

1 **Paper title: Transcriptional, epigenetic, and functional reprogramming of blood**
2 **monocytes in non-human primates following chronic alcohol drinking**

3 Running title: Chronic alcohol drinking and blood monocyte function

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1 **ABSTRACT**

2 Chronic heavy drinking (CHD) of alcohol is a known risk factor for increased susceptibility to
3 bacterial and viral infection as well as impaired wound healing. Evidence suggests that these
4 defects are mediated by a dysregulated inflammatory response originating from myeloid cells,
5 notably monocytes and macrophages, but the mechanisms remain poorly understood. Our ability
6 to study CHD is impacted by the complexities of human drinking patterns and behavior as well as
7 comorbidities and confounding risk factors for patients with alcohol use disorders. To overcome
8 these challenges, we utilize a translational rhesus macaque model of voluntary ethanol self-
9 administration that closely recapitulates human drinking patterns and chronicity. In this study, we
10 examined the effects of CHD on blood monocytes and alveolar macrophages in control and CHD
11 female macaques after 12 months of daily ethanol consumption. While monocytes from CHD
12 female macaques generated a hyper-inflammatory response to ex vivo LPS stimulation, their
13 response to *E.Coli* was dampened. In depth scRNA-Seq analysis of purified monocytes revealed
14 significant shifts in classical monocyte subsets with accumulation of cells expressing markers of
15 hypoxia (*HIF1A*) and inflammation (NFkB signaling pathway) in CHD macaques. The increased
16 presence of monocyte subsets poised to generate a hyperinflammatory response was confirmed
17 by the epigenetic analysis which revealed higher accessibility of promoter regions that regulate
18 genes involved in cytokine signaling pathways. Finally, alveolar macrophages (AM) from the same
19 animals produced higher levels of inflammatory mediators in response to LPS stimulation, but
20 reduced ability to phagocytose bacteria. Collectively, data presented in this manuscript
21 demonstrate that CHD primes monocytes and tissue-resident macrophages towards a more
22 hyper-inflammatory immune response with compromised functional abilities, which could be used
23 in diagnostic purposes or preventative measures for patients with alcohol use disorders.

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30 **KEYWORDS**

31 Alcohol, inflammation, monocytes, macrophages, nonhuman primates, scRNA seq, ATAC-Seq

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1 INTRODUCTION

2 Alcohol consumption is widespread in the United States with 85% of individuals ages 18 and
3 older engaging in this behavior. While the overwhelming majority of these individuals are
4 considered moderate drinkers, 7% are classified as heavy alcohol users (National Survey on Drug
5 Use and Health, 2015). Chronic heavy alcohol consumption or chronic heavy drinking (CHD) is
6 associated with multiple adverse health effects including increased incidence of cardiac disease
7 (1, 2), certain types of cancer (3-6), liver cirrhosis (7), and sepsis (8), making it the third leading
8 preventable cause of death in the United States (9). CHD is also associated with higher
9 susceptibility to bacterial and viral infections including pneumonia and tuberculosis (10, 11),
10 hepatitis C virus, and HIV (12, 13). Moreover, CHD compromises tissue repair, resulting in
11 reduced post-operative healing and poor trauma recovery outcomes (14, 15). These observations
12 strongly suggest that CHD dysregulates immunity and host defense.

13 While CHD can modulate the function of many immune cell populations, data from several
14 laboratories indicate that the most dramatic and consistent changes are evident in the innate
15 immune branch, specifically in myeloid cells (monocytes, macrophages, dendritic cells, and
16 neutrophils) (16-18). Monocytes are relatively short-lived phagocytic cells that circulate in the
17 blood, are constantly repopulated from bone marrow progenitors, and can quickly respond to
18 infection or inflammation by extravasation into tissue and differentiation into tissue-resident
19 macrophages (19). A tightly regulated inflammatory response by monocytes is required for
20 effective infection clearance and tissue repair (20). Alcohol consumption has been shown to
21 disrupt monocyte and macrophage responses in a dose and time dependent manner (16).

22 Specifically, acute alcohol treatment of purified primary human monocytes, rodent monocyte-
23 derived macrophages, or human monocytic cell lines results in decreased production of
24 inflammatory mediators including $\text{TNF}\alpha$ (16) following stimulation with lipopolysaccharide (LPS),
25 a TLR4 agonist (21, 22). In rodents, acute *in vivo* (23) exposure to ethanol increases production
26 of the anti-inflammatory cytokine IL-10 through activation of STAT3. Similarly, in healthy human
27 subjects, an acute binge of alcohol increased IL-10 and decreased IL-1 β production (24). In
28 contrast, prolonged exposure to alcohol results in increased production of pro-inflammatory
29 mediators, notably $\text{TNF}\alpha$ in response to LPS or PMA stimulation (22, 25) potentially due to
30 enhanced activation of $\text{NF}\kappa\text{B}$ and ERK kinases (26). In line with these observations, monocytes
31 as well as tissue resident macrophages, including Kupffer cells (27), microglia (28), alveolar
32 macrophages (29), and splenic macrophages (17, 30) taken from patients with alcoholic liver
33 disease (ALD) produce higher levels of $\text{TNF}\alpha$ at resting state as well as in response to LPS (31).
34 The enhanced inflammatory response by tissue-resident myeloid cells in the context of CHD is

1 linked to organ damage, most notably in the liver (32) but also the intestine (33), brain (34, 35),
2 and lungs (36).

3 Despite the studies described above, our understanding of the mechanisms by which chronic
4 alcohol consumption reprograms circulating monocytes and tissue-resident macrophages
5 remains incomplete. Some studies have suggested that CHD-induced gut “leakiness” and
6 translocation of bacterial products including LPS across the gut barrier into the circulation could
7 lead to chronic activation and subsequently organ damage (33). Whether monocytes in circulation
8 are activated prior to organ damage by circulating bacterial products, ethanol, ethanol
9 metabolites, or a combination of these factors remains unanswered.

10 Data from clinical studies are confounded by self-reported alcohol intake, the use of nicotine,
11 recreational or illicit drugs, nutritional deficiencies, and presence of organ damage (37).
12 Addressing these questions requires access to a reliable animal model that recapitulates critical
13 aspects of human CHD. Therefore, to better model human CHD and relate immune response of
14 peripheral monocytes and resident macrophages to quantified alcohol intakes in the absence of
15 confounders listed above, we leveraged a rhesus macaque model of chronic voluntary ethanol
16 self-administration (38, 39). Using this model, we reported that CHD disrupts the resting
17 transcriptome and results in heightened inflammatory responses by peripheral blood
18 mononuclear cells (PBMC) from male and female macaques (18, 40). Additionally, splenic
19 macrophages from CHD monkeys generate a hyper-inflammatory response following LPS
20 stimulation that is accompanied by increased chromatin accessibility at promoters and intergenic
21 regions that regulate genes important for inflammatory responses (41).

22 In this study, we examine how CHD disrupts the inflammatory response of blood
23 monocytes and alveolar macrophages. We show that CHD is associated with increased numbers
24 of circulating monocytes that exhibit a heightened transcriptional and immune mediator response
25 to LPS stimulation, but lower response to bacterial pathogens. To determine the molecular
26 mechanisms of this dysregulated response, we profiled the transcriptome of the monocytes by
27 single cell RNA-Seq and their epigenetic landscape by ATAC-Seq. Finally, we show that the
28 heightened inflammatory response coupled by diminished anti-microbial responses extend to
29 alveolar macrophages. Our results indicate that CHD significantly alters the epigenetic and
30 transcriptional profiles of circulating monocytes, priming them towards a hyper-responsive state
31 and altering their effector function in tissue.

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1 **RESULTS:**

2 *Chronic heavy drinking-induced enhanced innate immune response in PBMC is independent of* 3 *sex*

4 Recent bulk RNA seq analysis of resting PBMC obtained from female rhesus macaques after 12
5 months of chronic heavy drinking (CHD) indicated that most of the differential gene expression
6 originated from innate immune cells (monocytes and dendritic cells (DCs)) (14). Moreover, studies
7 using PBMC from male macaques showed dysregulated response to ex vivo LPS stimulation with
8 CHD after 12 months of chronic ethanol consumption (40). To assess if CHD also led to changes
9 in inflammatory responses by circulating innate immune cells in female macaques, PBMC
10 obtained from CHD (n=6) and control (n=3) females were stimulated ex vivo with LPS for 16 hours
11 followed by measurement of immune mediator production by Luminex assay and transcriptional
12 changes by bulk RNA Seq (**Supp. Figure 1A**). LPS stimulation resulted in robust inflammatory
13 response (TNF α , IL-6, IL-18, IL-4, IL-8, GM-CSF and S100B) by PBMC from both CHD and control
14 animals (**Figure 1A**). However, PBMC from CHD animals produced higher levels of additional
15 inflammatory mediators notably IL-1 β , IL-12, IFN γ , CCL3, and CCL4 (**Figure 1A**). Moreover,
16 production of inflammatory cytokines IL-6, IL-23 and to lesser extent soluble PD-L1 were higher
17 in CHD PBMC following LPS stimulation compared to controls (**Figure 1A**). In addition, levels of
18 TNF α , CCL4, IL-6, IL-15, IL-23, and sPD-L1 were significantly positively correlated with ethanol
19 dose (**Figure 1B and Supp. Figure 1B**).

