

Local calcium accumulations promote phagocyte-mediated synapse removal in cortical neuroinflammation

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1 **ABSTRACT**

2 Cortical pathology contributes to chronic cognitive impairment of patients suffering from the
3 neuroinflammatory disease multiple sclerosis (MS). How such gray matter inflammation affects neuronal
4 structure and function is not well understood. Here we use functional and structural *in vivo* imaging in a
5 mouse model of cortical MS to demonstrate that bouts of cortical inflammation disrupt cortical circuit
6 activity coincident with a widespread, but transient loss of dendritic spines. Spines destined for removal
7 show local calcium accumulations and are subsequently removed by invading macrophages or activated
8 microglia. Targeting phagocyte activation with a new antagonist of the colony-stimulating factor 1
9 receptor prevents cortical synapse loss. Overall, our study identifies synapse loss as a key pathological
10 feature of inflammatory gray matter lesions that is amenable to immunomodulatory therapy.

11

12 **KEYWORDS:** Multiple sclerosis, neuroinflammation, gray matter pathology, microglia,
13 macrophages, synapse loss, calcium imaging, *in vivo* imaging, two-photon microscopy,
14 neuroprotection

1 INTRODUCTION

2 Multiple sclerosis (MS) is a common and severe inflammatory disease of the central nervous system
3 (CNS), clinically characterized by distinct phases. In most cases MS is initially dominated by bouts of
4 acute neuroinflammation that result in formation of focal white matter lesions and can be targeted
5 therapeutically ¹. In contrast, the later progressive phase of the disease remains largely refractory to
6 current therapeutic interventions and clinically appears reminiscent of classical neurodegenerative
7 conditions. Indeed, it is increasingly recognized that pathology in the gray matter including the cortex is
8 central to the progression of MS ². Gray matter pathology correlates with accruing disability, predicts
9 conversion to progressive MS and explains the increasing cognitive deficits that MS patients with
10 advanced disease experience ³⁻⁵. Despite this profound clinical importance, our understanding of the
11 mechanisms underlying cortical pathology in progressive MS remains poor, in part because modelling
12 gray matter inflammation has been difficult. Moreover, the neuroimaging and neuropathology
13 approaches used thus far provide insufficient spatial and temporal resolution to unravel the
14 neurodegenerative mechanisms resulting from cortical inflammation.

15 Gray matter pathology in progressive MS is characterized by inflammation dominated by innate
16 immune cells, extensive loss of cortical myelin and some neuronal cell death ^{2,6,7}. Of note, synapse loss
17 might be a key neuronal pathology in such gray matter lesions as it occurs widespread throughout both
18 the demyelinated, as well as the non-demyelinated, i.e. “normal-appearing” gray matter ^{8,9}. Thus, in
19 cortical MS, just as in classical neurodegenerative diseases, the synapse might be the initiation site of
20 neuronal damage. However, thus far it remains largely unknown, whether such synapse loss in cortical
21 MS has a local functional correlate, how it is mediated, whether it is reversible, and if or how it could be
22 prevented by appropriate therapeutic intervention.

1 *In vivo* imaging of the mouse cortex allows assessing local circuit function ¹⁰, the corresponding
2 structural correlates ¹¹ as well as the cellular mechanisms of neurodegeneration ^{12,13}. With the recent
3 development of rodent models of cortical neuroinflammation by others and us ^{7,14-16}, imaging of MS-
4 related pathology in cortical circuits has become possible. Here we interrogated the structural and
5 functional neuronal consequences of such inflammatory changes using a range of *in vivo* imaging
6 modalities. We show that widespread synapse loss is induced in the inflamed mouse cortex, which
7 mimics cortical MS lesions and surrounding gray matter. This synapse loss was present across cortical
8 layers, preferentially affected excitatory inputs and was accompanied by diminished neuronal activity.
9 Once cortical inflammation receded, synaptic connectivity recovered and cortical neurons re-established
10 their original firing patterns. Notably, in active inflammatory lesions, spines characterized by local
11 calcium overload were preferentially removed – with the removal process being mediated by activated
12 microglia, as well as infiltrating macrophages. Finally, blunting the activation, invasion and phagocytic
13 activity of these immune cells by blocking signaling through the colony-stimulating factor 1 receptor
14 (CSF1-R) protected synapses from removal, suggesting that phagocyte-mediated synapse pruning might
15 be a target to prevent progression of cortical MS pathology.

16 **RESULTS**

17 **Widespread synapse loss is induced in a mouse model of cortical MS**

18 To induce neuroinflammation in the mouse cortex, we adapted a targeted model of cortical MS
19 pathology previously developed in rats ^{14,15}. We stereotactically injected interferon gamma (IFN γ) and
20 tumor necrosis factor alpha (TNF α), pro-inflammatory cytokines highly expressed in the meninges of
21 progressive MS patients ^{15,17}, into the somatosensory cortex of mice that were previously immunized
22 with myelin-oligodendrocyte glycoprotein (MOG, **Figure 1a**). This resulted in the formation of cortical
23 lesions that extended subpially to both hemispheres (**Figure 1b**) thus mimicking the widespread cortical
24 pathology in progressive MS. Like their counterparts in human MS ^{7,18}, these cortical lesions were

1 characterized by phagocyte activation and modest T cell infiltration causing extensive myelin loss with
2 relative preservation of axons (**Supplementary Figure 1**). To explore, whether such experimental gray
3 matter lesions also reproduce the pervasive synaptic pathology observed in MS cortex⁸, we reconstructed
4 the dendrites of sparsely labeled layer III and layer V cortical projection neurons in *Thy1-GFP-M x*
5 *BiozziABH* mice (**Figure 1c-1e**). We found that the density of dendritic spines was significantly reduced
6 in both layers (**Figure 1f and 1g**) at the acute stage of the cortical MS (c-MS) model (3 days post cytokine
7 injection, d3 pci). Spine loss was observed ipsi- and contralaterally to the cytokine injection and was
8 absent in mice that received either MOG immunization or cytokine injection alone (**Supplementary**
9 **Figure 2**). Notably, spine loss was reversible, and spine density spontaneously recovered (**Figure 1h**).
10 Electron microscopy (EM) confirmed the transient reduction of cortical synapse density (**Figure 1i and**
11 **1j**), indicating that synapse loss is not restricted to cortical projection neurons, but rather a global feature
12 of the inflamed cortex. While synapse loss thus seemed to be present in different neuronal cell
13 populations, it did not appear to affect all synapses equally, as quantitative immunofluorescence analysis
14 revealed a preferential loss of excitatory synapses, while the density of inhibitory synapses remained
15 largely unchanged (**Figure 1k-1n**). This differential synapse loss resulted in a marked shift of the ratio
16 between excitatory and inhibitory inputs and suggests that inhibition might dominate in the inflamed
17 cortex (**Figure 1o**).

18 **Cortical inflammation results in reversible neuronal silencing**

19 A transient predominance of inhibition predicts a parallel reduction in cortical activity. To test this
20 prediction, we performed chronic calcium imaging in the somatosensory cortices of lightly anaesthetized
21 mice using recombinant adeno-associated virus (rAAV)-expressed GCaMP6s. We recorded spontaneous
22 calcium activity in populations of individual layer II/III neurons from before cortical lesion induction (4
23 days before cytokine injection), to the peak of synapse loss (d3 pci) and finally to the synapse recovery
24 phase (d10 and 17 pci; **Figure 2a** and **Supplementary Movie 1**). We observed a shift towards lower

1 frequencies of calcium transients with a significant drop in mean activity in acute gray matter lesions
2 (**Figure 2b** and **2c**) consistent with neuronal silencing as a consequence of lost excitatory synaptic input
3 ¹⁰. In parallel, we observed a concomitant silencing and spine density reduction of the apical dendrites
4 of layer V projection neurons that we recorded and reconstructed in *Thy1-GCaMP6fx BiozziABH* activity
5 reporter mice ¹⁹ in the presence of cortical inflammation (**Supplementary Figure 3**).

6 Neuronal activity levels subsequently recovered in parallel with the restoration of synaptic
7 connectivity (**Figure 2b** and **2c**). Activity changes are specific for the c-MS model, as no such alterations
8 were observed in mice that received sham or cytokine injections only (**Figure 2c** and **Supplementary**
9 **Figure 4**). Notably, in contrast to activity and synapse loss, which recovered within two weeks, myelin
10 loss only partially reverted over this time period as evaluated by spectral confocal reflectance microscopy
11 (SCoRe) imaging ²⁰ and ultrastructural analysis (**Supplementary Figure 5**). Tracking activity levels of
12 individual neurons over time further indicated that neurons that were more active before lesion induction
13 typically resumed a similarly high activity level after recovery (**Figure 2d**). Moreover, when we
14 compared the activity of individual neurons at d17 after the induction of cortical inflammation to their
15 pre-lesion activity pattern, we found that these levels were as similar to each other as for neurons
16 measured over the same time interval in sham injected mice (**Figure 3a**). This suggests that the inputs
17 that determine the level of activity are either resilient or can be restored. To assess, whether only the
18 average frequency of firing was robust across a bout of neuroinflammation (e.g. due to some intrinsic
19 property of the individual neurons or homeostatic plasticity), or whether such robustness also extended
20 to firing patterns across individual cells (e.g. due to re-emergence of the pre-lesion micro-circuitry), we
21 analyzed the structure of pairwise correlations of individual neuronal activity patterns over different
22 imaging sessions before, during and after cortical neuroinflammation (**Figure 3b-3d**). Our results show
23 that the session-to-initial-session similarity (r_{signal}) drops significantly during acute cortical inflammation
24 (at d3 pci) compared to sham-injected mice, but during the resolution phase (at d10 and 17 pci; **Figure**

1 **3e)** approaches control levels of correlation. This indicates a remarkable robustness of neuronal circuits
2 - either due to resilience or precise restoration of critical inputs – when confronted with transient
3 inflammatory disruption ¹⁰.

4 **Persistent local calcium accumulations predict spine loss**

5 Given its functional significance, we explored how synapse loss is induced in the inflamed gray
6 matter and how such damage remains restricted to a subset of spines, while leaving the dendrite and
7 many neighboring spines intact. Disturbances in calcium homeostasis have been shown to signal
8 incipient loss of axons or dendrites ^{12,21,22}. Therefore, we explored whether local calcium dysregulation
9 was apparent at dendritic spines in inflamed cortex using rAAV-mediated expression of the ratiometric
10 calcium sensor Twitch-2b ²³ in a subset of cortical neurons. *In vivo* multiphoton imaging allowed us to
11 record spine calcium levels in the apical dendritic tufts at a time when substantial synapse loss (d3 pci)
12 was apparent in the c-MS model (**Figure 4a** and **4b**). About 6 % of spines in the inflamed cortical tufts
13 indeed displayed a localized calcium overload ($> \text{mean} + 3 \text{ SD}$ of control spines; **Figure 4c** and **4d**),
14 while calcium levels in neuronal somata and the vast majority of dendrites remained unchanged
15 (**Supplementary Figure 6**). Notably, fast imaging of spine calcium dynamics revealed that high calcium
16 spines showed a continuous elevation of basic calcium levels on top of which similar fluctuations were
17 superimposed in both high and low calcium spines (**Figure 4e**). These observations are consistent with
18 a persistent local accumulation of calcium that occurs independently of altered synaptic activity.

19 To better understand the relation between local calcium accumulations and spine loss, we tracked
20 the fate of spines over time (**Figure 4 f-h**). Our results showed that the probability for spine removal rose
21 with increasing calcium concentrations in the spines. When we then further separated the „high risk“
22 spines (with calcium levels $> \text{mean} + 3 \text{ SD}$ of the control population) in two groups, based on whether
23 the calcium accumulation was limited to the spine or extended to the adjacent dendritic shaft, we

1 observed that dendritic calcium overload coincided with a major increase in the spine removal rate
2 (**Figure g**).

3 In parallel to high calcium spine removal, several previously unaffected spines showed a rise in
4 calcium during our observation time, creating a stable steady-state fraction of calcium high spines
5 (**Figure 4f** and **4h**). This suggests a local and dynamic process of postsynaptic calcium overload that
6 leads to the loss of ~1 % of cortical spines per hour. Within one day, this rate can nearly account for the
7 total spine loss observed in the c-MS model (~30 %; **Figure 1** and **Figure 4b**), matching the transient
8 nature of the acute inflammatory environment.

9 To study whether the local rise in calcium was indeed an important driver of spine removal, we
10 buffered extracellular calcium by local EGTA application²² to cortical MS lesions in vivo and measured
11 the resulting calcium dynamics and spine turn-over. Extracellular calcium buffering reduced the
12 appearance rate of new high calcium spines, improved the probability of pre-existing high calcium spines
13 to re-establish calcium homeostasis and significantly decreased the rate of spine loss (**Figure 4i**). Taken
14 together, these results indicate that local calcium accumulations destabilize spines in the inflamed gray
15 matter and promote their subsequent removal.

16 **Microglia and monocyte-derived macrophages execute synapse removal**

17 We next assessed, which cells execute synapse removal in inflamed cortex. Mononuclear phagocytes
18 are candidates, as the local activation of microglial and the infiltration of monocyte-derived macrophages
19 coincides with synapse loss in the c-MS model (**Supplementary Figure 7**). To evaluate the contribution
20 of these cells to synapse loss, we quantified synapse phagocytosis by confocal 3D reconstruction of brain
21 tissue from mice with genetically labeled phagocytes (microglia, CX₃CR-1^{GFP}; invading macrophages,
22 Ccr2^{RFP})²⁴ stained for presynaptic (Synapsin-1), postsynaptic (PSD95 and Homer-1) and lysosomal
23 (LAMP1) markers (**Figure 5a** and **5b**) and confirmed synapse uptake by EM (**Figure 5d**). Quantitative

1 analysis showed a marked increase in engulfed pre- and postsynaptic material (both within and outside
2 the lysosomal compartment) in microglial cells in the c-MS model compared to control gray matter
3 (**Figure 5c** and **5f**). Furthermore, monocyte-derived macrophages contained similar amounts of pre- and
4 postsynaptic material as microglial cells (**Figure 5e** and **5g**). Taken together these results indicate that
5 local microglial cells and infiltrating monocyte-derived macrophages collaboratively execute synapse
6 removal in inflamed gray matter.

7 **Targeted interference with CSF1 signaling prevents synapse loss in the c-MS model**

8 Finally, we explored whether phagocyte-mediated synapse removal could be targeted
9 therapeutically using a newly developed inhibitor of CSF1 signaling²⁵. While such inhibitors lead to the
10 depletion of microglial cells at high concentration²⁶, at lower concentration, as used here, they inhibit
11 phagocyte activation and limit synapse loss in neurodegenerative disease models^{25,27}. Indeed, systemic
12 application of the CSF1-R inhibitor during cortical lesion formation rescued synapse pathology in the c-
13 MS model (**Figure 6a-c**). This therapeutic effect appeared to be primarily mediated by an altered innate
14 immune response, as no apparent effects on T cell infiltration in the cortical gray matter were observed
15 (**Supplementary Figure 8**). To further interrogate the effects of CSF1-R inhibition on phagocyte
16 responses, we FACS-sorted the following phagocyte populations from the inflamed CNS of *Ccr2^{RFP/wt}* x
17 *BiozziABH* mice treated with either the CSF1-R inhibitor or vehicle solution (**Figure 6d** and **6e**):
18 CD45^{int}/CD11b^{int} cells, which correspond to resting microglial cells, as well as CD45^{high}/CD11b^{high}
19 activated phagocytes. The latter we further differentiated in two subpopulations based on RFP
20 expression, namely *Ccr2^{RFP}*-positive (*Ccr2^{pos}*) cells, which likely represent recently infiltrated
21 (monocyte-derived) phagocytes vs. *Ccr2^{RFP}*-negative (*Ccr2^{neg}*) cells, presumed to be locally activated
22 phagocytes²⁴. FACS analysis of these populations showed that CSF1-R inhibition led to a selective
23 reduction of the proportion of CD45^{high}/CD11b^{high}/*Ccr2^{pos}* phagocytes isolated from the inflamed CNS,
24 while the expression of activation markers was selectively reduced in the CD45^{high}/CD11b^{high}/*Ccr2^{neg}*

1 phagocytes. No obvious differences were observed in either the proportion or activation stage of resting
2 microglial cells (**Supplementary Figure 9**). RNAseq analysis of these cell populations further
3 established that a marked change of the transcriptional profile in response to CSF1-R inhibition was only
4 apparent in CD45^{high}/CD11b^{high}/Ccr2^{neg} phagocytes, while only few differentially regulated genes were
5 detected in resting microglial cells (CD45^{int}/CD11b^{int}) or CD45^{high}/CD11b^{high}/Ccr2^{pos} phagocytes
6 (**Figure 6f-h**). Further analysis of the genes most-strongly regulated by CSF1-R signaling in these locally
7 activated phagocytes revealed that CSF1-R inhibition likely involves two collaborating mechanisms:
8 First, a reduced expression of CCL2 (**Supplementary Figure 9**), the major chemokine responsible for
9 the infiltration of monocytes to the CNS²⁸. Indeed, a reduced number of monocyte-derived phagocytes
10 was detected by histopathological analysis of cortical lesions derived from mice treated with the CSF1-
11 R inhibitor, while numbers of microglial cells remained equal (**Figure 6k, l** and **Supplementary Figure**
12 **10**), in line with the results of the FACS analysis (**Supplementary Figure 9**). Second, CSF1-R inhibition
13 selectively altered the phenotype of the CD45^{high}/CD11b^{high}/Ccr2^{neg} phagocyte population, as it
14 diminishes APOE expression in these cells and thereby at least partially reverses the APOE-dependent
15 disease-associated gene signature of these cells²⁹ towards a more homeostatic phenotype (**Figure 6i, j**).
16 In line with such an altered phenotype, we also observed a reduced expression of scavenger receptors,
17 such as the macrophage scavenger receptor 1 (MSR1) and the macrophage mannose receptor 1 (MRC1),
18 as well as of genes such as CD68 and arginase-associated intracellular degradation pathways. To test
19 whether this altered phagocyte phenotype would directly affect the capacity of local (but not infiltrating)
20 phagocytes to remove synapses, we analyzed the lysosomal content and synapse uptake in *CX₃CR-1^{GFP/wt}*
21 *x BiozziABH* mice and *Ccr2^{RFP/wt} x BiozziABH* mice after CSF1-R inhibition. In line with the
22 transcriptomic analysis, we found a selective reduction of lysosomal content and uptake of presynaptic
23 material in *CX₃CR-1^{GFP}* expressing phagocytes that was not observed in the *Ccr2^{pos}* cell population
24 (**Figure 6m, 6n** and **Supplementary Figure 10**). In line with a direct effect of CSF1-R inhibition on
25 synapse uptake, we further observed that exposure of cultured microglia cells to CSF1 increased their

1 uptake of synaptoneurosomes, an effect that was blocked by the CSF1-R inhibitor (**Supplementary**
2 **Figure 9**).

