Integrative Analysis of Single-cell and Bulk RNA Sequencing Reveals Macrophage Heterogeneity in Lyme Arthritis

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Abstract

Introduction Lyme arthritis (LA) is a common late-stage manifestation of Lyme disease caused by *Borrelia burgdorferi* (Bb) infection. Macrophages play a crucial

role in LA pathogenesis, yet their heterogeneity and functional states within the

arthritic microenvironment remain poorly understood.

Methods We integrated single-cell RNA sequencing data from ankle joint tissues of

Bb-infected C57BL/6 mice with bulk RNA sequencing data from both infected ankle

joints and bone marrow-derived macrophages. We developed a LA mouse model and

validated key findings through histopathological examination and RT-qPCR analysis.

Results We identified nine distinct cell types in the joint microenvironment with

significant compositional shifts during disease progression. Analysis of 16,617

Macrophages/Monocytes revealed seven functionally distinct subpopulations with

differential responses to infection. Pseudo-time trajectory analysis demonstrated three

principal differentiation pathways from monocyte-derived macrophages toward

anti-inflammatory, TNF+, and IL1b+ inflammatory phenotypes. Cell-cell

communication analysis revealed significantly altered TGF-β signaling networks in

LA, with the Tgfb1-(Tglbr1+TgIbr2) axis playing a critical role. GSVA and pathway

analyses showed metabolic reprogramming from oxidative phosphorylation toward

glycolysis in macrophages during infection. Through integrated analysis and LASSO

regression, we identified four characteristic genes (SIRPB1C, FABP5, MMP14, and

EGR1) as potential LA biomarkers and developed a diagnostic nomogram with high

predictive accuracy.

Conclusion Our integrative analysis provides comprehensive insights into

macrophage heterogeneity and functional plasticity in LA, identifying characteristic

biomarkers and potential therapeutic targets. The metabolic reprogramming and

altered TGF-β signaling networks we identified may contribute to disease

pathogenesis and offer new avenues for intervention strategies.

Key words: Lyme arthritis, macrophage heterogeneity, single-cell RNA sequencing,

bulk RNA sequencing, biomarkers, cell-cell communication.

1. Introduction

Lyme arthritis (LA), the most common and persistent late-stage manifestation of

Lyme disease, develops from infection with the tick-borne spirochete Borrelia

burgdorferi (Bb), typically emerging months after initial infection[1,2]. Characterized

by intermittent or persistent swelling and pain predominantly in large joints, especially the knee, LA significantly impairs quality of life. Without antibiotic treatment, approximately 60% of Lyme disease patients develop arthritis[3,4]. The condition's complexity arises from pathogen-host immune system interactions that trigger inflammation and, in antibiotic-resistant cases, chronic arthritis[5,6]. Despite extensive research into immune responses, bacterial components, and genetic susceptibility, the complete pathophysiological mechanisms of LA remain incompletely understood.

Extensive research has shown that macrophages play a central role in the pathogenesis of LA[7,8]. Upon Bb infection, they secrete CCL4 and CCL2 chemokines that recruit monocytes and T cells to infection sites while amplifying inflammation through phagocytosis and antigen presentation[9,10]. Both animal and human studies confirm that macrophages induce arthritis directly and through pro-inflammatory cytokines (IL-1β, TNF-α, IFN-γ), which maintain and exacerbate joint inflammation[11-13]. However, macrophages also contribute to *Borrelia* clearance and inflammation resolution[14]. Their activity is regulated by polarization states, cytokine environment, and immune cell networks, making a comprehensive understanding of their role in LA pathogenesis essential.

With the rapid development of single-cell RNA sequencing (scRNA-seq) technology, researchers have been able to analyze tissue heterogeneity at the single-cell level[15-17], facilitating precise studies on the roles of individual cells such as macrophages in the progression of LA. However, studies integrating scRNA-seq with bulk RNA sequencing to investigate macrophage roles in LA remain scarce. In this study, we established a Bb-infected C57BL/6 mouse model and performed transcriptome sequencing of ankle joint tissues to analyze gene expression changes during arthritis development. We implemented a multi-omics integrative approach, correlating mouse joint tissue transcriptome data with publicly available bone marrow-derived macrophage transcriptome and scRNA-seq datasets to construct a comprehensive gene expression network elucidating host immune responses to Bb infection. This multidimensional approach enhances our understanding of

macrophages' central role in LA pathogenesis and provides theoretical foundation for

developing targeted therapies.

2. Methods

2.1 Single-cell RNA Sequencing Data Quality Control and Processing

The scRNA-seq data of LA was accessed from the GSE233850 dataset, which is

established in the GEO database corresponding to a published article "Single-cell

RNA sequencing of murine ankle joints over time reveals distinct transcriptional

changes following *Borrelia burgdorferi* infection" [18]. The single-cell RNA

sequencing data processing workflow is as follows: Raw data was obtained from

ankle joint samples of 1 normal and 4 *Borrelia burgdorferi*-infected C57BL/6J mice

from the GSE233850 dataset. Quality control criteria include: more than 500

expressed genes per cell, each gene expressed in at least 3 cells, and mitochondrial

RNA content less than 20%[19]. Data processing using the Seurat package:

Normalization was performed using the NormalizeData function (natural logarithm of

expression values multiplied by total gene expression ×10000), followed by

identification of 2000 highly variable genes using FindVariableFeatures, data

centering using ScaleData, and finally data integration using FindIntegrationAnchors

(RunHarmony) with 2000 anchors to eliminate batch effects. A total of 42,385 cells

were obtained for subsequent analysis[20].

