



**Strong bones for a lifetime:  
Understanding osteoporosis**

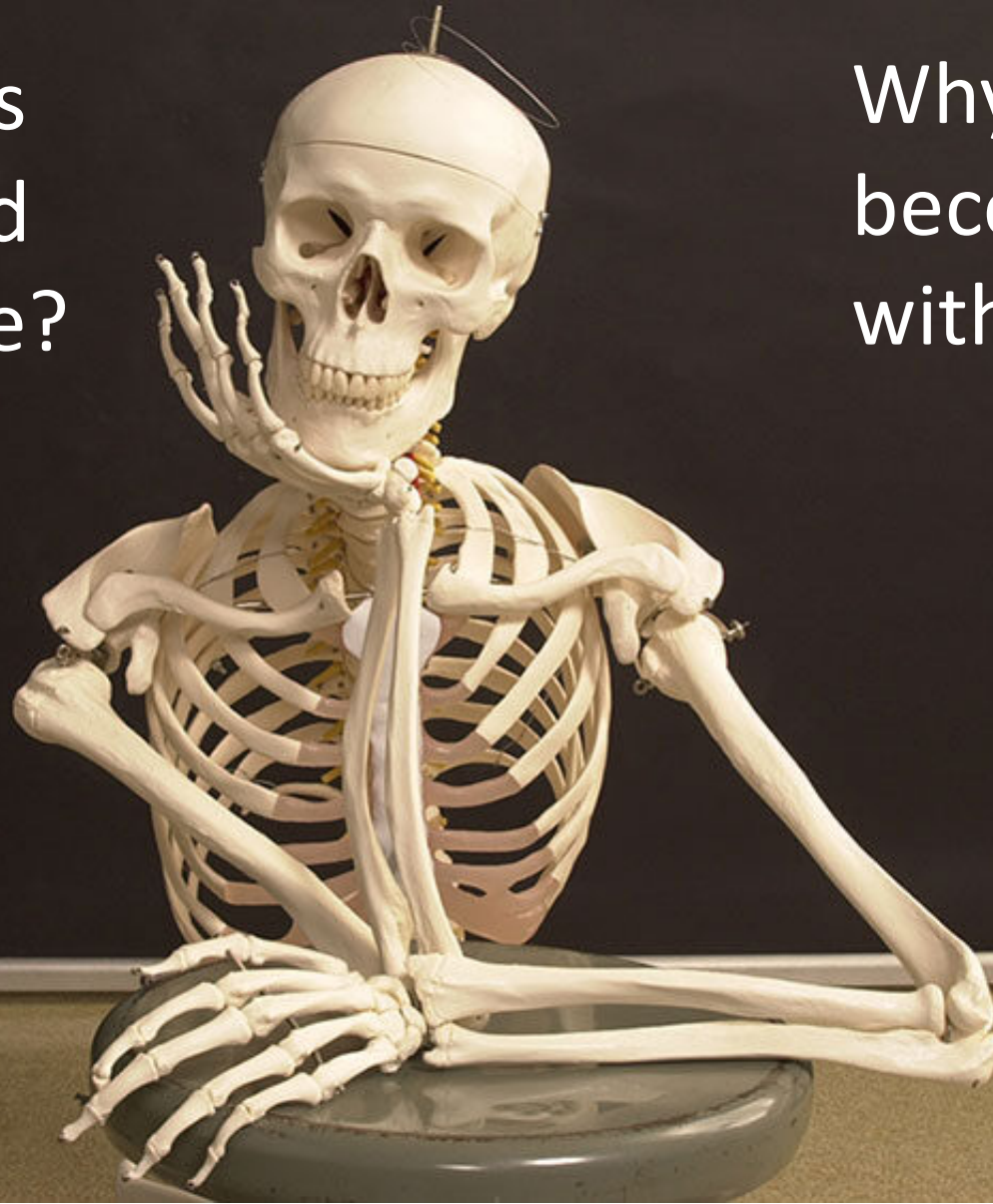


How are bones  
are maintained  
throughout life?



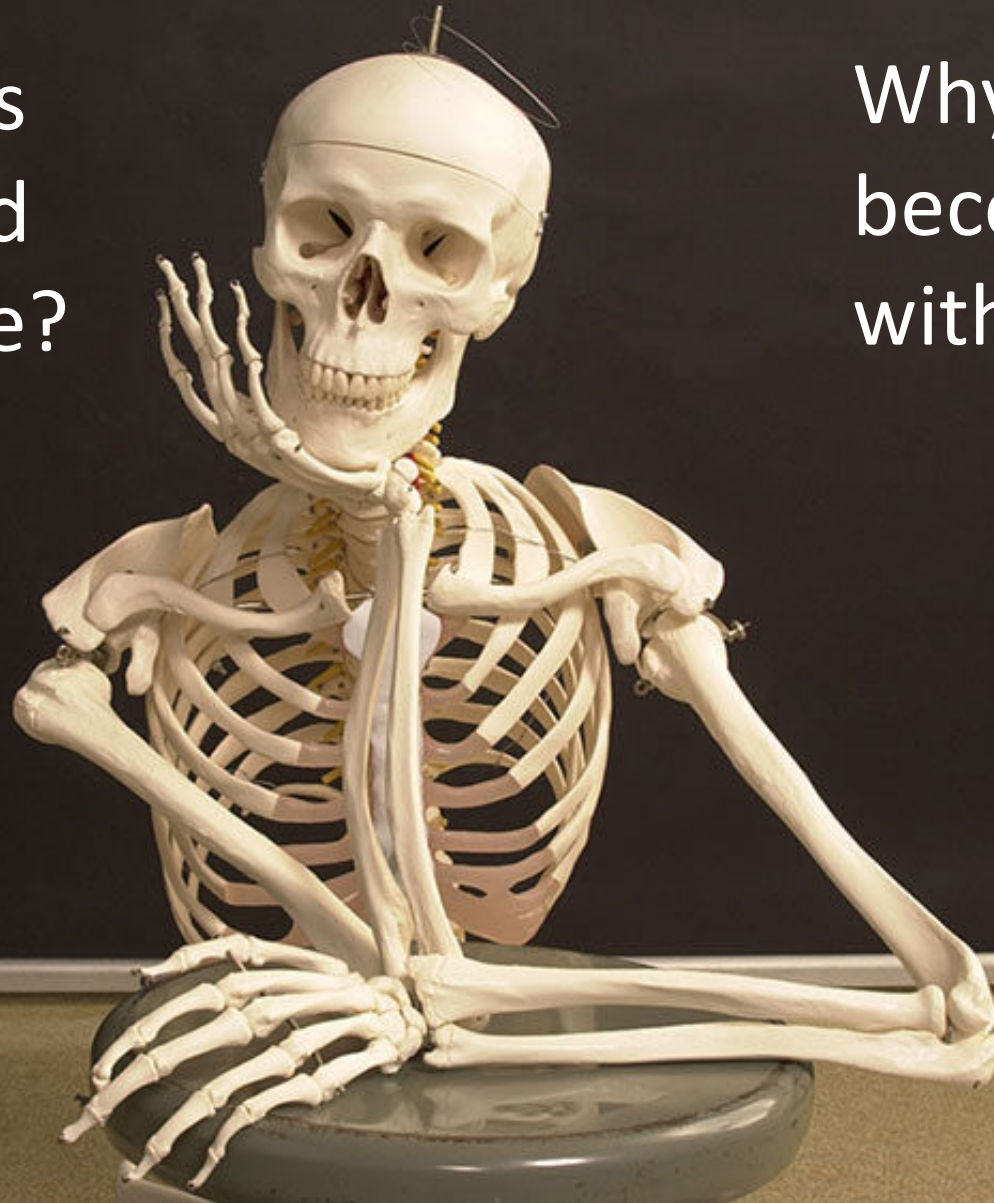
How are bones  
are maintained  
throughout life?

Why do they  
become weaker  
with age?



How are bones  
are maintained  
throughout life?

Strategies to  
keep bones  
healthy



Why do they  
become weaker  
with age?

How are bones  
are maintained  
throughout life?

Strategies to  
keep bones  
healthy



Why do they  
become weaker  
with age?

Treatments for  
osteoporosis

How are bones  
are maintained  
throughout life?



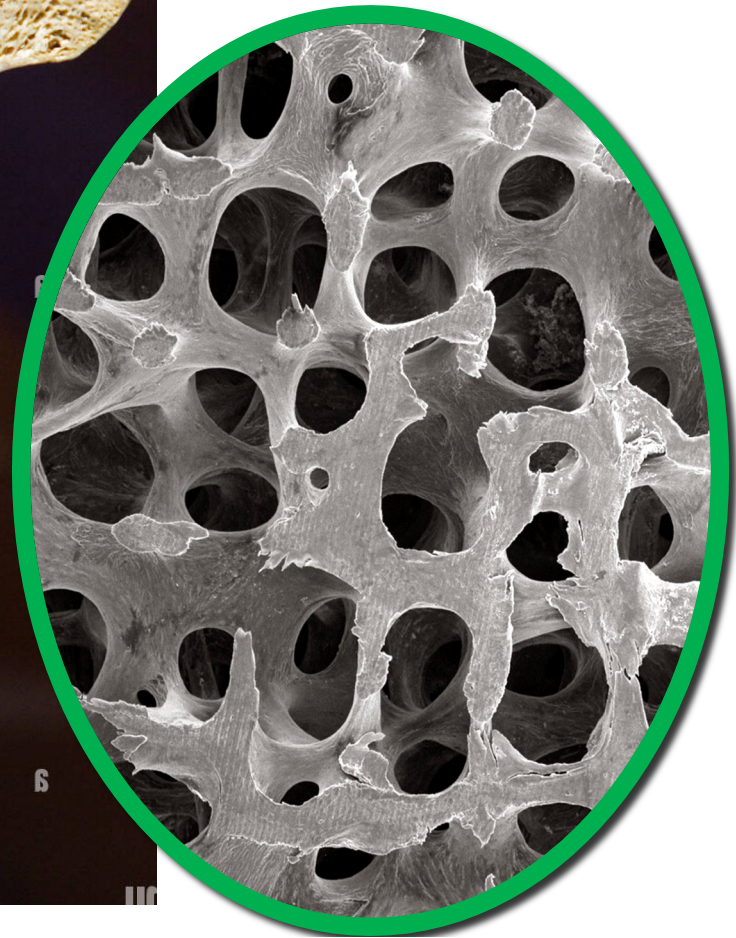
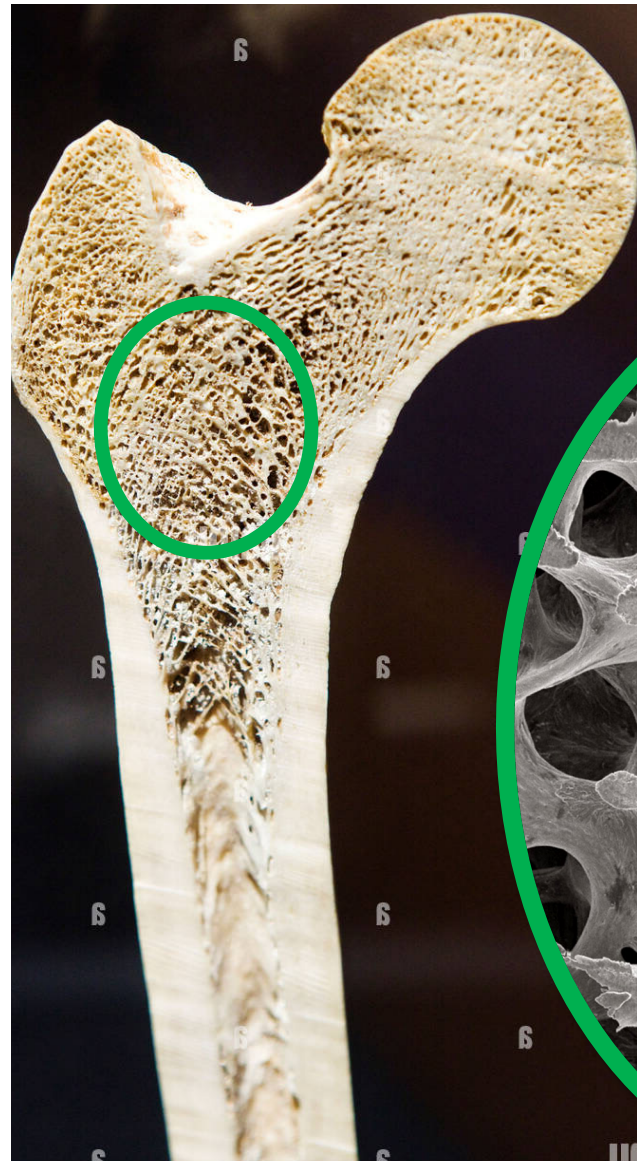




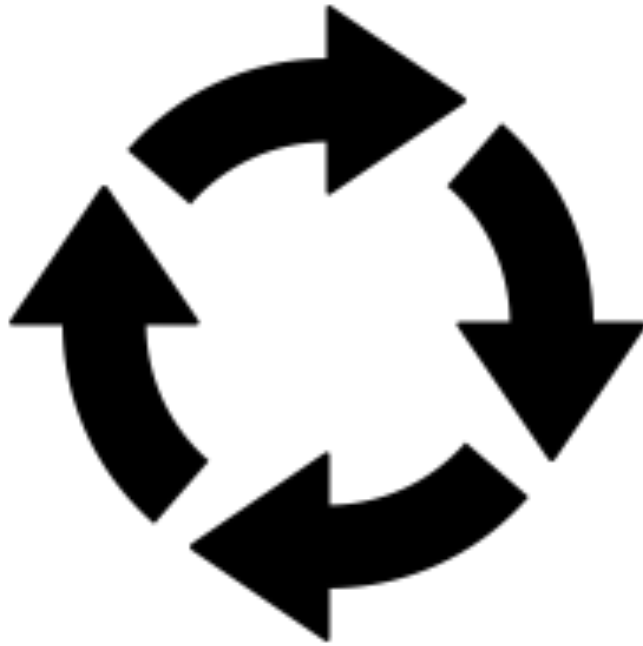






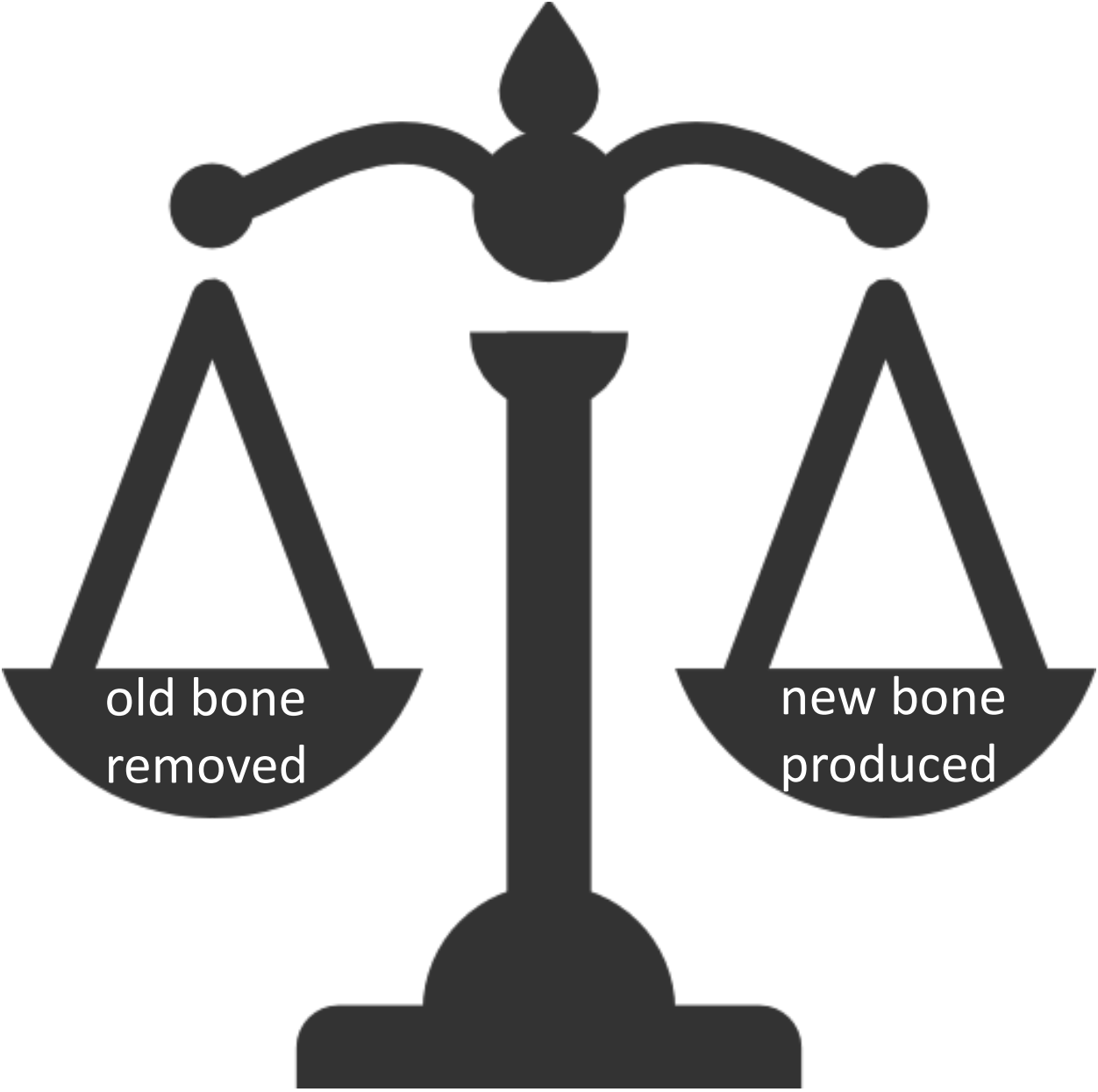


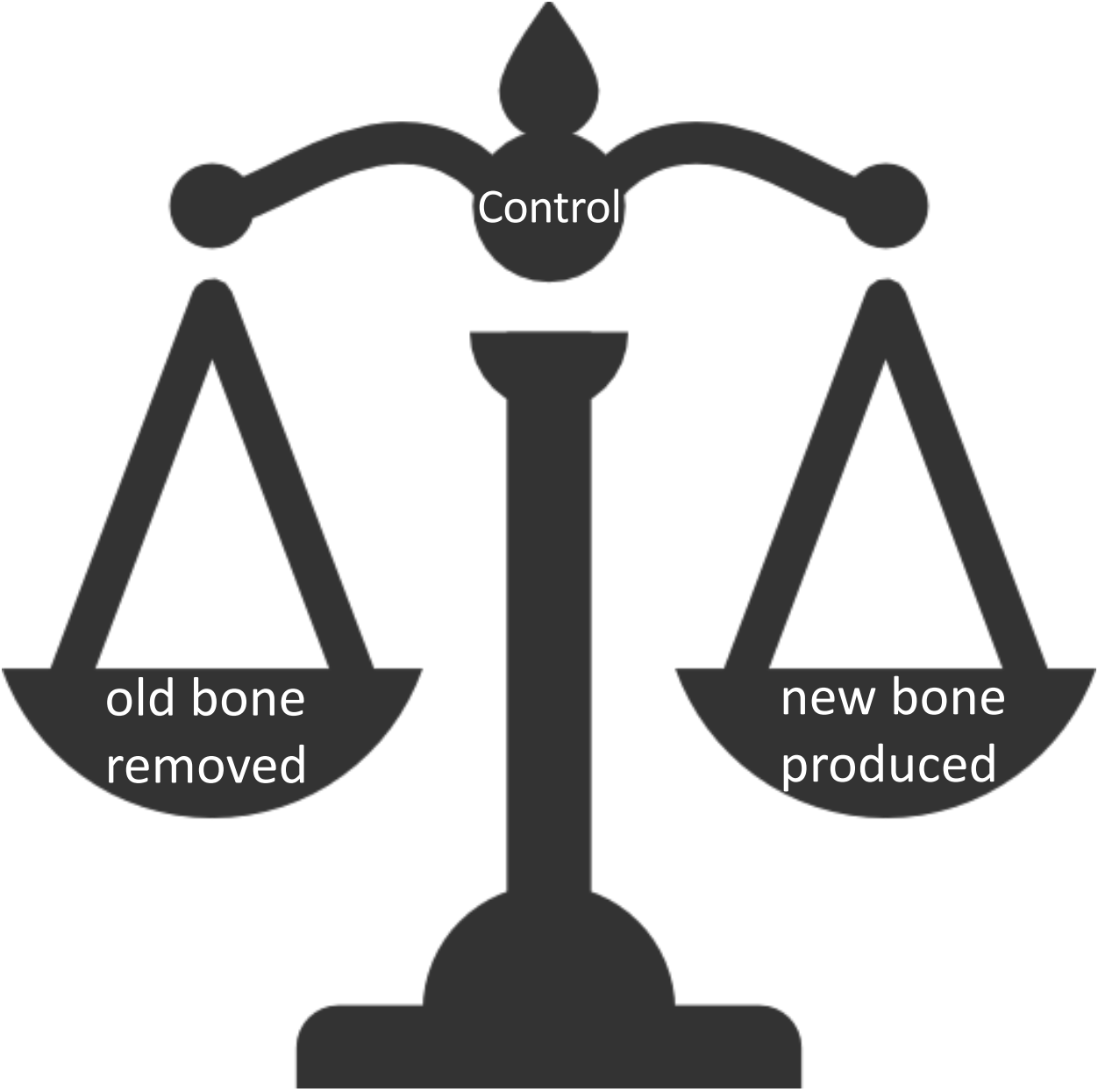
Entire skeleton  
is replaced  
every 10 years



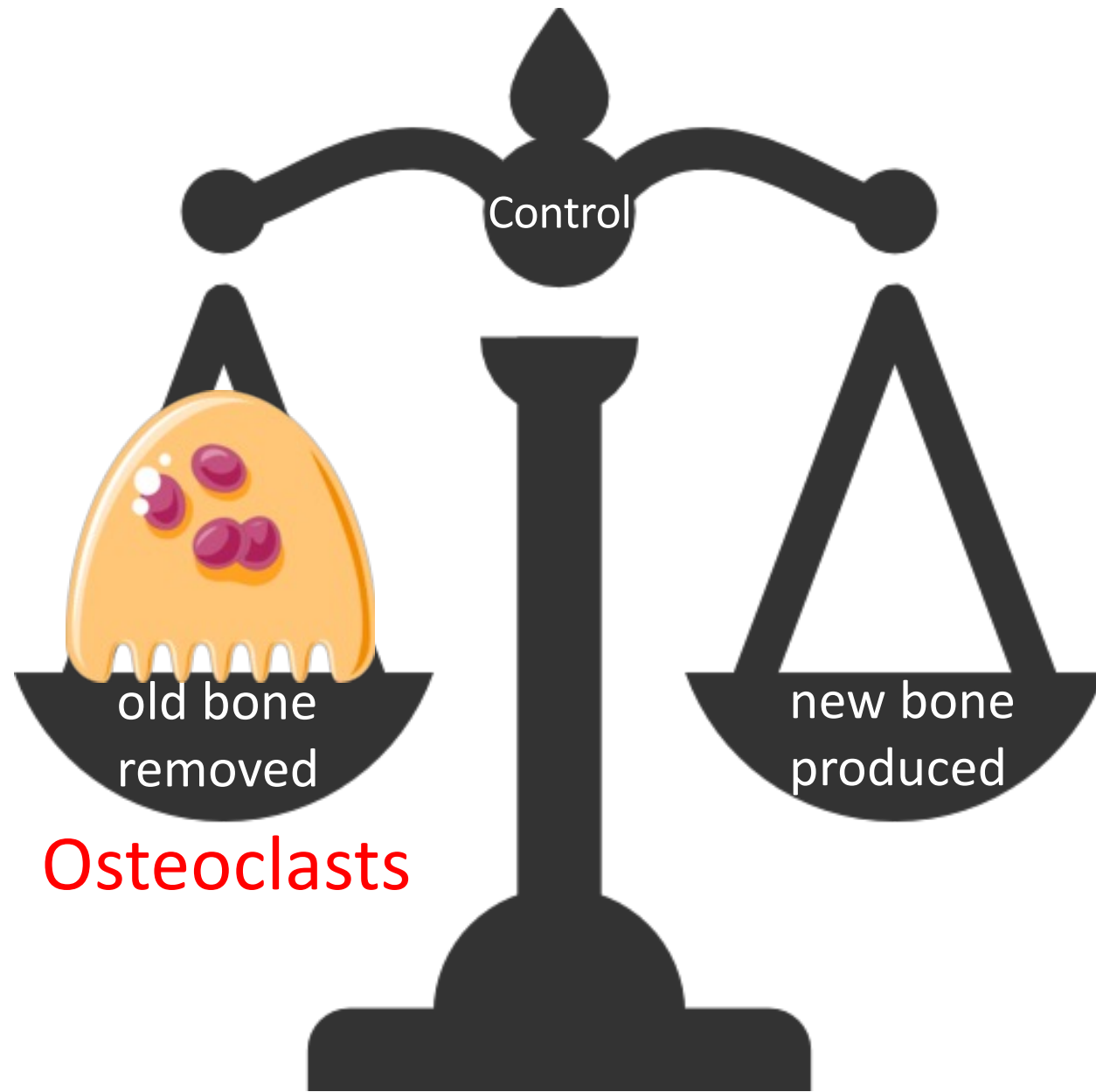


old bone  
removed





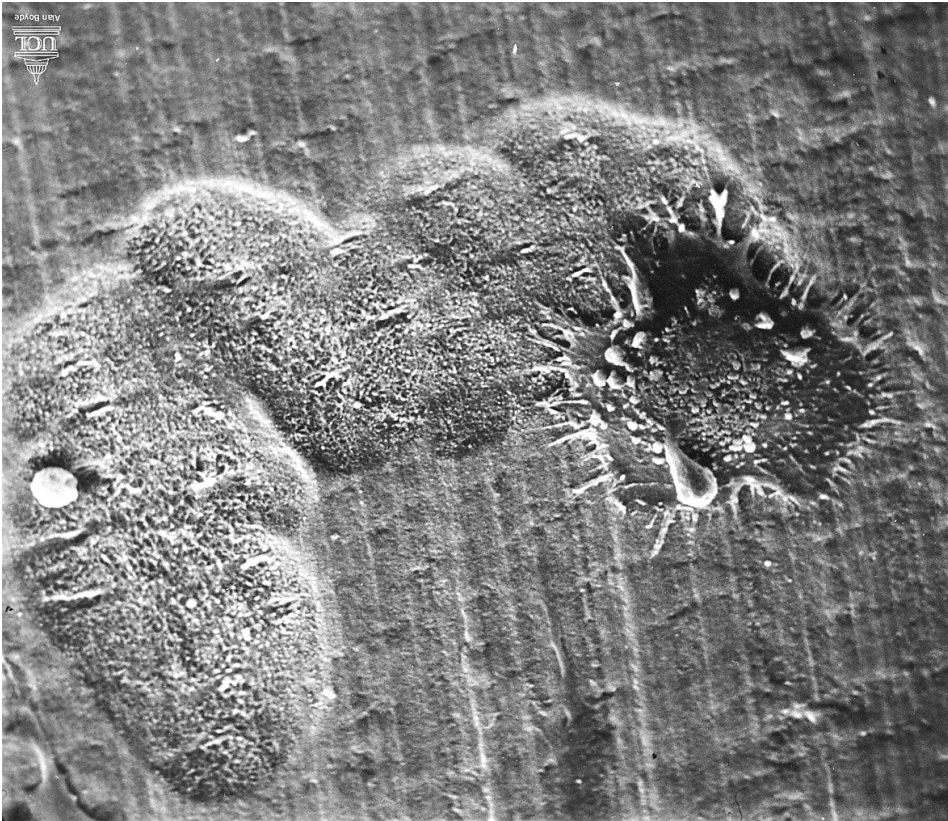




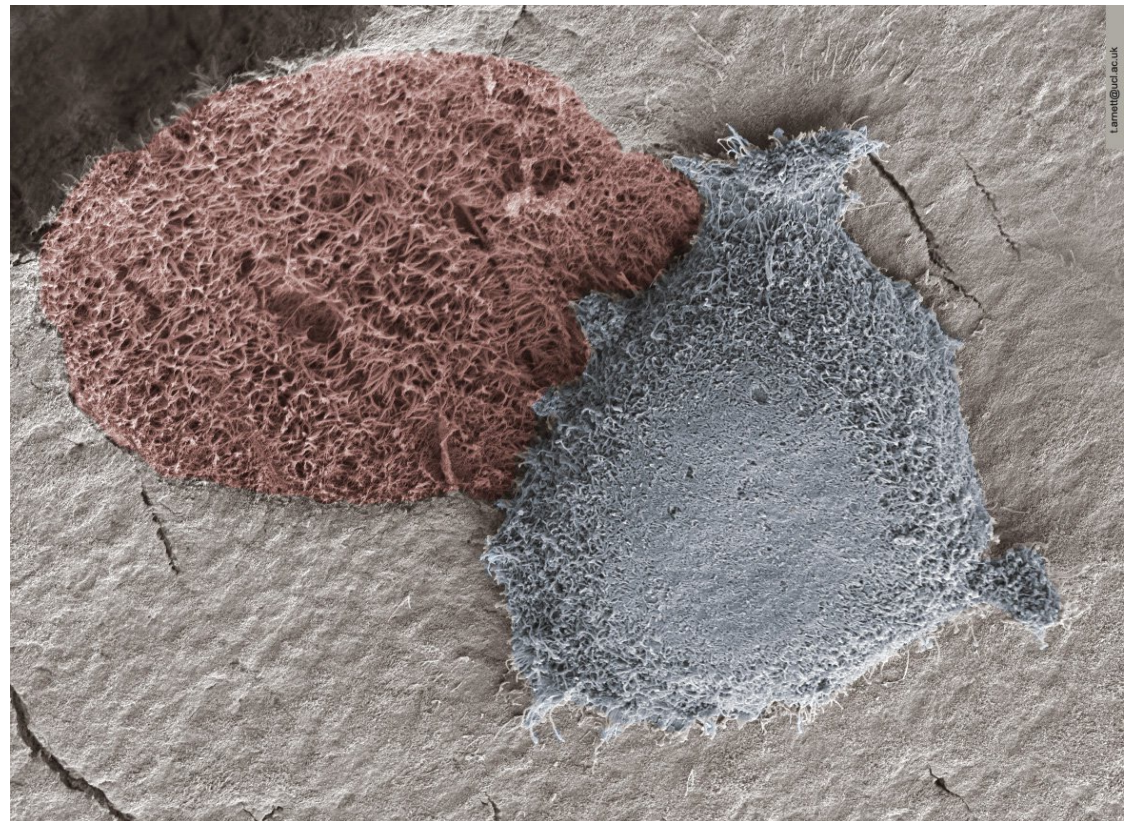
# 'Osteoclast'

