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## Loss of parathyroid hormone receptor signaling in osteoprogenitors is associated with accumulation of multiple hematopoietic lineages in the bone marrow

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### Abstract

Osteoblasts and their progenitors play an important role in the support of hematopoiesis within the bone marrow microenvironment. We have previously reported that parathyroid hormone receptor (PTH1R) signaling in osteoprogenitors is required for normal B cell precursor differentiation, and for trafficking of maturing B cells out of the bone marrow. Cells of the osteoblast lineage have been implicated in the regulation of several other hematopoietic cell populations, but the effects of PTH1R signaling in osteoprogenitors on other maturing hematopoietic populations have not been investigated. Here we report that numbers of maturing myeloid, T cell, and erythroid populations were increased in the bone marrow of mice lacking PTH1R in osteoprogenitors (PTH1R-OsxKO mice). This increase in maturing hematopoietic populations was not associated with an increase in progenitor populations or proliferation. The spleens of PTH1R-OsxKO mice were small with decreased numbers of all hematopoietic populations, suggesting that trafficking of mature hematopoietic populations between bone marrow and spleen is impaired in the absence of PTH1R in osteoprogenitors. RNA sequencing of osteoprogenitors and their descendants in bone and bone marrow revealed increased expression of VCAM-1 and CXCL12, factors that are involved in trafficking of several hematopoietic populations.

### Keywords

PTH/Vit D/FGF23; Osteoblasts; Stromal/Stem Cells; Osteoimmunology; Genetic animal models

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#### Contributions

Experiments were conceived and designed by TK, ER, LEP and JYW. The experiments were performed by TK and CP. All authors analyzed and interpreted the data. The paper was written by TK and JYW, with input from all authors.

Disclosures: None.

## Introduction

Within the bone marrow microenvironment, parathyroid hormone (PTH) receptor signaling in the osteoblast lineage plays a crucial role in supporting hematopoiesis [1]. Activation of the PTH receptor PTH1R in mature osteoblasts in mice increases trabecular bone and osteoblast numbers, accompanied by an increase in hematopoietic stem cells (HSCs) [2]. PTH injections enhance mobilization of HSCs into peripheral blood in both mice [3] and humans [4].

We have previously reported that PTH1R signaling is required in osterix (Osx)-expressing osteoprogenitors for early B cell precursor differentiation [5, 6]. PTH1R is also required for trafficking of immature B cells out of bone marrow. In mice lacking PTH1R in Osx-expressing osteoprogenitors (PTH1R-OsxKO mice), B cells are abnormally retained in the marrow, due at least in part to increased levels of vascular cell adhesion protein 1 (VCAM-1) [5]. PTH1R is a G protein-coupled receptor, and the stimulatory heterotrimeric Gs protein is an important mediator of the anabolic bone-building effects of PTH1R signaling [7, 8]. The G<sub>s</sub>α subunit is also required in osteoprogenitors for normal B cell precursor differentiation [6].

Beyond HSCs and B cells, the osteoblast lineage influences other hematopoietic populations as well. Ablation of osteoblasts in mice leads to rapid loss of bone marrow erythroid progenitors [9], while stabilization of HIF in osteoprogenitors by conditional deletion of VHL leads to increased trabecular bone and polycythemia due to increased expression of erythropoietin in osteoblasts [10]. Ablation of mature osteocalcin-expressing osteoblasts in mice decreases T cell precursor numbers and impairs their differentiation in the thymus [11].

Expression of the G<sub>s</sub>α subunit in osteocytes regulates neutrophils via production of G-CSF [12]. However, the role of PTH1R signaling in regulating other hematopoietic populations is unknown. Here we report that myeloid, T cell, and late erythroid populations were increased in the bone marrow of PTH1R-OsxKO mice, despite a profound decrease in proliferation, while all hematopoietic populations were significantly decreased in the spleen of PTH1R-OsxKO mice. Transcriptome profiling of PTH1R-OsxKO osteoprogenitors and littermate controls revealed changes in several niche factors that may regulate trafficking of hematopoietic cells between bone marrow and spleen.

## Material and Methods

### Mice

Mice lacking PTH1R in osteoprogenitors [5] were generated by mating PTH1R<sup>fl/fl</sup> mice in which loxP sites are placed in the introns flanking the essential E1 exon [13], with Osx-GFP::Cre transgenic mice in which Cre recombinase is fused to green fluorescent protein (GFP), under the control of the promoter for osterix, a transcription factor expressed early in osteoblastogenesis [14]. PTH1R<sup>fl/fl</sup> littermates were used as controls for all experiments unless otherwise stated. Although the presence of Osx-driven Cre recombinase transgene results in mild runting, it is not associated with a hematopoietic phenotype [5]. There is no difference in phenotypes between PTH1R<sup>fl/fl</sup> and PTH1R<sup>+/+</sup> mice [5]. Genotyping was

performed on genomic DNA obtained from tail biopsies as previously described [5]. All animals were housed in Innovive recyclable individually ventilated cages in a designated pathogen-free area facility and fed irradiated mouse chow and autoclaved water. The Veterinary Service Center at Stanford University provides laboratory animal care and is administered by the Department of Comparative Medicine. The laboratory animal care program at Stanford University is fully accredited by the Association for Accreditation and Assessment of Laboratory Animal Care. All procedures were approved by the Stanford University Administrative Panel on Laboratory Animal Care.

Ai14 reporter mice have a loxP-flanked STOP cassette preventing transcription of a CAG promoter-driven red fluorescent protein variant (tdTomato), all inserted into the Gt(ROSA)26Sor locus, and were obtained from the Jackson Laboratory (stock no. 007908). Ai14 mice express robust tdTomato fluorescence following Cre-mediated recombination.

Mice lacking PTH1R in mesenchymal progenitors were generated by mating PTH1R(fl/fl) mice to transgenic mice in which Cre recombinase is driven by the leptin receptor promoter (from the Jackson Laboratory, stock no. 008320) [15, 16].

### Flow cytometry

Femur, tibia and spleen were harvested from sacrificed mice. Bone marrow (BM) hematopoietic cells were isolated by flushing, and spleen hematopoietic cells were crushed through 100  $\mu$ m cell strainers (BD Biosciences). Nucleated cells were counted in Turk's solution (Sigma-Aldrich) according to the manufacturer's protocol. Erythroid cell, including erythrocyte lineage absolute numbers were determined using Precision Count Beads (BioLegend). To obtain BM stroma cells, flushed BM was digested with 1 mg/ml collagenase IV (Gibco) and 2 mg/ml dispase II (Sigma-Aldrich) for 30 min. at 37°C. To obtain bone cells, BM-flushed bones were chopped into small pieces, then digested with 0.5 mg/ml collagenase type I and 1.5 mg/ml collagenase type II (Worthington) solution for 90 minutes at 37°C. Harvested cells were filtered through 100  $\mu$ m cell strainer and stained with antibodies (Supplementary Table 1). For intracellular Foxp3 staining cells were fixed and permeabilized using the Anti-Mouse/Rat Foxp3 Staining Set (eBioscience), then stained with APC-conjugated anti-Foxp3 antibody (eBioscience) [17]. Cells were analyzed and sorted using FACS Aria II (BD Biosciences). Data were analyzed using Flowjo software (version 10.7.1).

### Immunostaining

Femurs and spleens were freshly isolated or fixed with 4% paraformaldehyde, then embedded into super cryoembedding medium (SCEM, Section-Lab) and frozen. Sections were prepared and immunostained according to the Kawamoto method [18]. Immunofluorescence images were acquired by LSM 780 confocal microscopy and analyzed with ZEN software (Carl Zeiss). The markers and antibodies were used as follows: DAPI (Sigma-Aldrich), a DNA marker; Alexa488-conjugated anti-mouse Ter119, Alexa594-conjugated anti-mouse B220, Alexa647-conjugated Streptavidin (BioLegend); Biotin-conjugated anti-mouse Ki-67 (eBioscience); chicken anti-GFP (Aves Labs); goat anti-

CD31 (R&D Systems); CF488A-conjugated donkey anti-chicken IgY, CF647-conjugated donkey anti-goat IgG (Sigma-Aldrich).

### Colony forming assays

BM or Spleen cells were suspended in 3 mL of MethoCult SF M3436 medium (StemCell Technologies) for burst-forming unit-erythroid (BFU-E) or MethoCult M3334 (StemCell Technologies) for colony-forming unit-erythroid (CFU-E) assays, then plated into three 35-mm dishes (StemCell Technologies) and incubated in 5% CO<sub>2</sub> at 37°C. After 48 hours for CFU-E and 10 days for BFU-E, the plates were scored using an EVOS Imaging System (Thermo Fisher Scientific).

