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**Nanovibrational stimulation for 3D osteogenesis  
in biphasic 3D scaffold; A new option for  
bone tissue engineering**

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**Submitted in fulfilment of requirements for the  
degree of Doctor of Philosophy (PhD)**

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## Abstract

In our centre, we had developed nanovibrational bioreactor generating nanoscale vibration by piezo actuator for bone tissue engineering. Recently, nanovibrational stimulation (NS; 30 nm at 1000 Hz) showed the success of osteogenic induction in mesenchymal stem cells (MSCs) seeded collagen hydrogel without chemical supplement. However, culturing MSCs in the collagen hydrogel for long term NS stimulation in NS bioreactor is challenging due to its mechanical properties. The principle aim of this thesis is to develop the scaffold for nanovibrational bioreactor which is suitable for surgical application. Three strategies including in-gel scaffolds, collagen concentration optimization and genipin crosslinking were trialled which aimed to improve hydrogel stiffness and handleability, possess biocompatibility and allow NS force transmission.

The role of high amplitude stimulation (90 nm at 1000 Hz) on 3D osteogenesis was also studied. Interestingly, increasing NS amplitude successfully enhanced 3D osteogenesis through multiple pathways and it was biologically safe. Metabolomics during NS revealed the evidence of low level of reactive oxygen species production and inflammation which was controlled in physiological level through multiple intracellular signals such as redox balancing, NF $\kappa$ B and MAPK pathways.

To propose the technique how to use NS induced MSCs for clinics, MSCs seeded biphasic scaffolds compositing collagen hydrogels and freeze dried collagen sponges were developed. Cell-hydrogel-sponge composite (CHSC) was reproducible, handleable and biologically safe. CHSC allowed a good fidelity of NS. NS with high amplitude stimulation successfully induced 3D osteogenesis. NS protocol in CHSC was optimized in order to identify a stimulating duration which can induce osteogenesis without phenotypic reversibility. Interestingly, two-week stimulation possibly committed MSCs in the preosteoblast stage.

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## Publication

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## Awards

Award winner in Medical Science of Anglo-Thai Society Educational Awards for Excellence, 2018.

## Presentations

### Podium presentations

30<sup>th</sup> Annual Conference of the European Society for Biomaterials (ESB) 9-13<sup>th</sup> September 2019, Dresden, Germany

28<sup>th</sup> Annual Conference of the European Society for Biomaterials (ESB) 4-8<sup>th</sup> September 2017, Athens, Greece

4<sup>th</sup> AO Trauma Asia Pacific Scientific Congress 24-25<sup>th</sup> May 2019, Taipei, Taiwan

## Poster presentations

5<sup>th</sup> TERMIS World Congress 2018, 4-7<sup>th</sup> September 2018, Kyoto, Japan

29<sup>th</sup> European Conference on Biomaterials (ESB 2018), 9-13<sup>th</sup> September 2018, Maastricht, Netherlands.

Glasgow Orthopaedic Research Initiative (GLORI 2018), 23<sup>th</sup> February 2018, Glasgow, UK.

FEBS Workshop Biological Surfaces and Interfaces: Interface Dynamics, 2<sup>nd</sup>-7<sup>th</sup> July 2017, Sant Feliu de Guixols, Catalonia, Spain

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## **Author's Declaration**

I declare that, this thesis is my own work except where explicit reference is made to the contribution of others and has not been submitted for any other degree.

Wich Orapiriyakul

January 2020

## Definition and abbreviations

Abbreviation	Name	Definitions and functions	Chapters
AA	Arachidonic acid	AA is a polyunsaturated omega-6 fatty acid converted from linoleic acid. AA is the precursor of eicosanoids which plays role in inflammation.	5
AC	Adenylate cyclase	Enzyme which is regulated by G proteins and calcium ions.	4
Acetyl-CoA	Acetyl coenzyme A	A molecule which is derived from carbohydrate, and fatty acid metabolism. Acetyl-CoA enters TCA cycle generating NADH and CO <sub>2</sub> .	5
ACC1 and 2	Acetyl-CoA carboxylases	Enzyme converts acetyl-CoA to malonyl-CoA for fatty acid synthesis.	5
AKT	Protein kinase B (PKB)	AKT is serine/threonine-specific kinase. AKT controls cell survival, metabolism and NFκB.	5
ALP	Alkaline phosphatase	Enzyme which is present in many tissues including bone. ALP regulates phosphate ion initiating mineralization.	1-6
Atf6	Activating transcription factor 6	Atf6 is an endoplasmic reticulum membrane-bound bZIP transcription factor. Atf6 plays role on osteogenesis by regulating RUNX2.	4
ATGL	Activating adipose triglyceride lipase	Enzyme, found in lipolysis, which breaks down triacylglycerol and promotes fatty acid oxidation.	5
ATP	Adenosine triphosphate	Organic chemical which provides energy. ATP is produced by glycolysis, TCA cycle and β-oxidation.	1, 5
AMPK	AMP-activated protein kinase	AMPK functions as energy sensor. AMPK activation promotes catabolism producing energy, synthesizes anti-oxidants as well as reduces anabolism.	5
BC	β-catenin	Protein which involves in many cellular pathways. In bone, with canonical Wnt, β-catenin promotes early phase of osteogenesis.	1, 4, 5
BMP2	Bone morphogenetic protein 2	Protein which plays role in bone development.	1, 4, 5
BMPR1a	Bone morphogenetic protein receptor type 1A	BMPs receptor which plays role in bone and cartilage development.	4

Abbreviation	Name	Definitions and functions	Chapters
B-oxidation	Beta-oxidation	The process which breakdowns fatty acid to produce acetyl-CoA in turn entering TCA cycle.	5
cAMP	Cyclic adenosine monophosphate	Molecule which is synthesised from ATP by AC. cAMP interacts with protein kinase A regulating TRP channels.	4
CaMKs	Calmodulin-dependent kinase	Enzyme which interacts with Ca <sup>2+</sup> /calmodulin (CaM) complex. Ca <sup>2+</sup> /CaM complex binds to CAMKII in turn activating AP-1 to promote osteoblast differentiation.	4
CaSR	Calcium-sensing receptor	G-protein coupled receptor which controls calcium homeostasis and extracellular calcium.	5
CD105	Cluster of differentiation 105 (Endoglin)	CD105 is a co-receptor of TGF- $\beta$ and also expresses in endothelial cells.	1
CD11b	Cluster of differentiation 11b (Integrin alpha M)	Expresses in leukocytes.	1
CD14	Cluster of differentiation 14	CD14 is found in neutrophils, dendritic cells, and macrophages.	1
CD19	Cluster of differentiation 19	Expresses in B cell lymphocytes.	1
CD34	Cluster of differentiation 34	CD34 is found in hematopoietic cells, MSCs and endothelial progenitor cells	1
CD45	Cluster of differentiation 45 (protein tyrosine phosphatase receptor type C; PTPRC)	Commonly found in leukocytes.	1
CD73	Cluster of differentiation 73 (5'-nucleotidase; NT5E)	Expressed by stromal cells, dendritic cells and lymphocyte.	1
CD79	Cluster of differentiation 79	Expresses on B cell lymphocytes.	1
CD90	Cluster of differentiation 90	Found in non-lymphoid tissues e.g. neuron cells, fibroblasts, myoblast, and endothelial cells.	1
CDK	Cyclin dependent kinase	Protein kinase plays role in cell cycle regulation. ROS can also activate CDK.	5
Col1A1	Collagen type I alpha 1	ECM protein which is found in cartilage, bone and tendon.	1, 4

Abbreviation	Name	Definitions and functions	Chapters
COX	Cyclooxygenase	Enzyme which catalyses arachidonic acid to prostanoids e.g. thromboxanes and prostaglandins.	5
DAG	diacylglycerol	Secondary messenger which can activate PKC in turn regulating calcium ion channels.	4
DAMPs	Damaged-associated molecular patterns	Molecules which are produced by injured cells for noninfectious inflammatory response.	5
DHA	Docosahexaenoic acid	DHA (omega-3 fatty acid; 22:6(n-3)) is synthesised (by elongation and desaturation) from alpha-linolenic acid. DHA is converted from DPA and EPA.	5
Dlx5	Distal-less homeobox 5	Transcription factor plays role in osteogenesis.	4
DPA	Docopentaenoic acid	Omega-3 fatty acid consists of 22 carbons and 5 double bonds (22:5).	5
ECM	Extracellular matrix	Networks, produced by cells, which provide microenvironment to support cells.	1-6
EPA	Eicosapentaenoic acid	Omega-3 fatty acid consists of 20 carbons and 5 double bonds (20:5). EPA is elongated by $\Delta 5$ elongase to produce DPA.	5
ERK1/2	Extracellular signal-regulated kinase 1 and 2	ERK1/2 (MAPK members) is involved in many cellular processes such as proliferation, differentiation and migration.	1, 2, 4, 5
ESCs	Embryonic stem cells	Pluipotent stem cells which are derived from blastocyst after fertilization.	1
FAK	Focal adhesion kinase	Tyrosine kinase which plays role in integrin signaling.	1, 5
Fas	-	Fas or CD95 (APO-1) is a member of TNFs. Fas links to cytoskeleton.	5
FGF2	Fibroblast growth factor 2	Growth factor which is not only involved in many cell activities but also important for bone regeneration.	1
FHL2	Four and a half LIM domains protein 2	Protein which can interact with Wnt/ $\beta$ -catenin pathway in turn promoting RUNX2 expression.	1

Abbreviation	Name	Definitions and functions	Chapters
FOXO	Forkhead box, class O	Transcription factor which regulates cellular stress and promote anti-oxidation. FOXO is regulated by AMPK-AKT pathway.	5
G3P shuttle	Glycerol-3-phosphate shuttle	Process which produces energy, generates NADH and bypasses complex I in electron transport chain. This shuttle links between glycolysis, lipogenesis and OXPHOS through G3P dehydrogenase (GPDH) enzyme.	5
GLUTs	Glucose transporters	Proteins promoting glucose transportation at cell membrane.	5
GPCRs	G protein coupled receptors	Receptors on cellular membrane which can recognize molecules such as ligands in turn activating intracellular signals.	5
GSH	Glutathione	GSH plays role as anti-oxidant via redox balancing.	5
GSK-3B	Glycogen synthase kinase 3-beta	Serine/threonine kinase which involves in glycogen synthesis. GSK-3B can decrease RUNX2 expression and Wnt/ $\beta$ -catenin.	1
GSSG	Glutathione disulfide	Oxidized form of GSH.	5
Hh	Hedgehog	Protein which plays role in osteoblast differentiation. Hh consists of Shh (sonic), Ihh (indian) and Dhh (desert).	1
HIF1 $\alpha$	Hypoxia-inducible factor 1-alpha	Transcription factor which plays role in MSCs differentiation and is regulated by oxygen condition.	5
HLA-DR	Human leukocyte antigen-DR isotype	Molecules which is found in antigen presenting cells and activated T-cells.	1
HMG-CoA reductase	$\beta$ -Hydroxy $\beta$ -methylglutaryl-CoA reductase	Enzyme in mevalonate pathway which involves in cholesterol synthesis.	5
H <sub>2</sub> O <sub>2</sub>	Hydrogen peroxide	Oxidizer which is used for oxidative stress induction.	5
IDO	Indoleamine 2,3-dioxygenase	Enzyme which promotes tryptophan degradation. IDO reduces inflammatory response and inactivates T-cell function.	5
IGF	Insulin like growth factor	Hormone which involves in proliferation and differentiation (including osteogenesis).	5

Abbreviation	Name	Definitions and functions	Chapters
I $\kappa$ B	Nuclear factor of kappa-light-chain-enhancer of B-cells inhibitor	Protein which binds to NF $\kappa$ B to inhibit NF $\kappa$ B function in resting stage. I $\kappa$ B degradation allows NF $\kappa$ B nuclear translocation.	1
IKKs	I $\kappa$ B kinases	Enzyme of NF $\kappa$ B pathway consists of IKK $\alpha$ , and IKK $\beta$ . Phosphorylated IKK complex degrades I $\kappa$ B.	1
IL-1	Interleukin-1	IL-1 plays role in inflammatory response commonly produced by inflammatory cells such as macrophages, monocytes and dendritic cells.	1, 5, 7
IL-6	Interleukin-6	Cytokine which plays role in both pro- and anti-inflammation. MSC can also secrete IL-6 to convert monocytes to M2 macrophages	1, 5, 7
IL-10	Interleukin-10	Cytokine which is produced by macrophage for anti-inflammatory effects.	1, 5
IL-11	Interleukin-11	IL-11 involves in osteoclastogenesis, neurogenesis and hematopoietic effect.	1
IL-18	Interleukin-18	Cytokine which involves in inflammation.	1
IP3	Inositol-1,4,5-triphosphate	IP3 promotes calcium release from endoplasmic reticulum (ER) via IP3 receptor.	4
IgB1,5	Integrin B1, 5	Cell membrane receptors play role in cell adhesion.	4
iPSCs	Induce pluripotent stem cells	Pluripotent stem cells which are derived from somatic cells through transduction process using Oct, SOX, Klf2 and Myc factors.	1, 7
JAKs	Janus kinases	Tyrosine kinases which play role in bone development.	5
JNKs	c-Jun N-terminal kinases	JNK (MAPK member) responds to oxidative stress.	5
KCNK 2	Potassium channel subfamily K member 2 (TREK1)	Potassium channel which responds to mechanical stimuli.	4
KCNK 4	Potassium channel subfamily K member 4 (TRAAK1)	Potassium channel which is found in neuron relating to mechanical stimulation.	4

Abbreviation	Name	Definitions and functions	Chapters
LC-PUFAs	Long chain polyunsaturated fatty acids	Fatty acids (with 18 carbons or more) consisting of omega 3 and omega 6. LC-PUFAs are precursors of eicosanoids.	5
LINC complex	Linker of nucleus and cytoskeleton complex	Proteins on nuclear membrane which consist of SUN (links to lamin) and nesprin (links to actin).	1
LOX	Lipoxygenase	Enzyme which catalyses AA or LC-PUFAs to eicosanoids such as leukotrienes.	5
LR	Lipid raft	Plasma membrane which is composed of lipids, cholesterol and protein receptors. Clusters of protein receptors in LR provide signals responding to the environment.	5
LRP5 and 6	Low-density lipoprotein-related receptor-5 and -6	Proteins on cellular membrane function as co-receptor of Frizzled receptor. LRP5 sense to mechanical stimuli and activate Wnt canonical pathway.	1, 4
MAPK	Mitogen-activated protein kinase	MAPK (protein kinase) involves proliferation, differentiation, inflammation and apoptosis. MAPK consists of ERK1/2, JNK and p38.	1, 4, 5
MKP1	Mitogen-activated protein kinase phosphatase 1	Phosphatase enzyme which can downregulate MAPK signaling. MKP1 plays role in transdifferentiation of preadipocyte to osteoblast.	1
MSCs	Mesenchymal stem cells	Multipotent stem cells which can differentiate to osteoblast, chondrocyte, adipocyte and fibroblast. MSCs can be found in adiposed tissue (AMSCs), bone marrow (BM-MSCs), and cord blood (CB-MSCs).	1-7
Msx2	MSh homeobox 2	Transcription factor which promotes osteogenesis.	4
mTOR	Mammalian target of rapamycin	mTOR is a nutrient sensor for cells. mTOR is regulated by both AMPK and AKT thus balancing catabolic and anabolic pathways. mTOR plays role in growth function and survival.	5
NCX	Na <sup>+</sup> /Ca <sup>2+</sup> exchanger	Ion channel on plasma membrane which allows sodium ion influx exchanged with calcium ion efflux.	4

Abbreviation	Name	Definitions and functions	Chapters
NCKX	Na <sup>+</sup> /Ca <sup>2+</sup> -K <sup>+</sup> exchanger	Ion channel which allows sodium ion influx exchanged with calcium and potassium ion efflux.	4
NFκB	Nuclear factor kappa-light-chain-enhancer of activated B cells	Transcription factor which is known as a stress sensor regulating immune responses and survival pathways.	5
NLRs	NOD-like receptor	Receptor in cytoplasm which recognises PAMPs and DAMPs	5
NLRP3	NOD-like receptor protein 3	Receptor which senses to various inflammasomes and plays a role in immune system.	5
NO	Nitric oxide	Molecule which involves in cell proliferation, apoptosis and bone homeostasis.	5
NOS	Nitric oxide synthase	Enzyme produced endogenous NO. NOS can be found in endothelial cells (eNOS), central nervous system (nNOS), or induced by inflammation (iNOS).	5
NOX	Nicotinamide adenine dinucleotide phosphate oxidase (NADPH oxidase)	Enzyme on plasma membrane which catalyses NADPH to NADP which, in turn, produces ROS.	5
Nrf2	Nuclear factor erythroid 2-related factor2	Transcription factor which promotes anti-oxidative enzyme synthesis such as SOD and heme oxygenase 1(HO-1).	5
OCN	Osteocalcin	OCN is an osteoblast secreted hormone which regulates bone mineralization.	1-6
Omega-3	-	Polyunsaturated fatty acids with 3 double bonds (such as α-linolenic acid and DHA).	5
Omega-6	-	Polyunsaturated fatty acids with 6 double bonds (such as linoleic acid and AA).	5
ON	Osteonectin	ON is an osteogenic marker protein which can bind to collagen and hydroxyapatite to trigger mineralization process.	1-6
OPG	Osteoprotegerin	Protein which can bind to RANKL to inhibit RANK-RANKL interaction.	1
OSX	Osterix	OSX is a transcription factor which can regulate osteoblast commitment.	1-6

Abbreviation	Name	Definitions and functions	Chapters
OPN	Osteopontin	OPN is an extracellular matrix protein which can regulate mineralization and bone remodeling.	1-6
OXPHOS	Oxidative phosphorylation	The process of nutrient metabolism which produces ATP under aerobic condition in mitochondria.	5
P38	-	MAPK member which responds to stress.	1, 4, 5
PAMPs	Pathogen-associated molecular patterns	Molecules on bacteria or endotoxin which can be recognized by TLRs.	5
PC 1	Polycystin 1	PC1 is G-protein coupled receptor on cellular membrane. PC1 senses to fluid shear stress to regulate calcium ion channels.	5
PCL	Polycaprolactone	Biodegradable synthetic polymer which is commonly used in tissue engineering.	1
PDH	Pyruvate dehydrogenase	Enzyme which converts pyruvate to acetyl-CoA.	5
PDK1	Pyruvate dehydrogenase kinase 1	PDK1 is a HIF1 $\alpha$ activated enzyme which can inactivate PDH.	5
PGE2	Prostaglandin E2	Inflammatory mediator which is derived from AA.	5
PDGF	Platelet-derived growth factor	Growth factor which plays role in MSC differentiation and angiogenesis. PDGF is found during normal bone healing.	1
PGA	Polyglycolic acid	PGA is a widely used synthetic biomaterial (such as suture). PGA is degradable by hydrolysis.	1
PHDs	Prolyl hydroxylases	Enzyme which inhibits HIF1 $\alpha$ .	5
PI3K	Phosphoinositide 3-kinase	PI3Ks is an enzyme involving in cell functions. PI3Ks activates AKT in PI3K/AKT/mTOR pathway.	5
PIP <sub>2</sub>	Phosphatidylinositol 4,5 - bisphosphate	PIP2 is a phospholipid of cell membrane. PIP2 is hydrolysed by PLC into DAG and IP3.	4
PKB	Protein kinase B	Refer to AKT.	5
PKC	Protein kinase C	Enzyme which plays role in intracellular calcium signals. PKC is activated by DAG and calcium ions.	1, 4, 5

Abbreviation	Name	Definitions and functions	Chapters
PLA	Poly(lactic acid)	Biodegradable material which is commonly used for 3D printing material.	1
PLC	Phospholipase C	Enzyme which hydrolyses PIP <sub>2</sub> to DAG and inositol-1,4,5-triphosphate (IP <sub>3</sub> ).	4
PLGA	Poly (lactide-co-glycolide)	Biodegradable material which is derived from glycolic acid and lactic acid.	1
PMCA	Plasma membrane Ca <sup>2+</sup> ATPase	PMCA is a plasma membrane protein driving calcium efflux. PMCA plays role in maintaining calcium ion level in cytoplasm.	4
PPAR <sub>γ</sub>	Peroxisome proliferator-activated receptor $\gamma$	Master regulator of adipogenesis.	4
PPP	Pentose phosphate pathway	PPP is a glucose pathway which converts glucose-6-phosphate to ribose-5-phosphate and produces NADPH.	5
RANK	Receptor activator of nuclear factor kappa-B	Osteoclast receptor which can bind to RANKL promoting osteoclast differentiation.	5
RANKL	Receptor activator of nuclear factor kappa-B ligand	Membrane protein on osteoblast binds to RANK (on osteoclast) and OPG.	5
Ras	Rat sarcoma	Ras is a protein which regulates cytoskeleton, migration, cell differentiation and proliferation. Ras activates MAPK pathway.	5
RGD	Arg-Gly-Asp motif	Amino acid on ECM (such as fibronectin) which plays role on cell attachment interacting with integrins.	1
ROCK	Rho-associated kinase	ROCK is a kinase enzyme which plays role in cell migration and cytoskeleton. Rho family consists of Rho, Rac and Cdc42.	1, 4, 5
ROS	Reactive oxygen species	Oxygen derived molecules such as superoxide anion and hydrogen peroxide which is produced at mitochondria or cell membrane (via NADPH oxidase).	1, 4, 5

Abbreviation	Name	Definitions and functions	Chapters
Ror2	Receptor tyrosine kinase-like orphan receptor 2	Tyrosine kinase receptor which plays role in bone homeostasis. Ror2 (on osteoclast) interacts with Wnt5a (from osteoblast) to promote osteoclastogenesis.	1
RUNX2	Runt-related transcription factor 2	Major transcription factor of osteogenesis.	5
RyR	Ryanodine receptors	Calcium ion channel on endoplasmic reticulum which releases calcium ion from storage to cytosol.	4
SERCA	Sarco-endoplasmic reticular Ca <sup>2+</sup> -ATPase	Ca <sup>2+</sup> ATPase allows cytosolic calcium to storage in sarco- or endoplasmic reticulum. SERCA can be found in many cell types such as myocyte (most common), cardiocyte and monocyte.	4
SMAD1/5	-	Proteins which involves in BMP canonical pathway for osteogenesis.	1, 4, 5
SMAD2/3	-	With canonical TGF- $\beta$ , SMAD2/3 promotes early osteogenesis	1
SOD	Superoxide dismutase	SOD is an anti-oxidant enzyme which is found in cytoplasm (ZnSOD) and mitochondria (MnSOD).	5
Src	Steroid receptor coactivator	Src (intracellular tyrosine kinase) plays many roles in cellular responses. Src activates FAK phosphorylation.	1
STATs	Signal transducer and activator of transcription proteins	STATs are transcription factors regulating bone homeostasis and skeletal development as well as controlling MSC proliferation.	5
SVCT2	Sodium dependent vitamin C transporter 2	SVCT2 is a glycoprotein which plays role in ascorbic acid (vitamin C) transportation.	1
TAZ	Transcriptional coactivator with PDZ-binding motif	TAZ is an effector of Hippo signaling pathway and plays role in mechanical sensing and phenotypic memory.	1, 4, 6
TBC1D1	Tre-2/USP6, BUB2, cdc16 domain family member 1	TBC1D1 is a protein regulating glucose transportation. AMPK increases glucose uptake via TBC1D1 phosphorylation in turn promoting GLUT1 and 4 membrane localization.	5

Abbreviation	Name	Definitions and functions	Chapters
TCA	Tricarboxylic acid cycle	Biochemical pathway which oxidizes Acetyl-CoA in order to generate NADH to enter OXPHOS for ATP production.	5
TGF- $\beta$	Transforming growth factor beta	Cytokine which promotes osteoprogenitor proliferation and early osteoblastic differentiation.	5
TLRs	Toll-like receptor	TLRs are membrane receptors on leukocyte. TLRs recognise PAMPs in turn activating immune responses.	5
TNF $\alpha$	Tumor necrosis factor alpha	Cytokine which involves inflammatory responses. TNF $\alpha$ inhibits osteoblast and promotes osteoclastogenesis.	5
TRAF6	Tumor necrosis factor receptor associated factor 6	TRAF6 is a mediator of NF $\kappa$ B and MAPKs involving in immunological and inflammatory responses.	1
TRPA1	Transient receptor potential Ankyrin 1	Ion channel which senses pain and oxidative stress.	4
TRPM	Transient receptor potential melastatin	Ion channel which senses heat.	4
TRPP	Transient receptor potential polycystin	Refer to polycystin.	4
TRPV1	Transient receptor potential vanilloid type 1	Calcium and sodium ions channel which senses temperature and pain.	1-5
TXAs	Thromboxanes	Eicosanoids play roles in vasoconstriction and platelet aggregation.	5
VEGF-D	Vascular endothelial growth factor D	Growth factor which plays role in angiogenesis. VEGF-D also promotes osteoblast differentiation.	5
VEGFR3	Vascular endothelial growth factor receptor 3	VEGFR3 is a VEGF receptor which can be found in osteoblast. VEGFR3 can recognise VEGF-D.	5
VGCCs	Voltage-gated calcium channels	Calcium ion channels on cell membrane which allow calcium influx activated by depolarization.	4
VHL	Von Hippel-Lindau ubiquitin ligase	VHL binds to prolyl hydroxylase domain (PHD) and factor inhibiting hypoxia-1 (FIH-1) in order to inhibit HIF-1 $\alpha$ under normoxic condition.	5

Abbreviation	Name	Definitions and functions	Chapters
Wnt	Wingless-related integration site	Wnt is a protein which is recognised by Frizzled receptor. Wnt signaling pathway promotes osteogenesis in early phase.	1, 4, 5
YAP	Yes-associated protein	Transcriptional factor which is related to skeleton and phenotypic memory. YAP is regulated by hippo pathway.	4, 6

# **Chapter 1 Introduction**

# **Chapter 1 Introduction to nanovibrational stimulation**

## **1.1 From Bedside to Bench; What do orthopaedic surgeons want from bone tissue engineering?**

Nowadays, introducing tissue engineered bone substitutes for clinical orthopaedic applications is challenging. There are a diversity of indications that could use bone substitutes such as spinal fusion, nonunion, etc (Baldwin et al., 2019). However, the most difficult situation is the segmental bone defect resulting from a traumatic event or bone tumor removal. Because of the large defect complicated with poor surrounding tissue, many orthopaedic patients suffer from the long-term process of treatment, multiple operations and surgical complications (L., C., J., A., & Baldy, 2010).

The most popular and effective surgical technique for large bone defect treatment is the distraction osteogenesis by external ring fixator, invented by Professor GA. Ilizarov (Spiegelberg et al., 2010). Distraction osteogenesis provides a successful approach for large bone defect treatments (Aktuglu, Erol, & Vahabi, 2019). However, there are many drawbacks. For instance, awkward, heavy and long-term application of the ring frame makes patients feel uncomfortable. In addition, the external rods and pins may introduce pathogens into the bone which may then develop into a pin track infection and osteomyelitis. Also, the patient's self administered daily distraction adjustment may also lead to unfavorable outcomes (Kempton, McCarthy, & Afifi, 2014; Lascombes, Popkov, Huber, Haumont, & Journeau, 2012; Paley, 1990).

The induced membrane technique (IMT) is a another strategy for treatment of the segmental bone loss proposed by Masquelet et al (Giannoudis, Faour, Goff, Kanakaris, & Dimitriou, 2011; A. C. Masquelet & Begue, 2010). IMT is a two-staged procedure (A. Masquelet, Kanakaris, Obert, Stafford, & Giannoudis, 2019). Polymethyl- methacrylate (PMMA) is implanted at the bone defect in turn allowing the host to create membrane encapsulation. At the second stage, the PMMA spacer is removed. The bone void is filled with autologous bone graft (Giannoudis et al., 2011). Nevertheless, this technique requires an abundance of bone graft which inevitably leads to donor site morbidity, causing fracture and pain (Stafford & Norris, 2010). In large defects, chemical supplements such as BMPs may be required to improve healing (Giannoudis et al., 2011).

Biologically, the induced membrane is comprised of fibroblast, blood vessels and inflammatory cells (Christou, Oliver, Yu, & Walsh, 2014). This membrane produces bone morphogenetic protein-2 (BMP-2), vascular endothelial growth factor (VEGF) and transforming growth factor  $\beta$ 1 (TGF- $\beta$ 1) during week 4-6 (Pelissier, Masquelet, Bareille, Pelissier, & Amedee, 2004; X. Wang, Wei, Luo, Huang, & Xie, 2015). However, clinical outcomes of the IMT for bone defect treatment is varied (A. C. Masquelet, 2003; Niccolai, Di Mento, Mocchi, & Berlusconi, 2018; R., M., A., & I., 2017; J. Wang, Yin, Gu, Wu, & Rui, 2019). In the future, a combination of the IMT with stem cells and tissue engineering concepts may potentially improve the outcome of large bone defect treatments (Dilogo, Primaputra, Pawitan, & Liem, 2017; Viateau et al., 2010).

## 1.2 Bone structure and bone marrow cells niche

Bone structurally consists of cortical bone (compact bone) and cancellous bone (spongy or medullary bone) (Clarke, 2008). Histologically, bone can be classified into woven (immature, disorganized collagen fiber) and lamellar bone (mature, organized collagen fiber) (Tzelepi, Tsamandas, Zolota, & Scopa, 2009).

Cortical bone is an outer and dense part of bone. Cortical bone consists of osteons (or Haversian system) which is a lamellar mineralized matrix. Osteocytes reside in osteons and communicate each other through canaliculi (Hideki Yoshikawa, Tsumaki, & Myoui, 2009). The lamellar structures of osteons surround the haversian canals where mesenchymal stem cells, vessels and nerves are located. Vessels in haversian canals play role on transferring oxygen and nutrients to osteocytes (Khurana & Safadi, 2010).

Endosteum, lining at the inner layer of cortical bone, consists of MSCs, pre-osteoblasts, osteoblasts, fibroblast. Lining osteoblasts play interactive roles with hematopoietic stem cells (HSCs) in medullary canal (Lévesque, Helwani, & Winkler, 2010). Surfaces of lamellar bone are lined with quiescent osteoblasts. Osteoclasts formed a Howship's lacunae on endosteum to resorb bone mineralized matrix for enhancing bone homeostasis and remodelling (Safadi et al., 2009).

Cancellous bone (medullary bone) is trabecular network of lamellar bone (Tzelepi et al., 2009). Cancellous bone is filled with bone marrow (BM) consisting of hematopoietic cells (red marrow) and adipose tissue (yellow marrow). BM consists of osteoprogenitor cells, osteoblast, osteoclast precursor cells, haematopoietic stem cells

(HSCs), stromal cells, MSCs, adipocytes, endothelial cells and nerve cells (Travlos, 2006).

In BM, MSCs plays role not only in bone regeneration but also supporting HSCs (Crippa & Bernardo, 2018; Frenette, Pinho, Lucas, & Scheiermann, 2013). At endosteum (endosteal niche), HSCs interact with osteoblasts, MSCs and adipose tissues affecting on HSCs mobilization, quiescence, and differentiation (Lévesque et al., 2010). BM adipose tissue also links to bone metabolism (Yujue Li, Meng, & Yu, 2019). BM is vascularized by medullary artery, arterioles, capillary and sinusoids. Many cells, e.g. endothelial cells, CXCL12 abundant reticular cells, pericytes and megakaryocytes, are resided nearby sinusoids creating vascular niche. Vascular niche plays important roles on HSCs growth and functions. (Lilly, Johnson, & Bunce, 2011; Tamma & Ribatti, 2017).

### **1.3 Bone healing: What can we learn from nature?**

Bone healing is a dynamic process involving vascularization, cartilage and osteogenic differentiation and then mineralization. Thus, understanding the natural bone healing process could help in developing synthetic bone substitutes. Vascularization, linking to oxygen conditioning (Y. Wang et al., 2007), is a key modulator of bone healing (Drager, Harvey, & Barralet, 2015; Marenzana & Arnett, 2013). Hypoxic condition suits chondrogenic differentiation (Schipani, 2006) while normoxic conditions promotes osteoblast differentiation (Shyh-Chang, Daley, & Cantley, 2013). Considering orthopaedic fixation treatment, fracture reduction and fixation stability affect vascularization and thus fracture healing (Claes, Eckert-Hubner, & Augat, 2003; Lienau, Schell, Muchow, & Duda, 2004). In primary bone healing, internal fixation with fracture compression technique restores blood flow thus enhancing osteogenic differentiation. While in secondary bone healing, relative stability allows interfragmentary micromotion (Perren, 2002). Gaps at the fracture site represent vascular disruption indicating hypoxic conditions (Kunze, Hofstetter, Posalaky, & Winkler, 1981). Hypoxic condition initially promotes chondrogenesis thus enhances enchondral ossification. Osteogenesis and mineralization then occur after intensive vascularization (Claes, Recknagel, & Ignatius, 2012). Bone healing consists of 3 stages, inflammation, reparation and remodelling (**Figure 1.1**).

### 1.3.1 Inflammatory phase

The inflammatory phase occurs within 24 hours to 1 week in order to activate and recruit essential cells such as MSCs and immune cells into the fracture site to enhance regeneration (Jiliang Li, Kacena, & Stocum, 2019). At the fracture site, a hematoma is formed to create a fracture niche. Surrounding injured tissues generate inflammatory signals and cytokines preparing adjacent structures for the healing process such as vasodilation and increase vessel permeability (Ryan E. Tomlinson & Silva, 2013). Inflammatory cytokines such as tumor necrosis factor alpha (TNF $\alpha$ ), interleukin-1 (IL-1), IL-6, IL-11 and IL-18 (Giannoudis et al., 2015) are secreted aiming to promote vascularization, and recruit cells to fracture sites such as macrophages (eliminating death cells via phagocytosis) and precursor cells (such as MSCs) which are essential for bone healing and angiogenesis (Giannoudis et al., 2015; Florence Loi et al., 2016).

### 1.3.2 Reparation phase

The reparation phase is affected by fracture niche including fracture gap (Claes et al., 2003; Meeson et al., 2019), interfragmentary micromotion (Elliott et al., 2016) and vascular supply at fracture site (Marenzana & Arnett, 2013; Ryan E. Tomlinson & Silva, 2013). In the reparation phase, woven bone (immature bone) is developed from a soft (cartilaginous) callus to become a hard (mineralized) callus (J. Li et al., 2019). The fracture characteristics can also influence the applied fracture fixation technique and mode of bone healing.

#### 1.3.2.1 Direct fracture healing

Direct fracture healing (primary bone healing) occurs when the fracture is simple with less periosteal injury, thus preserving periosteal blood supply (Ryan E. Tomlinson & Silva, 2013). This type of fracture can be anatomically reduced and an absolute stability of fixation can be achieved (Perren, 2002). After reduction, the haversian system is restored allowing intraosseous blood flow. Normoxic condition then induces MSC to osteogenic cell fate (Shyh-Chang et al., 2013). Direct fracture healing can be divided into contact healing (gap < 10  $\mu$ m) and gap healing (gap 800  $\mu$ m-1 mm) (Marsell & Einhorn, 2011). The process of contact healing involves a direct remodelling process (via the cutting cone (Eriksen, 2010)),

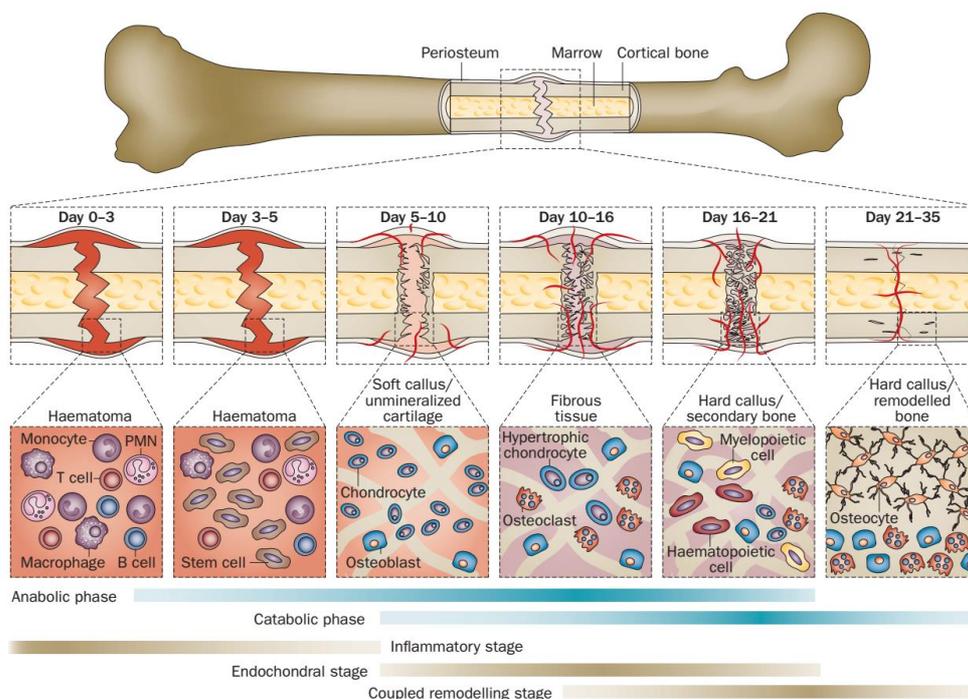
while gap healing generates lamellar bone to fill the gap before bone remodelling (Marsell & Einhorn, 2011).

### **1.3.2.2 Indirect fracture healing**

Indirect bone healing (secondary bone healing) occurs in comminuted fractures where some fixation stability has been achieved (Perren, 2002). This mode of bone healing involves both intramembranous and endochondral bone healing (Marsell & Einhorn, 2011). At the fracture gap, recruited MSCs produce various growth factors such as transforming growth factor beta (TGF- $\beta$ ; involved in chondrogenesis), BMPs (promoting osteogenesis), VEGF (angiogenesis), platelet-derived growth factor (PDGF; cell migration), and fibroblast growth factor 2 (FGF2; angiogenesis) (Ghiasi, Chen, Vaziri, Rodriguez, & Nazarian, 2017). At 2-6 weeks, a soft callus, consisting of blood vessels, cartilage and spongy bone, is formed and, in turn, is mineralized to a hard callus (Holmes, 2017).

### **1.3.3 Remodelling**

After the reparation phase, active osteoclasts remodel woven bone to lamellar bone restoring the harversian system (Eriksen, 2010). Osteoclasts attach on to bone, form a ruffled membrane as well as secreting  $H^+$ , ATPase and Cathepsin K in vesicles in order to degrade mineralized bone (Boyle, Simonet, & Lacey, 2003; Rucci, 2008). In this phase, high levels of inflammatory cytokines such as IL-1 and TNF $\alpha$  can be found (Marsell & Einhorn, 2011).



**Figure 1.1 Phase of bone healing**

In the inflammatory phase, a hematoma is formed. Precursor cells are recruited to the fracture site. After that, granulation tissue is formed, in turn developing soft and hard callus in the reparation phase. Vascularization is also found in this phase. Bone remodelling occurs after hard callus formation. (With permission of Einhorn., et al 2015 (Einhorn & Gerstenfeld, 2015))

## 1.4 Osteogenic pathways

Diverse osteogenic pathways are orchestrated at specific time points (James, 2013; Javed, Chen, & Ghorri, 2010) and the same pathways may provide different functions at different stages of osteoblast development. Major pathways involved in osteogenesis include TGF- $\beta$ , BMPs, Hedgehog, Wnt and Notch are reviewed below (**Figure 1.2**).

### 1.4.1 TGF- $\beta$ signaling pathway

TGF- $\beta$  promotes proliferation and osteoblast commitment in mammalian development (G. Chen, Deng, & Li, 2012). TGF- $\beta$  consists of canonical (using TGF- $\beta$  ligand via SMAD2/3) and non canonical (via p38; mitogen-activated protein kinase; MAPK pathways (M. Wu, Chen, & Li, 2016)). TGF- $\beta$  (e.g. TGF- $\beta$ 1) coordinates between bone formation and bone remodeling by recruiting MSCs to the resorption area showed in *in vitro* and *in vivo* studies (Y. Tang et al., 2009). TGF- $\beta$  also itself induces progenitor cell proliferation and differentiation *in vitro* and *in vivo studies* (Matsunobu et al., 2009; Salkın, Gönen, Ergen, Bahar, & Çetin, 2019). In *in vitro* studies, canonical TGF- $\beta$  (via SMADs) promotes early phase osteogenic differentiation but inhibits mineralization and maturation of osteoblasts (S. Maeda, Hayashi, Komiya, Imamura, & Miyazono, 2004; M. Wu et al., 2016). In *in vitro* studies, optimal levels of TGF- $\beta$  promote osteoclast migration and differentiation. However, high levels of TGF- $\beta$  inhibit osteoclast differentiation (Itonaga et al., 2004; Pilkington, Sims, & Dixon, 2001; M. Wu et al., 2016; Yasui et al., 2011).

### 1.4.2 BMPs signaling pathway

BMPs are members of the TGF- $\beta$  superfamily. BMPs relay signals through SMAD-dependent and SMAD-independent (MAPK) pathways to enhance osteogenesis (M. Wu et al., 2016). BMP2 and BMP7 have been commonly used in orthopaedics (Conway, Shabtai, Bauernschub, & Specht, 2014; Cook, Salkeld, Patron, & Rueger, 2000; S.D., T.A., H.S., S.E., & Sofamor, 2002; Suk, 2008) and dentistry (Taşlı, Aydın, Yalvaç, & Şahin, 2014). In *in vitro and in vivo* studies, BMP2 enhances RUNX2 through SMADs 1/5/8 for osteogenesis (Kopf, Petersen, Duda, & Knaus, 2012; Phimphilai, Zhao, Boules, Roca, & Franceschi, 2006; Retting, Song, Yoon, & Lyons, 2009). BMP2 also enhances osteocalcin (OCN) (Jang et al., 2012), osteopontin (OPN) *in vitro* (X. Yang et al., 2009), as well as promoting alkaline phosphatase (ALP) through the MAPK pathway (W. Huang, Yang, Shao, & Li, 2007). In *in vivo* study, BMP7 also enhances osteogenesis (Cook et al., 2000). In *in vitro* studies, BMP 7 promotes ALP and mineralization (Xue et al., 2015; Yeh, Tsai, & Lee, 2002). BMP/SMAD signalling induces early phase osteoblast differentiation while SMAD-independent (MAPK) promotes osteogenic differentiation and bone development by phosphorylating

RUNX2 and thus stimulating osterix (OSX) (Rahman, Akhtar, Jamil, Banik, & Asaduzzaman, 2015; M. Wu et al., 2016).

### 1.4.3 Hedgehog signaling pathway

Hedgehog (Hh) signaling plays important roles in bone development and osteoblast differentiation in mammals (Jing Yang, Andre, Ye, & Yang, 2015). Hh signaling consists of Sonic hedgehog (Shh), Indian hedgehog (Ihh) and Desert Hedgehog (Dhh). Shh and Ihh play pivotal roles in skeletal development. Shh modulates osteogenic differentiation, bone homeostasis and angiogenesis as well as anti-adipogenesis (James et al., 2010; Lamplot et al., 2013). Ihh is important for enchondral ossification. Ihh triggers both chondrogenesis and osteogenesis during enchondral ossification (Ohba, 2016; Razzaque, Soegiarto, Chang, Long, & Lanske, 2005). Hh and Wnt are reciprocally antagonists (M. Ding & Wang, 2017; Song, Li, Liu, & Zhao, 2015).

### 1.4.4 Wnt signaling pathway

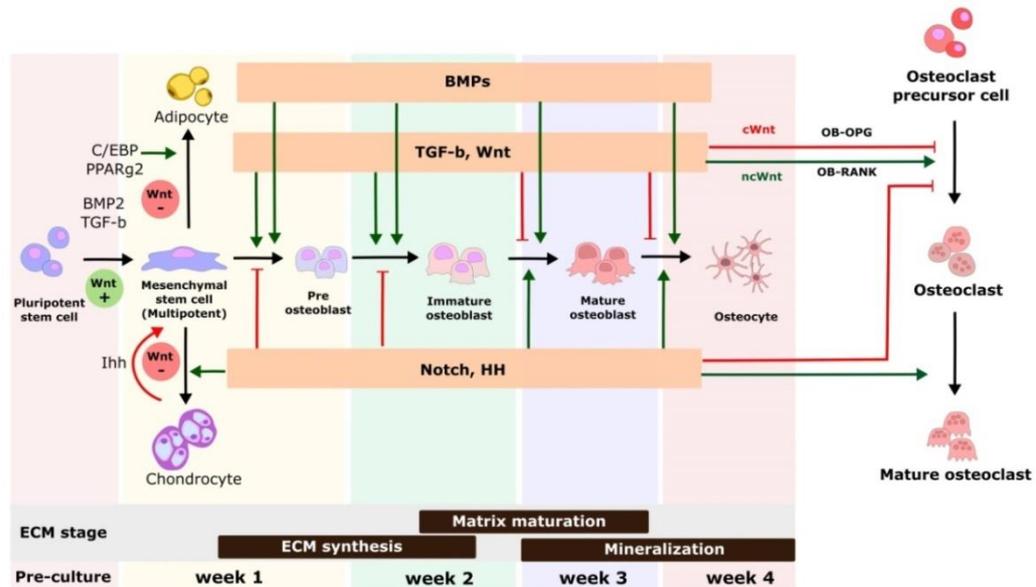
Wnt signaling is involved in cell proliferation, differentiation and migration (Barbáchano, Larriba, Ferrer-Mayorga, Muñoz, & González-Sancho, 2014). Canonical Wnt signals via  $\beta$ -catenin while non-canonical Wnt activates JNK or Rho pathways linked to the cytoskeleton (in Wnt/planar cell polarity signaling) as well as protein kinase C (in Wnt/Calcium signaling) (Niehrs, 2012). In canonical Wnt signaling, frizzled protein receptors and low-density lipoprotein receptor-related protein 5 (LRP5) senses mechanical stimulation regulating osteoblast differentiation showed in *in vivo* studies (H. Q. Gao et al., 2017; K. S. Kang & Robling, 2015; Y. Wang et al., 2014). Canonical Wnt with LRP5 promotes increase in bone density (Johnson, 2004; Krishnan, Bryant, & Macdougald, 2006; Norwitz, Mota, Misra, & Ackerman, 2019). As showed in *in vitro* and *in vivo* studies, the Wnt pathway promotes osteoblastic differentiation of MSCs in the early phase of osteogenesis but inhibits differentiation into mature osteoblasts (Eijken et al., 2008; Rodda & McMahon, 2006).

Wnt canonical and noncanonical signals also play roles in osteoclast differentiation (Yasuhiro Kobayashi, Shunsuke Uehara, Masanori Koide, & Naoyuki Takahashi, 2015). In *in vivo* and *in vitro* studies, osteoblasts secrete Wnt16 activating Wnt/ $\beta$ -catenin which, in turn, suppresses osteoclast differentiation through the receptor activator of nuclear factor kappa B/osteoprotegerin (RANKL/OPG) axis (Y. Kobayashi, G. J. Thirukonda, et al., 2015; Moverare-Skrtic et al.,

2014). However, non-canonical Wnt promotes osteoclast differentiation. Osteoblasts secrete Wnt5a binding to receptor tyrosine kinase Ror2 (Ror2) in osteoclast precursors promoting RANK in *in vivo* studies (Y. Kobayashi, S. Uehara, M. Koide, & N. Takahashi, 2015; Kobayashi, Uehara, & Udagawa, 2018; K. Maeda et al., 2012). It is noteworthy, however, that Wnt5a can also enhance osteoblast differentiation (via LRP5-6/Wnt/  $\beta$ -catenin) in *in vitro* study (Okamoto et al., 2014). Noncanonical Wnt links to JNK. In *in vitro* study, Wnt5a/Ror2/JNK signaling suppresses osteoblasts which may prevent over-mineralization (Hasegawa et al., 2018). Wnt can crosstalk to many pathways (Y. Wang et al., 2014) such as BMPs (Y. Chen et al., 2007), Hedgehog (M. Ding & Wang, 2017), and Notch (Collu, Hidalgo-Sastre, & Brennan, 2014).

### 1.4.5 Notch signaling pathway

Notch signaling modulates osteogenesis, osteoclastogenesis and angiogenesis in mammals (Z. Luo et al., 2019). Notch inhibits differentiation in the early phase of osteogenesis by interacting with  $\beta$ -catenin, RUNX2 and OSX. Notch and RUNX2 are reciprocal antagonists as RUNX2 can inhibit Notch showing in *in vitro* study (Ann et al., 2011). By *in vitro* and *in vivo* study, Notch can also inhibit RUNX2 (through Hes, Hey proteins) maintaining progenitor cells (Hilton et al., 2008) as well as inhibiting Wnt/  $\beta$ -catenin (Hayward, Kalmar, & Martinez Arias, 2008). However, in some *in vitro* literature studying in MG63, Notch has also been seen to upregulate RUNX2 and OSX (Ongaro et al., 2016). In *in vitro* study, Notch can suppress glycolysis in turn reducing oxidative phosphorylation and inhibiting osteogenic differentiation through lack of metabolic energy (S.-Y. Lee & Long, 2018). In late osteogenesis, activation of Notch in mature osteocytes promotes bone formation and mineralization showed in *in vitro* and *in vivo* studies (P. Liu et al., 2016). Notch promotes osteoclast maturation and bone remodelling in *in vitro* study (Ashley, Ahn, & Hankenson, 2015).



**Figure 1.2 Interaction of BMPs, TGF- $\beta$ , Wnt, Notch and Hedgehog pathways in osteogenesis and osteoclastogenesis**

BMPs promote the process of osteogenic differentiation. In the early phase of osteogenesis, Wnt enhances the commitment of MSCs to preosteoblast thus promotes osteogenesis. In the late stage (mineralization), Wnt inhibits the maturation of osteoblasts. Wnt is involved in osteoclast differentiation via the RANK/OPG axis. Notch inhibits differentiation in early the phase of osteogenesis resulting in pooling of osteoblast progenitors. Notch also promotes maturation of osteoclasts. Hh is an antagonist to Wnt (green arrow; activation, red arrow; inhibition) (Eijken et al., 2008; Rahman et al., 2015; Regard, Zhong, Williams, & Yang, 2012; Rodda & McMahon, 2006; M. Wu et al., 2016).

## 1.5 Stem cell source for bone tissue engineering

Various stem cell types are extensively studied for their potential use in bone tissue engineering. However, driving stem cell based therapy into clinics is challenging. Many obstacles, including immunological responses, ethical issues, patient safety, tumorigenic potency, etc require intensive research before approval. The summary of advantages and disadvantages of available stem cell types is shown in **table 1.1**.

**Table 1.1 Comparison the advantages and disadvantages of stem cell type.**

	ESCs	IPSCs	BM-MSCs	CB-MSCs	ASCs	Osteoblast
Sources	embryos	Somatic cells	Bone marrow	Cord blood	Fat tissue	Bone graft
Proliferation capacity	Unlimited	Unlimited	Limited	Limited	Limited	Limited
Differentiation potency	Pluripotency	Pluripotency	Multipotent	Multipotent	Multipotent	Osteoblast
Osteogenic differentiation capacity	Fair-Good	Fair-Good	Good	Good	Good	Very good
Preparation technique, isolation and expansion problems	Donor safety concern, Difficult isolation	Retroviral problem, Require large expansion	Senescence	Difficult isolation	Senescence, Multiple step of isolation	Senescence
Ethical issue	Yes (Embryo termination)	No	No	No	No	No
Tumorigenicity	Yes	Yes	No	No	No	No
Immunogenic	Possibly	No (Autologous)	No (Autologous)	No (Autologous)	No (Autologous)	No

### **1.5.1 Embryonic stem cells**

Embryonic stem cells (ESCs) are derived from the blastocytes of embryos. ESCs are pluripotent thus providing benefits of high proliferation (Kargozar et al., 2019). Human embryonic stem cell (hESC) research is growing (W. C. Chen et al., 2013; Kuhn et al., 2014), however, using hESCs in tissue engineering has ethical issues arising from termination of embryos issue and safety of donor oocytes (Lo & Parham, 2009). Moreover, the tumorigenic potency of ESCs is controversial (X. Wang et al., 2012).

ESCs can be osteogenically induced using standard osteogenic media (dexamethasone, ascorbic acid, and  $\beta$ -glycerolphosphate) (Boast & Stern, 2013). However, the osteogenic differentiation potency of ESC derived MSCs is controversial. Some studies showed that osteogenically induced ESCs provided comparable results for osteogenesis with bone marrow derived mesenchymal stem cells (BM-MSCs) (Arpornmaeklong, Brown, Wang, & Krebsbach, 2009). However, some literature reported less effective outcomes of osteogenic induction of ESCs compared to those of BM-MSCs (Brown, Squire, & Li, 2014). At present, hESCs are widely studied in bone tissue engineering (W. C. Chen et al., 2013; Marolt et al., 2012) and fracture healing induction (Undale et al., 2011).

### **1.5.2 Induced pluripotent stem cells (iPSCs)**

Induced pluripotent cells (iPSCs) are derived from genetic reprogramming of somatic cells (such as fibroblasts) by transduction of Yamanaka's factors (Oct, Sox2, Klf4 and Myc) studied in mouse fibroblasts (K. Takahashi & Yamanaka, 2006) and human fibroblasts (K. Takahashi et al., 2007). iPSCs are pluripotent and possess unlimited self-renewal. As somatic cells are derived from an autologous donor, there is no genetic matching problem nor ethical issues (Kargozar et al., 2019; King & Perrin, 2014; Lo & Parham, 2009; Sugarman, 2008; Yousefi et al., 2016). However, there are critical hurdles towards clinical application such as teratogenicity (Gutierrez-Aranda et al., 2010; Mitchell, Wanczyk, Jensen, & Finck, 2019), drawbacks of using retrovirus transfection as well as reproducibility of transfection (Medvedev, Shevchenko, & Zakian, 2010).

There are many techniques for inducing iPSCs towards MSC and osteoprogenitor cells, such as through embryoid body formation or direct differentiation using osteogenic media (dexamethasone,

ascorbic acid, and  $\beta$ -glycerolphosphate) (Bastami et al., 2017; Ilich et al., 2011). Osteogenic differentiation potency of iPSCs is comparable to MSCs (Bastami et al., 2017; Fliefel, Ehrenfeld, & Otto, 2018). iPSCs are also studied in many fields of tissue engineering such as cardiac disease treatment (Miyagawa & Sawa, 2018; Musunuru et al., 2018), and organoids (Ogura, Sakaguchi, Miyamoto, & Takahashi, 2018), etc. To introduce iPSCs into clinic in the future, pretreatment such as irradiation to reduce tumorigenesis may be required (Inui et al., 2017).

### 1.5.3 Mesenchymal stem cells (MSCs)

MSCs are the most popular stem cell source for bone tissue engineering. MSCs are multipotent, differentiating into osteogenic, chondrogenic, reticular and adipogenic lineages. The International Society for Cellular Therapy (Dominici et al., 2006) defined the characteristics of MSCs. MSCs must adhere on to tissue culture plates and be multipotent. Moreover, MSCs should express surface markers - they are positive for CD73, CD90, CD105 and negative for CD14, CD34, CD45 or CD11b, CD79 $\alpha$  or CD19 and HLA-DR (Dominici et al., 2006). Stro1, another surface marker, is commonly used for enriching MSCs from the bone marrow (G. Lin et al., 2011; F. J. Lv, Tuan, Cheung, & Leung, 2014). Stro1 selected MSCs can differentiate into osteoblasts, chondrocytes, adipocytes fibroblasts and hematopoietic supporting cells such as vascular smooth muscle cells, thus they are suitable for the studies of osteogenesis together with angiogenesis (Dennis, Carbillet, Caplan, & Charbord, 2002; Melchiorri, Nguyen, & Fisher, 2014). MSCs can be harvested from many tissue sources such as bone marrow (BM-MSCs), adipose tissue (AMSCs) and cord blood (CB-MSCs). Among the three sources, osteogenic differentiation potency is comparable (Heo, Choi, Kim, & Kim, 2016; Rebelatto et al., 2008; Wagner et al., 2005).

## 1.6 MSC *in vitro* Microenvironments

Microenvironments play important roles in stem cell self-renewal or differentiation (Donnelly, Salmeron-Sanchez, & Dalby, 2018). Stem cell fate is influenced by various factors such as extracellular matrix, secreted factors, cell-to-cell interaction, inflammation, physical

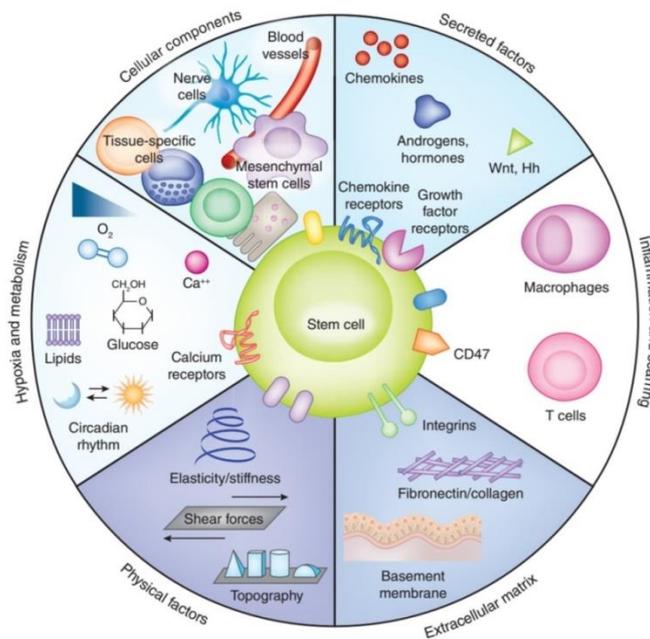
factors (such as shearing and material stiffness) as well as hypoxia and metabolism (Lane, Williams, & Watt, 2014) (**Figure 1.3**).

In material sciences, extracellular matrix is the keystone of microenvironment fabrication integrating all factors of MSCs niche for bone regeneration. Multiple modalities had been proposed to create MSC niches. For example, ECM physical modifications (such as tuning stiffness and topography) affect cell adhesion, cell cytoskeleton and, in turn, regulating cell growth (Dalby et al., 2007). Furthermore, integrating surface chemistry and growth factors on matrices can also promote cell adhesion and differentiation in *in vitro and in vivo studies* (Llopis-Hernández et al., 2016)(X. Zhao et al., 2017).

Cell-to-cell interaction is a part of the cellular niche. MSCs communicate to neighboring cells through cell adhesion molecules (such as tight junctions, gap junctions, adherens junctions (Hartsock & Nelson, 2008) or cytokines (J.-M. Zhang & An, 2007). Cell-to-cell interaction can occur between cells of the same phenotype or different cell types, for example, osteoblasts require connexin 43 for bone development (Moorer & Stains, 2017). Adhesions amongst different cells are also important in the bone marrow compartment, e.g. osteoblasts promote HSC functions (X. Gao, Xu, Asada, & Frenette, 2018) and osteoclast development (X. Chen et al., 2018; Sharaf-Eldin, Abu-Shahba, Mahmoud, & El-Badri, 2016).

The metabolic and oxygen niche also affect cell lineage. Oxygen links to hypoxic inducible factor 1-alpha (HIF-1 $\alpha$ ) controlling energy synthesis via balance of glycolysis and oxidative phosphorylation (Drager et al., 2015; Mohyeldin, Garzón-Muvdi, & Quiñones-Hinojosa, 2010). Moreover, inflammation and oxidative stress are also involved in cell differentiation (Bernardo & Fibbe, 2013; Kyurkchiev et al.,

2014). The role of oxygen, metabolism and oxidative stress are discussed in chapter 5.



**Figure 1.3 The stem cell niche**

Stem cell niche consists of complex factors influencing on stem cell function and growth. For example, ECM and physical cues (e.g. topography and external force) involve stem cells through adhesion-cytoskeletal complex. Further, stem cells also interact and communicate to other cell types (via cytokines, etc) maintaining cellular function, and quiescence. Hypoxic condition also affects cellular metabolism and differentiation (With permission of Lane et al., 2014 (Lane et al., 2014)).

### 1.6.1 Extracellular matrix

Understanding the structure and components of ECM is essential for scaffold design and material selection. The ECM, where cells reside, plays important roles in cellular functions (Lozito, Kolf, & Tuan, 2009). In nature, ECM is composed of soluble factors (such as cytokines, growth factors) and insoluble components (e.g. glycoproteins, proteoglycans and proteins) (Kular, Basu, & Sharma, 2014). The insoluble components play roles in cell-ECM interaction, for example, collagens provide structural support relating to composite stiffness (Kular et al., 2014). Fibronectin, containing the cell binding domain Arg-Gly-Asp (RGD), is important for cell adhesion (J. Xu & Mosher, 2011). Currently, ECM modification for tissue

regeneration is extensively studied. Designed ECM for bone tissue engineering must allow cell adhesion and should allow transmission of external mechanical signals.

### 1.6.1.1 Cell adhesion

Adhesion proteins, such as fibronectin and laminin, play pivotal roles in cell adhesion (J. Xu & Mosher, 2011). Cells use integrin to bind peptide motifs of adhesion proteins such as RGD to attach to the ECM. In *in vitro* study, controlling the density and patterning of RGD ligands can regulate the cell signaling pathways of MSC differentiation (Dalby, Gadegaard, & Oreffo, 2014). Another experimental study reported that patterned RGD ligands (distance <70 nm) can cluster integrins and promote focal adhesion formation (J. Huang et al., 2009). At the focal adhesion, integrins connect with actin binding proteins such as talin, vinculin, filamin and focal adhesion kinase (FAK) (Brakebusch & Fassler, 2003). Talin, connected to vinculin, controls the optimal force for maintaining the stability of cell-matrix adhesion (Neumann & Gottschalk, 2016; Yao et al., 2016). Vinculin, linking to actin, induces actin polymerization (Atherton, Stutchbury, Jethwa, & Ballestrem, 2016; Golji & Mofrad, 2013). Activation of FAK controls intracellular mechanotransduction (Lachowski et al., 2018). FAK regulates actin polymerization and organization (Schaller, 2010). The activation of FAK also promotes RhoA and Rho-associated protein kinase (ROCK) which then crosstalks to ERK1/2 (Khatiwala, Kim, Peyton, & Putnam, 2009; Shih, Tseng, Lai, Lin, & Lee, 2011). ERK1/2, in turn, phosphorylates RUNX2 driving osteogenesis (Khatiwala et al., 2009). The focal adhesion formation activates G proteins (e.g. Rac, Cdc42 and Rho) and, in turn, triggers actin-myosin contraction (Lawson & Burridge, 2014; Price, Leng, Schwartz, & Bokoch, 1998). Cell adhesion and contraction link to intracellular tension. High intracellular tension promotes osteogenesis while low tension enhances adipogenesis (Kilian, Bugarija, Lahn, & Mrksich, 2010; McBeath, Pirone, Nelson, Bhadriraju, & Chen, 2004).

### 1.6.1.2 ECM Stiffness

It is known that two dimensional (2D) ECM stiffness affects MSCs commitment through complex crosstalk networks (**Figure 1.4A**). A seminal *in vitro* study by Engler et al elucidated how MSCs respond to ECM stiffness (Engler, Sen, Sweeney, & Discher, 2006). Soft stiffness (E~0.1-1 kPa) were considered to drive neurogenic fate of MSCs. Stiffer matrices (E~8-17 kPa) promoted myogenic fate. High stiffness (E~25-40 kPa) promotes osteogenesis, with MSCs spread in polygonal morphologies (Engler et al., 2006). However, the cause of cell fate regulation is still debated whether from substrate stiffness or tethering effects of proteins on the substrate surfaces. Some *in vitro* studies explained that fiber tethering of protein ECM and density of crosslinkers affected cell differentiation (Trappmann et al., 2012). Low collagen fiber density allows ECM fiber deformation resulting in soft feedback while higher fiber density, or high levels of crosslinking, allow cells to generate rigid feedback. Rigid feedback enhances actin polymerization (F. M. Watt & Huck, 2013). After that, Wen et al. argued that protein tethering and substrate porosity did not affect cell differentiation but substrate stiffness was the determining factor in MSC commitment (Wen et al., 2014).

By transferring signals from the ECM to the nucleus, MSCs sense ECM stiffness using integrins as a stiffness sensor. Integrins (such as integrins  $\beta 3$ ,  $\alpha 2$ ) bind to the extracellular proteins in ECM which in turn form the focal adhesion. Integrins link to actin-myosin complexes. Perinuclear actin is an important key factor affecting nuclear shape (Khatau et al., 2009). LINC complex (linker of nucleus and cytoskeleton) is a protein complex joining the cytoskeleton and nucleus (nucleoskeleton). LINC complexes consist of SUN and nesprin proteins. Nesprins connect to actin while SUN interacts with lamins and nuclear pore complexes (Dahl, Ribeiro, & Lammerding, 2008). Lamins are intermediate filament proteins consisting of Lamins A-C, located at the inner nuclear membrane. In *in vitro* studies, Lamins interact with chromatin and play a role in conveyance of cytoskeletal forces into the nucleus (S. Cho, Irianto, & Discher, 2017; Dalby et al., 2014). Lamins play roles in control of viscoelastic nuclear properties. In *in vitro* study, Lamin A functions in a viscous manner while lamin B is elastic (Swift et al., 2013). In stiff ECM, lamins are not



## Figure 1.4 Crosstalk network responding to matrix stiffness

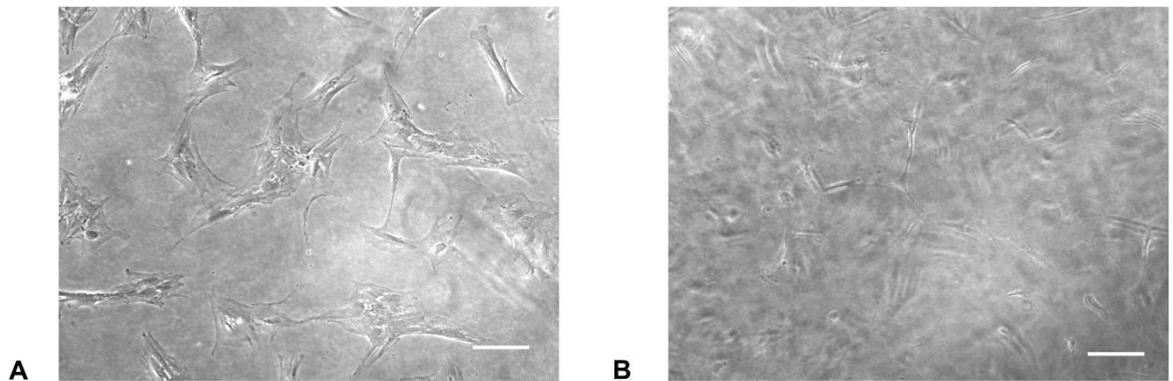
- A) Crosstalk network responding to matrix stiffness (from soft to stiff matrices; left to right). In soft matrices, BMP/Smad pathway was inhibited promoting neurogenic differentiation. In medium stiffness, myogenic differentiation was enhanced through ROCK-MLCK pathways. In stiff matrices, osteogenic differentiation is enhanced via ROCK-FAK-ERK1/2 and smad 1/5/8 pathways (With permission of Lv et al., 2015 (H. Lv et al., 2015), licensed under Creative Commons Attribution License; CC; <https://creativecommons.org/licenses/by/4.0/>)).
- B) Signal transduction from ECM to nucleus. Integrins attach on ECM transferring force through actin. Nesprin is connected actin and SUN. SUN is linked to lamin and chromatin regulating gene positioning (With permission of Wang et al., 2009 (Ning Wang, Tytell, & Ingber, 2009)).

## 1.7 Difference between 2D and 3D cultures: cell physiology and cytoskeleton

In two dimensions (2D), monolayer cells adhere and migrate on planar surfaces (**Figure 1.5A**). Spread cells in 2D culture have high surface-to-volume ratio, thus, soluble nutrients and growth factors in culture media can interact with receptors on the dorsal cell surface (Meyers, Craig, & Odde, 2006). In three dimensional models (3D), cells are entrapped in 3D-ECM mimicking natural microenvironment of MSCs (Naito et al., 2013) (**Figure 1.5B**). Focal adhesions distribute in all dimensions thus cells interact with ECM around the cells. In 3D-ECMs, nutrients and molecules unequally distribute across the scaffold depending on diffusion rate, porosity of scaffolds, etc (Cheema et al., 2012; Rouwkema, Koopman, van Blitterswijk, Dhert, & Malda, 2010). Gradients of soluble factors may affect cell functions (Baker & Chen, 2012).

Comparing cellular responses between 2D and 3D culture, in 2D culture, cytoskeleton plays a major role responding to stiffness (McBeath et al., 2004; Provenzano & Keely, 2011). However, the effect of myosin-based cytoskeletal tension on differentiation is controversial in 3D culture (H. Lv et al., 2015). For example, Parekh et al., reported a wider range of stiffness (0.2 kPa-59 kPa) which can induce osteogenesis in MSCs in 3D compared to 2D (20-40 kPa) (Parekh et al., 2011). They also found that material driven 3D osteogenesis did not involve cytoskeletal and ROCK activity (Parekh et al., 2011). Huebsche et al., elucidated that MSCs are driven towards osteogenic

fate by 3D-ECM where the stiffness is 11-30 kPa. The authors also reported that the organization of integrin binding in relation to ECM stiffness was important to osteogenic commitment, but cell morphology was not (Huebsch et al., 2010).



**Figure 1.5 Cell characteristics in 2D vs 3D culture**

(A) 2D-MSC culture, cells spread on 2D planar surface (10x magnification, scale bar 100  $\mu\text{m}$ ). (B) 3D-MSC culture, cells have satellite and branched shape (10x magnification, scale bar 100  $\mu\text{m}$ )

## 1.8 Chemically induced osteogenesis

Chemical induction of osteogenesis is a common and widely used approach. Various growth factors (such as BMP2, BMP7) (M. Knippenberg, M. N. Helder, B. Zandieh Doulabi, P. I. J. M. Wuisman, & J. Klein-Nulend, 2006; Marupanthorn, Tantrawatpan, Kheolamai, Tantikanlayaporn, & Manochantr, 2017; Yeh et al., 2002) as well as chemical supplements (such as dexamethasone, ascorbic acid,  $\beta$ -glycerophosphate, statins and calcium phosphates) (Langenbach & Handschel, 2013), are proposed for regulating osteogenic differentiation of MSCs. However, the high cost of growth factors and targeted delivery is challenging. Growth factor coating on material surfaces can reduce the cost of growth factors (Llopis-Hernández et al., 2016). However, drug/growth factor release requires matching to the dynamical changes of the bone healing process and this is hard to achieve (M. Wu et al., 2016).

### 1.8.1 Chemicals

Currently, many chemicals are used for osteogenic induction. Dexamethasone, the most commonly used agent, induces RUNX2 expression which is a major transcription factor for osteoblastogenesis (Langenbach & Handschel, 2013). Dexamethasone induces Four and a half LIM domains protein 2 (FHL2) which then interacts with Wnt/ $\beta$ -catenin and results in RUNX2 expression (Hamidouche et al., 2008). Moreover, dexamethasone also promotes RUNX2 activity through transcriptional coactivator with PDZ-binding motif (TAZ) upregulation which is a RUNX2 transcription coactivator as well as mitogen-activated protein kinase 1 (MKP1) upregulation promoting RUNX2 transactivation (Langenbach & Handschel, 2013). Some literature shows that glucocorticoids (GC) inhibit the ERK signaling pathway (Bladh, Johansson-Haque, Rafter, Nilsson, & Okret, 2009; Y. Lu, Fukuda, Liu, Kumagai, & Nishida, 2004). However, ERK is required for RUNX2 phosphorylation which, in turn, drives osteogenesis (Arumugam, Vairamani, Partridge, & Selvamurugan, 2017; Ge et al., 2009). Sustained exposure of dexamethasone has been shown to down-regulate collagen type I synthesis and induce maturation of an adipocyte subpopulation within bone marrow stem cell cultures (Porter, Huckle, & Goldstein, 2003). High doses of GC inhibit osteoblast differentiation (Shalhoub et al., 1992; Smith et al., 2000). GC inhibit cytokines such as IL-11 thus reducing osteoblast differentiation (Rauch et al., 2010). In tissue engineering, dexamethasone can be used in many forms, such as direct loading in scaffolds (S. Ding et al., 2013; Tsiapla et al., 2018), loading in calcium phosphate nanoparticles (Ying Chen, Chen, Kawazoe, & Chen, 2018; Y. Chen, Kawazoe, & Chen, 2018) or direct mixing with 3D printed materials (X. Li et al., 2018).

Ascorbic acid (vitamin C) and  $\beta$ -glycerophosphate are commonly used in osteogenic induction cocktails. Ascorbic acid promotes collagen type I and fibronectin secretion which are ECM proteins, as well as integrin  $\beta$ 1 expression (F. Wei et al., 2012). The transportation of ascorbic acid into MSCs (via sodium dependent vitamin C transporter 2; SVCT2) also reduces oxidative stress (Sangani et al., 2015). However, high doses of ascorbic acid (5-250  $\mu$ M) provide toxicity, reducing cell density and changing cell morphology (K. M. Choi et al., 2008).  $\beta$ -glycerophosphate provides an inorganic phosphate source for mineralization (Chung, Golub, Forbes, Tokuoka, & Shapiro, 1992), promotes ERK1/2 phosphorylation and regulates osteopontin (Beck & Knecht, 2003). However, high level of phosphate ions induces

osteoblast apoptosis (Meleti, Shapiro, & Adams, 2000). Ascorbic acid and  $\beta$ -glycerophosphate can be supplemented in composites for bone tissue engineering (Faikrua, Jeenapongsa, Sila-asna, & Viyoch, 2009; T. Liu et al., 2018; C. Wang, Cao, & Zhang, 2017).

Statins or  $\beta$ -Hydroxy  $\beta$ -methylglutaryl-CoA (HMG-CoA) reductase inhibitors are commonly used in hyperlipidemia treatment (H. D. Choi & Chae, 2018). In bone, statins upregulate BMP2 and RUNX2 enhancing osteoblastic differentiation and reducing osteoclastogenesis (Oryan, Kamali, & Moshiri, 2015). However, some studies have shown that high doses of statins may induce apoptosis (Izadpanah et al., 2015; Kupcsik, Meurya, Flury, Stoddart, & Alini, 2009). Statins can be used in tissue engineering, for example, simvastatin can be supplemented in form of microspheres (Yu et al., 2017).

### 1.8.2 Growth factors

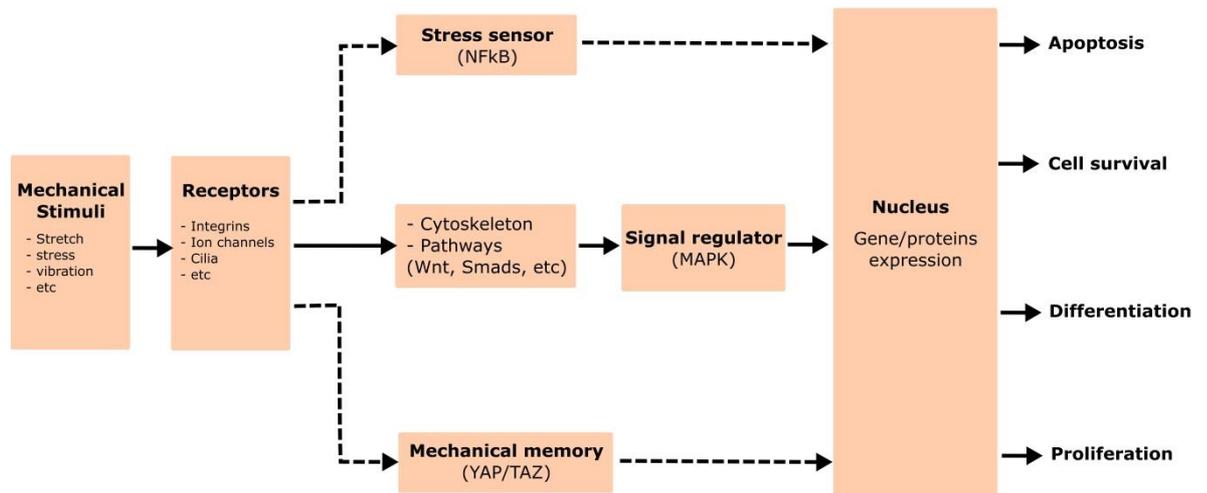
BMPs, growth factors inducing bone induction, are widely studied in bone tissue engineering (Jian Yang et al., 2014). BMP2 (Beazley & Nurminskaya, 2014), BMP6 (Akman, Seda Tigli, Gumusderelioglu, & Nohutcu, 2010), BMP7 (Cook et al., 2000) and BMP9 (Dumanian et al., 2017; T. Fu et al., 2019; Tasli, Aydin, Yalvac, & Sahin, 2014) provide potent osteoinductive activity. BMP7 not only promotes osteogenesis but also enhances chondrogenesis (F. Chen et al., 2019; M. Knippenberg, M. N. Helder, B. Zandieh Doulabi, P. I. Wuisman, & J. Klein-Nulend, 2006; Tasli et al., 2014). However, there is much literature reporting clinical complications of BMPs overdosing such as ectopic bone ossification, vertebral osteolysis, radiculitis, etc (Carragee, Hurwitz, & Weiner, 2011; Shimer, Oner, & Vaccaro, 2009). Moreover, BMP protein degradation is rapid (El Bialy, Jiskoot, & Reza Nejadnik, 2017). It is difficult to design scaffolds which can slowly and continuously release BMPs sustaining the growth factor within the safety range. Further, not only clinical complications, but also the cost effectiveness of using BMP-2 is controversial. The use of BMPs for spinal fusion surgery may increase the cost of the procedure to the UK-NHS by about 1.3 million pounds per year and 3.5 million pounds per year in open tibial fractures treatment (Garrison et al., 2007). To reduce this problem, BMP2 nanocoatings on materials has been proposed (Llopis-Hernández et al., 2016). This technique potentially reduces the cost of growth factor using and also diminishes side

effects of high dose BMPs (Z. A. Cheng et al., 2019; Llopis-Hernández et al., 2016).

