

Bisphosphonates as a Countermeasure to Space Flight Induced Bone Loss Increment 31/32 Science Symposium

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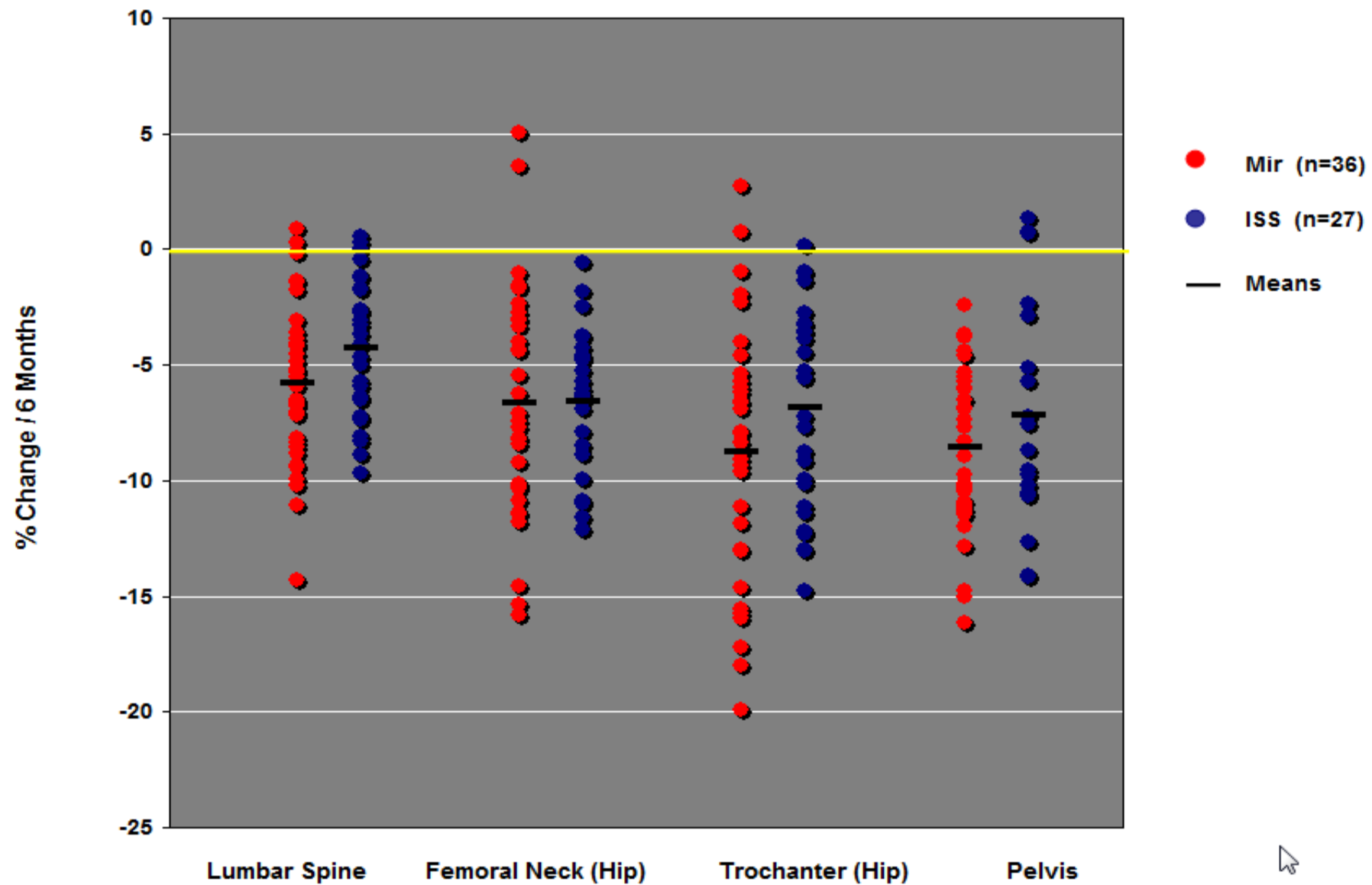
JAXA Team

