

Bone Anatomy and Physiology

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References and Acknowledgments

BOOKS

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- Currey J. *Bones: Structure and Mechanics*. 2006
- Carter D. – Beaupre G. *Skeletal Function and Form*. 2001

WEB (mainly for Figures)

- Various websites through Google Image search

JOURNAL ARTICLES

- Clark B. *Normal Bone Anatomy and Physiology*. Clin J Am Soc Nephrol 3: S131–S139, 2008

Studying the Bone

Biology

Biomechanics

Imaging

Bone

Bone Quality
Assessment

Bone Fracture
and Fixation

Multi-Scale Approach to Bone Study

BODY
LEVEL

ORGAN
LEVEL

TISSUE
LEVEL

CELLULAR
LEVEL

MOLECULAR
LEVEL

Biology

Biomechanics

Imaging

Multi-Scale Approach to Bone Study

BODY
LEVEL



[m - cm]

ORGAN
LEVEL



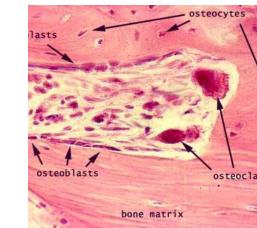
[cm - mm]

TISSUE
LEVEL



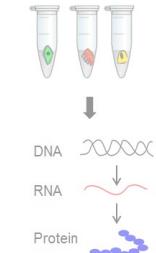
[mm - μm]

CELLULAR
LEVEL



[μm]

MOLECULAR
LEVEL



[nm]

Biology

Biomechanics

Imaging

The Body Level

Biology

BODY
LEVEL



[m - cm]

ORGAN
LEVEL



[cm - mm]

TISSUE
LEVEL



[mm - μm]

CELLULAR
LEVEL



[μm]

The Adult Skeleton

- The **adult** skeleton is made of 206 bones
- The functions of the skeleton are:

Protection

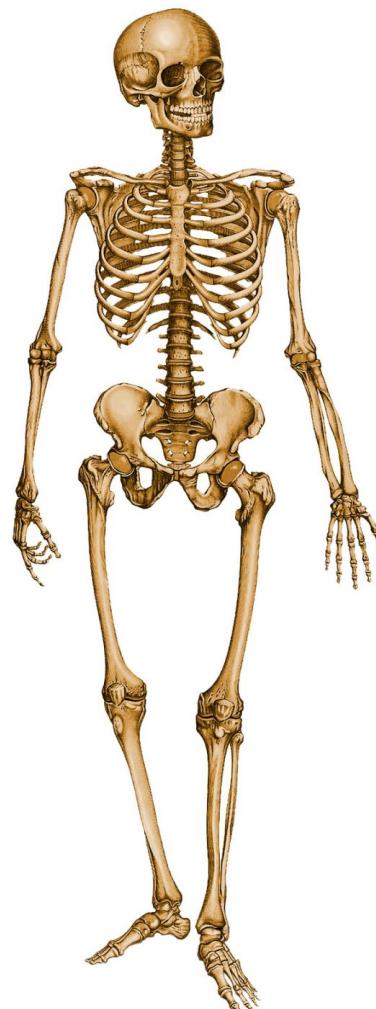
The cranium protects the brain, the rib cage protects heart and lungs

Shape

Without the skeleton, the body would be flabby and shapeless

Support

The vertebrae support the head



Movement

The bones and joints work with muscles to enable us to walk, run and sprint

Blood Production

Red blood cells are made in the ribs and limb bones

Calcium Storage

Bone is the largest supply of calcium

The Organ Level

Biology

BODY
LEVEL



[m - cm]

ORGAN
LEVEL



[cm - mm]

TISSUE
LEVEL



[mm - μm]

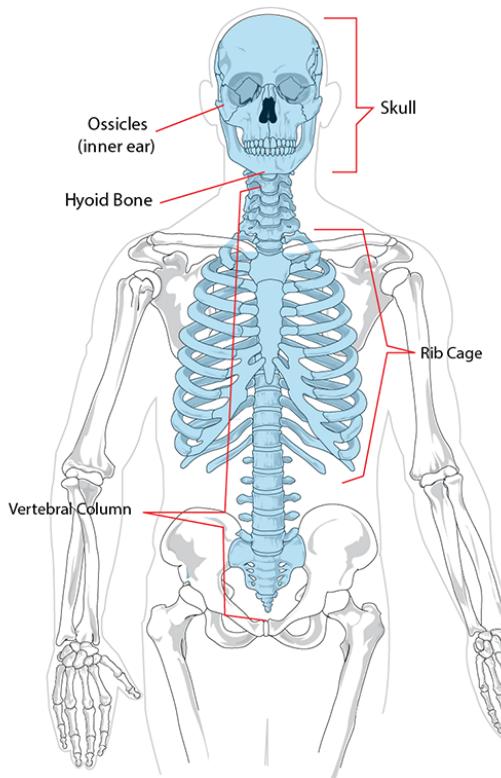
CELLULAR
LEVEL



[μm]

Bone Classification 1: Axial vs. Appendicular

Axial



Axial

Cancellous
Viscera
Thin
Hematopoietic
High
Mechanical
Metabolic

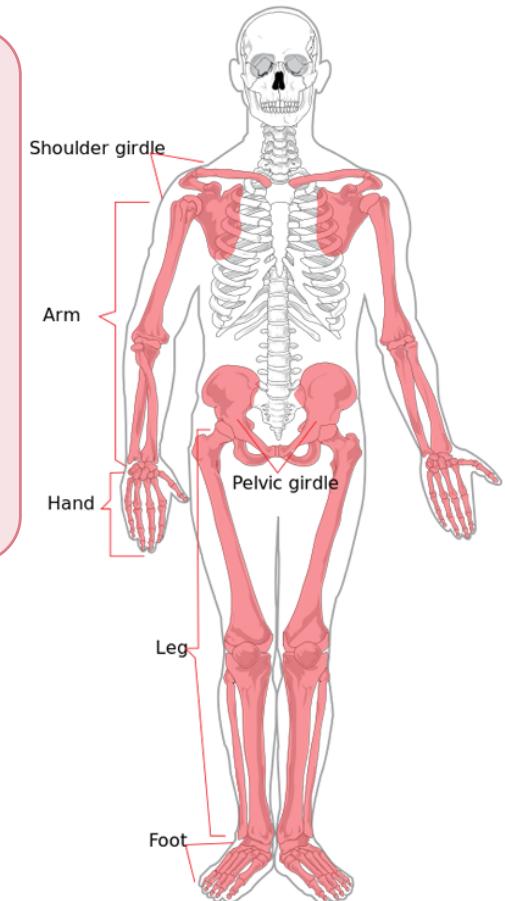
Feature

Main bone tissue
Adjacent soft tissue
Cortices
Marrow
Turnover
Main function:
Cortical
Cancellous^a

Appendicular

Cortical
Muscle
Thick
Fatty
Low
Mechanical
Mechanical

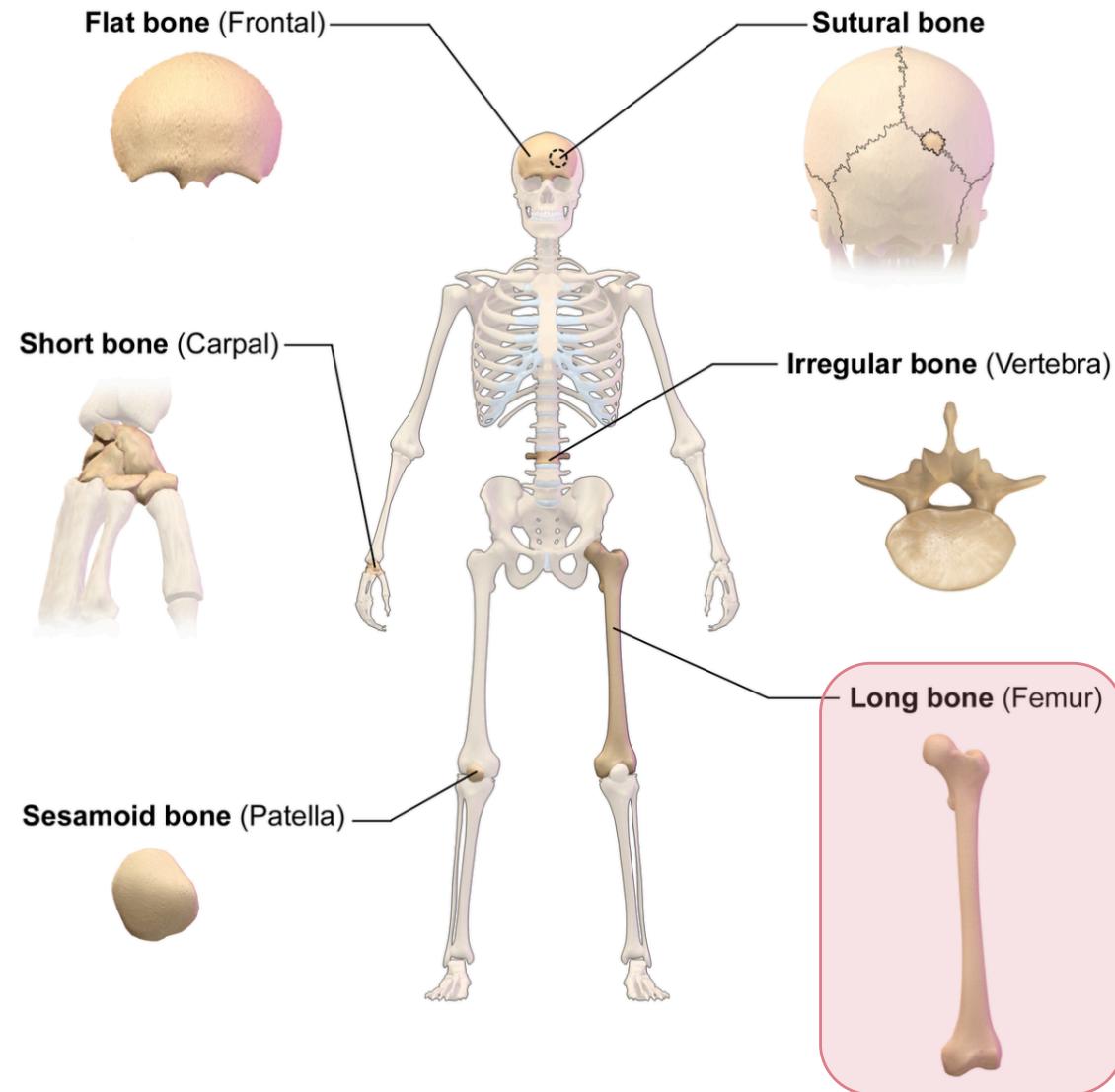
Appendicular



^a Metabolic activity such as uptake and release of calcium occurs in all cancellous bone in red marrow sites throughout the skeleton.

