

Supplemental Material

Truncated TDP-43 proteoforms diagnostic of frontotemporal dementia with TDP-43 pathology

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1 Supplemental methods

1.1 Materials

The following materials were obtained from the indicated commercial sources: ammonium persulfate [A3678], bicinchoninic acid protein assay kit [BCA1-1KT], Calcium chloride [10043-52-4], dithiothreitol (DTT) [D9779], ethanol [362808], ethylenediaminetetraacetic acid (EDTA) [E4884], formic acid [399388], iodoacetamide [I5161], N-lauroylsarcosine (sarkosyl) [61745], N,N,N0,N0-tetramethylethylenediamine [T9281], sodium chloride (NaCl) [S7653], sodium dodecyl sulfate (SDS) [L3771], Tween 20 [P1379] and urea [U5378] were obtained from Sigma-Aldrich (Canada). Acetonitrile (ACN) [BDH83640], acrylamide/bis-acrylamide solution [J63279], ammonium hydrogen carbonate (AHC) [A18566], bovine serum albumin (BSA) [0332], Coomassie G250 [0615], Eppendorf 1.5 mL Protein LoBind tubes [022431081], and Laemmli SDS sample buffer [J61337], Roche protease inhibitors [4693159001], tris [0826], and tris buffered saline (TBS) [97063-680] were obtained from VWR (Canada). Tosyl phenylalanyl chloromethyl ketone-treated (TPCK) trypsin [LS003744] was obtained from Worthington (USA). Clarity Max ECL substrate [1705062], filter paper [09-802-1A], and nitrocellulose membrane [1620115] were obtained from Bio-Rad. Chymotrypsin, TLCK-treated, mass spectrometry grade [90056], C18 extraction disks [2215] C18 silica [711025-100], methanol [A456-4], and molecular weight protein ladder [26616] were obtained from Fisher Scientific (Canada). Anti-phosphorylated-TDP-43 rat monoclonal antibody clone 1D3 [829901] was obtained from Biogen (USA). Horseradish peroxidase (HRP)-conjugated rabbit anti-rat IgG antibody [ab-6734] was obtained from Abcam (Canada). Oasis MCX uElution plates [186001830BA] were purchased from Waters (Canada). Heavy labelled peptides TDP₂₅₂₋₂₆₃ [arginine ¹³C and ¹⁵N-labeled, synthesized by New England Peptide] and TDP₂₇₆₋₂₉₃ lysine ¹³C and ¹⁵N-labeled, synthesized by Vivitide].

Equipment used in this analysis included centrifugal vacuum (Vacufuge plus, Eppendorf), gel imager (G:BOX Chemi XRQ, Syngene, USA), microvolume spectrophotometry (ND-8000, NanoDrop Technologies, USA), and ultrasonication probe (FB120110, Fisher Scientific). For discovery proteomics experiments, a nanoflow LC-quadrupole high resolution time of flight mass spectrometer (Easy nano LC 1000 LC, ThermoFisher Scientific; Bruker Impact II QTOF, Canada) was used. For biomarker verification experiments, a μ LC-triple quadrupole mass spectrometer (SCIEX M5 μ LC and QTRAP 6500, Canada), with an in-line 5 μ m C18, 20 \times 0.3 mm trap column (Luna, Phenomenex, USA), and 2.6 μ m XB-C18, 50 \times 0.3 mm microflow analytical column (Kintex, Phenomenex) were used.

1.2 Sample preparation

Brain tissue was homogenized using a pestle for 2 min in tris-EDTA (TE) buffer (10 mM tris-HCL and 1 mM EDTA, pH 7.5, and protease inhibitor cocktail) containing 10% sucrose, 0.8 M NaCl, and 2% Tween-20 (5 mL buffer/g tissue), incubated for 30 min at 24°C, and centrifuged at 100,000 x g for 30 min at 20°C; the remaining pellet was homogenized (following the same steps as above) in TE buffer containing 1% sarkosyl. The sarkosyl-insoluble pellet (i.e., the pathological TDP-43 fraction) was reconstituted in urea buffer (50 mM tris, pH 8.5, 8 M urea and 2% SDS), ultrasonicated (five 1 s pulses), and stored at -70°C before further use.