– from Ancient Greek: Osteon = bone  
Clastos = broken

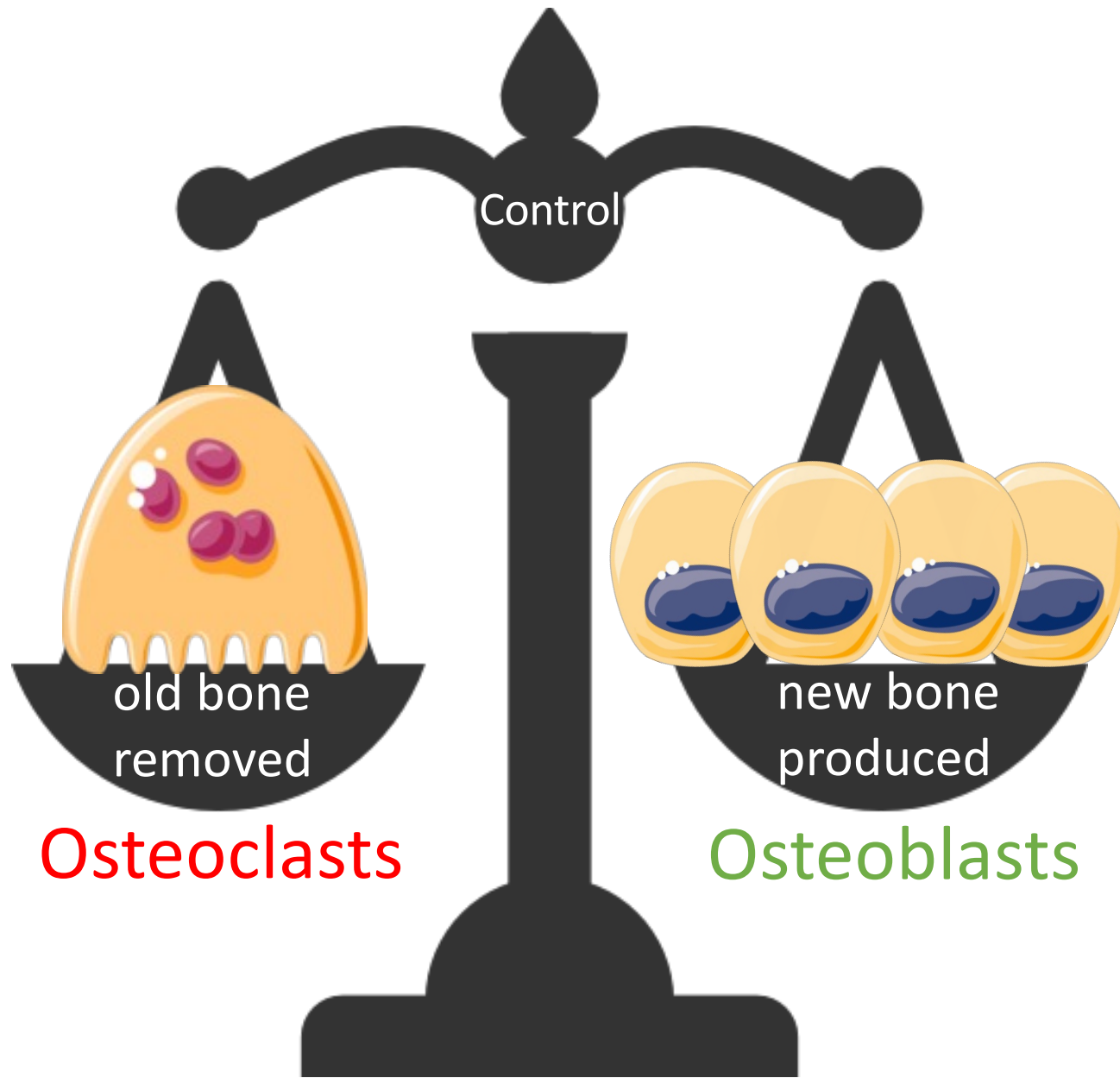
The bone eating cell



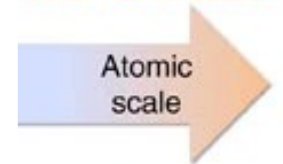
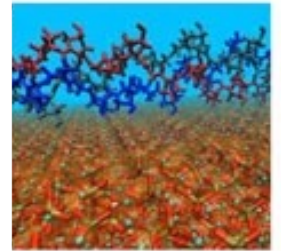
*With kind permission from Prof. Alan Boyde*

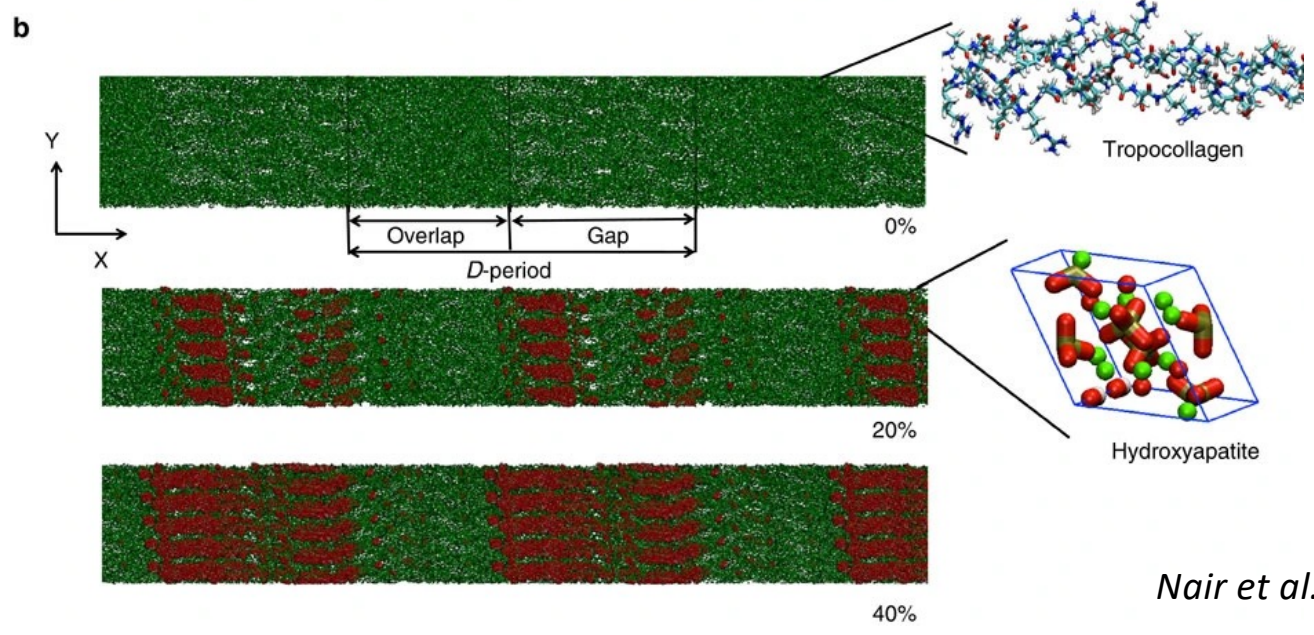
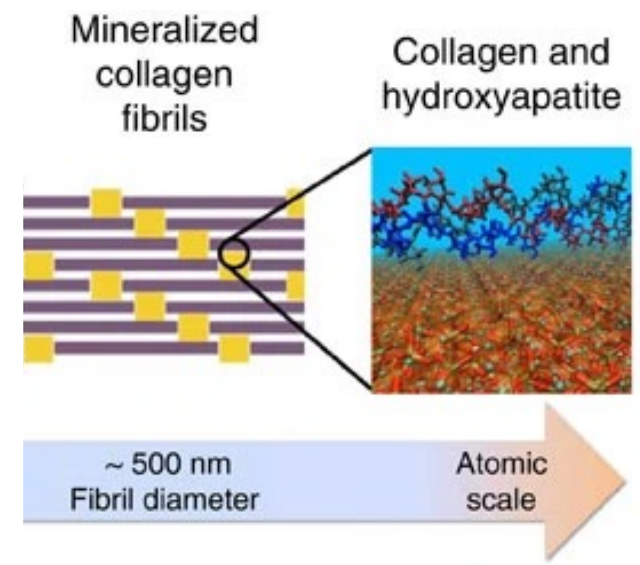


*With kind permission from Prof. Tim Arnett*

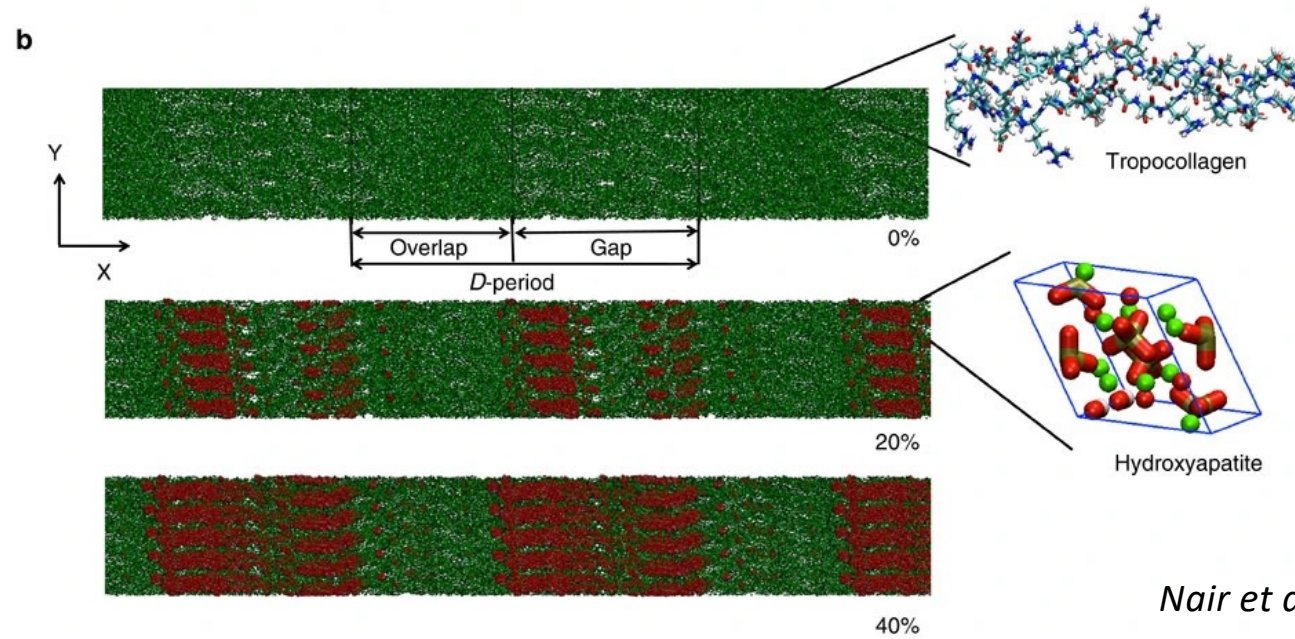
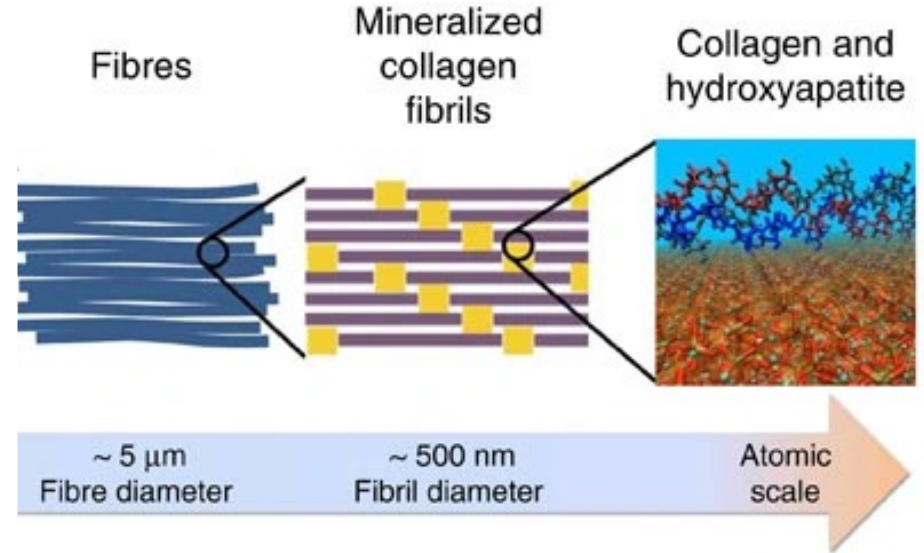


Collagen and  
hydroxyapatite

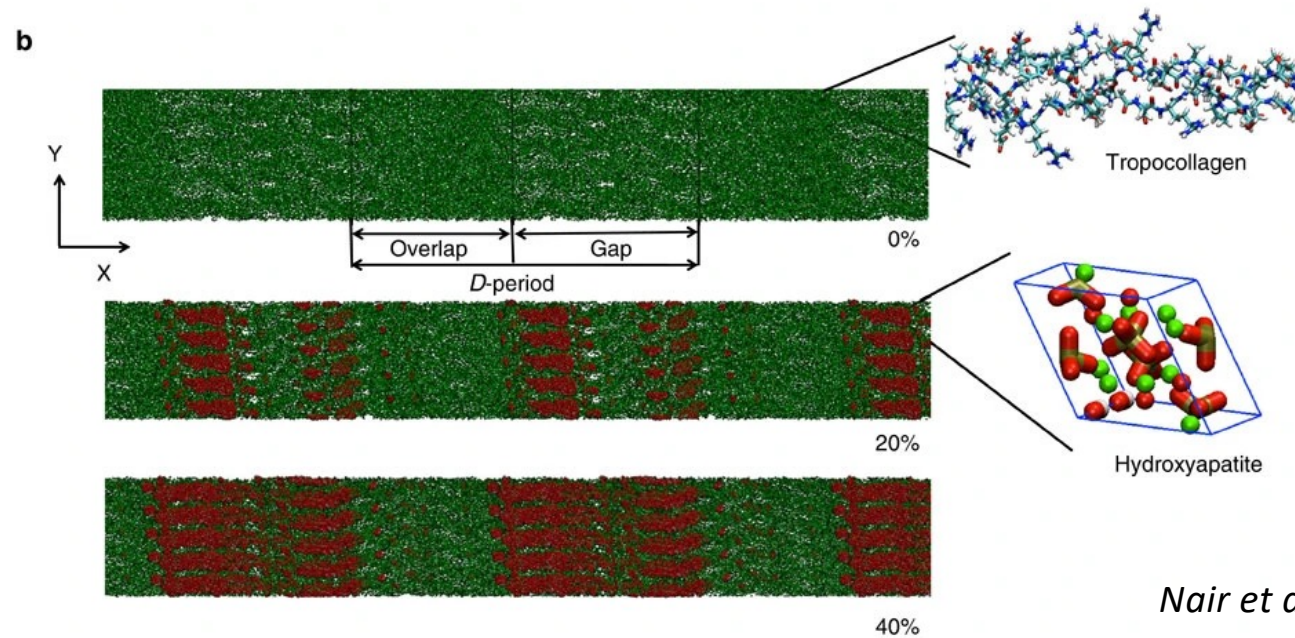
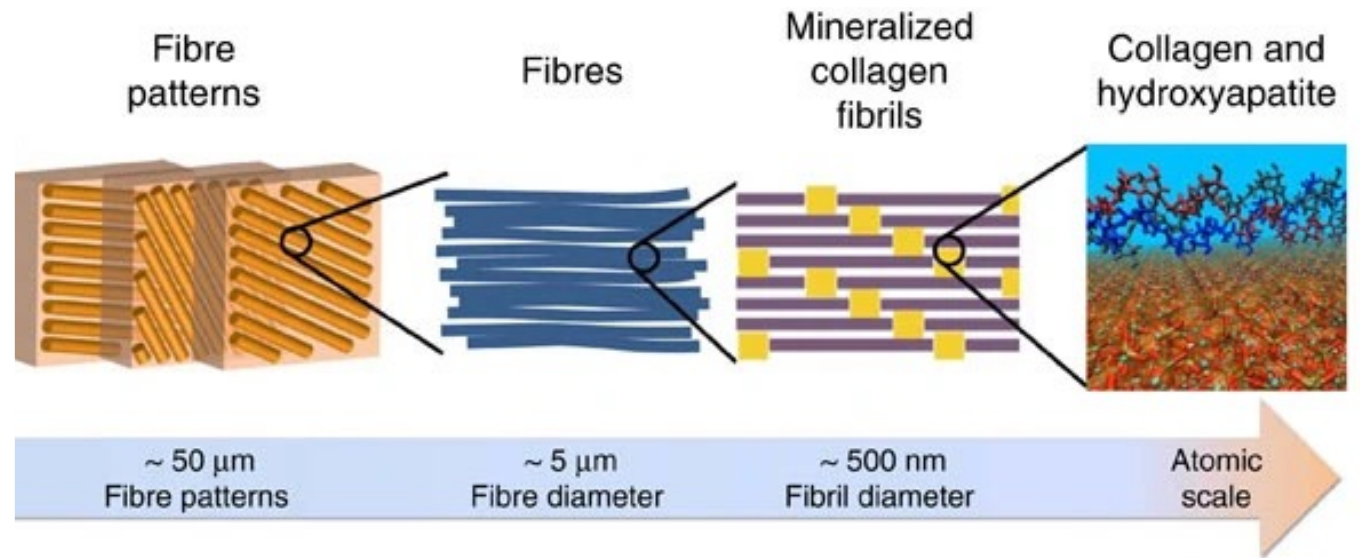




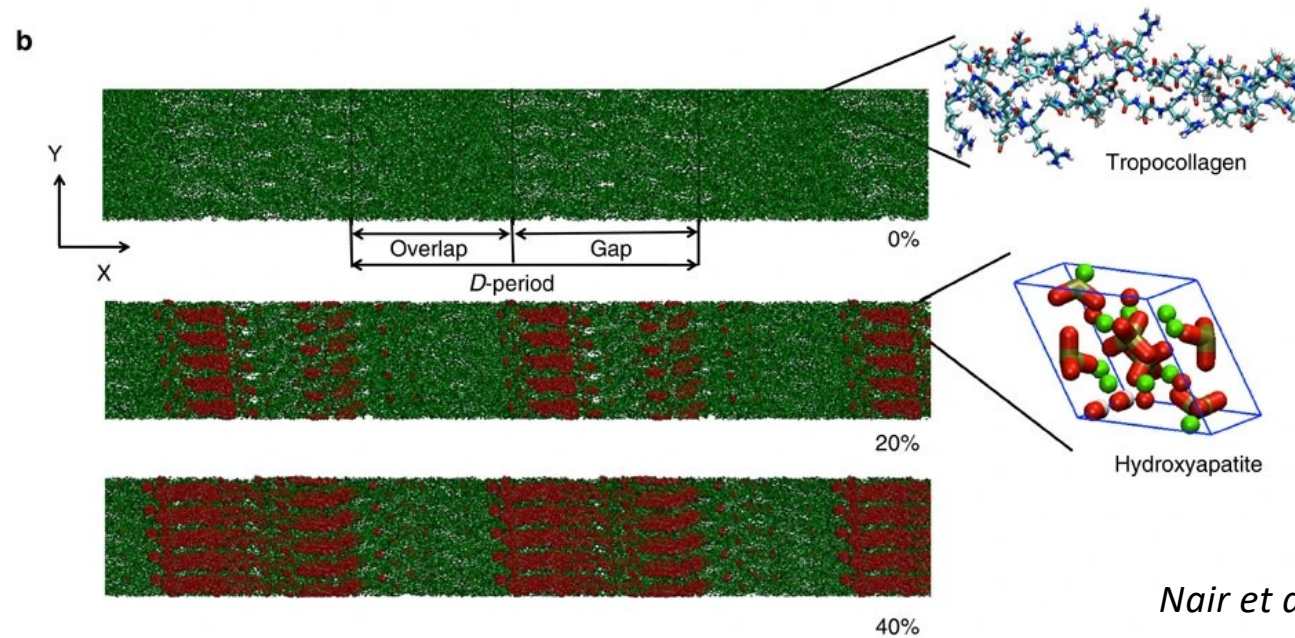
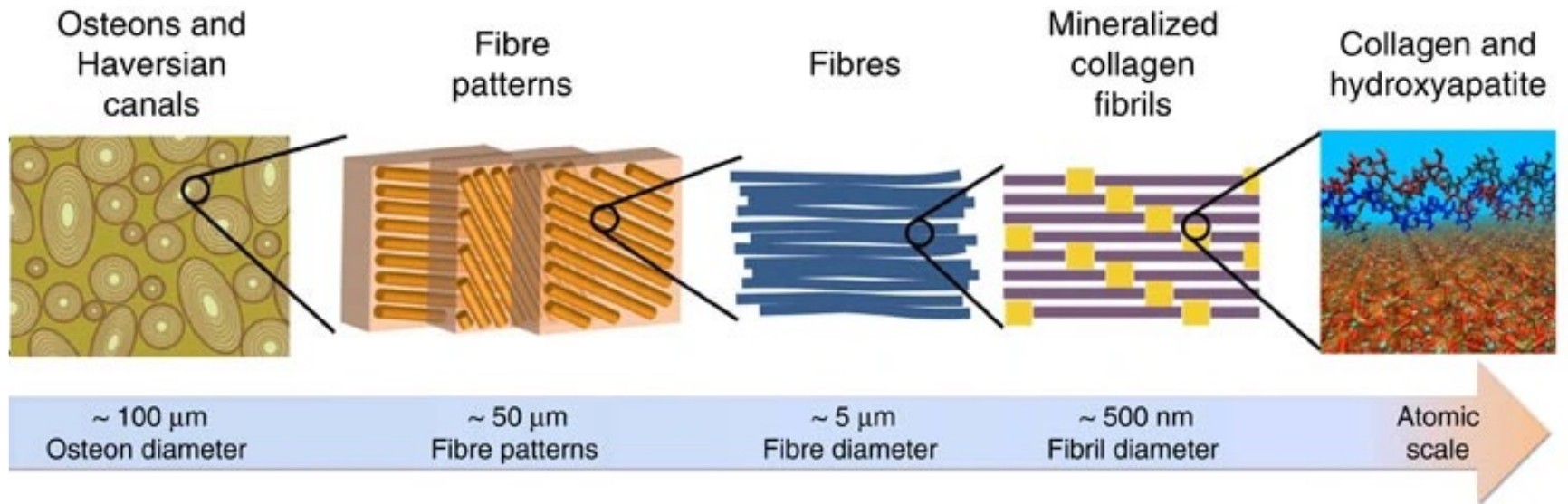
*Nair et al. 2013. Nature Comms*



*Nair et al. 2013. Nature Comms*

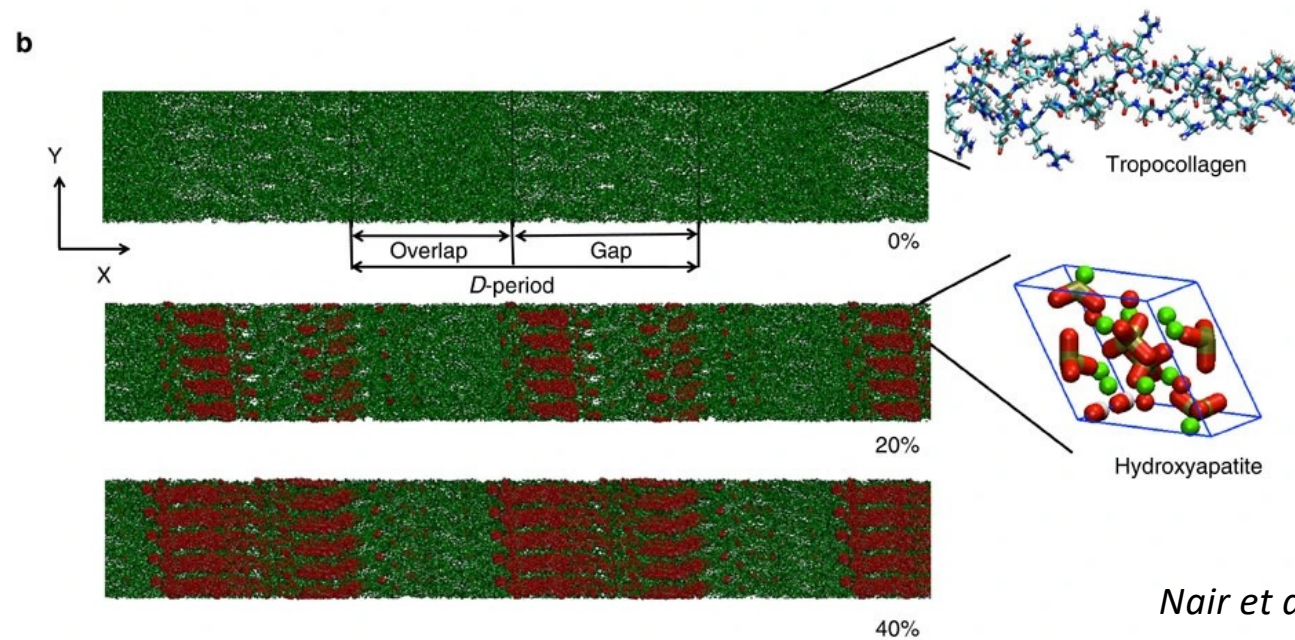
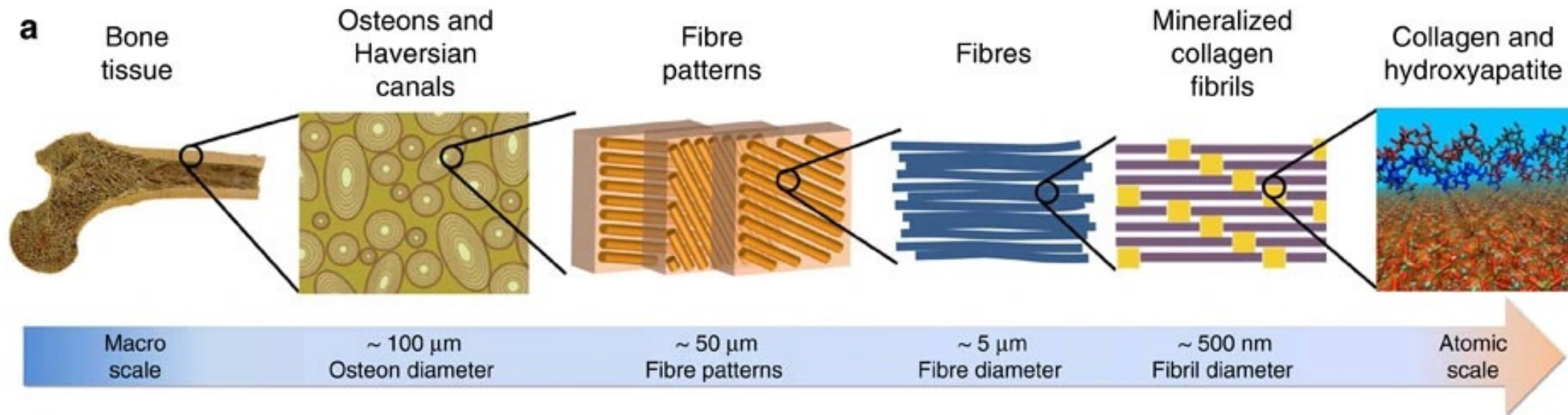


