

**Td92, an outer membrane protein of
Treponema denticola, induces
osteoclastogenesis via PGE₂ mediated
RANKL/OPG regulation**

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**Td92, an outer membrane protein of
Treponema denticola, induces
osteoclastogenesis via PGE₂ mediated
RANKL/OPG regulation**

Directed by Professor Yun-Jung Yoo

**The Master's Thesis Submitted to the
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Minyoung Kim

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저에게 좋아하고 궁금해 하던 분야를 공부하는 기쁨을 누릴 수 있게 도움을 주신 유윤정 지도 교수님께 마음깊이 감사를 드립니다. 꾸준한 운동으로 건강한 자기관리의 모범을 보이신 차정현 교수님, 저의 건강 또한 많이 챙겨주셔서 늘 든든했습니다. 부드러운 다독임과 날렵한 지적으로 더 좋은 논문이 태어날 수 있게 도움을 주신 서울대 치대 최봉규 교수님께도 깊은 감사를 드립니다. 미국에서 꼭 한번 뵙고 싶습니다. 우리 실험실의 분위기 메이커 박은정 포닥 선생님, 양과즙으로 매일 거둬나고계신 홍규오빠, 토종 한국인임이 밝혀진 동기 진문이, 언제나 어디서나 주님 앞에 무릎 꿇어 기도하고있다는 성환이, 위력이 가히 위력적인 성실한 성일이, 다들 고맙고 또 고마워요. 차 한잔의 여유를 즐길 줄 아는 멋진 효진, 유럽학회의 보따리 친구였던 단아한 아란, 뭐든지 다 있어보이는 생화학방의 귀염둥이 주아와 지희, 아래층의 한 미모하시는 제진아, 이주현 선생님, 벌써 보고 싶어집니다.

단비 같은 말씀으로 주말마다 저의 지친 영혼을 살어나게 하신 최용태 목사님, 똑소리나는 우리 이은숙 전좌님, 어두운 곳을 좋아하는 것 같지만 은근 야기자기한 워비스트미디어팀의 팀원들, 기도로 함께해줘서 고맙고 사랑합니다.

사랑하는 베프 수영아, 결혼축하해!! 우린 결혼도 비슷하게 하는구나~

영화 죽은시인의사회의 한국판 주인공이라 할 수 있는 김성일 선생님. 학생들에 대한 식지 않는 가르침의 열정은 대한민국에서 가장 뜨거우실 것 같습니다. 학생으로서 느꼈던 그 감동은 10년이 지난 지금도 생생합니다. 선생님께 이 논문을 드릴 수 있어 기쁩니다.

지병인 이비인후과 질환이 나올 수 있게 저의 석사기간동안 정말 신경 많이 써주신 세브란스 병원 이비인후과의 명의 김창훈 교수님께도 감사를 잊을 수 없습니다.

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막내딸의 긴 공부인생을 줄곧 기도로 응원해주신 사랑하는 엄마, 아빠., 두 분의 아낌없는 지원으로 제 능력으로는 경험할 수 없었던 더 큰 세상에서 많은 것을 배울 수 있었습니다. 사랑해요 엄마, 아빠~* 언니와 오빠, 그리고 완전 귀여운 조카 준혁이에게도 그 동안 고맙다는 말 제대로 못했는데 저를 많이 배려해주고 이해해줘서 고마워요. 우리집의 엔돌핀 준혁이는 고모에게 큰 힘이 되었어요~ 엄마, 아빠 못지않게 저를 많이 사랑해주신 할아버지, 할머니께도 이 논문을 자랑스럽게 드리고 싶습니다. 그리고 이제 곧 저의 시아버님, 시어머님, 도련님이 되실 대전의 아버님, 어머님, 호준이, 그리고 시할머님, 시할아버님. 논문 때문에 자주 못 뵈러 가서 제 얼굴 까먹으셨을 텐데 곧 보여드리러 갈게요~

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TABLE OF CONTENTS

ABSTRACT (In English)	1
I. INTRODUCTION	4
II. MATERIALS AND METHODS	9
1. Chemicals	9
2. Preparation of Td92	10
3. SDS-PAGE analysis	11
4. Preparation of primary osteoblasts	12
5. Osteoclast formation assay	13
6. ELISA for cytokines and PGE ₂	14
7. Statistical analysis	15
III. RESULTS	17
1. Effect of Td92 on osteoclast formation	17
2. Effect of Td92 on RANKL and OPG expression in osteoblasts ..	19
3. Effect of Td92 on PGE ₂ expression in osteoblasts	22
4. Effect of NS398 and indomethacin on RANKL/OPG expression	

altered by Td92	22
5. Effect of NS398 and indomethacin on osteoclast formation induced by Td92	25
IV. DISCUSSION	26
V. REFERENCES	36
ABSTRACT (In Korean)	46

LIST OF FIGURES

Figure 1. Expression of Td92 in *Escherichia coli*

Figure 2. Effect of Td92 on osteoclast formation

Figure 3. Effect of Td92 on RANKL and OPG expression in osteoblasts

Figure 4. Effect of NS398 and indomethacin on Td92-regulated RANKL and OPG expression in osteoblasts

Figure 5. Effect of NS398 and indomethacin on Td92-induced osteoclast formation

Figure 6. Td92 induces osteoclastogenesis by regulating RANKL/OPG/PGE₂

ABSTRACT

Td92, an outer membrane protein of *Treponema denticola*, induces osteoclastogenesis via PGE₂ mediated RANKL/OPG regulation

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(Directed by Professor Yun-Jung Yoo)

Periodontitis is a chronic inflammatory disease in periodontium which causes significant alveolar bone loss. Osteoclasts are bone-resorbing multinucleated cells. Osteoblasts regulate osteoclast differentiation by receptor activator of NF- κ B ligand (RANKL) and osteoprotegerin (OPG) expression.

Treponema denticola is one of the oral bacteria involved in periodontitis. Td92, Tp92 homolog of *T. denticola*, is a surface-exposed outer membrane protein that stimulates production of various proinflammatory mediators. However, the role of Td92 on alveolar bone resorption still remains unclear. To elucidate the role of Td92 on bone resorption, the effect of Td92 on osteoclast differentiation was evaluated in co-cultures of mouse calvariae-derived osteoblasts and bone marrow cells. The expression of RANKL, OPG, and PGE₂ in osteoblasts was estimated by ELISA. Td92 induced osteoclast formation in co-cultures. In osteoblasts, RANKL and PGE₂ expression was up-regulated while OPG expression was down-regulated by Td92. OPG inhibited Td92-induced osteoclast formation. NS398 or indomethacin, prostaglandin synthesis inhibitors, also inhibited Td92-induced osteoclast formation. The effect of Td92 on expressions of RANKL, OPG, and PGE₂ in osteoblasts was blocked by NS398 or indomethacin. These results suggest that Td92 promotes osteoclast formation through the regulation of RANKL and OPG productions via PGE₂ dependent mechanism.

