

Timing and location dictate monocyte fate and their transition to tumor-associated macrophages

Garett Dunsmore, Wei Guo, Ziyi Li, David Alejandro Bejarano, Rhea Pai, Katharine Yang, Immanuel Kwok, Leonard Tan, Melissa Ng, Carlos de la Calle Fabregat, et al.

▶ To cite this version:

Garett Dunsmore, Wei Guo, Ziyi Li, David Alejandro Bejarano, Rhea Pai, et al.. Timing and location dictate monocyte fate and their transition to tumor-associated macrophages. Science Immunology, 2024, 9 (97), 10.1126/sciimmunol.adk3981. hal-04728984

HAL Id: hal-04728984 https://hal.science/hal-04728984v1

Submitted on 5 Feb 2025

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers. L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés. Short title: Timing and location dictate development of tumor-associated macrophages

Title: Editor's Summary

Tumor-associated macrophages (TAMs) promote tumor growth and immune suppression, but how TAMs develop from circulating monocytes and local tissue-resident macrophages remains incompletely understood. Using a model of pancreatic ductal adenocarcinoma (PDAC) in monocyte fate-mapping mice, Dunsmore *et al.* examined the dynamics of the monocyte-tomacrophage transition in tumors. A population of "intermediate" TAMs gave rise to two more differentiated TAM subsets, distinguishable by their distinct surface marker phenotype, dependence on the transcription factor Maf, migratory behavior, and localization in tumors. These findings provide a time- and space-resolved picture of TAM heterogeneity and development in PDAC, which could guide the development of TAM-targeted therapeutic strategies.—Claire Olingy

Title: Timing and location dictate monocyte fate and their transition to tumorassociated macrophages

Authors: Garett Dunsmore^{1,2}, Wei Guo³, Ziyi Li³, David Alejandro Bejarano⁴, Rhea Pai⁵, Katharine Yang⁶, Immanuel Kwok⁶, Leonard Tan⁶, Melissa Ng⁶, Carlos De La Calle Fabregat¹, Aline Yatim⁷, Antoine Bougouin⁸, Kevin Mulder^{1,2}, Jake Thomas⁴, Javiera Villar¹, Mathilde Bied^{1,2}, Benoit Kloeckner^{1,2}, Charles-Antoine Dutertre¹, Grégoire Gessain¹, Svetoslav Chakarov³, Zhaoyuan Liu³, Jean-Yves Scoazec¹, Ana-Maria Lennon-Dumenil⁷, Thomas Marichal^{9,10,11}, Catherine Sautès-Fridman⁸, Wolf Herman Fridman⁸, Ankur Sharma^{5,12,13,14}, Bing Su³, Andreas Schlitzer⁴, Lai Guan Ng^{15,16*}, Camille Blériot^{1,17,*}, Florent Ginhoux^{1,2,3,6,18,*}

Affiliations :

¹Institut Gustave Roussy, INSERM U1015, Bâtiment de Médecine Moléculaire 114 rue Edouard Vaillant, 94800 Villejuif, France

²Université Paris-Saclay, Ile-de-France, France

³Shanghai Institute of Immunology, Department of Immunology and Microbiology, Shanghai Jiao Tong University School of Medicine, Shanghai 200025, China

⁴Quantitative Systems Biology, Life & Medical Sciences Institute, University of Bonn, 53115 Bonn, Germany

⁵Curtin Medical School, Curtin University, Bentley, Western Australia, Australia

⁶Singapore Immunology Network (SIgN), A*STAR, 8A Biomedical Grove, Immunos Building, Level 3, Singapore 138648, Singapore

⁷Institut Curie, PSL University, INSERM U932, Immunity and Cancer, 75005 Paris, France

⁸Centre de Recherche des Cordeliers, INSERM, Sorbonne Université, USPC Université Paris Cité, Equipe Labellisée Ligue Nationale Contre le Cancer, Paris, France

⁹Laboratory of Immunophysiology, GIGA Institute, Liège University; Liège, Belgium

¹⁰Faculty of Veterinary Medicine, Liège University; Liège, Belgium

¹¹Walloon Excellence in Life Sciences and Biotechnology (WELBIO) Department, WEL Research Institute; Wavre, Belgium

¹²Harry Perkins Institute of Medical Research, QEII Medical Centre and Centre for Medical Research, 6 Verdun Street, Nedlands, Perth, Western Australia 6009, Australia

¹³Institute of Molecular and Cellular Biology, A*STAR, 138673

¹⁴KK Research Centre, KK Women's and Children's Hospital, 229899, Singapore

¹⁵Shanghai Immune Therapy Institute Renji Hospital, Shanghai Jiao Tong University School of Medicine, Shanghai 200010, China

¹⁶Department of Microbiology and Immunology, National University of Singapore, Singapore

¹⁷Institut Necker Enfants Malades (INEM), CNRS UMR 8253, INSERM U1151, 160 rue de Vaugirard, 75015 Paris, France

¹⁸Department of Medicine, Yong Loo Lin School of Medicine, National University of Singapore, 119228 Singapore

* Corresponding authors. Email: <u>florent.ginhoux@gustaveroussy.fr; camille.bleriot@cnrs.fr;</u> <u>nglaiguan@renji.com</u>

Abstract:

Tumor-associated macrophages (TAMs) are a heterogeneous population of cells whose phenotypes and functions are shaped by factors that are incompletely understood. Herein, we asked when and where TAMs arise from blood monocytes, and how they evolve during tumor development. We initiated pancreatic ductal adenocarcinoma (PDAC) in inducible monocyte fatemapping mice and combined single-cell transcriptomics and high-dimensional flow cytometry to profile the monocyte-to-TAM transition. We revealed that monocytes differentiate first into a transient intermediate population of TAMs (IntTAM) that generates two longer-lived lineages of terminally differentiated TAMs with distinct gene expression profiles, phenotypes and intratumoral localization. Transcriptome datasets and tumor samples from patients with PDAC evidenced parallel TAM populations in humans and their prognostic associations. These insights will support the design of new therapeutic strategies targeting TAMs in PDAC.

One Sentence Summary: Intermediate tumor-associated macrophages (TAM) emerge first and gives rise to two more differentiated TAM populations in pancreatic cancer.

INTRODUCTION

Recent advances in our understanding of the tumor microenvironment (TME), including the roles of immune cells, has led to the development of immunotherapies (1, 2) with tumor-typespecific efficacy. While some immunotherapies such as treatment with anti PD-1 antibodies have shown high efficacy in treating melanoma (3), immunotherapy has shown very little benefit for patients with pancreatic ductal adenocarcinoma (PDAC) (4). A deeper understanding of TME biology, specifically within the immune compartment, is needed to understand these differences.

Tumor-associated macrophages (TAMs) are the most abundant immune cells in the TME, where they support tumor growth, angiogenesis, extracellular matrix remodeling, immune modulation/suppression and metastatic spread (5, 6). Furthermore, recent single-cell RNA sequencing (scRNA-seq) analyses have identified subpopulations of TAMs that inhabit distinct locations and have various functions within the TME (7, 8). Thus, although TAMs are a promising potential target for future immunotherapies, we do not yet fully understand their developmental trajectories and the spatial relationships between distinct TAM subpopulations.

Key factors determining macrophage identity include their ontogeny, their niche of residence and the homeostatic or inflammatory signals they encounter (9). Macrophages can be derived either from embryonic precursors or adult circulating monocytes, with each tissue inhabited by a characteristic proportion of these two ontogenically-distinct macrophage populations (10). Such equilibrium is subject to change in the TME, as studies in a murine model of PDAC revealed that approximately 70% of TAMs were of monocytic origin and exhibited different functional profiles compared to embryonically-derived TAMs (11). Furthermore, differential localization between embryonically-derived and monocyte-derived TAMs according to their origin was recently observed in murine and human non-small cell lung carcinoma (12). In addition, residency duration is another newly identified parameter shaping macrophage identity (9). Gradually, a picture of the dynamic environment of tumors, that is both reciprocally shaped by and shapes TAM diversity, is emerging.

