

1 **Mind the translational gap: human microglia differ from**
2 **mouse microglia in their regulation of K_v and $K_{ir}2.1$**
3 **channels**

4

5 Simone Schilling^{1,2,3,4}, Jessica Felk¹, Majed Kikhia^{1,2,5}, Alice Podestà^{1,8}, Johanna Hintze¹,
6 Pawel Fidzinski^{1,7,8}, Martin Holtkamp^{1,6,7}, Julia Onken⁹, Thomas Sauvigny¹⁰, Thilo
7 Kalbhenn¹¹, Matthias Simon¹¹, Helmut Kettenmann^{12, 13}, Matthias Endres^{1,2,3,5}, Ria Göttert^{#,1,2,3}
8 & Karen Gertz^{*,#,1,2,3,5}

9 1. Charité – Universitätsmedizin Berlin, Corporate Member of Freie Universität Berlin
10 and Humboldt-Universität zu Berlin, Department of Neurology and Experimental
11 Neurology, Charitéplatz 1, 10117 Berlin, Germany

12 2. Charité – Universitätsmedizin Berlin, Corporate Member of Freie Universität Berlin
13 and Humboldt-Universität zu Berlin, Center for Stroke Research Berlin (CSB),
14 Charitéplatz 1, 10117 Berlin, Germany

15 3. German Centre for Cardiovascular Research (DZHK), Partner Site Berlin, Berlin,
16 Germany

17 4. Berlin Institute of Health at Charité - Universitätsmedizin Berlin, Charitéplatz 1, 10117
18 Berlin, Germany

19 5. Charité – Universitätsmedizin Berlin, Corporate Member of Freie Universität Berlin
20 and Humboldt-Universität zu Berlin, Einstein Center for Neurosciences Berlin,
21 Charitéplatz 1, 10117 Berlin, Germany.

- 22 6. Epilepsy-Center Berlin-Brandenburg, Ev. Krankenhaus Königin Elisabeth Herzberge,
23 Herzbergstr. 79, 10365 Berlin, Germany
- 24 7. Charité – Universitätsmedizin Berlin, Corporate Member of Freie Universität Berlin
25 and Humboldt-Universität zu Berlin, Department of Clinical and Experimental
26 Epileptology, Charitéplatz 1, 10117 Berlin, Germany
- 27 8. Charité – Universitätsmedizin Berlin, Corporate Member of Freie Universität Berlin
28 and Humboldt-Universität zu Berlin, Institute of Neurophysiology, Charitéplatz 1,
29 10117 Berlin, Germany
- 30 9. Charité – Universitätsmedizin Berlin, Corporate Member of Freie Universität Berlin
31 and Humboldt-Universität zu Berlin, Department of Neurosurgery, Charitéplatz 1,
32 10117 Berlin, Germany
- 33 10. Department of Neurosurgery, University Medical Center Hamburg-Eppendorf,
34 Hamburg, Germany
- 35 11. Department of Neurosurgery, Evangelisches Klinikum Bethel, Universitätsklinikum
36 Ostwestfalen-Lippe, Bielefeld, Germany
- 37 12. Max-Delbrück-Center (MDC) for Molecular Medicine in the Helmholtz Association,
38 Berlin-Buch, Germany.
- 39 13. Shenzhen University of Advanced Technology, Shenzhen, China.

40

41 # denotes equal contribution

42 * Correspondence should be addressed to Prof. Dr. Karen Gertz, Department of Neurology and
43 Experimental Neurology, Charité - Universitätsmedizin Berlin, Charitéplatz 1, 10117 Berlin,
44 Germany; Email: karen.gertz@charite.de

45

46 **Abstract**

47 K^+ channels are important for controlling membrane potential and regulating functional
48 properties of microglia. Whereas the inward-rectifying K^+ (K_{ir}) channel 2.1 modulates
49 proliferation, voltage-gated K^+ channels (K_v) are linked to inflammatory response in mouse
50 microglia (mMG). These channels serve as possible drug targets but little is known regarding
51 their activity in human microglia.

52 We used patch-clamp recording to study membrane currents of primary human microglia
53 (hMG) and human induced pluripotent stem cell-derived microglia-like cells (hiPSC-MGL)
54 and compared them with mMG. Unlike mMG, hMG and hiPSC-MGL exhibited $K_{ir}2.1$ currents
55 only after LPS+IFN- γ stimulation. Interestingly, K_v currents were not observed in hMG or
56 hiPSC-MGL under any condition. While mMG had a progressively amoeboid morphology after
57 stimulation, hMG showed few morphological changes and hiPSC-MGL increased
58 ramification.

59 Overall, the activity of $K_{ir}2.1$ and K_v channels in hMG and hiPSC-MGL differs fundamentally
60 from mMG. Our findings highlight differences between species and underscore the need for
61 translational approaches.

62 **Introduction**

63 Microglia are the resident immune cells of the central nervous system (CNS) and play essential
64 roles in maintaining homeostasis, responding to injury, and regulating neuroinflammation [1].

65 In their surveillant state, microglia exhibit a highly ramified morphology, continuously
66 monitoring the brain microenvironment *in vivo*. Upon activation, they undergo rapid
67 morphological changes, transitioning to an amoeboid shape characterized by retracted
68 processes and enlarged soma - a phenomenon well-characterized in rodent models [2-4]. This
69 morphological shift is accompanied by functional changes, including the release of cytokines
70 and chemokines such as TNF- α , IL-6, IL-1 β , and CCL2 [5]. These secretion patterns are well
71 established in rodent microglia and increasingly reported in human microglial models [6].

72 Furthermore, microglia express a range of ion channels, which are essential for maintaining
73 membrane potential and regulating context-dependent responses [7]. Patch-clamp
74 electrophysiology allows high-temporal resolution of microglial ion channel activity, under
75 resting and activated conditions, offering insights into microglial responses to pathological
76 stimuli [8]. Rodent microglia have been characterized using patch-clamp recordings under
77 various conditions. *In vivo*, mouse microglia express low levels of K⁺ channels, however, after
78 a pathological challenge, inward-rectifying K⁺ channels are upregulated first [4, 8]. Cultured
79 mouse microglia (mMG) constitutively express these inward-rectifying K⁺ channel. Upon
80 stimulation, e.g. by facial axotomy, stab wound or in the context of stroke, mouse microglia
81 express outward-rectifying, voltage-gated K⁺ channels [4, 9, 10].

82 K_{ir}2.1 (*KCNJ2* gene) is the predominant inward-rectifying K⁺ channel in microglia and
83 contributes to the maintenance of the resting membrane potential, thereby regulating activation
84 and responsiveness. It plays a key role in stabilizing microglial homeostasis and modulating
85 their response to inflammation [11]. Microglia also express several outward-rectifying,
86 voltage-gated K⁺ channels of the K_v family, with K_v1.3 being the most extensively studied [12-

87 14]. K_v1.3 is a voltage-gated K⁺ channel that contributes to membrane repolarization and
88 calcium influx required for functions such as cytokine release, proliferation, and migration
89 [13]. K_v1.3 is upregulated in activated mouse microglia *in vivo* and *in vitro*, highlighting its
90 relevance in neuroinflammatory and neurodegenerative conditions [12, 14]. It has therefore
91 been suggested as a potential drug target to alter microglia activity [15]. Although the presence
92 of K_v1.3 has been reported in human microglia in histology and sequencing data, there is a lack
93 of data demonstrating its functional relevance in human microglia [16].

94 Translation of microglial findings from mouse models to clinical applications has been
95 challenging, in part due to limited access to human cells and tissue. Primary human microglia
96 in culture (hMG) are a precious resource, as surgical tissue is not widely available and often
97 represents pathological conditions. We have previously studied hMG to investigate the
98 properties of human microglia [17]. In addition, human induced pluripotent stem cell-derived
99 microglia-like cells (hiPSC-MGL) represent an increasingly used alternative model that may
100 better reflect human microglial physiology while reducing reliance on animal experiments [17,
101 18]. However, their application depends on thorough characterization, and electrophysiological
102 data remains scarce.

103 In this study, we investigated the properties of hMG and hiPSC-MGL in comparison to the
104 well-established mMG, focusing in particular on electrophysiological functions and the activity
105 of potassium channels. Our work underscores the importance of translational approaches.

106

107 **Material and Methods**

108 **Primary mouse microglia (mMG)**

109 All experimental procedures were approved by the respective official committees and carried
110 out in strict accordance with the Animal Welfare Act and the ARRIVE (Animals in Research:
111 Reporting In Vivo Experiments) guidelines.

112 Primary mouse microglia (mMG) were isolated from C57BL/6J wildtype male and female
113 mice at postnatal day 3 using a previously published and well-established protocol [19]. In
114 summary, mMG were collected using a gentle shake-off method. The cells were left in culture
115 for an additional 24 hours before use. All experiments were conducted in DMEM supplemented
116 with 10% fetal calf serum, 1% Pen/Strep, 1% sodium pyruvate, and 4.5 g/l d-glucose
117 ("complete medium").

