# Silk Fibroin Nerve Guidance Conduit

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10	<u>Title:</u>
11	A new preparation method for anisotropic silk fibroin nerve guidance conduits
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# 110 1.) Abstract

111 In the last decade silk fibroin has been increasingly used in peripheral nerve tissue engineering. 112 Current approaches that aimed to produce silk fibroin based nerve guidance conduits used either 113 aqueous solutions or organic solvents. Here we describe a novel procedure that uses the braided 114 tubular structure of raw *Bombyx mori* silk, subsequently degummed and treated with the ternary 115 solvent CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol, formic acid and methanol to improve its mechanical and chemical 116 characteristics.

117 These conduits are proved to be mechanically resistant and flexible and showed no signs of 118 cytotoxicity. Moreover, they were impermeable for fibroblasts placed on the external surface 119 whereas Schwann cells have readily attached to the luminal surface of the silk tubes. Short term in 120 vivo studies revealed that the conduits implanted in a nerve gap of the rat sciatic nerve did not 121 induce host inflammatory reactions one and three weeks after implantation. On the other hand, 122 limited ingrowth of regenerating axons from the proximal nerve stump into the conduit was observed 123 ten days after implantation compared with an autologous nerve graft. In case of longer survival (12 124 weeks) morphological and functional reinnervation of the distal targets have been achieved. Axon 125 counts distal to the graft revealed significant numbers of axons in both the collagen-filled and empty 126 silk tube groups (1678 ±303 vs 1274 ±146). In contrast, many more fibres were found to regenerate 127 through an autologous nerve graft (6252 ±474). Nerve compound action potentials recorded in 128 animals treated with collagen-filled and empty silk tubes (9,7 ±4,4 vs 6,5 ±3,1) were significantly 129 lower than the ones in animals receiving autologous nerve grafts  $(22,8 \pm 7,5)$ .

The present structure of silk tube conduits is proven to support axonal regeneration in a relatively short nerve gap. However, further improvements and the use of extracellular matrix molecules and Schwann cells is suggested to enable silk tube-based conduits to bridge long distance nerve gaps.

#### 133 2.) Introduction

134 The incidence of peripheral nerve injury in traumatic wounds of the extremities is approximately 2-135 5%. Moreover, tumor resection or congenital malformation may also lead to nerve damage. 136 Consequently, these incidences display a major burden on health care expenses, extensive absence 137 from work and chronic disability . Direct repair of nerves is one clinical option, however, this direct 138 end-to-end coaptation is limited to short-distance gaps. The current clinical gold standard for the 139 repair of longer nerve gaps is the use of autologous nerve grafts . The main advantage of autografts is 140 their morphologically native structure, which provides an ideal guide for axonal regeneration from 141 the proximal to the distal nerve stump. However, autografting carries several disadvantages such as 142 the limited number of donor sites for graft harvesting or the associated donor site morbidity, 143 including loss of nerve function, painful neuroma formation and hyperaesthesia . These negative 144 aspects have led to the search for alternative approaches. Beside nervous tissue, other autologous 145 materials, such as vein grafts or muscles have been used to bridge nerve gaps. However, the use of 146 these substances was both preclinically and clinically unsatisfactory. Recent advances in tissue 147 engineering (TE) have opened new opportunities in peripheral nerve repair. Artificial nerve guidance 148 conduits (NGCs), composed of synthetic or natural polymers, are currently being investigated for 149 bridging nerve defects. The rationale behind using a NGC is to entubulate the nerve stumps to 150 provide a protective micro-environment for the regenerating peripheral nerve. While numerous 151 synthetic and natural biomaterials have been evaluated, both preclinically and clinically, for the 152 bridging of nerve defects, their therapeutic benefits still appear unsatisfactory.

153 In the last years silk fibroin (SF) has attracted considerable interest as a biomaterial suitable for 154 applications in peripheral nerve regeneration. SF has been shown to possess characteristics that favor 155 its use as a NGC, such as mechanical stability, slow degradation rate, biocompatibility and its ability to 156 support nerve regeneration . Apart from biocompatibility, a NGC should act as a barrier for infiltrating 157 fibroblasts and provide mechanical resistance against compression and kinking by the surrounding 158 tissue. The majority of current approaches to create tubular structures use electrospinning, as this process can be well controlled . Other techniques include dipping , gel spinning or molding . All the above-mentioned preparation processes are based on dissolved SF that is then used to create a tubular construct. For the first time, to our knowledge, our study attempts to use textile-engineered raw silk constructs as the starting material for bridging a nerve defect. To improve the mechanical properties favoring its use as a NGC these braided tubular structures are further processed by treatment in a ternary solvent system of a CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol solution and then re-stabilized with formic acid.

166 The aim of this study was to develop a novel method to generate a silk fibroin-based NGC with 167 distinct mechanical and anisotropic properties, and to prove its biocompatibility and functionality *in* 168 *vitro* and *in vivo* in a rat sciatic nerve injury model.

# 169 3.) Materials and Methods

Unless otherwise noted, all reagents were obtained from Sigma (Vienna, Austria) and of analyticalgrade.

