



Invited review

Nanozymes for biomedical applications in orthopaedics

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ABSTRACT

As the next generation of artificial enzymes, nanozymes have attracted increasing attention in biomedical applications due to their multienzyme-like characteristics, multifunctionalities, low cost, and high stability. By taking advantage of their diverse activities, a growing number of nanozyme-mediated therapeutic strategies have been developed for various diseases. Herein, we provide a brief review of the representative studies of nanozymes, especially in orthopaedic diseases over the past decade, which include arthritis, osteoporosis, bone regeneration, bacteria-associated infections, and osteosarcoma. Moreover, the future potential applications and some major challenges are also discussed. This review would not only provide some instructive views of nanozymes but also promote the development of enzyme-mimetic strategies in orthopaedics.

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1. Introduction

Since Yan's group demonstrated the peroxidase (POD)-like activity of ferromagnetic nanoparticles (Fe₃O₄ NPs) in 2007 (Gao et al., 2007), numerous nanomaterials such as metals (Y. Lin, Ren, & Qu, 2014; Miao et al., 2020), metal oxides (Soh et al., 2017; Vernekar et al., 2014), metal-organic frameworks (MOFs) (Nath, Chakraborty, & Verpoort, 2016; Wu et al., 2021), carbons (Fan et al., 2018; Sun, Zhou, Ren, & Qu, 2018), and others (Singh, NaveenKumar, Geethika, & Mugesh, 2021; Yin et al., 2016), have been reported to have diverse enzyme-like characteristics. These nanomaterials are defined as “nanozymes”, which integrates the merits of nanomaterials and enzymes (H. Wei, Qiao, et al., 2021; Wei & Wang, 2013; Wu et al., 2019; R. Zhang, Yan, & Fan, 2021).

In recent years, nanozymes have attracted increasing attention in various biomedical applications due to their multienzyme-like activities, multifunctionalities, low cost, and high stability (Huang, Ren, & Qu, 2019; Jiang et al., 2019; Wu et al., 2019). They

can modulate the levels of reactive oxygen species (ROS), reactive nitrogen species (RNS), and some specific biomolecules in cellular metabolism, which is essential to the treatment of different diseases (H. Wang, Wan, & Shi, 2019). Generally, ROS scavenging activities originate from •OH radical eliminating and antioxidant enzyme-mimicking abilities, such as catalase (CAT), superoxide dismutase (SOD), and glutathione peroxidase. ROS generating activities originate from POD- and oxidase (OXD)-like abilities, which involve the production of threatening •OH and H₂O₂. Some nanozymes also show RNS (such as NO• radical and ONOO⁻) scavenging activities (Cao et al., 2020; Mu et al., 2019). In addition, hydrolase-like abilities toward different substrates (such as phosphates, proteins, and saccharides) have been reported as well (S. Li et al., 2022).

Based on the above diverse activities, a growing number of studies have developed nanozyme-mediated therapeutic strategies for different diseases, including local inflammation (Choi, Cha, & Kim, 2020; Kumar, Adjei, Brown, Liseth, & Sharma, 2019; Y. Liu et al., 2020), injury therapies (Han et al., 2018; Y. Liu et al., 2017; Ni et al., 2018), infectious diseases (X. Li, Qi, et al., 2019; Xu et al., 2019), neurodegenerative disorders (Hao et al., 2019; Kwon et al., 2018; Ma et al., 2020), dental diseases (Bao, Zhao, Sun, Hu, & Yang, 2018; X. Chen, Xie, et al., 2021), and tumors (He et al., 2020; Sang et al., 2020; Tang, He, Liu, Yan, & Fan, 2021). In this review, we focused on the biomedical applications of nanozymes in orthopaedics. The symptoms covered in this review include

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inflammatory arthritis, osteoporosis, traumatic bone defects, bacteria-associated infections, and osteosarcoma. Nanozyme-involved systems provide novel insights into strategies of efficient therapeutic methods in bone diseases. In the final section, we discuss the potential applications and some major challenges that the field of nanozymes faces. We hope that this review will not only provide some instructive views of nanozymes but also promote the development of enzyme-mimicking strategies in orthopaedics.

2. Biomedical applications in orthopaedics

2.1. Osteoarthritis (OA)

Osteoarthritis (OA) is a degenerative joint disease which would lead to various levels of loss in joint functions (Neogi, 2013; Rahmati, Nalesso, Mobasheri, & Mozafari, 2017). It is primarily characterized by articular cartilage degradation, subchondral bone thickening, osteophyte formation, and joint degeneration (Varela-Eirin et al., 2018). As the obese and elderly population grows, the prevalence of OA increases, resulting in deleterious effects on more than 250 million people worldwide (Hunter & Bierma-Zeinstra, 2019; Neogi, 2013). Generally, the pathological deterioration is closely related to oxidative stress caused by excessive ROS in joints during the process of OA (Morita et al., 2007; Yudoh et al., 2005). Increased ROS production disturbs the homeostasis of the joint microenvironment induced by lipid peroxidation, protein carbonylation, and DNA damage (Lepetsos & Papavassiliou, 2016; Portal-Nunez, Esbrit, Alcaraz, & Largo, 2016). Furthermore, overproduced ROS also promotes the activation of macrophages and stimulates pro-inflammatory signaling pathways, leading to an aggravated inflammatory response (Y.-C. Liu, Zou, Chai, & Yao, 2014; Shapouri-Moghaddam et al., 2018).

Therefore, recent studies have focused on scavenging excessive ROS to alleviate oxidative stress in OA pathogenesis, such as using nanozymes as natural antioxidant enzyme equivalents (Hou et al., 2021; Kumar et al., 2019). As shown in Fig. 1(a–c), Sharma's group synthesized PEG-MnO₂ nanoparticles (NPs) with a size of less than 20 nm to prolong retention time in the joint cavity for continuous ROS scavenging (Kumar et al., 2019). The PEG-MnO₂ NPs exhibited adequate ROS scavenging ability in an *ex vivo* bovine model of IL-1 β -induced chronic OA. They could prevent the development of OA by reducing the loss of glycosaminoglycans, a key component of cartilage extracellular matrix. Moreover, PEG-MnO₂ NPs exhibited chondroprotection effects by reducing the release of stimulated nitric oxide and downregulating oxidative stress-related gene expression in cytokine-challenged chondrocytes. As shown in Fig. 1(d), Cai's group proposed a nanozyme-mediated microenvironment remodeling strategy to protect chondrocytes and delay OA by applying hollow Prussian blue (PB) nanozymes (HPBzymes) *in vitro* and *in vivo* (Hou et al., 2021).

2.2. Rheumatoid arthritis (RA)

Rheumatoid arthritis (RA), a chronic autoimmune disease, causes progressive disability due to severe cartilage and bone damage (Smolen, Aletaha, & McInnes, 2016). As a multifactorial disease, the etiologies of RA involve genetic factors, environmental agents, autoimmunity, and nutritional status (George, Shyni, & Raghu, 2020). The multiplicity mentioned above would induce the infiltration of inflammatory cells in the joint synovium and further promote RA progression (Udalova, Mantovani, & Feldmann, 2016). Anti-inflammatory drugs and immunosuppressants have been exploited for using alone or in combination with clinical RA treatments, which include non-steroidal anti-inflammatory drugs, glucocorticoids, and disease-modifying anti-rheumatic drugs

(Burmester & Pope, 2017; Q. Guo et al., 2018). Although they are effective in disease remission and prevention of deformity, nonspecific targeting and prolonged repetitive use of these drugs may lead to serious side effects, such as osteoporosis, muscular atrophy and drug resistance (W. Wang, Zhou, & Liu, 2018).

