

α -lipoic acid has the potential to normalize copper metabolism, which is dysregulated in Alzheimer's disease

Kristel Metsla¹, Sigrid Kirss¹, Katrina Laks¹, Gertrud Sildnik¹, Mari Palgi¹, Teele Palumaa^{2,3},
Vello Tõugu¹, Peep Palumaa^{1*}

¹Department of Chemistry and Biotechnology, Tallinn University of Technology

Akadeemia tee 15, 12618 Tallinn, Estonia

²Nuffield Department of Clinical Neurosciences, University of Oxford, Oxford, United
Kingdom

³East Tallinn Central Hospital Eye Clinic, Ravi 18, 10138 Tallinn, Estonia

* Corresponding author: Department of Chemistry and Biotechnology, Tallinn University of

Technology, Akadeemia tee 15, 12618 Tallinn, Estonia Tel.: +372 6204410; e-mail:

peep.palumaa@ttu.ee

Major classification: Biological sciences

Minor classification: Neuroscience

Keywords: Alzheimer's disease, copper metabolism, metalloneurochemistry, α -lipoic acid

Abstract

Alzheimer's disease (AD) is an age-dependent progressive neurodegenerative disorder and the most common cause of dementia. The treatment and prevention of AD present immense yet unmet needs. One of the hallmarks of AD is the formation of extracellular amyloid plaques in the brain, composed of amyloid-beta ($A\beta$) peptides. Multiple amyloid-targeting drug candidates have recently failed in clinical trials, which creates the necessity to focus also on alternative therapeutic strategies. One factor contributing to the development of AD is dysregulated copper metabolism, reflected in the intracellular copper deficit and excess extracellular copper levels. In the current study, we follow the widely accepted hypothesis that the normalization of copper metabolism leads to the prevention or slowing of the disease and searched for new copper-regulating ligands. We demonstrate that the natural intracellular copper chelator, α -lipoic acid (LA) translocates copper from extracellular to intracellular space in a SH-SY5Y-based neuronal cell model, and is thus suitable to alleviate the intracellular copper deficit characteristic of AD neurons. Furthermore, we show that supplementation with LA protects the *Drosophila melanogaster* model of AD from developing AD phenotype, reflecting in decreased locomotor activity. Collectively, these results provide evidence that LA has the potential to normalize copper metabolism in AD and supports the hypothesis that LA supplementation may serve as a promising cost-effective method for the prevention and/or treatment of AD.

Significance statement

Alzheimer's disease (AD) is a major biomedical concern that requires novel effective prevention and treatment approaches. An early determinant of AD pathology is dysregulated copper metabolism, which initiates the amyloid cascade, induces oxidative stress and impairs the functioning of cellular copper proteins, all contributing to the development of neurodegeneration. We suggest that the natural copper chelator α -lipoic acid (LA) can normalize impaired copper metabolism in AD. We demonstrate that LA promotes the influx of copper into SH-SY5Y cells in a dose-dependent manner. Moreover, we show that LA alleviates the disease phenotype in a *Drosophila melanogaster* model of AD. Together with previously published data, these results support the hypothesis that LA has the potential for the prevention and treatment of AD.

Introduction

Alzheimer's disease (AD) is characterised by the occurrence of amyloid plaques and neurofibrillary tangles in the brain, which results in neurodegeneration and clinical diagnosis of dementia (1). AD is an age-dependent disease affecting approximately 50 million people worldwide and this number is expected to increase dramatically because of the population aging (2). AD is the costliest disease for the developed countries as there is no cure and the patients require long-term support (3-5). It is universally accepted that the prevention and treatment of AD is one of the major current medical problems and the development of effective treatment and prevention strategies will considerably decrease the global healthcare burden (2).

According to the prevalent amyloid cascade hypothesis (6, 7), the formation of amyloid plaques, consisting of amyloid-beta ($A\beta$) peptides, and the consequent appearance of neurofibrillary tangles, composed of aggregated hyperphosphorylated tau proteins ultimately leads to neurodegeneration in AD. Most therapeutic approaches to AD have focused on targeting $A\beta$ and tau, but unfortunately, none of them have been successful in clinical trials so far (8-10). For this reason, there is the need to target also alternative and more upstream events in AD pathology (11, 12).

There is considerable evidence showing that copper metabolism is dysregulated in AD (13, 14), which may trigger the development of AD. Copper is an essential redox cofactor for more than twenty enzymes with crucial roles in cellular energy production (cytochrome c oxidase (CCO)), antioxidative defence (Cu,Zn-superoxide dismutase-1, (Cu,Zn-SOD-1)), oxidative metabolism (lysyl oxidase, tyrosinase, dopamine β -monooxygenase, peptidylglycine α -amidating monooxygenase etc.) and metabolism of iron (ceruloplasmin (CE)). However, "free" or weakly complexed copper ions generate by interaction with oxygen metabolites reactive oxygen species (ROS), including highly toxic hydroxyl radicals (15). This double-faceted nature of copper ions dictates the requirement for their tight control (16, 17). Dysregulation of copper metabolism, such as deficiency, misdistribution, or excessive accumulation is detrimental and leads to various diseases. (18). Classical examples of excessive accumulation and deficiency of copper are Wilson's disease (WD) and Menkes disease (MNK), caused by loss-of-function mutations in copper transporters ATP7B (19) and ATP7A (20), respectively. Importantly WD and MD can be treated by correcting the abnormal copper metabolism by using copper chelators (21) or copper supplements (22), accordingly.

Copper metabolism disturbance in AD is characterized by copper misdistribution. AD is accompanied by substantially elevated levels of copper in extracellular space like blood serum and cerebrospinal fluid (CSF) (23-26) and simultaneous copper deficiency in brain tissue (27), which can be detrimental. Similar changes on a smaller scale also occur during the normal aging process (28, 29). According to such a scenario, dysregulation of copper metabolism is an early event in AD pathology and its normalization might have an effective strategy for the prevention and/or treatment of AD. Attempts to regulate copper metabolism in AD, have so far been unsuccessful. According to our opinion, the failures have been caused by several reasons. Generally, so far the attempts have been largely trial and error cases and were not based on a comprehensive understanding of the copper-binding properties of the ligands in comparison with organismal copper proteins and peculiarities of organismal copper metabolism in norm and AD. Secondly - synthetic Cu(II) chelators (30, 31) have been used, which are known to induce undesirable decoppering of the organism (32-34). Third, application of synthetic copper ionophores such as clioquinol leads in contrary to an abnormal increase of cellular copper (35, 36) which becomes toxic (37).

In the current study, we propose molecular tools to normalize copper metabolism in AD based on the systematical knowledge about the metal-binding properties of potential AD drug candidates, which have the potential to normalize distorted copper metabolism in AD. Our lead compound is α -lipoic acid (LA). Earlier work from our group has shown that the reduced dihydro-LA form has a substantial Cu(I)-binding affinity (38). Its affinity for copper is higher than glutathione (GSH) but lower than intracellular copper chaperones and enzymes (Figure 1) (38, 39). LA acts as Cu(I) chelator only in the intracellular space, where it exists in reduced form and may shift the copper equilibrium from extracellular to intracellular. We tested the potential of LA to regulate the cellular copper metabolism in a manner necessary for the treatment of AD. We demonstrate that supplementation with LA promotes the influx of copper into SH-SY5Y cells in a dose-dependent manner. In addition, by using a *Drosophila melanogaster* model of AD, we show that LA can alleviate the disease phenotype of these mutant flies in a negative geotaxis experiment. These results, together with surplus data from the literature support the hypothesis that normalization of copper homeostasis by LA may be a promising avenue for the prevention and/or treatment of AD.

