

Assessing the contribution of the chemical exposome to neurodegenerative disease

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- 1 Perspective
- 2 Assessing the contribution of the chemical exposome to neurodegenerative
- 3 disease

4

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23 Abstract

- 24 Over the past few decades, numerous environmental chemicals from solvents to pesticides have 25 been suggested to be involved in the development and progression of neurodegenerative diseases. 26 Most of the evidence has accumulated from occupational or cohort studies in humans or laboratory 27 research in animal models, with a range of chemicals being implicated. What has been missing is a 28 systematic approach analogous to genome-wide association studies that have identified dozens of 29 genes involved in Alzheimer's disease, Parkinson's disease, and other neurodegenerative diseases. 30 Fortunately, it is now possible to study hundreds to thousands of chemical features under the 31 exposome framework. This commentary explores how advances in mass spectrometry make it 32 possible to generate exposomic data to complement genomic data to better understand 33 neurodegenerative diseases.
- 34

35 **Text**

- 36 With increasing longevity, age-related neurodegenerative diseases have become major causes of
- disability and mortality^{1,2}. The two most common neurodegenerative diseases, Alzheimer's disease
- 38 (AD) and Parkinson's disease (PD), affect more than 45 million and 6 million persons worldwide,

39 respectively. AD manifests clinically by progressive impairment in memory, learning and executive

- 40 functions. PD is characterized by motor symptoms, including bradykinesia, tremor, and postural
- instability, as well as a range of non-motor symptoms. Both AD and PD include long preclinical and
 prodromal periods during which pathophysiological processes evolve silently over years before
- prodromal periods during which pathophysiological processes evolve silently over years before
 leading to progressive symptoms in later ages. Drugs and/or surgery are available for symptom relief,
- 44 and novel therapies are emerging to slow disease progression in AD but thus far no intervention can
- 45 substantially alter the course of the disease processes^{3,4}. Despite their diverse clinical manifestations,
- 46 neurodegenerative diseases share common mechanisms⁵. Misfolded protein aggregation in specific
- 47 brain areas (β -amyloid and tau in AD and α -synuclein in PD, although some overlap in the aggregated
- 48 proteins has been reported) is considered a neuropathological hallmark of these diseases. Moreover,
- 49 in both pathologies, proteinopathy is accompanied by a disruption of multiple molecular pathways
- 50 affecting neurons and non-neuron cells, including: protein degradation systems, mitochondrial
- 51 function, blood brain barrier (BBB) permeability, glial cell-mediated neuroinflammatory processes as
- well as basic neurophysiology mechanisms⁵. All these processes contribute to neurodegeneration
 and lead to neuronal death.
- 54 Such commonalities in pathogenesis suggest there may be some common causes in
- 55 neurodegenerative diseases, although no common etiological factor, beyond age, has been
- 56 identified. Both PD and AD (in their sporadic forms, which represent the vast majority of cases) are
- 57 multifactorial diseases resulting from a combination of genetic and environmental risk factors⁶. The
- 58 multiple susceptibility loci identified so far are specific to each disease (e.g. APOE4 for AD, SNCA and
- 59 *LRRK2* for PD) and only explain a portion of the disease burden^{7–9}. Established non-genetic risk
- 60 factors for AD include female sex, lifestyle (e.g. physical inactivity, unhealthy-Western-style diets),
- 61 cardiometabolic health, psychosocial factors and air pollution,¹ while the level of current evidence
- 62 with pesticide exposure is moderate¹⁰. In PD, males are at higher risk and there is evidence that
- 63 exposure to pesticides in occupational populations (e.g., farmers) and to solvents such as
- trichloroethylene contribute to disease development, while nicotine and caffeine are potential
 protective factors^{2,10,11}. However, compared to lifestyle or metabolic factors, there has been little
- 66 study of the wide array of potentially neurotoxic chemicals originating from agricultural, industrial, or
- 67 household sources.
- 68 Here we survey epidemiological and experimental evidence relating the chemical component of
- 69 exposome (i.e., chemicals individuals are exposed to from various environmental sources) to
- 70 neurodegenerative diseases. We focus on pollutants that mostly result from anthropogenic activities
- and have been involved in toxicology pathways. We identify gaps and pitfalls in existing research and
- 72 we formulate a roadmap for next-generation studies in order to push forward exposome research in
- 73 neurosciences and the methodological innovations that have accompanied this conceptual
- 74 revolution.