To develop novel therapeutic strategies, various nanozymes have been employed for RA treatment. As shown in Fig. 2(a and b), Hyeon and co-workers developed manganese ferrite and CeO₂-anchored mesoporous SiO₂ NPs (MFC-MSNs) with synergistic ROS scavenging and O₂ generation abilities to efficiently facilitate the polarization of M1-to-M2 macrophages (J. Kim, Kim, Song, et al., 2019). Moreover, MSNs showed better therapeutic effects after encapsulating the antirheumatic drug methotrexate. In another work, Kim's group combined CeO₂ NPs with albumin to target inflamed joints in RA while ameliorating hypoxia, scavenging ROS and polarizing M1 into M2 macrophages (Kalashnikova et al., 2020). Besides metal oxides, MOFs are also excellent candidates for designing high-performance biomedical nanozymes due to their well-defined structures which are similar to proteins (S. Li et al., 2022; Wu et al., 2021). In Fig. 2(c), Shi's group established an *in situ* generated anti-inflammatory nanosystem (Mn-HMSN-PEG-H₂TE-2-PyP⁴⁺, denoted as MHPH) with SOD-like and CAT-like abilities for the catalytic treatment of RA (B. Yang, Yao, Yang, Chen, Guo, et al., 2022). Owing to the coordination environment of active Mn sites, manganese porphyrin presented excellent antiarthritic efficacy compared with the typical antioxidant ascorbic acid in an adjuvant-induced arthritis animal model. They also applied the coordination geometry mimicking concept in construction of 2D MOF nanosheets to achieve biomimetic enzyme catalysis (B. Yang, Yao, Yang, Chen, & Shi, 2022). Apart from utilizing the intrinsic enzymatic activity of nanozymes, recent studies have developed a promising strategy of combining nanozymes and other therapeutic approaches, which included using concave-cubic rhodium nanozyme for the enhancement of ultrasound-driven sonodynamic therapy (W. Li, Han, et al., 2021).

2.3. Osteoporosis (OP)

Osteoporosis (OP) is defined as a systemic skeletal disease with clinical manifestations including low bone mass, micro-architectural deterioration of bone tissue, and enhanced skeletal fragility (Compston, McClung, & Leslie, 2019; Vidal, Thibodaux, Neira, & Messina, 2019). Generally, OP is classified into two categories, primary type and secondary type, according to the etiology (Sozen, Ozisik, & Basaran, 2017). The primary OP is mainly attributed to aging and age-related decreases of sex steroids (Ji & Yu, 2015), while the secondary OP is related to undesirable pathological conditions or medications (Mirza & Canalis, 2015). Under normal conditions, there is a dynamic balance between bone resorption and bone formation (Kenkre & Bassett, 2018). However, the unbalanced skeletal homeostasis always results in enhanced bone resorption and decreased bone mass in OP patients (Baron & Hesse, 2012).

The current treatments for OP are largely limited to anti-resorptive drugs and anabolic agents that stimulate bone formation (Kanis, Cooper, Rizzoli, & Reginster, 2019). Due to obvious side effects, these treatments are unable to achieve satisfying therapeutic effects (H. Li, Xiao, et al., 2021; Reginster et al., 2014). Meanwhile, regulating the local immune environment affected by excessive ROS has been considered as a novel strategy to restore the intrinsic balance of bone metabolism (Chen et al., 2015; J. Li, Han, et al., 2021). For example, CeO₂ attracted much attention for OP treatment due to its multienzyme-like activities and outstanding antioxidant effect through switching between the Ce³⁺/Ce⁴⁺ oxidation states during redox reactions (Pinna et al., 2021). Ceria

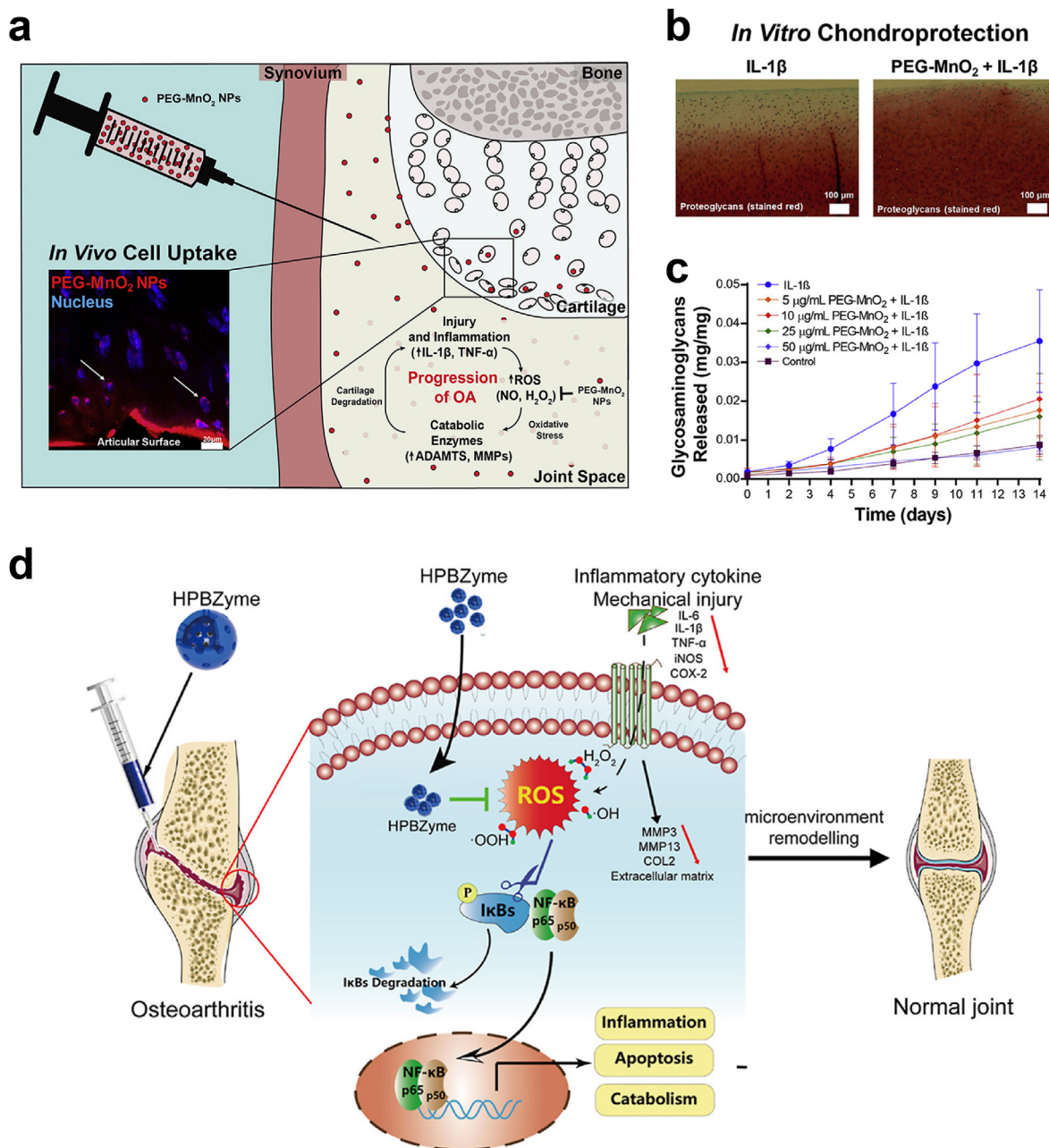


Fig. 1. Nanozymes for OA therapy. (a) Chondroprotective mechanism and intracellular localization of MnO₂ NPs in IL-1 β -induced OA model. (b) Safranin-O staining (scale bar = 100 μ m). (c) Measurement of released glycosaminoglycans. (d) Therapeutic mechanisms of HPBzymes in OA mouse model. (a–c) Adapted from (Kumar et al., 2019), copyright 2019. (d) Adapted from (Hou et al., 2021), copyright 2021.

