

Title: Distal axotomy enhances retrograde presynaptic excitability onto injured pyramidal neurons via trans-synaptic signaling

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20 **Abstract**

21 Injury of descending motor tracts remodels cortical circuitry and leads to enhanced
 22 neuronal excitability, thus influencing recovery following injury. The neuron-specific
 23 contributions remain unclear due to the complex cellular composition and connectivity of
 24 the CNS. We developed a microfluidics-based *in vitro* model system to examine intrinsic
 25 synaptic remodeling following axon damage. We found that distal axotomy of cultured
 26 rat pyramidal neurons caused dendritic spine loss at synapses onto the injured neurons
 27 followed by a persistent retrograde enhancement in presynaptic excitability over days.
 28 These *in vitro* results mirrored hyper-activity of directly injured corticospinal neurons in
 29 hindlimb motor cortex layer Vb following spinal cord contusion. *In vitro* axotomy-
 30 induced hyper-excitability coincided with elimination of inhibitory presynaptic terminals,
 31 including those formed onto dendritic spines. We identified netrin-1 as downregulated
 32 following axotomy and exogenous netrin-1 applied 2 days after injury normalized spine
 33 density, presynaptic excitability, and the fraction of inhibitory inputs onto injured
 34 neurons. These findings demonstrate a novel model system for studying the response of
 35 pyramidal circuitry to axotomy and provide new insights of neuron-specific mechanisms
 36 that contribute to synaptic remodeling.

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Introduction

Acquired brain injuries, such as occur in stroke and traumatic brain injury, induce significant synaptic reorganization, even in uninjured cortical regions remote from the site of damage¹⁻³. This enhanced neural plasticity supports formation of new connections and expansion of cortical territories, well-described in humans using neuroimaging and non-invasive stimulation techniques^{1, 2, 4, 5}. However, the cellular mechanisms of this injury-induced plasticity remain largely unknown.

In healthy brains, long projection neurons with somatodendritic domains housed in cerebral cortex extend axons into numerous distant areas of the CNS, including the spinal cord and the apposing cortical hemisphere. When these remote areas are injured, long projection axons are damaged and injury signals propagate retrogradely to somatodendritic domains. Retrograde injury signal propagation leads to somatic responses such as chromatolysis and new transcription^{6, 7}. For example, after damage to corticospinal axons resulting from spinal cord injury, dendritic spines in motor cortex undergo time-dependent changes in morphology including decreased spine density and alterations in spine length and diameter⁸. Loss of local GABAergic inhibition also occurs at somatodendritic regions following injury, which is thought to unmask preexisting excitatory connections and result in enhanced excitability^{2, 9, 10}. These findings suggest that a cascade of events occurs following distal axonal injury involving retrograde axon-to-soma signaling and then trans-synaptic signaling from the injured neuron to uninjured presynaptic neurons causing synaptic changes and enhanced excitability.

Due to the heterogeneity and complexity of the CNS, intrinsic neuronal responses to distal axon injury and neuron-specific contributions to synaptic remodeling remain

unclear. Reduced preparations are valuable for examining these neuron-specific responses and provide a more experimentally tractable model system to identify and screen drugs to improve neuronal function following injury. Because brain injury and disease preferentially affect long projection neurons^{11,12}, we sought to determine the progression of events that occur intrinsically in these neurons following distal axotomy leading to trans-synaptic changes.

Results

In vitro model to study distal axon injury to pyramidal neurons

To investigate how distal axon injury remodels synapses contacting injured neurons, we used a microfluidic approach to compartmentalize cultured neurons. Microfluidic chambers containing microgroove-embedded barriers approximately 900 μm in length were used to compartmentalize axons independently from dendrites and somata of rat central neurons as demonstrated previously (**Figure supplement 1a**)¹³⁻¹⁵. Using this approach we subjected neurons to distal axotomy ~ 1 mm away from their physically undisturbed dendrites and somata as described previously^{13,14}. We used hippocampal neurons harvested from embryonic rats due to the ability to generate a consistent, enriched population of pyramidal neurons (85-90% pyramidal) which exhibit morphology characteristic of maturing pyramidal neurons *in vivo*¹⁶; the remaining hippocampal neurons are mostly inhibitory GABAergic interneurons¹⁷. To identify neurons with axons projecting into the axonal compartment, we retrogradely labeled neurons by applying a G-deleted rabies virus expressing fluorescent proteins (incompetent for trans-synaptic transfer) to the axonal compartment and characterized the

morphology of the labeled neurons. We found that 94% (42 of 45) of virally-labeled neurons were pyramidal neurons and the remaining were unclassifiable (**Figure 1a**). When these neurons were cultured within the microfluidic chamber and axotomized within the axonal compartment (**Figure 1b**), the axotomized cultures showed no loss in viability post-axotomy (**Figure supplement 1**), similar to *in vivo* findings¹⁸, and injured axons regrew^{13, 14}. Supporting the use of this *in vitro* approach, we previously found that axotomy performed within the microfluidic chambers induced rapid expression of the immediate early gene *c-fos*¹³, as reported *in vivo*¹⁹. Neurons labeled with retrograde tracer, Alexa 568-conjugated cholera toxin, also showed a significant decrease in Nissl staining in the somata reflective of chromatolysis at 24 h post-axotomy²⁰ (**Figure supplement 1**). Together, this *in vitro* model recapitulated key features of axotomy *in vivo*, and allowed us to examine the response of injured pyramidal neurons far from the site of injury.

Spine density decreases after distal axon injury

Decreased spine density is seen *in vivo* in models of traumatic brain injury and spinal cord injury^{21, 22}. To determine whether similar structural changes occur in cultured pyramidal neurons following distal axotomy, we quantified spine density within the somatodendritic compartment of axotomized neurons that were retrogradely labeled using rabies mCherry virus. Spine density significantly declined 24 h and 48 h post-axotomy compared to before axotomy (**Figure 1c,d** and **Figure supplement 2**). In contrast, uninjured control neurons show increased spine density as occurs during normal maturation (**Figure 1c,d**).

We next analyzed specific spine types that were lost. We found a significant decrease in the density of thin spines at 24 h post-axotomy compared to pre-axotomy (**Figure 2a**). The density of stubby and mushroom spines remained similar before and 24 h after axotomy, unlike in the uninjured control neurons where spine density of all spine types increased. At 48 h post-axotomy the density of both thin and mushroom spines was significantly reduced (**Figure 2a**). The reduction in spine density following axotomy suggests that either dendritic spines were being eliminated or, conversely, that there was a reduction in new spine formation following axotomy. Further analysis of our before and after axotomy images revealed that axotomy caused both a significant increase in the percentage of spines eliminated *and* a significant reduction in the percentage of new spines formed 24 h post-axotomy (**Figure 2b-d**). Thus, axotomy affected both elimination and formation of spines to result in lower dendritic spine density.

A persistent enhancement in synaptic vesicle release rate follows distal injury

To further evaluate how synapses are modified following distal axon injury, we next investigated whether presynaptic release properties were altered at synapses onto injured neurons. To address this question, we retrogradely infected neurons using a modified eGFP rabies virus to label injured neurons and then used FM dyes to optically measure synaptic vesicle release onto these directly-injured neurons (**Figure 3a**). The use of FM dyes provided us with a non-selective, unbiased method to label a majority of presynaptic terminals within the somatodendritic compartment²³. FM puncta highly colocalized with synapsin1 immunolabeling (93%), which is present at both inhibitory and excitatory terminals, validating our FM dye loading strategy (**Figure supplement 3**).

We examined the synaptic vesicle release rate of FM puncta that colocalized with axotomized eGFP expressing neurons. At 24 h post-axotomy, there was no change in synaptic vesicle release rate compared to eGFP expressing uninjured control samples (**Figure 3b,c**). In contrast, synaptic vesicle release rate was significantly enhanced 48 h after axotomy (**Figure 3c**). Further, the FM decay time constant, τ , which has been inversely correlated with release probability²⁴ was significantly reduced at 48 h post-axotomy (control: $138.3 \text{ s} \pm 8.761$ versus axotomy: $88.62 \text{ s} \pm 5.132$; $p < 0.0001$). These results were similar to those obtained by examining the entire image field of FM puncta closest to the barrier region within the somatodendritic compartment where a large percentage of axotomized neurons reside (**Figure supplement 4**). The difference in presynaptic release rate persisted, though modestly, at 4 d post-axotomy in these cultured neurons (control: $88.3 \text{ s} \pm 1.43$ versus axotomy: $82.3 \text{ s} \pm 1.552$; $p = 0.0046$; **Figure supplement 4**). Together, these data suggest a delayed and persistent increase in synaptic vesicle release rate that occurred following dendritic spine loss.

Next, we performed two control experiments to determine (1) whether cortical cultures, which have more neuron variability than hippocampal cultures, would behave similarly to hippocampal cultures used in our experimental model, and (2) whether axotomy of axons forming synapses onto postsynaptic targets would yield similar effects on retrograde presynaptic vesicle release as axotomy of untargeted axons. First, we performed the FM unloading experiments with cortical neurons harvested from embryonic rats and found that these cultures showed similar changes in presynaptic release 48 h post-axotomy (**Figure supplement 4**). To address the second question, we added a small number of target neurons to the axonal compartment during cell plating.

We previously showed extensive synapse formation when two neuron populations are plated into opposing compartments¹⁵. Our data show that axotomy to this targeted population of neurons resulted in similar changes in presynaptic release rate as axotomy of untargeted axons (**Figure supplement 4**).

We next wondered whether the fraction of responsive to unresponsive presynaptic terminals might be altered following axotomy to allow enhanced excitability even though dendritic spine density is lower. We measured the proportion of FM puncta that unloaded (responsive) or did not unload (unresponsive) in response to field stimulation using extracellular electrodes²³ (**Figure 3d**). At 24 h post-axotomy when spine density was decreased, we observed no change in the fraction of responsive and unresponsive FM puncta compared to uninjured controls (**Figure 3d**). However at 48 h post-axotomy, a significantly larger proportion of puncta were responsive compared to uninjured control chambers (**Figure 3d**). Further, at 48 h post-axotomy we also found an overall decrease in the number of FM puncta, yet the number of responsive FM puncta remained similar to the age-matched control (**Figure 3e**). Together, our data suggest that distal axon injury leads to an overall decrease in quantity of presynaptic terminals, but that this smaller pool of presynaptic terminals is more responsive to stimulation.

Enhanced glutamate release occurs at synapses onto injured neurons

Our results support that distal axotomy triggers a retrograde and trans-synaptic cascade of events leading to enhanced neurotransmitter release. To confirm this, we performed electrophysiological recordings of AMPAR-mediated miniature excitatory postsynaptic currents (mEPSCs) from axotomized neurons 48 h post-axotomy and their

age-matched uninjured controls. Biocytin was used to fill neurons following each recording to determine whether neurons extended axons into the axonal compartment and were axotomized. Axotomized neurons had a significant increase in mEPSC frequency, supporting an increased rate of presynaptic glutamate release (**Figure 3f,g**). Membrane properties were equivalent between axotomized and uninjured control neurons, demonstrating that the health of these axotomized neurons was not substantially compromised (**Table supplement 1**). We observed a trend towards an increase in mEPSC amplitude following axotomy, however this effect was not significant (**Figure 3g**).

We next wondered if the increased spontaneous release rate of glutamate was specific to directly injured neurons or more globally affected neighboring, uninjured neurons. To address this, we quantified mEPSC frequency between uncut and cut neurons within the same axotomized chamber. In recordings from directly injured neurons, axotomy specifically increased mEPSC frequency. However, neighboring uninjured neurons that did not extend axons into the axonal compartment, did not have an increased mEPSC frequency (**Figure 3h**). To further examine the effects of direct injury to axotomized neurons, we quantified FM release rate at nearby uninjured neurons that were not infected with the retrograde eGFP rabies virus. We found that the release rate was significantly decreased at these locations compared with synapses on directly axotomized neurons and not significantly different than at control uninjured neurons labeled with eGFP rabies virus (**Figure 3i**). These observations confirmed that axotomy altered glutamatergic synaptic input onto injured neurons. Further, directly injured neurons transynaptically and locally influenced presynaptic glutamate release without affecting

nearby synapses at uninjured neurons.