The brain tissue fraction enriched for TDP-43 pathology, both from individual brain tissue samples and pools (i.e., FTLN type A, B and C, FTLN-tau, AD, and unaffected controls), was normalized

by protein concentration using the bicinchoninic assay as per the manufacturer's instructions, then reduced (30 min incubation at 37°C with 1 µg DTT) and alkylated (20 min incubation with 5 µg of iodoacetamide in the dark). Subsequently, samples were separated via electrophoresis using 10% polyacrylamide gels under denaturing conditions, in duplicate, with one gel transferred to a nitrocellulose membrane for Western blot analysis, as previously described.^{1,2}

For gel electrophoresis, 40 µg for individual cases or 100 µg for pooled cases of total protein were loaded on the gel. Gels were fixed for 1 h (40% ethanol; 10% acetic acid); stained overnight (0.12% Coomassie G250, 10% ammonium sulphate, 10% phosphoric acid, 20% methanol); and de-stained in water overnight prior to imaging.

To prepare gel pieces for digestion, sequential incubations were performed at room temperature in 50% 25 mM AHC, 50% ACN, until gel pieces were transparent (overnight), and then the gel pieces were dehydrated in 100% ACN for 20 min. Gel pieces were then rehydrated in 50 mM AHC, digested overnight at 37°C using either trypsin or chymotrypsin. For the analysis of pooled samples, digestion was performed using 1 µg of TCPK-chymotrypsin (2 mM calcium chloride and 100 mM tris-HCl, pH 8) or 1 µg of TPCK-trypsin. For analysis of individual cases, 1 µg of TPCK-trypsin was used. Digestion was halted by adding 50 µL of 1% formic acid. The supernatant was removed and saved for analysis. Peptides were extracted by incubating for 20 min (with shaking at 1000 rpm) in 0.5% formic acid, then 40% ACN containing 0.1% formic acid, and then 100% ACN. Supernatants were combined and dried by vacuum centrifugation. Dried peptide extracts were reconstituted in 0.5% formic acid and desalted using C18 tips (prepared and used as previously described).³ Eluates for each sample were collected in a single tube and dried by vacuum centrifugation.

1.3 High resolution mass spectrometry

The following search parameters were used; semi-specific enzymatic cutting, maximum of 1 missed cleavage site, variable modifications of deamidation (+0.984016 @ N, Q), acetylation (@ protein N-term), and oxidation (+15.994915 @ M), and a mass tolerance of 20 ppm. Peptide FDR was calculated manually by sorting the data by the |log prob| parameter and calculating the percent of reverse-hits.

Quantitative analyses of TDP-43 proteoform concentration were based on the peptide TDP₂₇₆₋₂₉₃, as this was the most frequently observed peptide and of the commonly observed TDP-43 peptides had the highest signal intensity. For total truncated TDP-43 concentration, mid- and low-TDP peptide concentrations were combined via logistic regression. Proteoform correlations were done through comparing TDP₂₇₆₋₂₉₃ peptide concentrations; an outlier for the mid:low-TDP comparison was removed as it was 10-fold higher than all other data-points, limiting the interpretation of these data.

To rule-out in-source fragmentation of peptides with non-tryptic/chymotryptic cleavage sites, peptide retention time was compared between the fully-tryptic or fully-chymotryptic peptides and the respective non-fully-tryptic/chymotryptic peptide. If the fully-tryptic/chymotryptic and non-fully-tryptic/chymotryptic peptides have a similar retention time then in-source fragmentation is suspected as both peptides would have had to have similar structures to migrate similarly through the analytical column. If retention times are different, then in-source fragmentation is ruled-out. Peptides with one non-tryptic/chymotryptic cleavage site were further vetted by investigating the

literature for previous reports and enzymes that could create this TDP-43 cleavage site. Peptides with non-tryptic/chymotryptic cleavage sites with which in-source fragmentation could be ruled out and experimental evidence shows human enzymes could cleave at the respective site are referred to herein as “confident” *in vivo* proteolytic fragments, whereas sites with less evidence are referred to “potential” *in vivo* proteolytic cleavage sites.