## **1.9 Mechanical stimulation, mechanotransduction and osteogenesis**

It is known that mechanical stimulation can promote bone healing and bone homeostasis (Bouletreau, Warren, & Longaker, 2002; X. Huang, Das, Patel, & Duc Nguyen, 2018; Steward & Kelly, 2015). In bone tissue engineering, many studies propose techniques to promote osteogenesis using mechanical stimuli such as cyclic stretch (J. Gao et al., 2016; Y. Yang, Wang, Chang, Wan, & Han, 2018), compression (Burger, Klein-Nulend, & Veldhuijzen, 1992), tensile stretch (Grottkau, Yang, Zhang, Ye, & Lin, 2013) and fluid shear (Stolberg & McCloskey, 2009; Yourek, McCormick, Mao, & Reilly, 2010). Even though mechanical osteogenic induction is widely studied, the challenge remains in precisely controlling the stimulus intensity as well as upscaling to industry.

Mechanotransduction is the process that converts extracellular physical stimuli to biological signals resulting in cellular responses such as cell adhesion, proliferation, differentiation and survival. After cells sense the stimuli, mechanical signals are transferred through specific pathways. The MAPK pathway is activated to regulate cellular response (Plotnikov, Zehorai, Procaccia, & Seger, 2011). Intracellular signals also activate nuclear factor kappa B (NF $\kappa$ B) functioning as stress sensor (Ahn & Aggarwal, 2005). Overdose of stimuli may activate cell survival pathways to maintain proper cellular function (T. Wang, Zhang, & Li, 2002). Yes-associated protein (YAP) functions in stress memory (C. Yang et al., 2014). YAP accumulation from adequate dose/duration of mechanical stimuli and, in turn, switches on genes for differentiation (Elosegui-Artola et al., 2017) (**Figure 1.6**).



**Figure 1.6** Mechanotransduction model; from receptors into nucleus

### 1.9.1 Mechanical stimuli, sensors and related pathways

As aforementioned, various types of physical stimuli induce osteogenesis, such as tension, compression, fluid shear stress and substrate material properties (Kyle H. Vining & David J. Mooney, 2017). Cells sense mechanical stimuli and environment using mechanosensors such as focal adhesion-cytoskeleton, membrane ion channels, and primary cilia (J. C. Chen & Jacobs, 2013). Single stimuli may activate multiple mechanical sensors. For example, fluid shear stress can involve integrin-dependent pathways and also activates cilia (Yavropoulou & Yovos, 2016). Thus, single mechanical stimulus may activate multiple pathways, such as cyclic stretch which can activate BMP2, Wnt, ROCK, etc (J. Gao et al., 2016; Suzuki, Nemoto, & Shimauchi, 2014; C. Zhao et al., 2017). Examples of stimuli and related pathways are summarized in **Table 1.2-1.3**.

### 1.9.1.1 Integrin dependent pathway

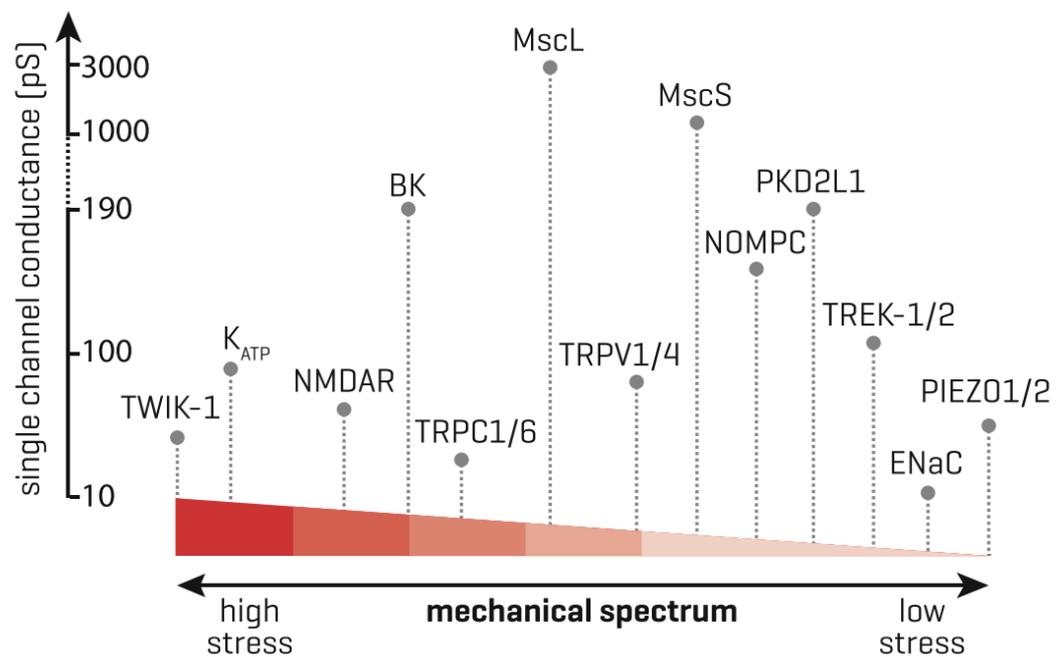
Integrins are major mechanoreceptors sensing ECM stiffness or topography. Integrins on cell membranes form focal adhesion complexes. At the focal adhesion, tyrosine kinases (e.g. FAK and Src) in turn regulate G-proteins (e.g. Rho and Rac) and actin microfilaments generating localized signaling for lamellipodia and filopodia formation and cytoskeletal contraction (Burridge & Wennerberg, 2004; Guilluy, Garcia-Mata, & Burridge, 2011). The ROCK/Rho pathway also activates the MAPK pathway (e.g. ERK1/2, JNK) which takes an important role in the integrin dependent pathway controlling MSC growth and differentiation (McMurray et al., 2011; Tsimbouri et al., 2012).

### 1.9.1.2 Stretch activated ion channels

Mechanical stimuli can also affect mechano-sensitive ion channels on the cell membrane which subsequently allow extracellular calcium influx. Each ion channel senses mechanical stimuli at different intensity of stimuli (**Figure 1.7**) (Bavi et al., 2017). There are two models explaining how mechanosensitive ion channels respond to mechanical stimuli. Tension force may be transferred via the cellular membrane in turn directly opening ion channels thus called “force from membrane”. Another model explains the mode of channel response to stimuli via the tethering effect of intracellular or extracellular structures called “force from filament” (Martinac & Poole, 2018).

It is difficult to prove whether ion channels respond directly or indirectly to mechanical stimuli. Some evidence suggested that piezo1 may directly respond to stimuli via membrane tension (Charles D. Cox et al., 2016; Syeda et al., 2016). However, some literature reports the evidence of the channel response via cytoskeletal activation (Albarran-Juarez et al., 2018). Piezo1 can be found in many cell types (Coste et al., 2010). Piezos can sense shear flow (Albarran-Juarez et al., 2018; Jetta, Gottlieb, Verma, Sachs, & Hua, 2019), stiffness (Pathak et al., 2014), tissue tension (Lewis & Grandl, 2015), and sound waves (Coste et al., 2012). Osteoblasts also use piezo1 for mechanical sensing relating to bone formation (W. Sun et al., 2019). Moreover, MSCs respond to mechanical stimuli such as hydrostatic pressure producing BMP2 through piezo1 activation (Asuna Sugimoto et al., 2017). Transient receptor potential vanilloid 4 (TRPV4) is another ion channel that senses mechanical stimuli such as deflection (Rocio

Servin-Vences, Moroni, Lewin, & Poole, 2017) and cell swelling (Becker, Blase, Bereiter-Hahn, & Jendrach, 2005). TRPV4 allows calcium influx which in turn crosstalks with abundant intracellular pathways (Hasan & Zhang, 2018). Increased intracellular calcium may enhance osteogenic differentiation (Boonrungsiman et al., 2012). TRPV4 also plays a role as thermosensor and nociceptor (Plant & Strotmann, 2007; Shibasaki, 2016) and may modulate inflammation releasing IL-6 through MAPK pathways (Nayak et al., 2015).



**Figure 1.7** The mechanical response spectrum of ion channels stimulated by patch-clamp technique

(With permission of Bavi, et al 2017 (Bavi et al., 2017; C. D. Cox, Bavi, & Martinac, 2017; Morris, 2011; Sachs, 2010)).

### **1.9.1.3 Primary cilia movement**

Osteoblasts use primary cilia to sense fluid flow (Malone et al., 2007) and cyclic tensile strain (J. Bodle et al., 2019). Some literature shows that activation of primary cilia potentially promotes osteogenesis (J. C. Bodle et al., 2013; Hoey, Tormey, Ramcharan, O'Brien, & Jacobs, 2012). Fluid flow induces extracellular calcium influx through cilium-localized  $\text{Ca}^{2+}$ -permeable channels polycystin-2 (PC-2) and TRPV4 (K. L. Lee et al., 2015). However, Malone et al., showed that primary cilia activation can induce osteogenesis through cilia but does not relate to calcium influx and stretch activated ion channels (Malone et al., 2007).

### **1.9.1.4 Other**

Gap junctions may be considered as mechanical sensors. Gap junctions (such as connexins) allow molecule and ion transportation between cells which may be stimulated during mechanotransduction (Saunders et al., 2003). Connexin 43, for example, plays a role in the osteogenic fate through the glycogen synthase kinase 3-beta (GSK-3 $\beta$ )/ $\beta$ -catenin pathway (F. X. Lin et al., 2018).

**Table 1.2 Examples of cyclic stress studies and related pathways**

Types	%strain/ frequency/duration	Cell type	Related pathways	2D/3D cellular response	Outcomes	References
Cyclic compression	10%, 0.5 Hz, 4 hr	Pre-osteoblast	BMP2	2D & 3D	Induce BMP2/SMAD5, RUNX2, ALP OCN, ON, OPN and Col1A	Rath et al 2009 (Rath, Nam, Knobloch, Lannutti, & Agarwal, 2008)
Cyclic stretch	3, 5, 10%, 0.016 Hz, 6 hr	Periodontal ligament cells	BMP2	2D	- Increase BMP2 (via ERK1/2, p38) - Induce COX2	Suzuki et al 2013 (Suzuki et al., 2014)
	2 mm, 0.2 Hz, 1 hr	BMSCs, rats	Wnt/ $\beta$ catenin	2D	- Increase proliferation - Upregulate ALP, Wnt3a, LRP5, $\beta$ catenin and RUNX2	Zhao et al 2017 (C. Zhao et al., 2017)
	0-8%, 0.5 Hz, 4 hrs	Human patellar tendon fibroblasts	TGF- $\beta$ 1	2D	- Increase TGF- $\beta$ and Col-1 gene expression	Yang et al 2004 (G. Yang, Crawford, & Wang, 2004)
	12%, 24 hrs	MG63	Cytoskeleton (Cofilin)	2D	ALP, OCN, RUNX2, Col-1 upregulation	Gao et al 2016 (J. Gao et al., 2016)
	10%, 0.1 Hz, 24 hrs	HDPLCs	ROCK and YAP	2D	- Increase CTGF and CYR61 (YAP target gene) - YAP links to ROCK pathway	Yang et al 2018 (Y. Yang et al., 2018)
	15%, 1/12 Hz	MC3T3-E1	ERK1/2	2D	- Upregulate ALP and RUNX2 through ERK1/2	Kanno et al 2007 (Kanno, Takahashi, Tsujisawa, Ariyoshi, & Nishihara, 2007)
	15%, 0.5 Hz	Dermal fibroblasts	MAPK	3D	ERK1/2 upregulation at 6 hrs or increase stimuli Incremental stretch increase collagen transcription	Schmidt et al 2016 (Schmidt, Chen, & Tranquillo, 2016)
	10%, 1 Hz	Bovine aortic endothelial cells	Cytoskeleton (Rho kinase and mDia)	2D	3% stretch enhance stress fiber orientation	Kaunas et al 2005 (Kaunas, Usami, & Chien, 2006)
	1-5%, 0.01-10 Hz	PMEFs	Cytoskeleton, YAP, MRTF-A	2D	- Cell spreading and stress fiber formation - Increase YAP and MRTF-A nuclear localization	Cui et al 2015 (Cui et al., 2015)
25%, 12 Hz, 1 hr	Satellite cells, rat	Calcium ion channels	2D	- Mechanical sensing and L-VGC channel allow extracellular calcium influx	Hara et al 2012 (Hara et al., 2012)	

CYR61; cysteine-rich angiogenic inducer 61, HPDLCs; Human periodontal ligament cells, PMEFS; Primary mouse embryo fibroblast

**Table 1.3 Examples of fluid flow, vibration, stiffness studies and related pathways**

Types	Intensity/duration	Cell type	Related pathways	2D/3D Cellular response	Outcomes	References
Fluid flow	Primary cilia, 1 Pa, 52.5 ml/min, 1 Hz, 2 hrs	C3H10T1/2 murine MSCs	TRPV4	2D	- TRPV4 localization at primary cilium	Corrigan et al 2018 (Michele A. Corrigan et al., 2018)
	Pulsatile fluid flow, 0.8 Pa, 1-4 hrs	ROS17/2.8 osteoblast	Wnt	2D on 3D scaffold	- Upregulate ALP, LRP5, Wnt3a and $\beta$ -catenin	Jia et al 2014 (Jia et al., 2014)
	12 dynes/cm <sup>2</sup> , 2 hrs	HPDLCs	MAPK	2D	- Upregulate ALP, Col-1, ERK1/2, p38	Tang et al 2014 (M. Tang et al., 2014)
	Shear stress, flow rate 0.274 $\mu$ L/min, 48 hrs	hMSCs	TAZ	2D	- Upregulation of CTGF and Cyr61 (TAZ related) - Upregulate RUNX2 DLX5 and Msx2	Kim et al 2014 (K. M. Kim et al., 2014)
	9 dynes/cm <sup>2</sup> , 24 hrs	hMSCs	BMP2	2D	- Upregulation of BMP2, OPN	Yourek et al 2010 (Yourek et al., 2010)
Vibration	LMHFV, 0.3g, 40 Hz, 50 $\mu$ m, 15 mins/day	MSCs	MAPK	2D	- Promote adipogenesis (PPAR $\gamma$ ) and p38	Zhao et al 2017 (Zhao, Lu, Gan, & Yu, 2017)
	LMHFV, 0.3g, 60 Hz, 1 hr	Rat BMSCs	-	2D	- Decrease osteogenesis and mineralization	Lau et al 2011 (Lau et al., 2011)
	LMHFV, 0.3g, 40 Hz, 30 mins/day	Rat BMSCs	Wnt/ $\beta$ -catenin	2D	- Increase fibronectin, integrin, vinculin expression - Upregulate Wnt10B, $\beta$ -catenin, RUNX2, OSX	Chen et al 2016 (B. Chen et al., 2016)
	LMHFV, 0.3g, 45 Hz, 20 mins/day, 5 day/week	MC3T3-E1	Cytoskeleton	2D	- Cell proliferation and Cox2 expression related to estrogen receptor $\alpha$ - Vibration involved ROCK pathway	Haffner-Luntzer et al 2018 (Haffner-Luntzer, Lackner, Liedert, Fischer, & Ignatius, 2018)
stiffness	134, 16 and 1.2 kPa, PDMS	Rat Osteoblast	ROCK	2D	- Soft stiffness decreases RUNX2, OCN which related to ROCK pathway	Zhang et al 2017 (T. Zhang et al., 2017)
	2-20 kPa Polyacrylamide gels	HCT-116 Colorectal cancer cell line	YAP/TAZ	2D	Stiffness increase Lamin A/C regulated by YAP	Tan et al 2017 (F. Tan et al., 2018)
	0.5-1 kPa and 100 kPa Polyacrylamide gels	BMSCs, primary chondrocytes	Wnt/ $\beta$ -catenin	2D	Stiffness enhance Wnt/ $\beta$ -catenin pathways and also activate FAK pathway	Du et al 2016 (Du et al., 2016)

LMHFV; low-magnitude high frequency vibration, LRP5; lipoprotein receptor-related protein 5, HPDLCs; Human periodontal ligament cell

### **1.9.2 Role of nanoscale mechanical stimulation in osteogenesis**

The concept of nanoscale mechanical stimuli originates from that size of structures on cellular membranes, such as integrins (Campbell & Humphries, 2011) etc. Thus, nanoscale mechanical stimuli possibly affect proteins or receptors on membranes triggering mechanotransductive signals into the nucleus. Currently, the effect of nanotopography is elucidated that it can promote osteogenesis of MSCs (Dalby et al., 2007), regulate cytoskeletal tension and transcriptional co-activator with PDZ-binding motif (TAZ) (Qian et al., 2017). Various types of nanotopography, such as nanopits (Davison, McMurray, Smith, Dalby, & Meek, 2016), nanowires (H. H. Pan et al., 2015), nanopillars (Sjostrom et al., 2009) and nanorods (Ning et al., 2016) show interaction with the cytoskeleton. Patterning of nanotopography, such as disordered patterns, regulates formation of nanopodia and focal adhesion in turn modulates cytoskeletal tension (Dalby et al., 2014; McNamara et al., 2014). Cytoskeleton links to the LINC complexes, potentially triggering chromosome reorganization (Dalby et al., 2014).

### **1.9.3 Role of MAPK-NF $\kappa$ B pathways and mechanosensing in physiological and inflammatory conditions**

During physiological or inflammatory conditions, MAPK (signal regulator) and NF $\kappa$ B (stress sensor) play a critical role in controlling intracellular signaling to produce proper cellular response to external stimuli such as differentiation or apoptosis (Ahn & Aggarwal, 2005; Chang et al., 2013; Cowan & Storey, 2003; Lawrence, 2009; T. Liu, Zhang, Joo, & Sun, 2017; W. Zhang & Liu, 2002).

The MAPK signaling pathway is the central pathway responding to extracellular stimuli such as stress, cytokines, etc. The MAPK pathway mediates the intracellular signaling pathways of proliferation, differentiation, inflammation and apoptosis. The MAPK pathway consists of extracellular signal regulated kinase (ERK), p38 and c-Jun NH<sub>2</sub>-terminal kinase (JNK) (Plotnikov et al., 2011; W. Zhang & Liu, 2002).

ERK1/2 upregulation can be induced by various stimuli such as inflammation and stress (Plotnikov et al., 2011). ERK1/2 links to cytoskeletal tension induced osteogenesis through Integrin-FAK-ROCK-ERK1/2 pathways (McBeath et al., 2004; Shih et al., 2011). ERK1/2 is also activated by ion channel activation (Vyklícká, Boukalová, Maciková, Chvojka, & Vlachová, 2017). Moreover, ERK1/2 is also

involved in cell proliferation and apoptosis (Mebratu & Tesfaigzi, 2009).

P38, another member of the MAPK family, also affects osteogenesis by promoting and suppressing relevant proteins. P38 can be activated by stress (Plotnikov et al., 2011) and promotes bone progenitor proliferation and differentiation (Rodriguez-Carballo, Gamez, & Ventura, 2016). Not only ERK1/2, but also p38 can phosphorylate RUNX2 to active bone formation (Rodriguez-Carballo et al., 2016). P38 is also involved in many osteogenesis pathways such as BMP/TGF $\beta$ -p38- $\beta$ -catenin and WNT-p38- $\beta$ -catenin (Rodriguez-Carballo et al., 2016).

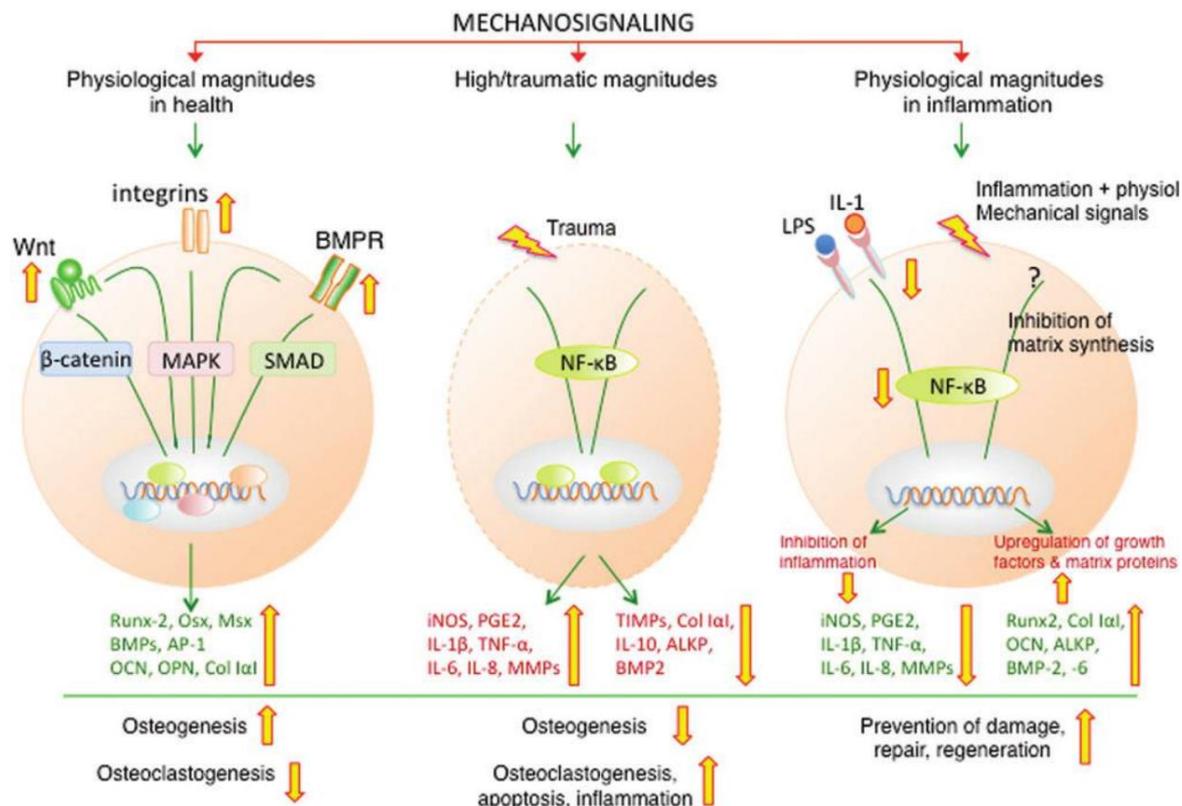
It has been shown that JNK is involved in apoptosis pathways (A. Lin, 2003; Weston & Davis, 2007). Activation of JNK together with AKT and NF $\kappa$ B enhances cell survival (Lamb, Ventura, Hess, Flavell, & Davis, 2003). JNK can be activated by stress and cytokines such as IL-1 $\beta$  and TNF $\alpha$  (Plotnikov et al., 2011; Rodriguez-Carballo et al., 2016). ERK1/2 can directly activate JNK kinase (W. Zhang & Liu, 2002). The role of JNK for osteogenesis is not obviously clear. Some reports have shown that JNK is important for osteoblast function (R. Xu et al., 2017). On the other hand, JNK inhibition may enhance osteogenesis e.g. in stromal cells (Doan et al., 2012).

As aforementioned, optimal mechanical stimulation can enhance osteogenesis (J. C. Chen & Jacobs, 2013; K. H. Vining & D. J. Mooney, 2017). However, high intensity (overdose) mechanical stimulation can induce reactive oxygen species (ROS) or inflammatory response (Biswas, 2016). Theoretically, a low level of inflammation enhances osteogenesis and mineralization as this occurs in the early phase of the normal bone healing process (Knapik et al., 2014). However, high grade inflammation can suppress osteogenesis (H. Huang et al., 2011; Lacey, Simmons, Graves, & Hamilton, 2009). With optimal (low grade) inflammatory response, IL-6 and TNF $\alpha$  (essential inflammatory cytokines) are secreted in the early phase of bone healing. TNF $\alpha$ , a paracrine cytokine, interacts with MAPK and caspases (J. Liu, Minemoto, & Lin, 2004; L. Wang, Du, & Wang, 2008) and activates NF $\kappa$ B (N. Wang et al., 2016). Moreover, TNF $\alpha$  promotes angiogenesis (Kwon et al., 2013) and enhances MSCs to secrete IL-6 (De Cesaris et al., 1998). Sun et al., proposed that IL-6 could then enhance BMP2

production (M. Sun et al., 2017) promoting RUNX2 expression and therefore bone production.

NF $\kappa$ B pathways regulate inflammation and the immune system. NF $\kappa$ B is a stress sensor that is activated for cell survival (Ahn & Aggarwal, 2005). NF $\kappa$ B is involved in proliferation, apoptosis and differentiation (T. Liu et al., 2017). NF $\kappa$ B prevents TNF $\alpha$ -induced apoptosis by suppressing caspases and JNK activation (A. Lin, 2003). NF $\kappa$ B enhances manganese superoxide dismutase (MnSOD) which is a ROS antioxidant enzyme (H. Tanaka et al., 2002). Therefore, an increase of NF $\kappa$ B provides evidence for increased inflammatory response.

Sudha Agarwal's group studied the effect of magnitude of mechanical stimuli on intracellular signaling response and NF $\kappa$ B signaling pathways (Agarwal et al., 2003; Anghelina et al., 2008; Dossumbekova et al., 2007; Knapik et al., 2014; Madhavan et al., 2007; J. Nam, Aguda, Rath, & Agarwal, 2009). At physiological magnitudes, mechanical stimulus activates intracellular signals in which it promotes osteogenesis from pathways such as BMP2/Smad, calcium signaling, ERK1/2, nitric oxide, prostaglandin E2 and Wnt (Knapik et al., 2014). The NF $\kappa$ B pathway is also activated to control oxidative stress (Oeckinghaus & Ghosh, 2009). In oxidative stress conditions induced by mechanical stimuli, NF $\kappa$ B provides anti-oxidative functions such as increasing antioxidants and autophagy, reducing ROS and JNK as well as increasing pro-oxidant genes such as NADPH oxidase (Lingappan, 2018). In conditions where cells are injured by exposure to high magnitude stimulation, NF $\kappa$ B activates high levels of proinflammatory cytokines and signals such as TNF $\alpha$ , IL-1 $\beta$ , NO and ROS resulting in suppressed osteogenesis (Anghelina et al., 2008; Dickson, Bhakar, & Barker, 2004; N. Wang et al., 2016). Interestingly, in inflammatory conditions, the physiological magnitude of mechanical stimulation can inhibit the NF $\kappa$ B signaling pathway (by suppressing TRAF6 in turn IKKs and I $\kappa$ B inactivation), thus promoting anti-inflammatory signals (Knapik et al., 2014) (**Figure 1.8**).



**Figure 1.8 Effect of stimulating magnitude on inflammation**

In normal conditions (left), physiological magnitudes promote osteogenesis through multiple pathways such as SMADs, MAPK and  $\beta$ -catenin. High magnitude stimulation (middle) activates high levels of NF $\kappa$ B functioning as a pro-inflammatory signal. Osteogenesis is thus suppressed. During inflammatory conditions (right), low grade mechanical stimulation inhibits NF $\kappa$ B to promote osteogenesis (With permission of Knapik et al., 2014 under Mary Ann Liebert, Inc, New Rochelle, NY (Knapik et al., 2014)).

## 1.10 Nanovibrational stimulation; concept and related pathways and rationale of 3D study.

The concept of NS was firstly established by Prof Adam Curtis (1934-2017) as nanoscale stimuli, such as nanotopography, can modulate cell adhesion in turn driving osteogenesis (Dalby et al., 2007). Together with, cells can sense the difference of topography at approximately 8 nm (McNamara et al., 2014). Thus, Prof Curtis proposed that application of controllable and precise external force stimulation on the nanoscale may drive changes in cell response. Further, osteogenic differentiation seemed to be a sensible target because of the adhesion-cytoskeleton relationship (Kilian et al., 2010; McBeath et al., 2004; Nikukar et al., 2013).

The NS bioreactor uses piezo actuators to generate stimulating amplitudes in Z axis which is perpendicular to the base of culture surface (Curtis et al., 2013). In MSCs, NS drove osteogenic induction in both 2D and 3D cultures. In 2D culture, Nikukar et al., found that NS drives osteogenesis through a RhoA-ROCK pathway (Nikukar et al., 2013). To explain the mechanism, the hypothesis of 2D-NS mechanism was that nanovibration (in the Z-axis) possibly oscillated the culture media and attached cells in the culture plate (X-Y plane) resulting in repetitive and fast membrane indentation (Curtis et al., 2013). This pico Newton force, which is of similar magnitude to stimulate hair cells during hearing (Curtis & Tsimbouri, 2014), may flutter the cell membrane (Rappaz et al., 2009) and, in turn, initiates intracellular signals (D. Wu, Ganatos, Spray, & Weinbaum, 2011) through cytoskeletal tension regulation (McBeath et al., 2004), switching on gene expression and driving osteogenesis (Childs et al., 2015).

Moving from 2D towards *in vivo* and clinical studies, the effect of NS in 3D culture were in turn conducted. Recently, Tsimbouri et al., showed successful results of 3D NS in collagen hydrogels and proposed that NS promotes 3D osteogenesis in hMSCs via the TRPV1 ion channel, PKC and  $\beta$ -catenin pathways. Cytoskeleton thus appears to be less involved in 3D culture (Tsimbouri P.M., 2017). Further details are discussed in chapter 4.

### 1.10.1 Amplitudes, frequencies and acceleration

To mechanically induce cellular differentiation, an adequate dose of mechanical stimulation vibration, is crucial (Elosegui-Artola et al., 2017; Y. Yang et al., 2018). The dose of mechanical stimuli such as cyclic stretch and vibration affecting cell growth depends on various factors including frequency, intensity, and duration (Cui et al., 2015). Currently, the effect of vibrational stimulation on osteogenic induction is intensively studied (Brooke McClarren & Ronke Olabisi, 2018). However, large variations of stimulating amplitude, frequency and duration have been used for osteogenic induction (**Table 1.4-1.5**). Determining the primary factors of NS, among amplitude (nm), frequency (Hz) or magnitude (g); which one mainly drives osteogenesis, is challenging.

Biologically, the adequate dose of mechanical stimulation allows YAP nuclear translocation, in turn, driving osteogenic differentiation (Elosegui-Artola et al., 2017; Y. Yang et al., 2018). Some *in vitro* 2D studies showed that adequate dose of intensity of cyclic strain can promote cellular reorientation and stress fiber (Cui et al., 2015; Faust et al., 2011). However, the intensity and frequency of stimuli also relate to cellular stress (Chapman et al., 2005; Hong et al., 2015). Optimal strain promotes osteogenesis while over strain decreases osteogenesis (M. Arai, Shibata, Pugdee, Abiko, & Ogata, 2007; Atashi, Modarressi, & Pepper, 2015; Chapman et al., 2005; J. Tan et al., 2015).

Considering the effect of frequency on cell differentiation, some studies showed that increase stimulating frequency affect phenotypic expression. Chen X et al studied the effect of increasing frequency in acoustic-frequency vibratory stimulation (from 0 upto 800 Hz) and reported that higher frequency stimulation (800 Hz) with 0.3 g of magnitude promoted osteogenesis and suppressed adipogenesis (X. Chen, He, Zhong, & Luo, 2015). However, this study did not control the amplitude during stimulation. Interestingly, The stimulating frequency of Chen X et al study was comparable to Nikukar's (Nikukar, 2013) and Tsimbouri's (Tsimbouri P.M., 2017) studies (1000 Hz) for enhancing osteogenesis in MSCs.

Gravity (acceleration) also affects on MSC differentiation. In *in vitro* studies, low gravity condition (e.g. microgravity) induces adipogenesis (Dai, Wang, Ling, Wan, & Li, 2007; M. Zayzafoon, Gathings, & McDonald, 2004) while hypergravity can induce osteogenesis (S. Zhou, Zu, Sun, Zhuang, & Yang, 2015).

Considering the studies using vibrational stimulation to induce osteogenesis in MSCs, low-magnitude high frequency vibration (LMHFV) is commonly investigated. LMHFV is defined by a magnitude less than 1 g with a frequency of 20-90 Hz (Y. Zhou et al., 2011). In our centre, Nikukar et al., (Nikukar, 2013; Nikukar et al., 2013) and Pemberton et al., (G.D., 2015; Pemberton et al., 2015) previously investigated the effect of NS. They found that NS with 20-30 nm amplitude at 1000 Hz frequency enhances osteogenesis. At 20-30 nm, the force is extremely small (0.05-0.12 g). As NS (nanovibrational stimulation or Nanokick) uses ultra low amplitude (in nanoscale) with high frequency (1000 Hz). Thus, term of “ultra low amplitude high frequency vibration (ULAUHFV)” was newly proposed for better classification.

**Table 1.4 Examples of low-magnitude high frequency vibration (LMHFV), stimulating dose and outcomes**

2D/3D	Cell types	Amplitude, frequency, duration	Outcomes	References
2D	MSCs, rats	0.3 g, 60 Hz, 1 hr/day, 6 days/week	Decrease OSX and mineralization	Lau et al., 2011 (Lau et al., 2011)
3D	MSCs, rats	0.3 g, 40 Hz, $\pm 50 \mu\text{m}$ , 30 mins/12 hr	Upregulate RUNX2, ALP, Col1, OCN and ERK1/2	Zhou et al., 2011 (Y. Zhou et al., 2011)
3D porous titanium alloy	Primary osteoblast, rabbits	0.5 g, 30 Hz, 6 and 12 weeks	Increase OCN, RUNX2, Wnt3a, Lrp6 and $\beta$ -catenin	Jing et al., 2015 (Jing et al., 2015)
OP rat, In vivo	HA coated titanium	0.3 g, 40 Hz, $\pm 50 \mu\text{m}$ , 30 mins/12 hr, 5 days	Upregulate osteoblast differentiation via ERK1/2 and suppress osteoclastogenesis	Zhou et al., 2015 (Y. Zhou et al., 2015)
2D HA coated surface	MSCs, rats	0.3 g, 40 Hz, 30 min /day	Increase FN, RUNX2, OSX, ALP, Col1, OCN	Chen et al., 2016 (B. Chen et al., 2016)
2D	hASCs	0.3 g, 25, 35, 45 Hz	35 Hz promote cartilaginous tissue formation	Marycz et al., 2016 (Marycz et al., 2016)
2D	hASCs	0.3 g, 25, 35, 45 Hz, 10 min 0-3 week	25 Hz, increase differentiation and mineralization	Mareziak et al., 2017 (Mareziak, Lewandowski, Tomaszewski, Kubiak, & Marycz, 2017)
2D	MSCs, rats	0.3 g, 50 $\mu\text{m}$ , 40 Hz, 15 mins/day	Promote adipogenesis via p38	Zhao et al., 2017 (Q. Zhao et al., 2017)
2D	MC3T3-E1, mice primary osteoblasts	0.3 g 45 Hz, 20 mins/day, 5days/week	LMHFV depend on estrogen receptor $\alpha$ signaling	Haffner-Luntzer et al., 2018 (Haffner-Luntzer et al., 2018)
3D PEG	hTERT-hMSCs	0.3, 3, 6 g, 0.0149, 0.149, 0.298 mm, 100 Hz, 24 hr	3g promotes but 6 g inhibits osteogenesis	Mehta et al., 2018 (Mehta et al., 2018)

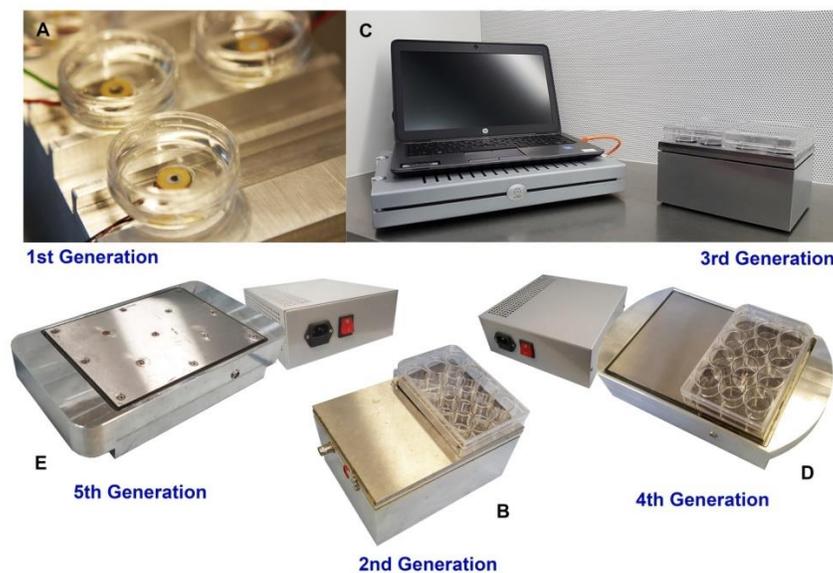
ASCs; adipose derived mesenchymal stem cells, OP; osteoporotic

**Table 1.5 Available publication of ultra low magnitude high frequency vibration (ULMHFV)**

2D/3D	Cell types	Amplitude, frequency, duration	Outcomes	References
2D	L929, MEFs EEFs, Hela, HUVECs	100 nm , 1000 Hz	Increase filopodia formed cells and gene expression	Ito et al., 2011 (Y. Ito et al., 2011)
2D	hMSCs	0.05 g, 12.57 nm, 1000 Hz	Increase BMP2, RUNX2, FAK and ERK1/2	Nikukar et al., 2013 (Nikukar et al., 2013).
2D nanotopography	Le-2 endothelial cells	20 nm peak to peak, 0.8 x10 <sup>-7</sup> g at 1 Hz, 0.2 x 10 <sup>-3</sup> g at 50 Hz	Increase Kruppel-like factor 2 and cell adhesion	Curtis et al., 2013 (Curtis et al., 2013)
2D nanotopography	hMSCs	~ 0.12 g, 16-30 nm, 1000-5000 Hz	1000 Hz enhance RUNX2, BMP2, OCN, ON and mineralization	Pemberton et al., 2015 (Pemberton et al., 2015)
3D collagen	hMSCs	0.10-0.12 g, 25-30 nm, 1000 Hz, 1-3 weeks	Promote 3D osteogenesis via TRPV1-PKC-β-catenin	Tsimbouri et al., 2017 (Tsimbouri P.M., 2017)
3D collagen	hMSCs	0.36 g, 90 nm, 1000 Hz, 1-3 weeks	Increase osteogenic gene/protein expression, ROS	Orapiriyakul et al., 2019 (In this thesis)

## 1.11 Nanovibrational bioreactor development

The development of the NS bioreactor aimed to improve the generation of precise amplitudes (and frequencies) and also consider upscaling for industry and clinical application. The first generation NS bioreactor was assembled using single petri dishes attached onto single piezo actuators (Nikukar et al., 2013) (**Figure 1.9A**). The first version was difficult to assemble and upscale. The second generation (T1000-2000) comprised arrays of piezo actuators assembled on aluminium base block. All piezos stimulated a rigid metallic top plate where tissue culture plates were attached (**Figure 1.9B**). The third generation (T3000-5000) used a laptop signal generator, thus, the user could adjust to the desired stimulating amplitude simply (**Figure 1.9C**). The fourth generation (NTB version) has bespoke signal generating apparatus with set amplitude and frequency (30 nm, 1000 Hz) - i.e. an on/off switch for ease of use. Additionally, handles were designed for convenient transfer in the laboratory (**Figure 1.9D**). In the fifth generation (NTB version), the piezo-top plate-base block assembly was changed from gluing to screwing with C-clamp in order to improve precision of stimulating amplitude across different areas on top plate and because, with time, it was noted that the glue could fail (**Figure 1.9E**).



**Figure 1.9 NS bioreactor development from 1st to 5th generation.**

## 1.12 Bone tissue engineering

Successful bone healing treatments require osteogenic cells, osteoconductive scaffolds and osteoinductive factors (such as growth factors and mechanical environments) (Giannoudis, Einhorn, & Marsh, 2007). To achieve these goals, biomaterials science is a key consideration in creating cellular microenvironments / scaffolds that can promote osteoconductivity and osteoinductivity (Lane et al., 2014). Materials for bone tissue engineering require biocompatibility, osseointegration and also, optimally, possess biodegradability (Bettina M. Willie & Patrick Strube, 2010). Moreover, bone scaffolds require to be rigid for mechanical support but need to allow nutrients, oxygen and growth factors permeation throughout the scaffolds enhancing cell growth and angiogenesis (Rouwkema et al., 2010; Yousefi, Hoque, Prasad, & Uth, 2015). Thus, integrating the knowledge of material property (e.g. stiffness (Olivares-Navarrete et al., 2017)) and structural architecture (e.g. porosity (Karageorgiou & Kaplan, 2005; Loh & Choong, 2013)) is a fundamental concept to synthesise the scaffold mimicking forms and functions of bone.

### 1.12.1 Type of materials

Currently, a diverse range of biomaterials are used for bone scaffolds such as polymers, ceramics, etc (Yousefi et al., 2015). Naturally derived polymers (e.g. collagen, gelatin, silk, alginate, etc) are widely used for tissue engineering due to excellent biocompatibility and bioactivity. However, mechanical property modification and reducing degradation time are challenging (Garcia-Gareta, Coathup, & Blunn, 2015). Collagen is the most popular material used in tissue engineering. In human bone, collagen forms a composite with hydroxyapatite providing ductility and stiffness (Swift & Discher, 2014; Swift et al., 2013). Collagen contains the RGD sequence in its peptide chain allowing cells to adhere via integrin binding (Barczyk, Carracedo, & Gullberg, 2010).

Synthetic polymers (e.g. polylactic acid, and polycaprolactone) provide better mechanical support and possess slower degradation (Alizadeh-Osgouei, Li, & Wen, 2018) but require engineering techniques to improve cell adhesion (Serra, Mateos-Timoneda, Planell, & Navarro, 2013).

Ceramic scaffolds (e.g. calcium phosphates (Tripathi & Basu, 2012), bioglass (Q. Z. Chen, Thompson, & Boccaccini, 2006)) are commonly used due to the rigidity. Moreover, calcium phosphate also promotes osteogenesis (John, Varma, & Kumari, 2003; Jung, Park, & Han, 2010; Samavedi, Whittington, & Goldstein, 2013). However, techniques producing interconnective porosity are complex (H. Yoshikawa, Tamai, Murase, & Myoui, 2009). The advantages and disadvantages of common materials are summarized in **table 1.6**.

**Table 1.6 Advantages and disadvantages of natural and synthetic polymers for tissue engineering**

(Modified from Mottaghitlab et al (Garcia-Gareta et al., 2015; K. Y. Lee & Mooney, 2012; Mottaghitlab et al., 2015; Serra et al., 2013))

Types	Polymers	Advantages	Disadvantages
Natural polymers	Collagen	Excellent biocompatibility, low antigenicity	Poor mechanical properties, Poor cross-linking, high rate of degradation
	Gelatin	Excellent biocompatibility, Biodegradable, cheap, low antigenicity	Poor mechanical properties, high rate of degradation, dissolve at 37° C
	Alginate	Good biocompatibility, low cost, low tissue inflammation response	Non degradable in mammals, limited mechanical stiffness
	Chitosan	Support cell attachment and matrix mineralization, non-toxic	Poor mechanical resistance (hydrogel), toxic if chemical crosslinking
	Silk	Biocompatibility, low infection risk (compared to other protein-based polymer), cost effective	Production time consuming
Synthetic polymers	Polylactic acid (PLA)	FDA approved, excellent biodegradation, biocompatibility	Low mechanical property, low hydrophilicity, tissue inflammation
	Polycaprolactone (PCL)	FDA approved, good mechanical properties	Slow degradation, release of acidic degradation, lack of cell adhesion site
	Polyglycolic acid (PGA)	FDA approved Tunable properties	Lack of cell recognition signals, Inflammatory reactions, high strength and modulus

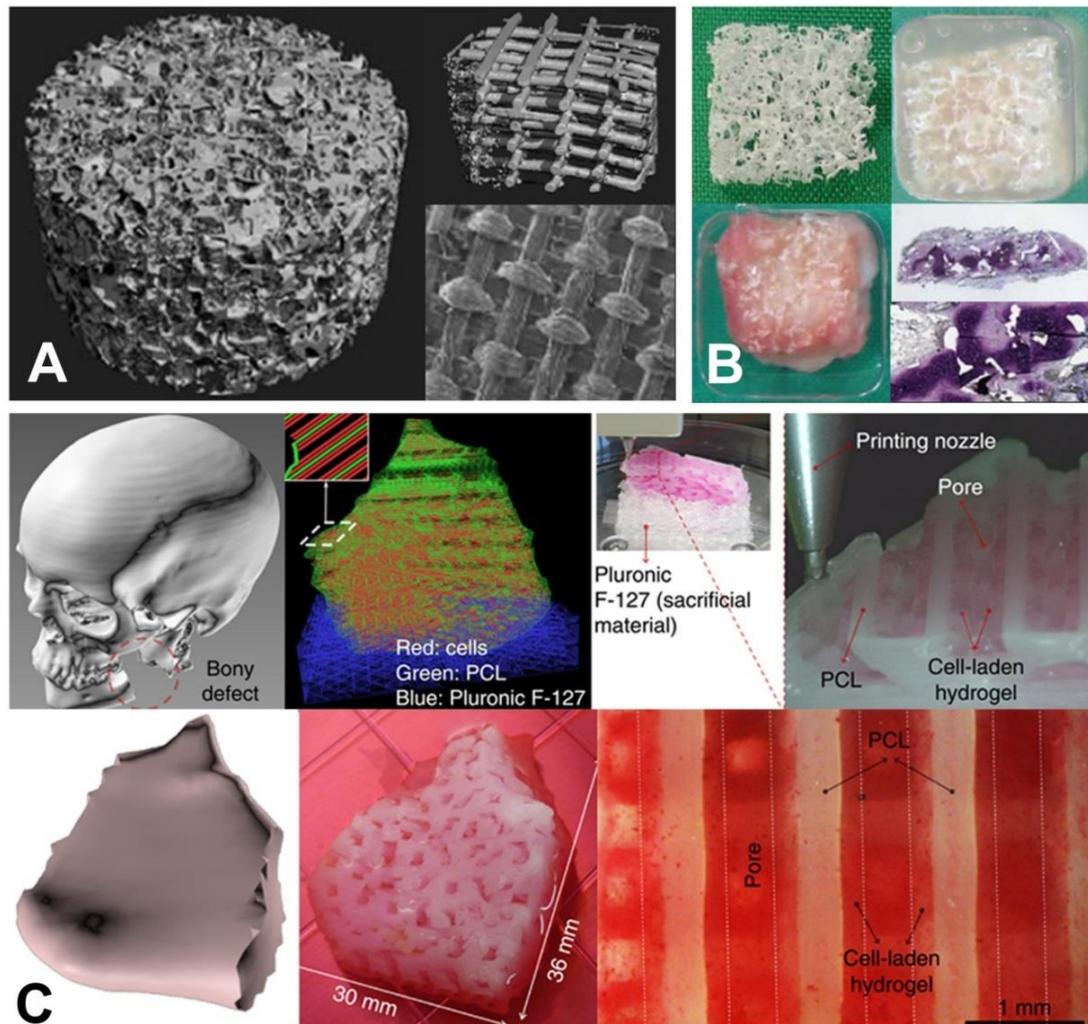
### 1.12.2 Scaffold forms and functions

Two common forms of scaffold, hydrogel and rigid, are widely used for tissue engineering. Hydrogels, both natural (e.g. collagen, gelatin) and synthetic (e.g. PEG (Park et al., 2015; Raic, Rödling, Kalbacher, & Lee-The dieck, 2014)), provide 3D-polymeric networks and hydrophilicity (K. Y. Lee & Mooney, 2001) allowing cell adhesion in 3D niches. Hydrogels provide various advantages such as easy preparation and allowing oxygen and nutrient transportation (Cheema et al., 2012). Hydrogel stiffness is tunable by various techniques (such as crosslinking). However, mechanical properties, syneresis and early degradation remain major hurdles (Scherer, 1989a; Y. K. Zhu et al., 2001).

Rigid scaffolds can be fabricated in various forms such as lattice, fibrous, sponge and woven (Z. Izadifar, X. Chen, & W. Kulyk, 2012). Interporous connection is an important factor. Rigid and dense scaffolds allow slow rates of vascularization, in particular the central area (Rouwkema et al., 2010). Conventional techniques (such as freeze-drying and leaching, etc) are used for fabricating rigid scaffolds together with creating porosity with interporous connections. Nevertheless, these techniques are complex (Loh & Choong, 2013). Solid free-form fabrication (SFF) or rapid prototyping, such as 3D printing, can be used as they can control pore size and porous connectivity by scaffold design (Buj-Corral, Bagheri, & Petit-Rojo, 2018). However, synthetic materials for SFF tend to be hydrophobic resulting in less cell-material affinity and poor cell loading (Shim, Kim, Park, Park, & Cho, 2011).

Biphasic scaffold is an upcoming trend of tissue engineering, combining the advantages of rigid scaffolds and hydrogels together. Hydrogels hold cells within solid scaffold allowing nutrient and growth factor transportation, while porous rigid scaffolds function as structural reinforcement. Currently, there are many techniques for biphasic scaffold production. Rigid scaffolds can be separately prepared and integrated into cell loaded 3D-ECM (Y. Tanaka et al., 2010). Furthermore, the concepts of biphasic scaffolds are also applied in 3D bioprinting. Multiple materials are simultaneously printed for biological and structural support. Synthetic polymer such as PCL is printed as a framework while cells loaded in hydrogel inks function as cellular ECMs

(H. W. Kang et al., 2016; Stanton, Samitier, & Sanchez, 2015) (Figure 1.10).



**Figure 1.10 Scaffold designs, biphasic scaffold and applications**

- A) Examples of rigid scaffolds (sponge, fibrous, woven) (With permission of Izadifar et al., 2012 (Z. Izadifar et al., 2012), licensed under Creative Common Attribution License; CC; <https://creativecommons.org/licenses/by/4.0/>)).
- B) Biphasic scaffold - PLLA with sugar leaching technique (0.3 mm pore size, 95% porosity) with atelocollagen (With permission of Tanaka et al., 2010 (Y. Tanaka et al., 2010))
- C) Concept of biphasic materials in 3D bioprinting. PCL is a rigid construct functioning as the backbone of scaffolds. Hydrogel

loading with cells is printed between PCL fibers allowing nutrient transportation during cell growth (With permission of Kang et al., 2016 (H. W. Kang et al., 2016)).

### 1.12.3 Scaffold degradation and host reaction

The bone regeneration process requires long periods of time. Depending on the bone defect size, the bone healing process may take from 2 months up to a year (Lerner et al., 2005). Corresponding to material degradation by time, implanted bone scaffolds play a role in structural support until mineralization is complete (Amini, Wallace, & Nukavarapu, 2011). Natural polymers possess short term degradation while synthetic polymers provide slower rates of degradation (**Table 1.7**). In *in vivo* studies, macrophages appear to play a role in material degradation (Valentin, Stewart-Akers, Gilbert, & Badylak, 2009). After implantation, the host reacts to scaffolds as foreign body. Inflammation occurs around the scaffold driving fibrosis (Onuki, Bhardwaj, Papadimitrakopoulos, & Burgess, 2008). Thus, synthetic materials such as poly-L-lactic acid (PLLA) and PGA can provide a long-term soft tissue reaction resulting in fluid accumulation, swelling and osteolysis. While natural scaffolds such

as collagen, which possess short term degradation providing less soft tissue reaction (Amini et al., 2011).

**Table 1.7 Degradation time of synthetic materials (Modified from Mottaghitalab et al, 2015 (Mottaghitalab et al., 2015))**

Materials	Degradation time
Polyglycolic acid (PGA)	6-12 weeks
Polylactic acid (PLA)	12-18 weeks
Poly (lactide-co-glycolide) (PLGA)	1-12 months
Polycaprolactone (PCL)	>24 weeks

### **1.13 3D Scaffolds for nanovibrational stimulation**

In previous studies, the effect of NS on 3D osteogenesis was studied in soft collagen hydrogels (G.D., 2015; Tsimbouri P.M., 2017). However, soft hydrogel contraction is a pivotal problem (as will be described). To develop scaffolds for the NS bioreactor, scaffold stiffness improvement was required to resist the cell pulling force on the ECM as well as providing a benefit to the surgeon regarding handleability. Natural polymers are still the first option due to their better biocompatibility with less cellular reaction (Mottaghitlab et al., 2015). Thus, collagen I used in this thesis is considered in hydrogel and biphasic forms.

### **1.14 Thesis objectives**

1. To develop the implantable 3D-bone scaffolds for nanovibrational bioreactor and propose cell-hydrogel-sponge composite
2. To biologically and mechanically optimise the stimulating amplitude for the proposed 3D scaffold and also study the effect of the high amplitude nanovibrational stimulation on 3D osteogenesis, related biological pathways, metabolomics and inflammatory response.

## **Chapter 2 Material and Method**

## Chapter 2 Material and Methods

### 2.1 Cell isolation and culture

Stro-1 selected MSCs from adult human bone marrow (BM) were obtained from Prof R.O.C. Oreffo, Bone and Joint Research Group, University of Southampton, UK. Cells were cultured in Dulbecco's modified essential medium (DMEM) (Sigma) supplemented with 10% Fetal Bovine Serum (FBS; Sigma), 1% (v/v) L-glutamine (200 mM, Gibco), 1% sodium pyruvate (11 mg/ml; Sigma), 1% MEM NEAA - (amino acids, Gibco) and 2% antibiotics (6.74 U/mL penicillin-streptomycin, 0.2 µg/mL fungizone) (Sigma). Cells were cultured in an incubator set at 37°C with 5% CO<sub>2</sub> environment and subcultured to passage 2-3. Culture media was changed every 3 days. A similar cell culture process and media were used for the MG63 cell line.

### 2.2 Gel preparation

Collagen hydrogels were prepared by using rat tail collagen type I (2 and 5 mg/ml, First link, UK). 10xDMEM (First link, UK) and FBS (Sigma) were used for cell supplement. 0.1M sodium hydroxide (Fluka, UK) was used for pH titration adjusting to pH 7.7-8.0 by universal lithmus paper and phenol red indicator. The percentage of reagent is shown in **Table 2.1**. After pH titration, MSCs were added in the gel mixture and decanted 2.5 ml into 12 plates. Gelation was allowed in a 37°C incubator for 30 minutes.

**Table 2.1 Collagen hydrogel regimens**

	0.76 mg/ml hydrogel (final concentration)		1.78 mg/ml hydrogel (final concentration)	
	% V	Vol (ml)	% V	Vol (ml)
Collagen type I (Rat tail, First link UK)	35.7%	8 ml of 2 mg/ml	35.7%	7.5 ml of 5 mg/ml
10xDMEM (First link, UK)	7.14%	1.5 ml	7.14%	1.5 ml
Cells in basal media	7.14%	1.5 ml	7.14%	1.5 ml
FBS (Fisher Scientific)	7.14%	1.5 ml	7.14%	1.5 ml
0.1M NaOH (Fluka, UK)	42.86%	8.5 ml	42.86%	9 ml
Total volume	100%	21 ml	100%	21 ml

### 2.3 Nanovibrational Bioreactor set up

Selected nanovibrational stimulation (NS) frequencies in .flac file type were operated on Kinsky software (Version 4.3.14). The laptop was connected to the amplifier (Linn amplifier, Sneaky DS, UK) and the signal was transferred to the nanovibrational bioreactor. The nanovibrational bioreactor (T5000 model) incorporating piezo actuators (Thru Ring Actuators; P-010.00H, Physik Instrumente, Germany), was used as the nanovibration-signal effector. To construct the culture plate-bioreactor apparatus, adhesive magnetic sheets (3M, UK) were adhered to the bottom of 6 well- or 12 well- plates (Corning, USA) and attached on the platform of the bioreactor (**Figure 2.1**).



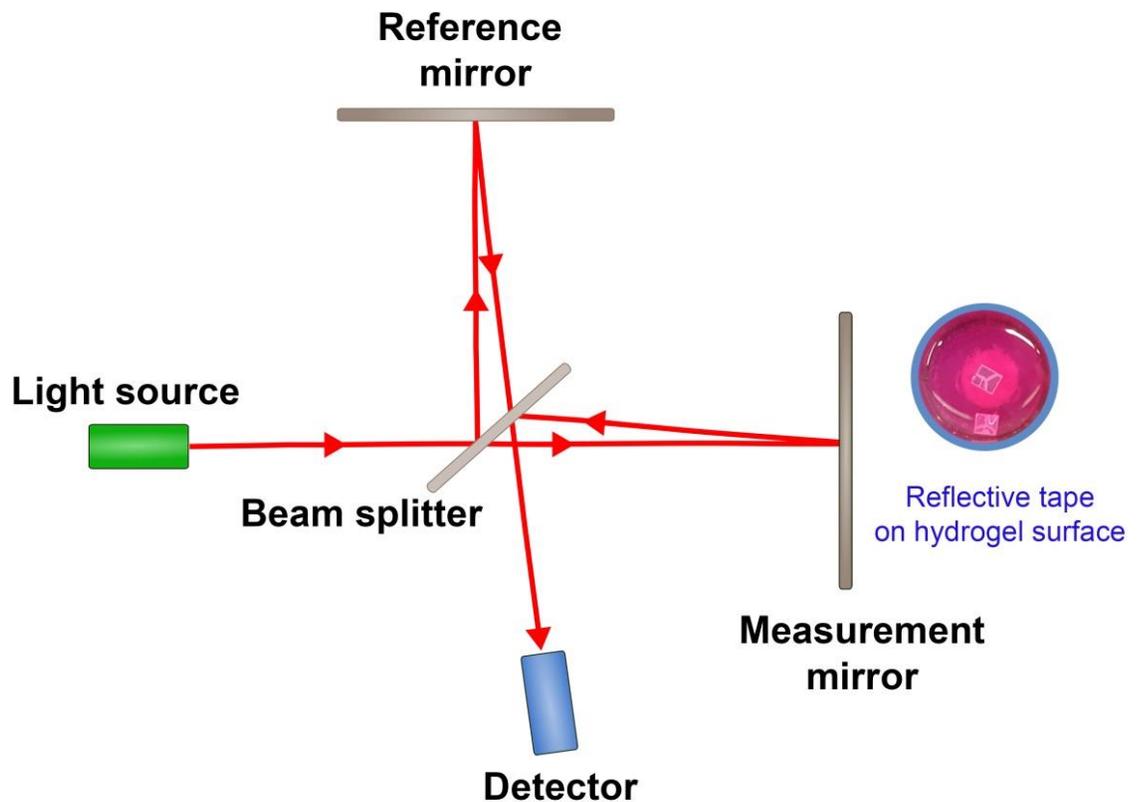
**Figure 2.1** Nanovibrational bioreactor

12 well plates containing collagen hydrogels were attached onto the bioreactor platform. The laptop generating a signal was connected to the amplifier and in turn plugged in the bioreactor for nanovibrational stimulation

## 2.4 Nanovibration stimulating amplitude measurement by interferometry

Interferometry is used to measure displacement of hydrogel surface or culture plate during NS. The surface displacement is calculated from the interference of 2 split light waves (by a reflecting mirror allowing partially laser reflection as well as passing through) which travel in different optical paths but are generated from a single light source. The phase difference of the 2 waves is analysed with software by Fast Fourier Transform (FFT) algorithm. In our technique, a laser with a known wavelength, is used as a light source. During NS, reflective tape placing on the hydrogel surface reflects a split laser beam back to the detector. NS generates a phase difference of the reflected light waves comparing

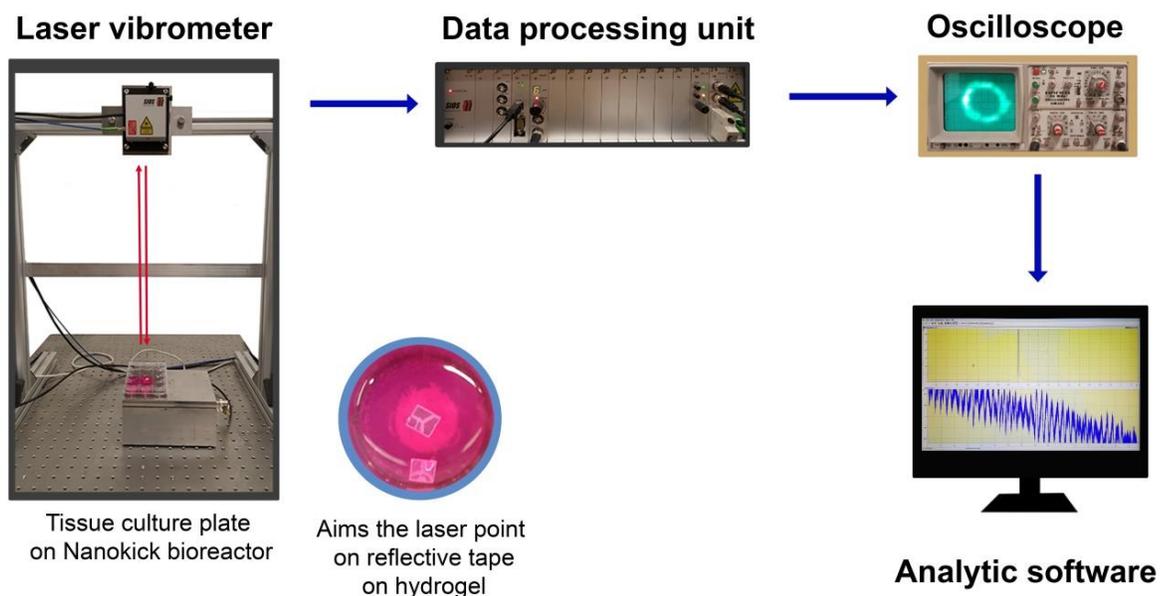
to the reference mirror, which in turn is used for the surface displacement amplitude calculation by the software (**Figure 2.2**).



**Figure 2.2** Concept of interferometry

In this thesis, 0.8 mg/ml or 1.8 mg/ml collagen hydrogels were prepared. The hydrogel nanovibration was measured by laser interferometric vibrometer (wavelength = 632.8 nm, CW power; 5mW; SIOS, MeBtechnik GmbH, Germany). An oscilloscope (72-6800 model; Tenma, UK) was connected in order to monitor the interferometer. A 3x3 mm of reflective tape was placed on top of the hydrogels underneath 1.5 ml of media to reflect the laser beam. The vibration distance was analysed

using INFAS Vibro 1.8.4 software (SIOS, Meßtechnik GmbH, Germany) (Figure 2.3).



**Figure 2.3 Nanovibration measurement by interferometry**

Reflective tape is placed on the hydrogel surface. A laser beam is aimed to the reflective tape reflecting back to the detector. An oscilloscope was used for signal adjustment. The interfering signal is analysed by FFT.

## 2.5 Rheology

Hydrogels were prepared in 6 well plates 24 hours prior to the study. To investigate the quantitative viscoelastic property of the hydrogels, rheology was studied. Hydrogels were placed on the rheology plate (Figure 2.4). Firstly, strain sweep was measured to evaluate the breaking point of the hydrogels and then frequency sweep was used to assess hydrogel stiffness. A modular compact rheometer (MCR 302, Anton

Paar, Austria) was used in this study. To study the rheology of different regimen of hydrogel, the parameters were set as follows;

### **The study of 0.8 mg/ml hydrogels**

The parallel plate method (PP25) was used. The prepared hydrogels were removed from the plate and placed on the rheometer plate. Temperature was set at 23°C. The gap size was 1.5 mm, and normal force compression was 0.01 N. The strain sweep was measured from 0.01% to 1% at 10 rad/sec in order to select the strain which was in linear-viscoelastic regime. Consequently, the frequency sweep test was measured at 1% strain starting from 100-0.1 rad/sec.

### **The study of 1.8 mg/ml hydrogels**

The parallel plate method (PP25) was used. The gap size was 1.4 mm. The samples were placed on 23°C of rheometer plate, and normal force compression was 0.01 N. The strain sweep test was measured from 0.1% to 10% at 10 rad/sec. Consequently, 1% percent strain was selected. Frequency sweep was then measured starting from 100-0.1 rad/sec.



## Figure 2.4 Rheology

The hydrogel was transferred onto the rheometer plate. The parallel plate (PP25) was leveled down and touched onto the samples.

To study the stiffness of the hydrogels in specific conditions such as the addition of hydroxyapatite and genipin crosslinking, the parameters were set as shown in Table 2.2.

**Table 2.2 Rheology parameters set up**

Addition of composite	Collagen conc (mg/ml)	Sample volume (ml)	Strain sweep test at 10 rad/sec (%)	Frequency sweep test (rad/s) at 0.1% strain	Gap size (mm.)	Temp (°C)	Parallel plate diameter (mm.)
HA	0.8	2.5	0.01 -1%	100 - 0.1	1.5	23	25
	1.8	2.5	0.1 - 10%	100 - 0.1	1.5	23	25
Genipin	1.8	2.5	0.1 - 1%	10 - 0.1	2	23	25

## 2.6 Alamar Blue assay

Stro1 selected MSCs in hydrogels with  $4 \times 10^4$  cells/ml density (Tsimbouri P.M., 2017), were used in all of cell viability tests. The process of Alamar Blue assay started by removing the previous culture media. The 10% volume of Alamar Blue resazurin (Bio-Rad, UK) diluted in phenol-red free media (D5030, Sigma) was added into each sample. After further incubation for six hours at 37°C, 5% CO<sub>2</sub>, the supernatant containing the up-taken alamar blue was pipetted and transferred into 96 well plates. A microplate reader (Clariostar, Germany) was used to detect light

absorbance at the wavelengths of 570 nm and 600 nm. The percentage of alamar blue reduction was calculated as following;

$$\text{Percentage of reduction} = \frac{(\epsilon_{ox})\lambda_2 A\lambda_1 - (\epsilon_{ox})\lambda_1 A\lambda_2}{(\epsilon_{red})\lambda_1 A'\lambda_2 - (\epsilon_{red})\lambda_2 A'\lambda_1} \times 100$$

$\lambda_1$	= wavelength 570 nm., $\lambda_2$ = wavelength 600 nm.
$(\epsilon_{ox})\lambda_2$	= molar extinction coefficient of alamarBlue oxidized form of $\lambda_2$
$(\epsilon_{ox})\lambda_1$	= molar extinction coefficient of alamarBlue oxidized form of $\lambda_1$
$(\epsilon_{red})\lambda_1$	= molar extinction coefficient of alamarBlue reduced form of $\lambda_1$
$(\epsilon_{red})\lambda_2$	= molar extinction coefficient of alamarBlue reduced form of $\lambda_2$
$A\lambda_1$	Observed absorbance reading for test well
$A\lambda_2$	Observed absorbance reading for test well
$A'\lambda_1$	Observed absorbance reading for negative control well
$A'\lambda_2$	Observed absorbance reading for negative control well

## 2.7 Live-dead staining

To study cell viability using live-dead staining,  $4 \times 10^4$  cells/ml hydrogels were prepared. After the old media were removed, 1%(v/v) calcein AM (Life technology, USA) and 1%(v/v) of ethidium homodimer-1 (Life technology, USA) diluted in 1.5 ml of media and were added in each well. The samples were then re-incubated at 37 °C, 5 CO<sub>2</sub> for 2 hours. The 10x magnification microscopic images were taken (Olympus, US) operated on Surveyor software version 9.0.1.4 (Objective Imaging, UK). First and last focusing levels at the center of the hydrogel were recorded. The mid distance of focusing level was selected for the entire XY plane scan. FITC/TRITC channel images were stitched and processed using ImageJ (Version 1.50g, USA) and Photoshop CS4 (Adobe, version11 extended, Ireland).

## 2.8 qRT-PCR

To assess gene expression changes,  $4 \times 10^4$  MSCs/ml in hydrogels were prepared for quantitative RT-PCR (qRT-PCR). The samples were removed from the bioreactor and transferred to falcon tubes. The 2.5 mg/ml of collagenase (Sigma-Aldrich, UK) was added and incubated for 1.5 hours to digest collagen hydrogels. Trizol (Life Technologies) and chloroform

(Sigma-Aldrich, UK) were then added with ratio 5:1 in order to purify nucleic acids. RNA extraction kit (RNeasy extraction Kit, Qiagen) was used to purify RNA. The concentration of purified RNA was measured by a spectrophotometer (Nanodrop 2000c, Thermo scientific, USA). cDNA was then synthesized using the QuantiTect Reverse Transcription Kit (Qiagen). The cycling temperature in each process is shown in **Table 2.3**. Forward and reverse primers for qRT-PCR are shown in **Table 2.4-2.5**. GAPDH, house-keeping gene, was used as the internal control of the analysis. SYBR Green dye was used to target the synthesized cDNA (Quantifast SYBR Green I, Qiagen). Real time PCR was then performed (7500 Real Time PCR system, Applied Biosystem, USA). The  $2^{-\Delta\Delta CT}$  method was used for the interpretation (Livak & Schmittgen, 2001). The cycling protocol was run as shown in **Table 2.6**.

**Table 2.3 Thermal cycling protocol for cDNA synthesis**

Reaction	Temperature	Times (minutes)
Genomic DNA elimination	42°	2
Reverse transcription	42°	30
Inactivation	95°	3

**Table 2.4** Primer sequence used in qRT-PCR

	Forward primer	Reverse primer
Alkaline phosphatase	ATGAAGGAAAAGCCAAGCAG	CCACCAAATGTGAAGACGTG
BMP2	CCCACCTTGGAGGAGAAACAA	AGCCACAATCCAGTCATTCC
CaSR	CTACGCACCAGAACTCCCTG	CTGTAACAGTGCTGCCTCCA
COL1A1	CCATGTGAAATTGTCTCCCA	GGGGCAAGACAGTGATTGAA
ERK1	CCCTAGCCCAGACAGACATC	GCACAGTGTCCATTTTCTAACAGT
ERK2	TCTGCACCGTGACCTCAA	GCCAGGCCAAAGTCACAG
GAPDH	TCAAGGCTGAGAACGGGAA	TGGGTGGCAGTGATGGCA
Il-6	GATGAGTACAAAAGTCCTGATCCA	CTGCAGCCACTGGTTCTGT
Integrin $\beta$ 5	CTGTGGTCCGGTAGCATCCTC	GGATCGCTCGCTCTGAAACT
Integrin $\beta$ 1	GTGCAATGAAGGGCGTGTT	GTTGCACTCACACACACGACA
JNK1	GGGCAGCCCTCTCCTTTA	CATTGACAGACGACGATGATG
JNK2	GAAAGAAGCAAGAATGGTGTGTTGT	GAGAAGGAGTGGCGTTGCTA
Nestin	GTGGGAAGATACGGTGGAGA	ACCTGTTGTGATTGCCCTTC
NF $\kappa$ B	CAGCTGGCTGAAGATGTGAA	GTGTTTTTGAAGGAGCAGGA
Osteocalcin	CAGCGAGGTAGTGAAGAGACC	TCTGGAGTTTATTTGGGAGCAG
Osteonectin	AGAATGAGAAGCGCCTGGAG	CTGCCAGTGTACAGGGAAGA
Osteopontin	AGCTGGATGACCAGAGTGCT	TGAAATTCATGGCTGTGGAA
Osterix	GGCAAAGCAGGCACAAAGAAG	AATGAGTGGGAAAAGGGAGGG

**Table 2.5 Primer sequence used in qRT-PCR (Continue)**

	Forward primer	Reverse primer
PPAR $\gamma$	TGTGAAGCCCATTGAAGACA	CTGCAGTAGCTGCACGTGTT
Piezo1	TCGCTGGTCTACCTGCTCTT	GGCCTGTGTGACCTTGA
Piezo2	CCCGGAGTTTGAAAATGAAG	CAGTGCCTCTTCTGAATCAATTT
RUNX2	GGTCAGATGCAGGCGGCC	TACGTGTGGTAGCGCGTGGC
STAT3	GGCATTGCGGAAGTATTGTCTG	GGTAGGCGCCTCAGTCGTATC
SMAD1	CCACTATAAGAGAGTAGAAAGCCC TGT	AAGTTACGGAAGTCTGAGCTAAGAGG
SMAD5	GGGTGCCATGGAGGAACTGGA	AATCCGGCCAGCGCCAAACA
TNF $\alpha$	CAGCCTCTTCTCCTTCCTGAT	GCCAGAGGGCTGATTAGAGA
TRPA	TGGACACCTTCTTCTTGCAAT	TCTTCTCCATTAGCTCAATTTGG
TRPV1	AGAGTCACGCTGGCAACC	GGCAGAGACTCTCCATCACAC

**Table 2.6** qRT-PCR cycling protocol

Stage	Ramp rate (%)	Temperature	Time (mins:sec)
Holding stage	100	50	2:00
	100	95	10:00
Cycling stage (40 cycles) Starting cycle 2	100	95	00:15
	100	50	1:00
Melting curve stage	100	95	00:15
	100	60	1:00
	1	95	00:30
	100	60	00:15

## 2.9 Western blot

The  $4 \times 10^4$  MSCs/ml containing hydrogels were prepared for western blot study. To harvest the samples, the collagen hydrogels were digested with 2.5mg/ml collagenase D (Roche) and centrifuged at 200g for 4 minutes. After the supernatant was discarded, the cell pellets were lysed by RIPA lysis buffer containing phosphatase and protease inhibitors (Pierce, Thermo Fisher). BCA assay (Pierce, Thermo Fisher) was used to quantify the protein concentration. The samples were subsequently run on pre-cast 4-12% Bis-Tris gel system (NOVEX, Invitrogen, 12 -well) and transfer onto membrane (Immobilon F, Millipore). The blots were incubated in 5% BSA, 0.1%TBS, tween20 and, subsequently, in primary antibodies (**shown in Table 2.7**). Vinculin and GAPDH were used as the housekeeping proteins (Bhardwaj et al., 2015; Bhardwaj et al., 2014; D.-Q. Li et al., 2011; Matsumoto et al., 2013; Riera-Borrull et al., 2017). Primary antibodies, prepared in working concentration, were incubated at 4°C overnight. The blots were washed in 0.1% TBST on a shaker for 5 minutes. Li-COR secondary antibodies (1:10,000) were used and blots were incubated at room temperature for 1 hour. The blots were then washed 3 times for 5 minutes with 0.1% TBST, and the signal was detected using the LICOR system (LICOR Odyssey Sa, UK). Band densitometry was measured by ImageJ software (Version 1.50g, USA).

**Table 2.7 Antibodies used in western blot**

Antibodies	Brand	Lot No.	Species	Working concentration
pRUNX2	Orb 4788, Biorbyt	A5186	Rabbit	1:2000
RUNX2	Sc-390715, Santa cruz	D1817	Mouse	1:1000
OPN	Sc-21742 Santa cruz	K0217	Mouse	1:1000
GAPDH	Sc32233, Santa cruz	D3018	Mouse	1:1000
Vinculin	V9264, Sigma	086M4757V 047M4795V	Mouse	1:1000
pTRPV1	PA5-64860, Invitrogen	T12641194	Rabbit	1:1000
TRPV1	H00007442-M01, Abnova	E128A-1F5	Mouse	1:1000
pERK1/2 (P- p44/42)	197G2, Cell signaling, No.4377S	10,15	Rabbit	1:1000
ERK1/2 (p44/42)	137F5, Cell signaling No.4695S	14	Rabbit	1:1000
$\beta$ -catenin	07-1653, Millipore	2976288	Rabbit	1:1000
Active $\beta$ - catenin	05-665, Millipore	3102364	Mouse	1:1000

## 2.10 In-Cell Western

Monolayer Stro1 selected MSCs, seeded at  $1 \times 10^4$  MSCs/well density in 24 well plates, were prepared for this study. Samples were fixed with the fixative solution for 15 minutes. The 150  $\mu$ l of permeabilisation buffer was added and incubated at 4 °C for 5 minutes. After that, 150  $\mu$ l of 1%

milk in PBS was added and incubated for 1.5 hours at room temperature. The 150  $\mu$ l of primary antibody was then added and incubated at 4 °C overnight on a shaker (pRUNX2; biorbyt, 1:200, RUNX2; Santa cruz, 1:100; diluted in 1% milk blocking buffer). The primary antibodies were removed. The samples were washed 5 times with washing buffer for 5 minutes each at room temperature on a shaker. The 150  $\mu$ l of secondary antibody against primary antibody (1: 800, Li-cor, in 1% milk blocking buffer) was added for 1 hour on a shaker at room temperature. Secondary antibodies were removed and washed with washing buffer for 5 times, 5 minutes each on a shaker at room temperature. After completing the washing process, samples were dried at room temperature. The samples were read at 680 and 800 nm. The reagents and buffer recipes were shown in **Table 2.8**.

## 2.11 Immunofluorescent staining

The samples were rinsed with 1xPBS and fixed with fixative at 37 °C for 15 minutes. After that, permeabilisation buffer was added and incubated at 4 °C for 5 minutes. The samples were then blocked with 1% BSA in PBS at 37 °C for 5 minutes. Primary antibody (P-myosin light chain 2, cell signaling, 3671S, rabbit, 1:50) and rhodamine-phalloidin (Invitrogen, Thermo fisher, 1:500) diluted in 1% BSA in PBS were added and incubated at 37 °C for 1 hour. The samples were then washed with 0.5% PBST for 3 times (5 minutes each). Biotinylated secondary antibody (anti-rabbit; Vector Laboratories, USA, 1:50) diluted in 1% BSA in PBS was added and incubated at 37 °C for 1 hour. The samples were washed again with 0.5% PBST for 3 times. Streptavidin-FITC (Vector Laboratories, USA, 1:50) diluted in 1% BSA in PBS was incubated at 4 °C for 30 minutes. The samples were washed for 3 times. A small drop of DAPI (4',6-diamidino-2 phenylindole, Vectashield) was placed onto the samples and covered with coverslips. FITC/TRITC channel images were taken (Olympus, US) operated on Surveyor software version 9.0.1.4 (Objective Imaging, UK). The images were processed using ImageJ (Version 1.50g, USA) and Photoshop CS4 (Adobe, version11 extended, Ireland). The reagents and buffer recipes were shown in **Table 2.8**.

**Table 2.8 Reagents and buffers of In cell western and Immunofluorescent staining**

Buffers	Chemicals	Quantities (unit)
Fixatives	Formadehyde	10 ml
	PBS	90 ml
	Sucrose	2 g
Permeabilisation buffer (pH 7.2)	Sucrose	10.3 g
	NaCl	0.292 g
	MgCl <sub>2</sub>	0.006 g
	Hepes	0.476 g
	Triton X	0.5 ml
1% milk or BSA (Blocking buffer)	Milk or BSA	0.5 g
	PBS	50 ml
0.1% Tween 20 (Washing buffer)	Tween 20	1 ml
	PBS	1000 ml
0.5% Tween 20 (Washing buffer)	Tween 20	5 ml
	PBS	1000 ml

## 2.12 Protein Inhibitory study

After the experiment was set up (in chapter 5, section 5.4.5-5.4.7), inhibitors which were diluted in basal media as working concentration, were added at day 2 (List of inhibitors and used concentration are shown in Table 2.9). Culture media with diluted inhibitor was changed every 2 days.