### Cell cycle analysis

Hematopoietic cells were stained with cell surface antigens, then fixed and permeabilized using Cytotfix/Cytoperm Fixation/Permeabilization Solution Kit (BD Biosciences). The cells were stained with PE-conjugated anti-mouse Ki-67 (BioLegend) and Hoechst 33342 (Sigma-Aldrich) and analyzed by FACS Aria II.

### RNA sequencing

For bulk cell RNA sequencing, total RNAs were extracted from sorted cells with the RNeasy Plus Micro Kit (Qiagen), then libraries were prepared with the SMART-Seq v4 Ultra Low Input RNA Kit for Sequencing and SMARTer ThruPLEX DNA-Seq Kit (Takara Bio). Library quality was verified using the Agilent High Sensitivity DNA Kit on Agilent's 2100 Bioanalyzer. For each library, average 350 bp fragments were sequenced using paired end reads (2 × 100 bp) on the HiSeq 4000 platform (Stanford Personalized Medicine Sequencing Core), with an average of 20 million reads per sample. Paired end sequencing reads (100bp) were generated and aligned to the mouse reference sequence NCBI Build 38/mm10 with the STAR (v2.4.2a) algorithm [19]. Normalization of RefSeq annotated gene expression level and differential expression analysis were performed using Bioconductor package DESeq2 in R (Version 3.2.2) [20]. Rlog transformed values (the regularized-logarithm transformation for count data) was calculated for each gene. Genes with False Discovery Rate (FDR) < 0.05 were defined as differentially expressed genes. Gene ontology analysis was performed at Gene Ontology Consortium (<http://geneontology.org/>). All transcriptome raw data are publicly available in the NCBI Gene Expression Omnibus (accession number GSE185944).

### Statistics

Statistical analyses were performed using two-tailed, unpaired Student's t test in GraphPad Prism 9 (GraphPad Software, San Diego, CA). Quantitative data are presented as boxplot with maximum and minimum whiskers or mean ± SEM.

## Results

### PTH1R signaling in osteoprogenitors influences maturing myeloid, T cell, and erythroid lineages

To examine the role of PTH1R signaling in skeletal and hematopoietic development, mice lacking PTH1R in *Osx*-expressing osteoprogenitors (PTH1R-*Osx*KO mice) were derived by crossing *Osx*-Cre::GFP transgenic mice with PTH1R<sup>fl/fl</sup> mice as previously described [5]. In the absence of doxycycline, the Cre recombinase is constitutively expressed in *Osx*+ osteoprogenitors throughout embryonic development. As we have previously published, conditional knockout mice were born at the expected Mendelian ratio but were smaller than control littermates and did not survive past 1 month of age, for unknown reasons. As a result all analyses were carried out before postnatal day 21 [5]. Since we have demonstrated that expression of the *Osx*-Cre::GFP transgene does not significantly impact the hematopoietic phenotype [5], PTH1R<sup>fl/+</sup> and PTH1R<sup>fl/fl</sup> littermate mice were used as controls unless otherwise specified. We have previously reported that when adjusted for decreased body weight, bone marrow cellularity is increased in PTH1R-*Osx*KO mice, while spleen cellularity and spleen weight are significantly decreased in PTH1R-*Osx*KO mice even when adjusted for decreased body weight [5].

Myeloid (B220–CD11b+CD3–Ter119–) and T cells (B220–CD11b–CD3+Ter119–) were increased in PTH1R-*Osx*KO bone marrow, while B cells (B220+CD11b–CD3–Ter119–) were decreased, and there was no change in the numbers of erythroid cells overall (B220–CD11b–CD3–Ter119+) (Figure 1A). In the spleen, all hematopoietic populations were decreased in PTH1R-*Osx*KO mice (Figure 1A). Given the dramatic decline in hematopoietic populations in the spleen, we sought to determine whether the *Osx*-Cre::GFP transgene might be ectopically expressed in the spleen at day 21. While GFP expression, which marks cells currently expressing the *Osx*-Cre::GFP transgene, is detectable in bone at day 21, no GFP is detectable in the spleen (Supplementary Figure 1).

Within the myeloid lineage, granulocyte (CD3–CD19–Ter119–CD11b+Ly6G+SiglecF–), monocyte/macrophage (CD3–CD19–Ter119–CD11b+Ly6G–SiglecF–), and eosinophil (CD3–CD19–Ter119–CD11b+SiglecF+) subpopulations were all increased in PTH1R-*Osx*KO bone marrow (Figure 1B). In the spleen granulocyte and monocyte/macrophage subpopulations were decreased in PTH1R-*Osx*KO mice (Figure 1B).

Within the T cell lineage, CD4 (CD4+CD8–Foxp3–), CD8 (CD4–CD8+Foxp3–), and regulatory T cells (CD4+Foxp3+) [21] were increased in PTH1R-*Osx*KO bone marrow (Figure 1C). In the spleen all T cell populations were decreased in PTH1R-*Osx*KO mice (Figure 1C).

Within the erythroid lineage, stage I through IV differentiating erythroblasts can be distinguished based on expression of Ter119 and progressive loss of CD71 (transferrin receptor) (Supplementary Figure 2A) [22, 23]. Stage I and stage IV erythroblasts were increased in PTH1R-*Osx*KO bone marrow (Figure 1D). In the spleen all 4 stages of erythroblasts were decreased in PTH1R-*Osx*KO mice (Figure 1D). Using another erythroid lineage phenotyping protocol that captures terminal erythroid differentiation (Supplementary

Figure 2B) [24], erythroblast stages I and IV (proerythroblasts and orthochromatic erythroblasts, respectively), and erythrocyte stages V and VI (reticulocytes and erythrocytes, respectively), were increased in PTH1R-OsxKO mice (Supplementary Figure 2C). In the spleen the numbers of all erythroblast/erythrocyte stages were decreased in PTH1R-OsxKO mice (Supplementary Figure 2C). Therefore mature myeloid, T and erythroid lineage populations were all increased in PTH1R-OsxKO bone marrow, as we have previously reported for maturing B cells [5].

To determine whether the increase in maturing hematopoietic populations in the bone marrow is associated with changes in the circulation, we assayed complete blood counts on peripheral blood from control and PTH1R-OsxKO mice. There were no differences in red blood cells (RBCs), hemoglobin or hematocrit between PTH1R-OsxKO and control mice, but mean corpuscular volume (MCV) was slightly, and significantly, decreased in PTH1R-OsxKO blood (Figure 1E). Circulating white blood cells (WBCs) were significantly decreased in PTH1R-OsxKO mice, accompanied by an increased frequency in neutrophils and a reduced frequency of lymphocytes, the latter consistent with our previous study that revealed an impaired egress of B lymphocytes from the bone marrow (Figure 1F) [5]. There was no difference in platelet counts between PTH1R-OsxKO and control mice (Figure 1G).

### Hematopoietic progenitors are unaffected

To determine whether the increase in maturing hematopoietic populations in the bone marrow is associated with an increase in progenitors, we analyzed by flow cytometry hematopoietic stem/progenitor cell populations, the majority of which are located in the center of the marrow and depleted near the bone surface [25]. We found no differences in the numbers of long-term HSCs (LT-HSC, CD150+CD48–Lin-c-kit+Sca-1+) [26], short-term HSCs (ST-HSC, CD34+Flt3–Lin-c-kit+Sca-1+) [27], lymphoid-primed MPPs (LMPP, CD34+Flt3+Lin-c-kit+Sca-1+) [28], common lymphoid progenitors (CLP, CD127+Lin-c-kit+Sca-1+) [29], common myeloid progenitors (CMP, CD34+CD16/32–Lin-c-kit+Sca-1–), megakaryocyte-erythrocyte progenitors (MEP, CD34–CD16/32–Lin-c-kit+Sca-1–), or granulocyte-monocyte progenitors (GMP, CD34+CD16/32+Lin-c-kit+Sca-1–) [30] in the bone marrow (Figure 2A). In the spleen the numbers of ST-HSC, LMPP, CLP, CMP, and MEP were all decreased in KO mice (Figure 2A).

The numbers of pre-granulocyte-monocyte progenitors (pre-GM, CD41–CD16/32–CD150–CD105–), granulocyte-macrophage progenitors (GMP, CD41–/CD150–/CD16/32+), pre-MegE (CD41–CD16/32–CD150+CD105–) and pre-CFU-E (CD41–CD16/32–CD150+CD105+) did not differ between control and PTH1R-OsxKO bone marrow [31]. There was a significant increase in the numbers of CFU-E (CD41–CD16/32–CD150–CD105+Ter119–), pro-Ery (CD41–CD16/32–CD150–CD105+Ter119+) and megakaryocyte progenitors (MkP, CD41+CD150+) in PTH1R-OsxKO bone marrow (Figure 2B). In the spleen the numbers of pre-GM, pre-MegE, pre-CFU-E, CFU-E, pro-Ery and MkP were all decreased in PTH1R-OsxKO mice (Figure 2B). In CFU assays there was no difference in CFU-E in either bone marrow or spleen (Figure 2C). There was no difference in BFU-E in bone marrow, while BFU-E are increased in KO spleen.