118 **Primary human microglia (hMG)**

119 Primary human microglia (hMG) were isolated from surgery tissue of patients with medication-
120 resistant epilepsy after prior written consent. The ethics committee of the Charité
121 Universitätsmedizin Berlin (EA2/111/14) approved all procedures. The age and sex of the
122 patients included in this study are given in Suppl. Table 1. The microglia were isolated
123 according to previously published protocols with slight modifications [20]. In summary, blood
124 vessels and meninges were carefully removed from resected brain tissue using a dissection
125 microscope (Zeiss Stemi DV4, Oberkochen, Germany). The tissue was then weighed, diced,
126 and dissociated with the Neural Tissue Dissociation Kit (P) (#130–092-628, Miltenyi Biotec,
127 Bergisch Gladbach, Germany). The resulting microglia were cultured as adherent cells in poly-
128 L-lysine coated T75 flasks with microglia culture medium, which included DMEM/F12, 10%
129 fetal calf serum, and 1X penicillin–streptomycin solution. After 1 week of incubation at 37°C
130 and 5% CO₂, cells were transferred to multiwell plates for further experiments. To detach the

131 cells, the culture medium was removed, and the flasks were washed with phosphate-buffered
132 saline (PBS, without Mg⁺⁺ and Ca⁺⁺). Cells were then incubated with 3 ml Trypsin/EDTA
133 solution (0.25%/0.02%) at 37°C and 5% CO₂ for 5 minutes. To ensure complete detachment,
134 cells were gently scraped using a rubber cell scraper. After counting with a hemocytometer,
135 cells were seeded in microglia culture medium on a 24-well plate.

136 **Induced pluripotent stem-cell derived microglia-like cells (hiPSC-MGL)**

137 Human induced pluripotent stem cells (iPSC; cell line BIHi250-A, see [https://hpscereg.eu/cell-](https://hpscereg.eu/cell-line/BIHi250)
138 [line/BIHi250](https://hpscereg.eu/cell-line/BIHi250)) were provided by the Berlin Institute of Health (BIH) Core Unit pluripotent Stem
139 Cells and Organoids (CUSCO). hiPSCs were then differentiated into hiPSC-derived microglia-
140 like cells (MGL) using a previously published protocol [17, 21]. In brief, hiPSCs were initially
141 differentiated into hematopoietic progenitor cells over 11 days using a hematopoietic
142 differentiation medium (HDM). From day 0 to day 4 cells were maintained in STEMdiffTM
143 hematopoietic Differentiation Medium A. From day 4 until day 10 STEMdiffTM Hematopoietic
144 Differentiation Medium B was applied. On day 10, cells were harvested and FACsorted based
145 on CD43, CD45 and CD 34 expression. CD43⁺/CD45⁺ cells were then transferred to microglia
146 differentiation medium (MDM) composed of phenol-free DMEM/F12 (1:1), ITS-G (2% v/v),
147 B27 (2% v/v), N2 (0.5% v/v), monothioglycerol (400 µM), Glutamax (1X), NEAA (1X), and
148 additional insulin (5 µg/ml) for another 28 days. MDM was supplemented as follows: from
149 days 10 to 35 with M-CSF (25 ng/ml), IL-34 (100 ng/ml), and TGFb-1 (50 ng/ml); and from
150 days 35 to 38 with M-CSF (25 ng/ml), IL-34 (100 ng/ml), TGFb-1 (50 ng/ml), CD200 (100
151 ng/ml), and CX3CL1 (100 ng/ml). After 38 days of differentiation, hiPSC-MGL were
152 harvested and plated for downstream analysis.

153 For electrophysiological recordings cells were plated on poly-L-lysine for mMG and hMG or
154 vitronectin for hiPSC-MGL coated glass cover slips in a 24-well plate at a density of 10.000
155 cells/well. For immunological stainings cells were plated in 12-well chamber slides at a density

156 of 5.000 cells/well. For qPCR, cells were plated in 96-well plates at a density of 20.000
157 cells/well (mMG), 30.000 cells/well (hMG), or 40.000 cells/well (hiPSC-MGL). Cells were
158 then incubated overnight at 37°C and 5% CO₂ to allow for attachment and adaptation before
159 stimulation with either 1 µg/ml LPS, 200 ng/ml IFN-γ, or both for 24 hours.

160 **Patch-clamp recordings**

161 Cover slides with cells were placed in a custom-made patch clamp setup. Bright field images
162 were registered using an upright monocular phototube (Leica, Bensheim, Germany) and a CCD
163 camera (8-bit, Sanyo, Osaka, Japan) at 60X magnification.

164 Cells were submerged in carbogenated artificial cerebrospinal fluid (aCSF) (129 mM NaCl,
165 1.25 mM NaH₂PO₄, 1.6 mM CaCl₂, 3 mM KCl, 1.8 mM MgSO₄, 21 mM NaHCO₃ and 10 mM
166 Glucose; adjusted to 300-310 mOsm; all by Carl Roth GmbH, Karlsruhe, Germany) at room
167 temperature. Intracellular solution consisted of 120 mM KCl, 5 mM NaCl, 2 mM MgCl₂, 1
168 mM CaCl₂, 10 mM HEPES, 11 mM EGTA (adjusted to pH 7,3 with KOH, 290-300 mOsm).
169 Channel antagonists ML133 (20 µM) and 4-AP (1 mM) were washed in during patch clamp
170 recordings as indicated.

171 Borosilicate pipettes (Science Products, Hofheim, Germany; 1.5 mm outer diameter) were
172 pulled using a Narishige PC-10 vertical puller (London, UK; electrode resistance of 4-6
173 MOhm). Pipettes were placed on an Axon Instruments headstage CV-7B (sample rate 100 kHz,
174 low-pass filter 10 kHz (8-pole Bessel Filter)), transmitting the signal to Axon CAN
175 MultiClamp 700B (Axon Instruments, Union City, CA, USA). Signals were digitized through
176 the Axon Digidata 1550 (Axon Instruments). Data was processed with the Multiclamp and
177 pClamp 10 software. Cells were clamped at either -20 mV or -70 mV holding potential (as
178 indicated in the legends). Voltage steps of 50 ms duration were applied from -170 mV to +70
179 mV with increasing steps of 10 mV.

180 **Isolation of mRNA and qPCR**

181 RNA was extracted from cultured cells using the NucleoSpin® RNA XS kit (Macherey-Nagel,
182 Düren, Germany). For reverse transcription, M-MLV reverse transcriptase and random
183 hexamers were employed to convert RNA into cDNA. Polymerase chain reaction (PCR)
184 amplification was carried out using gene-specific primers and Light Cycler® 480 SYBR Green
185 I Master (Roche Diagnostics, Indianapolis, IN, USA). The PCR conditions were as follows:
186 preincubation at 95°C for 10 minutes, followed by 45 cycles of 95°C for 10 seconds, primer-
187 specific annealing temperature for 10 seconds, and 72°C for 15 seconds. Crossing points of the
188 amplified products were determined using the Second Derivative Maximum Method (Light
189 Cycler Version LCS480 1.5.0.39, Roche). mRNA expression levels were quantified relative to
190 tripeptidyl peptidase 2 (*TPP2*). The specificity of the PCR products was confirmed by melting
191 curve analysis. PCR products were also analyzed on a 1.5% agarose gel to verify the presence
192 of a single amplicon of the expected size. Negative controls, including reactions lacking either
193 template DNA or reverse transcriptase, showed no bands on the gel.

194 **Immunocytochemistry**

195 mMG, hiPSC-MGL, and hMG were fixed for 20 minutes at room temperature using 4%
196 paraformaldehyde (PFA). The cells were then washed three times with 1× tris-buffered saline
197 (TBS). Non-specific binding was blocked with TBS blocking buffer (TBS+), consisting of 1×
198 TBS, 3% normal donkey serum (NDS), and 0.1% Triton X-100 (stock solution: 10%) for 30
199 minutes. Primary antibodies in TBS+ were incubated overnight at 4°C. Secondary antibody
200 was diluted in 1× TBS and species-specific donkey anti-species serum. After washing with 1x
201 TBS, secondary antibodies were applied at a dilution of 1:400 and incubated for two hours.
202 The cells were then washed again, and Hoechst (1.4 µg/mL), diluted in 1× TBS, was used for
203 nuclear staining.

204 **Confocal microscopy**

205 Microscopy imaging was performed using the confocal laser scanning microscope LSM 700
206 (Zeiss) equipped with a 40 \times , 1.3 NA oil objective. Representative images were obtained from
207 random regions of the cultures as *z*-stacks with dimensions of 1,024 \times 1,024 pixels in *xy*, 4 *z*-
208 planes, and a pixel size of 0.312 \times 0.312 μ m.

209 **Image processing and morphological analysis**

210 The morphological analysis was performed using a customized macro script in ImageJ (version
211 1.54f)[22]. The script applies filters to enhance the signal-to-background ratio and then creates
212 a maximum intensity projection. The automatic thresholding algorithm “Li” was applied,
213 followed by a series of binary operations and size filtering to fill holes and filter out small
214 background objects. Touching cells were automatically separated by applying a watershed
215 based on a seed image created by thresholding a distance map image using functions from the
216 3D ImageJ Suite plugin [23]. Objects crossing the image borders were automatically excluded.
217 Errors in automatic segmentation were corrected manually by separating unseparated objects,
218 excluding overlapping or merged cells with obscure borders, and manually labeling faint
219 cellular parts that were not detected automatically. Morphological features were then extracted
220 using the MorphoLibJ plugin and the skeleton analysis functions of ImageJ [24]. Statistical
221 analysis was performed on selected representative features, e.g., perimeter-to-area ratio,
222 circularity, maximum calliper diameter.

