

**Evaluation of the efficacy
of *E. coli*-derived rhBMP-2 in
mini-pig spinal posterolateral fusion**

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HA & *E. coli*-derived rhBMP-2

- **Posterolateral lumbar fusion with rhBMP-2 /HA-TCP after laminectomy in the nonhuman primate**
- **Lower dose of rhBMP-2 achieves spine fusion when combined with an osteoconductive bulking agent in non-human primates**
- **RhBMP-2 produced by mammalian cells : too expensive → major obstacle to its clinical application**
- **Bacterial expression system (eg, *Escherichia coli*) : cost-effective production of rhBMP-2**

Purpose of This Study

- To determine whether HA granule could be an adequate carrier for E-BMP-2
- To assess the osteoinductivity of HA granule-E-BMP-2 composite
- To evaluate the bone forming ability depending on the different dosages of E-BMP-2

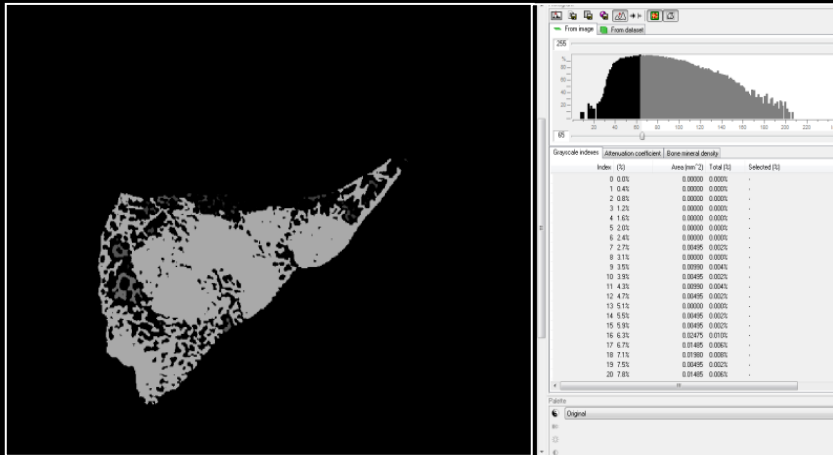
Materials and Methods

- 31 skeletally mature male Yucatan mini-pigs
- Single control group (n = 8) without E-BMP-2 and two experimental groups (1.0 mg/side, n = 8 and 3.0 mg/side, n = 15)
- To evaluate the bone forming ability depending on the different dosages of E-BMP-2
- *E. coli*-derived rhBMP-2 (3 mg/vial, Daewoong)
- Synthetic HA granules (Bongros[®] -HA, Bio-Alpha)

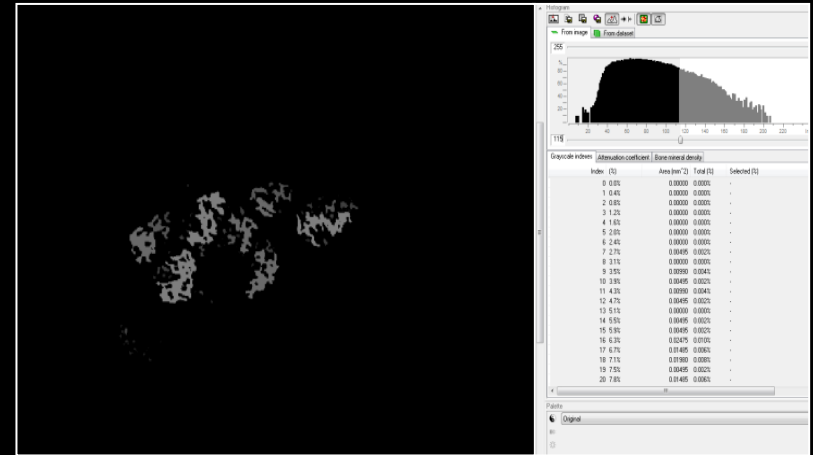
Fusion Assessment

- Radiographic analysis
- Manual palpation
- 3D CT (Toshiba, Tokyo, Japan)
- 3D μ CT (SKYSCAN, Skyscan-1173, Belgium)
- Histologic examinations

μ CT Analysis



Bone Volume Fraction



HA Volume Fraction

Bone volume fraction (%) = $BV/TV \times 100$ (lower gray threshold = 65)

HA volume fraction (%) = $HA \text{ volume}/TV \times 100$ (lower gray threshold = 115)

New bone volume fraction (%) = $BV \text{ fraction} - HV \text{ volume fraction}$

Wound Complication

	Group			N
	Control	1 mg	3 mg	
Developed	1 (12.5%)	2 (28.6%)	4 (30.8%)	7
Not developed	7 (87.5%)	5 (71.4%)	9 (69.2%)	21
N	8	7	13	28