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Outline

- Background-MIR, ISS
 - DXA
 - QCT
- Bisphosphonate experiment
 - Hypothesis
 - Preliminary results
- Objective of current addendum
- Measurements
- Testing constraints

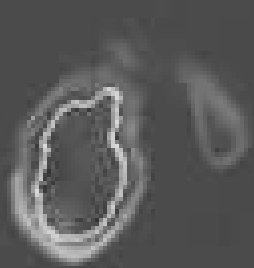
Change in DXA BMD after Long Duration Flight



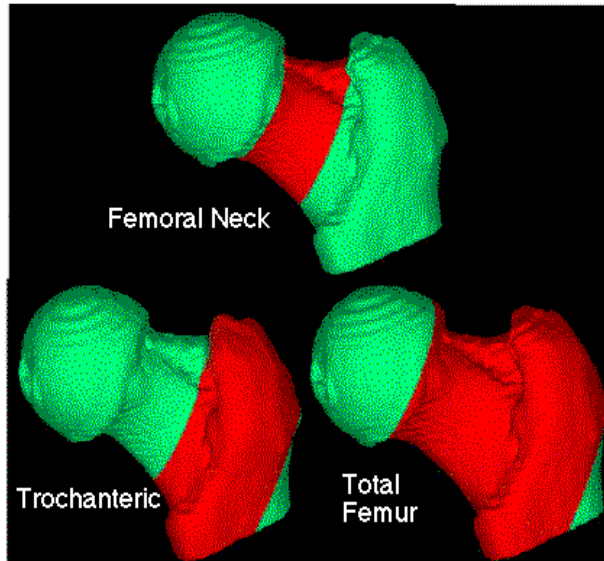


CT Methodology

Regions of Interest



Fem. Neck



Femoral Neck

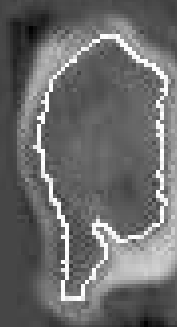
Trochanteric

Total Femur

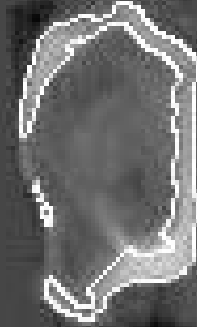


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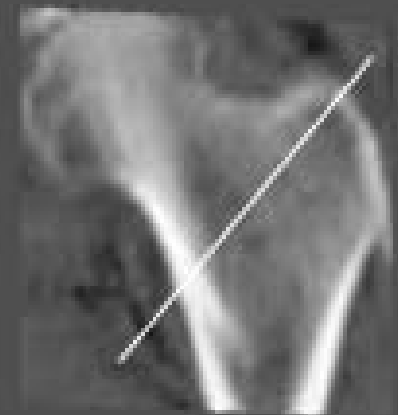
Troch intgl



