A reproducible approach for the use of aptamer libraries for the identification of

Aptamarkers for brain amyloid deposition based on plasma analysis.

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Keywords:

Alzheimer's disease, biomarkers, Aptamarkers, Neomer library

Classification:

Biological Sciences, Neuroscience

Abstract

An approach for the agnostic identification and validation of aptamers for the prediction of a medical state from plasma analysis is presented in application to a key risk factor for Alzheimer's disease, brain amyloid deposition. This method involved the use of a newly designed aptamer library with sixteen random nucleotides interspersed with fixed sequences called a Neomer library. The Neomer library approach enables the direct application of the same starting library on multiple plasma samples, without the requirement for pre-enrichment associated with the traditional approach. Eight aptamers were identified as a result of the selection process and screened across 390 plasma samples from the same 400 individuals by qPCR assay. Results from both processes were analysed using multiple machine learning algorithms from the Scikit-learn package along with clinical variables including cognitive status, age and sex to create predictive models. An Extra Trees Classifier model provided the highest predictive power. The Neomer approach resulted in a sensitivity of 0.74, specificity of 0.76, and AUC of 0.78. The only clinical variable that remained included in the model was age. We conclude that the Neomer approach represents a clear improvement for the agnostic identification of aptamers (Aptamarkers) that bind to unknown biomarkers of a medical state.

Introduction

The diagnosis of complex diseases, including dementia, psychiatric disorders, auto-immune disorders, and gastro-intestinal diseases, remains a significant challenge when relying on blood-based approaches. Various "omics" approaches, such as genomics, transcriptomics, proteomics

and metabolomics have encountered limitations in addressing this issue. Firstly, genomics and

transcriptomics-based strategies struggle to provide accurate predictions for complex diseases

due to the intricate nature of genetic risk factors. The complexity arises from the involvement of

numerous genetic variants, each with a modest individual effect, having positive or negative

correlations with the condition, making it challenging to pinpoint causative factors or establish

predictive models. Additionally, transcriptomics fails to correlate gene expression from these

individual genetic factors to disease onset or progression due to technical variation introduced

during sample preparation, library construction, and sequencing[1]. Both of these approaches are

limited by the gap between genetic variation, transcript abundance and protein abundance as a

function of translation. Neither of these approaches provide information about molecular

complexes or post-translational modifications.

Further downstream, proteomics and metabolomics, pose another set of challenges. These

platforms confront substantial variability, both within individuals due to dynamic fluctuations in

protein levels or metabolite concentrations over time, and across different subjects (inter-

individual) due to genetic diversity, lifestyle, or environmental factors[2]. Proteomics and

metabolomics are also both limited in their ability to detect complexes and to quantify the

relative abundance of molecules. Uncharacterized forms of both metabolites and proteins, as

well as protein complexes, further limit the ability of these approaches to form predictive models

based on current scientific literature. Proteins and metabolites in life often exist in complexes,

many proteins exist and function as members of non-covalently bound homo or hetero-mers of

varying composition, while metabolites due to their inherent hydrophobicity often exist in the

blood stream as non-covalent complexes with protein. The existence of complexes is not directly

measured by either proteomics or metabolomics, it is at best inferred.

There is clearly a need for an agnostic approach to biomarker identification that is not

constrained by these limitations. The concept of using aptamer libraries for the agnostic

discovery of biomarkers for predicting disease states has been attempted by ourselves[3,4] and

others but was also limited by the following constraints.

1.) The need to immobilize target material in order to parse aptamers that bind from

aptamers that do not bind.

2.) The need for reiterative selection cycles in order to enrich aptamer sequences from single

unique copies in the naïve library. The reiterative selection process implicitly introduces

PCR bias into the selection process and is a cause for variation between samples.

3.) The inability to apply the same set of sequences in a naïve library to different biofluid or

tissue samples.

In this paper we will describe how we have combined innovative approaches that overcome these

constraints with an aptamer library application for the diagnosis of brain amyloid deposition (a

risk factor for Alzheimer's disease) in blood.