Spinal cord injury (SCI) induces persistent and enhanced firing rates in layer Vb

To evaluate the *in vivo* relevance of our findings, we sought to determine whether distal injury of long projection neurons *in vivo* would preferentially induce enhanced excitability in these injured neurons. To do this, we used a rat SCI model described previously²⁵ in which animals were subjected to a spinal cord contusion injury at thoracic level T9-10, and recording electrodes were implanted into the neurophysiologically-identified hindlimb motor cortex in ketamine-anesthetized animals. Electrode sites on single-shank microelectrode arrays (Neuronexus, Ann Arbor, MI) extended through cortical layers V and VI, allowing simultaneous recording throughout these cortical layers. Effective injury to the corticospinal neurons innervating hindlimb motor neuron pools in the spinal cord was confirmed by stimulating electrode sites and confirming loss of evoked hindlimb movement. At each cortical location, 5 minutes of neural data was collected for offline analysis. At the end of the procedure, neural spikes were discriminated using principle component analysis. We examined firing rates²⁶ within layers Va, Vb, and VI between 4 weeks and 18 weeks post-SCI and compared the data to sham control animals. We found that the firing rate within layer Vb was significantly increased after SCI compared to sham controls (**Figure 4**). Layer Vb contains the highest density of corticospinal somata, with estimates of nearly 80% of large pyramidal cells²⁷. Also, after spinal cord injury, chromatolytic changes occur preferentially in layer Vb²⁸. In layers Va and VI, which have few (layer Va) or no (layer VI) corticospinal neurons, we found that firing rates were not statistically different

between SCI animals and sham controls. Together, these data confirm a persistent increase in spontaneous firing rates in remotely injured corticospinal neurons, and support the relevance of our *in vitro* model system.

Axotomy selectively eliminates GABAergic terminals onto spines of injured neurons

Loss of inhibition following distal injury contributes to enhance excitability *in vivo*, thus we wanted to test whether axotomy in our culture system results in a similar loss of inhibitory terminals. We performed retrospective immunostaining to determine the fraction of vGLUT1 or GAD67-positive FM puncta at 48 h post-axotomy (**Figure 5a,b**). We found that axotomy did not alter the fraction of glutamatergic terminals, but significantly diminished the fraction of GAD67-positive puncta within the somatodendritic compartment. Further, we examined the fraction of vGLUT1 or VGAT puncta colocalized with axotomized neurons labeled with eGFP rabies virus 48 h post-axotomy (**Figure 5c**). These results confirmed the preferential absence of inhibitory terminals following axotomy while the fraction of vGLUT1 puncta remained equivalent to uninjured control neurons.

To determine whether inhibitory synapses were functionally altered following axotomy, we recorded miniature inhibitory postsynaptic currents (mIPSCs) from axotomized and uninjured chambers 48h post-axotomy (**Figure 5d-f**). We found that mIPSCs were more frequent in axotomized cultures compared with uninjured neurons, suggesting that while there are fewer inhibitory terminals, the remaining terminals have an increased rate of spontaneous GABA release. We next asked whether this change in inhibitory synapse function was restricted to directly injured neurons. Within the

axotomized cultures, we compared both cut and uncut neurons and found that the mIPSC frequency was increased in both groups, but was not different between the directly axotomized neurons and their uncut neighbors. This suggests that the alteration of inhibitory synaptic transmission following axotomy affects both directly injured and neighboring, uninjured neurons.

Although the majority of GABAergic synapses are found on dendritic shafts or cell bodies, a minor population is also found on dendritic spines^{29,30} (**Figure supplement 6**). Inhibitory synapses formed on dendritic spines allow for compartmentalization of dendritic calcium levels involved in regulation of neuronal activity^{31,32}. To investigate whether dendritic spines receiving inhibitory inputs (i.e., inhibited spines) are lost following axotomy, we quantified the number of inhibitory and excitatory presynaptic terminals onto spines of cultured pyramidal neurons subjected to distal axotomy compared to uninjured controls using retrospective immunostaining for inhibitory (vGAT) and excitatory (vGLUT1) synapse markers. We found a significant decrease in the fraction of vGAT-positive spines at 48h post-axotomy compared to uninjured control (**Figure 5g-i**) with no significant influence on glutamatergic spines. Together, our data suggest that axotomy caused a preferential loss of inhibitory terminals onto axotomized neurons, including inhibitory terminals formed onto dendritic spines, and that increased spontaneous GABAergic transmission might compensate to some degree for these lost terminals.

Local activity, retrograde signaling and differential gene expression regulate axotomy induced synaptic changes

Efficient axon regeneration requires signaling from the site of injury to the nucleus in multiple model systems ⁶, yet the signaling events required for synaptic remodeling following distal axotomy remain unclear. Breach of the axonal membrane following axon injury causes an influx of calcium and sodium ions into the intra-axonal space, potentially influencing signaling to the nucleus and gene expression. To determine whether local influx of sodium and calcium ions at the time of injury is required for axotomy-induced spine loss, we performed axotomy within the axonal compartment in which axons were treated with a local activity blockade during axotomy. This local activity blockade solution (ABS) included low-Ca²⁺, high-Mg²⁺, and TTX (0.5 mM CaCl₂, 10 mM MgCl₂, 1 μM TTX) to prevent influx of sodium and reduce calcium influx. This local activity blockade was applied solely to the axonal compartment for 1 h during axotomy. We labeled neurons extending axons into the axonal compartment using a retrograde eGFP rabies virus and quantified spine density before and 24 h following axotomy and compared these measurements to cultures with vehicle applied to axons during axotomy (**Figure 6a,b**). Strikingly, we found that local activity blockade at the injury site prevented axotomy-induced spine loss. These data suggest that local activity instructs retrograde signaling and spine loss.

To determine whether injury-induced transcription is required for these trans-synaptic changes, we treated the somatodendritic compartment with the reversible transcriptional blocker DRB 15 min prior to axon injury and removed the drug 45 minutes later. We found that blocking transcription during this brief time was sufficient

to prevent axotomy-induced spine loss 24 h post-axotomy compared with similarly treated uninjured control chambers (**Figure 6c**). Further, DRB treatment at the time of injury prevented significant changes in the proportion of responsive FM puncta (**Figure 6d**) and in synaptic vesicle release rate 48 h post-axotomy (**Figure 6e**). However, action potential blockade with TTX in the somatodendritic compartment for ~1 h at the time of injury did not affect injury-induced changes in presynaptic release or the proportion of responsive puncta (**Figure 6g,h**). Further, application of HBS or DMSO as respective vehicle controls to TTX or DRB treatments did not alter injury-induced increase in presynaptic release. We conclude that both local activity at the site of injury and a transcriptional response were critical mediators of the delayed trans-synaptic changes in presynaptic release properties following distal axon injury.

Differential gene expression at 24 h post-axotomy

Our data show that a transcriptional response was required immediately after axotomy to induce retrograde changes in synaptic vesicle release onto injured neurons. To identify genes that might mediate this process within a longer therapeutically-relevant time window, we performed a gene expression study to identify differentially expressed transcripts within the somatodendritic compartment at 24 h post-axotomy compared to uninjured controls. We found 615 transcripts that were significantly changed following injury (one-way between-subject ANOVA, $p < 0.05$) (**Figure 7a; Table supplement 1**). Confirming that the transcription response *in vitro* recapitulated *in vivo* findings, we found Jun upregulated 1.41 fold in our microfluidic cultures 24 h post-axotomy¹⁸.

Trans-synaptic mediators down-regulated post-axotomy

Next we sought to identify potential trans-synaptic mediators that may influence synaptic vesicle release at synapses onto injured neurons. We focused on differentially expressed transcripts that are known to localize to cell-cell contacts, such as synapses (**Figure 7b**). Within this category, only 6 transcripts were significantly changed. These transcripts included podoplanin (*Pdpn*), kinesin family member 26B (*Kif26b*), cadherin 24 - type2 (*Cdh24*), myosin X (*Myo10*), netrin-1 (*Ntn1*) and intercellular adhesion molecule2 (*Icam2*). We found that *Ntn1* was significantly downregulated in our microarray results, consistent with published findings that netrin family proteins are downregulated following SCI in adult rats³³. Netrin-1 is a secreted axon guidance and synaptogenic cue that is enriched at mature dendritic spines³⁴ and is known to induce synaptic DCC clustering and enhance synapse maturation³⁵.

Exogenous netrin-1 normalizes injury-induced spine density and presynaptic release

The downregulation of netrin-1 following injury led us to ask whether adding exogenous netrin-1 might rescue, to some degree, the axotomy-induced synaptic changes. To test this we applied exogenous netrin-1 to the somatodendritic compartment 40 h after axotomy and evaluated the resulting changes in spine density, synaptic vesicle release and responsiveness at 48 h post-axotomy. We performed live imaging of somatodendritic domains before and after axotomy to measure spine density changes and found that netrin-1 treatment for 8 h was sufficient to normalize spine density to pre-axotomy levels (**Figure 8a,b**). We then used FM dyes to compare presynaptic release properties between axotomized and uninjured controls. Exogenous netrin-1 increased the total number of FM

puncta at 48 h post-injury to levels found in uninjured controls and reduced the percentage of responsive puncta to levels found in uninjured controls (**Figure 8c,d**). We next tested whether netrin-1 might rescue axotomy-induced disinhibition. Netrin-1 treatment following axotomy normalized the density of inhibitory terminals (vGAT labeled) at axotomized neuron without significantly altering the density of glutamatergic terminals (vGLUT1 labeled) (**Figure 8e,f**).

Because DCC levels parallel netrin-1 expression changes^{36,37}, we next confirmed that DCC levels were downregulated at synapses formed onto the somatodendritic domain of axotomized neurons (**Figure 8g,h**). Local synaptic DCC immunofluorescence at spines of axotomized neurons were decreased at 48 h post-injury. Further, application of exogenous netrin-1 normalized synaptic DCC levels to that similar to uninjured controls (**Figure 8g,h**).

If downregulation of netrin-1 signaling regulates axotomy-induced synaptic remodeling, we would expect that blocking netrin-1 signaling in uninjured neurons would be sufficient to cause both reductions in spine density and the density of inhibitory terminals. Spine density in uninjured cultures treated with a DCC function blocking antibody for 24 h was significantly reduced after treatment while control chambers treated with an IgG control were not. Further, we found that blocking DCC was sufficient to cause a reduction in the density of vGAT puncta per eGFP-filled neuron area. Together, our data suggest that netrin-1 signaling may play a critical role in regulating synaptic remodeling following axonal damage, including in modulating inhibition following injury.

Discussion

We developed a model system to study the cellular mechanisms of synaptic remodeling following axon injury in cultured long projection pyramidal neurons. Importantly, this *in vitro* model system recapitulates hallmarks of neurons subjected to axonal injury *in vivo*, including chromatolysis^{6,20}, retrograde spine loss^{4,21,22}, retrograde hyper-excitability¹⁻³, and disinhibition^{2,9,10}. In addition, axotomy-induced transcriptional changes in this *in vitro* model are consistent with *in vivo* findings^{7,19}. This *in vitro* model system provides a unique tool to examine axotomy-induced retrograde signaling intrinsic to neurons and the resulting effects to interneuronal communication.

While axon regeneration following injury is extensively studied, much less is known about how proximal neurons within the mammalian brain are affected following axonal damage³⁸ and more specifically how synapses onto injured neurons are remodeled. Our results suggest that axotomy-induced retrograde synaptic remodeling requires local signaling mediated by sodium and/or calcium influx at the site of injury to activate a rapid transcriptional response. Both post-synaptic dendritic spine loss and trans-synaptic changes in presynaptic inputs required transcription in axotomized pyramidal neurons. Our data is consistent with axonal injury signaling in other model systems. Localized reversal of a sodium calcium exchanger (NCX) at the site of injury may amplify calcium influx and contribute to long range signaling. Supporting this, blocking sodium channels with TTX and the reversal of NCX, reduced axonal damage of mouse peripheral sensory neurons³⁹. There is evidence that a calcium wave may locally can propagate to the nucleus to induce a transcriptional response in peripheral neurons⁴⁰.

Alternatively, the localized influx of calcium may also be a priming effect for retrograde transport of signaling complexes required to initiate transcription ⁶.

The sequential post- and then pre- synaptic changes following axotomy suggest a trans-synaptic mechanism. Axotomy-induced spine loss was followed by a preferential loss of inhibitory inputs and an increase in spontaneous release of both excitatory and inhibitory inputs. These post- and then pre- synaptic changes are consistent with the involvement of synaptic homeostasis where retrograde molecules are released post-synaptically to influence presynaptic release. Further support for the involvement of trans-synaptic mechanisms comes from our observation of an increase in spontaneous neurotransmitter release localized at excitatory synapses onto axotomized neurons, but not at neighboring excitatory synapses onto uninjured neurons. The significantly enhanced firing rate following SCI in cortical layer Vb, but not layers Va and VI, provides additional support for this specificity.

