

No relationship between lipoprotein-associated phospholipase A2, proinflammatory cytokines, and neopterin in Alzheimer's disease

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ABSTRACT

Objective: Lipoprotein-associated phospholipase A2 (Lp-PLA₂) is a reported risk factor for dementia. However, the relationship between Alzheimer's disease (AD) and Lp-PLA₂ is still debatable and, to the best of our knowledge, no study has evaluated the associations between levels of Lp-PLA₂, proinflammatory cytokines, and neopterin in AD.

Methods: In total, 59 patients with AD and 38 non-demented individuals were included in the case-control study. Fasting serum concentrations of interleukin-6 (IL-6), tumor necrosis factor-alpha (TNF-α), neopterin, and Lp-PLA₂ were determined using ELISA. The associations between AD and each of the variables were analyzed by lo-

Outline

- Background
- Methods
- Results
- Discussion
- Conclusion and THM
- Future work



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Background

- AD, most common form of dementia, prevalence growing with increased life expectancy
- progressive neurodegenerative (ND) disorder
- amyloid plaques and neurofibrillary tangles
- arise from abnormal accumulation of amyloid-beta (A β) peptides and hyperphosphorylated tau

Musiek & Holtzman, 2015

The proximal mechanisms underlying AD are complex and poorly understood

- family history, age, *APOE* ϵ 4 allele, high plasma homocysteine; dementia
- unmanaged type 2 DM, high BP, obesity; cognitive decline
- hyperinsulinemia
- chronic inflammation
- increased amyloid load accompanied by marked inflammatory alterations, at brain parenchyma, barriers of brain

van Himbergen et al., 2012; Luchsinger & Gustafson, 2009; McGeer & McGeer, 2004;
S. Dá Mesquita et al., 2016; Attems & Jellinger, 2014; Helman & Murphy, 2015



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The proximal mechanisms underlying AD are complex and poorly understood

it is debatable whether neuroinflammation in aging and AD, together with alterations in peripheral immune system, are responsible for

increased amyloidogenesis, decreased clearance, marked deficits in memory/cognition

AD and vascular dementia were traditionally considered separate disorders, increasing evidence suggests that they may be related

underlying ND mechanisms need to be clarified

van Himbergen et al., 2012; Luchsinger & Gustafson, 2009; McGeer & McGeer, 2004;
S. Dá Mesquita et al., 2016; Attems & Jellinger, 2014; Helman & Murphy, 2015



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Methods: In total, 50 patients with AD and 38 non-demented individuals were included in the case-control study. Fasting serum concentrations of interleukin-6 (IL-6), tumor necrosis factor-α (TNF-α), neopterin, and Lp-PLA₂ were determined using ELISA. The associations between AD and each of the variables were analyzed by lo-

Lp-PLA₂

- oxidize phospholipids → generates lysophosphatidylcholine and oxidized fatty acids (proinflammatory)
- inflammatory biomarker, expressed in macrophages and foam cells
- circulates in blood associated with LDL-cholesterol
- may hydrolyze PAF in platelets, monocytes, and macrophages
- expression is regulated by *inflammatory cytokines*
- high expression is thought to be a predictor of coronary HD
- management of CVS risk factors may reduce cognitive decline
- the impact on development of AD is less certain

MacPhee et al., 1999; Rader, 2000; Rubinstein & Izkhakov, 2011; Stafforini, McIntyre, Zimmerman, & Prescott, 1997; Tselepis et al., 2002; Cao, Stafforini, Zimmerman, McIntyre, & Prescott, 1998; Packard et al., 2000; Ballantyne et al., 2004; Caslake & Packard, 2003; Giordano et al., 2007

Proinflammatory cytokines

- risk factors such as dyslipidemia and oxidative stress promote the accumulation of damage signals, which may be earliest triggering event in AD
- microglia are activated
- TNF- α , IL-6, some trophic factors released
- cytokine network complex, biologically labile, rapidly disappear from circulation
- neopterin an indicator of peripheral immune responses
- enables effective monitoring
- increased neopterin found in patients with AD

Maccioni, Rojo, Fernández, & Kuljis, 2009; Licastro et al., 2000;
Fuchs, Weiss, & Wachter, 1993; Akgül et al., 2013; Leblhuber et al., 1999