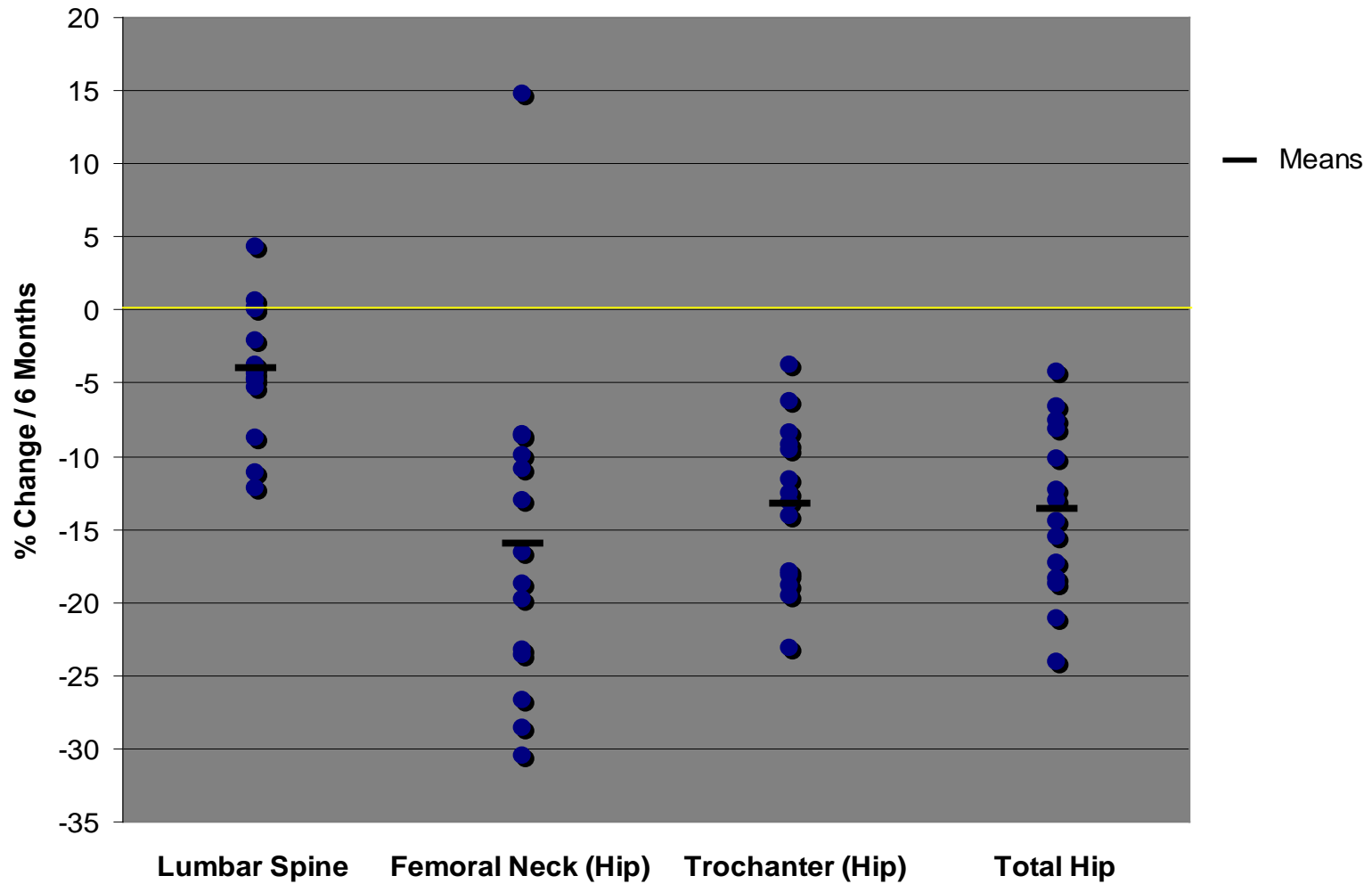
Troch trab



Troch cort.



Change in QCT Trabecular BMD after ISS Flights (n=14)



