

1 **Treatment with eldecacitol positively affects mineralization, microdamage, and collagen**
2 **crosslinks in primate bone**

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30

31 **Abstract**

32 Eldecalcitol (ELD), an active form of vitamin D analog approved for the treatment of osteoporosis in Japan,
33 increases lumbar spine bone mineral density (BMD), suppresses bone turnover markers, and reduces fracture
34 risk in patients with osteoporosis. We have previously reported that treatment with ELD for 6 months
35 improved the mechanical properties of the lumbar spine in ovariectomized (OVX) cynomolgus monkeys. ELD
36 treatment increased lumbar BMD, suppressed bone turnover markers, and reduced histomorphometric
37 parameters of both bone formation and resorption in vertebral trabecular bone. In this study, we elucidated the
38 effects of ELD on bone quality (namely, mineralization, microarchitecture, microdamage, and bone collagen
39 crosslinks) in OVX cynomolgus monkeys in comparison with OVX-vehicle control monkeys. Density
40 fractionation of bone powder prepared from lumbar vertebrae revealed that ELD treatment shifted the
41 distribution profile of bone mineralization to a higher density, and backscattered electron microscopic imaging
42 showed improved trabecular bone connectivity in the ELD-treated groups. Higher doses of ELD more
43 significantly reduced the amount of microdamage compared to OVX-vehicle controls. The fractionated bone
44 powder samples were divided according to their density, and analyzed for collagen crosslinks. Enzymatic
45 crosslinks were higher in both the high-density (≥ 2.0 mg/mL) and low-density (< 2.0 mg/mL) fractions from
46 the ELD-treated groups than in the corresponding fractions in the OVX-vehicle control groups. On the other
47 hand, non-enzymatic crosslinks were lower in both the high- and low-density fractions. These observations
48 indicated that ELD treatment stimulated the enzymatic reaction of collagen crosslinks and bone mineralization,
49 but prevented non-enzymatic reaction of collagen crosslinks and accumulation of bone microdamage. Bone
50 anti-resorptive agents such as bisphosphonates slow down bone remodeling so that bone mineralization, bone
51 microdamage, and non-enzymatic collagen crosslinks all increase. Bone anabolic agents such as parathyroid
52 hormone decrease bone mineralization and bone microdamage by stimulating bone remodeling. ELD did not
53 fit into either category. Histological analysis indicated that the ELD treatment strongly suppressed bone
54 resorption by reducing the number of osteoclasts, while also stimulating focal bone formation without prior

55 bone resorption (bone remodeling). These bidirectional activities of ELD may account for its unique effects
56 on bone quality.

57 **Keywords:** vitamin D, bone quality, bone mineralization, bone microdamage, bone microarchitecture,
58 collagen crosslinks

59

60 **1. Introduction**

61 Bone mineral density (BMD) and bone quality are two major components of bone strength. Bone quality
62 consists of bone geometry, bone microarchitecture, bone microdamage, bone mineralization, and bone material
63 properties. These determinants of bone quality are regulated by bone turnover and the degree of oxidative
64 stress [1][2][3]. Eldecalcitol [$1\alpha,25$ -dihydroxy- 2β -(3-hydroxypropyloxy)vitamin D_3 ; ELD], an analog of
65 calcitriol [$1\alpha,25$ -dihydroxyvitamin D_3 ; $1,25(OH)_2D_3$], has been demonstrated to increase bone mass, to
66 suppress bone turnover markers, and to enhance bone strength in rodents [4][5] and in non-human primates
67 [6]. ELD suppresses RANKL expression in osteoblasts [7], suppresses differentiation of preosteoclasts to
68 mature osteoclasts [8], stimulates cell-migration of osteoclast precursor monocytes [9], and therefore, reduces
69 the number of mature osteoclasts on the bone surface. A 3-year randomized, double-blind, active-comparator,
70 clinical trial of ELD in postmenopausal women with osteoporosis demonstrated that ELD significantly
71 decreased the incidence of vertebral fractures and wrist fractures, increased both lumbar spine and hip BMD,
72 and suppressed bone turnover markers in comparison to alfacalcidol (1α -hydroxyvitamin D_3) [10].
73 Deterioration of bone architecture in the hip was reduced by ELD treatment [11]. A post-hoc analysis revealed
74 that, compared with placebo, ELD reduced incidence of vertebral fractures by approximately 50% in
75 osteoporotic patients with prevalent fractures [12]. This series of results raises an important question.
76 Treatment with ELD increases lumbar spine BMD by only 3% per year and reduces bone turnover markers by
77 approximately 30% per year compared with the pretreatment level. On the other hand, treatment with most
78 bisphosphonates increases lumbar spine BMD by more than 5% per year and reduces bone turnover markers
79 by 50%–60% per year. Despite its more restrained effects on BMD and bone turnover markers, the anti-
80 fracture activity of ELD is comparable to that of bisphosphonates [13]. These differences suggest that in
81 addition to the effects of ELD on BMD and bone turnover markers, the anti-fracture activity of ELD treatment
82 may be attributable to improved bone quality.

83 We have previously shown that treatment with 0.1 $\mu\text{g}/\text{kg}/\text{day}$ and 0.3 $\mu\text{g}/\text{kg}/\text{day}$ of ELD increases lumbar
84 spine and hip BMD, suppresses bone turnover markers, and eventually increases bone mechanical properties of

85 lumbar vertebrae in ovariectomized (OVX) cynomolgus monkeys [6]. Unlike rodent models, ovariectomized
86 non-human primates have a skeletal anatomy and bone material properties in terms of collagen crosslink
87 formation similar to those of postmenopausal women, with intracortical bone remodeling and increased bone
88 turnover and bone loss associated with estrogen deficiency [14][15].

89 Regarding bone material properties, collagen crosslinking is an independent determinant of bone
90 strength [3][16]. Bone collagen crosslinks can be divided into immature and mature enzymatic crosslinks and
91 glycation- or oxidation-induced non-enzymatic senescent crosslinks (advanced glycation end products, AGEs).
92 Enzymatic crosslink formation has positive effects on the mechanical properties of bone, conferring flexibility
93 without brittleness [17][18][19][20][21]. In contrast, AGE crosslinks result in brittle collagen fibers, thereby
94 leading to microdamage and bone fragility [17][22][23]. AGE crosslinks are formed by oxidation or glycation
95 reactions in a time-dependent manner, and are regulated by tissue turnover rate [22][24], the degree of
96 oxidative stress [25][26], or glycation level [17][23]. Pentosidine is a well-established intermolecular
97 crosslinking AGE and is used as a surrogate marker of total AGE formation [17][26][27][28][29][30].

98 In this study, in order to evaluate the effect of ELD on bone material and structural properties, we
99 analyzed bone mineralization, bone microarchitecture, bone microdamage, immature and mature enzymatic
100 collagen crosslinks, and AGEs in the bone samples collected for the OVX cynomolgus monkey study
101 previously reported [6].