Cowin, 2001

Bone Classification 2: Based on Shape



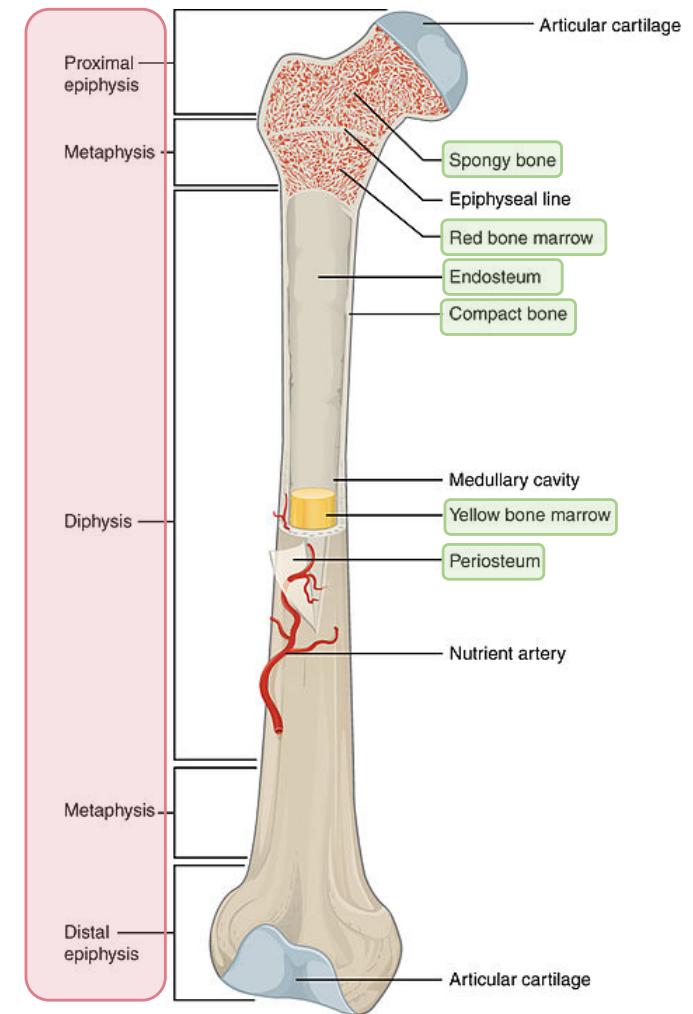
Long Bones

Longitudinally:

- **Epiphysis**
- **Metaphysis**
- **Diaphysis / Shaft**

Transversally:

- **Periosteum**
- **Cortical / Trabecular Bone**
- **Endosteum**
- **Bone Marrow**



Bone Marrow

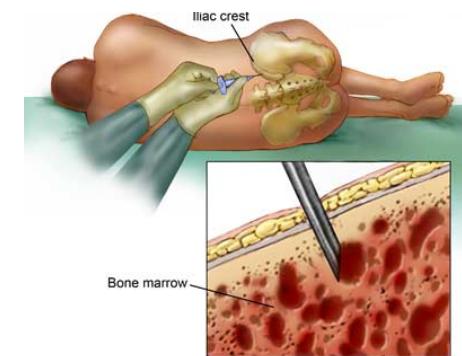
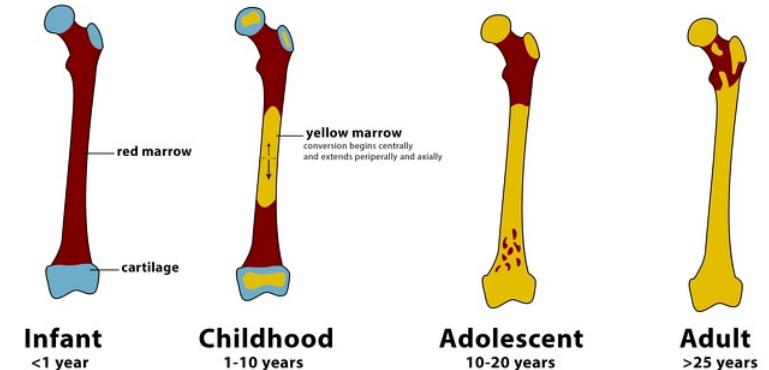
- **Red marrow**

- Produces red blood cells, white blood cells and platelets
- By age 25 it is essentially confined to the axial skeleton
- Marrow transplant for leukemia and bone marrow cancer

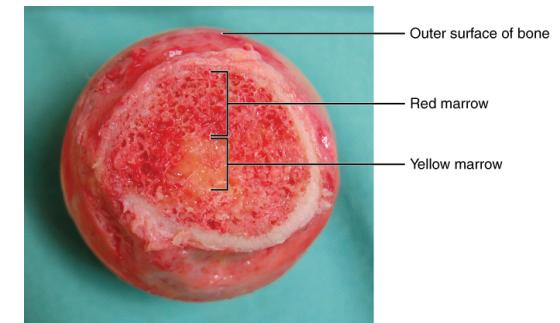
- **Yellow marrow**

- Produces fat cells (energy storage)
- Located in the medullary cavity of the shaft

Normal Bone Marrow Conversion

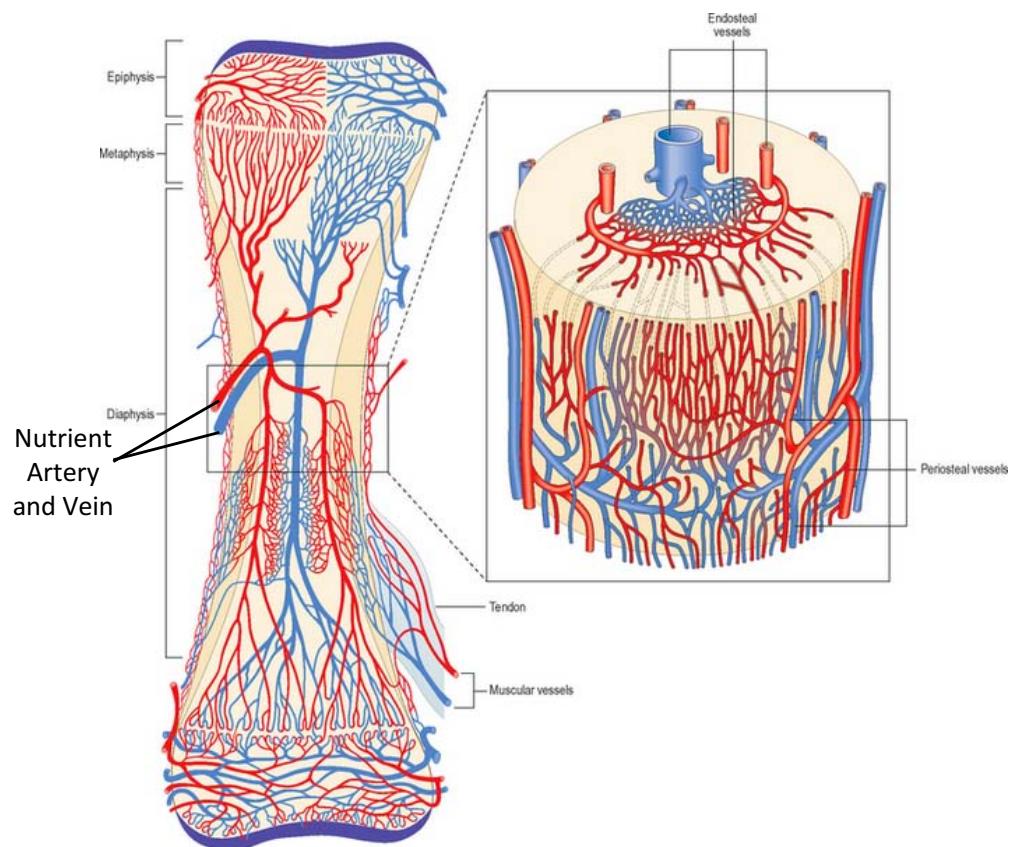


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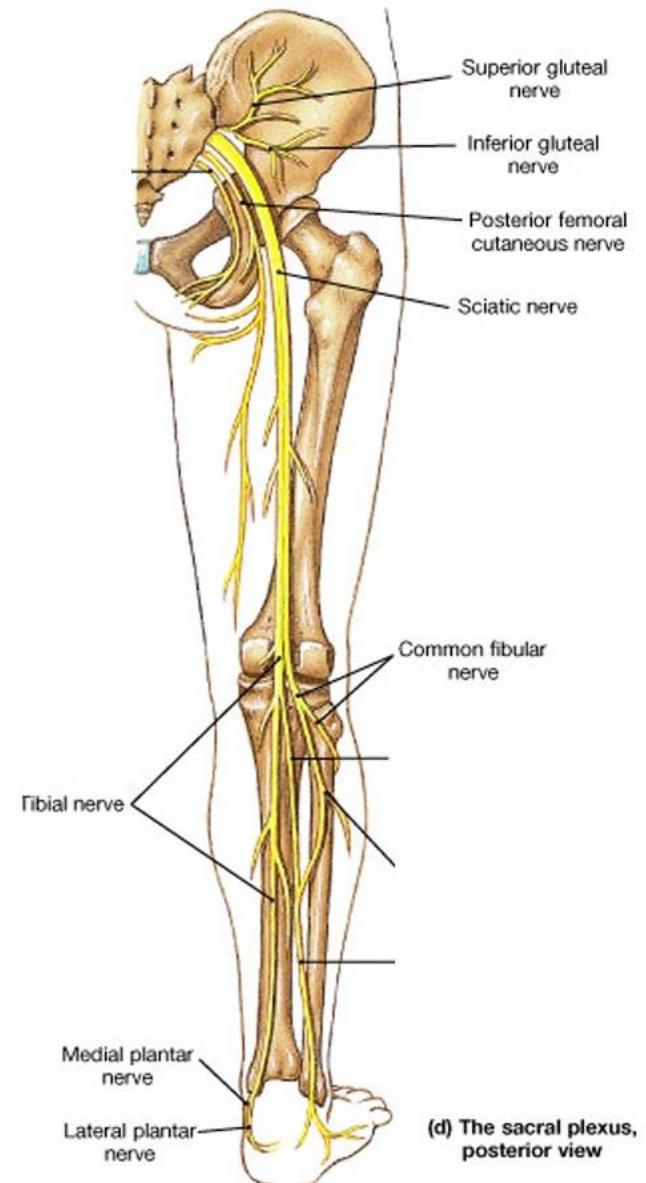
Bone vascular supply

- The nutrient artery enters the long bone and divides into ascending and descending arteries
- Capillary arcades are formed in marrow spaces between trabeculae
- When growth is complete, the growth plate disappears and the trabecular bone circulation of the epiphysis and metaphysis join together
- Little of the hemodynamics of the circulation in bone is known



Bone nerves

- The nerve supply for bone is largely unknown
- Haversian canals, periosteum, and medullary vessels are innervated
- Recent electron microscopy studies showed bone is rich in nerve fiber processes running along vessels adjacent to bone trabeculae



The Tissue Level

Biology

BODY
LEVEL



[m - cm]

ORGAN
LEVEL



[cm - mm]

TISSUE
LEVEL



[mm - μm]

CELLULAR
LEVEL



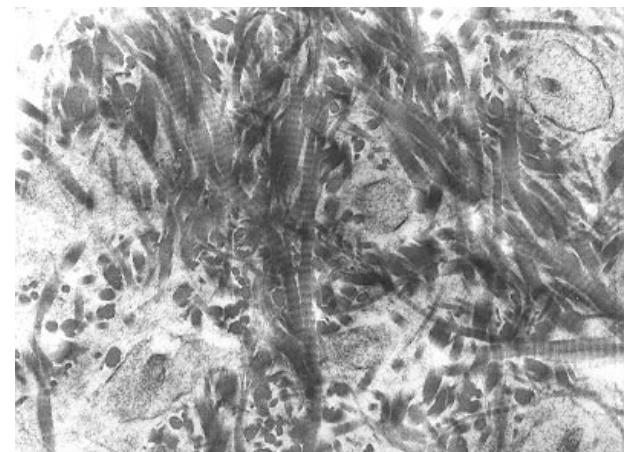
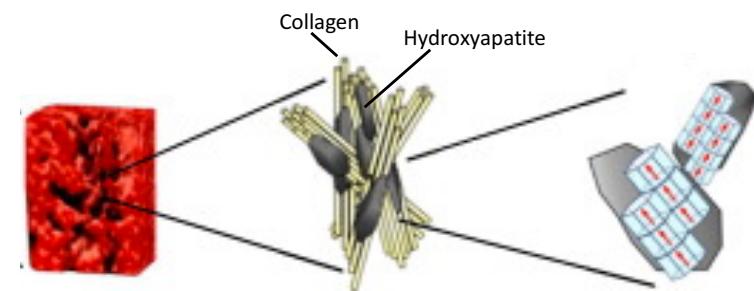
[μm]

Classification of Bone Tissue: Woven and Lamellar

There are two types of bone tissue based on *collagen organization*: *woven* and *lamellar*

Woven Bone: collagen is poorly organized with short fibers oriented randomly.

