Focal Projections of Cat Auditory Cortex to the Pontine Nuclei

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ABSTRACT

The pontine nuclei (PN) receive projections from the auditory cortex (AC) and they are a major source of mossy fibers to the cerebellum. However, they have not been studied in detail using sensitive neuroanatomical tracers, and whether all AC areas contribute to the corticopontine (CP) system is unknown. We characterized the projection patterns of 11 AC areas with WGA-HRP. We also compared them with their corticothalamic and corticocollicular counterparts. A third objective was to analyze the structure of the CP axons and their terminals with BDA. Both tracers confirm that all AC areas projected to lateral, central, and medial ipsilateral pontine divisions. The strongest CP projections were from nontonotopic and polymodal association areas. Preterminal fibers formed single terminal fields having many boutons en passant as well as terminal endings, and there was a specific morphological pattern for each pontine target, irrespective of their areal origin. Thus, axons in the medial division had a simpler terminal architecture (type 1 terminal plexus); both the central and lateral pons received more complex endings (type 2 terminal plexus). Auditory CP topographical distribution resembled visual and somatosensory CP projections, which preserve retinotopy and somatotopy in the pons, respectively. However, the absence of pontine tonotopy suggests that the AC projection topography is unrelated to tonotopy. CP input to the medial and central pons coincides with the somatosensory and visual cortical inputs, respectively, and such overlap might subserve convergence in the cerebellum. In contrast, lateral pontine input may be exclusively auditory. J. Comp. Neurol. 497:959-980, 2006. © 2006 Wiley-Liss, Inc.

Indexing terms: corticopontine; auditory system; axons; cerebellum; corticofugal projections

Understanding the roles of the auditory corticofugal system has been an important theme, since these massive projections can affect many aspects of hearing, including frequency specific tuning (Winer et al., 1998, 2001; Suga et al., 2000; Yan and Ehret, 2001; Hazama et al., 2004), receptive field architecture (Xiao and Suga, 2002), and ascending information flow (Weedman and Ryugo, 1996; Winer et al., 1998, 2001; Coomes and Schofield, 2004; Schofield and Coomes, 2005), to name just a few. In spite of the fact that corresponding corticofugal auditory projections to the pontine nuclei (PN) have been known for many vears and documented in several species (Kusama et al., 1966; Diamond et al., 1969; Brodal, 1972c, 1983; Chiba, 1980; Wiesendanger and Wiesendanger, 1982a.b; Giménez-Amaya, 1988; Legg et al., 1989; Lee and Mihailoff, 1990; Schmahmann and Pandya, 1991; Knowlton et al., 1993; Glickstein, 1997), their neuroanatomical organization has received sparse attention with the most sensitive contemporary axoplasmic tracers, and their role in auditory function remains elusive. The present study addresses the nature of these projections with regard to auditory cortex (AC). More specifically, we ask whether each AC subdivision has such a projection, whether it is topographic, whether the patterns of projection from primary, nonprimary, and limbic-related cortex are distin-



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guished, if any AC projections overlap in the pons with those from other modalities, and how the corticopontine (CP) preterminal fibers are organized in the PN. The answers to these questions could encourage more explicit physiological and functional hypotheses about the roles of this system.

The cortical projections to the PN embody convergence and divergence. Thus, input from the entire sensory neocortex converges on these comparatively small nuclei, and their few neurons, in turn, project as mossy fibers that divide and terminate in much of the cerebellar cortex. This transformation from a focal to a highly divergent projection pattern would seem unnecessary if the PN served only to relay AC information to the cerebellum, whereas the segregation and convergence of cortical information from many regions prior to its cerebellar redistribution would seem more congruent with modern theories of cerebellar function (Brodal and Bjaalie, 1992).

The CP connections arise from many neocortical regions, some having specific patterns of projections (visual: Brodal 1972a,b; Albus et al., 1981; Bjaalie and Brodal, 1983, 1989; Bjaalie, 1985, 1986, 1989; Bjaalie and Diggle, 1990; Bjaalie et al., 1997; somatosensory: Brodal, 1968a,b; Overby et al., 1989; Bjaalie et al., 1997). Auditory CP projections have been documented in the rat (Wiesendanger and Wiesendanger, 1982a,b; Legg et al., 1989; Lee and Mihailoff, 1990), monkey (Schmahmann and Pandya, 1991; Glickstein, 1997), rabbit (Knowlton et al., 1993), and cat (Kusama et al., 1966; Diamond et al., 1969; Brodal, 1972c, 1983; Chiba, 1980; Giménez-Amaya, 1988). In the cat, degeneration studies showed a CP projection after lesions in the primary AC (AI), the second AC (AII), and the posterior ectosylvian gyrus (Ep) (Brodal, 1972c). AC input was apparently confined to the dorsolateral PN, a finding confirmed in later anterograde tract-tracing studies in the auditory region of the anterior ectosylvian sulcus (Giménez-Amaya, 1988). However, a single tracer injection in rat primary auditory cortex (Te1) (Wiesendanger and Wiesendanger, 1982b) produced discontinuous patches of anterograde labeling in some pontine regions, suggesting that the AC input may target discrete groups of neurons. This implies that prior degeneration or autoradiographic studies in the cat may not have revealed this projection fully.

