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# Microglial Expression of the Wnt Signaling Modulator *DKK2* Differs between Human Alzheimer's Disease Brains and Mouse Neurodegeneration Models

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Title: Microglial expression of the Wnt signalling modulator DKK2 differs between 1 human Alzheimer's disease brains and mouse neurodegeneration models 2 3 Abbreviated title: DKK2 levels differ in mouse/human AD microglia 4 5 Authors: Nozie D. Aghaizu 1,\*, Sarah Jolly 2,\*, Satinder K. Samra 1, Bernadett Kalmar 3, 6 Katleen Craessaerts 5,6, Linda Greensmith 3, Patricia C. Salinas 4, Bart De Strooper 1,5,6, and 7 Paul J. Whiting 1,2 8 9 Author affiliations and footnotes: 10 <sup>1</sup> UK Dementia Research Institute at University College London, Cruciform Building, Gower 11 Street, London WC1E 6BT, United Kingdom 12 <sup>2</sup> ARUK Drug Discovery Institute (DDI), University College London, Cruciform Building, 13 Gower Street, London WC1E 6BT, United Kingdom 14 Department of Neuromuscular Diseases, UCL Queen Square Motor Neuron Disease 15 Centre, Queen Square Institute of Neurology, Queen Square, London WC1N 3BG, 16 United Kingdom 17 Department of Cell and Developmental Biology, University College London, Gower 18 Street, London WC1E 6BT, United Kingdom 19 <sup>5</sup> VIB Centre for Brain Disease Research, Onderwijs en Navorsing 5, 3000, Leuven, 20 21 Belgium <sup>6</sup> KU Leuven, Department of Neurosciences and Leuven Brain Institute, Oude Markt 13 – 22 bus 5005, 3000, Leuven, Belgium 23 \* Correspondence: NDA, nozie.aghaizu@ucl.ac.uk, Tel.: +44 (0)20 3108 6890; SJ, 24

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48	samples.
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51	Abstract: Wnt signalling is crucial for synapse and cognitive function. Indeed, deficient Wnt
52	signalling is causally related to increased expression of DKK1, an endogenous negative Wnt
53	regulator, and synapse loss, both of which likely contribute to cognitive decline in
54	Alzheimer's disease (AD). Increasingly, AD research efforts have probed the
55	neuroinflammatory role of microglia, the resident immune cells of the central nervous system
56	(CNS), which have furthermore been shown to be modulated by Wnt signalling.
57	The DKK1 homologue DKK2 has been previously identified as an activated response and/or
58	disease-associated microglia (DAM/ARM) gene in a mouse model of AD. Here we
59	performed a detailed analysis of $\emph{DKK2}$ in mouse models of neurodegeneration, and in
60	human AD brain. In $APP/PS1$ and $APP^{NL\text{-}G\text{-}F}$ AD mouse model brains as well as in $SOD1^{G93A}$
61	ALS mouse model spinal cords, but not in control littermates, we demonstrated significant
62	microgliosis and microglial Dkk2 mRNA upregulation in a disease-stage dependent manner.
63	In the AD models, these DAM/ARM Dkk2+ microglia preferentially accumulated close to
64	$\beta$ Amyloid plaques. Furthermore, recombinant DKK2 treatment of rat hippocampal primary
65	neurons blocked WNT7a-induced dendritic spine and synapse formation, indicative of an
66	anti-synaptic effect similar to that of DKK1. In stark contrast, no such microglial DKK2
67	upregulation was detected in the post-mortem human frontal cortex from individuals
68	diagnosed with AD or pathological ageing.
69	In summary, the difference in microglial expression of the DAM/ARM gene DKK2 between
70	mouse models and human AD brain highlights the increasingly recognised limitations of
71	using mouse models to recapitulate facets of human neurodegenerative disease.
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73	Keywords: Alzheimer's disease, Neurodegeneration, Microglia, Neuroinflammation, Wnt

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signalling,

Significance statement: The endogenous negative Wnt regulator Dkk2 is significantly
upregulated at the mRNA level in microglia of AD mouse models, implying that microglia
derived Dkk2 protein may detrimentally contribute to a reduced Wnt signalling tone in the AD
brain, a known pathophysiological manifestation. Indeed, recombinant DKK2 prevented Wnt-
dependent synapse formation in cultured neurons. However, DKK2 upregulation was not
recapitulated in post-mortem human AD brains.
The success of neurodegeneration animal models has relied on pathophysiology that for the
most part correctly modelled human disease. Increasingly however, limitations to the validity
of mouse models to recapitulate human neurodegenerative disease have become apparent
as evidenced by the present study by the difference in microglial DKK2 expression between
AD mouse models and human AD brain.

#### Introduction:

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Microglia, the resident immune cells of the central nervous system (CNS), contribute both beneficially and detrimentally to Alzheimer's disease (AD) in a context-dependent manner, thus rendering their response to AD heterogeneous in nature. So too is their phenotype at the transcriptomic, proteomic, epigenomic, metabolomic, and morphological level leading to the identification of spatio-temporally distinct microglial subpopulations (reviewed by Masuda et al., 2020; Paolicelli et al., 2022). Disease associated (DAM) - or activated response microglia (ARM: henceforth: DAM/ARM) - represent a subpopulation associated with the neurodegenerative brain (Keren-Shaul et al., 2017; Sala Frigerio et al., 2019). Transitioning from homeostatic to DAM/ARM-state requires TREM2 (triggering receptor expressed on myeloid cells-2) (Keren-Shaul et al., 2017). A bona fide receptor for βAmyloid, TREM2 ligation activates microglia and orchestrates a gene regulatory response that increases inflammatory signalling, phagocytosis, and proliferation, a response thought to restrict development of AD (reviewed in Gratuze et al., 2018). TREM2 regulates microglial proliferation and survival by activating, among others, the canonical Wnt/β-catenin pathway (Zheng et al., 2017; reviewed in Aghaizu et al., 2020). Indeed, several genes upregulated by TREM2 in response to AD pathology are related to proliferation and Wnt signalling (Meilandt et al., 2020). The canonical Wnt signalling modulatory gene Dkk2 (Mao and Niehrs, 2003) was upregulated downstream of Trem2 in DAM/ARM cells in APP/PS1, PS2APP, 5xFAD, and APP<sup>NL-G-F</sup>AD mouse models in separate studies, making it a putative DAM/ARM marker gene (Friedman et al., 2018; Sala Frigerio et al., 2019; Meilandt et al., 2020). Database searches further indicate that while control CNS DKK2/Dkk2 expression levels are generally low across the various cell types, they are respectively either similar or greater in non-microglial CNS cell populations compared with microglia in human and mouse single cell RNA-Seq studies (Zhang et al., 2014, 2016; Friedman et al., 2018). The secreted protein DKK2 belongs to the Dickkopf family of Wnt modulators (Niehrs, 2006). Its homologue DKK1 antagonises Wnt signalling through Frizzled

119 Wnt receptors by sequestering the co-receptor LRP5/6 (Bafico et al., 2001; Mao et al., 120 2001). The reduced Wnt signalling tone evident in AD is at least partially due to Aβ fibrilinduced upregulation of DKK1/Dkk1 in human AD and AD mouse models (Caricasole et al., 121 2004; Rosi et al., 2010; Killick et al., 2014; Sellers et al., 2018; Jackson et al., 2019). This 122 was synaptotoxic in in vitro and in vivo models (Purro et al., 2012; Galli et al., 2014; Marzo et 123 al., 2016; Elliott et al., 2018; Sellers et al., 2018), and potentially also in human AD (Jackson 124 125 et al., 2019). Much less is known about the role of microglial DKK2 in the CNS, not to mention in AD. In 126 cell lines, DKK2 can both antagonise and agonise Wnt-LRP6 signalling depending 127 128 respectively on the presence or absence of the second co-receptor Kremen2 (Mao and 129 Niehrs, 2003). During neural crest specification, DKK2 agonises Wnt signalling (Devotta et 130 al., 2018). Conversely, in cancer studies DKK2 generally inhibits Wnt signalling (Kuphal et 131 al., 2006; Sato et al., 2007; Maehata et al., 2008; Hirata et al., 2009; Zhu et al., 2012; Mu et al., 2017). Furthermore, cancer cell-secreted DKK2 suppresses immune cell activation via 132 133 an unconventional Wnt-unrelated pathway (Xiao et al., 2018). In the aforementioned singlecell and bulk cell gene expression studies on neurodegeneration mouse models, Dkk2 was 134 upregulated in microglia, but no information on the spatial relationship between Dkk2+ 135 136 microglia and neurodegenerative pathology or the biological role of this upregulation was provided (Friedman et al., 2018; Sala Frigerio et al., 2019; Meilandt et al., 2020). To address 137 this gap in our knowledge, we performed a histological assessment of microglial Dkk2/DKK2 138 139 upregulation in several mouse models and in human AD, and furthermore investigated the effect of recombinant DKK2 on cultured primary neurons. 140 141 Here, we report significant microgliosis and microglial Dkk2 mRNA upregulation in a disease-stage dependent manner in APP/PS1, and APPNL-G-F AD mouse model brains. 142 Clustering of Dkk2+ microglia around amyloid plaques was often more pronounced than that 143 144 of Dkk2 microglia. In cultured rat neurons, recombinant DKK2 blocked Wnt dependent 145 synapse formation. Crucially however, microglial DKK2 upregulation was not detected in

post-mortem h	numan brai	in fr	om indi	viduals o	diagnosed	l wit	h AD or patho	ological	ageii	ng. This
non-universali	ty of what	was	s a puta	ative DAM	M/ARM m	arke	er gene highliç	ghts the	incr	easingly
recognised li	imitations	of	using	animal	models	to	recapitulate	facets	of	human
neurodegener	ative disea	se.								

#### Materials and Methods:

154 Mice

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155 Mouse CNS tissue was obtained from the following sources: Brain tissue from male and B6.Cg-Tg(APPswe, 156 female PSEN1dE9) mice (Jankowsky et al., 2004; 157 RRID:MMRRC 034829-JAX; abbreviated: APP/PS1) and age-matched wild-type C57BL/6J control mice at 3, 8, and 12 months was purchased from WuXi AppTec. Brain tissue from 158 159 homozygous B6.129S5-Apptm3.1Tcs mice (Saito al., male 160 RRID:IMSR RBRC0634; backcrossed for at least 2 generations with C57BL/6J mice; here referred to as APP<sup>NL-G-F</sup>) and age-matched wild-type C57BL/6J control mice at 7 and 24 161 months was kindly provided by the De Strooper lab. Spinal cord tissue from female mice 162 expressing mutant human SOD1 G93A (B6SJL-Tg/SOD1 G93A) 1 Gurney et al., 1994; 163 RRID:IMSR JAX:002726; abbreviated: SOD1<sup>G93A</sup>) and age-matched female control mice 164 165 expressing wild-type human SOD1 (B6SJLTg/SOD1)2Gur/J; Gurney et al., 1994; RRID:IMSR JAX:002297; abbreviated: SOD1WT) at 50, 100, and 120 days was kindly 166 provided by the Greensmith lab. Colonies were maintained by breeding male heterozygous 167 168 carriers with female (C57BL/6 x SJL) F1 hybrids. Mice were genotyped for the human SOD1 169 transgene from ear or tail genomic DNA. 170 In every case, mice were housed according to the appropriate institution's ethical 171 requirements, and in compliance to the country's laws for animal research. Typically, mice were housed in standard individually ventilated cages with ≤ 3 mice per cage at 21 ± 1 °C 172 with relative humidity 55 ± 10 % and maintained on a 12-hour light/dark cycle with access to 173 174 food (standard pellets), water, and nesting material provided ad libitum via an overhead rack. At the onset of pathology, affected animals were provided with food pellets soaked in water 175 at ground level to ensure sufficient nourishment and hydration. Cages were checked daily to 176 ensure animal welfare. Body weight was assessed regularly to ensure no weight loss. For 177 animals housed at WuXi AppTec, studies were reviewed and approved by Institutional 178 179 Animal Care and Use Committee (IACUC) of WuXi AppTec (Suzhou) Co., Ltd. For animals

180	housed at VIB/KU Leuven, studies were approved by the KU Leuven Ethical Committee and
181	in accordance with European Directive 2010/63/EU. For animals housed at UCL, studies
182	were carried out following the guidelines of the UCL Institute of Neurology Genetic
183	Manipulation and Ethic Committees and in accordance with the European Community
184	Council Directive of November 24, 1986 (86/609/EEC). Animal experiments were
185	undertaken under licence from the UK Home Office in accordance with the Animals
186	(Scientific Procedures) Act 1986 (Amended Regulations 2012) and were approved by the
187	Ethical Review Panel of the Institute of Neurology.
188	For tissue collection, animals were injected with terminal anaesthesia (pentobarbital sodium,
189	Euthatal) and were transcardially perfused with PBS by trained personnel.
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191	<u>Rats</u>
192	Animal experiments were undertaken under licence from the UK Home Office in accordance
193	with the Animals (Scientific Procedures) Act 1986 (Amended Regulations 2012) and in
194	compliance with the ethical standards at University College London (UCL). Timed matings
195	were set up for Sprague-Dawley rats (RRID:MGI:5651135) for subsequent harvesting of
196	embryos at embryonic day (E)18. Pregnant rat dams were sacrificed using Isoflurane and
197	cervical dislocation.
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199	Human post-mortem tissue
200	Anonymised human samples from control, pathological ageing, and AD subjects were
201	obtained from the Queen's Square Brain Bank for Neurological Disorders (QSBB) and
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	NeuroResource, UCL Institute of Neurology, University College London. All samples were
203	NeuroResource, UCL Institute of Neurology, University College London. All samples were obtained with informed consent in accordance with the Human Tissue Act 2004 and under

the UCL Institute of Neurology HTA material transfer agreement UCLMTA1/17 approved by

the NHS Research Ethics Committee. Post-mortem frontal cortex biopsy tissue was harvested, snap-frozen, and stored at -80 °C until further tissue processing. All experiments were performed in accordance with relevant guidelines and regulations. Sample information including demographic data, disease classifications and post-mortem intervals is shown in Table 6-1.

