

# Bone repair and ultrasound stimulation : an insight into the interaction of LIPUS with the lacuno-canalicular network of cortical bone through a multiscale computational study.

Cécile Baron<sup>1</sup>, Carine Guivier-Curien<sup>2</sup>, Vu-Hieu Nguyen<sup>3</sup>, Salah Naili<sup>3</sup>

<sup>1</sup>Aix-Marseille Université, CNRS, ISM UMR 7287, Marseille France

<sup>2</sup>Aix-Marseille Université, CNRS, Ecole Centrale, IRPHE UMR 7342, Marseille France

<sup>3</sup>Université Paris Est, MSME UMR 8208 CNRS, Créteil France

Monastery Banz, June 29<sup>th</sup>, 2017

## Ultrasound waves and living tissues

UltraSounds (US) interact with living tissues : destroy (HIFU) and repair (LIPUS)

*What* is LIPUS ? Low Intensity Pulsed Ultrasound Stimulation

LIPUS stimulates bone healing :

- Large literature (*Duarte 1983, Pilla et al. 1990, Heckman et al. 1994, Takikawa et al. 2000, Hemery et al. 2011, ...*)
- FDA approval since 1994
- Commercial device : Exogen ®

## Ultrasound waves and living tissues

UltraSounds (US) interact with living tissues : destroy (HIFU) and repair (LIPUS)

**What** is LIPUS ? **L**ow **I**ntensity **P**ulsed **U**ltrasound **S**timulation

LIPUS stimulates bone healing :

- Large literature (*Duarte 1983, Pilla et al. 1990, Heckman et al. 1994, Takikawa et al. 2000, Hemery et al. 2011, ...*)
- FDA approval since 1994
- Commercial device : Exogen ®

*What mechanisms are responsible ?*

## Ultrasound waves and living tissues

UltraSounds (US) interact with living tissues : destroy (HIFU) and repair (LIPUS)

**What** is LIPUS ? **L**ow **I**ntensity **P**ulsed **U**ltrasound **S**timulation

LIPUS stimulates bone healing :

- Large literature (*Duarte 1983, Pilla et al. 1990, Heckman et al. 1994, Takikawa et al. 2000, Hemery et al. 2011, ...*)
- FDA approval since 1994
- Commercial device : Exogen ®

**What** mechanisms are responsible ?

Thermal effects and Mechanical effects

## Ultrasound waves and living tissues

UltraSounds (US) interact with living tissues : destroy (HIFU) and repair (LIPUS)

**What** is LIPUS ? **L**ow **I**ntensity **P**ulsed **U**ltrasound **S**timulation

LIPUS stimulates bone healing :

- Large literature (*Duarte 1983, Pilla et al. 1990, Heckman et al. 1994, Takikawa et al. 2000, Hemery et al. 2011, ...*)
- FDA approval since 1994
- Commercial device : Exogen ®

**What** mechanisms are responsible ?

~~Thermal effects~~ and **Mechanical effects**

*But how ?*

*Open question !*

*(Claes et al. 2007, Padilla et al. 2014)*

## Ultrasound waves and living tissues

UltraSounds (US) interact with living tissues : destroy (HIFU) and repair (LIPUS)

**What** is LIPUS ? **L**ow **I**ntensity **P**ulsed **U**ltrasound **S**timulation

LIPUS stimulates bone healing :

- Large literature (*Duarte 1983, Pilla et al. 1990, Heckman et al. 1994, Takikawa et al. 2000, Hemery et al. 2011, ...*)
- FDA approval since 1994
- Commercial device : Exogen ®

**What** mechanisms are responsible ?

~~Thermal effects~~ and **Mechanical effects**

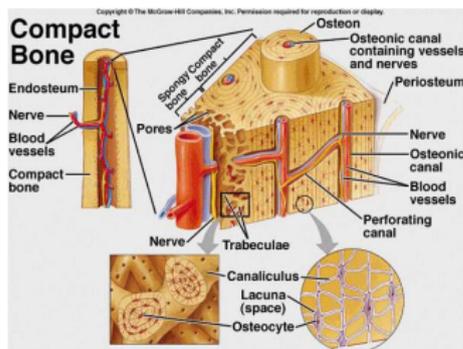
**But how ?**

**Open question !**

(*Claes et al. 2007, Padilla et al. 2014*)

# Bone Tissue

**How** is cortical bone tissue organized ?



- Porous and multiscale :
  - ▶ vascular porosity (HV) :  
Havers and Volkman canals ( $\varnothing \approx 100 \mu\text{m}$ )
  - ▶ lacuno-canalicular network (LCN) :  
lacunae ( $\varnothing \approx 10 \mu\text{m}$ ) + canaliculi ( $\varnothing < 1 \mu\text{m}$ )
- Bone cells : osteocytes

## Mechanotransduction

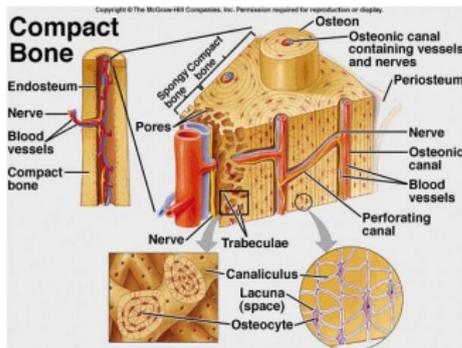
Fluid shear stress on osteocyte  $\rightarrow$  bone remodelling