We have overcome the need to immobilize targets in order to separate aptamers in a library that

bind from those that do not with an approach called FRELEX[5]. This approach relies on

immobilized antisense oligonucleotides on gold nanoparticles to compete with targets in blood

for the binding of all aptamers in a library. A proportion of each aptamer sequence that does not

bind to a target will hybridize to the immobilized antisense and can be removed with

centrifugation. That portion of any aptamer sequence that binds to a target will remain in the

supernatant and is recovered and submitted for next generation sequencing (NGS) analysis. The

more any given aptamer is bound to targets in selection the higher it's relative frequency will be

in NGS analysis.

We overcame the latter two constraints listed above, the need for reiterative selection and the

inability to apply the same aptamer sequences to different biological samples by reinventing

aptamer selection. A key constraint with the traditional SELEX method is the contiguous nature

of the random region[6]. This implicitly restricts structural diversity resulting in a need to design

libraries with large numbers of random nucleotides. The standard SELEX library design involves

40 contiguous nucleotides (nt) in the random region. This represents a total of 1.2E24 possible

sequences. In practical terms the upper limit in regard to the number of sequences that can

practically be applied to a sample is 1E15 to 1E16. This means that it is not practical to apply

aptamer libraries in selection that contain multiple copies of each possible sequence. It is also not

possible to apply the same library of sequences to different targets. To overcome this constraint

we designed an aptamer library with 16 random nt interspersed with fixed sequences, as

described in Figure 1. The key to this design is that there is minimal capacity for hybridization

among the fixed sequences. With 16 random nt the total number of possible sequences is 4.29E9.

This approach enables the use of 4E12 sequences such that there is an average of 1,000 copies of

each possible sequence in the naïve library, and the same naïve library sequences can be applied

to different biological samples. We refer to this novel design of an aptamer library as a neomer

library.

The next issue to be solved was how to characterize the frequency of all 4.29E9 sequences cost-

effectively in NGS analysis. Our solution was to include a restriction site in the middle of the

library sequence. The presence of this restriction site drives the only occurrence within the fixed

sequences of self-hybridization. After selection, the library is amplified and then this restriction

site is used to cut the library into two modules. Each module contains eight random nucleotides

representing a total of 65,536 possible sequences. Each module is prepared separately for NGS

analysis and in a single NGS run it is possible to determine the frequency of each of all possible

sequences.

The frequency of each of the original 4.29E9 possible sequences is obtained for each selection by

multiplying the frequencies of each of the possible 65,536 sequences in one module by the

frequencies in the other module through the use of an outer product matrix. This mathematical

approach is synonymous to the concept of a Punnett square used in genetics.

We refer to the aptamers within these libraries used for agnostic selection as Aptamarkers. We

applied this neomer approach to identify Aptamarkers for brain amyloid deposition in plasma

with 390 individuals from the Australian Imaging, Biomarker and Lifestyle (AIBL) cohort[7,8].

Alzheimer's disease is a neurodegenerative process that is thought to be caused by a three-step

process[9]. The first step is the accumulation of amyloid plaques in the brain, followed by Tau

tangles within neurons and finally neuronal death. The presence of high brain amyloid is

considered by clinicians in combination with memory tests in their definition of the disease in

patients presenting memory symptoms. The use of positron emission tomography (PET) scans or

the evaluation of Abeta 42 to Abeta 40 peptide ratios in cerebrospinal fluid[10] are the current gold

standards for brain amyloid diagnosis. Unfortunately, both diagnostic procedures are invasive

and expensive. The need for a simple blood test as a first line screen has been suggested as

desirable by several sources[11, 12].

We applied a neomer library to plasma samples from twenty individuals (ten high brain amyloid,

ten low brain amyloid) balanced for other clinical variables and characterized the frequencies of

all 4.29E9 sequences across all samples by NGS analysis. We identified four Aptamarkers that

were preferentially enriched on blood samples from individuals with high brain amyloid

deposition (HAM) and four sequences that were preferentially enriched on blood samples from

four individuals with low brain amyloid (LAM). We designed specific primer sequences for each

Aptamarker such that we could amplify them individually from a pool. The pool of eight

Aptamarkers were applied to 10 uL of plasma from 390 samples (AIBL cohort) in the presence

of antisense oligonucleotides (Figure 2) with the capacity to hybridize to them. The antisense

oligonucleotides were immobilized on gold nanoparticles and that portion of the Aptamarker

pool that hybridized to them was removed with a centrifugation step. The remaining supernatant

was used as a template for qPCR analysis.