3 Taken together our analyses indicate that the primary cell population responding to the CSF1-R
4 inhibition are CD45^{high}/CD11b^{high}/Ccr2^{neg} phagocytes. These mediate the therapeutic effect by reversing
5 their disease-associated phenotype and ability to engulf synapses as well as dampening the recruitment
6 of monocyte-derived macrophages (which are altered in number, but not in phenotype or synapse
7 removal capacity). This dual mechanism of action thus controls both the central and the peripheral arm
8 of the phagocyte response, which reduces inflammatory damage to synapses (**Figure 6o** and **6p**), and
9 thereby effectively limits synapse loss in the inflamed cortex.

10 **DISCUSSION**

11 While MS in its classical manifestation is dominated by white matter pathology and resulting
12 sensory-motor deficits, cortical symptoms, such as fatigue and subtle cognitive decline, also contribute
13 to the patients' loss of quality of life as the disease progresses^{2,30}. The structural correlate of these
14 symptoms is widespread gray matter pathology, with profound synapse loss, both in areas of gray matter
15 demyelination^{31,32} and beyond^{8,9}. Indeed, the degree of synapse loss in the MS cortex is comparable to
16 that seen in early stages of classical neurodegenerative disorders, such as Alzheimer's disease³³. While
17 much has been learned from applying *in vivo* imaging to disease models of such neurodegenerative
18 conditions, both at the structural^{12,13} and the functional levels³⁴, our understanding of inflammatory gray
19 matter pathology remains in its infancy. Thus, even very fundamental questions, such as whether
20 structural and functional synapse changes are reversible, or which inflammatory mechanisms drive
21 synapse loss remain largely unanswered. The recent ability to model MS-related cortical
22 neuroinflammation, using cortically targeted EAE models, now allowed us to address these questions.
23 Indeed, our murine c-MS model recapitulates the widespread and pronounced cortical synapse loss also

1 seen in MS ^{8,9}. Importantly, this model also enables measuring the activity of local cortical circuitry by
2 calcium imaging. Here, we observed transient hypoactivity of cortical projection neurons (both in layer
3 II/III and layer V) that tracks a preferential loss of excitatory inputs in the cortex. In contrast, in other
4 settings of synapse loss, such as early amyloid pathology in a model of Alzheimer's disease,
5 hyperactivity has been described ³⁴, which in part might be explained by substantial changes in overall
6 cellular geometry due to dendrite remodeling ³⁵, which we found to be absent in cortical
7 neuroinflammation. Furthermore, it is noteworthy, that in other models of Alzheimer's disease-related
8 pathology, which e.g. also incorporate tau aggregation, hypoactivity is also predominant ³⁶. In any case,
9 prevailing evidence of functional imaging in human MS points to altered activity and circuit
10 disconnection ³⁷, relating to the findings at the cellular level in our model.

11 Given the profound structural and functional pathology that emerges from a single bout of cortical
12 neuroinflammation, a remarkable observation of our study is the fact that such deficits appear to be
13 largely reversible once inflammation subsides. In this process synapse densities are restored to pre-lesion
14 levels and neuronal activity hierarchies or correlations resume the stability trajectories of control mice.
15 This suggests a substantial endogenous neuronal repair potential in cortex, where – in contrast to white
16 matter – also advanced structural alterations can be reversed. Indeed, once an axon has been transected
17 in an inflammatory white matter lesion, no regeneration is possible, and compensatory remodeling is the
18 prevailing, but limited mode of recovery ³⁸. In contrast, we now observe in the c-MS model that synapse
19 loss, which includes removal of both pre- and postsynaptic material, is reversible without lasting
20 structural imprint. Indeed, even the correlation landscape of local networks – likely indicative of regional
21 interconnectivity or synchronized inputs – re-approached control levels, similar to what has been
22 observed during reestablishment of visual cortex connectivity after sensory deprivation, albeit in this
23 case rather than spontaneous patterns, a specific functional feature of cortical sensory function (ocular
24 dominance) was examined ¹⁰. Importantly, this degree of reversibility contrasts with the sustained

1 damage apparent in human gray matter MS lesions. Beyond the obvious species difference, the two
2 pathological processes differ in key respects – most importantly timing and local chronicity of an
3 inflammatory environment. While the c-MS model involves only one episode of locally triggered
4 neuroinflammation, driven by a single injection of cytokines, in MS sustained sources of such
5 proinflammatory signaling exist, e.g. originating from lymphoid aggregates in the meninges, which
6 correlate with increased levels of proinflammatory cytokines in the cerebrospinal fluid of corresponding
7 patients^{15,17}. However, such cytokines might well have complex effects, as for example TNF α can
8 potentiate existing synaptic connections, and hence contribute to transient hyperactivity of cortical
9 circuits, e.g. during the recovery phase of subcortical neuroinflammation³⁹. Thus, other confounders,
10 such as age or threshold effects of accumulating subtle damage that exhaust repair or compensation
11 capacities might contribute to the lasting cortical deficits observed in progressive MS. Altogether, this
12 argues that early intervention to prevent smoldering cortical inflammation from taking hold might allow
13 endogenous recovery mechanisms to prevail and thereby counteract MS progression.

14 So what drives synapse removal and hence circuit dysfunction in cortical neuroinflammation? We
15 find that phagocytes, including tissue-resident microglia and infiltrating (Ccr2^{POS}) macrophages engulf
16 synaptic material. Such phagocyte-mediated synapse engulfment is also a hallmark of other
17 neurodegenerative, neuroinfectious and neuropsychiatric disorders^{27,40–42}, which stresses the unity of
18 destructive mechanisms shared across a broad range of cortical pathologies.

19 However, while some aspects of the way activated immune cells damage the CNS might be rather
20 conserved, it should be kept in mind that the behavior of immune cells such as microglia within the CNS
21 can be variable (e.g. as it is influenced by the underlying disease mechanism, but also by other variables
22 such as sex⁴³). Indeed, for phagocyte-mediated synapse removal, various mechanisms have been
23 proposed and likely operate in parallel. For instance, in a model of viral encephalitis, virally infected

1 neurons express chemokines, such as CCL2 as ‘attack-me signals’, to attract the phagocytes that strip the
2 neuron of its synapses ⁴². Moreover, in development and neurodegeneration, dysfunctional synapses are
3 tagged by components of the complement system, which phagocytes recognize as ‘eat-me signals’ to
4 initiate engulfment ⁴⁴. To these executive mechanisms of phagocyte-mediated synapse stripping, we now
5 add localized calcium dyshomeostasis as an early predictor of which synapses are fated for removal.
6 Such calcium accumulations - which could have a range of causes, including presynaptic hyperactivity
7 of individual or clustered inputs, but also altered postsynaptic clearance or amplification from
8 intracellular stores - appear to be particularly predictive of removal if they reach the adjacent dendritic
9 shaft. Likely, such local calcium signals then act synergistically with the above-mentioned executive
10 mechanisms (including complement deposition, which occurs in both in experimental and human
11 neuroinflammatory conditions ^{32,45,46}) to induce immune-mediated synapse removal. The following
12 aspects could contribute to such a collaborative interaction: The expression of eat-me signals in neurons
13 could be directly regulated by calcium signals, as has been shown e.g. for the membrane exposure of
14 phosphatidylserine ⁴⁷. Indeed, many aspects of developmental synapse pruning are activity-, and hence
15 likely calcium-dependent, including complement-mediated synapse removal ⁴⁴. Furthermore,
16 accumulating calcium could lead to a local de-stabilization of the cytoskeleton e.g. by the activation of
17 calcium-dependent proteases ⁴⁸ or phosphatases ¹², which could facilitate subsequent spine removal –
18 especially, if such remodelling became more widespread. This might explain the marked increase in
19 spine loss observed once the calcium accumulation reached the dendritic shaft.

20 Importantly, irrespective of the precise mechanism of spine tagging and removal, we identify CSF1
21 signaling as a possible therapeutic intervention point, which could remedy cortical synapse loss. The
22 notion that such cortical synapse loss is an important therapeutic target is supported by the prominent
23 synaptic pathology present in the brain of MS patients ^{8,9,31} and the likely functional consequences that
24 derive from it. The notion that CSF1 signaling may be an appropriate way to target this pathology in MS

1 is further supported by the targeted analysis of previously published single-nucleus RNA sequencing
2 data ⁴⁹ indicating that in the cortex of progressive MS patients CSF1-R is prominently expressed by
3 microglial cells. In contrast, CSF1-R ligands are primarily expressed by glial cells (in the case of CSF1)
4 and excitatory neurons (in the case of interleukin 34; **Supplementary Figure 11**).

5 However, one should keep in mind that a transient removal of preferentially excitatory inputs, as we
6 observe here, could also have protective effects for neuronal health at least in the acutely inflamed gray
7 matter. In this context it is interesting to note that we did not detect any obvious signs of increased
8 neuronal stress in response to CSF1-R treatment (**Supplementary Figure 12**), arguing that at least this
9 therapeutic modality did not inadvertently endanger neuronal survival. Moreover, the dose of CSF1-R
10 inhibitor treatment that we employ here avoids microglia depletion. Such transient ablation of an
11 essential CNS cell population generates divergent outcomes in chronic EAE models ^{26,50} and harbors
12 unpredictable risks in a translational setting. Non-depleting CSF1-R-inhibition²⁵, in contrast, appears to
13 have a two-pronged beneficial effect in the context of our c-MS model – affecting the peripheral and the
14 central arm of the phagocyte response in parallel. On the one hand, such CSF1-R blockade reduces
15 infiltration of Ccr2^{pos} phagocytes into the CNS, which is prominent in our model, but also in gray matter
16 of MS patients ⁷. On the other hand, it reduces microglia-mediated synapse removal inside the CNS,
17 which is another feature shared by our model and gray matter pathology in progressive MS ³². Based on
18 our transcriptomics analysis, these effects are orchestrated by locally activated phagocytes, which in
19 response to CSF1-R blockade alter their disease-associated phenotype, reduce the chemoattraction of
20 peripheral phagocytes and down-regulate their capacity for synapse removal, suggesting a ‘paralysis’ of
21 detrimental executive function. In summary, our data imply that the progressive phase of MS, which
22 appears refractory to current ‘peripheral’ immunomodulatory therapies ², might be amenable to a suitable
23 strategy for CNS-targeted immunomodulation.

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4 **AUTHOR CONTRIBUTIONS**

5 M.K., D.M. and T.M. conceived and designed the experiments. M.J., T.J., M.Kr. and D.M. established
6 and characterized the c-MS model. M.J., A-M.S., E.M.U.G., V.K.-J., I.W. and S.S. performed and
7 evaluated cortical pathology *in situ*. A-M.S., T.N., and E.M.U.G. performed and evaluated *in vivo*
8 calcium imaging of spines and dendrites. N.S., J.D.F.W. and F.W. performed and/or analysed neuronal
9 activity patterns *in vivo*. N.S. performed electron microscopy analysis. R.P. and J.G. performed data
10 analysis. D.E. and E.B. performed bioinformatics analysis. M.J. and E.B. performed flow cytometry
11 experiments. N.H., L.W. and D.O. developed and characterized the CSF1-R antagonist. M.J., A-M.S.,
12 N.S., D.M., T.M. and M.K. wrote the paper.

13

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1 **Fig. 1. Projection neurons lose excitatory synaptic input in a model of cortical multiple sclerosis**

2 (a) Schematic of experimental design to measure spine density (c-MS model perfused at 3 and 14 days

3 after intracortical cytokine injection; ‘c-MS d3’ and ‘c-MS d14’). (b) MBP staining (white) and Iba-1

4 staining (magenta) in MOG immunized control (**left**) and c-MS model (**middle, right**). Demyelination

5 and inflammation are observed both ipsilateral (‘Ipsi’; **middle**) and contralateral (‘Contra’; **right**) to the

6 injection site. (c) Overview of *Thy1-GFP-M x BiozziABH x* cortex. (d) Confocal reconstruction of layer

7 III and layer V pyramidal neurons (boxes in c). (e) Deconvoluted apical dendrite segments (typical

8 locations on dendrites shown by boxes in d). (f, g) Spine density in apical dendrite of (f) layer III neurons

9 (n=13 Ctr and n=15 c-MS d3 neurons from n=6 mice per group) and (g) layer V neurons (n=21/28

10 neurons from n=7/8 mice; mean ± SEM; two-way RM ANOVA). (h) Spine density of layer V dendrites

11 over the course of c-MS (n=46 Ctr, n=62 c-MS d3 and n=52 c-MS d14 dendritic stretches from n=7/8/9

12 mice; mean ± SEM; one-way ANOVA followed by Bonferroni’s multiple comparisons test; $F_{2,157}=10$,

13 $p<0.0001$). (i) Electron micrographs (EM) of sham injected (**left**) and c-MS d3 (**right**) layer I

14 (presynaptic compartment in red; postsynaptic in green; inset in **middle** shows detail boxed on left;

15 synaptic cleft, white arrowhead; postsynaptic densities, black arrowheads). (j) EM-based quantification

16 of synapse density in layer I in sham injected and c-MS animals (d3: n=4, sham; n=4 c-MS; d10 n=5

17 sham, n=3 c-MS mice; mean ± SEM; unpaired t-test). (k) Confocal analysis of excitatory pre- (vGlut1;

18 red) and postsynaptic (Homer-1; green) synapses in immunostained cortical layer II-IV of control (**left**)

19 and c-MS d3 mice (**right**; inset shows 2.5-fold magnification). (l) Inhibitory pre- (GAD 65/67; red) and

20 postsynaptic (Gephyrin; green) synapses, same arrangement as k. (m, n) Quantification of (m) excitatory

21 and (n) inhibitory synapse density (n=4 Ctr and n=12 c-MS d3 mice per group; mean ± SEM; unpaired

22 t-test). (o) Ratio of excitatory to inhibitory synapse densities calculated from m, n (mean ± SEM;

23 unpaired t-test). Scale bars in b, 50 μm; c, 100 μm; d, 20 μm; e, 1 μm i, 1 μm, k and l: 2 μm. Display

24 range is adjusted for images in panels b-e uniformly in each panel. Deconvoluted images are used in

1 panel e. In panels k, l mean intensity and standard deviation (SD) of the background was calculated based
2 on 5 ROIs and mean+3SD was used to threshold the image for display purposes. Abbreviations: Ctr:
3 Control; c-MS: cortical MS model; dX: perfused at day X; Ipsi: Ipsilateral to cytokine injection; Contra:
4 Contralateral to cytokine injection. *** P<0.001, ** P<0.01, *P<0.05.

