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Zonal differences in meniscus matrix turnover and cytokine response

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SUMMARY

Objective: To determine the mechanisms of meniscal degeneration and whether this varied zonally and from articular cartilage.

Design: Normal ovine menisci were dissected into inner and outer zones and along with cartilage cultured \pm IL-1 α and TNF α . Glycosaminoglycan (GAG) and collagen release, and gene expression were quantified. Aggrecan proteolysis was analysed by Western blotting with neopeptide-specific antibodies. Matrix metalloproteinase (MMP)2, MMP9 and MMP13 activity was evaluated by gelatin zymography or fluorogenic assay.

Results: Inner meniscus was more cartilaginous containing more GAG and expressing more ACAN and COL2A1 than outer zones. Higher expression of VCAN and ADAMTS4 in medial outer and both zones of the lateral meniscus reflected their embryologic origin from cells outside the cartilage anlagen. All meniscal regions released a greater % GAG in response to cytokines; only outer zones had cytokine-stimulated collagenolysis. Cytokine-induced aggrecanolytic activity was primarily due to increased ADAMTS cleavage in cartilage and inner menisci but MMPs in the outer menisci. Outer menisci always released more active MMP2 than other tissues and more active MMP13 in basal and TNF-stimulated cultures. Expression of ACAN, COL1A1 and COL2A1 was decreased by both cytokines in all tissues, while VCAN was increased by IL-1 α in cartilage and inner menisci. Metalloproteinase expression was differentially regulated by IL-1 α and TNF α : ADAMTS4, MMP1, MMP3 were upregulated more by IL-1 α in inner zones whereas ADAMTS5, MMP13 and MMP9 were more upregulated by TNF α in outer zones.

Conclusions: Meniscal degeneration mechanisms are zonally-dependent, and may contribute to the enzymatic burden in the joint.

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Introduction

The knee joint menisci provide joint congruity and are important weight bearing and stabilising structures, responsible for a 40–50% increase in contact and force transmission between the curved femoral condyle and flattened tibial plateau¹. Type I collagen is the major fibrillar collagen with lesser amounts of type II, III and VI collagen constituting 60–70% of the dry weight of the meniscus^{2–5}. The collagen fibres are arranged into complex radial, random and circumferential bundles constrained by radial tie fibres equipping the meniscus with its ability to withstand multi-directional tensile stresses¹. The meniscus is a heterogeneous tissue, the outer third is

vascular and fibrous, the inner third has structural and biochemical similarities to articular cartilage (AC)^{1,6,7}. Fibrous, tensile connective tissues such as the outer meniscus typically contain versican; aggrecan is a major component of the inner third of the meniscus, conveying resistance to compressive loading⁶.

Versican regulates cell–cell and cell–matrix interactions, cell migration and proliferation during development and may regulate lateral and medial meniscal development⁸. It is also associated with elastic and fibrous networks in connective tissues^{9,10}.

The importance of the meniscus to the knee joint is evident with early onset of osteoarthritic joint degeneration following complete or partial meniscectomy as well as procedures that interfere with the meniscus' ability to generate hoop stresses and resist compression¹¹. This has a clinical corollary in humans, with partial or total meniscectomy resulting in premature onset of osteoarthritis (OA)¹². There is a strong positive correlation between the severity of degenerative changes in the meniscus and the degree of cartilage degeneration in end-stage human OA, and the degree of

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meniscal degeneration on magnetic resonance imaging (MRI) is a significant predictor of OA progression^{13–16}. Whether this association between meniscal and cartilage degeneration in OA is purely due to the mechanical role of the meniscus, or whether meniscal cells secrete enzymes and inflammatory mediators that contribute to degeneration of other joint tissues, is unclear. Nevertheless, the integrity of the meniscus is vital in maintaining healthy AC and prevention of degenerative changes in the knee joint^{14,17–19}.

Despite the clear link between meniscal deterioration and the development of OA, there have been relatively few studies investigating the molecular mechanisms of meniscal compared with AC degeneration^{20–24}. As outlined above, the inner and outer regions of the menisci have distinct differences in extracellular matrix (ECM) composition, reflecting the discreet zonal phenotype of resident meniscal cells in adult tissues^{25–30}. These differences may reflect the embryonic cellular origins in the medial meniscus, where cells in the inner zone originate from the cartilage anlagen while in the outer meniscus they are derived from cells that do not express *Col2a1* and invade the developing joint³¹. This pattern is quite different in the lateral meniscus where cells in all regions originate from outside the cartilage anlagen³¹. These distinct embryological cellular origins may partly explain the superior reparative potential of the outer meniscus, and together with joint biomechanics, the higher frequency of degeneration of the inner zone of the medial compared to lateral meniscus. Despite known regional differences, previous *in vitro* studies of the mechanisms of meniscal degeneration have used pooled medial and lateral menisci and explants derived from the central or outer zones, often with only the surface 1 mm thickness of tissue examined^{21–24}. In the present study we have examined degeneration induced by IL-1 α and TNF α in full-thickness explants from medial versus lateral and inner versus outer meniscus, and compared this with AC from the same joints. These studies have shown distinct differences in the mechanisms of AC, inner and outer meniscal degradation, that have important therapeutic implications for the treatment of OA.

Materials and methods

Explant cultures of meniscal tissues and AC

Full-depth 5 mm² plugs of AC (not including calcified cartilage) were harvested aseptically from the trochlear groove along with lateral (L) and medial (M) menisci from 6–12 month old ovine stifle joints. The menisci were trimmed of synovial and ligamentous attachments and dissected into outer (O), middle (discarded) and inner (I) regions, that were then dissected further into full-thickness explants ~5 mm². Explants were cultured in Dulbecco's Modified Eagles Medium (DMEM; Sigma, Castle Hill, NSW, Australia) buffered with sodium bicarbonate 3.7 g/L (Fronine, Riverstone, NSW, Australia) supplemented with 10% (v/v) Foetal Calf Serum (FCS; Trace Biosciences Pty. Ltd., Castle Hill, NSW, Australia), gentamicin (50 μ g/mL), 2 mM L-glutamine (ICN Biochemicals Inc., Aurora, OH, USA) in an atmosphere of 90% humidity and 5% (v/v) CO₂ at 37°C for 48 h. The explants were then washed (3 \times 5 min) in serum-free-DMEM and cultured individually for 4 days in 24-well culture plates in 1 ml of serum-free-DMEM \pm 10 ng/mL IL-1 α or 100 ng/mL TNF α (PeproTech Inc., Rocky Hill, NJ, USA).

Quantitation of proteoglycan and collagen release from explant cultures

The proteoglycan sulphated glycosaminoglycan (GAG) content of the culture medium and papain digested tissues was measured with the metachromatic dye 1,9-dimethylmethylene blue using

shark cartilage chondroitin sulphate-C as standard (Sigma–Aldrich, Castle Hill, NSW, Australia)³². The collagen hydroxyproline (hypro) content of culture medium and acid hydrolysed tissues was measured using the method of Stegemann and Stalder³³. GAG and hypro release data were expressed as μ g/mg of tissue wet weight or as a percentage of the total (media/[media + papain digested or acid hydrolysed tissue]).

mRNA extraction and real time reverse-transcriptase polymerase chain reaction (RT-PCR)

RNA from samples of *ex-vivo* and cultured AC and meniscal zones (~100 mg) was extracted, quantitated and reverse-transcribed as described previously³⁴. The quality of meniscal and AC RNA preparations was assessed using a Shimadzu MultiNA microchip electrophoretic system to determine the levels of 28S and 18S rRNA, and smaller RNA fragments. Only RNA samples with 28S:18S ratios >2.0, and minimal fragmentation were examined. Real time PCR was done using a RotorGene 6000 (Corbett Life Science, NSW, Australia) and validated ovine-specific primers (Table I).