75 Our chemical environment in the Anthropocene

- 76 Chemicals are ubiquitous in modern life. More than 100,000 chemicals are currently used worldwide, and the production continues to increase.¹² Some chemicals are directly used, either alone or as 77 78 mixtures, in agricultural, industrial and household activities including pesticides, solvents or metals 79 (Figure 1A). Other contaminants are emitted into the air from natural or anthropogenic combustion 80 processes, including fine particulate matter of less than 2.5 microns of diameter (PM_{2.5}), gases, and 81 organic compounds (e.g. dioxins). Some synthetic chemicals are added by the industry to consumer 82 products for their technological properties. These include polychlorinated biphenyls (PCBs), flame 83 retardants (FRs), per-fluorinated compounds (PFAS), plasticizers including recognized endocrine 84 disruptors (bisphenols, phthalates), and other cosmetic and food additives. Many of these chemicals 85 have half-lives of several years and are persistent in the environment including the food chain, 86 resulting in chronic exposures for human populations, even after their use has been banned or 87 restricted. Several of these compounds have been listed as Persistent Organic Pollutants (POPs)
- 88 under the Stockholm convention because of their high lipophilicity, their resistance to xenobiotic

- 89 metabolism, and their recognized persistence in the environment. Recognized POPs include
- 90 organochlorine pesticides, first generation brominated flame retardants (BFRs), dioxins, PCBs, and
- 91 some long-chain PFAS; additional substances are continuously included. POPs have been
- 92 progressively prohibited in most countries and replaced by novel compounds (although their long-
- 93 term safety is unknown), but human populations remain continuously exposed (e.g., food
- 94 contamination). Moreover, alternative molecules have also raised concerns for the environment and
- 95 health. For example, from the 1940s until now, organochlorine pesticides were progressively
- 96 replaced by organophosphates, carbamates and pyrethroids, as well as neonicotinoids and pyrazoles.
- 97 Likewise, organophosphorus flame retardants (OPFRs) and short-chain PFAS have emerged as
- 98 alternatives to first generation brominated FRs and PFAS species. Many of these novel less persistent
- 99 substances activate toxicity pathways, e.g. oxidative stress, and because exposure is sustained, they
- 100 may exert long term effects¹³.
- 101 With increasing concern about this pollution, some large research programs on biomonitoring (i.e.
- 102 measuring exogenous chemicals and their transformation products in the human body, usually blood
- 103 or urine) have started mapping the exposure of humans to environmental contaminants. Hence, the
- 104 US National Health and Nutrition Evaluation Survey demonstrated that the general US population is
- 105 commonly exposed to metals, POPs, solvents and non-persistent chemicals¹⁴. More recently, the
- 106 large-scale European Human Biomonitoring Initiative measured actual exposure to multiple
- 107 contaminants found at concentrations that, in some cases, exceeded available human guidance
- 108 values (i.e. internal levels below which there is no appreciable health risk). Certain exposure
- biomarkers of non-persistent substances were detected in almost 100% of individuals¹⁵. Both US and
 EU initiatives highlight disparities in human exposure due to geographical specificities or
- socioeconomic factors^{14,15}. However, while these current initiatives help rank these substances
- 112 (several hundreds) as priority toxic substances, the vast majority of our multi-chemical world remains
- 113 so far uncharacterized. Furthermore, the agencies responsible for regulation of these compounds,
- the European Food Safety Authority (EFSA) and European Chemical Agency (ECHA) in the EU and the
- 115 Environmental Protection Agency (EPA) in the U.S. operate in most cases under a model that
- examines one chemical at a time, which limits the ability to evaluate formulations and complex
- 117 multiple exposures.

118 The exposome concept

- 119 Capturing all the environmental exposures faced by an individual represents a major challenge due to
- 120 geographical specificities or socioeconomic factors which also vary during the lifetime. To address
- 121 these unmet challenges, a novel holistic concept has been envisioned that provides a systematic and
- 122 comprehensive analysis of the environmental factors an individual is exposed to during their
- 123 lifetime¹⁶. The *exposome* integrates, in a single framework: external exposures that arise from the
- 124 outside milieu (Figure 1B panel 1); biological fingerprints of these exposures in biofluids (Fig. 1B.2);
- susceptibility factors which modulate biological responses to the environment (Fig. 1B.3); and the
- biological alterations resulting from the cumulative toxicity of those exposures (Fig. 1B.4). The
- 127 temporal dimension of the exposome is key to the development of chronic diseases particularly for
- 128 diseases such as AD and PD which develop silently over years. There may be critical time-windows for
- exposures; for example, the development of a healthy brain is critical for the constitution of a
- 130 cognitive reserve and is a central component of resilience mechanisms in AD. Thus, child exposure to
- 131 chemicals could affect neurodevelopment and lead to neurodegenerative diseases in adulthood,
- 132 underlining the importance of geographical exposomes over the life-course of an individual.

