**Title:** USP7 Inhibition Promotes Early Osseointegration in Senile Osteoporotic mice

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**Abstract:**

Although elderly osteoporotic patients have similar implant survival rates compared to those of

normal individuals, they require longer healing periods to achieve proper osseointegration. This

may be related to chronic inflammatory responses and impaired stem cell repair functions in the

osteoporotic bone microenvironment. Recently, the deubiquitinating enzyme, USP7, was found

to regulate macrophage immune response and modulate stem cell osteogenic differentiation.

The selective inhibitor of USP7, P5091, has also been found to promote bone repair and

homeostasis in osteoporotic conditions. However, the roles of USP7 and P5091 in

osteoimmunology regulation and dental implant osseointegration under senile osteoporotic

conditions remain unclear. In this study, USP7 depletion and P5091 were shown to inhibit

inflammation in senescent bone marrow derived macrophages (BMDMs) and promote

osteogenic differentiation in aged BMSCs. Furthermore, mRNA-Seq revealed that USP7

depletion could enhance efferocytosis in senescent BMDMs through the EPSIN1/LRP1

pathway and selectively induce apoptosis in aged BMSCs. In senile osteoporotic mice, we

found that the osseointegration period was prolonged compared to young mice, and P5091

promoted the early stage of osseointegration, which may be related to macrophage

efferocytosis around the implant. Collectively, this study suggests that USP7 inhibition may

accelerate the osseointegration process in senile osteoporotic conditions by promoting

macrophage efferocytosis and aged BMSCs apoptosis. This has implications for understanding

the cellular interactions and signaling mechanisms in the peri-implant bone microenvironment

under osteoporotic conditions. It may also provide clinical significance in developing new

therapies to enhance osseointegration quality and shorten the edentulous period in elderly

osteoporotic patients.

**INTRODUCTION**

Senile osteoporosis, an age-related bone metabolic disease, leads to decreased bone quality,

impaired bone healing, alveolar bone loss and tooth loss (Nicopoulou-Karayianni et al. 2009).

The survival rates of dental implants in elder and osteoporotic patients do not differ significantly

from those of normal individuals (Aghaloo et al. 2019; Srinivasan et al. 2017). However,

osteoporotic patients exhibit poorer primary stability and more pronounced marginal bone loss

(Lemos et al. 2023; Merheb et al. 2016). Consequently, osteoporotic patients often require

longer time to achieve proper osseointegration (Tsolaki et al. 2009). Simultaneously,

antiresorptive drugs such as bisphosphonates may increase the risk of medication-related

osteonecrosis of the jaw (MRONJ) which is triggered by implant surgery (Jung et al. 2023;

Sher et al. 2021). Therefore, researching new therapies to enhance osseointegration in senile

osteoporotic patients has considerable clinical significance.

In a tibial implant model of aged mice, studies have found an excessive innate immune response in the peri-implant tissues of aged mice (Turajane et al. 2021). Overactive innate immune response in aged individuals can generate a chronic inflammatory microenvironment, which is called inflammaging (Ferrucci and Fabbri 2018). Inflammaging prolongs the inflammatory phase and impedes osteogenic differentiation of stem cells (Ma et al. 2023). Therefore, the interaction between macrophages and bone mesenchymal stem cells (BMSCs) plays a significant role in the early stage of osseointegration.

Ubiquitin-specific peptidase 7 (USP7) is a member of DUBs, which can cleave the ubiquitin chains from substrate proteins, thereby sparing them from degradation (Komander et al. 2009). Recently, Lin et al. found that P5091, a selective inhibitor targeting USP7, could inhibit osteoclast differentiation to alleviate bone loss in osteoporotic mice (Lin et al. 2023). On the contrary, Xie et al. found that USP7 inhibited osteoclast differentiation by stimulating STING, thereby reducing the level of bone loss in the skull (Xie et al. 2023). Therefore, USP7 may be an important therapeutic target for bone-related diseases. However, no studies have explored the role of USP7 in implant osseointegration.

In this study, we found that USP7 inhibition could selectively eliminated aged BMSCs and enhance the efferocytosis of senescent BMDMs via EPSIN1/LRP1 pathway. Moreover, through systemic injection of P5091, we found that USP7 inhibition could improve early stage of osseointegration in senile osteoporotic mice. Collectively, USP7 inhibition could enhance BMDMs efferocytosis and increase aged BMSCs apoptosis, which efficiently clear apoptotic senescent cell and inhibit macrophage inflammaging to promote early stage of osseointegration.

**Materials and Methods**

Materials and methods were described in the Appendix Materials and Methods**.**

**Results**

**Osseointegration is delayed in aged osteoporotic mice accompanied by elevated USP7 expression**

In the femurs of male mice at 6, 12, and 18 months, MicroCT results showed that the 18-month-old mice exhibited a significant osteoporotic phenotype (Fig. 1A). Compared to the 6-month-old mice, the 18-month-old mice had significantly reduced bone volume and

trabecular bone thickness with increased trabecular bone separation in the cancellous bone

(Fig. 1B). Additionally, the cortical bone thickness and area in the 18-month-old mice were also

significantly decreased (Fig. 1C). Next, we used 6-month-old mice and 18-month-old mice as

the young group and the aged group, and implanted titanium implants anterior to the first

maxillary molar. We reconstructed the implant and the 200μm area surrounding the implant

using MicroCT (Fig. 1D). The bone volume around the implants in aged mice consistently

remained lower than that in young mice. However, both aged and young mice eventually

achieved similar levels of bone-implant contact (BIC), while aged mice took 6 weeks to reach

the BIC level that young mice achieved at 4-week. (Fig. 1E). These results indicated that aged

mice had less bone volume around the implants and a slower rate of osseointegration. The

differences in peri-implant bone volume and osseointegration level were most pronounced at

2-week and 4-week.

Next, we found that compared to aged mice, USP7 expression around the implants was overall

lower in young mice. In aged mice, USP7 expression was significantly higher at 2-week, and

became lower at 4-week (Fig. 1F). Through Western Blot (WB), we observed that USP7

expression was highest around the implants at 2-week in the aged group and significantly

decreased at 4-week (Fig. 1G). This suggested that USP7 might play a significant role in the

early stage of osseointegration in aged mice.

**USP7 is highly expressed in the aged BMSCs and senescent BMDMs**

We further investigated the expression changes of USP7 in BMSCs within aged mice. First, we

found that USP7 and p16INK4a were minimally expressed in young BMSCs, whereas in aged

BMSCs, both USP7 and p16INK4a were highly expressed in the cytoplasm and nucleus (Fig.

1H). WB also revealed that aged BMSCs expressed higher level of USP7 and p16INK4a

significantly (Fig. 1I). This indicated that aged BMSCs exhibited a marked senescence state,

accompanied by high USP7 expression. Next, we used conditioned media (CM) from aged

BMSCs to treat BMDMs. BMDMs treated by CM of aged BMSCs had higher nuclear

expression of p16INK4a, along with elevated USP7 expression (Fig. 1J). Similarly, WB results

also showed that senescent BMDMs had a higher level of USP7 and p16INK4a expression

(Fig. 1K).

**USP7 inhibition ameliorated inflammaging via NLRP3 pathway in senescent BMDMs**

Subsequently, we used CM from aged BMSCs to induce senescent BMDMs and conducted

mRNA-Seq (Fig. 2A). USP7 was depleted by shRNA targeting USP7, which was evaluated by

qPCR and WB (Fig. S1A-B). CCK8 assay showed that the cell viability of senescent BMDMs

was lower than control BMDMs, while USP7 depletion did not alter it (Fig. S1C). KEGG

pathway enrichment analysis revealed that in USP7-depleted senescent BMDMs, the TNF-α,

NFκB, Toll-like signaling pathway, and Nod-like receptor pathways were downregulated (Fig.

