LRP1 and p75 Neurotrophin Receptor Collaborate to Trigger Pro-inflammatory Cell-signaling in Response to Extracellular Tau

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Abstract

In Alzheimer's Disease (AD) and other neurodegenerative diseases, microtubule-associated

protein Tau forms abnormal intracellular aggregates. Mechanisms by which Tau may promote

AD progression remain incompletely understood. Low Density Lipoprotein Receptor-related

Protein-1 (LRP1) mediates the uptake of Tau, which is released into the extracellular spaces in

the brain and may thereby promote seeding of Tau aggregates in new cells. Herein, we

demonstrate that in macrophages, microglia, and astrocytes, extracellular Tau induces an LRP1-

dependent pro-inflammatory response, characterized by NFκB activation and expression of

diverse pro-inflammatory cytokines. Unlike other LRP1 ligands that elicit LRP1-dependent cell-

signaling events, the response to Tau occurs independently of the NMDA Receptor. Instead,

Tau-activated cell-signaling requires the low affinity Neurotrophin Receptor (p75^{NTR}). The role of

p75^{NTR} in Tau-elicited cell-signaling was demonstrated by gene-silencing and/or with TAT-Pep5,

in macrophages, astrocytes, and PC12 cells. Because RhoA is activated downstream of p75^{NTR},

we studied two Rho kinase pharmacologic inhibitors, Y-27632 and Fasudil Hydrochloride, and

demonstrated that both reagents block NFκB activation and cytokine expression in response to

Tau. These results define Tau and its receptor assembly, which includes LRP1 and p75^{NTR}, as a

novel biochemical system that may regulate neuro-inflammation in AD and other

neurodegenerative diseases. The ability of Rho kinase inhibitors to antagonize the Tau-

LRP1/p75^{NTR} pathway may represent a novel mechanism by which these agents demonstrate

efficacy in Alzheimer's Disease.

Key words: Tau, LRP1, p75 neurotrophin receptor, neuro-inflammation, Rho kinase

Significance Statement

In Alzheimer's Disease and other neurodegenerative diseases, microtubule-associated protein Tau forms abnormal intracellular aggregates that contribute to disease progression. When Tau is released by cells, it binds to the transmembrane receptor, LRP1, which is expressed by diverse cells in the CNS. LRP1 has a unique ability to couple endocytosis with activation of cell-signaling. We demonstrated that Tau-binding to LRP1 activates pro-inflammatory responses in macrophages, microglia, and astrocytes. p75 Neurotrophin Receptor served as an essential co-receptor. Targeting Rho kinase, downstream of p75^{NTR}, blocked Tau-initiated pro-inflammatory responses. These results define a novel pathway by which Tau may regulate neuro-inflammation in Alzheimer's Disease and other neurodegenerative diseases.

Introduction

Microtubule-associated protein Tau is an intracellular protein that forms abnormal oligomers and fibrils in Alzheimer's Disease (AD) and in neurodegenerative diseases called Tauopathies (Lee et al., 2001; Congdon and Sigurdsson, 2018; Gao et al., 2018). Tau aggregation is regulated by gene polymorphisms, alternative splicing, phosphorylation, and other post-translational modifications. The relationship between Tau aggregation and the pathological changes that occur in AD remains incompletely understood; Tau may contribute to AD progression in the absence of detectable aggregates (Congdon and Sigurdsson, 2018; Gao et al., 2018).

Tau is released by neurons and other cells in the CNS, in extracellular vesicles (EVs) and independently of EVs, allowing for transfer of Tau between cells (Saman et al., 2012; Pooler et al., 2013; Asai et al., 2015; Evans et al., 2018; Merezhko et al., 2018; Brunello et al., 2020). Because Tau transfer between cells in the CNS may play a role in AD progression, identification of Low Density Lipoprotein Receptor-related Protein-1 (LRP1) as an endocytic receptor for extracellular Tau is highly significant (Rauch et al., 2020; Cooper et al., 2021).

LRP1 is a 600-kDa, type 1 transmembrane receptor for over 100 structurally diverse ligands, including apolipoprotein E, α_2-macroglobulin (α_2M), shed non-pathogenic cellular prion protein (S-PrP^C), and proteins released from injured and dying cells (Strickland et al., 2002; Fernandez-Castaneda et al., 2013; Gonias and Campana, 2014; Mantuano et al., 2020). LRP1 ligands are internalized in clathrin-coated pits and usually transferred to lysosomes for degradation. A subset of LRP1 ligands trigger cell-signaling via mechanisms that require co-receptors, such as the NMDA Receptor (NMDA-R), Trk, p75^{NTR}, and/or PrP^C (Backsai et al., 2000; May et al., 2004; Martin et al., 2008; Shi et al., 2009; Mantuano et al., 2013; Stiles et al., 2013; Gonias and Campana, 2014; Krogh et al., 2014; Mattei et al., 2020). Assembly of different LRP1 co-receptors in response to different ligands may explain why the cell-signaling responses elicited by various LRP1 ligands are non-uniform (Gonias and Campana, 2014). LRP1 is expressed by neurons,

astrocytes, oligodendrocytes, and microglia in the CNS and by macrophages throughout the body

(Gonias and Campana, 2014; Auderset et al., 2016).

