## Establishing Disease Modeling of CADASIL Using Human Induced Pluripotent Stem Cell-Derived Pericytes

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Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy (CADASIL) is an extremely rare neurological small vessel disease, affecting about 2-5 people every 100,000 globally, defined by the NOTCH3 mutation (Khan, et al., 2020). The aim of this study was to establish a disease model for CADASIL using human induced pluripotent stem cells (hiPSC)-derived pericytes to represent the disease pathogenesis of CADASIL through validation of hiPSC-derived pericytes and functional analysis. Validation of hiPSC-derived pericytes (PC) were performed through qPCR and Immunofluorescence. There was a significantly lower expression of PDGFRβ and NG2 in CADASIL cell lines (p< 0.0001), suggesting dysregulation in pericyte function, compromised angiogenic potential, and impaired vascular development in CADASIL. To examine the calcium influx of CADASIL vs. Non-CADASIL cell lines, the brightness intensity was quantified, followed by the addition of ionomycin to accentuate the calcium signal. The system showed significantly more calcium influx in CADASIL cell lines (p< 0.05), indicating elevated levels of Ca2+ due to the vasocontraction. Cell migration rates of pericytes were compared using the Scratch assay. The Scratch assay also demonstrated that PC from Non-CADASIL exhibited a faster proliferation rate compared to CADASIL (p < 0.05). Through the MTT Assay, the healthy control pericytes exhibited significantly higher absorbance compared to CADASIL pericytes (p < 0.001), indicating reduced proliferation rate in CADASIL-derived pericytes. As the hiPSC-derived PC provided an effective model for CADASIL, the research has implications for future drug development and improved diagnosis, allowing further investigation of CADASIL pathogenesis.