2B). GSEA also showed that NLRP3 pathway and innate immune response was significantly

inhibited by USP7 depletion (Fig. 2C). Given previous studies reporting USP7's regulatory role

on the NLRP3 pathway, we focused on the impact of USP7 on this pathway

(Palazón-Riquelme et al. 2018). WB results showed that in senescent BMDMs, the protein

level of p16INK4a was increased, accompanied by elevated levels of cleaved CASP1,

GSDMD-NT, and cleaved IL-1β proteins. USP7 depletion significantly inhibited the expression

of these proteins (Fig. 2D-E). Besides, we used P5091 to inhibit USP7. First, we screened the

treatment concentration of P5091 using a CCK8 assay and found that 5μm of P5091 did not

show significant cytotoxicity to BMDMs (Fig. S2A). Subsequently, we found that USP7

depletion and P5091 both significantly downregulated the mRNA levels and secretion of

inflammatory cytokines such as IL-1β, IL-6, and TNF-α in senescent BMDMs (Fig. S1D-E; Fig.

S2C-D).

**USP7 inhibition enhanced aged BMSCs osteogenesis co-cultured with BMDMs**

Next, we co-cultured USP7-depleted BMDMs with young/aged BMSCs. ALP/ARS staining

indicated that USP7-depleted BMDMs significantly promoted osteogenesis in aged BMSCs

(Fig. 2F). qPCR and WB results also indicated that USP7-depleted BMDMs significantly

upregulated the mRNA and protein levels of osteogenic markers ALP, RUNX2, and COL1α1 in

aged BMSCs (Fig. 2G-I). Regarding the senescence levels of aged BMSCs, SA-β-Gal staining

indicated that USP7-depleted BMDMs significantly inhibited the senescence levels of aged

BMSCs (Fig. 2J). Additionally, qPCR results suggested that USP7-depleted BMDMs inhibited

the mRNA level of senescence-associated secretory phenotype (SASP) markers, *IL-1b* and

*IL-6*, in aged BMSCs (Fig. 2K). Further, we used P5091 to inhibit USP7 in BMSCs co-cultured

with BMDMs. We found that 5μm of P5091 did not show cytotoxicity to BMSCs like that of

BMDMs (Fig. S2B). Therefore, we applied P5091 in the co-culture system. P5091 was found

to improved osteogenesis by ALP/ARS staining (Fig. S2E). However, P5091 significantly

inhibited COL1A1 expression in young BMSCs, while P5091 upregulated ALP, RUNX2, and

COL1α1 in aged BMSCs (Fig. S2F). Regarding mRNA level, P5091 promoted osteogenic

mRNA expression of *Alp, Runx2,* and *Col1a1* (Fig. S2G). The difference of mRNA and protein

level of COL1α1 indicated that USP7 might played a post-transcriptional role in osteogenesis.

Next, SA-β-Gal staining and qPCR also showed that P5091 also decreased the number of

senescent cells and mRNA expression of *IL-1b*/*IL-6* in aged BMSCs co-cultured with BMDMs

(Fig. S2H-I).

**USP7 inhibition promotes osteogenesis and senolysis of aged BMSCs**

Next, we investigated the effects of USP7 depletion and P5091 on BMSCs without BMDMs.

We successfully depleted USP7 expression in BMSCs (Fig. S3A-B). USP7-depleted aged

BMSCs exhibited a trend of suppressed SASP pathways, and promoted osteogenic

differentiation and apoptotic pathways (Fig. 3A-B). Furthermore, CCK8 assay revealed that

USP7 depletion inhibited cell viability of BMSCs significantly, while P5091 inhibited

proliferation of aged BMSCs (Fig. 3C; Fig. S3C). Transwell migration assays further confirmed

that USP7 depletion and P5091 promoted the migration of aged BMSCs (Fig. 3D; Fig. S3D).

Regarding osteogenic capacity, ALP and ARS staining showed that USP7 depletion and

P5091 enhanced osteogenesis of aged BMSCs, but P5091 inhibited osteogenesis of young

BMSCs (Fig. 3E; Fig. S3E). WB indicated that USP7 depletion caused a significant reduction

in the protein levels of ALP and COL1A1 in young BMSCs, while increasing these markers in

aged BMSCs (Fig. 3F). P5091 significantly suppressed the expression of ALP and RUNX2 in

young BMSCs, while substantially increasing the expression of osteogenic proteins in aged

BMSCs (Fig. S3F). Additionally, USP7 depletion and P5091 significantly reduced the number

of SA-β-gal-positive cells in aged BMSCs (Fig. 3G). USP7 depletion and P5091 also inhibited

mRNA level and secretion level of IL-1β and IL-6 in aged BMSCs (Fig. 3H-I; Fig. S3H-I).

Further, live-dead cell staining and flow cytometry revealed that USP7 depletion and P5091

promoted cell death in aged BMSCs without affecting young BMSCs (Fig. 3J-K; Fig. S3J-K)).

## USP7 inhibition orchestrates EPSIN1/LRP1 pathway to enhance efferocytosis

Based on the mRNA-Seq results of USP7-depleted senescent BMDMs, KEGG pathway

enrichment analysis revealed that the phagosome pathway was significantly upregulated in

USP7-depleted senescent BMDMs (Fig. 4A). GSEA suggested that USP7 depletion

upregulated efferocytosis capacity (apoptotic cell clearance) of senescent BMDMs (Fig. 4B).

The heatmap of core genes showed that LRP1 expression was significantly upregulated in

USP7-depleted senescent BMDMs (Fig. 4C). Studies have found that in macrophages,

EPSIN1 could inhibit efferocytosis by promoting the ubiquitination and degradation of LRP1

(Brophy et al. 2019). Through WB, we found that ubiquitination level in senescent BMDMs was

unchanged in different of groups of BMDMs, while EPSIN1 expression was increased and

LRP1 expression was decreased. USP7 depletion downregulated EPSIN1 and upregulated

LRP1 protein levels (Fig. 4D-E). Furthermore, after USP7 depletion, EPSIN1 protein levels

gradually decreased over time, whereas overexpression of USP7 significantly delayed the

degradation of EPSIN1 (Fig. S4A-B). Next, Co-IP experiments further validated the protein

interaction between USP7 and EPSIN1 in BMDMs (Fig. 4F). Recombinant Flag-EPSIN1 and

HA-USP7 proteins also demonstrated a similar interaction (Fig. S4C). By immunoprecipitating

EPSIN1, Flag-EPSIN1, and ubiquitin, we found that USP7 depletion led to an increased

ubiquitination level of EPSIN1 (Fig. 4G). Simultaneously, overexpression of HA-USP7 reduced

the ubiquitination level of EPSIN1 without affecting the overall ubiquitination level (Fig. S4D-E).

This indicated that USP7 depletion might increase the ubiquitination level of EPSIN1, leading

to its degradation, and LRP1 was spared from degradation, thereby promoting macrophage

efferocytosis (Fig. S4F).