Dendritic release of secreted proteins (e.g., BDNF, NT-3 and NT-4) and diffusible molecules, such as nitric oxide, can trans-synaptically regulate neurotransmitter release ⁴¹⁻⁴³. Injury of motoneurons from myocytes caused synaptic remodeling of inputs to motoneurons involving nitric oxide synthesis ⁴⁴. While these previously reported trans-synaptic signaling pathways were not detectably altered in our microarray analysis, we did identify the secreted protein, netrin-1, as significantly downregulated in our axotomized cultures 24 h post- axotomy. Netrin-1 is secreted locally from target cells and signals DCC receptors that are present along axons ³⁵ to influence presynaptic release and maturation ^{45, 46}. While netrin-1 signaling is historically thought of in a developmental context, there is increasing evidence of the importance of netrin-1 signaling in the adult

CNS. Consistent with our *in vitro* findings, netrin family members are downregulated *in vivo* following spinal cord injury in adult rats^{33,47} and DCC remains persistently low after 7 months post-injury in adult rats³³. Netrin-1 has also recently been tested as a potential therapeutic agent following injury and has been shown to improve recovery outcomes⁴⁸⁻⁵⁰.

Our data show that adding exogenous netrin-1 one and a half days after axotomy dramatically increased spine density and the density of inhibitory terminals to levels found in uninjured controls. The restoration of inhibitory terminals in axotomized samples treated with netrin-1 is a novel and exciting finding. Evidence from *C.elegans* confirms a link between netrin-1 signaling and stabilization of GABA_A receptors⁵¹. Yet, it remains unclear how netrin-1 signaling modulates inhibitory input and will be an important topic for future studies. Interestingly, specific loss of inhibitory, and not excitatory, terminals suggests that orphaned excitatory inputs may remain available for some period of time to form new connections. Large headed dendritic spines could also receive multiple excitatory inputs, stabilizing them, and allowing them to find new partners over time.

Axonal damage within the CNS occurs in numerous disorders and diseases, but little is known about the overall impact on cortical circuit function. Importantly, our cell-based findings have broader applicability beyond spinal cord injury to numerous conditions where axonal damage is prevalent, such as other forms of traumatic brain injury, Alzheimer's disease, and multiple sclerosis. Further, remodeling is enhanced in embryonic or neonatal neurons, making the use of an *in vitro* approach using these

neurons, together with *in vivo* models, advantageous for identifying pathways instrumental for neurological recovery⁵².

Materials and Methods

Hippocampal cultures. Animal procedures were carried out in accordance with the University of North Carolina at Chapel hill Institutional Animal Care and Use Committee (IACUC). Dissociated hippocampal cultures were prepared from Sprague Dawley rat embryos (E18-E19) as previously described^{13, 23} with the following modifications. Hippocampal tissue was dissected in dissociation media (DM) containing 82 mM Na₂SO₄, 30 mM K₂SO₄, 5.8 mM MgCl₂, 0.25 mM CaCl₂, 1 mM HEPES, 20 mM Glucose and 0.001% Phenol red. For enzymatic digestion, equal volumes of TrypLE Express (Invitrogen) and DM were added to the tissue and incubated at 37°C for 8 min. Tissue was then rinsed and gently triturated in neuronal culture media consisting of Neurobasal media (Invitrogen) supplemented with 1x B27 (Invitrogen), 1x Antibiotic-antimycotic (Invitrogen), 1x Glutamax (Invitrogen). Dissociated cells were resuspended in neuronal culture media to yield 12x10⁶ cells per ml.

Microfluidic chambers. Poly(dimethylsiloxane) (PDMS) microfluidic chambers were replica molded from microfabricated master molds as described previously¹³. All experiments used chambers with 900 µm long microgrooves to separate the somatodendritic and axonal compartments as described previously^{13, 14, 23}. Microfluidic chambers were placed onto glass coverslips coated with 500-550 kDa Poly-D-Lysine (BD Biosciences). Approximately ~90,000 cells were plated into the somatodendritic

compartment and axons extended into the adjacent axonal compartment after 5-7 days of culture. Axotomy was performed between 11 and 15 days in vitro (DIV) according to previously published procedures^{13, 14}. Briefly, media was first removed from the axonal compartment and stored for future use. The axonal compartment was then aspirated until completely devoid of fluid. The stored culture media was then returned immediately to the axonal compartment for the duration of the culture time. Microfluidic devices with equivalent viable cell populations were randomly chosen for either axotomy or uninjured control groups.

Retrograde labeling. Retrograde labeling was performed using either modified cholera toxin or rabies virus. Cholera Toxin Subunit B Alexa Fluor 488 or 568 (Life technologies, Molecular Probes; 1 µg in 200 µl of neuronal culture media) was added to the axonal compartment of the microfluidic chamber and incubated for ~ 15 h at 37°C. After 15 h of incubation, the axonal compartment media was removed, rinsed and replaced using fresh neuronal culture media before performing axotomy or imaging.

G-deleted Rabies-mCherry or GFP virus⁵³ (Salk Institute; 1x10⁵ viral units) in 50 µl- conditioned media was added to the axonal compartment of each chamber and incubated for 2h at 37°C. Conditioned media was added back to the axonal compartments following two washes with fresh NBE media. Chambers were maintained in 37°C incubator for ~48 h until fluorescence expression was visible.

Cell viability assay. Dead cells were labeled using SYTOX Green (Invitrogen) at a final concentration of 1 µM and all cell nuclei were labeled with NucBlue Hoechst

Stain (Invitrogen). Cells were incubated with SYTOX/Hoechst solution simultaneously in 1x PBS for 5 min at 37°C, washed with PBS, and fixed with 4% paraformaldehyde (PFA) in PBS containing 40 mg/ml sucrose, 1 μM MgCl₂ and 0.1 μM CaCl₂ for 15 min at room temperature (RT). Coverslips were then rinsed three times with PBS and mounted onto the glass slide using Fluoromount G (Southern Biotech). SYTOX positive (Sytox⁺) cells were manually counted in ImageJ using sum projected z-stack confocal images. Percent cell viability is calculated using $[(\text{Sytox}^+ - \text{Hoechst}) / \text{Hoechst}] * 100$.

Nissl Staining. Neuronal cultures retrogradely labeled with Cholera Toxin were either axotomized or left uninjured. PDMS chambers were carefully lifted off from PDL coated coverslips 24 h post-axotomy. Cultures on the coverslips were quickly rinsed twice with PBS, fixed with 4% PFA for 30 min at RT, washed twice in PBS, and incubated in 0.1% Triton X-100/PBS for 10 min at RT. Cultures were incubated for 20 min in NeuroTrace 500/525 Green Fluorescent Nissl Stain (1:100; Invitrogen) and washed for 10 min in 0.1% Triton X-100/PBS. Cell nuclei were stained with DAPI (Sigma-Aldrich), rinsed three times in PBS, and then the coverslip was mounted onto a microscope slide using Fluoromount G.

Immunocytochemistry. PFA fixed neuronal cultures were permeabilized in 0.25% Triton X-100 and blocked in 10% normal goat serum for 15 min each. Coverslips were incubated with anti-MAP2 (1:1000; Millipore # AB5622), anti-beta tubulin III (1:2000; Aves # TUJ), anti-GAD67 (1:2000; Aves labs # GAD), anti-vGLUT1 (1:100; NeuroMab, clone N28/9, cat. # 75-066), anti-vGAT (1:1000; Synaptic Systems # 131

003), anti-DCC (1:100; Calbiochem # OP45), or anti-synapsin1 (1:500; Calbiochem # 574778) primary antibodies in 1% blocking solution for overnight at 4°C. Coverslips were then incubated with goat anti-rabbit or goat anti-mouse or anti-chicken secondary antibodies conjugated to Alexa-fluorophores (1:1000; Invitrogen) for 1h at RT. Following PBS washes coverslips were mounted onto the glass slide.

RNA isolation. Total RNA from each of 3 axotomized chambers and 3 sham manipulated chambers (6 total samples) was isolated from the somatodendritic compartment of 14 DIV cultures, 24 h after manipulation. RNA was collected from the entire somatodendritic compartment for our gene expression analysis; thus, a fraction of neurons in the axotomized chambers were axotomized and the remaining fraction uninjured or “uncut”. RNA was isolated using an RNAqueous-Micro Kit (Ambion) according to the manufactures instructions including DNase treatment, with modifications specific to accessing the microfluidic compartment ¹⁴. Briefly, 50 µl lysis solution was added to one somatodendritic well and collected from the other somatodendritic well after solution flowed through the somatodendritic compartment to this adjacent well. Lysate was added to 50 µl of fresh lysis solution and mixed well by careful pipetting. Further RNA purification steps were performed according to the manufacturer's guidelines. Samples were maintained at -80°C until prepared for microarray gene expression.

Microarray analysis. Quantification of RNA integrity and concentration was confirmed with an Agilent TapeStation 2200 at the UNC Lineberger Comprehensive

Cancer Center Genomics Core. Microarrays were processed at the UNC School of Medicine Functional Genomics Core using the Affymetrix GeneChip WT Plus Reagent Kit for cRNA amplification, cDNA synthesis, fragmenting and labeling. Samples were hybridized to Rat Gene 2.0 ST Arrays (Affymetrix). Data analysis was performed with Affymetrix Expression Console software and Affymetrix Transcriptome Analysis Console v2.0 software to compare axotomized cultures to uninjured control samples using one-way between-subject ANOVA of normalized intensities. Because a fraction of the harvested cells were axotomized in our axotomized samples, we used modest fold change values for defining our list of significantly changed transcripts (fold change absolute value ≥ 1.1 and ANOVA p-value < 0.05). To identify cell-cell adhesion transcripts we searched for the biological process gene ontology category ‘cell-cell adhesion’. Fold change shown in **Figure 7** was calculated by dividing the mean log₂ intensity value of the uninjured control by the mean log₂ intensity value of the axotomized culture samples.

Image acquisition and dendritic spine analysis. High-resolution z-stack montages of mCherry or GFP labeled live neurons were captured using Zeiss LSM 780 (63x 1.4 NA or 40x 1.4 NA oil immersion objective). Fluorescently labeled fixed neurons (**Figure supplement 2**) were captured using Olympus IX81 microscope (60x 1.3 NA silicon oil immersion objective). Dendrite and spine measurements from montages of fixed (**Figure supplement 2**) or live neurons were analyzed as described below. In live imaging, we captured “0 h or before axotomy” confocal z-stack images using a 40x and 63x objective to create montages of neurons extending axons into the axonal compartment. Blinding

during group allocation was not feasible because same neurons were followed before and after axotomy. Axotomy was performed on the same day after acquiring these images. Images were acquired from same neuron 24 h post-axotomy. In some cases, images were also acquired from same neurons at 48 h post-axotomy (**Figure 1, 2 and 8**). Calibrated z-stack montages were analyzed for all dendrite and spine parameters. Dendrites were traced using semiautomatic neurite tracing tool, Neuron J^{54, 55}. Dendrites greater than 10 μm in length were used in the analysis and were quantified for total dendrite length and number of branch points. Branch point numbers were calculated as the difference between the total number of dendrites and the number of primary dendrites. The number of spines on all primary dendrites of each neuron were manually labeled and categorized as thin, stubby or mushroom shaped using Neuron studio⁵⁶. Spine density was calculated for 10 μm length of dendrite as $[(\# \text{ of spines} / \text{dendrite length}) * 10]$.

FM dye experiments and analysis. Cultures in microfluidic chambers at 24 h (14 DIV), 48 h (15 DIV), and 4d (17 DIV) post-axotomy were loaded with lipophilic dye FM[®] 5-95 (Invitrogen) using KCl mediated depolarization as described previously²³. Briefly, cultures were first incubated for 30 min with pre-warmed HEPES-buffered solution (HBS; 119 mM NaCl, 5 mM KCl, 2 mM CaCl_2 , 2 mM MgCl_2 , 30 mM glucose, 10 mM HEPES). Media was then replaced with FM dye loading solution containing 10 μM FM 5-95, 20 μM AMPAR antagonist 6-cyano-7-nitroquinoxaline-2,3-dione disodium (CNQX; Tocris), 50 μM NMDAR antagonist D-(-)-2-amino-5-phosphonopentanoic acid (D-AP5; Tocris) in 90 mM KCl HBS for 1 min. The loading solution was replaced with HBS containing 10 μM FM 5-95 for 1 min and later rinsed

three times with a high-Mg²⁺, low-Ca²⁺ solution (106 mM NaCl, 5 mM KCl, 0.5 mM CaCl₂, 10 mM MgCl₂, 30 mM glucose, 10 mM HEPES) containing 1 mM Advasep-7 (Biotium) to remove extracellular membrane-bound FM. Finally, cultures were washed in HBS containing 20 μM CNQX and 50 μM D-AP5 for at least three times, 1 min each. Next, we stimulated the microfluidic chambers using extracellular electrodes by placing a positive and negative electrode in each well of the somatodendritic compartment.