Unlike other hematopoietic populations, T cells are derived from bone marrow common lymphoid progenitors but mature in the thymus. We also examined T cell precursor populations in the thymus. Thymus weight, both absolute and corrected for body weight, was decreased in PTH1R-OsxKO mice (Figure 2D). Thymus cellularity was decreased but there was no difference when corrected for body weight. Within the thymus there were no differences in the numbers of any of the T cell precursors: double negative (DN, Lin-CD4-CD8-), DN1 (Lin-CD4-CD8-CD25-CD44+), DN2 (Lin-CD4-CD8-CD25+CD44+), DN3 (Lin-CD4-CD8-CD25+CD44-), DN4 (Lin-CD4-CD8-CD25-CD44-), double positive (DP, Lin-CD4+CD8+), CD4 single positive (SP, Lin-CD4+CD8-) and CD8 SP (Lin-CD4-CD8+) (Figure 2E).

### **Proliferation of hematopoietic populations is decreased**

The increase in mature populations in the bone marrow is not driven by increased numbers of progenitors. We therefore performed cell cycle analyses by flow cytometry. In the bone marrow we found a striking decrease in the proportion of cells in G2/M/S cell cycle phases in all lineages, with an increased proportion of cells in the quiescent G0 state among all populations except myeloid cells (Figure 3A). In the spleen, the proportion of cells in G2/M/S phases of the cell cycle were decreased for myeloid, T and B cell lineages. In maturing erythroblasts there was a dramatic increase in the proportion of cells in the quiescent G0 state and a decrease in the proportion of cells in G1 at all stages in the bone marrow of PTH1R-OsxKO mice. In the spleen the proportion of cells in the quiescent G0 state was increased in stage II erythroblasts while the proportion of cells in G2/M/S phases of the cell cycle was decreased in stage I-IV erythroblasts (Figure 3B).

Immunohistochemical staining of bone marrow for the proliferation marker Ki-67 in the femur confirmed a decrease in proliferating Ter119<sup>+</sup> erythroid lineage cells (Figure 3C). In the spleen there was a decrease in Ter119<sup>+</sup> and Ki-67<sup>+</sup> cells, and impaired organization of B220<sup>+</sup> B lymphoid lineage cells into follicles (Figure 3D). Therefore the accumulation of mature hematopoietic populations in the bone marrow is not due to an increase in proliferation. Instead, the proliferation of almost all hematopoietic populations is strikingly decreased in PTH1R-OsxKO bone marrow and spleen.

### **PTH1R signaling in mesenchymal stem/progenitor cells does not influence hematopoiesis**

Studies suggest that within the bone marrow microenvironment, mesenchymal stem/progenitor cells expressing leptin receptor (LepR) and osteoprogenitors expressing Osx serve distinct roles in the hematopoietic niche. For example, deletion of CXCL12 in LepR<sup>+</sup> mesenchymal progenitor cells affects hematopoietic stem/progenitor cells [32], while deletion of CXCL12 in Osx<sup>+</sup> osteoprogenitors affects CLPs and pre-pro-B cells [33]. Deletion of SCF in LepR<sup>+</sup> cells leads to loss of HSPCs, while deletion in committed osteoblasts does not [16]. We have also reported that PTH1R is required in osteoprogenitors, but not mature osteoblasts or osteocytes, for normal B cell precursor development [5].

To determine whether PTH1R is required in mesenchymal stem/progenitor cells to support maturing hematopoietic lineages, we examined PTH1R-LepRKO mice lacking PTH1R in LepR<sup>+</sup> mesenchymal stem/progenitor cells. At the beginning of the COVID-19 pandemic

as research laboratories were abruptly closed it became necessary to significantly reduce the size of our mouse colony. Due to lack of apparent phenotype (see below) the PTH1R-LepRKO line was therefore eliminated. Because we did not confirm reduced *Pth1r* expression in LepR<sup>+</sup> cells, these results are included only as supplementary data. LepR expression has been reported in murine perivascular stromal cells at 3-4 months of age [34]. We therefore examined PTH1R-LepRKO and control mice at 3 months of age and found no differences in body weight, bone marrow cellularity, spleen weight, or spleen cellularity (Supplementary Figure 3A). There was an increase only in the number of erythroid cells that is restricted to erythroblast stage IV [22, 23] in the bone marrow of KO mice (Supplementary Figure 3B), indicating that PTH1R expression in LepR<sup>+</sup> cells does not noticeably affect myeloid, or T cell populations and has minimal effects on the erythroid lineage in the bone marrow. There were no differences in hematopoietic populations in the spleen. Therefore PTH1R in LepR<sup>+</sup> stromal cells is not required for normal myeloid, B, and T lineage differentiation at 3 months.

Over time LepR<sup>+</sup> stromal cells give rise to osteoblasts in adult mice. While at 6 months of age fewer than 25% of osteoblasts are derived from LepR<sup>+</sup> precursors, by 14 months a majority (61-81%) of osteoblasts are derived from LepR<sup>+</sup> precursors [34]. The differentiation of LepR<sup>+</sup> precursors to mature osteoblasts progresses through an *Osx*-expressing stage [35]. To determine whether PTH1R in the osteoblast lineage affects hematopoiesis in older adult mice, we examined PTH1R-LepRKO mice at 12 months of age, when the majority of osteoblasts are expected to have descended from LepR-Cre cells [34]. There were no differences in body weight, bone marrow cellularity, spleen weight, or spleen cellularity between PTH1R-LepRKO and control mice (Supplementary Figure 3C). In the bone marrow there was a decrease only in the number of myeloid cells (Supplementary Figure 3D). There were no differences in other hematopoietic lineages, and the spleen was not affected. Therefore PTH1R signaling in LepR-expressing cells and their mesenchymal progeny has only a very modest effect on hematopoiesis.

### Differential expression of candidate niche factors

In PTH1R-OsxKO and PTH1R<sup>+/+</sup>; *Osx*-Cre::GFP/+ (PTH1R-OsxWT) mice, the osterix promoter drives expression of both Cre recombinase and green fluorescent protein (GFP), so GFP expression marks cells that currently express osterix. To examine the effects of loss of PTH1R in osteoprogenitors on their progeny we crossed PTH1R-OsxKO and PTH1R-OsxWT mice to Ai14 Tm<sup>+</sup> reporter mice that express robust tdTomato (Tm) fluorescence following Cre-mediated recombination, so Tm expression marks cells that have descended from *Osx*-expressing cells. Immunostaining reveals that GFP<sup>+</sup> cells were detectable in bone (bone-current, representing immature osteoprogenitors), while Tm<sup>+</sup> cells were detectable in both bone (bone-historic, encompassing mature osteoblasts, bone lining cells, and osteocytes) and bone marrow stroma (BM-historic, including perivascular mesenchymal cells) (Figure 4A). Analysis of GFP and Tm expression by flow cytometry confirmed that bone marrow contained only Tm<sup>+</sup> BM-historic cells, which were increased in PTH1R-OsxKO compared to PTH1R-OsxWT mice (Figure 4B-C). GFP<sup>+</sup> cells appeared infrequent by immunostaining in the bone, but by flow cytometry numbers of GFP<sup>+</sup> bone-current cells



were comparable to Tm<sup>+</sup> bone-historic cells in WT mice. In KO bone, the numbers of Tm<sup>+</sup> bone-historic cells were greater than GFP<sup>+</sup> bone-current cells.

To identify candidate niche factors that are differentially expressed in PTH1R-OsxKO mice we performed RNA-sequencing on osteoprogenitors and their descendants. We sorted bone-current, bone-historic and BM-historic cells from PTH1R-OsxKO and PTH1R-OsxWT mice and performed RNA-sequencing. Principal component analysis demonstrated that PC1 (encompassing 84% of variance) clearly distinguished bone-current, bone-historic, and BM-historic cells, while PC2 (7% variance) distinguished these populations by genotype (Figure 5A). This was confirmed by a heatmap which revealed clustering by cell population first with BM-historic the most distinct group, followed by genotype (Figure 5B). These data are consistent with reports that *Osx*-expressing cells give rise to distinct populations in bone and bone marrow [36].