Subsequently, we inhibited LRP1-mediated efferocytosis in BMDMs by using the LRP1

inhibitor RAP and si*Lrp1*. RAP inhibited the mRNA levels of efferocytosis-related genes such

as *Cd36, Mertk*, and *Lrp1* (Fig. S5A). We labeled apoptotic Jurkat cells and co-cultured them

with BMDMs to evaluate efferocytosis efficiency. The results revealed that the efferocytosis

ability of senescent BMDMs was significantly reduced, but USP7 depletion restored the

efferocytosis capacity of senescent BMDMs (Fig. 4H-I). Additionally, USP7 depletion also

enhanced the M2 polarization of senescent BMDMs after efferocytosis, while RAP inhibited this

effect (Fig. S5B). qPCR results also showed that USP7 depletion inhibited the expression of

pro-inflammatory genes and promoted the expression of anti-inflammatory genes in senescent

BMDMs (Fig. S5C). Next, we co-cultured aged BMSCs and BMDMs. To avoid the impact of

RAP on LRP1 in BMSCs, we transfected BMDMs with si*Lrp1*. The results showed that

USP7-depleted senescent BMDMs promoted osteogenic differentiation in aged BMSCs, while

depleting LRP1 in BMDMs weakened this pro-osteogenic effect (Fig. S5D).

**USP7 inhibition promoted early stage of osseointegration in aged mice via efferocytosis**

We further investigated the impact of USP7 inhibition on senile osteoporotic osseointegration

in aged mice. P5091 treatment enhanced BIC and bone volume around implants in aged mice

at 2-week and 4-week. The application of RAP attenuated the beneficial effect of P5091 on

osseointegration (Fig. 5A-B). Similarly, HE staining indicated that aged mice treated with

P5091 showed bone structure formation around the implants at 2-week, while Veh group and

P50+RAP group showed no significant bone structure formation (Fig. S6A). Subsequently, we

examined osteogenesis and osteoclastic activity around the implants using ALP and TRAP

staining (Fig. 5C-D). ALP staining exhibited increased ALP expression in the peri-implant

region of aged mice treated with P5091 compared to Veh and P50+RAP group at 2-week (Fig.

5E). Similarly, qPCR results revealed that bone tissue around implants expressed less

osteogenic genes in aged mice compared to young mice, while P5091 upregulated both at

2-week and 4-week in aged mice (Fig. S6B). Regarding osteoclastic activity, TRAP staining

showed that at 2-week, P5091 inhibited the number of osteoclasts around the implants in aged

mice. At 4 weeks post-implantation, the number of osteoclasts around the implants in young

mice were significantly reduced, whereas aged mice still maintained a relatively high level (Fig.

5F). Regarding immune response, pro-inflammatory cytokines, IL-1β and IL-6, were

upregulated in aged mice, and P5091 inhibited these in aged mice at 2-week and 4-week.

However, RAP abrogated the effect of P5091 on inhibiting inflammation (Fig. 5G).

Subsequently, we employed TUNEL and F4/80 immunofluorescence staining to assess

changes in the number of apoptotic cells and the level of efferocytosis around the implants (Fig.

5H). At 2 weeks post-implantation, in young mice, P5091 did not significantly alter the number

of apoptotic cells, macrophage counts, or efferocytosis levels. However, in aged mice, P5091

significantly increased the number of apoptotic cells and macrophages, and promoted

efferocytosis. While the use of RAP did not alter the number of apoptotic cells, it significantly

reduced the number of macrophages and suppressed efferocytosis (Fig. 5I). At 4 weeks

post-implantation, both in young and aged mice, there were relatively fewer apoptotic cells and

macrophages around the implants, and efferocytosis was also not evident (Fig. S7).

**DISCUSSION**

In this study, to exclude the influence of estrogen levels on osteoporosis and related cellular

behaviors, we used male mice aged 6 and 18 months. We found that senile osteoporosis

resulted in significant delays in osseointegration and insufficient peri-implant bone volume. And

during the early stage of osseointegration, there was an abnormally high expression of USP7

around the implants in aged mice. Recent studies observed that diabetic wound tissues

exhibited a higher level of USP7 expression (Li et al. 2022; Zhang et al. 2024). P5091 could

function as senolytic drug to eliminate senescent cells to reduce SASP, thereby mitigating

overactivation of inflammation in diabetic wound. In aged individuals, early-stage

osseointegration is characterized by impaired osteogenic differentiation and enhanced

inflammatory response (Jiang et al. 2018; Turajane et al. 2021). Intrinsic aging of bone stem

cells creates an inflammatory environment, which drives myeloid skewing and inflammation

(Ambrosi et al. 2021). Accordingly, we found that CM from aged BMSCs upregulated

p16INK4a and USP7 expression of BMDMs (defined as senescent BMDMs in this study). This

suggested that USP7 played a crucial role in the early stage of osseointegration in aged mice

and senescent BMSCs-BMDMs interaction. Inhibiting USP7 may help improve the function of

aged BMSCs and senescent BMDMs.

Innate immune pathway and NLRP3 pathway were upregulated in the early stage of

osseointegration (Chen et al. 2022). In this study, USP7 depletion and P5091 inhibited innate

immune response and NLRP3 pathway in senescent BMDMs. Palazon et al. discovered that

USP7 and USP47 directly maintained the NLRP3 pathway by preserving ASC speck formation

(Palazón-Riquelme et al. 2018). Therefore, USP7-depleted BMDMs may exhibit a weaker

inflammatory response when exposed to aging stimuli. Subsequently, we co-cultured BMDMs

with BMSCs, and found that the osteogenic capacity of aged BMSCs co-cultured with

USP7-depleted BMDMs was rescued. Adding P5091 to the co-culture system similarly

promoted osteogenic differentiation of aged BMSCs. Li and colleagues discovered that in the

bone marrow of aged mice, 80% of macrophages exhibit the M1 phenotype (whereas in young

mice, M1 macrophages only make up 5%) (Li et al. 2021). M1 to M2 polarization

induced-immunomodulation is vital for BMSCs osteogenesis and successful osseointegration

(Ma et al. 2018; Wang et al. 2022). As a result, USP7 inhibition might inhibit inflammaging of

senescent BMDMs, thereby improve osteogenesis of aged BMSCs.

Further, we observed that USP7 depletion, inhibited cell viability of BMSCs, which also while

increasing osteogenic capacity in aged BMSCs, led to a reduction of ALP and COL1A1 in

young BMSCs. Similarly, Kim et al. demonstrated that after USP7 depletion, the ubiquitination

levels of NANOG and SOX2 increased, subsequently inhibiting self-renewal capacity and

multipotency of BMSCs (Kim et al. 2022). Consequently, USP7 plays a different role between

young and aged BMSCs. In this study, we discovered that USP7 depletion promoted

apoptosis and osteoblast differentiation in aged BMSCs, while SASP pathway was inhibited.

P5091 were found as a senolytic drug to selectively kill senescent cells (He et al. 2020). Farr et

al. utilized dasatinib and quercetin, a classic senolytic therapy, to eliminate senescent cells in

aged mice and alleviate of osteoporosis (Farr et al. 2017). Baima et al. proposed that

periodontitis, as an age-related disease, might be potentially treatable with senotherapy

targeting MSCs (Baima et al. 2022). Therefore, senolytic therapies in aged BMSCs may also

promote osseointegration in aged individuals.

Phagocytosis of apoptotic cells is a crucial process for macrophages to transition from the M1

phase during the wound inflammation stage to the M2 phase during the wound proliferation

stage, which is also known as efferocytosis (Gerlach et al. 2021). In aging individuals,

macrophages may experience impaired efferocytosis functions because of impaired MerTK

function (Rymut et al. 2020). This may lead to ineffective clearance of apoptotic cells in the

early stage of osseointegration, and macrophages may struggle to transition into the M2

phenotype. In this study, we observed that USP7 depletion improved the impaired

efferocytosis via upregulation of LRP1 in senescent BMDMs. LRP1 is a key receptor involved

in mediating efferocytosis (Doddapattar et al. 2022). LRP1 was found to play a vital role in

bone metabolism (Lu et al. 2018). We validated that USP7 could orchestrate efferocytosis in

senescent BMDMs via EPSIN/LRP1 pathway, and targeting LRP1 could abrogate

pro-osteogenic capacity of senescent BMDMs.

