# ORAL DISEASES

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## **ORIGINAL ARTICLE**

## Comparative study of gene expression during tooth eruption and orthodontic tooth movement in mice

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**OBJECTIVE:** The aim of this study was to understand tooth eruption by comparing the gene expression during tooth eruption and orthodontic tooth movement (OTM). **MATERIALS AND METHODS:** Orthodontic force was applied on maxillary molars for 2, 4, 7 and 14 days to study tooth movement. Mice at PN 0, 7, 10, 15 and 21 were fixed to observe tooth eruption. Comparative study of two procedures was assessed by haematoxylin and eosin, tartrate-resistant acid phosphatase staining and *in situ* hybridization for matrix metalloproteinase (*Mmp*)2, 13, bone sialoprotein (*Bsp*) and osteocalcin (*Ocn*).

**RESULTS:** Tartrate-resistant acid phosphatase activity and expression of *Mmp2*, *13* were obviously detectable in the compression region during OTM. They were also identified in the occlusal and apical region of alveolar bone during tooth eruption. Strong expression of *Bsp* and *Ocn* was detectable at the tension side during OTM. These genes were also expressed in the inner lateral region of alveolar bone adjacent to the tooth, but absent in the inner surface of the occlusal and root apical regions during tooth eruption.

**CONCLUSION:** The process of alveolar bone metabolism during developmental eruption and OTM shares the same mechanism. Internal force, as the orthodontic force for OTM, may be initiating factor for tooth eruption. *Oral Diseases* (2009) **15**, 573–579

**Keywords:** tooth eruption; tooth movement; orthodontic; bone remodelling; periodontal ligament

#### Introduction

Tooth eruption is a unique developmental and biological process in which the growing tooth migrates vertically

from the developing alveolar bone to the functional position in the occlusal plane. Both two opposite aspects of bone metabolism, bone formation (osteogenesis) and bone resorption (osteoclastogenesis) are required for tooth eruption. Without bone resorption, no eruption pathway forms, and the tooth cannot erupt (Wise et al, 2002a,b). Without alveolar bone formation, tooth dose not erupt either (Beertsen et al, 2002; Bartlett et al, 2003). However, the mechanisms that occur during developmental eruption have not been uncovered. Four possible mechanisms for eruption have been mentioned previously as follows: (i) root formation, which induces occlusal movement of the tooth crown; (ii) hydrostatic pressure within the periapical tissues pushing the tooth occlusally; (iii) bony remodelling and (iv) pulling of the tooth in an occlusal direction by the cells and fibres of the periodontal ligament (Ten, 1998; Craddock and Youngson, 2004). Therefore, internal force or motive force mentioned by Wise and King (2008) may be the important factor for tooth eruption.

Orthodontic tooth movement (OTM), a treatment procedure, is an external force-induced tooth movement. Orthodontics takes advantage of the physiological movement of tooth eruption in corrective treatment. On the other hand, numerous theories of tooth eruption may be due to the enormous success of orthodontics in moving teeth with force application. Understanding of the mechanism of OTM will improve the knowledge of tooth eruption. Alveolar bone responds to external mechanic force, and remodels to accommodate tooth movement (Craddock and Youngson, 2004). Bone remodelling is mediated by periodontal tissues during tooth movement, and guides the tooth movement to a new and stable position (Moxham and Berkovitz, 1995; Merzel and Salmon, 2008). Although there is a difference, it seems that the processes of eruption and OTM might be similar. However, the relationship between eruptive tooth movement and OTM has remained unclear yet, and comparative studies of these two kinds of tooth movement have seldom been reported (Wise and King, 2008). In our study, we try to compare the gene expression during two procedures to understand tooth eruption.