*Cowin et al. 1991, Klein-Nulend et al. 1995*

Cortical bone = double-level porous medium

# Bone Tissue

**How** is cortical bone tissue organized ?

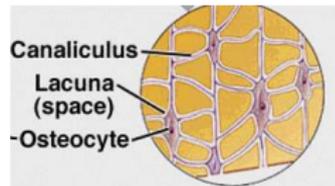


- Porous and multiscale :
  - ▶ vascular porosity (HV) :  
Havers and Volkman canals ( $\varnothing \approx 100 \mu\text{m}$ )
  - ▶ lacuno-canalicular network (LCN) :  
lacunae ( $\varnothing \approx 10 \mu\text{m}$ ) + canaliculi ( $\varnothing < 1 \mu\text{m}$ )
- Bone cells : osteocytes

## Mechanotransduction

Fluid shear stress on osteocyte  $\rightarrow$  bone remodelling

*Cowin et al. 1991, Klein-Nulend et al. 1995*



**Cortical bone = double-level porous medium**

**Hypothesis : US excitation at meso-scale level induces fluid shear stress on osteocytes at micro-scale level**

Locks :

- Multiscale phenomena to understand and analyze
- Multiphysics : acoustics, fluid and structure
- Coupling multiscale and multiphysics

**Hypothesis : US excitation at meso-scale level induces fluid shear stress on osteocytes at micro-scale level**

Locks :

- Multiscale phenomena to understand and analyze
- Multiphysics : acoustics, fluid and structure
- Coupling multiscale and multiphysics

Development of **relevant FE models** to understand LIPUS mechanisms

**Hypothesis : US excitation at meso-scale level induces fluid shear stress on osteocytes at micro-scale level**

Locks :

- Multiscale phenomena to understand and analyze
- Multiphysics : acoustics, fluid and structure
- Coupling multiscale and multiphysics

Development of **relevant FE models** to understand LIPUS mechanisms

# Models

## Biphasic medium Model + US : ModBone

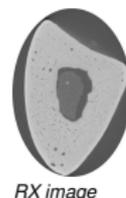
- Vascular pores (HV) = fluid phase  
HV pores reconstructed from binarized  $\mu$ CT images (22.5  $\mu$ m)
- Poroelastic bone matrix (PBM)  
anisotropic solid (*Scheiner et al. 2015*) + LCN  $\rightarrow$  equivalent medium (Biot's model)

*RX image*

# Models

## Biphasic medium Model + US : ModBone

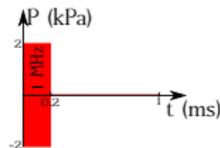
- Vascular pores (HV) = fluid phase  
HV pores reconstructed from binarized  $\mu$ CT images ( $22.5 \mu\text{m}$ )
- Poroelastic bone matrix (PBM)  
anisotropic solid (*Scheiner et al. 2015*) + LCN  $\rightarrow$  equivalent medium (Biot's model)
- Ultrasound stimulation (US) from Exogen device  
f=1 MHz, pressure=2 kPa, duty cycle=20%, pulse duration=1 ms,  
 $\varnothing$ transducer=20 mm



# Models

## Biphasic medium Model + US : ModBone

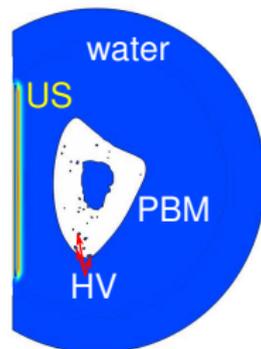
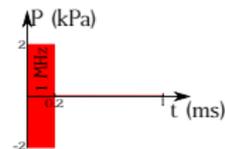
- Vascular pores (HV) = fluid phase  
HV pores reconstructed from binarized  $\mu$ CT images ( $22.5 \mu\text{m}$ )
- Poroelastic bone matrix (PBM)  
anisotropic solid (*Scheiner et al. 2015*) + LCN  $\rightarrow$  equivalent medium (Biot's model)
- Ultrasound stimulation (US) from Exogen device  
 $f=1 \text{ MHz}$ , pressure= $2 \text{ kPa}$ , duty cycle= $20\%$ , pulse duration= $1 \text{ ms}$ ,  
 $\varnothing$ transducer= $20 \text{ mm}$



# Models

## Biphasic medium Model + US : ModBone

- Vascular pores (HV) = fluid phase  
HV pores reconstructed from binarized  $\mu$ CT images ( $22.5 \mu\text{m}$ )
- Poroelastic bone matrix (PBM)  
anisotropic solid (Scheiner et al. 2015) + LCN  $\rightarrow$  equivalent medium (Biot's model)
- Ultrasound stimulation (US) from Exogen device  
 $f=1 \text{ MHz}$ , pressure= $2 \text{ kPa}$ , duty cycle= $20\%$ , pulse duration= $1 \text{ ms}$ ,  
 $\varnothing$ transducer= $20 \text{ mm}$



## Osteocyte Model : ModOst

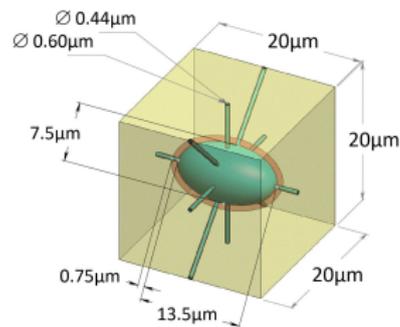
- Osteocyte cell (solid phase)
- Extracellular matrix, ECM (solid phase)
- Interstitial Fluid (IFluid) (fluid phase)

