

IN VITRO BIOACTIVITIES OF ANODISED TITANIUM IN MIXTURE OF β -
GLYCEROPHOSPHATE AND CALCIUM ACETATE FOR BIOMEDICAL
APPLICATION

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ABSTRACT

Anodic oxidation has been widely used to modify the surface properties of titanium in order to improve the biocompatibility after implantation. In this study, high purity titanium foils were exposed in a mixture of β -glycerophosphate disodium salt pentahydrate (β -GP) and calcium acetate monohydrate (CA). The parameters for anodic oxidation method such as applied voltage (50-350 V), current density ($10-70 \text{ mA}\cdot\text{cm}^{-2}$), electrolyte concentration (0.02 M β -GP + 0.2 M CA, 0.04 M β -GP + 0.04 M CA), anodising time (5-10 mins), agitation speed (300-1500 rpm), ultrasonic amplitude (20-60 μm) and bath temperature (4-100 $^{\circ}\text{C}$) were varied to investigate the impact on the surface properties of titanium. The results showed that surface of the titanium foil appeared to be highly porous and demonstrated high crystallinity as well as high hydrophilic properties especially when the parameters of anodic oxidation have been varied. This study also proposes two novel methods particularly to accelerate the bone-like apatite formation on the anodised titanium in a shorted time: (1) UV irradiation during *in vitro* testing and (2) adding additives in electrolyte. After soaked and irradiated with UV in simulated body fluid (SBF) for 7 days, highly crystallised bone-like apatite was fully covered on the anodised surface. Interestingly, the smooth and partially porous surface of the anodised titanium was observed to be fully covered by the bone-like apatite layer, which contradict previous research results. The mechanism for growth of bone-like apatite was developed and involved several stages from the existence of hydroxyl groups ($\bullet\text{OH}$) under the UV irradiation has been disclosed thoroughly. Further, additives such as sulphuric acid (H_2SO_4), hydrogen peroxide (H_2O_2) and sodium hydroxide (NaOH) were added into the electrolyte were also able to accelerate the formation of bone-like apatite because of the presence of ($\bullet\text{OH}$), tricalcium phosphate ($\text{Ca}_3\text{O}_8\text{P}_2$), calcium diphosphate ($\text{Ca}_2\text{O}_7\text{P}_2$), calcium titanate (CaTiO_3) or sodium titanate ($\text{Na}_2\text{Ti}_3\text{O}_7$) on the anodised surface, which able to induce the nucleation site of bone-like apatite.

ABSTRAK

Pengoksidaan anod telah digunakan secara meluas untuk mengubahsui sifat-sifat permukaan titanium bagi memperbaiki keserasian bio selepas implikasi. Dalam kajian ini, kerajang titanium berketulenan tinggi telah didedahkan di dalam campuran garam pentahidrat dinatrium β -gliserofosfat (β -GP) dan kalsium asetat monohidrat (CA). Parameter-parameter bagi langkah pengoksidaan anod seperti voltan gunaan (50-350 V), ketumpatan arus ($10-70 \text{ mA.cm}^{-2}$), kepekatan elektrolit ($0.02 \text{ M } \beta\text{-GP} + 0.2 \text{ M CA}$, $0.04 \text{ M } \beta\text{-GP} + 0.04 \text{ M CA}$), tempoh penganodan (5-10 mins), kelajuan agitasi (300-1500 rpm), amplitud ultrasonik ($20-60 \mu\text{m}$) dan suhu elektrolit ($4-100 \text{ }^\circ\text{C}$) telah diambil kira bagi mengkaji kesan terhadap sifat-sifat permukaan titanium. Permukaan kerajang titanium didapati mempunyai liang yang banyak dan menunjukkan kekristilan serta sifat hidrofilik yang tinggi terutama semasa parameter-parameter pengoksidaan anod telah diubah-ubah. Kajian ini turut mencadangkan dua kaedah baru bagi mempercepatkan pembentukan apatit berbentuk tulang pada titanium yang sudah dianodkan dalam masa yang singkat : (1) penyinaran UV semasa ujian *in vitro* dan (2) peletakan bahan tambahan dalam campuran β -GP + CA. Setelah direndam dan didedahkan dengan UV di dalam SBF selama 7 hari, didapati apatit berbentuk tulang tinggi kekristilan telah dilitupi pada permukaan titanium yang sudah dianodkan. Permukaan titanium tersadur yang licin dan sebahagiannya berliang didapati telah dilitupi sepenuhnya dengan lapisan apatit berbentuk tulang bertentangan dengan dapatan yang. Mekanisma bagi pertumbuhan apatit berbentuk tulang telah dibangunkan dan melibatkan beberapa peringkat bermula dari kewujudan kumpulan hidroksil ($\bullet\text{OH}$) di bawah sinaran UV telah dilampirkan. Bukan itu sahaja, bahan tambahan seperti asid sulfuric (H_2SO_4), hidrogen peroksida (H_2O_2) dan natrium hidroksida (NaOH) ke dalam elektrolit juga berkemampuan untuk mempercepatkan pembentukan apatit berbentuk tulang disebabkan oleh kewujudan kumpulan hidroksil ($\bullet\text{OH}$), trikalsium fosfat ($\text{Ca}_3\text{O}_8\text{P}_2$), di-kalsium difosfat ($\text{Ca}_2\text{O}_7\text{P}_2$), kalsium titanat

(CaTiO₃) atau natrium titanat (Na₂Ti₃O₇) yang berkebolehan untuk mendorong pembentukan tapak penukleusan apatit berbentuk tulang telah dianodkan pada permukaan titanium.

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LIST OF SYMBOLS AND ABBREVIATIONS

•OH	-	Hydroxyl group
AFM	-	Atomic force microscopy
C ₂ H ₄ O ₂	-	Acetic acid
CA	-	Calcium acetate monohydrate
Ca ₂ O ₇ P ₂	-	Calcium diphosphate
Ca ₃ O ₈ P ₂	-	Tricalcium phosphate
Ca-P	-	Calcium Phosphate
CaTiO ₃	-	Calcium titanate
Cp-Ti	-	Commercially pure titanium
DSLR	-	Digital single-lens reflex camera
FESEM	-	Field emission scanning electron microscope
FIB	-	Focused ion beam
FTIR	-	Fourier transform infrared spectroscopy
GAXRD	-	Glancing angle X-ray diffraction
h	-	hour
H ₂ O ₂	-	Hydrogen peroxide
H ₂ SO ₄	-	Sulphuric acid
HAp	-	Hydroxyapatite
HCL	-	Hydrochloric acid
JCPDS	-	Joint Committee on Powder Diffraction Standards
Na ₂ Ti ₃ O ₇	-	Sodium titanate
NaOH	-	Sodium hydroxide
SBF	-	Simulated body fluid
Ti	-	Titanium
TiO ₂	-	Titanium dioxide
UV	-	Ultraviolet

UVA	-	Ultraviolet light type C
UVC	-	Ultraviolet light type A
β -GP	-	Beta-glycerophosphate disodium salt pentahydrate

CHAPTER 1

INTRODUCTION

1.1 Background

Titanium and its alloys are the most popular implant material due to its superior properties such as biocompatibility, good mechanical properties, low modulus of elasticity, and high corrosion resistance compared to other metals (Liu *et al.*, 2004; Geetha *et al.*, 2009 & Mohammad *et al.*, 2012). There has been increased use of titanium, particularly as dental implants, cochlear replacements, screws for orthodontic surgery, bone fixation, artificial heart valves, and surgical instruments (Patel & Gohil, 2012). Figures 1.1 and 1.2 show the applications of titanium within the biomedical industry. However, titanium is a bio-inert material and does not allow significant bone apposition after implantation (Mohammad *et al.*, 2012). The formation of a thin and passive titanium dioxide (TiO₂) layer occurs upon exposure of titanium to atmospheric conditions (Park *et al.*, 2013).

