

1 **A new kind of naturally occurring mouse model for Usher Syndrome generated by**  
2 **crossing with CBA/J mice**

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4 Li Shaoheng<sup>1,3\*</sup>, Jiang Yihong<sup>1\*</sup>, Zhang Lei<sup>4\*</sup>, Yan Weiming<sup>5</sup>, Wei Dongyu<sup>1</sup>, Zhang Min<sup>1</sup>,  
5 Chen Tao<sup>1,2</sup>, Wang Xiaocheng<sup>1,2#</sup>, Zhang Zuoming<sup>1#</sup>, Su Yuting<sup>1#</sup>

6  
7 Author affiliations

8 <sup>1</sup>Aerospace Clinical Medical Center, School of Aerospace Medicine, Air Force Medical  
9 University, Xi'an, China, <sup>2</sup>Department of Aviation Medicine, Xijing Hospital, Air Force  
10 Medical University, Xi'an, China, <sup>3</sup>Department of Ophthalmology, Eye Institute of Chinese  
11 PLA, Xijing Hospital, Fourth Military Medical University, Xi'an 710032, China, <sup>4</sup>Shaanxi  
12 Eye Hospital, Xi'an People's Hospital (Xi'an Fourth Hospital), Xi'an 710004, Shaanxi  
13 Province, China, <sup>5</sup>The 900th Hospital of Joint Logistic Support Force, PLA, Fuzhou, China.

14 \*These authors have contributed equally to this work

15  
16 **Corresponding author**

17 Wang Xiaocheng: email: wxcnose@126.com

18 Zhang Zuoming: email: zhangzm@fmmu.edu.cn

19 Su Yuting: email: sssusyt@163.com

20  
21 **Abstract**

22 **Background:** Our laboratory previously discovered a strain of Kunming mice, referred to as

23 KM<sup>ush/ush</sup> mice, that exhibits notable abnormalities in electroretinogram (ERG) readings and  
24 elevated thresholds for auditory brainstem responses (ABRs), which resemble the  
25 characteristics of Usher Syndrome (USH). In the current investigation, our objective was to  
26 perform crossbreeding between KM<sup>ush/ush</sup> mice and CBA/J mice with the aim of establishing  
27 novel recombinant inbred lines and subsequently analyzing their phenotypic and genotypic  
28 characteristics.

29 **Methods:** ERG, ABR testing, fundus morphology, histological examination of the retina and  
30 inner ear, qRT-PCR, western blotting, DNA sequence analysis and behavioral experiments  
31 were performed to assess the phenotype and genotype of the progeny lines.

32 **Results:** The results revealed no significant waveforms in the ERG and normal ABRs in the  
33 F1 hybrid. The F2 hybrid exhibited segregation of hearing loss phenotypes. The J1<sup>ush/ush</sup> mice  
34 had a retinitis pigmentosa (RP) phenotype with elevated ABR thresholds, while the J2<sup>ush/ush</sup>  
35 mice exhibited only the RP phenotype. Interestingly, J1<sup>ush/ush</sup> mice showed significantly  
36 elevated ABR thresholds from Day P28 compared with wild-type mice, but histological  
37 analyses showed no significant structural changes in the organ of corti or spiral ganglia, and  
38 qRT-PCR and DNA sequencing showed that the Adgrv1 gene and its expression were  
39 significantly altered in J1<sup>ush/ush</sup> mice. Further elevation of ABR hearing thresholds by P56  
40 manifested only as a reduced density of spiral ganglion cells, which was significantly  
41 different from the previous pattern of cochlear alterations in CBA-2<sup>ush/ush</sup> mice.

42 **Conclusions:** We successfully introduced the hearing loss phenotype of inbred mice with  
43 Usher syndrome into CBA/J mice, which provides a good animal model for future studies on  
44 the important physiological role played by the Adgrv1 gene in the inner ear structure and for

45 therapeutic studies targeting Adgrv1-mutant Usher Syndrome.

46

47 **Keywords:** Usher Syndrome, Adgrv1, Electroretinogram, Auditory brainstem response,

48 Inbred strain, Mutation

49

## 50 **Background**

51 Usher Syndrome (USH) is a group of autosomal recessive disorders characterized by  
52 retinitis pigmentosa (RP) and various degrees of hearing loss with or without vestibular  
53 abnormalities. Regarding RP, USH is genetically heterogeneous [1]. Additionally, USH is the  
54 most common cause of deaf-blindness worldwide, the combined prevalence of which exceeds  
55 400,000 cases, seriously reducing patients' quality of life [2]. Patients are classified into three  
56 subtypes - USH1, USH2, and USH3 - according to the extent of hearing loss, vestibular  
57 function, visual field impairment, progression and age of onset [3]. The limitations of this  
58 classification are gradually becoming apparent. With the utilization of next-generation  
59 sequencing technology, the list of known pathogenic mutations in USH genes has expanded,  
60 twelve genes have been identified that correspond to the clinical subtype  
61 (<https://hereditaryhearingloss.org>), and the nonspecificity and variability of the clinical  
62 picture have further complicated the clinical diagnosis. The current treatment for USH is  
63 mainly symptom-based, using hearing aids or cochlear implants to ameliorate sensorineural  
64 hearing loss [4] and visual aids and retinal prostheses to delay vision loss caused by RP [5].  
65 Nevertheless, the existing therapeutic effect is limited, and none of these methods are capable  
66 of resolving the pathophysiologic mechanisms underlying USH. Currently, to treat and cure

67 the inner ear and retina, various gene therapies are being developed [3], including utilizing  
68 CRISPR tools [6] and intravitreal injection of an antisense oligonucleotide as a mutation-  
69 specific treatment for USH2A. However, the outcomes of these studies have not yet been  
70 reported, and currently, there is no widely applicable, safe, and effective treatment method  
71 for patients with Usher Syndrome.

72 USH2 is the most common subtype of USH, accounting for more than half of all USH  
73 patients [7, 8]. Three causative genes have been associated with this subtype, namely, *Ush2a*  
74 (*USH2A*), *Adgrv1* (*USH2C*), and *Whrn* (*USH2D*). *Adgrv1* mutations are present in  
75 approximately 5-19% of clinical cases, second only to *Ush2a* [9]. *Adgrv1* is expressed in  
76 several tissues, including brain, lung, kidney, eye, and inner ear [10], and the expression of its  
77 protein product (very large G-protein-coupled receptor 1, *Vlgr1*) is sensitive to changes in the  
78 extracellular  $Ca^{2+}$  concentration in hair and photoreceptor cells. Defects in *Vlgr1* may cause  
79 imbalances in the extramembrane  $Ca^{2+}$  concentrations of both of these cell types [11], but the  
80 exact mechanism remains unclear.

