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CD11B$^+$CD36$^+$ cells are bone anabolic macrophages that limit age-associated bone loss

Short title: Age-associated cortical bone remodeling

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ABSTRACT

Disruptions in the bone remodeling cycle that occur with increasing age lead to degeneration of the skeleton and increased risk of fragility fractures. Our understanding of how the bone remodeling process within cortical bone is controlled and altered with age in males and females is limited. Here, we generated bone marrow chimeric mice to understand the impacts of age and sex on the bone remodeling process. We demonstrate that transplantation of aged male or female bone marrow into young lethally irradiated male hosts unexpectedly enhances cortical bone mass without an impacting cancellous bone. Our single cell RNA-sequencing data show that mice reconstituted with aged bone marrow exhibited subsets of cells marked by CD11B/CD36 expression that demonstrate enhanced production of anabolic cytokines as compared to young counterparts, and that these myeloid subsets exist under conditions of normal physiology in aged mice. Importantly, CD11B$^+$CD36$^+$ cells do not differentiate into osteoclasts in vitro, and CD36 does not mark TRAP+ cells in vivo. Instead, CD36$^+$ cells localize to resorption sites, including within cortical bone defects, suggesting their involvement in cortical bone remodeling and healing. CD11B$^+$CD36$^+$ cells also express elevated levels of bone anabolic WNT ligands, especially Wnt6. In functional assays, we demonstrate that soluble factors produced by CD11B$^+$CD36$^+$ cells enhance osteoblast progenitor commitment, mineralization, and activation of WNT signaling in vitro. Moreover, CD11B/CD36 exquisitely mark a subset of anabolic myeloid cells within human bone marrow. In conclusion, our studies identified a novel population of aged macrophages that limit cortical bone loss.

INTRODUCTION

Bone mass in men and women starts to decline during the third decade of life (1). Women also exhibit a punctuated period of bone loss following the menopause proceeded by rate of age-associated declines in bone mass approaching that of men (2). In both men and women, age constitutes the greatest risk for a fragility fracture (3). Half of all women and one quarter of men are projected to suffer an age-related low bone mass fracture (4). Importantly, approximately 25% of individuals die a year after a hip fracture (5-9);

thus, a better understanding of the pathophysiology of age-related declines in bone mass would aid in

preventative and interventional strategies.

Cortical bone comprises the majority of skeletal bone mass (80%), and diminished cortical bone mass

accounts for 70% of bone lost with age (10, 11). Although bone anabolic agents enhance vertebral cortical

bone mass, efficacy is lower at the hip compared to the spine (+12.3% spine, +3.9% hip) (12, 13); therefore,

additional therapeutics improving cortical bone are desperately needed.

The bone remodeling process facilitates homeostasis of the adult skeleton. Bone remodeling consists of

phases of activation, bone resorption, reversal, and bone formation (14). Aging disrupts the phases of the

bone remodeling process resulting in unbalanced bone formation and bone resorption (14). Osteoclasts

and osteoblasts mediate these phases, respectively. While the coupled cellular activities of osteoclasts

and osteoblasts maintain optimal bone health, recent evidence suggests that macrophages within the

bone niche help coordinate the bone remodeling process (14). In spite of this, we understand little about

how different subsets of macrophages impact the bone remodeling process. In this study, we sought to

define how age affects macrophage types and examine the impact of those cells on cortical and trabecular

bone homeostasis.

RESULTS

Transplantation of aged bone marrow into young hosts promotes cortical bone mass

Recent work supports that myeloid cells residing within the bone marrow regulate bone remodeling

during conditions of normal physiology and pathological conditions (15, 16). Lower peak bone mass and

acute bone loss following the menopause predisposes women to osteoporosis and greater risk of fracture

with age; however, it is unclear if rapid bone loss associated with sex steroid deficiency and age-associated

bone loss are mediated by the same mechanisms, or if there are differences in how age-associated bone

loss occurs in males and females. To understand the cellular mechanisms driving bone loss prior to

reproductive senescence, we performed bone marrow transplantation assays generating chimeric mice.

We started with young (e.g., 6-week-old) male recipient mice (Figure 1A, left panel). Young recipient male

mice were lethally irradiated to ablate the bone marrow. In parallel, we collected bone marrow from 6-

or 40-week-old donor male or female mice (Figure 1A, right panel). Donor bone marrow was depleted of

T cells through magnetic-assisted cell sorting (MACS)-mediated removal of CD3+ and CD8+ cells. Young

recipient mice were then reconstituted with T-cell depleted donor bone marrow from mice of four groups

(Figure 1A, right panel) (17-19). We then aged recipient male mice to six-months (e.g., 18-weeks after BM

transplantation). To estimate percent chimerism, we collected bone marrow and liver cells from male

recipient mice transplanted with female bone marrow, and assessed expression of X- and Y-linked genes.

Within the bone marrow, male recipient mice showed robust expression of X-linked genes Xist and Gata1,

but little to no expression of Y-linked genes Sry and DDx3y (Figure 1B), supporting that cells within the

bone marrow of ablated recipient males were reconstituted by female cells. In contrast, X- and Y-linked

genes were expressed within the male recipient liver. Gross examination showed that male mice receiving

bone marrow from either aged males (group 2) or aged females (group 4) exhibited signs of premature

aging (e.g., gray coat color) (Figure 1C). Body weight was also reduced by transplantation of aged male

bone marrow (e.g., group 2), but no other significant weight changes were observed (Figure 1D).

Splenomegaly can point to deficiencies in bone marrow function, so we also assessed the spleen weight

to body weight ratio. Changes in body weight-adjusted spleen mass were not observed within any group

(Figure 1E).

We next assessed bone mass of 24-week-old recipient male mice. We first determined how irradiation

affected cortical bone by comparing chimeric mice within each group to 24-week-old non-irradiated

controls. We noted that irradiation decreased cortical BV/TV (Figure 2A, D), but did not alter cortical

thickness (Figure 2B, D) or trabecular BV/TV (Figure 2D, E) when comparing non-irradiated controls to

male mice transplanted with sex- and age-matched bone marrow (e.g., group 1 vs NI). Likewise, enodsteal

perimeter was significantly increased when comparing to non-irradiated controls (Figure 2C). In contrast,

irradiation increased trabecular spacing but reduced trabecular thickness (Figure 2D, F, G).

We next assessed changes between groups 1 and 2 to determine the effect that aged, but sex-matched

bone marrow had on cortical and trabecular bone. Micro-CT analyses of the resulting chimeric mice in

groups 1 and 2 revealed a surprising increase cortical bone mass (+10%) and cortical thickness (+7%) when

male recipients were reconstituted with sex-matched, but aged bone marrow (Figure 2A, B, D). In

contrast, no changes in trabecular BV/TV were observed between these groups (Figure 2D, E), but we did

note increased trabecular spacing coupled with diminished trabecular thickness (Figure 2D, F, G). These

data suggested that transplantation of aged bone marrow enhanced cortical but not trabecular bone

mass.

We next examined the effects transplantation of bone marrow derived from female mice on bone mass.

When comparing young male mice reconstituted with bone marrow from age-matched males or females

(groups 1 and 3), we did not see a change in cortical BV/TV or cortical thickness (Figure 2A, B, D). Likewise,

trabecular BV/TV, trabecular number, and trabecular spacing were unchanged (Figure 2D-F), but we did

observe a slight reduction in trabecular thickness when comparing these groups (Figure 2G).

We next compared young male mice transplanted with either sex- and age-matched bone marrow to

those transplanted with bone marrow collected from 40-week-old females (groups 1 and 4). We noted

increased cortical BV/TV, but no significant changes in cortical thickness (Figure 2A, B, D). No changes in

trabecular bone parameters were noted (Figure 2D-G). We then compared the effects of age when

transplanting female bone marrow (e.g., groups 3 versus 4). Reconstitution of young male mice with aged

female bone marrow enhanced cortical BV/TV as compared to age-matched female bone marrow, but did

not alter cortical thickness (Figure 2A, B, D). No changes in trabecular BV/TV, trabecular number, or

trabecular spacing were noted (Figure 2D-F), but we did observe an increase in trabecular thickness

(Figure 2G). These results mirror those we observed when aged male bone marrow was transplanted into

young male recipients.