Sodium dodecyl sulphate-polyacrylamide gel electrophoresis (SDS-PAGE) and Western blotting of aggrecan metabolites

Proteoglycans were extracted from the explants using 10 volumes 4 M guanidine hydrochloride (0.5 M sodium acetate pH 5.8 containing 10 mM EDTA, 20 mM benzamidine and 50 mM 6-aminohexanoic acid) using end-over end mixing for 48 h at 4°C. Replicate aliquots ($n \geq 6$) from each culture condition were pooled to provide representative samples from equivalent wet weights of tissue, precipitated with five volumes of absolute ethanol, resuspended in 0.1 M Tris acetate buffer (pH 6.5) then digested for 5 h at 37°C, with Chondroitinase ABC (0.05 U/ml) and Keratanase I (0.01 U/ml) (Seikagaku, Japan). Samples were re-precipitated and dissolved in NuPAGE 1 \times LDS sample buffer with 1 \times reducing agent (Invitrogen Australia Pty. Ltd) and boiled for 10 min. The samples (extract from 1 mg wet weight tissue in 25 μ l) were electrophoresed in 10% (w/v) NuPAGE gels, blotted and subjected to Western blotting³⁵ using antibodies to the ADAMTS (a Disintegrin and Metalloproteinase with Thrombospondin Motifs) and matrix metalloproteinase (MMP) generated aggrecan neoepitope sequences³⁶, NITEGE (generously provided by Dr C. Flannery Pfizer Inc, Cambridge, MA, USA) and DIPEN³⁷ (generously provided by A/Prof AJ Fosang, University of Melbourne) respectively.

Gelatin zymography and MMP substrate assay

Conditioned medium from replicate cultures ($n = 6$) (AC, MO, MI, LO, LI) and treatment (basal, IL-1 α , TNF α) were pooled to provide representative samples. MMP2 secretion and activation in aliquots from an equal wet weight of tissue in each region and treatment were examined using gelatin zymography under non-reducing conditions. MMP13 activity was measured \pm activation by 4-aminophenylmercuric acetate (APMA, 1 mM for 15 min at 37°C) using a Sensolyte Plus 520 MMP13 assay kit (AnaSpec, San Jose, CA) according to the manufacturer's instructions. MMP13 activity was measured every 15 min over a 270 min time-course and reported as Δ fluorescence/h.

Statistical analyses

The quantitative data presented in Figs. 1–4 and Table II, is pooled from separate experiments (up to seven for GAG release data in Fig. 1). In each experiment, explants of different meniscal zones and cartilage were harvested from 3–10 individual sheep and

Table 1
Ovine-specific cDNA primers used for qRT-PCR in this study

| Gene | Species accession # | Sequence 5'–3' | T °C | Product (bp) |
|----------------------|------------------------|--|------|--------------|
| ACAN ^a | Bos taurus U76615 | F -TCA CCA TCC CCT GCT ACT TCA TC R -TCT CCT TGG AAA TGC GGC TC | 58 | 105 |
| ADAMTS4 ^a | Bos taurus NM181667 | F -AAC TCG AAG CAA TGC ACT GGT R -TGC CCG AAG CCA TTG TCT A | 60 | 149 |
| ADAMTS5 ^a | Bos taurus AF192771 | F -GCA TTG ACG CAT CCA AAC CC R -CGT GGT AGG TCC AGC AAA CAG TTA C | 55 | 97 |
| TIMP1 ^b | Ovis aries S67450 | F -GGT TCA GTG CCT TGA GAG ATG C R -GGG ATA GAT GAG CAG GGA AAC AC | 57 | 265 |
| TIMP3 ^b | Bos Taurus NM174473 | F -CTT CCT TTG CCC TTC TCT ACC C R -CT GGT CAA CCC AAG CAT CG | 57 | 286 |
| VCAN ^c | Bos taurus NM181035 | F -CAT CTC ACC AGT ATC CTG TCT CAC G R -AGT GTG CTG CCA TCA GTC CAA C | 55 | 128 |
| COL1A1 ^c | Ovis aries AF129287 | F -ATC CCT GGA CAA CCT GGA CTT C R -TCA TCA TAG CCG TAA GAC AAC TGG | 57 | 107 |
| COL2A1 ^b | Bos taurus X02420 | F -TGA CCT GAC GCC CAT TCA TC R -TTT CCT GTC TCT GCC TTG ACC C | 55 | 154 |
| MMP1 ^b | Ovis aries AF267156 | F -CAT TCT ACT GAC ATT GGG GCT CTG R -TGA GTG GGA TTT TGG GAA GGT C | 55 | 122 |
| MMP2 ^c | Ovis aries AF267159 | F -TGC TAC CAC CTC CAA CTA CGA TG R -GTG CCA GTA TCA ATG TCA GGG G | 60 | 240 |
| MMP3 ^b | Bos taurus AF135232 | F -TCC CCC AGT TTC CCC TAA TG R -GAT TTC TCC CCT CAG TGT GCT G | 58 | 124 |
| MMP9 ^c | Bos taurus X78324 | F -AGG TGA ATC AGG TGG ACT ATG TGG R -AGA AAG GAA GGT GGG AAG AGA GG | 59 | 221 |
| MMP13 ^a | Ovis aries AY091604 | F -GGT GAC AGG CAG ACT TGA TGA TAA C R -ATT TGG TCC AGG AGG GAA AGC G | 58 | 349 |
| MMP14 ^b | Ovis aries AF267160 | F -ACC AGG TGA TGG ATG GAT ACC C R -CCC AGT GCT TGT CTC CTT TGAAG | 56 | 126 |

^a From Smith et al.²⁴^b From Zreiqat et al.⁵⁴^c Designed by MacVector software (MacVector, Inc Cary, WC, USA).

pooled. Explants were then randomly assigned to replicate wells for different treatments and treated as independent observations. The minimum and maximum number of observations for each outcome is given in the respective figure legend. Pooling of tissues from multiple sheep was necessary as sufficient explants could not be obtained from individual menisci to enable all inter-animal comparisons of zonal differences (medial/lateral menisci; *ex-vivo*/control/IL-1/TNF). Furthermore, previous studies demonstrated that the *ex-vivo* variation between the inner and outer zones within a sheep was equal to or greater than the between-sheep variation within a given zone (e.g., within versus between sheep variation = 129% vs 106% for ACAN and 53% vs 54% for COL1A1 expression). The potential for under-estimation of type-I error was further addressed by using Benjamini–Hochberg *post-hoc* correction for multiple analyses. The GAG and hydroxyproline contents of solubilised tissues and media samples from explant cultures (Fig. 1) were analysed using the Student's *t* test. Comparison of gene expression in different tissues *ex-vivo* (fold-change) expressed relative to AC (Table II), and mean fluorescence following culture under different conditions (Figs. 2–4), were analysed using the Kruskal–Wallis test for multiple groups and, if significance was found, Mann–Whitney *U* tests for between-group comparisons (StataSE software, Stata corporation, College Station, TX, USA). The means and confidence intervals (CIs) plotted in Figs. 2–4 were calculated on log-transformed data to ensure normalised distributions and non-negative expression levels. The α level was set at 0.05, and all graphical and tabulated data are expressed as mean \pm 95% CIs.