223 **Statistical analysis**

224 Electrophysiological data were analyzed using custom written Matlab (Version 2021b,
225 MathWorks, Natick, MA, USA) scripts. I/V curves were derived from the last 10 ms of each
226 voltage pulse. Capacitance was derived from I/V curves. Inward current density was calculated
227 at -120 mV to -100 mV and related to the cell capacitance.

228 Statistical analysis was performed using GraphPad Prism Version 10.2.1 (GraphPad, San
229 Diego, CA, USA). Only for the morphological analysis, statistical testing was performed in
230 Python using Pingouin and scikit-posthocs libraries [25, 26]. Values are represented as box
231 plot with median, interquartile range whiskers from minimum to maximum. For the
232 morphology analysis the whiskers were chosen to indicate 1.5x IQR, as the groups were
233 sufficiently large. Each dot represents one measurement or cell, as indicated in the legends.
234 The different treatment groups were compared using the Kruskal-Wallis test followed by
235 Dunn's test for multiple comparisons, unless indicated otherwise in the legends. Differences
236 were estimated as significant for $p < 0.05$ and indicated with an asterisk.

237 Graphical representation and figures were assorted using CorelDRAW Graphics Suits X7
238 (Corel Corporation, Ottawa, Canada).

239

240 **Results**

241 **hiPSC-MGL display homeostatic microglia markers and respond to stimulation**

242 mMG, hMG and hiPSC-MGL were cultured and characterized by immunocytochemistry and
243 cytokine transcription to evaluate their microglial identity and validate their suitability for
244 subsequent investigations. mMG were isolated from the brains of postnatal day 3 C57BL/6
245 mice. hMG were isolated from resected brain tissue obtained from patients undergoing epilepsy
246 surgery. Only tissue from non-pathological regions was used to reflect healthy human
247 microglia. hiPSCs were differentiated into hematopoietic progenitor cells, followed by further
248 differentiation into MGL. All microglia populations, including mMG, hMG, and hiPSC-MGL,
249 were analyzed for the expression of classical microglial markers, the transmembrane protein
250 119 (TMEM119), C-X3-C motif chemokine receptor 1 (CX3CR1), and protein tyrosine
251 phosphatase receptor type c (CD45). Positive immunostaining for these markers was observed

252 across all microglia groups, confirming their microglial phenotype, as previously shown (Fig.
253 1B, Fig. 3A)[17, 27].

254 To assess microglial reactivity, cells were stimulated for 24 hours with lipopolysaccharide
255 (LPS), interferon-gamma (IFN- γ), or a combination of both (LPS+IFN- γ), a protocol known to
256 induce a robust proinflammatory phenotype in rodent microglia [28]. LPS and IFN- γ signaling
257 pathways converge on the transcription factors nuclear factor kappa B (NF κ B) and signal
258 transducer and activator of transcription 1 (STAT1), resulting in an amplified inflammatory
259 response [29]. As stimulation of microglia leads to the transcription of cytokines, we used
260 quantitative real-time PCR (qPCR) to quantify messenger RNA (mRNA) expression levels of
261 the proinflammatory cytokines tumor necrosis factor α (*TNF α*) and interleukin 6 (*IL6*), the
262 transcription factor interferon regulatory factor 1 (*IRF1*), and the chemokine C-X-C motif
263 chemokine ligand 11 (*CXCL11*) [30]. All microglial cell lines exhibited comparable stimulus-
264 dependent proinflammatory responses to LPS and/or IFN- γ , with the strongest responses
265 observed under combined stimulation conditions across all cell types (Fig. S1).

266 The results demonstrate that mMG and hMG retain their distinct microglial identity *in vitro*, as
267 shown by the consistent expression of key microglial markers. Importantly, hiPSC-MGL
268 exhibited robust expression of microglial markers, indicating successful differentiation.
269 Furthermore, all cells expressed proinflammatory cytokines, indicating their responsiveness to
270 the presented stimuli.

271 **Patch-clamp recordings show only few alterations of cell capacity in hMG and hiPSC-** 272 **MGL after stimulation**

273 The functional state of microglia was assessed using single-cell patch-clamp recordings
274 following stimulation with proinflammatory agents. Recordings were performed in voltage
275 clamp and membrane properties were derived from the measured IV-curves (Fig. 2A).

276 In mMG, stimulation with LPS+IFN- γ resulted in a significant increase in cell capacitance
277 compared to all other groups (Fig. 2B). hMG were the most homogeneous group in terms of
278 cell capacitance (Fig. 2C). hiPSC-MGL exhibited an increase in capacitance following
279 LPS+IFN- γ (Fig. 2D). Overall, hiPSC-MGL displayed lower capacitance than mMG and hMG
280 (note different scale). In summary, mMG demonstrated distinct electrophysiological changes
281 regarding cell capacitance, while the changes of hMG and hiPSC-MGL were less pronounced.

282 **hMG but not mMG increase $K_{ir}2.1$ currents upon activation with LPS and IFN- γ**

283 Next, we performed a detailed analysis to characterize specific microglial currents, starting
284 with an inward current with time-dependent inactivation. For mMG, this inward current
285 displayed the highest current density under control conditions, with a significant
286 downregulation observed following stimulation with LPS alone and in combination with IFN-
287 γ . Stimulation with IFN- γ did not significantly alter the current density (Fig. 2B). Microglia
288 isolated from adult mice also displayed a reduction in inward current density following
289 stimulation with LPS+IFN- γ (Fig. S2D). Inversely, hMG showed a significant enhancement of
290 the inward current following IFN- γ stimulation, with an even more pronounced increase
291 observed after combined LPS+IFN- γ treatment (Fig. 2C). In hiPSC-MGL, stimulation with
292 LPS and/or IFN- γ did not result in a significant increase in inward current conductivity;
293 however, there was a general trend towards stronger currents following proinflammatory
294 stimulation (Fig. 2D).

295 The inward current's characteristics of time-dependent inactivation at low voltages suggested
296 the involvement of the inward rectifying potassium channel $K_{ir}2.1$ (Fig. S2A) [11]. To
297 investigate this, we performed qPCR of mRNA levels of the potassium inwardly rectifying
298 channel subfamily J member 2 (*KCNJ2*), the gene encoding the $K_{ir}2.1$ channel. In mMG
299 stimulation with LPS and LPS+IFN- γ led to a significant downregulation of *Kcnj2* expression.
300 In hMG a significant increase in *KCNJ2* expression was observed following combined

301 LPS+IFN- γ stimulation. In hiPSC-MGL LPS and LPS+IFN- γ stimulation resulted in a
302 significant upregulation of *KCNJ2* transcripts (Fig. 2E). These transcriptional alterations
303 mirrored the observed changes in current density, implicating $K_{ir}2.1$ as the most likely ion
304 channel involved. Furthermore, RNA sequencing data from human brain samples published in
305 the Human Protein Atlas and by Olah et al confirm the expression of *KCNJ2* in human
306 microglia (Fig. S2F, G). To prove the role of $K_{ir}2.1$, the specific antagonist ML133 was applied
307 during patch-clamp recordings of mMG exhibiting the characteristic inward current. Indeed,
308 application of ML133 completely abolished the current, supporting the hypothesis that $K_{ir}2.1$
309 mediates this response (Fig. 2G).

310 In summary, the $K_{ir}2.1$ channel is downregulated in mMG following stimulation with LPS and
311 LPS+IFN- γ , correlating with a decreased inward current. Conversely, hMG and hiPSC-MGL
312 demonstrate increased expression and functional activity of $K_{ir}2.1$ in response to inflammatory
313 stimuli.

314 **hMG and hiPSC-MGL display no K_v current upon stimulation**

315 The presence of an outward current that was deactivated at a holding potential of -20 mV but
316 could be activated at a holding potential of -70 mV and stimulation above -20 mV, exhibiting
317 delayed activation, was evaluated next (Fig. S2B). This current was detectable in a subset of
318 mMG under control conditions, with a notable increase following stimulation with LPS and/or
319 IFN- γ (Fig. 2F). This current was also present in a small subset of microglia isolated from adult
320 mice (Fig. S2E). The described current characteristics are characteristic of K_v channels. We
321 confirmed this, by applying the K_v channel antagonist 4-AP to mMG exhibiting the delayed-
322 outward current, which led to the current's abolition (Fig. 2H). Remarkably, the K_v current was
323 completely absent in hMG and hiPSC-MGL, both under control conditions and following the
324 various stimulations (Fig. 2F). In line with this, data published in the Human Protein Atlas and
325 the dataset from Olah et al. also failed to show any relevant expression of *KCNA3*, the gene

326 encoding the prominent K_v channel 1.3, in human microglia under healthy or pathological
327 conditions (Fig. S2F, G).

328 These findings highlight electrophysiological variability between different species. The
329 absence of K_v currents in hMG and hiPSC-MGL is of particular interest, as it has been
330 discussed as a potential drug target to reduce inflammation in mice.

331 **hMG and hiPSC-MGL do not display amoeboid morphology after stimulation**

332 Microglia are known to alter their morphology as part of their response after exposure to
333 pathological stimuli. Furthermore, ion channel activity and the resting membrane potential are
334 important factors for morphological changes. In order to evaluate cell morphology, we
335 visualized the cells using a CX3CR1-antibody (Fig. 3A) and performed a supervised automated
336 morphological analysis (details see Methods Image Processing and morphological analysis).