5

1 **Fig. 2. Neurons are silenced in a model of cortical multiple sclerosis**
2 (a) Schematic showing experimental design for longitudinal *in vivo* imaging of neuronal activity in layer
3 II/III somatosensory neurons in the c-MS model, using GCaMP6s as calcium indicator delivered via viral
4 gene transfer (AAV1.hSyn1.mRuby2.GCaMP6s). (b) *In vivo* multiphoton imaging of a layer II/III
5 neurons over the course of cortical inflammation through a cranial window. **From left to right,**
6 **respectively:** before cytokine injection ('Baseline MOG'), 3 days ('c-MS d3'), 10 days ('c-MS d10') and
7 17 days ('c-MS d17') after cytokine injection. **Top:** Grayscale images of GCaMP6s channel masked and
8 color-coded for cytoplasmic Ca²⁺ events per minute. **Bottom:** Representative Ca²⁺ activity traces
9 displayed as delta f/f for the neurons marked in the left panel. (c) Cumulative plots of the neuronal activity
10 for the entire population of neurons for each selected timepoint over the course of the c-MS model (**top**)
11 and for sham injected animals (**bottom**). **Inserts:** Mean neuronal activity normalized to baseline for each
12 timepoint shown as (n=4 sham injected and n=5 c-MS mice, mean ± SEM; RM One-way ANOVA
13 followed by Dunnett's multiple comparison test; $F_{1,916, 7.662}=6.38$, $p=0.0241$). (d) Heat map
14 representation of the activity levels of single neurons over the course of c-MS (**left**) and for sham injected
15 animals (**right**). Scale bar in **b**, 20 μm. *P<0.01

1 **Fig. 3. Resilience of neuronal circuit structure in a model of cortical multiple sclerosis**

2 (a) **Left:** Fold activity change for neurons showing $> 0.5 \text{ Ca}^{2+}$ events per minute between c-MS d3 and

3 baseline (b-) MOG (orange), c-MS d17 and b-MOG (light orange) and sham d17 and baseline timepoints

4 (grey; $n=464/464/354$ cells, respectively; dashed lines: median, thin dashed lines quartiles; Kruskal-

5 Wallis test followed by Dunn's multiple comparison test). **Right:** Binned activity change between

6 baseline and 17 days post injection in sham injected and c-MS mice ($n=4$ sham injected and $n=4$ c-MS

7 mice). (b, c) Representative pairwise correlations of individual neuronal activity (c_{signal}) in a

8 somatosensory cortex area with 55 neurons after sham injection (in b) and over the course of the c-MS

9 model (in c). (d) Schematic to illustrate session-wise similarity (r_{signal}) calculation with c_{signal} structure at

10 every timepoint (d3, d10 and d17) reported to before cytokine injection (baseline MOG) in the c-MS

11 model or to baseline in sham injected control. r_{signal} is calculated from the average of the multiple

12 comparison based on three repetitive sessions at each timepoint (e) Cubic polynomial fit of the average

13 inter-timepoint similarity over the course of the c-MS model and in comparison with sham injected mice

14 (thick orange and black lines). The 5th and 95th percentiles of the sham subsets are represented in dashed

15 black and the max and min in solid thin black. Data shown as mean \pm SEM ($n=4$ control and $n=4$ c-MS

16 mice, polynomial analysis followed by Mann-Whitney test for the differences of the distributions

17 between c-MS and sham injected mice). *** $P<0.001$, * $P<0.05$.

1 **Fig. 4. Localized calcium accumulations prime spines for removal**

2 (a) Schematic of *in vivo* imaging of spine Ca^{2+} levels in the c-MS model using the FRET-based

3 genetically encoded calcium indicator Twitch2b delivered via viral gene transfer

4 (AAV1.hSyn1.Twitch2b). (b) Timecourse of spine density in apical tuft dendrites of *Thy1-GFP-M x*

5 *BiozziABH* mice quantified *in situ* in the c-MS model (control, 'Crt', n=5 mice; c-MS d1, n=8 mice; c-

6 MS d2, n=7 mice and c-MS d3, n=7 mice; mean \pm SEM; one-way ANOVA followed by Bonferroni's

7 multiple comparisons test, $F_{3,23}=7.415$, $p=0.0012$). (c) *In vivo* multiphoton projection images of apical

8 tuft dendrites with spines and their Ca^{2+} levels in healthy control ('Crt'; **top**) and acute (d3) cortical MS

9 model ('c-MS'; **bottom**). Grayscale images of YFP channel, ratiometric (YFP/CFP) images masked and

10 color-coded for cytoplasmic Ca^{2+} . (d) Ca^{2+} concentration of single spines in healthy ('Crt') and c-MS

11 model ('c-MS d3') mice, plotted as YFP/CFP channel ratios (dashed line representing high Ca^{2+}

12 threshold, 3SD above control mean) **Top:** Percentage of spines per animal with high Ca^{2+} , shown as

13 mean \pm SEM (tested per animal in n=8 control and n=17 c-MS mice, Mann-Whitney U test). (e) **Left:**

14 Representative calcium activity traces obtained using resonant scanner-based imaging, displayed as

15 YFP/CFP normalized channel ratios over time in relation to high Ca^{2+} threshold (dashed lines). **Right:**

16 mean baseline Ca^{2+} of single spines (normalized to control mean) shown in relation to their calcium

17 activity (spiking frequency $\times \text{min}^{-1}$), dashed yellow line representing high Ca^{2+} threshold. (f) Multiphoton

18 time-lapse images in healthy control and c-MS mice (d2, d3) represented as a grayscale images of YFP

19 channel and ratiometric (YFP/CFP) images masked and color-coded for cytoplasmic Ca^{2+} . **Top:** stable

20 control low Ca^{2+} spines. **Middle:** high Ca^{2+} spine (**left**, yellow arrow head) disappearing after 2h (**right**,

21 dashed arrow head). **Bottom:** Spine (**left**, white arrow head) increasing volume and Ca^{2+} after 2h (**right**,

22 yellow arrow head) next to neighboring spine with high Ca^{2+} disappearing after 2h (**right**, dashed arrow

23 head). Gamma 1.2 for grayscale images. (g) Spine fate over a 2 hour imaging timeperiod according to

24 baseline Ca^{2+} concentration at $t=0\text{h}$ (in mean $+x$ SD of healthy controls) in healthy mice (**left**, Ctr) and

25 c-MS mice (**middle**). **Right:** Percentage of high Ca^{2+} spines (3SD above control mean) lost within 2

1 hours according to their individual peri-spine dendritic Ca^{2+} concentration (high vs. low, as defined by
2 3SD above the mean calcium levels in control dendrites; Fisher's exact test, n=24 spines with low
3 dendrite calcium, n=8 spines with high dendrite calcium). **(h)** Ca^{2+} levels (as YFP/CFP ratios normalized
4 to control mean, dashed yellow line representing high Ca^{2+} threshold) of single spines over 2 h in c-MS
5 (d2, d3) mice. Dashed, orange lines represent high Ca^{2+} spines disappearing within 2 h. **(i)** Percentage of
6 low Ca^{2+} spines strongly increasing Ca^{2+} over time (**left**) and percentages of high Ca^{2+} spines reducing
7 Ca^{2+} over time (**middle**), or getting lost (**right**) in c-MS mice with (blue) or without (orange) local
8 application of 50 mM EGTA (tested per animal, n=11 c-MS mice without EGTA, n=10 c-MS mice with
9 EGTA, one-tailed t-tests). Scale bars in c, 10 μm ; f, 5 μm . **P < 0.01, *P<0.05.

10

1 **Fig. 5. Mononuclear phagocytes remove synapses**

2 (a) Orthogonal view of a CX₃CR-1^{GFP} cell (magenta) showing a Synapsin-1 inclusion (cyan, **left**)

3 colocalized with LAMP1 staining (white, **right**) suggesting removal of synapses by CNS resident

4 microglial cells. (b) Orthogonal view of a Ccr2^{RFP} cell (magenta) showing Synapsin-1 inclusion (cyan),

5 suggesting removal of synapses by blood-derived mononuclear phagocytes. (c) Quantification of

6 reconstructed Synapsin-1 positive spheres and Synapsin-1/LAMP1 double positive spheres inside

7 CX₃CR-1^{GFP} cells analysed in *CX₃CR-1^{GFP} x BiozziABH* mice (n=50 cells from 4 healthy control mice

8 and 50 cells from 5 c-MS d3 mice; mean ± SEM; unpaired t-test). (d) **Left:** 3D reconstruction of the cell

9 in **a** (magenta) and its Synapsin-1 inclusions (cyan) with Imaris software. **Right:** Electron micrograph

10 of a phagocyte (violet) in cortical layer I during the acute phase of c-MS. **Insert:** Synaptic components

11 (cyan) in a degradative compartment of the phagocyte. (e) Quantification of reconstructed Synapsin-1

12 positive spheres and Synapsin-1/LAMP1 double positive spheres inside Ccr2^{RFP} cells (n=50 cells from

13 5 c-MS d3 *Ccr2^{RFP} x BiozziABH* mice mice; mean ± SEM). (f) Quantification of reconstructed spheres

14 positive for postsynaptic markers and co-localizing with LAMP1 inside CX₃CR-1^{GFP} cells analysed in

15 *CX₃CR-1^{GFP} x BiozziABH* mice (n=50 cells from 5 healthy control mice and 50 cells from 5 c-MS d3

16 mice treated with vehicle; mean ± SEM; unpaired t-test). (g) Quantification of reconstructed spheres

17 positive for postsynaptic markers and co-localizing with LAMP1 inside Ccr2^{RFP} cells (n=50 cells from

18 4 c-MS d3 *Ccr2^{RFP} x BiozziABH* mice treated with vehicle; mean ± SEM). Scale bars in **a** and **b**, 5 μm;

19 **d**, 2 μm. Abbreviations: Syn1: Synapsin-1; c-MS: cortical MS model; Ctr: Control; ND: No data. ***

20 P<0.001, **P<0.01.

21

1 **Fig. 6. Blocking phagocyte entry and activation prevents synapse loss in the c-MS model**

2 (a) Schematic timeline of treatment with CSF1-R inhibitor ('CSF1-R inhib') or vehicle in the c-MS

3 model. (b) Representative images of deconvoluted apical dendritic stretches from layer V pyramidal

4 neurons showing spines in c-MS d3 mice treated with vehicle (**left**) or CSF1-R inhibitor (**right**). (c)

5 Spine density of apical dendritic stretches from layer V pyramidal neurons in c-MS d3 mice treated with

6 vehicle or CSF1-R inhibitor (n=65/48 neurons from n=8/7 mice; mean \pm SEM; unpaired t-test). The

7 dotted line shows the average spine density in healthy control mice based on **Fig. 1g**. (d, e) Gating

8 strategy for sorting cells based on CD45 and CD11b expression in brains of *Ccr2^{RFP} x BiozziABH* c-MS

9 model mice treated with vehicle or CSF1-R inhibitor. (d) After separation of debris and doublets, live

10 cells were further gated by CD45 and CD11b expression to identify mononuclear phagocytic cells. (e)

11 CD45^{high} CD11b^{high} cells were further gated into two populations depending on the presence of *Ccr2^{RFP}*

12 positivity. (f-h) Volcano plot based on differentially expressed genes between CSF1-R inhibitor

13 treatment vs. vehicle in CD45^{int} CD11b^{int} cells (f), CD45^{high} CD11b^{high} *Ccr2^{pos}* cells (g) and CD45^{high}

14 CD11b^{high} *Ccr2^{neg}* cells (h). (i) Heatmap of treatment-affected genes associated with APOE signaling as

15 measured in transcriptomic analysis of CD45^{high} CD11b^{high} *Ccr2^{neg}* cells (vehicle vs CSF1-R inhibitor

16 treatment, n=5 and n=6 mice respectively). (j) Genes predicted by Ingenuity Pathway Analysis to be

17 directly regulated by CSF1 signaling (p-value cutoff of 0.05 and fold change cutoff of -2) in CD45^{high}

18 CD11b^{high} *Ccr2^{neg}* cells (vehicle vs treatment, n=5/6 mice) (k) Quantification of CX₃CR-1^{GFP} cells in

19 cortical sections of c-MS d3 *CX₃CR-1^{GFP} x BiozziABH* mice treated with vehicle or CSF1-R inhibitor

20 (n=9 mice per group; mean \pm SEM; unpaired t-test). (l) Quantification of Iba-1^{positive} CX₃CR-1^{GFP}

21 negative cells (infiltrating mononuclear cells) in c-MS d3 *CX₃CR-1^{GFP} x BiozziABH* mice treated with

22 vehicle or CSF1-R inhibitor (n=9 mice per group; mean \pm SEM; unpaired t-test). (m) Effects on synapse

23 removal by CX₃CR-1^{GFP} cells in c-MS d3 *CX₃CR-1^{GFP} x BiozziABH* mice. **Left:** Delta (Δ) of the LAMP1

24 positive volume proportion per CX₃CR-1^{GFP} cell volume as percentage of vehicle treated group. 'Delta'

1 refers to subtraction of average volume of healthy controls (derived from Ctr group images used in **Fig.**
2 **5c,f**) from vehicle or CSF1-R inhibitor treated c-MS mice (n=150 cells analysed from 5 mice per group;
3 mean \pm SEM; unpaired t-test. **Right:** Delta (Δ) of the number of Synapsin-1/LAMP1 and Homer-
4 1/LAMP1 double positive spheres per CX₃CR-1^{GFP} cells in c-MS d3 mice treated with vehicle or CSF1-
5 R inhibitor. Delta refers to subtraction of number of spheres of healthy control (data derived from **Fig.**
6 **5c,f**) from vehicle or CSF1-R inhibitor treated c-MS mice (n=50 cells analysed from 5 mice in each
7 group; mean \pm SEM; unpaired t-test; data for Homer-1/LAMP1 vehicle treated group replotted from **Fig.**
8 **5f**). **(n)** Effects on synapse removal by Ccr2^{RFP} cells in c-MS d3 *Ccr2^{RFP} x BiozziABH* mice **Left:** LAMP1
9 positive volume per Ccr2^{RFP} cell volume as percentage of vehicle treated group (n=150 cells from 4
10 vehicle-treated and 5 CSF1-R inhibitor-treated mice; mean \pm SEM; unpaired t-test). **Right:** Number of
11 Synapsin-1/LAMP1 and Homer-1/LAMP1 double positive spheres per Ccr2^{RFP} cells in c-MS d3 mice
12 treated with vehicle or CSF1-R inhibitor (n=50 cells analysed from 4 vehicle-treated mice and 5 CSF1-
13 R inhibitor-treated mice; mean \pm SEM; unpaired t-test; data for Homer-1/LAMP1 vehicle treated group
14 replotted from **Fig. 5g**). **(o)** *In vivo* ratiometric projection images of representative dendrites and spines
15 color-coded for cytoplasmic Ca²⁺ calcium levels of vehicle (**left**) and CSF1-R inhibitor (**right**) treated
16 mice. **(p)** Percentage of spines with high Ca²⁺ after treatment with vehicle or CSF1-R inhibitor (n=9 mice
17 per group; mean \pm SEM; unpaired t-test). Scale bar in **b**, 2 μ m ; **o**, 5 μ m *** P<0.001, **P<0.01, *P<0.05.

18

1 ONLINE METHODS

2 Experimental Models

3 Transgenic animals

4 All experiments were performed on animals with a F1 and F2 background of C57BL/6 and
5 BiozziABH (strain designation BiozziABH/RijHsd, Harlan Laboratories), crossbred in our animal
6 facilities. To assess dendritic and spine pathology *in situ*, we used *Thy1-GFP-M x BiozziABH* mice
7 (derived from *Tg(Thy1-EGFP)MJrs/J*, gift from Joshua Sanes and Jeff Lichtman, Harvard University).
8 To address phagocyte activation, infiltration and synaptic uptake, we used *Ccr2^{RFP} x BiozziABH* animals
9 (derived from *B6.129(Cg)-Ccr2tm2.1Ifc/J*, Jackson Laboratory) and *CX3CR1^{GFP} x BiozziABH* mice
10 (*B6.129P-Cx3cr-1tm1Litt/J*, Jackson Laboratory) or a F2 cross-breeding of both lines. For viral labelling,
11 either *Ccr2^{RFP} x BiozziABH* or *C57BL/6J x BiozziABH* were used. To assess calcium activity in layer V
12 pyramidal neurons, we used *Thy1-GCaMP6f x BiozziABH* mice (derived from *C57BL/6J- Tg(Thy1-*
13 *GCaMP6f)GP5.5Dkim/J*, Jackson Laboratory). Mice were housed in individual ventilated cage systems
14 under a 12:12 light/dark cycle, at a temperature of $22^{\circ} \pm 2^{\circ}\text{C}$ and $55\% \pm 10\%$ relative humidity with
15 complete feed and water ad libitum. They were housed in social groups of a maximum of 5 mice in each
16 standard housing cage and bedding. The cages were provided with enrichment consisting of play tunnels,
17 nestlets to be used as nesting material and a red plastic mouse house. For husbandry, one male was
18 housed with one or two females. Mice were weaned at postnatal day 21. Both female and male animals
19 were included in experiments. All animal experiments were performed in accordance with regulations of
20 the relevant animal welfare acts and protocols approved by the respective regulatory bodies.

21 Cortical multiple sclerosis model (c-MS)

22 Adult mice (6 - 14 weeks of age) were first induced with EAE as previously described. In short, we
23 immunized animals subcutaneously under ketamine-xylazine anesthesia (KX, 87 mg/kg + 13 mg/kg)
24 with 200 μl of an emulsion containing 30 μg of purified recombinant rat myelin oligodendrocyte

1 glycoprotein (MOG, N1-125, expressed in *E. coli*) and complete Freund's adjuvant, consisting of
2 incomplete Freund's adjuvant (Sigma Aldrich, F5506) and 10 mg/ml mycobacterium tuberculosis H37
3 Ra (BD Difco, 231191). Pertussis toxin (200 ng, Sigma Aldrich, P7208) was administered
4 intraperitoneally on day 0 and day 1 after immunization. The immunization procedure was repeated after
5 1 week. To evoke cortical lesions, we injected 2 μ l of a cytokine mix of 0.25 μ g/ μ l recombinant mouse
6 TNF- α (R&D Systems, 410-MT/CF) and 750 U/ μ l recombinant murine IFN- γ (Peprotech, 315-05) in
7 PBS/0.1% BSA intracortically (coordinates: 1.2 mm lateral, 0.6 mm caudal to bregma, depth 0.8 mm)
8 under anesthesia with a combination of medetomidine-midazolam-fentanyl (MMF, 0.5 mg/kg + 5 mg/kg
9 + 0.05 mg/kg) 3 weeks after initial immunization. Mice were given buprenorphine (0.05 - 0.1 mg/kg) for
10 analgesia on the days following the surgery. For all experimental animals, we assessed animal weight
11 daily and assigned a score according to the severity of neurological deficits using an established EAE
12 scoring scale that primarily monitors locomotor deficits caused by spinal white matter lesions: 0, no
13 detectable clinical signs; 0.5, partial tail weakness; 1, tail paralysis; 1.5, gait instability or insecurity in
14 walking; 2, hind limb paresis; 2.5, hind limb paresis with partial dragging; 3, hind limb paralysis; 3.5,
15 hind limb paralysis and forelimb paresis; 4, hind limb and forelimb paralysis; 5, death. As expected for
16 the c-MS induction protocol ¹⁸, most mice did not develop severe systemic EAE symptoms under our
17 immunization protocol. Mice without obvious clinical signs of systemic EAE were also included in the
18 study. We did not observe any obvious correlation between the EAE score and cortical spine loss (cf.
19 **Supplementary Figure 1**).