Results

Ex-vivo (un-cultured) AC, MI and LI contained more GAG per tissue wet weight than the LO or MO tissues [Fig. 1(A)]. In contrast, the hydroxyproline content of all meniscal zones was similar but higher than AC [Fig. 1(B)]. Under basal (control) culture meniscal

zones released more GAG as a percentage of the total tissue GAG than AC cultures [Fig. 1(D), $P < 0.001$]. IL-1 α and TNF α treatment resulted in significantly more GAG release than control cultures for AC and all meniscal zones except MO [Fig. 1(C)]. All meniscal zones released a greater % of their tissue GAG into the media compared with cartilage in response to IL-1 α and TNF α [Fig. 1(D); $P < 0.001$]. Little or no hydroxyproline was released from control cultures, but in the MO only, IL-1 α and TNF α significantly stimulated the release of hydroxyproline [Fig. 1(E and F)].

Consistent with zonal differences in composition, *ex-vivo* (un-cultured) ACAN and COL2A1 expressions were higher and COL1A1 lower in AC and inner meniscal tissue compared with outer meniscus (Table II and Supplemental Fig. 1). In contrast, VCAN expression was significantly higher in MO, LI and LO compared with AC. Tissue-specific differences in expression of MMPs were also apparent in un-cultured tissues (Table II). *Ex-vivo* expression of ADAMTS4 in the MO, LI and LO zones was significantly greater than AC, while only the LI zone showed significantly greater ADAMTS5 compared to AC. Interestingly, MMP1 *ex-vivo* gene expression was significantly lower in the outer compared to the inner meniscal zones and AC, while the expression of MMP3 was significantly greater in the inner zones when compared to AC. The expression of a number of genes changed significantly in basal (un-stimulated control) culture compared with *ex-vivo* (un-cultured) (Figs. 2–4 and Supplementary Tables I–V). In particular, ACAN mRNA increased in AC but not meniscus; COL1A1, COL2A1 and VCAN were down regulated especially in outer meniscus; and MMP3 increased in inner and outer menisci, while ADAMTS5 increased in MI, MO and LO.

In general both cytokines tended to decrease expression of the major ECM proteins (ACAN, COL2A1 and COL1A1) in all tissues (Fig. 2). The exception to this was VCAN which was increased by IL-1 α (AC, $P = 0.01$; MI, $P = 0.006$; LI, $P = 0.004$; LO, $P = 0.004$) but was either decreased (AC, $P = 0.04$) or unchanged (all meniscal tissues) by TNF α [Fig. 2(D)]. Expression of TIMP1 was down

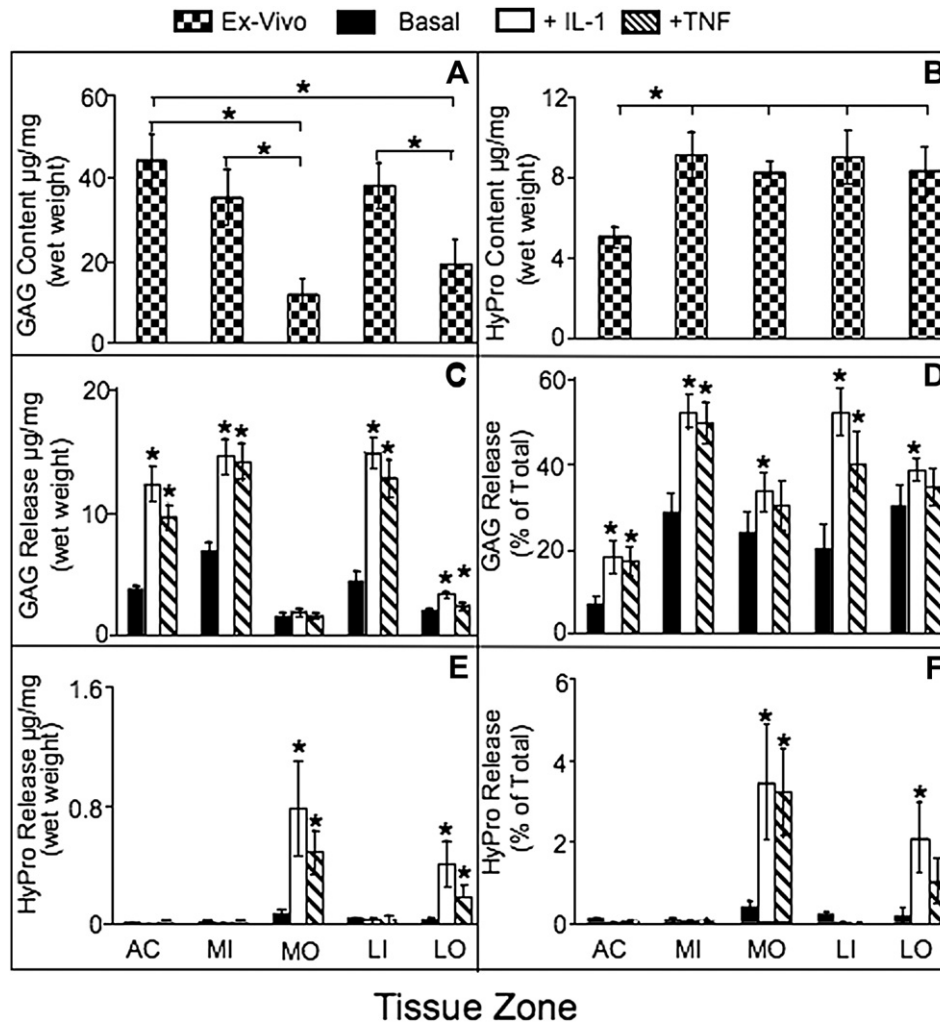


Fig. 1. Comparison of the (A) sulphated GAG and (B) hydroxyproline (hypro) content of ovine AC and meniscal zones *ex-vivo*. The release of GAG (C & D) and hypro (E & F) from explants stimulated with IL-1 α (10 ng/ml) and TNF α (100 ng/ml) is expressed as $\mu\text{g}/\text{mg}$ tissue wet weight (C & E) or as a percentage of the total in the media plus tissue (D & F). Graphs depict mean \pm 95% CI; $n = 6-10$ (A, B, E & F), $n = 42-106$ (C & D) replicate explants. Comparisons are between: A and B groups connected by bars, and C–F basal compared to IL-1 α or TNF α treated cultures. * = $P < 0.001$ except the following: B where AC vs MI $P = 0.001$, AC vs LI $P = 0.002$ and AC vs LO $P = 0.002$; C where LO basal vs IL-1 α $P = 0.01$; D where MO and LO basal vs IL-1 α $P = 0.007$ and 0.005 , respectively; E where MO and LO basal vs IL-1 α $P = 0.002$ and LO basal vs TNF α $P = 0.004$ and F where MO and LO basal vs IL-1 α $P = 0.009$ and MO basal vs TNF α $P = 0.003$, MI, MO: inner and outer medial meniscal zones; LI, LO: inner and outer lateral meniscal zones.

regulated by IL-1 α and TNF α only in MO, LI and LO zones [Fig. 3(D)]. *TIMP3* was differentially regulated, being decreased by cytokine treatment in the AC and inner (MI by TNF α only) but not outer meniscal zones [Fig. 3(C)].

