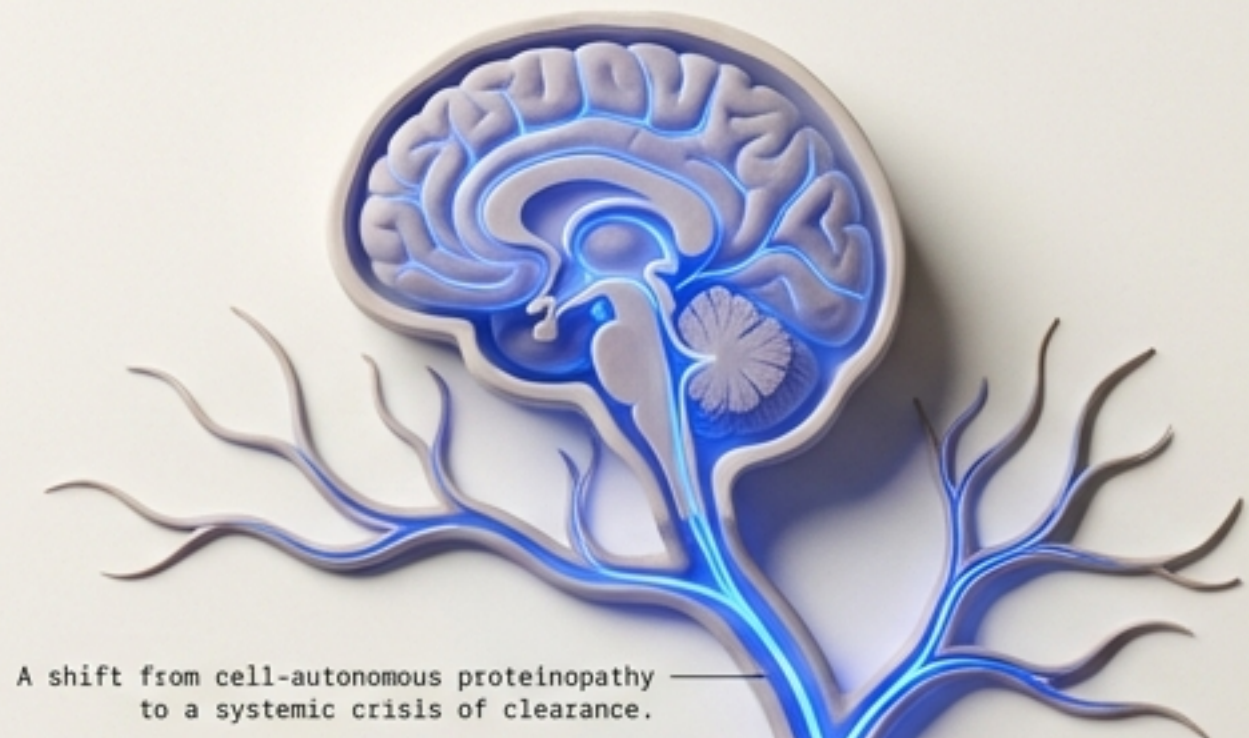
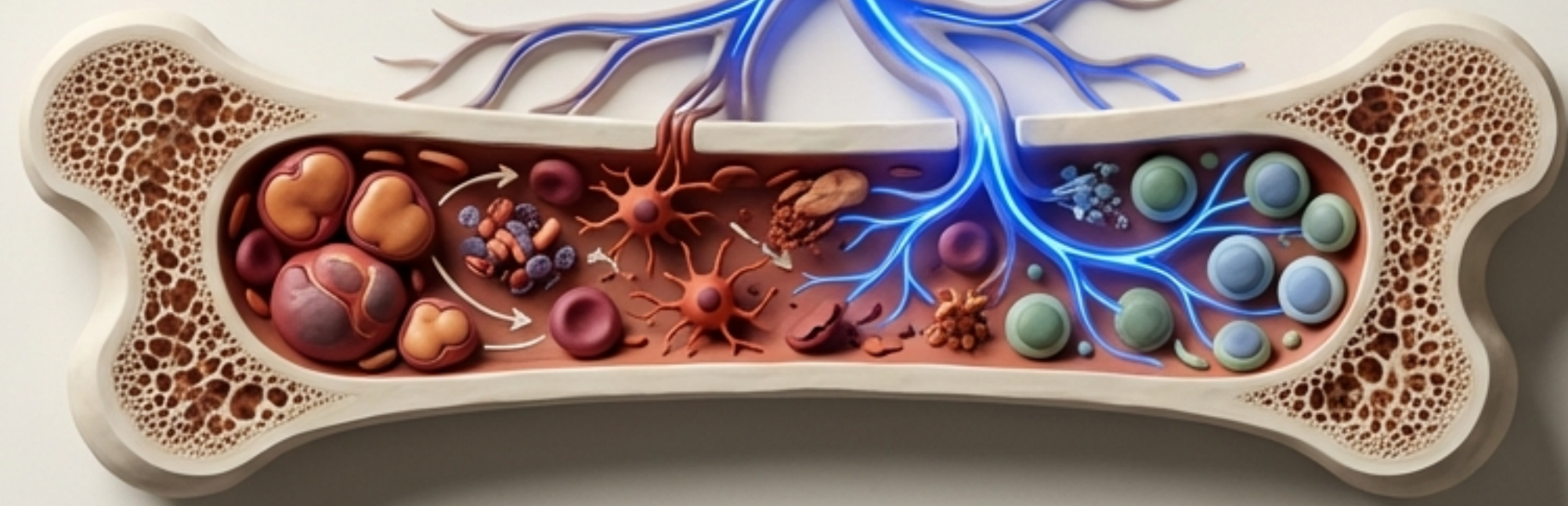




A shift from cell-autonomous proteinopathy
to a systemic crisis of clearance.

