

# Tissue Engineering: Role of Biomechanics

- Many tissues and organs to be replaced have critical biomechanical functions
- "Tissue Engineering" was first coined by Y.C. Fung in 1987 for determining the biomechanical responses of cells and tissues in order to learn how to replace them

### Contemporary issues in Biomechanics

Genomic structure

Genomic biomechanics

Genomic function

Molecular structure

Molecular biomechanics

Molecular function

Cell structure

Cell biomechanics

Cell behavior

Tissue structure

Tissue biomechanics

Tissue function

Organ structure

Organ biomechanics

Organ physiology

Human movement

Human performance

Biomechanics is the middle name between structure and function

# Functional Tissue Engineering\*

- What are thresholds of force, stress, and strain that the normal tissue must withstand during normal operation?
- What are their mechanical properties, during both normal and failure conditions?
- Which properties should be incorporated into TE designs?

<sup>\*</sup>Butler et al., JBME, 2000

# Functional Tissue Engineering

- When developing implants in culture, how to mechanical factors regulate cell behavior as compared to those experienced in-vivo?
- Do we have too <u>exactly</u> reproduce every feature of the native tissue to get acceptable levels of physiological function restoration?
- When evaluating TE repairs, how good is good enough?

# Functional Tissue Engineering

- 1. In-vivo stress/strain histories need to be measured in normal tissues over the physiological range
- Mechanical properties of the native tissues must be established for sub-failure and failure
- 3. A subset these mechanical properties must be selected and prioritized
- 4. Standards must be set when evaluating the repairs/replacements after surgery so as to determine "how good is good enough"

# Primary considerations

#### In-vitro phase

- Enhancement of protein synthesis
- tissue formation and strength
- Strategic use of and mechanical/biochemical stimulation

#### Assessment of In-vivo function

- Invasive measures (explant)
- Non-invasive (primarily image based)

## Major scaffold types

- Biologically derived
  - SIS, UBM
  - Decellurized tissues (e.g. aortic valve)
  - Collagen, fibrin, and GAG gels
  - Electrospun biopolymers (collagen)
- Synthetic
  - Wovens and fabrics
  - Gels and foams
  - Non-wovens made from PGA, PLLA
  - Electrospun biodegradable polymers

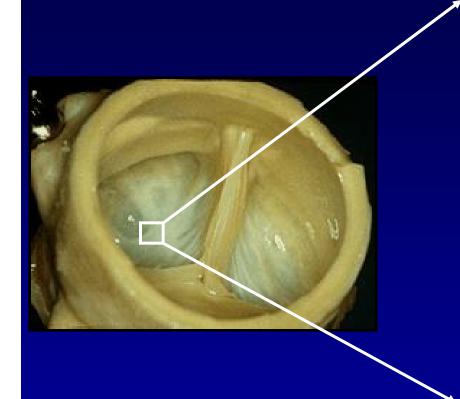
# Mechanical Behavior Driven by physiological functional requirements

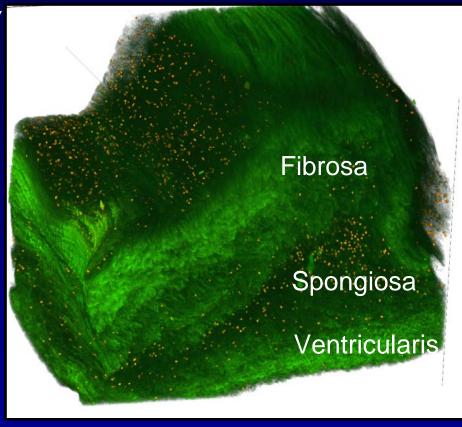
- a. Stress-strain response non-linearity, rapid transition of stiffness
- b.Time-dependence
  - i. viscoelasticity
  - ii.poroelasticity
- c. Anisotropy
  - i. Appropriate knowledge of mechanical properties
- d.Dimensionality
  - i. Uniaxial (tendon)
  - ii. Planar biaxial (valve leaflet)
  - iii.Full 3D (myocardium, cartilage) No approach available

# Mechanical Behavior Driven by physiological functional requirements

- 1. Major modes
  - a.Tension
  - b.Compression
  - c.Flexural
- 2. Meso/macro scale vs. local properties
  - a.Local
    - i. AFM, nano-indentation.
  - b.Larger scales
    - i. More relevant for physiological function
- 3. Need to link measures a various scales to make sense of cell and physiological behaviors

# Leaflet tri-layered structure





Collagen
GAGs
Collagen, Elastin

Water & Fibroblasts

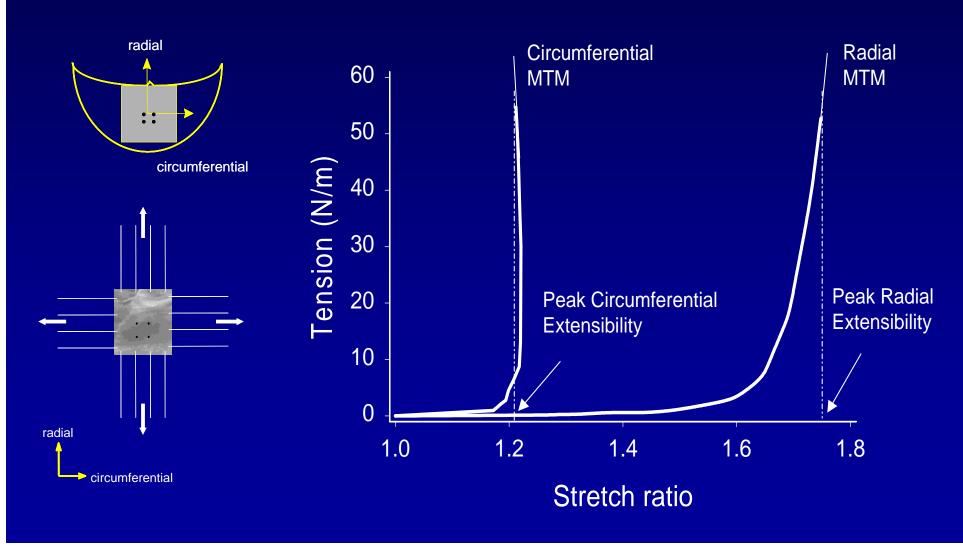
Fibrosa ~45%

Spongiosa ~35%

Ventricularis ~20%

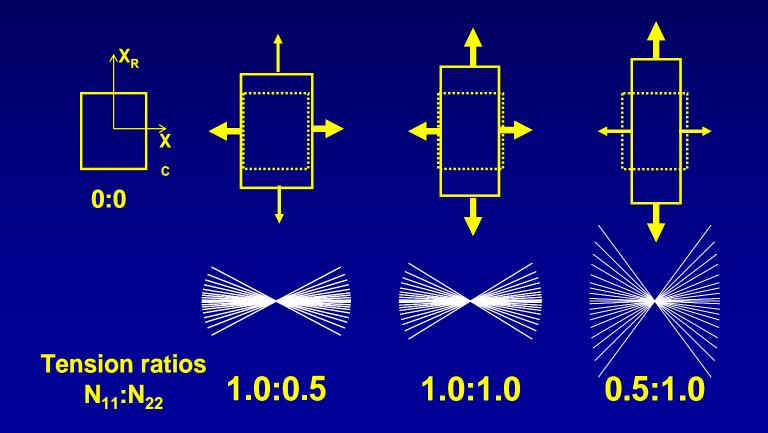
Total thickness ~300-700µm

# Planar biaxial mechanical properties of the aortic valve leaflet There is more to life than Young's modulus



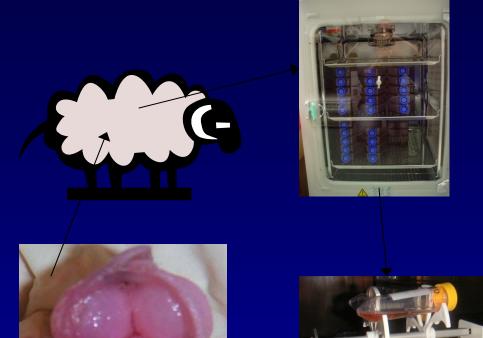
#### Structural basis for mechanical behavior

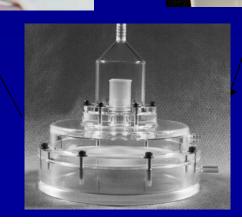
Anisotropy and due to fiber rotations, not stretch



### Tissue Engineered Heart Valves (TEHV)

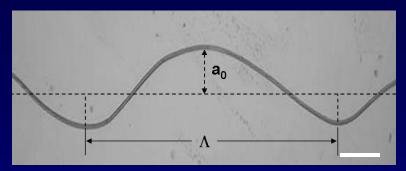
- Living autologous cells + bioresorbable scaffolds
- Potentially have a capacity for growth, self-repair, & resistance to infection
- Presents opportunity to answer some fundamental bioengineering questions:
  - How do the scaffold and tissue interact to give rise to overall mechanical properties?
  - How do individual modes of mechanical loading affect tissue development?