Expression of *ADAMTS4* was increased by both cytokines in all tissues, equally in meniscal outer zones but significantly more by IL-1 α than TNF α in the cartilaginous tissues (AC, MI, LI) [Fig. 3(A)]. *ADAMTS5* was upregulated to a similar extent by both cytokines in AC, MI and LI, but only significantly increased by TNF α in the outer meniscal tissues. Regulation of MMP expression also showed distinct tissue and cytokine specific differences (Fig. 4). *MMP2* and *MMP14* expression showed limited regulation by cytokines in any tissue (*data not shown*). *MMP9* expression was only significantly increased in the meniscal outer zones and only by TNF α . *MMP3* and *MMP1* were significantly increased in all tissues by both cytokines. *MMP13* mRNA was increased by IL-1 α in AC and inner meniscus, and only by TNF α in the outer zones. The tissue pattern of differential regulation of MMPs by the two cytokines was quite similar for *MMP1*, *MMP3*, and *MMP13*, being less sensitive to TNF α in AC, and the MI and LI meniscal zones. In general, the expression of *ADAMTS* and *MMPs* was higher in meniscal cultures than AC.

Western blotting of aggrecan interglobular domain cleavage neopeptides in pooled extracts showed distinct tissue differences (Fig. 5). In AC the MMP-generated DIPEN epitope was detected in tissue extracts prior to culture (*ex-vivo*) and showed only a slight increase in basal, IL-1 α and TNF α cultures [Fig. 5(A)]. The ADAMTS-generated NITEGE epitope was not detected *ex-vivo* or in basal cultures in AC, but was increased by both cytokines [Fig. 5(B)]. There was little difference between medial and lateral menisci, but notable differences between the inner and outer zones. DIPEN was detected in all meniscal tissues prior to culture and did not increase in basal culture [Fig. 5(C and E)]. In the inner zones, the DIPEN neopeptide was elevated by IL-1 α but not TNF α , while both cytokines increased DIPEN in the outer meniscal zones. There was little NITEGE detected in extracts of meniscal tissue *ex-vivo*, but elevated levels in all zones in basal cultures [Fig. 5(D and F)]. IL-1 α and TNF α further increased NITEGE in inner but not outer meniscal zone cultures.

Very little active *MMP2* was detected in the basal AC cultures and it was only marginally changed by IL-1 α or TNF α treatment [Fig. 6(A)]. Gelatin zymography yielded similar results for medial and lateral menisci but distinct differences between inner and outer menisci and AC. Very little pro- or active *MMP9* was detected

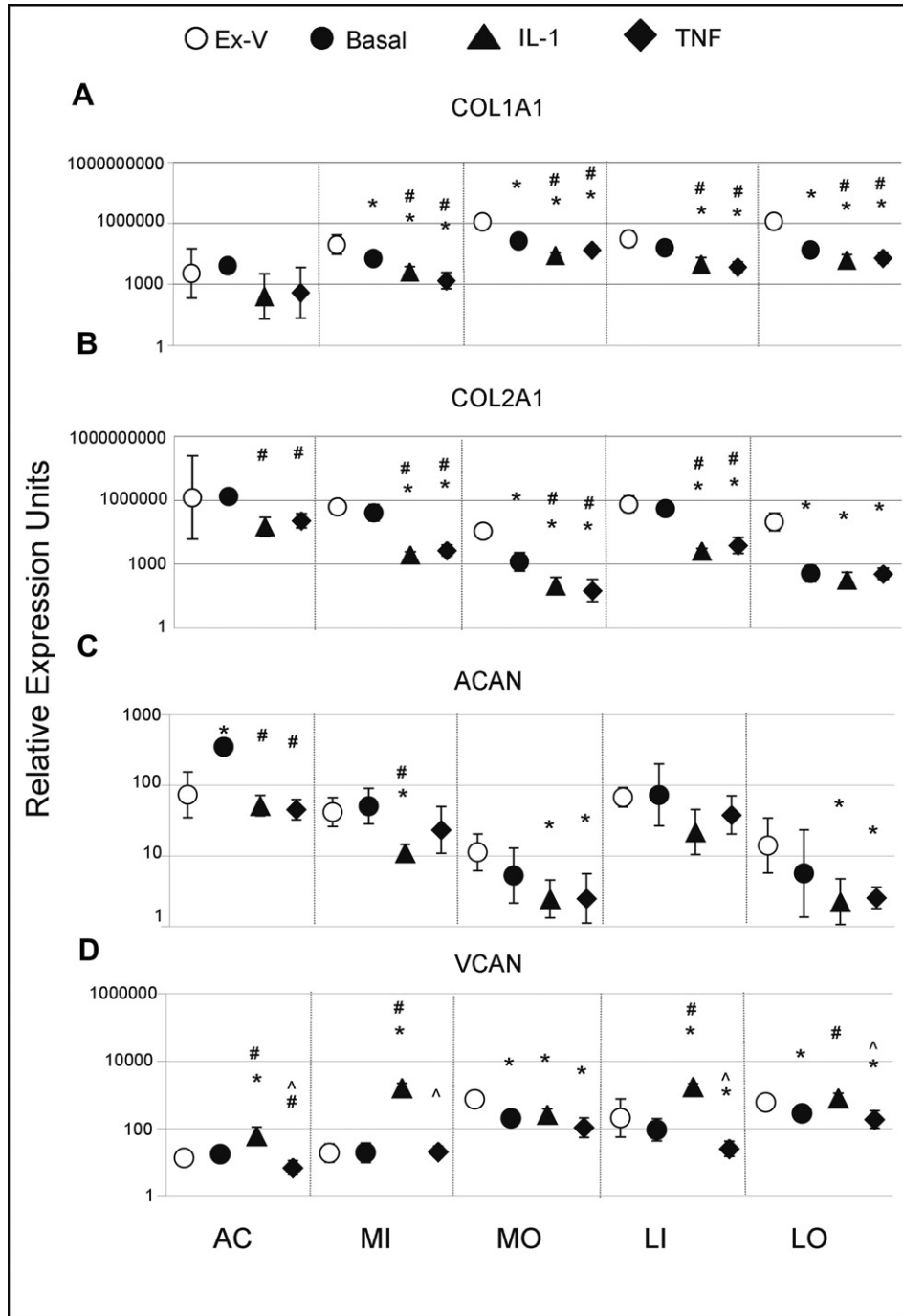


Fig. 2. Comparison of A: COL1A1, B: COL2A1 C: ACAN and D: VCAN gene expression between ex-vivo ovine AC and meniscal zones and their response to stimulation with IL-1 α (10 ng/ml) and TNF α (100 ng/ml) (expressed as relative expression units; REU). $P < 0.05$ for: * comparison to ex-vivo tissue; # comparison between basal cultured tissues and cytokine treated tissues; and ^ comparisons between IL-1 α and TNF α treated tissues (the exact P values for each comparison are presented in Supplementary Tables I–V). Error bars represent 95% CI (calculated on log-transformed normalised data), $n = 5–6$ replicate cultures for each data point; refer to legend 1 for tissue zone abbreviations.

in any culture. In basal cultures of inner meniscus pro-MMP2 was predominant, while active MMP2 was readily detected in basal cultures of outer meniscal zones. IL-1 α but not TNF α stimulated the release of active MMP2 in the inner zone meniscal cultures. In the outer meniscus both cytokines markedly increased active MMP2.