## Osteocyte Model : ModOst

- Osteocyte cell (solid phase)
- Extracellular matrix, ECM (solid phase)
- Interstitial Fluid (IFluid) (fluid phase)

## Osteocyte Model : ModOst

- Osteocyte cell (solid phase)
- Extracellular matrix, ECM (solid phase)
- Interstitial Fluid (IFluid) (fluid phase)



### 2D and 3D coupling between acoustics and fluid and fluid-solid interaction Software : Comsol Multiphysics

- ModBone (2D) : US stimulation at the mesoscale  
Time-dependent problem  
Weak form of wave propagation in poroelastic medium  
+ boundary conditions

*(Nguyen et al. 2010)*

$\Delta x_{\text{bone}} \approx 0.7 \text{ mm}$ ,  $\Delta x_{\text{water}} \approx 0.4 \text{ mm}$  and  $\Delta t \approx 0.1 \mu\text{s}$   
→ 40h to simulate a single cycle propagation.

2D and 3D coupling between acoustics and fluid and fluid-solid interaction  
Software : Comsol Multiphysics

- **ModBone** (2D) : US stimulation at the mesoscale  
Time-dependent problem  
Weak form of wave propagation in poroelastic medium  
+ boundary conditions

(*Nguyen et al. 2010*)

$\Delta x_{\text{bone}} \approx 0.7 \text{ mm}$ ,  $\Delta x_{\text{water}} \approx 0.4 \text{ mm}$  and  $\Delta t \approx 0.1 \mu\text{s}$   
→ 40h to simulate a single cycle propagation.

► input parameters :

US stimulation parameters

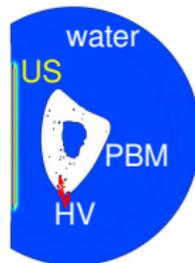
$f=1\text{MHz}$ , pressure=2 kPa, duty cycle=20%, pulse duration=1 ms,  
 $\varnothing_{\text{transducer}}=10 \text{ mm}$

surrounding fluid properties = water

bone material properties = anisotropic poroelasticity

(*Scheiner et al. 2015, Goulet et al. 2008, Nguyen et al. 2010, Cowin et al. 2009*)

► output parameter : iFluid pressure gradient



2D and 3D coupling between acoustics and fluid and fluid-solid interaction  
Software : Comsol Multiphysics

- **ModBone** (2D) : US stimulation at the mesoscale  
Time-dependent problem  
Weak form of wave propagation in poroelastic medium  
+ boundary conditions

(*Nguyen et al. 2010*)

$\Delta x_{\text{bone}} \approx 0.7 \text{ mm}$ ,  $\Delta x_{\text{water}} \approx 0.4 \text{ mm}$  and  $\Delta t \approx 0.1 \mu\text{s}$   
→ 40h to simulate a single cycle propagation.

- ▶ input parameters :

**US stimulation parameters**

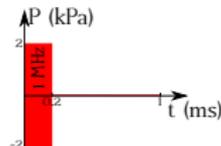
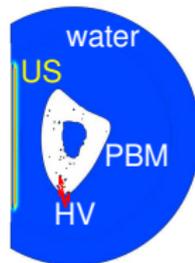
f=1MHz, pressure=2 kPa, duty cycle=20%, pulse duration=1 ms,  
Øtransducer=10 mm

**surrounding fluid properties** = water

**bone material properties** = anisotropic poroelasticity

(*Scheiner et al. 2015, Goulet et al. 2008, Nguyen et al. 2010, Cowin et al. 2009*)

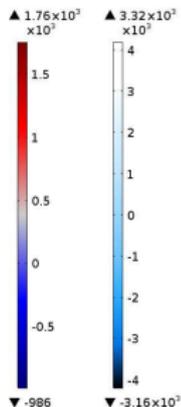
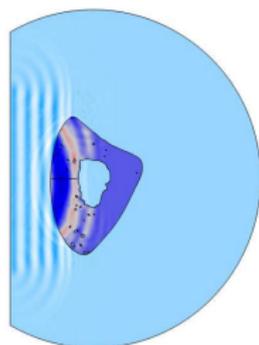
- ▶ output parameter : **IFluid pressure gradient**



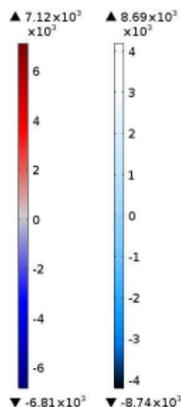
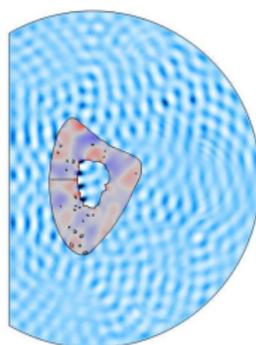
## Results and Discussion : ModBone

### Acoustic pressure and IFluid pressure (Pa)

t = 4  $\mu$ s



t = 20  $\mu$ s



- IFluid pressure (IFluid P) difference induced by US stimulation on 1 cycle

$$\text{Max}|\text{IFluid P}_{\text{periosteum}} - \text{IFluid P}_{\text{endosteum}}| \approx 11000 \text{ Pa}$$