*Nair et al. 2013. Nature Comms*

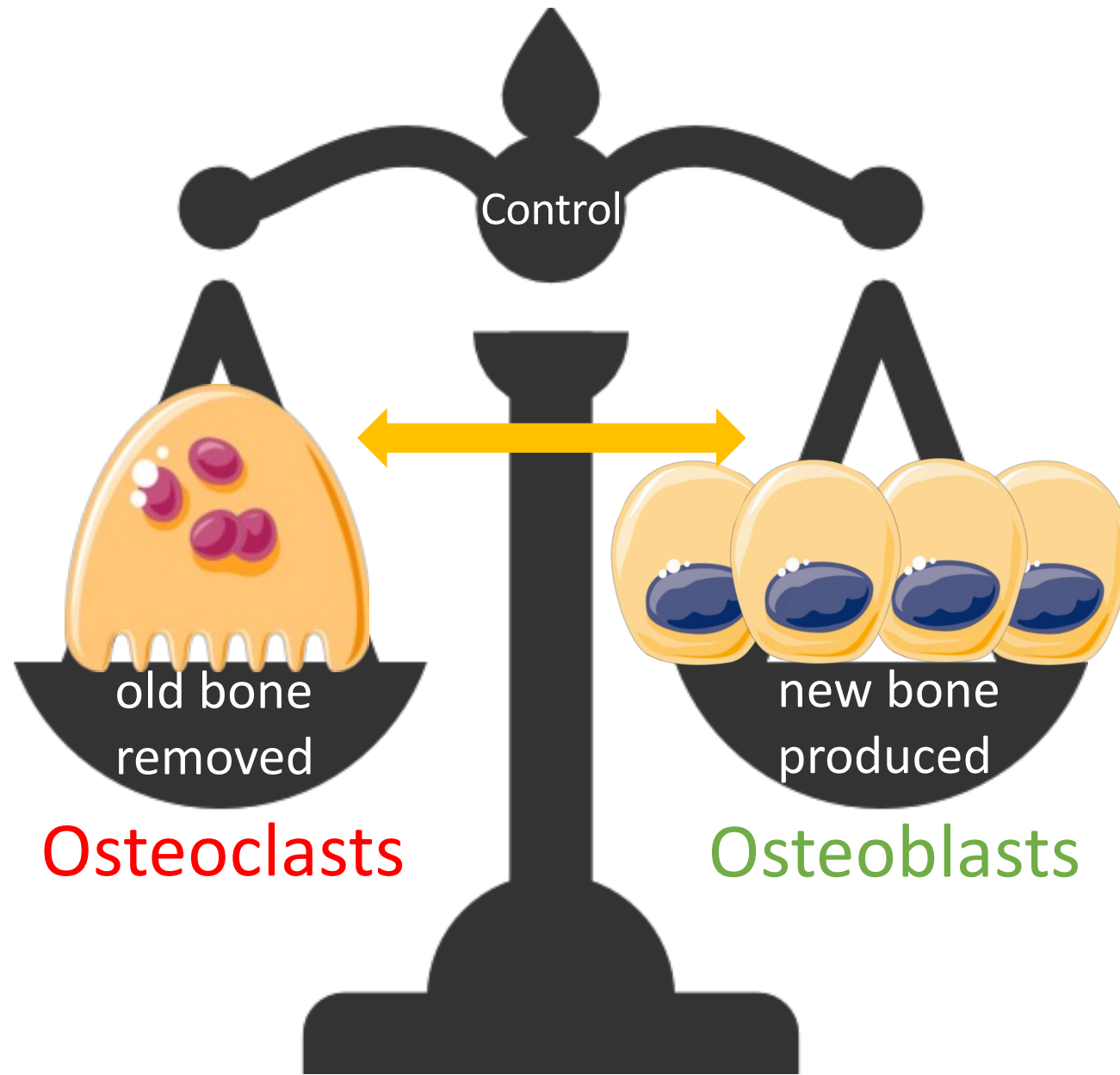


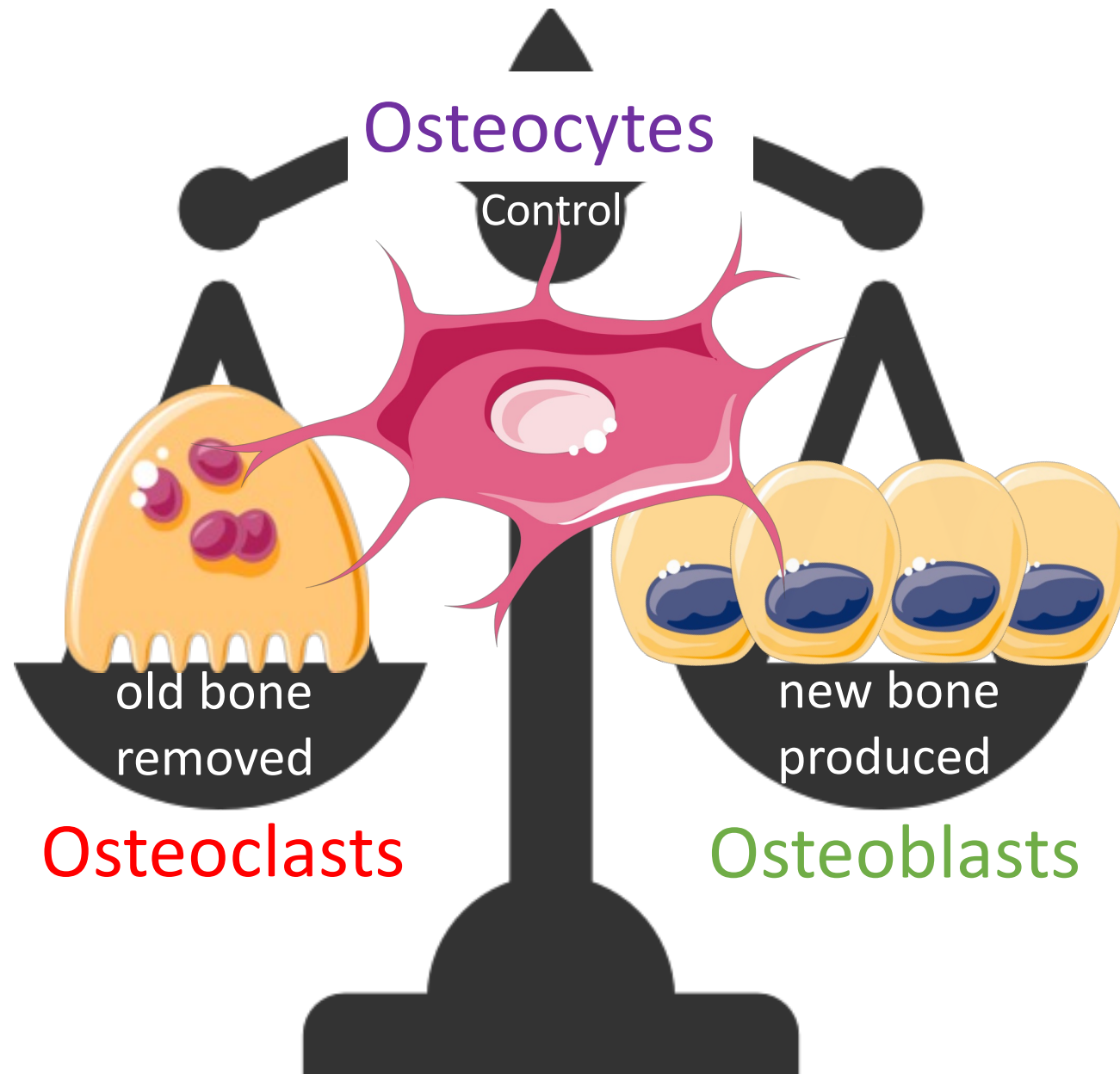
*Nair et al. 2013. Nature Comms*



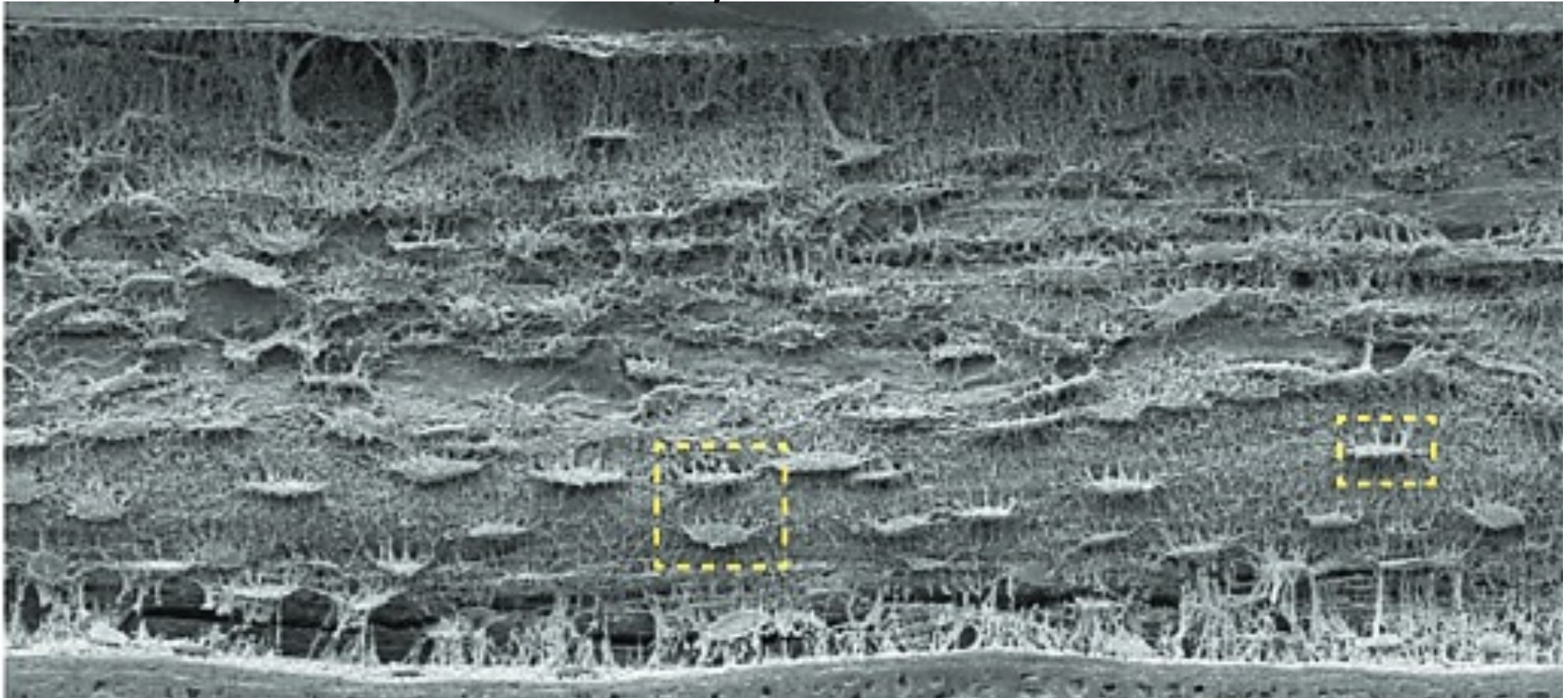


*Nair et al. 2013. Nature Comms*



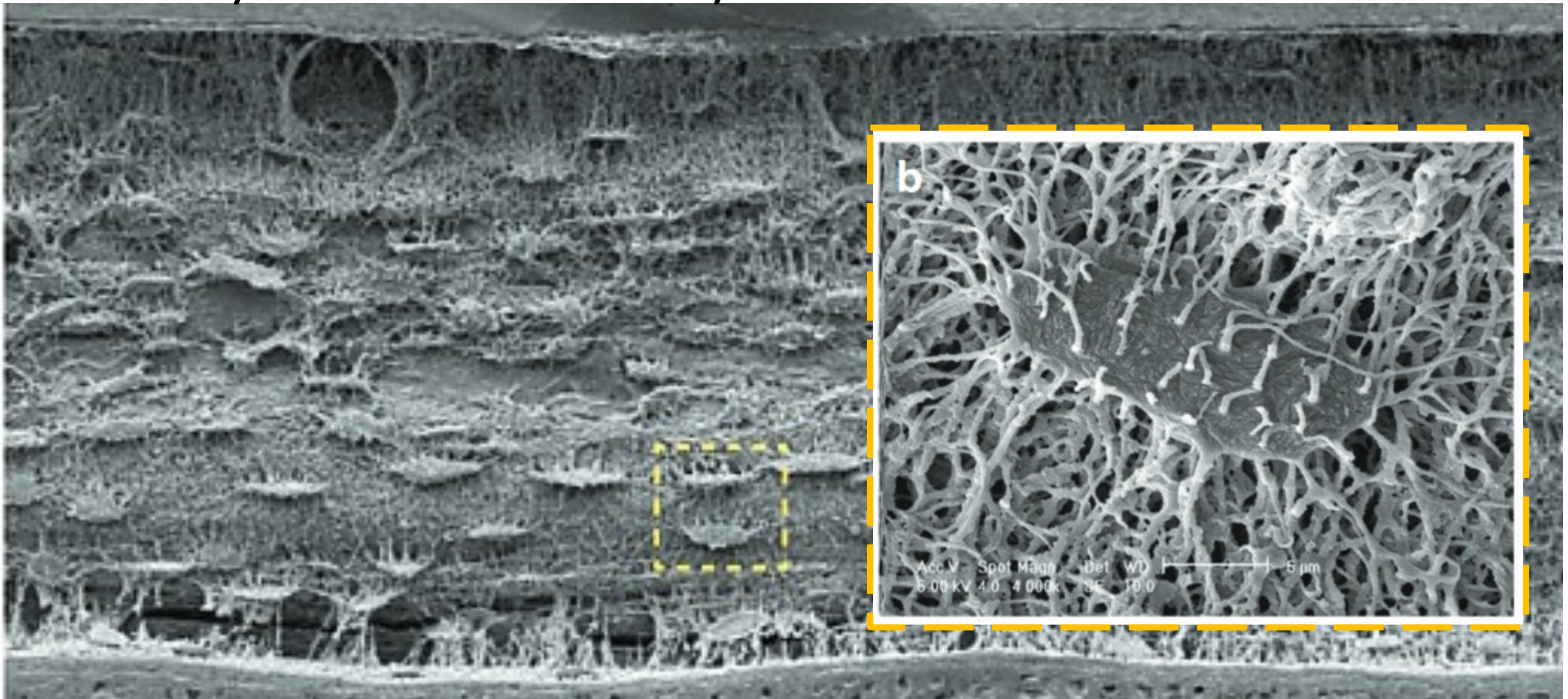


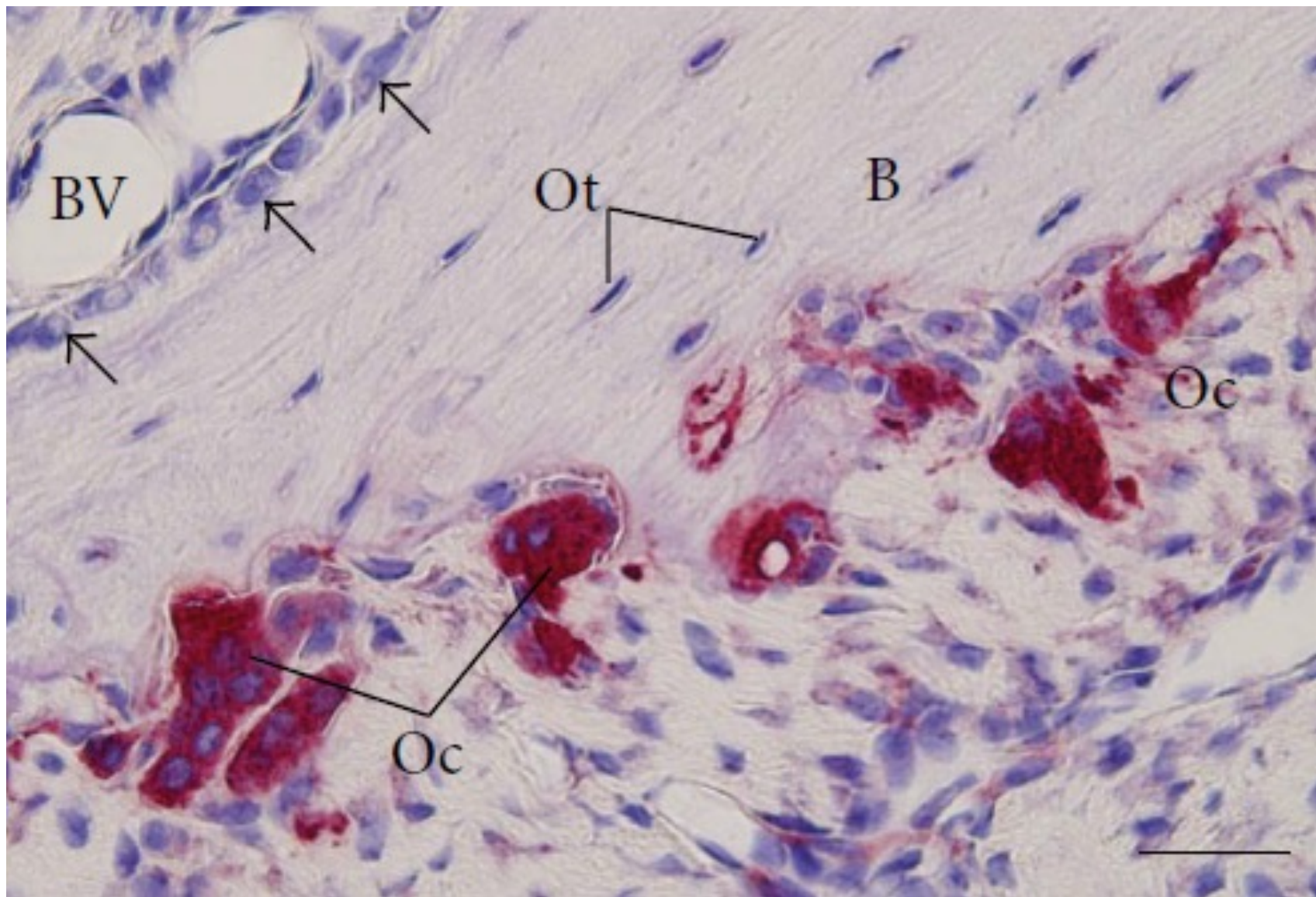
# Osteocyte Connectivity



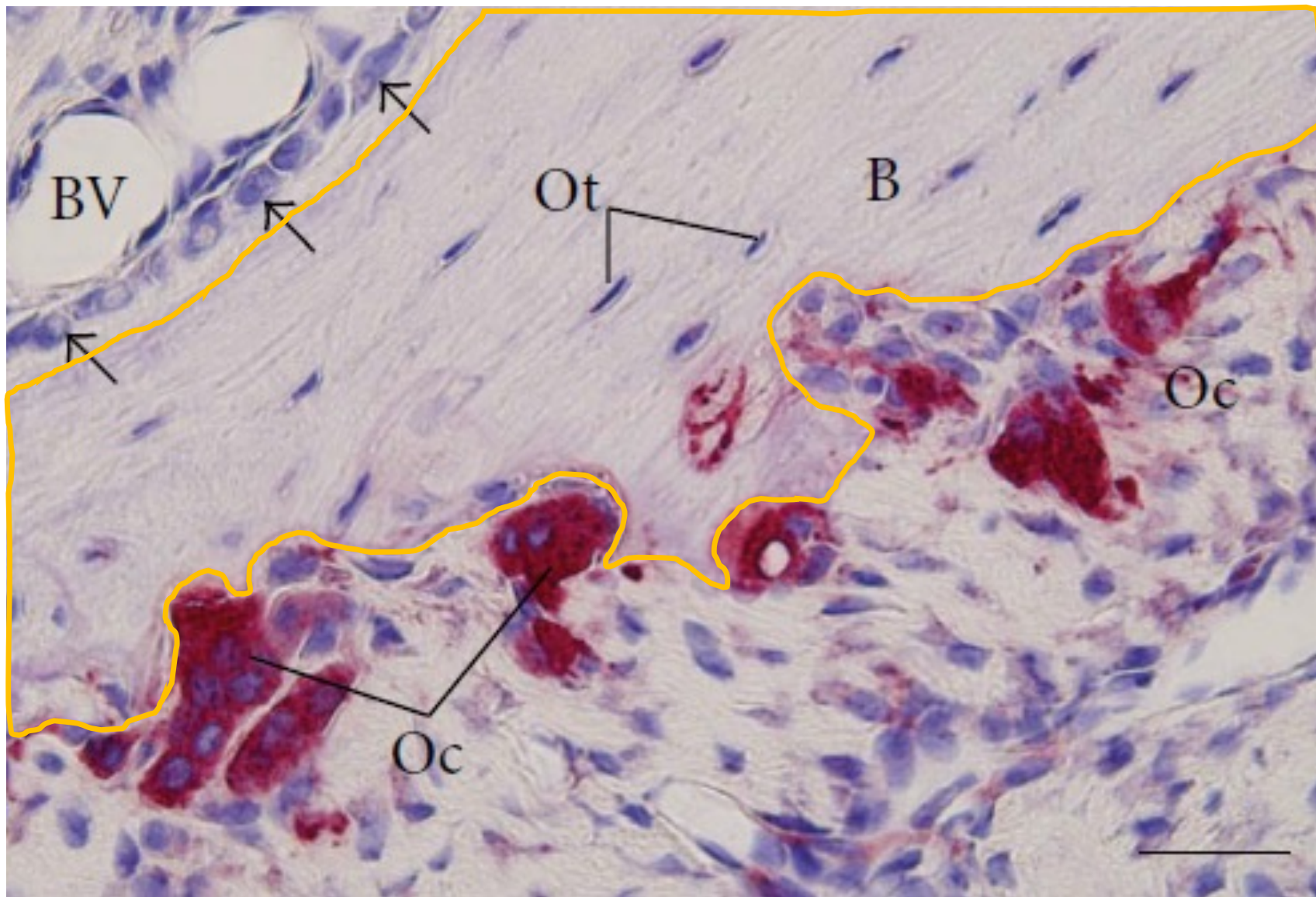
*Bonewald et al. 2013*

# Osteocyte Connectivity

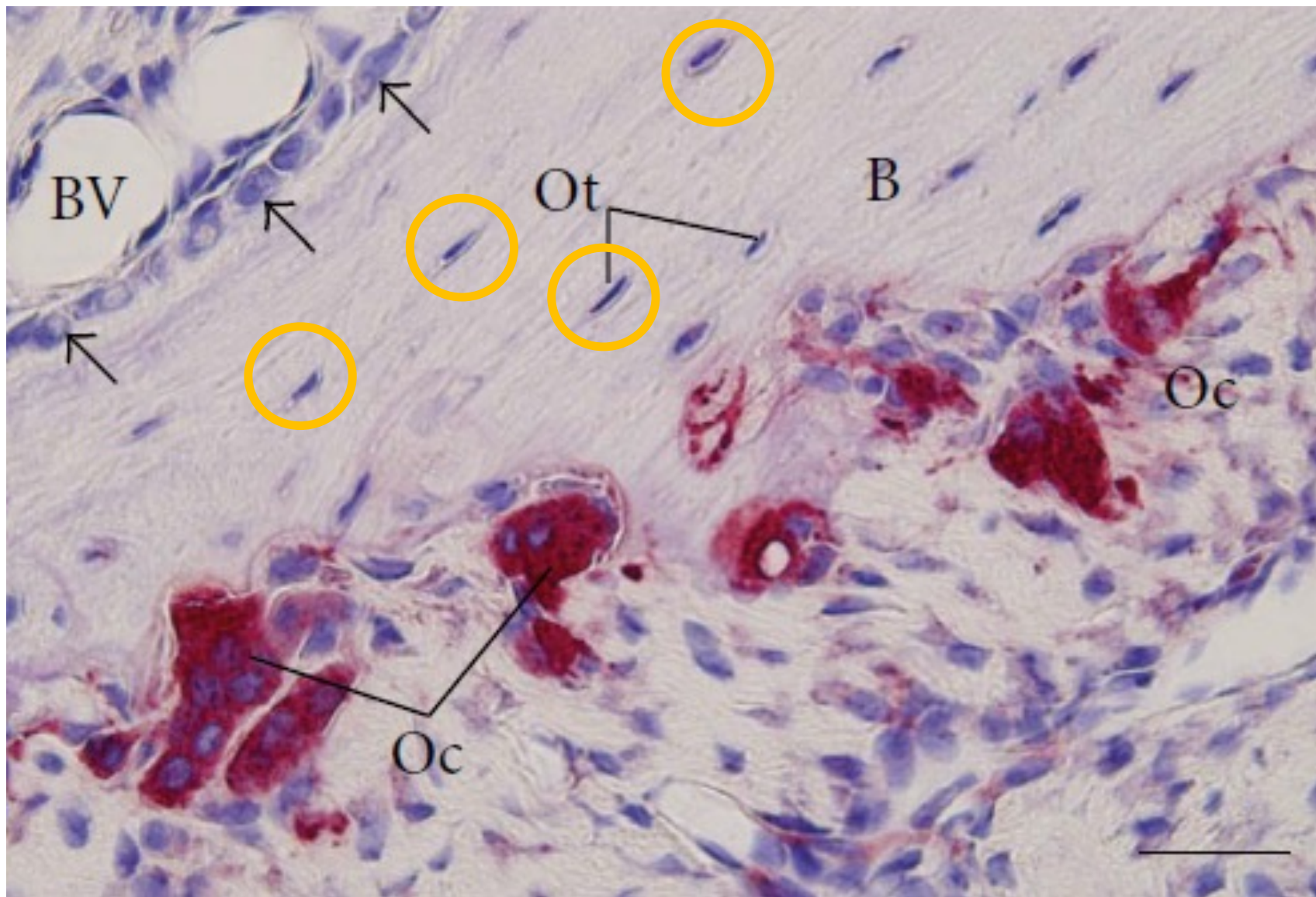




*Florencio-Silva et al. 2015*

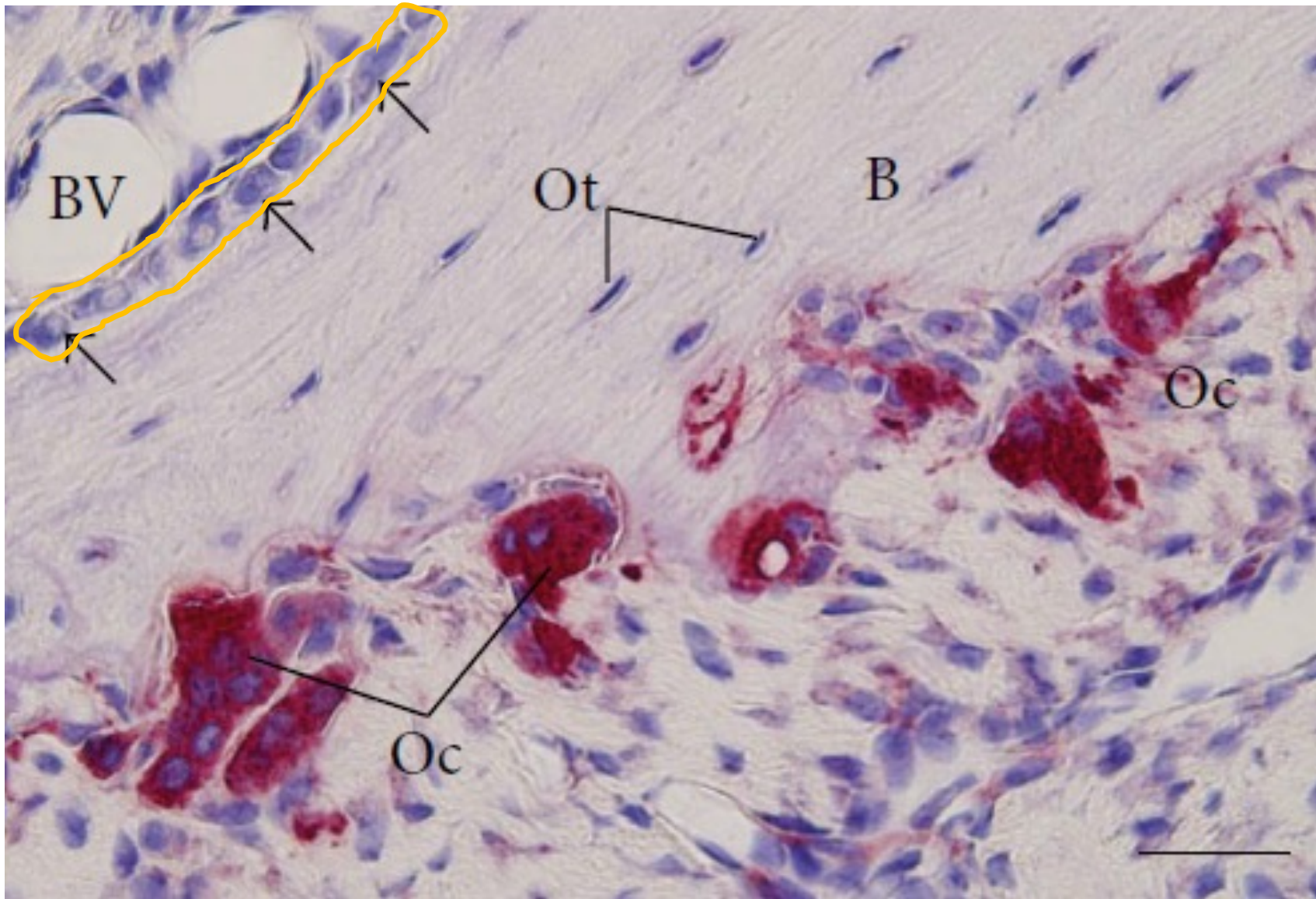


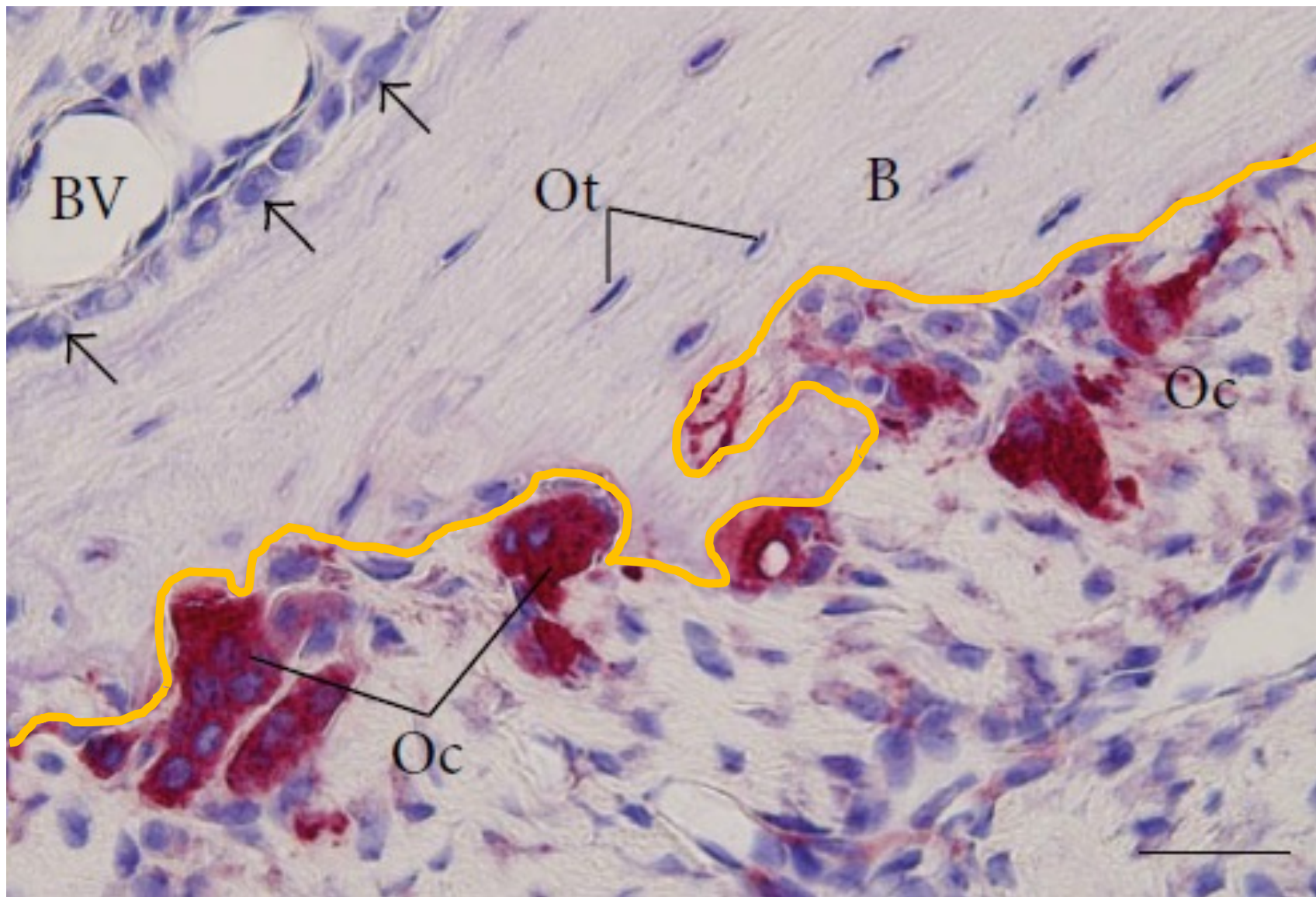
*Florencio-Silva et al. 2015*



*Florencio-Silva et al. 2015*







*Florencio-Silva et al. 2015*

# Osteoporosis

Low bone mass/mineral density  
(measured by DEXA scan).

Increased risk of fracture from low  
impact falls/trauma

# Osteoporosis

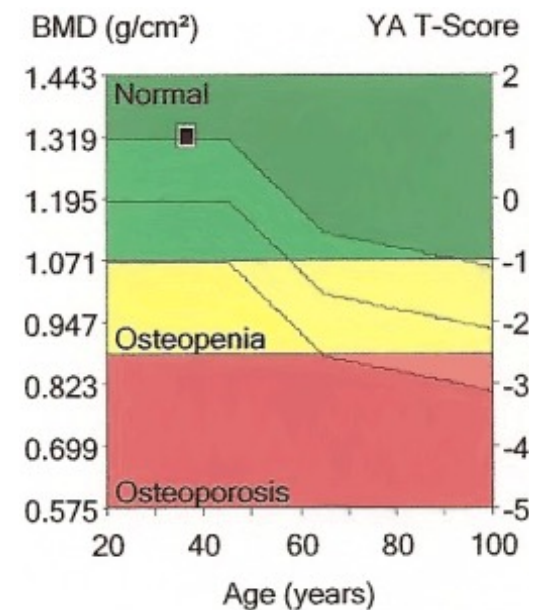
Low bone mass/mineral density  
(measured by DEXA scan).

