the activity of
383 different neuronal receptors within the organoid, the response to chemical compounds can be
384 examined. The functionality of DA receptors has been tested with the application of quinpirole,
385 a specific D2/D3 receptor agonist. Importantly, mDANs express D2 autoreceptors. This has
386 previously been used in several studies and shown to effectively suppress the firing in hMOs
387 (Jo et al., 2016; Monzel et al., 2017; Smits, Magni, et al., 2019). Together with the reported
388 DA production and release, this strongly suggests that TH-positive neurons, developed in
389 hMOs, exhibit electrophysiological and biochemical qualities of mature mDANs and express
390 functional, quinpirole-responsive, DA receptors. To further isolate and attribute the recorded
391 signals to neuronal subtypes, inhibitory and excitatory communication was additionally
392 blocked with specific drugs following an established experimental design by ILLES and co-
393 workers. Drugs like, Gabazine an antagonist of GABA receptors which result in a disinhibition
394 of target neurons of GABAergic neurons, as well as NMDA-receptor and AMPA/Kainate-
395 receptor antagonists inhibiting glutamatergic excitatory communication were used (Illes et al.,
396 2014). Together with the characteristic hallmarks of synapse formation, consisting of a direct
397 contact between pre- and postsynapses and composing the prerequisite for electrophysiological
398 and neuronal network functionality, these experiments confirmed functional GABAergic and
399 glutamatergic neurons within the hMOs, in addition to the functional DA receptors present.
400 While neurons do not exist in isolation in the CNS but rather form functional networks with
401 other neurons and non-neuronal cells, it is important to expand our research of
402 neurodegenerative diseases using 3D models that are able to recapitulate cell autonomous as
403 well as non-cell autonomous aspects. Utilising 3D cell culture models that comprise a variety
404 of neuronal subtypes could lead to new insights into the selective vulnerability, which is
405 observed in neurodegeneration. Evidence suggests that specific regulation of the excitability
406 of mDANs by other neuronal subtypes in the midbrain might explain their selective
407 vulnerability in PD (Calabresi et al., 2014; Calabresi & Di Filippo, 2015; Korotkova et al.,
408 2004). This underlines the importance and the enormous potential for future disease models
409 that utilise hMOs, as they contain functionally connected heterogeneous neuronal populations.

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412 Disease modelling in midbrain-specific organoids

413 Organoids, specifically modelling the human midbrain, hold great promises for studying the
414 human brain development and for modelling the neurodegenerative disorder PD. PD is the
415 second most common degenerative neurological disorder after Alzheimer's disease and is
416 defined by the selective loss of mDANs in the SNc of the human midbrain. Intriguingly, after
417 decades of research on PD, the molecular mechanisms underlying the initiation and progression
418 of the neurodegenerative disease, commonly occurring as idiopathic form, have not been
419 entirely revealed and remain largely elusive (Roybon et al., 2004). Therefore, the establishment
420 of region-specific brain organoids offers new possibilities to study neuronal diseases that are
421 linked to a specific part of the human brain, such as PD. Neurodegenerative disorders, such as
422 PD, are typically considered to be age-associated diseases (Sepe et al., 2016; Xu et al., 2016).
423 However, there is accumulating evidence that PD has a strong neurodevelopmental component
424 that probably defines the susceptibility to develop the disease (Garcia-Reitboeck et al., 2013;
425 Le Grand et al., 2015; Schwamborn, 2018). This finding supports the importance of human
426 brain development models to investigate the disease's underlying mechanisms. A recent
427 publication provides a proof-of-principle study where either patient-derived or genetically
428 modified hMOs harbouring the disease-associated G2019S mutation in the *LRRK2* gene show
429 PD-relevant phenotypes including reduced number of mDANs (Smits, Reinhardt, et al., 2019).
430 By evaluating the number of links (branching) and nodes (dendrite bifurcation points) of the
431 mDANs developed within the different hMO groups, a significant reduction of the