TiO₂ is the most popular photocatalytic material due to its outstanding properties such as low cost, high stability, high photocatalytic performance, and strong oxidation ability (Augugliaro *et al.*, 2010). Titanium dioxide (TiO₂) exists as three main crystalline phases, namely anatase, brookite, and rutile, of which rutile is the most common and stable form (Diebold, 2013). The band gaps for anatase and rutile TiO₂ are 3.20 eV and 3.02 eV, respectively (Hanaor & Sorrell, 2011). Hence, a number of research had been conducted on photocatalytic performance of TiO₂ due

to its wider band gap energy. Most research has been conducted on the photocatalytic properties of anatase and rutile TiO_2 compared to those on brookite TiO_2 (Diebold, 2013 & Koelsch *et al.*, 2004).

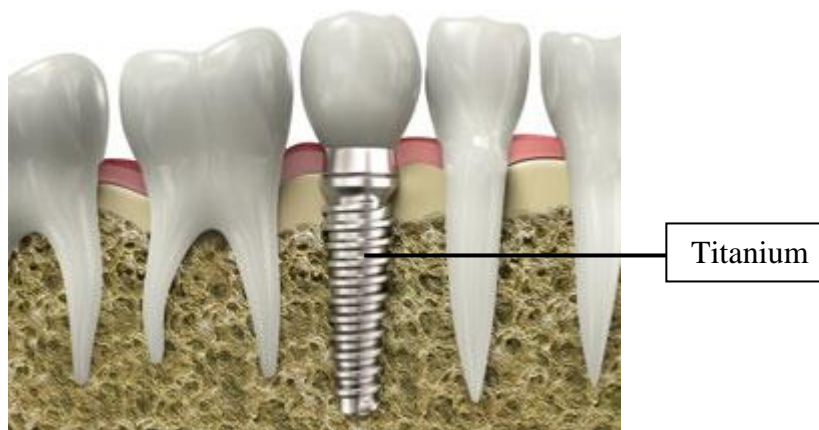


Figure 1.1: Artificial bone screw (Liu *et al.*, 2004).



Figure 1.2: Artificial hip joint (Liu *et al.*, 2004).

The surface of the implant plays a crucial role in promoting osseointegration. Osseointegration is important to ensure the implants integrated into bone for long-term successful clinical outcome. Properties such as porous, rough, high crystallinity, and high hydrophilicity are ideal to enhance the osseointegration process (Elias, 2010; Ehrenfest *et al.*, 2010 & Kim *et al.*, 2012). A number of efforts have been undertaken using anodic oxidation, alkaline treatment, gel oxidation, and plasma spraying in order to enhance the bioactivity of the titanium (Liu *et al.*, 2010). Among these, anodic oxidation is the simplest and cost-effective method. The anodic oxidation of

titanium is categorised by solid state diffusion in the oxide and/or by dissolution deposition in the electrolyte. Anodic oxidation combines electric field-driven metal and oxygen ion diffusion to form an oxide layer on the anode surface (Liu *et al.*, 2004; Kim & Ramaswamy, 2009). This process thus enhances the adhesion and bonding, improves crystallinity, and increases the corrosion resistance of the inherent oxide layer (Liu *et al.*, 2004). Post implantation, anodised titanium forms a bone-like apatite layer on the surface that bonds to living bone tissue. The composition and structure of bone-like apatite that is formed is very similar to human bone (Kasuga *et al.*, 2002).

In this study, a mixture of β -glycerophosphate disodium salt pentahydrate and calcium acetate monohydrate (β -GP + CA) was used as the electrolyte. For biomedical applications, this solution provides phosphorous and calcium ions that promote bone tissue growth and thereby enhance the anchorage of the implant to the bone (Lee *et al.*, 2015a & Abdullah *et al.*, 2014). The *in vitro* bioactivities of the implant are normally evaluated by using simulated body fluid (SBF). The SBF solution is prepared by following the recipe of Kokubo & Takadama (2006) in order to study the precipitation of bone-like apatite as well as prediction of natural bone growth on the implant.

This study investigates the effect of processing parameters such as applied voltage, current density, anodising time, electrolyte concentration, stirring methods during anodic oxidation, bath temperature, UV light treatment condition and type of additive in electrolyte to improve the biocompatibility of the material as well as to improve the bonding time and reduce the healing time once the material is placed in the body.

1.2 Problem Statements

To date, anodic oxidation of titanium with a mixture of β -GP + CA requires a longer time (more than 300 days) to form bone-like apatite on the surface. This is due to the lack of sufficient nucleation sites on the oxide layer (TiO_2) for the growth of bone-like apatite (Abdullah, 2010). Using a mixture of β -GP + CA as the electrolyte for

preparing anodised titanium, Ishizama and Ogino (1995) observed that bone-like apatite was not formed on the surface of anodised titanium even after soaking in SBF for 300 days. Han *et al.* (2008) also noted the absence of bone-like apatite on the surface of anodised titanium after soaking in SBF for 90 days, and similar results were observed by Huang *et al.* (2007) and Abdullah (2010) after soaking in SBF for 50 days and 7 days, respectively.

In order to address the issues, this research was conducted to explore the effective ways to shorten the time for the growth of bone-like apatite on the surface of anodised titanium and improve the biocompatibility of the titanium. The tendency of the oxide layer to may exhibit bone-like apatite forming ability could be enhanced upon exposure to ultraviolet (UV) irradiation (Han *et al.*, 2008). Therefore, UV light treatment after anodic oxidation and UV irradiation during *in vitro* testing were conducted to elucidate the effect of UV irradiation on the bone-like apatite forming ability. Apart from that, additives such as sulphuric acid (H_2SO_4), hydrogen peroxide (H_2O_2), acetic acid ($C_2H_4O_2$) and sodium hydroxide (NaOH) were used in order to activate the nucleation sites of bone-like apatite.

1.3 Objectives

The present research has the following objectives:

- (a) To investigate the anodic oxidation behaviour of titanium surface in a weak organic acid mixture (β -glycerophosphate + calcium acetate).
- (b) To propose and access a new approach of *in vitro* bioactivation of the anodised titanium in SBF with UV irradiation.
- (c) To explore the effect of stirring methods and bath temperature during anodic oxidation on the surface properties of anodised titanium.
- (d) To investigate the effect of UV light treatment after anodic oxidation on the bone-like apatite forming ability of the anodised titanium.
- (e) To characterise the growth of bone-like apatite on the surface of anodised titanium in SBF.
- (f) To investigate the effect of additives in mixture of β -GP + CA electrolyte on the bone-like apatite forming ability of anodised titanium.