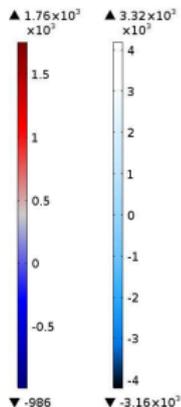
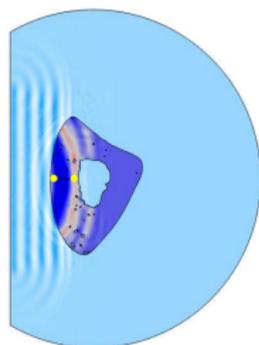
$$\rightarrow \text{IFluid P gradient} = 3.8 \text{ Pa}/\mu\text{m}$$

- IFluid P gradient  $\approx 30 \text{ Pa} / \mu\text{m}$  (Anderson et al. 2005, Verbruggen et al. 2012, 2014)  
→ 8-times lower than previous studies considering physiological mechanical loading.
- Fluid shear stress on osteocyte?

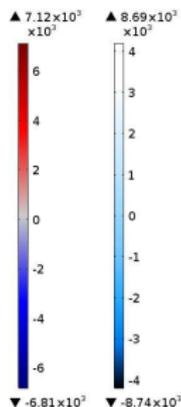
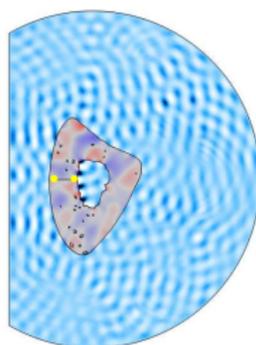
## Results and Discussion : ModBone

### Acoustic pressure and IFluid pressure (Pa)

t = 4  $\mu$ s



t = 20  $\mu$ s



- IFluid pressure (IFluid P) difference induced by US stimulation on 1 cycle

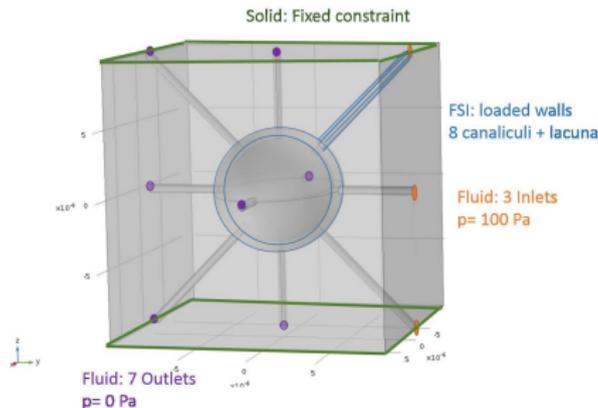
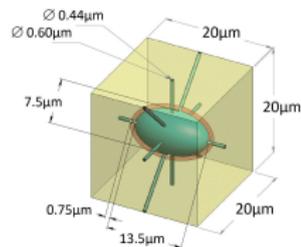
$$\text{Max}|IFluid P_{\text{periosteum}} - IFluid P_{\text{endosteum}}| \approx 11000 \text{ Pa}$$

$$\rightarrow \text{IFluid P gradient} = 3.8 \text{ Pa}/\mu\text{m}$$

- IFluid P gradient  $\approx 30 \text{ Pa} / \mu\text{m}$  (Anderson et al. 2005, Verbruggen et al. 2012, 2014)  
→ 8-times lower than previous studies considering physiological mechanical loading.
- Fluid shear stress on osteocyte ?

## ● ModOst (3D) : Fluid Structure Interaction Model (one-way coupling)

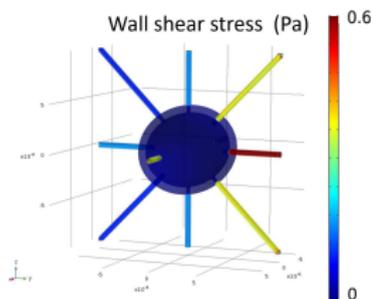
- ▶ input parameter : IFluid P gradient from ModBone :  $3.8 \text{ Pa}/\mu\text{m}$
- ▶ output parameter : fluid shear stress on osteocyte :  $\tau$



IFluid domain : newtonian,  
 $\rho = 997 \text{ kg/m}^3$ ,  
 $\mu = 885 \times 10^{-4} \text{ kg.m}^{-1} . \text{s}^{-1}$

Solid domain : linear elastic,  
ECM :  $E = 16.6 \text{ GPa}$ ,  $\nu = 0.38$  ;  
osteocyte :  $E = 4.47 \text{ kPa}$ ,  $\nu = 0.3$

## Results and Discussion : ModOst



Fluid shear stress on osteocyte  
(cell body and processes)

$$\tau_{max} \approx 0.6 \text{ Pa}$$

(McGarry et al. 2004)

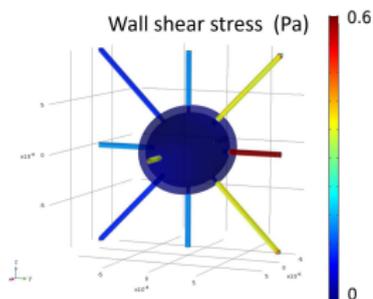
- Shear stress patterns obviously related to simple symmetrical geometry and boundary conditions
- Shear stress levels in agreement with literature and consistent patterns with higher values on processes than on cell body

(Anderson et al. 2005, Verbruggen et al. 2014)

