

Early Changes in the Brain Proteome Associated with Alzheimer's Disease Risk

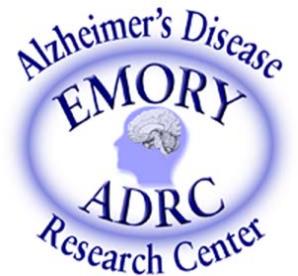
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Assistant Professor

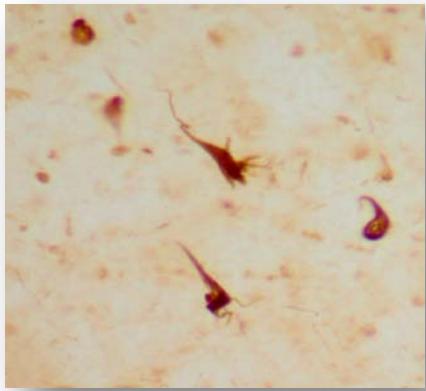
Departments of Biochemistry and Neurology
Alzheimer's Disease Research Center
Emory University, School of Medicine



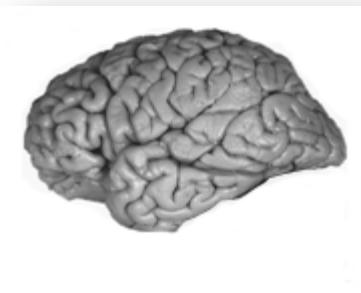
EMORY
UNIVERSITY



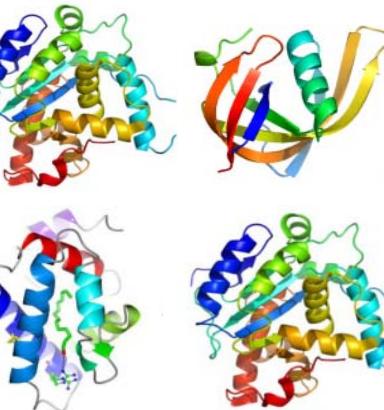
Proteomics at the Emory ADRC



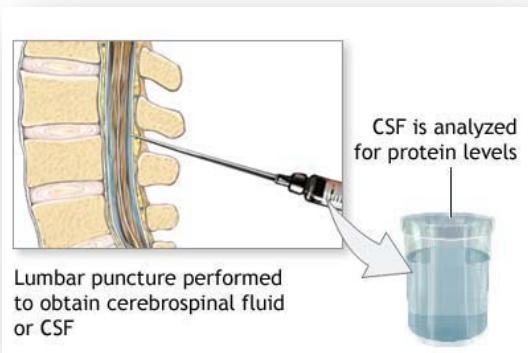
Pathological Aggregates



Synapse-rich



Proteome



Cerebral Spinal Fluid (CSF)



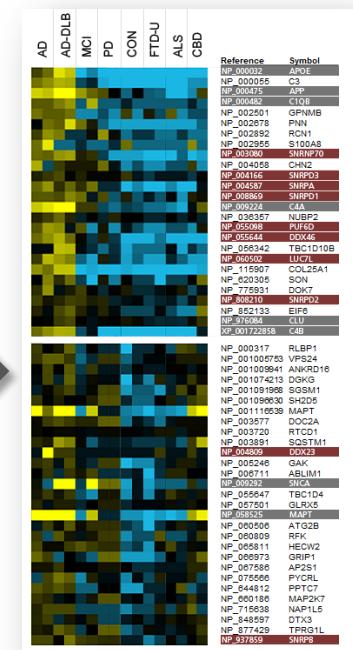
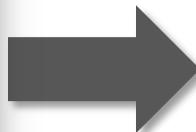
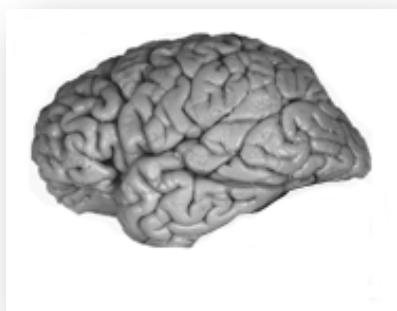
Plasma/Platelets

Proteomics in Alzheimer's Disease (AD)

Specific Goal

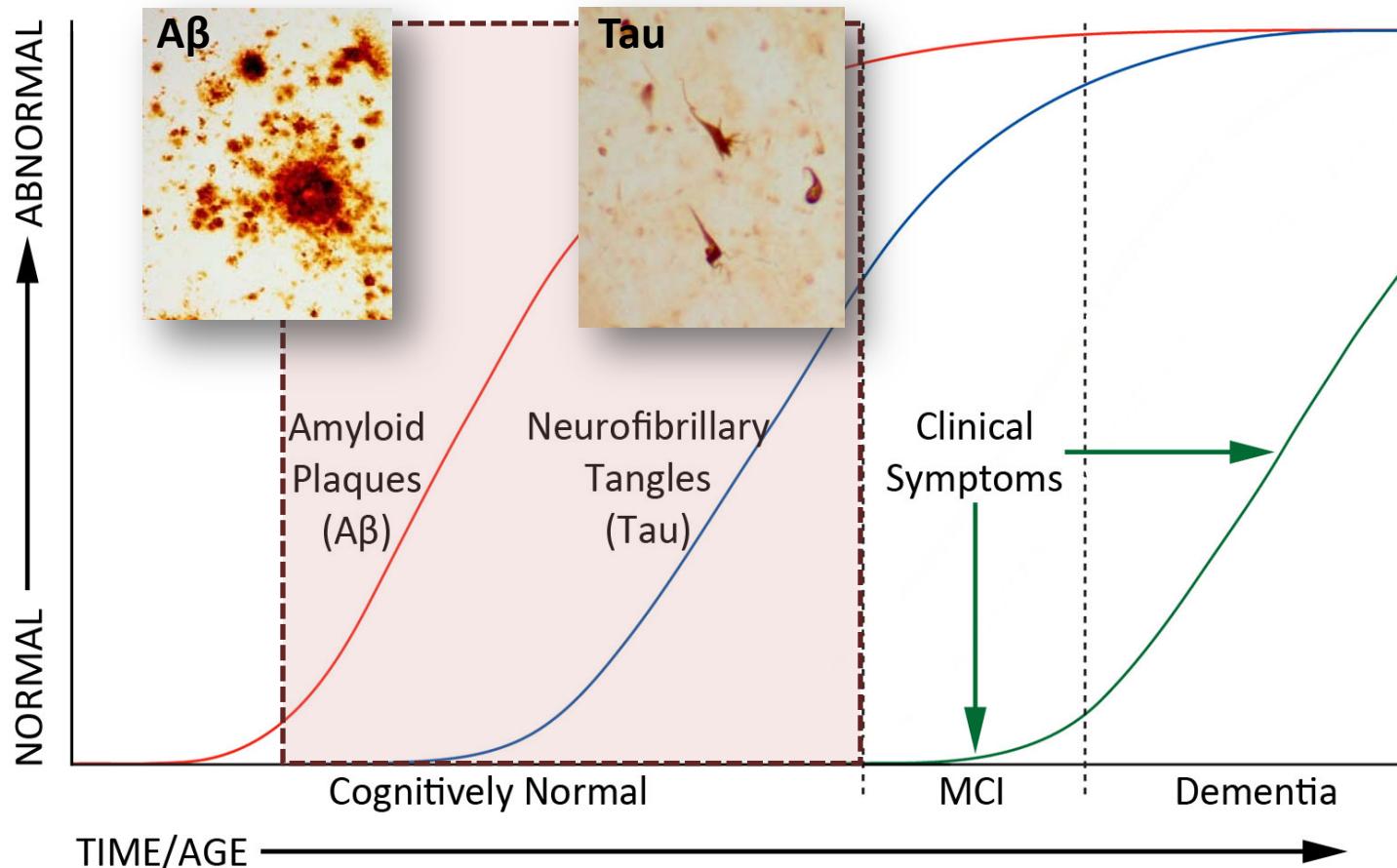
- Develop accurate and precise method to quantify proteins in brain tissue

Ultimate goal: Can we use proteomics to better define pre-clinical stages of AD and target key molecular pathways that associate with cognitive decline?



The Alzheimer's Continuum

Preclinical or Asymptomatic AD: The period between the first appearance of AD neuropathology and the onset of clinically detectable symptoms of disease.