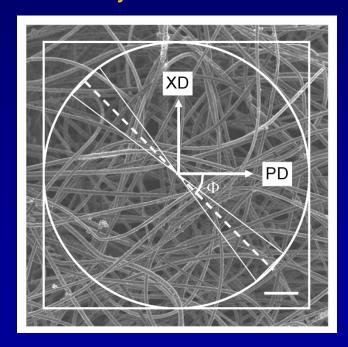


#### Hierarchal Structure of Nonwoven Scaffolds

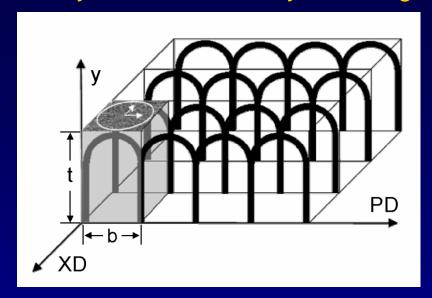
Primary: Fiber Crimp



Secondary: Fiber Orientation



Tertiary: Discretization by Needling



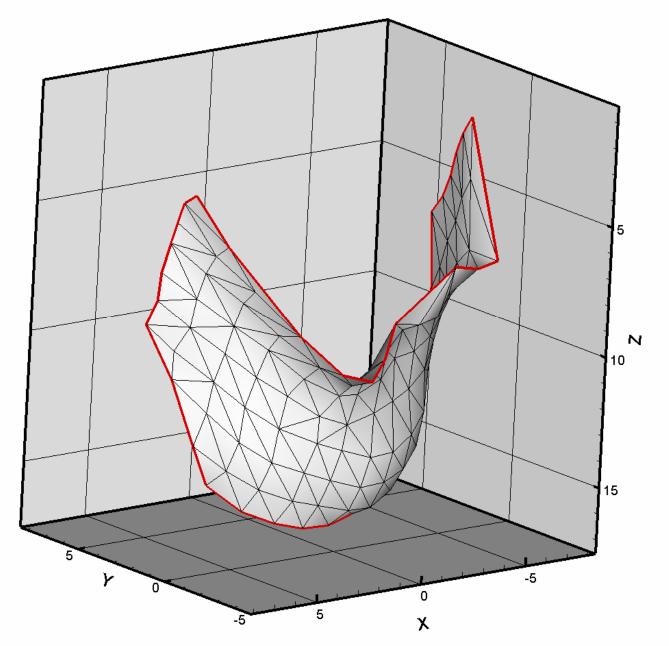
Freed L.E., et al, Bio/technology 1994;12:689-693. Engelmayr, G.C. and Sacks, M.S., J Biomech Eng, 2006

# Rational for Cyclic Flexure Bioreactor

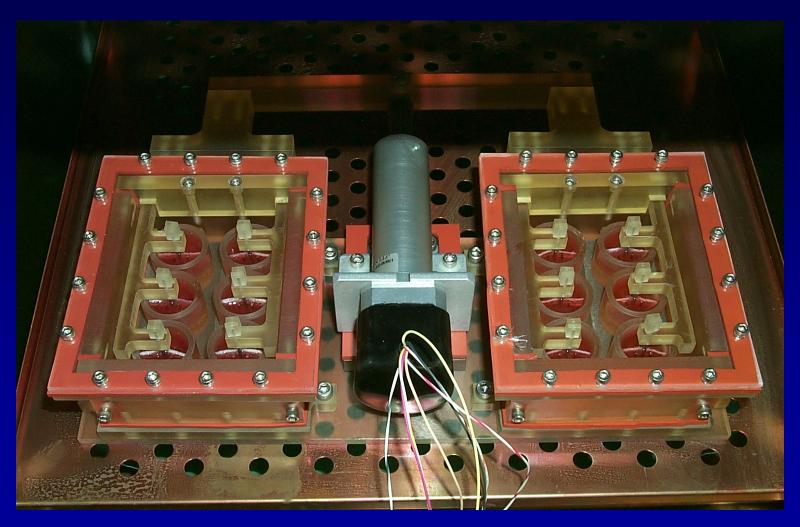
- Pulse duplicator / Flow loop bioreactor
  - Used to grow a TEHV for implantation
  - Anatomical geometry
  - Coupled mechanical stimuli
- Decompose complex mechanical environment into simple, independent modes of deformation:
  - Cyclic Flexure
  - Shear Stress
  - Tension
  - Pressure
- Why cyclic flexure?
  - Non-woven scaffolds are not elastomeric
  - Flexure is a mode of deformation innate to heart valves

# Aortic valve leaflet dynamic motion

Frame 001 | 24 Mar 2003 | 0\_crv.pit | 200\_crv.pit | 250\_crv.pit | 300\_crv.pit | 310\_crv.pit | 320\_crv.pit | 330\_crv.pit | 340



# Cyclic Flexure Bioreactor

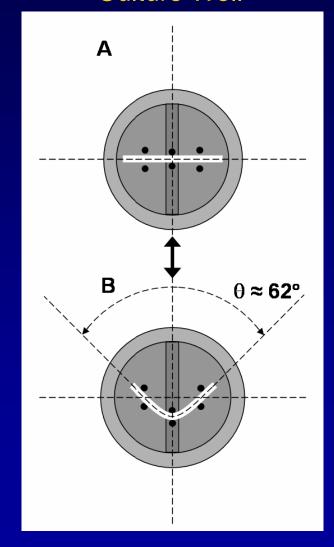


Engelmayr et al., Biomaterials, 2003, 24(14):2523-32

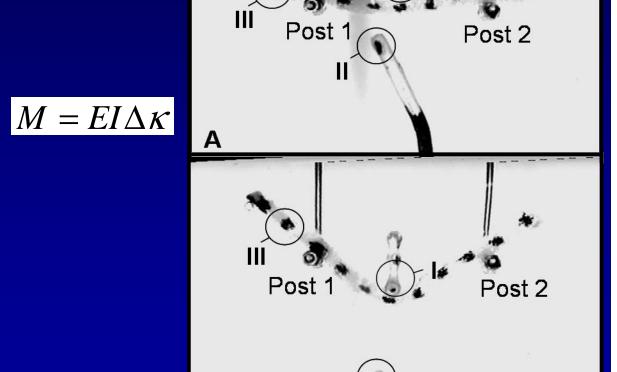
Engelmayr et al., Biomaterials, 2005, 26(2):175-87

# Physiologically Relevant Flexural Testing

# Cyclic Flexure Bioreactor Culture Well

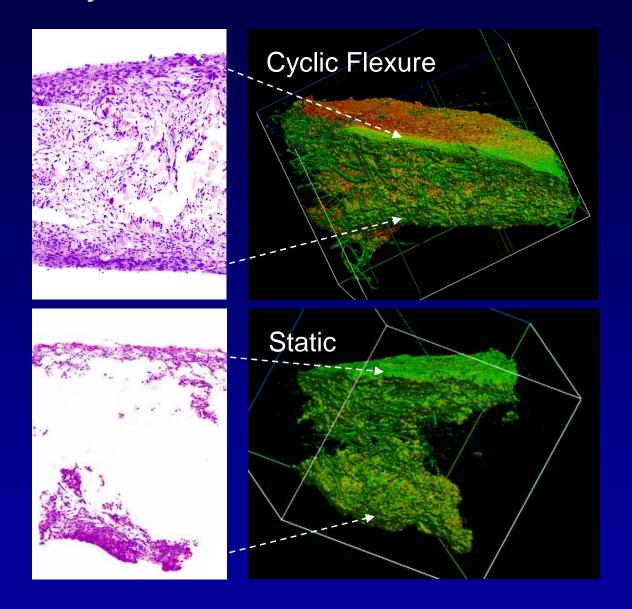


**Three-Point Bending Test** 



В

### Effects of Cyclic Flexure on SMC-Seeded TEHV



RESView 3D Histology, Resolutions Sciences Corp.,
Corte Madera, CA

#### A Structural Model for Nonwoven Scaffolds

Flexural Rigidity of RVE

Number of fibers per RVE

Thickness of RVE

$$(EI)_{RVE} = \frac{1}{12} N_f (E_f)' A_f t^2 \int_{-\pi/2}^{\pi/2} R(\Phi) \cos^4 \Phi d\Phi$$

