

### Notch3 is a genetic modifier of NODAL signalling for patterning asymmetry during mouse heart looping

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#### 1 *Notch3* is a genetic modifier of NODAL signalling for patterning asymmetry during mouse

- 2 heart looping
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#### 25 Abstract

The TGF $\beta$  secreted factor NODAL is a major left determinant required for the asymmetric 26 27 morphogenesis of visceral organs, including the heart. Yet, when this signalling is absent, 28 shape asymmetry, for example of the embryonic heart loop, is not fully abrogated, indicating 29 that there are other factors regulating left-right patterning. Here, we used a tailored transcriptomic approach to screen for genes asymmetrically expressed in the field of heart 30 31 progenitors. We thus identify Notch3 as a novel left-enriched gene and validate, by 32 quantitative in situ hybridization, its transient asymmetry in the lateral plate mesoderm and 33 node crown, overlapping with *Nodal*. In mutant embryos, we analysed the regulatory hierarchy 34 and demonstrate that Nodal in the lateral plate mesoderm amplifies Notch3 asymmetric 35 expression. The function of Notch3 was uncovered in an allelic series of mutants. In single 36 neonate mutants, we observe that Notch3 is required with partial penetrance for the 37 development of ventricles, in addition to its known role in coronary arteries. In compound 38 mutants, we reveal that Notch3 acts as a genetic modifier of Nodal, able to modulate heart looping direction and the curvature of the outflow tract. Whereas Notch3 was previously 39 40 associated with the CADASIL syndrome, its contribution to asymmetric organogenesis is now 41 relevant to severe laterality defects such as the heterotaxy syndrome.

#### 42 Abbreviations

43 Ao = Aorta

- 44 AVC = Atrioventricular canal
- 45 BH = Benjamini-Hochberg
- 46 BMP = bone morphogenetic protein

47 E = Embryonic day

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- 48 HREM = High Resolution Episcopic Microscopy
- 49 HT = Heart tube
- 50 ISH = In situ hybridisation
- 51 IPCCC ICD = International Paediatric and Congenital Cardiac Code and International
- 52 Classification of Diseases
- 53 L = Left
- 54 LA = Left atrium
- 55 LPM = Lateral plate mesoderm
- 56 LV = Left ventricle
- 57 Myo = Myocardium
- 58 No = Node
- 59 n.s. = non-significant
- 60 NT = Neural tube
- 61 P = Postnatal day
- 62 R = Right
- 63 RA = Right atrium
- 64 RT-qPCR = Reverse transcription quantitative polymerase chain reaction
- 65 RV = Right ventricle
- 66 SHF = Second Heart Field
- 67 TGF $\beta$  = Transforming growth factor- $\beta$
- 68 VSD = Ventricular Septal Defect

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#### 70 Introduction

71 Left-right patterning of the embryo is essential for the formation of visceral organs (1,2). 72 Anomalies in this process lead to the heterotaxy syndrome, a severe condition including 73 complex congenital heart defects which determine the prognosis of patients (3). The 74 mechanisms of symmetry-breaking are now well established in the mouse (4). Chirality of tubulin underlies the rotational movement of motile cilia in the pit of the left-right organiser, 75 76 also referred to as the node. This generates a leftward fluid flow sensed by crown cells, 77 resulting in the asymmetric expression of the left determinant NODAL in the lateral plate 78 mesoderm. Genetic alterations to the formation of the node, ciliogenesis or NODAL signalling 79 are associated with heterotaxy in both mice (2,5–8) and humans (9,10). NODAL signalling is 80 then sensed by organ precursors to modulate morphogenesis, as shown in the intestine (11) and heart (12). In the absence of *Nodal*, some features are symmetrical (spleen, bronchi, lung 81 82 lobes, atrial appendages), but many others (e.g heart looping, stomach, gut) retain some level 83 of asymmetry, although abnormal (6,12–15). This indicates that *Nodal* is not always required 84 to initiate asymmetry and that there are other factors of asymmetry in addition to NODAL 85 signalling.

86 The heart is the first organ to undergo asymmetric morphogenesis in the embryo. This 87 manifests as a rightward looping of the heart tube primordium, at E8.5 in the mouse (16). We have previously reconstructed the dynamics of this process and defined morphological and 88 quantitative staging criteria from E8.5c to E8.5j, including the repositioning of ventricles from 89 90 cranio-caudal to left-right, and the left displacement of the venous pole (17). We have shown 91 that heart looping is primarily a buckling mechanism, when the heart tube elongates between 92 fixed poles (17). We found that *Nodal* is not required for buckling and thus to initiate looping. 93 In contrast, *Nodal* biases buckling, by amplifying and coordinating asymmetries independently

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94 at the two poles of the heart tube (12). Thus, in the absence of *Nodal* in the lateral plate 95 mesoderm, asymmetries are reduced and the helical shape of the looped heart tube is 96 abnormal. Because two asymmetries, at the arterial and venous poles, have a randomised 97 orientation, Nodal mutants display 4 classes of abnormal heart loop. We observed that NODAL 98 signalling is transient, before the formation of the heart tube (E8.5c-d), in precursor cells of the heart tube poles. Cardiac precursor cells are progressively incorporated into the heart 99 tube, as a main driver of its elongation. Patterning of the field of cardiac precursors has been 100 101 studied in terms of molecular profiling (18) and fate (19). However, the left-right patterning of 102 cardiac precursors has remained centered on the Nodal pathway.

Other players of asymmetry have been identified, including BMP (20–22), HH (23), NOTCH (24–26) and WNT (27–29) signalling. Few of these are reported to be asymmetric: *Wnt3* in the left side of the node (28), and BMP signalling in the right lateral plate mesoderm (21). They were all shown to be required for *Nodal* asymmetry. Thus, the factors which can provide asymmetry besides *Nodal* have remained enigmatic.