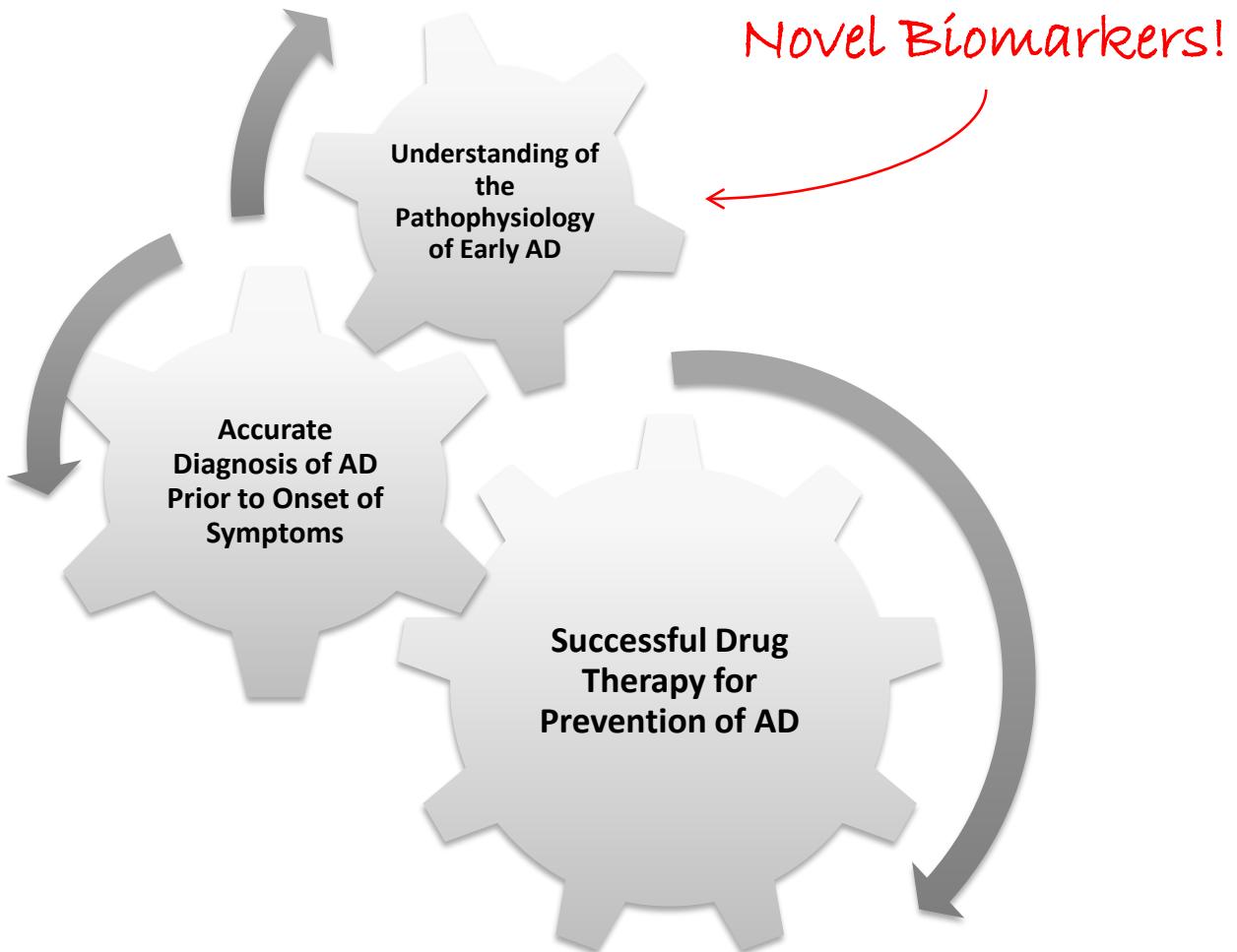


Evidence for Asymptomatic AD

- Post-mortem neuropathological and *in vivo* PET imaging studies suggest that a substantial proportion of **cognitively normal** older individuals demonstrate evidence of **A β** and **tau** tangle accumulation, approximately **30%**.
- The distribution of amyloid deposition in these **cognitively normal** older individuals tends to occur in a pattern similar to that found in AD.
- **Summary:** This suggests that **A β** and **neurofibrillary** pathologies are necessary, but **not sufficient alone** to explain the onset of cognitive decline.

(Rowe et al. 2010, Mintum et al. 2006, Jack et al. 2008, Gomperts et al. 2008)

Relevance of Asymptomatic AD

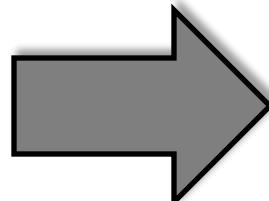


Biomarker Criteria in AD

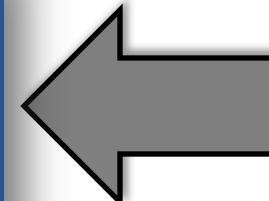
1. Detect a fundamental feature of AD neuropathology.
2. Be validated in autopsy-confirmed cases of the disease.
3. Have a diagnostic specificity for distinguishing and sensitivity for detecting AD from other dementias.
4. Diagnostic laboratory tests should be reliable, reproducible, non-invasive and simple to perform.

Trojanowski, J.Q. (2004) *Practical Neurology*, 3:30-34
Frank RA, (2003) *Neurobiol. Aging*, 24:521-536

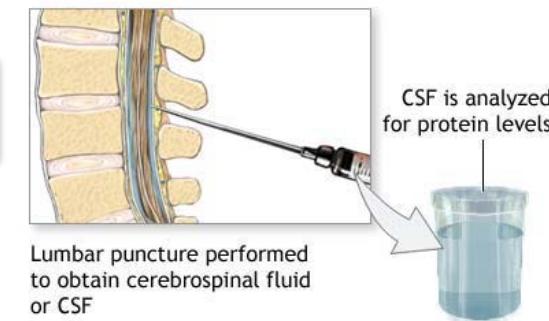
Brain



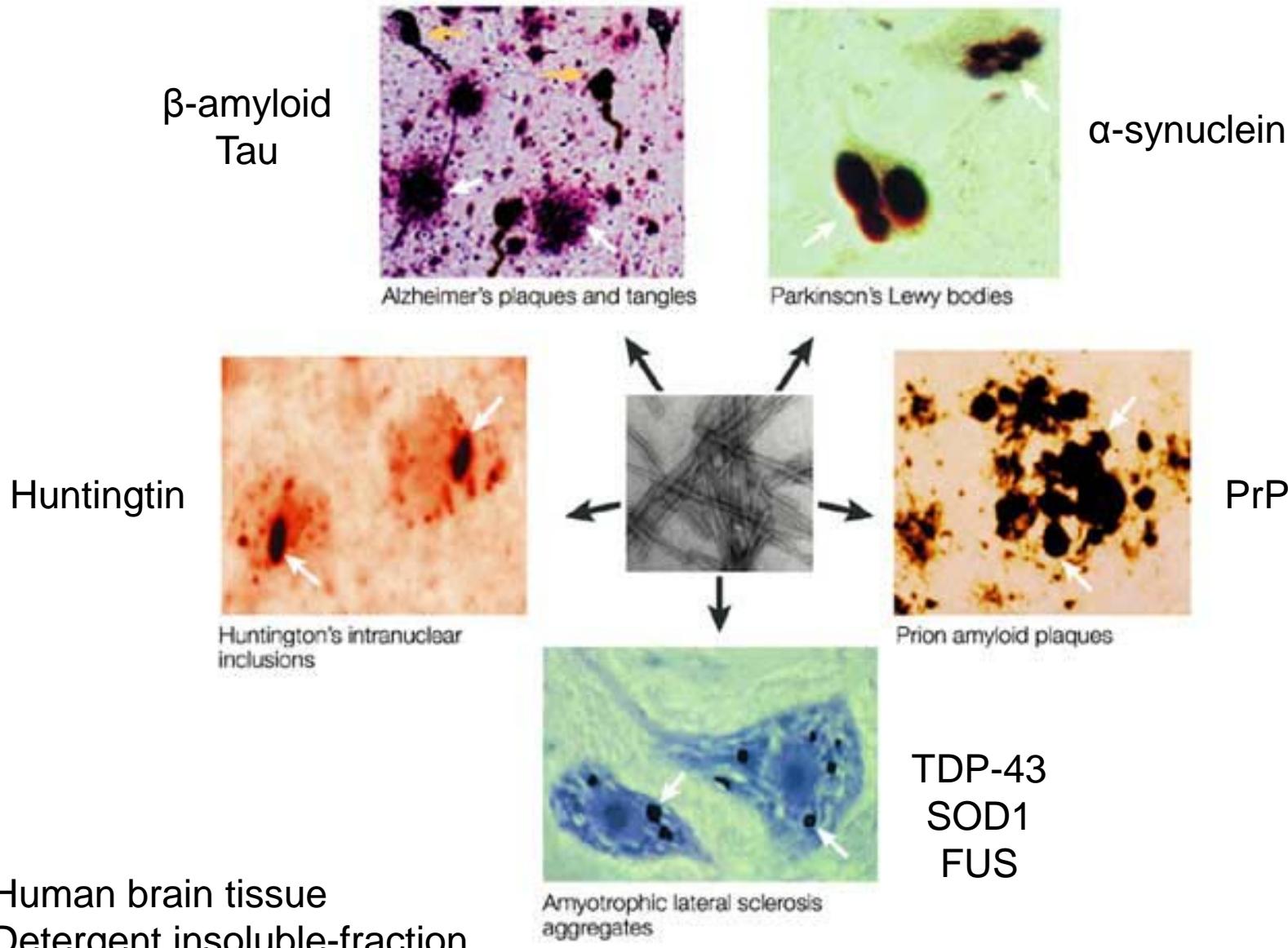
Orbitrap MS



CSF



Where do we first look for biomarkers in AD?