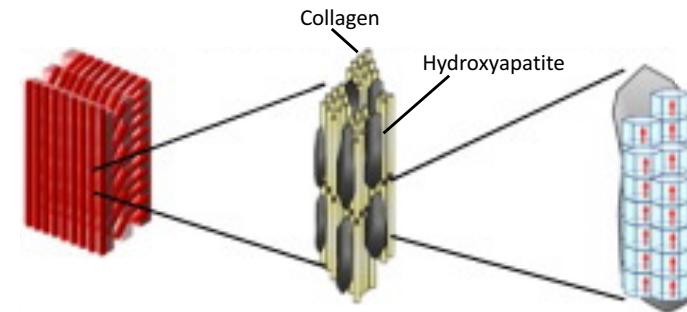
- It is formed during physiological *growing* and during *healing* from fracture
- It is replaced by lamellar bone



Classification of Bone Tissue : Woven and Lamellar

There are two types of bone tissue based on *collagen organization*: **woven** and **lamellar**

Lamellar Bone: collagen is organized in layers called **lamella / lamellae**

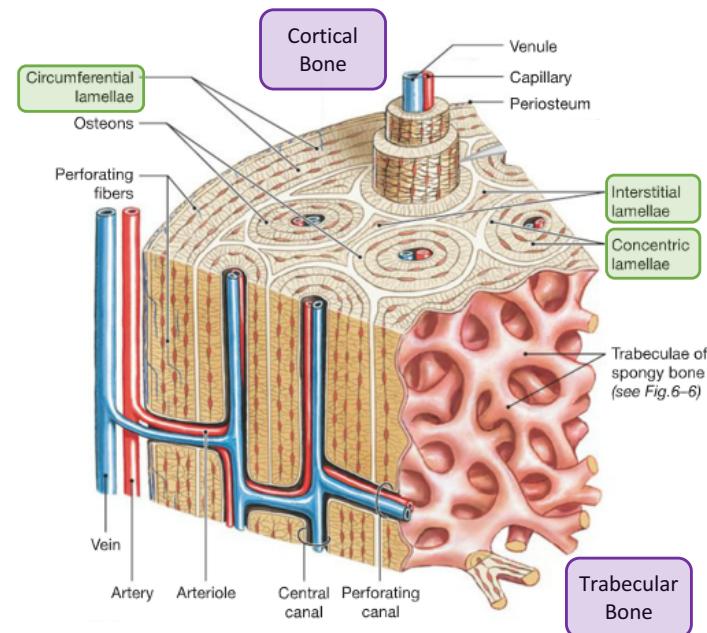


Lamellae are:

- Concentric
- Circumferential
- Interstitial

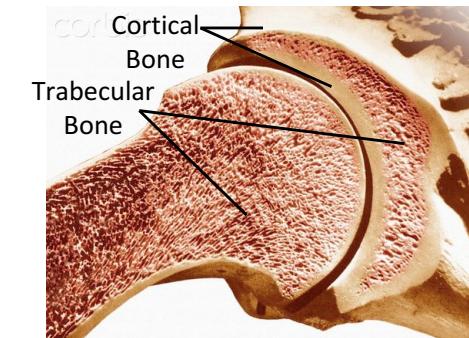
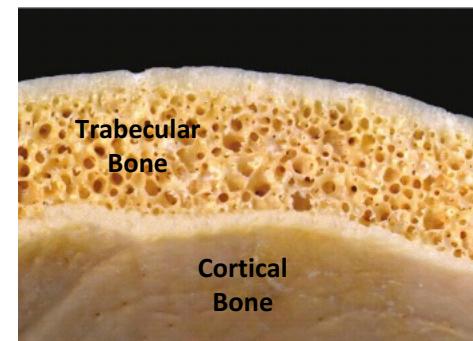
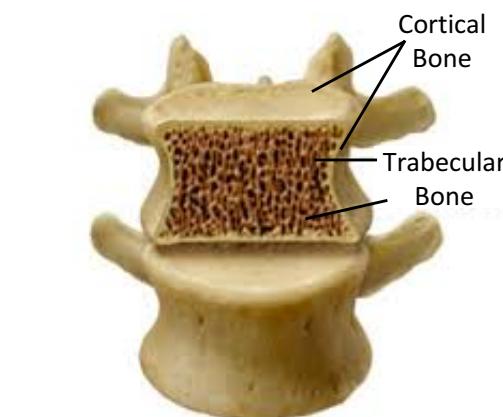
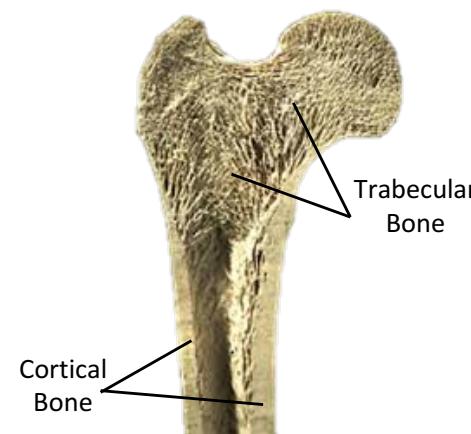
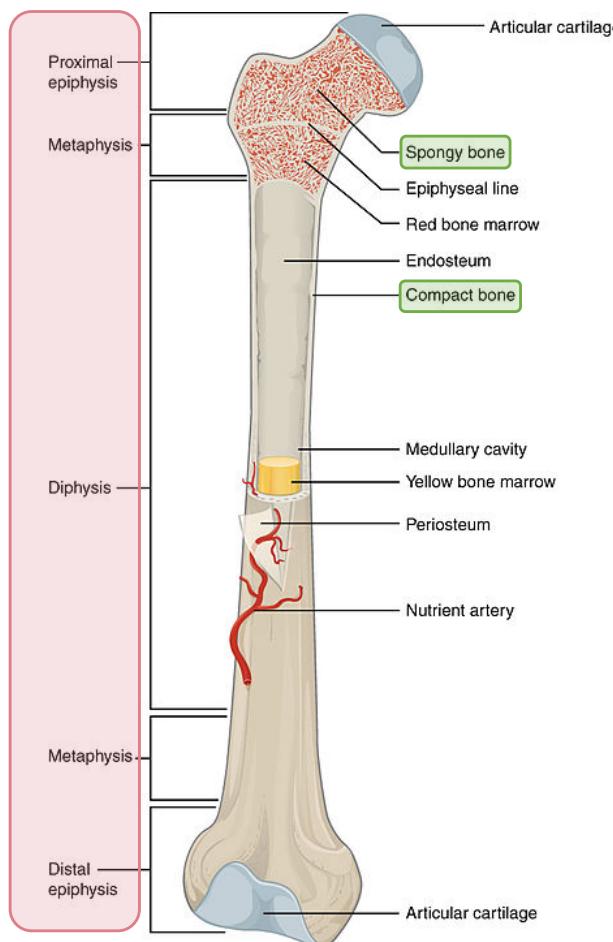
Lamellar bone forms:

- **Cortical** bone
- **Trabecular** bone



Lamellar Bone: Cortical and Trabecular

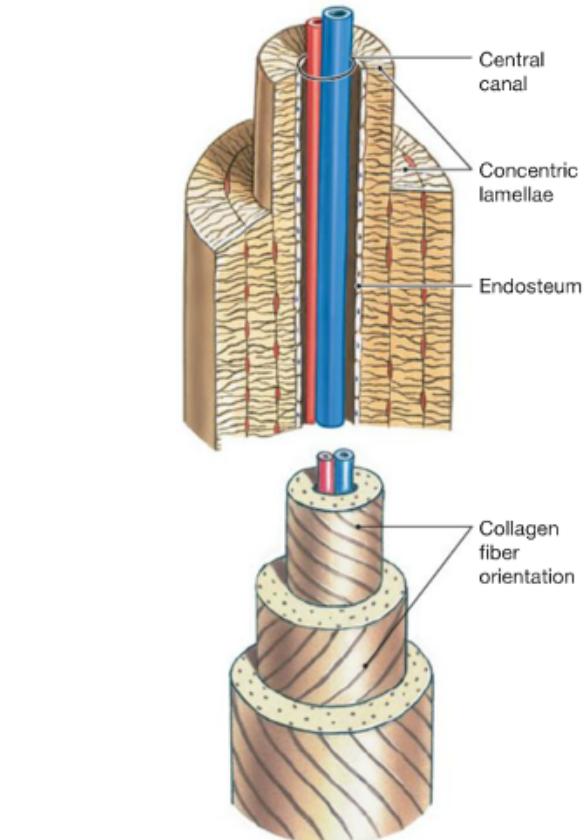
- **Cortical (or Compact)** bone is mainly in the *diaphysis*
- **Trabecular (or Cancellous or Spongy)** bone is mainly in *epiphysis* and *metaphysis*



Cortical Bone

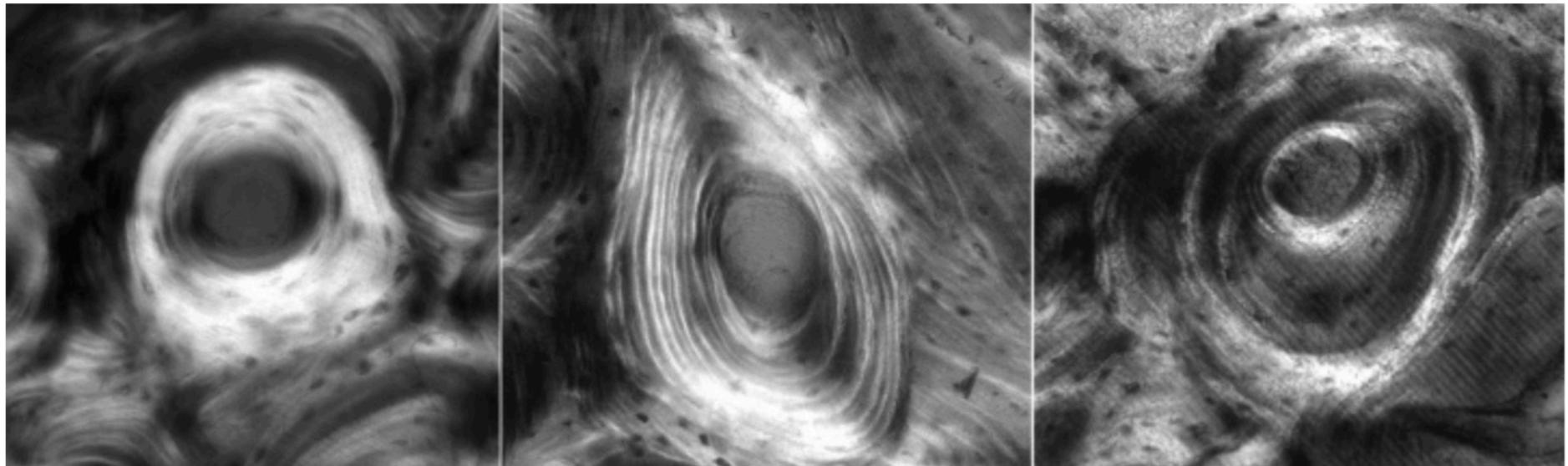
Cortical bone is composed by **osteons**

- Concentric **lamellae** with alternated fiber orientation
- At the center there is the **Haversian canal** with vasculature and innervations
- In between lamellae there are **lacunae** with osteocytes
- **Canalliculi** host osteocytes cytoplasmatic protrusions and fluid
- **Volkmann's canals** connect the Haversian canal with the periosteum providing energy and nutrients



Cortical Bone – How much do we know?