1.4 Targeted mass spectrometry

1.4.1 Method development

Mass spectrometer parameters were optimized using tryptic digests of recombinant TDP-43 in buffer. Collision energy (CE) and declustering potential (DP) were optimized for each transition. The observed *m/z* of peptide precursor and product ions were verified using Skyline. Chromatography conditions were as follows; mobile phases A and B consisted of 0.1% formic acid in nano-pure grade water and 0.1% formic acid in LC-MS grade acetonitrile, respectively. A flow rate of 0.4 $\mu\text{L}/\text{min}$ and an analytical column temperature of 40 °C was used with the following gradient: ramp from 5–13% B from 0 to 1 min to 15% B by 3 min, to 30% B by 3.5 min, to 32% B by 5.5 min, to 45% B by 6 min, to 90% by 8.9 min, and to 5% from 9 to 11 min for re-equilibration.

1.4.2 Peptide quantification

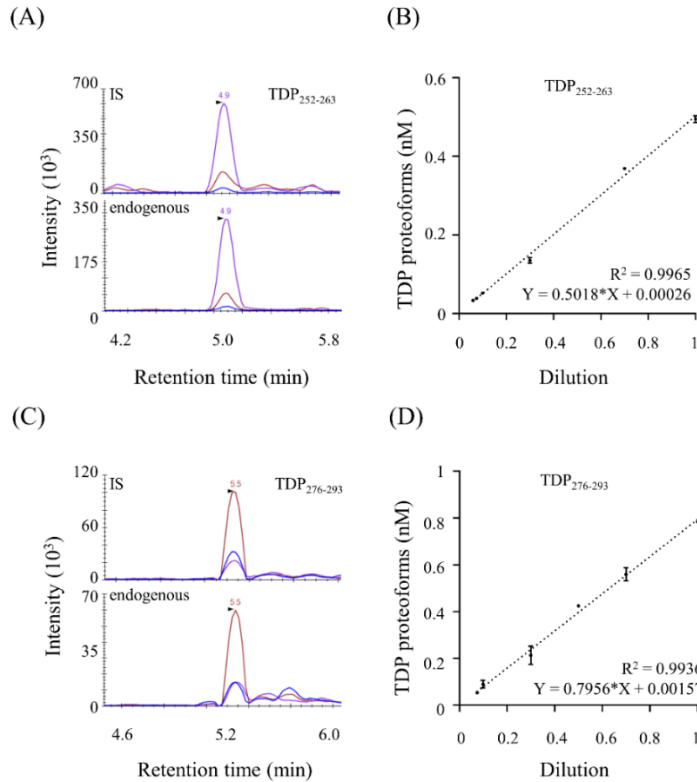
Quantification was performed via single-point calibration using a heavy-isotope labeled synthetic version of TDP_{252–263} and TDP_{276–293} as the IS; lyophilized IS peptides were solubilized with deionized water, and 5% ACN + 0.1% FA, respectively. IS was then aliquoted and stored at –80 °C. The IS was spiked into each sample post-digestion to a final concentration of 0.464 nmol/L TDP_{252–263} and 1.38 nmol/L TDP_{276–293}. Quantification of each monitored TDP-43 peptide was performed using single-point calibration of the respective IS peptide. Pooled human FTLD-TDP brain tissue spiked with IS was used for quality control (QC) material.

1.4.3 Method validation

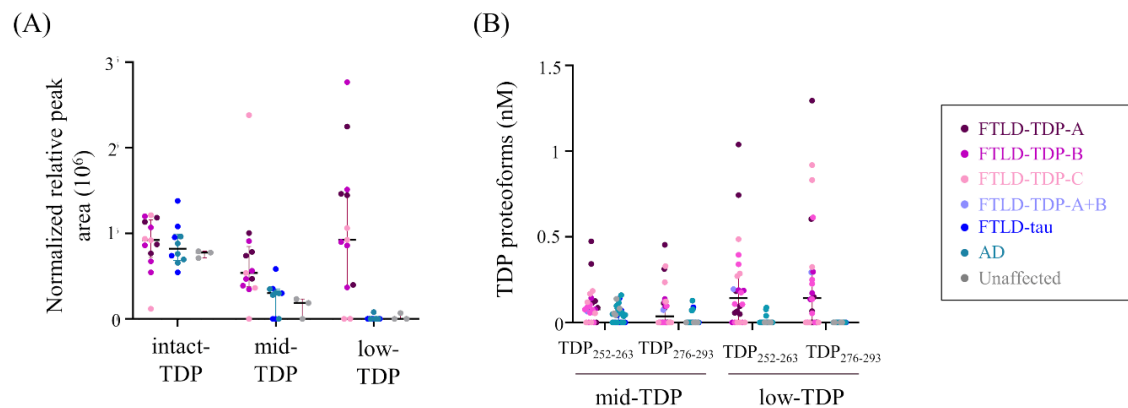
The Clinical and Laboratory Standards Institute Liquid Chromatography-Mass Spectrometry Methods C62-A guideline was used as a guide for the method validation experiments.⁴ Precision studies were performed by doing triplicate measurements of the QC, repeated on three days. Imprecision was shown as % coefficient of variation (CV). The criteria for the lower limit of the measuring interval (LLMI) was a S/N ratio ≥ 3 for the observed quantifier ion and a transition peak area ratio (PAR) within 15% of the expected peak area ratio (ePAR), where the ePAR was determined from previous analysis of TDP-43 standards.^{1,2} S/N was calculated as peak-to-peak within a 0.2 min retention time window of the signal peak. Linearity was assessed via a mixing study using brain tissue homogenate pools with high and low FTLD-TDP TDP-43 concentration (**Supplemental Figure 1**).