2.2 Dimensionality Reduction and Data Clustering

To visualize high-dimensional gene expression data effectively[21,22], we

implemented a sequential dimensionality reduction and clustering protocol. We first

performed principal component analysis on highly variable genes using RunPCA,

followed by data integration with RunHarmony using 2000 anchor points. We then

applied FindNeighbors and FindClusters functions for clustering analysis. Finally, we

employed RunUMAP (dims=1:14, resolution=0.5) for dimensionality reduction

visualization to display cell clustering results.

2.3 DEG, Marker Gene and Active Subgroups Identification

To characterize each cluster, a comprehensive manual annotation was performed.

Using the Seurat package's FindAllMarkers function, we identified differentially

expressed genes (DEGs) with |log2FoldChange|>1 and adjusted P-value<0.05, and

determined cell type-specific marker genes. We employed the AUCell R package to

calculate pathway activity scores in single-cell data[23]. After extracting the RNA

expression matrix from our Seurat object with GetAssayData, we ran AUCell_run

with predefined gene sets to quantify pathway enrichment per cell. For pathways of

interest, we extracted area under the curve (AUC) values and incorporated them into

the Seurat metadata.

2.4 GO and KEGG Pathway Enrichment Analysis

We conducted GO functional enrichment and KEGG pathway enrichment analyses on

differentially expressed genes using the clusterProfiler package (v3.14.3) and

visualized results with the ggplot2 package[24,25].

2.5 Pseudo-time Analysis

To analyze the continuous dynamic changes in cell types and associated gene

expression, we used Monocle 3 to reconstruct cellular developmental trajectories from

single-cell data[26]. We extracted six macrophage subtypes (Tnf+ inflammatory,

anti-inflammatory, monocyte-derived, Il1b+ inflammatory, tissue-repair, and

monocyte-derived macrophages) to create a cell_data_set object. Following PCA

preprocessing, we removed batch effects with the align_cds function using orig.ident

as the alignment group. We performed dimensionality reduction via

reduce_dimension and applied low-resolution clustering to ensure distinct trajectories

per cluster. We constructed the cellular trajectory network using learn_graph and

employed a custom function to automatically identify monocyte-derived macrophages

as developmental origin points. We then ordered cells along the developmental

trajectory with order_cells and visualized both pseudo-time progression and

expression patterns of the top five genes using plot_cells and

plot_genes_in_pseudotime functions.

2.6 Cell-Cell Communication Analysis

Using the CellChat package (v1.0.0) to analyze intercellular communication networks,

cell communication relationships are constructed based on expression data of known

ligand-receptor pairs to infer interaction patterns and their abundance between

different cell types[27].

2.7 C57BL/6 Mouse LA Modeling and Transcriptome Sequencing

Mice: Female C57BL/6J mice (22-24g, 4-6 weeks old) from Beijing Vital River

Laboratory Animal Technology Co., Ltd. were housed in SPF-grade facilities at

Kunming Medical University's School of Basic Medicine with 12-hour light/dark

cycles at 21.5°C, free food and water access, and daily bedding changes. The study

was approved by Anning First People's Hospital Medical Ethics Committee (Approval

No.2024-046-01). Bacteria propagation and infection: *Borrelia burgdorferi* strain B31

(ATCC-35210) was cultured in complete BSK-II medium at 37 °C with 5 % CO_2 and

100 % humidity. Experimental mice received bilateral footpad injections of spirochete

suspension ($1\times10^{\hat{}}6$/50μl per side), while controls received equivalent PBS volumes.

Ankle joint swelling was measured biweekly using calipers, with X-ray examinations

performed on randomly selected mice. Sample Collection and Transcriptome Analysis:

On day 16 post-surgery, we sampled 6 mice per group. Half the samples underwent

histopathological examination with 4 μm paraffin sections for HE staining. The

remaining samples (approximately 80 mg of ankle joint tissue) were sent to LC Bio

Technology CO., Ltd. (Hangzhou, China) for transcriptome sequencing using the

Illumina Novaseq 6000 platform with paired-end sequencing (PE150 mode).

Bioinformatics analysis was conducted on the standardized clean data.

2.8 Transcriptome Data Integration

2.8 Transcriptome Data Integration

Based on our research focus on the role of macrophages in LA synovial tissue, we

obtained transcriptome sequencing dataset (GSE125503, platform GPL17021) of

Bb-infected macrophages from the Gene Expression Omnibus (GEO) database. This

dataset includes 14 samples derived from bone marrow-derived macrophages

(BMDMs) of C57BL/6 mice, comprising 4 control samples and 10 Bb-infected

samples. Subsequently, we integrated our team's Bulk-transcriptome data with the

GSE125503 Bulk-transcriptome data. We merged different datasets by columns using

the cbind function and obtained common genes through Reduce(intersect, geneList).

Batch effects were then corrected using the ComBat function. Following this, we

established criteria for identifying DEGs using the R package DESeq2. Specifically, we applied a threshold of |log$_2$ FoldChange|> 1 and adjusted P-value <0.05 to select DEGs for subsequent analysis[28,29].

