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Analysis of the concentrations and size distributions of cell-free DNA in schizophrenia using fluorescence correlation spectroscopy

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Abstract

Cell-free DNA (cfDNA), which is primarily released following cell death, has been described and developed to serve as an effective biomarker in autoimmune diseases which may share the pathogenesis with schizophrenia. In this study, we hypothesized and explored whether the concentrations and size distributions of cfDNA are abnormal in schizophrenia. A total of 65 patients with schizophrenia (SZ), 29 patients with mood disorders (MD) and 62 matched healthy controls (HC) were included in the study. Fluorescence correlation spectroscopy was used to assay the molar concentrations and size distributions of cfDNA. Fluorometric quantification and quantitative real-time PCR (qPCR) were performed to verify the results. The cfDNA levels were approximately two-fold higher in the SZ group ((29 ± 15) nM) than in the healthy controls ((15 ± 9) nM; $-value = 0.00062$), but the levels in patients with MD were not significantly different from those in the healthy controls ((17 ± 10) nM; $-value = 0.343$). According to the size distribution analysis, cfDNA in schizophrenia patients was composed of shorter DNA molecules and showed an apoptosis-like distribution pattern. Our study shows the elevated levels and short sizes of cfDNA in schizophrenia patients, which provide direct evidences supporting increased apoptotic activity in the disease. cfDNA may be developed to serve as an auxiliary diagnostic marker for the disease in the future.

Introduction

Schizophrenia (SZ) is a complex psychiatric disorder with a prevalence of approximately 1% worldwide. It is characterized by a range of symptoms, including delusions, hallucinations, and disorganized thinking. The pathogenesis of SZ is multifactorial, involving genetic, environmental, and neurobiological factors. Recent research has focused on the role of cell-free DNA (cfDNA) in SZ, suggesting that elevated levels and altered size distributions of cfDNA may be associated with the disease. This study aims to investigate the concentrations and size distributions of cfDNA in SZ patients compared to healthy controls and mood disorder patients using fluorescence correlation spectroscopy (FCS).