102 **2. Materials and Methods**

103 *2.1 Animals and experimental design*

104 All animal procedures were as previously reported [6]. Briefly, 40 female cynomolgus monkeys, at least
105 9 years of age, were housed in pairs and fed twice daily with food supplements and/or fresh fruit, and had free
106 access to water. The animal room environment was controlled, with settings targeted at a temperature of
107 $22\pm 3^{\circ}\text{C}$, humidity of $50\pm 20\%$, photoperiod of 12 h light and 12 h dark, and 12 air changes per hour. Two
108 separate experiments were conducted, one experiment using a dose of $0.1\ \mu\text{g}/\text{kg}$ ELD and a corresponding
109 OVX-vehicle control group and the other experiment using $0.3\ \mu\text{g}/\text{kg}$ ELD and a corresponding OVX-vehicle

110 control group. Medium chain triglyceride was used for the vehicle solution. For each experiment, 20 animals
111 were randomly assigned to either the OVX-vehicle control group or the ELD group ($n = 10/\text{group}$). The groups
112 were balanced to ensure that age, body weights, whole body bone mineral content (BMC), and lumbar spine
113 BMD were equivalent across groups within each experiment.

114 Daily treatment started the day following ovariectomy, with either vehicle alone (OVX-Veh1 or OVX-
115 Veh2) or ELD (at 0.1 $\mu\text{g}/\text{kg}$ in the first experiment or 0.3 $\mu\text{g}/\text{kg}$ in the second experiment), and continued for
116 6 months. Animals were euthanized under anesthesia by exsanguination, and bone samples were excised. The
117 study was approved by the Charles River Montreal Animal Care Committee and was performed in a facility
118 accredited by the Association for Assessment and Accreditation of Laboratory Animal Care.

119 ***2.2 Density fractionation***

120 Density fractionation was carried out as previously reported [31][32][33]. Briefly, the third lumbar vertebrae
121 (L3) were crushed and washed in 0.2M Tris-HCl buffer (pH7.4) to remove bone marrow, lyophilized, and then
122 defatted in 2:1 (v:v) chloroform:methanol solution. The bone pieces were then pulverized in a percussion mill
123 cooled in liquid nitrogen (Spex Freezer Mill; Spex Sampleprep, Metuchen, NJ, USA) and then sieved in a
124 sonic sifter to separate bone particles less than 20 μm in size. The bone powder was then chemically
125 “fractionated” (into seven fractions from $< 1.8 \text{ g}/\text{mL}$ to $> 2.1 \text{ g}/\text{mL}$) in a bromoform–toluene mixtures by a
126 method of stepwise centrifugation [33]. Approximately 200 mg of the sieved bone was added to a polyallomer
127 centrifuge tube containing 35 mL of a 1.95 g/mL density solution (calibrated with sink floats) for cancellous
128 bone. The tubes were sonicated to achieve a homogeneous suspension of the powder, which was then
129 centrifuged at 10,000 rpm for 30 min in a Beckman L5-55 ultracentrifuge using an SW20 rotor. The density of
130 the supernatant was adjusted to 1.9 g/mL via the addition of toluene, and the modified solution was re-
131 centrifuged. In a similar way, each precipitate obtained from a solution of progressively decreasing density (in
132 0.05 g/mL steps) was collected. For the range of mineral densities greater than 1.95 g/mL, the precipitates
133 obtained from an initial 2.0 g/mL density solution was re-suspended in a solution of density 2.1 g/mL.
134 Similarly, successive centrifugation of the precipitate at progressively higher densities (0.05 g/mL steps)
135 determined the higher density fractions.

136 Removal of organic solvent from the series of density fractions was achieved by a “rinse” centrifugation in
137 100% ethyl alcohol. The samples were then dried in a desiccator at room temperature. The contribution of each
138 fraction, relative to the original weight of unfractionated bone, was calculated to determine a mineralization
139 profile for each group.

140 ***2.3 Bone microdamage assessment***

141 The fourth lumbar vertebrae (L4) were processed for microdamage assessment by bulk staining in basic
142 fuchsin. Using 1% basic fuchsin dissolved in increasing concentrations of ethanol, specimens were stained
143 according to the following schedule: 4 h in 80%, 4 h in 80%, 4 h in 95%, overnight in 95%, 4 h in 100%, and
144 4 h in 100%. At each step, the solution was replaced with fresh solution after 2 h. Bones were placed under
145 vacuum (20 in Hg) for all stages during the day and left on the bench top overnight. Following staining, bones
146 were washed twice in 100% ethanol (5 min each), and placed in 100% methylmethacrylate (MMA; Sigma-
147 Aldrich) under vacuum for 4 h. Specimens were then transferred to a solution of MMA + 3% dibutyl phthalate
148 (DBP; Sigma-Aldrich) for 3–7 days under vacuum and then embedded using MMA + DBP + 0.25% catalyst
149 (Perkadox 163; Akzo Nobel Chemicals, Pasadena, USA). Mid-sagittal sections 80–100 μm thick were cut
150 using a diamond wire saw (Histosaw; Delaware Diamond Knives, Inc., DE, USA).

151 Histological measurements were made using a microscope interfaced with Bioquant analysis software
152 (Bioquant OSTEO 7.20.10; Bioquant Image Analysis Co., TN, USA). Measurements were carried out on two
153 sections per animal to increase the probability of finding cracks. A region of interest approximately 5×5 mm,
154 located 1 mm below the cranial plateau, was used for sampling, and linear microcracks were identified as
155 previously described [34]. Measurements included crack length (Cr.Le; 200 \times magnification) (μm) and crack
156 number (Cr.N; 100 \times magnification), with calculations of crack density (Cr.Dn = Cr.N/bone area) ($/\text{mm}^2$) and
157 crack surface density (Cr.S.Dn = Cr.N \times Cr.Le / bone area) ($\mu\text{m}/\text{mm}^2$).

158

159 **2.4 Bone microarchitecture assessment by backscattered electron microscopy**

160 The resin-embedded L4 vertebrae blocks prepared for microdamage analysis were cut with a saw, polished to a
161 1 μm diamond finish, then carbon coated. We used a scanning electron microscope (XL30; Philips/FEI,
162 Oregon, USA) fitted with a backscattered electron detector (Philips/FEI). The signal was calibrated using C
163 ($Z = 6$) and Al ($Z = 13$), then the settings were changed to increase the contrast of the bone signal ($Z = \text{approx.}$
164 10). During the acquisition session, we controlled the drift of the signal using SiO_2 as a standard (only for
165 slight adjustments). The accelerating voltage was 20 kV. Digital images were collected at 80 \times magnification;
166 adjacent images were obtained on each block.

167 Image analysis was performed with a Quantimet 500 IW using Qwin Pro (Leica Microsystems,
168 Cambridge, UK). The images were converted to binary images using a constant threshold of 85. The binary
169 images were then skeletonized and pruned to quantify the number of nodes ($/\text{mm}^2$), number of termini ($/\text{mm}^2$),
170 and different types of struts [32]. We calculated the lengths of node-to-node struts (mm/mm^2), node-to-
171 terminus struts (mm/mm^2), and terminus-to-terminus struts (mm/mm^2), and the total strut length (mm/mm^2).
172 Of these parameters, the increase in the number of nodes, node-to-node struts, and node-to-terminus struts can
173 be related to the connectedness of the structure. Struts reaching the borders of the images were not considered
174 except for the total strut length.