- Theoretical shear stress interval for osteocyte under physiological load : 0.8-3 Pa

(Weinbaum et al. 1994)

## Results and Discussion : ModOst



Fluid shear stress on osteocyte  
(cell body and processes)

$$\tau_{max} \approx 0.6 \text{ Pa}$$

(McGarry et al. 2004)

- Shear stress patterns obviously related to simple symmetrical geometry and boundary conditions
- Shear stress levels in agreement with literature and consistent patterns with higher values on processes than on cell body

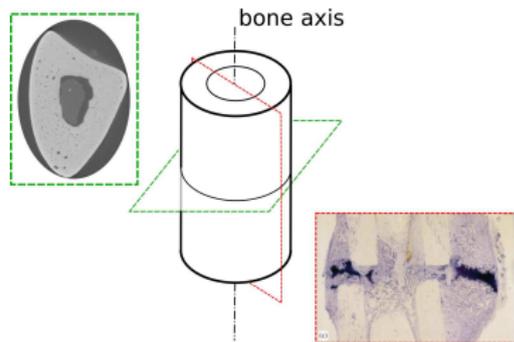
(Anderson et al. 2005, Verbruggen et al. 2014)

- Theoretical shear stress interval for osteocyte under physiological load : **0.8-3 Pa**

(Weinbaum et al. 1994)

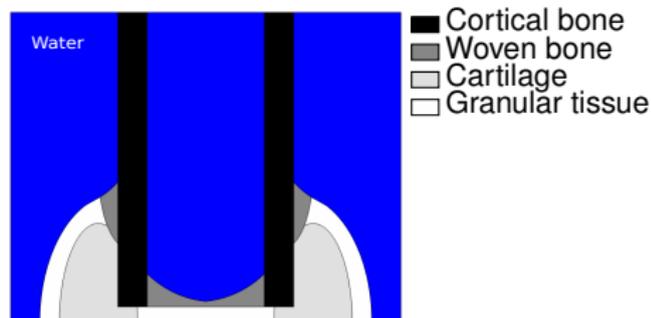
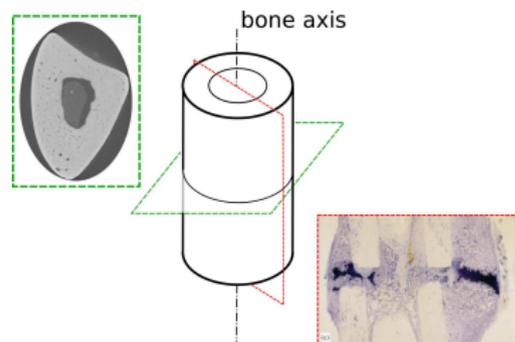
## Limitations of the study

- a realistic model of the bone callus ?
  - ▶ geometry
  - ▶ healing tissues properties



## Limitations of the study

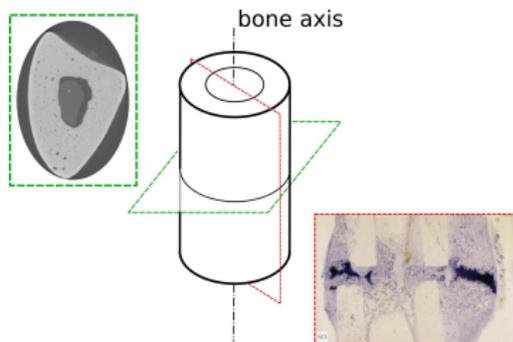
- a realistic model of the bone callus ?
  - ▶ geometry
  - ▶ healing tissues properties



*Bailon-Plaza et al. 2001, Claes et Heigele 1999*

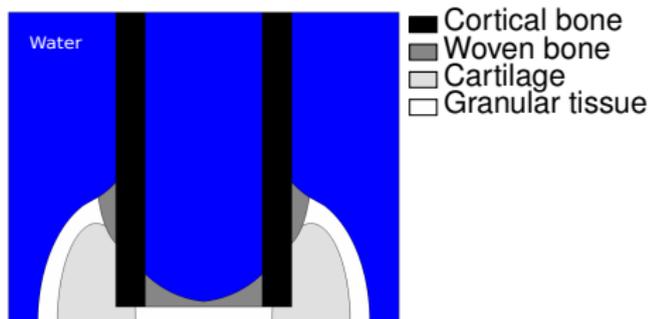
## Limitations of the study

- a realistic model of the bone callus ?
  - ▶ geometry
  - ▶ healing tissues properties