Prior to processing the samples we predefined 291 of the samples as training samples and 99 as

test samples. Machine learning (ML) analysis of the qPCR results and clinical variables was

carried out using a variety of different algorithms on the training samples. ML models that were

assessed for sensitivity, specificity and area under the receiving operator curve (AUROC) and

were tested for predictive capacity on the test samples.

ML analysis of the Neomer libraries with eight Aptamarkers and age resulted in an Extra Trees

Classifier model with a sensitivity of 74%, specificity of 76%, overall accuracy of 75% and an

area under the AUROC curve of 0.78. The predictive power of the Neomer/Aptamarkers did not

include cognitive status or sex as clinical variables, indicating that this was not a significant

criteria for this test. A key advantage of the method as described is the agnostic nature of the

analysis. This same approach can be applied to develop Aptamarkers for any disease. The

method can also be applied to detect differences in blood related to response to treatment, or

predisposition to side effects.

Materials and Methods

Neomer selection and predictive modelling

The ssDNA Neomer library used for selection was composed of a 16 random interspersed by

fixed sequences.

5'

CCAGATACAGACNNGAGGNNNGAATNNNAACCATCGGCGCCAACANNNCATTCNNN

CAGANNCAGTAGACAGC 3' (IDT, Belgium).

This template was selected to limit the contiguous nature of traditional aptamer libraries and to

maximise the structural diversity of the aptamers. A prediction of the secondary structure formed

by this library is provided in Figure 1 based on the use of the RNAfold program[13] as visualized

with Forna structure software[14].

Figure 1: Predicted secondary structure of fixed sequences in Neomer library.

We also conjugated single stranded (ss) DNA antisense sequences (/5ThioMC6-

D/AAAACAAAGTCTACTTGTTGGTTCTGTAT) with homology to fixed sequences in the

neomer library on 40 nm Gold Nanoparticles (GNPs – Cytodiagnostics). This antisense was

designed to have complementary binding to fixed sequences in the Neomer library. The thiolated

antisense was reduced with TCEP following IDT specifications. Reduced antisense was then

conjugated with GNPs following supplier specifications and dissolved in 200 µL 0,1X of

phosphate buffer saline (PBS) (8.0 mM Na2PO4, 1.4 mM KH2PO4, 136 mM NaCl, 2.7 mM

KCl, pH 7.4). This concentration of the antisense in solution on the GNPs was measured with a

NanoDrop instrument in order to ensure that an antisense concentration of 0.24 µM was used for

each sample.

In the first step of FRELEX employed in this study, 2.57E13 sequences from the neomer aptamer

library were snap cooled by heating the library to 95 °C for 10 min followed by immediate

immersion in ice bath. These libraries were then incubated with individual plasma sample in 50

µL of Selection Buffer (10 mM Tris, 120 mM NaCl, 5 mM MgCl2, 5 mM KCl) for 15 min at RT.

This solution was then applied to the functionalized GNPs for 15 min at RT. The solution was

centrifuged for 20 min at 3500 g. The supernatant was removed and purified using the

Oligonucleotide Clean-up protocol of the Monarch PCR & DNA Clean-up kit, as described by

NEB and eluted with 400 µL of de-ionised water.

Figure 2: Schematic representation of the application of neomer aptamers to plasma samples.

After this selection, PCR amplification was used to double strand the library (dsDNA) for an

appropriate number of cycles to create a clear band of approximately 5 ng of amplified DNA. All

PCR procedures were carried out according to standard molecular biology protocols and under

the following conditions: 95°C for 5 min, 4 cycles at 95°C for 10 s, 35°C for 15s, 72°C for 30

sec, and then remaining cycles at 95°C for 10 s, 64°C for 15s and 72°C for 30 sec, followed by a

final extension at 72°C for 5 min. Table 2 provides the primer sequences used for all steps

described here.