Enhanced cortical bone mass could be due to increased bone formation and/or a reduction in bone

resorption at the periosteal or endosteal surfaces, respectively. To determine how bone remodeling was

altered within our chimeric mice we examined periosteal and endosteal cortical bone perimeter.

Irradiation increased endosteal perimeter when comparing mice within group 1 to non-irradiated

controls, supporting that irradiation increases resorption at the endosteal surface. In contrast, mice

transplanted with aged bone marrow within group 2 exhibited decreased endosteal perimeter (Figure 2C).

Likewise, transplantation of female bone marrow diminished endosteal perimeter (Figure 2C). These

results suggest that transplantation of aged bone marrow reduced endosteal resorption of cortical bone

or lead to increased endosteal formation.

Subsets of myeloid cells from aged bone marrow associate with enhanced cortical bone

Our results from the bone marrow transplantation assays combined with recent work demonstrating that

myeloid lineage cells (e.g., erythromyeloid progenitors, osteoclasts, osteomorphs, osteomacs) regulate

the bone remodeling process, suggested the existence of aged myeloid cells that promote maintenance

of cortical, but not trabecular bone. Moreover, a recent study demonstrated that erythromyeloid

progenitors expand during intensive hematopoietic regeneration (20); therefore, we profiled myeloid

cells within the bone marrow of our chimeric mice. We first evaluated the cellular subsets in young male

recipients transplanted with sex-matched bone marrow derived from either age-matched or 40-week-old

mice via singe cell RNA-sequencing (scRNA-Seq) of CD11B^{+} cells. Integration of these two datasets did not

uncover unique clusters (Figure 3A), but we noted differential gene expression within clusters when

comparing CD11B+ cells from mice reconstituted with aged as compared to age-matched bone marrow

from either males (Figure 3) or females (Figure 4).

In mice reconstituted with male cells, all clusters expressed markers for hematopoietic cells, including

Cd45, *Pu.1* and *Chi3l* (Figure 3B-D). We also noted multiple *Csf1r$^+$* clusters, including clusters 1, 4, 7, 8, 14,

15, and 16 (Figure 3E, R). Expression of *Kit* and *Myb* marked highly proliferative cells within clusters 6 and

12, which are likely myeloid progenitor cells (Figure 3F, G). Macrophage markers *F4/80*, *Cd68*, and *Cd86*

were likewise expressed by cells within clusters 1, 4, 7, 8, and 14-16 (Figure 3H-J). The putative osteomac

marker *Cd166* (21) was broadly expressed (Figure 3K), whereas the macrophage marker *Mrc1* was mostly

restricted to clusters 14-16 (Figure 3L, R). Cells within cluster 16 expressed the highest levels of *Mrc1*, but

expression was diminished by cells within cluster 15 (Figure 3L, R). Similarly, expression of *Cx3cr1* was

restricted to clusters 14-16, with highest expression observed by cells within cluster 15 (Figure 3M, R).

Some cells within cluster 14-16 also expressed *RANK* (Figure 3N), supporting the role of these cells as with

the potential to give rise to osteoclasts. We also noted high enrichment of *Cd74*, a putative osteomorph

marker (22), *Siglec1/Cd169*, and *Cd36* within clusters 14-16 (Figure 3O-R). Recent genetic evidence

suggests that cortical bone may be controlled specifically by several signaling pathways/components (e.g.,

Wnt and Notch signaling) (23). We next evaluated expression of these and related genes across all clusters

and noted high expression of Bmps, Collagens, and Wnts by cells within clusters 14-16, and to some extent

cluster 17 (Figure 2R). Enrichment of B Cell markers distinguished cluster 17.

We next evaluated the effect of sex on subsets of CD11B$^+$ cells following intensive bone marrow

reconstitution. We integrated scRNA-Seq results from the CD11B$^+$ cells within the bone marrow of young

male mice reconstituted with either age-matched male bone marrow or 40-week-old female bone

marrow. This analysis did not reveal unique clusters (Figure 4A). As above, *Cd45*, *Pu.1*, and *Chi3l* were

broadly distributed (Figure 4B-D). *Csf1r+* clusters included clusters 1- 3, 11, 12, 15 and 17 (Figure 4E).

Myeloid progenitor cells marked by expression of *Kit* and *Myb* were contained within 6 and 9 (Figure 4F,

G). The cells within clusters 1-3, 5, 11, 12, 15, and 17 expressed the macrophage markers *F4/80*, *Cd68*,

and *Cd86* (Figure 4H-J); *Cd166* was broadly expressed (Figure 4K). In contrast, *Mrc1* was expressed by

cells within clusters 12 and 17 (Figure 4J, R). High expression of *Cx3cr1* marked cells within clusters 11 and

15, whereas expression was diminished with clusters 12 and 17 (Figure 4M, R). Expression of RANK was

observed by cells within clusters 11 and 15-17 (Figure 4N). High expression of *Cd74* was also noted of

clusters 11, 12 and 15-17 (Figure 4O, R), whereas *Cd36* was localized to cells within clusters 11, 12, 17 and

15, with cluster 11 exhibiting lower expression (Figure 4Q, R). As above, we noted enriched expression of

Bmps, Collagens, and Wnts by cells within clusters 12, 15 and 17 (Figure 4R). We observed similar findings

when comparing CD11B⁺ cells from young male mice reconstituted with bone marrow from 40-week-old

males to those reconstituted with 40-week-old females, demonstrating that age, but not sex of donor

cells associated with enhanced cortical bone mass. Likewise, our data suggest that specific subsets of

CD11B+ cells express bone anabolic genes, and that these subsets are delineated by differential

expression of *Cd36*.

Characterization of CD11B⁺ cellular subsets within the bone marrow of young and aged animals

We noted the presence of several cellular subsets of cells within aged mice that expressed bone anabolic

genes. To broadly define the types of myeloid cells within the bone marrow and evaluate how age alters

these cellular subsets, we performed single cell RNA-sequencing (scRNA-Seq) on CD11B⁺ cells from the

bone marrow of 8- or 40-week-old male and female C57Bl6/J mice. We chose these ages to reflect a period

of bone anabolism (e.g., gain in bone mass) during youth and a period of age-associated bone loss prior

to reproductive senescence, respectively. scRNA-Seq of CD11B⁺ cells from young animals revealed

multiple cells types, including *RANK*⁺ osteoclast progenitors, dendritic cells, neutrophils, monocytes,

macrophages as well as proliferative *Kit*⁺/*Myb*⁺ myeloid progenitors (Figure 5A, C).

We first examined macrophage clusters within young males and females. We noted two macrophage

clusters within 8-week-old CD11B-expressing bone marrow cells. Cluster 8 exhibited reduced expression

of *Csf1r*, *Cx3cr1* and *Cd74*, but higher expression of *Mrc1* and *Cd36* (Figure 5B). Cluster 8 showed

enrichment in bone anabolic genes such as BMPs, Collagens and Wnts. These bone anabolic proteins

were also expressed by *Csf1r-* cells within cluster 11. Likewise, we identified three *Csf1r*-expressing

clusters within CD11B⁺ cells derived from the bone marrow of 8-week-old females (Clusters 3, 4, and 6,

Figure 5C, D). Clusters 3 and 6 demonstrated reduced expression of *Csf1r*, but levels of *Mrc1* and *Cd36*

were greater (Figure 5D). Cluster 4 demonstrated the highest enrichment for *Csf1r* and *Cx3cr1*, but

exhibited little expression of *Cd36* or *Cd74*. Bone anabolic genes were enriched in clusters 3 and 6 (Figure

5D).   These data pointed to a set of macrophages within the bone marrow that produce bone anabolic

factors.