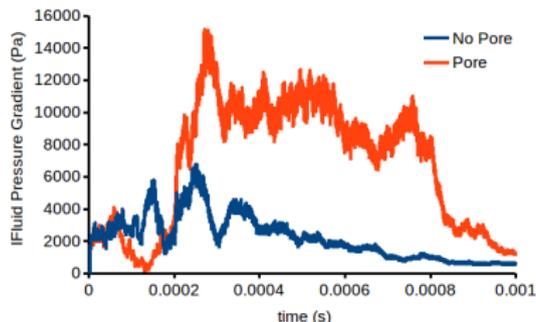


### Vascular porosity ?

*Goulet et al. 2008*

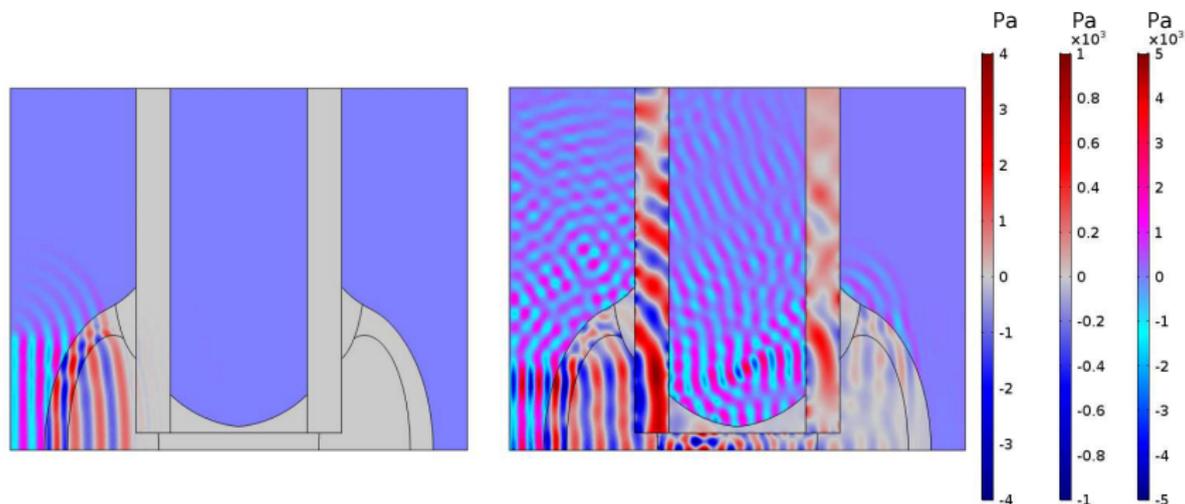


*Bailon-Plaza et al. 2001, Claes et Heigele 1999*



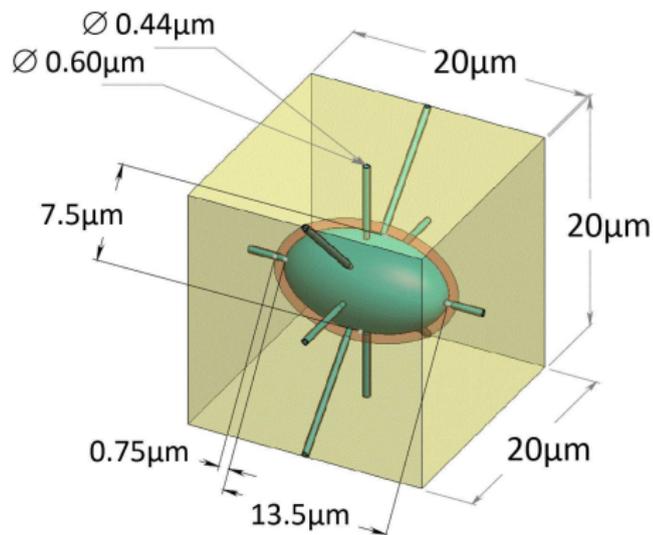
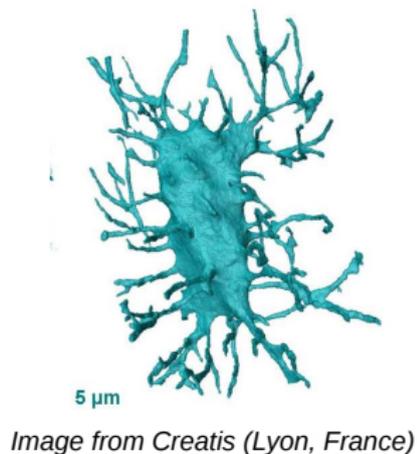
## Limitations of the study

- a realistic model of the bone callus ?



## Limitations of the study

- a realistic model of the lacuno-canalicular system ?



## Conclusion and Perspectives

2-scale numerical model to investigate the mechanical effects of LIPUS on osteocytes.

⇒ Fluid shear stress  $\approx$  **lower than the lower bound of prediction interval under physiological load**

### Poroelectric model and US

- LCN permeability  $2.2 \times 10^{-22} \text{ m}^2$  (Cowin et al. 2009)
- treatment duration (15 min) vs 1 cycle (1 ms) : cumulative effect to investigate
- stimulation frequency higher than physiological loading (1 - 100 Hz)
- pulsed ultrasound : 2 frequencies  $\Rightarrow$  repetition frequency and signal frequency  
pulse duration = 1 ms vs signal period = 1  $\mu$ s

## Conclusion and Perspectives

2-scale numerical model to investigate the mechanical effects of LIPUS on osteocytes.

⇒ Fluid shear stress  $\approx$  **lower than the lower bound of prediction interval under physiological load**

### Poroelastic model and US

- LCN permeability  $2.2 \times 10^{-22} \text{ m}^2$  (Cowin et al. 2009)
- treatment duration (15 min) vs 1 cycle (1 ms) : cumulative effect to investigate
- stimulation frequency higher than physiological loading (1 - 100 Hz)
- pulsed ultrasound : 2 frequencies  $\Rightarrow$  repetition frequency and signal frequency  
pulse duration = 1 ms **vs** signal period = 1  $\mu\text{s}$

1 ms  $\approx$  relaxation time of fluid in canaliculi (Swan et al. 2004)

## Conclusion and Perspectives

2-scale numerical model to investigate the mechanical effects of LIPUS on osteocytes.