108 NOTCH signalling is an example of a pathway required both for left-right asymmetry and for 109 heart morphogenesis (30), but playing multiple roles. Among the four paralogues, Notch2 is 110 expressed in the node, and Notch1 around the node in the caudal epiblast and presomitic 111 mesoderm (24,31). Notch1;Notch2 double mutants disrupt heart looping asymmetry, in keeping with a role in the left-right organiser (25). NOTCH1 and the transcriptional NOTCH 112 effector RBPJ are required in the heart field for cardiomyocyte differentiation (32–34). Notch1 113 114 is later expressed in the endocardium, where it is important to regulate myocardial 115 trabeculation (35) and valve formation (36,37). Notch3 mutant mice are viable and fertile (38), 116 but display defects in the maturation of the smooth muscle wall of coronary arteries (39). 117 Notch3 is a broad marker of pericytes and controls the formation of smooth muscles in non-

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cardiac arteries and intestinal lacteals (40–42). Gain-of-function of NOTCH3 in CADASIL syndrome is responsible for smooth muscle degeneration in the brain (40,43,44). *Notch3* is also involved in the regulation of quiescence and stemness of neural, skeletal muscle and mammary stem cells (45–48). Finally, *Notch4* is expressed together with *Notch1* in endothelial cells to regulate vascular remodelling (49). Thus *Notch1/2* but not *Notch3/4* have been previously associated with left-right patterning, at the level of the left-right organiser.

To uncover asymmetric factors in organ specific precursors, rather than the left-right organiser, recent transcriptomic screens were performed on micro-dissected tissues excluding the node (50,51). Whereas NODAL signalling is transient (12,52), these screens were based on pooled embryos, which limits their resolution. The asymmetric candidate genes that have been identified have not yet been analysed for functional significance.

129 Here, we focused on asymmetric expression in the field of heart progenitors, at the time of 130 heart looping. We compared paired left/right samples in single embryos to avoid confounding 131 individual or stage variations. Our screen and quantitative in situ validations reveal Notch3 as 132 a novel gene enriched in the left lateral plate mesoderm. Notch3 is co-expressed with Nodal, 133 although with a slight time-delay and partial spatial overlap. In mutants, we show that Notch3 134 asymmetry is amplified by NODAL signalling. Single Notch3 mutants do not develop 135 heterotaxy, but show ventricle and coronary artery defects after birth. Analysis of compound 136 mutants indicate that *Notch3* is a genetic modifier of NODAL signalling during heart looping. 137 Overall, we identify not only a novel asymmetric gene, but also a novel player in the left-right 138 patterning of the lateral plate mesoderm, relevant to congenital heart defects.

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#### 140 Results

#### 141 Identification of *Notch3* as a novel asymmetric marker

142 To screen for left-right asymmetric gene expression in cardiac cells, aside the Nodal 143 pathway, we used a transcriptomic approach in the mouse embryo. To reduce confounding 144 factors, the approach was targeted in space and time and left/right comparisons were conducted on single rather than pooled embryos. We focused on the heart field, given that it 145 is a tissue which can be bisected at the midline and is patterned by NODAL signalling (12). In 146 147 contrast, the heart tube changes its position during looping (17) and has a left-right origin 148 difficult to dissect (19). We have previously shown that NODAL signalling is transient in heart precursors (12), highlighting the importance of specifically staging embryos. We focused on 149 150 the E8.5f stage, when we have detected morphological asymmetry at the arterial pole of the 151 heart tube (17). Thus, we micro-dissected the heart field of E8.5f wild-type embryos (Fig. 1A 152 and S1A-D), in the dorsal pericardial wall and down to the second somite, in agreement with 153 landmarks of fate mapping experiments (19) and profiling of single cardiac cells (18). Bulk RNA 154 sequencing of paired left and right samples were compared to identify differential asymmetric 155 expression in the heart field. As expected, targets of NODAL signalling, Pitx2 and Lefty2, were 156 significantly enriched on the left side (Fig. 1B). A total set of 597 genes were predicted to be 157 differentially expressed (Table S1). Ingenuity Pathway analysis showed NOTCH signalling as the strongest asymmetric pathway and left-sided (Fig. 1C). We controlled the transcriptomic levels 158 of individual genes associated with NOTCH in this differential analysis and their cardiac 159 160 expression in a published single cell transcriptomic dataset at the same stage (18): whereas 161 Dtx4 was found to be expressed only in ectodermal cells (Fig. S1E), Notch3, Hes1, Jag1, Ncstn 162 were identified as asymmetric candidate genes in the heart field (Fig. 1D).

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163	We selected Notch3 for further validation, because it is the gene with highest expression, it
164	encodes a receptor and transcription co-factor central to NOTCH signalling. This Notch
165	paralogue has not previously been associated with left-right patterning. We mapped Notch3
166	expression in whole mount E8.5 wild-type embryos using sensitive RNAscope in situ
167	hybridization. Notch3 was detected throughout the lateral plate mesoderm, as well as in the
168	crown of the node, with higher expression on the left side (Fig. 1E-F). Notch3 was not
169	expressed in the myocardium of the forming cardiac tube. We then assessed the dynamics of
170	Notch3 expression within the heart field (Fig. 1G). Our quantification shows that Notch3 is
171	transiently asymmetric, reaching 4.5-fold left-sided enrichment in the heart field at E8.5d, a
172	stage when the myocardium bulges out to form a tube (Fig. 1H). Although Nodal asymmetry
173	starts one stage earlier (E8.5c, (12)), Notch3 and Nodal overlapped in the left lateral plate
174	mesoderm at E8.5d (Fig. 1I, Video S1), and were found co-expressed in single cells (Fig. S1F).
175	We have thus identified Notch3 as a novel left-sided gene in the heart field.

