Cell type mapping of mild malformations of cortical development with

oligodendroglial hyperplasia in epilepsy using single-nucleus multiomics

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ABSTRACT

Objective

Mild malformations of cortical development with oligodendroglial hyperplasia in epilepsy

(MOGHE) are brain lesions associated with focal epilepsy and characterized by increased

oligodendroglial density, heterotopic neurons, and hypomyelination in the white matter. While

previous studies have implicated somatic mutations in the *SLC35A2* gene, the cellular and

molecular mechanisms underlying MOGHE pathogenesis remain elusive. To address this gap, this

study aimed to systematically characterize the cell type composition and molecular alterations of

MOGHE lesions at cellular resolution using single-nucleus multiomics profiling.

Methods

We performed single-nucleus multiomics sequencing to obtain paired gene expression and

chromatin accessibility profiles of > 31,000 nuclei from gray matter and white matter regions of

MOGHE lesions, and compared the results with publicly available neurotypical control datasets.

Results

The analysis of gray and white matter regions from two MOGHE patients revealed significant

cellular composition alterations, including the presence of heterotopic neurons and disease-specific

oligodendrocytes populations within the subcortical white matter. MOGHE-specific

oligodendrocytes were characterized by the upregulation of synaptic functions and enhanced

neuron communication, denoting a possible role in synaptic support and the mediation of glial-

neuron interactions in the disease. On the other hand, MOGHE heterotopic neurons were

characterized by the upregulation of genes associated with neuronal migration and the Wnt

signaling pathway, suggesting a mechanism underlying their atypical localization.

Significance

46   This high-resolution cell type mapping of MOGHE lesions in clinical samples unveils neuronal

47   and glial populations affected by the disease, and provides novel insights into the

48   pathophysiological mechanisms of MOGHE.

Keywords

51   MOGHE; malformations of cortical development; epilepsy; single-nucleus RNA sequencing;

52   single-nucleus ATAC sequencing; gene expression; oligodendrocytes

Key Points

57   •   We provide a multimodal cellular atlas of the human cortical and subcortical regions
58   affected in MOGHE

60   •   MOGHE-associated oligodendrocytes showed upregulation of synaptic functions and
61   enhanced neuron communication

63   •   Neuronal migration and Wnt signaling are upregulated in MOGHE heterotopic neurons

INTRODUCTION

Malformations of cortical development (MCDs) encompass a varied group of disorders that arise

due to disruptions in the development of the cerebral cortex. MCDs can affect individuals across

all age groups, although symptoms typically begin in early childhood and extend to young

adulthood and may include epilepsy, developmental delays, and intellectual impairments[1]. MCDs

typically manifest as focal epilepsy and include focal cortical dysplasia (FCD) as well as mild

malformations of cortical development with oligodendroglial hyperplasia in epilepsy (MOGHE),

a neuropathological entity featuring abnormalities predominantly in the white matter, while

maintaining normal cortical lamination[2]. This latter characteristic distinguishes MOGHE from

FCD, which is characterized by abnormal cortical architecture associated or not with abnormal cell

types[3]. MOGHE was proposed as a distinct pathological entity in 2017[2], and was recently included

in the International League Against Epilepsy (ILAE) classification of cortical malformations[4]. The

increase in oligodendroglia and the appearance of heterotopic neurons in the white matter, together

with the blurring of the gray-white matter junction, are the neuropathological hallmarks of this

condition. The affected white matter tissue presents with proliferation of oligodendroglial cells

expressing Olig2 and irregular areas of hypomyelination due to reduced myelin protein expression.

Clinically, MOGHE manifests as focal epilepsy and treatment might require surgical resection of

the affected region. MOGHE lesions occur most often in the frontal lobe and have early seizure

onset, typically in young children, but may also occur in the temporal lobe, and symptoms may

manifest later even in adulthood[5,6].

Genetic investigations have found that MOGHE patients frequently harbor somatic brain variants

in the *SLC35A2* gene, which encodes a UDP-galactose transporter[7]. One study reported that 45%

(9/20) of MOGHE cases presented truncating or frameshift variants in *SLC35A2*[7], while another

screening identified *SLC35A2* variants in 47.1% (16/35) of cases[8]. In agreement, the loss of

Slc35a2 has been shown to recapitulate the MOGHE-like phenotype in conditional knockout

mouse models[9–11]. Other genes may also play a role, as demonstrated by a case identified with a

variant in the *NPRL2* gene[8]. However, the cellular and molecular mechanisms contributing to

MOGHE pathogenesis have not been systematically studied.

Single-nucleus RNA sequencing (snRNA-seq) and single-nucleus assay for transposase accessible

chromatin sequencing (snATAC-seq) have been applied to dissect the cellular diversity of brain

tissues in neurological conditions, enabling the discovery of dysregulated cell states involved in

diseases including focal MCDs[12–16]. For instance, we previously applied paired snRNA-seq and

snATAC-seq to identify cell populations involved in FCD type II pathology, which allowed us to

uncover vulnerable neuronal subtypes and activated microglial states in these cortical

malformations[15].

In this study, we employed multiomics single-nucleus profiling to systematically analyze the
cellular landscapes of both gray matter and subcortical white matter of MOGHE tissues, and
compared the results with publicly available control datasets. As a result, we characterized
perturbed oligodendroglial and neuronal cell populations associated with the condition. Our
findings provide novel insights into the pathophysiological mechanisms of MOGHE.

MATERIALS & METHODS

Clinical samples and neuropathological diagnosis

Fresh brain samples were collected from two patients who underwent surgery for drug-resistant
focal epilepsy at the Hospital de Clínicas, University of Campinas. All procedures were approved
by the Research Ethics Board of our Institution (CAAE: 12112913.3.0000.5404), and written
informed consent was obtained from patients or their legal guardians before surgery.

