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# ApoE isoform- and microbiota-dependent progression in a mouse model of tauopathy

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[Authors Info & Affiliations](#)**SCIENCE** 13 Jan 2023 Vol 379, Issue 6628 DOI: [10.1126/science.add1236](https://doi.org/10.1126/science.add1236) [23,606](#)  [12](#)

## Microbiota and tau-mediated disease

The accumulation of certain forms of the tau protein in the brain is linked to loss of memory and cognitive decline in Alzheimer's disease and several other neurodegenerative diseases. Apolipoprotein E (APOE), the strongest genetic risk factor for Alzheimer's disease, regulates brain inflammation and tau-mediated brain damage; however, the gut microbiota also regulates brain inflammation and tau-mediated brain injury, Seo *et al.* found that manipulation of the gut microbiota reduces the severity of inflammation, tau pathology, and brain damage in a sex- and APOE-dependent manner (Perspective by Jain and Li). —SMH

## Structured Abstract

### INTRODUCTION

Alzheimer's disease (AD) is characterized by early deposition of amyloid- $\beta$  (A $\beta$ ) plaques and pathological tau accumulation. Although A $\beta$  is a necessary factor in AD pathogenesis, its accumulation is insufficient for neurodegeneration and cognitive decline. By contrast, pathological tau is strongly linked with neurodegeneration and cognitive decline in AD and primary tauopathies. Gut microbiota have been reported in AD, which suggests that the microbiota may contribute to AD pathogenesis. Animal studies to date have focused mainly on how gut microbiota alterations affect AD pathogenesis and neurodegeneration. Additionally, recent studies have suggested that APOE isoforms, which strongly influence AD risk and regulate tau-mediated neurodegeneration, are regulated by the gut microbiota. Therefore, further investigations to characterize the contribution of the gut microbiota to tauopathy and neurodegeneration are important.

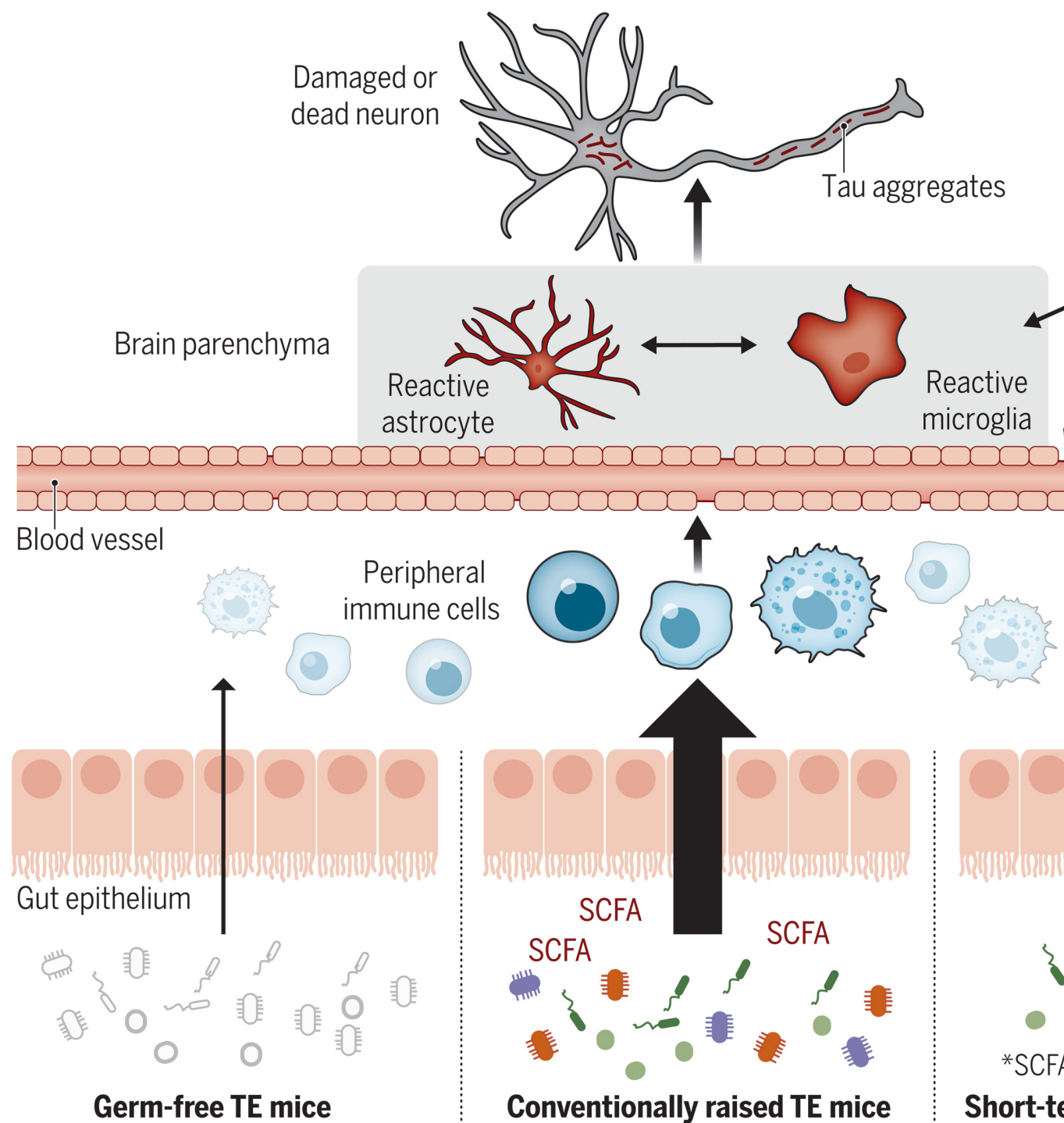
### RATIONALE

We assess the hypothesis that the gut microbiota regulates tau pathology and tau-mediated neurodegeneration in an ApoE isoform-dependent manner. A mouse model of tauopathy (*P301S* tau) expressing human ApoE isoforms (ApoE3 and ApoE4), referred to as TE3 and TE4, was used to study the regulation of the gut microbiota using two approaches: (i) being raised in germ-free (GF) conditions or (ii) term antibiotic (ABX) treatment early in life. Animals were fed a standard mouse chow diet and sacrificed by euthanasia at 40 weeks of age, when this mouse model typically has severe brain atrophy.

### RESULTS

The gut microbiota manipulations resulted in a notable reduction of tau pathology and neurodegeneration in an ApoE isoform-dependent manner. Both male and female GF TE4 mice showed a marked reduction in brain atrophy compared with conventionally raised (Conv-R) mice. Conv-R ABX-treated TE4

vide an avenue to further explore the prevention or treatment of AD and primary tauo



#### P301S tau transgenic mice expressing human APOE (TE mice).

The dysregulated gut-brain axis and its effect on tauopathy and tau-mediated neurodegeneration. Dysbiosis in gut microbiota composition (bottom center), contributes to tau-mediated neurodegeneration by generating bacterial metabolites and peripheral immune cells. These cells promote central nervous system (CNS) inflammation and contribute to tau-mediated neurodegeneration. Short-term antibiotics (bottom right) or germ-free conditions (bottom left) reshape or reduce their metabolites. These microbiota manipulations influence effects of peripheral immune cells on tau-mediated neurodegeneration. ApoE4 in the CNS exacerbates local toxicity and blood-brain barrier dysfunction.

## Abstract

Tau-mediated neurodegeneration is a hallmark of Alzheimer's disease. Primary tauo