Here, we aimed to refine our understanding of the dynamic monocyte-to-TAM transition in PDAC and to define the developmental relationships between TAM subpopulations. We exploited PDAC-bearing monocyte fate-mapping and inducible CreERT2 monocyte fate-mapping (timestamping) mouse models that enabled us to track monocytes within the TME. Using this approach, we identified a pathway linking monocytes to specific TAM subpopulations with distinct localization and functional profiles, with relevant parallels in human PDAC.

RESULTS

Origin of TAMs in a murine model of PDAC

To quantify the relative contribution of embryonic precursors and circulating monocytes to the TAM pool in PDAC, we employed *Ms4a3^{Cre}* x *Rosa^{tdTomato}* mice, in which all GMP-derived circulating monocytes and their progeny are stably fluorescently tagged while embryonically derived macrophages are not (*13*). We injected KPC cells orthotopically into the pancreas of these mice and conducted scRNA-seq on the immune cells (CD45⁺) isolated from tumors after 35 days (Fig. 1A). We then measured expression of canonical marker genes to cluster and annotated the immune cell populations present (Fig. S1, A and B, and Data file S1). As expected, tdTomato was expressed by all neutrophils, some mononuclear phagocytes, but not by T, B or plasma cell clusters

(Fig. S1, C and D) (13). Within the cluster of mononuclear phagocytes, we identified three populations of cells: tdTomato⁺ monocytes (expressing *Ly6c2*, *Hp*, *S100a4*, and *Plac8*); macrophages (expressing *Pf4*, *C1qa*, *C1qc*, and *Arg1*), of which around 90% were tdTomato⁺; and dendritic cells (expressing *Clec10a*, *H2-Aa*, *H2-Dmb2*, and *Ckb*), among which ~10% were tdTomato⁺ (Fig. 1, B-E, S1E and Data file S2). Focusing on macrophages, we observed that tdTomato⁻ cells (embryonically-derived) expressed genes specific to resident tissue macrophages (RTM) (*Folr2* and *Timd4*, for example (*14*, *15*)); while tdTomato⁺ macrophages (GMP-derived) exhibited a more inflammatory phenotype (expressing *Il1b* and *Il6*) (Fig. 1F and Data file S3). Gene ontology (GO) analysis showed that embryonic TAMs expressed genes that were associated with extracellular matrix remodeling, while monocyte-derived TAMs exhibited pro-inflammatory expression patterns (Fig. 1G), consistent with previous work on murine PDAC (*11*).

Monocyte-derived TAMs are distinct from embryonic-derived TAMs

As most TAMs in our PDAC model were of monocytic origin, we next investigated the dynamics of the monocyte-to-macrophage transition in these tumors using $Ms4a3^{CreERT2}$ x $Rosa^{tdTomato}$ mice. In this model, treatment with tamoxifen induces tdTomato expression in GMP-derived short-lived circulating Ly6C^{hi} monocytes for six days, after which they are replaced in the circulation by newly generated tdTomato⁻ cells (13). We injected KPC cells as described above, then administered tamoxifen on days 17/18 to induce GMP labelling midway through tumor growth to measure monocyte recruitment in an established tumor. At 35 days post-injection of tumor cells, we harvested tumors and control healthy pancreas to characterize the immune cells present (both tdTomato⁺ and tdTomato⁻ cells) by scRNA-seq (Fig. 2A). We focused on mononuclear phagocyte subpopulations (Fig. S2, A to C). Following cell cluster annotation based on canonical DEGs (Fig. S2D and Data file S4), we identified five clusters that were enriched in PDAC: monocytes, TAM clusters 1-3, and dividing cells (Fig. S2G), but with TAMs uniquely expressing specific markers including Arg1, Spp1, and Mmp12 (Fig. S2H) (16-18).

Focusing on the PDAC-enriched monocyte and TAM populations, we visualized these subsets separately with uniform manifold approximation and projection (UMAP) and identified differentially expressed genes (DEGs) (Fig. 2, B and C, and Data file S5). These populations were highly similar to previously described subsets, with TAM1 representing a population of monocyte-like TAMs that express *Tnf* and *Ccr2*, TAM2 being similar to hypoxic macrophages and TAM3 resembling the previously described lipid-associated macrophages (LAMs) (*19, 20*). To define developmental relationships between these clusters, we applied the splicing analytical tool scVelo (*21*) and found that monocytes putatively gave rise to TAM1, which then differentiated into either TAM2 or TAM3 (Fig. 2D). These findings were recapitulated using the cell lineage and pseudotime inference tool Slingshot (*22*) (Fig. 2E). Therefore, TAM1 represent cells with a discrete but transient transcriptional state, likely constituting an intermediate stage between monocytes and TAM2/TAM3 differentiation (Fig. 2F).

To validate this hypothesis, we exploited the "timestamping" feature of the model by comparing the proportion of tdTomato⁺ cells in each TAM cluster. We observed fewer labelled TAM1 than TAM2 or TAM3, confirming that the latter mainly derived from monocytes recruited shortly after the activation of tdTomato labelling on days 17/18, while by day 35, the TAM1 population was derived mostly from more recently recruited tdTomato⁻ monocytes (Fig. 2, G and

H). As expected, monocytes were mostly tdTomato⁻ at the time of tumor collection, confirming their short lifespan and their continuous replenishment by GMPs. Therefore, by coupling scRNA-seq and monocyte timestamping, we revealed a transient cell state in the monocyte-to-TAM transition and its subsequent differentiation into two distinct TAM populations.

High-throughput screening identifies surface markers associated with monocyte and TAM subpopulations

To enable further study and validation of these TAM clusters, we employed the Infinity Flow pipeline (23, 24) to assess the expression of surface markers on monocytes and TAM1-3. We first injected KPC cells into the pancreas of $Ms4a3^{CreERT2}$ x $Rosa^{tdTomato}$ mice, treated them with tamoxifen during early- (days 14/15), intermediate- (days 21/22), or late- (days 28/29) stages of tumor establishment, and then collected, barcoded and labelled tumor cells at day 35 to assess surface expression of 270 proteins detectable by flow cytometry (Fig. 3A).

tdTomato labelling of monocytes and TAMs exhibited the expected pattern: labelled monocytes (Ly6C⁺) were evident after late tamoxifen treatment, confirming their short lifespan, while TAM (CD64⁺ F4/80⁺) labelling was less pronounced, mirroring the continuous monocyteto-macrophage transition in tumors (Fig. S3A). Considering only tdTomato⁺ monocytes and TAMs, we generated a UMAP based on the flow cytometry data and identified four clusters that we annotated as monocytes and TAM1-3 based on similarities between their patterns of gene (Fig. 2) and protein expression (Fig. 3B and S3, B and C). Thus, we defined monocytes as Ly6C⁺, TAM1 as CCR2⁺ CD64⁺, TAM2 as CD73⁺, and TAM3 as CD36⁺ CD11c⁺ cells (Fig. 3C and Data file S6). Using these markers, we established a gating strategy to discriminate monocytes, TAM1, TAM2, and TAM3 using a limited panel of surface markers that enables detection of the populations of interest by conventional spectral flow cytometry (Fig. 3D and S3, D and E). To verify the accuracy of this gating strategy and validate our scRNA-seq, we sorted Ly6C⁺ monocytes, TAM1, TAM2 and TAM3 and profiled them by bulk RNA sequencing. Each sorted population had a distinct transcriptional profile that corresponded to its respective cluster of interest when their signatures were projected back onto the scRNA-seq data (Fig. S4, A and B). We then compared the relative abundance of each of these populations within all tdTomato⁺ mononuclear phagocytes at different time points, revealing an enrichment in monocytes and TAM1 at the late timepoint of monocyte timestamping. In contrast, the early timepoint was almost exclusively composed of TAM2 and TAM3 (Fig. 3, E and F). The trajectory of monocytes to a transient TAM1 state and subsequentially TAM2 and TAM3 was also confirmed by applying Slingshot analysis to these surface marker data (Fig. 3, G and H). These results validated those generated from gene expression and confirmed at the protein level the temporal relationship between monocytes and the different TAM subpopulations. Because the TAM1 population constitutes an intermediate precursor of more stable TAM2 and TAM3 macrophage populations, we propose the nomenclature intermediate TAM (IntTAM) for these cells.

