Multi-omic integration with human DRG proteomics highlights TNFα signalling as a
relevant sexually dimorphic pathway

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Abstract

The peripheral nervous system (PNS) plays a critical role in pathological conditions, including
chronic pain disorders, that manifest differently in men and women. To investigate this sexual
dimorphism at the molecular level, we integrated quantitative proteomic profiling of human
dorsal root ganglia (hDRG) and peripheral nerve tissue into the expanding omics framework of
the PNS. Using data-independent acquisition (DIA) mass spectrometry, we characterized a
comprehensive proteomic profile, validating tissue-specific differences between the hDRG and
peripheral nerve. Through multi-omic analyses and *in vitro* functional assays, we identified sex-
specific molecular differences, with TNFα signalling emerging as a key sexually dimorphic
pathway with higher prominence in males. Genetic evidence from genome-wide association
studies (GWAS) further supports the functional relevance of TNFα signalling in the periphery,
while clinical trial data and meta-analyses indicate a sex-dependent response to TNFα
inhibitors. Collectively, these findings underscore a functionally sexual dimorphism in the PNS,
with direct implications for sensory and pain-related clinical translation.

Introduction

Neuroimmune- and pain- related condition prevalence, as well as the corresponding treatment efficacy, can differ across sex and gender [28,41]. Understanding sexual dimorphism at a molecular level is thus a fundamental clinical issue. Autoimmune conditions, for example, are highly biased toward women (upwards of 80%), and infections can elicit differing immune responses. Women also have heightened sensitivity to pain in an experimental context, show higher rates of chronic pain, and are the dominant gender in many pain-centric disorders, from migraine to complex regional pain syndrome (CRPS) [8,15,41].

Pre-clinical work in rodents shows a similar sexual dimorphic trend at the immune and nervous system level. Decades of work suggest complex, cross-species mechanism(s) underlying these clinical presentations. Hormones such as oestrogen, prolactin, and testosterone have been implicated in a range of pain and neuro-immune conditions, while evidence for central and peripheral sexually dimorphic mechanisms have been shown [32,45,51,52,62].

Primary afferents in the peripheral nervous system (PNS) project from the skin and viscera to the dorsal horn of the spinal cord, with cell bodies in the dorsal root ganglia (DRG, in humans - hDRG). The DRG contain sensory neuron cell bodies, as well as a diverse set of non-neuronal cells. These sensory neurons respond to inflammation by detecting immune mediators and then releasing neuropeptides in complex neuro-immune circuits [33,58]. At a molecular level, transcriptional profiles of these cell types have recently been published for human sensory neurons [9,55], as well as non-neuronal cells [9,34] with some differences in gene expression reported across male and female donors. In bulk tissue, recent molecular profiling of the hDRG has highlighted differentially accessible chromatin regions (DARs), as well as sex-specific changes in neuropathic pain states at the transcriptome level [25,45]. To date, the corresponding proteome signature has been missing, as the few prior studies depend on shotgun (data dependent acquisition) proteomics [19,50], which is known to be biased towards high-abundant proteins [27].

Here, we generate a quantitative hDRG proteomic dataset across male and female donors using data-independent acquisition (DIA) mass spectrometry. This comprehensive dataset provides a human-centric reference for protein expression in a key structure of the peripheral nervous system, and complements previously published ATAC-seq and RNA-seq data. Through integration across omics from the same tissue, we show strong evidence for sexual dimorphism in the TNFα signalling pathway. Genome-wide association studies (GWAS) provide support that it is a functionally relevant pathway in the periphery, and evidence from clinical trials highlights a link to clinical sexual dimorphism in response to medication against these targets. The functional relevance of TNFα signalling in the hDRG was confirmed *in vitro*, and downstream changes in protein phosphorylation suggests a possible mechanism of action. Together, these findings speak to a sexually dimorphic pathway in the peripheral nervous system, which is of particular importance to sensory- and pain-related translation.

Methods

DRG tissue procurement

All human tissue procurement procedures were approved by the Institutional Review Board at
the University of Texas at Dallas. Through collaboration with the Southwest Transplant Alliance,
human lumbar DRGs (hDRGs, L1-L4) from organ donors were obtained within 4 hours of cross-
clamp. Tissue for mass spectrometry was frozen in dry ice right immediately and stored in a −80
°C freezer. All transport was done on large amounts of dry ice to protect tissue integrity. Age-
matched male and female samples of mixed ethnicity were used for the current study. Donors
for proteomic profiling were negative for pain, neuropathy, and illicit drug use (excluding
marijuana), based on recorded patient history.

For Fluorescent Activated Cell Sorting (FACS) hDRGs (lumbar and thoracic) were recovered and
stored in 10 mL of Hibernate A (BrainBits, HACA500) supplemented with 1% N-2 (Thermo
Scientific, 17502048), 2% NeuroCult SM1 (Stemcell technologies, 05711), 1%
penicillin/streptomycin (Thermo Fisher Scientific, 15070063), 1% Glutamax (Thermo Scientific,
35050061), 2mM Sodium Pyruvate (Gibco, 11360-070), and 0.1% Bovine Serum Albumin
(Biopharm, 71-040) at 4^0C until ready for processing (10-16 hrs, see below).

DRG tissue preparation for mass spectrometry

DRGs were processed sequentially, with experimenters blinded to a randomized order
(corresponding to donor column, Table 1). 12-24 hours prior to dissection, tissue was
transferred to -20°C. For each hDRG, tissue was thawed on ice for ~15 min prior to dissection
(on ice) to remove the surrounding connective tissue. In each ganglia, a region of nerve tissue
extending from the core ganglia was identified. This was presumed to contain fewer/no neuronal
soma and was transected crudely with a scalpel for separate processing (as the "nerve root"
region).

Protein extraction and SP3-assisted digestion

Due to the size of the ganglia, each ganglia was cut into up to 4 pieces and subsequently, each
piece was cut in smaller pieces to increase surface area for lysis. All small pieces of one big cut
were transferred to a 2ml LoBind Protein Eppendorf tube (Eppendorf, Hamburg, Germany)
prefilled with lysis buffer (2% SDS, 100mM Tris, 5% glycerol, 10mM DTT and 1x protease
inhibitor cocktail) and sonicated for 15 min (cycles of 30 sec ON and 30 sec OFF, 4°C, low
frequency) in a Bioruptor Pico (Diagenode, Seraing, Belgium). Samples were subsequently
incubated for 15 min at 70°C, 1500 rpm in a ThermoMixer C (Eppendorf) followed by a
centrifugation for 5 min with 10000 × g at room temperature (RT) to pellet cell debris. The
supernatant was mixed with 5x sample volume 100% acetone (pre-chilled at -20°C) and
incubated for 2.15-2.45 h to precipitate the proteins.

Precipitates were pelleted by centrifugation for 30 min at 14000 × g, RT. Pellets were washed
with ice-cold 80% EtOH and centrifugated again with above mentioned parameters. The EtOH
was removed and pellets air-dried for around 20 min at RT. Resolubilization in lysis buffer was
facilitated by incubation for 10 min at 70°C, 1500 rpm. Total protein concentration was

determined at 280 nm with a NanoPhotometer N60 (Implen, Munich, Germany). Subsequently,
samples were flash-frozen and stored at -20°C until further usage.