**Table 2.9 List of inhibitors and working concentration**

Function	Inhibitors	Cat No./Batch	Working concentration
ERK inhibitor	U126, Tocris	1144/5	10 $\mu$ M
P38 inhibitor	SB 202190, Tocris	1264/5	5 $\mu$ M
JNK inhibitor	SP600125, Tocris	1496/10	25 $\mu$ M
NFkB inhibitor	TPCA-1, Tocris	2559/5	5 $\mu$ M
TNF alpha	R 7050, Tocris	5432/1	2 $\mu$ M
ROCK inhibitor	Y-27632, Tocris	1254/35	10 $\mu$ M
ROS inhibitor	N-acetyl cysteine, Sigma Aldrich	WXBC4028V	10 $\mu$ M

## 2.13 Protein antibody microarray

The  $4 \times 10^4$  cells/ml of Stro1 selected MSCs in 1.8 mg/ml collagen hydrogels were stimulated with N30 and N90. After stimulation for 1 and 2 weeks, hydrogel samples were digested with collagenase. Total protein amounts were quantified using micro-BCA kit (Pierce, Thermo Fisher). The samples were then transferred to Dr. Marc Antoni Fernandez-Yague (Centre for Research in Medical devices, National University of Ireland, Galway) to process on the protein microarray.  $\beta$ -actin was used as an internal protein control. Data were analysed by Excels. Heatmaps were generated by Hierarchical Clustering Explorer v3.0 (<http://www.cs.umd.edu/hcil/hce/hce3.html> (**Appendix I**)).

## 2.14 Statistics

To compare the means of samples more than two groups, One-way ANOVA with Tukey's post hoc test was used in qRT-PCR, ROS measurement and AlamarBlue assay. Two-way ANOVA with Tukey's post hoc test was used to analyse hydrogel and CHSCs contraction by times. To compare the data between 2 groups, two tailed, paired t- test were used in Alamar Blue Assay of CHSCs. Two tailed, Mann-Whitney U test was used in interferometric measurement, rheology western blot and qRT-PCR. Biological sample population with 4 replicates were always used. All results are shown in mean  $\pm$  standard deviation with 95%, 99% and 99.9% of accuracy (\*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ ).

**Chapter 3 Strategies to deal with  
hydrogel contraction for  
nanovibrational bioreactor**

## **Chapter 3 Strategies to deal with hydrogel contraction for nanovibrational bioreactor**

### **3.1 Introduction**

At present, diverse techniques and materials fabrication of 3D scaffolds for bone tissue engineering have been studied (Loh & Choong, 2013). Collagen, a natural ECM protein, is a major component of bone and is thus commonly used for bone tissue engineering (Ferreira, Gentile, Chiono, & Ciardelli, 2012); collagen can enhance MSC adhesion and growth (C. Somaiah et al., 2015). Collagen based scaffolds can be prepared in many forms such as rigid forms (e.g. freeze dried technique (Al-Munajjed & O'Brien, 2009; Kane & Roeder, 2012), electrospinning (Jha et al., 2011; Law, Liao, Saim, Yang, & Idrus, 2017; Matthews, Wnek, Simpson, & Bowlin, 2002)) and hydrogel form (Hesse et al., 2010; M. Liu et al., 2017).

In our previous publication, we recently elucidated that NS can drive 3D osteogenesis in MSCs. The 0.8 mg/ml rat tail collagen type I hydrogels was used as an ECM for MSCs cultured in the NS bioreactor. This soft hydrogel was selected to avoid hydrogel itself inducing an osteogenicity by the effect of stiff ECM (Engler et al., 2006; Tsimbouri P.M., 2017). These studies were performed using bought MSCs. However, when switch to Stro-1 selected MSCs in my PhD, the fresher, less expanded cells were seen to be able to detach gels from the well plates due to increased contractility (data not shown). The contraction and detachment of collagen hydrogel is a critical problem disrupting long-term 3D cell culture in the NS bioreactor. This chapter aims to develop a strategy dealing with hydrogel contraction while maintaining the concept of NS conducting in MSCs within a soft ECM.

Considering cell-material interaction, integrins recognize adhesive ligands in hydrogels, subsequently allowing cytoskeletal contraction (Hoffman, Grashoff, & Schwartz, 2011; Ning Wang et al., 2009). Cell pulling force interacts with ECM leading to syneresis (Scherer, 1989a; Tranquillo, Durrani, & Moon, 1992). Syneresis is a process by which

hydrogels lose fluid and in turn reduce gel size (Scherer, 1989a). Factors inducing collagen hydrogel syneresis are physical cues such as gel-container interaction, ECM factors as well as biological cues e.g. cellular contraction.

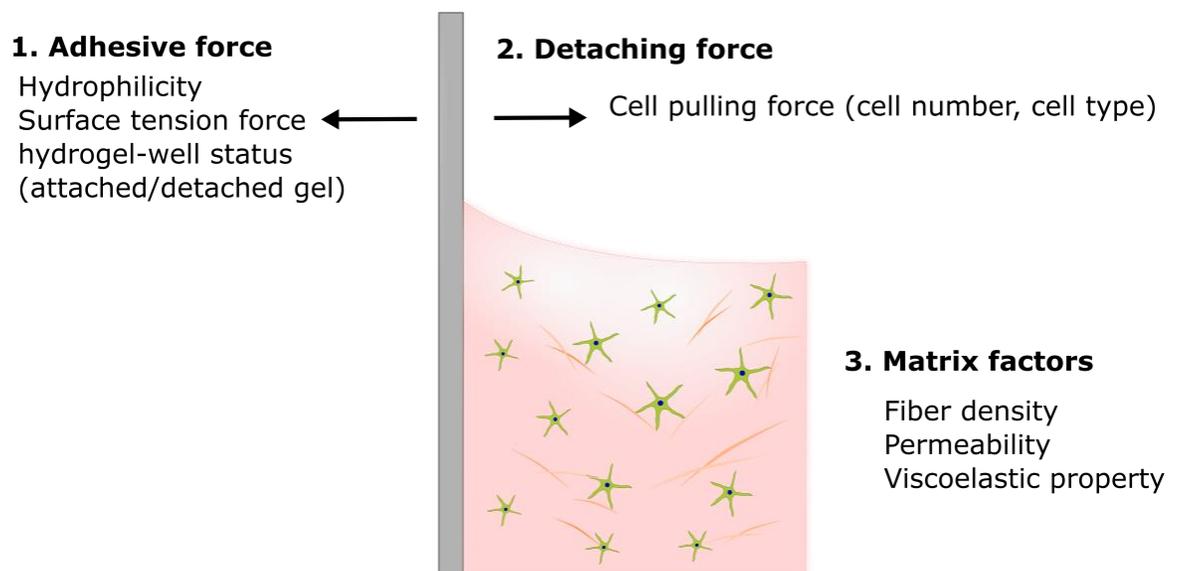
The interaction between the gel-container may resist hydrogel contraction force and thus extend the starting time of hydrogel contraction. In the wells, hydrogel has a meniscus shape which indicates that it adheres to the side walls of the well plate and the bonding (adhesion between the hydrogel and cultureware) is stronger than the cohesive force between particles of hydrogel itself (Marshall, Bayne, Baier, Tomsia, & Marshall, 2010). Generally, the culture well surface was pre-treated (e.g. corona-gas treatment, Coroning CellBIND surface) to promote cell adhesion thus the cultureware surface is hydrophilic and negatively charged (Webb, Hlady, & Tresco, 1998). Hydrophilicity helps hydrogels to adhere onto container surfaces (Webb et al., 1998). A well attached gel may resist cell pulling forces better (Y. K. Zhu et al., 2001). Even though the interaction between hydrogel and cultureware can resist hydrogel contraction, theoretically, syneresis did not depend on the interfacial free energy but may depend on hydrogel permeability, viscoelastic property, hydrogel shape and size (Scherer, 1989a, 1989b).

Hydrogel properties, including hydrogel stiffness, fiber density, hydrogel permeability and viscoelastic property also affect hydrogel syneresis rate (Bell, 2000; Scherer, 1989a). Loose fibers allow water to be squeezed out through pores, while dense fibers hold water inside the hydrogel thus reduce syneresis rate (Scherer, 1989b).

Cellular factors such as cell-seeding number, cell proliferation and differentiation rate (Chieh et al., 2010) are crucial factors of cell induced syneresis. Cells generate traction forces to migrate through the collagen fibers resulting in collagen network deformation, compaction of fibrils and squeezing of water from the hydrogel pores, therefore, inducing syneresis (Tranquillo et al., 1992) (**Figure 3.1**).

In this chapter, the first strategy to deal with hydrogel contraction was aimed at mechanical modification. Polylactic acid (PLA) rings were fabricated by 3D printing and implanted into hydrogels to re-balance the

hydrogel contraction force and cell pulling force. This ring-in-gel concept maintained the soft ECM property using a standard 0.8 mg/ml collagen hydrogel formulation used in previous studies with bought-in MSCs (Tsimbouri P.M., 2017). PLA is the widely used for bone tissue engineering as it is rigid, biodegradable, biocompatible and approved by the FDA (Lopes, Jardini, & Maciel, 2012).



**Figure 3.1 Factors related to hydrogel contraction**

1) Hydrogels attached to the side wall of a tissue culture well by adhesive surface tension force together with hydrophilicity resisting cell pulling force. Hydrogel syneresis rate can be affected by various factors. 2) A high number of seeded cells accelerates gel contraction. 3) Dense fibers, stiffer ECM and poor liquid permeability (small pores) decrease the syneresis rate. Gel detachment allows adhesive forces to fully contract the hydrogel.

The second strategy was aimed at ECM modification without extra-chemical use based on the concept that stiffer ECM (increasing viscoelastic properties) may reduce syneresis rate. Theoretically, many physicochemical factors have an effect on collagen hydrogel

polymerization such as ratio of collagen mass per total volume (Doyle, 2016), pH, temperature and ionic strength (Achilli & Mantovani, 2010). These factors influence collagen hydrogel fibrillary microstructure, matrix pores, and stiffness (Achilli & Mantovani, 2010). In 2D culture, where MSCs are seeded onto ECM after e.g. gelation, some publications showed successful osteogenic induction of MSCs by the use of physicochemical modifications. For example, collagen hydrogels which are polymerized at 4°C produce long and low fiber stiffness and possibly, in turn, promote cell spreading and focal adhesion formation thus enhancing osteogenic differentiation (Xie, Bao, Bruekers, & Huck, 2017). Furthermore, gelation at 4°C and pH 10 provides a high compressive modulus (Achilli & Mantovani, 2010). On the other hand, achieving these mechanical advantages by using extreme environments (low temperature and high alkaline pH) may be impossible for 3D culture due to poor biocompatibility.

To prepare cells in 3D collagen hydrogels, cells are added into collagen hydrogels and gelation is then initiated. Thus, cells are directly exposed to pH and temperature conditions which can have strongly adverse effects on cell viability and osteogenic differentiation (Achilli & Mantovani, 2010; Fliefel et al., 2016; Monfoulet et al., 2014). Increasing collagen concentration is, therefore, an option for improving stiffness without the addition of chemicals in 3D culture (Y. K. Zhu et al., 2001).

Further to these approaches, crosslinking techniques are widely used to improve collagen hydrogel viscoelastic properties. Many crosslinking techniques had been proposed including chemical (e.g. enzymatic induced, Diels-Alder click reaction) and physical (e.g. ionic, thermal, hydrogel bonding) crosslinking (Hu, Wang, Xiao, Zhang, & Wang, 2019) (**Table 3.1**). The next strategy in the endeavor to improve collagen hydrogel properties to prevent contraction was thus conducted by using the genipin crosslinker. Genipin (C<sub>11</sub>H<sub>14</sub>O<sub>5</sub>), a naturally derived substance has been widely used for crosslinking hydrogels made from e.g. collagen and chitosan due to low cytotoxicity (Muzzarelli, El Mehtedi, Bottegoni, Aquili, & Gigante, 2015). Genipin, extracted from *Genipa Americana* and *Gardenia jasminoides Ellis*, reacts to primary amines of biopolymers to form crosslinks (and gives a resultant blue colour) (Butler, Ng, & Pudney,

2003), thus increasing stiffness (Fessel, Cadby, Wunderli, van Weeren, & Snedeker, 2014; Sundararaghavan et al., 2008).

### **3.2 Aims and objectives**

1. To assess the feasibility of the “ring in gel; biphasic scaffold” for clinical application in the aspect of gel contraction.
2. To study the effects of increasing collagen concentration on hydrogel handleability, hydrogel contraction and NS force transmission.
3. To investigate the effects of genipin crosslinking collagen in mechanical properties and biological response of MSCs.

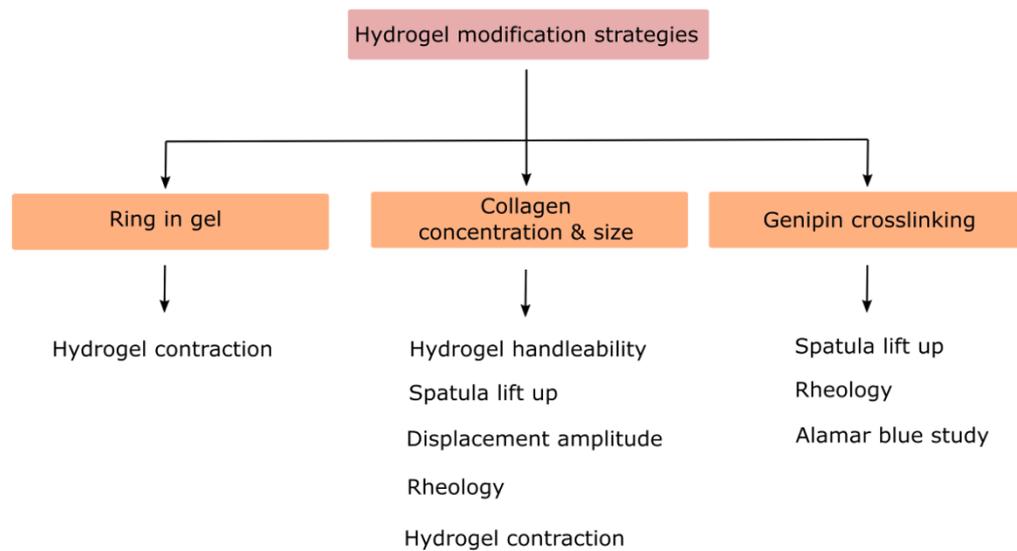
**Table 3.1 Example of techniques for collagen hydrogel modification**

Collagen	Co-polymer	Modification Techniques	Cells	Cell-ECM preparation	Cell response	References
Type I, bovine cornea	-	Crosslinking by EDC, glutaraldehyde	Immortalized human corneal epithelial cells	Separate	2D	Duan et al., 2006 (X. Duan & Sheardown, 2006)
NM	Chitosan	Crosslinking by Glutaraldehyde	preadipocyte	Separate	IC	Wu et al., 2006 (X. Wu, Black, Santacana-Laffitte, & Patrick, 2007)
Type I, atelo, Porcine	Chitosan	PEG stabilized, crosslinking by carbodiimide	Immortalized human corneal epithelial cells	Separate, seed on top	2D	Rafat et al., 2008 (Rafat et al., 2008)
Type I,	2-methacryloyloxyethyl phosphoryl choline	Crosslinking by ethanol-water, EDC, NHS	L929 (mouse fibroblast)	Separate	2D	Nam et al., 2010 (K. Nam, Kimura, Funamoto, & Kishida, 2010a, 2010b)
Type I, Rat tail	-	Non-enzymatic Glycation (Ribose)	Bovine aortic endothelial cells (spheroids)	Mixed together	3D	Mason et al., 2013 (Mason, Starchenko, Williams, Bonassar, & Reinhart-King, 2013)
Type I, Bovine	-	Aldehyde-functionalized dextran, oxidizing dextran with sodium periodate	COS-7, L929, Hela cells	Separate, seed on top	2D	Zhang et al., 2014 (X. Zhang, Yang, Yao, Shao, & Chen, 2014)
Calf skin	-	Crosslinking by Glutaraldehyde	-	Separate	-	Tian et al., 2016 (Tian, Liu, & Li, 2016)

EDC; 1-ethyl-3-(3 dimethylaminopropyl)-1-carbodiimide hydrochloride, NHS; N-hydroxysuccinimide, NM =not mentioned, IC = inconclusive

### 3.3 Methodology and experimental design

Composite optimizations of all hydrogel modification strategies were studied. Mechanical validations including hydrogel contraction, handleability, interferometry, rheology as well as MSCs viability were conducted shown in **Figure 3.2**.



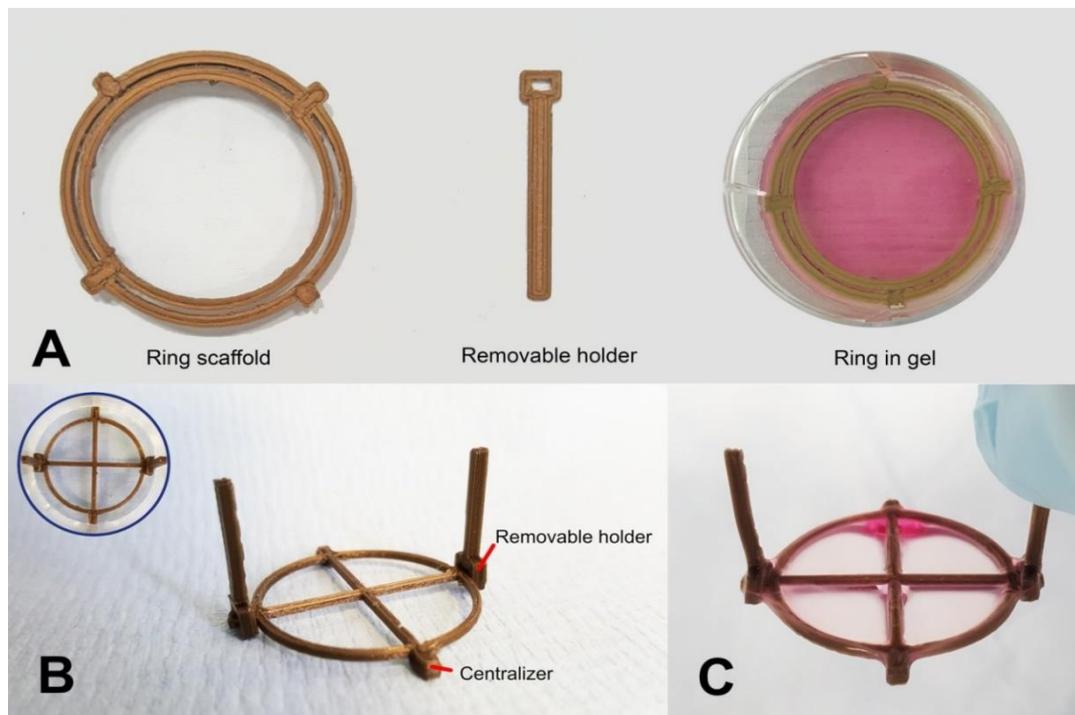
**Figure 3.2** Diagram of hydrogel modification strategies and optimization in Chapter 3

The optimization of three strategies; Ring-in-gel, collagen concentration optimization and genipin crosslinking were studied.

#### 3.3.1 'Ring in gel' biphasic scaffold

To engineer the hydrogel supporting structure, ring shape scaffolds were designed (AutoCAD 2016 software, Autodesk, USA) and printed

by 3D printer using polylactic acid (PLA). Two generation ring designs are shown in **Figure 3.3**.



**Figure 3.3 PLA ring design**

- A) The first-generation ring scaffold design. The 4-notches function as a centralizer of the PLA ring. The notches can be attached to removable holders aiming to remove the Ring-gel composite.
- B) The second-generation ring scaffold design: Cross hair design attached with removable holder for six well plates.
- C) Long term culture ring-gel composite. MG63 seeded in 0.8 mg/ml collagen hydrogel with the second-generation ring scaffold. At day 65, hydrogel attached to the ring. The gel-ring composite can be transferred from the 6-well plate using a holder.

### 3.3.2 Collagen concentration

The 0.8 and 1.8 mg/ml (final collagen concentration) of collagen hydrogels were prepared using rat tail collagen type I (2 and 5 mg/ml of commercialized concentration, First link, UK) as shown in chapter 2, section 2.

### 3.3.3 Genipin crosslinking

The sterile 1x PBS was used to prepare 20 mM of genipin stock solution (Sigma Aldrich, UK). The genipin stock was then diluted to 0.5 mM, 1 mM and 10 mM using basal media. After completing the gelation process, 1.5 ml of genipin solution was added onto the gels and incubated at 37°C for 12 hours.

### 3.3.4 Rheology

Rheology was performed as shown in Chapter 2, section 2.5. The 0.8 and 1.8 mg/ml hydrogel and genipin crosslinking hydrogels were prepared in 6 well plate, 24 hours prior to the testing. Rheology parameters was shown in Table 3.3.

**Table 3.2 Rheology parameter set up**

Experiments	Collagen conc (mg/ml)	Sample volume (ml)	Strain sweep test at 10 rad/sec (%)	Frequency sweep test (rad/s) at 1% strain	Gap size (mm.)	Temp (°C)	Pararellel plate diameter (mm.)
Conc test	0.8	2.5	0.01 -1%	100 - 0.1	1.5	23	25
	1.8	2.5	0.1 - 10%	100 - 0.1	1.5	23	25
Genipin test	1.8	3.5	0.1 - 1%	10 - 0.1	2	23	25

### 3.3.5 Hydrogel contraction

In order to monitor the hydrogel contraction without NS, percentage of hydrogel contraction comparing to initial size was quantified by the use of gel diameter or gel surface area in top view. To measure the hydrogel diameter, the diameters of 6 and 12 well plates were used as references. The center of the hydrogel was identified and the shortest diameter of the hydrogel was selected for measurement using a scientific ruler. An average of three repeated measurements was recorded at each time point, every 3-4 days. To quantify the hydrogel top view area, the hydrogel image was taken in top view every 3-4

days. The hydrogel surface areas in top view were measured and analysed by ImageJ software.

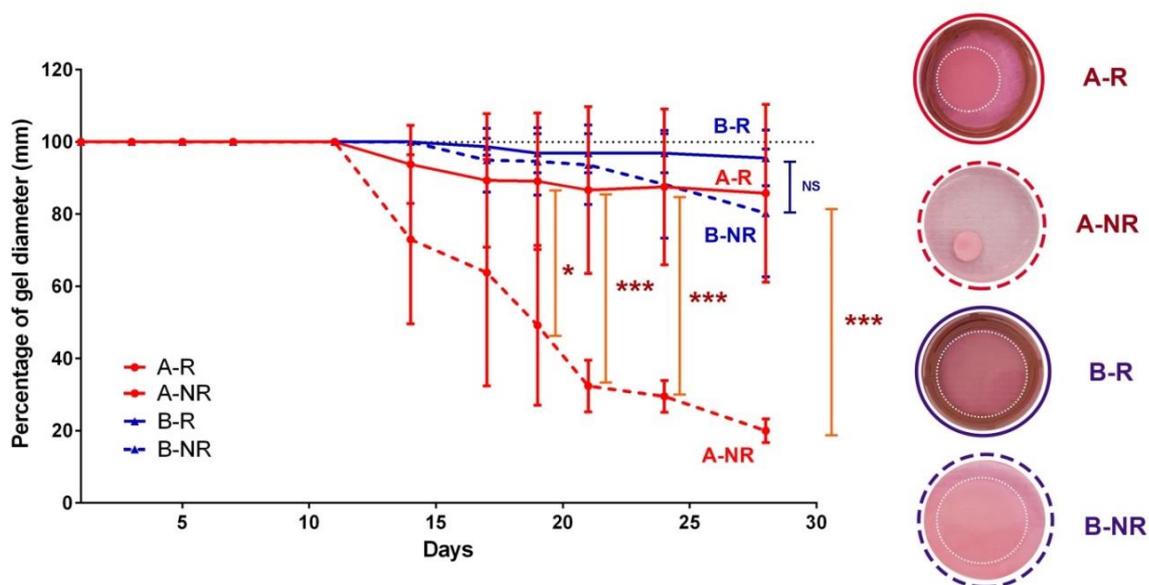
## 3.4 Results

### 3.4.1 Ring in gel strategy

#### 3.4.1.1 The first-generation ring-in-gel contraction

To study the efficacy of the first-generation ring design, Stro1 selected hMSCs seeded in 0.8 mg/ml rat tail collagen type I hydrogels were prepared and trialled with a range of culture plates in order to study whether different culturewares could improve hydrogel adhesion. Thus, four conditions were prepared in two commercial 6-well plates (A; CytoOne, USA Scientific, B; Corning, Costar, Sigma-Aldrich): group1; brand A with ring, group2; brand A with no ring, group 3; brand B with ring and group 4; brand B with no ring. Hydrogel contraction was observed for 4 weeks.

After 4 weeks of hydrogel observation (**Figure 3.4**), plain collagen hydrogels in plate B (no ring group) showed less gel contraction compared to hydrogels in plate A. At day 17, the percentage of remaining hydrogel diameter (compared to time 0), where no ring scaffold was used, was significantly smaller than where a ring was used in plate A. However, there were no significant difference in plate B with/without the use of a ring. The results indicated that plate B provided better hydrogel adhesion to side wall of wells than that of plate A. Furthermore, the first-generation PLA ring could not prevent hydrogel contraction.



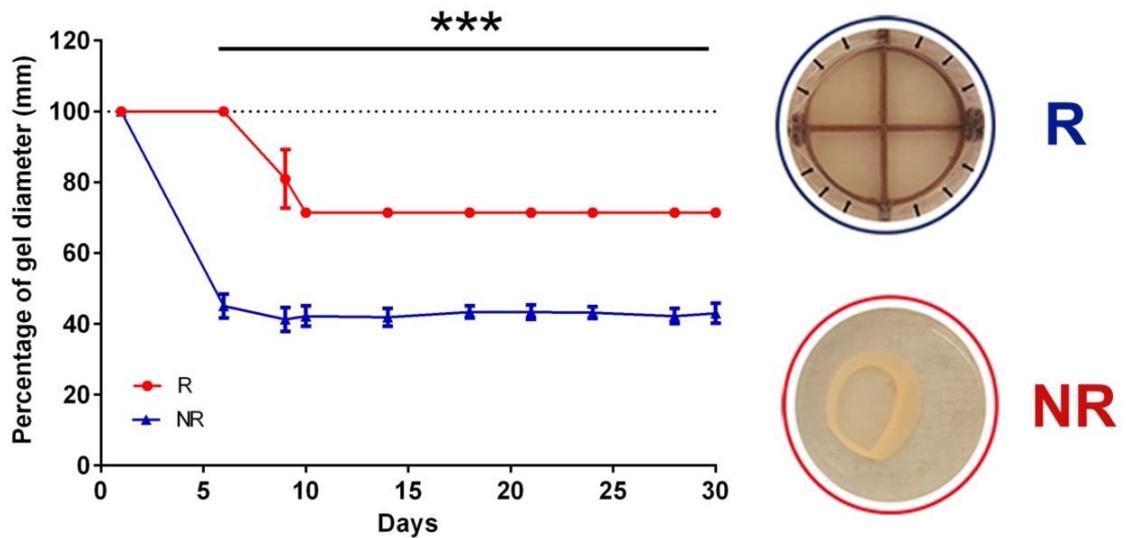
**Figure 3.4 Hydrogel contraction in different brand of cultureware**

Comparison of the percentage of gel diameter remaining, from time 0 (starting diameter), between Stro1 selected MSCs in 0.8 mg/ml gels seeded into 6 well plates from brand A (CytoOne, USA Scientific) and brand B (Corning, Costar, Sigma-Aldrich) with/without the first-generation ring scaffold. Hydrogel contraction in plate A with ring was greater than plate B with ring. However, it was not seen to prevent gel contraction in both culturewares. Gel contraction in plate A was significantly higher than that in plate B. (n=3, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , Two way ANOVA, Tukey's post hoc test, A; Brand A; B; Brand B, R; ring, NR; no ring).

### 3.4.1.2 The second-generation ring-in-gel contraction

The second-generation PLA ring was designed with a cross hair pattern aiming to reduce cell pulling force. To study the efficacy of hydrogel contraction reduction of the second design ring, MG63 seeded in 0.8 mg/ml collagen hydrogels were prepared (n=3). Hydrogel contraction was observed for 4 weeks. The results showed that the new design of ring scaffold prevented the gel contraction (**Figure 3.3B**). However, the hydrogel still detached from the 6-well plate. The significant

difference of percentage gel diameter remaining between ring and no ring groups began at day 6.



**Figure 3.5 Hydrogel contraction in the second-generation ring-gel composite.**

Comparison of the percentage of gel diameter by time between groups with/without the second-generation rings for cells seeded into 0.8 mg/ml collagen hydrogels. The second-generation ring design can prevent further hydrogel contraction after day 10. (\*n=3,  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , R; ring, NR; no ring, 2-way ANOVA, Sidak's post hoc tests)

### 3.4.2 Collagen concentration and diameter

It is considered that the ring-in-gel approach might be problematic for future clinical use. Thus, physicochemical modulation of hydrogels was the next strategy to be trialed. Hydrogel diameter and collagen concentration were considered. Previously, 0.8 mg/ml collagen hydrogels (2.5 ml) seeded with MSCs in 6 well plates were used in 3D NS-induced osteogenesis (Tsimbouri P.M., 2017). However, the collagen hydrogel is too thin and difficult to handle in clinical use. To improve handleability for clinical application, hydrogel use of 12 well plate rather than 6 well plate was trialed (Figure 3.6). Interferometry

showed that changing the well plate diameter did not reduce the nanovibration amplitude (**Figure 3.7**).

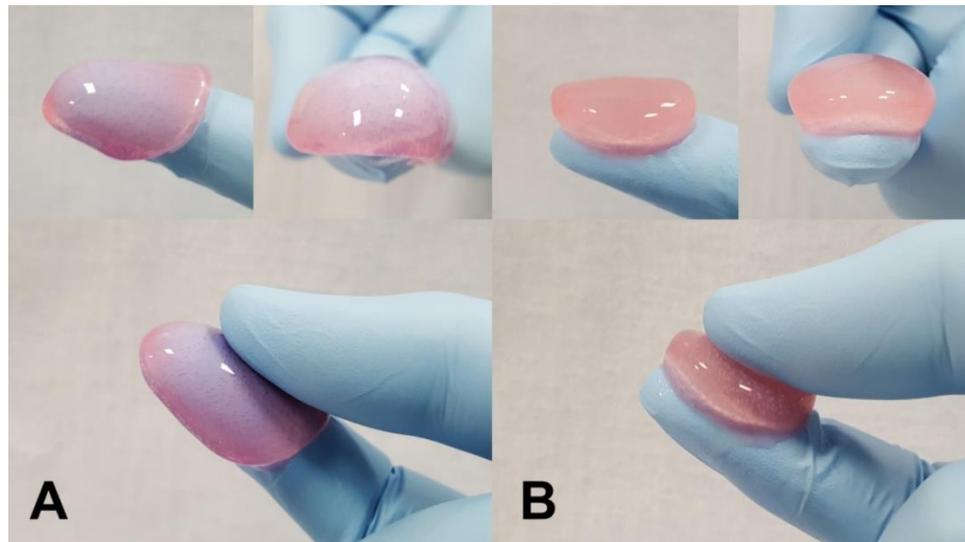
Increasing collagen concentration from 0.8 mg/ml to 1.8 mg/ml appeared to improve hydrogel handleability (**Figure 3.9**), improve stiffness (**Figure 3.10**) and extend the starting date of hydrogel contraction (**Figure 3.11**) while still allowing good vibrational fidelity (**Figure 3.12**).

#### **3.4.2.1 Hydrogel diameter validation**

Considering intended clinical use, a thin and flat hydrogel, seeded in a 6 well plate, is difficult to fill the bone defect. Furthermore, dividing the scaffold into small pieces, e.g. using a scalpel, could potentially injure the nanovibration stimulated MSCs. Comparing well plate diameter to human bone morphology, a 12 well plate diameter was approximately a transverse diameter of human humerus (Murdoch, Mathias, & Smith, 2002) which is a moderate long bone size. Whereas, a 24 well plate diameter is approximately the diameter of human phalanges (Ash & Unsworth, 2000). Therefore, in this thesis, 12 well culture plates (22.1 mm well diameter) were selected for 3D hydrogel size regarding size and handleability. Moreover, it is an optimal scaffold size to fill long bone defect where the common sites of injury are tibia, femur and humerus (Kironde, Sekimpi, Kajja, & Mubiri, 2019).

#### **3.4.2.2 Hydrogel handleability and spatula lift test**

By preparing hydrogels with the 2.5 ml volume in 6 well plates, hydrogel diameter was larger than finger diameter of the user (**Figure 3.6A**). These large, soft and thin characteristics resulted in a floppy hydrogel that was difficult to handle. It can be suggested that the 12 well plate size hydrogel (2.5 ml volume) therefore provides a better handleability (**Figure 3.6B**).

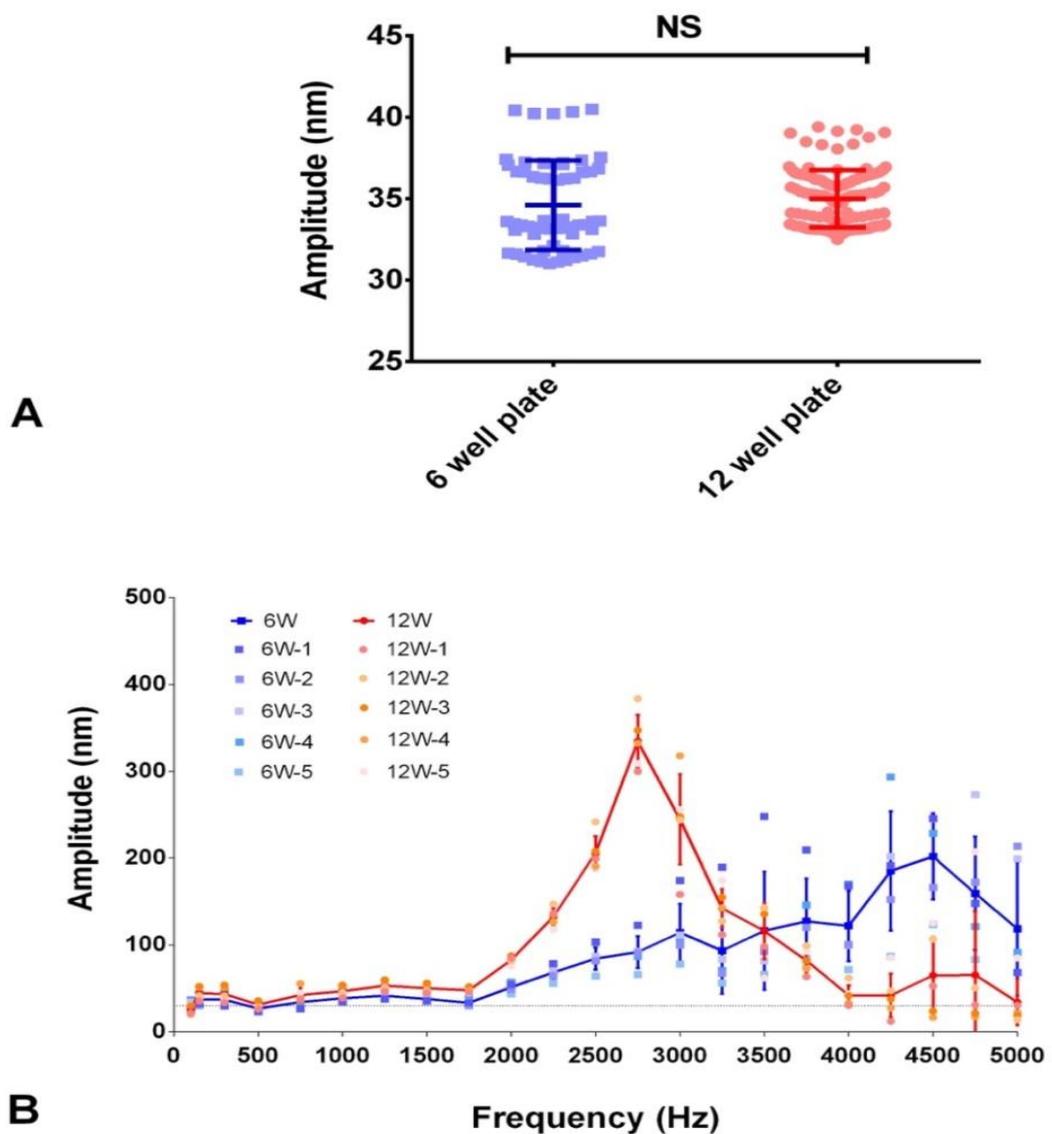


**Figure 3.6 Hydrogel handleability**

6 well plate (A) and 12 well plate (B) sized hydrogels. (6 and 12 well plate diameter; 35 mm and 22.1 mm respectively, 2.5 ml/wells). 6 well plate diameter is not suitable for surgeon handleability.

### 3.4.2.3 Hydrogel surface displacement amplitude measurement of 6 and 12 well plates

The efficacy of nanovibrational transmission through the hydrogels in the different sizes of tissue culture plate was then investigated. All hydrogels were prepared in 6 and 12 wells plates and measured at the centre point by interferometry. There was no significant difference in surface displacement amplitudes comparing between hydrogels in the 6 well and 12 well plates (**Figure 3.7A**); at 1000 Hz, NS provided a good fidelity of displacement amplitudes in both plates. Hydrogels in 12 well plates showed greater average amplitude at resonant frequency than those in 6 well plates, but this resonant frequency was clear at cell stimulating frequency of this study (1000 Hz) (**Figure 3.7B**). Thus, changing from 6 well to 12 well plate diameter did not have an effect on NS force transmission at 1000 Hz.

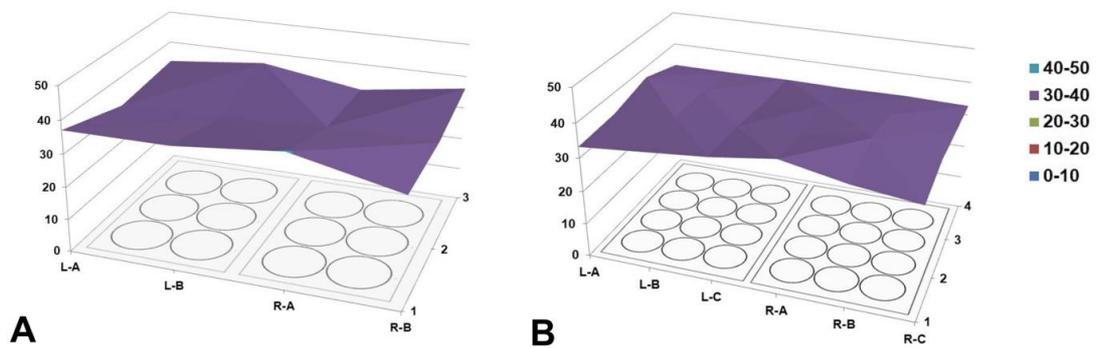


**Figure 3.7 NS amplitude comparison between 6 and 12 well plates**

- A) The NS amplitude comparison of hydrogels (at the centre point) prepared in 6 and 12 well plate and stimulating at 1000 Hz, no significant difference were noted (6 wells; mean =55.36 nm, SD=5.21 nm, 12 wells; mean 61.87 nm, SD 21.90 nm, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ ,  $n=12-24$ , Mann-Whitney test, T5000, Voltage peak to peak 19.69).
- B) Frequency-amplitude plot showed that NS provided reliable amplitude at 1000 Hz in hydrogels both in 6 and 12 well plates. The resonant frequency was noted between 1500-3000 Hz resulting in amplitude amplification thus providing unreliable stimulating amplitudes.

### 3.4.2.4 The homogeneity of stimulating amplitude across the wells on the NS bioreactor

The comparison of the 6 and 12 well plates showed that the NS bioreactor generated reliable amplitudes through all wells in both 6 and 12 well plates. Thus, changing from the 6 to 12 well culture plate did not affect NS (Figure 3.8).



**Figure 3.8 NS stimulating amplitude across the 6 and 12 culture wells**

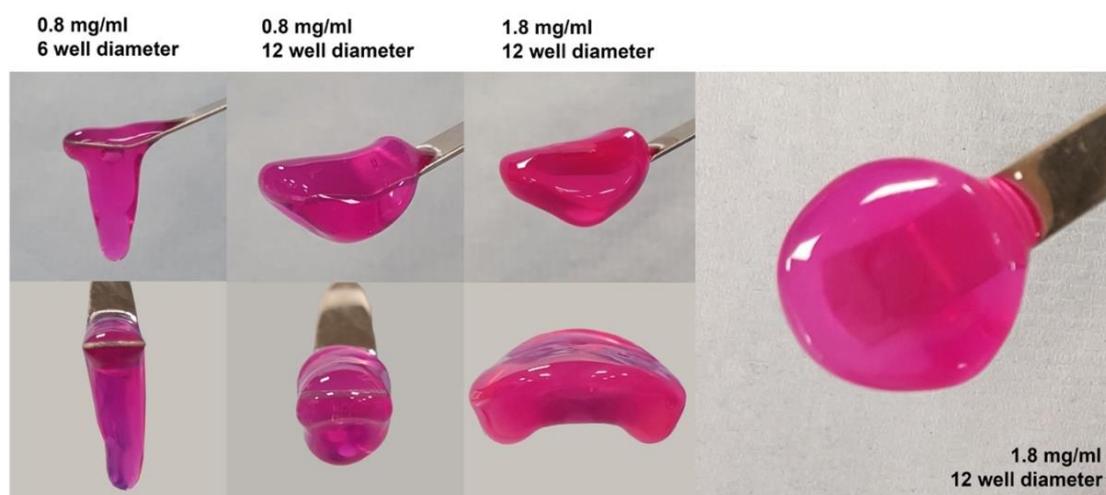
The 3D surface plot showed hydrogel displacement amplitude measured at the centre of hydrogels in all wells of the plates. During NS at 1000 Hz, the NS bioreactor generated reliable NS amplitudes across the 6 (A) and 12 (B) well plates. (6 wells,  $n=12$  gels, mean 34.6 nm, SD 2.85 nm; 12 wells,  $n=24$  gels, mean=34.99 nm, SD=1.78 nm, third generation bioreactor, PSU4003).

### 3.4.2.5 Collagen concentration

It is known that increasing collagen concentration can increase hydrogel stiffness (Swift & Discher, 2014), thus potentially extending the starting date of hydrogel contraction (Chieh et al., 2010). Increasing collagen concentration is interesting as it is simple and free of additional chemical crosslinking, maintaining 3D cellular response and still using collagen, which is the naturally derived extracellular matrix. To investigate the effect of collagen concentration, mechanical properties including hydrogel characteristics and stiffness, hydrogel contraction and gel displacement during NS were measured.

#### 3.4.2.5.1 Spatula lift test

The spatula lift test was performed for simple hydrogel inspection. The 0.8 mg/ml hydrogel is very soft while the 1.8 mg/ml hydrogel was more handleable and could maintain its shape during the lift up (Figure 3.9).

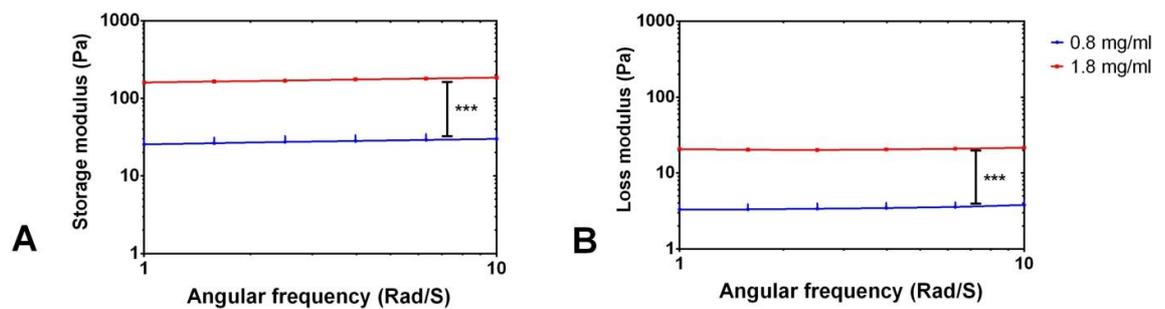


**Figure 3.9 Hydrogel characteristics at 2 week.**

The 0.8 mg/ml hydrogel in 6 well plate (2.5 ml collagen hydrogel) is very soft. The 0.8 mg/ml hydrogel in the 12 well appears floppy while the 1.8 mg/ml hydrogel can maintain its shape.

### 3.4.2.5.2 Hydrogel stiffness

As discussed, to improve hydrogel handleability, the final collagen concentration of the hydrogels was increased from 0.8 mg/ml to 1.8 mg/ml. The hydrogel viscoelastic property was measured by the rheometer. Frequency sweep test was conducted to study the viscoelasticity of polymer architecture or crosslinking (Zuidema, Rivet, Gilbert, & Morrison, 2014). Comparing storage ( $G'$ ) and loss ( $G''$ ) modulus of the hydrogels, 1.8 mg/ml collagen hydrogel had a higher storage modulus ( $G' = 161.27$  Pa; SD 15.17 Pa) than that of the 0.8 mg/ml hydrogel ( $G' = 25.67$  Pa; SD 2.91 Pa) (Figure 3.10). Even though 1.8 mg/ml hydrogel was still soft, it was handleable.



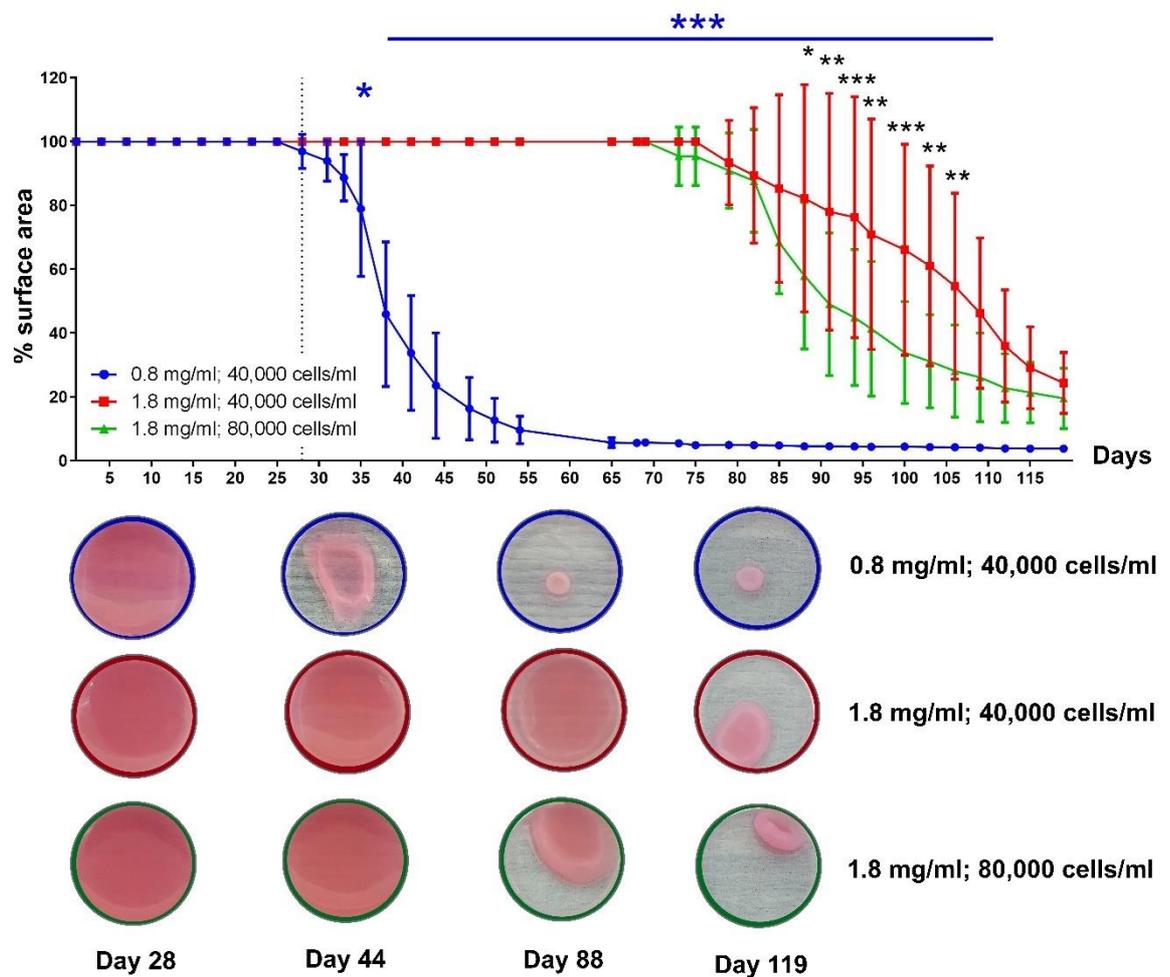
**Figure 3.10 Hydrogel stiffness measured by rheology**

Frequency sweep test with angular frequency ( $\omega$ ) ranging from -20 rad/second of 0.8 vs 1.8 mg/ml collagen concentration studied by rheology ( $n=3$ ). The 1.8 mg/ml collagen had a higher storage modulus (A), thus, indicating higher elastic modulus than that of 0.8 mg/ml. The elastic modulus was higher than the loss modulus (B) confirming that the properties of both 0.8 and 1.8 mg/ml collagen were hydrogels, rather than liquid (mean $\pm$ SD,  $n=4$ , \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , Mann-Whitney test).

### 3.4.2.5.3 Hydrogel contraction

To study the effect of cell number and collagen concentration on hydrogel contraction, 0.8 and 1.8 mg/ml collagen hydrogels seeded with 40,000 and 80,000 Stro1 selected MSCs/ml were prepared. The surface areas of hydrogels in top view were quantified every 3-4 days. The 0.8 mg/ml cell seeded collagen hydrogels started to contract at day 28 in this experiment. Interestingly, increasing collagen

concentration to 1.8 mg/ml extended the starting date of hydrogel contraction to day 80. Moreover, increasing cell seeding number produced greater hydrogel contraction, but did not accelerate the start date of contraction (Figure 3.11).



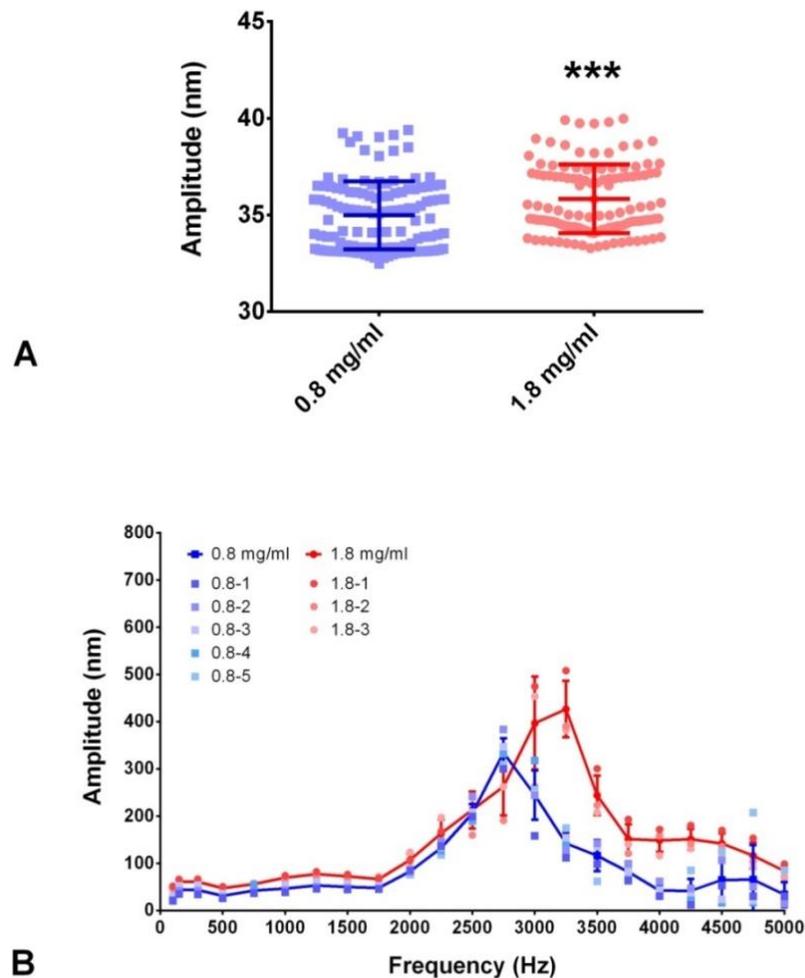
**Figure 3.11 Hydrogel contraction observation.**

The 0.8 mg/ml hydrogel contraction started at day 28. However, the 1.8 mg/ml hydrogels contracted at day 80. The 1.8 mg/ml collagen hydrogel with 80,000 MSCs/ml contracted more than that with 40,000 MSCs/ml. (mean $\pm$ SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , Two-way ANOVA, Tukey's post hoc test).

#### 3.4.2.5.4 Interferometry

To investigate the effect of increasing collagen concentration on NS amplitude, the 0.8 and 1.8 mg/ml collagen hydrogels were stimulated at 1000 Hz with 30 nm vibrations. NS amplitude of 1.8 mg/ml collagen

hydrogels (mean 34.99 nm, SD =1.76 nm) were slightly higher than that of 0.8 mg/ml hydrogels (mean 35.83, SD 1.77) (Figure 3.12A). Again, the NS bioreactor generated reliable amplitudes at 1000 Hz without resonance (Figure 3.12B).



**Figure 3.12 Interferometry for 0.8 and 1.8 mg/ml collagen hydrogels in 12 wells plates.**

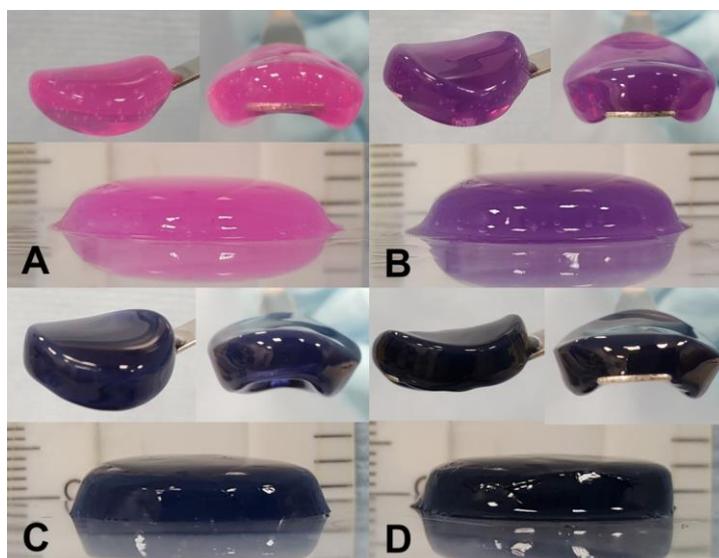
Comparison of 0.8 and 1.8 mg/ml collagen hydrogel in 12 well plates: A) During NS, gel surface displacement of 1.8 mg/ml collagen hydrogel was significantly higher than that of 0.8 mg/ml group (mean±SD, n=24, \* P≤ 0.05, \*\* P≤ 0.01, \*\*\* P≤ 0.001, Mann-Whitney test, PSU4003). B) Frequency-amplitude graph showed that both 0.8 and 1.8 mg/ml collagen hydrogels showed good fidelity of NS at 1000 Hz. Resonant frequency of both hydrogel types ranged approximately from 2,750 to 3,250 Hz.

### 3.4.3 Genipin crosslinking collagen hydrogel

In the previous section, it was shown that increasing collagen concentration can extend the starting date of hydrogel contraction. To achieve better hydrogel stiffness and possibly resist hydrogel degradation *in vivo*, genipin crosslinking was trialed. Mechanical and biological optimisations were studied which are described in this section.

#### 3.4.3.1 Genipin-hydrogel characteristics

To observe hydrogel characteristics after genipin crosslinking, 2.5 ml of 1.8 mg/ml collagen gels were prepared in 12 well plates. All hydrogels were, in turn, crosslinked with 0, 1, 5, 10 mM of genipin. Genipin crosslinking resulted in a gel color change to dark blue, in particular at 5 and 10 mM concentrations. However, 5 and 10 mM genipin crosslinked hydrogels showed better gel handleability by inspection (**Figure 3.13**).

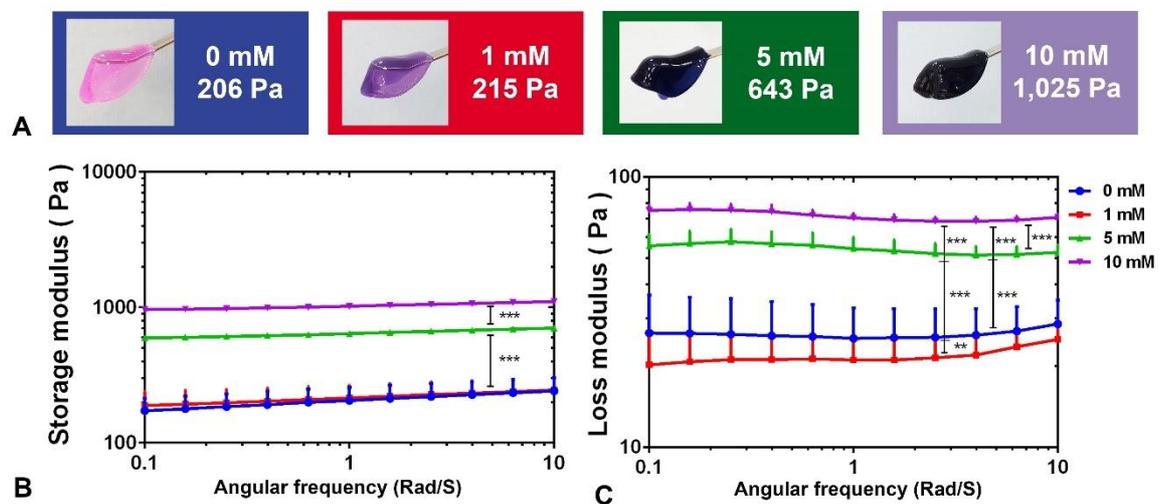


**Figure 3.13** Genipin crosslinked hydrogel

The 0, 1, 5 and 10 mM (A to D) of genipin crosslinked 1.8 mg/ml collagen hydrogels (2.5 ml seeded in 12 wells plate). Improved handleability was seen after genipin crosslinking.

### 3.4.3.2 Genipin-crosslinking and hydrogel stiffness

The 1.8 mg/ml collagen hydrogels crosslinked with 0, 1, 5 and 10 mM of genipin were prepared in 6 well plates. The stiffness of all hydrogels was studied by rheology. The frequency sweep test showed that there was no significant difference in elastic modulus between 0 and 1 mM genipin crosslinking. The 5 and 10 mM genipin crosslinking, however, significantly increased elastic modulus ( $P \leq 0.001$ ) up to 1.03 kPa in the 10 mM genipin group (Figure 3.14).



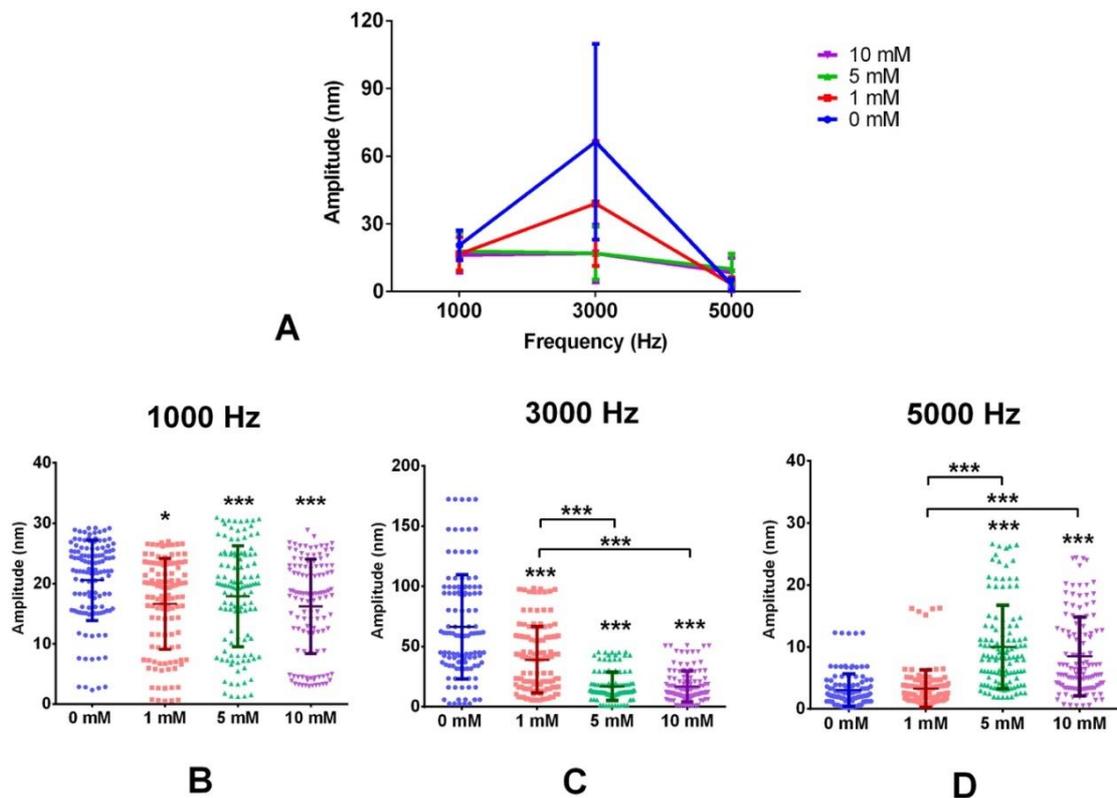
**Figure 3.14 Rheological study of genipin crosslinked 1.8 mg/ml collagen hydrogels**

The characteristics and colour of genipin crosslinked collagen hydrogels (A); Addition of genipin significantly increased the elastic modulus in the 5 and 10 mM groups (B). (mean $\pm$ SD, n=3, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , B= storage modulus ( $G'$ ), C= loss modulus ( $G''$ ), Two-way ANOVA, Tukey's post hoc test).

Genipin crosslinking can increase the elastic modulus of collagen hydrogels up to > 1 kPa. This is a significant increase, but it is still far from the stiffness required for osteogenic induction (25-40 kPa) (Engler et al., 2006). Dose and time dependent cytotoxicity was next studied.

### 3.4.3.3 Genipin crosslinked hydrogel interferometry

The surface displacement amplitude of 1.8 mg/ml collagen hydrogels crosslinked with 0, 1, 5 and 10 mM genipin were studied during NS. At 1000 Hz, NS amplitude was significantly reduced in crosslinked hydrogels (Figure 3.15A and B). The effect of displacement amplification, causing by resonance frequency, was noted at 3000 Hz in the softer hydrogel (0, 1 mM genipin crosslinked hydrogel) while the stiffer hydrogels (5, 10 mM genipin crosslinked gels) showed less resonance (Figure 3.15A and C). At 5000 Hz, stimulating amplitude in all groups was very low (Figure 3.15A and D).



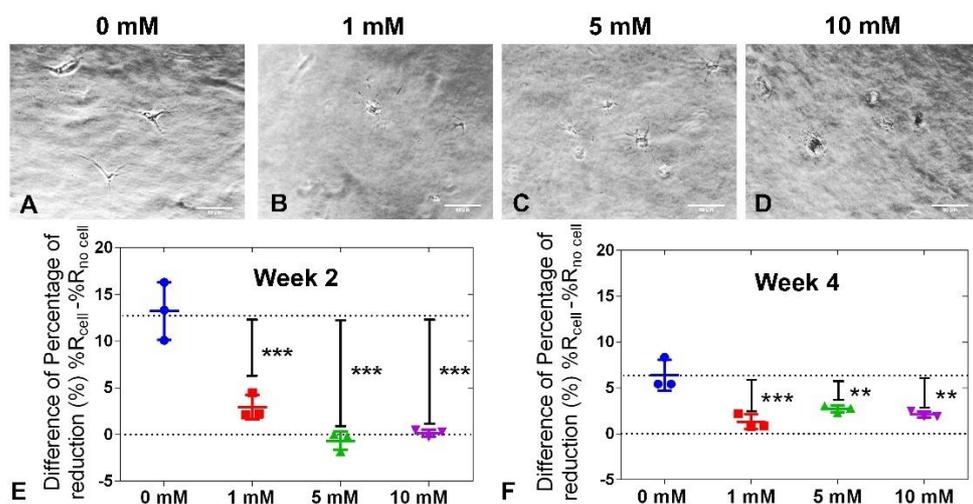
**Figure 3.15 Interferometry in genipin crosslinked hydrogels.**

(A) Overview comparison of hydrogel displacement at the centre of the hydrogels during NS at 1000, 3000 and 5000 Hz. (B-C) At 1000 and 3000 Hz, hydrogel displacement amplitude was decreased in stiff hydrogels (5 and 10 mM group). (C) At 3000 Hz, the amplitudes exaggerated by resonance phenomenon, in particular in the soft hydrogels (0 and 1 mM groups) (mean $\pm$ SD,  $n=3$ , \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , One-way ANOVA, Tukey's post hoc test).

### 3.4.3.4 Genipin crosslinked hydrogel and cell viability studies

To investigate the effect of genipin on cell viability, 0, 1, 5 and 10 mM genipin crosslinked hydrogels were prepared. The Alamar blue test and microscopy were performed. Microscopic images showed that cells were poorly spread after genipin crosslinking (**Figure 3.16 A-D**). The Alamar blue test at 2 week and 4 weeks showed a decreasing trend of viability with increased genipin concentration (**Figure 3.16 E-F**).

This study showed that genipin crosslinking adversely affected cell viability. Genipin crosslinking can increase the elastic modulus up to 1 kPa using 10 mM concentration (**Figure 3.14**). However, microscopic images showed rounded and poorly spreading cells after exposure to higher concentrations of genipin. Using low concentration of genipin may reduce the cytotoxicity but the advantage of hydrogel stiffness improvement was insufficient. Therefore, the use of genipin crosslinking strategy was discontinued.



**Figure 3.16** Microscopy and Alamar blue study in genipin crosslinking hydrogel

At 2 week, A-D) microscopic images showed poor MSCs spreading in genipin crosslinking groups. E-F) At 2 and 4 week, percentage of Alamar blue reduction was significantly decreased compare to control group (mean±SD, n=3, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , One-way ANOVA, Tukey's post hoc test).

## 3.5 Discussion

### 3.5.1 Ring in gel: what can we learn?

The concept of ring-in-gel was originated based on our previous publication that, cells were grown in 3D hydrogel provided with NS gave osteogenic response (Tsimbouri P.M., 2017). However, when we switched from commercial to Stro-1 MSCs, gel contraction suddenly became a problem. The ring-in-gel strategy focused on changing hydrogel supporting structure while preserving hydrogel property.

The first ring design provided an unsatisfactory result. Initially, it was expected that PLA ring inside hydrogel may resist the contraction force at gel-container area. However, the first ring design did not reduce cell pulling force inside the ring (ring-gel surface). Moreover, the PLA ring (in particular without surface treatment such as plasma polymerization) may provide inadequate adhesion between the ring-gel contact surface.

The second-generation of scaffold was designed based on the hypothesis that increasing the ratio of gel-material (ring) contact surface (junction) could possibly dissipate the cell pulling force, in turn, preventing the gel contraction. In order to rebalance cell pulling force and scaffold-gel interface bonding, the internal shape structure was changed to a cross-hair design (**Figure 3.3B**).

To explain this hypothesis mathematically; the inner circumferential length of PLA ring was calculated using the formula:

$$L = 2\pi r$$

$L$  = inner circumferential length of ring

$r$  = radius of ring

$\pi$  = 3.14

Thus, the ratio (R1) of volume of “cell in hydrogel” (V1) per contact surface length of material-gel junction (L1) of first ring-gel composite was:

$$R1 = \frac{V1}{2\pi r}$$

$$R1 = \frac{V1}{6.28r}$$

In the cross-hair design, the contact junction length (L2) of each “cell in hydrogel” area was the sum of a quarter of the inner circumferential length of the ring plus with 2 radii, therefore:

$$L2 = \frac{2\pi r}{4} + 2r$$

$$L2 = 3.57r$$

The volume of “cell in hydrogel” was divided into 4 areas, thus:

$$\text{Volume per each area (V2)} = \frac{V1}{4}$$

Therefore, the ratio (R2) of volume of “cell in hydrogel” (V2) per contact surface length (L2) of cross hair PLA ring was:

$$R2 = \frac{\frac{V1}{4}}{3.57r}$$

$$R2 = \frac{V1}{14.28r}$$

In conclusion, the new design PLA ring increases the contact length of the gel-material interface up to 4 folds (R1/R2). Mechanically, this design possibly shares the cell pulling force in the hydrogel, in turn, reducing hydrogel contraction. Our experiment showed that the second-generation PLA ring can indeed prevent further hydrogel contraction (**Figure 3.3C**). However, our preliminary study showed that the ring in gel composite was difficult to remove from tissue culture using the ring holder, in particular in short term culture

hydrogels. Moreover, the “ring in gel” composite was difficult to use, for example, when dividing the hydrogels into small pieces to fill small bone defect in clinics. The ring-in-gel concept was, therefore, discontinued as it was considered not suitable for clinical application.

### 3.5.2 Increasing collagen concentration strategy

Collagen concentration had an effect on viscoelasticity. It is known that high concentration of collagen increases viscoelasticity while low concentration decreases (Swift et al., 2013). Increasing collagen concentration increases fibre density and reduces the pore size of ECM (Wolf et al., 2013) and this reduces syneresis (Chieh et al., 2010; Y. K. Zhu et al., 2001). To solve the hydrogel contraction issue by increasing collagen concentration, hydrogels were gelled at slightly alkaline (approximately pH 7.5-8) and 37°C which is a physiological condition of MSCs. Furthermore, MSCs were not exposed to cytotoxicity of crosslinking chemicals, rendering this technique safe for MSCs.

From our results, the storage modulus of 1.8 mg/ml collagen hydrogel was 161 Pa (**Figure 3.10**) indicating that the hydrogel is soft but handleable (**Figure 3.9**). The 1.8 mg/ml collagen hydrogel allows reliable NS force transmission (**Figure 3.12**). This soft hydrogel is insufficient to drive osteogenic differentiation (Engler et al., 2006), therefore it can be extrapolated that osteogenic expression after NS was only driven by the effect of NS. Moreover, the storage modulus of this hydrogel is compatible with the stiffness of hematomas at fracture site. Thus, it could mimic 3D niche of the initial phase of bone healing process (Ryan, Mockros, Weisel, & Lorand, 1999).

Considering hydrogel contraction, increase collagen concentration from 0.8 mg/ml to 1.8 mg/ml can extend the starting date of hydrogel contraction significantly in tissue culture which allows an adequate stimulating time to induce MSCs osteoblastic commitment, transfer composite to clinics and possibly maintain their shapes during bone healing process (Claes et al., 2012; Einhorn & Gerstenfeld, 2015) (**Figure 3.11**). Therefore, the concept of cells-gel-sponge composites

were proposed to improve hydrogel structure that suit surgical purposes (see details in chapter 6).

### 3.5.3 Genipin-crosslinking collagen hydrogel

Genipin had been widely used as a crosslinker for biomaterials and soft tissue grafts such as bovine cardiac tissue (Yoo, Kim, Kim, & Choi, 2011), tracheas (F. Sun et al., 2016), sclera (S. Q. Zhu, Pan, Zheng, Wu, & Xue, 2018; S. Q. Zhu et al., 2016) and scaffolds. However, in most of the literature reporting cell seeded genipin crosslinked 3D scaffolds, cells were seeded after the scaffold crosslinking process (Bi et al., 2011; Campos et al., 2018). In our study, MSCs were mixed with collagen solution before allowing gelation to create 3D cellular niche. Genipin crosslinking was then performed afterwards. MSCs were therefore directly exposed to genipin in the 3D hydrogel. Our result corresponded to the published literature reporting cytotoxicity of genipin (**Figure 3.16**) (Fessel et al., 2014). Genipin affected cell viability by dose- and time-dependence as has been reported previously (Fessel et al., 2014). Furthermore, considering signaling pathways, the literature shows that genipin can activate MAPK pathways and p53 (H. Cao et al., 2010; E. S. Kim, Jeong, & Moon, 2012; X. Yang et al., 2013) as well as promote reactive oxygen species production (B. C. Kim et al., 2005) which, in turn, may activate apoptotic pathways.

Considering the crosslinking mechanism of genipin, genipin possibly crosslinks collagen fibrils at amine groups (Butler et al., 2003). Increasing genipin concentration increases the density of crosslinked sites, in turn, improves hydrogel stiffness (S. Lin & Gu, 2015). Theoretically, crosslinked scaffold may extend the scaffold syneresis (Guo et al., 2019) and reduce scaffold degradation (McGann et al., 2015).

From **Figure 3.15**, the relationship between displacement amplitude and hydrogel stiffness at 1000 and 3000 Hz stimulation possibly was explained by oscillation theory (Garrett, 2017; Kett, 1982). Hydrogel displacement was assumed as moving in a simple harmonic motion and

hydrogel oscillation frequency was equal to stimulated frequency without damping following Hooke's law:

$$F = -kX \quad (1)$$

$F$  = force action

$k$  = constant factor characteristic of gel (act as spring)

$X$  = displacement from equilibrium position

Following Newton's second law ( $F = ma$ ) for a hydrogel moving under gravity ( $g$ ). Thus, at maximum amplitude ( $X_a$ ):

$$mg = -kX_a \quad (2)$$

$$-\frac{mg}{k} = X_a \quad (3)$$

From equation (3), hydrogel stiffness ( $k$ ) is inversely proportional to amplitude ( $X_a$ ). Correlating to **Figure 3.15-3.16**, the 5 and 10 mM genipin crosslinked hydrogels had high stiffness ( $k$ ). Therefore, displacement amplitude was decreased. This trend was departed from at 3000 Hz due to resonant frequency (value was nearly 3000 Hz).

### 3.6 Conclusion

The first PLA ring design showed an unsatisfactory result. Hydrogel contraction still occurred at the ring-gel junction of both commercial plates. The second-generation ring reduced hydrogel contraction without using chemical crosslinking. In long term culture, hydrogel attached to the ring and thus this composite was transferable (**Figure 3.3C**). However, removing the composite in short term culture was challenging. The ring cut through the hydrogel during lifting with the holder. In clinical application, the design would be difficult to use. The handle removal process is difficult and can also cause composite damage.

To improve hydrogel handleability, the 1.8 mg/ml collagen hydrogel can be prepared in 12 well plates without disturbing NS. Increasing collagen concentration can extend the starting date of collagen

hydrogel contraction without reducing NS, thus, potentially allow long term NS within the NS bioreactor. Following the results in this chapter, the 1.8 mg/ml collagen prepared in 12 well plate was the best strategy to deal with hydrogel contraction, therefore, this strategy is then used in the following chapters for biocompatibility testing, phenotype-pathway studies as well as developing cell-hydrogel-sponge composites.

Genipin crosslinking can increase collagen hydrogel stiffness up to 1 kPa. Biologically, genipin significantly increases cytotoxicity in 3D hydrogels. Therefore, this strategy is not suitable for developing 3D hydrogels for NS.

**Chapter 4 The effect of high amplitude  
nanovibrational stimulation on  
phenotype and related pathways**

## **Chapter 4 The effect of high amplitude nanovibrational stimulation on phenotype and related pathways**

### **4.1 Introduction**

In chapter 3, the 1.8 mg/ml collagen hydrogel was proposed as a suitable extracellular matrix (ECM) for mesenchymal stem cells (MSCs) on the nanovibrational bioreactor. However, no previous study investigated in the effect of NS amplitude in 3D osteogenesis. In this section, a study of the effects of amplitude in 3D was performed. Theories of osteogenic differentiation and phenotype expression were also reviewed. Since Tsimbouri et al recently showed the success of NS induced 3D osteogenesis via transient receptor potential vanilloid type 1 (TRPV1) - protein kinase C (PKC) - extracellular signaling-regulated kinase 1 and 2 (ERK1/2) -  $\beta$ -catenin pathways (Tsimbouri P.M., 2017), understanding of calcium signaling and channels, as well as interplays between calcium signaling, mitogen-activated protein kinase (MAPK) and Wnt signaling may help to unlock the basis of nanovibrational stimulation.

#### **4.1.1 Nanovibrational stimulation; rational for amplitude control.**

It has been shown that mechanical stimulations, such as vibration and mechanical strain by stretching, affect cell differentiation. However, the proposed intensities and stimulating durations are diverse and inconclusive in both 2D and 3D culture systems (B. McClarren & R. Olabisi, 2018; Sen et al., 2011).