- 1) Human brain tissue
- 2) Detergent insoluble-fraction



Biomarker Discovery in AD

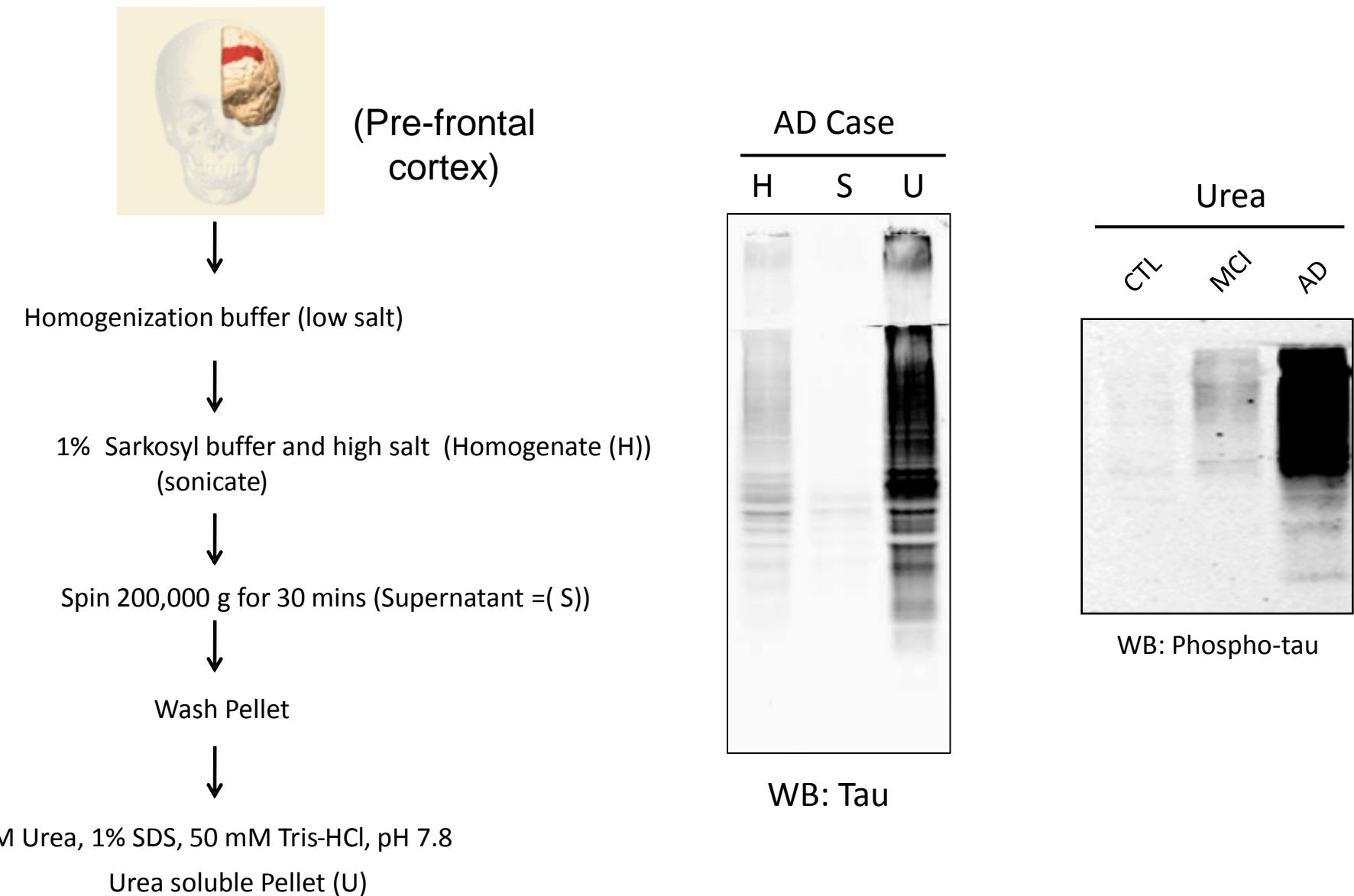
Hypothesis:

Conserved sets of, yet unidentified, proteins are pathologically altered in AD and contribute to disease pathogenesis.

Approach:

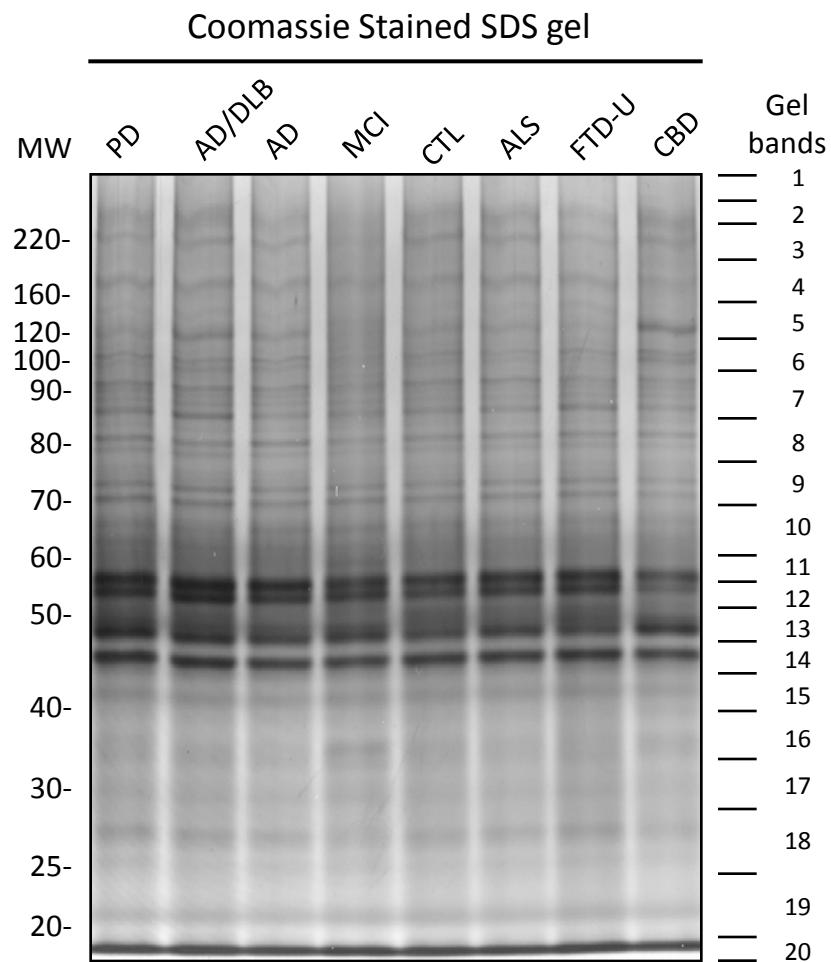
Analysis of the detergent-resistant (i.e., insoluble) brain proteome from control and seven neurodegenerative disease sub-groups by quantitative MS-based proteomics