175 **2.5 Collagen crosslink analysis**

176 The procedure to analyze collagen crosslinks in bone after the density fractionation was as reported
177 previously [27][29][30]. Briefly, density-fractionated bone powders of the third lumbar vertebrae were
178 subjected to the collagen crosslink analysis. Fractionated bone powders were pooled into two fractions: low-
179 density fraction ($< 2.0 \text{ mg/mL}$) and high-density fraction ($\geq 2.0 \text{ mg/mL}$). We defined the boundary line
180 between the low- and high-density fractions at 2.0 mg/mL based on the report by Sodek et al.[31]. By
181 separating bone at the 2.0 mg/mL boundary line, we obtained sufficient bone from both low- and high-density
182 fractions for triplicate analyses of two different density fractions, suitable for estimating the collagen
183 maturation process [29][30]. Toluene and bromoform used for the bone density fractionation do not affect the
184 biochemical nature of bone collagen and its crosslinks [30].

185 Each sample of bone powder was demineralized twice with 0.5 M EDTA in 50 mM Tris buffer (pH 7.4)
186 for 96 h at 4°C. The demineralized bone residues were then suspended in 0.15 M potassium phosphate buffer
187 (pH 7.6) and reduced at 37°C with NaBH₄. The reduced specimens were hydrolyzed in 6 N HCl at 110°C for
188 24 h. Hydrolysates were analyzed for the content of crosslinks and hydroxyproline on a Shimadzu LC9 HPLC
189 fitted with a cation exchange column (0.9 × 10 cm, Aa pack-Na; JASCO, Ltd., Tokyo, Japan) linked to an
190 inline fluorescence flow monitor (RF10AXL; Shimadzu, Shizuoka, Japan). It was assumed that collagen
191 weighed 7.5 times the measured hydroxyproline weight with a molecular weight of 300,000. The resulting data
192 were used to calculate the cross-link values as mol/mol of collagen. Reducible immature divalent crosslinks
193 (dehydrodihydroxylysinoxorleucine, deH-DHLNL; dehydrohydroxylysinoxorleucine, deH-HLNL; and
194 dehydrolysinoxorleucine, deH-LNL) were identified and quantified according to their respective reduced
195 forms (dihydroxylysinoxorleucine, DHLNL; hydroxylysinoxorleucine, HLNL; and lysinoxorleucine, LNL).
196 The mature crosslinks and common amino acids such as hydroxyproline were detectable with post-column
197 derivatization using *o*-phthalaldehyde, whereas the mature trivalent pyridinium crosslinks (pyridinoline, Pyr;
198 and deoxypyridinoline, Dpyr) and the non-enzymatic crosslink pentosidine (Pen) were detected by natural
199 fluorescence. The HPLC system we established enabled us to determine enzymatic and non-enzymatic
200 crosslink contents within a linear range of 0.2 to 600 pmol in bone specimens. The total content of AGEs as
201 well as pentosidine content was determined by the method of Tang et al.[35]. Briefly, AGE content was
202 determined by using a fluorescence reader at 370 nm excitation and 440 nm emission (JASCO FP6200,
203 JASCO) and normalized to a quinine sulfate standard. Data were expressed as mean ± standard deviation (SD).

204 ***2.6 Bone histology***

205 Each animal had been subcutaneously injected with 8 mg/kg of calcein 15 days and 5 days prior to termination.
206 L2 vertebrae were collected for bone histology. All bone samples were fixed in 10% neutral-buffered formalin
207 for 3 days and transferred to 70% ethanol. Bones were then trimmed, dehydrated, and embedded in methyl
208 methacrylate. Sagittal histological sections of L2 vertebrae were observed under a light microscope after
209 toluidine blue staining for evaluating bone histology, or under a fluorescence microscope for visualizing
210 calcein labeling (Nikon Eclipse E800; Nikon, Tokyo, Japan).

211 **2.7 Statistical analysis**

212 **2.7.1 Density fractionation;**

213 Data were analyzed as previously described [36]. The way to estimate if two distributions differ is to calculate
214 the logit function of each distribution. For these experiments, the logit number of each sample is: $\ln(\text{proportion}$
215 $\text{of } \geq 2.00 \text{ mg/mL fraction}) - \ln(\text{proportion of } < 2.00 \text{ mg/mL fraction})$. The statistical analyses were performed
216 using SPSS software (IBM, Armonk, NY, USA).

217 **2.7.2 Bone microdamage assessment**

218 Data from each experiment was evaluated separately using the SAS software package (SAS Institute, Inc.,
219 Cary, NC, USA). Group variance was evaluated using the Shapiro-Wilks test. If the assumption of normality
220 was met ($p \geq 0.05$), a parametric two-tailed t-test was performed to determine differences between the control
221 and treated groups. If the assumption of normality was not met, for either/both groups ($p < 0.05$), the non-
222 parametric Wilcoxon-Mann-Whitney test (two-tailed) was used to compare the control and treated groups.
223 Spearman's rank correlation coefficient method was used to analyze the correlation between the contents of
224 Pen and total fluorescent AGEs in bone. For all comparisons, both parametric and non-parametric tests are
225 reported, with $p < 0.05$ considered statistically significant.

226 **2.7.3 Bone microarchitecture assessment**

227 The statistical analyses were performed using SPSS software (IBM, Armonk, NY, USA). Independent
228 Student's t-tests were done between the ELD treatment group and corresponding vehicle control group for
229 each experiment. P-values less than 0.05 were considered significant.

230 **2.7.4 Collagen crosslink analysis**

231 Analysis of variance was performed using the SAS software package (SAS Institute). The significance of
232 differences (in comparison with the OVX-vehicle control group) was determined using the Tukey-Kramer test.
233 P-values less than 0.05 were considered statistically significant.

234 3. Results

235 3.1 *Bone mineralization assessment by density fractionation*

236 Treatment with 0.1 µg/kg or 0.3 µg/kg of ELD shifted the distribution profile of bone mineralization to a
237 higher density compared with the corresponding vehicle controls (Fig. 1A, 1B). The average logit number of
238 the ELD 0.3 µg/kg group and the OVX-Veh2 control group were -0.394 and 1.009, respectively (Fig. 1D). The
239 shift in the value of the logit function between two groups was significant ($p = 0.0002$). The average logit
240 number of the ELD 0.1 µg/kg group and the OVX-Veh1 were 1.439 and 1.842, respectively (Fig. 1C). But
241 there was no significant difference between the value of the logit function of the ELD 0.1 µg/kg group and the
242 OVX-Veh1 control group ($p = 0.270$).

243 3.2 *Bone microdamage*

244 There were no significant differences between the ELD 0.1 µg/kg group and OVX-Veh1 control group for any
245 of the microdamage variables measured (Table 1). The ELD 0.3 µg/kg group had half as many cracks as the
246 OVX-vehicle group ($p = 0.052$). When normalized for bone area, the ELD 0.3 µg/kg group had significantly
247 lower crack density ($p = 0.027$) and crack surface density ($p = 0.049$) as compared to the OVX-Veh2 control
248 group. There was no significant difference between groups for crack length (Table 1).

249 3.3 *Bone microarchitecture*

250 The results of the strut analysis of the trabecular bone from the L4 vertebrae are shown in Table 2. These data
251 were derived from the backscattered electron microscopic images (Fig. 2). The results are consistent with
252 increased trabecular connectivity as demonstrated by a higher number of nodes and node-to-node strut lengths
253 as well as a lower number of termini and terminus-to-terminus strut lengths with both 0.1 µg/kg and 0.3 µg/kg
254 of ELD.