133 Chemical stressors and neurodegenerative diseases

134 Epidemiology of chemical exposures and neurodegenerative diseases. A majority of research has

- 135 focused on pesticides, metals, solvents and fine particulate matters (**Table 1**). The most consistent
- associations have been found between occupational exposure to pesticides and the risk of PD, and

AD to a lesser extent^{10,17}. Hence, increased risk among pesticide users were estimated at 50% for AD

and >65% for PD^{17} , and PD is now recognized as an occupational disease for French farmers and for

US veterans exposed to the Agent Orange. However, specific substances have remained difficult to

incriminate so far, although there is evidence that some herbicides (e.g. paraquat) and insecticides
 (e.g. organochlorine) might increase PD risk¹⁰. In both AD and PD, research in the general population

(e.g. organochlorine) might increase PD risk¹⁰. In both AD and PD, research in the general population
 which can be exposed to lower levels of pesticides has been more limited, with, at best, emerging

evidence supported by a few studies^{18–23}. Progress in modelling ambient air exposure in the vicinity

of fields enabled pesticide-wide association studies in PD¹⁹. Recent biomarker-based studies

- 145 demonstrated that low-grade exposure resulted in quantifiable circulating levels and increased
- disease risk. For example, nearly 4-fold higher serum levels of the organochlorine insecticide
- 147 dichlorodiphenyldichloroethylene (DDE) was found in AD cases versus controls²⁰, and twice more

Lewy pathology were reported in the presence of the organochlorine insecticide heptachlor epoxide
 in brain tissue donors²¹.

150 Metals have been widely investigated through biomarkers, mostly in case-control studies^{24,25},

although the weight of evidence was low overall. Evidence with metals in both occupational and non-

152 occupational populations have been generally insufficient except for occupational manganese

exposure and PD^{24,25}. Solvent exposure was also suggested to play a role in PD and AD in

154 occupational settings^{26–29}, but similarly to metals, prospective studies have been very limited and the

155 weight of evidence is low overall. Moreover, studies are lacking on exposures in the general

156 population, i.e., solvent use in domestic activities or exposure from food or ambient air, although

research in this field is emerging, such as recent studies linking trichloroethylene in contaminated

158 water and ambient hydrocarbon solvents (e.g. xylene) with higher risk of PD^{11,19}.

Among ubiquitous pollutants in the general population, the strongest epidemiological evidence so far has been obtained with $PM_{2.5}$ level in ambient air^{30–32}. Each increase in $PM_{2.5}$ air concentration of 10

161 μg/m³ (US EPA annual standard) may increase the risk of all-cause dementia, AD and PD by

approximately 30%, 65% and 15%, respectively³¹. In contrast, most synthetic additive chemicals (e.g.

163 FRs, PFAS, preservatives) have received little attention and there is insufficient evidence in exiting

164 epidemiological literature to date, except from studies using biomarkers of the U.S. NHANES in

relation with cognitive function³³⁻³⁶. Overall, although the use of biomarkers in general populations

have started developing, research linking large-scale exposure assessment to specific health

167 outcomes is only in its infancy.

168 Vulnerability of neurodegeneration-related mechanisms to chemical toxicity. The brain is highly vulnerable to the toxicity of environmental stressors³⁷. Human studies identified a potential role of 169 lead, PCBs and air pollution in attention-deficit hyperactivity disorder and autism in children³⁸. 170 Moreover, preclinical studies have shown that exposure to various chemical stressors during in-utero 171 and postnatal periods promote neurodegeneration in adulthood³⁹. However, brain vulnerability to 172 173 chemicals is not limited to the developmental period and aging increases vulnerability to chemical 174 neurotoxicity, owing to the multiple age-related alterations at play in the brain (e.g., atrophy, 175 decrease in blood flow and metabolism, BBB leakage), which increase its sensitivity to xenobiotics 176 and reduce its capacity to compensate for impairment. Furthermore, experimental studies have 177 documented the impact of chemical stressors on main neurodegenerative pathways (Figure 2), with large heterogeneity in the amount of literature across chemical families⁴⁰. Metals, pesticides, organic 178 179 solvents, and combustion pollutants have been most extensively studied, while research on synthetic 180 additive chemicals such as FRs and plastic-related endocrine-disrupting compounds is only emerging. In all chemical classes, general neurotoxic pathways such as oxidative stress, mitochondrial 181 182 dysfunction, and disruption of neurotransmission have been the most investigated so far. Yet the 183 impact of certain pollutants on pathways specific of neurodegenerative diseases (misfolded protein 184 aggregation) and on key associated mechanisms is also emerging in the literature, especially neuroinflammation which appears affected by widespread pollutants such as airborne PM2.5^{41,42}. 185 Research also suggests potential pleiotropic effects on multiple neurodegenerative pathways for 186

non-persistent insecticides such as organophosphate pesticides, pyrethroids and neonicotinoids⁴²,
 thus raising increasing concern in the scientific community.