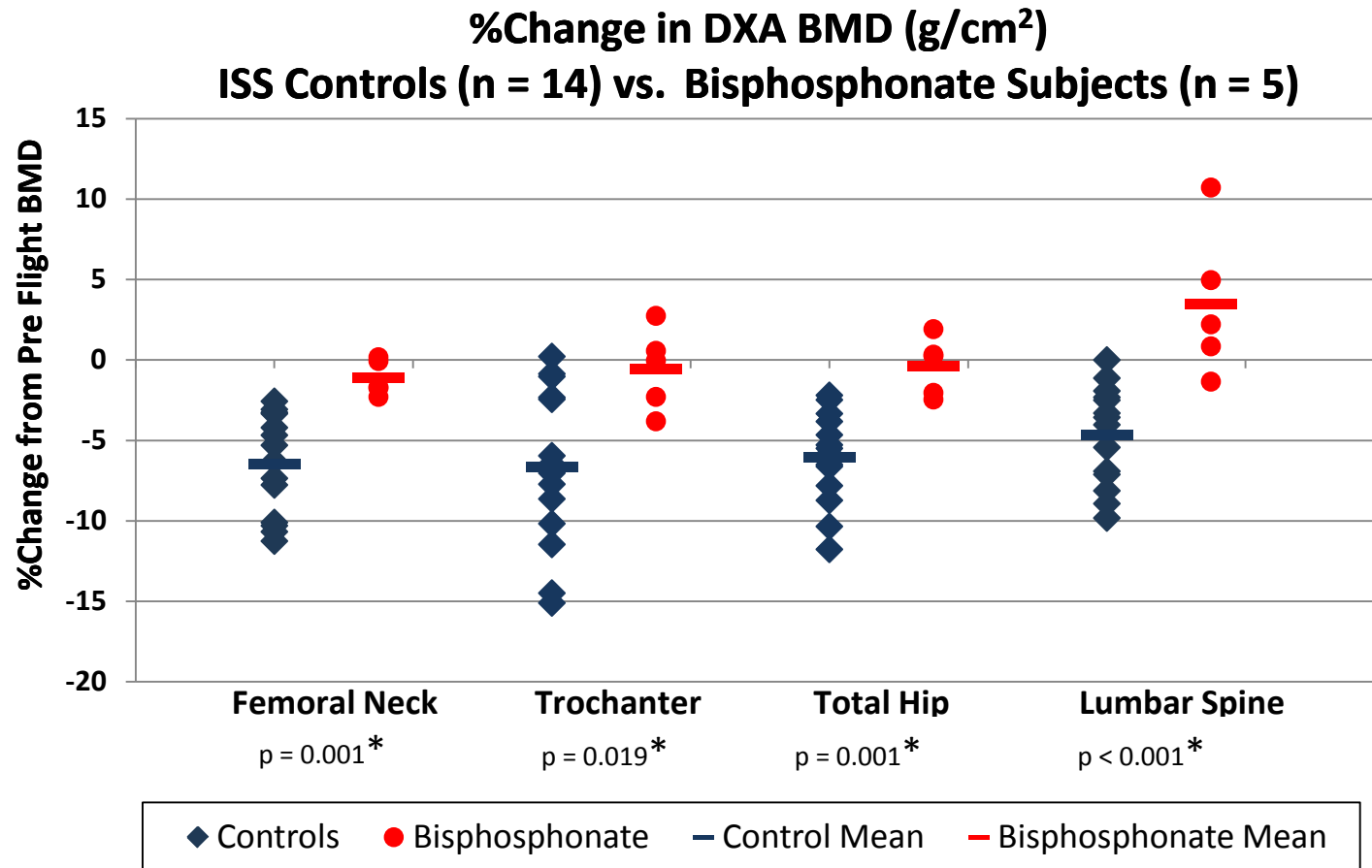
Experiment Hypothesis

The combined effect of anti-resorptive drugs plus in-flight exercise regimen will have a measurable effect in preventing space flight induced bone mass and strength loss and reducing renal stone risk.