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min at 40 °C.

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#### Tissue processing

Mouse brain tissue, freshly harvested upon transcardial perfusion with PBS, was post-fixed by immersion in 4 % paraformaldehyde (PFA) in PBS overnight at 4 °C followed by overnight immersion in and equilibration to 20 % sucrose in PBS at 4 °C. Mouse brains were split into 3 segments by applying 2 equidistant coronal slice cuts along the rostro-caudal axis, resulting in an olfactory bulb containing rostral-most segment, a hippocampus containing middle segment and the caudal-most cerebellar segment. After embedding in OCT (CellPath) and freezing in 2-methylbutane (Sigma) pre-chilled in liquid Nitrogen, the middle segment was coronally cryosectioned at 15 µm thickness on a Leica CM1860UV cryostat (Leica) and sections containing clearly defined hippocampus were transferred onto Superfrost Plus Gold microscopy slides (ThermoScientific). Mouse spinal cord tissue was processed identically but split only into 2 segments by applying a transverse slice cut rostral to the lumbar enlargement, resulting in a rostral cervical/thoracic segment and a caudal lumbar segment. The cryo-embedded lumbar segment was transversally cryosectioned at 15 µm thickness and sections containing clearly defined L5 lumbar spinal cord were transferred onto Superfrost Plus Gold microscopy slides (ThermoScientific). Human frontal cortex brain tissue was cryosectioned at 15 µm thickness, sections were transferred onto Superfrost Plus Gold microscopy slides (ThermoScientific) and dried for 10

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231 Human and mouse sections were stored at -80 °C until staining. 232 233 mRNA fluorescence in situ hybridisation (FISH) 234 mRNA fluorescence in situ hybridisation for mouse Dkk2 and human DKK2, TREM2, and P2RY12 mRNA was performed on mouse brain / spinal cord and human frontal cortex 235 236 cryosections respectively, by using the Multiplex Fluorescent V2 Assay Kit (ACD Bio). Briefly, mouse cryosections were thawed and dried at 40 °C for 4 min prior to post-fixation 237 238 with 4 % PFA in PBS at room temperature (RT) for 10 min. OCT residue was washed off by 239 applying 1 x PBS for 5 min at RT. Sections were treated with RNAScope H<sub>2</sub>O<sub>2</sub> for 4 min at RT and subsequently washed 2 x 3 min with UltraPure Distilled Water (Invitrogen) at RT. 240 241 Microscopy slides containing cryosections were submerged for 4 min in boiling 1 x 242 RNAScope target retrieval solution followed by immediate submersion in UltraPure Distilled Water. Cryosections were dehydrated in 100 % ethanol at RT for 2 min and allowed to air 243 dry at RT for 5 min. Cryosections were subsequently treated with RNAScope Protease IV at 244 245 RT for 15 min and washed 2 x 3 min at RT with 1 x PBS. RNAScope probes were allowed to hybridise to cryosections for 2 hrs at 40 °C (Mm-Dkk2-C1, 404841; Mm-Ppib-C1 (positive 246 control probe), 313911; E. coli-Dapb-C1 (negative control probe), 310043). Probes were 247 248 detected with TSA-Cy3 (Perkin Elmer, FP1170) using the RNAScope branched DNA 249 amplification principle as per the manufacturer's instructions. Subsequently, cryosections 250 were further immunohistochemically processed (see below). Human cryosections were processed similarly as previously described (Jolly et al., 2019). 251 252 Briefly, cryosections were thawed and dried at 40 °C for 4 min prior to post-fixation with chilled 4 % PFA in PBS at 4 °C for 30 min followed by 2 x 2 min washes with 1 x PBS at RT. 253 Cryosections were then dehydrated in an ethanol dilution series (50 %, 70 %, 2 x 100 %) at 254

RT for 5 min each and subsequently allowed to air dry at RT for 5 min. Sections were treated with RNAScope  $H_2O_2$  for 10 min at RT and subsequently washed 2 x 2 min with 1 x PBS.

Microscopy slides containing cryosections were submerged for 10 min in boiling 1 x RNAScope target retrieval solution followed by 2 x 2 min washes with 1 x PBS. Cryosections were subsequently treated with RNAScope Protease IV at RT for 20 min and washed 2 x 3 min at RT with 1 x PBS. RNAScope probes were allowed to hybridise to cryosections for 2 hrs at 40 °C (*Hs-TREM2-C1*, 420491; *Hs-DKK2-C2*, 531131-C2; *Hs-P2RY12-C3*; 450391-C3; *Hs-PPIB-C1* (positive control probe), 313901; *E. coli-Dapb-C1* (negative control probe), 310043). C2 and C3 probes were diluted in C1 probe solution at a 1:50 ratio. Probes were detected with TSA-Cy3 (Perkin Elmer, FP1170), Opal 620 (Akoya, FP1495001KT), and TSA-Cy5 (Perkin Elmer, REF FP1168) using the RNAScope branched DNA amplification principle as per the manufacturer's instructions. Subsequently, cryosections were further immunohistochemically processed (see below).

#### Primary hippocampal neuron cultures

Primary rat hippocampal neuron cultures were prepared from embryonic day 18 (E18) Sprague-Dawley rat embryos. One day prior to neuron isolation, 8 well chamber slide dishes (Miltenyi Biotec) were coated over night with 1 mg/ml poly-L-lysine in borate buffer (boric acid, 3.1 g/l; borax 4.8 g/l; pH 8.5). On the day of the neuron isolation, dishes were washed 3 x 20 min with UltraPure Distilled Water, filled with plating medium (Neurobasal (ThermoFisher) supplemented with 1x B27 (ThermoFisher), 1x GlutaMAX (ThermoFisher), 1x Penicillin-Streptomycin (ThermoFisher), 25 µM L-glutamate (Sigma)), and preequilibrated at 5 % CO<sub>2</sub>, 37 °C. Hippocampi were dissected from brain tissue using sterilized tools (Dumont #5 fine tip tweezers, Dumont #7 curved forceps, Student Vannas Scissors 9cm long/straight; Fisherbrand) and collected in ice cold HBSS (Invitrogen). Following three washes with fresh ice cold HBSS, hippocampi were enzymatically dissociated by incubation in accutase (ThermoFisher) at 37 °C for 10 min, providing manual agitation every 2-3 min. Hippocampi were then washed three times with pre-warmed (37 °C) HBSS, followed by mechanical dissociation into a single cell suspension by trituration in

284	HBSS using a 1 mL pipette. Live cell density was determined using the Countess 3
285	automated cell counter (ThermoFisher) and cells were plated onto 8 well chamber slides at a
286	density of 43,000 cells/cm $^2$ and cultured in an incubator at 37 $^{\circ}\text{C}$ / 5 $\%$ CO $_{\!2}.$ Half medium
287	changes were performed twice per week with maintenance medium: Neurobasal,
288	supplemented with 1x B27, 1x GlutaMAX, 1x Penicillin-Streptomycin.
289	Neuronal transfection with the DNA construct pHR hsyn:EGFP (Keaveney et al., 2018; kind
290	gift from Xue Han (Addgene plasmid # 114215; http://n2t.net/addgene:114215;
291	RRID:Addgene_114215)) was performed at 7 days in vitro (DIV) using the Neuromag
292	magnetofection method (OzBiosciences). Briefly, for every 40,000 cells plated per well of an
293	8 well chamber slide dish, 0.5 $\mu g$ DNA was mixed and complexed with 1 $\mu l$ Neuromag
294	transfection reagent in 100 $\mu I$ of OptiMem (all reagents at room temperature). Following 20
295	min incubation at room temperature, the transfection mix was added dropwise to neuronal
296	cultures and the culture dish was placed on a magnetic plate (OzBiosciences) pre-
297	equilibrated to 37 $^{\circ}\text{C}$ inside an incubator for the magnetofection step. After 20 min of
298	magnetofection in the incubator, cell culture dish was removed from the magnetic plate and
299	normal cell culture resumed.
300	Recombinant protein treatment was performed at 21 DIV for 24 hours: human DKK2 (Bio-
301	Techne, 6628-DK-010/CF, 100 ng/ml), human DKK1 (Bio-Techne, 5439-DK-010/CF, 100
302	ng/ml), human WNT7a (Bio-Techne, 3008-WN-010/CF, 200 ng/ml); 100 ng/ml bovine serum
303	albumin (BSA) in 1x PBS heat inactivated at 95 °C for 5 min was used as control.
304	Fixation was performed following 24 hrs of recombinant protein treatment using 4 % PFA / 4
305	% Sucrose (Sigma) in 1x PBS at RT for 15 min. Neurons were subsequently washed 3 x
306	with 1x PBS.
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Immunocytochemistry and immunohistochemistry

Tissue sections stained by mRNA FISH and fixed primary neurons were washed with 1 x PBS and blocked in 1 x PBS supplemented with 5 % (vol/vol) goat serum (Bio-Rad), 1 % (wt/vol) BSA (Sigma) and 0.1 % (vol/vol) Triton X-100 (Sigma) at RT for 1h. Primary antibodies were diluted in blocking solution and applied to samples at 4 °C overnight. Primary antibodies used in this study were: βAmyloid (BioLegend, 803001, RRID: AB 2564653, 1:200), GFAP (Sigma, G3893, RRID:AB 477010, 1:500), Homer (SynapticSystems, 160003, RRID:AB 887730, 1:500), Iba1 (Fujifilm Wako, 019-19741, RRID:AB 839504, 1:250), misfolded SOD1 (Médimabs, MM-0070-P, RRID:AB 10015296, 1:100), vGlut (MerckMillipore, AB5905, RRID:AB 2301751, 1:300); negative controls omitted the primary antibody. This was followed by 4 x 10 min washes in 1 x PBS at RT and subsequent application of suitable goat Alexa Fluor Plus secondary antibodies (488/546/647) diluted 1:500 in blocking solution at RT for 2 hrs. Samples were then washed 4 x 10 min with 1 x PBS at RT. Cryosections only were treated with 1x TrueBlack (Biotium) at RT for 30 sec to quench autofluorescence caused by the accumulation of lipofuscin and other protein aggregates, followed by 2 x washes with 1 x PBS. Nuclei of samples were counterstained with DAPI (Sigma; shown in blue in all confocal images) at 1 µg/ml in PBS and samples were mounted using DAKO Fluorescence Mounting Medium (Agilent).

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#### Microscopy

Stained tissue was imaged using a Zeiss LSM 880 confocal laser scanning microscope fitted with 40x (NA = 1.3) and 63x (NA = 1.4) objectives and photomultiplier tubes to detect fluorescence emission. For image acquisition, xyz confocal stacks were captured at a resolution of 1024 x 1024 pixels and at a step size of 1  $\mu$ m. Microscope settings were established during first acquisition and subsequently not further modified. Four distinct fields of view were imaged from two representative sections per sample.

For image acquisition of transfected primary rat hippocampal neurons following recombinant protein treatment, whole neurons were acquired using the 40x objective and secondary dendrites were acquired with higher magnification using the 63x objective with an additional 3.5x zoom at a resolution of 1024 x 1024 pixels and at a step size of 0.5 µm. A total of 15 neurons and accompanying secondary dendrites spread across three biological repeats were imaged per condition.