We have previously reported that maturing B cells accumulate in the bone marrow of PTH1R-OsxKO mice due to abnormal retention, mediated at least in part by increased levels of VCAM-1 [5]. The increase in myeloid subsets, T cells, and late erythroblasts in the bone marrow despite a marked decrease in proliferation suggests that these hematopoietic populations may also be abnormally retained in the bone marrow. Inspection of RNA-sequencing data confirmed that *Pth1r* mRNA was more highly expressed in PTH1R-OsxWT populations, while *Vcam1* mRNA levels were more highly expressed in PTH1R-OsxKO populations (Figure 5C). We examined cell surface expression of VCAM-1 and its primary ligand VLA-4 by flow cytometry and found increased expression of VCAM-1 among myeloid and B lymphoid populations in the bone marrow of PTH1R-OsxKO mice (Figure 5D). Of note, VLA-4 expression was significantly decreased among T lymphoid cells in the bone marrow of PTH1R-OsxKO mice.

CXCL12 is a chemokine that also plays a significant role in trafficking of HSPCs, lymphocytes, and myeloid cells [15, 37–39]. CXCL12 is increased in the bone marrow microenvironment of mice with constitutively active PTH1R targeted to osteoblasts [2]. Surprisingly, we found that *Cxcl12* expression was increased in PTH1R-OsxKO mice (Figure 5C). Inspection of RNA-sequencing data revealed that mRNA levels of *Cxcl12* were increased in all three populations. Therefore VCAM-1 and CXCL12 are candidate mediators for the accumulation of myeloid, T, and late erythroid populations in the bone marrow of PTH1R-OsxKO mice.

We next examined the RNA-sequencing data to identify additional transcripts that are differentially expressed in each population. The top 20 niche factors upregulated in each PTH1R-OsxWT population (BM-historic, bone-current, bone-historic) are shown in Figure 6A. Several niche factors were increased in all PTH1R-OsxWT BM-historic, bone-current, and bone-historic populations, including pleiotrophin (*Ptn*), mesencephalic astrocyte-derived neurotrophic factor (*Manf*), adipolin (*C1qtnf12*), aminoacyl tRNA synthetase-interacting multifunctional protein 1 (*Aimp1*), neudessin (*Nenf*), and macrophage migration inhibitory factor (*Mif*). Adropin (*Enho*), glucose-6-phosphate isomerase 1 (*Gpi1*), interleukin 17B (*Il17b*), *Il17d* and osteocrin (*Ostn*) were increased in PTH1R-OsxWT bone-current and bone-historic populations; meteorin-like (*Metnl*), tissue inhibitor of metalloproteinase-1

(*Timp1*), and galanin (*Gal*) were increased in PTH1R-OsxWT BM-historic and bone-historic populations; and bone morphogenetic protein 7 (*Bmp7*) and ostelectin (*Oln*) were increased in PTH1R-OsxWT BM-historic and bone-current populations.

The top 20 niche factors upregulated in each PTH1R-OsxKO population (BM-H, bone-C, bone-H) are shown in Figure 6B. Vascular endothelial growth factor A (*Vegfa*), M-CSF (*Csf1*), *Bmp6*, and *Cxcl12* were increased in all PTH1R-OsxKO BM-historic, bone-current, and bone-historic populations. Angiotensinogen (*Agt*), *Bmp1*, adiponectin (*Adipoq*), transforming growth factor  $\beta$  2 (*Tgfb2*), *Bmp8a*, and heparin-binding EGF-like growth factor (*Hbegf*) were increased in PTH1R-OsxKO bone-current and bone-historic populations; stem cell factor (*Kitl*) and *Bmp4* were increased in PTH1R-OsxKO BM-historic and bone-historic populations; and *Bmp2* was increased in PTH1R-OsxKO BM-historic and bone-current populations.

## Discussion

In summary we find an increase in overall numbers of myeloid and T cells in the bone marrow of PTH1R-OsxKO mice. While there is no increase in overall erythroid cells, there is an increase in the numbers of cells at late erythroblast or erythrocyte stages. Along with our previously reported finding that maturing B cells are increased in PTH1R-OsxKO bone marrow [5], these findings indicate that maturing hematopoietic cells in multiple lineages accumulate in the bone marrow of PTH1R-OsxKO mice. This increase in numbers across multiple hematopoietic lineages occurs without any change in precursor populations and despite a dramatic decrease in proliferation. There is a striking decrease in the spleen size and cellularity of PTH1R-OsxKO mice even after correcting for reduced body weight. Together the findings suggest that trafficking of multiple hematopoietic cell lineages from bone marrow to the spleen is impaired in PTH1R-OsxKO mice. Furthermore, the migration of mature T cells from the thymus to the bone marrow, but not spleen, is increased in PTH1R-OsxKO mice.

We have previously reported that immature IgM<sup>+</sup> B cells and maturing IgM<sup>+</sup>/IgD<sup>+</sup> and IgD<sup>+</sup> B cells accumulate in PTH1R-OsxKO bone marrow due to abnormal retention mediated in part by increased expression of VCAM-1 [5]. Here we have performed RNA-sequencing on *Osx*-expressing osteoprogenitors and confirm that *Vcam1* mRNA is increased in both *Osx*-current and *Osx*-historic populations in bone and bone marrow of PTH1R-OsxKO mice. In addition to lymphocytes [40], VCAM-1 has also been implicated in the regulation of HSPCs [41] and erythrocytes [42]. By flow cytometry we also find that VCAM-1 is increased on myeloid and B cells in PTH1R-OsxKO marrow, while VLA-4, the ligand for VCAM-1, is decreased on T cells.

We have also reported that conversely PTH treatment decreases VCAM-1 expression in bone, and this contributes to the ability of PTH to inhibit breast cancer metastases to bone in mice [43]. Together these findings suggest that PTH1R signaling negatively regulates VCAM-1, although the mechanisms remain unknown. While *Vcam1* expression has been reported in osteoblasts [44, 45], a role for PTH in its regulation has not been well characterized. Although most commonly studied gene targets of PTH are positively

regulated by PTH [46], *Sost* (which encodes the Wnt inhibitor sclerostin) is the most prominent example of a gene that is potently suppressed by PTH [47, 48]. Suppression of *Sost* by PTH is mediated by the histone deacetylase HDAC5, which binds to and inhibits MEF2C activity on the *Sost* enhancer [49, 50]. HDACs have also been reported to negatively regulate *Vcam1* [51, 52]. Therefore one possible mechanism is that PTH directly inhibits *Vcam1* expression via HDACs.

An alternative possibility is that PTH1R signaling indirectly regulates VCAM-1, and candidate mechanisms include Wnt signaling and inflammation. Canonical Wnt inhibits *Vcam1* expression in marrow stromal cells [53]. Wnt signaling is stimulated by PTH1R, which inhibits the Wnt inhibitor *Sost* [48]. In endothelial cells and smooth muscle cells, VCAM-1 is induced by inflammatory mediators such as TNF- $\alpha$  and IL-1 $\beta$  [42, 54–56]. The PI3K, MAPK and NF- $\kappa$ B pathways have been implicated in the stimulation of VCAM-1 by inflammatory mediators [54, 55, 57]. Strikingly, we have found that expression of genes encoding TNF- $\alpha$  and IL-1 $\beta$  are upregulated in PTH1R-deficient osteoprogenitors (data not shown).

Another candidate mediator of BM retention of hematopoietic cells in PTH1R-OsxKO mice is CXCL12. The chemokine CXCL12 also regulates trafficking of multiple hematopoietic lineages [15, 37–39]. While CXCL12 has been reported to be positively regulated by PTH1R signaling [2], here we report that *Cxcl12* expression is unexpectedly increased in Osx-current and Osx-historic bone and bone marrow populations in PTH1R-OsxKO mice.

RNA-sequencing of osteoprogenitor populations reveals several cytokines and growth factors implicated in the hematopoietic niche that are differentially expressed in PTH1R-OsxKO and PTH1R-OsxWT mice. Several have described roles in osteogenesis including pleiotrophin [58], Timp1 [59], meteorin-like [60], ostelectin [61], adrenomedullin [62], and osteocrin [63, 64]. Particularly intriguing among these are pleiotrophin, which plays a role in bone marrow HSC maintenance [65], and ostelectin, plasma levels of which in humans correlate with hemoglobin levels [66, 67]. Ostelectin was recently reported to be induced by PTH and to partially mediate the anabolic effects of PTH on bone [68].

One of the most striking phenotypes in PTH1R-OsxKO mice is hyposplenia. The greatest reductions in spleen cellularity affect the B cell and erythroid lineages. One explanation for decreased spleen cellularity is aberrant retention in the bone marrow. We have previously shown that B cells retention in the bone marrow by VCAM-1 likely contributes to their decreased presence in the spleen, and this is consistent with the decrease in circulating lymphocytes in the blood. Interestingly, while there is an accumulation of late erythroblast stages in the marrow, there is somewhat surprisingly no difference in circulating RBCs.