20 Cranial window surgery

21 To gain optical access to the animal cortex to monitor neuronal activity over time and to assess *in*
22 *vivo* calcium levels of dendrites and spines upon acute cortical inflammation, we performed a craniotomy
23 and implanted a cranial window above the somatosensory cortex of the animals as previously described
24 ⁷². In brief, the mice were anaesthetized with MMF intraperitoneally. Craniotomy was performed using

1 a 0.5 mm stainless steel drill head (Meisinger, 310104001001005). For chronic imaging of neuronal
2 activity, 0,5 μ l of 10^{12} AAV1.hSyn.mRuby2.GSG.P2A.GCaMP6s (Addgene, 50942-AAV1) was
3 injected 0.3 mm deep in the somatosensory cortex before sealing with a 4 mm cover glass using dental
4 cement. The labeled layer II/III neurons were predominantly excitatory ($96.6 \pm 0.6\%$, GAD67
5 immunostaining negative, mean \pm SEM, 1447 neurons from 4 mice analysed). Mice were given
6 buprenorphine (0.05 - 0.1 mg/kg) for analgesia every 12 h on the days following surgery. Under these
7 conditions, no increase in cellular toxicity due to viral burden was observed throughout the entire
8 experiment timeline. Animals were first imaged 28 days after implantation of chronic cranial windows.

9 For acute *in vivo* imaging of baseline calcium levels of dendrites and spines, 0,5 μ l of 10^{12}
10 AAV1.hSyn1.Twitch2b.WPRE.SV40 (Addgene, 100040-AAV1) was injected 0.7 mm deep into the
11 somatosensory cortex, 10d before the imaging timepoint. Analgesia was applied after surgery as
12 described above. On the imaging day, acute cranial window implantation was performed as stated above.
13 To improve imaging quality and before application of EGTA, the dura mater was carefully removed
14 using fine forceps (Dumont #5, Fine Science Tools, 91150-20). In cases of application of EGTA, cover
15 glasses were not fully sealed, leaving a flow-through channel for the treatment solution to reduce
16 manipulation.

17 Application of pharmacologicals

18 The c-MS model was induced as described above and animals were treated daily from the day of
19 cytokine injection until perfusion (four days) with 25 mg/kg intraperitoneal injection of vehicle or the
20 novel CSF1-R inhibitor compound (Sanofi). Two groups of age matched healthy controls received the
21 same treatments. Analysis of spine density in dendritic stretches between healthy controls (n=30), healthy
22 controls treated with vehicle (n=40) and healthy controls treated with CSF1-R inhibitor (n=30) did not
23 reveal any significant changes (one-way ANOVA followed by Bonferonni's multiple comparisons test).

1 **Method Details**

2 Immunohistochemical stainings

3 Mice were transcardially perfused with 4% (wt/vol) paraformaldehyde in phosphate buffered saline
4 and after 12-24h post-fixation embedded in paraffin. Axon density was determined by Bielschowsky
5 silver staining. Deparaffinized tissue sections were washed with distilled water and subsequently
6 incubated in 20% silver nitrate solution for 20 min, followed by another washing step. Sections were
7 incubated in 20% silver nitrate solution containing 5% ammonium hydroxide for 15 min in the dark.
8 Sections were transferred in 0.6% ammonium hydroxide and swayed. 1/35 volume of the developer
9 solution was added to the 20% silver nitrate solution containing 5% ammonium hydroxide while stirring.
10 Subsequently the sections were transferred into the solution and developed until the color of the sections
11 turned brown. Following washing in distilled water, sections were incubated in 2% sodium thiosulfate
12 solution for 2 min.

13 To stain for CD3, CD4, CD8, Mac-3 and c-Jun we performed antigen retrieval of paraffin-embedded
14 sections by treating rehydrated tissue sections for 30 s at 125 °C under pressure (20-22 psi) in 1x citrate
15 buffer (pH = 6) in a Pascal pressure chamber. After cooling-down, antigen-retrieved sections were
16 washed in distilled water. Sections were then washed and blocked with peroxidase blocking solution
17 (Dako, S2023) for 5 min. After two washing steps, sections were treated with the primary antibodies
18 directed against CD3 (1:100, Dako, A0452), CD4 (1:400, Cell Signaling, 25229), CD8 (1:5000,
19 Ebioscience, 14-0808-82), Mac-3 (1:200, Biolegend, 108502), and c-Jun (1:300, Cell Signaling, 9165).
20 For the stainings using rat antibodies, we performed a Fab fragment block against mouse IgG (1:100.
21 JIR, 115-007-003) to reduce unspecific bindings. After overnight incubation at 4° and wash, Impress
22 HRP anti-rat IgG (Vector, MP7444) or Impress HRP anti-rabbit Ig G (Vector, MP7451) was added to
23 the slides for 30 min. Subsequently, after two washing steps, the antibody binding was visualized using
24 a DAB solution (Dako, K3468). To evaluate presence of c-Fos, paraffin embedded blocks were cut,

1 deparaffinized, rehydrated and underwent antigen retrieval with Pascale Citrate pH 6.0. Tissue was
2 incubated with a primary anti-c-Fos antibody (1:1000, Synaptic Systems, 226 005) and subsequently
3 incubated with a biotinylated anti-guinea pig secondary antibody (1:200, Vector, BA-7000) for 1h,
4 followed by Streptavidin/HRP (Conjugate) (1:200, Dako, P0397) for 30 min. Tissue sections were
5 washed with water followed by counterstaining with Mayer's hemalum solution (Merck, 109249).

6 MBP immunostaining was done using at room temperature in a humid chamber. Sections were
7 washed in 1x wash buffer and blocked with Real peroxidase blocking solution (Dako, S2023) for 5 min.
8 After two washing steps, sections were treated with rabbit anti-MBP antibody (1:1000, Dako, A0623)
9 diluted in Dako Real antibody diluent for 1 h. After washing, Impress HRP anti-rabbit secondary
10 antibody (vector, MP7451) was added for 30 min. Sections were washed twice and processed with DAB-
11 containing developer solution (20 µl DAB chromogen + 1 ml DAB substrate buffer). Tissue sections
12 were washed with water followed by counterstaining with Mayer's hemalum solution (Merck, 109249).
13 All stained sections described above were dehydrated and mounted in Ultrakitt (Biosystems, 3921.0500)
14 for imaging.

15 Immunofluorescence stainings

16 Mice were transcardially perfused with 4% (wt/vol) paraformaldehyde in phosphate buffered saline
17 and the brains were post-fixed at 4°.

18 For evaluation of phagocyte activation and infiltration brains were post-fixed overnight, isolated,
19 and 80-100 µm thick sections were cut using a vibratome. Sections were washed with PBS and blocked
20 with 10% goat serum (GS) in 0.5% (vol/vol) Triton X-100 in PBS (T-PBS) and then incubated overnight
21 with rabbit anti-Iba-1 (1:300, Wako, 019-19741) and rat anti-MHC II (I-A/I-E) (1:300, BD Biosciences,
22 556999) antibodies in 1% GS in T-PBS at 4° C. Sections were visualized by incubating overnight with
23 AlexaFluor 647 goat anti-rabbit (1:500, Invitrogen, A21244) and AlexaFluor 594 goat anti-rat (1:500,

1 Invitrogen, A11007) antibodies together with the Nissl-like nucleic acid stain NeuroTrace 435/455
2 (1:500, Invitrogen, N21479) in 1% GS in T-PBS.

3 For evaluation of presynapse phagocytosis, brains were post-fixed 4-6 h, isolated, and cut in 40 μ m
4 thick sections using a vibratome. Sections were washed with PBS and blocked with 10% GS in 0.1% T-
5 PBS and then incubated overnight with rabbit anti-Synapsin-1 (1:500, Millipore, AB1543) and rat anti-
6 LAMP1 (1:300, Biolegend, 121601) antibodies in 1% GS in 0.1% T-PBS at room temperature. Sections
7 were visualized by incubating overnight with AlexaFluor 647 goat anti-rabbit (1:500, Invitrogen,
8 A21244) and AlexaFluor 594 goat anti-rat (1:500, Invitrogen, A11007) or AlexaFluor 488 goat anti-rat
9 (1:500, Invitrogen, A11006) antibodies in 1% GS in T-PBS.

10 For evaluation of postsynapse phagocytosis, brains were fixed for 4-6 h, isolated and left in 30%
11 sucrose for 3 days. The brains were then embedded in Tissue-Tek O.C.T. medium (Sakura, 4583) and
12 cut in 40 μ m thick sections using a cryostat. Sections were washed with PBS and blocked with 20% GS
13 in PBS and incubated overnight with rabbit anti-PSD95 (1:200, Invitrogen, 51-6900) and rat anti-LAMP1
14 (1:300, Biolegend, 121601) antibodies or for 36 h with guinea pig anti-Homer-1 antiserum (1:500,
15 Synaptic Systems, 160004) and rat anti-LAMP1 antibody (1:300, Biolegend, 121601) in 10% GS 0.3%
16 T-PBS. Sections were visualized by incubating for 4 h with AlexaFluor 647 goat-anti rabbit (1:500,
17 Invitrogen, A21244) or AlexaFluor 647 donkey anti-guinea pig (1:500, Invitrogen, A11075) and
18 AlexaFluor 594 goat anti-rat (1:500, Invitrogen, A11007) or AlexaFluor 488 goat anti-rat (1:500,
19 Invitrogen, A11006) antibodies in 1% GS in T-PBS.

20 To evaluate the density of excitatory and inhibitory synapses, paraffin embedded blocks were cut,
21 deparaffinized, rehydrated and underwent antigen retrieval with Pascale Citrate pH 6.0. Fab mouse block
22 (1:100, JIR, 115-007-003) and FCS 10% in PBS were used for blocking. For analysis of excitatory
23 synapses sections were incubated with mouse anti-vGlut1 (BNPI) (1:100, Santa Cruz, sc-377425) and

1 chicken anti-Homer-1 (1:500, Synaptic Systems, 160006) antibodies in Dako diluent overnight at 4°.
2 Sections were visualized with AlexaFluor 555 goat anti-mouse IgG1 (1:200, Invitrogen, A21127) and
3 AlexaFluor 647 goat anti-chicken IgY (1:200, Invitrogen, A21449) incubated for 1 h at room
4 temperature. For analysis of inhibitory synapses the tissue section were incubated with mouse anti-GAD
5 65/67 (1:100, Santa Cruz, sc-365180) and mouse anti-Gephyrin (1:200, Santa Cruz, sc-25311)
6 antibodies. Sections were visualized with AlexaFluor 555 goat anti-mouse IgG1 (1:100, Invitrogen,
7 A21127) and AlexaFluor 647 goat anti mouse IgG2b (1:200, Invitrogen, A21241). DAPI was diluted
8 1:2000 in PBS and added to the secondary antibody solution.

9 To observe extends of demyelination and inflammation, 100 µm thick sections were cut using a
10 vibratome. Section were treated for 15 minutes with cooled methanol in -20°. Sections were washed with
11 PBS and blocked with 10% horse serum (HS) in 0.1% T-PBS and then incubated overnight with rabbit
12 anti-MBP (1:200, Dako, A0623) and goat anti-Iba-1 (1:200, Abcam, ab5076) in 1% HS in T-PBS at
13 room temperature. Sections were visualized by incubating overnight with AlexaFluor 647 donkey anti-
14 rabbit (1:500, Invitrogen, A31573) and AlexaFluor 594 donkey anti-goat (1:500, Invitrogen, A11058)
15 antibodies in 1% HS in T-PBS.

16 For the evaluation of excitatory and inhibitory neuronal fractions infected by
17 AAV1.hSyn.mRuby2.GSG.P2A.GCaMP6s in the mice used in functional imaging, we perfused the
18 animals as described above after the last imaging session. Brains were post-fixed for 12 h, isolated, and
19 cut in 50 µm thick sections using a vibratome. Sections were first permeabilized in 2% T-PBS in room
20 temperature overnight then blocked in 2% FCS, 2% fishgelatine, 2% BSA in PBS for 2 h at room
21 temperature. Sections were then incubated overnight with mouse anti-GAD67 antibody (1:50, Millipore,
22 MAB5406B), chicken anti-GFP (1:1000, Abcam, ab13970) antibodies in 10% blocking solution at 4° C

1 overnight. Stainings were visualized by incubating sections for 2 h with AlexaFluor-conjugated
2 antibodies AlexaFluor 647 or AlexaFluor 488 (1:500, Invitrogen).

3 All sections were washed with PBS and mounted on slides using Vectashield (Vector Laboratories,
4 H-1000).

5 Confocal microscopy

6 To image immunofluorescence stained tissue, we used upright confocal laser-scanning microscopes,
7 FV1000 (Olympus) or SP8 (Leica), equipped with standard filter sets and laser lines. To reconstruct
8 apical dendrites in *Thy1-GFP-M x BiozziABH* animals, a 60x/1.35 NA oil immersion UPLSAPO
9 objective (Olympus) was used with a digital zoom of 3.5, Z-spacing of 200 nm and a pixel resolution of
10 75 nm pixel⁻¹ to image 80-100 μm thick coronal brain sections. Averaging of two images was done by
11 the Kalman method. To evaluate the density of excitatory and inhibitory synapses in *C57BL/6 x*
12 *BiozziABH* mice similar imaging setting was used. To acquire images to study microglia numbers and
13 activation based on MHC II staining, and infiltrating phagocytes based on Iba-1 staining 80-100 μm thick
14 coronal brain sections of *CX₃CR-1^{GFP} x BiozziABH* mice were imaged with a 20x/0.85 NA oil immersion
15 UPLSAPO objective (Olympus). To demonstrate extents of demyelination and inflammation sections
16 were imaged with the same method in *C57BL/6J x BiozziABH* mice. To assess temporal and spatial
17 characteristics of monocyte infiltration and microglial activation, 80 μm thick sections from *CX₃CR-1^{GFP}*
18 *x BiozziABH* and *Ccr2^{RFP} x BiozziABH* mice were imaged with a 20x/0.75 NA oil immersion HC PL
19 APO CS2 objective (Leica) and 1.0x zoom in tile scan mode. Overview scans were overlaid on a scan
20 of neurotrace signal, imaged with a 20x/0.85 NA oil immersion UPLSAPO Objective (Olympus).

21 For the evaluation of synapse phagocytosis, 40 μm thick sections were imaged with a 40x/1.30 oil
22 immersion HC PL APO CS2 objective (Leica), 3.0x zoom, Z-spacing of 200 nm and a pixel size of 97
23 nm.

1 *In vivo* imaging

2 For chronic *in vivo* imaging of neuronal activity, animals were first imaged 28 days after
3 implantation of cranial windows. For this analysis, we compared mice, in which a c-MS model was
4 induced with mice, which received only a cytokine injection (but no immunization) and sham-injected
5 mice, which were not immunized and in which a similar volume of 0.1% BSA/PBS without cytokines
6 was injected. On the imaging day, animals were anaesthetized starting with 2% isoflurane and then
7 placed on the imaging stage and provided with a constant flow of 1-1.5% isoflurane for the rest of the
8 imaging period. The physiological state of the animals was continuously monitored with a MouseOx
9 system (Starr Life Science Corp) equipped with a thigh sensor for small animals. Imaging of neuronal
10 activity was performed on 2-3 areas of layer II/III somatosensory cortex at 15Hz with a resonant scanner
11 (Olympus MPE-RS) using a femto-second pulsed Ti:Sapphire laser (Mai Tai Insight DeepSee, Spectra-
12 Physics) with a maximum power of 35mW at the back focal plane. Each area was imaged 3 times 5
13 minutes within 1 hour. A 25x/1.05 dipping cone water-immersion objective (Olympus) was used with a
14 zoom of 1.5x and a pixel size of 660 nm pixel⁻¹.