Key words: *Treponema denticola*, Td92, osteoclast formation, periodontitis

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I. INTRODUCTION

Osteoclasts are tartrate-resistant acid phosphatase (TRAP) positive multinucleated cells with bone-resorbing activity. The osteoclast formation is induced by receptor activator of NF- κ B ligand (RANKL) and macrophage colony-stimulating factor (M-CSF) expressed by osteoblast/stromal cells (1, 2). In bone, RANKL is an essential cytokine for osteoclastogenesis and it presents

in soluble- and membrane-bound form (3). RANKL binds to RANK, a receptor of RANKL, expressed on osteoclast precursors and by this interaction, osteoclast precursors differentiate into osteoclasts in the presence of macrophage-colony stimulating factor (M-CSF). Osteoprotegerin (OPG) produced by osteoblasts blocks osteoclastogenesis by interfering RANKL-RANK interaction (4). The levels of RANKL and OPG expression are regulated by several bone-resorbing factors such as $1\alpha,25\text{-dihydroxyvitamin D}_3$ ($1\alpha,25(\text{OH})_2 \text{D}_3$), parathyroid hormone (PTH), prostaglandin E_2 (PGE_2) and lipopolysaccharide (LPS).

Periodontitis is a chronic inflammatory disease in the periodontal tissue with bacterial etiology. Alveolar bone is a periodontal tissue to support teeth. Also, alveolar bone loss observed in periodontitis is a non-reversible condition induced by stimulation of osteoclast formation. Therefore, understanding the mechanisms of bone resorption induced by periodontal pathogens can be an important knowledge for the prevention and treatment of periodontitis. It was reported that many of periodontal pathogens, such as

Actinobacillus actinomycetemcomitans, *Porphyromonas gingivalis*, and *Prevotella nigrescens* show the activity of bone resorption. LPS of *P. gingivalis* or *P. nigrescens* also have been implicated as an inducer of osteoclast formation in periodontitis (5, 6). *A. actinomycetemcomitans* has several osteoclastogenic factors such as LPS, capsular polysaccharides (CPs), and chaperone (cpn60) (7). Therefore, various components of oral bacteria including LPS, appear to be a potent activator of osteoclastogenesis in periodontitis (8-11).

An elevated level of *Treponema* species in subgingival plaque of periodontitis patients supports the hypothesis that *Treponema* species play an important role in periodontitis. There are 10 species of oral spirochetes which can be cultivated up to present time and *Treponema denticola* is one them. *T. denticola* is known to be involved in the early-onset periodontitis, chronic periodontitis, and necrotizing ulcerative gingivitis (12). *T. denticola* has various virulence factors such as proteolytic enzymes and cytolytic factors which involved in pathogenesis of periodontitis (13-17). Tp92 is a 92kDa *T.*

pallidum antigen that resides on the treponemal surface and it has been reported to have immunoprotective capabilities of inducing opsonization and phagocytosis, thus may be a useful vaccine candidate for syphilis (18). Tp92 homologs (88 to 92 kDa) were recently reported as highly conserved surface proteins of four representative oral spirochetes (*Treponema denticola*, *T. lecithinolyticum*, *T. maltophilum*, and *T. socranskii* subsp. *socranskii*) and they were shown to have amino-acid sequence identities of 37.9 to 49.3% and similarities of 54.5 to 66.9% to Tp92 (19). Tp92 homologs have been demonstrated to contribute to cell attachment, inflammation, and tissue destruction by inducing various proinflammatory factors. Td92 is a Tp92 homolog of *T. denticola* that is a highly conserved surface protein of *T. denticola* (19). Td92 is considered to be involved in cytopathogenic process of periodontal disease through binding to epithelial cells and inducing the expression of pro-inflammatory factors such as Interleukin (IL)-6, IL-8, COX-2, and PGE₂ in human monocytic cell line and periodontal ligament (PDL) cells (19). However, it is not yet to be identified for the role of Td92 in bone

resorption. Therefore, the effect of Td92 on osteoclast formation was evaluated in co-cultures of mouse calvaria-derived osteoblasts and bone marrow cells. Also, the involvement of RANKL, OPG, and PGE₂ in Td92-induced osteoclast formation was evaluated in osteoblast culture.

II. MATERIALS AND METHODS

1. Chemicals

LPS (*Escherichia coli* O26:B6), Indomethacin, CellLytic™ M, and Protease Inhibitor Cocktail were purchased from Sigma (St. Louis, MO, USA). NS398 was purchased from Calbiochem (San Diego, CA, USA). Human rM-CSF and Human rOPG were obtained from Peprotech (Rocky Hill, NJ, USA). Collagenase was purchased from Wako pure Chemicals (Osaka, Japan). Minimum Essential Medium alpha (α -MEM), Dispase, Fetal bovine serum (FBS), Dulbecco's phosphate-buffered Saline (PBS), 100X Antibiotic-Antimycotic (Ab), and 25% Trypsin-EDTA were purchased from Gibco BRL (Grand Island, NY, USA). The chemicals used for TRAP staining is as follows: Sodium Acetate Trihydrate, Fast Red Violet LB Salt, and Naphthol AS-MX phosphate were purchased from Sigma (St. Louis, MO, USA). Sodium (+)- Tartrate Dihydrate was purchased from Wako pure Chemicals (Osaka, Japan). Acetic Acid was purchased Junsei Chemicals (Tokyo, Japan).

Mice were obtained from Sankyo Laboratory Animal Center (Tokyo, Japan). Animal studies were performed after the experimental protocols approved by animal ethics committee of Yonsei University College of Dentistry.

2. Preparation of Td92

Recombinant Tp92 homolog of *T. denticola* (Td92) was thankfully given from B.K. Choi in Seoul National University. The Tp92 gene homolog of *T. denticola* was amplified from the genomic DNA by PCR. PCR was performed in a total volume of 50 μ l containing 15 pmol of each primer, 1.25 U of Ex *Taq* polymerase (Perkin Elmer Cetus, Foster City, CA). The PCR products were cloned in *E. coli* by using the TA cloning vector pCR2.1-TOPO, and the inserts were isolated and cloned in *E. coli* M15 by using the expression vector pQE-30 as described previously (20). After the induction of *E. coli* with 1mM isopropyl- β -D-thiogalactopyranoside (IPTG), histidine-tagged recombinant proteins were purified by sonication, solubilization with a detergent, and subsequent renaturation, followed by affinity chromatography using nickel-

nitrilotriacetic acid agarose (Qiagen, Valencia, CA) as described previously (20). Endotoxin present in *E. coli*, which may potentially contaminate the recombinant proteins, were removed using polymyxinB-agarose according to the instructions of the manufacturer (Sigma chemicals Co., St. Louis, MO, USA). The endotoxin decontamination of Td92 was verified using CHO/CD14/TLR4cells.