255 3.4 *Enzymatic and non-enzymatic collagen crosslinks*

256 The total enzymatic crosslink content (the sum of DHLNL, HLNL, LNL, Pyr, and Dpyr) in both low- and
257 high-density fractions from bones of the ELD-treated (0.1 and 0.3 µg/kg) groups were significantly higher than

258 those of the corresponding OVX-vehicle control groups (Fig. 3A, 3C, and Table 3). Notably, immature
259 reduced forms of enzymatic crosslinks (DHLNL, HLNL, and LNL) significantly and markedly increased with
260 ELD treatment, whereas increases in mature non-reducible forms of enzymatic crosslinks (Pyr and Dpyr) by
261 the ELD treatment were significant but moderate (Table 3).

262 We calculated the biochemical collagen maturation index, defined as the ratio of total mature enzymatic
263 crosslinks (Pyr+Dpyr) to total immature crosslinks (DHLNL+HLNL+LNL) [29][30][35] (Table 3). The
264 maturation index showed a significant reduction in both low- and high-density fractions of bone from the
265 ELD-treated groups compared with those from the corresponding OVX-vehicle control groups. Conversely,
266 contents of Pen, the non-enzymatic AGE type of crosslink, were significantly lower in both low- and high-
267 density fractions from bones of the ELD-treated groups than in those of the corresponding OVX-vehicle
268 control groups (Fig. 3B, 3D, and Table 3).

269 Regarding total fluorescent AGEs, results similar to those of Pen are evident (Table 3). Pen is just a
270 component of various AGEs, and because the content of Pen in bone correlates positively with the total
271 amount of fluorescent AGEs, the measurement of Pen can be used as a surrogate marker of total AGE
272 formation [37]. In this study, we also confirmed that there was a significant and positive correlation between
273 the content of Pen and the total fluorescent AGEs in bone ($R^2 = 0.339$, $p < 0.0001$) (data not shown). The
274 contents of the senescent crosslinking Pen and total contents of AGEs were significantly higher in the high-
275 density fractions than in the low-density fractions in both the OVX-vehicle and ELD-treated groups (all
276 $p < 0.05$, Table 3).

277 **3.5 Bone histology**

278 Trabecular bone sections of the ELD-treated cynomolgus monkeys demonstrated many “bud-like” bone
279 formation patterns (Fig. 4A). Convex, bud-like focal deposits of bone matrix were observed on the smooth line
280 forming the boundary to the underlying bone matrix. Bone specimens from the ELD-treated OVX monkeys
281 revealed various bone buds labeled with continuous lines of calcein (Fig. 4B). No monkeys in the vehicle-
282 treated control group in this study had such focal bone formation. These findings in the ELD-treated monkeys

283 are similar to the histological features of bone minimodeling found in our previous studies using ELD-
284 administered OVX rats [8][38].

285 **4. Discussion**

286 We have previously reported that ELD treatment for 6 months increased lumbar spine BMD, suppressed
287 ovariectomy-induced increases in bone turnover markers, and improved biomechanical parameters of lumbar
288 vertebrae in OVX cynomolgus monkeys [6]. Histomorphometrical analysis of bone revealed that both bone
289 formation and bone resorption parameters in the trabecular bones of the lumbar vertebrae were suppressed by
290 the ELD treatment. Therefore, we concluded that, in a bone-remodeling animal model, ELD increases BMD
291 and improves bone biomechanical properties, at least, in part, by normalizing bone turnover. In that study,
292 treatment with ELD at doses of 0.1 µg/kg and 0.3 µg/kg for 6 months increased lumbar spine (L1–L4) BMD
293 by 7.7% and 10.8%, respectively, compared to the corresponding OVX-vehicle controls, and increased the
294 peak load of intact L3 vertebra in a compression test by 26.4% and 84.2%, respectively. Those observations
295 indicated that the ELD treatment improved bone mechanical properties more than could be explained by the
296 increase in BMD. Comparing those results with the results from studies of other anti-osteoporotic agents in the
297 OVX monkey model, even though bisphosphonates such as clodronate, ibandronate, and minodronate
298 increased lumbar spine BMD by more than 10%–30%, they improved peak load in the compression test by
299 only approximately 30% [39][40][41].

300 Bone density fractionation of the vertebral body in the current study revealed that the ELD treatment
301 slightly shifted bone mineralization to a higher density. As previously reported, osteoid surface (OS/BS),
302 osteoid thickness (O.Th), and activation frequency (Ac.f) were reduced in the lumbar vertebral trabecular bone
303 of the ELD-treated groups compared with those of the OVX control groups [6]. However, ELD treatment did
304 not overly affect osteoid maturation time (Omt). These bone histomorphometrical data indicate that ELD does
305 not accelerate osteoid mineralization and facilitates secondary mineralization in the vertebral bone by slowing
306 down bone remodeling. Trabecular connectivity of the lumbar vertebra was increased by the ELD treatment.
307 Trabecular bones from ELD-treated groups had higher node-to-node strut length and lower terminus-to-

308 terminus strut length than did trabecular bones from the OVX control groups. In general, if BMD is equal,
309 higher connectivity means a stronger bone. Therefore, improvement of trabecular connectivity in lumbar
310 vertebrae may partly account for the improvement of biomechanical properties in compression.

311 There are several reports on the effects that various agents for the treatment of osteoporosis have on the
312 material properties of bone. Long-term treatment with bisphosphonates has been shown to increase the
313 accumulation of non-enzymatic AGE crosslinks and increase bone microdamage in canine trabecular bone [22]
314 [42][43]. Damaged bone tissue is slowly resorbed by osteoclasts and replaced by new bone tissue during the
315 bone remodeling process. When bone remodeling is suppressed with agents such as bisphosphonates, the
316 microdamage in the old bone tissues accumulates due to both a reduction in the removal of damaged bone
317 tissue and an increase in its formation. There is no concrete evidence that the levels of microdamage
318 accumulation that occur *in vivo* weaken overall bone mechanical properties. We did not find increases in any
319 parameters of bone microdamage in the bone specimens from the ELD-treated groups (Table 2) compared with
320 those from OVX control groups. Rather, 0.3 µg/kg of ELD treatment reduced crack density and crack surface
321 density of lumbar vertebral bones. Even though ELD treatment suppressed bone remodeling, it does not seem
322 to increase the accumulation of bone microdamage. This favorable effect on microdamage may be due to there
323 being no increase in the formation of AGEs in bone by the treatment with ELD.

