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THE ROLE OF CHRONIC INFLAMMATION ON AMYLOID BURDEN IN MS

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10.1136/jnnp-2014-309236.7

Alzheimer's disease (AD) is a degenerative disorder wherein β -amyloid deposition and inflammation are key pathological features. The complex interplay between inflammation and β -amyloid burden in AD is becoming increasingly recognised. To evaluate the influence of chronic inflammation on β -amyloid deposition, a cohort of pathologically confirmed multiple sclerosis (MS) cases ($n=67$) was compared to non-demented age- and sex-matched controls ($n=55$). Formalin-fixed paraffin embedded cortical tissue from the mesial temporal gyrus was immunostained for β -amyloid and myelin. Quantitative measures of β -amyloid burden in MS normal appearing grey matter (NAGM) and cortical lesions were compared to those derived from control NAGM. MS cases lying at the extremes of β -amyloid burden ($n=25$) were additionally immunostained for microglial inflammation. Preliminary data showed that β -amyloid burden was significantly reduced in MS NAGM compared to controls ($p=0.08$), with MS cortical lesions demonstrating significantly less β -amyloid compared to MS NAGM ($p<0.01$), particularly at the lesional border. Microglial activation was significantly less in the high compared to low amyloid groups ($p<0.05$). These findings suggest the chronic inflammatory milieu in the MS brain protects against β -amyloid deposition, with microglial activation playing a central role. Studies evaluating the relationship between MS-specific microglial activation and amyloid processing are warranted.