In humans the spleen can support hematopoiesis under stress conditions when needed as a site of compensatory (extramedullary) hematopoiesis, for example in diseases such as myelofibrosis or osteopetrosis that impair the ability of the bone marrow to sustain hematopoiesis [69, 70]. Extramedullary hematopoiesis can also develop in the adult spleen, particularly in red pulp, in response to a variety of insults including G-CSF, bone marrow transplantation, chemotherapy, and irradiation [71]. In mice the spleen can support stress

erythropoiesis in response to acute anemia [72], and is an active site of erythropoiesis in the first weeks after birth until steady-state erythropoiesis is established in the bone marrow [73].

The findings in the spleen are in striking contrast to the thymus, where T cell precursor differentiation appears to proceed normally in PTH1R-OsxKO mice. Early T cell precursors, derived from common lymphoid progenitors, differentiate in the thymus into mature CD4 and CD8 T cells. Thymus weight and cellularity (corrected for body size) are unaffected in PTH1R-OsxKO mice. Common lymphoid progenitors are not decreased in PTH1R-OsxKO bone marrow, and differentiation of early T cell precursors appears to occur normally in both PTH1R-OsxKO and control mice. There is, however, a striking accumulation of mature CD4, CD8 and regulatory T cells within the bone marrow. Therefore lymphoid progenitors are apparently able to seed the thymus, where early precursor differentiation occurs normally, but mature T cells that circulate back to the bone marrow appear to be retained there.

The difference between thymus and spleen in PTH1R-OsxKO mice raises the possibility that there may also be intrinsic defects in the spleen microenvironment of PTH1R-OsxKO mice. In Gsa-OsxKO mice with impaired PTH1R signaling in osteoprogenitors, spleen size is markedly reduced at one week of age. While deletion of PTH1R by Osx-GFP:Cre should be limited to osteoprogenitors in the bone marrow, there remains the possibility that ectopic expression of Osx-GFP:Cre might occur in the spleen. A recent careful examination of extra-skeletal tissues revealed Osx expression in the olfactory bulb and gastric and intestinal cells, but did not examine the spleen [74]. As a surrogate marker for expression of the Cre recombinase we found no Osx-GFP expression in the spleen at 21 days of age, indicating little or no ongoing Osx promoter-driven expression in the spleen. Future lineage tracing studies with a reporter for historic Cre expression will be required to conclusively determine whether Osx is expressed in the spleen earlier in development.

Studies on the bone marrow microenvironment have demonstrated that osteoblast lineage cells at varying stages of differentiation play unique roles in supporting hematopoiesis. For example, CXCL12 and SCF are required in LepR<sup>+</sup> mesenchymal progenitors to support HSPCs [16, 32]. In contrast, CXCL12 in Osx<sup>+</sup> osteoprogenitors is required to support early B cell precursors [33]. We have published that PTH1R is required in Osx<sup>+</sup> osteoprogenitors but not maturing osteoblasts for early B cell precursor differentiation [5]. Here we report that PTH1R is not required in LepR<sup>+</sup> mesenchymal progenitors to support maturing hematopoietic populations. These are consistent with reports that LepR<sup>+</sup> stromal cells in young adult mice do not overlap with Osx<sup>+</sup> cells [35], and is further supported by recent single-cell profiling studies of the bone marrow microenvironment [75, 76]. An important caveat is that we did not confirm Cre recombinase-mediated rearrangement of the *Pth1r* floxed allele before eliminating this line during the pandemic-imposed laboratory closure.

The relevance of osteoblast support of hematopoiesis has become increasingly apparent in humans. Bone loss is a clinical feature of several diseases associated with anemia, including sickle cell disease and thalassemia [77, 78]. We have demonstrated that bone loss is associated with anemia, decreased lymphocytes, and increased neutrophils in older men

[79], and anemia is associated with an increased risk of fracture [80]. Once daily PTH administration in postmenopausal women with osteoporosis increases circulating HSCs in the blood [4].

In summary the loss of PTH1R signaling in osteoprogenitors within bone and bone marrow has a profound effect with increased hematopoietic mature populations within the bone marrow, and markedly decreased cellularity in the spleen, suggesting impaired trafficking between these organs. The mechanisms that regulate hematopoietic cell trafficking between bone marrow and spleen are poorly defined but have significant clinical relevance. Understanding these mechanisms has clinical implications for immunity, anemia, and hematopoietic malignancies.

## Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

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## Data Availability Statement:

The data that support the findings of this study are openly available in the NCBI Gene Expression Omnibus (accession number GSE185944).

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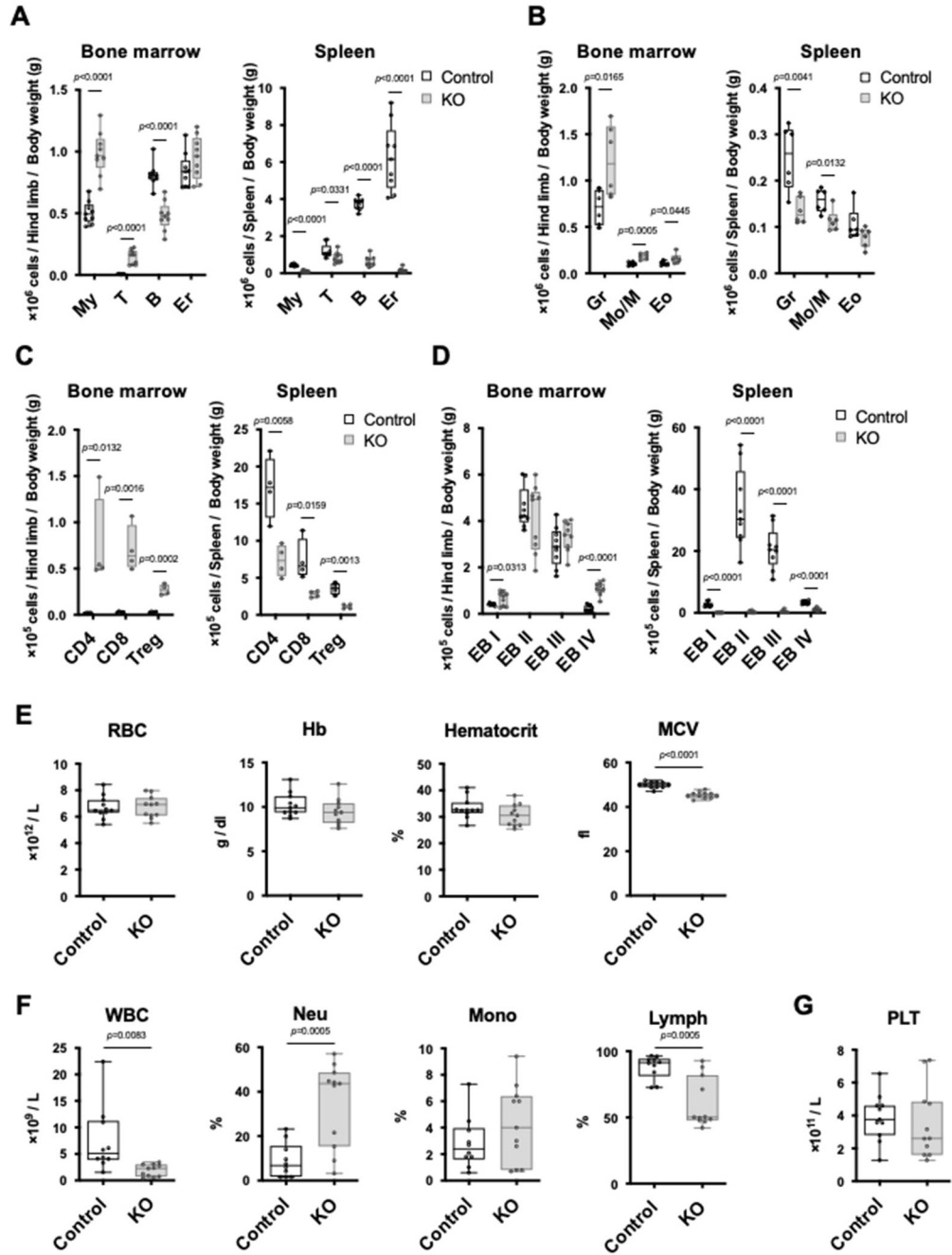
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**Figure 1.**

Deletion of PTH1R in osteoprogenitors alters the distribution of mature hematopoietic lineages at 3 weeks of age. (A) Numbers of myeloid cells (B220–CD11b+CD3–Ter119–), T cells (B220–CD11b–CD3+Ter119–), B cells (B220+CD11b–CD3–Ter119–), and erythroid cells (B220–CD11b–CD3–Ter119+) in the bone marrow (left) and spleen (right) of PTH1R-OsxKO (KO, gray) and control (black) mice (n = 9 each). (B) Numbers of myeloid granulocyte subset (CD3–CD19–Ter119–CD11b+Ly6G+SiglecF–), monocyte/macrophage subset (CD3–CD19–Ter119–CD11b+Ly6G–SiglecF–), and eosinophil subset