Table 1: Sequences of primers used to process Neomer libraries for next generation sequencing

analysis.

Full Library Fwd	5' CAA ATA CGT ATG AGG TCG CTC GTT CCC AGA TAC AGA C 3'
Full library rvs	5' TAA TAC GAC TCA CTA TAG GGA TAA TGC TGT CTA CTG 3'
NGS-1A Fwd	5' CCC TAC ACG ACG CTC TTC CGA TCT <u>ATC ACG</u> CAA ATA CGT ATG AGG TCG CTC GTT C 3'
NGS-1A Rvs	5' GGT CAG ACG TGT GCT CTT CCG ATC GGG GCG CCG ATG GTT 3'
NGS-1B Fwd	5' CCC TAC ACG ACG CTC TTC CGA TCT <u>ATC ACG</u> GCG CCA ACA 3'
NGS-1B Rbs	5' GGT CAG ACG TGT GCT CTT CCG ATC GGG TAA TAC GAC TCA CTA TAG GGA TAA TGC TGT CTA CTG 3'

The underlined sequence in Table 1 is a hex code that was used for library parsing from the fasta

file. The sequence shown is only one example, we used 21 different hex codes for this analysis.

We used the same hex code for module A and module B in all cases.

It is important to maintain the average expected copy of each sequence at a level above 100

copies throughout the NGS preparation procedure. To ensure this we performed the

Oligonucleotide Clean-up protocol of the Monarch PCR & DNA Clean-up kit (NEB) on 10 PCR

reaction tubes. The 40 µL volume of elution was used as a template for restriction with KasI

enzyme (NEB) at 37°C for 60 min followed by 20 min at 65°C to obtain two distinct modules (A

and B). The two modules were treated in the same way, but separately for Next Generation

Sequencing (NGS) preparation. The restricted products were diluted 10X prior to next step.

The amplified product from NGS preparation was purified using the Monarch PCR & DNA

Clean-Up kit prior to be sequenced. In addition, we processed a buffer sample containing no

blood in each analysis, as a further test.

All libraries were sequenced using Illumina NovaSeq at the TCAG facility (Hospital for Sick

Children, Toronto, Canada). Fastq files obtained upon sequencing were converted into a Fasta

format, and the copy number of each of the possible 65,536 sequences in each of Module A and

Module B were characterized using a proprietary Python script that we have developed for this

application. The frequency of each Module sequence was determined by dividing copy number

by the total number of reads for that Module. The frequency of each of the 4.29 billion sequences

in the original selected library was then estimated through an outer product calculation of the

Module A and Module B frequencies.

The average frequency for each of these 4.29 billion sequences was determined for the ten high

amyloid samples and the ten low amyloid samples. The standard deviation of each of these

averages was also determined. The average of the low amyloid samples for each sequence was

subtracted from the average for the same sequence across the high amyloid samples. This value

was divided by the average of the standard deviation from both sets of samples to generate a Z

score. The top 10,000 sequences in terms of Z score were identified.

We then identified the top four sequences within these 10,000 based on the separation of all the

ten high samples from all the ten low samples.

We also ran this analysis by subtracting the average of each sequence with the high amyloid

samples from the average of the same sequence averaged across the low amyloid samples. The

top 10,000 sequences based on Z scores was also identified as low amyloid sequences and the

top four identified based on separation of all ten low samples from all ten high samples.

The sequences of these eight Aptamarkers is provided in Table 2. Specific reverse primers were

designed for each of these sequences and tested to ensure that in conjunction with the same

forward primer (GTT CCC AGA TAC AGA C) in each case they specifically amplified the

desired sequence.

Table 2: Sequences of Aptamarkers identified by the Neomer process and specific reverse primer

sequences for their amplification.

