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Introduction

- Osteoporosis is a multifactor disease which interaction between genetic and environmental factors lead to a reduction of bone mineral density accompanied by changes in bone microarchitecture level, leading to a significant decrease in bone strength and an increased fracture risk.
- Acid phosphatase (ACP1) is a cytoplasm enzyme of osteoblast and osteoclast involved in signal transduction associated with regulation of bone metabolism, growth, cell mobility and adhesion.
- It has been demonstrated its importance in bone metabolism verifying an inverse relationship between its expression/activity and those of Src kinase. This, in turn, when increased leads to a decrease in osteoblast differentiation and, consequently, to an imbalance in bone remodeling mechanisms.

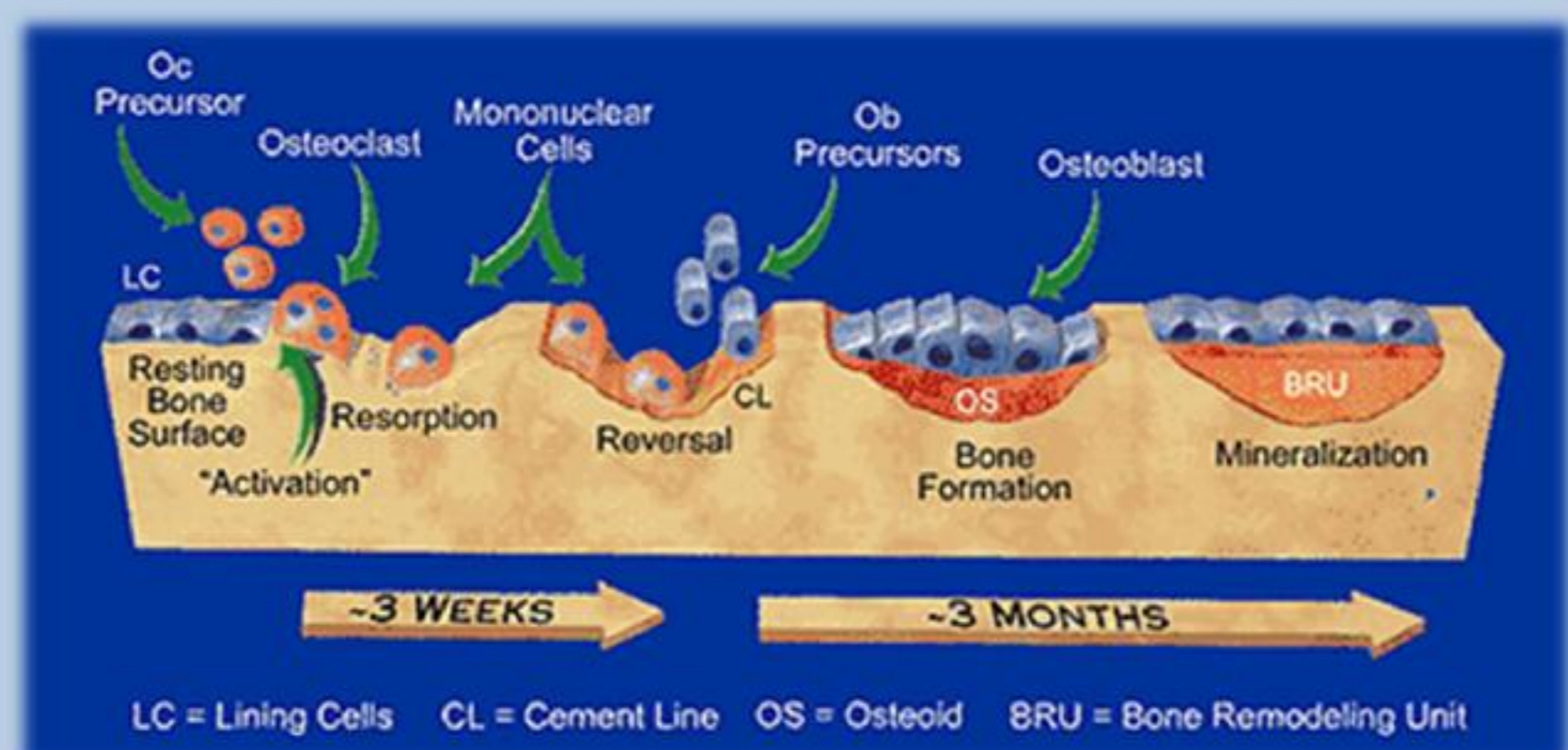


