

1 **Method Comparison for Analyzing Wound Healing Rates**

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18 **ABSTRACT**

19 Wound healing scratch assay is a frequently used method to characterize cell migration, which is an
20 important biological process in the course of development, tissue repair, and immune response for
21 example. The measurement of wound healing rate, however, varies among different studies. Here we
22 summarized these measurements into three types: I) Direct Rate Average; II) Regression Rate Average;
23 and III) Average Distance Regression Rate. Using Chinese Hamster Ovary (CHO) cells as a model, we
24 compared the three types of analyses on quantifying the wound closing rate, and discovered that type I
25 & III measurements are more resistant to outliers, and type II analysis is more sensitive to outliers. We
26 hope this study can help researchers to better use this simple yet effective assay.

27

28 **KEYWORDS**

29 wound healing scratch assay, cell migration rate, Chinese Hamster Ovary cells, N-acetylglucosamine
30 (GlcNAc)

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34 INTRODUCTION

35 Cell migration is fundamental to normal development and homeostasis of tissues and organs as well as
36 to various pathological states, such as cancer metastasis. In developing embryo, cell migration plays an
37 essential role in gastrulation and organogenesis; in developed organs, migration is also crucial to tissue
38 regeneration (Lauffenburger, D. A. et al. 1996). The process itself is a complex phenomenon that
39 requires synchronization and coordination of various cellular events, such as cell polarization,
40 protrusion, adhesion, translocation of the cell body and the retraction of its trailing edge (Lauffenburger,
41 D. A. et al. 1996; Horwitz, R. et al. 2003). Due to the paramount physiological importance,
42 understanding the underlying biology of cell migration is of interest to scientists for a number of
43 therapeutic applications.

44 Several *in vitro* assays have been developed to characterize this process. Transwell migration assay
45 (Boyden chamber assay), cell exclusion zone assay, fence assay, micro-carrier bead assay and wound
46 healing assay are a few examples (Kramer, N. et al. 2013). Among these, wound healing scratch assay is
47 one of the simplest, economical and well-studied methods to measure cell migration *in vitro* that to some
48 extent mimics *in vivo* wound healing (Lampugnani, M. G. 1999; Liang, C.-C. et al. 2007). It operates on
49 the idea that formation of an artificial gap or scratch in a confluent monolayer of cells will result in the
50 migration of cells on the wound edge towards the center of the gap until the scratch is closed (Zahm, J.-
51 M. et al. 1997). This response is due to the disruption of cell-cell contacts resulting in an increased
52 concentration of growth factors at the wound edge (Wong, M. K. et al. 1988; Coomber, B. L. et al. 1990;
53 Zahm, J.-M. et al. 1997). The healing then takes place through a combination of migration and
54 proliferation until the cell-cell contacts are reestablished (Wong, M. K. et al. 1988; Yarrow, J. C. et al.
55 2004).

56 Due to its ease of operation, it has been widely adapted for studying wound healing. The method of
57 computing the rate, however, has varied from study to study. The scratching of a confluent cell surface
58 is likely to create uneven boundary with the intrinsic variation. The moving front of cells is therefore not
59 even, and multiple measurements are necessary at different locations over time to assess the average rate
60 (Maini, P. K. et al. 2004). Studies on the migration of single cells have also been carried out to more
61 accurately examine the rate (Friedl, P. et al. 2003; Ridley, A. J. et al. 2003; Friedl, P. et al. 2010). In
62 these studies, the sequence varies on computing the gap closing rate through regression analysis and on
63 averaging the obtained rates. Recently, single-time-point measurement also emerged for quick
64 assessment of migration difference among studied conditions, in which regression analysis as a function
65 of time on wound closing is omitted (Dowling, Catriona M. et al. 2014; Shafqat-Abbasi, H. et al. 2016).
66 We for the first time attempted to catalog these measurements of wound closing rate into three types: I)
67 Direct Rate Average; II) Regression Rate Average and III) Average Distance Regression Rate. Using
68 Chinese Hamster Ovary (CHO) cells as a model, and using regular and starving media as two
69 conditions, we compared the difference of wound closing rate measured by all three methods in varied
70 N-acetylglucosamine (GlcNAc) concentrations. We demonstrated that the rates computed by all
71 methods are similar with slight difference when no outliers existed. Interestingly, we also discovered
72 that with outliers, type II analysis was affected more, therefore, more sensitive to inconsistent
73 measurements; whereas the other two analyses were more robust to outliers.

