Title: Sex differences and similarities in the neuroimmune response to central administration of

poly I:C

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19
ABSTRACT

The neuroimmune system is required for normal neural processes, including modulation

of cognition, emotion, and adaptive behaviors. Aberrant neuroimmune activation is associated

with dysregulation of memory and emotion, though the precise mechanisms at play are complex

and highly context dependent. Sex differences neuroimmune activation and function further

complicate our understanding of its roles in cognitive and affective regulation. Here, we

characterized the physiological sickness and inflammatory response of the hippocampus

following intracerebroventricular (ICV) administration of a synthetic viral mimic,

polyinosinic:polycytidylic acid (poly I:C), in both male and female C57Bl/6 mice. We observed

that poly I:C induced weight loss, fever, and elevations of cytokine and chemokines in the

hippocampus of both sexes. Specifically, we found transient increases in gene expression and

protein levels of IL-1α, IL-1β, IL-4, IL-6, TNFα, CCL2, and CXCL10, where males showed a

greater magnitude of response compared with females. Only males showed increased IFNα and

IFNγ in response to poly I:C, whereas both males and females exhibited elevations of IFNβ,

demonstrating a specific sex difference in the anti-viral response in the hippocampus. This

suggests that type I interferons are one potential node mediating sex-specific cytokine

responses and neuroimmune effects on synaptic plasticity and cognition. These findings

highlight the importance of using both males and females and analyzing a broad set of

inflammatory markers in order to identify the precise, sex-specific roles for neuroimmune

dysregulation in neurological diseases and disorders including Alzheimer's Disease and

depression.

1. INTRODUCTION

The neuroimmune system is required for neural processes, including synaptic plasticity (Marin and Kipnis, 2013; Rizzo et al., 2018; Yirmiya and Goshen, 2011), and is thus well-placed to modify or disrupt learning and memory. Aberrant immune signaling has also been implicated in disorders of affect and cognition, many of which show sex-biases in prevalence and outcomes (Bekhbat and Neigh, 2018; Dantzer et al., 2008; Neigh et al., 2018). There is significant evidence for sex differences in immune responses in the periphery (Klein and Flanagan, 2016; Klein and Huber, 2010). Knowing whether these sex differences are upheld in the neuroimmune system is important for understanding exactly how neuroimmune dysregulation impacts cognition, and contributes to psychiatric and neurological disorders, in both sexes.

Illness, injury, or aseptic triggers of the innate immune system – either bacterial endotoxins (e.g., lipopolysaccharide, LPS) or viral mimics (e.g., polyinosinic:polycytidylic acid, poly I:C) – cause activation of neuroimmune cells, including microglia and astrocytes, and rapid production of cytokines in the brain (Ransohoff, 2009; Ransohoff and Brown, 2012). Cytokine production is associated with adaptive sickness behaviors and disruption of cognitive processes (Dantzer et al., 2008; Marin and Kipnis, 2013; Raison et al., 2006; Yirmiya and Goshen, 2011). Elevation of hippocampal cytokines, in particular, is associated with both disruption of memory processes (Barrientos et al., 2002; Cunningham et al., 2009; Czerniawski and Guzowski, 2014; Marin and Kipnis, 2013; McAfoose and Baune, 2009; Vasek et al., 2016; Yirmiya et al., 2002) and increased depression-like behaviors (Koo and Duman, 2009; Tang et al., 2016). Due to key roles in peripheral inflammation, the cytokines IL-1β (Barrientos et al., 2002; Goshen et al., 2007; Yirmiya et al., 2002), IL-6 (Sparkman et al., 2006; Trapero and Cauli, 2014; Weaver et al., 2002), and TNFα (Feuerstein et al., 1994; Lindbergh et al., 2020; Strieter et al., 1993) have been the focus of much of the research of neuroimmune function (Donzis and Tronson, 2014). More recently, other cytokines, including interferons (Bekhbat and Neigh, 2018; Blank et al.,

2016), CCL2 (Westin et al., 2012; Xu et al., 2017), and CXCL10 (Bajova et al., 2008; Blank et

al., 2016; Bradburn et al., 2018) have also been implicated in modulation of behavior, cognition,

and affective states, suggesting that many cytokines play important roles in these processes.

Sex differences in immune and neuroimmune activity have also been identified. In

studies of peripheral immune activation, females have a greater inflammatory response

compared with males (Klein and Flanagan, 2016). In contrast, neuroimmune cells *in vitro*,

including astrocytes derived from male cortical tissue, have a significantly greater reaction to

inflammatory insults compared with female-derived cells (Loram et al., 2012; Santos-Galindo et

al., 2011). Sex differences in neuroimmune activity are also observed *in vivo*. For example, we

have identified sex differences in the magnitude, time course, and pattern of cytokines activated

in the hippocampus following peripheral LPS (Speirs and Tronson, 2018), and in the long-lasting

impact of LPS on hippocampal function (Tchessalova and Tronson, 2019). Thus, sex

differences in neuroimmune responses are likely contributor to gender bias in immune-

associated cognitive and affective disorders.

Despite incredible advances in psychoneuroimmunology over the past decade, but there

are critical gaps in our knowledge that preclude a holistic understanding of neuroimmune

function and its impacts on cognition and disease. First, studies have typically focused on a few

inflammatory cytokines (e.g., IL-1β, IL-6, and TNFα) critical for neuroimmune activation and its

effects on cognition. Yet more recently, it has become clear that the massive, coordinated

cytokine response observed in the periphery also occurs in the CNS (Kronfol and Remick, 2000;

Speirs and Tronson, 2018). Which other cytokines are activated, their roles in neural function,

and the similarities and differences of this response in males versus females, are yet to be

defined (Donzis and Tronson, 2014). Second, the bulk of studies aimed at understanding

neuroimmune activation and its behavioral sequelae have used the gram-negative bacterial

shell and toll-like receptor 4 (TLR4) agonist LPS. Nevertheless, viral illnesses also trigger

changes in behavior, cognition, and emotional states. Given that viruses act through distinct toll-

like receptors, their impact is likely mediated by a different, albeit overlapping, pattern of

cytokine activation compared with LPS or bacterial triggers. Third, due to its relevance for

disease states, many *in vivo* studies of neuroimmune function use a peripheral immune

challenge. Here, neuroimmune activation is primarily driven by peripheral immune signals that

infiltrate the brain (Watkins et al., 1995). This complicates the interpretation of whether sex

differences in cytokine levels observed in the brain are due to indirect effects based on sex

differences in peripheral immune response, or to direct effect of sex differences in neuroimmune

function.

