Article

Deciphering the Potential Neuroprotective Effects of Luteolin against Aβ₁₋₄₂-Induced Alzheimer’s Disease

Sareer Ahmad †, Myeung Hoon Jo ‡, Muhammad Ikram †, Amjad Khan and Myeong Ok Kim *

Division of Life Science and Applied Life Science (BK21 Four), College of Natural Sciences, Gyeongsang National University, Jinju 52828, Korea; Sareer_50@gnu.ac.kr (S.A.); audgns1217@gnu.ac.kr (M.H.J.); qazafi417@gmail.com (M.I.); Amjadkhan1901@gmail.com (A.K.)
* Correspondence: mokim@gnu.ac.kr; Tel.: +82-55-772-1345
† These authors equally contributed to this paper.

Abstract: The current study was undertaken to unveil the protective effects of Luteolin, a natural flavonoid, against amyloid-beta (Aβ₁₋₄₂)-induced neuroinflammation, amyloidogenesis, and synaptic dysfunction in mice. For the development of an AD mouse model, amyloid-beta (Aβ₁₋₄₂, 5 μL/5 min/mouse) oligomers were injected intracerebroventricularly (i.c.v.) into mice’s brain by using a stereotaxic frame. After that, the mice were treated with Luteolin for two weeks at a dose of 80 mg/kg/day. To monitor the biochemical changes, we conducted western blotting and immunofluorescence analysis. According to our findings, the infusion of amyloid-beta activated c-Jun N-terminal kinases (p-JNK), p38 mitogen-activated protein kinases, glial fibrillary acidic protein (GFAP), and ionized calcium adaptor molecule 1 (Iba-1) in the cortex and hippocampus of the experimental mice; these changes were significantly inhibited in Aβ₁₋₄₂ + Luteolin-treated mice. Likewise, we also checked the expression of inflammatory markers, such as p-nuclear factor-kB p65 (p-NF-kB p65), tissue necrosis factor (TNF-α), and Interleukin1-β (IL-1β), in Aβ₁₋₄₂-injected mice brain, which was attenuated in Aβ₁₋₄₂ + Luteolin-treated mice brains. Further, we investigated the expression of pro- and anti-apoptotic cell death markers such as Bax, Bcl-2, Caspase-3, and Cox-2, which was significantly reduced in Aβ₁₋₄₂ + Luteolin-treated mice brains compared to the brains of the Aβ-injected group. The results also indicated that with the administration of Aβ₁₋₄₂, the expression levels of β-site amyloid precursor protein cleaving enzyme (BACE-1) and amyloid-beta (Aβ₁₋₄₂) were significantly enhanced, while they were reduced in Aβ₁₋₄₂ + Luteolin-treated mice. We also checked the expression of synaptic markers such as PSD-95 and SNAP-25, which was significantly enhanced in Aβ₁₋₄₂ + Luteolin-treated mice. To unveil the underlying factors responsible for the protective effects of Luteolin against AD, we used a specific JNK inhibitor, which suggested that Luteolin reduced Aβ-associated neuroinflammation and neurodegeneration via inhibition of JNK. Collectively, our results indicate that Luteolin could serve as a novel therapeutic agent against AD-like pathological changes in mice.

Keywords: amyloid-beta; Alzheimer’s disease; luteolin; neurodegeneration; neuroprotection