3. SDS-PAGE and immunoblot assay

The expression of the Td92 in *E. coli* was verified by immunoblotting using a monoclonal mouse antihistidine Ab (Qiagen, Alencia, CA, USA). *E. coli* M15 cells transformed with the recombinant plasmids were cultured in Luria-Bertani broth containing antibiotics and induced with IPTG. The *E. coli* lysates (20 µg of protein) were subjected to SDS-PAGE and subsequently transferred onto nitrocellulose membranes. The membranes were blocked with 2% bovine serum albumin (BSA) for 1h and allowed to react with antihistidine Ab for 1h. After being washed with PBS-0.2% Tween 20, the membranes were allowed

to react with alkaline phosphatase-labeled anti-mouse IgG for 1 h. After being washed with PBS-0.2% Tween 20, the membranes were developed with 5-bromo-4-chloro-3-indolylphosphate (165 $\mu\text{g/ml}$) and nitroblue tetrasolium (330 $\mu\text{g/ml}$). The expected molecular size of the prepared Td92 was approximately 92kDa (Fig. 1).

4. Preparation of primary osteoblasts

Mouse osteoblasts were isolated and cultured as described previous studies (21, 22). Twenty-five to thirty newborn ddY mice (1-day-old) were used for one preparation of osteoblasts. Mice were sacrificed in 70% alcohol and calvariae including frontal and parietal bones were detached anatomically. Calvariae were then collected in α -MEM and washed in 10 ml of α -MEM containing 0.2% collagenase and 0.1% dispase briefly to remove debris and blood cells. Calvariae were incubated in collagenase-dispase solution for 10 min at 37°C, in a 250 x g shaking water bath. The first supernatant was discarded and 10 ml of fresh solution was added and incubated at 37°C, in a 250 x g shaking water

bath for 20 min. The supernatant was collected and further incubation with fresh solution was repeated for four times. The last four supernatants were collected as a primary osteoblast population. Primary osteoblasts were cultured in α -MEM supplemented with 10% FBS and 1% Ab mixture for 3 days. Cells were detached by trypsin-EDTA, centrifuged, suspended in 90% FBS and 10% dimethyl sulfoxide, and stored at -80°C .

5. Osteoclast formation assay

Primary osteoblasts stored at -80°C were cultured in α -MEM supplemented with 10% FBS and 1% Ab. Bone marrow cells were obtained from tibiae of 6-wk-old male ddY mice and cultured in the presence of M-CSF (50 ng/ml) for 16 hours prior to co-culture. Primary osteoblasts (8×10^3 cells) were co-cultured with bone marrow cells (8×10^4 cells) for 6 days in 200 μl α -MEM containing 10% FBS and 1% Ab in 96-well plates (NUNC, Denmark). Co-cultures were treated with 1-12.5 $\mu\text{g/ml}$ Td92 or 0.001-1 $\mu\text{g/ml}$ LPS in the absence or presence of OPG (100 ng/ml), NS398 (1 μM) or indomethacin (1

μM). The medium was refreshed on 3rd day. Osteoclast formation was evaluated by TRAP, a marker enzyme of osteoclasts, staining. TRAP staining was performed as described previously (23). Cells were fixed with 10% formaldehyde and with ethanol/acetone (1:1) solution. 100 μl of TRAP staining solution was added to each well and stained for 5 min. TRAP positive multinucleated cells containing more than 3 nuclei were counted as osteoclasts. The results obtained from a typical experiment of three independents are expressed as the mean \pm SD of three cultures.

6. ELISA for cytokines and PGE₂

Primary osteoblasts (2×10^4 cells) were cultured in α -MEM containing 10% FBS and 1% Ab medium in 48-well culture plate until confluence. Cells were then further incubated in the presence or absence of Tp92 homolog (10 $\mu\text{g}/\text{ml}$) or LPS (0.01 $\mu\text{g}/\text{ml}$) for 3 days. Some cultures were treated in combination with NS398 (1 μM) or indomethacin (1 μM). The cell lysates were harvested to determine the concentration of RANKL and culture supernatants were used

to determine the concentration of OPG or PGE₂. To collect cell lysates, cultures wells were washed with DPBS and treated with CellLytic™ M for 15 min. The collected cells were centrifuged at 16,000 x g for 15 min to pellet cellular debris. Each sample was quantified using Bio-Rad Protein Assay kit prior to ELISA. The results obtained from a typical experiment of three independents are expressed as the mean ± SD of two cultures.

7. Statistical analysis

Statistical analysis was performed by a Student's *t*-test of Sigma Plot 8.0 to express the difference between the two groups. *P* value < 0.05 was considered to be statistically significant.

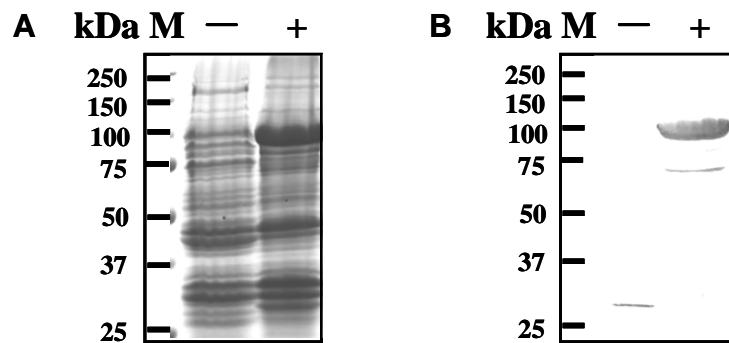


Figure 1. Expression of *td92* in *E. coli*. Expression of histidine-tagged recombinant proteins was analyzed by SDS-PAGE (10% polyacrylamide gel) (A) and immunoblot assay with anti-histidine antibody (B). M: Protein size marker; - : uninduced *E. coli* cell lysates; +: IPTG-induced *E. coli* cell lysates.