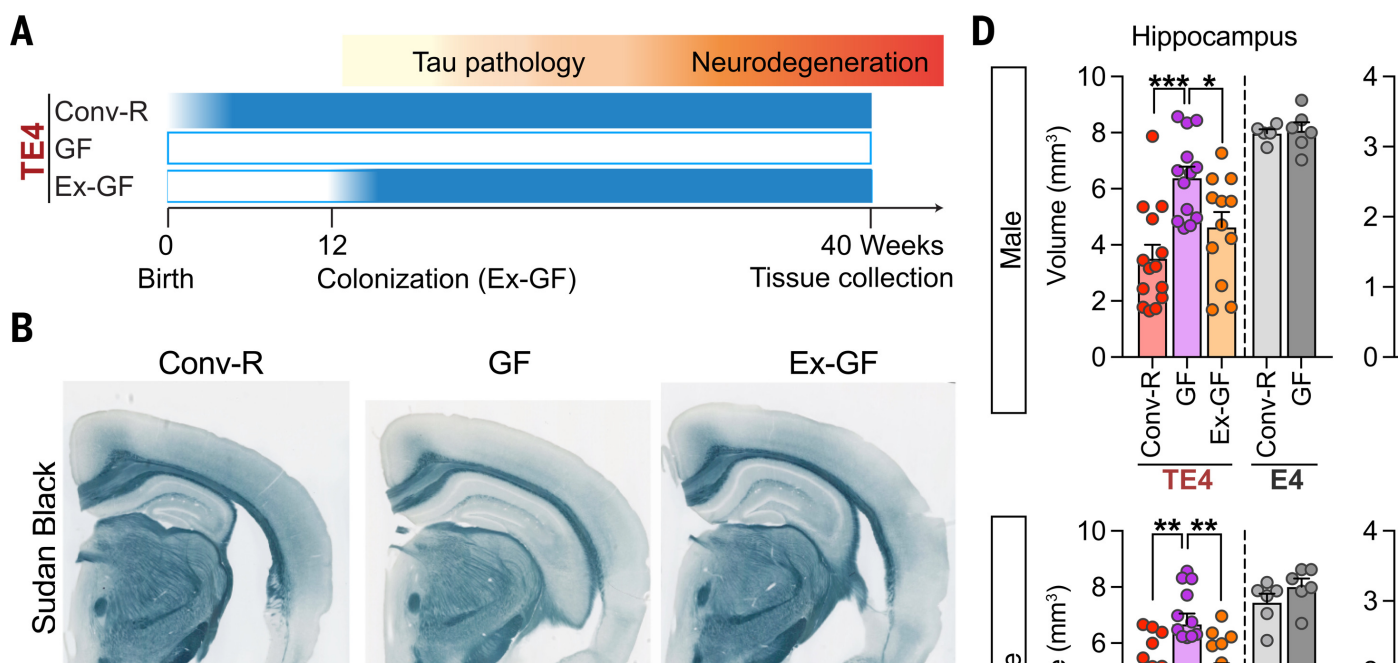
**RELATED PERSPECTIVE**

**Gut microbes modulate neurodegeneration**

Alzheimer's disease (AD) is a fatal, progressive neurodegenerative disease, characterized by amyloid- $\beta$  (A $\beta$ ) plaques followed by pathological tau accumulation in the limbic system, which is strongly linked to neuronal loss and brain atrophy ([1](#)). Evidence is mounting that gut microbiota perturbations and A $\beta$  deposition, potentially through effects on neuroinflammation and homeostasis ([2–4](#)). However, the contribution of the gut microbiota to tau-mediated neurodegeneration, strongly correlated with cognitive decline in AD and other tauopathies, has not been clearly defined. Recent studies have reported that the configuration of the gut microbiota is differential in AD. Apolipoprotein E (APOE), the strongest genetic risk factor for AD and a known regulator of tau-mediated neurodegeneration ([5, 6](#)). We used a mouse model of tauopathy with animals expressing different human APOE isoforms to test the hypothesis that the gut microbiota regulates tau-mediated neurodegeneration in an APOE-dependent manner.

## TE4 germ-free mice are protected against tau-mediated neurodegeneration

We began by rearing genetically engineered C57BL/6J mice containing a *P301S* human tau transgene and a knocked-in human *APOE4* gene (*Tau/APOE4*, abbreviated TE4) ([7](#)) under germ-free conditions. A group of TE4 mice was exposed to microbes originating from their TE4 dams beginning at 12 weeks of age. Conventionally raised (Conv-R) mice were subsequently maintained under specified pathogen-free conditions in a barrier facility. A third group of mice was reared under GF conditions until 12 weeks of age and then received gavage of fecal microbiota sampled from 40-week-old Conv-R TE4 (Ex-GF) mice ([Fig. 1A](#)) on standard rodent chow rich in plant polysaccharides. We euthanized animals from all groups at 40 weeks of age. At this time point when Conv-R TE4 mice display substantially greater tau-mediated neurodegeneration than GF TE4 mice, we tested (i) Conv-R P301S mice harboring other human APOE isoforms in their genomes or (ii) Conv-R P301S mice harboring human APOE4 in their genomes and human APOE4 in their genomes ([7, 8](#)). Unless otherwise indicated, all analyses were performed on mice maintained from 40-week-old mice.

