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Reporting Summary

Nature Portfolio wishes to improve the reproducibility of the work that we publish. This form provides structure for consistency and transparency in reporting. For further information on Nature Portfolio policies, see our Editorial Policies and the Editorial Policy Checklist.

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For	ll statistical analyses, confirm that the following items are present in the figure legend, table legend, main text, or Methods section.
n/a	Confirmed
	The exact sample size (n) for each experimental group/condition, given as a discrete number and unit of measurement
	X A statement on whether measurements were taken from distinct samples or whether the same sample was measured repeatedly
	The statistical test(s) used AND whether they are one- or two-sided Only common tests should be described solely by name; describe more complex techniques in the Methods section.
	X A description of all covariates tested
	🗴 A description of any assumptions or corrections, such as tests of normality and adjustment for multiple comparisons
	A full description of the statistical parameters including central tendency (e.g. means) or other basic estimates (e.g. regression coefficient) AND variation (e.g. standard deviation) or associated estimates of uncertainty (e.g. confidence intervals)
	For null hypothesis testing, the test statistic (e.g. <i>F</i> , <i>t</i> , <i>r</i>) with confidence intervals, effect sizes, degrees of freedom and <i>P</i> value noted Give P values as exact values whenever suitable.
	For Bayesian analysis, information on the choice of priors and Markov chain Monte Carlo settings
	For hierarchical and complex designs, identification of the appropriate level for tests and full reporting of outcomes
	x Estimates of effect sizes (e.g. Cohen's <i>d</i> , Pearson's <i>r</i>), indicating how they were calculated
	Our web collection on statistics for biologists contains articles on many of the points above.

Software and code

Policy information about availability of computer code

Data collection

Zeiss ZEN Blue (3.7.97.07000), PerkinElmer Harmony v4.9, Single-Cell Technologies BIAS (September 2023), Leica LMD Beta10, Orbitrap Astral Tune Application 1.0.100.40, Cellpose 2.0, scPortrait, ConvNext, huggingface v4.26

Data analysis

DIA-NN v1.8.1, , directLFQ v0.2.19, R v4.4.1, limma v3.60.3, PCAtools v2.16.0, WebGestalt 2024, umap-learn 0.5.6, scikit-learn 1.4.2, pandas 2.2.1, numpy 1.26.4

For manuscripts utilizing custom algorithms or software that are central to the research but not yet described in published literature, software must be made available to editors and reviewers. We strongly encourage code deposition in a community repository (e.g. GitHub). See the Nature Portfolio <u>guidelines for submitting code & software</u> for further information.

Data

Policy information about availability of data

All manuscripts must include a data availability statement. This statement should provide the following information, where applicable:

- Accession codes, unique identifiers, or web links for publicly available datasets
- A description of any restrictions on data availability
- For clinical datasets or third party data, please ensure that the statement adheres to our policy

The mass spectrometry proteomics data have been deposited to the ProteomeXchange Consortium via the PRIDE partner repository with the dataset identifier PXD054440. The R and Python code used in this study is documented at https://github.com/MannLabs/Proteotoxicity. Imaging data of explant and morphological clusters has been deposited to BioStudies with the identifier S-BIAD1523.

Research involving human participants, their data, or biological material

Policy information about studies with <u>human participants or human data</u>. See also policy information about <u>sex, gender (identity/presentation), and sexual orientation</u> and <u>race, ethnicity and racism</u>.

Reporting on sex and gender

Clinical metadata including sex are summarised in Extended Data Fig. S1A. Both male and female samples were included without prior selection due to the small cohort size.

Reporting on race, ethnicity, or other socially relevant groupings

Socially constructed categorization was not taken into consideration. Patient material was sampled in Odense, Denmark, and Aachen, Germany, and represent the patient cohort in the larger region.

Population characteristics

Clinical metadata including age, alcohol consumption, diabetes and BMI are summarised in Extended Data Fig. S1A. Individual samples were explicitly de-identified to to comply with European and country-specific General Data Protection Regulation (GDPR).

Recruitment

Odense patient recruitment – Patients were recruited through the Danish patient organization (Alfa-1 Denmark) and clinical departments for liver and lung diseases as part of a cohort study. The cohort was designed to investigate liver health among non-pregnant adults (minimum age 18 years) diagnosed with AATD of any genotype and carrier status. This specific study includes 16 individuals diagnosed with Pi*ZZ who consented to undergo the procedure. Participants without a history of liver transplant or decompensated cirrhosis were offered a percutaneous liver biopsy. The patients underwent liver core needle biopsies at Odense University Hospital (OUH) between 2017 and 2021.