1. Introduction

Alzheimer’s disease (AD) is a life-threatening disease, characterized by the loss of memory and cognitive functions [1,2]. AD and other neurodegenerative diseases pose an enormous and growing burden on our societies and health-related economies. According to the World Health Organization (WHO), deaths from neurological diseases have risen by 114% over the last 20 years, reaching 1.2 million in 2010. The significant rise in these cases is largely driven by several neurodegenerative diseases such as AD and Parkinson’s disease (PD) and due to an increase in the aging population [3]. The main pathological features of AD-associated neurodegeneration and cognitive dysfunction are elevated oxidative stress, neuroinflammation, and neuronal apoptotic cell death [2,4].
Neuroinflammation is manifested through several events, such as activation of the innate immune system and of microglial and astrocytic cells, which induce the release of inflammatory mediators and cytokines [5,6]. Following tissue damage, the activation of pattern recognition receptors on the surface of immune cells triggers the activation of mitogen-activated protein kinases (MAPK), such as p38 and Jun N-terminal kinase (JNK). In close association with nuclear NF-κB, MAPK activation induces the expression of multiple target genes that monitor the inflammatory process, such as the activation of the tissue necrosis factor and the release of the interleukins and other inflammatory cytokines [7,8]. The inflammatory cytokines induce mitochondrial apoptosis, manifested by the release of the cytochrome C, the suppression of the B cell lymphoma 2 (Bcl-2), the activation of caspases [9,10]. It plays a significant role in neuronal apoptosis in neurodegenerative diseases by integrating death signals through Bcl-2/Bax and coordinates caspases through the release of Cytochrome C. Bcl-2 modulates the translocation of the pro-apoptotic protein Bax from the cytosol to the mitochondrial membrane, where it enhances mitochondrial membrane permeability and releases Cyt C, which further promotes pro-caspases activation [11].

A cardinal feature of AD is the deposition of amyloid-beta, which is produced by the activity of beta-amyloid cleaving enzyme-1 (BACE), as certain studies have shown that targeted inhibition of BACE-1 regulates the expression of amyloid-beta, thereby reducing its burden [12,13]. Activation of inflammatory mediators, release of inflammatory cytokines, accumulation of amyloid-beta, and mitochondrial dysfunction may lead to synaptic dysfunction and induce memory and cognitive dysfunction [14,15]. Although the socio-economic burden of AD-associated complications is quite alarming, and extensive research has been focused on these diseases, still there is no proper treatment available for AD [16].

Not surprisingly, the development of strategies to curb this frightening surge is a high priority for life science researchers. Recently, several compounds have been identified against AD-associated complications, which are suggested to counteract the complications of AD by reducing oxidative stress, the activation of inflammatory mediators, and neurodegeneration. Among the several natural compounds, Luteolin has drawn significant attention due to its availability and efficacy. It is a flavonoid that exists in green pepper leaves and seeds, celery, chamomile tea, and several other medicinal herbs [17]. Luteolin has shown significant anti-apoptotic [18], anti-oxidant [19], and anti-inflammatory activities [20,21]. Other studies have also suggested that Luteolin possesses neuroprotective effects in animal and cellular models of neurodegeneration [20,22].

Here, we hypothesize that Luteolin may counteract AD-associated neurodegeneration by regulating MAP kinases, specifically p-JNK and p38. Moreover, we checked the effects of Luteolin against the activation of microglial cells, by determining Iba-1 and GFAP levels. Astrocytes are cells with several functions and structures and are ubiquitously located in the central nervous system (CNS). Astrocytes have several physiological functions, including secretion of nutrients, maintenance of the microenvironment, maintenance of blood–brain barrier permeability [23]. Several studies have extensively suggested the activation of astrocytes in neurodegenerative conditions, and suppression of astrocytes has shown rescuing effects against neurodegeneration [24]. Similar is the case of activated microglia, which consist of neuroimmune cells having the main functions of sensing alterations in their environment, housekeeping activity that promotes neuronal homeostasis and functions, and defense against changes in the environment [25]. In addition, microglia are activated in response to elevated oxidative stress and accumulation of Aβ [26,27]. The specific markers of activated astrocytes and microglia are GFAP (Glial Fibrillary acidic Protein and) and Iba-1 (Ionized calcium-binding adaptor molecule 1). For further analysis of the anti-inflammatory potential of Luteolin, we checked the expression of inflammatory mediators (p-NF-κB (p65), TNF-α, and IL-1β). To analyze the effects of Luteolin on amyloid-beta deposition, we checked the expression of Aβ1–42, BACE-1, and the synaptic markers SNAP-25 and PSD-95. To further confirm the underlying mechanisms responsible for
the protective effects of Luteolin, we used a specific JNK inhibitor (SP600125), which specifically unveiled the role of JNK in the protective effects of Luteolin against AD. We believe that this is the first comprehensive study conducted on the role of Luteolin against AD-related neurodegeneration, using both in vivo and in vitro models. Herein, we present the study design and the proposed neuroprotective pathway activated by Luteolin against $\beta_\text{1-42}$-induced neurodegeneration (Figure 1a,b).