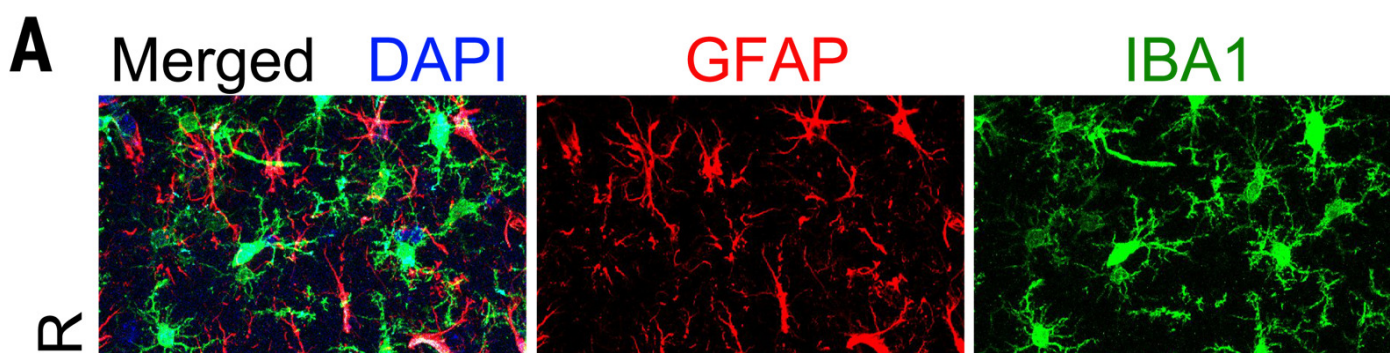


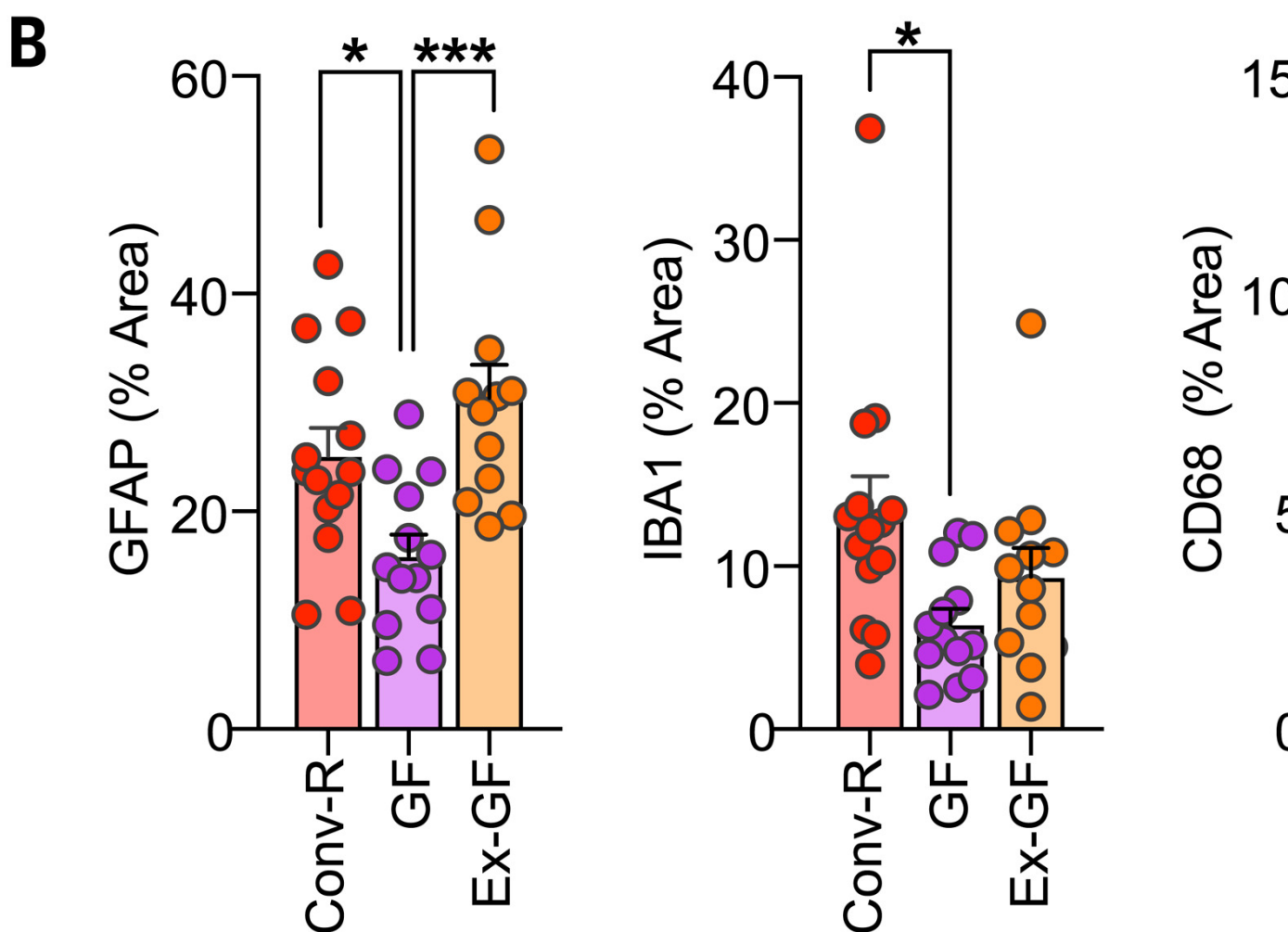
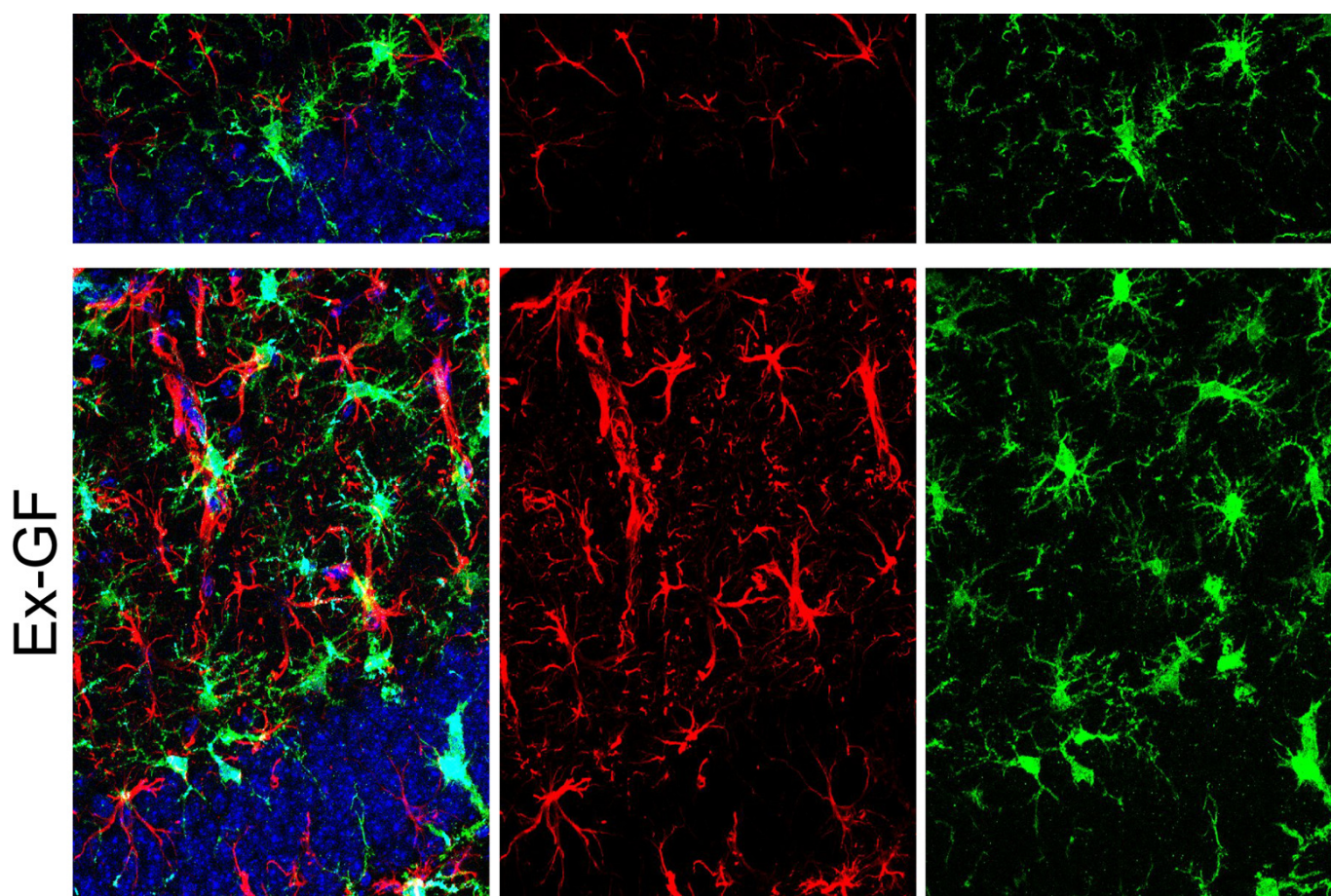
Conv-R male and female TE4 mice displayed severe regional brain atrophy, manifested as hippocampal and lateral ventricle (LV) enlargement relative to E4 mice lacking the tau transgene (Fig. S1, A and B). At 40 weeks of age, male and female TE4 mice had significant preservation of brain tissue compared with Conv-R mice in all brain parts, as judged by hippocampal and LV sizes as well as by measurements of hippocampal neuronal layer thickness—a direct estimate of neuronal loss (fig. S1, C and D). Comparison of these areas of brain tissue in 12-week-old TE4 mice provided evidence that the protective effect produced by the GF status was due to the delay in progression of neurodegeneration (fig. S1, E and F). We did not detect rescue from neurodegeneration in the entorhinal-piriform cortex of GF TE4 animals (fig. S1G).

The GF rescue from neurodegeneration was reversed when animals were colonized with Conv-R microbiota harvested from sex-matched Conv-R TE4 animals (fig. S1, H to J); 28 weeks after colonization, GF mice exhibited hippocampal and LV volumes and hippocampal neuronal layer thickness similar to those documented in Conv-R mice (Fig. 1, B and D, and fig. S1D). Staining brain sections with anti-phosphorylated tau (AT8) revealed a marked decrease in tau phosphorylation in 40-week-old GF compared with Conv-R mice (Fig. 1, C and E). By contrast, we did not observe any differences in hippocampal Aβ levels in 40-week-old GF and 12-week-old Conv-R mice (fig. S1, K and L). Thus, the microbiota greatly influences the progression of tau-mediated neurodegeneration.

## TE4 GF mice exhibit reduced reactive gliosis

Although elevated levels of pathological phosphorylated tau (p-tau) may directly contribute to neuronal dysfunction and death, there is strong evidence that reactive microglia and astrocytes are required for the progression of neurodegeneration (7, 9–11). Recent studies have indicated that the gut microbiota contributes to neurodegeneration (12–14), leading us to hypothesize that the microbiota may modulate tau-mediated neurodegeneration in our model by altering glial reactivity. Therefore, we first stained brain sections with markers for reactive microglia [glial fibrillary acidic protein (GFAP), Iba1, and CD68]. Consistent with the amount of tau pathology, the expression of all these glial markers in the hippocampus was strongly reduced in GF compared with Conv-R mice (Fig. 2, A and B). Furthermore, analysis of glial morphology in the hippocampus (fig. S2) revealed that astrocytes in GF mice were larger with more branched processes compared with those in Conv-R mice. Similar morphological alterations of glial cells in GF mice were also observed at 12 weeks of age, when there was no tau pathology but no evidence for neurodegeneration (fig. S3).





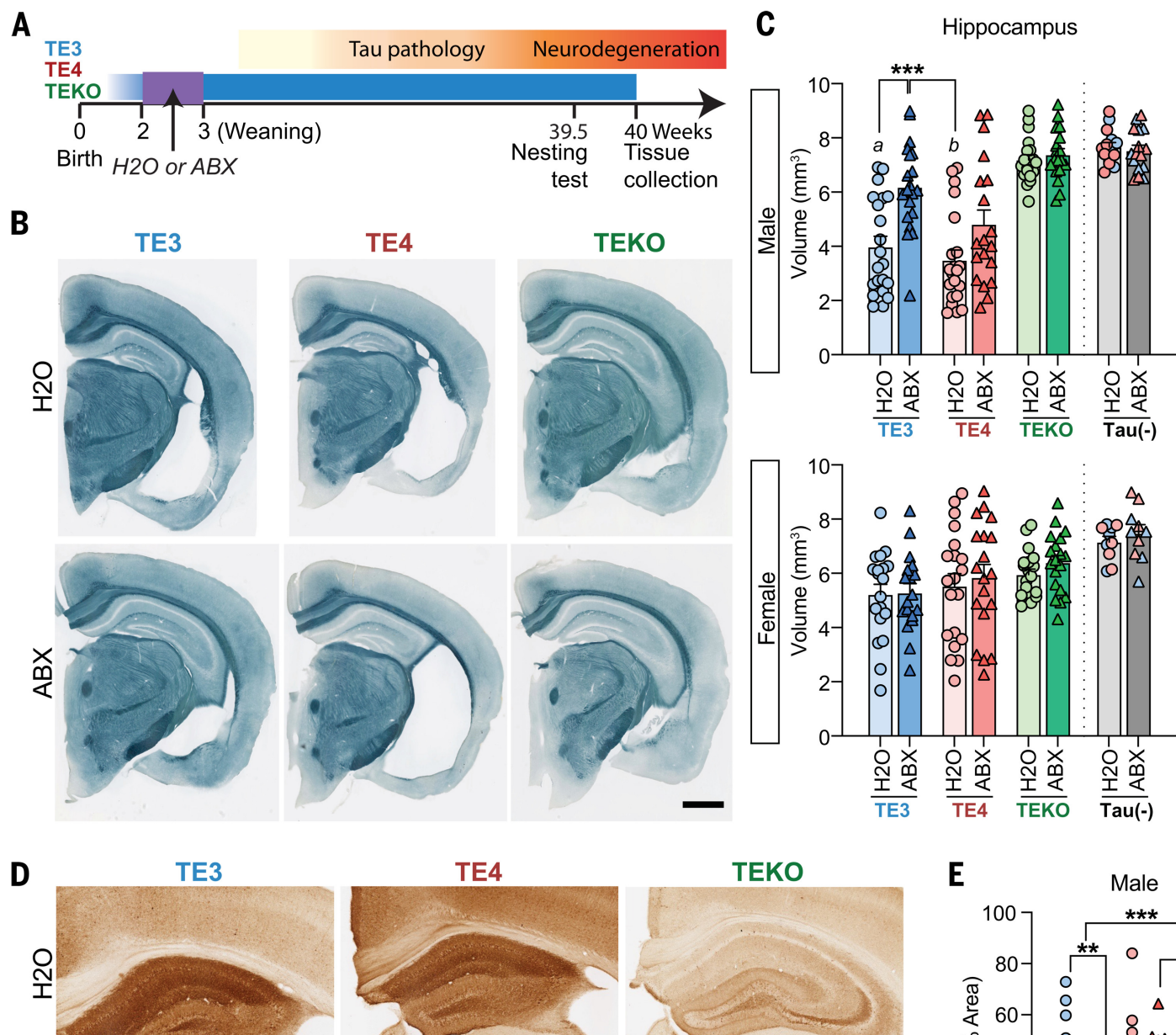
**Fig. 2. TE4 GF mice exhibit reduced reactive gliosis.**