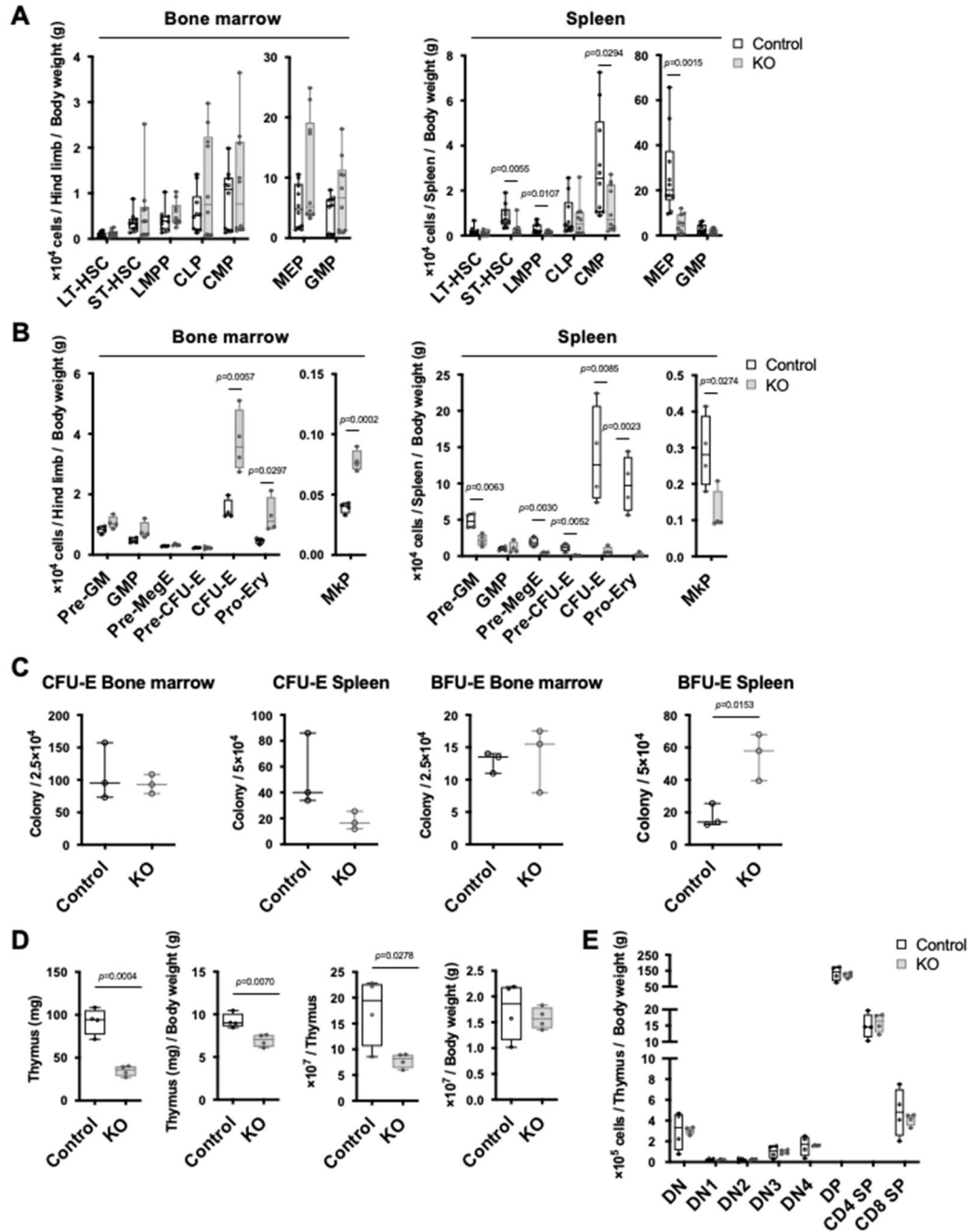
(CD3–CD19–Ter119–CD11b+SiglecF+) cells (n = 6 each). (C) Numbers of T cell CD4 (CD4+CD8–Foxp3–), CD8 (CD4–CD8+ Foxp3–), and regulatory T cell (Treg, CD4+Foxp3+) subsets (n = 4 each). (D) Numbers of erythroblast (EB) stages I through IV in bone marrow and spleen of PTH1R-OsxKO and control mice (n = 9 each). (E) Circulating white blood cells, but not red blood cells or platelets, are decreased in the peripheral blood of PTH1R-OsxKO mice. Red blood cell (RBC), hemoglobin (Hb), mean corpuscular volume (MCV), (F) white blood cell (WBC), lymphocyte (lymph), monocyte (mono), neutrophil (neu), (G) platelet (PLT) (n = 11 each).

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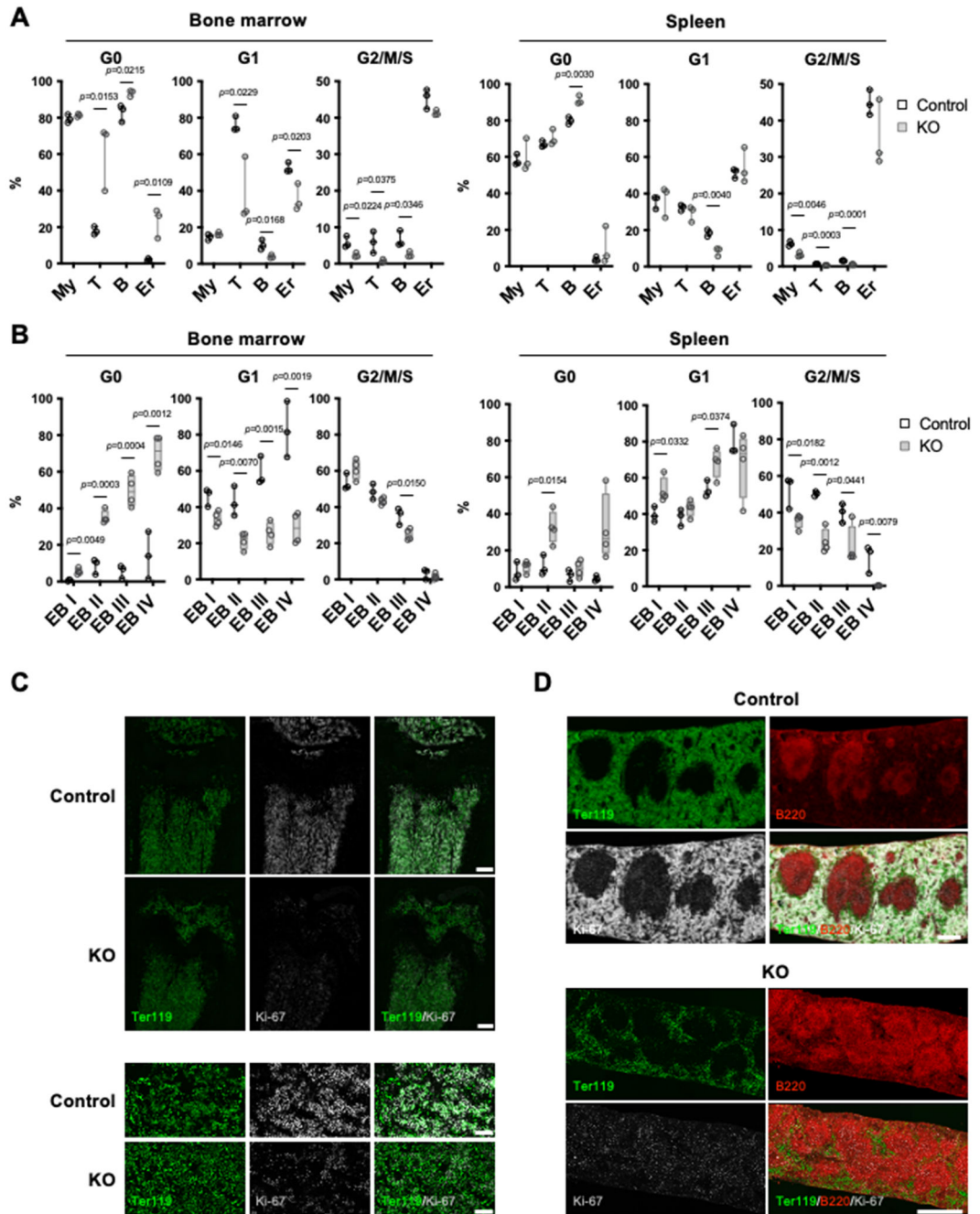