20 We next assessed transcriptional differences in response to LPS between the two groups.
21 Differential analysis indicated a heightened response to LPS by CHD PBMC relative to healthy
22 control PBMC (**Figure 1C**). While signatures of immune activation were observed in both groups
23 following LPS exposure, DEGs upregulated in the controls only enriched to pathways involved in
24 antiviral immunity ("response to IFN γ " and "response to virus"), whereas DEGs upregulated only
25 in PBMC from CHD animals enriched to leukocyte activation and inflammation pathways (**Figure**
26 **1D and Supp. Figure 1C**). Enrichment of the downregulated genes shows significant enrichment
27 to GO terms associated with chemotaxis, leukocyte activation and metabolism in the PBMC from
28 control animals (**Figure 1E and Supp. Figure 1D**).

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30 *Chronic heavy drinking impacts monocyte frequencies and functional responses to LPS* 31 *stimulation*

32 To measure changes in frequencies and phenotypes of monocyte subsets with CHD, we profiled
33 PBMC by flow cytometry. Interestingly, the proportions of monocytes within PBMC from CHD
34 macaques were significantly elevated, however the relative distribution of the monocyte sub-

1 populations were comparable between the groups (**Figure 2A and Supp. Figure 2A, B**). We
2 profiled a number of TLRs, chemokine, and activation receptors on the monocytes by flow
3 cytometry, but found no significant differences (**Supp. Figure 2C**). To assess whether the
4 heightened inflammatory response detected in PBMC was due to increased numbers of
5 monocytes or cell-intrinsic changes caused by CHD, monocytes were purified from each group
6 and subjected to bulk RNA-Seq at resting state and after LPS stimulation (**Supp. Figure 1A**). A
7 modest number of DEG were detected at resting state (58 upregulated and 112 downregulated)
8 between CHD and control monocytes (**Figure 2B**). The DEG upregulated with CHD enriched to
9 pathways associated with inflammatory response such as “pattern recognition receptor activity”
10 (e.g. *NLRP3*) and “cytokine production” (e.g. *FCN1*) (**Figure 2C, and Supp. Figure 2D**). DEG
11 downregulated with CHD mapped to gene ontology (GO) terms “activation of immune response”
12 (e.g. *IFNG*) “lymphocyte proliferation” (e.g. *HSPD1*) and “chemotaxis” (e.g. *CCR7*) (**Figure 2C**).
13 One potential mechanism for this enhanced monocyte transcriptional activation at resting state
14 could be increased microbial products in circulation due to altered barriers (31). Therefore, we
15 measured circulating levels of bacterial endotoxin (LAL) and IgM bound endotoxin. We found
16 slightly increased levels of circulating LAL with CHD, but no changes in IgM-bound endotoxin
17 levels (**Supp. Figure 2E, F**).

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19 Secreted levels of cytokines, chemokines, and growth factors were measured after 6-hour
20 incubation in the presence or absence of LPS by Luminex assay. No significant differences in the
21 concentration of immune mediators were noted in the non-stimulated conditions. As observed for
22 PBMC, significantly enhanced production of pro-inflammatory cytokines $TNF\alpha$, IL-6, and IL-15,
23 chemokines CCL4, and CXCL11, and to a lesser extent IL-4 and IL-7 by CHD monocytes were
24 noted (**Figure 2D and Supp. Figure 3A**). The LPS response was also assessed at the
25 transcriptional level using RNA-Seq. Principal component analysis (PCA) showed that stimulation
26 accounts for the majority of transcriptional changes (PC1, 75% of the differences) (**Supp. Figure**
27 **3B**) with 357 and 262 DEG between CHD and controls in the NS, and LPS conditions, respectively
28 (**Supp. Figure 3C, D**). The DEG from these comparisons were similar to those detected in resting
29 cells, with genes associated with myeloid inflammatory pathways are upregulated (*TNFSF21*,
30 *MMP2*, *TLR2*, *MMP1*) while genes associated with adaptive immune activation are downregulated
31 (*IL21R*, *CD40*, *MAMU-DOA*, *CCR6*) in CHD compared to control monocytes (**Supp. Figure 3C,**
32 **D**).

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1 We then identified DEG in the LPS relative to NS condition for each group. A greater number of
2 DEG was detected in the CHD group, with a large overlap between the two groups, and few DEG
3 detected solely in the control group (**Figure 2E**). As expected, DEG common between the two
4 groups enriched to GO terms associated with monocyte activation including “regulation cytokine
5 production”, “leukocyte migration”, and “JAK-STAT cascade” (**Figure 2F**). The DEG detected only
6 in control animals mapped to “Carbohydrate catabolic process”. The DEG unique to monocytes
7 from CHD animals mapped to cytokine production and signaling pathways (**Figure 2F**). The
8 expression of inflammatory genes was broadly upregulated in the CHD monocytes following LPS
9 stimulation including *CEBPB*, *CCL20*, *CCL4*, *STAT3*, *FOS*, *S100A8*, *HIF1A*, and *TLR4* (**Figure**
10 **2G**). Additional predictive analysis revealed that LPS-responsive DEGs detected in the CHD
11 monocytes are regulated by canonical transcription factors NFKB2, RELB, and JUNB with over
12 250 genes mapping to each (**Supp. Figure 3E**).

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14 *Chronic heavy drinking alters the monocyte transcriptome and cell subset distribution at the single*
15 *cell level*

16 To gain a deeper understanding of the heightened activation state of monocytes with CHD, we
17 performed single cell RNA sequencing (scRNA-Seq) on sorted CD14+HLA-DR+ monocytes from
18 CHD and control female macaques (n=3 pooled samples/group). UMAP clustering of all 9,360
19 monocytes revealed 9 distinct monocyte subsets (MS) (**Figure 3A**). These clusters could be
20 categorized into the three major monocyte subtypes typically identified by flow cytometry: non-
21 classical, intermediate, and classical based on expression of *CD14*, *MAMU-DRA*, and
22 *FCGR3*(CD16) (**Supp. Figure 4A**). As we identified by flow cytometry, the frequency of these
23 three major subsets was comparable between controls and CHD animals by scRNA-Seq analysis
24 (**Supp. Figure 4B**). The non-classical monocytes formed one cluster (MS6) exhibiting high
25 expression of *CX3CR1*, *MS4A7*, and *FCGR3* and lower expression of *CD14* and MHC II molecule
26 *MAMU-DRA* (**Figure 3A, B, and Supp. Figure 4C**). The intermediate monocytes also fell into
27 one cluster (MS4), expressing lower levels of non-classical (*MS4A7*, *FCGR3A*) and classical
28 (*CD14*, *S100A8*) markers with higher expression of *MAMU-DRA* (**Figure 3A, B, and Supp.**
29 **Figure 4C**). Finally, 7 clusters of classical monocytes were identified (MS1, MS2, MS3, MS5,
30 MS7, MS8, and MS9), based on expression of *CST3*, *GOS2*, *S100A8*, *S100A9*, *HIF1A*, *SOD2*,
31 *EGR1*, and *HERC5* (**Figure 3A, B, and Supp. Figure 4C**). These data reveal considerable,
32 previously unappreciated transcriptional heterogeneity within the classical monocytes. Subsets
33 MS5, MS7 were primarily detected in monocytes from CHD animals while MS8 was primarily
34 detected in monocytes from control animals (**Figure 3 and Supp. Figure 4D**). Module scoring

1 revealed that MS5 had the lowest expression of genes that play a role in antigen presentation as
2 well as hypoxia, while MS5 and MS7 had higher expression of genes within the TLR- and IL-6-
3 signaling pathways (**Supp. Figure 4E**).

4 To identify the biological implications of these subsets, we extracted the genes that define each
5 cluster and performed functional enrichment (**Figure 3C**). Although genes that define MS5
6 (classical – CHD) and MS8 (classical – control) subsets enriched to similar GO terms (“Regulated
7 exocytosis”, “granulocyte activation/migration”), only genes highly expressed in MS5 (CHD
8 animals) enriched to “Response to alcohol” and “Wound healing”, notably *FOSB*, *HIF1A*, and
9 *FN1*. Interestingly, genes that define MS7 subset (classical – CHD) enriched to “Cytokine-
10 mediated signaling pathway” including *CSF3R*, *IRF1*, *IRF7*, *NFKBIA*, *STAT1*, *STAT3*, and
11 *VEGFA*. Classical subsets MS1 and MS2 were slightly more abundant in monocytes from control
12 animals and expressed high levels of *CST3* and *GOS2* as well as *S100A8* and *S100A9*,
13 respectively.

14 To better understand the relationships between the classical monocyte clusters and their
15 differentiation/activation states, we performed a trajectory analysis. The monocyte clusters were
16 ordered by pseudotime, starting with the most abundant MS1 cluster which resulted in four unique
17 trajectory lineages (**Figure 3D**). Lineages 1, 2 and 4 indicate transitions culminating in MS8, MS3,
18 and MS5, respectively. Lineage 3 is the classical to non-classical differentiation trajectory. Density
19 plots revealed enrichment of control monocytes at the start of each lineage (less differentiated)
20 and enrichment of the CHD monocytes at the end of the lineages (more differentiated), most
21 notably in Lineage 4 (**Figure 3E**).