There are reasons to predict that projections from different AC areas may differ qualitatively and/or quantitatively. In the cat, 12 AC areas have been identified by connectional and/or electrophysiological techniques. Tonotopic (primary) areas include AI, and the anterior (AAF), posterior (P), and ventroposterior (VP) fields (Merzenich et al., 1975; Knight, 1977; Reale and Imig, 1980; Phillips and Irvine, 1982; Phillips and Orman, 1984). Association (nonprimary) areas comprise the secondary auditory area (AII), the dorsal auditory zone/suprasylvian fringe (DAZ), and the dorsal (EPD), intermediate (EPI), and ventral (EPV) parts of the posterior ectosylvian gyrus (Schreiner and Cynader, 1984; Winer, 1992; He and Hashikawa, 1998). Finally, limbic/polymodal association areas include the anterior ectosylvian sulcus (AES), and the insular (Ins) and temporal (Te) cortices (Woolsey, 1960, 1961; Sindberg and Thompson, 1962; Avanzini et al., 1969; Fallon and Benevento, 1977; Fallon et al., 1978; Shinonaga et al., 1994; Clascá et al., 1997). Connectional studies show that each area has a particular pattern of connections with the medial geniculate body (MGB; Niimi and Matsuoka, 1979; Roda and Reinoso-Suarez, 1983; Imig and Morel, 1984, 1985; Morel and Imig, 1987; Rouiller et al., 1989; Brandner and Redies, 1990; Clarey and Irvine, 1990b; Bajo et al., 1995; Clascá et al., 1997; Huang and Winer, 2000; Winer et al., 2001; Kimura et al., 2003), the

| | Al | bbreviations | |
|-----|---|---------------|---|
| AAF | anterior auditory field | MCP | middle cerebellar peduncle |
| AES | anterior ectosylvian sulcus | Р | posterior auditory field |
| AI | primary auditory cortex | PFL | paraflocculus of the cerebellum |
| AII | second auditory cortex | PML | paramedian lobule of the cerebellum |
| BIC | brachium of the inferior colliculus | PVCN | posteroventral cochlear nucleus |
| CC | caudal cortex of the inferior colliculus | RP | rostral pole nucleus of the inferior colliculus |
| CG | central gray | RR | retrorubral field |
| CIC | commissure of the inferior colliculus | Sa | sagulum |
| CN | central nucleus of the inferior colliculus | \mathbf{SC} | superior colliculus |
| ср | cerebral peduncle | SGI | stratum griseum intermediale |
| CS | superior central nucleus | SgL | suprageniculate nucleus, lateral part |
| D | dorsal nucleus of the medial geniculate body | SgM | suprageniculate nucleus, medial part |
| DAZ | dorsal auditory zone/suprasylvian fringe | SGP | stratum griseum profundum |
| DC | dorsal cortex of the inferior colliculus | SGS | stratum griseum superficiale |
| DCN | dorsal cochlear nucleus | SI | primary somatosensory cortex |
| EPD | posterior ectosylvian gyrus, dorsal part | SII | second somatosensory area |
| EPI | posterior ectosylvian gyrus, intermediate part | SIV | fourth somatosensory area |
| EPV | posterior ectosylvian gyrus, ventral part | SN | substantia nigra |
| FIC | fissure intercomissural | Te | temporal cortex |
| FL | flocculus of the cerebellum | TRC | tegmental reticular nucleus, central division |
| GCL | cochlear nucleus granular cell domain | TRP | tegmental reticular nucleus, pericentral division |
| I-X | cerebellar lobules | V | ventral division of the medial geniculate body |
| IcT | intercollicular tegmentum | VP | ventral posterior auditory field |
| Ins | insular cortex | Planes of s | section: |
| IPA | apical interpeduncular nucleus | Α | anterior |
| IPC | central interpeduncular nucleus | D | dorsal |
| IPO | posterior interpeduncular nucleus, outer division | \mathbf{L} | lateral |
| IPP | paramedian interpeduncular nucleus | Μ | medial |
| LGB | lateral geniculate body | Р | posterior |
| LN | lateral nucleus of the inferior colliculus | R | rostral |
| M | medial division of the medial geniculate body | V | ventral |



Fig. 1. Cyto- and myeloarchitecture of the pontine nuclei (PN) in pairs of matched sections midway through the pons. **A,C,E,G**: Nissl preparations. The PN extend rostrocaudally for about 6 mm (stereotaxic levels A3.0 to P3.0). Specific nuclei within the pons were not recognized. Arrowheads: clusters of large neurons that extended caudorostrally. **B,D,F,H:** Corresponding myelin stained preparations.

Osmicated, epoxy-embedded whole-mounts 100 μm thick. Bridges of gray matter link the medial and lateral PN regions, crisscrossing the corticospinal axons that shape the cerebral peduncle (the oval profile). Vertical dashed lines mark the limits between the central, medial, and lateral pontine regions defined by reference to the cerebral peduncle. For abbreviations, see list.



Fig. 2. Micrographs of the injection of WGA-HRP deposit sites in some AC subdivisions (**A,D,G,J**). The DAB-reacted sections, counterstained for Nissl substance, were used to determine the boundaries of the injection sites and to identify cortical areas. The other panels

show the respective projections to the medial geniculate body (MGB; $\mathbf{B}, \mathbf{E}, \mathbf{H}, \mathbf{K}$) and the inferior colliculus (IC; $\mathbf{C}, \mathbf{F}, \mathbf{I}, \mathbf{L}$) similar to previously published results (Winer et al., 1998, 2001) and were used to confirm the locus of the cortical injection. For abbreviations, see list.

| TABLE | 1 | Summary | of | Experiments |
|-------|----|---------|-----|-------------|
| IADLL | 1. | Summary | OI. | Experiments |