Protein clean-up and digest was then performed as described in Xian et al., 2022. This is based
on the single-pot, solid-phase-enhanced sample preparation (SP3) method from Hughes et al.
(Hughes et al., 2019), and is also detailed in the corresponding protocol at protocol.io [5].
Remaining protein was used for a targeted phosphorylation array (below).

Tandem mass spectrometry

Nanoflow reversed-phase liquid chromatography (Nano-RPLC) was performed on NanoElute2
systems (Bruker Daltonik, Bremen, Germany). This was coupled with timsTOF HT (Bruker
Daltonik, Bremen, Germany) via CaptiveSpray ion source. Mobile phase A consisted of 100%
water, 0.1% formic acid and mobile phase B of 100% acetonitrile, 0.1% formic acid.

500 ng of peptides were loaded onto a C18 trap column (1 mm x 5 mm, ThermoFisher) and
further separated over a 90 min gradient on an AuroraTM ULTIMATE column (25 cm × 75 μm)
packed with 1.6 μm C18 particles (IonOpticks, Fitzroy, Australia). The flow rate was set to 250
nL/min, except for the last 7 minutes, where the flow rate was accelerated to 400 nL/min. The
mobile phase B was linearly increased from 2 to 20% in the first 60 minutes, followed by another
linear increase to 35% within 22 minutes and a steep increase to 85% in 0.5 min. Then, a flow
rate switch to 400 nL/min was achieved in 0.5 min and was maintained for 7 minutes to the end
of the gradient to elute all hydrophobic peptides.

The samples were analyzed in data-independent acquisition (DIA) mode coupled with parallel
accumulation serial fragmentation (PASEF). Precursors with m/z between 350 and 1200 were
defined in 13 cycles (either 2 or 3 quadrupole switches per cycle) containing 34 ion mobility
steps within the ion mobility range of 0.65 – 1.35 (1/k0) with fixed isolation window of 25 Th in
each step. The acquisition time of each DIA-PASEF scan was set to 100 ms, which led to a total
cycle time of around 1.48 sec. The collision energy was ramped linearly from 65 eV at 1/k0 = 1.6
to 20 eV at 1/k0 = 0.6.

Spectral deconvolution with DIA-NN

DIA-NN (version 1.8.1) was used to process raw spectra in library-free mode via command line
on the Vienna Scientific Cluster [16,17]. A predicted library search was performed against the
human proteome (UP000005640) with match-between-runs (MBR) enabled. Separate MBRs
were performed for quality control samples, and ganglia + nerve root, as well as ganglia and
nerve root independently when used for differential expression testing. Gene Group outputs are
also referred to as "proteins" throughout. See data availability statement for access.

Basic Gene Lists

144 Curated lists of pain genes have been previously published [36,40,64]. Ion channels were
145 matched from Alexander et al., (2023), and GO-term related gene lists were extracted through R
146 using biomaRt [20]. Drug-targets were extracted from opentargets.com for relevant conditions
147 [42]. Receptor types were derived from a previously published interactomics resource [58], and
148 were compared to published bulk RNA-seq from the DRG [45].

Gene Set Enrichment Analysis (GSEA)

Gene Set Enrichment Analysis (GSEA) for neuronal subtype enrichment was performed against gene lists derived from Zheng et al., [65] for mouse subpopulations as described previously [7]. In brief, RNA-seq count data from GSE131230 - which had been processed via STAR alignment and HTSeq on the same genome build (see Zheng et al., for full methods) - was corrected for library size and transformed via rlog in R using DESeq2 [38,66]. This was then filtered to match their published report. Genes with an average rlog above the 95% quantile cut-off per subpopulation were curated into a 'gene set' for enrichment. Mouse gene names were converted using the biomaRt package via the ensembl mart with `getLDS()` [20].

For human subpopulations as described in Taveres-Ferreira et al., [55], marker genes were accessed directly from the supplemental tables and reformatted in R for processing. In brief, these genes were selected using the `findMarkers()` function in Seurat after Visium-based spatial sequencing.

These custom gene sets were then compiled for a GSEA analysis using the clusterProfiler package [61]. Minimum gene set size was set to 25 (no maximum size threshold), and run for 10000 permutations.

The average expression across ganglia samples was calculated per gene group after filtering for 80% completeness. Where the first term per gene group overlapped (eg. TRPV1 vs TRPV1,TRPV2,TRPA1), the first term in the group was used, and the row with the higher abundance was taken. GSEA was then performed on the ranked mean expression.

To examine pathway differences between male and female samples, GSEA was performed on ranked LFC output with a significance threshold of FDR < 0.05; minimum gene set size was set to 25. Gene sets were extracted using the `msigdbr` package in R [18]. Hallmark pathways were extracted as `category = "H"`. Biological pathways (BP) and molecular function (MF) from gene ontology (GO) lists were extracted as `category = "C5", subcategory = "BP"` and `category = "C5", subcategory = "MF"` respectively.

For the proteomics data, LFC were calculated using limma (see: hypothesis testing). For GSEA on RNA-seq, DESeq2 was used to calculate LFC, as described in Farah et al., (2024), using previously published bulk RNA-seq data (n = 31M, 19F donors) [45]. For ATAC-seq, LFC were derived from pseudobulk analysis of all clusters in a spatial-seq dataset in autosomes, described by Franco-Enzástiga et al., (2024). In brief, ATAC-seq gene scores were calculated using ArchR. The gene score predicts the expression of genes based on the chromatin accessibility of regulatory elements in the vicinity of a gene and its corresponding gene body. In ArchR, the function `GeneScoresMatrix()` was used to store gene scores. To sum together gene scores of all the cells from the same sample for the pseudobulk analysis, the `getMarkerFeatures()` function in ArchR was used, and the `groupBy = "Sample"` was specified. Data were compared across sex (n = 5M, 3F donors).

Overrepresentation Analysis

Overrepresentation analysis was performed using the `enrichGO` function from ClusterProfiler [61]. Differentially expressed proteins (DEPs, abs(LFC) > 1, FDR < 0.05) were compared to a background of Gene Groups used for the initial limma comparison using default settings.

Supervised PCA (SPCA)

Supervised PCA (SPCA) [3] was performed as previously described [7]. Differentially expressed genes (DEGs) from spatial RNA-seq and differentially expression regions (DARs) from bulk hDRG ATAC-seq datasets exploring sexual dimorphism were extracted as lists [25,55]. DARs were filtered to remove X and Y chromosome regions. DEGs from Taveres-Ferreira et al., (2022) were extracted from supplemental table 2, `B-Overall_neurons_DE_genes` looking at differential expression between male and female barcodes within neurons.

Proteomic data from the ganglia (merged by replicate) was subset by either DEGs or DARs and subject to a PCA (via `prcomp` in R). Eigengenes and eigen vectors were then extracted from the first principal component (`PC1`).

Hypothesis Testing

Hypothesis testing was performed within ganglia samples using a moderated T-Test via limma [46], modelling for sex, n = 4M and 4F donors. Here, log2 transformed data were first filtered for the primary occurrence of each Gene Group (ie. protein) and filtering out proteins present in less than 80% of samples. For example, where Gene Group A = "TRPV1" and B = "TRPV1,TRPV2,TRPA1", Gene Group A would be used. P values were corrected with Benjamini-Hochberg , and a significance threshold was set to FDR < 0.05, LFC >1.