22 We next assessed differential gene expression with CHD in the 3 major subsets (**Supp. Figure**
23 **4F**). This analysis showed that IFN-inducible genes *WARS* and *IDO* were upregulated in the
24 classical CHD monocytes, whereas MHC-II gene *MAMU-DRB1* was downregulated (**Supp.**
25 **Figure 4F**). In the intermediate monocytes, CHD induced upregulation of inflammatory signaling
26 genes *MAP3K* and *S100P* but led to decreased expression of FC-receptor gene *FCGR3* (**Supp.**
27 **Figure 4F**). The 33 DEG downregulated in the non-classical monocytes from the CHD group
28 relative to controls enriched to antigen processing and IFN γ signaling pathways (**Supp. Figure**
29 **4G**). Finally, broadly in all monocytes we identify a significant reduction in lysosome and Fc γ -
30 receptor mediated phagocytosis modules in the CHD monocytes (**Figure 3F**). Alternatively, the
31 CHD monocytes show increased expression of gene modules for NF κ B signaling and HIF1A
32 signaling (**Figure 3G**).

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34 *Chronic heavy drinking impacts the epigenome of circulating monocytes*

1 To uncover epigenetic basis for the altered transcriptional profile in resting monocytes and altered
2 functional responses with CHD, we profiled the chromatin accessibility in purified resting
3 monocytes using the assay for transposase-accessible chromatin sequencing (ATAC-Seq) (42).
4 We identified 11,717 differentially accessible regions (DAR) that were open in the CHD
5 monocytes compared to 9,173 DAR that were accessible in the controls (**Figure 4A**). More than
6 25% of the accessible regions in the CHD monocytes mapped to promoter regions and were
7 closer to the transcription start site compared to accessible regions in monocytes from control
8 animals (**Figure 4A and Supp Figure 5A**). Genes regulated by promoter regions open in the
9 CHD monocytes enriched to GO terms associated with cytokine production and myeloid cell
10 activation (**Figure 4B**). Additional analysis using GREAT showed that cis-regulatory elements in
11 the distal intergenic regions open in CHD monocytes enriched to processes involved with
12 apoptotic signaling, MAPK signaling cascade, and myeloid cell differentiation (**Supp Figure 5B**).
13 Motif enrichment analysis of open chromatin regions in the CHD and control monocytes
14 demonstrated increased putative binding sites for transcription factors important for monocyte
15 differentiation and activation SP1, FRA1, FOS, JUNB, BATF, and PU.1 with CHD (43-47)(**Figure**
16 **4C**). To link the resting epigenome of the CHD monocytes to the enhanced transcriptional
17 response after LPS stimulation, we compared the genes associated with the open promoter
18 regions (<1kb) and the DEG identified after LPS stimulation and identified 281 common genes
19 (**Figure 4D**). Functional enrichment of these genes showed significant mapping to Biological
20 Process “Cytokine-mediated signaling” including transcription factors *FOS*, *HIF1A*, *STAT3* and
21 *JUNB* (**Figure 4E**). These genes as well as inflammatory *CCL20*, *TLR2*, *CD81* and *TNFSF14* had
22 both open promoters in the resting CHD monocytes as well as upregulated gene expression in
23 the LPS-stimulated CHD monocytes, linking open chromatin under resting conditions with CHD
24 to transcriptional LPS responses (**Figure 4F**).

25

26 *CHD impairs monocyte response to E. coli*

27 We next asked whether CHD would affect the monocyte response to pathogens. Monocytes from
28 male and female macaques were co-cultured with heat-killed *E.coli* for 16 hours and immune
29 mediator production was measured using Luminex (**Supp. Figure 1A**). In contrast to the response
30 to purified LPS, monocytes from CHD animals generated a dampened response to *E.coli*
31 characterized by reduced levels of IL-1b, IL-6, MIP-1B, and IL-15 and to a lesser extent I-TAC
32 and IL-5 compared to their control counterparts (**Figure 5 A, B**).

33

34 *Tissue-resident macrophage function is disrupted with CHD*

1 To understand functional consequences of CHD in relevant tissue-resident macrophages, we
2 assessed alveolar macrophages (AM) isolated from bronchoalveolar lavage (BAL) samples taken
3 from male and female macaques. Unlike our results from blood (**Figure 2A**) and the spleen (41)
4 myeloid cells, no differences in relative frequency of AM were noted in the BAL with CHD (**Figure**
5 **5C**). Purified AM from control and CHD animals were stimulated with LPS (16 hours) and
6 production of immune mediators was measured by Luminex (**Supp. Figure 1A**). In contrast to
7 AM from control animals, which did not mount a significant response to the LPS, AM from CHD
8 animals secreted large amounts of inflammatory cytokines IL-6 and TNF α as well as chemokines
9 IL-8, IP-10 and MCP-1 (**Figure 5D**). Finally, we assessed the impact of CHD on phagocytic ability
10 of AM (**Supp. Figure 1A**). AM from CHD macaques had a reduced ability to phagocytose *S.*
11 *aureus* bacteria (**Figure 5E**).

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1 **DISCUSSION:**

2 It is well-appreciated that chronic alcohol drinking exerts a profound impact on peripheral
3 and tissue-resident innate immune cells. However, the limitations provided by the complexity of
4 studying alcohol consumption in humans has left major gaps in understanding mechanisms that
5 underlie the immune response under conditions of heavy alcohol drinking. In this study, we utilized
6 a macaque model of voluntary ethanol self-administration to profile peripheral monocytes and
7 tissue-resident macrophages in animals after 12 months of daily alcohol drinking. We first
8 demonstrate that circulating monocytes from CHD animals generate a hyper-inflammatory
9 response to ex vivo LPS stimulation at the transcript and protein level. A comprehensive profiling
10 of circulating monocytes by scRNA-Seq and ATAC-Seq revealed alterations in monocyte
11 differentiation state as well as the epigenetic landscape with CHD. In contrast to what we
12 observed following ex vivo stimulation with LPS, monocytes from CHD animals generated a
13 dampened production of immune mediators following ex vivo *E.coli* stimulation. This dysregulated
14 phenotype extended to alveolar macrophages (AM) obtained from bronchia alveolar lavage (BAL)
15 samples which generated a heightened response to LPS, but reduced bacterial phagocytosis.

16 The enhanced inflammatory responses in response to ex vivo stimulation with LPS by
17 PBMC from CHD female macaques are in line with our previous data for PBMC from CHD male
18 macaques (40), indicating that this consequence of CHD is sex independent. Importantly, our
19 analysis indicated that this hyper-inflammatory response is mediated largely by intrinsic changes
20 within monocytes. Indeed, CHD induced significant transcriptional differences consistent with
21 activation of inflammatory pathways in monocytes at resting state. Moreover, LPS stimulation
22 resulted in a drastic increase in numbers of DEG from the CHD monocytes with increased
23 expression of genes associated with inflammatory response. In contrast, genes involved in
24 carbohydrate catabolic processes were not upregulated in monocytes from CHD animals
25 suggesting metabolic rewiring associated with a heightened inflammatory state (48). The
26 increased inflammatory mediator production in response to ex vivo LPS stimulation are in line
27 with previous *in vitro* studies that have reported hyper-activation of myeloid cells with prolonged
28 alcohol exposure. This also fits with hyper-inflammatory phenotypes associated with patients with
29 alcohol use disorders, especially those with alcoholic liver disease (16, 26, 49).

30 To elucidate the molecular basis for this dysregulated inflammatory response, we profiled
31 monocytes from CHD and control animals by scRNA-Seq. This analysis revealed tremendous
32 diversity amongst non-classical monocytes that has not been previously appreciated. We
33 identified two unique classical clusters within monocytes from CHD animals expressing high
34 levels of hypoxia factor *HIF1A* (MS5), and antioxidant defense molecule *SOD2* (MS7). Alcohol

1 and the products of its metabolism can induce oxidative stress which can alter cellular
2 transcriptional profiles, potentially explaining the profile of the MS5 cluster (50). CHD animals also
3 had a higher number of cells within the anti-viral cluster MS9 that expressed high levels of
4 interferon stimulated (ISG) genes such as *HERC5*. This observation is in line with our earlier study
5 that reported higher levels of ISG within PBMC from these same animals (18). Functional module
6 scoring of all of the monocytes revealed downregulation of genes involved in lysosome function
7 and Fc γ receptor mediated phagocytosis, but upregulation of NF κ B signaling, HIF1A signaling
8 and Fatty acid metabolism. Moreover, trajectory within the monocyte subsets revealed that CHD
9 accelerates differentiation/activation of classical monocyte subsets making them potentially
10 poised towards a hyper-inflammatory response.

11 Although the non-classical and intermediate monocytes fell into single clusters with equal
12 numbers of cells from controls and CHD animals, differential gene expression analysis revealed
13 significant downregulation of genes associated with MHC class II, antigen processing and
14 presentation, and IFN γ signaling pathways in the CHD monocytes. This observation provides a
15 potential explanation for the reduced response to vaccination observed in CHD animals (51).
16 Indeed, monocytes from CHD animals generated a dampened cytokine and chemokine response
17 to heat killed *E.coli*. These observations are in line with reported increased susceptibility of
18 patients with alcohol use disorders to bacterial pathogens (10, 11). Collectively, these data
19 suggest a rewiring of monocytes with CHD towards inflammatory responses and away from anti-
20 microbial functions in addition to alterations in signaling and metabolic processes.