Results

The effect of LA on the distribution of copper ions in cell culture

To study whether LA can redistribute copper from extracellular to intracellular environment, we used human neuroblastoma cell line SH-SY5Y, which is a widely used cellular model in neuroscience in the non-differentiated and differentiated form (40). In the current study, we differentiated SH-SY5Y cells with retinoic acid (RA) and brain-derived neurotrophic factor (BDNF), which induces neuronal phenotype of cells reflected in the outgrowth of long neurites and formation of neuronal network (41) (Fig 2, A B). Both types of cells were treated with 5-50 μ M LA in the presence of 5 μ M CuCl_2 . The results demonstrate that LA promotes the translocation of copper ions from the extracellular environment into cells in a concentration-dependent manner (Fig. 2, C D). The effect was evident already at a low micromolar concentration of LA and was more pronounced in the case of differentiated SH-SY5Y cells (Fig. 2, C D).

The effect of LA on the phenotype of *Drosophila melanogaster* AD model

We used the overexpression of APP or $\text{A}\beta$ to model AD in flies (reviewed by (42)). For the ectopic overexpression in *Drosophila*, the two-component Gal4-upstream activating sequence (UAS) system is widely exploited (43). We chose the 30Y-Gal4 driver line with specific expression in the *Drosophila* mushroom body previously shown to be capable to affect also the negative geotaxis (44). For the overexpression we used UAS-APP.A β 42.D694N.VTR responder line expressing human $\text{A}\beta$ with an Iowa mutation from familial AD patients, D23N. The offspring of AD flies and Control flies were provided with standard food (food) and food with LA added (food + LA) after hatching. After 7 days of incubation, the Control flies kept on food and food + LA did not display any difference in the climbing score determined by the negative geotaxis experiment (Fig. 3, B). The climbing score of AD flies incubated on food declined compared to Control flies (Fig. 3, B), whereas AD flies kept on food + LA showed a lower decline, indicating that LA protects AD flies from developing AD phenotype. Analysis of male and female flies separately demonstrated that the effect of LA was statistically significant in both sexes (Fig. 3, C).

We also studied the effect of LA on flies that had already developed the AD phenotype. In this experiment, the AD flies were kept on food for 7 days and half of the flies were thereafter

transferred to food + LA for the subsequent 7 days. We found that the supplementation of LA did not affect the results of the negative geotaxis assay in male and female flies (Fig. 3, D) These results suggest that LA is not able to rescue the AD phenotype that has already developed.

Discussion

In this study, we investigated the molecular tools to normalize copper metabolism, which is dysregulated in AD. Quantitative meta-analyses of numerous independent studies conducted on AD patients have revealed that AD is accompanied by substantially elevated copper levels in serum (23-25) as well as in the CSF (26) and simultaneous copper deficiency in the brain tissue (27). The more precise analysis shows that in the serum and CSF of AD patients mainly non-ceruloplasmin (CP)-bound fraction of copper is increased (45, 46) and in AD brain tissues copper levels are substantially (53 – 70%) decreased in multiple brain regions (47).

The molecular and genetic background of distorted copper metabolism has been also extensively studied in the context of AD. Genetically, AD has been associated with certain variants of *ATP7B*, the copper transporter defective in WD (48). Furthermore, it turned out that copper affects several cellular aspects of AD pathology. First, amyloid precursor protein (APP), a central molecule in AD pathology, the proteolysis of which produces A β peptides (49), is a copper-binding protein (50, 51) and its expression (52), oligomeric state (53), cellular localization (54, 55), and proteolysis (56, 57) are copper-regulated. Therefore, the imbalance of copper metabolism may shift the proteolysis of APP towards the amyloidogenic pathway, leading to increased production of A β peptides or more amyloidogenic peptide A β 42, which plays a crucial role in initiating and perpetuating the AD pathologic cascade (7). Second, copper ions bind with relatively high affinity to full-length and truncated A β peptides (58-60), accelerating their aggregation (61, 62). Third, copper ions are enriched in A β fibrils *in vivo* in AD brains (63) as well as *in vitro* (64) and cause oxidative stress, which is neurotoxic and can cause neurodegeneration (65, 66). Listed evidence indicates that normalising copper metabolism provides an attractive avenue for the treatment and prevention of AD.

Because of the connection between copper metabolism and AD, several attempts have been made to treat AD by modifying copper metabolism. Three different strategies, copper supplementation, chelation, and redistribution have all been tested in laboratory experiments and also in clinical trials. Copper supplementation was attempted with copper orotate (67, 68), chelation with D-penicillamine (34) and copper redistribution with clioquinol (CQ, 5-Chloro-8-hydroxy-7-iodoquinoline) and its derivative PBT2 (5,7-dichloro-8-hydroxy-2-[(dimethylamino)methyl]quinoline) (69, 70). However, copper supplementation showed no effect on the progression of AD phenotype over a 12-month treatment period (67). D-penicillamine promoted decoppering, but did not affect the clinical progression of the disease

(34). CQ was also unsuccessful in a clinical trial and has been withdrawn from development due to safety concerns (71, 72). Furthermore, PBT2, although with a favorable safety profile (72), did not reduce amyloid plaques and did not improve the cognitive function of AD patients (73). In addition to clinically tested compounds, numerous other synthetic Cu(II)-binding ligands (30, 31, 74-76), including trientine (triethylene tetramine dihydrochloride) (77), an FDA-approved WD drug, have been proposed for the treatment of AD. Trientine and all other this type of drugs result in a decoppering of the organism, which may further decrease the copper levels in the brain. It is known from MNK that such copper deficiency leads to insufficient metallation of cellular copper proteins and causes neurodegeneration (78). Copper deficiency similar to MNK occurs also in the AD brain and its causative link with AD pathogenesis has been proposed (47). The major clinical neurological feature of MNK is epileptic seizures, which is proposedly linked with deficiency of copper-dependent dopamine β -hydroxylase (79, 80). Studies have shown that patients with AD are also at substantially (6- to 10-fold) increased risk for developing seizures and epilepsy (81). Moreover, epileptiform activity occurs also in AD transgenic mice with neuronal expression of mutant APP and elevated levels of A β (82, 83), which supports the hypothesis of the neuropathological role of copper deficiency in AD.

Therefore, copper-binding ligands, which lead to decoppering are not suitable for the normalization of copper dysmetabolism in AD. Rather, substances with the ability to translocate excessive extracellular copper to the intracellular space in the brain is needed. We aimed to normalize copper metabolism by using Cu(I)-binding ligands, which act only in intracellular space and shift the equilibrium of copper distribution from extracellular to intracellular location. Through thorough knowledge of the Cu(I)-binding properties of cellular copper proteins and Cu(I)-binding ligands, we established that dihydro-LA has substantial Cu(I)-binding affinity owing to its two closely located SH groups (38), which can specifically bind Cu(I) ions into the dihedral complex. SH groups of LA are reduced inside the cell and oxidized to a disulfide bond in the extracellular environment thus enabling selective intracellular Cu(I) binding and shifting of equilibrium of copper distribution towards intracellular space.

LA is a natural ligand with its biochemistry and biological effects extensively studied. LA is synthesized enzymatically in the mitochondrion from octanoic acid (84) and is functioning as a cofactor covalently linked to mitochondrial α -ketoacid dehydrogenases (85), essential in mitochondrial energy metabolism. In addition to endogenous synthesis, LA is also absorbed from dietary sources and elicits a unique set of biochemical activities (84). Thus far, the

biological effects of LA have been explained mainly by its antioxidant action, however, its potential in detoxification of heavy metals like Hg has also been recognized (86).