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75 **MATERIALS AND METHODS**

76 *Cell culture*

77 CHO-K1 cells were cultured in regular DMEM media (Lonza 12614F12) supplemented with 10% Fetal
78 Bovine Serum (FBS), 1% L-glutamine and 1% antibiotics (streptomycin and penicillin) obtained from
79 Invitrogen. Prior to scratching, cells were incubated at 37°C and 5% CO₂ to reach ~ 90% confluency.

80 *Condition 1*

81 Cells were cultured with treatment DMEM media (Sigma, D5030-10L) supplemented with pyruvate, L-
82 glutamine, NaHCO₃, 10% FBS, 4.5 g/L glucose and various concentrations of N-acetylglucosamine
83 (GlcNAc) obtained from Sigma.

84 *Condition 2*

85 Cells were incubated with starving media, which was treatment DMEM media without FBS and lowered
86 glucose at 1 g/L for 24 hours prior to scratching. After scratching, the cells were switched to 10% FBS
87 supplemented treatment media with still lowered glucose at 1 g/L.

88 *Wound healing scratch assay*

89 Two vertical wounds were created on the cell monolayer using P100 pipette tip (Liang, C.-C. et al.
90 2007) in every culture plate. Wound closing was monitored over defined time intervals by digital camera
91 (Nikon Coolpix S6200). The recorded wound length was analyzed by imageJ (<http://imagej.nih.gov/ij/>).
92 Four spots were chosen in each plate to compute the healing rate in condition 1; and 3 spots were used in
93 condition 2.

94 *Analysis of wound healing rate*

95 **Type I analysis (Direct Rate Average):**

96 The wound healing rate (R) at any spot in one plate with defined time was computed by the healing
97 distance (ΔW_t) over time (t), i.e. $R = \Delta W_t / \Delta t$

98 The average wound healing rate, \bar{R}_{plate} , over different spots at defined time, was computed as following:

99

$$\bar{R}_{\text{plate}} = \frac{\sum R}{N_{\text{spots}}}$$

100 Where N_{spots} is the number of spots chosen for monitoring over time. The overall average wound healing
101 rate of all detected time points was calculated by the equation below:

102

$$\bar{R}_{\text{total}} = \frac{\sum \bar{R}_{\text{plate}}}{N_{\text{time points}}}$$

103 Where \bar{R}_{total} is the final wound healing rate, and $N_{\text{time points}}$ is the number of time points chosen in the
104 experiment to monitor the wound closure. For single time-point analysis, the value of $N_{\text{time points}}$ is one.

105 **Type II analysis (Regression Rate Average):**

106 We plotted the wound distance (W) at a given spot as a function of time and used linear regression to
107 obtain the slope, which is the wound healing rate per spot (\bar{R}_{spot}). Then, the plate wound healing rate was
108 computed by averaging the spot wound healing rate at all monitored spots using equation below:

109

$$\bar{R}_{\text{total}} = \frac{\sum \bar{R}_{\text{spot}}}{N_{\text{spots}}}$$

110 **Type III analysis (Average Distance Regression Rate):**

111 We first averaged the wound length (\bar{W}) at each time point for all spots of a plate. Then, we calculated
112 the closed average wound ($\Delta\bar{W}_t$) at each time point of all spots of a plate:

$$\Delta\bar{W}_t = \bar{W}_0 - \bar{W}_t$$

113 Where \bar{W}_0 is the original wound length at 0 hour, and \bar{W}_t is the wound length at t hour. Finally, we
114 plotted the $\Delta\bar{W}$ as a function of t, and used linear regression to obtain the total wound healing rate R_{total} .

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116

117 **Significance analysis:**

118 Microsoft Graphpad Prism software was used for significance analysis. One-way ANOVA Tukey's test
119 was used to analyze rate changes across multiple GlcNAc concentrations within the same treatment
120 condition. Unpaired and two-tail t test was used to analyze significant changes between two conditions.