101   In this study, we aimed to identify a broad set of inflammatory cytokines induced in the

hippocampus by direct neuroimmune stimulation *via* central administration of poly I:C in both

males and females. We demonstrate that poly I:C induces fever, weight loss, and changes in

mRNA expression and protein levels cytokines, chemokines, and markers of glial activation

across a 24-hour period in both sexes. Notably, only IFNα and IFNɣ showed male-specific

patterns of activation after central poly I:C administration.

2. METHODS

2.1 Animals

110   A total of 99 male and female 8-9 week-old C57BL/6N mice from Envigo (Indianapolis,

IN) were used in these experiments. For all experiments, mice were individually housed in

standard mouse cages with *ad libitum* access to food and water in a room with maintained

temperature and pressure under a 12:12-hour light:dark cycle. All mice had at least one week of

acclimation to the colony room prior to any manipulations. All protocols were approved by the

Institutional Animal Care and Use Committee (IACUC).

2.2 Stereotaxic Surgeries

118   Bilateral guide cannulae (PlasticsOne, Roanoke, VA) targeting the lateral ventricles were

implanted using standard stereotaxic methods (KOPF, Tujunga, CA) at the following

coordinates relative to Bregma: ML: +/- 1.00mm, AP: 0.30mm, DV: -2.50mm. Animals were

administered a pre-surgical analgesic (5mg/kg Carprofen, subcutaneous) and anesthetized for

surgery using an intraperitoneal injection of 250mg/kg of Avertin (2,2,2-tribromoethanol) which

maintained a surgical plane of anesthesia for the duration of the craniotomy. Bilateral holes

were drilled into the skull at the above coordinates, and guide cannulae were implanted using

dental cement. Animals were given a second dose of Carprofen (5mg/kg, subcutaneous) 24

hours after surgery to maintain a total of 48 hours of analgesia. Mice were monitored daily for 10

days post-operative and were given at least 2 weeks to recover from surgery prior to use in

experiments.

2.3 Poly I:C Administration

Polyinosinic:polycytidylic acid (poly I:C; Cat. No. P1530; Sigma-Aldrich, St. Louis, MO)

was prepared according to the manufacturer's instructions and sterile-filtered using a 0.22μm

filter prior to administration. We infused 20μg of poly I:C (2μL of 10μg/μL poly I:C) (Zhu et al.,

2016) or an equal volume of 0.9% sterile saline *via* the implanted guide cannula under brief

isoflurane anesthesia.

2.4 Sickness Behavior Assessment

To determine whether poly I:C increased physiological measures of sickness in males

and females, body weights and rectal temperatures (RET-3; Physitemp, Clifton, NJ) were

assessed at 2, 4, 6, 12, 24, and 48 hours following ICV administration of poly I:C (n = 10 male; n

= 9 female) or sterile saline (n = 10 male; n = 8 female; Figure 2A). Visual and behavioral

measures of sickness (piloerections, squinted eyes, hunched posture, and low responsivity)

were assessed throughout (Hart, 1991). No changes in overt sickness behaviors were observed

for any experiment (data not shown).

2.4.1. Statistical Analysis of Sickness Behaviors

Analysis of body weight and temperature changes in response to poly I:C was

completed using a mixed repeated-measures ANOVA, using time post-infusion as the within-

subjects factor and treatment and sex as the between-subjects factors with Greenhouse-

Geisser corrections for sphericity. Significant main effects and interactions ($p < 0.05$) were

followed up using post-hoc tests with Bonferroni corrections for multiple comparisons, and effect

sizes were calculated using the partial eta squared method.

2.5 Characterization of the Acute Neuroimmune Response

We used RNA and protein endpoints to examine induction of cytokines and glial

activation markers. Males and females were treated with either poly I:C ($n = 22$ male; $n = 24$

female) or sterile saline ($n = 8$/sex) and brains collected 0.5 hours ($n = 5$ male; $n = 6$ female), 2

hours ($n = 6$/sex), 4 hours ($n = 5$ male; $n = 6$ female), and 24 ($n = 6$/sex) hours later. All animals

were transcardially perfused with 0.1M phosphate buffer to remove circulating blood from the

brain. Both hemispheres of dorsal hippocampus tissue were collected in separate RNase-

/Dnase-free, sterile microcentrifuge tubes and immediately flash frozen. All samples were stored

at -80°C before tissue processing.

2.5.1 Quantitative Real-Time PCR

One hemisphere of dorsal hippocampal tissue per mouse was processed for gene

expression analysis using quantitative real-time PCR. Frozen samples were homogenized and

messenger RNA (mRNA) was extracted (PureLink RNA Mini Kit; Cat. No. 12183020; Invitrogen,

Carlsbad, CA), under sterile, RNase-free conditions. RNA quality was assessed using gel

electrophoresis, and UV spectroscopy was used to assess RNA purity (A260/280 > 1.80) and

quantity (BioSpectrometer Basic; Eppendorf, Hamburg, Germany). Any genomic DNA in the

sample was removed using DNase treatment, and 800ng of cDNA was synthesized from each

mRNA sample (QuantiTect Reverse Transcriptase Kit; Cat. No. 205314; Qiagen, Hilden,

Germany). Any samples that did not have a high enough concentration of RNA to make 800ng

of cDNA were removed from further analyses (n = 3 male; n = 5 female). Relative gene

expression was measured using Power SYBR Green PCR Master Mix (Cat. No. 4368702;

Applied Biosystems, Foster City, CA) in 10μL reactions (ABI 7500 real-time PCR system; Cat.

No. 4351105; Applied Biosystems).

We measured expression of four commonly-used housekeeping genes: *18s*, *gapdh*,

hprt1, and *rplp0* (all QuantiTect Primer Assays: *18s* Cat. No. QT02448082, *gapdh* Cat. No.

QT01658692, *hprt1* Cat. No. QT00166768, *rplp0* Cat. No. QT00249375; Qiagen). We analyzed

the relative expression of the following genes of interest: *ccl2*, *cd11b*, *cxcl10*, *gfap*, *ifnα*, *ifnβ*,

ifnγ, *il-1α*, *il-1β*, *il-6*, *il-10*, and *tnfα*. The gene primer for *il-1α* was a QuantiTect Primer Assay

(Cat. No. QT00113505; Qiagen). The sequences for the remaining gene primers can be found

in Table 1 and were ordered through Integrated DNA Technologies and diluted to 0.13 μM to be

used for PCR. All Qiagen primers were diluted as per the manufacturer's instruction.