Multi-study Factor Analysis

Strong correlations between ATAC-seq regions, RNA-seq transcript abundance, and protein abundance were not evident. Even so, matching sexually dimorphic pathways are described across datasets. Here, we employed a Multi-study factor analysis [57] to examine latent variables in the context of sex to look for the underlying structure contributing to this overlap.

Following the principles for factor analyses on small sample sizes [59] we limited our search to a small number of factors (here, 3) and used sexually dimorphic DARs. This allows us to look exclusively at chromatin regions implicated in female/male differences: this biases the analysis towards factors involved in sexual dimorphism and provides a clear link from ATAC-RNA-protein. The within-dataset factor numbers were determined by scree plots. A minimum Kaiser–Meyer–Olkin (KMO) threshold was set to 0.5 for each dataset, and only sex-related factors were considered from the output (ie., a confirmatory model, opposed to an exploratory factor analysis). Due to the arbitrary nature of factor loading signs, within-dataset factor loadings were constrained such that they were positively correlated to males if sex appeared relevant.

Bulk RNA-seq from human DRG [45] were extracted as quantile-normalized transcripts per million (qnTPM) for neuronal-enriched donor samples (n = 50). Both "pain" and "non-pain" donors were considered here to examine sexual dimorphism across states. Proteomic samples from the "ganglia" and "nerve root" regions of the DRG were used, merged across technical

replicates by mean. Here, we acknowledge the limitation that this is a low sample number, and
that samples are paired (16 samples from 8 donors). We limited this effect by analyzing only
factors shared across two datasets, specifically in the context of sex, and not within the
proteomic dataset in isolation.

Genes were matched to bulk DARs from Franco-Enzástiga et al., (2024) and filtered to remove
genes with missing values across both datasets, resulting in complete data matrices. Data were
then transposed for Multi-study factor analysis (RNA = [50 x 402], proteomics = [16 x 402]).
Starting values were extracted using `start_msfa`, constraint = `block_lower2`, capped at
10000 iterations. `ecm_msfa` was then run with default parameters.

Factor scores were estimated using the Weighted Least Squares (ie. the Bartlett Method;
equation 1), where X~ is the centred/scaled data matrix for each dataset, *i*. Lambda are the
factor loadings shared across datasets and Psi is a diagonal matrix equal to the specific
variances.

$$\widehat{f_i} = (\Lambda\Lambda^T\psi^{-1})^{-1}\Lambda^T\psi^{-1}(\widetilde{X_i})$$

The interaction of `Sex` and `Factor` was tested by an anova. Posthoc testing was then
performed per factor (eg. Male.Factor1 - Female.Factor1) using `glht(anova, linfct =
mcp(Interaction))` in R. Factors with a q < 0.1 were considered significant. Shared gene
loadings were extracted from the Multi-Study Factor Analysis output as Phi for visualization.

GSEA analyses were performed as above, with the following modification: minimum gene set
size set to 5 (due to the total number of genes available, 402). In line with above, the
significance threshold was set to FDR < 0.05. Protein-protein interaction networks were plotting
through https://livedataoxford.shinyapps.io/drg-directory/, [64] which uses an API with STRING
DB and overlays sensory neuron and pain-relevant datasets through R Shiny.

Fluorescent Activated Cell Sorting (FACS) preparation

The DRGs were trimmed of excess connective tissue, fat, and nerve roots to collect the bulb
containing neuronal cell bodies. The bulb of each DRG was cut into 3mm sections and placed in
5mL of pre-warmed digestion enzyme containing 2 mg/mL of Stemxyme I (Worthington
Biochemical, LS004106), 10ng/mL of recombinant human β-NGF (R&D Systems, 256-GF), and
0.1 mg/mL of DNAse I (Worthington Biochemical, LS002139) in HBSS without calcium and
magnesium (Thermo Scientific, 14170-112).

The tubes were placed in a 37° C shaking water bath and triturated every hour until the DRG
sections were dissolved (3-4hrs). Samples were filtered through a 70μm mesh strainer and
centrifuged at 350g for 5 minutes at room temperature (all subsequent centrifuge steps follow
the same parameters). The supernatant was removed, and the pellet was resuspended in a red
blood cell lysis buffer (Biolegend, 420301) and incubated at room temperature for 5 minutes.
Samples were then centrifuged, the supernatant was removed, and the pellet was resuspended
in 0.5% bovine serum albumin in 1X Phosphate Buffered Saline (PBS). To remove myelin from
the dissociation, cells were incubated with myelin removal beads (Miltenyi Biotec, 130-096-433)
for 15 minutes at room temperature. Cells were washed with 1mL of 0.5% bovine serum
albumin in PBS, spun down, resuspended in 0.5% bovine serum albumin in PBS, and passed

through a LS column (Miltenyi, 130-042-401) on a MidiMACS separator (130-042-301) according
to manufacturer's protocol. Samples were then spun down and resuspended in PBS and
proceeded to cell staining.

Cells were stained with a fixable live/dead stain (Biolegend, 423107) for 10 minutes at room
temperature, protected from light. Cells were washed with 1mL of flow cytometry staining buffer
(Invitrogen, 00-4222-26), spun down, and resuspended in flow buffer. Cells were incubated with
an Fc receptor blocker (TruStain FcX, Biolegend, 422302) for 10 minutes at room temperature,
protected from light. Cells were then incubated with CD45, CD11b, and CD3 antibodies for 30
minutes on ice, protected from light (See Supplemental Table 10 for antibodies used in flow
cytometry experiments). Cells were washed with 1mL of flow cytometry staining buffer, spun
down, and resuspended in flow buffer and kept on ice until processing. Fluorescently activated
cell sorting (FACS) was used to isolate Live, CD45+, CD11b+, and CD3- cells on a BD FACSAria
Fusion (Gating Strategy in Supplemental Figure 9A). Cells were collected, spun down, and
resuspended in pre-warmed RPMI media (Gibco, 11875-093) containing 10% HyClone™ Fetal
Bovine Serum (Thermo Fisher Scientific, SH3008803IR) and 1% penicillin/streptomycin. Cells
were plated at 20k cells per well in a 96 well plate and allowed to acclimate overnight in an
incubator (37^{0}C, 5% CO2). All antibodies are listed in Supplemental Table 10.

LPS Stimulation of hDRG immune cells

Cells were stimulated with lipopolysaccharide (LPS) (10ng/mL, Sigma-Aldrich, L6529) or its
vehicle (RPMI media) for 16 hours as this dose has previously shown to drive increased
secretion of TNFα from human myeloid cells *in vivo* [1,11]. In one condition cells were co-
stimulated with Brefeldin A (1:1000, Biolegend, 420601). In cultures without Brefeldin A, the cell
culture supernatant was collected and frozen at -80°C till processing. TNFα levels in the media
supernatant were measured with a Legendplex kit targeting TNFα (Biolegend, 741187), per the
manufacture's recommended protocol. The average of two technical replicates were used to
calculate TNFα concentrations. In cells co-cultured with Brefeldin A, cells were collected and
fixed with a Cyto-Fast fixation and permeabilization kit (Biolegend, 426803) for 20 minutes at
room temperature. Cells were washed twice with the Cyto-Fast perm wash solution and then
incubated with a TNFα antibody for 30 minutes on ice. Cells were washed with 1mL of flow
cytometry staining buffer, spun down, resuspended in flow buffer, and kept on ice until data
acquisition on a BD LSRFortessa. The percentage of cells expressing TNFα were calculated for
each condition using FlowJo (Version v10.10) (Gating Strategy in Supplemental Figure 9B).

