The Application Potential of Sintered β-Dicalcium Pyrophosphate in Total Joint Arthroplasty

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Abstract: An *in vitro* bone cell culture model was used to evaluate the potential application of sintered β -dicalcium pyrophosphate (SDCP) in arthroplasty surgery. Primary osteoclasts and osteoblasts were cocultured with different sizes of SDCP particles. The changes in cell counts and the synthesis and secretion of alkaline phosphatase, acid phosphatase, and prostaglandin E₂ in response to the SDCP particles were monitored. When bone cells were cultured with SDCP particles smaller than 53 μ m, both the osteoblast and osteoclast cell counts decreased significantly. When the SDCP particles were larger than 177 μ m, although the osteoblast population increased significantly, the osteoclast population decreased significantly. Simultaneously, the titer of prostaglandin E₂ in the medium and the cytoplasmic prostaglandin E₂ increased significantly. We concluded that SDCP is a potentially useful bioceramic for the prevention of osteoclast-mediated periprosthetic osteolysis. **Key words:** sintered β -dicalcium pyrophosphate, particle size, osteoclasts, osteoblasts, arthroplasty.

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With advances in ceramics technology, the application of calcium phosphate bioceramics as a bone substitute has recently received considerable attention. During the past decade, a large number of biomaterials have been proposed as artificial bone fillers for repairing bone defects. The material most widely used in clinical medicine is hydroxyapatite (HA) ceramics [1]. However, the use of block forms of porous HA has resulted in an unacceptably high failure rate in clinical applications [2]. As an intermediate product in the biological mineralization process [3], sintered β -dicalcium pyrophosphate (SDCP, formula β -Ca₂P₂O₇) has been proved to have great potential as an *in vivo* biodegradable bone substitute [4,5].

Host tissue responses to these materials are generally assessed by morphologic and histologic examinations of the implant site to evaluate their biocompatibility and cytotoxicity. The inertness of biomaterials is relative: even materials considered inert in bulk form can elicit inflammatory reactions in particulate form. Researchers have recognized that particulate debris around an orthopedic implant can have an adverse effect on the surrounding tissue [6]. The adverse effect depends on the particulate nature of the material more than on chemical biocompatibility [7]. It is difficult to examine the *in vivo* reaction of a specific cell to the substrate because numerous cell populations and chemical factors are involved in implantation.

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To determine the sequence of events and the parameters influencing the interactive process, a cell culture model has great importance for biomaterials. In previous *in vitro* biocompatibility tests, we compared the various sizes of calcium phosphate particles and the reaction of osteoblasts, and we found that SDCP was more biocompatible than HA [8]. The larger size hydroxyapatite particles seemed compatible with the bone cells, but the smaller sized hydroxyapatite particles may both activate the osteoclasts and decrease the population of osteoblasts [9]. However, the effect of SDCP particles on the osteoclasts was not clear in that study.

To quantify the effect of particle size on bone cell metabolism, an osteoclast cell culture model system was prepared in the presence of various sized SDCP particles. The goal of this study was to evaluated possible effects and identify the mechanism by which various sizes of SDCP particles and osteoclasts interacted. This study would lead to an evaluation of the possible clinical application of SDCP bioceramics in arthroplasty surgery.

Materials and Methods

Osteoclast Cell Culture

The rat spleen-calvaria coculture system was performed as described by Tanaka and Takahashi et al. [10, 11]. Newborn Wistar rats (3-5 days old) were obtained from the laboratory center of the Medical College, National Taiwan University. Primary osteoblastic cells were prepared from newborn rat calvaria as previously described [7]. Osteoblastic cells (1 \times 10⁴ cells/well) and spleen cells $(7.5 \times 10^5 \text{ cells/well})$ were cocultured for 7 days in Dulbecco's modified Eagle's medium containing 10% fetal calf serum in the presence of 10 nM 1α , 25 $(OH)_2$ vitamin D_3 in 6-well plates. The culture dishes were incubated at 37°C in an atmosphere supplemented with 5% CO_2 . When the cells grew to 80% confluence, various sizes of SDCP powders were added.

Preparation of Sintered β -Dicalcium Pyrophosphate Powder

The powder of SDCP was prepared as previously described [4]. In short, the β -DCP powder (β -DCP: Ca₂P₂O₇, Sigma, St Louis, MO) mixed with 5% weight Na₄P₂O₇•10H₂O in water and dried at 70°C for 3 days. The well-mixed and dried cake was ground and sieved to obtain 40–60 mesh particles. The sieved particles were placed in a platinum crucible and heated to 930°C at a heating rate of

3°C/min in a conventional Ni-Cr coiled furnace and then maintained in air for 1 hour after the sintering temperature of 930°C was reached. The sintered particles were ground and separated by mesh into various grain sizes of 0.5–3.0 μ m, 37–63 μ m, 177– 250 μ m, and 420–841 μ m. The SDCP particles were spherical in shape at various grain sizes when observed using scanning electron microscopy. Before use, the particles were processed using dry heat sterilization (130°C, 40 min) as previously reported [12].