When examining aged CD11B⁺ cells, we likewise noted several myeloid subsets that were analogous to

those present within young animals. Within males, we noted three subsets (clusters 4, 9, and 10) that all

showed enrichment for *Csf1r* and *Cx3cr1* (Figure 5E, F). Moreover, clusters 9 and 10 demonstrated high

expression of *Cd36*, but enrichment in *Cd74* by cells within cluster 9 and *Mrc1* by cells in cluster 10

differentiated these clusters (Figure 5F). All three clusters exhibited enrichment in Wnt gene expression,

but only clusters 9 and 10 significantly expressed Bmps. Within CD11B⁺ female ages cells, clusters 7, 8, 9,

and 14 all showed enrichment for *Csf1r*, *Mrc1* and *Cd36* (Figure 5G, H). *Cx3cr1* expression defined cluster

7 as well as cluster 9, but to a much lesser extent. *Cd74* also demonstrated differential expression

amongst these four clusters (Figure 5H). Cluster 7 showed limited expression of Bmps and Wnts, whereas

these bone anabolic genes were enriched amongst clusters 8, 9, and 14 (Figure 5H). These data highlight

subsets of CD11B⁺/*Csf1r*⁺ cells within the bone marrow of aged animals that can be delineated by

differential expression of *Cd74*, *Cx3cr1*, *Mrc1*, and/or *Cd36*.

CD36+ cells associate with sites of bone resorption on endocortical surfaces

Cd36 represented one of the most highly differentially expressed genes in our scRNA-Seq analyses and

was exclusively expressed by specific subsets of cells within our analyses.   We postulated that

CD11B⁺CD36⁺ cells either serve as osteoclast progenitors, or play a regulatory role in the bone remodeling

process given that they are enriched in chimeric mice with elevated cortical bone mass. To investigate

their localization and potential function, we performed immunohistochemical (IHC) staining for CD36 on

femur sections from 12- and 24-week-old female mice. We also examined sections of cortical bone defects

collected 14 days post-injury (24). To visualize bone remodeling sites, we additionally performed TRAP

staining. Our results showed that CD36 was diffusely expressed by cells within the BM cavity, with no

enrichment near cortical bone remodeling sites in 12-week-old female mice (Figure 6A, left column).

However, in 24-week-old mice and within cortical bone defects, we observed strong CD36 staining in cells

located near osteoclasts (Figure 6A, middle and right columns). CD36 expression by mature osteoclasts

was not detected under any conditions. These results suggest that $CD36^{HI+}$ cells may regulate bone

remodeling and regeneration.

To assess whether CD11B+CD36+ cells function as osteoclast progenitors, we isolated $CD11B^{+}CD36^{+}$ and

$CD11B^{+}CD36^{-}$ cells from the BM of 12-week-old female mice and cultured them under osteoclastogenic

conditions. While the $CD11B^{+}CD36^{-}$ population formed $TRAP^{+}$ multinucleated cells, indicative of

osteoclasts, the $CD11B^{+}CD36^{+}$ cultures only produced mononuclear cells (Figure 6B, lower panel). These

findings suggest that $CD11B^{+}CD36^{+}$ cells are involved in cortical bone regeneration and remodeling but do

not form osteoclasts, supporting previous reports (25).

$CD11B^{+}CD36^{+}$ myeloid cells support bone formation

Our scRNA-Seq analysis revealed that $CD11B^{+}CD36^{+}$ cells express several bone anabolic factors, including

Wnt10b, *Wnt6*, *Wnt3a*, *Bmp1*, and *Bmp2* (Figure 3R). To validate these findings, we FACS-sorted

$CD11B^{+}CD36^{+}$ cells from the bone marrow of 12-week-old female mice. $CD11B^{+}CD36^{+}$ cells comprised

8.7% of the isolated bone marrow cells (Figure 7A). We observed increased expression of *Wnt10b*, *Wnt6*,

and *Bmp1*, and reduced expression of *Wnt3a* and *Bmp2* by $CD11B^{+}CD36^{+}$ cells compared to $CD11B^{+}CD36^{-}$

cells (Figure 7B-F). *Wnt6* showed the most significant differential expression, which we further confirmed

by western blotting (Figure 7G).

Next, we investigated whether factors secreted by CD11B$^+$CD36$^+$ cells influence osteoprogenitor

proliferation, migration, commitment, and mineralization. CD11B$^+$CD36$^-$ and CD11B$^+$CD36$^+$ cells were

sorted from the BM of 12-week-old male and female C57Bl/J mice, cultured with M-CSF for three days,

and conditioned medium was collected. ST2 osteoprogenitor cells were then cultured in conditioned

medium for 24 hours to assess proliferation and migration (Figure 7H). Cck-8 assays indicated no

significant impact on osteoprogenitor proliferation and transwell assays similarly showed no significant

effects on migration. To evaluate osteoprogenitor commitment and mineralization, ST2 cells were

cultured in conditioned medium under osteogenic conditions. Enhanced mineralization was observed in

cultures treated with CD11B$^+$CD36$^+$ conditioned medium (Figure 7K, L) accompanied by increased

expression of *Bgn*, *Phospho1*, and *Sp7* (Figure 7M-O). Conversely, *Mmp13* and *Tnfsf11*/RANKL expression

was reduced in these cultures (Figure 7P, Q). Finally, we assessed the activation of β-catenin and JNK

signaling pathways in ST2 cells cultured in conditioned medium from CD11B$^+$CD36$^-$ and CD11B$^+$CD36$^+$ cells

for one hour. Western blotting revealed elevated levels of active β-catenin and JNK phosphorylation,

indicating increased canonical and/or non-canonical Wnt signaling (Figure 7R). Likewise, NFAT1 and

TCF1/7 levels were enhanced (Figure 7R). These results suggest that CD11B$^+$CD36$^+$ cells produce WNT6,

which promotes osteoblast differentiation and bone formation.

CD11B$^+$CD36$^+$ Cells within Human Bone Marrow

To show that our results may translate to humans, performed single cell sequencing of CD11B$^+$ cells from

the bone marrow aspirate of a 45-year-old female. Using the pipeline described above, we aligned data

to the hg38 genomic reference genome. We identified a cluster of isolated CD11B$^+$ cells exquisitely

defined by *Cd36* (Figure 8A, Q, R). CD11B$^+$CD36$^+$ cells within cluster 7 also expressed *Cd45*, *Pu.1*, *Csf1r*,

F4/80, *Cd68*, *Cd86*, *Cd166*, *Cd74*, and *Cx3cr1*, but were mostly negative for *Chi31l*, *Mrc1*, *RANK*, and

Siglec1/Cd169 (Figure 8B-P). We also noted that expression of *Cd166*, the putative osteomac marker, and

Cd74 were broadly pressed by CD11B$^+$ cells (Figure 8K, O). Expression of *Wnt6* was likewise restricted to

CD11B$^+$ cells cluster 7; thus, bone marrow from aged humans also contains an anabolic macrophage

population marked by CD11B/CD36.

DISUCSSION

The goal of our study was to examine how age and sex of hematopoietic cells affected skeletal aging. Prior

work documented that altered mesenchymal cell function facilitates age-associated changes to trabecular

bone, with consequent myeloid cell skewing (26, 27). Our study supports this finding, as we did not

observe changes to trabecular bone mass or microarchitecture. In contrast, our data support that age

alters bone marrow composition following intensive hematopoietic regeneration as previously described

(20), and those alterations in bone marrow composition facilitate gains in cortical bone. Moreover, our

data suggest that a subpopulation of aged macrophages limit endocortical bone resorption.

Bone resorbing osteoclasts can arise from hematopoietic stem cells or from long-lived erythro-myeloid

progenitors within the bone marrow. Osteoclasts have an estimated 6-month half-life in mice (28-30).

Recent evidence suggests that osteoclasts derived from different subsets of progenitors may facilitate

bone remodeling in different contexts (31-33). For instance, osteoclast progenitors that contribute to

homeostatic bone remodeling differ from those mediating bone loss associated with inflammatory

conditions (32). Osteoclasts that remodel bone in other perturbed states or within different bone

compartments may likewise differ. Our data suggest that age-associated resorption at endosteal cortical

bone surfaces may be distinct and limited by secreted factors produced CD11B$^+$CD36$^+$ cells. To the best of

our knowledge, this represent the first example of an aged myeloid cell type that limits bone resorption.

In our study, we identified a specific myeloid subset of aged cells that limit age-associated cortical bone

loss. Surface marker expression of CD11B and CD36 characterizes this subset of cells. In addition to these

surface markers, osteomorph markers (e.g., Axl, Cadm1, Ccr3, Cd74, Vcam1 (22)) were significantly

enriched within our identified myeloid subset. Osteomorphs have be speculated to function during the

reversal phase of bone remodeling. Given their proximity to bone resorbing osteoclasts along the cortical

surface, our identified cellular subset could be osteomorphs. Indeed, our scRNA-Seq analyses

demonstrated expression of RANK within these clusters, but we were unable to generate osteoclasts from

sorted CD11B$^+$CD36$^+$ cells in vitro. In contrast, CD11B$^+$CD36$^-$ cells efficiently formed osteoclasts in vitro.