Electrical stimulation was provided by an AD Instrument 2 Channel Stimulus Generator (STG4002) in current mode with an asymmetric waveform (-480 μA for 1 ms and +1600 μA for 0.3 ms) for ~ 1 min at 20 hz for 600 pulses. The FM 5-95 imaging was performed as described previously using a spinning disk confocal imaging system²³. Z-stacks (31 slices) were captured every 15 s during the baseline (1 min), stimulation (1 min), and after stimulation (2 min) periods. This stimulation pattern was optimized for efficient FM unloading within these microfluidic chambers and the frequency is greater than typically used in open well dishes. At least 3 baseline images were acquired before electrical stimulation. Sum projected confocal z-stack were converted to 8-bit images and registered using TurboReg, an image J plugin. We background subtracted the image stack using the image 3 min after stimulation. Image stacks thresholded to a pixel value of 15. FM puncta between 0.4 to 10 μm² were analyzed. We measured the intensity of each punctum in the whole field or specifically on GFP labeled neuron (**Figure 3a-c**) throughout all time-series (registered stack obtained by TurboReg, imageJ plugin). To analyze the unloading kinetics of FM puncta on GFP labeled neuron, we first thresholded the GFP image and then created an outline enclosing all the GFP labeled regions including spines. The outlined ROI was superimposed on the FM labeled image and the

intensity of each punctum in the selected ROI (GFP outline) was measured throughout all time series. We normalized fluorescence intensity of each puncta to the frame before stimulation. Puncta with >5% unloading after 1 min were used in the analysis as unloaded puncta. Time constants were estimated by curve fitting unloading kinetics to a single exponential decay function²³. Curve fitting was done in MATLAB and FM puncta with time constants longer than 3 min were excluded from the analysis and assumed to be non-releasing. Number of FM puncta that unload >5% after 60s were classified as responsive using image stacks that were not background subtracted; puncta that did not meet this criteria were classified as unresponsive.

In activity and transcription blocking experiments, the FM 5-95 unloading experiment was performed as mentioned above at 48 h post-axotomy. The intensity measurements of each punctum in the whole field and subsequent analysis of FM unloading kinetics was performed as mentioned above.

Drug treatments. Local activity blockade solution (ABS), which includes low- Ca^{2+} , high- Mg^{2+} , and TTX (0.5 mM CaCl_2 , 10 mM MgCl_2 , 1 μM TTX) was applied solely to the axonal compartment for 1 h during axotomy (15 min prior and 45 min after axotomy). 5,6-dichloro-1- β -D-ribofuranosyl-1H-benzimidazole (DRB; Sigma-Aldrich # D1916) was suspended in DMSO and applied to the somatodendritic compartment at a final concentration of 80 μM for 1 h during axotomy (beginning 15 min prior to axotomy). Tetrodotoxin citrate (TTX; Tocris Bioscience # 1078) was suspended in HBS and applied to the somatodendritic compartment at a final concentration of 1 μM for 1 h during axotomy (beginning 15 min prior to axotomy). Media stored from the axonal

compartment prior to treatment was added back to the axonal compartment after treatment. Exogenous netrin-1 was applied to the somatodendritic compartment after 1 ¹/₂ day of axotomy, when spine changes were observed, at a final concentration of 625 ng/ml. A similar netrin-1 concentration has been used for cortical neurons over a treatment time of 1-2 days to examine netrin-specific responses ⁵⁷. Netrin-1 was applied for 8-10 h to observe stable synaptic changes. For DCC function blocking experiments, anti-DCC (mDCC; Calbiochem # OP45) and isotype control (mIgG; BD pharmingen #554121) was applied to the somatodendritic compartment of uninjured chambers at a final concentration of 1 µg/ml for 24 h.

Microscopy. FM and fixed imaging was performed using CSU-X1 (Yokogawa) spinning disk confocal imaging unit configured for an Olympus IX81 microscope (Andor Revolution XD). Live imaging of neurons for spine analysis was captured using a Zeiss LSM 780 confocal microscope with a Plan-Apochromat 40x objective (NA 1.4) at the UNC Neuroscience microscopy core facility. Light excitation for the spinning disk confocal imaging system was provided by 405 nm, 488 nm, 561 nm, and/or 640 nm lasers. The following bandpass emission filters (BrightLine, Semrock) were used: 447/60 nm (TRF447-060), 525/30 nm (TRF525-030), 607/36 nm (TR-F607-036), 685/40 nm (TR-F685-040). For FM imaging, the spinning disk confocal imaging system was used with excitation at 561 nm and the 685/40 nm emission filter. We used 2x2 binning to reduce the laser intensity and acquisition time for each frame; each z-stack was obtained in ~5 s. For the Zeiss LSM 780, signal was acquired from up to three channels for GFP (493 nm - 558 nm), Alexa 568 (569 nm - 630 nm), and Alexa 647 (640 nm - 746 nm).

633

634 *Whole-Cell Electrophysiology.* For whole-cell recordings, neurons were visually
 635 identified with infrared differential interference contrast optics. Cells were recorded in
 636 voltage-clamp configuration with a patch clamp amplifier (Multiclamp 700A), and data
 637 were acquired and analyzed using pCLAMP 10 software (Molecular Devices). Patch
 638 pipettes were pulled from thick-walled borosilicate glass with open tip resistances of 2–7
 639 MΩ. Series and input resistances were monitored throughout the experiments by
 640 measuring the response to a –5-mV step at the beginning of each sweep. Series
 641 resistance was calculated using the capacitive transient at the onset of the step and input
 642 resistance was calculated from the steady-state current during the step. Recordings were
 643 sampled at 10 kHz and bessel filtered at 2 kHz. No series resistance compensation was
 644 applied.

645 Prior to recording, microfluidic chambers and PDMS molds were removed and
 646 the glass coverslips containing cells were mounted onto a submersion chamber,
 647 maintained at 32° C. Cultures were perfused at 2 mL/min with artificial cerebrospinal
 648 fluid (ACSF) containing 124 mM NaCl, 3 mM KCl, 1.25 mM Na₂PO₄, 26 mM NaHCO₃,
 649 1 mM MgCl₂, 2 mM CaCl₂ and 20 mM d-(+)-glucose, saturated with 95% O₂, 5% CO₂.
 650 To determine if recorded neurons' axons entered the microfluidic chamber, 0.035 mM
 651 Alexa-594 was included in all internal solutions to allow for post-hoc visualization of
 652 neuronal morphology.

653 Events with a rapid rise time and exponential decay were identified as mEPSCs or
 654 mIPSCs respectively using an automatic detection template in pCLAMP 10, based on
 655 previously published methods⁵⁸. mEPSC events were post-hoc filtered to only include

events with a peak amplitude ≥ 5 pA and a ≤ 3 ms 10-90% rise time. Mean mEPSC parameters were quantified from a 10 min recording period and mIPSC parameters were sampled from a 5 min recording period. Neurons were excluded from analysis if R_{series} was >25 M Ω during anytime during the recording.

mEPSCs Recordings. mEPSC recordings were performed similar to previously described⁵⁹. AMPAR-mediated mEPSCs were isolated by voltage-clamping neurons at -70 mV and by supplementing the ACSF with TTX citrate (1 μ M, Abcam), the GABA (A) receptor antagonist picrotoxin (50 μ M, Sigma-aldrich), and the NMDA receptor antagonist D, L-2-amino-5 phosphonopentanoic acid (100 μ M, AP5, Abcam). The internal solution contained: 100 mM CsCH₃SO₃, 15 mM CsCl, 2.5 mM MgCl₂, 5 mM QX-314-Cl, 5 mM tetra-Cs-BAPTA, 10 mM HEPES, 4 mM Mg-ATP, 0.3 mM Na-GTP, and 0.5% (w/v) neurobiotin with pH adjusted to 7.25 with 1 M CsOH and osmolarity adjusted to ~295 mOsm with sucrose.

mIPSC recordings. mIPSCs were isolated by supplementing the ACSF with TTX citrate (1 μ M), the NMDA receptor antagonist AP5 (100 μ M), and the AMPA/Kainate receptor antagonist 6,7-dinitroquinoxaline-2,3-dione (20 μ M, DNQX, dissolved in DMSO for a final concentration of 1% v/v DMSO in ACSF, Abcam). For mIPSC recordings, the pipette solution contained a relatively lower chloride concentration, similar to intracellular chloride concentrations that are present in more mature neurons⁶⁰. This pipette solution contained, 110 mM CsCH₃SO₃, 2.5 mM MgCl₂, 5 mM QX-314-Cl, 5 mM tetra-Cs-BAPTA, 10 mM HEPES, 4 mM Mg-ATP, 0.3 mM Na-GTP, and 0.5%

(w/v) neurobiotin with pH adjusted to 7.28 with 1 M CsOH and a 300 mOsm osmolarity. Following break-in, neurons were first voltage-clamped at -70 mV for at least three minutes to allow dialysis with pipette solution, after which the voltage was gradually changed to 0 mV, where it was maintained for duration of the recording.

SCI injury and in vivo electrophysiology. Nineteen adult male, Fischer-344 inbred rats (Harlan Laboratories, Indianapolis, IN) were selected for this study. A total of 14 rats received a contusion injury in the thoracic cord at level T9–T10, whereas 5 rats were randomly selected as uninjured controls. After a minimum of 4 weeks following SCI, intracortical microstimulation (ICMS) and single-unit recording techniques were used in the hindlimb motor area (HLA) to determine movements evoked by ICMS and spike rates. The protocol was approved by the University of Kansas Medical Center Institutional Animal Care and Use Committee.

Spinal cord surgeries were performed under ketamine hydrochloride (80 mg/kg)/xylazine (7 mg/kg) anesthesia and aseptic conditions. Each of the SCI rats underwent a T9–T10 laminectomy and contusion injury using an Infinite Horizon spinal cord impactor (Precision Systems and Instrumentation, LLC, Fairfax Station, VA) with a 200 Kdyn impact. At the conclusion of surgery, 0.25% bupivacaine hydrochloride was applied locally to the incision site. Buprenex (0.01mg/kg, SC) was injected immediately after surgery and 1 day later. On the first week after surgery, the rats received daily injections of 30,000U penicillin in 5mL saline. Bladders were expressed twice daily until the animals recovered urinary reflexes.

Post-SCI surgical and neurophysiological procedures were conducted under aseptic conditions 4 to 18 weeks post-SCI. At the time of these procedures, ages ranged from 4.5 to 7.5 months. After an initial, stable anesthetic state was reached using isoflurane anesthesia, isoflurane was withdrawn and the first dose of ketamine hydrochloride (100 mg/kg)/xylazine (5 mg/kg) was administered. The rats were placed in a Kopf small-animal stereotaxic instrument and a craniectomy was performed over the motor cortex. The dura was incised and the opening filled with warm, medical grade, sterile silicone oil. Core temperature was maintained within normal physiological limits using a feedback-controlled heating pad during the entire procedure. A stable anesthetic level was assessed by monitoring the respiratory and heart rate, and reflexes to noxious stimuli.

In each rat, neuronal recordings were begun at ~3 h after initiation of the procedure. Neuronal action potentials (single-units or spikes) were recorded with a single-shank, 16-channel Michigan-style linear microelectrode probe (Neuronexus, Ann Arbor, MI). A total of 15 channels were active in each procedure. The tip of the probe was lowered to a depth of 1720 μm below the cortical surface, allowing accurate determination of depth for each recording site. Because no hindlimb responses were evoked using ICMS in SCI rats, the location of HLA in SCI rats was determined by the stereotaxic coordinates derived in normal rats in a previous study (centered at 2mm posterior and 2.64mm lateral to bregma). At each cortical location, electrical activity was collected and digitized for 5 min from each of the 15 active sites using neurophysiological recording and analysis equipment (Tucker Davis Technologies, Alachua, FL). Neural spikes were discriminated using principle component analysis.

Sample waveforms (1.3 msec in duration) were collected that passed 5.5 X SD below root mean square (RMS). After each experiment, the probe was cleaned with Opti-Free solution (Alcon Laboratories, Fort Worth, TX), followed by ethanol and then rinsed thoroughly in distilled water. The electrode impedance of each site remained at 0.9M Ω for each experiment. At the end of the recording session, rats were humanely euthanized with an overdose of sodium pentobarbital.

Statistics. Graphpad prism 6 statistical program was used. For calculating significance on spine density in live imaging data, paired two-tailed t-test was performed. Unpaired two-tailed t-test was performed when comparing two independent groups. For FM unloading experiments and for comparing multiple groups, Two-way ANOVA and One-way ANOVA were used respectively followed by Bonferroni post-hoc test. For patch-clamp electrophysiology experiments, unpaired two-tailed t-tests or unpaired two-tailed t-tests with Welch's correction were performed to compare two groups. For *in vivo* experiments, hypotheses regarding spike firing rates were tested independently in each cortical layer (Va, Vb and VI) using a two-tailed t-test, ($\alpha = 0.05$). Samples were not excluded from our data sets and sample size was determined based on our experience and previous publications²³.