172 **3.1)** Design and preparation of silk conduits

173 White raw Bombyx mori silkworm fibers of 20/22 den, 250 T/m, were purchased from Testex AG 174 (Zürich, Switzerland). The tubular silk conduit was fabricated in cooperation with a commercial 175 braiding company (Edelrid GmbH, Isny/Allgäu, Germany). Six single silk fibers form a twisted yarn, 176 representing the raw material for the commercial braiding machines. Figure 1 shows the tubular 177 structure designed from six intertwined twisted yarns. The resulting raw silk conduit was degummed 178 by boiling in 0.2 M boric acid in a 0.05 M sodium borate buffer (pH = 9.0). Batches of 2 g of silk 179 conduits were boiled twice in 500 mL of degumming solution for 45 min, with an intermittent 180 exchange of the degumming solution. After degumming, scaffolds were thoroughly washed in ddH<sub>2</sub>O 181 and air-dried before further processing (Fig. 1).

The degummed SF tubes were placed on an ABS (acrylonitrile butadiene styrene) rod of 2 mm in diameter and dipped in a boiling solution of the ternary solvent calcium chloride/distilled water/ethanol (CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol) in a molar ratio of 1:2:8 for 20 seconds. Immediately after etching the outer surface, the tubes were dipped in 100% of formic acid (FA) at room temperature for 20 seconds. The tubes were then fixed in methanol for 20 minutes and subsequently washed thoroughly with ddH<sub>2</sub>O (Fig. 1). The tubes were dried under laminar airflow and sterilized by autoclaving prior to use.

189 **3.2.)** Endurance and fatigue tests

190 To test the elasticity of the SF-NGC in comparison to the unprocessed initial tubular SF-scaffold, a 191 custom-made compression test machine was built (Suppl. Fig. 1). This device was designed for 192 repeated compression of a test specimen with constant maximum pressure. Starting from the top

193 position, a piston is moved downwards by a servo motor (Modelcraft RS2 MG/BB standard servo, 194 Conrad Electronic SE, Hirschau, Germany) at a speed of approximately 5 mm/s linearly until it touches 195 the probe. The piston continually stresses the probe until a predefined force threshold is reached. A 196 force sensitive resistor (Strain gauge FSR 151, Interlink electronics, Camarillo, CA, USA), integrated 197 into the piston, acts as a sensor and a voltage divider. The resistance, and thus the applied force, is 198 constantly sampled at 50 Hz sampling frequency using the built-in 10 bit AD-converter of the 199 microcontroller (Arduino Duemilanove Controller Board with Atmega 328 µC, Atmel Munich GmbH, 200 Garching/Munich, Germany). The system was calibrated using a laboratory scale and operates with a 201  $\pm 5$  g accuracy (corresponding to 0.98 MPa). Once the threshold is reached, the piston is returned to 202 the top position, where it remains for a period of time set by the user.

203 In order to evaluate the effect of the various treatment components four types of tubes have been 204 evaluated (Fig. 2). The first type was produced by degumming of the raw tube followed by methanol 205 treatment. The second and third types were created either by CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol- or formic acid-206 treatment, both fixed with methanol. The fourth type of tube was produced as described above, 207 combining all sequential treatments (Fig. 1).

Prior to testing, respective samples were hydrated in PBS overnight. For testing, the conduits were fixed in a Sylgard-plated Petri dish (Sylgard® 184, Dow Corning Europe S.A., Seneffe, Belgium) and covered with PBS. The mechanical test regimen consisted of 1,000 cycles of compression (300 ms duration and 58.8 MPa load) and release. After testing the tubes were air-dried overnight at room temperature and an approximately 1 mm thick slice was cut out from them at the impression site for morphological analysis. The deformity remaining after the compressions was assessed by scanning electron microscope analysis.

## 215 **3.3)** Scanning electron microscope analysis

Samples were fixed in 2.5% glutaraldehyde in cacodylate buffer overnight at room temperature, then washed and dehydrated through graded ethanol changes followed by treatment with hexamethyldisilazane, and allowed to air-dry in a fume hood. Coating with Pd-Au was performed through the use of a Polaron SC7620 sputter coater (Quorum Technologies Ltd. East Grinstead, United
Kingdom) and the samples were examined under a JEOL JSM-6510 scanning electron microscope
(JEOL Ltd., Tokyo, Japan) at 15 kV.

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#### **3.4) Cell culture experiments**

224 NIH/3T3

NIH/3T3 cell line was purchased from ECACC (European Collection of Cell Cultures, UK). NIH/3T3 cells
 were cultured in DMEM containing 10% fetal calf serum (FCS, Lonza Ltd., Basel, Switzerland)
 supplemented with 2 mM L-glutamine, 100 U/mL penicillin and 0.1 mg/mL streptomycin in plates
 coated with 0.2 % gelatin solution.

#### 229 Schwann cells (SCs)

Schwann cells were isolated from rat sciatic nerves as described by Kaekhaw et al. All animals were housed in the facilities of the Ludwig Boltzmann Institute for Experimental and Clinical Traumatology in a temperature-controlled environment. Animals were provided with food and water ad libitum. All experimental protocols were approved by the City Government of Vienna, Austria, in accordance with the Austrian law and Guide for the Care and Use of Laboratory Animals as defined by the National Institute of Health.