### Fig 1. RNA-sequencing of paired samples identifies a left-sided enrichment of *Notch3* at E8.5.

(A) Outline of the left (light blue) and right (light red) heart field micro-dissected for RNA-178 sequencing at the indicated stage of mouse heart looping. (B) MA-plot representing relative 179 gene expression between paired left and right heart field at E8.5f. Non-significant differential 180 181 expression is represented in red, differential expression in green (p-value<0.05), and blue 182 (Benjamini-Hochberg (BH) corrected p-value<0.05, LimmaVoom, n=4 embryos). (C) Ingenuity Pathway Analysis on the gene list shown in Table S1 ordered according to significance and 183 184 colour-coded for the activation state (z-score: blue, active pathway on the left; red, on the 185 right). (D) Normalised read counts of genes involved in the *Notch* pathway in the left (blue) and right (red) heart field. The dotted line indicates the threshold of background expression. 186 Whisker plots show the median, 25<sup>th</sup>- and 75<sup>th</sup> guartiles (boxes), and the extreme data points 187 (whiskers). \*p-value < 0.05, \*\* Benjamini-Hochberg corrected p-value < 0.05 (LimmaVoom, 188 n=4). (E-F) Expression of Notch3 (white) detected by whole mount RNAscope ISH in E8.5d wild-189 190 type embryos, shown in frontal views (e1, cranial part of the embryo, f1, caudal part of the 191 embryo) and transverse sections (e2-e3, f2, at the levels indicated in e1-f1) (n=6). Filled and 192 empty arrowheads point to high and low expression, respectively. (G) Segmentation of the cardiac region in 3D images, to quantify gene expression in the left (white) or right (yellow) 193 194 heart field. The heart tube is coloured in red. Somites are outlined by white dotted lines. 195 Expression of *Notch3* within the segmented second heart field is extracted in the right panel. 196 (H) Quantification of normalised Notch3 asymmetric expression in the heart field at sequential 197 stages. The means are shown on a red dotted line and standard deviations are in blue (n=3 at

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E8.5c, 6 at E8.5d, 6 at E8.5e, 3 at E8.5f). (I) *Notch3* (white) and *Nodal* (magenta) co-expression
detected by double whole mount RNAscope ISH in E8.5d wild-type embryos, shown in a frontal
view (i1) and transverse section (i2) (n=5). The midline is indicated by a yellow dotted line. HT,
heart tube; L, left; LPM, lateral plate mesoderm (green dotted outline); Myo, myocardium (red
dotted outline); No, node; R, right; SHF, second heart field. See also Video S1.

#### 204 *Nodal* is required in the lateral plate mesoderm to amplify *Notch3* asymmetric expression

205 Given that Notch3 asymmetry overlaps with that of Nodal, we investigated whether Notch3 206 and *Nodal* depend on each other. NOTCH signalling has been shown to directly activate *Nodal* 207 in the node, in *Dll1* and *Rbpj* mutants (26). In contrast, we found that *Nodal* was correctly patterned in the node and left lateral plate mesoderm of Notch3<sup>-/-</sup> mutants (Fig. S2A-B). In 208 209 reverse, in mutants in which *Nodal* is inactivated in the lateral plate mesoderm but not in the node (12), Notch3 expression was impacted (Fig. 2A-B). Quantification of Notch3 expression 210 211 at sequential stages in the heart field shows that Notch3 asymmetry is severely decreased in Nodal mutants compared to controls (Fig. 2C). Yet, some significant asymmetry is still 212 213 detectable. In keeping with a partial dependency of *Notch3* on *Nodal*, we observed that the 214 expression domain of Notch3 partially overlaps with that of Nodal, extending more medially 215 and less laterally (Fig. S2C-D). Thus, Nodal is required in the left lateral plate mesoderm to 216 amplify, rather than initiate, Notch3 asymmetric expression.

#### 217 Fig 2. Decreased Notch3 asymmetry in Nodal mutants.

218 (A-B) Whole mount RNAscope ISH of Notch3 in control (A) and Nodal mutants (B) at E8.5d in 219 frontal views. Expression of Notch3 within the segmented heart field is extracted in right 220 panels. The midline of the embryo is indicated by a yellow dotted line. (C) Corresponding 221 quantification of normalised Notch3 asymmetric expression in the heart field at sequential 222 stages in littermate controls (n= 3 at E8.5c, 5 at E8.5d, 3 at E8.5e) and Nodal mutants (n= 5 at E8.5c, 3 at E8.5d, 6 at E8.5e). Means and standard deviations are shown. \*p-value<0.05 223 224 between controls and mutants, \*p-value<0.05 to compare mutant levels with a symmetry 225 hypothesis (Log2 ratio =0) (Pairwise Mann-Whitney Wilcoxon tests). L, left; R, right; SHF, second heart field. 226

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#### 229 Single *Notch3* mutants have normal heart looping but later congenital heart defects

We next investigated the role of *Notch3* in heart development, in mutants inactivated for it (Fig. S3). Given its asymmetric expression when the cardiac tube forms, we looked for a potential effect on the rightward looping of the heart tube. E9.5 mutant embryos were collected at Mendelian ratio (Fig. 3A) and no heart looping defect was detected, both qualitatively (Fig. 3B-D) and quantitatively (Fig. 3E-F). *Notch3<sup>-/-</sup>* mutant embryos were indistinguishable from controls, with a normal orientation of the right ventricle-left ventricle axis relative to the midline, and a normal left displacement of the venous pole.