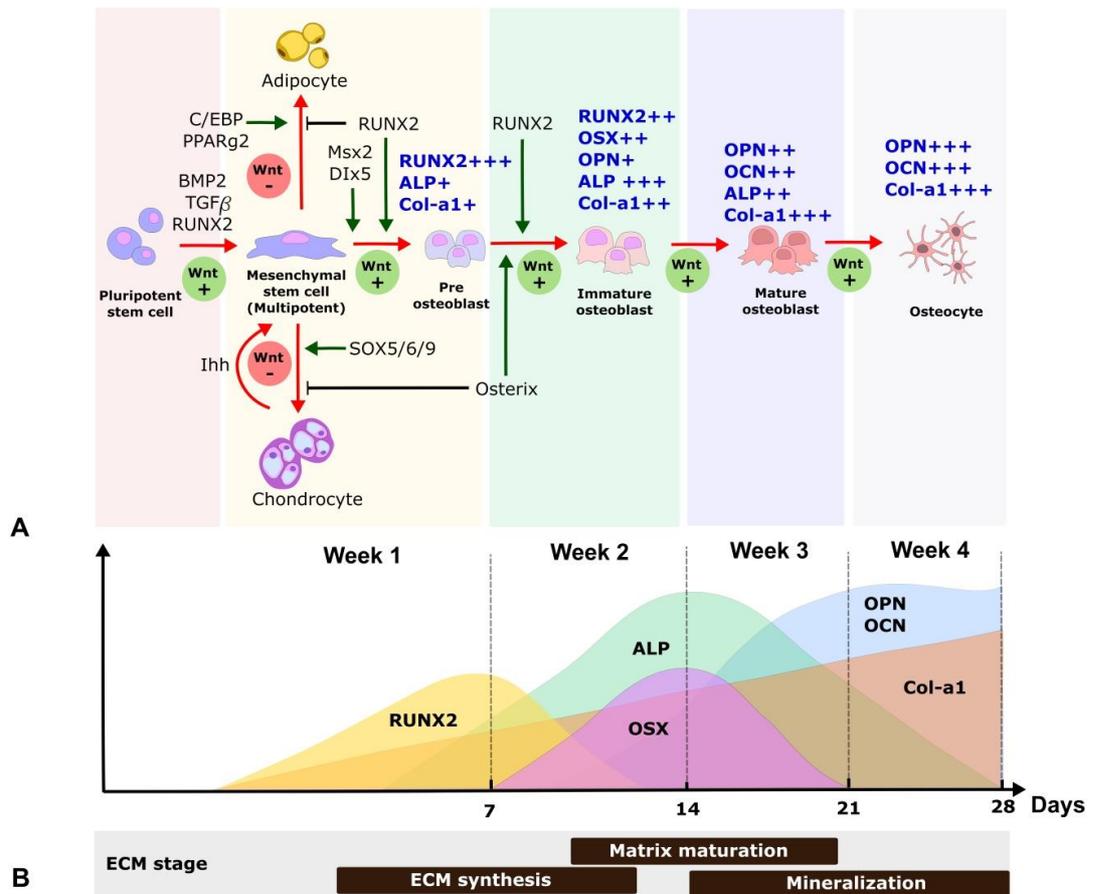
Based on the concept that if the size of mechanical stimuli is compatible with cellular membrane receptors, it has been proposed that Nanovibrational stimulation (NS) possibly triggered specific mechanotransductive pathways driving osteogenesis. Recently, NS had successfully enhanced 2D and 3D osteogenesis in MSCs using high frequency at 1000 Hz (Nikukar et al., 2013; Tsimbouri P.M., 2017). Nikukar H. and Pemberton G. had studied the osteogenic induction effect of stimulating frequencies. They proposed that NS with 30 nm at 1000 Hz can promote 2D osteogenesis (Nikukar et al., 2013; Pemberton et al., 2015). Following that, Tsimbouri et al again elucidated the success of 3D osteogenesis in MSCs-seeded 0.8 mg/ml

collagen by stimulating at 30 nm (Tsimbouri P.M., 2017). However, most of these studies focused on frequency rather than amplitude.

Considering the cytoskeletal tension effect on MSCs in 2D culture, strain can promote cell spreading and thus in turn switches on osteogenic gene expression (Cui et al., 2015). However, excessive strain reduces actin fiber formation and cell spreading (Cui et al., 2015). In 2D culture, cells spread asymmetrically and interact with the uniplanar ECM (Baker & Chen, 2012). However, in 3D culture, cells spread in 3D multiplanar manner from the centre (nucleus), thus their cellular structure is more symmetrical than that of 2D culture (Beningo, Dembo, & Wang, 2004; Jiang & Grinnell, 2005). Considering these observations, it was hypothesized that MSCs in a 3D niche, where MSCs have lower cytoskeletal tension than that in 2D niche, may require higher NS amplitude to tune cytoskeletal tension. This tension is crucial to reach the threshold level of osteogenic induction in order to trigger mechanotransduction pathways driving gene transcription. Moreover, the new collagen hydrogels in which concentration was increased for gaining higher stiffness were used. Thus, revalidation of NS in the new hydrogels was required.

#### **4.1.2 Progression of the osteoblast phenotype.**

Osteogenic genes / proteins provide specific functions at specific time points driving MSC osteocommitment. For example, Runt-related transcription factor 2 (RUNX2) and osterix (OSX) drive osteogenic commitment at the early stage, while osteocalcin (OCN) and osteopontin (OPN) enhance ECM mineralization at late stage (Lian & Stein, 1992; Lian et al., 1991; Stein et al., 1991). Thus, disorder of phenotypic expression may hint at differentiation problems and pathological conditions (W. Liu et al., 2018; Philipp J. Thurner et al., 2010). Temporal study of phenotype correlated to MSCs differentiation stage is illustrated in **Figure 4.1**.



**Figure 4.1 Osteogenic differentiation and phenotypes**

- A) Osteogenic differentiation from MSCs towards osteoblastic differentiation.
- B) Temporal phenotypic expression and ECM development. In summary, in the early phase (week 1), RUNX2 mainly commits MSCs to the osteogenic lineage; RUNX2 expression inhibits adipogenesis. After RUNX2 expression, OSX then plays a role to drive immature osteoblast at week 2. Alkaline phosphatase (ALP) and ON promote ECM maturation (week 2 - 3) while OCN and OPN enhance mineralization (week 3 - 4) (Komori, 2010, 2019; Lian & Stein, 1992; Lian et al., 1991; Stein et al., 1991).

In the early phase, RUNX2 and OSX commit MSCs to the osteogenic lineage. RUNX2 is a major transcription factor in early osteogenesis. RUNX2 levels peak at day 5-7 (Hassan et al., 2006; J. L. Yang et al., 2014). RUNX2 is detected in pre-osteoblasts and immature osteoblasts (Komori, 2010) and can regulate OCN, OPN as well as collagen type  $\alpha$ 1 (Col1A1) expression (Bruderer, Richards, Alini, & Stoddart, 2014). Via bone morphogenetic protein 2 (BMP2) stimulation, RUNX2 links to SMAD (Rahman et al., 2015) and non-SMAD pathways (such as the MAPK pathway (Rodriguez-Carballo et al., 2016)). OSX is another

transcription factor that contributes to later stage osteogenesis and bone matrix deposition (Nakashima et al., 2002). OSX levels peak approximately at day 9-14 (J. L. Yang et al., 2014; C. Zhang, 2010). OSX is typically regulated in dependence of RUNX2 (Matsubara et al., 2008). The BMP-2 pathway can also induce osterix expression via Distal-less homeobox 5 (Dlx5) and MSh homeobox 2 (Msx2) transcription factors (M. H. Lee, Kwon, Park, Wozney, & Ryoo, 2003; Matsubara et al., 2008).

Osteonectin (ON; or SPARC) is a bone-specific protein linked to collagen type I and hydroxyapatite. ON is highly upregulated at week 1 (Ardeshiryajimi, Soleimani, Hosseinkhani, Parivar, & Yaghmaei, 2014). ON promotes ECM assembly and collagen fibril formation (Rosset & Bradshaw, 2016). ON may initiate mineralization (Termine et al., 1981) and also support osteoblast differentiation and survival. Kessler et al showed increase of the Notch1 gene (transmembrane receptor regulating adipogenesis and osteogenesis) in ON-null osteoblasts. They also proved that Notch1 is regulated by cAMP, and proposed that increase of Notch1 relates to the decrease of coupling of G proteins to activate adenylyl cyclase (AC) displaying aging phenotypes such as osteopenia and increased adipose deposits (Kessler & Delany, 2007).

Alkaline phosphatase (ALP) promotes matrix maturation and reaches its peak at 2 weeks (Lian & Stein, 1992). ALP is an ectoenzyme found in liver, bone and kidney. ALP plays an important role in mineralization. Chondrocytes or osteoblasts bud matrix vesicles which contain intravesicular calcium (influxed through the annexin channel) and phosphate (influxed by type III Na/Pi cotransporter and PHOSPHO I) (Orimo, 2010). These ions interact with the phosphatase enzyme and in turn produce  $PO_4$  resulting in the deposition of  $CaPO_4$  (Anderson, 1995; Orimo, 2010).

In the late phase, OPN and OCN enhance mineralization and peak at week 3-4 (Lian & Stein, 1992; Lian et al., 1991). OPN is a nonspecific glycoprotein secreted by bone, kidney and the epithelial lining. OPN is expressed in osteoblasts and osteoclasts playing the role in bone remodeling by inhibiting the formation of hydroxyapatite (Mazzali et al., 2002). Furthermore, OPN also plays an important role by regulating immune cells during inflammation (Lund, Giachelli, & Scatena, 2009). OCN is an osteoblast specific protein. OCN is defined as a hormone which can control insulin secretion and is thus related to glucose metabolism (J. Wei & Karsenty, 2015). Absence of OCN

increases bone formation in *in vivo* study (Ducy et al., 1996). OCN can bind to hydroxyapatite as well as recruit osteoblasts and osteoclasts for bone resorption and mineralization (Hoang, Sicheri, Howard, & Yang, 2003). OCN is found in mature osteoblasts while OPN is expressed in immature osteoblasts (Komori, 2010). Transitionally, OCN can be found in immature osteoblasts expressing RUNX2 and OPN (Komori, 2010).

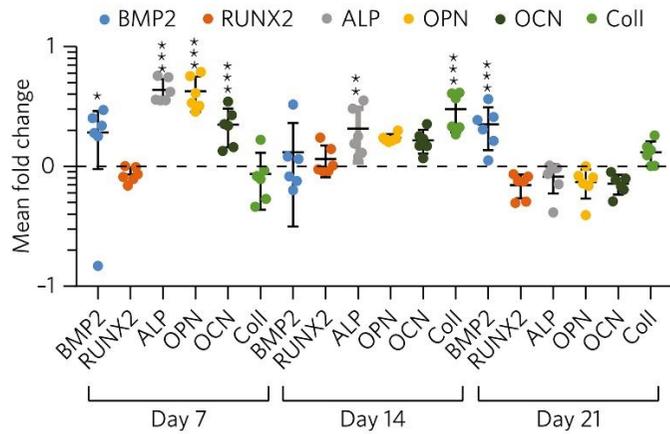
#### 4.1.3 Potential mechanism from NS to drive osteogenesis.

To investigate the related pathways of NS and increased/high amplitude NS, understanding the related pathways in NS is important. In this section, the previous NS-induced 3D osteogenesis results (Tsimbouri P.M., 2017) are focussed on to give hints the potential areas to be investigated when the amplitude is increased. Calcium signaling, MAPK and wnt are also reviewed.

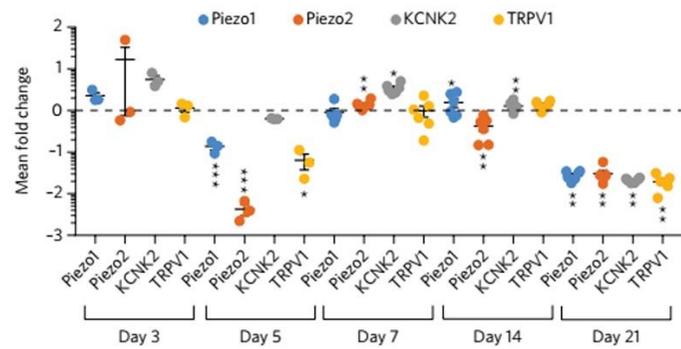
##### 4.1.3.1 NS induced 3D osteogenesis

Tsimbouri et al proposed that the success of NS induced 3D osteogenesis was mainly through ion channel activation. At the gene level, NS promoted BMP2, ALP, OPN and OCN in the early phase (**Figure 4.2A**). In the early phase (day 5-7, **Figure 4.2B**), NS activated ions channels such as piezo1/2 (tension) and TRPV1 (temperature, pain) (Tsimbouri P.M., 2017). Data suggested that TRPV1 is possibly indirectly activated by a cytoskeleton dependent pathway as TRPV1 was effected by ROCK and myosin inhibition (Tsimbouri P.M., 2017). However, ROCK and myosin did not affect osteogenesis (**Figure 4.2C**) (Tsimbouri P.M., 2017). Next, the related pathways were investigated at the protein level, and, again, no evidence of cytoskeletal tension (FAK, myosin, ERK1/2) and BMP2 (SMAD1/5) pathways involvement was found for 3D osteogenesis; this is different to 2D NS osteogenesis where tension has been implicated (Nikukar et al., 2013). However, it is known that the ion channel TRPV1 can act via protein kinase C (PKC) to effect  $\beta$ -catenin (canonical Wnt) (Tsimbouri P.M., 2017). It was shown that inhibition of TRPV1 (and PKC) reduced active  $\beta$ -catenin and reduced osteogenesis in 3D NS (Tsimbouri P.M., 2017) (**Figure 4.3 D-E**).

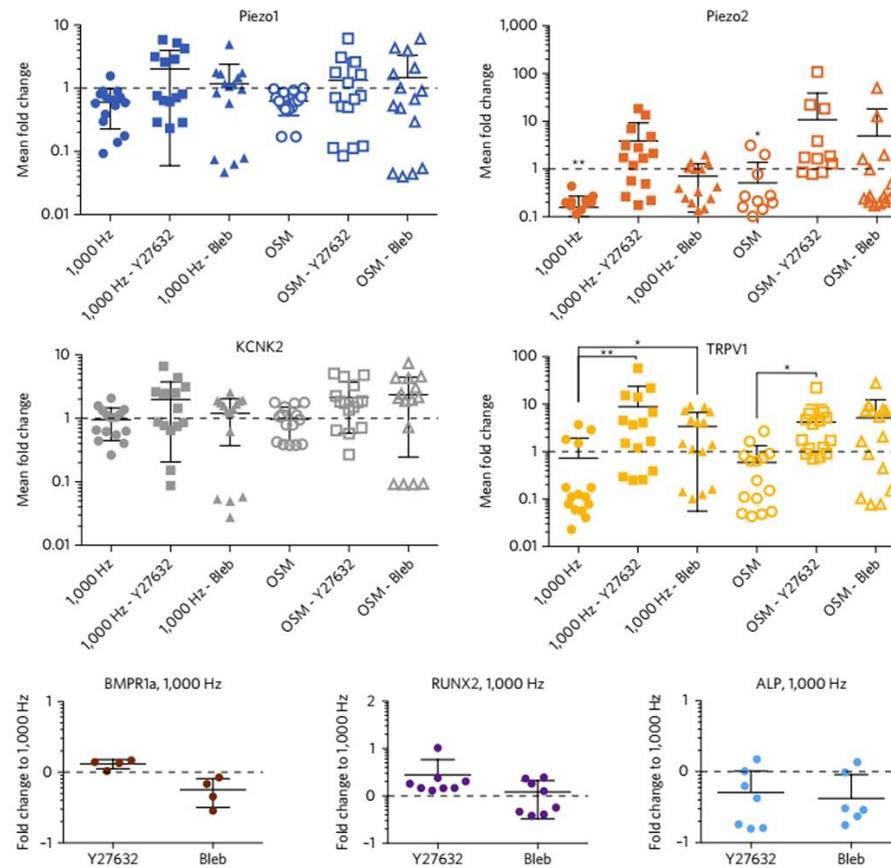
**A. qRT-PCR; Phenotype**



**B. qRT-PCR; Ion channels**

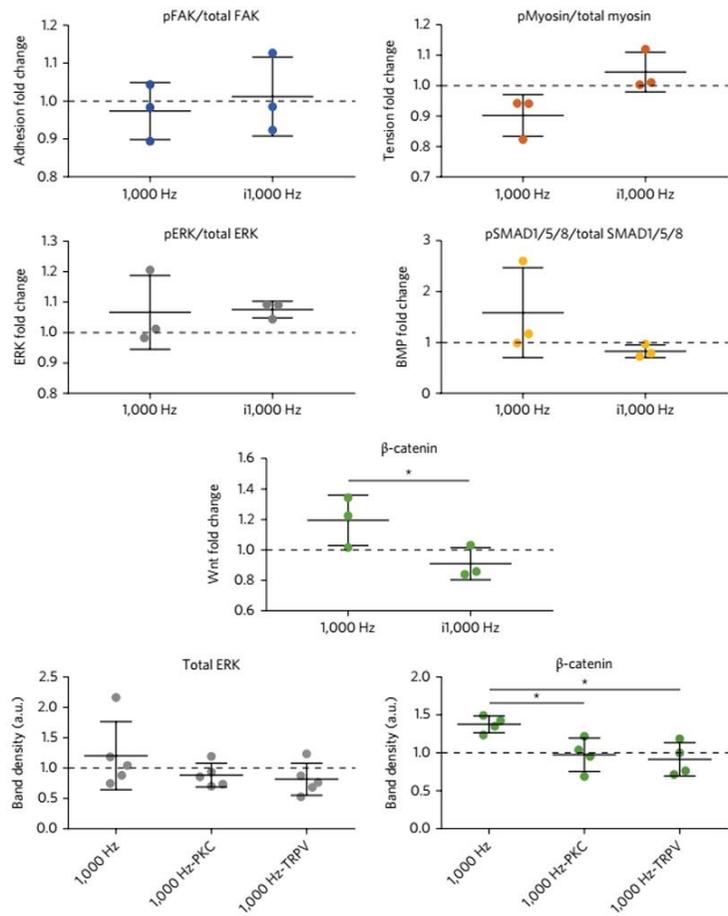


**C. qRT-PCR; Ion channels with ROCK(Y27632) & Myosin (Bleb) inhibition**

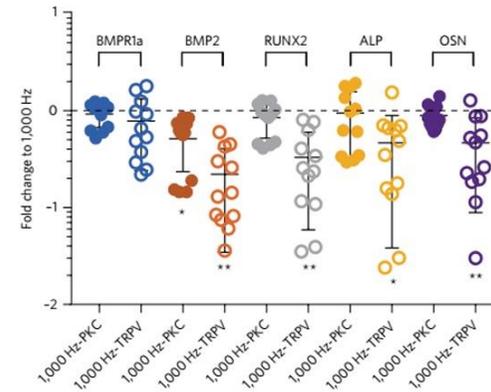


**Figure 4.2 Previous study of NS induced 3D osteogenesis**

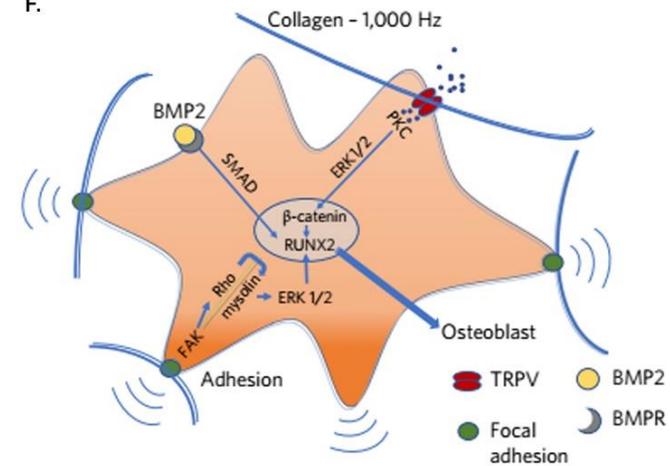
**D. Western blot; Related pathways with PKC and PKC & TRPV1 inhibition**



**E. qRT-PCR; Phenotypes with PKC & TRPV1 inhibition**



**F.**



**Figure 4.3 Previous study of NS induced 3D osteogenesis (continue)**

### Figure 4.2-4.3 Previous study of NS induced 3D osteogenesis (continue)

A) qRT-PCR temporal gene study showed osteogenic gene upregulation (BMP2, ALP, OPN, OCN) at day 7. B) At day 5-7, piezo1/2 and TRPV1 respond to NS. C) TRPV1 links to ROCK and myosin pathways with no effect on osteogenesis (BMPR1a, RUNX2 and ALP). D) NS activated  $\beta$ -catenin through PKC and TRPV1 showing by the decrease of  $\beta$ -catenin after PKC and TRPV1 inhibition. E) TRPV1 affected on osteogenesis (showing in RUNX2, ALP and OSX) F) Diagram showed the pathways of NS induced osteogenesis (With permission of Tsimbouri et al., 2017 (Tsimbouri P.M., 2017))

#### 4.1.3.2 Calcium homeostasis and signaling

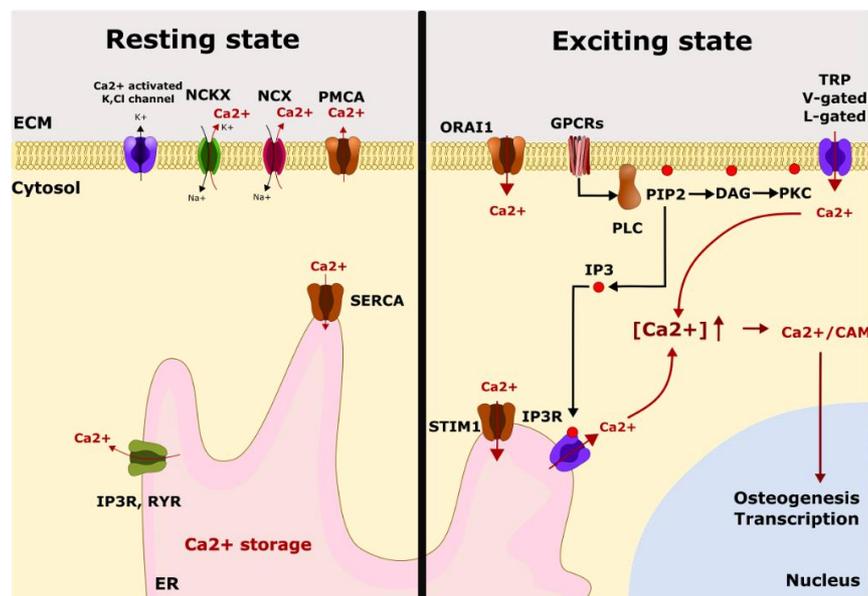
Calcium ions are essential for many cellular activities (Stojilkovic, Tomić, Koshimizu, & Van Goor, 2000). Intracellular calcium is a key signal in modulating proliferation, differentiation or apoptosis (Humeau et al., 2017). Intracellular calcium concentration  $[Ca^{2+}]_i$  is maintained within physiological levels for normal cellular functions. All sources of calcium, including  $[Ca^{2+}]_i$ , extracellular calcium concentration  $[Ca^{2+}]_o$  and calcium ions in endoplasmic reticulum ( $[Ca^{2+}]_e$ ) (Carafoli, 2002; Humeau et al., 2017; Nowycky & Thomas, 2002), are well-regulated through ion channels/transporters on the cell membrane.

In the resting stage,  $[Ca^{2+}]_i$  (concentration~100 nM) is lower than  $[Ca^{2+}]_o$  (concentration~2 mM).  $Na^+/Ca^{2+}$  exchangers (NCX) and  $Na^+/Ca^{2+}-K^+$  exchangers (NCKX) play roles in maintaining  $Ca^{2+}$  at the cellular membrane. At endoplasmic reticulum (ER) (such as myocyte and cardiocyte), where is the cellular calcium storage, sarco/endoplasmic reticular  $Ca^{2+}$ -ATPase (SERCA) pumps  $Ca^{2+}$  into the ER while plasma membrane  $Ca^{2+}$ ATPase (PMCA) control the outflow (Clapham, 2007). However, in bone, osteoblast may use pannexin 3 (gap junction which locates at ER) to regulate intracellular calcium ions released from ER (Masaki Ishikawa et al., 2011; M. Ishikawa & Yamada, 2017).

In the excited state, which requires an increase of  $[Ca^{2+}]_i$ , calcium is initially released from the ER via ryanodine receptors (RyR). On cellular membrane, the stimuli such as hormones, neurotransmitters, etc activate G protein coupled receptors (GPCRs) and in turn activate phospholipase C (PLC) to hydrolyse phosphatidylinositol 4,5-

bisphosphate (PIP<sub>2</sub>) to diacylglycerol (DAG) and inositol-1,4,5-triphosphate (IP<sub>3</sub>). IP<sub>3</sub> binds to IP<sub>3</sub> receptor at ER resulting release Ca<sup>2+</sup> into cytosol (Humeau et al., 2017). Ca<sup>2+</sup> and DAG activated PKC (K.-P. Huang, 1989). PKC subsequently activates voltage-gated (Raifman et al., 2017) (e.g. L-VGCCs), ligand-gated channels (Breitinger et al., 2018) and TRP channels (Bhave et al., 2003)) to allow influx of [Ca<sup>2+</sup>]<sub>o</sub>. [Ca<sup>2+</sup>]<sub>i</sub> interacts with proteins in the cytoplasm in particular calmodulin and forms calcium-calmodulin complexes. In turn, these complexes activate many enzymes including calmodulin-dependent protein kinase (CaMKs) (Majd Zayzafoon, 2006). Ca<sup>2+</sup>-Calmodulin dependent kinase II (CaMKII) plays a role in osteoblast differentiation (Y. H. Choi, Choi, Oh, & Lee, 2013; Majd Zayzafoon, 2006). CaMKII promotes phosphorylation of ERK via Ras-Raf-1 (Illario et al., 2003) and enhances osterix expression (Y. H. Choi et al., 2013) (Figure 4.4).

Furthermore, calcium signaling between cells through gap junctions is also important for cell function. In MSCs, pannexin 3, intercellular gap junction, activates intracellular calcium driving osteogenesis (M. Ishikawa & Yamada, 2017). Thus, understanding the calcium homeostasis among intra- and extracellular- and ER can help identifying the NS activated pathways.



**Figure 4.4 Calcium homeostasis**

In the resting state, [Ca<sup>2+</sup>]<sub>i</sub> is maintained at low level by ion channels on the cellular membrane (such as Na<sup>+</sup>/Ca<sup>2+</sup> exchangers; NCX, Na<sup>+</sup>/Ca<sup>2+</sup>-K<sup>+</sup> exchanger; NCKX and plasma

membrane  $\text{Ca}^{2+}$ -ATPase PMCA) and endoplasmic reticulum (e.g. sarcoendoplasmic reticular  $\text{Ca}^{2+}$ -ATPase; SERCA). In the excited state, stimuli or agonists activate G-protein-coupled receptors (GPCRs; sensing to pain, itch and inflammation) (Geppetti, Veldhuis, Lieu, & Bunnett, 2015), which in turn, activate phospholipases (e.g.  $\text{PLC}\beta$ , PLA2). PLC cleaves PIP2 into diacylglycerol (DAG) and 1,4,5-inositol triphosphate (IP3). IP3 diffuses in the cytosol and binds to IP3 receptor on the ER, subsequently, allowing calcium ion release into the cytoplasm and resulting in the increase of  $[\text{Ca}^{2+}]_i$  (Clapham, 2007; Geppetti et al., 2015).  $[\text{Ca}^{2+}]_i$  activate kinases (e.g. PKC, tyrosine kinases). DAG binds to intracellular calcium and activates PKC. PKC then phosphorylates calcium ion channels e.g. TRPV1, 4 and transient receptor potential ankyrin1 (TRPA1) (Geppetti et al., 2015).

#### 4.1.3.3 Mechanical stimulation induced calcium signaling.

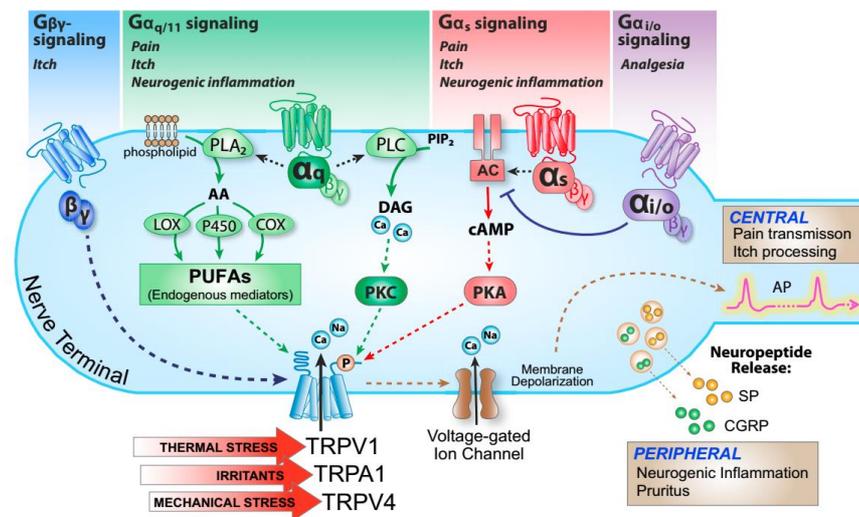
From the literature, mechanical stimulation can increase intracellular calcium (Demer, Wortham, Dirksen, & Sanderson, 1993; Sharma et al., 1995). However, some literature reported that mechanical stimulation alone may not increase the influx of extracellular calcium due to the rigorous control of ions transportation through ion channels (Chabbert, Geleoc, Lehouelleur, & Sans, 1994). Theoretically, mechanical stimulation may affect ion channels directly (e.g. piezos) or indirectly through changes in cytoskeletal tension. For example, in airway smooth muscle, integrin formation activates myosin light chain (both kinase and phosphatase) phosphorylation and in turn increases intracellular calcium (Tran & Teoh, 2014). If NS was considered as a mechanical stimuli driving osteogenesis through calcium signaling activation, mechanosensitive ion channels (on cellular membrane) would be the target to study.

Calcium ion channels are important sites controlling intracellular calcium by allowing extracellular calcium ion influx as well as calcium storing and releasing from ER (Clapham, 2007; Monteith, Prevarskaya, & Roberts-Thomson, 2017). There are many types of calcium ion channels on cellular membrane such as stretching ion channels, voltage-gate channels, etc. Therefore, understanding calcium ion channels functions is crucial for regulating intracellular calcium concentration. Calcium ion channels which potentially link to osteogenesis are summarized in **Table 4.1**.

If NS is considered as a “force” (stretching or tethering), two hypotheses can be raised. Firstly, ion channels may be directly controlled by NS. The NS force possibly opens the channels by itself through applying force to the lipid membrane (Martinac & Poole, 2018) e.g. piezo1/2 channels. Secondly, NS may be indirectly controlled via cytoskeleton (Martinac & Poole, 2018) e.g. TRPV channels. The change of cytoskeletal tension, in turn, may increase the stretching force to the ion channels. If NS was considered as other form such as pain, itch or heat, then the NS may modulate through the TRP-GPCR axis. GPCRs can activate TRPs via phospholipases (PLC/PLA-PIP2-TRPagonist) or kinases (PKC/PKA-pTRP) (Figure 4.5).

**Table 4.1 Current evidences of calcium ions related to osteogenesis**

Calcium ion channels types	Examples of channels	Stimuli	References
Voltage sensitive calcium channels; VSCC	L-types, Cav 1.2	Depolarized membrane potential	(C. Cao et al., 2017; J. Li, Duncan, Burr, & Turner, 2002; Y. Z. Tan et al., 2019)
TRP channels	TRPP (polycystin1,2)	pH, voltage, phosphorylation	(Dalagiorgou, Basdra, & Papavassiliou, 2010; Dalagiorgou et al.,
	TRPV1	Nanovibration	(Tsimbouri P.M., 2017)
	TRPV4	Oscillatory fluid shear (primary cilia)	(Michele A. Corrigan et al., 2018; H.-p. Lee, Stowers, & Chaudhuri, 2019)
	TRPM7	Membrane tension	(Xiao et al., 2015)
Piezos	Piezo1	Hydrostatic pressure	(A. Sugimoto et al., 2017)



**Figure 4.5 G-protein couples receptor and TRP receptors**

GPCRs activate phospholipases or kinases. For phospholipases, GPCRs activate PLA<sub>2</sub>-AA-PUFAs while PLC links to PIP<sub>3</sub>-DAG-PKC. For kinases, GPCRs stimulate AC-cAMP-PKA. (AA; arachidonic acid, AC; adenylate cyclase, cAMP; adenyl cyclase pathway, PUFA; polyunsaturated fatty acid) (With permission of Geppetti et al., 2015 (Geppetti et al., 2015)).

In the next section, mechanosensitive ion channels and non-mechanosensitive channels are reviewed.

#### 4.1.3.4 Calcium ion channels

##### 4.1.3.4.1 TRP channels

Transient receptor potential (TRP) is a calcium and sodium ions channel, sensitive to temperature and pain (Caterina et al., 1997). TRP consists of 7 subfamilies of ion channels including canonical (TRPC), melastatin (TRPM), vanilloid (TRPV), polycystin (TRPP), Ankyrin (TRPA), mucolipin (TRPML) and (NomPC-like (TRPN). Focusing only on TRPV, TRPV consists of 6 members (TRPV1-6) (Table 4.2). TRPV1-4 are nociceptors. TRPV1 is highly expressed in normal cells (but reduced in cancer cells). TRPs can be regulated by protein kinase A, C and G (Ramsey, Delling, & Clapham, 2006) e.g. PKC affects sensitization of TRPV1 (Premkumar & Ahern, 2000) and TRPV4 (Peng et al., 2010). TRP is not a mechanically sensitive channel. However, stretching-induced actin polymerization can enhance calcium influx through the channels found in TRPV2 and 4 (S. Ito et al., 2010). Considering Tsimbouri et al's paper (Tsimbouri P.M., 2017), the result

showed that NS involved TRPV1 and TRPV1 did not link to ROCK nor myosin. Thus, it suggested that NS induced TRPV1 is possibly activated through GPCRs (this was not investigated in the paper).

#### 4.1.3.4.2 TRPA1 channel

TRPA1 is member of TRP channels sensing irritants causing pain (García-Añoveros & Nagata, 2007). TRPA1 can be activated by inflammatory cytokines such as IL1 $\beta$ , IL6, Nitric oxide (NO), H<sub>2</sub>O<sub>2</sub>, prostaglandin and ROS through cysteine residues at the amino N terminus of TRPA1 (Hinman, Chuang, Bautista, & Julius, 2006; Nummenmaa et al., 2016; N. Takahashi et al., 2008; C. Xu, Luo, He, Montell, & Perrimon, 2017). Currently, there is no evidence showing that mechanical force directly activates TRPA1 in MSCs (García-Añoveros & Nagata, 2007). However, in hair cells, TRPA1 is considered as one of the mechanosensitive transduction channels (Corey et al., 2004).

**Table 4.2 TRPVs family; types of channels**

TRP family	Types	Mechanical stimulation /Functions	References
TRPV1	Thermosensitive	Temperature and pH	(Huynh et al., 2014)
TRPV2	Thermosensitive	Heat, innate immunity	(Huynh et al., 2014; Link et al., 2010)
TRPV3	Thermosensitive	Temperature, sense to Ca <sup>2+</sup> /CaM	(Hasan & Zhang, 2018; Huynh et al., 2014)
TRPV4	Thermosensitive	Oscillatory fluid shear Mechanical stimulation	(M. A. Corrigan et al., 2018)
TRPV5	Epithelial calcium homeostasis	Calcium reabsorption in kidney	(Hughes et al., 2018; Huynh et al., 2014)
TRPV6	Epithelial calcium homeostasis	Parathyroid hormones and Vitamin D3	(Hasan & Zhang, 2018; Huynh et al., 2014)

#### **4.1.3.4.3 Piezo1 and 2 ion channels.**

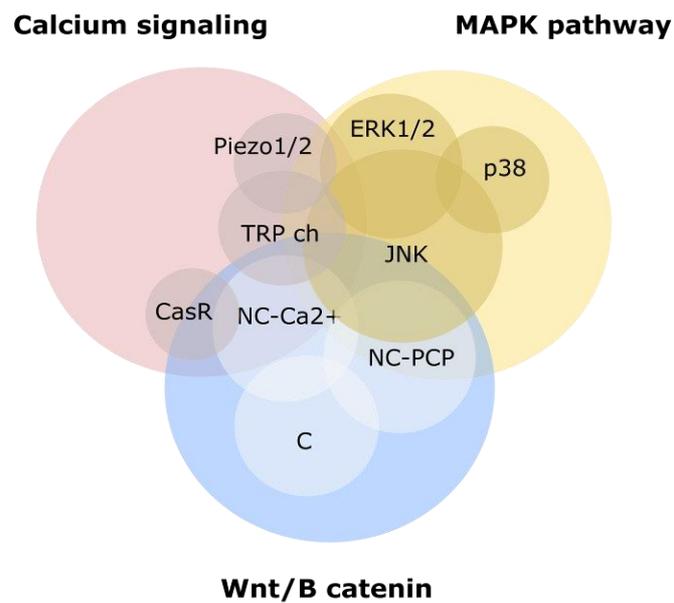
Piezo1 and 2 are more sensitive to stress than TRPV1 (Bavi et al., 2017). Piezo1 responded to stretching, cell indentation, shear fluid, stiffness, etc (Nourse & Pathak, 2017). While Piezo2, found at nerve endings, was sensitive to light touch and sensed rapidly-adapting mechanical activated stimulation (Coste et al., 2010). Piezo1 is sensitive to stretch and interacts with the cytoskeleton which allows calcium influx into cytoplasm (Miyamoto et al., 2014; Nourse & Pathak, 2017). Increase of intracellular calcium potentially, in turn, modulates or coactivates Yes-associated protein (YAP) nuclear translocation (Franklin, Ghosh, Shi, & Liphardt, 2019). Accumulation of YAP can drive cell differentiation (Dobrokhotov, Samsonov, Sokabe, & Hirata, 2018; Elosegui-Artola et al., 2017; Y. Sun, Shao, Xue, & Fu, 2016). Mechanical stimulation through the Piezo1 channel can induce osteogenesis in MSCs. For example, hydrostatic pressure stimulation modulated piezo1 expression and enhanced BMP2 production driving osteoblast differentiation (A. Sugimoto et al., 2017).

#### **4.1.3.4.4 Calcium sensing receptor (CaSR)**

CaSR is a G protein-coupled receptor responding to calcium regulatory hormone (e.g. parathyroid hormone) to maintain calcium homeostasis (extracellular calcium) (Theman & Collins, 2009). CaSR is sensitive to extracellular calcium, however, the mechanism of CaSR sensing extracellular calcium is unknown (Dvorak et al., 2004). CaSR can be activated through GPCRs-PLC-DAG-PKC (Rodland, 2003); it is not a mechanosensitive channel. However, if NS can modulate CaSR sensing to extracellular calcium, it might regulate intracellular calcium concentration.

#### **4.1.3.5 Interplay among calcium signaling, MAPK and $\beta$ -catenin pathways**

Calcium signaling relays signals from various first messengers and also modulates abundant intracellular pathways. Based on our current evidence of NS induced 3D osteogenesis (Tsimbouri P.M., 2017), interaction between calcium signaling-ERK1/2, calcium signaling- $\beta$ -catenin and  $\beta$ -catenin-ERK1/2 pathways were discussed in order to predict the possible route of NS effect (**Figure 4.6**).



**Figure 4.6 Interaction among calcium signaling, MAPK and Wnt/ $\beta$ -catenin pathway**

The diagram showing the interaction among calcium signaling, MAPK and  $\beta$ -catenin. Considering calcium ion channels, CaSR and TRP channels involve PKC, thus, link to NC/Ca<sup>2+</sup>. TRP-Piezo1/2 can be tethered/stretched by cytoskeletal tension changes thus MAPK is co-activated. In the MAPK pathway, JNK is involved in both NC/Ca<sup>2+</sup> and NC-PCP. All canonical and non-canonical-Wnt signaling can crosstalk (Y. Zhang, Pizzute, & Pei, 2014) (NC; Noncanonical, C; Canonical, PCP; planar-cell polarity).

#### 4.1.3.5.1 Calcium signaling and ERK1/2 pathway

Calcium signaling can mediate various cellular pathways including the ERK1/2 (member of MAPK) cascade (Chuderland & Seger, 2008). Calcium signaling can be coactivated by hormones, transcription factors through many receptors e.g. G protein receptor (G<sub>q/11</sub>-coupled receptors) (Gudermann, Grosse, & Schultz, 2000). Calcium signaling interacts with proteins of the ERK1/2 pathways e.g. Ras proteins (Chuderland & Seger, 2008). Calcium is also involved in cell cycle regulation via the ERK1/2 dependent NF $\kappa$ B pathway (Sée, Rajala, Spiller, & White, 2004).

#### **4.1.3.5.2 Calcium signaling and $\beta$ -catenin pathway**

Wnt pathways play an important role in cell growth, differentiation and apoptosis (Krishnan et al., 2006). Wnt pathways are important in driving MSCs into osteogenesis (J. H. Kim et al., 2013; G. Liu et al., 2009). Wnt also affects BMP2 induced osteogenesis (Y. Chen et al., 2007). Wnt/ $\beta$ -catenin consists of three pathways; canonical ( $\beta$ -catenin related regulation of gene transcription) and 2 non-canonical routes. These are non  $\beta$ -catenin related and Wnt planar cell polarity (PCP) regulating cell polarity, cytoskeleton and Wnt/calcium which links to intracellular calcium signaling (Y. Zhang et al., 2014). Canonical Wnt can sense mechanical stimulation by coactivation of low density lipoprotein-related receptor-5 and -6 (LRP5, LRP6) (K. S. Kang & Robling, 2015). It is known that mechanical stimulation can, via Wnt5a, induced the Wnt canonical pathway (H.-D. Fu et al., 2016; Gu et al., 2018). For Tsimbouri et al, (Figure 4.1) (Tsimbouri P.M., 2017), Wnt canonical pathway ( $\beta$ -catenin related) thus was hypothesized to be modulated by the NS effect.

#### **4.1.3.5.3 Canonical $\beta$ -catenin and ERK1/2 crosstalk**

Wnt canonical ( $\beta$ -catenin related) pathway affects transcription and interacts with MAPK. Focusing only ERK1/2, Wnt itself can activate ERK1/2. For example, Wnt3a activates ERK1/2 through Raf1-MEK-ERK cascade (M.-S. Yun, Kim, Jeon, Lee, & Choi, 2005; Zeller, Hammer, Kirschnick, & Braeuning, 2013). On the other hand, ERK1/2 also affects Wnt pathway. MAPK (ERK1/2, JNK, p38) can phosphorylate PPPS/TP clusters of LRP6 which promote canonical Wnt expression (Červenka et al., 2011).

#### **4.1.3.6 NS and other possible pathways driving osteogenesis**

##### **4.1.3.6.1 BMP2-SMAD1/5 pathways**

Mechanical stimulation can enhance BMP2 production. BMP2 promotes RUNX2 via Smad1/5 (Javed et al., 2008), osterix via Msx2-RUNX2 (Matsubara et al., 2008), OCN via RUNX2 mediated Atf6 (Jang et al., 2012), OPN via ERK1/2 (X. Yang et al., 2009) and also ALP expression (L. Wang et al., 2010). In previous publication, Tsimbouri et al illustrated the upregulation of BMP2 during 3 week NS (Tsimbouri P.M., 2017). Thus, it is interesting that NS possibly enhances BMP2 secretion driving osteogenic phenotypes.

#### **4.1.3.6.2 Adhesion-cytoskeletal tension**

It has been shown that cytoskeletal tension regulation promotes osteogenesis (McBeath et al., 2004). NS enhances 2D osteogenesis linking to cytoskeletal tension regulation via the Rho-ROCK pathway (Nikukar et al., 2013). However, it seems less dependent in 3D culture (Tsimbouri P.M., 2017). Investigating the roles of cytoskeleton in NS induced 3D osteogenesis (starting at ECM synthesis, focal adhesion formation and the ROCK pathway) could help to clarify the NS mechanism. Most osteogenic induced signaling, such as TGF $\beta$  (Creely, DiMari, Howe, & Haralson, 1992; Sato, 2006) and BMP2 (Takuwa, Ohse, Wang, Wozney, & Yamashita, 1991) pathways, enhance collagen synthesis. Integrins form focal adhesion complexes and transfer mechanical signal through actin into the nucleus. RhoA-ROCK activation crosstalks with ERK1/2 driving subsequent RUNX2 phosphorylation (Dalby et al., 2014; Khatiwala et al., 2009). Thus, if NS enhances Col1A and integrins production as well as involves ROCK pathway, it suggests that NS potentially regulates cytoskeletal tension for 3D osteogenesis.

### **4.2 Aims and objectives**

1. To identify the NS stimulating amplitude which can induce 3D osteogenesis in 1.8 mg/ml collagen hydrogel.
2. To investigate the effect of high amplitude stimulation (90 nm, N90) in mechanical and biological aspects.
3. To further study the biological pathways activating by high amplitude NS (N90).

### **4.3 Methodology and experimental design**

#### **4.3.1 Interferometry**

The 1.8 mg/ml collagen type I hydrogels (2.5 ml) with 1.5 ml media were prepared 2 days before the measurement. T5000 model was used to study the relationship between frequency-voltage and voltage-

surface displacement amplitude. The measurement technique was explained in Chapter 2, section 2.4.

### **4.3.2 Alamar Blue assay**

Stro1 selected MSCs seeded in 1.8 mg/ml collagen hydrogels with  $4 \times 10^4$  cells/ml density were prepared. NS was stimulated with 30 nm and 90 nm for 2 weeks. The technique and calculation of percentage of alamar blue reduction was shown in Chapter 2, section 2.6

### **4.3.3 qRT-PCR and ROCK inhibition study**

Stro1 selected MSCs seeded collagen hydrogels with  $4 \times 10^4$  cells/ml density were prepared and stimulated with NS. The RNA purification using Trizol and chloroform, RNA isolation, cDNA synthesis and qRT-PCR techniques were explained in chapter 2, section 2.8. To study the ROCK pathway, 10  $\mu$ M of Y-27632 (Tocris) in media was prepared. Changing media with inhibitor was started on day 2 and then every 2 days. Details were shown in chapter 2, section 2.12.

### **4.3.4 Western blot**

To study protein expression,  $4 \times 10^4$  cells/ml of Stro1 selected MSC in 1.8 mg/ml collagen hydrogel were prepared and NS for 7 days. After culture for 7 days, all samples were digested. Protein extraction and western blot technique were shown in Chapter 2, section 2.9.

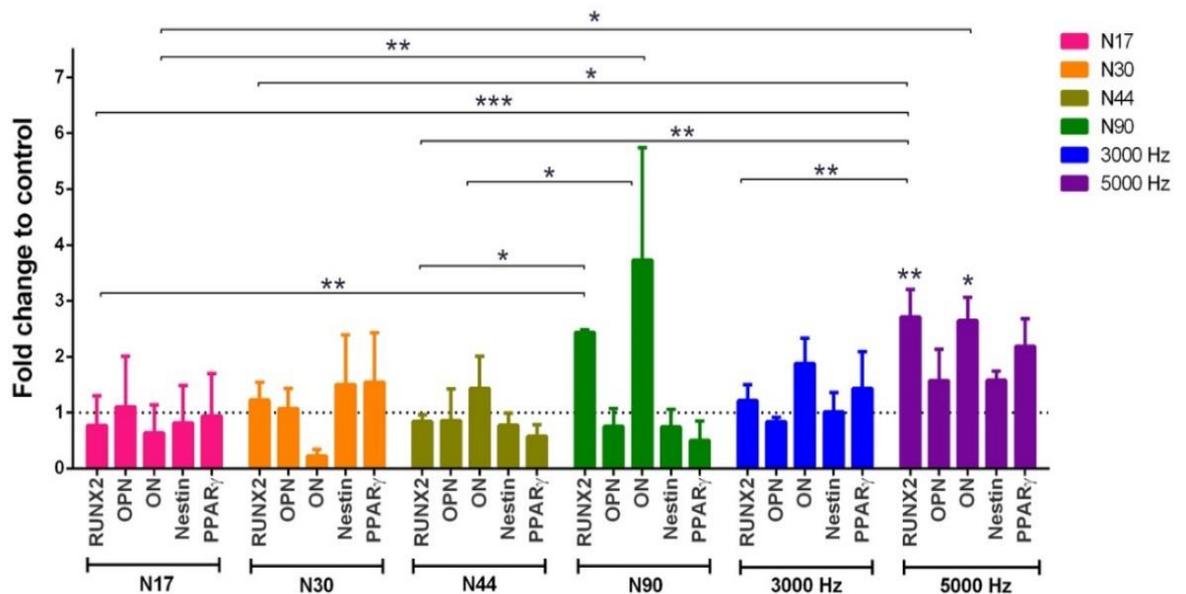
### **4.3.5 Protein antibody microarrays**

The  $4 \times 10^4$  cells/ml of Stro1 selected MSC in 1.8 mg/ml collagen hydrogel were prepared and stimulated for 7 and 14 days. After the samples were digested with collagenase, the total protein was quantified using micro BCA kit (Pierce, ThermoFisher). The technique was explained in chapter 2, section 2.13.

## 4.4 Results

### 4.4.1 Frequency and amplitude selection

To study the effect of amplitude and frequency on osteogenesis, hMSCs seeded in 1.8 mg/ml collagen hydrogels were stimulated with various frequencies and amplitudes of NS. At 1000 Hz and (19.69 Vpp), measured amplitudes of all 24 wells (both 12 well plates) were grouped as N17 (N = nanodisplacement, mean 17.37 nm: SD 8.21 nm), N30 (mean 30.12 nm, SD 6.58 nm), N44 (mean 43.08 nm, SD 3.12nm), and N90 (mean 90 nm, SD 16.21). All hydrogels were then stimulated for 2 weeks and studied for phenotypical changes by qRT-PCR. After 2 weeks stimulation (**Figure 4.7**), qRT-PCR showed some evidence of RUNX2 and osteonectin upregulation with a trend of PPAR $\gamma$  and nestin suppression in N90 while other tested frequencies and amplitudes showed more generalized gene upregulation patterns. Therefore, N90 was selected for further studies.



**Figure 4.7 The selection of NS amplitude driving for 3D osteogenesis by qRT-PCR**

RT-PCR after 2 weeks stimulation. Gels were exposed to 1000 Hz (average 17, 30, 44 and 90 nm), 3000 Hz and 5000 Hz (stimulated with 19.69 Vpp). Upregulation of RUNX2 and ON, as well as PPAR $\gamma$  and nestin suppression was seen in N90 group

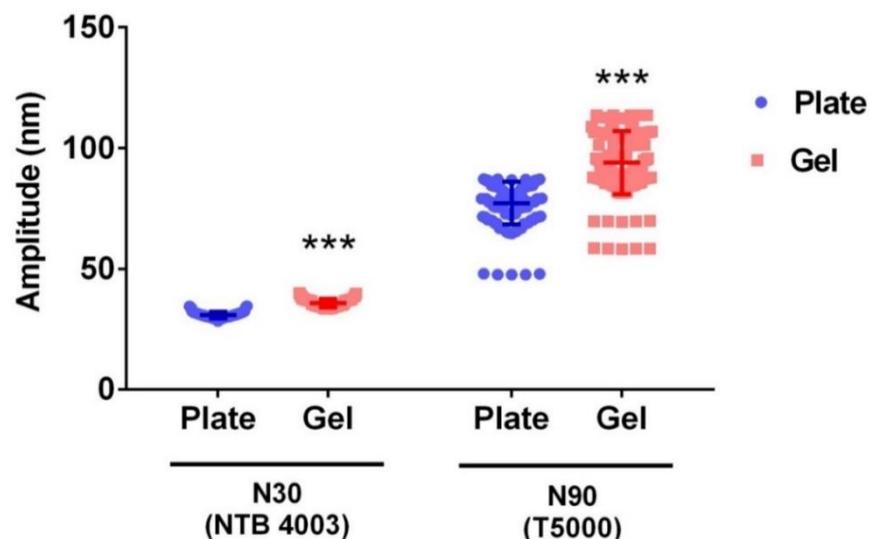
(mean $\pm$ SD, n=2-4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , Two-way ANOVA, Tukey's post hoc test).

#### 4.4.2 Mechanical response of hydrogel to nanovibrational stimulation

In order to study the effect of high amplitude stimulation (N90), the efficacy of bioreactors generating amplitude required validation, including the precision of amplitude (section 4.4.2.1), the reliability of amplitude control by voltage (section 4.4.2.2) and investigating the resonant frequency of the culture plate system (section 4.4.2.3).

##### 4.4.2.1 High amplitude (N90) bioreactor validation

To examine the reliability of the stimulating amplitude generated by the bioreactor, the standard (NTB 4003) 30 nm amplitude bioreactor and the N90 (T5000) 90 nm amplitude bioreactor were used for validation. Displacement amplitudes were measured by the interferometer at the centre area on the surface of wells and gels. The results showed that amplitude of gel was significantly higher than that of the well plate, but within expected ranges. The mean value of gel displacement amplitude of N30 was 35.83 nm (SD 1.77 nm) while mean value of amplitude of N90 was 93.94 nm (SD 13.06 nm) (**Figure 4.8**).



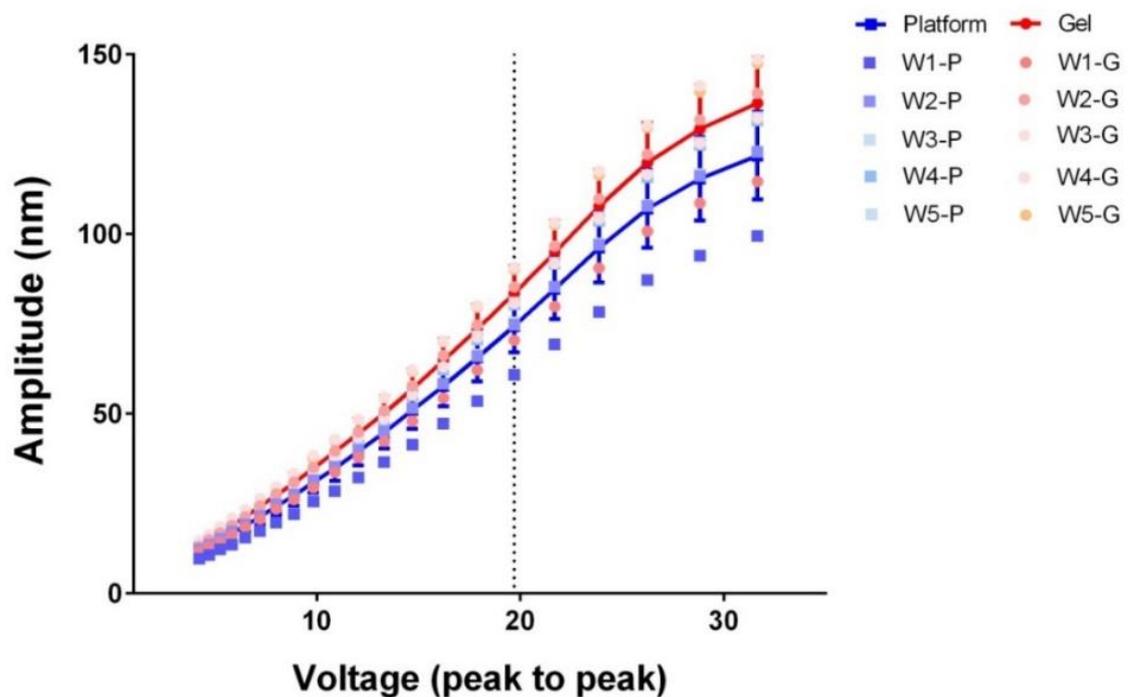
**Figure 4.8 NS-amplitude validation of NS bioreactor**

Comparing N30 and N90 on the NTB 4003 vs T5000 bioreactors. Both bioreactors generated reliable amplitudes. The

displacement amplitude of the hydrogel was significantly increased compared to the well plate in both N30 and N90 (mean $\pm$ SD, n=24, \* P $\leq$  0.05, \*\* P $\leq$  0.01, \*\*\* P $\leq$  0.001 Mann-Whitney test).

#### 4.4.2.2 Effect of increasing amplitude and hydrogel displacement

To validate the stimulating voltage for high amplitude stimulation, 1.8 mg/ml hydrogels were prepared. The surface displacement of 5 wells (2D) and 5 hydrogels (3D) were measured at the same point by interferometer using the N90, T5000 bioreactor. The graph of surface displacement and stimulating voltage was plotted. The displayed graph of AC signal pattern on oscilloscope was observed during increasing the stimulating voltage. Considering the AC signaling pattern shown by the oscilloscope, distortion of the output signal was noted at 31.64 Vpp indicating the saturation point of amplitude by the bioreactor system. Thus, N90 (stimulation by using 19.69 Vpp) can be used as high amplitude stimulation due to having a normal AC signal pattern (Vpp was less than 31.64 Vpp and AC signal pattern is normal). In **Figure 4.9**, the relationship between stimulating voltage and surface amplitude is a linear pattern upto 30 Vpp. Therefore, the bioreactor can generate precise- and reliable-high amplitudes (at 19.69 Vpp).

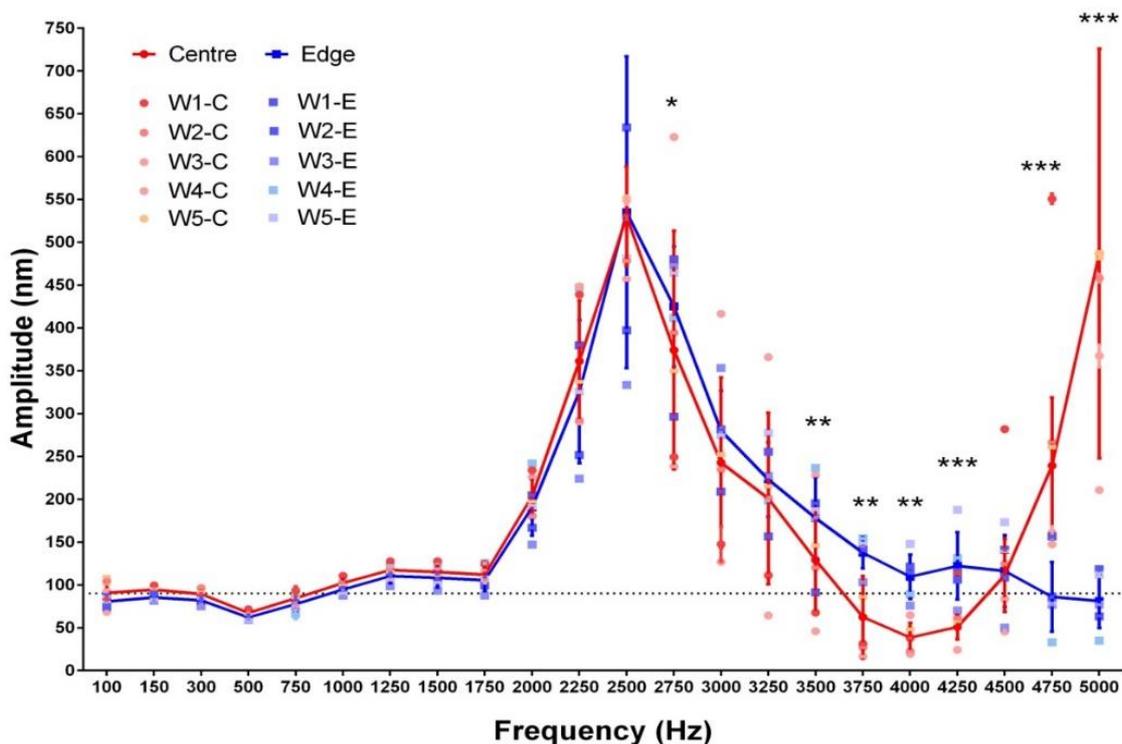


**Figure 4.9** The effect of increasing stimulating voltage on NS amplitude

The linear correlation of voltage-amplitude was found upto 31.64 Vpp. Thus, N90 (at 19.69 Vpp) is reliable and precise (mean $\pm$ SD, n=5, W; well, P; platform, G; hydrogel).

#### 4.4.2.3 Resonance frequency and hydrogel-12 well plate system on nanvibrational bioreactor

The relationship between frequency and amplitude was measured on the surface of 1.8 mg/ml hydrogels at the centre and edge points in 12 well plates. The resonant frequency ranged approximately 2,250-2,750 Hz. Thus, it confirmed that there was no resonance effect during the stimulation at 1000 Hz. There was no significant difference of amplitude between the centre and edge of the gels at 1000 Hz (Figure 4.10).



**Figure 4.10 Relationship between frequency and amplitude in 12 well plate**

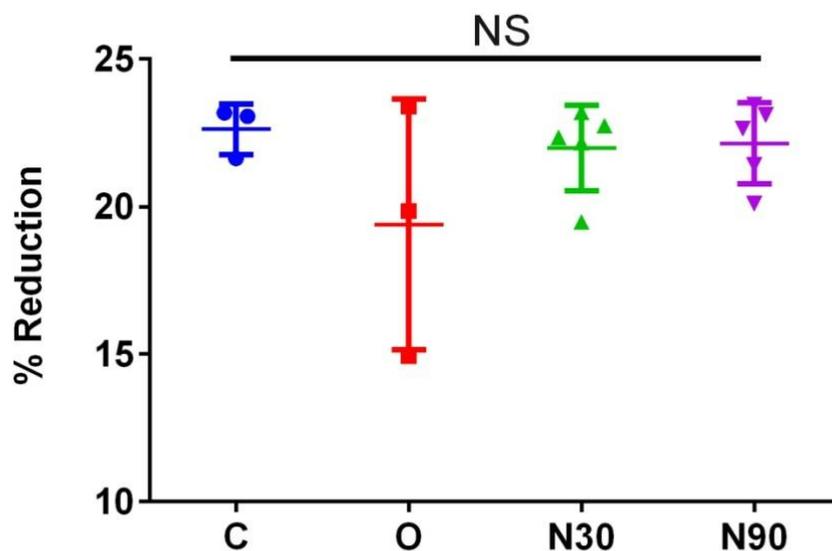
At 1000 Hz, hydrogel displacement is reliable and precise. Effect of resonance (at 2500 Hz) amplified the stimulating amplitudes resulting in high variation (high SD value) in both the centre and edge areas (mean±SD, n=5, T5000, 19.69 Vpp, \* P≤ 0.05, \*\* P≤ 0.01, \*\*\* P≤ 0.001, Two-way ANOVA, Sidak post hoc test, W; well, C; centre, E; edge).

### 4.4.3 Biological response of MSCs to high amplitude nanovibrational stimulation

Biological effects of high amplitude NS were investigated for viability, effect on osteogenic differentiation induction in gene and protein levels and the involved cellular pathways.

#### 4.4.3.1 High amplitude and cell viability

After 2 weeks of NS, alamar blue study was performed. Both standard (N30) and high amplitude (N90) showed no difference to unstimulated control and osteogenic media (Figure 4.11).

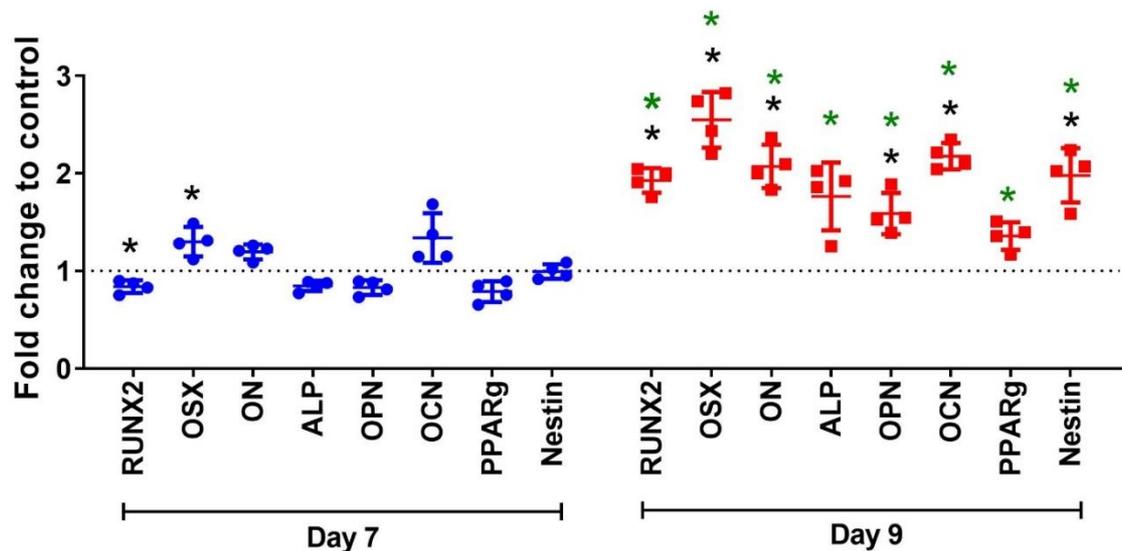


**Figure 4.11 Alamar blue assays in N30 and N90 at 2 week**

Alamar blue study showed no significant difference between all groups indicating that high amplitude stimulation (N90) was safe for MSCs (mean $\pm$ SD, n=3-4, Stro1+ MSCs, NS= no significant difference, One-way ANOVA, Tukey's post hoc test, C; control, O; osteogenic media, N30; 30 nm, N90; 90 nm).

#### 4.4.3.2 Nanovibrational stimulation enhance 3D osteogenesis

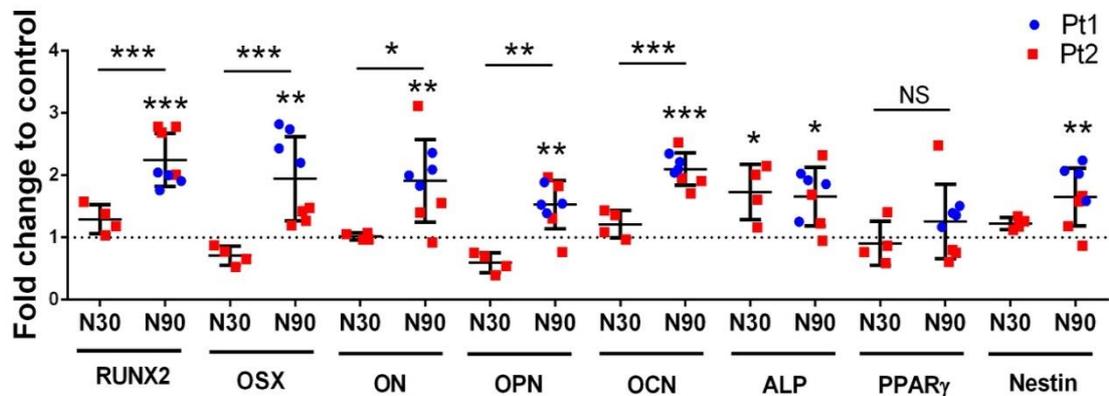
The effect of high amplitude nanovibrational stimulation in osteogenic induction were then studied in Stro1+ MSCs seeded in hydrogels. To study the effect of N90 on gene expression, qRT-PCR was investigated at day 7 and 9. At day 7, osteogenic gene expression was not obviously presented, and only OSX upregulation was found. At day 9, N90 induced osteogenic gene expression including RUNX2 (major transcription factor for osteogenesis), OSX, ON, ALP, OPN and OCN. PPAR $\gamma$  (fat gene expression) increased from day 7 to 9 but there was no change compared to control (Figure 4.12). Therefore, day 9 is the suitable time point showing the obvious NS effect and was selected to study a single time point in gene expression.



**Figure 4.12 Gene expression comparing between day 7 and 9 in N90**

After stimulation with N90 at 1000 Hz for 7 days, only OSX was significantly increased. Interestingly, at day 9, N90 enhanced osteogenic gene expression. PPAR $\gamma$  (fat) suppression was noted. (mean $\pm$ SD, n=4, \*  $P \leq 0.05$ , Stro1+ MSCs, green asterix; comparing between day 7 and 9 using Mann-Whitney test, black asterix; comparing to control using Mann-Whitney test).

Comparing between N30 and N90 after stimulating for 9 days, N90 promoted greater osteogenic gene expression (RUNX2, OSX, ON, OPN, OCN) than N30. Adipogenesis suppression was found in both N30 and N90 (Figure 4.13).

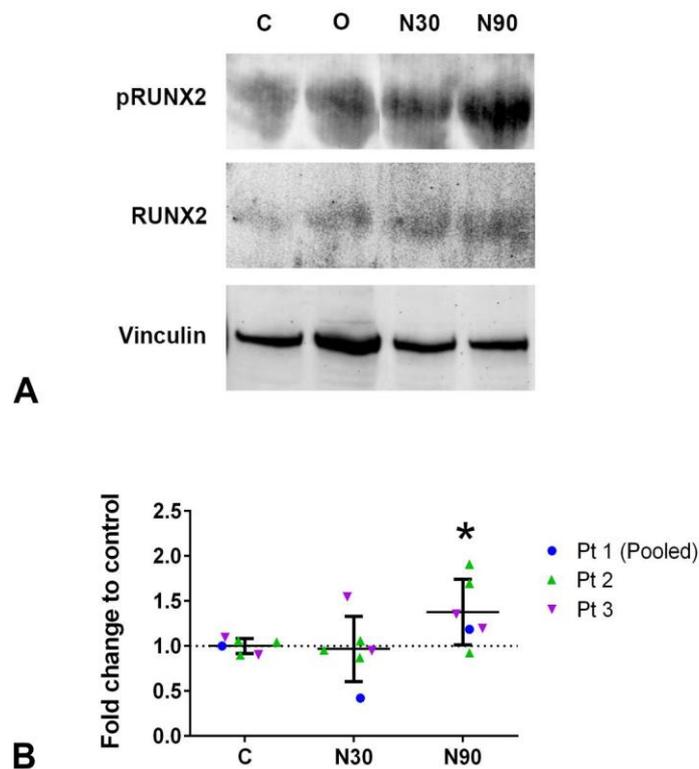


**Figure 4.13 Osteogenic gene expression comparing between N30 and N90 at day 9**

The qRT-PCR at day 9 comparing N30 and N90. High amplitude stimulation (N90) significantly increased RUNX2, OSX, ON, OPN and OCN while N30 showed less osteogenic induction (mean $\pm$ SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , One-way ANOVA, Tukey's post hoc test, Pt1-2; patient 1-2).

#### 4.4.3.3 Protein expression

To study protein level osteogenesis, western blot and densitometry were performed at day7. Again, N90 significantly enhanced pRUNX2/RUNX2 upregulation greater than N30 (Figure 4.14A-B). Interestingly, this result corresponded to gene level (Figure 4.12-4.13).



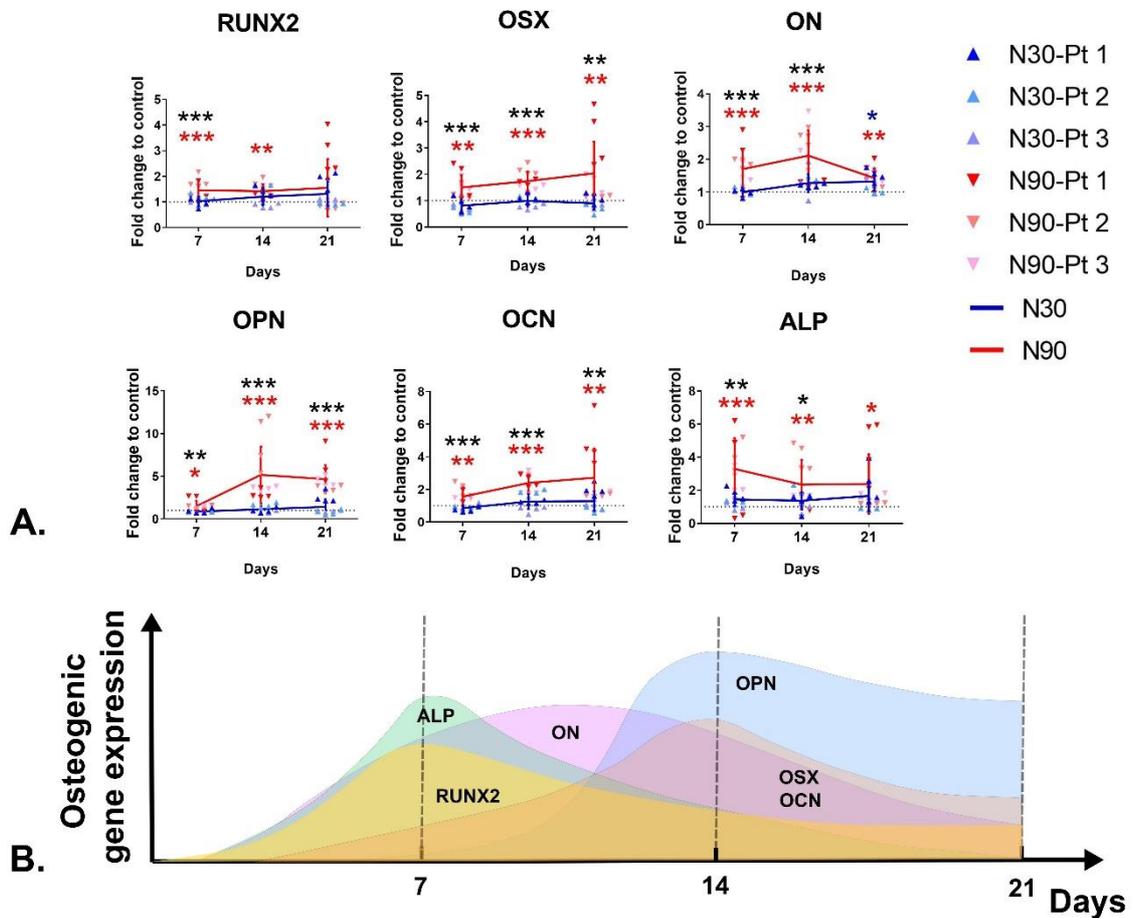
**Figure 4.14 RUNX2 protein expression comparing between N30 and N90 at day 7**

Western blot after 1 week stimulation; A. Phospho RUNX2 was upregulated in N30 and N90 (representative blot). B. Western blot densitometry showed significant upregulation of pRUNX2/RUNX2 for N90 comparing to control (mean $\pm$ SD, 3 patients, n=3, \*  $P \leq 0.05$ , Mann-Whitney test, Pt1-3; patient1-3).

#### 4.4.3.4 Temporal gene study

To investigate whether NS may change the osteogenic gene expression pattern, a temporal gene study by qRT-PCR was performed at day 7, 14 and 21. These results elucidate that N90 provides greater enhanced osteogenic gene expression than N30. The pattern of N90 induced osteogenic gene expression corresponded to normal osteogenic gene expression pattern (Lian & Stein, 1992; Stein et al., 1991; Stein et al., 2004; J. L. Yang et al., 2014). RUNX2 and OSX were found at 1-2 week, playing a role in committing preosteoblasts to immature osteoblasts (J. L. Yang et al., 2014). OPN and OCN increased at week 2 and 3 for

mineralization (Lian & Stein, 1992; Stein et al., 1991). ALP and ON expression increased at week 1-2 (Figure 4.15).



**Figure 4.15** Temporal gene analysis comparing between N30 and N90 during day 7-21

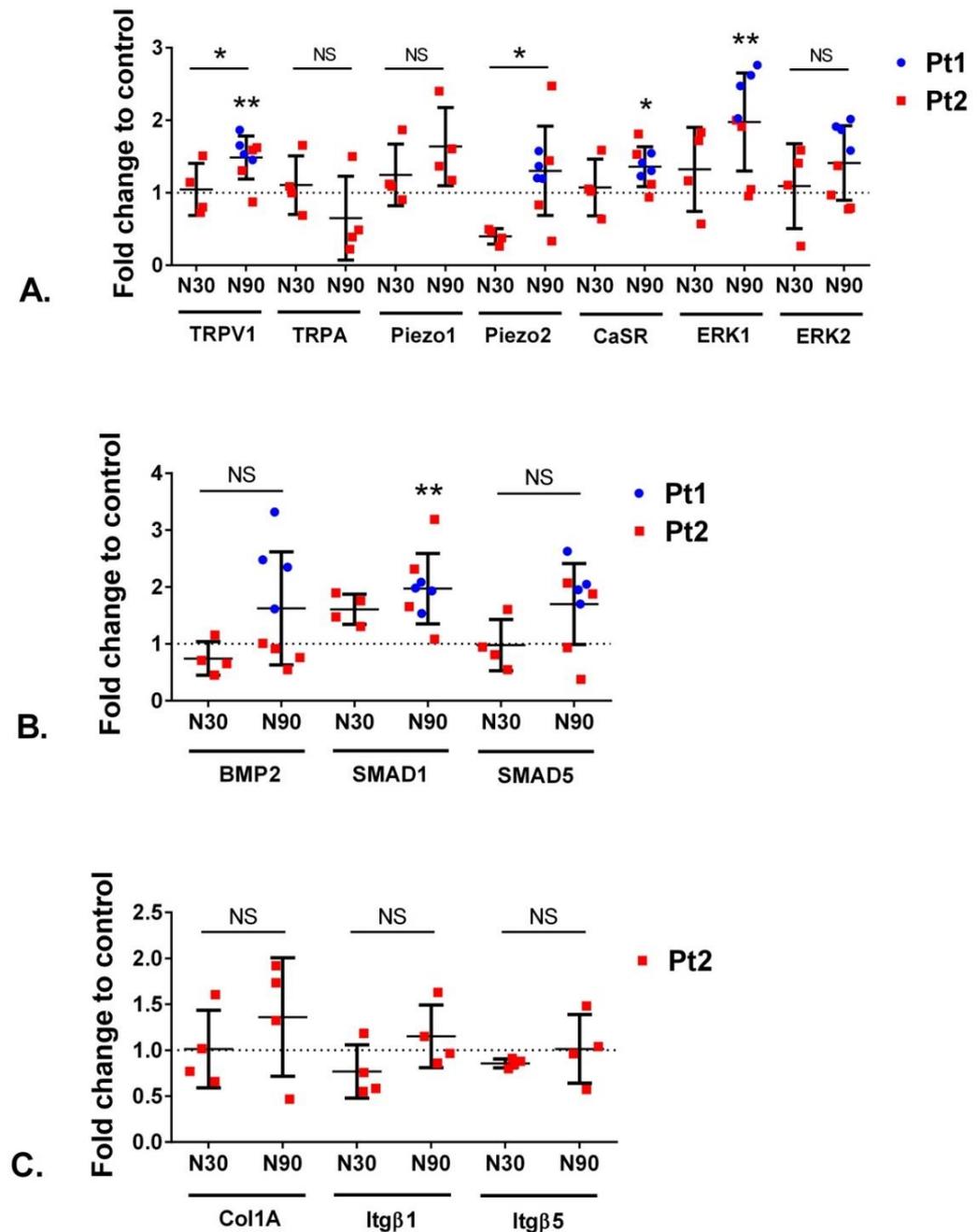
- A) N90 showed greater osteogenic gene expression over N30. RUNX2 increased at week 1. OSX and ON tended to increase and reached a peak at week 2. OPN and OCN increased at week 2 and 3. ALP was maximal at week 1. Overall, NS induced osteogenic gene expression pattern which corresponded to normal osteogenic gene pattern (mean±SD, 3 patients, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , One way-ANOVA, Tukey's post hoc test, asterisk; blue= significant difference of N30, red=significant difference of N90, black= significant difference comparing between N30 vs N90, Pt1-3; patient1-3).
- B) Diagram showing trends of the temporal gene study for N90.