2.9 Least Absolute Shrinkage and Selection Operator (LASSO) Regression Analysis

We identified intersection genes between macrophage-related single-cell sequencing DEGs and our merged transcriptome dataset DEGs. Using these common differential genes, we constructed and validated a model using the Least Absolute Shrinkage and Selection Operator (LASSO) method[30].

2.10 Quantitative Reverse Transcription PCR (qRT-PCR)

Cell Culture and Treatment: RAW264.7 cells were purchased from Shanghai Zhongqiao Xinzhou Biotechnology Co., Ltd. The cells were infected with Bb (MOI=1) for 6 hours, or treated with vehicle control (PBS). Samples were stored at -80°C until analysis. RNA Extraction and qRT-PCR Analysis: Total RNA was extracted using MolPure® Cell/Tissue Total RNA Kit (#19221ES50, ShangHai Yeasen Biotechnology) and reverse transcribed into complementary DNA using Hifair®III 1st Strand cDNA Synthesis SuperMix for qPCR (#11141ES60, ShangHai Yeasen Biotechnology). qRT-PCR was performed on the Gentier 96R Real-Time PCR System (Tian Long) using Hieff unicon universal blue Qpcr SYBR Master mix (#11184ES08, ShangHai Yeasen Biotechnology) under the following conditions: 95°C for 2 minutes, followed by 40 cycles of 95°C for 1 second and 60°C for 30 seconds. Expression of target genes was normalized to Gapdh using the $2^{(-\Delta\Delta CT)}$ method. The primers were synthesized by Tsingke Biotechnology (Beijing). The primer sequences (5'-3') used to amplify SIRPB1C were forward, TCAGCAGACAGTGGCCTTTA and reverse, CTGAGAGCGGACATCCCTAG. The primers used to amplify FABP5 were forward, CGGGAAGGAGAGCACGATAA and reverse, TTGTTGCATTTGACCGCTCA. The primers used to amplify MMP14 were forward, AGGCCAATGTTCGGAGGAAG and reverse, GTGGCACTCTCCCATACTCG. The primers used to amplify EGR1 were forward, AGTGATGAACGCAAGAGGCA and reverse TAGCCACTGGGGATGGGTAA. The primers used to amplify GAPDH were

207 forward, TGTTGCCATCAATGACCCCT and reverse

208 TCGCCCCACTTGATTTTGGA.

2.11 Construction and Testing of LA Diagnostic Nomogram Model

210 Using the "pROC" and "rms" R packages[31,32], we developed a nomogram for LA

211 diagnosis. Risk scores were calculated based on the expression levels of each

212 candidate optimal feature gene, with the total risk score defined as the sum of all

213 individual gene risk scores. The diagnostic value of this nomogram for LA was

214 evaluated through decision trees, calibration curves, and ROC curves.

2.12 Statistical Analysis

216 Analyses and visualizations were performed using R (version 4.2.1) and GraphPad

217 Prism (version 9.0.2). Data are presented as mean ± SEM. We compared groups using

218 two-tailed Student's t-test or Mann-Whitney U test, with significance defined as $P <$

219 0.05 (*), $P < 0.01$ (**), and ns for not significant.

3. Results

3.1 Single-cell Transcriptome of LA

We analyzed 5 samples from the GSE233850 dataset, including ankle joint samples

from 1 uninfected normal C57 mouse and 4 paired Bb-infected C57 mice. After

removing low-quality data, 42,385 cells were retained for analysis. Following

normalization and PCA, we retained the first 14 dimensions and visualized clustering

using UMAP, dividing cells into 20 clusters (Figure 2A). SingleR package analysis

identified 9 distinct cell types (Figure 2B). Figures 2C and 2D showed the single-cell

transcriptome atlas of normal and LA samples and across samples, respectively. The

cell population comprised: Macrophages/Monocytes (16,617 cells, 39.2%; high

expression of Csf1r, C1qa, Adgre1, Syngr1), Neutrophils (4,068 cells, 9.6%; S100a9,

S100a8, Csf3r), T/NK Cells (2,472 cells, 5.8%; Ccl5, Nkg7, Cd3d, Cd3e), B Cells

(7,582 cells, 17.9%; Cd79a, Cd79b, Ms4a1, Ighm), DC Cells (2,492 cells, 5.9%;

H2-Eb1, Klrd1, Slamf7), Endothelial Cells (608 cells, 1.43%; Cldn5, Pecam1, Cdh5),

Fibroblasts (5,999 cells, 14.2%; Col1a1, Col3a1, Dcn), Synoviocytes (475 cells, 1.1%;

Prg4, Htra4, Anxa8), and Cycling Cells (2,072 cells, 4.9%; Mki67, Top2a, Pclaf) as

shown in Figures 2E-2G. Figure 2H showed their proportions between groups, with

the LA model exhibiting higher percentages of Fibroblasts, Cycling cells, and

Endothelial cells, while Macrophages/Monocytes, B cells, T/NK cells, Neutrophils,

DC cells, and Synoviocytes showed relatively lower proportions.