There was little or no spontaneously active MMP13 detected in basal cultures in any tissue, although APMA pre-treatment revealed pro-MMP13 in outer meniscal zone basal cultures [Fig. 6(B)]. IL-1 α stimulated low levels of active MMP13 in all cultures

(meniscus > AC), but the majority was present in pro-form with similar levels in all IL-1 α stimulated cultures after APMA activation. Spontaneously active MMP13 was detected in outer meniscal zone cultures in response to TNF α , although the majority was present as pro-MMP13 (APMA activated).

Discussion

The regional variation in ECM composition observed between the inner and outer menisci and AC is consistent with earlier

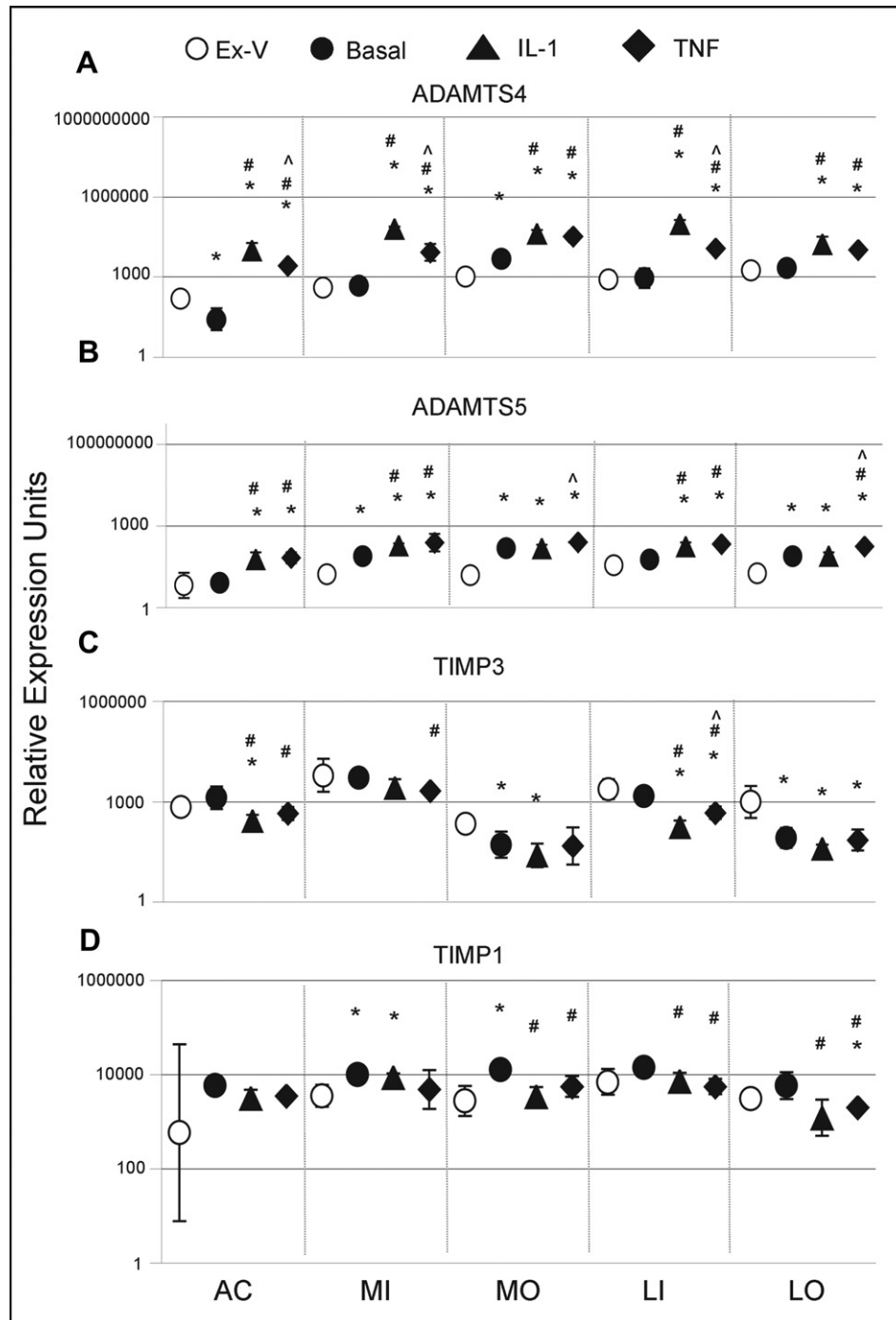


Fig. 3. Comparison of A: *ADAMTS4*, B: *ADAMTS5*, C: *TIMP3* and D: *TIMP1* gene expression between *ex-vivo* ovine AC and meniscal zones and their response to stimulation with IL-1 α (10 ng/ml) and TNF α (100 ng/ml) (expressed as relative fluorescence; RF). $P < 0.05$ for: * comparison to *ex-vivo* tissue; # comparison between basal cultured tissues and cytokine treated tissues; and ^ comparisons between IL-1 α and TNF α treated tissues (the exact P values for each comparison are presented in Supplementary Tables I–V). Error bars represent 95% CI (calculated on log-transformed normalised data), $n = 5$ –6 replicate cultures for each data point; refer to legend 1 for tissue zone abbreviations.

reports^{1,7,27}, and *COL2A1* and *ACAN* expression followed a similar trend, confirming the chondrocyte-like nature of the meniscal inner zone cells. We have previously demonstrated that these zonal differences in aggrecan and type II collagen content of the ovine meniscus are evident as early as 2 days post-natally^{28–30}. In the current study we found very similar zonal differences in GAG and collagen content and *ACAN* and *COL2A1* mRNA expression in medial and lateral menisci. Expression of *COL1A1* and *VCAN*, markers of more fibrous connective tissues³⁸, was higher in outer meniscal zones compared with AC. Together these results support

a phenotypic difference between cells of the meniscal inner (chondrocytic) versus outer (fibroblastic) zones.