IntTAMs give rise to TAM2 and TAM3, which are differentially regulated by Maf

We next asked how the relative proportions of monocytes and TAM subpopulations varied during PDAC development. As expected, monocytes, IntTAM, TAM2, and TAM3 were more abundant in tumors compared to adjacent/healthy pancreas (Fig. S5A). However, these populations

exhibited dynamic changes during tumor development: IntTAM abundance peaked at seven days after tumor initiation, while TAM2 and TAM3 became more abundant as the tumor developed (Fig. S5, B to D), consistent with our hypothesis of their sequential differentiation from IntTAMs.

To further validate the dependence of TAM populations on monocyte differentiation, we orthotopically injected KPC cells into *Ccr2*-KO mice. After 3 weeks post-challenge, we observed that monocytes, IntTAMs, TAM2, and TAM3, but not RTM, were all reduced in *Ccr2*-KO mice compared to WT mice (Fig. S6A). To precisely define the transition of monocytes to TAMs, we treated PDAC-bearing $Ms4a3^{CreERT2} \times Rosa^{tdTomato}$ mice with tamoxifen at various timepoints to provide sequential monocyte timestamping, then applied the conventional flow cytometry gating strategy to tumor samples (Fig. 4A). IntTAMs were mostly labelled following late tamoxifen induction, indicative of recent recruitment (Fig. 4B). Conversely, TAM2 and, to a lesser extent, TAM3 were mostly labelled after early induction, suggesting their long survival and their differentiation from early recruited monocytes (Fig. 4B). As mentioned above, previous studies reported a population of *Trem2*-expressing macrophages called LAMs in several diseases, including cancer (*20, 25-27*). Based on our gene and protein expression data, we hypothesized that TAM3 were equivalent to these TREM2⁺ LAMs. We tested this hypothesis by initiating PDAC in *Trem2*-EGFP reporter mice and found that TAM3 were specifically labelled (Fig. S6, B and C).

To validate the potential of IntTAMs to differentiate into TAM2 and TAM3, we sorted IntTAMs from tumor-bearing CD45.2 mice (21 days post orthotopic tumor injection) and adoptively transferred them intratumorally into tumor-bearing CD45.1 mice (21 days post orthotopic tumor injection). We analyzed the progeny of adoptively transferred CD45.2⁺ cells at day 3 and day 7 after the transfer by flow cytometry (Fig. 4C). The majority of CD45.2⁺ cells remained IntTAMs at day 3, but had then converted into TAM2 and TAM3 by day 7 post-transfer (Fig. 4D and S7A), validating the potential of IntTAMs to give rise to both TAM2 and TAM3.

To better understand the transcriptomic identities and putative functions of monocytes, IntTAMs, TAM2, and TAM3 in PDAC, we applied the SCENIC analytical tool to our scRNA-seq data to predict transcription factor activity based on gene expression (28). This analysis revealed distinct regulons in the different cell populations: while monocytes preferentially used *Irf1*- and *Klf3*-related genes, IntTAMs rather used those related to *Fosl2*; TAM2 used *Maf*- and *Irf8*-related genes, and TAM3 used genes related to *Bhlhe41* (Fig. 4E). Following our identification of *Maf* as a potential regulator of TAM2 differentiation, we used a *LysM^{cre}* x *Maf^{flox}* mouse model to investigate whether TAM differentiation was altered. Mice with *Maf*-deficient myeloid cells exhibited a significant reduction in TAM2, but not in tumor growth (Fig. 4, F and G). These results suggest that targeting transcription factors can modulate the differentiation of TAM subpopulations.

IntTAMs, TAM2 and TAM3 have distinct motility and cellular interaction profiles

To further understand the functional potential of TAM subsets, we performed gene ontology analysis using MetaScape (29). Genes expressed by IntTAMs were associated with chemotaxis, those by TAM2 with hypoxia, and TAM3 expressed genes involved in the response to lipoproteins (Fig. S8A). Given the evolving gene scores for these pathways during the monocyte-to-TAM differentiation, it seems that IntTAMs start to express the chemotaxis-associated program when differentiating from monocytes, presumably allowing them to migrate within the tumor to a site in which this initial program is gradually replaced by either the hypoxia-

associated identity of TAM2 or the response-to-lipoprotein-associated identity of TAM3 (Fig. S8B).

To further investigate the predicted role of IntTAMs, we sorted monocytes, IntTAMs and TAM2, and TAM3 and measured their motility capacity. Monocytes had the highest motility capacity, while IntTAM had an intermediate motile capacity and TAM2 and TAM3 had a comparatively reduced ability to move (Fig. S8, C and D). These results suggest that IntTAMs display an intermediate motility in the monocyte-to-macrophage transition, still endowed with migration ability compared to long-lived differentiated TAM2 and TAM3. Once IntTAMs have moved through tissue and further matured, thus losing their motile capacity, we questioned whether the role of spatial localization could influence the functional profiles of TAM subpopulations. To do so, we used our scRNA-seq data and integrated it with a publicly available scRNA-seq dataset to predict interactions between the different subpopulations with other components of the tumor microenvironment (30, 31) (Fig. S9A and B). To identify outgoing and incoming interactions in Monocytes, IntTAMs, TAM2 and TAM3, we calculated the number of significant interactions between cell types and found distinct preferential interactions (Fig. S9C). Together, these results suggest that the distinct TAM populations could interact with different cell types in a specific tumoral niche, subjecting them to distinct influences and microenvironmental factors that could contribute to their differentiation and functional profiles.

TAM2 and TAM3 are associated with distinct spatial niches in PDAC

Because our gene score analysis suggested the possibility of differential localization and functional specialization of TAM populations in PDAC, we next asked whether there was in vivo evidence for this by analyzing recently published spatial transcriptomics data (Visium, 10X Genomics) collected on sections of PDAC tumors (32) (Fig. 5A). Using BayesSpace joint clustering (33), we identified seven distinct spatial clusters corresponding to seven tumor niches associated with different gene expression and putative functions (Fig. 5, B and C, S10, A and B, and Data file S7): cluster 1 was associated with hypoxia, cluster 3 with cellular respiration, cluster 4 with RNA splicing, cluster 5 with inflammatory response, cluster 6 with telomere lengthening, and cluster 7 with cell cycle, while cluster 2 was excluded from the analysis due to its restriction to necrotic areas and had lower-quality sequencing data (Fig. 5C). Using BayesSpace, we also projected genes associated with each cell type to predict the presence of multiple immune and nonimmune cell types in the tumor (Fig. S10C). We also projected the signatures of IntTAMs, TAM2, and TAM3 (Fig. 5D), and measured their proportions in each cluster from the different tissue sections. Notably, TAM2 was significantly enriched across all tissue sections in the cluster 1 hypoxic tissue, suggesting an association between low oxygen levels and the TAM2 program (Fig. 5, E and F). Strikingly, a mutual exclusion of TAM2 and TAM3 was observed (Fig. S10D). Therefore, these results suggest that differentiated TAM2 and TAM3 populations inhabit distinct niches within the tumor.

To validate the distribution of these populations at the protein level, we utilized codetection by indexing (CODEX)-enabled high dimensional histology (*34*). First, we annotated tumor regions using H&E staining. Next, utilizing a 58-parameter staining panel, we identified cell types using common markers and the gating strategy previously identified by flow cytometry (Fig. 5G and S11, A and B). Here, CODEX analysis revealed that TAM2 were in closer proximity to the necrotic core of the tumor, while TAM3 were distributed further from the tumor core (Fig. 5H and S11C), in agreement with our spatial transcriptomic analysis. To identify the cell interactions between TAMs and the tumor microenvironment, we identified regions where each TAM populations was present (Fig. S11D). Region 1 was enriched with IntTAMs, region 2 with monocytes, region 3 with TAM2 and region 4 with TAM3 (Fig. S11E). Within regions 3 and 4, fibroblasts, neutrophils, and B cells interacted frequently with TAM2, while TAM3 interacted with cancer cells, NK/T cells and DCs (Fig. S11, F and G). The interaction of TAM2 with neutrophils parallels recent findings that the hypoxic regions of the tumor can also reprogram neutrophils that impacts their functions (*32*). Together, these observations integrate time and space dimensions to reveal the fate of monocytes recruited in PDAC, highlighting a transient population of IntTAMs that gives rise to two distinct stable TAM populations occupying different locations within the TME and exhibiting patterns of gene expression consistent with distinct functional specializations.