**Fiber Orientation Distribution** 

RVE weight / area

RVE width

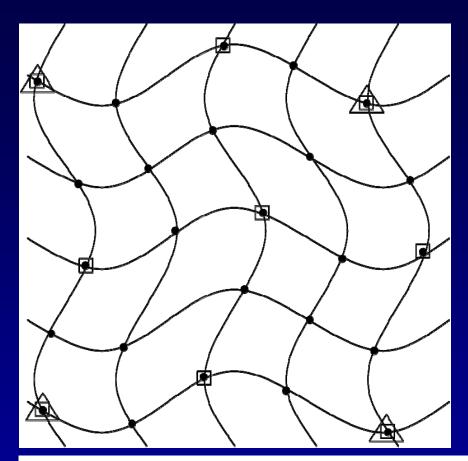
Fiber Cross-Sectional Area

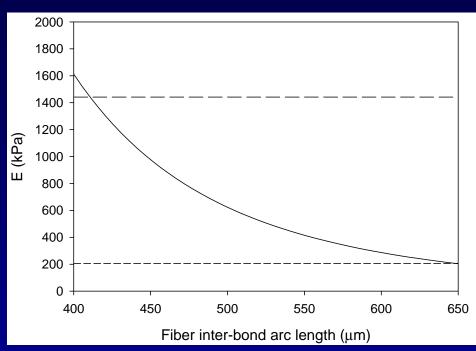
Fiber Effective Stiffness

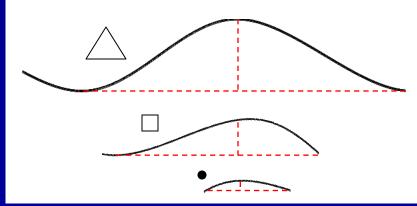
Fiber weight / length

Freeston, W.D., Jr., Platt, M.M., Textile Research Journal

#### Nonlinear Reinforcement Effects of ECM







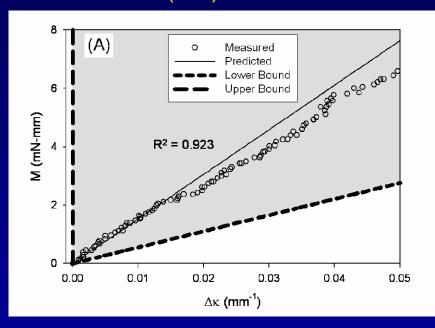
$$E_{ECM} = 0$$
  $(E_f)' = 8896 \text{ kPa}$   $E = 206 \text{ kPa}$ 

$$E_{FCM} > 0$$
  $(E_f)' \sim 15430 \text{ kPa E} = 431 \text{ kPa}$ 

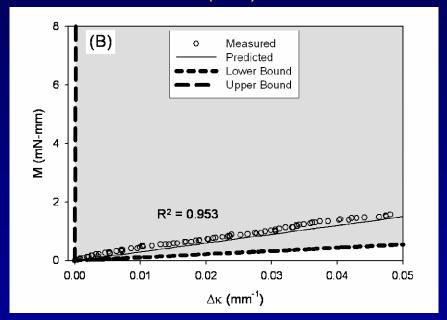
$$E_{ECM} >> 0 (E_f)' \sim 55640 \text{ kPa } E = 1555 \text{ kPa}$$

#### Structural Model Results

#### Preferred (PD) Fiber Direction

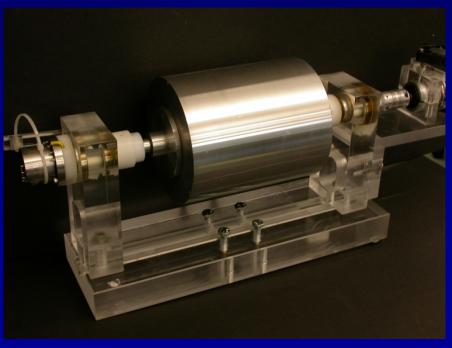


#### Cross-Preferred (XD) Fiber Direction

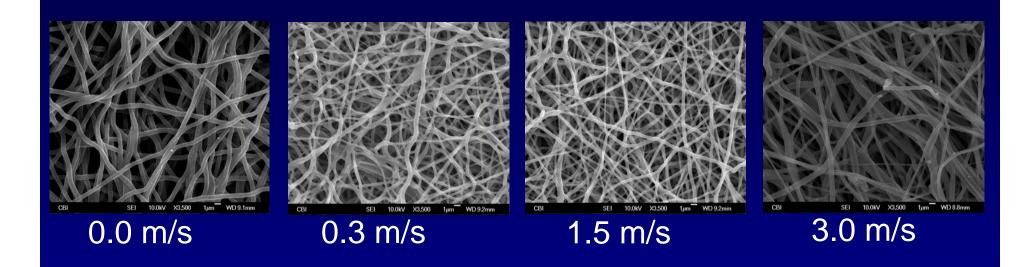


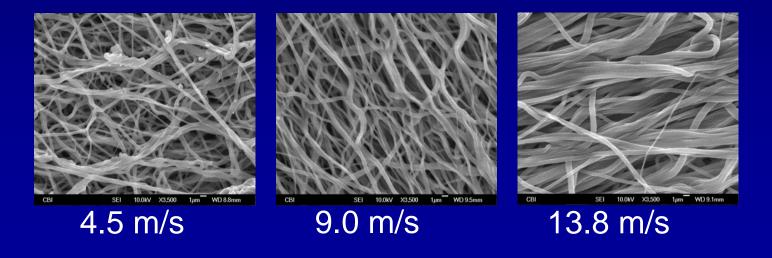
# Electrospinning setup

Mandrel: 50rpm to 2300rpm or 0.3 m/s to 13.8 m/s



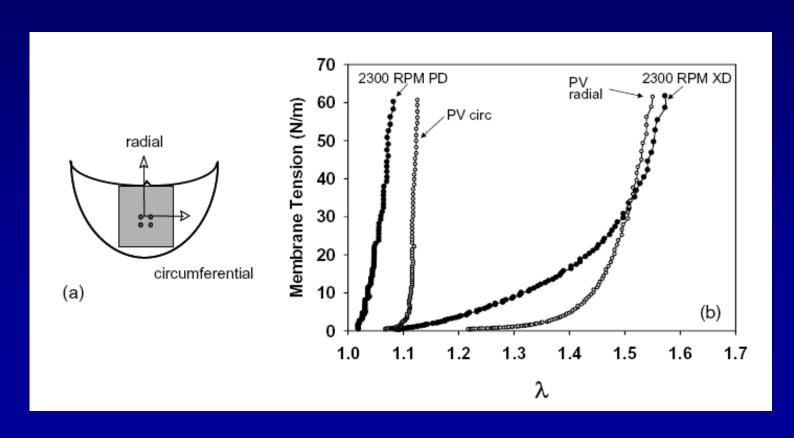
# **ES-PEUU** microstructure



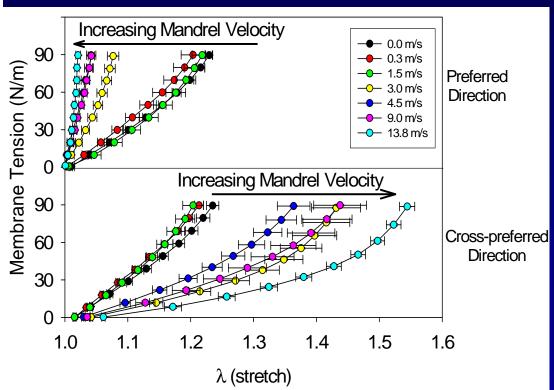


### Why ES-PEUU scaffolds?

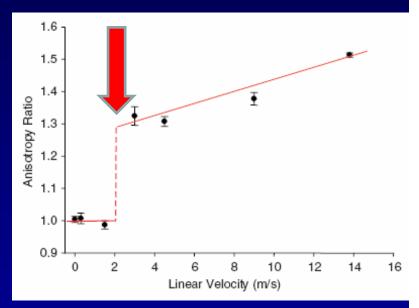
- Electrospun PEUU scaffolds exhibit
  - wide range of mechanical compliance and anisotropy
  - mechanical properties very similar to native tissue