Representative surgical specimens were either formalin-fixed and paraffin-embedded (FFPE) or
snap-frozen in liquid nitrogen and stored at −80°C. FFPE samples were submitted to routine
diagnostics in serial 4 μm-sections stained with hematoxylin and eosin (H&E) and submitted to
immunohistochemical reactions. For the latter protocol, the sections were exposed to antibodies
against Olig2 (glial marker; dilution 1:250, polyclonal, Millipore Sigma, cat#AB9610, Darmstadt,
Germany), and MAP2 (neuronal marker; 1:1,000, clone M13, Thermo Fisher, cat#13-1500,
Waltham, MA, USA), overnight at room temperature. Then, a detection solution containing the
secondary antibody and peroxidase (AdvanceTMHRP®, Dako, cat#K4068, Glostrup, Denmark;
or EnvisionTM Flex+, Dako, cat#K8002, Glostrup, Denmark) was added for 30 min at 37°C. 3,3-
diaminobenzidine (DAB) was used as a chromogenic substrate and counterstaining was performed
with hematoxylin. Negative controls (without primary antibody) were run concurrently with all
immunohistochemical reactions. Digitized images were obtained using a CS2 Aperio ScanScope
scanner (Aperio Technologies, Vista, CA, USA).

Samples were neuropathologically classified as MOGHE according to the latest guidelines of the
ILAE[4]. Specifically, the specimens showed an increase in oligodendroglial cells (> 2200 Olig2-

positive cells/mm^2) and an excess of heterotopic neurons in the white matter (>30 MAP2-positive

neurons/mm^2). No cortical cytoarchitectural changes were observed. After histopathological

confirmation of MOGHE, a mirror-frozen section of the tissue used for FFPE analysis was

dissected using a surgical scalp in a Petri dish on dry ice, allowing separation of the GM and WM.

Subsequently, tissue samples were submitted to molecular analyses as described below.

Whole-exome sequencing and somatic mutations

Genomic DNA was extracted from MOGHE-WM tissue using the PureLink Genomic DNA Mini

Kit (cat# K182001, Invitrogen) following the recommended protocol. Exome capture libraries

were generated using the SureSelect Human All Exon v8 kit (Agilent). Paired-end sequencing was

performed at 101 base pairs on each side of the DNA fragment on the Illumina NovaSeq 6000

platform. Deep sequencing obtained an average of 489 M reads per sample, with a mean depth

exome coverage of 530x.

Reads were aligned to the hg38 human reference genome using bwa mem 0.7.17[17]. Bam files were

sorted and duplicates were removed using Picard tools v.2.18.2. Indel realignment and base quality

score recalibration were performed with GATK[18]. Variants were called using the GATK haplotype

caller v4.0.5.1[18] and annotated using SnpEff v.4.3[19]. Somatic mutations including single-

nucleotide variants and indels were detected using Mutect2 (GATK v.4.0.5.1) with the 1000

Genomes panel of normals as controls.

Nuclei isolation and multiome library construction

Nuclei were isolated using the Chromium Nuclei Isolation kit (10X Genomics) according to the

manufacturer's protocol (CG000505, revision A), which is compatible with the Single Cell

Multiome ATAC + Gene Expression assay. Briefly, frozen tissue samples were dissociated with

a pestle in lysis buffer and passed through a nuclei isolation column. The isolated nuclei were then

resuspended in a debris removal buffer, followed by washes to clear any remaining debris.

Recovered nuclei were stained with Trypan blue and counted with a hemocytometer. Nuclei

integrity was evaluated under a microscope at 40X or 60X magnification, and nuclei were

considered viable if they were roundish and with an intact membrane. We then performed library

construction, which included open chromatin transposition and droplet (GEM) formation using a

Chromium Controller (10X Genomics). Libraries were prepared using the Multiome ATAC +

Gene Expression kit (10X Genomics) following the manufacturer's protocol (CG000338, Revision

E). The quality of the purified ATAC and RNA libraries was assessed using TapeStation (Agilent

Technologies).

Sequencing and raw data processing

Multiome libraries were sequenced on the Illumina NovaSeq 6000 platform according to the

sequencing depth and read length guidelines specified in the Multiome kit protocol (CG000338).

Demultiplexing, genome alignment, gene quantification, and peak accessibility analyses for single

nuclei were conducted using the Cell Ranger ARC pipeline. Specifically, fastq files were generated

with cellranger mkfastq, followed by processing with cellranger-arc count v.2.0.2 using the human

genome reference GRCh38 to produce count matrices for RNA and ATAC modalities.

Downstream data processing for both snRNA-seq and snATAC-seq were performed using Seurat

v.5.0.1[20] and Signac v.1.12.0[21] in R v.4.1.2.

snRNA-seq analysis

Ambient RNA decontamination was carried out using DecontX[22] as implemented in the celda[23]

v.1.10.0 R package. Briefly, RNA counts for each sample were processed with the decontX

function, utilizing the raw droplet matrix generated by cellranger count as background. DecontX

then employs a Bayesian approach to estimate and remove contamination in individual cells.

Nuclei were filtered using Seurat based on the following criteria: 1000 < UMI counts < 25,000,

nFeatures > 400, and mitochondrial read percentage (percent.mt) < 15. Doublet identification was

conducted for each sample using scDblFinder[24] v.1.8.0.43.

Standard Seurat processing and normalization steps were applied in each sample, including

NormalizeData, FindVariableFeatures, ScaleData, RunPCA, RunUMAP, FindNeighbors, and

FindClusters. The filtered counts matrix was log-normalized with regression to correct for
mitochondrial gene percentage. To correct batch effects across samples, we recomputed
NormalizeData, FindVariableFeatures and RunPCA on the merged object, and Harmony[25] v.1.2
was used to integrate PCA projections with automatic hyperparameter optimization and default
settings. Harmony's algorithm projects cells into a shared space where they cluster based on cell
type rather than sample-specific attributes like sequencing batch. Dimensionality reduction was
performed using RunUMAP with the first 40 principal components identified using the elbow plot.
Clustering was executed with FindNeighbors and FindClusters functions employing the smart
local moving (SLM) algorithm, with a resolution set to 1.2.

Cell type markers were obtained by applying the Wilcox rank-sum test to RNA-normalized data,
with a log2 fold-change threshold of 0.25 and an adjusted P-value of less than 0.05. Differentially
expressed genes (DEGs) were identified using MAST. For identifying DEGs in MOGHE-WM vs
Control-WM, MAST was applied using the number of counts, mitochondrial percentage and
dataset as latent variables. For MOGHE-WM vs MOGHE-GM, we used the number of counts,
mitochondrial percentage, donor, and brain region as latent variables. Genes with an adjusted P
value of less than 0.05 and fold-change threshold of 2 were considered significant. Mitochondrial
genes and those located in sex chromosomes were removed from the analysis.