21 Ethanol metabolites notably acetaldehyde and acetate in addition to minor byproducts
22 such as reactive oxygen species (ROS) and lipid peroxidation products can modulate gene
23 expression by binding transcription factors and/or modifying chromatin accessibility (50).
24 Therefore, we profiled chromatin accessibility of monocytes from control and CHD animals by
25 ATAC-Seq. We discovered that promoter regions that regulate genes important for cytokine
26 production and myeloid cell activation were more accessible in monocytes from CHD animals.
27 These open regions contained putative binding sites for transcription factors important for
28 monocyte activation and differentiation. Integrative analyses showed correlation between
29 chromatin accessibility and expression levels of key inflammatory genes in CHD monocytes,
30 including *FOS*, *HIF1A*, and *JUNB*.

31 To assess the implications of our observations in CHD monocytes in a functionally relevant
32 tissue, we profiled alveolar macrophages (AM) in the same animals. While it is believed that there
33 is a population of yolk-sac derived lung macrophages with self-renewal potential, there are also
34 populations of lung macrophages that arise from infiltrating monocytes (52). Similar to monocytes,

1 CHD AM produced significantly more inflammatory $\text{TNF}\alpha$, IL-6 and other chemokines following
2 ex vivo LPS stimulation. Additionally, AM from CHD animals were compromised in their ability to
3 phagocytose *S. aureus* compared to controls as has been described in rodent models of acute
4 alcohol exposure in rodents (53-55). These data indicate that the mis-wiring we observed in
5 circulating monocytes extends to tissue residence macrophages.

6 One proposed mechanism of this hyper-inflammatory state in monocytes (32, 34-36) and
7 macrophages with CHD is the translocation of bacterial products into circulation through impaired
8 gut barrier caused by ethanol consumption (33). In a previous study, we report increased levels
9 of IgM-bound endotoxin in CHD in male macaques (56). Here, we detected modestly elevated
10 levels of LAL in circulation but no changes in IgM bound endotoxin. A small increase in these
11 circulating bacterial products could significantly impact the activation state of monocytes;
12 however, it is difficult to tease these effects out from circulating ethanol and its metabolic products
13 (acetaldehyde, acetate). Long term exposure to activating agents, like LPS, is believed to lead to
14 tolerance and a decreased response to secondary stimulation in monocytes and macrophages
15 defined by specific changes in chromatin structure (57-60). Interestingly, we see enhanced
16 inflammatory responses of monocytes and macrophages from CHD animals, akin to innate
17 immune training (61, 62). Indeed, ethanol and its metabolites have been found to directly act on
18 histone modifications, creating changes in accessible chromatin (50, 63, 64). This could be
19 occurring in circulating monocytes, tissue macrophages, or the progenitors of these cells in the
20 bone marrow; perhaps on all three levels, altering the epigenetic structure and therefore functional
21 capacities of these cells (65).

22 In summary, this study provides a novel, in-depth, and integrative analysis of the effects
23 of long-term *in vivo* alcohol drinking on myeloid cells in non-human primates. To the best of our
24 knowledge, this is the first study to examine the effects of CHD on blood monocytes and tissue-
25 resident macrophages from the same subjects. Additionally, the comprehensive analysis of
26 monocyte populations alone by scRNA-Seq was critical for probing the heterogeneity of the
27 classical monocyte compartment, which had not yet been appreciated in humans or macaques.
28 Future studies will investigate the mechanisms behind the increased chromatin accessibility,
29 including the role of histone modifications and transcription factor binding and whether epigenetic
30 changes are apparent in the alveolar space as well.

1 **METHODS AND MATERIALS**

2 Animal studies and sample collection:

3 These studies used samples from a non-human primate model of voluntary ethanol self-
4 administration established through schedule-induced polydipsia (38, 39, 66). Briefly, in this model,
5 rhesus macaques are introduced to a 4% w/v ethanol solution during a 90-day induction period
6 followed by concurrent access to the 4% w/v solution and water for 22 hours/day for one year.
7 During this time, the macaques adopt a stable drinking phenotype defined by the amount of
8 ethanol consumed per day and the pattern of ethanol consumption (g/kg/day) (38). Blood samples
9 were taken from the saphenous vein every 5-7 days at 7 hrs after the onset of the 22 hr/day
10 access to ethanol and assayed by headspace gas chromatography for blood ethanol
11 concentrations (BECs).

12
13 For these studies, blood and bronchoalveolar lavage (BAL) samples were collected from 9 female
14 and 8 male rhesus macaques (average age 5.68 yrs), with 7 animals serving as controls and 10
15 classified as chronic heavy drinkers (CHD) based on 12 months of ethanol self-administration
16 (tissue and drinking data obtained from the Monkey Alcohol Tissue Research Resource:
17 www.matrr.com). These cohorts of animals (Cohorts 6 and 7a on matrr.com) were described in
18 two previous studies of innate immune system response to alcohol (18, 40). Peripheral Blood
19 Mononuclear Cells (PBMC) were isolated by centrifugation over histopaque (Sigma, St Louis,
20 MO) as per manufacturer's protocol and cryopreserved until they could be analyzed as a batch.
21 BAL cells were obtained after 12 months of open access and centrifuged, pelleted and
22 cryopreserved until they could be analyzed as a batch. The average daily ethanol intake for each
23 animal is outlined in **Supp. Table 1**.

24 25 LAL and IgM assays:

26 Endotoxin-core antibodies in plasma samples were measured using an enzyme-immunoassay
27 technique (ELISA) after 12 months of alcohol consumption using EndoCab IgM ELISA kit (Hycult
28 Biotech, Catalog# HK504-IgM). Plasma samples were diluted 50x.

29 Circulating endotoxin was measured from plasma using a Limulus amoebocyte lysate (LAL) assay
30 (Hycult Biotech) following the manufacturers protocol.

31 32 Flow cytometry analysis:

33 $1-2 \times 10^6$ PBMC were stained with the following surface antibodies (2 panels) against: CD3 (BD
34 Biosciences, SP34), CD20 (Biolegend, 2H7), HLA-DR (Biolegend, L243), CD14 (Biolegend,

1 M5E2), CD16 (Biolegend, 3G8), TLR4 (Biolegend, HTA125), TLR2 (Biolegend, TLR2.1), CD40
2 (Biolegend, 5C3), CD163 (Biolegend, GHI/61), CD86 (Biolegend, IT2.2), CD80 (Biolegend,
3 2D10), CX3CR1 (Biolegend, 2A9-1), CCR7 (Biolegend, GO43H7), and CCR5 (Biolegend,
4 J418F1) and live/dead Sytox Advanced (Invitrogen). Monocytes were defined as CD3-CD20-
5 HLA-DR+CD14+. All samples were acquired with an Attune NxT Flow Cytometer (ThermoFisher
6 Scientific, Waltham, MA) and analyzed using FlowJo software (Ashland, OR). Median
7 Fluorescence Intensities (MFI) for all markers within the CD14+ monocyte gate were tested for
8 significant differences using an unpaired t-test with Welch's correction on Prism 7 (GraphPad,
9 San Diego, CA).

10

11 CD14 MACS bead Isolation and Purity:

12 CD14+ monocytes were purified from freshly thawed PBMC using CD14 antibodies conjugated
13 to magnetic microbeads per manufacturers recommendations (Milyenyi Biotec, San Diego, CA).
14 Efficiency of the positive selection of monocytes was assessed by flow cytometry where purity
15 (CD14+HLA-DR+) averaged 87% (SEM \pm 1.6).

16

17 Monocyte/Macrophage Stimulation Assays:

18 1×10^6 freshly thawed PBMC or 1×10^5 purified CD14+ monocytes were cultured in RPMI
19 supplemented with 10% FBS with or without 100 ng/mL LPS (TLR4 ligand, *E.coli* 055:B5;
20 Invivogen, San Diego CA) for 16 or 6 hours, respectively, in 96-well tissue culture plates at 37C
21 in a 5% CO₂ environment. 3.5×10^4 purified CD14+ monocytes were cultured in RPMI
22 supplemented with 10% FBS with or without 6×10^5 cfu/mL heat-killed *E.coli* (Escherichia coli
23 (Migula) Castellani and Chalmers ATCC 11775) for 16 hours in 96-well tissue culture plates at
24 37C in a 5% CO₂ environment. 6.5×10^4 FACS sorted CD206+ cells from the BAL were cultured
25 in RPMI supplemented with 10% FBS with or without 100 ng/mL LPS for 16 hours, in 96-well
26 tissue culture plates at 37C in a 5% CO₂ environment. Plates were spun down: supernatants were
27 used to measure production of immune mediators and cell pellets were resuspended in Qiazol
28 (Qiagen, Valencia CA) for RNA extraction. Both cells and supernatants were stored at -80C until
29 they could be processed as a batch.