Treatment of Osteoclast Cell Cultures With Sintered β -Dicalcium Pyrophosphate

The medium surrounding a confluent rat bone cell culture was removed and the cells washed twice with phosphate buffer solution. Dulbecco's modified Eagle's medium supplemented with ITS (insulin, 10 μ g/mL medium; transferrin, 5 μ g/mL medium, and sodium selenite 5 × 10⁻³ μ g/mL medium; Sigma) was mixed with 0.1% (1 mg/mL) of the various size SDCP particles and added to the cells. The day the new medium was added was considered day 0 of culture. The test medium was removed from wells at 3 hours, 1 day, 3 days, and 7 days, divided into 500 μ L batches and frozen at -80° C for further analysis.

Identification and Quantification of the Osteoblast and Osteoclast Cells

At the end of the experiment, cells in the wells were fixed and stained for tartrate-resistant acid phosphatase (TRAP) using a commercially available assay kit (procedure No. 386, acid phosphatase, leukocyte; Sigma). Cells were briefly fixed with a citrate-acetone solution for 30 seconds at room temperature. The fixed cells were incubated in the dark with a staining mixture for 1 hour at 37°C. The cells were washed with deionized water for 3 minutes, counterstained with acid hematoxylin, and then observed using inverted microscopy (Olympus, IMT-II, Hatagaya, Shibuya-ku, Tokyo, Japan).

The cell counts of the control and experimental wells were determined using an MICD imageanalyzing system (MICD Software Series, Image Research, Catharine, Ontario, Canada). The mean osteoclast and nonosteoclast cell (osteoblast) populations in 4 randomly selected high-power fields (0.06 mm²) were measured by counting the number of nuclei caught by a CCD-72 camera (Dage-MII, Michigan, IN) through the microscope. The cell population per unit area (millimeter squared) was measured as a mean of these 4 measurements. The total cell count per well was calculated by multiplying to obtain the count for the area of each well (940 mm²/well). The cellular responses of the treated samples were compared with control samples and expressed as a percentage of the control values.

Analysis of Alkaline Phosphatase in Culture Medium

Alkaline phosphatase (ALP) activity released from the cells into the medium was measured using a commercially available assay kit (procedure No. ALP-10, Sigma). Briefly, an aliquot (20μ l) from the media was mixed with 1 mL ALP reagent. The absorbance at 405 nm caused by p-nitrophenol production was followed for 5 minutes at 30°C. The change in rate of absorbance was directly proportional to ALP activity.

Analysis of Acid Phosphatase in Culture Medium

Acid phosphatase (ACP) activity released from the cells into the medium was measured using a commercially available assay kit (procedure No. 435, acid phosphatase, leukocyte, Sigma). In short, an aliquot (20 μ L) from the media was mixed with 200 μ L ACP reagent. The absorbance at 405 nm caused by p-nitrophenol production was followed for 5 minutes at 30°C. The change in rate of absorbance was directly proportional to APC activity.

Analysis of Prostaglandin E₂ (PGE₂) in Culture Medium

The production of prostaglandin E_2 (PGE₂) in culture medium was analyzed by enzyme-linked immunosorbent assay (ELISA). In short, 50 µL of standard PGE₂ (Assay Designs, Ann Arbor, MI) or sample was added per well. The test samples were incubated on the bench top for 18 hours at room temperature. Then 200 µL of Ellman's reagent were added to each well and incubated for 1.5 hours at room temperature. The reaction was stopped and read using a Microelisa reader (Molecular Device, Sunnyvale, CA) at 405 nm.

Analysis of Cytoplasmic ALP, ACP, and PGE₂

At the end of the experiment, cellular ALP, ACP, and PGE_2 activities were determined after lysis of the cells with the detergent Triton X-100 (Sigma T 8787; 1% in Hanks' balanced salt solution). Cytoplasmic ALP, ACP, and PGE_2 values were deter-

mined by the same methods as for the measurement of these activities in the culture media.

Statistical Analysis

The differences between the effects of the various sizes of SDCP particles were evaluated using an analysis of variant statistic method. The post hoc test performed was Bonferroni's *t*-test. The level of statistical significance was defined as P<.05.