TNFα Stimulation

hDRG immune cells were stimulated with TNFα (10ng/mL, R&D Systems, 210-TA) or its vehicle
(1X PBS) for 30 minutes. This dose and timepoint has been shown to increase p38 levels in
human cultures of myeloid cells and fibroblasts [30,54]. Cells were then collected and fixed
with 4% paraformaldehyde (Electron Microscopy Sciences, 15710) in PBS for 15 minutes at
room temperature. Cells were then washed 2x with flow cytometry staining buffer and
permeabilized with pre-chilled, 100% methanol (Fisher Scientific, A456-212), for 30 minutes on
ice. Cells were then washed 2x with flow cytometry staining buffer and incubated with p38 and
p65 antibodies in flow buffer for 30 minutes on ice. Cells were washed with 1mL of flow
cytometry staining buffer, spun down, resuspended in flow buffer, and kept on ice until

processing. The percentage of cells expressing p38 and p65 along with the median fluorescent
intensity of each signal was calculated for each condition (Gating Strategy in Supplemental
Figure 9B). The median fluorescent intensity values were normalized to an unstained control.

Targeted Phosphorylation Array

Phosphorylation levels were measured in remaining hDRG protein samples using the Proteome
Profiler Human Phospho-Kinase Array Kit (R&D Systems, CAT# ARY003C). The commercial
protocol was followed, with the following changes: each membrane was washed independently
using 7 ml Wash Buffer in 60x15 mm culture dishes, and membranes were rinsed 1x with wash
buffer after antibody incubation prior to 3x10 min washes. A ChemiDoc MP Imaging Platform
(Bio Rad) was used to detect signals. Four samples per condition were processed for membrane
"A", while 3F + 4M were processed for membrane "B".

Briefly, the protocol is as follows: membranes were blocked with "Array Buffer 1" for 1 hr at RT
prior to an overnight incubation at 4°C with 250 ug protein per membrane (ie. 500 ug per
membrane pair, A&B), diluted to 1 ml in "Array Buffer 1". Membranes were then washed (3x10
min), incubated with membrane-specific antibodies for 2 hr at RT, rinsed 1x prior to washing
(3x10 min), and incubated with Streptavidin-HRP for 30 min at RT. After washing (3x10 min),
membrane were incubated for 90 seconds with the "Chemi Reagent Mix", blotted with Kimwipes
and imaged on a ChemiDoc MP Imaging Platform for 240s. All membranes per round (2M/2F per
round) were developed and imaged together.

Image quantification was performed in ImageJ. Regions of Interest (ROIs) of equal size were
processed using the ROI Manager, and quantification was considered as $\bar{x}_{\text{(pixel intensity, PBS)}} - \bar{x}_{\text{(pixel intensity, ROI)}}$
for each phosphorylation site, using the PBS negative control per membrane as the
background.

Graphics

All plots were generated in R with the following libraries unless otherwise described: ggplot2,
ComplexHeatmap, cowplot, gridExtra, ggbiplot, ggrepel. Figures were compiled in Inkscape.

Results

In this study, we present the most comprehensive proteomic dataset of the human dorsal root ganglia (hDRG) and the nerve root (Fig 1A), with previous datasets using shotgun proteomics [19,50] . Using data independent acquisition coupled with parallel accumulation serial fragmentation (DIA-PASEF) we identify ~ 12500 Gene Groups (proteins) per sample, with similar levels between the ganglia and root (Fig 1B-C, see Data Availability). Donor details are available in Table 1. We confirmed data quality using control samples throughout the MS runs for both LC-MS and SP3 replicates (SFig 1A), and do not see overt variance by donor or age (SFig 1B). As expected, samples show the highest correlation within sample replicates (SFig 1C). Even so, samples do not cluster obviously by tissue type or donor (Fig 1D-E) or by sex/replicate (SFig 1D), suggesting a generalized proteome signature across all samples. These technical replicates were merged (by mean), with 32 samples (16x2 replicates) averaged to 8 ganglia + 8 nerve samples for downstream analyses (from 4M + 4F donors).

When comparing the nerve root to the ganglia, we see large differences in protein (aka "Gene Group"; see methods) levels. These differentially expressed proteins (DEPs) show a bias in myelin-associated terms upregulated in the root and soma-related terms in the ganglia (Fig 1F-H). A full list of DEPs is provided in Supplemental Table 1, with GO enrichment in Supplemental Tables 2-3. This is expected, given our knowledge of these tissues, and gives confidence to this dataset to probe other questions. With our current dataset quality and coverage, we see this data as a reference for the hDRG proteome, with extensive coverage of relevant curated gene lists for pain targets (Fig 1I), pain-related drug targets (Fig 1J), and peripheral autoimmune targets (Fig 1K).

Given the importance of membrane proteins in neurological and neuro-immune conditions in the PNS, as well as the previous difficulties in detecting membrane proteins using mass spectrometry, we specifically investigated ion channel and receptor abundance in our dataset (Fig 2) [50]. Here, we detect a number of TRP-, SCN-, and KCN- ion channels (Fig. 2A), among others, as well as a small number of GPCRs (Fig 2B). These candidates are expressed throughout our dynamic range of protein abundance (Fig 2C), with a number of key proteins detected almost exclusively in the ganglia (eg. P2RX3, SCN10A, Fig 2D). Additionally, when we compare these data to a curated list of proteins for sensory neurons and myelin, we see a clear separation of tissue types, again highlighting the strength of this dataset (Fig 2D).

The Ganglia and Nerve Root

Because of the differences between the ganglia and nerve root (Fig 1F-H), we independently investigated the proteome of each tissue type. In the ganglia (Fig 3A), we again do not see obvious clustering by PCA over cause of death and Ethnicity (Fig 3B-C). The samples cluster by replicate (SFig 2A) and show consistent protein counts (SFig 2B). In line with previous reports for quantitative proteomics, the data also does not correlate strongly to bulk RNA-seq of the same tissue [45], with an R^2 = 0.15 (SFig 2C). When looking more precisely at receptor types, we see a highly variable correlation across receptor types, ranging from -0.2 to 0.8 (SFig 2D), likely reflecting a combination of biological and technical differences in receptor type proteomics, due in part to regulatory dynamics.

Next, we examined the enrichment profiles of neuronal and non-neuronal cells using custom
genesets derived from snRNA-seq [9] (Fig 3D, see: methods). Here, we do not see a specific
significant enrichment for any cell type, but instead can detect marker genes across
populations. This trend is mirrored when using gene sets derived from mouse datasets [65]
(SFig 3A-B), and for neurons using a secondary, visium-based, hDRG dataset [55] (SFig 3C).

We then set out to investigate male/female differences in the hDRG (Fig 4, SFig 4). Ganglia
samples do not cluster by sex (Fig 4A) and no differentially expressed proteins were detected
between males and females (SFig 4A, Supplemental Table 4-5). Even so, gene set enrichment
analysis (GSEA) highlights pathway differences (Fig 4B-C, SFig 4B-D). Notably, TNFα signalling is
enriched in male donors (Fig 4B), while interferon (IFN) α response (Fig 4C) and Oxidative
Phosphorylation (SFig 4D) are enriched in female samples.