30

31 Luminex Assay:

32 Immune mediators in the supernatants from PBMC or purified monocytes stimulated with LPS
33 were measured using a 30-plex panel measuring levels of cytokines (IFN γ , IL-1b, IL-2, IL4, IL-6,
34 IL-7, IL-12, IL-15, IL-17, IL-18, IL-23, TNF α , IL-1RA, IFN-b, and IL-10), chemokines (MCP-1, MIP-

1 1a, MIP-1b, Eotaxin, IL-8, MIG, I-TAC, BCA-1, IP-10, and SDF-1a), and other factors (PD-L1,
2 PDGF-BB, S100B, GM-CSF, and VEGF-A) validated for NHP (R&D Systems, Minneapolis, MN,
3 USA). Standard curves were generated using 5-parameter logistic regression using the
4 xPONENT™ software provided with the MAGPIX instrument (Luminex, Austin TX).
5 Immune mediators in the supernatants from monocytes stimulated with *E.coli* or AM stimulated
6 with LPS were measured using a more sensitive ProcartaPlex 31-plex panel measuring levels of
7 cytokines (IFN α , IFN γ , IL-1 β , IL-10, IL-12p70, IL-15, IL-17A, IL-1RA, IL-2, IL-4, IL-5, IL-6, IL-7,
8 MIF, and TNF α), chemokines (BLC(CXCL13), Eotaxin (CCL11), I-TAC(CXCL11), IL-8(CXCL8),
9 IP-10(CXCL10), MCP-1(CCL2), MIG(CXCL9), MIP-1a(CCL3), MIP-1b(CCL4)), growth factors
10 (BDNF, G-CSF, GM-CSF, PDGF-BB, VEGF-A) and other factors (CD40L, Granzyme B)
11 (Invitrogen, Carlsbad, CA). Differences in induction of proteins post stimulation were tested using
12 unpaired t-tests with Welch's correction. Dose-dependent responses were modeled based on
13 g/kg/day ethanol consumed and tested for linear fit using regression analysis in Prism (GraphPad,
14 San Diego CA). Raw data included in **Supp. Table 2**.

15

16 RNA isolation and library preparation:

17 Total RNA was isolated from PBMC or purified CD14+ monocytes using the mRNeasy kit (Qiagen,
18 Valencia CA) following manufacturer instructions and quality assessed using Agilent 2100
19 Bioanalyzer. Libraries from PBMC RNA were generated using the TruSeq Stranded RNA LT kit
20 (Illumina, San Diego, CA, USA). Libraries from purified CD14+ monocytes RNA were generated
21 using the NEBnext Ultra II Directional RNA Library Prep Kit for Illumina (NEB, Ipswich, MA, USA),
22 which allows for lower input concentrations of RNA (10ng). For both library prep kits, rRNA
23 depleted RNA was fragmented, converted to double-stranded cDNA and ligated to adapters. The
24 roughly 300bp-long fragments were then amplified by PCR and selected by size exclusion.
25 Libraries were multiplexed and following quality control for size, quality, and concentrations, were
26 sequenced to an average depth of 20 million 100bp reads on the HiSeq 4000 platform.

27

28 Bulk RNA-Seq data analysis:

29 RNA-Seq reads were quality checked using FastQC
30 (<https://www.bioinformatics.babraham.ac.uk/projects/fastqc/>), adapter and quality trimmed using
31 TrimGalore(https://www.bioinformatics.babraham.ac.uk/projects/trim_galore/), retaining reads at
32 least 35bp long. Reads were aligned to *Macaca mulatta* genome (Mmul_8.0.1) based on
33 annotations available on ENSEMBL (Mmul_8.0.1.92) using TopHat (67) internally running
34 Bowtie2 (68). Aligned reads were counted gene-wise using GenomicRanges (69), counting reads

1 in a strand-specific manner. Genes with low read counts (average <5) and non-protein coding
2 genes were filtered out before differential gene expression analyses. Read counts were
3 normalized using RPKM method for generation of PCA and heatmaps. Raw counts were used to
4 test for differentially expressed genes (DEG) using edgeR (70), defining DEG as ones with at
5 least two-fold up or down regulation and an FDR controlled at 5%. Functional enrichment of gene
6 expression changes in resting and LPS-stimulated cells was performed using Metascape (71)
7 and DAVID (72). Networks of functional enrichment terms were generated using Metascape and
8 visualized in Cytoscape (73). Transcription factors that regulate expression of DEG were
9 predicted using the ChEA3 (74) tool using ENSEMBL ChIP database.

10

11 10X scRNA-Seq data analysis:

12 Freshly thawed PBMC from control (n=3) and CHD (n=3) animals were stained with anti-CD14,
13 HLA-DR antibodies and sorted for live CD14+/HLA-DR+ cells on a BD FACSAria Fusion. Sorted
14 monocytes were pooled and resuspended at a concentration of 1200 cells/ul and loaded into the
15 10X Chromium gem aiming for an estimated 10,000 cells per sample. cDNA amplification and
16 library preparation (10X v3 chemistry) were performed according to manufacturer protocol and
17 sequenced on a NovaSeq S4 (Illumina) to a depth of >50,000 reads/cell.

18 Sequencing reads were aligned to the Mmul_8.0.1 reference genome using cellranger v3.1 (75)
19 (10X Genomics). Quality control steps were performed prior to downstream analysis with *Seurat*,
20 filtering out cells with fewer than 200 unique features and cells with greater than 20%
21 mitochondrial content. Control and CHD datasets were integrated in *Seurat* (76) using the
22 *IntegrateData* function. Data normalization and variance stabilization were performed, correcting
23 for differential effects of mitochondrial and cell cycle gene expression levels. Clustering was
24 performed using the first 20 principal components. Small clusters with an over-representation of
25 B and T cell gene expression were removed for downstream analysis. Clusters were visualized
26 using uniform manifold approximation and projection (UMAP) and further characterized into
27 distinct monocyte subsets using the *FindMarkers* function (**Supp. Table 3**).

28

29 Pseudo-temporal analysis:

30 Pseudotime trajectory monocytes was reconstructed using Slingshot (77). The UMAP
31 dimensional reduction performed in *Seurat* was used as the input for Slingshot. For calculation of
32 the lineages and pseudotime, the most abundant classical monocyte cluster, MS1, was set as the
33 root state.

34

1 Differential expression analyses:

2 Differential expression analysis (CHD to Control) was performed using *DESeq* under default
3 settings in *Seurat*. Only statistically significant genes (Fold change cutoff ≥ 1.2 ; adjusted p-value
4 ≤ 0.05) were included in downstream analysis.

5
6 Module Scoring and functional enrichment:

7 For gene scoring analysis, we compared gene signatures and pathways from KEGG
8 (<https://www.genome.jp/kegg/pathway.html>) (**Supp. Table 4**) in the monocytes using *Seurat*'s
9 *AddModuleScore* function. Over representative gene ontologies were identified using 1-way, 2-
10 way or 4-way enrichment of differential signatures using Metascape (71). All plots were generated
11 using *ggplot2* and *Seurat*.

12
13 ATAC-Seq library preparation:

14 Following the Omni-ATAC protocol, 2×10^4 purified monocytes were lysed in lysis buffer (10mM
15 Tris-HCl (pH 7.4), 10mM NaCl, 3mM MgCl₂, 10% Np-40, 10% Tween, and 1% Digitonin) on ice
16 for 3 minutes (42). Immediately after lysis, nuclei were spun at 500 g for 10 minutes at 4C to
17 remove supernatant. Nuclei were then incubated with Tn5 transposase for 30 minutes at 37C.
18 Tagmented DNA was purified using AMPure XP beads (Beckman Coulter, Brea, CA) and PCR
19 was performed to amplify the library under the following conditions: 72C for 5 min; 98 for 30s; 5
20 cycles of 98C for 10s, 63C for 30s, and 72C for 1min; hold at 4C. Libraries were then purified with
21 warm AMPure XP beads and quantified on a Bioanalyzer (Agilent Technologies, Santa Clara CA).
22 Libraries were multiplexed and sequenced to a depth of 50 million 100bp paired reads on a
23 NextSeq (Illumina).

24
25 ATAC-Seq data analysis:

26 Paired ended reads from sequencing were quality checked using FastQC and trimmed to a quality
27 threshold of 20 and minimum read length 50. Trimmed reads were aligned to the Macaca Mulatta
28 genome (Mmul_8.0.1) using Bowtie2 (-X 2000 -k 1 --very-sensitive --no-discordant --no-mixed).
29 Reads aligning to mitochondrial genome were removed using Samtools and PCR duplicate
30 artifacts were removed using Picard. Samples from each group were concatenated to achieve
31 greater than 5×10^6 non-duplicate, non-mitochondrial reads per group.

32 Accessible chromatin peaks were called using Homer's *findPeaks* function (78) (FDR<0.05) and
33 differential peak analysis was performed using Homer's *getDifferentialPeaks* function (P < 0.05).
34 Genomic annotation of open chromatin regions in monocytes and differentially accessible regions

1 (DAR) with CHD was assigned using ChIPSeeker (79). Promoters were defined as -1000bp to
2 +100bp around the transcriptional start site (TSS). Functional enrichment of open promoter
3 regions was performed using Metascape (<http://metascape.org>).
4 Due to the lack of available macaque annotation databases, distal intergenic regions from the
5 macaque assembly were converted to the human genome (hg19) coordinates using the UCSC
6 liftOver tool. Cis-Regulatory roles of these putative enhancer regions were identified using
7 GREAT (<http://great.stanford.edu/public/html/>). Transcription factor motif analysis was performed
8 using Homer's *findMotifs* function with default parameters. Promoter regions for every annotated
9 macaque gene were defined in ChIPSeeker as -1000bp to +100bp relative to the TSS. A counts
10 matrix was generated for these regions using *featureCounts* (80), where pooled bam files for each
11 group were normalized to total numbers of mapped reads.