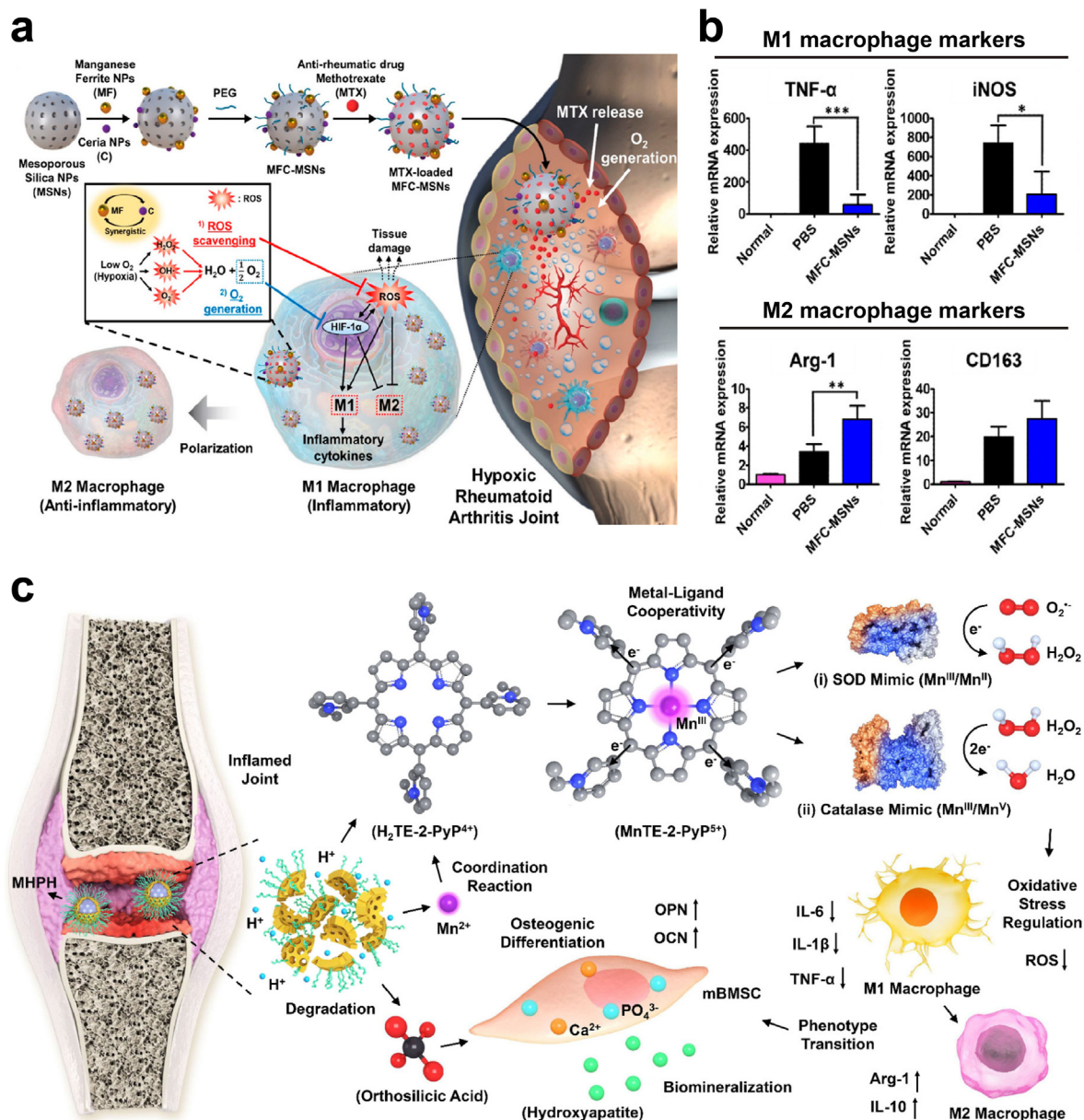


Fig. 2. Nanozymes for RA therapy. (a) Therapeutic mechanisms of MFC-MSNs in RA treatment. (b) qRT-PCR analysis of M1 and M2 macrophage markers in synovial tissue 30 days after injection. (n = 3). *p < 0.05, **p < 0.01, ***p < 0.001. (c) Schematic illustration of the therapeutic concept of MHPH nanomedicine for catalytic anti-inflammatory RA treatments. (a, b) Adapted from (J. Kim, Kim, Song, et al., 2019), copyright 2019. (c) Adapted from (B. Yang, Yao, Yang, Chen, Guo, et al., 2022), copyright 2022.

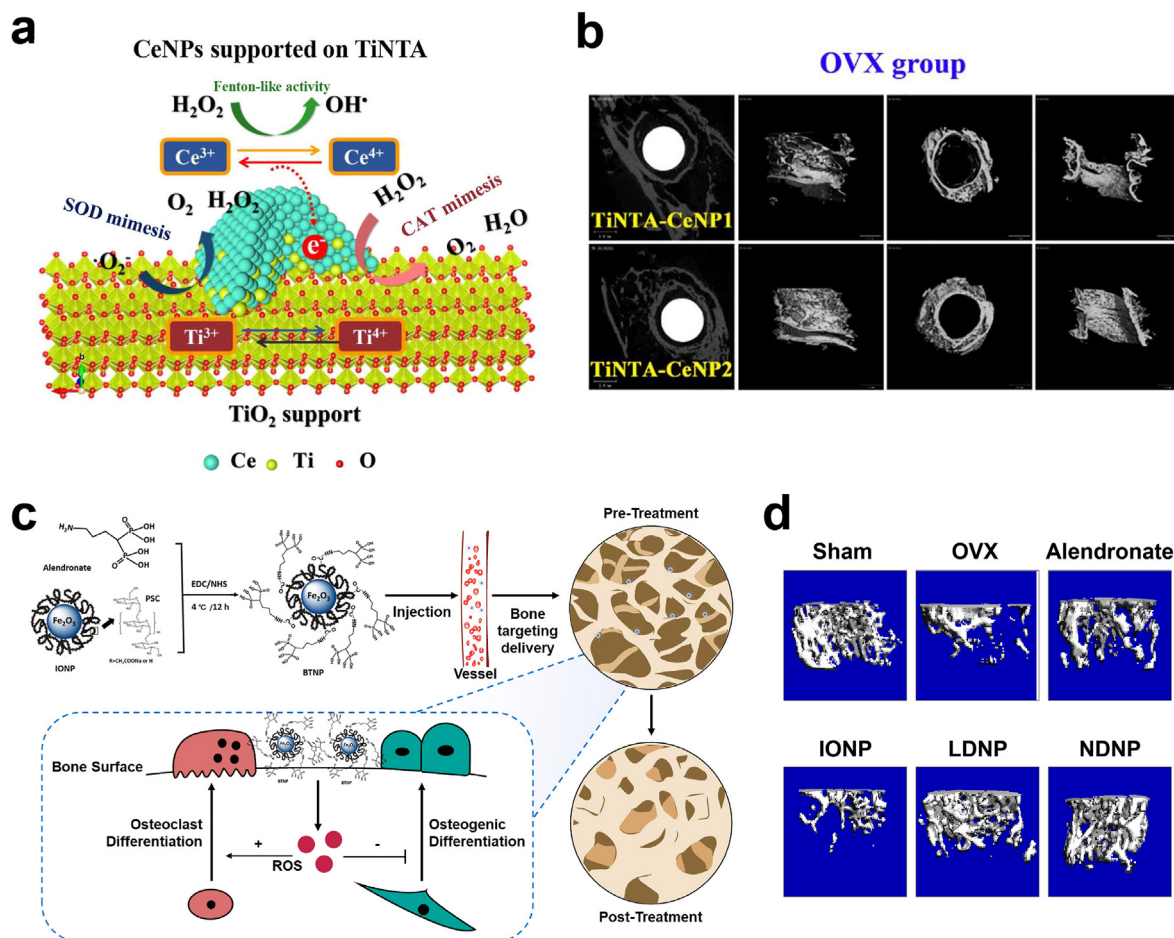


Fig. 3. Nanozymes for OA therapy. (a) Schematic illustration of CeO₂ NPs loaded on a vertically aligned TiO₂ nanotube array. (b) Cross-sectional 2D images and 3D reconstruction images of the peri-implant trabecular bone structure. Scale bar = 1.0 mm *p < 0.05, **p < 0.01. (c) Synthesis of bone targeting iron oxide NPs loaded with alendronate. (d) Micro-CT reconstruction images of the distal femurs in postmenopausal OP mouse model. (a, b) Adapted from (Shao et al., 2021), copyright 2021. (c, d) Adapted from (Zheng et al., 2022), copyright 2022.

nanozymes were also employed as an additive in orthopedic implants for improving osseointegration at the bio-interface. In Fig. 3(a and b), it showed that the interaction between vertically aligned TiO₂ nanotube array and CeO₂ NPs (TiNTA-CeNPs) contributed to ROS elimination (Shao et al., 2021). TiNTA-CeNPs maintained cycling stability between Ce³⁺ and Ce⁴⁺ in PBS with H₂O₂, which was possibly due to the preferable phosphate adsorption on surface Ti³⁺ in TiNTA. Moreover, TiNTA-CeNPs accelerated the regeneration of new bone in the oxidative stress-related rat OP model. In addition, as shown in Fig. 3(c and d), Jiang's group further extended the treatment of iron oxide NPs in postmenopausal OP by loading the iron oxide NPs with bone targeting bisphosphonates (Zheng et al., 2022).