⇒ Fluid shear stress  $\approx$  **lower than the lower bound of prediction interval under physiological load**

### Poroelastic model and US

- LCN permeability  $2.2 \times 10^{-22} \text{ m}^2$  (Cowin et al. 2009)
- treatment duration (15 min) vs 1 cycle (1 ms) : cumulative effect to investigate
- stimulation frequency higher than physiological loading (1 - 100 Hz)
- pulsed ultrasound : 2 frequencies  $\Rightarrow$  repetition frequency and signal frequency  
pulse duration = **1 ms vs** signal period =  $1 \mu\text{s}$   
**1 ms  $\approx$  relaxation time of fluid in canaliculi** (Swan et al. 2004)

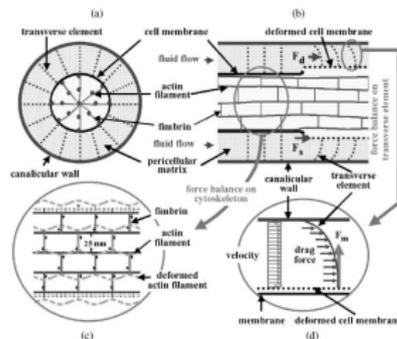
## Conclusion and Perspectives

2-scale numerical model to investigate the mechanical effects of LIPUS on osteocytes.

⇒ Fluid shear stress  $\approx$  **lower than the lower bound of prediction interval under physiological load**

### Osteocyte process model

- Zoom on the osteocyte process into the canaliculi  
→ GAG fibers → **strain amplification**



*You et al. 2001*

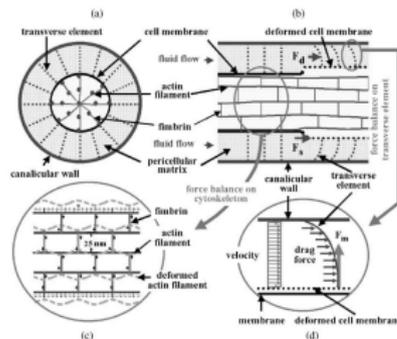
## Conclusion and Perspectives

2-scale numerical model to investigate the mechanical effects of LIPUS on osteocytes.

⇒ Fluid shear stress  $\approx$  **lower than the lower bound of prediction interval under physiological load**

### Osteocyte process model

- Zoom on the osteocyte process into the canaliculi  
 → GAG fibers → **strain amplification**



*You et al. 2001*

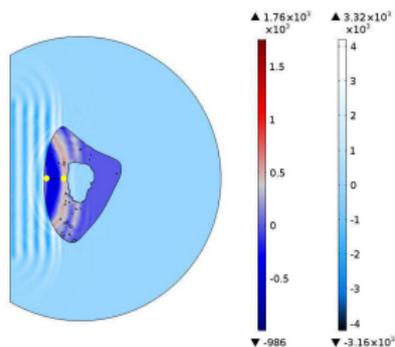
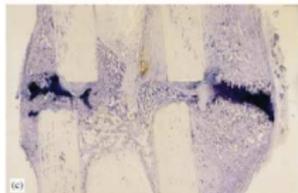
Drag forces  $F_d$

$$F_s = 2\pi a L \tau \approx 16 \cdot 10^{-12} \text{N} \Rightarrow F_d \approx 330 \cdot 10^{-12} \text{N}$$

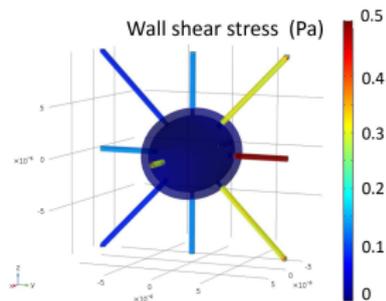
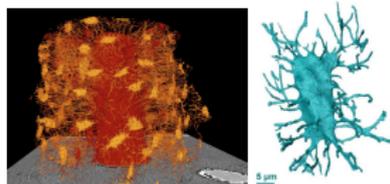
$a = 0.22 \mu\text{m}$  : process radius ;  $L = 20 \mu\text{m}$  : process length.

# Conclusion and Perspectives

## Tissue scale

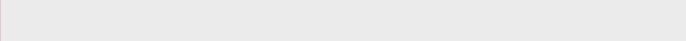


## Microscopic scale



Thank you for your attention.  
Any questions (or answers) ?

[cecile.baron@univ-amu.fr](mailto:cecile.baron@univ-amu.fr)  
[carine.guivier@univ-amu.fr](mailto:carine.guivier@univ-amu.fr)



## Equations

- Wave propagation in the anisotropic poroelastic matrix (from *Nguyen et al. 2012*)

The constitutive equations for the anisotropic linear poroelastic material are given by

$$\boldsymbol{\sigma} = \mathbb{C} : \boldsymbol{\epsilon} - \boldsymbol{\alpha} p, \quad (7)$$

$$-\frac{1}{M} p = \nabla \cdot \boldsymbol{w} + \boldsymbol{\alpha} : \boldsymbol{\epsilon}, \quad (8)$$

where  $\mathbb{C}(\boldsymbol{x})$  is the elasticity fourth-order tensor of drained porous material;  $\boldsymbol{\alpha}$ , which is a symmetric second-order tensor, is the Biot effective tensor;  $M$  is the Biot scalar modulus;  $\boldsymbol{\epsilon}(\boldsymbol{x}, t)$  is the infinitesimal strain tensor, which is defined as the symmetric part of  $\nabla \boldsymbol{u}^s$ .