| Area injected | Experiment | Tracer | Volume | Survival (days) | Figures |
|---------------|------------|------------|---------------|--------------------|----------|
| AI | 1217 | 5% WGA-HRP | 1.2 µl | 4 | 1A–C, 3 |
| AI (caudal) | 46 | 5% WGA-HRP | 0.6 µl | 3 | , |
| AI | 1382 left | 20% BDA | 1.32 µl | 6 | |
| AAF | 1219 | 5% WGA-HRP | 0.66 µl | 3 | |
| AAF | 1381 right | 20% BDA | 0.88 µl | 7 | 10B, 11A |
| Р | 1222 | 5% WGA-HRP | 0.45 µl | 3 | . , |
| Р | 105 | 5% WGA-HRP | 0.88 µl | 4 | |
| Р | 1361 | 20% BDA | 0.88 µl | 8 | |
| VP | 1317 | 5% WGA-HRP | 0.23 µl | 3 | |
| VP | 1358 | 20% BDA | 0.8 µl | 8 | |
| DAZ | 44 | 5% WGA-HRP | 0.8 µl | 3 | |
| DAZ | 1380 left | 20% BDA | 2.07 μl | 6 | 11B |
| AII | 1218 | 5% WGA-HRP | 0.6 µl | 4 | 1D–F, 4 |
| AII | 1301 | 10% BDA | Iontophoresis | 20 | |
| EPD | 23 | 5% WGA-HRP | 0.6 µl | 4 | 5 |
| EPD | 1371 left | 20% BDA | 0.88 µl | 6 | |
| EPI | 45 | 5% WGA-HRP | 0.6 µl | 3 | 1J–L, 6 |
| EPI | 1312 | 5% WGA-HRP | 0.2 µl | 3 | |
| EPV | 1313 | 5% WGA-HRP | 0.2 µl | 3 | |
| Те | 1224 | 5% WGA-HRP | 0.6 µl | 4 | 1G–I, 7 |
| Те | 1364 | 20% BDA | 0.88 µl | 7 | |
| Ins | 42 | 5% WGA-HRP | 0.45 µl | 3 | 8 |
| Ins | 1381 left | 20% BDA | 1.2 µl | 7 | 10A, 11C |

WGA-HRP, wheat germ aggutinin-horseradish peroxidase; BDA, biotinylated dextran amines.

inferior colliculus (Cooper and Young, 1976; Andersen et al., 1980a,b; Winer et al., 1998), the claustrum (Reale and Imig, 1983; Beneyto and Prieto, 2001), and the sagulum (Beneyto et al., 1998). It would be surprising if the CP projections were less specific or orderly. The absence of a modern connectional study in the cat using sensitive tracers is the primary impetus for the present experiments.

The following questions were addressed: 1) Do all AC areas contribute to the CP projection and, if so, does each project equally? 2) Does an AC area project to more than one pontine subdivision? 3) Do the CP fibers from different AC areas converge? 4) Are projections from functionally affiliated AC areas convergent? 5) Is there topographic relations for overlap for AC inputs and those from visual and somatosensory areas?

A complementary question concerns the terminal structure of the AC corticofugal projections, since studies of the MGB (Rouiller and Ribaupierre, 1990; Bajo et al., 1995; Winer et al., 1999) and inferior colliculus (Cooper and Young, 1976; Andersen et al., 1980b; Winer et al., 1998) have each demonstrated diverse arrays of their preterminal fibers whose effects on postsynaptic neurons might well differ. This diversity in the auditory CP system may have also different functional implications for their targets.

MATERIALS AND METHODS Surgical procedures

The experiments were performed in Spain and in the United States. All experimental procedures followed approved institutional animal care and use protocols and the provisions enumerated in the National Institutes of Health guidelines. Adult cats of either sex, free from middle ear infection and with a normal Preyer's reflex, were used. Sodium pentobarbital (40 mg/kg, intraperitoneal, i.p.) was given for anesthesia before surgery or perfusion. The animal's anesthetic status was monitored continuously and maintained at physiologically appropriate levels. After corneal and pedal reflexes were abolished, the animal was placed in a stereotaxic head holder and a

craniotomy exposed the AC. Targets were located by sulcal landmarks related to electrophysiological and anatomical investigations (Reale and Imig, 1980).

We analyzed the projections from 11 of the 12 auditory cortical areas, excluding area AES, which lies in the depth of the sulcus, and whose limits are variable, making electrophysiological identification indispensable for its precise location (Sindberg and Thompson, 1962; Clarey and Irvine, 1986, 1990a,b). Twenty-three hemispheres with injections confined to one architectonic field were available (Table 1). For topographical analysis we used unilateral injection of wheat germ agglutinin conjugated to horseradish peroxidase (WGA-HRP; 5% in sterile water; Sigma, St. Louis, MO) made by pressure through a glass pipette (tip diameter, $20-40 \ \mu m$) coupled to a nanoliter hydraulic injector (World Precision Instruments, Sarasota, FL). A second series of experiments used biotinylated dextran amines (BDA 10-20%, 3 K m.w.; Molecular Probes, Eugene, OR) in glass pipettes by pressure (dissolved in distilled water) or iontophoresis (tracer in normal saline). Since BDA bulk-fills axons by diffusion in a Golgi-like manner (Brandt and Apkarian, 1992), it allowed us to classify the CP preterminal fibers, including their terminal boutons, and to confirm the WGA-HRP studies independently.

Histological procedures

After a 2–4-day survival, the WGA-HRP animals were perfused intracardially with washout (0.1 M phosphate buffer [PB], pH 7.4, the vehicle for all solutions, and 0.02% lidocaine hydrochloride, 250-400 ml total) that preceded initial fixation (0.5% glutaraldehyde/0.5% paraformaldehyde/PB, 1,000 ml), followed by 1.5% glutaraldehyde/1% paraformaldehyde (PB, 2,000 ml). After 1–2 hours, the fixative was replaced with cryoprotectant (10% sucrose/PB). Tissue was frozen-sectioned serially at 60 μ m with a sliding microtome and several series of sections were reacted with tetramethylbenzidine (TMB; Mesulam, 1978) to reveal the anterogradely labeled axon terminals, then counterstained lightly with neutral red for cytoarchitectonic analysis. After



Fig. 3. PN projections from area AI. A: Lateral and transverse views of the left hemisphere. Black, center of the WGA-HRP deposit; stipple, tracer diffusion; drawing from Figure 2A. Four WGA-HRP deposits filled most of the central part of AI. Arrowheads: borders. **B–F:** Rostrocaudal series of representative coronal sections. Fine stippling represents axonal terminal fields of anterogradely transported

WGA-HRP revealed with TMB. Gray stippled represents the perimeter of PN. AI injections labeled moderate clusters of axons in the lateral and medial PN. Sparse labeling was also present in the central region abutting the pyramidal tract. Numbers (top right) are the stereotaxic anteroposterior level.