# Mechanical analysis



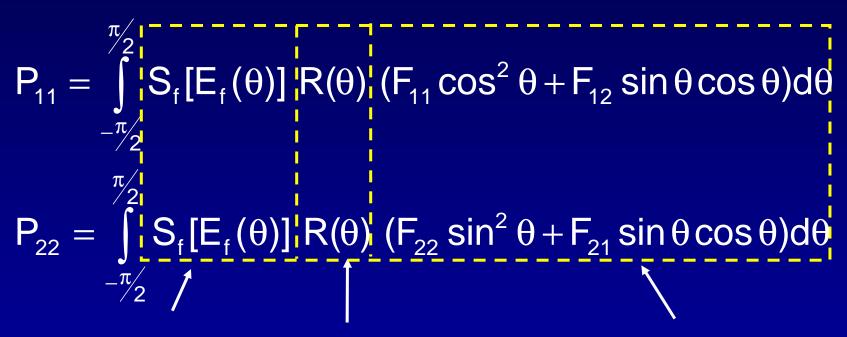




Comparison to native pulmonary valve

## Model formulation

#### Stress-stretch relations

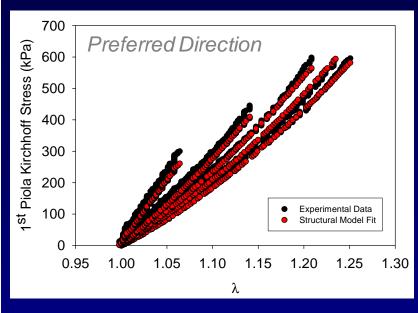


Effective fiber properties

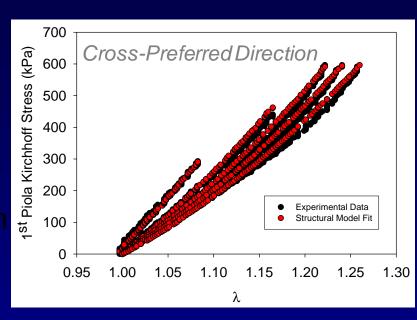
Effective fiber structure

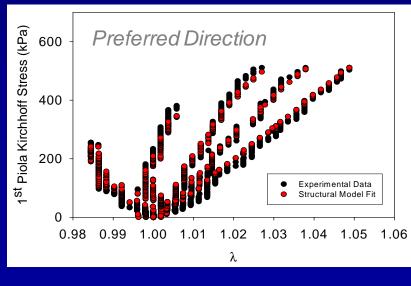
Kinematic terms based on experimental strains

# Structural model fit

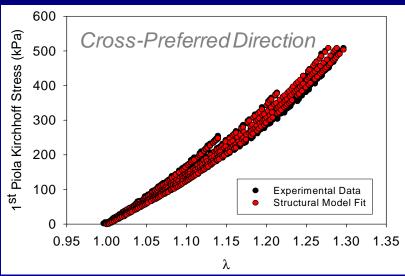


0.0 m/s or Random

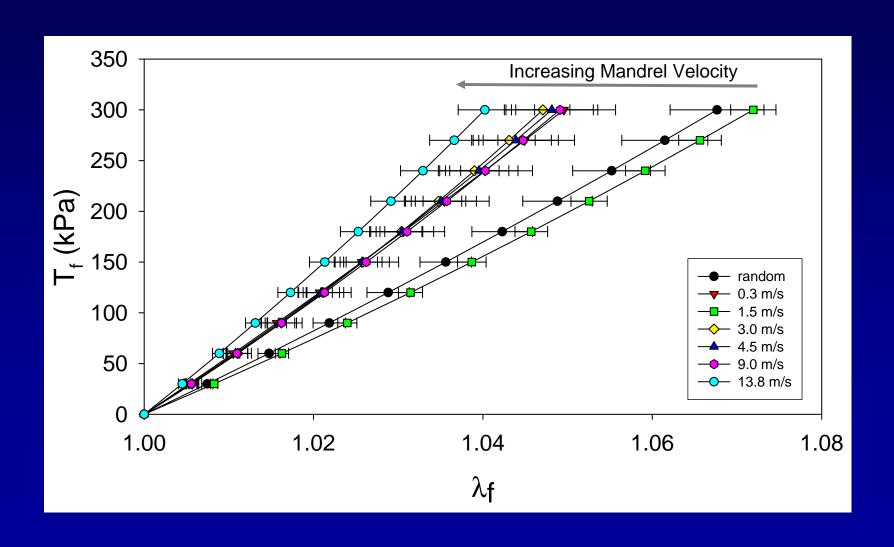




4.5 m/s Or 750 rpm



# Effective fiber stress-stretch



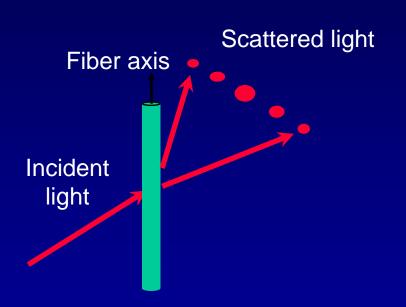
### From this model we can

- 1. Obtain true fiber (polymer) moduli as opposed to effective fiber stress-strain response using exponential model used previously
- 2. Separate structural effects (e.g. orientation) from changes in fiber material properties
- 3. Allow derivation of true fiber (material) moduli independent of micro-structural features
- 4. Practical uses:
  - Guiding scaffold design for tissue or cell specific applications
  - optimizing in-vitro conditioning regimes to produce viable tissues for implantation.

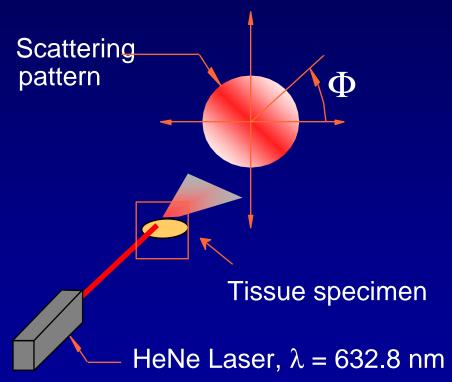
# Scaffold physical characterization-Structure many methods are available

- Porosity and pore geometry
- Focus on fibrous architecture as this dictates both bulk properties and local cellular deformations
  - SALS for both native and non-wovens.
  - EM and CLSM fiber alignment image analysis
- Cellular deformations and it relation to local and global fiber architecture.
  - Native tissue as the functional endpoint
  - CLSM of cell micro-integrated scaffolds

# Laser Light Scattering



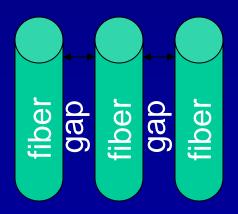
Light is scattered perpendicular to fiber axis



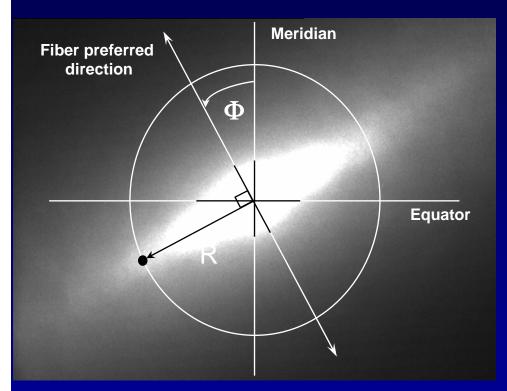
# **Laser Light Diffraction**

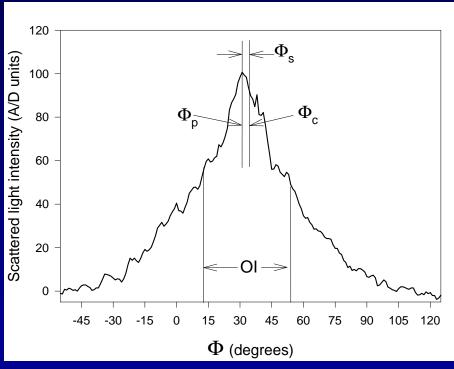
 In connective tissues, one "slit" is the fiber and the other the gap between fibers