Experiment Status

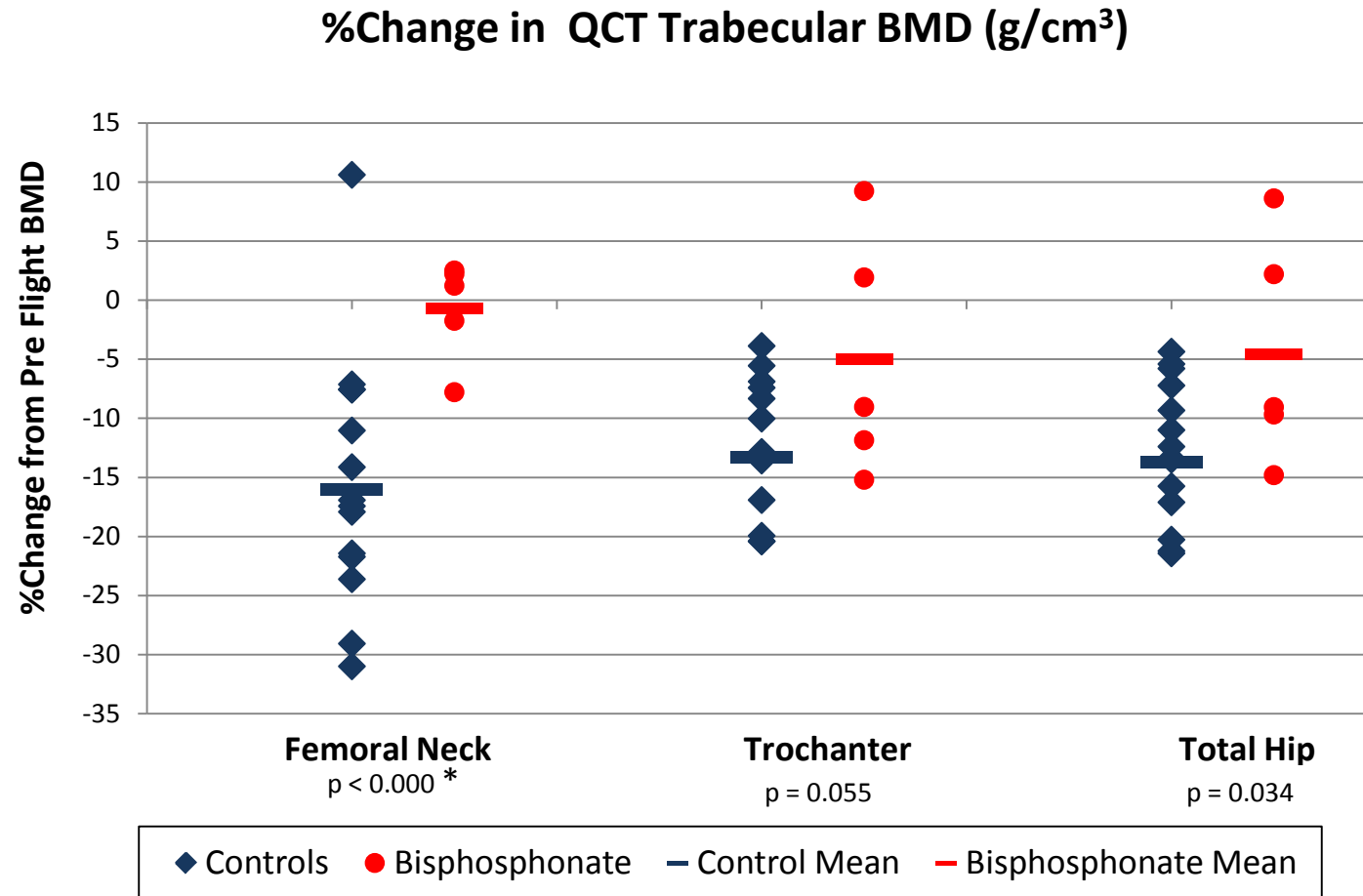
- To date 7 subjects are enrolled -- 70-mg tablet of alendronate once a week before and during flight, starting 17 days before launch
- 5 crewmembers have completed ISS long duration missions and will be reported here.
- 2 additional crewmembers are scheduled to complete the flight portion of the protocol this year