Human PDAC contains TAM subpopulations that transcriptionally and spatially correspond to murine TAMs

Lastly, we assessed whether similar macrophage populations were present in patients with PDAC. Using publicly available scRNA-seq data from human PDAC and adjacent healthy pancreas (*35-38*), we identified mononuclear phagocytes and applied clustering analysis (Fig. 6A). This revealed one population of monocytes and eight populations of human TAMs (Hu.TAM a-h) (Fig. 6B) with distinct transcriptomic identities (Fig. S12A and Data file S8) that were identifiable in every dataset representing 96 patients (Fig. S12B). In tumor tissue, there was an enrichment of Hu.TAM a-f compared to the adjacent healthy tissue (Fig. 6C). We then performed a label transfer pairing analysis (*39*) that revealed marked transcriptional similarities between murine and human monocytes, murine IntTAM and Hu.TAM a, murine TAM2 and Hu.TAM b/c, and murine TAM3 and Hu.TAM d/e (Fig. 6D). Notably, we did not find an ortholog of the Hu.TAM f population, suggesting species specificity that warrants further exploration on TAM populations. When we projected DEGs across monocytes and TAMs in mouse and human PDAC, we observed similar gene expression on clustering between the species (Fig. 6E), as well as conserved functional pathways between paired populations (Fig. S12C).

To address whether monocyte-derived TAMs had a similar differentiation trajectory in human PDAC, we used PAGA to predict the differentiation pathway of monocytes to TAMs (40). We found that monocytes connected first to Hu.TAM a and then further differentiated into different TAMs (Fig. 6F). Furthermore, using Pseudotime analysis, we observed the putative differentiation of monocytes to Hu.TAM a and then to Hu.TAM b/c or Hu.TAM d/e along with genes identified to be associated with each population (Fig. 6G). To further confirm these observations, we projected the DEGs of human monocytes treated with M-CSF for 0, 3, 9, 24, and 48 hours (41). We found that initially, monocytes displayed their classic signature, and after 3 hours the signature overlapped with Hu.TAM a. Subsequent timepoints showed overlap with different Hu.TAM populations, further supporting that Hu.TAM a emerge first and give rise to other Hu.TAM populations (Fig. S12D).

Using a publicly available PDAC Nanostring DSP dataset (GSE199102) (35), which allows the transcriptomic characterization of tumor (PanCK⁺) and immune (CD45⁺) cells within regions of interest (ROI) on tissue slices, we then predicted the presence of macrophage signatures in different parts of PDAC tissue. We deconvoluted the CD45⁺ fraction of each ROI to evaluate the presence of monocytes, Hu.TAM a, Hu.TAM b/c, and Hu.TAM d/e using the DEGs of each

population. In parallel, we tracked hypoxic or lipid metabolism signatures in the PanCK⁺ fractions using publicly available gene sets from GSEA (42, 43). We then correlated these two layers to identify any association between TAM populations and environmental tumor phenotypes. As observed in murine PDAC, we found that tumor areas with a high score for hypoxia also had a high signature of Hu.TAM b/c, while the localization of other TAM populations were not significantly related to different functional signatures (Fig. S13A).

Based on this transcriptional homology, we used our murine surface marker analysis to define putative markers for the Hu.TAM subpopulations (Fig. S13B, Data file S9). We annotated viable and necrotic regions of human PDAC tissues and identified Hu.TAM a (CCR2⁺ CD68⁺), Hu.TAM b/c (CD68⁺ CD73⁺), and Hu.TAM d/e (CD68⁺ TREM2⁺) (Fig. 7, A and B). In tumor sections, these populations were localized within different areas, with Hu.TAM b/c notably enriched in the necrotic tumor (Fig. 7 C). Moreover, by investigating the proximity of one TAM population to another, we found Hu.TAM b/c and Hu.TAM d/e localized further away from one another, suggesting a similar pattern of spatial segregation to those in murine PDAC (Fig. 7D).

Finally, we asked whether the expression of TAM subpopulation-specific/related genes correlated with PDAC patient prognosis. We normalized monocyte and Hu.TAM abundance with a Dirichlet-multinomial regression comparing patient response to standard PDAC treatment (FOLFIRINOX, 5-FU, radiotherapy and Losartan in few patients) (*35*). We found that most Hu.TAM populations were reduced upon treatment; however, in poor responders, we observed a persistence in the abundance of Hu.TAM c, d, and e (Fig. S13C). Additionally, we screened the 30 most DEGs from each TAM population using the cancer genome atlas (TCGA) database (*44*) and found that high expression of the Hu.TAM b/c signature was significantly associated with shorter survival of PDAC patients (Fig. 7E and S13D). Together, these results suggest that the abundance of different TAM populations could be used as a tool for patient prognosis.

Discussion

Herein, we combined fate-mapping and timestamping *Ms4a3*-derived mouse models and multi-omics analyses to track monocytes entering PDAC to precisely analyze the dynamics of their differentiation into TAMs. In this context, we identified a discrete intermediate population in the transition from monocytes to macrophages, both in murine and human pancreatic tumors. While the impact of ontogeny on TAM functions has been well-studied during the last decade, little is known about the differentiation paths of TAM populations. Herein, we have addressed this gap of knowledge using our timestamping model, which represents the overcoming of a significant technological barrier. A recent study observed a cell population that resemble IntTAMs by the expression of CCR2 and CD64 within inflamed blood vessels but have not acknowledged the transitional capacity of these cells (45). In addition, while IntTAMs exhibit a proinflammatory phenotype, their exact contribution to tumor-derived inflammation should be investigated in future works.

Our results suggest that transient IntTAMs give rise to more mature TAM2 or TAM3, with their phenotype predominantly governed by their local environment. Given these observations, we propose that a major determinant of macrophage phenotype in cancer is the availability of nutrients. The TAM3 population that we observed in PDAC has been implicated in immunomodulatory functions, as reported by others, albeit without temporal assessment (26, 46). TAM3 express the lipid-binding gene *Trem2*: macrophages expressing this gene engage in lipid

metabolism (20). Recent work suggests that the phagocytosis of tumor cells drive the emergence of $Trem2^+$ macrophages in a murine model of lung adenocarcinoma and prevents natural killer (NK) cell recruitment (25). Additionally, the tumors of Trem2-deficient mice, which have few TREM2⁺ macrophages, are more responsive to anti-PD-1 treatment (26).

Conversely, IntTAMs can also give rise to TAM2, which may be driven by hypoxia. Accordingly, the transcription factor Hifla, a primary regulator of hypoxia-induced programs, is expressed by TAM2. Previous work showed that hypoxia-associated macrophages contribute to immune suppression (47), and here we see that increased abundance of these hypoxia-associated TAM2 is linked with poor patient prognosis. Our observations are recapitulated in a recent study where spatially restricted TAM populations in a variety of cancers are associated with hypoxia and poor prognosis (48). Together, this feature argues for specific TAM2 targeting, potentially using hypoxia program inhibitors (49). Furthermore, we can inhibit the differentiation of IntTAMs to TAM2 by modulation *Maf* expression in *LysM^{cre} x Maf^{flox}* mice. While these results do not show a significant change in tumor growth, they provide a proof-of-concept that modulation of downstream transcription factors can impact populations that arise from IntTAM without impacting other populations.

Our work positions IntTAMs as a distinct cell type with the capacity to integrate environmental signals to facilitate the transition from a monocyte to a specialized macrophage. This feature of IntTAMs alludes to a possible stage of macrophage differentiation that could be manipulated by therapeutic targeting. Future work could target IntTAMs and skew their differentiation to benefit patient outcome. In conclusion, this work and others highlight the need for a more refined definition of TAM populations to enable the identification of critical targets for more effective immunotherapies, and notably integrates time as a key parameter when considering TAM biology (*50*).