Gene Ontology (GO) and Disease Ontology (DO) enrichment was assessed with clusterProfiler[26]
v.4.2.2 and DOSE[27] v.3.20.1 R Packages using the enrichGO and enrichDO functions,
respectively. Enrichment analysis with the Synaptic GO (SynGO) ontology[28] to find
overrepresented synaptic terms was performed in the SynGO online portal v. 1.2
(http://syngoportal.org) using the set of brain expressed genes as the background.

Integration with snRNA-seq from heterotypical white matter

We incorporated control white matter snRNA-seq data from two autopsy donors with no
neurological history, originally sequenced in Elkjaer et al.[29]. Raw sequencing data were obtained
from GEO (accession number GSE231585) and processed with cellranger count v.7.0.1 using the
human genome reference GCChR38. Nuclei were filtered using Seurat based on the following

criteria: 1000 < UMI counts < 25,000, 200 < nFeatures < 4000, and mitochondrial read percentage

(percent.mt) < 1. This dataset was integrated into our MOGHE dataset using the procedure outlined

in the "snRNA-seq analysis" section.

snATAC-seq analysis

Samples were preprocessed in Signac to filter out low-quality nuclei based on these criteria: 1,000

< ATAC fragments < 50,000, ATAC fragments in peaks > 400, nucleosome signal < 2, and TSS

enrichment > 2. Peaks within each sample were identified using MACS2[30]. Standard processing

and normalization were applied with the following functions: RunTFIDF, FindTopFeatures,

RunSVD, and FindClusters. The peak counts matrix for each sample was normalized using

RunTFIDF to adjust for differences in sequencing depth. Dimensionality reduction was performed

with latent semantic indexing (LSI) via the RunSVD function, with UMAP projection utilizing

LSI components 2-30, as the first LSI component was determined to represent technical variation.

Prior to sample integration, a common peak set across samples was created using MACS2, and

peaks in each sample were quantified with the FeatureMatrix function. Peaks located in non-

standard chromosomes and blacklisted regions were excluded from subsequent analyses. We then

re-computed RunTFIDF, FindTopFeatures, and RunSVD on the merged dataset, and applied

Harmony[25] to integrate low-dimensional cell embeddings (LSI components 2-30) across samples,

using parameters similar to those defined for RNA analysis. Chromatin accessibility at the gene

level was computed with the GeneActivity function from the Signac package, which sums the

fragments intersecting the gene body and promoter regions of each gene.

Multimodal data integration

To integrate gene expression and chromatin accessibility data, we utilized Weighted Nearest

Neighbor (WNN) analysis, an unsupervised method that evaluates the contribution of each

modality and constructs a combined graph representing both RNA and ATAC data. WNN analysis

was conducted using the FindMultiModalNeighbors function with 20 neighbors (k.nn), based on

UMAP reductions obtained after Harmony[25] integration. The WNN graph was then employed to

generate a joint UMAP visualization. Clustering based on the WNN graph was performed using

the FindClusters function with the smart local moving (SLM) algorithm. Clusters with fewer than

50 nuclei, a high percentage of doublets, or significant enrichment in mitochondrial markers were

excluded from further analysis.

Cluster annotation

Cell type annotation was performed using Azimuth[20], with the Allen Human Motor Cortex Atlas[31]

as the reference dataset. Azimuth performed label transfer by assigning each cell in the MOGHE

dataset to the most similar cell type in the reference based on gene expression similarity. The cell

type assigned to each cluster was determined by identifying the cell type with the highest mean

frequency within that cluster. The Azimuth annotation was manually validated using marker genes,

as depicted in Figure 1E. Cluster markers were identified using the FindAllMarkers function on

normalized data. Differentially expressed cluster markers were determined with the Wilcox rank-

sum test, applying a log2 fold-change threshold of 0.25 and an adjusted P value of less than 0.05.

For the oligodendrocyte subcluster analysis, markers were determined using the Wilcox rank-sum

test in Seurat with the following parameters: log2 fold-change > 1, percent of cells expressing the

marker (pct.1) > 0.3, and adjusted P < 0.05. Mitochondrial genes and those located in sex

chromosomes were removed from marker genes.

Differential cellular abundance

We utilized the permutation_test function from the scProportionTest R package[32] v. 0.0.0.9 to

assess changes in cell type composition between tissue types (MOGHE-WM *vs* Control-WM and

MOGHE-WM *vs* MOGHE-GM). The significance test used 10,000 permutations, and cell type

changes with a false discovery rate (FDR) less than 0.05 and a fold difference greater than 2 were

considered statistically significant.

Gene signature analysis

Gene signature scores were computed using the AddModuleScore function from the Seurat
package applied to log-normalized RNA data. Signatures for oligodendrocyte subtypes were
obtained from Jakel et al., 2019[33] and Sadick et al., 2022[34].

Motif enrichment analysis

We utilized chromVAR v3.3.2[35] and Signac to perform motif analysis. Nuclei-level motif activity
was computed using the RunChromVAR function in Signac with the set of background peaks
matched appropriately. Differential activity of motifs was determined using the FindMarkers
function, applying a likelihood ratio (LR) test with ATAC fragment counts as a latent variable, a
minimum percentage of cells expressing the motif (min.pct) set to 0.05, and an adjusted p-value
cutoff of < 0.05. To ensure biologically-relevant results, motifs were further filtered based on the
expression of their associated regulators, which were required to be expressed in at least 10% of
the cells within a given cluster/cell type.

Cellular communication analysis

Cellular communication was performed using the CellChat R package v.2.1.2[36]. In brief, CellChat
utilizes a mass-action-based model to quantify the signaling communication probability between
two cell groups using a database of known ligand-receptor interactions. The cellular
communication probabilities were computed using the computeCommunProb function with the
parameter type set to triMean, and communications between groups with fewer than 10 cells were
filtered out. Differential signaling interactions between MOGHE subclusters were calculated by
performing   differential   expression   analysis   with   identifyOverExpressedGenes   and
netMappingDEG functions, with a percentage of cells expressing the gene > 0.1 and p-value $<$
0.05. Significant interactions were classified as upregulated for ligands exhibiting a fold-change $>$
1.5.