- There is still much to understand, e.g. lamellae orientation



Mainly transversal fibers

Alternation of longitudinal and
transversal fibers

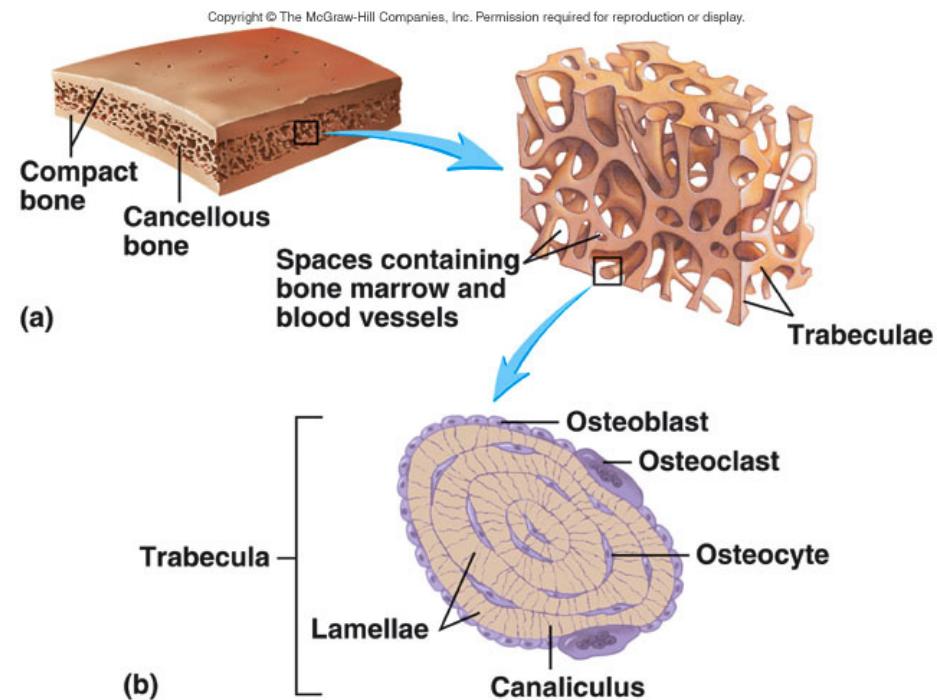
Mainly longitudinal fibers

Fibers oriented *transversally* with respect to the main axis

Fibers oriented *longitudinally* with respect to the main axis

Trabecular Bone

- Trabecular bone is formed by concentric lamellae without Haversian canal
- **Trabeculae** are divided in **plates** and **rods**
- Space in between trabeculae is filled with bone marrow and vessels



Cortical Bone and Trabecular Bone

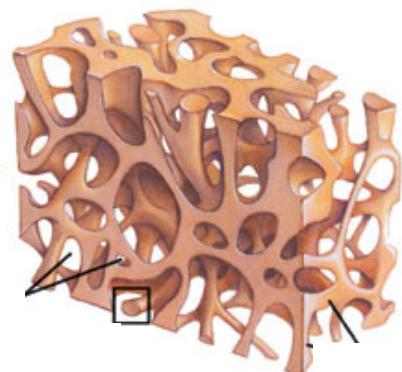
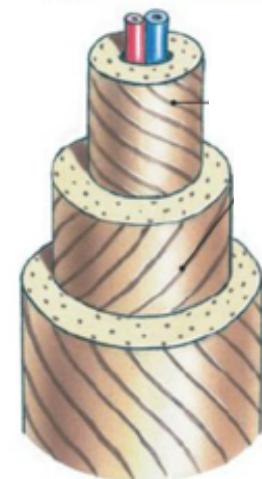


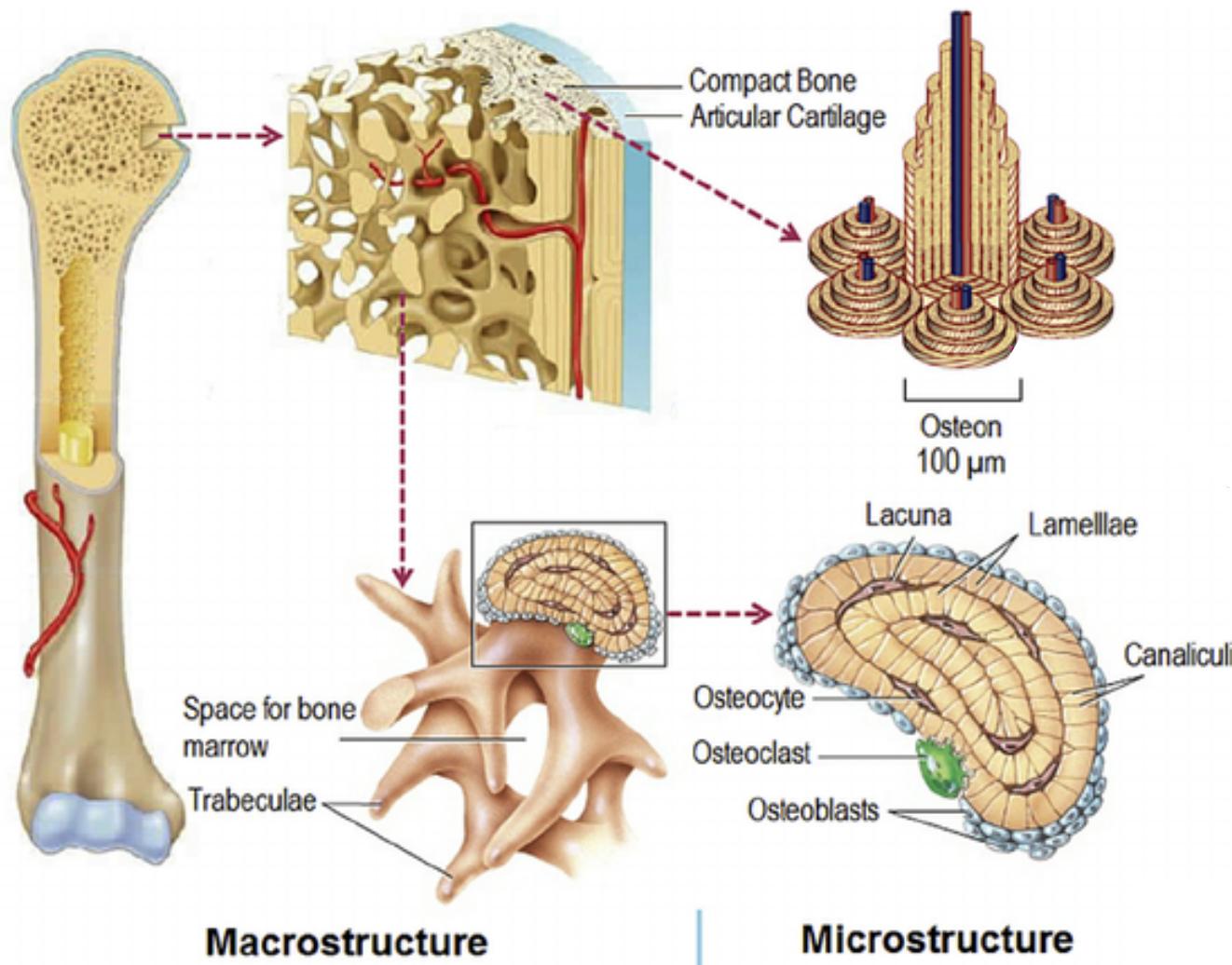
TABLE 1.2 Differences in Cortical and Cancellous Bone

Cancellous	Cortical
20%	Skeletal mass
67%	Bone surface
2.5	Surface/volume ratio (mm^2/mm^3)
~75%	Soft tissue
Curved plates, rods (Hemosteons)	Adult tissue
Interstitial lamellae	
High	Porosity
Hematopoietic	Marrow
Marrow	Main soft tissue
Endochondral ossification	Developmental
Rapid	Turnover
Mainly mineral homeostasis, also supportive	Function
	80%
	33%
	20
	~10%
	Secondary osteon (Haversian systems)
	Interstitial lamellae
	Circumferential lamellae
	Low
	Fatty
	Viscera
	Intramembranous ossification
	Slow
	Mainly biomechanical also supportive and protective



Source: Bronner, F. and Worrell, R.V., Eds., *Orthopaedics, Principles of Basic and Clinical Science*, CRC Press, Boca Raton, FL, 1999. With permission.

Cortical Bone and Trabecular Bone - Summary



The Cellular Level

Biology

BODY
LEVEL



[m - cm]

ORGAN
LEVEL



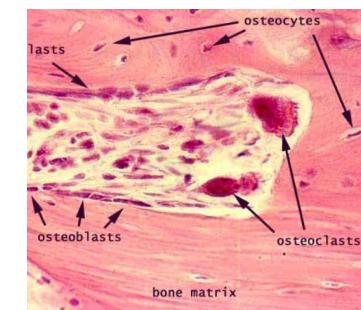
[cm - mm]

TISSUE
LEVEL



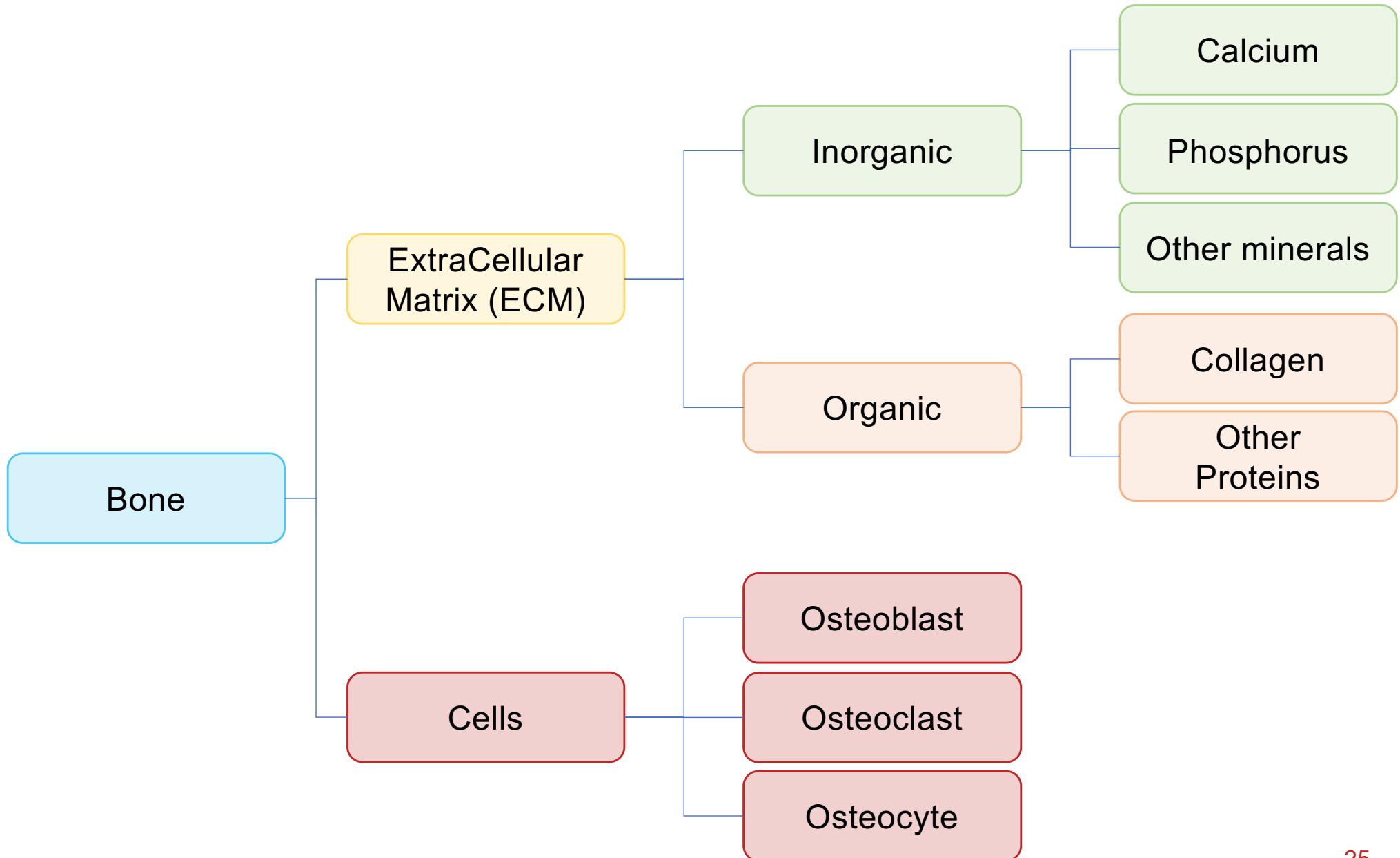
[mm - μm]