 Since the gap must follow the fiber geometry, it turns out that this distinction is not necessary

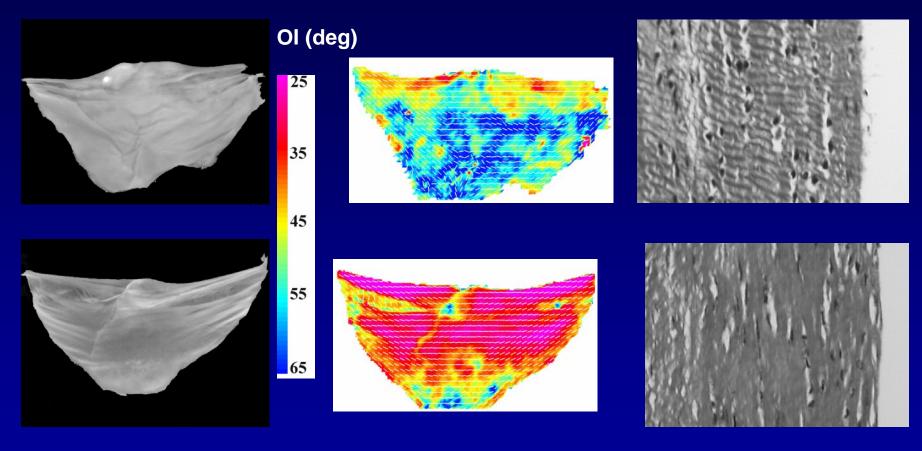


# Angular Fiber Distribution from SALS



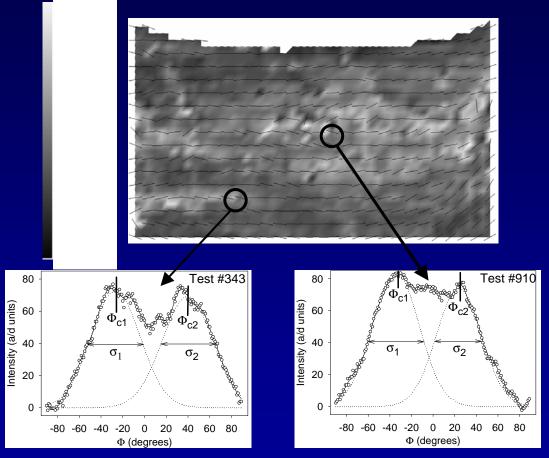


# Native valvular tissue



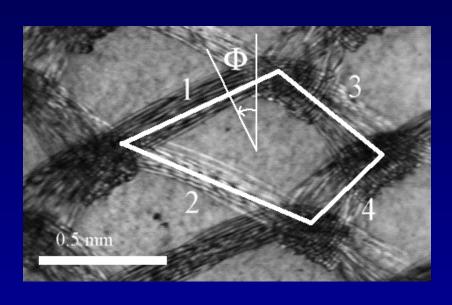
SALS was used to compare the changes in fiber distributions between pressure-fixed aortic valve cusps (bottom row) and non-pressure fixed (top row). The changes in crimp due to the two preparations are on the right. The SALS data (center) shows a much higher alignment in the pressure-fixed cusp.

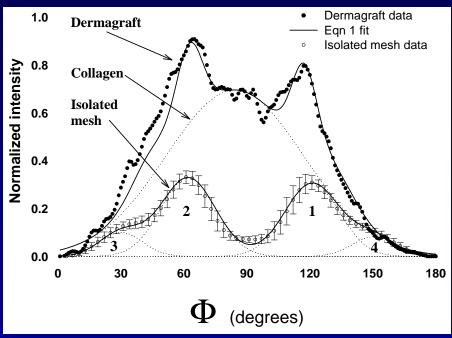
# SIS Multiple Fiber Populations



SALS can also indicate the presence of multiple fiber populations, which can then be deconstructed using mathematical techniques to investigate the results of multiple fiber populations on mechanical performance.

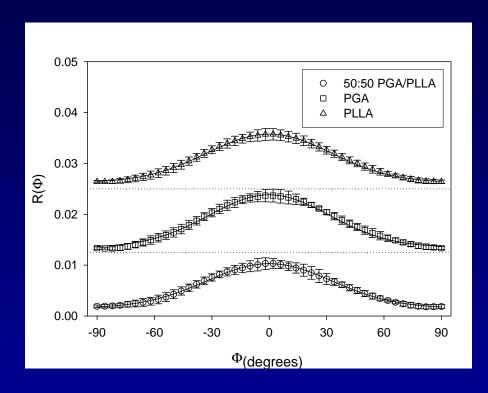
# **Engineered Biomaterials**





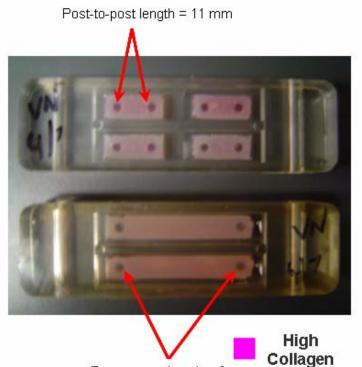
SALS can be used to evaluate the structural properties of composite biomaterials such as the Dermagraft (Advanced Tissue Sciences). This material is composed of a biodegradable mesh embedded in a collagen matrix. Both the collagen and mesh components of the fiber distribution are observed in the SALS signal (right).

# $R(\Phi)$ : Normalized Fiber orientation distribution of non-wovens



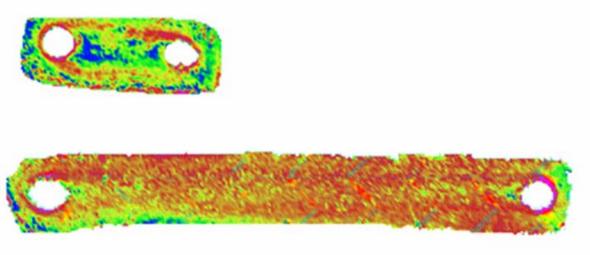
$$R(\Phi) = \frac{\frac{\sigma}{y_0} + \frac{1}{\sigma\sqrt{2\pi}} \exp\left(-\frac{\Phi^2}{2\sigma^2}\right)}{\int_{-\pi/2}^{\pi/2} \left[\frac{\sigma}{y_0} + \frac{1}{\sigma\sqrt{2\pi}} \exp\left(-\frac{\Phi^2}{2\sigma^2}\right)\right] d\Phi}$$

	Thickness	Bulk Density	Mean Fiber Orientation Distribution, $R(\Phi)$ Normalized Gaussian Model ( $\mu$ <sub>= 0</sub> )			
<u>Material</u>	(µm)	(mg/cm <sup>3</sup> )	$\sigma_{\rm (degrees)}$	$y_o$	$R^2$	
PGA	948 ±28	69.0	31.66	25000	0.9951	
PLLA	$1153 \pm 37$	61.9	33.79	20000	0.9986	
50:50	$889 \pm_{6}$	61.75	32.97	15000	0.9987	