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122

123 **RESULTS AND DISCUSSION**

124 *Comparison of methods used for analysis*

125 To compare different rate analysis methods, we used CHO cells, a common mammalian cell line that is
126 frequently used as a host for expression of specific proteins (Zhu, J. 2012). Therefore, CHO cells have
127 been used to investigate the function of exogenous proteins in migration (Hori, A. et al. 2001; Ganguly,
128 A. et al. 2012). Under two slightly different conditions, we monitored the wound healing as shown in
129 Figs. 1 & 2, respectively. We used three types of analyses to quantify the wound healing rate and
130 compared their results. The three methods differ in how and when the migration rate is computed. Type
131 I analysis directly computes the migration rate at given time point by dividing the wound length over
132 time. Then wound closing rates at different spots and different time points can be averaged for overall
133 healing rate of the population. This analysis was frequently applied recently when single time point was
134 selected for assessing migration rate (Dowling, Catriona M. et al. 2014; Shafqat-Abbasi, H. et al. 2016).
135 Type II analysis uses linear regression to obtain healing rate over several time points for every spot.
136 Then the rate of different spots is averaged for final closing rate of the population, which has been
137 employed to study single-cell migration (Komuro, H. et al. 1995). Type III analysis averages the wound
138 length across multiple spots first, and then uses the average distance over time for regression analysis to

139 obtain the overall healing rate (Stokes, C. L. et al. 1991). Type III analysis is the common method used
140 in scratching assay when multiple time points are used for analysis.

141 To further examine the changes of wound healing rate, we treated CHO cells with various
142 concentrations of GlcNAc. GlcNAc is well known for its structural role on the cell surface (Naseem, S.
143 et al. 2012). It is a key component of extracellular matrix of mammalian cells, and participates in wound
144 healing events in metazoan (Janik, M. E. et al. 2010; Hart, G. W. et al. 2011; Konopka, J. B. 2012). The
145 obtained wound healing rates under various GlcNAc concentrations in condition 1 are summarized in
146 Fig. 1. In the figure, except for Fig. 1B, 10 and 50 mM GlcNAc concentrations, all three types of
147 analyses showed relatively good agreement to each other. Our measured closing rates of CHO cells
148 without GlcNAc by all three analysis methods were between 0.01-0.03 mm/hour, which was in the same
149 range as previous reports (Dübe, B. et al. 2001) suggesting our assay was reliable.

150 To note in the experiments of Fig 1B, two of the four spots under 10mM and 50mM GlcNAc showed
151 early closure of the wound. The cause of early closure was likely due to the insufficient removal of
152 extracellular matrix structure. It is known that the inconsistent scratching can cause the variation of the
153 subsequent cell migration if the cell basal membrane or extracellular matrix were not removed
154 effectively (Liang, C.-C. et al. 2007). The absence of early closure in the results of Figs. 1C & 1D
155 supported that the two incidences observed in Fig. 1B were outliers.

156 Interestingly in Fig. 1B, results from analysis I & III were similar to each other across different GlcNAc
157 concentrations regardless of the outliers, whereas only those from analysis II showed large difference at
158 GlcNAc concentrations with abnormal migration (outliers). These results suggested that analysis II is
159 more prone to outlier effects than the other two types of analyses.

160 *Comparison of conditions*

161 In addition to condition 1, we also designed starvation condition 2 to monitor CHO cell wound closing
162 rate under varied GlcNAc concentrations as shown in Fig. 2. The reason was because extracellular
163 GlcNAc was known to slowdown cell migration and proliferation (Runyan, R. B. et al. 1986; Atnip, K.
164 D. et al. 1987; Viola, S. et al. 2008). Our results under condition 1 in Fig. 1 only showed a small drop of
165 closing rate at higher GlcNAc concentration, and ANOVA analysis of results from three sets of repeated
166 experiments (Fig. 1B) across varied GlcNAc concentration did not show significant difference
167 regardless of analysis methods. We wanted to verify whether our analysis can identify any statistically
168 significant rate difference. Towards this end, we designed condition 2, i.e. the starving condition.
169 Condition 2 was different from condition 1 in two ways: first, cells in condition 2 were starved for 24
170 hours before being cultured in treatment media containing different concentrations of GlcNAc; and
171 second, glucose concentration in the conditional 2 media was 1 g/L as compared to 4.5 g/L in condition
172 1. The example images and the computed migration rates by three different methods are shown in Fig. 2.
173 Interestingly, type II analysis again identified an outlier in Fig. 2B under 2mM GlcNAc treatment
174 further validated its sensitivity. We compared the average migration rate in two biological replicates
175 between conditions 1 & 2 (excluding the results with outliers) obtained by sensitive type II analysis for
176 both the control and 10mM-GlcNAc treatment as shown in Fig. 3. A significant reduction of wound
177 healing rate ($P < 0.01$, t test) was observed in condition 2 compared to condition 1 under the same
178 GlcNAc concentration. For GlcNAc effect, no statistical difference was observed between 0 and 10mM
179 GlcNAc in condition 1, but a decrease of rate in GlcNAc was observed in condition 2 ($P: 0.01 \sim 0.02$, t
180 test). A result suggested that our analysis was able to assess the rate change.