Data availability. The microarray data will be submitted to GEO and accession numbers will be provided at the time of publication. All relevant data will be available from authors upon request.

747 REFERENCES:

- 748 1. Nudo, R.J. *Front Hum Neurosci* 7, 887 (2013).
- 749 2. Takechi, U., *et al. Clin Neurophysiol* 125, 2055-2069 (2014).
- 750 3. Nudo, R.J. & Milliken, G.W. *J Neurophysiol* 75, 2144-2149 (1996).
- 751 4. Oudega, M. & Perez, M.A. *J Physiol* 590, 3647-3663 (2012).
- 752 5. Frost, S.B., *et al. J Neurophysiol* 89, 3205-3214 (2003).
- 753 6. Rishal, I. & Fainzilber, M. *Nat Rev Neurosci* 15, 32-42 (2014).
- 754 7. Urban, E.T., 3rd, *et al. Molecular and cellular biochemistry* 369, 267-286 (2012).
- 755 8. Kim, B.G., *et al. Exp Neurol* 198, 401-415 (2006).
- 756 9. Jacobs, K.M. & Donoghue, J.P. *Science* 251, 944-947 (1991).
- 757 10. Ding, M.C., *et al. J Neurosci* 31, 14085-14094 (2011).
- 758 11. Nakatomi, H., *et al. Cell* 110, 429-441 (2002).
- 759 12. Will, B., *et al. Progress in Neurobiology* 72, 167-182 (2004).
- 760 13. Taylor, A.M., *et al. Nat Methods* 2, 599-605 (2005).
- 761 14. Taylor, A.M., *et al. J Neurosci* 29, 4697-4707 (2009).
- 762 15. Taylor, A.M., *et al. Neuron* 66, 57-68 (2010).
- 763 16. Banker, G.A. & Cowan, W.M. *Brain Res* 126, 397-342 (1977).

- 764 17. Benson, D.L., *et al.* *J Neurocytol* 23, 279-295 (1994).
- 765 18. Greer, J.E., *et al.* *J Neurosci* 32, 6682-6687 (2012).
- 766 19. Ikeda, S. & Nakagawa, S. *Brain Res* 792, 164-167 (1998).
- 767 20. McIlwain, D.L. & Hoke, V.B. *BMC Neurosci* 6, 19 (2005).
- 768 21. Ghosh, A., *et al.* *Cereb Cortex* 22, 1309-1317 (2012).
- 769 22. Gao, X., *et al.* *PLoS One* 6, e24566 (2011).
- 770 23. Taylor, A.M., *et al.* *J Neurosci* 33, 5584-5589 (2013).
- 771 24. Zakharenko, S.S., *et al.* *Nat Neurosci* 4, 711-717 (2001).
- 772 25. Frost, S.B., *et al.* *J Neurotrauma* 32, 1666-1673 (2015).
- 773 26. Lewicki, M.S. *Network* 9, R53-78 (1998).
- 774 27. Nudo, R.J., *et al.* *The Journal of Comparative Neurology* 358, 181-205 (1995).
- 775 28. Barron, K.D., *et al.* *J Neuropathol Exp Neurol* 47, 62-74 (1988).
- 776 29. Chen, J.L., *et al.* *Neuron* 74, 361-373 (2012).
- 777 30. Markram, H., *et al.* *Nat Rev Neurosci* 5, 793-807 (2004).
- 778 31. Chiu, C.Q., *et al.* *Science* 340, 759-762 (2013).
- 779 32. Higley, M.J. *Nat Rev Neurosci* 15, 567-572 (2014).
- 780 33. Manitt, C., *et al.* *J Neurosci Res* 84, 1808-1820 (2006).

- 781 34. Horn, K.E., *et al. Cell Rep* 3, 173-185 (2013).
- 782 35. Goldman, J.S., *et al. J Neurosci* 33, 17278-17289 (2013).
- 783 36. Xu, K., *et al. Science* 344, 1275-1279 (2014).
- 784 37. Manitt, C., *et al. J Neurosci* 29, 11065-11077 (2009).
- 785 38. Canty, A.J., *et al. J Neurosci* 33, 10374-10383 (2013).
- 786 39. Persson, A.K., *et al. J Neurosci* 33, 19250-19261 (2013).
- 787 40. Cho, Y., *et al. Cell* 155, 894-908 (2013).
- 788 41. Wong, Y.C. & Holzbaaur, E.L. *J Neurosci* 34, 1293-1305 (2014).
- 789 42. Branco, T., *et al. Neuron* 59, 475-485 (2008).
- 790 43. Gonzalez-Forero, D. & Moreno-Lopez, B. *Neuroscience* 283, 138-165 (2014).
- 791 44. Sunico, C.R., *et al. J Neurosci* 25, 1448-1458 (2005).
- 792 45. Stavoe, A.K. & Colon-Ramos, D.A. *The Journal of Cell Biology* 197, 75-88
793 (2012).
- 794 46. Colon-Ramos, D.A., *et al. Science* 318, 103-106 (2007).
- 795 47. Ahn, K.J., *et al. Neurosci Lett* 419, 43-48 (2007).
- 796 48. Lu, H., *et al. Front Med* 5, 86-93 (2011).
- 797 49. Han, X., *et al. Mol Neurobiol* (2016).

- 798 50. Sun, H., *et al. Neurobiol Dis* 44, 73-83 (2011).
- 799 51. Tu, H., *et al. Neuron* 86, 1407-1419 (2015).
- 800 52. McKinley, P.A. & Smith, J.L. *J Neurosci* 10, 1429-1443 (1990).
- 801 53. Wickersham, I.R., *et al. Neuron* 53, 639-647 (2007).
- 802 54. Fu, M.M. & Holzbaur, E.L. *Autophagy* 10, 2079-2081 (2014).
- 803 55. Nagendran, T. & Hardy, L.R. *Neuroscience* 199, 548-562 (2011).
- 804 56. Rodriguez, A., *et al. PLoS One* 3, e1997 (2008).
- 805 57. Menon, S., *et al. Dev Cell* 35, 698-712 (2015).
- 806 58. Clements, J.D. & Bekkers, J.M. *Biophys J* 73, 220-229 (1997).
- 807 59. Larsen, R.S., *et al. Neuron* 83, 879-893 (2014).
- 808 60. Yamada, J., *et al. J Physiol* 557, 829-841 (2004).

809

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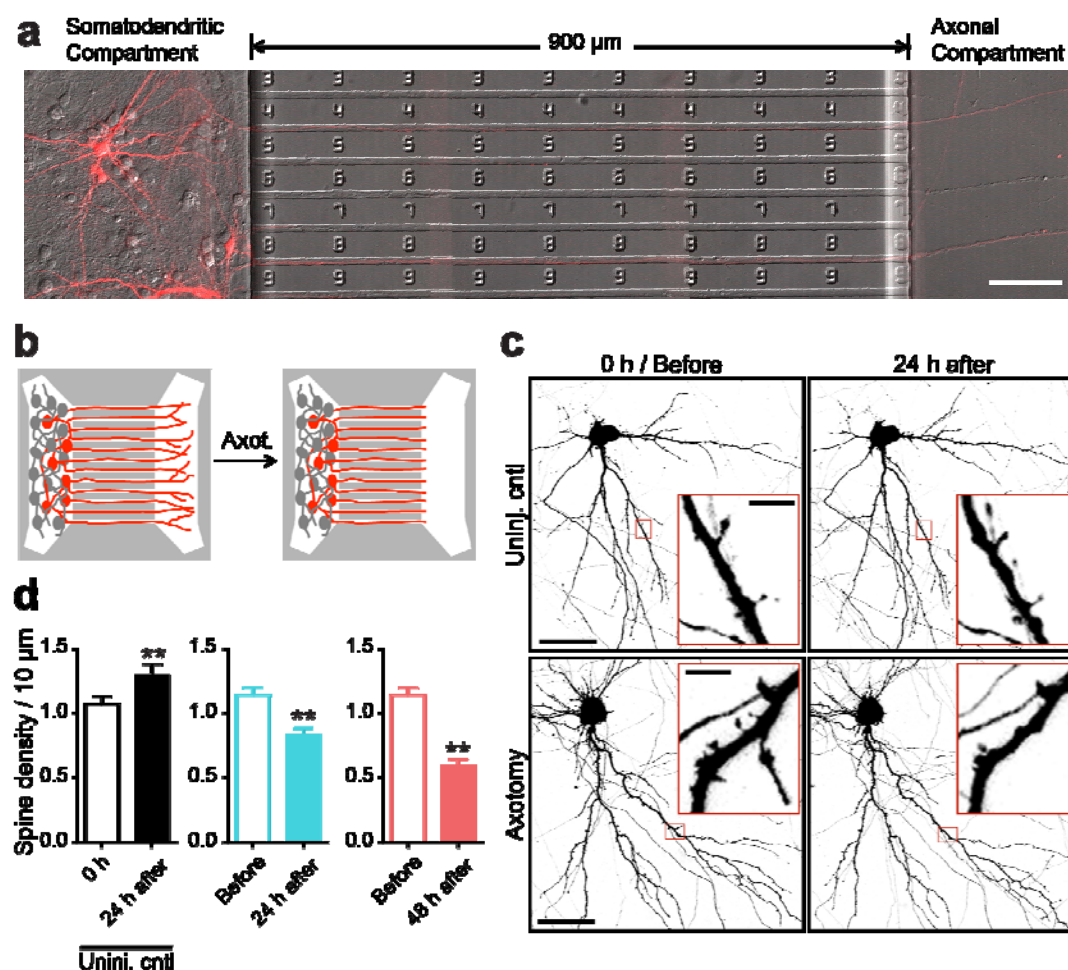


Figure 1: Distal axotomy of pyramidal neurons within microfluidic chambers induced dendritic spine loss on axotomized neurons. (a) 14 DIV rat hippocampal neurons cultured within a microfluidic chamber. Pyramidal neurons were retrogradely labeled using a G-deleted rabies mCherry virus added exclusively to the axonal compartment. (b) Cartoon illustration of *in vitro* axotomy (Axot.) within microfluidic chambers to selectively axotomize a subset of neurons (red) that extend axons through the microgroove region. Axons of uninjured neurons (grey) extend axons within the somatodendritic compartment. (c) Representative images of neurons and dendritic segments retrogradely labeled with G-deleted rabies-mCherry virus (inverted fluorescence) from repeated live imaging of uninjured control (Uninj. ctrl) and

axotomized neurons. Axotomized neurons were imaged before axotomy on DIV 13 (before) and uninjured controls were also imaged on DIV 13 (0 h) and then both conditions were imaged at 14 DIV (24 h after). Image and inset scale bars, 50 and 5 μm , respectively. **(d)** Quantification of spine density before and after axotomy and in uninjured controls as described in (c). Paired two-tailed t-test, $**p \leq 0.001$; 20 primary dendritic process were analyzed from 5 individual neurons over two-independent experiments. Error bars, SEM.