Five adult male Sprague-Dawley rats were deeply anesthetized by inhalation of 3.5% isoflurane and euthanized with 110 mg/kg BW ketamine hydrochlorid (Ketasol®; Dr. E. Graeub AG, Berne, Suisse) and 12 mg/kg BW xylazine (Rompun® 2 %, Bayer AG, Vienna, Austria) intraperitoneally. The sciatic nerves were dissected free of connective tissue and minced after removing the epineurium. Nerve fragments were incubated with 0.05% collagenase for 1 hour at 37°C, subsequently filtered through a 40 µm cell strainer and centrifuged at 400g for 6 minutes. After washing the cell pellet in DMEM containing 10% FCS, the pellet was resuspended in Schwann cell culture medium consisting of 243 DMEM-D-Valine (PAA, Austria) supplemented with 10% FCS, 2 mM L-glutamin, 1% antibiotics, N2 244 supplement, 10  $\mu$ g/ml bovine pituitary extract and 5  $\mu$ M forskolin. Cell suspension was seeded on 6-245 well plates coated with poly-l-lysin and laminin.

246 Schwann cells were seeded on the inside wall of the SF-NGC at a concentration of 10<sup>5</sup> cells/mL. Three 247 groups were set: in group 1 only degummed (boric acid treatment) silk tubes were used, in group 2 248 the silk tubes were further treated with  $CaCl_2$  (degumming +  $CaCl_2$ ), whereas group 3 tubes received a 249 full treatment completed with formic acid (degumming +  $CaCl_2$  + FA). As a final step all tubes were 250 fixed with methanol. After 2 hours, cells were supplied with Schwann cell culture medium. Schwann 251 cell attachment to the inner wall structure of the SF-NGC was evaluated after 48 hours with Calcein 252 AM staining (Invitrogen, Vienna, Austria). In order to evaluate whether the viability of Schwann cells 253 attached to the various types of tubes a propidium iodide staining was performed.

# **3.5) Cell permeability**

255 A cell migration assay was designed to verify the cell impermeability of the SF-NGC. A 100 µl fibrin 256 clot (Tisseel, Baxter International Inc., Deerfield, IL, USA) containing PDGF-AA (Peprotech Austria, 257 Vienna, Austria) was used to induce cell migration. Prior to the addition of 250 Units/mL of thrombin 258 to induce polymerization, 10 ng of PDGF-AA was thoroughly mixed in fibrinogen. The resulting solid 259 fibrin structure provides a slow release of PDGF-AA. This fibrin clot was then placed inside the 260 investigated tubes and the assembled constructs were pinned in silicone-coated (Sylgard® 184, Dow 261 Corning Europe S.A., Seneffe, Belgium) 12-well plates. Besides allowing the possibility of fixing the 262 constructs to a Petri dish, Sylgard<sup>®</sup> 184 is known to discourage cell adhesion as a result of its 263 hydrophobic character and therefore prevents cell migration from one clot to the other over the 264 surface of the cell culture plate. Thus, the cells had only their way to move from one clot to the other 265 through the wall of the SF-NGC and thereby we could investigate the cell permeability of the SF-NGC. A second 100 µl fibrin clot containing 2.5x10<sup>5</sup> NIH/3T3 fibroblasts was placed on top of the tube. For 266 267 this clot, cells were suspended in fibrinogen and then the polymerization was initiated with 2 units/mL thrombin. The generated loose fibrin structure allows fibroblasts to migrate from the clot towards the chemotactic stimulus. As a positive control, the fibrin clot with cells was separated from the clot containing PDGF-AA using the nylon mesh of a cell strainer with a 100 µm pore size. (Becton Dickinson Ltd., Schwechat, Austria). The constructs were completely covered with cell culture medium. On day 6, cell migration was evaluated by staining the PDGF-AA-containing fibrin clot with Calcein AM (Invitrogen, Vienna, Austria).

## **3.6)** Cytotoxicity assay

275 To test cytotoxicity of the prepared SF-NGC, 1 g of dissected material of SF-NGC was immersed in 5 276 mL cell culture medium for at least 24 h. In parallel, 0.2x10<sup>5</sup> Schwann cells per well were seeded onto 277 24-well plates. Then the medium containing leach-out products from the dissected material was 278 filtered (0.22 µm, Rotilabo, Karlsruhe, Germany) and used to change media in the cell cultures. 279 Standard culture medium was used as a negative control. After 72 h, cell culture medium was 280 aspirated and the respective cell culture medium containing 650 mg/mL MTT [3-(4,5-dimethylthiazol-281 2-yl)-2,5-diphenyltetrazolium] bromide was added to each well. After 1 h of incubation at 37° C and in 282 5% CO<sub>2</sub>, medium was aspirated and MTT formazan precipitate was dissolved in DMSO by shaking 283 mechanically in the dark for 20 min. Aliquots of 100 µl of each sample were transferred to 96-well 284 plates. The absorbance at 540 nm was read immediately on an automatic microplate reader (Spectra 285 Thermo, TECAN Austria GmbH, Austria). Optical density (OD) values were corrected for unspecific 286 background.