Name of the aptamer	Aptamer sequence	Sequence of the specific reverse primer associated
HAM_2753	CCA GAT ACA GAC TCG AGG ACT GAA TCG GAA CCA TCG GCG CCA ACA AGA CAT TCA TAC AGA AAC AGT AGA CAG C	TTT CTG TAT GAA TGT CT
HAM_6700	CCA GAT ACA GAC TCG AGG TAA GAA TGG GAA CCA TCG GCG CCA ACA CAG CAT TCA ATC AGA GAC AGT AGA CAG C	TCT CTG ATT GAA TGC TG
HAM_6968	CCA GAT ACA GAC CAG AGG CGT GAA TTT CAA CCA TCG GCG CCA ACA CCC CAT TCC TGC AGA TAC AGT AGA CAG C	TAT CTG CAG GAA TGG GG

HAM_8505	CCA GAT ACA GAC AGG AGG GCG GAA TTC CAA CCA TCG GCG CCA ACA TTT CAT TCT AAC AGA CAC AGT AGA CAG C	TGT CTG TTA GAA TGA AA
C-LAM_1	CCA GAT ACA GAC TAG AGG TAT GAA TAG AAA CCA TCG GCG CCA ACA ATT CAT TCA TTC AGA TGC AGT AGA CAG C	CAT CTG AAT GAA TGA AT
C-LAM_168	CCA GAT ACA GAC AAG AGG ACC GAA TGT CAA CCA TCG GCG CCA ACA TTA CAT TCA TTC AGA TTC AGT AGA CAG C	AAT CTG AAT GAA TGT AA
C-LAM_262	CCA GAT ACA GAC CAG AGG TTT GAA TTC CAA CCA TCG GCG CCA ACA TTA CAT TCC TCC AGA ATC AGT AGA CAG C	ATT CTG GAG GAA TGT AA
C-LAM_2709	CCA GAT ACA GAC TTG AGG TTC GAA TCT CAA CCA TCG GCG CCA ACA TGA CAT TCC TTC AGA TTC AGT AGA CAG C	AAT CTG AAG GAA TGT CA

Screening of Aptamarkers

Each sample was analyzed in two well qPCR replicates. Following qPCR analysis, the data was

reviewed according to quality control standards with a coefficient of variance of 6 between

replicates, only data passing this standard was retained. The raw fluorescence data was analyzed

to identify the point at which fluorescence increased to six times the base level. The base level

was determined in the first five cycles. The point between the PCR cycles was determined by

linear regression analysis. This provided a Cq value. An efficiency value (E) for each sample was

determined based on identification of the linear portion of the amplification curve above the Cq

value.

The average of all Cq and E values within a given qPCR experiment were calculated. This

average was divided by a fixed value to define a normalization factor for each qPCR run. Both

the Cq and E values were divided by this normalization factor by qPCR set.

The Cq and E values were averaged across replicates and the relative amount of template (RT)

was then determined with the following formula - $1/E^{Cq}$

Each individual RT value was divided by the sum of all eight RT values per sample to define a

proportion of the RT value within each sample (RTp). This value was used for model building.

Dataset Preprocessing

The dataset model comprised 390 samples, with variables for all 8 aptamers and the same 3

clinical variables. Both were preprocessed for zero-mean scaling, to make them suitable for ML

analyses.

Feature Selection Using Default Parameters

For each classification algorithm, a model with default parameters was applied to calculate the

importance of individual features. The algorithms from the scitkit-learn package[15] and others

were used include Logistic Regression, Decision Trees, Random Forests, Gradient Boosting, k-

Nearest Neighbors, Support Vector Machines, Gaussian Naive Bayes, Multi-Layer Perceptron,

XGBoost[16], Ridge Classifier, and ExtraTrees. Based on the importance scores obtained, features

were ranked. In a sequential approach, the least significant features were excluded, thus

generating reduced training datasets.

Hyperparameter Tuning

For each iteration of feature selection, hyperparameter tuning was conducted. A predefined

dictionary of hyperparameter grids was set for each algorithm under evaluation. The

GridSearchCV technique, complemented by a 5-fold cross-validation, was used to pinpoint the

optimal hyperparameters for each model, with accuracy serving as the optimization criterion.

Model Evaluation

Models were subsequently trained on the reduced datasets obtained post-feature selection.

During each model iteration, evaluative metrics such as accuracy, sensitivity, specificity, and

AUROC were gauged.