2.4. Bone regeneration

Bone regeneration is the essential management approach for massive bone defects following traumatic fracture, tumor resection, infection and skeletal abnormalities (Verrier et al., 2016). Autografts, allografts, and xenografts are the most commonly used bone grafts to accelerate bone regeneration, but their clinical applications are limited by the disadvantages such as donor-site pain, antigenic response, and transmission of zoonotic diseases (Oryan, Alidadi, Moshiri, & Maffulli, 2014). Therefore, bone tissue engineering has been introduced to develop bone substitutes via the

synergistic combination of biomaterials, cells, and growth factors (Koons, Diba, & Mikos, 2020).

Nanozymes, as a kind of novel catalytic biomaterial, have been recently used in bone tissue engineering (Golchin et al., 2017). The most representative ceria nanozymes play an essential role due to their remarkable antioxidant ability, signaling pathway regulation, and osteogenic differentiation enhancement (K. Li, Xie, You, Huang, & Zheng, 2016; F. Wei, Qiao, et al., 2021; S. Yang, Ji, Luo, Li, & Gao, 2021; Yu et al., 2022). As shown in Fig. 4(a–e), Coathup's group demonstrated the immunomodulatory and pro-osteogenic capacities of CeO₂ NPs under both acute and chronic inflammatory conditions induced by LPS (F. Wei, Qiao, et al., 2021). CeO₂ NPs not only increased the expression of anti-inflammatory cytokines in macrophages but also enhanced mesenchymal stem cell proliferation, osteogenic differentiation, and mineralization at the same concentration. Furthermore, ceria nanozymes have been incorporated in conventional scaffolds as functional additives to optimize the mechanical, topographical, and biological properties of scaffolds (Karakoti et al., 2010; Mandoli et al., 2010). In addition, other types of nanozymes also show their potential in bone tissue engineering. Taking carbon-based nanozyme as an example, as shown in Fig. 4(f and g), Xu and co-workers constructed fullerol-embedded hydrogel microfluidic spheres (FMS) with robust ROS eliminating capability at the extracellular and intracellular levels, aiming to protect bone marrow mesenchymal stem cells (BMSCs) from oxidative stress (J. Yang, Liang, et al., 2021). Moreover, FMSs

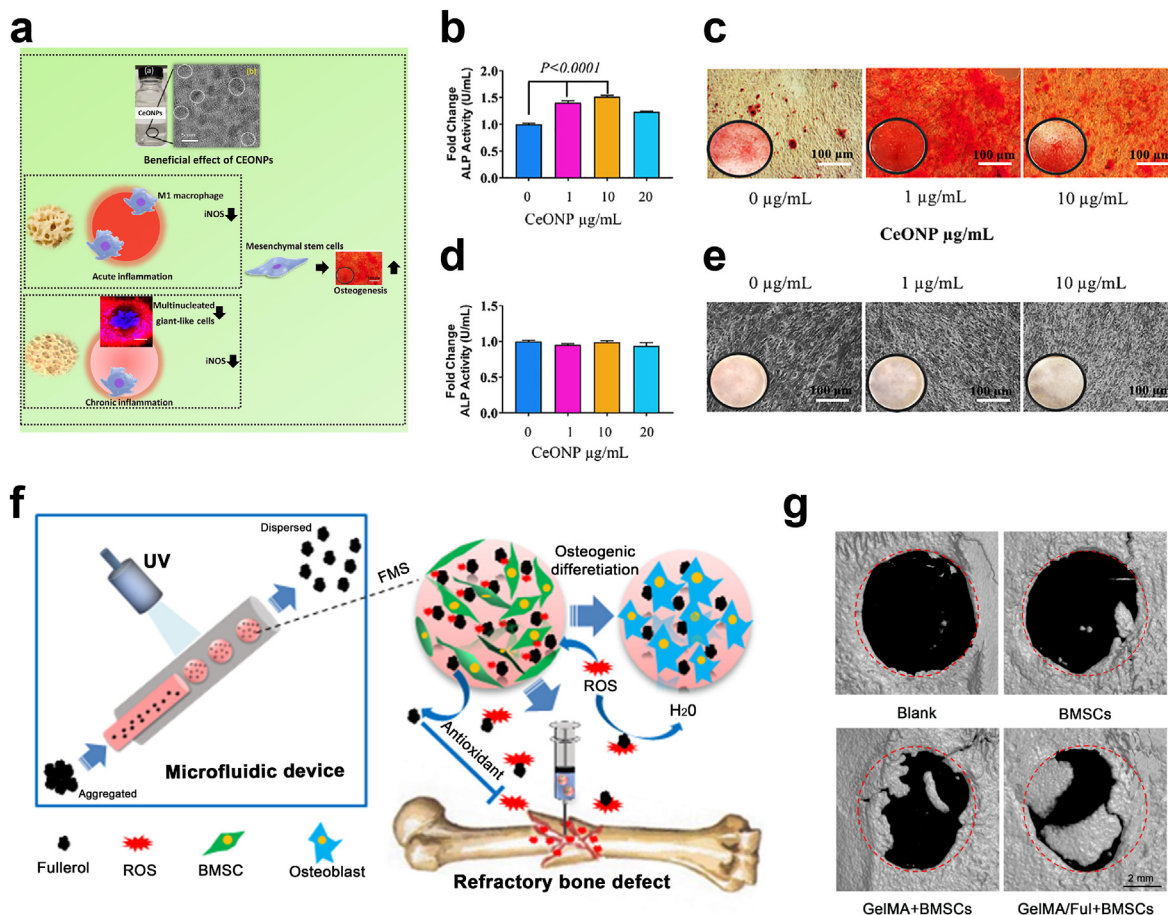


Fig. 4. Applications of nanozymes in bone regeneration. (a) Schematic illustration of the immunomodulatory and pro-osteogenic capacities of CeO_2 NPs, (b) ALP activity in osteogenic media. (c) Alizarin Red-stained mineral deposits red in the osteogenic media groups. (d) ALP activity in non-osteogenic media. (e) Alizarin Red-stained mineral deposits red in the non-osteogenic media groups. (f) Microfluidic synthesis of antioxidative hydrogel microspheres (FMSs) containing highly dispersed fullerol nanocrystals. (g) Micro-CT 3D reconstruction images of new bone in the defect areas (circled by red dot line). (a–e) Adapted from (F. Wei, Qiao, et al., 2021), copyright 2021. (f, g) Adapted from (J. Yang, Liang, et al., 2021), copyright 2021. (For interpretation of the references to colour in this figure legend, the reader is referred to the Web version of this article.)

exhibited the osteogenic properties and significantly increased the amount of new bone in calvarial-defect rats.

2.5. Gout

Gout is the most prevalent form of inflammatory arthritis, which results from the deposition of excessive monosodium urate (MSU) crystals in joints or periarticular tissues induced by uric acid (UA) disturbance (Dalbeth, Gosling, Gaffo, & Abhishek, 2021). Clinical manifestations of gout include the onset of persistent inflammation and subsequent intense pain (Taylor et al., 2015). The level of UA depends on the balance between dietary intake, endogenous metabolism synthesis, and kidneys/intestine excretion (Mandal & Mout, 2015). Many factors could contribute to hyperuricaemia, such as metabolic syndrome, high purine meals, alcohol intake, and medications (Dehlin, Jacobsson, & Roddy, 2020).

