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The enhancer RNA, AANCR, regulates APOE expression in astrocytes and microglia

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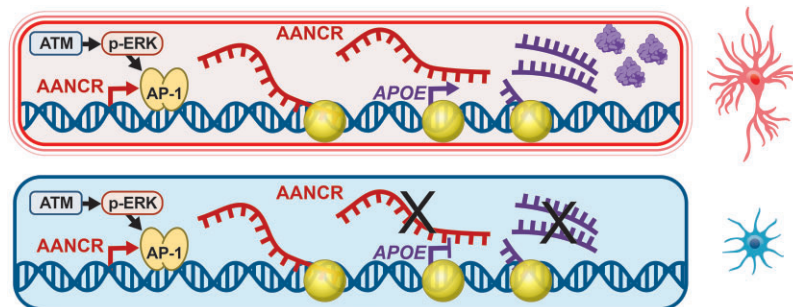
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Abstract

Enhancers, critical regulatory elements within the human genome, are often transcribed into enhancer RNAs. The dysregulation of enhancers leads to diseases collectively termed enhanceropathies. While it is known that enhancers play a role in diseases by regulating gene expression, the specific mechanisms by which individual enhancers cause diseases are not well understood. Studies of individual enhancers are needed to fill this gap. This study delves into the role of APOE-activating noncoding RNA, AANCR, in the central nervous system, elucidating its function as a genetic modifier in Alzheimer's Disease. We employed RNA interference, RNaseH-mediated degradation, and single-molecule RNA fluorescence *in situ* hybridization to demonstrate that mere transcription of AANCR is insufficient; rather, its transcripts are crucial for promoting APOE expression. Our findings revealed that AANCR is induced by ATM-mediated ERK phosphorylation and subsequent AP-1 transcription factor activation. Once activated, AANCR enhances APOE expression, which in turn imparts an inflammatory phenotype to astrocytes. These findings demonstrate that AANCR is a key enhancer RNA in some cell types within the nervous system, pivotal for regulating APOE expression and influencing inflammatory responses, underscoring its potential as a therapeutic target in neurodegenerative diseases.

Graphical abstract



Introduction

Enhancer RNAs (eRNAs) as key regulators of gene expression are transcribed from noncoding DNA that makes up over 90% of the human genome. Enhancers orchestrate complex gene expression patterns essential for cellular functions. Large-scale screens have uncovered hundreds of thousands of enhancers that significantly influence gene expression, revealing their complex and varied nature (1–3). Through chromatin loops, most enhancers regulate gene expression in *cis* by interacting with neighboring genes. Enhancers are located upstream, downstream, and even within their target genes. Given

their regulatory significance, it is not surprising that sequence variants within enhancers can affect their functions and therefore influence susceptibility to human diseases (4,5).

Transcription factors and RNA Polymerase II bind to a significant number of enhancers leading to the synthesis of enhancer RNAs (4,6–8). The locus control region of β -globin was among the first enhancers found to be transcribed (9). We now know that enhancer RNAs are common and they are essential parts of gene regulatory networks (7,10).

Many enhancer RNAs are not polyadenylated and are less stable than mRNAs thus their expression levels are usually

low. Their transient nature allows them to fine-tune gene expression during development and in stress responses. However, given their low and often brief expression, enhancer RNAs are less amenable to analysis. While we know the general features of enhancer RNAs as a class of nucleic acids, significant gaps remain in our understanding of most of them. For many enhancer RNAs, we do not know how they are controlled and the biological effects of their regulation of target genes are yet to be determined (11).

To gain a deeper understanding of gene regulation, it is essential to shift focus from examining enhancer RNAs collectively to investigating individual eRNAs in detail. The study of specific enhancer RNAs is vital for unraveling the complexities of gene regulatory mechanisms, and understanding how dysregulation leads to diseases. For example, studies that identified CCAT1 as an enhancer RNA that modulates *MYC* expression have deepened insights into long-range gene regulation (11,12). Similarly, research on HOTAIR has expanded our understanding of chromatin dynamics in cancer contexts (13,14). Additionally, investigations into the long-range enhancer affecting Sonic hedgehog have clarified the genetic underpinnings of polydactyly and enhanced our knowledge of limb bud development (15).

Previously, we identified an enhancer RNA, *APOE*-activating noncoding RNA, AANCR that influences the expression of *APOE*, a gene significantly associated with Alzheimer's Disease (16). We found that AANCR has characteristic features of enhancer RNAs. It is a capped, non-polyadenylated RNA. It is transcribed from a region on chromosome 19 between *TOMM40* and *APOE* characterized by DNaseI hypersensitivity and enhancer chromatin marks such as H3K27ac and H3K4me1. Like other enhancer RNAs, the expression level of AANCR is modest. Yet, we were able to uncover and study AANCR by using PROseq which enriches nascent RNA for sequencing (17).

AANCR expression varies by cell type as its transcription is regulated by RNA sequence and structure (16). In hepatocytes, the full-length AANCR is synthesized, and it enhances the expression of *APOE*. In other cells such as B-cells and fibroblasts, AANCR is only partially transcribed because RNA Polymerase II elongation is obstructed by R-loops, which are stabilized through sequential RNA modifications where adenosines are N6-methylated and then cleaved leading to abasic sites. Under stress conditions, the nascent RNA of AANCR does not undergo these chemical modifications, therefore full-length AANCR is synthesized and in turn facilitates the expression of *APOE* in B-cells and other peripheral cells, which typically do not express *APOE* at baseline (16).

In this study, we advanced beyond the identification of AANCR to identify how it is regulated, and the biological consequences of its regulation of *APOE*. Given that sequence variants in AANCR are associated with Alzheimer's disease (16), we carried out these characterizations using cells from the nervous system. We uncovered that, unlike some eRNAs where transcription alone is sufficient for function, AANCR requires its transcripts to regulate *APOE* expression at baseline and in stress responses. We found an ATM-mediated mechanism that activates AANCR in mitochondrial stress response. Then in gene expression and mitochondrial function analyses, we found that AANCR and *APOE* confer an inflammatory phenotype to astrocytes. This study adds to our knowledge of enhancer RNAs by identifying that AANCR's transcripts are necessary for regulation and elucidating the

AANCR regulatory network, including its upstream regulators and the broader downstream consequences of AANCR-regulated *APOE* expression.

Methods (see Resource Table in supplemental material for manufacturers and catalog numbers)

AANCR, *APOE* genomic location (hg38): chr19:44903728–44905635 for AANCR, chr19:44905796–44909393 for *APOE*, [Supplementary Figure S1](#).

APOE quantitation (secreted protein)

To quantify the secreted *APOE* protein, cells were serum starved for 24 h, and the medium from each sample was collected and concentrated ten times with Protein Concentrator PES, 10K molecular weight cut-off. Concentrated medium was mixed 1:1 in 2× sample loading buffer and run on SDS PAGE gel. Following membrane transfer Western blot was performed using *APOE* antibody (Sigma).

Antisense oligonucleotides against AANCR in astrocytes and microglia

Cells were grown to a confluence of 50% in T-25 flasks or 6-well plates. The AANCR GapmeR was transfected at 10 nM using Lipofectamine 3000 in astrocytes or microglia. Four days post-transfection cells were washed in PBS and collected by cell scraping for downstream analysis.

Aβ aggregates in microglia, B-cells, and astrocytes

For the preparation of amyloid beta protein fragment 42 (Aβ42) or amyloid beta protein fragment 40 (Aβ40): Briefly, Aβ42 or Aβ40 were dissolved in dimethyl sulfoxide (DMSO) to a stock concentration of 5 mM, and then diluted in water to make 100 μM working stock solutions which were incubated for 5 days at 37°C. For treatment, the cells were washed twice with PBS and placed in serum-free media. Twenty-four hours later, Aβ42 or Aβ40 were added to the cells at a final concentration of 10 μM in the media and the cells were treated for 30 h (B-cells) or 54 h (astrocytes and microglia).

Antimycin A in microglia, astrocytes and B-cells

Antimycin A was dissolved in dimethyl sulfoxide (DMSO) and further diluted in sterile culture medium immediately before use. Antimycin A (or equal volume of DMSO) was added to the cell culture medium to a final concentration of 10 μM and cells were maintained for the indicated treatment duration. For adherent cells, the culture media was retained for analysis of secreted *APOE*, and the cells were processed for gene expression or protein analysis as described below. B-cells were pelleted by centrifugation, washed with PBS and cells were processed for downstream analysis.

cDNA-seq

From astrocytes transfected with siRNA against AANCR or/and *APOE* or non-target siRNA, sequencing libraries were prepared using TruSeq Stranded Total RNA Library Prep Kit (Illumina). Sequencing was performed on NovaSeq6000 and >150 million 100-nt paired-end reads were generated from each sample. Sequencing reads were aligned to the GRCh38 (hg38) human reference sequence using GSNAP

(v. 2021-12-17) (18) with one mismatch allowed, and soft-clipping on. Over 75% of the reads were uniquely aligned (average = 75% (siAANCR samples), 84% (siAPOE samples). Gene expression levels were quantified using Cufflinks v.2.2.1 (19). The distributions of the expression levels were highly similar across samples ($P > 0.1$, t -test). In all the AANCR and APOE knockdown samples as well as those treated with siRNAs with scrambled sequences (or non-target controls, NTC), we identified expressed genes as those with expression levels across the knockdown samples and controls of FPKM ≥ 2 . In the AANCR knockdown experiments, there were five siAANCR samples and NTC controls, for each gene, we summed the expression levels across those samples, if the summed FPKM > 2 , then it is included in the analysis as expressed. The same analysis was carried out for the siAPOE experiments. This expression level cutoff gave us $\sim 12\,000$ expressed genes in the siAANCR and siAPOE experiments.

As an independent measure of differential gene expression, we obtained the raw read counts for the $\sim 12\,000$ expressed genes using Rsubread version 2.14.2 and compared between the siRNA and NTC samples using DESeq2 version 1.42.1 under default settings (20).

We compared the P -values from the t -test and DESeq2 analyses. The results are highly similar. For the 598 significant genes, we compared the P -values from the t -test and DESeq2 and found a Jaccard Index of 0.76 and a Dice coefficient of 0.865. Comparing the P -values of all expressed genes, we found a Spearman Rank Correlation with a P -value $< < 10^{-10}$, a Szymkiewicz–Simpson coefficient of 0.74, and a kappa statistic of 0.60 for the significance classification.

Cell culture

Human lymphoblastoid B-cells from controls and patients with Ataxia Telangiectasia (AT) were grown in Roswell Park Memorial Institute media, RPMI 1640, supplemented with 15% fetal bovine serum, 100 U/ml penicillin/100 μ g/ml streptomycin, and 2 mmol/l L-glutamine. HEK 293T cells were maintained in Dulbecco's modified Eagle's medium (DMEM) with 10% FBS, 1% GlutaMAX and 100 U/ml penicillin/100 μ g/ml streptomycin. HK-2 cells were maintained in DMEM-F12 media supplemented with 10% FBS and 100 U/ml penicillin/100 μ g/ml streptomycin. Primary human astrocytes were seeded on poly-L-lysine-coated (2 μ g/cm²) T-75 culture flasks with complete astrocyte medium. The medium was changed every three days, until cells were approximately 70% confluent and then changed daily until the cell confluence reached 90% confluence. Astrocytes were passaged when cells reached 90–95% confluency. Human microglia were grown in DMEM supplemented with 10% fetal bovine serum, 100 U/ml penicillin and 100 μ g/ml streptomycin. All cells were grown at 37°C, 5% CO₂. Adherent cells were passaged every 72 h using trypsin–EDTA 0.025% for astrocytes and 0.05% for the other cell lines.