These data suggest that our identified myeloid subset is potentially distinct from osteomorphs, but we do

not know if CD11B$^+$CD36$^+$ cells could fuse with existing osteoclasts in vivo.

CD36 is a cell surface marker delineating our population of interest, but we are unsure if CD36 is merely

a marker for this myeloid subset, or if CD36 plays a functional role in controlling age-associated cortical

bone loss. CD36 is a membrane glycoprotein that functions as a scavenger receptor for various ligands,

including collagen, thrombospondin-1, anionic phospholipids, and long chain fatty acids. While CD36 is

broadly expressed, adipocytes, cardiac myocytes, and immune cells including myeloid cell types (e.g.,

monocytes, macrophages) exhibit biased expression. CD36 mediates the formation of giant cells, but does

not facilitate osteoclast fusion (25). Our data further confirm that CD11B$^+$CD36$^+$ cells do not form

osteoclasts.

Global deletion of *Cd36* (i.e., *Cd36$^{-/-}$*) resulted in conflicting effects on bone mass. In the first published

study, male and female 1- to 6-month-old *Cd36$^{-/-}$* mice demonstrated reduced vertebral and femoral

cortical bone mass characterized by diminished bone formation (34). No changes in markers of resorption

were noted (34). Furthermore, in vitro osteoblastogenesis from bone marrow stromal cells was

diminished, though the impact of myeloid cell *Cd36* deletion in these cultures could be a confounding

factor. Conversely, a later study reported increased vertebral and femoral cortical BV/TV in female 12-

week-old $Cd36^{-/-}$ mice, with no detection of CD36 expression by mature osteoclasts or osteoblasts (35).

Given these conflicting results using $Cd36$ global knockout mice, an examination of the role of $Cd36$

specifically within monocyte/macrophage-lineage cells during bone remodeling and regeneration is

warranted as understanding the role of $Cd36$ in bone biology would offer potential therapeutic targets for

managing bone-related diseases and improving skeletal health.

Our scRNA-Seq data demonstrated enrichment of secreted factors (e.g., Wnts, Bmps) by aged myeloid

cells within our clusters of interest. Coupled with decreased endosteal perimeter, we speculated that

$CD11B^+CD36^+$ cells may limit resorption at endosteal surfaces. Wnt signaling limits osteoclastogenesis

(36). Likewise, canonical Wnt signaling promotes expression of OPG by osteoblasts, leading to diminished

osteoclastogenesis (37). In contrast, little is known about production of Wnt ligands by other cell types

involved in the bone remodeling process and how this impacts cortical bone resorption. In fact, studies

suggest that osteoclasts and bone forming osteoblasts may not be present at sites of bone remodeling at

the same time (38-40), particularly at the endosteal surface. Likewise, age disrupts the temporal and

spatial processes of resorption and formation. Our studies point to $CD11D^+CD36^+$ cells as targets to limit

age-associated cortical bone loss. In future studies, we will determine factors produced $CD11B^+ CD36^+$

cells that limit age-associated osteoclastogenesis and bone resorption.

Our study has several limitations. One limitation of our study is that we did not assess possible

contributions of splenic cells to our phenotype. Studies have shown that osteoclast progenitors from the

spleen can migrate to bone and participate in bone remodeling and repair (28, 31, 33). We did not observe

significant expression of X-linked gene within the bone marrow of males reconstituted with female bone

marrow or splenomegaly; nonetheless, we cannot completely rule out the contribution of these cells

within our study. Although we speculate that $CD11B^+CD36^+$ cells are not osteomorphs based on their

inability to support osteoclastogenesis in vitro, we do not know if this is true in vivo. Our definition of aged

mice does not strictly fit the well-accepted definition (e.g., older than one year). We wanted to uncover

mechanisms of age-associated bone loss independent of reproductive status to reflect what may be

initiating events in the aging process as both men and women begin to lose bone mass starting in the third

decade of life.

MATERIALS AND METHODS

Animal procurement and housing

The Jackson Laboratory provided male and female C57Bl6/J mice (strain #000664, Bar Harbor, ME, USA)

aged to either 6- or 38-weeks old at time of purchase. Mice were acclimated to housing conditions for

two weeks prior to experimentation. All animal research was conducted according to guidelines provided

by the National Institutes of Health and the Institute of Laboratory Animal Resources, National Research

Council. The University of Minnesota Institutional Animal Care and Use Committee approved all animal

studies.

T Cell Depletion of Whole Bone Marrow

Male and female 8- or 40-week-old mice were euthanized by CO_2 asphyxiation. The femora and tibiae

were collected and connective tissue was removed. Bone epiphyses were removed and the marrow cavity

was flushed with sterile PBS. Whole bone marrow suspensions from age-matched mice were pooled and

pelleted at 1000 rpm for five minutes. Cell pellets were then suspended in 1X RBC lysis buffer (#00-4333-

57, ThermoFisher Scietific, Waltham, MA, USA) and incubated for five minutes. Cells were pelleted at 1000

rpm and suspended in MACS buffer (0.5% bovine serum albumin, 2mM EDTA, phosphate buffered saline)

by diluting MACS BSA stock solution (Miletnyi Biotech, Bergisch Gladbach, North Rhine-

Westphalia, Germany, #130-091-376) 1:20 with autoMACS rinsing solution (Miltenyi Biotech, #130-091-

222,) to a density of $0.2x10^6$ cells/µl. Cell suspensions were then incubated with 1 µl PE-conjugated anti-

Cluster of CD8 and anti-CD3 antibodies per $1x10^7$ nucleated cells for 20 minutes in the dark at 4C. Cells

were then washed with MACS buffer, pelleted and suspended at a density of 1.25x106 cells/µl in MACS

buffer. Anti-PE microbeads (20 µl/$10x10^6$ cells, Miltenyi Biotech, #130-048-801) were added and cells

were incubated at 4C for 20 minutes in the dark. Cells were then washed pelleted and applied to an LS

column (#130-042-401, Miltenyi Biotech) placed in a MidiMACS Separator magnet (Miltenyi Biotec, #130-

042-301h). Eluted $CD8^-$/$CD3^-$ bone marrow cells were pelleted and suspended in PBS at a density of $50x10^6$

cells/ml.

Irradiation and bone marrow reconstitution

Six-week-old (e.g., young) male mice (n=34) were lethally irradiated using and X-ray irradiator via two

successive does of 500 rads separated by a period of four hours. Two hours after completion of irradiation,

mice were reconstituted via a 200 µl tail vein injection of $10x10^6$ T cell-depleted whole bone marrow cells

suspended in PBS derived from either 6-week-old males (n=10), 6-week-old females (n=8), 40-week-old

males (n=8), or 40-week-old females (n=8). Following bone marrow reconstitution, mice were housed in

autoclaved cages and were administered 15 µg polymixin B sulfate and 40 µg/ml neomycin sulfate in their

drinking water for two weeks. Mice were aged an additional 16 weeks (e.g., 24-weeks-old) and then

euthanized for analyses.

Micro-computed tomography

Right femora collected from 24-week-old chimeric mice and non-irradiated 24-week old males were fixed

in 10% neutral buffered formalin for 48 hours, wrapped in gauze, and placed in 1.5mL screw-cap tubes

filled with 70% ethanol. Scanning was performed using the XT H 225 micro-computed tomography (micro-

CT) machine (Nikon Metrology Inc., Brighton, MI, USA) set to 120kV, 61µA, 720 projections at two frames

per projection with an integration time of 708 milliseconds as previously described (41). Scans were done

at an isometric voxel size of 7.11 µm with a 1mm aluminum filter, 17 minutes per scan. Each scan volume

was reconstructed using CT Pro 3D (Nikon metrology, Inc., Brighton, MI, USA). Reconstructions were

converted to bitmap datasets using VGStudio MAX 3.2 (Volume Graphics GmbH, Heidelberg, Germany).

