Bone as a Structural Material

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Polish-American Engineers Association, November 15, 2013

Education

B.S. 1980; M.S. 1982 Univ. of Illinois at Chicago (Civil Engrg.) Ph.D. 1986 Northwestern Univ. (Theor. & Applied Mechanics)

Research Interests

Mechanics of Materials

Phenomena:

- Multiscale Characterization and Modeling of Materials
- Structure-property relations in materials
- Interfaces (slipping, functionally graded ...)
- Randomness in materials microstructure
- Size effects (micro vs. nano)
- Scale and boundary conditions effects

<u>Context</u>: Composite, nanocomposite, and biological materials <u>Applications</u>: health, energy, transportation, defense, ...

Bone: An Introduction

- Bone is a structural material with excellent mechanical properties; it is stiff, strong, tough and light
- Bone is a (nano)composite material
 - Collagen soft and deformable
 - Minerals stiff, strong, but brittle (nanoscale)
 - Non-collagenous proteins
 - Fluids



- Bone has a complex, hierarchical and heterogeneous structure at several different length scales
- Bone is a biological material: a living tissue with evolving structure (due to mechanical, biological & chemical factors)
 - age, diet, medications, hormones, exercise, disease





Bone is a living tissue





Normal bone

Osteoporotic bone

Susan Ott, University of Washingtonhttp://courses.washington.edu/bonephys/opmovies.html



Research Objectives

- Determine multi-scale structure-composition-property relations for bone (orthopedics, biomimetics); methodology applies to other biological materials
- Develop predictive tools for assessing bone quality (healthy, diseased, developing, aging, effect of medications, exercise, diet, and other factors)
- Develop non-invasive tools for early detection of osteoporosis (disease characterized by bone fragility)



Hierarchical Structure of Cortical Bone

- Mesostructure (0.5 10 cm) cortical bone
- Microstructure (10 500 μm) single osteon
- Sub-microstructure $(1 10 \mu m)$ single lamella
- Nanostructure (below 1 μ m) collagen fibrils, apatite crystals



E. Hamed, Y. Lee and I. Jasiuk (2010) Acta Mechanica, 213, 131.

Nanoscale – mineralized collagen fibrils



Rho *et al*. (1997)

Mineralized collagen fibrils (~ 100 nm in diameter) are building blocks of bone.

M. A. Rubin, I. Jasiuk, J. Taylor, J. Rubin, T. Ganey, R. Apkarian (2003), Bone, 33, 270.

E. Hamed and I. Jasiuk (2012), Materials Science and Engineering R 73(3-4), 27-49.

Characterization of Cortical Bone

(focus on age related changes, bone development)



- 0, 1, 3 months (young)
- 6, 12, 18, 30, 42 months (developing)

Second Harmonic Generation (SHG) Microscopy

- SHG is well suited to characterize collagen fibril orientations.
- Provides high contrast due to high specificity to collagen fibrils.



Scanning Electron Microscopy (SEM) image of cortical bone

SHG image of the same region of cortical bone, collagen fibrils orientations are more visible.

R. Ambekar, M. Chittenden, I. Jasiuk, and K.C. Touissant (2012) Bone 50, 643-650

Chemical Composition-FTIR-MS Imaging



M: Mineral; O: Organic; M:O Mineral: Organic ratio C: Carbonate Cr: Crystallinity

High

low

CC: Nonreducible: reducible collagen crosslink ratio

- Mineral content increases with age
- Mineral: organic ratio increases as bone matures

L. Feng, I. Jasiuk (2010), Journal of Biomechanics, 44, 313-320.

Chemical Composition

DEXA: Dual-Energy X-ray Absorptiometry Hologic QDR 4500 Elite Bone Densometer

BMAD – bone mineral apparent density



BMAD increases as bone develops

Water & Ash content



$$Moisture\% = \frac{W_{wet} - W_{dry}}{W_{wet}} \times 100\%$$
$$Ash \ contents\% = \frac{W_{dry} - W_{ashed}}{W_{ashed}} \times 100\%$$

As bone matures:

- Water content decreases
- Mineral content increases

L. Feng, I. Jasiuk (2010), Journal of Biomechanics, 44, 313-320.

Mechanical Properties-Nanoindentation

- TI 900 TriboIndenter (Hysitron)
- Diamond fluid cell Berkovich





Transverse specimen

• Elastic moduli and hardnesses increase as bone matures





L. Feng, I. Jasiuk (2010), *J. Biomechanics*, **44**, 313-320. L. Feng, M. Chittenden, J. Schirer, M. Dickinson, I. Jasiuk (2012), *J. Biomechanics* **45** (10), 1775-1782.

Mechanical Properties:MicroindentationReference Point IndentationBioDent microindenter
Active Life Scientific, Inc.







Load vs. distance

- Indentation distance is directly correlated with fracture resistance.
- Technique can be used in vivo
- The protocol includes 20 indents per location
- Only 2 are shown on the figure above

R. Rasoulian, A. Raeisi Najafi, M. Chittenden, and I. Jasiuk (2013), J. Biomechanics 46, 1689-1696.

Mechanical Properties - Tensile Testing



MTS Insight 2 0.1mm/mm/min strain rate

12.75

6.00

-18.00 24.00 5.00

Elastic modulus and ultimate tensile strength increase as bone matures

L. Feng and I. Jasiuk (2010) J. Biomedical Materials Research, 95A, 580-587.

Demineralized and deproteinated bone

jointly with J. McKittrick, UCSD

Bovine cortical bone, 18 months

Self standing structures!