Chromatin immunoprecipitation

Two independent CRISPR edited cell lines where the AP-1 site was mutated and two cell lines where the AP-1 site was not edited, were used for ChIP following the protocol described (21). Briefly, cells were cross-linked with 1% formaldehyde for 10 min followed by neutralization with 2.5M glycine for 5 min. For nuclei isolation, crosslinked cells were rotated for 10 min at 4°C in 5 ml lysis buffer 1 (50 mM HEPES pH 7.6, 140

mM NaCl, 1 mM EDTA, 10% glycerol, 0.5% Igepal CA-630, 0.25% Triton X-100) followed by pelleting, and a 10 min rotation in 5 ml lysis buffer 2 (200 mM NaCl, 1 mM EDTA, 0.5 mM EGTA, 10 mM Tris, pH 8). Nuclei were pelleted followed by swelling in lysis buffer 3 (10 mM Tris, pH 8, 1 mM EDTA, 0.5 mM EGTA, 100 mM NaCl, 0.1% deoxycholic acid, 1% *N*-lauryl sarcosine) for 10 min, then sonicated on high setting (30 s on, 30 s off) for 15 min to shear chromatin to < 500 bp with Bioruptor. 50 μ g sheared chromatin for each sample was incubated in RIPA buffer (50 mM Tris, pH8, 150 mM NaCl, 1% NP-40, 0.5% sodium deoxycholate, 0.1% SDS) with 5 μ g antibody against Jun or IgG. Target chromatin fragments were recovered with Protein G beads. Beads were washed twice with low salt RIPA (150 mM NaCl) and twice in high salt RIPA (300 mM NaCl), then eluted in 100 μ l 1% SDS plus 100 mM sodium bicarbonate. After cross-link reversal, DNA was purified with a QIAquick PCR Purification Kit and quantified by qPCR using primers listed in the Resource Table.

Cortical neuron differentiation from human iPSCs

Differentiation was performed as previously described (22). In brief, stably transfected control iPSCs with the NGN2 cassette were plated at 30 000 cells/cm² on a matrigel coated surface in E8 Flex medium containing 10 μ M ROCK inhibitor. 24 h later, cells were induced with Neural Induction Medium (NIM): DMEM/F12, B27(1 \times), N2 (1 \times), NEAA (1 \times), GlutaMax (1 \times), ROCK inhibitor (10 μ M), and doxycycline 2 μ g/ml. After 48 h of doxycycline treatment, cortical neurons were dissociated with accutase to single cells and re-plated at 50 000 cells/cm² on Matrigel coated surfaces in Neural Maintenance Medium (NMM): DMEM/F12:Neurobasal medium, B27 (1 \times), N2 (1 \times), NEAA (1 \times), GlutaMax (1 \times), doxycycline (2 μ g/ml), laminin (1 μ g/ml), BDNF (10 ng/ml), NT3 (10 ng/ml). On day 4, cells were transfected with siRNA for AANCR and non-targeting control at final concentrations of 20 nM using RNAiMax. Cells were collected 72 h post transfection and total RNA was extracted using TRIzol and chloroform and purified with a RNeasy Kit following the manufacturer's instructions.

CRISPR-mediated editing

sgRNA sequence to target the AP-1 site at AANCR locus was selected using CRISPR Targets tool in UCSC genome browser (<https://genome.ucsc.edu>). sgRNA oligos were annealed and phosphorylated (see Resource Table) followed by cloning into plasmid pSpCas9(BB)-2A-GFP (PX458), a gift from Feng Zhang (Addgene plasmid # 48138) (23). The 100-nucleotide single-stranded DNA oligonucleotide (ssODN) repair template (see Resource Table) was centered at the predicted CRISPR/Cas9 cleavage site and designed to introduce three point-mutations in the putative AP-1 binding site and prevent recutting after gap repair. pSpCas9(BB)-2A-GFP with the sgRNA targeting AANCR was co-transfected with the ssODN into HEK 293T. Cells were plated at 2.5×10^5 per well in 12-well dishes and transfected with 500 ng pSpCas9(BB)-sgRNA-2A-GFP and 1 μ l of 10 μ M ssODN template DNA using Lipofectamine LTX. Then 36–48 h after transfection, cells were well-disassociated and GFP-positive cells were FACS sorted into 96-well plates (one cell/well) pre-coated with gelatin and cultured for 2–3 weeks to allow for single colony growth. Following cell expansion, genomic DNA was isolated from single

colonies and editing was verified by PCR followed by Sanger sequencing.

Extracellular flux analysis

For Seahorse analysis (XFe24, Agilent Technologies), astrocytes were seeded at a density of 100 000 cells/well in poly-L-lysine-coated XFe24 cell culture microplates. Cells were transfected with siRNA against AANCR as described above, and after 48 h the astrocytes were washed twice with XF DMEM medium supplemented with 100 μ M pyruvate, 200 μ M L-glutamine and 1.1 μ M glucose, and 0.5% serum, then allowed to incubate in supplemented XF DMEM for 1 h at 37°C and 0% CO₂. Cells were then tested for oxygen consumption rate (OCR) and extracellular acidification (ECAR) over a continuous 12-h period with measurements taken every 30 min. ECAR and OCR values were then normalized to cell counts in each well.

Gene annotation and network analyses

Network analysis was carried out using STRING (24), the edges indicate functional and physical interactions based on the strength of experimental, co-expression, databases and neighborhood evidence. K-means clustering implemented in STRING were performed. Interactions were further analyzed using Biogrid as implemented in NIA DAVID (25).

Immunoblots

Following treatment, cells were washed with ice-cold PBS and placed in RIPA buffer supplemented with Protease Inhibitor Cocktail, Phosphatase Inhibitor Cocktail 2 and Phosphatase Inhibitor Cocktail 3, and held on ice 10 min. Western blots were performed by running whole cell lysates on 4–12% Bis-Tris Protein Gels in 1 \times MES SDS running buffer. Proteins were transferred to PVDF membrane in 1 \times transfer buffer at 100V for 1 hour at 4°C. The membranes were blocked with 5% powdered milk in 1 \times TBST buffer. The primary antibodies for APOE, phospho-ATM, total ATM, phospho-ERK1/2, total ERK1/2, phospho-c-JUN, total c-JUN are listed in the Resource Table. Protein abundance was determined by chemiluminescence.

Jun inhibitor SP600125

Jun N-terminal kinase (JNK) inhibitor SP600125 was dissolved in dimethyl sulfoxide (DMSO) and further diluted in sterile culture medium immediately before use. SP600125 was added to the culture medium at 20 μ M for 16 h alone and cells were collected for protein isolation and subsequent immunoblotting. To measure changes in gene expression, microglia cells were treated with SP600125 at 20 μ M for 16 h followed by the addition of antimycin A (or vehicle) at 10 μ M for 2 and 6 h.

Paraquat in astrocytes

Paraquat was dissolved to 100 mM in distilled water. Paraquat was added to the astrocyte cultures at doses of 100 μ M and cells were treated for 72 h. Cells were collected for gene expression analysis as described below.

qPCR of AANCR and APOE

Following treatment, cells were washed with PBS and collected by cell scraping. Total RNA was isolated using the

RNeasy Mini-Kit (Qiagen) and 0.5 μ g RNA was converted to cDNA using Taqman RT kit using random hexamer priming. Gene expression was determined by quantitative PCR using SYBR Green PCR Master Mix on Applied Biosystem QuantStudio 5 Real-Time PCR System, and gene expression was normalized to GAPDH using the delta-Ct method. Sequences for the primers used are shown in the Resource Table.

siRNA knockdown of AANCR and APOE in astrocytes, microglia, and iPSC-neurons

Cells were seeded in 6-well plates or T-25 flasks until they reached 50–60% confluence and were transfected with siRNA using Lipofectamine RNAiMax to a final concentration of 5 nM for astrocytes, and 10 nM for microglia or iPSC-neurons. 24–48 h post-transfection cells were washed in PBS and collected by cell scraping for downstream gene expression analysis or for protein analysis. The siRNA targeting AANCR and APOE are listed in the Resource Table.

Single-molecule RNA fluorescence *in situ* hybridization (smFISH)

Astrocyte or HK-2 cells were grown on glass cover slips and 50 mM NaCl was added to the media to induce hypertonic stress. Cells were fixed using 4% PFA for 10 min at room temperature. Excess PFA was removed by washing with PBS and then the cells were permeabilized with 70% ethanol overnight at 4°C. FISH probes to AANCR (26 probes), APOE (29 probes) were designed with Stellaris Probe Designer (<https://www.biosearchtech.com/stellaris-designer>) and ordered with Quasar 570 (AANCR probes) or Quasar 670 (APOE) label. Probes were hybridized as previously described (26). Briefly, probe hybridization was carried out at 37°C following the adherent mammalian cell protocol from Biosearch Stellaris. Images were acquired and 900–1300 nuclei per sample were analyzed with RNA smFISH spots identified by fitting to a 2D Gaussian mask and performing local background subtraction as previously described (27). Nuclei with one or more spots where AANCR and APOE signals overlapped within 0.825 μ m were considered to have colocalization. We measured the average nuclear area to be 78.5 μ m² (astrocytes); there was one (median) AANCR transcript and seven (median) APOE transcripts per nucleus. The area of a smFISH spot is 1% of the nuclear area, so on average 1% of the nuclear area is occupied by AANCR and 7% is occupied by APOE, therefore 0.07% of nuclei will show colocalization by chance. The percentage of nuclei with colocalized AANCR and APOE spots are reported from at least two experiments. As negative controls, we used the smFISH data for *AGR2* and *TFF1* (26). The signal intensities and colocalizations were analyzed as with AANCR and APOE and reported for triplicate experiments.

SR11302 and TPA in astrocytes with/without hypertonic stress

For osmotic stress treatments, astrocyte cell medium was supplemented with 50 mM NaCl for 2 h. For AP-1 inhibition SR11302 was added at 2 μ M or 5 μ M for 24 h. For AP-1 agonist treatment, TPA was added at 10 ng/ml or 50 ng/ml for 30 min. For combination treatments, the cells were incubated with SR11302 for 22 h and exposed to hypertonic stress for 2 h, followed by TPA treatment for 30 min where indicated.

Results

AANCR, an enhancer RNA, regulates *APOE* expression in human astrocytes, microglia and neurons

AANCR transcription is cell-type specific; it is transcribed into full-length transcripts only in cells that express *APOE* (16). This suggests that AANCR transcripts are necessary to promote *APOE* expression, however, transcription alone may mediate accessible chromatin and therefore *APOE* expression. Here, in cells from the nervous system, we asked if AANCR transcripts are needed to regulate *APOE* expression.

In the brain, *APOE* is synthesized mostly by astrocytes, but the transcriptional regulation of *APOE* in astrocytes was unknown (28). We asked if AANCR regulates *APOE* expression in astrocytes and whether the transcripts of AANCR are needed for gene regulation. We began by using RNA interference in astrocytes, to knock down AANCR transcripts with different siRNAs individually and as a pool. The results showed that RNA interference reduced the AANCR transcript level by about 50% (Figure 1A, $P < 0.005$, t -test); in the same cells, *APOE* expression also decreased significantly by about 50% (Figure 1B, $P < 0.005$, t -test). This suggests that in astrocytes AANCR regulates *APOE* expression and the AANCR transcripts are needed to facilitate the regulation. To ensure that the AANCR transcripts are indeed needed for regulation, we carried out RNaseH-mediated degradation of AANCR transcripts with a single-stranded DNA oligonucleotide specific to AANCR. The results showed that the antisense oligonucleotides (ASO) decreased AANCR transcript levels by more than 50% ($P < 0.05$, Figure 1C), and correspondingly *APOE* expression was significantly reduced ($P < 0.005$, Figure 1D). Given that *APOE* is a secreted protein, we measured the amount of *APOE* protein in the media. Figure 1E showed that the knockdown of AANCR also decreased the amount of secreted *APOE* protein. Astrocytes with lower AANCR expression secreted about 40% less *APOE* proteins (Figure 1E, $P < 0.005$, t -test). Together these results show that the enhancer RNA, AANCR, influences the expression of *APOE* in astrocytes, and the transcripts of AANCR are needed for this regulation.