CELLULAR
LEVEL

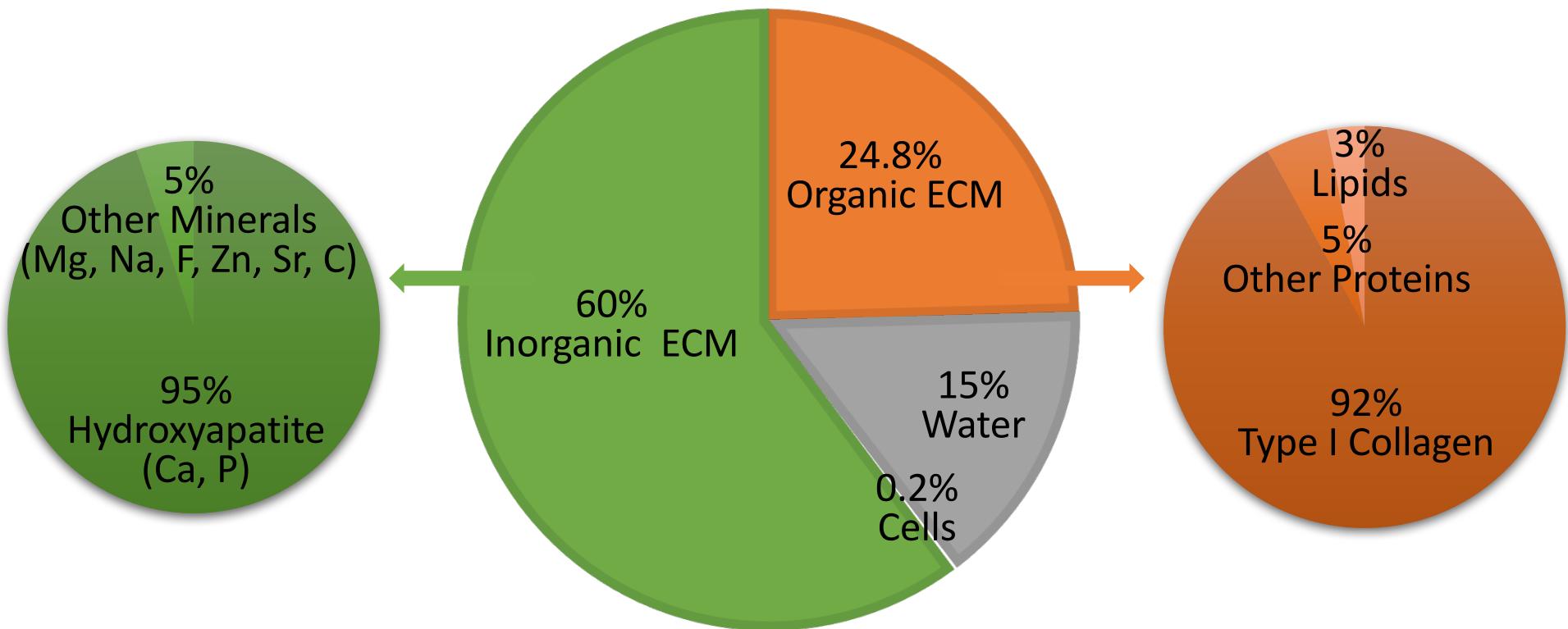
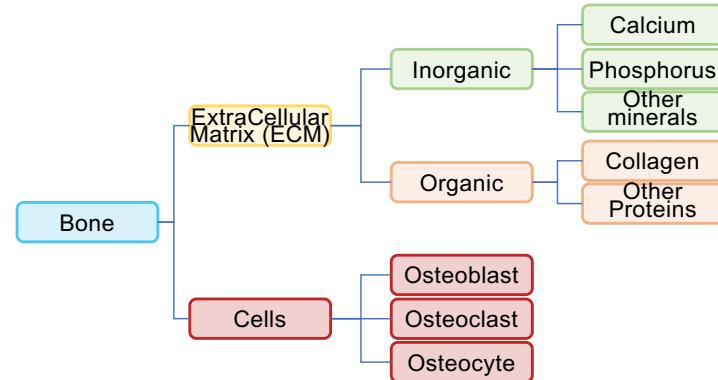


[μm]

Constituents of Bone



Constituents of Bone – Percentage Composition



The percentage composition is an estimate

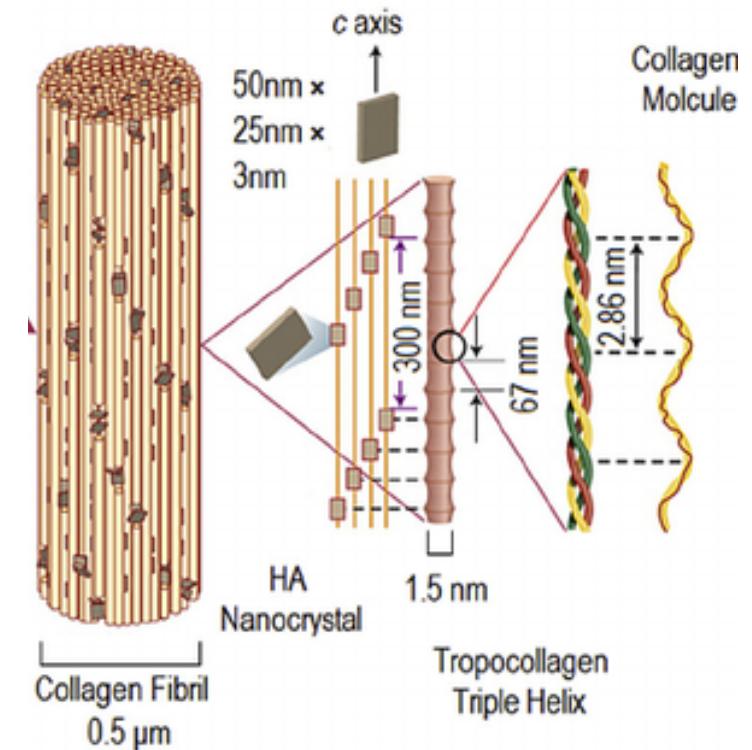
Type I Collagen

ExtraCellular Matrix (ECM)

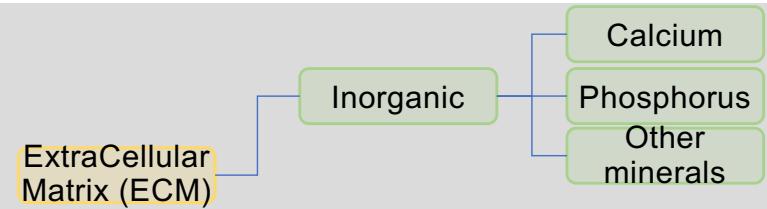
Organic

Collagen
Other Proteins

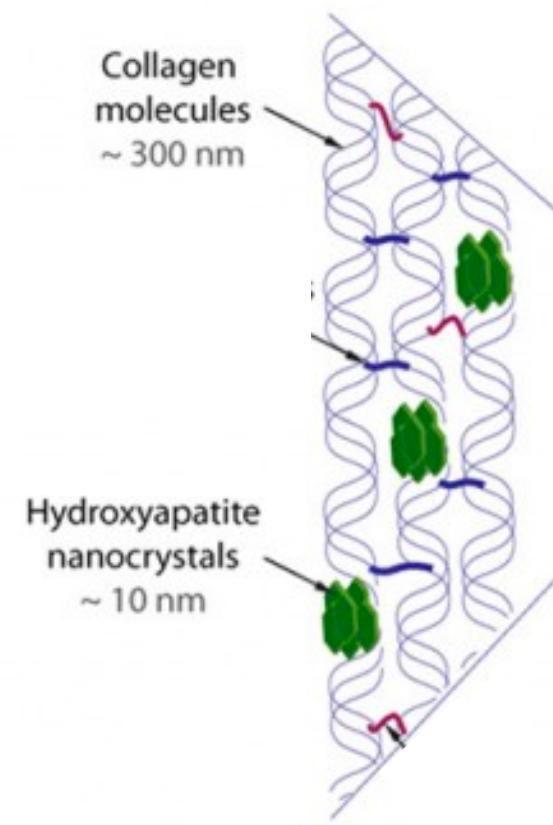
- It is the main component of the *organic* ECM (92%)
- It is the a *protein*
- There are at least 28 types of collagen, but the main type is Type I
- Cells secrete tropocollagen, which combines in triple helix forming collagen itself
- Collagen provides elasticity and flexibility to bone



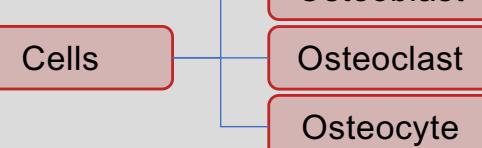
Hydroxyapatite (HA)



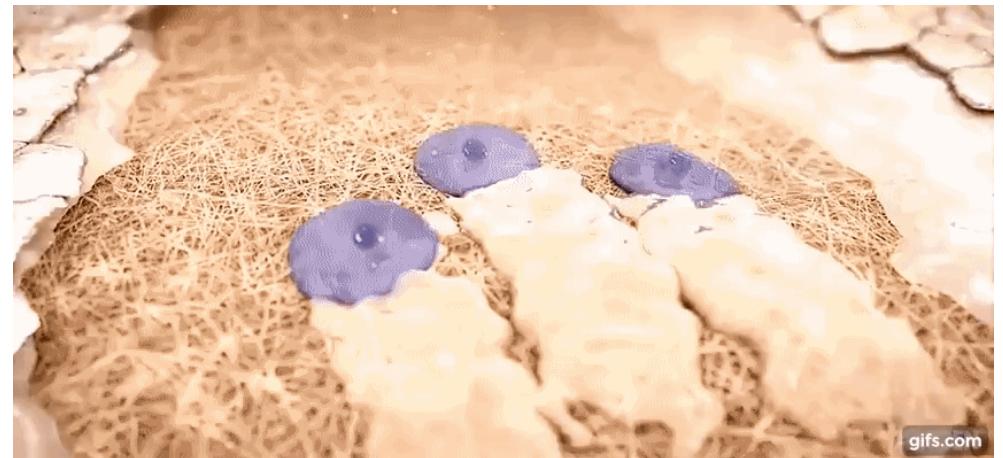
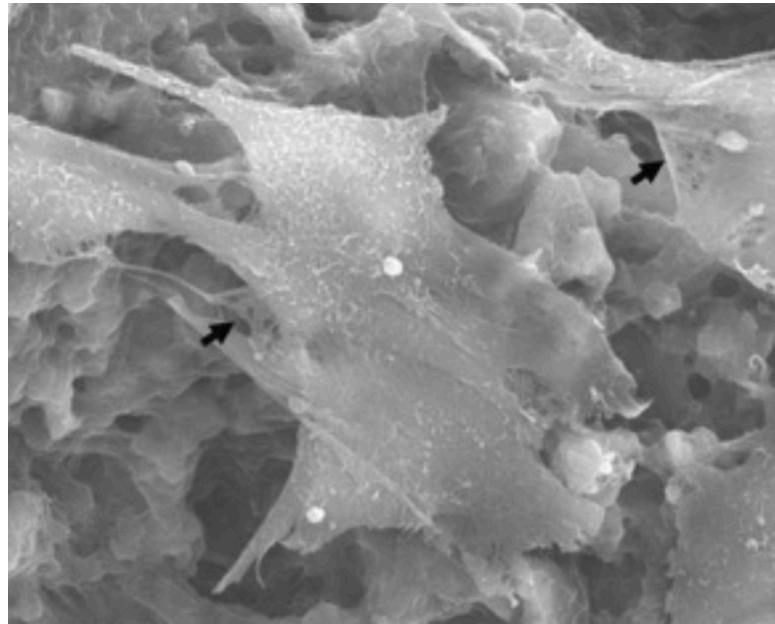
- It is the main *inorganic* component of the ECM (95%)
- It is an hexagonal crystal system where Ca^{2+} ions are surrounded by PO_4^{2-} and OH^- ions ($\text{Ca}_{10}(\text{PO}_4)_6(\text{OH})_2$)
- It binds to collagen
- It provides rigidity and load-bearing strength to bone



Osteoblasts



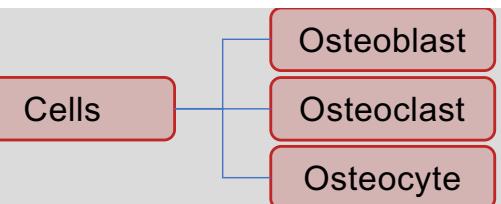
- Osteoblasts build the bone extracellular matrix by synthesizing collagen type I and other proteins