RESULTS

Multimodal single-nucleus profiling of MOGHE lesions

We obtained frozen brain specimens from two donors aged 22 and 57 years with a confirmed

pathological diagnosis of MOGHE after epilepsy surgery (Table 1). After isolating nuclei from the

MOGHE gray matter (MOGHE-GM) and white matter regions (MOGHE-WM), we performed

paired snRNA-seq and snATAC-seq on each nucleus using the 10X Genomics Multiome assay to

measure chromatin accessibility and gene expression at nuclei resolution (Figure 1A). The

sequenced tissues fulfilled the histopathological criteria for MOGHE, presenting with increase of

the oligodendrocyte density in the WM and excess of heterotopic neurons (Figure 1B, Methods).

Deep exome sequencing of the donors using the MOGHE-WM has not detected somatic variants

in *SLC35A2* or in genes previously reported in epileptogenic brain lesions[37].

After filtering to remove low-quality nuclei and doublets (Methods), we obtained 31,659 nuclei

derived from MOGHE samples in the multiome snATAC-seq + snRNA-seq dataset (Figure 1C).

Next, we integrated our MOGHE dataset with snRNA-seq performed on white matter from two

neurotypical individuals (Control-WM) obtained from Elkjaer et al.[29], resulting in a total of 39,743

nuclei (Figure 1D, Table 1). Clustering analysis identified 33 distinct clusters after integration of

MOGHE and control nuclei (Figure S1A). Cell type annotation was carried out using Azimuth[20],

and subsequently validated through manual inspection of canonical marker genes (Figure 1E). The

Azimuth annotation enabled confident labeling of most of these clusters (Figure S1B), and most

clusters were shared across multiple samples (Figure S1C). After annotation, the majority of nuclei

was classified as oligodendrocytes (OLs), followed by excitatory neurons (ENs, further divided

into upper- and deep-layer subsets), astrocytes, inhibitory neurons (INs, subclassified into Vip,

Sst, Pvalb, Lamp5 and Scng subtypes), oligodendrocyte precursor cells (OPCs), microglia and

endothelial/vascular and leptomeningeal cells (Endo/VLMCs). As expected, samples derived from

white matter (MOGHE-WM and Controls-WM) were predominantly composed of OLs, while

neurons were not detected in Controls-WM and primarily located within MOGHE-GM (Figure

S1D).

We also examined gene accessibility profiles computed based on the chromatin accessibility

(snATAC-seq) for the same set of markers (Figure 1F). Gene accessibility displayed a strong

correlation with gene expression across cell type markers, with the exception of some endothelial

markers, denoting the agreement between data modalities. Thus, our single-nucleus profiling

identified the various cortical cell types in GM and subcortical WM regions, revealing the cellular

diversity of MOGHE lesions.

Cellular and gene expression changes in MOGHE white matter

To investigate disease-associated changes in the WM, we analyzed cell type proportions between

MOGHE-WM and Controls-WM as well as MOGHE-WM and MOGHE-GM. Compared to

Controls-WM, MOGHE-WM tissue had a higher proportion of ENs, INs and microglia, denoting

the expansion of heterotopic neurons and OLs in the WM of the abnormal tissue (Figure 2A). Also,

MOGHE-WM had an increased proportion of OLs and a decreased abundance of astrocytes, ENs,

and INs compared to MOGHE-GM, reflecting the expected differences in cell composition

between cortical and subcortical regions (Figure 2B).

We also analyzed differentially expressed genes (DEGs) between tissue conditions and within each

cell type. Neurons were not considered in this analysis since they were not identified in Controls-

WM. In MOGHE-WM compared to Controls-WM, there were significant gene expression changes

in most glial populations, including astrocytes, microglia, and OLs (Figure 2C). When compared

to MOGHE-GM, OLs in MOGHE-WM were the most affected population with a large number of

downregulated genes (Figure 2C). Collectively, these analyses indicate that the cellular

composition of subcortical MOGHE-WM was characterized by an increased OL population and

the presence of heterotopic neurons, which recapitulated key hallmarks of the disease. Meanwhile,

gene expression changes revealed that nearly all glial cell types in subcortical MOGHE-WM were

affected by the condition.

Pathological oligodendrocyte states in MOGHE

To identify MOGHE-associated OLs, we performed a subclustering analysis in the OLs

compartment and assessed whether these subpopulations were enriched in disease tissue. Notably,

subclusters 4 and 7 (OL_4 and OL_7), which clustered separately from the major OLs population,

were predominantly observed in MOGHE (Figure 3A). Differential cellular abundance analysis

confirmed that OL_4 and OL_7 were significantly expanded in MOGHE-WM compared to

Controls-WM (Figure 3B, top). We inspected the subcluster distribution in individual samples and
according to their localization (Figures S2A,B). The OL_4 subcluster was detected in both
sequenced MOGHE samples and derived from WM and GM regions (n = 2,344 cells, 48%
MOGHE-WM, 52% MOGHE-GM). The OL_7 subcluster was detected mostly in the WM of the
G23 sample (n = 1,201 cells, 97% MOGHE-WM, 3% MOGHE-GM). Thus, this analysis
uncovered disease-specific OLs subpopulations emerging in the cortical and subcortical regions
of MOGHE lesions.

Next, we used two approaches to functionally annotate these MOGHE-associated OLs. First, we
performed differential marker analysis followed by enrichment analysis to identify subcluster-
enriched biological themes. This approach revealed subcluster-specific marker genes for OL_4 (n
= 220, adj. P < 0.05) and OL_7 subclusters (n = 967, adj. P < 0.05) (Supplemental Table 1, top 50
markers shown in Fig. 3C). OL_4 marker genes were strongly associated with synapse-related
functions such as modulation of chemical synaptic transmission (adj. $P = 6.6 \times 10^{-19}$), regulation
of trans-synaptic signaling (adj. $P = 6.6 \times 10^{-19}$), regulation of membrane potential (adj. $P = 1.6 \times$
10^{-15}), synaptic organization (adj. $P = 4.9 \times 10^{-14}$) and synapse assembly (adj. $P = 4.7 \times 10^{-10}$)
(Figure 3D, Supplemental Table 1). Notably, these synaptic functions were also overrepresented
among OL_7 markers, however they were not enriched in other OLs subclusters (Figure 3D). For
instance, top expressed OL_4 markers included synaptic-related genes *APOE4*, *MEF2C*, *LFRN5*,
PLCB1, *ADGLR2* (Figure 3C). On the other hand, top OL_7 markers included synaptic-related
genes *C3*, *SYT7*, *CUX2* and *CACNA1A* (Figure 3C).