Increased risk of fracture from low  
impact falls/trauma

T score > -1.0 S.D	Normal bone mineral density
T score between -1.0 and -2.5 SD	Osteopenia
T score $\leq$ - 2.5 SD	Osteoporosis
T score $\leq$ - 2.5 SD with 1 or more fragility fractures	Severe osteoporosis

- DEXA T-Score

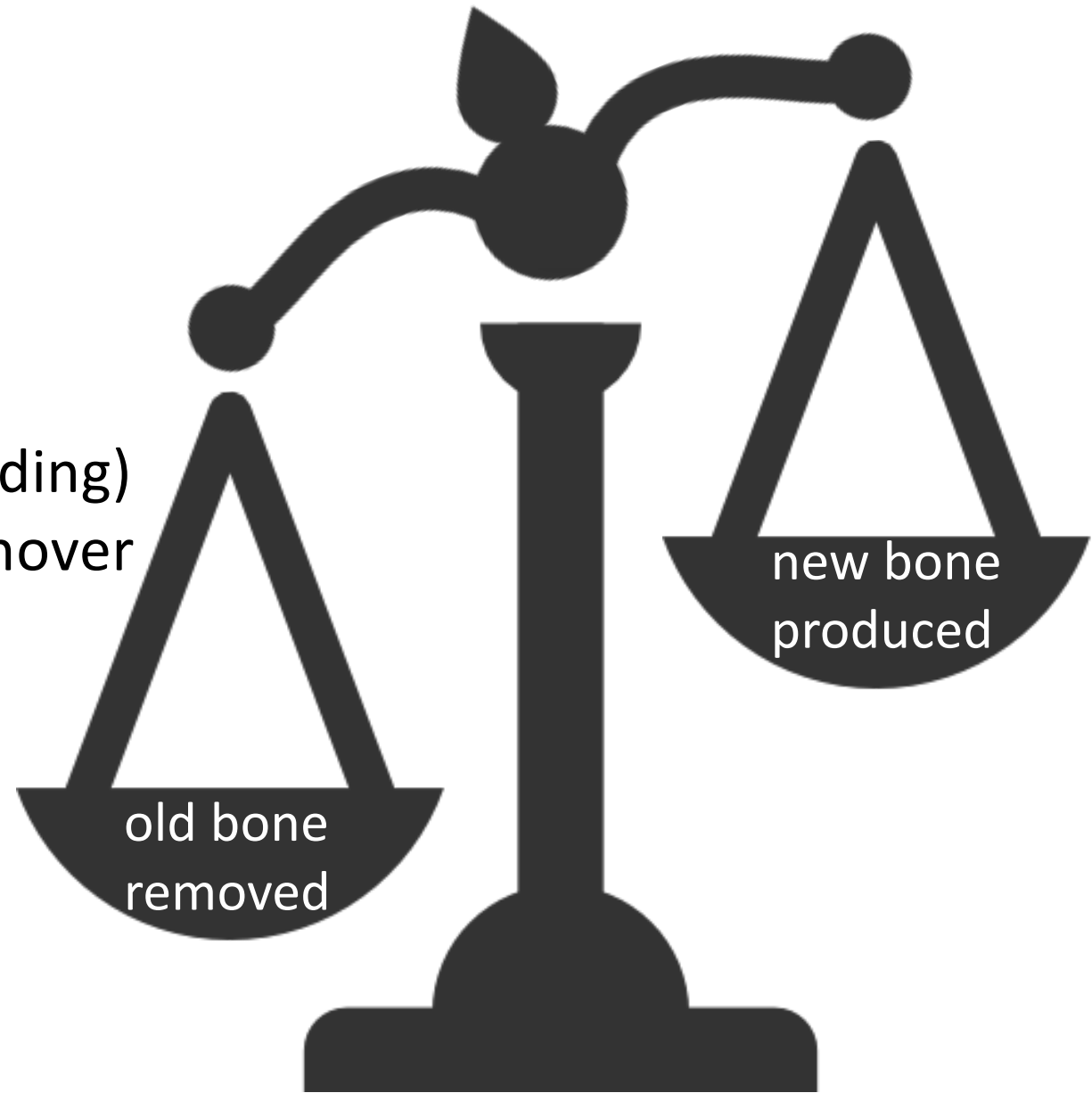
- T score is the number of standard deviations away from a young healthy adult



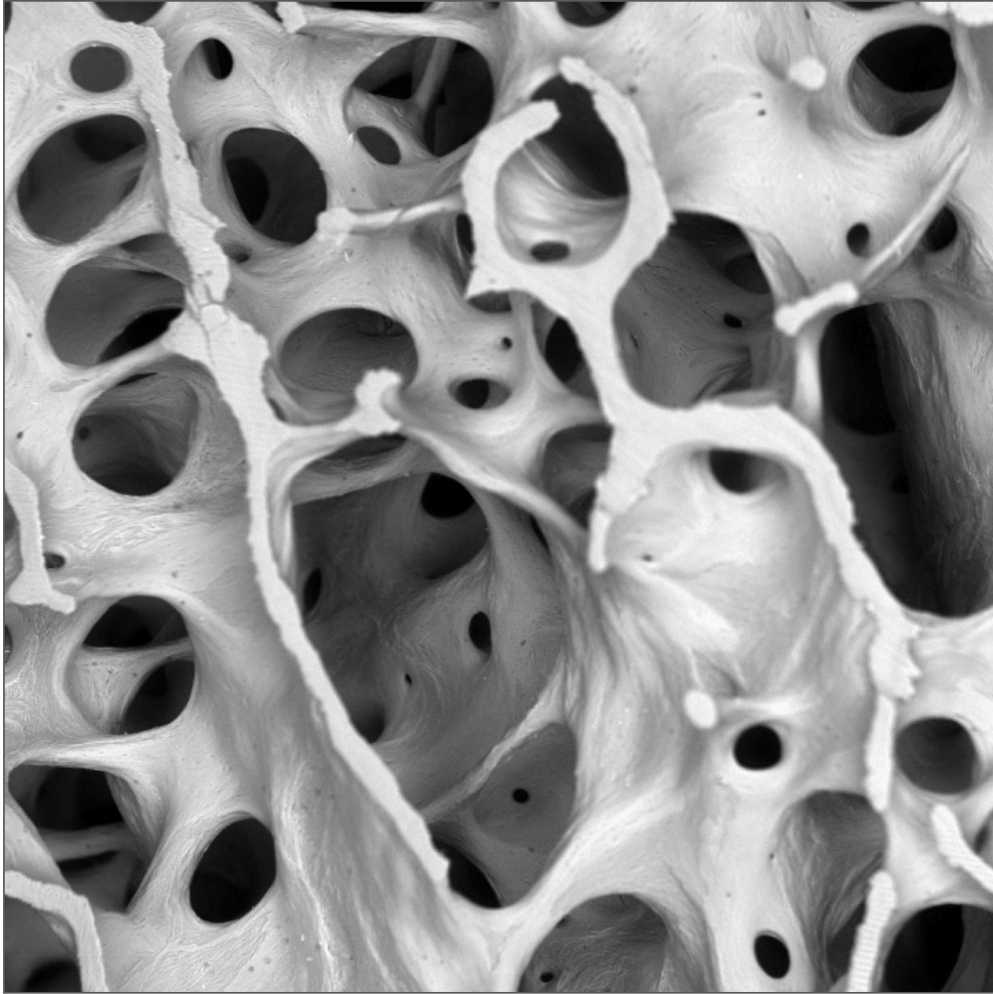
# Osteoporosis

Caused by:

- Hormonal changes
- Reduced physical activity (loading)
- Errant regulation of bone turnover

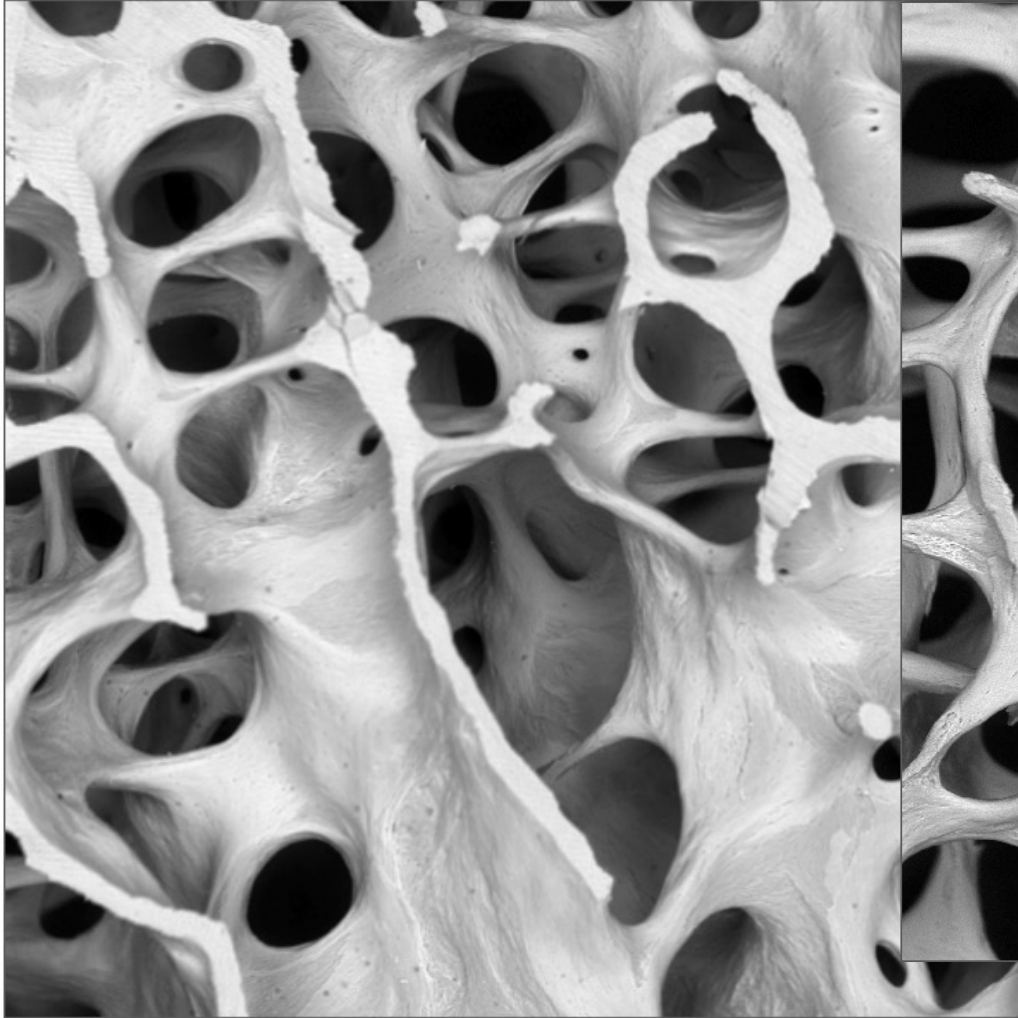


# Normal bone

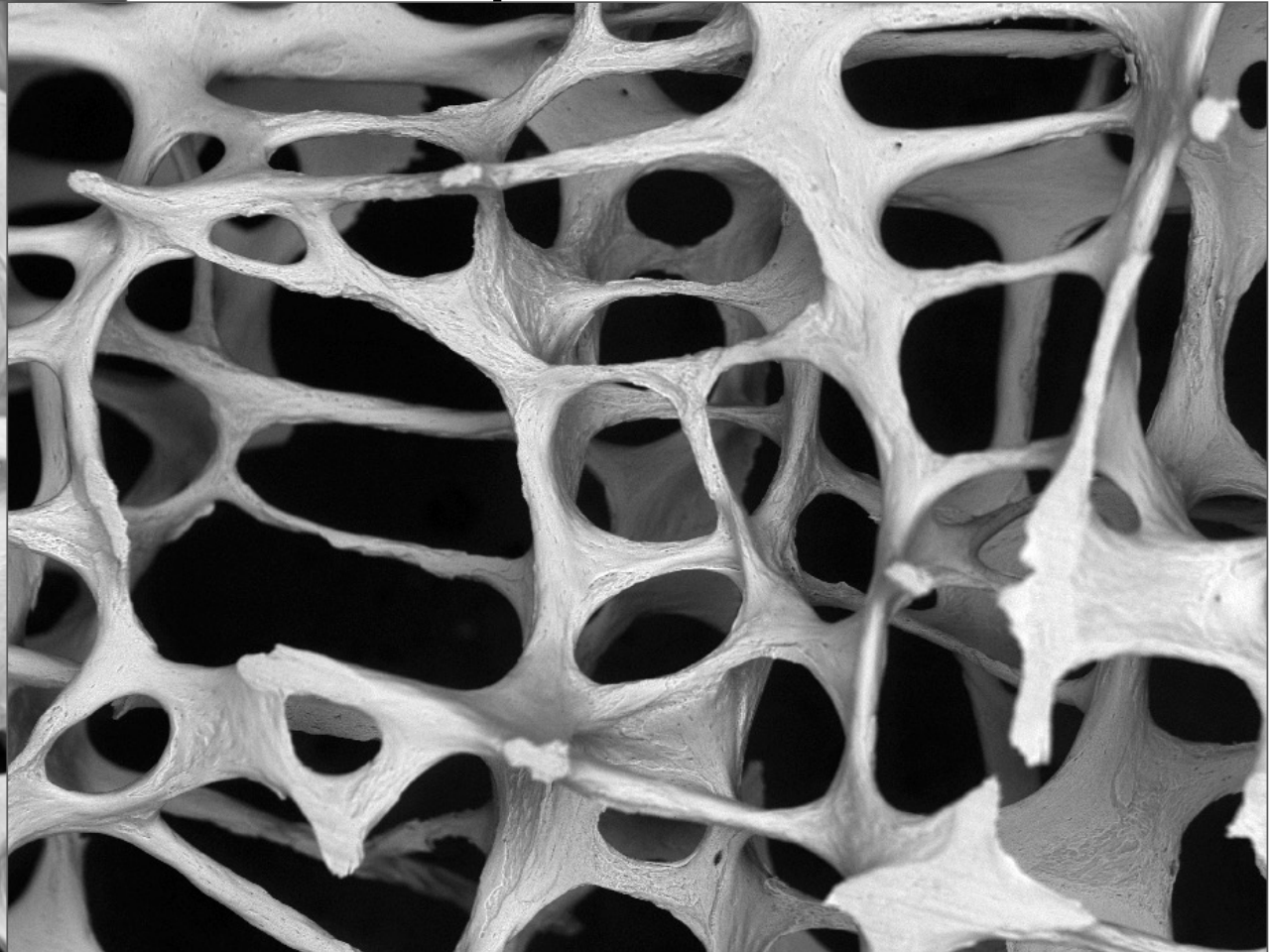


*With kind permission from Prof. Alan Boyde*

Normal bone

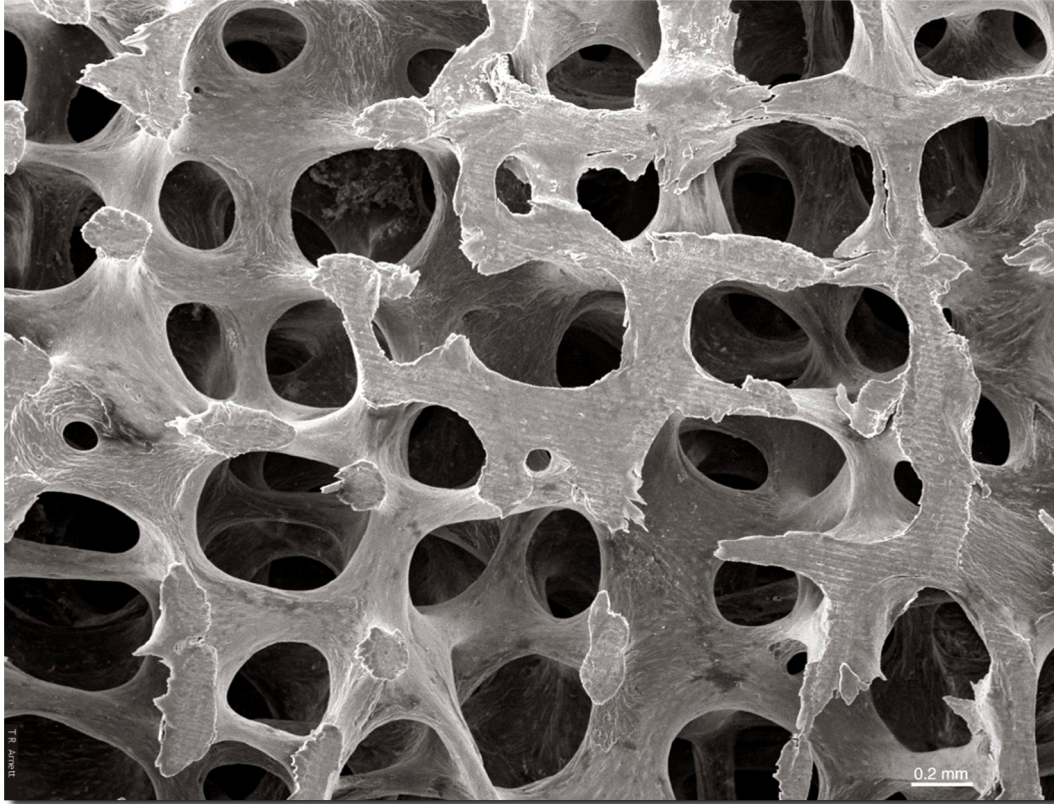


Osteoporotic bone

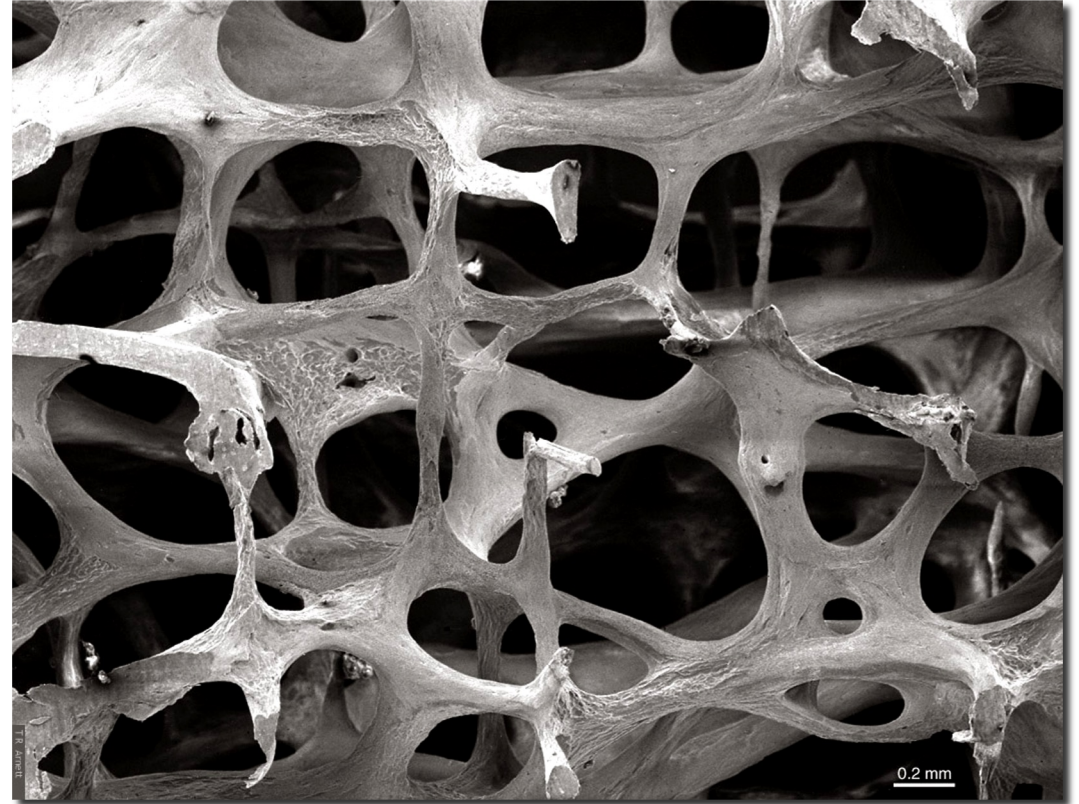


*With kind permission from Prof. Alan Boyde*

# Normal bone



# Osteoporotic bone



*With kind permission from Prof. Tim Arnett*



Osteoporosis most commonly affects:

Postmenopausal women

Men over 50

Patients taking long term corticosteroids

Other risk factors include:

Smoking and/or excess alcohol intake

Vitamin D or calcium deficiency

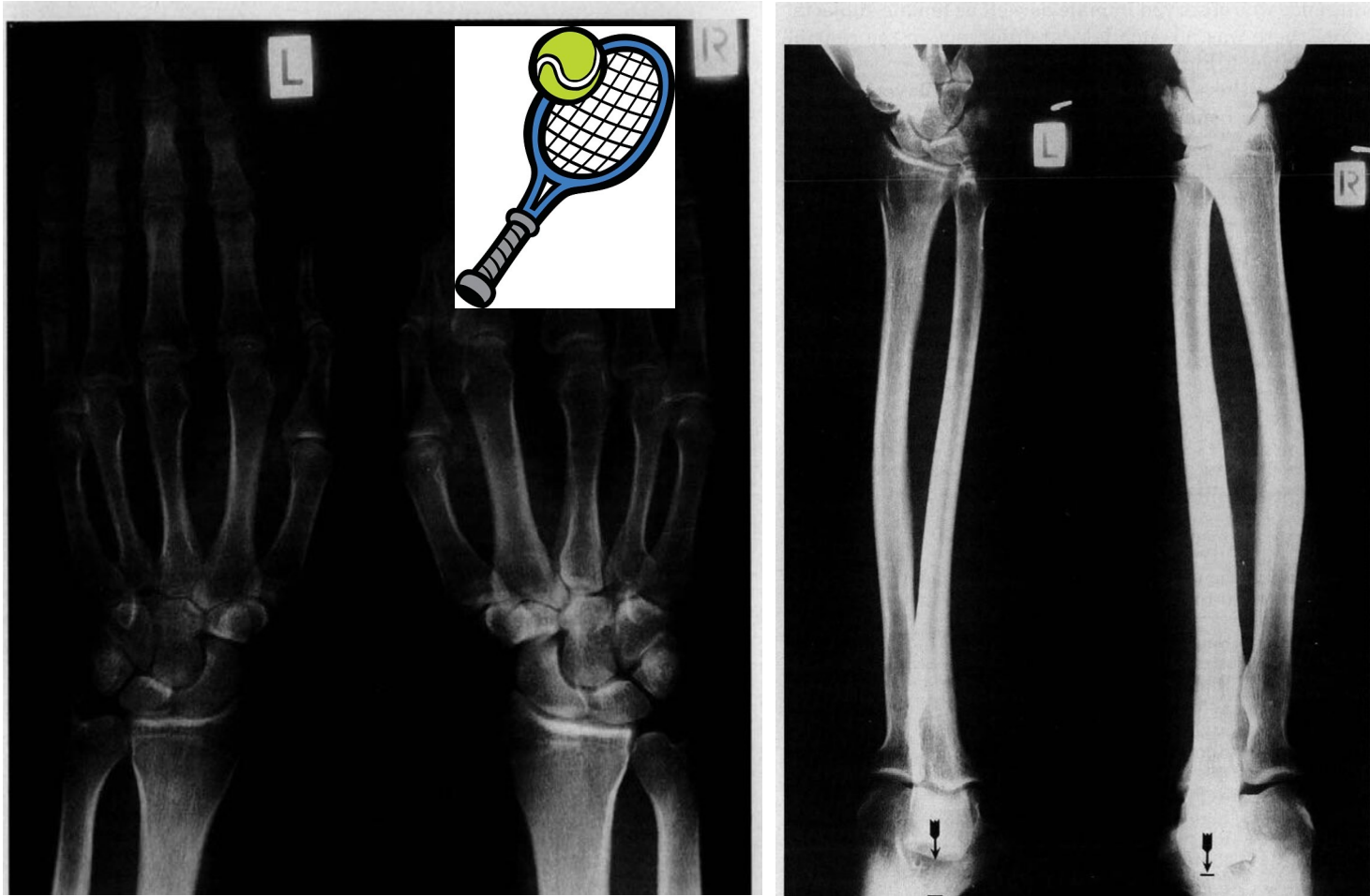
Rheumatoid arthritis, diabetes, anorexia

# Disuse loses bone



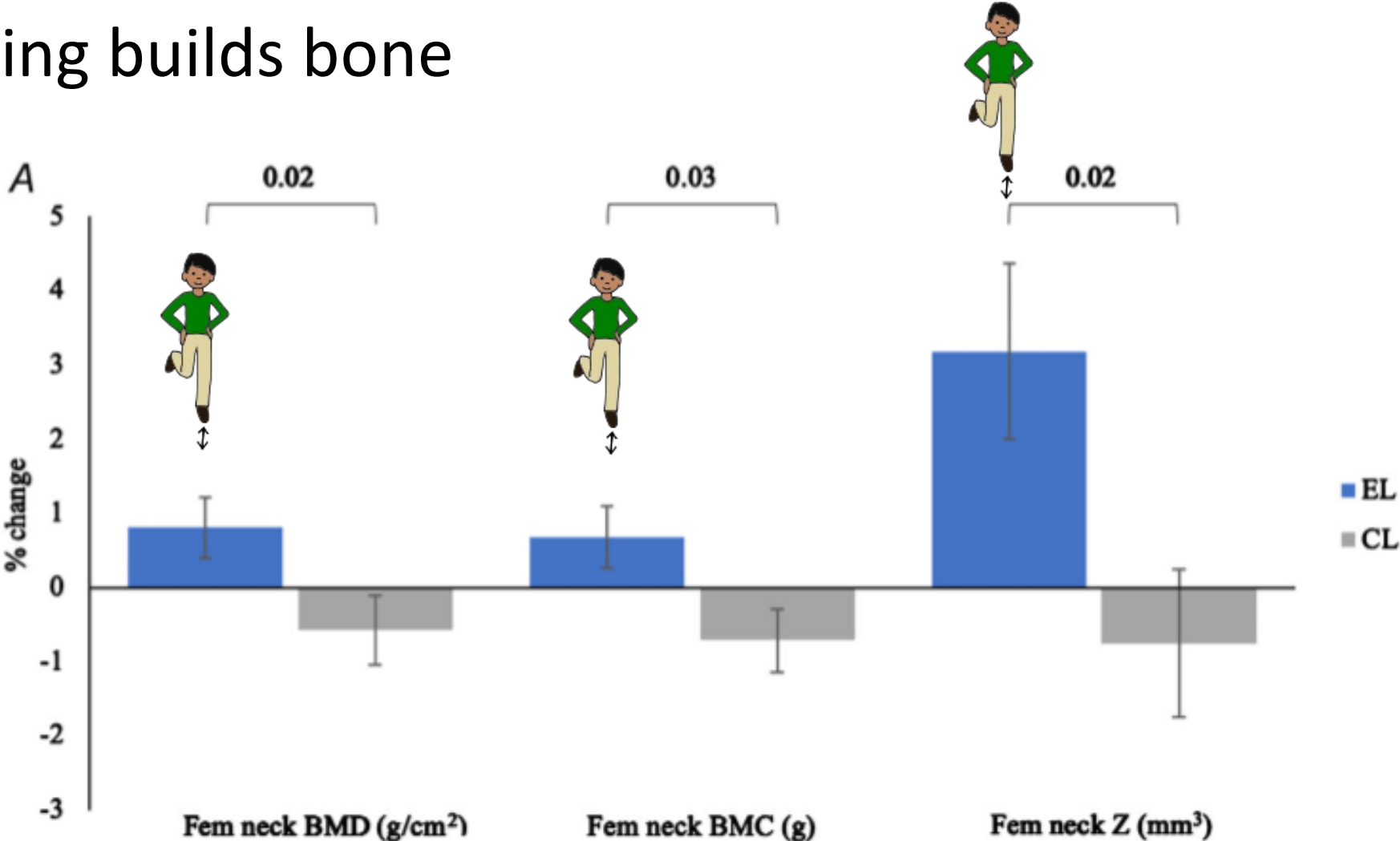
Loss of 2% bone mass every month in space or with bed rest

# Loading builds bone



*Krahl et al. 1994. American Journal of Sports Medicine*

# Loading builds bone



Hartley et al. 2019. JMBR

Hopping (50 hops daily on one leg) for 6 months. Postmenopausal women

# Tips to reduce the risk of osteoporosis

1. Weight bearing exercise

# Tips to reduce the risk of osteoporosis

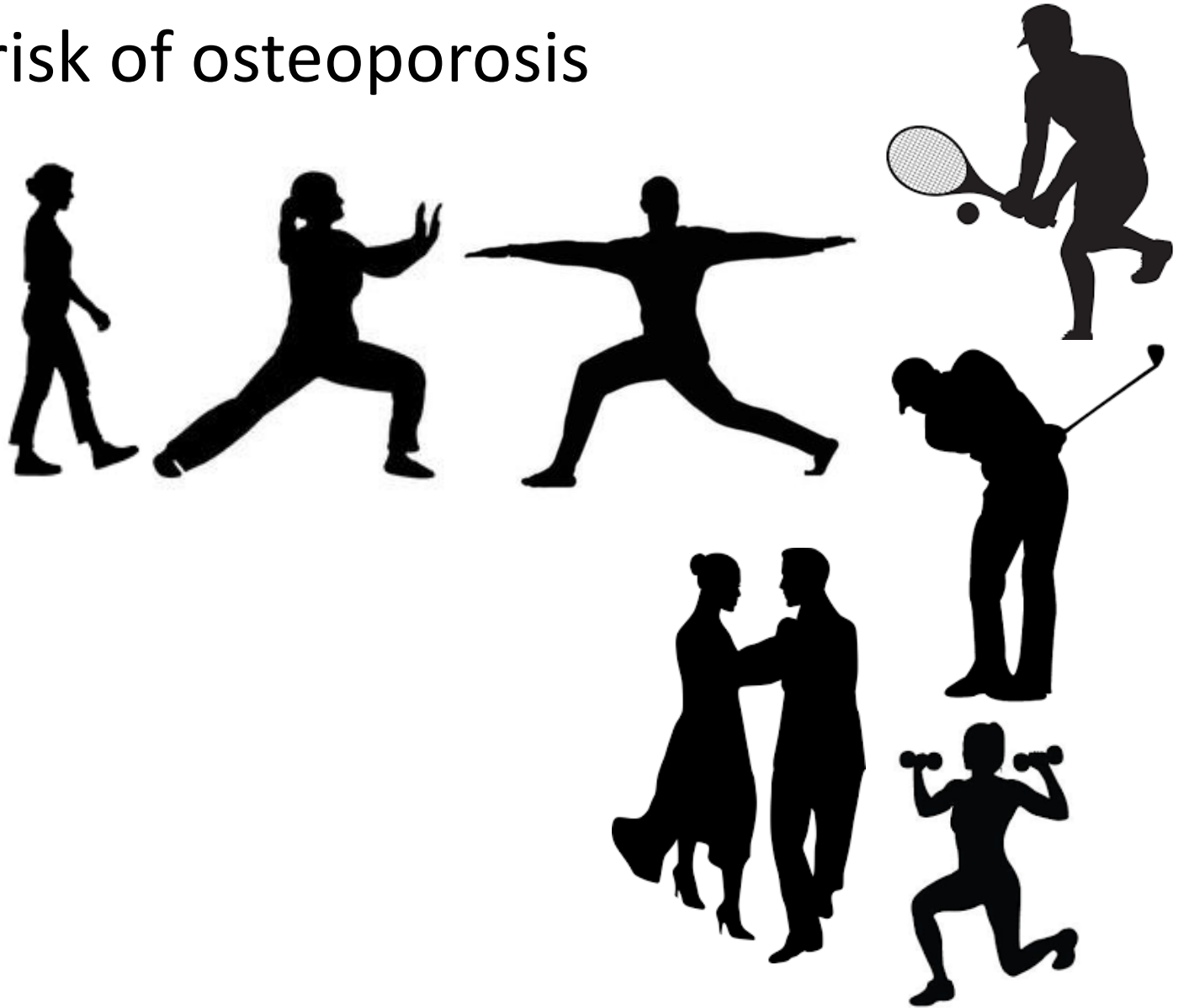
1. Weight bearing exercise
2. Weight bearing exercise

# Tips to reduce the risk of osteoporosis

1. Weight bearing exercise
2. Weight bearing exercise
3. Weight bearing exercise

# Tips to reduce the risk of osteoporosis

1. Weight bearing exercise
2. Weight bearing exercise
3. Weight bearing exercise





# Tips to reduce the risk of osteoporosis

1. Weight bearing exercise
2. Weight bearing exercise
3. Weight bearing exercise



Also important:

1. Adequate nutrition e.g., calcium, protein, vit D.



# Tips to reduce the risk of osteoporosis

1. Weight bearing exercise
2. Weight bearing exercise
3. Weight bearing exercise



Also important:

1. Adequate nutrition e.g., calcium, protein, vit D.
2. Don't smoke, don't drink too much.



# Tips to reduce the risk of osteoporosis

1. Weight bearing exercise
2. Weight bearing exercise
3. Weight bearing exercise

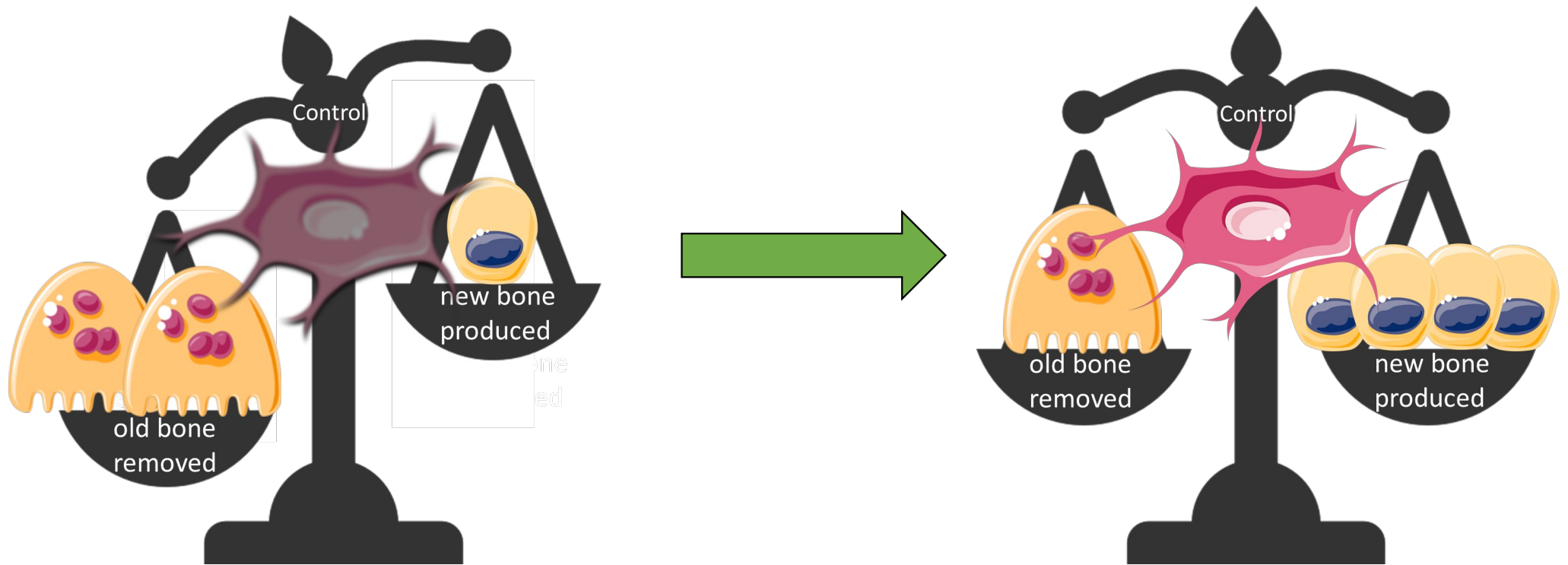


Also important:

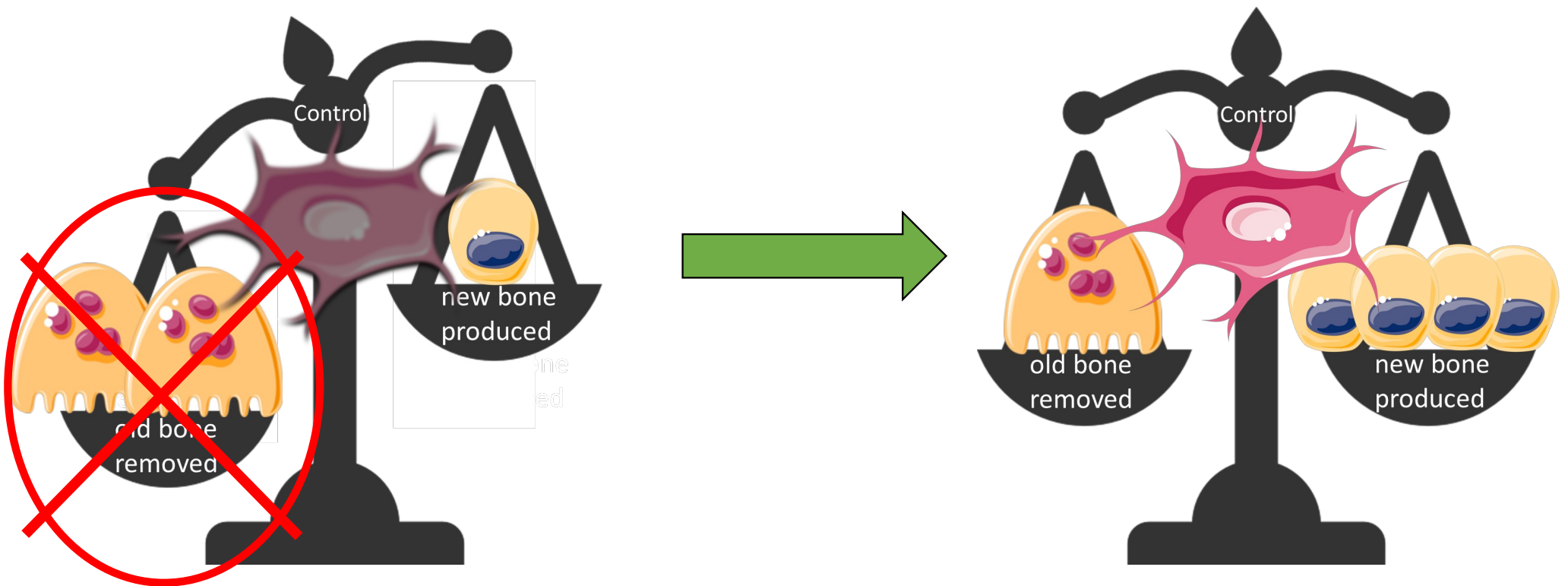
1. Adequate nutrition e.g., calcium, protein, vit D.
2. Don't smoke, don't drink too much.
3. Hormone replacement therapy can be beneficial.