Table 1.

Primer sequences used for real-time PCR.

Gene Target	Forward Primer Sequence (5' to 3')	Reverse Primer Sequence (5' to 3')	NCBI Reference Sequence
ccl2	CCACAACCACCTCAAGCACT	AAGGCATCACAGTCCGAGT	NM_011333.3
cd11b	CGTGAATGGGGACAAACTGAC	GCACTGAGGCTGGCTATTGA	NM_008401.2
cxcl10	TCCATCACTCCCCTTTACCCA	TGGCTTGACCATCATCCTGC	NM_021274.2
gfap	AAACCGCATCACCATTCCTG	CCCGCATCTCCACAGTCTTTA	NM_010277.3
ifnα	AGAGAAGAAACACAGCCCCT	AGCACATTGGCAGAGGAAGA	NM_010502.2
ifnβ	GCTCCAAGAAAGGACGAACAT	GGATGGCAAAGGCAGTGTAA	NM_010510.1
ifnγ	GTCAACAACCCACAGGTCCA	CGACTCCTTTTCCGCTTCCT	NM_008337.4
il-1β	TGCCACCTTTTGACAGTGATG	GCTCTTGTTGATGTGCTGCT	NM_008361.4
il-6	GAGACTTCCATCCAGTTGCCT	TCATTTCCACGATTTCCCAGAG	NM_001314054.1
il-10	CTGGACAACATACTGCTAACCG	AATGCTCCTTGATTTCTGGGC	NM_010548.2
tnfα	ACCCCTTTACTCTGACCCCTT	ACTGTCCCAGCATCTTGTGT	NM_001278601.1

2.5.1.1 Housekeeping Gene Stability Analysis

To control for the transcriptional activity of the samples being analyzed, we confirmed

the stability of four housekeeping genes (*18s*, *gapdh*, *hprt1*, and *rplp0*) using four techniques.

First, we assessed the variability of the candidate genes by measuring the standard deviation of

the raw quantification cycle (Cq) values from all samples (Figure 1A). We found that *18s* had the

largest standard deviation of Cq values (1.540), followed by *gapdh* (0.527), *rplp0* (0.225), and

hprt1 (0.151; Figure 1B). By this approach, *rplp0* and *hprt1* show the greatest stability compared

to *18s* and *gapdh*, with *hprt1* exhibiting the lowest variability.

Second, we employed a comparative ΔCq approach in which the standard deviations of

the differences in Cq values (ΔCqs) between all possible pairs of candidate genes are

compared (Silver et al., 2006) (Figure 1C). From highest to lowest variability, the genes ranked

as follows: *18s* (1.609 average standard deviation), *gapdh* (0.911), *rplp0* (0.764), and *hprt1*

(0.753). Again, this method indicates that the most variable genes are *18s* and *gapdh* while the

most stable genes are *rplp0* and *hprt1*, and this is most apparent when considering the lowest

ΔCq standard deviation from this method is from the *rplp0* and *hprt1* comparison at 0.206

(Figure 1D).

The third method we employed was that developed by Vandesompele and colleagues,

which calculates the average pairwise variation of one candidate gene with all other candidate

genes (Vandesompele et al., 2002). We used R packages ReadqPCR and NormqPCR (Perkins

et al., 2012) to calculate *M* stability values, as depicted in Figure 1E. Consistent with the

previous methods, *hprt1* and *rplp0* are the most stable of the candidate genes, with the lowest

pairwise variability, *M* value, of 0.206.

Fourth, and last, we used a model-based stability analysis approach developed by

Andersen et al., an algorithm called NormFinder (v5) (Andersen et al., 2004). This method

protects against identifying two genes via the pairwise approach that might be misinterpreted as

being the most stable because they are coregulated. Using this method, again, *hprt1* and *rplp0*

were found to be the most stable genes with the lowest expression stability values (Figure 1F).

However, NormFinder resulted in *rplp0* having the lowest stability value of 0.326, indicating that

the model-based approach identified *rplp0* as the most stable gene.

Together, these methods identified the two most stable candidate housekeeping genes

as *hprt1* and *rplp0*. We calculated the geometric mean of the Cq values from *hprt1* and *rplp0* to

be used in the $2^{-\Delta\Delta Cq}$ method for calculations of relative expression for our target genes.

	Cq Value Standard Deviations	Avg Standard Deviations of ΔCq Values	M Stability Values	Rho Stability Values
18s	1.5402440	1.609	1.609	1.1459049
gapdh	0.5266292	0.911	0.510	0.6235678
hprt1	0.1507111	0.753	0.206	0.3610396
rplp0	0.2245596	0.764	0.206	0.3256827

Figure 1. Housekeeping gene stability analysis. (A) Distribution of the quantification cycles
(Cq) for housekeeping genes *18s*, *gapdh*, *hprt1*, and *rplp0,* with **(B)** associated standard
deviations. **(C)** Distribution of the difference of Cq values (ΔCq) between pairs of housekeeping
genes, and **(D)** the associated standard deviations. **(E)** Stability values calculated using gene
ratio method by Vandesompele et al., 2002, which uses stepwise elimination of lowest stability
(highest *M* value) to rank gene stability. **(F)** Stability values calculated using a model-based
approach by Andersen et al., 2004 which measures expression variation such that highest
stability results in the lowest Rho value. **(G)** Summary of results from each of the four methods
of housekeeping gene stability are shown.

2.5.1.2. Statistical Analysis of mRNA Gene Expression

For each PCR reaction, the quantification cycle (Cq) was determined, and the $2^{-\Delta\Delta Cq}$

method was used to calculate the relative gene expression of each gene. Any samples with

abnormal amplification curves, melt curves, and/or melt peaks across replicates were removed

from analyses (n = 1/sex).

Baseline sex differences in relative gene expression (qPCR) were assessed by

evaluating the male and female saline-treated groups. To directly compare these two groups in

the PCR analysis, the male saline-treated group was normalized to the female saline-treated

group and analyzed using independent, two-sample t-tests.

To analyze changes in relative gene expression (qPCR) across the 24-hour time course,

we normalized each group to their respective same-sex saline-treated group and used two-way

ANOVA tests using treatment and sex as factors. Significant main effects and interactions (p <

0.05) were followed up using post-hoc tests with Bonferroni corrections for multiple

comparisons, and effect sizes were calculated using the partial eta squared method.