Binding of Tau to LRP1 is mediated by the Tau microtubule-binding domain (Rauch et al.,

2020; Cooper et al., 2021). The Tau alternative splicing variant with four microtubule-binding

repeats (2N4R) binds to LRP1 with higher affinity than the variant with three. Tau phosphorylation

events, which exacerbate Tau aggregation (Alonso et al., 2001; Augustinack et al., 2002),

apparently decrease LRP1-binding affinity (Cooper et al., 2021). Thus, LRP1-mediated uptake

of extracellular Tau may be a physiologic process; however, Tau in extracts from Alzheimer's

Disease brains partially escapes lysosomal degradation, seeding new intracellular aggregates

(Rauch et al., 2020; Cooper et al., 2021).

Specific LRP1 ligands, including tissue-type plasminogen activator (tPA), α_2M, and S-PrP^C

activate anti-inflammatory cell-signaling responses in macrophages by a pathway that requires

the NMDA-R (Mantuano et al., 2017, 2022a). Determining whether Tau initiates LRP1-activated

cell-signaling is an important question. There is considerable evidence that Tau accumulation in

the CNS is pro-inflammatory (Yoshiyama et al., 2007; Nilson et al., 2017). In P301S-Tau

transgenic mice, which express a mutated form of human Tau that forms intracellular filamentous

lesions, microglial activation and neuro-inflammation precede formation of detectable Tau

aggregates (Yoshiyama et al., 2007). Anti-inflammatory treatment blocks disease progression in

P301S-Tau transgenic mice. Although activated microglia demonstrate some activities that are

beneficial in AD, excessive microglial activation and chronic neuro-inflammation may promote AD

progression (Akiyama et al., 2000; Heneka et al., 2015; Hong et al., 2016; Ransohoff, 2016).

In this investigation, we studied the 2N4R variant of Tau. Our results show that extracellular

Tau elicits pro-inflammatory responses in macrophages, microglia, and astrocytes. These

responses are entirely dependent on LRP1. Unlike anti-inflammatory LRP1 ligands, the cell-

signaling pathway triggered by Tau did not require the NMDA-R. Instead, p75 Neurotrophin

Receptor (p75^{NTR}) functioned in concert with LRP1 to induce expression of pro-inflammatory

mediators in Tau-treated cells. Because Rho is activated downstream of p75[NTR] (Yamashita et

al., 1999), we tested Rho-associated kinase (ROCK) inhibitors and showed that these reagents

inhibit Tau-mediated release of pro-inflammatory cytokines. We conclude that Tau, LRP1, and

p75[NTR] constitute a novel system for regulating neuro-inflammation in AD and other

neurodegenerative diseases.

Materials and Methods

Proteins and reagents

Recombinant Human 2N4R Tau was from R&D Systems. Lipopolysaccharide (LPS) serotype 055:B5 from *E. coli* was from Sigma-Aldrich. The NMDA-R inhibitors, dizocilpine (MK-801) and dextromethorphan hydrobromide (DXM), were from Cayman Chemicals and Abcam, respectively. Y-27632 was from Cell Signaling Technology. Fasudil Hydrochloride was from Sigma-Aldrich. The p75[NTR]-specific cell-signaling inhibitor, TAT-Pep5, was from Sigma-Aldrich. $\alpha_2 M$ was purified from human plasma and activated for binding to LRP1 by reaction with methylamine, as previously described (Imber and Pizzo, 1981). Recombinant S-PrP^C (residues 23-231 from mouse PrP^C) was expressed and purified as previously described (Mantuano et al., 2020) and kindly provided by Dr. Christina Sigurdson (University of California San Diego, La Jolla, CA, USA). All purified protein preparations were cycled through high-capacity endotoxin removal columns and subjected to experiments, as described by Brifault et al. (2017), to confirm that endotoxin was not present.

Experimental mice

Wild-type (WT) C57BL/6J mice were obtained from Jackson Laboratory. Mice in which macrophages are LRP1-deficient were obtained by breeding *Lrp1*$^{flox/flox}$ mice with mice express Cre recombinase under the control of the lysozyme-M (LysM-Cre) promoter, in the C57BL/6J background, as previously described (Overton et al., 2007; Staudt et al., 2013; Mantuano et al., 2016). To generate mice in which macrophages are deficient in the essential NMDA-R GluN1 subunit, *Grin1*$^{flox/flox}$ mice were bred with mice that express Cre recombinase under the control of the LysM-Cre promoter in the C57BL/6J background (Mantuano et al., 2023). All research protocols involving mice were approved by the University of California San Diego Institutional Animal Care and Use Committee.

Cell culture model systems

Bone-marrow-derived macrophages (BMDMs) were harvested from 16-week-old mice, as previously described (Mantuano et al., 2016). Briefly, bone marrow cells were flushed from mouse femurs, plated in non-tissue culture-treated dishes, and cultured in DMEM/F-12 medium containing 10% FBS and 20 ng/mL mouse macrophage colony-stimulating factor (BioLegend) for 7 days. Non-adherent cells were removed by washing. Adherent cells included >95% BMDMs, as determined by F4/80 and CD11b immunoreactivity.

Microglia were isolated from C57BL/6J mouse pups, as previously described (Ni and Aschner, 2010; Pontecorvi et al., 2019). In brief, brains were harvested from postnatal day 1–6 mice. The cortices were dissected from the forebrain, and the surrounding meninges were removed. Intact cortices were mechanically and enzymatically dissociated using the Neural Tissue Dissociation Kit (Miltenyi Biotec). Mixed glial cell cultures were established in DMEM/F-12 supplemented with GlutaMAX, 10% FBS, and 1× Gibco Antibiotic-Antimycotic (Thermo Fisher Scientific). After culturing for 10-14 days, microglia were dissociated by shaking the mixed cultures at 200 rpm for 30 min at 37°C. The floating cells were collected by centrifugation (5 min, 600×g) and re-plated at 3×10^5 cells/well. Oligodendrocytes were removed by an additional 6 h of shaking. The remaining cells, which included mainly astrocytes, were collected by trypsinization and re-plated at 4×10^5 cells/well. Experiments were performed within 24 h of completing the isolation procedure for microglia and within 48 h of completing the isolation procedure for astrocytes. Microglial cell culture purity was >95% homogeneous as determined by immuno-fluorescence (IF) microscopy for Iba1 (positive), glial fibrillary acidic protein (GFAP) (negative), and OLIG1 (negative). Astrocyte cultures were >95% GFAP-immunopositive.