#### 237 Fig 3. Normal heart looping in single *Notch3* mutants.

(A) Histogram showing the percentage of genotypes recovered in E9.5 litters of Notch $3^{+/-}$  x 238 *Notch3<sup>+/-</sup>* crosses. The observed frequency is not significantly different from the expected 239 240 Mendelian ratio (dotted lines) (p-value = 0.30, chi-square test, n as indicated). (B-D) Brightfield ventral views (b1-d1), and 3D segmented heart tubes shown in ventral (b2-d2) and cranial (b3-241 d3) views, of littermate Notch3<sup>+/+</sup> (B), Notch3<sup>+/-</sup> (C) and Notch3<sup>-/-</sup> (D) E9.5 embryos. Cardiac 242 regions are colour coded: outflow tract in green, right ventricle in red, left ventricle in blue, 243 244 atrioventricular canal and left atrium in yellow, right atrium in magenta. The notochord (cyan) 245 is used as a reference axis to align samples. (E) Quantification of the orientation of the RV/LV 246 axis relative to the notochord, as schematised in b2. (F) Quantification of the displacement of 247 the venous pole relative to the notochord, normalised by the tube length, as schematised in 248 b3. Means and standard deviations are shown (Pairwise Mann-Whitney Wilcoxon tests with Benjamini-Hochberg correction, n=11 Notch3<sup>+/+</sup>, 10 Notch3<sup>+/-</sup> and 16 Notch3<sup>-/-</sup>). LV, left 249 250 ventricle; n.s., non-significant; RV, right ventricle.

252	We then collected Notch3 mutants after birth. In agreement with previous reports (38),
253	they were collected at Mendelian ratio (Fig. 4A). Notch3 <sup>-/-</sup> mutants did not show heterotaxy,
254	unlike Nodal mutants, but had congenital heart defects with partial penetrance (67%),
255	including peri-membranous and muscular ventricular septal defects, thinning of the right
256	ventricular wall and coronary artery dilatation (Fig. 4B-C). Defects of coronary arteries are in
257	keeping with fetal expression of Notch3 in pericytes and smooth muscle cells (Fig. S4). Overall,
258	our results show that <i>Notch3</i> is required for ventricle and coronary artery development.

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259 However, removal of *Notch3* alone does not uncover a role in left-right asymmetric

260 organogenesis.

#### 261 Fig 4. Congenital heart defects in *Notch3* mutants.

(A) Histogram showing the percentage of genotypes recovered in P14 litters of Notch3+/- x 262 *Notch3<sup>+/-</sup>* crosses. The observed frequency is not significantly different from the expected 263 Mendelian ratio (dotted lines) (p-value = 0.64, chi-square tests, n as indicated). (B-C) Sections 264 265 of Notch $3^{-/-}$  mutant hearts at PO, imaged by HREM. An example of a mutant heart with no 266 phenotype is shown (B, n=4/12). Defects (C) include peri-membranous ventricular septal defect (VSD) (yellow arrowhead, n=1/12), muscular VSD (red arrowheads, n=4/12), dilatation 267 268 of the septal coronary artery (pink arrowhead, n=1/12) and thin RV wall (green arrow, n=3/12). 269 AVC, atrioventricular canal; Ao, aorta; LA, left atrium; LV, left ventricle; RA, right atrium; RV, right ventricle. 270

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#### 272 *Notch3* is a genetic modifier of *Nodal* in heart looping

Since *Notch3* overlaps with and is amplified by *Nodal*, we investigated their interaction in the context of left-right asymmetry. We generated double heterozygote mutants and quantified heart looping. Compared to single heterozygotes (Fig. 5A-B), *Notch3<sup>+/-</sup>; Hoxb1<sup>Cre/+</sup>; Nodal*<sup>flox/+</sup> double heterozygotes (Fig. 5C) did not show any heart looping defects, including normal orientation of the right ventricle-left ventricle axis relative to the midline, and normal left displacement of the venous pole (Fig. 5D-E). Thus, we did not detect a genetic interaction between *Notch3* and *Nodal*.

We then analysed the role of *Notch3* in a sensitized background. We generated a large cohort of mutants, with a knock-down of *Notch3* within the context of *Nodal* inactivation in the left lateral plate mesoderm. *Notch3<sup>+/-</sup>; Hoxb1<sup>Cre/+</sup>; Nodal<sup>flox/null</sup>* mutants lost the randomized direction of heart looping, typical of *Nodal* mutants (Fig. 5F-G). Rightward looping was more frequent when *Notch3* was reduced in *Nodal* mutants. However, this did not correspond to a rescue, since all rightward mutant heart loops were abnormal, compared to controls. Compared to *Nodal* mutants, additional defects in the outflow tract were observed with partial

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- 287 penetrance. The outflow tract was straighter in 40% (7/18) of Notch3<sup>+/-</sup>; Hoxb1<sup>Cre/+</sup>; Nodal<sup>flox/null</sup>
- 288 mutants within looping Class 4 (Fig. 5H-J), which is the less severe class. These genetic analyses
- thus uncover a role for *Notch3* as a genetic modifier of *Nodal* during left-right asymmetric
- 290 organogenesis.