THE IMMUNOMETABOLIC NEXUS OF NEURODEGENERATION

FROM AUTOPHAGIC FAILURE AND MICROGLIAL SENESCENCE TO SYSTEMIC RESCUE



SHATTERING THE ISOLATIONIST VIEW OF THE BRAIN

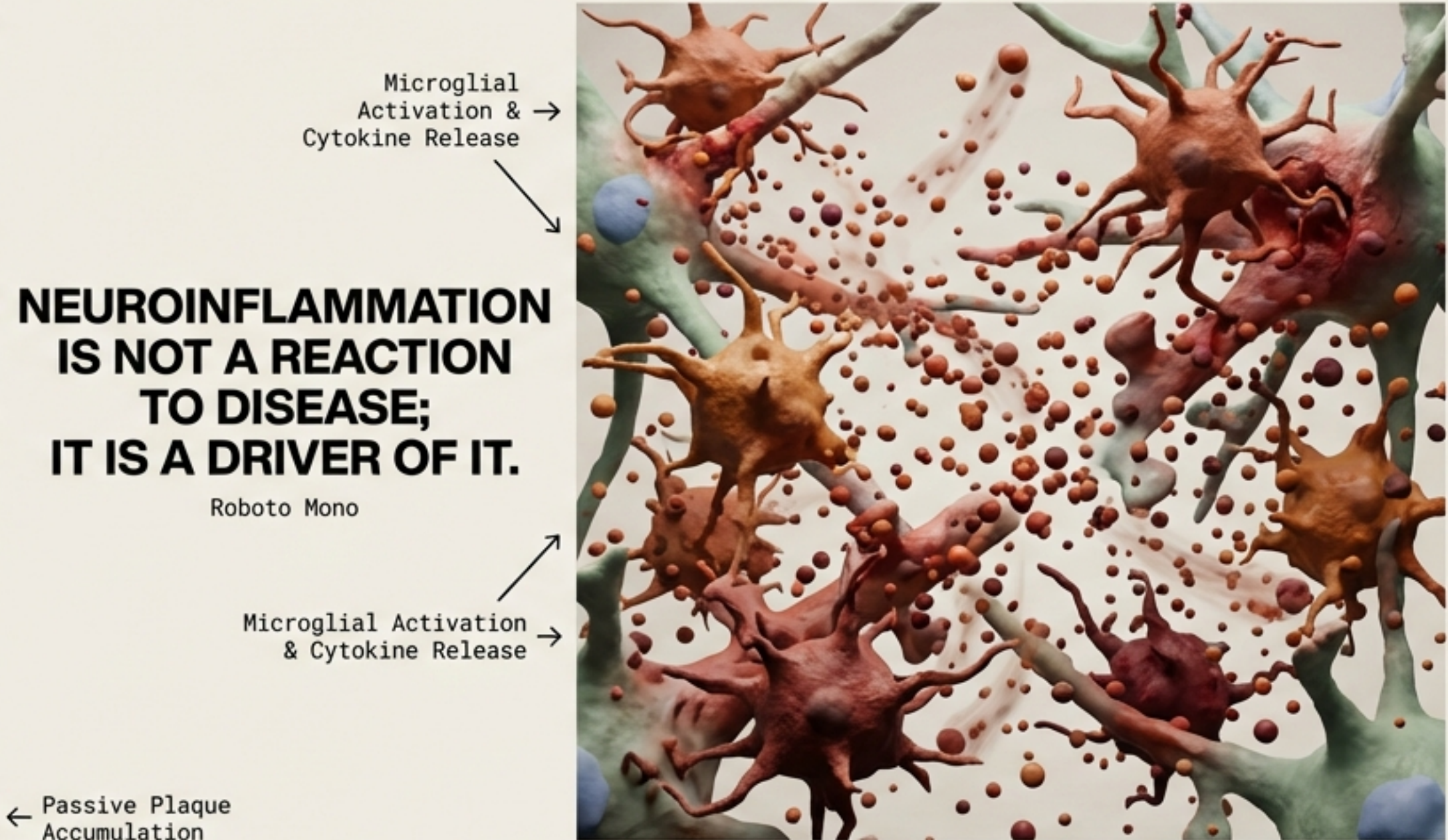
THE OLD PARADIGM:
PROTEIN-CENTRIC MODEL



THE OLD PARADIGM:
PROTEIN-CENTRIC MODEL

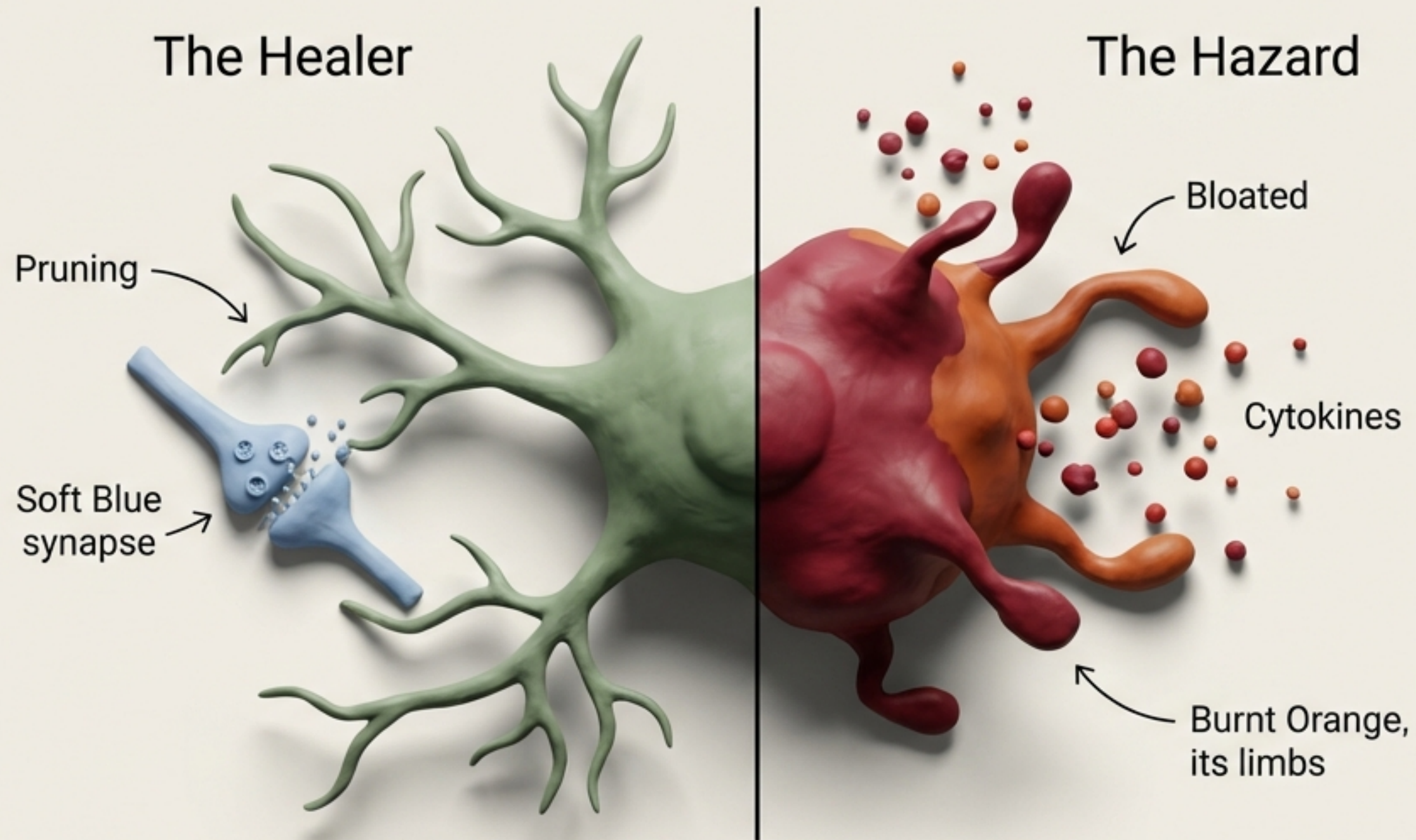
Prepared for Dr. James Truchard and Benjamin Gustafsson
Drafted by ChatGPT-5.2

THE NEW REALITY:
IMMUNOMETABOLIC FRAMEWORK



THE NEW REALITY:
IMMUNOMETABOLIC FRAMEWORK

THE SENTINELS THAT BECOME THE THREAT



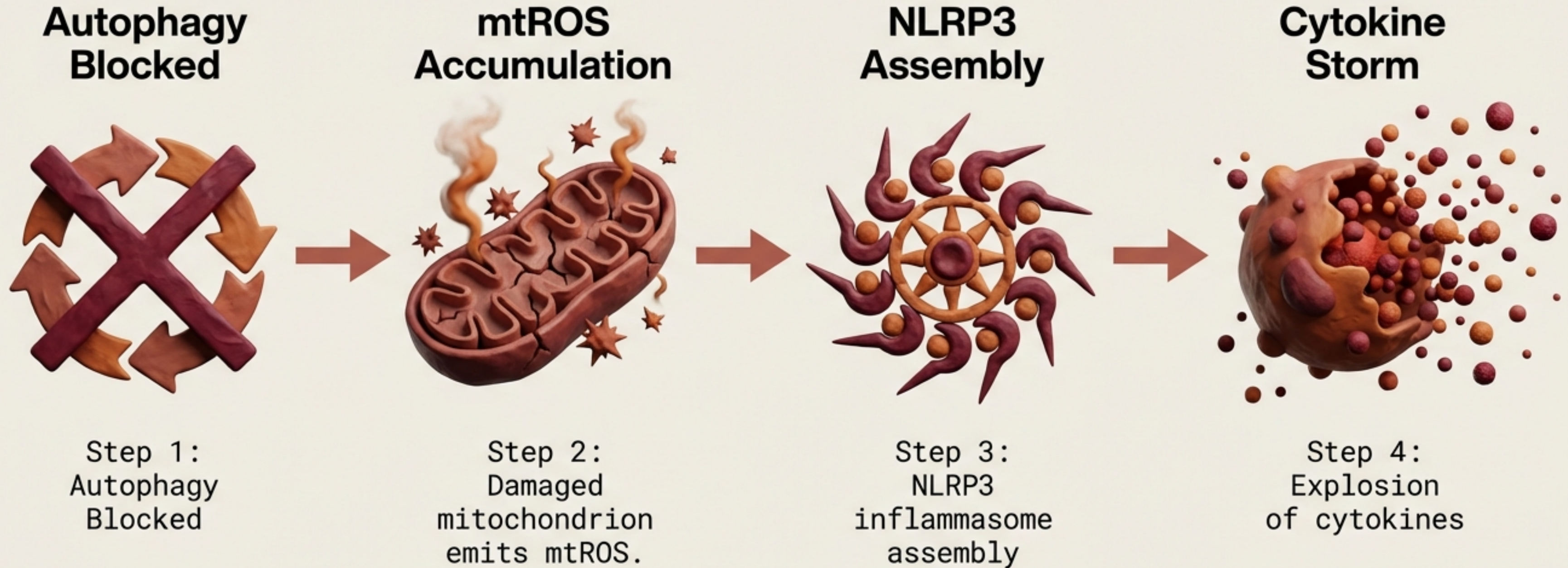
Microglia: ~10% of CNS population.
Independent of peripheral hematopoiesis.

THE ROOT OF THE CRISIS IS AUTOPHAGIC COLLAPSE



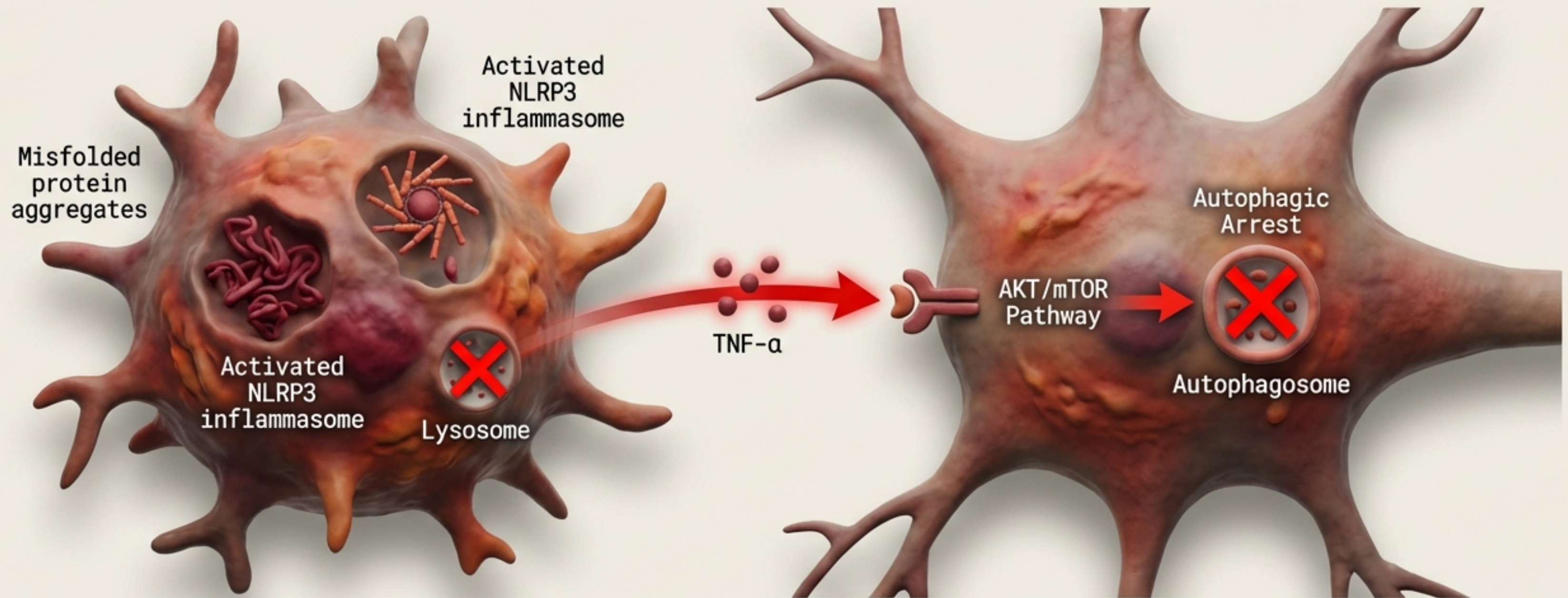
>24hrs exposure to A β overwhelms lysosomal machinery.