Rat PC12 cells were from the ATCC (CRL-1721) and subjected to quality control tests by the ATCC. PC12 cells were cultured in DMEM, high glucose containing 10% heat-inactivated FBS, 5% heat-inactivated horse serum (Thermo Fisher Scientific), in plates that were pre-coated with

0.01 mg/mL type IV collagen (Sigma-Aldrich). PC12 cells were passaged no more than eight

times.

Gene silencing

Microglia were transfected with 10 nm Silencer Select Predesigned *Lrp1* (siRNA ID:s69313), or

Silencer Select Negative Control No. 1 siRNA (Ambion), using Lipofectamine RNAiMAX

(Invitrogen, Thermo Fisher Scientific). Experiments were performed 24 h after transfection. Gene

silencing was confirmed through immunoblot analysis using an anti-LRP1 specific primary

antibody (Abcam, catalog #ab92544).

PC12 cells were transfected with 300 nM siRNA by electroporation using the Cell Line

Nucleofector Kit V (Lonza), following the manufacturer's instructions.   Rat-specific ON-

TARGETplus SMARTpool siRNA, targeting *Ngfr*, and pooled non-targeting control (NTC) siRNA

were from Horizon Discovery.   Experiments were performed 48 h after transfection. Gene

silencing was confirmed through immunoblot analysis using an anti-NGFR specific primary

antibody (Invitrogen, Thermo Fisher Scientific, catalog #MA5-31968).

mRNA expression studies

BMDMs, microglia, and astrocytes were transferred to serum-free medium (SFM) for 1 h. Some

cultures were pre-treated with MK-801 (1 µM), DXM (10 µM), Y-27632 (10 µM), Fasudil (10 µM)

or TAT-Pep5 (0.5 µM) for the final 30 min of the 1 h pre-incubation. The cells then were treated

for 6 h with Tau, at the indicated concentrations, LPS (0.1 µg/ml), or vehicle (20 mM sodium

phosphate, 150 mM NaCl, pH 7.4, PBS) in the presence of inhibitors, as indicated. RNA was

isolated using the NucleoSpin RNA kit (Macherey-Nagel) and reverse-transcribed using the

iScript cDNA synthesis kit (Bio-Rad). qPCR was performed using TaqMan gene expression

products (Thermo Fisher Scientific).   Primer-probe sets were as follows: *Gapdh*

(Mm99999915_g1); *Tnf* (Mm00443258_m1); *Il6* (Mm00446190_m1); *Ccl3* (Mm00441259_g1);

and *Cxcl2* (Mm00436450_m1). The relative change in mRNA expression was calculated using

the $2^{\Delta\Delta Ct}$ method with *Gapdh* mRNA as a normalizer.

Cell signaling/immunoblotting experiments

BMDMs, microglia, and astrocytes were transferred to SFM for 1 h and then treated for 1 h with

Tau or vehicle as noted. Some cultures were pre-treated with MK-801 (1 µM), DXM (10 µM), Y-

27632 (10 µM), Fasudil (10 µM) or TAT-Pep5 (0.5 µM) for the final 30 min of the 1 h pre-

incubation, as noted.   PC12 cells were cultured in serum-containing medium until ~70%

confluent.   The cells were then transferred into SFM for 2 h before treatment with various

reagents.

Extracts of BMDMs, microglia, astrocytes, and PC12 cells were prepared in RIPA buffer

(Sigma-Aldrich) supplemented with protease inhibitors and phosphatase inhibitors (Thermo

Fisher Scientific). Equal amounts of cellular protein were subjected to SDS-PAGE and electro-

transferred to PVDF membranes. The membranes were blocked with 5% nonfat dried milk and

then incubated with primary antibodies from Cell Signaling Technology that recognize: phospho-

ERK1/2 (catalog #9102); total ERK1/2 (catalog #4370); phospho-IκBα (catalog #2859); total IκBα

(catalog #9242); and β-actin (catalog #3700). The membranes were washed and incubated with

horseradish peroxidase-conjugated secondary antibody from Jackson ImmunoResearch (anti-

rabbit: catalog #111-035-003; anti-mouse: catalog #115-035-003). Immunoblots were developed

using Thermo Scientific SuperSignal West Pico PLUS Chemiluminescent Substrate (Thermo

Fisher Scientific) and imaged using the Azure Biosystems c300 digital system.   Image

processing/densitometry was performed using Adobe Photoshop 24.7. When immunoblots were

re-probed, phospho-IκBα was detected first, followed by total IκBα, then p-ERK, total ERK1/2,

and finally, β-actin.   Presented results are representative of at least three independent

experiments.

Proteome profiler mouse cytokine arrays

BMDMs and microglia were transferred to SFM for 30 min and then treated with Tau or vehicle

for 6 h, as indicated. Conditioned medium (CM) was collected and clarified by centrifugation. An

equivalent amount of CM (1.0 ml for each condition) was incubated with each nitrocellulose

membrane provided in the Proteome Profiler Mouse XL Cytokine Array Kit (R&D Systems).