Enriching for the detergent-resistant pathological proteins

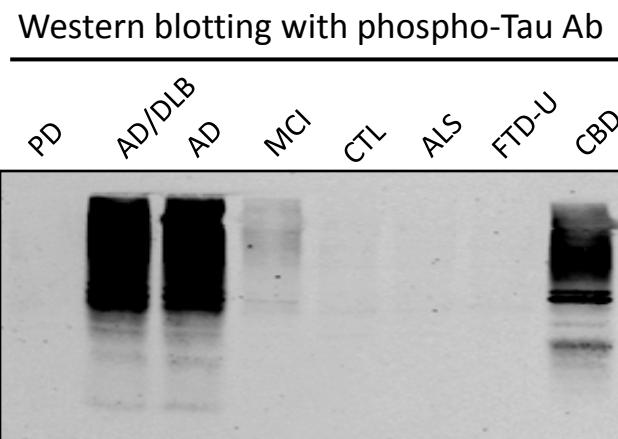


Identifying AD specific markers in the insoluble proteome

A

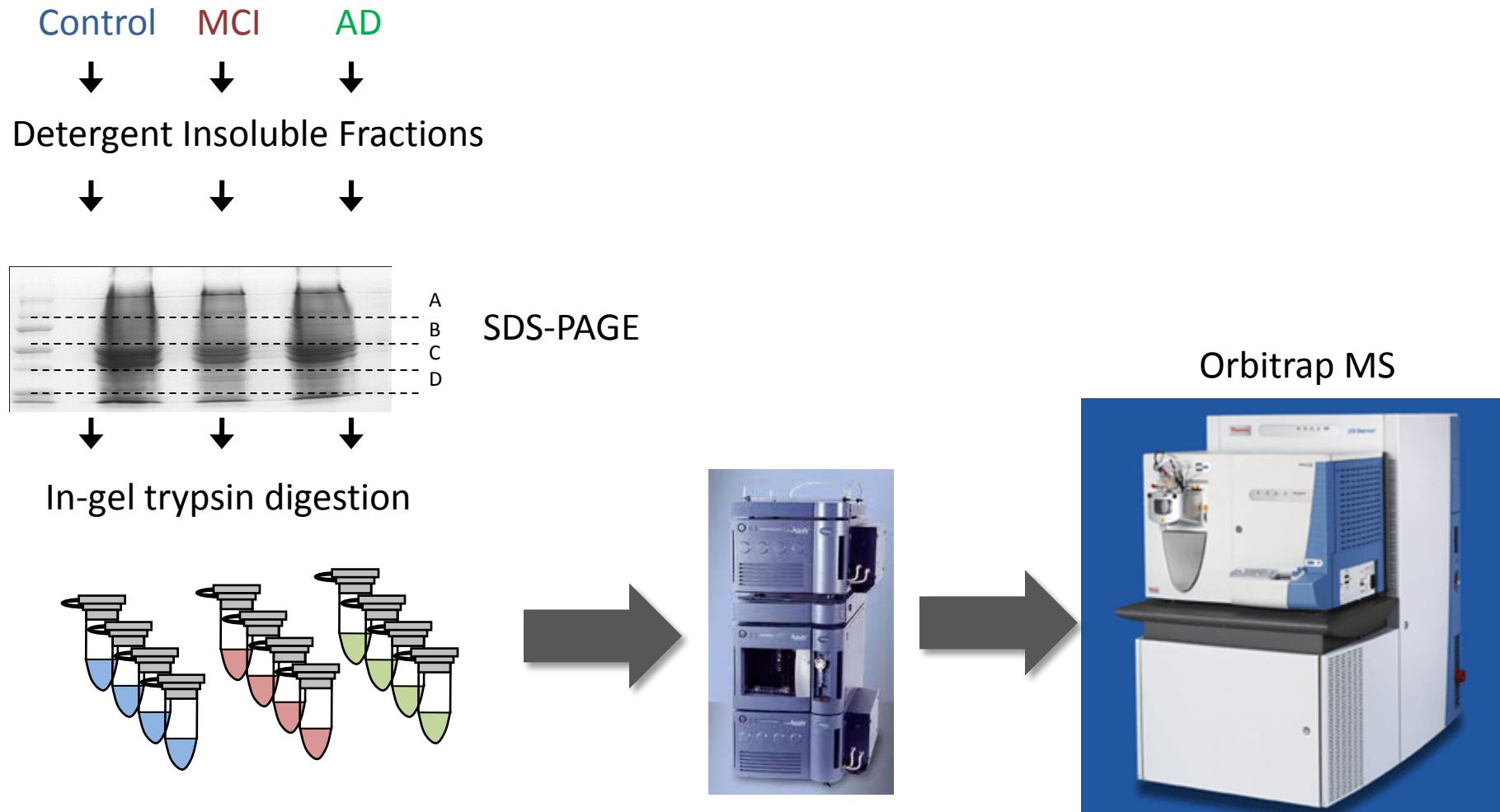


B

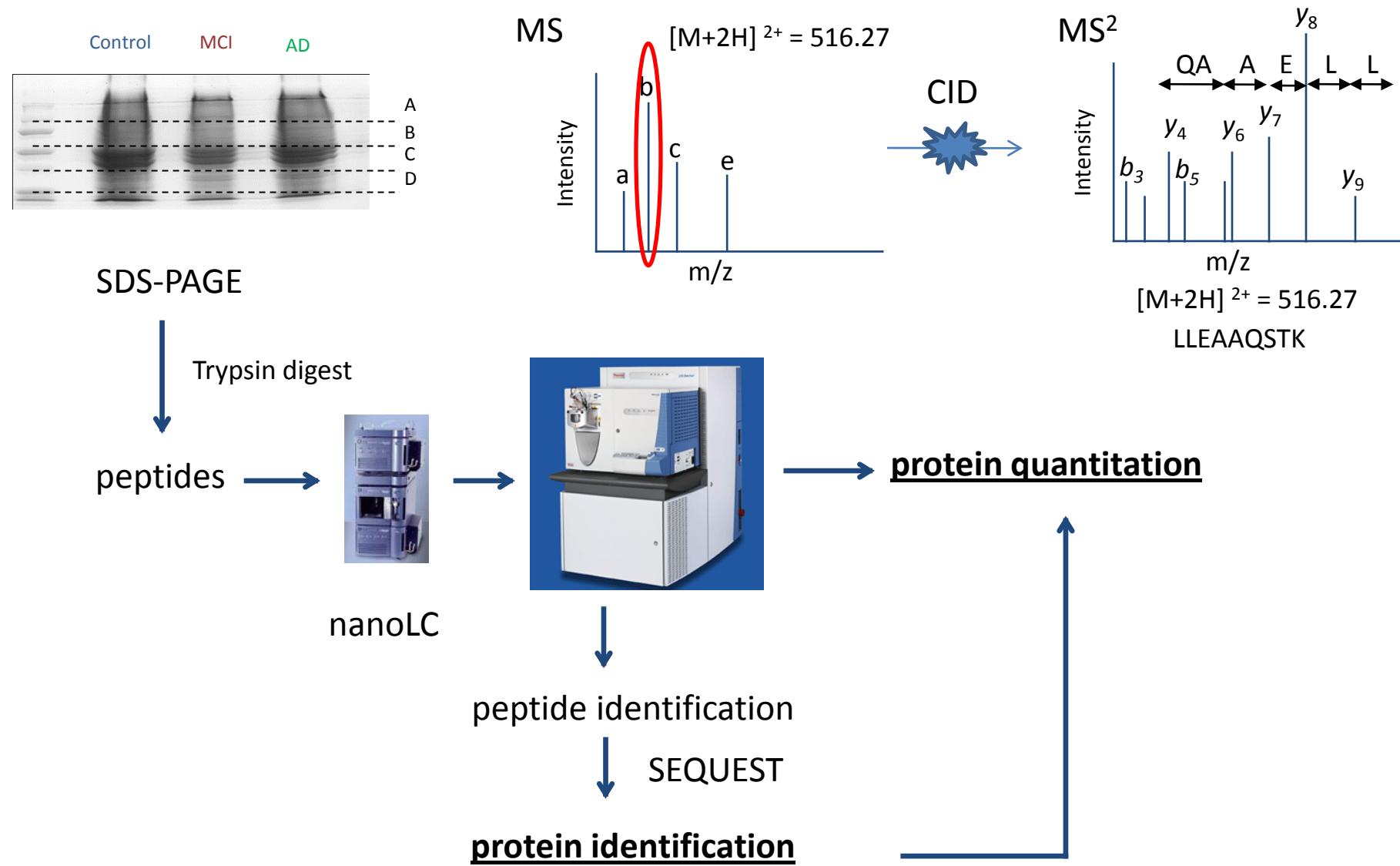


Brain Tissue (Pre-frontal cortex) was provided by the Emory ADRC Neuropath Core

Proteomic Workflow



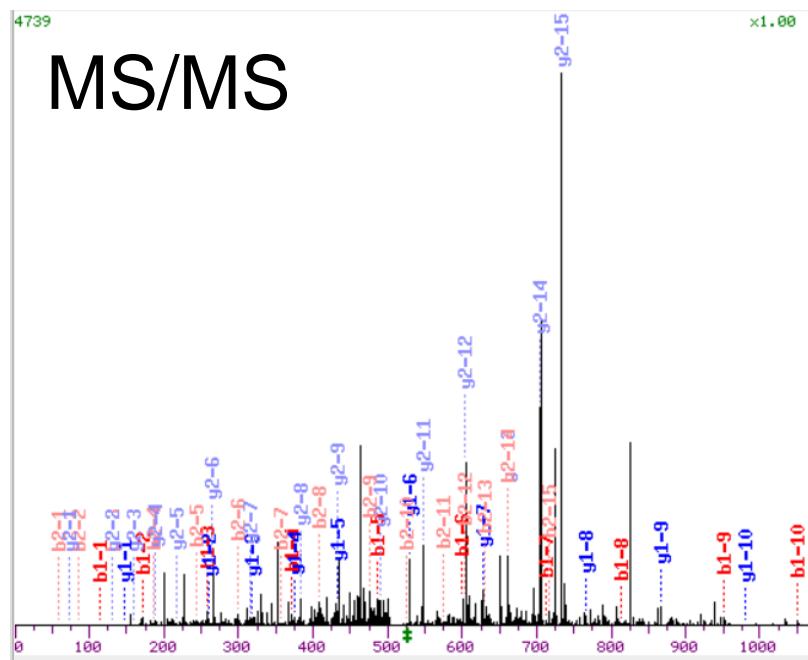
LC-MS/MS based proteomics — identify and quantify



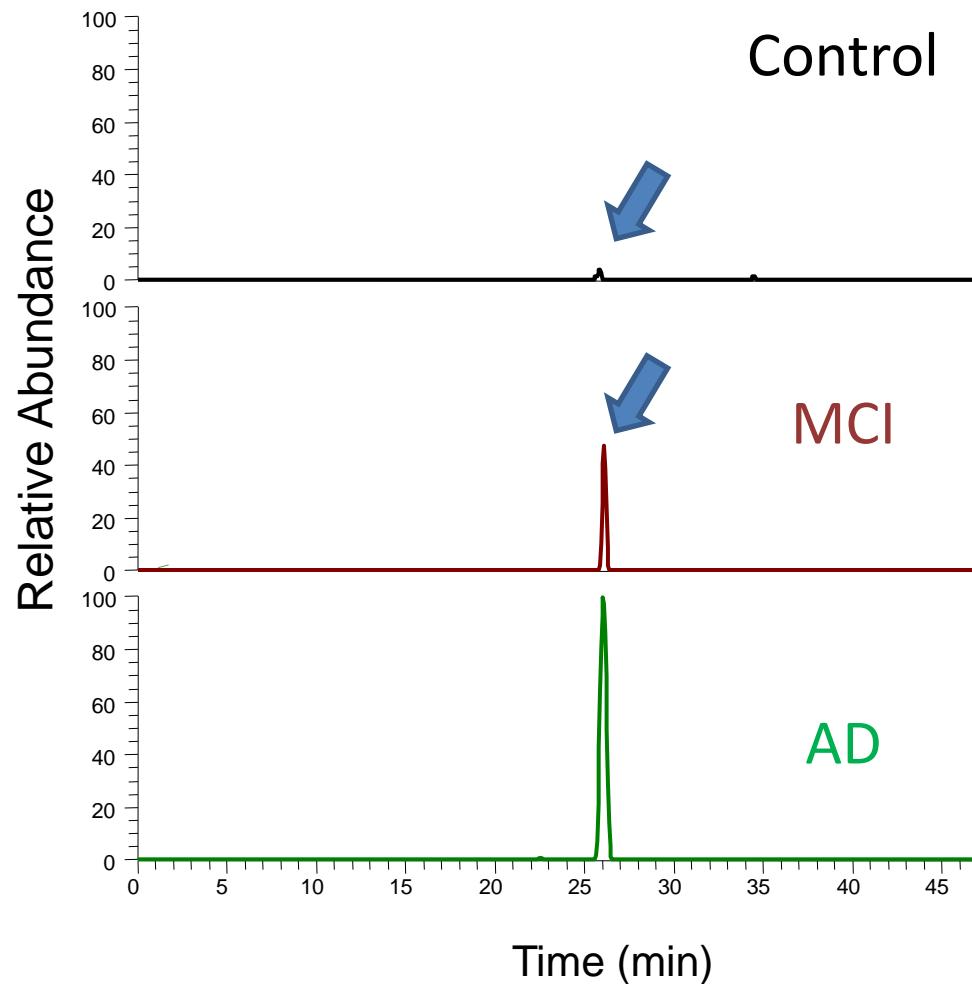
Microtubule Associated Protein Tau



K.IGSLDNITHVPGGGNK.K
(amino acids 354-369)