Post-to-post length = 5

# SALS Tendon tissue engineering\*



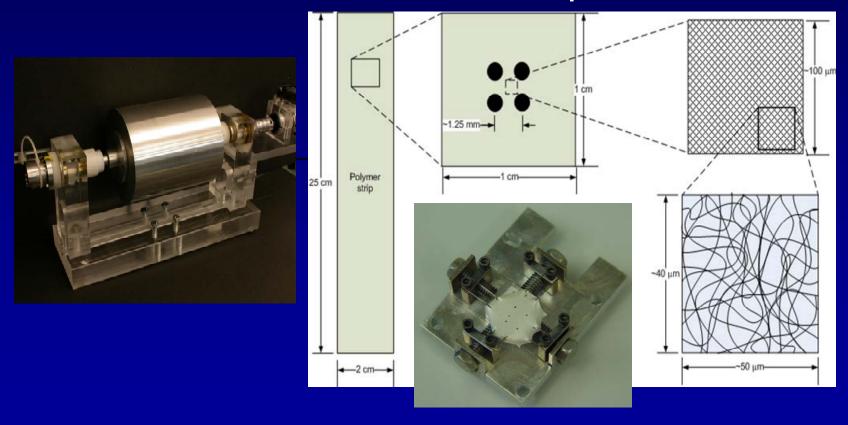
\*Nirmalanandhan VS, Rao M, Sacks MS, Haridas B, Butler DL., JB 2007

Alignment

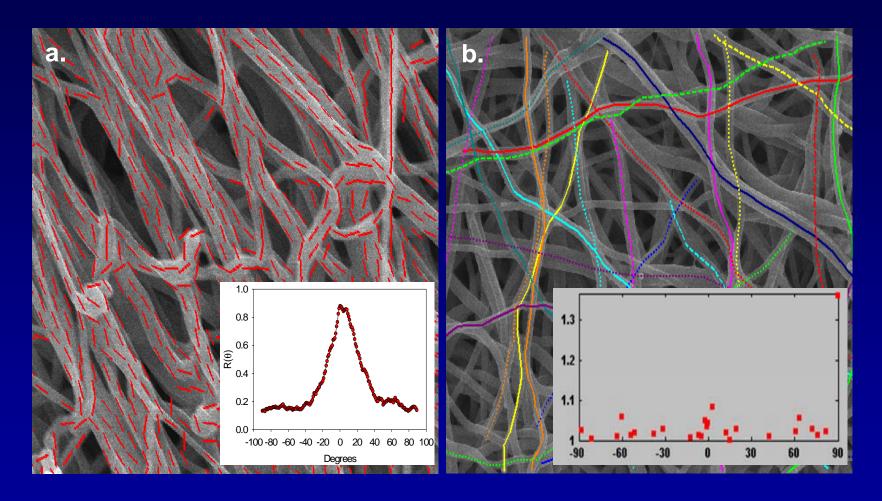
Low Collagen Alignment

#### Global deformations vs. local fiber response

 Illustration of multi-scale characteristics encountered when relating global deformations to local fiber responses



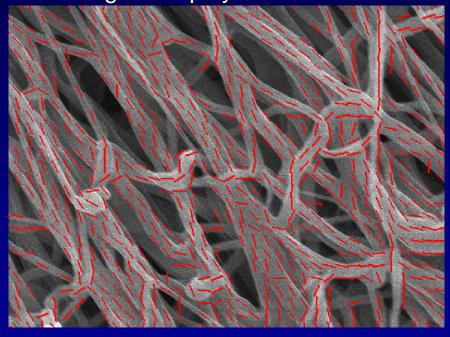
#### Fiber orientation and tortuosity tracking

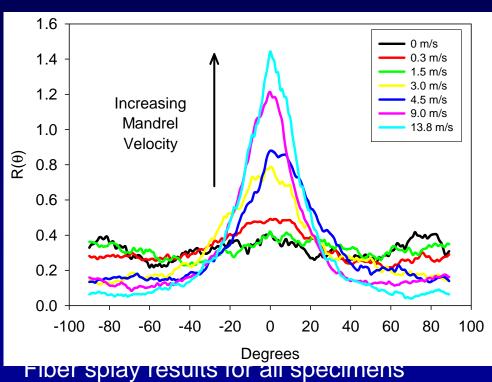


Custom image analysis to quantify (a) orientation and (b) tortuosity

# Fiber architecture analysis\*

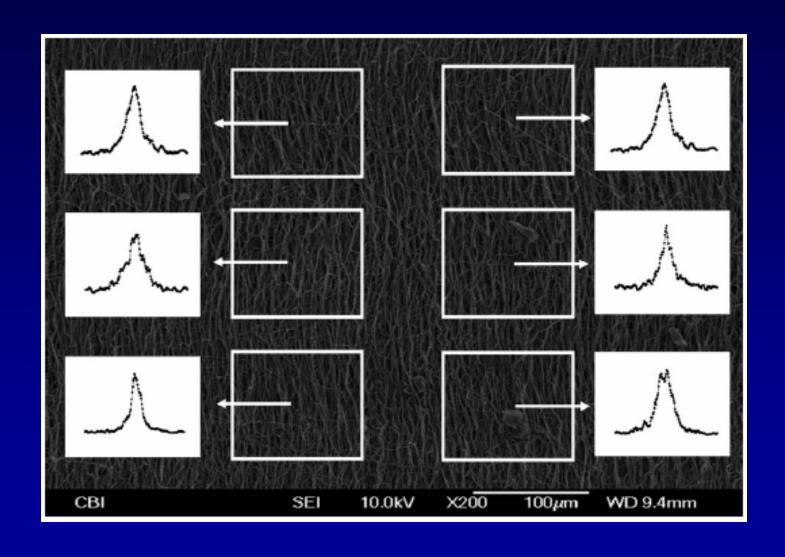
Tracking fiber splay





\*Courtney et al., Biomaterials, 2006

# Structural uniformity



# Functional Tissue Engineering Effects of changes in tissue formation with time

- a. Effects of tissue formation.
  - i. Physical stimulation to enhance tissue generation.
  - ii. Methods to assess effects of tissue formation.
- b.Scaffold degradation
  - i. Mass changes
  - ii. Surface vs. bulk erosion
  - iii.Stress-transfer considerations.

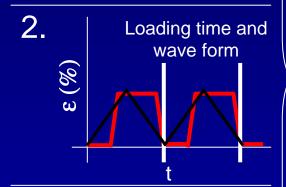
## Mechanical training paradigm

**INPUTS** 

**OUTPUTS** 

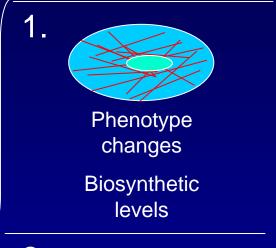


Controlled cell deformation



- 3. # of cycles
- 4. Addition of: growth factors ascorbic acid

Mechano-dependent, phenotypic/biosynthetic response



2.