**Figure 2.**

Deletion of PTH1R in osteoprogenitors has no effect on hematopoietic stem and progenitor cells in the bone marrow. (A) Numbers of long-term HSCs (LT-HSC, CD150+CD48–Lin–c-kit+Sca-1+), short-term HSCs (ST-HSC, CD34+Flt3–Lin–c-kit+Sca-1+), lymphoid-primed MPPs (LMPP, CD34+Flt3+Lin–c-kit+Sca-1+), common lymphoid progenitors (CLP, CD127+Lin–c-kit+Sca-1+), common myeloid progenitors (CMP, CD34+CD16/32–Lin–c-kit+Sca-1–), megakaryocyte-erythrocyte progenitors (MEP, CD34–CD16/32–Lin–c-kit+Sca-1–), or granulocyte-monocyte progenitors (GMP,



CD34+CD16/32+Lin-c-kit+Sca-1-) in the bone marrow (left) and spleen (right) of KO (gray) and control (black) mice at 3 weeks of age (n = 10 each). (B) Numbers of pre-GM (CD41-CD16/32-CD150-CD105-), GMP (CD41-/CD150-/CD16/32+), pre-MegE (CD41-CD16/32-CD150+CD105-), pre-CFU-E (CD41-CD16/32-CD150+CD105+), CFU-E (CD41-CD16/32-CD150-CD105+Ter119-), pro-Ery (CD41-CD16/32-CD150-CD105+Ter119+) and MkP (CD41+ CD150+) (n = 4 each). (C) Numbers of CFU-E and BFU-E in bone marrow and spleen (n = 3 each). (D) Thymus weight (mg), thymus weight (mg) per gram body weight (g), thymus cellularity, and thymus cellularity per gram body weight in KO and control mice at 3 weeks of age (n = 4 each). (E) Numbers of T cell precursors double negative (DN, Lin-CD4-CD8-), DN1 (Lin-CD4-CD8-CD25-CD44+), DN2 (Lin-CD4-CD8-CD25+CD44+), DN3 (Lin-CD4-CD8-CD25+CD44-), DN4 (Lin-CD4-CD8-CD25-CD44-), double positive (DP, Lin-CD4+CD8+), CD4 single positive (SP, Lin-CD4+CD8-) and CD8 SP (Lin-CD4-CD8+) in the thymus of KO and control mice (n = 4 each).



**Figure 3.** Proliferation is decreased in multiple hematopoietic lineages in PTH1R-OsxKO mice. (A) Distribution of myeloid (My), T cell (T), B cell (B), and erythroid (Er) populations among cell cycle stages G0, G1, and G2/M/S in bone marrow and spleen of control (black) and KO (gray) mice at 3 weeks of age ( $n = 3$  each). (B) Distribution of erythroblast (EB) stage I through IV cells among cell cycle stages G0, G1, and G2/M/S in bone marrow and spleen of control and KO mice ( $n = 4$  each). (C) Immunostaining for Ter119 (green) and Ki-67 (white) in the bone marrow of KO and control mice at 3 weeks. Scale bar = 500  $\mu\text{m}$  (upper panels)

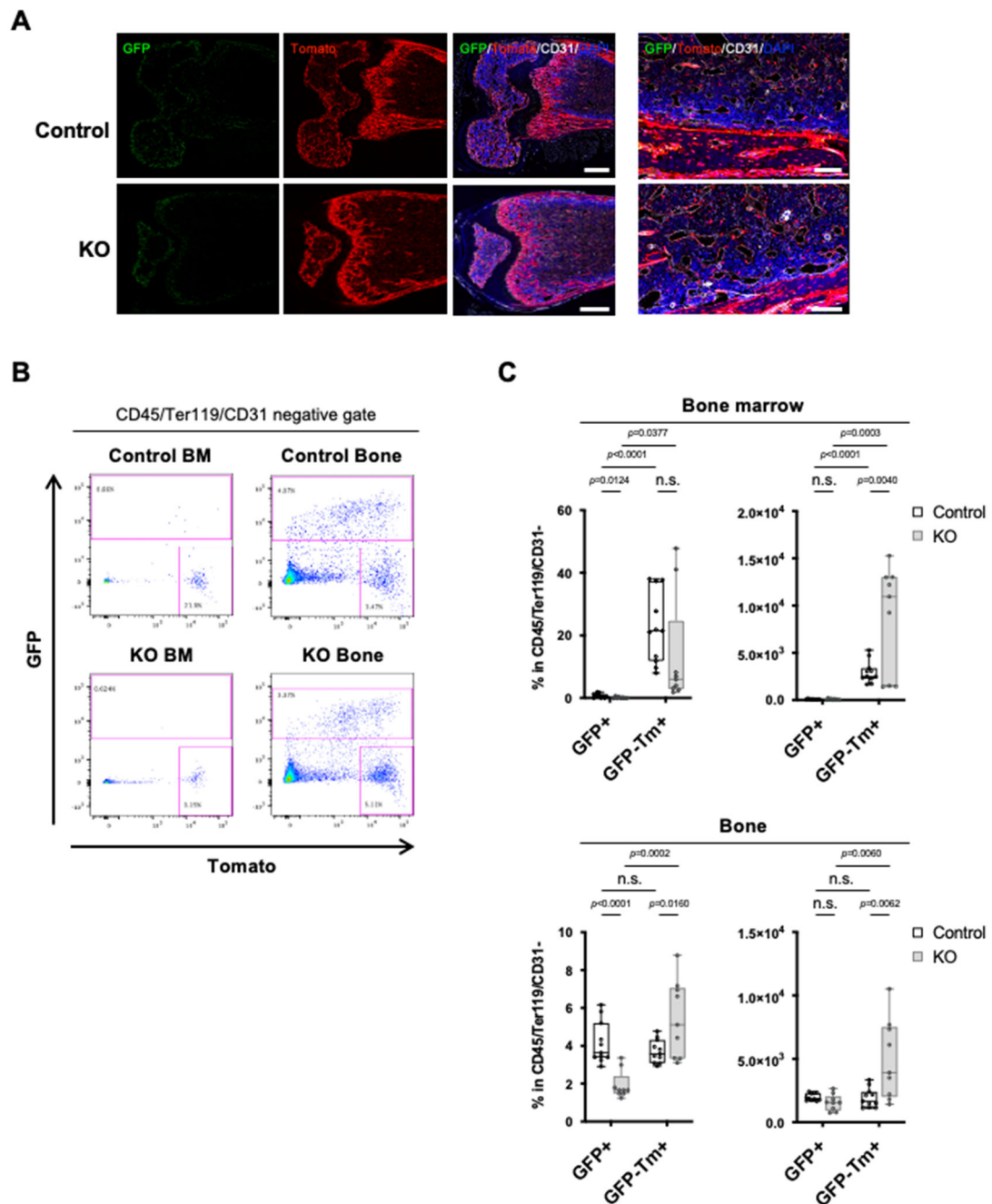
and 50  $\mu\text{m}$  (lower panels). (D) Immunostaining for Ter119, B220 (red), and Ki-67 in the spleen of KO and control mice at 3 weeks. Scale bar = 1 mm.

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**Figure 4.**

Osteoprogenitors expressing osterix are present in bone, while descendants of osterix-expressing osteoprogenitors are present in bone and bone marrow. (A) Immunostaining of GFP<sup>+</sup> osterix-expressing osteoprogenitors and Tomato<sup>+</sup> descendants in femur of *Osx-Cre::GFP/+; PTH1R(+/+); Ai14/+ (PTH1R-OsxWT)* control and *Cre::GFP/+; PTH1R(fl/fl); Ai14/+ (PTH1R-OsxKO)* mice at 3 weeks of age. Scale bar = 500  $\mu$ m (left panels) and 100  $\mu$ m (right panels). (B) Representative flow cytometry detection of GFP<sup>+</sup> and GFP<sup>-</sup>Tomato<sup>+</sup> cells in bone and bone marrow of *PTH1R-OsxWT* and *PTH1R-OsxKO*

