

1 **Title: Confocal/two-photon microscopy in studying colonisation of cancer cells in bone**
2 **using xenograft mouse models**

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25 **Running title:** Confocal/two-photon in bone oncology research

26

1 **Abstract**

2 Confocal and two-photon microscopy has been widely used in bone research to not only
3 produce high quality, three-dimensional (3D) images but also to provide valuable structural
4 and quantitative information. In this article, we describe step-by-step protocols for confocal
5 and two-photon microscopy to investigate earlier cellular events during colonisation of
6 cancer cells in bone using xenograft mouse models. This includes confocal/two-photon
7 microscopy imaging of paraformaldehyde (PFA) fixed thick bone sections and frozen bone
8 samples.

9

10 **Keywords**

11 Confocal, two-photon microscopy, cancer metastasis, bone

12

1 **Introduction**

2 Confocal and two-photon microscopy have been widely used to visualise and track biological
3 events, from the cellular to the molecular level, with the main advantage being able to
4 produce 3D images of thick sample specimens. This provides exciting possibilities to study
5 cellular interactions and microstructures when imaging optically dense tissue such as bone.

6 The first confocal microscope was developed by Marvin Minsky in 1955 ¹ and was widely
7 applied in biological research after its commercial availability in early 1980s ². In a confocal
8 microscope, the laser beam is focused by the objective lens into a focal volume within a
9 fluorescent specimen. All emitted fluorescent light from the focal plane will be recollectd
10 by the objective lens, focused at the confocal pinhole and passed to the detector, whilst
11 fluorescent light emitted from objects not in focal plane (out-of-focus signal) will hit the
12 edge of the pinhole and be physically blocked from reaching the detector. Therefore,
13 sharper images with better contrast and higher resolution could be achieved using a
14 confocal microscope, compared to the commonly used wide-field fluorescence microscope
15 (Figure 1A). Since the first application in studying human cranial bone microstructure by
16 Alan Boyde in 1990 ³, confocal microscopy has become a powerful tool in research related
17 to the skeletal system, such as assessment of bone microdamage under physiological and
18 pathological conditions ⁴⁻⁶. Confocal microscopy has also provided opportunities to
19 investigate bone cell-to-cell interactions in three-dimension, which is particular important
20 for research involving osteocytes and osteoblasts ⁷⁻¹¹. More recently using revised and
21 improved bone processing strategy, a significant progress has been made in the imaging of
22 the bone marrow microenvironment and particularly the vasculature in bone. This technical

1 advance led to the identification of a specialized blood vessel subtype (namely type H) in
2 bone, which forms a niche for osteoprogenitors and thereby regulates bone formation ¹²⁻¹⁴.

3 The principle of the two-photon effect was proposed in 1930s by Maria Göppert-Mayer and
4 confirmed in 1961 by Wolfgang Kaiser ¹⁵. During conventional excitation using confocal
5 microscopy, a fluorescent molecule absorbs a single excitation photon with higher energy
6 level and shorter wavelength than emission. For example, a photon of 488nm wavelength is
7 used to excite GFP molecule to emit a 509nm photon. In contrast, in two-photon
8 microscopy, two longer wavelength exciting photons are used to excite the same
9 fluorescent molecule, when these two photons are concentrated or 'fused' in a small
10 volume of specimen (<1 f litre) within a short time period (scale of attoseconds) ¹⁶. In theory,
11 a GFP molecule could be excited by two 976nm photons with half the amount of energy of
12 one 488nm photon ¹⁶. This means the operating wavelength is in the near-infrared range. In
13 addition, as the two-photon effect only occurs at the focal point, the excitation outside the
14 focal plan is limited and hence physically cutting out-of-focus signals with the pinhole is no
15 longer necessary (Figure 1B). All of these offer advantages compared to confocal microscopy,
16 including reduced scattering, enhanced depth penetration, lower phototoxicity, and the
17 ability to excite multiple fluorescent markers with a single excitation wavelength. As bone
18 structures heavily scatter lights and the high collagen content generates second-harmonic
19 signals (SHG), these advantages won two-photon microscopy increasing popularity in
20 research of cellular activities and interactions within bone and marrow, particularly in
21 identifying the haematopoietic stem cell niche and detecting bone metastasis-initiating cancer
22 cells in bone ¹⁷⁻²³.