# Medications to treat osteoporosis

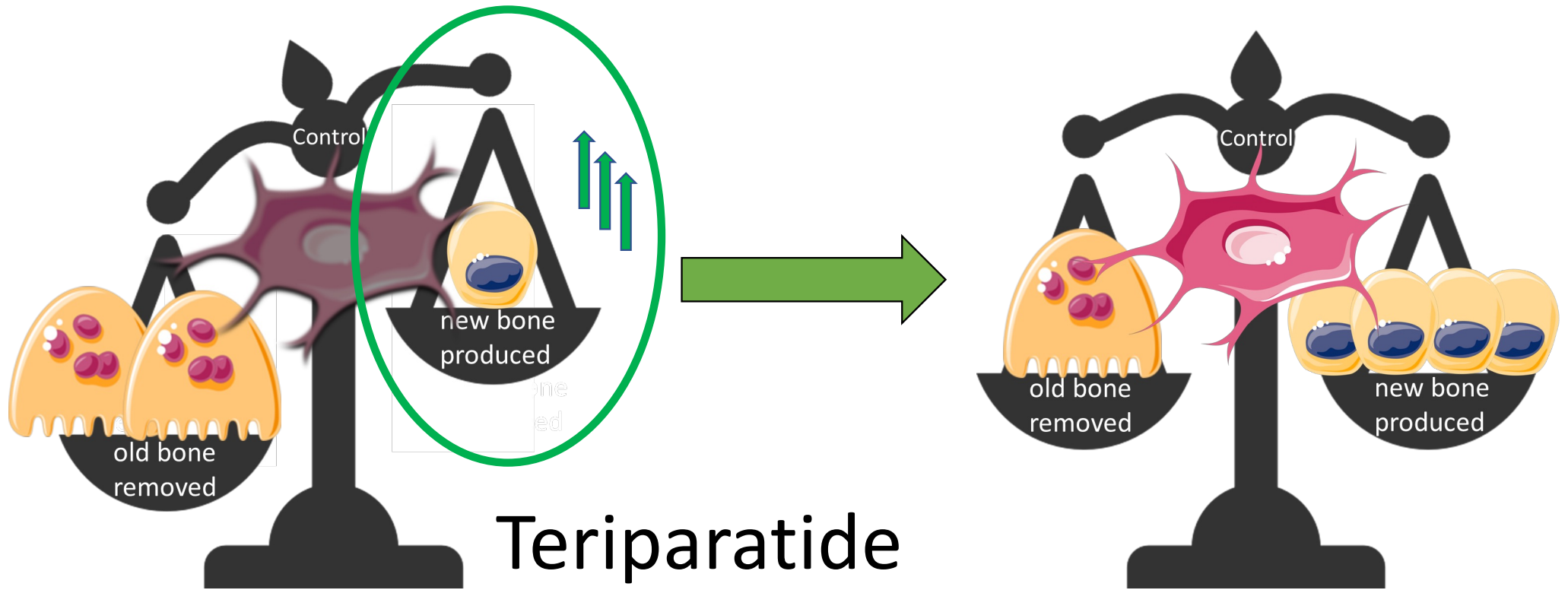


# Medications to treat osteoporosis



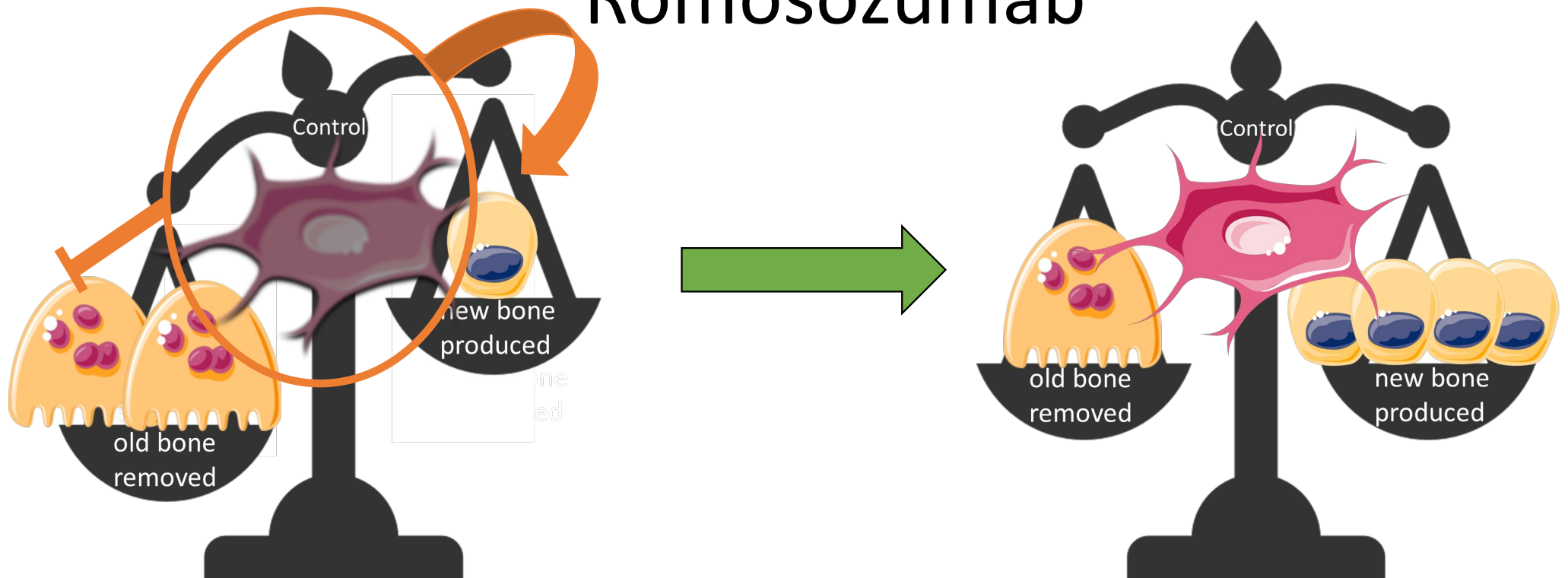
**Bisphosphonates or Denosumab**

# Medications to treat osteoporosis



# Medications to treat osteoporosis

## Romosozumab



# Limitations of existing osteoporosis treatments



## **Bisphosphonates or Denosumab:**

No bone gain

Atypical fracture risk

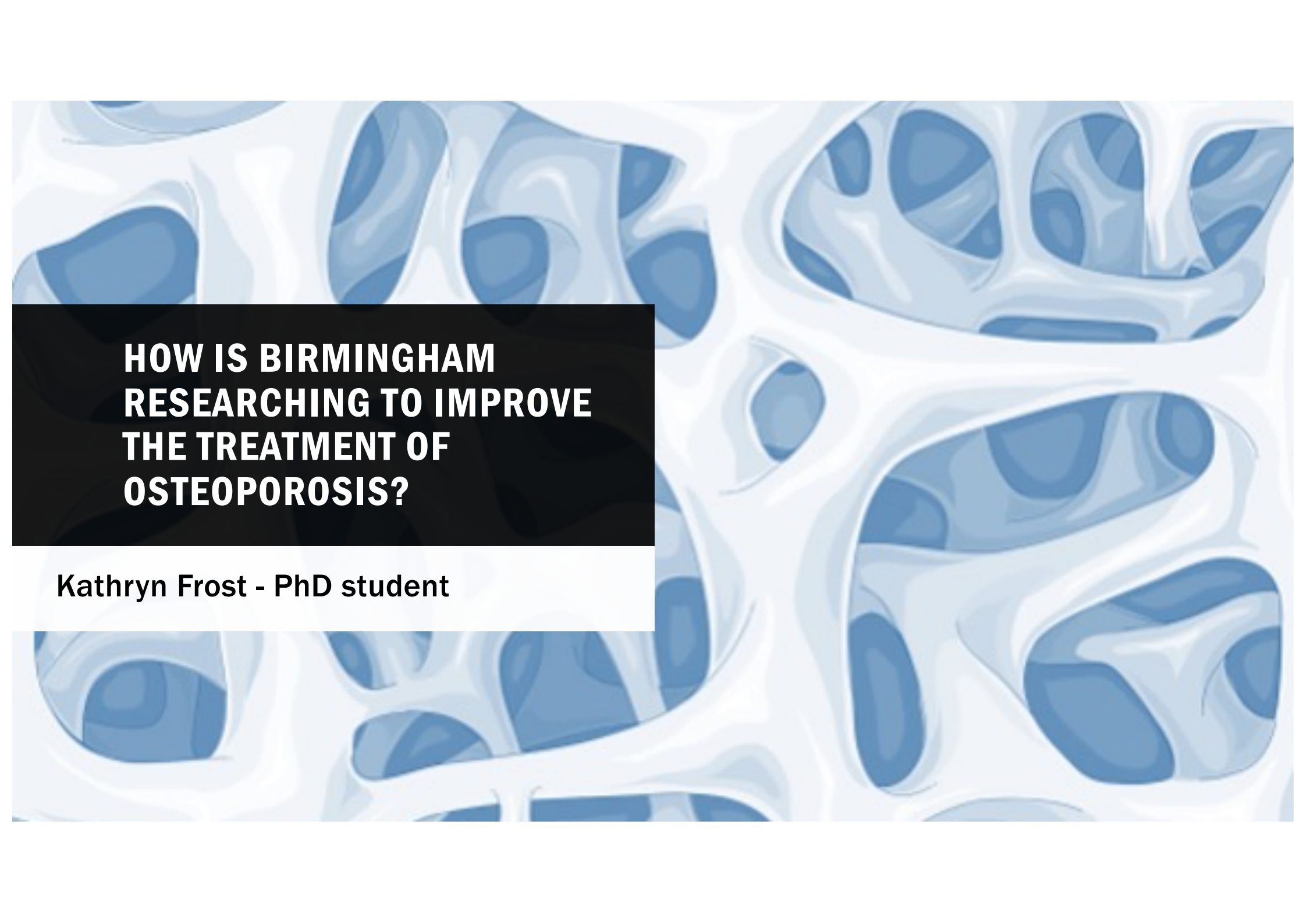
## **Teriparatide:**

2 year max treatment

## **Romozosumab:**

Cardiovascular risk (heart attack, stroke)

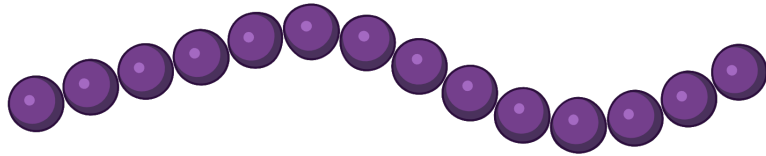




**HOW IS BIRMINGHAM  
RESEARCHING TO IMPROVE  
THE TREATMENT OF  
OSTEOPOROSIS?**

**Kathryn Frost - PhD student**

# Introducing PEPITEM

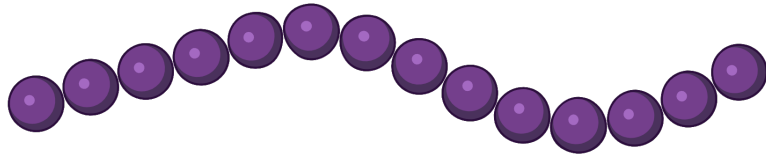


Name: **PEPITEM**

Seq: **SVTEQGAELSNEER**

**PEPITEM is a small protein produced naturally by the body**

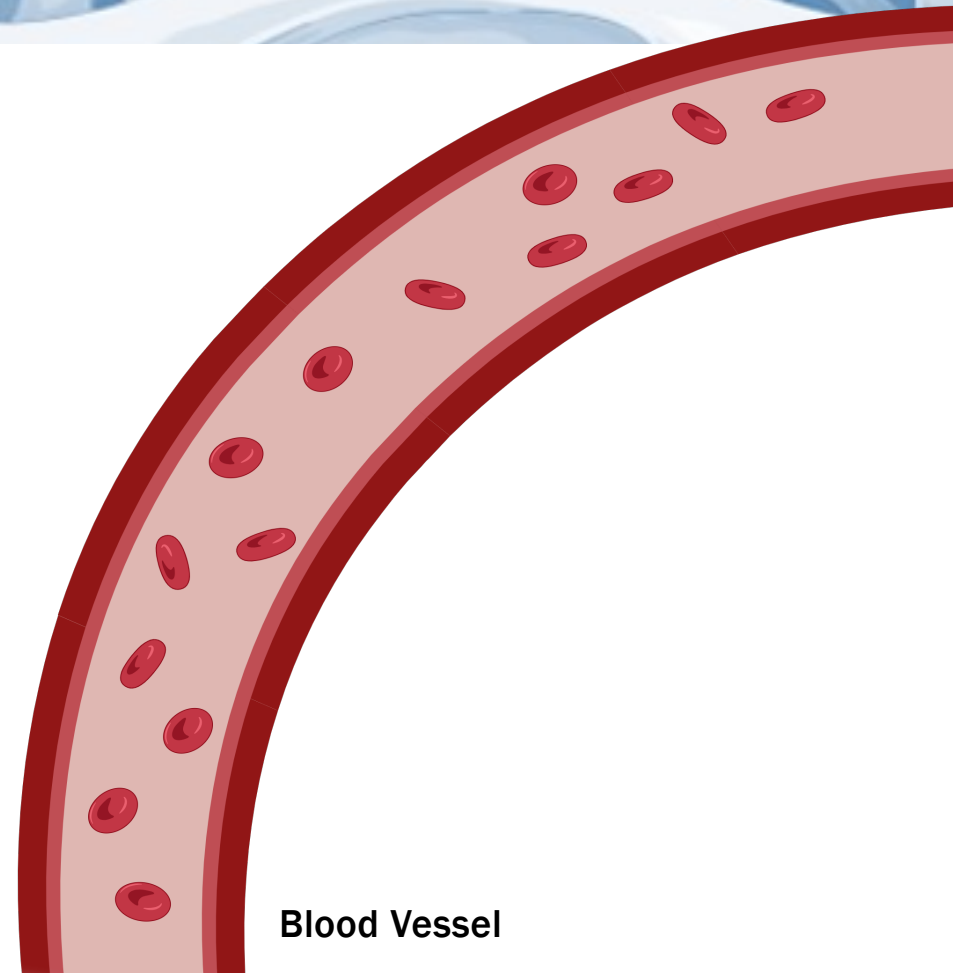
# Introducing PEPITEM



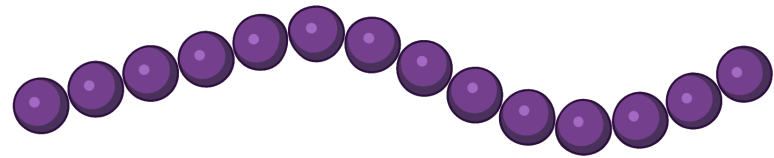
Name: **PEPITEM**

Seq: **SVTEQGAELSNEER**

PEPITEM is a small protein produced naturally by the body



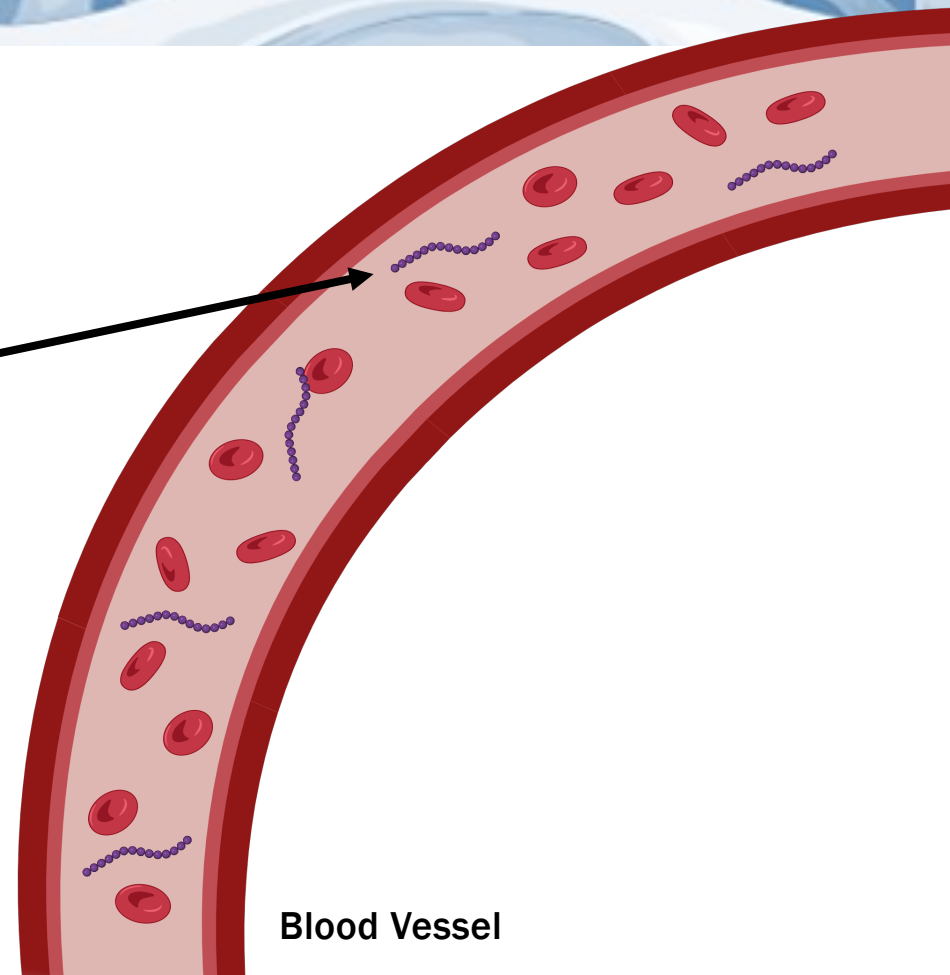
# Introducing PEPITEM



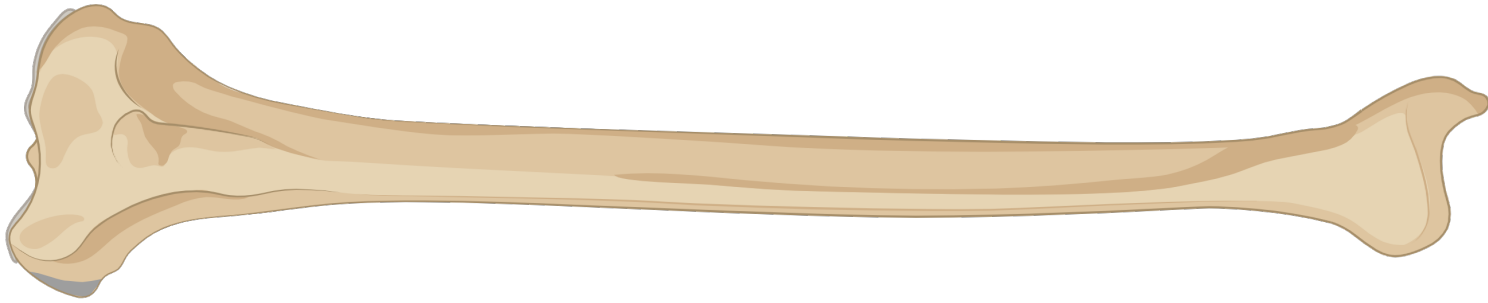
Name: **PEPITEM**

Seq: **SVTEQGAELSNEER**

PEPITEM is a small protein produced naturally by the body



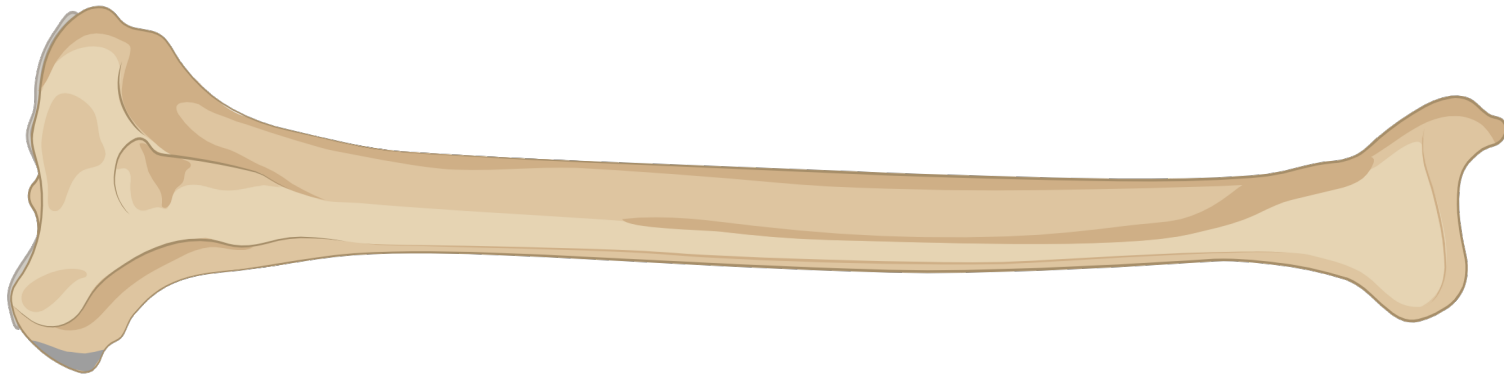
# PEPITEM increases bone volume



PEPITEM has been shown to increase bone volume/mass.

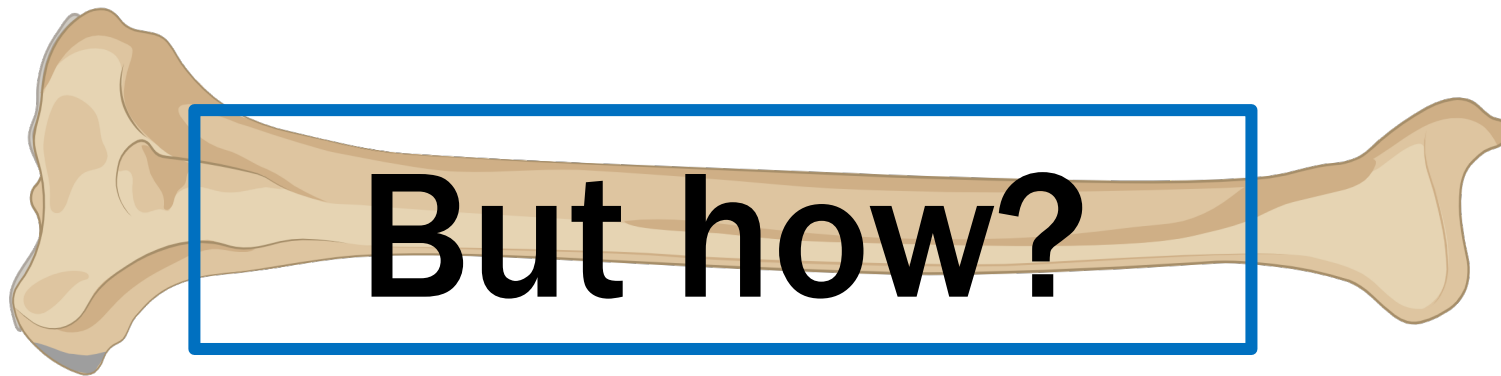
# PEPITEM increases bone volume

PEPITEM



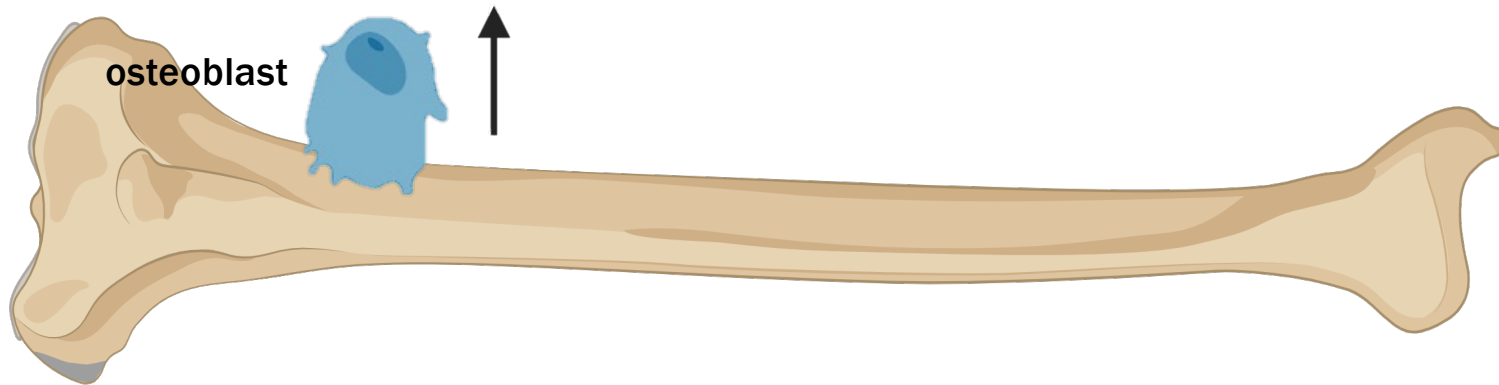
PEPITEM has been shown to increase bone volume/mass.

**PEPITEM increases bone volume**



PEPITEM has been shown to increase bone volume/mass.

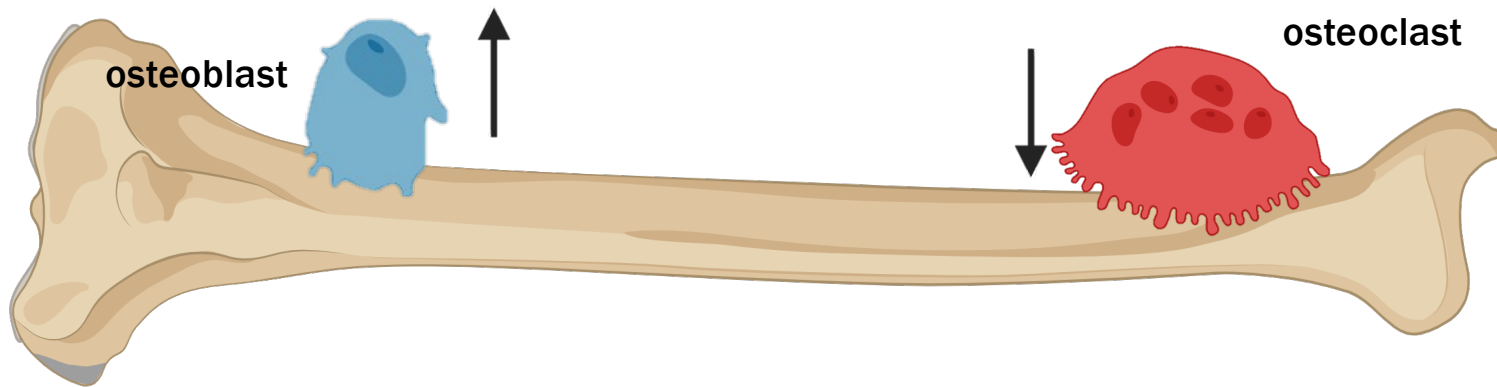
# PEPITEM increases bone volume



Is it through the increased action of osteoblasts, the bone building cells?



# PEPITEM increases bone volume



Or through the reduced action of osteoclasts, the bone breaking cells?

The background of the slide is a microscopic image of bone tissue, showing a network of interconnected bone trabeculae and osteons. The color palette is primarily light blue and white, with some darker blue areas representing the mineralized bone matrix. A central black rectangular box contains the text.