2.5.2 Multiplex Assays

The second hemispheres of dorsal hippocampal tissue were processed as previously

described using low-detergent RIPA buffer sonication (Speirs and Tronson, 2018). Milliplex

magnetic bead panel assays (CCL2, CXCL10, IFNγ, IL-1α, IL-1β, IL-2, IL-4, IL-6, and IL-10;

Millipore Sigma, Burlington, MA) were used as per manufacturer's instructions. Cytokine

concentrations were calculated as pg/mg of hippocampal tissue via Luminex software. Only

samples that showed readable bead counts according to the Luminex software were included in

the analyses.

2.5.2.1. Statistical Analysis of Protein Levels

Baseline sex differences in protein levels from multiplex assays were analyzed with

independent, two-sample t-tests comparing the saline-treated groups and two-way ANOVA tests

using treatment and sex as factors were used. Significant main effects and interactions ($p <$

0.05) were followed up using post-hoc tests with Bonferroni corrections for multiple

comparisons, and effect sizes were calculated using the partial eta squared method.

2.6 Data Visualization and Statistical Software

Data visualization and statistical analyses were completed using R 3.6.2 (R Core Team,

2019) with the following packages: dplyr (v0.8.5; Wickham et al., 2020), tidyr (v1.0.2; Wickham

and Henry, 2020), rstatix (v0.5.0; Kassambara, 2020), DescTools (v0.99.34; Signorell et al.,

2020), sjstats (v0.17.9; Lüdecke, 2020), ReadqPCR and NormqPCR (Perkins et al., 2012),

ggplot2 (Wickham, 2016), gridExtra (v2.3; Auguie, 2017), pheatmap (v1.0.12; Kolde, 2019), and

viridis (v0.5.1; Garnier, 2018).

3. RESULTS

3.1 Central administration of poly I:C induces physiological sickness responses

Both females and males showed physiological responses to poly I:C. Whereas both

saline- and poly I:C-treated animals showed changes in weight across the 48-hour period

(Figure 2B, main effect of Time: $F(3.13, 96.92) = 28.899$, $p < 0.001$, $\eta^2_p = 0.482$), poly I:C

caused weight loss in both sexes (main effect of Treatment: $F(1, 31) = 8.781$, $p = 0.006$, $\eta^2_p =$

0.221; trend towards a Time x Treatment interaction: $F(3.13, 96.92) = 2.476$, $p = 0.064$, $\eta^2_p =$

0.074). Specifically, males and females treated with poly I:C lost significantly more weight than

the saline-treated animals at the 12- ($p = 0.004$) and 24-hour ($p = 0.022$) time points. By 48

hours post-treatment, the weights of poly I:C-treated animals had recovered and were no longer

different from those of saline-treated animals ($p = 1.00$).

Figure 2. Analysis of sickness behaviors following poly I:C administration. (A) Timeline of body weight and temperature measurements following poly I:C or sterile saline administration. **(B)** Average weight change from baseline (Time = 0 hour) prior to treatment. **(C)** Average body temperature as measured via rectal thermometer. Analyzed using mixed repeated-measures ANOVA. **#**: trend towards significance with $p < 0.08$ poly I:C- vs saline-treated groups; *****: $p < 0.05$ poly I:C- vs saline-treated groups.

In both males and females, poly I:C caused significant increases in body temperature relative to the saline-treated group (Figure 2C; main effect of Treatment: $F(1, 31) = 23.759$, $p < 0.001$, $\eta^2_p = 0.434$; Time x Treatment interaction: $F(4.6, 142.62) = 11.635$, $p < 0.001$, $\eta^2_p = 0.273$). Post-hoc tests revealed that body temperature began to increase 2 hours following poly I:C ($p = 0.068$), remained elevated at the 4- ($p < 0.001$) and 6-hour ($p < 0.001$) time points, and recovered to saline-treated body temperatures by 12 hours post treatment (all $p = 1.00$).

3.2 Baseline sex differences in mRNA expression and protein levels of select

hippocampal immune molecules

3.2.1. Interleukins

Select immune signaling markers showed baseline sex differences. mRNA expression of

interleukin *(il)-1α* exhibited a trend towards a sex difference in baseline expression (Figure 3C1;

t(12) = 2.006, *p* = 0.068), and *il-6* showed a significant sex difference (Figure 3E1; *t*(11) = 3.079,

p = 0.01, 95% CI [0.182, 1.062]). These results did not hold true for protein levels of IL-1α or IL-

6. Rather, multiplex data showed that protein levels of IL-1β and IL-10 were significantly

different between saline-treated males and females (Figures 4D and 4F, respectively; IL-1β:

t(13) = 4.275, *p* = 0.001, 95% CI [5.682, 17.291]; IL-10: *t*(13) = 2.236, *p* = 0.044, 95% CI [0.672,

39.314]).

3.2.2. Interferons

Two interferons (IFN), *ifnα* and *ifnγ,* also showed baseline sex differences in relative

mRNA expression (Figures 3G1 and 3I1: IFNα: *t*(12) = 5.546, *p* = 0.0001, 95% CI [0.441, 1.01];

IFNγ: *t*(11) = 2.995, *p* = 0.012, 95% CI [0.259, 1.694]). Likewise, protein levels of IFNγ exhibited

a sex difference in saline-treated groups (Figure 4G; *t*(14) = 6.475, *p* < 0.001, 95% CI [6.534,

13.006]).

3.2.3. Chemokines

Expression of CC chemokine *ccl2* similarly followed this pattern at baseline (Figure 3K1;

t(12) = 3.287, *p* = 0.006, 95% CI [0.259, 1.279]), and this held true for protein levels of CCL2 as

well (Figure 4H; *t*(12) = 2.751, *p* = 0.018, 95% CI [12.798, 110.318]). Interestingly, all genes with

sex differences in saline-treated animals showed that both female baseline mRNA expression

and protein levels were at least twice as high as that of males.

Figure 3. mRNA gene expression of cytokines, chemokines, and markers of glial activation in the hippocampus. Baseline gene expression was measured by normalizing the male saline-treated group to the female saline-treated group and analyzed using independent, two-sample t-tests. Baseline expression of **(A1)** CD11b, **(B1)** GFAP, **(C1)** IL-1α, **(D1)** IL-1β, **(E1)** IL-6, **(F1)** IL-10, **(G1)** IFNα, **(H1)** IFNβ, **(I1)** IFNγ, **(J1)** TNFα, **(K1)** CCL2, and **(L1)** CXCL10 are shown. Gene expression changes following poly I:C treatment were calculated by normalizing time points after poly I:C treatment to the saline-treated groups within sex to eliminate confounding variables of baseline sex differences. Gene expression was analyzed using two-way ANOVA tests for **(A2)** CD11b, **(B2)** GFAP, **(C2)** IL-1α, **(D2)** IL-1β, **(E2)** IL-6, **(F2)** IL-10, **(G2)** IFNα, **(H2)** IFNβ, **(I2)** IFNγ, **(J2)** TNFα, **(K2)** CCL2, and **(L2)** CXCL10. **#**: trend towards significance with $p < 0.08$ vs females; ***** above a bracket indicates a significant main effect ($p < 0.05$); ***** above a single bar indicates a significant post-hoc test ($p < 0.05$) vs saline-treated group within sex; **%** above a single bar indicates a significant post-hoc test ($p < 0.05$) vs females at the same time point.