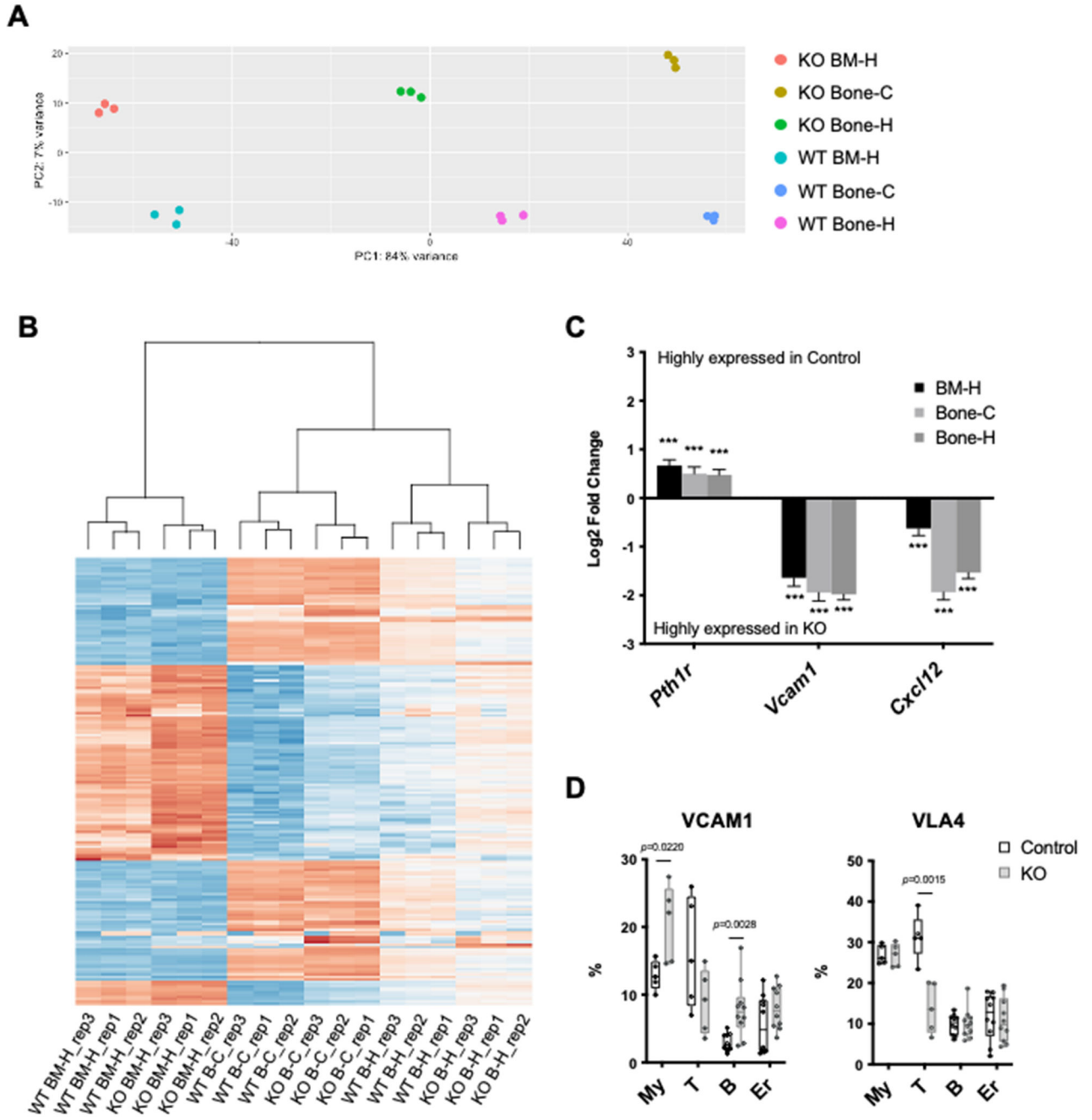
mice. (C) Frequencies and numbers of GFP+ and GFP-Tomato+ cells in bone marrow and bone of PTH1R-OsxWT (n = 11) and PTH1R-OsxKO (n = 9) mice.

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**Figure 5.** Osx-expressing osteoprogenitors give rise to distinct populations in bone and bone marrow. (A) PCA plot of PTH1R-OsxWT (WT) and PTH1R-OsxKO (KO) BM-historic (BM-H), bone-current (bone-C), and bone-historic (bone-H) populations using the rlog-transformed values of RNA-seq data. Each color represents a sample type. Each sample has three replicates. (B) Heatmap of relative log transformed values of total genes across samples. Each row represents a gene. Each column represents a cell type. (C) Relative expression levels of *Pth1r*, *Vcam1*, and *Cxcl12* in bone marrow-historic, bone-current, and bone-



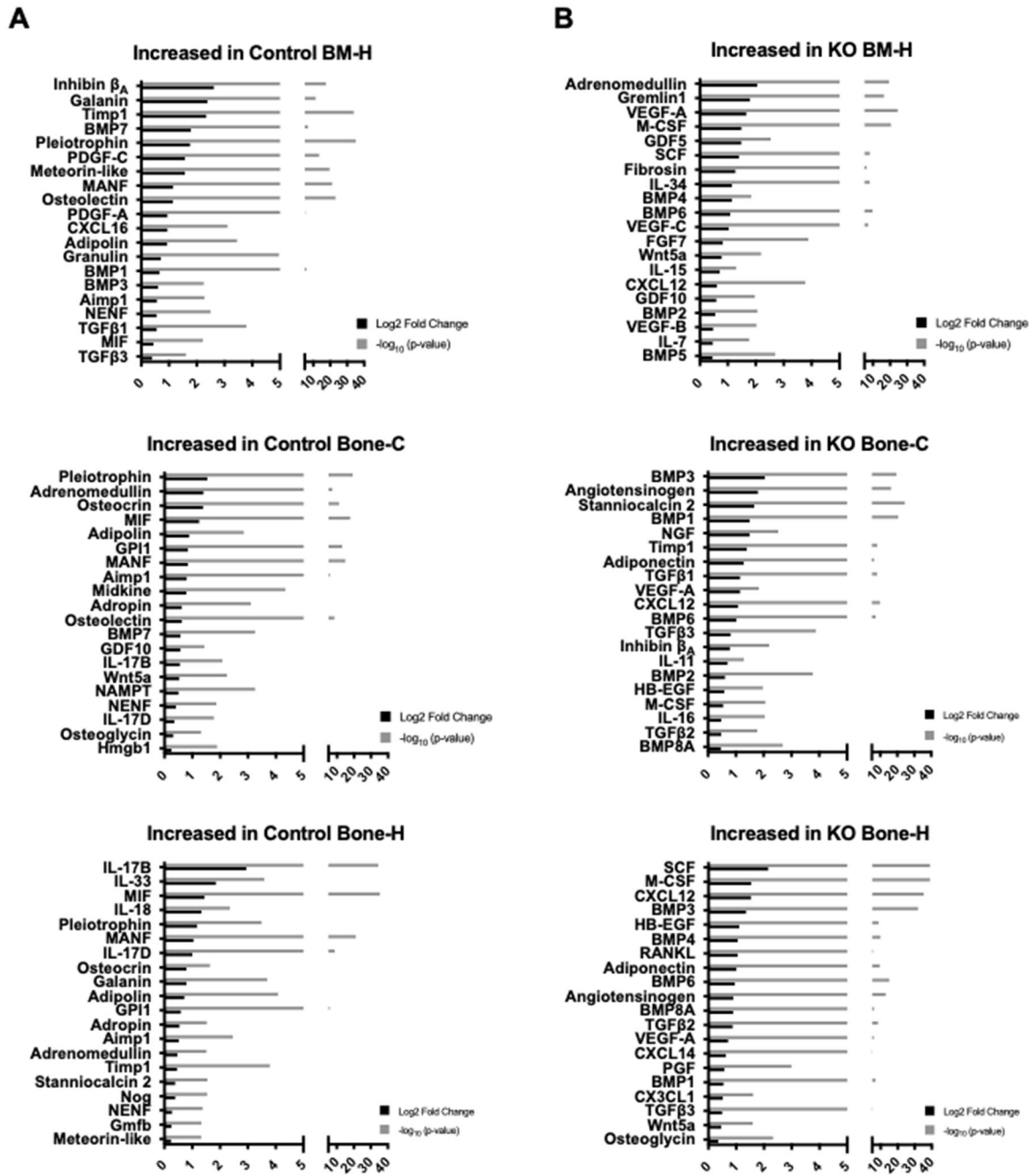
historic populations. Adjusted *p* values for *Pth1r*: 4.87E-08 (BM-H), 7.96E-04 (bone-C), 9.20E-05 (bone-H); for *Vcam1*: 5.66E-19 (BM-H), 4.98E-27 (bone-C), 2.83E-68 (bone-H); for *Cxcl12*: 1.63E-04 (BM-H), 1.09E-33 (bone-C), 3.09E-36 (bone-H). (D) Percent of myeloid (My), T, B, and erythroid (Er) cells expressing VCAM-1 and VLA-4 in bone marrow of PTH1R-OsxKO (KO, gray) and control (black) mice (n = 5 each).

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**Figure 6.** Differentially expressed niche factors. (A) Top 20 niche factor transcripts that are significantly upregulated in PTH1R-OsxWT BM-historic (BM-H), bone-current (bone-C), and bone-historic (bone-H) populations.  $-\log_{10}(p\text{ value})$  of gene-enriched terms are shown. (B) Top 20 niche factor transcripts that are significantly upregulated in PTH1R-OsxKO BM-H, bone-C, bone-H populations.