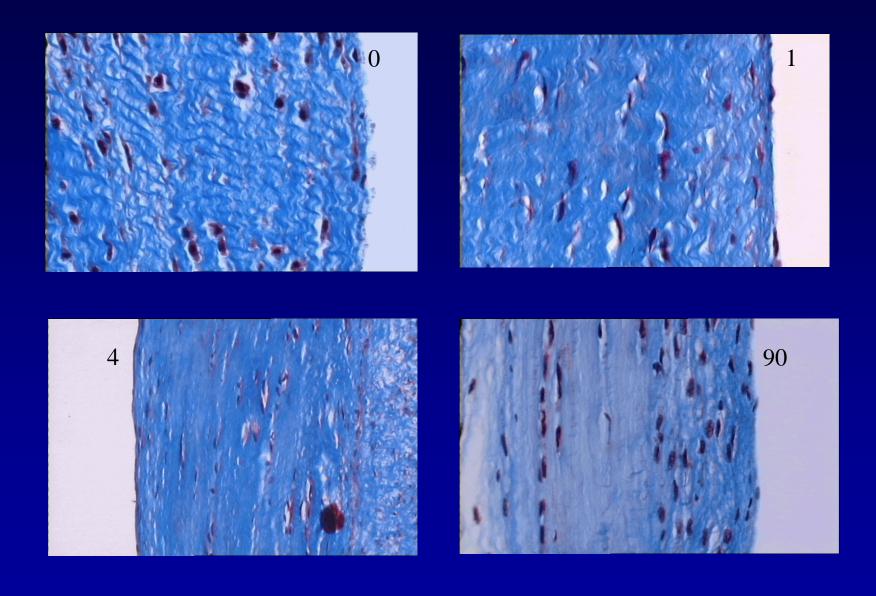
**Robust ECM formation** 

Scaffold degradation

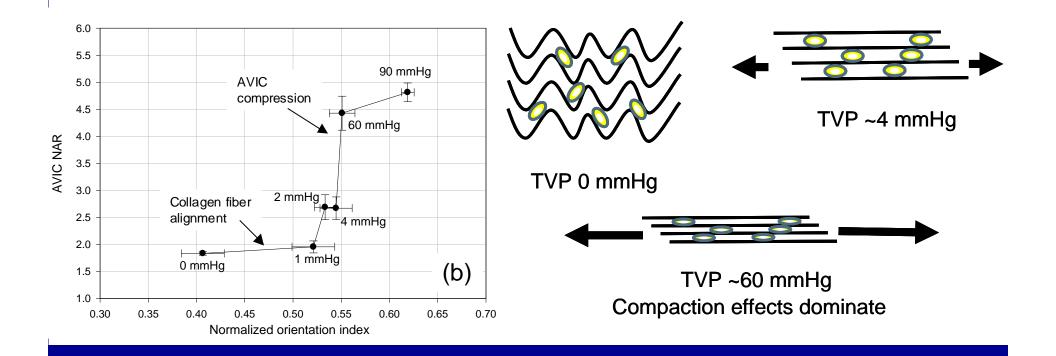
#### Related studies

- Relating the microenvironment experienced by a cell in response to global tissue deformation is a reoccurring question
  - Cellular deformation influences biosynthetic activity
- Mow et al. Chondrocyte deformation and local tissue strain in articular cartilage
- In recent studies, Huang et al. investigated the response of aortic valve interstitial cells (AVIC's) with increasing transvalular pressure<sup>†</sup>
- Cell nuclear aspect ratio was used to measure cell deformation

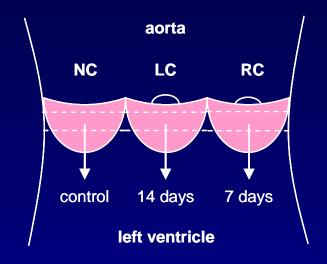
# VIC deformations within HV tissues

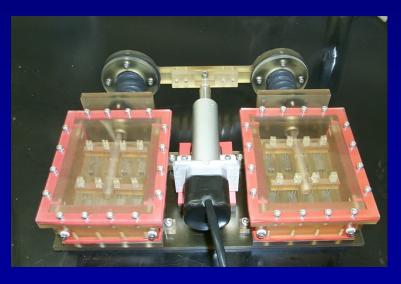


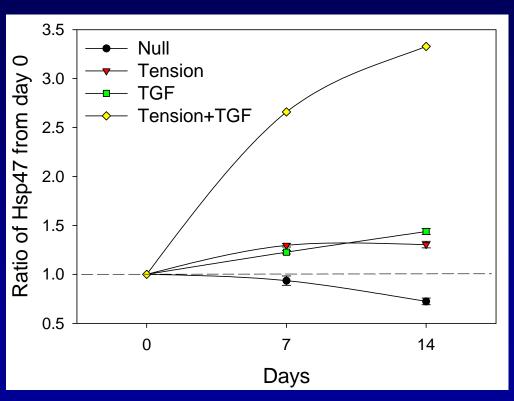
# Collagen alignment-VIC aspect ratio



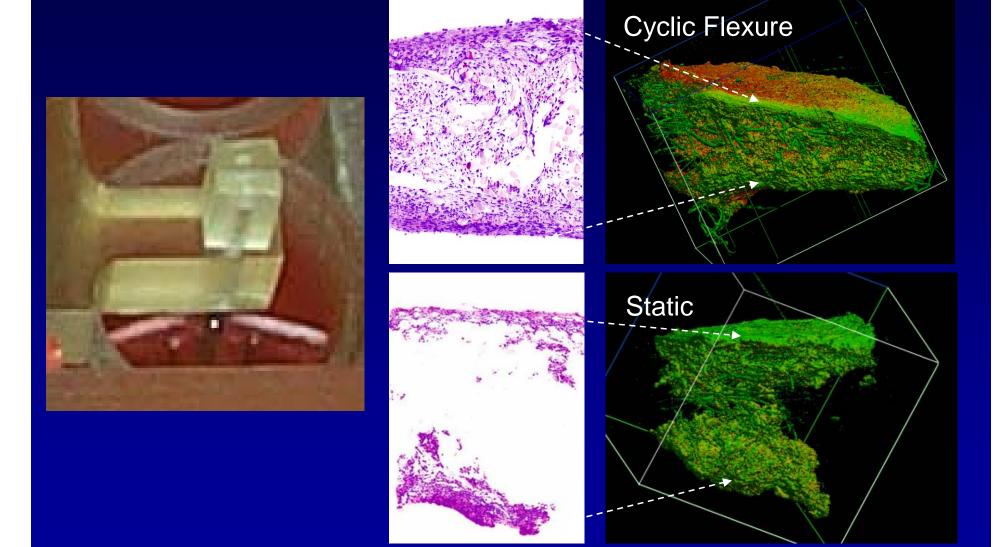
#### Mechanical stimulation of heart valve tissues<sup>1</sup>







#### Effects of Cyclic Flexure on SMC-Seeded TEHV



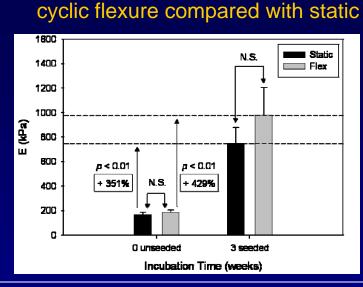
RESView 3D Histology, Resolutions Sciences Corp., Corte Madera, CA51

# Mechanical Stimulation

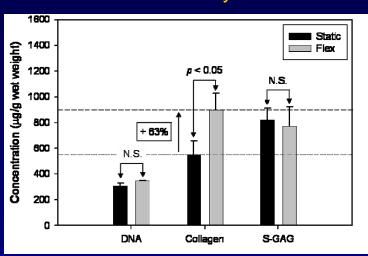
# Structural Mechanics

## Trend of Increased effective stiffness with

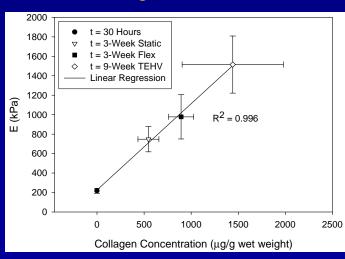
Key Results from Cyclic Flexure Studies



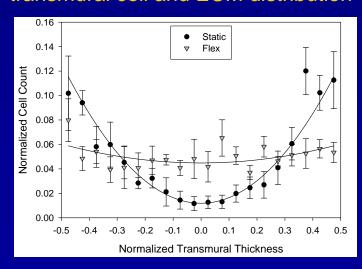
#### 63% increase in collagen concentration with cyclic flexure



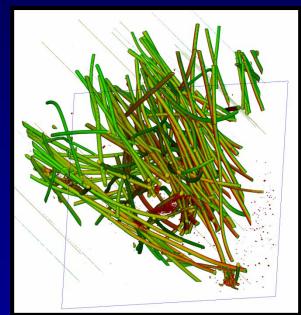
## Effective stiffness is highly dependent on collagen concentration

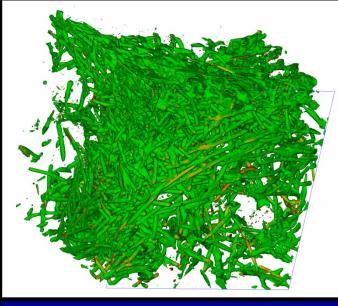


#### Cyclic flexure can homogenize the transmural cell and ECM distribution



### Engineered Heart Valve Tissue







PGA scaffold

TEHV scaffold after 18 day dynamic incubation

#### Meso-Scale Model for Nonwoven-ECM

$$(EI)_{RVE} = \int_0^w \int_{-t/2}^{t/2} E(y) y^2 dy dx$$
 ECM-Coupling Parameter ECM Effective Stiffness Scaffold Effective Scaffold Effecti

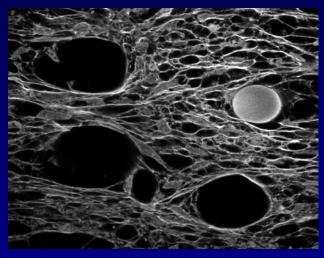
Normalized Transmural Collagen Concentration Collagen Specific Stiffness (i.e., stiffness/quantity)

$$(EI)_{RVE} = \int_0^w \int_{-t/2}^{t/2} \left[ R\left(C(y) \cdot B_c \cdot \overline{E}_c\right) + E_s \right] y^2 dy dx$$