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The direct function of osteoclasts is bone resorption. Acid phosphatase, the marker of osteoclasts can be identified by tartrate-resistant acid phosphatase (TRAP) during tooth eruption and OTM (Beertsen et al. 2002: Von et al, 2004). Degeneration of extracellular matrix is another character of bone resorption. Matrix metalloproteinases (MMPs) have been identified in periodontium or dental follicle during tooth eruption and OTM (Howard et al, 1998; Tervahartiala et al, 2000; Tsubota et al, 2002; Takahashi et al, 2003, 2006; Luan et al, 2007). Osteoblasts are related to bone formation. Bone sialoprotein (BSP) and osteocalcin (OCN) have been shown to be specific for mineralization (Chen et al, 1992; Domon et al, 2001). In our study, we compare the TRAP activity and gene expression of Mmp2, 13, Bsp and Ocn during tooth eruption and OTM, and find that two processes share the similar osteogenetic and osteoclastogenetic gene expression patterning in the bony microenvironment. As OTM is a force-induced procedure, we suggest that internal force may be one of the initiating factors for tooth eruption during tooth and root development.

## Materials and methods

### Animals and experimental processing

C57BL6/J mice (the Jackson Laboratory, Bar Harbor, ME, USA) at postnatal day (PN) 0, 7, 10, 15, 21 and 60 were selected as experimental animals. Mice at PN 0, 7, 10, 15 and 21 were used for sagittal section processing directly. Mice at PN 60 were anesthetized with an i.p. injection of pentobarbital sodium (50 mg kg<sup>-1</sup>) during the setting and adjusting of the orthodontic appliance. According to the method described by Yoshimatsu et al (2006), the orthodontic appliance (Autho Instruments Co., Beijing, China) was inserted between the upper incisors and left first molar and fixed with a 0.1 mm stainless wire around both teeth using glass ionomer cement (Shanghai Medical Instruments Co., Ltd, Shanghai, China). The right maxillary first molar was not loaded as the control. After OTM, the maxillars were used for horizontal section process. The protocol for these animal procedures was in accordance with the regulations of Beijing Friendship Hospital and Capital Medical University.

### Tissue processing and paraffin section

All mice were killed using CO<sub>2</sub> gas. Tissues from the maxillas at PN 0, 7, 10, 15, 21 and after 2, 4, 7 and 14 days of OTM were fixed with 4% paraformaldehyde for 1 day, decalcified in 5% di-sodium EDTA for 2–4 weeks and dehydrated in a graded series of ethanol. Subsequently, tissues were embedded in paraffin, cut into 6- $\mu$ m thick sections and prepared for haematoxylin and eosin (H&E) staining, TRAP staining and *in situ* hybridization.

### H&E staining and TRAP staining

For general morphology, deparaffinized sections were stained with H&E staining using standard procedures. Detection of TRAP activity in tissue sections was carried out as previously described (Yoshimatsu *et al*, 2006). The sections were incubated in acetate buffer (pH 5.0) containing naphthol AS-MX phosphate (Sigma Chemical, St Louis, MO, USA), Fast Red Violet LB salt (Sigma) and 50 mM sodium tartrate.

## In situ hybridization

Samples from mice at PN 0, 7, 10, 15 and samples after 0, 2, 4 and 7 days of tooth movement were paraffin sectioned and mounted following standard procedures. DNA fragments of *Mmp2*, *13*, *Ocn* and *Bsp* (gifts from Dr Yang Chai, USC, USA) were subcloned in vector plasmids. Digoxigenin (DIG)-labelled sense and antisense cRNA riboprobes were synthesized using the DIG RNA Labeling Mix (Roche Molecular Biochemicals, Indianpolis, IL, USA). Paraffin-embedded sections were dewaxed and treated with proteinase K ( $20 \ \mu g \ ml^{-1}$ ), 0.2 M HCl, acetylated and hybridized overnight at 55°C with DIG labelled probes.