In the *in vivo* experiments, since knockout of USP7 might lead to embryonic lethality, and

tamoxifen required for CreERT2 can affect bone metabolism, we therefore used P5091 to

inhibit USP7 in mice (Chen et al. 2023; Kon et al. 2010). We calculated apoptotic

cell-associated macrophages by labeling apoptotic cells with TUNEL and labeling

macrophages with F4/80 as former studies (Gerlach et al. 2021; Shi et al. 2022). P5091

improved early stage of osseointegration of senile osteoporotic mice via efferocytosis. In periodontitis, promoting macrophage efferocytosis mediated by DEL-1 has been shown to alleviate periodontal inflammation and reduce alveolar bone resorption (Kourtzelis et al. 2019). Simultaneously, we found that P5091 inhibited pro-inflammatory cytokines in peri-implant region which was overactivated in aged mice. Inhibiting efferocytosis via RAP upregulated inflammatory response in aged mice. Therefore, therapies targeting efferocytosis may improve senile osteoporotic osseointegration, which was related to reduced immune response mediated by efferocytosis.

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final approval and agree to be accountable for all aspects of the work.

**Declaration of Conflicting Interests**

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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**Data and materials availability**

All data are available in the main text or the supplementary materials upon reasonable requests

**Fig. 1 Senile osteoporotic mice exhibited a delayed osseointegration and higher expression of USP7.**

Different age of male mice (6-month, 12-month and 18-month) were employed. (A) Three-dimensional reconstruction image of cancellous and cortical bone in femurs at the position 700$\mu$m below the growth plate, scale bar, 500$\mu$m. (B) Quantitative MicroCT analysis of cancellous bone, n = 5. (C) Quantitative MicroCT analysis of cortical bone, n = 5. (D) Three-dimensional reconstruction image of alveolar bone around implants after 2 weeks and 4 weeks, scale bar, 600$\mu$m. (E) Quantitative MicroCT analysis of the 200$\mu$m region around the implants. (F) Immunohistochemical staining of USP7 around the implant, scale bar, 100$\mu$m. (G) Western blot analysis and quantification of USP7 expression in the bone tissue around implants, n = 3. (H) Immunofluorescence staining of USP7, p16INK4a, and DAPI in young and aged BMSCs. (I) Western blot analysis and quantification of USP7 and p16INK4a expression in the BMSCs, n = 3. (I) Immunofluorescence staining of USP7, p16INK4a, and DAPI in control and senescent BMDMs. (J) (K) Western blot analysis and quantification of USP7 and p16INK4a expression in the BMDMs, n = 3. BV/TV, bone volume per tissue volume; Tb.N, trabecular number; Tb.Th, trabecular thickness; Tb.Sp, trabecular separation; Ct.Th, cortical bone thickness; Ct.Ar, cortical bone area; BIC, bone-implant intact; Young, young BMSCs; Aged, aged BMSCs; CON, control BMDMs; SEN, senescent BMDMs . Data are shown as the mean ± SD; ns, not significant, *$P$ < 0.05, **$P$ < 0.01, ***$P$ < 0.001, ****$P$ < 0.0001.

**Fig. 2 USP7 depletion inhibited inflammaging in senescent BMDMs and promoted osteogenesis of aged BMSCs co-cultured with BMDMs**

(A) schematic diagram showing the induction of senescent BMDMs and mRNA-Seq analysis.
(B) KEGG pathway enrichment analysis of senescent and USP7-depleted senescent BMDMs.
(C) GSEA showing decreased enrichment of innate immune response pathway-associated

genes and Nod-like receptor (NLR) signaling pathway-associated genes in USP7-depleted senescent BMDMs. (D) Western blot analysis and (E) quantification of p16INK4a, cleaved caspase-1, GSDMD-NT, and cleaved IL-1β in different groups of BMDMs, n = 3. (F) Representative images of ALP and ARS staining in young/aged BMSCs co-cultured with different groups of BMDMs for 7d and 14d. (G) qPCR analyses of the mRNA levels of *Alp*, *Runx2*, *Col1a1* in young/aged BMSCs co-cultured with BMDMs for 7d, n = 3. (H) Western blot analysis and (I) quantification of ALP, RUNX2, and COL1α1 in young/aged BMSCs co-cultured with different groups of BMDMs for 7d, n = 3. (J) Representative images of SA-β-gal staining of young/aged BMSCs co-cultured with different groups of BMDMs for 3d, scale bar, 50μm. (K) qPCR results of *IL-1b* and *IL-6* in young/aged BMSCs co-cultured with different groups of BMDMs for 3d, n = 3. Y-BMSCs, young BMSCs; A-BMSCs, aged BMSCs; shNC, BMDMs transfected with NC lentivirus; sh*Usp7*, BMDMs transfected with sh*Usp7* lentivirus; CON, control BMDMs; SEN, senescent BMDMs; Upper, upper well of transwell system; Lower, lower well of transwell system. Data are shown as the mean ± SD; ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$, ****$P < 0.0001$.

**Fig. 3 USP7 depletion promoted osteogenesis and senolysis in aged BMSCs**

(A) schematic diagram showing mRNA-Seq analysis of young and aged BMSCs treated with shNC or sh*Usp7*. (B) GSEA showing decreased enrichment of SASP pathway-associated genes and elevated enrichment of osteoblast differentiation and apoptosis pathway-associated genes in USP7-depleted aged BMSCs. (C) CCK8 assay for determining cell viability of young/aged BMSCs transfected with shNC or sh*Usp7* lentivirus at 3d, n=5. (D) Representative images and quantitative analysis of migration capacity of young/aged BMSCs for 24 h, n = 3, scale bar, 50μm. (E) Representative images of ALP and ARS staining in different groups of BMSCs after initiating osteogenic induction for 7 and 14 d. (F) Western blot and quantification of ALP, RUNX2, and COL1α1 in different group of BMSCs after initiating osteogenic induction for 7 d, n = 3. (G) Representative images of SA-β-gal staining of different BMSCs, scale bar, 50μm. (H) qPCR results and (I) ELISA results of IL-1β and IL-6 in different groups of BMSCs, n = 3. (J) Representative images of live/dead staining of BMSCs after transfected with shNC or shUsp7 lentivirus for 3d, green color indicates live cells, red color indicates dead cells, scale bar, 150μm. (K) Flow cytometry and quantification for apoptosis in BMSCs after transfected with shNC or shUsp7 lentivirus for 3d. shNC, BMSCs transfected with shNC lentivirus; sh*Usp7*, BMSCs transfected with sh*Usp7* lentivirus. Data are shown as the mean ± SD; ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$, ****$P < 0.0001$.