15 To image cortical myelin (layer I) we performed spectral confocal reflectance microscopy (SCoRe)
16 as described before²⁷. We used 3 fixed wavelength lasers (488, 539 and 633) to generate the SCoRe
17 signal (adjustable bandpass filter: 488/4 and 539/4: Olympus, as well as a fix bandpass filter 636/8
18 BrightLine HC). Imaging was performed within the first 70 µm of the somatosensory cortex above the
19 imaged areas used for the activity recordings. A 40x/0.8 water- immersion objective (Olympus) was used
20 with a zoom of 1.0x and a pixel size of 200 nm pixel⁻¹. Volume stacks penetrating 50-70 µm into the
21 cortical layer I from the surface were acquired with a Z-spacing of 1 µm. A single plane from the stacks
22 was used for each analysis. For acute *in vivo* imaging of calcium levels of dendrites and spines, animals
23 were anaesthetized with a mixture of medetomidin (0.5 mg/kg), midazolam (5 mg/kg) and fentanyl (0.05
24 mg/kg) intraperitoneally and an acute cranial window was implanted as described above. After 30 min,

1 in vivo microscopy was performed using a Olympus FV1200-MPE or Olympus MPE-RS two-photon
2 microscopy system, equipped with a femto-second pulsed Ti:Sapphire laser (Mai Tai HP-DS or Insight
3 DeepSee, Spectra-Physics) and laser power was attenuated by acousto-optical modulators. Emission was
4 detected with non-descanned gallium arsenide phosphide (GaAsP) detectors. To image the genetically
5 encoded calcium indicator Twitch2b, we used a two-photon wavelength of 840 nm to simultaneously
6 excite both mCerulean3 and cpVenusCD. Fluorescence of mCerulean3 and cpVenusCD was collected
7 in a cyan channel (here referred to as “CFP”) and yellow channel (“YFP”), respectively, using emission
8 barrier filter pairs with 455-490 and 526-557 nm. Images were acquired in 12 bit with an 25x/1.05
9 dipping cone water-immersion objective, pixel size of 124 nm pixel⁻¹, dwell time of 2.0 μs pixel⁻¹ and a
10 laser power of 30-50 mW measured in the back focal plane. Volume stacks penetrating 30-60 μm into
11 the cortical layer I from the surface were acquired with a Z-spacing of 1 μm. For EGTA experiments,
12 treatment solution (Ca²⁺ and Mg²⁺ free artificial cerebro-spinal fluid ± 50 mM EGTA, Sigma-Aldrich)
13 was applied for incubation after the first imaging timepoint and used as immersion liquid during the
14 second imaging timepoint.

15 Imaging of spine calcium activity was done using isoflurane anesthesia and a resonant scanner
16 system at 15 Hz (Olympus MPE-RS) and continuous monitoring as stated above (section “*chronic in*
17 *vivo* imaging of neuronal activity”). Images were acquired using a 25x/1.05 dipping cone water-
18 immersion objective (Olympus) with a zoom of 4x and a pixel size of 249 nm pixel⁻¹. Fluorescence of
19 mCerulean3 and cpVenus^{CD} was collected in a cyan and yellow channel, respectively, using barrier filter
20 pairs.

21 We observed no signs of photodamage in both healthy animals and c-MS animals over the imaging
22 period using these imaging conditions. Animals showing signs of traumatic damage after window
23 implantation were excluded from the analysis. We observed no obvious difference in the fraction of

1 spines with elevated calcium between the two stated methods of anaesthesia or when the dura mater was
2 removed before imaging.

3 Electron microscopy

4 For electron microscopy, perfusion was performed on anesthetized mice with 5 mL HBSS, followed
5 by 30 mL fixative (2.5% glutaraldehyde, 4% paraformaldehyde in phosphate buffer). Brains were
6 extracted and further post-fixed for 8 h at 4°C in the same fixative. Afterwards, sagittal sections were
7 done using a tissue slicer (Alto). The slice containing the cytokines (or sham) injection site were collected
8 and further post-fixed with 2% OsO₄ and 1.5% Ferrocyanide (Science Services), dehydrated by ethanol
9 then acetone and Epon-embedded (Serva). 50 nm ultrathin sections from the area corresponding to the
10 imaging site (2-3 mm away from injection) were contrasted with 4% uranyl acetate (Science Services)
11 and lead citrate (Sigma). The imaging was done on a TEM Jeol 1400+ (Jeol) equipped with a ruby camera
12 (8M pixel, Jeol). The qualifications for the density of layer 1 myelin sheath was done within 60 µm from
13 the brain surface at 4000X on 720 µm² areas and the synaptic density was measured at the same depth at
14 8000X on 185µm² areas.

15 Flow cytometry

16 To isolate phagocytes from brain, 4 groups of *Ccr2^{RFP} x BiozziABH* mice (n=3, n=3, n=10, and n=10
17 in healthy control, MOG immunized, c-MS day3 mice treated with vehicle, and c-MS day3 mice treated
18 with CSF1-R inhibitors (Sanofi)) were transcardially perfused with ice-cold PBS directly after blood
19 withdrawal and brains were isolated. Tissue was cut in small pieces and digested in RPMI containing
20 2% fetal calf serum (Sigma-Aldrich, 10082147), 25mM HEPES (Sigma-Aldrich, H0887), DNase I
21 (10ng/ml, StemCell Technologies, 07900) and Collagenase D (0,8mg/ml, Roche, 11088866001) for 30
22 min at 37°C. Digestion was stopped by adding 1:100 dilution of 0.5M EDTA (Sigma-Aldrich) solution.
23 After filtering the suspension through 70 µm cell strainers (Falcon, 10788201), it was resuspended in

1 cold Dulbecco's PBS (Sigma, D8537) and centrifuged for 5 min at 1500 r.p.m. . Supernatants were
2 discarded and the pellet was resuspended in 25% solution of Percoll (Sigma-Aldrich, P1644). After 30
3 min of gradient centrifugation at 10.800 r.p.m., the myelin and red cells layers were removed and the
4 remaining solution was filtered through 70 μ m cell strainers (Falcon, 10788201). Dulbecco's PBS
5 (Sigma, D8537) was added and the supernatant was discarded after 5 min centrifuge at 1500 r.p.m. .
6 Stainings were performed in ice-cold PBS following LIVE/DEAD staining (1:400, Invitrogen, L34957)
7 for 30 min and Fc-receptor blockade (CD16/32, 1:400, BD Pharmingen, 55314) for 15 min. The
8 following antibodies were used: Alexa Fluor 700 anti-mouse CD45 (1:400, Biolegend, 103128), APC-
9 Cy7 rat anti-CD11b (1:300, BD Pharmingen, 557657), APC anti-mouse CD40 (1:100, Biolegend,
10 124612), PE/Cy7 anti- mouse CD86 (1:100, Biolegend, 105014) and BV711 rat anti-mouse MHC II (I-
11 A/I-E) (1:200, BD Horizon, 563414) incubated for 30 min. Afterwards, cells were washed and subjected
12 to analysis. Cells were sorted on a FACSAria Fusion cell cytometer (BD Biosciences) and results were
13 analyzed by FlowJo software.

14 RNA extraction, library preparation and sequencing

15 For RNA extraction, samples were first randomized, then total RNA was extracted using the
16 Picopure RNA Isolation kit (Thermo Fisher). RNA quantification and quality assessment was performed
17 using a Nanodrop 8000 and RNA Pico 6000 (Bioanalyzer), respectively. Total RNA was diluted to 1 ng/
18 10 μ l of water prior to Oligo(dT) priming from Takara's SmartSeq v4 Ultra Low Input RNA kit. Enriched
19 mRNA was converted to full-length cDNA then amplified using 11 PCR cycles (17 cycles for very low
20 input samples). Final sequencing libraries were prepared and uniquely indexed using Illumina's Nextera
21 XT kit without modification to the standard protocol. Integrity of each sample library was assessed using
22 the DNA High Sensitivity kit and run on a Bioanalyzer 2100. Library quantification was performed using
23 Qubit then diluted to 1nM and pooled together. To prepare for sequencing, pooled libraries were
24 denatured with NaOH then diluted to 1.8 pM according to Illumina's denaturation protocol for a

1 NextSeq500. Sequence runs were performed on an Illumina NextSeq500 using the High output kit and
2 a 2x76bp paired end run.

3 CSF1/LPS stimulation and phagocytosis assays

4 Primary murine microglia were isolated with immunopanning and plated at 50k/well in PDL-coated
5 96-well plates and rested overnight. For the stimulation assay, cells were treated with CSF1-R inhibitor
6 (100nM, Sanofi) for 24 hours. CSF1 (100ng/mL) or LPS (10ng/mL) was then added for an additional 24
7 hours and culture supernatants were collected and assayed for MCP-1 (CCL2) or IL-12p40 with ELISA.
8 For phagocytosis assay, cells were treated with vehicle (DMSO) or CSF1-R inhibitor (100 nM and 500
9 nM, respectively, Sanofi) for 30 minutes at 37°C, 5% CO₂. Cells were then stimulated with CSF1 (100
10 ng/mL) for 30 minutes. Human synaptoneurosomes were prepared using the following protocol: 36.22
11 μL crude synaptoneurosomes were generated and combined with 63.78 μL 0.1M sodium bicarbonate
12 and 1 μL pHrodo Red (Invitrogen). The synaptoneurososome mixture was incubated at room temperature
13 for 45 minutes in the dark. The mixture was then washed with PBS twice and finally re-suspended in
14 200 μL media. This labeled synaptoneurososome stock was then diluted in media (100 μL stock in 8 mL
15 media) and 100 μL added to each well. Plates were then imaged in the Incu-Cyte Live Imaging System
16 (Sartorius) for 8 hours, measuring red object counts in primary murine microglia cells. The experiment
17 was repeated in n =3 litters with n=4 wells per group.

18 **Quantification and Statistical Analysis**

19 Histopathological analysis

20 To evaluate CD3 and Mac-3 positive cells an image was chosen at the distance of 1700 to 2000 μm
21 from the midline on both hemispheres using Panoramic viewer software (3D-Histech) and rotated using
22 Irfanview software. Images were imported in ImageJ software⁷³, cortical layers I, II-IV and V were
23 determined and cell counter plugin was used to evaluate each layer. For Bielschowsky's staining, 2

1 parallel lines with a distance of 150 μm were located on each images sampled from the abovementioned
2 area and the crossing filaments from each line was counted to evaluate axon density. For quantification
3 of the density of CD4 and CD8 positive cells a region of interest was selected on each hemisphere at the
4 distance of 1000 to 2000 μm from the midline and the cells were counted using cell counter plugin. In
5 the same region, c-Fos and c-Jun positive cells were evaluated as a percentage of counterstained cells.
6 MBP areas were quantified applying a custom rule-set in Definiens Developer XD (Definiens AG,
7 Version 2.7.0). Cortical regions were first manually selected and regions were rotated so that the cortical
8 layers were horizontally oriented. Tissue was detected and cortical layers were automatically defined by
9 their distance to the tissue-background border. Color deconvolution was applied to separate DAB and
10 counterstain. MBP signals in the DAB channel were considered positive if above a defined intensity
11 threshold. Total DAB+ area was reported for each region individually.

12 Confocal image processing and analysis

13 Post-processing of presented confocal images was done using the open-source image analysis
14 software ImageJ⁷³ and Photoshop (Adobe). Further image processing steps are stated in the text or figure
15 legends.

16 Reconstruction of cortical pyramidal neurons

17 Confocal images used for analyzing spine density were deconvoluted with Huygens Essential
18 version 16.05 (Scientific Volume Imaging, The Netherlands, <http://svi.nl>) using maximum 70 iterations
19 and the classical MLE algorithm. Cortical pyramidal neurons were reconstructed using Volume
20 Integration and Alignment System (VIAS) software⁷⁴. Semi-automatic tracing of the apical dendrite and
21 spines was performed by NeuronStudio software^{74,75}. For analyzing spine density over time and
22 evaluating the therapeutic effects of CSF1-R inhibitor compound, dendritic stretches located at the layers
23 III to IV with a dendritic radius of 0.55 to 1 μm coming from pyramidal layer V neurons were chosen.

1 Neurons were located 1000 to 2000 μm from the midline, contralateral to the injection site and in a
2 distance of maximum 600 μm caudal to the injection. Default classification of spine types by
3 Neuronstudio software (mushroom, stubby and thin) in automatically detected spines showed reduction
4 of all spine types in c-MS mice at d3 compared to healthy controls (n=62 and n=48 dendritic stretches
5 from each group, respectively; percentage of each spine type to normalized healthy control: mushroom:
6 62.77 \pm 3.43 %; thin: 80.92 \pm 5.70 %; and stubby: 76.42 \pm 5.26 %; mean \pm SEM; two-way ANOVA followed
7 by Bonferroni's multiple comparisons test reveals significant reduction vs. healthy control for mushroom
8 spines (p<0.001), thin spines (p<0.05) and stubby spines (p<0.01).

9 Analysis of excitatory and inhibitory synapse density

10 Three images within layers III-IV located at 1000 to 2000 μm from the midline were acquired from
11 each hemisphere of coronal brain sections at a distance of 270 μm caudal to the injection site or a similar
12 area in the healthy controls. Synaptic contacts were analyzed using a custom algorithm in cognition
13 Network Language (Definiens Developer XD software, Version 2.7.0, Munich, Germany). First, nuclei
14 were excluded from the area to analyze based on DAPI signal. Synaptic markers were counted as
15 positive, if they were at least 20% brighter than the tissue background in the corresponding color channel.
16 Objects smaller than 16 pixel² were excluded. Remaining objects were split based on intensity using a
17 watershed algorithm and their shapes stored as a binary image. To quantify putative synaptic contacts
18 each synaptic structure was first reduced to its center of gravity to create non-overlapping points. These
19 points were then again grown into their respective signals based on the binary images until touching a
20 neighbouring image object. For each object, the number of contacts to neighboring objects was
21 quantified. Data was summarized with R (R-project, version 3.6.1; R Core Team (2014). R: A language
22 and environment for statistical computing. R Foundation for Statistical Computing, Vienna, Austria.
23 URL <https://www.R-project.org/>). Synaptic contacts per μm^2 were averaged over six images per animal
24 for each staining and reported. Ratio of excitatory to inhibitory synapses were calculated per animal.

1 Phagocyte infiltration and activation

2 Overview images were segmented in cortical layers using a nucleic acid stain (NeuroTrace) and
3 analyzed in ROIs 1000-2000 μm laterally to the midline. In the MHC II channel, five ROIs were located
4 in the background area and the mean and the standard deviation (SD) of the intensity was determined in
5 each image. Signals above the mean+3SD of the background intensity were considered as positive for
6 MHC II. Numbers of $\text{CX}_3\text{CR-1}^{\text{GFP}}$ cells, co-labelling of $\text{CX}_3\text{CR-1}^{\text{GFP}}$ and MHC II immunofluorescence
7 and numbers of Ccr2^{RFP} cells or $\text{Iba-1}^{\text{positive}}$, $\text{CX}_3\text{CR-1}^{\text{GFP}}$ negative cells were analyzed using the cell
8 counter plugin (ImageJ) and reported per volume. Microglial activation is presented as % of MHC II
9 positivity of all $\text{CX}_3\text{CR-1}^{\text{GFP}}$ cells. For accessing the effect of CSF1-R inhibitor compound, three
10 counting frames (200 x 200 μm) per section (six sections per animal) were chosen in layers III-IV at
11 1000 to 2000 μm contralateral to the cytokine injection. For generating the heatmap of inflammation,
12 cells were evaluated in counting frames of 500 x 500 μm size.

13 Analysis of synapse phagocytosis

14 At least ten individual $\text{CX}_3\text{CR-1}^{\text{GFP}}$ or Ccr2^{RFP} cells per animal were reconstructed automatically by
15 Imaris software (BitPlane, South Windsor, CT, USA) in a stack of 5.14 μm . The rendered surface was
16 used as a mask on Synapsin-1, PSD95, Homer-1 channels and the spot function was used to identify the
17 positive signals (spheres). Average intensity of five ROIs in the non-positive background were used to
18 define the threshold in each channel for visual confirmation of spheres. Spheres that were not fully
19 engulfed by the phagocytic cell or not visually confirmed were manually removed. Spheres were assessed
20 on the LAMP1 channel to evaluate colocalization. The LAMP1 channel was further masked by the cell
21 surface and the volume was automatically reconstructed to identify the LAMP1 volume per cell. In the
22 $\text{CX}_3\text{CR-1}^{\text{GFP}}$ cells Δ refers to subtraction of average volume of healthy controls from vehicle or
23 CSF1-R treated c-MS mice.

1 Analysis of neuronal activity

2 The analysis of neuronal activity recordings was performed with a custom software/graphical user
3 interface. The software aligns the single frames of the data sets using a cumulative correlation
4 maximization algorithm with the mRuby signal as reference. Using a calculated reference image (average
5 frame, denoised running average, channel difference, coefficient of variation, between others) the
6 software allows ROI definition manually or semi- automatically, providing an unique ID for each neuron.
7 The ROIs defined at previous timepoints were imported into new recordings and automatically adjusted
8 to compensate for the possible minor morphological changes. The pixels inside each ROI were averaged
9 to extract a time signal of each neuron. The baseline signal F_0 was calculated as the 10-percentile of the
10 time series in a rolling window of 6 seconds. Signal was calculated using the following formula: $dFF =$
11 $(F-F_0)/F_0$, which if necessary was corrected for neuropil contamination by subtracting a fraction (usually
12 60%) of the dFF calculated using a background ROI surrounding the neuron and excluding any other
13 marked cell. The final dFF was processed with an exponential filter with a time constant of (0,01).
14 Calcium events for the recording of each neuron were calculated using a non-negative deconvolution
15 algorithm ⁷⁶, where the resulting likelihood per frame is processed to separate the individual events by
16 summation and thresholding. The final neuronal activity for each neuron was calculated from the average
17 of 3 recordings (see *in vivo* imaging section).

18 Neuronal population correlation analysis

19 The longitudinal comparison of the neuronal activity to baseline levels was performed on neurons
20 with an activity superior or equal to 0.5 calcium event per minute on average from the baseline
21 measurements. The distribution depicted in the violin plots was obtained by calculating the change in
22 activity for every measured neuron by dividing the average activity at 3 or 17 days post injection (sham
23 or cytokines in the c-MS model) with the corresponding baseline activity. The binned neuronal activity

1 comparison from baseline to final timepoint was measured for every animal in both sham-injected and
2 cortical MS groups.