Membranes were developed following the instructions of the manufacturer.

Statistical analysis

Statistical analysis was performed using GraphPad Prism 9.5.1. All results are expressed as the

mean ± SEM. Each replicate was performed using a different BMDM, microglia, astrocyte, or

PC12 cell preparation. Comparisons between two groups were performed using two-tailed

unpaired t-tests. To compare more than two groups, we performed a one-way ANOVA followed

by post-hoc Dunnett's multiple comparison test. When evaluating the effects of two independent

factors, we performed a two-way ANOVA followed by Šidák's multiple comparisons test. *p*-values

of *$p<0.05$, **$p<0.01$, ***$p<0.001$, and ****$p<0.0001$ were considered statistically significant.

Results

Tau elicits an LRP1-dependent pro-inflammatory response in macrophages

BMDMs were treated with increasing concentrations of Tau for 6 h. RNA was harvested and RT-qPCR was performed to examine mRNA levels for the genes encoding various cytokines. Tau, at concentrations greater than or equal to 5 nM, significantly increased expression of the mRNAs encoding TNFα (*Tnf*), interleukin-6/IL-6 (*Il6*), CCL3/MIP-1α (*Ccl3*), and CXCL2/ MIP-2α (*Cxcl2*) (Fig. 1*A*).

IκBα phosphorylation is a key step in the activation of NFκB. Phosphorylated IκBα is ubiquitinated and degraded, allowing NFκB to translocate to the nucleus and bind DNA (Karin and Ben-Neriah, 2000; Viatour et al., 2005). NFκB activation promotes expression of pro-inflammatory cytokines, such as TNFα and IL-6. When BMDMs were treated for 1 h with Tau, at concentrations of 5 nM or greater, IκBα was phosphorylated and a decrease in the total abundance of IκBα was observed (Fig 1*B*). ERK1/2 also was phosphorylated in Tau-treated BMDMs. ERK1/2 phosphorylation is a commonly observed process in LRP1-initiated cell-signaling responses (Gonias and Campana, 2014).

To test whether LRP1 is necessary for Tau-induced cytokine expression, we harvested BMDMs from mice in which *Lrp1* is deleted under the control of the LysM promoter (Overton et al., 2007; Staudt et al., 2013; Mantuano et al., 2016). LRP1 protein is decreased by greater than 95% in these cells (Staudt et al., 2013). In LRP1-expressing control cells, which carry two floxed *Lrp1* genes but not LysM-Cre, 20 nM Tau significantly increased expression of the mRNAs encoding TNFα, IL-6, CCL3, and CXCL2, as anticipated (Fig. 2A). In LRP1-deficient BMDMs, 20 nM Tau failed to induce expression of these cytokines.

To examine cytokine expression at the protein level, in an unbiased manner, we treated LRP1-expressing and -deficient BMDMs with 20 nM Tau for 6 h. Conditioned medium (CM) was harvested and subjected to array analysis to detect secreted cytokines. In CM from Tau-treated

LRP1-expressing cells, we observed TNFα and IL-6, as anticipated based on our RT-qPCR

results (Fig. 2*B*). Other cytokines that were increased in CM from Tau-treated LRP1-expressing

cells included but were not limited to CXCL2/MIP2, CXCL1/KC, CXCL10/ IP10, CCL3/CCL4

(MIP1α/β), and IL-12. By contrast, CM from Tau-treated LRP1-deficient BMDMs was entirely

lacking in the Tau-elicited cytokines detected by this array. In separate studies, Tau failed to

induce phosphorylation of IκBα in LRP1-deficient BMDMs, even when the Tau concentration was

increased to 20 nM (Fig. 2*C*). Collectively, these results demonstrate that LRP1 is necessary for

Tau-induced pro-inflammatory responses in BMDMs.

The NMDA-R is not required for macrophages to respond to Tau

tPA, α_2M, and S-PrP^C are examples of LRP1 ligands that activate cell-signaling via pathways that

require the NMDA-R (Backsai et al., 2000; Martin et L., 2008; Mantuano et al., 2017; Mantuano

et al., 2020). To test whether the NMDA-R is necessary for Tau-elicited responses in BMDMs,

first we treated cells with two pharmacologic inhibitors of the NMDA-R. Neither MK-801 nor DXM

inhibited the effects of Tau on expression of the mRNAs encoding TNFα or IL-6. (Fig. 3*A*).

Similarly, Tau-induced IκBα phosphorylation was unchanged in the presence of MK-801 or DXM

(Fig. 3*B*).

Next, we isolated NMDA-R-deficient BMDMs from mice in which the gene encoding the

essential GluN1 subunit (*Grin1*) is deleted under the control of the LysM promoter (Mantuano et

al., 2023). BMDMs from these mice fail to respond to S-PrP^C (Mantuano et al., 2023). However,

as shown in Fig. 3*C*, 20 nM Tau significantly increased expression of the mRNAs encoding TNFα,

IL-6, CCL3, and CXCL2 in NMDA-R-deficient BMDMs. Furthermore, Tau (10 nM and 20 nM)

caused IκBα phosphorylation in NMDA-R-deficient BMDMs, together with the concomitant

decrease in total abundance of IκBα (Fig. 3*D*). Taken together, these results demonstrate that

Tau-activated cell-signaling in BMDMs occurs independently of the NMDA-R.