There were some expression patterns unique to the MO, LO and LI zones, consistent with their differing cellular origins compared to the MI and AC that are derived from the cartilage anlagen³¹. *VCAN* and *ADAMTS4* were more highly expressed *ex-vivo* in MO, LO and LI but not MI compared to AC. IL-1 α and TNF α treatment inhibited *TIMP1* expression in the embryologically-related MO, LO and LI but not AC or MI tissue zones. The significance of these findings is unclear, although the presence of *VCAN* and its proteolysis by various

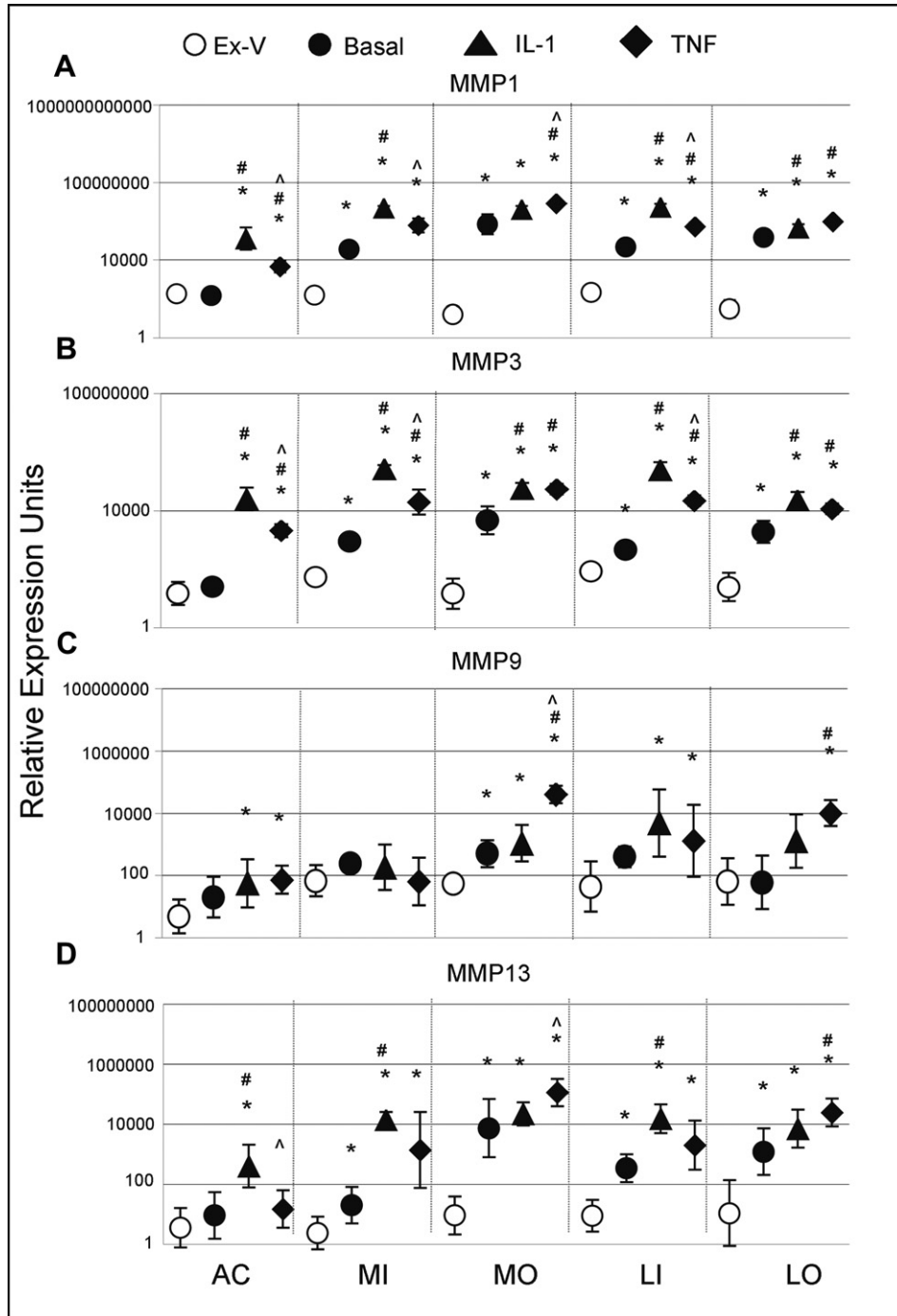


Fig. 4. Comparison of A: *MMP1*, B: *MMP3*, C: *MMP9* and D: *MMP13* gene expression between *ex-vivo* ovine AC and meniscal zones and their response to stimulation with IL-1 α (10 ng/ml) and TNF α (100 ng/ml) (expressed as RF). $P < 0.05$ for: * comparison to *ex-vivo* tissue; # comparison between basal cultured tissues and cytokine treated tissues; and ^ comparisons between IL-1 α and TNF α treated tissues (the exact P values for each comparison are presented in Supplementary Tables 1–V). Error bars represent 95% CI (calculated on log-transformed normalised data), $n = 5–6$ replicate cultures for each data point; refer to legend 1 for tissue zone abbreviations.

ADAMTS including *ADAMTS-4*, is known to regulate cell apoptosis, cell–cell and cell–matrix interactions during development and remodelling of tissues^{39–42}. These findings suggest that the developmental origins of the cells may have some bearing on their basal phenotype and the response of the resident cell populations to cytokines in the adult tissues.

Despite the specific examples given above, for the most part the composition, gene expression and response to IL-1 α and TNF α of the resident cells of the inner versus outer lateral and medial

menisci were similar. This suggests that post-natal regulation, by factors such as the compressive loading, likely drives the majority of phenotypic differences observed, such as higher *ex-vivo* *ACAN* and *COL2A1* expression in inner compared to outer zones. While the zonal differences in *ACAN*, *COL2A1*, *COL1A1*, *MMP2* and *MMP13* mRNA *ex-vivo* showed the same pattern as previously described, comparative expression of *MMP1* and *MMP3* in inner versus outer meniscus was different in our study to that reported by Upton *et al.*²⁵. This may relate to differences in species (sheep versus pig)

Table II
Relative gene expression [Mean relative fluorescent units, ($n = 4-6$)] of regional (MI, medial inner; MO, medial outer; LI, lateral inner; LO, lateral outer) of *ex-vivo* un-cultured meniscal tissues expressed relative to *ex-vivo* un-cultured AC from the same joint