81 Various animal or cell models have contributed to the discovery of the molecular  
82 mechanisms of USH and the preclinical evaluation of novel therapeutics [12]. Our laboratory  
83 prescreened a naturally occurring mouse model with RP and deafness under the Kunming  
84 (KM) background, named  $KM^{ush/ush}$  [13]. To understand the genetic background of  $KM^{ush/ush}$   
85 mice and investigate the causes of its auditory and ocular impairments, we crossed  $KM^{ush/ush}$   
86 mice with CBA/Caj mice (“normal hearing” controls) [14] to segregate the ocular and  
87 auditory phenotypes and found that retinal degeneration in  $KM^{ush/ush}$  mice was caused by a  
88 *Pde6b* mutation, while auditory impairment was caused by an *Adgrv1* mutation. The resulting

89 CBA-2<sup>ush/ush</sup> mice represent an animal model for a naturally inherited phenotype of hearing  
90 loss, with a mutation in the human Usher syndrome 2C gene, *Adgrv1*. This is the first report  
91 of a mouse strain with hearing loss being isolated from an RP ancestor, and this animal model  
92 can be used to study the pathological mechanisms of RP/USH. However, the cochleae of  
93 CBA-2<sup>ush/ush</sup> mice show obvious morphological changes at an early stage, which is not  
94 suitable for the study of therapeutic approaches to USH and related drug development.  
95 Furthermore, in the subsequent breeding process, CBA-2<sup>ush/ush</sup> and CBA-3<sup>ush/ush</sup> mice showed  
96 inbreeding-related declines, which greatly hindered the subsequent study of the pathological  
97 mechanisms of RP/USH. CBA/J and CBA/CaJ are almost interchangeable as “normal-  
98 hearing” controls for hearing and deafness research, but there are significant differences in  
99 the pattern of inner ear damage in sensorineural deafness [15]. Therefore, in this experiment,  
100 we utilized CBA/J mice, which are widely used in the study of hearing and cochlear function  
101 [16]. To introduce the pathogenic gene from KM<sup>ush/ush</sup> mice into the CBA/J background, we  
102 crossed KM<sup>ush/ush</sup> mice with CBA/J mice. After inbreeding the F1 hybrid, two phenotypic  
103 segregations of ERG without waveforms and elevated ABR thresholds appeared in the F2  
104 hybrid. We used functional, morphological, molecular biology, and other technical methods  
105 to confirm that the Usher phenotype (with the KM background) was still present, and after  
106 identifying the phenotype and genotype of the corresponding offspring (in which traits were  
107 segregated after crossbreeding), we bred new mice with the CBA/J background. These mice  
108 are a novel animal model for studying the *Adgrv1* mutation in a CBA/J background and for  
109 audiology research in general.

110

111 **Methods**

112

113 ***Animal model generation***

114  $KM^{ush/ush}$  mice were obtained from the SPF animal facility of the Aerospace Clinical  
115 Medicine Department of the Air Force Medical University (License No. #SYXK2012-004).  
116 The mice had a KM background and were maintained and expanded as a colony through 38  
117 generations of sibling mating. This strain contains mutations in both *Pde6b* and *Adgrv1* [13].  
118 CBA/J mice (#11004A) were purchased from Beijing Huafukang Biotechnology Co., Ltd.  
119 Male  $KM^{ush/ush}$  mice were crossed with female CBA/J mice to obtain the F1 hybrid, and F1  
120 hybrid mice were inbred to obtain F2 hybrid. Each generation of mice was subjected to  
121 electroretinogram (ERG) and auditory brainstem response (ABR) evaluations at 28 days old  
122 (P28). F2 hybrids segregated according to RP and hearing loss phenotypes were grouped with  
123 mice with the same ERG and ABR phenotypes and then inbred and retained for further  
124 passages (between littermates with the same phenotype as their respective mothers). They  
125 were designated J2<sup>ush/ush</sup> (reduced ERG amplitude, normal ABR threshold, below 50 dB) and  
126 J1<sup>ush/ush</sup> (reduced ERG amplitude, elevated ABR threshold, above 50 dB) mice. All animals  
127 were housed under the same conditions in the SPF animal facility and exposed to 35 lx of  
128 light. All animal experiments were conducted according to the Association for Research in  
129 Vision and Ophthalmology (ARVO) Statement on the Use of Animals in Ophthalmic and  
130 Vision Research and approved by the Animal Care and Use Committee of the Air Force  
131 Medical University. Tissues from at least 3 animals were used in each experiment for  
132 statistical validation.

133

134 ***Electroretinogram (ERG)***

135 ERGs were recorded at P28. The experimental animals were placed in a dark-adapted  
136 chamber for >12 h before the experiment. Then, the animals were deeply anesthetized with an  
137 intraperitoneal injection of 1% sodium pentobarbital and 10% Sumianxin II. Their pupils  
138 were dilated using compound tropicamide eye drops, and corneal surface anesthesia was  
139 performed using oxybuprocaine hydrochloride eye drops. The action electrode was placed on  
140 the corneal surface, the reference electrode was inserted under the skin of the cheek, and the  
141 grounding electrode was inserted under the skin of the tail. Dark-adapted 3.0 ERG responses  
142 were recorded using a computerized system (MonPack 3; Metrovision, France) according to  
143 ISCEV guidelines [17].

144

145 ***Auditory brainstem response (ABR)***

146 ABR recording was carried out at P14, P28, and P56 using an ABR workstation  
147 (Otometrics, Taastrup, Denmark) in a sound attenuation chamber. Test electrodes were  
148 placed subcutaneously (cranial apex for recording electrodes, postauricular mastoid for  
149 reference electrodes, and caudal for grounding electrodes). Short tones (click mode) starting  
150 at 95 dB sound pressure level (SPL) were used, and if an obvious and reproducible waveform  
151 was detected, quieter tones (decreasing in increments of 5 dB) were played until no obvious  
152 waveform was detected. The threshold value was taken as the hearing threshold of the mouse.  
153 If no waveform was detected at 95 dB, the hearing threshold was recorded as 95 dB. The  
154 ABR waveform for a short tone (click mode) stimulus usually consists of four or five

155 response peaks, denoted as I, II, III, IV, and V [18].

156

### 157 ***Fundus photography and fluorescein fundus angiography (FFA)***

158 Mice were anesthetized with intraperitoneal injections of 1% sodium pentobarbital and  
159 10% Sumianxin II, and the pupils were dilated with 0.5% tropicamide-norepinephrine  
160 ophthalmic drops. The cornea was covered with sodium hyaluronate gel. The lens of the  
161 fundus imaging system (OPTO-RIS; OptoProbe, Canada) was aligned with the animal's  
162 pupil, and photographs were taken when the image was clear. One percent fluorescein  
163 sodium was injected intraperitoneally, and mice were photographed after 2 min, the injected  
164 fluorescein sodium was completely discharged 24 h later. Images were assessed to determine  
165 whether the structure of the optic disc was normal and whether there was exudation and/or  
166 hemorrhage in the fundus.

167

### 168 ***Measurement of retinal outer nuclear layer (ONL) thickness***

169 The mice were euthanized at P28, and their eyeballs were rapidly removed. Appropriate  
170 amounts of eyeball fixative were administered into the eyeballs using a syringe, and the  
171 eyeballs were also immersed in eyeball fixative and fixed at 4 °C for 48 h. The completely  
172 fixed eyeballs were dehydrated, paraffin-embedded, and sectioned. HE staining was  
173 performed according to the manufacturer's instructions. After staining, the sections were  
174 sealed with neutral gum. Retinal section images were taken using a digital imaging system  
175 (DP71; Olympus, Japan) to observe the ONL thickness in a randomly selected field of view  
176 on both sides of the optic nerve.

