

Overlapping mechanisms in HIV cognitive disorders and Alzheimer's disease





A β oligomers are elevated in the brains of HIV(+) cases. Paraffin-embedded



tissue sections from hippocampus of HIV(-) and HIV(+) individuals were prepared for immunofluorescent analysis and visualized by laser confocal microscopy. Representative images are shown from hippocampal sections triplelabeled for A β oligomers (red), MAP2 (green), and nuclei (blue). Red and green colocalization appears yellow. Credit: Stern et al., *JNeurosci* (2018)

A protein involved in Alzheimer's disease (AD) may be a promising target for treating neurological disorders in human immunodeficiency virus (HIV) patients, suggests a study published in *JNeurosci* of rat neurons and brain tissue from deceased humans. The research shows that the two conditions may damage neurons in similar ways.

Although HIV-associated neurological disorders (HAND) and AD have symptoms in common, whether they also share underlying mechanisms of disease progression is controversial because HAND patients do not exhibit the amyloid plaques that are characteristic of AD. To address this question, Kelly Jordan-Sciutto and colleagues investigated the role of a well-known AD protein— β -site <u>amyloid precursor protein</u> cleaving enzyme 1 (BACE1)—in HAND.

The researchers found elevated levels of BACE1 and A β oligomers—the compound thought to be responsible for neuronal damage in AD—in postmortem <u>brain tissue</u> of HIV-positive humans. Treating rat neurons with HIV-infected white blood cells from healthy humans revealed similar mechanisms of neurotoxicity.

More information: BACE1 mediates HIV-associated and excitotoxic neuronal damage through an APP-dependent mechanism, *JNeurosci* (2018). DOI: 10.1523/JNEUROSCI.1280-17.2018



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