

HPLC-MS/MS. Power density was determined in EEG bands using a custom algorithm. A two-compartment link PKPD model was developed to describe the relation between ALLO plasma concentration and change in EEG power in the alpha, beta, delta and theta bands. RESULTS/ANTICIPATED RESULTS: ALLO caused a rapid increase in absolute power density in all EEG bands measured (1-4, >4 - 8, >8 - 12, >12 - 25, and >25 - 100 Hz). The onset of effect was rapid (1-3 min) and demonstrated by frequency band and dose analysis. Concentration-EEG data were best fit by a two-compartment PK model and sigmoidal Emax PD indirect link model. The beta frequency band was most sensitive, showing increases in power at the lowest ALLO concentrations. The EC50 concentration for the beta frequency was ~270 ng/mL. The EC50 values for effects on the other frequency bands were ~500-700 ng /mL. In conclusion, IV ALLO causes a rapid effect on EEG that can be used to determine minimal plasma concentrations associated with target engagement. DISCUSSION/SIGNIFICANCE OF IMPACT: Dose selection for future clinical trials will use the effective concentrations determined here in conjunction with studies in animal status epilepticus models. Studies are planned in client owned dogs with epilepsy to evaluate clinical efficacy in dogs and as nonclinical proof-of-concept evidence supporting translational studies in people. CONFLICT OF INTEREST DESCRIPTION: Michael Rogawski and Dorota Zolkowska are named as inventors on patent applications claiming use of neuroactive steroids including allopregnanolone and ganaxolone in the treatment of status epilepticus.

4395

alpha-Synuclein Induced Reactive Gliosis[†]

Sean David Carey¹, Sarah Alshawi², Mondona McCann³, and Kathleen Maguire-Zeiss⁴

¹Georgetown - Howard Universities; ²Georgetown University, Department of Biology; ³GUMC, Interdisciplinary Program in Neuroscience; ⁴GUMC, Department of Neuroscience

OBJECTIVES/GOALS: Reactive gliosis is a hallmark of neurodegenerative disease and is characterized by the release of pro-inflammatory cytokines and physiologic changes to glial cells. Our work identifies a novel inflammatory glial-glia cell interaction and role for mGluR5 that has the potential to provide novel insight into the mechanisms of neurodegeneration. METHODS/STUDY POPULATION: **Cell Culture:** Mouse primary astrocytes and microglia were isolated from P0-P3 C57BL/6 or Cx3cr1^{GFP/+} mice.¹ **Treatment:** Glia were treated with oligomeric α -synuclein 1 μ g/mL or mGluR5 agonist CHPG 100 μ M.^{2,3} **ELISA:** Glia culture media was collected and analyzed according to the manufacturer. **qRT-PCR:** TaqMan[™] probes were used according to manufacturer on extracted glia mRNA. **ICC:** Microglia were labeled with 1:750 Rb x Iba1 (Wako) and 1:500 Alexa Fluor 488 Gt x Rb. **Phagocytosis Assay:** Primary glia were treated with α -synuclein or astrocyte-conditioned culture media for 24-48hrs. For treatment of microglia with conditioned media, astrocytes were washed with PBS and fresh media was added to prevent carry over of α -synuclein to microglia. The number of fluorescent microbeads per microglia was quantified. RESULTS/ANTICIPATED RESULTS: Mouse primary cortical astrocytes simulated with α -synuclein aggregates adopt a reactive A1 phenotype independent of microglial stimulation. This A1 phenotype is characterized by release of pro-inflammatory cytokines including Complement Component 3 and the monocyte chemoattractant CCL2. Reactive astrocyte media induces a phagocytic phenotype in primary mouse microglia. Along with this, α -synuclein-directed microglial phagocytosis was

attenuated with the addition of the mGluR5 agonist CHPG. DISCUSSION/SIGNIFICANCE OF IMPACT: Our findings suggest that oligomeric α -synuclein is capable of inducing a reactive phenotype in astrocytes independent of microglia and implicate crosstalk between glia as an important mediator of inflammation and microglial phagocytosis in synucleinopathies.