3.2 Single-Cell GSVA Pathway Analysis of KEGG Metabolic Signatures

Figure 3 showed GSVA enrichment analysis using the AUCell algorithm, featuring

differential gene expression across cell subpopulations (Figure 3A). We analyzed 20

KEGG signaling pathway activities within various cellular subsets (Figure 3B), with

particular focus on glycolysis/gluconeogenesis and oxidative phosphorylation

pathways visualized through violin plots (Figure 3C-D), UMAP projections (Figure

3E, 3G), and box plots (Figure 3F, 3H). Results showed increased

glycolytic/gluconeogenic activity and decreased oxidative phosphorylation in

Macrophages/Monocytes following Bb infection, indicating a metabolic shift from

aerobic to anaerobic metabolism and highlighting metabolic reprogramming in host

cells during pathogenic challenge.

3.3 Single-cell Transcriptome Landscape

Due to Macrophages/Monocytes' critical immunoregulatory role in LA, we analyzed

16,617 of these cells from all samples. Figure 4 showed scRNA-seq analysis

identified 7 distinct subtypes: Anti-inflammatory macrophages (3,331 cells; high

expression of Olfml3, Sparc, Vsig4), TNF+ Inflammatory macrophages (3,186 cells;

Tnf, Cxcl2, Ccl7), Tissue-Repair macrophages (2,052 cells; Vegfa, Arg1, Adam8),

Mono-derived macrophages (2,030 cells; Mrc1, Gas6), Il1b+ Inflammatory

macrophages (1,924 cells; Il1b, Clec4n, Ptgs2), Ly6c+ inflammatory Mono (1,034

cells; Ly6c2, Hp, Thbs1), and Progenitor cells/activated Mono (1,033 cells; Plac8,

Slfn1). Comparison between normal and LA model groups (Figures 4C-4G) revealed

significant compositional differences: the LA model showed decreased proportions of

Anti-inflammatory macrophages, Mono-derived macrophages, and Ly6c+

inflammatory monocytes, while TNF+ Inflammatory macrophages, Il1b+

Inflammatory macrophages, Tissue-repair macrophages, and Progenitor

cells/activated monocytes increased (Figure 4H).

3.4 Macrophage-Related Enrichment Analysis

To elucidate biological functions of Macrophage/Monocyte marker genes, we

performed GO and KEGG enrichment analyses. GO functional enrichment of

differentially expressed genes (Figure 5A-B) revealed: Biological Processes (BP)

primarily related to endosomal transport, precursor metabolite and energy generation,

hydrolase activity upregulation, cellular respiration, vesicle organization, and

oxidative phosphorylation. Cellular Components (CC) mainly associated with

mitochondrial protein complexes, vacuolar membranes, early endosomes, and

lysosomal/endosomal structures. Molecular Functions (MF) included phospholipid

binding, GTPase regulatory activity, nucleoside-triphosphatase regulation, active

transmembrane transport, phosphatidylinositol binding, and GTPase interactions.

KEGG pathway analysis (Figure 5C) showed signature genes enriched in

inflammatory response pathways linked to energy metabolism regulation, including

bacterial epithelial invasion, osteoclast differentiation, Toll-like receptor signaling,

rheumatoid arthritis, carbon metabolism, HIF-1 signaling, glycolysis/gluconeogenesis,

arginine/proline metabolism, and adherens junctions. Figure 5D shows differential

analysis within Macrophages/Monocytes, while Figure 5E presents a diagonal

volcano plot. GO enrichment bar plots for upregulated and downregulated genes

(Figure 5F) revealed distinct patterns: upregulated genes showed significant

enrichment in pathways governing precursor metabolite generation, nucleotide

metabolism, phospholipid processes, and lipid/small molecule metabolic regulation.

Downregulated genes showed predominant enrichment in oxidative phosphorylation,

aerobic and cellular respiration, energy derivation through organic compound

oxidation, and mitochondrial respiratory chain/NADH dehydrogenase complex

assembly.

3.5 Pseudo-time Analysis

Using Monocle 3 R, we analyzed macrophage differentiation trajectories. Figure 6A

showed dynamic RNA expression changes across five macrophage subgroups, while

Figure 6B illustrateed pseudo-time progression from dark to light-colored cells. Our

analysis identified monocyte-derived macrophages as the primary origin point,

diverging into three distinct developmental paths: toward anti-inflammatory

macrophages, Tnf+ inflammatory macrophages, and Il1b+ inflammatory macrophages.

The trajectory map highlighted macrophage plasticity during disease progression,

with tissue-repair macrophages primarily functioning as an intermediate state

evolving toward Tnf+ inflammatory phenotypes rather than maintaining reparative

functions (Figure 6C-6D). Figure 6E showed pseudo-time dynamics of C1qa, C1qb,

and C1qc genes during LA-related macrophage development. These genes exhibit

similar expression patterns: high expression in early pseudo-time (0-5), particularly in

mono-derived, anti-inflammatory, and TNF+ inflammatory macrophages, followed by

gradual decline in mid-to-late pseudo-time (5-10), with tissue-repair macrophages

showing the most pronounced decrease and Il1b+ inflammatory macrophages

maintaining intermediate expression.