AUTOPHAGY FAILURE IGNITES THE INFLAMMASOME



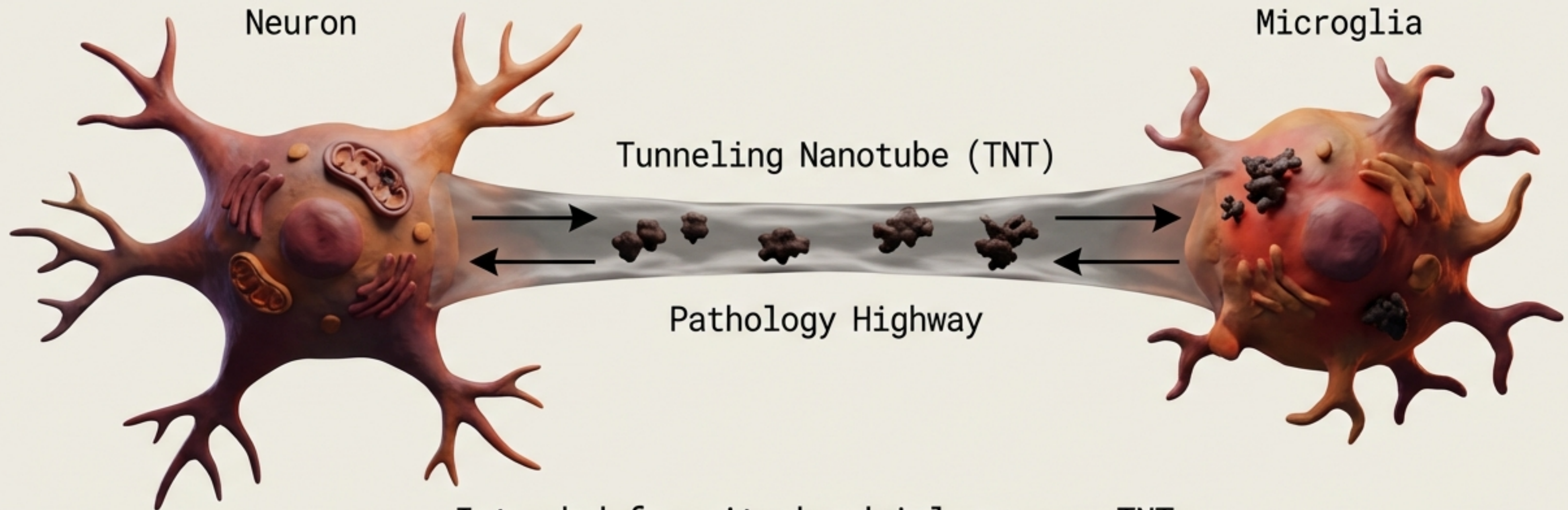
When autophagy fails, the cell enters a hyper-inflammatory M1-like state.

THE LETHAL HANDSHAKE: HOW MICROGLIA PARALYZE NEURONS



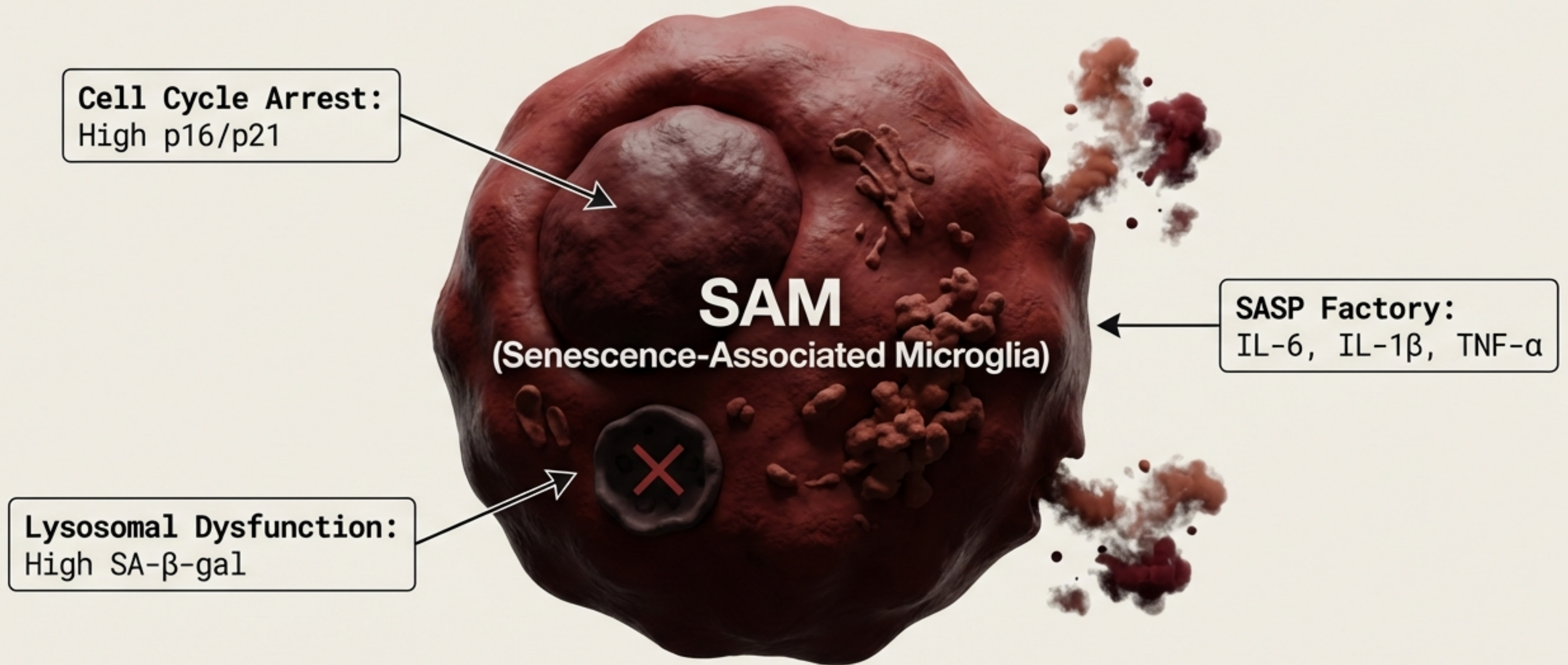
Misfolded proteins trigger microglial autophagy failure, leading to NLRP3 inflammasome activation and the release of TNF- α . This cytokine activates the neuronal AKT/mTOR pathway, suppressing neuronal autophagy and exacerbating protein aggregation.

RESCUE CONDUITS TURNED VECTORS OF CONTAGION



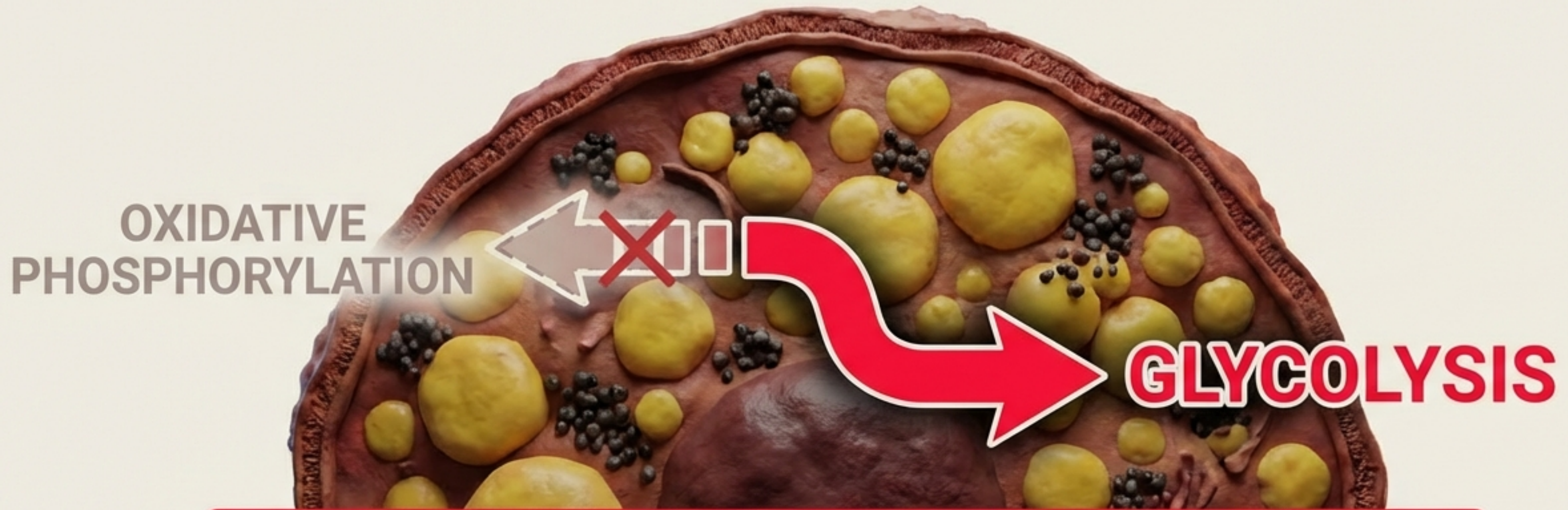
Intended for mitochondrial rescue, TNTs
become vectors for α -synuclein/Tau spread
when microglial degradation fails.