Engelmayr and Sacks, Biomech Model Mechanobiol, 2006, in preparation

#### C(y): Normalized Transmural Collagen Concentration Distribution

Fluorescence Microscopy of Picro-Sirius Red Stained Sections



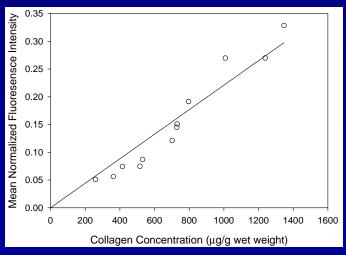
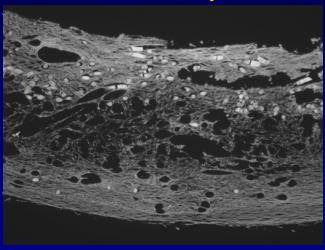
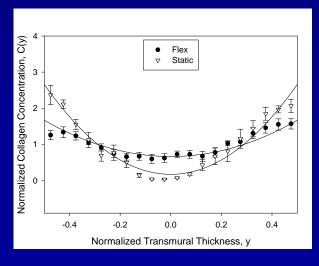


Image Analysis for Normalized Fluorescence Intensity Distribution



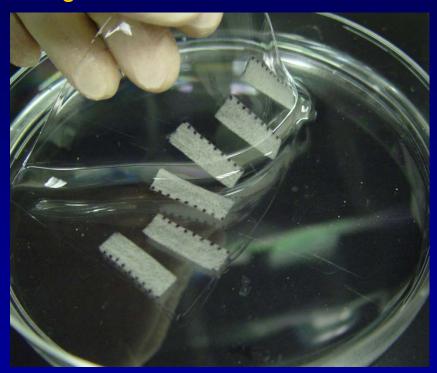


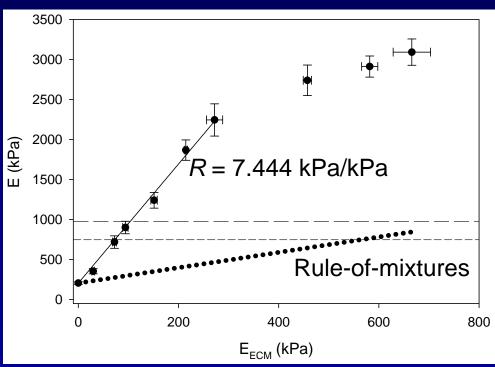
Dolber, P.C. and Spach, M.S., J Histochem Cytochem, 1993, 41(3):465-9.

#### R: Nonwoven-ECM Coupling Parameter

Physical Models of ECM and TEHV:
Polyacrylamide (Pam) gel and
Pam gel-infiltrated nonwoven scaffold

R is determined from linear region of E versus  $E_{\text{ECM}}$  plot



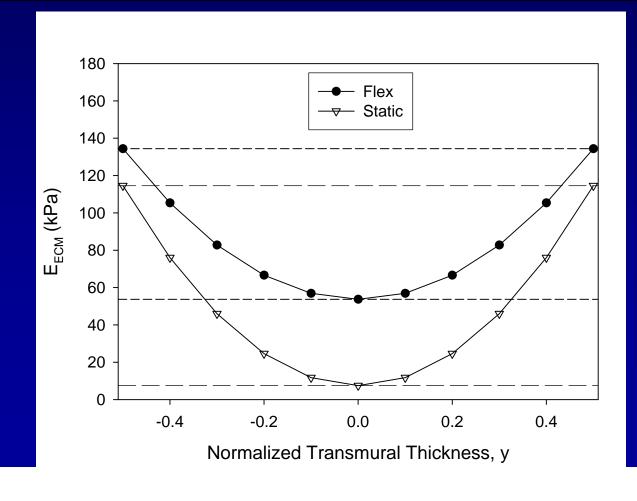


$$E = R \cdot E_{ECM} + s$$

$$E = E_{ECM} v_{ECM} + E_s$$

### E<sub>ECM</sub>(y): Transmural ECM Effective Stiffness

Experimental	E	$B_c$	C(y) =	$=ay^2+c$	$ar{E}_c$
Group	(kPa)	(μg/g wet weight)	а	$\mathcal{C}$	(kPa/( μg/g wet weight)
Static	$748 \pm 130$	$893 \pm 133$	9.946	0.173	0.0789
Flex	$978 \pm 228$	$546 \pm 111$	4.009	0.667	0.0904



# Next steps: Scale up

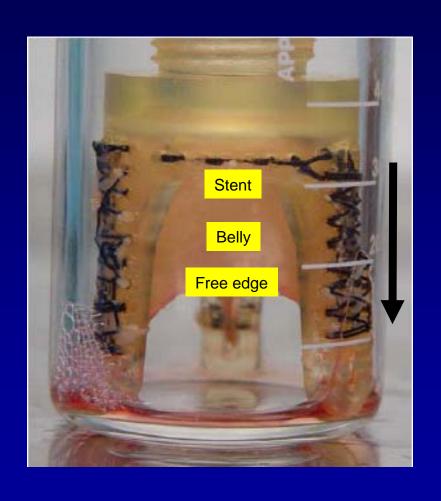
- Local cellular deformations need to be controlled at the macro-level in an intact valve
- Need to balance need for controlled biomechanical stimulation with other valve design requirements

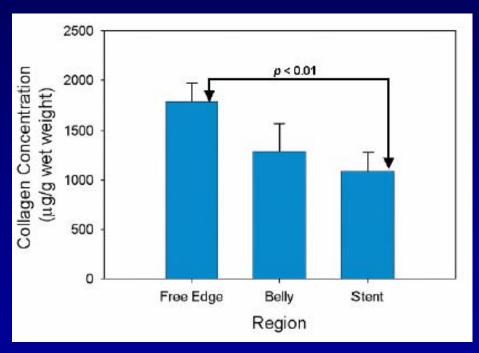
# Physiological flow loop bioreactor<sup>1</sup>



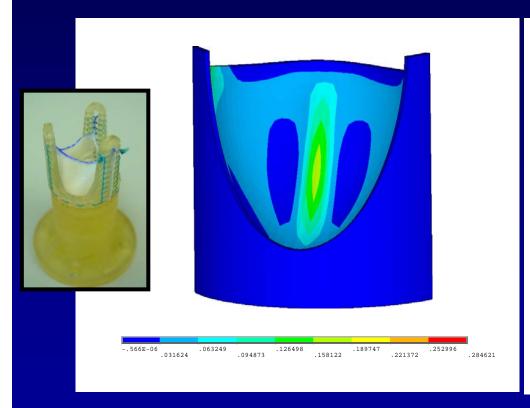


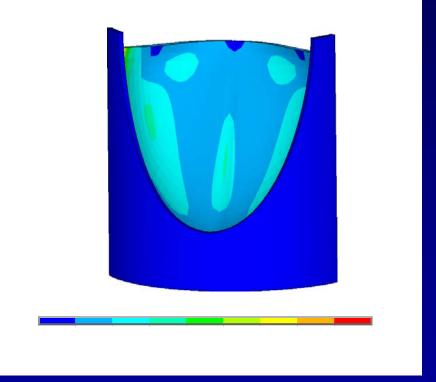
# Physiological flow loop bioreactor





# FE simulations of leaflet principal strain (quasi-static loading)





Isotropic fiber distribution

2300 rpm fiber distribution

# Ongoing issues and future trends

- Lots of techniques and approaches what is the correct approach?
  - Driven by functional understanding and application.
- There is more to life than Young's modulus what do you measure?
- Biomechanical studies usually require large specimens and large number of specimens due to variability – cost/benefit.

# Ongoing issues and future trends

- a. Need for non-destructive simultaneous cell/tissue imaging during in-vitro incubation and in-vivo development.
  - i. Optical methods
  - ii.US
  - iii.MRI
- b. Need for standardization of approaches ASTM?
- c. Need for low cost, high throughput, physiologically meaningful tests.
  - i. Role of commercial sector.

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