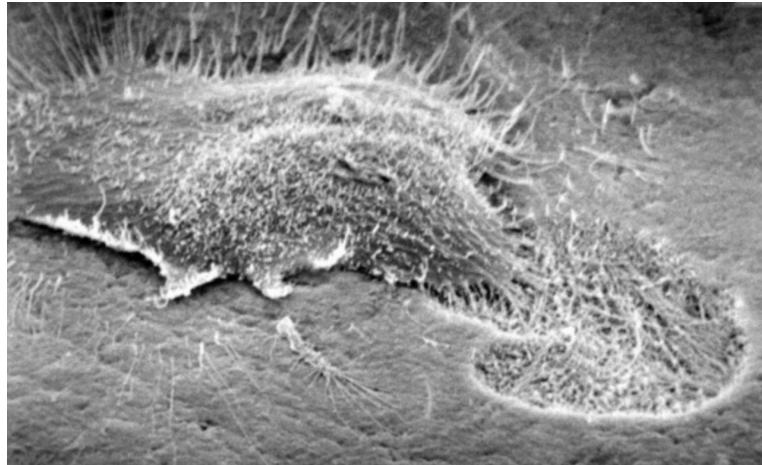
<https://www.youtube.com/watch?v=78RBpWSOI08>

- *Lining cell* are quiescent osteoblast covering the extracellular matrix surface

Osteoclasts



- Osteoclasts “clean/cancel” the bone extracellular matrix by resorbing the mineralized matrix



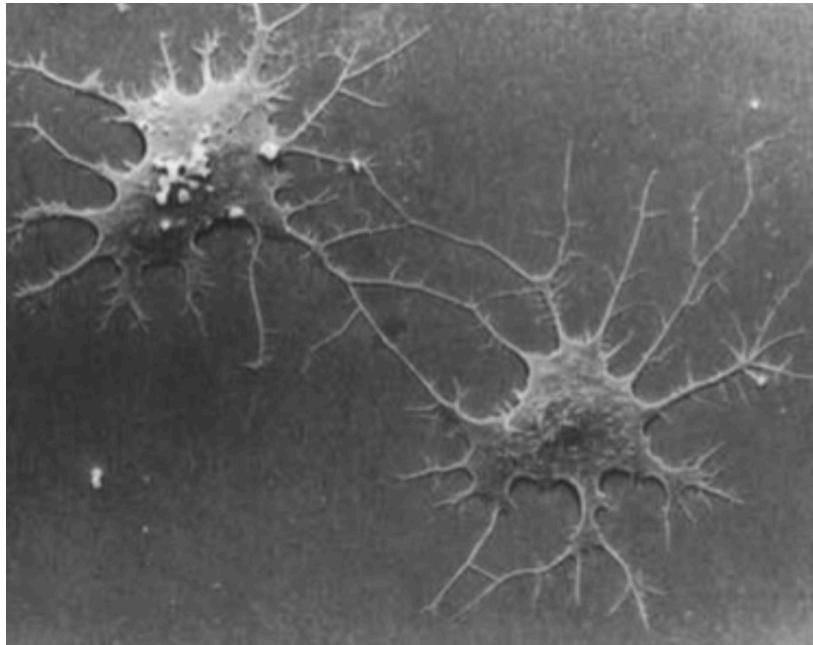
<https://www.youtube.com/watch?v=78RBpWSOI08>

Osteocytes

Cells

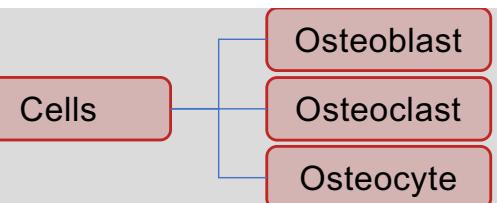
Osteoblast
Osteoclast
Osteocyte

- Osteocytes live embedded in the bone forming a network that receives and transmits mechanobiological signals

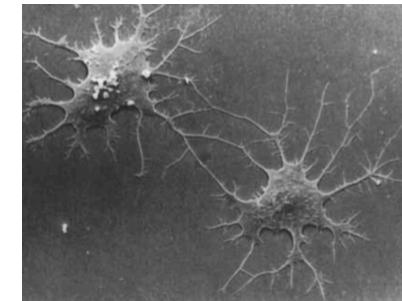
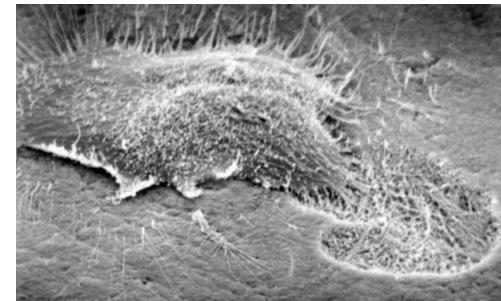
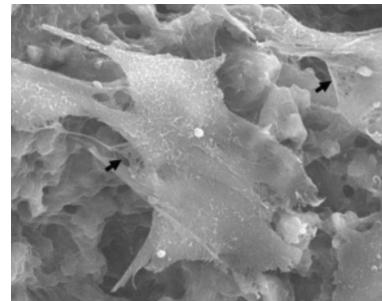


<https://www.youtube.com/watch?v=78RBpWSOI08>

Bone Cells



	Osteoblast	Osteoclast	Osteocyte
Function	Produce Collagen Type I and other proteins	Resorb bone tissue	Mechanical biosignalling
Morphology	Small, round cell with large nucleus	Large, multinucleated cell (up to 50 nuclei)	Small, round cells with long cytoplasmatic processes
Dimension	20-30µm	150-200µm	5-20µm
Origin	Mesenchimal stem cells	Hematopoietic marrow	Differentiation of mature osteoblasts trapped in the secreted matrix



Multi-Scale Approach to Bone Study – Summary

Biology

BODY
LEVEL



[m - cm]

ORGAN
LEVEL



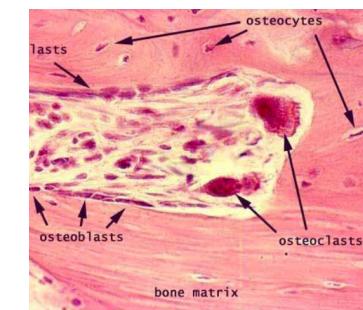
[cm - mm]

TISSUE
LEVEL



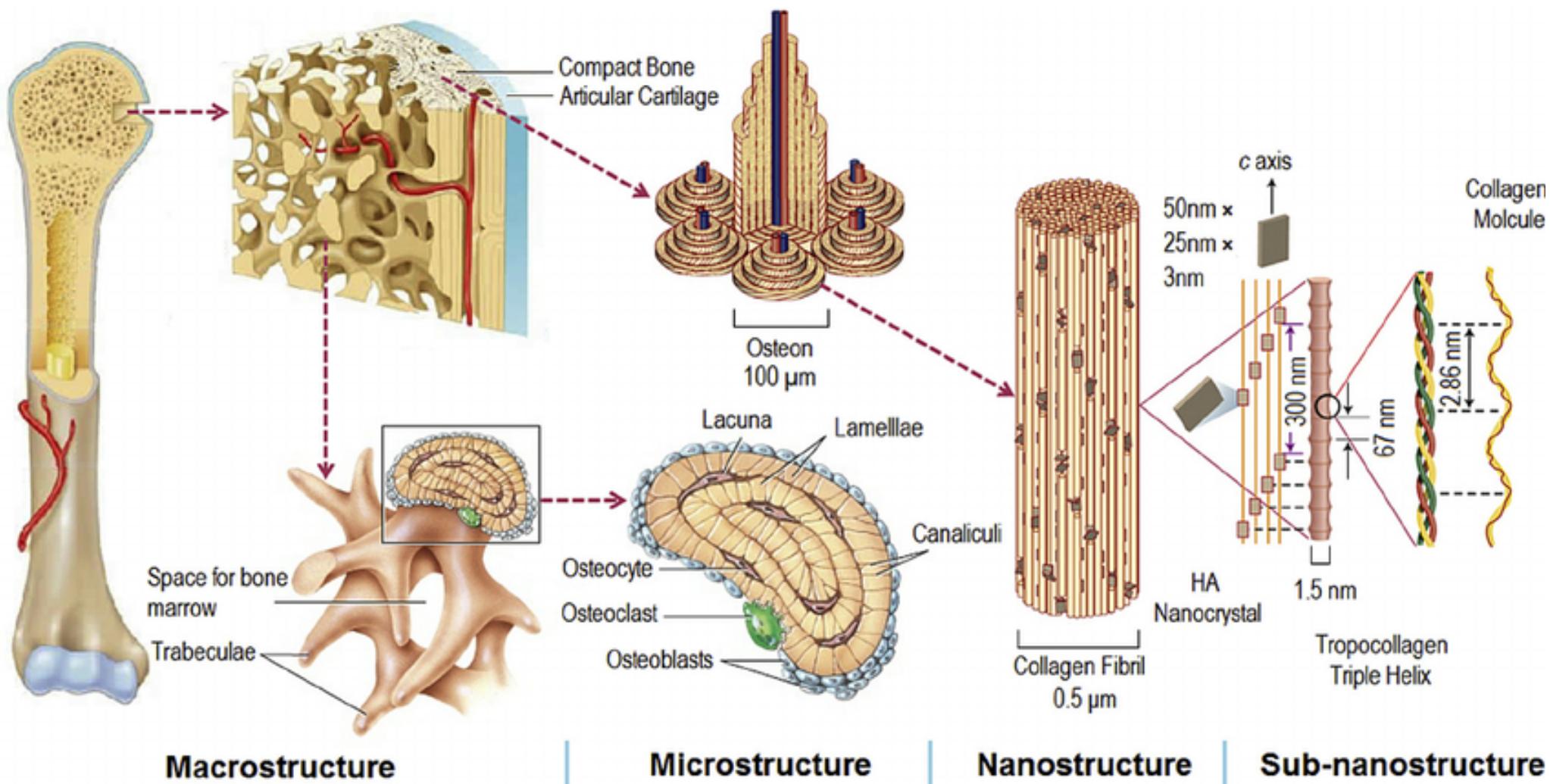
[mm - μm]

CELLULAR
LEVEL



[μm]