#### Image processing and analysis

All images acquired from mouse tissue were processed and analysed in Fiji/ImageJ (Schindelin et al., 2012). *xyz* confocal stacks were collapsed into maximum *z* projections. Microgliosis was assessed by measuring both the number of microglia (DAPI<sup>+</sup> nuclei embedded within typical microglial Iba1 immunoreactivity) and the total 2D surface area of Iba1 immunoreactivity within the acquired field of view. For area quantification, Iba1 immunoreactivity was processed by applying the 'Remove Outliers' function to remove nonspecific noise (bright, radius = 2, threshold = 50), followed by thresholding at 35/255 to define the signal range, and two further rounds of the 'Remove Outliers' function, to fill-in nuclear and other gaps in Iba1 staining (dark, radius = 1), and to further remove non-specific noise (bright, radius = 3). The created Iba1 surface area was measured and used as a mask within which the *Dkk2* mRNA FISH signal surface area, thresholded to 30/255, was quantified. Normalised *Dkk2* area per microglial cell was determined by dividing the total measured *Dkk2* area by the number of detected Iba1\*/DAPI\* microglia within a given field of view.

Human frontal cortex image acquisitions were first subjected to 'Linear unmixing' with automatic fluorophore detection within the Zeiss Zen Black software (Zeiss) to remove overlapping signals between the five fluorophore channels. Unmixed and maximum z

projected images were subsequently processed and analysed using the HALO FISH-IF v2.0.4 module (Indica Labs). The *DKK2* mRNA FISH signal surface area associated with *TREM2/P2RY12* double positive microglia cells was quantified. To achieve this, cell nuclei and their *xy* coordinates were recorded based on DAPI signal. Probe detection was optimised based on signal size, intensity of positive probe pixels and contrast threshold parameter settings (see Table 6-2). The maximum distance threshold for probe signal assignment to nuclei was 25 μm. We classified cells positive for *P2RY12* and *TREM2* as microglia (DAPI\*/*P2RY12/TREM2*\*), determined their number, and measured the surface area of *DKK2* mRNA FISH signal associated with such DAPI\*/*P2RY12/TREM2*\* cells. Normalised *DKK2* area per microglial cell was determined by dividing the total measured *DKK2* area by the number of detected DAPI\*/*P2RY12/TREM2*\*microglia within a given field of view.

Microglia-βAmyolid plaque distance analysis: we determined the 2D Euclidian distance of microglia to the proximal most βAmyolid plaque dense core in maximum projected images according to the following Fiji/ImageJ methodology: an intensity threshold was applied to the image channel containing βAmyloid immunostaining to identify the plaque dense core, which was usually more intensely labelled compared with the plaque periphery; due to the heterogeneous nature of βAmyloid plaques, threshold values were determined for each acquired image. In early-stage *APP/PS1*, and *APP*<sup>NL-G-F</sup> AD mouse or littermate control tissue devoid of βAmyolid plaques, plaque dense core "placeholders" were randomly placed on confocal images by digitally drawing appropriately dimensioned white ellipses on the colour channel assigned to βAmyloid immunostaining using Fiji/ImageJ, followed by intensity threshold application as above. The binary dense core image generated in the previous step was subjected to the 'Exact Signed Euclidian Distance Transform (3D)' (EDT) plug-in to create a 2D map where distance to the closest dense core was encoded in grey values from -1024 (furthest possible distance) to 0 (at dense core edge). *xy* position landmarks of DAPI\*

microglia nuclear centres were placed on a binary image, which in turn was redirected to the EDT image in the 'Set Measurements' window, selecting 'Mean grey value' as measurement output. Note that *xy* positions of human microglia exported from HALO FISH-IF v2.0.4 module were imported into Fiji/ImageJ using the macro 'ImportXYcoordinates.ijm'. Grey values at microglial *xy* positions were obtained using the 'Analyze Particles' function and converted into distance units by multiplying the grey value by the image *xy* pixel dimension (0.13495 μm) to yield microglia-βAmyloid plaque distances.

Dendritic spine and synapse analysis on *hSyn:EGFP* expressing primary rat hippocampal neurons following recombinant protein treatment was performed using IMARIS software. Briefly, the 'Filament' tool was used to semi-automatically specify the secondary dendrite within an image file, followed by the detection of dendritic spines by manual identification. Post-synaptic Homer immunoreactivity usually manifested as puncta in dendrites, especially within dendritic spines. To quantify the number of Homer puncta exclusively within the transfected secondary dendrite of interest, the GFP signal was used to create an exclusion mask using the 'Surface' tool to isolate the Homer signal within the transfected dendrite. Homer puncta were subsequently identified using the 'Spot' detection tool set to a detection diameter of 0.45 μm; background Homer signal was excluded by thresholding using the 'Quality' filter. Pre-synaptic vGlut puncta in the entire image were similarly identified using the 'Spot' detection tool at 0.45 μm diameter. Synapses were assumed using the 'Colocalize spots' function within the 'Spot' detection tool when there was a maximum distance of 1 μm between Homer and vGlut puncta.

## Experimental design and statistical analysis

All means are stated  $\pm$  standard deviation (SD). For the histological study aspects, N = number of subjects (humans or animals) and n = number of fields of view. For qualitative

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and quantitative histological assessments, we typically examined at least 4 subjects per group, imaging at least 4 different fields of view from 2 cryosections per subject, which met previously conducted sample size calculations according to Rosner (2015) with data inputs from Friedman et al., (2018). For the cytological study aspects, N = number of biological repeats, n = number of technical repeats (cells analysed). We used GraphPad Prism® software (GraphPad Software Inc.) for statistical analyses. D'Agostino and Pearson test was used to assess the normality of datasets. For the comparison of one independent variable between >2 groups, we used One-Way ANOVA with Tukey's multiple comparison test. For statistical tests involving two independent variables we used Two-Way ANOVA with Šidák multiple comparisons test; where data points were missing, Mixed-effects analysis with Šidák multiple comparisons test was utilised. Significance was accepted at  $p \le 0.05$  (see Table 1; alphabetical superscripts in results section and figure legends refer to Table 1). Data, software, and code availability The data sets generated during and/or analysed during the current study are available from the corresponding authors on request. The Fiji/ImageJ macro 'ImportXYcoordinates.ijm' is available the Github repository available via https://github.com/DominicAghaizu/ImageJMacros/blob/main/ImportXYcoordinates.ijm.

#### 436 Results

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# Microgliosis and microglial Dkk2 upregulation in APP<sup>NL-G-F</sup> mice

We first investigated the microglial Dkk2 expression pattern in the APPNL-G-F knock-in AD mouse model, which develops robust pathology from the physiological expression of humanised mouse amyloid precursor protein (App) harbouring Swedish, Beyreuther/Iberian, and Arctic mutations (Saito et al., 2014). To this end, we performed mRNA FISH on coronal brain cryosections to detect Dkk2 mRNA in situ and acquired images from the motor cortex and the stratum pyramidale, with adjacent stratum oriens and stratum radiatum, of the hippocampal CA1 region, which are brain regions burdened by βAmyloid plaques, neurofibrillary tangles and neuronal degeneration in AD patients and animal models. This was paired with immunohistochemical labelling using antibodies against Iba1 and βAmyloid to assess microglial Dkk2 expression, as suggested previously (Friedman et al., 2018; Sala Frigerio et al., 2019; Meilandt et al., 2020), and to evaluate the spatial relationship between microglia and βAmyloid plaque lesions. As expected, the brains of wild-type control littermate mice at 7 or 24 months were devoid of βAmyloid plagues and exhibited normally tiled Iba1<sup>+</sup> microglia (Fig. 1A,B). In stark contrast, we detected βAmyloid plaques in the cortex and CA1 of age-matched transgenic APP<sup>NL-G-F</sup> mice at 7 and 24 months (Fig. 1A,B). This was accompanied by robust microgliosis as assessed by both normalised microglia cell count (DAPI\*/Iba1\* cells) and area of Iba1 signal in maximum z-projected image stacks (Fig. 1C; note that the microglia spatial distribution will be addressed below). In the cortex, the number of microglia was significantly higher in APP<sup>NL-G-F</sup> mice relative to age-matched littermate controls at 7 months (6.5 ± 0.8 vs. 3.0 ± 0.2 microglia per field of view (FOV; equal to 1.8 x 10<sup>-2</sup> mm<sup>2</sup>)) and at 24 months (15.9 ± 3.8 vs. 2.8 ± 0.8 to); significant differences were found between timepoints and genotypes (Fig. 1A,D,G; Two-Way ANOVA, p = 0.0101 and p = 0.0002 respectively a). Iba1 area was also significantly elevated in transgenic mice compared with littermate controls, both at 7 months  $(1505.8 \pm 135.0 \text{ vs. } 821.9 \pm 239.3 \text{ } \mu\text{m}^2)$  and 24 months  $(1982.4 \pm 471.6 \text{ vs. } 781.7 \pm 121.1 \text{ } 121.1 \text{ })$ 

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μm²) (Fig. 1A,E; Two-Way ANOVA, p = 0.1821 (timepoints) and p = 0.0018 (genotypes) b).
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       To assess microglial Dkk2 expression levels, we quantified Dkk2 mRNA FISH signal that
       was colocalised with Iba1 immunoreactivity (Fig. 1C). The normalised area of Dkk2 signal
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       per DAPI*/Iba1* microglial cell reached significantly higher levels in APPNL-G-F mice relative
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       to littermate controls, both at 7 months (0.3 \pm 0.2 \text{ vs. } 0.1 \pm 0.1 \text{ µm}^2) and at 24 months (1.2 \pm
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       0.4 vs. 0.1 \pm 0.1 \mum<sup>2</sup>) (Fig. 1A,F,G; Two-Way ANOVA, p = 0.0245 (timepoints) and p =
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       0.0013 (genotypes) °).
       Similar patterns of microgliosis and Dkk2 upregulation were observed in the hippocampal
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       CA1 region. Microglia count numbers were markedly elevated in APPNL-G-F mice compared
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       with littermate controls both at 7 months (3.0 ± 1.1 vs. 2.6 ± 0.4 (n.s.)) and at 24 months
       (10.4 \pm 2.3 \text{ vs. } 2.7 \pm 0.5) (Fig. 1B,H,K; Mixed-effects analysis, p = 0.0005 (timepoints) and p
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       = 0.0051 (genotypes) d). Accordingly, detected lba1 area was also increased: 1072.6 ±
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       146.3 vs. 846.9 \pm 292.8 to \mum<sup>2</sup> at 7 months and 1997.7 \pm 511.8 vs. 970.6 \pm 221.3 to \mum<sup>2</sup> at
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       24 months (Fig. 1B,I; Two-Way ANOVA, p = 0.0119 (timepoints) and p = 0.0288 (genotypes)
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       e). Dkk2 expression per microglial cell quantified by mRNA FISH remained unchanged
       between APP^{NL-G-F} mice and littermate controls at 7 months (0.2 \pm 0.1 \text{ vs. } 0.2 \pm 0.1 \text{ µm}^2) but
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       was higher at 24 months (0.6 \pm 0.4 vs. 0.1 \pm 0.0 \mum<sup>2</sup>) (Fig. 1B,J,K; Two-Way ANOVA, p =
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       0.1363 (timepoints) and p = 0.0652 (genotypes) <sup>f</sup>).
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       Finally, we also assessed whether there were genotype-related changes in the relative
       contribution of Dkk2+ microglia versus the total microglia population. In the cortex, the
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       percentage of Dkk2+ microglia was significantly elevated in APPNL-G-F mice compared with
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       littermate controls both at 7 months (48.1 ± 22.3 vs. 18.8 ± 5.1 %) and at 24 months (84.1 ±
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       5.1 vs. 15.6 ± 7.7 %) (Fig. 1-1A; Two-Way ANOVA, p = 0.0240 (timepoints) and p = 0.0004
       (genotypes) 9). In the CA1 hippocampus, the percentage of Dkk2+ microglia was similarly
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       elevated in APP<sup>NL-G-F</sup> mice compared with littermate controls at 7 months (34.9 ± 16.9 vs. 7.8
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       \pm 9.4 %) and at 24 months (58.4 \pm 21.6 vs. 18.4 \pm 17.7 %) (Fig. 1-1B; Two-Way ANOVA, p =
       0.0784 (timepoints) and p = 0.0093 (genotypes) ^{h}).
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Taken together, our data demonstrate robust microgliosis in conjunction with Dkk2
upregulation in APP <sup>NL-G-F</sup> mice compared with littermate controls, adding a spatial dimension
to a previously published single-cell RNA sequencing (RNA-Seq) study that identified Dkk2
expression in DAM/ARM microglia of the same mouse model (Sala Frigerio et al., 2019).