432 dopaminergic network complexity in the patient-derived TH-positive neurons was identified
433 which is also known to occur in PD patients' brain (Bernheimer et al., 1973; Kordower et al.,
434 2013; Smits, Reinhardt, et al., 2019). Based on another published hMO protocol, KIM and co-
435 workers also derived organoids carrying the *LRRK2*-G2019S mutation (Jo et al., 2016; Kim et
436 al., 2019). In line with the findings of SMITS and co-workers, KIM et al. discovered that the
437 mDANs within the *LRRK2*-G2019S organoids reveal a decreased neurite length in comparison
438 to the mDANs within the control organoids. They further assessed an overall decreased
439 expression level of mDANs-specific markers, such as TH, aromatic l-amino acid
440 decarboxylase (AADC), and DAT in their engineered *LRRK2*-G2019S hMOs (Kim et al.,
441 2019). They achieved a partial recovery of those gene's expression levels after treating the
442 *LRRK2*-G2019S mutant organoids with the *LRRK2* kinase inhibitor GSK2578215A. This
443 *LRRK2* inhibition suggests a positive impact on mDAN cell death and additionally proves that
444 this 3D cell culture system is susceptible to investigating therapeutic strategies against PD
445 (Kim et al., 2019). KIM and co-workers also determined hMOs carrying the *LRRK2*-G2019S
446 mutation exhibit an abnormal localisation of α -synuclein that is phosphorylated at serine 129
447 (pS129). They claim that pS129- α -synuclein is aberrantly expressed in mutated hMOs and they
448 detected a *LRRK2*-G2019S mutation-dependent increase of thioflavin T-positive deposits in
449 TH-positive neurons over time, even though the overall α -synuclein expression did not appear
450 to increase (Kim et al., 2019). Surprisingly, these detected thioflavin T-positive deposits
451 appeared to be extracellular and were not clearly overlapping with the TH signal. Whether
452 these findings are reproducible with another analytical method, still needs to be explored
453 further. Nevertheless, the assessment of PD-associated pathologies, such as the
454 synucleinopathies, in human-specific advanced cell culture models is crucial due to the
455 inherent differences between human and mouse mDAN vulnerability and as existing murine
456 transgenic models have not been efficient in developing an accurate representation of the
457 underlying disease mechanisms (Burbulla et al., 2017; Byers et al., 2012; Hemmer et al., 2018;
458 Koh et al., 2018). In the study of SMITS et al., a significant increase of FOXA2-positive
459 progenitor cells in the patient-specific organoids was demonstrated (Smits, Reinhardt, et al.,
460 2019). Since FOXA2 is required for the generation of mDANs, it is hypothesised that this
461 might be a compensatory response to an impaired specification of mDANs promoted by the
462 mutated *LRRK2* gene (Sasaki et al., 1997), additionally it might be a results of a decreased
463 differentiation potential of the progenitor cells. Similar compensatory mechanisms have been
464 described in PD before and might represent an attempt to counteract neurodevelopmental
465 defects induced by PD-specific mutations (Blesa et al., 2017). While introducing also isogenic
466 control hMOs, it was also confirmed that the introduction of the *LRRK2*-G2019S mutation
467 caused deleterious effects on the complexity of mDANs within a healthy background. On the
468 contrary, *LRRK2*-G2019S gene correction within a PD patient background is not sufficient to
469 rescue this effect. As *LRRK2*-G2019S is not fully penetrant and the probability of developing
470 PD individually varies among the carriers, it is suggested that its pathological function
471 comprises of additional pathways (Goldwurm et al., 2007; Smith et al., 2006). In this context,
472 a permissive genetic background, due to cumulative genetic variants, might mediate and either
473 enhance or diminish the *LRRK2*-induced neurodegeneration (Bolognin et al., 2019).
474 Remarkably, in the analysis of all studied features, the PD patient-derived lines cluster together,
475 independently of the presence or absence of the mutation (Smits, Reinhardt, et al., 2019). This
476 indicates that the genetic background of the PD patients, regardless of gene editing, accounts
477 for most of the differences between the studied cell lines and seems to be a major discriminating
478 factor. Thus, not the *LRRK2*-G2019S mutation but rather the genetic background of the patients
479 constitutes the strongest contribution to the phenotypes and supports the hypothesis that the
480 genetic background of PD patients can influence the degeneration of mDANs (Bolognin et al.,
481 2019). These findings show that 3D hMOs and the corresponding mDANs represent powerful

482 new tools for *in vitro* disease modelling. Importantly, in PD patients in the midbrain mainly
483 the SN is affected while a neighbouring region, the ventral tegmental area, which also contains
484 DNAs is largely unaffected. Current hMO models so far have not addressed this different
485 vulnerability sufficiently. However, this is a limitation that certainly will be investigated in the
486 future.