MATERIAL AND METHODS

Study design

Macrophages are an abundant immune cell type in many tumors and are often associated with poor prognosis; however, the inherent heterogeneity of these cells makes them challenging to study. To address this, we propose that ontogeny, time, and location impact the heterogeneity of macrophages in PDAC. We used *Ms4a3^{Cre} Rosa^{tdTomato}* mice to identify the ontogeny of macrophages, *Ms4a3^{CreERT2} Rosa^{tdTomato}* mice to investigate the impact of time on monocyte-derived macrophages, and spatial transcriptomics/multiplex imaging to evaluate the influence of location on macrophage heterogeneity.

Mouse models

 $Ms4a3^{Cre} \ge Rosa^{tdTomato}$ and $Ms4a3^{CreERT2} \ge Rosa^{tdTomato}$ mice were described previously (13). For tamoxifen treatment, mice were twice administered 1.75mg of tamoxifen in 100µl of corn oil by oral gavage 24 hours at the indicated time points after tumor cell injection. This study used healthy male and female mice for experimentation at 7-10 weeks of age. *Ccr2*-KO mice were provided by the laboratory of Marc Lecuit (51). *LysM*^{Cre} x *Maf*^{lox} mice were from the laboratory of Thomas Marichal (52). Mice housed and bred at Institut Gustave Roussy were kept and

maintained according to national recommendations. All protocols were approved by the Institutional Animal Care and Use Committee (IACUC) (approval number 202102240810563). All experiments and procedures performed at the Shanghai Jiao Tong University School of Medicine animal facility, Cyagen Inc. Shanghai, were approved by the IACUC of Shanghai Jiao Tong University School of Medicine. All experiments and procedures performed on mice housed at the Singapore Immunology network were approved by the Institutional Animal Care and Use Committee of the Biological Resource Center (Agency for Science, Technology and Research, Singapore) following the guidelines of the Agri-Food and Veterinary Authority and the National Advisory Committee for Laboratory Animal Research of Singapore. All experiments presented in this paper were performed on equal parts male and female mice.

Orthotopic injection of KPC tumor cells

The murine pancreatic ductal adenocarcinoma cancer cell line *P48^{Cre} Kras^{G12D/+} Trp53^{R172H/+}* (KPC) was a gift from the Wong Siew Cheng lab (Singapore Immunology Network, A*STAR, Singapore) (*53*). Before using KPC cells for experiments, they were passaged more than six times. Briefly, 50,000 cells were resuspended in 20µl of ice-cold phosphate-buffered saline (PBS) and 25% Matrigel (Sigma) and were orthotopically injected into the pancreas of isoflurane-anaesthetized healthy 7-10 week animals as previously described (*54*). Immediately following surgery, buprenorphine (10 mg/kg) was subcutaneously administered to mice, which were then monitored for the three subsequent days. All mice were sacrificed within six weeks of surgery. Additionally, KPC cells used for these experiments expressed the luciferase gene; therefore, tumor growth was measured weekly by injecting luciferin (Thermo), waiting for seven minutes and imaging isoflurane-anaesthetized mice with an Ivis Specturm Bioimager (Perkin Elmer).

High parameter flow cytometry LEGENDScreen [™] and Infinity Flow

Infinity Flow was conducted as previously described (24); cells from mice treated with tamoxifen at days 14/15, 21/22, and 28/29 were labeled with a specific anti-CD45 barcoding antibody: CD45-BUV395, CD45-BUV661, and CD45-APC-Cy7. Barcoded cells were pooled and incubated with a 'backbone' flow cytometry panel including antibodies recognizing markers that discriminated monocytes, macrophages, and neutrophils. The antibodies used for the backbone were specific for: Ly6G (1A8), Siglec-F (E50-2440), CD101 (Moushi101), Gr-1 (RB6-8C5), Ly6C (HK1.4), CD11b (M1/70), I-A/I-E (M5/114.15.2), B220 (53-6.7), CD90.2 (53-2.1), NK1.1 (PK136), CD11c (N418), CD45 (30-F11) and CD43 (S7). Labeled and barcoded cells were placed into a 96-well U-bottom plate and to each well was added a unique PE-conjugated antibody, as per the LEGENDScreenTM kit (BioLegend). Fully labeled cells were acquired on a 5-laser LSR II (BD) using Diva software (BD). Each subsequent .fcs file with a unique PE-conjugated antibody and the backbone was analyzed using FlowJo (BD). Marker expression across cell types was predicted using the learning algorithm XGBoost implemented in Infinity Flow pipeline as previously described (24). Briefly, input data were subjected to logicle transformation, calculating a z-score for all backbone markers, before implementing the XGBoost R package, which trains a multivariate regression model and imputes the intensity expression of each marker on each cell into one concatenated .fcs file. The generated .fcs file is then used for downstream analysis. All downstream analysis was performed using FlowJo (BD) and the R package Seurat (55). Dimensional reduction (PCA, UMAP) was performed, and clustering using nearest-neighbor analysis by the Seurat package. Statistical analysis was performed by identifying differentially expressed proteins using a Wilcoxon ranked sum test. P values <0.05 were considered statistically significant.

Single-cell RNA sequencing

tdTomato^{+/-} cell populations were sorted from *Ms4a3^{Cre} x Rosa^{tdTomato}* and *Ms4a3^{CreERT2}* x *Rosa^{tdTomato}* mice using the indicated gating strategies. The cells were processed using the Chromium Single Cell 3' (v3 Chemistry) platform (10X Genomics). tdTomato⁺ and tdTomato⁻ cells were sequenced separately using the NovaSeq sequencer (Illumina). Briefly, cells were loaded onto a Chromium Next GEM Chip G, and single cell suspensions in gel beads-in-emulsion (GEMs) were generated using the chromium controller (10X genomics). Reverse transcription (RT) was performed to generate cDNA, which was amplified, cleaned, and fragmented. Finally, libraries were subjected to standard quality control (QC) steps before sequencing.

Analysis of scRNA-seq data

Raw counts were aligned to the GRCm38 mm10 Mus musculus genome from the Genome Reference Consortium using STAR 2.5.3a (56). Counts were log normalized, scaled, and dimensionality reduction was performed (PCA, UMAP). Nearest-neighbor analysis was used for stable clustering. A bimodal likelihood-ratio test was performed, comparing each cluster to all other clusters to identify differentially expressed genes with an adjusted p-value < 0.05 and a $\log FC \ge 0.25$ (57). To integrate cells from different human PDAC datasets, we applied ten rounds of clustering and correction steps using Harmony with parameters "epsilon.harmony = -Inf, max.iter.harmony =10". To cluster single cells by their expression profiles, we used the functions FindNeighbors and FindClusters with an appropriate number of Harmony reduction (10-15) and resolution (0.6-0.8) to perform unsupervised graph-based clustering. To compare monocytes and TAMs from human PDAC and murine PDAC, we used SciBet (version 0.1.0) (58), a supervised cell type identifier based on E-test to predict cell identities for mouse PDAC using cells from human PDAC as references. The SelectGene function in SciBet selected the marker genes for each subset. Pseudotime and trajectory analysis were performed using the R packages Slingshot (22), scVelo (21) and PAGA (40). Transcription factor activity prediction was performed using SCENIC (28). Gene ontology analysis was performed by uploading DEGs from scRNA sequencing analysis to Metascape (29). Interactome analysis was performed using CellChat (30) and RNA Magnet (31). Alluvial plots were made using ggplot2 and circus plots were made using the circlize package in R (59).