337 In mMG, LPS increased cell circularity, with even greater effects observed under LPS+IFN- γ
338 stimulation. IFN- γ alone increased maximum caliper diameter. All stimuli led to a reduction in
339 the perimeter-to-area ratio, indicating a loss of ramification and shift towards an amoeboid
340 morphology in mMG (Fig. 3B). This reflects the electrophysiological increase in cell
341 capacitance (Fig. 2B). hMG exhibited a more elongated morphology at baseline and only few
342 morphological changes after stimulation. IFN- γ induced a slight decrease in perimeter/area,
343 and LPS+IFN- γ led to a modest increase in caliper diameter, with no major alterations in
344 circularity (Fig. 3C). In hiPSC-MGL, LPS and LPS+IFN- γ decreased circularity and increased
345 caliper diameter, while LPS+IFN- γ also decreased perimeter/area (Fig. 3D). As numbers of
346 end-point voxels were also increased, this indicates a more ramified morphology after
347 stimulation (Fig. S3D).

348 Overall, mMG displayed a more amoeboid morphology following stimulation with LPS+IFN-
349 γ , whereas hMG did not show strong morphological alterations. In contrast, hiPSC-MGL
350 reacted with increased ramification to the stimulation.

351

352 **Discussion**

353 Microglia express a range of ion channels which are correlated to different functional states
354 and are being evaluated as potential drug targets. However, microglial ion channel activity has
355 mostly been studied in rodent microglia with little information being available from human
356 microglia. Geirsdottir et al. showed that microglia express core genes across species, however
357 notable differences were found in several gene modules between rodent and human microglia,
358 raising the question regarding the translation of mouse data to the human situation [31].
359 Differences between human and murine microglial sensosome have been described particularly
360 in the context of pathology, constituting a particular translational challenge [32].

361 Therefore, in this study, we investigated the functional response of human microglia, using
362 hMG and hiPSC-MGL, in established stimulation protocols and compared them with mMG.
363 Our work yielded the following major results: first, we did not see K_v currents in hMG; second,
364 $K_{ir2.1}$ is regulated differently in hMG than in mMG; and third, hiPSC-MGL exhibit similar
365 electrophysiological properties to hMG.

366 We showed the presence of an outward-rectifying potassium current in mMG which was
367 increased after stimulation, in mMG isolated from both postnatal and adult mice. Notably, this
368 current was absent in hMG and hiPSC-MGL under all stimulation conditions. The outward
369 current's dynamics and sensitivity to 4-AP confirmed its classification within the voltage-gated
370 K_v family. This is consistent with previous evidence identifying these currents as $K_v1.3$ and/or
371 $K_v1.5$ mediated [33, 34]. $K_v1.3$ is of particular interest, as its activity has been linked to

372 induction of a microglial proinflammatory state [33, 35]. However, K_v1.3 studies employing
373 patch-clamp techniques have mainly been performed in animal models or immortalized rodent
374 cell lines such as BV2 [36, 37]. Studies have identified K_v1.3 as a potential microglial drug
375 target in various neurological diseases, such as Parkinson's disease, stroke or Alzheimer's
376 disease [14, 38, 39]. While K_v1.3 expression has been demonstrated in human T-cells and
377 pulmonary macrophages, electrophysiological evidence for K_v1.3 in human microglia remains
378 lacking [40-42]. Reports of detection of K_v1.3 in human microglia rely primarily on indirect
379 detection methods (e.g., Western blot, immunocytochemistry, or PCR), leaving a gap in
380 functional data [15, 38, 39]. Furthermore, evidence is inconsistent, as single-cell sequencing
381 and the human protein atlas show little to no microglial *KCNA3* transcription [43]. The data of
382 Olah et al. also indicate no clear upregulation of *KCNA3* in an aged human population or in
383 Alzheimer's disease patients [44, 45]. Our data suggest that the K_v1.3 channel may not be
384 active in human microglia. Furthermore, the intact cytokine transcription suggests a K_v-
385 independent activation of a proinflammatory state in hMG. Similarly, Nguyen et al. previously
386 described a lack of K_v current in patch-clamp recordings of cultured human microglia [46].
387 Interestingly, the comprehensive proteome database of human and mouse microglia of Lloyed
388 et al. shows a lack of K_v1.3 in both hMG and human embryonic stem-cell derived (hESC)-
389 MGL, whereas it could be detected in xenografted-hESC-MGL to mice, suggesting a context-
390 dependent expression in human microglia [47]. The discrepancy in K_v1.3 activity in human
391 and mouse microglia could partly explain the translational failure of K_v1.3-targeting microglial
392 therapies and highlights the need to carefully consider species- and context-dependent channel
393 expression.

394 Consistent with prior reports in rodent microglia, we found that mMG exhibited a prominent
395 inward-rectifying potassium current (K_{ir}2.1) at baseline [9, 11]. Interestingly, this current is
396 typically absent in rodent microglia *in vivo* unless exposed to pathogenic stimuli, suggesting

397 that *in vitro* isolation procedures may inadvertently induce a pre-activated state in mMG [9].
398 Contrary to *in vivo*, $K_{ir2.1}$ current density decreased in mMG from both postnatal and adult
399 mice following LPS+IFN- γ stimulation. This goes in line with the depolarized reversal
400 potential, as $K_{ir2.1}$ contributes to stabilizing the resting membrane potential. In hMG, however,
401 stimulation led to an increase in $K_{ir2.1}$ currents, resembling the activation profile observed in
402 mouse microglia *in vivo* [4]. This high expression of $K_{ir2.1}$ can be correlated to the retained
403 elongated microglial morphology of hMG, even after stimulation. This correlation was even
404 stronger in hiPSC-MGL. The membrane potential determines the driving force for calcium
405 entry, linking hyperpolarization to rapid stimulus–response coupling and a more ramified
406 microglial morphology [34, 48]. In the dataset published by Olah et al the expression of *KCNJ2*
407 is mainly upregulated in clusters associated with an anti-inflammatory profile (Fig. S2G) [44].
408 Meanwhile, the antagonism of $K_{ir2.1}$ has also been shown to reduce proliferation and migration
409 in rodent microglia [11, 49]. These findings suggest different regulatory mechanisms of $K_{ir2.1}$
410 in human and mouse microglial responses to proinflammatory signals *in vitro*. Furthermore,
411 the lack of amoeboid morphology following stimulation of human microglia correlates with
412 $K_{ir2.1}$ activity. Further studies are necessary to better understand the specific mechanistic
413 function of $K_{ir2.1}$ in morphology and inflammatory response.

414 We demonstrated that hiPSC-MGL exhibited robust expression of microglial markers,
415 indicating successful differentiation, comparable to primary microglia. These findings validate
416 the use of hiPSC-MGL as a reliable model for further mechanistic studies, as previously shown
417 [6, 17]. We also showed that hiPSC-MGL were responsive to the stimulation with LPS and/or
418 IFN- γ , as it led to an increase in transcription of proinflammatory cytokines, which was largely
419 consistent across cell types and in line with existing literature [18, 50, 51]. We could show that
420 single-cell patch-clamp recordings were not just feasible but also hold a lot of potential for
421 hiPSC-MGL. Furthermore, they more closely mirrored hMG reactivity to inflammatory stimuli

422 than mMG, exhibiting no K_v currents while showing a tendency toward increased $K_{ir2.1}$
423 activity upon stimulation. Interestingly, they showed an increased ramification after
424 stimulation. Overall, these changes go in line with the described alterations in hMG, and in
425 opposition to mMG. Functional studies on hMG remain rare due to limited tissue availability
426 and technical challenges in *in situ* labeling, further underscoring the value of hiPSC-MGL [52].
427 The use of hMG and hiPSC-MGL allowed for a significant reduction in animals needed for
428 this study. Although animal-derived supplements were still used in this study, the models offer
429 the possibility of working completely animal-free, such as by using recombinant proteins from
430 HEK cells [53, 54]. This reduces the reliance on animal experiments and the ethical concerns
431 associated with animal use.

432 In summary, our study underscores critical differences between mouse and human microglia
433 in terms of electrophysiological properties, ion channel expression as a potential drug target,
434 and morphology. Although mMG remain a widely used model system, our data highlight
435 important species-specific differences that might explain translational inconsistencies. The use
436 of hiPSC-MGL is a promising bridging technology and reduces animal numbers in scientific
437 experiments. Incorporating human-derived microglia into preclinical pipelines may therefore
438 help bridge the translational gap between experimental findings and clinical outcomes.

439 **Limitations of the study**

440 A possible limitation of this study is the varied cell age, as microglial phenotype and receptor
441 expression are known to vary across developmental stages and with aging [55]. mMG were
442 isolated at postnatal day 3 as this constitutes a well-established reference system, widely used
443 in numerous studies and forming the basis for further investigations, particularly in
444 pathological contexts. Culturing adult mouse microglia entails several known technical
445 limitations, including low yield and purity, and reduced viability [56, 57]. However, we could
446 show similar ion current patterns in postnatal and adult mouse microglia. Furthermore, it is

447 known that microglia from adult rodents show strong K_v and $K_{ir2.1}$ currents following
448 pathological stimulation *in vivo* [4, 9]. The hiPSC-MGLs originated from reprogrammed
449 fibroblasts of adult donors, and hMG were isolated from adult surgical specimens. This
450 heterogeneity in donor age may contribute to differences in microglial responses; however, the
451 most pronounced effects regarding potassium current presence were observed between murine
452 and human cells, regardless of age.