12

13 Phagocytosis Assay

14 500,000 freshly thawed total BAL cells were resuspended in RP10 media supplemented with
15 100ng/mL LPS and incubated for 4 hours at 37C with 5% CO₂. 50uL of pHrodo Red S.aureus
16 BioParticles (Thermo Fisher Scientific, Waltham, MA) were added to the cells and they were
17 incubated for an additional 2 hours in the incubator. The cells were washed and stained with anti-
18 CD206 antibody and acquired with an Attune NxT Flow Cytometer (ThermoFisher Scientific,
19 Waltham, MA) and further analyzed using FlowJo software (Ashland, OR).

20

21 Statistical Analysis:

22 All statistical analyses were conducted in Prism 7(GraphPad). Data sets were first tested for
23 normality. Two group comparisons were carried out an unpaired t-test with Welch's correction.
24 Differences between 4 groups were tested using one-way ANOVA ($\alpha=0.05$) followed by Holm
25 Sidak's multiple comparisons tests. Error bars for all graphs are defined as \pm SEM. Linear
26 regression analysis compared significant shifts in curve over horizontal line, with spearman
27 correlation coefficient reported. Statistical significance of functional enrichment was defined using
28 hypergeometric tests. P-values less than or equal to 0.05 were considered statistically significant.
29 Values between 0.05 and 0.1 are reported as trending patterns.

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Author Contributions

S.A.L., K.A.G., and I.M. conceived and designed the experiments. S.A.L., S.S., and B.D. performed the experiments. S.A.L. and B.D. analyzed the data. S.A.L. and I.M. wrote the paper. All authors have read and approved the final draft of the manuscript.

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Competing interests

No competing interests reported.

Data availability

The datasets supporting the conclusions of this article are available on NCBI's Sequence Read Archive (SRA# PRJNA723053).

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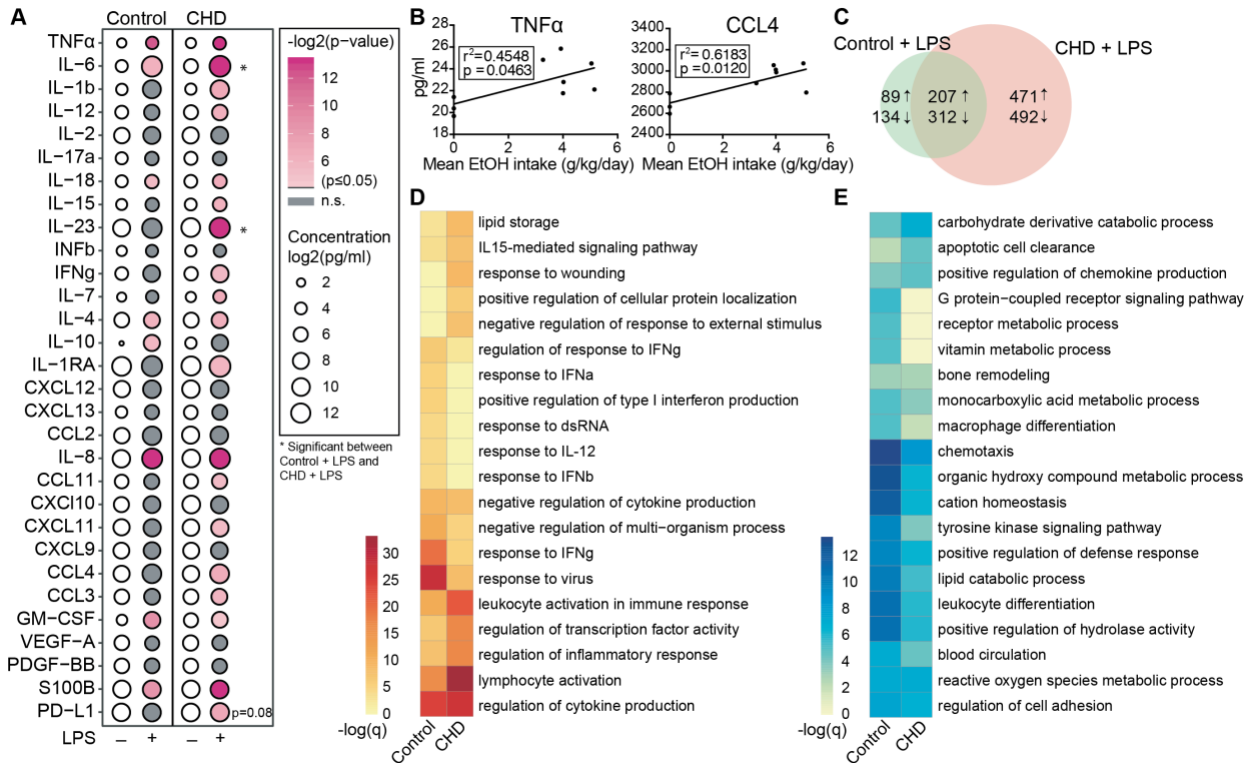
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1 FIGURES:

Figure 1

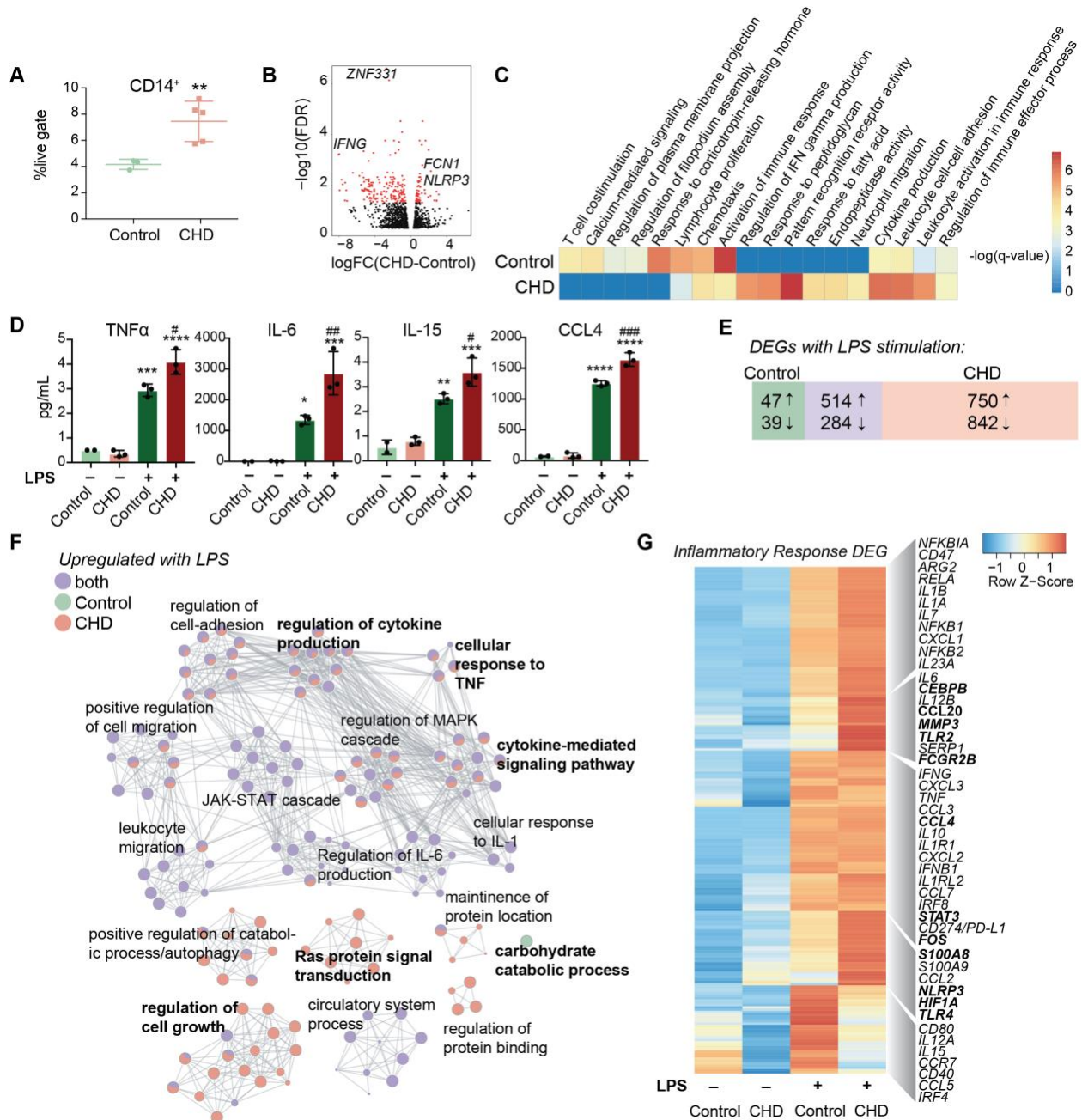


2

3 **Figure 1: CHD induced enhanced innate immune response in the periphery**

4 PBMC from control (n=3) and chronic heavy drinking (CHD) (n=6) animals were stimulated with
5 LPS for 16 hours. A) Bubble plot representing immune factor production (pg/ml) in the presence
6 or absence of LPS stimulation of PBMC from control and CHD animals. The size of each circle
7 represents the log₂ mean concentration of the indicated secreted factor and the color denotes the
8 -log₂ transformed p value with the darkest pink representing the most significant value. The p-
9 values were calculated between the unstimulated and stimulated conditions for each group by
10 One-way ANOVA and a p-value cut-off of 0.05 was set. White circles indicate non-significant p-
11 value. * indicates significance between control and CHD for each stimulation condition. B) Scatter
12 plots showing Spearman correlation between average EtOH dose (grams EtOH/kg body
13 weight/day) and concentration (pg/ml) of the secreted factors TNFα and CCL4. C) Venn diagram
14 comparing LPS-induced DEG in controls and CHD PBMC. D, E) Heatmaps of significant GO
15 terms to which upregulated (D) and downregulated (E) DEG identified following LPS stimulation
16 of PBMC from controls and CHD animals enriched using Metascape. The scales of the heatmaps
17 are -log(q-values) associated with the enrichment to selected pathways.