#### 291 Fig 5. Heart looping variations in *Notch3* and *Nodal* compound mutants.

292 (A-C) 3D segmented heart tubes shown in ventral (a1-c1) and cranial views (a2-c2) of single 293 *Nodal* heterozygote (A), single *Notch3* heterozygote (B) and double heterozygote (C) embryos 294 at E9.5. Cardiac regions are colour coded as in Fig. 3. The notochord (cyan) is used as a 295 reference axis to align samples. (D) Quantification of the orientation of the RV/LV axis relative 296 to the notochord. (E) Quantification of the displacement of the venous pole relative to the 297 notochord, normalised by the tube length. Means and standard deviations are shown. (Pairwise Mann-Whitney Wilcoxon tests with Benjamini-Hochberg correction, n=8 Hoxb1<sup>Cre/+</sup>; 298 Nodal<sup>flox/+</sup>, 14 Notch3<sup>+/-</sup>; Nodal<sup>flox/+</sup>, 12 Notch3<sup>+/-</sup>; Hoxb1<sup>Cre/+</sup>; Nodal<sup>flox/+</sup>). (F) Brightfield images 299 of homozygote Nodal mutants with decreased Notch3 (Notch3+/-; Hoxb1<sup>Cre/+</sup>; Nodal<sup>flox/null</sup>) at 300 E9.5, in a ventral view. (G) Corresponding quantification of their looping direction frequency 301 (right bar), which, in contrast to Nodal mutants with normal Notch3 levels (left bar), differs 302 from a randomised looping direction (dotted line). \*p-value<0.05 (Chi-square test with Yates' 303 continuity correction, n=76 Hoxb1<sup>Cre/+</sup>; Nodal<sup>flox/null</sup> and 47 Notch3<sup>+/-</sup>; Hoxb1<sup>Cre/+</sup>; Nodal<sup>flox/null</sup>). 304 (H-J) Comparison of Class 4 abnormal heart loops in homozygote Nodal (I), Nodal; Notch3 305 306 compound (J) mutants compared to control Notch3<sup>+/-</sup> embryos (H), seen in brightfield right-307 sided views. Filled and empty arrowheads point to curved and straight outflow tract, 308 respectively. L, Left; LV, left ventricle; R, Right; RV, right ventricle.

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#### 310 Discussion

We have identified *Notch3* as a novel left asymmetric factor. We show that it is amplified by NODAL signalling. We do not detect a genetic interaction between *Nodal* and *Notch3*, but rather show that *Notch3* acts as a genetic modifier of *Nodal*. Knock-down of *Notch3* exacerbates looping defects observed in *Nodal* mutants. Single *Notch3* mutant neonates have other cardiac defects in coronary arteries, transmural growth and septation of ventricles.

316 Left-right asymmetry is mainly analysed in terms of patterning of the major left 317 determinant, Nodal, and its downstream pathway including Lefty2 and Pitx2 (4,53,54). 318 However, in the absence of *Nodal*, organ asymmetry is not fully abrogated (6,13–15). Heart 319 looping, which is the first asymmetric morphogenesis, still occurs to some extent in Nodal 320 mutants, producing helical heart tubes, even if abnormal (12). This indicates that there are 321 other factors than NODAL signalling required for heart asymmetry. BMP (20–22), HH (23), 322 NOTCH (24–26) and WNT (27–29) signalling have been shown to be required upstream of 323 Nodal for asymmetry. Transcriptomic screens have been performed to identify asymmetric 324 genes in embryos outside the node or in cardiac precursors (50,51). Yet, asymmetric candidate 325 genes were either not validated or not analysed functionally, leaving open the question of 326 which are genuine asymmetry factors. Here, we have used a transcriptomic screen tailored 327 spatially in the heart field, temporally at the stage of the first morphological asymmetry, and 328 specifically on left-right asymmetry based on paired comparison in single embryos. This has 329 successfully identified a novel left factor, Notch3. We have characterised by quantitative and 330 whole mount sensitive in situ hybridisation its dynamic spatio-temporal expression pattern 331 relative to Nodal. And we have demonstrated its role in left-right asymmetry based on an allelic 332 series of mutants. Similarly to Nodal, Notch3 is transiently asymmetric, highlighting the 333 importance of careful staging to monitor left-right patterning. In contrast to Nodal, Lefty2 and

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*Pitx2,* which are exclusively expressed on the left of the lateral plate mesoderm, *Notch3* is also expressed on the right, with a 4.5-fold enrichment on the left side. Thus, quantitative and sensitive approaches are critical to uncover factors which have lower asymmetry levels compared to the *Nodal* pathway.

338 Nodal plays multiple roles in asymmetry. Nodal is well known to act as a bias, able to set 339 the laterality of asymmetry, so that its absence leads to a randomized orientation. This is the 340 case for the direction of heart looping (12) or the stomach position (14). In addition, Nodal, 341 upstream of *Pitx2*, acts as a regulator of identity, able to confer a left anatomical structure to 342 the atria and lungs or to induce the formation of the spleen (14,55,56). Finally, we had shown 343 that Nodal can also act as an amplifier of asymmetry (12). This had been detected at a morphological level, with a reduced rotation of the arterial pole during heart looping in Nodal 344 345 mutants. We now show this at a molecular level, with the amplification of *Notch3* asymmetry 346 by Nodal.

347 NOTCH signalling is required at different levels for left-right asymmetry. Notch1/2 were 348 shown previously to play a role in the formation of the left-right organiser and the induction 349 of Nodal (24–26). We now identify the role of another NOTCH paralogue, NOTCH3. Whereas 350 Notch1 is expressed around the node in the caudal epiblast and presomitic mesoderm, and 351 *Notch2* in the node pit (24,31), we have detected *Notch3* in the node crown and lateral plate 352 mesoderm. Our conditional mutants permit to dissect a role of *Notch3* in the lateral plate mesoderm for left-right asymmetry. How Notch3 regulates heart looping direction and the 353 354 curvature of the outflow tract remains an open question. Notch3 regulates muscle 355 differentiation and maturation in other tissues, such as the smooth muscles of arteries, 356 coronary arteries and intestinal lacteals, or skeletal muscles, and is expressed in precursors 357 cells such as pericytes or satellite stem cells (39–42,45). It will be interesting to investigate

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whether *Notch3* in the heart field similarly regulates the differentiation and maturation of the 358 359 cardiac muscle to impact heart looping. Elongation of the heart tube is important for heart 360 looping, as a driver of a buckling mechanism (17). Thus, asymmetries in myocardial cell 361 differentiation, when precursor cells incorporate into the heart tube, can provide a left-right 362 bias to orient looping. We have shown previously that *Nodal* modulates a large set of genes involved in myocardial cell differentiation, some of which like *Tnnt1* are asymmetrically 363 expressed within the wild-type heart tube (12). Whether *Notch3* acts similarly remains to be 364 365 investigated. For later transmural growth and septation of ventricles, it is possible that a 366 potential role of Notch3 on muscle differentiation and maturation intervenes. However, since 367 Notch3 is expressed in cardiac precursors and not cardiomyocytes, that would imply a long delay from expression to phenotype. Another possibility is that ventricle growth in Notch3 368 369 mutants is a secondary consequence of defective coronary vascularisation (57).