1 In this article, using the detection of breast cancer cell bone colonisation by confocal and
2 two-photon microscopy as a representative example, we will describe a step-by-step
3 methodology, from sample preparation to data analyses, used to investigate cellular events
4 in frozen and fixed/decalcified mouse bone samples *ex vivo* (See schematic outline, Figure 2).
5 Advantages and limitations of this technology is also discussed to guide the reader as to
6 which is the most appropriate for their research question.

7

1 **Materials and methods**

2 This methodology, developed for use with the Zeiss LSM510 NLO Upright two-photon
3 microscope, allows the visualization the 3D structure of frozen/fixed samples of calcified
4 bones and the detection of fluorescent lipophilic dyes labelled cancer cells within the bone
5 marrow, providing essential information on the seeding of cancer cells *in vivo*.

6 1. Cancer cell preparation and inoculation

7 On the day of inoculation, breast cancer cells are pre-labelled with fluorescent lipophilic
8 membrane dyes (Vybrant DiD, Dil and CM-Dil, Life Technologies Ltd, Paisley, UK) to facilitate
9 the detection of single cells in the bone microenvironment by two-photon microscopy. One
10 advantage of using these lipophilic dyes is being able to detect dormant cells as these cell
11 membrane dyes are diluted to undetectable concentrations in proliferating cells^{20-22, 24, 25}.

12 Cancer cells are firstly washed with Phosphate Buffered Saline (PBS), trypsinized by 0.15%
13 Trypsin-EDTA for 3-5 minutes, at 37°C at 5% CO₂. Cells are neutralised with appropriate
14 media containing 10% FBS and centrifuged for 5 minutes at 200g. The cell pellet is
15 resuspended at a concentration of 1×10^6 cells/ml in serum free medium for Vybrant DiD
16 labelling or in Hanks' balanced salt solution (HBSS) for Vybrant CM-Dil. Five microliter cell-
17 labeling solution is added per milliliter of cell suspension and incubated at 37°C for 20
18 minutes (Vybrant DiD) or 5 minutes followed by 15 minutes on ice (Vybrant CM-Dil).
19 Following the incubation, the cell suspension is centrifuged at 200g for 5 minutes. The
20 supernatant is discarded and the cell pellet is washed in PBS for three times. Labelled cancer
21 cells are then resuspended at 1×10^5 cells/mL in PBS for the following intra-cardiac or intra-
22 venous inoculations in immunocompromised mice (100µL/mouse). The cell suspension

1 should be kept on ice and filtered with 40µm cell strainer prior injection to prevent
2 clumping of cells that could cause embolisms²⁶.

3 **Note:** Unlike DiD and Dil, CM-Dil is a Dil derivative and can be retained in cells throughout
4 fixation, permeabilization and paraffin embedding procedure.

5

6 2.1 Frozen bone sample preparation

7 As previous studies suggested, breast cancer cells locate preferentially in long bones in
8 murine models, tibias and femurs are therefore collected for *ex vivo* two-photon microscopy
9 examination^{20, 27}. Other bone samples (e.g. ribs) can also be used for confocal/two-photon
10 microscopy examination but extra care should be taken to maintain consistency of sample
11 orientation while sectioning, which is important for comparison of different samples.

12 Immediately after animal euthanasia, long bones are dissected free of soft tissue and snap-
13 frozen in liquid nitrogen. The frozen bones are then embedded in Bright Cryo-M-Bed (Bright
14 Instrument Co. Ltd, Huntingdon, UK) and frozen in sample blocks. The embedded tissue
15 blocks are then trimmed longitudinally to expose bone marrow area using a Bright OTF
16 Cryostat with a 3020 microtome (Bright Instrument Co. Ltd, Huntingdon, UK) (Figure 3A).
17 The cutting angle of the blade is set to 22 degrees in order to obtain an even surface crucial
18 to allow optimal imaging of the bone structure. However, the optimal setting of cutting
19 angle could be various depend on different instruments. The bone is placed with the
20 exposed marrow surface inside an uncoated, 35mm glass bottom microwell dish (No. 0
21 coverslip, Glass thickness: 0.08-0.13mm)(MatTek Corporation, Ashland, USA) and a coverslip
22 is applied to keep it tightly attaching to the surface of glass bottom, using blu-tack or water