Like astrocytes, microglia express *APOE* but at a lower level. We asked if, in microglia, *APOE* expression is also regulated by AANCR. We again decreased AANCR transcript levels by RNA interference and found that *APOE* expression level decreased correspondingly (Figure 2A and B, $P < 0.005$, t -test). We also knocked down *APOE* by RNA interference, and while the expression level of *APOE* expression decreased ($P < 0.005$, Figure 2B), that of AANCR did not change (Figure 2A). To confirm this, we repeated the experiment in astrocytes, and the results also showed that knockdown of *APOE* reduced *APOE* expression but not AANCR expression levels (Supplementary Figure S2). AANCR is a noncoding RNA found upstream of *APOE*, this result shows that AANCR is an independent transcript that regulates *APOE*, and there is no apparent feedback loop where *APOE* regulates AANCR.

In iPSC-derived neurons, we again performed RNA interference experiments against AANCR. AANCR transcript level was significantly reduced, and correspondingly *APOE* expression was reduced significantly (Figure 2C, D). Together these results show that in different cell-types in the nervous system, AANCR regulates *APOE* expression through its transcripts.

AANCR co-localizes with *APOE* within single cells

The RNA interference and RNaseH-mediated degradation of AANCR transcripts were carried out in bulk cells. If AANCR transcripts are needed to mediate *APOE* expression, then as an enhancer RNA, AANCR transcripts should localize to the *APOE* gene locus. If so, it is likely that AANCR and *APOE* transcripts would colocalize within individual cells at the *APOE* locus. So next, we conducted single-cell analyses to assess this interaction and confirm that *APOE* is a direct target of AANCR.

We performed single-molecule RNA fluorescence hybridization (smFISH) to measure the association between AANCR and *APOE*. Previously, we found that *APOE* expression is induced in renal tubule cells following hypertonic stress (16). Here, we found that when renal tubule cells are exposed to hypertonic conditions, within 15 min, AANCR transcripts co-localized with *APOE* (Figure 3A) in about 40% of the nuclei ($P < 0.001$, t -test). Figure 3B showed a time-dependent increase in the number of nuclei where the transcripts of AANCR and *APOE* co-localized. We then asked if the same colocalization is found in astrocytes. At baseline, the transcripts of AANCR are co-localized with those of *APOE* in >10% of the nuclei, which is significantly ($P < 0.03$; t -test) higher than the 0.07% colocalization that is expected by chance (Supplementary Figure S3A–D). Within 1 h of exposure to hypertonic stress, there was a significant ($P < 0.005$, t -test) increase, with >40% of nuclei showing colocalization of AANCR and *APOE* transcripts (Figure 3C and D). These results provide additional evidence that AANCR regulates *APOE* expression at baseline and in stress response through the juxtaposition of AANCR with the *APOE* gene.

AANCR induces *APOE* expression in response to stress

Next, we delved into AANCR's regulation of *APOE* in stress responses. Oxidative stress that results from mitochondrial dysfunction is associated with neurodegenerative diseases including Alzheimer's disease (29,30). Since *APOE* is a major susceptibility gene of Alzheimer's disease, it is important to understand its regulation in response to oxidative stress in the central nervous system. We induced oxidative stress by inhibiting the mitochondrial electron transport chain. We treated microglia with antimycin A which inhibits complex III of the mitochondrial electron transport chain (31,32). Figure 4A shows that antimycin A leads to a significant increase in AANCR expression and correspondingly a 50% and significant ($P < 0.01$, t -test) increase in *APOE* expression level (Figure 4B). The *APOE* is then secreted; Figure 4C shows a time-dependent increase (>2-fold) of *APOE* protein abundance in the media. Previously, studies have shown that mitochondrial stress increases *APOE* expression in human leukemia cells and astrocytes (33), here in microglia, we showed that in response to the disruption of complex III of the mitochondrial electron transport chain, AANCR is induced and this results in *APOE* gene and protein induction.

We then checked if AANCR-*APOE* expression is induced by other stressors, such as amyloid beta ($A\beta$) aggregates. $A\beta$ is a proteolytic product of amyloid precursor protein. Gamma secretase cleaves the C-terminus of amyloid precursor protein leading to $A\beta_{42}$ (42 residues) and $A\beta_{40}$ (40 residues). $A\beta_{42}$ with two extra hydrophobic amino acids forms fibrils more efficiently, making it a major component of amy-

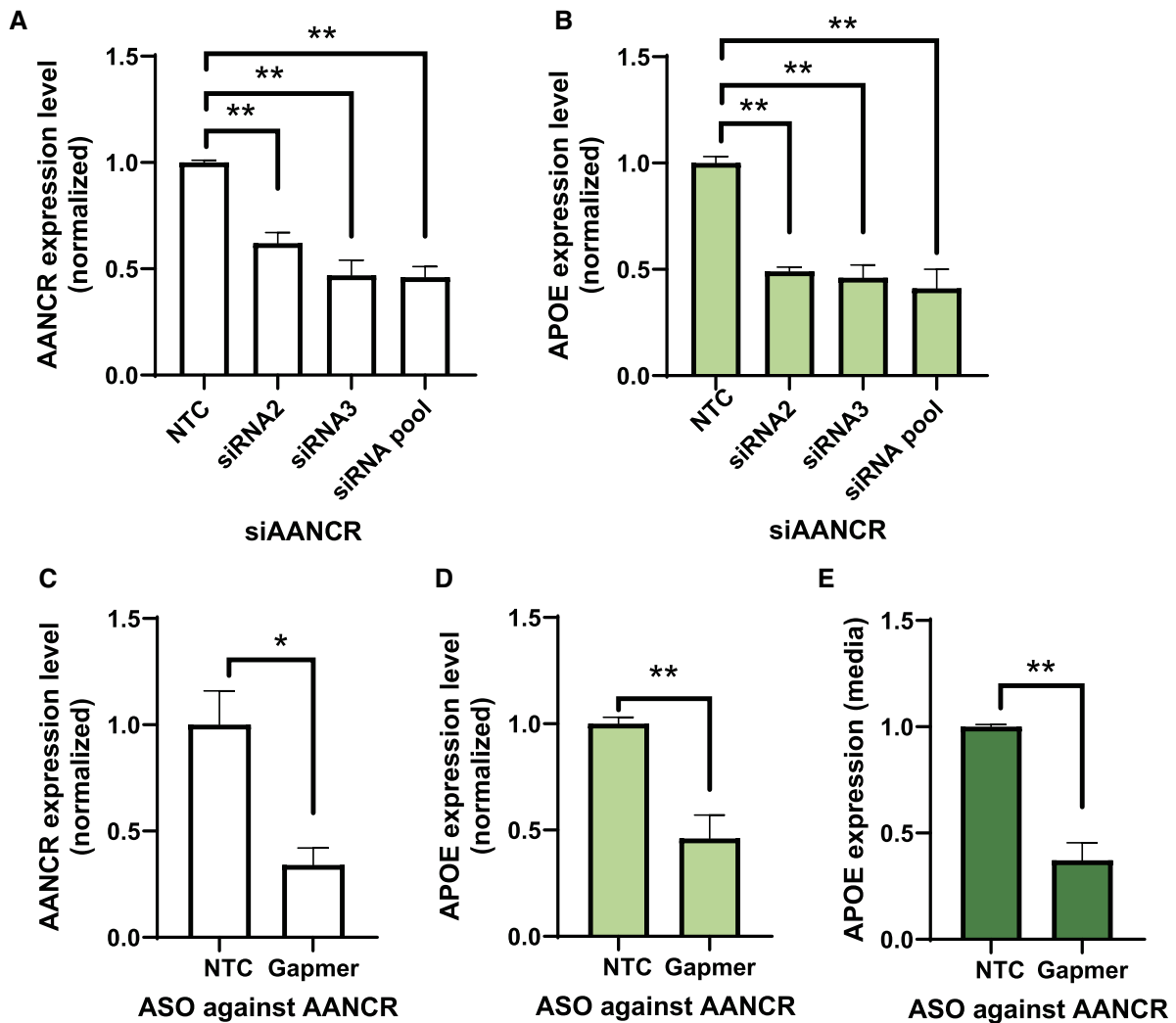


Figure 1. Knockdown of the enhancer RNA, AANCR, decreases *APOE* gene and protein expression in astrocytes. AANCR is knocked down by RNA interference with two separate siRNAs and as a pool of the two siRNAs. siRNA with scrambled sequence was used a control and labeled as nontarget control, NTC. The expression levels of AANCR (A) and *APOE* (B) decreased significantly after silencing the AANCR. AANCR expression decreased following knockdown with an antisense oligonucleotide (C), correspondingly the *APOE* expression decreased (D) and the amount of secreted *APOE* protein (E) was reduced significantly ($n \geq 3$, error bar = S.E.M. * $P < 0.05$, ** $P < 0.005$).

loid plaques. The accumulation of $A\beta_{42}$ leads to oxidative stress (34–39). We incubated microglia with $A\beta_{40}$ or $A\beta_{42}$ aggregates. Figure 4D shows that amyloid beta aggregates with 42 amino acid residues significantly ($P < 0.001$, t -test) increased AANCR expression. Consequently, *APOE* expression also increased ($P < 0.05$, t -test Figure 4E). We repeated this experiment in human B-cells. The results showed that as in microglia, $A\beta_{42}$ significantly increased AANCR and *APOE* expression in B-cells (Figure 4F and G). Thus, the expression response of AANCR and *APOE* to stress is similar in microglia, a cell type in the CNS and in peripheral B-cells.

We extended the study further into astrocytes to assess if another mitochondrial stressor, paraquat, also induces AANCR expression. Paraquat induces oxidative stress through increased free radical production. Results showed that paraquat significantly induced AANCR ($P < 0.01$, t -test) and *APOE* expression ($P < 0.05$, t -test) in astrocytes (Figure 5A and B). Similarly, $A\beta_{42}$ induces AANCR and *APOE* expression in astrocytes (Figure 5C and D). It has been shown that $A\beta_{42}$ induces *APOE* expression in astrocytes (40),

here our results show that the induction is mediated by AANCR.

Together, we found that in human microglia, astrocytes and B-cells, various stresses induce AANCR and *APOE* expression further showing that AANCR regulates *APOE* expression in different cell types at baseline and in stress response.

AP-1 induces AANCR in response to stress

Since our goal is to study AANCR as an enhancer RNA in detail, next we investigated how AANCR transcription is induced. Data from the ENCODE project show that JUN and FOS transcription factors constituting the activator-protein 1, AP-1 (41–44), bind to the DNA that encodes AANCR, as shown in data from HepG2 cells (Figure 6A). We followed up the ENCODE data with chromatin immunoprecipitation which shows that JUN binds to the AP-1 site, and the binding is abrogated by mutation with CRISPR editing (Figure 6B).