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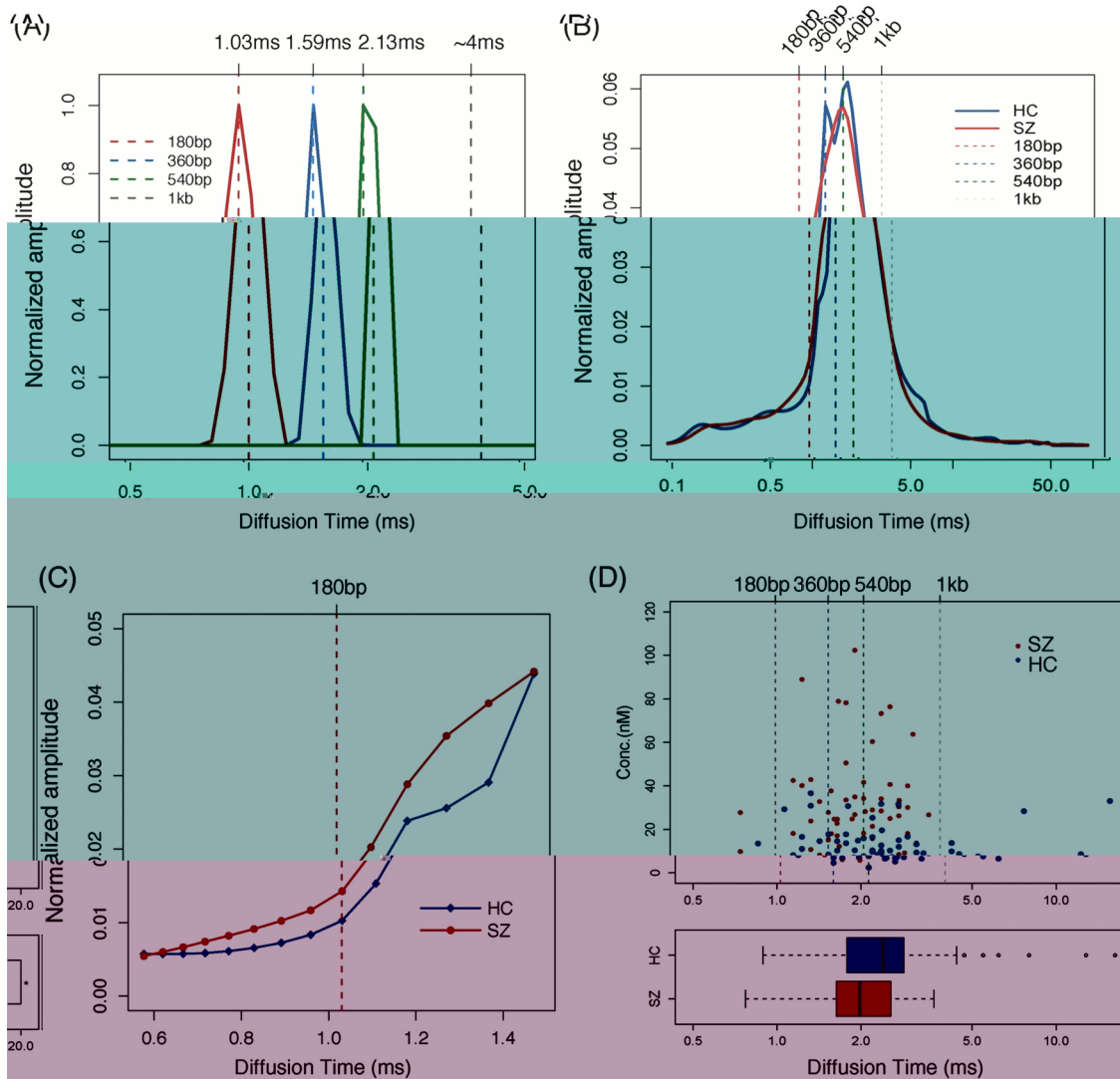
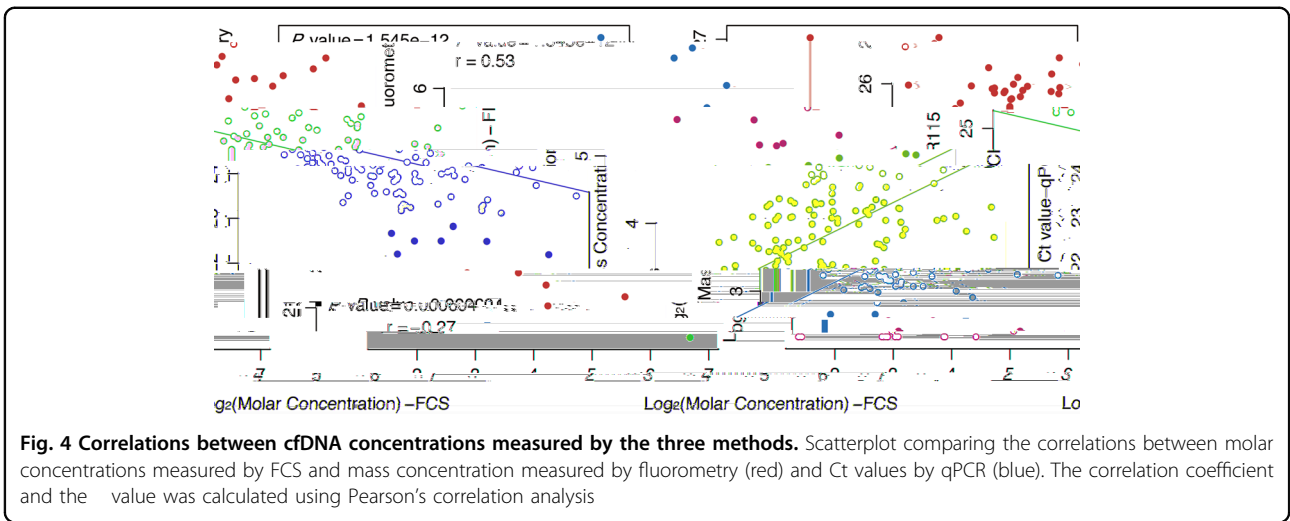


Fig. 2 Characteristics of the size distributions of cfDNA in SZ and HC groups. **a** The solid lines are the distribution curves and the dotted lines indicate the diffusion times of the peak points of the markers. **b** The figure shows the average amplitude of each diffusion component in the schizophrenia group and the healthy control group. **c** The enlargement part of the diffusion components from 0.6 to 1.4 ms, which represents the scope with major differences in size. The dotted lines are the positions of the markers. **d** Average diffusion time of samples. Every dot represents the average diffusion time of each sample in the upper figure. The figure below is the boxplot of the average diffusion time of each sample in the SZ and HC group. SZ schizophrenia, HC healthy controls; * < 0.05