Results

Cell Count

The osteoblast cell populations changed significantly after SDCP particles were added to the culture. The osteoblast cell population decreased significantly when cultured with the SDCP particles smaller than 53 μ m (P<.05), and it increased when culturing with the SDCP particles larger than 177 μ m (*P*<.05) (Fig. 1). When measured as a percentage of the control cell counts, the osteoblast counts decreased to 41.7% - 54.3% of the control counts for SDCP particles smaller than 53 μ m and increased to 140.1%-153.8 % of the control counts for SDCP particles larger than 177 μ m after being cultured for 7 days (Fig. 2). The changes in the osteoblast cell population, which were detectable in both the 3- and 7-day cultures were both statistically significant.

The osteoclast cell populations also changed significantly after adding SDCP particles into the culture. The osteoclast cell population decreased significantly when cultured with the SDCP particles smaller than 250 μ m (P<.05). The smallest size SDCP particles gave the lowest cell population (Fig. 1). When measured as a percentage of the control cell counts, the osteoclast counts decreased to 1.8%-24.8% of the control counts for the SDCP particles smaller than 53 μ m after 7 days of culture (Fig. 2). These changes were statistically significant at all the time intervals tested (3 hours, 1 day, 3 days, and 7days). When bone cells were cultured with SDCP particles smaller than 53 μ m, both the osteoblast cell population and the osteoclast cell population were significantly lower than the control groups.

Alkaline Phosphatase

The release of ALP into culture medium and its production by bone cells under various conditions were measured. Except for the ALP titer in the 3-hour culture, the changes in ALP secretions in the



Fig. 1. Changes in osteoblast and osteoclast cell populations after 7 days' culture with various sizes of sintered dicalcium pyrophosphate (SDCP) particles. (Error bar shows standard error). (A) Statistically significant changes were seen in the osteoblast cell population at 3 and 7days. The osteoblast cell population increased significantly when cultured with SDCP particles larger than 177 μ m (*P*<.05) and decreased significantly when cultured with SDCP particles smaller than 53 μ m (*P*<.05). (B) Statistically significant changes were seen in the osteoclast cell population at all the time intervals tested (3 hours, 1 day, 3 days, and 7days). The osteoclast cell population decreased significantly when cultured with SDCP particles smaller than 250 μ m (*P*<.05).

presence of the various sizes of SDCP particles were all statistically insignificant (P>.05). The changes in cytoplasmic ALP titer for the various sizes of SDCP particles were all statistically significant (P<.05; Table 1). A decrease in cytoplasmic ALP titer was more evident when the bone cells were cultured with the smaller SDCP particles, and this result correlates with the changes in the cell counts for the osteoblast cells.

Acid Phosphatase

The release of ACP into culture media and production by the osteoclast cells under various conditions were also measured. The changes in ACP secretions by bone cells were all statistically insignificant (P>.05), except for the 3-hour culture. The changes in cytoplasmic ACP titer of bone cells for



Fig. 2. Changes in osteoblast and osteoclast cell populations (as a percentage of the control) after 7 days' culture with various sized SDCP particles are seen. (Error bar shows standard error.) (A) A statistically significant increase in the osteoblast cell population was seen when bone cells were cultured with SDCP particles sized larger than 177 μ m. When bone cells were cultured with SDCP particles smaller than 53 μ m, the osteoclast cell population was significantly lower than that of the control groups. At the end of 7 days' culture, the osteoblast counts had increased by 140.1% to 153.8% of the control counts for the SDCP particles sized larger than 177 μ m and had decreased by 41.7% to 54.3% of the control counts for the SDCP particles sized smaller than 53 μ m. (B) The decrease in osteoclast cell population attained statistical significance when bone cells were cultured with SDCP particles sized larger than 420 μ m for 7 days. When bone cells were cultured with SDCP particles smaller than 53 μ m, the osteoclast cell population was significantly lower than that of the control groups at all time intervals tested. At the end of 7 days' culture, the osteoclast counts had decreased by 1.8% to 10.4% of the control counts.