To ask if the AP-1 site in the DNA that encodes AANCR regulates its expression in the CNS, we treated astrocytes with SR11302, a retinoid that specifically inhibits AP-1 (45). The

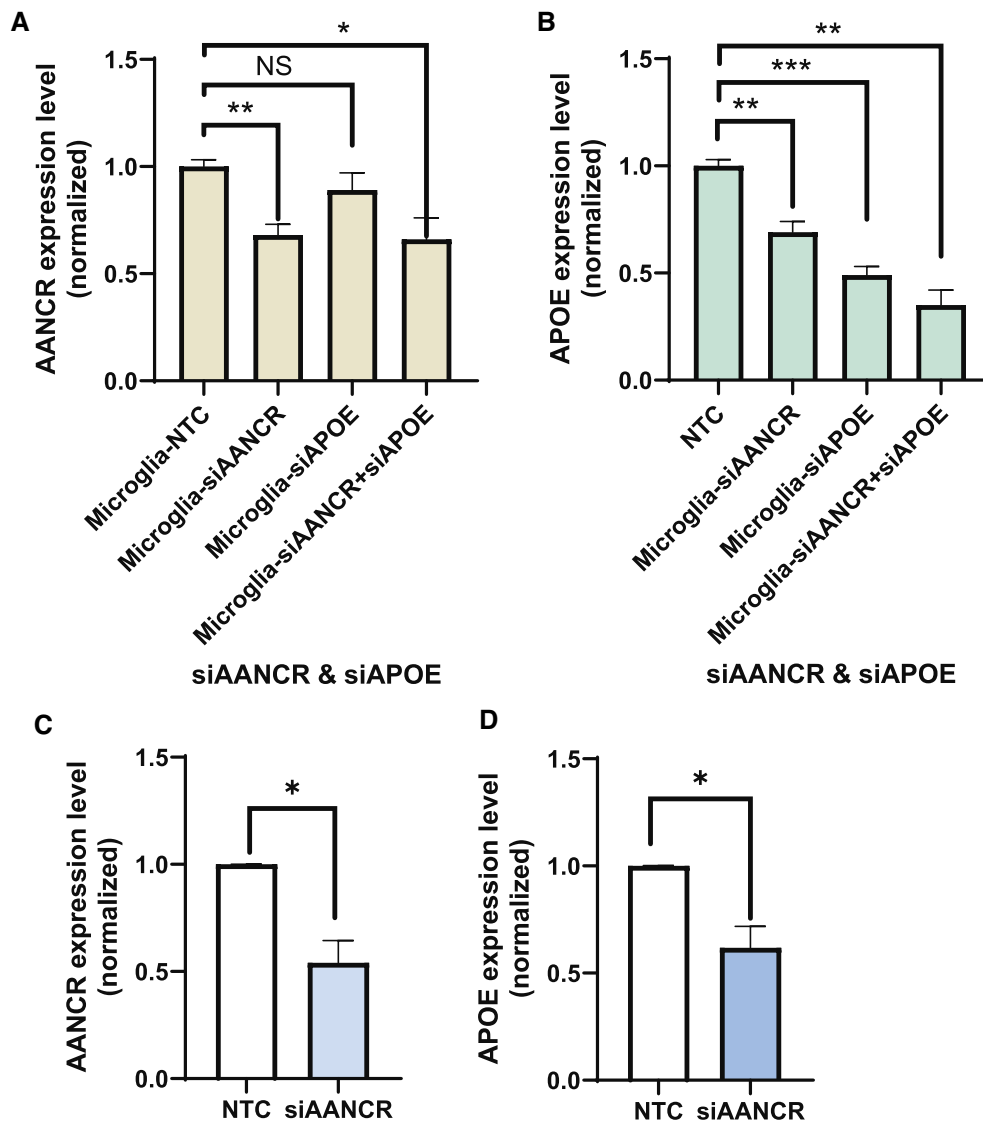


Figure 2. Knockdown of the enhancer RNA, AANCR, decreases *APOE* gene expression in microglia and iPSC-induced neurons. AANCR and *APOE* are knocked down with siAANCR (pool), si*APOE* (pool), and combined siAANCRs and si*APOE*s in microglia. The expression level of AANCR decreased significantly following AANCR but not after *APOE* silencing (A). *APOE* expression decreased after AANCR and *APOE* knockdowns as well as combined AANCR and *APOE* knockdown (B). The expression of AANCR decreased following siAANCR (pool) (C) and correspondingly *APOE* expression (D) also decreased significantly in iPSC-derived neurons ($n \geq 3$, error bar = S.E.M. NS = not significant, * $P < 0.05$, ** $P < 0.005$, *** $P < 0.001$).

results showed that upon inhibition of AP-1, AANCR expression decreased significantly ($P < 0.01$; *t*-test Figure 6C), and consequently *APOE* expression was reduced ($P < 0.05$, *t*-test Figure 6D). We then performed the opposite experiment and treated the astrocytes with 12-*O*-tetradecanoyl-phorbol-13-acetate (TPA), an activator of AP-1 (46), and measured the AANCR expression level. The results showed that TPA induced the expression of AANCR by almost 8-fold ($P < 0.001$; *t*-test Figure 6C) and the expression of *APOE* also increased correspondingly ($P < 0.01$; Figure 6D). SR11302 reduced AANCR expression to a lesser extent than the induction by TPA; to assess if this difference is due to the differential effect of SR11302 and TPA on AP-1 activity, we compared their activation of JUN. Supplementary Figure S4 shows that TPA induces JUN-phosphorylation faster (30 min versus 36 h) and to a greater extent (2.6-fold versus 1.5-fold) than SR11302.

Since SR11302 and TPA have a global effect, we also designed siRNA specific to the AP-1 site in AANCR and assessed its effects. In astrocytes, the knockdown of AANCR transcript with siAP-1 led to a reduction in AANCR expression and a corresponding decrease in *APOE* expression (Figure 6E).

To further explore the role of the AP-1 transcription factor complex in regulating AANCR during the stress response, we began by examining osmotic stress, as our previous research indicated that osmotic stress induces the transcription of both AANCR and *APOE*. We inhibited AP-1 in B-cells with SR11302 and exposed the cells to osmotic stress, the results showed that upon AP-1 inhibition, AANCR (Supplementary Figure S5A) and *APOE* (Supplementary Figure S5B) were induced at a significantly lower level in response to osmotic stress. The addition of TPA, an activator of AP-1, rescued the expression response of AANCR and *APOE*

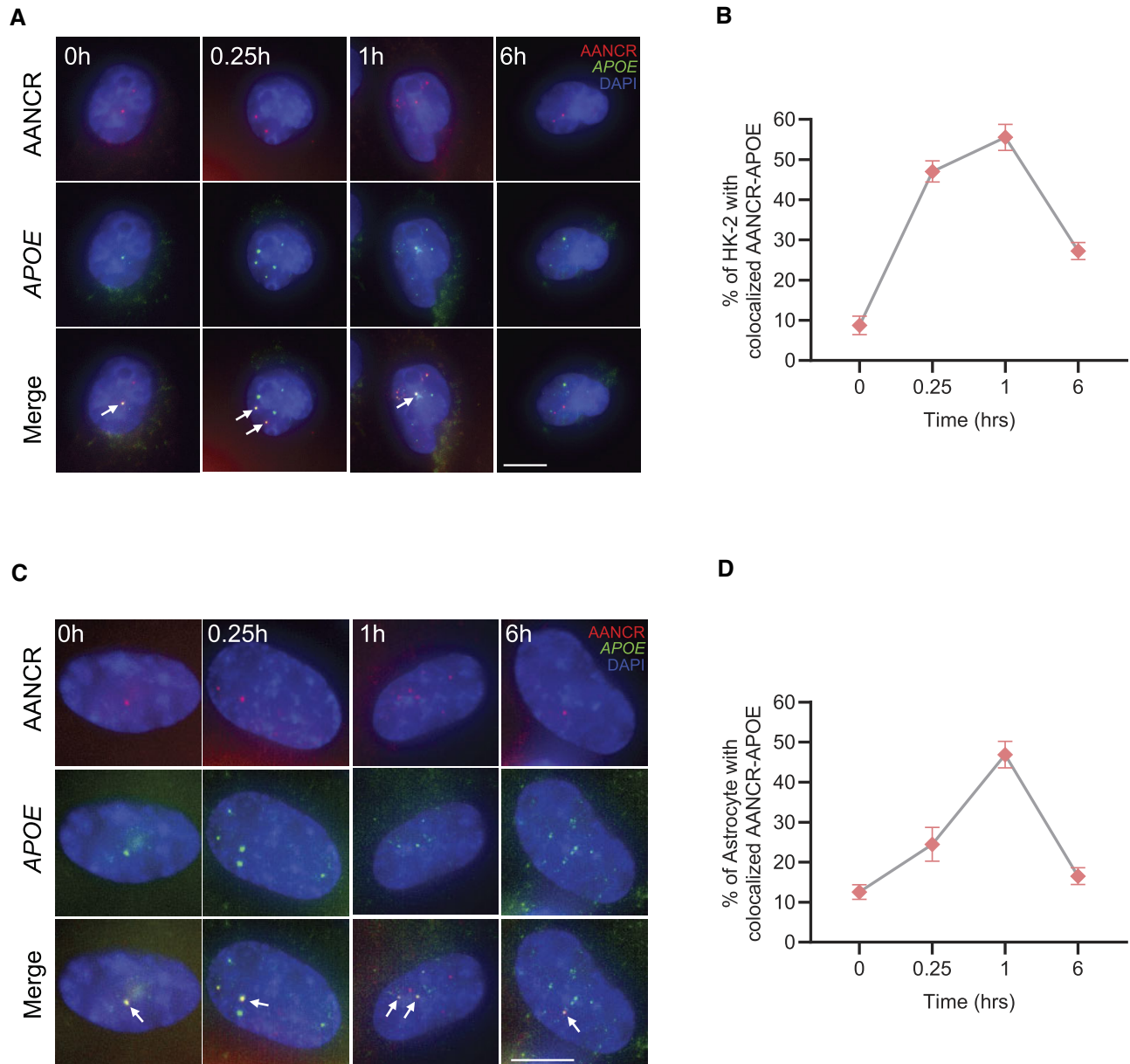


Figure 3. The co-localization of AANCR and *APOE* in single cells. Single-molecule RNA fluorescent *in situ* hybridization was carried out to assess the interaction of AANCR and *APOE* in the nuclei of single cells. Fluorescent smFISH images of AANCR (top, red) and *APOE* (middle, green) RNA in HK-2 proximal tubule cells at baseline (0 h) and following osmotic stress. In the merged images (bottom), arrows indicate AANCR-*APOE* colocalization (yellow). DAPI nuclear stain in blue. Scale bar 10 μ m (**A**). Fraction of renal proximal tubule nuclei with AANCR-*APOE* colocalization after osmotic stress is significantly higher ($P < 0.0001$; one-sided ANOVA; $n = 3$) after osmotic stress (**B**). Fluorescent smFISH images of AANCR (top, red) and *APOE* (middle, green) RNA in astrocytes at baseline (0 h) and following osmotic stress. In the merged images (bottom), arrows indicate AANCR-*APOE* colocalization (yellow). DAPI nuclear stain in blue. Scale bar 10 μ m (**C**). Fraction of astrocyte nuclei with AANCR-*APOE* colocalization after osmotic stress is significantly higher ($P < 0.001$; one-sided ANOVA; $n \geq 2$) after osmotic stress (**D**). In the experiments, 900–1300 nuclei were quantified per sample (error bar = S.E.M.).