#### **3.7)** Animals and surgery

All animals were housed in the facilities of the Ludwig Boltzmann Institute for Experimental and Clinical Traumatology in a temperature-controlled environment. Animals were provided with food and water ad libitum. All experimental protocols were approved by the City Government of Vienna, Austria in accordance with the Austrian law and Guide for the Care and Use of Laboratory Animals as defined by the National Institute of Health. 293 A total of 28 female Sprague-Dawley rats (Animal Research Laboratories, Himberg, Austria), weighing 294 between 350 – 450 g were used in the experiments. Eighteen animals were randomly assigned into 295 three different treatment groups: autologous grafting (n = 6), SF-NGC (n = 6) and collagen-filled SF-296 NGC (n = 6) for 12 weeks observation. The animals were weighed and anesthetized in a fume box 297 with 3.5% isoflurane (Forane<sup>®</sup>, Abbott, Vienna, Austria) at a flow rate of 800 mL/min. Subsequent 298 anesthesia throughout the surgical procedure was maintained using 2.5% isoflurane via a nosepiece. 299 At right mid-thigh level, the surgical area was shaved and disinfected with povidone-iodine 300 (Betaisodona<sup>®</sup>, Mundipharma, Vienna, Austria). All the following surgical procedures were carried out 301 under an operating microscope (Leica M651, Leica Microsystems, Vienna, Austria). The sciatic nerve 302 was exposed and an 8 mm segment of the sciatic nerve was excised resulting in a 10 mm gap. In the 303 autologous grafting group, the excised 8 mm segment of the sciatic nerve was rotated 180° and then 304 sutured to the proximal and distal stumps using Ethilon 8/0 epineurial sutures (Ethicon-Johnson & 305 Johnson, Brussels, Belgium). In both SF-NGC groups, the conduit was implanted by insertion of the 306 proximal and distal nerve stumps into the 12 mm tube and coaptated to the conduit by two 307 epineurial sutures. In the SF-NGC-collagen group, the lumen of the SF-NGCs was filled with 8 308 microliters of collagen solution (Type I, 2.5 mg/ml, Millipore, Vienna, Austria). Afterwards the wound 309 was closed in anatomical layers. The analgesic treatment was administered in form of 0.75 mg/kg 310 bodyweight (BW) meloxicam (Metacam<sup>®</sup>, Boehringer Ingelheim, Ingelheim/Rhein, Germany) and 1.25 311 mg/kg BW butorphanol (Butamidor®, Richter Pharma AG, Wels, Austria) immediately before the 312 surgical procedure and for two days thereafter.

To monitor the possible adverse effects against the implanted SF-NGCs and the initial axon outgrowth into these tubes, animals with short survival times (7, 10 and 21 days, n=2, 6, 2, respectively) were sacrificed.

316 **3.8)** Tissue sampling, perfusion and immunohistochemistry

Twelve weeks after surgery the animals were deeply anesthetized by inhalation of 3.5% isoflurane and euthanized with 110 mg/kg BW ketamine hydrochlorid (Ketasol®; Dr. E. Graeub AG, Berne, Suisse) and 12 mg/kg BW xylazine (Rompun® 2 %, Bayer AG, Vienna, Austria) intraperitoneally. Animals were perfused transcardially with 4% paraformaldehyde in a 0.1 M phosphate buffer (pH 7.4). The autologous transplants or the implanted SF-NGC were harvested under the operating microscope along with the proximal and distal nerve stumps.

323 The nerve grafts or conduits (n=6 per group), removed from perfusion-fixed animals, were 324 immersion-fixed for 6 h in 4 % paraformaldehyde and then cryoprotected in 30% sucrose in PBS. 325 Parallel cryostat sections were cut on a Leica 1850 cryostat (Leica Microsystems, Vienna, Austria) and 326 sections were either stained with cresyl violet or processed for 200 kD neurofilament 327 immunohistochemistry. Sections were treated with a 1% milk powder solution and then incubated 328 with an anti-200 kD rabbit neurofilament antibody (Abcam Ltd, UK, Lot. No.: ab8135, rabbit, 1:1000) 329 or with biotinylated Griffonia (Bandeira) simplicifolia lectin B<sub>4</sub> (GSA-B<sub>4</sub>, 1:200, Vector Labs, 330 Burlingame, CA, USA) overnight at 4°C. The sections were then processed for incubation with an anti-331 rabbit Alexa 546 or secondary antibody (1:400) or with streptavidin Alexa 488 (to visualize 200 kD 332 neurofilament or Griffonia simplicifolia isolectin, respectively) for 2 h at room temperature, protected 333 with a coverslip and investigated under an epifluorescence microscope (Olympus FX-50, Olympus Ltd, 334 Tokyo, Japan).

The sciatic nerve segment distal to the graft was transferred into a 2.5% phosphate-buffered glutaraldehyde solution after perfusion and immersion fixed for 24 h. Remnants of fixative were carefully washed out from the nerve, and the tissue was treated in 1%  $OsO_4$  in PBS (Agar Scientific, Stansted, UK) for 1 h, dehydrated in a graded ethanol series and propylene oxide and then embedded in Durcupan (Fluka, Switzerland). Semithin sections (0.4 µm thick) were cut 2 mm distal to the graft on a Leica Ultracut-R ultramicrotome and stained according to Rüdeberg .

#### 341 **3.9)** Quantification of the Schwann cell-like cell densities

342 To quantify the cellular area on the luminal surface of tubes treated to various extents we randomly 343 selected three (500 µm x 500 µm) area and photographed Schwann cell-like cells at a 10-fold primary 344 magnification, using a Olympus BX50 epifluorescence microscope. Using ImageJ Software (NIH), we 345 measured the relative density of Calcein AM stained Schwann cell-like cells. The 346 background/autofluorescence of unstained samples as reference intensity was then subtracted from 347 the intensity of Calcein AM stained samples. The cellular area occupied on the total surface divided 348 by the total area and multiplied by 100. Furthermore, automatic thresholding was performed for 349 each image by using the NIH ImageJ software to determine the threshold for the specific signal.