3 In order to assess the signal correlation for every neuron at each timepoint, every region was imaged
4 for three sessions (5 minutes/session), and a signal correlation matrix was obtained for each session. The
5 correlation similarity between any two such matrices is defined as the correlation of the individual entries
6 in the upper-triangular part of the correlation matrices¹³. To compare the population dynamics at any
7 given timepoint to the initial population dynamics, the similarity between all correlation matrices at the
8 given timepoint and all correlation matrices in the initial session were calculated and the resulting values
9 averaged. For the c-MS d3, c-MS d10 and c-MS d17 timepoints this involves averaging nine similarities
10 (the three signal correlation matrices at each timepoint compared to the three initial signal correlation
11 matrices). For the initial session, this similarity involved three comparisons.

12 In order to investigate the hypothesis that the c-MS data and the sham data may differ at an
13 intermediate timepoint (day 3 or 10) but recover by day 17, we fit the timecourse data for each mouse
14 with a cubic polynomial. This the simplest polynomial that can allow for the shapes we observed: both
15 a monotonic decrease over the four timepoints and a decrease followed by an increase. The experimental
16 data gave us 7 polynomials (7 areas from 4 animals) that were averaged (orange curve in **Fig 3e**). In
17 order to generate a null distribution for the average of such polynomials from the sham condition, we
18 selected 5 out of the 10 sham experiments (10 areas from 4 animals), and averaged their polynomials to
19 generate one data point in this null distribution. We repeated this for all 252 subsets of 5 choices from
20 the 10 sham experiments to obtain an approximation for the null distribution. We chose to take samples
21 of 5 out of 10 because this generates the most number of samples and allows us to approximate the null
22 distribution accurately. The null distribution is shown in black in **Fig 3e**: the median is shown in thick
23 solid black, the 5-th and 95-th percentiles are shown in dotted black and the maximum and minimum

1 values are shown in thin solid black. This analysis revealed that at day 3, and only at day 3, the red
2 experimental line is outside the null distribution. This was confirmed by performing an *a*
3 *posteriori* Mann-Whitney test for the difference of the distributions at day 3 (p-value=0.035). The
4 software Matlab (R2018b) was used to perform the correlation and polynomial analysis.

5 Dendritic and spine calcium levels

6 For analysis of Ca²⁺ levels in spines and dendrites using the Twitch2b sensor signal, the CFP and
7 YFP (FRET) channels were individually visualized in a greyscale look-up table to determine the region
8 of interest. Fluorescence intensities of the spine head or 5 regions in the dendrites shaft were measured
9 in the CFP and YFP channels, respectively, and nearby non-neurite areas were selected for background
10 correction. As we detected crosstalk from the CFP to the YFP channel (not vice-versa), we corrected the
11 YFP signal by subtracting the measured crosstalk-fraction of the CFP signal. Background-corrected
12 YFP/CFP ratios were interpreted as a proxy of Ca²⁺ concentration as previously established for the used
13 FRET-based calcium sensor. We excluded spines that exhibited a signal-to-noise ratio < 5.2, as measured
14 in YFP channel. Spines or dendrites were considered to be Ca²⁺-elevated/high if YFP/CFP ratios showed
15 elevation greater than mean plus 3 standard deviations of the ratios measured in healthy control animals.
16 When datasets measured at two different microscope systems were plotted together, data was normalized
17 to the respective control mean measured on each system. Population analysis of spine and dendritic Ca²⁺
18 and analysis of CSF1-R inhibitor treatment experiments was performed by an investigator blinded to the
19 treatment status. For dynamic analysis of spine fate with and without EGTA application, per region 10
20 dendrites including all spines were identified in both timepoints (t₁ =0 h and t₂ = 2 h) and measured. To
21 confirm stability of net loss rates, a third imaging timepoint (4 h) was evaluated for a subgroup of
22 animals, showing a net loss rate of 20 % for high Ca²⁺ spines between 2 and 4 hours of imaging (n = 4 c
23 MS mice) as compared to 27 % between 0 and 2 hours of imaging (see **Figure 4g**). Data was stratified

1 and grouped according to Ca^{2+} decrease ($[\text{Ca}^{2+}_{t2}] < ([\text{Ca}^{2+}_{t1}])$), Ca^{2+} increase ($[\text{Ca}^{2+}_{t2}] > 2 \times [\text{Ca}^{2+}_{t1}]$), spine
2 loss (not detectable in t_2) using a custom R script.

3 For the assessment of spine calcium activity, resonant scanner-derived images were acquired (see *In*
4 *vivo* imaging section) and registered using a custom Matlab script. Spine and nearby non-neurite
5 background ROIs were manually defined and measured over time in the CFP and YFP channels as stated
6 above. Background-corrected YFP/CFP ratios were interpreted as a proxy of Ca^{2+} concentration. Raw
7 values were smoothed by removing single outlier values (negative, >15) and using a 3-neighboring
8 average algorithm. Baseline drift was assessed using a 10s moving average and, when no drift was
9 observed, overall baseline mean and standard deviation calculated. Spiking activity was defined as
10 above-threshold activity (baseline mean plus 2 SD) for $> 0.25\text{s}$ and calculated as frequency (min^{-1}).

11 Ratiometric images presented in this work were processed as follows: in ImageJ, intensity
12 projections of 3D stack sections were created from CFP and YFP images individually and a binary
13 thresholded mask of dendritic outlines was generated from the image channel with higher signal-to-noise
14 (after application of pixel outlier filters). Projection images were each multiplied by the binary mask and
15 the resulting images divided by each other (YFP/CFP). The resulting image was pseudo-colored with a
16 custom look-up table spanning from blue (low Ca^{2+}) via red to yellow (high Ca^{2+}) hues. Images were
17 exported as RGB images to Photoshop, greyscale images were additionally despeckled.

18 RNA sequence data analysis

19 Data analysis was completed using Omicsoft Array Studio. On average, each sample was sequenced
20 at a depth of 52 million paired-end reads. Illumina adaptors were stripped during the BCL to FastQ
21 conversion. All raw data was QC'd using the "Raw Data QC" function within Array Studio. Poor quality
22 reads were filtered out using a Q score cutoff of 20. Following the above filter criteria, about 41 million
23 paired-end reads per sample were uniquely mapped to the B38 Mouse Reference Genome using the

1 Ensembl.R90 Gene Model. Raw counts were then converted to FPKM using the “Report Gene/Transcript
2 Counts” function in Array Studio. FPKM was filtered using a cutoff of 0.1 then normalized using the
3 75th quantile. A constant of 1 was added to all normalized FPKM data prior to a Log2 transformation.
4 This data was used in all downstream analysis including Principal Component Analysis (PCA),
5 heatmaps, t-tests and pathway analysis (Ingenuity). Outliers (a total of nine) were confirmed visually
6 using PCA plots as well as Hierarchical Clustering (unsupervised). t-tests were generated using the
7 General Linear model in Array Studio. Pathway analysis was completed using fold change and p-values
8 obtained via TTests and imported into Ingenuity (Qiagen).

9 snRNA-seq data analysis

10 Raw single-nucleus RNA-sequencing data from multiple sclerosis and control brains acquired by
11 Schirmer and colleagues was obtained from the NCBI Sequence Read Archive (SRA) under the
12 accession number PRJNA544731 ⁷⁰. In this analysis a total of 48,919 single-nucleus profiles derived
13 from snap-frozen brain tissue sections encompassing the cortical gray matter with attached meninges and
14 underlying subcortical white matter (12 tissue blocks from 10 progressive MS patients and 9 tissue blocks
15 from 9 controls patients) were analysed as described in more detail in Schirmer et al.⁷⁰. The expression
16 matrix containing the UMI per gene reads in each nucleus was obtained by demultiplexing the raw data
17 with Cell Ranger software (10x Genomics, Pleaston, USA). Data clean-up, filtering, transformation and
18 scaling, dimensional reduction, clustering and differential gene expression analysis was done using the
19 Seurat package ⁷⁷ in R (R-project, version 4.0.2; R Core Team (2020). R: A language and environment
20 for statistical computing. R Foundation for Statistical Computing, Vienna, Austria. URL [https://www.R-](https://www.R-project.org/)
21 [project.org/](https://www.R-project.org/)). Filtering thresholds were adjusted according to Schirmer et al. ⁷⁰. After t-Stochastic
22 neighbor embedding (t-SNE) and subsequent cluster analysis, the distribution of the expression levels of
23 CSF1R, CSF1 and IL34 were analyzed. To map CNS cell types to the clusters, the expression levels of
24 the following marker genes were assessed (according to Schirmer et al. ⁷⁰: P2RY12 (microglia), AQP4

1 (astrocytes), PLP1 (oligodendrocytes), SLC17A7 (excitatory neurons) and GAD2 (inhibitory neurons).
2 Clusters of cells expressing the respective marker genes were subjected to further analysis. Cluster 23
3 was comprised of cells expressing both P2RY12 and PLP1 and, was therefore, excluded from further
4 analysis. Likewise, cluster 28 was excluded from further analysis since it exclusively encompassed cells
5 derived from MS samples.

6 Statistical analysis

7 Sample sizes were chosen according to previous *in vivo* imaging studies³⁰. Statistical significance
8 was calculated with Prism (Versions 6.0 and 7.0, Graphpad) using ANOVA and t-tests (where normal
9 distribution could be assumed) or Kruskal-Wallis and Mann-Whitney U test (where non-normal
10 distribution was suspected and confirmed by Shapiro-Wilk test) as described in the figure legends. Data
11 are expressed as the mean \pm standard error of the mean. Obtained p-values were corrected for multiple
12 comparisons and stated as significance levels in the figure legends. In all analyses $p < 0.05$ was considered
13 statistically significant.

14 **Data and code availability**

15 All data is available in the manuscript or the supplementary materials. Raw data is available upon
16 reasonable request to the corresponding author. The codes used to perform the cross correlation analysis
17 and the codes of the graphical user interface used to analyze the calcium events are publically available
18 on the github repository: <https://github.com/portugueslab/Jafari-et-al-2020>. The codes used to reanalyze
19 the snRNA-seq data from Schirmer et al. are publically available on the github repository: https://github.com/engelsdaniel/schirmer_reanalyzed .
20