## 495 Microgliosis and microglial Dkk2 upregulation in APP/PS1 mice Following investigation of APP<sup>NL-G-F</sup> mice, we assessed microgliosis and Dkk2 upregulation 496 in a second AD mouse model, the APP/PS1 mouse, that expresses chimeric mutant 497 mouse/human App and mutant human presenilin 1, both associated with early onset familial 498 499 AD in humans (Jankowsky et al., 2004). 500 βAmyloid plaque load progressively increased in APP/PS1 mice starting from 8 months, 501 whereas age-matched wild-type control littermates lacked βAmyloid plaques altogether. This 502 was especially evident in the cortex (Fig. 2A). While plaques were detectable in the 503 hippocampus of APP/PS1 mice (data not shown), CA1 stratum pyramidale proximal regions - the standardised hippocampal brain region that was imaged in our study - rarely exhibited 504 505 plaque depositions (Fig. 2B). While the number of DAPI<sup>+</sup>/Iba1<sup>+</sup> microglia remained unchanged in APP/PS1 mice versus 506 507 littermate controls at 3 months (3.5 ± 0.6 to 3.3 ± 1.1 per FOV), their counts were 508 significantly higher in APP/PS1 relative to control mice at 8 months (6.1 ± 1.5 vs. 2.9 ± 0.5) and at 12 months (10.8 $\pm$ 1.5 vs. 3.0 $\pm$ 0.5 to) (Fig. 2A,C; Two-Way ANOVA, p < 0.0001 509 510 (timepoints) and p < 0.0001 (genotypes) i). Iba1 area did not markedly differ between 511 transgenic and littermate control mice at 3 months (774.8 ± 175.2 vs. 935.4 ± 164.0 µm<sup>2</sup>) 512 and at 8 months (945.1 ± 275.8 vs. 764.1 ± 205.3 µm<sup>2</sup>) but was significantly elevated in APP/PS1 mice at 12 months (1811.1 ± 367.9 vs. 937.9 ± 220.8 µm²) (Fig. 2A,D; Two-Way 513 ANOVA, p = 0.0030 (timepoints) and p = 0.0006 (genotypes) j). Microgliosis in APP/PS1 514 mice was accompanied by progressively increasing Dkk2 expression per microglial cell at 515 the mRNA level $(1.2 \pm 0.9 \, \mu m^2, 3.6 \pm 2.5 \, \mu m^2, \text{ and } 9.7 \pm 5.5 \, \mu m^2 \text{ at } 3/8/12 \text{ months})$ , whereas 516 this metric remained unchanged in age-matched littermate controls (0.9 $\pm$ 0.6 $\mu$ m<sup>2</sup>, 1.0 $\pm$ 0.7 517 $\mu m^2$ and 1.8 ± 1.2 $\mu m^2$ ) (Fig. 2A,E; Two-Way ANOVA, p = 0.0003 (timepoints) and p = 518 0.0391 (genotypes) k). The rate of increase of microgliosis (number of microglia) and Dkk2 519 expression in APP/PS1 mice was rapid between the ages of 3 and 8 months (88.3 ± 46.9 % 520 521 for microgliosis, 208.6 ± 192.9 5 for Dkk2 expression), at which point it plateaued (76.3 ±

522	24.6 % for microgliosis, 167.9 ± 138.2 % for <i>Dkk2</i> expression) (Fig. 2 <i>A</i> , <i>F</i> ). In agreement with
523	published literature (Wang et al., 2003), we further noted that for the quantified metrics
524	described above, female APP/PS1 mice usually exhibited a more severe phenotype,
525	especially at the final 12 months time point (Fig. 2 <i>C</i> , <i>D</i> , <i>E</i> ).
526	As noted above, hippocampal CA1 stratum pyramidale proximal regions in APP/PS1 mice
527	were mostly devoid of $\beta Amyloid$ plaques. Here, we were unable to detect any changes in the
528	number of DAPI*/lba1* microglia (Fig. 2B,G,J), Iba1 area (Fig. 2B,H), and Dkk2 mRNA
529	signal per microglial cell compared with age-matched littermate controls (Fig. 2B,I,J) (Two-
530	Way ANOVA, all n.s.).
531	Finally, unlike in APP <sup>NL-G-F</sup> mice, we could not detect any significant timepoint-related
532	changes in the relative contribution of Dkk2+ microglia versus the total microglia population
533	in APP/PS1 mice compared with littermate controls both in the cortex (Fig. 2-1A; Two-Way
534	ANOVA, p = 0.3563 (timepoints) and p = 0.7931 (genotypes) $^{\text{I}}$ ) and in the CA1 hippocampus
535	(Fig. 2-1 <i>B</i> ; Two-Way ANOVA, $p = 0.1691$ (timepoints) and $p = 0.7041$ (genotypes) <sup>m</sup> ).
536	Thus, we were able to largely replicate our findings regarding microgliosis and microglial
537	$\it Dkk2$ upregulation in two widely used AD mouse models ( $\it APP^{NL-G-F}$ and $\it APP/PS1$ mice),
538	again adding spatial information to a previously published meta-analysis of single-cell RNA-
539	Seq datasets (Friedman et al., 2018). However, the lack of $\beta$ Amyloid plaques and microglial
540	phenotype in hippocampal CA1 stratum pyramidale proximal regions of the APP/PS1 mouse
541	evokes the notion that the microglial phenotype investigated here could be linked to plaque
542	proximity.

#### Dkk2<sup>+</sup> microglia exhibit increased propensity for clustering around βAmyloid plaques

To investigate whether Dkk2 expression status was correlated with  $\beta$ Amyloid plaque proximity, we performed nearest neighbour analysis to quantify the spatial relationship between microglia and the nearest  $\beta$ Amyloid plaque dense core identified following  $\beta$ Amyloid IHC in  $APP^{NL-G-F}$  and APP/PS1 mice (schematic shown in Fig. 3A). Frequency distributions of recorded distances were summarised in histograms. In AD mouse models, we distinguished between  $Dkk2^+$  and  $Dkk2^-$  microglia, whereas no such distinction was made in wild-type mice as Dkk2 expression levels were negligible at all time points (Fig. 1A,B,F,J, 2A,B,E,I). Furthermore, where no plaques were evident (e.g., in wild-type or predisease stage mice or in some hippocampal CA1 *stratum pyramidale* proximal regions) distances to plaque dense core "placeholders" randomly placed on confocal images were measured instead.

As would be expected, wild-type littermate controls of *APP*<sup>NL-G-F</sup> mice used in our study exhibited microglia at varying/random distances to the nearest randomly assigned dense core placeholder in the motor cortex and CA1 hippocampus at 7 and 24 months (Fig. 1*A,B*, 3*B-E*). This finding is in keeping with the homogeneous tiling behaviour usually exhibited by microglia in the healthy CNS (Nimmerjahn et al., 2005). In stark contrast, a large proportion of *Dkk2*<sup>+</sup> and *Dkk2*<sup>-</sup> microglia were found within 20 μm of the nearest plaque dense core in the cortex of 7 months old *APP*<sup>NL-G-F</sup> mice, while *Dkk2*<sup>+</sup> microglia were predominantly located within 40 μm of plaque dense cores in the CA1 hippocampus (Fig. 3*B,D*). By 24 months, the clustering of microglia around βAmyloid plaque dense cores, especially that of *Dkk2*<sup>+</sup> microglia, became even more pronounced both in the cortex and in the CA1 hippocampus (Fig. 3*C,D*). Skewness and kurtosis analyses of histogram distribution curves for each individual animal revealed that *APP*<sup>NL-G-F</sup> microglia were statistically significantly more tightly clustered around plaque dense cores with increasing age than microglia of age-matched control mice (Fig. 3-1A-H). Crucially however, in 24 months old *APP*<sup>NL-G-F</sup> mice, *Dkk2*<sup>+</sup> microglia were statistically significantly more tightly associated with plaques than *Dkk2*-

570 microglia both in the cortex and in the CA1 hippocampus (Fig. 3-1C,D,G,H; One-Way 571 ANOVA n). We observed similar plaque-microglia distance relationships in APP/PS1 mice and 572 573 respective wild-type littermate controls. Microglia in the wild-type littermate control mouse 574 cortex and CA1 hippocampus were evenly distributed relative to the nearest randomly 575 placed plaque dense core placeholder (Fig. 3F-K). In the cortex of 3 months old (pre disease stage and plaque free) APP/PS1 mice, both Dkk2+ and Dkk2- microglia exhibited similar 576 wild-type-like distance distributions (Fig. 3F), whereas microglia increasingly clustered within 577 20 µm of plaque dense cores at subsequent (disease stage) time points, with Dkk2+ 578 579 microglia exhibiting slightly more pronounced clustering versus Dkk2 microglia at 12 months 580 (Fig. 3G,H); we note that the latter difference was not statistically significant according to 581 skewness and kurtosis analysis, while clustering of Dkk2+ microglia around plaques dense 582 cores in APP/PS1 mice was statistically significantly increased versus that of microglia of age-matched control mice from 8 months onwards (Fig. 3-1I-N; One-Way ANOVA °). As 583 584 discussed above, due to the small amounts of \( \beta Amyloid \) plaques in hippocampal CA1 stratum pyramidale proximal regions of the APP/PS1 mouse, microglia distributions were 585 comparatively variable, especially at 3 months (Fig. 3/), even though substantial clustering of 586 587 Dkk2+ microglia was registered in those instances were βAmyloid plaques were observed in CA1 stratum pyramidale proximal regions at 8 and 12 months (Fig. 3J,K). Accordingly, 588 skewness and kurtosis analyses were inconclusive for CA1 microglia (Fig. 3-10-T; One-Way 589 ANOVA P). 590 591 While it is widely known that microglia accumulate around CNS lesions such as \( \beta Amyloid \) plaques, our data further suggest that clustering around plaques is frequently accompanied 592 by the expression of Dkk2. especially in the APP<sup>NL-G-F</sup> AD mouse model. Conversely, in the 593

healthy brain, microglia were evenly tiled and lacked Dkk2 expression.

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# Microgliosis and microglial Dkk2 upregulation in SOD1<sup>G93A</sup> ALS mice

Having demonstrated microgliosis and clustering of Dkk2+ microglia around βAmyloid plaques in two different widely used AD mouse models, we next investigated whether our findings could be recapitulated in another neurodegeneration mouse model, the SOD1 G93A amyotrophic lateral sclerosis (ALS) mouse (Gurney et al., 1994). According to the metaanalysis of single-cell RNA-Seq datasets by Friedman et al., 2018, microglial Dkk2 upregulation should also be evident in this mouse model. It expresses the mutant human SOD1<sup>G93A</sup> gene that causes motor neuron degeneration in the spinal cord and other parts of the CNS, which underlies ALS (Gurney et al., 1994). We performed mRNA FISH to detect microglial Dkk2 mRNA in situ paired with immunohistochemical labelling using an antibody against Iba1 on transverse cryosections from the lumbar (L)5 region of the spinal cord and acquired images from the ventral horn, an area that displays robust motor neuron degeneration in this mouse model (Gurney et al., 1994), In control mice expressing wild-type human SOD1 (SOD1WT), but not in age-matched mice expressing SOD1<sup>G93A</sup>, no overt changes in microgliosis and Dkk2 expression were observed at any of the assessed time points (Fig. 1A-E). At the early 50 days time point, SOD1 G93A mice still exhibited control levels of microgliosis (1.7 ± 0.1 versus 1.6 ± 0.2 DAPI\*/lba1\* microglia per FOV (Fig. 4A,B),  $244.7 \pm 73.2$  vs  $266.5 \pm 59.7$  µm<sup>2</sup> lba1 area (Fig. 4A,C)). However, the number of microglia was significantly elevated in SOD1 G93A compared with age-matched control  $SOD1^{WT}$  mice at 100 days (6.3 ± 0.9 vs. 1.8 ± 0.2) and at 120 days  $(13.6 \pm 0.9 \text{ vs. } 1.5 \pm 0.4)$  (Fig. 4A,B; Two-Way ANOVA, p < 0.0001 (timepoints) and p = 0.0001 (genotypes) q). Accordingly, the area of lba1 immunoreactivity was also significantly higher in  $SOD1^{G93A}$  versus  $SOD1^{WT}$  mice at 100 days (918.8 ± 31.7 vs. 328.1 ± 75.3  $\mu$ m<sup>2</sup>) and at 120 days (1646.0  $\pm$  184.7 vs. 248.7  $\pm$  42.1  $\mu$ m<sup>2</sup>) (Fig. 4A,C; Two-Way ANOVA, p < 0.0001 (timepoints) and p = 0.0001 (genotypes) '). Dkk2 expression per microglial cell progressively increased in SOD1<sup>G93A</sup> but not in SOD1<sup>WT</sup> mice, although this increase only reached significance at 120 days:  $0.8 \pm 0.7 \mu m^2$ ,  $2.4 \pm 0.8 \mu m^2$ , and  $10.7 \pm 4.6 \mu m^2$  in