453 Additionally, differences in culture conditions could have influenced cellular behavior. The
454 medium used for hiPSC-MGLs contained macrophage colony-stimulating factor (M-CSF),
455 which is known to enhance microglial proliferation and phagocytic activity [58]. IL-34, also
456 contained in the MGL culture medium, has been associated with the promotion of a more
457 mature and neuroprotective microglial phenotype [59]. In contrast, mMG and hMG were not
458 exposed to M-CSF or IL-34. Both mMG and hMG incubation media included fetal calf serum,
459 however, which has previously been reported to induce microglial phagocytic activity [60, 61].
460 While these supplements are standard in microglial differentiation protocols, they may also
461 contribute to variability in functional response to stimuli.

462

463 **Resource Availability**

464 **Lead contact**

465 Requests for further information and resources should be directed to and will be fulfilled by
466 the corresponding author, Karen Gertz (karen.gertz@charite.de).

467 **Material availability**

468 This study did not generate new unique reagents.

469 **Data and code availability**

470 All data reported in this paper will be shared by the lead contact upon request.

471 This paper does not report original code.

472 Any additional information requires to reanalyze the data reported in this paper is available
473 from the lead contact upon request.

474

475 **Acknowledgment**

476 The authors would like to acknowledge the support of the Berlin Institute of Health Core Unit
477 pluripotent Stem Cells and Organoids (CUSCO) for providing the hiPSC line. This study was
478 supported by the Deutsche Forschungsgemeinschaft (Priority Program 2395/GE, 2576/6-1 to
479 K.G.; Germany's Excellence Strategy—EXC-2049—390688087 to M.E.; Collaborative
480 Research Center ReTune TRR 295- 424778381 to M.E.; Clinical Research Group KFO 5023
481 BeCAUSE-Y, project 2 EN343/16-1 to M.E.), the Bundesministerium für Bildung und
482 Forschung (CSB to M.E., and K.G.), the German Center for Neurodegenerative Diseases
483 (DZNE to M.E.), the German Center for Cardiovascular Research (DZHK to M.E. and K.G.),
484 the German Center for Mental Health (DZPG to M.E.). We would like to thank Jan-Oliver
485 Hollnagel in particular for his support in creating the MATLAB script for analyzing the
486 electrophysiological data. Special thanks go to Melanie Kroh, Stefanie Balz and Bettina
487 Herrmann for their excellent technical assistance.

488 **Author contribution**

489 S.S., R.G., and K.G. conceived this study. S.S. performed the electrophysiological
490 experiments. J.F. and R.G. performed cell culturing, immunostaining and microscopy. S.S.
491 analyzed the data and M.K. performed the morphological analysis. A.P. and J.H. collected
492 human brain tissue. J.O., T.S., T.K., M.S. performed neurosurgical procedures. S.S., R.G. and

493 K.G. wrote the manuscript with input from all authors. All authors discussed the results and
494 commented on the final manuscript.

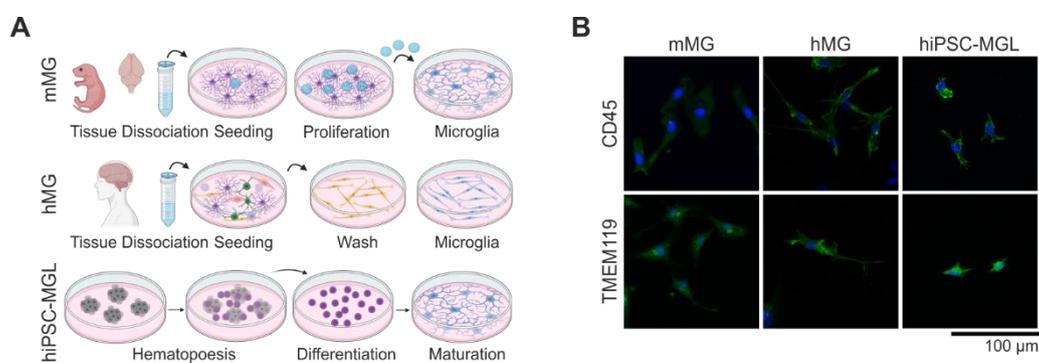
495 Declaration of interests

496 The authors declare no competing interests.

497

498 Figures

499



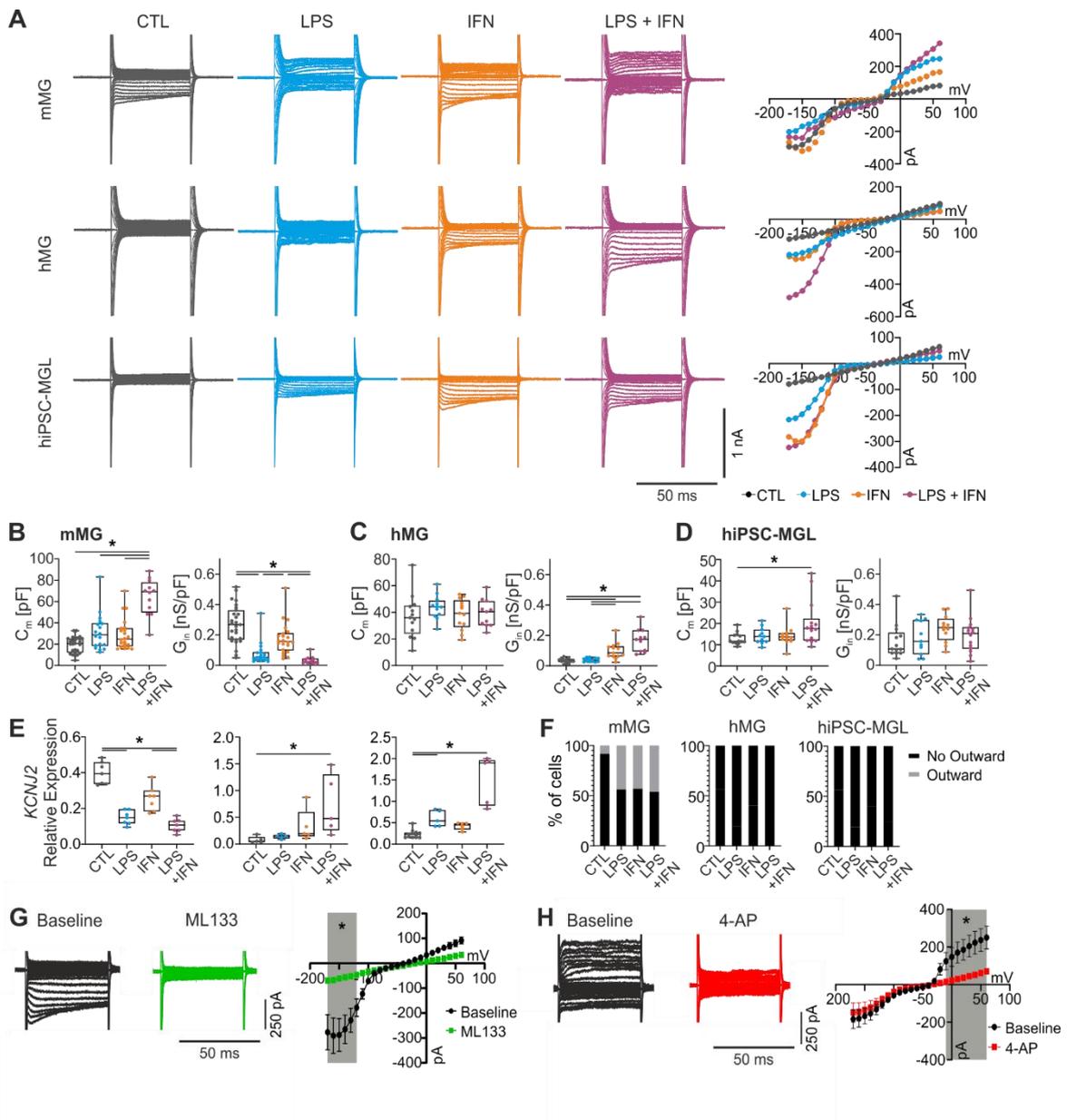
500

501 Figure 1: mMG, hMG and hiPSC-MGL express microglial markers

502 (A) Schematic of different sources of primary mouse microglia (mMG), primary human
503 microglia (hMG), and human induced pluripotent stem cell-derived microglia-like cells
504 (hiPSC-MGL). Created in BioRender. Götttert, R (2025) (B) Maximum intensity projections of
505 confocal laser scanning microscopy images for mMG, hMG, and hiPSC-MGL, labeled for
506 microglial maturation markers CD45 or TMEM119 (green) and Hoechst (blue). Scale bar 100
507 μm.