Fig. 4. AII projections to the PN. A: Four WGA-HRP injections were confined to AII. B-F: The dense labeling was concentrated in the lateral (caudally), medial, and central (rostrally) PN. There was a striking mass of axon terminals in the medial pons (A1.0; panel D) resembling that found in the same stereotaxic level after AI deposits (Fig. 3D).

locating the injection site in the TMB material, adjacent, untreated sections were incubated with nickel/ cobalt-intensified diaminobenzidine (DAB; Adams, 1981) to more accurately view its size. Unreacted sections were Nissl stained.

In the BDA experiments, animals were reanesthetized after 7–10-day survivals and perfused as above except with 4% paraformaldehyde. The tissue was cryoprotected in 30% sucrose and 50- μ m-thick frozen sections were cut, incubated in the ABC Elite reagent (Vector Laboratories, Burlingame, CA), and followed by nickel-cobalt intensified DAB treatment.

Data analysis

TMB-reacted sections counterstained with neutral red were used to draw architectonic borders and to plot anterogradely labeled axon terminal fields. Sections with representative patterns of anterograde labeling were selected for presentation and the locus of axons drawn at $125\times$, under darkfield illumination, through a drawing tube. The estimations of the strength of the anterograde labeling are qualitative values, and they were derived by examining the intensity and extension of the plots in all the sections with CP projections. The analysis was done by two viewers independently.

The MGB was processed to demonstrate the thalamocortical cells of origin. This served as an independent check on the cortical injection site, since each AC area has a unique pattern of thalamic input (Niimi and Matsuoka, 1979; Imig and Morel, 1984, 1985; Morel and Imig, 1987; Brandner and Redies, 1990; Clarey and Irvine, 1990b; Clascá et al., 1997; Huang and Winer, 2000; Winer et al., 2001; Kimura et al., 2003). Architectonic borders were drawn without reference to the CP labeling and we selected for the CP studies only experiments in which both the distribution of thalamic labeled cells and the anterogradely labeled axon terminals matched precisely that of prior work. The analysis of the axon terminal labeling in the IC was also used to corroborate the CP results (Cooper and Young, 1976; Andersen et al., 1980a,b; Winer et al., 1998; Imig and Morel, 1985; Huang and Winer, 2000). Only experiments with deposits confined to the gray matter and remote from architectonic borders were accepted for subsequent analysis.

Many examples of BDA-filled axons and their preterminal fibers were drawn from each injection with a $100 \times \text{oil}$ immersion lens under brightfield illumination and through a drawing tube; the locus of labeling followed the distribution of WGA-labeled fibers. A digital camera (Nikon DXM1200 and ACT-1 camera control program, v. 2.11, Melville, NY) was used for photomicrography and the photos were later edited with Adobe Photoshop 7.0 (Adobe Systems, San Jose, CA). Editing did not alter the primary data in either form or content.

RESULTS

Cytoarchitecture

Prior studies recognized several PN on topographic, rather than cytoarchitectonic, grounds. Borders between the nuclei were arbitrary and inconsistent (Brodal and Jansen, 1946). Later work showed that the proposed subnuclei were similar cytoarchitectonically and that there was no systematic relationship between these architectonic subdivisions and their extrinsic connections (Brodal and Bjaalie, 1992). The scheme chosen here is therefore purely topographic and conceptually neutral, referring to the pontine areas in the transverse plane as medial, central, and lateral, relative to the ipsilateral cerebral peduncle.

The PN were prominent in Nissl (Fig. 1A.C.E.G) and corresponding osmicated (Fig. 1B,D,F,H) preparations for cyto- and myeloarchitecture, respectively. The PN are ~ 6 mm long (from stereotaxic levels A3.0 to P3.0) and are traversed horizontally by many fibers, especially dorsally. These axons formed part of the cerebral peduncle and they divided the thin bridges of interstitial gray matter joining the medial and lateral pontine regions. The bridges contained many densely packed neurons. Cytoarchitectonically, the medial, central, and lateral regions were heterogeneous: each had small, irregular, cell-rich areas, with some neurons densely packed or dispersed. Clusters of larger neurons ($\sim 15 \times 20 \ \mu m$ in somatic diameter) were interspersed among more abundant small ($\sim 12 \times 14 \ \mu m$) neurons, and the large neurons were followed in consecutive sections, showing their caudorostral orientation (Fig. 1A,C,E,G: arrowheads).

Projections with WGA-HRP

Injection sites were ~ 2 mm or less in diameter, restricted to one AC area, and did not invade the white matter (Figs. 2A,D,G,J, 3A–8A). The position of the injection was compared with the retrograde and anterograde transport in the MGB (Fig. 2B,E,H,K) and with the anterograde pattern in the IC (Fig. 2C,F,I,L), and only those experiments with robust labeling confined to them were accepted for analysis of their CP projections. The terminal anterograde labeling was plotted from representative sections, excluding fibers of passage.

All AC areas projected to the PN, although the distribution of terminals was unique for each area. Results common to all experiments were: 1) each AC area projected to several pontine regions; 2) each pontine division received input from more than one AC area; 3) the lateral, medial, and central pons were labeled in every experiment, despite quantitative and qualitative differences; 4) axons arising from all the AC areas converged midway along the caudorostral pontine axis; 5) projections were ipsilateral, except for areas Ins and Te, which also projected contralaterally; 6) corticofugal projections from an AC area had a compartmental organization with small foci of PN terminals, some of which extended rostrocaudally; and 7) most lateral pontine labeling was caudal, whereas medial terminals were concentrated rostrally.