189 Gaps in science and unmet challenges to study the impact of chemicals on 190 neurodegenerative diseases

191 Integrating all routes of exposures and widening the list of chemicals of emerging concern. Routes of 192 exposure for a given contaminant have been rarely characterized exhaustively. In neurosciences, 193 exposure to pesticides in the general population is often studied through ambient air pollution 194 models, ignoring intake through contaminated foods⁴³. Furthermore, toxicology and 195 neuroepidemiology have investigated relatively few molecules, many of them being already 196 restricted⁴⁴, and have ignored most recent exposures of potential concern. Biomonitoring has only 197 recently been used to link internal exposure to neurological impacts. 198 Non-persistent pesticides such as neonicotinoids and pyrethroids remain poorly studied, in spite of 199 emerging concern for their neurotoxicity. Compared with older non-persistent insecticides, like 200 organophosphates, neonicotinoids act selectively on insect nicotinic acetylcholine receptors and 201 have low affinity for vertebrate receptors, which reduces toxic risk in those non-target species⁴⁵, 202 although this theory has been challenged by experimental data showing a wide range of toxic effects 203 in various animal species, including mammals. Pyrethroids target the nervous system of insects 204 primarily by inhibiting voltage-gated sodium channels, but due to similarities in neural function, they 205 also have neurotoxic properties in non-target organisms⁴⁶. The gradual increase in neonicotinoids and pyrethroids in the environments raises the risk of toxicity to human populations, while there is 206 currently limited knowledge on their long-term effects on organisms ^{45–49}. Likewise, many ubiquitous 207 208 chemicals in modern life (e.g., FRs, fluorosurfactants, plasticizers, food, and cosmetic additives) have 209 been overlooked, in spite sometimes of their structural or chemical proximity with banned 210 compounds. For example, many of these contaminants contain halogen groups (fluorine, chlorine, bromine) that are fat-soluble and may thus penetrate the brain easily and exert direct neurotoxicity 211 212 effects. Besides, while the literature supports a role of large particle pollution (PM_{2.5}) in neurodegenerative diseases³¹, less is known about smaller particles⁵⁰, especially micro- and 213 214 nanoplastics (released from the breakdown of plastic wastes) and engineering nanoparticles 215 (synthesized by the chemical industry for their technological properties). Due to their small size, 216 nanomaterials can sorb various pollutants on their surface (e.g. metals), cross biological barriers and 217 reach the brain and exert neurotoxicity^{51–53}. Finally, besides xenobiotics, there are many natural 218 chemical compounds in the chemical exposome, such as microbial-derived compounds that are 219 known to regulate multiple aspects of brain health. Hence, associations of, e.g., bile acids, 220 neurotransmitters and short-chain fatty acids produced by microbial fermentation of certain dietary fibers, with neurodegenerative diseases have been reported^{54,55}. As the gut microbiota contributes to 221 222 the metabolisms of certain xenobiotics (e.g. polyphenols), interactions between both xenobiotic 223 chemicals and microbial metabolites are also likely, but they have been underexplored. 224 In addition, some molecular pathways have been less investigated than others. For instance, while 225 approximately half of the experimental studies mentioned oxidative stress in our scoping review, 226 neurovascular dysfunction (a strong risk factor for neurodegeneration) was considered in less than 5% of them, despite the interest in the BBB as a toxicology biotarget⁵⁶. Studies have been centered 227 on neurons and less on non-neuronal populations such as glial cells in spite of their central role in 228 229 brain functions. Similarly, the impact of pollutants on intercellular communication remains poorly 230 understood, with novel mechanisms implicating extracellular vesicles, currently emerging⁵⁷. Thus, a 231 significant portion of the chemical exposome of neurodegenerative diseases remains to be 232 deciphered.

Extrapolating preclinical models to human health. Experimental studies are limited by constraints,
 such as the use of systemic routes of administration for animal models (e.g., intraperitoneal
 injections) which are not representative of real life⁵⁸. Also, the internal exposure characterized by a
 slow release of POPs from adipose tissue (or potentially the myelin sheath), remains relatively