#### 350 **3.10)** Semiautomated gait analysis (CatWalk<sup>™</sup>)

351 To evaluate the functional recovery of the animals we used the Catwalk (version 7.1, Noldus, 352 Wageningen, The Netherlands) gait analysis system. This method allows an objective quantification of 353 multiple static and dynamic gait parameters . The animals were pre-trained to use the runway for 3 354 weeks before surgery. The animals were tested postoperatively once a week from week 4 to week 12 355 for all groups. Various parameters for locomotor functional recovery including print area, maximum 356 intensity, stance time and duty cycle were determined. The intensity of the right hind paw was 357 expressed as a percentage of the contra-lateral left hind paw. The Catwalk experiments were 358 performed in a blinded fashion.

#### 359 **3.11) Electrophysiology**

At the end of the defined regeneration period, electrophysiological analysis (NeuroMax-XLTEK, Oakville, ON, Canada) was carried out before sacrificing the animals. Stimulation electrodes were placed 2 mm proximal and 2 mm distal to the graft for calculation of the nerve conduction velocity. A needle electrode was placed as a recording electrode into the tibialis anterior muscle, and the sciatic nerve was stimulated for 0.05 ms first proximally and then distally to the graft, so as to achieve the supramaximal stimulation amplitude. The compound action potential, the amplitude and the nerve

#### 368 **3.12) Statistical analysis**

369 Statistical analysis was performed using Graph Pad Prism software (Graph Pad Software Inc., San 370 Diego, CA, USA). Normal distribution of data was tested with the Kolmogorov-Smirnov test. One-way 371 ANOVA followed by Tukey's post hoc test was used to assess statistical significance and p-values 372 below 0.05 were considered statistically significant. All graphs in this study are shown as mean ± 373 standard deviation (SD). To evaluate the functional recovery of the animals we used the Catwalk 374 (version 7.1, Noldus, Wageningen, The Netherlands) gait analysis system. This method allows an 375 objective quantification of multiple static and dynamic gait parameters . The animals were pre-376 trained to use the runway for 3 weeks before surgery. The animals were tested postoperatively once a 377 week from week 4 to week 12 for all groups. Various parameters for locomotor functional recovery 378 including print area, maximum intensity, stance time and duty cycle were determined. The intensity 379 of the right hind paw was expressed as a percentage of the contra-lateral left hind paw. The Catwalk 380 experiments were performed in a blinded fashion.

381

#### **4.)** Results

#### 383 **4.1)** Structural changes during processing of silk tubes

384 Figure 1 A-C shows the raw SF-NGC consisting of braided single silk fibers. After degumming, the silk 385 tube was treated with CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol and subsequently with FA for 20 seconds each, followed by 386 fixation with methanol. This treatment results in a fusion of the outer single silk fibers to a closed 387 layer with a varying thickness ranging from 40 to 75 µm (Fig. 1D-F). Treatment with 388 CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol shorter than 20seconds results in thinner outer layer (Fig. 1G). In contrast, the 389 luminal wall of the tube which was not treated with various solvents, preserves its original braided 390 structure (Fig. 1F). Figure 2 shows the time-dependent effects of CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol and FA on the SF 391 fibers. SF fibers solely treated with CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol dissolve and precipitate, especially after 40 392 seconds. In contrast, FA-treatment alone disorganizes the original braided structure in a time-393 dependent manner.

#### **4.2)** Cytotoxicity and viability assays

395 To investigate whether cytotoxic residuals were left in the SF-NGCs during the preparation procedure 396 a MTT assay was performed. Dissected pieces of the SF-NGCs and the unprocessed raw silk scaffold 397 were incubated in cell culture media, to remove cytotoxic molecules from the constructs. Treatment 398 of cultured Schwann cells with these wash-out media resulted in no significant difference in the cell 399 viability of Schwann cells in any treatment group (Fig. 3A). Next we tested the viability and adhesion 400 pattern of Schwann cells cultured on the luminal surface of the silk tubes processed to various 401 extents during the SF-NGC preparation procedure. Treatment with CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol and the full 402 treatment procedure including incubation with FA induced significantly more Schwann cells to adhere 403 to the luminal surface of the silk tubes than degumming only (Fig. 3B-F). On the other hand, 404 propidium iodide staining did not reveal any apoptotic Schwann cells on the luminal surface of these 405 cultured silk tubes (Fig. 3C).

406 **4.3**) Endurance test

407 Implanted silk tubes have to resist to external pressure originating from the surrounding tissues and 408 organs during movements. To verify whether ready-to-use SF-NGCs are able to withstand external 409 forces, mechanical compression tests were performed with a custom-made system (Fig. S1). 410 Degummed tubes were seriously challenged during the compression test, they remained compressed 411 and flat after 1000 cycles of compression (Fig 3G). FA or CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol alone improved the 412 elastic properties of the SF-NGCs resulting in a moderate preservation of the lumen, whereas full 413 treatment (degumming, CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol followed by FA treatment) helped improving the elastic 414 properties of these SF-NGCs to become resistant to external forces (Fig. 3G).

## 415 **4.4) Cell permeability**

A cell migration assay was applied to test the impermeability of the SF-NGC wall to invading cells. The test was based on the chemotactic properties of PDGF-AA embedded in a fibrin clot (Fig. 4A). The efficacy of NIH/3T3 fibroblasts to penetrate and pass through the wall of the silk tube was tested. Degummed silk tube walls were suitable structures for the fibroblasts to migrate through their braided structure similar to positive controls, where the cells were able to pass through the mesh of a cell strainer (100 μm pore size) (Fig. 4B-C). In contrast SF-NGC with a completely closed outer surface did not support the penetration of fibroblast into the wall of the conduit (Fig. 4C).