Scans were reoriented via DataViewer (SkyScan, Bruker micro-CT, Belgium) to create a new bitmap

dataset for consistent analysis. From these data, representative transverse slices were selected for

qualitative analysis. Morphometric analysis was performed using SkyScan CT-Analyzer (CTAn, Bruker

micro-CT). Bruker's instructions and guidelines for analysis within the field was followed throughout

analysis (41). 3D Analysis of trabecular bone was performed in the distal metaphysis 0.7 mm proximal to

the growth plate and extending 1.5 mm proximally toward the bone diaphysis. For the bone cortex, 2D

analysis occurred in a 0.5 mm section within the mid-diaphysis defined as 4 mm from the growth plate.

Regions of interest were set by automated contouring for the trabecular and cortical ranges, with some

manual editing when necessary. Binary selection of all samples resulted in two separate global thresholds

used to separate bone from surrounding tissue within the trabecular and cortical regions of interest.

Parameters measured for trabecular bone include bone volume per total volume (BV/TV), bone surface

per total volume (BS/TV), bone surface per bone volume (BS/BV) trabecular thickness, number, and

spacing (Tb.Th, Tb.N, Tb.Sp), and connective density (Conn.D). Cortical parameters measured were BV/TV,

periosteal and endosteal perimeter (pM), as well as cortical thickness (Ct.Th).

CD11B+ magnetic assisted cell sorting

Bone marrow cells were flushed from the femora and tibiae of 6-month-old chimeric mice from each

group or from 8- and 40-week-old male and female C57Bl6/J mice. Whole bone marrow suspensions

resulting from each mouse were pelleted at 1000 rpm for five minutes. Cell pellets were then suspended

in 1X RBC lysis buffer and incubated for five minutes. Cells were pelleted at 1000 rpm and suspended in

MACS buffer to a density of 0.11×10^6 cells/µl. Nucleated cells were then incubated with 10 µl CD11B

microbeads (Miltenyi Biotech, #130-126-725) per 1×10^7 cells for 10 minutes at 4C. Cell suspensions were

then brought to a total volume of 500 µl with MACS buffer and applied to an equilibrated LS column placed

in a MidiMACS Separator magnet. Columns were then washed three times with MACS buffer and removed

from the magnet. CD11B+ cells were eluted from the column with 5 ml MACS buffer. Cells were then

enumerated and used for subsequent scRNA-Seq analyses.

Single cell RNA-sequencing

CD11B+ cells from chimeric mice in each group or 8- and 40-week-old male and female C57Bl6/J mice

were isolated via MACS as described above. Single cell cDNA libraries from each sample were the

prepared using Chromium Single cell 3' Reagent v3 Kits (10× Genomics, Pleasanton, CA, USA) according to

the manufacturer's protocol. Each single-cell suspension was mixed with primers, enzymes, and gel beads

containing barcode information and then loaded on a Chromium Single Cell Controller (10× Genomics) to

generate single-cell gel beads in emulsions (GEMs). Each gel bead was bonded to one cell and encased

within oil surfactant. After generating the GEMs, reverse transcription was performed using barcoded full-

length cDNA followed by the disruption of emulsions using the recovery agent and cDNA clean up with

DynaBeads MyOne Silane Beads (ThermoFisher Scientific, #37002D). cDNA was then amplified by PCR

with an appropriate number of cycles and thermal conditions that depended on the recovery cells.

Subsequently, the amplified cDNA was fragmented, end-repaired, A-tailed, ligated to an index adaptor,

and subjected to library amplification. Quality of amplified cDNA was assessed using an Agilent

Bioanalyzer prior to high-throughput sequencing. Following quality control, the cDNA libraries were

sequenced on an Illumina NovaSeq 6000 sequencer. The Genomics Core at the University of Minnesota

performed library construction and sequencing.

Single Cell Bioinformatic Analyses

10× Genomics Cell Ranger software (version 6.0.0) was used to process the raw scRNA-seq data in

accordance with the guidelines specified by the manufacturer. Cell Ranger software (2020-A, 10×

Genomics Cell Ranger Count v7.0.1) was used to demultiplex the raw base call (BCL) files produced by the

Illumina NovaSeq 6000 sequencer. Next, Cell Ranger was used to count the unique molecular identifiers

(UMI) and barcodes and align fastq files to the mouse reference genome (GRCm39). Quality assurance

and subsequent studies were then performed on the feature-barcode matrices created by Cell Ranger.

The study was filtered to exclude cells with outlier status, aberrant gene detection rates (<500 and

>5,000), and high mitochondrial transcript level (>8%), a sign of cellular stress. Possible doublets were also

excluded from the data using doubletFinder for subsequent analysis. The remaining cells are then

normalized, and a set of 2000 highly variable genes were selected based on a variance stabilizing

transformation ('vst'). Next, the data was scaled to account for technical variability in the data and used

for principal component analysis (PCA) to reduce the dimensionality of the data. Cells were then organized

into an ideal number of clusters for de novo cell type discovery. Then, using uniform manifold

approximation and projection (UMAP), a non-linear dimensional reduction was carried out, enabling for

the identification and visualization of different cell clusters. After variable feature identification, the data

were used for integrated analysis.

CD11B$^+$CD36$^+$ Cell Isolation

Whole bone marrow was flushed from the hind limbs of 6-8-week-old male and female C57Bl6/J mice

(n=3 per sex) and red blood cells were lysed with 1X RBC lysis buffer as described above. Nucleated cells

from whole bone marrow were pelleted at 1000 rpm for 5 minutes, and the supernatant was removed

and discarded. Nucleated cells were divided into two subsets, one for isolation of all CD11B$^+$ cells within

the bone marrow and the other for isolation of CD11B$^+$/CD36$^-$ and CD11B$^+$/CD36$^+$ cells. Cells were counted

and pelleted at 1000 rpm. Nucleated cells within the pellet were suspended in 100 µl MACS Buffer per

1x10^7. For isolation of CD36$^+$ cells, cells were then incubated with Allophycocyanin (APC)-conjugated anti-

CD36 (10 µl per 1x10^7 cells, Miltenyi Biotech, #130-122-085) antibodies for 10 minutes at 4C. Cells were

pelleted, washed, suspended in 1X MACS buffer (80 µl per 1x10^7 cells) and incubated with anti-APC

microbeads (20 µl per 1x10^7 cells, Miltenyi Biotech, #130-090-855) for 15 minutes at 4C. Cells were

washed and then suspended in 500 µl MACS buffer. An LS MACS separation column was placed within

the magnetic field of a MACS Separator magnet and the column was equilibrated with 3 ml MACS buffer.

Following equilibration, anti-APC microbead-labeled cells were applied to the LS column. The column was

washed 3X with 3 ml MACS buffer. Unbound cells were used to isolate CD11B$^+$CD36$^-$ cells. To isolate APC-

labeled cells, the column was removed from the magnet and cells were flushed from the column with 5

ml 1X MACS buffer. Eluted cells were then pelleted at 1000 rpm for 5 minutes, and the supernatant was

removed and discarded. To isolate CD11B$^+$ cells from each of the three fractions (e.g., whole bone marrow,

CD36$^-$ cells, and CD36$^+$ cells), cells were then suspended in 100 µl 1X MACS Buffer per 1x10^7 cells and

incubated with phycoerythrin (PE)-conjugated anti-CD11B (10 µl per 1x10^7 cells, Miltenyi Biotech, #130-

113-235) for 10 minutes at 4C. Cells were washed, suspended in MACS buffer (80 µl per 1x10^7 cells), and

incubated with anti-PE microbeads (20 µl per 1x10^7 cells, Miltenyi Biotech, #130-048-801) for 15 minutes

at 4C. Magnetic sorting for PE-labeled cells was accomplished as described above. To validate effective

sorting of CD36$^+$CD11B$^+$ cells via MACS, flow cytometry was performed (n=3). For flow cytometry analysis,

we prepared single stained controls and double stained sample with unsorted nucleated cells with PE-

conjugated anti-CD11B, APC-conjugated anti-CD36, or co-stained with anti-CD11B and anti-CD36

antibodies (1x10^6 cells per condition), respectively. Data were acquired on a BD LSR II (H1010) and

analyses were performed using BD FACSDiva^{TM} software.

