



Bone mass and microarchitecture of irradiated and bone marrow-transplanted mice: influences of the donor strain

Submitted by Emmanuel Lemoine on Tue, 06/10/2014 - 11:21

Titre	Bone mass and microarchitecture of irradiated and bone marrow-transplanted mice: influences of the donor strain
Type de publication	Article de revue
Auteur	Dumas, Aline [1], Brigitte, M. [2], Moreau, Marie-Françoise [3], Chrétien, F. [4], Baslé, Michel-Félix [5], Chappard, Daniel [6]
Editeur	Springer Verlag
Type	Article scientifique dans une revue à comité de lecture
Année	2009
Langue	Anglais
Date	2009/03/01
Numéro	3
Pagination	435 - 443
Volume	20
Titre de la revue	Osteoporosis International
ISSN	0937-941X / 1433-2965
Mots-clés	biomaterial [7], Bone marrow transplantation [8], Cell graft [9], Endocrinology [10], GFP [11], Micro-CT [12], osteoporosis [13], Rheumatology [14]

Résumé en
anglais

Summary Total body irradiation and bone marrow transplantation induced dramatic trabecular bone loss and cortical thickening in mice. Transplanted cells were engrafted in bone marrow, along trabeculae, and in periosteal and endosteal envelopes. None of the osteocytes were of donor origin. Bone microarchitecture of transplanted mice changed to tend toward the donor phenotype. **Introduction** Osteopenia and osteoporosis are complications of bone marrow transplants (BMT) attributed to related chemotherapy. However, the specific influence of total body irradiation (TBI) is unknown. **Methods** We investigated the effects of TBI and BMT on bone mass and microarchitecture by micro-CT. Eighteen C57Bl/6 (B6) mice receiving lethal TBI had a BMT with marrow cells from green fluorescent protein--transgenic-C57Bl/6 (GFP) mice. Transplanted (TGFPB6), B6, and GFP mice were euthanized 1, 3, and 6 months after BMT or at a related age. **Results** TGFPB6 presented a dramatic bone loss compared with B6 and did not restore their trabecular bone mass over time, despite a cortical thickening 6 months after BMT. Serum testosterone levels were not significantly reduced after BMT. During aging, GFP mice have less trabeculae, thicker cortices, but a narrower femoral shaft than B6 mice. From 3 months after BMT, cortical characteristics of TGFPB6 mice differed statistically from B6 mice and were identical to those of GFP mice. GFP+ cells were located along trabecular surfaces and in periosteal and endosteal envelopes, but none of the osteocytes expressed GFP. **Conclusion** Our findings suggest that engrafted cells did not restore the irradiation-induced trabecular bone loss, but reconstituted a marrow microenvironment and bone remodeling similar to those of the donor. The effects of irradiation and graft on bone remodeling differed between cortical and trabecular bone.

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DOI

[10.1007/s00198-008-0658-3](http://dx.doi.org/10.1007/s00198-008-0658-3) [16]

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<http://dx.doi.org/10.1007/s00198-008-0658-3> [16]

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