177

178 ***Microanalysis of cochlear cross-sections***

179 After the mice were sacrificed at P14, P28, or P56, their inner ears were dissected. The  
180 cochlea was perforated apically to allow adequate penetration of the fixative (4%  
181 paraformaldehyde). After fixation at 4 °C for 24 h, the cochlea was decalcified with 10%  
182 EDTA at 4 °C for 1 week. Specimens were dehydrated and embedded in paraffin before  
183 being sectioned, placed on slides, and stained with HE. Cochlear section images were taken  
184 using a digital imaging system (DP71; Olympus, Japan) to identify the basal profile of  
185 Rosenthal's canal and to determine its total area at low magnification. The magnification was  
186 then increased by 16- to 25-fold, and the spiral ganglion cells were counted. The spiral  
187 ganglion cell density was calculated by dividing the number of spiral ganglion cells by the  
188 measured area.

189

190 ***Western blotting***

191 Retinal tissues were collected and homogenized. After centrifugation, extracts  
192 containing equal amounts of protein (10 µg) were aliquoted, electrophoresed, transferred to a  
193 PVDF membrane, and probed with primary antibodies against PDE6B (#NBP2-58654;  
194 Novus Biologicals USA; at a 1:1000 dilution) and GAPDH (#10494-1-AP; Proteintech,  
195 Rosemont, IL, USA; at a 1:5000 dilution) at 4 °C overnight. The membrane was incubated  
196 with a goat anti-rabbit horseradish peroxidase-conjugated secondary antibody (#EK020;  
197 Zhuangzhi, Xi'an, China; 1:8000 dilution) at room temperature for 2 h. The protein bands  
198 were detected by an enhanced chemiluminescence system (Thermo Fisher Scientific, USA).

199 The intensity of the protein bands was determined using ImageJ software (National Institutes  
200 of Health, USA). GAPDH was used as a loading control.

201

### 202 ***qRT-PCR***

203 Cochlear RNA was extracted using a TSINGKE TSP413 RNAPrep FastPure kit (Beijing  
204 Tsingke Biotechnology Co., Ltd.). Target genes were reverse transcribed and amplified using  
205 TSINGKE TSK322S SynScript™ III cDNA Synthesis Mix according to the manufacturer's  
206 instructions, and real-time PCR (RT-PCR) was carried out using TSINGKE TSK322S  
207 SynScript™ III cDNA Synthesis Mix (SYBR Green I) and TSE201 2×TSINGKE® Master  
208 qPCR Mix (SYBR Green I). Primers for subsequent RT-qPCR were designed using the  
209 Beacon Designer 7 (Table 1). All reactions were performed in triplicate.  $\beta$ -Actin was used as  
210 an endogenous control. Gene expression levels were normalized to the expression levels of  $\beta$ -  
211 actin.

212

### 213 ***Exon trapping and sequence analysis***

214 Genomic DNA was extracted from the tail tissues of mice. Exon sequencing of the  
215 targeted genes was performed by Tsingke Biotechnology Co., Ltd. Briefly, DNA quality was  
216 assessed using 1% agarose gel electrophoresis and PicoGreen dsDNA assays (Invitrogen,  
217 USA). All of the coding exons of the target genes were assessed to detect single nucleotide  
218 variants and insertions/deletions. The design of primers for Sanger sequencing was  
219 accomplished through the utilization of Beacon Designer 7. (Table 1).

220

221 ***Behavioral experiment***

222 The sensory behavior of the mice was measured using an open-field apparatus (50 × 50  
223 × 50 cm, O'Hara and Co. Ltd., Japan). Each mouse was placed at the center of the open-field  
224 apparatus. The center area was defined as a square 10 cm away from the wall. A video  
225 imaging system (EthoVisionXT; Noldus Information Technology, The Netherlands) was used  
226 to record the distance each mouse walked and the time it stayed in the central area for 5 min  
227 [19]. Additionally, the elevated plus maze (40 cm length, 10 cm width, 50 cm height; O'Hara  
228 and Co., Ltd., Japan) was used. The closed arms were enclosed by a 20 cm high black wall.  
229 Each mouse was placed in the central area of the maze, facing one of the open arms. The time  
230 spent in the open arms was measured for 5 min with the EthoVisionXT video-imaging system  
231 [20].

232

233 ***Statistical analyses***

234 All experimental data were analyzed using GraphPad Prism 9, and the experimental  
235 results are expressed as the mean±SEM. T test was used to compare data between groups,  
236 and statistical significance was defined as P<0.05.

237

238 **Table 1**

239 Primers used in the present study.

<b>Primer name</b>	<b>Sequences (5'-3')</b>	<b>Destination</b>
Adgrv1(Mus)-F	GAAGTGCCCATCAGTGGGAT	RT-qPCR
Adgrv1(Mus)-R	TGCATTCTGATTTCTGCTAGA	

$\beta$ -Actin(Mus)-F	AACAGTCCGCCTAGAAGCAC	RT-qPCR
$\beta$ -Actin(Mus)-R	CGTTGACATCCGTAAAGACC	
Adgrv1-31-F	ACATCTGTTCATGTAGCAGAAAATC	Sanger sequencing
Adgrv1-31-R	GCCACTACATCAATATCAGAAGTAC	
Pde6b-7-F	CTATCTAAACTGCGAACGGTATTCA	Sanger sequencing
Pde6b-7-R	TGTCAGAGACTCCATAAGGACTTCA	

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240

## 241 Results

242

### 243 *Stable inheritance of USH phenotypes in $KM^{ush/ush}$ mice with well-maintained pathogenic* 244 *genotypes*

245 Phenotypic and genotypic analysis of  $KM^{ush/ush}$  mice at P28 revealed dark-adapted 3.0  
246 ERG responses with a marked disappearance of waveforms (Fig. 1a). Fundus imaging results  
247 suggested severe retinal degeneration with attenuation of the retinal vessels (Fig. 1b). The  
248 ONL in the retina of  $KM^{ush/ush}$  mice completely disappeared (as seen in retinal sections; Fig.  
249 1c). Western blotting showed that the relative protein expression of Pde6b in the retinal  
250 tissues of KM and  $KM^{ush/ush}$  mice was  $1.12 \pm 0.19$  and  $0.56 \pm 0.07$ , respectively ( $P < 0.05$ ) (Fig.  
251 1d). Most of the ABRs of the  $KM^{ush/ush}$  mice did not exhibit response waveforms at 85 dB  
252 stimulation at P28, whereas the normal control KM mice had ABR thresholds below 40 dB;  
253 the difference in hearing thresholds was significant ( $P < 0.0001$ ) (Fig. 1e). Cochlear  
254 histological sections showed that  $KM^{ush/ush}$  mice at P56 did not exhibit significant alterations  
255 in their inner hair cells, but their outer hair cells were significantly atrophied at the base of the  
256 cochlea. The spiral ganglion cell densities in KM and  $KM^{ush/ush}$  mice were significantly

257 different ( $40.25 \pm 2.28$  and  $33.25 \pm 2.86$ , respectively;  $P < 0.05$ ) (Fig. 1f). qPCR results  
258 showed that *Adgrv1* mRNA expression levels in the cochlear tissues of KM and  $KM^{ush/ush}$   
259 mice were  $1.32 \pm 0.04$  and  $0.20 \pm 0.01$ , respectively. *Adgrv1* mRNA levels were significantly  
260 lower in the cochlear tissues of  $KM^{ush/ush}$  mice than in those of KM mice (Fig. 1g).  
261 Sequencing results identified a point mutation from C to A at position 49 of exon 7 of the  
262 *Pde6b* gene in  $KM^{ush/ush}$  mice, resulting in a nonsense mutation at codon 347 from tyrosine  
263 (TAC) to a termination codon (TAA). Exon sequence analyses revealed that  $KM^{ush/ush}$  mice  
264 possessed a deletion mutation of a single base at the 52nd nucleotide of exon 31 of the  
265 *Adgrv1* gene. This deletion caused a frameshift mutation that resulted in the formation of a  
266 termination codon (TAA) after codon 2250 (Fig. 1h).