**Fig. 4 USP7 depletion promoted efferocytosis capacity in senescent BMDMs via EPSIN1/LRP1 pathway**

(A) KEGG pathway enrichment analysis indicated an upregulated phagosome pathway in USP7-depleted senescent BMDMs. (B) GSEA showing elevated enrichment of apoptotic cell clearance pathway-associated genes. (C) Heatmap of representative apoptotic cell clearance-related genes in senescence and USP7-depleted senescent BMDMs. (D) Western blot and (E) quantification of ubiquitin, USP7, EPSIN1, and LRP1 in different group of BMDMs, n = 3.   (F) Co-IP detecting the interaction between USP7 and EPSIN1. (G) Co-IP detecting the ubiquitous level of EPSIN1 in BMDMs transfected with shNC or sh*Usp7*. (H) Representative images and quantification of efferocytosis ratio of control/senescent BMDMs co-cultured with calcein-labeled apoptotic Jurkat cells for 24 h, n = 3, scale bar, 150μm. (I) Flow cytometry analysis for evaluating efferocytosis capacity of control/senescent BMDMs co-cultured with DiIC18(5)-DS-labeled apoptotic Jurkat cells for 24 h. DiIC18(5)-DS-positive and F4/80-postive cells indicated apoptotic cell-associated macrophages, n = 3. shNC, BMDMs transfected with NC lentivirus; sh*Usp7*, BMDMs transfected with sh*Usp7* lentivirus; CON, control BMDMs; SEN, senescent BMDMs; HC, heavy chain of IgG. Data are shown as the mean ± SD; ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$, ****$P < 0.0001$.

**Fig. 5 P5091 improved early stage of osseointegration in senile osteoporotic mice via efferocytosis**

(A) Representative three-dimensional reconstruction images of alveolar bone around implants, scale bar. 600μm. (B) Quantitative MicroCT analysis of the 200μm region around the implants, n = 6. (C) Immunohistochemical staining of ALP around the implant, scale bar, 100μm. (D) TRAP staining around the implant, scale bar, 100μm. (E) Quantification of ALP-positive area in bone tissue around implants, n = 5. (F)   Quantification of TRAP-positive osteoclasts in bone tissue around implants, n = 5. (G) qPCR results of *IL-1b* and *IL-6* expression in the bone tissue around implants, n = 4. (H) Representative immunofluorescence images of macrophages and apoptotic cells around the implants, and white arrows indicated the apoptotic cells engulfed by macrophages, scale bar, 100μm. (I) Quantification of apoptotic cell number, F4/80-positive macrophage number and efferocytosis efficiency (efferocytotic macrophages were determined as apoptotic cell-associated macrophages), n = 5. Veh, mice treated with vehicle (DMSO); P5091, mice treated with P5091; P50+RAP, mice treated with P5091 and RAP; Y, young mice; A, aged mice. Data are shown as the mean ± SD; ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$, ****$P < 0.0001$.

**Supplementary File**

**Title:** USP7 Inhibition Promotes Early Osseointegration in Senile Osteoporotic mice

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**Appendix Materials and Methods**

**In vitro experiments**

**Cell culture and co-culture of BMSCs-BMDMs**

Young and aged BMSCs were extracted from 6-month and 18-month mice, which were

cultured in the growth medium consisting of DMEM (Gibco), supplemented with 10% FBS

(Gibco), and 1% penicillin and streptomycin. BMDMs were extracted from 6-month mice, and

plated in pre-cooled prepared bone marrow macrophage differentiation medium containing

DMEM (Gibco), 10% FBS (Gibco), 1% penicillin/streptomycin, and 20 ng/mL monocyte-colony

stimulating factor (M-CSF, PeproTech). When inducing senescent BMDMs, conditional media

(CM) from aged BMSCs was used to culture BMDMs. CM from aged BMSCs was mixed with

macrophage differentiation medium in a 1:3 ratio. To inhibit USP7 and LRP1 in cells, P5091

(MCE) was dissolved in DMSO and applied in BMSCs and BMDMs at the concentration of

5μM, while receptor-associated protein (RAP, Abcam) was dissolved in PBS and applied in

BMDMs at the concentration of 150nM.

As for the co-culture of BMSCs-BMDMs, in the indirect co-culture system, 0.4 μm 24-well

Transwell inserts were utilized to co-culture BMSCs and BMDMs. For the direct co-culture

system, a 24-well plate was used to co-culture BMSCs and BMDMs. A total of 60,000 BMSCs

and 60,000 BMDMs were simultaneously seeded into the 24-well plate, and 500 μL of growth

medium containing 20 ng/mL M-CSF was added.

**Transfection of BMSCs and BMDMs**

BMDMs and BMSCs were transfected with a lentiviral psi-LVRU6P vector expressing Usp7

shRNA or control shNC (shNegativeControl, GeneCopoeia). When BMSCs or BMDMs

reached approximately 70-90% confluence, they were subjected to transfection at multiplicity

of infection (MOI) of 50 with polybrene (5 mg/mL, Sigma). The transfection process took place

at 37°C in a 5% CO2 environment for 24 hours. Subsequently, the supernatant was removed,

and normal growth medium was added. After 2 days, puromycin (Sigma) was used to select

shRNA-induced cells. As for siRNA transfection, si*Lrp1* (GeneCopoeia) was transfected to

BMDMs with application of EndoFectin Max (GeneCopoeia). After 18h, BMDMs were rinsed

by PBS and cultured with complete medium for 48h. Then BMDMs transfected with si*Lrp1*

were used for subsequent experiments.

**mRNA-seq**

The transcriptome sequencing and subsequent analysis were conducted by OE Biotech Co.,

Ltd. (Shanghai, China). Briefly, total RNAs were extracted utilizing the TRizol reagent

(Invitrogen). The purity and concentration of the RNA were determined with a NanoDrop 2000

spectrophotometer (Thermo Scientific). Subsequently, libraries were prepared in accordance

with the manufacturer's protocol using the VAHTS Universal V6 RNA-seq Library Prep Kit. The

libraries were subjected to sequencing on an Illumina Novaseq 6000 platform, yielding 150 bp

paired-end reads. Quality control of the mRNA-seq data was carried out using FastQC

(v0.11.5) and the FASTX toolkit (0.0.13). Alignment to the Mus musculus reference genomes

was performed using HISAT2 (v.2.0.4). Differentially expressed genes between shUsp7 and

shNC groups were identified using the DEseq2 package (version 1.34.0) if they met the criteria

of Q value < 0.05 and a fold change greater than 2 or less than 0.5.

**Cell proliferation assay**

The cell proliferation of BMSCs and BMDMs was evaluated using Cell Counting Kit-8 (CCK-8,

Beyotime) assay. A mixture containing 100 μL of 10% CCK-8 assay reagent was added to

each well. Following incubation in the absence of light for 1.5 hours, the optical density (OD)

was determined at 450 nm using a Varioskan Flash microplate reader (Thermo Scientific).

**Migration assay**

BMSCs were initially plated at a density of $2 \times 10^4$ cells per well in 24-transwell plates

(Corning). Following a 24-hour incubation period, BMSCs present in the transwell chambers

were fixed for 30 minutes by 4% paraformaldehyde (Biosharp), stained with 0.1% w/v crystal

violet (Beyotime) for an additional 45 minutes, and subsequently visualized using an inverted

microscope (Leica).

**RNA extraction and quantificational real-time PCR (qRT-PCR)**

Total RNA was extracted from the alveolar bone tissue around implants and treated

BMSCs/BMDMs following the manufacturer's guidelines, employing a total RNA isolation kit

from Vazyme. Bone tissue around implants was first separated from maxilla and immersed in

liquid nitrogen, which were were ground into a paste using a mortar and pestle. Subsequently,

RNA samples underwent reverse transcription into cDNA utilizing the HiScript® III All-in-one

RT SuperMix, ideally suited for qPCR (Vazyme). Quantitative real-time polymerase chain

reaction (qRT-PCR) was carried out using Taq Pro Universal SYBR qPCR Master Mix

(Vazyme). A list of the primers employed is provided in Supplementary Table 1. The relative

gene expression levels were determined using the $2^{-\triangle\triangle CT}$ method, normalizing to β-actin as

the internal reference gene.