Based on these observations, we used the Synaptic Gene Ontology (SynGO), a comprehensive
resource containing curated annotation of synaptic genes, to further investigate the functions
associated with OL_4 and OL_7 subsets. In the OL_4 subcluster, we found that 28 genes (out of
top 50 markers) were linked to synaptic components (q = 6.8×10^{-18}, Figure S2C, Supplemental
Table 2), of which 17 were postsynaptic genes (q = 2×10^{-10}) and 15 presynaptic genes (q = $4.1 \times$
10^{-10}). Similarly, we observed significant enrichment for synaptic genes in OL_7 (n = 13, q = 1.5
$\times 10^{-4}$), especially posynaptic genes (n=10, q = 1.7×10^{-4}) (Figure S2C, Supplemental Table 2).
Of note, functional enrichment using the Disease Ontology showed that MOGHE-specific OL_4
and OL7 were the only subclusters enriched for genes related to epilepsy and brain diseases (Figure
3E, Supplemental Table 1). For instance, OL_4 and OL_7 expressed markers linked to epilepsy[38]

such as *SLC1A2, KNCQ2, KCNQ3* (Figure 3H). Collectively, these analyses showed that

MOGHE-specific OLs upregulated synaptic components and epilepsy-related genes.

The other approach to characterize MOGHE OLs involved comparison with gene signatures from

pathological OLs in the literature. Previous snRNA-seq studies described the OLs subset known

as the immune subtype (ImOLGs) and the integrated 2 subtype (Int2), which were identified in

multiple sclerosis and Alzheimer's disease, respectively[33,34]. We used the AddModuleScore from

Seurat to score these pathological signatures in OLs identified in MOGHE lesions. Notably, OL_4

and OL_7 exhibited the highest scores for ImOLGs (Figure 3F) and Int2 (Figure 3G) signatures,

indicating that MOGHE-specific OL_4 and OL_7 shared marker genes with these OLs subtypes

identified in other neurological diseases. Common markers with the ImOLGs subtype included

MEF2C and *APOE* (expressed in OL_4), and immune genes *CD74, DOCK8, APBB1IP* and *C3*,

which are highly expressed in OL_7 (Figure 3H).

In addition, *OLIG2*, which encodes the protein considered to be a neuropathological marker of the

expanded oligodendroglia cell clusters in MOGHE[2,7,39], was expressed only in the MOGHE-

specific OL_7 subpopulation (Figure S2E), even though the chromatin in *OLIG2* promoter region

was accessible across all OL subclusters (Figure S2F). On the other hand, *OLIG2* was not detected

in MOGHE-specific OL_4, thus indicating that other markers need to be considered for detecting

pathological OLs in the tissue.

Altogether, these in-depth analyses of the OL compartment enabled us to identify MOGHE-

specific OLs cell states associated with synapse regulation and sharing common markers with

pathological OLs from other neurological conditions.

Cellular communication of MOGHE oligondendrocytes

We inferred the cell communication network among the identified OLs subclusters and other cell

types using CellChat[40]. First, we analyzed the global communication patterns by considering major

cell types and including OL subclusters (Figure 4A). Neurons exhibited the most robust

communication patterns, particularly with other neurons. Notably, among the OL subclusters,

OL_4 and OL_7 showed the highest communication strength, especially with neurons and OPCs.

Next, we conducted a differential analysis using CellChat to identify specific signaling interactions

in OL_4 and OL_7 compared to other OL subclusters. This analysis revealed 12 and 63

significantly upregulated ligand-receptor pairs in OL_4 and OL_7, respectively. Examples of

upregulated interactions in OL_4 (Figures 4B,D) included neuronal growth factor signaling

(NEGR1 (OL) → NEGR1 (OL/Neuron)), neurexin signaling (NRXN1 (OL) → CLSTN2 (Neuron)

and NRXN1 (OL) → LRRTM3 (OPC)), and neuroligin signaling (LRRC4C (OL) → NTNG1

(OPC)). In OL 7 (Figures 4C,D), the upregulated pathways involved PTPR signaling (PTPRS (OL)

→ LRNF5 (OL) and PTPRS (OL) → LRRTM4 (Neuron/OPC)), neurexin signaling (NRXN1 (OL)

→ NGLN3 (OL) and NRXN1 (OL) → CLSTN2 (Neuron)), and neuregulin signaling (NRG1 (OL)

→ ERBB3 (OPC/OL)). In line with previous GO analyses, these interactions within the neurexin,

neuroligin and neuregulin signaling pathways are implicated in synaptic organization[41,42] and

oligodendrocyte differentiation[43,44]. These results highlight the distinct communication patterns of

MOGHE-specific OL_4 and OL_7 subclusters particularly through interactions with neurons and

OPCs, suggesting their functional specialization in synaptic regulation.

Characterization of heterotopic neurons in MOGHE

Next, given that the appearance of heterotopic neurons (HNs) is a key histological feature of

MOGHE, we asked whether misplaced neurons could be identified in the WM of MOGHE

samples. We identified a subpopulation of HNs derived specifically from MOGHE-WM in both

patients (n = 246; Figures 5A,B), while HNs were not detected in Control-WM samples. Most of

these HNs were annotated as ENs from layers 5/6 (n = 129; 52%), and the remaining nuclei

consisted mainly of INs subtypes Lamp5, Sst and PvalB. The HNs subpopulation expressed a very

distinct set of markers such as cell-adhesion genes (*CDH5* and *CDH3*), transmembrane proteins

(*TMEM275* and *TMEM233*), ion channels (*KCNK2*, *CACNA1B*), and the neurotransmitter *NPY*

(Figure 5C, Supplemental Table 3).

To identify molecular functions in this abnormal neuronal subpopulation, we analyzed DEGs

between HNs (i.e. MOGHE-WM neurons) and total MOGHE-GM neurons, identifying 255

upregulated and 233 downregulated genes (Figure 5D, Supplemental Table 3). Enriched GO terms

associated with downregulated genes included negative regulation of neuron projection,

cytoplasmic translation, and cell junction assembly (Figure 5E). On the other hand, upregulated

molecular functions included positive regulation of cell projection, the Fc receptor-mediated

stimulatory signaling pathway, and the Wnt signaling pathway (Figure 5F), which has been shown

to regulate neuronal migration[45,46].

