

## Tissue Regeneration under **Tissue Regeneration Engineering** Ectopic Conditions with(out)





#### Tissue Repair (Healing)

- Regeneration of injured tissue (replacement by normal cells of the same kind)
- Replacement by fibrous tissue (fibrosis, scarring)

It may start early after tissue damage

- regeneration
  by parenchymal cells of the same type
- reparation

replacement by connective tissue (fibrosis) result - scar Normal Cell Proliferation

Proliferating cells progress through a series of defined phases and checkpoint, collectively call the *cell cycle* 



Control of Cell Cycle

• Progression through the cell cycle is controlled at specific checkpoints (restriction point in G 1, mitosis entry and mitosis exit)

• Transition between stages of mitosis is triggered by increased activity of cyclin-dependet kinases (CDK)

• Each CDK modulates the activity of a subset of cellular targets specific for progression through individual transitions with the cell cycle





#### **Cell-ECM** interactions

#### components

collagen (18 types) – I, III, IV, V; tensile strength elastin (+ fibrillin) – return to normal structure after stress glycoproteins - adhesion, binding ECM to cells (fibronectin, laminin) proteoglycans and hyalouronans – lubrication (gels)

Roles of the ECM

Mechanical support
 Determination of cell polarity
 Control/maintenance of cell differentiation
 Scaffolding for tissue renewal
 Establishment of tissue microenvironment
 Storage and presentation of regulatory proteins

← Cell growth and differentiation are dependent on extracellular signals from soluble polypeptide growth factors and the ECM. BUT NOT EXCLUSIVELY!

## ...because one size does not fit all...



#### Ectopism

In tissue engineering, ectopic (human) tissue formation (from the Greek word ektopos or "far from a place"), refers to tissue that forms or is located where it does not belong or to structures that form within scaffolds implanted in non-specific sites.

From the point of view of clinical diagnoses, the term (referring to the same tissue phenotype) most often covers the ossification of tissues outside their usual origins.



Healthy

FOP patient

Nakajima, T., & Ikeya, M. (2019). Insights into the fibrodysplasia biology of ossificans progressiva using patient-derived induced pluripotent stem cells. Regenerative therapy, 11, 25-30.



Shehab, Dia, Abdelhamid H. Elgazzar, and B. David Collier. "Heterotopic ossification." *Journal of Nuclear Medicine* 43, no. 3 (2002): 346-353.





https://www.wikidoc.org/index.p hp/Follicular\_thyroid\_cancer\_MRI https://ec.europa.eu/jrc/en/news/prostatecancer-alpha-therapy-shows-impressiveresults



In tissue engineering, ectopic bone tissue is the result of ossification of scaffolds implanted in sites not specific to bone formation.

#### Subcutaneous implantation

Fig.1 Ectopic bone "ossicle." (A) Whole body micro-computerized tomography image showing bone tissue in a mouse. (B) Gross morphology of a mouse-harvested ossicle. (C) Hematoxylin/eosin histological staining of an ossicle based on an implant of hMSC carrier gelatin sponge with BMP-2. (D) Masson's trichrome histological staining of an ossicle based on hMSC carrier ceramic implant. Note the remaining ceramic material in pale blue (Cer), newly formed bone in the surface of the ceramics in dark blue, and mature BM tissue with hematopoietic cells, adipocytes, and vascular structures with erythrocytes in red.



#### Intramuscular implantation



## **Fig. 2** Illustrated Depth of Muscle Pouch Creation. Axial view of mouse left hind limb. (a) Proper surgical creation of muscle pouch and (b) implantation of graft material. (c) One must be mindful as to not create a pocket so deep as to expose the periosteum. (d) Graft placed too close to the periosteum will render new bone indistinguishable from the femur

Asatrian, G., Chang, L., & James, A. W. (2014). Muscle pouch implantation: an ectopic bone formation model. In *Animal Models for Stem Cell Therapy* (pp. 185-191). Humana Press, New York, NY.

#### Renal capsule model

Α



Morillon II, Y. M., Manzoor, F., Wang, B., & Tisch, R. (2015). Isolation and transplantation of different aged murine thymic grafts. *JoVE (Journal of Visualized Experiments)*, (99), e52709.

Abarrategi, A., Mian, S. A., Passaro, D., Rouault-Pierre, K., Grey, W., & Bonnet, D. (2018). Modeling the human bone marrow niche in mice: From host bone marrow engraftment to bioengineering approaches. *Journal of Experimental Medicine*, *215*(3), 729-743.

## Morphological features

# Material chemistry

**OSTEOINDUCTION** 



# BMP / other protein coating / mixture

200 µm



# BCP 1150 HA 1150 HA 1250



based ceramics

I

Calcium





#### STIMULI / MODIFICATIONS



#### COMMON OSTEOINDUCTIVE AGENTS









**STEM CELLS** 







#### THE ATTRIBUTES OF ECTOPIC OSTEOINDUCTION IN GRAPHENE OXIDE-INLAYED BIOPOLYMER BLENDS



#### **CHITOSAN/GELATIN blends @ GRAPHENE OXIDE # GENIPIN**





#### Graphene Oxide Reinforcing Genipin Crosslinked Chitosan-Gelatin Blend Films

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#### Comprehensive Appraisal of Graphene–Oxide Ratio in Porous Biopolymer Hybrids Targeting Bone-Tissue Regeneration

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Graphene Oxide Reinforcing Genipin Crosslinked Chitosan-Gelatin Blend Films Comprehensive appraisal of graphene oxide ratio in porous biopolymer hybrids targeting bone tissue regeneration

Graphene oxide-inlayed polymer blends: ectopic osteogenesis attributes *manuscript in preparation* 



### SEM and µCT analyses





morphology

**Cell affinity** 

#### COMPOSITES BIOCOMPATIBILITY



#### In vitro BIOCOMPATIBILITY



Murine pre-osteoblasts viability and proliferation profile as resulted from quantitative evaluation by MTT assay after 3 and 7 days of in vitro cell culture; Statistical significance: @,& and % - p<0.05; ## and && - p<0.01; \*\*\* and ### - p<0.001.