487 By deriving further hMOs that carry defects in genes that are known to cause PD we could
488 broaden the understanding of disease-related abnormalities and the context in which they arise
489 (Benson & Huntley, 2019). The patient-specific nature of these models also opens promising
490 avenues for future personalised medicine approaches (Bu et al., 2016; Hillje & Schwamborn,
491 2016; Smits, Reinhardt, et al., 2019).

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494 Perspectives

495 The generation and characterisation of midbrain-specific organoid protocols and thereby the
496 provision of sophisticated *in vitro* models to study both neurodevelopmental processes and
497 neurodegenerative diseases of the human midbrain have led to novel findings in the field of
498 advanced 3D *in vitro* cell culture systems. Furthermore, the reported PD-relevant phenotypes
499 in PD patient-derived hMOs have proved that these methods are a powerful tool for human-
500 specific *in vitro* disease modelling of neurological disorders.

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502 For such applications, an organoid model should be reproducible and stable for extended
503 cultivation and manipulation. Even though the organoid technology is a powerful asset in the
504 field of brain research, the hMO models show intrinsic disadvantages and limitations (Berger
505 et al., 2018; Y. Wang et al., 2018). The lack of a natural body axis or supportive tissue prevents
506 an organoid's organisation that is identical to the pattern of the *in vivo* human brain (Kelava &
507 Lancaster, 2016a; Lancaster et al., 2013; Y. Wang et al., 2018). The identification of a specific
508 brain regions as well as the reproducibility might be imperfect, nevertheless it is unlikely to
509 create the exact culture conditions found in the human brain *in utero* (Trujillo & Muotri, 2018).
510 A major limitation of the hMOs presented here, as well as other published brain organoid
511 systems, is the absence of vasculature, which restricts the supply of oxygen and nutrition,
512 especially in the inner part of the organoids (Kelava & Lancaster, 2016a; Y. Wang et al., 2018).
513 It also might limit the growth of organoids beyond a certain size and increase the appearance
514 of dead cells in the centre of the organoids (Berger et al., 2018; Giandomenico & Lancaster,
515 2017; Monzel et al., 2017). The cell number, and consequently the cell density within the
516 organoid seem to play an important role and might be a target for improvement. The choice of
517 the surrogate matrix, the starting point and duration of the differentiation are further aspects
518 that can influence the fidelity of the 3D culture. Recently, brain organoids were successfully
519 transplanted into a mouse brain and murine blood vessels could be detected in the grafts
520 (Mansour et al. 2018). Even though the transplanted organoid mimicked more precisely the *in*
521 *vivo* brain anatomy, this method bears the disadvantage of xenocontamination (Trujillo &
522 Muotri, 2018; Y. Wang et al., 2018). The absence of microglia, the resident innate immune
523 cells of the CNS, is another major disadvantage for disease modelling, as they are actively
524 involved in the development and maturation of neurons. In the case of cerebral organoids, an
525 adaptation for a microglia-containing organoid model has been recently published (Ormel et
526 al., 2018). Since some hMOs are derived from the neuroectoderm and microglia originate
527 developmentally from the mesoderm, there is only the possibility to integrate externally-
528 derived microglia or their precursors to the developing hMO (Abud et al., 2017; Haenseler et
529 al., 2017; Muffat et al., 2016; Trujillo & Muotri, 2018; Y. Wang et al., 2018).