II. RESULTS

1. Effect of Td92 on osteoclast formation

To determine the effect of *T. denticola* Tp92 homolog (Td92) on osteoclast formation, co-cultures composed of osteoblasts and bone marrow cells were treated with Td92 (1 to 10 µg/ml), and TRAP-positive multinucleated cells were counted. Td92 stimulated the formation of TRAP-positive osteoclasts and the maximal number of osteoclasts was observed at 5-10 µg/ml (Fig. 2A and B). LPS, a positive control, showed the maximal effect of osteoclast formation at a concentration of 0.01-0.1 µg/ml (Fig. 2A and C). Endotoxin decontamination of Td92 was verified by heat treatment of Td92 at 99°C for 30 min. Heated Td92 (10 µg/ml) did not induce osteoclast formation while heated LPS still induced osteoclast formation in a similar manner with non-heated LPS (Fig. 2D), suggesting Td92 is a heat labile stimulator of osteoclast formation.

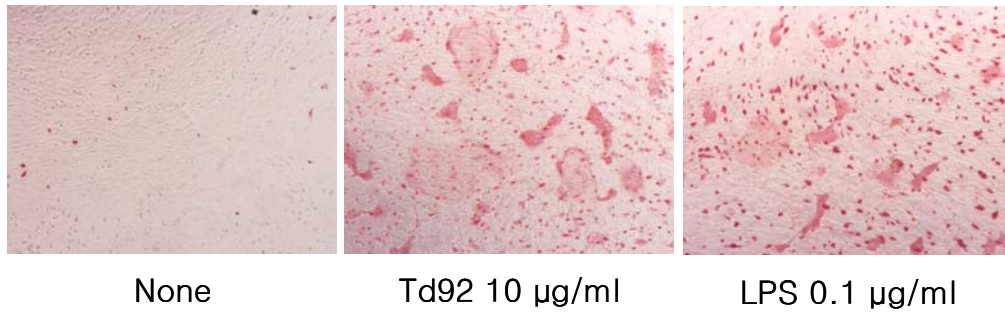
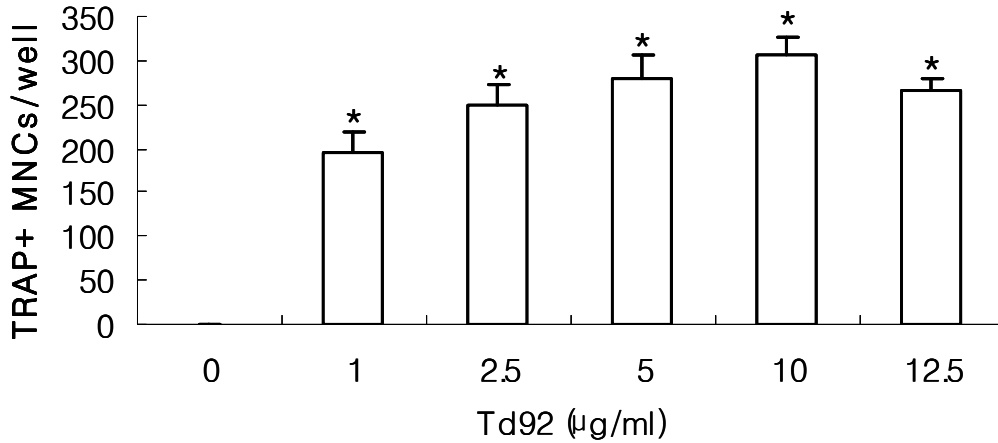
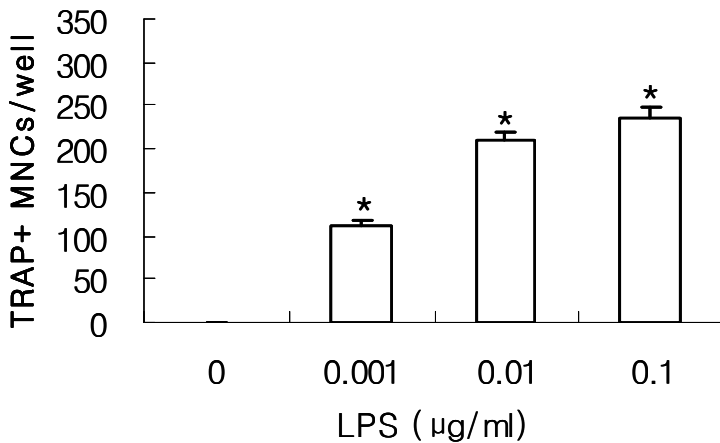
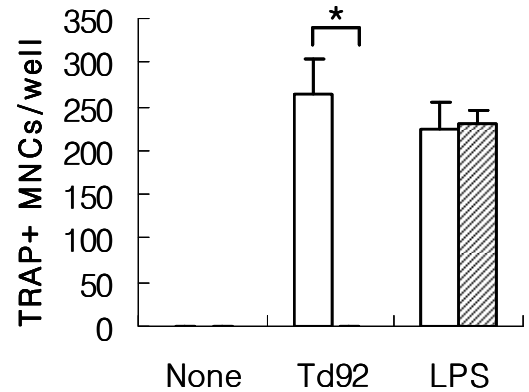
A**B****C****D**

Figure 2. Effect of Td92 on osteoclast formation. Mouse calvariae-derived osteoblasts and bone marrow cells were co-cultured in the absence or presence of Td92 (1-12.5 µg/ml) or LPS (0.001-0.1 µg/ml) for 6 days and the cells were stained for TRAP (A). TRAP-positive multinucleated cells containing more than three nuclei were counted as osteoclasts (B, C). *, $P < 0.05$ vs. none-treated cells. Co-cultures were treated with Td92 (10 µg/ml, open bar), heated Td92 (10 µg/ml, oblique lined bar), LPS (0.1 µg/ml, open bar) or heated LPS (0.1 µg/ml, oblique lined bar) for 6 days (D). TRAP-positive multinucleated cells containing more than three nuclei were counted as osteoclasts. *, $P < 0.05$ vs. Td92 or LPS treated-cells.

2. Effect of Td92 on RANKL and OPG expression in osteoblasts

In order to assess the effect of Td92 on RANKL and OPG expression, Td92 (10 µg/ml) or heated Td92 was treated in osteoblasts. Also, the levels of RANKL in cell lysates and OPG in culture supernatants were assayed by ELISA. Td92 increased RANKL expression similar to LPS and its expression was 4.7-fold higher compared to none-treated group (Fig. 3A). Heated Td92 did not increase RANKL expression. In contrast to Td92, heat treatment of LPS did not block the LPS-induced RANKL expression. Td92 decreased OPG expression similar to LPS and its expression was 2.4-fold lower compared to none-treated group (Fig. 3B). Heated Td92 recovered the Td92-induced OPG decrease. In contrast to Td92, heat treatment of LPS did not recover the LPS-induced down-regulated OPG expression (Fig. 3C). To confirm the involvement of RANKL in Td92- induced osteoclast formation, co-cultures were treated with Td92 in the presence or absence of OPG. The osteoclast formation stimulated by Td92 was completely inhibited by the addition of OPG (Fig. 3D). These results suggest that the expression level of RANKL/

OPG in osteoblasts is crucially involved in Td92-stimulated osteoclast formation.