**Western blot**

The cell protein of treated BMDMs and BMSCs was extracted using RIPA buffer (Pierce) while

maintained on ice. As for alveolar bone tissue around implants, the alveolar bone around the

implant was first separated and then immersed in liquid nitrogen. The bone was then placed

into a centrifuge tube containing grinding beads and ground to obtain a protein lysate.

Following this, the samples were denatured at 95 ℃ for 10 minutes in SDS loading buffer and

subsequently separated on 10% SDS–polyacrylamide gels (Beyotime). The separated

proteins were then transferred onto polyvinylidene difluoride (PVDF, Millipore) membranes

activated with methanol. After 5% BSA was applied to the membranes and allowed to incubate

for 2 hours, the membranes were exposed to primary antibodies (listed in Supplementary

Table 2) overnight at 4 ℃. The following day, the membranes were subjected to incubation

with corresponding horseradish peroxidase (HRP)-conjugated secondary antibodies, followed

by an additional incubation for 1–2 hours at 37 ℃. The detection of antibody-antigen

complexes was achieved using gel imaging systems (Bio-Rad). The quantification of band

densities was performed using ImageJ (National Institutes of Health) and subsequently

normalized to the control.

**Osteogenic induction of BMSCs and ALP/ARS staining**

When BMSCs reached 70% confluency, culture medium was replaced with mineralization

medium [growth medium supplemented with ascorbic acid (50μg/mL), b-glycerophosphate

disodium (10 mM), and dexamethasone (100nM)].

As for ALP staining, after 7 days of osteogenic induction, cells were first fixed by 4%

paraformaldehyde (Biosharp) for 15 min, and then stained with a BCIP/NBT Alkaline

Phosphatase Color Development Kit (Beyotime) for 24 h.

As for ARS staining, after 14 days of osteogenic induction, cells were first fixed by 4%

paraformaldehyde (Biosharp) for 15 min, and then stained with Alizarin Red S solution (pH 4.2,

Sigma) for 5 min.

**Senescence-associated β-galactose staining**

Cellular senescence was evaluated using senescence-associated β-galactosidase (SA-β-gal)

staining kits (Beyotime). BMSCs were rinsed twice with PBS and subsequently fixed with a

fixative solution for SA-β-gal staining for 15 minutes at room temperature. Then cells were

washed three times with PBS and then incubated with the SA-β-gal staining solution at 37 °C

for 24 h. The following day, cells were examined under an optical microscope.

**Enzyme-Linked immunosorbent assays (ELISA)**

The cell culture supernatant of BMDMs and BMSCs was harvested following the provided

guidelines. The levels of IL-1β, TNF-α, and IL-6 in the supernatant were quantified utilizing

ELISA kits (Elabscience).

**Flow cytometry**

To detect apoptosis level, BMSCs treated with P5091 for 3 days and *shUsp7* were prepared in

staining buffer and stained with 1 µL FITC Annexin V and PI (APEBIO) for 30 minutes. After

incubation, the cells were washed by PBS for 3 times. After the last wash and centrifugation,

the cells were once again resuspended in staining buffer for analysis using Attune Nxt Flow

Cytometer (Thermo Scientific).

As for efferocytosis and efferocytosis-induced M2 polarization, Jurkat cells (SCC-121815,

Solarbio) were first labeled by DiIC18(5)-DS (MCE), then exposed to UV light (150 mJ/cm2) for

15 minutes with an open lid. Then apoptotic Jurkat cell were incubated with BMDMs for 24 h.

After that, BMDMs were suspended in the staining buffer (BD Biosciences). To prevent

nonspecific binding, BMDMs were pre-incubated with FC block (BD Biosciences, 1:200) for 20

minutes. They were then incubated with either of the following antibodies on ice for 30 minutes:

PE Rat Anti-Mouse F4/80 (BD Biosciences, 1:100) Alexa Fluor® 647 Rat Anti-Mouse CD206

(BD Biosciences, 1:50). After incubation, the cells underwent three washes with staining buffer

and were subsequently resuspended in staining buffer. After the last wash and centrifugation,

the cells were once again resuspended in staining buffer for analysis using Attune Nxt Flow

Cytometer (Thermo Scientific). FACS data analysis was conducted using FLOWJO™

Software.

**Live/dead staining**

Calcein-AM (Beyotime) and 7-Aminoactinomycin D (7-AAD, Beyotime) were employed for

concurrent fluorescence assessment. First, Calcein-AM (5 µM) was added into the culture

medium for 30 min. Then, after cells were washed by PBS for 3 times, 7-AAD (5 µM) were

added into the culture medium for 10 min. The distinction between living (green) and deceased

(red) cells was ascertained using a fluorescence microscope and Image J software (National

Institutes of Health) for cell quantification.

**Efferocytosis assay (Immunofluorescence staining)**

First, Jurkat cells (SCC-121815, Solarbio) were labeled with 5 µM Calcein-AM (Beyotime).

Following a 2-hour incubation, Cells were washed for 3 times and subjected to UV irradiation

(150 mJ/cm2) with an open lid. Subsequently, they underwent an additional 2-hour incubation

before being introduced in a 1:1 ratio to BMDMs for 1 h. After 3 times of gentle washing,

BMDMs were considered positive for phagocytosed green apoptotic Jurkat cells if they

contained clusters of green dots measuring >3 µm in size. Quantification was performed

based on 3 images by Image J software (National Institutes of Health).

**Co-IP**

Treated BMDMs were lysed using Pierce IP Lysis Buffer (Thermo Fisher Scientific) following

the provided instructions. Antibodies against USP7 (1:50, 31687, Cell Signaling Technology),

EPSIN1 (1:100, ab86064, Abcam), HA (1:100, ab9110, Abcam; 1:100, M20013, Abmart), and

Flag (1:100, ab205606, Abcam; 1:100, M20008, Abmart) were added to the lysates overnight

at 4℃, and protein A/G beads were added into the mixture for another 4 h. After centrifugation,

the pellet was collected and washed three times with lysis buffer. Subsequently, it was

resuspended in RIPA buffer and boiled with SDS loading buffer at 95 ℃ for 10 minutes. The

boiled samples were centrifuged again, and the supernatant was utilized for subsequent

Western blot.

**In vivo experiments**

**Mice**

All animal experiments were approved by Subcommittee on Research and Animal Care

(SRAC) of Sichuan University. Young (3-month-old) and aged (18-month-old) male wild-type

C57BL/6J mice were purchased from Chengdu Dossy Experimental Animals Co. Ltd. The

mice were housed in SPF facilities with a 12 h light/dark cycle and provided with sufficient food

and water. A total of one hundred mice were used in this study. The sample size in different

experiments was based on former studies and pre-experiments which was analyzed by

One-way ANOVA F test. We randomized mice by body weight using the random function in

EXCEl. The mice were randomly divided into 5 groups under double blindness: young mice

treated with vehicle, young mice treated with P5091, aged mice treated with vehicle, aged

mice treated with P5091, and aged mice treated with P5091 and RAP. During experiment

periods, no mice were excluded. USP7 inhibitor P5091 was dissolved in PBS containing 4%

DMSO. Mice were injected daily i.p. with injections of vehicle (4% DMSO in PBS) or P5091 (5

mg/kg) or receptor-associated-protein (RAP, 20mg/kg) for 4 weeks based on former studies.

All animal experiments described above were conducted in accordance with the ARRIVE

guidelines.