508

509



510

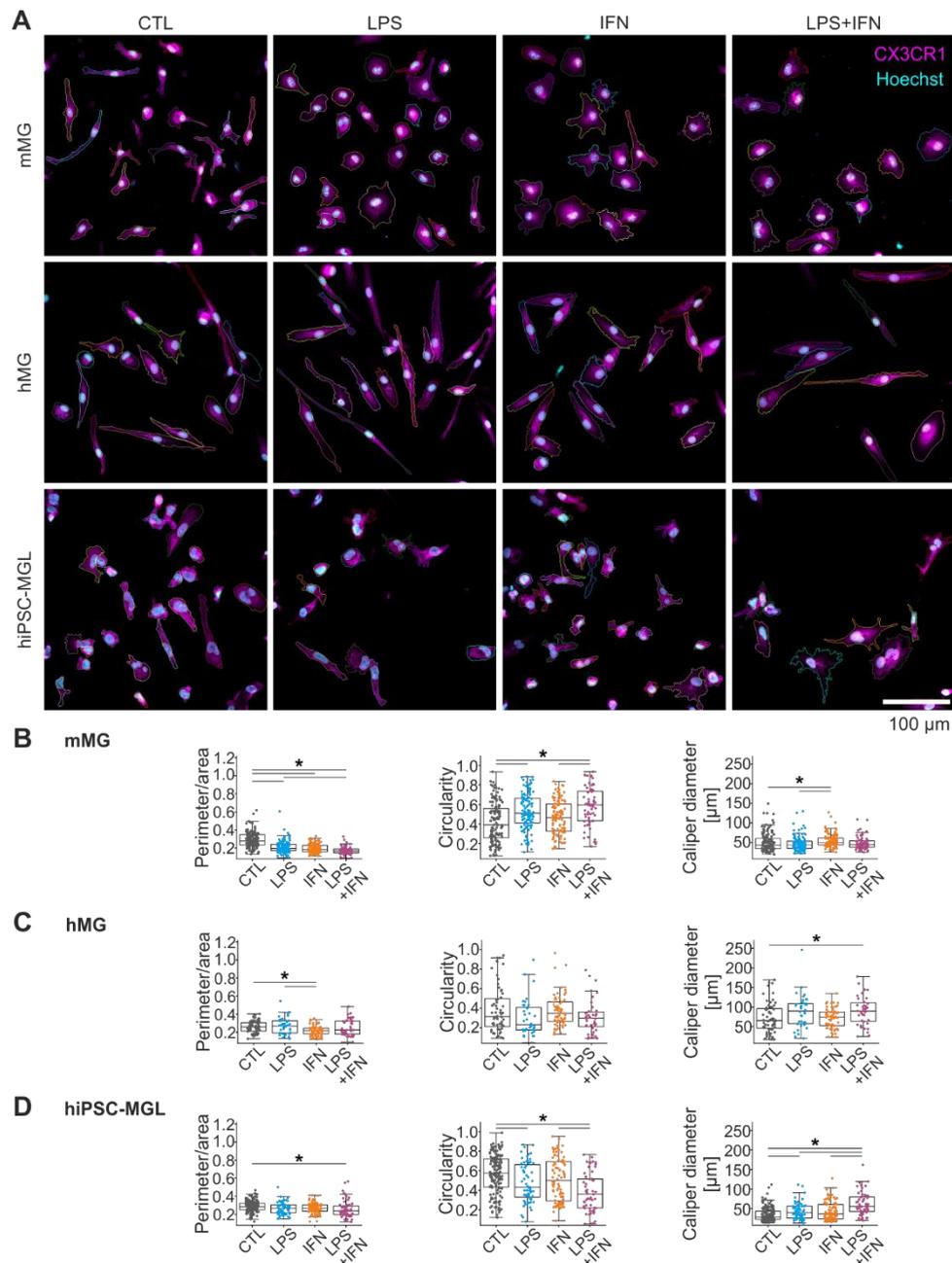
511 **Figure 2: Kir2.1 is differently regulated in hMG and hiPSC-MGL than mMG, with no**
 512 **detection of Kv current in hMG or hiPSC-MGL.**

513 **(A)** Single-cell patch-clamp recordings of microglial cells were performed following the
 514 indicated stimulation. Representative traces of recordings at a holding potential of -70 mV of
 515 mMG, hMG, and hiPSC-MGL are shown with their corresponding IV-curves. **(B-D)**
 516 Membrane capacitance (C_m) and inward current density (G_{in}) was derived from IV-curve of
 517 whole cell patch clamp recordings at a holding potential of -20 mV. Please note the different

518 scaling for capacitance. Statistical analysis with Kruskal-Wallis test followed by Dunn's test
519 for multiple comparisons, $*P < 0.05$. Data represented as box plots with median, each dot
520 represents one cell. For n=recordings: mMG (CTL=14, LPS=10, IFN=12, LPS+IFN=12),
521 iPSC-MGL (CTL=13, LPS=12, IFN=12, LPS+IFN=10), hMG (CTL=11, LPS=11, IFN=12,
522 LPS+IFN=11) **(E)** mRNA expression of *KCNJ2* was quantified by qPCR and is represented
523 relative to housekeeping gene *TPP2*. For n=samples: mMG (CTL=7, LPS=7, IFN=7,
524 LPS+IFN=7), iPSC-MGL (CTL=12, LPS=5, IFN=6, LPS+IFN=5), hMG (CTL=5, LPS=5,
525 IFN=5, LPS+IFN=5) **(F)** Percentage of cells exhibiting voltage-dependent, delayed outward
526 current at a holding potential of -70 mV and activation at stimulation of -20 mV. N as for D-F.
527 **(G)** Patch clamp recordings were performed before (black) and after (green) wash-in of specific
528 $K_{ir}2.1$ antagonist ML133 (holding potential -20 mV) in primary mouse microglia. **(H)** Patch
529 clamp recordings were performed before (black) and after (green) wash-in of K_v antagonist 4-
530 AP (holding potential -70 mV) in primary mouse microglia. IV-curves are represented as mean
531 and standard error of the mean. Statistical analysis with two-way ANOVA and Sidak's test for
532 multiple comparisons, grey area indicates $*P < 0.05$. Statistical analysis with Wilcoxon test,
533 $*P < 0.05$. n=8.

534

535



536

537 **Figure 3: hMG show little morphological alterations, while hiPSC-MGL increase**
 538 **ramification after stimulation**

539 **(A)** Maximum intensity projections of confocal laser scanning microscopy images for cultured
 540 cells from the studied cell lines under four treatment conditions, labeled with CX3CR1-AF488
 541 (magenta) and Hoechst (cyan). The colored borders of cells and nuclei represent the
 542 segmentation results of the morphological analysis. Cells were excluded if they crossed the
 543 image borders, overlapped with other cells, or merged with other cells with obscure borders.

544 Scale bar 100 μm . **(B-D)** Statistical analysis of several morphological features quantifying the
545 morphological changes of cultured cells under the treatment conditions. Statistical analysis
546 with Kruskal-Wallis test followed by Dunn's test for multiple comparisons, $*P < 0.05$. Data
547 represented as box plot with median. Each dot represents one cell.

548 For n=cells: mMG (CTL=135, LPS=123, IFN=107, LPS+IFN=63), iPSC-MGL (CTL=154,
549 LPS=63, IFN=88, LPS+IFN=57), hMG (CTL=60, LPS=38, IFN=61, LPS+IFN=39).

550

551

552 **References**

- 553 1. Li, Q. and B.A. Barres, *Microglia and macrophages in brain homeostasis and*
554 *disease*. Nat Rev Immunol, 2018. **18**(4): p. 225-242.
- 555 2. Schilling, S., et al., *TLR2- and TLR3-activated microglia induce different levels of*
556 *neuronal network dysfunction in a context-dependent manner*. Brain Behav Immun,
557 2021. **96**: p. 80-91.
- 558 3. Kettenmann, H., et al., *Physiology of microglia*. Physiol Rev, 2011. **91**(2): p. 461-553.
- 559 4. Kikhia, M., et al., *Multicolor fate mapping of microglia reveals polyclonal*
560 *proliferation, heterogeneity, and cell-cell interactions after ischemic stroke in mice*.
561 Nature Communications, 2025. **16**(1): p. 8294.
- 562 5. Hanisch, U.K., *Microglia as a source and target of cytokines*. Glia, 2002. **40**(2): p.
563 140-155.
- 564 6. Haenseler, W., et al., *A Highly Efficient Human Pluripotent Stem Cell Microglia*
565 *Model Displays a Neuronal-Co-culture-Specific Expression Profile and Inflammatory*
566 *Response*. Stem Cell Reports, 2017. **8**(6): p. 1727-1742.
- 567 7. Izquierdo, P., D. Attwell, and C. Madry, *Ion Channels and Receptors as Determinants*
568 *of Microglial Function*. Trends in Neurosciences, 2019. **42**(4): p. 278-292.
- 569 8. Kronenberg, G., et al., *Distinguishing features of microglia- and monocyte-derived*
570 *macrophages after stroke*. Acta Neuropathologica, 2018. **135**(4): p. 551-568.
- 571 9. Boucsein, C., H. Kettenmann, and C. Nolte, *Electrophysiological properties of*
572 *microglial cells in normal and pathologic rat brain slices*. European Journal of
573 Neuroscience, 2000. **12**(6): p. 2049-2058.
- 574 10. Seifert, S., et al., *Transmitter- and hormone-activated Ca(2+) responses in adult*
575 *microglia/brain macrophages in situ recorded after viral transduction of a*
576 *recombinant Ca(2+) sensor*. Cell Calcium, 2011. **49**(6): p. 365-75.
- 577 11. Lam, D. and L.C. Schlichter, *Expression and contributions of the Kir2.1 inward-*
578 *rectifier K+ channel to proliferation, migration and chemotaxis of microglia in*
579 *unstimulated and anti-inflammatory states*. Frontiers in Cellular Neuroscience, 2015.
580 **9**(185).
- 581 12. Di Lucente, J., et al., *The voltage-gated potassium channel Kv1.3 is required for*
582 *microglial pro-inflammatory activation in vivo*. Glia, 2018. **66**(9): p. 1881-1895.