370 Although Notch3 expression is sensitive to Nodal, our observations support the idea that 371 Notch3 is not a component of the Nodal pathway. The expression pattern of Notch3 differs from *Nodal*, with a right sided and more medial left sided localization. In contrast to *Pitx2* or 372 Lefty2 (12), Notch3 expression is not erased in Nodal mutants. Functionally, we do not detect 373 374 a genetic interaction between Notch3 and Nodal, and show that knock-down of Notch3 can 375 exacerbate the phenotype of Nodal mutants. Thus, Notch3 comes out as a novel genetic modifier of Nodal. The underlying mechanism is still unknown. A link between the two 376 pathways has been detected based on the direct binding of NOTCH3 to the NODAL co-receptor 377 378 TDGF1, which enhances NOTCH proteolytic maturation and sensitization to ligand-induced 379 NOTCH signalling (58). Given that the disease associated with Nodal dysfunction, heterotaxy, 380 has a heterogenous phenotypic spectrum, the identification of genetic modifiers of known

- 381 genes involved in heterotaxy opens novel perspectives to fill gaps in the genetic diagnosis of
- 382 60% of patients (59).

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#### 383 Methods

#### 384 EXPERIMENTAL MODEL AND SUBJECT DETAILS

C56Bl6J mice were used as wild-type embryos. *Notch3tm1Grid/tm1Grid* mutants (abbreviated 385 *Notch3<sup>-/-</sup>*, (38)) were kept in a C56Bl6J background; they are viable and fertile as homozygotes. 386 *Nodal*<sup>null/+</sup>; *Hoxb1*<sup>Cre/+</sup> males (12) were maintained in a mixed genetic background and crossed 387 388 with *Nodal*<sup>flox/flox</sup> females (60) to generate *Nodal* conditional mutants. Both male and female 389 embryos were collected and used randomly for experiments, except for RNA sequencing, in 390 which only male embryos were used to reduce variability. Embryonic day (E) 0.5 was defined 391 as noon on the day of vaginal plug detection. Embryonic stages were determined based on the 392 morphology of the heart according to (17) and (12). Somite numbers were evaluated from 393 brightfield images; samples with less than 18 somites were excluded from heart looping 394 quantifications. All embryos were genotyped by PCR, using primers listed in Table S2. Animals were housed in individually ventilated cages containing tube shelters and nesting material, 395 396 maintained at 21°C and 50% humidity, under a 12h light/dark cycle, with food and water ad 397 libitum, in the Laboratory of Animal Experimentation and Transgenesis of the SFR Necker, 398 Imagine Campus, Paris. Animal procedures were approved by the ethical committees of the 399 Institut Pasteur, Université Paris Cité and the French Ministry of Research.

400 METHOD DETAILS

#### 401 RNA isolation and sequencing

Paired left and right heart fields of E8.5f embryos were micro-dissected, from below the
headfolds to the end of the second somite (19), after removal of the heart and the back. The
tissue was flash frozen in liquid nitrogen. All samples were collected within 1h30 of sacrificing

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the mother. Total RNA was extracted in TRIzol-Chloroform and purified using the RNeasy micro 405 406 kit (QIAGEN) including DNAse treatment. RNA quality and quantity were measured on 407 Fragment Analyzer (Agilent Technologies). All RQN were >9.7. The libraries were established using the Nugen Universal Plus mRNA-Seq kit, using 15ng of total RNA per sample. The 408 oriented cDNAs produced from the poly-A+ fraction were PCR amplified (15-18 cycles). An 409 equimolar pool of the final indexed RNA-Seq libraries was sequenced on an Illumina 410 411 NovaSeq6000, with paired-end reads of 130 bases and a mean sequencing depth of 37.15 412 million reads per sample.

#### 413 Embryo dissection

Embryos were dissected in 1xDPBS and fixed in 4% paraformaldehyde either for 6h at room temperature or 24h at 4°C. Yolk sac or tail pieces were collected for genotyping. For embryos dissected at E9.5, hearts were arrested in diastole by treatment with cold 250mM KCl for 5 minutes. Fixed embryos were gradually dehydrated into methanol and stored at -20°C. For pups collected at P0, they were euthanised, immerged in a cardioplegia solution (110mM NaCl, 16mM KCl,16mM MgCl2, 1.5mM Cacl2, 10mM NaHCO3) for 5 minutes and fixed in 4% PFA 24h at 4°C.

#### 421 RNA in situ hybridization (ISH)

ISH was performed whole mount as in (12). *Wnt11* and *Bmp2* antisense riboprobes were transcribed from plasmids. Signals were detected by alkaline phosphatase (AP)-conjugated anti-DIG antibodies (1/2000), which were revealed with the BM purple (magenta) substrate. The samples were washed in 1x DPBS, post-fixed and imaged by HREM.