To see if there was a shared signature of sexual dimorphism across omics types (ie. ATAC-seq
and RNA-seq), we next clustered the ganglia samples by supervised PCA (sPCA) against
previously published differentially accessible regions (DARs) [25] and differentially expressed
genes (DEGs, [55]) comparing hDRG of male and female donors (Fig 4D-G).

We see a separation of male and female proteomic samples by sPCA against sexually
dimorphic DARs (ATAC-seq, Fig 4D-E) and DEGs (RNA-seq, Fig 4F-G), although this trend is not
statistically significant (Welch's, $p \sim 0.1$) in either case. PCA and sPCA are dimensionality
reduction techniques that calculate a covariance matrix to represent high-dimensional data
(e.g., many proteins) in fewer dimensions (e.g., the first and second principal components), with
the components optimized to maximize variance. From this, the contribution of each protein to
each principal component can still be extracted. Here, eigengenes were extracted from the first
principal component to see what was driving this separation by sex, with a number of proteins in
the TNFα signalling pathway showing high loading values, suggesting they contribute to driving
the difference across sex (SFig 5).

To see if the pathway changes from our proteomic data are shared across omics, we next
performed GSEA against pseudobulk spatial ATAC-seq (SFig 6A), as well as bulk RNA-seq from
thoracic vertebrectomy participants (SFig 6B) [25,45]. TNFα signalling via NFκB was enriched in
males across datasets, suggesting a cross-omic pattern of sexual dimorphism.

The nerve root (SFig 7A) exhibits slightly fewer protein identifications (SFig 7B) than the ganglia,
but again do not cluster by sex (SFig 7C) or show differentially expressed proteins by sex (SFig
7D, Supplemental Table 6-7). Mirroring the GSEA from Fig 4, we see a different pattern of sexual
dimorphism in the nerve root compared to the ganglia. Like the ganglia, we see an enrichment
for Oxidative Phosphorylation in female donors, but do not replicate the differences in IFNα
Response or TNFα signalling via NFκB (SFig 7E). By sPCA, we also do not see a clear separation
by sex using DARs (SFig 7F) or DEGs (SFig 7G) from the corresponding hDRG ATAC-seq and RNA-
seq datasets [25,55].

Sexual dimorphism across omics datasets

To probe shared patterns of sexual dimorphism across omics types, we used a multi-study
factor analysis on available hDRG datasets (Fig 5, SFig 8) [25,45]. Multi-study factor analysis

allows us to examine class separation (here, male and female) through shared factors across
omics types, where each relevant factor has interpretable underlying constructs.

We used the most comprehensive bulk RNA-seq dataset available to date, looking at
neuropathic pain in a participant cohort of thoracic vertebrectomy patients undergoing surgery.
Of the 70 DRG sequenced, 50 showed neuronal enrichment, as described in the original
publication [45]. These 50 DRG, removed during thoracic vertebrectomy surgical procedure,
were stratified by sex for comparison to our hDRG proteomic dataset (both ganglia and nerve
root). There were too few samples from the hDRG ATAC-seq datasets for a factor analysis, thus
we instead restricted our factor analysis to gene/proteins which correspond to DARs between
male and female donors (see methodology) [25].

Likely because of the small sample sizes, only 3 shared factors were extracted, with Factors 2-3
both showing a separation by sex (Fig 5A-B). GSEA against the ranked loading revealed no
hallmark pathway enrichment for Factor 2, but 3 enriched pathways for Factor 3: TNFα
signalling via NFκB, Inflammatory Response, and Epithelial Mesenchymal Transition (Fig 5C-D,
SFig 8A). While there are overlapping terms driving TNFα signalling via NFκB and Inflammatory
Response, the enrichment of Epithelial Mesenchymal Transition is independent of this (Fig 5D),
but was also detected in our proteomics data (SFig 4B), and in bulk RNA-seq (SFig 6B).

TNFα release from hDRG immune cells

TNFα signalling consistently appears as a sexually dimorphic pathway in these omics datasets,
spanning multiple sets of donors and a large cohort of surgical participants.

If the sexual dimorphism we see is functional relevant, we would expect a few things: Firstly,
drugs targeting the pathway should show response differences in men and women (they do,
Table 2). Secondly, SNPs against core genes in the pathway would be related to pain and
sensory processing (they are, Table 3). Here, sexual dimorphism at the genetic level is also
discussed for the TNFα promotor in the context of migraine Fawzi et al., (2015).

To further support the relevance of TNFα sexual dimorphism in the peripheral nervous system,
we investigated TNFα release and signalling in the hDRG directly (Fig 6).

To determine if myeloid immune cells from DRG parenchyma could be a local source of TNFα,
we isolated CD11b+ cells from hDRG via FACS (Fig 6A-B). Following isolation, cells were
stimulated with LPS (10 ng/mL) or vehicle (RPMI media) with or without the intracellular protein
transport inhibitor Brefeldin A for 16 hours. In myeloid cells without Brefeldin A, we found a
robust increase in levels of TNFα following LPS stimulation (SFigure 10, n=5). The statistical
power to test sexual dimorphism (assuming a 2-fold effect size, alpha = 0.1 and n=2-3) is 0.12-
0.14 with a two-sided t-test (`pwr` package, in R). Given this limited power, we are unable to
robustly assess male/female differences based on the variability in the current data.

We complemented this data with myeloid cells co-stimulated with Brefeldin A followed by
fixation, permeabilization, and staining for intracellular TNFα production with a TNFα antibody
(Fig 6C-D). Following LPS stimulation, there was a higher percentage of cells with TNFα staining
(18.7%) when compared to vehicle treated cells (0.36%) (Fig 6C-D).Together, these findings
suggest that hDRG myeloid cells can serve as a local source of TNFα production.

Phosphorylation in the hDRG

In parallel, we examined if TNFα stimulation could drive increases in the phosphorylation of transcription factors p38 and p65. CD11b+ cells were stimulated with TNFα (10ng/mL) or its vehicle (1X PBS) for 30 minutes (Fig 6E). Cells were then collected, fixed, permeabilized, and stained with p38 and p65 antibodies. We observed a higher percentage of CD11b+ cells stained for p38 and p65 upon TNFα stimulation when compared with vehicle treated cells (Fig 6F-G). TNFα treated cells also exhibited a higher median fluorescent intensity signal of both p38 and p65 antibodies (Fig 6H), together suggesting that TNFα can drive the phosphorylation of p38 and p65 in the DRG.

Finally, we asked whether phosphorylation in general may be sexually dimorphic (indirectly of TNFα stimulation) in hDRG. We assessed the phosphorylation status of kinases involved in prominent cellular signalling pathways (e.g. STAT, EGF, ERK1/2) in matched protein samples from our proteomic experiment (4M + 4F) to query sex-specific phosphorylation differences in our pain-free donors (Fig 6I). We see significant differences in Sex ($p = 0.0266$), and the Sex:Site interaction ($p = 2e-06$), but we do not see differences for individual phosphorylation sites (Tukey's honestly significant difference (Tukey's HSD), adjusted p ~ 1 for all sites).