ENTERING THE SENESENT STATE



These cells stop dividing, stop clearing, and refuse to die.

METABOLIC REPROGRAMMING AND LIPID OVERLOAD

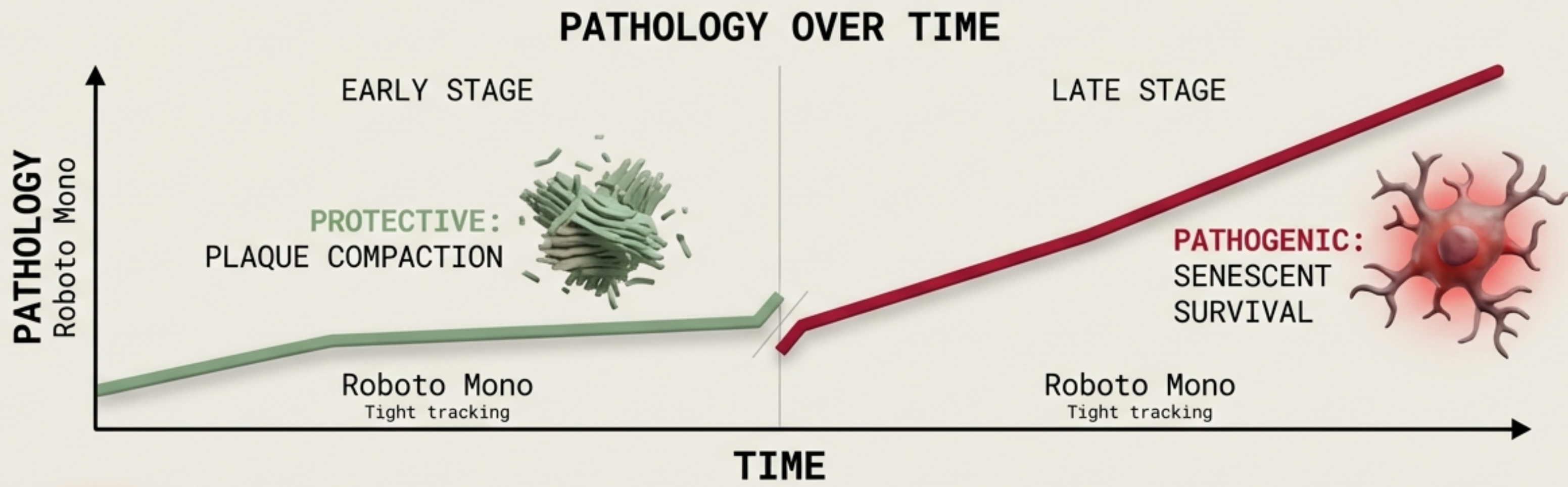


LDAM (Lipid-Droplet-Accumulating Microglia)

Genetically biased toward a viral-like, pro-inflammatory state.

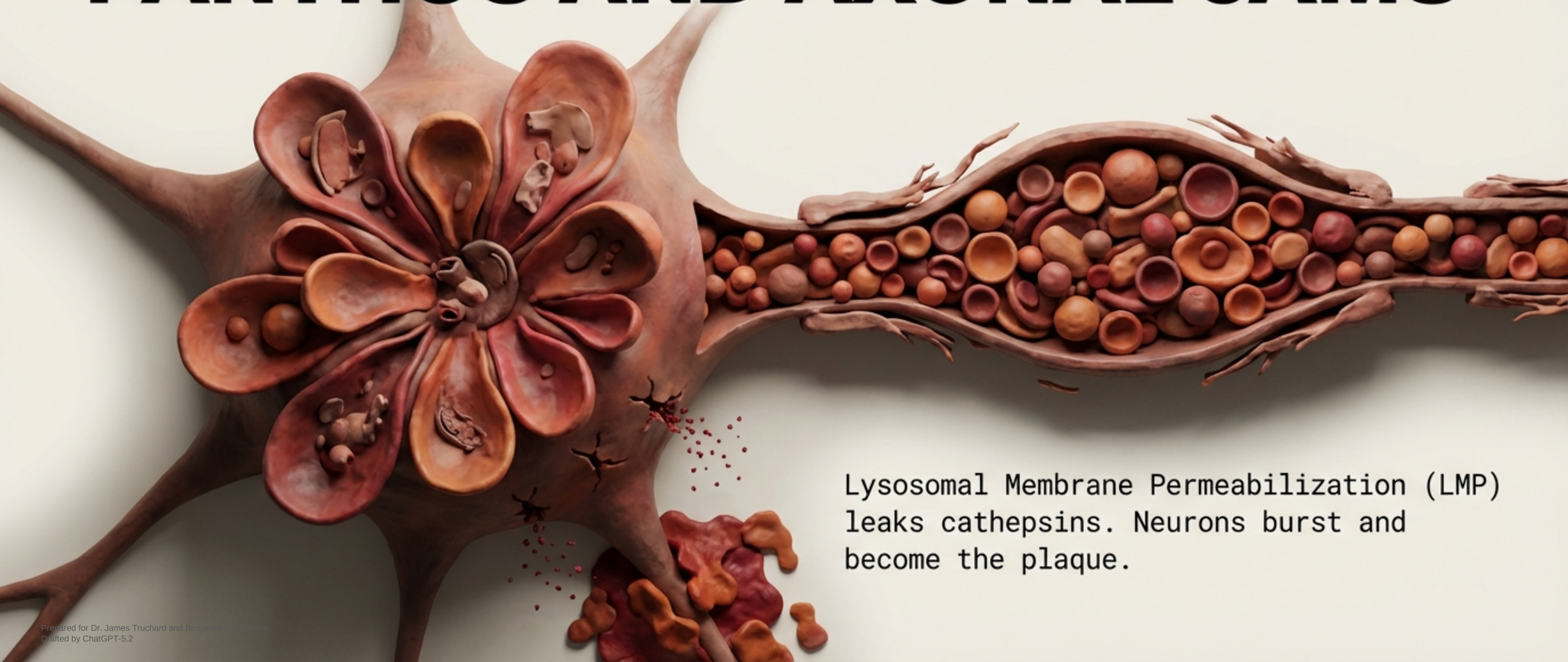
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THE TREM2 PARADOX IN LATE-STAGE DISEASE



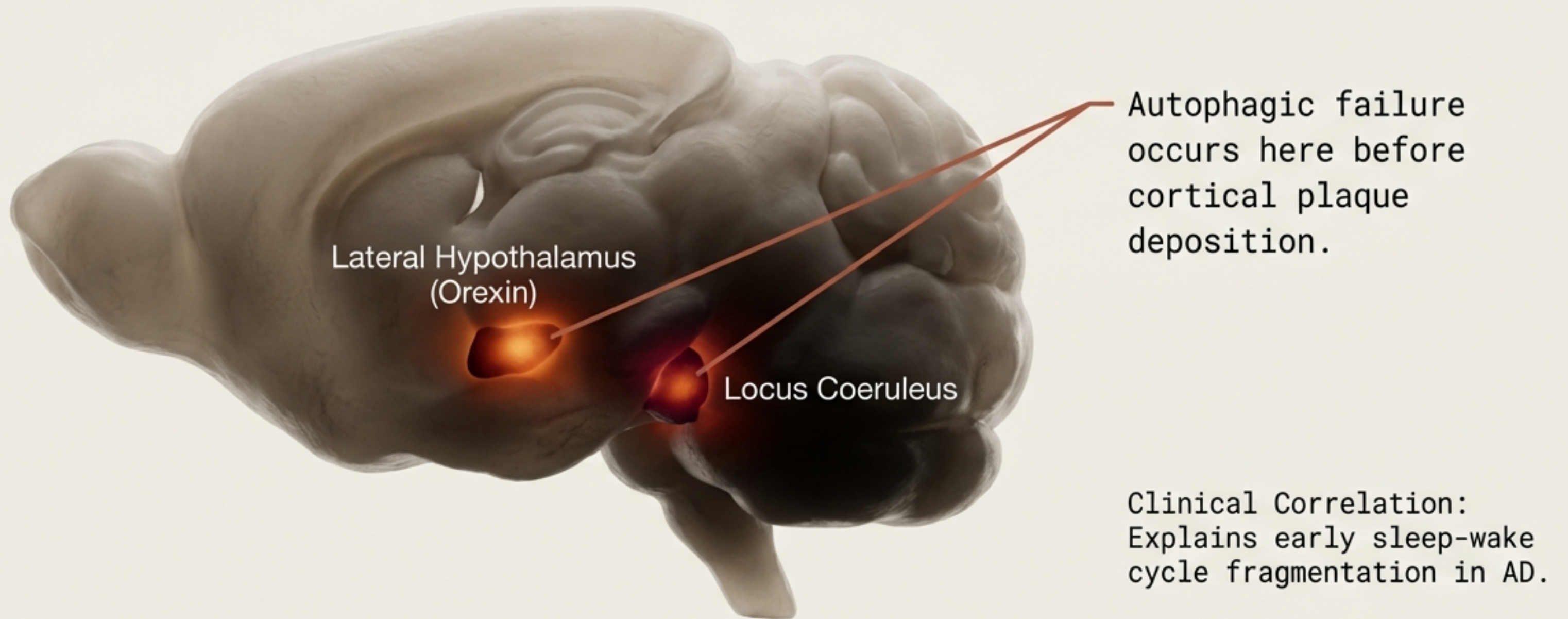
In senescence, TREM2 uncouples from phagocytosis and instead prevents the apoptotic clearance of the toxic cell itself.

