

Abstract 1184

MECHANISMS CONTRIBUTING TO DIFFERENTIAL GENETIC RISKS IN TREM2 R47H AND R62H VARIANTS IN ALZHEIMER'S DISEASE

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### Aims

Coding variants in the microglial TREM2 ectodomain differentially (R47H> R62H) increase the risk of Alzheimer's disease (AD). To define mechanisms responsible, we aimed to characterise neuropathology and transcriptomic responses in heterozygotes for these *TREM2* variant alleles (*TREM2var*) and for common allele homozygotes (CV) in non-diseased (n=16) and AD (n=42) brain cortical tissue from 58 donors.

### Methods

Using immunohistochemistry (IHC) and imaging mass cytometry (IMC), we characterised neocortical  $\beta$ -amyloid and AT8/PHF1 pTau pathology with CV (n=30) and the R47H (n=11) or R62H (n=17) *TREM2var*. We performed single nuclear RNA sequencing to test for differences in cell-type proportions and for the differential gene expression (DGE) in *TREM2var* and CV cortical tissues with greater 4G8<sup>+</sup>  $\beta$ -amyloid- or PHF1<sup>+</sup> pTau-immunostaining.

### Results

There was a two-fold increase in 4G8<sup>+</sup>, a three-fold reduction in AT8<sup>+</sup> but no change in PHF1<sup>+</sup> immunostaining, and reductions in neuronal nuclei proportions with AD in *TREM2var* versus CV. We found a partial loss of gene expression associated with *TREM2* function with variant alleles (R47H>R62H) relative to CV. Increased neurodegeneration in the *TREM2var* AD cortex was associated with genotype-dependent reductions in expression of Disease Associated Microglia genes (R47H>R62H) and increased expression of complement and Type I and II interferon pathways in microglia. The risk variants were associated with increased gene expression in astrocytes particularly of Disease Associated Astrocyte genes (R47H>R62H). Neuronal gene expression changes were evident in both variants, however enhanced in R47H, in response to 4G8<sup>+</sup>  $\beta$ -amyloid- and PHF1<sup>+</sup> pTau with changes in growth factor, ubiquitination and apoptotic pathways.

### Conclusions

This analysis identified novel disease-associated transcriptomic differences in microglia, associated astrocytic responses and secondary neuronal responses that can explain differences in the genetic AD risk conferred by these two *TREM2* risk variants.