- 583 13. Fomina, A.F., H.M. Nguyen, and H. Wulff, *Kv1.3 inhibition attenuates*
584 *neuroinflammation through disruption of microglial calcium signaling*. Channels,
585 2021. **15**(1): p. 67-78.
- 586 14. Chen, Y.-J., et al., *Inhibition of the potassium channel Kv1.3 reduces infarction and*
587 *inflammation in ischemic stroke*. Annals of Clinical and Translational Neurology,
588 2018. **5**(2): p. 147-161.
- 589 15. Maezawa, I., et al., *Kv1.3 inhibition as a potential microglia-targeted therapy for*
590 *Alzheimer's disease: preclinical proof of concept*. Brain, 2018. **141**(2): p. 596-612.
- 591 16. Rangaraju, S., et al., *Potassium Channel Kv1.3 Is Highly Expressed by Microglia in*
592 *Human Alzheimer's Disease*. Journal of Alzheimer's Disease, 2015. **44**(3): p. 797-808.
- 593 17. Götttert, R., et al., *Lithium inhibits tryptophan catabolism via the inflammation-*
594 *induced kynurenine pathway in human microglia*. Glia, 2022. **70**(3): p. 558-571.
- 595 18. Abud, E.M., et al., *iPSC-Derived Human Microglia-like Cells to Study Neurological*
596 *Diseases*. Neuron, 2017. **94**(2): p. 278-293.e9.
- 597 19. Hellmann-Regen, J., et al., *Accelerated degradation of retinoic acid by activated*
598 *microglia*. J Neuroimmunol, 2013. **256**(1-2): p. 1-6.
- 599 20. Rustenhoven, J., et al., *Isolation of highly enriched primary human microglia for*
600 *functional studies*. Scientific Reports, 2016. **6**(1): p. 19371.
- 601 21. Mcquade, A. and M. Blurton-Jones, *Human Induced Pluripotent Stem Cell-Derived*
602 *Microglia (hiPSC-Microglia)*, in *Methods in Molecular Biology*. 2021, Springer US.
603 p. 473-482.
- 604 22. Schindelin, J., et al., *Fiji: an open-source platform for biological-image analysis*. Nat
605 Methods, 2012. **9**(7): p. 676-82.
- 606 23. Ollion, J., et al., *TANGO: a generic tool for high-throughput 3D image analysis for*
607 *studying nuclear organization*. Bioinformatics, 2013. **29**(14): p. 1840-1841.
- 608 24. Legland, D., I. Arganda-Carreras, and P. Andrey, *MorphoLibJ: integrated library and*
609 *plugins for mathematical morphology with ImageJ*. Bioinformatics, 2016. **32**(22): p.
610 3532-3534.
- 611 25. Vallat, R., *Pingouin: statistics in Python*. Journal of Open Source Software, 2018.
612 **3**(31): p. 1026.
- 613 26. Terpilowski, M., *scikit-posthocs: Pairwise multiple comparison tests in Python*.
614 Journal of Open Source Software, 2019. **4**(36): p. 1169.

- 615 27. Uhlemann, R., et al., *Actin dynamics shape microglia effector functions*. Brain Struct
616 Funct, 2016. **221**(5): p. 2717-34.
- 617 28. Papageorgiou, I.E., et al., *TLR4-activated microglia require IFN- γ to induce severe*
618 *neuronal dysfunction and death in situ*. Proceedings of the National Academy of
619 Sciences, 2016. **113**(1): p. 212-217.
- 620 29. Schroder, K., M.J. Sweet, and D.A. Hume, *Signal integration between IFN γ*
621 *and TLR signalling pathways in macrophages*. Immunobiology, 2006. **211**(6-8): p.
622 511-24.
- 623 30. Smith, J.A., et al., *Role of pro-inflammatory cytokines released from microglia in*
624 *neurodegenerative diseases*. Brain Res Bull, 2012. **87**(1): p. 10-20.
- 625 31. Geirsdottir, L., et al., *Cross-Species Single-Cell Analysis Reveals Divergence of the*
626 *Primate Microglia Program*. Cell, 2019. **179**(7): p. 1609-1622.e16.
- 627 32. Abels, E.R., et al., *Comparative Analysis Identifies Similarities between the Human*
628 *and Murine Microglial Sensomes*. International Journal of Molecular Sciences, 2021.
629 **22**(3): p. 1495.
- 630 33. Nguyen, H.M., et al., *Differential Kv1.3, KCa3.1, and Kir2.1 expression in*
631 *“classically” and “alternatively” activated microglia*. Glia, 2017. **65**(1): p. 106-121.
- 632 34. Lam, D., S. Lively, and L.C. Schlichter, *Responses of rat and mouse primary*
633 *microglia to pro- and anti-inflammatory stimuli: molecular profiles, K⁺ channels and*
634 *migration*. Journal of Neuroinflammation, 2017. **14**(1).
- 635 35. Li, B., et al., *Pharmacological inhibition of Kv1.3 channel reduces sevoflurane-*
636 *induced cognitive impairment through NLRP3-dependent microglial modulation*.
637 Brain Res Bull, 2025. **225**: p. 111351.
- 638 36. Anton, R., et al., *Potassium Channels Kv1.3 and Kir2.1 But Not Kv1.5 Contribute to*
639 *BV2 Cell Line and Primary Microglial Migration*. International Journal of Molecular
640 Sciences, 2021. **22**(4): p. 2081.
- 641 37. Chen, Y.-J., et al., *The potassium channel KCa3.1 constitutes a pharmacological*
642 *target for neuroinflammation associated with ischemia/reperfusion stroke*. Journal of
643 Cerebral Blood Flow & Metabolism, 2016. **36**(12): p. 2146-2161.
- 644 38. Sarkar, S., et al., *Kv1.3 modulates neuroinflammation and neurodegeneration in*
645 *Parkinson's disease*. J Clin Invest, 2020. **130**(8): p. 4195-4212.
- 646 39. Ramesha, S., et al., *Unique molecular characteristics and microglial origin of Kv1.3*
647 *channel-positive brain myeloid cells in Alzheimer's disease*. Proceedings of the
648 National Academy of Sciences, 2021. **118**(11): p. e2013545118.

- 649 40. Selvakumar, P., et al., *Structures of the T cell potassium channel Kv1.3 with*
650 *immunoglobulin modulators*. Nature Communications, 2022. **13**(1).
- 651 41. Mackenzie, A.B., H. Chirakkal, and R.A. North, *Kv1.3 potassium channels in human*
652 *alveolar macrophages*. Am J Physiol Lung Cell Mol Physiol, 2003. **285**(4): p. L862-
653 8.
- 654 42. Rus, H., et al., *The voltage-gated potassium channel Kv1.3 is highly expressed on*
655 *inflammatory infiltrates in multiple sclerosis brain*. Proceedings of the National
656 Academy of Sciences, 2005. **102**(31): p. 11094-11099.
- 657 43. Karlsson, M., et al., *A single-cell type transcriptomics map of human tissues*. Science
658 Advances, 2021. **7**(31): p. eabh2169.
- 659 44. Olah, M., et al., *Single cell RNA sequencing of human microglia uncovers a subset*
660 *associated with Alzheimer's disease*. Nature Communications, 2020. **11**(1).
- 661 45. Olah, M., et al., *A transcriptomic atlas of aged human microglia*. Nature
662 Communications, 2018. **9**(1).
- 663 46. Nguyen, H.M., et al., *Potassium channel expression and function in microglia:*
664 *Plasticity and possible species variations*. Channels, 2017. **11**(4): p. 305-315.
- 665 47. Lloyd, A.F., et al., *Deep proteomic analysis of microglia reveals fundamental*
666 *biological differences between model systems*. Cell Reports, 2024. **43**(11): p. 114908.
- 667 48. Laprell, L., et al., *The role of microglia membrane potential in chemotaxis*. Journal of
668 Neuroinflammation, 2021. **18**(1).
- 669 49. Gattlen, C., et al., *The inhibition of Kir2.1 potassium channels depolarizes spinal*
670 *microglial cells, reduces their proliferation, and attenuates neuropathic pain*. Glia,
671 2020. **68**(10): p. 2119-2135.
- 672 50. Yang, X., V. Diaz, and H. Huang, *The Role of Interferon Regulatory Factor 1 in*
673 *Regulating Microglial Activation and Retinal Inflammation*. International Journal of
674 Molecular Sciences, 2022. **23**(23): p. 14664.
- 675 51. Bsibsi, M., et al., *Demyelination during multiple sclerosis is associated with*
676 *combined activation of microglia/macrophages by IFN- γ and alpha B-crystallin*. Acta
677 Neuropathologica, 2014. **128**(2): p. 215-229.
- 678 52. Palomba, N.P., et al., *ATP-evoked intracellular Ca(2+) transients shape the ionic*
679 *permeability of human microglia from epileptic temporal cortex*. J
680 Neuroinflammation, 2021. **18**(1): p. 44.