267

### 268 ***Phenotyping of CBA/J mice***

269 Compared to C57BL/6 mice, no obvious waveforms from the dark-adapted 3.0 ERG  
270 recording could be identified in  $KM^{ush/ush}$  mice (Fig. 2a). Fundus photography and FFA  
271 examination found that CBA/J mice showed obvious signs of retinal degeneration compared  
272 to normal C57BL/6 mice, including pale optic papillae and atrophy and sclerosis of the  
273 retinal vasculature (Fig. 2b). HE staining of paraffin sections of retinal tissues showed the  
274 loss of normal structures in the ONL of the retina in CBA/J mice (Fig. 2c). The ocular  
275 phenotype of CBA/J mice was associated with the mutated *Pde6b<sup>rd1</sup>* gen[21]. Regarding their  
276 cochlear phenotype, the mean hearing threshold of CBA/J mice ( $n=6$ ) was  $25.83 \pm 3.74$  dB,  
277 and all thresholds were less than 50 dB as obtained by ABR audiometry.

278

279 ***Pedigree analysis of hybrids obtained by crossing  $KM^{ush/ush}$  mice with CBA/J mice***

280 The mean ABR threshold of the F1 hybrid mice (obtained by crossing  $KM^{ush/ush}$  mice  
281 with CBA/J mice) was  $24.44 \pm 5.50$  dB, and the dark-adapted 3.0 ERG response waveform  
282 disappeared. The F2 hybrids (obtained from inbreeding of the F1 hybrid) were classified  
283 according to their ABR characteristics. The ERG waveform was absent in the ABR of the  
284  $J2^{ush/ush}$  mice. In addition to the absence of the ERG waveform, the ABR of the  $J1^{ush/ush}$  mice  
285 also showed hearing thresholds over 50 dB.  $J1^{ush/ush}$  and  $J2^{ush/ush}$  mice did not appear to  
286 undergo inbreeding decline, as previously observed in  $CBA-1^{ush/ush}$  and  $CBA-3^{ush/ush}$  mice  
287 [22]. The female CBA/J mice were backcrossed with F4  $J1^{ush/ush}$  hybrids segregated  
288 according to RP and hearing loss phenotypes, and the F2 hybrid mice obtained from this  
289 inbreeding demonstrated phenotypic segregation of the RP phenotype and deafness (Fig. 3).

290

291 ***Ocular phenotypes of  $J1^{ush/ush}$  and  $J2^{ush/ush}$  mice***

292 At P28, dark-adapted 3.0 ERG waveforms were significantly absent in  $J1^{ush/ush}$  and  
293  $J2^{ush/ush}$  mice, in contrast to C57BL/6 mice with normal visual system development (Fig. 4a).  
294 The results of both fundus photography and FFA suggested severe retinal degeneration with  
295 attenuation of the retinal vessels (Fig. 4b). The ONL in the retina of  $J1^{ush/ush}$  and  $J2^{ush/ush}$  mice  
296 was completely lost, as seen in the retinal sections (Fig. 4c).

297

298 ***Auditory phenotypes of  $J1^{ush/ush}$  and  $J2^{ush/ush}$  mice***

299 At P14, the ABR thresholds of  $J1^{ush/ush}$  and  $J2^{ush/ush}$  mice were  $71.67 \pm 4.71$  and  
300  $70.00 \pm 6.45$ , respectively. This difference was not statistically significant ( $P > 0.05$ ), which

301 may be because their auditory systems were not yet fully developed. The histopathological  
302 tissue sections showed immature ganglion cells. The ABR thresholds of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup>  
303 mice at P28 were  $67.50 \pm 4.79$  and  $20.83 \pm 3.44$ , respectively. The ABR hearing thresholds  
304 were higher in J1<sup>ush/ush</sup> mice than in J2<sup>ush/ush</sup> mice of the same age ( $p < 0.0001$ ). The  
305 histopathological sections showed that J1<sup>ush/ush</sup> mice showed no significant changes in their  
306 inner hair cells but had significant atrophy of the outer hair cells. The ganglion cell densities  
307 at P28 in J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice were  $42.50 \pm 1.12$  and  $44.25 \pm 1.30$ , respectively, which  
308 were not significantly different. At P56, the ABR thresholds of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice  
309 were  $81.67 \pm 4.71$  and  $19.17 \pm 3.44$ , respectively. The ABR threshold of J1<sup>ush/ush</sup> mice was  
310 further elevated and significantly higher than that of J2<sup>ush/ush</sup> mice of the same age ( $p <$   
311  $0.0001$ ). At P56, the ganglion cell densities of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice were  $33.25 \pm 3.49$   
312 and  $43.50 \pm 3.64$ , respectively, which were significantly different ( $P < 0.05$ ) (Figs. 5 and 6).

313

#### 314 ***Genotyping of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice***

315 Western blotting results showed that Pde6b protein expression was significantly reduced  
316 in the retinal tissues of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice. Sequencing of the exons of the Pde6b gene  
317 in the tail tissues showed that both J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice possessed a point mutation (from  
318 C to A) at position 49 of exon 7 of the Pde6b gene. This generated a stop codon (TAA) at  
319 codon 347 instead of a tyrosine (TAC), resulting in a nonsense mutation that led to a  
320 significant decrease in Pde6b protein expression in the retinal tissues of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup>  
321 mice (Fig. 7a and c). qPCR results showed that the relative Adgrv1 mRNA expression levels  
322 in the cochlear tissues of J1<sup>ush/ush</sup> mice and J2<sup>ush/ush</sup> mice were  $0.21 \pm 0.01$  and  $1.34 \pm 0.04$ ,

323 respectively ( $P < 0.0001$ ). Sequencing of *Adgrv1* exons in tail tissues showed that  $J1^{ush/ush}$   
324 mice had a single-base deletion at nucleotide 52 of exon 31 of the *Adgrv1* gene, which  
325 caused a frameshift mutation and led to the formation of a termination codon (TAA) after  
326 codon 2250, resulting in a significant decrease in *Adgrv1* mRNA levels (Fig. 7b and c).