In the acute course of gout, major focus of managements on rapidly suppressing inflammation and joint pain. It is recommended to use one or more potent anti-inflammatory agents (e.g., nonsteroidal anti-inflammatory drugs, colchicine, corticosteroids, and anti-IL-1 β biologics). Long-term gout management targets lowering UA continuously by medications (e.g., allopurinol, febuxostat, uricosuric medications, and uricase) (Pillinger & Mandell, 2020). In particular, uricase-based therapies have been regarded as effective methods to treat gout due to the lack of

uricase in humans. However, the accumulation of the toxic by-product H_2O_2 in joints during the uricase-mediated UA degradation would cause serious side effects. Therefore, earlier studies combined uricase with CAT or CAT-like nanozymes through complex multi-step designs, to achieve H_2O_2 elimination in time (S. Kim, Kim, Song, et al., 2019; X. Liu et al., 2016; Z. Zhang et al., 2018). Recently, Wei et al. developed a self-cascade Pt/ CeO_2 nanozyme with synergistic uricase/CAT-like activities as an efficient therapeutic agent for alleviating acute gout (Fig. 5) (A. Lin et al., 2022). They demonstrated the best UA-degradation capability of Pt in comparison with other platinum-group metals (i.e., Ir, Rh, and Pd). Moreover, the synthesized Pt/ CeO_2 structure with small Pt NPs anchored on CeO_2 nanorods facilitated the catalytic stability *in vivo*. In the MSU-induced acute gout rats, Pt/ CeO_2 nanozyme markedly alleviated joint pain and improved gait claudication, showing great potential for gout treatment.

2.6. Osteomyelitis (OM)

Osteomyelitis (OM) is an inflammatory state of bone caused by infectious microorganisms, leading to continuous local bone destruction and necrosis (Lew & Waldvogel, 2004). Based on the source of infection, OM can be classified into three categories: (1) hematogenous OM, (2) secondary OM (associated with vascular or neurologic insufficiency), and (3) contiguously infected OM (caused

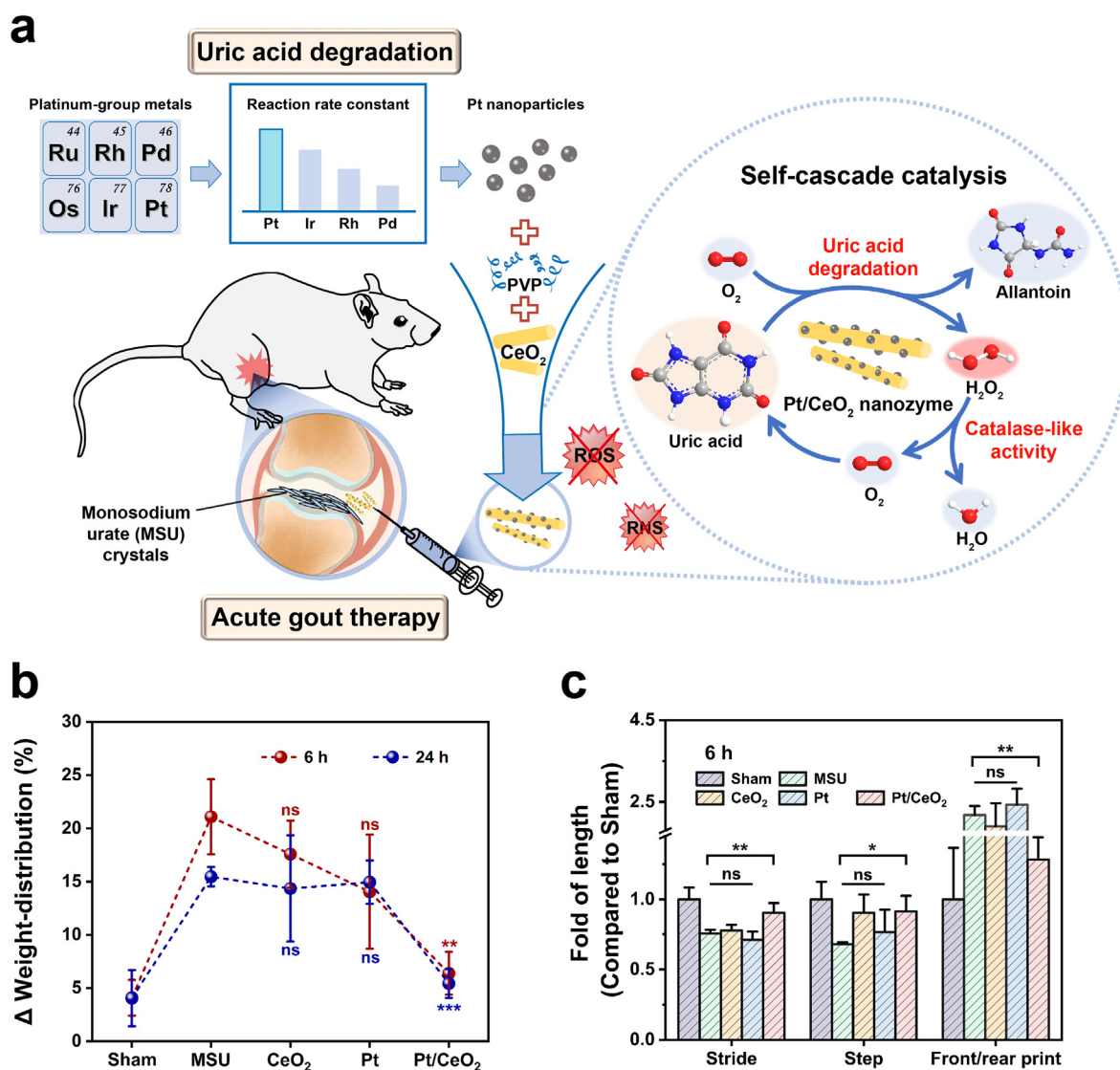


Fig. 5. Nanozymes for gout therapy. (a) Schematic illustration of the design and synthesis of the Pt/CeO₂ nanozyme and self-cascade UA degradation for MSU-induced acute gout therapy. (b) Differences in weight distribution between bilateral hind limbs of rats at 6 and 24 h (* $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$, and ns means not significant). (c) Quantification of stride length, step length, and the length of front/rear paw prints at 6 h (* $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$, and ns means not significant). (a–c) Adapted from (A. Lin et al., 2022), copyright 2022.

by open fractures and orthopaedic joint replacement) (Birt, Anderson, Toby, & Wang, 2017).

To develop efficient treatments of bacteria-infected OM, some nanozyme-based antibacterial platforms have been constructed with considerable efforts. As shown in Fig. 6(a–c), Wu and co-workers proposed a rapid therapeutic strategy by utilizing micro- and Na⁺ insertion to accelerate the release of Fe(II)/Fe(III) ions from PB, which further activated the Fenton reaction to produce toxic $\cdot OH$ for killing bacteria (S. Wei, Qiao, et al., 2021). Nie's group developed an integrated accurate diagnosis platform (denoted as BMUIG) of bacteria-involved OM by encapsulating indocyanine green into MnO₂ conjugated with cationic human antimicrobial peptide (Lu et al., 2019). The synergistic antibacterial capabilities of BMUIG combined with photodynamic therapy and gentamicin could also be proved in the acute OM mouse model. With an increasing number of implant surgeries, OM is often related to the infected prostheses after total hip arthroplasties and total knee arthroplasties (Song et al., 2013). The crucial managements of implant-associated OM often focus on the undermining of biofilm

adhered to the surfaces of prostheses and bone (Zimmerli & Sendi, 2017). As shown in Fig. 6(d–f), Zhang et al. designed CuFe₅O₈ nanocubes (NCs) with controlled Fenton-like activity regulated by pH and H₂O₂ concentration in the biofilm microenvironment (G. Guo et al., 2020). It demonstrated that CuFe₅O₈ NCs showed superior effects on the elimination of biofilms in an implant-related infection model by cleaving extracellular DNA and reversing immunosuppressive microenvironment.

2.7. Osteosarcoma (OS)

Osteosarcoma (OS) is a kind of bone neoplasm derived from bone-forming mesenchymal cells (Heymann, Lezot, & Heymann, 2019). As one of the malignant bone tumors, OS causes horrendous local invasion and systemic metastasis (preferentially to the lung parenchyma), leading to pain, fracture, and even death (C. Chen, Xie, et al., 2021). Currently, chemotherapy, wide surgical resection, and radiotherapy are the most commonly used in OS therapies (Thanindrarn, Dean, Nelson, Hornicek, & Duan, 2019).