Size	3 h (units)	1 d (units)	3 d (units)	7 d (units)
Medium Control	117912.2	100499.0	123882.5	141792.5
	SE: 1442.6	SE: 4489.6	SE: 4965.7	SE: 4255.1
420–841 μM	106966.8	96021.4	104976.7	117912.2
	SE: 1314.0	SE: 3782.1	SE: 3032.3	SE: 5621.5
177–250 μM	94031.3*	91543.7	101494.1	106966.8
	SE: 1807.4	SE: 2699.1	SE: 2874.6	SE: 5031.7
37–53 μM	91543.7+	84080.9	98011.4	121394.5
	SE: 2143.8	SE: 2866.6	SE: 2915.2	SE: 4927.0
0.5–3.0 μM	100996.6*	92041.2	108459.4	103484.2
	SE: 2024.3	SE: 3392.0	SE: 4172.1	SE: 3563.7
P value	.0076	.85	.52	.36
Cell Control	13488.3	69044.7	49530.9	196921.5
	SE: 1049.5	SE: 16454.4	SE: 4122.1	SE: 142336.0
420–841 μM	13156.6	40465.0*	37977.4*	149161.0*
	SE: 754.4	SE: 6278.5	SE: 3361.6	SE: 147800.7
177–250 μM	10116.24+	33389.12*	31233.2+	111610.3*
	SE: 755.5	SE: 4236.7	SE: 3365.8	SE: 91798.6*
37–53 μM	11387.7*	33333.8*	21669.8‡	46874.6
	SE: 705.0	SE: 4639.0	SE: 1749.7	SE: 36265.4
0.5–3.0 μΜ	12769.7	37645.*	22830.6‡	29299.8*
	SE: 635.4	SE: 5198.4	SE: 2003.4	SE: 21905.6
P value	.023	.029	1.37×10^{-7}	.0031

Table 1. Changes in Intracellular and Extracellular Alkaline Phosphatase Titer After Culture with Various SizedSintered Dicalcium Pyrophosphate Particles at a Concentration of 1 mg/mL

NOTE. The differences between various sized sintered β -dicalcium pyrophosphate particles were evaluated by an analysis of variance statistical method. The post hoc test performed was Bonferroni's *t*-test.

Abbreviation: SE, standard error.

*P < .05.

+P < .001.

 $\pm P < 0.00001.$

All *P* values are when compared with the control group.

the various sizes of SDCP particles were all statistically significant (P<.05; Table 2). The decrease in cytoplasmic ACP titer was more evident when the bone cells were cultured with the smaller SDCP particles, and this also correlates with the changes in the cell counts of osteoclast cells.

Prostaglandin E₂

The synthesis and secretions of PGE_2 by the bone cells cultured with the various preparations of SDCP are shown in Table 3. Changes in both the cytoplasmic PGE_2 and the secreted PGE_2 were all statistically significant (*P*<.0001 by analysis of variance [ANOVA] test; Table 3). When bone cells were cultured with SDCP particles smaller than 53 μ m, the PGE₂ titers in the test culture medium reached a peak on the third day after the addition of the SDCP particles, then decreased a little by the seventh day. After 3 days of culture, the PGE₂ titers in the media cultured with 37–53 μ m SDCP particles were 2.59 times that of the control, and PGE₂ titers in the media cultured with 0.5–3 μ m sized SDCP were 2.80 times that of the control (Table 3). The

cytoplasmic PGE₂ titers reached a peak on the first day after implantation, then decreased gradually to the seventh day. At the end of 7 days, the cytoplasmic PGE₂ titers in the bone cells cultured with 37–53 μ m and 0.5–3 μ m size SDCP were 2.39 and 3.13 times that of the control, respectively (Table 3).

Discussion

Continuous advances in the field of implantable calcium phosphate bioceramics have produced impressive progress with respect to biocompatibility and have shown an ability to promote tissue formation. Biodegradable biomaterials have a wide variety of applications in clinical medicine. Certain biodegradable calcium phosphates have been used as bone substitutes to avoid complications associated with bone grafts, such as supply shortage, immunogenicity, and transfer of disease with the graft [13–16]. One of the main advantages of biodegradable substances is that they obviate eventual surgical removal. Sintered β -dicalcium pyrophos-

Size	3 h (units)	1 d (units)	3 d (units)	7 d (units)
Medium Control	30.8	46.2	53.9	92.3
	SE: 17.0	SE: 12.6	SE: 11.8	SE: 34.08
420–841 μM	23.1	23.1	46.2	38.5
	SE: 11.8	SE: 2.8	SE: 12.6	SE: 17.2
177–250 μM	30.8	46.2	38.5	46.2
	SE: 12.6	SE: 12.6	SE: 12.8	SE: 12.6
37–53 μM	30.8	53.9	46.2	38.5
	SE: 12.6	SE: 11.8	SE: 12.6	SE: 12.8
0.5–3.0 μM	46.2	53.9	61.6	61.6
	SE: 17.0	SE: 11.8	SE: 10.3	SE: 15.4
P value	.85	.37	.71	.29
Cell Control	63.3	138.5	137.5	163.3
	SE: 9.7	SE: 29.5	SE: 17.1	SE: 25.2
420–841 μM	57.3	92.3*	126.3	150.5
	SE: 10.8	SE: 13.0	SE: 12.9	SE: 22.4
177–250 μM	47.0	100.9*	110.9*	155.6
	SE: 8.0	SE: 17.7	SE: 10.9	SE: 17.7
37–53 μM	38.5	57.3+	67.9+	88.1*
	SE: 7.2	SE: 10.7	SE: 7.8	SE: 14.4
0.5–3.0 μM	39.3	52.2+	69.7†	88.1*
	SE: 8.0	SE: 11.1	SE: 9.5	SE: 18.6
P value	.21	.0085	.00017	.013