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Objective: Lipoprotein-associated phospholipase A2 (Lp-PLA₂) is a reported risk factor for dementia. However, the relationship between lipoprotein-associated phospholipase A2 (Lp-PLA₂) and Lp(a) is still debated and to the best of our knowledge, no study has evaluated the associations between levels of Lp-PLA₂, proinflammatory cytokines, and neopterin in AD.
Methods: In total, 50 patients with mild-to-moderate Alzheimer's disease were included in the present study. Fasting serum concentrations of lipoprotein (LDL-C, HDL-C), tumor necrosis factor- α (TNF- α), interleukin-6 (IL-6), and Lp-PLA₂ were determined using ELISA. The associations between all and each of the variables were analyzed by bi-



- relationship between *chronic inflammation* and AD is of great interest and understanding the mechanisms that mediate this relationship may provide a basis for preventative methods and novel therapies
- we hypothesized that there is a relationship between Lp-PLA₂, cytokines, and neopterin
- these relationships may explain the inconclusive results regarding the role of Lp-PLA₂ in AD

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Objective: Lipoprotein-associated phospholipase A2 (Lp-PLA₂) is a reported risk factor for dementia. However, the relationship between lipoprotein-associated phospholipase A2 (Lp-PLA₂) with cytokines and to their effect on brain-ridge, we study has evaluated the associations between levels of Lp-PLA₂, proinflammatory cytokines, and neopterin in AD.
Methods: In total, 97 patients with mild-to-moderate Alzheimer's disease were included in the study.
Findings: Serum concentrations of lipoprotein-associated phospholipase A2 (Lp-PLA₂), tumor necrosis factor-α (TNF-α), neopterin, and Lp-PLA₂ were determined using ELISA. The associations between all and each of the variables were analyzed by bi-

Methods

- 59 patients with AD
- 38 non-demented individuals
- case-control study
- ELISA
 - IL-6
 - TNF-α
 - Neopterin
 - Lp-PLA₂
- The associations between AD and each of the variables were analyzed by logistic regression
- Ege University Ethical Committee

National Institute of Neurological and Communicative Disorders and Stroke and the Alzheimer's disease and Related Disorders Association (Morris et al., 1989)
Turkish Mini-Mental State Examination (MMSE) (Güngen, Ertan, Eker, Yaflar, & Engin, 1999)
Enzyme-linked immunosorbent assays (ELISA) (DIA Source, Louvain-la-Neuve, Belgium; Thermo Scientific, Waltham, MA, USA, DRG Instruments GmbH, Marburg, Germany; diaDexus, Inc., San Francisco, CA, USA, respectively). The lower detection limits were 2 pg/mL for IL-6, 15.6 pg/mL for TNF-α, 0.2 ng/mL for neopterin, and 0.34 ng/mL for Lp-PLA₂. Neopterin values were expressed as nmol/L. (Modular Analytics, Roche Diagnostics, Basel, Switzerland)

Subjects with AD ≥ 65 years
Neurology Department of the School of
Medicine of Ege University
N=80

EXCLUSION
MMSE < 10
N = 3

MMSE
between ≥ 10 and ≤ 24

Subjects with AD ≥ 65 years
N=59

EXCLUSION
history of cerebrovascular disease
coronary revascularization
Dialysis
liver disease
Malignancy
congestive heart failure
Acute-chronic inflammatory
no informed consent
N = 18

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Keywords:
Lipoprotein-associated phospholipase A2 (Lp-PLA2) is a reported risk factor for dementia. However, the relationship between lipoprotein-associated phospholipase A2 (Lp-PLA2) and Alzheimer's disease (AD) is unclear. We evaluated the associations between levels of Lp-PLA2, proinflammatory cytokines, and neopterin in AD.