 $SOD1^{G93A}$  mice at 50/100/120 days; 0.7  $\pm$  0.5  $\mu$ m<sup>2</sup>, 0.5  $\pm$  0.3  $\mu$ m<sup>2</sup>, and 0.5  $\pm$  0.6  $\mu$ m<sup>2</sup> in 623 SOD1WT mice at 50/100/120 days (Fig. 4A,D; Two-Way ANOVA, p = 0.0154 (timepoints) and 624 p = 0.0193 (genotypes) s). Thus, fast-paced microgliosis is evident between 50 and 100 days 625 in SOD1<sup>693A</sup> mice, with a slightly reduced rate of acceleration between 100 days and 120 626 days (Fig. 4E). Conversely, microglial Dkk2 upregulation appears to accelerate especially in 627 the final pathological stages. This resulted in a relative contribution of Dkk2+ microglia versus 628 total microglia that was significantly increased in SOD1 G93A compared to SOD1 T mice: 45.4 629  $\pm$  5.1 %, 56.5  $\pm$  19.2 %, and 75.0  $\pm$  4.4 % in SOD1<sup>G93A</sup> mice at 50/100/120 days; 39.9  $\pm$  17.4 630 %, 27.5  $\pm$  14.3 %, and 14.6  $\pm$  3.6 % in  $SOD1^{WT}$  mice at 50/100/120 days (Fig. 4-1A; Two-631 Way ANOVA, p = 0.9125 (timepoints) and p = 0.0073 (genotypes) <sup>t</sup>) 632 We next sought to investigate whether microgliosis and microglial Dkk2 upregulation in the 633 SOD1<sup>G93A</sup> ALS mouse model were spatially correlated with local CNS lesions, analogous to 634 that observed in the APPNL-G-F and APP/PS1 AD mouse models. In absence of AD-typical 635 βAmyloid plaques in ALS, we combined Dkk2 mRNA FISH and microglial 636 immunohistochemical labelling with the immunolabelling of GFAP to visualise astrocytes and 637 immunolabelling of misfolded SOD1 to visualise aggregates of misfolded mutant SOD1 goal. 638 In 120 days old SOD1<sup>G93A</sup> ALS mice, we failed to detect clustering of microglia, irrespective 639 of their Dkk2 expression status, specifically around GFAP (Fig. 4F). However, we observed 640 some degree of microglial clustering around misfolded SOD1 immunoreactivity (Fig. 4G.H: 641 642 magenta regions of interest (ROIs)). However, many microglia did not exhibit local 643 accumulation around misfolded SOD1 lesions (Fig. 4G,H: cyan ROIs). In absence of a clear clustering pattern, these observations were not quantified. 644 645 Taken together, the microgliosis and microglial Dkk2 upregulation detected in the brains of AD mouse models could also be replicated in an unrelated neurodegeneration mouse 646 model, namely in the spinal cord of the SOD1 G93A ALS mice. While some degree of 647 648 clustering around misfolded SOD1 aggregates occurred, this was not as robust as the clustering around \( \beta Amyloid \) plaques in the \( APP^{NL-G-F} \) and \( APP/PS1 \) AD mouse models. 649

Nonetheless, our findings support the published notion that Dkk2 upregulation may be part
of a general response in CNS microglia as they transition from surveillance to activation
(DAM/ARM microglia), at least in mouse models of neurodegeneration (Friedman et al.,
2018; Sala Frigerio et al., 2019; Meilandt et al., 2020). This supports the possibility that Dkk2
represents a DAM/ARM marker gene, at least in mice.

## DKK2 recombinant protein disrupts WNT7a-induced synapse features in cultured

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significance (Fig. 51; One-Way ANOVA; n.s.).

We next sought to investigate what effect Dkk2 protein secreted by microglia might have on its surroundings under the assumption that increased microglial Dkk2 expression at the mRNA level results in increased microglial Dkk2 protein secretion. We focused our study on synapses in mature primary neuron cultures due to the well-known anti-synaptic effect that the Dkk2 homologue Dkk1 has on them, which it brings about by decreasing canonical and increasing non-canonical Wnt signalling (Purro et al., 2012; Galli et al., 2014; Marzo et al., 2016; Elliott et al., 2018; Sellers et al., 2018). However, we note that, in principle, Dkk2 can have context-dependent agonistic and antagonistic effects (Mao and Niehrs, 2003). To this end, we treated mature rat hippocampal neuron cultures sparsely expressing hSyn:EGFP at 21 days in vitro with recombinant proteins for 24 hrs (WNT7a, 200 ng/ml; DKK1, 100 ng/ml; DKK2, 100 ng/ml; DKK2 + WNT7a, 100 and 200 ng/ml; BSA control, 100 ng/ml). Chosen recombinant protein concentrations were in line with published works and/or TCF/LEF dose dependence assays performed in house (data not shown). This was followed by immunocytochemical labelling using antibodies against the pre- and post-synaptic markers vGlut and Homer. A typical sparsely labelled (hsyn:EGFP+) neuron with highlighted primary dendrite (boxed ROI) that was used for analysis is depicted in Fig. 5A. WNT7a treatment significantly increased the number of dendritic spines as well as the number of post-synaptic homer puncta compared with BSA treatment (Fig. 5B,C,G,H; One-Way ANOVA, dendritic spines: p = 0.0023 "; homer puncta: p = 0.0309 ). Conversely, these metrics were unaffected by DKK1 and DKK2 treatment (Fig. 5D,E,G,H; One-Way ANOVA; all n.s.) and crucially also by combined DKK2 + WNT7a treatment (Fig. 5F,G,H; One-Way ANOVA: n.s.). The absolute number of synapses (defined as Homer/vGlut apposition events with up to 1 µm distance) was similarly increased by WNT7a but not by DKK1, DKK2 or a combination of DKK2 and WNT7a compared with BSA, although this did not reach statistical

Nonetheless, these combined data suggest that DKK2 treatment is antagonistic rather than
agonistic and completely abolishes the pro-synaptogenic effect of WNT7a treatment, at least
in our in vitro assay. Furthermore, it appears that the antagonistic effect of DKK2 as well as
that of the established Wnt signalling antagonist DKK1 rely upon an inherent Wnt signalling
tone that was low/absent in our cultures, as neither reduced synaptic metrics to levels below
those found with BSA treatment when applied independently.

## DKK2 is not upregulated in human microglia

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We have thus far demonstrated significant microgliosis and microglial Dkk2 upregulation in AD and ALS mouse models of neurodegeneration, as well as clustering of Dkk2+ microglia around βAmyloid plaques. In combination with previously published studies, which have demonstrated microglial Dkk2 upregulation by single-cell RNA-Seq (Friedman et al., 2018; Sala Frigerio et al., 2019; Meilandt et al., 2020), this led us to postulate that Dkk2 may represent a bona fide DAM/ARM marker gene at least in neurodegeneration mouse models. We next sought to investigate whether our findings were recapitulated in human subjects diagnosed with AD. To analyse microglial DKK2 expression in humans, we obtained human post-mortem frontal cortex brain tissue from healthy control individuals, as well as individuals diagnosed with AD and pathological ageing, the latter being defined as non-demented individuals with ADtypical histopathologic changes. Demographic data and post-mortem brain assessments are summarised in Table 6-1. We performed mRNA FISH to detect DKK2 mRNA in microglia that were additionally labelled by mRNA FISH for the microglial markers TREM2 and P2RY12 (see also Table 6-2 for added analysis parameters). This was paired with immunohistochemical labelling using an antibody against βAmyloid to label βAmyloid plaques. As expected, samples from control individuals were devoid of βAmyloid plaques while those classified "pathological ageing" and "AD" exhibited progressively increasing levels of plaque burden (Fig. 6A-C). However, we did not detect significant differences in the number of DAPI<sup>+</sup>/TREM2<sup>+</sup>/P2RY12<sup>+</sup> microglia per field of view between control, pathological ageing, and AD groups (Fig. 6A-D; control: 11.1 ± 10.7 microglia / FOV; pathological ageing: 6.2 ± 3.4; AD: 8.0 ± 6.8; one-way ANOVA, p = 0.4507 w). This absence of microglia number changes is in line with findings from published literature (e.g.: Marlatt et al., 2014; Davies et al., 2017; Paasila et al., 2019; Franco-Bocanegra et al., 2021). Similarly, DKK2 expression per DAPI\*/TREM2\*/P2RY12\* microglial cell did not differ between control (0.5 ± 0.2 µm²),

pathological ageing (0.7 ± 0.1 µm<sup>2</sup>), and AD groups (0.7 ± 0.4 µm<sup>2</sup>) (Fig. 6A-C,E; one-way

717 ANOVA, p = 0.7689 x). This was accompanied by unchanged relative contributions of DKK2+ microglia across control (38.3 ± 9.7 %), pathological ageing (38.3 ± 3.8%), and AD groups 718 719 (41.6 ± 12.5 %) (Fig. 6-1A; One-Way ANOVA, p = 0.8650 y). We further found that DKK2 expression status had no effect on TREM2 expression levels per DAPI+/TREM2+/P2RY12+ 720 microglial cell in control (DKK2<sup>+</sup>: 0.8 ± 0.3 µm<sup>2</sup>: DKK2<sup>-</sup>: 0.6 ± 0.3 µm<sup>2</sup>), pathological ageing 721  $(DKK2^{+}: 0.9 \pm 0.9 \, \mu m^{2}; DKK2^{-}: 0.7 \pm 0.2 \, \mu m^{2})$ , and AD individuals  $(DKK2^{+}: 0.5 \pm 0.2 \, \mu m^{2}; DKK2^{-}: 0.5 \pm 0.2 \, \mu m^{2}; DKK2^{-}: 0.5 \pm 0.2 \, \mu m^{2};$ 722 723  $DKK2^{-}$ : 0.4 ± 0.2 µm<sup>2</sup>) (Fig. 6-1B; one-way ANOVA, p = 0.2349  $^{z}$ ). Conversely, P2RY12expression levels per DAPI\*/TREM2\*/P2RY12\* microglial cell were increased in cells co-724 725 expressing DKK2 compared with cells that lacked DKK2 expression, although that difference was not statistically significant: control (DKK2+: 2.7 ± 1.0 µm2; DKK2-: 1.7 ± 0.5 µm2), 726 pathological ageing (DKK2+: 2.7 ± 0.5 µm2; DKK2-: 2.0 ± 0.9 µm2), and AD individuals 727  $(DKK2^{+}: 3.2 \pm 1.6 \,\mu\text{m}^{2}; DKK2^{-}: 1.6 \pm 0.8 \,\mu\text{m}^{2})$  (Fig. 6-1*C;* One-Way ANOVA, p = 0.1056 <sup>ab</sup>). 728 729 We subsequently assessed the clustering behaviour of microglia around βAmyloid plaques. In healthy control individuals, the total microglia population displayed a varying/random 730 731 spatial distribution around the nearest randomly placed dense core placeholder, which furthermore did not appear to be modified by DKK2 expression status (Fig. 6A,F). In 732 individuals classified as "pathological ageing", we identified emerging populations of both 733 734 DKK2<sup>+</sup> and DKK2<sup>-</sup> microglia that frequently accumulated around βAmyloid plaque dense cores up to a distance of 50 µm, although clustering in the proximal most regions was more 735 robust for DKK2 cells (Fig. 6B,G). This clustering was further consolidated, especially 736 737 among DKK2+ microglia, whose predominant distribution now also included proximal most regions (Fig. 6C,H). 738 739 Taken together, our data on human frontal cortex post-mortem tissue indicate that neither 740 the increase in microglial numbers nor microglial DKK2 upregulation, both of which were evident in mouse models, occur in human brains under conditions classified as "pathological 741 742 ageing" and "AD". However, microglia did exhibit clustering behaviour around βAmyloid 743 plagues even though this was not linked to DKK2 expression.

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#### Discussion

Past and present research have linked dysregulated Wnt signalling to AD (e.g. Palomer et al., 2022; previously reviewed by Purro et al., 2014; Palomer et al., 2019; Aghaizu et al., 2020; Inestrosa et al., 2021). However, recent research has also more intimately linked microglia and neuroinflammation to AD, as initially exemplified by variants of genes predominantly expressed in microglia like TREM2 and CD33 exhibiting disease modifying properties (Bradshaw et al., 2013; Guerreiro et al., 2013). New evidence even suggests that the microglial AD response is itself regulated by Wnt signalling, as the signalling pathway downstream of TREM2, essential for regulating microglial survival and proliferation, crosstalks with the Wnt pathway (Zheng et al., 2017; Meilandt et al., 2020). Here we sought to explore the role of DKK2/Dkk2, which encodes a Wnt signalling modulator, that was upregulated in a subpopulation of microglia (DAM/ARM) in various single and bulk cell RNA-Seq studies on neurodegeneration mouse models (Friedman et al., 2018; Sala Frigerio et al., 2019; Meilandt et al., 2020). Our histological data obtained largely by mRNA FISH combined with immunocytochemistry replicated the findings cited above. Crucially however, we added valuable spatial information on the location of Dkk2+ microglia with respect to neurodegenerative lesions such as βAmyloid plaques in AD mouse models, where Dkk2+ microglia exhibited a potential to cluster near βAmyloid plaques that was greater or at least equal to that of Dkk2- microglia, at least in advanced- APPNL-G-F mice. The exact role of Dkk2 protein expression is yet to be fully understood, but assuming its reported role as a secreted, soluble protein (reviewed by Niehrs, 2006) we speculated that Dkk2's mechanism of action could be autocrine or paracrine in nature. In support of the former, oncological evidence suggests that peripheral immune natural killer and CD8<sup>+</sup> T cells, which are derived from the same myeloid lineage as CNS microglia, can detect soluble Dkk2. However, in this context, Dkk2 was utilised as an immune evasion tool secreted by tumours

to suppress cytotoxic immune cell activation and tumour destruction via an atypical, Wnt

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signalling independent pathway (Xiao et al., 2018). Nonetheless, it is a possibility that microglial-derived Dkk2 can also act upon microglia in an autocrine fashion at least in mice, although we can only speculate what the cellular response to such a stimulus would be.