Preliminary Results



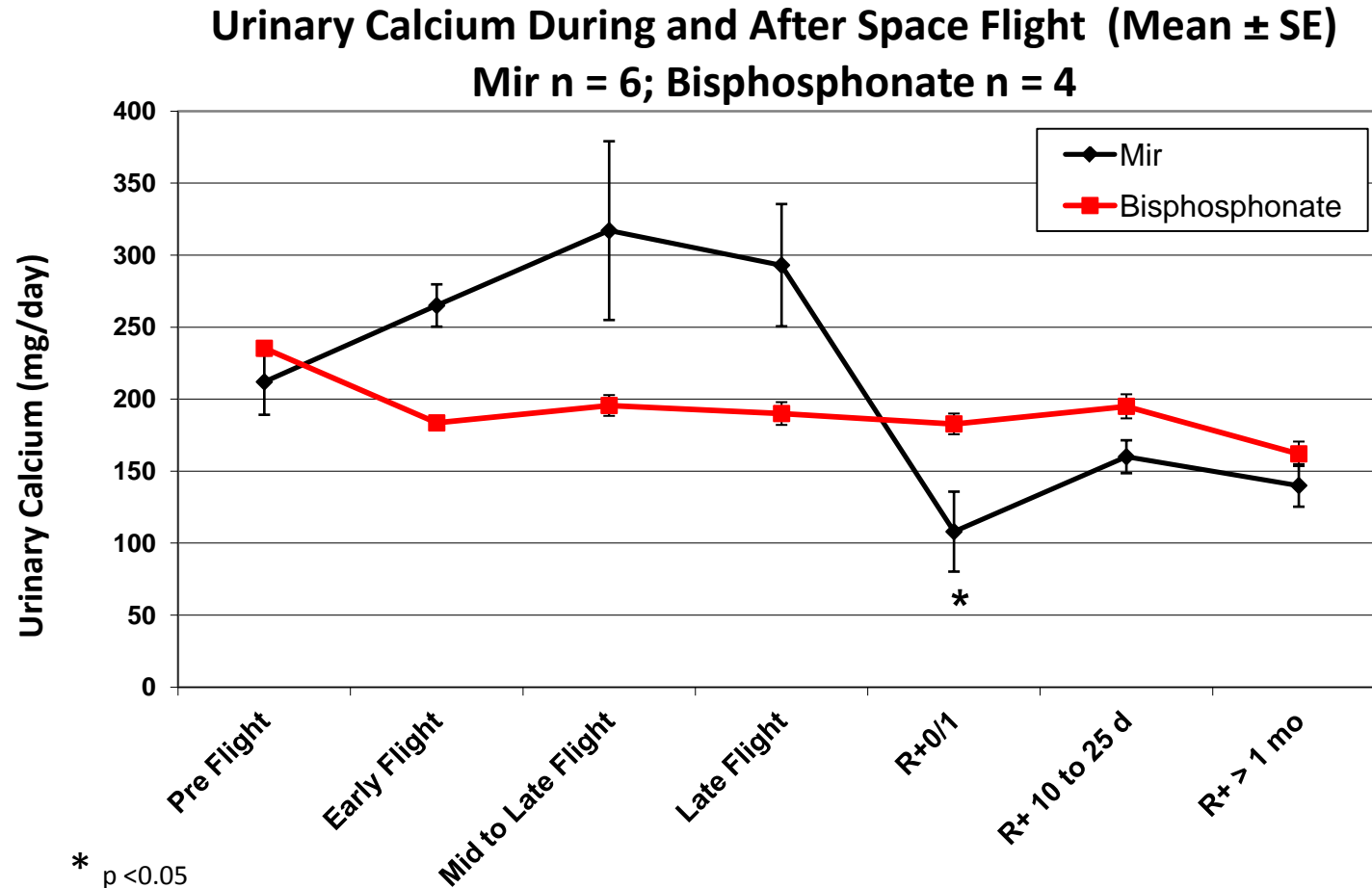
* p value statistically significant when Holm correction for multiple comparisons is applied