327

### 328 ***Sensory behavioral studies of $J1^{ush/ush}$ mice***

329       Sensory behavioral studies of KM and  $J1^{ush/ush}$  mice at P56. In the elevated plus maze  
330 (EPM), wild-type KM mice (with normal visual and auditory function) and  $J1^{ush/ush}$  mice  
331 ( $n=6$ ) explored the open arm for  $6.21 \pm 3.65$  and  $41.11 \pm 15.53$  seconds, respectively.  $J1^{ush/ush}$   
332 mice explored the open arm region for significantly longer periods ( $P < 0.001$ ). In the open  
333 field test, the wild-type KM mice and  $J1^{ush/ush}$  mice ( $n=6$ ) explored the central region for  
334  $4.57 \pm 1.52$  and  $14.73 \pm 8.59$  seconds, respectively.  $J1^{ush/ush}$  mice explored the central region for  
335 significantly longer periods than wild-type KM mice ( $P < 0.05$ ; Fig. 8).

336

### 337 **Discussion**

338       This study is based on a KM mouse model that developed spontaneous, hereditary, deaf-  
339 RP in our laboratory.  $KM^{ush/ush}$  mice exhibit an USH phenotype, identified by various  
340 evaluations, including electroretinograms, auditory brainstem response experiments,  
341 histopathological experiments, etc.  $KM^{ush/ush}$  mice were verified to possess spontaneous,  
342 hereditary, double-gene (*Pde6b<sup>rd1</sup>*, *Adgrv1*) mutations by molecular biology experiments and  
343 tail gene sequencing. The CBA/J strain is the only CBA substrain that carries the *Pde6b<sup>rd1</sup>*  
344 mutation, which causes blindness by weaning age. These mice have been used to study

345 immunology and inflammation, metabolism, hearing and cochlear function, infectious  
346 disease, and fetal development [21, 23, 24]. The  $KM^{ush/ush}$  gene was introduced into CBA/J  
347 mice, and after inbreeding of F1 hybrid, the ocular phenotype of F2 hybrid of mice showed  
348 absent ERG waveforms and degeneration of the fundal retinal pigmented epithelium, which  
349 was attributed to the fact that both the  $KM^{ush/ush}$  and CBA/J mice carried the  $Pde6b^{rd1}$  gene  
350 mutation; it was further verified that the  $KM^{ush/ush}$  mice were pure mutants of the  $Pde6b^{rd1}$   
351 mice.

352 The auditory phenotypes in F2 hybrid of mice were segregated, and the cochlear  
353 phenotypes of  $J1^{ush/ush}$  and  $CBA-2^{ush/ush}$  mice appeared to be distinctly different according to  
354 ABRs and histopathological sections at various time intervals after birth [22]. While CBA-  
355  $2^{ush/ush}$  mice showed significant degeneration of their cochlea, Corti's apparatus, and spiral  
356 ganglion cells at P56, we observed changes in the auditory phenotypes of  $J1^{ush/ush}$  mice as  
357 early as P14 and P28. We also found that  $J1^{ush/ush}$  mice started to show an increased ABR  
358 hearing threshold at P28, with atrophied outer hair cells. In addition, decreased *Adgrv1*  
359 mRNA expression was observed. At P56, the ABR hearing threshold of  $J1^{ush/ush}$  mice had  
360 increased further, and decreased ganglion cell density was observed alongside atrophied outer  
361 hair cells. There are three key cellular components of the inner ear: hair cells, neurons, and  
362 strial cells. Different environmental and genetic risk factors may affect these components,  
363 leading to degenerative changes via various mechanisms. Hearing loss can be attributed to the  
364 accelerated loss of hair cells (sensory presbycusis), loss of neurons (neural presbycusis), loss  
365 of strial cells with attendant endocochlear potential (EP) decline (strial presbycusis), or some  
366 combination of these [25]. In previous studies, CBA/J and CBA/CaJ mice have been used as

367 "normal hearing" controls [26, 27]. Many studies refer to CBA/J and CBA/CaJ mice  
368 collectively as "CBA mice", but the CBA/J and CBA/CaJ strains diverged 80 years ago and  
369 exhibit >2000 polymorphisms [28]. Thus, they demonstrate very different degenerative  
370 changes in the cochlea. CBA/CaJ mice mainly exhibit hearing loss due to spiral ganglion cell  
371 degeneration and decreased EP due to reduced strial cells, while hearing loss in CBA/J mice  
372 is mainly attributed to hair cell loss [15]. It was found that early increases in the hearing  
373 threshold in CBA/J mice were not accompanied by significant hair cell degeneration and that  
374 the stria vascularis and EP also remained relatively intact from 3 to 25 months of age  
375 regardless of whether the animals had normal or elevated ABR thresholds [29]. Since this  
376 phenomenon may be related to the etiology of hearing loss in CBA/J and CBA/CaJ mice, the  
377 increase in the hearing thresholds of  $J1^{ush/ush}$  mice may be attributed solely to cochlear ribbon  
378 synaptic damage at P28. It is possible that the cochlear ganglion cells are affected later,  
379 contributing to the further increased hearing thresholds at P56. Furthermore, there is little  
380 progression in hearing loss among USH2C patients before the age of 40 [30], which  
381 illustrates that  $J1^{ush/ush}$  mice may present clinical phenotypes more similar to those of USH2C.

382 *Adgrv1*, previously known as *Vlgr1*, neuroepithelium-notable (neurepin) or G protein-  
383 coupled receptor 98 (*Gpr98*), is the largest G protein-coupled receptor (GPCR) and plays  
384 important roles in the sensory and central nervous systems [31]. Mutations in the *Adgrv1*  
385 gene in humans are associated with USH type II, which is characterized by combined  
386 congenital deafness and blindness. The *Adgrv1* gene plays an important role in hair cell  
387 development in the cochlea and is a key component of the ankle-link complex (ALC) [10],  
388 but the physiological role of *Adgrv1*-mediated signaling pathways in ALC formation and the

389 regulation of ALC dynamics has not been fully elucidated. Novel representative animal  
390 models are essential for investigating the mechanisms of *Adgrv1* action. Recently,  
391 researchers established *Adgrv1* Y6236fsX1 mutant mice as an animal model of the deafness-  
392 associated Y6244fsX1 mutation and demonstrated that the Y6236fsX1 mutation disrupts the  
393 interaction between *Adgrv1* and other ALC components, resulting in stereocilia  
394 disorganization and mechanoelectrical transduction (MET) deficit[32].

395 Vestibular areflexia, which may present with gross motor delays in some USH patients,  
396 leads to decreased health-related quality of life, including poorer physical and psychological  
397 health, as well as higher rates of unemployment [33]. To better understand the somatosensory  
398 function of USH patients, we conducted  $J1^{ush/ush}$  mouse behavioral experiments. To evaluate  
399 sensory function in rodents, methods such as the open field, dark avoidance, jumping  
400 platform, Y maze, eight-armed maze, and elevated cross experiments have been used [34,  
401 35]. In the elevated cross maze, mice are curious about the open-arm area but prefer to stay in  
402 the closed-arm area due to the darkness, and the conflict between exploration and avoidance  
403 results in anxiety. The level of anxiety is evaluated by comparing the retention time of the  
404 mice in the open-arm and closed-arm areas [36]. The open-field experiment is mainly used to  
405 observe behavior in novel environments and is often used to study neurological function [34].  
406 In this experiment, we found that  $J1^{ush/ush}$  mice spent a significantly longer time exploring the  
407 open arm of the elevated cross maze and the central area of the open field when compared  
408 with KM mice with normal vision and hearing, which may be attributed to an impaired ability  
409 to perceive dangerous environments due to their dual sensory deficits. We simulated the  
410 behavioral manifestations of human visual and auditory disorders using an animal model with

411 hereditary visual-auditory deficits.