Discussion

This study explores sexual dimorphism in a proteomics dataset of the hDRG. It complements previous ATAC-seq and RNA-seq work, and with deep coverage spanning over 12500 Gene Groups (and ~ 9000 unique proteins) per tissue it provides the most comprehensive proteomic data to date for the hDRG. Despite our small sample size, we report distinct sex differences with a particular focus on TNFα signalling, highlighting that these differences are seen consistently across cohorts and omics technologies. We have paired this to *in vitro* work on freshly isolated hDRG immune cells, confirming the functional relevance of this pathway in the hDRG. Collectively, this indicates a broad sexual dimorphism in the hDRG, with likely functional and clinical implications.

In addition to providing the first human-centric DIA-MS proteomics reference of the hDRG, we also improve the coverage over pre-clinical DRG proteomes in terms of ion channel and membrane protein detection [6]. In the current study, we highlight membrane proteins relevant to pain- and neuroimmune- conditions, even detecting large membrane proteins like PIEZO1.

We validate this dataset across the nerve root and ganglia, highlighting differences in ion channel expression and myelin-related proteins by tissue. In the nerve root, we see an enrichment of terms related to myelination via `myelination`, `axon ensheathment`, and `gliogenesis`, among others, while also observing an enrichment in ion regulation, including `potassium ion homeostasis`, `intracellular sodium ion homeostasis`, and `sodium ion transmembrane transport`. Fewer GO terms are enriched in the ganglia, these are related to `tRNA aminoacylation` and `amino acid activation` highlighting the role of cell bodies in translation.

While both the nerve and ganglia contain primary afferent components (soma vs axons), mRNAs can be transported from the soma for localized translation in the axons [48]. These tissues also contain different proportions of non-neuronal cell types, with satellite glial cells

wrapping around soma and Schwann cells (both myelinating and non-myelinating) playing essential roles in axonal integrity. As a result, peripheral nerves and ganglia are uniquely affected in conditions such as diabetic and chemotherapy-induced peripheral neuropathies, and knowledge of their protein-setup can lay a foundation for future research.

When probing sexual dimorphism in the ganglia and nerve root, we see a shared pattern of `Oxidative Phosphorylation` enrichment in female donors, as well as differences in `TNFα` and `IFNα` signalling. Notably, we see TNFα signalling enriched in male ganglia across datasets, spanning from different accessible gene regions (via ATAC-seq, [25]) to different transcriptional profiles in human participants [45]. By detecting this sexual dimorphism across omics types, as well as across samples from organ donors and human participants, we gain confidence in this being a true biological signal. Paired to this, there is strong evidence from clinical trials that TNFα inhibitors affect men and women differently [13], suggesting a meaningful molecular signature.

In mice, TNFα signalling in the DRG was recently shown to be sexually dimorphic in an experimental autoimmune encephalomyelitis model [39]. In humans, this pathway is frequently studied in circulating immune cells, and TNFα signalling here can be regulated by testosterone levels [37]. Using FACS/flow cytometry on freshly isolated hDRG, we first examine the functional relevance of this pathway in the hDRG specifically: When stimulated, CD11b+ cells from hDRG release TNFα, and TNFα stimulation can alter phosphorylation levels.

Using a targeted phosphorylation approach, we then investigate sexual dimorphism at the level of post-translational modifications. Here, we see an interaction of sex and phosphorylation site in the hDRG. Together this provides an initial avenue for follow-up in humans, as previous work in mice by Maguire and colleagues report phosphorylation differences in the context of the TNFα signalling pathway dimorphism [39].

Limitations

This dataset presents the highest proteome coverage of the hDRG to date and overcomes many of the known difficulties in detecting membrane proteins, but is not complete. We observe ~20% of ion channels with detectable transcripts in bulk RNA-seq data, and we detect less than 10% of the corresponding GPCRs detected in a comparable bulk RNA-seq dataset [45]. Prior studies highlight functional expression of membrane proteins like ASICs, opioid receptors (OPRs), and PIEZO2 in DRG which are missing here, thus the lack of detection is likely technical (given their low abundance), opposed to biological. Increases in sample sizes, paired to further improvements in sensitivity and sample preparation protocols will facilitatethe detection of very low abundant membrane proteins in complex protein mixtures in future work [44,60].

Proximal and distal nerve regions exhibit prominent differences and are uniquely affected by length-dependent pathologies (eg. diabetic peripheral neuropathy [22]), thus our nerve data likely do not represent the proteomes of distal nerves or terminal endings. As technology develops, added information on peripheral endings in the skin and viscera will also be beneficial, as current proteomics of human skin does not include common neuronal markers [21].

Future Directions

The full implications of the sexual dimorphism reported here remain unclear: previous work in
healthy trans men show that testosterone (as hormone replacement therapy, HRT) can shift
immune function in plasma samples in line with the dimorphism of the hDRG we report here
[37]. Within 12 months of starting HRT, these men show increased TNF signalling through NFκB,
paired to a decrease in the IFNα response, highlighting adaptations to immune function in
response to increasing testosterone levels.

Beyond TNFα signalling, varying levels of testosterone in cis men correlate to immune response
after vaccination [26], and HRT in post-menopausal women can elicit immune changes as early
as 1 month [35]. Hormone differences are highly relevant in autoimmune conditions as well:
while HRT in menopausal women may increase the risk of late-onset RA, hormonal oral
contraceptives have been shown to reduce the risk of RA in women [29].

Given the variation across humans, and the adaptive nature of the immune system, the
differences reported likely exist on a spectrum which can change with medication and age. In
the hDRG specifically, the functional implications require more research. We show that TNFα is
released from myeloid cells from DRG parenchyma, and that TNFα stimulation of hDRG
immune cells can result in protein phosphorylation, but a direct causation to sexually
dimorphic PTMs - and any downstream functional changes - is still needed.

Moving forward, differing immune signatures in their local environment should be accounted for
in future studies, especially when considering developmental markers like puberty and
menopause.

This comprehensive, human-centric proteomic dataset complements previously published
ATAC-seq and RNA-seq data, providing a quantitative reference proteome of the hDRG. Data are
searchable at https://sensoryomics.com/.

Using tissue from both human participants and donors, we show evidence for sexual
dimorphism in TNFα signalling spanning the epigenetic to proteomic signature. Taken together,
these results underscore a relevant sexual dimorphism in the hDRG, with significant
implications for sensory and pain-related translation.

Code Availability

Analysis scripts are available at https://github.com/aliibarry/hDRG-proteomics.

Data Availability

Proteomic data (raw and processed) have been deposited via SPARC, DOI:10.26275/z7uy-kuif
[4], and have been added to a searchable database at https://sensoryomics.com. Raw data
have also been deposited to the ProteomeXchange Consortium via the PRIDE partner repository
[43] with the dataset identifier PXD061129. Corresponding metadata and processed expression
matrix are also on github, under `data/processed/*`, and for ease of access the proteomic
expression matrix is also included here as Supplemental Table 11. Source data for the targeted
phosphorylation array are in Supplemental Table 9; imaged membranes and selected ROIs are
shown in Supplemental Figure 11.