## Results

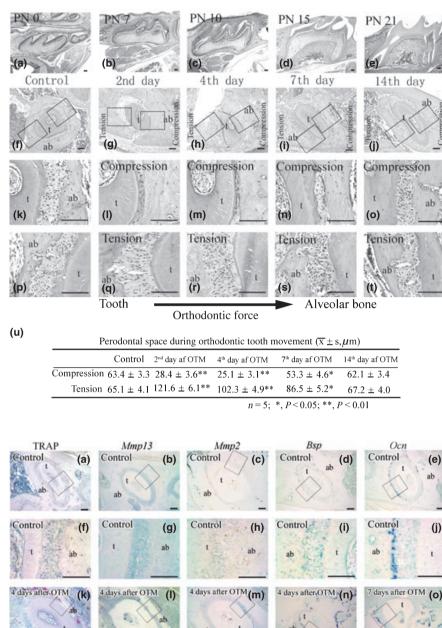
# Histological changes in the periodontium after eruptive and OTM

Following root development, the mouse tooth erupts after birth (PN 0) (Figure 1a). Tooth root begins to develop and tooth erupts occlusally at PN 7 (Figure 1b). After PN 7, the tooth continues to erupt and begins to destroy the integrity of alveolar bone at PN 10 (Figure 1c). The tooth erupts into oral cavity at PN 15 (Figure 1d). Root elongation and eruption are almost completed by PN 21 (Figure 1e). During OTM, the periodontal space narrowed on the compression side (mesial side) (Figure 1k–o, u) and became wider on the tension side (distal side) (Figure 1p–u). The periodontal ligament (PDL) on the compression side became an interrupted and acellular structure with hyalinization, but recovered after 14 days of OTM (Figure 1f–u).

## Changes of TRAP activity and gene expression during OTM

During the OMT, acid phosphatase, detected by TRAP staining as the chemical marker of osteoclasts, was seldom expressed in periodontium in control (Figure 2a,f). TRAP activity began to be obviously observed on the alveolar bone surface in the compression region on day 4 after OMT (Figure 2k,p, indicated by arrows); however, no activity was observed on the inner bone surface of tension region (Figure 2k). MMP plays an important role in several collagen degradative processes which result in remodelling of hard tissue-soft tissue interfaces (Delaissea et al, 1993; Holmbeck et al, 1999). Mmp2 and 13 began to be detectable in the alveolar bone surface of the compression region on day 4 after OTM (Figure 2l,m,q,r, indicated by arrows). However, they were absent in tension side and in the control (Figure 2b,c,g,h,l,m). Bsp and Ocn are markers of osteoblast. On day 4 after OTM, expression of Bsp, which were first identified in the tension side, was stronger than that of the controls (Figure 2d,i,n,s, indicated by arrows). Ocn expression was decreased

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4 days after OTM

(q)

Tooth

4 days after OTM

Orthodontic force

(r)

Figure 1 Histological changes in the periodontium during OTM and tooth eruption. The mouse tooth was embedded in alveolar bone after birth (a). Tooth developed roots and began to erupt occlusally at PN 7 (b). At PN 10, the tooth continued to erupt and began to destroy the integrity of alveolar bone (c). The tooth erupted into oral cavity at PN 15 (d). At PN 21, the whole crown of the upper first molar erupted into the oral cavity (e). During OTM, the periodontal space narrowed on the compression side (f-o) and became wider on the tension side (p-t). The PDL on the compression side became an interrupted and acellular structure with hyalinization  $(\mathbf{l}, \mathbf{m})$  under the orthodontic force. The periodontal space and histological structure began to recover after 14 days (**j**, **o**, **t**, **u**). The direction of tooth movement caused by orthodontic force was toward the mesial side (indicated by an arrow at the bottom of the figures). ab, alveolar bone; t, tooth. Scale bars =  $100 \ \mu m$ 

Figure 2 Changes of TRAP activity and gene expression during OTM. TRAP positive cells were seldom expressed in periodontium in control (a, f). TRAP activity was obviously observed on the alveolar bone surface in the compression region on day 4 after OMT (k and p, indicated by arrows), but not on the bone surface in the tension region (k). Mmp2 and 13 began to be detected in the alveolar bone surface of the compression region on day 4 after OTM (l, m, q, r, indicated by arrows). However they were absent in tension side and in the control (**b**, **c**, **g**, **h**, **l**, **m**). On days 4 and 7, Bsp and Ocn, first identified after OTM, were strongly expressed in the tension site (d, e, i, j, n, o, s, t, r, indicated by arrows). Bsp and Ocn expression were not detectable in compression side (n, o). The direction of tooth movement caused by orthodontic force was toward the mesial side (indicated by an arrow at the bottom). ab, alveolar bone; t, tooth. Scale bars =  $100 \ \mu m$ 

after OTM (data not shown), however, began to be expressed strongly in tension site on day 7 (Figure 2e,j,o,t, indicated by arrows). *Bsp* and *Ocn* expression was not detectable in compression side (Figure 2n,o).