Preliminary Results



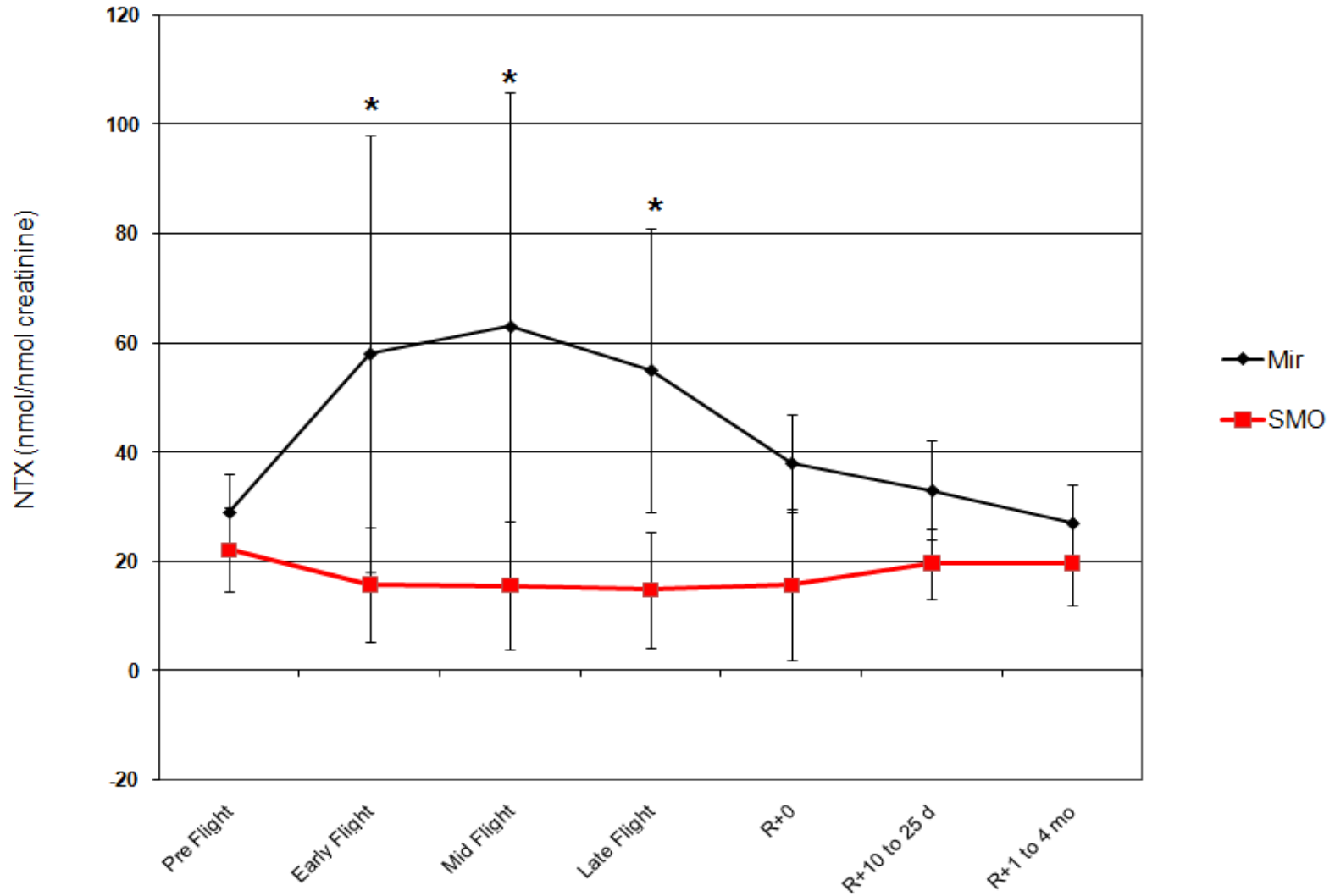
*p value statistically significant when Holm correction for multiple comparisons is applied