Culture of CD36$^+$CD11B$^+$ cells

MACS sorted CD11B$^+$, CD11B$^+$/CD36$^-$ and CD36$^+$/CD11B$^+$ cells were isolated via MACS and cultured at a

density of density of 0.26x10^6 per cm^2 in α-Minimal Essential Medium supplemented with 50 ng/ml

recombinant mouse macrophage-colony stimulating factor (M-CSF) (#416-ML, R&D Systems,

Minneapolis, MN, USA). Cells were maintained in culture and supplemented with M-CSF for 7 days or until

adherent. Medium conditioned by each cell fraction was then collected, filtered with a 70 µm filter to

remove cellular debris, and stored at -80C before subsequent analyses. Cells were lysed in TriZol reagent

(ThermoFisher Scientific, #15596018) for gene expression analyses. For osteoclastogenesis experiments,

cells from each fraction were plated at a density of 0.4x10^6/cm^2 in αMEM supplemented with 90 ng/ml

RANKL (R&D Systems, #462-TR-010) and 50 ng/ml M-CSF. Cells were refed with αMEM supplemented

with RANKL and M-CSF every other day for seven days, fixed with 10% neutral buffered formalin, and

TRAP stained using the Leukocyte Acid Phosphatase (TRAP) kit (Sigma-Aldrich, #387A-1KT).

RNA Isolation and Semi-quantitative RT-PCR

Total RNA was extracted from human macrophages using TRIzol and chloroform. Reverse transcription

using the iScript™ Reverse Transcription Supermix (Biorad, #1708841) using 1 µg of total RNA was used to

generate cDNAs. Gene expression was then assessed via real-time PCR using gene-specific primers listed

in Table 1. Fold changes in gene expression for each sample were calculated using the $2^{-\Delta\Delta Ct}$ method

relative to control after normalization of gene-specific C_t values to Ywhaz C_t values (24, 42). Shown are

averaged data from three independent replicate experiments derived from female cultured cells.

480   **Table 1. Gene specific primers used for semi-quantitative RT-PCR.**

Target	Forward Primer	Reverse Primer
Wnt3a	5'-TGTTCTGGACAAAGCCACCC-3'	5'-AATGTCCTCACTACAGCCGC-3'
Wnt6	5'-ACTGGGGGTTCGAGAATGTC-3'	5'-TCTCTCGGATGTCCTGCTGC-3'
Wnt10b	5'-ACGCCGGGGAAGCGG-3'	5'-AGTCAGTCAGCGCCTCCAG-3'
Bmp1	5'-TGGCCATATCCAGTCTCCCA-3'	5'-TGTCGTGACGCTCAATCTCA-3'
Bmp2	5'-CTGCGGTCTCCTAAAGGTCG-3'	5'-ATGCTGAGCAGCCTCAACTC-3'

Cortical Bone Defect Generation

Single-cortex, fully stabilized, mid-diaphysis femoral defects were generated in the right femur as

previously described (24, 43). Mice in all experimental groups were given Buprenorphine SR provided

perioperatively at 0.5 mg/kg given 2-4 hours before surgery via subcutaneous injection. Mice were then

anesthetized with isoflurane and prepared for aseptic surgery. A small incision was made in the skin

overlying the right hamstring and the femoral bone shaft was exposed by blunt dissection of the

underlying muscle. A 0.7 mm diameter steel burr drill bit (#19007-07, Fine Science Tools, Foster City, CA)

and an electric drill was used to induce a single-cortex defect in the mid-diaphysis of the femur. Defects

were immediately irrigated with 1 ml sterile saline followed by incision closure. Mice were sacrificed by

carbon dioxide inhalation at postoperative day 14.

Immunohistochemistry (IHC) and TRAP Staining

Tibiae from 24-week-old female mice were collected, fixed in 10% neutral buffered formalin and then

stored in 70% ethanol. Following decalcification in 15% EDTA for 14 days, tissues were paraffin embedded

and 7 micron sections were collected. IHC staining was performed with antibodies directed to CD36

(#HPA002018, Sigma-Aldrich), or an irrelevant control. Detection was accomplished using the Mouse and

Rabbit Specific HRP/DAB (ABC) Detection IHC Kit (#ab64264, Abcam, Cabmbridge, UK). Sections were the

TRAP stained and then counterstained with Fast Green as previously described (42).

BM-MSC Isolation and measurements of proliferation and osteoblastogenesis

Bone marrow derived mesenchymal stems cells were isolated as previously described (44). Briefly, whole

bone marrow was flushed from the hind limbs of female C57Bl6/J mice. Red blood cells were lysed in 1X

RBC lysis buffer as described above. Nucleated cells were then pelleted and plated at a density of XXX in

10 cm plates. Cells were passaged five times to remove contaminating hematopoietic cells. Purity of

MSCs was assessed by flow cytometry with FITC-conjugated anti-CD90.2, anti-CD44, anti-Cd34, and anti-

Cd45 ($1x10^6$ cells per condition), respectively. Data were acquired on a BD LSR II (H1010) and analyses

were performed using BD FACSDiva^{TM} software. MSCs were then cultured at a density of XXX cells/cm2 in

CD11B$^+$, CD11B$^+$/CD36$^-$ or CD11B$^+$/CD36$^+$ conditioned medium for 24 hours. MSC proliferation was then

determined using a Cck8 assay (Cell Counting Kit, Sigma Aldrich, #96992-100TESTS-F). To asses MSC

migration, transwell assays were performed using Conrning Costar transwell assay cell culture inserts

(Sigma Aldrich, #CLS3464-12EA). Before starting the assay, the transwell were equilibrated over night with

MEM (no FBS). Next day, ST2 cells were trypsinized and collected in 0.2% FBS containing MEM. A total of

$2x10^4$ cells were seeded into the upper chamber of the transwell inserts. The lower chamber was filled

with an equal mixture of conditioned medium and MEM (10% FBS). Then, the plate was incubated for

18hrs to allow migration. Following incubation, the plate was taken out and the media was removed. The

insert was washed with 1x PBS twice. The non-migrated cells were carefully removed from the upper side

of the membrane using cotton swab and the migrated cells on the other side of the membrane was fixed

with 100% methanol, for 5 min at room temperature and stained with Giemsa stain for 10min. Excess

stain was removed by washing the chamber with distilled water and air dried. The membrane was

carefully cut out using a scalpel blade and placed on slide. The membrane was mounted on the slide using

VECTASHIELD® Antifade Mounting Medium with DAPI. Cells were visualized under the fluorescent

microscope, and five random fields per insert were counted using Image J.

Western Blotting

Cell lysates were collected in a buffered SDS solution (0.1% glycerol, 0.01% SDS, 0.1 m Tris, pH 6.8) on ice.

Total protein concentrations were obtained with the Bio-Rad D_C assay (Bio-Rad). Proteins (20 µg) were

then resolved by SDS-PAGE and transferred to a polyvinylidene difluoride membrane. Western blotting

was performed with antibodies (1:2000 dilution) for WNT6 (Thermo Fisher Scientific, #24201-1-AP), Active

β-catenin (Millipore, #05-665-25UG), β-catenin (BD Biosciences, #610153), TCF1/7 (Cell Signaling

Technology, 2203T), phospho-JNK (Cell Signaling Technology, #4668T), JNK (Cell Signaling Technology,

#9252T), NFAT1 (Cell Signaling Technology, #4389S), Histone 3 (Millipore, #05-928), and corresponding

secondary antibodies conjugated to horseradish peroxidase (HRP) (Cell Signaling Technology). Antibody

binding was detected with the Supersignal West Femto Chemiluminescent Substrate (Pierce

Biotechnology, Rockford, IL). Shown are data from averaged from three males, but studies were

performed in females (n=3 per group) in three independent replicate experiments, each containing six

pooled replicate wells per group.

CONFLICTS OF INTEREST

The authors declare no conflict of interest.