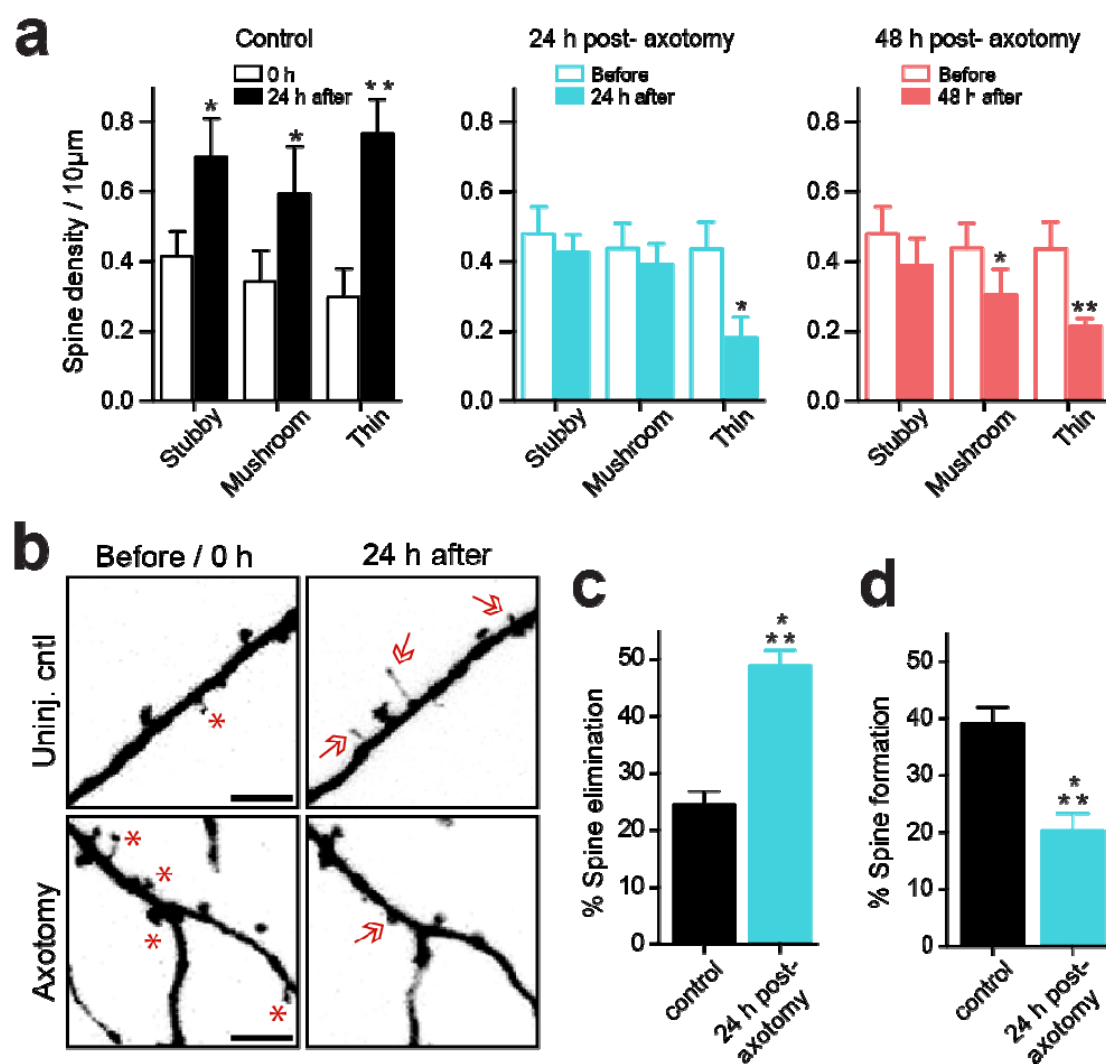


Figure 2: Axotomy led to dendritic spine loss and reduced new spine formation. (a)

Quantification of spine density of stubby, mushroom, and thin spine categories before axotomy, 24 h post-axotomy, and 48 h post-axotomy and uninjured controls. Uninjured controls and axotomized samples were imaged beginning at 13 DIV (labeled “0 h” or “Before”, respectively). Two-way ANOVA, Bonferroni post hoc test, * $p < 0.05$, ** $p < 0.01$. (b) Representative images of dendritic segments from uninjured control and axotomized neurons at 0 h or before axotomy, respectively, and 24 h after. Asterisks indicate spines eliminated and arrows indicate formation of new spines. Scale bars, 5 µm.

(c-d) Bar graphs represent percentage of spines eliminated (c) and newly formed (d) after 24 h in uninjured controls (Uninj. cntl) and 24 h post-axotomy. Two-tailed t-test, *** $p < 0.001$. (*a, c*, and *d*) These analyses represent 20 primary dendritic processes from 5 live neurons per condition over two independent experiments. The same trend was observed in each independent experiment. Error bars, SEM.

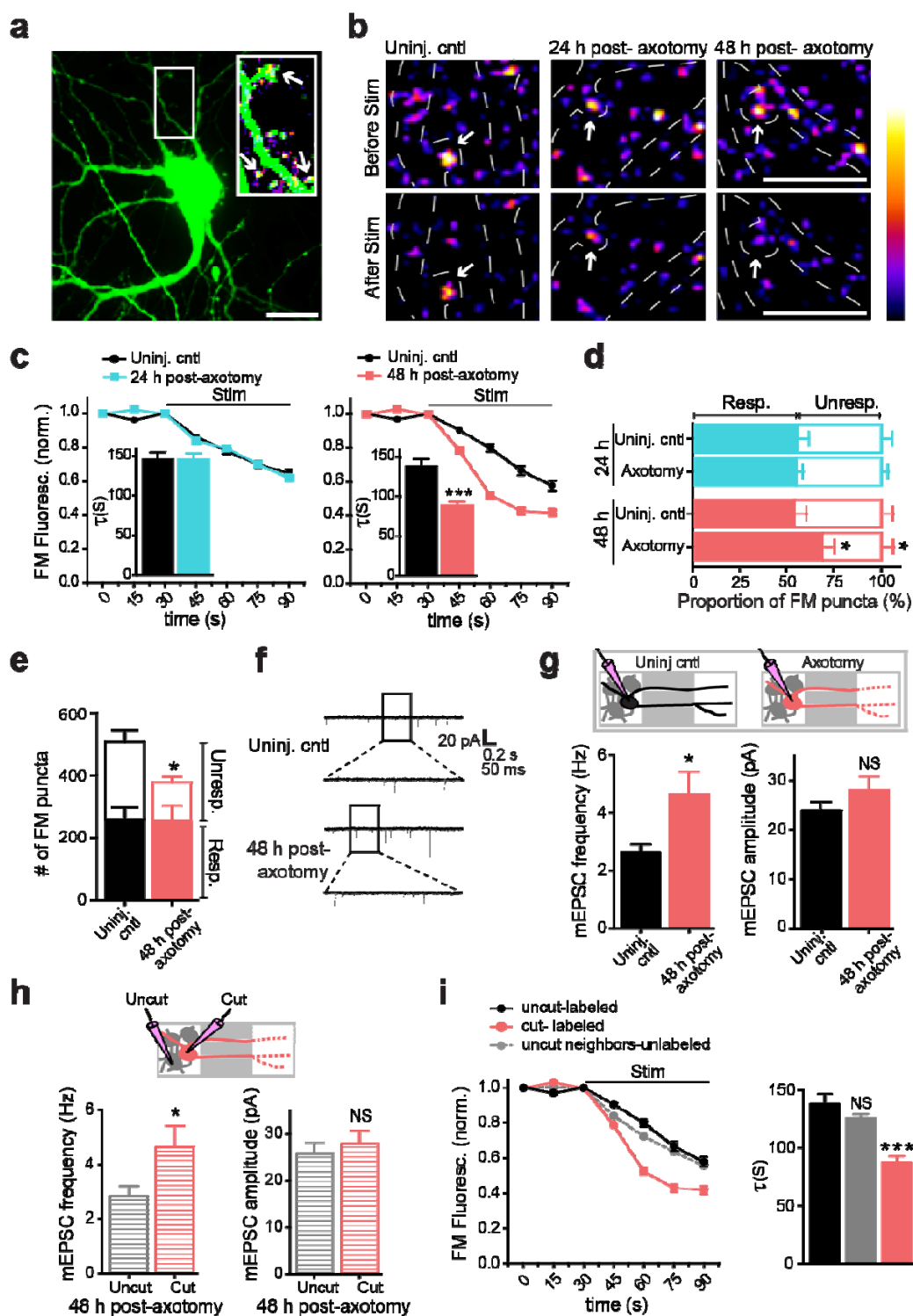


Figure 3: Distal axotomy induced a delayed trans-synaptic increase in presynaptic excitability onto axotomized neurons. (a) Representative image of a neuron within the somatodendritic compartment of a microfluidic chamber retrogradely labeled with a

modified eGFP rabies virus applied briefly to the axonal compartment. Synaptic vesicle release kinetics at axotomized neurons were quantified using FM dyes and analyzing the subset of FM puncta that colocalize with the eGFP-filled neurons within the somatodendritic region. Inset shows an enlarged region demonstrating colocalization of FM puncta with eGFP-labeled dendrites and dendritic spines (arrows). FM puncta were pseudocolored using the ImageJ ‘fire’ color look up table shown in (b). Scale bar, 20 μ m.

(b) Representative images show FM puncta before and after field stimulation. Boundaries of eGFP labeled dendrites and spines are outlined as white dashed lines. Arrows in the before and after stimulation images indicate destaining of FM labeled puncta at dendritic spines. Scale bars, 10 μ m. (c) FM unloading curves from FM puncta colocalized onto GFP labeled neurons at 24 h post-axotomy (control, n=124 puncta combined from 3 chambers; axotomy, n=156 puncta combined from 3 chambers over 2 independent experiments) and 48 h post-axotomy (control, n=160 puncta combined from 3 chambers; axotomy, n=220 puncta combined from 3 chambers over 2 independent experiments). Two-way ANOVA, Bonferroni post hoc test, *** $p \leq 0.001$. Insert: decay time constant (τ) of FM puncta at 24 h and 48 h post-axotomy. Unpaired two-tailed t-test, *** $p < 0.001$.

(d) Percent responsive FM puncta and unresponsive FM puncta at 24 h (control, n=1,431; axotomy, n=1,602; data shown are from 2 independent experiments which includes a total of 4 chambers for each condition) and 48 h post-axotomy (control, n=3,452; axotomy, n=2,793; data shown is from 3 independent experiments to yield a combined 7 chambers for each condition). Asterisks indicate that the percentage of responsive and unresponsive puncta at 48 h post-axotomy is significantly different from control. Unpaired two-tailed t-test, * $p < 0.05$. (e) Total number of responsive and unresponsive

FM puncta at 48 h post-axotomy (Resp: control, n=1,536; axotomy, n=1,522; Unresp: control, n=1,504; axotomy, n=742; data shown represents 3 independent experiments which combined included 6 chambers for each condition) Unpaired two-tailed t-test, *p<0.05. (f) Representative traces of mEPSC recordings 48 h post-axotomy. (g) Quantification of mEPSC frequency and amplitude at 48 h post-axotomy (control, n=17 neurons; axotomy, n=20 neurons). Data shown were combined from 4 independent experiments. Unpaired two-tailed t-test with Welch's correction, *p < 0.05; mEPSC amplitude: unpaired two-tailed t-test, p = 0.2. Insert: Cartoon depicts recordings from either control neurons within uninjured chambers (g; black) or directly injured neurons within chambers subjected to axotomy (red). (h) Analysis of mEPSC frequency and amplitude from axotomy devices previously shown in (g) comparing neurons with axons that extended into the axonal compartment and were cut (cut, n=10 neurons), to neurons that did not extend axons into the compartment and were not cut (uncut, n=10 neurons). Unpaired two-tailed t-test with Welch's correction, *p < 0.05; mEPSC amplitude: unpaired two-tailed t-test, p = 0.52. Insert: Cartoon depicts recordings from either a directly injured neuron (h; red) or its neighboring uninjured neuron (grey). (i) FM unloading curves of neighboring uninjured neurons (uncut neighbors, n=767 puncta combined from 4 chambers) within axotomized chambers, identified by lack of eGFP labeling, were compared with uninjured control neurons (uncut) and axotomized neurons labeled with eGFP rabies virus. Two-way ANOVA, Bonferroni post hoc test ***p < 0.001. Decay time constant (τ) of FM puncta at 48 h post-axotomy. One-way ANOVA, Bonferroni post hoc test ***p < 0.001. Data shown represent 2 independent experiments. Error bars, SEM.

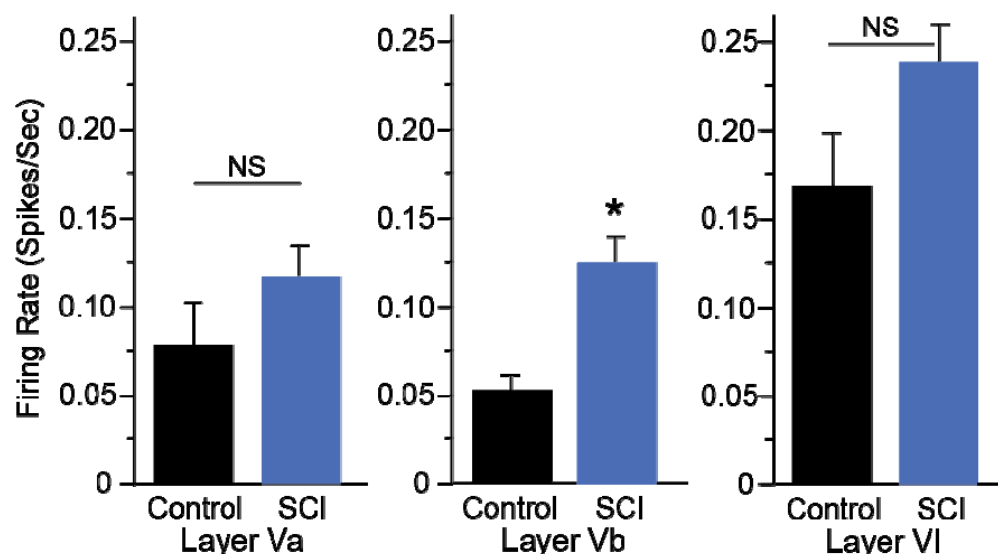


Figure 4: Spinal cord injury results in increased spontaneous single-unit firing rate in layer Vb of hindlimb cortex 4-18 weeks following injury.