- 237 unexplored. Similarly with *in vitro/ex vivo* experimental studies, exposing cells or tissues to a given
- chemical does not accurately reflect real-life exposure patterns, which include exposure to the
- parent compound as well as its metabolites formed within the live body sometimes by other tissues.
- 240 This is of particular importance since various metabolites were demonstrated to be more neurotoxic
- than their parent compound, such as chlorpyrifos-oxon and chlorpyrifos⁵⁹, desnitroimidacloprid and
- imidacloprid⁶⁰. New *in vitro* models could partially overcome these deficiencies, for example brain
- 243 organoids, *in vitro* models of brain blood barriers or organs-on-chip models.
- 244 <u>Refining predictive neurotoxicology</u>. The toxicological impact of chemicals depends on various
- factors, which together determine the kinetics, dynamics and metabolism of compounds. As with
- other diseases, an incomplete understanding of chemical toxicokinetics clearly impedes our ability to
- decipher the impact of chemicals on neurodegenerative diseases. Physiologically based
- pharmacokinetic (PBPK) tools allow to model the distribution of pollutants within an organism by
 compartmentalizing it (liver, muscle, brain). The overarching aim is to determine exposure levels at
- which a given chemical which penetrates the body is likely to reach the brain and exert adverse
- 251 effects along with deciphering the factors which determine these toxicokinetic and toxicodynamic
- parameters. This is particularly challenging in neurosciences since the permeability of the BBB is
- 253 selective and variable according to chemicals.
- 254 In addition to PBPK, the development of Adverse Outcome Pathways (AOPs) is expected to strongly
- support predictive toxicology (<u>https://aopwiki.org/</u>). An AOP describes a sequence of molecular,
- cellular and organ-level events named key events (KE) which ultimately lead to an adverse outcome
- 257 such as a neurodegenerative disease. The robustness of an AOP depends on strong experimental and
- 258 human evidence which validate the sequence of events. If an AOP is robust enough, then it may
- allow to predict an adverse outcome when a KE is modulated by a chemical. For example, an AOP
- leading to PD is described at <u>https://aopwiki.org/aops/3</u>. Unfortunately, very few AOPs related to
- 261 neurodegenerative diseases have been developed so far.
- 262
- 263 Deciphering mixture effects. Single exposure assessment has prevailed in research for practical 264 reasons, although it does not reflect the multiplicity of co-exposures in real life and fails to capture 265 the potential additive or synergistic effects of chemicals that likely underlie the impact of the 266 chemical exposome on health⁶¹. There is biological rationale in joint investigation of compounds with 267 close chemical structure or common biotargets, as they may have additive effects or potentiate each 268 other regarding toxicological hazard (e.g. activating the same KE). Hence, for example, exposure to a 269 mixture of As, Cd, and Pb at environmentally-relevant concentrations in rats increases the content of 270 cerebral amyloid beta at higher levels than the sum of effects of each metal tested individually⁶². In humans, higher circulating polybrominated diphenyl ethers (PBDEs) were associated with impaired 271 memory only in adults with high serum PCBs levels⁶³, suggesting potential synergy between these 272 273 compounds. Alternatively, co-exposure may be defined based on the co-persistence of compounds in 274 the environment, such as with Cd and chlorpyrifos which both accumulate in food chains and may be 275 more likely to exert joint effects in biological systems. This was demonstrated in rats, in which low 276 dose exposures of a mixture of Cd and chlorpyrifos induced brain oxidative stress, while individual treatments did not result in any observable modification⁶⁴. The proof of concept of mixture effects 277 278 on health with moderate to low levels of exposures has been provided by some emerging 279 epidemiological science exploring co-exposures to multiple pollutants, interactions or mixture effects^{35,36,63,65}. However, mixture studies have been seldom applied to neurodegenerative diseases. 280 Exposome studies can explore and map agnostically the entire chemical exposome in populations 281 282 exposed to very different environments and identify novel potentially harmful combinations that 283 would deserve deep experimental investigations.
- 284
- 285 Profiling the internal chemical exposome through high-throughput molecular approaches

286 Measuring with accuracy all the components of the exposome represents a tremendous challenge287 which has been only very partly met so far, although new technologies have recently developed. For

- example, assessment of the external components of the exposome no longer relies on indirect tools
- 289 (such as questionnaires coupled with job-exposure matrices to evaluate occupational exposures or
- 290 Geographical Information System and spatial modeling to monitor ambient air exposures) but is also
- aided by technologies for direct measurement of exposures in real time, such as wearable sensors.
- The development of omics-based molecular approaches has allowed simultaneous analysis of
- thousands of biological entities at a large scale a technological revolution which has enabled the
- 294 development of exposomics. High-resolution mass spectrometry (HRMS)-based methods applied to 295 various matrices, allows to uncover unknown elements of the internal chemical exposome associated
- 296 with neurodegenerative diseases⁶⁶.

297 Exposomics and HRMS to look beyond the streetlamp. Omics allow the analysis of thousands of 298 components within different molecular layers underlying biological mechanisms. In addition to 299 conventional tandem mass spectrometry that can now provide robust exposure data for a selected 300 list of contaminants, the advancements of HRMS (in particular, sensitivity) combined with 301 bioinformatics developments, has allowed emergence of new generation, large-scale exposomics 302 studies. Among all omics-based approaches, HRMS is unique in that it enables to measure 303 simultaneously thousands of small molecules (generally 50–1200 Da) present in biospecimen, 304 encompassing endogenous metabolites, exogenous chemicals and their transformation products as well as the small molecules from the microbiota⁶⁶. In addition to identification of hundreds of 305 306 molecules, HRMS captures thousands of unidentified chemical features in need of characterization. 307 When applied to well-phenotyped cohorts, with ideally multiple biospecimen collection time points 308 to handle intraindividual variability in metabolite concentrations, these methods provide a unique 309 opportunity to identify chemical mixtures associated with neurodegenerative diseases. Robust 310 targeted methods that provide quantitative data can then validate the new chemical markers 311 identified (Box 1). However, implementation of exposomic studies faces numerous challenges since 312 the chemical space is highly variable (>100,000 chemicals are currently used), diverse in nature (with 313 wide ranges of physicochemical properties), heterogeneous in concentration levels from one 314 substance to another (ultra-trace substances being difficult to detect), and dynamic (in particular for 315 non-persistent chemicals with very short half-lives).66

