## Extracellular amyloid-β associated proteins in AD *Veerhuis R* Depts of Pathology and Psychiatry, Research Institute Neurosciences, Vrije Universiteit, Amsterdam

Alzheimer's disease (AD) is neuropathologically characterized by extracellular deposits of amyloid  $\beta$  (A $\beta$ ) and by neurofibrillary tangle formation. Brain specimens from control and AD cases with different degree of neuropathology (Braak score) and also differentially affected brain regions within patients were compared to get insight in the sequence of events in Aß plaque evolution at various stages of AD. Activated microglia and Congo red positive amyloid plaques in the temporal cortex coincided and appeared before the onset of neurodegenerative changes. Various so-called amyloid associated proteins (AAPs) can be found in different types of Aβ deposits in AD brain. Some AAPs (e.g. apolipoprotein E, glycosaminoglycans, serum amyloid Pcomponent (SAP), complement factor C1q) enhance the aggregation of A $\beta$ , whereas others (clusterin) may promote solubilization of extracellular Aβ. Complement activation products C1q, C4d, C3d in Aβ deposits can stimulate the phagocytosis of A $\beta$  by microglia, but may also activate microglial cells to secrete potential neurotoxic factors. Clusters of activated, complement receptor expressing microglial cells were found in C1q and SAP immunoreactive fibrillar A $\beta$  plaques only, suggesting a role for C1q and SAP in microglial activation. This was further investigated in vitro. Adult human microglia isolated from post mortem brain specimens were exposed to A $\beta$ 1-42 peptides alone, or in combination with SAP and C1q. Cytokine (IL-6 and TNF- $\alpha$ ) release, as marker of activation, was significantly higher in cells exposed to the combination than in cells exposed to  $A\beta$ alone.

SAP and C1q increased A $\beta$ 1-42 fibrillarity, as judged from results of EM studies and of a Thioflavin based test for fibrillarity. This suggests that SAP and C1q exert their effects on the amyloid peptide induced microglial stimulation through enhancement of fibrillarity of the A $\beta$ .

The combination of in vitro tests (microglial activation and  $A\beta$  fibrillarity) provides a system to select potential therapeutics.

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