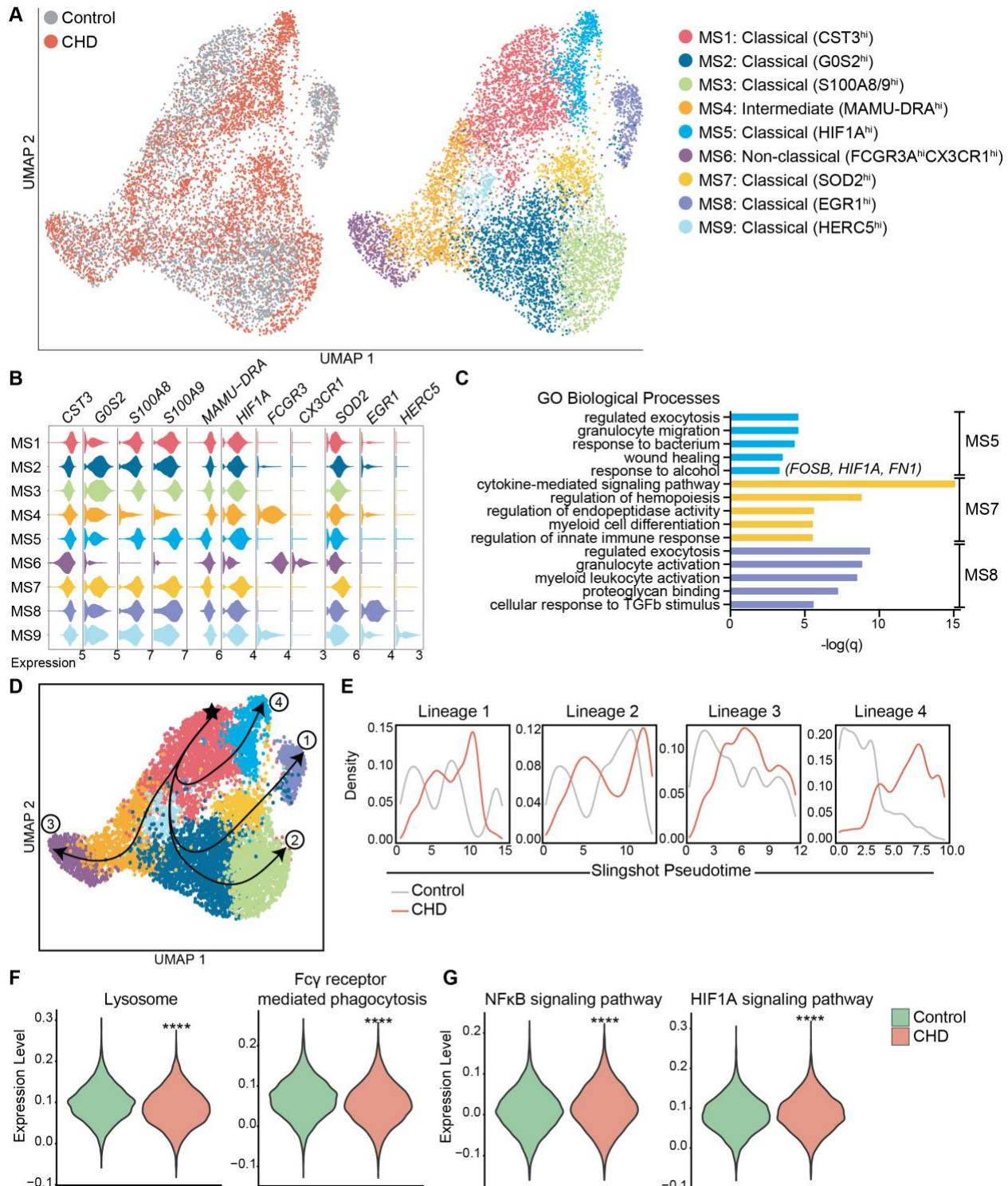
Figure 2



1
 2 **Figure 2: Impact of CHD on the monocyte functional and transcriptomic response to LPS**
 3 A) Abundance of live CD14⁺ cells in PBMC from control (n=3) and CHD (n=5) animals measured
 4 by flow cytometry. Significance calculated by t-test with Welch's correction. B) Volcano plot
 5 representing up- and downregulated differentially expressed genes (DEG) with CHD in resting
 6 monocytes. Red = significant with an FDR \leq 0.05 and fold change \geq 2. C) Heatmap of significant
 7 GO terms (identified using Metascape) to which DEGs downregulated and upregulated with CHD
 8 in monocytes enriched. The scales of the heatmaps are $-\log(\text{q-values})$ associated with the

1 enrichment to selected pathways. D) Purified monocytes were stimulated with LPS for 6 hours
2 and supernatants were analyzed by Luminex assay. Bar plots showing concentration (pg/ml) of
3 selected immune mediators (TNF α , IL-6, IL-15, CCL4) (*=p<0.05, **=p<0.01, ***=p<0.001,
4 ****=p<0.0001 between LPS and unstimulated condition, # is significance between CHD and
5 control for each stimulation condition calculated by One-way ANOVA). E) Venn diagram showing
6 overlap between DEG identified in control and CHD monocytes after LPS stimulation. F) Network
7 visualization of functional enrichment analysis of DEG upregulated with LPS in monocytes from
8 controls only, CHD only, and both using Metascape. The size of each node represents the number
9 of DEGs associated with a given gene ontology (GO) term and the pie chart filling represents
10 relative proportion of DEGs from each group that enriched to that GO term. Similar GO terms are
11 clustered together and are titled with the name of the most statistically significant GO term within
12 that cluster. The gray lines denote shared interactions between GO terms. Density and number
13 of gray lines indicates the strength of connections between closely related GO terms. G) Heatmap
14 of average normalized expression of genes associated with inflammatory response pathways.