324 Fibrillar type I collagen is the most abundant matrix protein in bone [3][22][29][30][34][44]. Stabilization
325 of newly formed collagen fiber is initially achieved by the formation of covalent crosslinks between
326 neighboring collagen molecules, and this covalent intermolecular crosslinking by post-translational
327 modification is crucial for the stability of collagen fibrils. These collagen crosslinks can be divided into two
328 types: crosslinks controlled by lysyl hydroxylase (LH) and lysyl oxidase (LOX) (enzymatic crosslinks) and
329 AGE crosslinks (non-enzymatic crosslinks). Collagen crosslink formation is thought to affect the mechanical
330 properties of bone at a material level. Impaired formation of enzymatic crosslinks and/or an increase in non-
331 enzymatic crosslinks in bone collagen may contribute to the impaired bone mechanical properties seen in
332 aging, osteoporosis, and diabetes mellitus [3][17][19][20][22][23][28][29][30]. Active vitamin D, calcitriol,
333 has been shown to strongly upregulate gene expression of lysyl hydroxylases (LH1 and LH2b) and lysyl
334 oxidase (LOXL2) in osteoblasts *in vitro* [45]. Treatment with the active vitamin D₃ analog alfacalcidol

335 stimulates LOX expression, and dose-dependently increases total enzymatic collagen crosslink content
336 (DHLNL, HLNL, LNL, Pyr, Dpyr) in tibial cortical bones of OVX rats *in vivo* [46]. We also demonstrated in a
337 fracture repair OVX rat model that alfacalcidol stimulated the formation of enzymatic crosslinks in callus
338 collagen, resulting in an increase of bone strength [22]. In the current study, ELD treatment increased the total
339 contents of enzymatic collagen crosslinks (DHLNL, HLNL, LNL, Pyr, Dpyr) in the lumbar vertebral bones of
340 cynomolgus monkeys, regardless of their bone mineralization status. This observation suggests that, similar to
341 calcitriol, ELD increases the production of both immature divalent and mature trivalent enzymatic crosslinks
342 by directly stimulating LH or LOX gene expression in bones. Therefore, ELD may be able to improve collagen
343 crosslinks in bones independently from bone turnover. We have reported that, in the OVX monkey model,
344 elevated enzymatic crosslink formation after treatment with teriparatide is an independent factor contributing
345 to increasing vertebral bone strength [16]. Therefore, the increase in the content of enzymatic crosslinks by
346 ELD treatment in the OVX primate model (Fig. 3 and Table 3) may contribute to increased bone strength [6].
347 The accumulation of young, newly formed collagen matrix by minimodeling may account for the observation
348 that accumulation of senescent types of crosslinking AGEs in bone after treatment with ELD is less than that in
349 bone from the OVX-vehicle control group.

350 Histological analysis of trabecular bone sections from ELD-treated cynomolgus monkeys showed bone
351 minimodeling, which is characterized by focal bone apposition directly to quiescent surfaces without prior
352 bone resorption, as reported previously in OVX rats [8]. At sites of minimodeling, the mineralization process
353 seems intact (Fig. 4). We do not know how this focal bone formation starts. However, small-size bone
354 formation may affect the bone microarchitecture, and may ultimately change the degree of mineralization of
355 trabecular bone.

356 One of the limitations in this study is the substantial differences exist in the biological parameters between
357 the two OVX-control groups due to the biological variability of nonhuman primates. For each experiment, we
358 selected animals from the colonies with the same criteria, and randomly assigned to either OVX-control group
359 or ELD-treated group. Thus, it is suitable to compare the results from the OVX-control group with those from
360 the ELD-treated group within the experiment. However, it may be difficult to discuss the dose-dependent
361 effects of ELD from this study. We believe this variability does not confound the interpretation of the data.

362 Other limitations are the absence of sham-operated control groups and the relatively short period of treatment.
363 Not all of the measurements were performed on the same bone: Bone mechanical properties, bone
364 mineralization, and collagen crosslinks were evaluated in L3 vertebrae; bone microdamage and bone
365 microarchitecture were measured in L4 vertebrae; and assessment of bone histology was conducted with L2
366 vertebrae. Therefore, the improvement of bone mechanical properties seen in this study might not directly
367 connect with the results from other analyses. Nevertheless, we can conclude that the increase in the degree of
368 bone mineralization and the contents of enzymatic collagen crosslinks may partly contribute to the increased
369 bone strength of the lumbar vertebral bone in OVX cynomolgus monkeys treated with ELD. We conclude that
370 ELD provides positive effects on bone quality, complementing our earlier studies showing its positive effects
371 on bone mass and strength.

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376

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- 495

496 **Figures and Tables**

497 **Table 1** Microdamage analysis of vertebral trabecular bone

	Crack number	Crack length (μm)	Crack density ($/\text{mm}^2$)	Crack surface density ($\mu\text{m}/\text{mm}^2$)
OVX-Veh1	10.6 ± 3.3	78.0 ± 3.6	1.21 ± 0.23	97.7 ± 21.0
ELD 0.1 $\mu\text{g}/\text{kg}$	14.2 ± 4.1	77.7 ± 2.2	1.63 ± 0.51	132.5 ± 43.6
	$p = 0.496$	$p = 0.940$	$p = 0.464$	$p = 0.478$
OVX-Veh2	20.8 ± 4.9	75.6 ± 3.2	2.06 ± 0.45	159.5 ± 36.2
ELD 0.3 $\mu\text{g}/\text{kg}$	10.1 ± 2.0	80.5 ± 3.8	0.92 ± 0.18	77.3 ± 17.1
	$p = 0.052$	$p = 0.353$	$p = 0.027$	$p = 0.049$

498 Data are represented as mean \pm SEM. *P*-values less than 0.05 are considered statistically significant.

499

500 **Table 2** Evaluation of trabecular connectivity in lumbar vertebrae

Experiment 1	OVX-Veh1	ELD 0.1 µg/kg	<i>P</i> -value
Number of termini (/mm ²)	2.55 ± 0.26	2.19 ± 0.19	0.253
Number of nodes (/mm ²)	1.68 ± 0.15	2.23 ± 0.15	0.020
Terminus to terminus strut length (mm/mm ²)	0.24 ± 0.02	0.13 ± 0.02	0.003
Node to terminus strut length (mm/mm ²)	0.78 ± 0.06	0.76 ± 0.04	0.771
Node to node strut length (mm/mm ²)	0.79 ± 0.10	1.12 ± 0.07	0.015
Total strut length (mm/mm ²)	2.00 ± 0.10	2.25 ± 0.09	0.088
Anisotropy ratio	0.80 ± 0.02	0.81 ± 0.01	0.622
Experiment 2	OVX-Veh2	ELD 0.3 µg /kg	<i>P</i> -value
Number of termini (/mm ²)	2.82 ± 0.12	1.89 ± 0.2	0.002
Number of nodes (/mm ²)	1.97 ± 0.09	2.3 ± 0.13	0.079
Terminus to terminus strut length (mm/mm ²)	0.24 ± 0.02	0.12 ± 0.02	0.002
Node to terminus strut length (mm/mm ²)	0.84 ± 0.02	0.78 ± 0.07	0.388
Node to node strut length (mm/mm ²)	0.82 ± 0.08	1.11 ± 0.08	0.025
Total strut length (mm/mm ²)	2.09 ± 0.07	2.2 ± 0.08	0.364
Anisotropy ratio	0.79 ± 0.02	0.81 ± 0.02	0.614

501 Data are presented as mean ± SEM. *P*-values less than 0.05 are considered statistically significant.

502 |

503 **Table 3** Comparison of enzymatic and non-enzymatic crosslink contents between the OVX-vehicle controls
 504 and the ELD-treated groups