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531 Future development of cell culture technologies will further improve brain-specific organoid
532 models and will support both the investigation of more complicated interactions in the human
533 brain and the modelling of a larger range of neurological disorders (Di Lullo & Kriegstein,
534 2017; Y. Wang et al., 2018). Despite the current limitations, we can conclude that the hMO
535 system presented here, along with other models, may be a first step toward a more human
536 patient-specific, probably even personalised, era of advanced disease modelling and therapy
537 development.
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540 **Table 1: Comparison of hMO derivation protocols:** Overview of applied compounds to derive
 541 midbrain-specific neurol ectoderm by neural induction. hMO protocols from TIENG (2014) and QIAN
 542 (2016) are based on 2D experiments by Kriks et al. (2011); hMO protocols from JO (2016) and KIM
 543 (2019) are based on 2D experiments by Chambers et al. (2009); hMO protocols from MONZEL (2017)
 544 and SMITS (2019) are based on 2D experiments by Reinhardt et al. (2013).
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	TIENG (2014)	QIAN (2016)	JO (2016)	MONZEL (2017)	KIM (2019)	SMITS (2019)
Dual-SMAD inhibition						
SB	10 μ M	10 μ M	10 μ M	10 μ M	10 μ M	10 μ M
Noggin	—	—	200 ng/ml	—	200 ng/ml	—
LDN	100 nM	100 nM	—	—	—	150 nM
DM	—	—	—	1 μ M	—	—
WNT activation						
CHIR	3 μ M	3 μ M	3 μ M	3 μ M	3 μ M	3 μ M
SHH activation						
SHH	100 ng/ml	100 ng/ml	100 ng/ml	—	100 ng/ml	—
PMA	2 μ M	2 μ M	—	0.5 μ M	—	—
SAG	—	—	—	—	—	0.5 μ M
FGF8 activation						
FGF8	100 ng/ml	100 ng/ml	100 ng/ml	—	100 ng/ml	—

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570 **Table 2: Comparison of characteristics of different hMO derivation protocols:** Overview of
571 hMO-specific features reported in Tieng et al. 2014, Qian et al. 2016, Jo et al. 2016, Monzel et al.
572 2017, Kim et al. 2019, and Smits, Reinhardt et al. 2019
573 (*different methods applied to determine and calculate TH content, °different methods applied to
574 determine DA content).
575

	TIENG (2014)	QIAN (2016)	JO (2016)	MONZEL (2017)	KIM (2019)	SMITS (2019)
mDANs						
TH•	>60 % (d21)	55 % (d65)	22 % (d60)	64 % (d61)	n/a	54 % (d70)
DAT	n/a	yes	yes	yes	yes	yes
DA°	yes	yes	yes	yes	yes	yes
NM	n/a	n/a	yes	yes	n/a	yes
glial cells						
oligodendrocytes	yes	n/a	yes	yes	n/a	n/a
astrocytes	yes	yes	yes	yes	n/a	n/a
neuronal subtypes						
GABAergic	no	n/a	yes	n/a	n/a	yes
glutamatergic	yes	n/a	n/a	n/a	n/a	yes
serotonergic	no	n/a	n/a	n/a	n/a	yes

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601 **Table 3: Comparison of NSC derived hMO models:** Overview of selected
602 features of hMOs approaches published in Monzel et al. 2017 and Smits, Reinhardt et al. 2019.
603 Neuronal subtypes refers to the analysis whether neurons other than dopaminergic neuros are
604 determined. As starting cell population, small molecule neural precursor cells (smNPCs) are used in
605 Monzel et al., 2017, while Smits et al., 2019 starts with midbrain floor plate neural progenitor cells
606 (mfNPCs).
607 (*different methods applied to determine and calculate TH content).
608

	MONZEL (2017)	SMITS (2019)
culture conditions		
used cell type	smNPCs	mfNPCs
number of cells	9,000	3,000
embedding	yes	no
agitation	yes	no
mDANs		
TH+ cells*	~64 % (d61)	~54 % (d70)
regionalisation	yes	no
A9/A10 specificity	yes	yes
DAT	yes (d61)	yes (d70)
D2/D3 receptor responsive	yes	yes
DA release	no	yes
NM	yes (>d149)	yes (>d100)
other cell types		
oligodendrocytes	yes (d61)	n/a
astrocytes	yes (d61)	n/a
neuronal subtypes	n/a	yes

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