1 **References**

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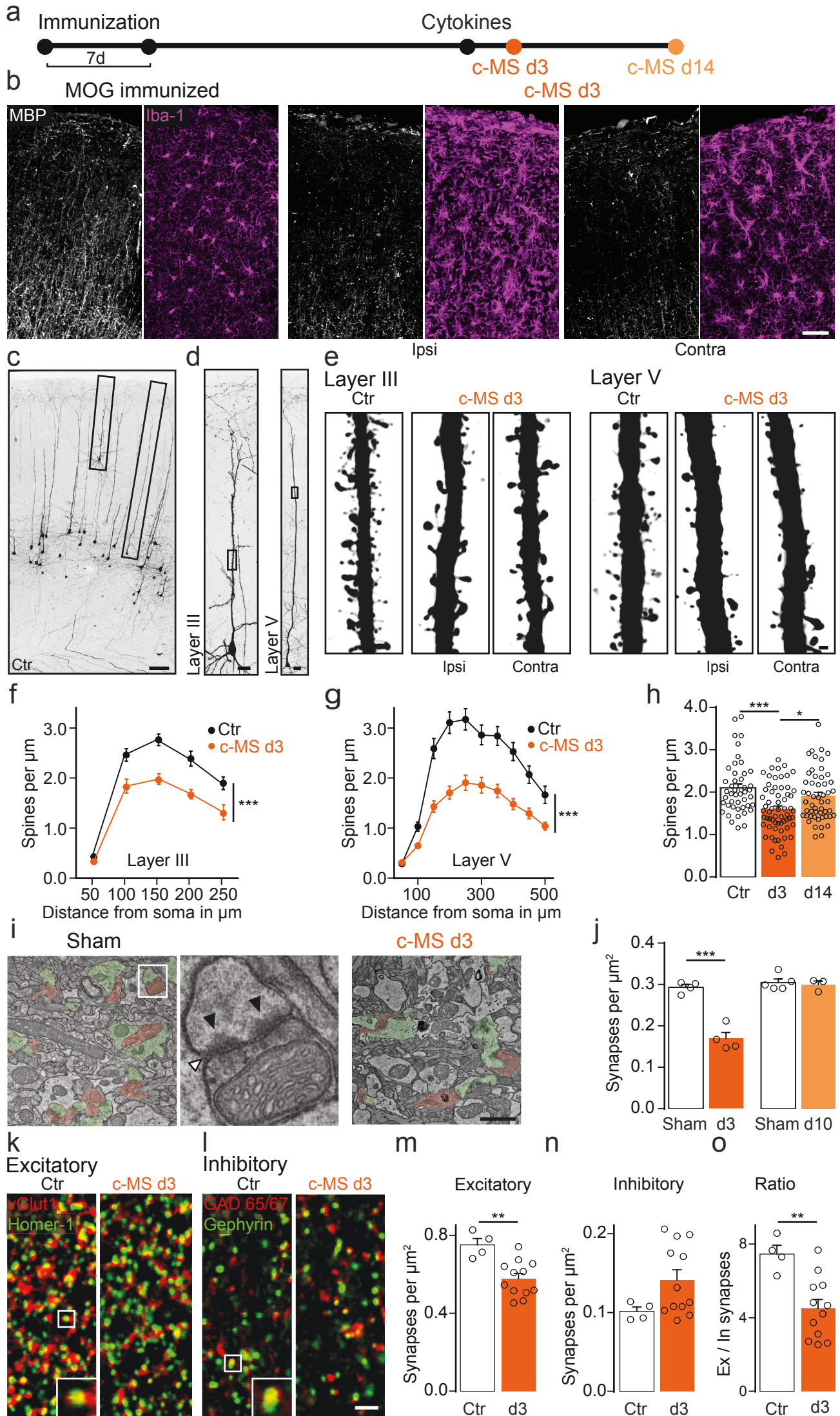
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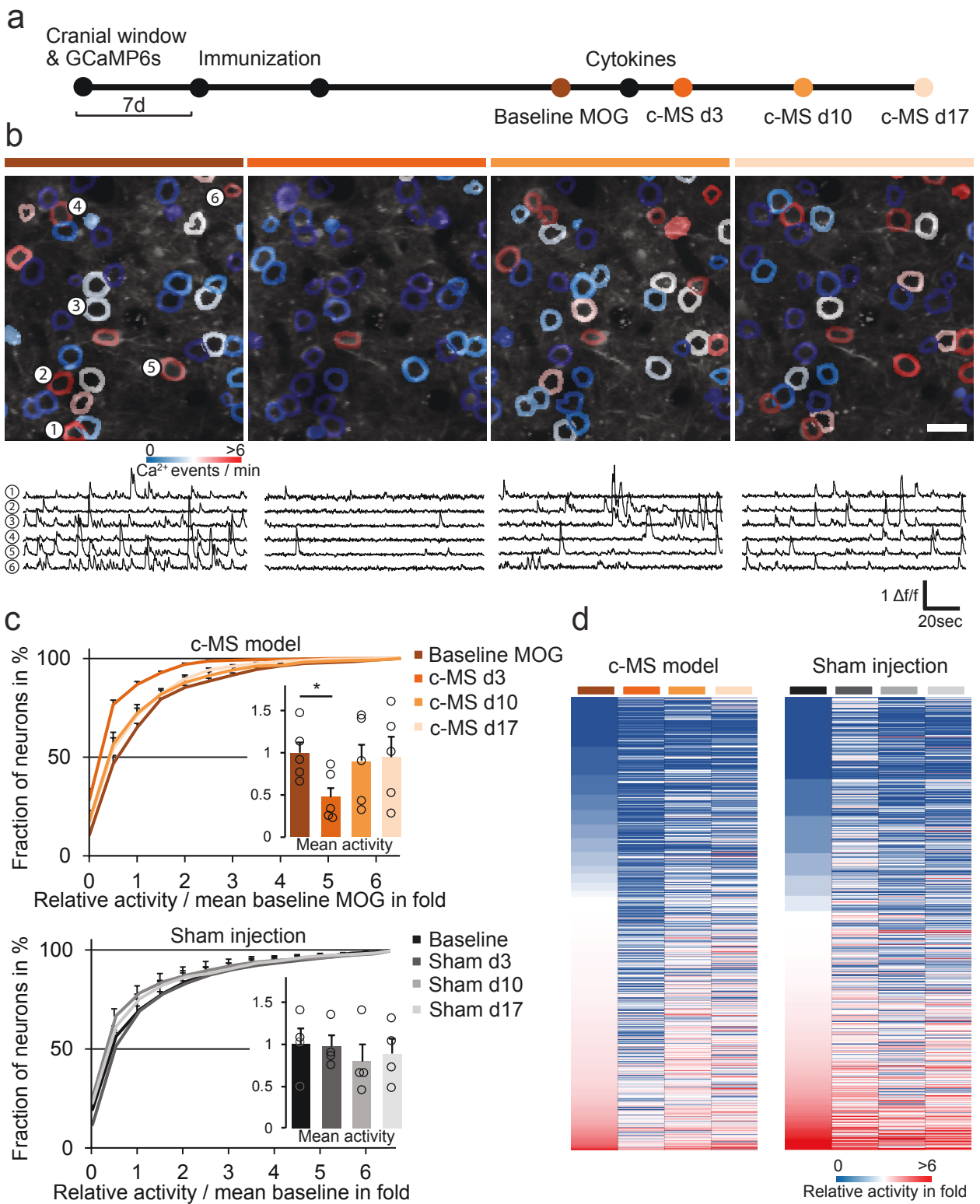
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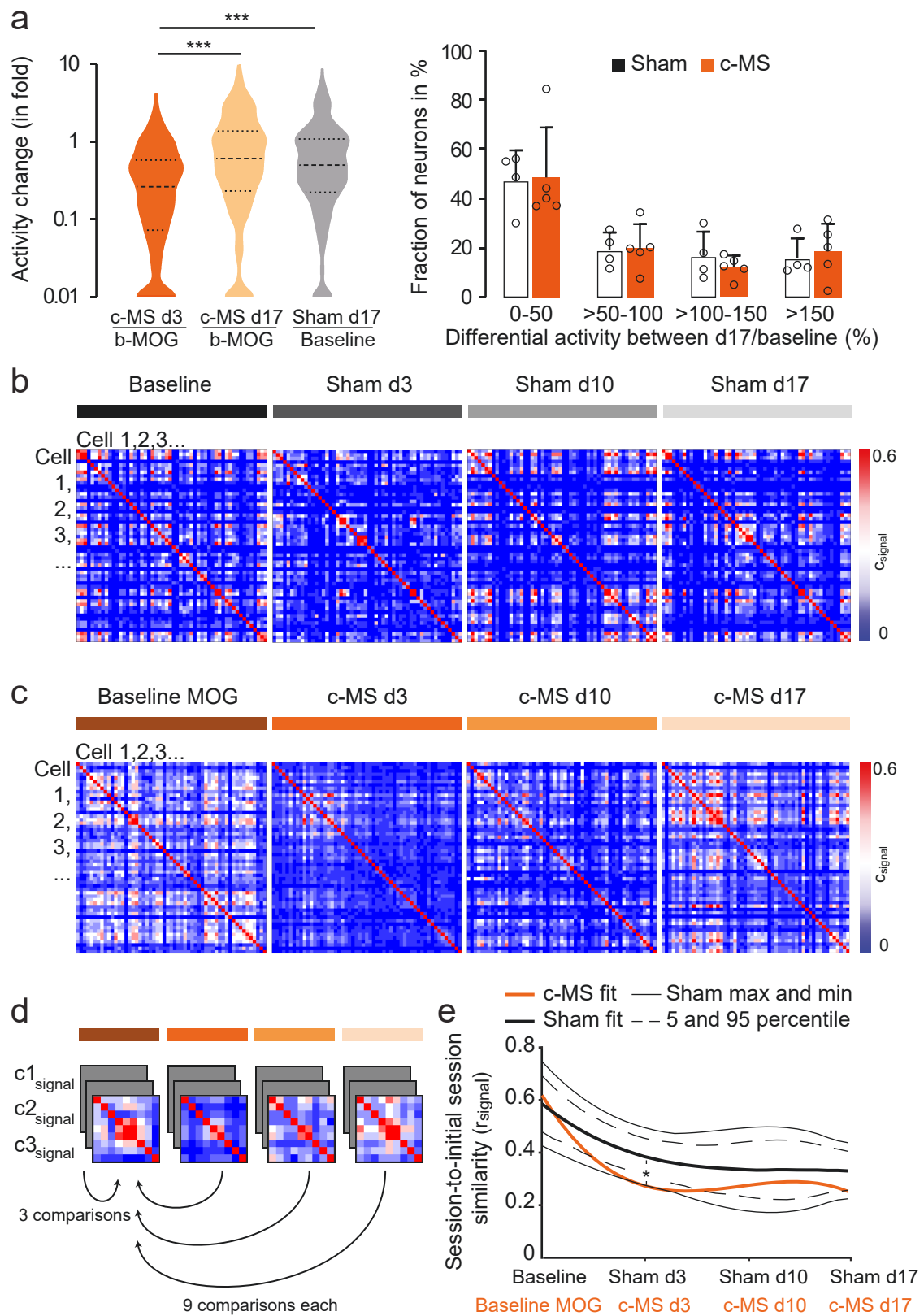
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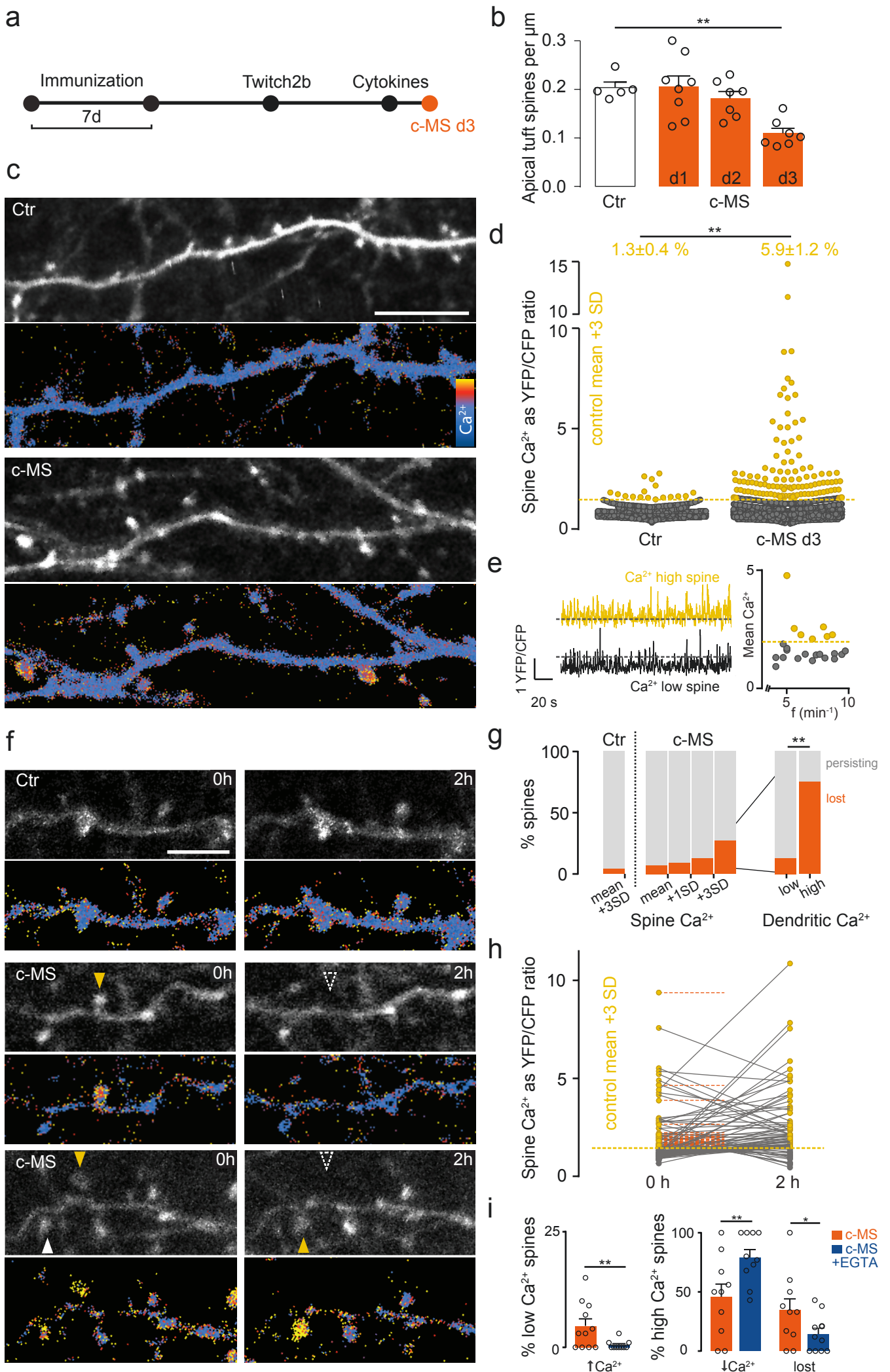
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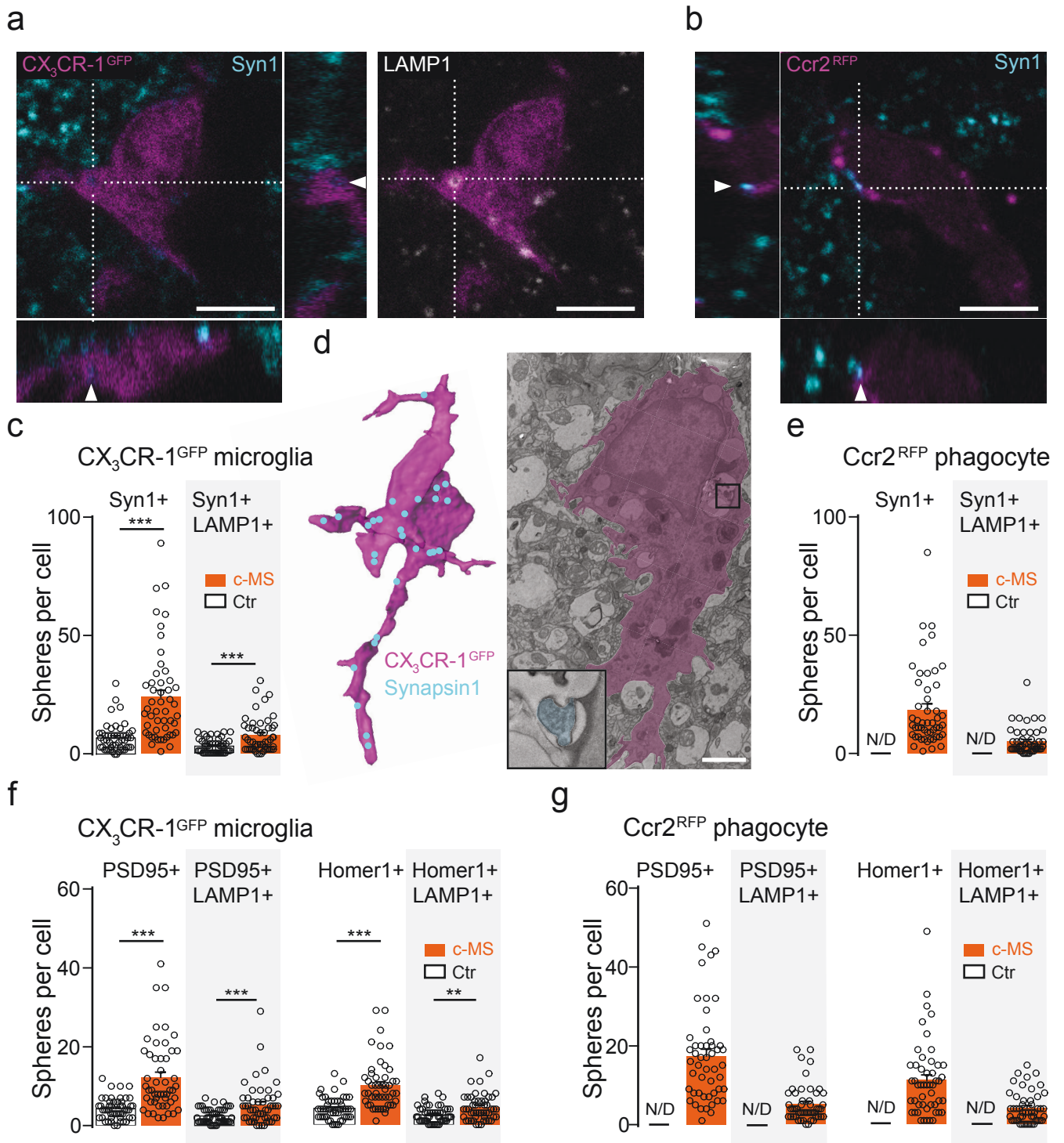


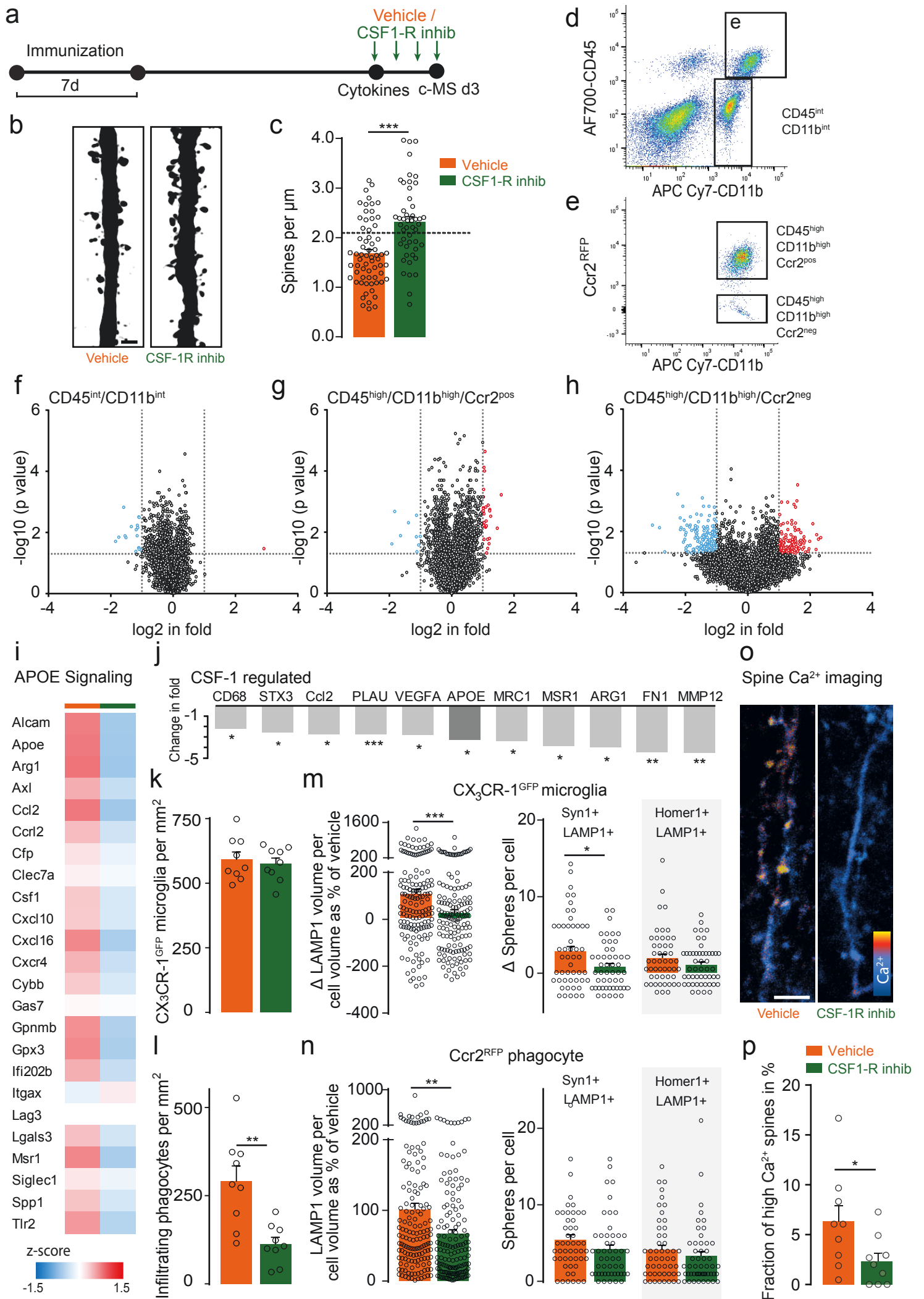
Jafari et al. - Figure 1











Supplementary Information for

Local calcium accumulations promote phagocyte-mediated synapse removal in cortical neuroinflammation

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This PDF file includes:

Supplementary Figure 1-12
Captions for Supplementary Movie S1

Other Supplementary Materials for this manuscript include the following:

Movie S1

Supplementary Figure 1 - Histopathological and clinical characterization of a mouse model of cortical multiple sclerosis.

(a) EAE score of the c-MS d3 (n=8) and c-MS d14 mice (n=9) used in **Fig 1h**. Black dots represent EAE scores before and orange dots EAE scores after cytokine injection (n=17 mice from immunization to c-MS d3 timepoint and n=9 mice plotted until c-MS d14 perfusion time point; mean \pm SEM). (b) Cortical spine density on d3 post cytokine injection does not show an obvious correlation with EAE score on d3 (n=114 dendritic stretches from n=17 mice; $r=0.13$, $p=0.16$; data derived from **Fig1 h**). (c) Spine density on d3 post cytokine injection does not correlate with average EAE score during the experiment (n=114 dendritic stretches from n=17 mice; $r=0.12$, $p=0.21$; data derived from **Fig1 h**). (d) Schematic of the experimental design to study histopathological changes in the cortex of age-matched control (Ctr; black), MOG immunized (brown), only cytokine injected (violet) and cortical MS model (c-MS d3, orange) mice. (e) Bielschowsky's staining was used to analyze axonal density in each layer. Representative images depict Bielschowsky's staining in layer I of Ctr and c-MS d3 mice (**left, middle**, respectively), axonal density was normalized to average density of the Ctr group (**right**). (f) MBP staining was used to analyze myelin density in each layer. Representative images depict MBP staining in layer I of Ctr and c-MS d3 mice (**left, middle**, respectively), MBP density was normalized to average density of the Ctr group (**right**). (g) CD3 staining was used to analyze T cells density in each layer. Representative images depict CD3 staining in layer I of Ctr and c-MS d3 mice (**left, middle**, respectively), CD3⁺ cell density (**right**). (h) Mac-3 staining was used to analyze mononuclear phagocytes density in each layer. Representative images depict Mac-3 staining in layer I of Ctr and c-MS d3 mice (**left, middle**, respectively), Mac-3⁺ cell density (**right**). Data shown as mean \pm SEM; (n= 5, 5, 6 and 6 mice in each group). Scale bars in **e**, 15 μm ; **f**, 45 μm **g** and **h**, 25 μm . Two-way RM ANOVA followed by Bonferroni's multiple comparisons test has been performed in **e-h**. *** P<0.001, **P<0.01, *P<0.05.