Figure 4. Protein levels of cytokines and chemokines in the hippocampus. Protein
concentration (pg/mg) of **(A)** IL-1α, **(B)** IL-2, **(C)** IL-4, **(D)** IL-1β, **(E)** IL-6, **(F)** IL-10, **(G)** IFNγ, **(H)**
CCL2, and **(I)** CXCL10 are shown. Two-way ANOVA tests were used to analyze these data. **#**
above a single bar indicates a trend towards significance, with a post-hoc test result of $p < 0.08$
vs saline-treated group within sex; ***** above a bracket indicates a significant main effect ($p <$
0.05); ***** above a single bar indicates a significant post-hoc test ($p < 0.05$) vs saline-treated group
within sex; **%** above a single bar indicates a significant post-hoc test ($p < 0.05$) vs females at the
same timepoint.

3.2.4. Glial activation markers and other cytokines did not show baseline sex differences

It is equally important to note the markers that did not show sex differences at baseline.

Both the microglial activation marker *cd11b* and the astrocyte activation marker *gfap* showed

equivalent levels of gene expression in the saline-treated groups in both sexes (Figures 3A1

and 3B1, respectively; *cd11b*: $t(12) = 0.723$, $p = 0.483$; *gfap*: $t(12) = 1.603$, $p = 0.135$). Other

commonly examined inflammatory cytokines, including IL-2, IL-4, and tumor necrosis factor

(TNF)α similarly showed no sex difference at baseline (IL-2 $p = 0.420$; IL-4 $p = 0.633$; TNFα =

0.139). No other sex differences in mRNA gene expression or protein levels were observed

under baseline conditions.

3.3 Central poly I:C causes greater increases in male mRNA expression of hippocampal

cytokines compared with females

3.3.1. Glial Activation Markers

Poly I:C treatment significantly increased expression of both *cd11b* and *gfap*, although

this appeared to be true only at the 24-hour time point (Figures 3A2 and 3B2; *cd11b* main effect

of Treatment: $F(4, 42) = 12.96$, $p < 0.001$, $\eta^2_p = 0.552$; *gfap* main effect of Treatment: $F(4, 42) =$

12.992, $p < 0.001$, $\eta^2_p = 0.553$). Sex did not affect the response of either *cd11b* or *gfap* to poly

I:C (insignificant Sex x Treatment interactions: *cd11b*: $F(4, 42) = 0.684$, $p = 0.607$; *gfap*: $F(4, 42)$

$= 0.923$, $p = 0.460$).

3.3.2. Interleukins

Poly I:C caused increased expression of *il-1α*, *il-1β*, and *il-6* in both males and females

(Figures 3C2, 3D2, and 3E2; main effects of Treatment: *il-1α*: $F(4, 42) = 9.784$, $p < 0.001$, $\eta^2_p =$

0.482; *il-1β*: $F(4, 42) = 9.512$, $p < 0.001$, $\eta^2_p = 0.475$; *il-6*: $F(4, 42) = 22.28$, $p < 0.001$, $\eta^2_p =$

0.680). In males, expression began to increase at the 2-hour time point following poly I:C

treatment for *il-1α* ($p = 0.015$), *il-1β* ($p = 0.057$), and *il-6* ($p = 0.029$), showed peaks at the 4-

hour time point ($p < 0.001$ for all), and decreased to saline-treated levels by 24 hours ($p = 1.00$

for all). Each of these genes also showed an overall greater expression in males than females

(main effects of Sex: *il-1α*: $F(1, 42) = 6.398$, $p = 0.015$, $\eta^2_p = 0.132$; *il-1β*: $F(1,42) = 6.695$, $p =$

0.013, $\eta^2_p = 0.137$; *il-6*: $F(1, 42) = 21.1$, $p < 0.001$, $\eta^2_p = 0.334$), and a significantly greater

magnitude of response in males compared with females (Sex x Treatment interactions: *il-1α*:

$F(4, 42) = 3.103$, $p = 0.025$, $\eta^2_p = 0.228$; *il-1β*: $F(4, 42) = 4.288$, $p = 0.005$, $\eta^2_p = 0.290$; *il-6*: $F(4,$

$42) = 15$, $p < 0.001$, $\eta^2_p = 0.588$). Post-hoc tests revealed for all three genes, males exhibited an

even greater response at only the 4-hour time point compared with females ($p < 0.05$ for all).

Notably, the peak *il-1α* and *il-1β* expression in males was roughly 3-fold higher than that of the

peak female expression for these cytokines, and the *il-6* peak expression in males was more

than 10-fold higher than that of females (Figures 3C2, 3D2, and 3E2).

Males showed greater *il-10* gene expression across all time points compared with

females (Figure 3F2; main effect of Sex: $F(1, 39) = 25.642$, $p < 0.001$, $\eta^2_p = 0.397$). Additionally,

poly I:C significantly increased gene expression of *il-10* in males, but not females (Sex x

Treatment interaction: $F(4, 39) = 3.304$, $p = 0.02$, $\eta^2_p = 0.253$). Specifically, male expression of

il-10 at the 4-hour time point following poly I:C was significantly greater than that of saline-

treated controls ($p = 0.001$), and this was also greater than the 4-hour expression in females (p

$= 0.001$).

3.3.3. Tumor Necrosis Factor Alpha

Gene expression of *tnfα* increased in response to poly I:C overall, males had

significantly higher expression than females overall, and males showed a greater magnitude of

response compared with females (Figure 3J2; main effect of Treatment: $F(4, 42) = 6.407$, $p =$

0.0004, $\eta^2_p = 0.379$; main effect of Sex: $F(1, 42) = 10.1$, $p = 0.003$, $\eta^2_p = 0.194$; Sex x Treatment

interaction: $F(4, 42) = 4.117$, $p = 0.007$, $\eta^2_p = 0.282$). Post-hoc tests showed that males 4 hours

post-treatment had significantly greater expression than those treated with saline ($p < 0.001$),

and this was again greater than the 4-hour peak expression in females ($p = 0.001$).