Results

The ssDNA Neomer library used in our selection was a 16-base random sequence interspersed

with fixed sequences. This library was designed to optimise secondary structure diversity

through the placement of regions of random sequence and by the lack of capacity of the fixed

sequences to hybridize with each other (Figure 1). This means that structural diversity is entirely

driven by the random nucleotides.

During NGS preparation, it was crucial to maintain an average expected sequence copy above

100. The amplified products for NGS were purified before sequencing. A buffer sample was

incorporated in each analysis as a control. Following sequencing, a proprietary Python script was

employed to determine the frequency of every sequence in Modules A and B. The frequency of

each of the 4.29 billion sequences in the selected library was deduced through an outer product

calculation.

From the analysis, we discerned the average frequency for all sequences across ten high and low

amyloid samples. Z scores were then derived by considering the difference in averages and

standard deviations in these sample sets. The top 10,000 sequences based on Z scores were

identified and further refined to the top four sequences offering the best separation across sample

sets when performing contrasts between high and low brain amyloid, and low and high brain

amyloid deposition (HAM and LAM aptamers).

Figure 3: The distribution of Z and fold values for a) the high amyloid versus low amyloid

contrast and b) the low amyloid versus high amyloid contrast. The fold values are simply the

difference between the high and low average minus unity. The low versus high graph is presented

with the opposite sign of the high versus low amyloid contrast.

It is interesting to note that the fold differences were higher with the high versus low amyloid

contrast as compared to the low versus high contrast. The higher fold value for the high amyloid

aptamers may indicate that these will be more predictive than the low amyloid ones.

Figure 4: Comparative analysis illustrating the stratification of samples utilizing the top 4 of

high-amyloid and low-amyloid binding aptamers. Each point corresponds to an individual

sample.

In the qPCR analysis of Aptamarkers, we established a strict quality threshold with a coefficient

of variance of 6 between replicates. Using the fluorescence data, we computed the Cq and

efficiency values (E) for each sample, subsequently determining a normalization factor. Relative

amounts of template (RT) were calculated, and from these, proportions of RT values per sample

(RTp) were derived, forming the basis for model building. We used all eight Aptamarkers as

variables and the clinical variables sex, clinical status (mild cognitive impairment (MCI) or

cognitively normal (CN)), and age. We did not include ApoE genetic status in our primary model

based on the understanding that this variable is not commonly applied in clinical practice in

Europe.

The dataset was preprocessed to zero-mean scaling, catering to ML applications. Feature

selection employed default parameters from various algorithms, sequentially excluding less

significant features. With each iteration, hyperparameter tuning was performed using the

GridSearchCV technique and a 5-fold cross-validation. The models, trained on the reduced

datasets, were evaluated based on multiple performance metrics. Table 4 provides a summary of

all algorithms that returned perfect predictive results on the test set.

Table 4: Top models based on analysis of training set samples using a neomer approach.

Algorithm	Variables Excluded	Accuracy	Sensitivity	Specificity	AUROC
DecisionTreeClassifier	Rvs HAM6700, Clinical Classification, Sex	1	1	1	1
ExtraTreesClassifier	Clinical Classification	1	1	1	1
ExtraTreesClassifier	Sex, Clinical Classification	1	1	1	1
ExtraTreesClassifier	Rvs c-LAM262, Sex, Clinical Classification	1	1	1	1
RandomForestClassifier		1	1	1	1
RandomForestClassifier	Sex	1	1	1	1
RandomForestClassifier	Clinical Classification, Sex	1	1	1	1
RandomForestClassifier	Rvs HAM6700, Clinical Classification, Sex	1	1	1	1
XGBClassifier		1	1	1	1
XGBClassifier	Sex	1	1	1	1
XGBClassifier	Rvs HAM6700, Sex	1	1	1	1
XGBClassifier	Rvs c-LAM262, Rvs HAM6700, Sex	1	1	1	1

The ML models that exhibited the highest fit with the observed data are all similar in nature

basically being based on multiple decision trees. We chose the Extra Trees Classifier model for

application to the test set of data given that this model performed consistently well on subsets of

the data prior to the completion of the 391 samples.