Tonotopic areas. For AI, we followed two strategies. In one experiment the tracer deposit was large enough to cover much of AI, and in another (not illustrated) the injection was restricted to caudal AI, whose cells prefer lower frequencies (Merzenich et al., 1975). These injections explored whether the AC CP projection was conserved across frequencies. The result in both experiments was topographically similar, suggesting CP convergence and a loss of frequency-specific organization, a finding in accord with prior work (Brodal, 1972c).

AI deposits labeled clusters of terminals in the lateral, central, and medial PN (Fig. 3). The most caudal sections (Fig. 3B,C) had labeling restricted to the lateral region, and formed dense foci. The lateral pons decreased in size rostral to A1.0 and, consequently, the afferents decreased



Fig. 5. A: Injections in EPD. **B-F:** The EPD labeling was far more widespread and farther from the pyramidal tract than that from AII deposits (Fig. 4); the strongest projection was to the dorsolateral PN.



Fig. 6. A: Projections from EPI produced both focal and widespread PN labeling. B-F: The EPI labeling spanned all PN, and a striking feature was the caudal central pontine concentration of axonal terminals.



Fig. 7. A: PN labeling after WGA-HRP injections in the temporal cortex (Te), caudal to the pseudosylvian sulcus. **B–F:** Well-defined axonal terminal fields were found in the lateral, central, and medial pontine region, respectively. There was also contralateral pontine input (F). Arrows: the midline.



Fig. 8. Labeling from the insular cortex (Ins) to the pons. A: Coronal section of the injection site location and tracer diffusion. The tracer was limited to Ins, and the deposit did not enter the white matter. **B-F:** The distribution of labeling resembled that in area Te

(Fig. 7), with terminal clusters segregated in the medial, central, and lateral PN, respectively, as well as the contralateral labeling near the midline.

progressively, while input to the central and medial pons increased (Fig. 3D–F). The CP fibers ending in the medial division formed several foci that were largest at A1.0 (Fig. 3D). Labeling more centrally was sparse and restricted to smaller, isolated terminal fields (Fig. 3D–F).

Projections from areas AAF, P, and VP are not illustrated since the distribution of labeling in each closely resembled the projection pattern described for AI deposits (Fig. 3). Nevertheless, the intensity of the CP labeling was slightly weaker and the foci of pontine axon terminals were more restricted.

Nonprimary auditory cortex. The AII CP projection (Fig. 4) resembled that for AI (Fig. 3): the labeling was in a similar rostrocaudal position (\sim P1.8–A2.2), the axon terminals were in the same pontine territory, and deposits in AI and AII both labeled dense foci in the medial pons at \sim A1.0 (Figs. 3D, 4D). Features unique to the AII projection were the robust and dense input to the central pons rostrally, where it terminated in the slender gray matter bridges crossing the cerebral peduncle (Fig. 4E,F). Other intense terminal foci lay in the medial and lateral pons (Fig. 4C,D).

Unlike AII CP connections, those from areas EPD (Fig. 5) and EPI (Fig. 6) had different PN labeling patterns. In both instances labeling was widespread rostrocaudally and mediolaterally, and ranged from light and diffuse to moderate. Nevertheless, the EPI projection alone labeled the central pons in the most caudal sections (Fig. 6B), and these projections spanned nearly the entire rostrocaudal extent, being thus the most widespread in our series. EPD (Fig. 5) projected most strongly to the lateral pons and had the weakest input medially. Nevertheless, the rostrocaudal projection resembled that after AI and AII deposits, concentrating in the lateral pons caudally and in the central and medial territories more rostrally.

Polymodal areas. This Te and Ins projection was restricted to three large masses of labeling in the medial, central, and lateral pons, respectively. Te had the heaviest projection.

Te (Fig. 7) and Ins (Fig. 8) were unique in having a bilateral CP projection. Ipsilateral input to the medial pons was a massive, extended oblique band oriented dorsolaterally to ventromedially, whereas the contralateral pontine labeling was symmetrical, smaller, and lighter (Figs. 7C–F, 8E,F, left side).

In summary (Fig. 9), all AC areas project to lateral, medial, and central PN, and the distribution and density of the terminal fields was topographic. The rostrocaudal extent of input to the lateral PN (\sim P1.8–A0.6) was similar in all experiments, except in EPI, and the strongest projection arose from area EPD. In contrast, the rostrocaudal position of the central pontine labeling varied in each experiment. Thus, Ins, Te, and EPI alone projected to the caudal central division, whereas the other areas sent fibers rostrally, with AII having the heaviest input and AI the smallest. In the medial pons, the principal input was from AI, AII, and EPI, and the smallest from EPD, and in all experiments the labeling was concentrated preferentially in the anterior pons.

BDA labeling of corticopontine axons

These experiments confirmed the WGA-HRP results and permitted a morphological analysis of the auditory CP preterminal fields. Their terminal distribution was virtually identical with both tracers, although the lighter projections from WGA-HRP injections in areas AAF, P, and VP was pronounced in the BDA experiments. Cortical BDA deposits often labeled only one axon or a few pontine fibers in a section. Only representative types of terminal plexuses commonly encountered are described below.

BDA-filled CP axons crossed the ipsilateral cerebral peduncle to enter the PN; often, their preterminal fibers were restricted to one pontine subdivision, suggesting that restricted regions of an AC area projects to a particular PN area. Single axon trunks $1-2 \ \mu m$ thick formed elaborate terminal plexuses in the PN ending in cascades of finer fibers that often ran in parallel to the dendrites of unstained pontine neurons. Irrespective of their areal origin or PN location, the terminal plexuses had both en passant and terminal boutons, forming aggregates or located throughout the long and sinuous contours, and with up to 100 boutons labeled in a 25- μ m expanse.