(A) Representative immunofluorescence images of hippocampal sections from 40-week-old male Conv-R, GF, and Ex-GF mice. Staining for GFAP (red), Iba-1 (green), and CD68 (cyan) as well as DAPI (blue). Scale bar, 25  $\mu$ m. GCL, granule cell layer. (B) Quantification of the percentage area of sections taken from the hippocampus covered by GFAP (left), Iba-1 (middle), and CD68 (right) staining. Mice were grouped by genotype (Conv-R, GF, Ex-GF). Data are presented as mean  $\pm$  SEM. Statistical significance is indicated by asterisks (\* p < 0.05, \*\*\* p < 0.001).

decreased expression, respectively, in these modules were tightly linked to the proteo... (fig. S4, G to J). Thus, GF conditions affect microglia and astrocyte reactivity or activation mediated neurodegeneration.

## Antibiotic-induced gut microbiota perturbation protects against neurodegeneration

To test whether the gut microbiota regulates tau-mediated neurodegeneration in an ApoE manner, we treated groups of Conv-R TE4 mice, *P301S* tau transgenic mice expressing hP301S tau animals without APOE (TEKO) with an antibiotic cocktail (ABX) composed of colistin, metronidazole, and vancomycin (4). Gavage with the antibiotic cocktail (or water) occurred daily from postnatal days 16 to 22. The fecal microbiota was serially sampled, cultured, and quantified at 40 weeks of age (Fig. 3A). The short-term ABX treatment produced a marked, immediate decrease in the total number of viable bacteria; although this decrease in viability was transient, culture analysis disclosed that the proportional representation of various bacterial taxa in the microbiota remained different from controls throughout life (see fig. S5, A to E, and below).





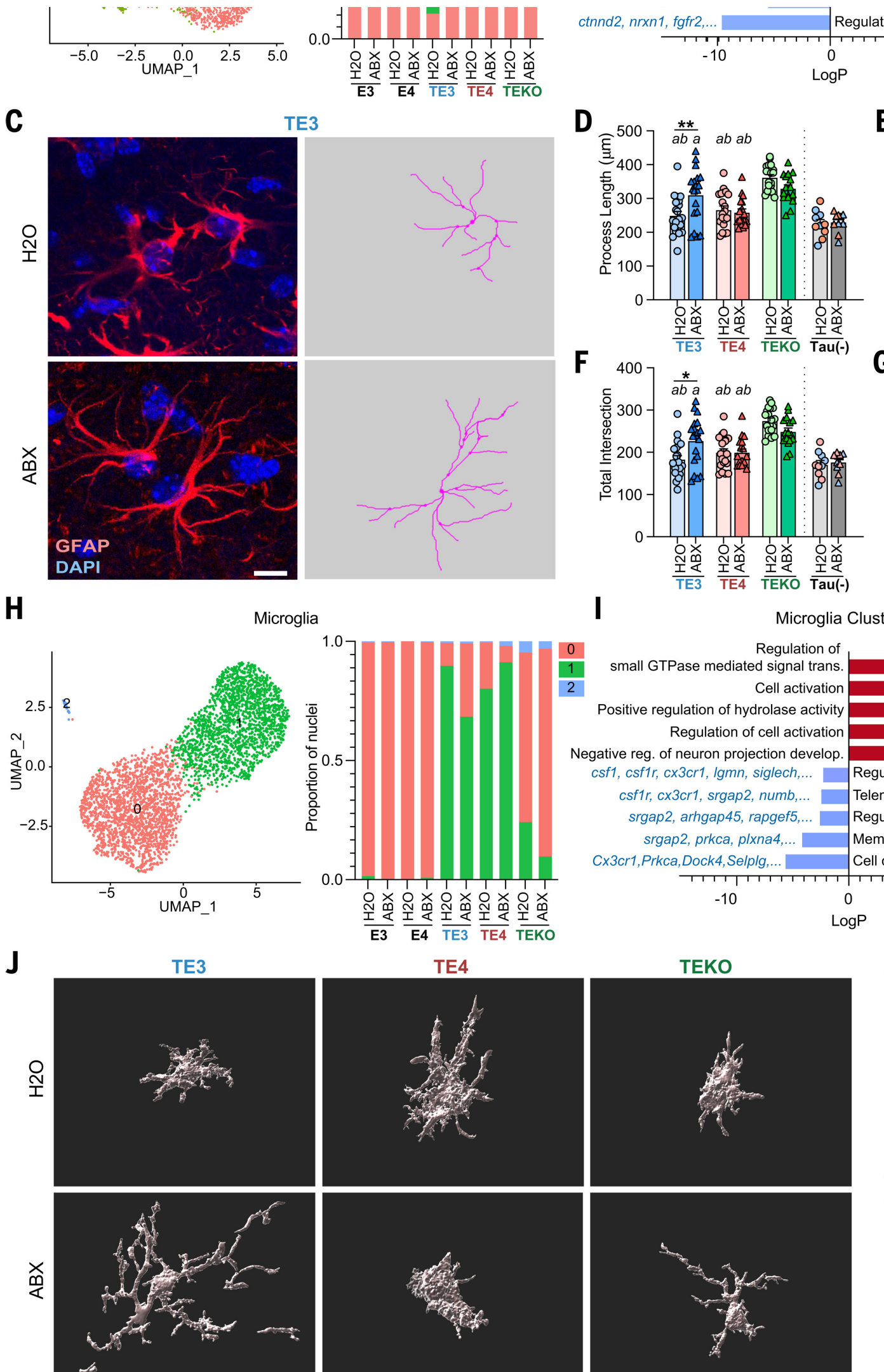
Volumetric analysis revealed that 40-week-old male mice in the H<sub>2</sub>O-treated control group (H<sub>2</sub>O animals) had statistically significant hippocampal atrophy compared with mice lacking tau pathology (Fig. 3, B and C) (8). However, TE3-ABX but not TE4-ABX mice showed significant hippocampal atrophy relative to controls. Enlargement of the LV and entorhinal-piriform cortical atrophy were also observed by ABX treatment independent of APOE genotype, but the degree of ABX effect was higher in TE4 mice in general (i.e., the log<sub>2</sub> fold changes by ABX in the LV size were -0.86 in TE3 and -0.57 in TE4; log<sub>2</sub> fold changes by ABX in the entorhinal-piriform cortex size were 0.57 in TE3 and 0.31 in TE4; fig. S5F). ABX treatment also prevented thinning of hippocampal neuronal cell layers in TE3 mice (fig. S5G). These phenotypic effects of ABX treatment were seen in TE3 and TE4 mice of both sexes, except in the case of the CA1 pyramidal layer, which was slightly, albeit significantly, thicker in TE4 males and females (fig. S5G). In concert with hippocampal brain atrophy, male TE3-ABX mice showed increased AT8 staining relative to male TE3-H<sub>2</sub>O mice (Fig. 3, D and E).

ABX treatment did not influence brain volume or early tau pathology in 12-week-old mice (fig. S5K). At 40 weeks of age, analysis of male cortical tissue also revealed that ABX treatment reduced the detergent-soluble fraction (RIPA) and both p-tau and human tau levels in the insoluble fraction of all three APOE genotype groups (fig. S6). Furthermore, nest-building behaviors, known to be impaired in mouse models of brain damage and neurodegenerative disease (15), showed significant improvement in male mice treated with ABX, which correlated with hippocampal volumes (fig. S7).

## Antibiotic treatment alters astrocyte and microglial gene expression and neuroinflammatory responses

Single-nucleus RNA sequencing (snRNA-seq) of hippocampal tissue collected from Control and TE3-ABX mice belonged to all three APOE genotype groups and were not exposed to antibiotics identified in this study, which were categorized into excitatory and inhibitory neurons, astrocytes, microglia, oligodendrocyte progenitor cells (fig. S8, A and B). Cell proportion analysis showed that certain cell types (e.g., exc1, exc2, and exc5) were reduced in the presence of tau pathology and expanded in TE3-ABX mice in agreement with the hippocampal volumetric data. The astrocyte population was reduced in TE3-ABX mice in the presence of tau pathology. The microglial population, which expanded approximately threefold in TE3-ABX mice (in the presence of tau pathology), was reduced two- to threefold with ABX treatment.