3.6 Cell-to-Cell Communication Between Macrophages and Other Cells

To elucidate macrophage interactions during LA pathogenesis, we analyzed

cell-to-cell communication using scRNA-seq data. Macrophage interactions with

other cells were significantly enhanced in LA tissue, both in interaction number and

strength (Figure 7A-7C). Ligand-receptor binding analysis revealed complex changes:

CXCL, VEGF, VISFATIN, MIF, GALECTIN, COMPLEMENT, and OSM showed

increased receptor binding, while PTN, CHEMERIN, TNF, IGF, GAS, SEMA3,

BAFF, TGF-β, PDGF, CSF, EGF, and CCL exhibited decreased binding (Figure 7D).

The heatmap of the TGF-β signaling pathway showed strong associations between

anti-inflammatory macro and Il1b+ inflammatory macro and tissue-repair macro

(Figure 7E). Network centrality analysis of the inferred TGF-β signaling network

identified that all cell populations are sources of TGF-β ligands. Importantly,

CellChat predicted that Il1b+ inflammatory macro and tissue-repair macro

significantly contributed to TGF-β signal production in LA, revealing a complex

TGF-β signaling network with multiple ligand sources targeting a large portion of

anti-inflammatory macro. Furthermore, anti-inflammatory macro emerged as the

dominant mediator and influencer, suggesting their role as a gatekeeper of cell–cell

communication (Figure 7F). The violin plot showed significant expression of the

TGFB1 gene across all cell types, and a notable decrease in TGFBR2 expression was

observed in anti-inflammatory macro, tissue-repair macro, and Tnf+ inflammatory macro (Figure 7G). Tissue-repair macrophages exhibited high intercellular communication volume in LA (Figure 7H-7I), with the Tgfb1-(Tglbr1+TgIbr2) axis contributing most significantly to TGF-β signaling (Figure 7J). Interestingly, The CellChat showed that the majority of TGF-β interactions among cells are paracrine, with only anti-inflammatory macro, Tnf+ inflammatory macro, and tissue-repair macro demonstrating prominent autocrine signaling (Figures 7K,7L).

3.7 Bulk-transcriptome sequencing of C57BL/6 Mouse Ankle Joints

To examine macrophage specificity in LA, we merged transcriptome data from C57BL/6 mouse ankle joints with public data from bone marrow-derived macrophages (GSE125503, platform GPL17021) and conducted differential gene analysis. Figure 8A-8B show the heatmap and volcano plot of differential genes. We identified 397 DEGs and intersected them with 222 macrophage-related DEGs from scRNA-seq, yielding 15 overlapping genes (Figure 8C): SIRPB1C, CD14, FABP5, IL2RG, MCU, MMP14, MXRA8, EGR1, MSR1, CLEC4D, PIRB, IL1B, H2-AA, GYPC, and ITGA6. After normalizing the expression matrix, LASSO regression analysis identified four candidate optimal feature genes: SIRPB1C, FABP5, MMP14, and EGR1 (Figure 8D-8E), with their expression profiles shown in Figures 8F-G-H-I.

3.8 Construction and testing of a signature gene-based nomogram for predicting LA

Using the "RMS" R package, we constructed a diagnostic nomogram for LA based on the four characteristic genes (Figure 8J) and evaluated its predictive capability. The calibration curve showed minimal difference between actual and predicted LA risk, indicating high model accuracy (Figure 8K). Decision curve analysis (DCA) demonstrated potential patient benefit from this nomogram (Figure 8L), while ROC curve analysis further confirmed the model's accuracy (Figure 8M).

3.9 Validation of Candidate Optimal Feature Genes

In our LA mouse model, C57BL/6 mice developed hind leg ankle joint swelling 2 days after Bb injection, peaking at approximately 2 weeks before gradually subsiding after 4-5 weeks. H&E staining showed inflammatory cell infiltration and substantial

edema in joint synovial and surrounding soft tissues, while bone and cartilage
remained intact (Figure 9A). By day 16, experimental mice displayed significant joint
swelling and mild stiffness compared to PBS controls, without skin ulceration or
blackening (Figure 9B). X-rays revealed soft tissue edema (Figure 9C). RT-qPCR
analysis confirmed significantly increased expression of SIRPB1C, FABP5, MMP14,
and EGR1 in Bb-infected samples from both RAW264.7 cells and joints of C57BL/6
mice compared to controls.

4. Discussion

LA is one of the most common late-stage manifestations of Lyme disease. Without
timely diagnosis and treatment, it can lead to persistent arthritis and long-term
functional impairment [33]. While antibiotics are generally effective, 10-20% of
patients develop antibiotic-refractory LA (ARLA) [34'35]. Single-cell RNA
sequencing (scRNA-seq) now enables analysis of disease pathogenesis at
unprecedented resolution [36'37], revealing cellular composition and transcriptomic
changes associated with LA. Macrophages, as key effector cells of the innate immune
system, play a central role in the pathogenesis of LA [38], regulating inflammatory
responses and influencing disease progression through cytokine and chemokine
secretion. C57BL/6 mice provide an ideal model for studying transcriptional and
cellular changes during infection due to their uniform genetic background. In this
model, arthritis symptoms resolve spontaneously despite persistent bacteria,
effectively simulating host immune adaptation to chronic infection[39-42]. As the
disease progresses, bacterial numbers gradually decrease while the host immune
response changes, achieving long-term control of infection[18]. This self-healing
process provides valuable insights into the self-limiting nature of LA. This study
analyzed macrophage differential gene expression in LA using GSE233850
scRNA-seq data from C57BL/6 mouse models. By integrating bulk transcriptome
datasets through joint analysis and machine learning, we identified and validated core
macrophage-related genes in LA. The synovial microenvironment (SME), comprising
immune cells, synovial cells, and stromal cells[43], critically influences LA
progression and prognosis[44]. Antibiotic-refractory LA patients often experience

poor outcomes[5], with some showing persistent macrophage activation despite Bb clearance[45]. Since synovial macrophages can either promote or inhibit inflammation through M1/M2 polarization, understanding these mechanisms is essential for improving treatment[46]. Single-cell RNA sequencing has become vital for characterizing synovial immune cells in inflammatory arthritis[47,48]. Therefore, systematically studying macrophage functional states and regulatory networks in LA, and developing macrophage-based prognostic models, has significant clinical relevance.