1.4 Scope of Study

The scope of this study is as follows:

- (a) Oxide layers on titanium were produced via anodic oxidation in mixtures of β -GP + CA. The parameters used are as follow:
- Applied voltage : 50-350 V
 - Current density : 10-70 mA/cm²
 - Anodising time : 5-10 min
 - Concentration of β -GP + CA : 0.02 M + 0.2 M and 0.04 M +0.4 M
 - Temperature : ~25°C
- (b) SBF was used to conduct the *in vitro* testing by following Kokubo's recipe. *In vitro* testing were conducted in three different conditions:
- Without UV irradiation
 - With short wavelength (254 nm) UV irradiation
 - With long wavelength (365 nm) UV irradiation
- (c) Different stirring methods and varying bath temperatures were used to investigate the effect of these parameters on the resultant surface properties of the anodised titanium. The parameters used are as follows:
- Stirring Method : Magnetic, Ultrasonic, Water Bath
 - Agitation speed : 300-1500 rpm
 - Ultrasonic amplitude : 20-60 μ m
 - Bath temperature : 4-100°C
- (d) UV light treatment was conducted after anodic oxidation. The parameters used for UV light treatment are as follows:
- pH of solution during UV light treatment : 1-11
**pH of solution was adjusted using H₂SO₄ and NaOH
 - Duration of UV light treatment : 4-12 hours
 - Wavelength of UV irradiation : 365 nm
- (e) UV-treated anodised titanium was soaked in SBF for 7 days. The samples were analysed each day in order to investigate the growth mechanism of bone-like apatite.
- (f) Additives were added to the mixture of β -GP + CA electrolyte to explore

the effect on bone-like apatite forming ability of anodised titanium.

Parameters in this part of the study are as follows:

- Types of additives : H₂SO₄, H₂O₂, C₂H₄O₂ and NaOH
- Molarity of additive : 1 M
- Volume fraction of additives : 12.5-50.0 vol %

(g) The characterisation of anodised titanium were carried out using the following techniques:

- Digital camera - colourisation
- Colourimeter - colourisation
- Field emission scanning electron microscopy (FESEM) - surface morphology
- Focus ion beam (FIB) - cross sectional image
- Glancing angle X-ray diffractometer (GAXRD) - surface mineralogy
- Laser Raman microspectroscopy - surface mineralogy
- Atomic force microscopy (AFM) - surface topography
- Fourier transform infrared spectroscopy (FTIR) - structural characteristic
- Goniometer - surface wettability and surface energy
- UV-VIS spectroscopy - optical properties

1.5 Significance of Study

This section briefly describes the significances of this project with regard to helping in faster recover from injury and aging, and surface modification technology of the biomedical implant.

(a) Injury and aging

Kovan (2008) reported that the most common causes for bone fracture are vehicles accident, severe assault and falls. Meanwhile, Farr & Khosla (2016) claimed that aging is the most significant risk factor for osteoporosis and fractures. This research can assist in helping in the growth of new bone on the implant surface and help the patients experienced bone fracture caused by

accident and osteoporosis to replace fractured bone. Anodisation of titanium in mixture of calcium acetate and β -glycerophosphate will enhance the osseointegration of tissues and bones with the implant titanium and shorten the recovery time of patient suffered injury.

(b) Surface medication technology

This research can show the potential of anodised titanium for biomedical uses. Furthermore, the new approach of *in vitro* testing under UV irradiation on anodised titanium can provide information on the effect of UV irradiation during immersion in SBF.

1.6 Novelty of study

The present work reveals novel methods (UV irradiation and additives addition in β -GP + CA) to enhance the rate of growth of bone-like apatite on the surface of titanium metal anodised in a mixture of β -GP + CA.

Previous researchers (Ishizama & Ogino, 1995; Huang *et al.*, 2007) observed absent of bone-like apatite on anodised surface even after soaking in SBF for more than 300 days. Han *et al.* (2008) and Gao *et al.* (2013) proved that UV irradiation is able to enhance the bioactivity of anodic films. However, better understanding of the effect of UV irradiation on growth of bone-like apatite need to be elucidated due to absent of studies on investigating the effect of UV irradiation during *in vitro* testing.

Therefore, the study was carried out was also able contribute new knowledge in biomaterials research field and propose novel methods to accelerate the growth of bone-like apatite. In this study, highly crystallised bone-like apatite was fully covered on the anodised surface after soaking in SBF with UV irradiation for 7 days.

Moreover, there are no available study and literature with regards to effect of additives addition in β -GP + CA electrolyte on bone-like apatite forming ability of anodised titanium. In this study, H_2SO_4 , H_2O_2 , $C_2H_4O_2$ and NaOH were added in mixture of β -GP + CA. It was found that addition of additives in β -GP + CA electrolyte is capable to accelerate the formation of highly crystallised bone-like apatite on anodised surface in 7 days only.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

Titanium and its alloys have been widely used in biomedical applications as implant materials due to its good biocompatibility with hard tissue. However, titanium and its alloys do not facilitate osseointegration since the surface of machined titanium is smooth, low in crystallinity, hydrophobic, and poor in bioactivity. Consequently, machined implants do not promote significant better bone apposition (Liu *et al.*, 2004). Therefore, it is necessary to conduct surface modification through anodic oxidation in order to produce micro-rough, highly crystalline, hydrophilic, and bioactive surfaces. This particular mechanism will enhance the process of osseointegration. Anodic oxidation is a simple and low-cost surface modification method for titanium-based implants and has been widely used for dental implants and medical fastener (Kim & Ramaswamy, 2009). *In vitro* and *in vivo* tests proved that anodised titanium implants showed a considerable improvement in their osseointegration capability as compared to the machined titanium implants (Kim & Ramaswamy, 2009).

2.2 Biomaterials

2.2.1 Overview of Biomaterials

Biomaterials can be defined as “*any substance (other than a drug) or combination of substances, synthetic or natural in origin, which can be used for any period of time, as a whole or as a part of a system which treats, augments, or replace any tissue, organ, or function of the body*” (Boretos & Eden, 1984).

Biomaterials in the form of implants are widely used to replace, repair and restore the damaged organs or tissues and thus improve the life quality of the patient. For blood contact applications, biomaterials are inserted into blood vessels or devices that are permanently implanted to remove and return the blood from the body. For soft tissue applications, biomaterials are implanted to augment or redefine the damaged tissue. On the other hand, for orthopaedic and dental applications, biomaterials are implanted to repair the defective parts of the body (Nascimento *et al.*, 2007). Figure 2.1 presents the human anatomy and organs where biomedical materials are used. Biomaterials are very important for improving the quality and longevity of human life (Manivasagam *et al.*, 2010).

Basically, biomaterials can be divided into three categories which are metals, ceramics and polymers. Each biomaterials has its own unique functions whether for hard or soft tissue implants. The selection of biomaterials is important in order to provide true biological and mechanical match for living tissue. Table 2.1 shows the comparison among metals, ceramics and polymers biomaterials. Table 2.2 shows the biomedical application of metals, ceramics and polymers biomaterials (Bauer, 2013).

