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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  $\beta$ -amyloid deposition and inflammation are key pathological features. The complex interplay between inflammation and  $\beta$ -amyloid burden in AD is becoming increasingly recognised. To evaluate the influence of chronic inflammation on  $\beta$ -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  $\beta$ -amyloid and myelin. Quantitative measures of  $\beta$ -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  $\beta$ -amyloid burden (n=25) were additionally immunostained for microglial inflammation. Preliminary data showed that  $\beta$ -amyloid burden was significantly reduced in MS NAGM compared to controls (p=0.08), with MS cortical lesions demonstrating significantly less  $\beta$ -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  $\beta$ -amyloid deposition, with microglial activation playing a central role. Studies evaluating the relationship between MS-specific microglial activation and amyloid processing are warranted.