#### **4.4.4 Nanovibrational stimulation and related pathways**

Understanding the NS induced 3D osteogenesis is crucial. As aforementioned, Tsimbouri et al proposed that NS drives 3D osteogenesis mainly through TRPV1, PKC and  $\beta$ -catenin (Tsimbouri P.M., 2017) while Nikukar et al showed that NS induced 2D osteogenesis via ROCK-ERK1/2 pathway (Nikukar et al., 2013). Thus, in this section, NS related osteogenic pathways including calcium signaling, BMP2- and cytoskeletal related pathways were investigated.

##### **4.4.4.1 Investigating in calcium-, BMP2-and cytoskeletal-related pathways in gene expression**

Osteogenesis pathways including BMP2-SMAD5, ion channels (including TRPV1, Piezos, CasR protein receptors), as well as ERK1/2 (which is MAPK member) were studied by qRT-PCR at day 9. The results showed that BMP2-SMAD1, TRPV1-Piezo2-CaSR and ERK1 expression was significantly upregulated, indicating that N90 potentially induced 3D osteogenesis through BMP2 and calcium signaling pathways (**Figure 4.16**).

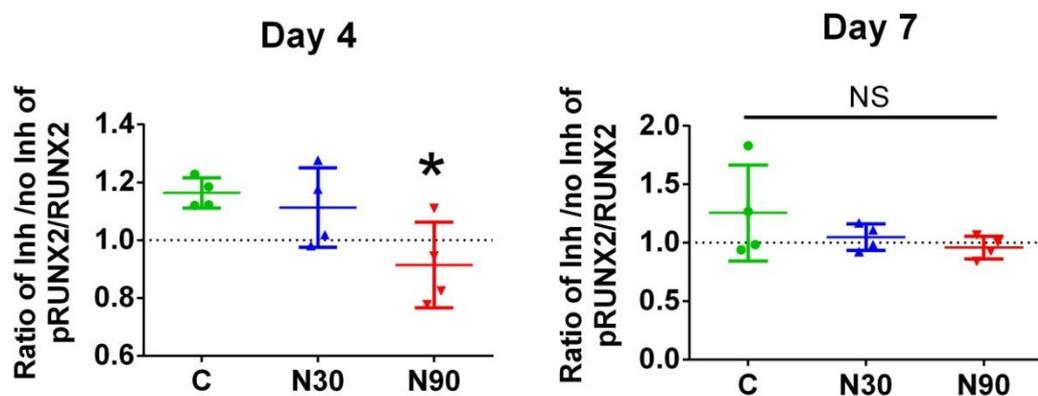


**Figure 4.16 Gene expression of NS activated pathways compared between N30 and N90 at day 9**

RT-PCR at day 9 showed N90 activated BMP2-SMAD1, calcium signaling (TRPV1-Piezo2) and ERK1 pathways (mean±SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , One-way ANOVA, Tukey's post hoc test, Pt1-2; patient 1-2).

#### 4.4.4.2 ROCK pathways and osteogenesis in 2D vs 3D nanovibrational stimulation

The previous study by Nikukar et al demonstrated that NS enhances 2D osteogenesis via ROCK pathway (Nikukar et al., 2013). To study the effect of N30 vs N90 on ROCK pathway, MSCs were cultured in 2D for 7 day. The ratio of pRUNX2/RUNX2 was studied by In-Cell western assay. The 10  $\mu$ M of Y-27632 (ROCK inhibitor) was added at day 2 and day 5. At day 4, pRUNX2/RUNX2 significantly decreased in N90, indicating that ROCK pathway links to RUNX2 expression. However, no significant difference was noted at day 7. Therefore, ROCK pathway might influence 2D osteogenesis, especially for N90, in the very early stages of commitment (day4) (Figure 4.17).

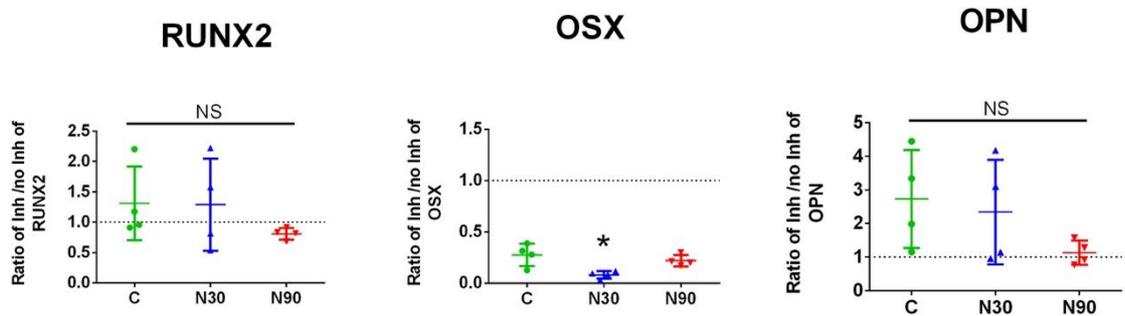


**Figure 4.17** RUNX2 protein expression with ROCK pathway inhibition in 2D culture

In-Cell Western assay of pRUNX2/RUNX2 with ROCK pathway inhibition for 2D osteogenesis. At day 4, the ROCK pathway was significantly involved in osteogenesis in the early phase (day 4). Effect of ROCK pathway was reduced at day 7 (Mean $\pm$ SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , One-way ANOVA, Tukey's post hoc test).

To investigate the role of ROCK pathways in 3D osteogenesis, 10  $\mu$ M of Y-27632 (ROCK inhibitor) supplemented in the media was changed every 2 days (starting from day 2), and qRT-PCR was performed at day 9. The decrease of the RUNX2 ratio between with and without inhibitor (less than 1) was noted in N90, indicating that ROCK pathway may also tend to enhance to RUNX2 expression in 3D NS osteogenesis. Moreover, a significant ROCK-linked decrease of OSX expression was

noted in the N30 group (but not in N90), indicating that the ROCK pathway is involved in N30 driven osteogenesis (**Figure 4.18**).



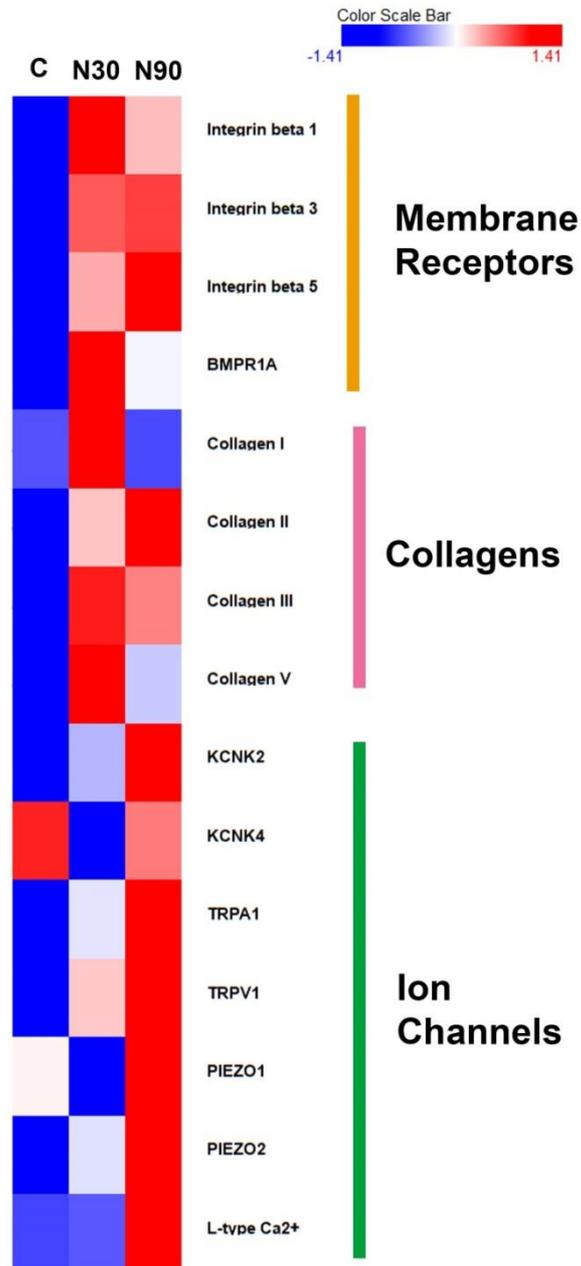
**Figure 4.18 Osteogenic gene expression with ROCK pathway inhibition in 3D culture**

qRT-PCR with Y-27632 (ROCK inhibition) was performed at day 9. ROCK pathways significantly involved in OSX gene expression in N30 group at day 9. No significant change was found in RUNX2 and OPN gene expression (mean $\pm$ SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , One-way ANOVA, Tukey's post hoc test).

#### 4.4.4.3 Protein expression by protein arrays

To further investigate the NS induced pathways at protein level, a protein array was performed. MSCs were stimulated with standard (N30) and high amplitude stimulation (N90) for 7 days. N30 activated cellular membrane receptors such as integrins and BMP2. Increase of collagen protein production was also noted. High stimulating amplitude (N90), however, showed the activation of ion channel proteins on cellular membranes such as TRPA1, TRPV1, Piezo1,2, and L-type calcium channel. (**Figure 4.19**). Interestingly, protein array

results corresponded to qRT-PCR showing the upregulation of TRPV1 and piezo2 in gene level (Figure 4.16A).



**Figure 4.19 Protein expression of NS activated pathways at day 7**

From protein array at day 7, standard NS amplitude (N30) activated ECM proteins including integrins and collagens. Interestingly, High amplitude NS (N90) not only triggered ECM protein production but also activated stretching ion channels

proteins such as TRPV1, Piezo1, 2, and L-type calcium ion channels.

## 4.5 Discussion

### 4.5.1 High amplitude nanovibration stimulation enhances osteogenesis and pathway activation

At day 9, osteogenic genes (RUNX2, OSX, ALP, OPN and OCN) were significantly upregulated in the N90 group (**Figure 4.12**). Regarding the gene expression in N90, it might be implied that stimulated MSCs are committed to preosteoblasts (by the effect of RUNX2 and osterix) and became immature osteoblasts (by the evidence of RUNX2, OPN and OCN upregulation at day 9). At the protein level, the evidence of pRUNX2/RUNX2 upregulation (**Figure 4.14**), again, affirmed that N90 provided a better osteogenic induction effect than N30 which corresponded to activated pathways at the gene level for N90 (**Figure 4.16**). The activation of N90-induced calcium ion-related (TRPV1, Piezo1, ERK1) and BMP2-related (BMP2, SMAD1) genes and proteins indicated that N90 may link to calcium signaling and BMP2 pathways.

In a temporal gene study (**Figure 4.15**), again, N90 showed better osteogenic induction during 3 weeks of stimulation. The temporal gene study of N90 corresponded to Yang et al who studied the temporal gene expression for nanotopography induced osteogenesis (J. Yang et al., 2014). RUNX2 and OSX upregulation was found in week 1-2 for osteogenic commitment of MSCs. OCN and OPN were then increased at week 2-3 for ECM production and mineralization. However, the early increase of ALP at week 1 was noted which correlated to Tsimbouri et al's study showing the upregulation of ALP and OPN in 1 week by N30 induction (Tsimbouri P.M., 2017). The early upregulation of ALP in N90 was observed and possibly relate to mineralization initiation (Stefkova, Prochazkova, & Pachernik, 2015). In a physiologically-relevant osteogenic gene expression pattern, ALP was produced in low levels at week 1 and progressively increase at week 2-3 (Hoemann, El-Gabalawy, & McKee, 2009). To explain why the early upregulation of ALP and OPN was found in week 1, three hypotheses were drawn. Firstly, NS may directly activate calcium channels such as TRPV1, Piezo1/2, and L-type calcium channels especially in week1 resulting in the influx of extracellular calcium. The increase of intracellular calcium may induce OPN (You et al.,

2001) and possibly enhance ALP secretion (Iannotti, Naidu, Noguchi, Hunt, & Brighton, 1994).

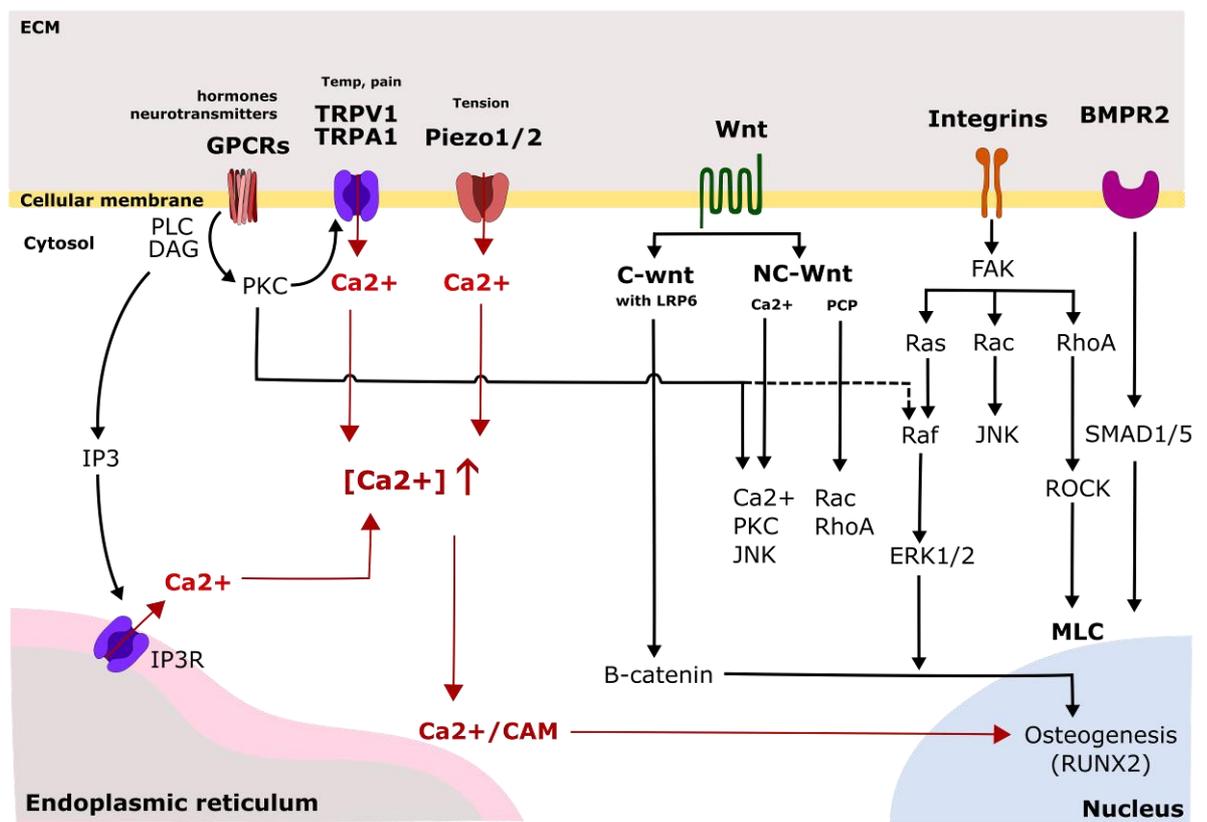
BMP2 secretion in week1 could be another cause. NS possibly promotes BMP2 secretion in the early phase (shown in (Tsimbouri P.M., 2017) and **Figure 4.2A, 4.16B**), and may increase intracellular calcium and ALP expression (W. Xu et al., 2016). This hypothesis corresponded to Tsimbouri's study reporting that the effect of NS links to calcium signaling (Tsimbouri P.M., 2017). Moreover, NS also induce BMP2 as well as links to TRPV1 and PKC which is the mediator of the calcium signaling pathway (**Figure 4.3 D-E**).

Another hypothesis could be drawn based on the metabolomic data, NS may induce low grade oxidative stress e.g. reactive oxygen species (ROS). This stress, in turn, induced endoplasmic reticulum (ER) stress (J. K. Kim et al., 2016) in early phase (day 7), thus, enhancing ALP upregulation (Furmanik & Shanahan, 2018). NS induced ROS hypothesis possibly linked to calcium ions. ROS can control calcium homeostasis and affects on mitochondria and ER functions. ROS induces ER to release calcium ions from ER into the cytosol (Görlach, Bertram, Hudecova, & Krizanova, 2015). ROS may generally enhance ion channels upregulation in protein arrays such as TRPV1 (Chuang & Lin, 2009), TRPA1(Nicholas, Yuan, Brookes, Spencer, & Zagorodnyuk, 2017; C. Xu et al., 2017), L-type Ca<sup>2+</sup> channels (L. Yang et al., 2013) and, furthermore, it may enhance collagen synthesis (Boin et al., 2014) showing in protein array (**Figure 4.19**). Effect of ROS on MSCs is a double-edged sword, low level of ROS suits for osteogenesis and proliferation (C. H. Byon et al., 2008; Choe et al., 2012). However, high doses of ROS reduce differentiation (Atashi et al., 2015; C. H. Lin, Li, Cheng, & Yen, 2018; J. Tan et al., 2015). Further discussion of ROS and osteogenesis are discussed in **chapter 5**.

#### **4.5.2 The hypothesized pathways and crosstalk activated by NS; possible interaction between calcium signaling-BMP2-cytoskeleton.**

It is difficult to conclude that NS directly activate calcium ion channels or that calcium ion channels are the secondary responders from other activated pathways. The possible pathways, activated by NS, are summarized in **Figure 4.20**. NS is potentially involved in calcium ion channel expression/function (directly activated or indirectly activated by cytoskeleton or by reducing channel sensitization by ROS and inflammatory cytokines) or involves GPCRs

which might be overlooked as mechanosensor (Connelly et al., 2015). Increased intracellular calcium activate PKC (K.-P. Huang, 1989) in turn phosphorylates TRPV1 allowing calcium influx (Studer & McNaughton, 2010). Calcium/CAM complex might then activate CaMKs promoting differentiation (Y. H. Choi et al., 2013; Illario et al., 2003). NS also enhanced BMP2 signalling via SMAD1/5 pathway driving osteogenesis. BMP2 also increases intracellular calcium promoting osteogenesis (W. Xu et al., 2016). Cytoskeletal tension appears to play a role in 3D osteogenesis via integrins-ROCK pathway. ERK1/2 was possibly mediated by cytoskeleton, crosstalk of calcium signaling as well as crosstalk between canonical and non-canonical Wnt. Joining the dots on all of these pathways remains to be done.



**Figure 4.20 Extended hypothesis of NS induced 3D osteogenesis**

(refer to section 4.5.2)

## 4.6 Conclusion

NS with high amplitude stimulation (90 nm) was safe for MSCs and enhanced 3D osteogenesis in gene and protein levels. In a temporal gene study, N90 induced 3D osteogenesis corresponding to an osteogenic gene expression pattern. N90 appeared to drive 3D osteogenesis through multiple biological pathways including BMP-smad1/5, calcium signaling (through TRPV1, piezo2, CaSR) and ROCK pathways.

**Chapter 5 The effect of high amplitude  
nanovibrational stimulation on MSC  
metabolomics and inflammatory  
response**

## **Chapter 5 The effect of high amplitude nanovibrational stimulation on MSC metabolomics and inflammatory response**

### **5.1 Introduction**

#### **5.1.1 Metabolic changes in MSC status**

It is known that metabolomic changes reflect cellular status such as proliferation, differentiation, oxidative stress or apoptosis (Wanet, Arnould, Najimi, & Renard, 2015). Thus, understanding the metabolomic changes, during proliferation, differentiation and exposure to external stimuli, could help to interpret how MSCs respond to NS.

In physiological conditions, MSCs require bioenergy from glycolysis and fatty acid  $\beta$ -oxidation for maintaining self-renewal (K. Ito & Suda, 2014). During differentiation, MSCs develop different metabolic patterns. For example, chondroblastic differentiation mainly uses glycolysis under hypoxic conditions (Pattappa, Heywood, de Bruijn, & Lee, 2011). However, osteoblastic differentiation likely requires energy from oxidative phosphorylation (OXPHOS) in normoxic conditions; reactive oxygen species (ROS) are thus produced at low levels (Shum, White, Mills, Bentley, & Eliseev, 2016). Adipogenic differentiation requires OXPHOS for differentiation from pre-adipocyte to adipocyte; ROS is produced at high levels (Shyh-Chang et al., 2013). It is noted that the Phosphoinositide 3-kinase/Protein kinase B/mammalian target of rapamycin (PI3K-AKT-mTOR) pathway is important for bioenergetic regulation maintaining cellular homeostasis (K. Ito & Ito, 2016).

##### **5.1.1.1 Glycolysis, oxidative phosphorylation: from quiescence to differentiation**

MSCs require high energy to maintain functions such as differentiation or proliferation. Glucose metabolism plays an important role in undifferentiated and differentiated cells. The oxygen niche is another

key regulator for glycolysis and oxidative phosphorylation (Ziello, Jovin, & Huang, 2007).

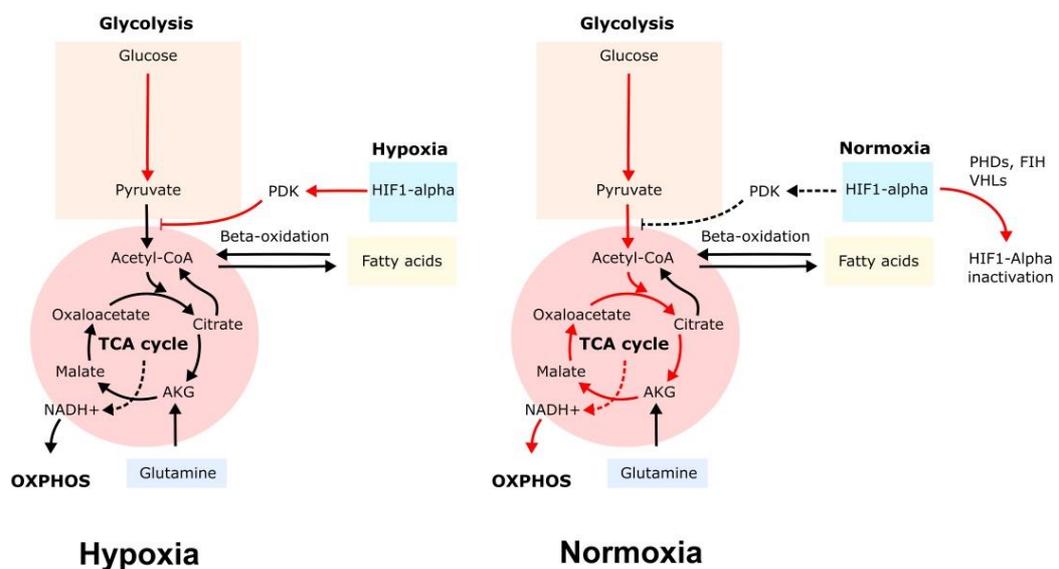
It had been known that HIF1 $\alpha$  regulates glycolysis and oxidative phosphorylation in responding to oxygen concentration. HIF1 $\alpha$  activates pyruvate dehydrogenase kinase 1 (PDK1) in turn inactivating pyruvate dehydrogenase (PDH). A decrease in PDH reduces the conversion of pyruvate to acetyl-CoA, thus, suppressing tricarboxylic acid cycle (TCA) cycle (J.-w. Kim, Tchernyshyov, Semenza, & Dang, 2006). HIF1 $\alpha$  is increased in the hypoxic niche resulting in activation of glycolysis and reduction of OXPHOS. High levels of HIF1 $\alpha$  are found in undifferentiated cells in the niche (Shum et al., 2016). In normoxic conditions, where MSCs are e.g. osteogenically induced, HIF1 $\alpha$  is downregulated and thus OXPHOS is activated (Palomaki et al., 2013) (**Figure 5.1**). HIF1 $\alpha$  is thus a determinant of stem cell fate along osteogenic, angiogenic or chondrogenic lineages. Moreover, HIFs also crosstalk with many signaling pathways such as TGF/Smad and Wnt/Catenin pathways (Ozturk, Hobiger, Despot-Slade, Pichler, & Zenobi-Wong, 2017; S. M. Watt, Tsaknakis, Forde, & Carpenter, 2009). In hypoxic condition, HIF1 $\alpha$  is best known to promote angiogenesis through vascular endothelial growth factors (VEGFs) signaling result (Drager et al., 2015). However, VEGF-D also regulates osteoblast maturation via VEGF receptor 3 (VEGFR3) (Orlandini et al., 2006).

### 5.1.1.2 Lipid metabolism in MSCs

Lipid metabolism is essential for cell homeostasis maintaining the equilibrium between anabolism (lipogenesis) and catabolism (generating ATP) (Kuo & Ann, 2018); lipids are important sources of ATP. In quiescent stem cells, fatty acids are catabolized by  $\beta$ -oxidation into acetyl-CoA then used to generate ATP via TCA cycle. In proliferative stem cells, Acetyl-CoA is used to synthesize polyunsaturated fatty acids or complex fatty acids such as the phospholipid membrane (Folmes, Park, & Terzic, 2013).

### 5.1.1.3 Amino acid metabolism; role of glutamine in MSCs

Glutamine metabolism is important for cell survival as it is the main nitrogen source for nucleotide synthesis. During cell differentiation which requires high energy, reactive oxygen species (ROS) are produced. Glutamine balances cellular redox acting as an antioxidant (Mates, Perez-Gomez, Nunez de Castro, Asenjo, & Marquez, 2002). In hypoxic conditions, the TCA cycle is limited in generating ATP by HIF1- $\alpha$ . HIF1- $\alpha$  reduces pyruvate dehydrogenase (PDH), thus reduces the conversion of pyruvate to acetyl-CoA. Subsequently, glycolysis is the main source of energy in hypoxia. Glutamine is converted to glutamate and  $\alpha$ -ketoglutarate which in turn enters TCA cycle for ATP production (Michalak, Mackowska-Kedziora, Sobolewski, & Wozniak, 2015) (Figure 5.1).



**Figure 5.1 Glycolysis, oxidative phosphorylation and HIF1- $\alpha$**

In hypoxic conditions, HIF1- $\alpha$  activates pyruvate dehydrogenase kinase 1 (PDK1) to inhibit PDH reducing the conversion of pyruvate to Acetyl-CoA. Glycolysis therefore is mainly used during the quiescent state. In normoxic conditions, HIF1- $\alpha$  is degraded by prolyl hydroxylases (PHDs), factor inhibiting HIF-1 (FIH) and Von Hippel-Lindau ubiquitin ligase complex (VHLs). Pyruvate from glycolysis is converted to Acetyl-CoA which, in turn, enters TCA cycle and oxidative phosphorylation (K. Ito & Suda, 2014; Y. Liu & Ma, 2015; Mahon, Hirota, & Semenza, 2001).

### **5.1.2 Can NS-induced osteogenesis with low grade oxidative stress?**

From current evidence, mechanical stimulation can induce osteogenesis (P. L. Fu et al., 2017; X. Huang et al., 2018) but it may also produce oxidative stress (Chapman et al., 2005; Sharifpanah, Behr, Wartenberg, & Sauer, 2016). Optimal reactive oxygen species (ROS) drive differentiation (Choe et al., 2012) while over stimulation (high level of ROS) can suppress differentiation and may affect cell survival (Chang Hyun Byon et al., 2008; Jufri, Mohamedali, Avolio, & Baker, 2015; J. Tan et al., 2015). There are many studies that show that mechanical stimulations may link to oxidative stress (Chapman et al., 2005; J. J. Cheng, Wung, Chao, & Wang, 1998; Hong et al., 2015; Schmelter, Ateghang, Helmig, Wartenberg, & Sauer, 2006; Sharifpanah et al., 2016). For example, cyclic stretch produces ROS at the plasma membrane (by NADPH oxidase) or via the mitochondrial respiratory chain. ROS is involved in multiple cell functions including cellular contraction (via ion channels), cell growth, cellular apoptosis (via cyclins, CDK) and inflammation (via e.g. NF $\kappa$ B) (Birukov, 2009). NS can be considered as a mechanical stimulus, thus, it possibly generates oxidative stress. Thus, if ROS is found during NS, this possibly hints the clue of NS induced osteogenesis.

### **5.1.3 ROS: sources and REDOX balance**

ROS are oxygen free radicals e.g. peroxides, superoxide, etc., produced by cellular metabolism (Murphy, 2009). ROS metabolites maintain redox homeostasis (Droge, 2002). ROS are mainly produced by mitochondria from the electron transport chain (Murphy, 2009) but can also be produced at the cellular membrane where external stimuli such as bacteria or mechanical stimulation (e.g. cyclic stretch (Liang et al., 2019)) act. At the cellular membrane, NADPH oxidase (NOX) plays important roles in ROS generation (Bigarella, Liang, & Ghaffari, 2014).

ROS is controlled by antioxidative responses in cells. In acute response, ROS is counterbalanced by enzymes. For example, superoxide dismutase (SOD) can convert ROS to H<sub>2</sub>O and O<sub>2</sub> (Mittal, Siddiqui, Tran, Reddy, & Malik, 2014). Glutathione also scavenges ROS by oxidation (Droge, 2002). Chronic ROS production triggers the nuclear factor erythroid 2-related factor2 (Nrf2) gene for antioxidant

response (Ma, 2013). This activates MAPK, p53 and NF $\kappa$ B for cell survival in a long-term response (Martindale & Holbrook, 2002).

At the physiological level, ROS enhances stem cell proliferation and differentiation. In high oxidative stress conditions, ROS can lead to mitochondrial dysfunction, induce DNA damage and apoptosis (Maryanovich & Gross, 2013). ROS is also directly involved in redox signaling and protein functions such through NF $\kappa$ B, HIF1 $\alpha$ , FOXO, mTOR, AKT which in turn, regulate glycolysis and oxidative phosphorylation (Bai et al., 2005; Bigarella et al., 2014; Murphy, 2009).

#### **5.1.4 Metabolomic changes of MSCs in oxidative stress conditions**

As aforementioned, MSCs maintain *in vivo* potency using glycolysis under hypoxic niche conditions. In osteogenically differentiating MSCs, OXPHOS is activated (Shyh-Chang et al., 2013). SOD and catalase are increased to control ROS (C. T. Chen, Shih, Kuo, Lee, & Wei, 2008). In the early differentiation stage, ROS is produced at physiological levels, enhancing molecular signaling to help driving differentiation and proliferation (Droge, 2002). In high energetic process such as proliferation, ROS can temporally increase but it then reverts to normal levels (Droge, 2002; Shyh-Chang & Ng, 2017).

In oxidative stress conditions where ROS accumulation can damage cellular organs, cells scavenge ROS using enzymes and redox signaling as sentinel mechanisms maintaining normal cellular functions and reduce ROS. Glycolysis is also shifted to pentose phosphate pathway (PPP).

##### **5.1.4.1 The shift of OXPHOS to glycolysis and pentose phosphate pathways in oxidative stress conditions**

In oxidative stress conditions, cells use a redox balancing system to reduce mitochondrial injury from high levels of ROS. Cells reduce ATP production from the TCA cycle by diverting glycolysis to PPP (Kuehne et al., 2015). The PPP generates NADPH, pentoses and ribose from G-6 phosphate; ribose-5-phosphate is a precursor for DNA, RNA synthesis and NADPH formation (Perl, Hanczko, Telarico, Oaks, & Landas, 2011). By redox balancing, PPP reduces oxidative stress by converting H<sub>2</sub>O<sub>2</sub> to H<sub>2</sub>O using glutathione peroxidase (Bigarella et al., 2014). Some

literature mentions that shifting to PPP may be an early sign of tumorigenesis before shifting to aerobic glycolysis-dependent mechanisms (Warburg effect) (E. S. Cho, Cha, Kim, Kim, & Yook, 2018; Kuehne et al., 2015).

#### **5.1.4.2 Effect of ROS on amino acids and lipids**

ROS oxidizes proteins causing hydroxylation of aromatic amino acids as well as nitration, nitrosylation and sulfoxidation, in turn, resulting in protein degradation and dysfunction (Stadtman & Levine, 2003). Moreover, L-glutamine also links with ROS. L-glutamine is a precursor of glutathione (GSH). GSH plays role in redox balance reducing ROS. GSH is oxidized to glutathione disulfide (GSSG) by converting  $H_2O_2$  to  $H_2O$  (Mailloux, McBride, & Harper, 2013). Aspartate, a non-essential amino acid, is another source of ATP from mitochondrial oxidation (Pi et al., 2014). Aspartate is a known antioxidant. However, evidence and mechanism of aspartate on ROS reduction is scarce and remains unclear (J. Duan et al., 2016).

Considering lipids, LC-PUFAs are important as they are ATP sources and precursors of phospholipids (Maulucci et al., 2016). LC-PUFAs are also antioxidants (via Nrf-2/HO-1 pathway) (Kusunoki et al., 2013; Richard, Kefi, Barbe, Bausero, & Visioli, 2008). However, in oxidative stress conditions, ROS can peroxidize PUFAs, lipoproteins and damage oxidative membrane (H. Arai, 2014; Ayala, Muñoz, & Argüelles, 2014).

#### **5.1.5 mTOR-AMPK-Akt pathway regulates metabolism in oxidative stress conditions.**

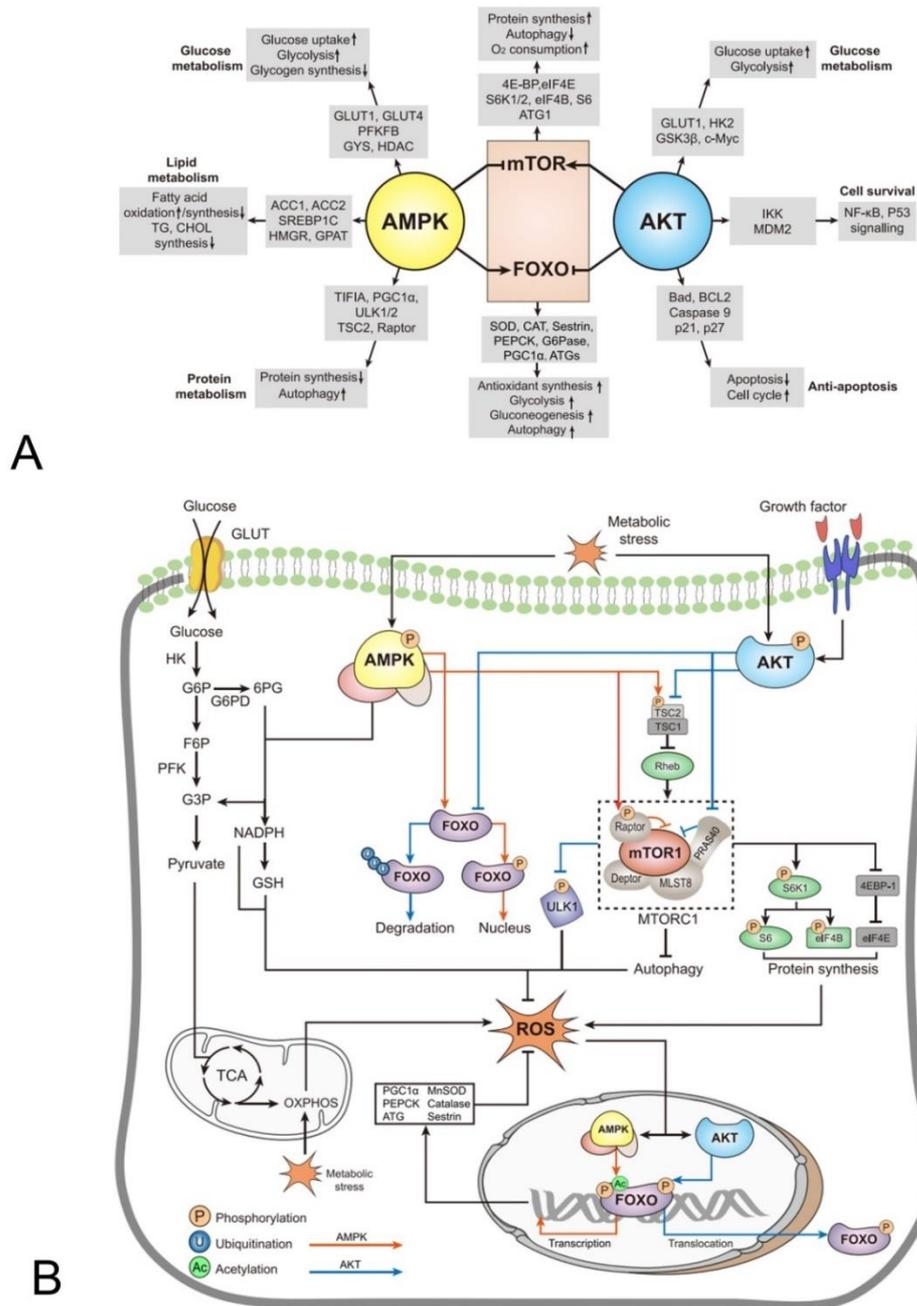
It has been shown that the mTOR-AMPK-Akt pathway links to cellular metabolism, redox balancing, autophagy and cell survival (Y. Zhao et al., 2017). Zhao et al contributed a good summary of the interaction between mTOR-AMPK-Akt and ROS as illustrated in **Figure 5.2 A-B**.

In low (physiological) stress conditions (with glucose deprivation), AMP-activated protein kinase (AMPK) pathway plays a catabolic role to produce energy together with anti-oxidant production (via Forkhead box class O; FOXO) as well as reduce anabolism (Y. Zhao et al., 2017). AMPK acts as an energy sensor for cells. AMPK suppresses protein synthesis (by inhibiting mTOR), fatty acid catabolism (by activating adipose triglyceride lipase; ATGL) and lipid synthesis (via inhibition of HMG-CoA reductase and acetyl-CoA-carboxylases; ACC1

and 2). AMPK increases glucose uptake (by TBC1D1 activate via GLUT1 and 4) and inhibits glycogen synthesis (inhibiting glycogen synthase) (Herzig & Shaw, 2018). AMPK also plays role in autophagy (via ULK1) (Mihaylova & Shaw, 2011). Interestingly, some studies have shown that AMPK may promote osteogenesis and mineralization (E. K. Kim et al., 2012; Yi Li, Su, Sun, Cai, & Deng, 2018).

In high stress conditions (shown by ROS accumulation), the Akt (protein kinase B) pathway plays a role by initiating cell survival and anti-apoptotic pathways as well as promotes anabolism (Y. Zhao et al., 2017). mTOR (considered as a nutrient sensor) is a member of PI3K kinase family (Saxton & Sabatini, 2017). mTOR is regulated by both AMPK (inhibitory effect) and Akt (stimulating effect) thus balancing between catabolism and anabolism (Hahn-Windgassen et al., 2005; Saxton & Sabatini, 2017). Akt activation provides anti-apoptotic function and increases glucose uptake (Y. Zhao et al., 2017) as well as resists an oxidative stress (L. Wang, Chen, Sternberg, & Cai, 2008).

Akt activated-mTOR increases protein synthesis and decreases autophagy (Saxton & Sabatini, 2017).



**Figure 5.2 mTOR mTOR-AMPK-Akt signaling pathway and oxidative stress**

A) AMPK, Akt, mTOR and FOXO interaction. In summary, AMPK promotes energy production by increasing catabolism (increase fatty acid oxidation, glycolysis) and reducing anabolism (reduce protein and fatty acid synthesis). Akt activation increases anabolism such as glycogen and protein

synthesis and promotes anti-apoptosis. mTOR is activated by Akt but inhibited by AMPK. FOXO is controlled by AMPK and Akt.

- B) mTOR-AMPK-Akt pathways and ROS regulation; Akt-AMPK affects on mTOR (AMPK inhibits while Akt activates mTOR). Activated mTOR promotes protein synthesis and decrease autophagy. AMPK-FOXO promotes anti-oxidants synthesis and shift glycolysis to PPP in order to reduce ROS (With permission of Zhao., 2017 (Y. Zhao et al., 2017), licensed under Creative Common Attribution License; CC; <https://creativecommons.org/licenses/by/4.0/>).

### **5.1.6 Oxidative stress and interaction among lipid rafts, NADPH oxidase and ROS on the cellular membrane**

It has been proposed that NS may ‘flutter’ cellular membranes (Childs et al., 2016). Theoretically, ROS can also be generated at the cellular membrane by NADPH oxidase (NOX). Indeed, much signaling emanating from the cellular membrane is linked to lipid rafts. Thus, understanding the lipid raft-oxidative stress relationship is important.

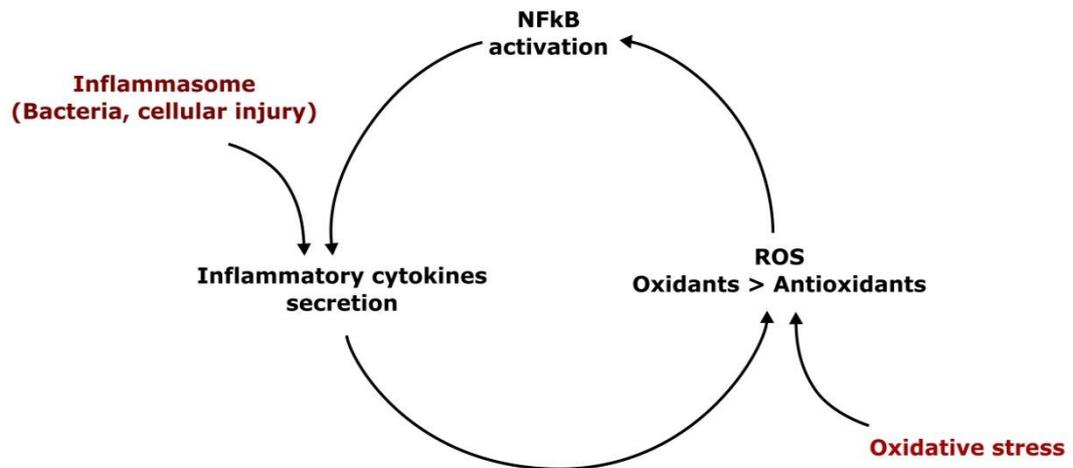
Lipid rafts (LR or membrane rafts) are microdomain clusters on the cellular membrane which consist of phospholipids, sphingolipids and sterols. LRs interact with proteins (e.g. receptors) providing biological functions such as redox signaling. LR functions depend on the major proteins in rafts e.g. calcium channel rafts (functioned as ion channels activity), GPCR rafts (GPCR cellular signaling), and raft-cytoskeleton (Fas signaling) (Jin, Zhou, Katirai, & Li, 2011).

LR also plays crucial roles on NOX controlling redox signaling by forming NOX-lipid rafts platform (Ushio-Fukai, 2006). At the cellular membrane, ROS can be generated by NADPH oxidase (NOX) which can be found in physiological and pathological conditions (Bedard & Krause, 2007). NOX-dependent ROS oxidises cysteine residues activating many transcription factor such as NFκB and Ras as well as inducing TNFα and TGFβ1 (Bedard & Krause, 2007). Moreover, NOX can be activated by calcium signaling. NOX can regulate calcium channels (L-type channels, stored-operated calcium channels, Ca<sup>2+</sup> ATPase pump) resulting in increased intracellular calcium (Bedard & Krause, 2007).

### 5.1.7 Interplays between ROS and inflammatory pathways

Inflammation is a major cause of oxidative stress (Chatterjee, 2016) and, as has been discussed, ROS can induce inflammation (Biswas, 2016) Thus, It is difficult to specify whether ROS or inflammation firstly triggers these inflammation-ROS signals. If the process is started with inflammation induced ROS production, the inflammation may be initiated as MSCs are exposed to stimuli such as bacteria or tissue injury. These inflammasomes, in turn, activate ROS production from mitochondria and the cellular membrane (via NADPH oxidase) together with inducing ER stress and calcium influx. These signals then activate thioredoxin-binding protein and NLRP3 to produce IL-1 $\beta$  (Abais, Xia, Zhang, Boini, & Li, 2015). However, oxidative stress can also induce inflammation by itself. Chronic ROS exposure can activate NF $\kappa$ B which is a sensor of oxidative stress that links cell survival pathways (Morgan & Liu, 2011; Oliveira-Marques, Marinho, Cyrne, & Antunes, 2009; T. Wang et al., 2002), it also activates TNF $\alpha$  (Blaser, Dostert, Mak, & Brenner, 2016), IL-1 $\beta$  (via NLRP3) (Abais et al., 2015; Chang Hyun Byon et al., 2008), caspases (Higuchi, Honda, Proske, & Yeh, 1998) as well as activator protein 1 (AP-1; links to cell growth or apoptosis) (Ferreira Mendes, Caramona, Carvalho, & Lopes, 2003). These signals explain why inflammatory cascades are activated (Lugrin, Rosenblatt-Velin, Parapanov, & Liaudet, 2014; Reuter,

Gupta, Chaturvedi, & Aggarwal, 2010). The cycle of ROS-inflammation is illustrated in **Figure 5.3**.



**Figure 5.3 Vicious cycle of ROS and inflammatory response**

ROS can induce inflammation. However, inflammation also enhances ROS production. Uncontrolled inflammasomes or oxidative stress, drive this cycle leading to apoptosis.

### 5.1.8 MSCs play roles in inflammation

Theoretically, inflammatory cells exposed to exogenous (pathogen) or endogenous (soft tissue damage) stimuli present pathogen-associated or damaged associated molecular patterns (PAMPs or DAMPs) which can be recognized by pattern recognition receptors (PRRs) e.g. Toll-like (TLRs on the cell membrane) and NOD-like (NLRs in cytoplasm) receptors. Both receptors activate NF $\kappa$ B signaling pathway which is a major inflammatory regulator producing inflammatory cytokines (Lugrin et al., 2014).

MSCs also have TLRs which can respond to DAMPs (e.g. heat shock protein; HSP60, HSP70) and PAMPs (e.g. bacteria) (Shirjang, Mansoori, Solali, Hagh, & Shamsasenjan, 2017). Regarding MSC polarization, MSCs can express pro-inflammatory or anti-inflammatory phenotype depending on environments (Bernardo & Fibbe, 2013). In an inflammatory environment, MSCs interact with other MSCs through TLR secreting TGF $\beta$ , PGE2, NO and indoleamine 2,3-dioxygenase (IDO) (Mellor, Lemos, & Huang, 2017; Putra et al., 2018). Moreover, MSCs also produce IL-6 to convert monocytes to M2 macrophages which, in

turn, produce IL-10 giving anti-inflammatory effects (Bernardo & Fibbe, 2013).

#### **5.1.8.1 Inflammation and metabolomics; role of long chain polyunsaturated fatty acids (LC-PUFAs) and inflammation**

Long chain polyunsaturated fatty acids (LC-PUFAs), are essential fatty acids derived from linolenic and linoleic acid desaturation and elongation. LC-PUFAs consist of n-3 and n-6 fatty acids (or omega-3 and omega-6). Omega-3 is known to be anti-inflammatory while omega-6 is pro-inflammatory (Borges, Santos Fde, Telles, Correia, & Lanna, 2014).

Omega-3 and omega-6 require  $\Delta 5$ -desaturase to synthesize LC-PUFAs; Omega-6 requires  $\Delta 5$ -desaturase to produce arachidonic acid (AA) which synthesizes high grade inflammatory metabolites (e.g. thromboxane, prostaglandins) by cyclooxygenase (COX) and lipoxygenase (LOX). While omega-3s such as eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) also use  $\Delta 5$ -desaturase to synthesize low grade inflammatory metabolites by COX and LOX (e.g. leukotrienes) (Kruger, Coetzee, Haag, & Weiler, 2010). Increased levels of n-3 PUFAs competitively use  $\Delta 5$ -desaturase with n-6 PUFAs to synthesize eicosanoids. Thus, there is evidence that omega-3 PUFAs may indicate a shift of high to low grade synthesis reducing inflammation level (Calder, 2001).

PUFAs might enhance osteogenic differentiation depending on their levels (Martinez-Ramirez et al., 2007). Optimal (low) level of PUFAs may promote TGF $\beta$ 1 and insulin like growth factor (IGF) which are essential for differentiation (Kruger et al., 2010). However, some evidence has shown that DHA could inhibit alkaline phosphatase expression but did not involve mineralization studied in MC3T3-1 osteoblast-like cells (Coetzee, Haag, & Kruger, 2009). Moreover, omega-3 also has antioxidative effects (through Nrf2-HO-1) (Giordano & Visioli, 2014; Kusunoki et al., 2013; Richard et al., 2008). Interestingly, PUFAs can also regulate TRP channels via PKC (Ciardo & Ferrer-Montiel, 2017; Sisignano, Bennett, Geisslinger, & Scholich,

2014). As NS may activate osteogenesis via TRPV1, thus, the role of PUFAs during NS should be investigated.

## 5.2 Aims and objectives

1. To study the metabolomic response of MSCs on high amplitude NS.
2. To study the effect of high amplitude stimulation in 3D osteogenesis in terms of biological response.
3. To Identify related inflammatory pathways which are involved in osteogenic differentiation

## 5.3 Methodology and experimental design

### 5.3.1 Metabolomics

Stro1-selected MSCs seeded with  $4 \times 10^4$  cells/ml density in 1.8 mg/ml collagen hydrogels were stimulated with N30 and N90. After 1 and 2 week, NS the gels were homogenized on ice, and metabolites were then extracted using a Chloroform/Methanol/water (1:3:1 ratio) extraction buffer. Samples were agitated on a shaker at 4°C for 1 hour and in turn centrifuged at 13,000xg at 4°C for 5 minutes. Supernatants were transferred to and analysed by the Glasgow Polyomics team. Hydrophilic interaction liquid chromatography-mass spectrometry was performed (Dionex, UltiMate 3000 RSCL system, Thermo Fisher Scientific, Hemel Hempstead, UK) using a ZIC-pHILIC column (150 mm x 4.6 mm, 5  $\mu$ m. column, Merck Sequant). The datasets were processed using XCMS (peak picking), MzMatch (filter and grouping), IDEOM (post processing filtering and identification). Metaboanalyst was used to generate heatmaps and PCA analysis. KEGG database and Ingenuity Pathway Analysis (IPA) software were used for metabolomic pathway analysis.

### 5.3.2 qRT-PCR and protein inhibition test

In all qRT-PCR studies,  $4 \times 10^4$  cells/ml of Stro1-selected MSCs seeded in 1.8 mg/ml collagen hydrogels was prepared and stimulated with N30 and N90. For the temporal gene study, the samples were

harvested at day 7, 14 and 21. The samples were digested with collagenase. The techniques of RNA extraction and purification as well as cDNA synthesis were mentioned in **Chapter 2 section 2.8**. For qRT-PCR with the inhibition test, hydrogels were stimulated for 9 days. All inhibitors (ERK1/2, JNK, p38, TNF $\alpha$ , NF $\kappa$ B inhibitors) were mixed with basal media which were changed at day 2, 5 and 8. The functional concentration of inhibitors in media was shown in **chapter 2 section 2.12**.

### **5.3.3 In-Cell Western with protein inhibition test**

Stro1-selected MSCs were seeded in 24 well-plates with the density of 10,000 cells/well. MSCs then were stimulated with N30 and N90 for 7 days. Culture media was added with ERK1/2, JNK, p38, TNF $\alpha$ , and NF $\kappa$ B inhibitors (functional concentration of inhibitors in media was shown in **Chapter 2, section 2.12**). Media was changed at day 2 and day 5. In-Cell Westerns were performed at day 7 (technique described in **chapter 2 section 2.10**).

### **5.3.4 ROS measurement by DCF-DA with flow cytometry**

Stro1-selected MSCs seeded with  $4 \times 10^4$  cells/ml density in 1.8 mg/ml collagen hydrogels were stimulated with N30 and N90 for 7 day. The samples were incubated in 2.5 mg/ml collagenase for 1 hour and were then centrifuged at 200xg for 4 minutes. Following that, the cell pellets were incubated for 1 hour in 2  $\mu$ M 2',7'- dichlorodihydrogen-fluorescein diacetate (H<sub>2</sub>DCF-DA, Invitrogen) in phenol red free media (Sigma, D5030). In the positive control group, 500  $\mu$ M hydrogen peroxide was added. After incubation, the samples were then centrifuged and resuspended in 250  $\mu$ l of flow cytometry buffer (2% FBS, 2 mM EDTA in PBS) and transferred to 96 well plates. Resuspended MSCs in 96 well plates were incubated for 30 minutes. Signal of H<sub>2</sub>DCF-DA fluorescein was detected by using flow cytometry at 492-295 nm of excitation and 517-527 nm of emission.

### **5.3.5 Mitotracker**

Stro1-selected MSCs with  $4 \times 10^4$  cells/ml of density in hydrogels were prepared. After 7 days stimulation, samples were digested using collagenase D. Cells were centrifuged to obtain pellets and resuspended with 100 nM final concentration of Mitotracker Green (FM, M7514, Invitrogen). The incubation lasted for 45 minutes and the

cells were then resuspended in prewarmed flow cytometry buffer (2% FBS, 2 mM EDTA in PBS). Flow cytometry was done immediately to detect fluorescence emission at 490 nm of excitation and 516 nm of emission.

### **5.3.6 Mitochondrial activity measurement (JC-1)**

To study the mitochondrial activity, Stro1-selected MSCs with  $4 \times 10^4$  cells/ml of density in hydrogels were stimulated with NS for 7 days. The samples were harvested at day 7 and digested in collagenase D for 1 hour. After centrifuging the cell pellets were treated with 2  $\mu$ M (final concentration) of 5',6,6'-tetrachloro-1,1',3,3'-tetraethylbenzimidazolylcarbocyanine iodide (JC1, M34152, Molecular probes) for 30 minutes at 37°C. In the control group, 50  $\mu$ M (final concentration) of CCCP was added and incubated at 37°C for 5 minutes. The mitochondria membrane potential was detected by flow cytometry. The fluorescence emissions were measured at green (529 nm) and red (590 nm) channels.

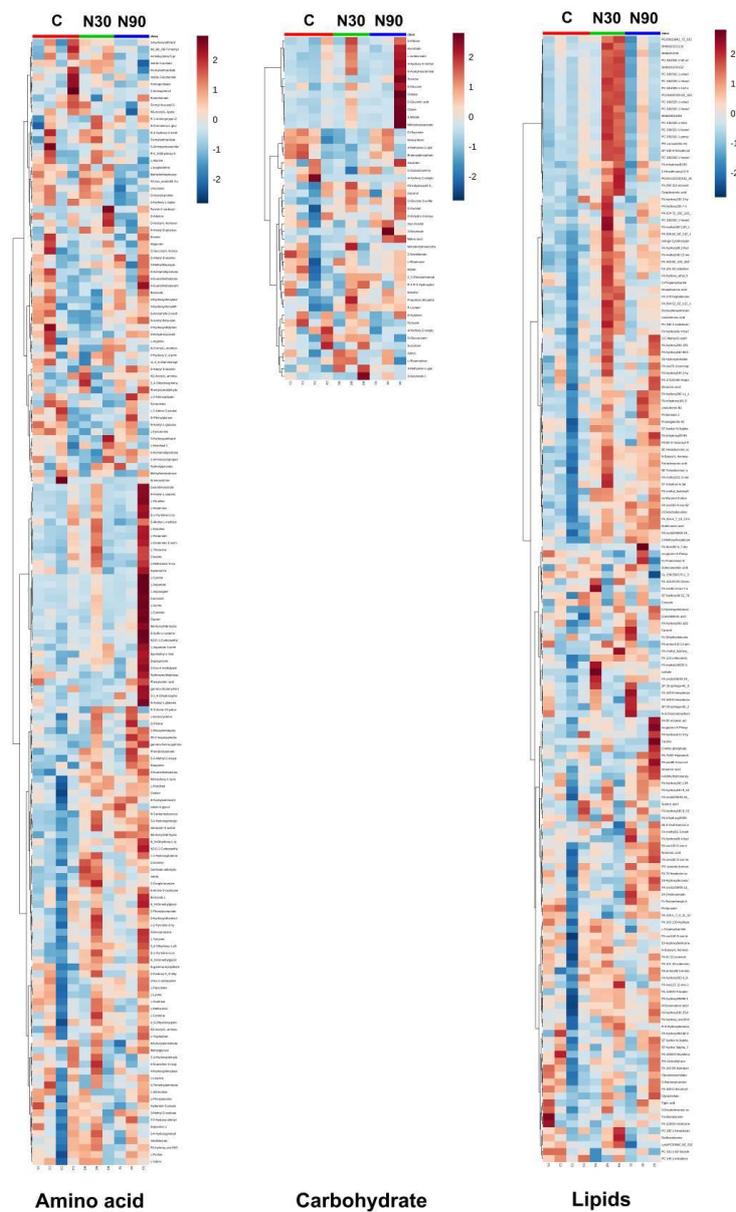
## 5.4 Results and discussion

### 5.4.1 Metabolomic assessment

In this study, metabolomics was used to search the NS-induced activation of bioenergetic-based pathways. Overall, metabolomic changes were firstly analysed broadly in order to scope out where more specific study should be focused. Then, interesting metabolites related to energy synthesis and oxidative stress pathways were selected and analysed in more depth. To correlate metabolomic results with biochemical signaling, the IPA software was used to create predicted activated networks from total metabolite data vs control.

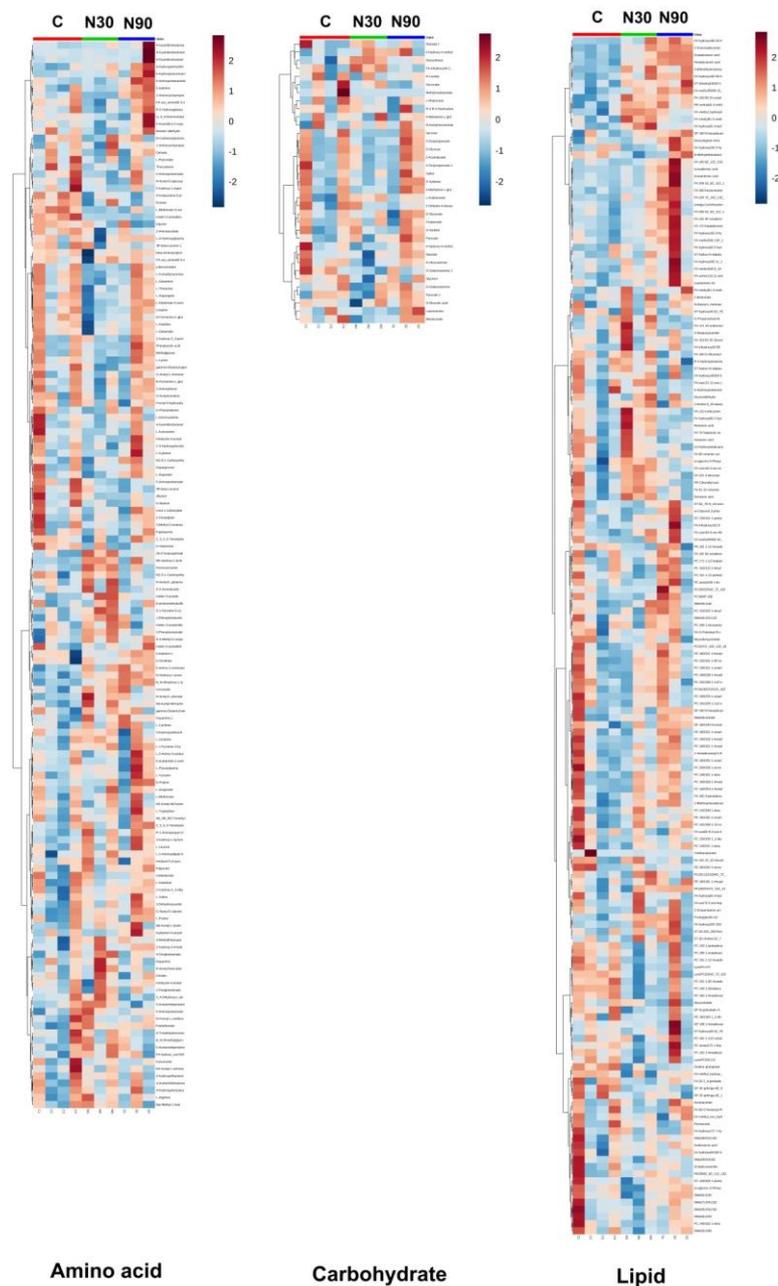
#### 5.4.1.1 Clustered metabolite assessment

To identify associated metabolites of MSCs responding to NS, major nutrient metabolisms including carbohydrate, amino acid and lipid metabolism were studied. Metaboanalyst was used to identify overall metabolomic changes. Heatmaps showed that N30 and N90 increased the activated metabolites, especially in lipid metabolism (**Figure 5.4 and 5.5**). Principle component analysis (PCA) showed the most obvious changes. There is clear clustering of the samples into different, isolated groups in lipid metabolism at week 2, suggesting discrete metabolite phenotypes for each sample at this time point. However, amino acid metabolome of N90 was still clustered together (**Figure 5.6 and 5.7**).



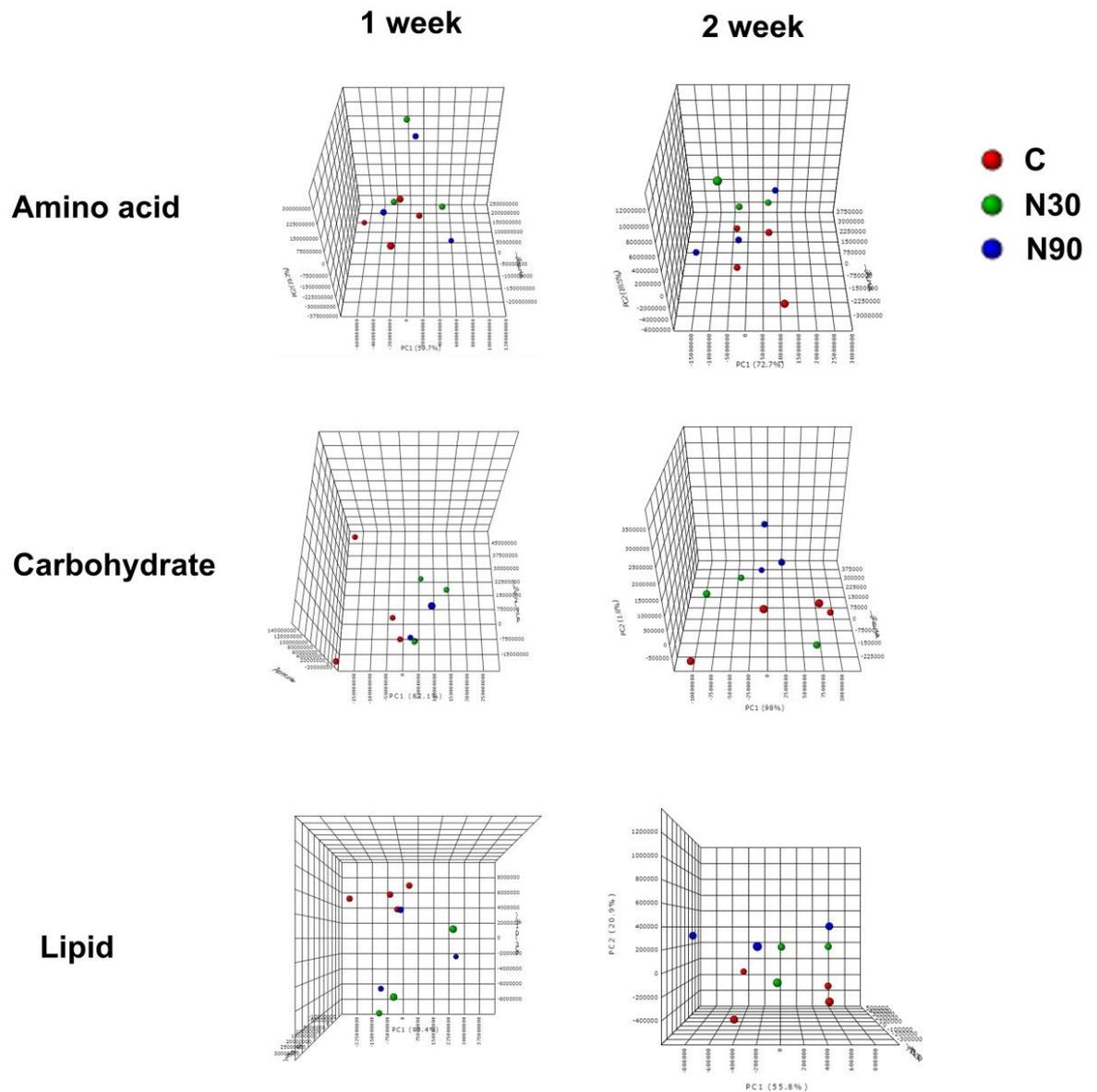
**Figure 5.4 Heatmap at week 1 of NS**

Amino acid, carbohydrate and lipid metabolism after 1 week of Stro1 selected MSCs being seeded in 1.8 mg/ml collagen hydrogels analysed by Metaboanalyst. Although there was only a small change in carbohydrate and amino acid metabolism in response to N30 and N90, the lipid metabolism demonstrated the greatest changes particularly in N90 group (n=3-4; red and blue representing up and down regulation respectively, C=control, N30= 30 nm amplitude N90= 90 nm amplitude).



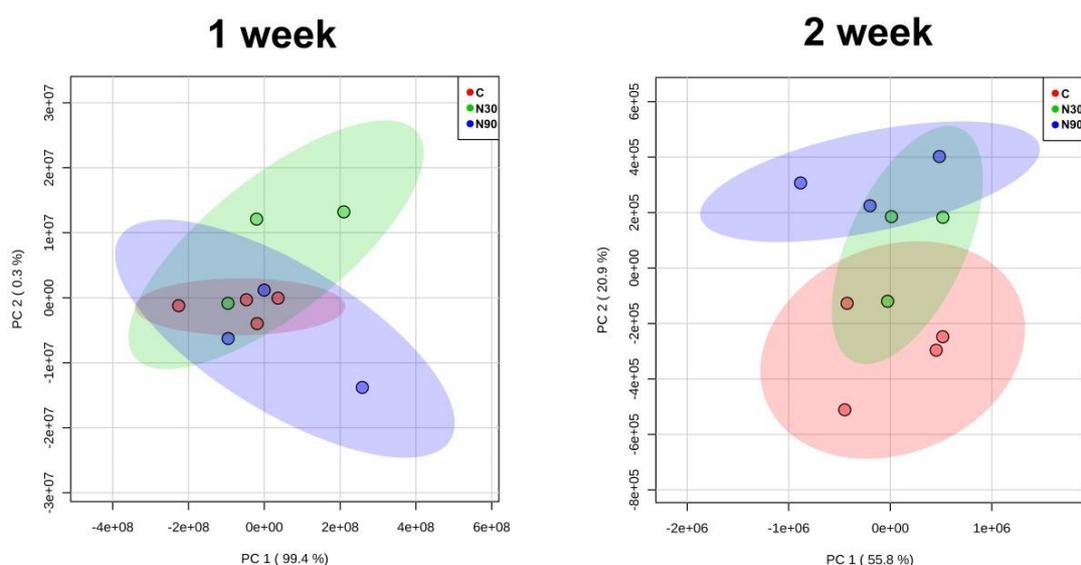
**Figure 5.5 Heatmap at week 2 of NS**

The lipid metabolism showed an increase in metabolite abundance in response to N90. No obvious change in amino acid and carbohydrate metabolites ( $n=3-4$ ; red and blue representing up and down regulation respectively, C=control, N30= 30 nm stimulating amplitude N90= 90 nm stimulating amplitude).



**Figure 5.6 3D Principle component analysis**

3D Principle component analysis of carbohydrate, amino acid and lipid metabolism at 1 and 2 week time points; Lipid showed the most discrete metabolome in response to N90 at 1 and 2 weeks. Only minor changes in carbohydrate and amino acid metabolism (n=3-4).



**Figure 5.7 2D Principle component analysis of lipid metabolites**

Considering only lipid metabolites at week 1, the lipid metabolites of all groups remain clustered together. At week 2, the N90 metabolites showed a clear separation from the control group indicating that NS (especially N90) involved lipid metabolism (n=3-4).

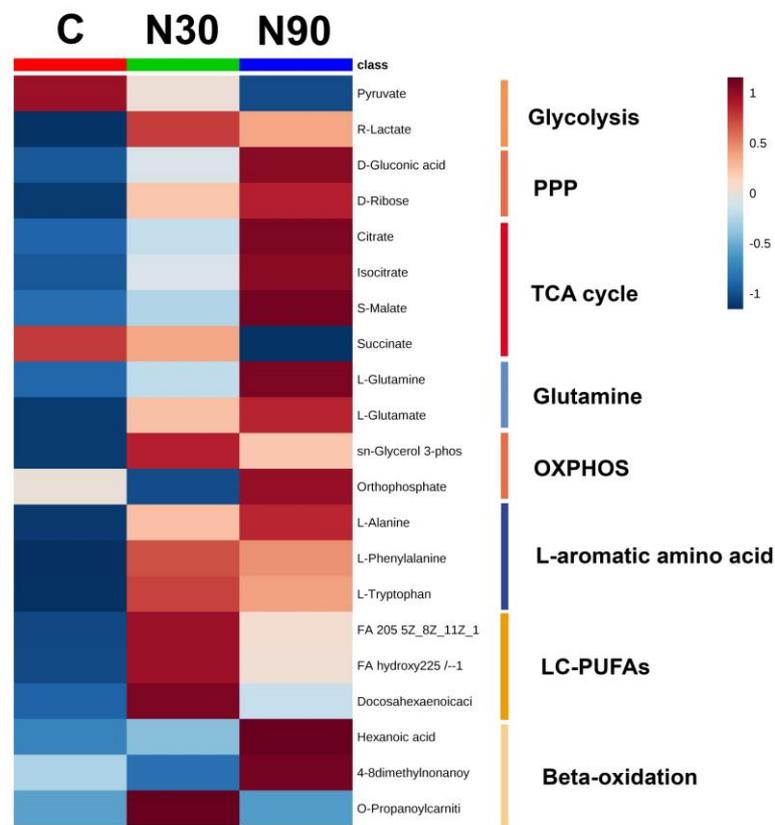
#### 5.4.1.2 Metabolomic profile assessment

In order to spotlight specific metabolite pathways linking to osteogenesis, the selection of metabolites involving glycolysis, pentose phosphate pathway, TCA cycle, oxidative phosphorylation (OXPHOS), L-, and L-aromatic amino acid, Long-chain polyunsaturated fatty acids (LC-PUFAs) and  $\beta$ -oxidation was performed. These metabolites were selected from the IDEOM file. Metaboanalyst software was used to generate the heatmaps.

At week 1, the heatmap in figure 5.8 displayed that the metabolites of N90 group are an increased PPP product (ribose) with decreased pyruvate indicating that MSCs responded to oxidative stress by controlling redox balancing. Active metabolites of TCA cycle were found suggesting that MSCs required rapid energy through amino acid (via glutamine), lipids (via  $\beta$ -oxidation) and glycerol-3-phosphate (G3P) shuttle. The increase of LC-PUFAs was found only in N30 group.

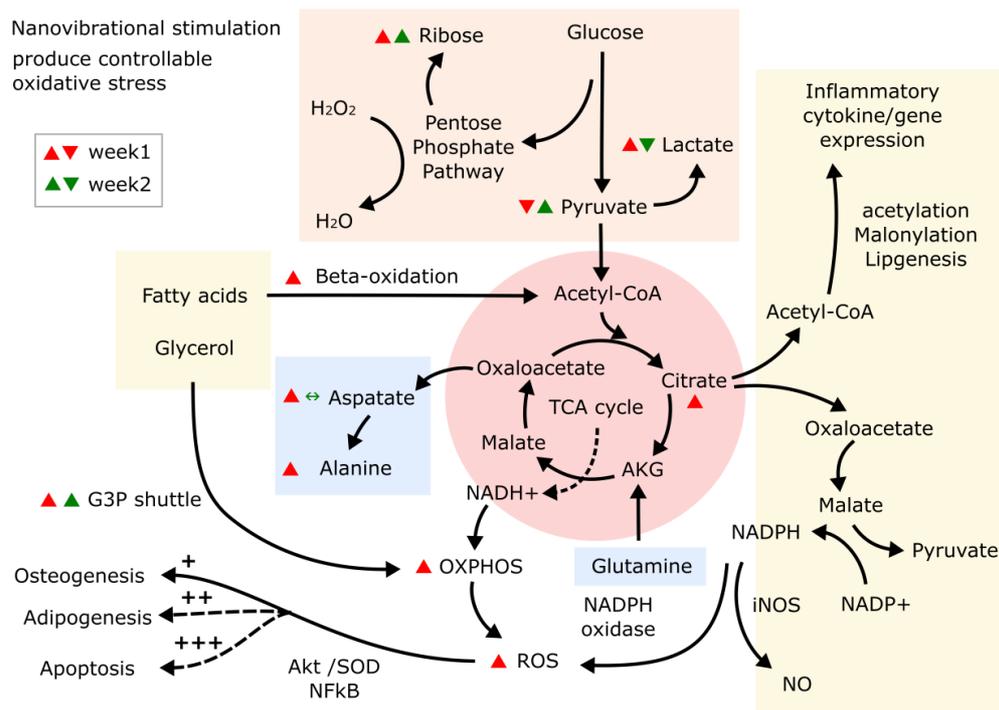
Thus, it was hypothesised that N30 may synthesised LC-PUFAs possibly aiming for anti-inflammatory effect (**Figure 5.8**).

Overall, from week1-2 (**Table All.1**), N90 slightly increased pentose phosphate pathway products (**Figure All.2 and All.3**), LCPU-FAs (precursor of inflammatory metabolites; **Figure All.8**),  $\beta$ -oxidation (lipid catabolism; **Figure All.9**), L-amino acid (linking to calcium sensing receptor; **Figure All.6**) as well as glycerol-3-phosphate shuttle (relating to rapid ATP production) and OXPHOS (linking to reactive oxygen species and osteogenesis; **Figure All.5**). Further details are shown in **Appendix II**.



**Figure 5.8** Heatmaps at week 1 of main nutrient pathways.

At week 1, active metabolites in TCA cycle were found indicating that N90 is an energetic process. MSCs required rapid energy from  $\beta$ -oxidation and G3P shuttle. Increased PPP suggested that redox balancing was involved to reduce oxidative stress (N=3).

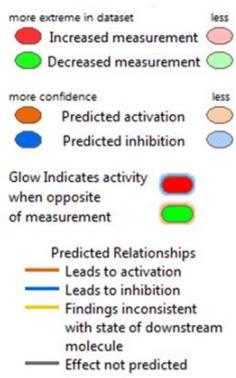


**Figure 5.9 Metabolomic change during high amplitude stimulation at week 1 and 2**

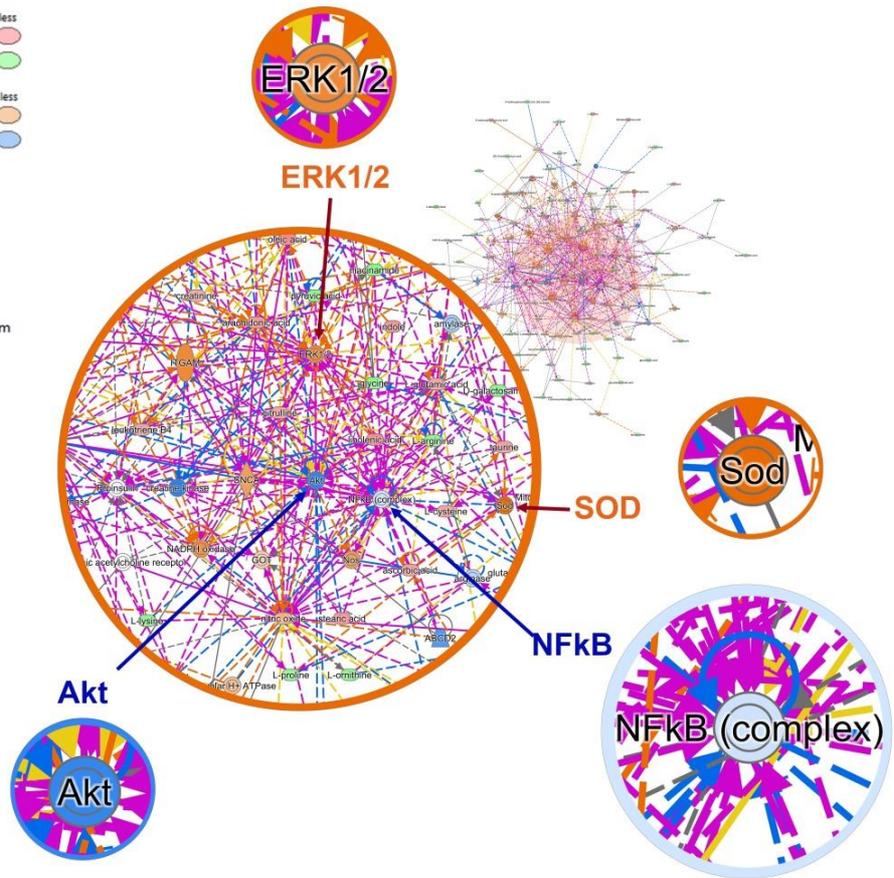
N90 activated energetic pathways such as OXPHOS, glycerol-3-phosphate shuttle and  $\beta$ -oxidation. Metabolic pathways were potentially slightly modulated to reduce oxidative stress (indicated by activation of PPP).