Conversely, we provide evidence in support of a paracrine mechanism at least in cultured rat primary neurons as we demonstrate that recombinant human DKK2 protein blocks the synaptogenic effect of Wnt in vitro. However, we note that the administered DKK2 protein concentration may not match physiological, microglia derived Dkk2/DKK2 protein levels in situ. Knowing that DKK2 can generally engage in Wnt antagonising and agonising activities depending respectively on the presence or absence of the co-receptor Kremen2 (Mao and Niehrs, 2003), it appears that, at least in our in vitro system, DKK2 protein acts as an antagonist. DKK2 may thus behave similarly to DKK1, a negative regulator of canonical Wnt/β-catenin and non-canonical Wnt/PCP signalling with known synapse destabilising properties (Purro et al., 2012; Galli et al., 2014; Killick et al., 2014; Marzo et al., 2016; Elliott et al., 2018; Sellers et al., 2018; see also review by Aghaizu et al., 2020), likely also in the human AD brain (Caricasole et al., 2004). Synapse density reductions in plaque proximal regions (Koffie et al., 2009) would be consistent with the fact that oligomeric βAmyloid induces Dkk1 expression (Purro et al., 2012; Killick et al., 2014; Jackson et al., 2019). Dkk2+ microglia accumulating around βAmyloid plagues may locally increase Dkk2 protein levels, adding to the anti-synaptic milieu established by Dkk1 near plaques. Given that microglia already engage in complement-mediated synaptic pruning by phagocytosis in AD mouse models (Hong et al., 2016; Shi et al., 2017), the relative contributions of individual synaptotoxic components around plaques will have to be addressed in future studies.

In assessing the chronological order between microgliosis/microglial plaque clustering and microglial *Dkk2* upregulation, we observed significant microgliosis increases before *Dkk2* upregulation in *APP/PS1*, *APP<sup>NL-G-F</sup>*, and *SOD1*<sup>G93A</sup> mice with respect to absolute quantification metrics (see Fig 1,2,4). However, when comparing relative rate changes, the rate of *Dkk2* signal increase at early disease stages in the *APP/PS1* AD mouse model

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surpassed the rate of microgliosis increase (Fig. 2F,J). It should be noted that Dkk2 induction was initiated from near-zero basal expression levels (Fig. 2E), whereas both basal microglia numbers and Iba1 immunoreactivity levels were decidedly greater than zero (Fig. 2C,D,G,H). The potential for more pronounced changes was thus markedly greater for Dkk2 induction at least in APP/PS1 mice. Conversely, in SOD1 G93A ALS mice, the rate of microgliosis increase surpassed that of Dkk2 signal increase at early disease stages (Fig. 4E). Presumably, basal microglial cell densities lower than those observed in the mouse brain (Fig. 4B,C vs 2C,D,G,H), which is in keeping with published literature (Tan et al., 2020), likely contributed at least partially to this outcome. What should be addressed in future studies is whether the ability to induce Dkk2 expression is innate in all microglia or whether context, such as proximity to neurodegenerative lesions, is to be ascribed a more prominent role. CNS microglia are not a homogeneous population of cells, with gene expression signatures differing depending on factors such as brain region, sex, age, and context including disease (reviewed by Masuda et al., 2020). In 3 month old APP<sup>NL-G-F</sup> mice, Dkk2\* ARM cells represented 6 % of to the total microglial pool (Sala Frigerio et al., 2019); this number increased to 33 and 52 % at 6 months and 12 months respectively. It will be interesting to discern whether ARM-competence is restricted to the initial population of ARM cells, which then serve as a proliferating seed population, or whether cells from the total microglia pool are continuously recruited into the Dkk2<sup>+</sup> ARM population as disease progresses. The potential to produce Dkk2+ ARM may further by influenced by other factors, which should be addressed in future studies, as different neurodegeneration disease models and CNS regions analysed in our study exhibited varying contributions of Dkk2+ microglia relative to the total microglial pool. Finally, our study has revealed discrepancies between human AD and transgenic AD mouse models. DKK2 mRNA expression levels were not elevated in post-mortem frontal cortex samples from individuals diagnosed with AD vs healthy individuals. While other human brain

and CNS regions like the motor cortex, hippocampus, and spinal cord might exhibit DKK2

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upregulation (although unlikely given the absence of DKK2 upregulation in recently published human RNA-seq databases; see below), the above finding is in stark contrast to our findings in neurodegeneration mouse models. In contrast to the situation in human patients, proximity to βAmyloid plaques appeared to be a strong predictor of microglial Dkk2 expression in mice, both in the hippocampus and motor cortex. We note that those microglia that exhibited DKK2 expression at the mRNA level in human tissue also displayed higher levels of the microglial marker P2RY12, but not TREM2. While the relevance of this finding is yet to be determined, published research has shown microglial expression of P2RY12, typically considered a homeostatic microglial marker gene, in proximity to diffuse plaques in post-mortem tissue from AD individuals (Walker et al., 2020). A caveat worth mentioning in relation to the lack of DKK2 upregulation is the fact that human microglia at AD end stage (Braak & Braak stage 5-6) were chronically exposed to disease for much longer periods than their mouse counterparts and chronic adaptations in microglia gene expression signatures as well as microglial numbers may have masked potential earlier changes (we note that our pathological ageing samples at Braak & Braak stage 3-4 also lacked DKK2 upregulation). Nevertheless, it is now known that gene expression signatures between mouse and human DAM/ARM populations, although overlapping to some extent, exhibit distinct differences (reviewed by Wang, 2021). In fact, numerous single-cell RNA-seg analyses have identified gene expression signatures that differed between mouse and human DAM/ARM populations (Grubman et al., 2019; Mathys et al., 2019; Nguyen et al., 2020; Olah et al., 2020; Smith et al., 2022). For technical reasons and in contrast to mouse studies, human single-cell RNAseq studies are frequently, although not exclusively (Olah et al., 2020), restricted to nuclear transcripts, which may have contributed to the apparent transcriptomic differences between mouse and human microglia (note that extra-nuclear mRNA is abundant due to nuclear export before translation). However, even in a recent single nucleus RNA-seq comparative study involving human AD post-mortem tissue and the 5xFAD AD mouse model, differences between human and mouse microglial gene expression signatures persisted (Zhou et al., 2020). The inability to detect extra-nuclear mRNA in human brain samples can be

circumvented with the use of optimised tissue harvesting protocols (Olah et al., 2020), or *in situ* detection methods such as low throughput mRNA FISH (present study; Jolly et al., 2019) or higher throughput digital spatial profiling (Prokop et al., 2019). Nonetheless, our mRNA FISH based study strengthens the notion that human and mouse microglia, despite exhibiting some overlaps, are different even beyond just the expression status of *DKK2/Dkk2*, at least in the brain. Future studies should also examine any such interspecies differences in the spinal cord.

Our study therefore highlights the increasingly recognised difficulties and limitations of using mouse models to recapitulate facets of human biology and disease (Elder et al., 2010; Jucker, 2010; Cavanaugh et al., 2014; Justice and Dhillon, 2016; Perlman, 2016; Dawson et al., 2018). Regardless of whether this may be ascribed in our study to differing biological responses in humans vs mice or masking chronic adaptations in much longer human disease, these limitations likely play a key role in the absence of truly disease altering therapies to date despite decades of AD research and >100 clinical trials. Future AD research should thus substantially increase scrutiny in cases where animal models are to be used to ensure faithful modelling of human biology. Human based AD models including human induced pluripotent stem cell-derived cell cultures and brain organoids are potent additions to our tool-kit despite still lacking the capacity to fully recapitulate human *in vivo* biology in an *in vitro* setting, and indeed in an *in vivo* setting (Mancuso et al., 2019).

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## Figure legends

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Figure 1. Microgliosis and microglial Dkk2 upregulation in APP<sup>NL-G-F</sup> mice. Dkk2 mRNA FISH as well as microglial Iba1 and βAmyloid IHC labelling in the motor cortex (A) and CA1 hippocampus (B) of APP<sup>NL-G-F</sup> mice. Boxed regions of interest (ROIs) were magnified for increased detail. (C) FIJI/ImageJ analysis workflow to quantifying punctated Dkk2 mRNA FISH signal in Iba1-labelled (microglial) cells. Iba1 staining based analysis mask was generated, within which Dkk2 signal was quantified. (D-G) Microgliosis and Dkk2 expression quantification in the APPNL-G-F motor cortex. (D) Quantification of microglia numbers per maximum projected field of view (FOV; 1.8 x 10<sup>-2</sup> mm<sup>2</sup>). (E) Iba1 IHC surface area per maximum projected FOV. (F) Normalised Dkk2 mRNA FISH signal area per DAPI\*/Iba\* microglial cell. (G) Comparative % changes of Dkk2 expression and microglia numbers during time course. (H-K) Microgliosis and Dkk2 expression quantification in the APPNL-G-F CA1 hippocampus. (H) Quantification of microglia numbers per maximum projected FOV. (I) Iba1 IHC surface area per maximum projected FOV. (J) Normalised Dkk2 mRNA FISH signal area per DAPI\*/Iba\* microglial cell. (K) Comparative % changes of Dkk2 expression and microglia numbers during time course. Individual data points represent the average of 4 FOVs analysed for each animal (D-F, H-J) or total averages from all animals per group (G, K). N = 4 animals per condition and time point, n = 4 different fields of view / animal and brain region. Scale bars, (A-C) 25 µm; magnified ROIs: 5 µm. Two-way ANOVA with Multiple comparisons test. \*p < 0.05; \*\*p < 0.01; \*\*\*p < 0.001; \*\*\*\*p < 0.0001 (a-f). See also Figure 1-1.

Figure 2. Microgliosis and microglial <i>Dkk2</i> upregulation in <i>APP/PS1</i> mice. <i>Dkk2</i> mRNA
FISH as well as microglial Iba1 and βAmyloid IHC labelling in the motor cortex (A) and CA1
hippocampus (B) of APP/PS1 mice. Boxed regions of interest (ROIs) were magnified for
increased detail. (C-F) Microgliosis and Dkk2 expression quantification in the APP/PS1
motor cortex. (C) Quantification of microglia numbers per maximum projected FOV (FOV =
1.8 x 10 <sup>2</sup> mm <sup>2</sup> ). (D) Iba1 IHC surface area per maximum projected FOV. (E) Normalised
Dkk2 mRNA FISH signal area per DAPI*/Iba* microglial cell. (F) Comparative % changes of
Dkk2 expression and microglia numbers during time course. (G-J) Microgliosis and Dkk2
expression quantification in the APP/PS1 CA1 hippocampus. (G) Quantification of microglia
numbers per maximum projected FOV. (H) Iba1 IHC surface area per maximum projected
FOV. (I) Normalised Dkk2 mRNA FISH signal area per DAPI*/Iba* microglial cell. (K)
Comparative % changes of Dkk2 expression and microglia numbers during time course.
Individual data points represent the average of 4 FOVs analysed for each animal (C-E, G-I)
or total averages from all animals per group (F, J). N = 6 animals (3x females, 3x males) per
time point and condition, n = 4 different fields of view / animal and brain region. Scale bars,
(A-C) 25 $\mu$ m; magnified ROIs: 5 $\mu$ m. Two-way ANOVA with Multiple comparisons test. *p <
0.05; **p < 0.01; ***p <
0.001; ****p < 0.0001 ( <sup>i-k</sup> ). See also Figure 2-1.