THE NEURONAL COLLAPSE: PANTHOS AND AXONAL JAMS

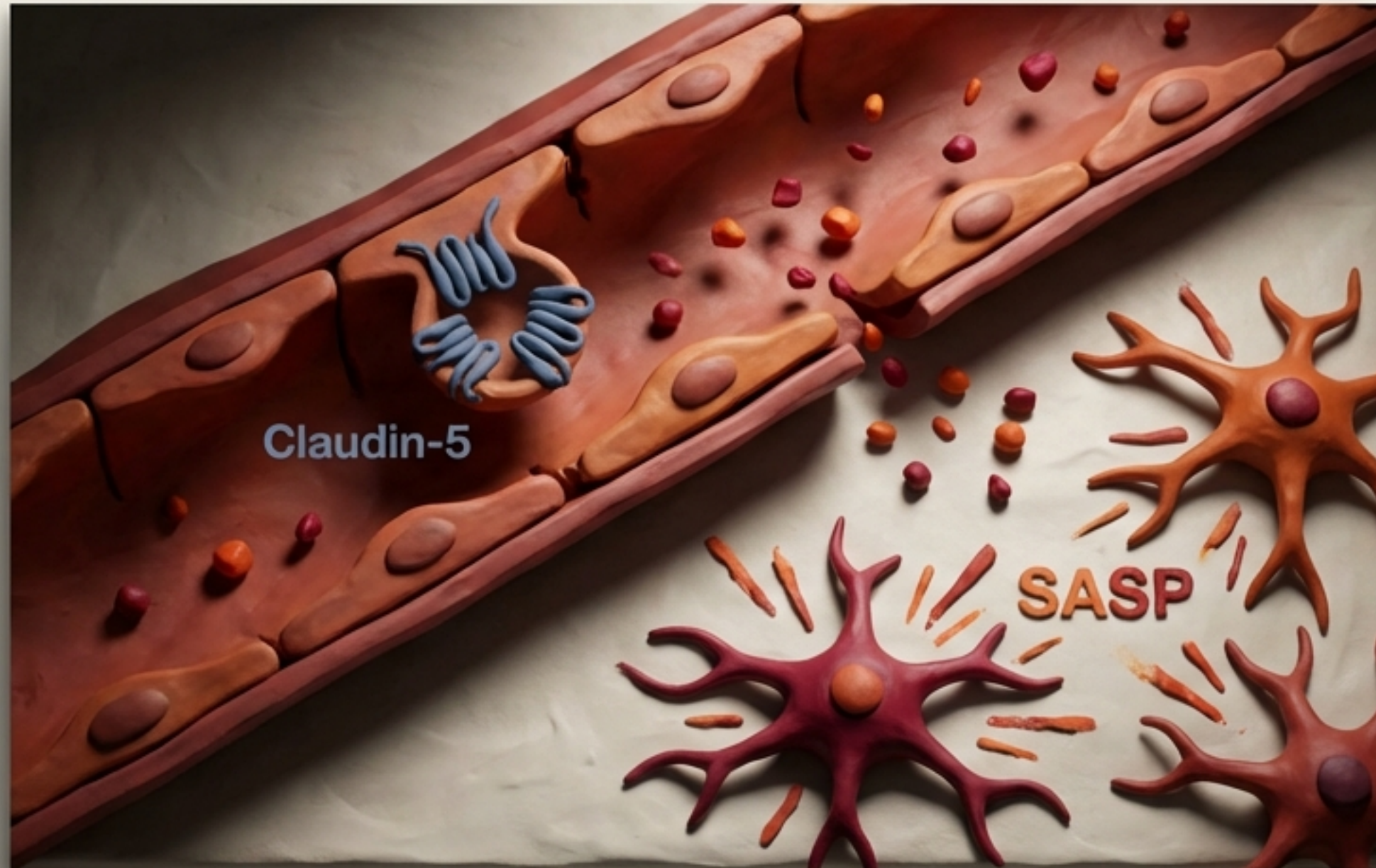


Lysosomal Membrane Permeabilization (LMP) leaks cathepsins. Neurons burst and become the plaque.

THE GEOGRAPHY OF VULNERABILITY

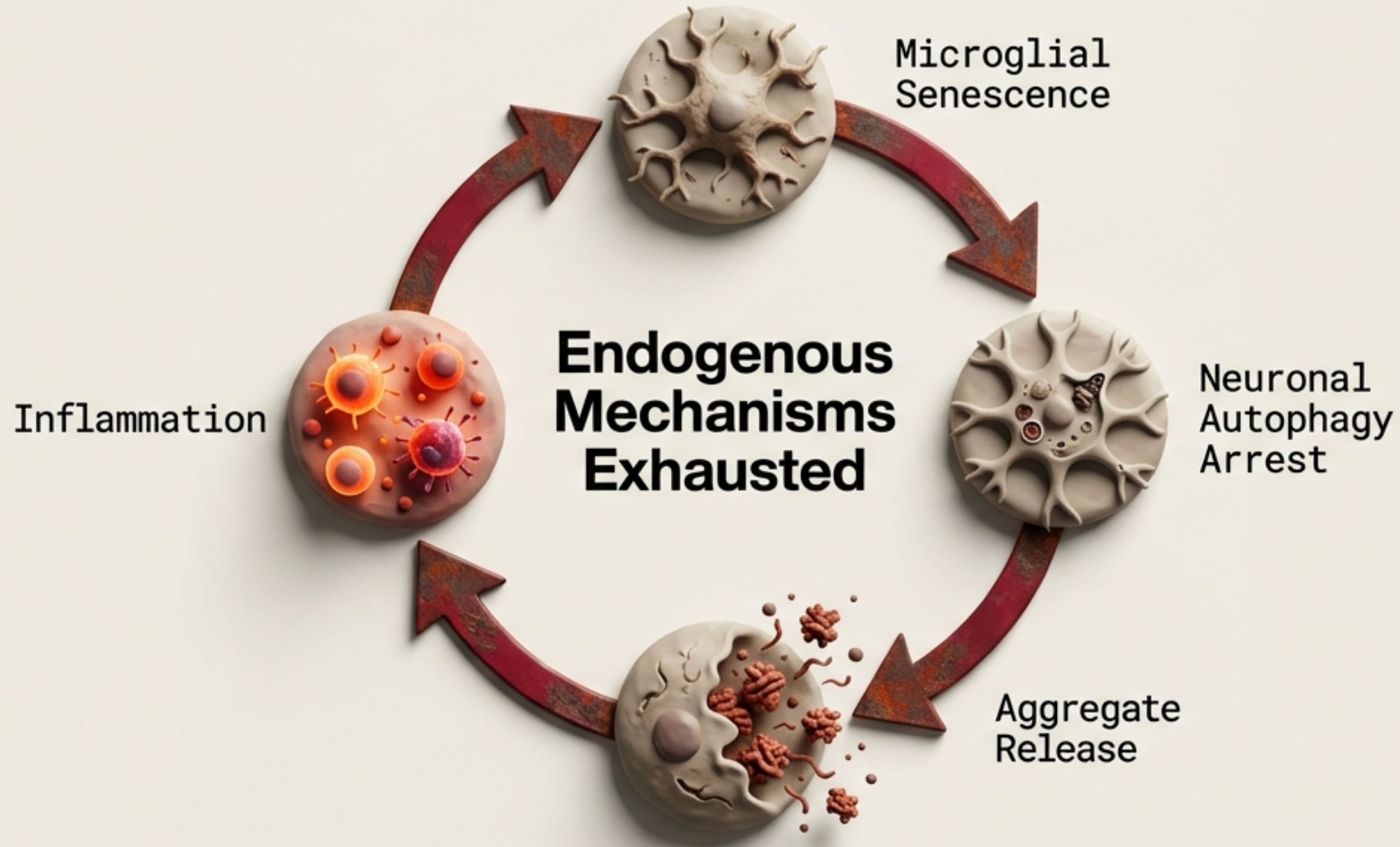


SYSTEMIC BREACH: GLIA AND THE BLOOD-BRAIN BARRIER



Loss of tight junctions.
The BBB becomes permeable
to peripheral toxins.

The Deadlock of Local Repair



Targeting amyloid alone fails because the machinery to clear it is broken.