(Supplementary Figure S4A and B) suggesting that in B-cells, AP-1 regulates AANCR transcription in stress response.

We then asked if AP-1 also regulates AANCR response to osmotic stress in astrocytes. Figure 6F and G show that in astrocytes, SR11302 inhibition of AP-1 leads to significantly lower AANCR and *APOE* expression levels at baseline and in response to stress. The effect of AP-1 inhibition on AANCR expression is stronger in response to stress, consistent with the role of AP-1 in stress response (18,19). Together, these findings suggest that AP-1 regulates AANCR and therefore *APOE* expression in various cell types at baseline and in response to stress.

ATM-ERK-AP1 pathway regulates AANCR

We then sought to identify the upstream pathway that activates AP-1 in AANCR to promote its transcription. Burg and colleagues have shown that Ataxia Telangiectasia Mutated (ATM), is a key signaling protein that mediates cellular response to osmotic stress (47). We asked if ATM is a signaling factor that influences AANCR and therefore *APOE* expression in response to osmotic stress. Using B-cells from five patients with Ataxia Telangiectasia (AT) due to ATM null mutations and B-cells from controls, we exposed the cells to osmotic stress and then measured AANCR and *APOE* expres-

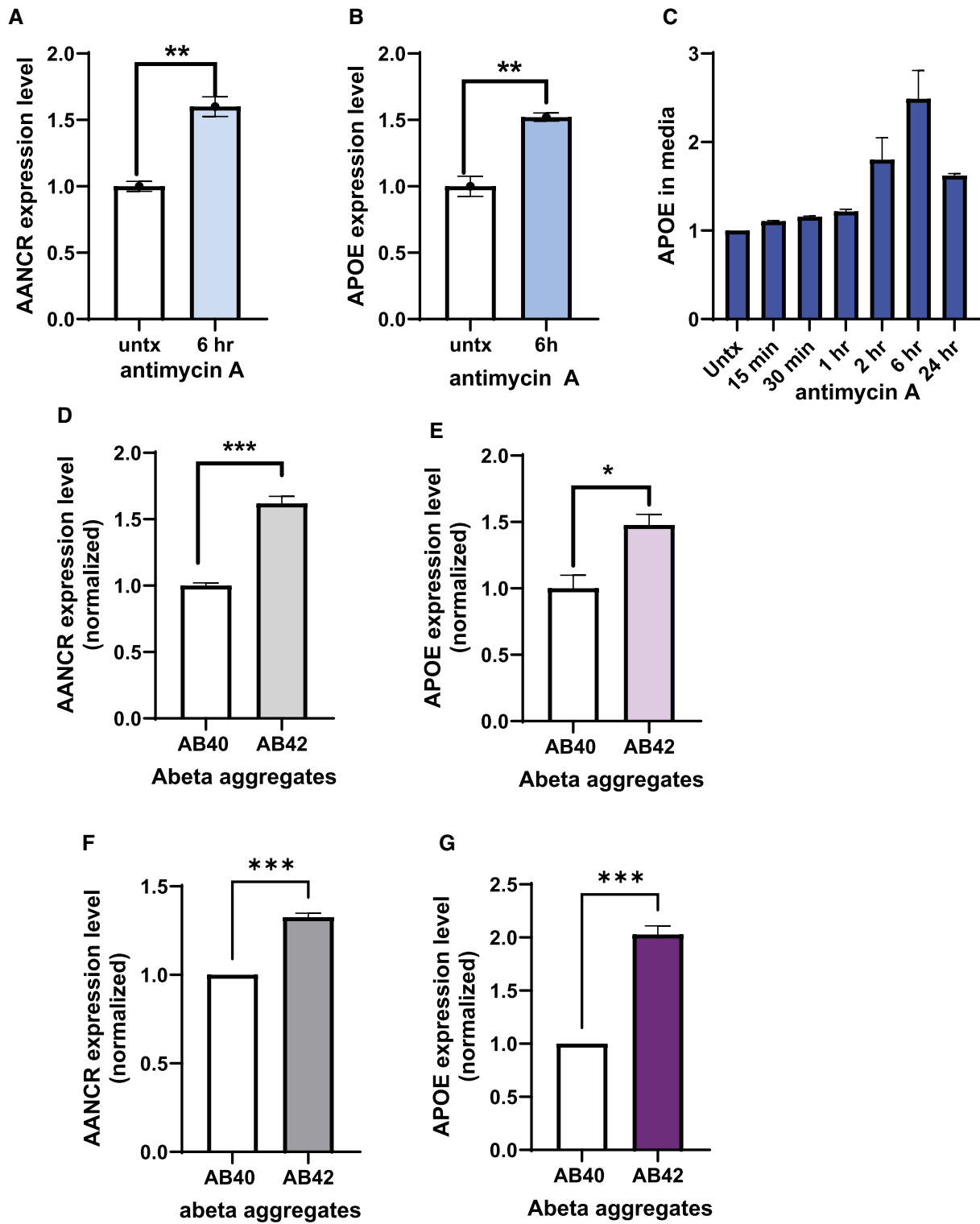


Figure 4. Antimycin A and Aβ42 aggregates induce AANCR and APOE expression in microglia and B-cells. In microglia treated with antimycin A, AANCR (A) and APOE (B) expression increased, and secreted APOE protein increased in a time-dependent manner (C). In microglia, AANCR (D) and APOE (E) expression levels increased in response to Aβ42 aggregates. In peripheral B-cells, AANCR (F) and APOE (G) expression levels also increased in response to Aβ42 aggregates ($n \geq 3$, error bar = S.E.M. * $P < 0.05$, ** $P < 0.005$, *** $P < 0.001$).

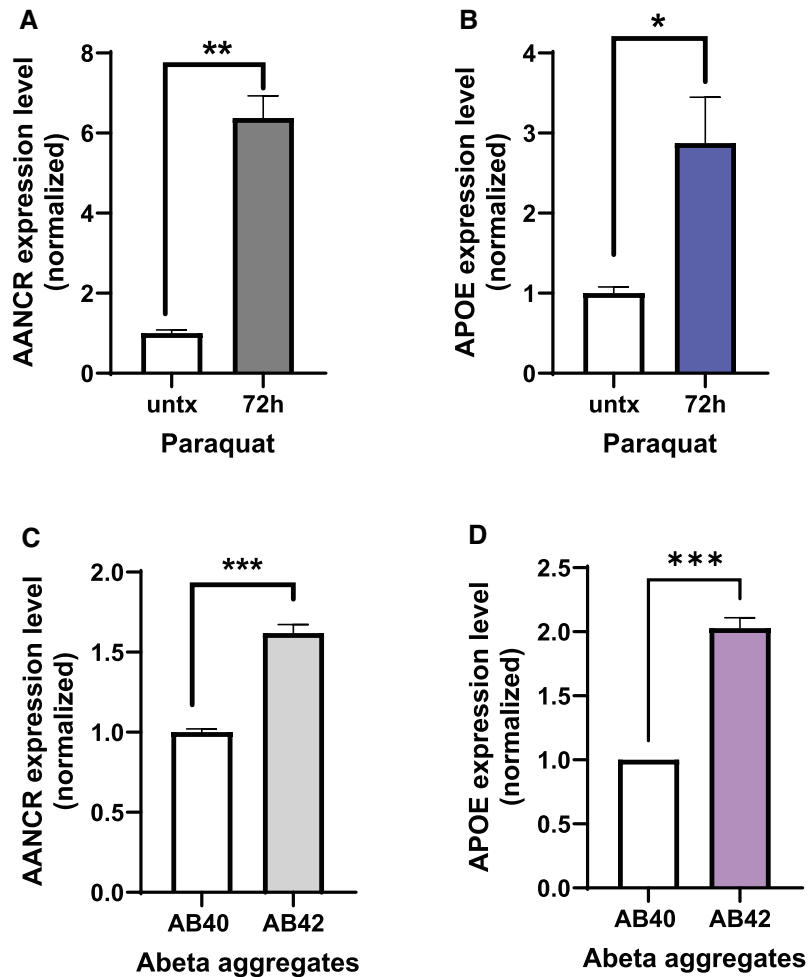


Figure 5. Paraquat and A β 42 aggregates induce AANCR and APOE expression in astrocytes. In astrocytes, AANCR (A) and APOE (B) expression levels increased significantly following paraquat treatment. AANCR (C) and APOE (D) expression levels also increased in response to A β 42 aggregates ($n \geq 3$, error bar = S.E.M. * $P < 0.05$, ** $P < 0.005$, *** $P < 0.001$).

sion. Figure 7A and B show that while AANCR and APOE expression were highly induced in the controls, they were only very modestly induced in the ATM null cells. Despite individual differences in AANCR and APOE stress-induced expression levels, the induction of AANCR ($P < 0.002$, t -test) and APOE ($P < 0.008$, t -test) expression levels are significantly higher in the control than the ATM null cells. This suggests that ATM is an upstream regulator of AANCR-APOE.

Next, we asked if ATM regulation of AANCR-APOE is specific to peripheral B-cells and osmotic stress, or if it is a general regulator of AANCR. To answer this question, we assessed the role of ATM in the induction of AANCR and APOE in microglia in response to mitochondrial stress. While we have B-cells from AT patients, we do not have microglia from AT patients. However, we could assess ATM activation when microglia are exposed to mitochondrial stress. We treated microglia with antimycin A as above (Figure 4) and assessed for ATM-phosphorylation. Figure 7C shows a representative immunoblot with antibodies against phospho-ATM. We found that ATM is phosphorylated in microglia within 15 mins (Figure 7C) of antimycin A treatment and the abundance of pATM continued to increase for 1 hour after antimycin. Our results are consistent with earlier findings by Tanya Paull and colleagues, that ATM is involved

in oxidative stress response (48). Here, we extended Paull's salient results and found that in microglia, oxidative stress also activates ATM which then induces AANCR-APOE expression.

Next, we looked for regulatory proteins downstream of ATM that led to the activation of AP-1 in AANCR. We examined ERK, a kinase involved in oxidative stress responses including that induced by antimycin A (49–55). We treated microglia with antimycin A as above (Figure 4), and then measured pERK1/2. Results showed that after antimycin A treatment, ERK was activated ($P < 0.05$, t -test, Figure 7D) in about 20 min, and after the activation of ATM. This finding is consistent with the knowledge that ERK is a target of ATM (56,57).