Moreover, there was a CP terminal projection pattern specific for a particular target. Fibers in the medial division formed lamellar arrays oriented dorsomedially. The BDA-filled axons entered ventrally and had a smooth preterminal trunk with a long intrapontine trajectory that turned abruptly before emitting a few, thin branches forming fascicles in neuropil-rich areas. They had a simpler terminal architecture (type 1 terminal plexuses) with some preterminal fibers running in straight line with few boutons along their trajectory (Fig. 10A:a) and as fibers with only terminal boutons (Fig. 10A:b). Terminal plexuses filled 50-80-µm-wide neuropil regions, and their boutons ranged from tiny (0.5 µm in diameter) to large (5 µm long by 2 µm wide).

The dorsolateral PN (Fig. 10B) received axons 1–3 μ m thick dorsolaterally with single terminal fields represented by focal projections with many en passant and other terminal endings that divided profusely within territories 100–200 μ m wide (Fig. 10B:c), and which are separated by bouton-free regions up to 40 μ m long (type 2 terminal plexuses).

Preterminal fibers reaching the central pons near the cerebral peduncle differed from others because of the unique local architecture. Their terminal plexus overlapped the thin gray matter bridges among the cerebral peduncle axons. Preterminal fibers entered medially and divided in narrow fascicles up to 600 μ m long and only 15 μ m wide (Fig. 11A–C). Small or medium-sized boutons were concentrated in elongated, dense masses in the neuropil, with few terminals in proximity to neuronal somata, resembling the type 2 terminal plexuses in the dorsolateral PN (Fig. 11A:d).

DISCUSSION

Topographical corticopontine organization

All 11 areas of cat AC project to the PN, suggesting that auditory influence on the cerebellum may be larger than previously thought, and that the influence is heterogeneous both in origin and, prospectively, in function.

Prior work included few AC areas (AI, AII, and EP) and noted projections only to the dorsolateral PN (Brodal, 1972c; Chiba, 1980; Kawamura and Chiba, 1979; Broch-Smith and Brodal, 1990). We extend that result, documenting that all AC areas have CP projections to the dorsolateral PN and, moreover, that all AC areas also project to the central and medial PN, where they termi-



Auditory Corticopontine Projections

Fig. 9. Summary of the AC projections input to the PN. Upper line, origin of CP projections; lower line, PN targets of AC input. Left side, anteroposterior level. Dot size is proportional to the ipsilateral input strength (see key) and represents a qualitative assessment of CP labeling intensity and spatial distribution. The conclusions were that

nate in clusters. These results resemble those in rat (Wiesendanger and Wiesendanger, 1982b), and rabbit (Knowlton et al., 1993) and they are consistent with the

axon terminals from all AC areas 1) converged midway along the pontine caudorostral axis, 2) the lateral projections target the caudal pons preferentially, and 3) the medial inputs ended in the rostral pons.

distribution of c-fos expression after acoustic stimulation that activated several PN regions (Qian and Jen, 1994; Vischer et al., 1994).



Fig. 10. Corticopontine terminals in the PN labeled by injection of BDA in Ins and AAF, respectively. A: An Ins deposit bulk-filled one axonal trunk in the medial PN that gave off a few, thin branches that ran parallel through neuropil-rich areas (type 1 terminal plexus). Some preterminal fibers had few boutons en passant (a) and others had only terminal boutons (b). Gray profiles, unstained somata viewed in Nomarski (differential interference contrast) optics. Dot in

inset, the locus of the axon. B: A fiber plexus in the dorsolateral PN after an AAF injection. Two axon trunks divided profusely within discrete territories 100–200 μm wide, with many en passant boutons and terminal endings and separated by bouton-free regions. The elaborate plexus (c; type 2 terminal plexus) may run parallel to the primary dendrites of pontine neurons.

Auditory CP projections diverge strongly throughout the PN (Fig. 12), a pattern that suggests diverse spheres of CP influence. Thus, AI projects moderately to the lateral pons (caudally) and to the medial pons (rostrally). This implies that widely separated neuronal territories either receive common projections and have common functions, or that AI output itself targets different functional and architectonic pontine subdivisions. The present results cannot resolve this quandary, but the fact that all the fields have highly dispersed spatial pontine targets would seem to favor the second hypothesis. Resolution of this point will require joint physiological-anatomical studies in which the effects of AC stimulation are assessed in the pons, with conjoint exploration of the specific cerebellar territories that receive these influences. A second inference is that there is likely spatial overlap of the primary, nonprimary, and limbic-related acoustic input. Again, our experimental design is unsuitable to confirm this conclusion, but even casual inspection of the summary data (Fig. 9) is suggestive; the alternative view that the projections from the different areas appear to converge but remain segregated synaptically-is equally appealing and will, again, require an approach that entails double anterograde labeling to demonstrate such convergence. In any event the AC pontine projection appears far more widespread and intricate in design than prior work suggests.

Studies of CP projections from other sensory cortices find patterns much like the present results. All areas of visual and somatic sensory cortex project to the PN, and the relative strength of each such areal projection is different and specific. Furthermore, visual and somatic sensory input forms patches and bands with rostrocaudal continuity and which are distributed throughout the PN (Brodal, 1968a,b, 1983; Brodal and Steen, 1983; Bjaalie and Brodal, 1989; Broch-Smith and Brodal, 1990). This feature suggests a degradation, or at least a superimposition by convergence, of cortical topography from each modality in the pons. However, in early development CP projections are organized differently: CP axons form a complex lamellar concentric pattern in the PN (Bjaalie et al., 1997), a pattern that preserves the simple topographic relation between the site of cortical origin and the location of the PN terminal fields (Leergaard et al., 1995). However, this pattern becomes obscured in mature animals by the postnatal retraction of some CP axons, transforming an otherwise continuous projection into an intricate mosaic of isolated patches and bands (Mihailoff et al., 1984; Bjaalie et al., 1997), much like that in the present study. Consequently, some fundamental principles of the CP system are conserved in all sensory modalities, including audition.

Is topographic information of the tonotopic areas conserved in the corticopontine projection?