Scaffolds' cytotoxicity evaluation by LDH assay during 7 days of in vitro cell culture. Statistical significance: \* p<0.05; \*\* - p<0.01.

MTT LDH

#### *In vitro* BIOCOMPATIBILITY

Live /

Dead



Fluorescence microscopy evaluation of living (green-labeled) and dead (red-labeled) cells in contact with GCS and GCSGp/GO scaffolds during one week of *in vitro* cell culture.



Gomori staining

CD80 & CD206 expression

Light images of Gomori trichrome stained scaffolds at week 4 post-implantation showing the varying thickness of the capsules "CAP" surrounding the different scaffolds (first column), the histological aspect of the edge and center of scaffolds (second and third column).

> Immunohistochemical expression of CD80 and CD206 at week 4 postimplantation.

#### In vivo BIOCOMPATIBILITY





## I. Initial characterization

#### durotaxis

**Fig. 1.** (a) Plotting of the compression modulus of hidrated materials, before implantation; (b) Histogram depiction of the wall thickness size domain calculated in CTAn (Bruker); (c) Color-highlighted 3D renderings of (\*) GCs, (\*\*) GCsGp and (\*\*\*) GCsGp/GO 0.5% scaffold captured in CTVox.



**Fig. 2.** Experimental design. (1) Preparation of subcutaneous pocket in the dorsum of mice, (2, 3) Ectopic subcutaneous implantation of the scaffold (4) Closure of the overlaying skin (5) Scaffolds before implantation, (6) GCsGp/GO 0.5% wt. scaffold at 4 weeks after subcutaneously implantation to mice.



## II. Biological and immunohistochemical characterization // in vitro





Figure 3. In vitro osteogenic profile analyses a) runx2 (a.) and opn (b.) gene expression in differentiated 3T3-E1 cells in GCsGp/GO contact with materials. Statistical significance <sup>###</sup>p<0.001; \*\*, <sup>##</sup>p<0.01; <sup>#,\*</sup>p<0.05; **b**) immunohistochemical runx2 and opn expression in differentiated 3T3-E1 cells in contact with GCsGp/GO materials.

#### II. Biological and immunohistochemical characterization



**Figure 4**. Qualitative evaluation of cellular distribution and morphology in GCsGp/GO scaffolds during 7 (A1-3) and 28 (B1-3) days of osteogenic differentiation using SEM. Qualitative evaluation of *in vitro* calcium accumulation in bECM using ARS histological staining at after 7 (A i-iii) and 28 (B i-iii) days.





**Figure 5.** (a) Seric ALP activity 4 weeks post-implantation of GCs, GCsGp and GCsGp/GO 0.5% wt. scaffolds to mice. *In vivo* osteogenic profile analyses (b) mRNA expression of *opn* and *runx2* four weeks post-implantation (statistical significance  $^{\#,*}p<0.05$ ); (c) confocal microscopy protein expression of *opn* and *runx2* four weeks post-implantation.



**Figure 6.** Histological analysis of the ectopic bone occurence in GCs, GCsGp and GCsGp/GO 0.5% wt. scaffolds at 4 weeks post-implantation. **a**) Representative H&E, Gömöri trichrome and ARS stainings. Scale Bar 20 $\mu$ m; **b**) The analysis of the area of collagen domains according to Gömöri staining indicated that significantly more collagen was secreted within GCsGp/GO 0.5% wt. group as opposed to GCs group (\*p < 0.001); **c**). ARS staining indicates that significantly more calcium mineral deposits are present in GCsGp/GO 0.5% wt. group than GCs group (\*p < 0.001).

# Ex-vivo characterization

# morphology



Figure 7. Post-explanation morphological characterization by means of i) SEM micrograps of GCs, GCsGp and GCsGp/GO 0.5% wt. scaffolds 28 days post-implantation; ii) Colorized µCT images of (a) GCs, (b) GCsGp and (c) GCsGp/GO 0.5% wt. scaffolds explanted 28 days; (\*) marks indicate captures whereby the bi-phasic nature of the samples was separately highlighted and (\*\*) marks indicate sectional views of the central morphology of the samples. (d) Charted data correlating mechanical properties and mineral formation based on the constitutional nature of the composites

**Table 1.** Quantitative evaluation of de novo bone formationwithin the explanted specimens, by means of micro-CT analysis.





**Figure 8**. Correlation between the ratios of Young's modulus and the mineral content's of GCs, GCsGp and GCsGp/GO.5

# Ex-vivo characterization structure \_\_\_\_\_





Figure 9. FTIR spectra of GCs, GCsGp and GCsGp/GO.5 ex-vivo.

Ex-vivo characterization

# structure



Figure 10. XRD spectra of GCs, GCsGp and GCsGp/GO.5 before (upperleft corner) and after explantation.. Plotting of cristalinity index variations of the three specimens before/after implantation

#### Conclusions

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Genipin and GO effect onto the osteogenesis and osteoinduction



GO fine tunes durotacticity in an all-inclusive manner



Material characterization of ex-vivo specimens can provide new insights with respect to classic *in vivo* and *in vitro* bioassays (validation). GO composites manifested ectopic osteogenic behavior



Results concur on the fact that 0.5 wt. % GO load provided the most suitable support for osteoinductivity

Ectopic ostegenesis investigation ongoing of superior GO supplementation





mineral close-up (C) in CHT-GEL. Scale bar =  $250\mu m$ 

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