#### 5.4.1.3 Predicted activated networks after 1 week stimulation

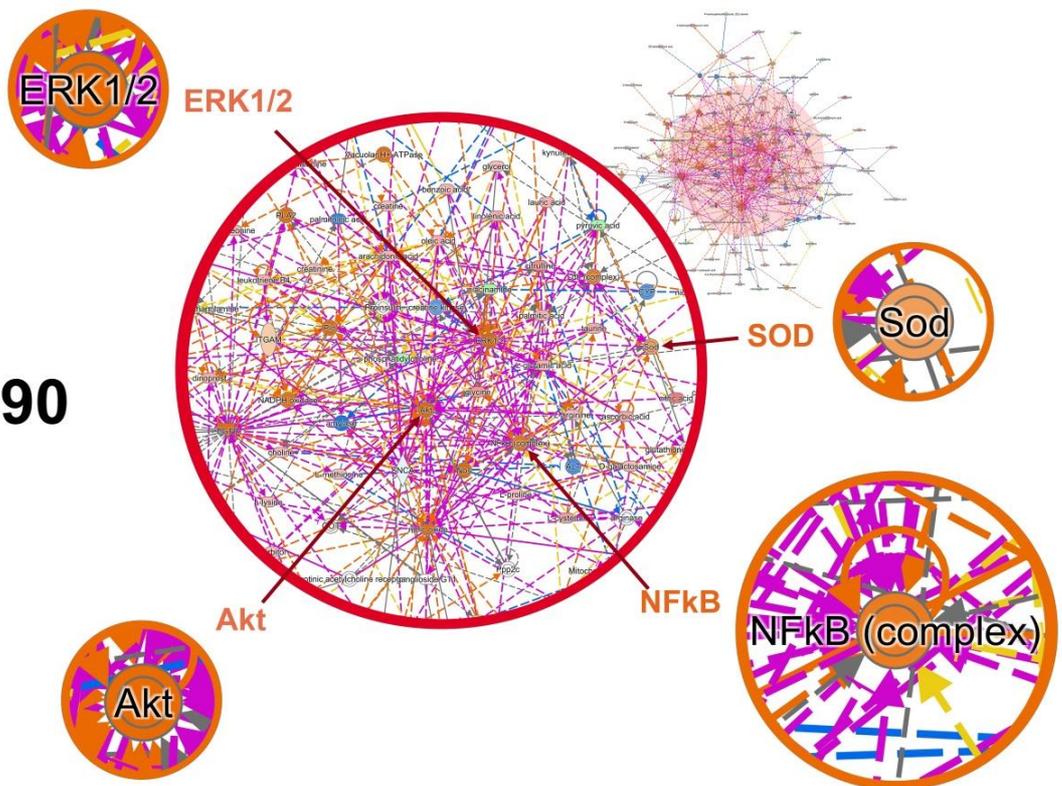
The IPA software was then used to link metabolomics to biochemical pathways through prediction analysis. After 1 week stimulation (Figure 5.10), N30 was predicted to enhance ERK1/2 and superoxide dismutase (SOD) indicating that N30 produced slight oxidative stress which was counterbalanced by SOD. In the N90 group, the activation of SOD, phosphatidylinositol-3 kinase (PI3K or Akt) and NF $\kappa$ B were indicated. SOD, Akt (antiapoptotic function), and NF $\kappa$ B (cell survival signaling) are linked to antioxidant function (C. T. Chen et al., 2008; L. Wang et al., 2015). These data indicate that N90 possibly provides higher levels of oxidative stress compared to N30 and required higher level of counterbalance mechanism to reduce cellular stress maintaining cell survivals.



**N30**



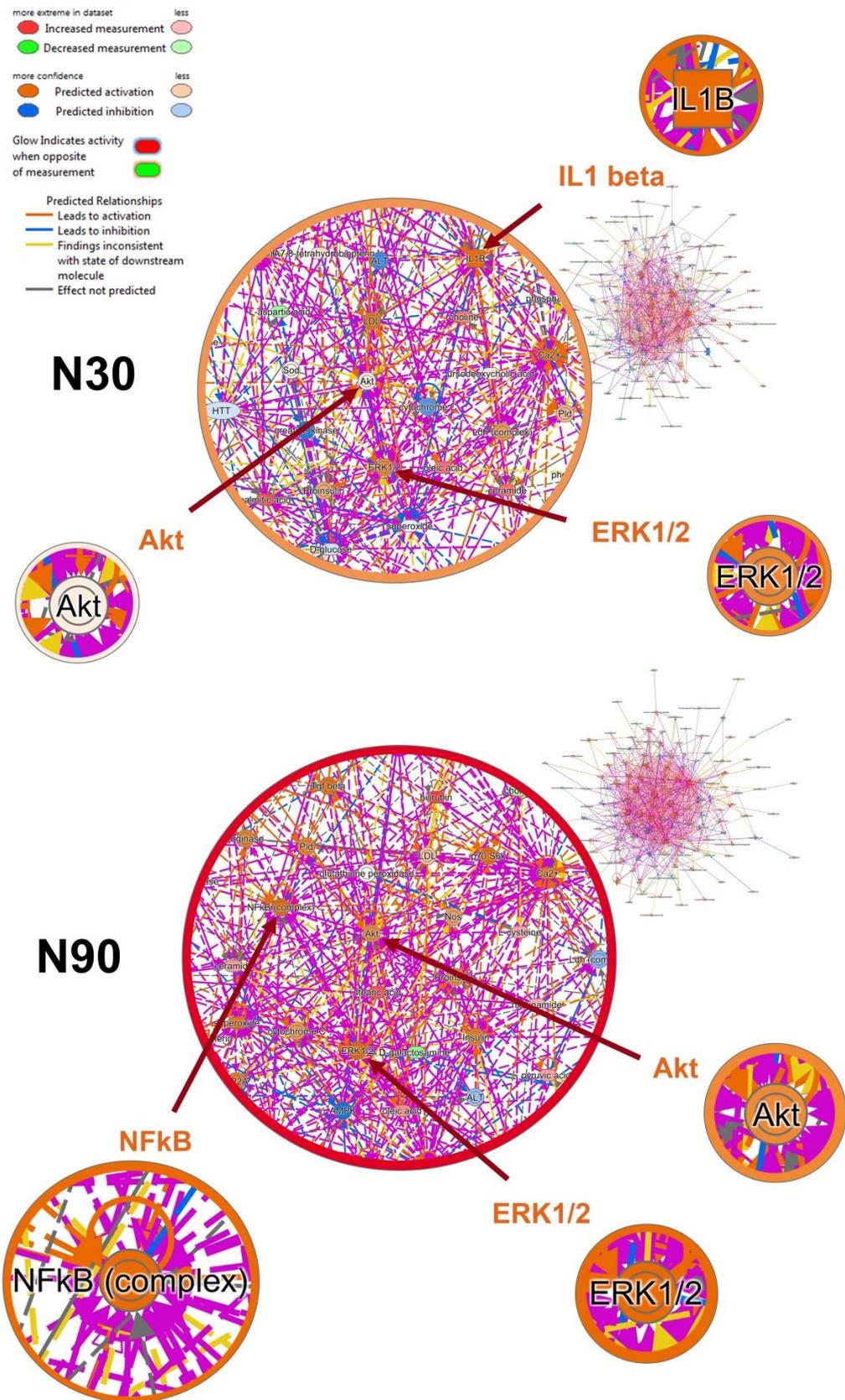
**N90**



**Figure 5.10 Networks with predicted activation at week 1**

NS, both N30 and N90, activate the ERK1/2 pathway which is crucial for osteogenesis. Stimulation with 30 and 90 nm both generated controllable cellular stress. N30 and N90 activated SOD for ROS reduction. Increasing stimulating amplitude (N90) also triggered Akt and NFκB. This can be interpreted that N90 produced the higher level of counterbalance system such as NFκB, SOD, Nitric oxide synthase (NOS) and Akt aiming for anti-apoptosis. (n=3-4, Networks were merged from the top 4 pathways of N30 and N90; scores/focus molecules were 47/24, 47/24, 45/23, and 42/22 respectively).

At 2 weeks, a predicted increased response in antioxidant mechanism was found in both N30 and N90. In the N30 group, IL-1β and Akt activation was noted compared to week1. The degree of NFκB and Akt activation in N90 were increased at 2 weeks (**Figure 5.11**). This result indicated that increased duration of stimulation possibly enhanced oxidative stress as a function of time.



### **Figure 5.11 Predicted activated networks at week 2**

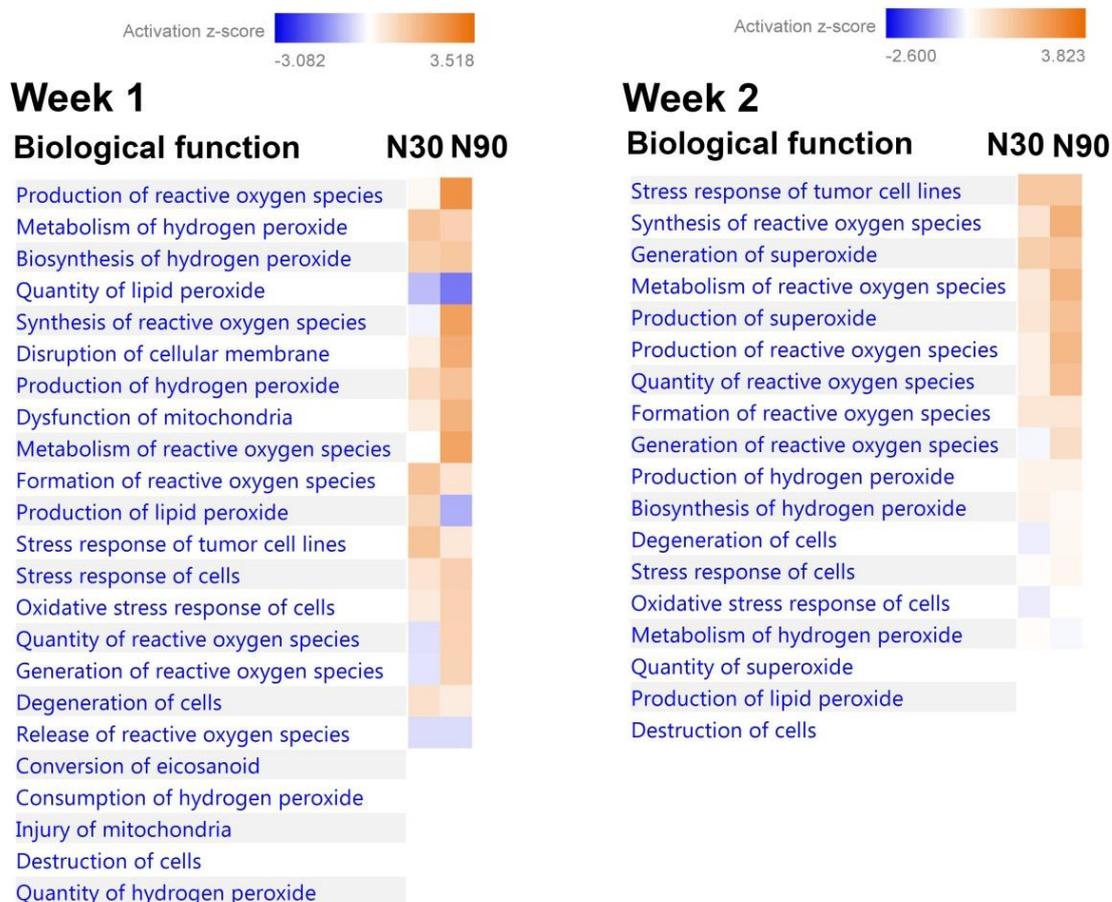
Compared to week1, an increase in antioxidative pathways was found. In the N30 group, Akt, ERK1/2 and IL-1B activation was newly noted from week1. Predicted activation of NFκB, Akt and ERK1/2 was increased compared to week1 in N90 (n=3-4, Networks were merged from the top 4 pathways of N30 and N90; N30 score/focus molecules were 52/25, 49/24, 38/20, and 28/16; N90 were 51/25, 49/24, 38/20, and 26/15 respectively).

### **5.4.2 Nanovibrational stimulation effect on reactive oxygen species and mitochondrial activity**

From the previous section, NS possibly enhances oxidative stress. Slight increase of PPP (gluconic acid, ribose) and glycolytic (pyruvate, lactate) pathways may link to redox balancing in oxidative stress condition (E. S. Cho et al., 2018; Kuehne et al., 2015). Moreover, small increases of LC-PUFAs may promote ROS reduction. Therefore, the evidence of ROS production was analysed and quantified.

#### **5.4.2.1 Molecular and functional pathway analysis**

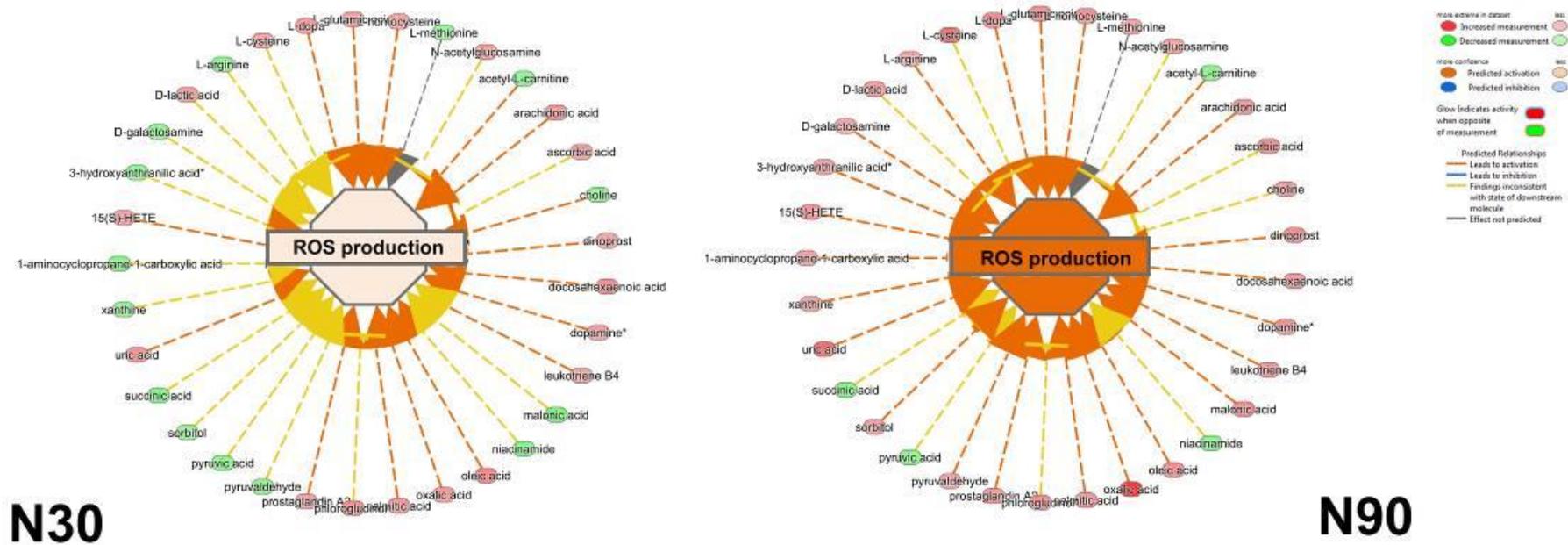
The IPA software was again used to predict and compare molecular and functional pathways in aspect of oxidative stress. At 1 and 2 weeks, heatmaps of activation Z-score showed NS activated inflammatory metabolites and reactive oxygen species (ROS). Increased stimulating amplitude (N90) showed higher activation of ROS production and cellular stress (**Figure 5.12**).



**Figure 5.12 Heatmap of activation z-score of molecular and cellular function in respect to cellular stress and ROS production at weeks 1 and 2**

N90 indicated greater ROS production and cellular stress in both 1 and 2 week cultures. The heatmap gradient was scaled from blue (representing inhibition) to orange (activation) whereas z score  $>2.0$ , predicted activation Z score  $<-2.0$  predicted inhibition (n=3-4).

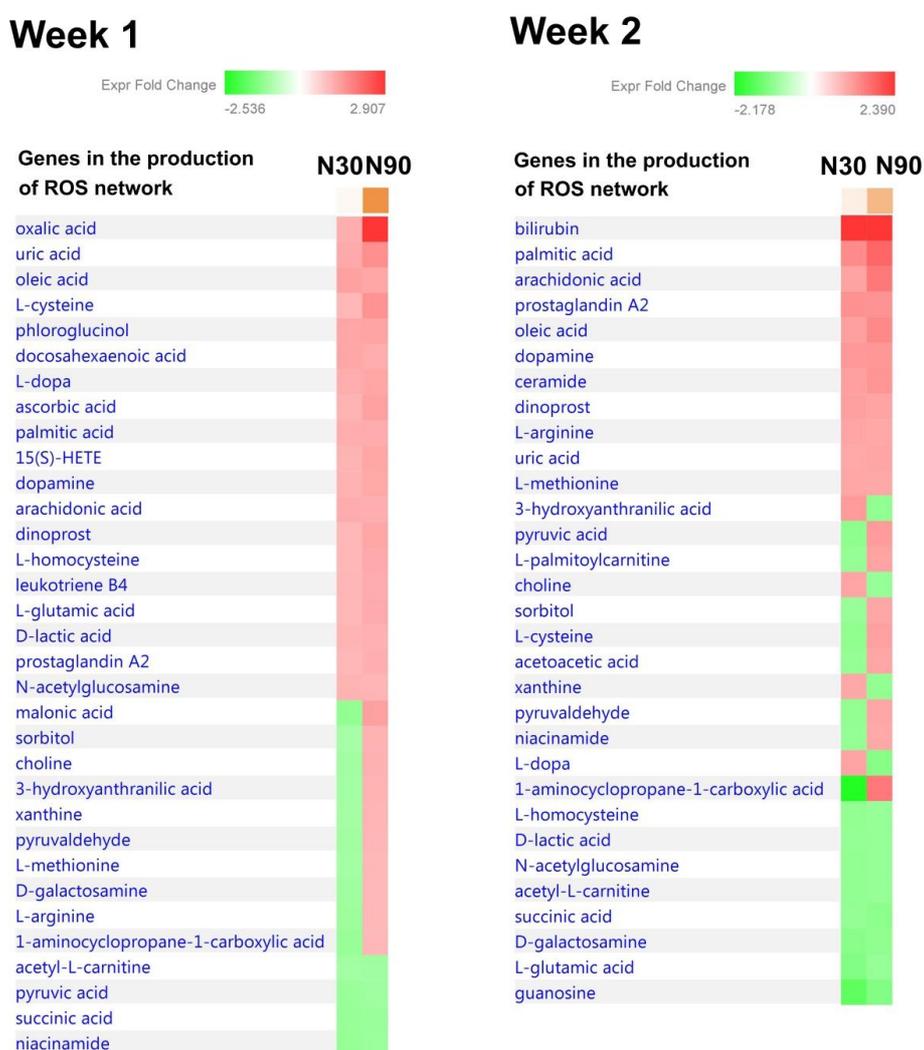
To further investigate the ROS-production related metabolites, IPA was used to generate the metabolite network of ROS production. Interestingly, high amplitude stimulation (N90) increased ROS production linked metabolites compared to N30 (Figure 5.13).



**Figure 5.13 Related metabolites of ROS production in N30 and N90 at week 1**

High amplitude stimulation (N90) increased active ROS production related metabolites compared to N30. (n=3-4, Orange representing predicted functional activation while blue showing the predicted inactivation, green and red representing increase and decrease measurement respectively).

IPA was used to generate heatmaps of metabolites relating to ROS production. The increase of the stimulating amplitude (N90) activated stronger signals and involved higher number of ROS related metabolites such as malonic acid, which has mitochondrial toxicity and induces ROS production (Fernandez-Gomez et al., 2005). Palmitic acid, which induces oxidative stress by involving intracellular calcium balance, was found to be increased at week 2 (Nissar, Sharma, & Tasduq, 2015). The increase of uric acid in N90 may play a role as antioxidant (Glantzounis, Tsimoyiannis, Kappas, & Galaris, 2005) (Figure 5.14).

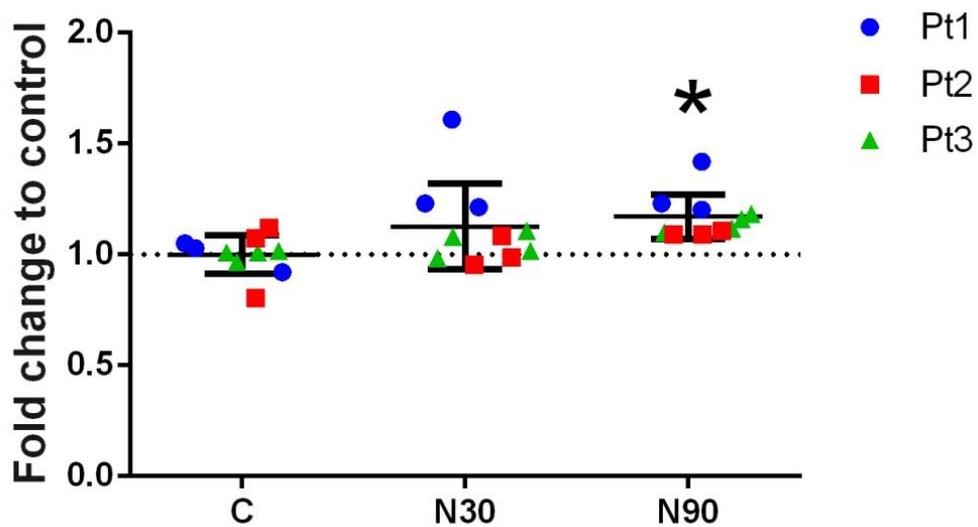


**Figure 5.14** Heatmap metabolites related to ROS at 1 and 2 week.

High amplitude stimulation (N90) increased active metabolites related to ROS production. (n=3-4, Red; increased measurement; green; decreased measurement).

### 5.4.2.2 Reactive oxygen specie measurement

To measure ROS production, Stro1 selected MSCs in 1.8mg/ml collagen were prepared and stimulated with N30 and N90 for 7 days. The 2'-7-dichlorodihydrofluorescein diacetate (DCF-DA) fluorescein was used to quantify ROS production. Flow-cytometry was performed to detect the labelled cells at day 7. A significant increase of ROS production was noted in N90 compared to control (**Figure 5.15**).



**Figure 5.15** Reactive oxygen species measurement

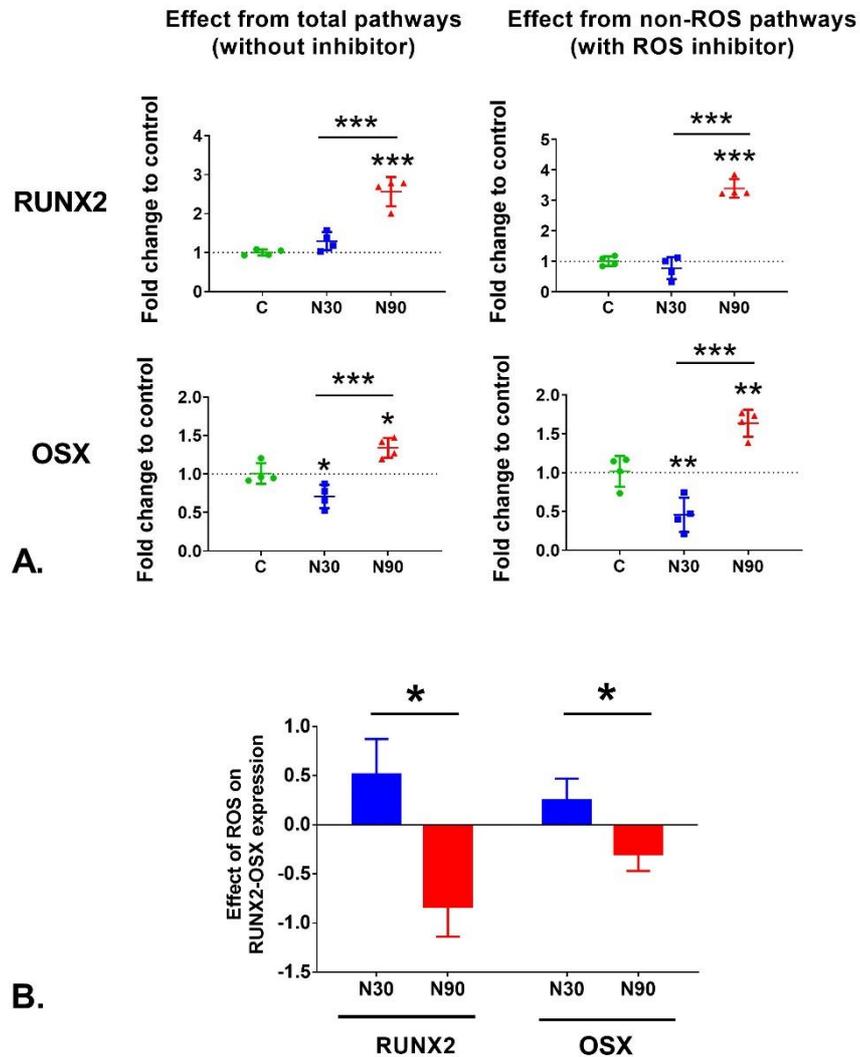
By using DCF-DA fluorescein and flow cytometry, high amplitude stimulation (N90) was seen to significantly increase cellular ROS production corresponding to my previous metabolomic study (mean $\pm$ SD, n=3-4, 3 patients (Pt 1-3), \*  $P \leq 0.5$ , one-way ANOVA, Tukey's post hoc test, Pt1-3; patient 1-3).

### 5.4.2.3 The effect of Nanovibrational stimulation induced reactive oxygen species on 3D osteogenesis

It is known that controllable ROS enhances osteogenesis but uncontrollable ROS suppresses osteogenesis (M. Arai et al., 2007; Atashi et al., 2015; C. H. Byon et al., 2008). Therefore, the effect of ROS on 3D osteogenesis during NS was studied by qRT-PCR with ROS inhibition (N-acetyl cysteine; NAC) for 9 days of culture. The ratio to control of qRT-PCR with ROS inhibitor for RUNX2 and OSX were calculated. This ratio represented RUNX2 and OSX which are affected by the ROS-independent pathways. After that, the ratio to control of RUNX2 and OSX without ROS inhibition (thus, representing RUNX2 and OSX which were derived from the total pathway; both ROS dependent and independent pathways) was also calculated. The effect of ROS on RUNX2 (or OSX) expression was calculated from the difference of RUNX2 (or OSX) from total pathway to RUNX2 (or OSX) from ROS independent pathway. To interpret the results, positive outcomes represented enhancing- while negative outcomes mean reducing RUNX2 (or OSX) expression.

In the N30 group, RUNX2 and OSX downregulation was noted after inhibiting ROS (**Figure 5.16A, right**). Together with RUNX2 and OSX outcomes in **Figure 5.16B** showing positive values, N30-induced ROS enhanced RUNX2 and OSX expression at day 9. Considering N90, N90 significantly promoted RUNX2 and OSX expression (**Figure 5.16A, left**). However, an increase of ratio to control of RUNX2 and OSX was noted after inhibiting ROS (**Figure 5.16, right**) as well as ROS effect of N90 were noted in negative value (**Figure 5.16B**). Thus, N90-induced ROS slightly reduced RUNX2 and OSX expression. Even though

ROS negatively affected RUNX2 and OSX expression, N90 still highly induced RUNX2 and OSX expression (Figure 5.16A, left).



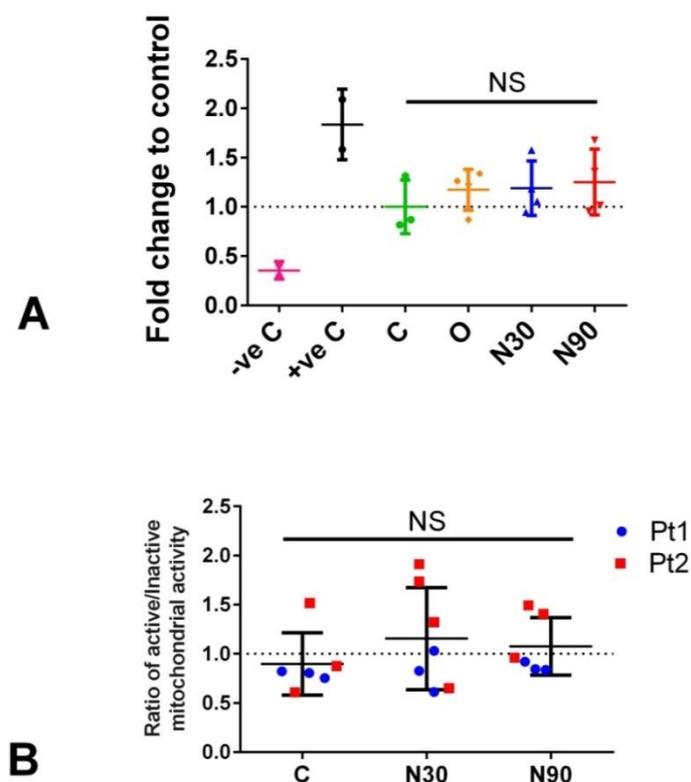
**Figure 5.16** The effect of ROS on RUNX2 and OSX expression by qRT-PCR with ROS inhibition at day 9.

- A) N90 significantly induced RUNX2 and OSX expression (left). After inhibiting ROS with N-acetyl cysteine, an increase of ratio to control of RUNX2 and OSX indicated that ROS slightly reduced RUNX2 and OSX expressions. In N30 group, RUNX2 and OSX expression was reduced after inhibiting ROS, which indicated that N30-induced ROS was important for RUNX2 and OSX expression (mean $\pm$ SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one way ANOVA, Tukey's post hoc test).
- B) The effect of ROS on RUNX2 and OSX; positive value of N30 and negative value of N90, suggested that N30-induced ROS

enhanced while N90-induced ROS reduced osteogenesis (mean±SD, n=4, \*  $P \leq 0.05$ , Mann-Whitney test).

### 5.4.3 NS and mitochondrial activity

Metabolomic studies showed that NS involved  $\beta$ -oxidation metabolites (Figure 5.8 - 5.9). Thus, investigating mitochondrial activity may indicate whether MSCs require high energy for differentiation. Mitotracker and JC1 fluorescein dye were used to quantify mitochondrial activity measured by flow cytometry. At day 9, no significant changes were found indicating that mitochondrial activity is normal during NS (Figure 5.17A-B). Therefore, it was hypothesized that N90 may affect nutrient sources for energy production. MSCs may require more energy from fatty acids by increasing catabolism ( $\beta$ -oxidation) through the AMPK pathway (Herzig & Shaw, 2018; Lipovka & Konhilas, 2015).



**Figure 5.17 Mitochondrial mass and activity studied by mitotracker and JC1 fluorescein dye.**

A. Mitotracker stain showed no difference in mitochondrial mass (mean±SD, n=3-4, 1 patients, One-way ANOVA, Tukey's post hoc, negative control was induced by CCCP, positive control was

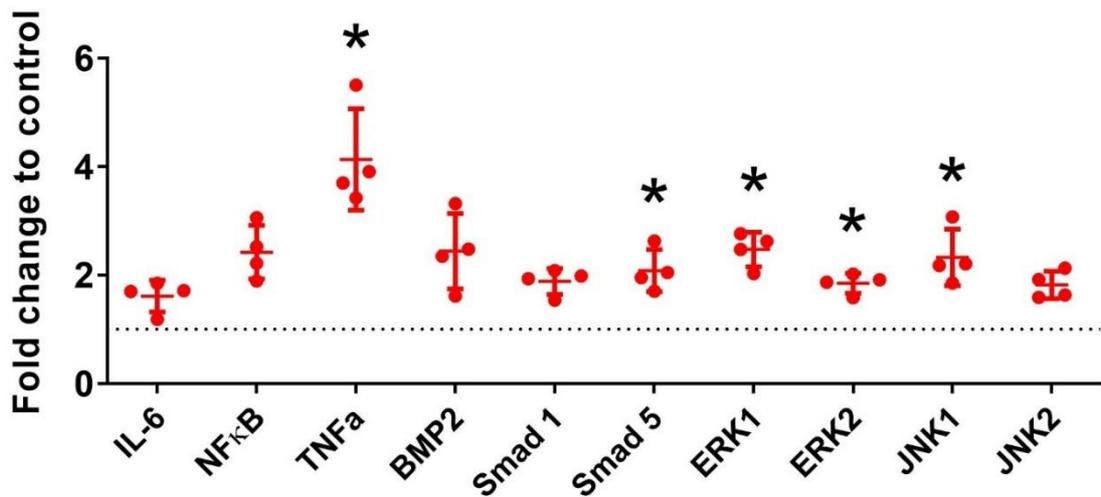
induced by H<sub>2</sub>O<sub>2</sub>) B. JC1 staining showed no difference in mitochondrial activity (mean±SD, n=3-4, 2 patients, Pt1-2; patient 1-2, one-way ANOVA, Tukey's post hoc test).

#### 5.4.4 NS induced inflammation in 3D osteogenesis

To investigate the hypothesis that NS-induced inflammation is essential for bone healing. qRT-PCR was used to investigate the inflammatory gene expression at day 9 (**Figure 5.18**). Interestingly, qRT-PCR showed the first clues of NS induced inflammation by the increased expression of TNF $\alpha$  and IL-6 transcripts. Concomitantly, increased NF $\kappa$ B expression indicated that cell survival pathways were also potentially activated.

IL-1 $\beta$  which is a coupled inflammatory cytokine to TNF $\alpha$  (Oppenheim, Matsushima, Yoshimura, Leonard, & Neta, 1989) and commonly found in the bone healing process was then investigated using ELISA. The level of IL-1 $\beta$ , however, was unable to be detected. It is thus likely that transcript changes are not fully reflected at protein level and it is undetectable; it could be postulated that this indicates very low levels of inflammation that may help in bone healing.

Next, the BMP2-induced osteogenesis signaling pathway was also investigated based on the hypothesis that IL-6 mediated inflammation may induce BMP2 secretion, in turn, activates SMAD1/5 to enhance osteogenesis (M. Sun et al., 2017; W. Yang et al., 2013). As postulated, the result showed evidence of increased BMP2 (between N30 and N90) and SMAD1/5 gene upregulation (compared to control). The MAPK signaling pathway study provided evidence of ERK1/2 and JNK activation. This clue hinted that NS not only activated osteogenic gene expression but also relayed the signals for basic cellular regulation (proliferation, differentiation or apoptosis) responding to extracellular stimuli, however, it did not produce large amounts of cytokines at the protein level.

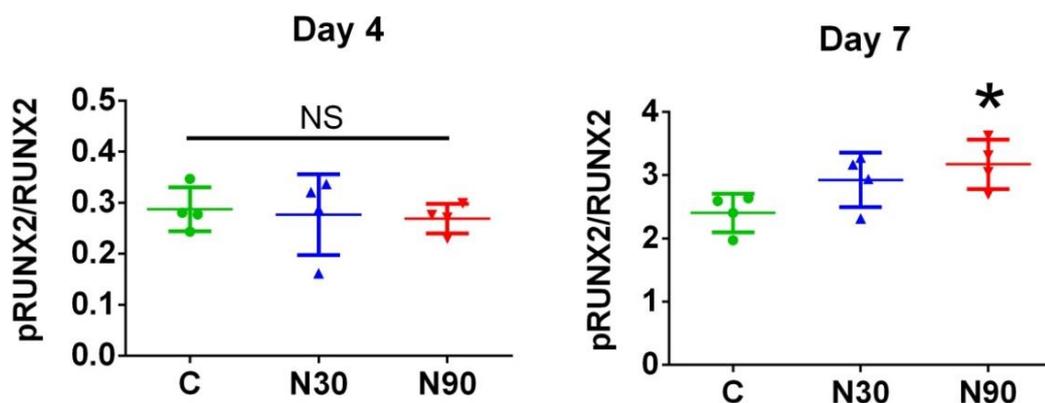


**Figure 5.18 Inflammatory gene response in 3D-N90.**

qRT-PCR at day 9 showed IL-6 (between NS groups) and TNF $\alpha$  (compared to control for N90) gene upregulation which are inflammatory cytokines. NF $\kappa$ B upregulation was also noted suggesting that MSCs produced NF $\kappa$ B reducing death signaling pathways. Upregulation of BMP2 and SMAD1/5 gene expression may imply that N90 enhances osteogenesis through a BMP2-SMAD1/5-mediated pathway. Activation of MAPK pathway gene expression including ERK1/2, JNK1/2 can be interpreted that NS signal was regulated by MAPK signaling hubs in order to select the appropriate cellular response such as differentiation or inflammation (Mean $\pm$ SD, n=4, \* P $\leq$  0.5, \*\* P $\leq$  0.01, \*\*\* P $\leq$  0.001, Mann-Whitney test).

### 5.4.5 NS-induced Inflammation may affect 2D osteogenesis in the early phase

To determine the effect of inflammation on 2D osteogenesis, In-Cell Western assay was used. Protein inhibition tests, which are associated to inflammation-related osteogenesis pathways, were investigated including MAPK pathways (ERK, JNK, p38),  $\text{TNF}\alpha$  and  $\text{NF}\kappa\text{B}$ . All inhibitors were added at day 2 and day 4. The ratio of phosphorylated RUNX2 to total RUNX2 was quantified at day 4 and 7 respectively. While this is not a particularly sensitive test, it was chosen as it is quantitative and at the protein level. It can determine activated osteogenesis and it fits with the time course in which we could use the inhibitors. The result showed that NS successfully induced 2D osteogenesis at day 7 while there was no increase in pRUNX2/RUNX2 at day 4 (Figure 5.19). This could be explained as day 4 was a very early time point to detect RUNX2 expression under NS.



**Figure 5.19 Nanovibrational stimulation in 2D osteogenesis**

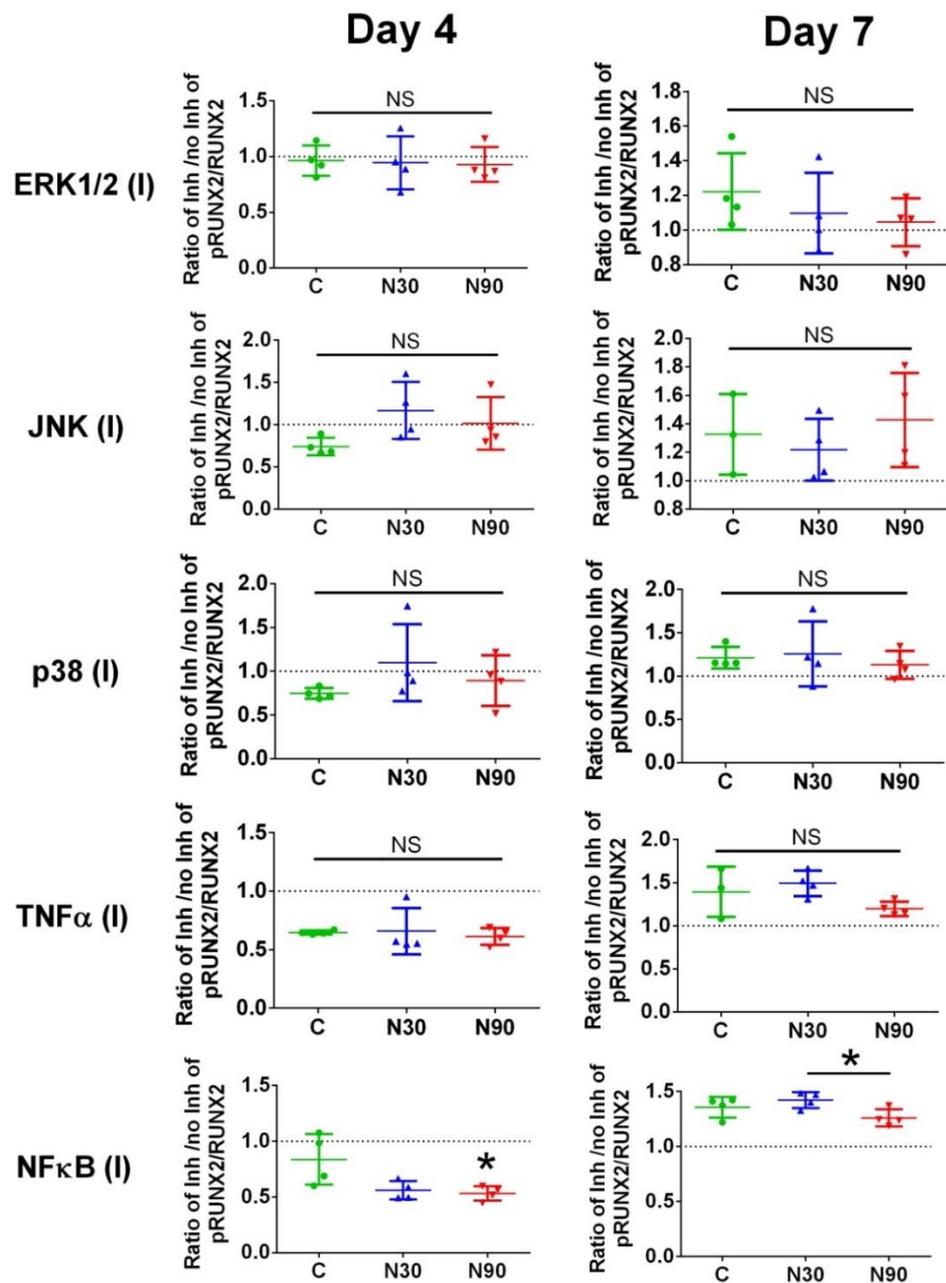
NS showed the success of 2D osteogenic induction at day 7 by In-Cell Western study. The significant increase of pRUNX2/RUNX2 in N90 group was noted (Mean±SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

Next, protein inhibition analysis was used to identify which pathways linked to osteogenesis determined by the pRUNX2/ RUNX2 expression. The pRUNX2/RUNX2 was used to calculate the ratio (R) of group with inhibitor to group without inhibitor. Therefore, if  $R > 1$  (pRUNX2/RUNX2 expression in inhibitor group is > than in the non-inhibited group), representing that pathways suppress osteogenesis as the inhibition increased pRUNX2/ RUNX2 expression. If  $R=1$  or close to 1 (the inhibitor group is the same as the non-inhibited group), it means

that the pathways investigated did not affect pRUNX2/RUNX2 expression. However, if  $R < 1$  (inhibited group < non inhibited group) the inhibition of the pathway reduced pRUNX2/RUNX2 expression. Thus, it could be interpreted that the studied pathway promotes osteogenesis.

At day 4 (**Figure 5.20**), the only effect the assay was sensitive enough to detect was that NF $\kappa$ B inhibition significantly decreased pRUNX2/RUNX2 protein expression representing that NF $\kappa$ B was important for 2D osteogenesis with N90 stimulation. This result may be interpreted as that NF $\kappa$ B is potentially important for RUNX2, perhaps by optimizing inflammatory response to improve osteogenesis; this ties in with increased NF $\kappa$ B expression (**Figure 5.17**).

At day 7 (**Figure 5.20**), as interpreted from the inhibition studies the MAPK pathway (ERK1/2, JNK, p38) and NF $\kappa$ B negatively affected RUNX2 expression in all groups. NS provided an increase of osteogenesis trend via ERK1/2 (R trend towards to 1 in N90 group).



**Figure 5.20. Effect of inhibition of inflammation pathways on 2D osteogenesis.**

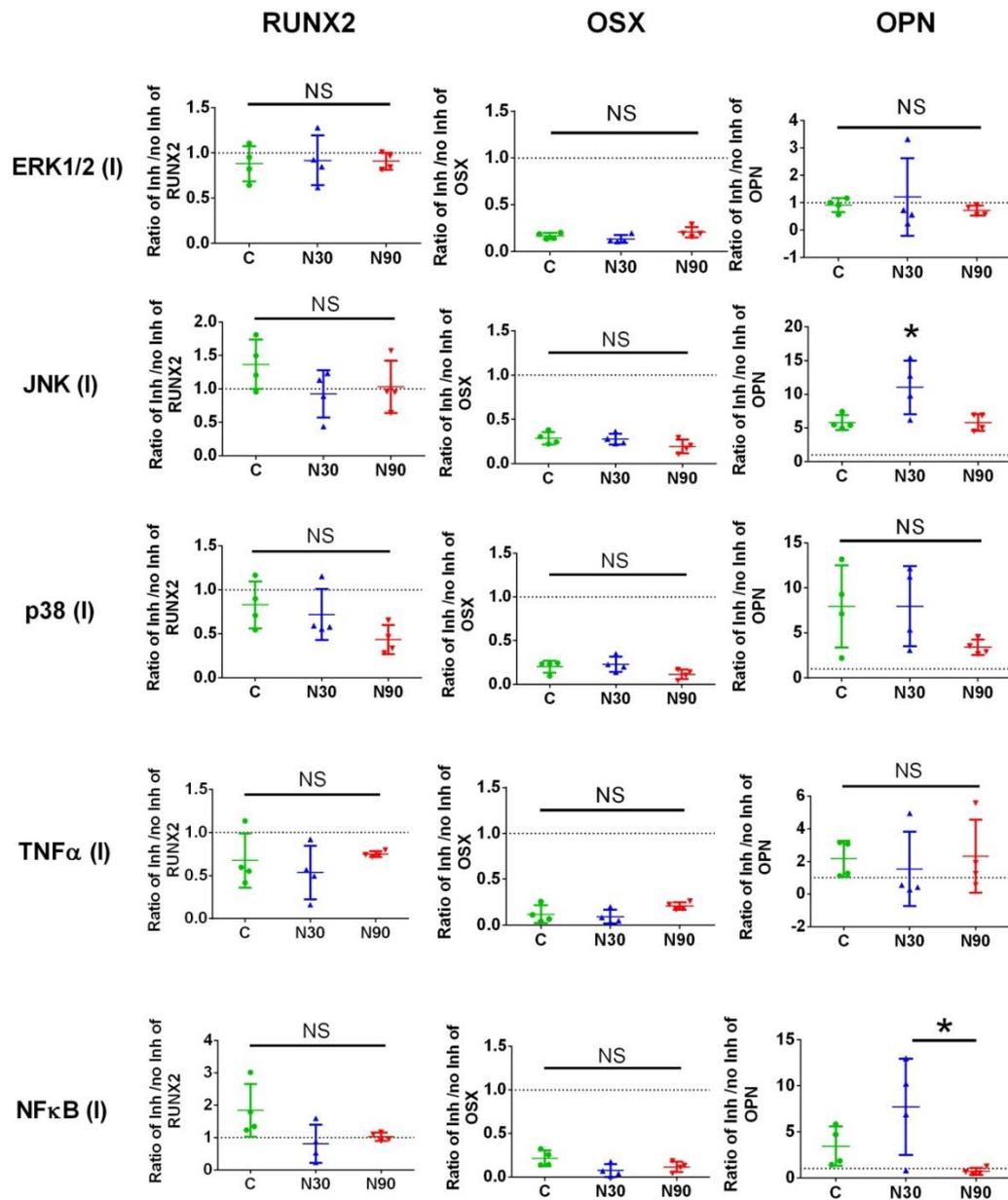
In-Cell Western study of pRUNX2/RUNX2 expression in the presence of inhibitors at day 4 and day 7. A) At day 4, very early phase, NFκB significantly affected osteogenesis in the N90 group ( $R < 1$ ). No other pathway changed with inhibition (Mean±SD,  $n=4$ , \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

#### 5.4.6 Nanovibrational stimulation also involved inflammatory pathways in 3D osteogenesis

From the 2D inhibition study, the results showed that MAPK, TNF $\alpha$  and NF $\kappa$ B expression during osteogenesis were dynamically changed at different time points. To study the relationship of inflammation and nanovibration induced 3D osteogenesis, qRT-PCR with MAPK (ERK1/2, JNK and p38), TNF $\alpha$  and NF $\kappa$ B inhibitors was performed at day 9. The ratio of the group with inhibitor to that without inhibitor (R) was calculated based on  $2^{\Delta\Delta ct}$  technique (Livak & Schmittgen, 2001). Thus, R >1 representing pathways that reduce osteogenesis. On the other hand, R <1 meant that pathway promotes osteogenic gene expression.

In **Figure 5.21**, JNK, p38 and NF $\kappa$ B inhibition showed the decreased trend of RUNX2 gene expression in N90 group. The ratio being less than 1 of p38 in all group indicated that p38 promoted RUNX2 expression and NS possibly enhanced RUNX2 expression via p38 showing in the decrease trend after inhibiting p38. Reduction of RUNX2 expression in NS comparing to control group was also found after inhibiting JNK and NF $\kappa$ B. The results indicated that JNK and NF $\kappa$ B played positive roles for RUNX2 expression.

MAPK (ERK1/2, JNK and p38), TNF $\alpha$  and NF $\kappa$ B pathways; all of these pathways tended to enhance OSX gene expression. However, the effect of NS was not obviously seen linking to OSX expression. Considering the NS effect on OPN, NS seemed to link to NF $\kappa$ B and p38 in OPN expression by showing the decrease trend of OPN expression in the NS group.

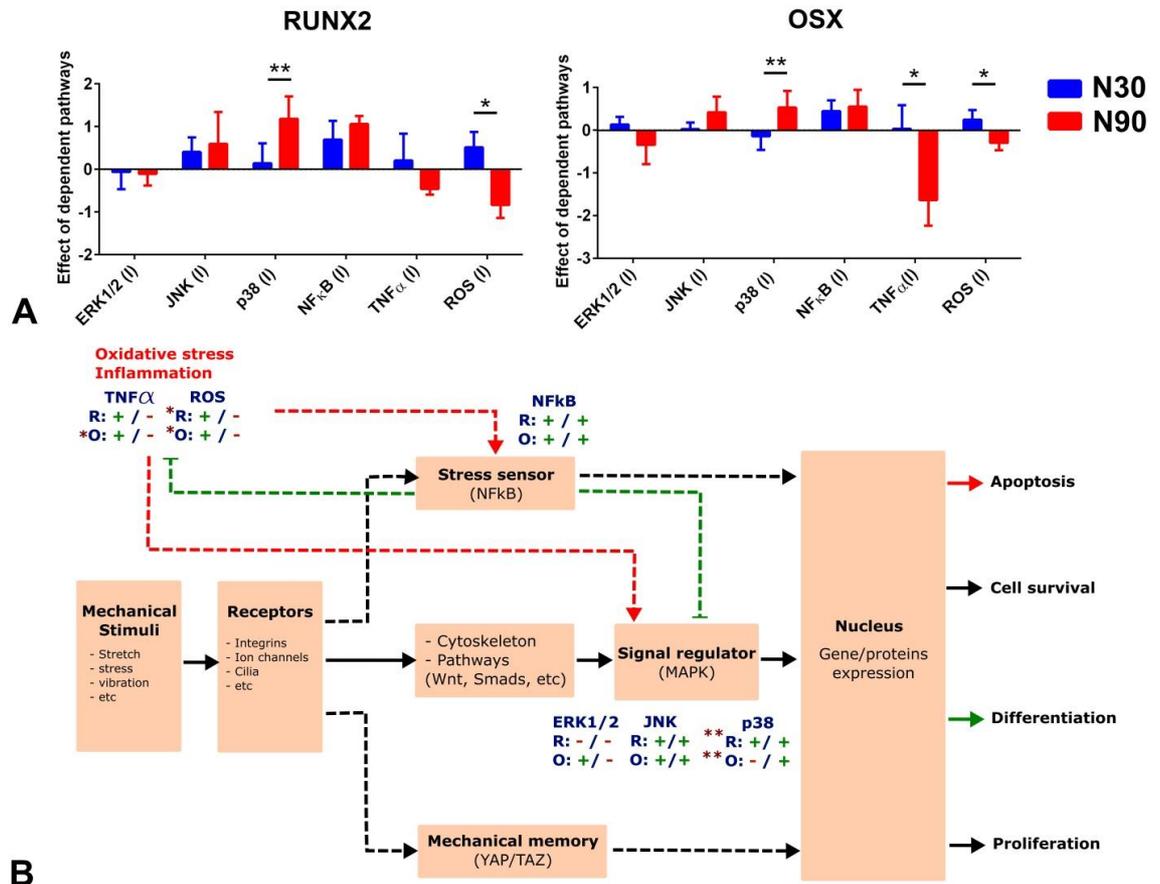


**Figure 5.21 The effect of nanovibrational stimulation induced inflammation in 3D osteogenesis**

qRT-PCR with inhibitors at day 9 indicated that JNK, p38 and NF $\kappa$ B promote RUNX2 expression. MAPK, TNF $\alpha$  and NF $\kappa$ B promote OSX expression ( $R < 1$ ). However, no obviously NS effects involved OSX gene expression. OPN is possibly enhanced by p38 and NF $\kappa$ B (Mean  $\pm$  SD,  $n = 4$ , \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

To simply identify the roles of pathways of interest (POI; MAPKs, NF $\kappa$ B, and TNF $\alpha$ ) on osteogenesis, RT-PCR data with inhibitors at day 9 was re-calculated. The difference between total pathways and POI-independent pathways was calculated for the effect of POI on RUNX2 and OSX expression. Positive value means enhancing while negative means suppressing osteogenesis (**Figure 5.22A**). Corresponding to **Figure 5.21**, JNK, p38 and NF $\kappa$ B were positive thus enhancing- while TNF $\alpha$  and ROS were negative values thus suppressing osteogenesis (**Figure 5.22A**). These results can possibly be explained by the response of NF $\kappa$ B in oxidative stress (J. L. Luo, Kamata, & Karin, 2005; T. Wang et al., 2002). In oxidative stress condition or inflammation, it is known that TNF $\alpha$  can activate NF $\kappa$ B to produce signals in order to reduce oxidative stress (ROS and TNF $\alpha$ ) and also involved MAPK via JNK and p38 (Lingappan, 2018; Nakano, 2004; L. Wang et al., 2012). These survival pathways aim to reduce apoptotic signals (Nakano,

2004). Simple diagram of mechanotransduction with NF $\kappa$ B and MAPK involvement under oxidative stress were shown in **Figure 5.22B**.

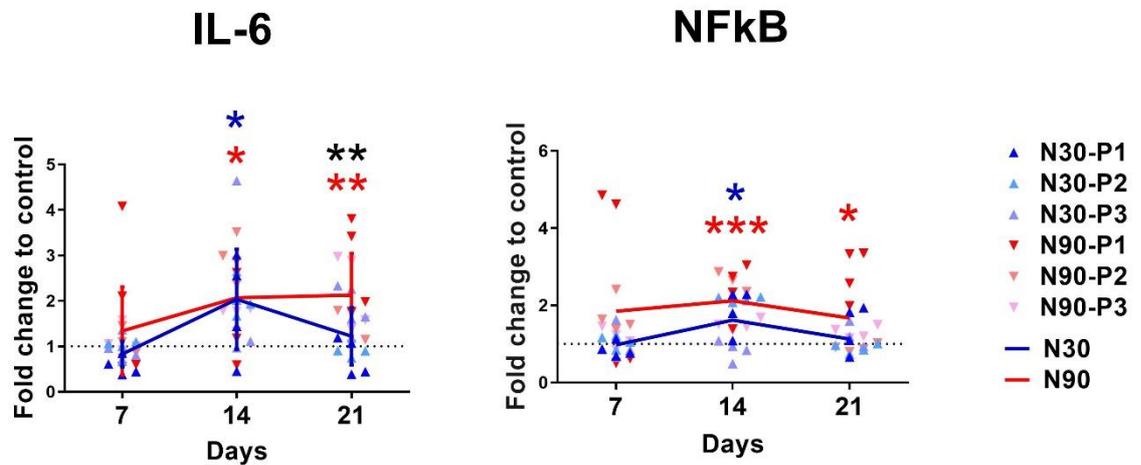


**Figure 5.22 Role of MAPKs, NF $\kappa$ B and TNF $\alpha$  on RUNX2 and OSX expression**

- The effect of POI graph showed that JNK p38 and NF $\kappa$ B promote RUNX2 and OSX expression while TNF $\alpha$  and ROS reduced RUNX2 and OSX expression. (Mean $\pm$ SD, n=4, \* P $\leq$  0.5, \*\* P $\leq$  0.01, paired-t-test)
- Simple diagram showed the effect of NF $\kappa$ B on TNF $\alpha$  and ROS in oxidative stress during mechanical stimulation.

To investigate whether inflammation is controllable, a temporal gene study of IL-6 and NF $\kappa$ B by qRT-PCR was performed at day 7, 14 and 21. IL-6 and NF $\kappa$ B levels in N90 were higher than those in N30. IL-6 and NF $\kappa$ B expression peaked at week 2 and tended to reduce at week 3 indicating that inflammation was controllable (**Figure 5.23**). Correlating this data with the temporal study of phenotype showing

successful osteogenic induction (**Figure 4.15**), we propose that NS induced inflammation is controllable and suitable for osteogenesis.

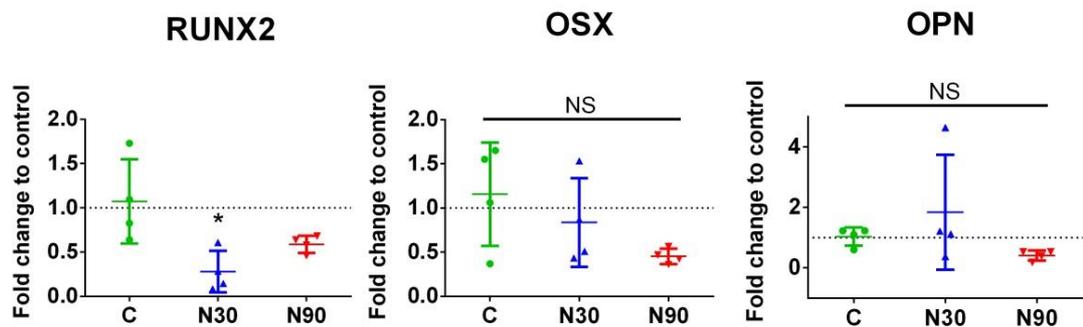


**Figure 5.23 Temporal gene analysis of IL-6 and NFκB**

Temporal study of IL-6 and NFκB showed that NS possibly produces inflammation, but that it is controllable. IL-6 and NFκB expression peaked at week 2 and tended to decrease at week 3 (Mean±SD, n=4, 3 patients, 4=replicates, \* P≤ 0.5, \*\* P≤ 0.01, \*\*\* P≤ 0.001, one-way ANOVA, Tukey's post hoc test, Pt1-3; patient 1-3, blue asterix; compared N30 to control, red Asterix; compared N90 to control, black Asterix; compared N30 to N90).

### 5.4.7 The balance between osteogenesis and inflammation in NS induced 3D osteogenesis

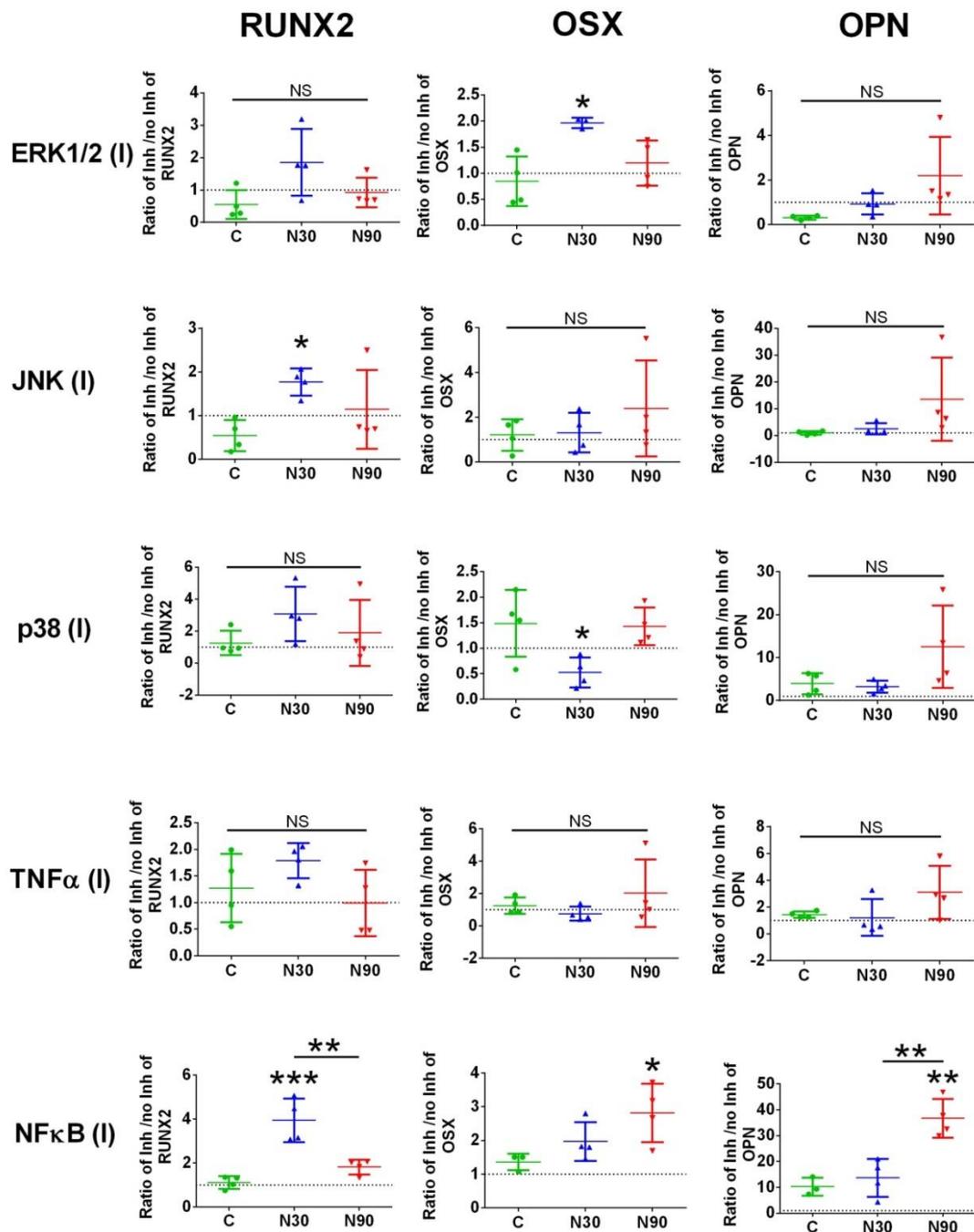
Occasionally, we found a non-responding patient sample (approx. 1 in 20 according to whole lab data). If NS can produce inflammation, thus, prestimulating the inflammatory status of MSCs could affect NS outcomes. To prove this hypothesis, qRT-PCR in a non-responding patient was performed at day 9. Initial phenotype after NS showed the expected no change in osteogenic gene expression in NS group (N30 and N90); RUNX2 was even significantly downregulated in N30 (Figure 5.24).



**Figure 5.24 Failure of NS induced 3D osteogenesis**

qRT-PCR at day 9, showing data from a non-responding patient (Mean  $\pm$  SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

To investigate the cause of osteogenic induction failure in the patient whose cells did not respond to NS, qRT-PCR with cultures grown using MAPK, TNF $\alpha$  and NF $\kappa$ B inhibitors was performed at day 9. Considering the significant decrease of RUNX2 expression in the N30 group (Figure 5.25), JNK and NF $\kappa$ B were seen to be repressing RUNX2 expression, and hence osteogenesis. ERK 1/2 was also seen to inhibit osteogenesis through OSX expression. Inhibition of p38 MAPK appeared to increase osteogenesis as seen by repression of pRUNX with p38 inhibition (Figure 5.25).

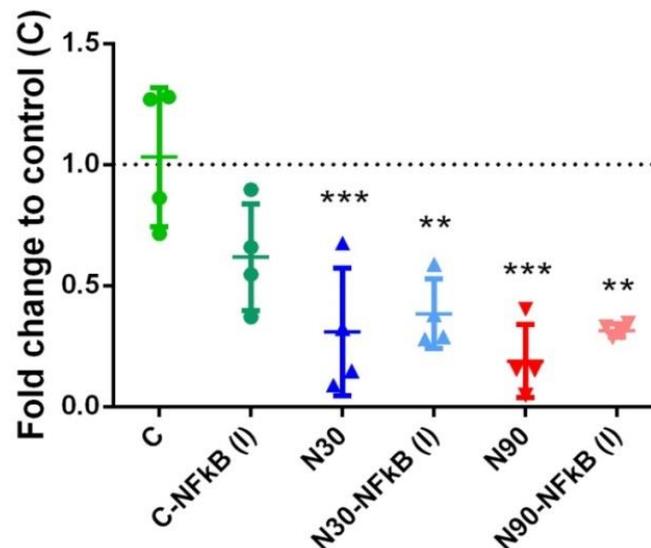


**Figure 5.25 3D NS and inflammatory pathway studies with inhibition of biochemical pathways in a non-responding patient**

qRT-PCR at day 9, the inhibition of MAPK pathway (ERK1/2, JNK, p38), TNF $\alpha$  and NF $\kappa$ B increased the RUNX2 expression in the N30 group.  $R > 1$  indicates that MAPK, TNF $\alpha$  and NF $\kappa$ B pathways are inhibiting RUNX2 expression at this time point. Considering the OPN response, only NF $\kappa$ B inhibition significantly increased OPN gene expression. The OSX expression slightly differed from

RUNX2 and OPN. ERK1/2 and NF $\kappa$ B were seen to significantly reduce expression while p38 is indicated to enhance OSX gene expression (Mean  $\pm$  SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

To determine the level of NF $\kappa$ B gene expression as it had strong effect in reducing osteogenesis for N30 (RUNX2) and N90 (OPN and OSX) in this non-responding patient, qRT-PCR for NF $\kappa$ B with/without NS and together with/without inhibitor (TPCA-1) compared to non-stimulated control without inhibitor were investigated at day 9. Surprisingly, a significant reduction of NF $\kappa$ B gene expression was found in both the N30 and N90 groups with expression of NF $\kappa$ B reduced below that of the inhibitor on the control group (**Figure 5.26**). It was hypothesized that the suppression of NF $\kappa$ B gene expression was affected by the negative feedback loop (Renner & Schmitz, 2009). In the NS group, long term exposure of higher level of NF $\kappa$ B may result in significantly greater suppression of NF $\kappa$ B gene expression. Moreover, inflammation could also affect on level of NF $\kappa$ B. Stimulating with low magnitude stimulation (such as NS) may inhibit NF $\kappa$ B signaling pathways in cells with pre-existing low inflammation (Agarwal et al., 2003; Dossumbekova et al., 2007; Madhavan et al., 2007; J. Nam et al., 2009).



### **Figure 5.26 NF $\kappa$ B level was controlled by negative feedback loop in failure of nanovibration-induced osteogenesis**

RT-PCR at day 9 showed that NF $\kappa$ B of stimulated group (N30 and N90) was less than that of non-stimulated control group. Addition of NF $\kappa$ B Inhibitor in N30 and N90 did not change the gene expression as it was already very low. (Mean  $\pm$  SD, n=4, \* P $\leq$  0.5, \*\* P $\leq$  0.01, \*\*\* P $\leq$  0.001, one-way ANOVA, Tukey's post hoc test).

## **5.5 Discussion**

### **5.5.1 Nanovibrational stimulation: what we have learnt from metabolomics**

From clustering metabolome analysis, NS mainly affected lipid metabolism after 1 and 2 weeks of stimulation (**Figure 5.4 - 5.7**). Smaller metabolome shifts from N30- and N90-NS were noted in amino acid and carbohydrate metabolism compared to control. Lipid metabolism is pivotal for stem cell differentiation due to its bioenergetic roles through fatty acid catabolism as well as producing precursor metabolites which are necessary for diverse cytokine synthesis such as arachidonic acid and prostaglandins (Burke & Weiler, 2002).

Carbohydrate metabolism, specifically glycolysis, is important for stem cell self-renewal and maintenance. In the process of osteogenic differentiation of MSCs, the role of glycolysis remains inconclusive. Some evidence indicates that the role of glycolysis is reduced in differentiated cells (C. T. Chen et al., 2008; Fillmore et al., 2015; Pattappa et al., 2011; Shyh-Chang et al., 2013). However, Shum et al shows that there is no difference in glycolysis level between osteogenic differentiated cells and undifferentiated cells (Shum et al., 2016). In our results, pyruvate tended to increase at 2 weeks but there was no significant difference of pyruvate level at both 1 and 2 weeks. The upregulation of lactate was noted at 1 week but was decreased by 2 weeks. All data indicated that NS did not obviously change the glycolysis pathway. Theoretically, increase of lactate may indicate aerobic glycolysis, explained by the Warburg effect (H. Lu, Forbes, & Verma, 2002). Even though the cues from glycolysis-related metabolites might not reveal the stage of cell development, the success of NS induced osteogenesis as shown in chapter 4 has

supported that nanovibration induced MSCs differentiate from preosteoblast to immature osteoblasts by week 2.

Although NS insignificantly changed carbohydrate metabolism, the increase of orthophosphate in N90, as well as the increase of sn-glycerol-3-phosphate shuttle in N30 and N90 groups (**Figure All.5**), suggesting that NS driven osteogenesis is an energetic process. Activation of the glycerol-3-phosphate shuttle represents that cells require expenditure of ATP by shifting complex I of OXPHOS (Mracek, Drahotka, & Houstek, 2013). Increased activity of OXPHOS is linked to greater reactive oxygen species (ROS) production (Huttemann, Lee, Samavati, Yu, & Doan, 2007). Furthermore, increased glycerol-3-phosphate shuttle activity is associated with high ROS production (Mracek, Pecinova, Vrbacky, Drahotka, & Houstek, 2009). OXPHOS with low levels of ROS promotes osteoblastic differentiation while high OXPHOS with high ROS promotes adipogenesis (C. T. Chen et al., 2008; Shyh-Chang et al., 2013). Our previous gene expression study showed the upregulation of osteogenic gene expression over adipogenic gene expression (PPAR $\gamma$ ) at day 9 (**Figure 4.12 and 4.13**). Therefore, it was reasonable to hypothesise that N90 affected osteogenesis and produced an optimal level of ROS at 1 week.

The effect of NS is possibly linked to amino acid metabolism. Previous literature showed that L-type and aromatic L-amino acids can activate the calcium-sensing receptor (CaSR) which controls calcium metabolism (Conigrave, Mun, & Lok, 2007). Calcium influx in turn activates the ERK1/2 pathway and PKC resulting in osteoblast differentiation and proliferation (MacDonell, Hamrick, & Isales, 2016). Our results showed the increase of L-type and L-aromatic amino acids in N90 corresponded to CaSR gene expression. Generally, CaSR takes an important role in intracellular calcium regulation. CaSR responds to extracellular calcium ion levels, parathyroid hormone, amino acid and pH changes (Theman & Collins, 2009). It was hypothesised that NS slightly increased amino acid and may subsequently upregulates CaSR. This requires investigation.

Lipid metabolism is important for cell proliferation and differentiation. To explore the relationship of NS and lipid metabolism on osteoblast differentiation, firstly, long-chain polyunsaturated fatty acids (LC-PUFAs) are considered. LC-PUFAs are derived from essential fatty acids such as linoleic acid and alpha-linolenic acid (omega-3 fatty acid) desaturating to eicosapentaenoic acid (EPA),

docosapentaenoic acid (DPA), and docosahexaenoic acid (DHA). These PUFAs are precursors of inflammatory metabolites such as arachidonic acid (AA), cyclooxygenase (COX), thromboxanes (TXA) which play pivotal roles on osteoblast and osteoclast development (Kruger et al., 2010). Many reports show that PUFAs improve bone synthesis in *in vitro* and *in vivo* studies (Jeromson, Gallagher, Galloway, & Hamilton, 2015; Kruger & Schollum, 2005). EPA supplements link to low grade inflammatory metabolites synthesis such as leukotriene 5 via cyclooxygenase (COX). The use of COX competitively inhibits high-grade inflammatory metabolite synthesis (such as PGE2, TXA2) from AA (Borges et al., 2014). However, some studies show adverse effects of long term exposure of AA and DHA in osteogenic gene expression (Coetzee et al., 2009).

In this study, a slightly increase of EPA, DPA and DHA after NS at 1 and 2 weeks was found (**Figure All.8**) meaning that NS could promote PUFA synthesis and this might link to the increase of inflammatory metabolite synthesis. In respect to energy production via lipid catabolism,  $\beta$ -oxidation-related metabolites were further investigated which were found in the experiments including hexanoic acid, 4-8 dimethylnonanoylcarnitine and O-propanoylcarnitine. N30 and N90 showed slightly increases of hexanoic acid and 4-8 dimethylnonanoylcarnitine levels. However, there was no significant change of TCA cycle metabolites (**Figure All.4**). Therefore, NS might slightly affect ATP production but evidence is weak and needs more investigation. The current literature of these metabolites is very limited.

### **5.5.2 Metabolomics perspective; nanovibrational stimulation possibly promotes osteogenesis through an inflammation process**

The related biological pathways of NS were analyzed by IPA software. At 1 and 2 weeks of stimulation, the ERK1/2 pathway (**Figure 5.10 - 5.11**) had predicted activation in N90 which corresponded to PCR showing gene upregulation (**Figure 4.15A**). It is likely that ERK1/2 plays a pivotal role in NS induced osteogenesis (Tsimbouri P.M., 2017).

Nitric oxide synthase (NOS) also had predicted activation in the N30 and N90 group at 1 and 2 weeks (**Figure 5.10-5.11**). NOS is an enzyme that produces nitric oxide (NO). Nitric oxide controls intracellular homeostasis (Klein-Nulend, van Oers, Bakker, & Bacabac, 2014). NOS

can be produced by endothelial cells (eNOS), the central nervous system (nNOS) or induced by inflammation (iNOS) (Saura, Tarin, & Zaragoza, 2010). Many studies elucidate the importance of NO in osteoblast proliferation and differentiation (Fox & Chow, 1998; Samuels, Perry, Gibson, Colley, & Tobias, 2001), e.g. NO mediates the ERK1/2 pathway resulting in osteogenesis (Saura et al., 2010; S. Wang et al., 2006; H. Y. Yun, Dawson, & Dawson, 1999) as well as promoting bone healing by increasing blood flow from vasodilation (R. E. Tomlinson, Shoghi, & Silva, 2014). However, overproduction of iNOS can induce osteoblast apoptosis possibly linked to ROS and cytochrome C (Ho, Chen, Chiu, Tai, & Chen, 2005).

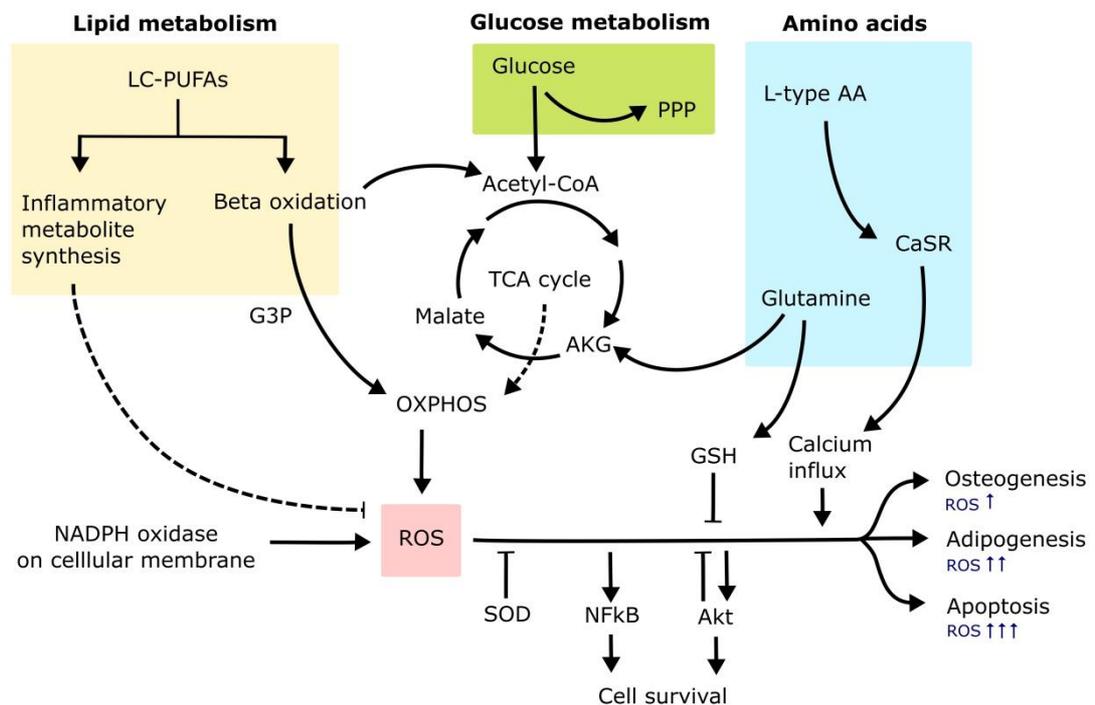
NS could be linked to inflammation through reactive oxygen species (ROS). ROS is a product of mitochondrial oxidative phosphorylation. Optimal ROS levels directly control MSC osteogenic differentiation (Q. Q. Li, Gao, Chen, & Guan, 2017). Excessive ROS production can reduce osteogenesis and promote adipogenesis as well as induce cell dysfunction and apoptosis (Atashi et al., 2015; Circu & Aw, 2010; Wanet et al., 2015). The Akt pathway and superoxide dismutase pathway (SOD) take on important roles to counter inflammatory metabolites overproduction. Insulin growth factor (IGFs) can activate Akt pathway and promotes osteoblast differentiation through BMP2 (Mukherjee & Rotwein, 2009; Pramojanee, Phimphilai, Chattipakorn, & Chattipakorn, 2014). The Akt pathway counterbalances ROS overproduction improving inflammation capacity and subsequently promoting osteogenesis (L. Wang et al., 2015). Not only does the Akt pathway reduce ROS, but also superoxide dismutase (SOD) represses inflammatory metabolites. SOD takes a role to convert superoxide anions ( $O_2^-$ ) to hydrogen peroxide ( $H_2O_2$ ) and then  $H_2O$  and  $O_2$  by catalase and glutathione peroxidase (C. T. Chen et al., 2008).

At 1 week stimulation (**Figure 5.10**), IPA indicated that the Akt pathway seemed to be activated, potentially to counterbalance inflammation in N90, while SOD was activated in N30 and N90. Therefore, NS could promote osteogenesis together with increasing of oxidative stress. In N90 group, Akt and NF $\kappa$ B were activated in N90 but not N30 suggesting that N90 can switch on survival pathways (Akt and NF $\kappa$ B) resulting in increase intracellular signaling. Thus, it was hypothesised that stimulation with high amplitude NS (N90) possibly provides osteogenic induction over that of N30 due to activation of

the Akt pathway which could enhance osteogenesis by itself while N30 activated only SOD.

At 2 weeks, N30 started to trigger Akt and interleukin-1 $\beta$  while greater levels of activation of Akt, ERK1/2 and NF $\kappa$ B were noted in N90. The results indicated that NS effect may be accumulated with time. The effect of NF $\kappa$ B on osteogenic differentiation is not well known. Activation of NF $\kappa$ B seems to provide negative effect on osteogenesis (Boyce, Yao, & Xing, 2010; Chang et al., 2013). However, from our results, NF $\kappa$ B tended to provide positive effect on RUNX2 expression during NS (Figure 5.21).

Overall, NS promoted osteogenesis shown through gene, protein and metabolomic studies. Lipids showed the highest change responded to NS. Oxidative stress was slightly generated during NS but it was controllable. The conclusion of metabolite changes is illustrated in Figure 5.27.