The primary AC projections to the PN did not preserve the cortical topographic organization, and both global and restricted tracer injections in AI, and in other primary areas, produced similar labeling distributions that varied in density. This result is in close accord with experimental degeneration studies in which lesions in rostral or caudal AI produced much the same PN terminal distribution (Brodal, 1972c). Brodal proposed that AI CP projections, even though organized tonotopically, would be less precise than those of the corticocollicular or corticogeniculate projections (Diamond et al., 1969; Cooper and Young, 1976; Niimi and Matsuoka, 1979; Andersen et al., 1980a,b; Roda and Reinoso-Suarez, 1983; Imig and Morel, 1984, 1985; Morel and Imig, 1987; Rouiller et al., 1989; Brandner and Redies, 1990; Clarev and Irvine, 1990b; Bajo et al., 1995; Clascá et al., 1997; Winer et al., 1998, 2001; Kimura et al., 2003). A distinctive feature of AC organization (especially for areas AI, AAF, P, and VP) is a topographic arrangement of characteristic frequency, that is, the orderly arrangement across the cortical convexity. It is believed that the anatomical substrate conserving tonotopy along the auditory pathway is the precise organization of parallel ascending connections from each tonotopic nucleus to the subsequent structure. However, since such topographic preservation is absent in the AC CP projection, we infer that PN auditory-responsive neurons must not be organized tonotopically.

Moreover, a striking similarity of CP projections from AI (tonotopic area) and AII (nonprimary area) was seen in other studies describing projections to other premotor nuclei. Thus, whatever information that AI and AII convey to the pons, it cannot be solely related to tonotopic maps.

To verify whether the connectional results reflect a degraded topography, electrophysiological studies are essential. The only such study in cats that recorded from the PN during acoustic stimulation did not systematically explore all subdivisions (Aitkin and Boyd, 1978), as would be required to resolve the issue. However, studies in the bat find no tonotopic organization in any PN (Schuller et al., 1991; Kamada et al., 1992; Jen et al., 1993; Wu and Jen, 1995).

Work on the primary somatosensory and visual cortices showed that, unlike the auditory CP projection, there is a topographical distribution of CP input and, consequently, that somatotopy and retinotopy are preserved in the PN (Bjaalie, 1985, 1986; Overby et al., 1989; Leergaard et al., 2000; Leergaard, 2003). Thus, the auditory CP system is unusual since a point-to-point representation of the AC in the PN is not evident. Perhaps this organization is represented in several pontine regions, so that its topography within the PN would form a discontinuous map, recalling and resembling the fractured somatotopy in the spinocerebellar system (Shambes et al., 1978).

Axonal architecture

This is the first report on the light microscopic morphology of the auditory CP axons and boutons. Previous studies on the somatic sensory and visual CP axon terminals used electron microscopy only (Höllander et al., 1969; Mihailoff and King, 1975; Mihailoff et al., 1978; Mihailoff and Bourell, 1986), and considered the synaptic aspects of the CP terminals. Thus, they were unable to describe more global features of CP terminal organization such as their lamellar configuration or to document the terminal segregation and clustering as we did with BDA.

Only comparatively few AC neurons project to the pons, and their somata are dispersed in the cortex (Keizer et al., 1987). Moreover, the restricted tracer injections labeled very few pontine axons, although these branched robustly at their target. Many of the BDA deposits often labeled only one or two pontine axons trunks in a section, even when they produced far more abundant and widespread anterograde labeling in the auditory thalamus (Fig. 2B,E,H,K;



Fig. 11. BDA-filled single CP axon terminals after injections in areas AAF (\mathbf{A}), DAZ (\mathbf{B}), and Ins (\mathbf{C}). All such preterminal fibers formed narrow fascicles with the boutons concentrated in elongated, dense masses of endings (d), mainly in the neuropil and with few terminals near perikarya, irrespective of their areal origins. This organization resembled that described for the type 2 terminal plexus.

Winer et al., 2001) and midbrain (Fig. 2C,F,I,L; Winer et al., 1998).

The morphological features of the CP terminal plexus are independent of their AC origin, but their form does reflect the particular orientation and distribution of the PN cells that they appear to target. This finding is in accord with the differential structure of corticothalamic plexuses terminating in different MGB subnuclei (Winer et al., 1999). All CP preterminal fibers ending in a region have similar morphologic characteristics; they may share a common pattern of synaptic transmission irrespective of the cortical area of origin.

Some restricted regions of AC target one pontine region exclusively. This implies that different cells in an AC area may project to different pontine regions, and the several patterns of their terminal arbors in each pontine region might underlie the transmission of different types of auditory information. Studies with multiple anterograde and retrograde tracers will be required to address this question.

Auditory CP plexuses differ from other corticofugal projections such as those targeting the cochlear nucleus (Jacomme et al., 2003), MGB (Winer et al., 1999), IC (Winer et al., 1998), claustrum (Beneyto and Prieto, 2001), and sagulum (Beneyto et al., 1998). Many of these axon terminal fields are widespread and diffuse, with sparse ramifications extending in several axes. The disposition of their boutons would require massive spatial and temporal convergence to elicit a concerted response, and, thus, they might function more as synaptic modulators than drivers. Although type I CP plexuses do not have such an architecture, they have boutons in the fiber-rich fascicles that would be ideal candidates to excite pontocerebellar neurons tonically, such that auditory input might influence muscle tone or motor planning continuously. In contrast, the larger auditory type 2 CP axons have multiple ramifications with abundant en passant boutons that form plexuses concentrated focally. This may reflect that a given small AC region targets few pontine neurons, providing a structural basis for a rapid, focal control essential for ongoing cerebellar motor coordination, reflecting a synaptic driving function. This classification of axons on the basis of their preterminal plexus is in good agreement with the postulated driver and modulator categories (Sherman and Guillery, 1998) perhaps corresponding to CP categories type 2 and type 1, respectively.