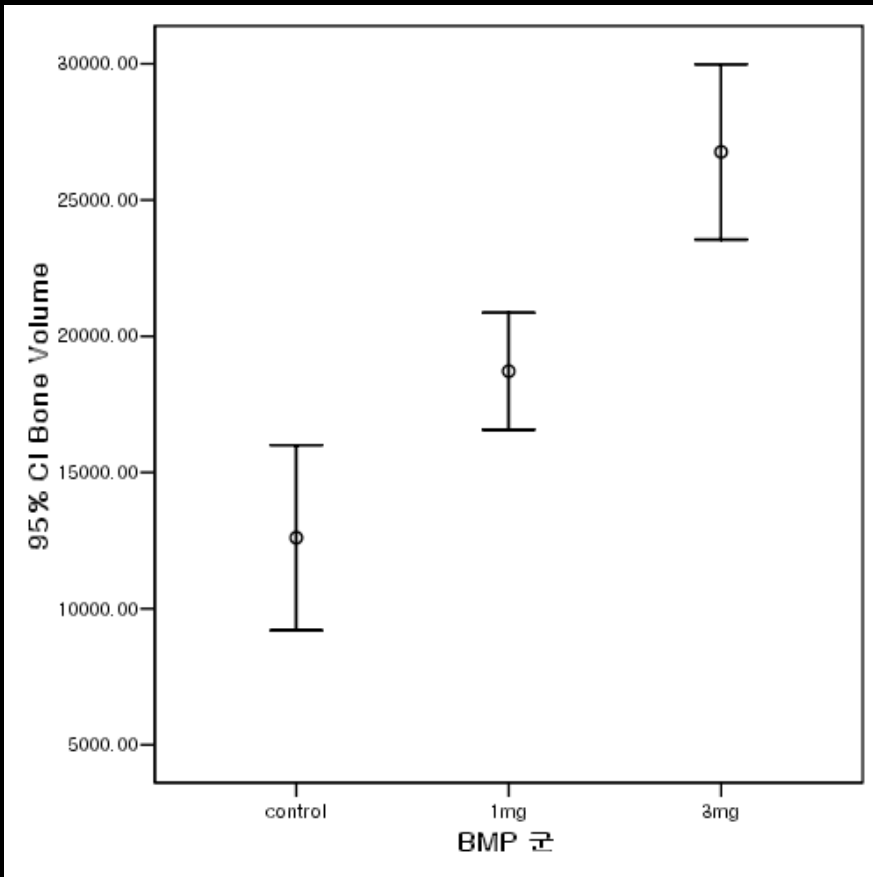
$P = 0.623$

Bony Union

	Group			N
	Control	1 mg	3 mg	
Union	3 (37.5%)	5 (71.4%)	11 (84.6%)	19
Non-union	5 (62.5%)	2 (28.6%)	2 (15.4%)	9
N	8	7	13	28