412       There are currently no effective treatments for USH, and many therapeutic strategies are  
413 in the preclinical or clinical I/IIa research phases, including gene replacement, gene editing,  
414 protein inhibition, and antisense oligonucleotide-based approaches. Many therapeutic studies  
415 for USH have been performed using patient-derived cells (usually fibroblasts) or mutant  
416 mice. Among these, gene replacement has been effective in several USH mouse models; for  
417 example, adeno-associated viral vectors were administered to *Myo7a*, *Whrn131*, and  
418 *Clrn1134* knockout mice, which successfully restored the expression of their respective  
419 defective genes. Double-overlapping AAV vectors have also been explored as a potentially  
420 safer large gene replacement vector and have achieved promising results [37, 38]. Lentiviral  
421 vectors, which are more capable of delivery but carry the risk of insertional mutagenesis,  
422 have been successful in delivering functional *Myo7a* to the retina of USH1B mice [39]. In the  
423 USH1C, USH1G, USH2D, and USH3 mouse models, injection of AAV vectors into the inner  
424 ear through the round window membrane or posterior semicircular canals significantly  
425 improved inner ear hair cell function [40]. Another therapeutic approach is gene editing,  
426 which includes the use of nucleases to eliminate mutations; homologous recombination with  
427 DNA templates containing wild-type sequences to correct DNA errors; and correction of  
428 point mutations, insertions/deletions, and splice point mutations. In recent years, the  
429 CRISPR/Cas9 system has gained popularity for gene editing due to its efficiency and ease of  
430 use. This technology has been successfully used for mutation repair in USH2A patient  
431 fibroblasts as well as patient-derived induced pluripotent stem cells, including cells  
432 containing pure heterozygous USH2A (Glu767Serfs\*21) mutations or compound

433 heterozygous (Glu767Serfs\*21/Cys759Phe) mutations [41]. The newly bred J1<sup>ush/ush</sup> mice  
434 used in this study contain spontaneous, hereditary *Adgrv1* mutations and do not show  
435 significant premature Corti's apparatus or spiral ganglion cell degeneration, which may be  
436 useful for investigating early therapeutic interventions for the treatment of *Adgrv1*-mutant  
437 USH.

438

### 439 **Conclusions**

440 In summary, we confirmed that the USH phenotype was present in laboratory KM  
441 background mice and bred new mice with a CBA/J background. It is necessary to validate the  
442 causality of USH genes after identifying genes associated with USH-like phenotypes, and for  
443 the future of USH treatment, we need to better define genotype-phenotype relationships and  
444 the nature of the disease, particularly for rare mutations. These crossbred mice may be useful  
445 for audiological research and represent a novel animal model of *Adgrv1* mutations, which can  
446 be used to study the physiological action of these variants.

447

### 448 **List of abbreviations**

449 ERG electroretinogram

450 ABR auditory brainstem response

451 USH Usher syndrome

452 qRT-PCR real-time quantitative polymerase chain reaction

453 V1gr1 very large G-protein-coupled receptor 1

454 RP retinitis pigmentosa

455 ARVO Association for Research in Vision and Ophthalmology  
456 FFA fluorescein fundus angiography  
457 HE hematoxylin-eosin staining  
458 ONL outer nuclear layer  
459 INL inner nuclear layer  
460 GCL ganglion cell layer  
461 OC organ of Corti  
462 SG spiral ganglion  
463 n.s. not significant  
464 EP endocochlear potential  
465 Gpr98 G protein-coupled receptor 98  
466 GPCR G protein-coupled receptor  
467 ALC ankle-link complex  
468 MET mechanoelectrical transduction

469

## 470 **Declarations**

471

### 472 ***Ethics approval and consent to participate***

473 All animal experiments conducted in this study adhered to the ARRIVE guidelines, as well as  
474 the U.K. Animals (Scientific Procedures) Act, 1986. The animal study protocol received  
475 approval from the Animal Care Committee of the UIC and JBVAMC, and was conducted in  
476 accordance with the relevant guidelines outlined in the EU Directive 2010/63/EU for animal

477 experiments.

478 ***Consent for publication***

479 Not applicable

480 ***Availability of data and materials***

481 The original contributions presented in the study are included in the article material, further  
482 inquiries can be directed to the corresponding authors.

483 ***Competing interests***

484 The authors declare that the research was conducted in the absence of any commercial or  
485 financial relationships that could be construed as a potential conflict of interest.

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492 ***Authors' contributions***

493 SY and ZZ designed the conceptual framework of the study. LS designed the experiments  
494 and wrote the manuscript. LS, JY, ZL, WD, YW and CT performed the experiments. WX  
495 analyzed the data. All authors contributed to the article and approved the submitted version.

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497 Not applicable

498

499 **References**

- 500 1. Nisenbaum E, Thielhelm TP, Nourbakhsh A, Yan D, Blanton SH, Shu Y, et al. Review  
501 of Genotype-Phenotype Correlations in Usher Syndrome. *Ear Hear.* 2022;43:1-8.
- 502 2. Ehn M, Anderzén-Carlsson A, Möller C, Wahlqvist M. Life strategies of people with  
503 deafblindness due to Usher syndrome type 2a - a qualitative study. *Int J Qual Stud*  
504 *Health Well-being.* 2019;14:1656790.
- 505 3. Géléoc GGS, El-Amraoui A. Disease mechanisms and gene therapy for Usher  
506 syndrome. *Hear Res.* 2020;394:107932.
- 507 4. Hartel BP, van Nierop JWI, Huinck WJ, Rotteveel LJC, Mylanus EAM, Snik AF, et al.  
508 Cochlear implantation in patients with Usher syndrome type iia increases performance  
509 and quality of life. *Otol Neurotol.* 2017;38:e120-7.
- 510 5. Fahim A. Retinitis pigmentosa: recent advances and future directions in diagnosis and  
511 management. *Curr Opin Pediatr.* 2018;30:725-33.
- 512 6. Major L, McClements ME, Maclaren RE. A review of CRISPR tools for treating usher  
513 syndrome: applicability, safety, efficiency, and in vivo delivery. *Int J Mol Sci.*  
514 2023;24:7603.
- 515 7. Fuster-García C, García-Bohórquez B, Rodríguez-Muñoz A, Aller E, Jaijo T, Millán  
516 JM, et al. Usher syndrome: genetics of a human ciliopathy. *Int J Mol Sci.* 2021;22:6723.
- 517 8. Toualbi L, Toms M, Moosajee M. USH2A-retinopathy: From genetics to therapeutics.  
518 *Exp Eye Res.* 2020;201:108330.
- 519 9. Bonnet C, Riahi Z, Chantot-Bastaraud S, Smagghe L, Letexier M, Marcaillou C, et al.  
520 An innovative strategy for the molecular diagnosis of Usher syndrome identifies causal