2. Results

2.1. Luteolin Regulates the Expression of p-JNK/P-38, Activated Microglia and Astroglial Cells in $\beta_\text{1-42}$-Injected Mice Brain

To evaluate the effect of Luteolin against $\beta_\text{1-42}$-induced neuroinflammation, we analyzed the expression of p-JNK/p-38, Glial fibrillary acid protein (GFAP), and Ionized calcium-binding adaptor molecule 1 (Iba-1) in the cortex and DG (Dentate Gyrus) region of the hippocampus of the experimental mice, as these structures play a key role in neurodegeneration [28,29]. Our findings showed enhanced phosphorylation of p-JNK and p-38 in $\beta_\text{1-42}$-injected mice brains, compared to saline-injected control mice brains. Interestingly, these markers were significantly reduced in the brains of $\beta_\text{1-42}$ + Luteolin-treated mice. Similarly, we checked the expression of GFAP and Iba-1 in the brains of the experimental
mice and found that in the brains of Aβ1-42-injected mice, the expression of these markers was significantly upregulated, while it was reduced in the brains of Aβ1-42 + Luteolin-treated mice. Further, these results were confirmed through immunofluorescence analysis, which showed increased expression of p-JNK and GFAP in the frontal cortex and DG region of the hippocampus of Aβ1-42-injected mice compared to the control group; interestingly, these markers were significantly reduced in the brains of the Aβ1-42 + Luteolin-treated group (Figure 2).

**Figure 2.** Luteolin reversed the activation of stress kinases and glial cells-mediated neuroinflammation, i.e., p-JNK/p-38/GFAP/Iba-1 in Aβ1-42-treated mice brains. (a) Western blots results of p-JNK/p-38/GFAP/Iba-1 in the frontal cortex and hippocampus of the experimental mice brains. β-Actin was used as a loading control. (b,c) Immunofluorescent co-localization of p-JNK/Iba-1 in the frontal cortex and DG region of the hippocampus in the experimental mice. Magnifications 10×. Scale bar 50 µm. Confocal image analysis was done using ImageJ software. Values are the means ± SEM from three independent experiments. For the statistical analysis, Graph Pad Prism 5 was used, and one-way ANOVA and posthoc multiple comparison tests were employed. * p < 0.05 represents control versus Aβ-treated mice, # p < 0.05 represents Aβ + Luteolin-treated mice.

2.2. Luteolin Diminishes the Expression of Activated p-NF-kB and Other Inflammatory Markers in the Brains of Aβ1-42-Injected Mice

As shown in Figure 2, Luteolin had a protective effect against Aβ1-42-induced activation of JNK, p-38, and glial cells. Here, we performed western blotting and checked the expression of p-NF-kB, TNF-α, and IL-1β in the experimental mice’s brains, as these molecules play a role in neuroinflammation [30,31]. Our results showed enhanced expression of p-NF-kB, TNF-α, and IL-1β in the brains of Aβ1-42-injected mice compared to the those of control mice; interestingly, these markers were significantly reduced in Aβ1-42 + Luteolin-treated mice brains, indicating the anti-inflammatory potential of Luteolin in AD. Furthermore, we performed immunofluorescence analysis, which showed a high expression of p-NF-kB in the cortex and DG region of the hippocampus of Aβ1-42-injected mice compared to the control group. However, these markers were significantly diminished in the brains of the Aβ1-42 + Luteolin-treated group (Figure 3).
2.3. Luteolin Attenuates Aβ1–42-Induced Apoptotic Cell Death in Mice Brain

Previous studies have suggested that Aβ1–42 induced neurodegeneration in part through apoptotic cell death [32,33]. To analyze the effect of Luteolin on Aβ1–42-induced neuronal apoptosis, we performed western blotting which showed enhanced expression of pro-apoptotic markers, i.e., Bax, Caspase-3, and Cox-2, and reduced expression of the anti-apoptotic marker Bcl-2 in Aβ1–42-injected mice brains compared to the brains of control mice. However, the expression of these markers was significantly reversed in the Aβ1–42 + Luteolin-treated group.