LA has also been studied in the context of AD and aging. For example, LA improves the memory of aged nontransgenic (NMRI) mice (87) as well as transgenic AD (Tg2576) mice (88). Moreover, supplementation with LA extends the lifespan of *Drosophila melanogaster* (89) and immunosuppressed mice (90). LA has also clinically proven therapeutic value in the treatment of diabetic polyneuropathy (91). Most importantly, LA has been tested in AD clinical trials. A daily dose of 600 mg showed a positive effect by slowing the progression of cognitive impairment in patients with mild AD (43 patients, trial duration 48 months) (92, 93) and in patients with mild to moderate AD with and without insulin resistance (126 patients, trial duration 16 months) (94). Despite these promising results, clinical trials with LA have not been taken forward because of the largely elusive mechanism of LA action. The therapeutic effect of LA in these trials has mainly been attributed to its antioxidative effect, but its metalloregulatory properties have not been considered or studied.

There are numerous benefits of LA over other synthetic compounds in drug development as well as in further therapeutic use. LA has been approved for the treatment of diabetic polyneuropathy (91) and could be repurposed for therapeutic application in AD (95). Known toxicology and pharmacodynamic profiles of repurposed drugs significantly accelerate the drug development process, decrease the related costs, and increase the probability of success. Finally, LA is a natural compound, approved as a food supplement in many countries and it is freely and cheaply available in pharmacies, which makes it accessible and affordable for AD patients worldwide if its beneficial effects and mechanism of action are approved.

In the current study, we demonstrated that supplementation with LA significantly increases the intracellular copper level of SHSY-5Y cells in a dose-dependent manner. An increase of intracellular copper occurred already at 5 μ M concentration of LA and the increase was moderate, which is similar to the decrease of copper level in AD brain tissue (47). The mechanism of LA action in promoting copper influx remains to be established, however, based on available data we suggest that LA acts on copper metabolism through the biochemical mechanism and not through regulation of transcription. Furthermore, by using a *Drosophila melanogaster* transgenic AD model, expressing human A β with an Iowa mutation D23N, we showed that early supplementation with LA prevents the development of AD phenotype in transgenic AD flies in a negative geotaxis experiment. Interestingly, LA cannot alleviate already developed phenotype in AD flies. Although the expression of A β 42 peptide is not

directly connected with copper metabolism, there is evidence that the phenotype of these flies is affected by copper. For example, the phenotype of A β 42 expressing flies is ameliorated through inhibition of high-affinity copper influx transporter Ctr1 orthologues in the fly nervous system (96). In addition, the phenotype of flies expressing A β 42 specifically in their eyes is changed after mutations in copper transporter ATP7 (97) as well as by adding Cu(II) ions to the food (98). Changes in the phenotype induced by copper supplementation are reversed by copper chelators (98), which shows that copper metabolism is distorted in the AD fly model expressing A β 42 peptides and its normalization has a beneficial effect on the phenotype of flies. Therefore, the beneficial effect of LA on AD flies may also be connected with the normalization of copper metabolism, however, it has to be confirmed in follow-up studies.

In conclusion, we propose a mechanism of LA action in AD (Fig. 5), which states that LA can normalize copper distribution between extra and intracellular locations, which inhibits amyloidogenic processing of APP, decoppering of cellular copper proteins and other downstream processes including neurodegeneration. The detailed molecular events remain to be determined, however, our results and the data on the beneficial effects of LA in AD support its applicability primarily for the prevention and inhibiting the development of AD pathology, which is desperately needed. It is estimated that the introduction in 2025 of an agent that delays AD onset by 5 years would decrease the total number of patients with AD by 50% in 2050 (99). LA may prove to be an effective strategy to prevent the development of AD and slow its progression and double-blind clinical experiments are warranted.

Materials and methods

Cell culture experiments

Human SH-SY5Y neuroblastoma cells (ATCC) were grown in Dulbecco's Modified Eagle Medium (DMEM) (Gibco) supplemented with 10% fetal bovine serum (FBS) (Gibco) and 1% penicillin and streptomycin (PEST) (Gibco) at 37 °C in a humidified atmosphere containing 5% CO₂. The culture medium was changed every 2 to 3 days and the cells were split every 5 to 7 days using 0.25% Trypsin-EDTA (Gibco), up to 20 times. Cells were plated with a density of 2×10^5 cells/ml into white clear-bottom 6-well plates (Greiner Bio-One) 2 ml per well for inductively coupled plasma mass spectrometry (ICP-MS) experiments. SH-SY5Y cells were differentiated in cell culture plates, using the following differentiation protocol: cells were pre-differentiated with 10 μ M RA in full medium for 4 days, followed by differentiation with 50 ng/mL BDNF (Alomone Labs) in serum-free medium for 2 days (100). Phase-contrast images of cells were taken using Zeiss Axiovert 200M microscope with 20x objective. For cell count measurement 10 μ l of cell suspension was mixed with an equal volume of trypan blue stain, pipetted into Countess cell counting chamber slide, and inserted into the Countess Automated Cell Counter (Invitrogen). Non-differentiated and differentiated SH-SY5Y cells were treated for 24 h with 5 μ M CuCl₂ (Sigma-Aldrich) in the presence of 5 – 50 μ M LA (Sigma Aldrich).

ICP-MS analysis

Differentiated SH-SY5Y cells were collected from 6-well plate wells into acid-washed 15 ml tubes and centrifuged for 1 min at 10 000 xg to separate the medium from cells. 100 μ l of supernatant was collected into acid-washed Eppendorf tubes to use as a medium sample. Cells were washed twice with 500 μ l PBS (Sigma Aldrich), and a sample of 10 μ l from cell suspension was taken to measure cell count with Countess Automated Cell Counter as previously described. Cells in PBS were centrifuged for 3 min at 10 000 xg to separate cells from PBS. PBS was discarded and the obtained cell samples and collected medium samples were stored at -20 °C until the ICP-MS analysis.

One day before ICP-MS analysis, 100 μ l of 68% HNO₃ was added to 100 μ l of collected cell culture medium and separated cells. Acidified samples were incubated for 24 h at room temperature. For ICP-MS analysis samples were diluted to 3.4% HNO₃ [71, 72]. Ultrapure Milli-Q water with a resistivity of 18.2 M Ω /cm, produced by a Merck Millipore Direct-Q & Direct-Q UV water purification system (Merck KGaA, Darmstadt, Germany), was used for all sample preparations.

ICP-MS analyses for Cu-63 were performed on an Agilent 7800 series ICP-MS instrument (Agilent Technologies, Santa Clara, USA) and Agilent SPS-4 autosampler was used for sample introduction. For instrument control and data acquisition, ICP-MS MassHunter 4.4 software Version C.01.04 from Agilent was used. ICP-MS analysis was performed in peak-hopping mode, 6 points per peak, 100 scans per replicate, 3 replicates per sample, and the instrument was operated under general matrix working mode under the following conditions: RF power 1550 W, nebulizer gas flow 1.05 l/min, the plasma gas flow 15 l/min, nebulizer type: MicroMist. Elements monitored: Sc-45 (internal standard) and Cu-63. The ICP-MS apparatus was calibrated using multielement calibration standard 2A in 2% HNO₃ (Agilent Technologies, USA) containing Ag, Al, As, Ba, Be, Ca, Cd, Co, Cr, Cs, Cu, Fe, Ga, K, Li, Mg, Mn, Na, Ni, Pb, Rb, Se, Sr, Tl, U, V, Zn at levels 0, 0.1, 0.5, 1, 5, 10, 25 and 50 ppb with Sc-45 (ICP-MS internal standard mix 1 ug/mL in 2% HNO₃, Agilent Technologies) as the internal standard for Cu-63.