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REFERENCES

1.   Chevalley T, Rizzoli R. Acquisition of peak bone mass. Best Pract Res Clin Endocrinol Metab.
2022;36(2):101616.
2.   Demontiero O, Vidal C, Duque G. Aging and bone loss: new insights for the clinician. Ther Adv
Musculoskelet Dis. 2012;4(2):61-76.
3.   Sfeir JG, Drake MT, Khosla S, Farr JN. Skeletal Aging. Mayo Clin Proc. 2022;97(6):1194-208.
4.   Wright NC, Looker AC, Saag KG, Curtis JR, Delzell ES, Randall S, et al. The recent prevalence of
osteoporosis and low bone mass in the United States based on bone mineral density at the femoral neck
or lumbar spine. J Bone Miner Res. 2014;29(11):2520-6.
5.   Kannus P, Parkkari J, Niemi S, Palvanen M. Epidemiology of osteoporotic ankle fractures in elderly
persons in Finland. Ann Intern Med. 1996;125(12):975-8.
6.   Leibson CL, Tosteson AN, Gabriel SE, Ransom JE, Melton LJ. Mortality, disability, and nursing home
use for persons with and without hip fracture: a population-based study. J Am Geriatr Soc.
2002;50(10):1644-50.
7.   Magaziner J, Lydick E, Hawkes W, Fox KM, Zimmerman SI, Epstein RS, et al. Excess mortality
attributable to hip fracture in white women aged 70 years and older. Am J Public Health.
1997;87(10):1630-6.
8.   Magaziner J, Simonsick EM, Kashner TM, Hebel JR, Kenzora JE. Predictors of functional recovery
one year following hospital discharge for hip fracture: a prospective study. J Gerontol. 1990;45(3):M101-
7.
9.   Riggs BL, Melton LJ, 3rd. The worldwide problem of osteoporosis: insights afforded by
epidemiology. Bone. 1995;17(5 Suppl):505S-11S.
10.   Clarke B. Normal bone anatomy and physiology. Clin J Am Soc Nephrol. 2008;3 Suppl 3(Suppl
3):S131-9.
11.   Ramchand SK, Seeman E. The Influence of Cortical Porosity on the Strength of Bone During Growth
and Advancing Age. Curr Osteoporos Rep. 2018;16(5):561-72.

12.   Cosman F, Crittenden DB, Ferrari S, Khan A, Lane NE, Lippuner K, et al. FRAME Study: The
Foundation Effect of Building Bone With 1 Year of Romosozumab Leads to Continued Lower Fracture Risk
After Transition to Denosumab. J Bone Miner Res. 2018;33(7):1219-26.
13.   Graeff C, Campbell GM, Pena J, Borggrefe J, Padhi D, Kaufman A, et al. Administration of
romosozumab improves vertebral trabecular and cortical bone as assessed with quantitative computed
tomography and finite element analysis. Bone. 2015;81:364-9.
14.   Weivoda MM, Bradley EW. Macrophages and Bone Remodeling. J Bone Miner Res.
2023;38(3):359-69.
15.   Sims NA, Martin TJ. Osteoclasts Provide Coupling Signals to Osteoblast Lineage Cells Through
Multiple Mechanisms. Annu Rev Physiol. 2020;82:507-29.
16.   Andreasen CM, El-Masri BM, MacDonald B, Laursen KS, Nielsen MH, Thomsen JS, et al. Local
coordination between intracortical bone remodeling and vascular development in human juvenile bone.
Bone. 2023;173:116787.
17.   Liu B, Salgado OC, Singh S, Hippen KL, Maynard JC, Burlingame AL, et al. The lineage stability and
suppressive program of regulatory T cells require protein O-GlcNAcylation. Nat Commun. 2019;10(1):354.
18.   Wang H, Breed ER, Lee YJ, Qian LJ, Jameson SC, Hogquist KA. Myeloid cells activate iNKT cells to
produce IL-4 in the thymic medulla. Proc Natl Acad Sci U S A. 2019;116(44):22262-8.
19.   Wang H, Hogquist KA. CCR7 defines a precursor for murine iNKT cells in thymus and periphery.
Elife. 2018;7.
20.   Faltusova K, Chen CL, Heizer T, Bajecny M, Szikszai K, Paral P, et al. Altered Erythro-Myeloid
Progenitor Cells Are Highly Expanded in Intensively Regenerating Hematopoiesis. Front Cell Dev Biol.
2020;8:98.
21.   Mohamad SF, Gunawan A, Blosser R, Childress P, Aguilar-Perez A, Ghosh J, et al. Neonatal
Osteomacs and Bone Marrow Macrophages Differ in Phenotypic Marker Expression and Function. J Bone
Miner Res. 2021;36(8):1580-93.
22.   McDonald MM, Khoo WH, Ng PY, Xiao Y, Zamerli J, Thatcher P, et al. Osteoclasts recycle via
osteomorphs during RANKL-stimulated bone resorption. Cell. 2021;184(5):1330-47 e13.
23.   Isojima T, Sims NA. Cortical bone development, maintenance and porosity: genetic alterations in
humans and mice influencing chondrocytes, osteoclasts, osteoblasts and osteocytes. Cell Mol Life Sci.
2021;78(15):5755-73.
24.   Molstad DHH, Zars E, Norton A, Mansky KC, Westendorf JJ, Bradley EW. Hdac3 deletion in myeloid
progenitor cells enhances bone healing in females and limits osteoclast fusion via Pmepa1. Sci Rep.
2020;10(1):21804.
25.   Helming L, Winter J, Gordon S. The scavenger receptor CD36 plays a role in cytokine-induced
macrophage fusion. J Cell Sci. 2009;122(Pt 4):453-9.
26.   Ambrosi TH, Marecic O, McArdle A, Sinha R, Gulati GS, Tong X, et al. Aged skeletal stem cells
generate an inflammatory degenerative niche. Nature. 2021;597(7875):256-62.
27.   Ucer S, Iyer S, Kim HN, Han L, Rutlen C, Allison K, et al. The Effects of Aging and Sex Steroid
Deficiency on the Murine Skeleton Are Independent and Mechanistically Distinct. J Bone Miner Res.
2017;32(3):560-74.
28.   Yahara Y, Ma X, Gracia L, Alman BA. Monocyte/Macrophage Lineage Cells From Fetal
Erythromyeloid Progenitors Orchestrate Bone Remodeling and Repair. Front Cell Dev Biol. 2021;9:622035.
29.   Askmyr MK, Fasth A, Richter J. Towards a better understanding and new therapeutics of
osteopetrosis. Br J Haematol. 2008;140(6):597-609.
30.   Jacome-Galarza CE, Percin GI, Muller JT, Mass E, Lazarov T, Eitler J, et al. Developmental origin,
functional maintenance and genetic rescue of osteoclasts. Nature. 2019;568(7753):541-5.
31.   Novak S, Roeder E, Kalinowski J, Jastrzebski S, Aguila HL, Lee SK, et al. Osteoclasts Derive
Predominantly from Bone Marrow-Resident CX3CR1(+) Precursor Cells in Homeostasis, whereas

Circulating CX3CR1(+) Cells Contribute to Osteoclast Development during Fracture Repair. J Immunol. 2020;204(4):868-78.

32. Xia Y, Inoue K, Du Y, Baker SJ, Premkumar Reddy E, Greenblatt MB, et al. TGFbeta reprograms TNF stimulation of macrophages towards a non-canonical pathway driving inflammatory osteoclastogenesis. Nat Commun. 2022;13(1):3920.

33. Yahara Y, Barrientos T, Tang YJ, Puviindran V, Nadesan P, Zhang H, et al. Erythromyeloid progenitors give rise to a population of osteoclasts that contribute to bone homeostasis and repair. Nat Cell Biol. 2020;22(1):49-59.

34. Kevorkova O, Martineau C, Martin-Falstrault L, Sanchez-Dardon J, Brissette L, Moreau R. Low-bone-mass phenotype of deficient mice for the cluster of differentiation 36 (CD36). PLoS One. 2013;8(10):e77701.

35. Koduru SV, Sun BH, Walker JM, Zhu M, Simpson C, Dhodapkar M, et al. The contribution of cross-talk between the cell-surface proteins CD36 and CD47-TSP-1 in osteoclast formation and function. J Biol Chem. 2018;293(39):15055-69.

36. Weivoda MM, Ruan M, Hachfeld CM, Pederson L, Howe A, Davey RA, et al. Wnt Signaling Inhibits Osteoclast Differentiation by Activating Canonical and Noncanonical cAMP/PKA Pathways. J Bone Miner Res. 2016;31(1):65-75.