These results were further supported by immunofluorescence analysis, which showed increased expression of Caspase-3 in the frontal cortex and Dg region of the hippocampus in Aβ1–42-injected mice, compared to the same brain regions of the normal control group; this expression was significantly reduced in Aβ1–42 + Luteolin-treated mice (Figure 4).
Figure 4. Luteolin suppressed apoptotic cell death in the brains of Aβ1–42-treated mice. (a) Western blots results of the expression of Bax, Bcl2, caspase-3, and Cox-2 in the frontal cortex and hippocampus of the experimental mice. β-Actin was used as a loading control. (b) Immunofluorescence images of Caspase-3 in the frontal cortex and DG region of the hippocampus of the experimental mice. Values are given as means ± SEM for three independent experiments. Magnification $10 \times$. Scale bar 50 µm. For the statistical analysis, Graph Pad Prism 5 software was used, and one-way ANOVA and posthoc multiple comparison tests were employed. * $p < 0.05$ represents control versus Aβ-treated mice, # $p < 0.05$ represents Aβ + Luteolin-treated mice.

2.4. Luteolin Reduces the Accumulation of Amyloid-Beta and Synaptic Dysfunctions in Aβ1–42-Injected Mice Brains

As stated previously, the accumulation of amyloid-beta is a cardinal feature of AD [34–36]; therefore, we checked the expression of amyloid-beta and its inducer, beta-amyloid cleaving enzyme-1 (BACE-1), in the cortex and DG region of the hippocampus of the experimental mice. Through western blotting, our findings showed a significant reduction in the expression of Aβ1–42 and BACE-1 in the brains of Aβ1–42 + Luteolin-treated mice, compared to those of Aβ1–42-induced AD mice. These findings support the notion that Luteolin may reduce the accumulation of amyloid-beta. As a consequence of the accumulation of amyloid-beta, there is a loss of pre-synaptic and post-synaptic protein markers [36,37]. To analyze the effect of Luteolin on Aβ1–42-induced synaptic dysfunction, we checked the expression of PSD-95 and SNAP-25 both in the cortex and in the hippocampus of the experimental mice. We found an enhanced level of these markers in the brains of Aβ1–42 + Luteolin-treated mice, compared to those of the Aβ1–42-treated group.

Further, we performed immunofluorescence analysis and checked the expression of Aβ1–42 and PSD-95 in the Frontal Cortex and DG regions of the hippocampus. According to our findings, the expression of these markers was attenuated in the brains of Aβ1–42-
injected mice compared to those of the normal saline control group. Interestingly, the levels of these markers were improved in the brains of Aβ_{1-42} + Luteolin-treated mice (Figure 5).

**Figure 5.** Luteolin improved the synaptic dysfunction and reduced the accumulation of Aβ in the brains of Aβ_{1-42}-treated mice. (a) Western blot results of Aβ, BACE-1, PSD-95, and SNAP-25 in the cortex and hippocampus of experimental mice. β-actin was used as a loading control. (b,c) Immunofluorescence images of Aβ and PSD-95 in the frontal cortex and DG region of the hippocampus of experimental mice. Values are given from three independent experiments. Magnification 10×. Scale bar 50 µm. For the statistical analysis, Graph Pad Prism 5 software was used, and one-way ANOVA and posthoc multiple comparison tests were employed. *p < 0.05 represents control versus Aβ-treated mice, #p < 0.05 represents Aβ + Luteolin-treated mice.