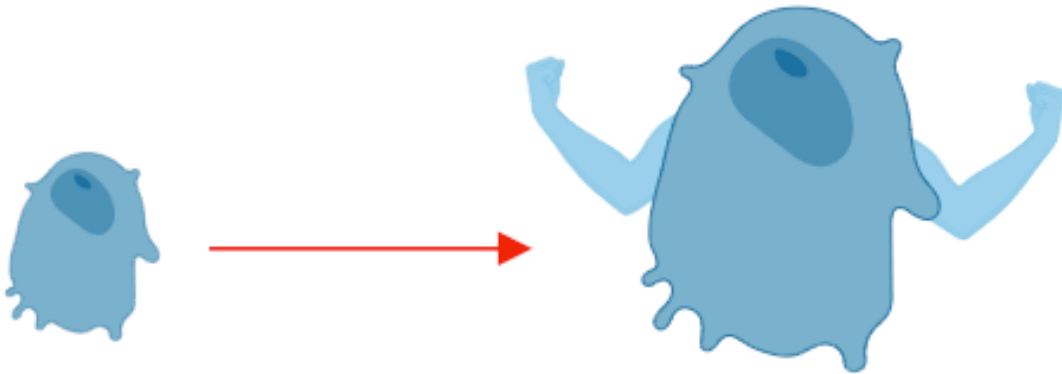
**How does PEPITEM  
affect bone building?**

# PEPITEM increases bone building



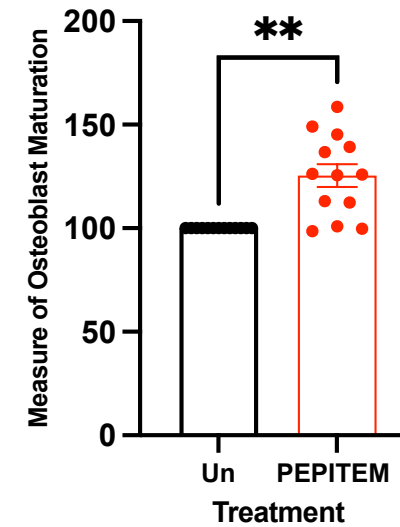
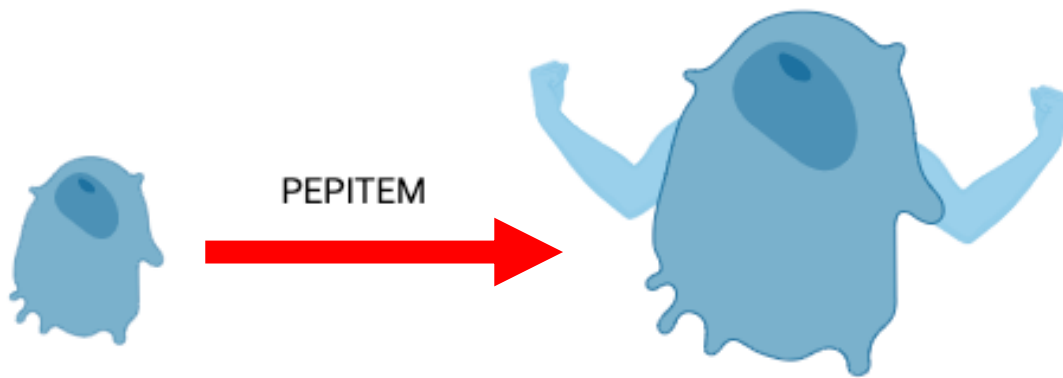
Osteoblasts grow up (in a sense) and mature, these mature cells are more active and are better builders

# PEPITEM increases bone building



Osteoblasts grow up (in a sense) and mature, these mature cells are more active and are better builders

# PEPITEM increases bone building



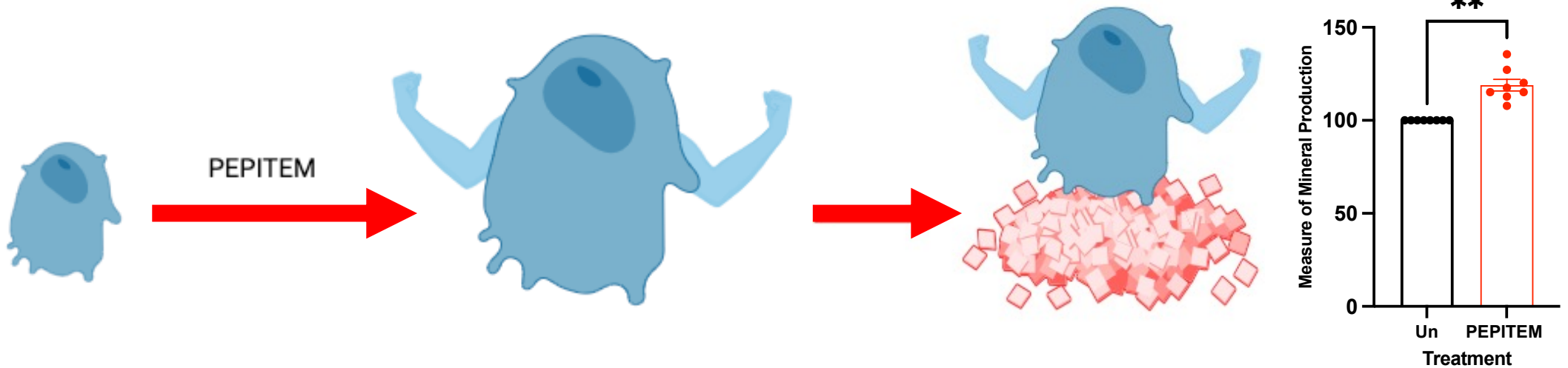
Osteoblasts grow up (in a sense) and mature, these mature cells are more active and are better builders

# PEPITEM increases bone building



Mature osteoblasts produce mineral (the building blocks of bone): PEPITEM increases mineral production.

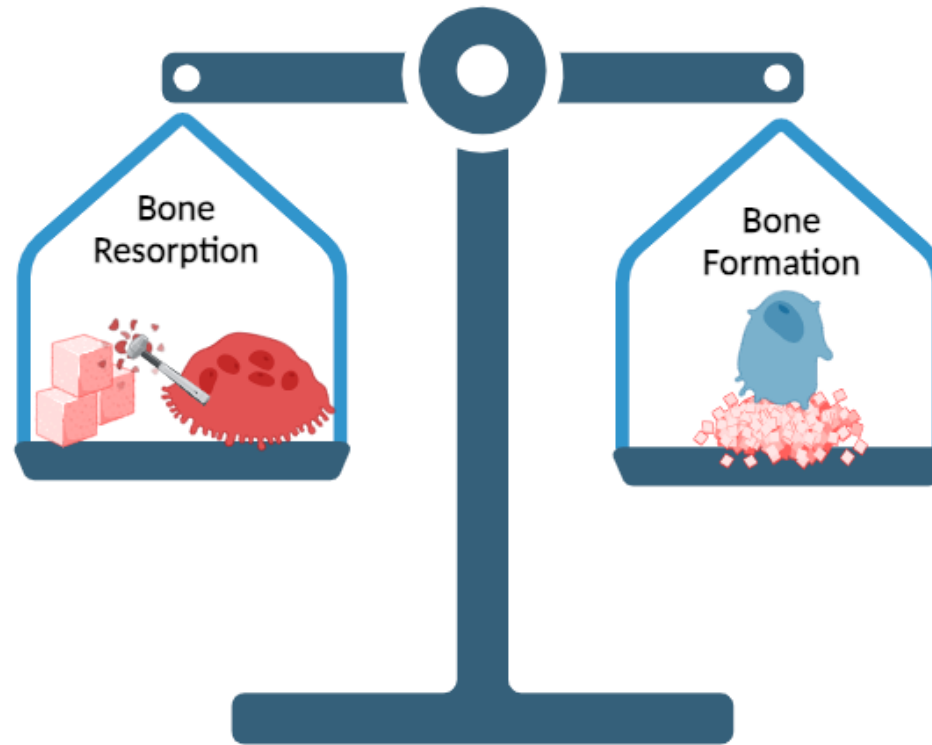
# PEPITEM increases bone building



Mature osteoblasts produce mineral (the building blocks of bone): PEPITEM increases mineral production.

# PEPITEM decreases bone building

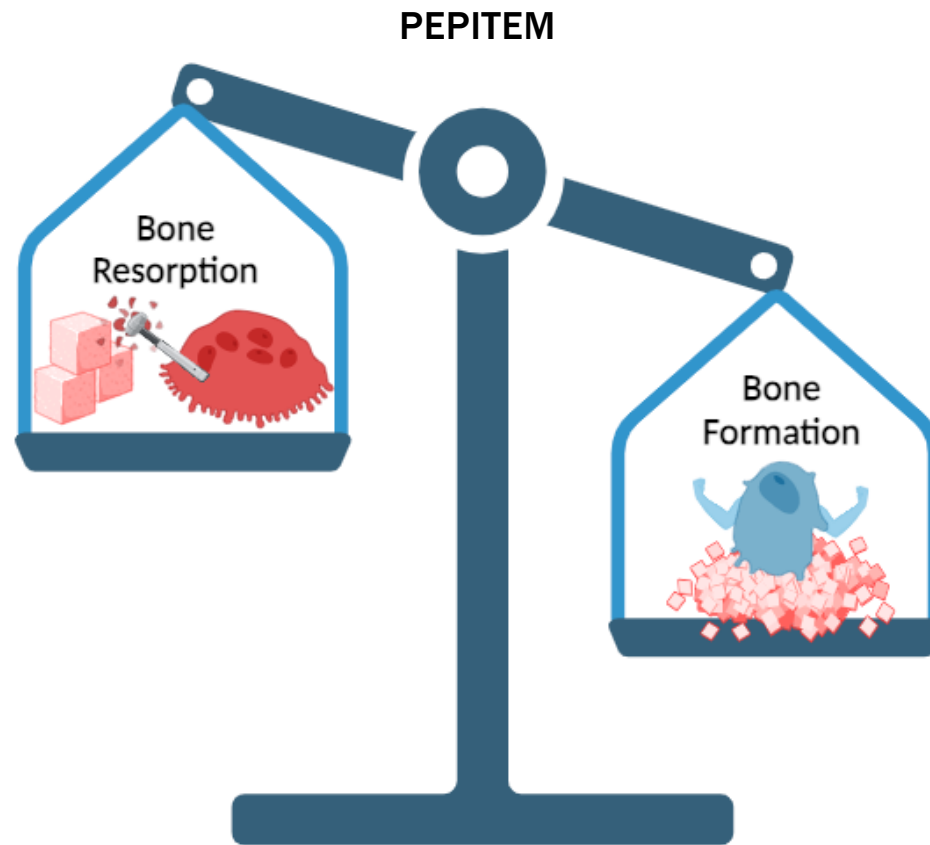
Normal Bone Remodeling




During normal bone remodeling, breaking and building are equal.



# PEPITEM decreases bone building

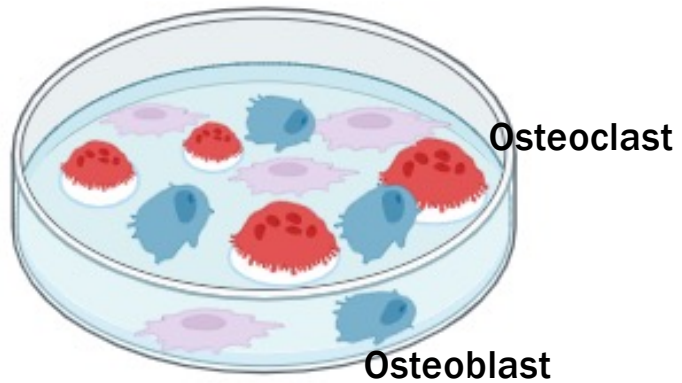


PEPITEM can shift this balance to a higher level of bone building



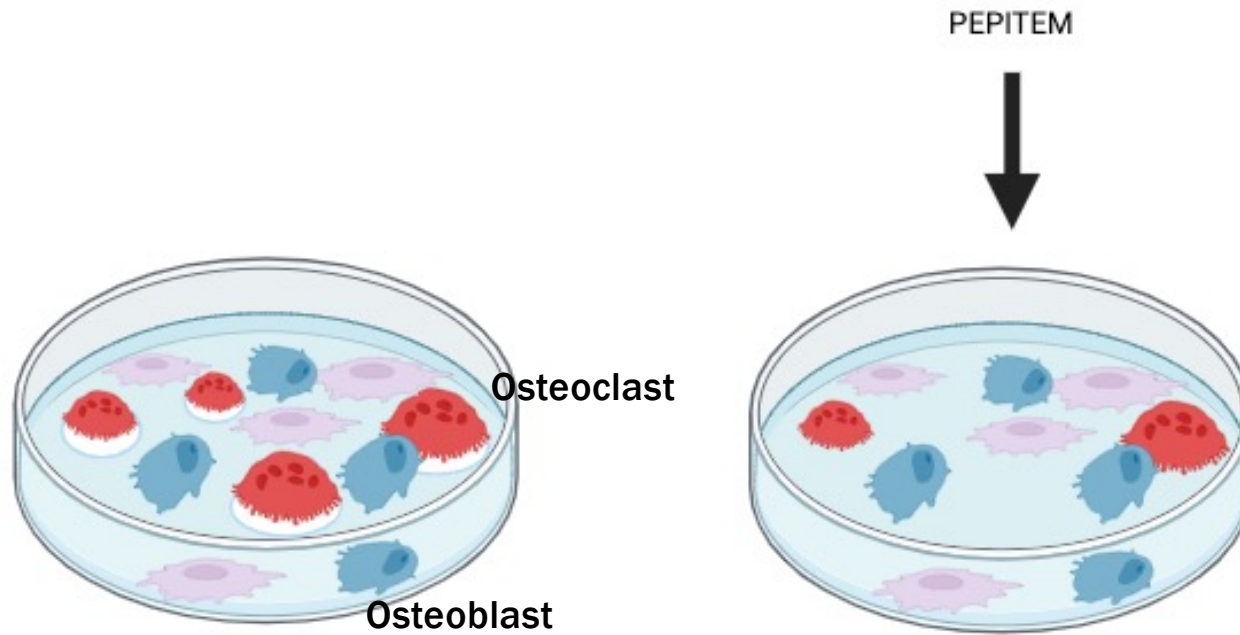
**But what about bone  
breaking?**

# PEPITEM decreases bone breaking



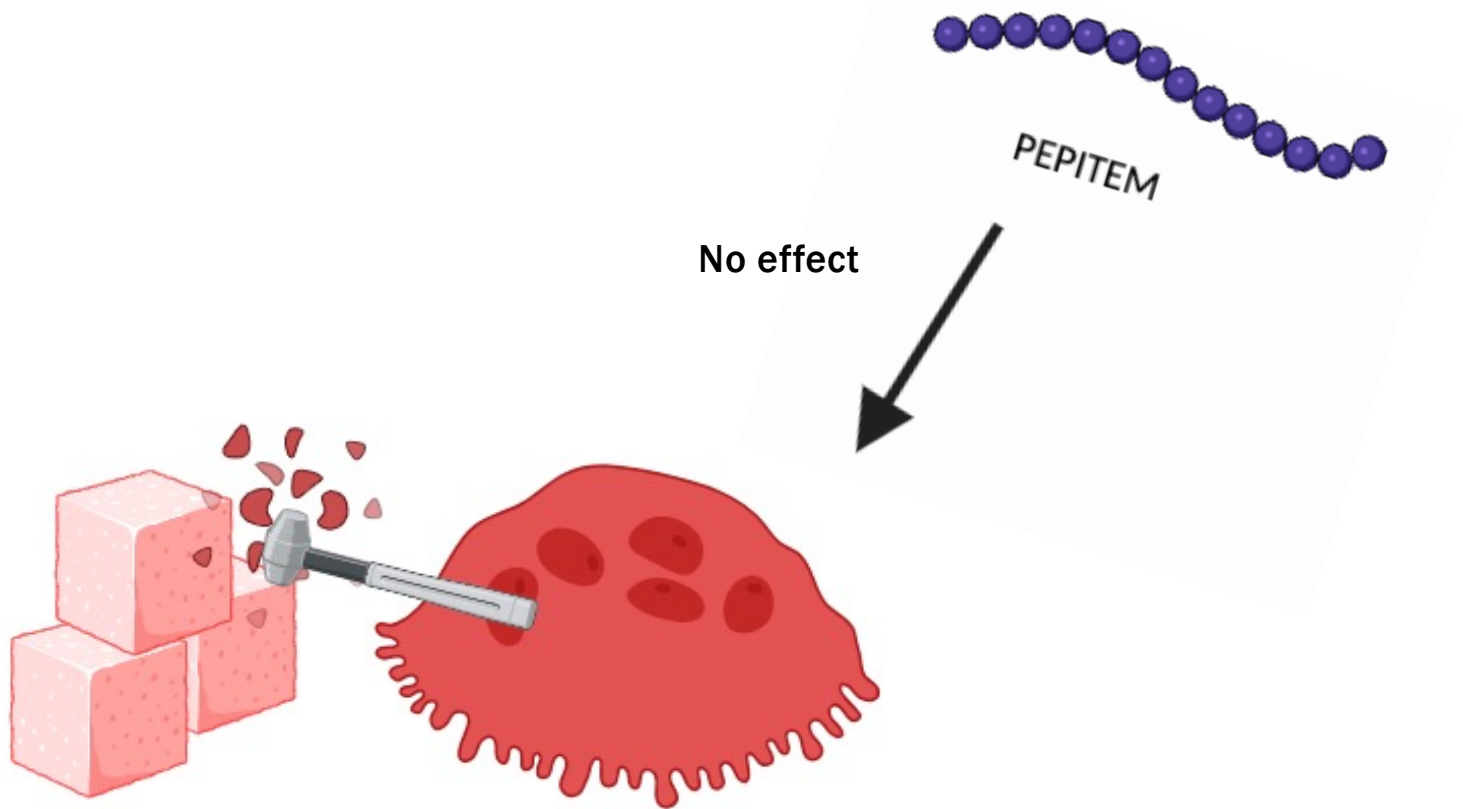
Culturing multiple bone cells together allows us to understand how these cells 'talk' to each other

# PEPITEM decreases bone breaking



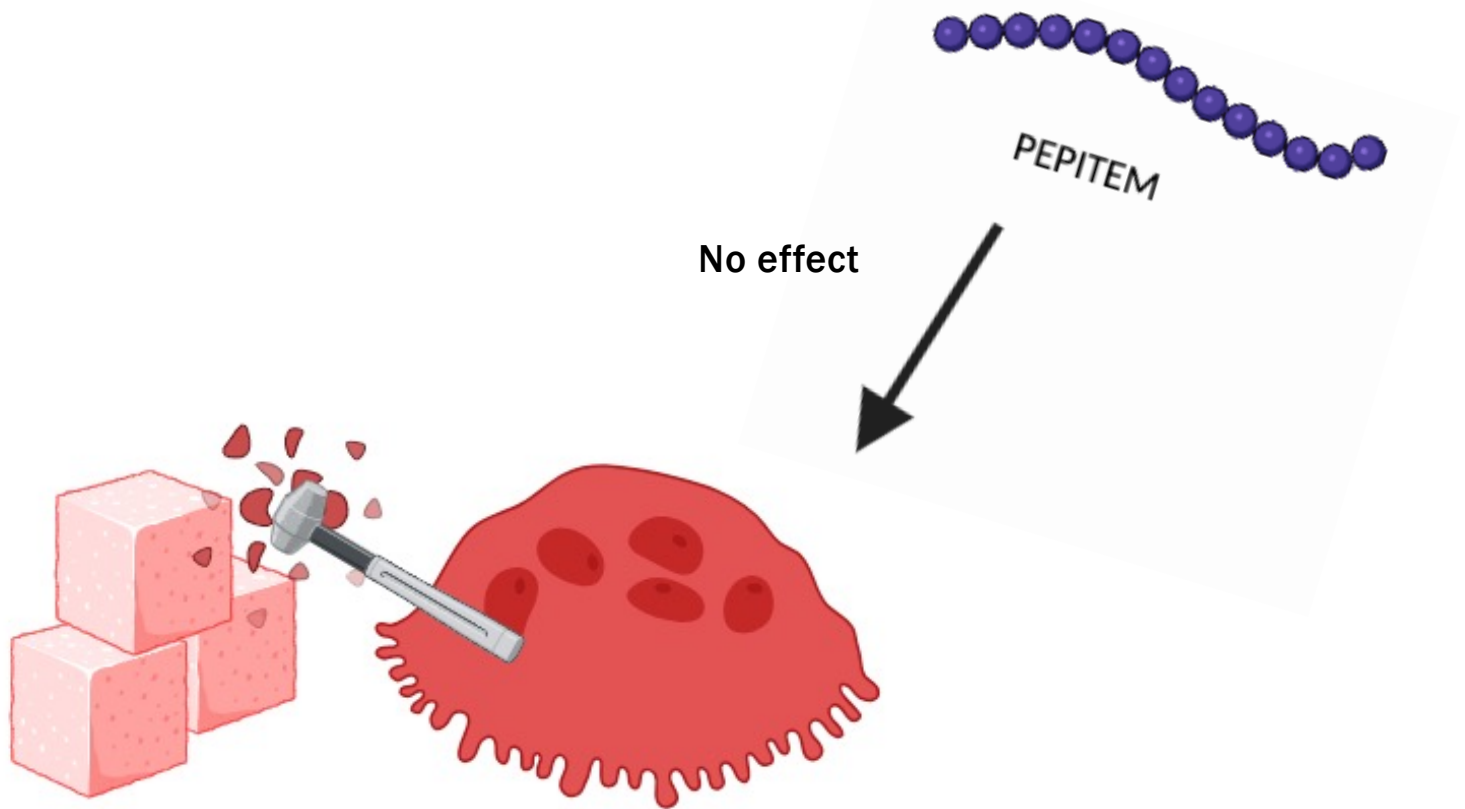
PEPITEM in these cultures reduces the activity of osteoclasts, reducing bone breaking

# PEPITEM decreases bone breaking



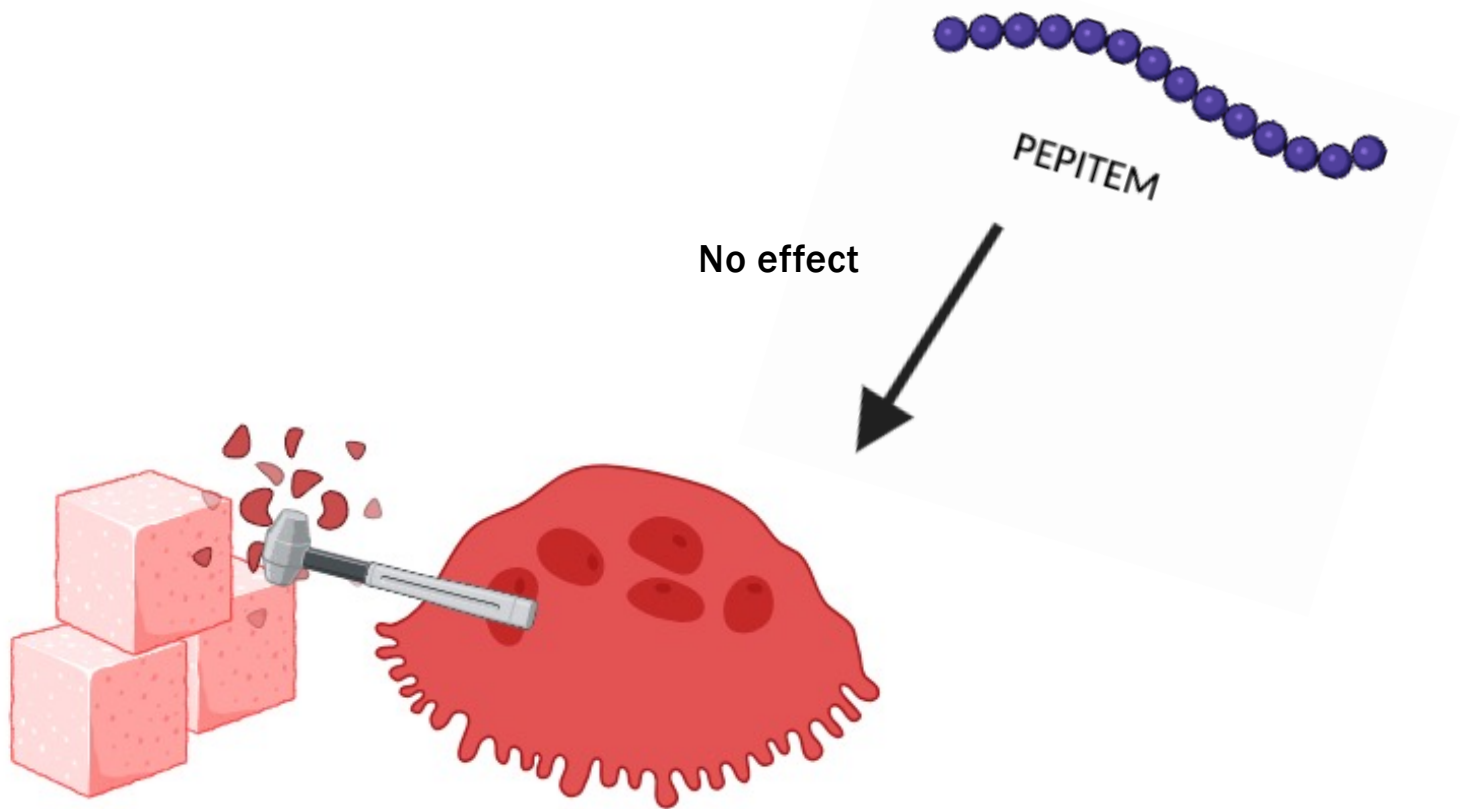
PEPITEM does not act on osteoclasts directly to affect bone resorption

# PEPITEM decreases bone breaking



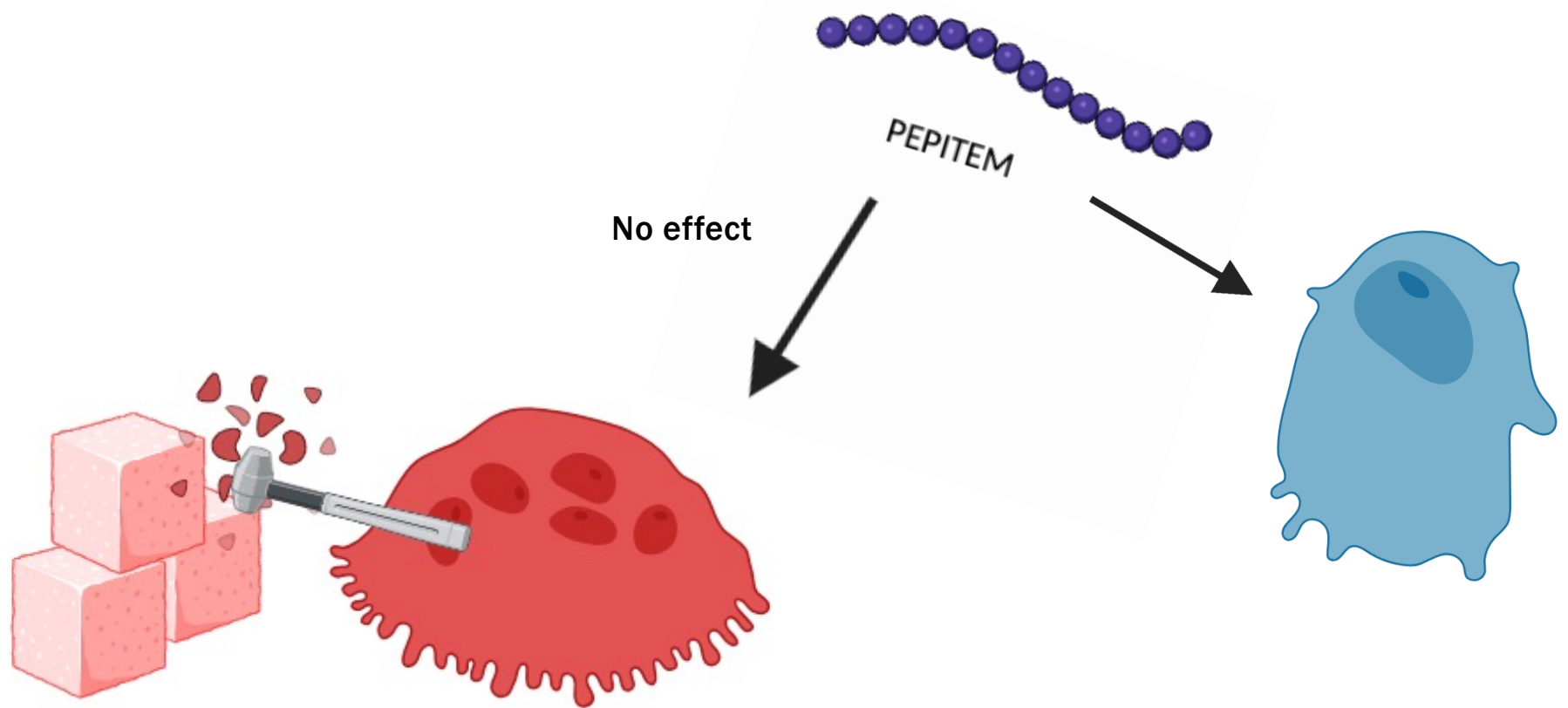
PEPITEM does not act on osteoclasts directly to affect bone resorption