Figure 3



1

2 **Figure 3: Single cell RNA-Seq analysis of monocytes with CHD**

3 Monocytes (n=3 control/ 3 CHD) were purified from total PBMC and subjected to 10X scRNA-Seq

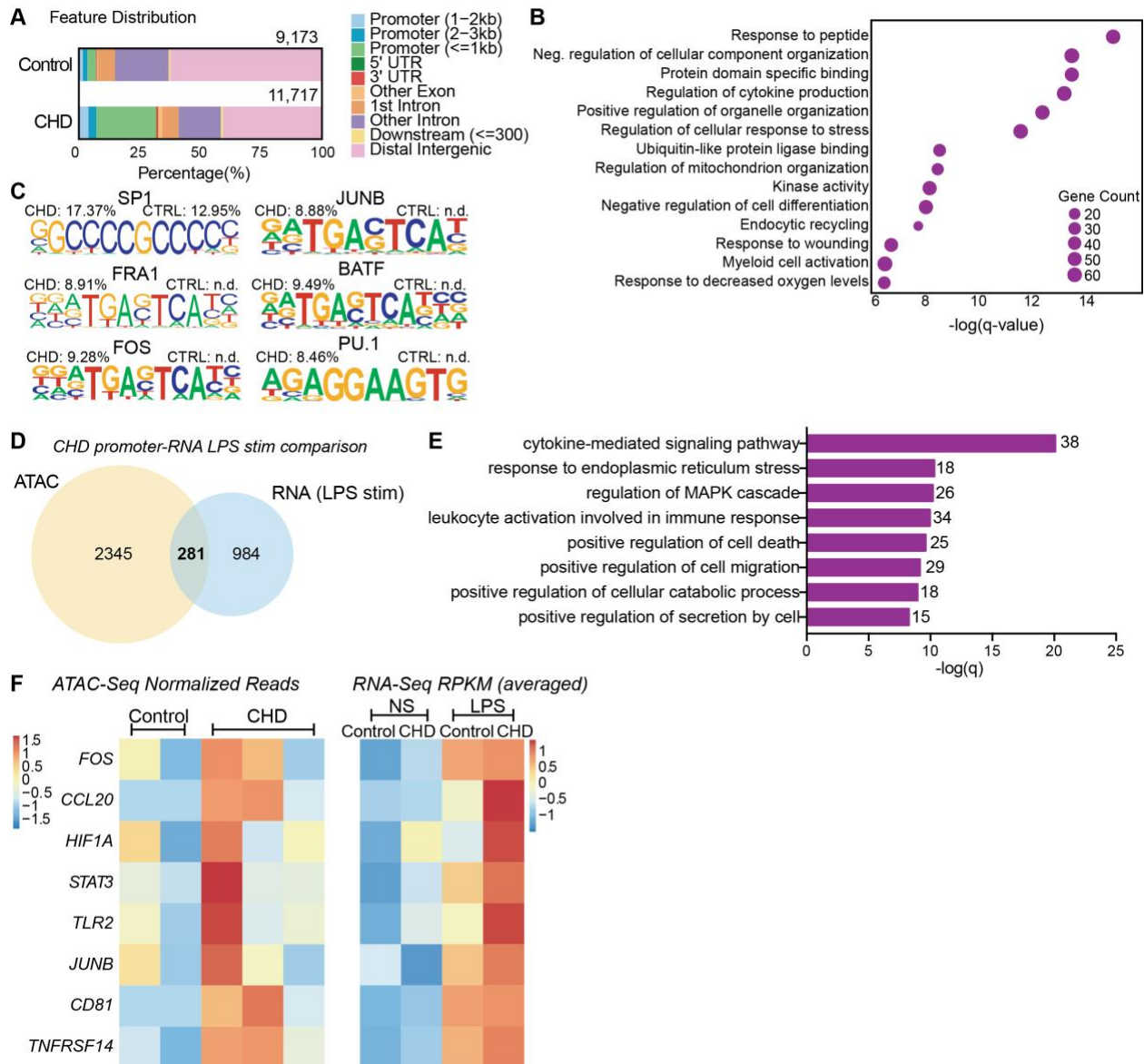
4 analysis. A) Visualization of 9,360 monocytes by uniform manifold approximation and projection

1 (UMAP) colored by group (control and CHD) as well as by identified clusters. B) Stacked violin
2 plots representing expression of key genes used for cluster identification, grouped by monocyte
3 subset cluster. C) GO Biological Process enrichment from Metascape of genes highly expressed
4 in MS5, MS7, and MS8, defined by q-value. D) Trajectory analysis of monocytes determined using
5 Slingshot. E) Cell density plots for Control and CHD groups across each of four trajectory lineages
6 determined by Slingshot. F,G) Violin plots comparing (F) Lysosome and Fc γ receptor-mediated
7 phagocytosis and (G) NFkB signaling and HIF1A signaling pathway module scores in all
8 monocytes of both groups. Statistical analysis of module scores was performed using a t-test with
9 Welch's correction where *=p<0.05, **=p<0.01, ***=p<0.001, ****=p<0.0001.

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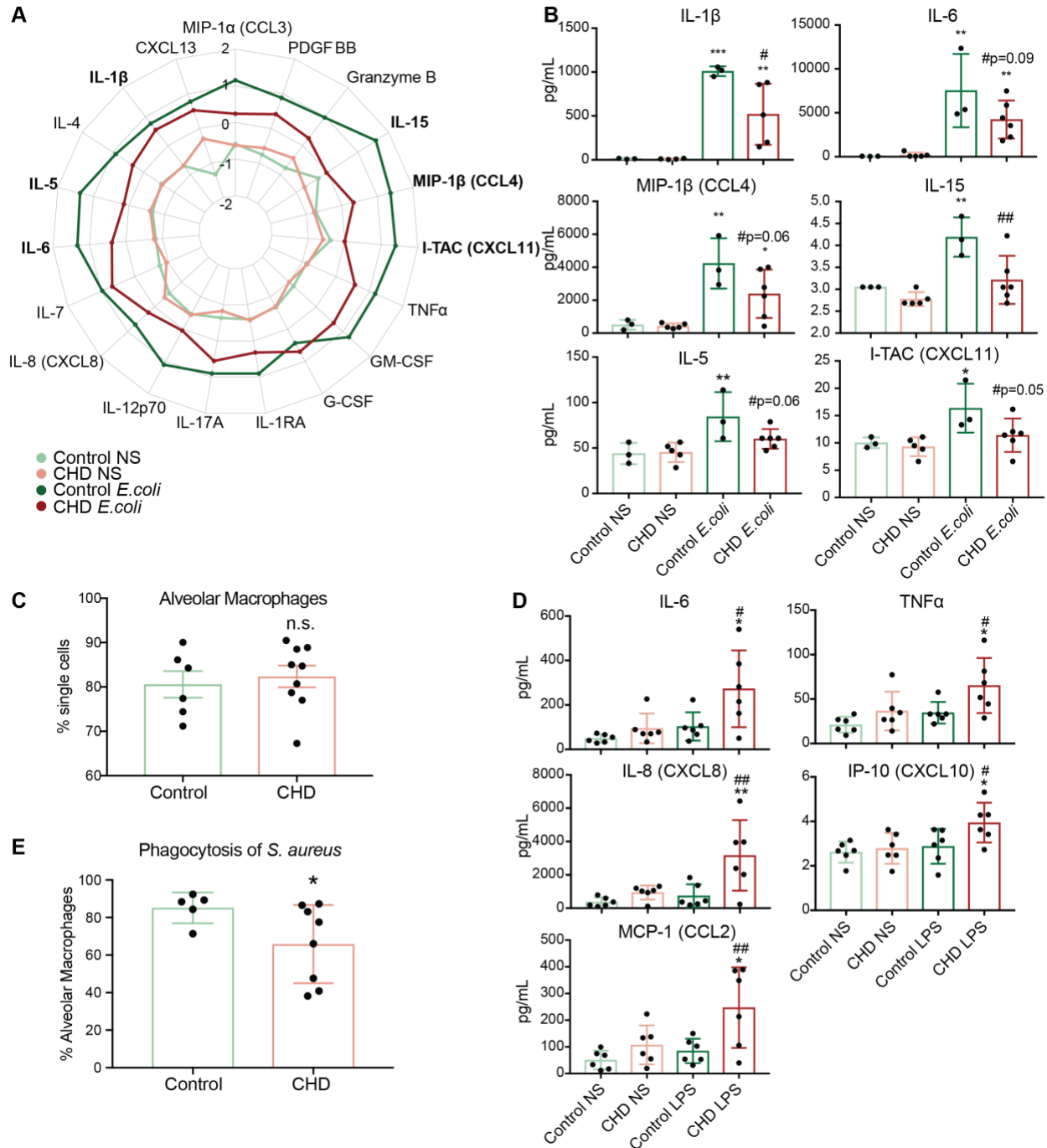
Figure 4



1
 2 **Figure 4: CHD primes the monocyte epigenome for heightened response**
 3 Monocytes (n= 2 Control/ 3 CHD) were purified from PBMC and subjected to ATAC-Seq analysis.
 4 A) Bar plot showing genomic feature distribution of the open chromatin regions (fold-change ≥ 2)
 5 in control and CHD monocytes at resting state. B) GO Biological process enrichment from
 6 Metascape of genes regulated by the open promoter regions (≤ 1 kb, fold-change ≥ 3) in CHD
 7 monocytes. The X-axis represents $-\log(q\text{-value})$ and the size of the dot represents the number of
 8 genes within that term. C) Homer motif enrichment of the open chromatin regions. All listed motifs
 9 have significantly enriched binding sites in the CHD monocytes where the percentage value listed
 10 is the percentage of target sequences with that motif. D) Venn diagram of genes regulated by the
 11 open promoter regions (≤ 1 kb, fold-change ≥ 3) and DEG detected following LPS stimulation in

1 the CHD monocytes. E) GO Biological process enrichment terms from Metascope of the 281
 2 overlapping genes from (D). F) Heatmaps of the normalized expression of open promoter region
 3 counts and RPKM from bulk RNA-Seq analysis for selected common genes.

Figure 5



4
 5 **Figure 5: Alveolar macrophage function and response to LPS is altered with CHD.** Purified
 6 monocytes (n= 3 Control/ 5 CHD) were stimulated with heat-killed *E. coli* bacteria for 16 hours. A)
 7 Spider plot representing average Z-scores for each group across the indicated analytes measured

1 by Luminex. B) Bar plots showing concentration (pg/ml) of selected immune mediators (TNF α , IL-
2 6, MIP-1b, IL-15, IL-5, I-TAC).C) Flow cytometry analysis of live CD206+ cells from the BAL of
3 macaques. D) FACS sorted AM (n=6/group) were stimulated with LPS for 16 hours and production
4 of IL-6, TNF α , IL-8, IP-10, and MCP-1 were quantified by Luminex assay. E) Bar plots showing
5 percentage of AM phagocytosing fluorescent *S. aureus* bacteria. Statistics for 2-way comparisons
6 carried out using t-test with Welch's correction, 4-way by One-way ANOVA. *=p<0.05, **=p<0.01,
7 ***=p<0.001, ****=p<0.0001 between LPS and unstimulated condition. If indicated, # is
8 significance between CHD and control for each stimulation condition.
9
10