2.5. Effects of Luteolin on Aβ_{1-42}-Associated Activated MAP Kinases, Inflammatory Mediators, and Apoptotic Factors in Cellular Models of AD

To further confirm the mechanisms responsible for the protective effects of Luteolin against AD-associated neuroinflammation, we conducted in vitro studies. According to our findings, Aβ_{1-42} significantly enhanced the expression of p-JNK, compared to DMSO used as a control. Interestingly, the expression of Aβ_{1-42} was significantly reduced after the administration of Luteolin. To unveil the possible role of JNK in the neuroprotective mechanisms of Luteolin, we used a specific JNK inhibitor (SP600125) in HT22 cells. Our results suggested that, compared to cells treated only with Luteolin, SP600125 in combination with Luteolin significantly regulated the expression of p-JNK, p-NF-kB, TNF-α, Bax, and Bcl-2. In other words, SP600125 potentiated the inhibitory effects of Luteolin on the expression of Aβ-induced inflammatory and apoptotic factors (Figure 6).
Figure 6. Luteolin conferred neuroprotection in a JNK-dependent manner. Western blot results of p-JNK, p-NF-kB, TNFα, Bax, and Bcl-2 in HT22 cells; β-actin was used as a loading control. For the statistical analysis, Graph Pad Prism 5 software was used, and one-way ANOVA and posthoc multiple comparison tests were employed. Significance = 0.05, δ = Significant difference between Aβ-treated cells and the control group, ε = significance difference between Aβ and Aβ + Luteolin groups, α = significance difference between Aβ and Aβ + SP600125, β = significance difference between Aβ and Aβ + Luteolin + SP600125.

3. Discussion

In the present study, we have unveiled the neuroprotective effects of luteolin against amyloid beta-induced neuroinflammation, neurodegeneration, and synaptic dysfunction. According to our findings, Luteolin significantly suppressed the phosphorylation of p-JNK/p-38 and the expression of specific markers of activated microglia and astrocytes, such as Iba-1 and GFAP. We also checked the expression of p-NF-kB, TNF-α, and IL-1β in the brains of Aβ1–42 + Luteolin-treated mice and evaluated the expression of apoptotic markers, amyloidogenesis-related markers, and synaptic proteins. Our collective findings support the notion that Luteolin is a neuroprotective agent against AD-related neuroinflammation, apoptotic cell death, accumulation of amyloid-beta, and synaptic dysfunctions in the brains of Aβ1–42-injected mice. For mechanistic purposes, we used a specific JNK inhibitor (SP600125) in HT22 cells, which suggested that luteolin, in a JNK-dependent manner, reduced Aβ-induced neurodegeneration.

Here, we focused on the main features of AD-associated neurodegeneration, which are neuroinflammation, mitochondrial dysfunction, accumulation of amyloid-beta, and synaptic dysfunction [38]. These inflammatory mediators cause drastic changes in the body physiological, psychological, immune, and biochemical systems, which are greatly dependent on the context, duration, and course of the insult [38]. The activation of the innate immune system and of the adaptive immune system have been widely uncovered in AD-associated neuroinflammation. For that reason, we checked the expression of MAP kinases (p-JNK and p-38) in the experimental mice brains. The findings showed enhanced phosphorylation of these markers in the AD models, which was reduced in Aβ1–42 + Luteolin-treated mice. The enhanced phosphorylation of p-JNK and p-38 was coupled with enhanced expression of astrocytes and microglia, as suggested by the elevated expression of GFAP and Iba-1 in the brains of Aβ1–42-injected mice. The expression of GFAP and Iba-1 was significantly reduced by Luteolin, suggesting that Luteolin, by reducing the expression of MAP kinases, reduced the activation of astrocytes and microglia, as previous studies have highlighted that inhibition of JNK may reduce the activation of microglial cells [39]. Other studies have also suggested that inhibition of JNK may reduce AD-associated neu-
roinflammation by reducing the levels of inflammatory cytokines and microglial cells [40]. As noted from the reduced expression of GFAP and Iba-1, it is clear that Luteolin has regulating effects on activated astrocytes and microglia. Next, we checked other main inflammatory mediators in the experimental mice, in particular, p-NF-kB, TNF-α, and IL-1β. As predicted, the expression of these markers was markedly enhanced in the brains of Aβ1−42-injected mice and was significantly reduced by Luteolin. The enhanced expression of p-NF-kB, TNF-α, and IL-1β was previously observed in AD [5,41]. Interestingly, the regulation of inflammatory cytokines by Luteolin has been already confirmed by another study [21,42]. The release of inflammatory cytokines may induce apoptotic cell death, which is executed by several factors such as Bax, Bcl-2, and Caspase-3, and the activation of pro-apoptotic factors in AD has been extensively reported [43]. Here, we found enhanced expression of pro-apoptotic markers in the brains of Aβ1−42-injected mice, which was diminished upon administration of luteolin.