# PEPITEM decreases bone breaking



PEPITEM does not act on osteoclasts directly to affect bone resorption

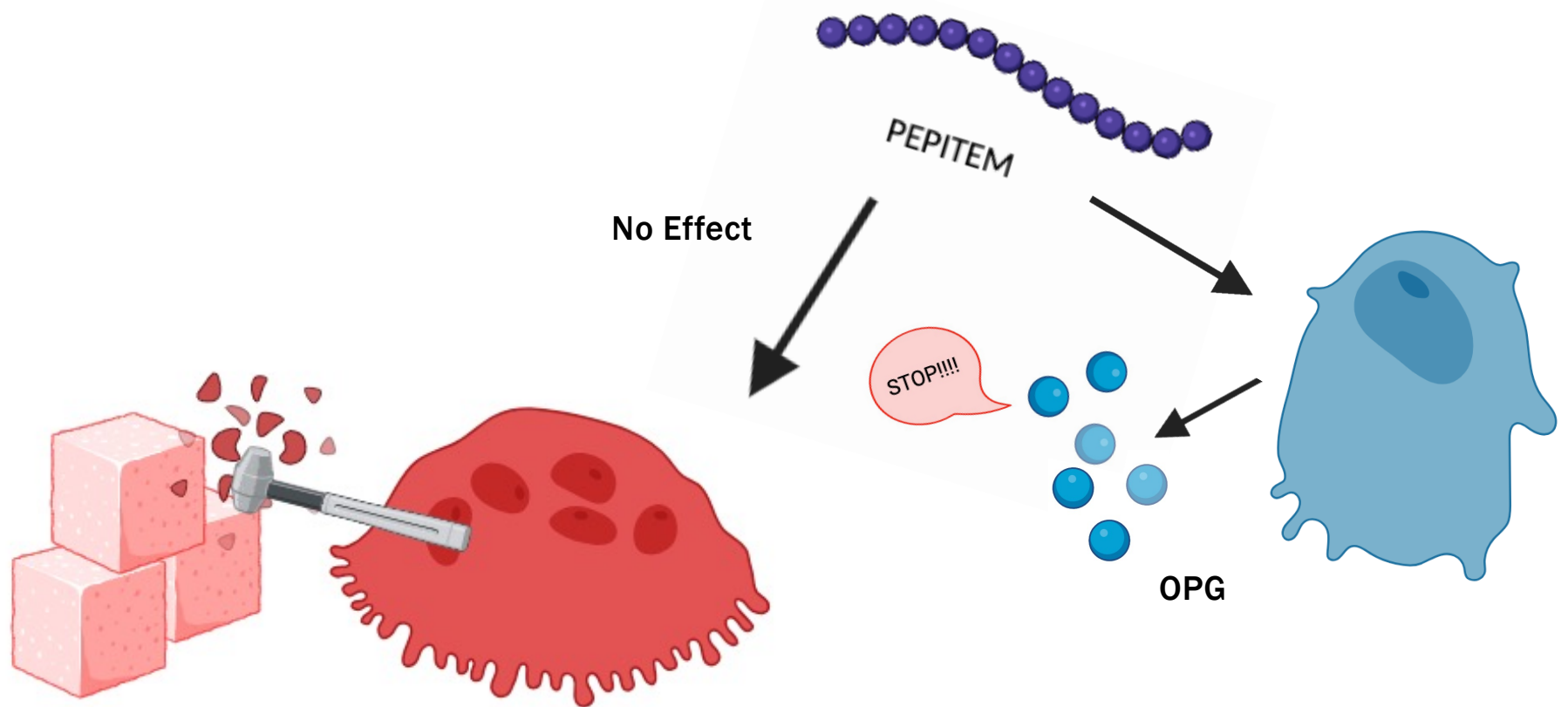
# PEPITEM decreases bone breaking



PEPITEM can disrupt the conversation between osteoblasts and osteoclasts

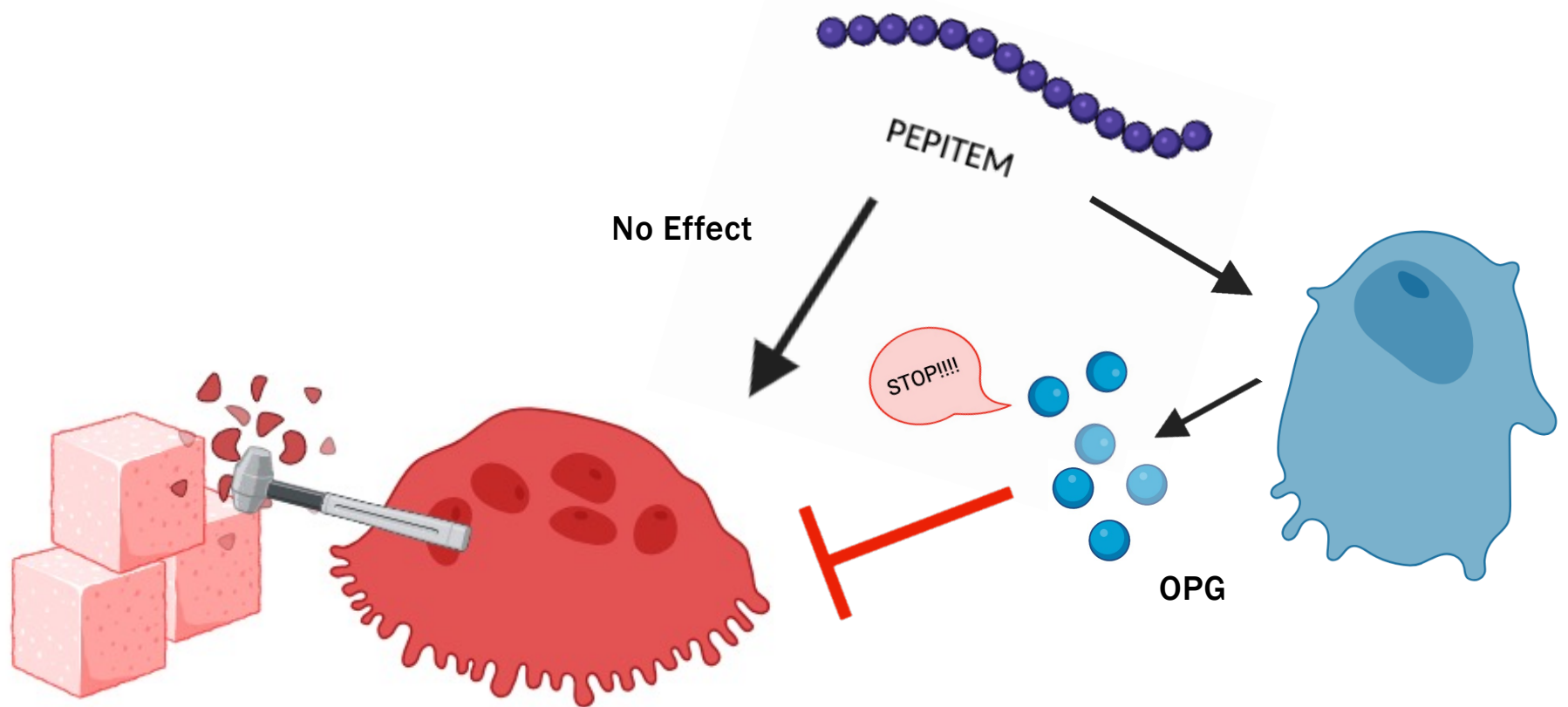


# PEPITEM decreases bone breaking



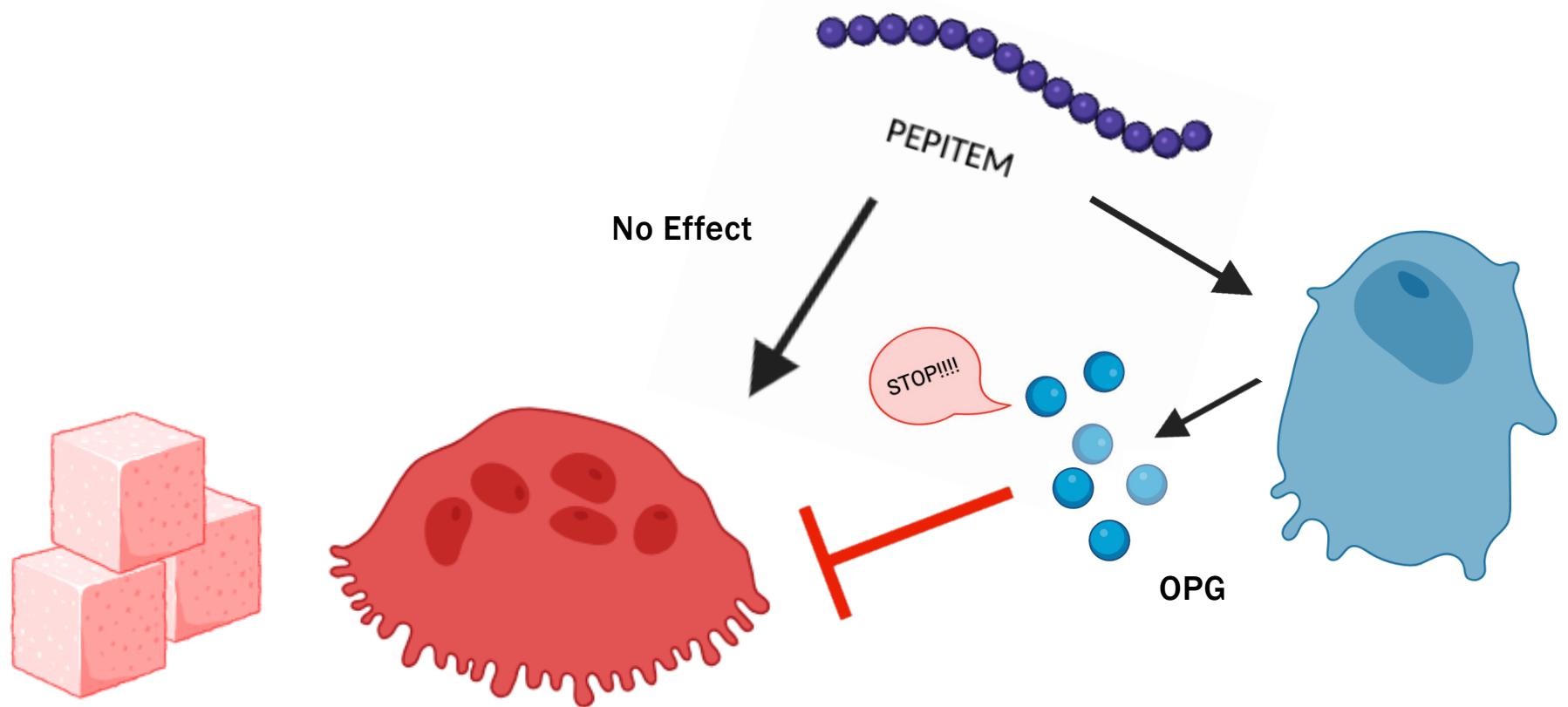
PEPITEM can disrupt the conversation between osteoblasts and osteoclasts

# PEPITEM decreases bone breaking



PEPITEM can disrupt the conversation between osteoblasts and osteoclasts

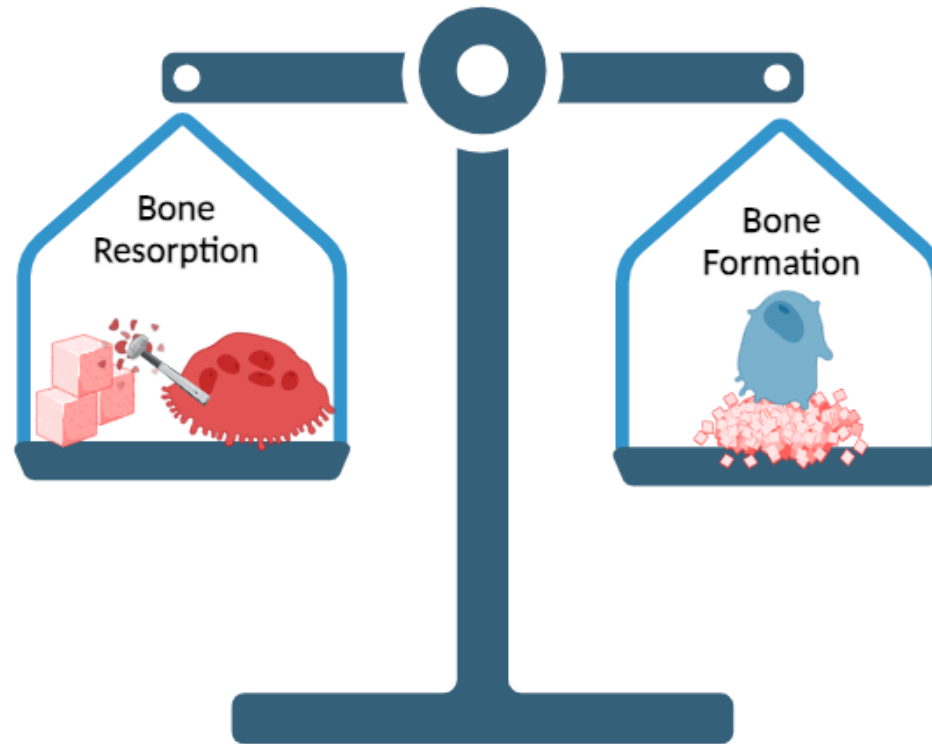
# PEPITEM decreases bone breaking



Reducing the number of active osteoclasts, reducing bone breaking

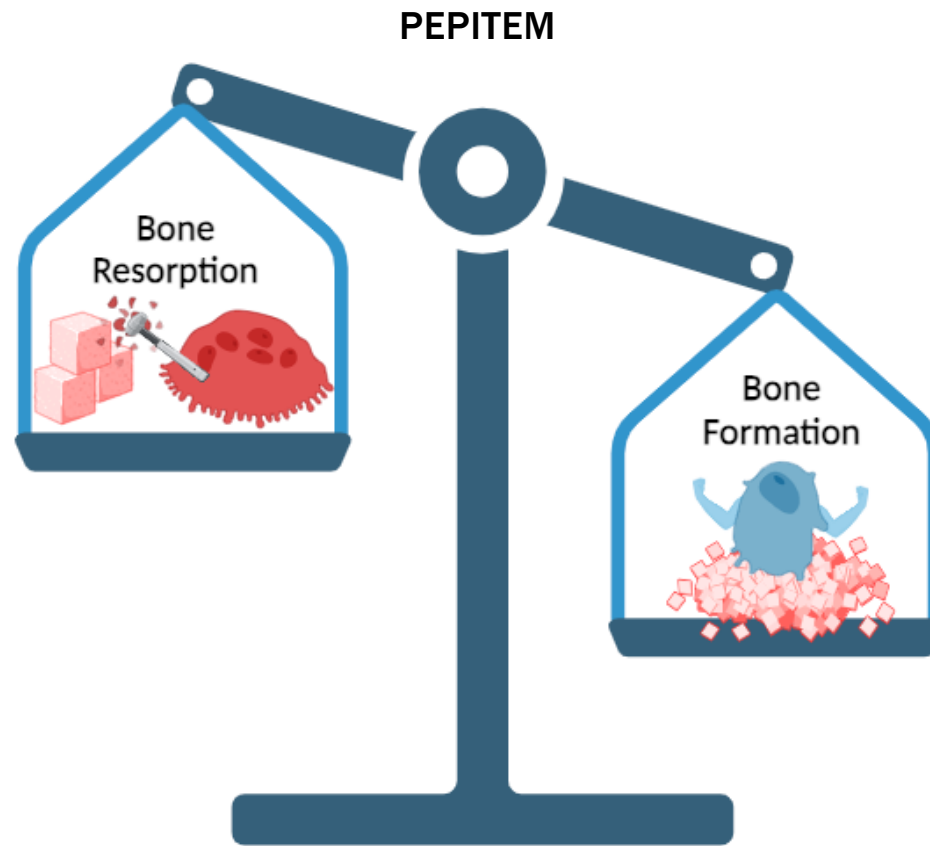
# PEPITEM increases bone building and decreases bone breaking

Normal Bone Remodeling



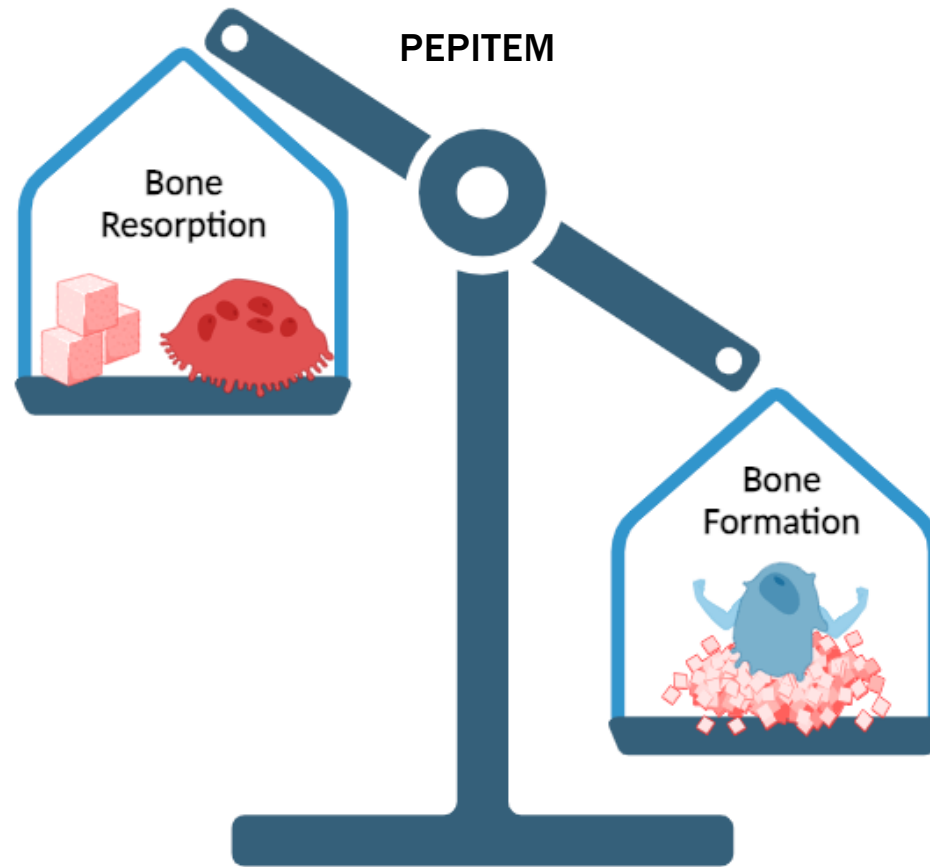
During normal bone remodeling, breaking and building are equal.

# PEPITEM increases bone building and decreases bone breaking



PEPITEM can shift this balance to a higher level of bone building

# PEPITEM increases bone building and decreases bone breaking



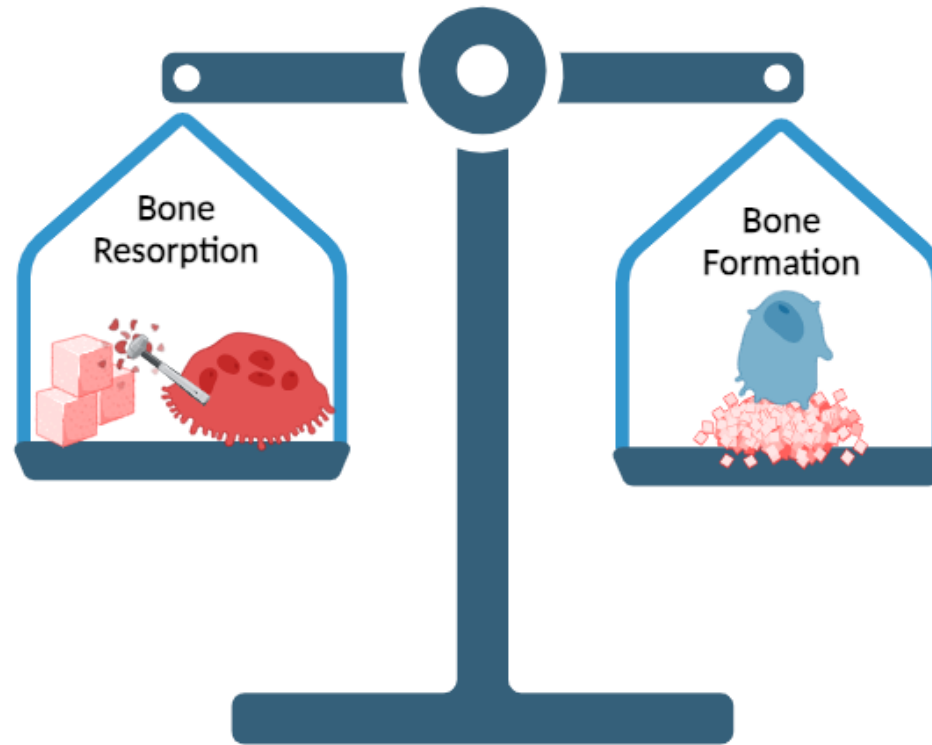
PEPITEM can shift this balance further to a higher level of bone building by also reducing bone breaking

A microscopic view of bone tissue, showing a network of interconnected bone cells and fibers. The image is rendered in shades of blue and white, with a central black box containing white text.

**What does this mean for  
Osteoporosis?**

# PEPITEM in Osteoporosis

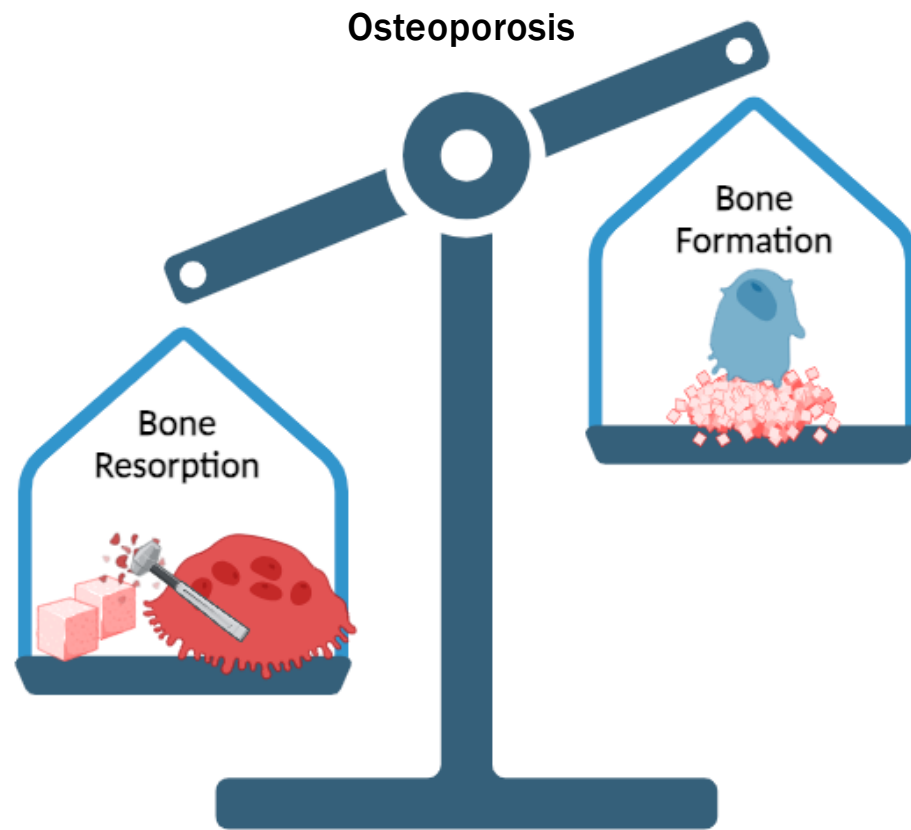
Normal Bone Remodeling



During normal bone remodeling, breaking and building are equal.



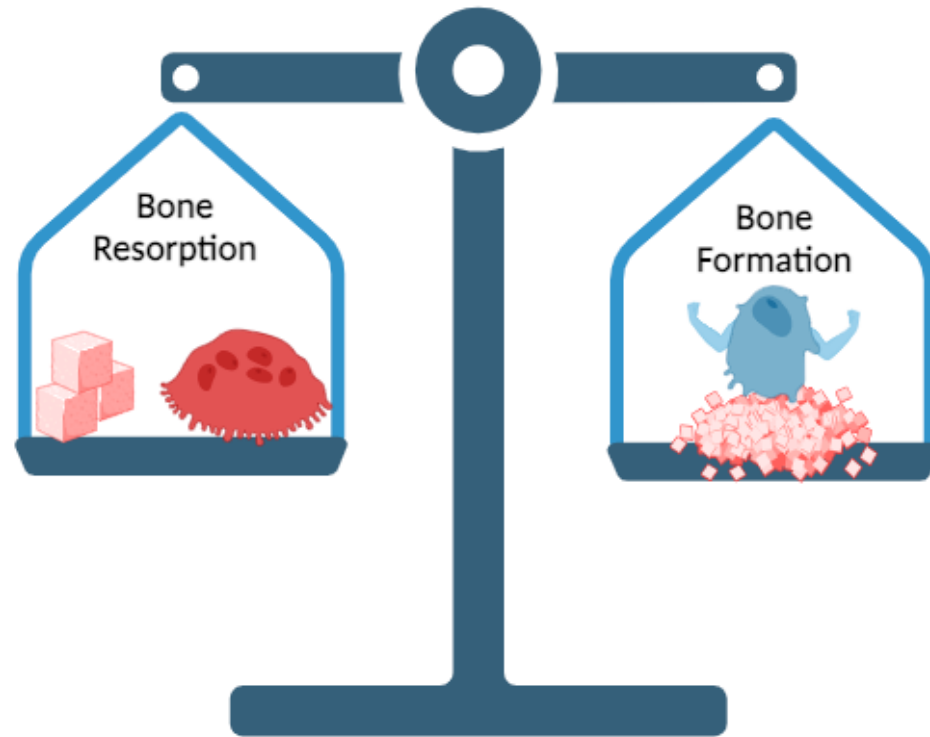
# PEPITEM in Osteoporosis



In osteoporosis this balance is skewed, resulting in increased bone breaking.

# PEPITEM in Osteoporosis

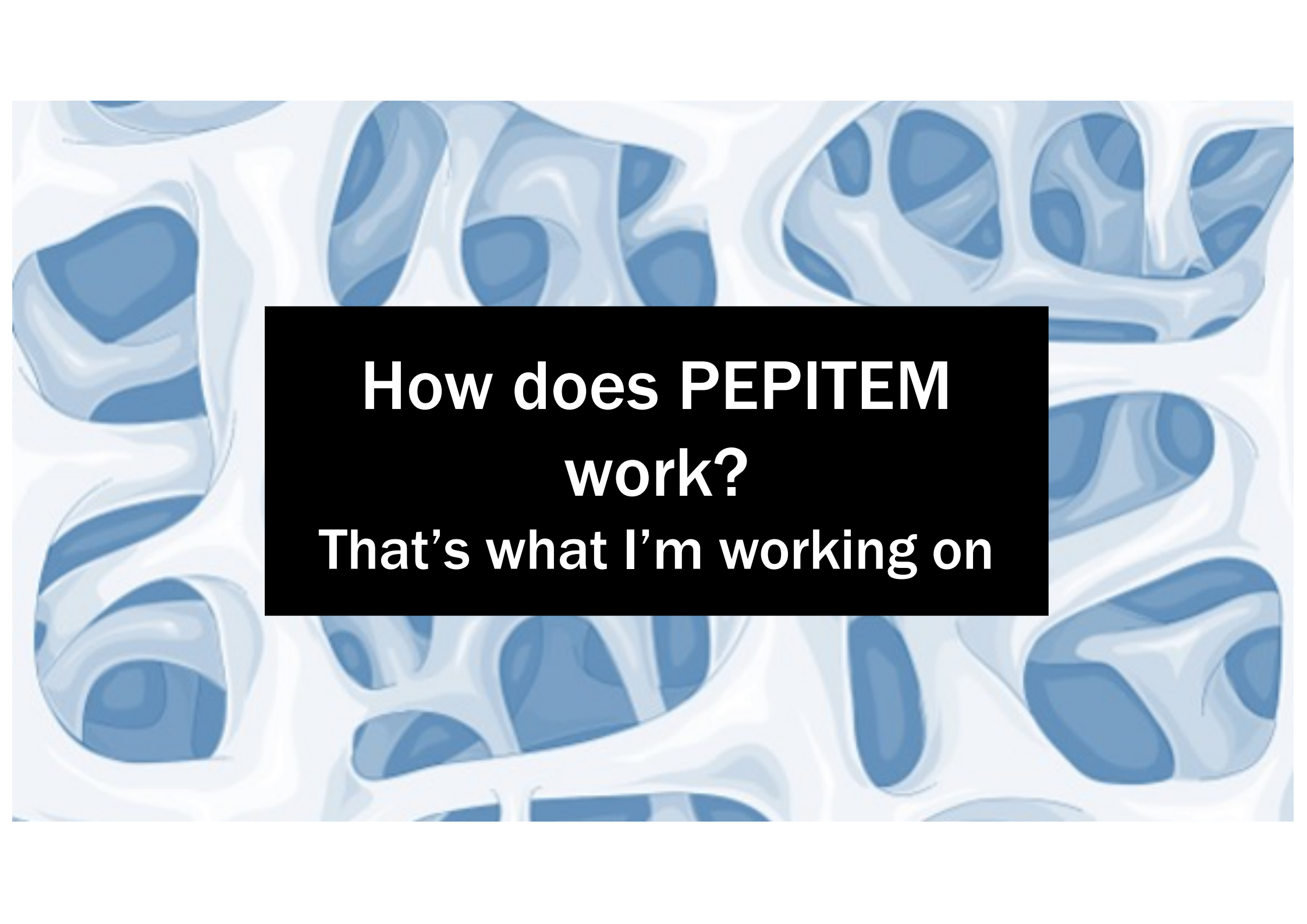
PEPITEM in Osteoporosis



PEPITEM can equalize this though powering osteoblasts and reducing osteoclasts.

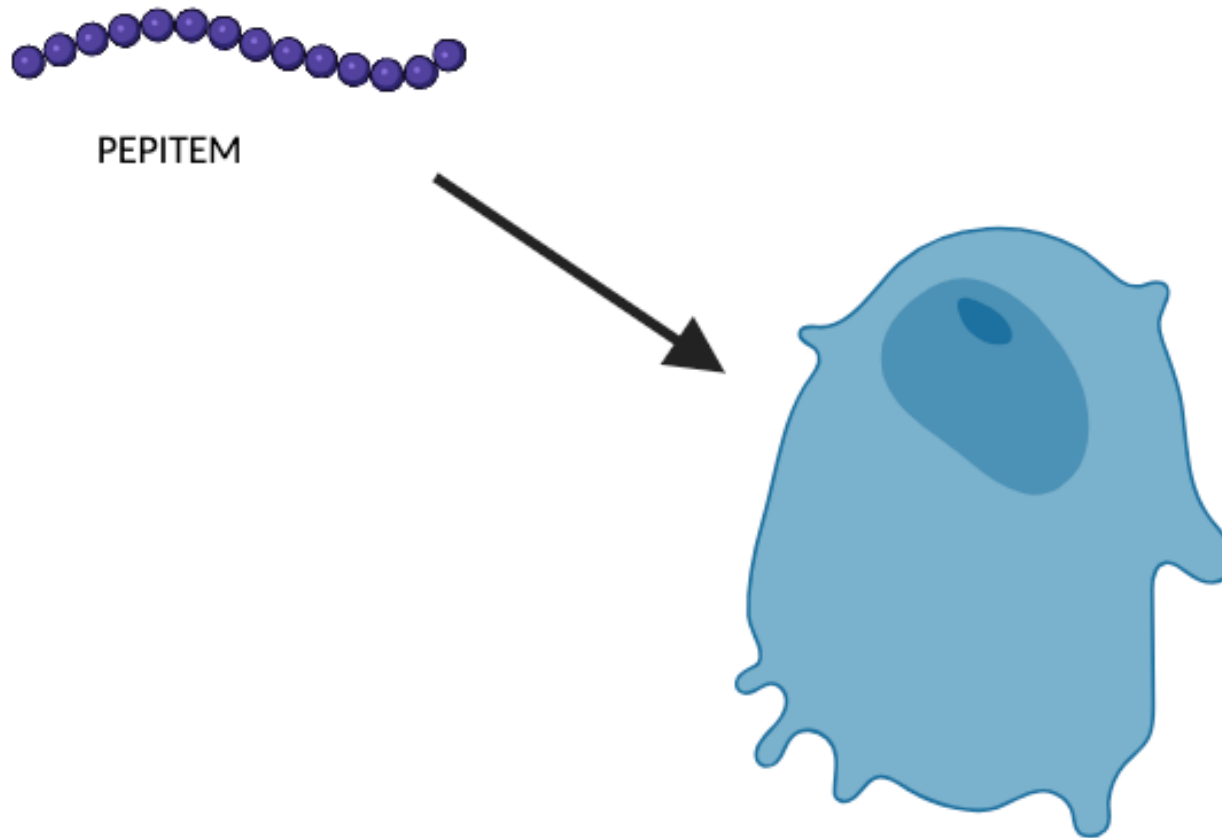


**How does PEPITEM  
work?**



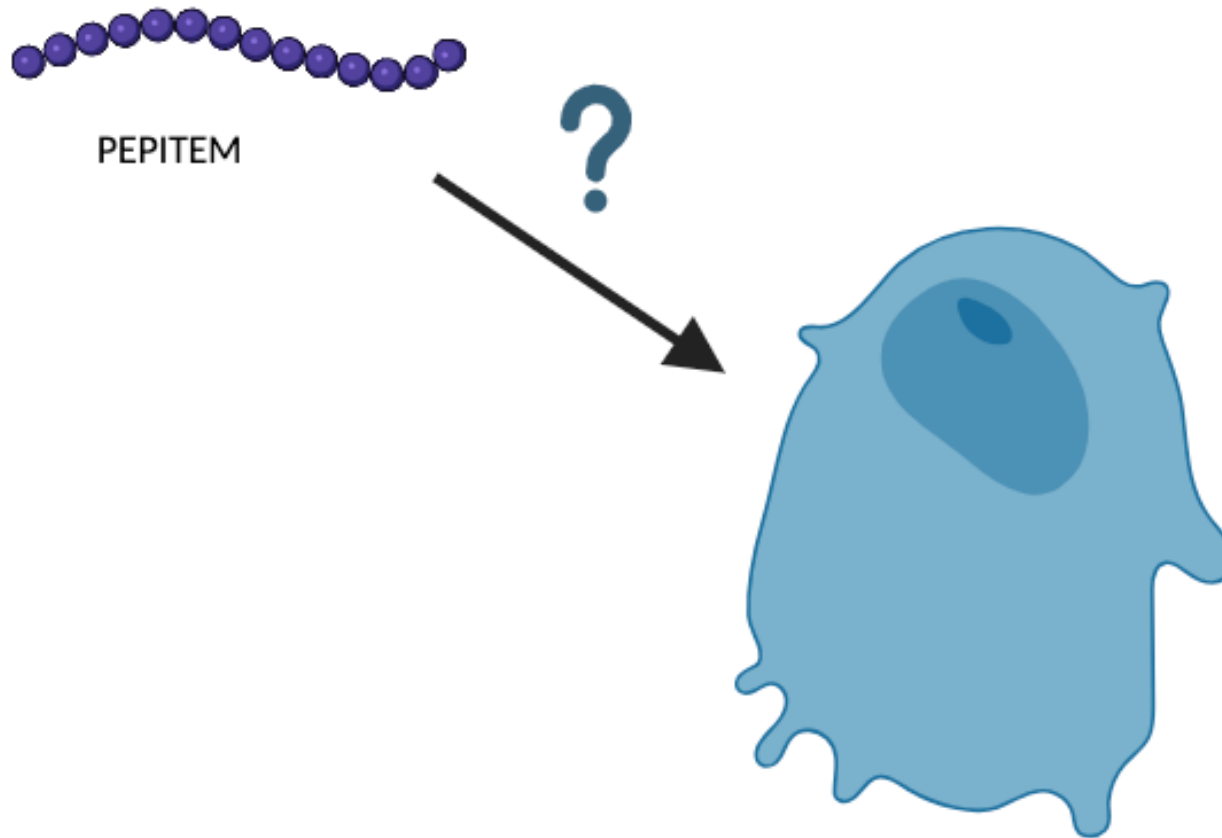
**How does PEPITEM  
work?  
That's what I'm working on**