$$\boldsymbol{w} = \phi(\boldsymbol{u}^f - \boldsymbol{u}^s)$$

- boundary conditions : pressure and stress fields continuity + *open pore* condition (continuity of the normal relative velocity between fluid and solid)

## Poroelastic cortical bone properties

Transverse isotropic extralacunar matrix

$$\begin{pmatrix} 22.88 & 10.14 & 0 \\ 10.14 & 29.60 & 0 \\ 0 & 0 & 6.98 \end{pmatrix} (GPa)$$

(Scheiner et al. 2015)

Mass density :  $\rho=1.9 \text{ g/cm}^3$

Isotropic LCN permeability :  $2.2 \times 10^{-22} \text{ m}^2$  (Smith et al. 2002, Cowin et al. 2009)

Other Biot's parameters from NGuyen et al. 2016

$\phi=5\%$ ,  $\alpha_1=0.11$ ,  $\alpha_2=0.15$ ,  $M = 35.6 \text{ GPa}$ .

## Poroelastic healing tissues properties

4 weeks\_ Isotropic solid matrix

- Granular tissue

$$\begin{pmatrix} 2.502 & 2.5 & 0 \\ 2.5 & 2.502 & 0 \\ 0 & 0 & 0.001 \end{pmatrix} \text{ (GPa)}$$

$$\begin{aligned} \phi &= 90\% \\ \alpha_1 &= 0.98 \\ \alpha_2 &= 0.96 \\ M &= 2.2 \text{ MPa} \\ \rho &= 1.01 \text{ g/cm}^2 \end{aligned}$$

- Cartilage

$$\begin{pmatrix} 5.98 & 5.3 & 0 \\ 5.3 & 5.98 & 0 \\ 0 & 0 & 0.34 \end{pmatrix} \text{ (GPa)}$$

$$\begin{aligned} \phi &= 80\% \\ \alpha_1 &= 0.98 \\ \alpha_2 &= 0.96 \\ M &= 2.4 \text{ MPa} \\ \rho &= 1.04 \text{ g/cm}^2 \end{aligned}$$

- Woven bone

$$\begin{pmatrix} 17.1 & 12.9 & 0 \\ 12.9 & 17.1 & 0 \\ 0 & 0 & 2.1 \end{pmatrix} \text{ (GPa)}$$

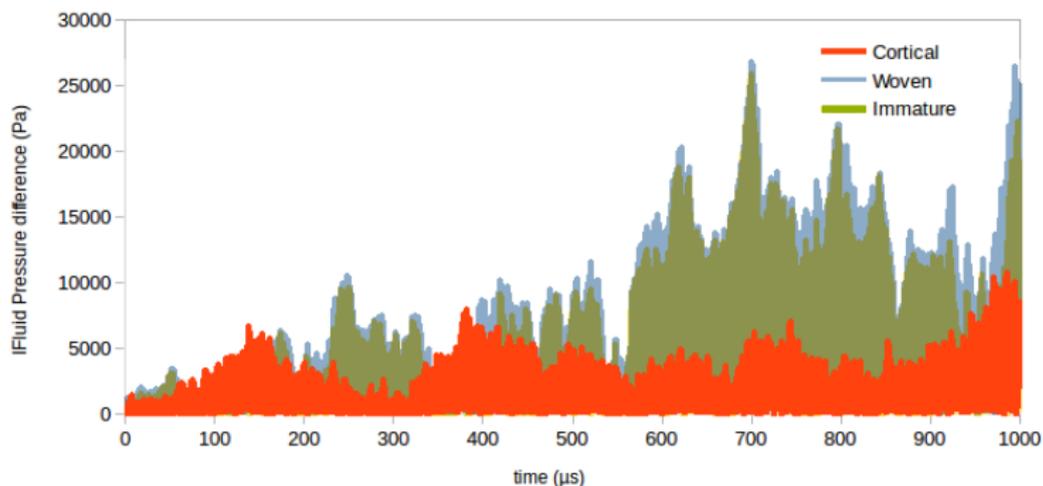
$$\begin{aligned} \phi &= 50\% \\ \alpha_1 &= 0.976 \\ \alpha_2 &= 0.955 \\ M &= 2.55 \text{ MPa} \\ \rho &= 1.25 \text{ g/cm}^2 \end{aligned}$$

## Mechanical properties of healing tissue

	E (GPa)	$\nu$	k (m <sup>2</sup> )	$\rho$	GradPress (Pa/ $\mu\text{m}$ )	$\tau_{max}$ (Pa)
Cortical bone	18	0.28	$2.2 \times 10^{-22}$	0.05	3.8	0.6
Woven bone	9	0.28	$2.2 \times 10^{-22}$	0.05	9	1.4
Immature bone	1	0.325	$10^{-13}$	0.8	8.5	1.3

## Mechanical properties of healing tissue

	E (GPa)	$\nu$	k (m <sup>2</sup> )	$\rho$	GradPress (Pa/ $\mu\text{m}$ )	$\tau_{max}$ (Pa)
Cortical bone	18	0.28	$2.2 \times 10^{-22}$	0.05	3.8	0.6
Woven bone	9	0.28	$2.2 \times 10^{-22}$	0.05	9	1.4
Immature bone	1	0.325	$10^{-13}$	0.8	8.5	1.3



# Mesh