Tau induces LRP1-dependent pro-inflammatory responses in microglia and astrocytes

Microglia isolated from mouse pups were treated with 20 nM Tau or vehicle for 6 h. CM was

harvested and subjected to cytokine array analysis (Fig. 4*A*). Multiple cytokines were detected,

in a pattern that overlapped with those detected in Tau-treated BMDMs, including TNFα, IL-6,

CCL3/CCL4, and CXCL2. To validate the results of the microarray analysis and test the role of

the NMDA-R in Tau-elicited cytokine expression in microglia, we performed RT-qPCR studies.

Tau (20 nM) increased expression of the mRNAs encoding TNFα, IL-6, CCL3, and CXCL2 in

microglia (Fig. 4*B*). The increases in mRNA expression were not altered by the NMDA-R

inhibitors, MK-801 and DXM.

ERK1/2 was activated in microglia treated with 20 nM Tau for 1 h (Fig. 4*C*). In the same

cells, IκBα was phosphorylated and this event was accompanied by a decrease in the total

abundance of IκBα. These cell-signaling events were not inhibited by MK-801 and DXM,

confirming that the NMDA-R does is not required for the response to Tau in microglia.

To test the role of LRP1 as a mediator of the Tau response in microglia, we silenced

expression of *Lrp1* using siRNA. The level of LRP1 was substantially decreased at the protein

level, compared with cells transfected with NTC siRNA (Fig. 4*D*). Tau (20 nM) failed to activate

ERK1/2 in microglia in which *Lrp1* was silenced.

In cultured mouse astrocytes, Tau (20 nM) induced expression of the mRNAs encoding

TNFα, IL-6, CCL3, and CXCL2 (Fig. 5*A*). The response to Tau in astrocytes was not inhibited by

MK-801 or DXM. Tau also caused IκBα phosphorylation in astrocytes (Fig. 5*B*). This response

was not inhibited by MK-801.

p75^{NTR} is essential for Tau-activated LRP1 cell-signaling

In neuron-like cell lines, p75^{NTR} serves as an essential LRP1 co-receptor and alternative to the

NMDA-R, in mediating cell-signaling in response to the LRP1 ligand, myelin-associated

glycoprotein (MAG) (Stiles et al., 2013). When LRP1-initiated cell-signaling involves p75^{NTR}, as

opposed to the NMDA-R, the cell-signaling factors activated are distinct and include RhoA and

Rho-associated kinase-1/2 (Yamashita et al., 1999; Mantuano et al., 2013; Stiles et al., 2013).

To test whether p75^{NTR} serves as an LRP1 co-receptor for pro-inflammatory Tau-signaling, first

we studied PC12 cells. As a control, we studied the anti-inflammatory LRP1 ligand, S-PrP^C

(Mantuano et al., 2020).

Tau (20 nM) and S-PrP^C (40 nM) both activated ERK1/2 in PC12 cells (Fig. 6*A*). The

response to S-PrP^C was inhibited by MK-801 and DXM as anticipated because the NMDA-R

serves as an essential co-receptor for LRP1-dependent cell-signaling triggered by S-PrP^C

(Mantuano et al., 2020). MK-801 and DXM had no effect on Tau-induced ERK1/2 phosphorylation

in PC12 cells.

Next, we silenced the gene encoding p75^{NTR} (*Ngfr*) in PC12 cells, using siRNA. Gene

silencing decreased p75^{NTR} protein to nearly undetectable levels, as determined by immunoblot

analysis (Fig. 6*B*). In PC12 cells in which *Ngfr* was silenced, 20 nM Tau failed to activate ERK1/2.

By contrast, the NMDA-R-dependent activator of LRP1 signaling, α$_2$M, retained its ability to

activate ERK1/2.

Because p75^{NTR} has been identified in macrophages (Barouch et al., 2001; Caroleo et al.,

2001; Samah et al., 2008; Meeker et al., 2015; Yu et al., 2022), we tested whether the p75^{NTR}-

specific inhibitor, TAT-Pep5 (Yamashita and Tohyama, 2003), inhibits Tau-elicited responses in

BMDMs. Fig. 6*C* shows that 0.5 µM TAT-Pep5 blocked IκBα phosphorylation in response to Tau

in BMDMs. Next, BMDMs were pre-treated with Tau in the presence or absence of TAT-Pep5

(0.5 µM) for 6 h. Fig. 6*D* shows that Tau induced expression of the mRNAs encoding TNFα, IL-

6, CCL3, and CXCL2 and the response to Tau was inhibited by TAT-Pep5. TAT-Pep5 also

blocked expression of the mRNAs encoding TNFα, IL-6, CCL3, and CXCL2 in astrocytes (Fig.

6*E*).

ROCK inhibitors block the pro-inflammatory effects of Tau

In preclinical animal model systems, the ROCK inhibitor, Fasudil, demonstrates efficacy in inhibiting or reversing many pathological processes associated with AD (Ballard et al., 2020). Amongst the most important activities of ROCK inhibitors is the capacity to antagonize inflammatory responses in a variety of contexts (Ding et al., 2011; McGown et al., 2011; Zhang et al., 2013; Liu et al., 2014; Guo et al., 2020). Because RhoA is a well described effector of p75[NTR]-activated cell-signaling (Yamashita et al., 1999), we tested whether the ROCK inhibitors, Fasudil and Y-27632, regulate pro-inflammatory responses elicited by Tau in BMDMs.