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Wholemount RNAscope ISH were performed using the Mutliplex Fluorescent v2 Assay (Biotechne) and the protocol of (61). *Notch3* (425171-C1, 425171-C2) and *Nodal* (436321-C1) probes were used. Amplification steps were performed using the TSA cyanine5 and cyanine3 amplification kit. Hoechst (1/1000) was used as a nuclear counterstain. Samples were then transferred in R2 CUBIC clearing reagents and embedded in R2 reagent containing agarose (62). Multi-channel 16-bit images were acquired with a Z.1 lightsheet microscope and a 20X/1.0 objective.

#### 433 **RT-qPCR**

Reverse transcription was performed on RNA isolated from entire (left and right) microdissected heart fields using a Reverse Transcription kit (QuantiTect, Qiagen). Quantitative PCR was carried out using the ViiA7 real-time PCR system. mRNA expression levels were measured relatively to *Polr2b* and normalised with a reference cDNA sample, taken as a pool of 7 whole embryos at stage E8.5c-g, using the standard  $\Delta\Delta$ Ct method. Primers are listed in Table S2.

#### 439 High Resolution Episcopic Microscopy (HREM)

E9.5 embryos or P0 hearts were imaged in 3D by HREM after embedding in methacrylate resin (JB4) containing eosin and acridine orange as contrast agents (12). Two channel images of the surface of the resin block were acquired using the optical high-resolution episcopic microscope and a 1X Apo objective repeatedly after removal of on average 1.75 µm or 2.63 µm thick sections. The datasets comprise 742-1869 images of 0.90-4.48 µm resolution in x and y depending on the stage. Icy (63) and Fiji (ImageJ) softwares were used to crop and scale the datasets. 3D reconstructions and analysis were performed using Imaris.

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#### 448 QUANTIFICATION AND STATISTICAL ANALYSIS

#### 449 Bioinformatics Analyses of bulk RNA sequences

450 FASTQ files were mapped to the ENSEMBL Mouse GRCm38/mm10 reference using Hisat2 and counted by featureCounts from the Subread R package. Due to a high number of 451 duplicates (on average 89%), duplicates were excluded. Flags were computed from counts 452 453 normalized to the mean coverage. All normalized counts < 20 were considered as background 454 (flag 0) and  $\geq$  20 as signal (flag = 1). P50 lists used for the statistical analysis gather genes 455 showing flag=1 for at least half of the samples. For the analysis of gene expression, normalized 456 read counts below 250 were considered as background, based on known markers included or 457 excluded from the micro-dissected tissue (Fig. S1B-D). Differential gene expression analysis 458 was performed using three independent methods (DESeq2, edgeR and LimmaVoom) followed 459 by thresholds on absolute fold change  $\geq$ 1.2 and p-value  $\leq$ 0.05, leading to 597 genes (Table S1). 460 Differential gene expression with LimmaVoom is plotted, and grouped in three categories 461 depending on p-value and corrected p-value (Benjamini-Hochberg procedure). For each 462 differential analysis method, functional analyses were carried out using the Ingenuity Pathway 463 analysis on the list of differentially expressed genes, using delta between conditions and p-464 value of differential analysis. Transcriptomic data have been deposited in NCBI Gene 465 Expression Omnibus (GEO) with the accession number GSE237126.

#### 466 Bioinformatics Analyses of published single cell RNA sequences

Data from single cardiac wild-type cells at E8.5 (18) were downloaded from <u>https://crukci.shinyapps.io/heartAtlas/</u> analysed using scran (64) and visualized using Seurat v3.1.2 (65). Data from single cardiac wild-type cells at E11.5-P9 (66) were downloaded from <u>https://www.ncbi.nlm.nih.gov/geo/query/acc.cgi?acc=GSE193346</u>, and visualized similarly.

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#### 471 Quantification of RNAscope ISH signal

472 3D images were analyzed using Imaris. For quantification of left-right asymmetry in the 473 second heart field, the second heart field was manually segmented in the lateral plate 474 mesoderm layer, using headfolds and the second somite pair as cranial and caudal boundaries, 475 respectively, and separated into left and right following the midline (using neural tube closure as a landmark). Both Hoechst signal and the signal of the gene of interest were extracted. To 476 account for potential biases between the left and right during imaging, the spot detector 477 478 function was used on the Hoechst channel to generate a normalisation score between the two sides, using as a threshold a coverage of 50% of spots on each side. To calculate the left/right 479 480 ratio of the gene of interest, its number of spots were measured on the left and right sides, 481 normalised to Hoechst signal and to the volume of the segmented region.

#### 482 Quantification of the geometry of the heart tube at E9.5

HREM images were used to segment the different compartments of the heart tube in 483 484 Imaris. Eight landmarks along the tube were extracted and used for quantifications as 485 described previously (12) : one at the exit of the outflow tract, one at the sulcus between the two ventricles, and one at the bifurcation of the two atria (taken as the venous pole). The five 486 487 other landmarks are centroids of cardiac regions: outflow tract, right ventricle, left ventricle, 488 atrioventricular canal and left atrium, and right atrium, segmented according to the expression patterns of Wnt11 and Bmp2 and anatomical landmarks such as cushion boundaries or the 489 490 interventricular or interatrial sulcus. Heart shapes were aligned in 3D using an in-house 491 MATLAB code so that the Z-axis corresponds to the notochord axis and the x-axis to a 492 perpendicular dorso-ventral axis. The orientation of the axis between the left and right

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493 ventricles, the distance of the venous pole to the notochord and the tube length were494 measured as in (17).

#### 495 Phenotyping of congenital heart defects

- 496 Hearts of *Notch3* mouse mutants were phenotyped at P0 in 3D images acquired by HREM,
- 497 based on the segmental approach (67) and IPCCC ICD-11 clinical code.