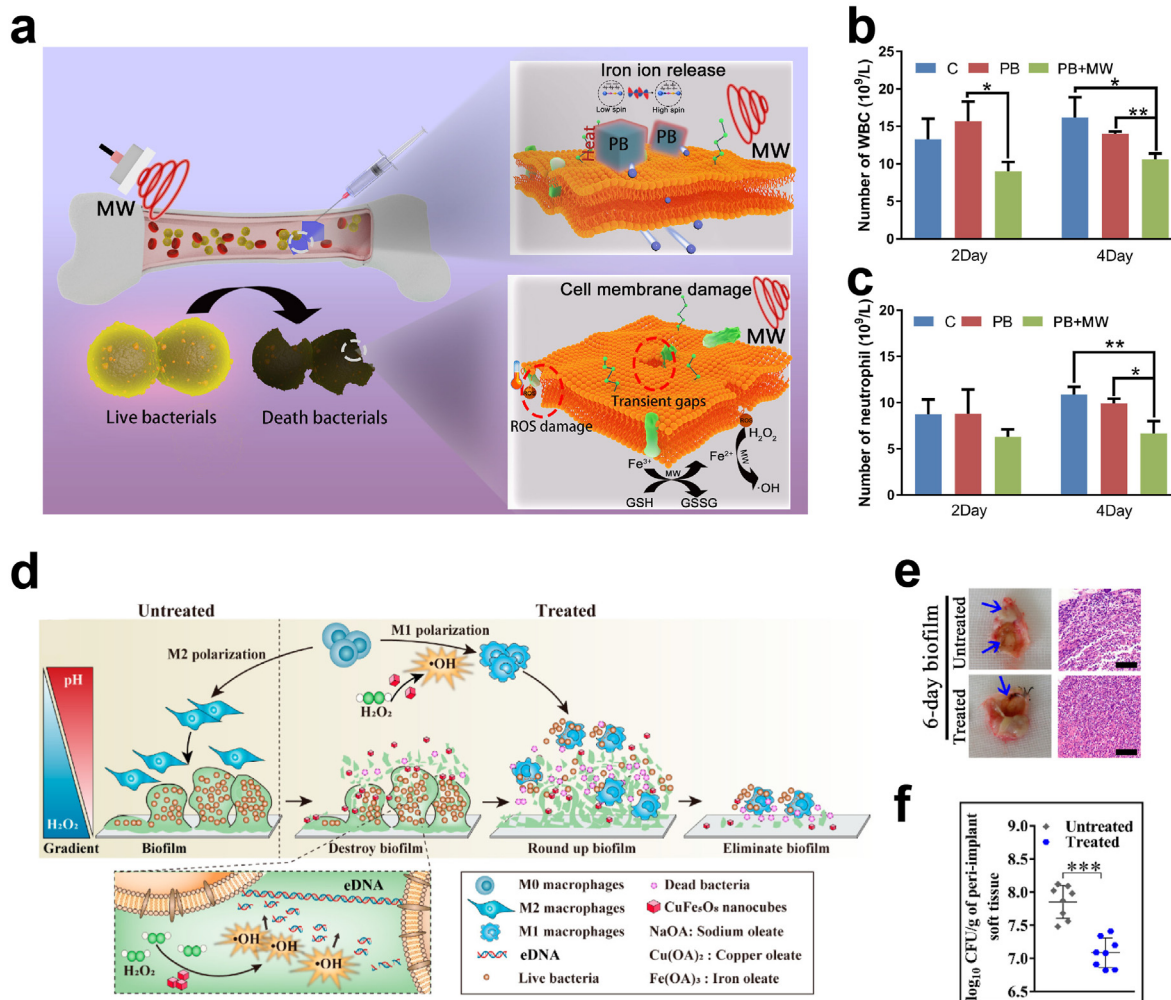


Fig. 6. Nanozymes for OM therapy. (a) Schematic diagram of PB with microwave response for osteomyelitis treatment. (b, c) Blood routine examination of the white blood cells (b) and neutrophils (c) ($n=3$, $*p<0.05$, $**p<0.01$, $***p<0.001$). (d) Schematic illustration of proposed antibiofilm and immunomodulatory mechanisms of $CuFe_5O_8$ NCs. (e, f) Pathologic results (general observation and histologic section) (e) and bacterial burden of peri-implant soft tissues (f) at 7 days after surgery. Blue arrows indicated the white suppuration and necrotic tissues in the gross specimens of peri-implant soft tissues ($**p<0.01$, $***p<0.001$). (a–c) Adapted from (S. Wei, Qiao, et al., 2021), copyright 2021. (d–f) Adapted from (G. Guo et al., 2020), copyright 2020. (For interpretation of the references to colour in this figure legend, the reader is referred to the Web version of this article.)

However, chemotherapy and radiotherapy may increase the risk of systemic side effects as well as the drug resistance (Eaton et al., 2021). Moreover, invasion and residual tumor tissues are inevitable as well. The massive bone defects after surgical resection also give rise to the poor prognosis.

Considering the current clinical difficulties, it is essential for new management strategies of OS to simultaneously achieve tumor killing and osteogenesis promoting (Liao, Han, Wu, & Qian, 2021). Previous studies have verified the anti-OS ability of nanozymes in physiological environments (Alpaslan, Yazici, Golshan, Ziemer, & Webster, 2015; Mehmood, Wang, Koshy, Yang, & Sorrell, 2018). Recently, more studies have focused on combining nanozymes with other therapeutic agents. As shown in Fig. 7(a–c), Wang and co-workers constructed a multifunctional scaffold AKT- Fe_3O_4 - CaO_2 by loading CaO_2 and Fe_3O_4 nanozymes into a 3D printing akermanite scaffold (S. Dong, Chen, Yu, Lin, & Wang, 2019). The synergistic anti-tumor effect of AKT- Fe_3O_4 - CaO_2 was attributed to the cooperation between hyperthermia and the H_2O_2 -self-supplying Fenton reaction. In addition, the integrated CaO_2 released Ca^{2+} to enhance the repair of bone defects. In another work, as shown in Fig. 7(d–f), Xu's group reported the single-atom iron nanozyme

$FeSAC$ -integrated 3D-printed bioactive glass scaffold ($FeSAC$ -BG), which attained a therapeutic effect against OS and bactericidal properties simultaneously due to hyperthermia-enhanced toxic $\cdot OH$ generation (L. Wang, Wu, et al., 2021). Chen and co-workers developed a metal-drug nanozyme $HA@FeZOL$ by combining ferric ions with the anti-osteoclastogenesis drug zoledronate (ZOL) (Geng et al., 2021). $HA@FeZOL$ could increase the ZOL level in tumor tissues and simultaneously generated $\cdot OH$ to enhance OS radiotherapy.

3. Challenges and outlooks

We have highlighted representative studies of nanozymes in orthopaedics over the past decade. All orthopaedic applications mentioned above are summarized in Table S1 (see the Supplementary Material), with their corresponding nanozymes used for the therapy. Meanwhile, there is great potential to extend their biomedical applications into other bone diseases. Also, the field of nanozymes is confronted with exciting challenges in the future.