Imprecision was less than 10% for all concentrations tested for both peptides in both inter- and intra-assay comparisons (**Table 3**). This assay was linear from 0.033–0.494 nM for TDP_{252–263} and 0.053–0.633 nM for TDP_{276–293} with a lower limit of measuring interval of 0.033 nM (± 0.002) and 0.053 nM (± 0.003), respectively (**Supplemental Figure 1**).

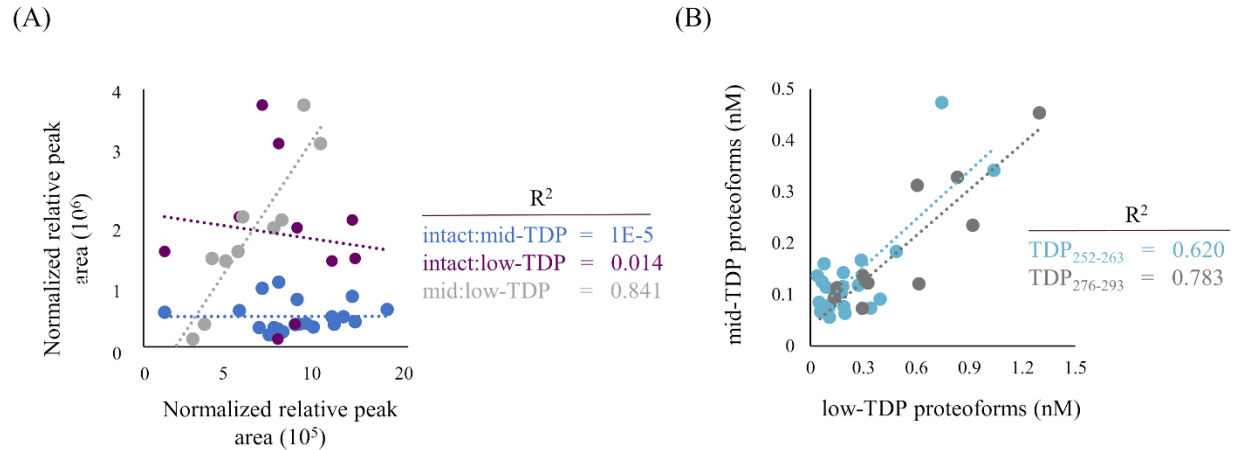
2 Supplemental figures



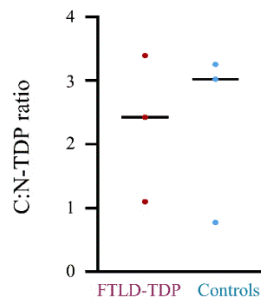
Supplemental Figure 1: Representative chromatograms and linearity of our targeted MRM method for absolute quantification of TDP-43 proteoforms. (A & C) Representative chromatograms from the analysis of human brain tissue with internal standards (IS). (B & D) Linearity of (B) TDP₂₅₂₋₂₆₃ and (D) TDP₂₇₆₋₂₉₃, mean and standard deviation shown.