First, BMDMs were pre-treated with Y-27632 (10 μM) or Fasudil (10 μM) and then with 20 nM Tau for 1 h. Both ROCK inhibitors blocked ERK1/2 phosphorylation and IκBα phosphorylation in response to Tau (Fig. 7*A*). In BMDMs treated with 20 nM Tau for 6 h, Y-27632 and Fasudil significantly inhibited Tau-induced increases in the mRNAs encoding TNFα, CCL3, and CXCL2 (Fig. 7*B*). Fasudil also blocked IκBα phosphorylation in microglia (Fig. 7*C*) and incompletely but significantly inhibited Tau-induced TNFα expression in microglia (Fig. 7*D*). In astrocytes, IκBα phosphorylation in response to Tau and Tau-induced expression of the mRNAs encoding TNFα, IL-6, CCL3, and CXCL2 was entirely inhibited by Fasudil (Fig. 7*E-D*). Taken together, these results suggest that ROCK functions as a targetable, downstream effector of the Tau-LRP1/p75[NTR] pathway.

Discussion

LRP1 functions in the clearance of proteins from extracellular spaces, in lipoprotein uptake, as a regulator of the plasma membrane proteome, in myelin phagocytosis, in efferocytosis, and as a direct activator of cell-signaling (Strickland et al., 2002; Gonias and Campana, 2014). In AD, LRP1 may regulate disease progression by functioning as a receptor for β-amyloid peptide (Aβ) (Kanekiyo et al., 2013). LRP1 binds secreted forms of amyloid precursor protein (APP) and may regulate processing of cellular APP so that the amount of Aβ generated and secreted by cells is altered (Kounnas et al., 1995; Ulery et al., 2000). Isoforms of apolipoprotein E bind to LRP1 (Liu et al., 2007). Furthermore, LRP1 has been implicated in transport of Aβ across the blood-brain barrier (Deane et al., 2009).

The identification of LRP1 as a Tau receptor raises new questions regarding the activity of LRP1 in AD and in Tauopathies (Rauch et al., 2020; Cooper et al., 2021). Because binding of Tau to LRP1 does not require post-translational modification events such as phosphorylation or aggregation (Cooper et al., 2021), LRP1 may play an important physiologic role, removing low levels of Tau form the extracellular spaces in the CNS and delivering the internalized Tau to lysosomes for degradation. However, because Tau may partially escape endosomal transport and enter the cytoplasm, when the amount of Tau in the extracellular spaces in the CNS increases, LRP1 may be involved in propagation of Tau lesions in new cells (Rauch et al., 2020; Cooper et al., 2021).

Because LRP1 is known to couple ligand internalization with activation of cell-signaling (Gonias and Campana, 2014), our goal was to test whether the Tau-LRP1 interaction affects cell physiology in a manner that may play a role in progression of AD and other forms of neurodegeneration. We have shown that, in diverse cells, including macrophages, microglia, and astrocytes, the interaction of 2N4R Tau with LRP1 induces robustly pro-inflammatory responses. The responses occur independently of the NMDA-R, which has been implicated in other LRP1

cell-signaling events (Backsai et al., 2000; Martin et L., 2008; Mantuano et al., 2017; Mantuano

et al., 2020) and instead, appears to be dependent on p75[NTR]. The dependency on p75[NTR] is

reminiscent of the LRP1 cell-signaling pathway activated by myelin-associated inhibitory proteins,

including MAG, Nogo-A, OMgp (Mantuano et al., 2013; Stiles et al., 2013). In our previous studies

on MAG, Nogo-A, OMgp, we did not examine the capacity of these proteins to stimulate pro-

inflammatory responses.

RhoA and its effectors, ROCK1 and ROCK2, are activated downstream of p75[NTR] (Yamashita

et al., 1999). We therefore studied two distinct pharmacologic ROCK inhibitors and demonstrated

that inhibiting ROCK antagonizes pro-inflammatory cytokine expression in response to Tau.

ROCK inhibitors are previously reported to block NFκB activation and cytokine expression in

response to pro-inflammatory stimuli other than Tau in macrophages, microglia, and astrocytes

(McGown et al., 2011; Ding et al., 2011; Liu et al., 2014; Uchida et al., 2017; Zhang et al., 2022;

Guo et al., 2020 Glotfelty et al., 2023). The ROCK inhibitor, Fasudil, has demonstrated efficacy

in a number of pre-clinical studies in animal models of neurodegeneration and cognitive

impairment (Ballard et al., 2020). In one study in which $A\beta_{1-42}$ was administered by

intracerebroventricular injection in rats, increased NFκB activation and production of TNFα and

IL-1β were observed in the brain tissue. Fasudil decreased neuro-inflammation and protected

against hippocampal neurodegeneration (Song et al., 2013). The ability of ROCK inhibitors to

antagonize the pro-inflammatory activity of Tau may have contributed to the previously reported

efficacy of these drugs as inhibitors of neuro-inflammation.

We hypothesize that under non-pathogenic conditions, mild activation of pro-inflammatory

cell-signaling via the LRP1/p75[NTR] pathway is probably offset by anti-inflammatory cell-signaling.

The anti-inflammatory pathways may include LRP1-dependent pathways, such as that activated

by binding of S-PrP[C] to the LRP1/NMDA-R complex (Mantuano et al., 2022b). In future studies,

it will be important to understand how various modifications of Tau, which regulate intracellular

aggregation, affect the cell-signaling response initiated by LRP1. Given the known variability in

cell-signaling elicited by different LRP1 ligands, it should not be assumed that the qualitative

nature and magnitude of the signaling responses elicited by different Tau variants will be a simple

function of receptor affinity.