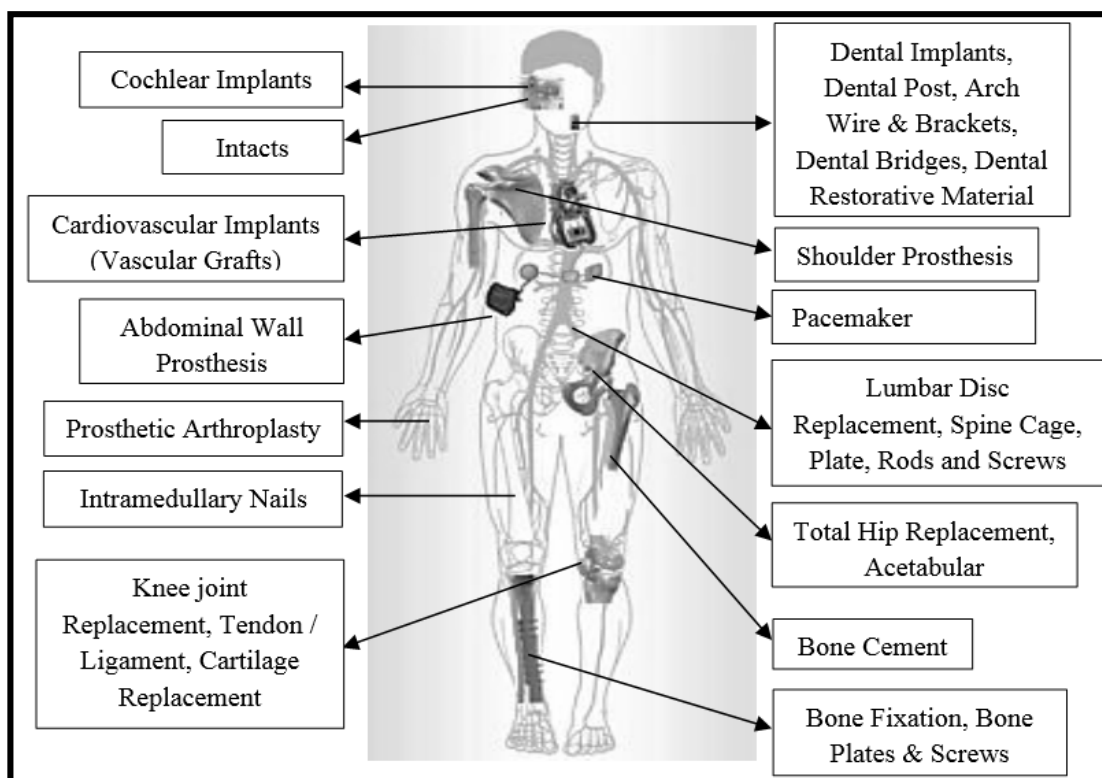


Figure 2.1: Implants in the human body (Patel & Gohil, 2012).

Table 2.1: Advantages and disadvantages of metals, ceramics and polymers for biomedical applications (Nallaswamy, 2008)

Materials	Advantages	Disadvantages
Metals	High strength, high ductility biocompatibility,	Low corrosion resistance, may disrupt the interfacial attachment.
Ceramics	Biocompatibility, minimal thermal and electrical conductivity; modulus of expansion, colour and chemical composition are similar to bone.	Low mechanical, tensile and shear strength under fatigue loading, low attachment strengths for some coatings with the substrate interface.
Polymers	Low term experience, biocompatibility, ability to control properties through compositional means	Porous polymers undergo elastic deformation and lead to closing and opening of regions intended for tissue growth, difficult to clean contaminations

Table 2.2: Example of metal, ceramic, and polymer biomaterial use for biomedical applications (Bauer, 2013)

No	Material	Medical applications
<i>Metals</i>		
1	Cobalt – chromium alloys	Artificial heart valves, dental prosthesis, orthopaedic fixation plates, artificial joint components, vascular stents
2	Stainless steel	Dental prostheses, orthopaedic fixation plates, vascular stents
3	Titanium alloys	Artificial heart valves, dental implants, artificial joint components, orthopaedic screws, pacemaker cases, vascular stents
4	Gold or platinum	Dental fillings, electrodes for cochlear implants
5	Silver–tin–copper alloys	Dental amalgams
<i>Ceramics</i>		
6	Aluminium oxides	Orthopaedic joint replacement, orthopaedic load-bearing implants, implant coatings, dental implants
7	Zirconium oxides	Orthopaedic joint replacement, dental implants
8	Calcium phosphates	Orthopaedic and dental implant coatings, dental implant materials, bone graft substitute materials
9	Bioactive glasses	Orthopaedic and dental implant coatings, dental implants, facial reconstruction components, bone graft substitute materials, bone cements
<i>Polymers</i>		
10	Polyethylene	Orthopaedic joint implants, syringes
11	Polypropylene	Heart valves, sutures, syringes
12	Polydimethylsiloxane	Breast implants, contact lenses, knuckle replacements, heart valves, artificial hearts
13	Polyethyleneterephthalate	Vascular grafts, sutures, blood vessels
14	Polyethyleneglycol	Pharmaceutical fillers, wound dressings
15	Polytetrafluoroethylene	Vascular grafts, sutures
16	Collagen	Orthopaedic repair matrices, nerve repair matrices, tissue engineering matrices
17	Hyaluronic acid	Orthopaedic repair matrices
18	Elastin	Skin repair matrices
19	Fibri	Haemostatic products, tissue sealants
20	Chitosan	Wound dressing
21	Alginate	Wound dressing

2.2.2 Important Properties of Biomaterials for Implants

The biomaterials used for implant must possess important properties such as biocompatibility, good mechanical properties, and non-toxicity for a long term usage in human body without any negative effects. Table 2.3 briefly describes the important properties of biomaterials (Patel & Gohil, 2012).

Table 2.3: Important properties of biomaterials for use as implants (Patel & Gohil, 2012; Basu & Nath, 2009)

Properties	Brief Description
Host Response	<p>Response of the host organism either local or systemic to the implanted material. There are 3 types of host response:</p> <p>a) <i>Bioinert / biotoletant</i></p> <ul style="list-style-type: none"> • Unable to induce any interfacial biological bond between implant and bone. • Examples: alumina, titanium and zirconia. <p>b) <i>Bioactive</i></p> <ul style="list-style-type: none"> • Able to attach directly with body tissues and form chemical and biological bonds during early stages of the post implantation period. • Examples: 45S5 bioglass and calcium phosphates. <p>c) <i>Bioresorbable</i></p> <ul style="list-style-type: none"> • Gradually resorbed before they finally disappear and are totally replaced by new tissue <i>in vivo</i>. • Examples: bone cement and tricalcium phosphate.
Biocompatibility	Ability of a material to perform without any adverse host response in a specific application implies harmony with the living system.
Biofunctionality	Ability to withstand load transmission and stress distribution, allowing for movement, controlling of fluid flow of blood, ability to provide space filling, electrical stimuli, light and sound transmission.
Functional Tissue Structure and Pathobiology	Ability to govern the structure of normal and abnormal cells, tissues and organs.
Non - toxicology	Toxicity of biomaterials will cause cell and human death
Sufficient Mechanical Properties	Biomaterials should possess high tensile strength, yield strength, elastic modulus, surface finish, creep, hardness and be easy to manufacture
High Corrosion Resistance	Avoid toxic ions
High Wear Resistance	Avoid implant loosening.

2.3 Metallic Implant Materials

2.3.1 Overview of Metallic Implant Materials

Metals had been used as implant materials for more than 100 years when Lane used metal plate to fix the bone fracture. However, metal implants suffer from corrosion and strength problems (Lane, 1895). In the 1920s, stainless steel was used for these applications (Hermawan *et al.*, 2011). In 1932, cobalt-based alloys such as Vitallium were introduced for biomedical applications (Elias *et al.*, 2008a). Titanium and its alloys were introduced in 1950s and a number of modification methods were applied to alter the alloy composition and surface properties in order to improve the functionality and implant duration in the human body (Geetha *et al.*, 2009). Apart from that, biodegradable metals have been developed to meet the requirements of biomedical applications. Biodegradable metals permit the implants to degrade in biological environments. In term of mechanical properties, biodegradable metals are more suitable for internal bone fixation compared to the biodegradable polymers (Hermawan & Mantovani, 2009). Table 2.4 shows the examples of metallic biomaterials used for implants and their mechanical properties.