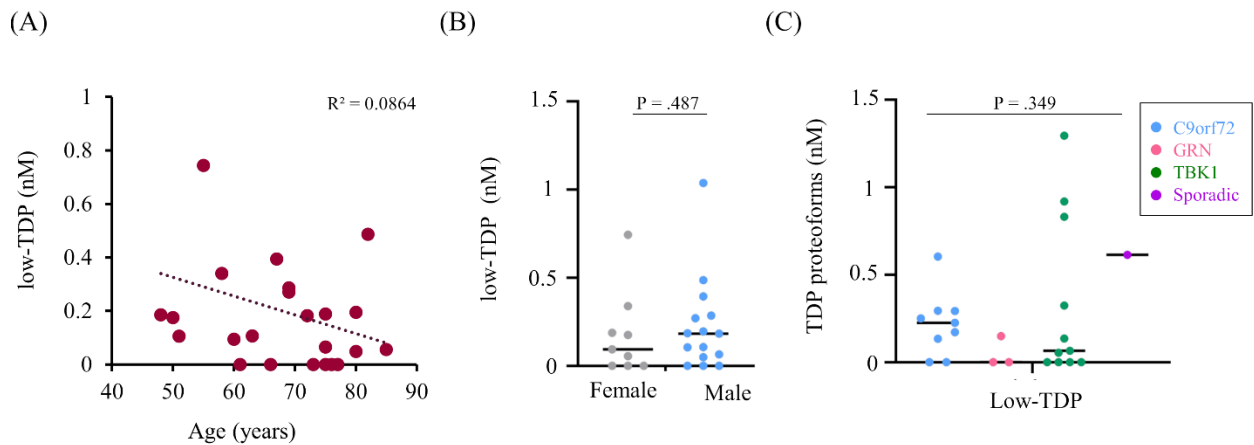
Supplemental Figure 2: TDP-43 proteoform concentration by neuropathological designation including FTLT-TDP subtype from the (A) the discovery (high resolution mass spectrometry) and (B) verification (targeted MRM) experiments demonstrating no clear trends by subtype.



Supplemental Figure 3: The concentration of truncated proteoforms did correlate with each other but not the concentration of intact TDP-43 as demonstrated in the regression analysis of data from (A) the discovery (high resolution mass spectrometry) and (B) verification (targeted MRM) experiments.



Supplemental Figure 4: The ratio of C-to-N-terminal TDP-43 peptides did not discriminate cases with and without TDP-43 pathology (data from analysis of pooled FTLD-TDP and control tissues).



Supplemental Figure 5: Investigations of the correlation/effects of low-TDP-43 concentration with (A) age at death, (B) sex, and (C) genetic status.

3 Supplemental tables

Supplemental Table 1: Characterization of cases analyzed in the discovery and verification phases.

Case	Sample type	Sex	Age at death	Genetic variant	IHC in the frontal cortex					TDP-43 in hippocampus	Discovery study		Verification study
					TDP	Ubiqu.	pTau	A β	α -synuclein		pools	individual	
1	FTLD-TDP-A	M	67	GRN	+	+	-	-	+	+	✓	✓	-
2	FTLD-TDP-A	M	72	GRN	+	+	-	-	-	+	✓	✓	✓
3	FTLD-TDP-A	M	60	no	+	+	-	-	-	+	✓	✓	✓
4	FTLD-TDP-A	F	85	GRN	+	+	-	+	-	+	✓	✓	✓
5	FTLD-TDP-B	F	50	C9orf72	+	+	-	-	-	+	✓	✓	✓
6	FTLD-TDP-B	M	77	no	+	+	-	-	-	+	✓	✓	✓
7	FTLD-TDP-B	M	63	no	+	+	-	-	-	+	✓	✓	✓
8	FTLD-TDP-B	M	51	no	+	+	-	-	-	+	✓	✓	✓
9	FTLD-TDP-B	F	58	C9orf72	+	+	-	-	-	+	✓	✓	✓
10	FTLD-TDP-C	M	73	no	+	+	-	-	-	+	✓	✓	✓
11	FTLD-TDP-C	M	82	no	+	+	-	-	-	+	✓	✓	✓
12	FTLD-TDP-C	F	76	no	+	+	-	+	-	+	✓	✓	✓
13	FTLD-TDP-C	M	69	no	+	+	-	-	-	+	✓	✓	✓
19	CBD	M	53	na	-	+	+	-	-	-	✓	✓	✓
20	CBD	M	75	na	-	+	+	-	-	-	✓	✓	-
21	PiD	F	66	na	-	+	+	-	-	-	✓	✓	✓
22	PSP	F	61	na	-	+	"	-	-	-	✓	✓	✓
23	PSP	M	81	na	-	+	+	+	-	+	✓	✓	✓
14	AD	M	88	na	-	+	+	+	-	-	✓	✓	✓
15	AD	F	70	na	-	+	+	+	-	-	✓	✓	✓
16	AD	M	62	na	-	+	+	+	-	-	✓	✓	✓
17	AD	F	84	na	-	+	+	+	-	-	✓	✓	✓
18	AD	F	75	na	-	+	+	+	-	-	✓	✓	✓
24	non-neurological	F	62	na	-	-	-	-	-	-	✓	✓	✓
25	non-neurological	F	91	na	-	-	-	-	-	-	✓	✓	✓
26	non-neurological	M	70	na	-	-	-	-	-	-	✓	✓	✓
27	FTLD-TDP-A	M	80	no	+	+	+	+	-	+	✓	-	✓