- 521 biallelic mutations in 93% of European patients. *Eur J Hum Genet.* 2016;24:1730-8.
- 522 10. Weston MD, Luijendijk MW, Humphrey KD, Möller C, Kimberling WJ. Mutations in  
523 the *VLGR1* gene implicate G-protein signaling in the pathogenesis of Usher syndrome  
524 type II. *Am J Hum Genet.* 2004;74:357-66.
- 525 11. Krzysko J, Maciag F, Mertens A, Güler BE, Linnert J, Boldt K, et al. The Adhesion  
526 GPCR *VLGR1/ADGRV1* Regulates the  $Ca^{2+}$  Homeostasis at Mitochondria-  
527 Associated ER Membranes. *Cells.* 2022;11:2790.
- 528 12. Stemerink M, García-Bohórquez B, Schellens R, Garcia-Garcia G, Van Wijk E,  
529 Millan JM. Genetics, pathogenesis and therapeutic developments for Usher syndrome  
530 type 2. *Hum Genet.* 2022;141:737-58.
- 531 13. Yao L, Zhang L, Qi L-S, Liu W, An J, Wang B, et al. The Time Course of Deafness  
532 and Retinal Degeneration in a Kunming Mouse Model for Usher Syndrome. *PLOS*  
533 *ONE.* 2016;11:e0155619.
- 534 14. Zheng QY, Johnson KR, Erway LC. Assessment of hearing in 80 inbred strains of mice  
535 by ABR threshold analyses. *Hear Res.* 1999;130:94-107.
- 536 15. Ohlemiller KK, Dahl AR, Gagnon PM. Divergent aging characteristics in CBA/J and  
537 CBA/CaJ mouse cochleae. *J Assoc Res Otolaryngol.* 2010;11:605-23.
- 538 16. McGinn MD, Bean-Knudsen D, Ermel RW. Incidence of otitis media in CBA/J and  
539 CBA/CaJ mice. *Hear Res.* 1992;59:1-6.
- 540 17. Robson AG, Frishman LJ, Grigg J, Hamilton R, Jeffrey BG, Kondo M, et al. ISCEV  
541 standard for full-field clinical electroretinography (2022 update). *Doc Ophthalmol.*  
542 2022;144:165-77.

- 543 18. Liu YH, Jiang YH, Li CC, Chen XM, Huang LG, Zhang M, et al. Involvement of the  
544 SIRT1/PGC-1 $\alpha$  Signaling Pathway in Noise-Induced Hidden Hearing Loss. *Front*  
545 *Physiol.* 2022;13:798395.
- 546 19. Tang M, Chen M, Li Q. Paeoniflorin ameliorates chronic stress-induced depression-  
547 like behavior in mice model by affecting ERK1/2 pathway. *Bioengineered.*  
548 2021;12:11329-41.
- 549 20. Yoshizaki K, Asai M, Hara T. High-fat diet enhances working memory in the Y-maze  
550 test in male C57BL/6J mice with less anxiety in the elevated plus maze test. *Nutrients.*  
551 2020;12:2036.
- 552 21. Bult CJ, Blake JA, Smith CL, Kadin JA, Richardson JE. Mouse Genome Database  
553 (MGD) 2019. *Nucleic Acids Res.* 2019;47:D801-d6.
- 554 22. Yan W, Long P, Chen T, Liu W, Yao L, Ren Z, et al. A natural occurring mouse model  
555 with *Adgrv1* mutation of Usher syndrome 2C and characterization of its recombinant  
556 inbred strains. *Cell Physiol Biochem.* 2018;47:1883-97.
- 557 23. Yang M, Ong J, Meng F, Zhang F, Shen H, Kitt K, et al. Spatiotemporal insight into  
558 early pregnancy governed by immune-featured stromal cells. *Cell.* 2023;186:4271-  
559 88.e24.
- 560 24. Smith CL, Blake JA, Kadin JA, Richardson JE, Bult CJ. Mouse Genome Database  
561 (MGD)-2018: knowledgebase for the laboratory mouse. *Nucleic Acids Res.*  
562 2018;46:D836-d42.
- 563 25. Schuknecht HF, Gacek MR. Cochlear pathology in presbycusis. *Ann Otol Rhinol*  
564 *Laryngol.* 1993;102:1-16.

- 565 26. Henry KR, Chole RA. Genotypic differences in behavioral, physiological and  
566 anatomical expressions of age-related hearing loss in the laboratory mouse. *Audiology*.  
567 1980;19:369-83.
- 568 27. Ohlemiller KK. Mouse methods and models for studies in hearing. *J Acoust Soc Am*.  
569 2019;146:3668.
- 570 28. Bult CJ, Eppig JT, Kadin JA, Richardson JE, Blake JA. The Mouse Genome Database  
571 (MGD): mouse biology and model systems. *Nucleic Acids Res*. 2008;36:D724-8.
- 572 29. Sha SH, Kanicki A, Dootz G, Talaska AE, Halsey K, Dolan D, et al. Age-related  
573 auditory pathology in the CBA/J mouse. *Hear Res*. 2008;243:87-94.
- 574 30. Hilgert N, Kahrizi K, Dieltjens N, Bazazzadegan N, Najmabadi H, Smith RJ, et al. A  
575 large deletion in GPR98 causes type IIC Usher syndrome in male and female members  
576 of an Iranian family. *J Med Genet*. 2009;46:272-6.
- 577 31. Sun JP, Li R, Ren HZ, Xu AT, Yu X, Xu ZG. The very large G protein coupled receptor  
578 (Vlgr1) in hair cells. *J Mol Neurosci*. 2013;50:204-14.
- 579 32. Guan Y, Du HB, Yang Z, Wang YZ, Ren R, Liu WW, et al. Deafness-Associated  
580 ADGRV1 Mutation Impairs USH2A Stability through Improper Phosphorylation of  
581 WHRN and WDSUB1 Recruitment. *Adv Sci (Weinh)*. 2023;10:e2205993.
- 582 33. Ehn M, Wahlqvist M, Danermark B, Dahlström Ö, Möller C. Health, work, social trust,  
583 and financial situation in persons with Usher syndrome type 1. *Work*. 2018;60:209-20.
- 584 34. Pentkowski NS, Rogge-Obando KK, Donaldson TN, Bouquin SJ, Clark BJ. Anxiety  
585 and Alzheimer's disease: Behavioral analysis and neural basis in rodent models of  
586 Alzheimer's-related neuropathology. *Neurosci Biobehav Rev*. 2021;127:647-58.

- 587 35. Banovetz MT, Lake RI, Blackwell AA, Oltmanns JRO, Schaeffer EA, Yoder RM, et  
588 al. Effects of acquired vestibular pathology on the organization of mouse exploratory  
589 behavior. *Exp Brain Res.* 2021;239:1125-39.
- 590 36. Vuralli D, Wattiez AS, Russo AF, Bolay H. Behavioral and cognitive animal models in  
591 headache research. *J Headache Pain.* 2019;20:11.
- 592 37. Conlon TJ, Deng W-T, Erger K, Cossette T, Pang J-J, Ryals R, et al. Preclinical potency  
593 and safety studies of an AAV2-mediated gene therapy vector for the treatment of  
594 MERTK associated retinitis pigmentosa. *Hum Gene Ther Clin Dev.* 2013;24:23-8.
- 595 38. Buck T, Wijnholds J. Recombinant adeno-associated viral vectors (rAAV)-vector  
596 elements in ocular gene therapy clinical trials and transgene expression and bioactivity  
597 assays. *Int J Mol Sci.* 2020;21:4197.
- 598 39. Zallocchi M, Binley K, Lad Y, Ellis S, Widdowson P, Iqball S, et al. EIAV-Based  
599 Retinal Gene Therapy in the shaker1 Mouse Model for Usher Syndrome Type 1B:  
600 Development of UshStat. *PLoS ONE.* 2014;9:e94272.
- 601 40. Trapani I. Adeno-associated viral vectors as a tool for large gene delivery to the retina.  
602 *Genes (Basel).* 2019;10:287.
- 603 41. Liu X, Lillywhite J, Zhu W, Huang Z, Clark AM, Gosstola N, et al. Generation and  
604 Genetic Correction of USH2A c.2299delG Mutation in Patient-Derived Induced  
605 Pluripotent Stem Cells. *Genes.* 2021;12:805.