181 The decreased wound closing rate of cells under starving condition was congruent with the existing
182 knowledge. Starvation is known to arrest cells at G0/G1 phase of the cell cycle (Pardee, A. B. 1974;
183 Khammanit, R. et al. 2008; Rosner, M. et al. 2011), and the hypoglycemia introduced by the reduced

184 glucose concentration in culture media can impair normal wound healing (Hayashi, J. N. et al. 1991;
185 McDermott, A. M., Kern, T. S., & Murphy, C. J. 1998; Liu, Y. et al. 2003). The reduction of wound
186 healing rate in condition 2 allowed us to disclose the reported GlcNAc effect (Runyan, R. B. et al. 1986;
187 Atnip, K. D. et al. 1987; Viola, S. et al. 2008) that were otherwise confounded by the large variance in
188 the experiments in condition 1.

189

190 CONCLUSION

191 We cataloged three different methods of quantifying the wound closing rate in scratching assay and
192 discovered their differential capacity to tolerate outliers. We hope this study can help other researchers
193 to better analyze the results generated from this simple yet effective assay.

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291 **FIGURE CAPTIONS**

292 **Fig. 1.** A. Images of scratch wound healing over time under different GlcNAc concentrations in
293 condition 1. The vertical lines on the images indicate the boundary of wound at 0 hour. Healing distance
294 was measured relative to this boundary. B-D. Comparison of migration rate computed by three types of
295 analysis in three repeated assays under condition 1, and * labels the outliers. Number of spots used (N)
296 were 4, error bar is the standard deviation. In type III analysis, linear regression analysis r^2 values for
297 migration rates computed for GlcNAc concentration from 0 to 50 mM are all above 0.8.

298 **Fig. 2.** Images of scratch wound healing over time under different GlcNAc concentrations in condition
299 2. The vertical lines on the images indicate the boundary of wound at 0 hour. Healing distance was
300 measured relative to this boundary. B-D. Comparison of migration rate computed by three types of
301 analysis in three repeated assays under condition 2, and * labels the outlier. Number of spots used (N)
302 were 3, error bar is the standard deviation. In type III analysis, linear regression analysis r^2 values for
303 migration rates computed for GlcNAc concentration from 0 to 10 mM are all above 0.9.

304 **Fig. 3.** Comparison of wound healing rates between condition 1 and 2 using analysis type II. Error bar is
305 the standard deviation of two biological replicates (C & D in both Figs. 1 & 2) without outliers.