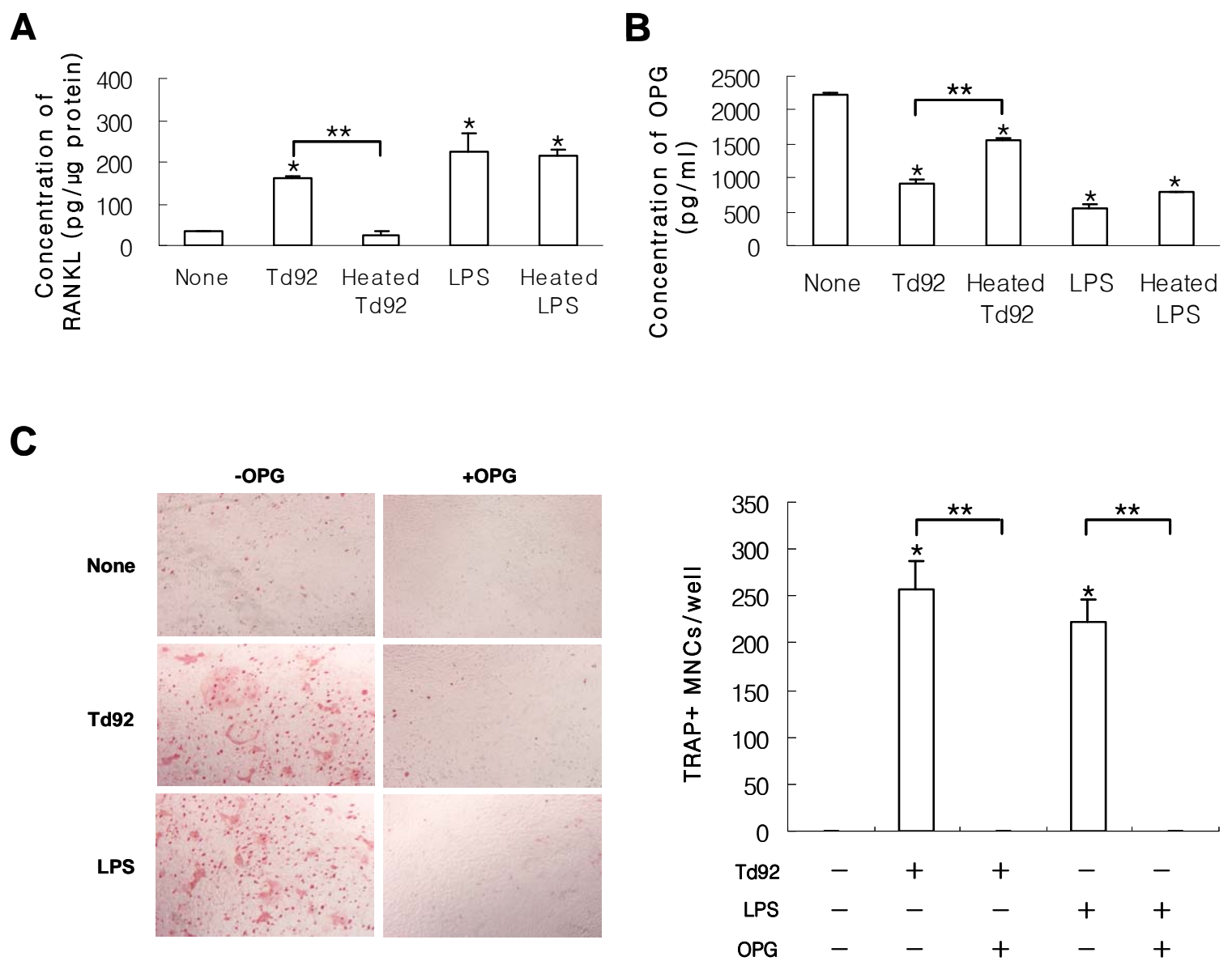


Figure 3. Effect of Td92 on RANKL and OPG expression in osteoblasts. Calvariae-derived osteoblasts were cultured with Td92 (10 $\mu\text{g/ml}$), heated Td92 (10 $\mu\text{g/ml}$), LPS (0.1 $\mu\text{g/ml}$) or heated LPS (0.1 $\mu\text{g/ml}$) for 3 days. The concentration of RANKL (A) and OPG (B) in cell lysates or culture supernatants, respectively, was determined by ELISA. *, $P < 0.05$ vs. none-treated cells, **, $P < 0.05$ vs. Td92 or LPS-treated cells. Osteoblasts and bone marrow cells were co-cultured with Td92 (10 $\mu\text{g/ml}$) or LPS (0.1 $\mu\text{g/ml}$) in the absence or presence of OPG (100 ng/ml) for 6 days (C). TRAP-positive multinucleated cells containing more than three nuclei were counted as osteoclasts. *, $P < 0.05$ vs. none-treated cells, **, $P < 0.05$ vs. Td92 or LPS-treated cells.

3. Effect of Td92 on PGE₂ expression in osteoblasts

In order to assess the involvement of PGE₂ in Td92- induced osteoclast formation, osteoblasts were stimulated with Td92 and the level of PGE₂ expression was measured by ELISA. Osteoblasts treated with Td92 or LPS showed increased level of PGE₂ expression (Fig. 4A). The increased PGE₂ expression, furthermore, was completely inhibited with the addition of NS398 or indomethacin, inhibitors of prostaglandin synthesis (Fig. 4A). The effect of NS398 or indomethacin on cell viability of osteoblasts was evaluated by MTT assay. NS398 or indomethacin did not affect cell viability (data not shown).

4. Effect of NS398 and indomethacin on RANKL/OPG expression altered by Td92

To investigate whether PGE₂ is involved in regulating RANKL and OPG expression in osteoblasts, osteoblasts were treated with Td92 in the absence or presence of NS398 or indomethacin. RANKL and OPG expression level was measured by ELISA. The RANKL expression induced by Td92 or LPS was

down-regulated by NS398 or indomethacin (Fig. 4B). Down-regulated OPG expression by Td92 or LPS was recovered by NS398 or indomethacin (Fig. 4C). These results indicate that RANKL and OPG expression altered by Tp92 in osteoblasts are closely related to the production of PGE₂.