607 **Figure captions**

608 **Fig. 1.** Ocular and ear phenotypes and genotypes of  $KM^{ush/ush}$  mice. a. Electroretinogram

609 (ERG) of  $KM^{ush/ush}$  mice. b. Typical fundus images of KM and  $KM^{ush/ush}$  mice (n = 6) at P28.  
610 c. Retinal sections with HE staining from KM and  $KM^{ush/ush}$  mice (n = 4) at P28. ONL: outer  
611 nuclear layer; INL: inner nuclear layer; GCL: ganglion cell layer. d. Representative western  
612 blotting bands of Pde6b in the retinas of KM and  $KM^{ush/ush}$  mice at P28 (n = 3). \* p < 0.05. e.  
613 Typical ABR waveforms at P28 and quantitative analysis of ABR thresholds in KM and  
614  $KM^{ush/ush}$  mice (n = 6). Roman numerals I-V indicate the 5 ABR waveform peaks in response  
615 to short tone stimuli. \*\*\*\* p < 0.0001. f. HE staining of typical cochlear sections at P56 in  
616 KM and  $KM^{ush/ush}$  mice (n = 4). Red asterisks: inner hair cells; blue asterisks: outer hair cells;  
617 red arrowheads: spiral ganglion cell nuclei; OC: organ of Corti; SG: spiral ganglion; \* p <  
618 0.05. g. Cochlear *Adgrv1* mRNA levels in KM and  $KM^{ush/ush}$  mice at P28 (n = 3).  
619 \*\*\*\*P<0.0001. h. Exon sequencing of *Pde6b* in KM and  $KM^{ush/ush}$  mice at P21 (n = 3) and  
620 exon sequencing of the *Adgrv1* gene in  $KM^{ush/ush}$  mice (n = 3). WT: NCBI sequence of a  
621 normal control mouse; arrow: mutation site.

622 **Fig. 2.** Ocular phenotype of CBA/J mice. a. Electroretinogram (ERG) of CBA/J mice. n = 6  
623 eyes per group. b. Fundus FFA images of C57BL/6 and CBA/J mice at P28 (n = 6). c. HE-  
624 stained retinal sections of C57BL/6 and CBA/J mice (n = 6). ONL: outer nuclear layer; INL:  
625 inner nuclear layer; GCL: ganglion cell layer.

626 **Fig. 3.** Pedigree obtained from crossing  $KM^{ush/ush}$  mice with CBA/J mice. ERG+: mice  
627 without significant ERG waveforms; ABR+: mice with elevated ABR thresholds; ※:  
628 progeny segregated according to RP and hearing loss phenotypes.

629 **Fig. 4.** Ocular phenotypes of  $J1^{ush/ush}$  and  $J2^{ush/ush}$  mice. a. Typical electroretinograms (ERGs)  
630 of C57BL/6,  $J1^{ush/ush}$ , and  $J2^{ush/ush}$  mice at P28. n = 6 eyes per group. b. Typical fundus and

631 FFA images of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice (n = 6) at P28. c. HE-stained retinal sections from  
632 J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice at P28 (n = 6). ONL: outer nuclear layer; INL: inner nuclear layer;  
633 GCL: ganglion cell layer.

634 **Fig. 5.** Quantitative analysis of ABR thresholds of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice at various time  
635 intervals (n = 6). Roman numerals I-V indicate the 5 peaks in the ABR waveform in response  
636 to short tone stimuli. \*\*\*\* p < 0.0001; n.s.: not significant.

637 **Fig. 6.** Quantitative analysis of ganglion cell density of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice at various  
638 time intervals (n = 4). Red asterisks: inner hair cell structure; blue asterisks: outer hair cells;  
639 red arrowheads: spiral ganglion cell nuclei; OC: organ of Corti; SG: spiral ganglion; \* p <  
640 0.05; n.s.: not significant.

641 **Fig. 7.** Genotypes of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice. a. Representative western blotting bands of  
642 retinal Pde6b in KM, J1<sup>ush/ush</sup>, and J2<sup>ush/ush</sup> mice at P28 (n = 3). b. Cochlear Adgrv1 mRNA  
643 levels in J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice at P28 (n = 3). \*\*\*\*P<0.0001. c. Sequencing of exons of  
644 the Pde6b and Adgrv1 genes in the tail tissues of J1<sup>ush/ush</sup> and J2<sup>ush/ush</sup> mice (n = 3). WT: Exon  
645 sequences of the controls in the NCBI; arrows: mutation sites.

646 **Fig. 8.** Sensory behavioral studies of J1<sup>ush/ush</sup> mice. a. Elevated plus maze (EPM) of KM and  
647 J1<sup>ush/ush</sup> mice at P56 (n=6). b. The open field test of KM and J1<sup>ush/ush</sup> mice at P56 (n=6).  
648 \*\*\*P<0.001; \*P<0.05.

**A new kind of naturally occurring mouse model for Usher Syndrome generated  
by crossing with CBA/J mice**

Li Shaoheng<sup>1,3\*</sup>, Jiang Yihong<sup>1\*</sup>, Zhang Lei<sup>4\*</sup>, Yan Weiming<sup>5</sup>, Wei Dongyu<sup>1</sup>, Zhang  
Min<sup>1</sup>, Chen Tao<sup>1,2</sup>, Wang Xiaocheng<sup>1,2#</sup>, Zhang Zuoming<sup>1#</sup>, Su Yuting<sup>1#</sup>

Author affiliations

<sup>1</sup>Aerospace Clinical Medical Center, School of Aerospace Medicine, Air Force  
Medical University, Xi'an, China, <sup>2</sup>Department of Aviation Medicine, Xijing  
Hospital, Air Force Medical University, Xi'an, China, <sup>3</sup>Department  
of Ophthalmology, Eye Institute of Chinese PLA, Xijing Hospital, Fourth Military  
Medical University, Xi'an 710032, China, <sup>4</sup>Shaanxi Eye Hospital, Xi'an People's  
Hospital (Xi'an Fourth Hospital), Xi'an 710004, Shaanxi Province, China, <sup>5</sup>The 900th  
Hospital of Joint Logistic Support Force, PLA, Fuzhou, China.

\*These authors have contributed equally to this work

**Corresponding author**

Wang Xiaocheng: email: wxcnose@126.com

Zhang Zuoming: email: zhangzm@fmmu.edu.cn

Su Yuting: email: sssusyt@163.com