Methods: We studied 70 subjects with mild to moderate dementia and 38 non-demented control subjects. Fasting serum concentrations of lipoprotein-associated phospholipase A2 (Lp-PLA2), tumor necrosis factor- α (TNF- α), interleukin-6 (IL-6), and neopterin were determined using ELISA. The associations between all and any of the variables were analyzed by bi-

Subjects with non-specific complaints ≥ 65 years
Internal Medicine Department of the School of
Medicine of Ege University
N=70

EXCLUSION
MMSE < 10
N=2

MMSE
>24

EXCLUSION
history of cerebrovascular disease
coronary revascularization
Dialysis
liver disease
Malignancy
congestive heart failure
Acute-chronic inflammatory
no informed consent
N= 30

Non-demented control
subjects ≥ 65 years
N=38

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Socio-demographic characteristics and clinical data for patients with Alzheimer's disease and the control group

Characteristics	Patients with AD (n = 59)	Control group (n = 38)	OR (95% CI)
Age ^a , y [\pm SD; range]	75 \pm 6.4 (58–85)	72 \pm 5.9 (65–85)	
Female, n (%)	39 (66)	22 (58)	1.42 (0.61–3.28)
Living alone, n (%)	21 (36)	10 (26)	1.55 (0.63–3.79)
Education <5 years, n (%)	41 (70)	18 (47)	2.53 (1.09–5.89)
DM, n (%)	17 (29)	7 (18)	1.79 (0.66–4.85)
HT, n (%)	28 (48)	14 (37)	1.55 (0.67–3.57)
Hypercholesterolemia ^b , n (%)	23 (47)	23 (61)	0.58 (0.24–1.36)
Hypertriglyceridemia ^b , n (%)	11 (22)	11 (29)	0.71 (0.27–1.88)
High LDL-C ^b , n (%)	33 (73)	31 (84)	0.53 (0.18–1.59)
Low HDL-C ^b , n (%)	10 (23)	4 (11)	2.28 (0.65–8.02)
High hs-CRP ^b , n (%)	24 (62)	25 (70)	0.70 (0.27–1.84)

Y, years; DM, diabetes mellitus; HT, hypertension; LDL-C, low-density lipoprotein cholesterol; HDL-C, high-density lipoprotein cholesterol; hs-CRP, high-sensitivity C-reactive protein; AD, Alzheimer's disease.

^a Values are expressed as means \pm SD.

^b Missing data.

marital status (married/living with spouse or living alone/not married/widow)
level of education (\geq 5 years or <5 years)



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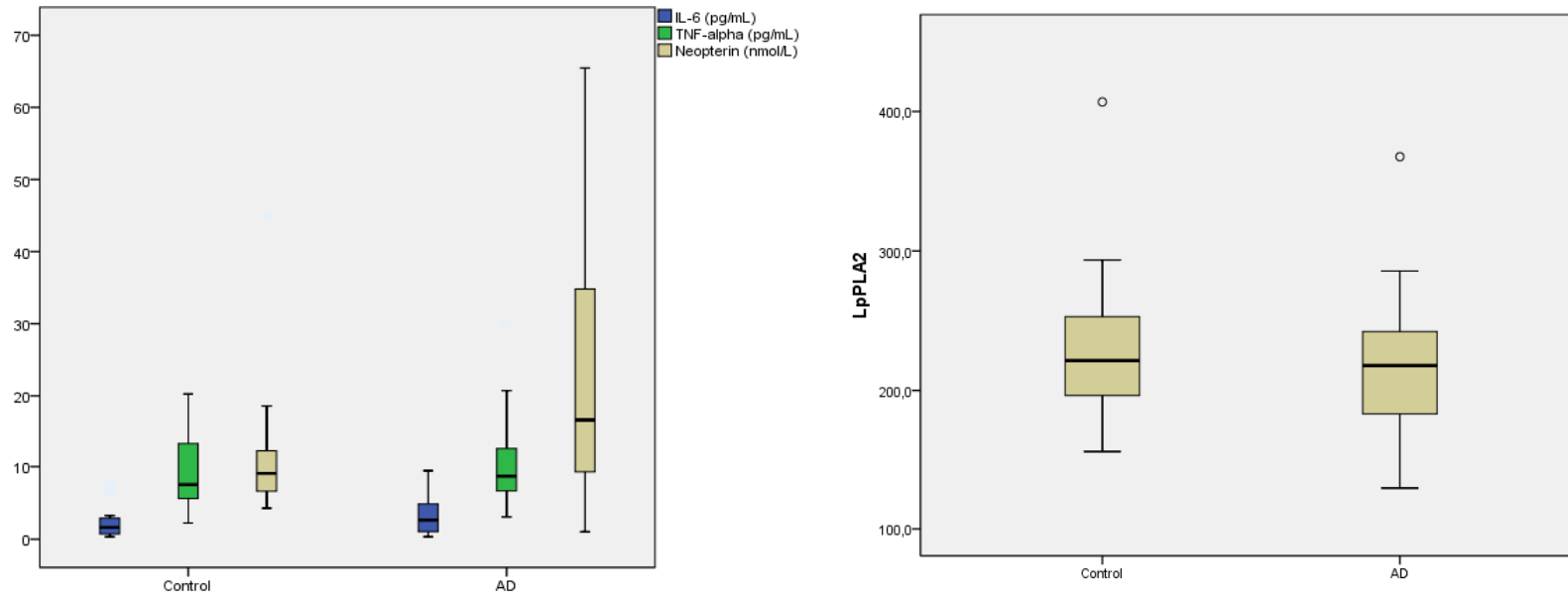
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ABSTRACT
Objective: Lipoprotein-associated phospholipase A2 (Lp-PLA₂) is a reported risk factor for dementia. However, the relationship between lipoprotein-associated phospholipase A2 (Lp-PLA₂) and IL-6, neopterin and to the level of proinflammatory cytokines, and neopterin in AD.
Methods: In total, 50 patients with mild to moderate Alzheimer's disease were included in the present study.
Findings: Serum concentrations of lipoprotein-associated phospholipase A2 (Lp-PLA₂), tumor necrosis factor alpha (TNF-α), neopterin, and IL-6 were determined using ELISA. The associations between all and each of the variables were analyzed by bi-