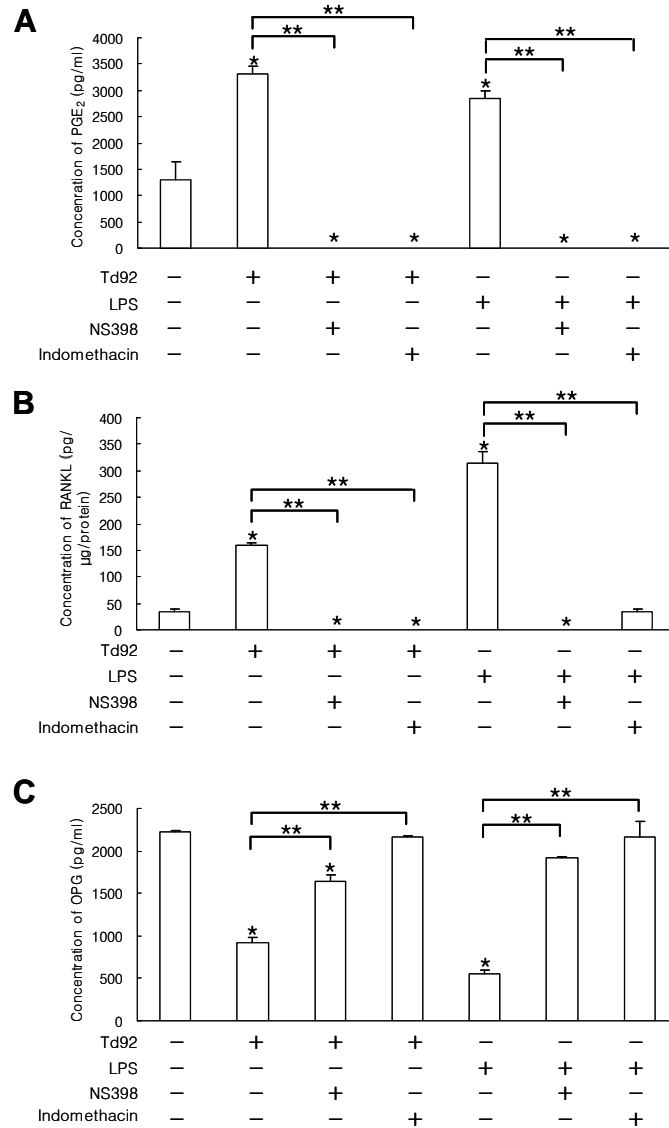


Figure 4. Effect of NS398 and indomethacin on Td92-regulated RANKL and OPG expression in osteoblasts. Osteoblasts were cultured with Td92 (10 $\mu\text{g/ml}$) or LPS (0.1 $\mu\text{g/ml}$) in the absence or presence of NS398 (1 μM) or indomethacin (1 μM). The cultures were incubated for 3 days, and the concentration of PGE₂ (A), RANKL (B), and OPG (C), was determined by ELISA. *, $P < 0.05$ vs. none-treated cells. **, $P < 0.05$ vs. Td92 or LPS-treated cells.

5. Effect of NS398 and indomethacin on osteoclast formation induced by Td92

To confirm the involvement of PGE₂ in Td92-induced osteoclast formation, Td92 was added to co-culture in the absence or presence of NS398 or indomethacin. Osteoclast formation induced by Td92 was inhibited by the addition of NS398 (1 μM) or indomethacin (1 μM) (Fig. 5). These results indicate that PGE₂ is critically involved in Td92-induced osteoclastogenesis.

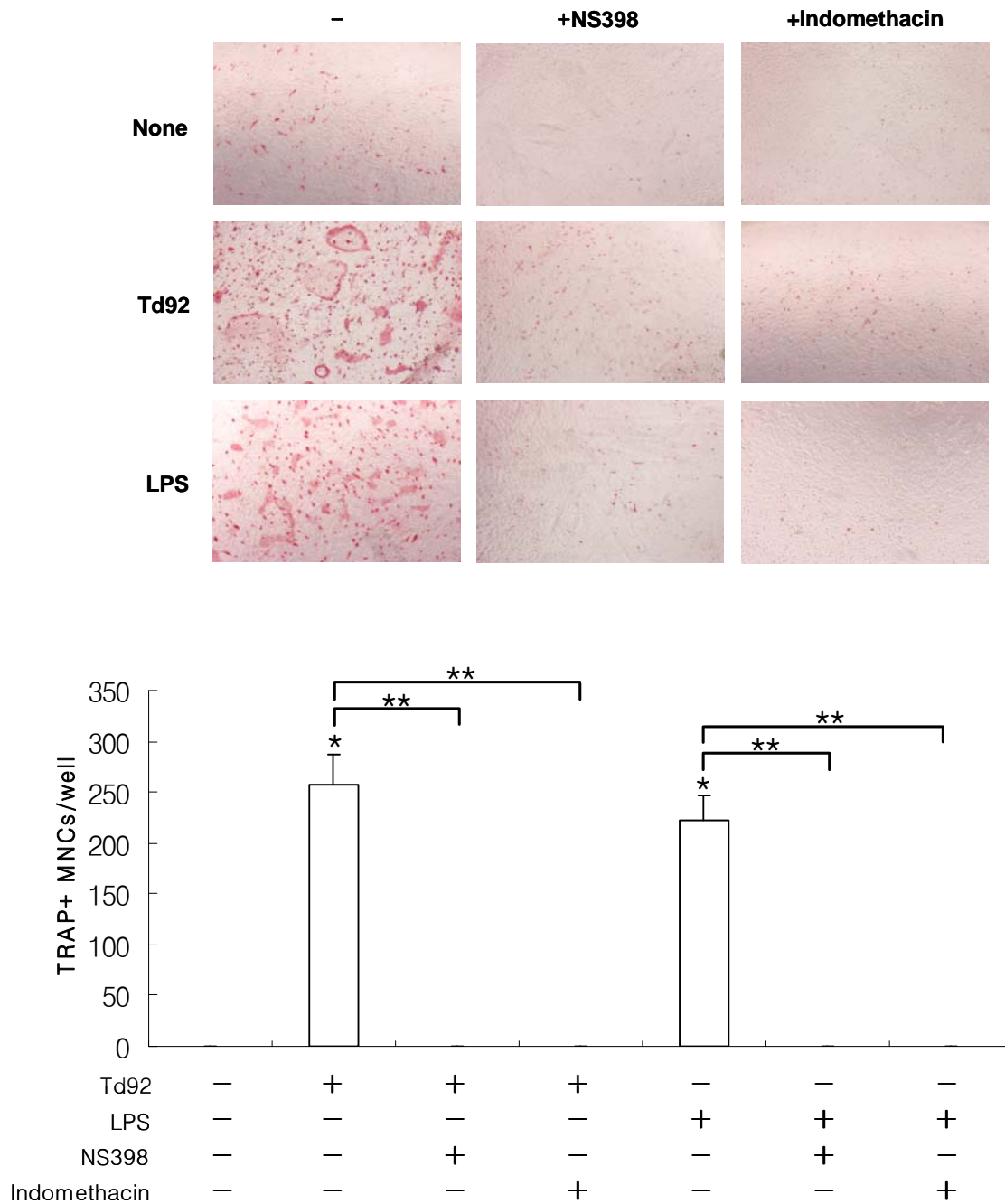


Figure 5. Effect of NS398 and indomethacin on Td92-induced osteoclast formation.