## Changes of TRAP activity and gene expression during tooth eruption

At PN 0, TRAP positive cells can be identified on the surface of the alveolar bone around the tooth (Figure 3a,f,k,p, indicated by arrows). *Mmp2* and *13*, like TRAP activity, were also detected in the alveolar bone around the tooth (Figure 3b,c,g,h,l,m,q,r, indicated by arrows). Expression of *Bsp* and *Ocn* was also detectable, but absent on the inner surface of the alveolar bone (Figure 3d,e,i,j,n,o,s,t, indicated by arrows).

At PN 7 and PN 10, TRAP positive cells could be detectable in the occlusal and apical part of the alveolar bone around the tooth (Figures 4a,f,p and 5a,f,p, indicated by arrows), however, absent on the inner

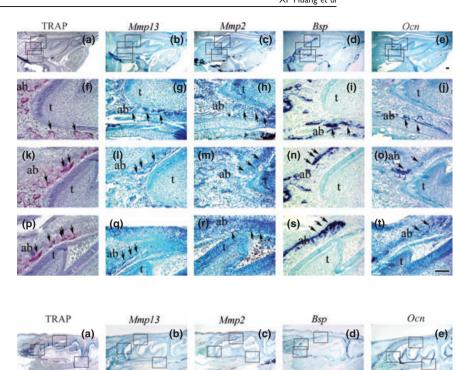
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days after OTM (t)

(s)

Alveolar bone

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(m)

ab

(s)

**Figure 3** Changes of TRAP activity and gene expression at PN 0. At PN 0, TRAP positive cells could be identified on the surface of the alveolar bone around the tooth (**a**, **f**, **k**, **p**, indicated by arrows). *Mmp2* and *13* were also detected in the alveolar bone around the tooth (**b**, **c**, **g**, **h**, **l**, **m**, **q**, **r**, indicated by arrows). *Bsp* and *Ocn* expression was also detectable, but absent in the inner surface the alveolar bone (**d**, **e**, **i**, **j**, **n**, **o**, **s**, **t**, indicated by arrows). ab, alveolar bone; **e**, enamel; am, ameloblast. Scale bars = 100  $\mu$ m

Figure 4 Changes of TRAP activity and gene expression at PN 7. At PN 7, TRAP positive cells were found in the occlusal and apical part of the alveolar bone around the tooth (a, f, p, indicated by arrows), however, absent on the inner lateral surface of alveolar bone (k). Mmp2 and 13 were also detected in the (0)occlusal and apical part of the alveolar bone around the tooth (g, h, q, r, indicated by arrows), but not lateral sides (I, m). The expression of Bsp and Ocn was absent on the inner surface of occlusal and root apical alveolar bone (i, j, s, t), however, they were expressed strongly on the inner surface of lateral sites (n, o, indicated by arrows). ab, alveolar bone; e, enamel; am, ameloblast. Scale bars =  $100 \ \mu m$ 

lateral surface of alveolar bone (Figures 4k and 5k). *Mmp2* and *13* were also detected in the occlusal and apical part of the alveolar bone around the tooth (Figures 4g,h,q,r and 5g,h,q,r, indicated by arrows), but not lateral sides (Figures 4l,m and 5l,m). The expression of *Bsp* and *Ocn* was absent on the inner surface of occlusal and root apical alveolar bone (Figures 4i,j,s,t and 5i,j,s,t); however, they were expressed strongly on the surface of lateral alveolar bone (Figures 4n,o and 5n,o, indicated by arrows).