THE SYSTEMIC TOLL: BONE MARROW EXHAUSTION

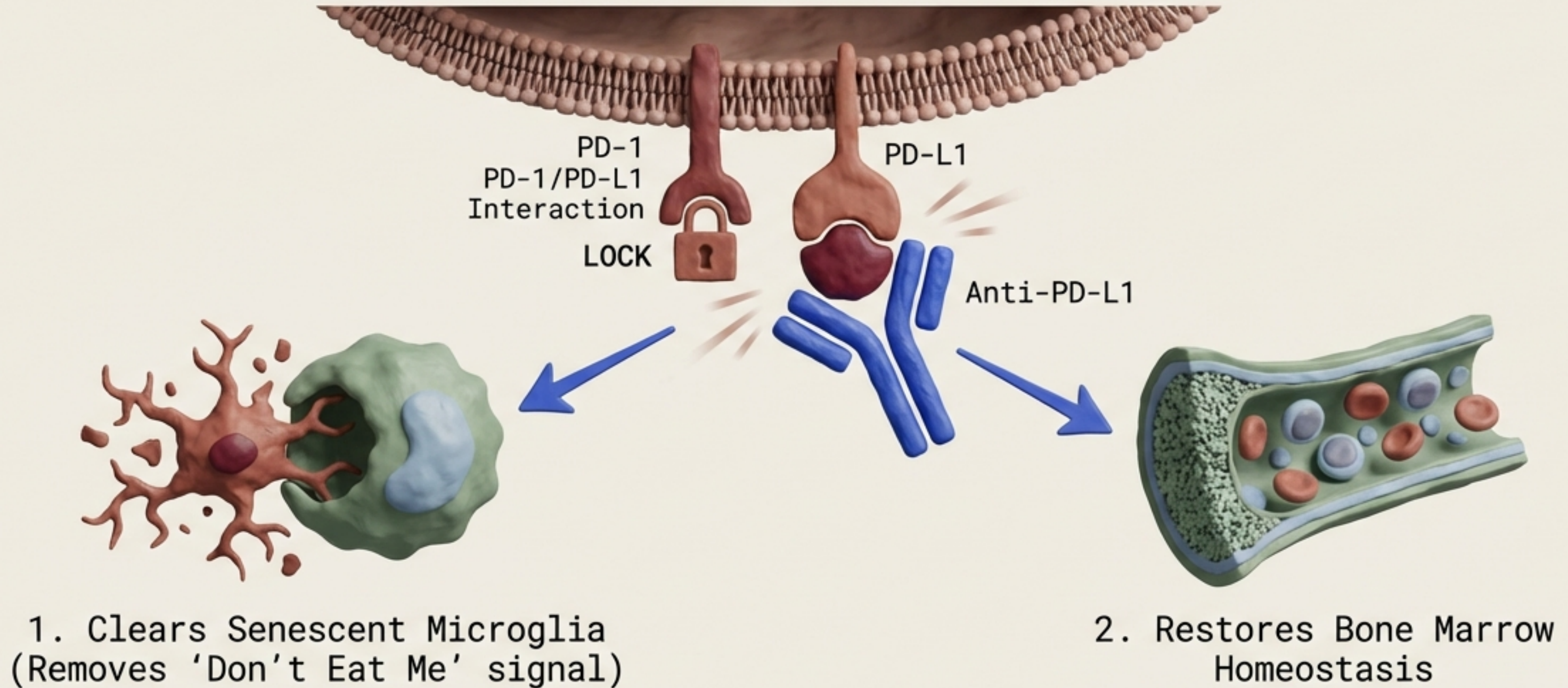


Chronic Brain-
Derived IFN-I

HSCs forced out of
quiescence leading
to exhaustion.

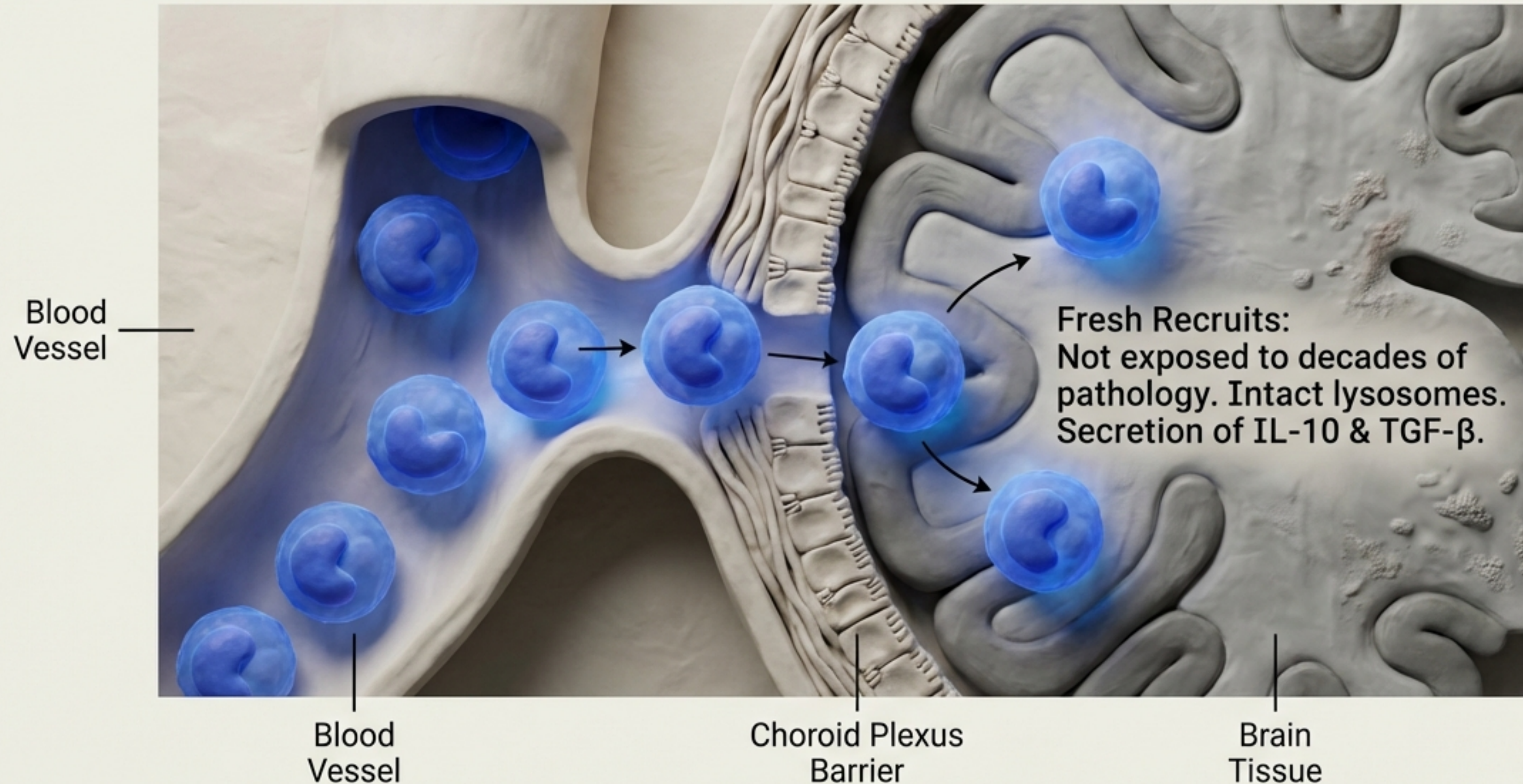
Result: Production of
low-quality,
pro-inflammatory
monocytes stuck in
the marrow.

BREAKING THE DEADLOCK: IMMUNE CHECKPOINT BLOCKADE



Rejuvenating the systemic immune system to rescue the CNS

THE CAVALRY ARRIVES: MONOCYTE-DERIVED MACROPHAGES (MDMs)