1 resistant glue (Figure 3B). Using an upright two-photon microscope (Zeiss LSM510 NLO, Carl
2 Zeiss Inc, Cambridge, UK) the glass bottom dish has to be placed upside down, with the
3 exposed bone marrow surface facing upwards (Figure 3C). For long scans, ensure to keep
4 the sample moist.

5 **Note:** Keeping similar orientations of samples in the blocks is strongly advised. For example,
6 right tibias are placed in blocks with the right fibula facing the right side of the block and the
7 opposite direction is used for the left limb.

8

9 2.2 Fixed/decalcified bone sample preparation

10 Extreme calcification causes opacity and hinders processing of bone tissue preventing its
11 analysis by high-resolution optical imaging. Though extensive and long decalcification steps
12 enable ergonomic tissue handling, these steps mask epitopes of antigens limiting the
13 optimal immunohistochemical analysis. We have recently revised and improved the bone
14 processing strategy, which involves short decalcification, and thick bone sectioning
15 combined with high resolution confocal microscopy¹²⁻¹⁴. Here, we report this advanced
16 methodology in a stepwise manner that will provide a platform to close several major
17 knowledge gaps and will therefore greatly facilitate future analyses focusing on the bone
18 marrow.

19 In this procedure, freshly isolated bone tissue is fixed immediately using a 4%
20 paraformaldehyde solution for 4 hours at room temperature. The fixed bones are washed in
21 PBS and subjected to short decalcification using 0.5M Ethylene Diamine Tetra Acetate (EDTA)
22 solution for 24-48 hours. Decalcified bones are washed thoroughly in PBS and incubated in

1 cryoprotectant solution (20% sucrose and 2% Polyvinyl Pyrrolidone) for 24 hours. Following
2 cryoprotection, bones are suspended in gelatin based embedding solution for 30minutes
3 before being embedded and kept in an ultrafreezer for freezing. The embedding solution
4 composed of 8% gelatin, 20% sucrose and 2% PVP works better than OCT in this protocol.
5 The frozen samples are cut using a cryotome to get tissue sections of appropriate thickness.
6 These cryosections can be further used for immunohistochemical studies to understand the
7 bone marrow microenvironment. The comprehensive methodology from collecting fresh
8 bone tissues to cryosectioning and immunostaining has been described previously²⁸.

9

10 3. Imaging bone samples with confocal/two-photon microscopy

11 *Basic microscope settings*

12 The bone structure can be visualised by SHG using a Chameleon laser at 900nm (Coherent,
13 Santa Clara, CA.), while Vybrant-DiD labelled cancer cells can be visualised using a 633nm
14 HeNe laser and Vybrant Dil/CM-Dil with a 543nm HeNe laser. The configuration settings and
15 beam paths for different channels are shown in Figure 4A. The SHG is detected with BP390-
16 465 (blue, pseudocoloured white in image Figure 4B), Vybrant-Dil/CM-Dil with BP 565–615
17 (orange/red, pseudocoloured pink in image Figure 4B) and Vybrant-DiD with BP 650–710
18 (far red, pseudocoloured red in image Figure 4B).

19 **Note:** As two-photon microscopy has the ability to excite multiple fluorescent markers with
20 a single excitation wavelength, two-photon excitation can be set at 820 nm and multiple
21 fluorescence can be detected using the following: BP435-485 to detect blue (SHG), BP 500–

1 550 to detect green (GFP), and BP 650–710 to detect far-red (DiD)²³. However, this will
2 increase the energy level of photon and hence higher risk of photobleaching.

3 **Note:** To rule out auto fluorescence and artefacts, a non-tumour cell bearing bone should be
4 imaged as a blank control (Figure 4B). If available, a spectral fingerprinting should also be
5 performed to confirm the identity of imaged cells.