***Drosophila melanogaster* experiments**

Used stocks, maintenance and husbandry of *Drosophila melanogaster*

The following stocks were used for the experiments: 30Y-Gal4 driver line (a gift from Mark Fortini) (101) and UAS-APP.A β 42.D694N.VTR (Iowa) responder line (Singh, C., Mahoney, M. (2011), Bloomington *Drosophila* Stock Center, BDSC_33779). Fly stocks were maintained at 25 °C (12h:12h L:D cycle; 60–70% RH) on malt-semolina based food prepared from 6,5 g agar, 38 g semolina, 70,5 g malt flour, 17,5 g dry yeast, 5,9 ml nipagin (Tegosept 30%; 30g/100ml 94% EtOH; Dutcher Scientific), and 6,8 ml propionic acid (Sigma) per 1000 ml water. *Drosophila* crosses were performed at 29 °C to get a higher activity of *Gal4-UAS* system. By crossing the two lines, the offspring (AD flies) have A β 42 D23N overexpression driven by 30Y-Gal4 pattern in the fruit fly brain. For controls we used the pure UAS-APP.A β 42.D694N.VTR line inactive in the absence of Gal4.

LA feeding regimen

To study the effect of LA on the locomotor activity of AD flies, dietary supplementation with LA was performed. Briefly, LA was dissolved in 96% EtOH for a 200 mM stock solution and added into the previously described food at a final concentration of 2 mM (food + LA). Control food (food) contained the same amount of EtOH that was used to produce LA-supplemented food. Adult male and female flies were separated and added to LA-food and food within 24 h

after eclosion and aged at 29 °C for 7 days before the experiments. To study the effect of LA on the developed AD phenotype, separated male and female flies were maintained on regular food for 4 or 7 days and transferred to food + LA and food for further 7 days. In all experiments, flies were transferred to fresh food after every 2 days.

Negative geotaxis assay for *Drosophila melanogaster*

Before the test, 7-10 flies of each group were transferred by tapping into empty 15 ml vials, covered with another upside-down vial, and vials were connected with transparent tape. Obtained vials were placed in front of a 20 cm high background that was divided into 10 equal spaces. For the measurement, flies were knocked to the bottom of the vial three times, and photos were taken after 10 seconds. The climbing height of each fly was registered, and an average climbing distance score was calculated.

Statistical analyses

Statistical analyses were performed using GraphPad Prism 8. Data of ICP-MS was analyzed using a one-way analysis of variance (ANOVA) with the posthoc Dunnett's multiple comparison test. The figures display the mean \pm standard error of the mean (SEM). Negative geotaxis scores were averaged per vial (5-20 flies per vial) and the mean score of each vial was treated as an individual replicate for further analysis. Two-way ANOVA with Sidak's multiple comparison correction was used to compare the scores of different experimental groups. Data on graphs are presented as mean \pm SEM and a p value of ≤ 0.05 was considered as statistically significant. Statistical significance of $p \leq 0.05$ is represented as *, $p \leq 0.01$ as **, $p \leq 0.001$ as ***, and $p \leq 0.0001$ as ****.

References

1. Alzheimer A (1906) Über einen eigenartigen schweren Erkrankungsprozeß der Hirnrinde. *Neurologisches Centralblatt* 23:1129-1136.
2. World Alzheimer report 2019. (Alzheimer's Disease International, <https://www.alz.co.uk/research/WorldAlzheimerReport2019.pdf>).
3. Hurd MD, Martorell P, Delavande A, Mullen KJ, & Langa KM (2013) Monetary costs of dementia in the United States. *N Engl J Med* 368(14):1326-1334.
4. Wimo A, *et al.* (2013) The worldwide economic impact of dementia 2010. *Alzheimers Dement* 9(1):1-11.
5. Fact Sheet 2019: Costs of Alzheimer's to Medicare and Medicaid. (Alzheimer's Association, http://act.alz.org/site/DocServer/2012_Costs_Fact_Sheet_version_2.pdf?docID=7161).
6. Hardy JA & Higgins GA (1992) Alzheimer's disease: the amyloid cascade hypothesis. *Science* 256(5054):184-185.
7. Selkoe DJ & Hardy J (2016) The amyloid hypothesis of Alzheimer's disease at 25 years. *EMBO Mol Med* 8(6):595-608.
8. van Dyck CH (2018) Anti-Amyloid-beta Monoclonal Antibodies for Alzheimer's Disease: Pitfalls and Promise. *Biol Psychiatry* 83(4):311-319.
9. Servick K (2019) Another major drug candidate targeting the brain plaques of Alzheimer's disease has failed. What's left? *Science*.
10. Mullard A (2021) Failure of first anti-tau antibody in Alzheimer disease highlights risks of history repeating. *Nature Reviews Drug Discovery* 20:3-5.
11. Cappa SF (2018) The Quest for an Alzheimer Therapy. *Front Neurol* 9:108.
12. Cummings J, Lee G, Ritter A, Sabbagh M, & Zhong K (2019) Alzheimer's disease drug development pipeline: 2019. *Alzheimers Dement (N Y)* 5:272-293.
13. Bagheri S, Squitti R, Haertle T, Siotto M, & Saboury AA (2017) Role of Copper in the Onset of Alzheimer's Disease Compared to Other Metals. *Front Aging Neurosci* 9:446.
14. Squitti R, Salustri C, Rongioletti M, & Siotto M (2017) Commentary: The Case for Abandoning Therapeutic Chelation of Copper Ions in Alzheimer's Disease. *Front Neurol* 8:503.
15. Sies H, Berndt C, & Jones DP (2017) Oxidative Stress. *Annu Rev Biochem* 86:715-748.
16. Gaetke LM, Chow-Johnson HS, & Chow CK (2014) Copper: toxicological relevance and mechanisms. *Arch Toxicol* 88(11):1929-1938.

17. Blockhuys S, *et al.* (2017) Defining the human copper proteome and analysis of its expression variation in cancers. *Metallomics* 9(2):112-123.
18. Balsano C, Porcu C, & Sideri S (2018) Is copper a new target to counteract the progression of chronic diseases? *Metallomics* 10(12):1712-1722.
19. Bull PC, Thomas GR, Rommens JM, Forbes JR, & Cox DW (1993) The Wilson disease gene is a putative copper transporting P-type ATPase similar to the Menkes gene. *Nat Genet* 5(4):327-337.
20. Tanzi RE, *et al.* (1993) The Wilson disease gene is a copper transporting ATPase with homology to the Menkes disease gene. *Nat Genet* 5(4):344-350.
21. Litwin T, Dziezyc K, & Czlonkowska A (2019) Wilson disease-treatment perspectives. *Annals of translational medicine* 7(Suppl 2):S68.
22. Vairo FPE, *et al.* (2019) A systematic review and evidence-based guideline for diagnosis and treatment of Menkes disease. *Molecular genetics and metabolism* 126(1):6-13.
23. Bucossi S, *et al.* (2011) Copper in Alzheimer's disease: a meta-analysis of serum, plasma, and cerebrospinal fluid studies. *J Alzheimers Dis* 24(1):175-185.
24. Ventriglia M, Bucossi S, Panetta V, & Squitti R (2012) Copper in Alzheimer's disease: a meta-analysis of serum, plasma, and cerebrospinal fluid studies. *J Alzheimers Dis* 30(4):981-984.
25. Li DD, Zhang W, Wang ZY, & Zhao P (2017) Serum Copper, Zinc, and Iron Levels in Patients with Alzheimer's Disease: A Meta-Analysis of Case-Control Studies. *Front Aging Neurosci* 9:300.
26. Hozumi I, *et al.* (2011) Patterns of levels of biological metals in CSF differ among neurodegenerative diseases. *J Neurol Sci* 303(1-2):95-99.
27. Schrag M, Mueller C, Oyoyo U, Smith MA, & Kirsch WM (2011) Iron, zinc and copper in the Alzheimer's disease brain: a quantitative meta-analysis. Some insight on the influence of citation bias on scientific opinion. *Prog Neurobiol* 94(3):296-306.
28. Madaric A, Ginter E, & Kadrabova J (1994) Serum copper, zinc and copper/zinc ratio in males: influence of aging. *Physiological research* 43(2):107-111.
29. Bonilla E, *et al.* (1984) Copper distribution in the normal human brain. *Neurochemical research* 9(11):1543-1548.
30. Robert A, Liu Y, Nguyen M, & Meunier B (2015) Regulation of copper and iron homeostasis by metal chelators: a possible chemotherapy for Alzheimer's disease. *Acc Chem Res* 48(5):1332-1339.