306

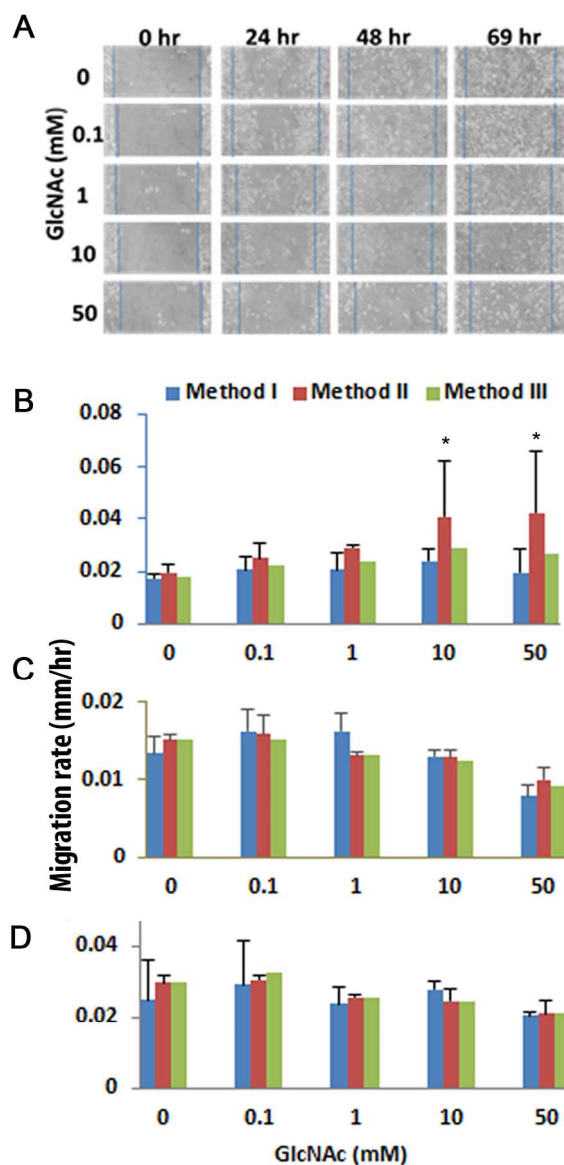


Fig. 1. A. Images of scratch wound healing over time under different GlcNAc concentrations in condition 1. The vertical lines on the images indicate the boundary of wound at 0 hour. Healing distance was measured relative to this boundary. B-D. Comparison of migration rate computed by three types of analysis in three repeated assays under condition 1, and * labels the outliers. Number of spots used (N) were 4, error bar is the standard deviation. In type III analysis, linear regression analysis r^2 values for migration rates computed for GlcNAc concentration from 0 to 50 mM are all above 0.8.

161x322mm (300 x 300 DPI)

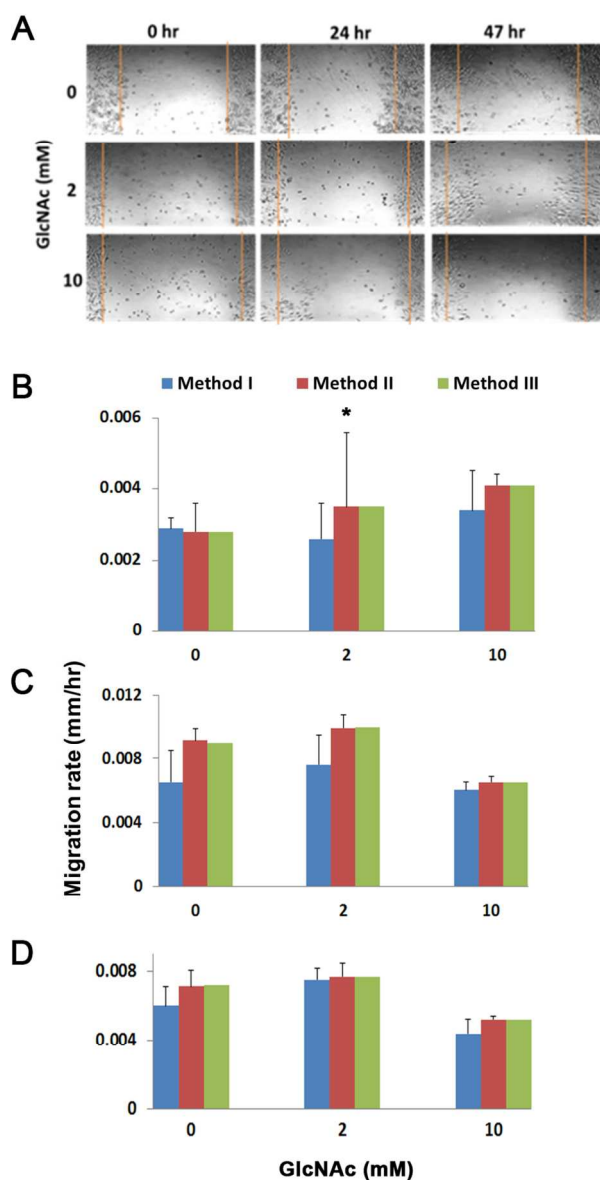


Fig. 2. Images of scratch wound healing over time under different GlcNAc concentrations in condition 2. The vertical lines on the images indicate the boundary of wound at 0 hour. Healing distance was measured relative to this boundary. B-D. Comparison of migration rate computed by three types of analysis in three repeated assays under condition 2, and * labels the outlier. Number of spots used (N) were 3, error bar is the standard deviation. In type III analysis, linear regression analysis r^2 values for migration rates computed for GlcNAc concentration from 0 to 10 mM are all above 0.9.

102x187mm (300 x 300 DPI)

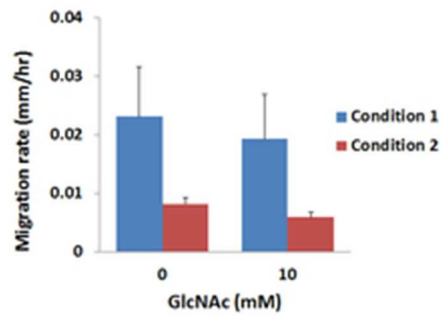


Fig. 3. Comparison of wound healing rates between condition 1 and 2 using analysis type II. Error bar is the standard deviation of two biological replicates (C & D in both Figs. 1 & 2) without outliers.

19x13mm (300 x 300 DPI)