At PN 15, tooth erupts into oral cavity and occlusal alveolar bone is disappeared. TRAP positive cells could be identified in apical two-third of the alveolar bone around the tooth (Figure 6a,f,k,p, indicated by arrows), but absent on the inner surface of occlusal one-third of the bone (Figure 6p). *Mmp2* and *13* were also detected in the apical two-third of the alveolar bone (Figure 6g,h,l,m,q,r, indicated by arrows), but absent on the inner surface of one-third of occlusal bone (Figure 6q,r). On the contrary, the expression of *Bsp*  and *Ocn* was detectable on the inner surface of onethird occlusal alveolar bone (Figure 6s,t, indicated by arrows); however, absent on the other surface of alveolar bone around tooth (Figure 6i,j,n,o).

## Discussion

The procedure of tooth eruption is accompanied with jaw and root development and becomes complicated. One of the possible factors for tooth eruption is motive force or internal force during root development (Van and McMinn, 1972; Craddock and Youngson, 2004; Wise and King, 2008). However, it has not been known where the initiating force comes from and how the force induces tooth eruption till now. OTM is a treatment procedure, simply induced by mechanical force. It is not difficult to control the orthodontic force and its direction. Comparative study of two processes may help to understand the mechanism of tooth eruption. Modelling and remodelling of the periodontium, especially the

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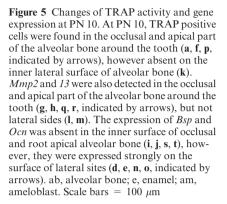
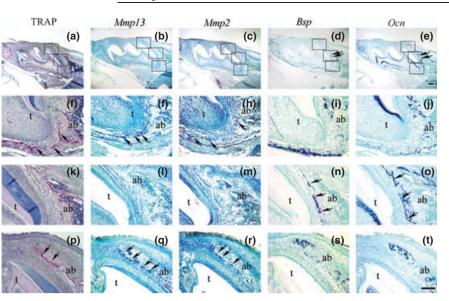


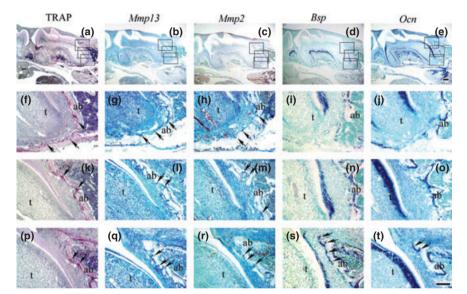
Figure 6 Changes of TRAP activity and gene expression at PN 15. At PN 15, occlusal alveolar bone was disappeared. TRAP positive cells could be identified in apical two-third of the alveolar bone around the tooth (a, f, k, p, indicated by arrows), however, absent on the inner surface of occlusal one-third site (p). Mmp2 and 13 were also detected in apical two-third of the alveolar bone (g, h, l, m, q, r, indicated by arrows), but not on the inner surface of occlusal one-third part (q, r). The expression of Bsp and Ocn was detectable on the inner surface of one-third occlusal alveolar bone (s, t), however, absent in the other surface of alveolar bone around tooth (i, j, n, o, indicated by arrows). ab, alveolar bone; e, enamel; am, ameloblast. Scale bars =  $100\mu m$ 

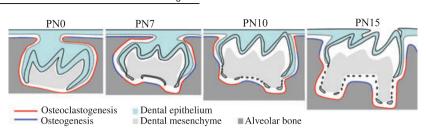
PDL and alveolar bone, are essential for tooth movement. Molecules, such as osteoprotegerin, RANKL-RANK system, tumour necrosis factor, interleukin, etc. are related to OTM (Alhashimi *et al*, 2001; Oshiro *et al*, 2002; Tuncer *et al*, 2005; Bletsa *et al*, 2006). After getting the information from OTM, the expression of the same molecules is also detectable during eruptive tooth movement (Wise *et al*, 2000, 2005; Heinrich *et al*, 2005; Liu *et al*, 2005, 2006). The similar fundamental biological processes indicate that they may share the same mechanism for bone metabolism (Wise and King, 2008).