	Enzymatic crosslinks					Non-enzymatic crosslinks		
	Immature divalent forms (mol/mol of collagen)			Mature trivalent forms (mol/mol of collagen)		Collagen maturation index (Pyr+Dpyr) /(DHLNL+HLNL+LNL)	Total AGEs (ng quinine/mg of collagen)	Pentosidine (mmol/mol of collagen)
	DHLNL	HLNL	LNL	Pyr	Dpyr			
Low-density fraction								
OVX-Veh1	0.522 ± 0.060	0.139 ± 0.031	2.131 ± 0.382	0.105 ± 0.007	0.018 ± 0.007	0.185 ± 0.015	129 ± 11.5	2.131 ± 0.382
ELD 0.1 µg/kg	0.636 ± 0.118*	0.260 ± 0.053*	1.753 ± 0.258*	0.132 ± 0.012*	0.035 ± 0.007*	0.189 ± 0.027	118.8 ± 11.8	1.753 ± 0.258*
High-density fraction								
OVX-Veh1	0.466 ± 0.056	0.153 ± 0.028	2.742 ± 0.570 [#]	0.103 ± 0.013	0.023 ± 0.009	0.202 ± 0.025	151.3 ± 30.0 [#]	2.742 ± 0.570 [#]
ELD 0.1 µg/kg	0.620 ± 0.182*	0.298 ± 0.078*	2.097 ± 0.349*	0.119 ± 0.007* [#]	0.031 ± 0.005*	0.172 ± 0.045	141.1 ± 12.9 [#]	2.097 ± 0.349* [#]
Low-density fraction								
OVX-Veh2	0.413 ± 0.075	0.150 ± 0.070	2.537 ± 0.588	0.112 ± 0.018	0.026 ± 0.011	0.249 ± 0.045	132.3 ± 14.0	2.537 ± 0.588
ELD 0.3 µg/kg	0.738 ± 0.133*	0.263 ± 0.063*	1.855 ± 0.448*	0.122 ± 0.016	0.044 ± 0.006*	0.169 ± 0.035*	110.0 ± 26.2*	1.855 ± 0.448*
High-density fraction								
OVX-Veh2	0.410 ± 0.088	0.143 ± 0.063	2.943 ± 0.749	0.119 ± 0.018	0.029 ± 0.013	0.275 ± 0.046	161.0 ± 27.6 [#]	2.943 ± 0.749
ELD 0.3 µg/kg	0.734 ± 0.161*	0.276 ± 0.077*	2.166 ± 0.417*	0.126 ± 0.016	0.037 ± 0.006 [#]	0.165 ± 0.030*	140.5 ± 25.0 [#]	2.166 ± 0.417*

505 Data are represented as mean ±SD.

506 *: $p < 0.05$ versus OVX-vehicle control.

507 [#]: $p < 0.05$ between low-density fraction and high-density fraction in the same treatment groups

508 Abbreviations: dihydroxylysinoxorleucine, DHLNL; hydroxylysinoxorleucine, HLNL; lysinoxorleucine, LNL;
 509 pyridinoline, Pyr; deoxypyridinoline, Dpyr; pentosidine, Pen.
 510
 511

512

513 **Figure 1.** Distribution profiles of bone mineralization as assessed by density fractionation.
514 **(A)** Experiment 1: ELD 0.1 $\mu\text{g}/\text{kg}$ group (grey bars) versus OVX-vehicle control (OVX-Veh1; white bars).
515 **(B)** Experiment 2: ELD 0.3 $\mu\text{g}/\text{kg}$ group (grey bars) versus OVX-vehicle control (OVX-Veh2; white bars).
516 Data are presented as mean + SEM. Box-and-whisker plots show median, 25th and 75th quartiles, and
517 complete data range of the logit numbers of Experiment 1 **(C)** and Experiment 2 **(D)**
518 .

519 **Figure 2.** Backscattered electron microscopic imaging of the sagittal plane of lumbar vertebrae (L4).
520 **(A)** OVX-vehicle control (OVX-Veh1), **(B)** ELD 0.1 $\mu\text{g}/\text{kg}$ group, **(C)** OVX-vehicle control (OVX-Veh2),
521 **(D)** ELD 0.3 $\mu\text{g}/\text{kg}$ group.
522

523 **Figure 3.** Collagen crosslinks in primate vertebral bone (L2). Bone samples were divided into low-density
524 fraction ($< 2.0 \text{ mg}/\text{mL}$) and high-density fraction ($\geq 2.0 \text{ mg}/\text{mL}$).
525 **(A)** Total content of enzymatic crosslinks: the sum of immature (DHLNL, HLNL, LNL) and mature (Pyr,
526 Dpyr) crosslinks in bone from the OVX-vehicle control (OVX-Veh1) and ELD 0.1 $\mu\text{g}/\text{kg}$ group, **(B)** Content
527 of non-enzymatic crosslink (Pen) in bone from the OVX-vehicle control (OVX-Veh1) and ELD 0.1 $\mu\text{g}/\text{kg}$
528 group, **(C)** Total content of enzymatic crosslinks: the sum of immature (DHLNL, HLNL, LNL) and mature
529 (Pyr, Dpyr) crosslinks in bone from the OVX-vehicle control (OVX-Veh2) and ELD 0.3 $\mu\text{g}/\text{kg}$ group,
530 **(D)** Content of non-enzymatic crosslink (Pen) in bone from the OVX vehicle control (OVX-Veh2) and ELD
531 0.3 $\mu\text{g}/\text{kg}$ group.
532 Box-and-whisker plots show median, 25th and 75th quartiles, and complete data range.
533

534 **Figure 4.** Representative histological images of bone minimodeling. Trabecular bone sections of lumbar
535 vertebrae from monkeys treated with ELD 0.3 $\mu\text{g}/\text{kg}$ were observed under a light microscope or fluorescence
536 microscope.

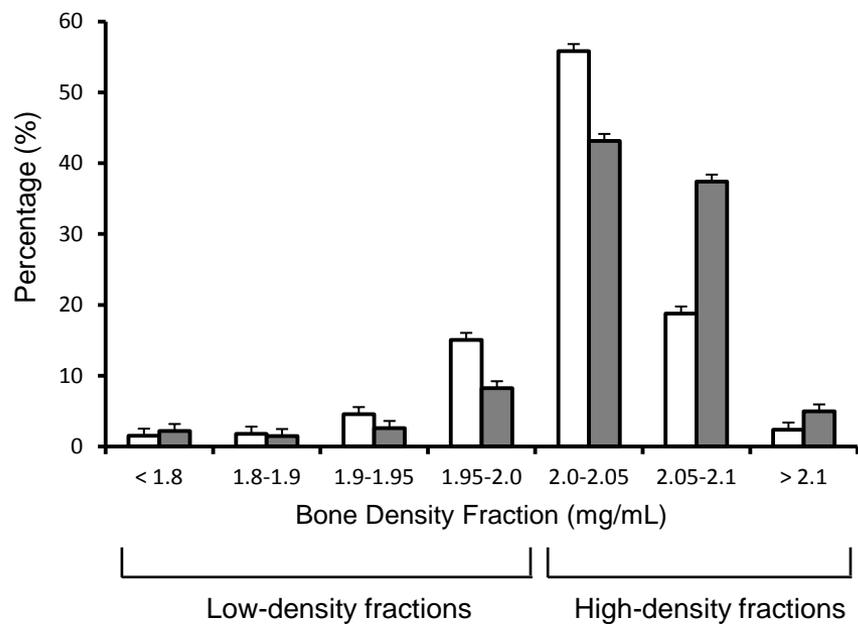
537 **(A)** Histological section with toluidine blue staining shows focal, convex bone (arrowheads)—indicative of
538 minimodeling—forming on the smooth line of the underlying bone matrix (arrows). **(B)** Fluorescence
539 microscopy image of an ELD-treated specimen. Note continuous, convex calcein labeling at the site of bone
540 minimodeling (white arrow).