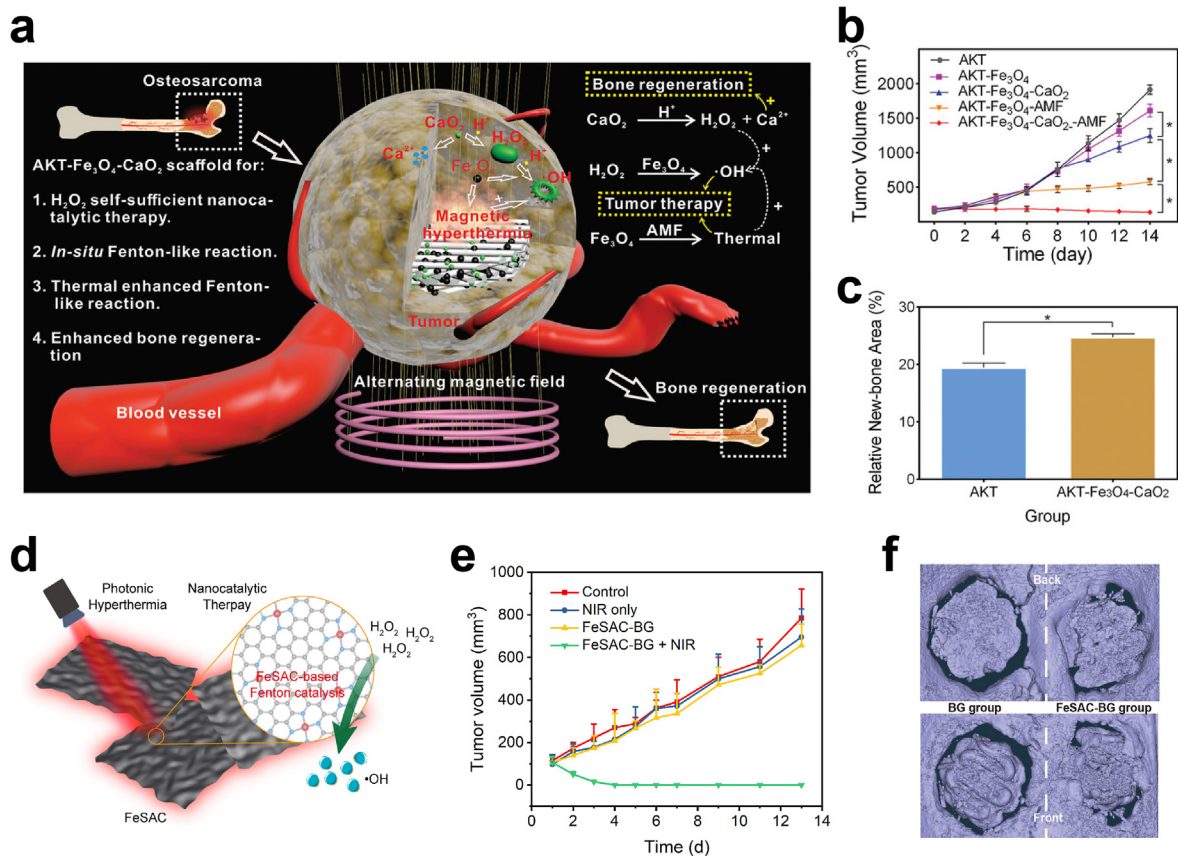


Fig. 7. Nanozymes for OS therapy. (a) Schematic illustration of the cancer-therapeutic performance and bone-regeneration bioactivity of 3D-printed scaffolds coloaded with Fe_3O_4 and CaO_2 NPs (AKT- Fe_3O_4 - CaO_2). (b) Time-dependent tumor-volume curves OS-bearing mice treated as described in different groups ($n = 5$, $*p < 0.05$). (c) Quantitative analysis of the VG-stained area of newborn bone tissues with ImageJ software ($n = 3$, $*p < 0.05$). (d) Schematic illustration of FeSAC for hyperthermia-enhanced Fenton reaction. (e) Tumor volume of mice in each group. (f) Corresponding enlarged images of cranial defect area with BG and FeSAC-BG scaffold implantation. (a–c) Adapted from (S. Dong et al., 2019), copyright 2019. (d–f) Adapted from (L. Wang, Wu, et al., 2021), copyright 2021.

3.1. Other potential applications

Generally, phosphate anion (PO_4^{3-}) is crucial to osteogenesis in the process of bone remodeling. It could be supplied with alkaline phosphatase (ALP)-mediated hydrolysis toward phosphate molecules (Chande & Bergwitz, 2018). Thus, ALP enzymatic activity is directly related to initial mineralization (N. Li, Qi, et al., 2019). In 2010, Kuchma et al. found the hydrolytic activity of CeO_2 NPs with cleaving phosphate ester bonds of *p*-nitrophenylphosphate (pNPP) and other biologically relevant molecules (Kuchma et al., 2010). As shown in Fig. 8(a and b), Wang's group established the structure–property relationships of CeO_2 nanocrystals with different shapes, indicating that oxygen vacancies on the CeO_2 surfaces are active sites for the dephosphorylation of pNPP (Manto, Xie, & Wang, 2017). Moreover, Wei and co-workers optimized the ALP-like activity of CeO_2 via a simple temperature-regulated synthesis (Fig. 8(c)) (X. Liu et al., 2021). In addition, as shown in Fig. 8(d and e), Wei's group developed a highly active Ce-FMA nanozyme using a data-informed strategy, achieving pH-dependent phosphatase-like activity toward different substrates. These results indicate that phosphatase-like nanozymes have essential implications for their use in potential osteogenic therapies.

As mentioned in last section, MSU crystals deposited in joints and periarticular tissues lead to the occurrence of gout with intense pain and an inflammatory response. Thus, efficient degradation of UA could be an effective strategy for the treatment of gout. In 2011, Chi et al. first demonstrated that Pt NPs, as uricase mimics, had

catalytic degradation activity toward UA with high efficiency (Fig. 9(a)) (Y. Dong et al., 2011). Afterwards, as shown in Fig. 9(b), Wei's group found similar catalytic abilities of other platinum-group metals (such as Ir, Rh, and Pd NPs), with a trend of $\text{Pt} > \text{Ir} > \text{Rh} > \text{Pd}$ (A. Lin et al., 2022). Moreover, Gao and co-workers developed an artificial *pero*-nanozyme with atomic Fe clusters as reversible cofactors and Fe– N_4 coordination as a prosthetic group (Fig. 9(c)). As shown in Fig. 9(d), this Fe–N-doped carbon nanozyme also exhibited good uricase-like activity (Xi et al., 2020). These nanozymes show great potential in protecting joint tissues from gout.

In addition, nanozymes exhibit their large potential in the applications of aseptic or septic loosening involved in the joint arthroplasty. Wear particle-induced aseptic loosening is attributed to chronic inflammation caused by the interaction between resident immune cells and implant wear debris (Luo et al., 2016). However, septic loosening generally involves biofilm-associated chronic infection at the implant sites (Hodges, Sussman, & Stegemann, 2021). For both aseptic and septic loosening, ROS plays a crucial role in the therapeutic process. Nanozymes with highly active ROS scavenging activity could be applied as anti-oxidative catalysts in the treatment of aseptic loosening. On the other hand, some nanozymes would generate highly toxic ROS to kill bacteria and disrupt biofilms at the implant sites, exhibiting excellent POD- or OXD-like activities. These nanozyme-based strategies provide novel insights into the treatment of orthopaedic diseases.