31. Liu Y, Nguyen M, Robert A, & Meunier B (2019) Metal Ions in Alzheimer's Disease: A Key Role or Not? *Accounts Chem Res* 52(7):2026-2035.
32. Walshe JM (1982) Treatment of Wilson's disease with trientine (triethylene tetramine) dihydrochloride. *Lancet* 1(8273):643-647.
33. Roberts EA & Schilsky ML (2008) Diagnosis and treatment of Wilson disease: an update. *Hepatology* 47(6):2089-2111.
34. Squitti R, *et al.* (2002) d-penicillamine reduces serum oxidative stress in Alzheimer's disease patients. *Eur J Clin Invest* 32(1):51-59.
35. Treiber C, *et al.* (2004) Clioquinol mediates copper uptake and counteracts copper efflux activities of the amyloid precursor protein of Alzheimer's disease. *Journal of Biological Chemistry* 279(50):51958-51964.
36. White AR, *et al.* (2006) Degradation of the Alzheimer disease amyloid beta-peptide by metal-dependent up-regulation of metalloprotease activity. *J Biol Chem* 281(26):17670-17680.
37. Kawamura K, *et al.* (2014) Superoxide dismutase as a target of clioquinol-induced neurotoxicity. *Biochem Biophys Res Commun* 452(1):181-185.
38. Smirnova J, *et al.* (2018) Copper(I)-binding properties of de-coppering drugs for the treatment of Wilson disease. alpha-Lipoic acid as a potential anti-copper agent. *Sci Rep* 8(1):1463.
39. Banci L, *et al.* (2010) Affinity gradients drive copper to cellular destinations. *Nature* 465(7298):645-648.
40. Agholme L, Lindstrom T, Kagedal K, Marcusson J, & Hallbeck M (2010) An in vitro model for neuroscience: differentiation of SH-SY5Y cells into cells with morphological and biochemical characteristics of mature neurons. *J Alzheimers Dis* 20(4):1069-1082.
41. Krishtal J, Bragina O, Metsla K, Palumaa P, & Tõugu V (2017) In situ fibrillizing amyloid-beta 1-42 induces neurite degeneration and apoptosis of differentiated SH-SY5Y cells. *PLoS One* 12(10):e0186636.
42. Jeon Y, Lee JH, Choi B, Won SY, & Cho KS (2020) Genetic Dissection of Alzheimer's Disease Using Drosophila Models. *Int J Mol Sci* 21(3).
43. Brand AH & Perrimon N (1993) Targeted gene expression as a means of altering cell fates and generating dominant phenotypes. *Development* 118(2):401-415.
44. Tamberg L, *et al.* (2020) Daughterless, the Drosophila orthologue of TCF4, is required for associative learning and maintenance of the synaptic proteome. *Disease models & mechanisms* 13(7).

45. Squitti R, *et al.* (2014) Meta-analysis of serum non-ceruloplasmin copper in Alzheimer's disease. *J Alzheimers Dis* 38(4):809-822.
46. Capo CR, *et al.* (2008) Features of ceruloplasmin in the cerebrospinal fluid of Alzheimer's disease patients. *Biometals* 21(3):367-372.
47. Xu J, *et al.* (2017) Evidence for widespread, severe brain copper deficiency in Alzheimer's dementia. *Metallomics* 9(8):1106-1119.
48. Squitti R, Siotto M, Arciello M, & Rossi L (2016) Non-ceruloplasmin bound copper and ATP7B gene variants in Alzheimer's disease. *Metallomics* 8(9):863-873.
49. Muller UC, Deller T, & Korte M (2017) Not just amyloid: physiological functions of the amyloid precursor protein family. *Nat Rev Neurosci* 18(5):281-298.
50. Young TR, Pukala TL, Cappai R, Wedd AG, & Xiao Z (2018) The Human Amyloid Precursor Protein Binds Copper Ions Dominated by a Picomolar-Affinity Site in the Helix-Rich E2 Domain. *Biochemistry* 57(28):4165-4176.
51. Young TR, Wedd AG, & Xiao Z (2018) Evaluation of Cu(i) binding to the E2 domain of the amyloid precursor protein - a lesson in quantification of metal binding to proteins via ligand competition. *Metallomics* 10(1):108-119.
52. Bellingham SA, *et al.* (2004) Copper depletion down-regulates expression of the Alzheimer's disease amyloid-beta precursor protein gene. *J Biol Chem* 279(19):20378-20386.
53. Baumkötter F, *et al.* (2014) Amyloid precursor protein dimerization and synaptogenic function depend on copper binding to the growth factor-like domain. *J Neurosci* 34(33):11159-11172.
54. Acevedo KM, *et al.* (2011) Copper Promotes the Trafficking of the Amyloid Precursor Protein. *Journal of Biological Chemistry* 286(10):8252-8262.
55. Acevedo KM, *et al.* (2014) Phosphorylation of amyloid precursor protein at threonine 668 is essential for its copper-responsive trafficking in SH-SY5Y neuroblastoma cells. *J Biol Chem* 289(16):11007-11019.
56. Borchardt T, *et al.* (1999) Copper inhibits beta-amyloid production and stimulates the non-amyloidogenic pathway of amyloid-precursor-protein secretion. *Biochem J* 344 Pt 2:461-467.
57. Angeletti B, *et al.* (2005) BACE1 cytoplasmic domain interacts with the copper chaperone for superoxide dismutase-1 and binds copper. *J Biol Chem* 280(18):17930-17937.
58. Tõugu V, Karafin A, & Palumaa P (2008) Binding of zinc(II) and copper(II) to the full-length Alzheimer's amyloid-beta peptide. *J Neurochem* 104(5):1249-1259.