Table 2.4: Comparison of mechanical properties of commonly used metals and its alloys for biomedical applications (Hermawan *et al.*, 2011; Nag & Banerjee, 2012)

Metallic Biomaterial	Young's Modulus (GPa)	Yield Strength (MPa)	Ultimate Tensile Strength (MPa)
Stainless Steel	200	170-750	465-950
Co-Cr-Mo	200-230	275-1585	600-1795
Commercially pure Ti	105	692	785
Ti-6Al-4V	110	850-900	960-970
Iron – annealed plate	200	150	210
Fe35Mn alloy, powder	N/A	235	550
Magnesium, annealed sheet	45	90	160
WE43 magnesium alloy, temper T6	44	170	220

2.3.2 Titanium and its Alloys

Titanium and its alloys were widely used as implant materials due to its high biocompatibility and high corrosion resistance. The Young's modulus of titanium and its alloys is only half of that of stainless steel or Co-Cr alloys. However, the properties of titanium are closer to cortical bones (Hanawa, 2008.). The applications of titanium and its alloys as implants includes cochlear replacements, bone and joint replacements, dental implants for tooth fixation, screw parts for orthodontic surgery, bone fixation like nails, screws and plates, artificial heart valves and surgical instruments (Patel & Gohil, 2012). Table 2.5 shows the mechanical properties of the titanium and its alloys for implants.

Table 2.5: Comparison of mechanical properties among titanium and its alloys
(Long & Rack, 1998)

Alloy Designation	Microstructure	Young's Modulus (GPa)	Yield Strength (MPa)	Ultimate Tensile Strength (MPa)
Commercially pure Ti	α	105	692	785
Ti-6Al-4V	α/β	110	850-900	960-970
Ti-6Al-7Nb	α/β	105	921	1024
Ti-5Al-2.5Fe	α/β	110	914	1033
Ti-5Al-.5Fe	Metastable β	74-85	1000-1060	1060-1100
Ti-15Mo-5Zr-3Al	Metastable β	75	870-968	882-975
	Aged $\beta + \alpha$	88-113	1087-1284	1099-1312
Ti-15Mo-2.8Nb-3Al	Metastable β	82	771	812
	Aged $\beta + \alpha$	100	1215	1310
Ti-13Nb-13Zr	α/β	79	900	1030
Ti-15Mo-3Nb-0.3O (21SRx)	Metastable $\beta +$ silicides	82	1020	1020
Ti-35Nb-7Zr-5Ta	Metastable β	55	530	590
Ti-35Nb-7Zr-5Ta-0.4O	Metastable β	66	976	1010

Among all the titanium and its alloys, commercially pure Ti and Ti-6Al-4V are the most commonly used materials for biomedical and implant applications. Although Ti-6Al-4V has high reputation for biocompatibility and corrosion

resistance, it can release ions such as aluminium (Al) and vanadium (V) which are toxic and can cause long term health problems such as Alzheimers disease, neuropathy, and ostemomalacia. These problems affect the long-term use of Ti-6Al-4V for implant applications (Geetha *et al.*, 2009).

On the other hand, commercially pure titanium (Cp Ti) can be considered as the best biomaterial among titanium and its alloys owing to Cp Ti exhibiting the best biocompatible metallic surface. This is due to the build-up of a stable and inert oxide layer. Apart from that, Cp Ti also demonstrates good physical properties such as low level of electronic conductivity, high corrosion resistance, thermodynamic state at physiological pH value, low ion formation tendency in aqueous environments, and isoelectric point of the oxide of 5-6 (Elias *et al.*, 2008a). Generally, Cp Ti can be classified into four types which are Cp Ti Grade 1, Cp Ti Grade 2, Cp Ti Grade 3 and Cp Ti Grade 4. Among all types of Cp Ti, Cp Ti Grade 4 has highest ultimate tensile strength and yield strength at 1.0% offset but lowest elongation. The mechanical properties for different types of Cp Ti are presented in Table 2.6.

Table 2.6: Mechanical properties of different grade of Cp Ti (ZAPP Materials Engineering, 2012)

Types of Cp Ti	Ultimate Tensile Strength (MPa)	Yield Strength at 1.0% Offset (MPa)	Elongation (%)
Cp Ti Grade 1	290-410	≥ 200	30
Cp Ti Grade 2	390-540	≥ 270	22
Cp Ti Grade 3	460-590	≥ 350	18
Cp Ti Grade 4	540-740	≥ 410	16

2.3.3 Properties of Titanium Implants

It is well known that titanium and its alloys are one of the popular biomaterials for implants application due to its properties such as biocompatibility, osseointegration, good mechanical properties, low modulus of elasticity, and high corrosion resistance. Nowadays, there is an increasing trend in using titanium implants especially for dental implants and prostheses (Özcan & Hämmerle, 2012). The important

properties of titanium and its alloy for biomedical application are presented in Table 2.7.

Table 2.7: Important properties of titanium in biomedical applications (Mohammed *et al.*, 2012; Oldani & Dominguez, 2012; Ogawa & Nishimura, 2003; Sumner & Galante, 1992; Lilley *et al.*, 1992)

Properties of titanium and its alloys	Description
Biocompatibility	<ul style="list-style-type: none"> • Cp TI, $\alpha + \beta$ and β type • Non-toxic • Hydrated titanium oxide enhanced the growth of calcium phosphorous compounds and accelerated the osseointegration
Osseointegration	<ul style="list-style-type: none"> • Able to integrate well with adjacent bone • Success rate $\approx 65\%$
Mechanical Properties	<ul style="list-style-type: none"> • Able to withstand a variety of loads during physical activities • High strength, high ductility, high fracture toughness, crack resistance, high bending strength, high fatigue resistance, and admission strain (the ratio of yield strength to modulus of elasticity). • Suitable for load bearing or non-load bearing applications.
Low Modulus of Elasticity	<ul style="list-style-type: none"> • Not very high of compared to human bone • Adequate mechanical stress on the adjacent bone can be avoided due to the low modulus of elasticity. • Reduce the probability of bone cells damage
Corrosion Resistance	<ul style="list-style-type: none"> • Protective TiO_2 surface layer

2.3.4 Application of Titanium and its Alloy in Biomedical Industry

Titanium and titanium alloys are widely used in biomedical devices and components, especially as hard tissue replacements and for cardiac and cardiovascular applications. Figures 2.2 to Figure 2.5 show the applications of titanium and its alloys in biomedical applications.