541 Scale bars, 100 μm .

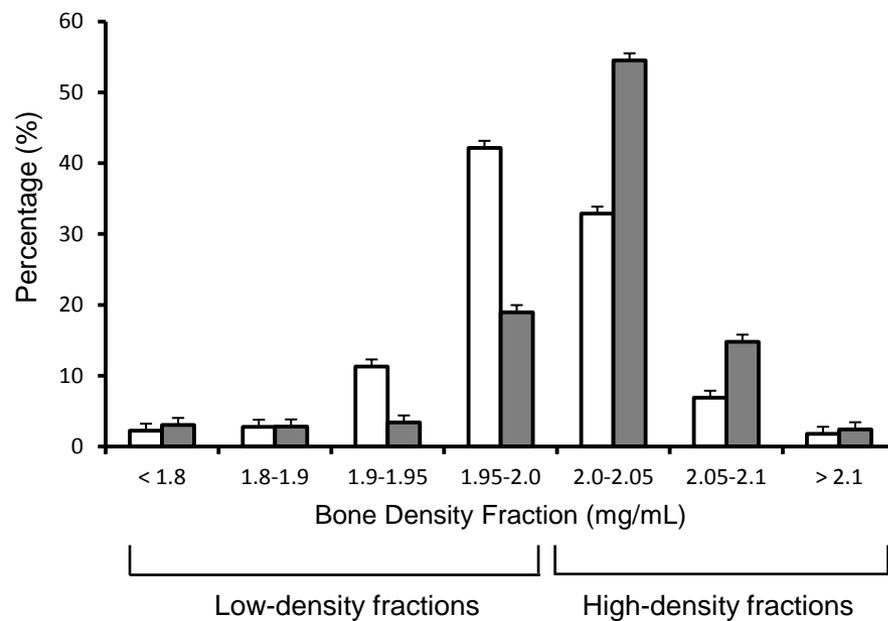
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Figure(s)

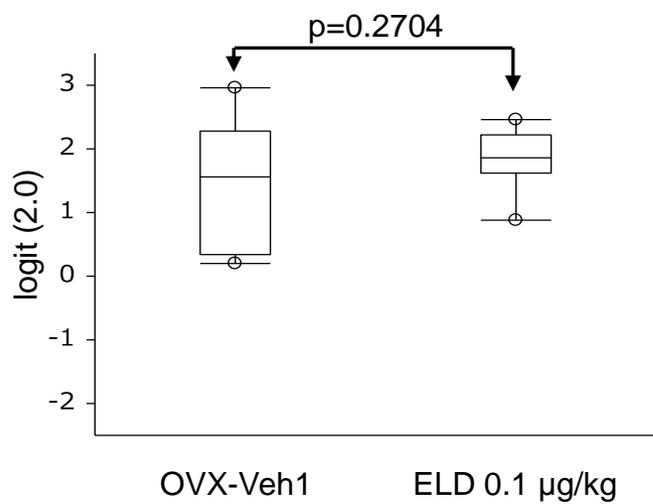
A



B



C



D

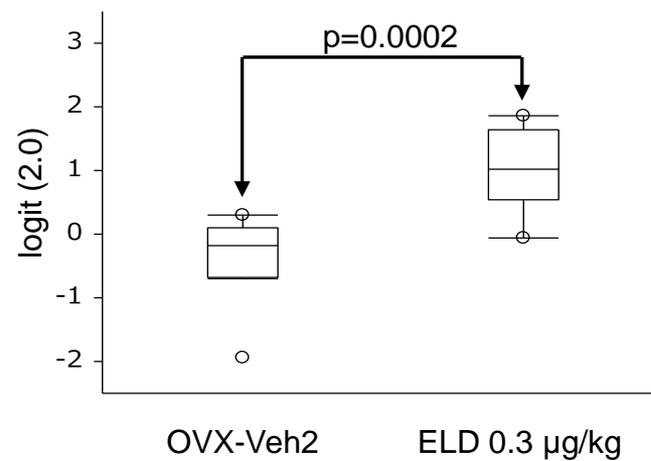
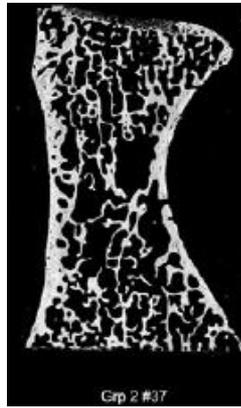