Results

- The median Lp-PLA₂ levels in AD and controls similar ($P = 0.29$)
- Median serum neopterin and IL-6 levels significantly higher in patients with AD than in controls ($P = 0.0001$ and $P = 0.03$)

Lipoprotein-associated phospholipase A₂, proinflammatory cytokine, and neopterin levels in patients with Alzheimer's disease and the control group



Factor ^a	Patients with AD	Control group	Significance
Lp-PLA ₂ (ng/mL)	217.89 (60.8)	221.42 (62)	<i>P</i> = 0.29
IL-6 (pg/mL)	2.82 (4.3)	1.55 (2.2)	<i>P</i> = 0.03
TNF-α (pg/mL)	9.42 (6.4)	8.01 (9.5)	<i>P</i> = 0.48
Neopterin (nmol/L)	17.37 (30.1)	8.89 (6.1)	<i>P</i> = 0.0001

Lp-PLA₂, Lipoprotein-associated phospholipase A₂; IL-6, Interleukin-6; TNF-α, Tumor necrosis factor-alpha; AD, Alzheimer's disease.

^a Values are expressed as medians (interquartile range).

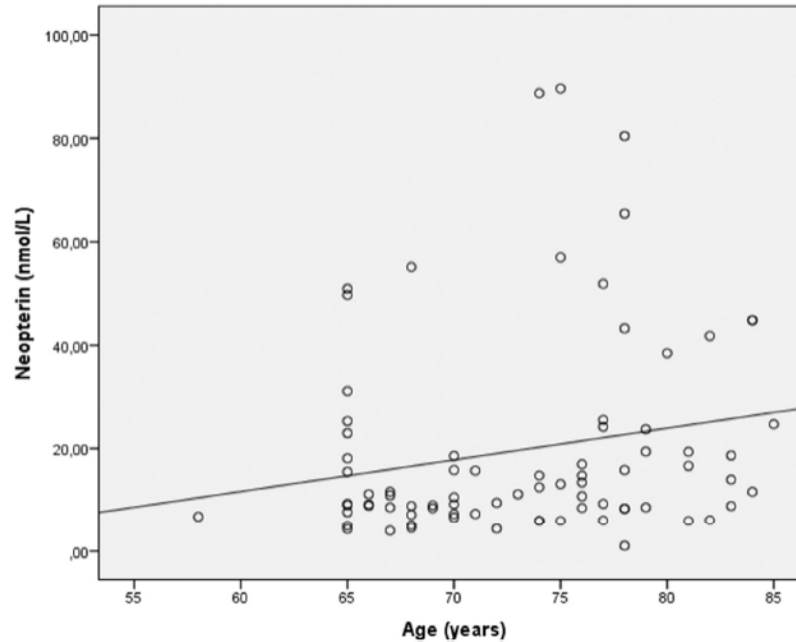
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Neopterin levels are associated with age