The astrocyte cluster was rescaled and reclustered, revealing four subclusters (astro0 to astro3; fig. S8C). Reclustering of the microglia cluster identified three subclusters (micro0 to micro2). Tau pathology resulted in a strong shift from astro0 to astro1 and micro0 to micro1. ABX treatment prevented these shifts in TE3 but not TE4 male mice, consistent with a stronger protective effect with ABX in TE3 compared with TE4 male mice. Further differentially expressed gene (DEG) analysis between TE3-ABX and TE3-H<sub>2</sub>O mice with pathological shifts revealed that the top up-regulated pathways in astrocyte subcluster astro0; data S5) were associated with GO terms related to gliogenesis and cellular chemotaxis.



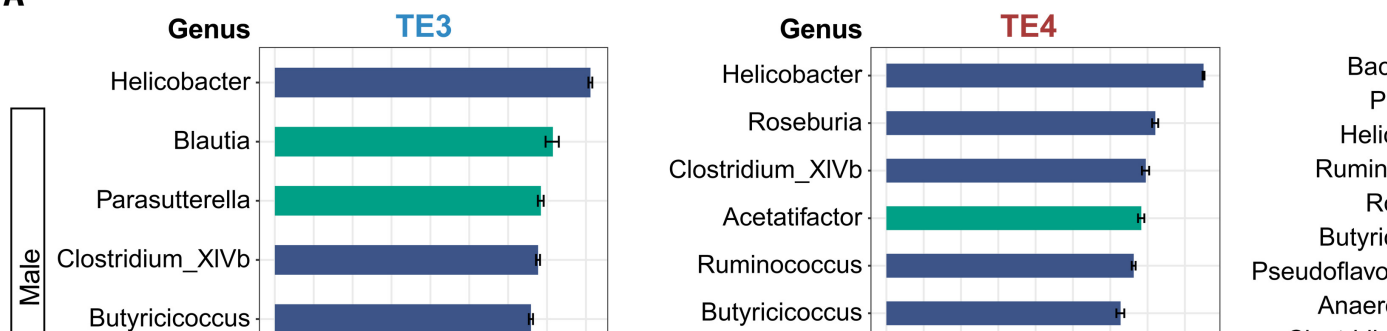
performed GFAP, Iba1, and CD68 immunostaining. Although the coverage area of the images was limited, we did not observe significant ABX effects (fig. S10A), morphometric analysis revealed that ABX drove a more homeostatic-like morphological state (e.g., increased length of processes and size of cell bodies) in female TE3 mice but not in male TE4 and TEKO, female TE3, or male 12-week-old TE3 mice (Fig. 4, C to K). Thus, ABX-induced perturbation of the microbiota protects against tau-mediated pathology in female TE3 mice, and this effect is manifested by changes in multiple cell types including astrocytes and microglia.

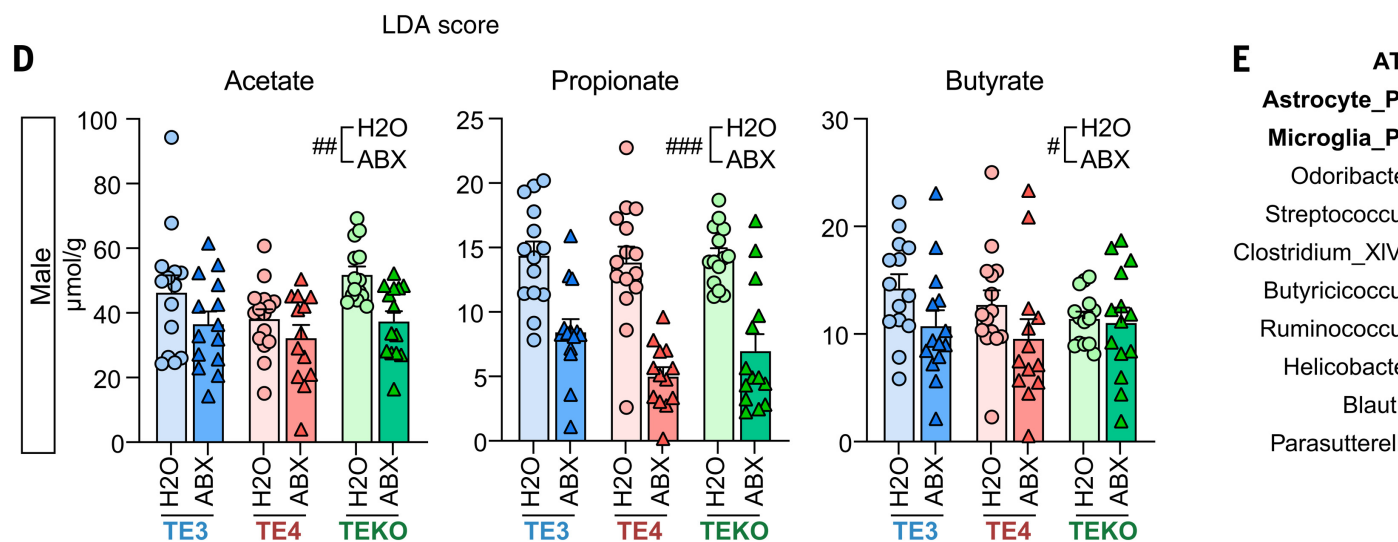
## Antibiotic treatment reshapes the bacterial communities and metabolites

The microbiota perturbation induced by ABX was evidenced by (i) measurements of cecal weight (known to be markedly increased in GF compared with Conv-R animals and mice; fig. S1, A and B, and fig. S5, D and E) and (ii) culture-independent analysis of the bacterial taxa in feces. The latter approach was based on sequencing PCR amplicons generated from bacterial 16S ribosomal RNA (rRNA) genes [amplicon sequence variants (ASVs)] and taxonomic bins. Alterations in alpha and beta diversity as well as the representation of bacterial groups are summarized in figs. S11 to S13. Phylum- and genus-level changes in ABX-treated mice were different from H<sub>2</sub>O-treated controls up to the time of euthanasia (fig. S11, D and E).

Linear discriminant analysis revealed that the members of the genera *Helicobacter*, *Ruminococcus*, and *Butyricicoccus* had lower relative abundance in the fecal microbiota of ABX-treated groups in male TE3 and TE4 mice (Fig. 5A and fig. S12, A to C) but not in female TE3 mice (Fig. 5B and fig. S12, D to F). This observation suggested that the microbiota modulates glial activation through the production of microbial metabolites, specifically short-chain fatty acids (SCFAs) (12, 13). *Ruminococcus* and *Butyricicoccus* are associated with the production of SCFAs. Also, the relative abundance of several bacterial family-level taxa known to produce SCFAs, including *Ruminococcaceae* and *Lachnospiraceae*, were reduced with ABX across APOE genotypes. The relative abundance of these taxa was greater in male compared with female members of the TE3-H<sub>2</sub>O group and lower in TE3 compared with TE4 mice (fig. S13, B and C). Gas chromatography–mass spectrometry analysis of fecal samples disclosed that, consistent with our observation that SCFA-producing bacteria were reduced with ABX treatment in males, acetate, propionate, and butyrate were significantly reduced across all groups, with butyrate correlating with biomarkers of tau pathology (Fig. 5, D and E, and fig. S13A), but not in

A





**Fig. 5. Effects of ABX treatment on fecal microbiota composition and cecal levels of SCFAs.**

(A and B) Linear discriminant analysis (LDA) scores. Horizontal bars represent the LDA scores for each genus and TEKO mice (A) and in female TE3 mice (B). Indigo and green bars represent taxon features with significance belonging to the control H<sub>2</sub>O and versus ABX treatment groups, respectively (LDA scores > 2). (C) Comparison between 40-week-old male and female TE3-H<sub>2</sub>O mice. Family and genus assignments are shown. (D) Target

## ABX-induced gut microbiota perturbation alters the peripheral immune response and the effects of SCFA on TE4 GF mice

It is unclear whether SCFAs act directly on glial cells because SCFA receptor-encoding genes are not expressed in glial cells (12). However, we postulated that SCFAs could affect other inflammatory immune cells that directly access the brain or the immune milieu around the brain (i.e., the meninges). Reductions in meningeal natural killer (NK) and plasmacytoid dendritic cells (pDC) cells in GF mice. Furthermore,  $\gamma\delta$  T and pDC cells were reduced in GF mice (fig. S14, A to C). These latter cells produce cytokines, such as interleukin-17 (IL-17), interferon (IFN) type-I, and others, which may act on the brain (17–19).

Multiplex cytokine profiling revealed that plasma levels of MCP-3, IL-2R, BAFF, and Eotaxin were reduced by ABX in mice (fig. S15). The degree of reduction of Eotaxin, which can cross the blood-brain barrier to activate glial cells, was greater in TE3 mice compared with those belonging to the other genotypes. Gut microbiota can modulate systemic immunity, including peripheral macrophages (20). ABX treatment in TE3 mice significantly altered lung alveolar macrophage gene expression (fig. S16). In turn, the interaction with adaptive immune cells could potentially affect brain pathology. The cytokines that some cytokines released by macrophages, such as IP-10 and BAFF, or those that can cross the blood-brain barrier, such as MIP-1 $\alpha$ , were affected by ABX treatment. Brain border innate and infiltration of

eration in male and female TE4 mice. ABX treatment is also neuroprotective, but its effect was greater in the presence of APOE3 compared with APOE4. Our results also suggest that sex differentially modulate the microbial response to ABX, resulting in significantly lower microbiota-associated metabolic changes are associated with altered peripheral cytokine levels and changes in the innate immune response in the brain.