4427

Angiopoietin F-domain valency determines outcome of Tie2 receptor engagement and accelerates angiogenesis in tissue regeneration

Yan Ting Zhao¹, Jorge Fallas¹, Shally Saini¹, George Ueda¹, Logeshwaran Somasundaram¹, Ziben Zhou¹, Drew Seller¹, David Baker¹, and Hannele Ruohola-Baker¹

¹University of Washington

OBJECTIVES/GOALS: Lack of blood vessels remains a major obstacle in tissue regeneration. Angiopoietin 1 and 2 modulate angiogenesis through the Tie2 receptor tyrosine kinase. Ang1 activates pAKT to promote endothelial cell survival while Ang2 antagonizes these effects. We aim to dissect the Ang/Tie2 pathway to uncover the molecular basis for these opposing effects. METHODS/STUDY POPULATION: Ang1 and Ang2 bind Tie2 via nearly identical F-domains (Fd). To investigate the molecular basis regulating the Tie2 pathway, we generated a series of computationally designed self-assembling protein scaffolds presenting F-domains in a wide range of valencies and geometries using Rosette Molecular Modeling Suite. We examined the protein kinase activation, cell migration, and blood vessel formation produced by the designed proteins in human umbilical vein endothelial cells. RESULTS/ANTICIPATED RESULTS: Two phenotypic classes were demonstrated by the number of presented F domains: scaffolds presenting 3 or 4 Fd have Ang2 like activity, upregulating pFAK and pERK but not pAKT and failing to induce cell migration and tube formation; scaffolds presenting more than 6 Fd have Ang1 like activity, upregulating the three signaling branches and enhancing cell migration and tube formation. Scaffolds with 8 or more Fd show superagonist activity, producing significantly stronger phenotypes than Ang1. These results suggest that Fd valency largely determines Ang1 vs Ang2 signaling outcomes, and our designed superagonists can outperform Ang1 in vascularization and wound healing. In *in vivo* experiments, nanoparticles displaying 60 copies of Fd produce significant revascularization in hemorrhagic brains. DISCUSSION/SIGNIFICANCE OF IMPACT: Targeting the Tie2 pathway is a new paradigm in regenerative medicine. Our designed constructs will enable us to generate high-affinity Tie2 agonists and antagonists as drugs to control angiogenesis, enabling tissue regeneration that recapitulates the biological architecture of the native tissue physiology, improving organ transplant outcome.

4425

Antibiotic-Resistant Organism Acquisition in Nursing Facility Patients

Joyce Wang¹, Marco Cassone², Kristen Gibson², Bonnie Lansing², Lona Mody², Evan Snitkin², and Krishna Rao²

¹University of Michigan School of Medicine; ²University of Michigan

OBJECTIVES/GOALS: We investigated the association between gut microbiota features in newly admitted nursing facility (NF) patients and the acquisition of vancomycin-resistant *Enterococcus* (VRE)

and/or resistant Gram-negative bacteria (rGNB) within 14 days. METHODS/STUDY POPULATION: Patients were recruited at 6 Michigan NFs from 09/16–08/18. VRE or rGNB colonization status was determined by culture swabs collected from multiple body sites at enrolment, day 7, and day 14. Our analysis focused on patients with no colonization at baseline, a perirectal swab collected at baseline, and at least one follow-up visit. The V4 hypervariable region of the 16S rRNA gene from bacterial DNA in each sample was PCR-amplified and sequenced on the MiSeq platform. Sequencing results were then processed with the *mothur* bioinformatics pipeline to classify bacterial taxa present in each sample. Taxa typically associated with the skin microbiota were removed. The primary outcome was acquisition of VRE and/or rGNB within 14 days. Exposures of interest included patient and microbiota characteristics. RESULTS/ANTICIPATED RESULTS: Among 61 patients, 18 (30%) acquired AROs within 14 days of enrolment (3 VRE, 13 rGNB, 2 both) (Table 1). The baseline microbiota features differed significantly in those who acquired a new ARO. Of the major 8 phyla found across samples, patients who acquired an ARO were depleted in the number of phyla present (5.74 ± 1.20 vs 5.06 ± 1.43 ; $p = 0.037$) (Fig. 1). The log₁₀-transformed relative abundance of *Enterococcus* was enriched in patients who acquired an ARO (-0.32 ± 1.47) compared to those who did not (-1.68 ± 1.76 ; $p = 0.021$) (Fig. 2). Patients who did not acquire an ARO tended to harbour more butyrate-producing bacterial taxa and strict anaerobes, although the differences were not statistically significant (relative abundance of butyrate producer: 29.49 ± 22.09 vs 22.05 ± 17.76 ; anaerobes: 64.78 ± 23.54 vs 53.68 ± 27.61). DISCUSSION/SIGNIFICANCE OF IMPACT: Microbiota metrics calculated from perirectal samples are predictive of ARO acquisition. The clinical utility of perirectal samples thus warrants further assessment.