Table 2. Changes in Intracellular and ExtracellularAcid Phosphatase (ACP) Titer After Culture WithVarious Sized Sintered Dicalcium Pyrophosphate(SDCP) Particles at a Concentration of 1 mg/mL

NOTE. The differences between various sized sintered β -dicalcium pyrophosphate particles were evaluated by an analysis of variance statistical method. The post hoc test performed was Bonferroni's *t*-test.

Abbreviation: SE, standard error.

*P < .05.

+P < .001.

All *P* values are when compared with the control group.

phate has been proved to have great potential as an *in vivo* biodegradable bone substitute [4,5]. In this study, we further demonstrated that larger sized SDCP particles are potentially useful for preventing osteoclast-mediated periprosthetic osteolysis by an *in vitro* bone cell culture model.

The events at the interface between the implanted material and the adjacent tissue are the direct results of the cellular, chemical, physiologic, and mechanical reactions evoked by the presence of the biomaterial [17]. Host tissue responses to these materials are generally assessed by morphologic and histologic examinations of the implant site to evaluate their biocompatibility and cytotoxicity [18]. In our institution, SDCP has been shown to be an effective biodegradable bone filler for repairing bone defects [4,5]. The in vivo experiments do not allow the examination of specific cell to substrate relationships. A cell culture model in the presence of biomaterials is of great usefulness for determining the events and the parameters influencing the interactive process [19]. Although cell culture studies cannot directly duplicate the conditions that exist *in vivo*, the effects of specific types of particles on cellular metabolism can be directly quantified using this technique [20].

Working with primary bone cells populations has several advantages. For example, because these cells are not transformed, any observed response can be attributed to the phenotype of the bone cells and are not a possible by-product of the transforming process [21]. In previous experiments, we isolated and cultured subpopulations of osteoblast cells to characterize their response to SDCP particles. It revealed that the addition of smaller size SDCP particles ([0.5–3.0 μ m and 37–53 μ m) into culture could significantly affect the cell counts of osteoblasts [22]. In this study, the main concern was to study the interactions of SDCP bioceramic particles originating from on the coexisting and cocultured osteoblast and osteoclast cells.

As shown by this study, the bone cell counts changed significantly after adding SDCP particles (Fig. 1). If the particle size was larger than 177 μ m, a significant increase in the osteoblast cell population was seen, while the osteoclast cell population decreased significantly (Fig. 1). When represented as a percentage of the control cell counts, the osteoblast counts increased by 140.1% to 153.8% compared with the control counts for a SDCP particles size larger than 177 μ m (Fig. 2) and osteoclast counts decreased by 48.0% to 82.6% compared with the control counts (Fig. 2). The osteoblast and osteoclast cell population decreased significantly when SDCP particles were smaller than 53 μ m (Fig. 1). When bone cells were cultured with SDCP particles smaller than 53 μ m, the osteoblast counts decreased by 41.7% to 54.3% compared with the control counts for SDCP particle sizes smaller than 53 μ m, and the osteoclasts decreased by 1.8% to 24.8% compared with the control counts (Fig. 2).

Although the larger SDCP particles may limit osteolysis, smaller particles may be generated in patients, and the newly-generated smaller SDCP particles will compromise the osteoblasts as well as osteoclasts. As shown previously, a decrease in cell number after exposure to the test material could be used as a marker for toxicity [23]. It has been suggested that toxicity due to direct contact of the particles with the cells only occurs with particles smaller than approximately 5 μ m in diameter [24]. The decrease in cell population was more obvious in the osteoclast counts. This result suggests that the rates of osteoclast proliferation or differentiation decrease significantly after the addition of the SDCP particles into the culture.