Preliminary Results



Preliminary Results

NTX During and After Space Flight (Mean \pm SD)
Mir n = 6; ISS SMO n = 3



Objectives of the Current Study Extension

- Current controls are ISS astronauts who exercised using IRED.
- All subjects in the current study have used ARED, capable of higher loading and more efficient usage.
- New control group will help clarify the impact of ARED alone.

protocol

- 10 long duration ISS crew-male or female
- Exercise with ARED protocol
- Exclude subjects participating in Sprint protocol-Sprint controls can be enrolled
- Exclude subjects taking drugs targeting bone loss

Experiment Measurements

- QCT:** L-45 to L-30 , R+5, R+360
Imaging scan of the hip for measurement of volumetric bone density, strength modeling
Performed at local hospital
Scan takes < 15 minutes; 1 hour allotted for travel time + scanning
Can data share with Sprint study if subject is a Sprint control
- DXA:** L-60 to L-30, R+5, R+360
Imaging scan of the whole body, hip, spine, heel and wrist for measurement of areal bone mineral density
Performed at JSC
Scans take ~ 1 hour
Will data share with existing DXA Medical Requirement
- pQCT:** L-60 to L-30, R+5, R+360
Imaging scan of the lower leg (tibia) for measurement of volumetric bone density
Performed at JSC
Scans take ~50 minutes

Experiment Measurements

Urine Collections:

L-45 , Early In-Flight, Mid In-Flight, Late In-Flight, R+0, R+30, R+360

Levels of various markers of bone metabolism will be measured

24-hour void-by-void

Can data share with Medical Requirements or other studies (e.g., Nutrition SMO)

Blood Draws:

L-45, R+0, R+30, R+360

Levels of various markers of bone metabolism will be measured

Standard blood draw

Can data share with Medical Requirements or other studies (e.g., Nutrition SMO)

Blood draw takes < 10 minutes

Abdominal Ultrasound:

L-30 to 180, R+30

Imaging of bladder, ureters and kidneys for presence of renal stones

Performed at local imaging facility

Ultrasound takes ~ 1.5 hour, including travel time

Calcium and Vitamin D supplements:

Vitamin D: 800 IU daily from L-45 to launch; Ca: 1000 mg daily from L-17 to launch

Test Constraints

| Test | Constraints |
|-------------------|--|
| QCT | Remove all metal (i.e., jewelry) or clothes containing metal No radioisotopes or radio opaque contrast agents for one week prior to test. |
| DXA | Remove all metal (i.e., jewelry) or clothes containing metal No radioisotopes or radio opaque contrast agents for one week prior to test. |
| pQCT | Remove all metal (i.e., jewelry) or clothes containing metal No radioisotopes or radio opaque contrast agents for one week prior to test. |
| Urine collections | 24-hr. urine collection starts with first void of the day and concludes with first void of the following day |
| Blood draws | Overnight fast |
| Ultrasound | Overnight fast Arrive at imaging center with full bladder (drink 32 oz. of water before arrival) |

Summary

| Preflight | Inflight | Postflight |
|--|------------------------------|------------------------------|
| QCT: 60 min * | | QCT: 120 min * |
| DXA: 60 min * | | DXA: 120 min * |
| pQCT: 50 min | | pQCT: 100 min |
| Blood draw: 10 min * | | Blood draw: 30 min * |
| Urine collection: 30 min * | Urine collections: 510 min * | Urine collection: 90 min * |
| Abdominal ultrasound: 90 min | | Abdominal ultrasound: 90 min |
| Ca and Vitamin D: 30 sec/day, 22.5 min total | | |
| Total Time: 322.5 min | Total Time: 510 min | Total Time: 550 min |

* Potential for data sharing with Med Requirements or other studies