Osteoblasts and bone marrow cells were co-cultured with Td92 (10 $\mu\text{g/ml}$) or LPS (0.1 $\mu\text{g/ml}$) in the absence or presence of NS398 (1 μM) or indomethacin (1 μM) for 6 days.

TRAP-positive multinucleated cells containing more than three nuclei were counted as osteoclasts. *

, $P < 0.05$ vs. none-treated cells. **, $P < 0.05$ vs. Td92 or LPS-treated cells.

III. DISCUSSION

Td92 has been proposed to contribute to the inflammation and osteoclastogenesis by inducing the production of tumor necrosis factor (TNF), IL-1 β , IL-6, IL-8, and PGE₂ in THP-1 and PDL cells (19). Although it is possible that Td92 have osteoclastogenic ability by inducing osteoclastogenic cytokines, the exact role of Td92 on bone cells with the regulation of RANKL and OPG expressions remains unclear. For the first time, this study demonstrated that Td92 has stimulatory effect on osteoclastogenesis via RANKL/OPG/PGE₂ regulation.

Outer membrane proteins (OMPs) of *T. denticola* include major surface proteins (Msp), hemolysin/agglutinin, dentilisin, OppA, and HbpA/HbpB. Msp of *T. denticola* has pore-forming activity and adhesive activity (24, 25). Pore-forming activity of Msp was demonstrated via depolarization and increased conductance of the HeLa cell membranes (26). Msp retards Ca²⁺ release from endoplasmic reticulum stores and inhibits consequent Ca²⁺ influx by uncoupling store-operated channels (27). In the

animal model, Msp was elevated followed by greater Th-2-titled immune response and greater bone resorption was consequently observed in *T. denticola* infected model (28, 29). Dentilisin, chymotrypsin-like protease (CTLP), adheres to and lyses epithelial cells (30). Dentilisin also reduce proinflammatory cytokines such as IL-1 β , IL-6, and TNF- α by degradation and penetrates epithelial cell layer through disrupting transepithelial resistance (TER) by likely degradating the tight junctional proteins such as ZO-1 (31, 32). *T. denticola* OppA, a solute binding protein involved in peptide uptake and environmental signaling in a wide range of bacteria, was demonstrated to bind to plasminogen and fibronectin (33). These previous studies suggest that these OMPs of *T. denticola* are valuable candidate for the virulence factor with binding activity, cytotoxic/antigenic activity, and cell stimulatory activity during host-*T. denticola* interaction in periodontitis. In the present study, Td92, one of the OMPs of *T. denticola*, was demonstrated as a stimulator of osteoclastogenesis. Outer membrane proteins (OMPs) detected in bacterial outer membrane is one of the first class molecules implicated in host-

bacterium interaction in the process of bacterial infection. Therefore, Td92, with other OMPs, could contribute to tissue destruction in periodontitis.

LPS, a representative potent inflammatory stimulator of gram-negative bacteria, binds to Toll-like receptor 4 (TLR4) and induces myeloid differentiation protein 88 (MyD88), which then initiates the activation of downstream signaling pathways, leading to osteoclast formation through RANKL/OPG regulation in osteoblasts (8). Therefore, LPS is generally used as a positive control in the study of osteoclast formation of periodontitis. Prior to experiments, *E. coli* LPS from different manufactures and strains were tested and the maximal osteoclastogenic effect of LPS was seemed to shift in the range of 0.01 to 1 µg/ml depends on manufactures or the origins of *E. coli* (data not shown). In this study, 0.1 µg/ml of LPS from *E. coli* 026:B6 was used with maximal osteoclastogenic effect. When Td92 was compared with LPS, the osteoclastogenic activity of Td92 was similar to that of LPS.

Regarding periodontitis, RANKL and OPG are important cytokines which stimulates or inhibits bone destruction, respectively. Osteoblasts

infected with *P. gingivalis* exhibited elevated RANKL expression (34) and osteoblasts treated with LPS from *P. nigrescens* showed decreasing of OPG expression. The prevalence of *A. actinomycetemcomitans*, *P. gingivalis*, and *T. forsythensis* and level of RANKL in gingival crevicular fluid (GCF) of periodontitis patients was shown to be positively correlated. Other studies also demonstrated the increased RANKL expression level in GCF/gingival tissues of diseased sites is correlated to the incidence of periodontitis (35-38). RANKL has been proposed to be both Soluble- and membrane-bound form in association with osteoclastogenesis. Hofbauer *et al.* reported direct cell-to-cell contact with osteoblasts would allow continuous exposure of the membrane-bound RANKL to osteoclast precursors whereas the soluble form would explain the stimulatory effect of conditioned medium harvested from osteoblasts (4). Suda *et al.* reported direct cell-to-cell contact between osteoblasts and osteoclast progenitors is involved in osteoclastogenesis (39). Hikita *et al.* described the ectodomain shedding of membrane-bound RANKL (mRNA) *in vivo* by RANKL sheddases such as matrix metalloproteinase

(MMP14) (40). In order to determine which forms of RANKL expression is mainly involved in osteoclast formation by Td92, the level of RANKL in both supernatant and cell lysates harvested from osteoblast culture was examined. Cell lysates showed increased level of RANKL with Td92 treatment. However, culture supernatants did not show the detectable level of RANKL in any of treated groups (data not shown). These results indicate that Td92 primarily induces membrane-bound RANKL in osteoblasts. This study also showed that Td92 markedly decreased the expression level of OPG. To confirm the involvement of RANKL/OPG expressions in Td92-induced osteoclastogenesis, OPG, a decoy receptor of RANKL, was added in Td92 treated co-cultures. Osteoclast formation induced by Td92 was significantly inhibited by OPG. This result reveals that Td92 is a potent virulence factor in bone-resorptive periodontitis by inducing osteoclast formation through RANKL up-regulation and OPG down-regulation.