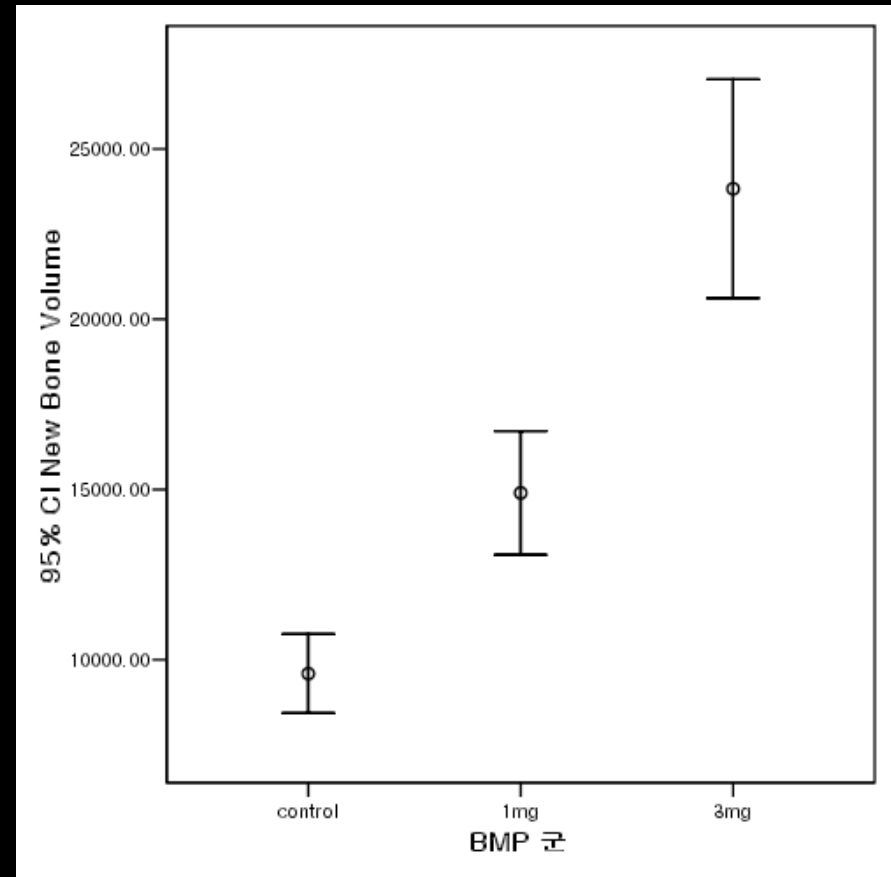
$P = 0.031$

Bone Volume



$P < 0.001$

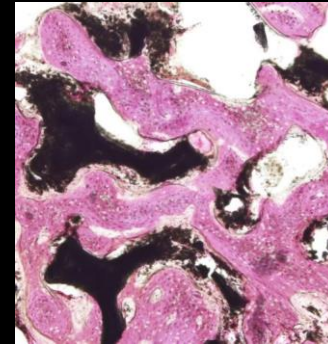
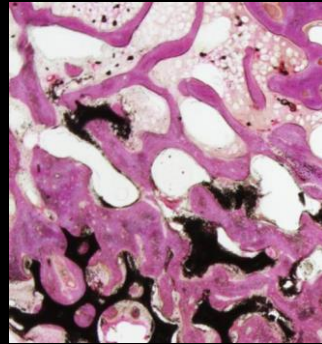
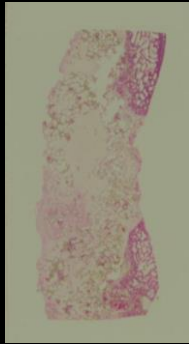
New Bone Volume



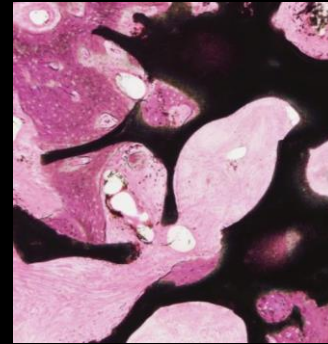
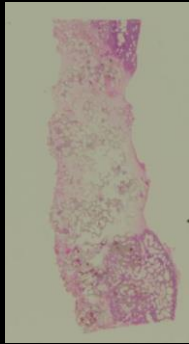
$P < 0.001$

Histologic Analysis ($\times 1$)

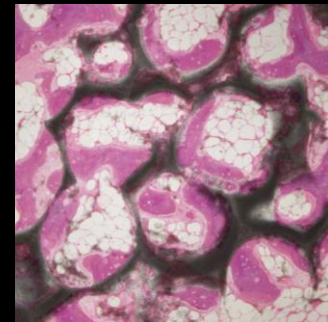
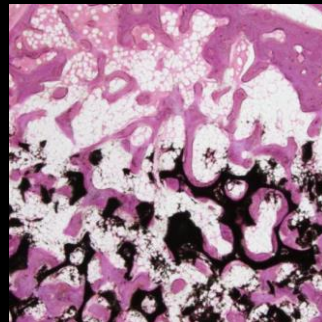
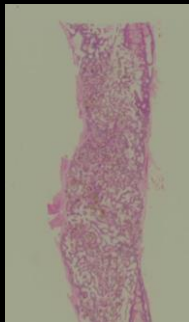
Control



1mg



3mg



($\times 1$)

($\times 10$)

($\times 40$)

Discussion

- One of major obstacle in fusion surgery using rhBMP-2 is its high cost
- Cost-effective production of rhBMP-2 using an *E. coli* system was introduced and several animal studies demonstrated the osteoinductivity of E-BMP-2 in dose-dependent fashion
- Our porcine posterolateral fusion model showed addition of E-BMP-2 significantly increased the fusion rates

HA carrier-E-BMP-2 Combination

- **HA is a major mineral constituent of bone and osteoblasts can deposit bone directly onto this osteoconductive carrier material**
- **Considering the mechanical and biologic environment for posterolateral spine fusion, HA is also useful for rhBMP-2 carrier because of its mechanical resistance to compression force and high affinity for rhBMP-2**

Conclusions

- **E-BMP-2 adsorbed HA granule could be an alternative to autogenous iliac bone graft**
- **Dosage of 1 mg/side E-BMP-2 could be effective in posterolateral spine fusion in porcine model when combined with HA carrier**

DISCLOSURE STATEMENT

The authors have nothing to disclose