- 681 53. Liste-Calleja, L., M. Lecina, and J.J. Cairó, *HEK293 cell culture media study towards*
682 *bioprocess optimization: Animal derived component free and animal derived*
683 *component containing platforms*. J Biosci Bioeng, 2014. **117**(4): p. 471-7.
- 684 54. Bramwell, L.R., et al., *An Evaluation of the Replacement of Animal-derived*
685 *Biomaterials in Human Primary Cell Culture*. Alternatives to Laboratory Animals,
686 2024. **52**(5): p. 247-260.
- 687 55. Harry, G.J., *Microglia during development and aging*. Pharmacology & Therapeutics,
688 2013. **139**(3): p. 313-326.
- 689 56. Ngwa, C., et al., *Age and sex differences in primary microglia culture: A comparative*
690 *study*. Journal of Neuroscience Methods, 2021. **364**: p. 109359.
- 691 57. Mizrachi, M. and B. Diamond, *Impact of microglia isolation and culture methodology*
692 *on transcriptional profile and function*. Journal of Neuroinflammation, 2024. **21**(1).
- 693 58. Smith, A.M., et al., *M-CSF increases proliferation and phagocytosis while*
694 *modulating receptor and transcription factor expression in adult human microglia*.
695 Journal of Neuroinflammation, 2013. **10**(1): p. 85.
- 696 59. Devlin, B.A., et al., *Neuron Derived Cytokine Interleukin-34 Controls Developmental*
697 *Microglia Function*. 2024, Cold Spring Harbor Laboratory.
- 698 60. Patrizio, M., et al., *Selective enhancement by serum factors of cyclic AMP*
699 *accumulation in rat microglial cultures*. Neurochem Int, 1996. **29**(1): p. 89-96.
- 700 61. Bohlen, C.J., et al., *Diverse Requirements for Microglial Survival, Specification, and*
701 *Function Revealed by Defined-Medium Cultures*. Neuron, 2017. **94**(4): p. 759-773.e8.
702
703

704 **Resource Table**

705

706 **Table 1: Agents**

REAGENT or RESOURCE	SOURCE	IDENTIFIER
Antibodies		
Anti-CD45 (1:100)	Abd Serotec, Neuried, Germany	Cat # MCA1031GA RRID: AB 324339
Anti-CD45 (human, 1:100)	EXBIO, Praha, Czech Republic	Cat # 11-222-C025 RRID: AB 10732878
Anti-CX3CR1 (human, 1:50)	Bio-Rad, Feldkirchen, Germany	Cat # AHP1589 RRID: AB_2087421
Anti-TMEM119 (1:100)	ATLAS AK, Bromma, Sweden	Cat # HPA051870 RRID: AB 2681645
Anti-mouse (Alexa 488, 1:400)	Invitrogen, Waltham, MA, USA	Cat # A21202 RRID: AB 141607
Anti-rat (Alexa 488, 1:400)	Invitrogen, Waltham, MA, USA	Cat # A21208 RRID: AB 2535794
Anti-rabbit (Alexa 488, 1:400)	Invitrogen, Waltham, MA, USA	Cat # A21206 RRID: AB 2535792
PE anti-human CD45 Antibody (1:20)	BioLegend, San Diego, CA, USA	Cat # 304007 RRID: AB 314395
APC anti-human CD43 Antibody (1:20)	BioLegend, San Diego, CA, USA	Cat # 343205 RRID: AB 2194073
FITC anti-human CD34 Antibody	BioLegend, San Diego, CA, USA	Cat # 343603 RRID: AB 1732030
Bacterial and virus strains		
None		
Biological samples		
None		
Chemicals, peptides, and recombinant proteins		
4-AP	Sigma-Aldrich, St. Louis, MO, USA	Cat # 275875-5G
ML133	Sigma-Aldrich, St. Louis, MO, USA	Cat # SML0190-5MG
LPS from E. coli 055:B5	Sigma-Aldrich, St. Louis, MO, USA	Cat # L4524-10MG
Human IFN-g	Peprtech, Cranbury, NJ, USA	Cat # 300-02
Murine IFN-g	Peprtech, Cranbury, NJ, USA	Cat # 315-05
DMEM	Thermo Fisher, Waltham, MA, USA	Cat # 31966-021
FCS	PAN Biotech Aidenbach, Germany	Cat # P30-3031

Pen/Strep	PAN Biotech, Aidenbach, Germany	Cat # P06-07100
Sodium pyruvate	PAN Biotech Aidenbach, Germany	Cat # P04-43100
D-Glucose	Sigma-Aldrich, St. Louis, MO, USA	Cat # G8769-100ML
STEMdiff	Stemcell Technologies, Vancouver, Canada	Cat # 05311
DMEM/F12	Thermo Fisher, Waltham, MA, USA	Cat # 11039-021
ITS-G	Thermo Fisher, Waltham, MA, USA	Cat # 41400-045
B27	Thermo Fisher, Waltham, MA, USA	Cat # 17504-044
N-2	Thermo Fisher, Waltham, MA, USA	Cat # 17502-048
Monothioglycerol	Sigma-Aldrich, St. Louis, MO, USA	Cat # M1753-100ML
Glutamax	Thermo Fisher, Waltham, MA, USA	Cat # 35050-061
NEAA	Thermo Fisher, Waltham, MA, USA	Cat # 11140-050
Insulin	PAN Biotech, Aidenbach, Germany	Cat # P07-04300
M-CSF	Peprtech, Cranbury, NJ, USA	Cat # 300-25
IL-34	Peprtech, Cranbury, NJ, USA	Cat # 200-34
TGFb1	Peprtech, Cranbury, NJ, USA	Cat # 100-21
CD200	Novoprotein, Shanghai, China	Cat # C311
CX3CL1	Peprtech, Cranbury, NJ, USA	Cat # 300-31-50UG
PBS (no Mg, No Ca)	Thermo Fisher, Waltham, MA, USA	Cat # 14200-067
Trypsin/EDTA	PAN Biotech, Aidenbach, Germany	Cat # P10-024100
PLL	Sigma-Aldrich, St. Louis, MO, USA	Cat # P4707
Vitronectin	Thermo Fisher, Waltham, MA, USA	Cat # A14700

Matrigel	Corning Incorporated, Corning, NY, USA	Cat # 354277
M-MLV reverse transcriptase	Promega, Madison, WI, Germany	Cat # M1701
Random hexamers	Promega, Madison, WI, Germany	Cat # C1181
Agarose gel	Carl Roth GmbH, Karlsruhe, Germany	Cat # 2267.4
Paraformaldehyd	Carl Roth GmbH, Karlsruhe, Germany	Cat # 0335.2
Donkey Serum	Dominique Dutscher, Bernolsheim, France	Cat # S2170-100
Triton X-100	Sigma-Aldrich, St. Louis, MO, USA	Cat # X100-100ML
Hoechst	Abcam, Cambridge, UK	Cat # 33342
Critical commercial assays		
Nucleo Spin RNA kit	Macherev-Nagel, Düren, Germany	Cat # 740902.50
Deposited data		
None		
Experimental models: Cell lines		
BIHi250-A	BIH, Berlin, Germany	https://hpscereg.eu/cell-line/BIHi250-A
Experimental models: Organisms/strains		
C57BL/6J wildtype mice		
Oligonucleotides		
None		
Recombinant DNA		
None		
Software and algorithms		
pClamp 10	Molecular Devices, San Jose, CA, USA	
Matlab (Version 2021b,)	MathWorks, Natick, MA, USA	
GraphPad Prism Version 10.2.1	GraphPad, San Diego, CA, USA	
CorelDRAW Graphics Suits X7	Corel Corporation, Ottawa, Canada	
Other		
Cell scraper	SPL Life Sciences, Pocheon-si, South Korea	Cat # 90021

T75 flask	Corning Incorporated, Corning, NY, USA	Cat # 353136
Glass cover slips, 5 mm	Assistant, Glaswarenfabrik Karl Hecht, Sondheim vor der Rhön, Germany	Cat # 41001
12 well chamber slides	Ibidi, Gräfeling, Germany	Cat # 81201

707

708

709 **Table 2: Primer sequences**

Gene	Forward Primer	Reverse Primer
<i>Tpp2</i> mouse	CTT CTA TCC AAA GGC TCT CAA GG	CTC TCC AGG TCT CAC CAT CAT G
<i>Kcnj2</i> mouse	CAA TGG CTT TGG GAA TGG CAA G	GAA GAT AAC CAG CAT CCA CCT C
<i>Tnfa</i> Mouse	CAT CTT CTC AAA ATT CGA GTG ACA A	TGG GAG TAG ACA AGG TAC AAC CC
<i>Il6</i> Mouse	GAG GAT ACC ACT CCC AAC AGA CC	AAG TGC ATC ATC GTT GTT CAT ACA
<i>Irf1</i> mouse	CAT TCA CAC AGG CCG ATA CAA AG	CCT TGT TCC TAC TCT GAT CCT TC
<i>Cxcl11</i> mouse	GCT GCT CAA GGC TTC CTT ATG	CAA CTT TGT CGC AGC CGT TAC
<i>TPP2</i> human	CAA GCT GGA CAA ATC CCT CAG	CAT CAT GCC ATA CCA AGC AGT C
<i>KCNJ2</i> human	CTA CAG CAT CGT CTC TTC AGA AG	CAG GCA GAA GAT AAC CAG CAT C
<i>TNFα</i> human	CAG GCA GTC AGA TCA TCT TCT CG	CTG GTT ATC TCT CAG CTC CAC G
<i>IL6</i> human	CAA ATT CGG TAC ATC CTC GAC G	CAG GCA AGT CTC CTC ATT GAA TC

<i>IRF1</i> human	CAT TCA CAC AGG CCG ATA CAA AG	GTT CTT GGT GAG AGG TGG AAG C
<i>CXCL11</i> human	GTT GTT CAA GGC TTC CCC ATG	GTC ACA GTT GTT ACT TGG GTA C

710