6 **Note:** Two-photon work has potential hazard to the eyes depending on laser light
7 wavelength and beam intensity. Damage to the retina can be caused by light within the
8 wavelength range of 400-1400nm, therefore safety goggles must be worn at all times during
9 the procedure.

10 *Visualisation of the specimen with transmitted light*

11 Ensuring that the specimen is flat against the glass bottom dish is crucial for obtaining high
12 quality image of the specimen. Transmitted light is used to visualise the specimen prior to
13 the scanning with the two-photon laser, via ensuring even focus at all extremities of the
14 specimen and clear vision of both borders of the growth plate.

15 *Setting up the Z-stack*

16 Once the focus on the specimen has been set using transmitted light, visualise the tissue
17 with the Chameleon laser set at 900nm. Adjust the focus up and down until the bone
18 disappears from view to set a temporary upper and bottom boundaries, using the
19 continuous scan function. Move the focal plane to the middle between the two boundaries
20 and set as zero level where the bone should appear brightest. In the Z-stack setting panel
21 (see note), reset the upper and bottom boundaries depending on the desired depth of the
22 Z-stack scan. For a Z-stack in depth of 70µm, upper and bottom boundaries are set at 35 µm

1 above and below the focal plane (zero level) respectively, with 2µm interval between each
2 scan levels.

3 **Note:** The depth of a z-stack should be determined by the weakest laser used in the protocol.
4 At 100% power, the 543nm HeNe laser (for Dil/CM-Dil) could typically achieve acceptable
5 image quality at depth of 70µm, while 633nm HeNe laser (for DiD) could reach 100µm,
6 when used for imaging bone specimens. Although two-photon excitation can in theory
7 image at depths up to 1mm²⁹, good quality image of bone structure can only be achieved
8 up to 130µm with SHG and the Chameleon laser at 900nm.

9 *Setting up a tile scan*

10 Once satisfied with the z stack setting, move the position beacon to the middle of the
11 specimen. A tile of 5x6 mosaics (an area of 2104µm x 2525µm) is required to cover the
12 growth plate and the metaphysis region of a tibia. It is recommended to check the four
13 corner of the tile to determine if the z-stack boundaries are appropriate for the entire bone,
14 adjusting the z settings if necessary. Reposition the beacon to the middle of the tile and
15 focus at zero plane. The other lasers can then be switched on and a low resolution test tile
16 scan could be run to check the settings and presence of tumour cells in the bone.

17 **Note:** It is strongly recommended to use low resolution scanning and maximal scanning
18 speed during the set up stage, i.e. using a frame size of 256 and a mean pixels depth of 1, to
19 quicken this procedure and reduce the potential of photobleaching. Although two-photon
20 microscopy has the general advantage of reduced photobleaching, high-order
21 photobleaching is still observed within the focal volume²⁹.

22 *Imaging the bone*

1 To achieve high quality image within the shortest time period, change the frame size to 512,
2 mean pixel depth to 4 and use the maximum speed of scanning (Figure 5A). Prior to the
3 beginning of the scan, correct settings and detailed configuration should be loaded in a
4 Multi Time Series (MTS) software. These include database to store temporary files and the
5 reconstructed tile z-stack image, configuration of laser settings, depth and pixels of the scan,
6 z-stack and tile location. Principal steps and settings of MTS software are shown in Figure 5B.
7 Typically, a scan of 2104 μm x 2525 μm for 70 μm depth using two lasers will take
8 approximately 3 hours and 30 minutes, while using 3 lasers will take up to 6 hours
9 depending on the instrument.

10

11 4. Image analysis using Volocity 3D Image Analysis Software

12 Analysis of the 3D reconstructed, tile z-stack scans can be performed using a range of
13 different software packages, such as the commercially available Volocity 3D Image Analysis
14 (PerkinElmer, Cambridge, UK) or the free accessible ImageJ software
15 (<https://imagej.nih.gov/ij/>).