28	FTLD-TDP-C	F	61	no	+	+	-	-	-	+	✓	-	✓
29	non-neurological	F	73	na	-	+	-	+	-	-	✓	-	✓
30	FTLD-TDP-A	F	60	GRN	+	+	-	-	-	+	-	-	✓
31	FTLD-TDP-A	F	55	C9orf72	+	+	-	-	-	+	-	-	✓
32	FTLD-TDP-A+B	M	48	C9orf72	+	+	-	-	-	+	-	-	✓
33	FTLD-TDP-A	M	75	C9orf72	+	+	-	-	-	+	-	-	✓
34	FTLD-TDP-A + mod AD	M	80	C9orf72	+	+	-	+	-	+	-	-	✓
35	FTLD-TDP-A+B	M	77	C9orf72	+	+	mild	+	-	+	-	-	✓
36	mild FTLD- TDP-B	F	66	C9orf72	+	+	-	-	-	+	-	-	✓
37	FTLD-TDP-B	M	67	TBK1	+	+	-	+	-	+	-	-	✓
38	FTLD-TDP-A+B	F	75	C9orf72	+	+	+	+	-	+	-	-	✓
39	FTLD-TDP-C	M	69	no	+	+	-	-	-	+	-	-	✓
40	PSP	F	59	na	-	+	+	+	-	-	-	-	✓
41	PSP	M	75	na	-	+	+	-	-	-	-	-	✓
42	AD	F	79	na	-	+	+	+	-	-	-	-	✓
43	AD + CVD	F	79	na	-	+	+	+	-	-	-	-	✓
44	AD + DLB	M	82	na	-	+	+	+	+	-	-	-	✓
45	LBD, moderate AD	F	75	na	-	+	+	+	+	-	-	-	✓
46	PSP	M	84	na	-	+	+	-	-	-	-	-	✓
47	AD + DLB	M	92	na	-	+	+	+	+	-	-	-	✓
48	AD	M	65	na	-	+	+	+	-	-	-	-	✓
49	AD	F	73	na	-	+	+	+	-	-	-	-	✓
50	AD	M	79	na	-	+	+	+	-	-	-	-	✓
51	PSP + DLB	M	74	na	-	+	+	-	+	-	-	-	✓
52	AD + DLB + TDP	M	82	na	-	+	+	+	+	+	-	-	✓
53	AD + DLB + TDP	F	72	na	-	+	+	+	+	+	-	-	✓

Supplemental Table 2: Transitions monitored in the quantitative MRM method.

Peptide	Q1 ion (m/z)	Q1 charge state	Q3 ion (m/z)	Fragment ion	DP (V)	CE (V)
TDP ₂₅₂₋₂₆₃	417.90	3+	541.29	y ₁₀	80	18
			448.24	y ₈	80	25
TDP ₂₅₂₋₂₆₃	420.57	3+	545.29	y ₁₀	80	18
			452.24	y ₈	80	23
TDP ₂₇₆₋₂₉₃	863.89	2+	676.31	y ₁₄	60	42
			993.45	y ₁₀	60	45
TDP ₂₇₆₋₂₉₃	868.89	2+	681.32	y ₁₄	60	42
			1003.46	y ₁₀	60	45

Supplemental Table 3: Upper and lower limit of the measuring interval (ULMI and LLMI, respectively) and precision of the quantitative MRM method.