Size	3 h (pg/mL)	1 d (pg/mL)	3 d (pg/mL)	7 d (pg/mL)
Medium Control	1290.9	2762.4	3997.7	2222.3
	SE: 133.8	SE: 394.3	SE: 821.5	SE: 87.4
420–841 μM	1356.9	2444.8	4687.0	2591.9
	SE: 138.5	SE: 367.3	SE: 1069.7	SE: 277.8
177–250 μM	1288.4	3172.2	5418.9*	3726.2*
	SE: 129.9	SE: 342.8	SE: 1323.5	SE: 484.6
37–53 μM	1553.6	4860.4*	10352.4‡	6510.6+
	SE: 160.4	SE: 989.4	SE: 1575.7	SE: 794.7
0.5–3.0 μM	1155.9	4603.6*	11200.8+	7040.4+
	SE: 152.8	SE: 616.8	SE: 1996.9	SE: 965.3
P value	.41	.016	.00086	3.41×10^{-7}
Cell Control	11607.1	4182.21	2776.0	1518.1
	SE: 835.1	SE: 360.9	SE: 318.6	SE: 198.9
420–841 μM	10659.0	5060.2*	3235.0	2121.8*
	SE: 924.5	SE: 373.4	SE: 438.3	SE: 272.7
177–250 μM	11916.8	6599.6*	3412.1*	2018.4*
	SE: 896.7	SE: 770.3	SE: 394.2	SE: 256.5
37–53 μM	12002.0	7888.2+	4156.0*	3629.9+
	SE: 1319.9	SE: 747.5	SE: 516.0	SE: 596.3
0.5–3.0 μΜ	12991.4	7208.7*	5648.1+	4755.7+
	SE: 1138.3	SE: 694.1	SE: 689.0	SE: 811.1
P value	.63	.00048	.0014	9.4×10^{-5}

Table 3. Changes in Intracellular and Extracellular Prostaglandin-E2 Titer After Culture With Various SizedSintered Dicalcium Pyrophosphate Particles at a Concentration of 1 mg/mL

NOTE. The differences between various sized sintered β -dicalcium pyrophosphate particles were evaluated by an analysis of variance statistical method. The post hoc test performed was Bonferroni's *t*-test.

Abbreviation: SE, standard error.

*P < .05.

+P < .001.

 $\ddagger P < 0.00001.$

All *P* values are when compared with the control group.

The changes in ALP and ACP secretions with the various sizes of SDCP particles did not attain a statistically significant level. However, the cytoplasmic ALP and ACP titer for various sizes of SDCP particles decreased significantly (Tables 1, 2). The changes in cytoplasmic ALP and ACP titer was more evident when bone cells were cultured with the smaller SDCP particles. This findings is in agreement with the changes in the cell counts of the bone cells.

Prostaglandin is produced in skeletal tissues, where it has complex effects on both the catabolic and anabolic activities of bone cells. Researchers have shown that it stimulates osteolysis in bone organ cultures [25–28] and this can cause an increase in bone loss [29, 30]. It has also been known to directly inhibit the cytoplasmic motility of and bone resorption by isolated osteoclasts [31, 32]. This apparently paradoxical behavior is thought to be due to prostaglandin-induced osteoclastic differentiation in bone marrow cultures and an inhibition of the function of the osteoclasts thus formed [32–34]. Prostaglandin's stimulation of osteoclastic activity in intact bone is thought to be mediated indirectly through the action of another

cell type in bone, most likely the osteoblasts [35]. Colline and Chambers [36] reported that PGE_2 induces osteoclast differentiation in mouse spleen hemopoietic cell and bone marrow stromal cell cocultures.

In this study, the changes in PGE₂ titers corresponded to the changes in cell counts when the bone cells are cocultured with the various sizes of SDCP particles. The increase in PGE₂ titer in the culture medium and the cytoplasm of bone cells when cultured with the smaller sizes of SDCP particles were quite obvious. The PGE₂ titers increased by 2.39 to 3.13 times compared with the control (Table 3). It had been reported that PGE_2 inhibits osteoclast differentiation from precursor cells [37]. The smaller sized SDCP particles thus could affect osteoclast cells differentiation by the PGE₂ pathway. There could be an inhibition of osteoclastic recruitment to the bone surface and an inhibition of the activity of osteoclasts that have reached the surface, and this could shorten the life span of the osteoclasts, perhaps by inducing apoptosis [25]. The changes in osteoclast cell counts and the ratio of osteoclasts to osteoblasts after adding the SDCP particles to the bone cells cultures are possibly mediated by the PGE₂ pathways.