Our study demonstrates that site-specific bone resorption is mediated by ostoeclasts and gene expression of *Mmp2* and *13* during OTM. *In situ* hybridization also showed distinct special patterns of *Bsp* and *Ocn* in the orthodontic tension region of the PDL for bone formation. Then, we observed the *Mmp2*, *13*, *Bsp* and

Ocn expression during tooth eruption. From PN 0 to 15, distinct special expression patterns of Mmp2 and 13 were also consistent with the expression of acid phosphatase, the marker of osteoclasts. We also found that Bsp and Ocn were strongly expressed on the inner surface of the lateral region of alveolar bone without TRAP activities, suggesting that bone formation, as well as bone resorption, is important for tooth eruption (Beertsen et al, 2002; Bartlett et al, 2003). After tracing osteogenesis and osteoclastogenesis of alveolar bone, we describe bone metabolism during tooth eruption as follows: tooth is embedded in alveolar bone after birth and bone resorption is observed around the tooth; at PN 7, alveolar bone is still intact around the tooth and bone resorption is found on the inner surface of occlusal and apical alveolar bone adjacent to the tooth and bone formation in the lateral sides; at PN 10, parts of occlusal alveolar bone are destroyed and bone resorption and







**Figure 7** Osteogenesis and osteoclastogenesis during tooth eruption. Tooth is embedded in alveolar bone at PN 0, and bone resorption is observed around the tooth (red line). At PN 7, alveolar bone is still intact around the tooth. There is bone resorption on the inner surface of occlusal and apical alveolar bone adjacent to the tooth (red line) and bone formation in the lateral parts of alveolar bone (blue line). At PN 10, parts of occlusal alveolar bone are destroyed and bone resorption and bone formation is as same as PN7. At PN 15, occlusal alveolar bone are destroyed completely and bone resorption is found in the apical two-third of alveolar bone (red line) and bone formation in the occlusal one-third of alveolar bone and also furcation region around the tooth (blue line)

formation is as same as PN 7; at PN 15, occlusal alveolar bone are destroyed completely and bone resorption is found in the apical two-third of alveolar bone and bone formation in the occlusal one-third of alveolar bone and furcation region around the tooth (Figure 7).

Bones turn over by two distinct and related processes: modelling and remodelling (Frost, 2001; Wise and King, 2008). Bone remodelling is a cyclic process that is a response to the need for continuous repair and renewal of the skeleton throughout life. A remodelling cycle has four phases: activation, resorption, reversal and formation (Frost, 2001). This sequence of events is widely accepted as the way that the skeleton repairs. The histological events in compression sites in OTM are consistent with a remodelling cycle (King et al, 1991). Bone modelling is characterized by either bone formation or resorption that is sustained over a specific period of time during skeletal development, where individual bones move in relation to each other and change shape (Wise and King, 2008). The intra-osseous phase at the apical, occlusal and furcation sites of alveolar bone during tooth eruption can be considered to be primarily a process of alveolar bone modelling (Figure 7). However, at the lateral site, bone formation and bone resorption can be found at different stage. Accommodation of the tooth shape during eruption movement might be one of the reasons.

In summary, after comparing the TRAP activity and gene expression during OTM and tooth eruption, we conclude that the process of alveolar bone moulding and remodelling during these two kinds of tooth movement is similar: recruitment of osteoclasts and expression of Mmp2 and 13 for bone resorption and expression of Bsp and Ocn for bone formation. Our survey may be useful for a better understanding of bone modelling and remoulding in the process of tooth eruption during tooth and jaw development, and helpful for dentists to provide the most appropriate care in clinic.

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### **Conflicts of interest**

There is no conflicts of interest.

#### Author contributions

Xiaofeng Huang, the corresponding author, designed the research and performed animal experiment. Yibing Zhao prepared the samples and performed the staining. Fangming Zhang and Peiyan Han helped with the experiment.

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