Earlier models assumed minerals as inclusions



SEM Images

Untreated bone

- Experiments and modeling
- Validation of computational models



Proteins only

<u>100 µт</u>

Minerals only

DP bone

E. Hamed, E., E. Novitskaya, J. Li, P.-Y. Chen, I. Jasiuk, and J. McKittrick (2012) *Acta Biomaterialia*, **8**, 1080-1092.

Multiscale Modeling of Cortical Bone

Bone is a natural composite material (polymer matrix nanocomposite with a hierarchical structure)

- Nanostructure
 - Collagen fibrils, apatite crystals, water and other proteins
- Sub-microstructure
 - Fibrous network: Mineralized collagen fibrils and pores
- Microstructure
 - Laminated composite: Lamellae at different orientations
- Mesostructure
 - Cortical bone: collection of osteons, resorption cavities, interstitial bone, laminar bone

=> Experimentally-based Prediction of Elastic Moduli

E. Hamed, Y. Lee and I. Jasiuk (2010), Acta Mechanica, 213, 131-154.

Conclusions

- We characterized hierarchical structure of cortical bone
- We obtained experimentally-based multiscale model of bone
- Elastic moduli were predicted

Applications/Extensions

- Experimentally-based multi-scale modeling can be used as diagnostic tool to assess bone quality
- Need to characterize bone ultrastructure and/or mechanical properties in vivo, noninvasively => RPI holds promise!

Current status

- Osteoporosis is diagnosed by
 - DEXA (scalar value)
 - History of fractures
 - Personal data (genetic, lifestyle, diet)



Susan Ott, U Washington: http://courses.washington.edu/bonephys/opmovies.html



- Disease (caused by abnormal bone metabolism)
 - Low bone mass
 - Microarchitectural deterioration of bone tissue
 - Consequent increase in bone fragility
 - Susceptibility to fracture
- Affects 44 million Americans
 - 10 million have disease
 - 34 million have low bone mass
- National direct expenditures for osteoporotic fractures
 - \$17 billion (in 2001)
 - \$47 million/day

http://www.osteo.org



Bone mass

After your mid-30s, you begin to slowly lose bone mass. Women lose bone mass faster after menopause, but it happens to men too.



- Age
- Gender
- Race
- Hormonal factors
- Nutritional status
- Physical activity

How can you help keep your bones healthy?

Proper nutrition and plenty of physical activity.

- Eating for healthy bones means getting plenty of foods rich in calcium and vitamin D.
- Magnesium, boron, calcium, copper, manganese, and strontium are all minerals that help strengthen bones.
- Vitamins C, D, K2, B1, B2, B3, B6, and B12 are also needed for optimal bone health

Non-dairy sources of calcium

- Whole grain products
- Green vegetables: broccoli, kale, cabbage, bok choy
- Dark leafy greens: collards, spinach, beet greens
- Rhubarb
- Canned fish (with bones)
- Beans, legumes
- Okra
- Nuts
- Seeds
- Mineral water

Kale

seeds



nuts

beans

Bone building exercises (weight bearing exercises)

- walking
- tennis
- running
- volleyball
- hiking
- ice hockey
- field hockey
- dancing
- skiing

- soccer
- skateboarding
- gymnastics
- in-line skating
- basketball
- weight lifting
- jumping rope
- aerobics

Behaviors bad for bones

- Prolonged inactivity or immobility
- Inadequate nutrition (especially deficient in calcium, vitamin D, vitamin K, magnesium)
- Tobacco smoking
- Alcohol abuse

Bad foods

- Too much protein
- Caffeine
- Salt
- Carbonated drinks (phosphoric acid)

Bone loss in space

Astronauts loose (per month):

- 2% of bone mass
- 5% of bone strength

Two major causes of bone loss:

- microgravity
- radiation

Durations of space trips:

- 12 month stay on space station
- 6 month trip to moon
- 30 month trip to mars



Bone loss in space

Astronauts exercise 2 hours a day in space to slow down bone loss



Dual Energy X ray Absorptiometry -Bone Mineral Densitometry

- DXA, or formerly DEXA
- Technique used to measure bone mineral density (BMD)
- Preferred regions for BMD measurement:
 - lumbar spine
 - proximal femur
 - whole body.

Severe osteoporosis: T-score less than -2.5 1+ osteoporotic fractures







Proximal femur

Reference Point Indentation (RPI)

- RPI is a novel microindentation technique which can provide insights into material properties of bone
- It can potentially be used *in vivo* to assess bone properties of living patients
- Currently research is conducted to understand the outputs of this technique.





http://www.activelifescientific.com/



Acknowledgments

Bio and Nano Materials Research Lab

<u>Graduate students</u> Liang Feng Elham Hamed YikHan Lee Ramin Rasoulian Alexander Setters Jun Li

<u>Collaborators</u> Rohid Bhargava, BE Jo Ann Cameron, CDB Joanna McKittrick, UCSD Kimani Touissant, MechSE



Beckman Institute



Institute for Genomic Biology



Materials Research Laboratory



Mechanical Engineering Laboratory Building

Funding: National Science Foundation (NSF) CMMI 09-27909

Any opinions, findings, and conclusions or recommendations expressed in this material are those of the author(s) and do not necessarily reflect the views of the NSF.