We hypothesize that the gut microbiota regulates the brain's innate immune response to tau-mediated neurodegeneration in the brain. We speculate that in TE3 mice, the ABX-induced microbiota depletion and the resulting peripheral immune activation may moderate the brain's innate immune response to tau-mediated neurodegeneration. By contrast, in TE4 mice, the microbiota-associated metabolic changes were not altered as much by ABX treatment. It is possible that the gain of function of APOE3 affects on the local innate immune response in the brain were stronger than that of APOE4. APOE4 may have partially failed to protect against tau-mediated neurodegeneration to the same degree. Conversely, the complete absence of the microbiota, even in TE4 mice, the depletion of microbially produced immune signals results in a strong reduction of the disease-associated astrocyte and microglia, leading to a decrease in tau-mediated neurodegeneration (consistently, SCFA supplementation and tau pathology in TE4 GF mice).

Further studies are needed to test these hypotheses and to gain greater understanding of how gut microbiota manipulation, microbiota-linked metabolites, central or peripheral immune response, and neurodegeneration are related. A starting point for these follow-up analyses could involve transferring gut microbiota harvested from Conv-R mice with different sex, age, and ApoE isoform to GF donors (with or without tau-mediated neurodegeneration). It is possible that the TE4 GF mice harbor different types of microbiota (e.g., harvested from wild-type mice, not necessarily from TE4 GF mice) that reverse the GF rescue from neurodegeneration. It may be that the host genetic makeup in TE4 GF mice affects the effects of the transferred microbiota composition derived from a more general bacterial community sufficient to activate the metabolic-neuroinflammation axis. Alternatively, the sex, age, ApoE isoform, and state of neurodegeneration may be critical in regard to the source from which the transferred microbiota is derived. Future studies are needed to sort out these possibilities. Nonetheless, these results suggest that gut microbiota targeting may provide ways to prevent or treat progression of AD and prion disease.

## Materials and methods

### Animals

All animal experiments were performed using protocols approved by the Institutional Animal Care and Use Committee (IACUC) at Washington University School of Medicine. All phenotyping and behavioral analyses were performed by researchers who were completely blind to the experimental hypothesis and treatment.

P301S tau transgenic mice (PS19tg; Stock No. 008169, Jackson Laboratories) contain a tau

Conv-R TE4 mice were rederived as GF by embryo transfer. Embryos were harvested 1 d after fertilization and transferred under sterile conditions to a pseudopregnant GF mother generated by mating to a GF male. The transgenic GF descendants were intercrossed to produce TE4 GF mice. GF animals were housed in flexible film gnotobiotic isolators (Class Biologically Clean Ltd., Madison, WI). GF status was confirmed by PCR using universal bacterial 16S rRNA gene primers and by culturing fecal and skin swabs. Conv-R mice were used as controls.

GF mice were colonized with fecal microbiota samples collected from 40-week-old Conv-R mice. To do so, fecal samples from 4 to 5 mice per sex were pooled, homogenized in phosphate-buffered saline (PBS) containing 0.05% cysteine-HCL and 20% glycerol (5 per cent v/v) and stored at  $-80^{\circ}\text{C}$  until the time of the fecal microbiota transplantation. A 200- $\mu\text{L}$  aliquot of the reconstituted sample was thawed and administered to sex-matched 12-week-old GF mice by oral gavage on two occasions with a 4-day interval. The Ex-GF mice were maintained in plastic flexible film gnotobiotic isolators (Class Biologically Clean Ltd., Madison, WI) (2 to 5 mice of the same sex per cage).

All Conv-R, GF, and Ex-GF mice (2 to 5 mice of the same sex per cage) were given the same diet (Teklab certified global 18% protein rodent diet; catalog no. T2018SC.15) ad libitum. Mice were housed under a strict light cycle (lights on at 0600 hours and off at 1800 hours). Fresh fecal pellets were collected directly in sterile 2-mL centrifuge tubes (Axygen; SCT-200-SS-R-S) and immediately stored at  $-80^{\circ}\text{C}$  until the time of DNA extraction. All fecal pellet samples were collected at between 1500 and 1800 hours to minimize circadian rhythm effects.

### **Antibiotic treatment**

Pups assigned to the ABX treatment group were gavaged with 100  $\mu\text{L}$  of an antibiotic cocktail containing 0.35 mg/mL kanamycin (Sigma-Aldrich K4000), 0.35 mg/mL gentamicin (Sigma-Aldrich G1900), 2.15 mg/mL metronidazole (Sigma-Aldrich M1547), and 0.45 mg/mL vancomycin (Sigma-Aldrich V2002) (prepared using autoclaved water). Gavages occurred daily from postnatal day 10 to 21 using feeding needles (Cadence; catalog no. 7901). Control mice were gavaged with 100  $\mu\text{L}$  of sterile water. After the final gavage, mice were transferred to a new sterile cage to avoid contamination from accumulated feces in the original cages.

### **Nest-building behavior**

A few days before euthanasia, group-housed mice were switched to individual housing. Nestlets (2.5 g; no. NES7200, Ancare, Bellmore, NY) were introduced into each cage at  $\sim 1600$  hours. At 1000 hours, the remaining nestlet was weighed. A 5-point scale was used to score the nest based on the percentage of nesting material remaining plus the shredding conditions: 1, nest shredding  $<25\%$ ; 2, nest shredding 25 to 50%; 3, nest shredding 50 to 90%; 4, nest shredding  $>90\%$ ; 5, nest completely compacted yet; 5, complete nest built (fig. S7A).

NanoZoomer microscope (Hamamatsu); areas of interest were traced and measured in a software (Hamamatsu). Volume was calculated by the sum of area  $\times$  0.3 mm (7, 8). All stainings obtained were performed by someone who was blind to the experimental hypothesis and the animals being assessed.

### **Neuronal layer thickness measurement**

Left hemi-brain sections from each mouse, corresponding approximately to bregma coordinates -1.5 and -1.7, were mounted and stained in cresyl violet for 5 min at room temperature (7). Slices were cleared in 50%, 70%, 95% (three times), and 100% ethanol (twice) (1 min per treatment) then cover-slipped (twice), and cover-slipped in cytochrome60 (Thermo Fisher Scientific, catalog no. 8310-16). Images were taken with Cytation 5 (Biotek) and analyzed with Gen5 Software (Biotek). Quantification of the thickness of the granular cell layer and the CA1 pyramidal layer were measured by drawing a scale line that crosses the areas each section and obtaining the average value. All staining and analysis of data obtained were performed by individuals blind to the experimental hypothesis and the treatments of the animals being assessed.

### **Immunohistochemistry**

Left hemi-brain sections, corresponding approximately to bregma coordinates -1.5 and -1.7, were used for immunohistochemistry. For AT8 staining, brain sections were washed in Tris-buffered saline (TBS) followed by incubation in 0.3% hydrogen peroxide in TBS for 10 min at room temperature. After washing in TBS, sections were blocked with 3% milk in 0.25% TBS-X (Triton X-100) for 30 min followed by overnight incubation with biotinylated AT8 antibody (Thermo Scientific, catalog no. 1020B, 1:500). After washing three times with TBS, all sections were treated at room temperature for 60 min with Vectastain Elite ABC-HRP Kit, followed by three washes in TBS. Finally, sections were stained using ImmPACT DAB EqV Peroxidase Substrate. Slides were cover-slipped with mounting medium and analyzed using a Nanozoomer microscope at 20X magnification. Images were extracted by using the software with ImageJ software (National Institutes of Health, Bethesda, Maryland, USA, <https://imagej.nih.gov/ij/>).

For immunofluorescence, sections were washed in TBS three times (5 min/cycle). After washing, sections were blocked with a solution containing 3% BSA and 3% normal donkey serum in 0.25% TBS-X at room temperature, followed by an overnight incubation at 4°C with primary antibodies [mouse GAD67 (MAB3402, 1:1000), rabbit Iba1: Wako, (1:2000); rat CD68 (SeroTec, 1:500)]. The next day, sections were washed in TBS, slides were incubated with fluorescent-labeled secondary antibodies (Molecular Probes) at room temperature. Sections were washed and incubated with 0.1% Sudan black solution for 10 min, washed once more, and mounted in ProLong Gold Antifade mounting medium (Molecular Probes). Images were obtained by using a Leica Stellaris 5 confocal microscope and analyzed with ImageJ software.