59. Alies B, *et al.* (2013) Cu(II) affinity for the Alzheimer's peptide: tyrosine fluorescence studies revisited. *Anal Chem* 85(3):1501-1508.
60. Borghesani V, Alies B, & Hureau C (2018) Cu-II Binding to Various Forms of Amyloid-beta Peptides: Are They Friends or Foes? *Eur J Inorg Chem* (1):7-15.
61. Tōugu V, *et al.* (2009) Zn(II)- and Cu(II)-induced non-fibrillar aggregates of amyloid-beta (1-42) peptide are transformed to amyloid fibrils, both spontaneously and under the influence of metal chelators. *J Neurochem* 110(6):1784-1795.
62. Faller P, Hureau C, & Berthoumieu O (2013) Role of metal ions in the self-assembly of the Alzheimer's amyloid-beta peptide. *Inorg Chem* 52(21):12193-12206.
63. Miller LM, *et al.* (2006) Synchrotron-based infrared and X-ray imaging shows focalized accumulation of Cu and Zn co-localized with beta-amyloid deposits in Alzheimer's disease. *J Struct Biol* 155(1):30-37.
64. Jiang D, *et al.* (2013) The elevated copper binding strength of amyloid-beta aggregates allows the sequestration of copper from albumin: a pathway to accumulation of copper in senile plaques. *Biochemistry* 52(3):547-556.
65. Guilloreau L, Combalbert S, Sournia-Saquet A, Mazarguil H, & Faller P (2007) Redox chemistry of copper-amyloid-beta: the generation of hydroxyl radical in the presence of ascorbate is linked to redox-potentials and aggregation state. *Chembiochem* 8(11):1317-1325.
66. Cheignon C, *et al.* (2018) Oxidative stress and the amyloid beta peptide in Alzheimer's disease. *Redox Biol* 14:450-464.
67. Kessler H, *et al.* (2008) Intake of copper has no effect on cognition in patients with mild Alzheimer's disease: a pilot phase 2 clinical trial. *J Neural Transm (Vienna)* 115(8):1181-1187.
68. Kessler H, *et al.* (2008) Effect of copper intake on CSF parameters in patients with mild Alzheimer's disease: a pilot phase 2 clinical trial. *J Neural Transm (Vienna)* 115(12):1651-1659.
69. Barnham KJ, Masters CL, & Bush AI (2004) Neurodegenerative diseases and oxidative stress. *Nat Rev Drug Discov* 3(3):205-214.
70. Bush AI (2008) Drug development based on the metals hypothesis of Alzheimer's disease. *J Alzheimers Dis* 15(2):223-240.
71. Jenagaratnam L & McShane R (2006) Clioquinol for the treatment of Alzheimer's Disease. *Cochrane Database Syst Rev* (1):CD005380.
72. Sampson EL, Jenagaratnam L, & McShane R (2014) Metal protein attenuating compounds for the treatment of Alzheimer's dementia. *Cochrane Database Syst Rev* (2):CD005380.

73. Newswire CP (Mar 31, 2014) Prana Biotechnology announces preliminary results of Phase 2 IMAGINE trial of PBT2 in Alzheimer's disease.
74. Dedeoglu A, *et al.* (2004) Preliminary studies of a novel bifunctional metal chelator targeting Alzheimer's amyloidogenesis. *Exp Gerontol* 39(11-12):1641-1649.
75. Rodriguez-Rodriguez C, *et al.* (2009) Design, selection, and characterization of thioflavin-based intercalation compounds with metal chelating properties for application in Alzheimer's disease. *J Am Chem Soc* 131(4):1436-1451.
76. Choi JS, Braymer JJ, Nanga RP, Ramamoorthy A, & Lim MH (2010) Design of small molecules that target metal-A β species and regulate metal-induced A β aggregation and neurotoxicity. *Proc Natl Acad Sci U S A* 107(51):21990-21995.
77. Wang CY, *et al.* (2013) Trientine reduces BACE1 activity and mitigates amyloidosis via the AGE/RAGE/NF-kappaB pathway in a transgenic mouse model of Alzheimer's disease. *Antioxid Redox Signal* 19(17):2024-2039.
78. Tümer Z & Moller LB (2010) Menkes disease. *Eur J Hum Genet* 18(5):511-518.
79. Prasad AN, Levin S, Rupar CA, & Prasad C (2011) Menkes disease and infantile epilepsy. *Brain Dev* 33(10):866-876.
80. Kaler SG & Holmes CS (2013) Catecholamine metabolites affected by the copper-dependent enzyme dopamine-beta-hydroxylase provide sensitive biomarkers for early diagnosis of menkes disease and viral-mediated ATP7A gene therapy. *Adv Pharmacol* 68:223-233.
81. Pandis D & Scarmeas N (2012) Seizures in Alzheimer disease: clinical and epidemiological data. *Epilepsy Curr* 12(5):184-187.
82. Harris JA, *et al.* (2010) Transsynaptic progression of amyloid-beta-induced neuronal dysfunction within the entorhinal-hippocampal network. *Neuron* 68(3):428-441.
83. Vogt DL, *et al.* (2011) Abnormal neuronal networks and seizure susceptibility in mice overexpressing the APP intracellular domain. *Neurobiol Aging* 32(9):1725-1729.
84. Shay KP, Moreau RF, Smith EJ, Smith AR, & Hagen TM (2009) Alpha-lipoic acid as a dietary supplement: molecular mechanisms and therapeutic potential. *Biochim Biophys Acta* 1790(10):1149-1160.
85. Tymoczko JLB, J.M.; Stryer, L. (2013) *Biochemistry. A short course* (W. H. Freeman and Company, New York) p 710.
86. Bjorklund G, Aaseth J, Crisponi G, Rahman MM, & Chirumbolo S (2019) Insights on alpha lipoic and dihydrolipoic acids as promising scavengers of oxidative stress and possible chelators in mercury toxicology. *J Inorg Biochem* 195:111-119.

87. Stoll S, Hartmann H, Cohen SA, & Muller WE (1993) The potent free radical scavenger alpha-lipoic acid improves memory in aged mice: putative relationship to NMDA receptor deficits. *Pharmacol Biochem Behav* 46(4):799-805.
88. Quinn JF, *et al.* (2007) Chronic dietary alpha-lipoic acid reduces deficits in hippocampal memory of aged Tg2576 mice. *Neurobiology of Aging* 28(2):213-225.
89. Bauer JH, Goupil S, Garber GB, & Helfand SL (2004) An accelerated assay for the identification of lifespan-extending interventions in *Drosophila melanogaster*. *Proc Natl Acad Sci U S A* 101(35):12980-12985.
90. Freisleben HJ, Neeb A, Lehr F, & Ackermann H (1997) Influence of selegiline and lipoic acid on the life expectancy of immunosuppressed mice. *Arzneimittelforschung* 47(6):776-780.
91. Mijnhout GS, Kollen BJ, Alkhalaf A, Kleefstra N, & Bilo HJ (2012) Alpha lipoic Acid for symptomatic peripheral neuropathy in patients with diabetes: a meta-analysis of randomized controlled trials. *Int J Endocrinol* 2012:456279.
92. Hager K, Kenklies M, McAfoose J, Engel J, & Munch G (2007) Alpha-lipoic acid as a new treatment option for Alzheimer's disease--a 48 months follow-up analysis. *J Neural Transm Suppl* (72):189-193.
93. Maczurek A, *et al.* (2008) Lipoic acid as an anti-inflammatory and neuroprotective treatment for Alzheimer's disease. *Adv Drug Deliv Rev.*
94. Fava A, *et al.* (2013) The Effect of Lipoic Acid Therapy on Cognitive Functioning in Patients with Alzheimer's Disease. *J Neurodegener Dis* 2013:454253.
95. Appleby BS, Nacopoulos D, Milano N, Zhong K, & Cummings JL (2013) A review: treatment of Alzheimer's disease discovered in repurposed agents. *Dement Geriatr Cogn Disord* 35(1-2):1-22.
96. Lang M, *et al.* (2013) Inhibition of human high-affinity copper importer Ctr1 orthologous in the nervous system of *Drosophila* ameliorates Abeta42-induced Alzheimer's disease-like symptoms. *Neurobiol Aging* 34(11):2604-2612.
97. Cao W, *et al.* (2008) Identification of novel genes that modify phenotypes induced by Alzheimer's beta-amyloid overexpression in *Drosophila*. *Genetics* 178(3):1457-1471.
98. Hua HQ, *et al.* (2011) Toxicity of Alzheimer's disease-associated A beta peptide is ameliorated in a *Drosophila* model by tight control of zinc and copper availability. *Biol Chem* 392(10):919-926.

99. Cummings J, Ritter A, & Zhong K (2018) Clinical trials for disease-modifying therapies in Alzheimer's disease: A primer, lessons learned, and a blueprint for the future. *Journal of Alzheimer's Disease* 64(s1):S3-S22.
100. Krishtal J, Metsla K, Bragina O, Tougu V, & Palumaa P (2019) Toxicity of Amyloid-beta Peptides Varies Depending on Differentiation Route of SH-SY5Y Cells. *J Alzheimers Dis* 71(3):879-887.
101. Yang MY, Armstrong JD, Vilinsky I, Strausfeld NJ, & Kaiser K (1995) Subdivision of the *Drosophila* mushroom bodies by enhancer-trap expression patterns. *Neuron* 15(1):45-54.

