**Short Communication** 

## Epigenetic Regulation of Bone Remodeling: The Role of DNA Methylation in Osteoblast-Osteoclast Coupling

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## DESCRIPTION

Bone remodeling represents a tightly regulated process involving the coordinated activities of bone-forming osteoblasts and bone-resorbing osteoclasts, with epigenetic mechanisms playing increasingly recognized roles in controlling this cellular coupling. DNA methylation, one of the most extensively studied epigenetic modifications, emerges as a critical regulator of gene expression programs that govern osteoblast and osteoclast differentiation, function, and intercellular communication during bone remodeling cycles [1,2].

The process of bone remodeling occurs through sequential phases of activation, resorption, reversal, and formation, collectively known as the bone remodeling cycle. This process is initiated by signals that recruit osteoclast precursors to specific bone surfaces, where they differentiate into multinucleated osteoclasts capable of resorbing mineralized matrix [3]. Following resorption, osteoblasts are recruited to the resorption site to deposit new bone matrix, completing the remodeling cycle. The temporal and spatial coordination of these cellular activities is governed by complex molecular mechanisms, including epigenetic regulation through DNA methylation patterns [4].

DNA methylation involves the addition of methyl groups to cytosine residues in Cytosine-Guanine dinucleotides (CpG sites), catalyzed by DNA Methyltransferases (DNMTs). In mammals, three main DNMTs have been identified: DNMT1, responsible for maintaining methylation patterns during DNA replication, and DNMT3A and DNMT3B, which establish de novo methylation patterns [5]. The methylation status of gene promoters and regulatory regions directly influences chromatin structure and transcriptional accessibility, with hypermethylation typically associated with gene silencing and hypomethylation with gene activation.

During osteoblast differentiation, dynamic changes in DNA methylation patterns occur at key regulatory loci controlling osteogenic gene expression. The *RUNX2* gene, encoding the master transcription factor for osteoblast differentiation, undergoes progressive demethylation at its promoter region during the commitment of mesenchymal stem cells to the

osteoblast lineage [6]. This demethylation is mediated by Ten-Eleven Translocation (TET) enzymes, which oxidize 5-methylcytosine to 5-hydroxymethylcytosine and its derivatives, ultimately leading to passive or active demethylation. The demethylated *RUNX2* promoter becomes accessible to transcriptional machinery, enabling the expression of downstream osteogenic genes including alkaline phosphatase, osteocalcin, and collagen type I.

The Bone Morphogenetic Protein (BMP) signaling pathway, crucial for osteoblast differentiation and bone formation, is also subject to epigenetic regulation through DNA methylation. BMP2 and BMP4 promoters undergo dynamic methylation changes during osteoblast development, with demethylation correlating with increased expression levels [7]. Additionally, the methylation status of BMP response elements and SMAD binding sites influences the transcriptional response to BMP signaling, creating a complex regulatory network that fine-tunes osteoblast gene expression programs.

Osteoclast differentiation and function are similarly regulated by DNA methylation mechanisms. The *RANK* gene, encoding the receptor for RANKL and essential for osteoclast differentiation, exhibits developmental stage-specific methylation patterns in hematopoietic cells. Hypomethylation of the RANK promoter in osteoclast precursors correlates with increased RANKL sensitivity and enhanced osteoclastogenic potential. Furthermore, the expression of NFATc1, a master regulator of osteoclast differentiation, is controlled by methylation-dependent mechanisms involving the cooperation of DNMTs and chromatin remodeling complexes [8].

The coupling between osteoblast and osteoclast activities during bone remodeling is mediated by numerous signaling molecules whose expression is regulated by DNA methylation. The RANKL/RANK/OPG axis, fundamental to osteoclast regulation, involves methylation-dependent control of both RANKL and Osteoprotegerin (OPG) expression in osteoblasts and osteocytes. Under conditions favoring bone resorption, the RANKL promoter undergoes demethylation in osteoblasts, leading to increased RANKL expression and enhanced osteoclast activation. Conversely, the OPG promoter may undergo

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hypermethylation, reducing the production of this osteoclast inhibitor and further promoting bone resorption [9].