In line with the DEG analysis, a motif enrichment analysis based on the snATAC-seq data

identified that FOX transcriptional regulators were among the top activated motifs in HNs (Figure

5F). The FOX family has been shown to regulate the Wnt signaling pathway[47,48], which could

explain the distinctive Wnt activation in HNs. Therefore, these results indicate that HNs in

MOGHE consisted of ENs from deep cortical layers with increased expression of pathways

associated with neuronal migration.

DISCUSSION

In this study, we applied multiomic single-nucleus profiling to systematically map the cellular

landscapes of cortical and subcortical regions affected in MOGHE, a type of focal MCD

characterized by white matter abnormalities and associated with epilepsy. We identified significant

alterations in cell type composition in the WM of MOGHE tissues and uncovered distinct

pathological cell populations in this condition.

We identified disease-specific OLs subpopulations emerging in MOGHE tissue with unique

transcriptomic profiles. Gene ontology and cell-to-cell communication analyses revealed

functional differences between MOGHE-specific OLs subclusters and the remaining

oligodendrocytes, notably the upregulation of synaptic genes and enhanced neuron

communication. Thus, we postulate that MOGHE-specific OLs may be involved in synaptic

support and the mediation of glial-neuron interactions in the disease.

OPCs are the specific glial cells that directly form synapses with neurons[49]. Yet, oligodendroglia

are a transcriptionally heterogeneous lineage with distinct populations emerging in response to

neurological conditions[50,33,51]. For example, snRNA-seq in human OLs from WM controls and

multiple sclerosis found that OPCs and committed oligodendrocytes precursors (COPs) were

enriched in synapse regulation[33]. Sadick et al also identified OLs populations enriched for

transcripts involved in synapse assembly and organization in Alzheimer's disease[51]. Thus, the

emergence of synapse-enriched OLs in neurological conditions associated with WM degradation

and myelin loss[49,52] such as multiple sclerosis and Alzheimer's has been described, however the

roles of these synapse-enriched OLs remain unknown.

Some of the markers associated with MOGHE OLs have established functions. For example,

APOE4, a marker of the OL_4 subpopulation, has been shown to impair oligodendrocyte

differentiation[53] and downregulate myelination via cholesterol dysregulation[54]. Cholesterol

biosynthesis is essential for myelin biogenesis[55,56]. Thus, these dysregulated OLs states might

contribute to WM matter degradation and the formation of irregular zones of hypomyelination

typically observed in MOGHE-WM. On the other hand, the OL_7 subcluster expressed markers

of immune cells such as *C3*, *CD74*, and *CD83*, therefore sharing a common transcription profile

with the immune oligodendroglia (ImOLG) population described in multiple sclerosis[33].

Other glial cell types may also contribute to the disease, as evidenced by microglia increase in

MOGHE-WM. Microglia have been linked to epilepsy and their effects can be pro- or anti-

inflammatory depending on the disease stage[57,58]. Moreover, resident microglia are required for

maintaining myelin health and their dysregulation may be related to the emergence of pathological

OL states[59].

We also identified the appearance of misplaced neurons in the WM (HNs), another key

pathological hallmark of MOGHE. Even though MOGHE HNs were a rare population, we could

identify specific biological functions in this neuronal subset. We found that MOGHE HNs

displayed increased expression of neuronal projection genes and Wnt signaling pathway.

Interestingly, Wnt signaling has been linked to axonal/dendrite remodeling and neuronal

plasticity[60,61], and regulates neuronal migration by modulating the microtubule cytoskeleton[45,46],

providing a potential mechanism for the abnormal localization of HNs. Furthermore, alterations in

Wnt signaling induce neuronal hyperexcitability[62,63], a defining feature of epilepsy. Thus,

MOGHE HNs represent a disease-specific neuronal population that may contribute to the

development of epileptogenic circuits in MOGHE.

While our findings provide valuable insights into the cellular landscape of MOGHE, this study has

limitations due to its restricted sample size. For instance, while the MOGHE-specific OL_4

subcluster was observed in both patients, OL_7 was predominantly derived from a single patient.

Future studies with larger cohorts are warranted to confirm the MOGHE-associated OL
subpopulations identified here and may reveal additional cellular states linked to the disease.
Furthermore, our results indicated that some MOGHE-specific OLs derived from the OL_4
subcluster were located in the GM, possibly due to the blurring of the gray-white matter junction
in lesions. Spatial transcriptomics and/or in situ immunohistochemistry studies using the markers
identified in this study will be needed to determine the localization of MOGHE-specific OLs in
lesions. In addition, incorporating cases with *SLC35A2* loss-of-function variants will be important
for understanding the impact of this common genetic variation on the cellular heterogeneity of the
disease.
511
512 In summary, this high-resolution mapping of MOGHE lesions in clinical samples represents the
513 first cellular atlas of human tissue affected by the disease, providing a comprehensive view of the
514 perturbed cell populations and gene expression alterations involved in this pathology.
515

516 **Data Availability**
517 Raw and processed sequencing datasets from paired snRNA-seq and snATAC-seq generated in
518 this study were deposited at the Gene Expression Omnibus under accession code GSE284073.
519

520 **Author contributions**
521 D.F.T.V. and F.R. designed the study. M.L. performed single-nucleus assays. I.C.G. and D.F.T.V.
522 performed data analyses. C.L.Y., E.G., H.T., M.K.M.A., F.C., and I.L-C contributed to clinical
523 sample collection. L.K., I.B. and F.R. performed histopathological analyses. I.C.G. and D.F.T.V.
524 wrote the manuscript. All authors reviewed and approved the final version of the manuscript.
525

Funding Sources
This work was supported by Fundação de Amparo à Pesquisa do Estado de São Paulo (FAPESP)
[grant numbers 2019/07382-2, 2022/01530-2, 2019/08259-0, 2013/07559-3]; the Chan
Zuckerberg Initiative DAF, an advised fund of the Silicon Valley Community Foundation [grant
number DAF2021-237598]; Conselho Nacional de Pesquisa (CNPq) [grant number
311923/2019-4]; Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (CAPES).
532

Declaration of interests

None of the authors has any conflict of interest to disclose.