Figures

Cu(I)-BINDING AFFINITIES

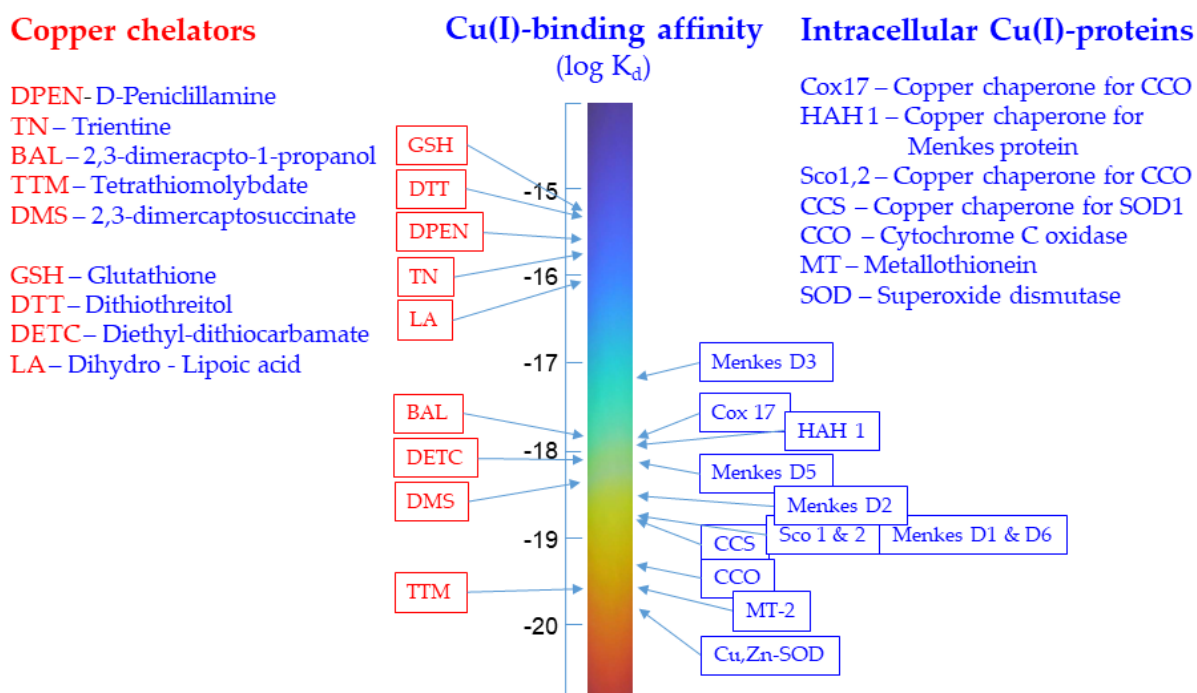


Figure 1. Copper(I)-binding affinities of intracellular Cu(I) proteins and copper chelators according to (39) and (38).

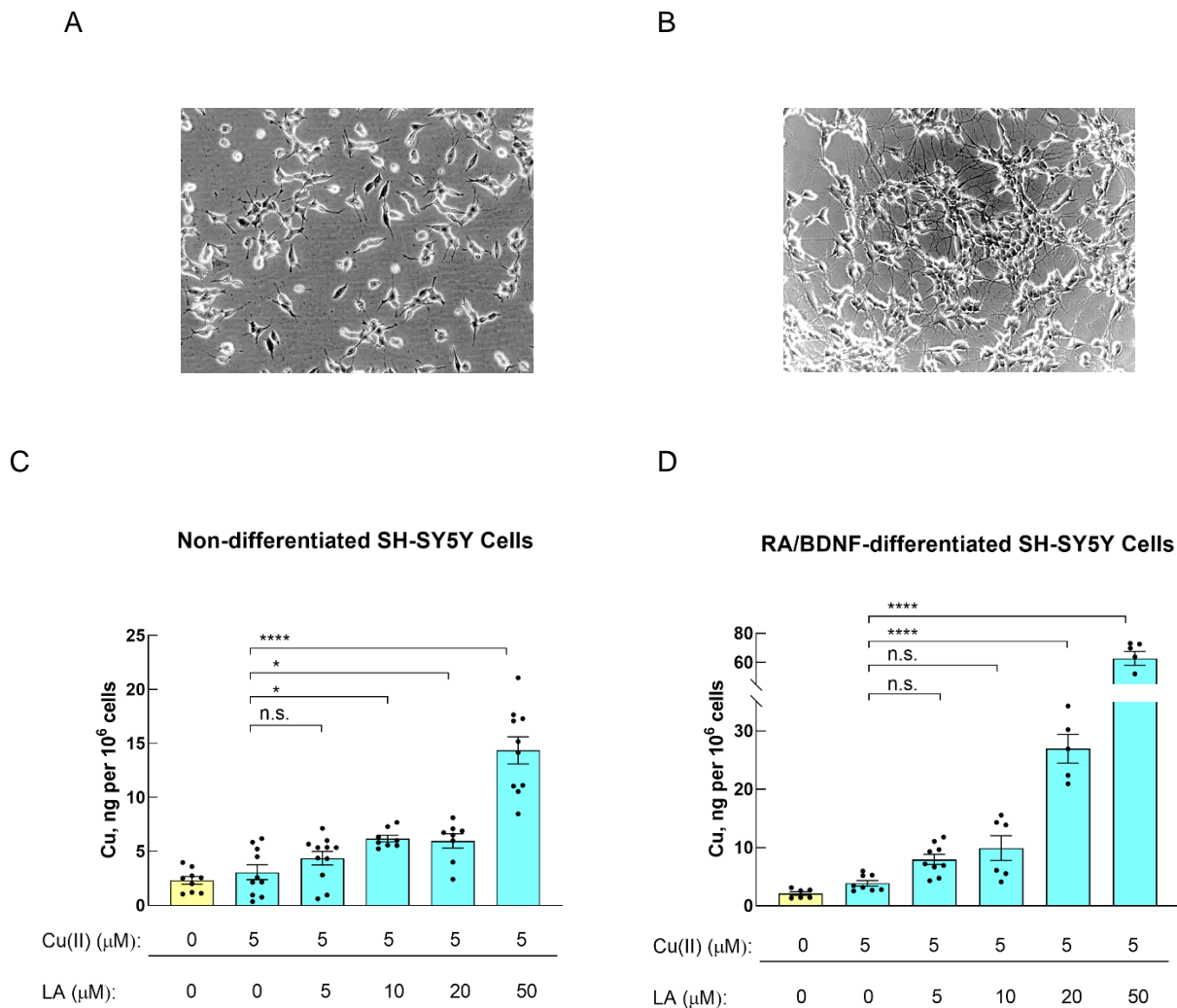
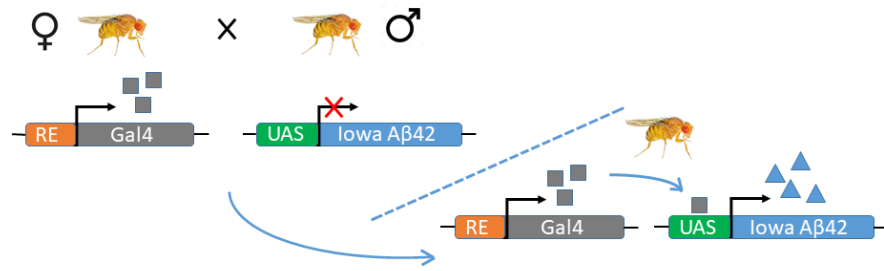
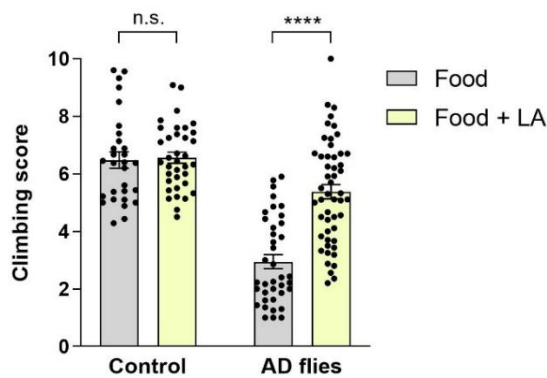