Disclosures

The authors declare no conflicts of interest related to this work. DGV and MS have an ongoing
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Tables

Table 1. Donor details.

donor	Sex	Age	DRG	Pain	HTN	Ethnicity	COD
MS-5	F	32	L2	FALSE	FALSE	Black	Head Trauma/GSW
MS-3	F	41	L3	FALSE	TRUE	White	Head Trauma/Motorcycle Accident
MS-7	F	41	L2	FALSE	TRUE	White	CVA/Stroke
MS-2	F	55	L3	FALSE	TRUE	White	Anoxia/Cardiovascular
MS-1	M	33	L3	FALSE	TRUE	White	Head Trauma/MVA
MS-8	M	41	L4	FALSE	TRUE	Black	Head Trauma/GSW/Suicide
MS-4	M	43	L3	FALSE	FALSE	Hispanic	Head Trauma/MVA
MS-6	M	53	L1	FALSE	FALSE	Hispanic	Anoxia/Seizure
FACS-1	M	34	2xL3+T8	FALSE	FALSE	Black	Anoxia
FACS-2	M	37	L1-3, L5	TRUE	FALSE	White	Head Trauma/non-MVA
FACS-3	M	31	L3	FALSE	FALSE	Asian	Anoxia
FACS-4	F	29	L1+L3	FALSE	TRUE	White	Sepsis
FACS-5	F	41	L3-L5	NA	NA	NA	NA

818 *MS: mass spectrometry; FACS: fluorescent activated cell sorting; HTN: hypertension, COD: cause of*

819 *death; GSW: gunshot wound; MVA: motor vehicle accident; CVA: cerebrovascular accident*

Table 2. Example clinical outcomes on TNFα inhibitors and sexual dimorphism

PMID	Citation	Title	Condition	Relevant outcome
Primary examples				
PMID: 19815494	[10]	Effectiveness of adalimumab in treating patients with active psoriatic arthritis and predictors of good clinical responses for arthritis, skin and nail lesions	Psoriatic arthritis	Male sex increased the chance of achieving a good clinical response
PMID: 28762060	[12]	A 2-year observational study on treatment targets in psoriatic arthritis patients treated with TNF inhibitors	Psoriatic arthritis	Females less likely to achieve remission
PMID: 16705046	[31]	Predictors of response to anti-TNF-α therapy among patients with rheumatoid arthritis: results from the British Society for Rheumatology Biologics Register	RA	Females less likely to achieve remission
PMID: 23322995	[63]	Sex-dimorphic adverse drug reactions to immune suppressive agents in inflammatory bowel disease	IBD	Higher ADR in women taking TNFα-inhibitor
PMID: 31310690	[49]	Earlier discontinuation of TNF-α inhibitor therapy in female patients with inflammatory bowel disease is related to a greater risk of side effects	IBD	Higher ADR in women taking TNFα-inhibitor
PMID: 12492735	[14]	Infusion reactions to infliximab in children and adolescents: frequency, outcome and a predictive model	Crohn's	Female sex as a predictor for side effects in TNFα-inhibitors for Crohn's
Example Reviews				
PMID: 37820857	[13]	Sex-oriented perspectives in immunopharmacology	Mixed	TNFis show "higher efficacy and adherence in males, More frequent serious infections in males, more frequent toxic liver disease and lupus-like syndrome in women"
PMID: 29754330	[47]	Gender Differences in Axial Spondyloarthritis: Women Are Not So Lucky	Axial Spondylo-arthritis	Increased TNF levels in only male AS patients, treatment efficacy of TNFi is significantly lower in women compared to men with axSpA, and they have a significantly lower drug adherence
PMID: 26490106	[53]	Rate of discontinuation and drug survival of biologic therapies in rheumatoid arthritis: a systematic review and meta-analysis of drug registries and health care databases	RA	Female sex as a predictor of dicontinuation

RA: Rheumatoid Arthritis, IBD: Inflammatory Bowel Disease

Table 3. Summary of pain-related GWAS hits for the TNFα signalling pathway from the HPGDB [40]

PMID	Loci	Variants	direction	Phenotype	comments from HPGDB, truncated with [...]
PMID:18990769		rs1800629	up	Analgesia	AKA TNF-308G/A
PMID:18990769		rs1800629	up	Analgesia	AKA TNF-308G/A, patients with this genotype did not show improvement in pain scores between two assessment periods
PMID:20035431		rs1800629	up	Migraine	A borderline association was observed in TNFA 308GA genotype in migraine patients versus controls. [...]
PMID:25434717		rs1799724	up	Migraine	TNF-α-857 CT genotype and T allele were associated with increased risk of migraine. TNF-α-857 CT genotype was associated with increased risk of migraine without aura (MO) or with aura (MA) in females or males. *While -857T allele was significantly associated with MO or MA in males and with MA only in females*.
PMID:25434717		rs1800629	up	Migraine	TNF-α-308 GA, AA genotypes and A allele were associated with increased risk of migraine. TNF-α-308 GA, AA genotypes and A allele or AA genotype were associated with increased risk of migraine with aura (MA) and migraine without aura (MO) respectively; *this was more significant in female patients with MA than in males*.
PMID:25304131	TNF	rs1800610	up	Cancer Pain	5-fold increase in the odds of having high pain and high fatigue.
PMID:25315199	TNF	rs3093664	down	Migraine	Associated with increased risk of all migraine types and the subgroup of MRM (Menstrually-Related Migraine).
PMID:26798969	TNFRSF11B	rs2073618	up	Cancer Pain	Increased risk of pain with Aromatase Inhibitor therapy for musculoskeletal toxicity in breast cancer patients.
PMID:30795980	TNFRSF11B	rs2073618	up	TMD disorders	In individuals carrying the CC genotype, there was a 10.80 times greater chance of presenting with TMJ ankylosis. [...]
PMID:30075559	TNFRSF1A	rs767455	up	Neuraxial pain	A higher frequency of G allele was observed in the ankylosing spondylitis group compared with the control group. [...]
PMID:23852407	TNFRSF1B	rs1061622	up	Cancer Pain	Predictive for the symptom cluster of pain, depressed mood and fatigue in lung cancer patients
PMID:30075559	TNFRSF1B	rs1061622	up	Analgesia	Associated with long-term efficacy of etanercept.
PMID:19773451	NFKBIA	rs8904	down	Cancer Pain	Reduced risk of pain in lung cancer patients
PMID:34450027	TNC	rs1330349	up	Arthritis	Significantly associated with hip osteoarthritis
PMID:34450027	TNC	rs1330349	up	Post-operative pain	Significantly associated with total hip replacement pain
PMID:27649267	TLR2	rs3804100	up	Analgesia	This SNP was associated with reduced morphine use overall [...]
PMID:25145994	ICAM1	rs5498	up	Migraine	[...] polymorphism between migraine cases and controls, and between a migraine without aura subtype of migraine cases and control.

TMD: temporal mandibular

Figures

Figure 1. Quantitative proteomics of the hDRG and nerve root. A. Schematic of the ganglia and nerve root (NR, root). B. Gene Groups (protein counts) per sample. C. Gene Group count per tissue. D-E: PCA for tissue (D) and donor (E). F. Volcano plot of differentially expressed proteins (DEPs, ganglia vs nerve root; positive LFC for ganglia), coloured by abs(LFC) and FDR < 0.05. NS: not significant. G. Upset plot showing GO term over enrichment analysis for differentially expressed proteins upregulated in the nerve root. H. Example DEPs for myelin basic protein (MBP) and TRPV1 (adjusted p < 0.01 each). I-K. Overlap of detected Gene Groups with relevant gene sets: related to pain (I), pain drugs (J), peripheral autoimmune

831 conditions (K). HPGDB: Human Pain Genetics Database [40], PGD: Pain Gene Database [36], PL:
832 DoloRisk priority group Pain List [56]. NeuP: neuropathic pain. IBS: Irritable Bowel Syndrome, PsA:
833 Psoriatic Arthritis, RA: Rheumatoid Arthritis. Related to SFig 1. n = 8 donors (4 M + 4F) for ganglia + nerve,
834 with technical replicates (x2 per sample) merged for downstream analyses.