in the whole population age

- positively correlated with neopterin ($r = 0.235$, $P = 0.035$)
- negatively correlated with both TC and LDL-C ($r = -0.262$, $P = 0.014$ and $r = -0.292$, $P = 0.008$)
- neopterin higher in the ≥ 75 years old group ($P = 0.012$)

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Objective: Lipoprotein-associated phospholipase A2 (Lp-PLA₂) is a reported risk factor for dementia. However, the relationship between lipoprotein-associated PLA₂ and Lp-PLA₂ is still debated and to further our knowledge, we study the associations between levels of Lp-PLA₂, proinflammatory cytokines, and neopterin in AD.
Methods: In total, 50 patients with mild to moderate Alzheimer's disease were included in the study. Fasting serum concentrations of lipoprotein (LDL-C, HDL-C), tumor necrosis factor alpha (TNF-α), neopterin, and Lp-PLA₂ were determined using ELISA. The associations between all and each of the variables were analyzed by bi-

Discussion

Lp-PLA₂

- associated with risk of stroke, independent of CVS risk factors
- risk factor for dementia independent of CVS and inflammatory factors in the Rotterdam study
- not associated with dementia or AD in Framingham Heart Study
- inconclusive results in AD

Oei et al., 2005; Fitzpatrick et al., 2014; van Oijen et al., 2006; van Himbergen et al., 2012;

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Methods: In total, 80 patients with mild to moderate dementia were included in the present study. Fasting serum concentrations of interleukin-6 (IL-6), tumor necrosis factor alpha (TNF- α), neopterin, and Lp-PLA2 were determined using ELISA. The associations between all and each of the variables were analyzed by bi-

Discussion

IL-6, TNF- α

- Framingham study: higher spontaneous production of IL-1 / TNF- α by peripheral blood mononuclear cells \rightarrow increased risk of developing AD
- prospective cohort study (mild to severe AD) \rightarrow high baseline TNF- α \rightarrow cognitive decline
- increased peripheral levels of IL-6 in AD
- hs-CRP associated / not associated, with cognitive decline, risk of dementia
- meta-analysis of 40 studies of peripheral blood and 14 studies of cerebrospinal fluid cytokines \rightarrow higher IL-6, TNF- α , IL-1 β , TGF- β , IL-12, and IL-18 in AD

Tan et al., 2007; Holmes et al., 2009; Singh & Guthikonda, 1997; Licastro et al., 2000; Yaffe et al., 2003; Noble et al., 2010; Engelhart et al., 2004; Kravitz, Corrada, & Kawas, 2009; Tan et al., 2007; van Himbergen et al., 2012; Swardfager et al., 2010;

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Conclusions and THM

- This study reports on relationship between Lp-PLA2 and immune activation biomarkers in patients with AD
- Lp-PLA₂ a reported risk factor for dementia, and an inflammatory marker
- Relationship between AD & Lp-PLA₂ is still debatable
- No study on the associations between serum levels of Lp-PLA₂, proinflammatory cytokines, and neopterin in AD
- Median Lp-PLA₂ levels in AD and controls were similar in this study
- Neopterin and IL-6 levels were significantly higher in AD patients
- We determined that Lp-PLA₂ is not associated with either AD or levels of proinflammatory cytokines and neopterin
- Neopterin, low level of education, and female gender were associated with AD
- Elevated neopterin levels may be used as an inflammatory marker in patients with AD

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Future Work

- Further studies of neopterin as a biomarker of diagnosis / monitoring of disease progression
- Larger studies investigating the relationships between AD and Lp-PLA₂ , cytokines, neopterin
- Genes that encode PLA₂ enzymes could play a role in disease susceptibility
- Polymorphisms in genes that act as regulatory factors of strategic molecules like cytokines and Lp-PLA₂