10X Visium spatial transcriptomics

The 10X data presented here was previously published as GSE244534 (32); however, the analysis of the data was performed independently. Two tumor tissue sections were collected at day 14 (shown as top two panels in Fig. S10A) and two at day 42 (shown as panel in Fig. 5B and bottom panel in S10A) and were fixed, and frozen using the specifications listed by 10X recommendations. Tissue sections were made by cutting frozen tissues with a cryostat (CM3050S, Leica) at 10µm thickness and mounted on Visium slides (10X Genomics). RNA was extracted following the 10X protocol. QC was performed using the RNA 6000 Pico kit (Agilent). Sequenced reads were aligned in Cell Ranger software (10X Genomics) using the mm10 genome and underwent standard QC. The output was then analyzed further as a single-cell object using the

BayesSpace R package (33). Briefly, spatial clusters were assigned using the mclust function, and spot enhancement was performed. Cell type signatures were selected using the top 10 differentially expressed genes (DEGs) (adjusted p-value < 0.05 and a logFC \ge 0.25) identified by scRNA sequencing scored by a sum of the log counts and then projected onto the spatial transcriptomics data.

CODEX Multiplex imaging and analysis

5µm slices of embedded murine PDAC (day 35 post-orthotopic injection) were prepared and used for CODEX labeling following manufacturer instructions. Briefly, sections were retrieved from the freezer, rehydrated, and photobleached as described in (60). Following photobleaching, sections were blocked and incubated with a 21-plex CODEX antibody panel overnight at 4°C. After washing, samples were fixed with ice-cold methanol, washed again with PBS, and fixed for 20min with BS3 fixative (Thermo Fisher). Samples were subsequently washed with PBS and stored at 4°C for a maximum of one week before imaging. Sections were equilibrated at room temperature before imaging. Antibody detection was performed in a multicycle experiment, following manufacturer instructions. Images were acquired with a Zeiss Axio Observer widefield fluorescence microscope using a 40x objective (NA 0.85) and z-spacing of 1.5µm. The 405, 488, 568, and 647 nm channels were used for acquisition. Images were exported using the CODEX Instrument Manager (Akoya Biosciences) and processed with CODEX Processor v1.7 (Akoya Biosciences). Processing steps included background subtraction, deconvolution, shading correction, stitching, and cell segmentation. DAPI counterstain was used for object detection, whereas sodium Potassium ATPase antibody labeling was used to mark membranes for delineating cell shape. Our defined gating strategy identified imaged cells as distinct cell types (monocytes, IntTAMs, TAM2 and TAM3). Cell types were projected onto the tissue section, and distance from hypoxic/necrotic tissue was calculated for each cell type. To define cell to cell interactions we identified cell types as either Monocytes, IntTAMs, TAM2 or TAM3. We also defined other cell types using common cell markers. A raster scan algorithm using a radius of 50µm was used. The objects generated were subsequently clustered based on the cellular local composition defining tissue regions or cellular neighborhoods. Next, we looked at cells surrounding either Monocytes, IntTAMs, TAM2 or TAM3 within the regions in which these populations were predominant. We then calculated an interaction score based on the frequency of these cell types interacting. These scores were validated in the images.

Survival and treatment response data

The Cox proportional hazards model implemented in the R package survival was used to perform survival analyses. The R function ggsurvplot was used to plot Kaplan-Meier survival curves using data from 178 patients with primary pancreatic adenocarcinomas from TCGA, which were used to evaluate the impact of Hu.TAM a-e signatures on overall survival (OS). Differences in age and gender were corrected for in the Cox model. Response to treatment was measured as described (*35*). Briefly, population variability was normalized using a Dirichlet-multinomial regression and stats were calculated using a non-parametric Mann-Whitney U test.

Statistical analysis

All statistical analyses were performed with Prism 5.0 (GraphPad Software). All p-values are two-tailed. Other statistical analysis was performed using R as described in detail for each dataset, depending on the approach.

References

- 1. Y. Iwai *et al.*, Involvement of PD-L1 on tumor cells in the escape from host immune system and tumor immunotherapy by PD-L1 blockade. *Proc Natl Acad Sci USA* **99**, 12293-12297 (2002).
- 2. D. R. Leach, M. F. Krummel, J. P. Allison, Enhancement of antitumor immunity by CTLA-4 blockade. *Science* **271**, 1734-1736 (1996).
- 3. C. Robert *et al.*, Nivolumab in previously untreated melanoma without BRAF mutation. *N Engl J Med* **372**, 320-330 (2015).
- 4. J. Bian, K. Almhanna, Pancreatic cancer and immune checkpoint inhibitors-still a long way to go. *Transl Gastroenterol Hepatol* **6**, 6 (2021).
- 5. M. D. Park, A. Silvin, F. Ginhoux, M. Merad, Macrophages in health and disease. *Cell* **185**, 4259-4279 (2022).
- 6. A. Mantovani, F. Marchesi, A. Malesci, L. Laghi, P. Allavena, Tumour-associated macrophages as treatment targets in oncology. *Nat Rev Clin Oncol* **14**, 399-416 (2017).
- 7. K. Mulder *et al.*, Cross-tissue single-cell landscape of human monocytes and macrophages in health and disease. *Immunity* **54**, 1883-1900 e1885 (2021).
- 8. S. Cheng *et al.*, A pan-cancer single-cell transcriptional atlas of tumor infiltrating myeloid cells. *Cell* **184**, 792-809 e723 (2021).
- 9. C. Bleriot, S. Chakarov, F. Ginhoux, Determinants of Resident Tissue Macrophage Identity and Function. *Immunity* **52**, 957-970 (2020).
- 10. F. Ginhoux, M. Guilliams, Tissue-Resident Macrophage Ontogeny and Homeostasis. *Immunity* 44, 439-449 (2016).
- 11. Y. Zhu *et al.*, Tissue-Resident Macrophages in Pancreatic Ductal Adenocarcinoma Originate from Embryonic Hematopoiesis and Promote Tumor Progression. *Immunity* **47**, 323-338 e326 (2017).
- 12. M. Casanova-Acebes *et al.*, Tissue-resident macrophages provide a pro-tumorigenic niche to early NSCLC cells. *Nature* **595**, 578-584 (2021).
- 13. Z. Liu *et al.*, Fate Mapping via Ms4a3-Expression History Traces Monocyte-Derived Cells. *Cell* **178**, 1509-1525 e1519 (2019).
- 14. R. Nalio Ramos *et al.*, Tissue-resident FOLR2(+) macrophages associate with CD8(+) T cell infiltration in human breast cancer. *Cell* **185**, 1189-1207 e1125 (2022).
- 15. A. Chow *et al.*, Tim-4(+) cavity-resident macrophages impair anti-tumor CD8(+) T cell immunity. *Cancer Cell* **39**, 973-988 e979 (2021).
- 16. R. E. Menjivar *et al.*, Arginase 1 is a key driver of immune suppression in pancreatic cancer. *Elife* **12**, (2023).
- 17. L. Zhang *et al.*, Single-Cell Analyses Inform Mechanisms of Myeloid-Targeted Therapies in Colon Cancer. *Cell* **181**, 442-459 e429 (2020).
- 18. E. Kerkela *et al.*, Metalloelastase (MMP-12) expression by tumour cells in squamous cell carcinoma of the vulva correlates with invasiveness, while that by macrophages predicts better outcome. *J. Pathol.* **198**, 258-269 (2002).
- 19. E. Timperi *et al.*, Lipid-Associated Macrophages Are Induced by Cancer-Associated Fibroblasts and Mediate Immune Suppression in Breast Cancer. *Cancer Res.* **82**, 3291-3306 (2022).
- 20. D. A. Jaitin *et al.*, Lipid-Associated Macrophages Control Metabolic Homeostasis in a Trem2-Dependent Manner. *Cell* **178**, 686-698 e614 (2019).