Mean spontaneous firing rates of isolated single-units in layers Va, Vb and VI of the hindlimb motor cortex in control rats ($n = 5$) and rats with a spinal cord contusion at T9-10 ($n = 14$). Laminar estimates are based on the depths of electrode sites on a single-shank multi-electrode array relative to the cortical surface²⁵. In each rat, single-unit (spike) activity was sampled from 4 to 6 locations within the neurophysiologically-identified hindlimb motor cortex. Data represent the mean firing rates of 1,744 isolated units in Layers Va (control, $n=124$; SCI, $n=312$), Vb (control, $n=155$; SCI, $n=390$), and VI (control, $n=217$; SCI, $n=546$). Asterisk indicates that the firing rate of single-units in layer Vb of spinal cord injured rats is significantly higher compared to firing rates in control rats. Two-tailed t-test, $t=3.99$, $*p<0.0001$.

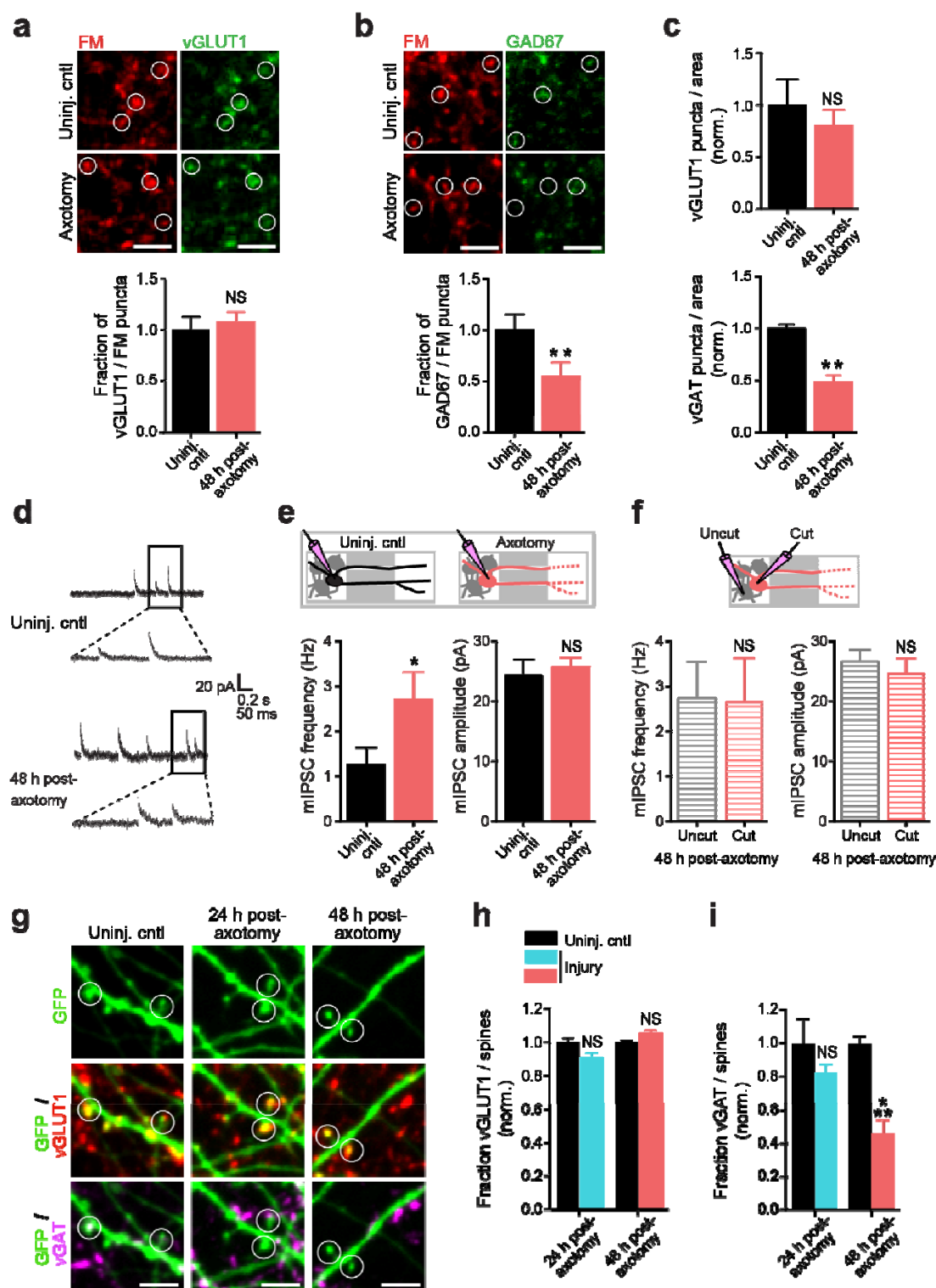


Figure 5: Distal axotomy induces culture-wide loss of inhibitory terminals, increased spontaneous GABAergic neurotransmission, and selective loss of inhibited spine synapses onto injured neurons. (a) Representative images showing fixable FM4-64FX

puncta (red) and vGLUT1 (green) labeling. White open circles highlight vGLUT1 expression in FM labeled terminals. Scale bars, 10 μ m. vGLUT1 positive FM puncta at 48 h post-axotomy normalized to control. 10 individual fields from two chambers were analyzed per condition. **(b)** Images showing fixable FM4-64FX puncta (red) and GAD67 (green) labeling. White open circles highlight GAD67 expression levels in FM labeled terminals. Scale bars, 10 μ m. Fraction of GAD67-positive FM puncta at 48 h post-axotomy normalized to control. 10 individual fields from two chambers were analyzed per condition. **(c)** Density of vGLUT1 and vGAT puncta in an area following 48 h post-axotomy, normalized to controls. N= 4 individual neurons were analyzed per condition. **(a-c)** Unpaired two-tailed t-test, $**p < 0.01$. **(d)** Representative traces of mIPSC recordings 48 h post-axotomy. **(e)** Quantification of mIPSC frequency and amplitude at 48 h post-axotomy (control, n=9 neurons; axotomy, n=17 neurons). Neurons from axotomized microfluidic devices have an increased mIPSC frequency compared to uninjured control devices (mIPSC frequency: unpaired two-tailed t-test with Welch's correction, $p = 0.05$; mIPSC amplitude: unpaired two-tailed t-test, $p = 0.62$). **(f)** Analysis of mIPSC frequency and amplitude from axotomy devices previously shown in *(e)* comparing neurons with axons that extended into the axonal compartment and were cut (cut, n=8 neurons), to neurons that did not extend axons into the compartment and were not cut (uncut, n=9 neurons). Axotomized neurons and their uninjured neighbors from the same device have a similar mean mIPSC frequency and amplitude, suggesting axotomy increases spontaneous GABAergic neurotransmission both at injured and uninjured neighboring neurons (mIPSC frequency: unpaired two-tailed t-test, $p = 0.94$; mIPSC amplitude: unpaired two-tailed t-test, $p = 0.51$). **(d-f)** Data shown were combined

from 3 chambers. **(g)** Representative dendritic segments (retrogradely labeled with GFP) showing spines that are labeled with either vGLUT1 (red) or vGAT (purple) antibodies. White open circles highlight dendritic spines with vGLUT1 and/or vGAT synapses. **(h)** Fraction of vGLUT1 positive dendritic spines at 24 h and 48 h post-axotomy normalized to respective controls. **(i)** Fraction of vGAT positive dendritic spines at 24 h and 48 h post-axotomy normalized to respective controls. 8 individual fields were analyzed per condition from two independent experiments. The same trend was observed in each experiment. Scale bars, 5 μ m. Two-tailed t-test, *** $p \leq 0.001$. Error bars, SEM.

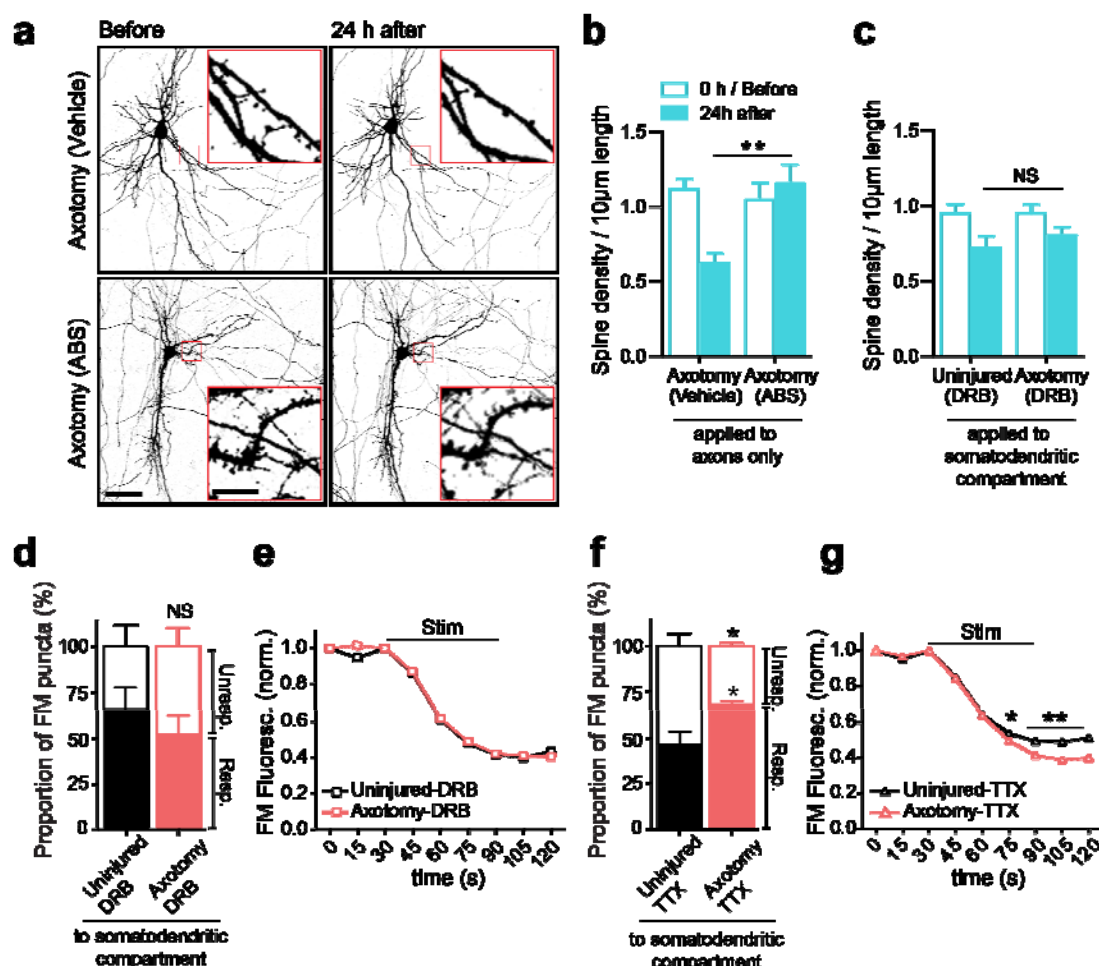


Figure 6: Injury-induced synaptic remodeling is triggered by retrograde

propagation of injury signal from axon-to-soma and gene transcription.

(a) Representative images of neurons retrograde labeled with modified eGFP rabies virus

(inverted grayscale) before and 24 h after axotomy in the presence of vehicle or local

activity blockade solution (ABS) applied to axonal compartment for 1 h during axotomy.

Axotomy and imaging were performed within microfluidic chambers. Inset shows

zoomed in dendritic regions. (b) Quantification of spine density results described in (a).

(c) Quantification of spine density changes following application of transcription blocker

(DRB) to the somatodendritic compartment for 1 h during axotomy within microfluidic

chambers. For (b,c) 20 primary dendritic process from 4 live neurons per condition were

analyzed over two independent experiments. Repeated measure two-way ANOVA, Bonferroni post hoc test, $**p < 0.001$. (d) Percent of unloaded FM puncta (responsive) and unresponsive puncta at 48 h post-axotomy. Approximately 300 puncta were analyzed per chamber; 4 individual chambers were analyzed per condition over two independent experiments. Unpaired two-tailed t-test. (e) FM5-95 unloading following application of DRB. Approximately 200 puncta were analyzed per chamber; 4 individual chambers were analyzed per condition over two independent experiments. (f) Percent of unloaded FM puncta (responsive) and unresponsive puncta at 48 h post-axotomy following application of action potential blocker (TTX) to the somatodendritic compartment for 1 h during injury. Approximately 400 puncta were analyzed per chamber; 4 individual chambers were analyzed for each condition over two independent experiments. Asterisks indicate that the percentage of responsive and unresponsive puncta is significantly different compared to control. Unpaired two-tailed t-test, $*p < 0.05$. (g) FM5-95 unloading curves following application of TTX. Approximately 200 puncta were analyzed per chamber; 4 individual chambers were analyzed for each condition over two independent experiments). The same trend was observed in each pair of experiments. Two-way ANOVA, Bonferroni post hoc test, $*p < 0.05$, $**p < 0.01$. Error bars, SEM.