16 In this methodology, we use Volocity 3D Image Analysis Software to carry out 3D analysis of
17 the scanned tibias. Under the '3D Opacity' mode, the software could be used to provide
18 qualitative data via applying pseudocolour (i.e. white colour for calcified bone tissue by SHG)
19 and adjusting brightness and contrast for different channels (Figure 6A). Under 'extended
20 focus' model, the software could provide quantitative data, i.e. quantifying objectives and
21 measuring distances between objectives. Upon setting up the quantification protocol, the
22 function 'Find object' is used to identify bone and tumour cells. Objectives detected with
23 900nm two-photon laser with a minimum size of 500 μm^3 are considered as bone, while

1 objectives detected by the 633nm HeNe laser with a minimum size of $250 \mu\text{m}^3$ and intensity
2 threshold between 90 and 255 are considered Vybrant-DiD labelled breast cancer cells
3 (Figure 6B & 6C). Objectives are quantified within a defined region of interest (ROI) and their
4 distance to the nearest bone surface and to the nearest tumour cell is calculated using the
5 'Measure distance' option of the software, in addition to the default measurements such as
6 size and signal intensity of the objectives (Figure 6D). Finally, all the quantitative data can be
7 exported as comma-separated values (CSV) file for further statistical analysis.

8

1 **Discussion**

2 In this manuscript, we have described step-by-step protocols to be used in confocal and
3 two-photon microscopy in cancer bone metastasis research using mouse models.

4 This method holds a number of advantages over other available techniques for bone
5 imaging. These advantages include: 1. The method generates high-resolution 3D image of
6 the bone microenvironment to understand the spatial and temporal arrangement of
7 multiple cell types within the bone tissue. 2. The thick tissue sections maintain intact
8 structure and cellular morphology, which is essential to understand phenotypic changes in
9 bone structure in genetic studies. 3. The high quality reproducible images generated using
10 this protocol can be used for quantification studies as the method shows low levels of
11 background while maintaining optimal tissue and cellular morphology.

12 In addition to the techniques related to confocal and two-photon microscopy, good
13 fluorescent labelling techniques are equally important for high quality imaging. It is
14 important to choose the right labelling dyes appropriate to the nature of samples and
15 equipment of laser sources. A panel of the most commonly used fluorescent markers for
16 bone research using confocal and two-photon microscopy are listed in table 1. This will
17 facilitate the readers to decide the choice in usage of confocal or two-photon microscopy,
18 together with considering beneficial factors such as lower phototoxicity and multi-
19 fluorescence excitation by two-photon microscopy. However, deeper penetration depth by
20 two-photon, widely accepted as 6-fold deeper than confocal microscopy using the same
21 sample and fluorophores²⁹, will not be achieved in thick bone specimens due to their dense
22 nature. In our practice, penetration depth below 150µm by two-photon laser and SHG could

1 provide optimal images for bone structure, which is not significantly superior to the
2 maximum depth (~100µm) that confocal microscopy could achieve.

3 Although using confocal/two-photon microscopy to carry out static ex vivo imaging is highly
4 advantageous, it has to be used in combination with other advanced techniques such as
5 micro-CT, PET etc to better understand the bone structure. This procedure does not provide
6 dynamic data, which limits our understanding of dynamic processes in bone. However, with
7 the advance of *in vivo* two-photon microscopy, live imaging the dynamic process of the
8 engraftment of tumour cells into skeletons is not out of reach any more. Lo Celso and
9 Sipkins and colleagues have successfully established protocols to tracking of individual
10 haematopoietic stem cells in mouse calvarium bone marrow ³⁰⁻³². Lawson et al. also
11 described such a method using two-photon microscopy to imaging tumour cell engraftment
12 in real time within intact tibia of live mice ²³. Other limitations associated with using this
13 procedure are: 1. Using fluorescent lipophilic dyes could induce microenvironment
14 contamination which possibly occurs via trogocytosis or diffusible microparticles ³³.
15 Therefore, optimization of the labelling procedures and drastic cross validation via different
16 approaches should be adopted to avoid results misinterpretation. 2. The procedure is
17 unsuitable for quantifying secretory or chemokines in bone. 3. As the procedure involves
18 imaging of thick tissue sections, it is necessary to analyze serial sections and number of
19 samples to verify the phenotypic changes in bone structure. 4. The procedure costs are
20 higher than other techniques due to the high purchase costs of appropriate laser sources
21 and high running costs for longer scanning time.