316 Exposomics and neurodegenerative diseases. Since the first advocacy on the need for data-driven 317 exposome-wide association studies based on blood HRMS chemical profiling, the application of these 318 promising methodologies has been very limited in the neurodegenerative disease field. Some studies 319 have successfully identified blood biomarkers (for AD) implicated for instance in hypoxia, oxidative stress, as well fatty acid, phospholipid and acylcarnitines metabolism^{67–69}. Most of blood-based 320 321 biomarkers identified will then require validation; nevertheless, all these proof-of concept studies 322 support the applicability of HRMS-based to identify biomarkers that could facilitate, for instance, 323 early diagnosis. Moreover, the continuous increase of sensitivity of HRMS instruments as well as the 324 recent launch of large EU and US initiatives aiming to push forward these exposomics-based methods 325 at large scales mean that the time is ripe for this change of paradigm in neurodegenerative diseases. 326 Emerging HRMS-based pilot studies (with generally less than 50 participants) have begun identifying chemicals associated with AD or PD^{70–72}. For example, a commonly used plasticizer (bis(2-ethylhexyl) 327 phthalate) was detected in greater abundance in the cerebrospinal fluid of patients with Lewy bodies 328 329 compared with patients with AD⁷⁰. Another HRMS-based exploratory study analysed the chemical exposome and metabolome in the hair of AD patients versus controls and reported differences in 330 dietary long-chain unsaturated fatty acids, gut-derived indole metabolites and phthalates⁷¹. In 331 332 another study, an unknown halogen-containing compound was found increased in the plasma of AD 333 cases compared to controls⁷². The identity of this novel molecule might be unveiled in the future as annotation workflows and HRMS databases progress. Although some initial HRMS-based studies 334 335 have not identified the association between pesticides and PD or AD reported in experimental or

- epidemiological data, research on neurodegenerative diseases is currently too limited in the
- 337 emerging HRMS field, with populations or instruments not diverse or sensitive enough to draw any
- 338 conclusion. However, pesticides have been recently detected in large-scale biomonitoring studies in
- the general population using HRMS⁷³ so we are confident that the research effort on
- 340 neurodegenerative diseases using HRMS will soon be able to provide the relevant pesticide data.
- 341 There is an acute need to push towards future application of HRMS-based methodologies in large-
- 342 scale population-based prospective studies that could provide some breakthrough results in the
- 343 upcoming years regarding the identification of chemical signatures associated with
- neurodegenerative diseases. Initiatives underway at the National Institutes of Aging in the U.S.
- 345 appear poised to capitalize on these new technologies.

346 Conclusion

347 The past 25 years have witnessed a genomic revolution in neurodegeneration. Dozens of gene

- 348 variants have been implicated across the disease spectrum. Yet, we know from inheritance studies
- 349 that there are limits to genomic discovery. Once geneticists have identified the missing heritability
- 350 the overwhelming reality is that the environment and gene-environment interactions represent the
- 351 missing everything else. Compared to other fields, there has been a lag in exposome research on the
- 352 neurodegeneration front, maybe because those diseases pose very specific challenges: one of the
- 353 biggest research challenges is certainly the long disease development lag; while neurodevelopmental
- diseases occur early in life, the search window between exposures and diagnosis is relatively small,
- 355 whereas neurodegenerative diseases take decades to develop, making prospective studies in
- diseases of aging so much longer and difficult to implement. Although the focus here has been on the
- 357 chemical component of the exposome, it is important to note that social and behavioral factors also
- 358 play a key role in neurodegeneration. Fortunately, advances in geospatial technologies and HRMS
- 359 make it possible to link such variables to the underlying biology and chemistry. This creates
- 360 unprecedented opportunities for merging genetics with the environment in a comprehensive
- 361 manner. Future advances in neurodegeneration will necessitate integrating across many omic layers.
 362 Exposomics provides the comprehensive environmental omic layer that will help extract the maximal
- 262 information from angoing offerts in generation protoomics, and imaging
- 363 information from ongoing efforts in genomics, proteomics, and imaging.
- 364