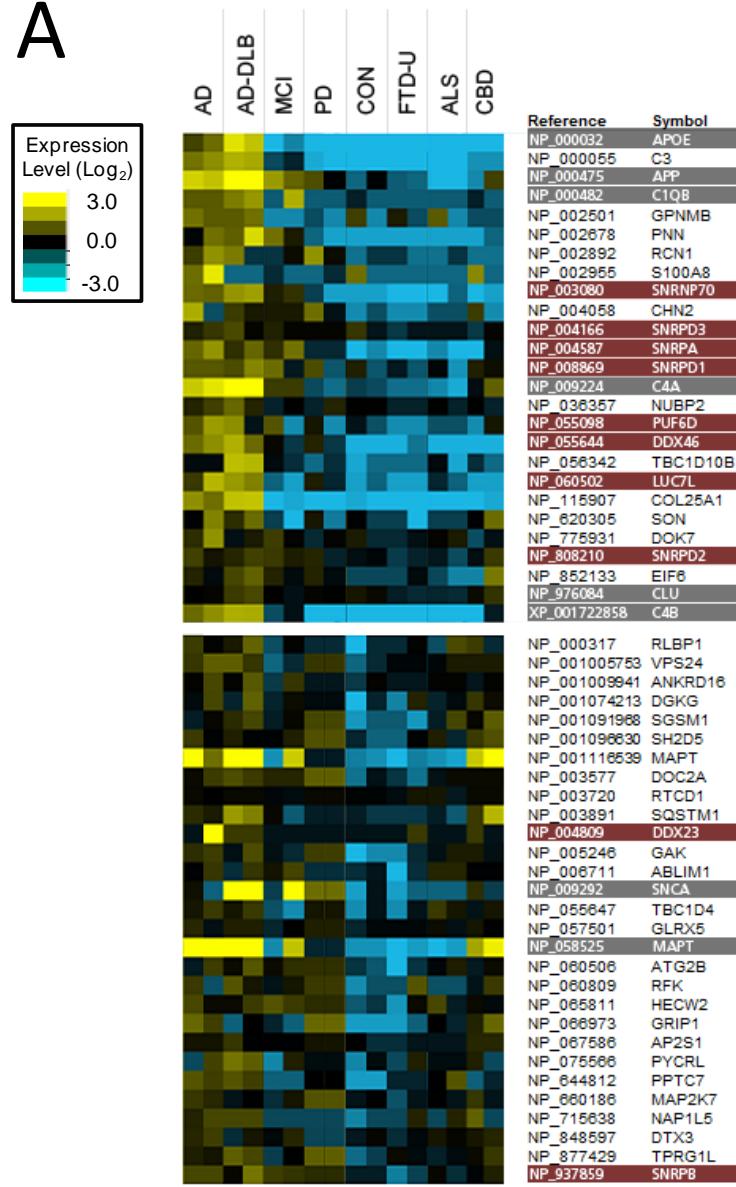


Extracted Ion Intensity

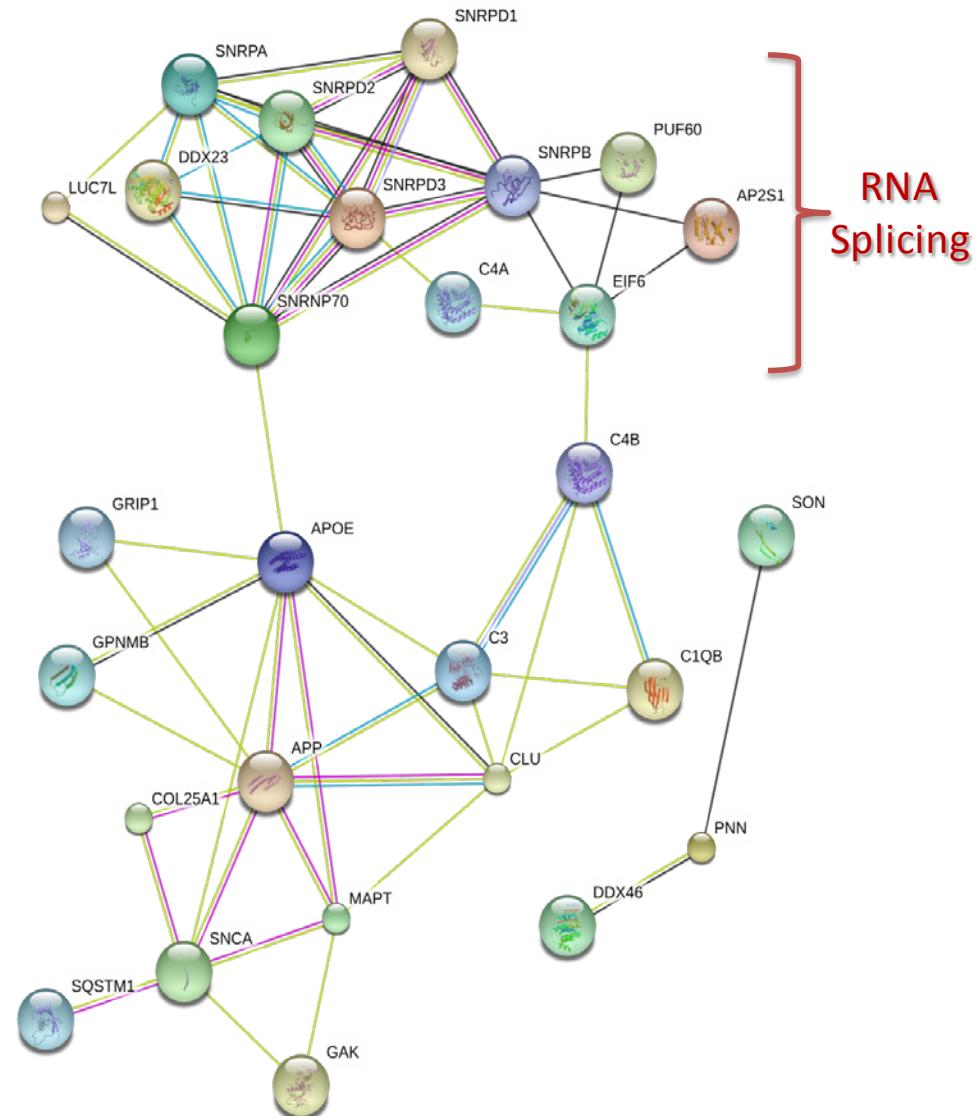


Identifying AD specific markers in the insoluble proteome

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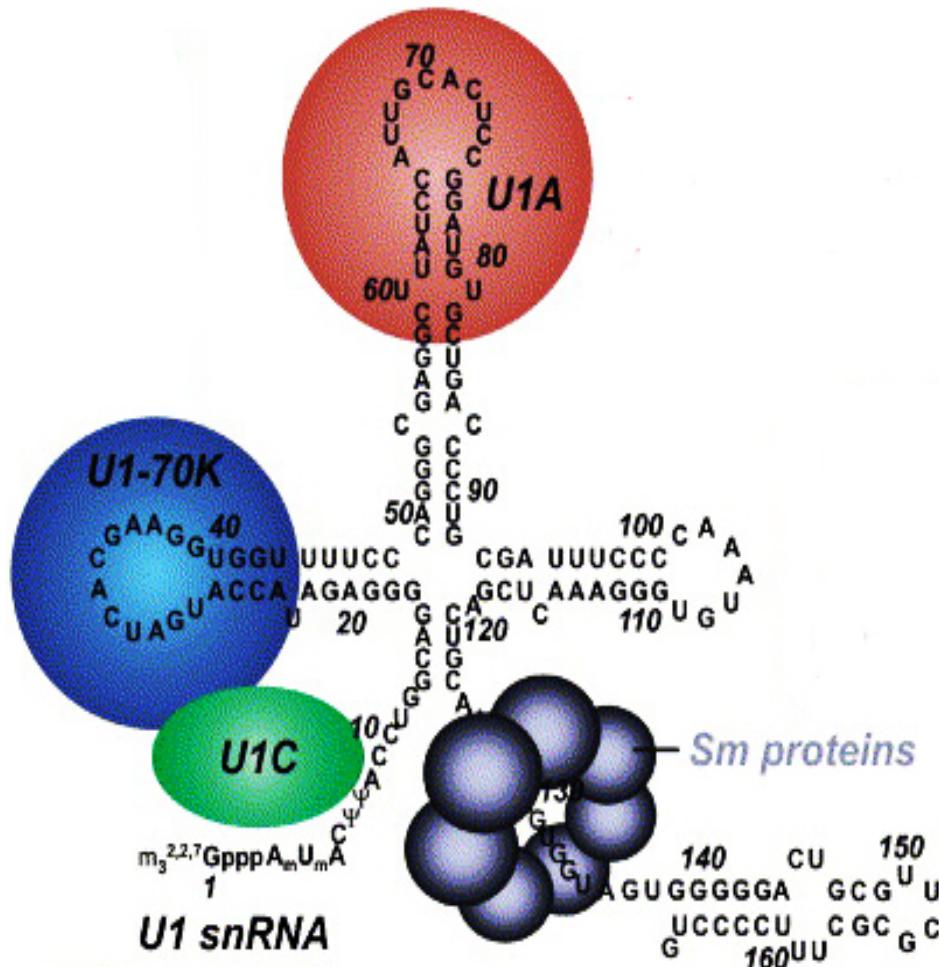


