

The *CYP3A4**18 Genotype in the Cytochrome P450 3A4 Gene, a Rapid Metabolizer of Sex Steroids, Is Associated With Low Bone Mineral Density

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Osteoporosis is influenced by genetic factors. The interindividual variability in the activity of CYP3A, the metabolic enzyme of sex hormones, may result from genetic polymorphisms. In a study of 2,178 women of ages 40–79 years, the presence of the *CYP3A4**18 variant was found to be significantly associated with low bone mass. *In vitro* functional analyses indicate that *CYP3A4**18 is a gain-of-function mutation in sex steroid metabolism, resulting in rapid oxidation of estrogens and testosterone; *in vivo* pharmacokinetics using midazolam (MDZ) verify the altered activity of the *CYP3A4**18, showing lower metabolic turnover in the mutant than in the wild type. Molecular modeling reveals the structural changes in the substrate recognition sites of *CYP3A4**18 that can cause changes in enzymatic activity and that potentially account for the difference between the catalytic activities of estrogen and MDZ, depending on the genotype. The results indicate that a genetic variation in the *CYP3A4* gene—as a gain-of-function mutation in the metabolism of certain CYP3A substrates, including sex steroids—may predispose individuals to osteoporosis.

Osteoporosis is a multifactorial disease with a strong genetic component. Genetic factors influence bone mass, bone size, bone quality, and bone turnover, and they may modulate the risk of osteoporosis.¹ Many candidate genes have thus far been suggested, but none has yet been supported strongly and consistently by subsequent studies.

Members of the cytochrome P450 3A (*CYP3A*) subfamily are the major enzymes in the nicotinamide adenine dinucleotide phosphate-oxidase-dependent oxidative metabolism of various endogenous and exogenous compounds, including sex hormones. A wide interindividual variability in the expression and catalytic activity of *CYP3A* has been reported in the general population.² The interindividual variation, exceeding 30-fold in some populations, may influence the circulating levels of endogenous sex steroids and thereby mediate the risk of certain estrogen-associated diseases such as osteoporosis.^{3–5}

This variation is, at least partly, caused by multiple environmental factors, including induction by drugs, chemicals, and

endogenous compounds, but genetic factors are also among the most plausible mechanisms.

The *CYP3A* activity of the adult human liver is the sum activity of at least two *CYP3A* family members: *CYP3A4* and *CYP3A5*. To date, approximately 40 allelic variants in the *CYP3A4* gene have been reported as showing marked ethnic differences in allele frequencies.^{6,7} *CYP3A5*, the second-most important *CYP3A* protein in the liver, has characteristic polymorphic expression caused by genetic variation; certain genetic variations, such as *CYP3A5**3 and *CYP3A5**6, give rise to an aberrantly spliced mRNA with a premature stop codon, which produces a nonfunctioning protein.^{8,9}

We therefore hypothesized that genetic variations of *CYP3A* proteins, the important metabolizing enzymes of estrogen, might be among the major determinants in the development of osteoporosis. To identify the candidate genetic variations in the *CYP3A4* gene, we sequenced the entire coding region and performed detailed structural and functional studies, including

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