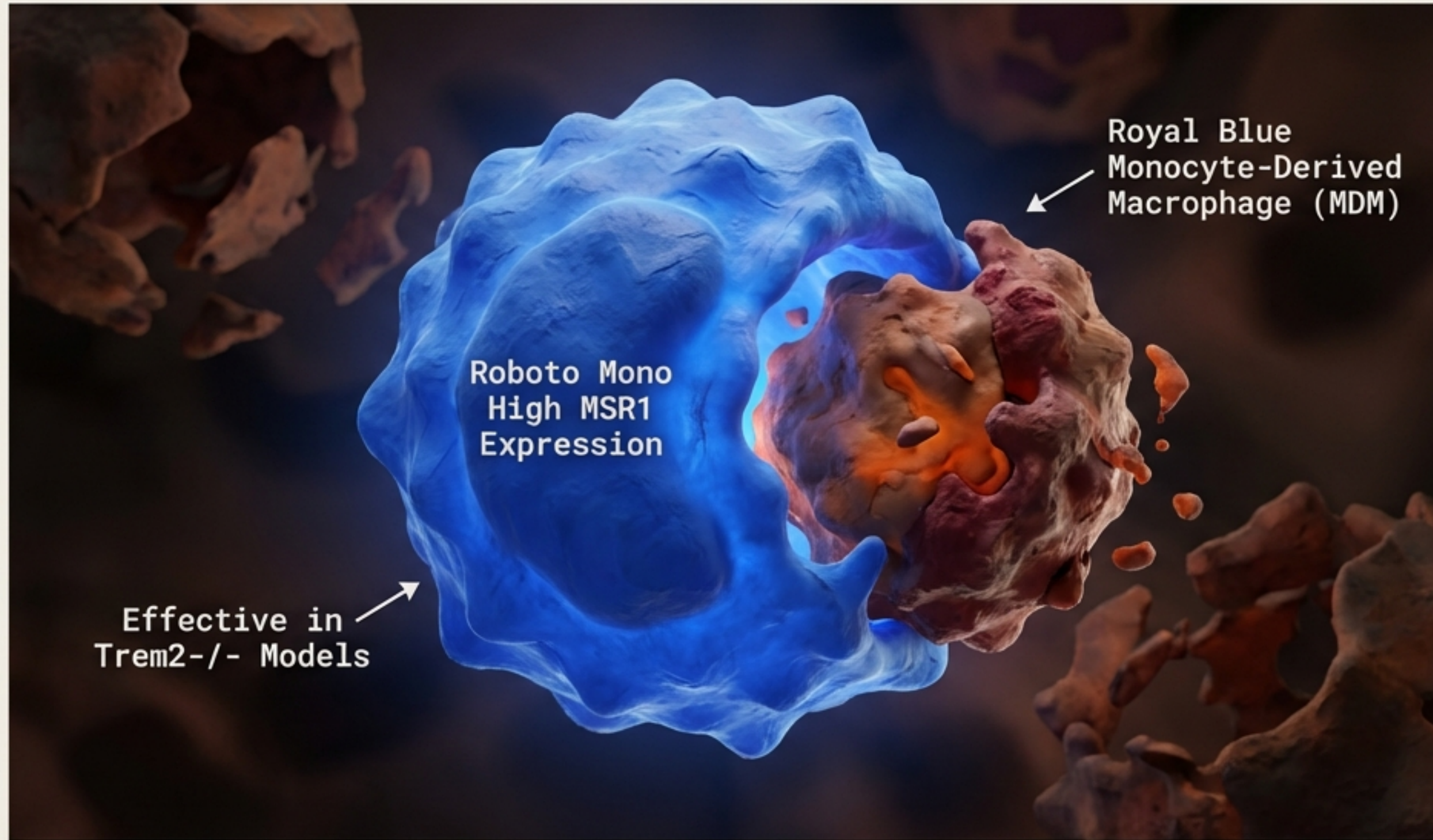
REINFORCEMENTS VS. RESIDENTS

BIOLOGICAL CATEGORY	Resident Senescent Microglia Local CNS Environment	Recruited MDMs Post PD-L1 Blockade
Origin & Environment	[COMPROMISED] Resident innate immune cells of the CNS. Subjected to prolonged exposure to hostile stimuli within the chronic diseased brain environment.	[FRESHLY MOBILIZED] Arise from circulating monocytes replenished by hematopoietic stem cells in the bone marrow or spleen. Freshly recruited from blood circulation.
Autophagic Flux & Metabolism	[IMPAIRED] Suffer from severe metabolic impairment. Characterized by lipid-drop accumulation and increased production of Reactive Oxygen Species (ROS).	[FUNCTIONAL] Act as essential reinforcements possessing high clearance capacity, contributing to the restoration of microglial autophagy flux.
Phenotypic State	[SENESCENT] Exhausted and senescent due to aging and sustained activation. Exhibit heavily reduced patrolling activity in the brain tissue.	[ACTIVE] Adopt an inflammation-resolving phenotype, actively fostering tissue repair and not subjected to long-term local stimulation.
Key Markers	[PATHOLOGICAL PROFILE] Loss of homeostatic receptors (P2RY12, TGFBR1). Show increased expression of genes such as TREM2, APOE, B2M, and CSF1.	[RESTORATIVE PROFILE] Express unique scavenger molecules, particularly high levels of macrophage scavenger receptor 1 (MSR1), required for disease modification.
Phagocytic Capacity	[DEFICIENT] Fall short in containing damage; frequently fail to clear accumulating proteins and escalating debris in chronic conditions.	[SUPERIOR] Perform highly efficient phagocytosis, rapidly clearing cellular debris and misfolded protein aggregates (e.g., amyloid-beta).
Cytokine Profile	[TOXIC] Contribute to inflammatory exacerbation through increased and sustained production of pro-inflammatory mediators.	[HEALING] Release crucial anti-inflammatory factors, creating a microenvironment that is permissive to recovery and neural regeneration.

Following PD-L1 blockade, freshly recruited Monocyte-Derived Macrophages (MDMs) bypass the exhausted local environment. Unlike senescent resident microglia, MDMs exhibit robust autophagic capacity, express high levels of scavenger receptors (MSR1), and secrete inflammation-resolving cytokines.

Data sources: PubMed, Nature Neuroscience, ResearchGate

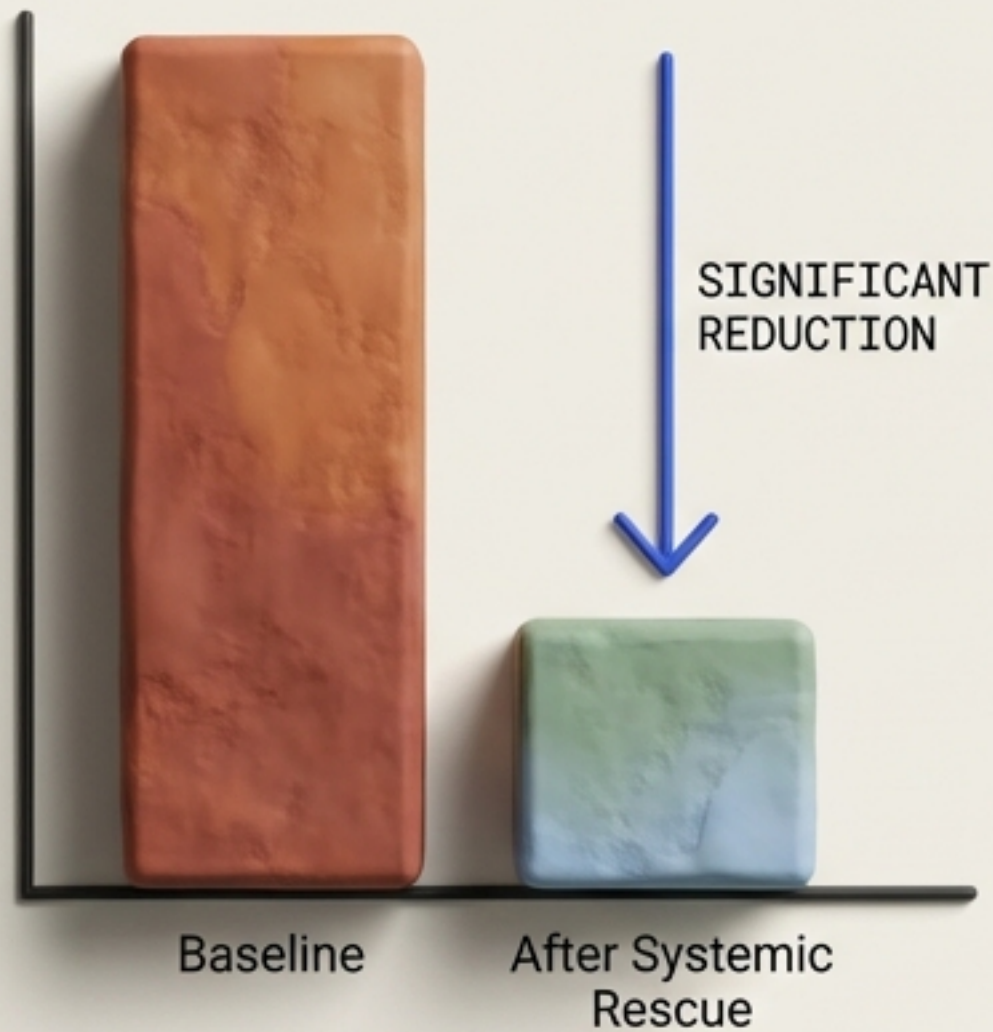
BYPASSING THE BROKEN MACHINERY



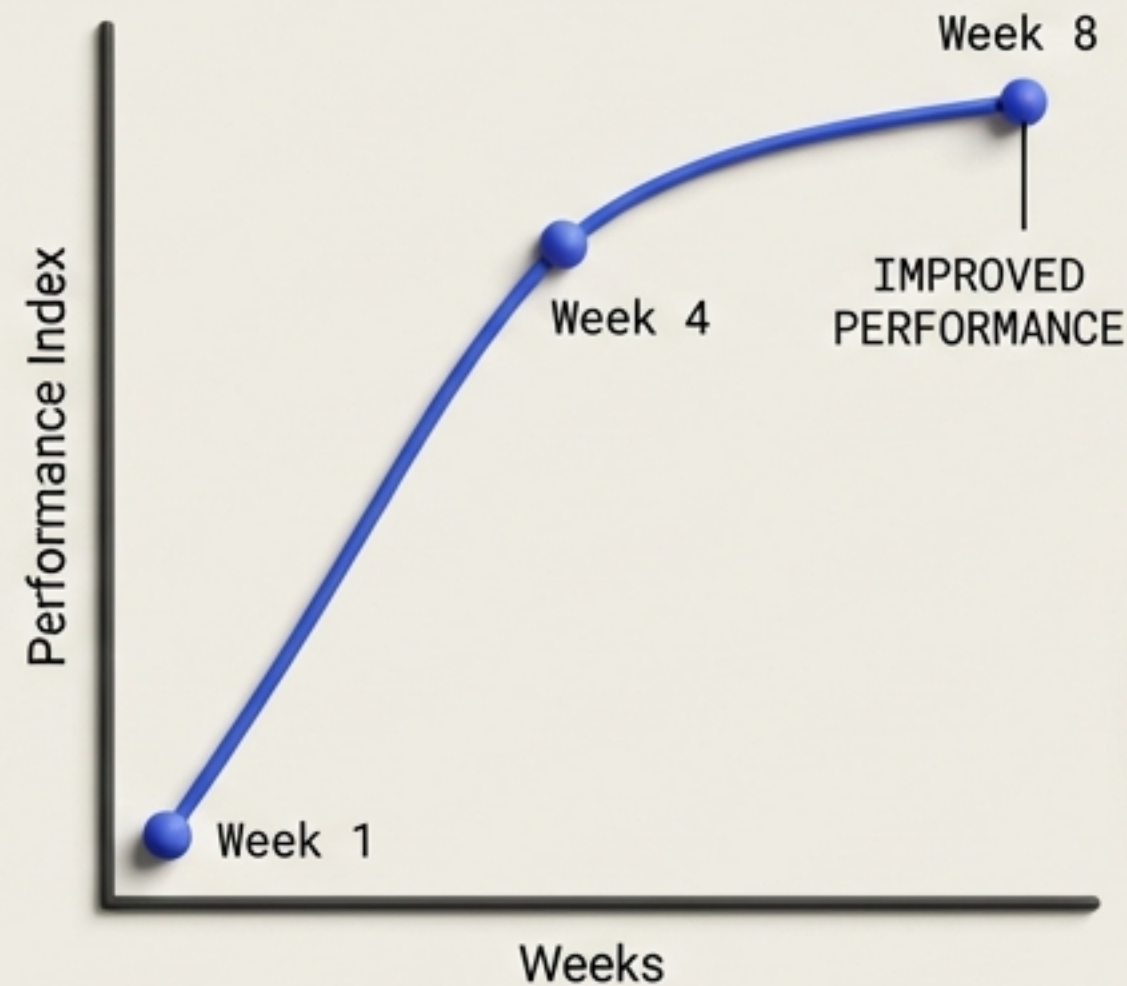
**WE DO NOT NEED TO FIX THE BROKEN MICROGLIAL TREM2 PATHWAY;
WE BYPASS IT ENTIRELY WITH PERIPHERAL IMMUNITY.**