- 21. V. Bergen, M. Lange, S. Peidli, F. A. Wolf, F. J. Theis, Generalizing RNA velocity to transient cell states through dynamical modeling. *Nat. Biotechnol.* **38**, 1408-1414 (2020).
- 22. K. Street *et al.*, Slingshot: cell lineage and pseudotime inference for single-cell transcriptomics. *BMC Genomics* **19**, 477 (2018).
- 23. E. Becht *et al.*, High-throughput single-cell quantification of hundreds of proteins using conventional flow cytometry and machine learning. *Sci Adv* 7, eabg0505 (2021).
- 24. C. A. Dutertre *et al.*, Single-Cell Analysis of Human Mononuclear Phagocytes Reveals Subset-Defining Markers and Identifies Circulating Inflammatory Dendritic Cells. *Immunity* **51**, 573-589 e578 (2019).
- 25. M. D. Park *et al.*, TREM2 macrophages drive NK cell paucity and dysfunction in lung cancer. *Nat. Immunol.*, (2023).
- 26. M. Molgora *et al.*, TREM2 Modulation Remodels the Tumor Myeloid Landscape Enhancing Anti-PD-1 Immunotherapy. *Cell* **182**, 886-900 e817 (2020).
- 27. H. Keren-Shaul *et al.*, A Unique Microglia Type Associated with Restricting Development of Alzheimer's Disease. *Cell* **169**, 1276-1290 e1217 (2017).
- 28. S. Aibar *et al.*, SCENIC: single-cell regulatory network inference and clustering. *Nat. Methods* **14**, 1083-1086 (2017).
- 29. Y. Zhou *et al.*, Metascape provides a biologist-oriented resource for the analysis of systems-level datasets. *Nat Commun* **10**, 1523 (2019).
- 30. S. Jin *et al.*, Inference and analysis of cell-cell communication using CellChat. *Nat Commun* **12**, 1088 (2021).
- 31. C. Baccin *et al.*, Combined single-cell and spatial transcriptomics reveal the molecular, cellular and spatial bone marrow niche organization. *Nat. Cell Biol.* **22**, 38-48 (2020).
- 32. M. S. F. Ng *et al.*, Deterministic reprogramming of neutrophils within tumors. *Science* **383**, eadf6493 (2024).
- 33. E. Zhao *et al.*, Spatial transcriptomics at subspot resolution with BayesSpace. *Nat. Biotechnol.* **39**, 1375-1384 (2021).
- 34. Y. Goltsev *et al.*, Deep Profiling of Mouse Splenic Architecture with CODEX Multiplexed Imaging. *Cell* **174**, 968-981 e915 (2018).
- 35. W. L. Hwang *et al.*, Single-nucleus and spatial transcriptome profiling of pancreatic cancer identifies multicellular dynamics associated with neoadjuvant treatment. *Nat. Genet.* **54**, 1178-1191 (2022).
- 36. K. Chen *et al.*, Single cell RNA-seq reveals the CCL5/SDC1 receptor-ligand interaction between T cells and tumor cells in pancreatic cancer. *Cancer Lett.* **545**, 215834 (2022).
- 37. N. G. Steele *et al.*, Multimodal Mapping of the Tumor and Peripheral Blood Immune Landscape in Human Pancreatic Cancer. *Nat Cancer* **1**, 1097-1112 (2020).
- 38. J. Peng *et al.*, Single-cell RNA-seq highlights intra-tumoral heterogeneity and malignant progression in pancreatic ductal adenocarcinoma. *Cell Res.* **29**, 725-738 (2019).
- 39. T. Stuart *et al.*, Comprehensive Integration of Single-Cell Data. *Cell* **177**, 1888-1902 e1821 (2019).
- 40. F. A. Wolf *et al.*, PAGA: graph abstraction reconciles clustering with trajectory inference through a topology preserving map of single cells. *Genome Biol* **20**, 59 (2019).
- 41. J. Villar, L. Ouaknin, A. Cros, E. Segura, Monocytes differentiate along two alternative pathways during sterile inflammation. *EMBO Rep* **24**, e56308 (2023).

- 42. A. Subramanian *et al.*, Gene set enrichment analysis: a knowledge-based approach for interpreting genome-wide expression profiles. *Proc Natl Acad Sci USA* **102**, 15545-15550 (2005).
- 43. V. K. Mootha *et al.*, PGC-1alpha-responsive genes involved in oxidative phosphorylation are coordinately downregulated in human diabetes. *Nat. Genet.* **34**, 267-273 (2003).
- 44. <u>https://www.cancer.gov/ccg/research/genome-sequencing/tcga</u>. (2023).
- 45. V. Mysore *et al.*, Monocytes transition to macrophages within the inflamed vasculature via monocyte CCR2 and endothelial TNFR2. *J. Exp. Med.* **219**, (2022).
- 46. Y. Katzenelenbogen *et al.*, Coupled scRNA-Seq and Intracellular Protein Activity Reveal an Immunosuppressive Role of TREM2 in Cancer. *Cell* **182**, 872-885 e819 (2020).
- 47. A. T. Henze, M. Mazzone, The impact of hypoxia on tumor-associated macrophages. J. Clin. Invest. 126, 3672-3679 (2016).
- 48. R. Bill *et al.*, CXCL9:SPP1 macrophage polarity identifies a network of cellular programs that control human cancers. *Science* **381**, 515-524 (2023).
- 49. A. Sebestyen, L. Kopper, T. Danko, J. Timar, Hypoxia Signaling in Cancer: From Basics to Clinical Practice. *Pathol Oncol Res* **27**, 1609802 (2021).
- 50. C. Bleriot, G. Dunsmore, D. Alonso-Curbelo, F. Ginhoux, A temporal perspective for tumor-associated macrophage identities and functions. *Cancer Cell*, (2024).
- 51. C. Bleriot *et al.*, Liver-resident macrophage necroptosis orchestrates type 1 microbicidal inflammation and type-2-mediated tissue repair during bacterial infection. *Immunity* **42**, 145-158 (2015).
- 52. D. Vanneste *et al.*, MafB-restricted local monocyte proliferation precedes lung interstitial macrophage differentiation. *Nat. Immunol.* **24**, 827-840 (2023).
- 53. H. L. Penny *et al.*, Targeting Glycolysis in Macrophages Confers Protection Against Pancreatic Ductal Adenocarcinoma. *Int J Mol Sci* **22**, (2021).
- 54. N. M. Aiello, A. D. Rhim, B. Z. Stanger, Orthotopic Injection of Pancreatic Cancer Cells. *Cold Spring Harb Protoc* **2016**, pdb prot078360 (2016).
- 55. Y. Hao *et al.*, Integrated analysis of multimodal single-cell data. *Cell* **184**, 3573-3587 e3529 (2021).
- 56. A. Dobin *et al.*, STAR: ultrafast universal RNA-seq aligner. *Bioinformatics* **29**, 15-21 (2013).
- 57. A. McDavid *et al.*, Data exploration, quality control and testing in single-cell qPCR-based gene expression experiments. *Bioinformatics* **29**, 461-467 (2013).
- 58. C. Li *et al.*, SciBet as a portable and fast single cell type identifier. *Nat Commun* **11**, 1818 (2020).
- 59. Z. Gu, L. Gu, R. Eils, M. Schlesner, B. Brors, circlize Implements and enhances circular visualization in R. *Bioinformatics* **30**, 2811-2812 (2014).
- 60. Z. Du *et al.*, Qualifying antibodies for image-based immune profiling and multiplexed tissue imaging. *Nat Protoc* **14**, 2900-2930 (2019).
- 61. S. Hanzelmann, R. Castelo, J. Guinney, GSVA: gene set variation analysis for microarray and RNA-seq data. *BMC Bioinformatics* 14, 7 (2013).
- 62. P. Bankhead *et al.*, QuPath: Open source software for digital pathology image analysis. *Sci Rep* **7**, 16878 (2017).
- 63. J. Schindelin *et al.*, Fiji: an open-source platform for biological-image analysis. *Nat Methods* **9**, 676-682 (2012).

Acknowledgements: We thank the Wong Siew Cheng Laboratory for the use of the KPC pancreatic cancer model described in this paper. We thank Marc Lecuit laboratory for providing the Ccr2-KO mice. We thank the animal facilities in the Institute Gustave Roussy, Shanghai Jiao Tong University School of Medicine, and Singapore Immunology Network for ensuring all protocols were performed within the appropriate ethical considerations. We thank the members of U1015 for helpful discussion. We thank Lucy Robinson for the invaluable input and editing of this manuscript.

Funding: We thank ARC Foundation (Recruiting International Leaders 2020) & Fondation Gustave Roussy for their financial support in this work. A.S. and D.A.B. were funded by the Deutsche Forschungsgemeinschaft (DFG, German Research Foundation) under Germany's Excellence Strategy – EXC2151 – 390873048 (A.S., D.A.B.) and the SFB 1454-P05-432325352 (A.S., D.A.B.).