Mechanical loading influences DNA methylation patterns in bone cells, providing a mechanism by which physical stimuli can modulate gene expression and bone remodeling responses. Mechanical stress induces changes in DNMT activity and TET enzyme expression in osteoblasts and osteocytes, leading to altered methylation patterns at mechanosensitive genes. These epigenetic modifications contribute to the long-term cellular memory of mechanical stimuli and may explain the sustained effects of exercise on bone health.

Age-related changes in DNA methylation patterns contribute to the decline in bone remodeling efficiency observed in osteoporosis and other age-related bone diseases. Aging is associated with global hypomethylation and site-specific hypermethylation events in bone cells. Hypermethylation of osteogenic gene promoters in aged mesenchymal stem cells reduces their osteoblast differentiation potential, while altered methylation patterns in osteoclast-related genes may contribute to increased bone resorption. These age-related epigenetic changes represent potential therapeutic targets for preventing or reversing bone loss in elderly individuals [10]. DNA methylation represents a fundamental epigenetic mechanism that regulates bone remodeling through its control of gene expression programs in osteoblasts and osteoclasts. The dynamic nature of methylation patterns during bone cell differentiation and function provides a mechanism for fine-tuning cellular responses to developmental, mechanical, and hormonal signals.

## **CONCLUSION**

The coupling between osteoblast and osteoclast activities is partially mediated by methylation-dependent regulation of key signaling molecules, including components of the RANKL/RANK/OPG axis. Age-related changes in DNA methylation patterns contribute to the pathogenesis of osteoporosis and other bone diseases, highlighting the clinical relevance of epigenetic regulation in bone metabolism. Future research should focus on developing targeted epigenetic therapies that can selectively modulate methylation patterns at bone-relevant genes without causing global genomic instability. Understanding the interplay between DNA methylation and other epigenetic modifications in bone cells will be crucial for developing

comprehensive therapeutic strategies for bone diseases. The integration of epigenomic approaches with current bone research methodologies promises to reveal new insights into the molecular mechanisms underlying bone remodeling and provide novel targets for therapeutic intervention.

## REFERENCES

- 1. Zhao R, Yang R, Cooper PR, Khurshid Z, Shavandi A, Ratnayake J. Bone grafts and substitutes in dentistry: A review of current trends and developments. Molecules. 2021;26:3007.
- Grün P, Hatamikia S, Lakes T, Schneider B, Pfaffeneder-Mantai F, Fitzek S, et al. Volumetric measurement of manually drawn segmentations in cone beam computed tomography images of newly formed bone after sinus floor augmentation with Bovine-derived bone substitutes. J Stomatol Oral Maxillofac Surg. 2025;126:102221.
- 3. Traini T, Piattelli A, Caputi S, Degidi M, Mangano C, Scarano A, et al. Regeneration of human bone using different bone substitute biomaterials: Evaluation of biomaterials for bone regeneration. Clin Implant Dent Relat Res. 2015;17:150-162.
- Ahmad R, Abu-Hassan MI, Li Q, Swain MV. Three dimensional quantification of mandibular bone remodeling using standard tessellation language registration based superimposition. Clin Oral Implant Res. 2013;24:1273-1279.
- Sheikh Z, Sima C, Glogauer M. Bone replacement materials and techniques used for achieving vertical alveolar bone augmentation. Materials. 2015;8:2953-2993.
- Azam L, McIntosh JM. Alpha-conotoxins as pharmacological probes of nicotinic acetylcholine receptors. Acta Pharmacol Sin. 2009;30(6): 771-783.
- Gao B, Peng C, Yang J, Yi Y, Zhang J, Shi Q. Cone snails: A big store of conotoxins for novel drug discovery. Toxins. 2017;9(12):397.
- Miljanich GP. Ziconotide: Neuronal calcium channel blocker for treating severe chronic pain. Curr Med Chem. 2004;11(23): 3029-3040.
- Lebbe EK, Peigneur S, Wijesekara I, Tytgat J. Conotoxins targeting nicotinic acetylcholine receptors: An overview. Mar Drugs. 2014;12(5):2970-3004.
- 10. Baumann L, Kauschke V, Vikman A, Dürselen L, Krasteva-Christ G, Kampschulte M, et al. Deletion of nicotinic acetylcholine receptor alpha9 in mice resulted in altered bone structure. Bone. 2019;120:285-296.