Next, we examined the phosphorylation of JUN by treating microglia with antimycin A as above (Figure 4). We found that in the microglia, JUN was phosphorylated in a time-dependent fashion (Figure 7E) to a maximum level between 1 and 2 h ($P < 0.005$, ANOVA), which is after the activation of ATM and ERK. To confirm that JUN phosphorylation activates AANCR, we used a small molecule SP600125 to inhibit JUN phosphorylation (58). In microglia, we confirmed that SP600125 inhibited JUN phosphorylation, but not JUN expression (Figure 7F). We then treated the cells with SP600125 followed by antimycin A, and measured

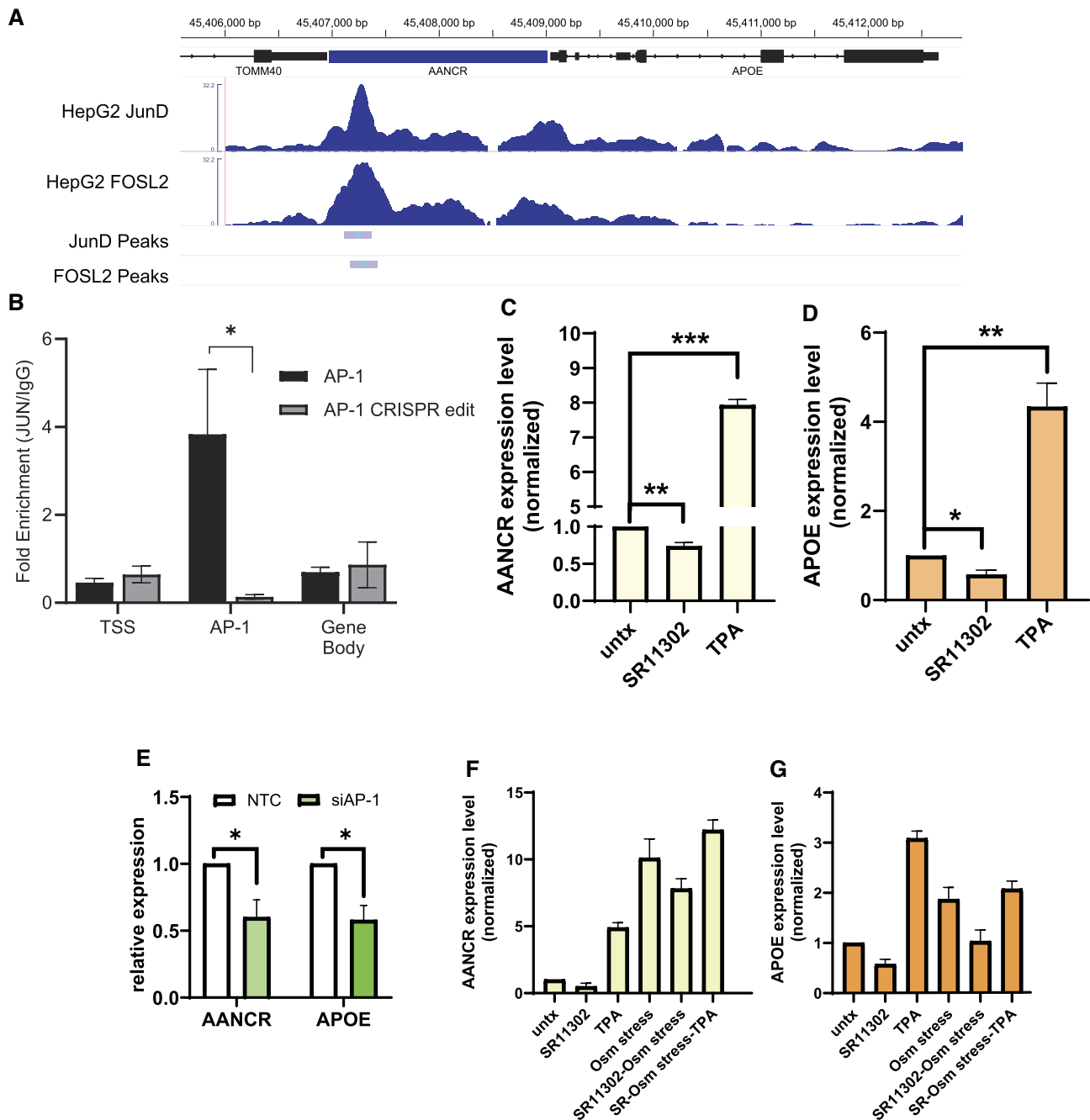


Figure 6. AP-1 regulates AANCR and subsequently *APOE* expression in astrocytes. Data from the ENCODE consortium showing JUN and FOSL2 that constitute AP-1 bind to AANCR (A). CRISPR-mediated mutation of the AP-1 site in AANCR results in a decrease in JUN occupancy as found by ChIP assay ($N = 2$, $P < 0.05$; t -test) (B). In astrocytes, SR11302 which inhibits AP-1 decreases AANCR (C) and *APOE* expression (D), whereas TPA, an activator of AP-1 increases AANCR (C) and *APOE* expression (D). siRNA against the AP-1 site of AANCR decreases AANCR and *APOE* expression (E). In astrocytes, osmotic stress increases AANCR (F) and *APOE* (G) expression, and this induction can be suppressed by SR11302 and rescued with TPA (F and G) (for C–G, $n \geq 3$, error bar = S.E.M. * $P < 0.05$, ** $P < 0.005$, *** $P < 0.001$).

AANCR. The results showed that AANCR expression in response to oxidative stress is dependent on the activation or phosphorylation of JUN. Figure 7G showed that in microglia where JUN cannot be activated, AANCR induction is significantly ($P < 0.001$, t -test) reduced in response to antimycin A treatment.

Together our results elucidated the upstream signaling pathway that activates AANCR in response to mitochondrial stress. In response to stress, ATM is activated which then phosphorylates ERK. The pERK then phosphorylates JUN to acti-

vate the AP-1 site that promotes the transcription of AANCR, and therefore the expression of *APOE*.

In astrocytes, reducing the expression of AANCR and/or *APOE* confers a less inflammatory expression phenotype

After finding that AANCR regulates *APOE* downstream of the ATM-ERK-AP1 pathway, we turned to examine the genes that are regulated by AANCR and *APOE*. We silenced

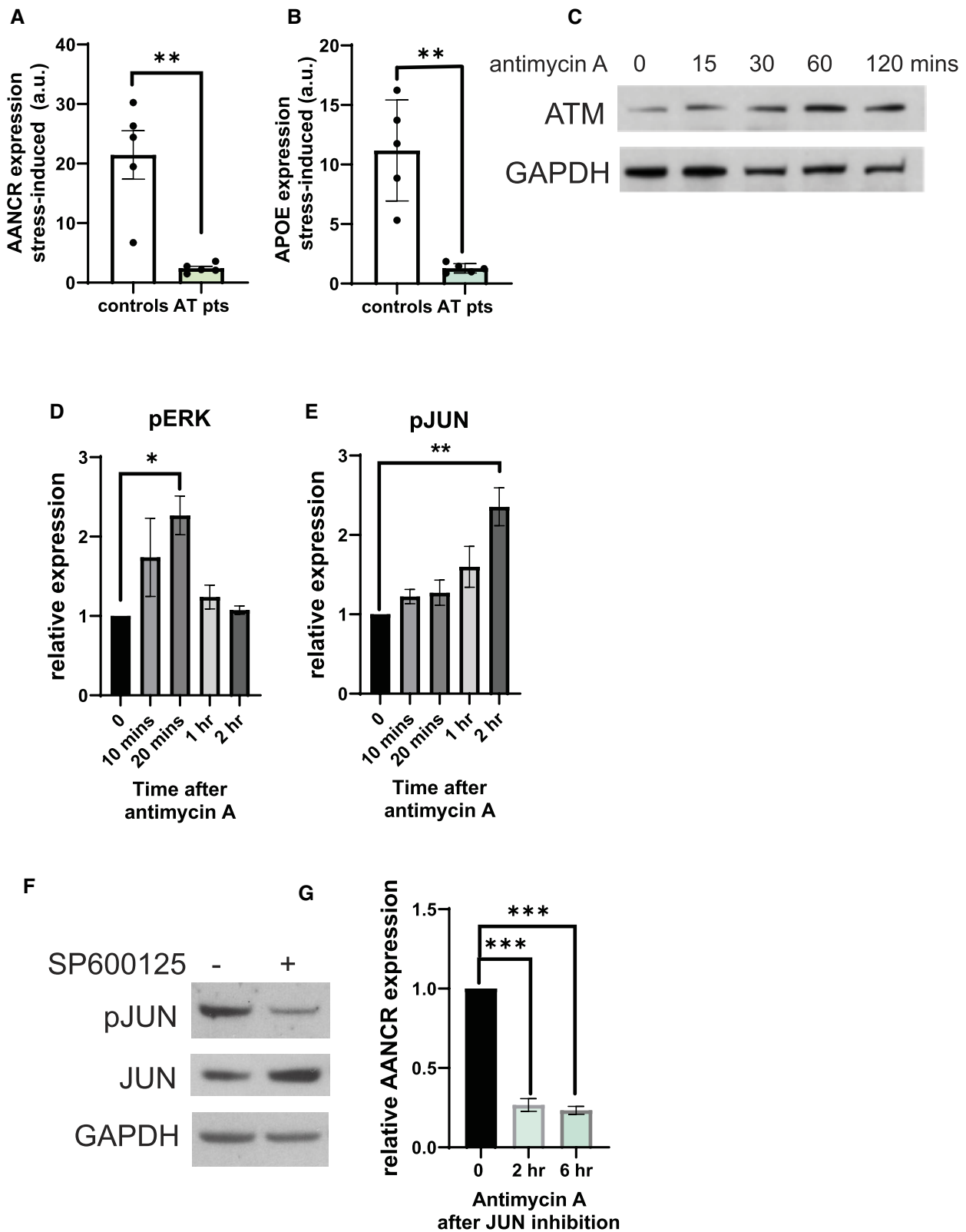


Figure 7. ATM-ERK-JUN regulates AANCR expression. In response to osmotic stress, B-cells from controls induce AANCR and *APOE* expression while those from AT-patients with ATM null mutations induce significantly less AANCR and *APOE* (**A** and **B**). Data from each individual are shown as a dot. In microglia, ATM is induced within 15 mins of antimycin A treatment; representative western blot ($n = 3$, data quantified) is shown in (**C**). Following ATM induction, ERK is phosphorylated (**D**) and subsequently JUN is phosphorylated (**E**) in microglia treated with antimycin A; pERK and pJUN were measured by immunoblots. The phosphorylation of JUN was inhibited by treatment with SP600125 (**F**) and in microglia where phosphorylation of JUN is inhibited, AANCR is induced at a significantly lower level (**G**) ($n \geq 3$, error bar = S.E.M. * $P < 0.05$, ** $P < 0.005$, *** $P < 0.001$).

AANCR and *APOE*, each with five different siRNAs or ASO. In total, there were 10 gene silencing experiments plus nontarget controls, NTC. After validating that each siRNA and the ASO decreased AANCR and *APOE* expression significantly (Supplementary Figure S6), we carried out cDNA-sequencing with at least 150 million reads per sample. Traditionally, these experiments have been referred to as RNA-sequencing, but since the RNA is reverse transcribed to cDNA which is then sequenced, we called them cDNA-sequencing (to contrast them to actual RNA-sequencing as in Oxford Nanopore direct RNA sequencing experiments). AANCR and *APOE* knockdown resulted in highly similar expression profiles. Figure 8A is a correlation matrix; the diagonal is lined with comparisons of the same samples, and the off-diagonal comparisons of the AANCR and *APOE* knockdown samples are highly similar to the self-comparisons. The similarity in expression profiles after AANCR and *APOE* knockdown provides further evidence that *APOE* is a major target gene of AANCR.

Next, using the cDNA-sequencing results, we looked for genes whose expression levels changed significantly following AANCR and *APOE* knockdown. Among the about 12 000 expressed genes, we found that *APOE* expression decreased by an average of 77% and 84%, respectively ($P < 2 \times 10^{-8}$, *t*-tests). Additionally, 597 other genes also changed expression significantly (Bonferroni corrected $P < 0.05$, *t*-test) and by at least 2-fold between controls and in the knockdown samples (Supplementary Table S1). Among these 598 genes are *C3* and other genes (e.g. *CFB*, *C4B*) (Table 1) in the complement pathway that characterizes A1 astrocytes. The expression levels of these genes are significantly reduced in the astrocytes following AANCR and *APOE* knockdown. In contrast, the expression levels of genes such as *EMP1* and *S100A10* that characterize A2 astrocytes are increased (Table 1). Thus, it appears that the knockdown of *APOE* leads to a dampening of the inflammatory features of astrocytes.