Figures, Tables and Boxes
Figure legend
Figure 1. The chemical exposome of neurodegenerative diseases: from epidemiological concept to implementation
Figure 1A. Chemicals in modern life
Figure 1B. The exposome of neurodegenerative diseases
Panel A depicts primary sources of chemical exposures in everyday life in our modern societies. Some chemicals are used by humans either alone or as mixtures, for agricultural, industrial and domestic activities (panel A, left) and contaminate populations from occupational use but also potentially through consumption of contaminated products. These include metal trace elements, pesticides (including insecticides, fungicides and herbicides) and solvents. Other chemicals are emitted in the environment from natural or anthropogenic combustion processes (panel A, middle) and expose populations living in contaminated areas breathing or consuming contaminated air/products. These chemicals include PM2.5, gaseous pollutants (e.g., carbon monoxide, nitrogen oxides and ozone), organic compounds (dioxins and polycyclic aromatic hydrocarbons), and cigarette smoke for passive smokers. Finally, some chemicals are directly added to consumer products to improve their technological properties (PCBs; brominated and organophosphate FRs; long-chain and short-chain per-fluorinated compounds (IPFAS]; plastic-related compounds including bisphenols and phthalates; cosmetic and food preservatives/additives). These contaminants are ubiquitous in our modern life and populations are exposed by using or consuming these products. Many of these chemicals are persistent in organisms through the food chain, and toxicity (POPs refer to Persistent Organic Pollutants; see supplementary material for more details on each chemical class). These environmental (B2) components of the exposome onneyt as first conceptualized by C. Wild in the external (B1) and <i>internal</i> (B2) components of the exposome, with potential intervention of <i>moderators</i> , also referred to as susceptibility factors, which modulate biological responses to the environment, such as sex, individual genomic background and social inequalities (B3); up to the phenome (B4) which materializes the impact of the exposome on neurodegenerative diseases. In this view, the external component e

407 Abbreviations: FR: flame retardants; HRMS: high resolution mass spectrometry; PCBs: polychlorinated biphenyls; PFAS: per-fluorinated 408 compounds; PM2.5: particulate matter; POP: persistent organic pollutants.

Figure 2. Cellular and molecular pathways affected by chemical pollutants in Alzheimer's and Parkinson's neurodegenerative diseases.

412 Multiple chemical families have been involved in neurogenerative disease pathways. Metal Trace Elements (blue square), including non-413 essential toxic metals (e.g. Cd, Hg, Pb, Al, As) and essential metals with imbalanced status (Fe, Zn, Cu, Mn), have been extensively implicated 414 in mitochondrial dysfunction and oxidative stress (directly through ROS production and/or indirectly through the depletion of antioxidants 415 species)^{24,74}. POP pesticides (largely represented by organochlorine insecticides in the literature; purple square) affect a broad range of 416 pathways, including misfolded (amyloid-β) protein aggregation⁷⁵; yet most studied pathways attributed to these compounds include 417 disruption of neurotransmitter systems (norepinephrine, dopamine, GABA, glutamate) and oxidative stress⁷⁶. Other insecticides have also 418 been predominantly involved in the disruption of the cholinergic system, in particular organophosphates (to a lesser extent carbamates)⁷⁷ 419 and neonicotinoids⁶⁰. This is in agreement with their mode of action, i.e., inhibition of the acetylcholinesterase enzyme and binding to 420 nicotinic acetylcholine receptors, respectively; however, they also impact multiple other pathways including calcium dyshomeostasis (for 421 organophosphate and neonicotinoids)^{49,59} oxidative stress (for the pyrazole fipronil)⁷⁹, α -synuclein aggregation⁴⁷ and mitochondrial 422 dysfunction⁴⁸ (for, e.g. pyrethroid insecticides). In contrast to POP and non-POP insecticides that have been involved in multiple mechanisms, 423 herbicides and fungicides have been primarily involved in neurotransmitter (dopamine) system disruption⁸⁰ and mitochondrial dysfunction⁸¹ 424 respectively (although research is emerging on pathways specific of neurodegenerative diseases, such as misfolded protein aggregation). 425 Organic solvents (green square) have received less attention than pesticides or metals, but dysfunctions in mitochondria and 426 neurotransmitter systems are suspected to be central components of solvent-related neurotoxicity⁸². Combustion pollutants (PM2.5, 427 cigarette smoke, PAHs, dioxins; grey squares) have been largely implicated in the promotion of neuroinflammation and oxidative stress⁴¹, 428 albeit specific chemicals may be involved in other specific pathways. PM2.5 impair the lysosomal function and autophagic flux⁸³, dioxins 429 disrupt the permeability of the BBB⁸⁴ and the PAH benzo(a)pyrene and phenantrene impact neurotransmitter systems (e.g. 430 acetylcholinesterase and dopamine)⁸⁵. Cigarette smoke displays contrasting effects on misfolded protein production and accumulation due 431 to the dual exposure to combustion pollutants and nicotine.^{86,87} Experimental research on synthetic additive chemicals (PCBs, FR, PFAS, 432 bisphenols, phthalates and food/cosmetic additives; red and orange squares) and neurodegenerative disease-related pathways is only 433 emerging, and have so far focused on general neurotoxic pathways such as oxidative stress and disruption of neurotransmission⁸⁸⁻⁹⁰, although 434 other mechanisms begin to be suggested (e.g. long-chain PFAS may penetrate and disrupt the BBB permeability⁹¹).