Multi-Scale Approach to Bone Study – Summary

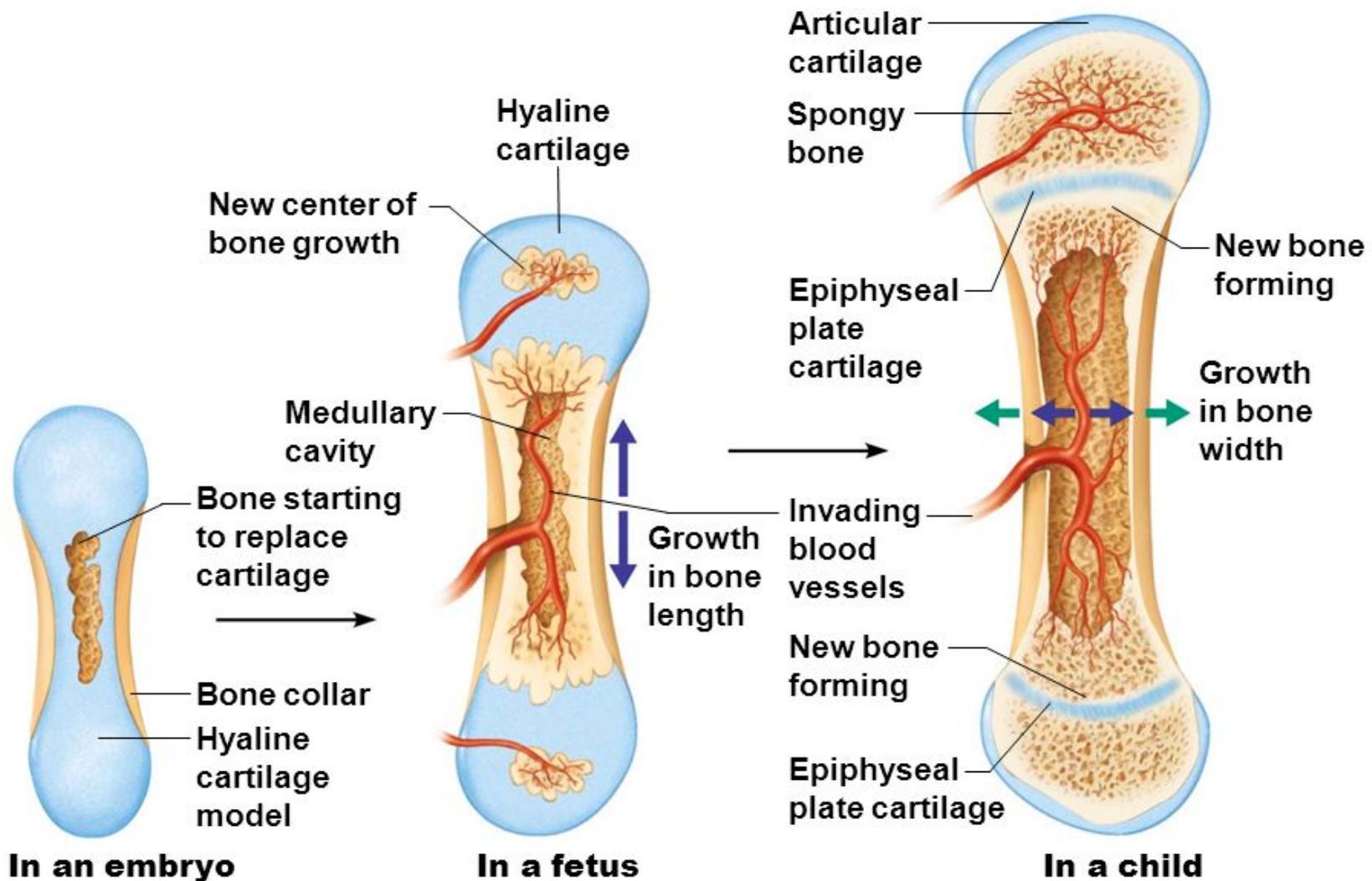


Bone Modeling and Remodeling

Definitions

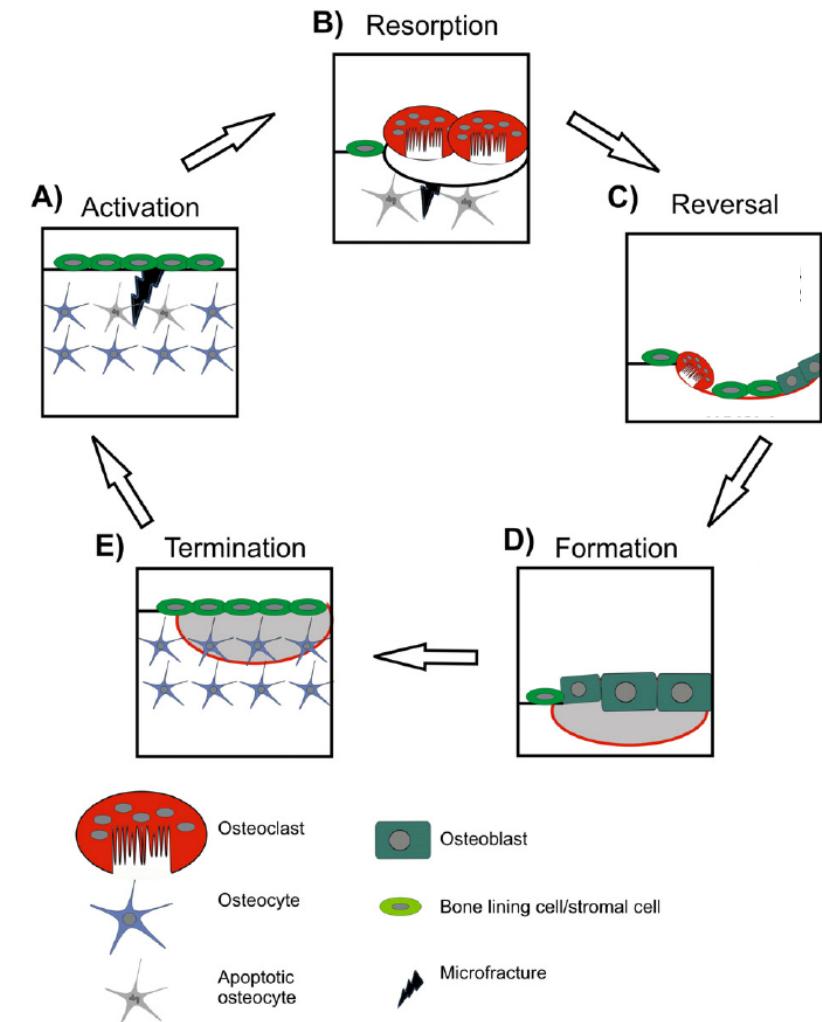
- **Bone Modeling:** osteogenesis, i.e. bone embryonic formation and growth in immature individuals
- **Bone Remodeling:** metabolic processes that constantly destroy and regenerate the bone extracellular matrix in mature individuals.
 - Produces no variation of the total skeletal mass (homeostasis) or variations of the total skeletal mass
 - **Bone Adaptation:** remodeling is due to the changes in the environmental conditions

Bone Modeling – Long bone

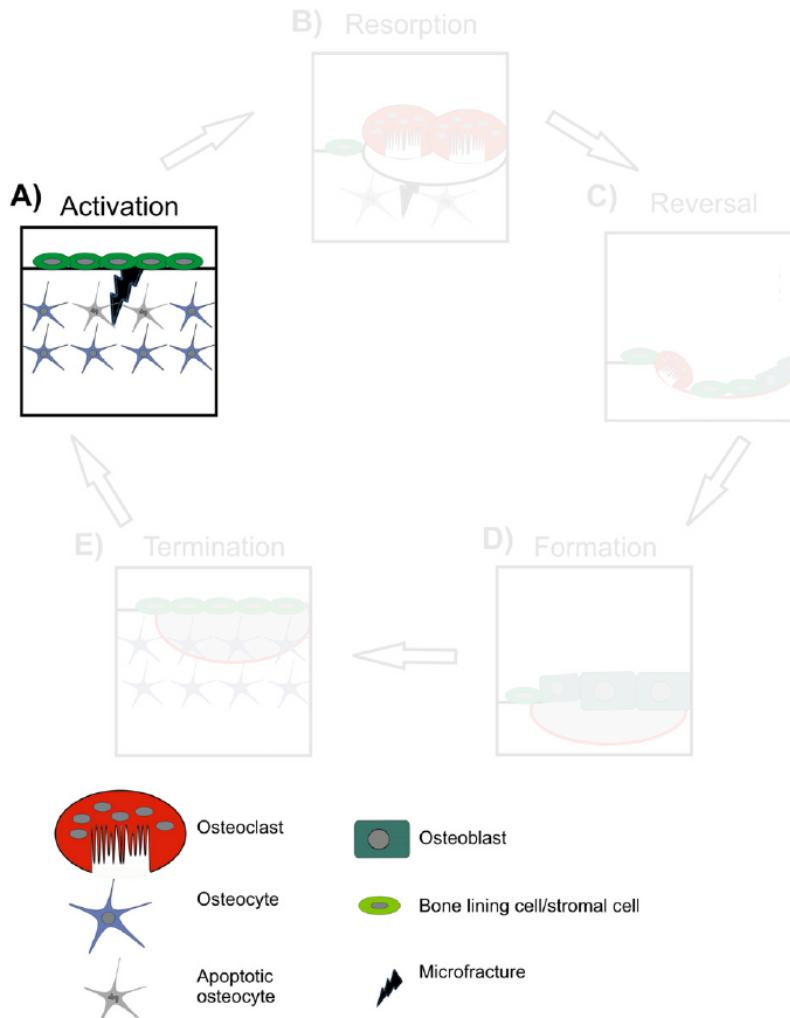


Bone Remodeling

- Bone remodeling helps to:
 - Repair structural damage and replace dead bone
 - Adapt microarchitecture to local stress (Bone Adaptation)
 - Regulate calcium homeostasis and hematopoiesis
- Bone *turnover* (= periodic replacement of bone) for normal adult:
 - Cortical bone: 20 years
 - Trabecular bone: 1-4 years



Bone Remodeling - Activation

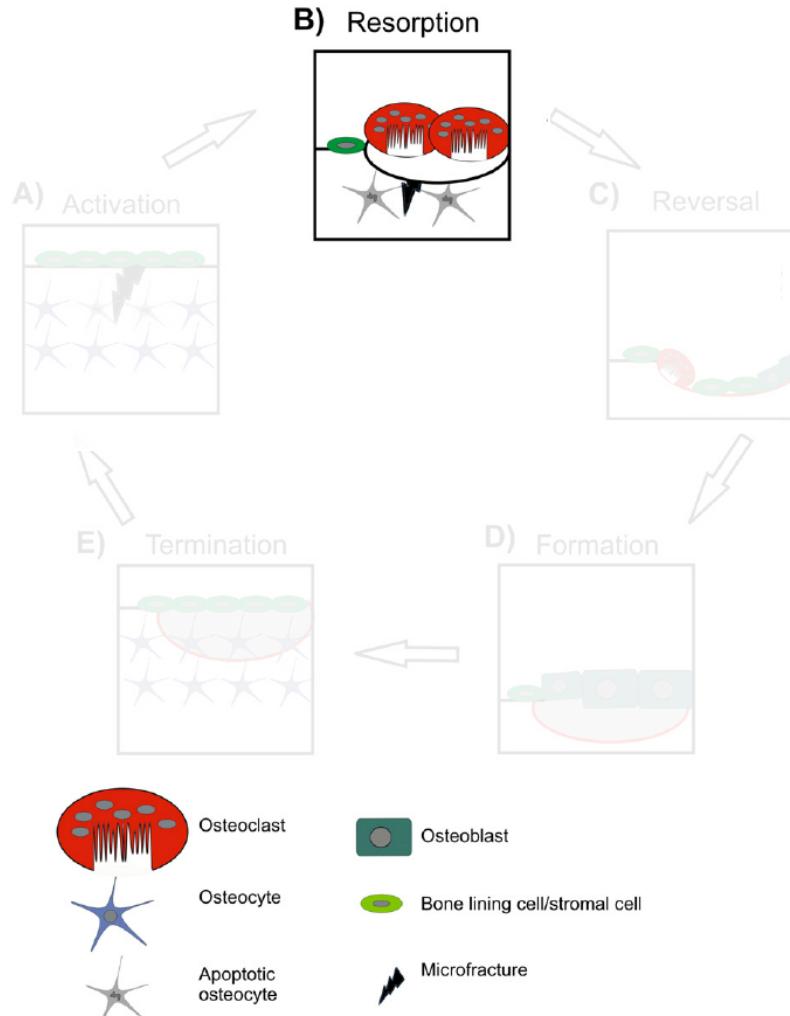


- Osteocytes probably sense bone deformation and send signals
- Lining cells lift from their attachment to form a closed sac around the remodeling site