B



U1 snRNP – structure and function

U1 Small Nuclear Ribonucleoprotein Complex



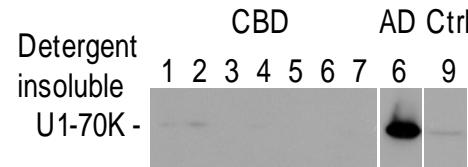
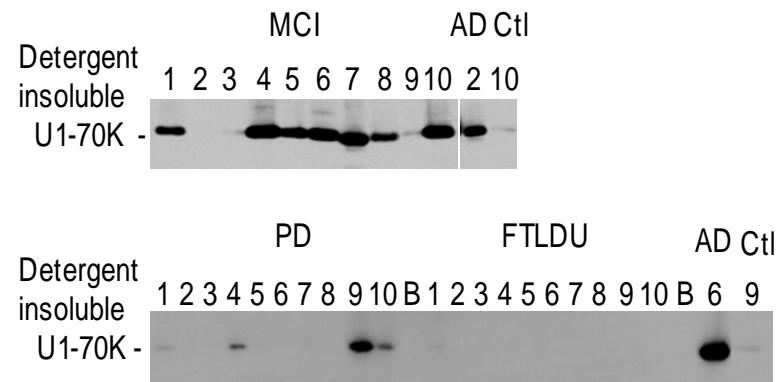
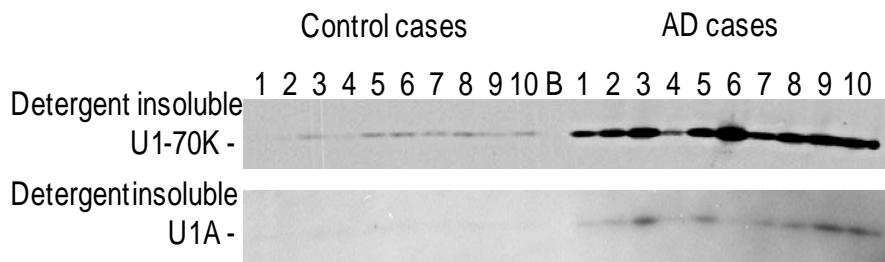
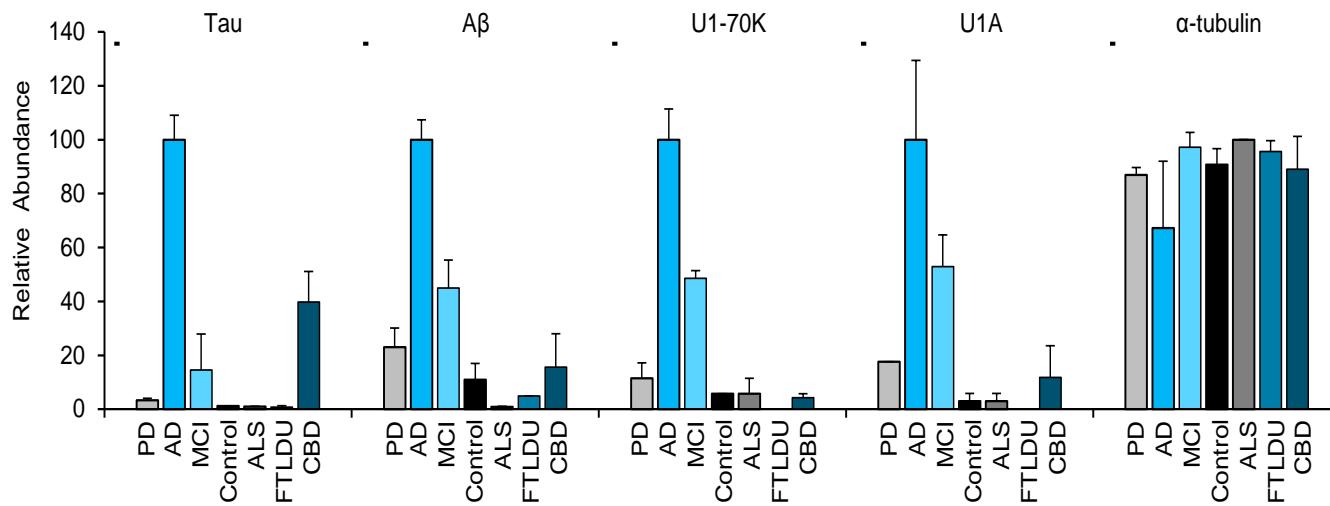
Structure

- i. U1 snRNA
- ii. U1 proteins
 - U1-A
 - U1-70K
 - U1-C
- iii. 7 Sm proteins (SMN complex)

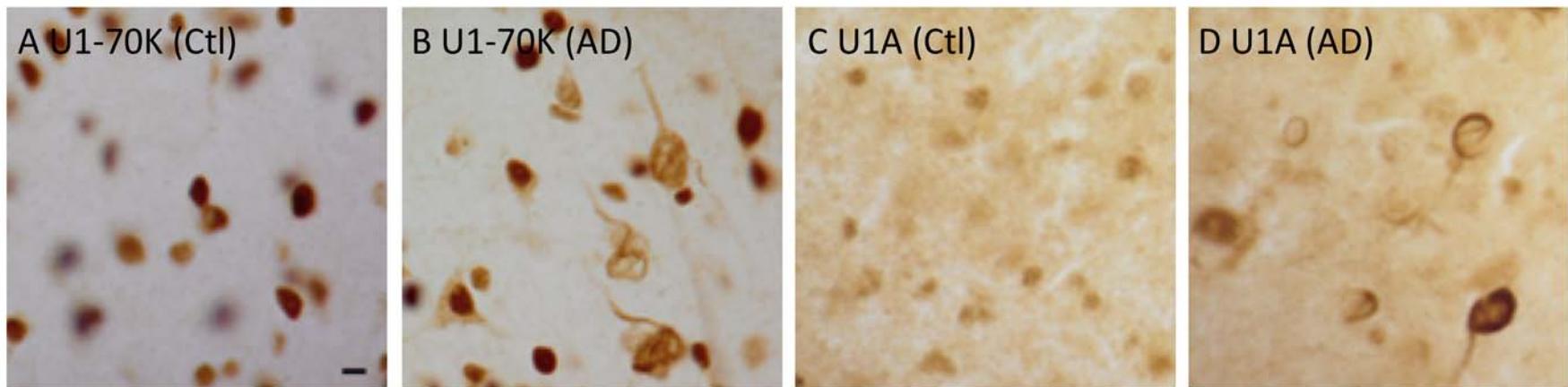
Function

- i. Binds 5' splice site of pre-mRNA to initiate intron removal and alternative splicing of 95% of transcripts.
- ii. Functional form localized to nucleus

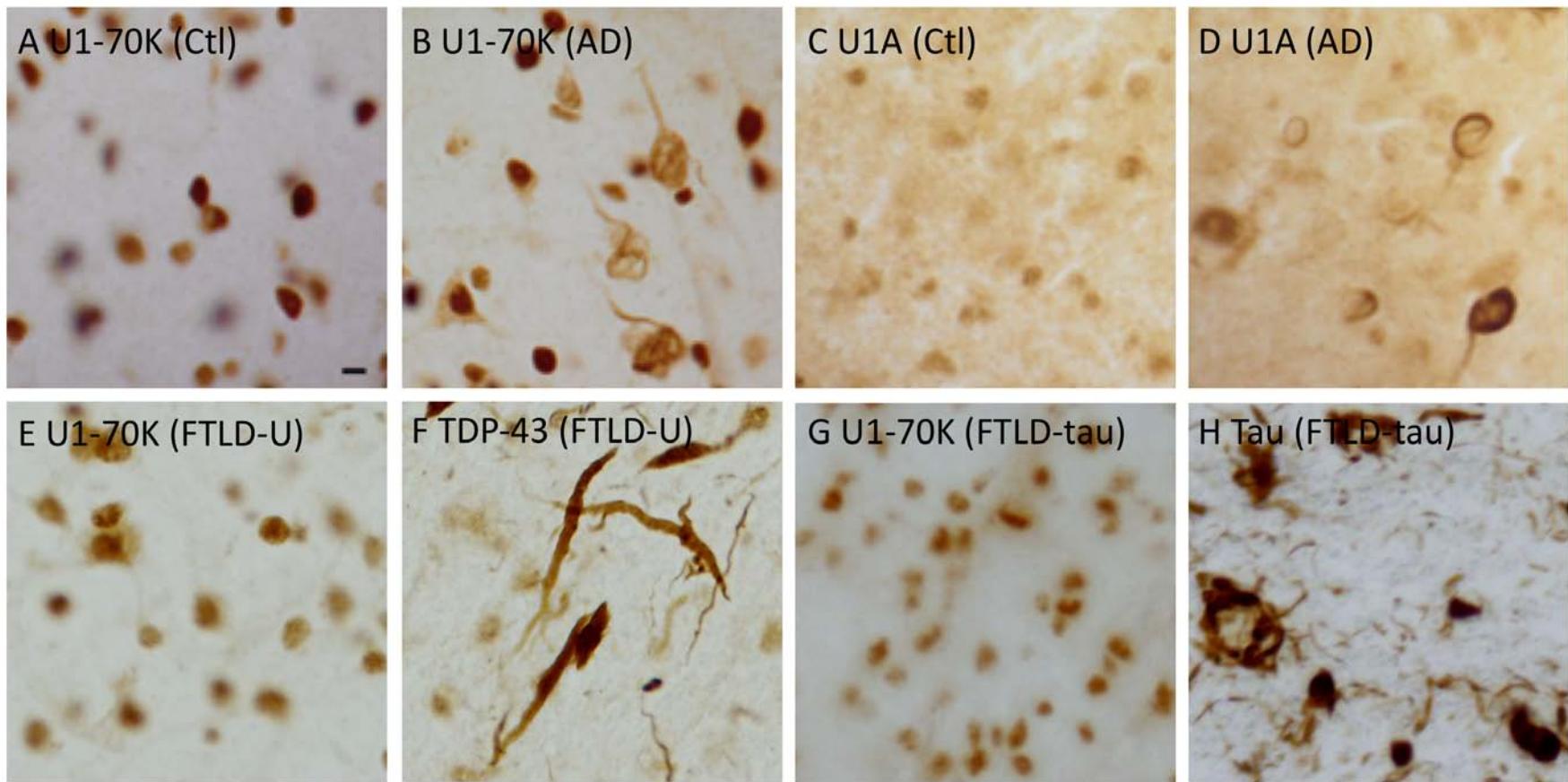
U1 snRNP insolubility is highly specific to AD



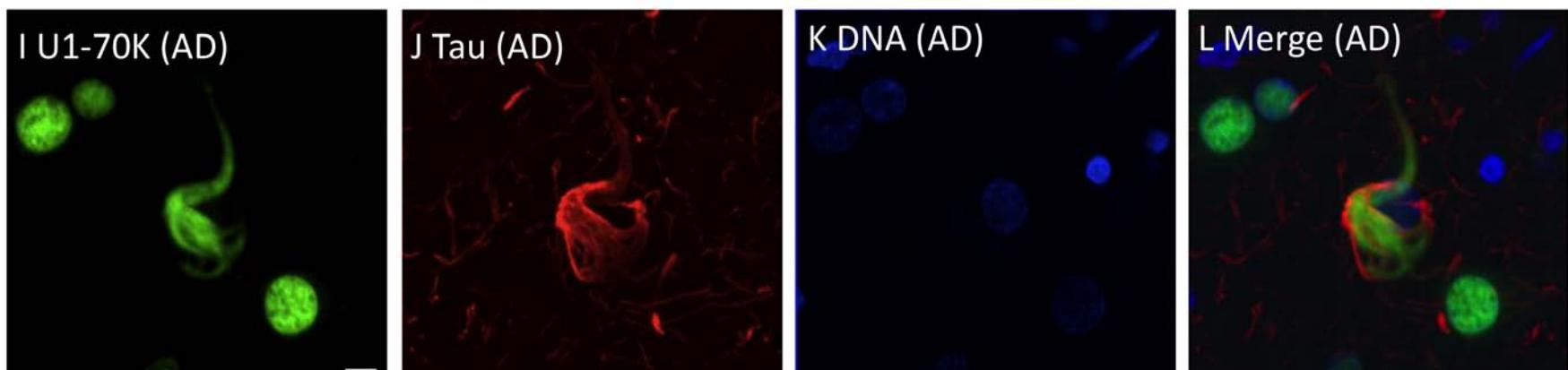
U1 snRNP is associated specifically with AD pathology



U1 snRNP is associated specifically with AD pathology



U1 snRNP is associated specifically with AD pathology



Does U1 snRNP directly associated with NFTs in AD?