Aachen patient recruitment – The recruitment of patients is described in detail in reference 34. Of this cohort, the present study includes 19 individuals diagnosed with Pi*ZZ, of whom 14 underwent liver core needle biopsies due to medical indication and five received a liver transplantation due to end-stage liver disease.

Ethics oversight

Odense: The study was approved by the Danish Ethical Committee (S-20160187), and participants gave informed consent prior to enrollment. Aachen: thical approval was provided by the institutional review board of Aachen University (EK 173/15). All participants provided written informed consent and were treated following the ethical guidelines of the Helsinki Declaration (Hong Kong Amendment) as well as Good Clinical Practice (European guidelines).

Note that full information on the approval of the study protocol must also be provided in the manuscript.

Field-specific reporting

Please select the one below	\prime that is the best fit for your research.	. If you a	are not sure, read the appropriate sections before making your selection.	
x Life sciences	Behavioural & social sciences	E	Ecological, evolutionary & environmental sciences	

For a reference copy of the document with all sections, see nature.com/documents/nr-reporting-summary-flat.pdf

Life sciences study design

All studies must disclose on these points even when the disclosure is negative.

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Sample size Thirty-four of 35 available patient Pi*ZZ samples were included. One sample was excluded due to its outlier position on a PCA.

MS samples were included if the number of protein groups exceeded (a) the mean minus 1.5 standard deviations for DVP, resulting in 5.9% (6/102) dropouts; (b) the mean minus 0.5 standard deviations for DVP-ML samples; (c) a fitted logarithmic curve minus 1.5 interquartile ranges for scDVP, taking the relation between size and proteomic depth into account, resulting in 15.4% (40/259) dropouts. The lower cutoffs were selected after manual inspection of the data distribution. For morphology-guided DVP, one explant section was removed from analysis due to too few AAT-positive cells in the section.

Replication

Data exclusions

Only one technical replicate was used and analysed per patient biopsy (see Supplementary Table S1).

Randomization

Materials & experimental systems

Involved in the study

Eukaryotic cell lines

x Antibodies

Patient samples were processed in random order. MS acquisition was not randomized and MS performance was tightly monitored with HeLa QC runs before, during, and after each experimental block.

Blinding

Cell selection was automated and driven by k means clustering or convolutional neural networks without human input. Investigators were blinded for laser microdissection. Data analysis was not blinded to ensure correct handling of biological positive controls.

Reporting for specific materials, systems and methods

Methods

X

n/a | Involved in the study

Flow cytometry

ChIP-seq

We require information from authors about some types of materials, experimental systems and methods used in many studies. Here, indicate whether each material, system or method listed is relevant to your study. If you are not sure if a list item applies to your research, read the appropriate section before selecting a response.

Palaeontology and a	archaeology MRI-based neuroimaging					
Animals and other of	Animals and other organisms					
Clinical data	Clinical data					
Dual use research o	Dual use research of concern					
X Plants						
Antibodies						
Antibodies used	PRIMARY: Mouse IgG1 monoclonal AAT 2C1 (1:200, Hycult HM2289); Rabbit recombinant anti-pan cadherin [EPR1792Y] (1:200, Abcam ab51034)					
	SECONDARY: Goat anti-mouse IgG1 (1:400 Invitrogen A21127); Goat anti-rabbit AF647 (1:400, Invitrogen A21245)					
Validation	The mouse anti-human AAT monoclonal antibody 2C1 was tested positive in an ELISA assay according to the manufacturer: https://www.hycultbiotech.com/product/alpha-1-antitrypsin-human-mab-2cl/. The rabbit monoclonal anti-pan cadherin antibody [EPR1792Y] was tested by the manufacturer Abcam (ab51034) in Western blot on recombinant protein, by flow cytometry against an isotype control, and through Ol-RD scanning.					
Clinical data						
olicy information about <u>cl</u>	linical studies					
all manuscripts should comply	with the ICMJEguidelines for publication of clinical research and a completed CONSORT checklist must be included with all submissions.					
Clinical trial registration	N/A					
Study protocol	N/A					
Data collection	N/A					
Outcomes	N/A					
Plants						
Seed stocks	N/A					
Novel plant genotypes	N/A					
Authentication	N/A					