37. Glass DA, 2nd, Bialek P, Ahn JD, Starbuck M, Patel MS, Clevers H, et al. Canonical Wnt signaling in differentiated osteoblasts controls osteoclast differentiation. Dev Cell. 2005;8(5):751-64.

38. Andersen TL, Sondergaard TE, Skorzynska KE, Dagnaes-Hansen F, Plesner TL, Hauge EM, et al. A physical mechanism for coupling bone resorption and formation in adult human bone. Am J Pathol. 2009;174(1):239-47.

39. Eriksen EF, Gundersen HJ, Melsen F, Mosekilde L. Reconstruction of the formative site in iliac trabecular bone in 20 normal individuals employing a kinetic model for matrix and mineral apposition. Metab Bone Dis Relat Res. 1984;5(5):243-52.

40. Lassen NE, Andersen TL, Ploen GG, Soe K, Hauge EM, Harving S, et al. Coupling of Bone Resorption and Formation in Real Time: New Knowledge Gained From Human Haversian BMUs. J Bone Miner Res. 2017;32(7):1395-405.

41. Bouxsein ML, Boyd SK, Christiansen BA, Guldberg RE, Jepsen KJ, Muller R. Guidelines for assessment of bone microstructure in rodents using micro-computed tomography. J Bone Miner Res. 2010;25(7):1468-86.

42. Mattson AM, Begun DL, Molstad DHH, Meyer MA, Oursler MJ, Westendorf JJ, et al. Deficiency in the phosphatase PHLPP1 suppresses osteoclast-mediated bone resorption and enhances bone formation in mice. J Biol Chem. 2019;294(31):11772-84.

43. McGee-Lawrence ME, Razidlo DF. Induction of fully stabilized cortical bone defects to study intramembranous bone regeneration. Methods Mol Biol. 2015;1226:183-92.

44. Jung JP, Bache-Wiig MK, Provenzano PP, Ogle BM. Heterogeneous Differentiation of Human Mesenchymal Stem Cells in 3D Extracellular Matrix Composites. Biores Open Access. 2016;5(1):37-48.

 Figure Legends

Figure 1. Generation of Bone Marrow Chimeric Mice. (A-E) Young male recipient mice were lethally

irradiated and reconstituted with T cell-depleted bone marrow (BM) from 1) young male, 2) aged male,

3) young female, or 4) aged female donor mice. Recipient mice were aged to 24-weeks for subsequent

analyses. (A) Experimental overview. (B) RNA was collected from BM and livers of chimeric mice in group

3 and expression of X- and Y-linked genes was determined via qPCR, *$p<0.05$, n=8. (C-E) Chimeric mice

in each group were collected six months post-BM transplantation. Mice were (C) photographed. (D) Body

and (E) spleen weight/body weight was assessed, *$p<0.05$. Groups: 1: young male BM, n=10; 2: aged male

BM, n=8, 3: young female BM, n=8; and 4: aged female BM, n=8

Figure 2. Transplantation of Aged Bone Marrow Enhances Cortical Bone. (A-G) Young male recipient mice

were lethally irradiated and reconstituted with T cell-depleted bone marrow (BM) from 1) young male, 2)

aged male, 3) young female, or 4) aged female donor mice. Recipient mice were aged to 24-weeks for

subsequent analyses. Non-irradiated 24-week-old males were used for comparisons. Micro-CT of the

femoral mid-shaft was performed to determine (A) cortical BV/TV, (B) cortical thickness, (C) endosteal

perimeter (Pm) and (D) reconstructions were generated. The distal femoral region was also assesse to

determine trabecular (E) BV/TV, (F) trabecular spacing, and (G) trabecular thickness. #$p< 0.05$ NI vs group

1, *$p<0.05$ vs. group 1. Groups: NI: non-irradiated control, n=10; 1: young male BM, n=10; 2: aged male

BM, n=8, 3: young female BM, n=8; and 4: aged female BM, n=8

Figure 3. Identification of Anabolic Bone Marrow Subsets. (A-R) Young male recipient mice were lethally

irradiated and reconstituted with T cell-depleted bone marrow (BM) from 1) young male or 2) aged male

donor mice. Recipient mice were aged to 24-weeks for subsequent analyses. CD11B^{+} cells were collected

from mice in groups 1 and 2 above and scRNA-Seq was performed using 10X Genomics technology.

Resulting data were integrated and comparative analyses were performed. (A) UMAP 2D representation

of CD11B^{+} clusters derived from recipient mice transplanted with aged and young bone marrow. (B-Q)

Expression of surface markers used to differentiate clusters. (R) Heatmap of top differentially expressed

genes from mice in group 2 vs 1 in clusters 14-16 across all clusters.

Figure 4. Identification of Anabolic Bone Marrow Subsets. (A-S) Young male recipient mice were lethally

irradiated and reconstituted with T cell-depleted bone marrow (BM) from 1) young female or 2) aged

female donor mice. Recipient mice were aged to 24-weeks for subsequent analyses. CD11B$^+$ cells were

collected from mice in groups 1 and 2 above and scRNA-Seq was performed using 10X Genomics

technology. Resulting data were integrated and comparative analyses were performed. (A) UMAP 2D

representation of CD11B$^+$ clusters derived from recipient mice transplanted with aged and young bone

marrow. (B-Q) Expression of surface markers used to differentiate clusters. (R) Heatmap of top

differentially expressed genes from mice in group 2 vs 1 in clusters 14-16 across all clusters.

Figure 5. Single cell RNA-Seq of CD11B$^+$ cells from male and female bone marrow reveals subsets of

myeloid cells in aged myeloid cells that express anabolic cytokines. (A-H) CD11B$^+$ cells from the bone

marrow of 8- or 40-week-old male and female mice were collected and single cell RNA-Seq was

performed. (A) UMPA representation of data obtained from 8-week-old males. (B) Heatmap and

hierarchical clustering of differentially expressed genes from clusters yielded from 8-week-old male data.

(C) UMPA representation of data obtained from 8-week-old females. (D) Heatmap and hierarchical

clustering of differentially expressed genes from clusters yielded from 8-week-old female data. (E) UMAP

representation of data obtained from 40-week-old males. (F) Heatmap and hierarchical clustering of

differentially expressed genes from clusters yielded from 40-week-old male data. (G) UMPA

representation of data obtained from 40-week-old females. (H) Heatmap and hierarchical clustering of

differentially expressed genes from clusters yielded from 40-week-old female data.

Figure 6. CD36$^+$ cells associate with sites of cortical bone regeneration, but are not osteoclast

progenitors. (A) Immunohistochemical staining for CD36 of paraffin sections from uninjured 12-week-old

females (upper panels) or cortical bone defects (lower panels). Sections are counterstained with TRAP

(purple) and fast green (n=5/group). BM: bone marrow, CB: cortical bone, OC: osteoclast (B) CD11B$^+$CD36$^-$

and CD11B$^+$CD36$^+$ BM cells were isolated and cultured in the presence of RANKL and M-CSF. TRAP staining

was performed on day 4 (n=3).

Figure 7. CD11B$^+$CD36$^+$ Cells Promote Bone Formation CD11B+CD36+ cell promote bone formation. (A)

Flow cytometry. CD11b+CD36- and CD11b+CD36+ cells were sorted and gene expression was evaluated

by qPCR (B-F) and western blotting (G), n=3, *p* values as shown. (H) Experimental design for (I-Q)

Oseoprogenitor cells were treated with CM for 24 hours and (I) Cck8 and (J) transwell assays were

performed. (K-Q)) Osteoprogenitor cells were treated with CM for 8 weeks and Alizarin Red staining (K)

was performed and quantified (L), n=3, p values as shown. RNA was collected and gene expression (M-Q)

was assessed by qPCR, n=3 , p values as shown. (R) Osteoprogenitor cells were treated with CM for 60

minutes and western blotting was performed (n=3).

Figure 8. CD36$^+$ Cells Associate with Sites of Bone Remodeling. Figure 9. Identification of human BM

macrophage subsets. CD11B$^+$ cells were collected from the BM aspirate of a 45-year-old female and

scRNA-Seq was performed using 10X Genomics technology. (A) UMAP 2D representation of CD11B$^+$

clusters. (B-Q) Expression of surface markers used to differentiate clusters. Violin plots of CD36 (R) and

Wnt6 (S) expression.

Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6

Figure 7

Figure 8