EM of immunogold-labeled U1-70K aggregates in cytoplasm

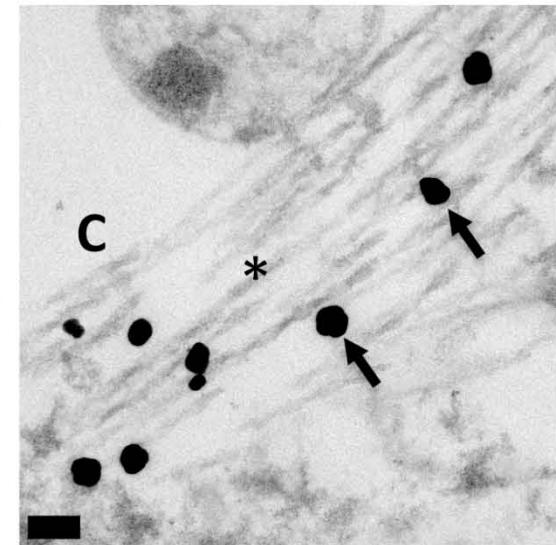
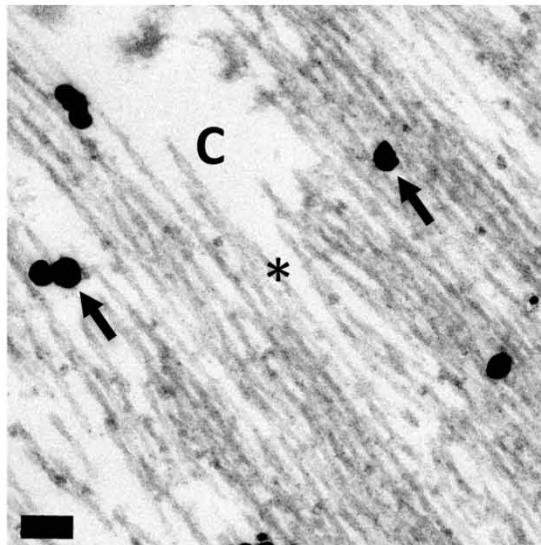
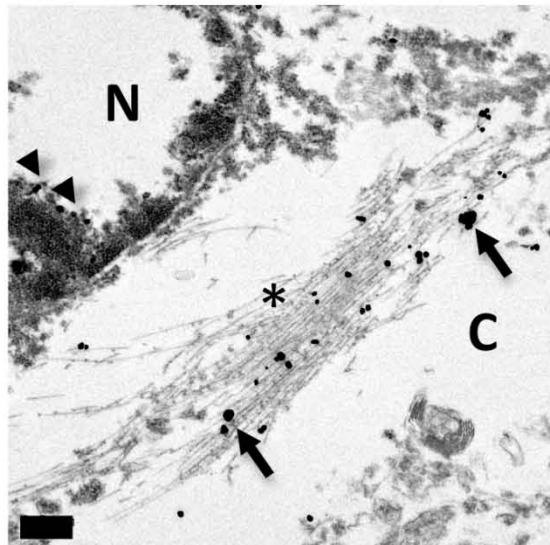
A