Stiles et al. (2013) showed that, in neurons, the LRP1/p75^{NTR} receptor assembly functions as

an inhibitor of neurite outgrowth and may be involved in the mechanism by which specific proteins

inhibit CNS neuronal regeneration following injury. We did not study neurons; however, in neuron-

like PC12 cells, p75^{NTR}-dependent cell-signaling was activated by Tau. Understanding the effects

of Tau on LRP1-signaling in neurons and the capacity of these cells to differentiate represent

important future goals.

In response to LPS or interferon-γ, LRP1 is cleaved by transmembrane proteases in the

ADAM family, releasing a soluble product that includes the entire α-chain and a fragment of the

β-chain ectodomain (Quinn et al., 1999; von Arnim et al., 2005; Gorovoy et al., 2010). Shed LRP1

is found in plasma and its level is increased in patients with rheumatoid arthritis or systemic lupus

erythematosus (Gorovoy et al., 2010).   Shed LRP1 that is purified from human plasma is

biologically active and independently pro-inflammatory against macrophages and microglia

(Gorovoy et al., 2010; Brifault et al., 2017). It is possible that LRP1 shedding is involved in the

pathway by which Tau induces pro-inflammatory responses in macrophages, microglia, and

astrocytes. If future studies prove this is true, then there are at least two non-mutually exclusive

models to reconcile the activity of p75^{NTR}. In the first model, p75^{NTR} functions with membrane-

anchored LRP1 to transduce the initial cell-signaling response to Tau. In the second model,

p75^{NTR} functions as a component of the cellular receptor system that mediates the response to

shed LRP1.

The bimodal activity of LRP1 as a ligand-dependent inhibitor or activator of inflammation is

important to consider when reviewing complex animal model studies in which LRP1 may be

exposed to diverse ligands. For example, LRP1 deficiency in cultured microglia is mildly pro-

inflammatory in the absence of inflammation-regulating mediators (Yang et al., 2016; Brifault et

al., 2017).   LRP1-deficient microglia in culture demonstrate more robust pro-inflammatory

responses to Aβ_{1-42} (He et al., 2020). In these cases, the effects of LRP1 deficiency may be

explained by loss of NMDA-R-dependent anti-inflammatory cell-signaling pathways. By contrast,

in an *in vivo* model of peripheral nerve injury, microglial LRP1 exacerbates inflammation in the

spinal cord, in association with central sensitization of pain processing (Brifault et al., 2019). In

this case, the available LRP1 ligands *in vivo* may activate the LRP1/p75^{NTR} pathway and/or induce

LRP1 shedding.

In summary, the studies presented here identify a novel LRP1-depedent mechanism by which

Tau may regulate inflammation, neuro-inflammation, and AD progression. Identification of ROCK

as a downstream mediator of the Tau-activated LRP1/p75^{NTR} receptor assembly offers

opportunities to target this pro-inflammatory pathway with available drugs that have already been

tested using *in vivo* model systems.

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Figures and Figure Legends

Figure 1. Tau induces an inflammatory response in macrophages. **A**, BMDMs from wild-type mice

were treated for 6 h with increasing concentrations of Tau, as indicated. RT-qPCR was performed

to determine mRNA levels for TNFα, IL-6, CCL3, and CXCL2. Data are represented as mean ±

SEM (n = 3-8; one-way ANOVA: **p<0.01; ***p<0.001; ****p<0.0001). **B**, BMDMs from wild-type

mice were treated for 1 h with increasing concentrations of Tau, as indicated. Immunoblot analysis

was performed to detect expression of p-ERK, p-IκBα, IκBα, and β-actin.

Figure 2. LRP1 mediates Tau-induced inflammation in macrophages. *A*, BMDMs from wild-type (WT) and *Lrp1*fl/fl-LysM-Cre-positive (*Lrp1*-/-) mice were treated for 6 h with Tau (20 nM) or vehicle. mRNA levels for TNFα, IL-6, CCL3, and CXCL2 were determined by RT-qPCR. Data are represented as mean ± SEM (n = 3-5; two-way ANOVA: ****p* < 0.001; *****p* < 0.0001; n.s., not significant). *B*, WT and *Lrp1*-/- BMDMs were treated for 6 h with Tau (20 nM) or vehicle. Conditioned medium (CM) was collected and analyzed using the Proteome Profiler Mouse XL Cytokine Array. Representative cytokines that were increased in Tau-treated *Lrp1*-/- BMDMs compared with WT cells are highlighted in red boxes and numbered. *C*, WT and *Lrp1*-/- BMDMs were treated for 1 h with Tau, at the indicated concentrations. Protein extracts were analyzed by immunoblotting to detect p-IκBα, total IκBα, and β-actin.

Figure 3. The Tau response in macrophages is independent of the NMDA-R. **A**, BMDMs from wild-type (WT) mice were treated for 6 h with Tau (20 nM), MK-801 (1 μM), DXM (10 μM), or vehicle as indicated. RT-qPCR was performed to determine mRNA levels for TNFα and IL-6 (mean ± SEM; n=3-4; one-way ANOVA: ***p<0.001; ****p<0.0001; n.s., not significant). **B**, WT BMDMs were treated for 1 h with Tau (20 nM), MK-801 (1 μM), DXM (10 μM), or vehicle as indicated. Cell extracts were subjected to immunoblot analysis to detect p-ERK, p-IκBα, total IκBα, and β-actin. **C**, BMDMs from *Grin1*^fl/fl-LysM-Cre-positive (*Grin1*^-/-) mice were treated for 6 h with Tau (20 nM) or vehicle. mRNA levels for TNFα, IL-6, CCL3, and CXCL2 were determined by RT-

663   qPCR (mean ± SEM; n = 5-7; one-way ANOVA: ***p<0.001; ****p<0.0001). ***D***, *Grin1$^{-/-}$* BMDMs

664   were treated for 1 h with increasing concentrations of Tau, as indicated. Immunoblot analysis was

665   performed to detect p-IκBα, IκBα, and β-actin.