Single-cell transcriptome analysis of ankle joints from uninfected and Bb-infected C57BL/6 mice identified 9 cell types, with significant shifts during LA development: Fibroblasts increased while Macrophages/Monocytes decreased. We found seven Macrophage/Monocyte subsets with notable compositional differences between normal and LA models. LA samples showed decreased anti-inflammatory macrophages, monocyte-derived macrophages, and Ly6c+ inflammatory monocytes, with increased TNF+ and Il1b+ inflammatory macrophages, tissue-repair macrophages, and progenitor cells. These subsets serve distinct functions: anti-inflammatory macrophages maintain homeostasis by suppressing inflammation[49-51]; TNF+ inflammatory macrophages mediate inflammatory and chemokine signaling[52-54]; tissue-repair macrophages orchestrate inflammation regulation and tissue remodeling[55,56]. Monocyte-derived macrophages play a crucial regulatory role in various diseases, particularly in liver regeneration, where they facilitate tissue repair through migration, proliferation, and apoptosis[57].In neuroinflammation, such as stroke, these cells migrate to the brain via CCR4 and CCR5 receptors, emerging as potential therapeutic targets[58]; IL-1β+ inflammatory macrophages initiate inflammatory cascade [59-61]; Ly6c+ inflammatory monocytes drive inflammation and angiogenesis[62,63]; and monocytes/progenitor cells respond to systemic inflammation in various diseases[64-66]. Despite the overall reduction in Macrophages/Monocytes under pathological conditions, IL1b+ inflammatory and tissue-regenerative macrophages significantly increased while anti-inflammatory macrophages declined, indicating functional reprogramming within the macrophage

spectrum. Despite overall Macrophage/Monocyte reduction, IL1b+ inflammatory and

tissue-regenerative macrophages increased while anti-inflammatory macrophages

declined, indicating functional reprogramming. Pseudo-temporal trajectory analysis

revealed three main differentiation pathways from monocyte-derived macrophages:

anti-inflammatory, TNF+ inflammatory, and IL1b+ inflammatory lineages.

Cell-cell communication analysis identified significant changes in Transforming

growth factor-β (TGF-β) -receptor interactions during pathological states, suggesting

potential therapeutic targets for LA. Heat map analyses showed decreased expression

of TGF-β signaling pathway-related genes between various cell types in LA compared

to normal tissues. We identified the critical ligand-receptor pair

Tgfb1-(Tglbr1+TgIbr2) within TGF-β signaling networks showing enhanced

intercellular communication across diverse cell types in LA. TGF-β, a cytokine that

regulates inflammation and promotes fibrosis[67], plays a dual role in Lyme disease.

TGF-β1 levels are higher in early/non-chronic patients compared to chronic patients,

who show impaired TGF-β1 synthesis when stimulated by spirochetes[68]. This

difference may explain the mechanism of disease progression to chronicity: elevated

TGF-β1 levels represent an effective anti-inflammatory immune response, promoting

pathogen clearance; whereas the reduction of TGF-β1 in chronic patients leads to

insufficient persistent anti-inflammatory response[69]. Patients with

antibiotic-refractory LA show excessive inflammation and fibrosis in synovial

tissue[70]. TGF-β affects vascular reconstruction and may promote vascular

occlusion[71], suggesting occlusive microvascular lesions in antibiotic-refractory LA

patients may be linked to TGF-β activity.

GSVA and KEGG pathway analyses showed that Bb infection shifted macrophage

metabolism from oxidative phosphorylation to glycolysis. Previous studies confirm

metabolic reconfiguration's critical role in inflammation: lipopolysaccharide-induced

metabolic transition is essential for inflammatory response[72]; while increased

glycolysis enhances macrophage inflammatory functions in ankylosing spondylitis

and myocardial infarction[73] [74]. These findings support our conclusions about

metabolic reprogramming of Monocytes/Macrophages in LA.

We developed a LA model in C57BL/6 mice and analyzed transcriptome data from

infected ankle joints combined with public dataset GSE125503 to investigate

macrophage roles in LA. Through differential gene expression and LASSO regression,

we identified four characteristic genes: SIRPB1C, FABP5, MMP14, and EGR1.

(Signal Regulatory Protein Beta 1C (SIRPB1C) belongs to the signal regulatory

protein family involved in inflammation and immunity. SIRPB1C is a key member of

the signal regulatory protein beta family. Studies show SIRPB1 knockout reduces

inflammatory cytokines (IL1RA, CCL2, IL-8) [75], while another family member,

SIRPα, suppresses phagocytosis and immune cell migration, with SIRPα-targeted

antibodies reducing inflammation[76'77]. Fatty acid-binding protein 5 (FABP5), a

lipid chaperone involved in inflammatory pain modulation, is present in human

synovium[78'79]. Its inhibition significantly reduces cytokine and chemokine

secretion, suggesting potential impact on osteoarthritis-related inflammatory pain[80].