Fig.1

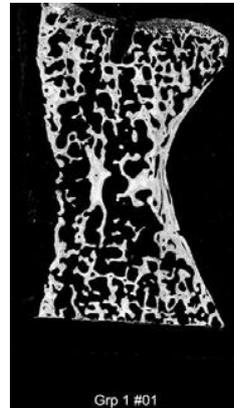
A: OVX-Veh1



B: ELD 0.1 $\mu\text{g}/\text{kg}$



C: OVX-Veh2



D: ELD 0.3 $\mu\text{g}/\text{kg}$

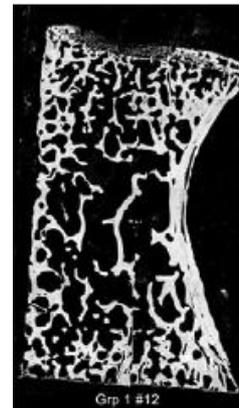


Fig. 2

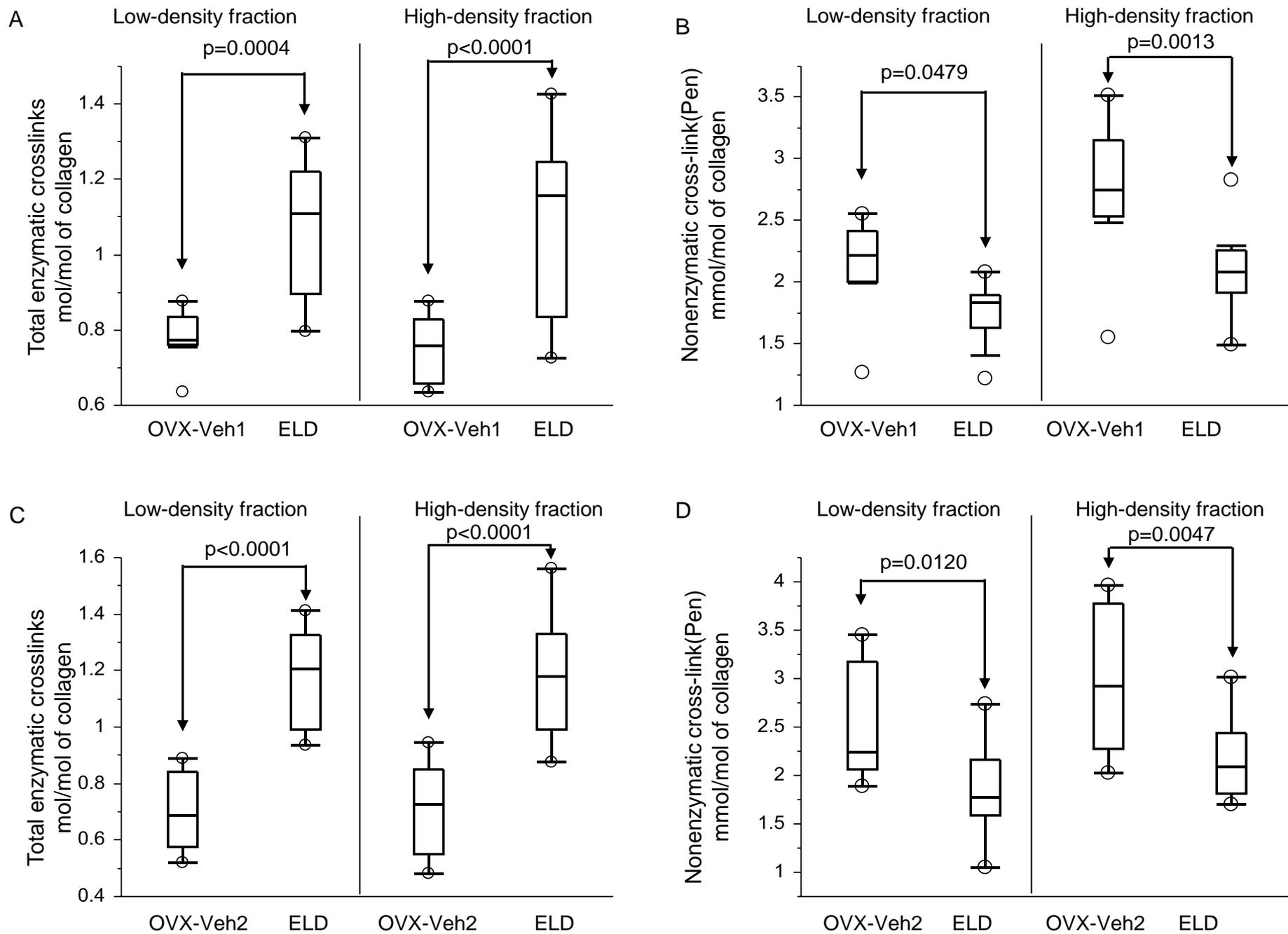
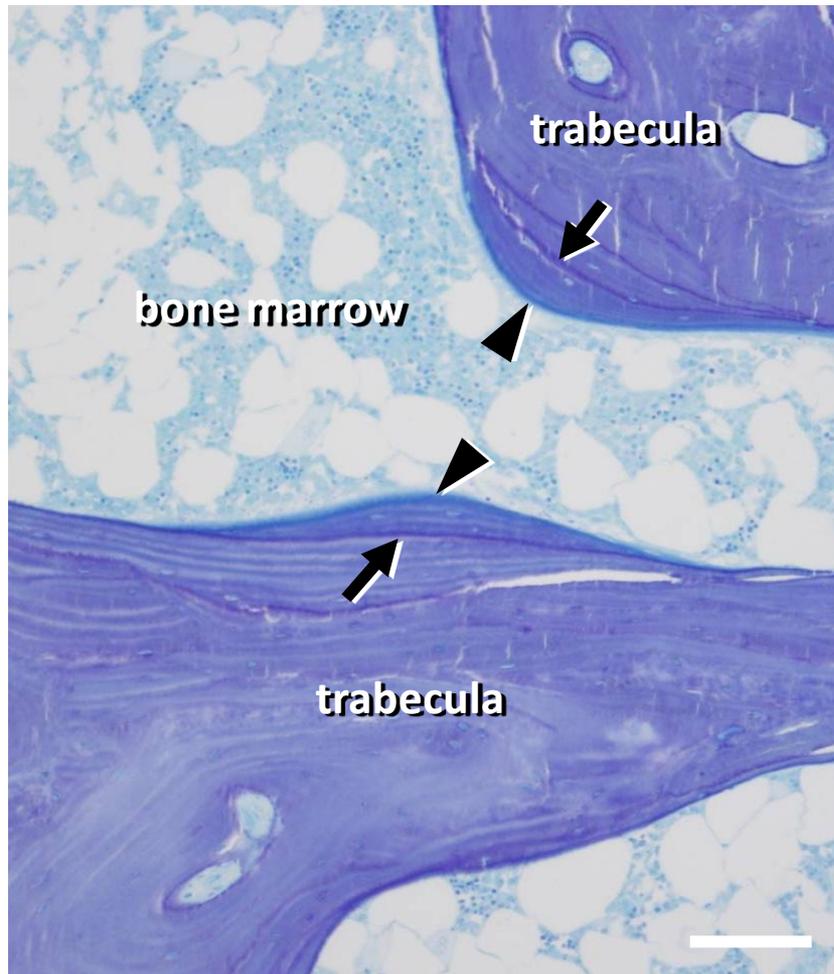


Fig. 3

A



B

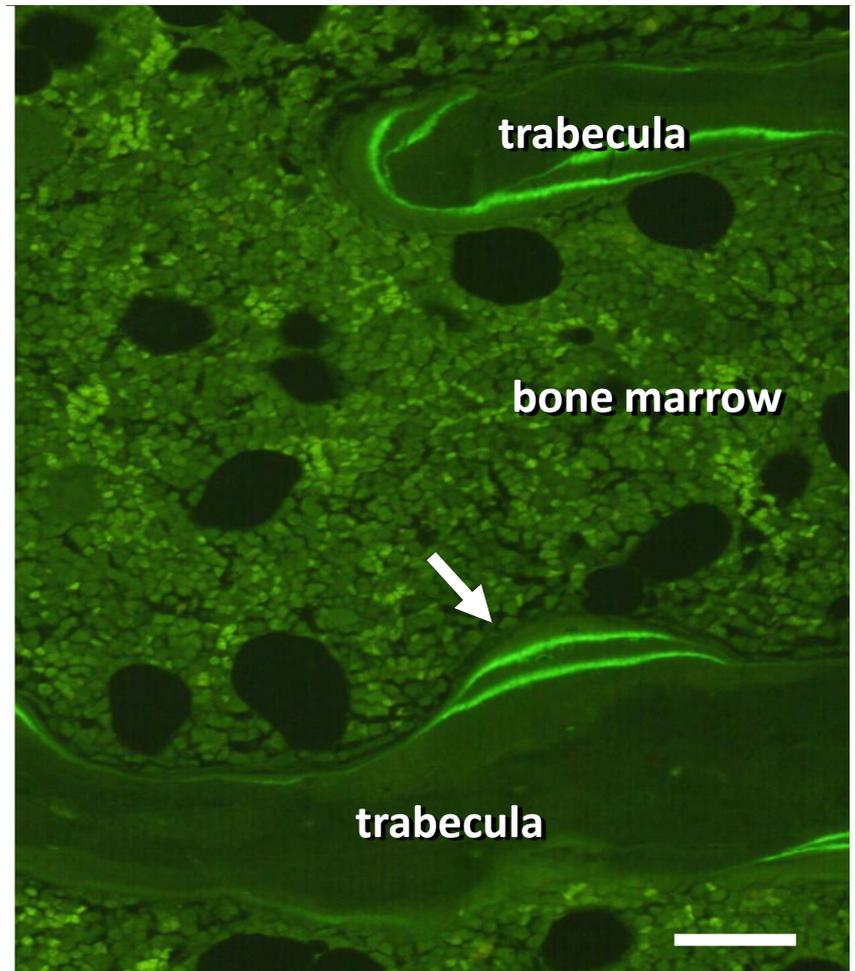


Fig.4