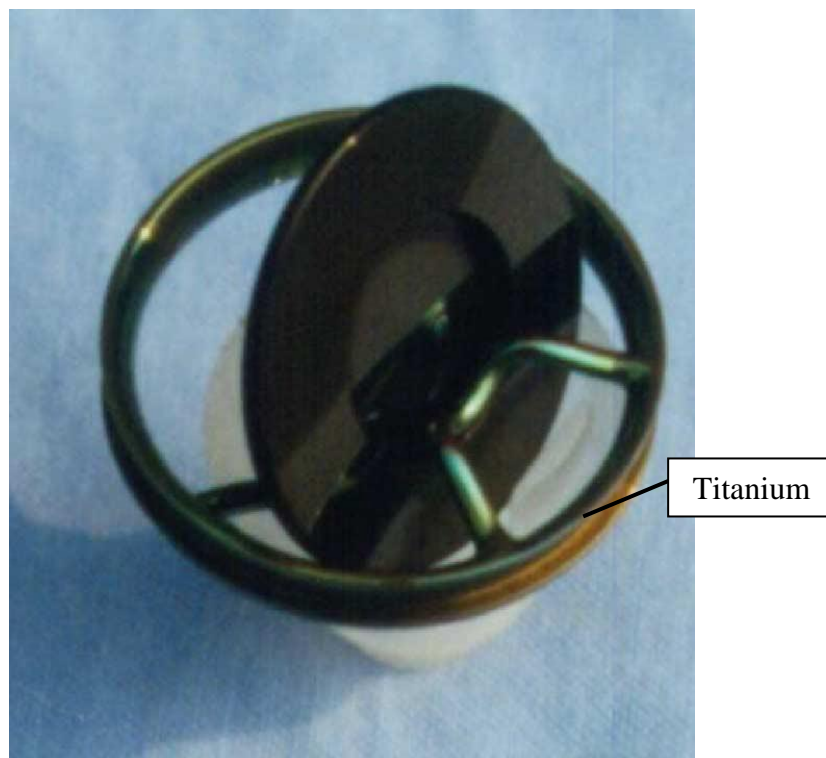


Figure 2.2: Artificial heart valve (Liu *et al.*, 2014).

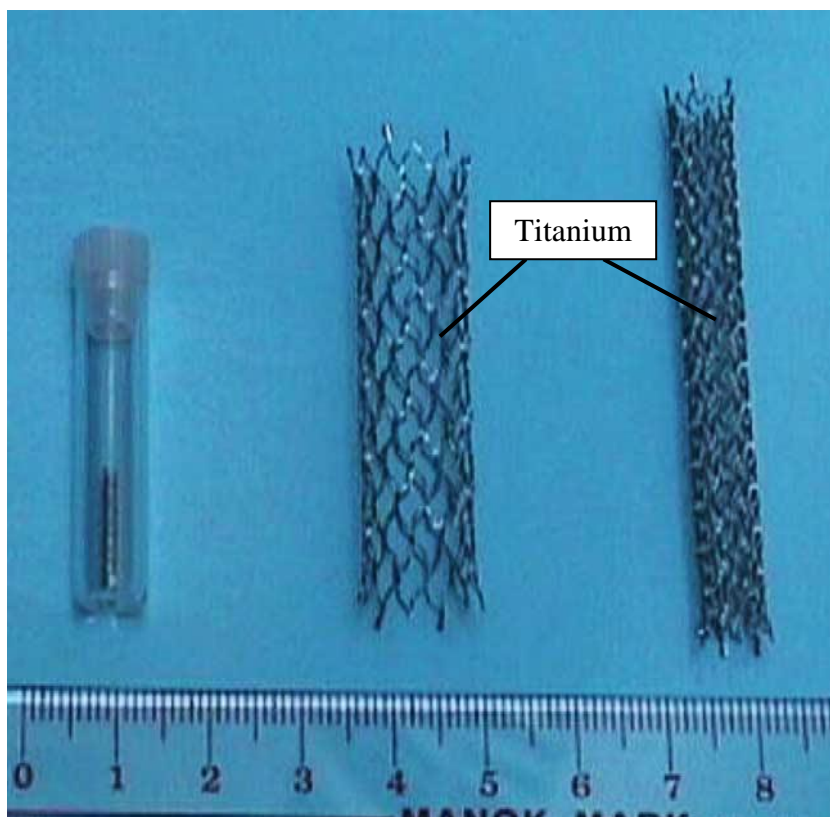


Figure 2.3: Artificial vascular stents (Liu *et al.*, 2014).

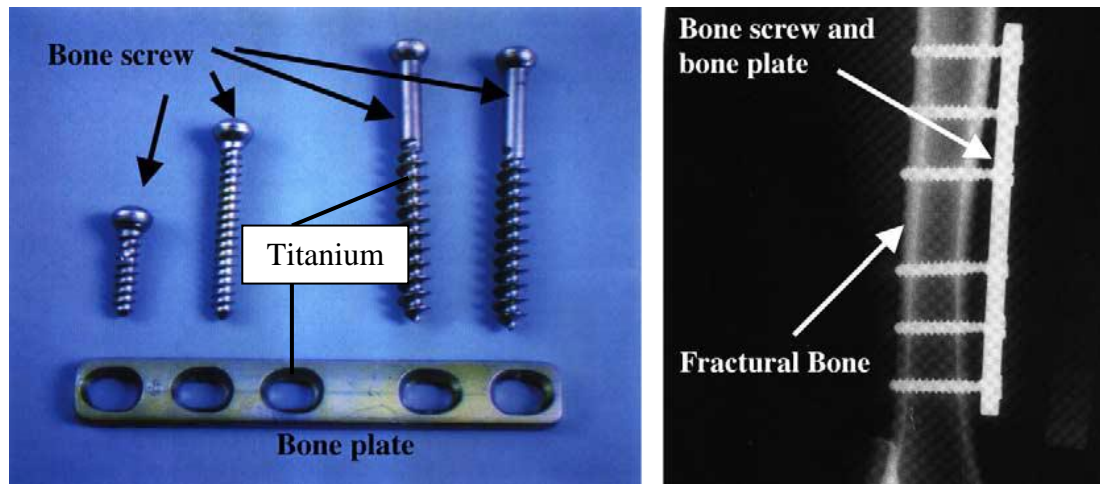


Figure 2.4: Bone screw and bone plate (Liu *et al.*, 2014).

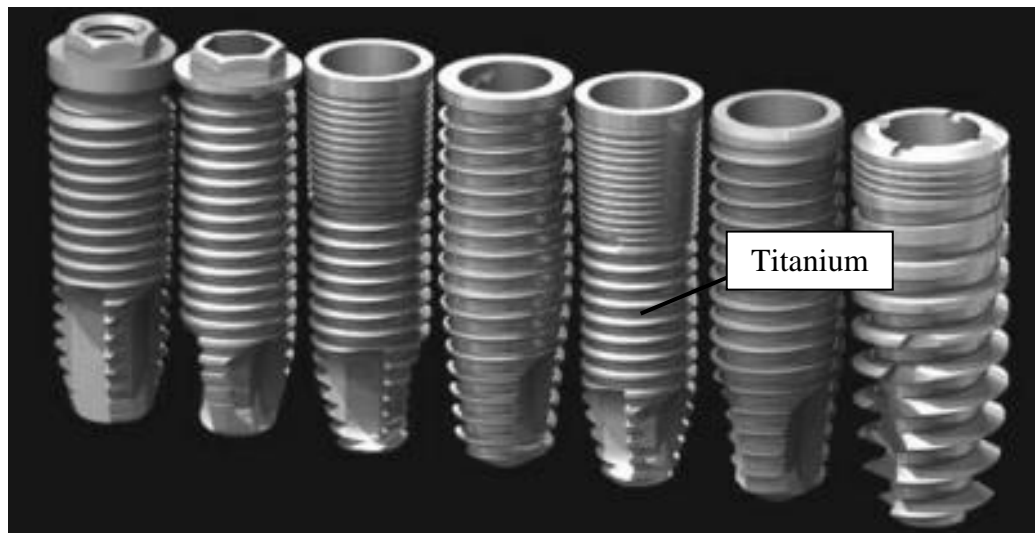


Figure 2.5: Commercial dental implant (Elias *et al.*, 2008a).