Osteoclast differentiation and activation is controlled, at least in part, by the counterbalancing influences of receptor activator of nuclear factor- κ B ligand (RANKL) and osteoprotegerin (OPG). RANKL is the essential factor for osteoclast formation and activation and enhances bone resorption. By contrast, OPG, which is produced by osteoblastic lineage cells, acts as a decoy receptor that neutralizes RANKL and prevents bone loss [38]. Recombinant human OPG was found to cause osteoclasts to detach from the bone surface [39]. In this study, whether the inhibitory effect of SDCP on the osteoclasts was mediated by cyclo-oxygenase 2 (COX-2) induction in osteoblasts [40] needs to be further validated.

Periprosthetic osteolysis leading to aseptic loosening is a major cause of failure in total joint arthroplasty. The process of osteolysis begins with the generation of implant material wear particles. These particles stimulate macrophages and giant cells, which release mediators that stimulate the osteoclasts, leading to periprosthetic bone resorption. A net loss of bone at the tissue-implant interface thus occurs via an increase in bone resorption by osteoclasts or via a decrease in bone formation by osteoblasts. Bioceramics can contribute to bony growth and incorporation by inhibiting the functions of osteoclasts or accelerating the function of osteoblasts. The results of this study clearly show that larger sized SDCP particles are potentially useful for the prevention of osteoclast-mediated periprosthetic osteolysis. Further in vivo and clinical studies are needed to further analyze the effects of SDCP.

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References

- 1. Jarcho M: Calcium phosphates as ceramics as hard tissue prosthetics. Clin Orthop 157:259, 1981
- Hupp JR, McKenna SJ: Use of porous hydroxyapatite blocks for augmentation of atrophic mandibles. J Oral Maxillofac Surg 46:533, 1988
- 3. Ducheyne P: Bioceramics: material characteristics versus in vivo behavior. J Biomed Mater Res 21(Suppl A2):219, 1987

- Lin FH, Lin CC, Lu CM, et al: Mechanical properties and histological evaluation of sintered beta-Ca₂P₂O₇ with Na₄P₂O₇•10H₂O addition. Biomaterials 16:793, 1995
- Lin CC, Liao CJ, Sun JS, et al: Prevascularized bone graft cultured in sintered porous beta-Ca2P2O7 with 5 wt% Na₄P₂O₇•10H₂O addition ceramic chamber. Biomaterials 17:1133, 1996
- 6. Whillert HG, Semlitch M: Reactions of the articular capsule to wear products of artificial prosthesis. J Biomed Mater Res 11:157, 1977
- Evans EJ: Cell damage in vitro following direct contact with fine particles of titanium, titanium alloy and cobalt-chrome-molybdenum alloy. Biomaterials 15: 713, 1994
- 8. Sun JS, Tsuang YH, Liao CJ, et al: The effects of calcium phosphates particles on the growth of osteoblast. J Biomed Mater Res 37:324, 1997
- Sun JS, Lin FH, Hung TY, et al: The influence of hydroxyapatite particles on osteoclasts cell activities. J Biomed Mater Res 45:311, 1999
- Tanaka S, Takahashi N, Udagawa N, et al: Macrophage coclony-stimulating factor is indepensable for both proliferation and differentiation of osteoclast progenitors. J Clin Invest 91:257, 1993
- 11. Takahashi N, Akatsu T, Udagawa N, et al: Osteoblastic cells are involved in osteoclast formation. Endocrinology 123:2600, 1988
- 12. Sun JS, Liu HC, Chang WHS, et al: The influence of hydroxyapatite particle size on bone cell activities: an in vitro study. J Biomed Mater Res 39:390, 1998
- Bos GD, Goldberg VM, Zika JM, et al: Immune response of rats to frozen bone allografts. J Bone Joint Surg Am 65:239, 1983
- 14. Hollinger JO, Battisone GC: Biodegradable bone repair materials: synthetic polymers and ceramics. Clin Orthop 207:290, 1986
- 15. Mankin HJ, Gebhardt MC, Tomford WW: The use of frozen cadaveric allografts in the management of patients with bone tumors of the extremities. Orthop Clin North Am 18:275, 1987
- Urist MR, Dawson E: Intertransverse process fusion with aid of chemosterilized autolyzed antigen-extracted allogeneic (AAA) bone. Clin Orthop 154:97, 1981
- Clark AE, Hench LL, Paschall HA: The influence of surface chemistry on implant interface histology: a theoretical basis for implant material selection. J Biomed Mater Res 10:161, 1976
- Williams DF (ed): Toxicity of ceramics. p. 87. In: The fundamental aspect of biocompatibility. CRC Press, Boca Raton, 1981
- Gregoire M, Orly I, Menanteau J: The influence of calcium phosphate biomaterials on human bone cell activities: an in vitro approach. J Biomed Mater Res 24:165, 1990
- 20. Maloney WJ, Smith RL: Periprosthetic osteolysis in total hip arthroplasty: the role of particulate wear debris. J Bone Joint Surg Am 77:1448, 1995
- 21. Ballock RT, Roberts AB: Growth factors: a practical

approach. p. 95. In McKay I, Leigh I (eds): Growth factors: a practical approach. Oxford University Press, Oxford, 1993