### **Brain tissue sample processing for enzyme-linked immunosorbent assay (ELISA)**

Mouse posterior cortex was sequentially processed in (i) RAB buffer (100 mM MES, 1 mM EDTA, 2 mM DTT, 750 mM NaCl, 20 mM NaF, 1 mM Na<sub>3</sub>VO<sub>4</sub>, pH 7.0) supplemented with protease inhibitors (leupeptin, pepstatin, phosphatase inhibitors (PhosSTOP, Roche)); (ii) RIPA buffer (150 mM NaCl, 50 mM Tris-HCl, 1% NP-40, 2.5% Igepal CA-630, 1% Triton X-100, 0.5% decahydro-beta-cyclodextrin, 50 mM NaF, 50 mM Na<sub>3</sub>VO<sub>4</sub>, 150 mM LiCl, pH 7.6) supplemented with protease inhibitors (leupeptin, pepstatin, phosphatase inhibitors (PhosSTOP, Roche)); (iii) RAB buffer (100 mM MES, 1 mM EDTA, 2 mM DTT, 750 mM NaCl, 20 mM NaF, 1 mM Na<sub>3</sub>VO<sub>4</sub>, pH 7.0) supplemented with protease inhibitors (leupeptin, pepstatin, phosphatase inhibitors (PhosSTOP, Roche)).

(mouse monoclonal, 150 ng/mL) for the human ApoE ELISA.

### **Astrocyte morphology analysis**

Z-stacks (20  $\mu\text{m}$ ) of 4',6-diamidino-2-phenylindole (DAPI)- and GFAP-labeled immunofluorescence images were acquired on a Leica Stellaris 5 confocal microscope with a 40X objective and 1024-pixel by 1024-pixel resolution. Simple Neurite Tracer (SNT; ImageJ plug-in open-source tool) was used to reconstruct the 3D morphology of GFAP-positive astrocytic main processes by semiautomatic tracing (26). For each mouse, six astrocytes were randomly selected in each section from two separate brain sections on the basis of GFAP-staining and a single DAPI-stained nucleus. The six astrocytes chosen from each mouse did not have processes at the edges of the field or were truncated. Fully traced astrocytes in SNT were used to obtain process length, end radius, the number of process branches, the total number of intersections, the number of branches and radius from Sholl analysis (27), and the volume occupied by the astrocytic processes (28).

### **Microglia morphology analysis**

Z-stacks (20  $\mu\text{m}$ ) of Iba1-labeled immunofluorescence images were acquired on an LSM 700 confocal microscope (Zeiss) with a 60X objective, 1.8X zoom, and 1024-pixel by 1024-pixel resolution. A total of four z-stacks of the dentate gyrus region were taken from two separate brain sections. Morphology analysis was performed on three-dimensional (3D) images using Imaris 9.5 software. Morphology was analyzed using the Filament Tracer, with no loops allowed and spot detection enabled. Process start and end points per cell. Process reconstruction was made using the following parameters: new starting points; largest diameter 9.00  $\mu\text{m}$ , seed points 2.00  $\mu\text{m}$ ; remove seed points and diameter of sphere regions: 15  $\mu\text{m}$ . All filament parameters were exported into separate files for analyzing the number of process branches, process length, and process volume per cell. Process reconstruction, and data analysis were performed in a blinded manner with regards to the genotype.

### **Nanostring gene expression assay**

RNA was isolated from mouse hippocampus using the RNeasy Mini Kit (QIAGEN, catalog number 74104). Control checks were performed on all samples to determine RNA concentration and integrity. For the Nanostring gene expression assay, isolated RNA samples were processed by the Genomix Core Facility at Washington University, using NanoString's nCounter Neuroinflammation panel (735 genes, including 770 targeted genes). Background noise in the data was corrected to a thresholding count of 10. Technical variation was corrected by using the geometric median value of the positive-control genes. Normalization was performed subsequently using the geNorm algorithm to select the optimal normalization genes (*Mto1*, *Csnk2a2*, *Aars*, *Supt7l*, *Fam104a*, *Tbp*, *Ccdc127*, *Tada2b*, *Lars*, and *Cnot10*).

Differential gene expression was performed using nSolver 4.0 and the Advanced Analysis module. Fold-change expression and *P* values were calculated by linear regression analysis using the nSolver linear models. *P* values were corrected for multiple comparisons using the Benjamini-Hochberg method. Coexpression analysis was performed using the Weighted Gene Correlation Network Analysis (WGCNA) software.



cell debris removal step, centrifugation, and resuspension steps were repeated twice. O and resuspension buffer was added in the last resuspension step. The resulting solution Sucrose Cushion Buffer I [prepared by mixing 2.7 mL of Nuclei Pure 2M Sucrose Cushion St. Louis) with 300 mL Nuclei Pure Sucrose Cushion Solution (MilliporeSigma, St. Louis to the top of 500  $\mu$ L Sucrose Cushion Buffer I in a 2-mL eppendorf tube]. After centrifug min at 4°C, the nuclear pellet was resuspended in 500  $\mu$ L nuclei wash and resuspension of nuclei was determined using a Countess instrument (Invitrogen) and DAPI staining. justed to 1200 nuclei/mL using nuclei wash and resuspension buffer before snRNA-seq.

Isolated nuclei were used for droplet-based snRNA-seq using the Chromium Single Cell Genomics). Libraries were sequenced using a NovaSeq 6000 instrument (Illumina). Sam processing, and single-nuclei 3' counting was performed using the Cell Ranger Single-Cell Genomics). Cell Ranger count was used to (i) align samples to a custom pre-mRNA refer taining the human *APOE* gene, (ii) quantify reads, and (iii) filter those reads with a qual

The Seurat v3 and SoupX R packages were used for subsequent analysis of the datasets cell-free RNA from each sample group was removed using SoupX. Nuclei with mitochon gene counts <200 or >5000 were removed (Seurat). For each group, the percent of mitoc as a nuisance variable, gene counts were normalized, and variable features identified us tion in Seurat. The top 3000 variable genes were used to integrate experimental groups PrepSCTIntegration, FindIntegrationAnchors, and IntegrateData commands in Seurat. ysis (PCA) was performed on the integrated dataset and the first 30 principal componen stream analysis using FindNeighbors. Clusters were identified using the FindClusters fu ranging from 0.1 to 1.2. Final clustering was performed using a resolution of 0.3. The fi were passed into UMAP using the RunUMAP command with default parameters. Differer tween each cell cluster and all other clusters was performed on SCT data to identify ma ual cell cluster. Clusters containing high mitochondrial genome content, or marker gen cell type (i.e., microglia and excitatory neurons) were removed and data were reclustere pal components and a resolution of 0.3. In total, 143,835 nuclei with a median UMI of 2 ber of 1664 across all 10 experimental groups were used in the final analysis.

Differential gene expression to identify marker genes was again performed using MAST were identified on the basis of known cell type-specific markers. For subclustering anal or microglia clusters were extracted from the dataset, RNA counts were renormalized, a chondrial genes regressed out using the SCTransform command. PCA analysis was perf reclustered. For astrocytes, in addition to regressing the percentage of mitochondrial g (growth hormone) and Prl (Prolactin) transcripts were also regressed out due to detecti ment group. The first 20 principal components were used, and clustering performed at S5). For microglia, the first 10 PCs were used, and clustering performed at a resolution genes for subclusters were identified using MAST (data S5 and S6). The SCTransform fu

(BioSpec Products) for 4 min with ~250  $\mu$ l of 0.1 mm zirconia/silica beads and one 3.97-trifugation at 3220  $\times$ g for 4 min, 420  $\mu$ L of the resulting aqueous phase was transferred. A 100  $\mu$ L aliquot of the crude extract was mixed with 400  $\mu$ L of a mixture of Qiagen buffer pH5.5 (675:45), and the mixture was passed through a Qiagen QiaQuick 96 plate by centrifugation, washed twice with 900  $\mu$ L of Buffer PE by centrifugation, and finally eluted with 13  $\mu$ L. DNA was quantified using Invitrogen Quant-iT dsDNA BR kit and normalized to 2 ng/ $\mu$ L. Bacterial 16S rRNA gene was amplified by PCR using the following conditions: denaturation at 94°C for 30 s, followed by 26 cycles of 94°C for 15 s, 50°C for 30 s, and 68°C for 30 s, followed by incubation at 68°C for 10 min.

Sample-associated 16S rDNA amplicons were quantified, pooled, and subjected to sequencing (Illumina MiSeq, paired-end 250 nt reads). Reads were demultiplexed, trimmed to 200 nucleotides by removal of chimeric sequences (DADA2 v. 1.13.0). ASVs were generated from demultiplexed reads with DADA2 and taxonomy was assigned on the basis of the DADA2-formatted training set. ASVs that did not match the control and the resolution of ASVs were performed with the dada2 R package (37, 38). ASVs that did not match to the kingdom Bacteria were filtered out. The remaining reads were assigned taxonomy using the SILVA Database Project (RDP trainset 16/release 11.5) 16S rRNA gene sequence database (38).

Analyses of alpha-diversity (richness, Faith's phylogenetic diversity) and beta-diversity (Bray-Curtis dissimilarities) were performed using PhyloSeq and additional R packages (39). Taxa (ASVs) which differed significantly between sample groups were identified by performing pairwise comparisons using the MicrobiotaProcess packages (40). A correlation matrix was generated and plotted as ellipses using the ggplot2 package (41). R codes to generate 16S rRNA-related results and figures in this manuscript are available at [https://github.com/shandley/neurodegeneration\\_16S](https://github.com/shandley/neurodegeneration_16S).