2.4 Titanium Dioxide

2.4.1 Overview of Titanium Dioxide

Titanium is an oxide of titanium and is also known as titanium (IV) oxide, titania, titanium white, E171 in food colouring and pigment white 6 in building paints. The photocatalytic property of TiO_2 was first discovered when used as a white pigment in buildings since the pigment bleached under solar irradiation. Since then TiO_2 has been widely used in many industrial applications (Lan *et al.*, 2013).

2.4.2 Polymorphs of Titanium Dioxide

The oxide layer on titanium is a passive film and normally made up of two forms: amorphous or low crystalline stoichiometric TiO_2 . Titanium dioxide has three naturally occurring crystallographic forms which are anatase, brookite and rutile. Rutile is the most common and stable form and only anatase and rutile are manufactured on a large scale.

Rutile structure consists of a slightly distorted hexagonal close packing of oxygen atoms with the titanium atoms occupying half of the octahedral interstices. On the other hand, anatase and brookite are both based on cubic packing of the oxygen atoms with octahedral coordination (Rouquerol *et al.*, 2013). It is reported that anatase is the most active, rutile is less active, and brookite is not active at all for photocatalytic applications (Liu, 2012). Anatase TiO_2 is generally accepted to be a better photocatalyst than rutile and brookite. However, rutile TiO_2 is the most thermodynamically stable phase among all the titanium dioxide forms (Mantz, 2010). Figures 2.6 to 2.8 demonstrate the crystal lattice structures of rutile, anatase, and brookite TiO_2 . Table 2.8 compares the properties between rutile, anatase, and brookite forms of TiO_2 .

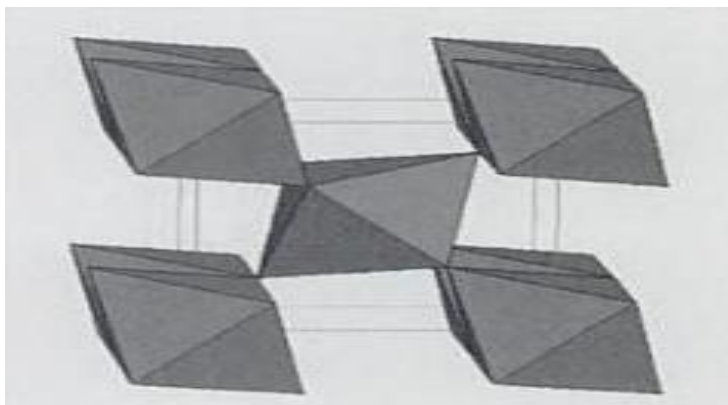


Figure 2.6: Structure of rutile TiO₂ (Winkler, 2003).

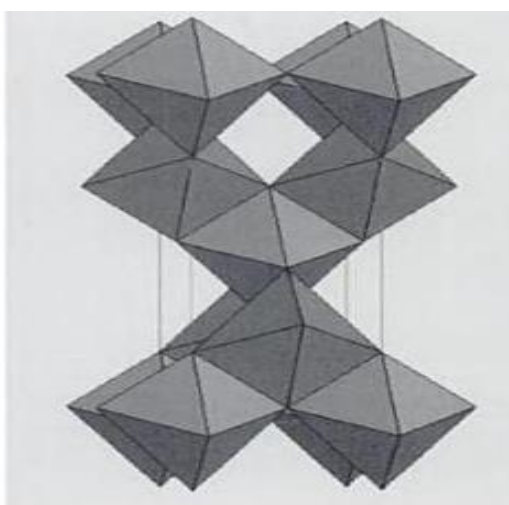


Figure 2.7: Structure of anatase TiO₂ (Winkler, 2003).

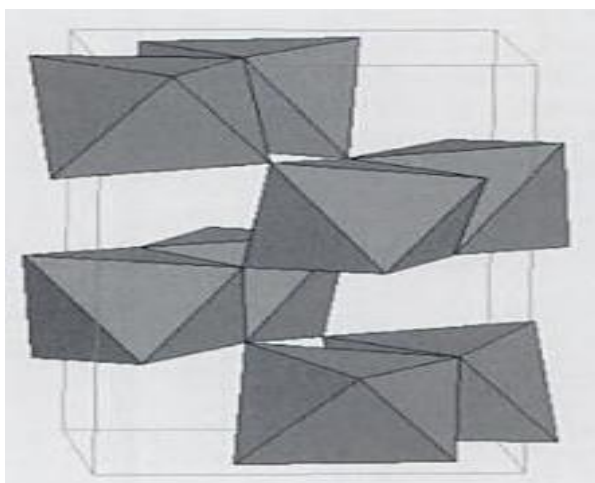


Figure 2.8: Structure of brookite TiO₂ (Winkler, 2003).

Table 2.8: Properties of rutile, anatase, and brookite TiO₂ (Winkler, 2003)

Properties	Rutile TiO ₂	Anatase TiO ₂	Brookite TiO ₂
Density (g/cm ³)	4.2 – 4.3	3.8 – 3.9	3.9 – 4.1
Point group according to Schonflies	D _{4h}	D _{4h}	D _{2h}
a (nm)	0.4594	0.3785	0.9184
b(nm)	0.4594	0.3785	0.5447
c (nm)	0.2958	0.9514	0.5245
Volume of the elementary cell (nm ³)	62.07	136.25	257.38
Molar volume (cm ³ /mol)	18.693	20.156	19.377
Moh's hardness	6.5 – 7	5.5 – 6.0	5.5 – 6.0
Melting point (°C)	1830 – 1850	Transforms to rutile	Transforms to rutile

2.4.3 Photocatalytic Properties of Titanium Dioxide

The Singh (2008) defined photocatalysis as a process in which light is used to activate a substance, the photocatalyst, which modifies the rate of a chemical reaction without being involved itself in the chemical transformation. Photocatalysis can be classified as an advanced oxidation process. Photocatalysis in the presence of an irradiated semiconductor has proven to be effective in the field of environmental remediation. Semiconductors are superior photocatalyst due to its favourable combination of electronic structure, light absorption properties, charge transport characteristics, and long lifetimes. In fact, the irradiation of a semiconductor oxide with light will produce hydroxyl radicals on the catalyst surface (Augugliaro *et al.*, 2010).

Photocatalysts are widely used in common industrial applications such as photocatalytic water splitting, purification of pollutants, photocatalytic self-cleaning, photocatalytic antibacterial, photo-induced super hydrophilicity, and photosynthesis (Lan *et al.*, 2013). To date, researchers in the photocatalysis field have clarified the following advantages of photocatalysis (Kaneko & Okura, 2002).

- (a) Multiple process such as reduction and oxidation, proceed successively in a one pot reaction

- (b) Catalysts can be separated and reused easily
- (c) The reactions proceed at ambient temperature under atmospheric pressure
- (d) Unlike ordinary organic synthetic procedures, water can be used as a solvent and this enables the use of water-soluble organic substrates
- (e) Sustainable and environmental friendly chemical processes
- (f) Inexpensive
- (g) Minimal infrastructural requirements

Semiconductors such as titanium oxide (TiO_2), zinc sulphide (ZnS), strontium titanate (SrTiO_3), zinc oxide (ZnO), zirconium dioxide (ZrO_2), cadmium sulphide (CdS), molybdenum disulfide (MoS_2), iron (III) oxide (Fe_2O_3), tungsten trioxide (WO_3), has been widely used as photocatalysts. In fact, the photocatalytic properties of the photocatalyst is strongly dependent on the band gap, energy level locations, mean life time, and mobility of electron and holes, light absorption coefficient, nature of the interface, as well as the method of preparation. Figure 2.9 shows the band gaps of different semiconductors (Augugliaro *et al.*, 2010).