Figure 2. The effect of LA on the cellular copper content in SH-SY5Y cells. Phase contrast images showing the morphology of non-differentiated (A) and differentiated SH-SY5Y cells (B). Non-differentiated (C) and RA/BDNF-differentiated (D) SH-SY5Y cells were treated for 24 h with 0-50 μ M LA in the presence of 5 μ M CuCl_2 ; concentration of Cu, per 10^6 cells was determined by ICP MS. The columns display the mean \pm SEM; n=8-11. One-way ANOVA followed by a Dunnett's multiple comparisons test at the 0.05 level was used for statistical analysis. Main effect of treatment **** $p < 0.0001$; * $p < 0.05$; n.s., not significant.

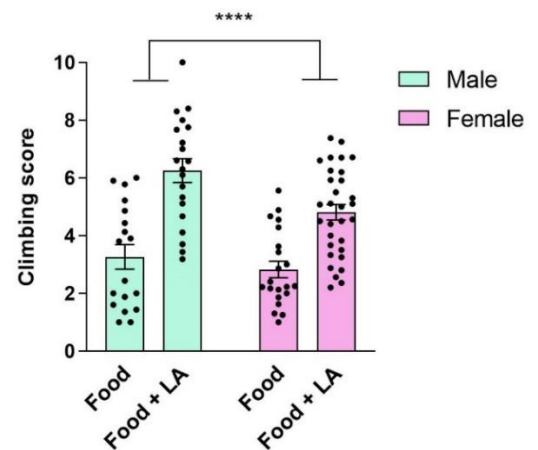
A



B



C



D

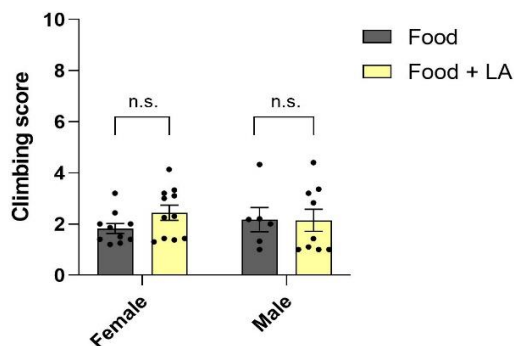


Figure 3. Effect of LA on the climbing ability of Control vs AD flies. (A) The crossing of RE (regulatory element 30Y) driven Gal4 flies with flies containing UAS in tandem with Iowa Aβ42 gene (A). AD flies were incubated for 7 days on food or food + LA before a negative geotaxis assay (B, C). AD flies were incubated on food for 7 days and food or food + LA for the next 7 days (D). The climbing score displays the mean ± SEM of climbing distance for n=32-57 in groups, each consisting of 7-10 flies. Two-way ANOVA with Sidak's multiple comparison correction was used to compare the scores of different experimental groups. Main effect of treatment **** p < 0.0001; n.s., not significant.

KEY EVENTS IN ALZHEIMER'S DISEASE PATHOLOGY

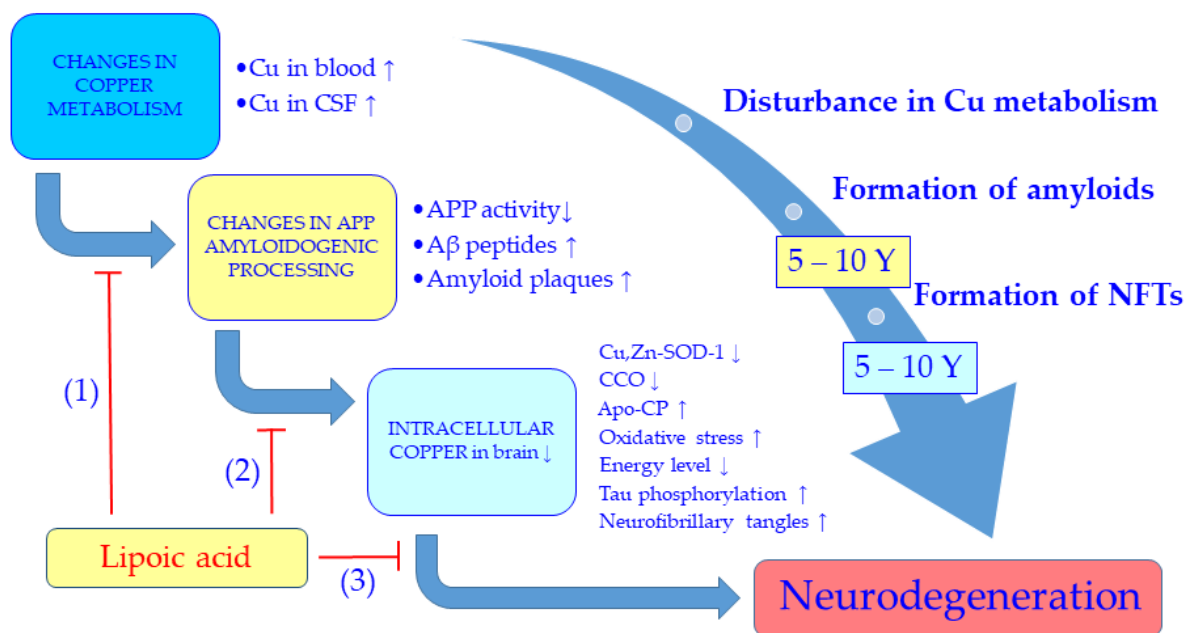


Figure 4. Key events in Alzheimer's disease pathology. According to our suggestion LA can correct extra- and intracellular copper metabolism (1), suppress amyloid cascade (2) and neurodegeneration (3) characteristic of AD.

Abbreviations

A β - amyloid-beta peptide

AD – Alzheimer's disease

APP – amyloid precursor protein

BDNF – brain-derived neurotrophic factor

CCO - cytochrome c oxidase

CE – ceruloplasmin

CQ – clioquinol, 5-Chloro-8-hydroxy-7-iodoquinoline

CSF – cerebrospinal fluid

LA – α -lipoic acid

MNK – Menkes disease

PBT2 - 5,7-dichloro-8-hydroxy-2-[(dimethylamino)methyl]quinoline

RA – retinoic acid

SOD – superoxide dismutase

UAS – upstream activating sequence

WD – Wilson disease

Acknowledgments

This work was supported by the Tallinn University of Technology and by the Estonian Research Council grant to PP (PRG 1289).

Author Contributions

Idea, P.P., Conceptualization, P.P., V.T., T.P., and M.P.; Methodology, P.P., K.M., S. K., M. P., K.L., and V.T.; Investigation, K.M., S.K., K.L., and G.S.; Formal analysis, K.M., S.K., K.L., G.S. and T.P.; Writing – Original Draft, P.P.; Writing – Review & Editing, all Authors; Funding Acquisition, P.P.; Resources, P.P. and M.P.

Declaration of Interests

The authors declare no competing interests.