#### 423 **4.5)** Short term in vivo studies - general observations

424 The implanted SF-NGCs were explored and thoroughly checked under the operating microscope one 425 and three weeks after surgery. Figure 5A shows the proximal and distal nerve stumps coaptated to 426 the SF-NGC by two epineurial sutures at the time of surgery. One week after implantation, visual 427 inspection revealed that the SF-NGC did not exhibit substantial degradation (Fig. 5B). Furthermore, 428 no signs of inflammatory reaction or neuroma formation at the coaptation sites could be detected. 429 The entire outer surface of the implanted graft was covered by a thin layer of connective tissue. 430 Interestingly, the proximal as well as the distal end of the implanted SF-NGC shows a partial 431 integration of the nervous tissue with the SF-NGC (Fig. 5B). Moreover, the thin layer of connective tissue on the surface of the SF-NGC contained small blood vessels (Fig. 5C-D). At 3 weeks after
implantation the lumen of the SF-NGC was completely filled with regenerated tissue (Fig. 5E). Careful
dissection of the SF-NGC (Fig. 5F) revealed a complete reconnection of the proximal and distal nerve
stumps.

#### 436 **4.6)** Axonal regeneration

437 Our results showed that a short gap of 8 mm in the rat sciatic nerve could be bridged by implanting 438 an SF-NGC in the gap. To compare the axon growth promoting capacity of the three conduits used in 439 the study we looked at the axon outgrowth from the proximal nerve stump into the conduits ten days 440 after grafting by using neurofilament staining. Autologous nerve grafts were already populated with 441 regenerated axons along their whole length at this time-point and the axons approached the distal 442 coaptation site (Fig. 6A). In contrast, the silk tubes were able to promote only limited outgrowth of 443 the axons at this stage. The regenerating axons have grown to a distance of approximately 2 mm in 444 both conduits (1.7 and 1.8 mm in empty tubes and 2 and 2.1 mm in collagen-filled tubes, n=2 in each 445 group) without considerable difference between them (Fig. 6B, C). The autologous nerve grafts 10 446 days after postoperatively are well vascularized (Fig. 6A). A similar range of vascularization of the silk 447 tubes could be observed on day 10 after surgery. No considerable number of macrophages were 448 seen in the implanted silk tubes (Fig. 6B,C).

449 Three months after transplantation the course of regenerated axons throughout the lumen of the 450 implanted SF-NGCs and autologous nerve grafts was clearly visible (Fig. 6D-F). Although the axon 451 bundle was present in the empty silk tubes the immunohistochemical analysis did not reveal a 452 significant staining pattern for neurofilament 200kD in the distal portion of the tubes. On the other 453 hand, myelinated axon counts showed significantly less myelinated axons in the empty SF-NGC as 454 well as the collagen-filled SF-NGC compared to the autologous nerve graft (empty SF-NGC: 1274 455 ±146, collagen-filled SF-NGC: 1678 ±303, autologous nerve graft: 6252 ±474; Fig. 7). Accordingly, 456 filling the silk tubes with collagen did not influence the short and long term regeneration of axons.

#### 457 **4.7)** Functional recovery – Catwalk analysis

458 Twelve weeks after surgery the functional recovery parameters (Fig. 8A-D) including mean stance 459 time, mean print area, mean duty cycle and the mean maximally exerted intensity of the right hind 460 limb were evaluated. In three out of four parameters (excluding limb print area) there was a 461 significant difference between the extent of recovery of the autologous nerve grafts compared to the 462 empty silk tube, whereas in the case of duty cycle the animals receiving an autologous nerve graft 463 performed significantly better in comparison to both silk tube groups. A minor, statistically not 464 significant difference was found between the two silk tube groups in case of all parameters (Fig. 8A-465 D). It should be noted that animals treated with autologous nerve grafts displayed functional 466 parameters approaching but never closely reaching the pre-training values.

### 467 **4.8) Electrophysiology**

468 The results of the electrophysiological analysis strongly correlate with the functional data described 469 above. Electrophysiological recordings were carried out twelve weeks after transplantation. 470 Compound nerve action potential (CNAP) and nerve conduction velocity (NCV) values were 471 significantly improved in the autologous nerve grafting group (CNAP: 22,8 ±7,5; NCV: 49,2 ±14,2) 472 compared to both silk tube groups (empty SF-NGC, CNAP: 6,5 ±3,1; NCV: 23,9 ±6,6. Collagen-filled SF-473 NGC, CNAP: 9,7 ±4,4; NCV 25,9 ±7,3; Fig. 9). No difference could be detected between the groups 474 receiving the various silk tubes, although the animals with empty silk tubes displayed slightly 475 impaired electrophysiological data.

#### 476 5.) Discussion

In this study we have investigated the mechanical properties and biocompatibility of a novel
nerve guidance conduit manufactured from a braided tubular structure of silk fibroin fibers.
Moreover, the ability of this novel conduit to bridge a peripheral nerve gap and support the
regeneration of injured rat sciatic nerve axons has been tested.