- 22. Sun JS, Tsuang YH, Liao CJ, et al: The effect of sintered β -dicalcium pyrophosphate particle size on newborn Wistar rats osteoblasts. Artif Organs 23: 331,1999
- 23. Cheung HA, Haak MH: Growth of osteoblasts on porous calcium phosphate ceramic: an in vitro model for biocompatibility study. Biomaterials 10:63, 1989
- 24. Evans EJ, Clarke-Smith EMH: Studies on the mechanism of cell damage by finely ground hydroxyapatite particles in vitro. Clin Mater 7:241, 1991
- 25. Lerner UH, Ransjo M, Ljunggren O: Prostaglandin E_2 causes a transient inhibition of mineral mobilization, matrix degradation, and lysosomal enzyme release from mouse calvarial bones in vitro. Calcif Tissue Int 40:323, 1987
- Klein DC, Raisz LG: Prostaglandins: stimulation of bone resorption in tissue culture. Endocrinology 86: 1436, 1970
- 27. Schelling SH, Wolfe HJ, Tashjian AH Jr: Role of the osteoclast in prostaglandin E2-stimulated bone resorption: a correlative morphometric and biochemical analysis. Lab Invest 42:290, 1980
- 28. Tashjian AH Jr, Voelkel EF, Lazzaro M, et al: Tumor necrosis factor-alpha (cachectin) stimulates bone resorption in mouse calvaria via a prostaglandin-mediated mechanism. Endocrinology 120:2029, 1987
- 29. Santoro MG, Jaffe BM, Simmons DJ: Bone resorption in vitro and in vivo in PGE-treated mice. Proc Soc Exp Biol Med 156:373, 1977
- 30. Desimone DP, Greene VS, Hannon KS, et al: Prostaglandin E2 administered by subcutaneous pellets causes local inflammation and systemic bone loss: a model for inflammation-induced bone disease. J Bone Miner Res 8:625, 1993
- 31. Chambers TJ, Ali NN: Inhibition of osteoclastic mo-

tility by prostaglandins I2, E1, E2 and 6-oxo-E1. J Pathol 139:383, 1983

- 32. Chambers TJ, McSheehy PM, Thomson BM, Fuller K: The effect of calcium-regulating hormones and prostaglandins on bone resorption by osteoclasts disaggregated from neonatal rabbit bones. Endocrinology 116:234, 1985
- 33. Fuller K, Chambers TJ: Effect of arachidonic acid metabolites on bone resorption by isolated rat osteoclasts. J Bone Miner Res 4:209, 1989
- 34. Collins DA, Chambers TJ: Effect of prostaglendins E_1 , E_2 , $F_{2\alpha}$ on osteoclast formation in mouse bone marrow cultures. J Bone Miner Res 6:157, 1991
- 35. Okuda A, Taylor LM, Heersche JN: Prostaglandin E2 initially inhibits and then stimulates bone resorption in isolated rabbit osteoclast cultures. J Bone Miner Res 7:255, 1989
- 36. Collins DA, Chambers TJ: Prostaglandin E2 promotes osteoclast formation in murine hematopoietic cultures through an action on hematopoietic cells. J Bone Miner Res 7:555, 1992
- 37. Quinn JMW, Sabokbar A, Denne M, et al: Inhibitory and stimulatory effects of prostaglandins on osteoclast differentiation. Calcif Tissue Int 60:63, 1997
- 38. Khosla S. Minireview: the OPG/RANKL/RANK system. Endocrinology 142:5050, 2001
- 39. O'Brien EA, Williams JH, Marshall MJ: Osteoprotegerin is produced when prostaglandin synthesis is inhibited causing osteoclasts to detach from the surface of mouse parietal bone and attach to the endocranial membrane. Bone 28:208, 2001
- 40. Chikazu D, Katagiri M, Ogasawara T, et al. Regulation of osteoclast differentiation by fibroblast growth factor 2: stimulation of receptor activator of nuclear factor kappaB ligand/osteoclast differentiation factor expression in osteoblasts and inhibition of macrophage colony-stimulating factor function in osteoclast precursors. J Bone Miner Res 16:2074, 2001