The main feature of AD besides neuroinflammation is an accumulation of amyloid-beta, which is a critical feature in the pathophysiology of AD, as the accumulation of amyloid-beta is responsible for the production of reactive oxygen species and ultimately neurodegeneration [44]. Therefore, we checked the expression of amyloidogenesis-related factors in the experimental mice. We found enhanced expression of Aβ1−42 in Aβ1−42-injected mice, which was inhibited by Luteolin, suggesting that Luteolin has modulatory effects on the amyloidogenesis-related factors in this mouse model of AD.

The accumulation of amyloid-beta and neuronal cell loss induces synaptic dysfunction, which is responsible for cognitive and memory dysfunction [45]. Therefore, we checked the expression of synaptic markers, such as postsynaptic density protein 95 (PSD-95) and Synaptosomal-Associated Protein 25 (SNAP-25). The western blot results showed reduced expression of PSD-95 and SNAP-25 in Aβ1−42-injected mice, which was restored by the administration of Luteolin. To unveil the role of JNK in the neuroprotective effects of Luteolin, we checked the expression of JNK and its downstream targets in HT22 cells. We found that, similar to luteolin, SP600125 reduced the phosphorylation of JNK and its downstream signaling and that inhibition of JNK with Luteolin significantly reduced the expression of JNK and of the inflammatory and apoptotic markers, showing a role of JNK in the neuroprotective effects of Luteolin. The anti-inflammatory effects of Luteolin are in agreement with those reported in previous studies on Luteolin [46]. The inhibition of p-JNK through Luteolin was also confirmed by another study conducted on amyloid beta-treated cortical neurons and LPS-stimulated microglial cells [47,48].

Based on these findings, we suggest that Luteolin may counteract AD-associated pathological changes by reducing neuroinflammation, apoptotic cell death, and synaptic dysfunction. These findings are in agreement with previous studies, showing that Luteolin has anti-inflammatory and anti-Alzheimer’s disease effects [21,49]. Furthermore, in-depth studies are highly encouraged to uncover the main markers involved in the protective mechanisms of Luteolin.

4. Materials and Method

4.1. Antibodies and Reagents

The antibodies used in Western blot and immunofluorescence studies were anti-phospho c-Jun—N-terminal kinase (P-JNK) (sc-6254), Santa Cruz Biotechnology, Dallas, TX, USA), anti-p-38 (9212S), anti-p-p-38 (9211S) antibodies (from Cell Signaling Technology, Danvers, MA, USA), anti-Glial fibrillary acidic protein (GFAP; sc-33,673), anti-Iba-1 (sc-32,725), anti-p-NF-κB (sc-136,548), anti-total NF-κB (sc-136547), anti-tumor necrosis factor-α (TNF-α) (sc-52746), anti-interleukin (IL)-1β (sc-32294), anti-Bax (sc-7480), anti-caspase-3 (sc-7272), anti-Bcl2 (sc-7382), anti-COX-2 (sc-376861), anti-amyloid beta (sc- 28365), anti- beta amyloid cleaving enzyme 1 (sc-33711), anti-synaptosomal-associated protein 25 (SNAP-25) (sc-374215), anti-PSD-95 (sc-71933), and anti-β-actin (sc-4778) (from Santa Cruz Biotechnology, Dallas, TX, USA). For PSD-95 and β-actin, the antibodies were diluted in TBST (1:10,000) (Santa Cruz Biotechnology, Dallas, TX, USA). Other primary antibodies were
diluted in 1× TBST (1:1000), and secondary anti-mouse HRP- (Horseradish peroxidase) conjugated (Promega, Fitchburg, WI, USA, Ref# W402) and anti-rabbit HRP-conjugated (Promega Ref# W401) antibodies were diluted 1:10,000 in 1× TBST and were purchased from Promega, (Fitchburg, WI, USA). For confocal microscopy studies, the secondary fluorescent antibodies used were goat anti-mouse (Ref# A11029) and goat anti-rabbit (Ref# 32732) antibodies diluted in 1× PBS.