3.3.4. Interferons

Both *ifnα* and *ifnγ* showed a similar response pattern to poly I:C whereby males treated

with poly I:C exhibited a significant acute increase in gene expression of both cytokines, but

females did not show the same response (Figures 3G2 and 3I2; *ifnα*: main effect of Treatment:

$F(4, 42) = 5.007$, $p = 0.002$, $\eta^2_p = 0.323$; Sex x Treatment interaction: $F(4, 42) = 3.35$, $p = 0.018$,

$\eta^2_p = 0.242$; *ifnγ*: main effect of Treatment: $F(4, 40) = 4.698$, $p = 0.003$, $\eta^2_p = 0.32$; Sex x

Treatment interaction: $F(4, 40) = 4.178$, $p = 0.006$, $\eta^2_p = 0.295$). Specifically, 4 hours after poly

I:C treatment, males showed significantly elevated expression compared to the saline-treated

controls ($p = 0.0001$), and this was greater in magnitude than the 4-hour time point in females (p

$= 0.001$). Female *ifnα* and *ifnγ* did not seem to respond to poly I:C treatment at any time point.

In contrast, poly I:C transiently increased expression of *ifnβ* in both males and females,

and there were no sex differences seen in magnitude of expression increase (Figure 3H2; main

effect of Treatment: $F(4, 42) = 4.855$, $p = 0.003$, $\eta^2_p = 0.316$; insignificant Sex x Treatment

interaction: $F(4, 42) = 1.297$, $p = 0.287$). Unlike all other cytokines examined in this study, peak

expression appeared to be at the 2-hour time point, and expression began decreasing again by

4 hours post-treatment. The magnitude increase was also notable, with a 100-fold increase in

females and a 300-fold increase in males.

3.3.5. Chemokines

Poly I:C significantly increased the expression of both *ccl2* and *cxcl10* in males and

females, with a peak increase in expression at 4-hours post-infusion (Figures 3K2 and 3L2;

main effects of Treatment: *ccl2*: $F(4, 41) = 25.47$, $p < 0.001$, $\eta^2_p = 0.713$; *cxcl10*: $F(4, 42) =$

87.37, $p < 0.001$, $\eta^2_p = 0.893$). Also consistent with many other cytokines, expression of both

ccl2 and *cxcl10* was greater overall in males compared with females (main effects of Sex: *ccl2*:

$F(1, 41) = 44.55$, $p < 0.001$, $\eta^2_p = 0.521$; *cxcl10*: $F(1, 42) = 92.79$, $p < 0.001$, $\eta^2_p = 0.688$). Finally,

males showed a markedly greater magnitude of response than did females for both chemokines

(Sex x Treatment interactions: *ccl2*: $F(4, 41) = 20.96$, $p < 0.001$, $\eta^2_p = 0.672$; *cxcl10*: $F(4, 42) =$

60.51, $p < 0.001$, $\eta^2_p = 0.852$). Remarkably, male *ccl2* expression peaked at nearly 450-fold

greater than the expression of saline-treated males compared to a roughly 20-fold increased

peak in females (Figure 3K2). Similarly, *cxcl10* expression in males peaked at nearly 500-times

that of saline-treated males while female *cxcl10* expression peaked at just over 40-times greater

than saline-treated females (Figure 3L2). These massive increases in gene expression are

reflected in the strong effect sizes noted for the interaction effect above. Post-hoc tests

confirmed that the male 2- and 4-hour time points post-treatment showed significantly greater

gene expression of both *ccl2* and *cxcl10* than saline-treated males ($p < 0.001$). Additionally,

both the male 2- and 4-hour time points of both genes proved to be significantly greater than the

2- and 4-hour time points in females, respectively ($p < 0.01$).

3.4 Central poly I:C increases select hippocampal cytokine protein levels in males and

females

3.4.1. Interleukins

We analyzed several members of the interleukin family of cytokines, including classically

inflammatory IL-1α, IL-1β, IL-2, IL-4, and IL-6, and classically anti-inflammatory IL-10. Of these,

IL-1α, IL-1β, IL-4, and IL-6 significantly increased following ICV poly I:C administration in both

males and females (Figures 4A, 4C, 4D, 4E; main effects of Treatment: IL-1α: $F(4, 51) = 3.523$,

$p = 0.013$, $\eta^2_p = 0.216$; IL-1β: $F(4, 51) = 5.721$, $p = 0.001$, $\eta^2_p = 0.31$; IL-4: $F(4, 51) = 5.146$, $p =$

0.001, $\eta^2_p = 0.288$; IL-6: $F(4,51) = 10.298$, $p < 0.001$, $\eta^2_p = 0.447$). In all cases, protein levels

appear to increase to a peak 4 hours following poly I:C, similar to the effects seen in mRNA

expression. In addition, both IL-1β and IL-4 also exhibited a main effect of Sex such that protein

levels of these cytokines, regardless of time point, were significantly higher in females

compared with males (Figures 4C and 4D; IL-1β: $F(1, 51) = 114.226$, $p < 0.001$, $\eta^2_p = 0.691$; IL-

4: $F(1, 51) = 11.03$, $p = 0.002$, $\eta^2_p = 0.178$). No interactions of sex and treatment were found for

any of the interleukin cytokines examined here (IL-1α: $F(4, 51) = 0.446$, $p = 0.775$; IL-1β: $F(4,$

51) = 0.513, p = 0.726; IL-4: F(4, 51) = 0.982, p = 0.426; IL-6: F(4, 51) = 1.779, p = 0.148).

Neither IL-2 nor IL-10 showed any effects of poly I:C treatment in either sex (Figures 4B and 4F;

insignificant main effects of Treatment: IL-2: F(4, 51) = 1.498, p = 0.217; IL-10: F(4, 51) = 1.122,

p = 0.357). Similar to IL-1β and IL-4, though, we found that females had overall higher levels of

IL-10 than did males (main effect of Sex; F(1, 51) = 20.27, p < 0.001, η^2_p = 0.284).

3.4.2. Interferon

We also measured IFNγ levels in response to poly I:C. Unlike mRNA expression, IFNγ

protein levels did not change following poly I:C administration in either sex (Figure 4G;

insignificant main effect of Treatment: F(4, 52) = 1.93, p = 0.119). However, IFNγ levels were

higher in females relative to males (main effect of Sex: F(1, 52) = 150.64, p < 0.001; η^2_p =

0.743). This was consistent with mRNA expression data where saline-treated females also

showed significantly higher expression of *ifnγ* at baseline than did males (see Figure 3Q).