# Understanding how PEPITEM works can lead to new targets



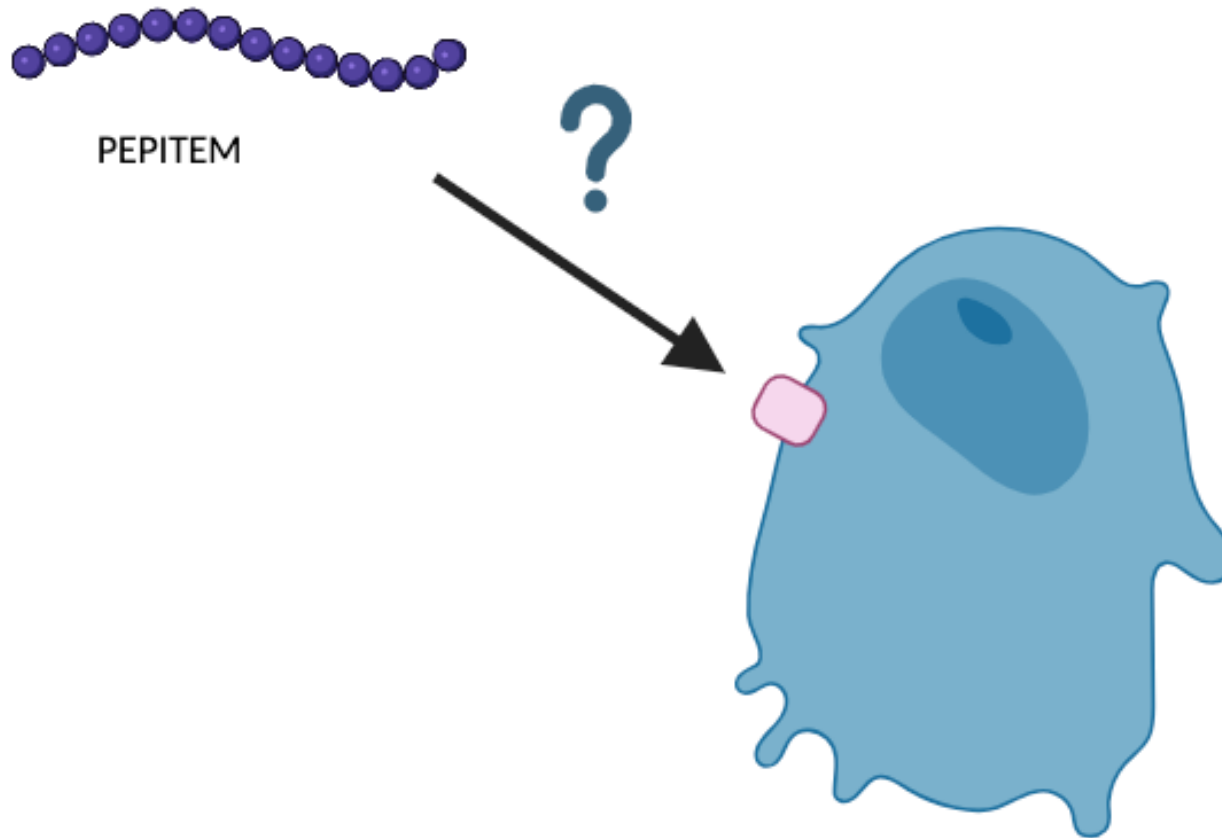
Currently we know PEPITEM acts on osteoblasts, but we are still figuring out how

# Understanding how PEPITEM works can lead to new targets



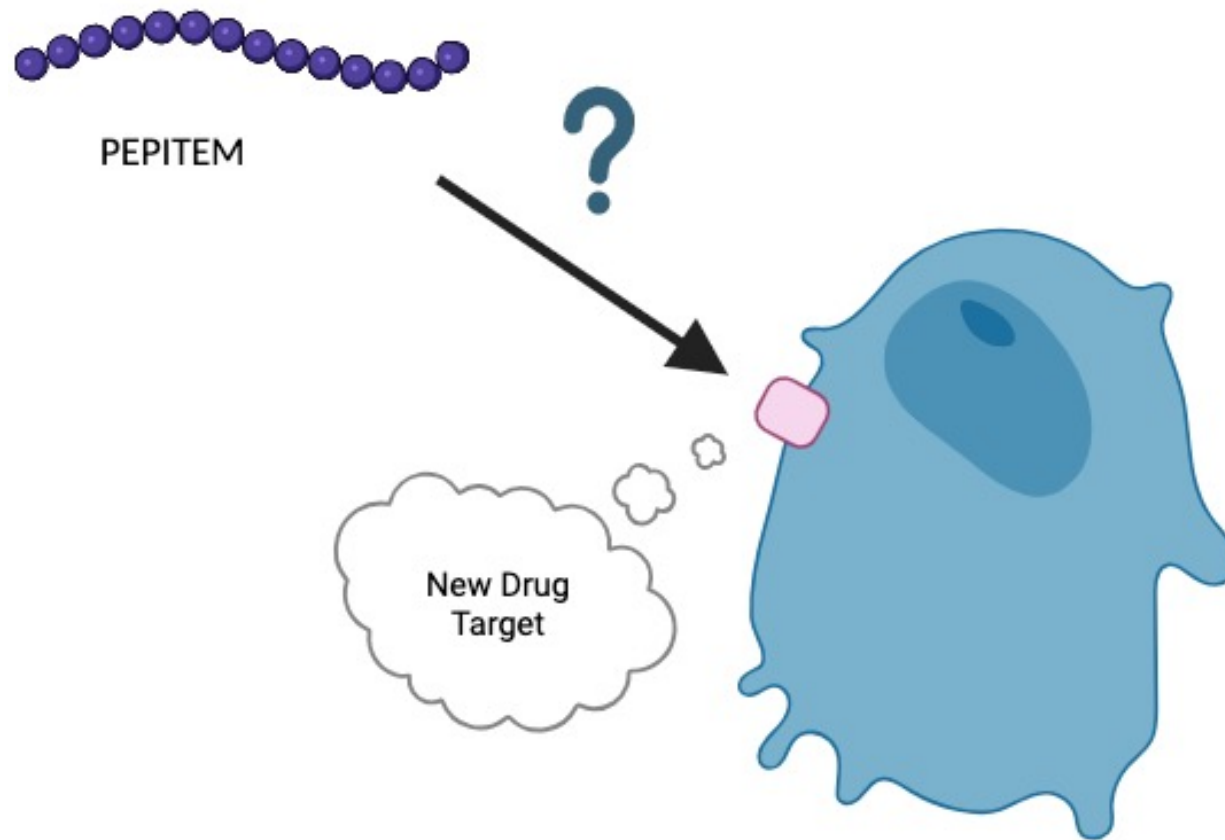
Currently we know PEPITEM acts on osteoblasts, but we are still figuring out how

# Understanding how PEPITEM works can lead to new targets



We are looking at the receptor (on switch) of PEPITEM

# Understanding how PEPITEM works can lead to new targets



Finding out how PEPITEM acts and whether this is altered with age or disease will help identify more medicines.





**Can I buy PEPITEM?**



**Can I buy PEPITEM?**

**I'm afraid not 😞**

# Moving from Bench to Bedside

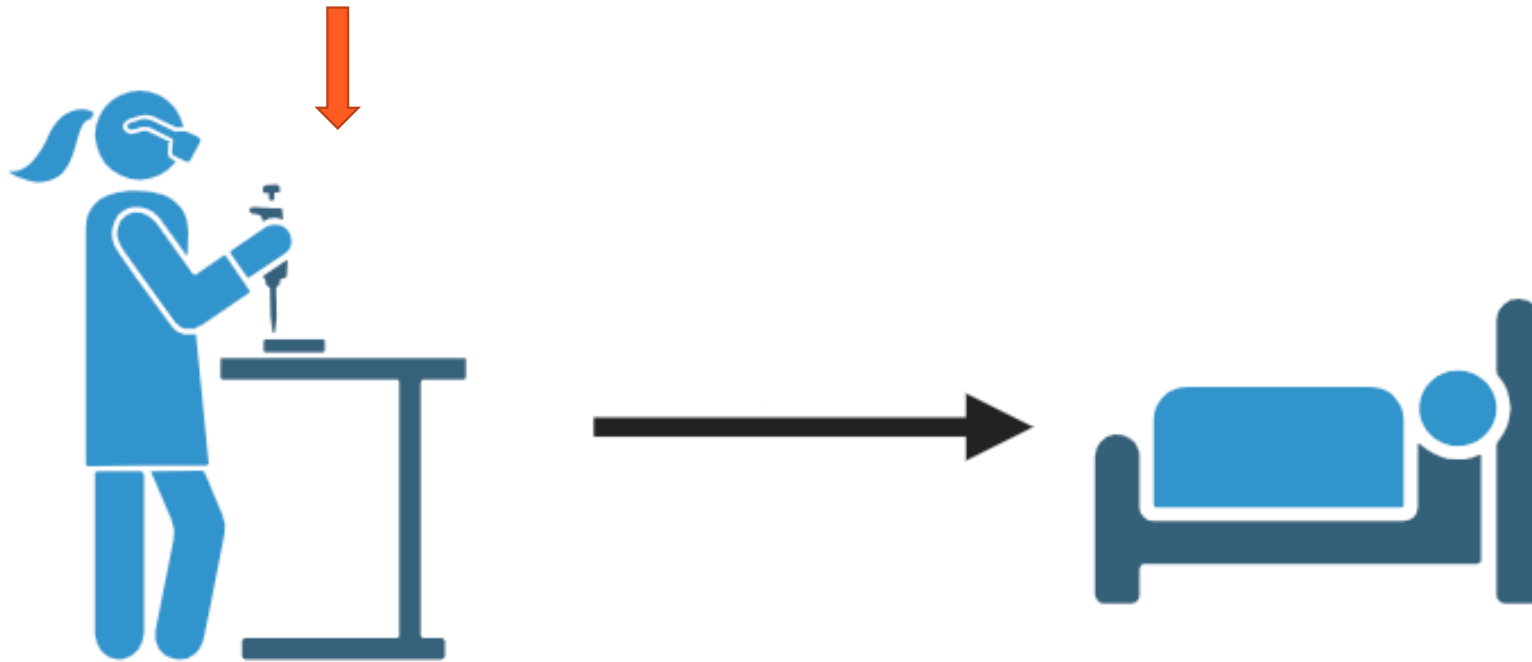
We are here



PEPITEM is still in its infancy and currently only for lab use

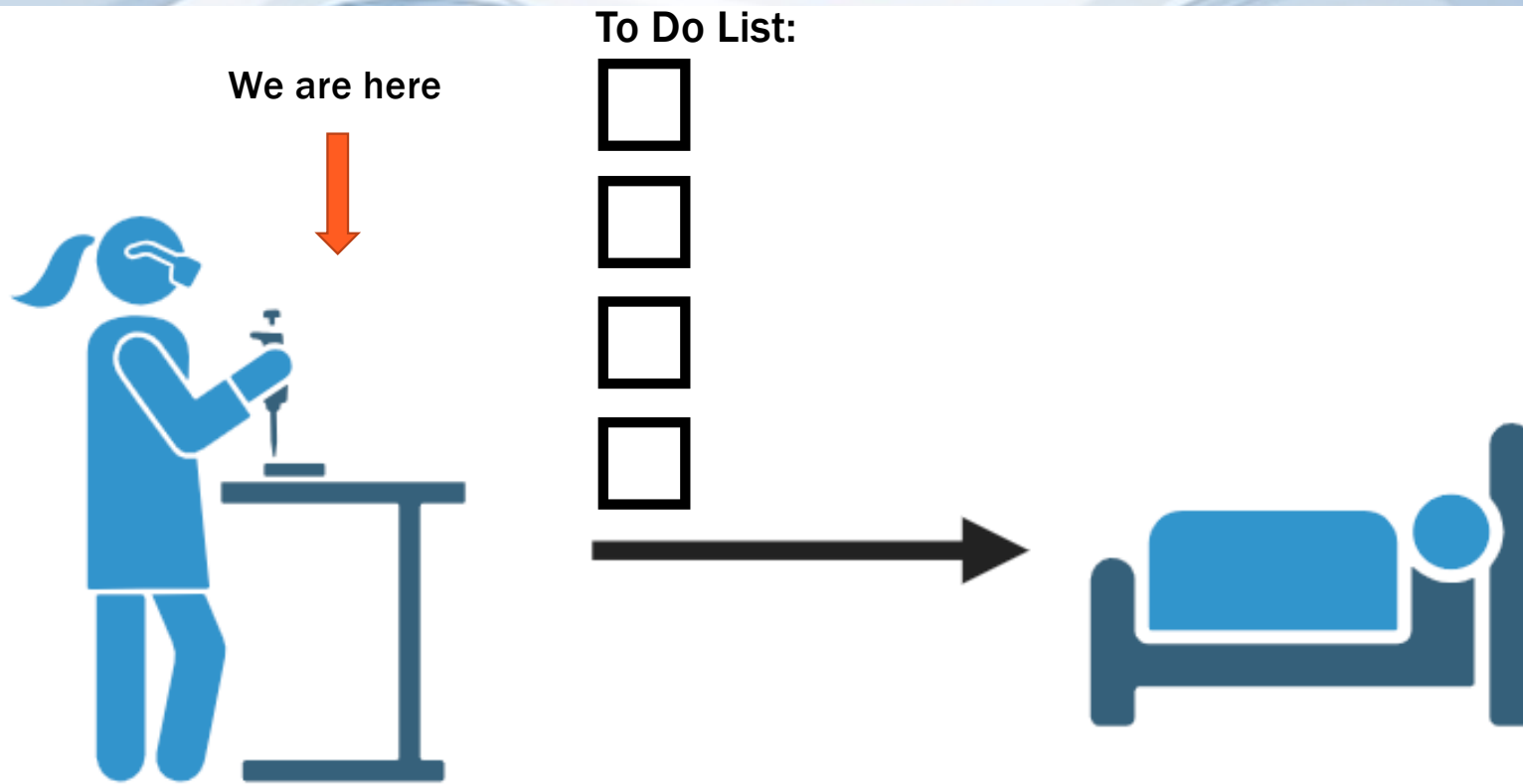
# Moving from Bench to Bedside

We are here



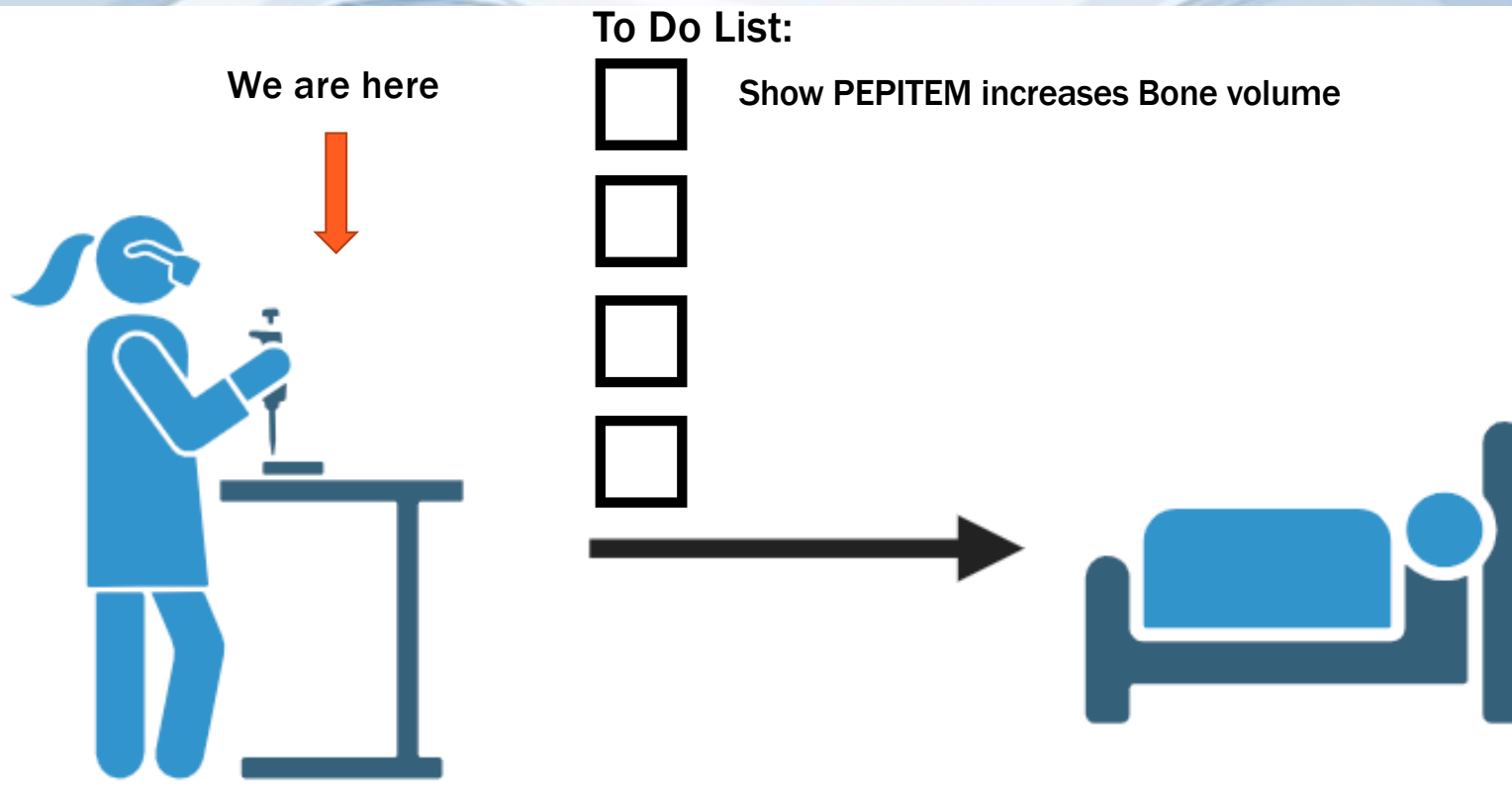
We hope to one day get PEPITEM to clinics

# Moving from Bench to Bedside



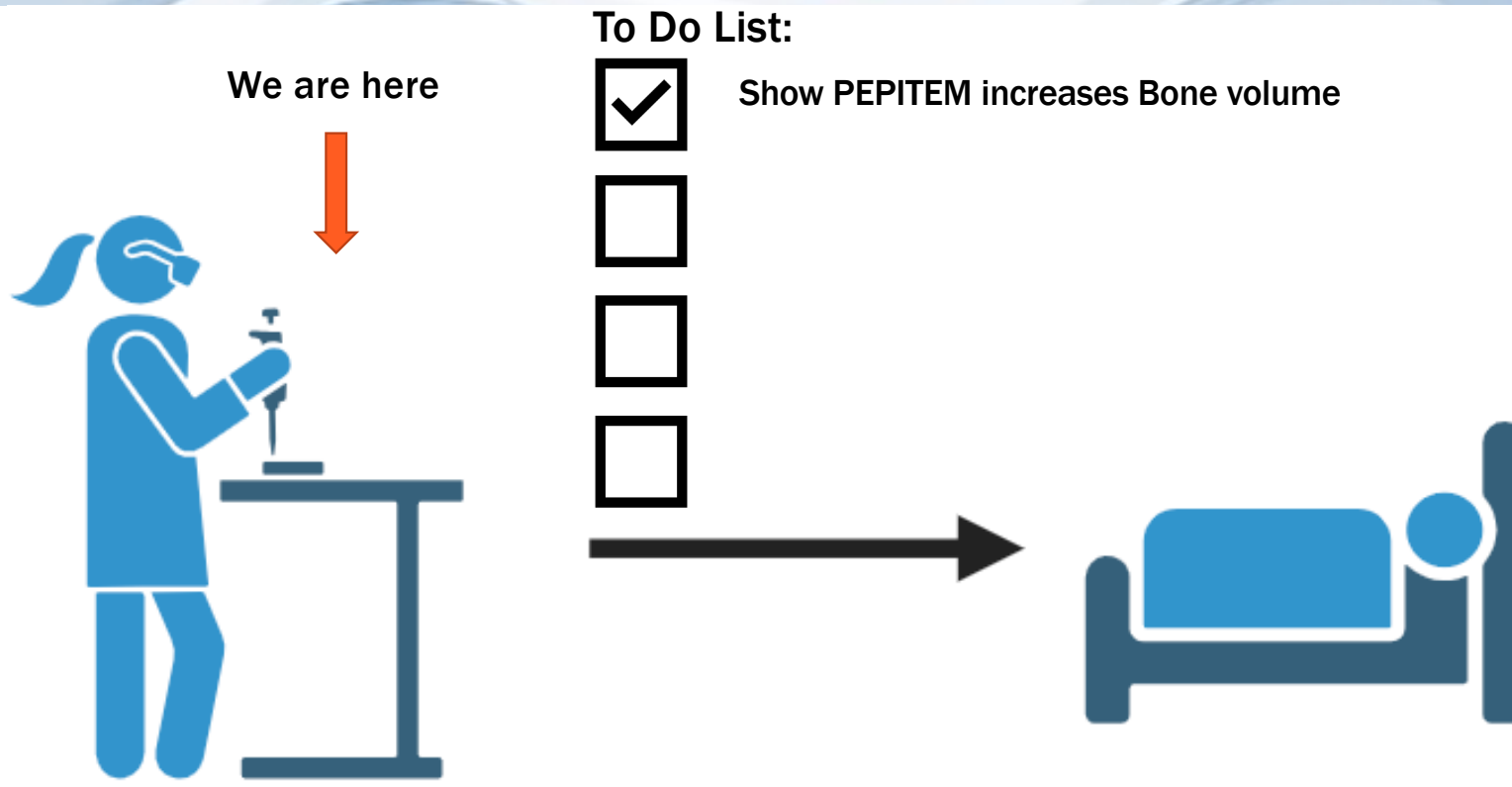
But there is a lot to do first

# Moving from Bench to Bedside



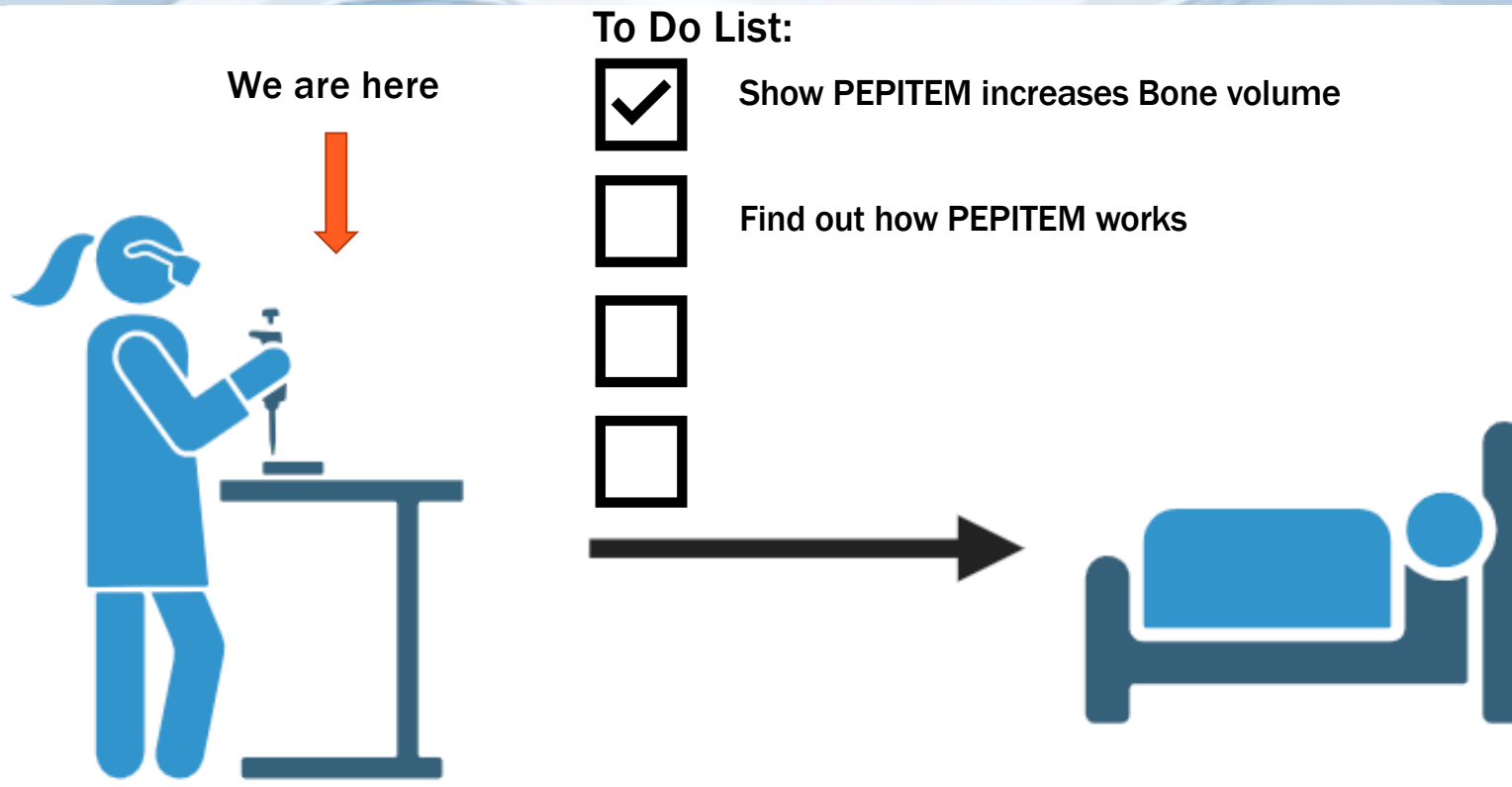
We have shown that PEPITEM increases bone volume

# Moving from Bench to Bedside



We have shown that PEPITEM increases bone volume

# Moving from Bench to Bedside



We are here

To Do List:



Show PEPITEM increases Bone volume



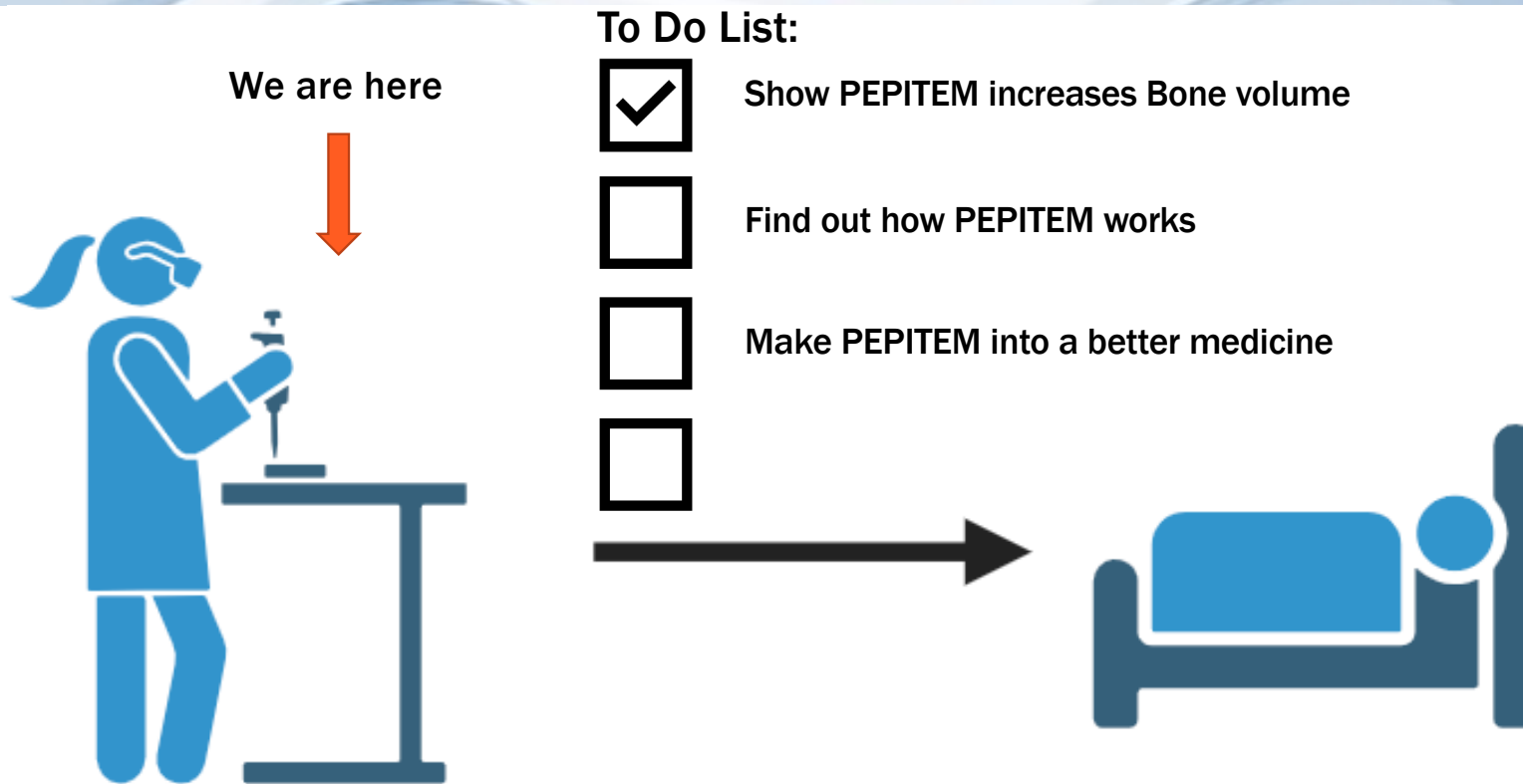
Find out how PEPITEM works



We've started to understand how PEPITEM works

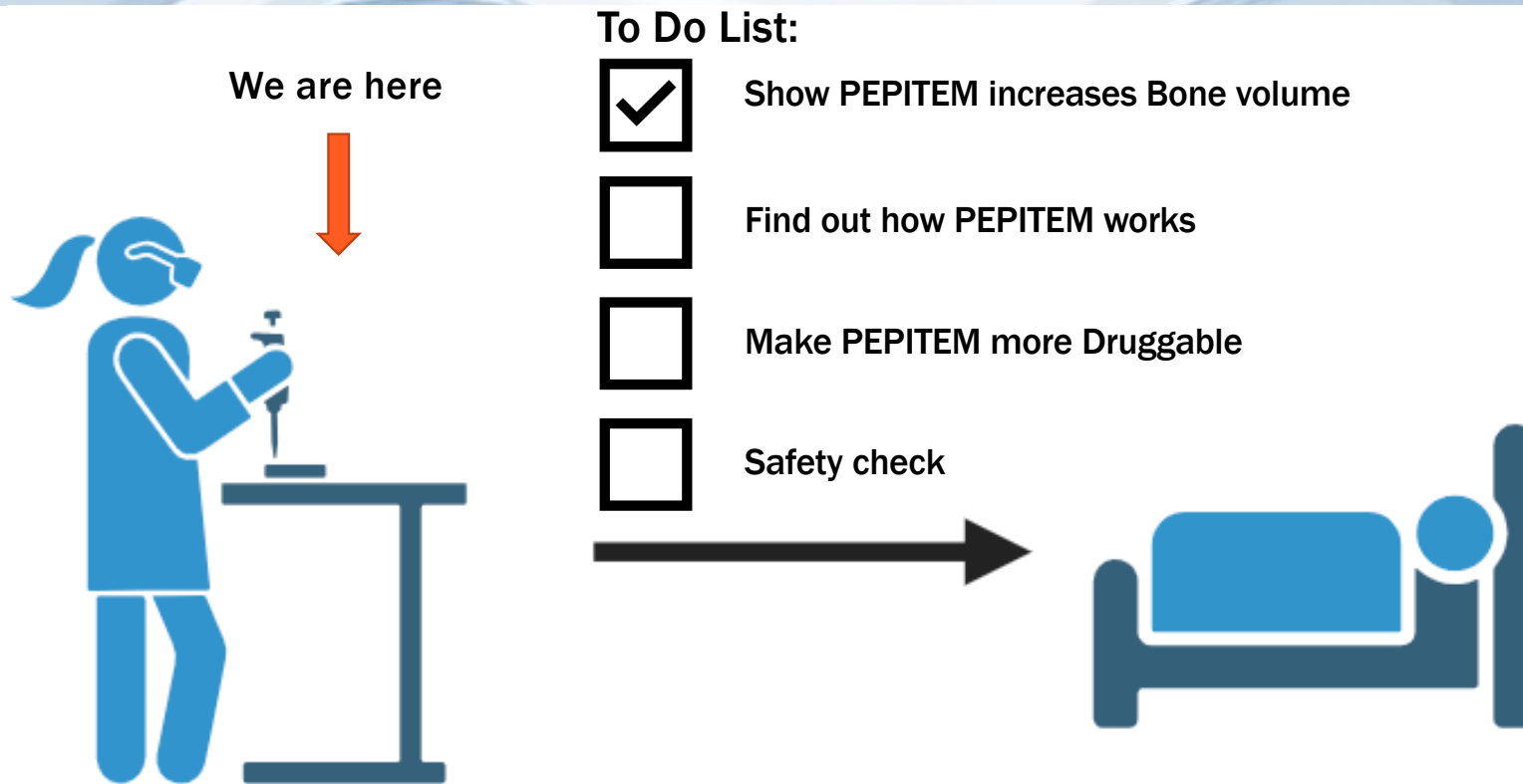


# Moving from Bench to Bedside



Currently PEPITEM is so small it's quickly broken down in the body.  
We need find ways to make it more stable or target the new pathway.

# Moving from Bench to Bedside



We also need to check PEPITEM's safety.  
It is a natural protein but higher concentrations could still be harmful

# Moving from Bench to Bedside

We are here



There is a way to go!



# Moving from Bench to Bedside

We are here



There is a way to go!

**BUT**

It's a start and talking to YOU  
can help us get there





**Thank you for listening!**