U1-70K

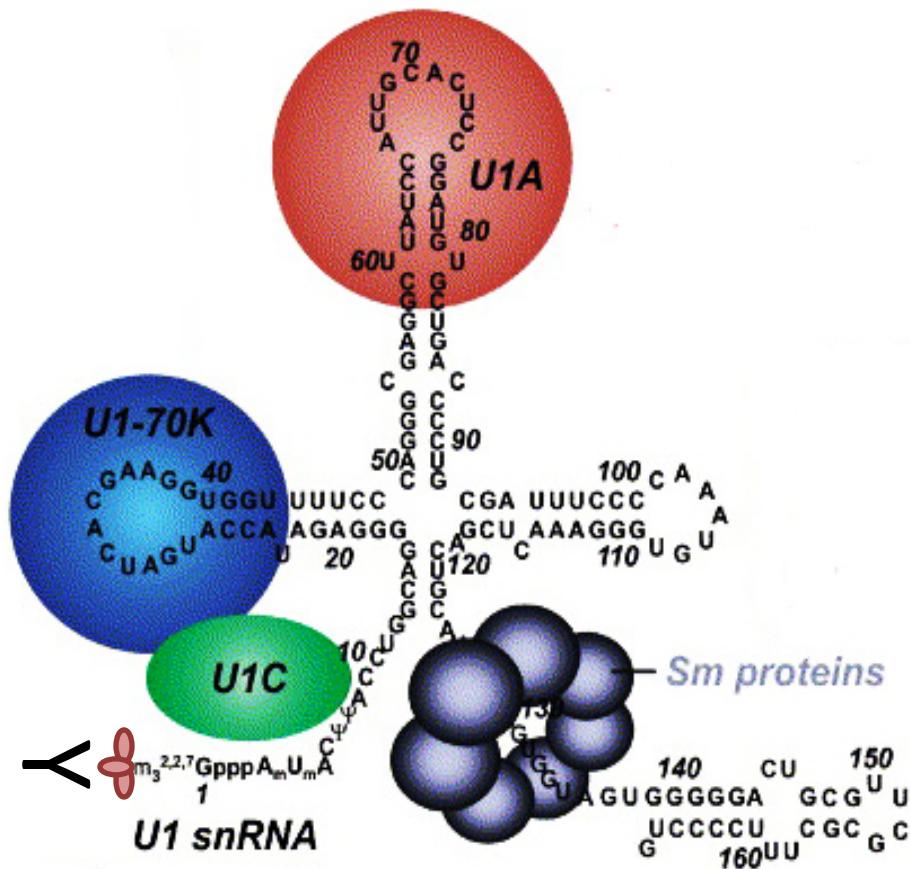
U1-70K

AT8

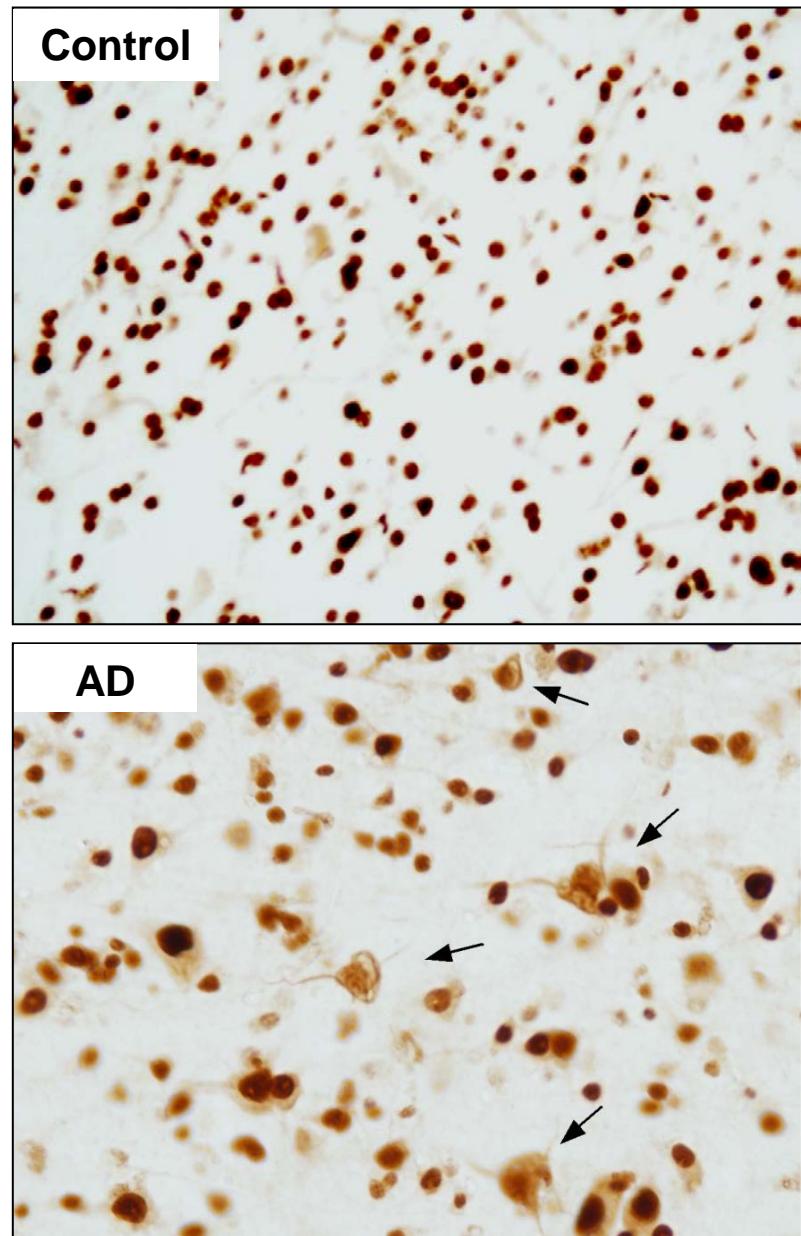
AD



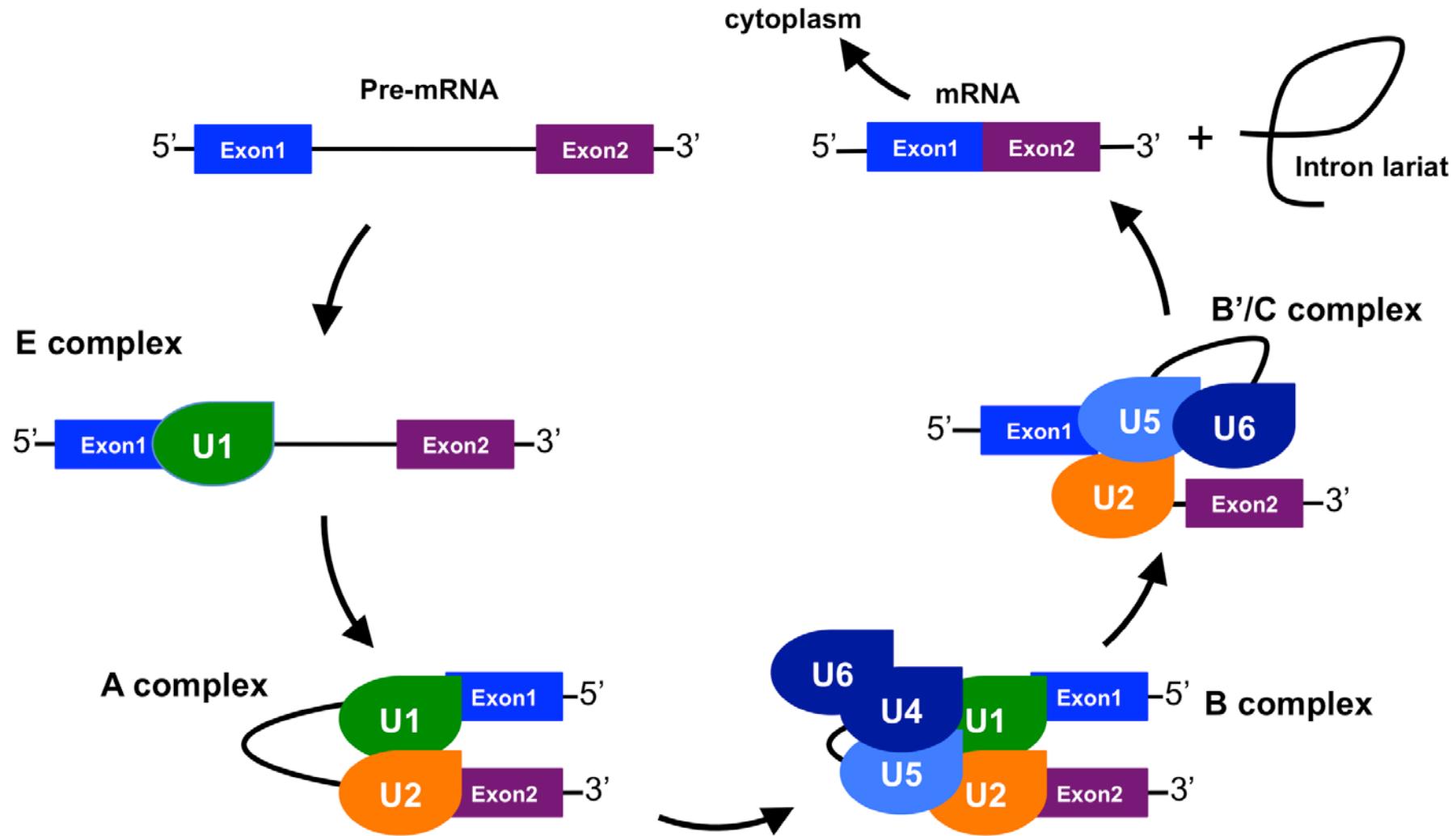
Is U1-70K aggregation dependent on RNA?



2,2,7-trimethylguanosine cap of U1
snRNA evident in tangles

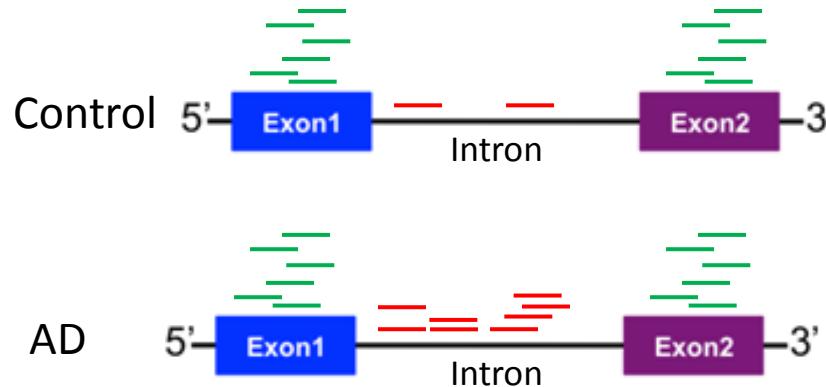


Are there defects in RNA maturation in AD brain?

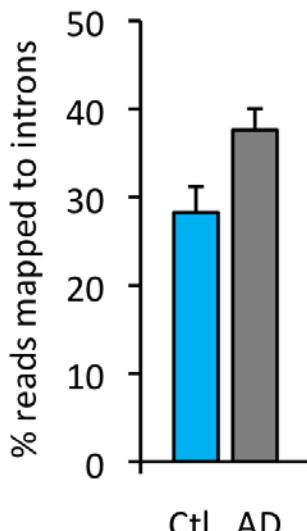


Are there defects in RNA maturation in AD brain?

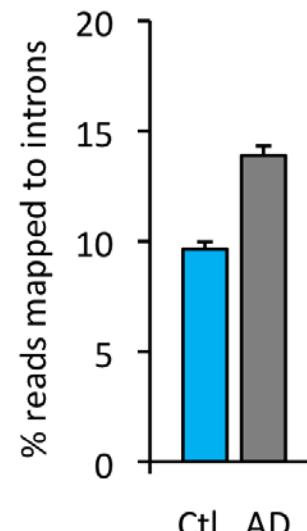
RNA-seq



Emory group
($p = 0.041$)

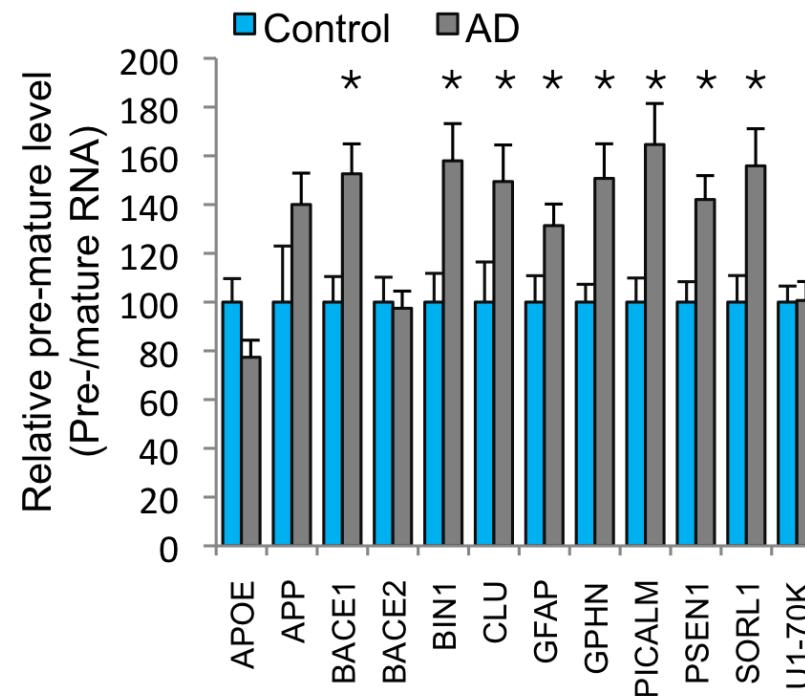
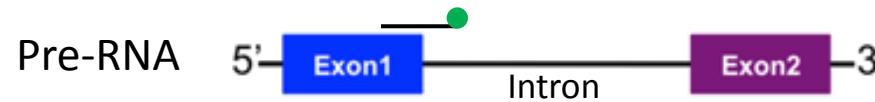


UKY group
($p = 0.003$)

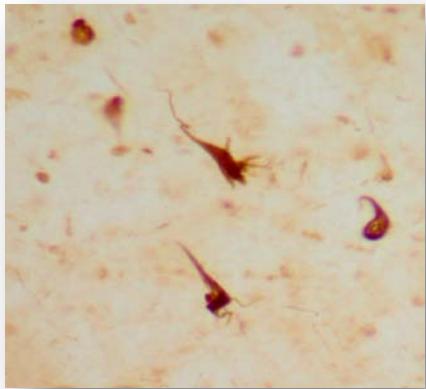


Are there defects in RNA maturation in AD brain?

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Proteomics at the Emory ADRC



Pathological Aggregates

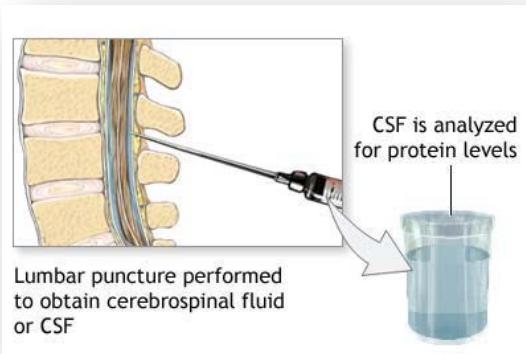


Synapse-rich

Individual



Proteomics



Cerebral Spinal Fluid (CSF)



Plasma/Platelets

Proteomics Collaborators at Emory ADRC



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School of Medicine

Dan Geschwind
Giovanni Coppola



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Research Institute

Brittany Dugger
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MEDICAL CENTER

SANDERS-BROWN
CENTER ON AGING

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David Bennett

HARVARD
MEDICAL SCHOOL

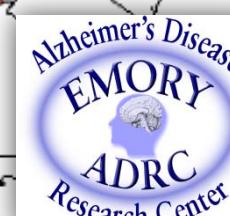
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Jim Lah
Chad Hales
William Hu
Tom Kukar
Thomas Wingo
Jon Glass
Marla Gearing
John Hanfelt
Hao Wu
Peng Jin

NIA U01 Proteomics Discovery in AD



ADC Collaborations



Acknowledgements

Emory ADRC

Allan Levey

Jim Lah

Eric Dammer

Ian Diner

Duc Duong

Isaac Bishof

Jason Fritz

Marla Gearing

Jonathan Glass

Craig Heilman

Zoe White

Thomas Wingo

Deborah Cooper

Hong Yi

Junmin Peng

Bing Bai



Funding:



National Institute
on Aging