An ideal photocatalyst should present the following characteristics (Augugliaro *et al.*, 2010):

- (a) High reaction rate with wider band gap
- (b) Photostability
- (c) Chemical and biological inactivity
- (d) Low cost
- (e) Non-toxic and harmless

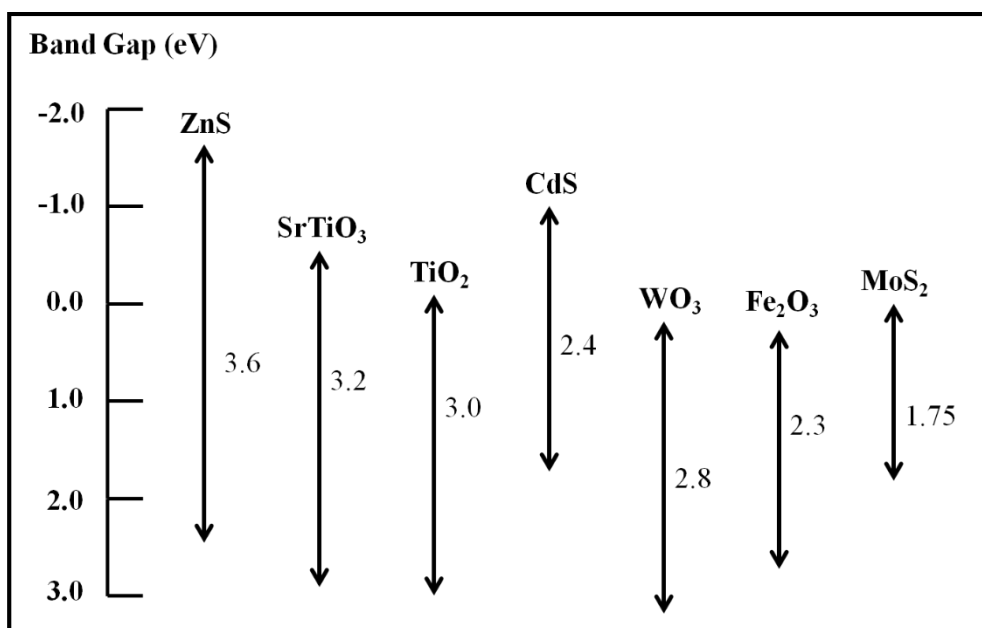


Figure 2.9: Band gap for commonly used photocatalysts (Augugliaro *et al.*, 2010).

The photocatalyst will produce pairs of electrons and holes after it absorbs the UV irradiation from the sunlight or illuminated light source. The electrons in the valance band of the photocatalyst become energetic after irradiation by UV. The electron will be excited to the conduction band and thus creating negative electron (e^-) and positive hole (h^+) pairs. The electrons and holes can recombine and can release the absorbed heat without any chemical effects. The valance band hole is strongly oxidising. However, the conduction band electron is strongly reducing. The band gap is the energy difference between the valance band and conduction band. The positive hole of the photocatalyst can react with water molecules to form hydrogen gas and hydroxyl radicals ($\bullet\text{OH}$). The $\bullet\text{OH}$ radicals are able to rapidly attack the pollutants at the solution surface. On the other hand, the negative electrons will react with the oxygen molecule and form superoxide anions (O_2^-). The process will continue as long as there is irradiation (Augugliaro *et al.*, 2010 & Al-Rasheed, 2005). Figure 2.10 shows the simplified mechanism for the photocatalytic process of a semiconductor catalyst.

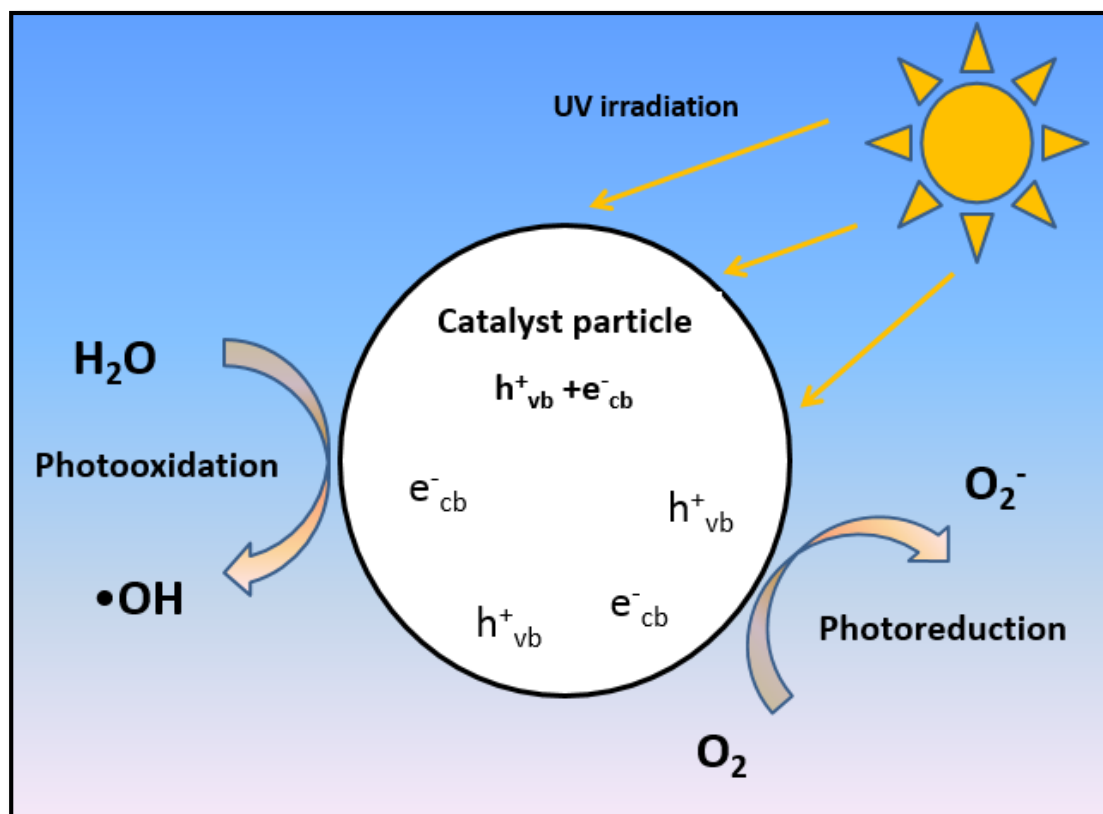


Figure 2.10: Mechanism of the photocatalytic process (re-illustrated from Al-Rasheed, 2005).

The equations 2.1 to 2.10 show chemical reactions that occur during the photocatalytic process at the TiO_2 -water interface. Generally, $\bullet\text{OH}$, $\bullet\text{O}_2^-$ and H_2O_2 are the key reactive oxygen species (ROS) are formed during the photocatalytic process (Augugliaro *et al.*, 2010 & Cai, 2013).

- TiO_2 reacts with UV light and produces pairs of free electrons ($e^-_{(\text{CB})}$) and positively charged holes ($h^+_{(\text{VB})}$) as shown in Equation 2.1.



- Equation 2.2 and Equation 2.3 show the water molecular or hydroxide ions trapped in the positively charged hole and form the hydroxyl radicals ($\bullet\text{OH}$)



- The Ti^{4+} reacts with the conduction band electron and is reduced to Ti^{3+} as shown in equation 2.4.



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