**Figure 5.27 Summary of metabolomic change during NS**

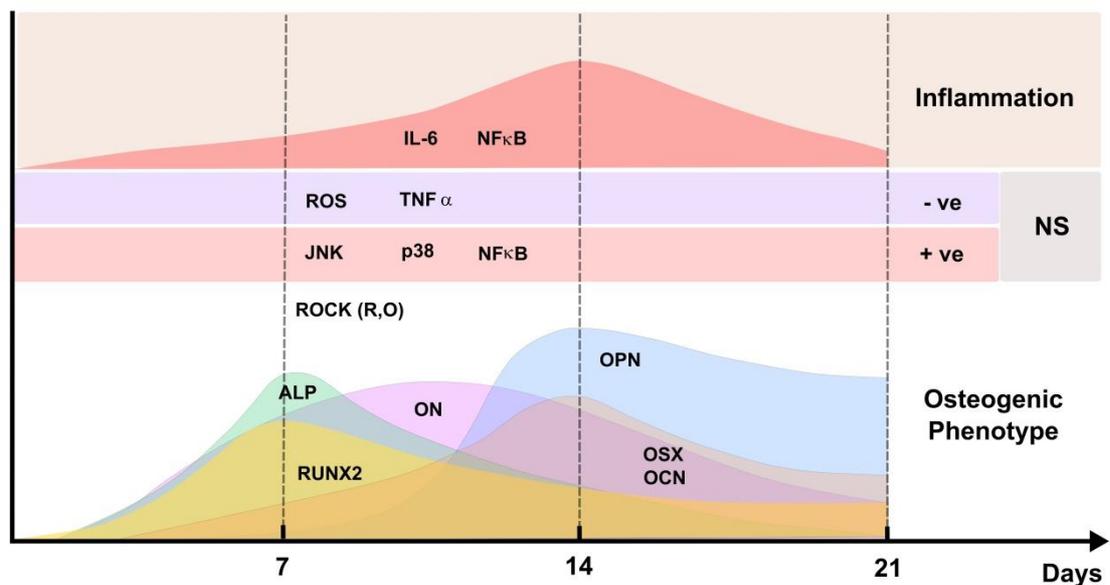
Lipid metabolism showed the greatest change possibly linked to PUFA synthesis which produces inflammatory metabolites as well as slightly enhanced  $\beta$ -oxidation producing energy. PPP may be involved in redox balancing. Oxidative phosphorylation was increased in parallel with glycerol-3-phosphate shuttle

activation and possibly, in turn, produced ROS. ROS may also be produced on the cell membrane by NADPH oxidase. ROS was counterbalanced by SOD. ROS activated NF $\kappa$ B and Akt to maintain cell survival. NS also increased L-type amino acid which may subsequently upregulated calcium signaling receptor (CaSR), allowing calcium influx. (G3P= glycerol-3-phosphate shuttle)

### 5.5.3 Inflammation in normal bone healing process vs nanovibrational stimulation

NS induces osteogenesis mimicking the normal bone healing process. In the normal bone healing process, inflammation is the first phase that occurs at the fracture site. Neutrophils produce cytokines such as TNF $\alpha$  to recruit inflammatory cells to eliminate the pathogens, prepare the fracture niche and recruit osteoprogenitor cells pooling at the fracture site (F. Loi et al., 2016). Pro-inflammatory cytokines including IL-1, IL-6 and BMP2 trigger MSCs to become osteoblasts (F. Loi et al., 2016). NF $\kappa$ B and RANKL can activate osteoclast differentiation (through RANK) thus preparing for the remodeling phase (Abu-Amer, 2013). However, in tissue engineering, high levels of inflammation are critical hurdles for stem cell differentiation controlled by mechanical induction or prosthesis (Gibon, Lu, Nathan, & Goodman, 2017). Thus, mimicking the mechanical stimuli which can directly enhance osteogenesis with low level activation of inflammation is challenging. Considering the results, NS promoted inflammatory cytokines corresponding to the normal bone healing process (**Figure 5.28**). In this study, Stro1-selected human MSCs were used which are osteoblast precursors (Dennis et al., 2002). NS induced inflammatory cytokines to be produced by the MSCs (Kyurkchiev et al., 2014) as other inflammatory cell types were not present in the culture.

In normal bone healing, bone fractures produce an inflammation triggering healing process (F. Loi et al., 2016). NS promoted inflammatory modulators at an early time point, day 7. The inflammatory cytokines were then suppressed by intracellular signaling pathways which may corresponded to normal bone healing stage (F. Loi et al., 2016).



**Figure 5.28 Conclusion of N90 effect on phenotype and inflammatory pathway**

N90 promoted osteogenesis which corresponded to normal osteogenic pathway. In early phase (day 9), JNK, p38 and NFκB enhanced while TNFα and ROS slightly reduced osteogenic induction. Inflammatory response (IL-6 and NFκB), peaking at week 2, may help promoting mineralization.

#### 5.5.4 Osteogenic pathway in nanovibrational stimulation; mechanotransduction-metabolite-inflammation

Based upon our knowledge, NS potentially enhances osteogenesis via multiple pathways. From this studies, the effect of NS-induced osteogenesis can be placed into mechano-transduction, inflammation and metabolite 'bins'. These major pathways all work downstream of the MAPK signaling hub which determine the appropriate cellular responses to these stimuli such as proliferation, differentiation and apoptosis.

##### 5.5.4.1 Mechanotransduction perspective

Considering the mechanotransduction aspect, our previous publication (Tsimbouri P.M., 2017) showed that NS induced osteogenesis through 1) ion channels TRPV1-PKC-β-catenin pathway, 2) BMP2-SMAD1/5 and 3) Integrin-ROCK pathway. These pathways

operate through ERK1/2 to trigger RUNX2 phosphorylation and osteogenesis.

#### 5.5.4.2 Inflammation perspective

As aforementioned, NS induced low levels of MSC driven inflammation during early culture (week1-2). The inflammation subsided by week 3 suggesting that it was a well-controlled inflammatory response and thus enhanced osteogenesis. Inflammation is a double-edged sword for osteogenesis. Low grade inflammation is essential for mineralization. Inflammation induces MSCs to produce OPN which, in turn, promotes mineralization via binding to the growing apatite mineral (F. Kahles, H. M. Findeisen, & D. Bruemmer, 2014). While high grade inflammation suppresses osteogenesis, and promotes osteoclastogenesis (Knapik et al., 2014). In this study, NS induced IL-6 and TNF $\alpha$  production. IL-6 can induce osteogenesis via the BMP2-SMAD1/5 pathway (M. Sun et al., 2017) whose gene upregulation was noted in Chapter 4 (Figure 4.12 and 4.14).

The effect of TNF $\alpha$  on osteogenesis varies by dose, duration and starting phase. Short-term exposure with a low dose of TNF $\alpha$  can enhance osteogenesis while long-term exposure of TNF $\alpha$  inhibits mineralization (Daniele et al., 2017; H. Huang et al., 2011). Hess et al., showed that the addition of TNF $\alpha$  enhances ALP expression (Hess, Ushmorov, Fiedler, Brenner, & Wirth, 2009). TNF $\alpha$  can stimulate IL-6 secretion that, in turn, can induce bone activating BMP2 production (De Cesaris et al., 1998). TNF $\alpha$  does not effect on differentiation in pre-committed MSCs but does promote mineralization and osteogenesis in committed MSCs (Croes et al., 2015). Daniele et al., also confirmed that TNF $\alpha$  did not affect proliferation and differentiation in undifferentiated cells but that it is involved in early phase of osteogenic differentiation (Daniele et al., 2017). High levels of TNF $\alpha$ , however, suppress osteogenesis. In this study, TNF $\alpha$  was produced in the early phase only suggesting a role in enhancing osteogenesis.

The MAPK signaling pathway plays an important role in cell response and is activated by extracellular stimuli such as adhesion, stress, growth factors and cytokines. The MAPK pathway regulates cellular responses such as proliferation, differentiation, inflammation and apoptosis (W. Zhang & Liu, 2002; Y. Zhang et al., 2014). MAPK signaling requires to be balanced in optimal levels for enhancing

osteogenesis while higher levels suppress osteogenesis (Rodriguez-Carballo et al., 2016).

Intracellular ERK1/2 is involved in many cellular functions. ERK1/2 and mechanically-induced osteogenesis may associate with differentiation stages. Prolonged mechanical stimulation might desensitize ERK1/2 and thus reduce phosphorylated, active, ERK1/2 (Jansen et al., 2004). ERK itself can also activate osteoclast function thus promoting osteoclastogenesis (Rodriguez-Carballo et al., 2016). Considering the effect of NS, it was previously shown that NS can induce ERK1/2 related osteogenic pathway through 1) TRPV1-PKC-ERK1/2 - $\beta$ -catenin and 2) Integrin-FAK-ROCK-ERK1/2 pathways (Tsimbouri P.M., 2017). On the other hand, NS may also activate ERK1/2 through  $TNF\alpha$  induced inflammation. Thus, 3D osteogenesis required the great balancing harmony of osteogenic enhancing signals.

The role of JNK in osteogenesis is less clear. JNK can be activated by  $TNF\alpha$  (Papa, Zazzeroni, Pham, Bubici, & Franzoso, 2004) and  $NF\kappa B$  (A. Lin, 2003). In our study, N90 activated only JNK1 during osteogenesis (**Figure 5.18**) which tended to enhance osteogenesis (**Figure 5.21**). However, in our non-responding patient, JNK significantly suppressed RUNX2 expression (**Figure 5.25**). This implies that pre-inflamed cells with high levels of  $TNF\alpha$ , JNK and  $NF\kappa B$  suppress osteogenesis.

p38 is also known to have roles in osteoblast differentiation (Rodriguez-Carballo et al., 2016). In this inhibition study (**Figure 5.22**), p38 significantly enhanced not only RUNX2 but also OSX gene expression in 3D osteogenesis of N90. This result corresponded to Wang et al affirming p38 mediated OSX for osteogenic differentiation (X. Y. Wang, Goh, & Li, 2007). Activation of p38 can phosphorylate various osteogenic transcription factors. Interestingly, signaling axis such as 1) BMP/TGF $\beta$ -p38- $\beta$ -catenin or 2) WNT-p38- $\beta$ -catenin (Rodriguez-Carballo et al., 2016) could worth further investigation.

$NF\kappa B$  pathway is crucial for cell survival.  $NF\kappa B$  can be activated by inflammatory cytokines such as IL-1, IL-6 and  $TNF\alpha$  through classic and alternative pathways (Lawrence, 2009). The activation of  $NF\kappa B$  counterbalances the cell death pathway for cell survival (J. L. Luo et al., 2005).  $NF\kappa B$  can also function as an antiproliferative protein, thus determining growth arrest, differentiation or cell death (Imran & Lim, 2013).  $NF\kappa B$  pathways result in antioxidant (e.g. Mn SOD, catalase) and oxidant (e.g. iNOS, COX2, LOX2) production (Morgan & Liu, 2011).

Moreover, NF $\kappa$ B can crosstalk with ROS. NF $\kappa$ B can mediate RANK ligand induced osteoclastogenesis (Abu-Amer, 2013). Thus, the upregulation of NF $\kappa$ B in early phase by NS probably promoted osteoclast differentiation preparing for bone remodeling in later phase. This osteoclastogenesis hypothesis may be worth further study.

#### **5.5.4.3 Metabolomic perspective**

Our metabolomics study indicated that NS produced low grade inflammation. The evidence of long chain polysaturated fatty acid synthesis (LC-PUFAs) and reactive oxygen species (ROS) production were found. TCA cycle showed a slightly increase trend of TCA metabolite in NS group. Interestingly, NADPH oxidase was also found in N90 group. It is known that NADPH oxidase is related to ROS production at the plasma membrane (Fisher, 2009). Thus, it could be hypothesized that NS may directly affect the plasma membrane e.g. by fluttering the cell membrane. Considering the predicted activated network, the network showed the activation of NADPH oxidase, ERK1/2, Akt, NF $\kappa$ B, NOS, SOD with N90 stimulation; these signals were predicted at much lower levels with N30 stimulation (**Figure 5.10 - 5.11**). This could be interpreted that stimulating amplitude (approximate range from 40-100 nm) may involve or activate the inflammatory signal or ROS product at the cellular membrane. This activation then induces the counterbalance signaling. The “switch on” of counterbalance signaling may concomitantly activate the osteogenic differentiation pathway as well.

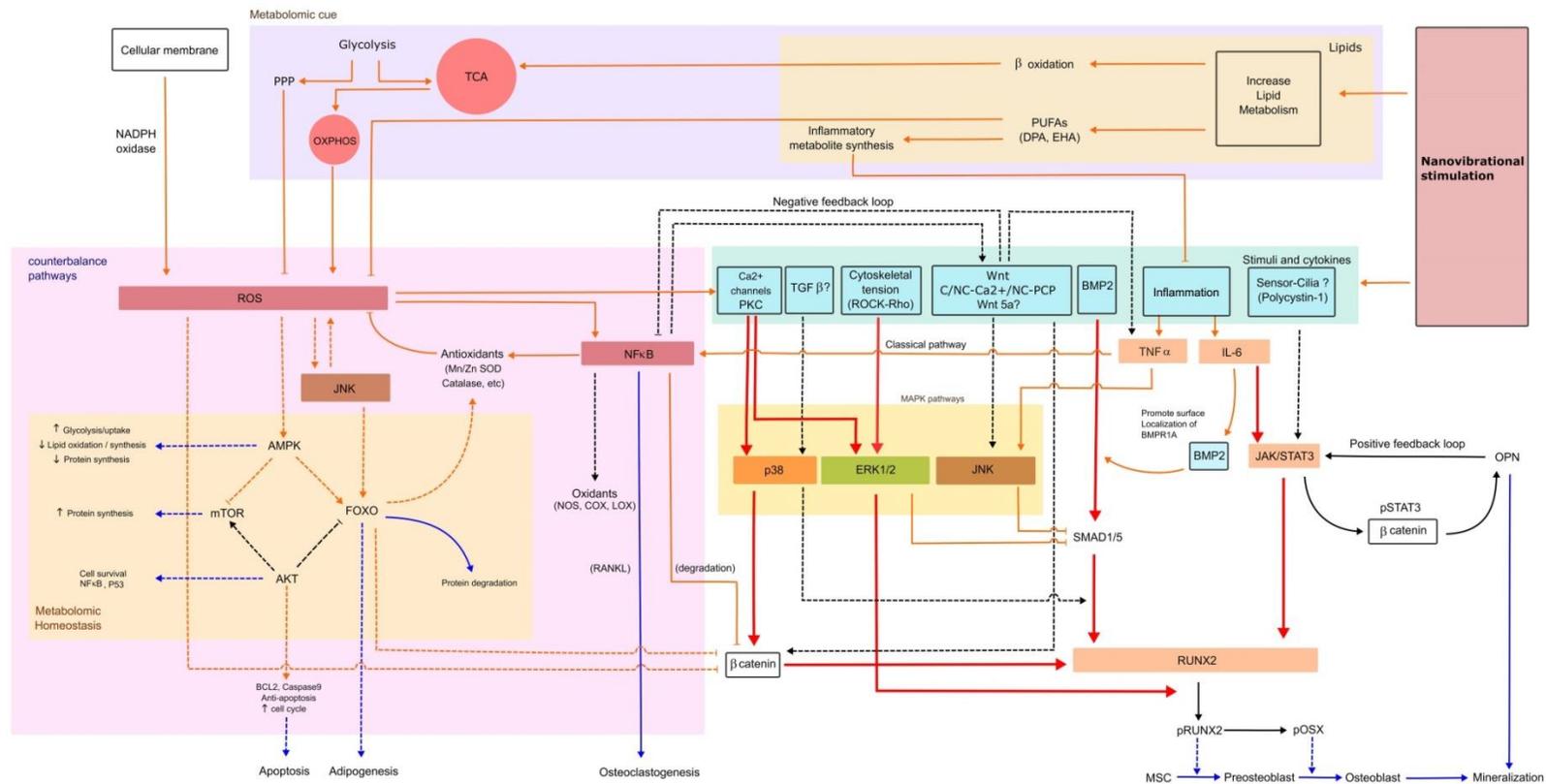
#### **5.5.5 Cellular Yin-yang; the balance between osteogenesis and inflammation in nanovibrational stimulation.**

The balance between osteogenesis and inflammation at each time point appears to be the key to stimulate osteogenesis by mechanical stimuli. Adequate duration and intensity of stimuli will commit MSC differentiation to osteoblasts and produce slight inflammation (with benefit for mineralization). Over inflammatory response reduces osteogenesis and, in the literature, has been linked to increased adipogenesis or suppressed differentiation or apoptosis. The pathways enhancing or suppressing osteogenesis which might be induced by NS are summarised in **Table 5.1**.

**Table 5.1 Summary of potential NS pathways**

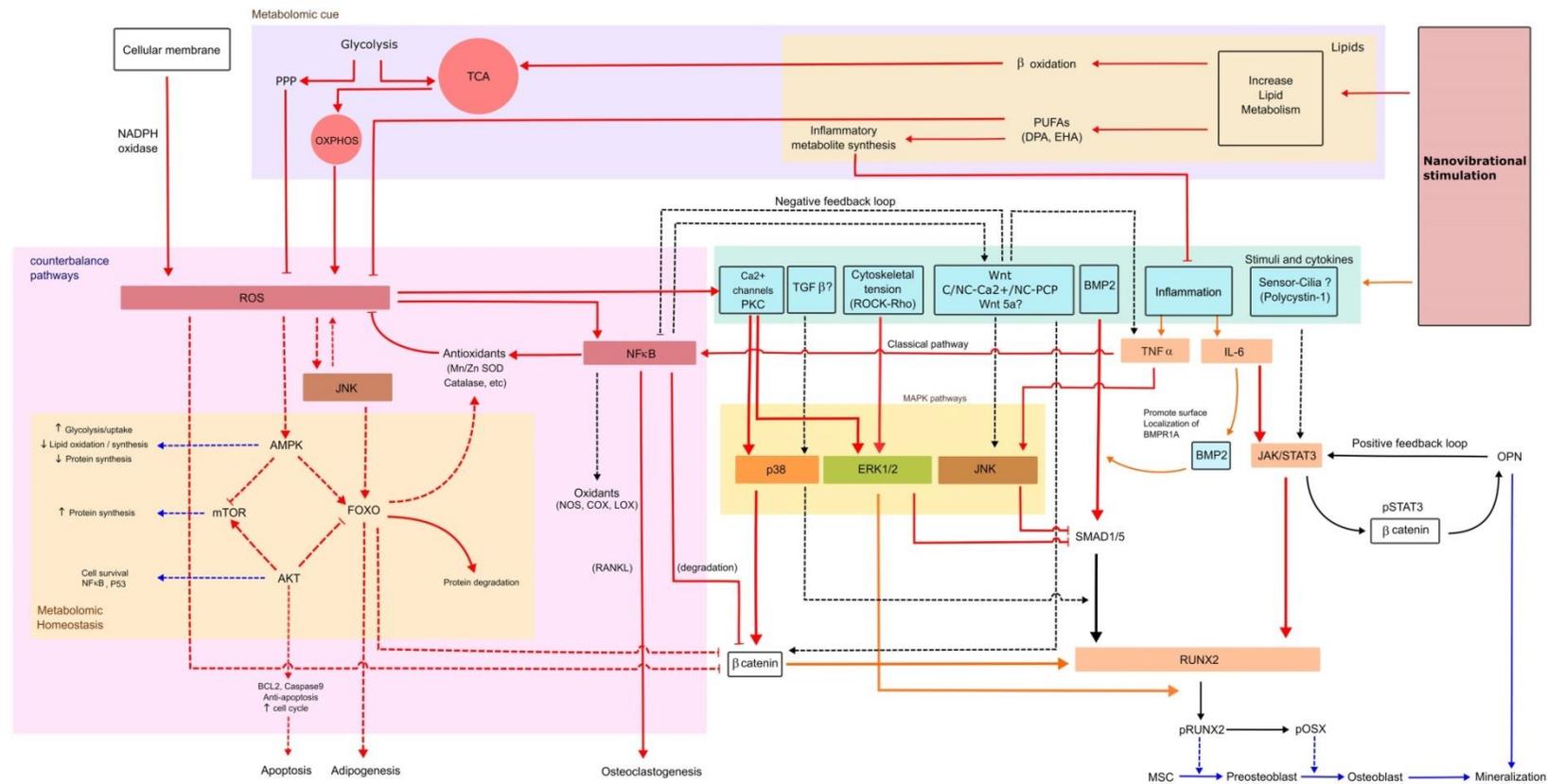
	Pathways/ Effects	References	In this thesis
Enhanced osteogenesis	1) Cytoskeletal involvement Integrin-FAK-ROCK-ERK1/2	(Tsimbouri P.M., 2017)	✓
	2) BMP2 BMP2-SMAD1/5	(Tsimbouri P.M., 2017)	✓
	3) Stretching ion channels TRPV1-PKC- $\beta$ -catenin	(Tsimbouri P.M., 2017)	✓
	4) Inflammation IL-6-BMP2-SMAD1/5 TNF $\alpha$ - NF $\kappa$ B? -(BMP2-OSX-RUNX2)	(Hess et al., 2009; Osta, Benedetti, & Miossec, 2014; M. Sun et al., 2017)	✓
	5) ROS (controllable)	(Atashi et al., 2015)	✓
	6) Others such as - Fluid flow (questionable) (PC-1-JAK2/STAT3-RUNX2) - Heat activation	(Dalagiorgou et al., 2017) (E. Chen, Xue, Zhang, Lin, & Pan, 2015; Ota et al., 2017)	-
Suppressed osteogenesis	1) NF $\kappa$ B degraded $\beta$ -catenin	(Chang et al., 2013; N. Wang et al., 2016).	-
	2) MAPK inhibits SMAD1/5	(R. L. Huang, Yuan, Tu, Zou, & Li, 2014; Mao et al., 2016)	-
	3) TNF $\alpha$	(R. L. Huang et al., 2014; Lencel, Delplace, Hardouin, & Magne, 2011; Osta et al., 2014)	✓
	4) ROS (high level)	(Atashi et al., 2015)	✓

To simplify the interaction of NS related pathways, the mechanotransduction-metabolite-inflammation theory was used to illustrate signaling maps caused by mechanical stimulating cues, inflammation and metabolites. The example of signaling pathways in optimal stimulation and in high oxidative stress are shown in **Figure 5.29-5.30**



**Figure 5.29 The hypothesis of NS involved pathway with optimal intensity of NS.**

Inflammation effect on osteogenesis is greater than its negative effects (contributing by inflammation, TNF $\alpha$ , ROS and NF $\kappa$ B (Red line = high level expression, Orange line = low level expression, dense line = proved pathways, dot line = theoretical pathway, blue line = phenotype/ result expression).



**Figure 5.30 The hypothesis of NS involved pathway in high oxidative stress condition**

Over stimulation or poor cell quality (resulting in high level of NFκB and TNFα baseline level), these conditions suppress osteogenesis (Red line = high level expression, Orange line = low level expression, dense line = proved pathways, dot line = theoretical pathway, blue line = phenotype/ result expression).

## 5.6 Conclusion

Nanovibrational stimulation involved lipid metabolism and produced controllable ROS which enhance osteogenesis. NS also induced controllable inflammatory response (IL-6 and TNF $\alpha$ ) promoting 3D osteogenesis. A good balance between osteogenic enhanced niche and oxidative stress-inflammation is crucial to achieve the osteogenic induction.

**Chapter 6 Composites for nanovibrational stimulation using in bone tissue engineering**

## **Chapter 6 Composites for nanovibrational stimulation using in bone tissue engineering**

### **6.1 Introduction**

Natural hydrogels, such as collagen, are widely used for tissue engineering (Antoine, Vlachos, & Rylander, 2015). However, improving the mechanical properties of natural hydrogel such as collagen, gelatin, etc for bone tissue engineering is challenging. In chapter 3, it was shown that soft collagen hydrogels were unable to resist cell traction forces resulting in hydrogel contraction. Moreover, the degradation time of soft collagen hydrogels do not correspond to bone regeneration (Helary et al., 2011). Crosslinking techniques can improve physical properties (Sundararaghavan et al., 2008) and extend the degradation time of hydrogels (Lang, Spousta, & Lyubovitsky, 2015; McGann et al., 2015). However, these techniques provide cytotoxicity issues for MSC culture (Fessel et al., 2014; J. C. Lee et al., 2011; X. Yang et al., 2013).

Rigid scaffolds provide better mechanical properties than hydrogels. However, nutrient and oxygen transfer in hydrogels is superior than in dense, rigid scaffolds (Zohreh Izadifar, Xiongbiao Chen, & William Kulyk, 2012; Rouwkema et al., 2010). There are many techniques to produce rigid collagen scaffolds such as electrospinning (Jha et al., 2011; Law et al., 2017), freeze drying (Kane & Roeder, 2012; Kane et al., 2015; Schoof, Apel, Heschel, & Rau, 2001), etc. However, loading cells into these rigid scaffolds are inevitably performed after the scaffolds were prepared. Thus, it is difficult to achieve homogenous cell distribution together with 3D cellular response within 3D scaffolds (Weilun Sun et al., 2012).

To combine advantages of rigid scaffold and hydrogel together, biphasic scaffold is composed of rigid constructs inside hydrogels providing composite architecture while the MSCs reside in the hydrogel component as a 3D cellular niche. From the current evidence, many techniques have been proposed using the biphasic scaffold concept. For example, Tanaka et al proposed combination of a hydrogel and rigid internal construct by compositing Poly L-lactic acid (PLLA) scaffolds into atelocollagen for cartilage tissue

engineering (Y. Tanaka et al., 2010). Furthermore, the concept of a combination between gel phase and rigid phase were also integrated into a 3D printed bioprinting scaffolds approach. Hydrogels were used as the ECM for stem cells in the 3D bioprinting process. PCL was also printed as a rigid component for maintaining scaffold shape (H. W. Kang et al., 2016).

Considering a different issue, it is questionable whether MSCs can maintain their osteogenic phenotype after NS is finished. Moreover, it is known that materials can regulate cell fate. Stiff materials promote osteogenesis while soft materials enhance adipogenesis (Engler et al., 2006). Therefore, loading MSCs in soft collagen hydrogel may reverse NS induced osteogenic phenotype. Theoretically, adequate dose and duration of mechanical stimulation allows MSCs to differentiate and memorize their fates without phenotypic reversibility after stimuli is terminated (C. Yang et al., 2014).

In this chapter, biphasic scaffold compositing of collagen hydrogels with freeze dried collagen sponge was introduced. This composite combined the advantage of hydrogel and sponge together. The hydrogel allows nanovibrational force transmission and nutrient transfer, while the collagen sponge supports the composite structure, preventing hydrogel contraction and improves handleability (important for clinic). Mechanical properties, hydrogel contraction and mechanical response of cell-hydrogel-sponge composite (CHSC) during N90 stimulation were optimised. Biological responses including viability and phenotype expression were investigated. Finally, the optimal NS duration for osteogenesis and phenotypical memory was also studied.

## 6.2 Aims and objectives.

- 1 To develop a CHSC that suits the NS bioreactor
- 2 To investigate mechanical properties of CHSCs and study how CHSCs responded to NS.
- 3 To evaluate the biological responses of MSCs to CHSCs as well as investigate the phenotype expression of MSCs in CHSCs after NS.
- 4 To optimise the NS duration and dose for MSCs in CHSCs which can induce osteogenesis as well as maintain phenotype after NS was removed.

## 6.3 Methodology and experimental design

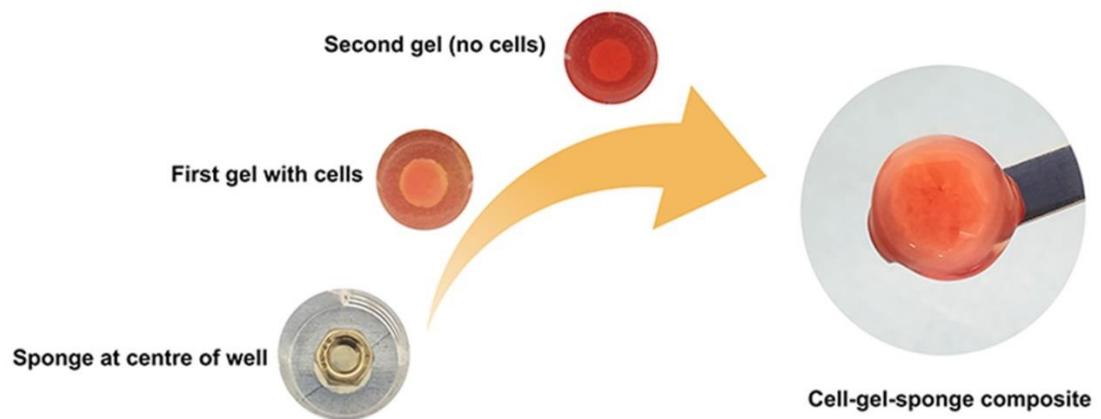
### 6.3.1 Freeze dried collagen sponge preparation

To prepare the collagen sponges, 5% weight of bovine tendon powder (Collagen solution, UK) was used. The 0.001 M of HCl with pH 3 was added and then homogenized with homogenizer (TissueRuptor, Qiagen) on ice. The mixed composites were then molded in polystyrene cell culture inserts (0.4  $\mu$ m Polyethylene terephthalate; PET, membrane, 12 well plate diameter, Greiner bio-one, Austria) and in turn frozen at -80°C for 10 hours. Freeze drying was done at -110°C, Vapor pressure at 0 mBar, for 20 hours (VirTis, SP industries, USA). Freeze dried collagen sponges were sterilised by UV light exposure for 1 hour.

### 6.3.2 Cell-hydrogel-sponge composite preparation

To prepare the CHSCs, sponges were placed at the centre of 12 well plates and were weighted down by placing a screw nut on top of the sponges. 1.8 mg/ml collagen hydrogels were prepared by using rat-tail collagen type I (5mg/ml, First Link, UK). 10xDMEM (First link, UK) and Fetal bovine serum (Fisher Scientific) was used as cell medium supplement. 0.1M sodium hydroxide (Fluka, UK) was added for pH titration by phenol red indicator and pH paper. After the pH titration, MSCs were added in the hydrogel mixture and 2.5 ml of MSCs-hydrogel mixture was decanted around the sponges. Gelation was allowed at pH 7.7 - 8.0 and in a 37°C incubator. Following the cell-hydrogels

gelation, 0.5 ml of secondary hydrogels (1.8 mg/ml) without cells were aliquoted on top the composite. The CHSCs were then transferred for stimulation on the NS bioreactor. When the stimulation time ended, the CHSCs were detached from the culture wells by spatula allowing CHSC contraction before removed for further analysis (Figure 6.1).



**Figure 6.1 Cells-hydrogel-sponge composite preparation**

To prepare CHSC, sponges were placed at the centre of wells. Cells were mixed with 1.8 mg/ml collagen hydrogel and then aliquoted into wells. After gels were set, hydrogels were then aliquoted on top to cover the composite.

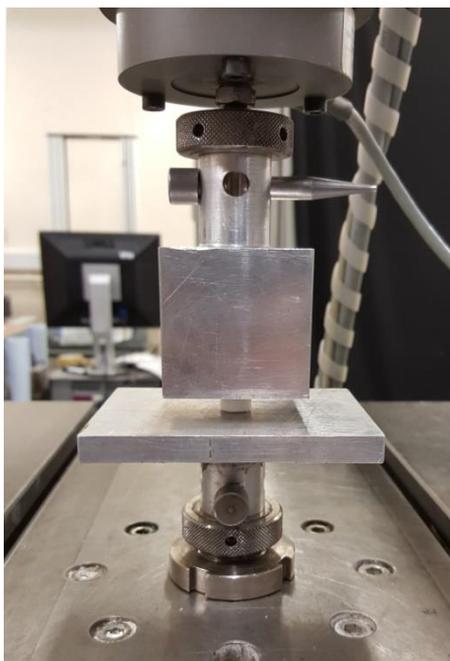
### 6.3.3 CHSC contraction and time lapse microscopy

To observe the CHSC contraction, top view images of gel-sponge composite were taken every 1-2 days. The surface area of the gels was measured using ImageJ software. To evaluate cell migration, CHSCs were cultured for 6 and 10 days. CHSCs were imaged using a 10x objective lens at 120 sec intervals for 24 hours at 37°C. Cell velocity and migration directions were analysed using imageJ plugin (manual tracking) and Chemotaxis and Migration tool (Ibidi).

### 6.3.4 Compression test

The collagen sponges (5% of dry weight) were prepared (sample height 4 mm, radius 5.5 mm) and placed on the base of the compression testing machine (Zwick-Roell, Z2.0, Germany). Compression velocity

was set at 1mm/min. Samples were compressed for 2 mm distance. Stress-strain graphs were plotted to identify the linear range which represented the elastic property of the collagen sponges. The elastic modulus was then calculated by Microsoft Excel software using data within the elastic range (**Figure 6.2**).



**Figure 6.2**      **Compression test of collagen sponge**

Collagen was placed on the base of the compression testing machine. Compression test was performed for 2 mm with 1 mm/min velocity.

### **6.3.5 Cryosection**

After CHSCs were stimulated with NS, the samples were fixed in 4% formaldehyde and infused in 30% sucrose in PBS for cryoprotection, overnight at 4°C. The samples were then transferred to embedding molds and O.C.T. (Tissue-Tek, Sakura) was aliquoted to cover the samples. The samples were then frozen in liquid nitrogen and kept at -80°C. The frozen samples were then sliced into 60  $\mu$ m thickness and attached onto adhesive slides (9597, Tissue-Tek, Sakura, Netherlands). Immunofluorescent staining was then carried out. Techniques were explained in chapter 2 section 2.11.

### 6.3.6 Scanning electron microscopy (SEM)

The samples were prepared for SEM using the sputter coating technique. The samples were mounted onto SEM stubs using double sided conductive tape and silver paint. They were then coated with Gold/ Palladium (approximately 10-20 nm) using a SEM coating system (Q150T ES, Quorum, UK). The samples were viewed on a JEOL6400. SEM running at 10 kV and Tif image captured using Olympus Scandium Software. Porosity diameter was analysed by ImageJ software.

## 6.4 Results

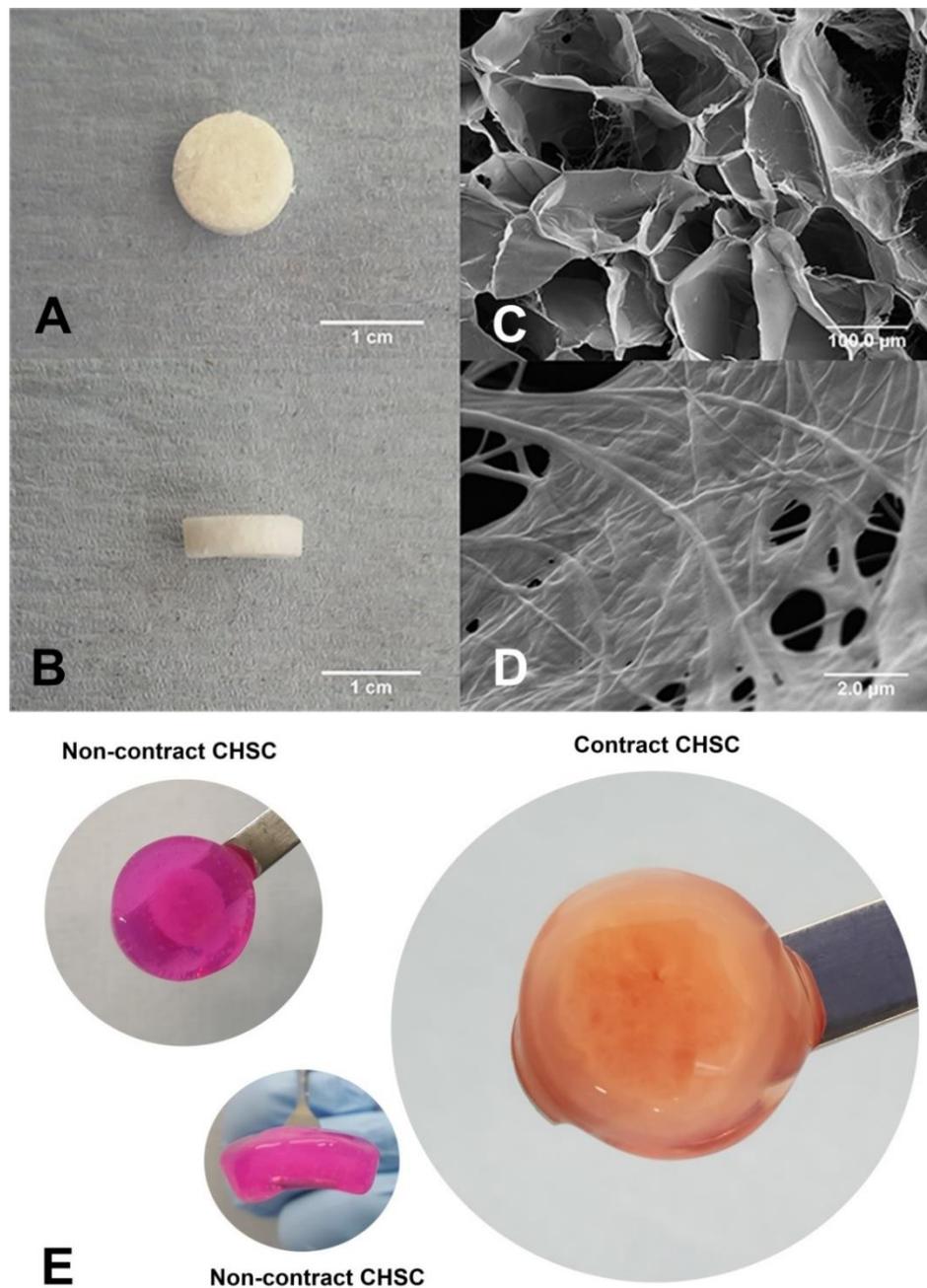
### 6.4.1 Mechanical validation

The studies of porous characteristics (by SEM), mechanical properties of CHSCs, as well as reproducibility of CHSC composite preparation were conducted. The pattern of CHSCs responding to NS was also studied.

#### 6.4.1.1 Characteristics, SEM and CHSC

The 5% weight of freeze dried collagen sponges were prepared in order to study the effect of NS on biphasic scaffolds. The average pore size was 227.74  $\mu\text{m}$  (SD 72.93) (**Figure 6.3 A-D**), and the average elastic modulus of the dry collagen sponge was 1.08 MPa (SD 0.29) measured by compression testing (Zwick-Roell, compression rate 1 mm/min) (**Appendix III**). CHSC was lift up with spatula for a simple inspection.

CHSC was maintained its shape and handleable in both pre- and post-contraction (**Figure 6.3 E**).

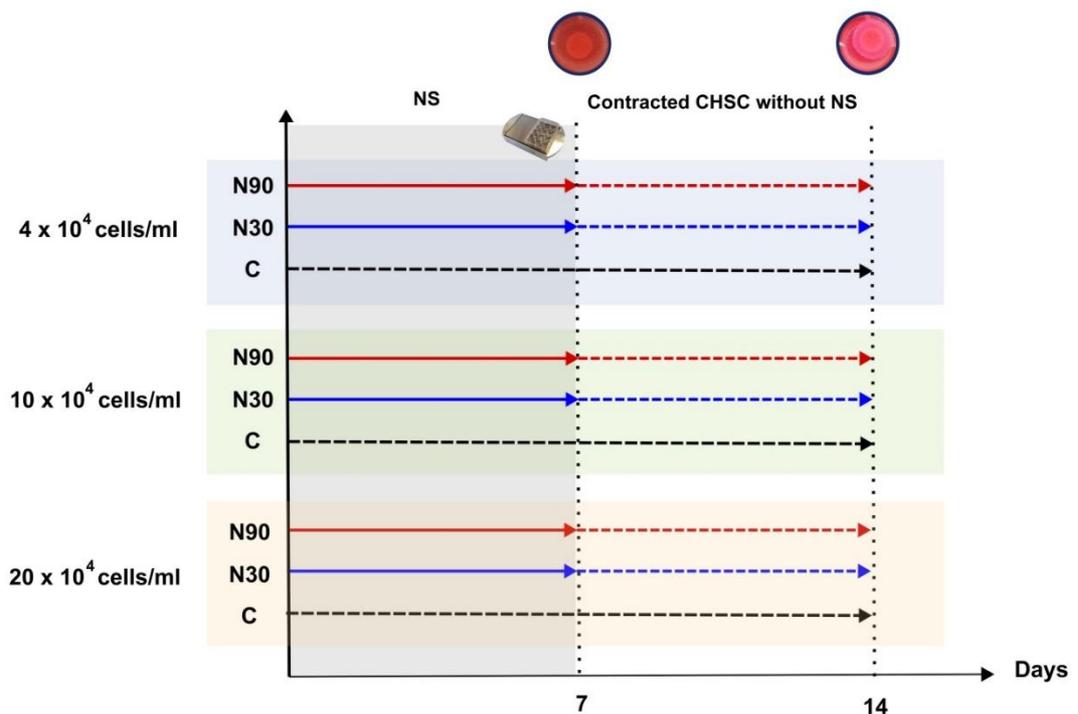


**Figure 6.3** **Sponge characteristics, SEM and CHSC**

The 5% weight freeze-dried collagen sponges were prepared (A-B). SEM showed the homogeneous porosity of the collagen sponge (magnification c; 200x, d; 10,000x) (C-D). CHSC was maintained its shape (E).

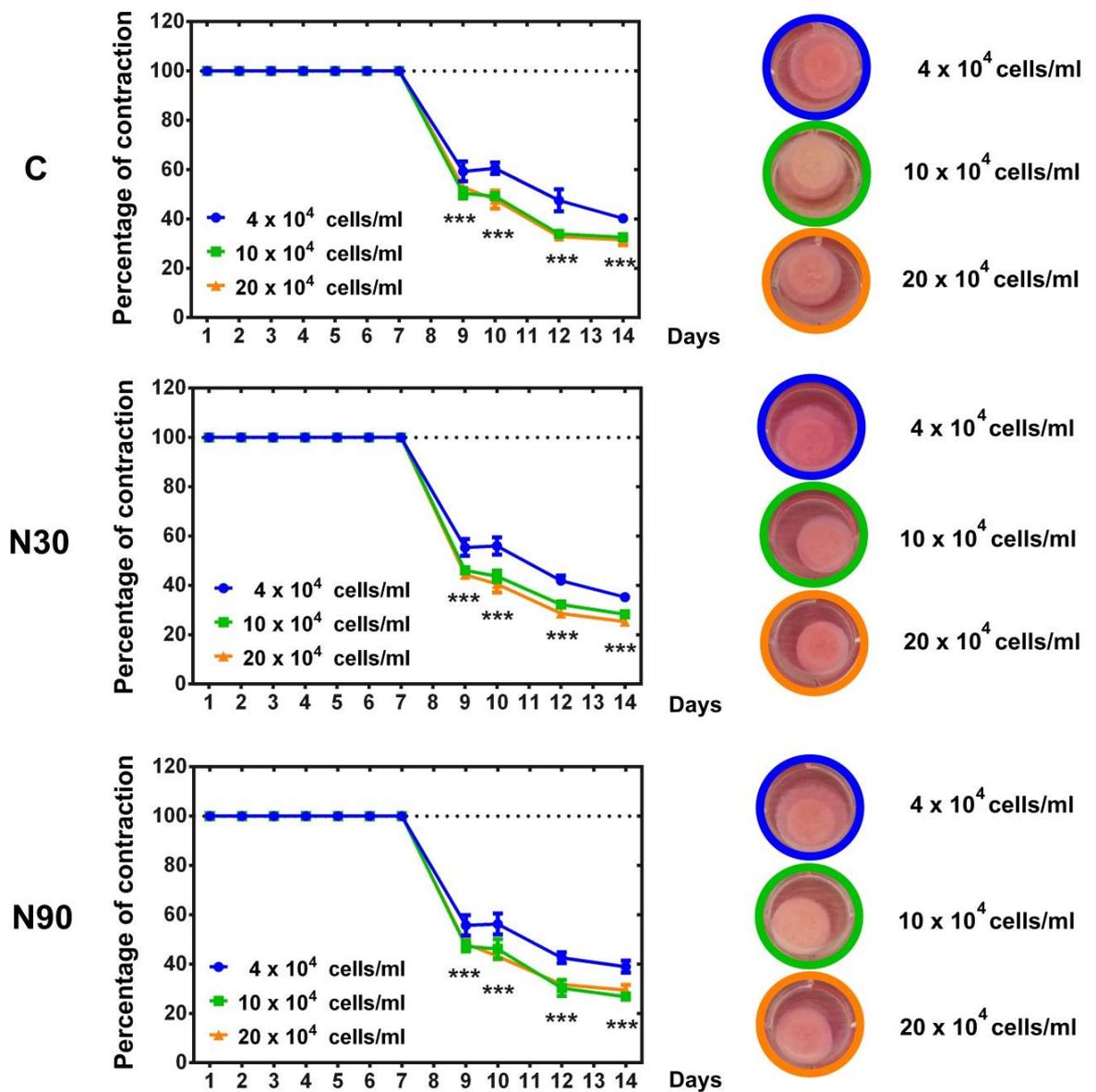
### 6.4.1.2 Hydrogel contraction

Initially, the “one-week NS protocol” was developed to evaluate the reproducibility of CHSC contraction. To study CHSC contraction progression, Stro1-selected MSCs were mixed in collagen hydrogels at different cell concentrations (4x, 10x and 20x10<sup>4</sup> cells/ml) and prepared as CHSCs. After NS for 7 days, the hydrogel component was detached from the wells and cultured for a further 14 days (**Figure 6.4**). At day 9, all CHSCs in all groups started to contract until the gels touched the sponge. Increasing the number of cells seeded had some effect on hydrogel contraction, but no effect of NS on CHSC contraction was found (**Figure 6.5**).



**Figure 6.4** Diagram of hydrogel contraction study

To test the “one-week NS protocol”, three different cell concentration groups (4x, 10x and 20x10<sup>4</sup> cells/ml) were stimulated with N30 and N90 for 7 days. At day 7, CHSCs were detached and continuously cultured until day 14.

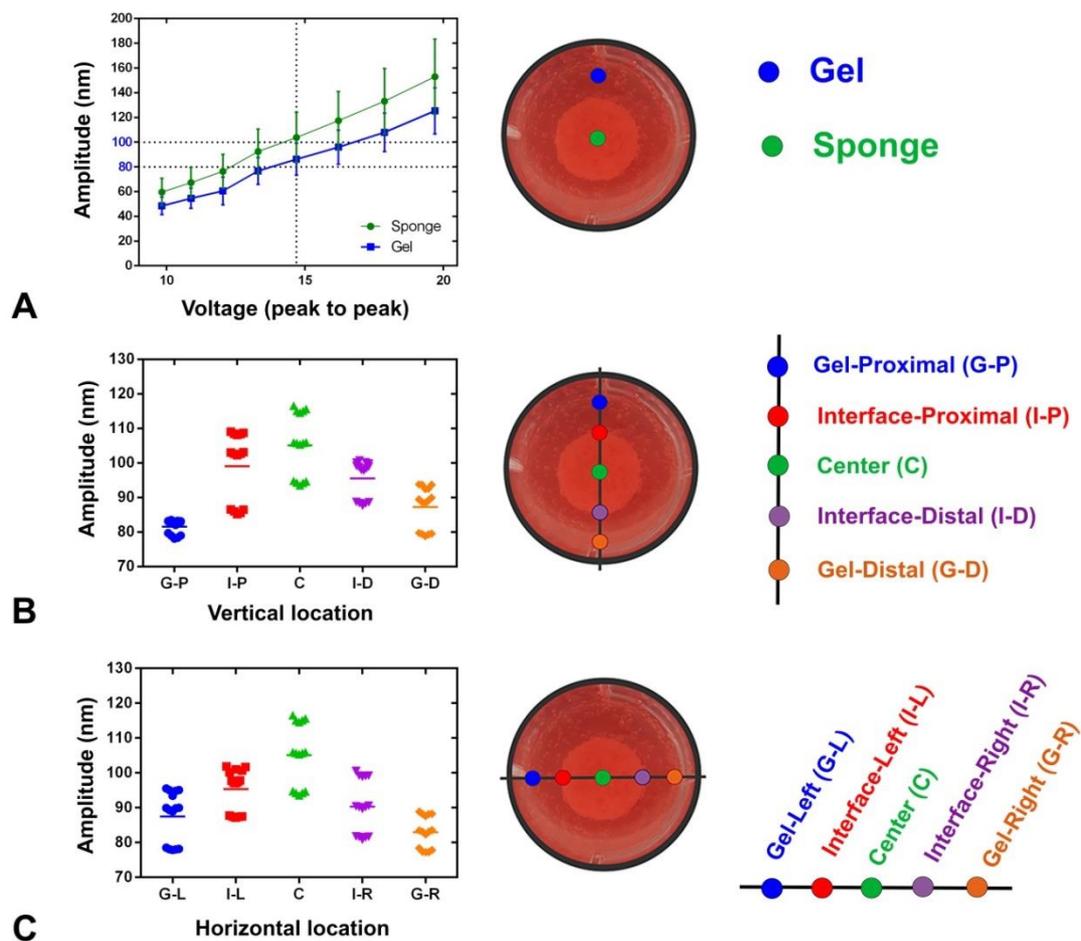


**Figure 6.5 CHSC contraction observation**

CHSC contraction was observed between day 7 and 14. At day 7, CHSCs were detached from the culture plates. All CHSCs started to contract at day 9; the hydrogels were significantly contracted in the 10x and 20x10<sup>4</sup> cells/ml groups comparing to the 4x10<sup>4</sup> cells/ml group. This result implies that the high cell numbers possibly increased the cell pulling force (mean±SD, n=4, \* = P ≤ 0.05; \*\* = P ≤ 0.01; \*\*\* = P ≤ 0.001, Two-way ANOVA, Tukey's post hoc test).

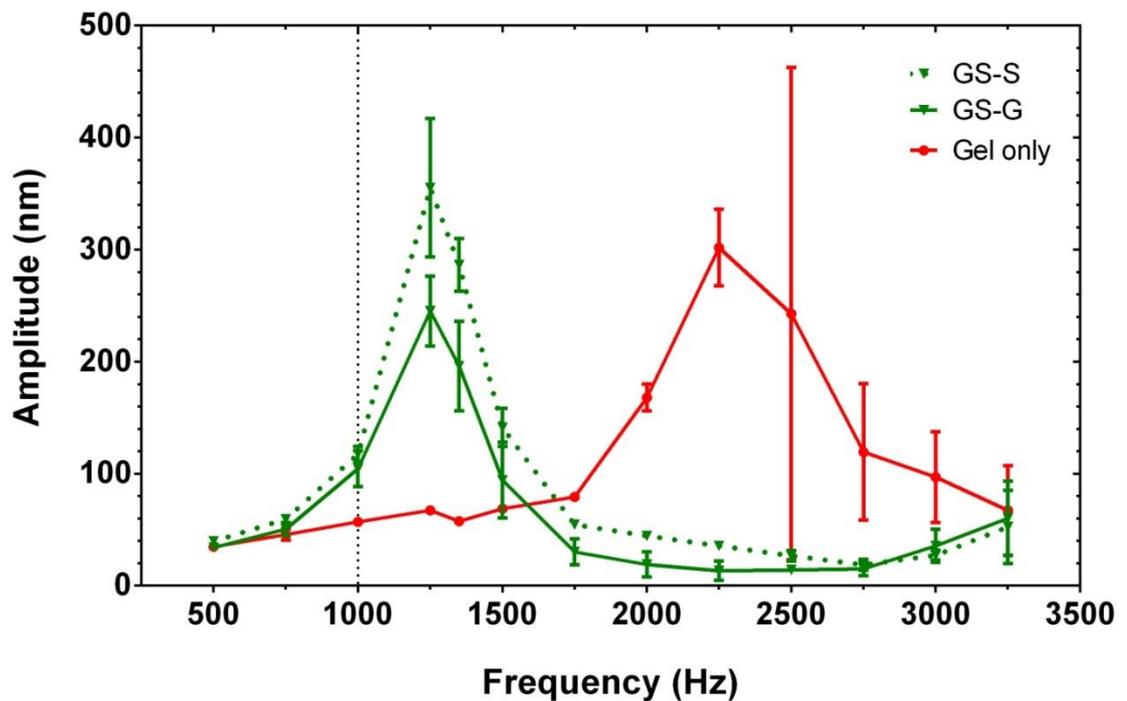
### 6.4.1.3 Displacement amplitude in hydrogel-sponge composite

To confirm that the cells would feel the vibrations in the hydrogel-sponge composite during NS, the hydrogel displacement amplitudes were measured at the centre of the hydrogel (at the sponge area) and hydrogel periphery (where MSCs were seeded). **Figure 6.6A** shows that the NS bioreactor generated reliable CHSC displacement amplitudes within the elastic range of the hydrogel; increasing voltage increased the CHSC surface displacement in a linear manner. The CHSC surface amplitude at the sponge area (centre of CHSC) was always slightly higher than the gel area (peripheral area) (**Figure 6.6 B-C**). A graph of frequency (Hz) - amplitude validation was plotted in order to study the resonance phenomenon of hydrogel-sponge composite (**Figure 6.7**). A reduction of CHSC resonance frequency was noted (at 1,250 Hz) when comparing to hydrogels without sponge (at 2,250 Hz).



**Figure 6.6 Amplitude validation of CHSC during NS**

Voltage (peak to peak)-amplitude validation (A); Linear pattern of the relationship between amplitude-voltage represented that nanovibrational stimulating bioreactor was reliable and desired frequency was tunable within the elastic range of the hydrogel. Hydrogel displacement along vertical (B) and horizontal (C) lines showed that the peak of amplitude located at the centre of hydrogel-sponge composite (C; centre, D; distal, G; gel area, I; interface between gel and sponge, L; left, P; proximal, R; right).



**Figure 6.7 Frequency-amplitude validation by interferometry**

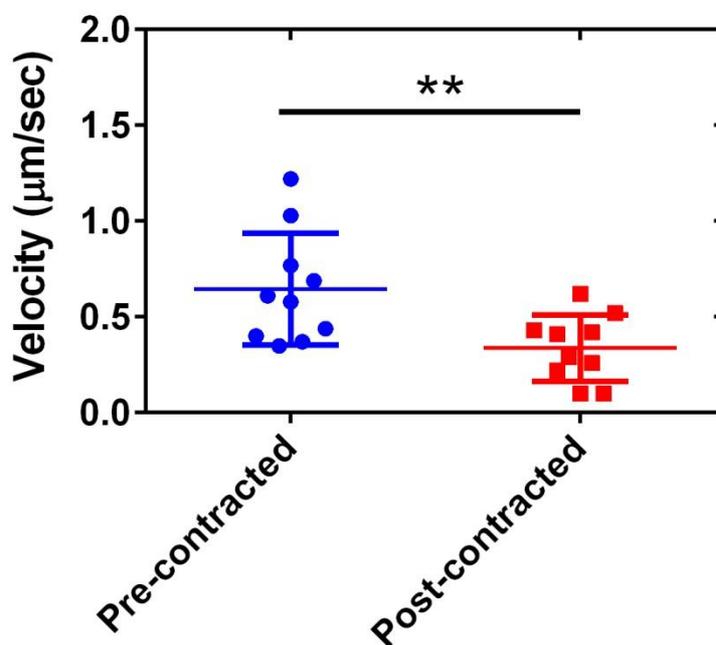
Frequency-amplitude validation. Decrease of resonance frequency in gel-sponge composites (green) comparing to the hydrogel without sponge group was noted (red) which followed the rule of simple harmonic motion. In both gel and the hydrogel-sponge composites, NS still showed a good fidelity at 1000 Hz stimulation. GS; gel-sponge composite, G; gel area (peripheral area), S; sponge area (centre area).

#### 6.4.2 Biological validation of cells-hydrogel-sponge composite

Next, the biological response of CHSCs as well as biocompatibility were carried out. Firstly, the interaction between cells and the sponge in the composite was tested. Cell behaviors in the CHSC, such as cell migration and velocity were studied. Moreover, biocompatibility was also tested by Alamar Blue assay. Utmost, MSC phenotype of NS induced CHSCs was investigated.

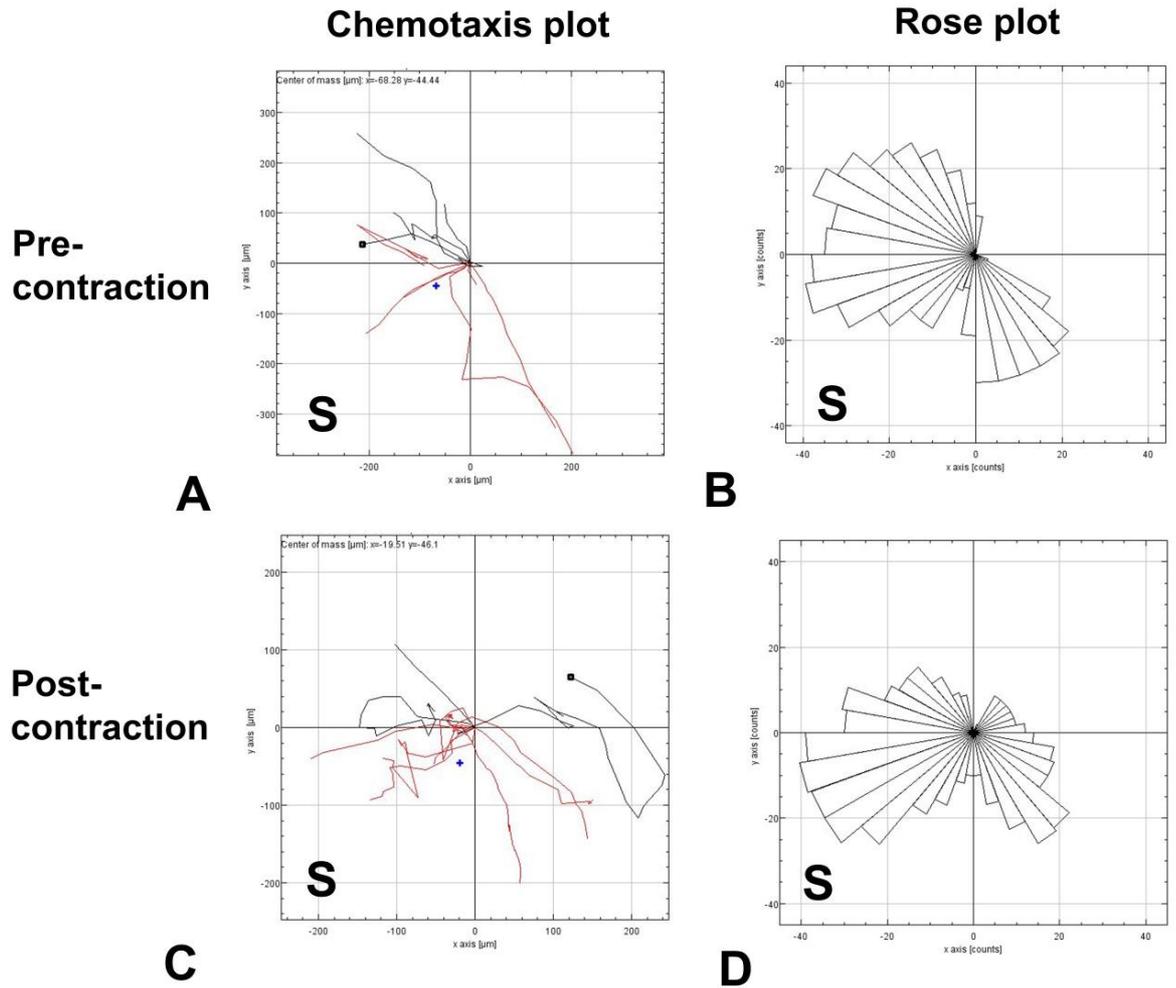
### 6.4.2.1 Time lapse microscopy

To investigate cell viability in pre- and post-contracted CHSC,  $4 \times 10^4$  cells/ml of MSCs were seeded into CHSCs. Time-lapse microscopy images were taken at day 6 (pre-contracted) and 10 (post-contracted) for 24 hours. Cell migration velocity in the pre-contracted CHSCs was significantly higher than that in the post-contracted CHSCs (**Figure 6.8**). Chemotaxis plots and rose plots illustrated that cells favored migration towards the sponge in both pre- and post-contracted gels (**Figure 6.9**).



**Figure 6.8 Effect of CHSC contraction on cell migration velocity**

Comparison of cell migration velocity in pre-contracted and post contracted hydrogels showing that cell velocity decreased in the contracted hydrogels ( $n=10$ ) (mean $\pm$ SD,  $n=10$ , \* =  $P \leq 0.05$ ; \*\* =  $P \leq 0.01$ ; \*\*\* =  $P \leq 0.001$ , paired t-test)

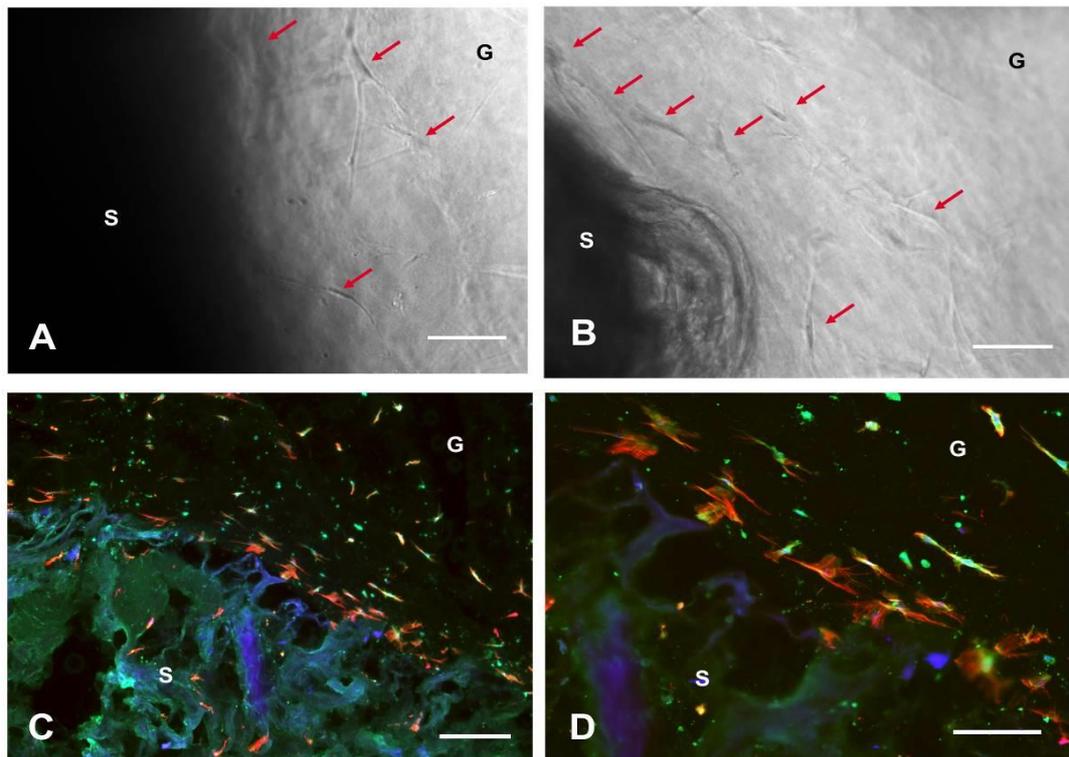


**Figure 6.9 Cell movement direction**

Chemotaxis and rose plots demonstrated that cells tended to migrate toward the sponge in non NS-stimulated CHSCs. (n=10, red line; counts the upward direction, black line; counts the downward direction, +; center of migration, S; collagen sponge in CHSCs).

### 6.4.2.2 Cell characteristics at hydrogel-sponge junction

As MSCs in the CHSCs tended to migrate toward the sponge (Figure 6.9), it was decided to look closer. Thus,  $4 \times 10^4$  cells/ml of MSCs were seeded into CHSCs and cultured for 14 days without NS. Microscopy showed that MSCs tended to move toward to the sponge in pre-contracted CHSCs. In contracted CHSCs, MSCs attached onto the sponge (Figure 6.10 A-B). Next, CHSC cryosections were studied to identify MSCs inside the sponge. The  $10^4$  cells/ml of MSCs seeded into CHSCs and cultured for 1 week without NS. CHSCs contraction was allowed at day 7. At day14, contracted MSC seeded CHSCs were sliced by cryosection and immunofluorescence stains (myosin IIa, actin and DAPI) were carried out. Microscopy showed that MSCs attached onto sponges. Red stained cells (actin) could be seen inside the sponges (Figure 6.10 C-D).



**Figure 6.10** Microscopy and cryosection of gel-sponge

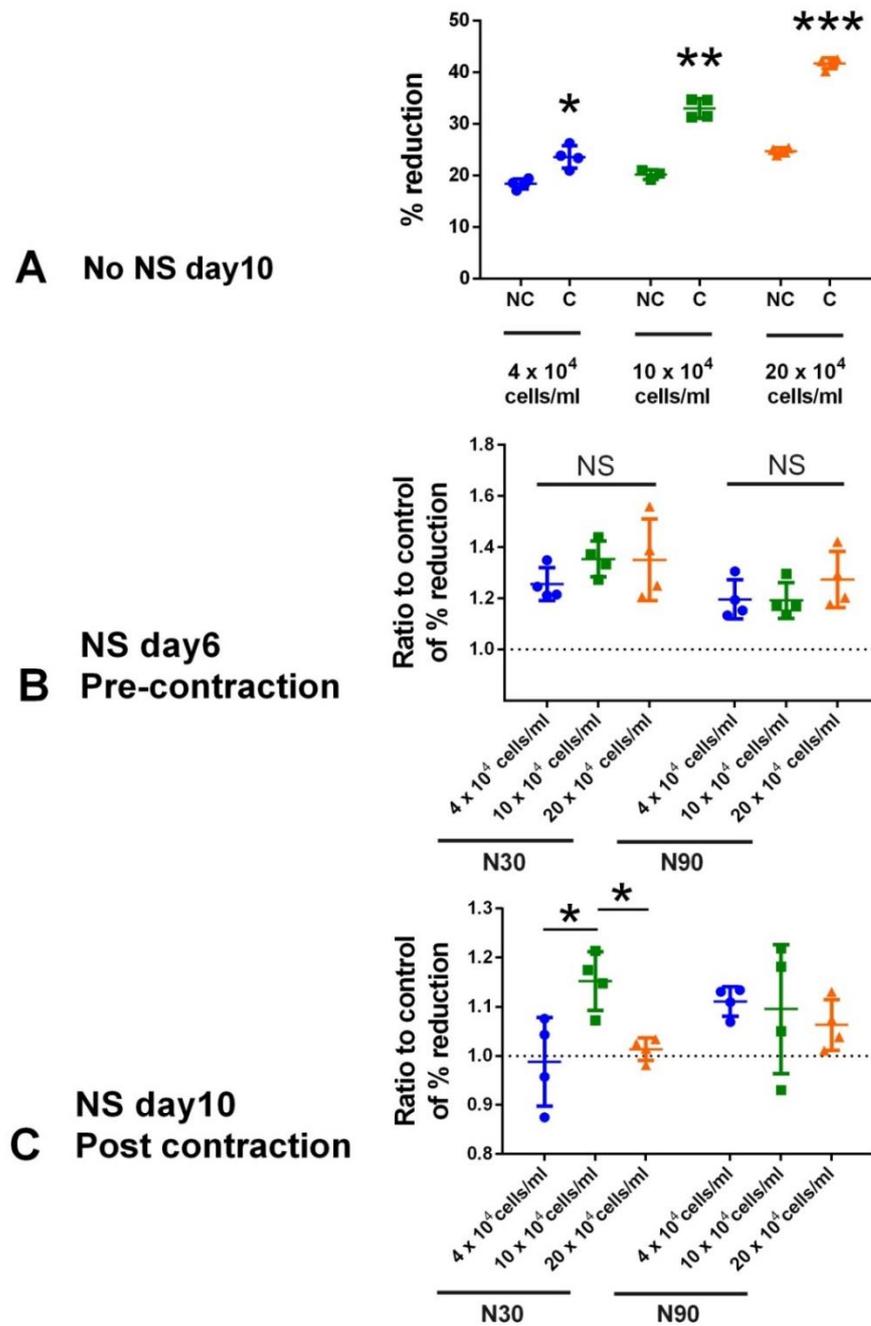
A-B Microscopy of the gel-sponge composite. Stro1 selected MSCs at day7 (A) in precontracted CHSCs showed that MSCs were viable and tended to move toward the sponge (20x magnification, scale bar 100  $\mu$ m). At day 12 (B), in contracted

CHSCs, viable MSCs were still seen in the hydrogel (20x magnification, scale bar 100  $\mu\text{m}$ ).

C-D Gel-sponge cryosections. Cryosections of the contracted CHSCs at day 14 showed MSCs attached onto the sponge. (C; 4x magnification; scalebar 300  $\mu\text{m}$ , D; 10x magnification; scale bar 150  $\mu\text{m}$ , Green; myosinIIa, Red; actin, Blue; DAPI, S; sponge, G; hydrogel)

### 6.4.2.3 Alamar Blue study

Stro-selected MSCs seeded with different cell concentrations (4x, 10x,  $20 \times 10^4$  cells/ml) into CHSCs were prepared to investigate biocompatibility using the alamar blue assay. The 1-week NS was performed as in **Figure 6.4**. The Alamar Blue study (**Figure 6.11A-C**), representing both viability and metabolic activity, emphasized again that CHSCs were compatible for MSCs. Interestingly, the percentage of alamar blue reduction in the contracted CHSCs was significantly higher than in the non-contracted CHSCs (**Figure 6.11A**). This could be interpreted that MSCs in the contracted CHSCs are more active than cells in non-contracted CHSCs. During NS (day 6), the increase in the percentage of alamar blue reduction compared to non-stimulated controls indicated that NS enhanced cellular metabolic activity (**Figure 6.11B**). This activity remained in the N90 group after stopping stimulation (day 11) (**Figure 6.11C**). Construct loading with a high number of cells produced greater metabolic activity than lower concentrations.



**Figure 6.11 Alamar blue study in CHSC**

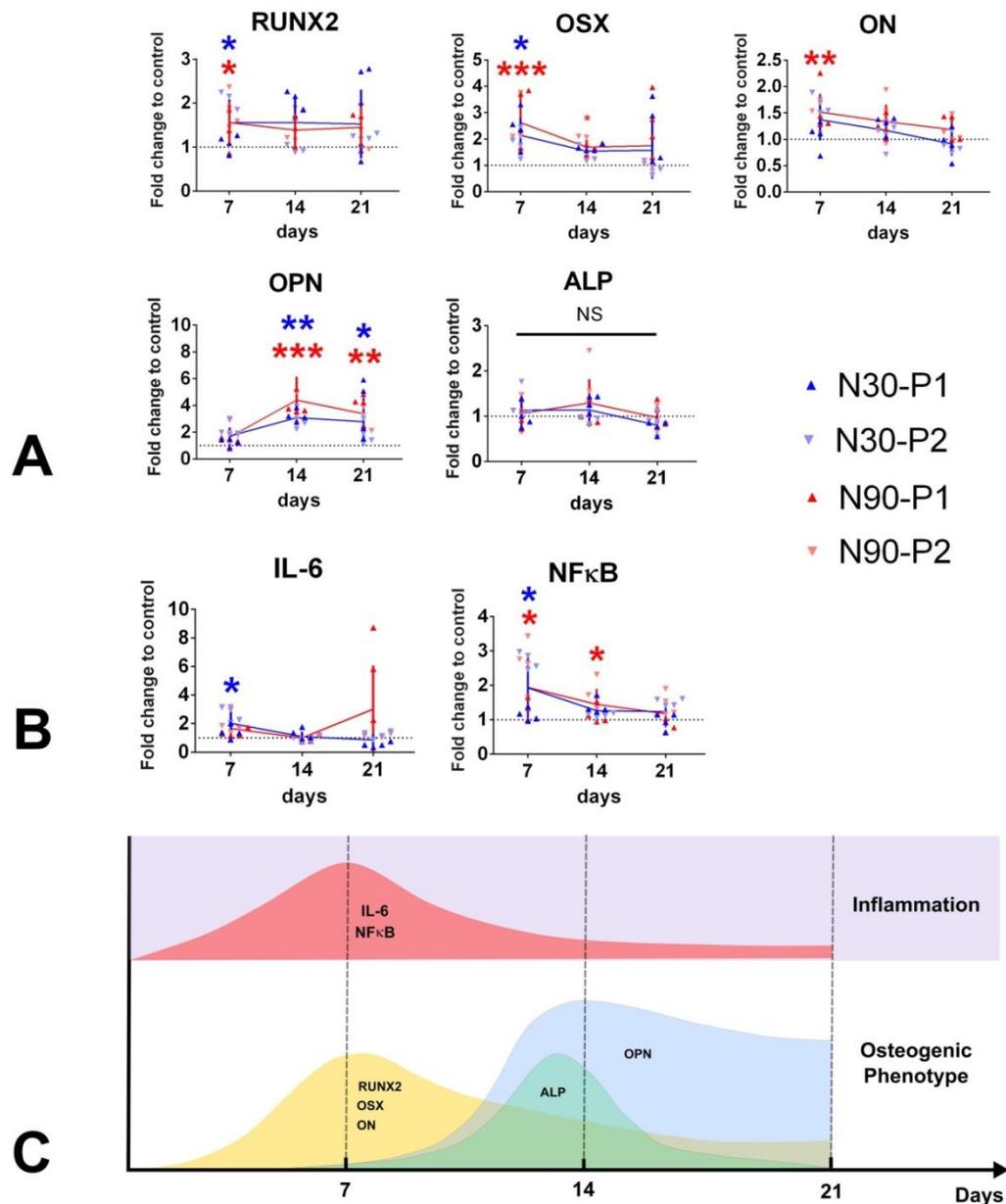
- A) Comparing contracted and non-contracted CHSCs at day 10, metabolic activity in the contracted CHSCs was higher than that in the non-contracted CHSCs, indicating that MSCs are more active in the contracted CHSCs. (mean $\pm$ SD, n=4, \*= P $\leq$  0.05; \*\* = P $\leq$  0.01; \*\*\* = P $\leq$  0.001, pair t test).
- B) Considering NS in pre-contracted CHSCs at day 6, NS enhanced metabolic activity compared to control (non-

contracted CHSC) (mean $\pm$ SD, n=4, \*= P $\leq$  0.05; \*\* = P $\leq$  0.01; \*\*\* = P $\leq$  0.001, one-way ANOVA, Tukey's post hoc test).

- C) After stopping the stimulation at day 7, metabolic activities in all groups were reduced at day 10. Interestingly, the activity in N90 group was the same compared to control (contracted CHSC) (n=4, \*= P $\leq$  0.05; \*\* = P $\leq$  0.01; \*\*\* = P $\leq$  0.001, one-way ANOVA, Tukey's post hoc test).

#### 6.4.2.4 Temporal gene analysis

Next, a temporal gene study was performed to select an adequate dose of NS which can commit MSCs for osteoblastic differentiation. The  $4 \times 10^4$  cells/ml of Stro1-selected MSCs/ml in CHSCs was prepared. MSCs in CHSCs were stimulated with NS for 7, 14 and 21 days without detachment, therefore, there was no hydrogel contraction. RUNX2 and OSX upregulation were found at week 1 for osteogenic commitment. OPN was upregulated in week 2-3. The N90 group provided better osteogenic induction than the N30 group (**Figure 6.12A**). Considering inflammation, IL-6 upregulation was noted at week 1 indicating that MSCs produced an inflammatory response. However, the inflammation was reduced in week 2-3. This suggests a controllable inflammatory response that is beneficial for osteogenesis. NF $\kappa$ B was produced at week 1 and again was reduced by week 2-3 corresponding to IL-6 level and supporting the controlled inflammation hypothesis (**Figure 6.12B**). The summary diagram of NS induced phenotype and inflammatory response is shown in **Figure 6.12C**.



**Figure 6.12 Temporal gene study at day 7-21**

NS induced osteogenic gene expression. RUNX2, OSX and ON were upregulated at week 1 for osteogenic commitment while OPN was increased at week 2-3 (A). Inflammation (linked to IL-6 and NF $\kappa$ B levels) was found at week 1 but decreased at week 2-3 indicating that inflammation is controllable (B). A diagram illustrating the relationship between phenotype and inflammatory response (C) (mean $\pm$ SD, P1-2; patient 1-2, \* =  $P \leq 0.05$ ; \*\* =  $P \leq 0.01$ ; \*\*\* =  $P \leq 0.001$ ,  $n=3$ , One way ANOVA, Tukey's post hoc test).