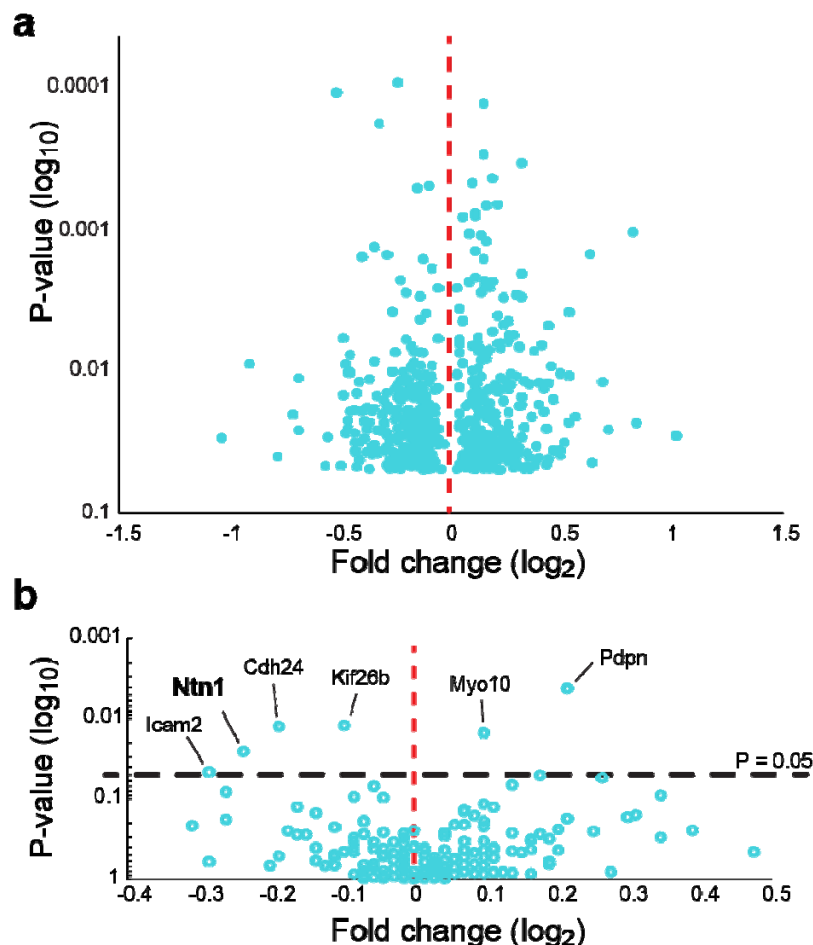


Figure 7: Cell-cell adhesion transcripts were differentially expressed within the somatodendritic compartment 24 h post-axotomy. Microarray analysis was performed on somatodendritic samples of controls and 24 h post-axotomy cultures. (a) Volcano plot showing differentially expressed RNAs that are significantly changed at 24 h post-axotomy (p-value < 0.05; n = 3 individual chambers each condition; **Table supplement 2**). (b) Volcano plot showing differential expression of transcripts from Gene Ontology biological process category “cell-cell adhesion”. Only 6 transcripts are significantly changed in this category (**Table supplement 3**). One-way ANOVA, p-value < 0.05 represents the transcripts that are consistently changed in each of the three microarray datasets.

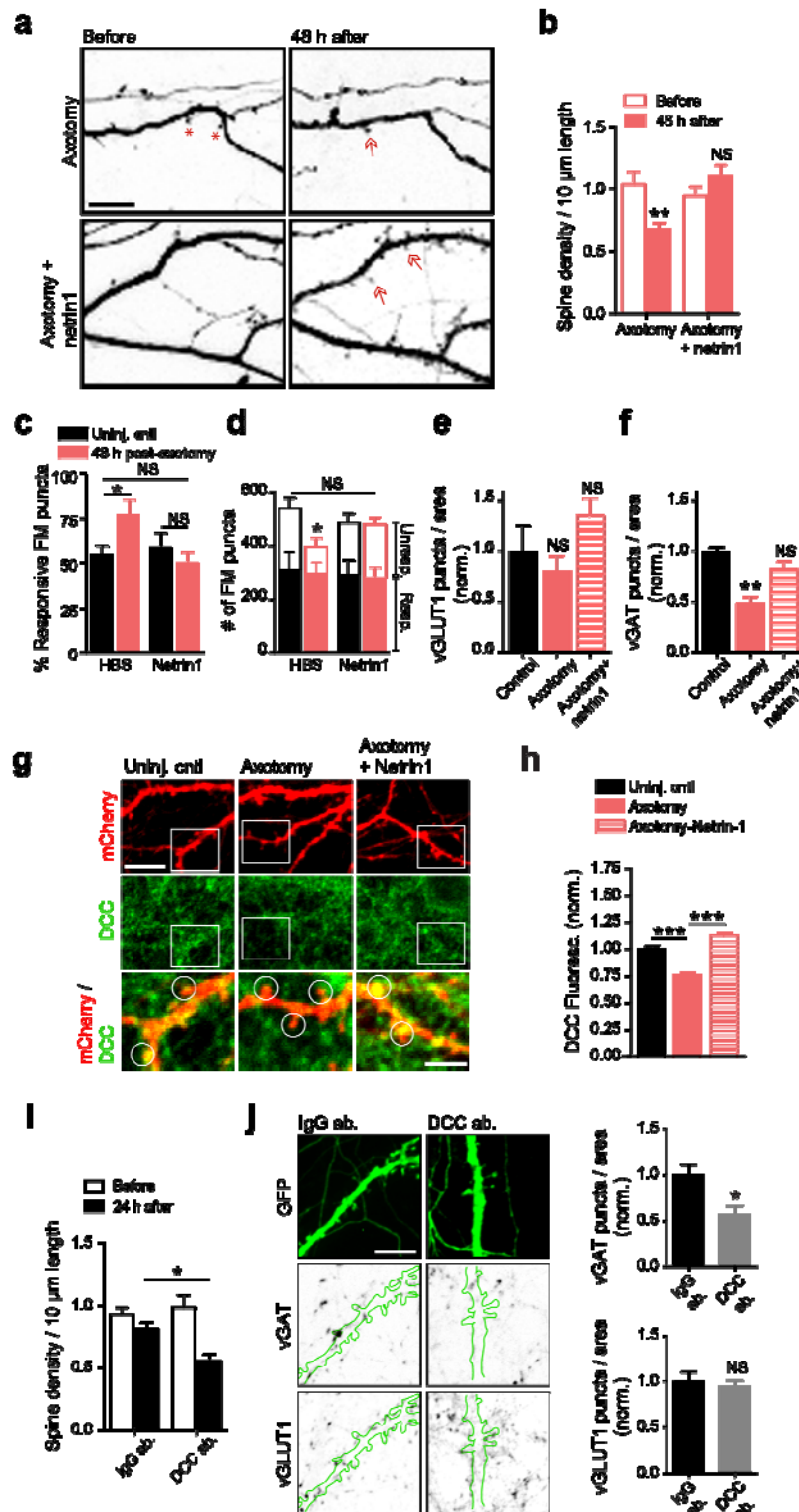


Figure 8: Exogenous netrin-1 rescues post and presynaptic changes following distal axotomy. (a) Representative images of dendritic segments within the somatodendritic

1006 compartment before and 48 h after axotomy treated with either vehicle (HBS) or netrin-1
1007 beginning at 40 h post-axotomy. Arrows indicate formation of new spines. Scale bars, 10
1008 μm . **(b)** Quantification of spine density before and 48 h after axotomy and in response
1009 to exogenous application of netrin-1. Repeated measure two-way ANOVA, Bonferroni
1010 post hoc test, $** p < 0.01$. Analysis included 20 primary dendrites from 5 live neurons per
1011 condition over two independent experiments. **(c)** The percent of responsive FM puncta
1012 (unloaded puncta) 48 h post-axotomy in cultures treated with vehicle (HBS) or netrin-1.
1013 Two-tailed t-test, $*p < 0.05$. **(d)** Average number of responsive and unresponsive FM
1014 puncta per field 48 h post-axotomy in cultures treated with vehicle (HBS) or netrin-1. (c-
1015 d) Approximately 400 puncta were analyzed per chamber from 7 individual chambers for
1016 each condition. Data shown was from two independent experiment and a similar trend
1017 was observed in each independent experiment. One-way ANOVA, Bonferroni post hoc
1018 test, $*p < 0.05$. Noticeably, injury increased the fraction of responsive FM puncta and
1019 exogenous application of netrin-1 normalized the fraction to levels found in untreated
1020 uninjured controls. **(e)** Density vGLUT1 and **(f)** vGAT puncta colocalizing within the
1021 fluorescently labeled somatodendritic regions retrograde labeled with rabies mCherry
1022 virus following vehicle (HBS) and exogenous netrin-1 application, normalized to vehicle
1023 controls. N= 4 individual neurons were analyzed per condition. One-way ANOVA,
1024 Bonferroni post hoc test, $**p < 0.01$. **(g)** Representative images of fixed dendritic
1025 segments, retrograde labeled with rabies mCherry virus and immunostained with DCC
1026 antibody following exogenous netrin-1 treatment. Regions of interest (ROI's; white
1027 circles) show synaptic DCC levels at 48 h post-axotomy. Scale bar, 10 μm . **(h)**
1028 Quantification of DCC fluorescence intensity at 48 h post-axotomy and in response to

1029 exogenous application of netrin-1 (control, n=185 ROIs; axotomy, n=165 ROIs; axotomy
1030 + netrin-1, n=100 ROIs). At least 4 individual chambers were analyzed per condition
1031 from two independent experiments. The same trend was observed in each independent
1032 experiment. Two-way ANOVA, Bonferroni post hoc test, *** $p < 0.001$. (i)
1033 Quantification of spine density following 24 h application of either control antibody (IgG
1034 ab.) or DCC function blocking antibody (DCC ab.). Repeated measure two-way
1035 ANOVA, Bonferroni post hoc test, * $p < 0.05$. Analysis performed on 20 primary
1036 dendrites from 5 live neurons per condition over two independent experiments. (j)
1037 Representative images of fixed dendritic segments, retrogradely labeled with G-deleted
1038 rabies-mCherry virus and immunostained with vGAT (inverted fluorescence) and
1039 vGLUT1 (inverted fluorescence) antibodies following 24 h application of either control
1040 antibody (IgG ab) or DCC function blocking antibody (DCC ab). Scale bar, 10 μ m.
1041 Density of vGAT and vGLUT1 puncta colocalizing eGFP-filled cell area following 24 h
1042 application of either control antibody (IgG ab.) or DCC function blocking antibody (DCC
1043 ab.), normalized to vehicle (HBS) controls. N= 9 individual field per condition. The same
1044 trend was observed in each of the two independent experiments. Unpaired two-tailed t-
1045 test, * $p < 0.05$. Error bars, SEM.

1046

1047 **Supplemental figures and tables:**

1048 **Figure supplement 1:** Distal axotomy of pyramidal neurons induces dissolution of Nissl
1049 substance without affecting cell viability.

1050 **Figure supplement 2:** Dendrites retract, show fewer branch points and spines 24 h post-
1051 axotomy compared to uninjured controls.

1052 **Figure supplement 3:** FM puncta highly colocalizes with synapsin1 immunolabeling.

1053 **Figure supplement 4:** FM unloading curves from somatodendritic compartments of
1054 microfluidic chambers without rabies virus infection and control conditions

1055 **Figure supplement 5:** RNA quality assessment and verification of microarray quality
1056 controls

1057 **Figure supplement 6:** Fluorescence micrograph of a dually innervated dendritic spine
1058 receiving both excitatory and inhibitory inputs.

1059 **Table supplement 1:** Membrane properties of uninjured controls vs. axotomized neurons
1060 48 h post-axotomy

1061 **Table supplement 2:** List of transcripts that were significantly changed 24 h after injury.

1062 **Table supplement 3:** Cell-cell adhesion transcripts changed 24 h after injury ($p < 0.1$)
1063