4.2. Experimental Mice and Groups

Male mice (C57BL/6N, 10 weeks of age, bodyweight of 25–30 g) were obtained from Samtako Bio, Osan, South Korea, and were housed under a 12 h light/dark cycle at room temperature and normal humidity. The mice were handled according to the approved guidelines (number = 48) of the division of applied life sciences of Gyeongsang National University [50]. Food and water were freely available to the mice. Efforts were made to reduce the animals used and their suffering. The mice were randomly divided into four (n = 12 mice per group) groups. Control (saline-injected mice), Aβ1–42-injected mice (i.c.v. Aβ1–42-injected mice), Aβ1–42 + Luteolin-treated mice, and luteolin-alone-injected mice. The grouping was quite random, and the treatment of mice was not blinded.

4.3. Intracerebroventricular (i.c.v.) Injection of Amyloid-β Peptide and Respective Treatments

The preparation and injection of Aβ1–42 were performed as suggested previously, with necessary changes [4]. The human Aβ1–42 peptide was reconstituted as a stock solution (1 mg/mL in sterile saline solution), and incubation was done at 37 °C for four days. Under anesthesia (a combination of 0.05 mL/100 g body weight of xylazine and 0.1 mL/100 g bodyweight of ketamine) the treatments were administered to the mice. Aβ1–42 (5 µL/5 min/mouse) were injected at a rate of 1 µL/5 min into the mice ventricles (i.c.v.), by using a Hamilton micro-syringe (2.4 mm dorsoventral (DV), 0.2 mm anteroposterior (AP), and 1 mm mediolateral (ML) to the bregma). The injector was left in the injection site for 5 min [51]. After one week from the Aβ1–42 injections, Aβ1–42 + Luteolin-treated mice were treated with Luteolin (80 mg/kg/day for two weeks, dissolved in 1% DMSO), as suggested previously [52]. The Luteolin-alone treated group was considered to observe possible unwanted effects of Luteolin in wild-type control mice.

4.4. In Vitro Cell Culture and Drug Treatment

Briefly, mouse hippocampal (HT-22) cells were cultured in T75 flask in 100 µL of Dulbecco’s modified Eagle’s medium (DMEM from Gibco Life Technologies, Dallas, TX, USA), was supplemented with Fetal Bovine Serum (FBS 10%) and an antimycotic/antibiotic (1%) in an incubator supplied with 5% CO₂ at 37 °C for 24 h. After reaching 70% confluency, the cells were treated with Aβ 1–42 (10 µM) and Luteolin at a concentration of 20 µM, which remarkably reduced Aβ1–42 toxicity by inhibiting p-JNK and its downstream targets. The protocols and doses were selected based on previous studies [53–55].

4.5. Protein Extraction and Homogenization of the Brain of Mice

After completion of the treatments, the mice were anesthetized and sacrificed, and the brains were removed carefully; the cortical and hippocampal sections were separated. The tissues were homogenized in a PRO-PREPTM extraction solution (iNtRON Biotechnology, Dallas, TX, USA), followed by centrifugation at a speed of 13,000 rpm for 25 min at 4 °C. The supernatant were collected and stored at −80 °C for further experiments, as performed previously [56,57].