## GC-MS of SCFAs

SCFAs were quantified by GC-MS using a previously described protocol (42). Cecal contents were homogenized and placed in 2 mL glass screw cap vials. Ten microliters of a mixture of internal standards (acetic acid-<sup>13</sup>C<sub>2</sub>, D<sub>4</sub>, propionic acid-D<sub>6</sub>, butyric acid-<sup>13</sup>C<sub>4</sub>, lactic acid-3,3,3-D<sub>3</sub>, and succinic acid-D<sub>4</sub>) was added to each vial, followed by 20  $\mu$ L of 33% HCl and 1 mL diethyl ether. The solution was vortexed and the two phases were separated by centrifugation (4000  $\times$ g for 5 min). The upper organic layer was transferred to another vial and a second 1 mL diethyl ether extraction was performed. After combining the two organic layers, a 100  $\mu$ L aliquot was mixed with 20  $\mu$ L N-tert-butyltrimethylsilyl-N-methyltrifluoroacetamide. Samples were stored in a sampler vial with a 200  $\mu$ L glass insert, and the mixture was incubated for 2 hours at room temperature. Samples were analyzed in a randomized order. Derivatized samples (1  $\mu$ L) were injected with 15:1 He:O<sub>2</sub> into a 7890A GC system coupled with 5975C MS detector (Agilent). Analyses were carried out on a DB-5MS column (30 m  $\times$  0.25 mm, 0.25  $\mu$ m film thickness, Agilent J & W Scientific) using electronic impact ionization. Helium was used as a carrier gas at a constant flow rate of 1.26 mL/min, and the oven temperature was held at 3.5 min. The column head pressure was 10 psi. The temperatures of injector, transfer line, and detector were 270°C, 280°C, and 150°C, respectively. The GC oven was programmed as follows; 45°C held for 5 min, increased to 200°C at a rate of 20°C/min, increased to 300°C at a rate of 100°C/min, and finally held at 300°C for 10 min.

added, and cells were stained for 20 min on ice at 1:300 final dilution. Samples were then washed with staining buffer and acquired on a spectral flow cytometer (Aurora, Cytex Biosciences). Data were analyzed using spectral flow software (Cytex) and then gated and quantified using FlowJo v10.8.2 (Treestar).

The following antibodies were used for flow cytometry; anti-CD4 BUV395 (BD, GK1.5, catalog no. 741048), anti-CD5 BUV496 (BD, 53-7.3, catalog no. 741048), anti-CD27 BUV563 (BD, LG.3A10, catalog no. 741048), anti-CD27 BUV615 (BD, IM7, catalog no. 751414), anti-CD11c BUV737 (BioLegend, N418, catalog no. 751414), anti-CD11c BUV805 (BD, H57-597, catalog no. 748405), Ly6G BV421 (BioLegend, 1A8, catalog no. 135001), anti-CD11b BV785 (BioLegend, PC61, catalog no. 102022), anti-CD19 BV480 (BD, 1D3, catalog no. 561001), anti-CD19 BV785 (BioLegend, M5/114.15.2, catalog no. 107641), anti-CXCR3 (eBioscience, CXCR3-173, catalog no. 135001), anti-CXCR3 BV650 (BD, RA3-6B2, catalog no. 563893), anti-CD49a BV711 (BD, Ha31/8, catalog no. 746947), anti-CD49a BV711 (BD, Ha31/8, catalog no. 746947), anti-Ly-6C AlexaFluor488 (BioLegend, HK1.4, catalog no. 746947), anti-Ly-6C AlexaFluor488 (BioLegend, HK1.4, catalog no. 746947), anti-Ly-6C AlexaFluor532 (eBioscience, 53-6.7m catalog no. 58-0081), anti-CD122 BrilliantBlue700 (BioLegend, 742112), CD69 PE (BioLegend, H1.2F3, catalog no. 104508), anti-CD186 (CXCR6) PE-Da (BioLegend, SA051D1, catalog no. 151117), anti-CD127 PE-Cy5 (BioLegend, A7R34, catalog no. 135001), anti-CD127 PE-Cy5 (BioLegend, A7R34, catalog no. 135001), anti-CD127 PE-Cy5 (eBioscience, PK136, catalog no. 108714), anti-TCRg/d AlexaFluor647 (BioLegend, GL3, catalog no. 108714), anti-TCRg/d AlexaFluor647 (BioLegend, GL3, catalog no. 108714), anti-F4/80 AlexaFluor700 (BioLegend, BM8, catalog no. 123130).

### FACS for lung macrophage isolation

Lung samples were harvested from the mice and chopped up with scissors into 1- to 2-cm pieces. Lung samples were digested in digestion buffer containing 50 U/mL DNase (Sigma), 100 U/mL trypsin (Gibco) and 0.28 U/mL Liberase (Roche) at 37°C for 45 min. The mixtures were gently inverted every 15 min. A final concentration of 10% FBS was used to stop the reaction and the samples were filtered through a 70-µm diameter cell strainer. The cell suspensions were pelleted down by centrifugation at 400 × g for 5 min. Blood cells were removed with 5 mL ACK buffer (150 mM ammonium chloride, 10 mM potassium carbonate, 0.1 mM EDTA) at room temperature for 2 min. The reaction was stopped by adding 1 mL of 10% FBS. The cells were then passed through a 70-µm strainer one more time. Cells were pelleted and  $\sim 5 \times 10^6$  cells were sorted. Sorting was completed on a FACS AriaII. Staining was performed at 4°C in the presence of 1% BSA in magnetic-activated cell-sorting (MACS) buffer (PBS + 0.5% BSA + 2 mM EDTA). The antibodies used from Biolegend: BV510 anti-CD45 (30-F11), APC-Cy7 anti-CD11b (M1/70), Pacific Blue anti-CD11c (M5/114.15.2), PercP-Cy5.5 anti-Ly6C/Ly6G (Gr-1) (RB6-8C5), and APC anti-CD64 (X54-101) from Invitrogen included: PE-Cy7 anti-CD11c (N418) and PE anti-SiglecF (1RNM44N). Cells were sorted as CD45<sup>+</sup> SiglecF<sup>+</sup> CD11c<sup>+</sup> CD64<sup>+</sup> CD11b<sup>lo</sup> cells.

### RNA-seq and analysis

RNA was extracted from FACS-sorted lung macrophages (described above) using the RNeasy Plus kit (QIAGEN, catalog no. 74034). RNA samples were prepared according to library kit manufacturer's instructions, indexed, pooled, and sequenced on an Illumina NovaSeq 6000. Basecalls and demultiplexing were performed using Illumina's bcl2fastq2 software. RNA-seq reads were then aligned and quantitated to the mouse reference genome assembly with an Illumina DRAGEN Bio-IT on-premise server running version 3.9.

Cary, NC, RRID:SCR\_014242) and GraphPad Prism 9. Means between two groups were compared using unpaired Student's *t* test. Comparisons of means from three groups with each other were analyzed using analysis of variance (ANOVA). Two-way ANOVAs were used to analyze between-subject effects of two factors. Repeated-measures designs were analyzed using mixed-effects restricted maximum likelihood model. Tukey was used for post hoc pairwise comparisons. Fisher's exact test was used for categorical distributions. The strength of the linear relationship between two different variables was analyzed using Spearman's correlation. The null hypothesis was rejected at the  $P < 0.05$  level. Statistical significance was indicated as  $*P < 0.05$ ,  $**P < 0.01$ , and  $***P < 0.001$ . Statistical significance of the main effects without interaction variables was indicated as  $\#P < 0.05$ ,  $\##P < 0.01$ , and  $\###P < 0.001$ . All statistical information is provided in the supplemental materials.

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**Author contributions:** D.S. played a primary role in conceiving this study, developing the experimental design, performing experiments, analyzing the resulting datasets, and writing the original draft manuscript. N.J. generated and maintained GF mice. N.J. analyzed microglial cell morphology. J.D.U. and M.M. extracted DNA from fecal samples and oversaw V4-16S rRNA amplicon sequencing. J.H., M.L., and J.K. analyzed the resulting 16S rRNA datasets. J.H., M.L., and J.K. performed flow cytometry. H. analyzed macrophages. J.R.S. and X.B. collected brain, cecum, and plasma samples. E.F. quantified cytokines. S.D. performed metabolomic analyses. J.L.-G., S.S.S., and J.I.G. conceptualized experiments. D.M.H. conceptualized, acquired funding for, and supervised the project. J.I.G. and D.M.H. wrote the manuscript.

**Competing interests:** D.M.H. is a cofounder of C2N Diagnostics, LLC, and is on the scientific advisory board and/or consults for Genentech, Denali, C2N Diagnostics, Cajal Neurosciences, and Aleo. D.M.H. holds a patent licensed by Washington University to C2N Diagnostics on the therapeutic use of C2N Diagnostics and a patent licensed by Washington University to Eli Lilly on a humanized anti-A $\beta$  antibody. D.M.H.'s laboratory receives research grants from the National Institutes of Health, Cure Alzheimer's Foundation, the JPB Foundation, Good Ventures, Novartis, Eli Lilly, and NextCure. The authors have no other competing interests.

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