481 The nature of the aggressive chemical treatment to transform a braided structure to a 482 mechanically resistant, flexible tube, non-permeable for externally invading cells made it 483 necessary to investigate cytotoxicity and cellular viability prior to in vivo implantation. The 484 mixture of CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol dissolves native silk fibers , while methanol induces the formation 485 of  $\beta$ -sheets, leading to a crystalline-like structure of the silk fibroin . Formic acid functions as a 486 solving and crystallizing agent. Um et al. reported that formic acid induces an ordered structure 487 and molecular arrangement. As the end result, this combination treatment resulted in a 488 homogenous crystalline-like outer layer of the nerve conduit wall. In addition, by controlling the 489 incubation times we were able to design the structure and thickness of the outer crystalline layer. 490 All together the treatment steps resulted in the generation of a mechanically stable tubular 491 conduit.

492 Apart from the favorable mechanical properties the question remained whether this construct 493 maintained its biocompatibility, was able to prevent invasion of connective tissue cells from the 494 environment and provided a supportive luminal surface for proliferating Schwann cells. According 495 to our findings these conduits fulfilled all these requirements.

Indeed, our short term in vivo studies have provided evidence that the implanted silk tube conduits were able to integrate into the host environment without generating significant inflammatory reactions and on the other hand could successfully bridge an eight millimeter long nerve defect. These features may enable this type of silk tube conduit to act as a strong candidate for nerve repair. From a practical point of view, the best available nerve conduit is an autologous

nerve graft, frequently regarded as the gold standard for experimental and clinical use of nerve
grafting. There is, however, an urging need for nerve conduits in the clinical use when autologous
nerve grafts are not available. These conduits should preferably fulfill a number of requirements:
they should be biocompatible, long enough to bridge large defects, able to support Schwann cell
proliferation followed by rapid axonal regeneration and accept external vascular ingrowth, while
they resist to invasion of external cell populations especially that of fibroblast.

507 It is evident that a chemically inert silk tube bears several of the above mentioned features still is 508 unlikely to guide significant number of degenerating axons over long distances. The longest 509 distances that can still be bridged by artificial or natural conduits are frequently called "critical 510 gap", and they are thought to range between 2 and 6cm in humans (38-40). Gaps longer than 511 6cm can only be reconnected by using autologous nerve grafts or nerve allografts (40,41). The 512 intriguing question is raised how nerve conduits should be altered in order to make them suitable 513 for grafting in long nerve defects. The silk tube conduit presented in this study is likely to undergo 514 a number of further modifications to suit these requirements. It could be argued that by making 515 the silk tubes permeable for growing vessels and modifying their luminal environment in order to 516 foster axonal regeneration the silk tube conduits would be transformed into structures with 517 features closely resembling peripheral nerve grafts. Such conduits should carry features normally 518 present in an intact or freshly degenerated peripheral nerve e.g. the presence of axonal growth 519 promoting cells (like Schwann cells or Schwann cell like cells) (43-45) and the extracellular matrix 520 compounds produced by these cells. Recently advances in experimental bridging of larger nerve 521 defects have been made including the strategies outlined above. We suggest that the next 522 generation of biologically inert silk tube conduits could possibly include treatment with the 523 peripheral nerve specific extracellular matrix molecules fibronectin and laminin along with 524 sequential transplantation of Schwann cells or Schwann cell like cells into the conduit.

- 525 These novel methodological approaches may open new horizons in the field of peripheral nerve
- 526 regeneration and repair and may contribute to better treatment opportunities of large human
- 527 nerve defects.

# 529 6.) Conclusion

530 In this study we describe the production of a novel nerve guidance conduit based on raw silk 531 textile tubular structures. The chemical treatment of the raw silk tube resulted in a 532 biocompatible and mechanically stable conduit which was able to bridge relatively short gaps in 533 the rat sciatic nerve. It can be concluded that these silk tube conduits are subject to further 534 studies and modifications in order to produce cellularised bioartificial conduits that would 535 support long distance nerve regeneration.

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543 8.) Disclosure statement

No

544

competing

financial

interests

exist.

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642 Figure legends

#### 643 Figure legends

644 Figure 1. Overview of the preparation method of the silk fibroin (SF) nerve guidance conduit (NGC). (A) shows a scheme of 645 the treatment steps that modify the tubular braided structure based on SF fibers and generate a NGC. Scanning electron 646 micrographs of the raw tubular structure of SF-based NGCs are shown before (B; C indicates the initial braiding design of the 647 raw unprocessed tube) and after (D-F) degumming and subsequent treatment steps (1<sup>st</sup> treatment step: degumming in 648 boric acid; 2<sup>nd</sup> treatment step: CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol for 20 sec, >70°C; 3<sup>rd</sup> treatment step: formic acid [FA] for 20 sec at room 649 temperature and a final fixation step with methanol [MeOH], for 20 min at room temperature). E: cross-sectional view of SF-650 NGC, D) Lateral view of SF-NGC, F) enlarged view of the framed area in E). In G) the SF structure was only treated for 10 651 sec in CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol and FA, resulting in a thinner outer layer.

Figure 2. Effects of the treatment steps on the surface of the silk fibroin (SF) fiber based nerve guidance conduits (NGC). Panels show scanning electron micrographs of the degummed samples treated with the single treatments of either calcium chloride, ethanol and water in a molar ratio of 1:2:8 (CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol) or formic acid and the the effect of the combined treatment (CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol + FA), respectively. In the case of the combined treatment, SF constructs were treated with CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol and FA subsequently for 20 sec each, resulting in a total treatment time of 40 sec. For comparison the single step treatments were carried out for 40 sec.