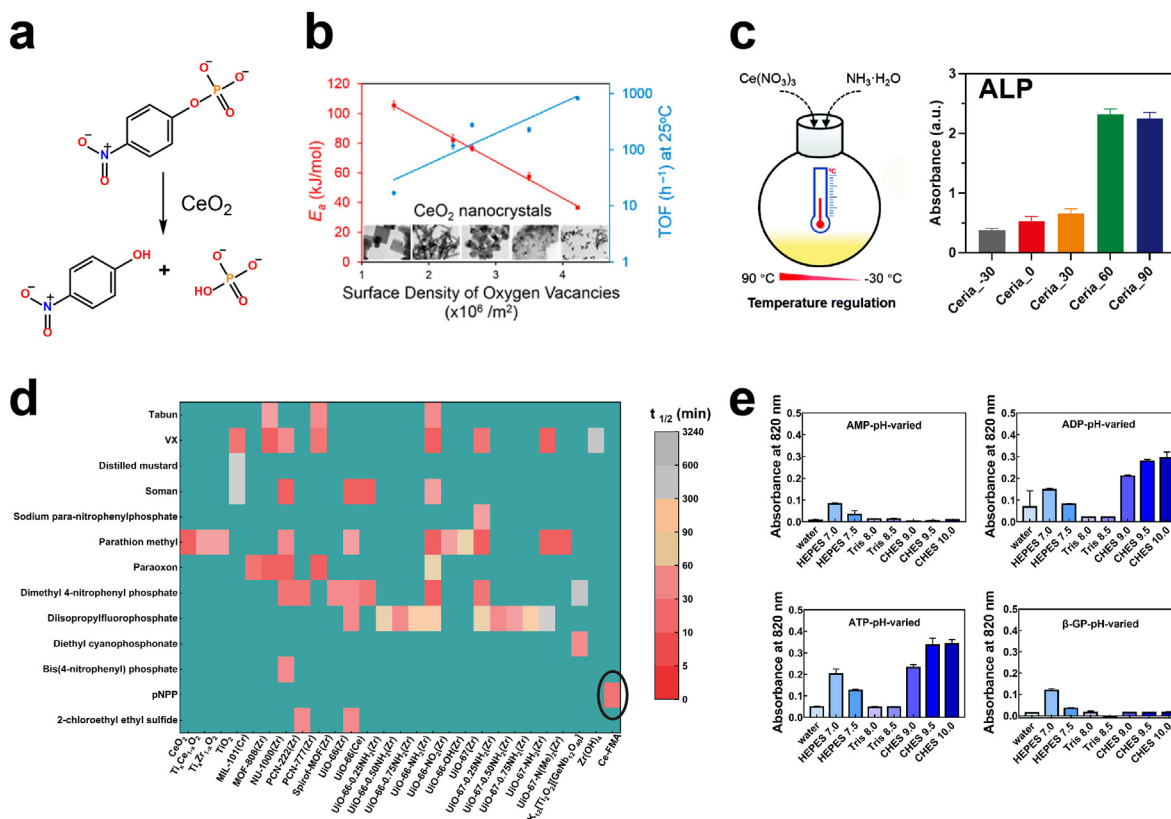


Fig. 8. Phosphatase-like activity of nanozymes. (a) Illustration of the dephosphorylation of pNPP catalyzed by CeO₂. (b) Correlations of activation energy and turnover frequency (TOF) to the surface density of oxygen vacancies estimated based on the amount of absorbed O₂ derived from temperature-programmed desorption of oxygen analysis. (c) Synthesis of CeO₂ nanozymes via temperature regulation to optimize ALP-like activity. (d) Heat map of the half-lives of various phosphatase-like nanozymes and their corresponding substrates. Each half-life is presented as the mean unless there is only one sample. The circled one represents the data-informed Ce-FMA nanozyme. (e) pH-dependent phosphatase-like activity of Ce-FMA toward different substrates. (a, b) Adapted from (Manto et al., 2017), copyright 2017. (c) Adapted from (X. Liu et al., 2021), copyright 2021. (d, e) Adapted from (S. Li et al., 2022), copyright 2022.

3.2. Optimization of structure–function and catalytic mechanisms

Though the activities of nanozymes could be well-regulated by different factors (such as size- or shape-control), a precise relationship between the structure and catalytic function is still required to achieve the rational design of nanozymes (X. Liu et al., 2021; Naganuma, 2016; X. Wang, Wan, & Shi, 2019). For this purpose, multidisciplinary collaboration between experimental science and computational research is eagerly desirable to explore the detailed catalytic mechanisms of nanozymes. Gao's group has been devoted to explaining the underlying mechanisms of the diverse enzymatic activities of nanozymes via density functional theory investigation (J. Li, Liu, Wu, & Gao, 2015; Shen et al., 2015). And the theoretical principles established in their work could reliably predict the SOD-like activities of MOFs by high-throughput computational screening (Z. Wang, Wu, et al., 2021). This encourages us to transform the nanozyme area from an empirical science to a theory-experiment combined one.

3.3. Multiple modulatory approaches

In bone physiology, bone resorption and formation involve interconnected and complicated processes mediated by diverse cell types and signaling pathways (Redlich & Smolen, 2012). Although various nanozymes can modulate ROS (or RNS) levels in response to different pathological conditions, the change in ROS (or RNS) levels only plays as a small part in the whole inflammatory regulation. What matters is that diverse cytokines affected by redox

homeostasis activate different cellular signaling pathways and augment substantial effects in bone tissues step by step. Taking CeO₂ and Au NPs as examples, Dong and co-workers found that CeO₂ NPs enhanced endochondral ossification-based bone regeneration by promoting the hypertrophic differentiation of BMSCs through DHX15 activation in the p38 MAPK pathway (J. Li, Qi, et al., 2019). Jiang et al. demonstrated that PEGylated Au NPs could increase bone mineralization by the Wnt/ β -catenin signaling pathway (Y. Zhang, Yan, & Fan, 2021). Thus, more biological mechanism studies will also be needed for the future translation of nanozymes. The effects of nanozymes on various modulatory approaches are not clear enough to illustrate the detailed therapeutic mechanism of nanozymes, which may bring underlying concerns of applications.

3.4. Biocompatibility and biosafety

An increasing number of studies on nanozymes have reported their significant findings in biomedical applications, yet there are several essential neglected parts regarding clinical biomedicine. It is crucial to maintain the balance between therapeutic efficacy and potential biosafety. Due to the different physicochemical properties of nanozymes (such as size, surface charge, and hydrophilicity), the highest priority is to systematically evaluate toxicity, hemolysis, and stability in blood (or body fluid) circulation. When nanozymes are employed as nanomedicine *in vivo*, it is required to ascertain several momentous factors in pharmacodynamics (PD) studies, including the therapeutic window, minimal effective dose (MED),

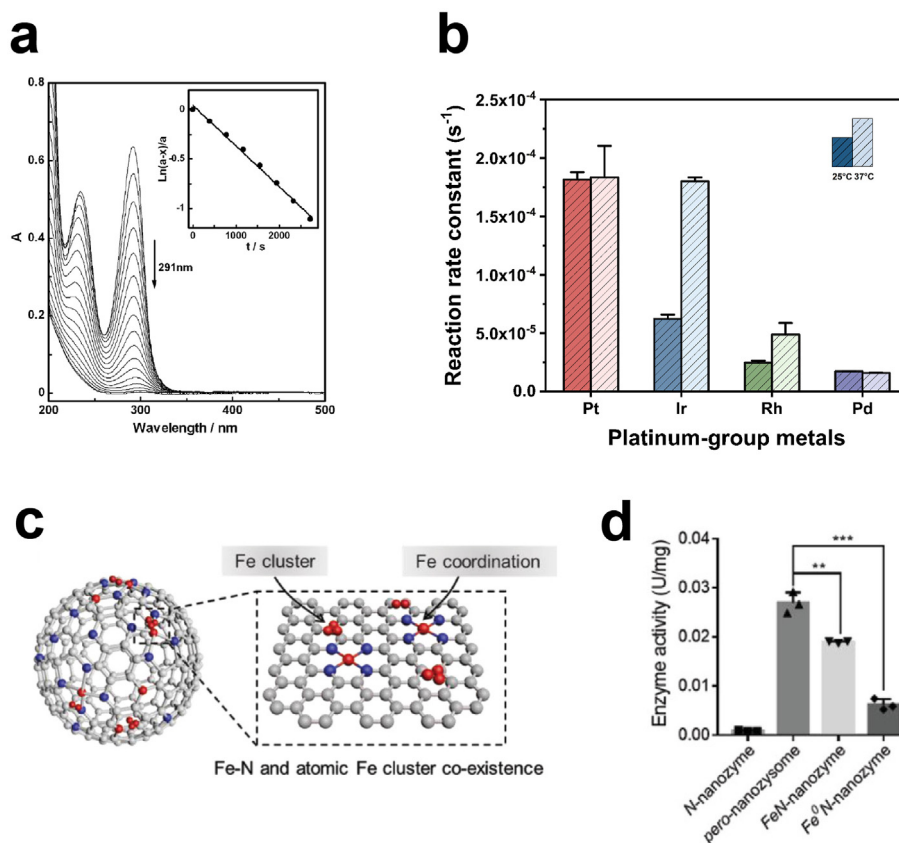


Fig. 9. Uricase-like activity of nanozymes. (a) UV–vis spectrum recorded every 6.5 min for the PtNPs catalytic degradation of UA. Inset: Relationship between degradation percentage and time for the PtNPs catalytic degradation of UA. (b) Comparison of UA degradation activities for four platinum-group metals at 25 and 37 °C. (c) Model for the surface of *pero*-nanozyme, Fe (red), N (blue), and C (gray). (d) Comparison of uricase-like activities between *pero*-nanozyme, Fe^N-nanozyme, N-nanozyme and Fe^N/N-nanozyme. (a) Adapted from (Y. Dong et al., 2011), copyright 2011. (b) Adapted from (A. Lin et al., 2022), copyright 2022. (c, d) Adapted from (Xi et al., 2020), copyright 2020. (For interpretation of the references to colour in this figure legend, the reader is referred to the Web version of this article.)

and maximal tolerated dose (MTD) (Ghorbani et al., 2021). Moreover, post-treatment evaluations should be strictly studied as well, which involve detailed pharmacokinetics (PK), absorption, metabolism, biodistribution, and reversible (or irreversible even delayed) toxicity of nanozymes (H. Wang, Wan, & Shi, 2019). Especially, PK and PD studies are the key factors for the preclinical translation of novel drugs. Thus, systematic parameters of nanozymes such as clearance, half-time, MED, and MTD should be evaluated in preclinical studies in detail.

Data availability

The data are available upon reasonable request.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.partic.2022.08.009>.

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