

Iron citrate prevents Phosphate (Pi) inhibition



of RANKL-induced osteoclastic differentiation in human

monocyte cells

E.Stefania Cannizzo¹, Mario Cozzolino^{2*}, Paola Ciceri², Antonella d'Arminio Monforte², Giulia Marchetti¹

Clinic of Infectious Diseases, Department of Health Sciences, ASST Santi Paolo e Carlo, University of Milan

² Renal Division, Department of Health Sciences, ASST Santi Paolo e Carlo, University of Milan

Background and Aim

• Patients affected by chronic kidney disease (CKD) feature a substantial increase of high phosphate-induced vascular calcification (VC) and iron deficiency-induced anemia (1).

•Increased Pi is known to inhibit both osteoclast differentiation and bone resorption process. Instead, iron citrate treatment enhances osteoclast (OCs) differentiation and bone resorption both in vitro and in vivo (2).

Materials & Methods

We consecutively enrolled 5 healthy donors with the following inclusion criteria: Males ii) non smokers iii) age between 25-50 years iv) HCV/HBV negative

Osteoclast (OCs) differentiation

Negative selection on PBMCs was used to isolate monocyte (CD14+cells). CD14⁺cells were 7 days cultured in α -MEM + 25ng/ml M-CSF + 30ng/ml

known about the effects of Pi + Fe3+ synergy on •Little is osteoclastogenesis.

We aimed to investigate the effect of iron citrate on Pi-induced inhibition of monocyte differentiation in human osteoclast-like cells.

RANKL

OCs characterization

Tartrate-resistant acid phosphatase (TRAP) staining ii) Acid Phosphatase Colorimetric Assay Kit **iii)**Dentin resorption assay plate

Osteoclast differentiation by TRAP was evaluated as the presence of more than 50 TRAP+cells/well (score 1) or the presence of less than 50, but more than 30 TRAP+cells/well (score 2); 0 was referred to less than 5 TRAP+cells/well.

Co-administration of Pi and Fe³ prevents Piinduced inhibition of OCs differentiation

Co-administration of Pi and Fe³ prevents Piinduced inhibition of OCs bone resorption







B.

TRAP staining (pink) of human osteoclast differentiated from PBMC and cultured for 7 days in presence of MCSF and RANKL. A) healthy control (HC) OCs : SCORE 1 B) HC OCs + Fe3+ (50uM): **SCORE 1** C) HC OCs+ Pi (3mM) : **SCORE 0** D) HC OCs+ Pi (3mM)+ Fe3+ (50 uM): **SCORE 2**

Bone resorption assay of human osteoclast differentiated from PBMC and cultured for 7 days on dentin in presence of MCSF and RANKL. Black arrows indicate resorption areas. A) healthy control (HC) OCs B) HC OCs + Fe3+ (50uM) C) HC OCs+ Pi (3mM) D) HC OCs+ Pi (3mM)+ Fe3+ (50 uM)

Conclusions

• High Pi concentration inhibits osteoclast differentiation induced by RANKL and M-CSF.

• Pi inhibition of osteoclast differentiation was prevented by low dose of Fe³⁺, suggesting a crucial role of Fe³⁺ in neutralizing Pi-based effect upon osteoclastogenesis.

- High PI concentration inhibits osteoclast capacity of dentin resorption
- Low dose of Fe³⁺ is able to revert PI effects on osteoclast resorption, suggesting a role of Fe in osteoclast maturation.

• Further research will clarify the pathways underlying iron citrate role and activity on osteoclastogenesis, understanding the possible effect of iron in CKD patients

References

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> *Mario Cozzolino Department of Health Sciences, University of Milan, Italy E-mail: mario.cozzolino@unimi.it





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