22 In conclusion, confocal/two-photon microscopy is a powerful research tool for studying
23 cellular interactions and microstructures in murine bone models. Understanding working

- 1 principle, background, advantages and limitations of this technique, could help users to
- 2 adjust and improve their own protocol for applying confocal/two-photon microscopy to
- 3 cancer bone metastasis research, using our methodology as a reference.

4

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4

1 **Conflict of Interest**

2 All authors state that they have no conflicts of interest.

3

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1 **Titles and legends to figures**

2 **Figure 1.** Working principle of confocal and two-photon microscopy. **(A)** In a confocal
3 microscope, all emitted fluorescent light from the focal plane focused at the confocal
4 pinhole and passed to the detector, whilst out-of-focus signal will hit the edge of the pinhole
5 and be physically blocked from reaching the detector. **(B)** In two-photon microscopy, the
6 two-photon effect only occurs at the focal point, therefore out-of-focus signal is limited and
7 no pinhole is needed.

8

9 **Figure 2.** Schematic outline. The step-by-step methodology will be described in details in
10 steps of cancer cell preparation, bone specimen preparation (frozen and fixed sample
11 respectively), confocal/two-photon microscopy imaging, and image analysis.

12

13 **Figure 3.** Preparation of the specimen. **(A)** Long bones should be collected snap frozen and
14 embedded in Bright Cryo-M-Bed and bone marrow exposed a Bright OTF Cryostat with a
15 3020 microtome. **(B)** The specimen is placed in a glass bottom dish with the exposed
16 marrow surface facing downwards on the dish, specimen need to be hold in place with a
17 coverslip, as shown in real and schematic. **(C)** Using an upright microscope the dish
18 previously prepared should be placed facing upwards and onto a microscopy slide which
19 hold it in place, as shown in real and schematic.

20

21 **Figure 4.** Configuration settings to scan bone and tumour cells labelled with Vybrant-CM-Dil
22 and Vybrant-DiD. Beam paths for the different channels are shown in **(A)**. The bone

1 structure is visualised by second harmonic generation (SHG) using a Chameleon laser at
2 900nm with a BP390-465 filter, while Vybrant-DiD labelled cancer cells are visualised using a
3 633nm HeNe laser with a BP 650–710 filter and Vybrant Dil/CM-Dil is visualised with a
4 543nm HeNe laser with a BP 565–615 filter. **(B)** Mouse tibia scans in which only SHG signals
5 are shown in the tibia of a non-tumour cell bearing mouse (left panel) while breast cancer
6 cells labelled with Vybrant-CM-Dil (yellow arrows) and Vybrant-DiD (green arrows) are
7 visible in the tibia of a tumour cell bearing mouse (right panel).

8

9 **Figure 5.** Control panel and example of Multi Time Series (MTS) software. **(A)** The optimal
10 settings include 1) frame size of 512, 2) mean pixel depth at 4, and 3) use of the maximum
11 speed of scanning. **(B)** MTS software and crucial steps: i) Select the image database where
12 to save the reconstructed image; ii) Select the temporary database in Options; iii) Load the
13 previously saved configuration of laser settings, depth and pixels of the scan; iv) Edit
14 location and create a tile of 5x6; v) Select 'All locations'; vi) Select ZstackXY'; vii) Update all
15 settings; viii) Start the series.

16

17 **Figure 6.** Image analysis using Volocity 3D Image Analysis Software. **(A)** A 3D reconstruction
18 image of tibia specimen after pseudocolour applied (white colour for calcified bone tissue
19 by SHG) and brightness/contrast adjusted, under the '3D Opacity' mode. **(B)** Under the
20 'extended focus' model, region of interest (ROI) can be selected with a free hand tool. **(C)**
21 The function 'Find object' is used to identify bone and tumour cells. The settings for
22 identifying tumour cells labelled with DiD are objectives with a minimum size of $250 \mu\text{m}^3$
23 and intensity threshold between 90 and 255. **(D)** Distance from identified tumour cells to

- 1 the nearest bone surface and to the nearest tumour cell can also be calculated, using the
- 2 'Measure distance' option.