Supplementary Figure 2 – Cortical spine loss in c-MS mice compared to mice immunized only with MOG or injected only with cytokines.

(a) Spine density along the apical dendrite of layer V pyramidal neurons in healthy control (Ctr) mice and MOG immunized animals without cytokine injection (n=21 neurons from n=7 and 8 mice in each group, respectively; mean \pm SEM). (b) Spine density along the apical dendrite of layer V pyramidal neurons in healthy control mice and non-immunized mice 3d after cytokine injection analysed ipsi- and contralateral to the injection site (n=21, 8 and 13 neurons from n=7 and 10 mice in each group, respectively; mean \pm SEM). (c) Spine density along the apical dendrite of layer V pyramidal neurons in healthy control and c-MS d3 animals analysed ipsi- and contralateral to the injection site (n=21, 17 and 11 neurons from n=7 and 8 mice in each group, respectively; mean \pm SEM; data derived from **Fig1 g**). Two-way RM ANOVA followed by Bonferroni's multiple comparisons test has been performed in **a-c**. *** P<0.001. The same Ctr group replotted in all three graphs.

Supplementary Figure 3 – Layer V projection neurons are silenced in a model of cortical multiple sclerosis.

(a) Scheme of the experimental timeline to study longitudinal activity in apical dendrites of layer V projection neurons in the cortical MS model (c-MS) by *in vivo* imaging of *Thy1-GCaMP6f* x *BiozziABH* mice. (b) *In vivo* multiphoton image of layer V apical dendrites over the course of c-MS through a cranial window; **left**, before cytokine injection (baseline MOG) and **right** 3 days (c-MS d3) post cytokine injection. **Top**: Merged GCaMP6f and autofluorescence channels allow the identification of apical dendrites (green only). **Middle**: GCaMP6f channel masked and color-coded for cytoplasmic Ca²⁺ events per minute. **Bottom**: Representative calcium activity traces displayed as delta f/f for the four apical dendrites marked in the middle panel. (c) Cumulative plots representing activity for the entire population of apical dendrites for each selected time point over the course of the cortical MS model. **Insets**: Mean activity normalized to baseline for MOG shown as mean ± SEM (n=3 c-MS mice, Shapiro-Wilk and paired t-test). (d) Heat map representation of ranked activities for single dendrites between baseline MOG and c-MS d3. (e) Spine density of dendritic stretches of pyramidal layer V neurons from c-MS d3 mice used in **b-d** (imaged area was used for quantification) and control mice (n=30 and n=40 dendritic stretches from n=3 and n=4 mice, respectively; mean ± SEM, unpaired t-test). Scale bar in **b**, 20µm. **P < 0.01, *P<0.05.

Supplementary Figure 4 - Recording the activity of single cortical neurons over time in the cytokine-injected gray matter.

(a) **Top:** Schematic of experimental design for longitudinal *in vivo* imaging of Ca^{2+} transients in layer II/III somatosensory neurons upon injection of cytokines in healthy animals, using the GCaMP6s Ca^{2+} indicator delivered via viral gene transfer (AAV1.hSyn1.mRuby2.GCaMP6s). **Middle, Bottom:** Longitudinal *in vivo* multiphoton images of the same layer II/III neurons before and after cytokine injection; from **left to right** respectively: baseline, 3 days, 10 days and 17 days post cytokine injection. **Middle:** Grayscale images of GCaMP6s channel masked and color-coded for cytoplasmic Ca^{2+} events per minute. **Bottom:** Representative Ca^{2+} activity traces displayed as $\Delta f/f$ for the neurons marked in the left panel. (b) Cumulative plots of the neuronal activity for the entire population of neurons investigated at different timepoints after cytokine injection in healthy animals. **Inset:** Mean neuronal activity normalized to baseline for each time point shown as mean \pm SEM (n=4 cytokine injected mice, tested with Shapiro-Wilk test and one-way ANOVA). (c) Heat map representation of the single neurons' activities before and after cytokine injection. Scale bar in **a**, 20 μm .

Supplementary Figure 5 – Myelination recovers more slowly than neuronal activity.

(a-c) Top: Schematic of experimental design for longitudinal *in vivo* SCoRe imaging of myelin within the top 50 μm of layer I in the somatosensory cortex of sham injected mice **(a)**, c-MS mice **(b)** and in cytokine injected non-immunized mice **(c)**. **(a-c) Bottom:** Longitudinal *in vivo* SCoRe images of the same layer 1 area. From **left to right** respectively: **(a)** baseline, 3 days, 10 days and 17 days post sham injection. **(b)** MOG baseline, 3 days, 10 days and 17 days post cytokine injection. **(c)** baseline, 3 days, 10 days and 17 days post cytokines injection. **(d)** Percentage of SCoRe signal compared to baselines for sham and cytokine only injection and to baseline MOG for the c-MS model, 3 days, 10 days and 17 days post injection shown as mean \pm SEM (n=3 for sham, cytokine only and c-MS mice, Shapiro-Wilk test and one-way ANOVA followed by Bonferroni's multiple comparisons test has been performed). **(e)** Electron micrographs of the cortical layer I of sham injected **(left)** and c-MS mice **(right)** showing myelin sheath (black arrowheads) 3 days post injection. **(f)** Myelin sheath density in layer I of somatosensory cortex in sham injected and c-MS mice at 3 days and 10 days post injection shown as mean \pm SEM (tested in n=4 sham injected and n=4 c-MS mice for day 3 and n=5 sham injected and n=3 c-MS mice for day 10, Shapiro-Wilk test and one-way ANOVA followed by Bonferroni's multiple comparisons test). Scale bar in **a, b, c**, 20 μm ; **e**, 1 μm . ***P<0.001, *P<0.05

Supplementary Figure 6 – Ratiometric imaging of calcium levels in the somata and dendrites of cortical neurons.

(a) *In vivo* multiphoton projection images of layer II/III neuronal somata and their Ca²⁺ levels in c-MS mice. Neurons were labelled using the viral vector AAV1.hSyn.mRuby2.Gcamp6s (see Methods), allowing for ratiometric measurements (GCamp6s/mRuby) of baseline neuronal Ca²⁺ concentration. Grayscale images of GCamp6s channel (**top**), ratiometric (GCamp6s/mRuby) images masked and color-coded for cytoplasmic Ca²⁺ (**bottom**). (b) *In vivo* multiphoton projection images of apical tuft dendrites and their Ca²⁺ levels in acute c-MS (d2/d3) mice, labelled with AAV1.hSyn1.Twitch2b. Grayscale images of YFP channel (**top**), ratiometric (YFP/CFP) images masked and color-coded for cytoplasmic Ca²⁺ (**bottom**). Example of a high Ca²⁺ dendrite exhibiting swellings (arrowheads). (c) Ca²⁺ concentration of single somata in control (sham injection, ‘Ctr’) and c-MS (d3) mice, plotted as GCamp6s/mRuby channel ratios normalized to control mean. 95% Confidence Interval 0.99-1.01 for control mean and 0.86-0.89 for c-MS mean. **Top:** Percentage of somata per animal with Ca²⁺ concentration > 3SD above control mean, shown as mean ± SEM (tested per animal in n=2 control and n=3 c-MS mice, Mann-Whitney U test). (d) Ca²⁺ concentration of single dendrites in healthy control (‘Ctr’) and c-MS d3 animals, plotted as YFP/CFP channel ratios normalized to control mean. 95% Confidence Interval 0.74-0.78 for control mean and 0.75-0.80 for c-MS mean. **Top:** Percentage of dendrites per animal with Ca²⁺ concentration >3SD above control mean, shown as mean ± SEM (tested per animal in n=8 control and n=17 c-MS mice, Mann-Whitney U test). Scale bars in **a, b**, 10 µm.

Supplementary Figure 7 – Temporal and spatial characteristics of monocyte infiltration and microglial activation in the c-MS model.

(a, b) Confocal projection images of cortex in healthy control (Ctr, **left**) and c-MS d3 (c-MS d3, **right**) *CX₃CR-1^{GFP} x Ccr2^{RFP} x BiozziABH* mice. (a) Immunostaining for MHCII (red), as a marker of microglial activation, overlaid on the GFP signal of resident microglia (greyscale). (b) RFP signal of infiltrating phagocytes shown in red. (c) **Left:** Percentages of activated microglia (% MHCII positive/ all CX₃CR-1^{GFP} cells) in healthy control (Ctr), only immunized (MOG), only cytokine injected (Cyto) and c-MS d3 mice. **Middle:** Time course of microglial activation (in %) 3 days, 7 days and 21 days after induction of cortical MS model (d3, d7, d21). **Right:** Distribution of microglial activation (in %) within the layers of the cortical column (Layer I, Layer II-IV and Layer V) and between injected (ipsilateral, ‘ipsi’) and non-injected hemisphere (contralateral, ‘contra’). c-MS d3 data plotted in all 3 panels. Shown as mean ± SEM (tested per animal in n=2 control, n=2 MOG, n=3 Cyto, n=3 c-MS d3 mice; one-way ANOVA; Left: $F_{3,6}=54.87$, Middle $F_{2,6}=441.6$). (d) **Left:** Numbers of infiltrating phagocytes (*Ccr2^{RFP}* cells) per standardized volume in healthy control (Ctr), only MOG immunized (MOG), only cytokine injected (Cyto) and c-MS d3 mice. **Middle:** Time course of phagocyte infiltration 3 days, 7 days and 21 days after induction of cortical MS model (d3, d7, d21). **Right:** Distribution of phagocyte infiltration within the layers of the cortical column (Layer I, Layer II-IV and Layer V) and between injected (ipsilateral) and non-injected hemisphere (contralateral). c-MS d3 data plotted in all 3 panels. Shown as mean ± SEM (tested per animal in n=2 naive, n=2 only MOG immunized, ‘MOG’, n=3 only cytokine injected, ‘Cyto’, n=3 c-MS d3 mice; one-way ANOVA; Left: $F_{3,6}=24.47$, Middle $F_{2,57}=38.32$). (e) Color-coded spatial matrix (11x8 squares) representing microglial activation (in %) of healthy control (Ctr, n=3, **left**) and c-MS d3 mice (n=3, **right**) mice ipsi- and contralateral to the cytokine injection site. (f) Color-coded matrix showing numbers of infiltrating phagocytes (*Iba-1* positive, CX₃CR-1^{GFP} negative cells) in healthy control (Ctr, n=3, **left**) and c-MS d3 mice (n=3, **right**) ipsi- and contralateral to injection site. Scale bar in **a** (applies also to **b**) 100 μm. ***P<0.001, **P<0.01, *P<0.05.

Supplementary Figure 8 – Treatment with CSF-1R inhibitor does not alter T cell infiltration into gray matter

(a) Image of CD4 immunostaining of c-MS d3 mice treated with vehicle (**left**, inset shows higher magnification, red arrowheads indicate CD4 positive cells). Quantification of the density of CD4 positive cells quantified ipsilateral and contralateral to the injected hemisphere in c-MS d3 mice treated with vehicle or CSF1-R inhibitor (**right**; n=5 mice per group; mean \pm SEM; no significant difference was detected, unpaired t-test). (b) Image of CD8 immunostaining of c-MS d3 mice treated with vehicle (**left**, inset shows higher magnification, red arrowheads indicate CD8 positive cell). Quantification of the density of CD8 positive cells quantified ipsilateral and contralateral to the injected hemisphere in c-MS d3 mice treated with vehicle or CSF1-R inhibitor (**right**, n=5 mice per group; mean \pm SEM; no significant difference was detected, unpaired t-test). Scale bar in **a** and **b** is 100 μ m.

Supplementary Figure 9 – *In vitro* and *in vivo* effects of CSF1-R inhibitor treatment on CNS phagocytes

(a) Isolated primary murine microglia (untreated) show elevated MCP-1 (CCL2) after treatment with CSF-1. While adding DMSO does not change the levels of MCP-1, CSF1-R inhibitor treatment decreases the levels of MCP-1 in primary murine cells (n=3 in all groups, one-way ANOVA). (b) Isolated primary murine microglia (untreated) show elevated Il-12p40 after treatment with LPS. While adding DMSO does not change the levels of Il-12p40, CSF1-R inhibitor decreases the levels of Il-12p40 in primary murine cells (n=6 for untreated cells and n=5 for the other groups, one-way ANOVA). (c-e) FACS analysis of cell populations in brains of healthy controls (Ctr), MOG immunized and acute c-MS model mice treated with vehicle or CSF1-R inhibitor (n=3 mice were analyzed for healthy control and MOG immunized groups, n=10 mice were analyzed in c-MS model groups; mean \pm SEM): (c) shows the proportion of CD45^{int}/ CD11b^{int} cells (**left**) and their expression of CD40, MHCII and CD86 (**right**), (d) shows the proportion of CD45^{high}/ CD11b^{high}/ Ccr2^{neg} cells (**left**) and their expression of CD40, MHCII and CD86 (**right**), (e) shows the proportion of CD45^{high}/ CD11b^{high}/ Ccr2^{pos} cells (**left**) and their expression of CD40, MHCII and CD86 (**right**). (f) Different doses of CSF1-R inhibitor show no effect on the phagocytic activity of unstimulated primary mouse microglia, measured by uptake of pHrodo red-labeled synaptoneurosomes (n=4 wells per group). (g) CSF1 stimulation of primary mouse microglia leads to increased phagocytic activity. Treatment with 500 nM of CSF1-R inhibitor abrogated this effect (n=4 wells per group). One-way ANOVA followed by Tukey's multiple comparisons test was used in left panels, and two-way ANOVA in right panels of c-e. Two-way ANOVA in f-g. *** P<0.001, *P<0.05.

Supplementary Figure 10 – Confocal microscopy images illustrating the effect of CSF1-R inhibitor on CNS phagocytes

(a, b) Confocal projection images of cortex in a c-MS d3 *CX₃CR-1^{GFP} x BiozziABH* mouse treated with vehicle (**left**) or CSF1-R inhibitor (**right**). (a) GFP signal of resident microglia shown in greyscale. (b) Immunostaining for Iba-1 (red) overlaid on the GFP signal of resident microglia (greyscale). Yellow arrowheads indicate infiltrating Iba-1 positive, GFP negative phagocytes. (c, e) Xy/yz/xz-views of *CX₃CR-1^{GFP}* or *Ccr2^{RFP}* cells (magenta) treated with vehicle (**left**) or CSF1-R inhibitor compound (**right**) showing Synapsin1(**up**) or Homer-1 (**down**) inclusions (cyan) colocalized with LAMP1 staining (white). (c) Xy/yz/xz-views of *CX₃CR-1^{GFP}* cells (magenta) treated with vehicle (**left**) or CSF-1R inhibitor compound (**right**) showing Synapsin1 (**up**) or Homer-1 (**down**) inclusions (cyan) colocalized with LAMP1 staining (white). (e) Xy/yz/xz-views of *Ccr2^{RFP}* cells (magenta) treated with vehicle (**left**) or CSF-1R inhibitor compound (**right**) showing Synapsin1 (**up**) or Homer-1 (**down**) inclusions (cyan) colocalized with LAMP1 staining (white). Scale bar in **a** and **b** 50 μ m. Scale bar in **c** and **d** 10 μ m.

Supplementary Figure 11 – Expression pattern of CSF1R and its ligands in human brain tissue

(a) t-Stochastic neighbor embedding (t-SNE) with subsequent cluster analysis of single-nucleus RNA-sequencing results (48,919 single nucleus profiles) from cortical gray matter and adjacent white matter of 12 progressive MS tissue blocks and 9 control tissue blocks published in Schirmer et al. . Distinct clusters are color-coded. (b) t-SNE plots with relative gene expression of CSF1R and its ligands CSF1 and interleukin 34 (IL34) highlighted in red. (c) t-SNE plots with relative gene expression of marker genes for identification of cell-specific clusters (as used in Schirmer et al.) highlighted in red. (d) Graphical representation of the expression of CSF1R, CSF1 and IL34 in selected cell clusters in MS and control samples. The diameter of each dot encodes the percentage of cells that express the respective gene within each cluster (the corresponding reference dots are shown in black on the bottom) and was calculated separately for cell clusters mapping to MS or control cases. The red color encodes the relative expression level of a given gene in all cells within the cluster.

Supplementary Figure 12 – Expression of immediate early genes in cMS mice treated with CSF1-R inhibitor

(a) c-Fos immunostaining in c-MS d3 mice treated with vehicle or CSF-1R inhibitor (inset shows higher magnification, red arrowheads indicate c-Fos positive cells). (b) Proportion of c-Fos positive cells among other haemalaun counterstained cells in layers II to IV in the ipsilateral or contralateral hemispheres of c-MS mice receiving vehicle or CSF1-R inhibitor (n=5 mice per group; mean \pm SEM; no significant difference was detected, unpaired t-test). (c) c-Jun immunostaining in c-MS d3 mice treated with vehicle or CSF1-R inhibitor (inset shows higher magnification, red arrowheads indicate c-Jun positive cells). (d) Proportion of c-Jun positive cells among other haemalaun counterstained cells in layers II to IV in the ipsilateral or contralateral hemispheres of c-MS mice receiving vehicle or CSF1-R inhibitor (n=5 mice per group; mean \pm SEM; no significant difference was detected, unpaired t-test.) Scale bar in a and c is 100 μ m.

Caption for

Supplementary Movie 1 - Activity of single cortical neurons over the course of the cortical MS model.

Movie generated using FIJI software from 15 Hz recordings and displayed at 100 frames per second with a walking average of 3 (60 second recordings per time point).