3.4.3. Chemokines

Finally, we measured protein levels of the chemokines CCL2 and CXCL10 in both

sexes. Both chemokines were significantly affected by central administration of poly I:C and in

different ways in males and females (Figures 4H and 4I; CCL2: main effect of Treatment: F(4,

46) = 18.517, p < 0.001, η^2_p = 0.617; Sex x Treatment interaction: F(4, 46) = 3.381, p = 0.017,

η^2_p = 0.227; CXCL10: main effect of Treatment F(4, 52) = 14.54, p < 0.001, η^2_p = 0.528; Sex x

Treatment interaction: F(4, 52) = 2.796, p = 0.035, η^2_p = 0.177). In males, CCL2 levels increased

earlier (at 2 hours) post-infusion relative to females. For CXCL10, females took longer for

protein levels to begin to decrease as compared to the time course in males, with females still

showing the massive elevation at 24 hours post-infusion as they did at 4 hours.

Notably, both CCL2 and CXCL10 levels showed the most substantial increases out of all

cytokines measured in protein analysis in the hippocampus. Specifically, female CCL2 levels

induced by poly I:C peaked at approximately 4 times that of the saline-treated animals, and

male CCL2 levels peaked nearly 8 times that of saline-treated males (Figure 4H). More

remarkably, female CXCL10 levels rose roughly 16-fold by 4 hours after poly I:C administration,

and males showed a 12-fold increase by 4-hours (Figure 4I).

3.5. Summary

Ultimately, we observed that most, but not all, protein levels of cytokines and

chemokines examined here responded to central administration of poly I:C in males and

females. Of those that did respond (IL-1α, IL-1β, IL-4, IL-6, CCL2, and CXCL10), peak protein

levels were seen at 4 hours following poly I:C treatment. Overall, the pattern of immune

response as measured through protein was similar between males and females, with only 2

chemokines, CCL2 and CXCL10, showing sex differences in the time course of response.

Importantly, these data largely overlap with the timing and patterns of response seen in the

same genes measured using relative mRNA expression (see Figures 5A and 5B).

Figure 5. Heatmaps of gene expression and protein levels in the hippocampus. Changes in **(A)** mRNA gene expression and **(B)** protein levels for cytokines, chemokines, and markers of glial activation are shown. Values are centered and scaled across rows to highlight changes across the time course for each gene of interest; thus, differences in magnitude between genes are not depicted.

4. DISCUSSION

Here we demonstrated that central administration of poly I:C induced both physiological measures of sickness and concomitant neuroinflammatory activation in both male and female mice. Both males and females treated with poly I:C mounted an acute fever response and showed weight loss that recovered to saline-treated levels 48 hours later. Additionally, both sexes showed acute cytokine and chemokine responses in the hippocampus, as measured by both mRNA expression and protein levels, that followed the time course of fever. Whereas most neuroimmune activation markers were induced in both sexes, *il-10*, *ifn*α, and *ifn*γ increased in males only. Given the specific role of type I interferons in viral response (Seth et al., 2006; Stetson and Medzhitov, 2006; Teijaro, 2016), this sex difference may have important implications for how neuroimmune activation differentially disrupts cognition in males and females.

Poly I:C treatment in both sexes resulted in a significant and transient increase in gene expression and protein levels of most, but not all, cytokines and chemokines in the hippocampus, including IFNβ, IL-1α, IL-1β, IL-6, TNFα, CCL2, and CXCL10. That administration of an immune stimulant, including viral mimics such as poly I:C, induces a neuroimmune response is not new; however, most of the previous studies on poly I:C used peripheral administration (Cunningham, Campion, Teeling, Felton, & Perry, 2007a; Fortier et al., 2004; Kamerman, Skosana, Loram, Mitchell, & Weber, 2011; Murray et al., 2015). As such, multiple, indirect mechanisms are likely involved in causing inflammation in the brain (Watkins et al., 1995). Peripheral administration of poly I:C, specifically, was found to induce neuroinflammation through a separate and distinct pathway than central administration (Zhu et al., 2016). Additionally, these studies examined a subset of cytokines or chemokines, including the most commonly examined IL-1β, IL-6, and TNFα, and type I interferons that typically respond to viruses. Given evidence of mechanistic complexities governing neuroinflammation, particularly

from stimulants such as poly I:C, and given that there are over 300 cytokines with important

roles in the immune system and neural function, it is critical to begin looking beyond IL-1β, IL-6,

and TNFα and more strongly consider implications of such limits in experimental design for the

field of psychoneuroimmunology.

In addition to the intricacies of how immune stimulants such as poly I:C activate the

neuroimmune system, males and females differ in immune and neuroimmune responses. The

direction of these differences depends on whether you are looking in the periphery (Klein and

Flanagan, 2016) or the brain (Loram et al., 2012; Santos-Galindo et al., 2011). However, sex

differences in peripheral immune function are not just about size of the response, but also the

type of response. For example, women show stronger inflammatory responses to vaccines

(Klein and Flanagan, 2016) and greater rates of antibody-mediated autoimmune disorders (e.g.,

multiple sclerosis and systemic lupus erythematosus). In contrast, men are at greater risk of an

exaggerated and pathological acute inflammatory response and "cytokine storm" and show

greater risk of cell-mediated autoimmune disorders (e.g., myocarditis and ankylosing

spondylitis) (Fairweather et al., 2008). Additional considerations include accounting for levels of

inflammatory signals at baseline compared with the responsiveness to immune triggers. Here

we observed that males showed greater responsiveness to poly I:C, and females had higher

basal levels of cytokines prior to poly I:C treatment, emphasizing the complexity of

neuroimmune processes.

Viral infections are not immune to observations of sex differences. Specifically, males

and females show sex differences in prevalence, intensity, and survival outcomes of viruses

(Barna et al., 1996; Klein and Flanagan, 2016; Klein and Huber, 2010). Many report that when

females show better survival outcomes or seem more protected against certain viruses, it is due

to the female immune system having a greater anti-viral response that allows the virus to be

cleared faster (Barna et al., 1996; Channappanavar et al., 2017; Klein, 2012; vom Steeg and

Klein, 2016). Data on SARS-CoV-2, the virus that causes the coronavirus disease 2019

(COVID-19), has showed a similar sex difference in intensity of infection, with more males

having worse symptoms, including neurological complications, and survival outcomes relative to

females (Chen et al., 2020; Gebhard et al., 2020; Guan et al., 2020; Klein et al., 2020; Onder et

al., 2020). However, in contrast to the data that suggests a greater immune response results in

faster recovery, recent studies indicate that higher levels of inflammatory cytokines including IL-

6, IL-1β, CXCL10, and CCL2 are correlated with worse COVID-19 outcomes (Liu et al., 2020;

Takahashi et al., 2020). Unequivocally, sex matters in the context of immune and neuroimmune

responses as well as in the acute and chronic implications of neuroimmune modulation of neural

function, cognition, and emotion in males and females.