FABP5 is upregulated in intestinal macrophages during inflammatory bowel diseases,

and its inhibition prevents inflammatory M1 macrophage differentiation, reducing

colitis in mice[81].

MMP14 (membrane type I matrix metalloproteinase or MT1-MMP) is a collagenase

that degrades extracellular matrix, particularly type II collagen in cartilage[82]. In

rheumatoid arthritis, MMP14 on synoviocytes and macrophages promotes cartilage

degradation[83]. Studies show MMP14 inhibition preserves joints: the inhibitor

FR255031 reduces cartilage degradation in arthritis models, while selective

MT1-MMP inhibition protects joints and enhances anti-tumor necrosis factor therapy

efficacy, suggesting potential combination treatments[84'85].

Early Growth Response 1 (EGR1), a transcription factor, plays a crucial role in

host-pathogen interactions[86]. While no direct EGR1-LA link has been previously

documented, this factor is rapidly induced by pathogens, cytokines, and stressors, and

regulates inflammation, angiogenesis, and matrix remodeling[87'88]. EGR1 promotes

cartilage angiogenesis through the NT-1/DCC-VEGF pathway, accelerating cartilage

deterioration[89]. As an inflammatory mediator, it enhances pro-inflammatory IL-1

effects while suppressing anti-inflammatory PPARγ[90]. EGR1 also regulates

extracellular matrix genes, affecting cartilage integrity[91]. Our research suggests

EGR1 likely plays an essential role in LA inflammatory regulation.

Although our research provides valuable insights, it has several limitations that need

to be addressed in future studies. First, the sample size of the integrated bulk RNA

sequencing data is relatively limited. Second, regarding the exploration of molecular

mechanisms: while we validated the transcriptional changes of core differential genes

through in vitro and vivo experiments, we have not fully understood the functional

roles of these genes in LA pathogenesis. Future research should aim to validate these

findings in larger cohorts and employ functional experiments to confirm the roles of

these cells, genes, and pathways in disease progression.

5. Conclusion

Integrative single-cell and bulk RNA sequencing revealed seven macrophage

subtypes in LA, a glycolytic shift, and disrupted TGF-β signaling. Pseudo-time

analysis traced monocyte-derived macrophages toward distinct anti-inflammatory or

TNF+/IL1β+ inflammatory fates, underscoring functional plasticity. Four candidate

optimal feature genes-SIRPB1C, FABP5, MMP14 and EGR1-accurately

discriminated diseased joints, forming a nomogram with high predictive value. These

findings deepen understanding of macrophage heterogeneity in LA and highlight

metabolic and signaling nodes that may guide biomarker-driven diagnosis and

macrophage-targeted therapy.

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Data availability statement Publicly available datasets that support the findings of

this study are openly available in the Gene Expression Omnibus (GEO) database

(https://www.ncbi.nlm.nih.gov/geo/info/datasets.html)   ;   GSE233850   and

GSE125503.

Code availability Additional information for data re-analysis is available from the

lead contact upon request.

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Figure legends

Figure 1. Comprehensive workflow diagram of this investigation.

Figure 2. Single-cell atlas of normal and Lyme arthritis C57BL/6 mouse samples. (A)
UMAP clustering of single cells into 20 clusters; (B) Nine cell types identified by
marker gene expression; (C) UMAP comparison between normal and Lyme arthritis
model groups; (D) UMAP distribution across 5 samples; (E) Bubble plot of marker
gene expression in 9 cell types. Bubble plots display marker gene expression in cell
subpopulations. Bubble color intensity (red) corresponds to expression level, while size reflects
the number of expressing cells; (F) Heatmap of differential gene expression among cell
types; (G) Histogram shows the cumulative distribution of selected marker genes of
cell types; (H) Cell type proportion comparison between normal and Lyme arthritis
groups.

Figure 3. GSVA Enrichment Analysis Between Specific Subgroup Cells and Groups.
(A) Volcano plot of differential gene expression across cellular subpopulations. Red
dots indicate significantly upregulated cluster-specific genes; blue dots show
significantly downregulated genes; (B) GSVA enrichment analysis among 9 cell types;
(C) Violin plot of AUC scores for glycolysis and gluconeogenesis pathway-related
gene sets; (D) Violin plot of AUC scores for oxidative phosphorylation
pathway-related gene sets; (E) UMAP colorogram showing glycolysis and
gluconeogenesis pathway activity, with brighter colors indicating higher activity; (F)
Box plot of AUC scores for glycolysis and gluconeogenesis pathway-related gene sets;
(G) UMAP colorogram showing oxidative phosphorylation pathway activity, with
brighter colors indicating higher activity; (H) Box plot of AUC scores for oxidative
phosphorylation pathway-related gene sets.