4.6. Preparation of Samples for Immunofluorescence Analysis

The anesthetized mice were operated, and the hearts and veins were exposed. After that, the brain of the mice was perfused with normal saline, followed by perfusion with 4% neutral buffered paraformaldehyde (NBP), as a fixing agent. The samples were kept in
NBP for 48 h, followed by dehydration in 30% sucrose. After that, 14–20 µm sections were obtained with a cryo-microtome and the samples were stored.

4.7. Immunoblotting

For the relative expressions of protein, we performed western blotting, where an equal amount of proteins were electrophoresed. The concentration of proteins was quantified by using a Bio-Rad Protein Assay Kit (Bio-Rad Laboratories, Hercules, CA, USA) [58,59]. The proteins (20–25 µg) were electrophoresed on a 12–15% SDS PAGE gel and transferred to a polyvinylidene difluoride (PVDF) membrane. Prestained protein ladders (Gangnam-STAIN, iNtRON Biotechnology, Seoul, South Korea) were loaded in parallel (as a molecular weight control). To reduce the nonspecific binding, the membranes were blocked in 5% w/v skim milk in 1X Tris-buffered Saline and incubated with the respective primary antibodies at 4 °C (1:1000 dilutions, as optimized) for 16 h, followed by a reaction with the respective horseradish peroxidase-conjugated (HRP) secondary antibodies. For the detection of the bands, the Enhanced chemiluminescent (ECL) detection reagent (EzWestLumiOne, ATTO, and Tokyo, Japan) was used, and the densities of the bands were evaluated with ImageJ (v. 1.50, NIH, Bethesda, MD, USA). The graphs and statistical analysis were made with GraphPad prism 5 (GraphPad Software, San Diego, CA, USA).

4.8. Immunofluorescence Analysis

For the immunofluorescence analysis, the slides were washed with PBS 0.01 mM for 8–10 min, followed by incubation with proteinase K (for 8 min), as previously described [33,60]. After that, the slides were reacted with blocking solution (containing 2% normal rabbit serum and normal goat serum and 0.3% Triton X-100 in PBS) and incubated with the primary antibodies. Then, the slides were washed with PBS and reacted with the respective fluorescent secondary antibodies (fluorescein isothiocyanate- (FITC) (green) or tetramethylrhodamine- (TRITC) labeled secondary antibodies) for 2 h. For nuclear visualization, the slides were treated with 4,6-diamidino-2-phenylindole (DAPI), and mounted with a mounting media on coverslips. Images were captured using a confocal laser-scanning microscope (Flouview FV 1000MPE, Olympus, Japan). For quantitative analysis, the ImageJ software (version 1.50, NIH, Bethesda, MD, USA), was used, and the graphs were generated with GraphPad Prism 5 software.

4.9. Statistical Analysis

The respective differences between the experimental groups are shown in arbitrary units for western blotting and integrated density in the case of immunofluorescence analysis. The data are presented as the mean ± SEM (three independent experiments for 12 mice per group; 6 for western blot and 6 for confocal microscopy). One-way analysis of variance (ANOVA) followed by the Student’s “t” test was used for comparisons of the various groups; p < 0.05 was considered significant. * Significantly different from the vehicle-treated group; # significantly different from the Aβ-injected group. Significance = * p < 0.05; ** p < 0.01; # p < 0.05; and ## p < 0.01.

5. Conclusions

Collectively, we suggest that Luteolin may attenuate oxidative stress, neuroinflammation, apoptotic cell death, amyloidogenesis, and synaptic dysfunction in Aβ1–42-injected mice. Our results strongly agree with previous studies conducted on the role of Luteolin in neuroinflammation and cognitive dysfunctions mediated by Aβ1–42-induced oxidative stress [61]. Our findings may be useful for the development of new therapeutic approaches for the management of neurodegeneration, especially AD-like conditions.

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**Data Availability Statement:** The authors hereby declares that the generated datasets in this study will be presented upon request from the corresponding author.

**Conflicts of Interest:** The authors declare no conflict of interest.

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