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Validation of results using fluorometry and qPCR

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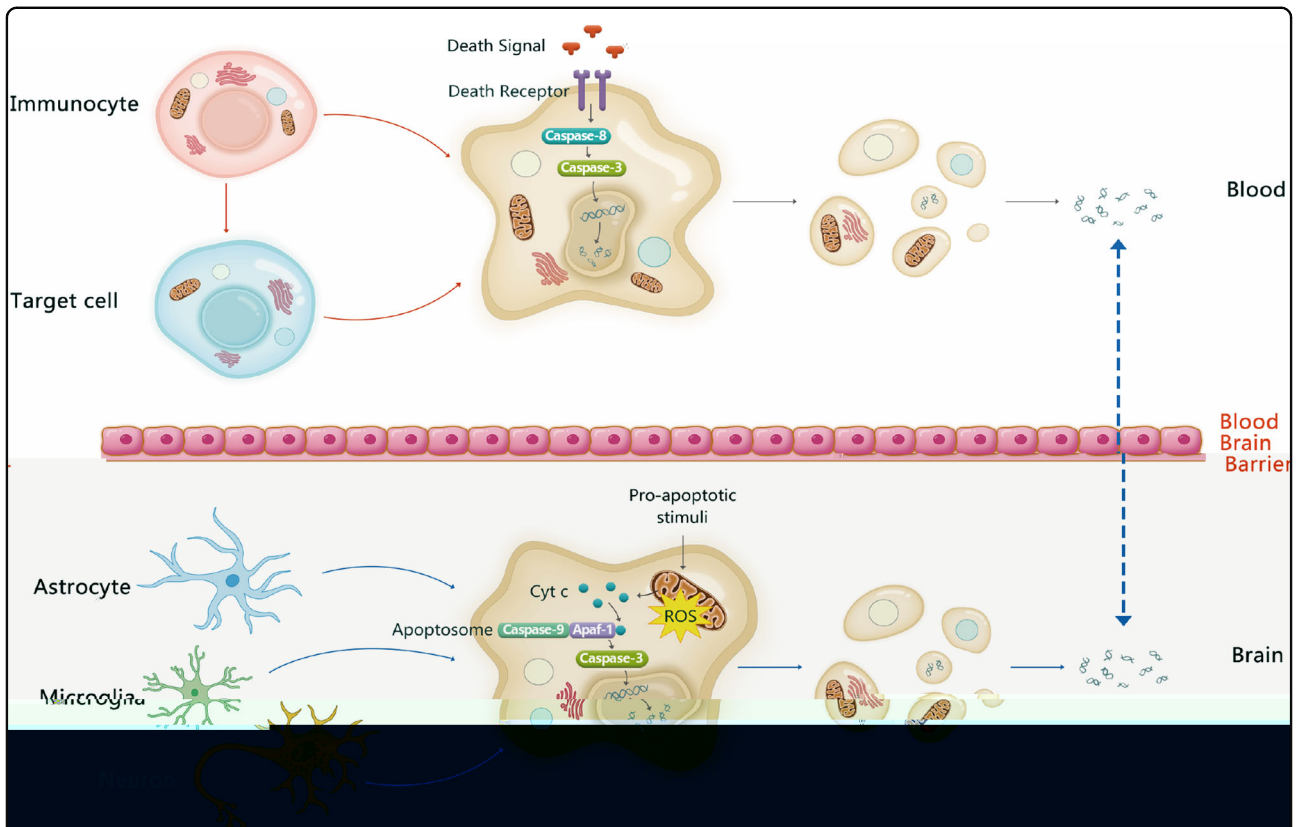


Fig. 5 Possible origins of cfDNA in schizophrenia. In brain, pro-apoptotic stimuli may lead to the accumulation of ROS, the release of Cyt c and further trigger neural cells and neurogliaocytes to undergo apoptosis. Fragmented DNA from apoptotic cells is released into the cerebrospinal fluid and flows into the blood through the blood–brain barrier. On the other hand, immunocytes in blood can either be induced to undergo apoptosis by a death signal or induce target cells to undergo apoptosis during an immune response. So the cfDNA observed in the plasma may come from the brain and the blood

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Conflict of interest

The authors declare that they have no conflict of interest.

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