Due to the Td92 is a recombinant protein, this study verified the endotoxin decontamination by utilizing NF- κ B reporter cell line CHO/CD14/TLR4 cells

and heat-treatment. Td92 did not induce the NF- κ B reporter in CHO cells to express membrane CD25 through TLR4-dependent NF- κ B activation. However, LPS, a ligand of TLR4, induced NF- κ B-regulated CD25 expression in flow cytometry (data not shown). When Td92 was heat-treated, osteoclast formation was completely inhibited and heat treatment of Td92 reversed the RANKL/OPG regulative activity of Td92. However, heat-treated LPS still possessed the same osteoclast formation activity and RANKL/OPG regulatory activity of none-heated LPS. Therefore, the effect of Td92 on osteoclast formation or RANKL/OPG regulation could be concluded as the effect of recombinant protein, not LPS.

Recent studies have shown the increased GCF-PGE₂ concentrations at the site of periodontitis, which notify PGE₂ is one of the major pathogenic molecules in periodontitis (41, 42). In bone, PGE₂ has been demonstrated to play a critical role as a mediator of RANKL-dependent osteoclastogenesis (43). Elevation of PGE₂ in LPS-induced osteoblasts suppressed OPG expression (39). Therefore, correlation between PGE₂ and RANKL/OPG is one of the

main focuses in the study of alveolar bone resorption of periodontitis. In the present study, Td92 significantly induced PGE₂ production in osteoblasts and this induction was completely inhibited by NS398/indomethacin, the inhibitors of PGE₂ synthesis. In addition, up-regulated RANKL expression by Td92 was completely inhibited by NS398/indomethacin. In contrast, down-regulated OPG expression by Td92 was recovered by NS398/indomethacin. NS398/indomethacin also further inhibited osteoclast formation induced by Td92. These results indicate that PGE₂ is critically involved in Td92-induced osteoclastogenesis by regulating RANKL/OPG expression in osteoblasts.

In osteoblasts, activated TLR4, a signal-transducing receptor for LPS, induces COX-2 which then stimulates PGE₂ (39). In this pathway, PGE₂ inhibits OPG expression and this finally induces osteoclastogenesis (44). Other studies also reported that LPS activates several downstream signaling pathways, which cause osteoclast differentiation through expression of RANKL in osteoblasts (45, 46). Although similarities between Td92 and LPS in inducing osteoclastogenesis were shown in this study, the precise

mechanisms of Td92 on alveolar bone resorption in periodontitis need further investigation within other osteoblast signaling pathways. Moreover, to better understand coincidence or differences among the other Tp92 homologs and the roles of *Treponema* species in alveolar bone resorption of periodontitis, Tp92 homologs of other *Treponema* species should be further investigated.

This study showed that Td92 induces osteoclastogenesis by up-regulating RANKL expression and down-regulating OPG expression and the regulation of RANKL/OPG is mediated by PGE₂ (Fig 6.). Therefore, this effect of Td92 may contribute to alveolar bone resorption of periodontitis.

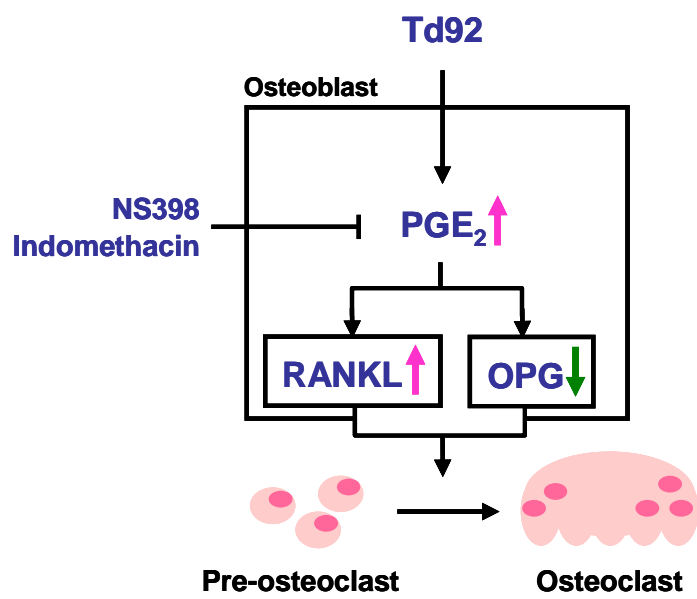


Figure 6. Td92 induces osteoclastogenesis by regulating RANKL/OPG/PGE₂.

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ABSTRACT (IN KOREAN)

*Treponema denticola*의 외막단백질인
Td92의 파골세포 형성 유도능

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김민영

치주염은 치주조직의 만성 염증성 질환으로 치조골의 흡수를 야기한다. 파골세포는 골 흡수 기능을 갖는 다핵의 세포이다. 조골세포는 파골세포 분화조절인자인 receptor activator or NF- κ B (RANKL)와 osteoprotegerin (OPG)를 발현하고 이를 통해 파골세포의 분화를 조절한다. *Treponema denticola*는 치주염을 일으키는 원인 균들 중 하나이다. *T. denticola*의 주외막단백질인 Tp92 homolog

(Td92) 는 다른 구강 나선균의 Tp92 homolog와 상동성을 보이며
염증인자와 세포결합에 관여하는 것으로 보고되어있으나 Td92의 치
조골의 흡수에 대한 영향은 아직 알려져 있지 않다. 본 연구에서는
Td92의 골흡수 유도능을 평가하기 위해 생쥐의 두개골에서 분리한
조골세포와 경골에서 분리한 골수세포를 혼합배양하여 Td92의 파골
세포의 형성능을 평가하였다. 또한 효소면역측정법을 이용하여 조골
세포에서 Td92의 RANKL, OPG와 PGE₂의 생성 유도능을 분석하였
다.

Td92는 혼합배양에서 파골세포의 형성을 농도의존적으로 유도하였
다. Td92는 조골세포의 RANKL 및 PGE₂ 발현을 증가시켰으며
OPG발현은 감소시켰다. OPG와 PGE₂ 형성 억제인자인 NS398 및
indomethacin은 Td92에 의한 파골세포 형성을 억제하였다. 또한,
NS398 및 indomethacin은 조골세포에서 Td92에 의한 RANKL 및

OPG발현의 변화를 억제하였다. 이들 결과는 *T. denticola*의 주외막 단백질인 Td92가 PGE₂를 매개로 조골세포의 RANKL 및 OPG의 발현을 조절하여 파골세포 형성을 유도함을 시사한다. 이를 통해 치주염의 주요 원인균인 *T. denticola*의 주외막단백질이 치조골의 흡수를 일으키는 치주염의 병변에 밀접한 관련이 있음을 확인하였다.

핵심되는 말: *Treponema denticola*, 파골세포형성, Td92, 치주염