Figure 4. Single-cell transcriptome atlas of Macrophages/Monocytes. (A) UMAP plot
showing 7 distinct Macrophage/Monocyte clusters; (B) UMAP plot with 7
Macrophage/Monocyte subtypes identified by signature molecular markers; (C)
UMAP comparison between normal and Lyme arthritis model groups; (D) UMAP
distribution across 5 samples; (E) Bubble plot showing differential expression patterns
of signature genes across 7 cell subgroups; (F) Heatmap of differential gene

expression among the 7 cell subgroups; (G) UMAP visualization of marker gene

expression patterns for each cell subgroup; (H) Comparative proportions of cell

subgroups between normal and Lyme arthritis groups.

Figure 5. Enrichment Analysis Between Macrophage/Monocyte Subgroups. (A-B)

GO functional enrichment analysis of differentially expressed genes in

Macrophages/Monocytes, categorized by biological processes (BP), molecular

functions (MF), and cellular components (CC); (C) KEGG pathway enrichment

analysis showing functional distribution of differentially expressed genes across

macrophage/monocyte populations; (D) Scatter plot comparing differential expression

between Macrophage/Monocyte groups; (E) Diagonal volcano plots illustrating

differential gene expression between Macrophage/Monocyte subpopulations; (F) Bar

plots showing GO enrichment analysis of upregulated and downregulated genes

across Macrophage/Monocyte subpopulations.

Figure 6. Trajectory analysis of macrophage subtypes. (A) UMAP plot showing 5

macrophage subtypes identified by signature molecular markers; (B) Macrophages'

differentiation trajectories on pseudo-time, with darker purple cells transitioning to

lighter orange cells, indicating progression from earlier to later differentiation stages;

(C-D) Trajectory analysis revealing dynamic processes across macrophage

subpopulations, with RNA expression profiles changing continuously along

anatomical axes; numbered circles represent differentiation sequence, where

gray-filled circles indicate different endpoints, white-filled circles mark branch points

where cells can follow multiple fates, and black-filled numbered circles show

different differentiation nodes; (E) Absolute expression of top 3 genes in pseudo-time,

where each point represents a cell, different colors represent different clusters, and the

y-axis shows gene expression levels.

Figure 7. Cellular communication analysis. (A-B) Network diagrams showing

cell-cell interaction number and strength in normal and Lyme arthritis model groups

respectively; (C) Comparative analysis of cellular communication number and strength between groups; (D) Total pathway analysis comparing Lyme arthritis model and normal groups; (E) Heatmap of ligand-receptor interaction patterns in TGF-β signaling pathway across cell types in both groups; (F) TGF-β signal sending-receiving intensity map in Lyme arthritis group; (G) Expression profiles of representative TGF-β signaling pathway genes across cell types between groups; (H) Interaction network between tissue-repair macrophage and other cell types in Lyme arthritis group; (I) Interaction dynamics among different cell types; (J) Contribution of each TGF-β ligand-receptor pair; (K-L) Cell-cell communication mediated by Tgfb1-(Tglbr1+Tglbr2) ligand-receptor pair in normal and Lyme arthritis model groups.

Figure 8. Machine learning prediction of Lyme arthritis candidate optimal feature genes and nomogram for disease occurrence prediction. (A) Heatmap of differentially expressed genes in merged transcriptome: blue means low expression; red means high expression; (B) Volcano plot of differentially expressed genes in merged transcriptome: green means low expression; red means high expression; (C) Venn diagram identified the 15 overlapping genes between merged transcriptome DEGs and Macrophage/Monocyte-related genes from single-cell data; (D) LASSO regression model construction using merged transcriptome samples as training set; (E) Model parameter optimization cross-validation (left line indicating optimal λ value), determined the four candidate optimal feature genes (SIRPB1C, FABP5, MMP14 and EGR1); (F-J-H-I) Expression levels of the 4 candidate optimal feature genes in merged transcriptome samples; (J) Nomogram for Lyme arthritis occurrence prediction. Line segments represent the predicted contribution of genes to outcome events, with the total score signifying the cumulative sum of all corresponding individual scores across variable values; (K) Calibration curve evaluating nomogram model predictive ability; (L) DCA curve assessing nomogram model value; (M) ROC curve evaluating nomogram model performance in merged transcriptome samples. *$p < 0.05$, **$p < 0.01$, ***$p < 0.001$.

Figure 9. Validation of 4 candidate optimal feature genes. (A-B-C) Edema observation, X-ray examination, and H&E staining of joint synovium in Lyme arthritis mouse model versus control, scale bar = 750 μm; (D-K) RT-qPCR validation of these genes in *Borrelia burgdorferi*–infected RAW264.7 cells and C57BL/6 mice versus controls. *$p < 0.05$, **$p < 0.01$, ***$p < 0.001$.

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A

Bb-infected group

Control group

B

Bb-infected group

Control group

C

Bb-infected group

Control group

D

Relative mRNA level of *SIRPB1C*

**

PBS   *Bb* infection

E

Relative mRNA level of *FABP5*

*

PBS   *Bb* infection

F

Relative mRNA level of *MMP14*

*

PBS   *Bb* infection

J

Relative mRNA level of *EGR1*

*

PBS   *Bb* infection

H

Relative mRNA level of *SIRPB1C*

*

PBS   *Bb* infection

I

Relative mRNA level of *FABP5*

*

PBS   *Bb* infection

J

Relative mRNA level of *MMP14*

**

PBS   *Bb* infection

K

Relative mRNA level of *EGR1*

*

PBS   *Bb* infection