Author Contributions: G.D., W.G., D.B., K.Y., L.T., M.N., I.K., A.B., M.B., Z.L., S.C., C.B. performed experimentation. G.D., Z.L., D.B., I.K., B.K., A.B., J.V., K.M., C.B. performed formal analysis. Z.L., J-Y.S., G.G. performed data curation. C-AD, S.C., Z.L., C.S-F., W-H.F., A.Sh., A.Sc. provided invaluable advice. L.G.N., C.B., F.G. supervised the project. C.B., F.G., acquired funding for the project. G.D., C.B., F.G. wrote the original draft of the paper.

Competing Interests: The authors declare that they have no competing interests.

Data and materials availability: All generated scRNA-seq have been deposited in the NCBI Gene Expression Omnibus under accession number GSE270793. Tabulated data underlying the main figures is provided in Data file S11. All other data needed to support the conclusions of the paper are present in the paper or the Supplementary Materials. Mouse models ($Ms4a3^{Cre}$, $Ms4a3^{CreERT2}$ and $Trem2^{EGFP}$) are available upon request to Dr. Florent Ginhoux following execution of an MTA with the Shanghai Institute of Immunology.

Figure captions

Fig. 1. Ontogeny of TAMs influences their transcriptional profile.

(A) Experimental design of scRNA-seq of tumor tdTomato⁺ and tdTomato⁻ cells from $Ms4a3^{Cre}$ x $Rosa^{tdTomato}$ mice with KPC-derived PDAC (n=3 mice, samples pooled). Tumors were collected at day 35 post tumor injection. (B) UMAP representation of the scRNA-seq data filtered on monocytes, macrophages, and dendritic cells (DCs). (C) Dot plot showing top differentially expressed genes (FDR < 0.05 and highest LogFC) from monocytes, macrophages, and dendritic cells. (D) tdTomato protein labelling across sorted monocytes, macrophages, and DCs. (E) Proportions of monocytes, macrophages, and DCs labelled with tdTomato. (F) Dot plot showing leading differentially expressed genes from tdTomato⁺ and tdTomato⁻ macrophages. (G) Alluvial plot where bar thickness represents the enrichment of gene ontology from tdTomato⁺ and tdTomato⁻ macrophages.

Fig. 2. Timestamping reveals temporal relationships of TAM populations.

(A) Experimental design of scRNA-seq of tumor tdTomato⁺ and tdTomato⁻ cells from $Ms4a3^{CreERT2} \ge Rosa^{tdTomato}$ mice with KPC-derived PDAC, pulsed with tamoxifen at day 18 post-tumor injection (n=3 mice, samples pooled). (B) UMAP representation of the scRNA-seq data filtered on monocytes, TAM1, TAM2 and TAM3 (C) Dot plots of top differentially expressed genes from monocytes, TAM1, TAM2 and TAM3. (D) UMAP with arrows showing the scVelo analysis of monocyte-to-macrophage differentiation. (E) UMAP showing clustering and pseudotime analysis of monocytes, TAM1, TAM2 and TAM3. (F) Heatmap of ordered pseudotime analysis from slingshot and signature density of monocytes, TAM1, TAM2 and TAM3. (G) UMAP showing $Ms4a3^{CreERT2} \ge Rosa^{tdTomato}$ labelling of monocytes, TAM1, TAM2 and TAM3. tdTomato labelling is based on the FACS sorting. (H) Proportions of $Ms4a3^{CreERT2} \ge Rosa^{tdTomato}$ labelling of monocytes, TAM1, TAM2 and TAM3.

Fig. 3. Surface marker identification and dynamic timestamping of TAM subpopulations.

(A) Experimental design of LEGENDscreen analysis from $Ms4a3^{CreERT2}$ x $Rosa^{tdTomato}$ mice pulsed with tamoxifen at day 14, 21 and 28, after orthotopic injection of KPC cells (n = 3 mice for each timepoint). (B) UMAP of tdTomato labelled monocytes and macrophages from the Infinity Flow analysis labelled as monocytes, TAM1, TAM2, and TAM3. (C) Top differentially expressed proteins (Top 5 LogFC and FDR > 0.05) in monocytes, TAM1, TAM2 and TAM3. (D) Gating strategy identifying monocytes, TAM1, TAM2 and TAM3. (E) UMAP showing the different clusters present at late (day 28), intermediate (day 21) and early (day 14) tdTomato⁺ mononuclear cells. (F) Proportion of clustered cells in late (day 28), intermediate (day 21) and early (day 14) timepoints. (G) UMAP of slingshot analysis with lines showing start and end points and pseudotime analysis. (H) Heatmap of ordered pseudotime analysis from slingshot and signature density of monocytes, TAM1, TAM2 and TAM3.

Fig. 4. IntTAMs give rise to Maf-dependant TAM2 and Maf-independant TAM3.

(A) Experimental design of timestamping Ms4a3^{CreERT2} Rosa^{tdTomato} mice every four days after tumor injection. All mice were sacrificed at day 35 and tissues were digested for spectral flow

cytometry. (B) Proportion of tdTomato labelling of Monocytes, IntTAM, TAM2, and TAM3 at each timepoint of tamoxifen administration. (C) Experimental design of intratumoral adoptive transfer of IntTAMs into mice with KPC-derived PDAC. (D) Immunophenotyping of adoptively transferred IntTAMs at day 3 or 7 post-transfer. (E) SCENIC analysis predicting differentially expressed regulons in different Monocyte and TAM populations. (F) Tumor growth curve of $LysM^{Cre} \ge Maf^{lox}$ and WT mice (n=3-4 mice per group). (G) Cumulative results of the abundance of each TAM population in $LysM^{Cre} \ge Maf^{lox}$ and WT mice. Statistics were performed using a Mann-Whitney test. * p < 0.05, ** p < 0.01, *** p < 0.001, **** p < 0.001

Fig. 5. TAM2 and TAM3 inhabit distinct niches in PDAC.

(A) Experimental outline of 10X Visium spatial transcriptomics sample preparation and data analysis of KPC-derived PDAC in wildtype mice at either day 14 or day 42 (n=4 mice). (B) Clustering and functional annotation of tumor areas. (C) Circo plot with bar thickness representing the enrichment score of gene ontology for each spatial cluster. (D) Projection of monocytes, IntTAMs, TAM2 and TAM3 signatures on the tumor sample (E) UMAP of spatial clusters and predicted cell types from 10X Visium analysis. (F) Abundance of monocytes, IntTAMs, TAM2 and TAM3 in each spatial cluster (G) CODEX analysis with stromal and immune markers used to identify populations of cells in murine PDAC. (H) Density plots from multiplex CODEX imaging analysis representing IntTAMs, TAM2 and TAM3. Scale bars, 3.25 mm.

Fig. 6. Identification of TAM subpopulations in human PDAC.

(A) Integration and analysis of human PDAC analysis from previously published datasets containing a total of 7 healthy patient samples and 89 PDAC samples (*35-38*). (B) Identification of clusters corresponding to Monocyte and Human TAM (Hu.TAM) populations a-h. (C) Proportions of Monocytes and Hu.TAM a-h across Control and Tumor tissues. (D) Label transfer of monocyte and TAM populations in murine PDAC to populations identified in human PDAC.
(E) Clustering and shared gene expression of monocytes and TAM populations in mouse and human PDAC. (F) PAGA analysis showing the link between the monocytes and TAM populations.
(G) Heatmaps showing the differentiation of monocytes to TAMs.

Fig. 7. TAMs have distinct spatial distribution in human PDAC.

(A) H&E staining of human PDAC tissue with annotation of viable and necrotic tumor tissue. (B) Immunofluorescence of markers identifying monocytes and macrophages in human PDAC. Arrows point to Monocyte/Hu.TAM a, Hu.TAM b/c, and Hu.TAM d/e. (C) Dots representing different macrophage populations identified in human PDAC tissue. (D) Proximity of monocyte and TAM populations to one another (n=4 different human PDAC tissues). (E) Survival curve of data from the TCGA representing the impact of the Hu.TAM b/c signature on patient survival.