Figure 3. $Dkk2^+$ microglia cluster around $\beta$ Amyloid plaques in $APP^{NL\text{-}G\text{-}F}$ and $APP/PS1$
mice. (A) Schematic showing methodology of measuring distances between microglia and
nearest $\beta$ Amyloid plaque dense core. (B-E) Distribution of microglia ( $Dkk2^+$ , $Dkk2^-$ or total
microglia (MG) populations) distances to nearest $\beta$ Amyloid plaque dense core in $\textit{APP}^{\textit{NL-G-F}}$ or
littermate control mice. Relative frequency distribution in the $\textit{APP}^{\textit{NL-G-F}}$ or control motor
cortex at 7 months (B) and 24 months (C). Relative frequency distribution in the APP <sup>NL-G-F</sup> or
control CA1 hippocampus at 7 months (B) and 24 months (C). (F-K) Distribution of microglia
( <i>Dkk2</i> <sup>+</sup> ,
$\textit{Dkk2}^{-}$ or total microglia (MG) populations) distances to nearest $\beta$ Amyloid plaque dense core
in APP/PS1 or littermate control mice. Relative frequency distribution in the APP/PS1 or
control motor cortex at 3 months (F), 8 months (G), and 12 months (H). Relative frequency
distribution in the APP/PS1 or control CA1 hippocampus at 3 months (I), 8 months (J), and
12 months <b>(K)</b> . $APP^{NL\text{-}G\text{-}F}$ /control: N = 4 animals per condition and time point, n = 4 different
fields of view / animal and brain region; $APP/PS1/control$ : N = 6 animals (3x females, 3x females, 3x females)
males) per time point and condition, n = 4 different fields of view / animal and brain region.
See also Figure 3-1.

Figure 4. Microgliosis and microglial <i>Dkk</i> 2 upregulation in <i>SOD1</i> <sup>G93A</sup> ALS mice. (A)
Dkk2 mRNA FISH and microglial Iba1 IHC labelling in the L5 spinal cord ventral horn of mice
transgenically expressing human $SOD1^{WT}$ (control) or mutant $SOD1^{G93A}$ at 50, 100, and 120
days. Boxed regions of interest (ROIs) were magnified for increased detail. (B)
Quantification of microglia numbers per maximum projected FOV (FOV = $1.8 \times 10^{-2} \text{ mm}^2$ )
(C) Iba1 IHC surface area per maximum projected FOV. (D) Normalised Dkk2 mRNA FISH
signal area per DAPI <sup>+</sup> /Iba <sup>+</sup> microglial cell. (E) Comparative % changes of <i>Dkk2</i> expression
and microglia numbers during time course. (F) Dkk2 mRNA FISH together with microglia
Iba1 and astroglial GFAP IHC labelling in the L5 spinal cord ventral horn of 120 days old
SOD1 <sup>G93A</sup> mice. (G,H) Dkk2 mRNA FISH together with microglial lba1 and misfolded SOD1
IHC labelling in the L5 spinal cord ventral horn of 120 days old SOD1 G93A mice. Magenta and
cyan ROIs respectively depict proximity and absence of clear association between
DAPI <sup>+</sup> /Iba1 <sup>+</sup> microglia and misfolded SOD1 foci. Individual data points represent the average
of 4 FOVs analysed for each animal (C-D) or total averages from all animals per group (E)
N = 3 animals per time point and condition, $n = 4$ fields of view per animal. Scale bars, (A,F-
H) 25 $\mu$ m; magnified ROIs: 5 $\mu$ m. Two-way ANOVA with Multiple comparisons test. *p <
0.05; **p < 0.01; ***p <
0.001; ****p < 0.0001 ( <sup>q-s</sup> ). See also Figure 4-1.

1170	Figure 5. Recombinant DKK2 protein neutralises the synaptogenic effect of WNT7a in	
1171	mature hippocampal primary neurons. (A) Typical rat hippocampal neuron at DIV22	
1172	expressing hSyn:EGFP immunolabelled with Homer and vGlut. Boxed ROI indicates a	
1173	primary dendritic branch, on which analysis in this section was focused. (B-F)	
1174	Representative primary dendrites of DIV22 hippocampal neurons treated for 24 hrs with 100	
1175	ng/ml BSA control (B),	
1176	200 ng/ml WNT7a (C), 100 ng/ml DKK1 (D), 100 ng/ml DKK2 (E), and 100 ng/ml / 200 ng/ml	
1177	DKK2 + WNT7a (F). Immunolabelling for the pre- and post-synaptic markers vGlut and	
1178	homer was performed, and merged views are shown in top panels. Remaining panels show	
1179	homer (middle panel) and vGlut (lower panel) with outlined primary dendrite boundaries	
1180	based on hSyn:EGFP labelling. (G) Normalised number of dendritic spines per 100 µm	
1181	primary dendrite. (H) Normalised number of homer puncta per 100 µm primary dendrite. (I)	
1182	Normalised number of synapses (defined as homer/vGlut apposition events with a maximum	
1183	distance of 1 μm) per	
1184	100 $\mu m$ primary dendrite. (J) Relative number of homer puncta apposed within 1 $\mu m$ by	
1185	vGlut. N = 3 biological repeats, n = at least 15 analysed neurons per condition. Scale bars,	
1186	(A) 50 $\mu$ m; (B-F) 5 $\mu$ m. One-way ANOVA with Tukey post test. *p < 0.05; **p < 0.01 ( $^{u,  v}$ ).	
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Figure 6. DKK2 is not upregulated at the mRNA level in post-mortem brains from AD patients. (A-C) Representative confocal images depicting microglial DKK2 expression in the human frontal cortex. DKK2 as well as microglial TREM2 and P2RY12 mRNA FISH signal in conjunction with βAmyloid IHC labelling in post-mortem human frontal cortex samples from healthy control individuals (A), individuals diagnosed with pathological ageing (B), and individuals diagnosed with AD (C). Boxed ROIs highlight microglia expressing DKK2 (DAPI\*/DKK2\*/TREM2\*/P2RY12\*); yellow boxed ROIs were enlarged for improved visualisation. (D) Quantification of microglia (DAPI+/TREM2+/P2RY12+) numbers per maximum projected FOV (FOV = 1.8 x 10<sup>-2</sup> mm<sup>2</sup>). (E) Normalised DKK2 mRNA FISH signal area DAPI\*/TREM2\*/P2RY12\* microalial cell. (F-H) DAPI\*/TREM2\*/P2RY12\* microglia (Dkk2\*, Dkk2\* or total microglia (MG) populations) distances to nearest \( \beta Amyloid \) plaque dense core in post-mortem human frontal cortex samples. Individual plots show relative frequency distributions in individuals classified as healthy control (F), pathological ageing (G), and AD (H). Healthy control individuals: N = 5 individuals, n = 8 fields of view); AD (Braak & Braak stage 5-6): N = 6 individuals, n = 8 fields of view; pathological ageing (Braak & Braak stage 3-4): N = 2 individuals, n = 8 fields of view. Data points represent the average of 4 FOVs analysed for each individual subject (mean ± SD); individual subject mean values were further averaged for each group of interest and summarised as mean ± SD (blue horizontal bars, red error bars). One-way ANOVA with Tukey post test (w. x). No statistical differences identified. Scale bars, (A-C) 25 μm; (A-C enlarged ROIs) 5 μm. See also Figure 6-1, Tables 6-1 and 6-2.

1211	Figure 1-1. Microglial <i>Dkk2</i> upregulation in <i>APP</i> <sup>NL-G-F</sup> mice – % <i>Dkk2</i> <sup>+</sup> microglia.
1212	Related to Figure 1.
1213	Relative contribution (%) of <i>Dkk2</i> <sup>+</sup> microglia versus the total microglia population in the motor
L214	cortex (A) and CA1 hippocampus (B) of APPNL-G-F mice as assessed by Dkk2 mRNA FISH
1215	as well as microglial Iba1 IHC labelling. Individual data points represent the average of 4
1216	FOVs analysed for each animal. N = 4 animals per condition and time point, n = 4 different
L217	fields of view / animal and brain region. Two-way ANOVA with Multiple comparisons test. $^*\mathfrak{p}$
1218	< 0.05; **p < 0.01; ***p < 0.001; ****p < 0.0001 ( <sup>g-h</sup> ).
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1220	Figure 2-1. Microglial <i>Dkk</i> 2 upregulation in <i>APP/PS1</i> mice – % <i>Dkk</i> 2 <sup>+</sup> microglia.
1221	Related to Figure 2.
1222	Relative contribution (%) of Dkk2 <sup>+</sup> microglia versus the total microglia population in the motor
1223	cortex (A) and CA1 hippocampus (B) of APP/PS1 mice as assessed by Dkk2 mRNA FISI
1224	as well as microglial Iba1 IHC labelling. Individual data points represent the average of
1225	FOVs analysed for each animal. $N = 6$ animals (3x females, 3x males) per time point an
1226	condition, $n$ = 4 different fields of view / animal and brain region. Two-way ANOVA with
1227	Multiple comparisons test. *p < 0.05; **p < 0.01; ***p < 0.001; ****p < 0.0001 ( $^{l,m}$ ).