Fig. 1: Bone Remodeling Mechanism

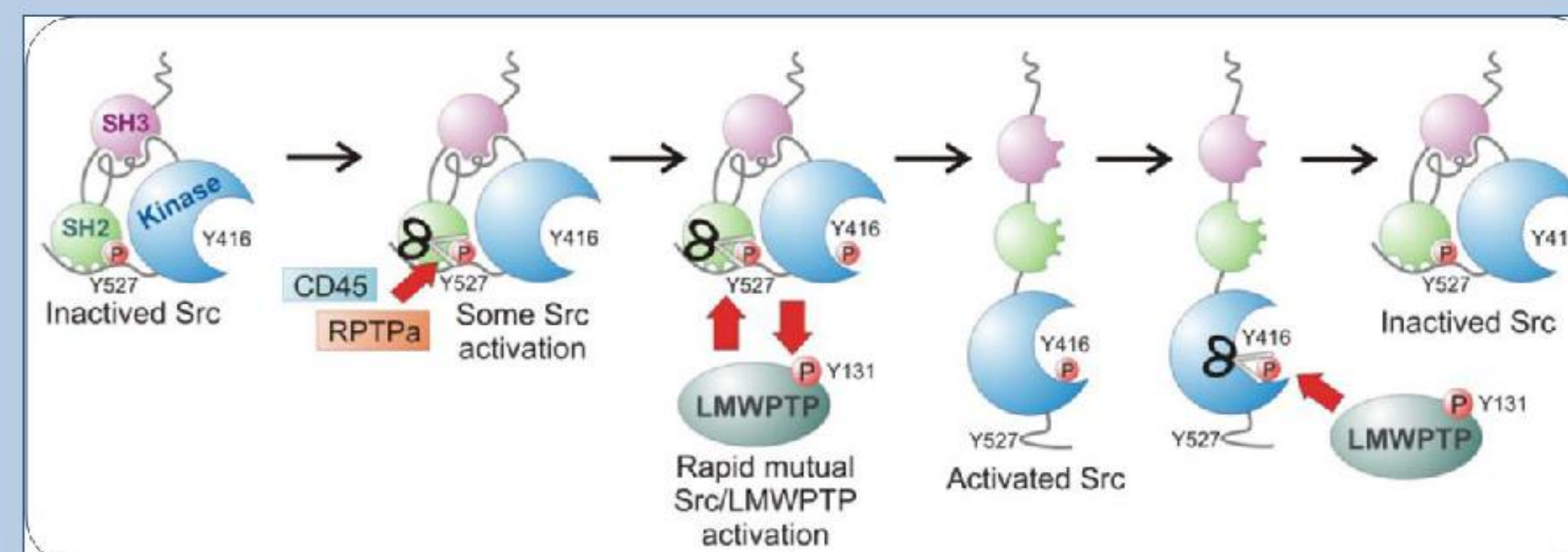


Fig. 2: Src activity modulation by dephosphorylation

- The locus encoding ACP1 is located on the short arm of chromosome 2 (2p25) and contains three most common co-dominant alleles (A, B and C). These give rise to 6 genotypes that result in differences in ACP1 enzyme activity.

Aims

To study the association of protein tyrosine phosphatase (LMW-PTP/ACP1) polymorphism with bone mineral density and metabolic parameters of bone remodelling.

Population

760 subjects:

- 448 normal BMD - (359 Female and 89 Male; 49.7±12.9 years; 30.2±5.4 kg/m²)
- 312 osteoporosis (265 Female and 47 Male; 63.9±10.4 years; 27.16±4.4 kg/m²)

Results

1. Association was found between genetic polymorphism of ACP1 and its enzymatic activity with higher values for C allele carriers (AC, BC), intermediate values for BB and lower values for AA and AB.