Similar to extant sex differences in immune and neuroimmune responses, we observed

that most cytokines examined, including IL-1α, IL-1β, IL-6, IL-10, IFNα, TNFα, CCL2, and

CXCL10 showed a stronger response in males compared with females. Whereas others have

reported increases in select inflammatory markers following poly I:C treatment, these studies

used either only used male (Fortier et al., 2004; Kamerman et al., 2011) or female rodents

(Cunningham et al., 2007b; Murray et al., 2015). To the best of our knowledge, this is the first

direct comparison of hippocampal cytokines in males and females as a consequence of poly

I:C. Whether the greater magnitude in male response to poly I:C indicates greater

neuroprotection or vulnerability remains to be determined. Additionally, whether sex differences

in the cytokine and chemokine responses observed here result in functional differences in

modulation of neural function, including cognition and emotion, is a critical knowledge gap yet to

be addressed.

We observed that most cytokines examined showed a greater magnitude of response in

males compared with females. This is consistent with previous findings that male-derived

astrocytes have a greater reaction to inflammatory insults compared with females (Astiz et al.,

2014; Chistyakov et al., 2018; Loram et al., 2012; Santos-Galindo et al., 2011). Poly I:C is

recognized by microglia, astrocytes, and neurons via toll-like receptor 3 (TLR3) (Alexopoulou et

al., 2001; Kielian, 2006; Matsumoto and Seya, 2008). The interaction of these 3 cell types is

crucial in mediating inflammatory responses (Cerbai et al., 2012; Scholz and Woolf, 2007).

Given that TLR3 shows much greater expression in astrocytes relative to microglia (Bsibsi et al.,

2002), the reaction of astrocytes in males may be driving the sex differences in magnitude gene

expression response of cytokines following poly I:C. The astrocyte activation marker, GFAP,

and the microglial activation marker, CD11b, did not increase until 24 hours after poly I:C

treatment and did not show sex differences. However, this does not absolve astrocytes or

microglia from the acute response to poly I:C. Specifically, Norden and colleagues found that

cytokine gene expression from both astrocytes and microglia preceded increases in astrocyte

and microglial activation markers, (GFAP and Iba1, respectively), and that these activation

markers similarly did not show reliable increases until the 24-hour time point (Norden et al.,

2016). It is likely, therefore, that the greater astrocytic reaction in males is driving the greater

magnitude of response to poly I:C by males.

The interferon family of cytokines showed a sex-specific pattern of expression in the

hippocampus. Specifically, males showed increases in IFNα, IFNβ, and IFNγ, but females only

showed a significant response in IFNβ. This is consistent with previous findings that showed

females increased gene expression of IFNβ, but not IFNα, in response to peripheral poly I:C,

though this study did not measure these effects in males for comparison (Murray et al., 2015).

Type I interferons, IFNα and IFNβ, are key to the anti-viral response of the immune system and,

as such, are known to respond to viral stimulants including poly I:C (Costello and Lynch, 2013;

Scumpia et al., 2005; Seth et al., 2006; Stetson and Medzhitov, 2006; Teijaro, 2016). Consistent

with our data, in which IFNβ showed an early peak expression levels, type I interferon activity is

responsible for inducing inflammatory cytokines such as IL-6 and TNFα (Fortier et al., 2004;

Murray et al., 2015). Additionally, interferon signaling from poly I:C treatment also results in

altered glutamatergic signaling (Costello and Lynch, 2013; Scumpia et al., 2005), which is

known to be critical for hippocampal memory formation (Katagiri et al., 2001). Given that males

induce both IFNα and IFNβ following poly I:C whereas females only induce IFNβ, interferons

have important implications for sex differences in neuroimmune disruption of cognition from

virus or viral-like stimulants.

Taken together, this study characterizes the sickness and neuroimmune responses to

central administration of poly I:C, and we observed sex-specific patterns of hippocampal

cytokine responses. Specifically, we identified type I interferons as one potential node mediating

sex-specific cytokine responses and neuroimmune effects on synaptic plasticity and cognition.

Additionally, the magnitude of response of cytokines such as CCL2 and CXCL10 highlight the

importance of examining a comprehensive set of inflammatory markers using multiple

endpoints. Neuroimmune activation is known to play a role in cognitive deficits and affective

dysregulation in diseases such as Alzheimer's Disease and other dementias (Krstic and

Knuesel, 2013), Post-Traumatic Stress Disorder (Pace and Heim, 2011; Wang and Young,

2016), depression (Bekhbat and Neigh, 2018; Hodes et al., 2015), and now even in COVID-19

(Zhou et al., 2020). Given the sex/gender biases in prevalence, severity, and/or survival

outcomes, identifying sex-specific neuroimmune responses will provide novel targets for

personalized prevention and treatment of these diseases.

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The authors have no competing interests to declare.

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G.

	Cq Value Standard Deviations	Avg Standard Deviations of ΔCq Values	M Stability Values	Rho Stability Values
18s	1.5402440	1.609	1.609	1.1459049
gapdh	0.5266292	0.911	0.510	0.6235678
hprt1	0.1507111	0.753	0.206	0.3610396
rplp0	0.2245596	0.764	0.206	0.3256827

A.

ICV Poly I:C (20μg) or Saline

T0   T2   T4   T6   T12   T24   T48

Weight Temp   Weight Temp   Weight Temp   Weight Temp   Weight Temp   Weight Temp   Weight Temp

B.

Y-axis: Average Weight Change (g), ranging from −2.5 to 0.5

X-axis: Hour Post–Infusion (0, 2, 4, 6, 12, 24, 48)

* markers at 12 and 24 hours

C.

Y-axis: Average Body Temperature (°C), ranging from 36.0 to 39.0

X-axis: Hour Post–Infusion (0, 2, 4, 6, 12, 24, 48)

Legend:
- ○ Female Saline
- ○ Male Saline
- ● Female Poly I:C
- ● Male Poly I:C

marker at 2 hours; * markers at 4 and 6 hours