**Implant surgery**

All mice were were anesthetized via intraperitoneal injection of ketamine at 80 mg/kg (Sigma

Chemical) and xylazine at 10 mg/kg (Sigma Chemical). Following oral saline cleaning, a 2 mm

incision was made anterior to the left first upper molars to mark the implant site. The implant

site was prepared under saline cooling using a surgical motor (NSK-Nakanishi). Subsequently,

the pilot hole was adjusted to accommodate the titanium implant (WEGO) using a drill. The

titanium implant was then screwed into the implant bed with a screwdriver. Following the

surgery, the mice were provided with a soft diet and were injected daily i.p. with injections of

vehicle (4% DMSO in PBS) or P5091 (5 mg/kg) for 4 weeks.

**MicroCT**

The harvested femur and maxillary bones were first fixed in 4% paraformaldehyde for 24 h.

Micro-CT analysis was carried out using the Hiscan XM Micro-CT system (Hiscan Information

Technology Co., Ltd.), with a spatial resolution of 10 μm and utilized the following settings: 80

kV, 100 μA, and 50 ms integration time per step. As for femur, the region of interest (ROI) was

defined as the region located 700 μm below the growth plate of the femur. Bone morphological

parameters, including, bone volume per total volume (BV/TV), trabecular number (Tb.N), and

trabecular thickness (Tb.Th), cortical bone thickness (Ct.Th), and cortical bone area (Ct.Ar)

were assessed within the ROI. As for the maxilla, the region of interest, composed of a radius

of 200 μm around the implants, was selected for the reconstruction of alveolar bone,

encompassing the central 50% portion of the implants. Parameters including BV/TV and

bone-implant contact (BIC) were evaluated within this defined region.

**Histomorphometric/immunofluorescence staining analysis**

For histological analyses, the maxillary bones were initially fixed in 4% paraformaldehyde at

4 °C for 24h and subsequently transferred to PBS at 4 °C.

As for immunofluorescence staining and immunohistochemical staining, the maxillary bones

were decalcification in EDTA (pH 7.2, Biosharp) for 6 weeks, allowing the bone to become

pliable. The decalcified tissue were then embedded in paraffin, and 4-μm sections were

obtained for subsequent staining.

As for immunofluorescence staining, the following primary antibodies and fluorescent dyes

were utilized in this study: anti-F4/80 (Abcam, ab6640, 1:100), DAPI (Beyotime), and TUNEL

(Beyotime). The detection of the primary antibodies was carried out using the corresponding

Alexa Fluor-conjugated secondary antibodies (Abcam). All tissue sections were examined

under a fluorescent microscope (Leica).

As for immunohistochemical staining, the sections were stained by ALP antibody (ET1609-68,

Huabio) and USP7 antibody (A300-033A, ThermoFisher). The positive-expression area of ALP

wa calculated by IHC plugins in imageJ (National Institutes of Health). The ratio of

ALP-positive area was calculated by the pixels of positive-expression area of ALP and the

pixels of whole bone tissue in images. TRAP staining was performed according to the

instructions provided in the Beyotime TRAP Staining Kit (P0332). The number of osteoclasts

was calculated by imageJ (National Institutes of Health).

**Statistical analysis**

Statistical analyses were conducted using GraphPad Prism version 8.0 and SPSS 22.0

software. The data are expressed as means with standard deviation (SD). The normality of

data was first verified by Shapiro–Wilk test. Two-tail student's t-test was employed to compare

two groups, while one-way analysis of variance (ANOVA) was applied when analyzing three or

more than three groups. For multiple comparisons, the Bonferroni's multiple comparisons test

was utilized. Sample sizes are specified in the figure legends. Statistical significance was

defined as *$P$< 0.05, **$P$ < 0.01, ***$P$ < 0.001, and ****$P$ < 0.0001.

**Appendix Figure 1.** Generation of USP7-depleted BMDMs and USP7 depletion inhibited

innate immune response. (A) qPCR showing downregulated mRNA level of USP7 in BMDMs

transfected with sh*Usp7*, n = 3. (B) WB analysis showing downregulated protein level of USP7

in BMDMs transfected with sh*Usp7*, n = 3. (C) CCK8 assay determining cell viability of

control/senescent BMDMs at 3d after transfected with sh*Usp7*, n = 5. (D) qPCR results of

*IL-1b, IL-6*, and *Tnf-a* mRNA expression in different groups of BMDMs, n = 3. (E) ELISA results

of IL-1β, IL-6, and TNF-α secretion level in different groups of BMDMs, n = 4. shNC, BMDMs

transfected with NC lentivirus; shUsp7, BMDMs transfected with shUsp7 lentivirus; CON,

control BMDMs; SEN, senescent BMDMs. Data are shown as the mean ± SD; ns, not

significant, *$P$ < 0.05, **$P$ < 0.01, ***$P$ < 0.001, ****$P$ < 0.0001.

**Appendix Figure 2.** P5091 inhibited inflammation in senescent BMDMs and promoted

osteogenesis of aged BMSCs co-cultured with BMDMs. CCK8 demonstrating the changes in

cell viability of BMDMs (A) and BMSCs (B) in response to varying concentrations of P5091 at

3d, n = 5. (C) qPCR results of the mRNA levels of *IL-1b*, *Tnf-a*, and *IL-6* in different groups of

BMDMs treated P5091, n = 3. (D) ELISA results of IL-1β, IL-6, and TNF-α secretion level in

different groups of BMDMs treated with P5091, n = 4. (E) Representative images of ALP/ARS

staining of BMSCs co-cultured with BMDMs. (F) WB results and quantification of the protein

level of ALP, RUNX2, and COL1α1 in BMSCs co-cultured with BMDMs, n = 3. Y-BMSCs,

young BMSCs; A-BMSCs, aged BMSCs; shNC, BMDMs transfected with shNC lentivirus;

shUsp7, BMDMs transfected with shUsp7 lentivirus; CON, control BMDMs; SEN, senescence

BMDMs. Data are shown as the mean ± SD; ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P <$

$0.001$, ****$P < 0.0001$.

**Appendix Figure 3.** Generation of USP7-depleted BMSCs and P5091 promoted

osteogenesis and senolysis in aged mice. (A) qPCR showing downregulated mRNA level of

USP7 in BMSCs transfected with sh*Usp7*, n = 3. (B) WB analysis showing of downregulated

protein level of USP7 in BMSCs transfected with sh*Usp7*, n = 3. (C) CCK8 assay determining

decreased cell viability in aged BMSCs treated with P5091 at 3d, n = 5. (D) Transwell assay

indicating that P5091 promoted cell migration in aged BMSCs, n = 3. (E) Representative

images of ALP/ARS staining showing that P5091 altered osteogenic capacity in young and

aged BMSCs. (F) WB results and quantification determining that altered protein level of ALP,

RUNX2, and COL1α1 in young and aged BMSCs treated with P5091 at 7d, n = 3. (G)

Representative images of SA-β-gal staining of different groups of BMSCs with P5091, scale

bar, 50μM. (H) qPCR results showing that mRNA level of *IL-1b* and *IL-6* in different groups of

BMSCs with P5091 at 3d, n = 3. (I) ELISA results showing that secretion level of IL-1β and IL-6

in different groups of BMSCs with P5091 at 3d, n = 4. (J) Representative images and

quantitative analysis of live/dead staining of BMSCs after treated with P5091s for 3d, green

color indicates live cells, red color indicates dead cells, scale bar, 150μm, n = 3. (K) Flow

cytometry and quantitative analysis for apoptosis in BMSCs after treated with P5091 for 3d, n

= 3. shNC, BMSCs transfected with NC lentivirus; sh*Usp7*, BMSCs transfected with shUsp7

lentivirus; young, young BMSCs; aged, aged BMSCs. Data are shown as the mean ± SD; ns,

not significant, *$P$ < 0.05, **$P$ < 0.01, ***$P$ < 0.001, ****$P$ < 0.0001.