A further possibility is that the type 2 endings contribute to a discontinuous representation of characteristic frequency in cerebellar cortex that is analogous to the fractured maps reported for somatic sensory input (Shambes et al., 1978). Resolving these competing and complementary (but not necessarily mutually exclusive) hypotheses will require further electrophysiological studies in conjunction with transneuronal tract tracing methodologies. Finally, other implications may follow when the architecture of IC projections terminating in the PN (Hashikawa, 1983) is elucidated to derive a more inclusive profile of the several descending influences converging on the PN (Fig. 12).

Possible functional correlates

Auditory information reaching the cerebellum is necessary for integrating and/or translating the sensory feedforward projections to the premotor and motor areas for movement planning and execution (Kamada et al., 1992). The PN is thus a key conduit in focusing the AC projections before they reach the cerebellum.

Topographic studies found that CP neurons are dispersed throughout AC (Keizer et al., 1987). This arrangement departs from the tonotopic organization of AC and may relate to physiological findings for a discontinuous spatial map formed by isolated neurons widely distributed throughout AC, and which encodes sound source location in auditory space using a population processing strategy (Phillips and Brugge, 1985; Clarey et al., 1994; Brugge et al., 1996; Middlebrooks et al., 1998; Mickey and Middlebrooks, 2001). Such an arrangement is congruent with the diffuse organization of characteristic frequency in area AII (Schreiner and Cynader, 1984), and with the focal and mosaic nature of CP projections (present results).

From this perspective, PN physiological recordings (Aitkin and Boyd, 1978) may support the hypothesis of the preservation of an AC map of the acoustic space through the auditory CP projection. For instance, the cortical neurons forming or contributing to this map and their pontine targets share important features related to sound localization, such as the predominance of excitatory-excitatory units (Brugge et al., 1969; Aitkin and Boyd, 1978; Roth et al., 1980; Middlebrooks and Pettigrew, 1981; Rajan et al., 1990; Middlebrooks and Green, 1991; Toronchuk et al., 1992; Korte and Rauschecker, 1993; Clarey et al., 1994; Middlebrooks et al., 1998), and broad frequency tuning (Aitkin and Boyd, 1978; Middlebrooks and Green, 1991). Moreover, two other structures that contain maps of the auditory space, the lateral/external nucleus of the inferior colliculus (Aitkin and Boyd, 1978) and its avian homologue (Knudsen and Konishi, 1978; Peña, 2002), and the superior colliculus (Matsuzaki and Kyuhou, 1997), also project to the pons, thus supporting a role for spatial representation in the PN. Considering that retinotopy and somatotopy both encode spatial information, it seems logical to predict that sound source localization, rather than precise characteristic frequency tuning, would be the dominant dimension of acoustic information delivered by the PN through the CP projection, and thus enabling AC to influence premotor functions via the cerebellum.

Cytoarchitectonic implications

It has proved difficult to subdivide the PN using classical architectonic tools (Brodal and Jansen, 1946). However, territorial subdivisions exist that may be identified by their AC input patterns (Fig. 12). Thus, the lateral pontine region may be exclusively auditory, since it is apparently the sole target of AC and auditory subcortical projections (Kawamura and Brodal, 1973; Kawamura, 1975; Kandler and Herbert, 1991; Ohlrogge et al., 2001). Therefore, lateral pontine input to the cerebellum would be acoustic, with EPD as the principal source and other AC areas also projecting. In contrast, in the central and medial pons, AC projections converge with visual and somatic sensory input. This suggests that spheres of multimodal influence predate the emergence of modalityspecific nuclei in phylogenetically ancient brain stem regions (Ramon-Moliner and Nauta, 1966).

The auditory and the somatic sensory CP projections end chiefly in the medial pons (Brodal, 1968a,b; Chiba, 1980; Broch-Smith and Brodal, 1990; present results), where their preterminal fibers form oblique bands. All AC areas projected to the rostral and medial pons, with AI, AII, EPI, and Te having a dense dorsolateral focus (at



Fig. 12. Schematic of PN inputs from the AC, IC, and cochlear nucleus, and the pontine projection to the cerebellum and the cochlear nucleus. The PN receives descending inputs from all AC areas (1) that terminate in medial pons where they coincide with cortical somatosensory projections, in the central pons, a target also of cortical visual axons, and in the lateral pons, and which would be exclusively auditory. The PN also receive descending fibers from (2), the dorsal and lateral nuclei of the ipsilateral IC, and ascending input from (3), the ipsilateral posteroventral cochlear nucleus. In turn, the PN project to

the contralateral cochlear nucleus granule cell domain (4), the lateral pons projects to auditory regions of the cerebellar cortex (5), while the precise target of the medial and central pons is unknown (6). Auditory inputs to the PN may be modified through indirect input to auditory centers that project to the PN, like those arising in the AC (7). The principal references for these projections are: 1) present results, 2) Aas (1989), 3) Thompson (1998), 4) Ohlrogge et al. (2001), described in rat, 5) Chiba (1980), 6) Brodal (1983), and 7) Winer et al. (1998).

 \sim A1.0) apparently overlapping with that arising from the second somatosensory area (SII: Brodal, 1968a,b; Broch-Smith and Brodal, 1990). This implies that somatosensory and auditory information may converge and be integrated in the medial pons.

The visual cortex input targets the rostral ventral pontine region (Bjaalie and Brodal, 1989; Broch-Smith and Brodal, 1990) and thus may overlap with the auditory CP terminals from area AII (present results), perhaps ultimately to terminate in the same cerebellar region for subsequent, premotor-related actions that require multisensory integration (Aitkin and Rawson, 1983). However, our results cannot specify whether the somatosensory, visual, and auditory CP axons converge on the same postsynaptic PN neurons, or form contiguous, but synaptically independent, terminal fields and plexuses. Elucidating any proposed role of the PN as integrators of inputs from different sensory modalities will require conjoint physiological studies and tract-tracing experiments.

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