837
Figure 2. Ion channel and G-protein coupled receptor (GPCR) expression across tissues. A. Average
expression by ion channel across tissues. B. Proportion of receptor detection in the proteomics data vs
bulk RNA-seq of the hDRG [45]. C. Dynamic range plot showing ranked intensity across tissues. Key
proteins (gene groups) for sensory neurons and myelin are highlighted. D. Heatmap across all samples
(including each technical replicate) highlighting the dataset completeness for key proteins in C. n = 8
donors (4 M + 4F), with samples for ganglia + nerve; each sample has a technical replicate.

Figure 3. DIA-PASEF proteomics of the hDRG has markers across cell types. A. Schematic. B. PCA,

coloured by cause of death (COD, left) and Ethnicity (right). C. Gene Set Enrichment Analysis (GSEA)

against human neuronal subtype markers. D. GSEA against non-neuronal cell type markers. Related to

SFig. 2-3. n = 4M + 4F donor DRGs.

Figure 4. Sexual dimorphism in the hDRG. A. PCA of ganglia samples (merged by replicate). B-C.
Representative Gene Set Enrichment Analysis (GSEA) pathway enrichments (male = positive, female =
negative LFC). B. TNFα signalling via NFκB with overlap to Inflammatory response. C. IFNα response.
Supervised PCA (sPCA) and corresponding eigen values (PC1) of ganglia samples on DARs (ATAC-seq,
[25]) (D-E), and DEGs (RNA-seq, [55]). Related to SFig 4-7. n = 4M + 4F donor DRGs.

Figure 5. Multi-study factor analysis between bulk RNA-seq and bulk proteomic data, based on
differentially accessible regions from bulk ATAC-seq. A. Scatter plot by factor, for proteomics (left) and
transcriptomics (right). B. Boxplot of Factor scores, stratified by sex, bars = ±1.5*interquartile range. C.
GSEA on factor 3 (ranked loadings). D. Pathways + gene loadings from Gene Set Enrichment Analysis
(GSEA) output of Factor 3. Related to SFig 8.

Figure 6. TNFα signalling in the hDRG. A. FACS experiment overview, for isolation and culturing of myeloid cells followed by stimulation *in vitro* (n = 1 donor, Male). B. Myeloid cell gating strategy, full strategy shown in SFigure 9. C. Representative flow cytometry for Vehicle (left) and LPS (right) stimulation of myeloid cells. D. Percentage of TNFα+ single cells after LPS stimulation. E. Schematic for TNFα stimulation of myeloid cells. F. Transcription factor phosphorylation (p38 and p65) from Vehicle (left) and TNFα (right) treated cells. G. Quantification of (F), % of single cells per condition/gate. H. Normalized Mean Fluorescent Intensity (MFI) for p38 and p65 per condition. I. Phosphorylation array of Male (M) and Female

877   (F) hDRG protein samples (anova: Sex (p = 0.0266), Sex:Site interaction (p = 2e-06), n = 4 per group).

878   Related to SFigure 9-11.

881 **Supplemental Tables**

Table	Contents
Supplemental Table 1	DEP-tissue (ganglia vs nerve)
Supplemental Table 2	GO-tissue, up in ganglia
Supplemental Table 3	GO-tissue, up in nerve
Supplemental Table 4	DEP-sex, ganglia (MvF)
Supplemental Table 5	GSEA-sex, ganglia (padj < 0.05)
Supplemental Table 6	DEP-sex, nerve (MvF)
Supplemental Table 7	GSEA-sex, nerve (padj < 0.05)
Supplemental Table 8	GSEA-MSFA, factor3 (padj < 0.05)
Supplemental Table 9	Phosphorylation Array, source data
Supplemental Table 10	Antibody details for FACS
Supplemental Table 11	Proteomic expression matrix

882 DEP; differentially expressed proteins

Supplemental Figures

SFigure 1. Quality control of the hDRG DIA-PASEF dataset. A. Precursors (q < 0.01) across

reference quality control samples. B. Variance partitioning across all biological samples. C.

Correlation across all biological samples (replicates as _1 or _2). D. PCA by sex and replicate for

unmerged technical replicate samples.

SFigure 2. Quality control for the ganglia. A. Gene Group expression across replicates. B. Gene

Group counts per sample. C. Correlation with hDRG RNA-seq data (average protein expression

and average quantile-normalized transcripts per million (qnTPM)). D. Correlation with hDRG

RNA-seq data separated by receptor group (min 15 proteins per group).

SFigure 3. Gene set enrichment analysis (GSEA) for: A. mouse, neuronal. B. mouse, immune
cells. C. human, neuronal gene sets against the hDRG proteome.

SFigure 4. Sexual dimorphism in the hDRG. A. Volcano plot of DEPs. B. GSEA against hallmark pathways, males = positive. C. Representative gene rankings from B for pathways of interest. D. LFC for proteins in the `Oxidative Phosphorylation` pathway. LFC = log fold change.

904   **SFigure 5**. sPCA eigengenes from A. ATAC-seq DARs and B. spatial-seq DEGs, with tails
905   labelled.

907 **SFigure 6**. GSEA against previously published ATAC-seq and RNA-seq datasets [21,37]. A.

908 ATAC-seq on donor samples, LFC for pseudobulk ATAC-seq spatial data. B. RNA-seq on

909 participant samples.

SFigure 7. Proteome of the nerve root. A. Schematic. B. Gene Groups per sample. C. PCA by
sex. D. Volcano plot, differential expression testing with limma, male = positive. E. GSEA against
Hallmark pathways, male enrichment = positive. F-G. supervised PCA (sPCA) on differentially
expressed genes (DEGs, F) and regions (DARs, G) from previously published reports on hDRG
sexual dimorphism.

SFigure 8. Multi-study factor analysis (MSFA) across omics datasets. A. Ranked factor loadings
from Factor 3, with terms associated with TNFα signalling highlighted in the tail. B. Correlation
between LFC for matched accessible regions, genes, and proteins, LFC for pseudobulk ATAC-
seq spatial data.

SFigure 9. Gating strategies used in flow cytometry experiments. A. Depiction of the gating
strategy used to isolate human dorsal root ganglia myeloid cells using fluorescently activated
cell sorting. B. Depiction of the gating strategy used to measure TNFα production and
phosphorylation of p38 and p65.

SFigure 10. TNFα is released from stimulated myeloid cells from DRG parenchyma. A. TNFα
(pg/mL), normalized per 10000 cells plated from Vehicle-treated or LPS-stimulated cultures. B.
Log2 fold change (LFC) of TNFα amount from LPS / Vehicle cultures (n = 2F + 3M).

SFigure 11. Phosphorylation Array membranes. A. 240 second exposure for round 1 (left) and 2
(right), 2M/2F per round (age-matched, except for Donor 1, where only membrane "A" was
processed). B. Selected ROIs (in yellow) for each phosphorylation site, donor numbers match
"MS-" donors in Table 1. Contrast enhancement for visualization only. Corresponding source
data in Supplemental Table 9.