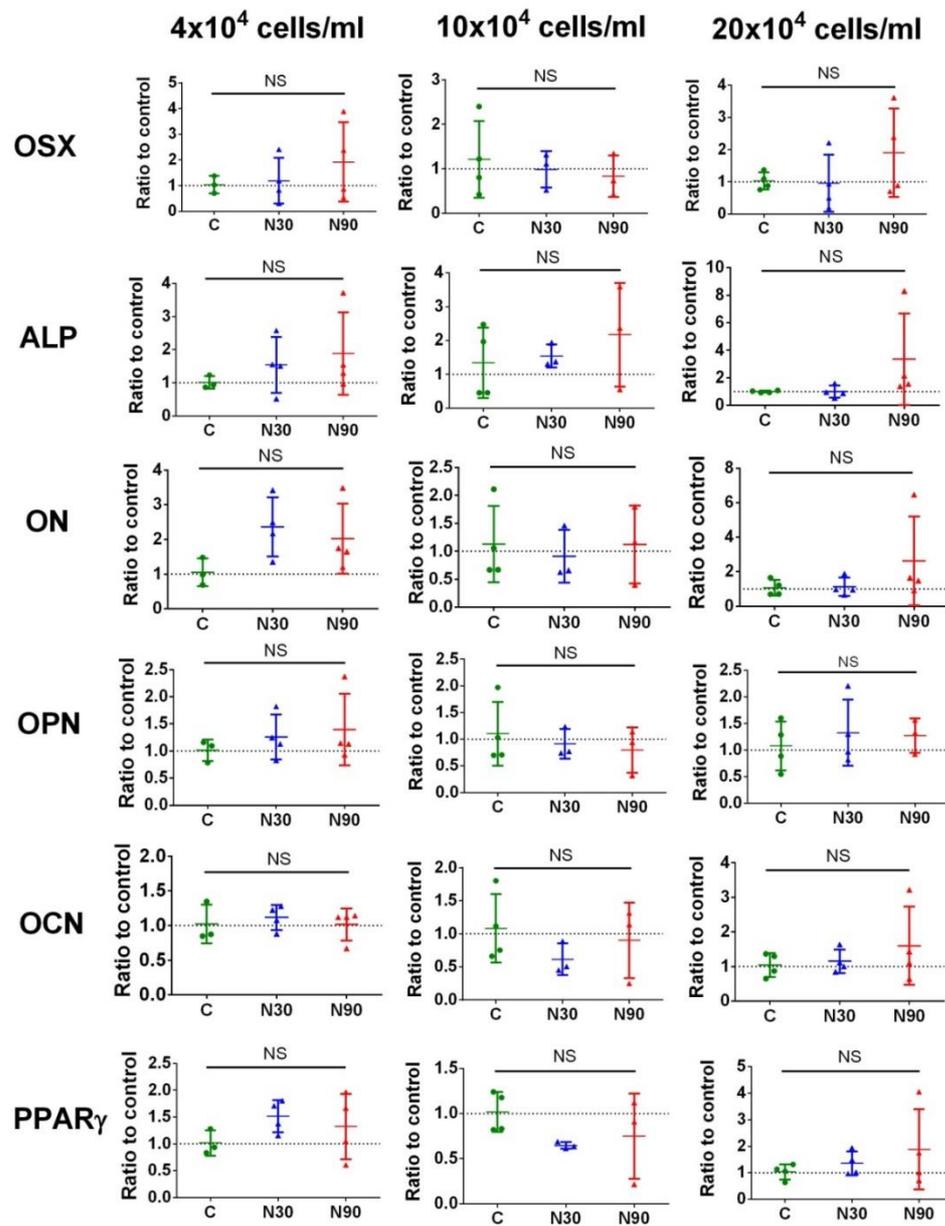
### 6.4.3 Nanovibrational stimulation and phenotypic memory

Maintaining the osteogenic phenotype of MSCs after NS is important for translation into clinics and clinical applications. From the temporal gene study above (**Figure 6.12**), it was shown that 1-2 weeks of NS possibly provided an adequate dose triggering osteogenic gene expression. To study whether MSCs can memorize their osteogenic commitments or if their phenotypes were reversible, models of 1- and 2-week NS were created for a phenotypic memory test. CHSCs contraction was allowed after 7 or 14 days and phenotypes were then tested after an additional week (after 7 days of NS) or 2 weeks (after 2 weeks of NS) after the end of NS. The outcomes could suggest the best process for clinical translation in the future production of a handlable, osteogenic scaffold where contraction issues have been considered.

#### 6.4.3.1 Gene expression (1 week-NS and qRT-PCR at week 2)

As the effects of cell seeding number and duration of NS on osteogenic phenotype expression and cell fate memory are unknown, three different cell concentrations (4x, 10x and 20x10<sup>4</sup> cells/ml) of Stro1 selected MSCs seeded in CHSCs were prepared. CHSCs were nanovibrated for 1 week. After this stimulation, hydrogels were allowed to contract onto the sponge by detaching them from the wells. CHSC cultures were then maintained in incubator for a further week. At week 2, phenotypic studies were performed by qRT-PCR. The increased trend of osteogenic gene upregulation in N90 group including osterix, osteonectin, osteopontin and alkaline phosphatase were noted but they were not significant. Theoretically, cell-seeding concentration can affect differentiation. Bitar M et al, showed a cell density of 10<sup>6</sup>-10<sup>7</sup> cells/ml can increase RUNX2 and osteonectin transcriptions (Bitar et al., 2008). However, no significant effect of cell seeding concentration on osteogenic induction was noted (**Figure 6.13**). As loading MSCs with 4x10<sup>4</sup> cells/ml in CHSCs used less cell but

provided the best osteogenic induction, this was selected to go forwards.

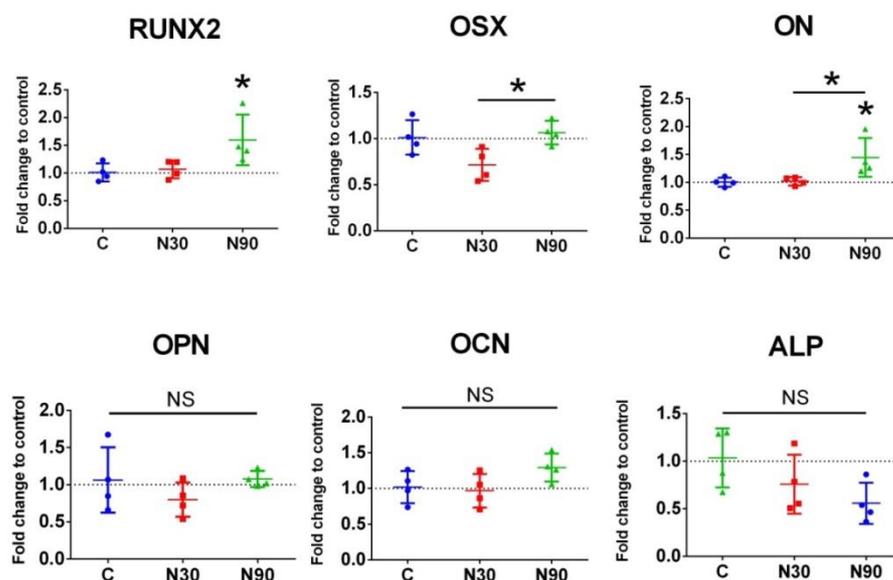


**Figure 6.13** qRT-PCR at week 2 after 1 week-NS

qRT-PCR at day 14 showed the trend of osterix, alkaline phosphatase, osteonectin and osteopontin gene upregulation in N30 and N90 groups. No significant effect of cell concentration on osteogenic gene expression was noted. The 4x10<sup>4</sup> cell/ml appeared to provide the best osteogenic induction results (mean±SD, n=4, \* = P≤ 0.05; \*\* = P≤ 0.01; \*\*\* = P≤ 0.001, Tukey post hoc test, Dunn's post hoc test).

### 6.4.3.2 Gene expression (2 week-NS and qRT-PCR at week 4)

The previous experiment showed that 1 week-NS can produce only a very slight evidence of osteogenesis in CHSCs (Figure 6.13), the next experiment was designed to increase duration of stimulation to 2 weeks. The  $4 \times 10^4$  cells/ml of Stro1-selected MSCs seeded in CHSCs were used in this study. After 2 weeks of stimulation, hydrogels were allowed to contract onto the sponge and then cultured without stimulation up to 4 weeks. qRT-PCR at week 4 showed RUNX2 and osteonectin (ON) were significantly increased in N90 group (Figure 6.14). This result indicated that 2 week-NS with N90 triggered osteogenic commitment driving MSCs into preosteoblasts. ALP, OPN and OCN expression were not changed (Figure 6.14). ALP plays a role in hydrolysing organic to inorganic phosphate. Thus, no induction of ALP may affect mineralization through inorganic phosphate reduction (Orimo, 2010; Siffert, 1951). As the increase trend of OPN was found at week 2-3 in previous temporal gene study (Figure 6.12), the lack of change in OPN and OCN at week 4 (Figure 6.14) may also affect bone remodelling (Icer & Gezmen-Karadag, 2018).



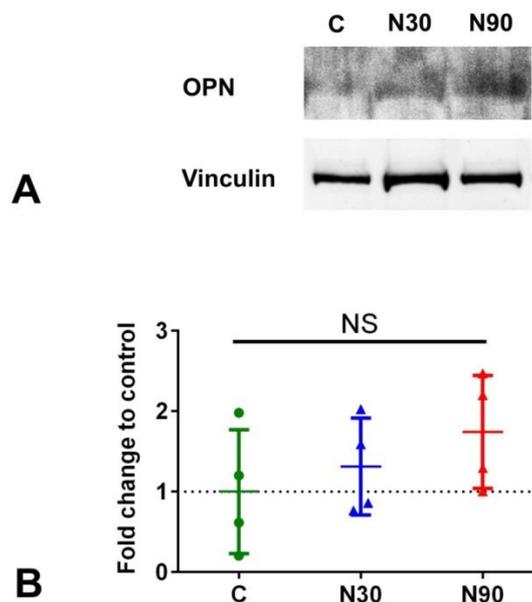
**Figure 6.14** qRT-PCR at week 4 after 2 weeks-NS

Only RUNX2 and ON were significantly upregulated in N90. The result indicated that N90 potentially committed MSCs to preosteoblasts in this regime. (mean  $\pm$  SD, n=4, \* =  $P \leq 0.05$ ; \*\* =  $P \leq 0.01$ ; \*\*\* =  $P \leq 0.001$ , One way ANOVA, Tukey's post hoc test).

### 6.4.3.3 Protein expression (2 weeks-NS and western blot at week 3)

As qRT-PCR at week 4 (after 2 weeks-NS) showed low levels of OPN, this was investigated further and OPN expression at week 3, after 2 weeks of NS, was conducted. The  $4 \times 10^4$  cells/ml of Stro1-selected MSCs seeded in CHSCs was stimulated for 2 weeks. After that CHSCs were detached allowing hydrogel contraction onto the sponge and cultured for a further week without NS. Western blots were performed at week 3. An increased, non-significant, trend of OPN was found in the N90 group (Figure 6.15).

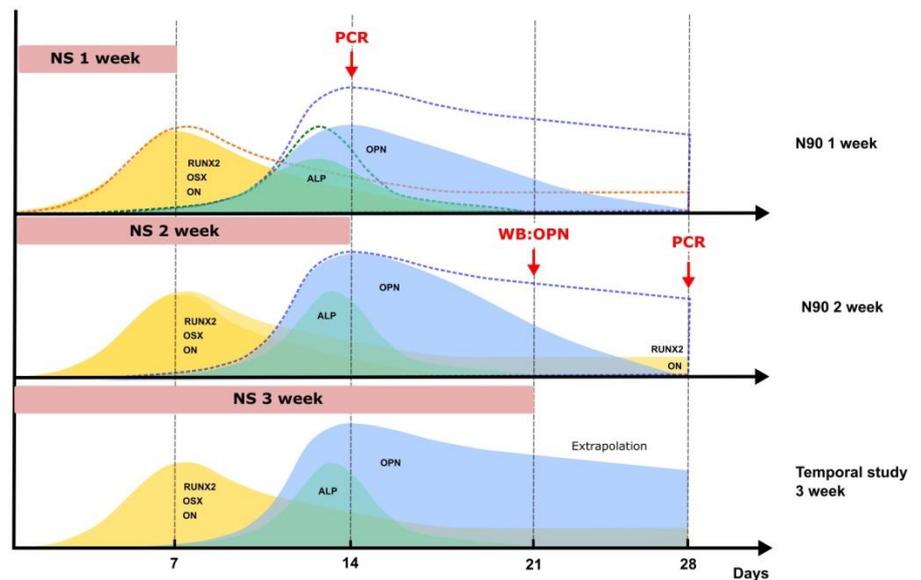
Summarising the NS memory tests, 2 week-N90 stimulation can induce osteogenic gene expression showing the successful up-regulation of RUNX2 (week 1) and osterix (week 2) (Figure 6.12). This result indicates that MSCs are slowed in their progression and are possibly at the preosteoblast stage after the stimulation and rest. Summary diagram was shown in Figure 6.16.



**Figure 6.15 Western blot of osteopontin at week 3 post 2 week-NS**

After 2 weeks of NS, CHSCs contraction was allowed. Western blot study showed a trend of OPN protein upregulation in N90 at week 3. The result indicated that after 2 week-NS, MSCs possibly

memorized osteogenic expression upto week 3 (mean $\pm$ SD, n=4, One-way ANOVA, Tukey's post hoc test).



**Figure 6.16** The summary of phenotypic memory test after stimulating with 1 week- and 2 weeks- N90 protocol in CHSC.

Stimulating with 1 week-N90 was inadequate to induce osteogenesis. Interestingly, 2 weeks of N90 stimulation was possibly adequate to commit MSCs at preosteoblast stage showing by significant upregulations of RUNX2 and ON at week 4.

## 6.5 Discussion

### 6.5.1 CHSC; the clinical application model for NS and rationale of 1-2 week NS protocol.

Collagen type I hydrogels provide a range of biological advantages (Antoine, Vlachos, & Rylander, 2014). Hydrogel stiffness is compatible with a hematoma which is formed in the initial phase of fracture healing (Ryan et al., 1999). The increase in cell number by collagen supporting proliferation (Chinnapaka Somaiah et al., 2015) as well as permitting differentiation, increase cell contractile force, known to be important for osteogenesis (Darinka D. Klumpers, Xuanhe Zhao, David J. Mooney, & Theo H. Smit, 2013; Kumar, Placone, & Engler, 2017), but that can result in gel contraction. This contraction, at the

wrong time can be problematic as once detached, the vibrations do not transmit faithfully.

The CHSC combined the advantages of hydrogel and sponge together. Hydrogels provide biological advantages such as allowing the distribution of nutrients, growth factors and oxygen, which are essential for the cell differentiation process (Hesse et al., 2010). Preparing cells in hydrogels can prevent cell sedimentation onto the bottom of the tissue culture wells, therefore improving MSCs distribution and attachment onto the sponge. On the other hand, the rigid sponge improves mechanical property of the scaffold. The sponge inside the hydrogel can also act to stop further hydrogel contraction, maintaining composite structure and extending the degradation time. Thus, control of contraction using the sponge results in a more handleable structure. Moreover, gel contraction can increase spatial cell-to-cell interaction (D. D. Klumpers, X. Zhao, D. J. Mooney, & T. H. Smit, 2013). In our study, the hydrogel creates the bonding to the rim of tissue culture wells. This hydrogel-well bonding, however, can be overcome by cell traction forces. Therefore, the time of hydrogel contraction can be chosen by controlling the force balance at the rim of well plate and hydrogel. At 2-3 days after hydrogel detachment, the hydrogels had contracted onto the sponges. The results showed that CHSC contraction can be made to be controllable and reproducible (**Figure 6.5**).

Next, the protocol that would allow the stimulated MSCs in CHSCs to be used for clinical application, was developed. The “1 week-NS protocol” was initially tested by stimulating CHSCs for 1 week with high amplitude stimulation (N90; 90 nm). The rationale is based on trauma patient scenario and the theory of cell mechanical memory after adequate exposure of mechanical stimulation (approximately 10 days) that results in irreversible phenotype (C. Yang et al., 2014). However, only a trend rather than statistical difference at this time point was observed. Next, NS duration was extended to 2 weeks. Phenotypical study at week 4 showed that MSCs were committed to preosteoblasts as shown by enhanced RUNX2 and OSX expression.

However, evidence of mineralization (by ALP) and remodelling (by OPN) were not obviously found.

### 6.5.2 Nanovibrational stimulation and mechanical response of CHSCs

In this study, collagen sponges were produced to study the effects of NS in CHSCs. It was demonstrated that the NS bioreactor is reliable with CHSCs and generates tunable stimulating amplitude by adjusting the voltage (**Figure 6.6A**). **Figure 6.6B and C** possibly explained that the CHSCs vibrated as circular membrane (e.g. a drumhead) in a standing wave pattern with greatest displacement at the centre. It was also found that incorporating the sponge into hydrogel changed the resonance frequency (**Figure 6.7**). To explain this phenomenon, it can be implied that during NS, the hydrogel is displaced in the culture plate well, driven by the stimulating frequency (1,000 Hz) without energy loss and thus each hydrogel is displaced with its own natural frequency in a simple harmonic motion. The natural frequency of hydrogels can be explained by the equation below.

$$f = \frac{1}{2\pi} \sqrt{\frac{k}{m}} \quad (1)$$

Therefore, the change of mass (m) or elastic property (spring constant; k) results in changes in the hydrogel natural frequency. The resonance phenomenon represents that the external stimulating frequency (NS) equal to the natural frequency of the system resulting in amplification of gel displacement amplitude and showing a high peak of gel displacement. From **Figure 6.7**, the addition of sponge into the hydrogel increases mass (m) of the stimulated composite. Consequently, it reduces the natural frequency of the CHSC representing the reduction of resonance frequency.

The change of amplitude in the CHSC during NS can be explained by Newton's second law and Hooke's law as follows;

$$\text{Newton's second law; } F = ma$$

$$\text{Hooke's law; } F = -kx$$

$$\text{Therefore, } ma = -kx$$

(2)

Regarding equation (2), the increase of mass (m) amplifies the displacement of object (x). In a hydrogel without the sponge, the stimulation with 19.69 Vpp generated 91 nm average hydrogel displacement while in the CHSC (addition of mass [sponge] into the system), amplitude was increased to approximately 150 nm at the sponge zone (**Figure 6.6A**).

As aforementioned, the variation of amplitude due to changing the composite can be solved by tuning the stimulating voltage. At 1000 Hz, amplitude in CHSC was slightly increased compared to hydrogels alone, but it is reproducible without random vibrations occurring and can be tuned to achieve a 90 nm average.

### **6.5.3 Biological response in CHSCs; cell concentration, cell differentiation and phenotype memory theory**

In this study, it was demonstrated that CHSCs using the hydrogel contraction concept are biocompatible in terms of cell viability. Some literature has shown that the effect of gel contraction can provide unfavorable results such as cell apoptosis (Y. K. Zhu et al., 2001). However, in this study, the contraction was limited using the sponge and the effect of gel contraction was tested at three different cell concentrations. The Alamar Blue assay indicated that cell activity of the contracted CHSCs increased compared to that of the non-contracted CHSCs (**figure 6.11A**). It was also noted that MSCs tended to migrate toward the sponge in pre- and post-contracted CHSCs (**figure 6.9 - 6.10**).

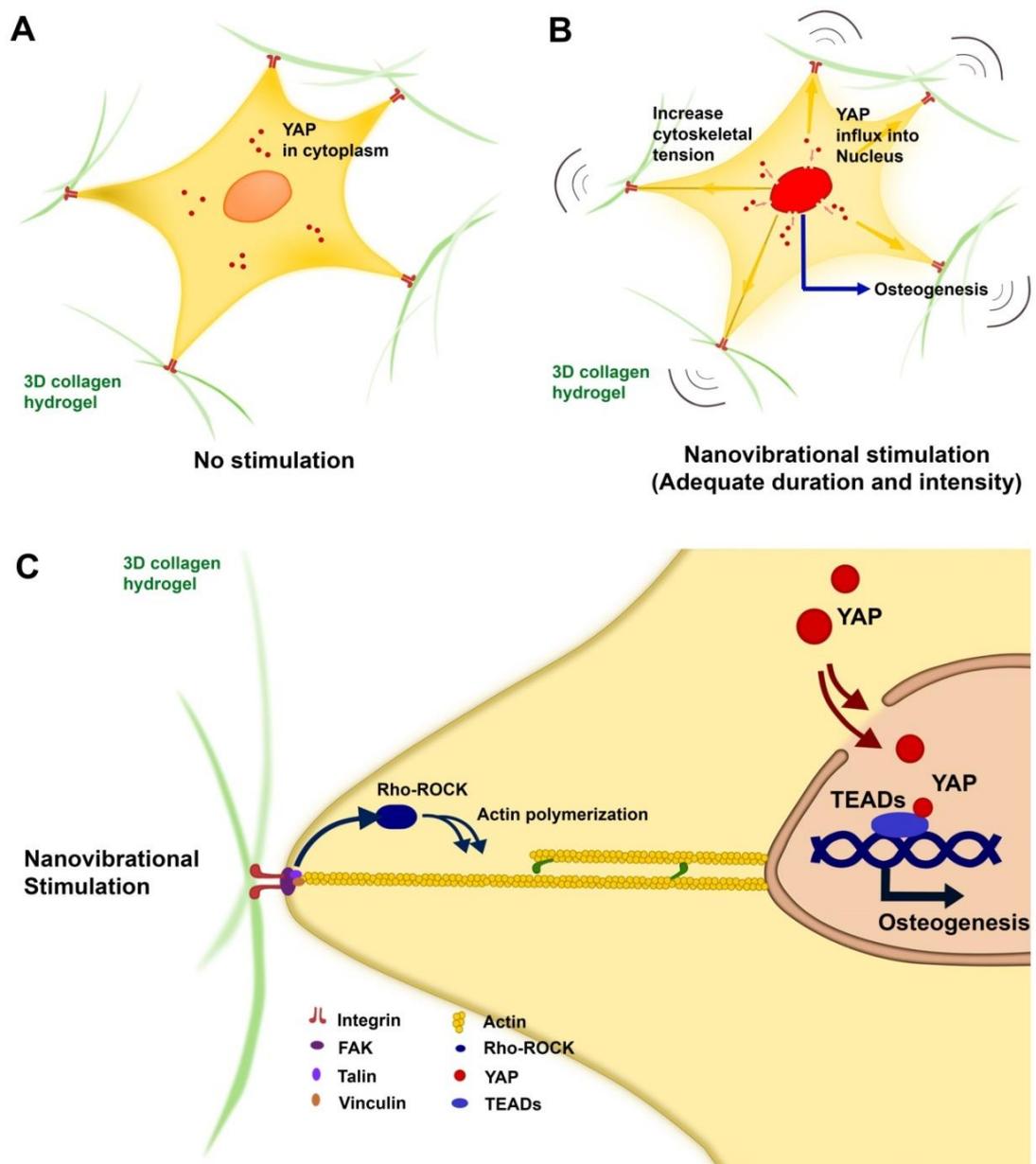
During NS, the increase of percentage of Alamar Blue reduction indicated that NS is an energetic process. Alamar Blue can be reduced by NADPH, FADH and cytochromes (Ehrbar et al., 2011). These

cofactors are involved in catabolism and anabolism. Together with the data in chapter 5, it was found that NS involved in lipid metabolism as well as increased osteogenic phenotype. Thus, we could imply that NS in the CHSCs potentially drives the cell differentiation process.

Again, in this study, the contracted CHSCs had higher cell metabolic activity compared to non-contracted CHSCs (**Figure 6.11A**). It was hypothesised that this change was linked to energy consumption of MSCs in order to migrate within the higher dense 3D matrix (contracted hydrogel). Microscopic images showed cell migration velocity in the pre-contracted CHSC was significantly faster than those in the post-contracted CHSCs. From the literature, it has been previously shown that contracted collagen hydrogels provide a dense collagen fiber architecture, driving cells to consume greater ATP during migration compared to pre-contracted gels (Zanotelli et al., 2018). Also in 3D matrices, matrix stiffness and pore size have been shown to affect cell differentiation (Petrie & Yamada, 2015). Cells form focal adhesions in direct correlation to increasing stiffness and transfer mechanotransductive signals to the nucleus. Stiff surfaces can induce MSC osteogenesis while soft surfaces direct MSC towards adipogenesis (Engler et al., 2006). During cell migration through small pores, cells are squeezed and subsequently transfer mechanical signal to their nuclei (Fruloux & Hawkins, 2016; Petrie & Yamada, 2015). The increase of matrix stiffness could increase the reaction force interaction to the cell nucleus enhancing YAP (Yes-associated protein) influx (Dalby, Garcia, & Salmeron-Sanchez, 2018). YAP/TAZ is a pathway which links to differentiation control by mechanical cues (Codelia, Sun, & Irvine, 2014; J. X. Pan et al., 2018; Piccolo, Dupont, & Cordenosi, 2014). This concept triggered our curiosity to further study the effect of the contracted CHSCs on MSCs differentiation. It was hypothesised that the reduction of pore size in contracted hydrogels might modulate cell differentiation by directly deforming nuclear shape as well as relatively increasing cytoskeletal tension during migration. Moreover, the increase of metabolic activity in the contracted hydrogel might be related to the increase of oxygen consumption, ROS production and oxidative phosphorylation consequently affecting MSC differentiation e.g. osteogenesis (Arakaki, Yamashita, Niimi, & Yamazaki, 2013). Theoretically, the matrix stiffness which can drive osteogenesis, is very rigid (25-40 kPa) (Engler et al., 2006). However, some literature reports the effect of 3D collagen hydrogel contraction on driving osteogenesis (D. D.

Klumpers et al., 2013). In our study, the effect of hydrogel contraction onto the sponge was initially aimed at improving handleability and extending the material degradation time.

From the temporal gene study (**Figure 6.12**), nanovibration successfully promoted osteogenic gene expression in CHSCs. However, the evidence of osteogenic phenotype was less clear than that of the constant NS (**Figure 6.13, 6.14**). In theory, adequate duration and intensity of mechanical stimulation can commit an irreversible phenotype and NS is considered to be a mechanical stimulation (Tsimbouri P.M., 2017). Cells sense the mechanical environment using their cytoskeletons. Mechanical signals are transferred to the nucleus via actin and myosin by cytoskeletal tension change (K. H. Vining & D. J. Mooney, 2017). YAP/TAZ is important for mechanosensing and phenotype memory. YAP transfers mechanical signal via Rho-GTPase-dependent translocation to the nucleus (Driscoll, Cosgrove, Heo, Shurden, & Mauck, 2015). Influx and accumulation of YAP into the nucleus initiates the onset of osteogenic differentiation. Force intensity and duration link to YAP transport through the nuclear pores. Sufficient force allows YAP nuclear translocation into the nucleus (Elosegui-Artola et al., 2017; Panciera, Azzolin, Cordenonsi, & Piccolo, 2017). Exposure to adequate duration and intensity of mechanical stimulation thus results in irreversible phenotype (C. Yang et al., 2014) while inadequate force stimulation causes phenotype reversibility (Cui et al., 2015). The hypothesis of NS effect on cell memory is shown in **Figure 6.17**. Further studies of NS effect on YAP/TAZ pathway would need to be performed in future work.



**Figure 6.17 Hypothesis of mechanical memory and nanovibrational stimulation for 3D osteogenesis**

A) In non-stimulated MSCs, YAP remains in the cytoplasm. B) With adequate stimulation amplitude and duration, NS potentially increased cytoskeletal tension, in turn, there was an enhanced YAP influx into the nucleus thus driving osteogenesis. C) During NS, MSCs attach to the ECM via focal adhesions including integrins, which then enhance the Rho-ROCK pathway for actin polymerization and myosin II activation (Parsons, Horwitz, & Schwartz, 2010). The increase of cytoskeletal tension could stretch nuclear pores resulting in YAP influx into

the nucleus (Elosegui-Artola et al., 2017). Subsequently, YAP coactivated with TEA domain-containing sequence-specific transcription factors (TEADs) drive osteogenesis

## **6.6 Conclusion**

We are stepping towards translation of NS into a handleable format and trying to workout a robust and short NS protocol. Our composite is safe for cell viability and allows a controllable nanovibrational force transmission. NS enhanced osteogenic gene expression in the CHSCs. An extension of the duration of stimulation may improve phenotype expression without reversibility.

## **Chapter 7 General discussion and conclusion**

## Chapter 7 General discussion and conclusion

### 7.1 General discussion

In this section, interesting issues are discussed to help identifying further studies in the future. The ideas and concepts of improving the NS protocol and introducing scaffolds into clinics are also proposed.

#### 7.1.1 Amplitude, frequency or acceleration (g); which parameter should be focused on?

Low-magnitude high-frequency vibration (LMHFV) for osteogenic induction is studied with use of a diverse range of stimulating protocols (Chapter 1, Table 1.4). Considering the literature, osteogenic induction has been achieved using 0.3 g of acceleration but with varying frequencies and amplitudes (Lau et al., 2011; Marędziak et al., 2017; Mehta et al., 2018; Q. Zhao et al., 2017; Y. Zhou et al., 2011) (Chapter 1, Table 1.4). Interestingly, in this thesis, increasing the NS amplitude from 30 nm (0.12 g at 1000 Hz (Tsimbouri P.M., 2017)) to 90 nm (0.36 g at 1000 Hz) showed significantly increased osteogenesis where the acceleration corresponded to those of other LMHFV protocols. Considering the theory of simple harmonic motion (Garrett, 2017; Kett, 1982; "Simple harmonic motion," 2007), the relationship between acceleration, stimulating amplitude and frequency are shown in the equation below.

$$A = (a)(2\pi f)^2$$

Where A = acceleration (1g = 9.81 ms<sup>-2</sup>)

a = amplitude

f = frequency

From the equation, squaring of a slight increase of frequency results in a large change of acceleration while an increase of amplitude directly corresponds to the acceleration in a linear pattern (when using a constant frequency). As shown in the phenotypic and metabolomic studies, the change of NS amplitude on the nanoscale (from 30 to 90 nm) can display the alteration of cellular response from low (by N30) to high levels (by N90) of osteogenesis. Thus, nanoscale

amplitude or acceleration is a good parameter to consider for further studies.

### **7.1.2 Mechanisms and pathways**

This study clearly elucidated that NS induces osteogenesis through multiple pathways, not only by a single pathway. It was hypothesised that high amplitude stimulation probably generates multiple stimuli such as stretching on the cell membrane, fluid shearing or heat, which in turn induces osteogenesis through various types of cellular membrane receptors. Simultaneously, high amplitude stimulation also produces low grade inflammation which is important to promote mineralization and recruit precursor cells for enhancing osseointegration and vascularization into scaffolds in the *in vivo* phase. The high amplitude stimulation also produces low level of controllable ROS. However, the overall outcome of NS favors high levels of osteogenesis.

### **7.1.3 Oxidative stress and Inflammation**

In chapter 5, it was shown that NS induces oxidative stress and low-grade inflammation without reducing osteogenesis. However, oxidative stress and inflammation are double-edged swords. Controllable and low-grade ROS enhances diverse intracellular signalling pathways including osteogenic signals (Atashi et al., 2015) while uncontrollable or chronic ROS exposure induces detrimental effects such as cell senescence and DNA damage (Droge, 2002) as well as suppressing osteogenesis but inducing adipogenesis (M. Arai et al., 2007; C. H. Lin et al., 2018); low levels of inflammation enhance osteogenesis (R. L. Huang et al., 2018; Y. Li, Backesjo, Haldosen, & Lindgren, 2008; M. Sun et al., 2017) but chronic or high levels can suppress osteogenesis (Lacey et al., 2009). As NS amplitude is adjustable and stimulating duration is controllable, the effect of long-term exposure and high intensity of NS should be conducted to define an upper limit of stimulation.

To overcome the current strategy of bone defect treatments, such as distraction osteogenesis provides a good treatment outcome but takes a long time and is costly, NS needs to rapidly enhance osteogenesis. Increasing NS amplitude beyond 90 nm aiming to gain quicker and higher osteogenic phenotype expression could be trialed. As shown by

our results, the increase of NS amplitude concomitantly induced greater oxidative stress and inflammation. Thus, pre-treating MSCs with anti-inflammatory (e.g. NSAIDs) or anti-ROS (e.g. N-acetyl cysteine; NAC) drugs may help controlling inflammation and oxidative stress in very high amplitude stimulation (>90 nm). Some evidence showed that NAC may improve osteogenesis (Ji, Liu, Zhao, & Zhang, 2011; Yamada et al., 2013). However, NSAIDs treatment may reduce bone formation (I. Pountos, Georgouli, Calori, & Giannoudis, 2012; Ippokratis Pountos et al., 2011; Yoon et al., 2010), thus pre-treatment inflammation protocols need to be considered with care. Patterning of NS stimulation with resting intervals is another option to balance the oxidative stress products if the study of 3D osteogenesis in the hydrogel with very high amplitude stimulation (>90 nm) is carried out to accelerate osteogenic gene expression. The phenotypic studies of NS stimulation-resting intervals are needed to avoid either overdose stimulation (from long duration of very high intensity NS exposure) resulting cell apoptosis or phenotypic reversibility (from a long time of NS free-interval) ending up with osteogenic induction failure.

#### **7.1.4 Reversibility and gel-sponge composite**

It was shown that the cell-hydrogel-sponge composite (CHSC) concept is possible for osteogenesis and the 2 week-N90 stimulation is adequate for preosteoblast commitment. However, OPN which is important for mineralization and bone remodelling (Lund et al., 2009; P. J. Thurner et al., 2010) was downregulated at week 3 (**Figure 6.15**). Optimistically, the decrease of OPN is possibly compensated by the host-inflammatory response at the surgical site after post scaffold implantation surgery. Considering an induced membrane surgical technique or Masquelet technique (two-step surgery which allows the host to create a self membrane pouch for autograft implantation (Giannoudis et al., 2011)), this membrane secretes transcription factors such as BMP2, TGF $\beta$  and inflammatory cytokines including IL-6 (Toth et al., 2019). OPN plays a role not only in regulating osteoclast function but also affecting inflammatory cells (Florian Kahles, Hannes M. Findeisen, & Dennis Bruemmer, 2014). Further, it is known that IL-6 can upregulate OPN expression, as it is found in macrophages (Uchibori et al., 2017). Thus, in post scaffold-implantation surgery, if the host generates an optimal inflammation (in turn producing optimal level of IL-1 $\beta$  and IL-6), we could extrapolate that OPN (enhanced by the inflammatory niche) may continuously promote the

remodelling process of mineralized scaffold in *in vivo* study (Florian Kahles et al., 2014; Lund et al., 2009; P. J. Thurner et al., 2010).

### 7.1.5 Cell sources and quality

Regarding this thesis, the success of NS induced osteogenesis is strongly related to 'cell quality', and pre-stimulated MSC status affects the stimulation outcome. A high degree of subculturing (more than passage 3) risked poor osteogenic responses. Moreover, cell senescence, over density/overgrowth of cell culture, high passages can change NF $\kappa$ B level (Hellweg, Arenz, Bogner, Schmitz, & Baumstark-Khan, 2006). To minimise this problem, developing cell status screening techniques or protocols (before NS) may improve NS induction outcomes and save costs from failed experiments.

Stem cell seeded scaffolds for large bone defect treatment is challenging as it requires an extremely large number of cells. However, autologous bone graft sources, commonly derived from iliac crest, are inadequate. Other cell types such as iPSCs and ESCs may be alternative options for NS in the future.

### 7.1.6 Future design scaffolds for NS

The concept of the biphasic scaffold is an upcoming trend in bone tissue engineering providing both structural support (via the rigid phase) and biological enhancement (via the hydrogel phase). Our cell-gel-sponge composite is a simple model which can be implemented with various type of scaffolds such as 3D bioprinted scaffolds. However, changing the scaffold form and structure can change the cell response pathways; thus, biological responses analysis needs to be repeated.

Developing bone scaffolds for clinical applications is challenging. They need to provide not only the mechanical support but also the biological advantages. Moreover, they have to contribute to osteogenic and angiogenic inductions. Together with NS, the scaffolds may be supplemented with growth factors such as BMP2 and VEGF for fast driving of osteogenesis and vascular formation. As bone loss often results in open fractures, the wound is regularly exposed to microorganisms (Otchwemah et al., 2015) and is prone to be infected (Guerra, Gregio, Bernardi, & Castro, 2017). Developing scaffolds,

which allow NS to enhance osteogenesis and provide an antibacterial effect, is an ideal target in the future (Nair, Kretlow, Mikos, & Kasper, 2011).

## **7.2 Conclusion**

### **7.2.1 Increased concentration improves hydrogel handleability**

Hydrogel contraction is an obstacle in allowing adequate doses of NS for inducing 3D osteogenesis of MSCs within the NS bioreactor. In chapter 3, three strategies including in-gel scaffolds, collagen concentration optimization and genipin crosslinking were trialed to improving hydrogel properties. In conclusion, the in-gel scaffold was discontinued as it did not prevent contraction and was less feasible for potential clinical application. Genipin was also discounted as its cytotoxicity was an unwanted side effect though it could improve hydrogel stiffness. Increasing collagen concentration from 0.8 mg/ml to 1.8 mg/ml was seen to delay hydrogel contraction. This simple approach allows a straight forward strategy.

### **7.2.2 High amplitude nanovibrational stimulation enhances osteogenesis through multiple pathways**

High amplitude stimulation (N90) showed better osteogenic induction than the standard amplitude used in the group (N30). High amplitude stimulation increased osteogenic gene and protein expression at day 9 and did not effect MSC viability. From a temporal gene study, N90 induced osteogenic gene expression corresponding to a normal osteogenic pattern. N90 significantly induced TRPV1, piezo2, ion channels and ERK1 which corresponded well to Tsimbouri et al (Tsimbouri P.M., 2017) showing that N30 stimulates TRPV1-PKC- $\beta$ -catenin to induce bone differentiation in MSCs (Tsimbouri P.M., 2017). N90 stimulation tended to involve the BMP2-SMAD1/5 and ROCK pathways in 3D culture suggesting that high stimulating amplitude

possibly activated more osteogenic pathways through BMP2 and cytoskeletal tension regulations.

### **7.2.3 NS enhanced osteogenesis and produced controllable oxidative stress and inflammation**

The metabolomic study showed that N90 stimulation involved lipid metabolism and produced low levels of oxidative stress which is well regulated through redox balancing and counterregulatory responses such as superoxide dismutase enzyme (a ROS reducing enzyme), NF $\kappa$ B and Akt (anti-apoptosis mechanisms). The evidence of inflammatory responses (such as IL-6, TNF $\alpha$ ) was found during N90 NS. Through protein inhibition tests, it was shown that MAPK (JNK, p38) and NF $\kappa$ B positively correlated to RUNX2 and OSX gene expressions. It was hypothesised that N90 enhanced osteogenesis through JNK and p38 MAPK activation. NF $\kappa$ B was produced to control oxidative stress and inflammation. In conclusion, N90 enhances osteogenesis through multiple pathways with low levels of ROS and inflammation.

### **7.2.4 Cell-hydrogel-sponge composite potential for clinical use**

From our study, we proposed the CHSC to use with the NS bioreactor. CHSCs are reproducible and handlable in the clinic. CHSCs allowed NS force transmission and produced reliable stimulating amplitudes. Contracted CHSCs did not adversely effect MSC viability. Temporal gene studies showed that NS promoted osteogenesis corresponding to the normal osteogenic pattern. It was found that 2 week-NS in CHSCs possibly maintained osteogenic phenotype. The results can be used to develop the NS protocol for osteogenic induction without phenotypic reversibility and could be useful in *in vivo* studies and clinics in the future.

## **Appendix I**

## Appendix I

### Protein antibody microarray

Processed by Dr Marc Antoni Fernandez-Yague, Centre for Research in Medical devices, National University of Ireland, Galway.

Protein samples were labeled with Alexa Fluor 555 carboxylic acid succinimidyl ester (Life Technologies, CA, USA). Excess label was removed and buffer was exchanged with PBS, pH 7.4, by centrifugation through 3 kDa molecular weight cutoff filters. Absorbance at 555 and 280 nm was measured for labeled samples and calculations were performed according to the manufacturer's instructions using an arbitrary extinction coefficient of 100 000 and molecular mass of 100 000 to enable quantification of relative protein concentration and label substitution efficiency. All commercial antibodies (Table AI.1) were buffer exchanged into PBS and quantified by bicinchoninic acid (BCA) assay. Antibodies were diluted to print concentration in PBS and printed in six replicates on Nexterion H amine reactive, hydrogel coated glass slides (Schott AG, Mainz, Germany) using a SciFLEXARRAYER S3 piezoelectric printer (Scienion, Berlin, Germany) under constant humidity (62%  $\pm$  2%) at 20 °C. Each feature was printed using  $\approx$ 1 nL of diluted antibody using an uncoated 90  $\mu$ m glass nozzle with eight replicated subarrays per microarray slide. After printing, slides were incubated in a humidity chamber overnight at room temperature to facilitate complete conjugation. The slides were then blocked in 100  $\times$  10<sup>-3</sup> m ethanolamine in 50  $\times$  10<sup>-3</sup> m sodium borate, pH 8.0, for 1 h at room temperature. Slides were washed in PBS with 0.05% Tween 20 (PBS-T) three times for 2 minutes each wash followed by one wash in PBS, dried by centrifugation (470  $\times$  g, 5 min), and then stored with desiccant at 4 °C until use. Incubations were carried out in the dark. Microarray slides were incubated essentially as previously described. Initially, one labeled sample was titrated (2.5-15  $\mu$ g mL<sup>-1</sup>) for optimal signal to noise ratio and all samples were subsequently incubated for 1 h at 23 °C at 9  $\mu$ g mL<sup>-1</sup> in Tris-buffered saline (TBS; 20  $\times$  10<sup>-3</sup> m Tris-HCl, 100  $\times$  10<sup>-3</sup> m NaCl, 1  $\times$  10<sup>-3</sup> m CaCl<sub>2</sub>, 1  $\times$  10<sup>-3</sup> m MgCl<sub>2</sub>, pH 7.2) with 0.05% Tween 20 (TBS-T). All microarray experiments were carried out using three replicate slides. Alexa Fluor 555 labeled mesenchymal stem cells lysate (10  $\mu$ g mL<sup>-1</sup>) were incubated in two separate subarrays on every slide to confirm retained antibody performance and printing,

respectively. After incubation, slides were washed three times in TBS-T for 2 minutes per wash, once in TBS and then centrifuged dry as above. Dried slides were scanned immediately on an Agilent G2505 microarray scanner using the Cy3 channel (532 nm excitation, 90% photomultiplier tubes (PMT), 5  $\mu$ m resolution) and the intensity data were saved as a .tif file. Antibody microarrays were verified to remain active for at least 2 weeks after printing, and all incubations were carried out within that timeframe. Data extraction from .tif files was performed essentially as previously described. Data were normalized to the mean of three replicate microarray slides (subarray-by-subarray using subarray total intensity, n = 3, 18 data points).

**Table AI. 1 List of commercial antibodies used in the protein antibody microarray**

Probe	Concentration (mg/mL)	Information	Company	Stock conc (mg/mL)	Cat. no.	Lot	Species
Integrin B1	1	Integrin B1 [EPR1040Y] 100µl (0.157 mg/ml)	Abcam®	3.54	ab134179	GR97005-9	Rabbit
Integrin B3	0.1	Integrin B3 [crc54]	Abcam®	0.17	ab34409	GR31565-1	Rabbit
Integrin B5	<0.002	Integrin B5	Cell signalling®	<0.002	D24A5	3629S	Rabbit
BMPR1A	1	BMPR1A 800 µg	ThermoFisher®	12.71	PA5-11856	SH30123J	
Collagen I	1	Collagen I [EPR7785] 100 µl (0.875 mg/ml)	Abcam®	1.72	ab138492	GR247379-29	Rabbit
Collagen II	0.25	Collagen II [2B1.5] 250 µl (0.2 mg/ml)	Abcam®	2.29	ab185430	GR322394-1	Mouse
Collagen III	0.5	Collagen III 100 µg (1mg/ml)	Abcam®	1.03	ab7778	GR312095-3	Rabbit
Collagen V	1	Collagen V 100 µg (1mg/ml)	Abcam®	1.86	ab7046	GR255156-3	Rabbit
KCNK2	1	TREK-1 Antibody (C-20)	SantaCruz®	4.84	sc-11557		
KCNK4	0.02	KCNK4 100 µl (0.5mg/ml)	Abcam®	0.02	ab81367	GR193770-5	Rabbit
TRPA1	0.5	ANKTM1 (C-19)	SantaCruz®	5.45	sc-32353	-	Goat
TRPV1	1	VR1 (H-150)	SantaCruz®	6.06	sc-20813	-	Rabbit
PIEZO1	1	PIEZO1 Antibody (N-15)	SantaCruz®	3.13	sc-164319	-	Goat
PIEZO2	1	PIEZO2 Antibody (G-20)	SantaCruz®	2.99	sc-84763	-	Goat
L-type Ca <sup>2+</sup>	0.5	Anticorps L-type Ca <sup>2+</sup> CP α1C (H-280)	SantaCruz®	4.98	sc-25686	-	Rabbit
β-actin	1, 0.25, 0.5, 0.75, 2	IBA1	WAKO®	2.56	019-19741	-	Rabbit

## **Appendix II**

## Appendix II

### Metabolomic profile assessment

Metabolite selection of glycolysis, PPP, TCA cycle, OXPHOS, L-, L-aromatic amino acid, LC-PUFAs and  $\beta$ -oxidation was performed. These metabolites were carried out using IDEOM. Metabolite intensities were then relatively compared as fold change. Statistical change and P-value were calculated using Graphpad software. The summarized data is shown in **Table All.1**.

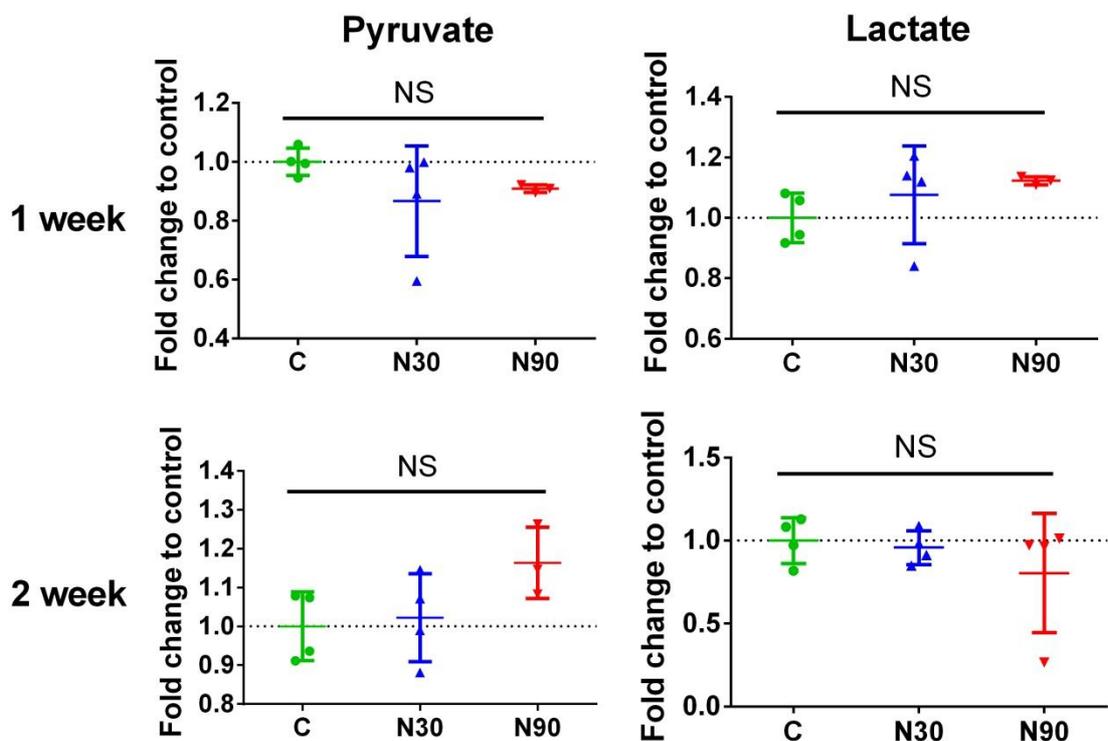
**Table AII. 1 Metabolite profile analysis at 1 and 2 weeks of NS**

Pathways	week	Metabolites	Metabolite change	Interpretation	Figure
Glycolysis	1	Pyruvate	(NS)	-	A1
	2	Pyruvate	(T)↑ N90	NS may increase energy consumption	A1
	1	Lactate	(T)↑ N30, N90	NS may increase energy consumption	A1
	2	Lactate	(NS)	-	A1
Pentose Phosphate Pathway (PPP)	1	D-gluconic acid	(T)↑ N90	NS may involve PPP	A2
	2	D-gluconic acid	(NS)	-	A2
	1	D-ribose	(NS)	-	A2
	2	D-ribose	(T)↑ N30, N90	NS may involve PPP	A2
TCA cycle	1	Citrate	(T)↑ N90	NS effect	A4
	1	Isocitrate	(T)↑ N90	NS effect	A4
	1	Succinate	(NS)	-	A4
	1	S-malate	(T)↑ N90	NS effect	A4
	2	Succinate	(NS)	-	A4
OXPHOS	1	Sn-Glycerol-3-phosphate	(T)↑ N30, N90	NS effect	A5
	2	Sn-Glycerol-3-phosphate	(T)↑ N90	NS effect	A5
	1	Orthophosphate	(T)↑ N90	NS effect	A5
L-, L-aromatic amino acid	1	L-alanine	(T)↑ N90	NS effect	A6
	1,2	L-phenylalanine	(NS)	-	A6
	1,2	L-tryptophan	(NS)	-	A6
LCPU-FAs	1	Eicosapentaenoic acid	(T)↑ N30, N90	NS effect	A8
	1	Docosapentaenoic acid	(T)↑ N90	NS effect	A8
	1	Docosahexaenoic acid	(T)↑ N90	NS effect	A8
	2	Eicosapentaenoic acid	(T)↑ N90	NS effect	A8
β-oxidation	1	Hexanoic acid	(T)↑ N90	NS effect	A9
	1	4-8 dimethylnonanoylcarnitine	(T)↑ N90	NS effect	A9
	1	O-propanoylcarnitine	(NS)	-	A9
	2	Hexanoic acid	(NS)	-	A9
	2	4-8 dimethylnonanoylcarnitine	(T)↑ N90	NS effect	A9
	2	O-propanoylcarnitine	(NS)	-	A9

↓ decrease; ↑ increase; (S) Statistic significance, (T) Trend, LC-PUFAs= long-chain polyunsaturated fatty acid, NS= nanovibrational stimulation, OXPHOS=oxidative phosphorylation, PPP; Pentose phosphate pathway

## Carbohydrate metabolism at 1 and 2 week.

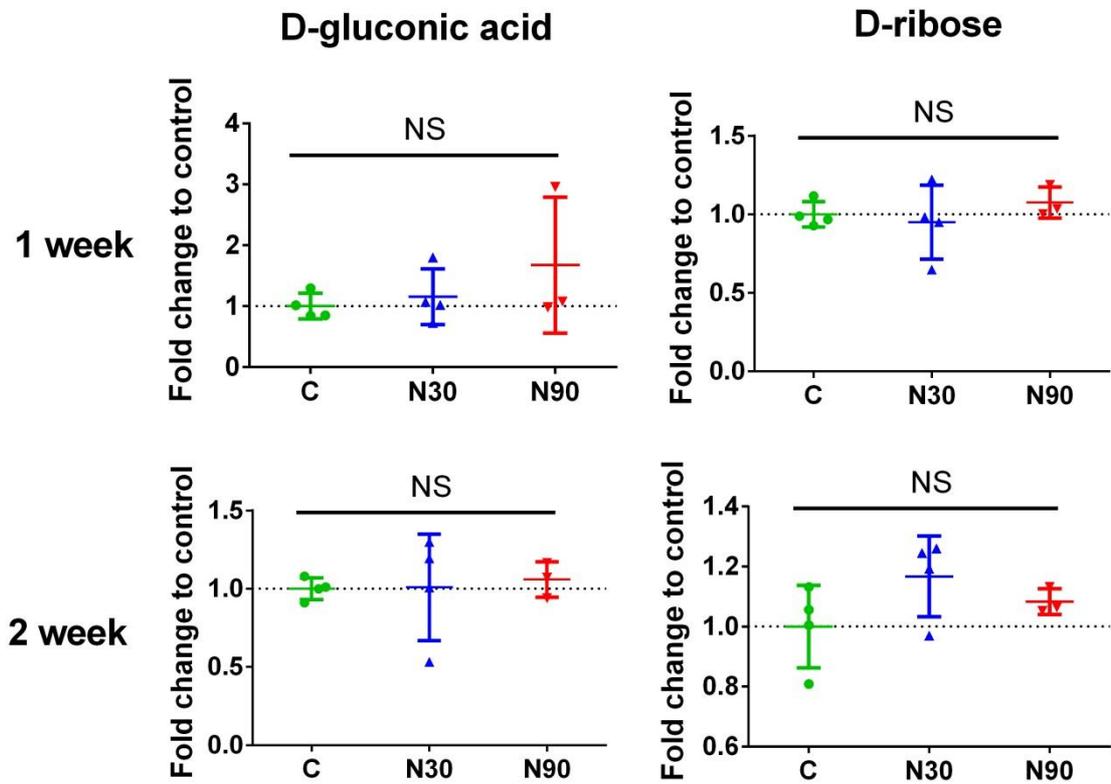
To study effect of NS on carbohydrate metabolism, metabolites involving the glycolysis pathway and TCA cycle were focused. It was found that there were no significant differences in the TCA cycle and glycolysis metabolites of NS group compared to control. Interestingly, lactate tended to increase in N90 at week 1 but reduced at week 2. Pyruvate tended to increase at week 2. This result indicated that MSCs still used glycolysis in N90 (**Figure All.1**). Increase trend of ribose and gluconic acid indicated that PPP was involved (**Figure All.2-3**). N90 also involved TCA cycle (by increasing trend of citrate, isocitrate and malate in N90) (**Figure All.4**).



**Figure All. 1 Glycolysis and glucose metabolism**

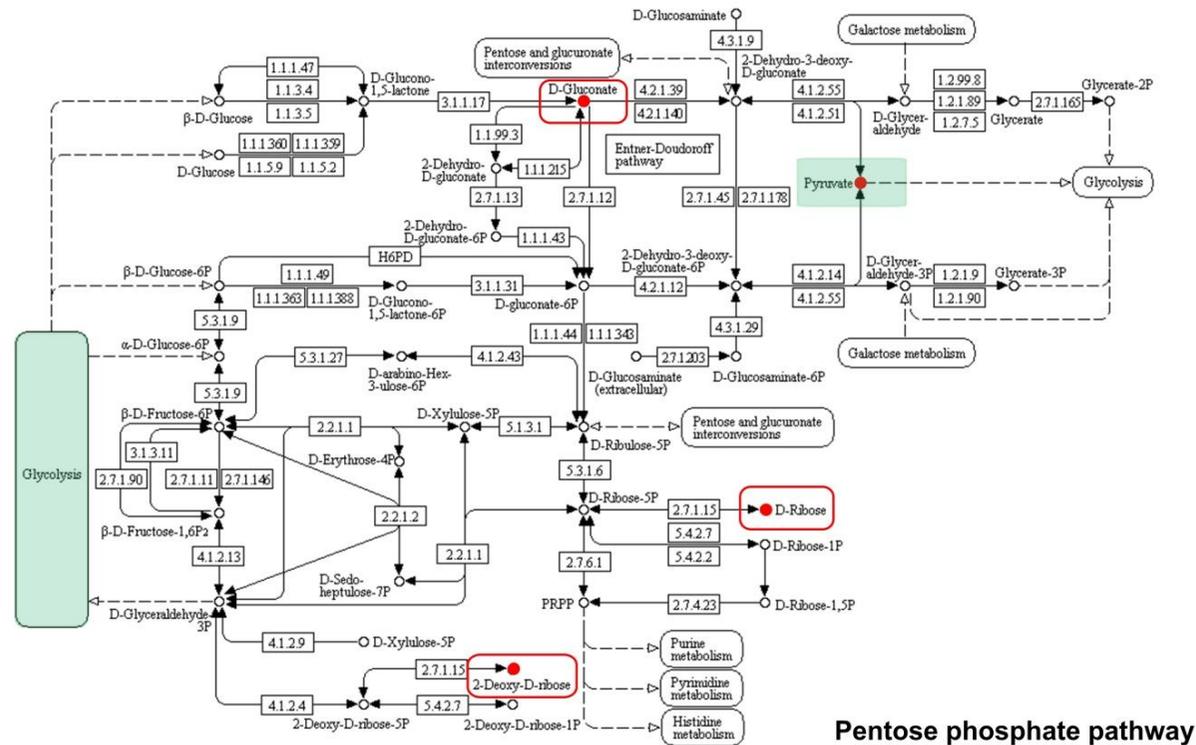
In N90 group, pyruvate tended to increase at week 2 while lactate increased at week 1. The results indicated that MSCs

still produced energy via glycolysis (mean $\pm$ SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).



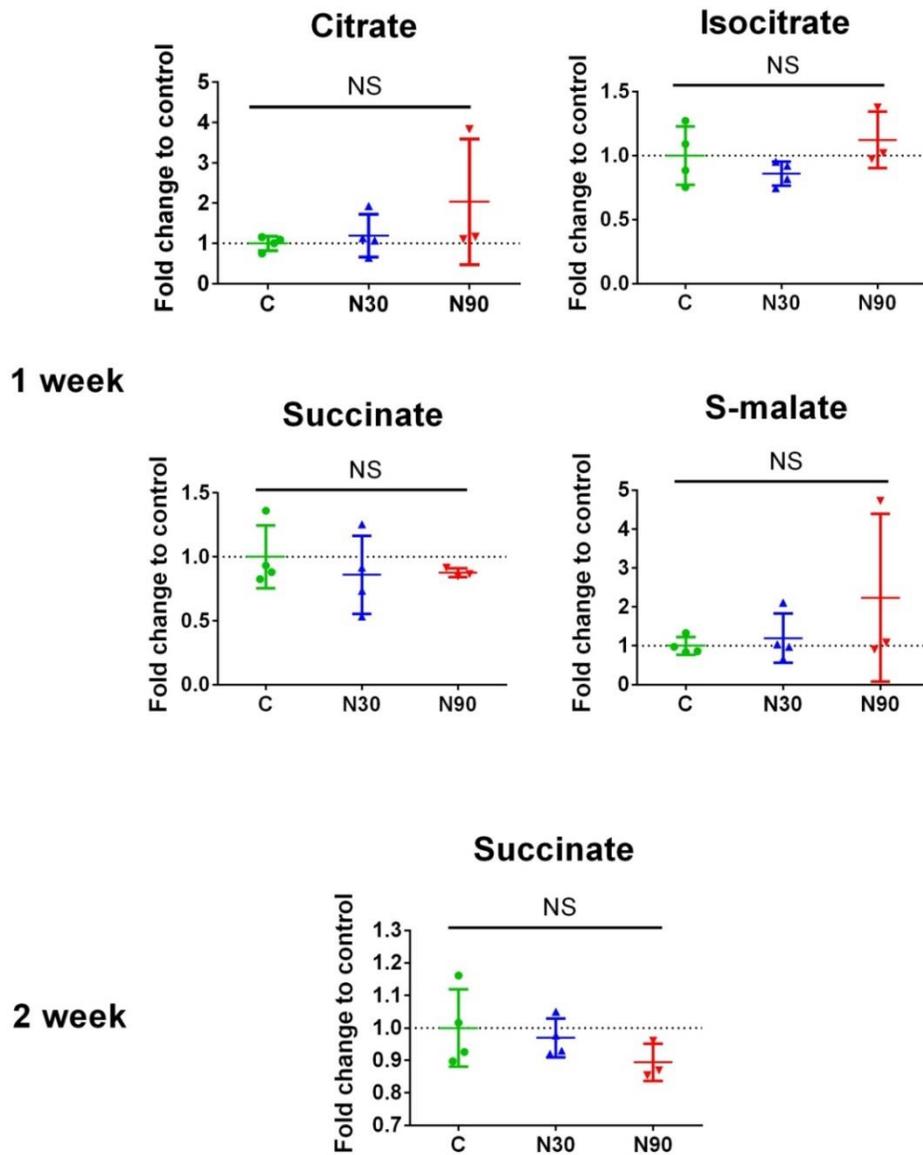
**Figure All. 2 Pentose phosphate pathway**

D-gluconic acid and D-ribose were increased in N90 at week 1 and 2. The result may implied that PPP was involved in redox balancing during oxidative stress (mean $\pm$ SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).



**Figure All. 3 Pentose phosphate pathway KEGG pathway**

KEGG pathway shown shifting of glycolysis to pentose phosphate pathway (PPP). D-ribose and D-gluconate, which are PPP metabolites were identified in the map (n=4).

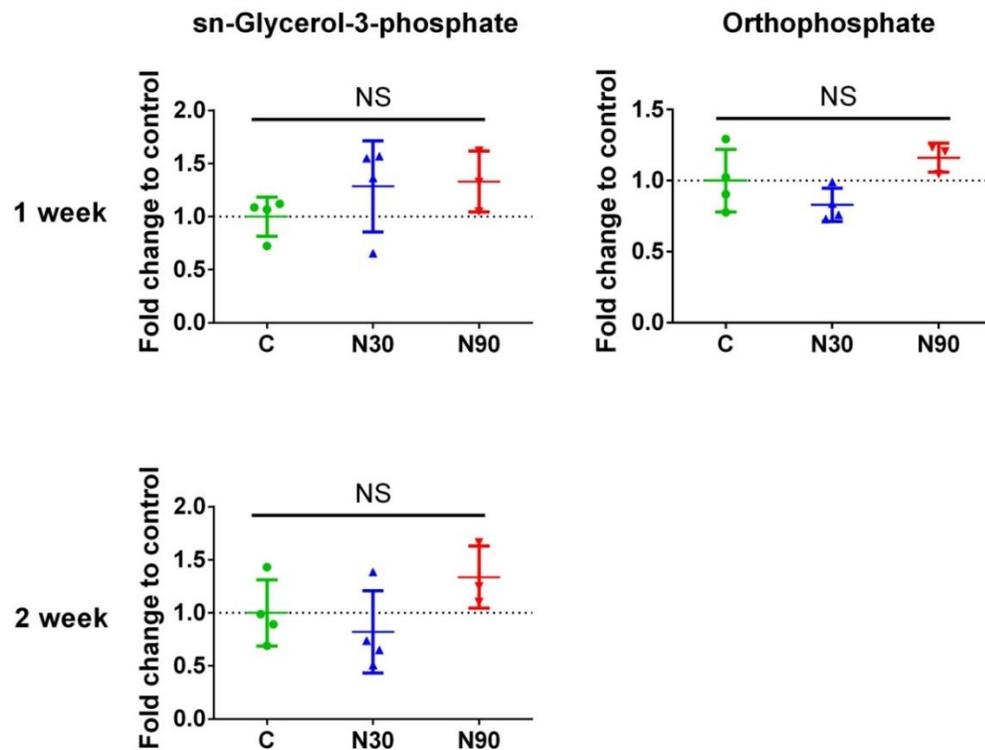


**Figure AII. 4 TCA cycle metabolites.**

N90 tend to increase citrate, isocitrate and malate indicating that N90 involved in TCA cycle generating ATP. The increase of isocitrate may protect cells from oxidative stress (J. Yang et al., 2017) (mean $\pm$ SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

## **Oxidative phosphorylation and nanovibrational stimulation**

It has been known that oxidative phosphorylation (OXPHOS) is important for stem cell differentiation (Atashi et al., 2015; Q. Q. Li et al., 2017). OXPHOS produces reactive oxygen species (ROS) which can damage cells and affect cell aging. However, the optimal level of ROS promotes osteogenesis (Shyh-Chang et al., 2013). From our results, nanovibrational stimulation showed slightly increase of glycerol-3-phosphate shuttle at 1 week (**Figure All.5**) representing that nanovibration required rapid energy bypassing the complete OXPHOS process. Glycerol-3-phosphate shuttle is the junction linking the oxidative phosphorylation, glycolysis and fatty acid metabolism together (Mracek et al., 2013). Furthermore, the increase of orthophosphate level in N90 group was found. This represented that MSCs required higher energy during the stimulation. Orthophosphate is the metabolite involving in OXPHOS for ATP synthesis at complex V in mitochondria (Huttemann et al., 2007) (**Figure All.5**).

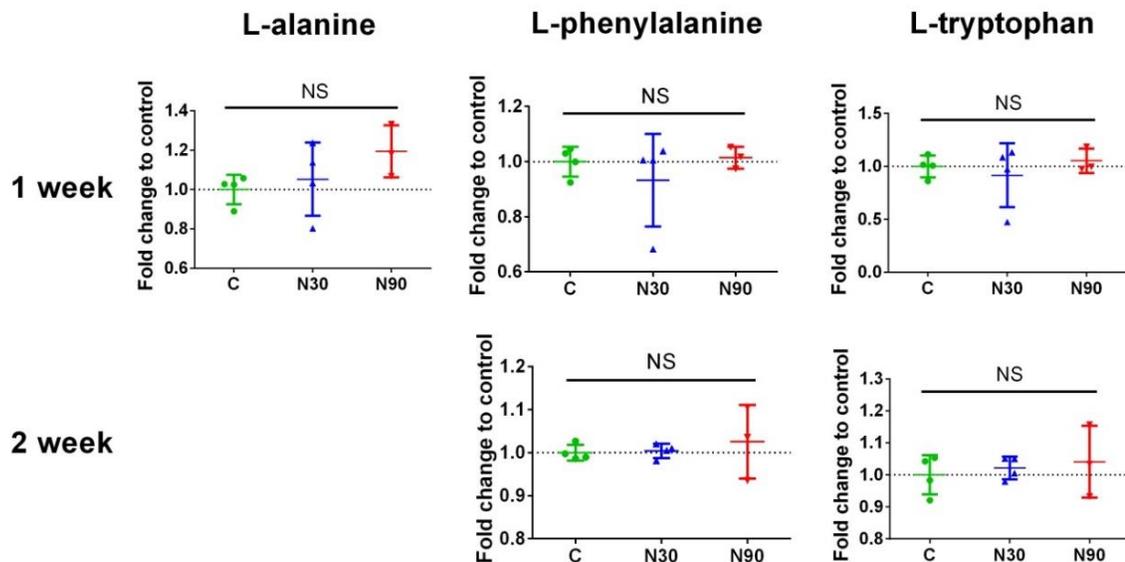


**Figure All. 5 Oxidative phosphorylation metabolites.**

At 1 week stimulation, (A) sn-Glycerol-3-phosphate, which is a metabolite involving in glycerol-3-phosphate shuttle, slightly increased in N30 and N90 group. Glycerol-3-phosphate shuttle was activated requiring rapid energy production (bypass complex I of electron transport chain). (B) Orthophosphate level, involving complex V of OXPPOS, showed an increase trend in N90 group. It was hypothesized that nanovibrational stimulation increased lipid catabolism siphoning pathway through Glycerol-3-phosphate shuttle and in turn activated OXPPOS (Mracek et al., 2013; Nsiah-Sefaa & McKenzie, 2016) (mean±SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

## Amino acid metabolism: Roles of L-type, L-aromatic amino acid and calcium sensing receptor at 1 and 2 weeks.

To further explore the effect of nanovibrational stimulation, L-type and L-aromatic amino acids which might be linked to osteogenic differentiation through Calcium sensing receptor (CaSR) (Conigrave et al., 2007) were studied. CaSR is a G-protein coupled receptor class III which responds to extracellular amino acid change (Conigrave & Hampson, 2006). Therefore, if L- or L-aromatic amino acid increases, CaSR in turn is possibly upregulated. However, it was found that only L-alanine (Figure All.6) showed the increase trend after N90 which corresponded to CaSR gene upregulation showing in chapter 4 (Figure 4.17).

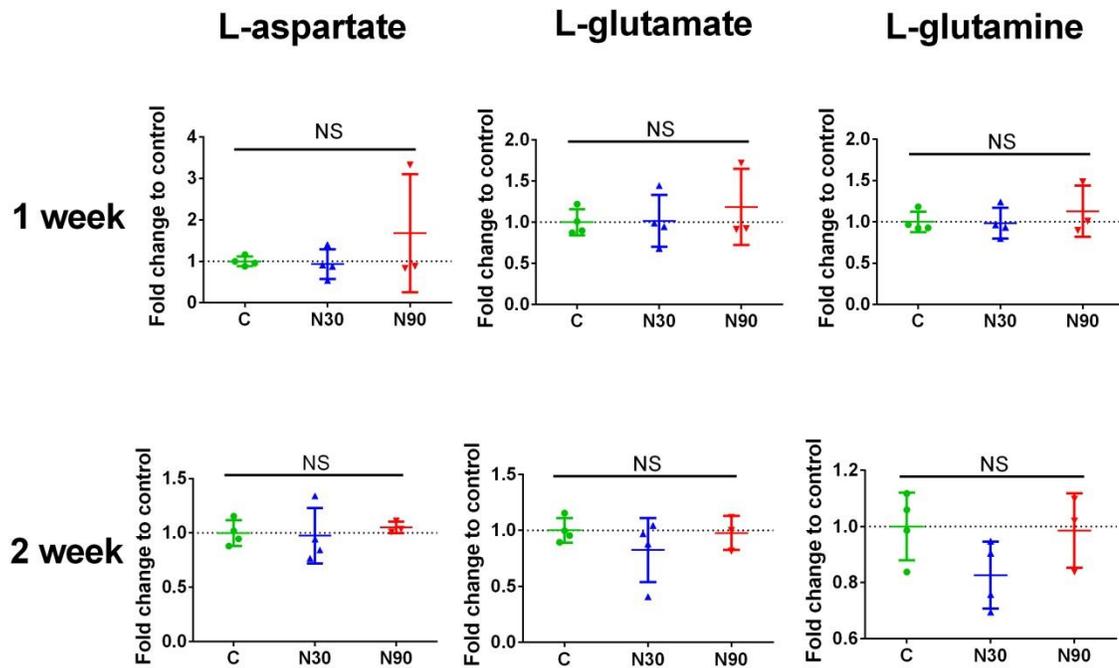


**Figure All. 6 L- and L-aromatic amino acid.**

L- and L-aromatic amino acid associating to CaSR. Only, L-alanine showed the significant upregulation after N90 for 1 week (A) (mean $\pm$ SD, n=4, \*  $P \leq 0.05$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

## Glutamine and aspartate

Glutamine and aspartate also play a role in reducing oxidative stress (J. Duan et al., 2016; Mates et al., 2002). The increase trend of glutamine and aspartate were noted in N90 group at 1 week (**Figure All.7**).



**Figure All. 7 Glutamine and aspartate**

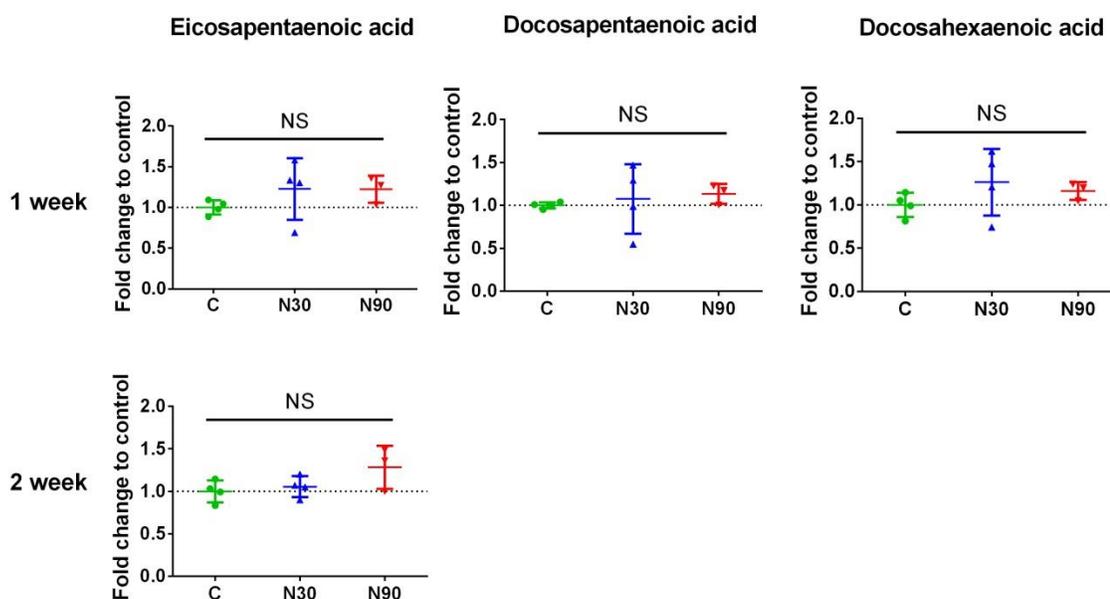
The increase of glutamine and aspartate indicates that MSCs possibly produce these metabolites protecting cells from oxidative stress (mean $\pm$ SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

## Lipid metabolism: Long-chain polyunsaturated fatty acids and nanovibrational stimulation at 1 and 2 weeks.

Many literatures support the effect of long-chain polyunsaturated fatty acid (LCPU-FAs) metabolism on osteoblast proliferation and differentiation (Burke & Weiler, 2002; Damsgaard, Molgaard, Matthiessen, Gyldenlove, & Lauritzen, 2012; Jeromson et al., 2015; Kruger et al., 2010; Watkins, Li, Lippman, & Feng, 2003). Therefore, LCPU-FAs metabolites including eicosapentaenoic acid (EPA),

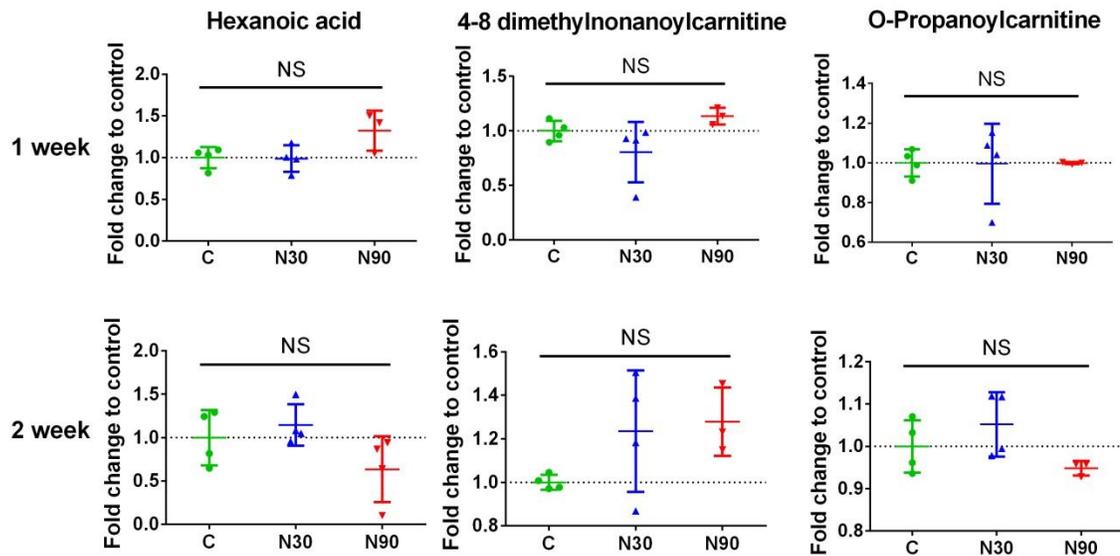
docosapentaenoic acid (DPA) and docohexanoic acid (DHA) were studied at 1 and 2 weeks. The slightly increase of LCPU-FAs was found in N30 and N90 groups at 1 and 2 weeks (**Figure All.8**).

To link the effect of NS with cellular energy consumption through lipid metabolism, lipid metabolites relating to  $\beta$ -oxidation were therefore considered. It was found that NS increased hexanoic acid and 4-8 dimethylnonanoyl carnitine while there was no change of O-propanoylcarnitine (or Propionyl L-carnitine) levels (**Figure All.9**).



**Figure All. 8 Long chain poly unsaturated fatty acids**

Metabolites of LCPU-FAs were studied. Increasing trend of PUFAs synthesis was found in both N30 and N90 stimulations (mean $\pm$ SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).



**Figure All. 9  $\beta$ -oxidation of lipids**

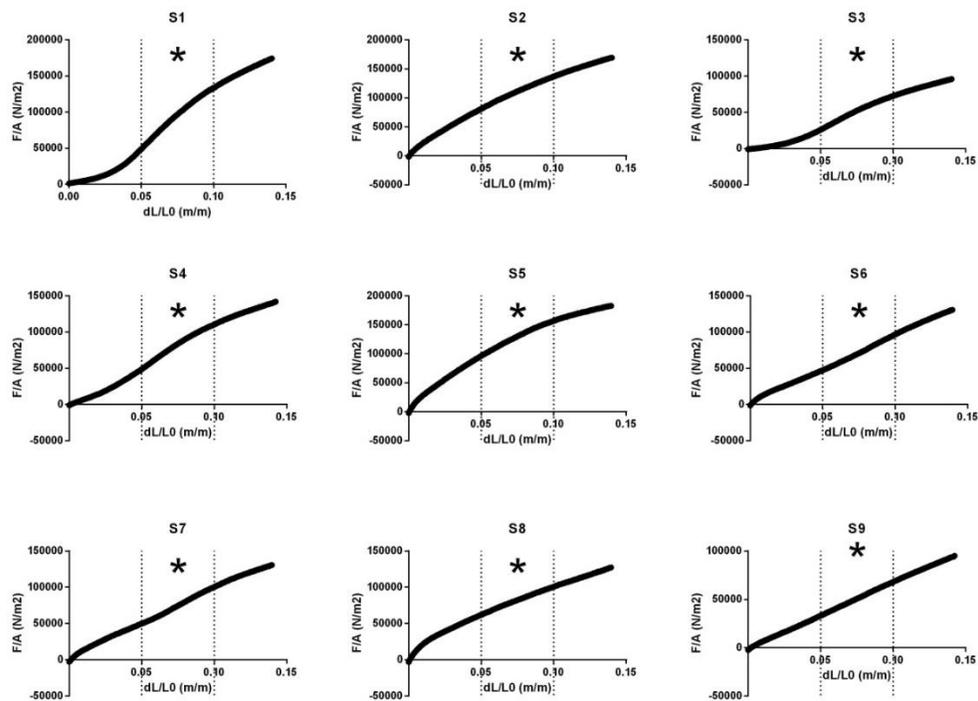
NS increased hexanoic acid and dimethylnonanoylcarnitine levels. This evidence possibly implied that cells required more ATPs via fatty acid oxidation responded to NS. No change of O-propanoylcarnitine was found (mean $\pm$ SD, n=4, \*  $P \leq 0.5$ , \*\*  $P \leq 0.01$ , \*\*\*  $P \leq 0.001$ , one-way ANOVA, Tukey's post hoc test).

## **Appendix III**

## Appendix III

### Compression test

After 5% collagen sponges were prepared (n=9), compression tests were then performed. Stress-strain graph were plotted to identify the elastic range of sponges. The slopes of the selected linear range (0.05-0.1 of strain) were calculated representing Young's modulus (material stiffness, mPA) (Figure AIII.1, Table AIII.1).



**Figure AIII. 1 Stress-strain plot of compression test**

Graph plotted between force (N) and changing (delta) length (mm) of compression test study. Linear relationship of the stress-strain graphs was identified which indicated the elastic range of collagen sponge. The range of altered length from 0.05- 0.1 of strain ( $\Delta L/L_0$ ) were chosen for Young's modulus calculation (asterix; selected range for Young's modulus calculation).

**Table AIII. 1 Young modulus (MPa) of each sample**

Samples	Young modulus (Elastic modulus, MPa)
S1	1.705
S2	1.105
S3	0.893293
S4	1.251
S5	1.22
S6	1.001
S7	1.051
S8	0.769168
S9	0.704246
Ave	1.077745222
SD	0.299957153

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