Ethics approval and patient consent

We confirm that we have read the Journal's position on issues involved in ethical publication and

affirm that this report is consistent with those guidelines. This study was approved by the

University of Campinas' Research Ethics Committee (CAAE: 12112913.3.0000.5404), and

written informed consent was obtained from patients or their legal guardians.

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TABLES WITH TITLES AND LEGENDS
715

716   **Table 1** - Description of the clinical samples.

Condition	Specimen identifier	Donor	Dissection	Sex	Age at surgery (y)	Age at onset (y)	Lobe	Side of resection	Tissue source	Sequenced nuclei
MOGHE (This study)	G23_GM	G23	GM	F	22	11	Frontal	Right	Epilepsy surgery	4,603
	G23_WM	G23	WM	F	22	11	Frontal	Right	Epilepsy surgery	10,804
	G39_GM	G39	GM	M	57	36	Temporal	Left	Epilepsy surgery	1,593
	G23_WM	G39	WM	M	57	36	Temporal	Left	Epilepsy surgery	14,659
Controls (Elkjaer *et al.*, 2024)	C3	C3	WM	M	68	NA	NA	NA	Post-mortem	3,810
	C4	C4	WM	F	50	NA	NA	NA	Post-mortem	4,274

718   Abbreviations: F, female; M, male; NA, not available.
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FIGURES

 Figure 1. Multimodal single-nucleus sequencing of MOGHE tissue.

 (A) Schematic of MOGHE samples and study design. Nuclei from the MOGHE grey matter

 (MOGHE-GM) and white matter regions (MOGHE-WM) isolated and profiled by snRNA-seq

 and snATAC-seq using the Multiome assay (10X Genomics). Created with Biorender.

 (B) Representative histopathological findings of a brain surgical sample with MOGHE sequenced

 in the study. **B1.** Hematoxylin and eosin (H&E) stained section showing an overview of the

 resected tissue. The white rectangle indicates a subcortical WM region near the GM-WM junction

 presented in B2-B4. **B2.** Clusters of oligodendroglial cells either perivascular (arrow head) or

around heterotopic neurons (arrow). **B3.** Immunohistochemistry (IHC) for MAP2 (neurons)

depicts scattered heterotopic neurons (arrow). **B4.** IHC for Olig2 (oligodendrocytes) showing an

irregularly distributed increase of the oligodendroglial cells, either isolated or in clusters (arrow

heads). Scale bars: 4 mm (Figure B1) and 200 μm (Figures B2-B4).

(C) Joint uniform manifold approximation and projection (UMAP) visualization of snATAC-seq

and snRNA-seq from nuclei sequenced in MOGHE samples, colored by annotated cell type.

(D) UMAP visualization of snRNA-seq from MOGHE samples integrated with neurotypical WM

controls obtained from Elkjaer et al.[29], and colored by cell type.

(E) Dot plot displaying gene expression levels for canonical markers of major cortical brain cell

types. The size of each dot represents the proportion of cells expressing the marker, while the color

indicates the average expression levels.

(F) Dot plot displaying gene accessibility levels computed on the basis of chromatin accessibility

for the same marker genes shown in (E). The size of each dot represents the proportion of cells

expressing the marker, while the color indicates the average gene accessibility.

Astro, astrocytes. EN, excitatory neurons. Endo/VLMC, endothelial/vascular and leptomeningeal

cells. IN, inhibitory neurons. OL, oligodendrocytes. OPC, oligodendrocyte precursor cells.

Figure 2. Cell type abundance and gene expression changes in MOGHE.

(A) Barplots denoting cell types abundance in MOGHE-WM and Control-WM samples. The *x*-axis indicates the cell type proportion, and the *y*-axis indicates the tissue type. Error bars indicate the standard error of the mean. Differential cell type abundance was performed using the scProportionTest tool (Methods). Asterisks indicate significant changes considering an FDR < 0.05 and fold-change > 1.5. The asterisk color indicates the tissue type with the higher abundance.

(B) Barplots denoting cell types abundance in MOGHE-WM and MOGHE-GM samples. Legends are defined as in (A).

(C) Differentially expressed genes (DEGs) between MOGHE-WM and Control-WM, in non-neuronal populations. DEGs were obtained using MAST, with a fold-change > 2 and adjusted P

value < 0.05. (see Methods). The *x*-axis indicates the cell type, and the *y*-axis indicates the number

of DEGs.

(D) DEGs in MOGHE-WM vs MOGHE-GM. Legend is defined in (C).

Astro, astrocytes. EN, excitatory neurons. Endo/VLMC, endothelial/vascular and leptomeningeal

cells. IN, inhibitory neurons. OL, oligodendrocytes. OPC, oligodendrocyte precursor cells.

Figure 3. Identification of a MOGHE-specific oligodendrocyte population.

(A) UMAP representation of oligodendrocytes (OLs) from MOGHE-WM, MOGHE-GM and Control-WM, colored by subcluster (left) and tissue type (right).

(B) Bar plot showing the OL subcluster proportions in MOGHE-WM and Control-WM samples. The *x*-axis indicates the subcluster proportion, and the *y*-axis indicates the tissue type. Differential subcluster abundance was performed using the scProportionTest tool (Methods). Asterisks indicate significant changes considering an FDR < 0.05 and fold-change > 2. The asterisk color indicates the tissue type with the higher abundance. Error bars indicate standard error of the mean.

(C) Heatmap showing top marker genes of MOGHE-specific OL_4 and OL_7 subclusters. Biological functions or disease association of selected markers are indicated. The complete list of markers is provided in Supplemental Table 1.

(D) Dot plot showing top enriched Gene Ontology (GO) terms in OL subclusters computed using clusterProfiler[26]. The size of each dot represents the number of genes associated with the GO term, while the color reflects the enrichment P-value.

(E) Dot plot showing top enriched Disease Ontology (DO) terms in OL subclusters computed using DOSE[27] and clusterProfiler[26]. The size of each dot represents the number of genes associated with the DO term, while the color reflects the enrichment P-value.

(F) Boxplots depicting activity scores of the immune oligodendroglia (ImOLG) signature from Jakel et al[33] in OL subclusters. The *x*-axis indicates the subcluster, and the *y*-axis indicates the activity score. The center line of the boxplot shows the median of the data; the box limits show the upper and lower quartiles; the whiskers show 1.5 times interquartile ranges. Overlay dots represent activity scores in individual nuclei.