435 Abbreviations: BBB: blood brain barrier; FR: flame retardants; PAH: polycyclic aromatic hydrocarbons; PCBs: polychlorinated biphenyls; PFAS:
 436 per-fluorinated compounds; PM2.5: fine particulate matter; POP: persistent organic pollutant; ROS: reactive oxygen species

438 Table 1. Overview of the epidemiological literature on chemical exposures and neurodegenerative

439

diseases

Chemical exposures		Parkinson's Disease / Motor Impairment		Alzheimer's Disease / Cognitive Impairment	
Substance	Source	Evidence	Selected ref.	Evidence	Selected ref.
Pesticides	Occupational	++	10,17	+	10,17
	Non-occupational	(+)	10,19,21	(+)	10,20,23
Metals	Occupational	+/-*	25	Ø	24
	No distinction	+/-**	25,92	+/-***	24,93
Organic solvents	Occupational	+/-	26,27	+/-	28,29
	Non-occupational	Ø	11	Ø	
PM2.5		+	30,31	++	31,32
Gaseous air pollutants (e.g. NOx)		(+)	30	(+)	32
Second-hand cigarette smoke		(+)	94	(+)	94
Dioxins		ø	95	Ø	95
PAHs		Ø		Ø	33
PCBs		Ø	22,96	+/-	23,96
Flame retardants		Ø		Ø	63,97
Long-chain PFAS		Ø	98	Ø	34,98
Bisphenols		Ø		Ø	36
Phthalates		Ø	65	Ø	35

440 All associations are in the direction of an increased risk of neurodegenerative disease with increased chemical exposure, except for second-

441 hand smoke and Parkinson's Disease (inverse association).

442 ++: high evidence supported by many consistent studies,

443 +: moderate evidence supported by several consistent studies,

444 (+): emerging evidence supported by few but consistent studies

445 +/-: low evidence supported by several inconsistent studies

446 $\pmb{\varnothing}$: insufficient evidence due to very limited number of available studies

447 *For occupational Mn exposure (i.e., the most convincing occupational metal exposure associated with PD)

448 **For Pb exposure (i.e., the most convincing metal exposure associated with PD)

449 ***For Pb, Hg, Al and Cu exposures (i.e., the most convincing metal exposures associated with AD)

450 451 452 453 Abbreviations: PAHs: polycyclic aromatic hydrocarbons, PCBs: polychlorinated biphenyls; PFAS: per-fluorinated compounds; PM2.5: fine particulate

454

Box 1. Using HRMS to measure exogenous and endogenous chemicals in human samples: challenges to overcome. HRMS-based methods enable agnostic Exposome-Wide Association Studies (ExWAS) to examine environmental chemical factors associated with neurodegenerative diseases. Although HRMS-based methods can already reproducibly profile hundreds to thousands of exogenous chemicals and their transformation products in human biological samples (plasma, CSF), improvements are needed⁶⁶. The first limitations are purely technical and lie in the bounded versatility of HRMS technologies, limiting the diversity of chemicals that can be analysed within a given platform. In addition, analytical sensitivity must be enhanced to improve the detection of lowabundant exogenous chemicals (and metabolites). The development of large mass spectrometry facilities equipped with a wide range of HRMS-based instruments should improve coverage of the chemical space and increase throughput⁶⁶. There is also a need to establish a strong collaboration and harmonisation of relevant laboratories/analytical facilities to support concerted large-scale research efforts. A major bottleneck of HRMS-based methods is the complexity of the annotation process (i.e., assigning a putative identity to feature from HRMS datasets), meaning that the vast majority of information collected by HRMS-based methods remains, to date, unannotated (usually less than 10% of all features generated in HRMS are successfully identified). Identification of features is a tedious process involving many steps and typically relies on having a reference standard to confirm the structure of a putative feature. New computational strategies are emerging to help with the structural elucidation of unknown structures. For instance, fragmentation trees with structural elucidation provide a combined and coherent assessment of molecular structures from MS/MS data⁹⁹. Although still at the proof-of-principle stage, the use of molecular networking also has great potential to aid both MS-based disease diagnostics and drug development¹⁰⁰. Other innovations based on in silico bioinformatics tools help to provide information about the potential structures of chemicals undergoing biological transformation (e.g., phase I/II metabolites). Other critical efforts needed in this field include the development of a coordinated approach between experts working with both targeted and HRMS-based approaches, and the synthesis of novel standards by manufacturers for individual chemicals and their metabolites in order to provide accurate and robust measurements of the newly identified chemicals at the population level.

Abbreviations: CSF: cerebrospinal fluid; HRMS: high resolution mass spectrometry; MS/MS: tandem mass spectrometry.

455

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A. CHEMICALS IN MODERN LIFE