This model performed best on the test set when clinical classification and sex were not included

with a sensitivity of 0.74, specificity of 0.76, overall accuracy of 0.75 and AUROC of 0.78.

The inclusion of ApoE status resulted in an increase in sensitivity to 0.78, a reduction in

specificity to 0.72 and a maintenance of overall accuracy of 0.75. The AUROC was also

unchanged at 0.78. We interpret this result as meaning that the Aptamarkers are implicitly

providing the predictive power of the ApoE allelic status. Figure 5 provides a description of the

relative weight of each of the variables in the model.

Figure 5: Feature importance attributable to each variable in the predictive model.

It is intriguing that the Aptamarkers all exhibit relatively similar predictive capacity with each

individual Aptamarker contributing about half the value of age as a variable. The sum of all the

Aptamarker values represents more than 75% of the predictive capacity of the model. The

receiver operator response analysis is provided in Figure 6.

Figure 6: Receiver operator response

The area under the curve of the receiver operator AUROC analysis provides a description of the

expected robustness of the test. In this case, that value is 0.78.

Conclusions

The application of the Neomer library approach addresses many limitations of the traditional SELEX method and results in the identification of Aptamarkers with high predictive capacity. The Aptamarker approach clearly results in high predictive capacity for brain amyloid deposition from plasma analysis.

The agnostic nature of this approach means that this should be applicable to any disease.

List of Abbreviations

AIBL - Australian imaging, biomarker and lifestyle

AUROC – Area under receiver operator curve

CN – Cognitively normal

E – Efficiency value

GNPs - Gold nanoparticles

LAM - Low brain amyloid deposition

HAM - High brain amyloid deposition

IDT - Integrated DNA technologies

MCI – Mild cognitive impairment

ML – Machine learning

NGS – Next generation sequencing analysis

NT - Nucleotide

PCR – Polymerase chain reaction

PET - Positron emission tomography

qPCR – Quantitative polymerase chain reaction

RT – Relative amount of template

SELEX - Systematic evolution of ligands by exponential enrichment

Acknowledgments

Ethics

All data utilized in this study have been anonymized at the source. We did not directly collect this information; therefore, the personal data we accessed cannot be used to identify specific individuals.

Availability of Data

The data underlying the figures and tables presented in this study are available at the following DOI: X .

Competing Interests

The research was funded by NeoVentures Biotechnology Ltd., NeoNeuro and the Alzheimer's Drug Discovery Foundation. The authors, including Cathal Meehan, Soizic Lecocq, and Gregory Penner, are paid employees of NeoNeuro.

Funding

400 The research was funded by NeoVentures Biotechnology Ltd., NeoNeuro and the Alzheimer's

401 Drug Discovery Foundation.

403 Author's contributions

Cathal Meehan: Responsible for designing the propriety python script, statistical methods, and

machine learning analysis. Assisted in writing and revising the manuscript.

Soizic Lecocq: Led the blood sample management, selection, qPCR analysis, aptamer design,

and antisense design. Assisted in writing and revising the manuscript.

Gregory Penner: Conceived and designed the experiments, coordinating research in both wet and

dry lab activities. Assisted in writing and revising the manuscript.

All authors were involved in reviewing the manuscript and approved the final version.

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Note: Patent applications have been submitted globally describing both the Neomer

application as well as the Aptamarker approach.

Figure 1: Predicted secondary structure of fixed sequences in Neomer library.

Figure 2: Schematic overview of Neomer library analysis.

Legend: A, processing of library for NGS analysis. B, Outer product matrix of all 4.29 billion possible sequences. C, statistical analysis of aptamer frequencies across samples. The distribution of the fixed sequences and random sequences is more complex than shown here but is clearly described in the sequence provided elsewhere.

Figure 3: a and b for the high versus low and low versus high amyloid contrasts respectively.

A(

b)

Figure 4: Separation of high and low samples by the four best Aptamarkers for a) high amyloid and b) low amyloid.

Figure 5: Weight attributable to each variable in predictive model.

Figure 6: Receiver operator response