Figure 4. Tau induces a pro-inflammatory response in microglia that requires LRP1, but not the

NMDA-R. **A**, Microglia from mouse pups were treated with Tau (20 nM) or vehicle for 6 h.

Conditioned medium (CM) was collected and analyzed using the Proteome Profiler Mouse XL

Cytokine Array. Representative cytokines that were increased compared with the control are

highlighted in red boxes and numbered. **B**, Microglia from mouse pups were treated for 6 h with

Tau (20 nM), MK-801 (1 µM), DXM (10 µM), or vehicle as indicated. RT-qPCR was performed to

determine mRNA levels for TNFα, IL-6, CCL3, and CXCL2 (mean ± SEM; n = 3-5; one-way

ANOVA: ***p<0.001; ****p<0.0001; n.s., not significant). **C**, Microglia from mouse pups were

treated for 1 h with Tau (20 nM), MK-801 (1 µM), DXM (10 µM), or vehicle as indicated. Cell

extracts were subjected to immunoblot analysis to detect p-ERK, p-IκBα, IκBα, and β-actin. **D,**

Microglia from mouse pups were transfected with *Lrp1*-specific (siL*rp1*) or non-targeting control

(NTC) siRNA for 48 h. Cells were then treated with Tau (20 nM) or vehicle for 1 h and then

analyzed by immunoblotting to detect LRP1, p-ERK, and T-ERK.

Figure 5. Tau induces a pro-inflammatory response in astrocytes that does not require the NMDA-

R. *A*, Astrocytes from mouse pups were treated for 6 h with Tau (20 nM), MK-801 (1 µM), DXM

(10 µM), or vehicle as indicated. RT-qPCR was performed to determine mRNA levels for TNFα,

IL-6, CCL3, and CXCL2 (mean ± SEM; n = 3; one-way ANOVA: ***p < 0.001; n.s., not significant).

B, Astrocytes from mouse pups were treated for 1 h with Tau (20 nM), MK-801 (1 µM), DXM (10

µM), or vehicle as indicated. Protein extracts were analyzed by immunoblot to detect levels of p-

IκBα, IκBα, and β-actin.

Figure 6. p75[NTR] is required for Tau-induced cell-signaling. **A**, PC12 cells were pre-treated with vehicle, MK-801 (1 µM) or DXM (10 µM) for 30 min, and then incubated with Tau (20 nM), S-PrP^C (40 nM), or vehicle for 10 min, as indicated. Cell extracts were subjected to immunoblot analysis to detect levels of p-ERK and T-ERK. **B**, PC12 cells were transfected with *Ngfr*-specific (si*Ngfr*) or non-targeting control (NTC) siRNA for 24 hours. Cells were then treated with Tau (20 nM), α_2M (10 nM), or vehicle for 10 min, then analyzed through immunoblotting to detect levels of NGFR, p-ERK, and T-ERK. **C**, BMDMs from wild-type mice were pre-treated with TAT-Pep5 (0.5 µM) or vehicle for 30 min and then with Tau (20 nM) for 1 h. Immunoblot analysis was performed to

697   detect expression of p-IκBα, IκBα, and ß-actin. **D-E**, BMDMs (**D**) and astrocytes (**E**) were pre-

698   treated with TAT-Pep5 (0.5 µM) or vehicle for 30 min and then with Tau (20 nM) for 6 h. RT-

699   qPCR was performed to determine mRNA levels for TNFα, IL-6, CCL3, and CXCL2 (mean ± SEM;

700   n = 3; one-way ANOVA; ****$p<0.0001$).

Figure 7. Tau-induced pro-inflammatory responses are neutralized by ROCK inhibitors. *A*,

BMDMs from wild-type mice were pre-treated with Fasudil (10 μM) or Y-27632 (10 μM) for 30 min

and then with Tau (20 nM) for 1 h. Cell extracts were subjected to immunoblot analysis to detect

p-ERK, p-IκBα, IκBα, and β-actin. *B*, BMDMs from wild-type mice were treated for 6 h with Tau

(20 nM) in presence or absence of Fasudil (10 μM) or Y-27632 (10 μM), as indicated. mRNA

levels for TNFα, CCL3, and CXCL2 were determined by RT-qPCR (mean ± SEM; n = 3; one-way

ANOVA: ****$p < 0.0001$). *C*, Microglia from mouse pups were treated with Tau (20 nM) in presence

or absence of Fasudil (10 μM) for 1 h. Cell extracts were subjected to immunoblot analysis to

detect p-IκBα, IκBα, and β-actin. **D**, Microglia were treated with Tau (20 nM) in presence or

absence of Fasudil (10 μM) for 6 h and then analyzed to detect changes of TNFα mRNA by RT-

qPCR (mean ± SEM; n = 3; one-way ANOVA: **$p<0.01$; ***$p<0.001$). **E**, Astrocytes were treated

for 1 h with Tau (20 nM), in presence or absence of Fasudil (10 μM). Cell extracts were subjected

to immunoblot analysis to detect p-IκBα, IκBα, and β-actin. **F**, Astrocytes were treated for 6 h with

Tau (20 nM), in presence or absence of Fasudil (10 μM). RT-qPCR was performed to determine

mRNA levels for TNFα, IL-6, CCL3, and CXCL2 (mean ± SEM; n = 3; one-way ANOVA; ****$p <$

0.0001).