ACP1 Genotype	ACP1 activity (mean SD; n)		
	Normal BMD + Osteoporosis	Normal BMD	Osteoporosis
AA/AB	280.42 81.99 (90)	270.37 86.36 (39)	288.11 78.47 (51)
BB	305.76 105.02 (57)	302.68 111.52 (36)	311.02 95.24 (21)
AC/BC	419.65 114.12 (21)	414.82 130.41 (7)	422.06 110.31 (14)
p value	<0,001	0,004	<0,001

2. Comparing the metabolic bone remodelling parameters analysed within ACP1 genotypes, for normal BMD and osteoporosis separately, we found association between genotypes BB/BC/AC and: increased ACP1 and decreased alkaline phosphatase in normal BMD and increased ζ cholesterol, LDL and ACP1 in osteoporosis.

Population	Parameter	ACP1 Genotype		p value
		BB/BC/AC (mean SD; n)	AA/AB (mean SD; n)	
Normal BMD	Acid Phosphatase	320.94 120.61 (43)	270.37 86.36 (39)	0.034
	AP (UI/l)	54.45 14.49 (22)	68.75 19.97 (28)	0.030
Osteoporosis	Acid Phosphatase	355.43 114.17 (35)	288.11 78.48 (51)	0.004
	ζ cholesterol (mg/dl)	232.50 34.31 (40)	216.04 36.29 (42)	0.033
	LDL (mg/dl)	152.90 33.30 (40)	138.23 28.86 (48)	0.029

Conclusion

- In osteoporosis, ACP1 polymorphism appears to modulate some metabolic parameters associated with a decrease in BMD, including total cholesterol, LDL and ACP1 activity.

Methods

- BMD (g/cm²) was accessed at the lumbar spine, femoral neck and distal radius, as well as the total body soft tissue composition by DEXA.
- Metabolic bone remodelling parameters were analyzed: LDL, HDL, total cholesterol, triglycerides, HOMA_{IR}, alkaline phosphatase (AP) and osteocalcin.
- ACP1 activity was measured by spectrophotometry.
- ACP1 polymorphism was evaluated by PCR.

- Statistical analysis with SPSS 21.0 and Primer of Biostatistics were applied to the results.

3. Comparing the metabolic bone remodelling parameters analysed between normal BMD and osteoporosis we found: increased LDL, ζ cholesterol, alkaline phosphatase, osteocalcin and ACP1 and decreased HOMA in osteoporosis.

Parameter	Normal BMD (mean SD; n)	Osteoporosis (mean SD; n)	p value
ζ cholesterol (mg/dl)	197.15 39.57 (361)	211.47 42.33 (270)	<0.001
LDL (mg/dl)	117.35 33.40 (327)	133.72 117.35 (260)	<0.001
AP (UI/l)	68.12 22.43 (313)	74.71 34.44 (185)	0.021
Osteocalcin (ng/ml)	6.47 5.94 (241)	8.99 11.24 (157)	0.010
HOMA _{IR}	2.35 2.38 (325)	1.79 1.38 (175)	<0.001

4. Studying the correlation between significant metabolic bone remodelling parameters for each population, we found: positive correlation between alkaline phosphatase and osteocalcin and HOMA_{IR} in normal BMD and positive correlation between alkaline phosphatase and LDL, ζ cholesterol and osteocalcin in osteoporosis.

Population	Parameter	Correlation (n)	p value
Normal BMD	Alkaline Phosphatase (UI/l)	Osteocalcin (ng/ml)	R=0.146 (229) 0.027
		HOMA _{IR}	R=0.162 (227) 0.007
Osteoporosis	Alkaline Phosphatase (UI/l)	ζ cholesterol (mg/dl)	R=0.169 (131) 0.032
		LDL (mg/dl)	R=0.247 (152) 0.002
		Osteocalcin (ng/ml)	R=0.286 (148) <0.001

5. Studying the same correlations in each population and for BB/BC/AC and AA/AB individuals, separately, only correlations of alkaline phosphatase with LDL and ζ cholesterol remained significant for AA/AB individuals.