RELA, also known as p65, is a component of dimeric transcription factor NF- κ B that activates inflammatory cytokines, and sequence variants in *RELA* are associated with inflammatory diseases such as inflammatory bowel disease (59–62). The expression level of *RELA* is significantly reduced (Figure 8B) in the astrocytes following both AANCR and *APOE* knockdown. The promoters of *CXCL1* and *CXCL2* contain NF- κ B binding sites, and their expression levels are regulated by *RELA* (63). The lower *RELA* expression likely contributes to the reduction in the chemokines and the dampening of the inflammatory features in the astrocytes with reduced *APOE* expression.

Furthermore, network analysis of the 598 differentially expressed genes with *k*-means clustering (24) revealed a group of 115 genes that are significantly enriched (Supplementary Table S1, Benjamini–Hochberg corrected $P < 10^{-10}$ as per the STRING analysis (24)) for interaction with RIG1 (64–68), a key receptor in the antiviral innate immune response. RIG1 detects RNA viruses, such as the coronavirus, and triggers the interferon response (69–73). Polymorphism in *APOE* has been implicated in influencing individual susceptibility to RNA viruses (74–76). Figure 8C is a network of these genes based on the confidence model of network edges (24). The expression levels of these interferon-related genes such as *ARMC5*, *IRF7*, *ISG15*, *ISG20* and *DDX58* (RIG1) decreased significantly following AANCR and *APOE* knockdown (Table 2). These interferon-related genes are involved in neuroinflammation and found to be dysregulated in aging models

and patients with early stages of Alzheimer's disease (77–81). These results further show reducing AANCR and therefore *APOE* expression may lessen neuroinflammation.

Almost 20% (110 genes, Supplementary Table S1, Benjamini–Hochberg corrected $P = 5 \times 10^{-6}$ as per the STRING analysis (24)) of the 598 genes, interact with ESR β . Estrogen receptor β plays a key role in transcription regulation and neuroprotection against inflammation (82–84). ESR β expression level in astrocytes decreased (by 31% siAANCR, 50% siAPOE, $n = 5$ each) following AANCR and *APOE* knockdown, although it did not reach our significance cutoff. Among the genes in the ESR β interactome are transcription regulators such as *ARID5A*, *CACTIN*, *CC2D1A*, *CIC* and *SF3A2* that influence transcript stability, splicing, and gene expression as well as genes such as *DDX49*, *DHX37*, *MRPL4* and *RPLP1* (Table 3) that regulate translation. This interactome also includes two genes that are significantly down-regulated by >50%, they are *MIF*, the migration inhibitory factor ($P < 10^{-9}$, *t*-test) and *UNC93B1* ($P < 10^{-6}$, *t*-test), a Toll-like receptor regulator (Figure 8D). *MIF* is a cytokine that regulates immune response and is expressed by various cell types in the CNS and its overexpression has been implicated in inflammatory processes that worsen pathology in Alzheimer's Disease (85–89). *Ibudilast*, an anti-inflammatory drug that decreases *MIF* has been proposed as a treatment for Alzheimer's Disease (90–92). *UNC93B1* regulates immune responses by stabilizing and controlling the trafficking of Toll-like receptors such as TLR7 and TLR9 from the endoplasmic reticulum to endolysosomes and contributes to neuroinflammation (93–96). Together, these findings support AANCR-*APOE*'s role in conferring inflammatory features of astrocytes.

AANCR knockdown and *APOE* knockdown decrease mitochondrial function in astrocytes

Among the 598 differentially expressed genes following the knockdown of AANCR and *APOE* in astrocytes, we found a significant proportion of mitochondrial genes (Supplementary Table S1, FDR = 2×10^{-4}). This includes 32 mitochondrial-related genes such as *NDUFA3*, *NDUFB7* and *NDUFS7*, which are integral components of Complex I in the electron transport chain. These genes are also cataloged in Mitocarta 3.0, a comprehensive inventory of mammalian mitochondrial proteins and pathways (97). Figure 9A shows a heatmap of these mitochondrial genes, all of which exhibit decreased expression following the knockdown of AANCR and *APOE*.

To further investigate the impact of this gene expression alteration, we assessed mitochondrial respiration and glycolysis in astrocytes (83,84). Our results showed that after AANCR knockdown, there was a significant reduction in the oxygen consumption of astrocytes ($P < 0.0001$; Figure 9B), consistent with the observed changes in gene expression. Typically, astrocytes respond to inflammation by increasing oxygen consumption to enhance their metabolic functions. Given that the reduction in AANCR and *APOE* expression was associated with a less inflammatory gene expression phenotype, a corresponding decrease in metabolic activity was observed.

Additionally, we explored the effect of decreased AANCR-*APOE* expression on glycolysis. We noted a significant reduction (Figure 9C, >3-fold, $P = 5 \times 10^{-8}$, *t*-test) in the expression of phosphofructokinase, a key enzyme in

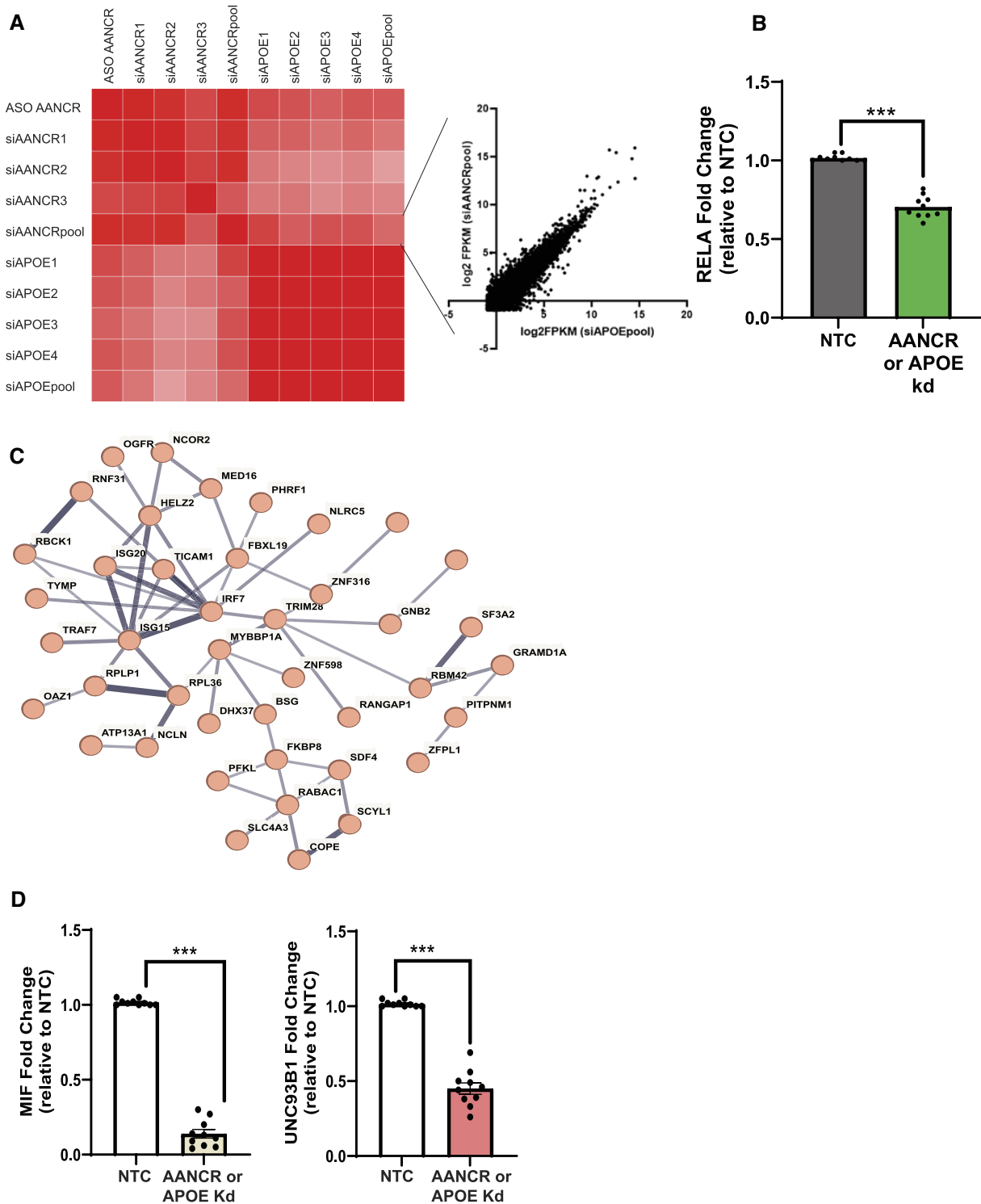


Figure 8. AANCR and APOE knockdown confer a less inflammatory expression phenotype. A correlation matrix with genes whose expression levels changed significantly in astrocytes with AANCR and APOE knockdown, a correlation plot for AANCR knockdown with pooled siRNA and APOE knockdown with pooled siRNAs; data based on cDNA-sequencing of the samples (A). The expression of *RELA* decreased significantly after AANCR or APOE knockdown (B). Genes that changed significantly following AANCR and APOE knockdown include those that encode proteins that interact with RIG-1, per data in Biogrid. A network of their interactions as determined by STRING using the confidence model for edges (C). Expression levels of Migration Inhibitory Factor, *MIF* and unc-93 homolog B1, *UNC93B1* were also reduced following AANCR and APOE knockdown (D) ($n = 5$ siAANCR experiments, $n = 5$ siAPOE experiments, error bar = S.E.M. *** $P < 0.0001$).

Table 1. Following AANCR and *APOE* knockdown, the expression levels of genes that are associated with A1- and A2-like astrocytes changed significantly

Gene name	Markers	Fold change AANCR kd vs. NTC	Fold change <i>APOE</i> kd vs. NTC	Nominal <i>P</i> -value (<i>t</i> -test combined AANCR and <i>APOE</i> kd)
<i>C3</i>	A1	0.14	0.57	7.64E-06
<i>C4B</i>	A1	0.24	0.54	8.53E-06
<i>CFB</i>	A1	0.28	0.33	7.37E-06
<i>CHI3L2</i>	A2	1.42	1.50	4.38E-08
<i>S100A10</i>	A2	1.23	1.35	4.88E-06
<i>B3GNT5</i>	A2	1.25	1.34	1.26E-06
<i>TM4SF1</i>	A2	1.36	1.30	4.51E-06
<i>EMP1</i>	A2	1.13	1.23	8.31E-06
<i>FZD6</i>	A2	1.22	1.21	1.50E-07

The changes following AANCR and *APOE* knockdown are shown to highlight the consistencies upon gene knockdown. Sample sizes are $n = 5$ for AANCR knockdown and $n = 5$ for *APOE* knockdown. The *P*-values are derived from Student's *t*-tests combining the 10 sets of knockdown data.