RESTORING HOMEOSTASIS AND FUNCTION

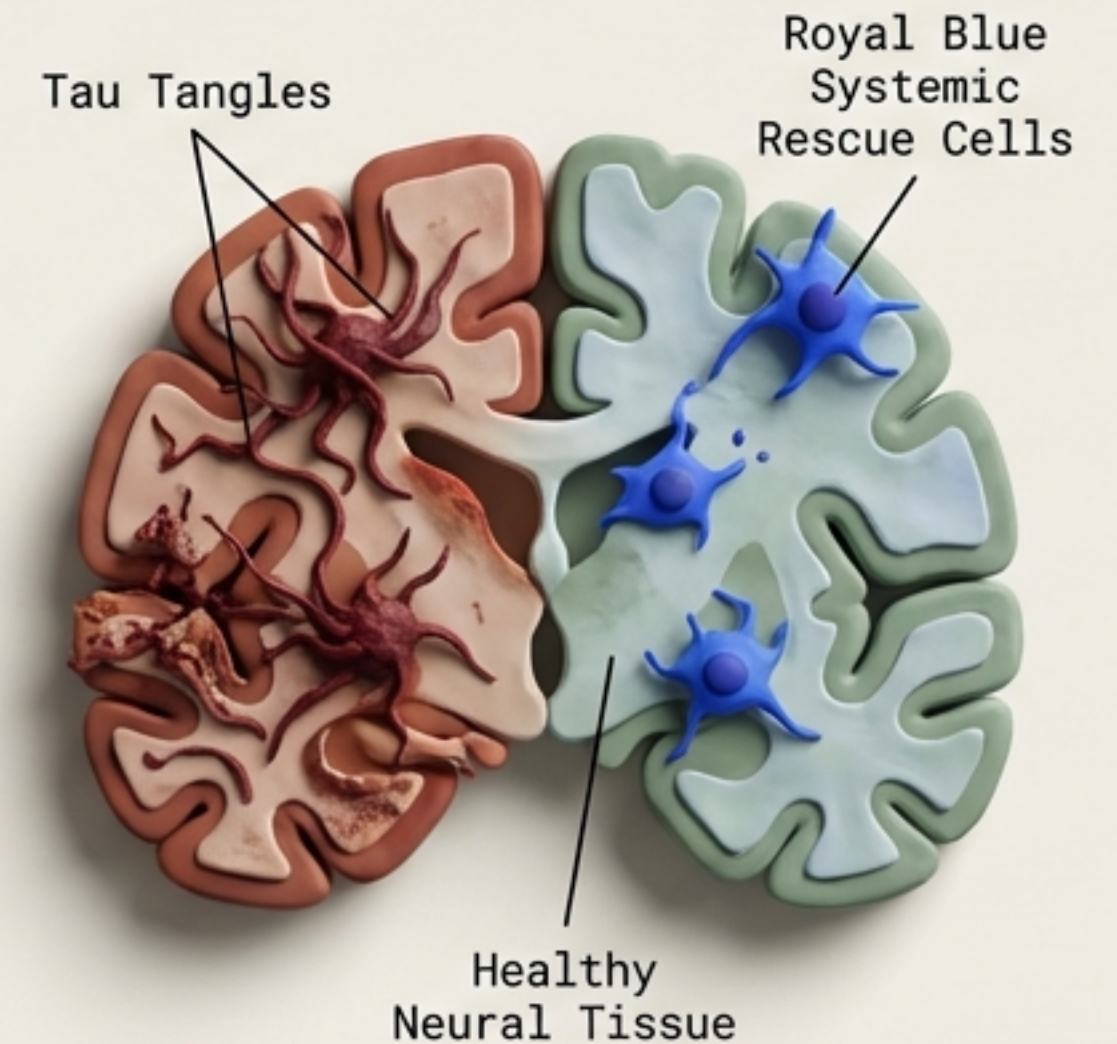
Reduced Plaque Load (5xFAD)



Cognitive Performance (Barnes Maze)



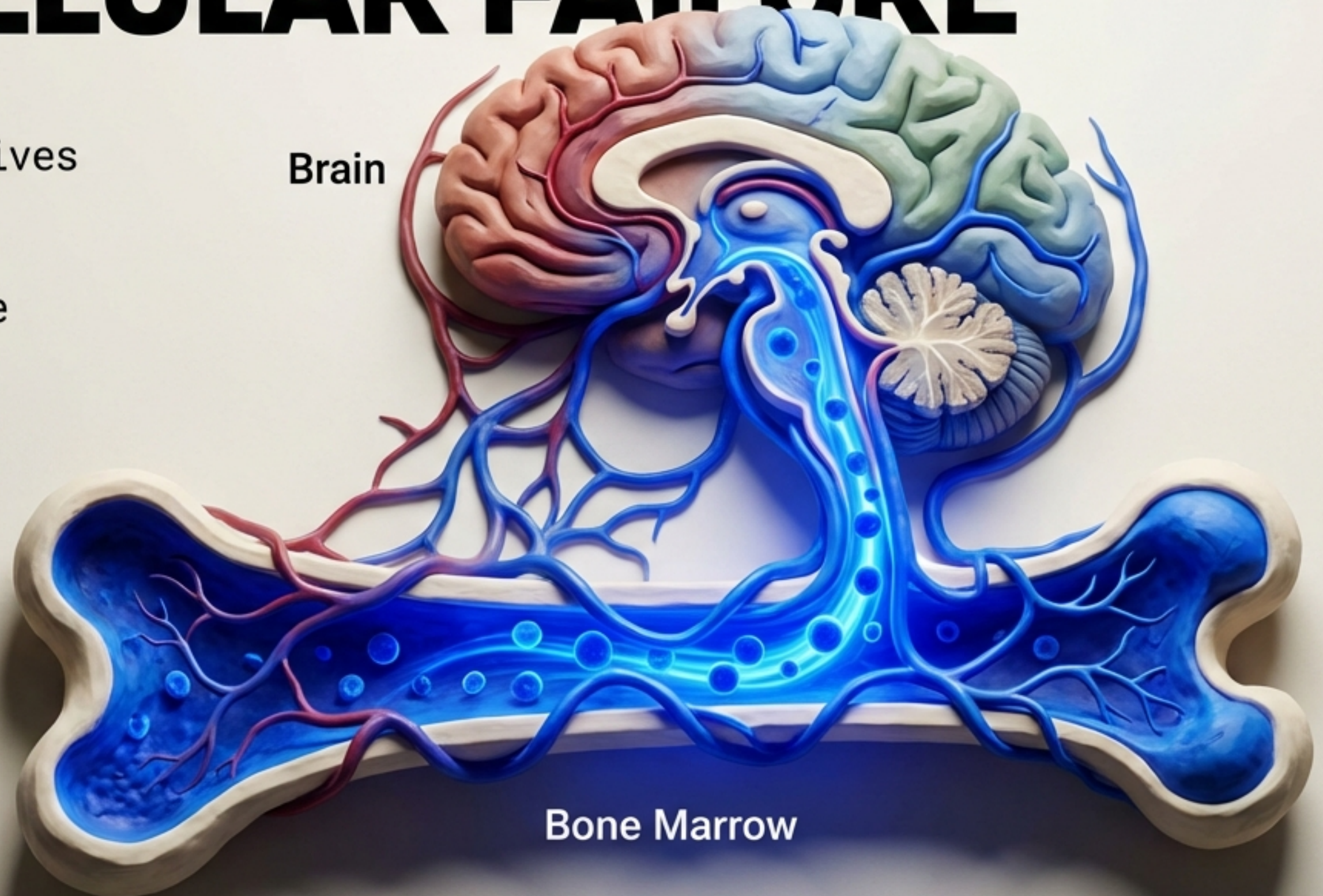
Clearance of Hyperphosphorylated Tau



Systemic rescue breaks the vicious cycle, allowing the brain to heal.

A SYSTEMIC SOLUTION TO A CELLULAR FAILURE

1. Autophagy failure drives neuroinflammation.
2. Microglial senescence acts as a vector of destruction.
3. Chronic pathology exhausts the bone marrow.
4. PD-L1 blockade mobilizes MDMs to restore order.



THE MIND IS RESCUED BY THE BODY

We cannot treat neurodegeneration in isolation.
The cure lies in harnessing the body's
wisdom to repair the brain.

Roboto Mono

BASED ON THE DOCTORAL THESIS: THE IMMUNOMETABOLIC NEXUS OF NEURODEGENERATION.