4259

Application of Design Sprint Methodology to Prototype a Proactive Outreach Tool for COPD Patients

Michael Cui¹, Lindsay Zimmerman, and Shashin Chokshi

¹University of Chicago

OBJECTIVES/GOALS: The primary objective of this study was to apply design sprint methodology to develop a proactive outreach tool prototype for patients with chronic obstructive pulmonary disease (COPD). METHODS/STUDY POPULATION: We utilized a 3-day process to align our team and key stakeholders behind answering the following question: “how might we empower COPD patients to understand their healthcare information, make decisions in partnership with their providers, and more easily manage their daily health?” On Day 1, we focused on understanding and defining the problem, and mapping the patient experience. On Day 2, we quickly brainstormed potential solutions, sketched our top ideas, and listed the solutions’ inherent assumptions. On Day 3, we created a prototype of our top solution and storyboarded each step of the prototype experience to review its potential usability and comprehensibility with patients. RESULTS/ANTICIPATED RESULTS: At the end of the design sprint, our team developed a prototype centered around personalized communication between COPD patients and providers. The prototype focuses on augmenting the current transitional care management (TCM) workflow in the post-discharge period. We are working to further develop the prototype prior to formal testing with care coordinators and patients. We anticipate that our prototype

will assist in automating the current TCM workflow and facilitate contact with more patients post-discharge. DISCUSSION/SIGNIFICANCE OF IMPACT: Contact with patients is currently challenging due limited resources and the time sensitive nature of the TCM requirements. Automated patient outreach may be especially effective in engaging patients on a large scale, while also minimizing time and resources needed from healthcare staff.

4035

Astrocyte LDLR-Related Protein 1 Increases Cytokine Sensitivity – The Role of Glia in Recovery after Brain Damage

Sadiya Ahmad¹, Pamela Reed, Shane Sprauge, and Naomi Sayre

¹University of Texas Health Science Center San Antonio

OBJECTIVES/GOALS: The limited treatment options for ischemic stroke patients have resulted in stroke being a leading cause of death and the primary cause of long-term disability in the U.S. Finding effective treatment options requires a better fundamental understanding of the ongoing processes that contribute to poor long-term outcome. METHODS/STUDY POPULATION: Expression of Apolipoprotein E4 predisposes stroke patients to poor long-term outcome. This study aims to test one possible mechanism by which ApoE4 contributes to cognitive decline after stroke. Here, we examine the effect of a major ApoE4 receptor, low-density lipoprotein receptor related protein 1 (LRP1) on sensitivity to stress in astrocytes. LRP1 binds and moves extracellular ligands and plasma membrane proteins into the endocytic system. Others have shown that LRP1 regulates cell-surface TNF receptor (TNFR1) in non-astrocytic cells. We propose That LRP1 similarly regulates TNFR1 in the central nervous system to attenuate inflammatory response after stroke. Studies have shown that ApoE4 slows the recycling of endocytic LDL receptors. We hypothesize that ApoE4 inhibits the ability of LRP1 to remove TNFR1 from the plasma membrane. This is expected to increase cytokine sensitivity, resulting in worse outcome after stroke. We investigated the effect of LRP1 on astrocyte TNF α signaling and response in immortalized ApoE null mouse astrocytes subjected to lentiviral-mediated knockdown of LRP1. The astrocyte response to TNF α stimulation was tested in a time dependent manner using Western blotting of NF κ B pathway components, which are the downstream mediators of TNF α signaling. We also tested astrocyte viability after prolonged TNF α stimulation using Alamar Blue reagent. We found that LRP1 deficient cells have increased phosphorylation of NF κ B upon TNF α stimulation, and that loss of LRP1 resulted in significant loss of astrocyte viability after prolonged stimulation. RESULTS/ANTICIPATED RESULTS: Altogether, our results indicate that loss of LRP1 renders astrocytes more sensitive to TNF α . Future experiments will focus on testing the influence of LRP1 on recovery after middle cerebral artery occlusion in mice. DISCUSSION/SIGNIFICANCE OF IMPACT: These studies will elucidate how astrocyte-LRP1 contributes to outcome after stroke, and helps us to understand one potential way that ApoE4 exerts pathological effects. A better understanding of the long-term processes after stroke will allow identification of therapies which improve the morbidity and mortality associated with stroke. CONFLICT OF INTEREST DESCRIPTION: NA.