#### 498 Statistical Analyses

Statistical tests and p-values are described in figure legends and Table S3. Group allocation 499 500 was based on PCR genotyping. All sample numbers (n) indicated in the text refer to biological replicates, i.e. different embryos or different cells. Investigators were blinded to allocation 501 during imaging and phenotypic analysis, but not during quantifications. Pairwise Mann-502 503 Whitney-Wilcoxon tests were used to compare experimental groups, with a Benjamini-504 Hochberg correction applied on p-values when more than 2 populations are compared. A chi-505 square test was used to compare percentage distributions, or a chi-square test with Yates' 506 continuity correction for comparison with an expected value. Tests were performed with R and 507 Excel. Embryos which had been damaged during experiments were excluded for 508 quantification.

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#### 722 Supporting Information

723 Figure S1 related to Fig. 1. Transcriptomic approach. (A) Brightfield images of wild-type 724 embryos used for RNA sequencing at E8.5f. In the left panel, an outline of the dissected areas 725 is shown. The identification number of embryos is given. (B) Normalised read counts of genes 726 used to validate the threshold of expression in the transcriptomic analysis. The osteocyte gene Dmp1, inner ear marker Oc90, neuronal marker Neurod1 are used as negative controls and 727 *Mmp9* as a positive control, lowly expressed in left heart progenitors. Whisker plots show the 728 median, 25<sup>th</sup>- and 75<sup>th</sup> quartiles (boxes), and the extreme data points (whiskers). (C) 729 730 Normalised read counts of genes used as markers to control sample micro-dissection. En2, 731 Wnt8b are anterior markers, Hoxa5, Hoxb6 posterior markers, Rfx4, Tfap2b back markers, Isl1, Six2, Fqf8 second heart field markers, Tbx5, Mab2112 juxta-cardiac field (JCF) markers and 732 733 Myh7b, Myoz1, Tnnt1 cardiomyocyte markers. The dotted line indicates the threshold of 734 background expression. (D) Normalised read counts of genes used as markers to validate the 735 left-right dissection of samples. NODAL targets Lefty2 and Pitx2, as well as Six2 label the left 736 side. Nodal is turned off at E8.5f. \*p-value between the left and right sides < 0.05, \*\*\* 737 Benjamini-Hochberg corrected p-value < 0.00001 (LimmaVoom, n=4). (E) Violin plot of Dtx4 expression in single cells at E8.5 from (18), clustered as annotated (n= 89 Ec2, 59 Me2, 713 738 739 Me3, 221 Me4, 355 Me5, 65 Me6, 514 Me7). Dots are normalised reads per cell. (F) Violin plot of Notch3 expression in single Nodal-negative (n=1559) and Nodal-positive (n=309) cells of 740 cardiac clusters (Me3-7) of (18) at E8.5 (stage 1 to Late Heart Tube, wild-type embryos). 75% 741 742 (234/309) of Nodal-positive cells also express Notch3.

**Figure S2 related to Fig. 2. Normal** *Nodal* **expression in** *Notch3* **mutants. (A-B)** Whole mount RNAscope ISH of *Nodal* in *Notch3*<sup>-/-</sup> mutant embryos at E8.5c in anterior (A) and posterior (B) frontal views. The midline of the embryo is indicated by a yellow dotted line. A

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transverse section at the level of the node (see b1) is shown in b2. Filled and empty
arrowheads point to high and absent expression, respectively. (C-D) Transverse section of the
left lateral plate mesoderm, labelled by double wholemount RNAscope ISH of *Nodal* (red) and *Notch3* (white). The region of *Notch3* and *Nodal* co-expression is outlined in yellow (n=3). L,
left; LPM, lateral plate mesoderm; No, node; NT, neural tube; R, right.

Figure S3 related to Fig. 3. *Notch3* inactivation in mutants. (A) Schema of *Notch3* alleles in wild-types and *Notch3<sup>-/-</sup>* mutants, indicating the localisation of exons and primers used for RTqPCR. (B) Relative expression of *Notch3* in micro-dissected heart fields of littermate wild-types (n=5 E8.5e, 3 E8.5g), *Notch3<sup>+/-</sup>* (n=6 E8.5e, 6 E8.5g) and *Notch3<sup>-/-</sup>* (n=6 E8.5e, 4 E8.5g) embryos, quantified by RT-qPCR using the indicated primer pairs and normalised to wild-types. \*\*pvalue<0.01, \*\*\*p-value<0.001 (Pairwise Mann-Whitney Wilcoxon tests with Benjamini-Hochberg correction).

Figure S4 related to Fig. 4. *Notch3* expression after heart looping. Violin plot of *Notch3* expression in single cardiac cell transcriptomic between E11.5 and P9 (from (66)), clustered as annotated (n= 5422 atrial cardiomyocytes, 10493 ventricular cardiomyocytes, 2361 endocardium, 1176 vascular endocardium, 1012 epicardium, 3309 fibroblast like cells, 182 smooth muscle cells, 349 pericytes, 1032 macrophages, 33 B cells, 42 T cells, 17 dendritic cells, 23 natural killer cells, 22 neutrophils, 244 blood cells). Dots are normalised reads per cell.

Video S1 related to Fig. 1. Co-expression of *Notch3* and *Nodal*. *Notch3* (white) and *Nodal*(magenta) double whole-mount RNAscope ISH in a wild-type E8.5d embryo imaged in 3D by
lightsheet microscopy.

Table S1 related to Fig. 1. List of 597 differentially expressed genes used for Ingenuity
Pathway analysis, based on a fold change ≥1.2 and p-val ≤0.05 with either the LimmaVoom,

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- 769 DESeq2 or edgeR methods. Flags indicate the number of samples in which normalised read
- counts are  $\geq$  20 (n=4 embryos). Lf, left heart field at E8.5f; Rf, right heart field at E8.5f.
- 771 **Table S2. List of primers** used for genotyping and RT-qPCR.
- 772 **Table S3. Data.** Numerical data used to generate figure graphs along with statistical tests.

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