(G) Boxplots depicting activity scores of the Int2 OL signature from Sadick et al[34] in subclusters. Legends are defined in (H).

(H) Dot plot displaying expression levels of gene sets overexpressed in OL_4 and OL_7: epilepsy-associated genes from Macnee et al.[38], genes from the ImOLG signature from Jakel et al.[33], genes from the Int2 signature from Sadick et al.[34], and disease-associated oligodendrocytes (DAOs) from Pandey et al.[64]. The size of each dot represents the proportion of cells expressing the gene in subclusters, while the color indicates the normalized expression level.

Figure 4. Cell communication analysis of oligodendrocytes (OLs) subclusters.

(A) Heatmap showing interactions across cell types and OLs subclusters inferred by CellChat. The *y*-axis indicates the sources (senders) of the interaction, and the *x*-axis indicates the targets (receivers) of the interaction. Color denotes the interaction strength.

(B) Chord diagram of upregulated ligand-receptor pairs in OL_4 compared to remaining OLs. Colors indicate cell states. Chords are drawn from ligands to receptors and the chord width is proportional to interaction strength. Inner color bars indicate the targets of the corresponding outer color bar. Significant interactions were computed based on percent of cells expressing the ligand > 0.1, p-value < 0.05, and ligand fold-change > 1.5.

(C) Chord diagram of upregulated ligand-receptor pairs in OL_7 vs remaining OLs. Legends are

defined in (B).

(D) Dot plot of 15 top ligand-receptor pairs upregulated in OL 4 and OL 7 with highest

communication probability. The x-axis indicates the OL subcluster, and the y-axis indicates the

ligand-receptor pairs. Dot size indicates the p-value, and dot color indicates the interaction

strength. Interactions are shown with OL as sources and either neurons (left), OLs (middle), or

OPCs (right) as targets. Light gray vertical bars highlight OL_4 and OL_7 interactions.

Figure 5. Characterization of heterotopic neurons in MOGHE.

(A) UMAP representation of neuronal nuclei from MOGHE-WM and MOGHE-GM, colored by neuronal subtype.

(B) UMAP representation of neuronal nuclei from (A), colored by tissue origin. Heterotopic neurons (HNs) are indicated in red.

(C) Dot plot displaying gene expression of HNs marker genes. The size of each dot represents the proportion of cells expressing the marker, while the color indicates the average expression levels.

(D) Volcano plot displaying differentially expressed genes (DEGs) in MOGHE-WM *vs* MOGHE-

GM. DEGs were obtained using MAST, with a fold-change > 2 and adjusted P value < 0.05. (see

Methods). The *x*-axis indicates the log2 fold-, and the *y*-axis depicts the significance of the change

(-log10 of the adjusted P-value). The color indicates the gene status. The complete list of DEGs is

available on Supplemental Table 3.

(E) Gene-term network depicting downregulated genes and corresponding Gene Ontology (GO)

molecular functions. GO terms are represented as grey nodes, with size corresponding to the

number of associated genes. Genes are colored according to the fold-change values. Enriched GO

terms were computed with clusterProfiler.

(F) Gene-term network illustrating upregulated genes and corresponding molecular functions.

Legends are defined in (E).

(G) Dot plots depicting motif activity of FOX transcription factors in MOGHE-GM and MOGHE-

WM neurons. Motif activity was computed using chromVar based on the snATAC-seq datasets.

Dot color corresponds to motif activity, and the size corresponds to the proportion of nuclei with

open chromatin peaks containing a binding site for the motif. The motif sequence recognized by

the regulator is indicated in the left.

SUPPLEMENTARY FIGURES

847
848 **Figure S1, related to Figure 1. Clustering and annotation.**
849
850 **(A)** UMAP visualization of nuclei clusters. Clustering was performed in the RNA graph obtained
851 after Harmony integration of MOGHE-WM, MOGHE-GM and Control-WM snRNA-seq samples.
852
853 **(B)** Heatmap depicting the annotation of 40 nuclei clusters performed by Azimuth based on the
854 Allen atlas of the human cortex as a reference. The color indicates the proportion of Azimuth
855 subtypes identified in each cluster.
856
857 **(C)** Bar graphs denoting the representation of samples across nuclei clusters.
858
859 **(D)** Bar graphs showing the proportion of cell types across samples.
860

Figure S2, related to Figure 3. Additional information related to MOGHE-specific oligodendrocytes.

(A) UMAP visualization of oligodendrocytes (OLs) in individual MOGHE samples (G23 and G29) and controls (C3, C4), colored by subcluster.

(B) UMAP visualization of OLs in individual MOGHE samples and controls colored by tissue type.

870 **(C)** Synaptic Gene Ontology (SynGO) term enrichment analysis based on the top 50 markers genes
871 of the OL_4 subcluster. In the sunburst plot, terms are colored according to their Q-value, and the
872 number of genes corresponding to each synaptic GO term is indicated.
873

874 **(D)** SynGO term enrichment analysis based on the top 50 markers genes of the OL_7 subcluster.
875 Legend is defined as in (C).
876

877 **(D)** Violin plot of *OLIG2* expression in OL subclusters. The *x*-axis indicates the subcluster and the
878 *y*-axis indicates the normalized expression level.
879

880 **(E)** Chromatin accessibility profile of *OLIG2* in OL subclusters from snATAC-seq. The
881 normalized ATAC signal is depicted in a region of $+/-$ 1 kb around the gene start/end coordinates.
882

885 **SUPPLEMENTARY TABLES**
886

887 **Supplemental Table 1.** Subcluster markers and Gene Ontology (GO)/Disease Ontology (DO)
888 term enrichment analysis associated with OL_4 and OL_7 oligodendrocyte subclusters, related to
889 Fig. 3.
890

891 **Supplemental Table 2.** Synaptic Gene Ontology (SynGO) term enrichment analysis based on the
892 top 50 markers genes of OL_4 and OL_7 subclusters, related to Fig. S2.
893

894 **Supplemental Table 3.** Information related to heterotopic neurons including gene markers,
895 differentially expressed genes, and enriched gene ontology terms, related to Fig. 5.
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