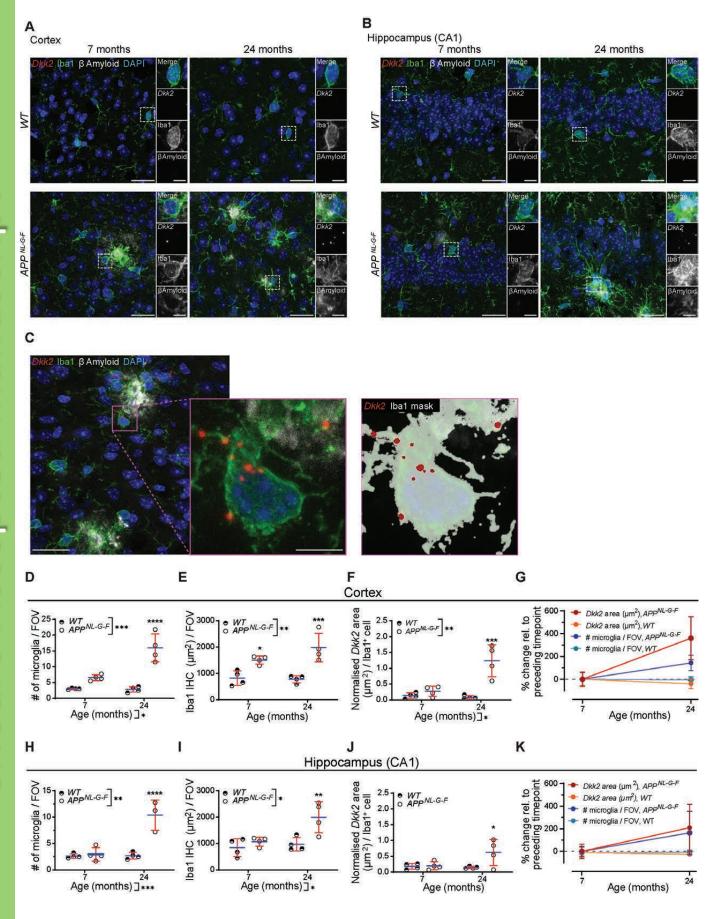
1228	Figure 3-1. Statistical analysis for microglial clustering around βAmyloid plaques.	
1229	Related to Figure 3.	
1230	(A-H) Skewness and kurtosis analysis of histograms from microglia-βAmyloid plaque nearest	
1231	neighbour analysis on APP <sup>NL-G-F</sup> mice in Figure 3 in the cortex (A-D) and CA1 hippocampus	
1232	(E-H) as well as at 7 months (A,B,E,F) and at 24 months (C,D,G,H). (I-T) Skewness and	
1233	kurtosis analysis of histograms from microglia-βAmyloid plaque nearest neighbour analysis	
1234	on APP/PS1 mice in Figure 3 in the cortex (I-N) and CA1 hippocampus (O-T) as well as at 3	
1235	months (I,J,O,P) 8 months (K,L,Q,R) and at 12 months (M,N,S,T). Data points represent	
1236	mean	
1237	values for individual analysed animals. $APP^{NL-G-F}/control$ : N = 4 animals per condition and	
1238	time point, n = 4 different fields of view / animal and brain region; APP/PS1/control: N = 6	
1239	animals (3x females, 3x males) per time point and condition, n = 4 different fields of view	
1240	animal and brain region. One-way ANOVA with Tukey post test. *p < 0.05; **p < 0.01; ***p <	
1241	0.001; ****p < 0.0001 ( <sup>n-p</sup> ).	
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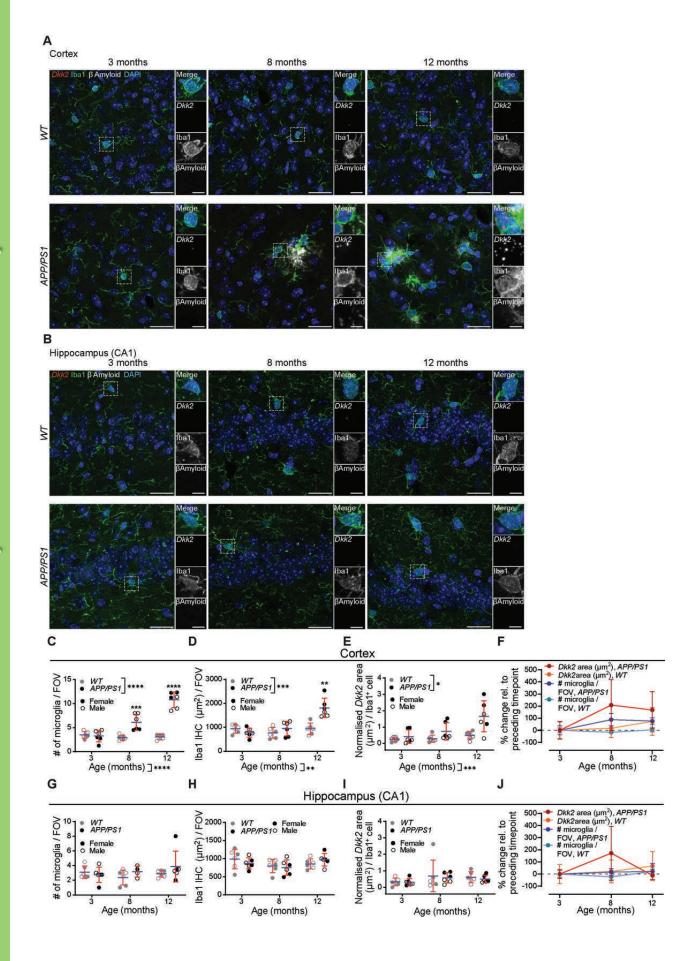
1243	Figure 4-1. Microglial <i>Dkk2</i> upregulation in <i>SOD1</i> <sup>G93A</sup> ALS mice – % <i>Dkk2</i> <sup>+</sup> microglia.
1244	Related to Figure 4.
1245	Relative contribution (%) of $Dkk2^+$ microglia versus the total microglia population in the LS
1246	ventral horn spinal cord of $SOD1^{G93A}$ ALS mice as assessed by $Dkk2$ mRNA FISH as well as
1247	microglial Iba1 IHC labelling. Individual data points represent the average of 4 FOV
1248	analysed for each animal. N = 3 animals per time point and condition, n = 4 fields of view pe
1249	animal. Two-way ANOVA with Multiple comparisons test. *p < 0.05; **p < 0.01; ***p < 0.001
1250	****p < 0.0001 (¹).
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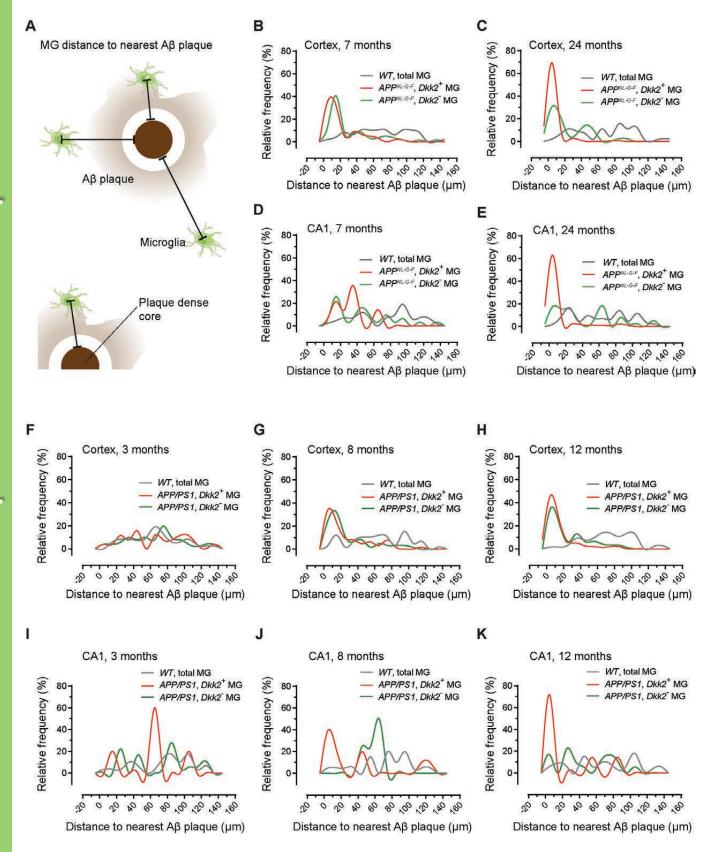
1252	Figure 6-1. <i>DKK</i> 2, <i>TREM</i> 2, and <i>P2RY12</i> expression the mRNA level in human post-
1253	mortem brains.
1254	Related to Figure 6.
1255	(A) Relative contribution (%) of $DKK2^+$ microglia versus the total microglia population in the
1256	human post-mortem frontal cortex of control, pathological ageing, and AD individuals as
1257	assessed by DKK2, TREM2, and P2RY12 mRNA FISH. Normalised TREM2 (B) and
1258	P2RY12 (C) mRNA FISH signal area per DAPI*/TREM2*/P2RY12* microglial cell in
1259	presence or absence of $\it DKK2$ expression. Healthy control individuals: N = 5 individuals, n =
1260	8 fields of view); AD (Braak & Braak stage 5-6): $N = 6$ individuals, $n = 8$ fields of view;
1261	pathological ageing (Braak & Braak stage 3-4): $N = 2$ individuals, $n = 8$ fields of view. Data
1262	points represent the average of 8 FOVs analysed for each individual subject (mean $\pm$ SD for
1263	(A), mean for (B,C)); individual subject mean values were further averaged for each group of
1264	interest and summarised as mean $\pm$ SD (blue horizontal bars, red error bars). One-way
1265	ANOVA with Tukey post test ( <sup>y, z, ab</sup> ). No statistical differences identified.
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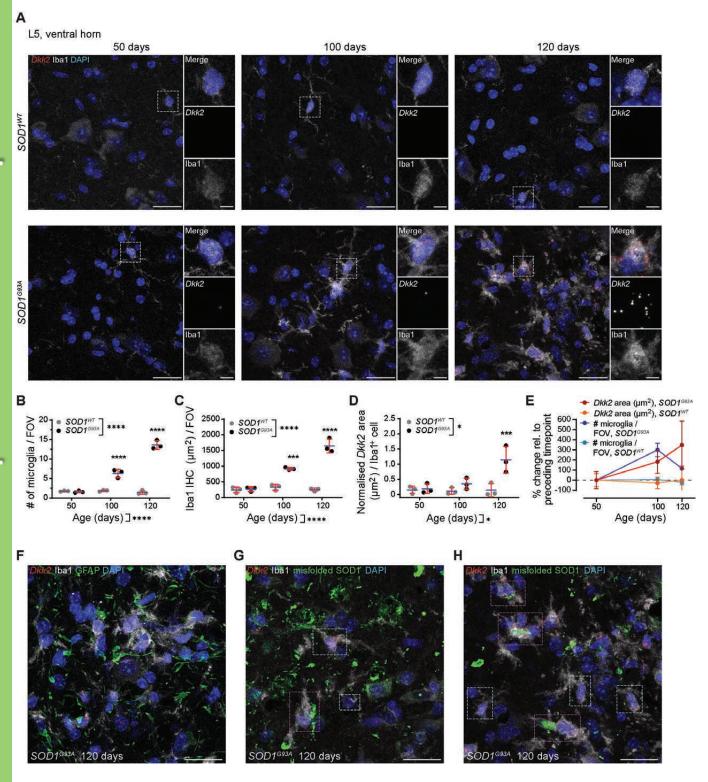
1272	Table 6-1. Human sample demographic data.
1273	Related to Figure 6.
1274	Table listing demographic data of individual subjects contributing to the generation of data
1275	set in Figure 6. Clinical presentation as well as post-mortem brain assessments are show
1276	(brain weight, post-mortem (PM) delay, Braak & Braak stage, CERAD score, THAL stage,
1277	and ABC score).
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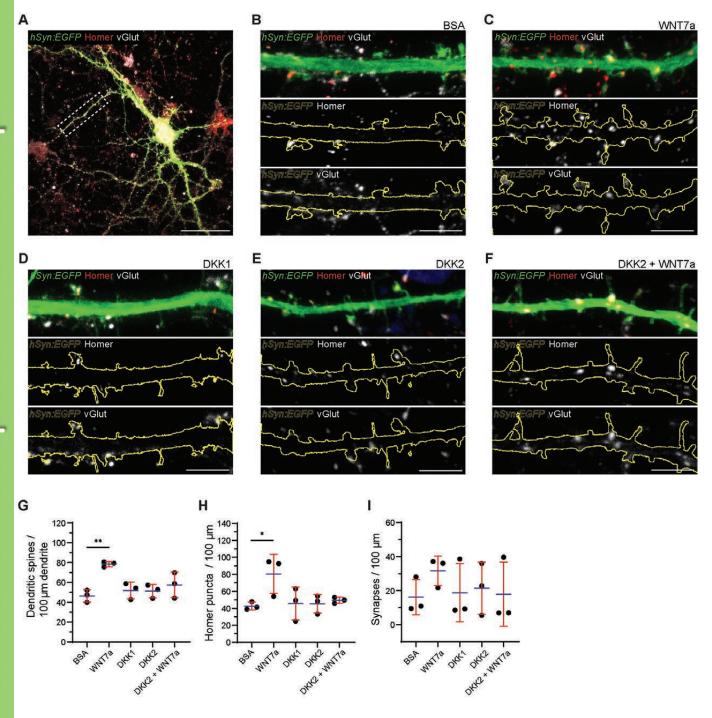
1279	Table 6-2. mRNA FISH signal detection parameters.
1280	Related to Materials and methods, as well as Figure 6.
1281	Signal detection parameters used to identify DKK2, TREM2, and P2RY12 mRNA FISH
1282	signal on confocal images form human samples using HALO software with the FISH-II
1283	v2.0.4 module (Indica Labs).
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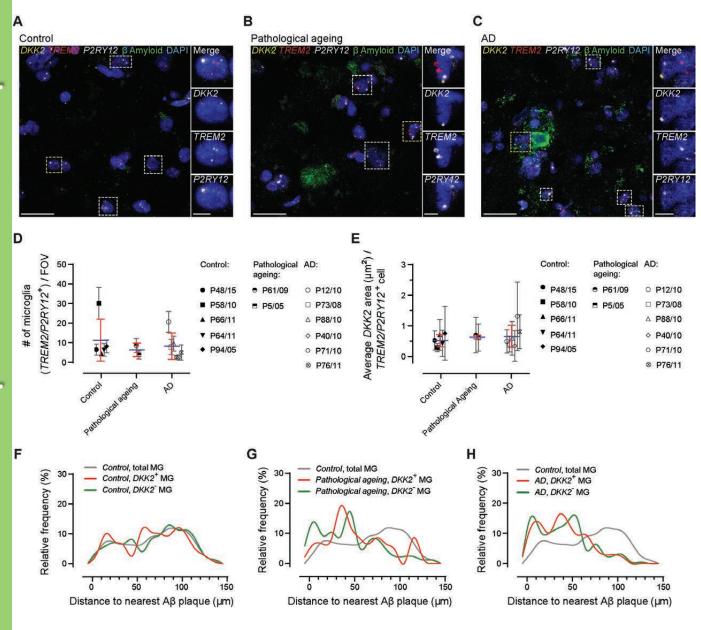












	Data Structure	Type of test
а	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
b	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
С	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
d	Normal distribution	Mixed-effects analysis with Šidák multiple comparisons test
е	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
f	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
g	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
h	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
i	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
j	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
k	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
I	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
m	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
n	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
0	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
р	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
q	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
r	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
S	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
t	Normal distribution	Two-Way ANOVA with Šidák multiple comparisons test
u	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
٧	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
w	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
х	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
У	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
z	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test
ab	Normal distribution	One-Way ANOVA with Tukey's multiple comparison test

Power
p = 0.0101 (tp), p = 0.0002 (gt)
p = 0.1821 (tp), p = 0.0018 (gt)
p = 0.0245 (tp), p = 0.0013 (gt)
p = 0.0005 (tp), p = 0.0051 (gt)
p = 0.0119 (tp), p = 0.0288 (gt)
p = 0.1363 (tp), p = 0.0652 (gt)
p = 0.0240 (tp), $p = 0.0004$ (gt)
p = 0.0784 (tp), p = 0.0093 (gt)
p < 0.0001 (tp), p < 0.0001 (gt)
p = 0.0030 (tp), p = 0.0006 (gt)
p = 0.0003 (tp), p = 0.0391 (gt)
p = 0.3563 (tp), p = 0.7931 (gt)
p = 0.1691 (tp), p = 0.7041 (gt)
various
various
various
p < 0.0001 (tp), p = 0.0001 (gt)
p < 0.0001 (tp), p = 0.0001 (gt)
p = 0.0154 (tp), p = 0.0193 (gt)
p = 0.9125 (tp), p = 0.0073 (gt)
p = 0.0023
p = 0.0309
p = 0.4507
p = 0.7689
p = 0.8650
p = 0.2349
p = 0.1056