Table 2. Interferon-related genes whose expression levels were reduced significantly following AANCR and *APOE* knockdown

Gene name	Fold change AANCR kd vs. NTC	Fold Change <i>APOE</i> kd vs. NTC	Nominal <i>P</i> -value (<i>t</i> -test combined AANCR and <i>APOE</i> kd)
<i>ARMC5</i>	0.33	0.35	2.66E-09
<i>IRF7</i>	0.24	0.27	3.32E-09
<i>ISG15</i>	0.07	0.07	7.59E-14
<i>ISG20</i>	0.27	0.26	7.61E-09
<i>DDX58</i>	0.30	0.44	3.13E-09

The changes following AANCR and *APOE* knockdown are shown to highlight the consistencies upon gene knockdown. Sample sizes are $n = 5$ for AANCR knockdown and $n = 5$ for *APOE* knockdown. The *P*-values are derived from Student's *t*-tests combining the 10 sets of knockdown data.

glycolysis (98–101). To determine if this decrease in gene expression translated to functional changes, we measured the extracellular acidification rate (ECAR), a marker of glycolytic activity. Consistent with our hypothesis, there was a significant decrease in glycolysis following the reduction in AANCR expression ($P < 0.0001$, ANOVA; Figure 9D). The reduction in their oxygen consumption and glycolytic activity following AANCR-*APOE* knockdown is consistent with a decrease in inflammatory features of the astrocytes (102–104).

Together, the gene expression profiles, and metabolic activities suggest that AANCR and *APOE* confer on astrocytes an inflammatory phenotype.

Discussion

In this study, we focused on the enhancer RNA, AANCR, and found that its transcripts are needed to promote *APOE* expression. We elucidated the regulation of AANCR by the ATM-ERK-AP1 pathway and showed that it functions by conferring an inflammatory phenotype to astrocytes.

High-throughput screening has identified hundreds of thousands to millions of enhancers and many of them are transcribed leading to enhancer RNAs (1). To dissect these regulatory elements, methods such as massively parallel reporter assays (105) and CRISPR screens have probed the activities of enhancers (106,107). Additionally, genetic studies identi-

Table 3. Genes that encode proteins that interact with ESR β according to data from Biogrid

Gene name	Fold change AANCR kd vs. NTC	Fold change <i>APOE</i> kd vs. NTC	Nominal <i>P</i> -value (<i>t</i> -test combined AANCR and <i>APOE</i> kd)
<i>ARID5A</i>	0.40	0.32	4.42E-08
<i>CACTIN</i>	0.50	0.42	3.54E-08
<i>CC2D1A</i>	0.48	0.27	2.30E-07
<i>CIC</i>	0.41	0.34	2.90E-09
<i>SF3A2</i>	0.39	0.24	4.41E-08
<i>DDX49</i>	0.38	0.29	1.11E-08
<i>DHX37</i>	0.42	0.40	3.67E-09
<i>MRPL4</i>	0.39	0.22	1.01E-08
<i>RPLP1</i>	0.47	0.32	2.26E-07

The changes following AANCR and *APOE* knockdown are shown to highlight the consistencies upon gene knockdown. Sample sizes are $n = 5$ for AANCR knockdown and $n = 5$ for *APOE* knockdown. The *P*-values are derived from Student's *t*-tests combining the 10 sets of knockdown data.

fied that sequence variants in enhancers are enriched for susceptibility alleles for complex diseases (108,109) leading to the term enhanceropathies (110). However, connecting the alteration of enhancers to human diseases remains challenging (111). To figure out how enhancer variants confer disease susceptibility and to leverage enhancer function for therapeutic intervention require transitioning from high-throughput analyses to focusing on the details of individual enhancers.

Previously, we identified AANCR as an enhancer RNA of *APOE* in peripheral cells and a genetic modifier of Alzheimer's Disease (16). Here, we focused on the function and regulation of AANCR in cells relevant to neurodegenerative diseases. We felt that distinguishing whether AANCR transcription alone or the transcript itself is needed to regulate *APOE* expression is important. Understanding this distinction can guide strategies for altering *APOE* expression as a therapeutic option for Alzheimer's Disease and other conditions such as neuroinflammation where *APOE* has been implicated. We found that AANCR transcription is not sufficient but rather AANCR transcripts are needed to regulate *APOE* expression. This shows that siRNAs and ASOs against AANCR are therapeutic options for altering *APOE* expression. Determining that the ATM-EKR-AP1 pathway regulates AANCR, and AANCR's role in promoting an inflammatory phenotype, improves our understanding of this enhancer RNA.

The discovery of key genetic modifiers such as *SMN2* in spinal muscular atrophy and *BCL11A* in sickle cell anemia and thalassemia, has paved the way for groundbreaking therapeutic interventions. For instance, Nusinersen, an RNA-based treatment for spinal muscular atrophy, enhances the inclusion of exon 7 in *SMN2*, leading to increased SMN protein production in patients (112). This advance has been instrumental in preventing fatalities and allowing patients to achieve developmental milestones (113,114). Similarly, Exagamglogene autotemcel, a CRISPR-based therapy for sickle-cell anemia and β -thalassemia targets *BCL11A* to reactivate fetal hemoglobin production (115). Results have shown a reduction or cessation of pain crises in sickle cell patients and an elimination of the need for transfusions in β -thalassemia patients. In this context, our research demonstrates that AANCR, a modifier of Alzheimer's Disease, regulates *APOE* expression in the nervous system. We found that targeting AANCR transcripts with RNA interference or RNaseH-mediated

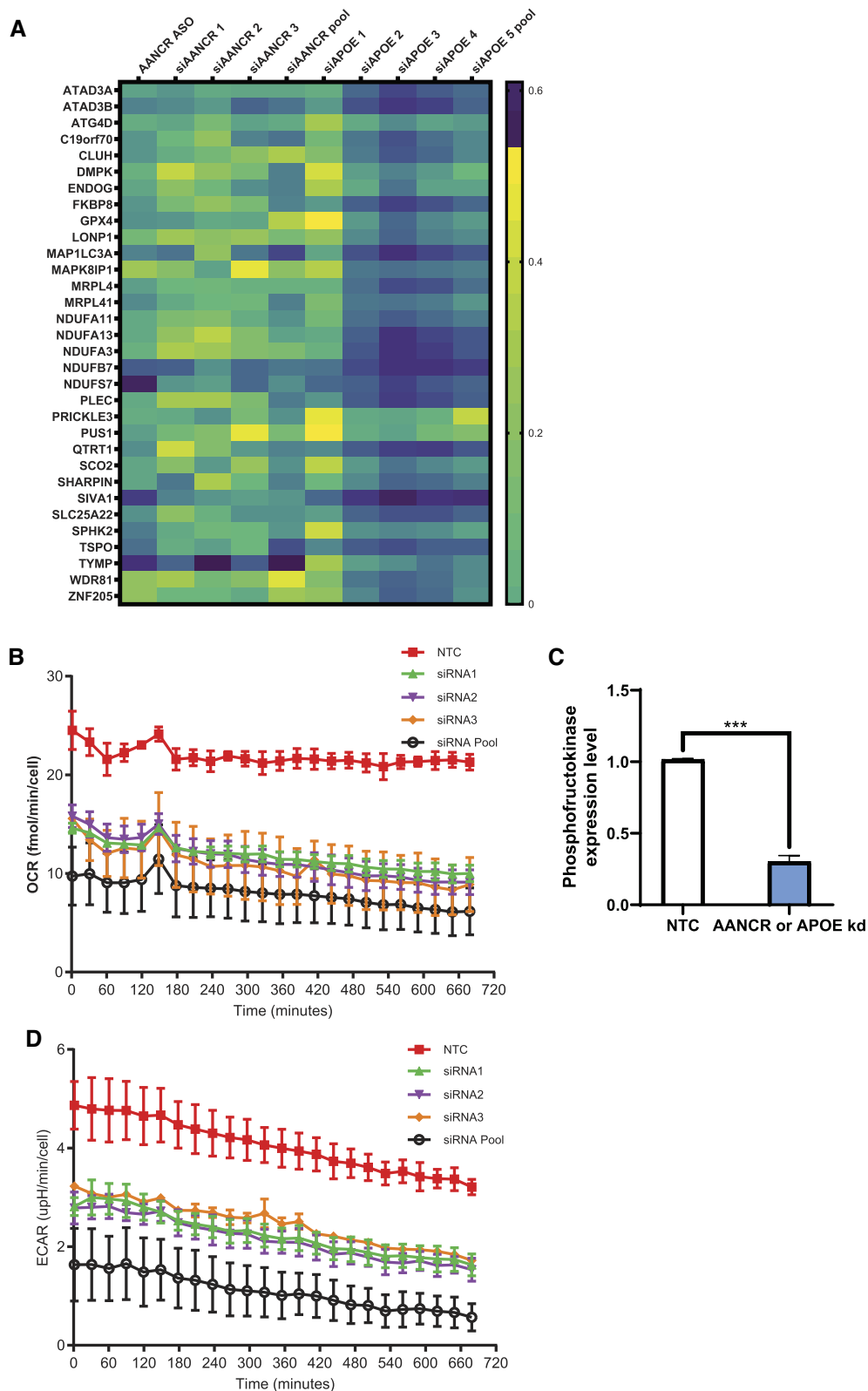


Figure 9. AANCR and APOE knockdown leads to a reduction in mitochondrial function Heat map showing expression of 32 mitochondrial-related genes downregulated by knockdown of AANCR and *APOE* (A). Seahorse assay of astrocytes after AANCR knockdown. The oxygen consumption rate (OCR) is significantly lower ($n = 3$, error bars = S.D., $P < 0.0001$; one-sided ANOVA) (B). Expression levels of phosphofructokinase were significantly reduced following AANCR and APOE knockdown (C) ($n = 5$ siAANCR experiments, $n = 5$ siAPOE experiments, error bar = S.E.M. *** $P < 0.0001$, one-sided ANOVA). Seahorse assay of astrocytes after AANCR knockdown shows that the extracellular acidification rates (D) are significantly lower ($n = 3$ per treatment, error bars = S.D., *** $P < 0.0001$, one-sided ANOVA).

degradation leads to lower *APOE* levels, which then reduces the inflammatory characteristics of astrocytes.

Previous research by Ben Barres and colleagues identified A1 astrocytes by their expression of C3 and other complement genes and showed the neurotoxicity of these cells. In contrast, A2 astrocytes, characterized by their expression of S100A10, are more neuroprotective (116,117). Based on their findings, we suggest that by lowering *APOE* expression, one can shift astrocytes from an A1 to an A2 phenotype, a transition that could be advantageous in scenarios like acute CNS injury or infections where reducing inflammation is desired. Future investigations will focus on the potential of targeting AANCR in scenarios where mitigating neuroinflammation could be beneficial.

The mechanism by which enhancer RNAs regulate their target genes is mostly unknown. The bromodomain and extra-terminal domain (BET) and Jumonji families of proteins are involved in transcriptional control of enhancers (118–121). Identifying the mechanism by which AANCR regulates *APOE* will be an important step. Our previous work in PROseq analysis did not identify paused RNA polymerase II in the promoter of *APOE* so AANCR is not likely to interact with NELF (122,123) or other protein complexes that pause proximal promoter transcription. Our early results suggest that BRD4 and JMJD6 interact with AANCR and *APOE* but much analysis is needed to understand the mechanism by which AANCR regulates *APOE*.

In summary, our study identified the RNA transcripts of an enhancer as a key regulator of *APOE* expression in various cell types in the nervous system at baseline and in stress responses. We also uncovered the ATM-ERK-AP1 pathway that regulates AANCR and demonstrated an association of AANCR-*APOE* with the inflammatory phenotype of astrocytes. Future investigation into altering AANCR and/or *APOE* expression is warranted to examine the potential to modulate inflammation. We posit that the dissection of the nucleic acid biology of enhancers will lead to a better understanding and therapeutic options for enhanceropathies.

Data availability

Sequencing data were deposited to NCBI GEO <https://www.ncbi.nlm.nih.gov/geo/query/acc.cgi?acc=GSE263862>.

Supplementary data

Supplementary Data are available at NAR Online.

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Conflict of interest statement

None declared.

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