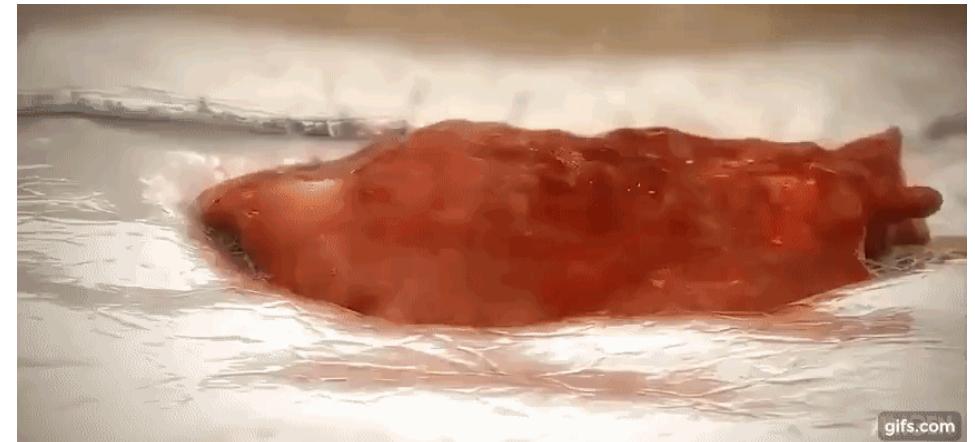


<https://www.youtube.com/watch?v=0dV1Bwe2v6c>

Bone Remodeling - Resorption

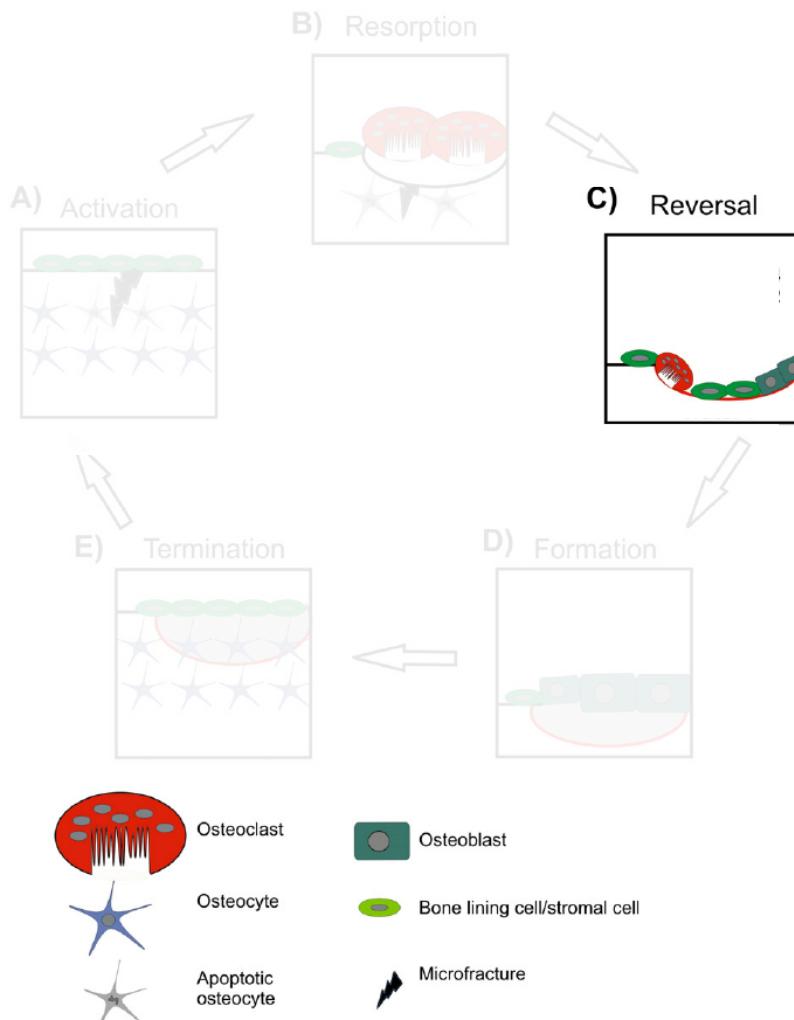


- **Osteoclasts** come in contact with bone surface and they start to erode it
- It takes 2 to 4 weeks



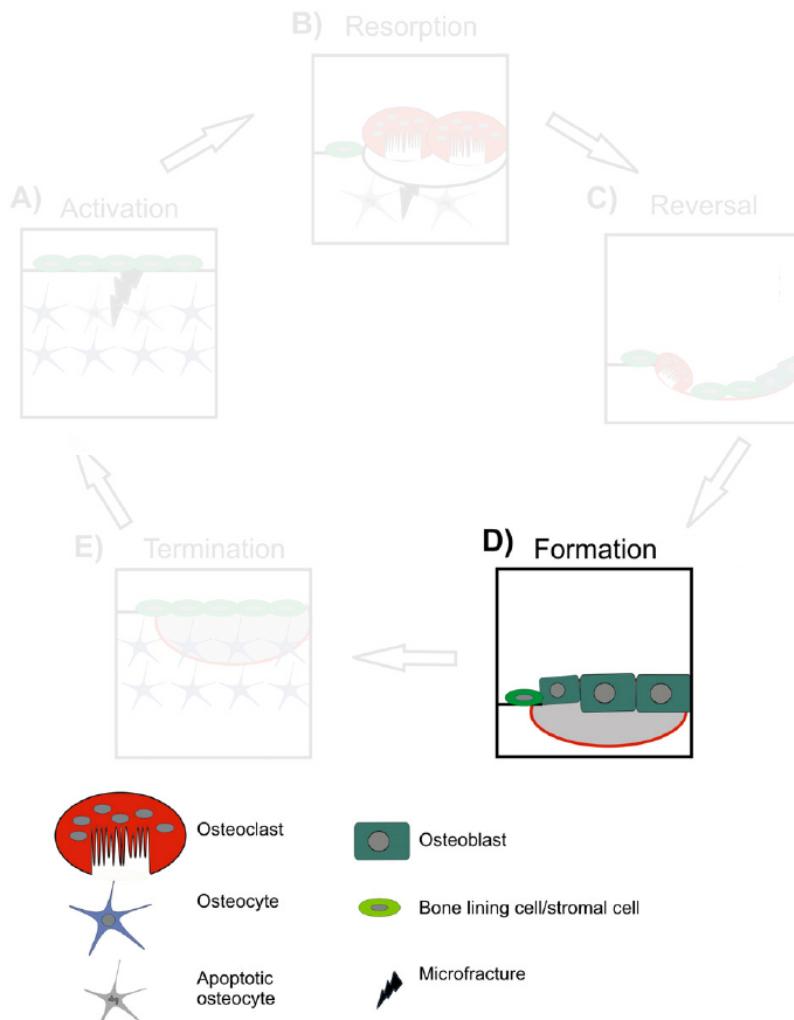
<https://www.youtube.com/watch?v=0dV1Bwe2v6c>

Bone Remodeling - Reversal



- It is a 1-2 week interval between bone resorption and formation
- Not well understood how cell signaling occurs

Bone Remodeling - Formation

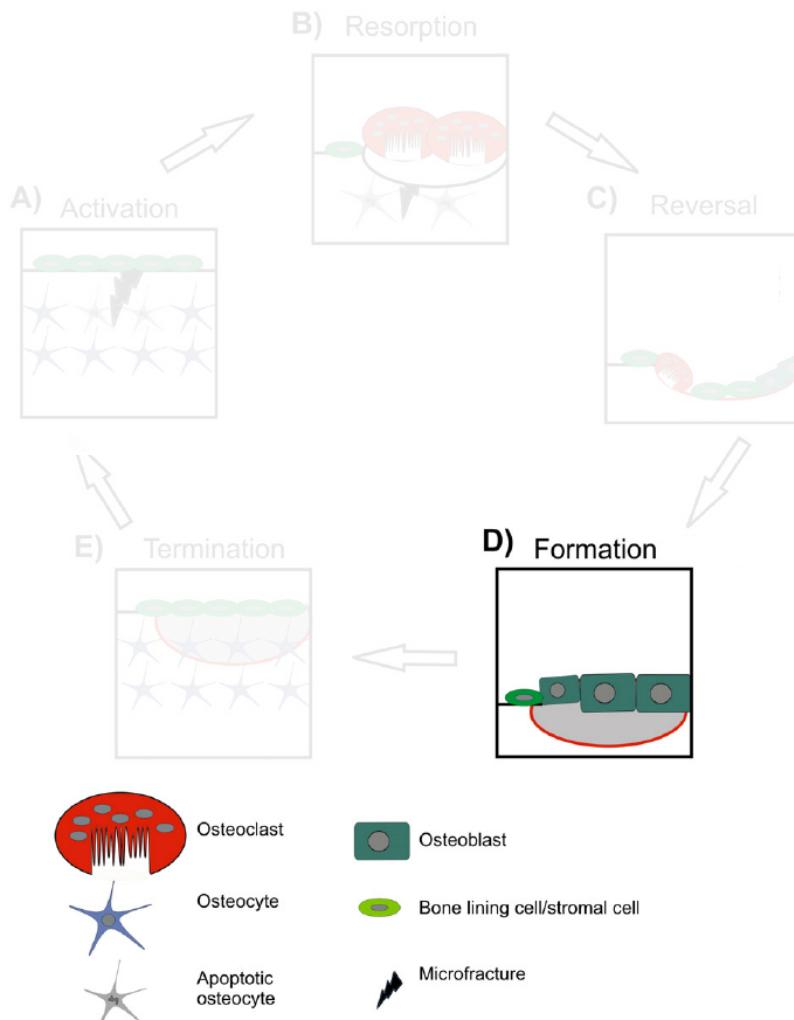


- Osteoblasts start to secrete collagen and other proteins to form new bone
- *Mineralization* occurs as HA precipitates next to collagen
- It takes 2-3 months



<https://www.youtube.com/watch?v=0dV1Bwe2v6c>

Bone Remodeling - Formation

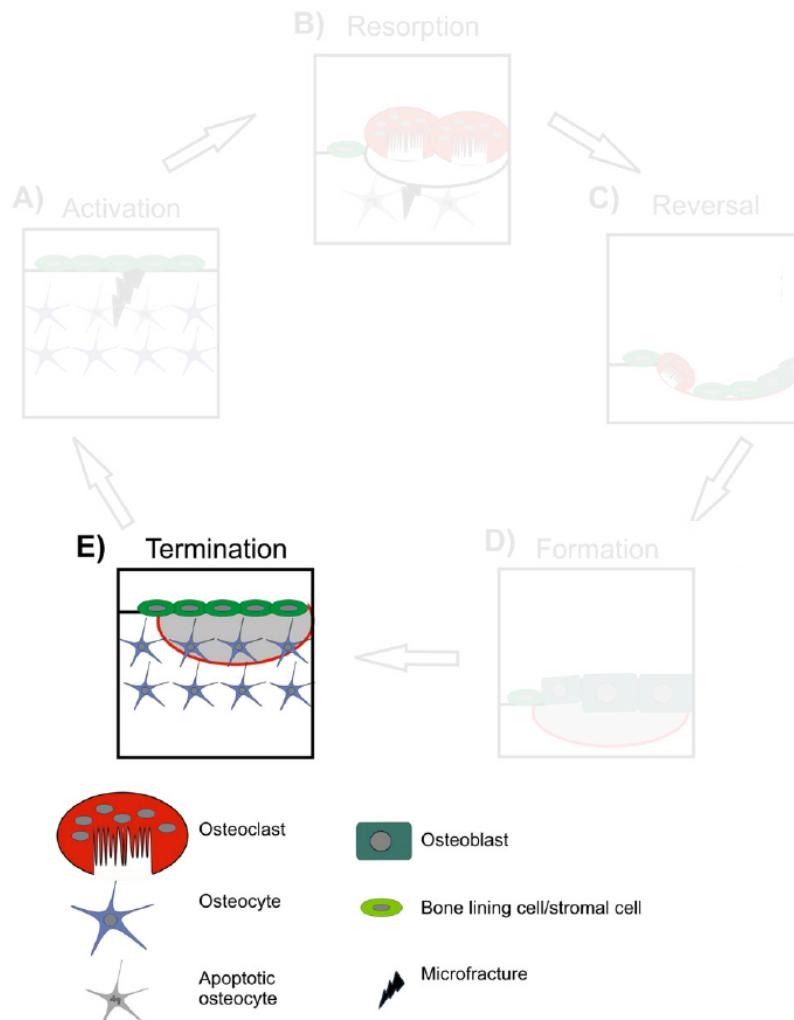


- Osteoblasts start to secrete collagen and other proteins to form new bone
- *Mineralization* occurs as HA precipitates next to collagen
- It takes 2-3 months
- Some osteoblasts remain trapped in the matrix they produce and become osteocytes



<https://www.youtube.com/watch?v=0dV1Bwe2v6c>

Bone Remodeling - Termination



- Osteoblasts on the surface become lining cells



<https://www.youtube.com/watch?v=0dV1Bwe2v6c>