| Gene | MI | MO | LI | LO |
|---------|---------------------|------------------------|---------------------|------------------------|
| COL1A1 | 75.9 (-40.4, 192.2) | 500.8 (118.6, 833.1)*# | 104.1 (-31.8, 240) | 500.05 (138.9, 861.2)* |
| COL2A1 | 0.43 (0.21, 0.66) | 0.032 (0.015, 0.05)# | 0.74 (0.15, 1.3) | 0.11 (0.033, 0.19)*# |
| ACAN | 0.65 (0.39, 0.90) | 0.19 (0.087, 0.30)*# | 0.98 (0.68, 1.3) | 0.31 (0.034, 0.59)# |
| VCAN | 1.7 (0.90, 2.5) | 63.9 (34.5, 93.4)*# | 36.4 (-2.8, 75.6)* | 51.8 (23.1, 80.5)* |
| ADAMTS4 | 3.3 (1.4, 5.2) | 8.2 (4.1, 12.2)* | 8.3 (0.21, 16.4)* | 14.1 (7.0, 21.2)* |
| ADAMTS5 | 3.9 (2.1, 5.7) | 4.04 (1.9, 6.2) | 12.6 (4.2, 21.1)* | 4.5 (2.6, 6.4) |
| TIMP3 | 21.4 (-6.5, 49.3)* | 0.34 (0.23, 0.46)*# | 4.9 (0.37, 9.4)* | 4.1 (-2.1, 10.2) |
| TIMP1 | 7.2 (3.9, 10.5) | 6.6 (1.9, 11.3) | 16.6 (1.9, 31.3) | 5.8 (3.8, 7.8) |
| MMP1 | 0.89 (0.62, 1.2) | 0.1 (0.062, 0.14)*# | 2.0 (-0.14, 4.04) | 0.26 (0.11, 0.41)*# |
| MMP2 | 8.3 (-5.6, 22.1) | 4.6 (2.1, 7.1) | 14.6 (-10.1, 39.4) | 8.2 (2.1, 14.3) |
| MMP3 | 4.2 (2.3, 6.0)* | 2.6 (-0.70, 5.8) | 7.0 (3.4, 10.5)* | 3.0 (0.82, 5.1) |
| MMP9 | 25.8 (7.5, 44.2)* | 12.8 (7.0, 18.6)* | 48.2 (-10.3, 106.3) | 138.6 (-118.1, 395.4)* |
| MMP13 | 2.7 (-1.8, 7.1) | 6.7 (-1.1, 14.5) | 4.05 (0.51, 7.6) | 27.3 (-23.3, 78.0) |
| MMP14 | 9.5 (5.8, 13.2) | 8.3 (4.3, 12.2) | 18.4 (4.9, 31.9)* | 10.3 (8.2, 12.4) |

Bracketed values represent $\pm 95\%$ confidence limits. Values labelled * or # were significantly different from AC and between inner and outer menisci respectively.

and/or age (< 1 versus > 2 years), with younger tissues in the current study having more active remodelling. Nevertheless the results of both studies emphasise the importance of zonal rather than global analysis of meniscus.

The cytokine response of the cartilaginous (AC, MI, LI) and fibrous (MO and LO) tissues also diverged. The former were more responsive to IL-1 α than TNF α with regard to stimulation of MMP1, MMP3, and ADAMTS4 whereas the fibrous outer zones were more responsive to TNF α for MMP1, MMP9 and MMP13. Despite these regional differences, the meniscus was generally more responsive than AC from the same knee joints to cytokine stimulation in terms

of the proportion of the total tissue GAG released into the media in explant culture and MMP mRNA levels induced. While our analyses have shown some striking similarities between the inner meniscus and cartilage, we have not directly compared the outer meniscus with another collagen-I rich fibrous tissue such as tendon. Such studies would be of interest to determine whether the response of cells in outer meniscus more closely mimics that of cells (tenocytes) from a tissue experiencing greater tensional loading.

Proteoglycan turnover in the meniscus was significantly higher compared to AC, perhaps suggesting a more profound physical disruption associated with cutting explants in meniscal tissues.

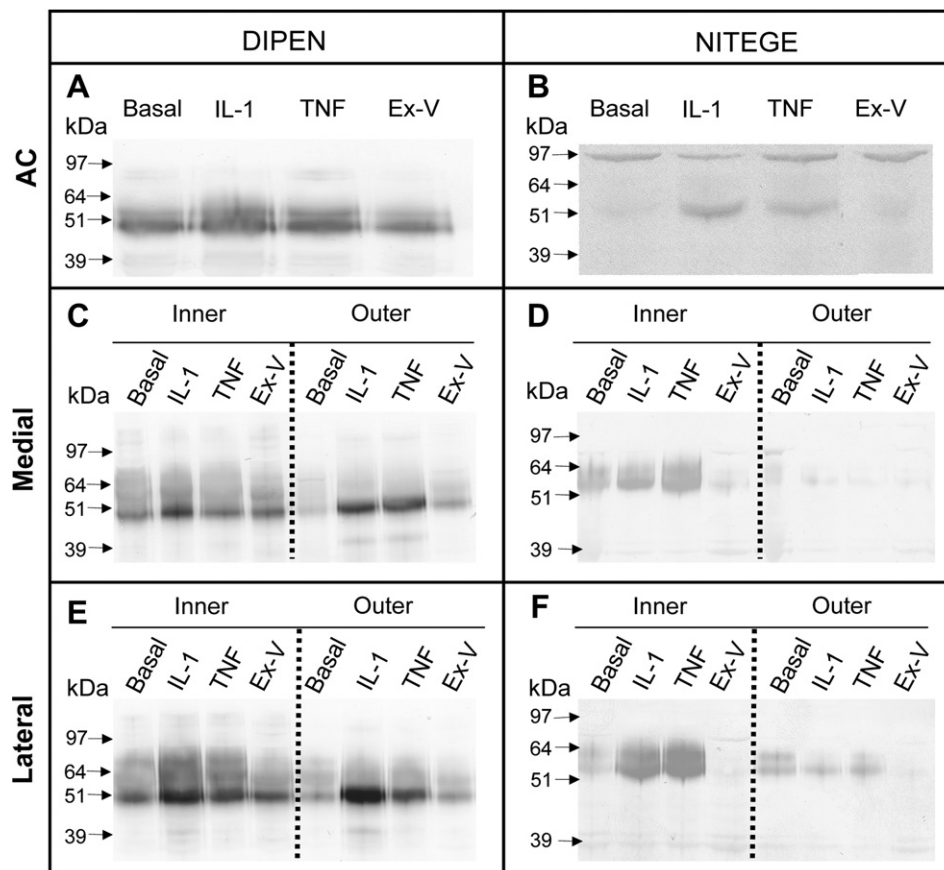


Fig. 5. Western blots of 4 M GuHCl tissue extracts, pool of $n = 6$, depicting aggrecanase and MMP-cleaved aggrecan neoepitopes (NITEGE and DIPEN, respectively) under basal conditions, treatment with IL-1 α (10 ng/ml), TNF α (100 ng/ml), or in *ex-vivo* tissues of AC (A and B), medial meniscus (C and D) and lateral meniscus (E and F).