658 Figure 3. Results of the cytotoxicity, Schwann cell viability and compression tests of the various conduits. (A) The primary 659 Schwann cells cultured in the leach-out medium of either fully treated or degummed silk structures did not show signs of 660 cytotoxic damage. (All data are means ± SD of 8 independent experiments) (B-E) Fluorescent micrographs of Schwann cell-661 like cells showed good adherence and viability on the inside of the silk fibroin nerve guidance conduits, where the 662 propidium iodide staining (in C) revealed no dead cells on the internal wall of the tubes. (F) Schwann cell-like cell densities 663 (cellular area occupied on the total surface) on the luminal surface of tubes treated to various extents. Note the increasing 664 attachment with the treatment steps. Asterisks indicate significant (p<0.005) difference between the tubes receiving 665 degumming and the tubes treated further. (G) Compression test by using a custom-made test system in order to prove the 666 improved elasticity of modified degummed tubular structures show that the CaCl<sub>2</sub>/H<sub>2</sub>O/ethanol-FA-MeOH modification is 667 most resistant to mechanical compression load. Red circles indicate the initial lumen (2 mm in diameter). Scale bars indicate 668 500 µm.

Figure 4. Results of the cell permeability assay using a fibrin clot containing NIH/3T3 fibroblasts and a second clot loaded with PDGF-AA as chemoattractant (A) in the various experimental groups (B). Fibroblasts passed through different spacers, including a cell strainer mesh of 100 μm pore size (C, positive control, panel top row) and the unprocessed tubular silk structure (C, panel middle row), but were not able to penetrate the applied SF-NGC (C, panel bottom row). Columns 1, 2, and 3 represent the view from the initial cell containing fibrin clot, the opposite side of the used spacer and the initial 674 fibrin clot containing PDGF-AA, respectively. All samples were stained for residual or invaded cells with Calcein AM staining.
675 Scale bar is 500 μm.

Figure 5. Integration of the silk-fibroin conduit in the defect site. (A) Photograph of a silk-fibroin nerve guidance conduit (SF-NGC) immediately after implantation between the sciatic nerve stumps. (B) Proximal side of the SF-NGC 1 week after implantation. Arrow indicates a thin layer of newly formed connective tissue capping the end of the SF-NGC. (C) Area of peripheral nerve surgery (1 week survival), showing small blood vessels in the thin layer of connective tissue around the conduit. (D) Enlarged photograph of the framed area in C. Note the fine network of blood vessels. (E) At 3 weeks after implantation the lumen of the SF-NGC was completely filled with newly formed tissue. (F) Dissection of the SF-NGC in E revealed a reconnection of the distal and proximal nerve stumps.

683 Figure 6. Axonal regeneration and vascular ingrowth in the various experimental groups. (A) Regenerating axons (green) 684 reach the distal coaptation site (indicating by broken lines) in the autologous nerve grafts 10 days postoperatively and the 685 nerves are also well vascularized as shown with the GSA-B4 lectin histochemistry (red). Note the lack of macrophages in 686 these grafts. (B and C) The regenerating axons extend approximately 2 mm into the silk tubes with a similar range of 687 vascularization on day 10 after surgery. No considerable number of macrophages were seen in the implanted silk tubes. 688 Broken lines indicate the proximal coaptation zone. (D) Representative examples of axon growth through various conduits 689 12 weeks after surgery. Note the robust regeneration via the autologous nerve graft, although numerous axons are able to 690 regenerate through the silk tube-based conduits, too. Axons were stained via neurofilament 200 kDa immunostaining, 691 which failed to label the regenerating axons in the distal one third of the empty silk tube (asterisk).

Figure 7. Numbers of myelinated axons in the various experimental groups, 12 weeks after implantation. Arrows point to well myelinated axons in the distal stumps (A-D). Note the significant differences between the myelinated axon numbers found in autologous nerve graft and the silk tube-based conduits (E). All data are means of 6 animals  $\pm$  SD. \* indicates significant difference of p<0.005.

Figure. 8 Quantitative CatWalk gait analysis of locomotor functional recovery 12 weeks after implantation, including print area, intensity exerted at maximum floor contact area, stance duration (time) and duty cycle of the operated right hind limb relative to the unoperated left hind limb. Pretraining data show intact vales recorded one week before surgery. All data are means of 6 animals ± SD. \* indicates significant difference (p<0.005) between the autologous grafting and the empty silk tube groups, whereas \*\* indicates significant difference between the autologous grafting and both silk tube groups.

Fig 9 Electrophysiological analysis of the effect of axonal regeneration through the various conduits. The compound nerve action potential area (CNAP) and nerve conduction velocity (NCV) values were significantly improved in cases of autologous nerve grafts compared to silk conduits. All data are means of 6 animals  $\pm$  SD. \* indicates significant difference of p<0.005 between the autologous grafting and both silk tube groups. Supplementary Fig. 1 Custom-made compression testing machine. The test sample (1) is mounted on a silicone mat that fits in a petri dish via pins. A piston (2) is moved downwards via a servo motor (3) at a speed of approximately 5 mm/s in a linear manner until it touches the probe. The piston continually stresses the probe until a predefined force threshold is reached. A force sensitive resistor (4), which is integrated into the piston, works as a sensor and is part of a voltage divider. The resistance and thus the applied force is constantly sampled at 50 Hz sampling frequency using the built-in 10 bit ADC

- 711 of the microcontroller (5). Once the threshold is reached, the piston is returned to the top position, where it remains for a
- time set by the user.