Peptide	Point	Concentration (nM)	CV (%)
TDP ₂₅₂₋₂₆₃	ULMI	0.49	1.77
	LLMI	0.04	3.34
TDP ₂₇₆₋₂₉₃	ULMI	0.78	0.60
	LLMI	0.05	9.10

Supplemental Table 4: TDP-43 peptides identified in published discovery proteomics studies that investigated human central nervous system tissue.

TDP-43 residues	C or N term*	TDP-43 specific peptide	ISF [†]	known enzyme cleavage [‡]		MW gel fraction	Maximal predicted MW [¶]	Gel fraction matches predicted MW [§]	Disease type	ALS and/or FTLN specific [#]	Ref.
				predicted	empirical						
208-nd	C	✓	nd	✓	✗	22	21-40	✓	FTLD-U	nd	5
276-291	N	✓	nd	✗	✓	39-43	33-155	✓	FTLD-U	✓	6
230-256	N	✓	nd	✓	✗	25-26	29-141	✓	ALS	nd	7
257-276	C	✓	nd	✓	✗	25-26	16-18	✗	ALS, AD	✗	7
175-187	C	✓	nd	✗	✗	Not reported	25-79	N/A	ALS, AD	✗	7
219-227	C	✓	nd	✓	✓	23	20-39	✓	FTLD-U	nd	8
247-251	C	✗	nd	✓	✗	23	17-19	✓	FTLD-U	nd	8

* *In vivo* cleavage site (i.e., non-tryptic/chymotryptic site) on the N- or C-terminus of the peptide

[†] In source fragmentation (ISF) ruled out (✓) or in (✗) using retention time differences and relative alterations in hydrophobicity

[‡] Predicted or empirical evidence of human enzymatic cleavage site based on ExPASy data and previously published experiments, respectively

[¶] Peptide maximal molecular weight (without – with maximal predicted PTMs) and including empirical evidence

[§] Molecular weight of the protein sequence based on the *in vivo* truncation site is consistent with the gel electrophoresis band region from which the peptide was found, including consideration of other additive potential post-translational modifications (e.g., phosphorylation)

[#] Compared to relevant controls and found only in FTLN-TDP or ALS cases

4 References

- [1] Pobran TD, Forgrave LM, Zheng YZ, Lim JGK, Mackenzie IRA, DeMarco ML. Detection and characterization of TDP-43 in human cells and tissues by multiple reaction monitoring mass spectrometry. *Clinical Mass Spectrometry*. 2019;14:66-73.
- [2] Pobran TD, Yang D, Mackenzie IRA, DeMarco ML. Aptamer-based enrichment of TDP-43 from human cells and tissues with quantification by HPLC-MS/MS. *J Neurosci Methods*. 2021;363:109344.
- [3] Ishihama Y, Rappsilber J, Andersen JS, Mann M. Microcolumns with self-assembled particle frits for proteomics. *J Chromatogr A*. 2002;979(1-2):233-9.
- [4] Clinical & Laboratory Standards Institute. Liquid chromatography-mass spectrometry methods; approved guideline: CLSI document C62-A. Clin Lab Standards Inst. 2014.
- [5] Igaz LM, Kwong LK, Chen-Plotkin A, Winton MJ, Unger TL, Xu Y, et al. Expression of TDP-43 C-terminal fragments in vitro recapitulates pathological features of TDP-43 proteinopathies. *J Biol Chem*. 2009;284(13):8516-24.
- [6] Herskowitz JH, Gozal YM, Duong DM, Dammer EB, Gearing M, Ye K, et al. Asparaginyl endopeptidase cleaves TDP-43 in brain. *Proteomics*. 2012;12(15-16):2455-63.
- [7] Feneberg E, Charles PD, Finelli MJ, Scott C, Kessler BM, Fischer R, et al. Detection and quantification of novel C-terminal TDP-43 fragments in ALS-TDP. *Brain Pathol*. 2021;31(4):e12923.
- [8] Nonaka T, Kametani F, Arai T, Akiyama H, Hasegawa M. Truncation and pathogenic mutations facilitate the formation of intracellular aggregates of TDP-43. *Hum Mol Genet*. 2009;18(18):3353-64.