**Appendix Figure 4.** USP7 depletion improved pro-osteogenic capacity and inhibited

inflammation in senescent BMDMs engulfing apoptotic cells. (A) qPCR results showing mRNA

level of efferocytosis-related genes (*CD36, Lrp1,* and *Mertk*) in BMDMs, n = 3. (B) Flow

cytometry showing M2 polarization in different groups of BMDMs that engulfed apoptotic

Jurkat cells, n = 3. (C) qPCR results showing mRNA level of pro-inflammatory-related genes

(IL-1b, IL-6, and *Tnf-a*) and anti-inflammatory-related genes (*IL-10, IL-12,* and *Tgf-b*) in

different groups of BMDMs, n = 3. (D) Representative images of ALP/ARS staining of BMSCs

co-cultured BMDMs directly.   shNC, BMDMs transfected with NC lentivirus; shUsp7, BMDMs

transfected with shUsp7 lentivirus; CON, control BMDMs; SEN, senescence BMDMs; RAP,

receptor-associated-protein. Data are shown as the mean ± SD; ns, not significant, *$P$ < 0.05,

**$P$ < 0.01, ***$P$ < 0.001, ****$P$ < 0.0001.

**Appendix Figure 5.** USP7 regulated LRP1-mediated efferocytosis by deubiquitinating

EPSIN1. (A) WB results showing the time-dependent expression of EPSIN1 in USP7-depleted

BMDMs, n = 3. (B) WB results showing the time-dependent expression of EPSIN1 in BMDMs

transfected with HA-USP7, n = 3. (C) Co-IP showing that the interaction between Flag-EPINS1

and HA-USP7 in different groups of BMDMs. (D) WB results showing the overall ubiquitous

level in different groups of BMDMs. (E) Co-IP indicating that HA-USP7 over expression

downregulated ubiquitous level of EPSIN1. (F) Schematic diagram showing that USP7

regulated LRP1-mediated efferocytosis by deubiquitinating EPSIN1. CHX, cycloheximide; IP,

immunoprecipitation; WCL, whole cell lysate. Data are shown as the mean ± SD; ns, not

significant, ***$P$ < 0.001, ****$P$ < 0.0001.

C

**Appendix Figure 6.** P5091 promoted osteogenesis in peri-implant bone tissue of senile

osteoporotic mice. (A) HE staining of peri-implant bone tissue at 2-week and 4-week in

different groups of mice. (B) qPCR results showing that mRNA level of *Alp, Runx2,* and *Col1a1*

in peri-implant bone tissue of different groups of mice, n = 3. Veh, vehicle; RAP,

receptor-associated-protein; Young, young mice; Aged, senile osteoporotic mice. Data are

shown as the mean ± SD; ns, not significant, *$P$ < 0.05, **$P$ < 0.01, ***$P$ < 0.001, ****$P$ <

0.0001.

**Appendix Figure 7.** P5091 did not alter efferocytosis at 4-week of osseointegration. (A)

Representative immunofluorescence images of macrophages and apoptotic cells around the

implants, scale bar, 60μM. Veh, vehicle; RAP, receptor-associated-protein; Young, young mice;

Aged, senile osteoporotic mice. Data are shown as the mean ± SD; ns, not significant, *$P <$

0.05, **$P < 0.01$, ***$P < 0.001$, ****$P < 0.0001$.

317    **Appendix Table 1.** Primers sequences used in this research.

| Targets (mouse) | Primer Sequence |
| --- | --- |

| | |
|---|---|
| *β-actin F* | CATCCGTAAAGACCTCTAGCCAAC |
| *β-actin R* | ATGGAGCCACCGATCCACA |
| *Alp F* | AACCCAGACACAAGCATTC |
| *Alp R* | GCCTTTGAGGTTTTTGGTCA |
| *Runx2 F* | GGTACTTCGTCAGCATCCTATCAG |
| *Runx2 R* | GCTTCCGTCAGCGTCAACAC |
| *Col1α1 F* | GCTTCACCTACAGCACCCTTGT |
| *Col1α1 R* | TGACTGTCTTGCCCCAAGTTC |
| *Il-1β F* | ACCCCAAAAGATGAAGGGCT |
| *Il-1β R* | GATACTGCCTGCCTGAAGCTCT |
| *Il-6 F* | TAGTCCTTCCTACCCCAATTTCC |
| *Il-6 R* | TTGGTCCTTAGCCACTCCTTC |
| *Tnf-a F* | CCCTCACACTCAGATCATCTTCT |
| *Tnf-a R* | GCTACGACGTGGGCTACAG |
| *p53 F* | CTCTCCCCCGCAAAAGAAAAA |
| *p53 R* | CGGAACATCTCGAAGCGTTTA |
| *CD36 F* | ATGGGCTGTGATCGGAACTG |
| *CD36 R* | GTCTTCCCAATAAGCATGTCTCC |

| | |
|---|---|
| *Lrp1 F* | ACTATGGATGCCCCTAAAACTTG |
| *Lrp1 R* | GCAATCTCTTTCACCGTCACA |
| *Mertk F* | CAGGGCCTTTACCAGGGAGA |
| *Mertk R* | TGTGTGCTGGATGTGATCTTC |
| *IL-10 F* | GCTCTTACTGACTGGCATGAG |
| *IL-10 R* | CGCAGCTCTAGGAGCATGTG |
| *Tgf-b F* | CTCCCGTGGCTTCTAGTGC |
| *Tgf-b R* | GCCTTAGTTTGGACAGGATCTG |
| *IL-12 F* | CCTGGCTCTTGCTTGCCTT |
| *IL-12 R* | GGTCTTGTGTGATGTTGCTCA |

319   **Appendix Table 2.** Antibodies used in this research.

| Antibody | Source | Host | Dilution |
|---|---|---|---|
| p16INK4a | Abcam, ab211542 | Rabbit | 1:100 |
| NLRP3 | Adipogen, AB_2490202 | Mouse | 1:1000 |
| cleaved IL-1β | Cell Signaling Technology, Asp116 | Rabbit | 1:1000 |
| cleaved | Adipogen, AG-20B-0042-C100 | Mouse | 1:1000 |

| | | | |
|---|---|---|---|
| caspase-1(p20) | | | |
| GSDMD | Huabio, HA601046 | Mouse | 1:1000 |
| GSDMD-NT | | | |
| β-actin | Huabio, EM21002 | Mouse | 1:1000 |
| ALP | Huabio, ET1609-68 | Rabbit | 1:500 |
| RUNX2 | Huabio, ET161247 | Rabbit | 1:500 |
| COL1α1 | SAB, 28307 | Rabbit | 1:500 |
| USP7 | ThermoFisher, A300-033A | Rabbit | 1:50 |
| EPSIN1 | Abcam, ab75879 | Rabbit | 1:100 |
| LRP1 | Abcam, ab92544 | Rabbit | 1:100 |
| Rabbit Anti-HA | Abcam, ab9110 | Rabbit | 1:100 |
| Rabbit Anti-Flag | Abcam, ab1162 | Rabbit | 1:100 |
| Mouse Anti-HA | Abmart, M20003 | Mouse | 1:100 |
| Mouse Anti-Flag | Abmart, M20008 | Mouse | 1:100 |

| | | | |
|---|---|---|---|
| HRP Goat Anti-Rabbit IgG (H+L) | Huabio, HA710308 | Goat | 1:10000 |
| HRP Goat Anti-Mouse IgG (H+L) | Huabio, HA710142 | Goat | 1:10000 |
| F4/80 | Abcam, ab6640 | Mouse | 1:100 |