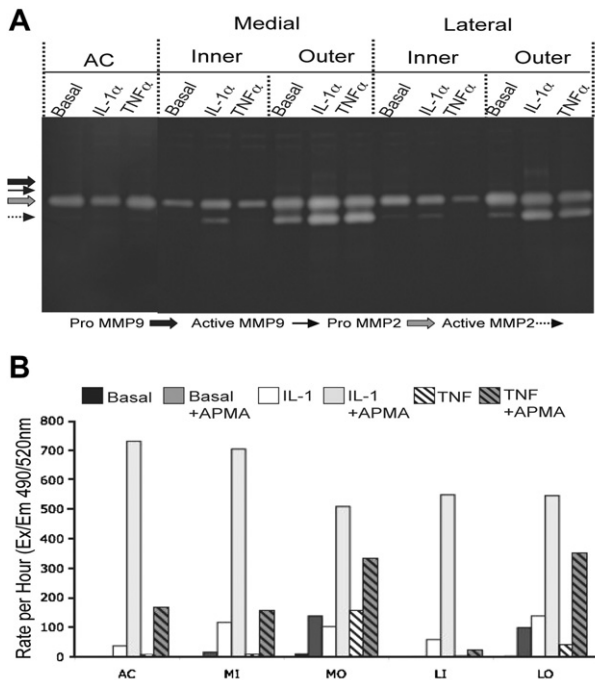


Fig. 6. A: MMP2 and MMP9 gelatin zymography of basal, IL-1 α and TNF α stimulated ovine AC and meniscal explant culture media samples (pool of $n = 6$ individual cultures for each treatment). The migration positions of the pro- and active forms of MMP2 and MMP9 are shown on the left hand side of the figure. B: Assessment of MMP13 activity of culture media samples from basal, IL-1 α (10 ng/ml) and TNF α (100 ng/ml) stimulated ovine AC and meniscal explant cultures. Pooled media samples from $n = 6$ individual cultures from each treatment were tested once over a time-course. The samples were incubated \pm APMA to activate MMPs. Tissue zone abbreviations are as indicated in the legend to Fig. 1.

GAG loss in basal cultures was associated with increased NITEGE retained in meniscus but not AC, suggesting that an increase in ADAMTS cleavage of aggrecan was at least partially responsible for higher GAG loss in basal meniscal cultures. Western blotting of media samples from basal cultures also demonstrated that high molecular mass (>97 kDa) ADAMTS-cleaved aggrecan fragments (initiating with the ARG neopeptide and recognised by the BC-3 antibody) were released from all meniscal zones but not AC (data not shown). Although there is not a simple relationship between mRNA levels for ADAMTS enzymes and aggrecanolytic activity⁴³, the increase in ADAMTS5 mRNA in basal meniscal but not AC cultures, might implicate this enzyme in accelerated aggrecanolytic activity in the meniscus *in vitro*.

In contrast to basal cultures, pathological aggrecan degradation induced by cytokines in the MI and LI zones was similar to AC and distinct from the outer zones. Thus both cytokines stimulated cleavage of aggrecan by ADAMTS rather than MMPs only in the cartilaginous tissues (AC, LI, MI). This is largely consistent with previous reports where only the surface 1 mm of the central zone of the meniscus was studied^{21,23,24}. Bearing in mind the same caveats previously discussed, our data suggest that in cartilaginous (AC, MI, LI) but not fibrous (MO, LO) tissues, ADAMTS-4 plays a predominant role in IL-1 α -stimulated aggrecanolytic activity given the marked increase in its mRNA expression compared with ADAMTS-5. On the other hand, the ADAMTS5 gene is more strongly regulated by TNF α in the meniscus, particularly in its outer zones. Our topographical analyses have enabled us to demonstrate for the first time that, in marked contrast to the inner zones, aggrecan cleavage by MMPs may play a significant role in pathological/cytokine-stimulated aggrecanolytic activity in the outer meniscus. This conclusion was based

on analysis of aggrecan neopeptides retained in the tissue, which could be confounded by secondary cleavage of G1-NITEGE fragments by MMPs. However, high molecular mass (>97 kDa) MMP-generated aggrecan fragments (initiating with the FFG neopeptide, recognised by the BC-14 antibody) were detected in media from IL-1 α and TNF α stimulated MO cultures only (data not shown). This is consistent with the increase in the DIPEN neopeptide seen in these same tissues, and supports a potential role for primary aggrecanolytic activity by MMPs leading to aggrecan loss in this meniscal region. It is noteworthy that in the cartilaginous (AC, MI, LI) but not fibrous (MO, LO) tissues, TIMP3 mRNA expression was decreased by IL-1 α and TNF α , and this could also account in part for the predominance of ADAMTS- over MMP-driven aggrecanolytic activity in cytokine-stimulated AC, MI and LI cultures.

The afore-noted zonal distinctions between degenerative mechanisms indicate that different therapeutic strategies (inhibition of ADAMTS versus MMPs) may be needed to inhibit the degeneration of the inner versus outer meniscus. Additionally, it suggests that where significant meniscal degeneration contributes to the overall enzymatic burden in the joint, both IL-1 α and TNF α may need to be inhibited to regulate this process. A similar dual inhibition approach has been suggested for the regulation of macrophages in OA as opposed to rheumatoid arthritis where TNF α is the predominant cytokine⁴⁴. Our data also implicates the outer meniscus, rather than or in addition to AC, as the source of the MMP-generated aggrecan fragments that have been detected in human OA knee joint synovial fluids^{45–47}. To the best of our knowledge, such MMP-generated aggrecan catabolites have not been detected in synovial fluids from joints devoid of a meniscus. It would be interesting to determine whether the presence of the MMP-cleaved aggrecan neopeptide FFG correlates with the severity of meniscal degeneration in OA knee joints.

Consistent with the role of MMPs in the degradation of aggrecan in the outer meniscus, these same regions also had significant collagenolysis upon cytokine stimulation, released more active-MMP2 and more pro- and active MMP13 in basal and TNF α -stimulated cultures. The meniscus may therefore represent a significant source of collagenolytic MMPs that could directly degrade other intra-articular structures including cartilage, and activate pro-enzymes within these tissues. Similarly, meniscal cells express significantly higher levels of ADAMTS4 and ADAMTS5 mRNA than AC from the same joint when stimulated by IL-1 α and TNF α . Release of these degradative enzymes may not only contribute to meniscal remodelling and loss of function with attendant biomechanical consequences to the underlying AC, but their secretion into the knee joint synovial fluid may contribute directly to degradation of other joint tissues.

OA is increasingly being recognised a disease of the whole joint^{48,49}. In post-traumatic OA in animals induced by transection/rupture of the anterior cruciate ligament, it is well recognised that similar cellular, matrix and molecular changes occur in cartilage, meniscus, synovium and ligaments^{50–52}. It is unclear whether this represents parallel but independent pathological change driven by abnormal mechanical loading, or if the enzymes and cytokines generated in one tissue directly contribute to the breakdown of another. Tang *et al.*⁵³ described an acute coordinated up-regulation of MMPs in all intra-articular tissues 1–3 days after anterior cruciate ligament rupture, suggesting that cytokines released at the time of injury upregulated MMP production, and that all joint tissues contributed to the accumulation of MMP activity in the synovial fluid. While the acute post-traumatic synovitis may resolve, the meniscus may remain a sustained source of degradative enzymes in the knee joint⁵⁰. Meniscal degeneration may therefore contribute to global joint pathology, not only through loss of its load-bearing and stabilising function, but also by contributing

to the enzymatic burden in the joint. Our data suggests that the mechanisms that regulate and drive meniscal degeneration may be zonally-dependent and distinct from AC, and may therefore require a targeted therapeutic approach.

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Contributions

ESF: acquisition of data, day to day running of the study, CBL and JM: conception and experimental design, analysis and data interpretation, critical revision of the manuscript. MMS: statistics, supervision of the gene expression studies. All authors approved the final version of the manuscript.

Conflict of interests

None.

Supplementary material

Supplementary data associated with this article can be found in the online version, at doi:10.1016/j.joca.2011.10.002.

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