## Review

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# Recreating composition, structure, functionalities of tissues at nanoscale for regenerative medicine

Nanotechnology offers significant potential in regenerative medicine, specifically with the ability to mimic tissue architecture at the nanoscale. In this perspective, we highlight key achievements in the nanotechnology field for successfully mimicking the composition and structure of different tissues, and the development of bio-inspired nanotechnologies and functional nanomaterials to improve tissue regeneration. Numerous nanomaterials fabricated by electrospinning, nanolithography and selfassembly have been successfully applied to regenerate bone, cartilage, muscle, blood vessel, heart and bladder tissue. We also discuss nanotechnology-based regenerative medicine products in the clinic for tissue engineering applications, although so far most of them are focused on bone implants and fillers. We believe that recent advances in nanotechnologies will enable new applications for tissue regeneration in the near future.

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Regenerative medicine aims to restore the function of human tissues and organs by stimulating the intrinsic regenerative capacity of the body by utilizing cells, biomaterials and growth factors [1,2]. Current advances in regenerative medicine have led to the creation of bioengineered tissues and organs that can perform key biological functions. For example, biomimetic tissues including bone, blood vessels, urethra, skin, liver, lung, bladder and trachea transplants have been successfully engineered and implanted *in vivo* [3–10]. Bioengineered tissue constructs can grow and remodel *in vivo* since they are composed of living cells, or can stimulate body cells to migrate and integrate into scaffolding materials.

Currently, by virtue of recent achievements in nanotechnology, the composition and structure of bioengineered tissues are becoming more analogous to natural tissues at the nanoscale, providing a biomimetic niche for

cells. The activities of cells depend on biochemical and physical signals from surrounding tissues, and since cells dynamically interact with their local microenvironment at the nanoscale, it is necessary to control properties of engineered tissues at these scale lengths. In addition, nanostructured biomaterials can decrease inflammatory response and increase wound healing in comparison to conventional biomaterials, possibly due to their high surface energy affecting protein adsorption and cell adhesion [11]. In this sense, advanced nanotechnologies for mimicking native tissues can also overcome the disadvantages of using autografts or allografts, such as the risk of immune reaction, infection and disease transmission.

In this paper, we highlight key achievements in the nanotechnology field to recreate the composition, structure and functionality of major tissues and organs, using bioEmine Alarçin‡,1,2,3, Xiaofei Guan‡,1,2,4, Sara Saheb Kashaf<sup>1,2</sup>, Khairat Elbaradie<sup>5</sup>, Huazhe Yang<sup>1,2</sup>, Hae Lin Jang\*,1,2,4 & Ali Khademhosseini\*\*,1,2,4,6,7

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mimetic and bio-inspired approaches to improve tissue regeneration. In addition, we report on clinically approved nanotechnology-based regenerative medicine products for tissue engineering applications. By providing an overall view of the recent status of nanotechnology applications in the regeneration of various tissues, we expect that this article will be particularly helpful for those who are investigating the regeneration of complex tissues.

# **Biomimicking tissue composition at nanoscale**

Every tissue in the body has its own nanoscale composition which provides a suitable microenvironment to direct cellular differentiation toward a particular lineage. Since engineered nano-architecture features a high surface area to volume ratio, it can systematically expose cells to multiple biological components with different functionalities. The ability to control the spatial distribution of materials at the nanoscale can also enhance tissue regeneration by enabling better integration with host tissue [12]. For example, bone tissue is mainly composed of inorganic calcium phosphate nanocrystals and organic components (mainly collagen type I) [13–15]. It is reported that a nanocomposite scaffold that is composed of both organic and inorganic components of bone tissues can promote bone regeneration [16,17]. In addition, the inorganic phase of human bone tissue is composed of two major bone minerals: hydroxyapatite (HAP:  $Ca_{10}[PO_4]_6[OH]_2$ ) and whitlockite (WH:  $Ca_{18}Mg_2[$  $\mathrm{HPO}_{4}]_2[\mathrm{PO}_{4}]_{12}$ ) nanocrystallites, with different physicochemical properties  $[14,15]$ . For example,  $Mg^{2+}$  ions are too small in size to maintain a HAP crystal structure, and so are mostly incorporated in the WH crystal structure [14,18]. Furthermore, it is reported that these two bone crystals are distributed in different ratios depending on certain regions of bone tissue [14], implying that HAP and WH have distinguished biological roles. Therefore, controlling their spatial distribution at the nanoscale is important for mimicking native bone tissue.

In Table 1, we have listed representative examples of recent research achievements to recreate the nanoscale composition of each tissue type. However, despite many outstanding achievements in both the nanotechnology and tissue engineering fields, so far, most bioengineered tissues are still dependent on the usage of bulk materials with micrometer scale designs or larger, which have limited tissue functions. Therefore, there remains a strong need to further develop nanomaterials that mimic the major components of tissues at the nanoscale and apply them for tissue regeneration.

### **Mimicking nanoscale tissue structure**

Human tissues have complex topographical features at the nanoscale that can physically influence the behavior of cells by directly modulating their migration, orientation, differentiation and proliferation. For example, skeletal and cardiac muscles are composed of perpendicularly interwoven collagen strips and elastin bundles at the nanometer scale [28]. Also, bone tissue is composed of HAP nanocrystals that form nanopatterns along collagen fibers [29]. In addition, highly connected nanopores/channels in tissues can continuously supply a sufficient level of oxygen and nutrients to cells, and allow for intercommunication between different cell types. For example, there exist three levels of hierarchical pore architectures within cortical and cancellous bone, ranging from 10 to 20 μm in radii, which support blood or interstitial fluid transportation [30].

To mimic the nanoscale structure of each tissue type to stimulate cells with the proper topographical cues, nanofibrous and nanocomposite structures, nanoscale surface topographies and nanoporous/nanochannel networks in the scaffold have been engineered by nanotechnologies such as electrospinning, nanolithography, self-assembly, phase separation and sacrificial template methods (Table 2).

Since the cellular microenvironment includes ECM components such as fibril structured proteins and polysaccharides [43], engineered nanofiber networks can support cellular growth and regulate cellular behaviors in a physiologically similar manner [44]. Aligned nanofibers are especially useful in guiding cellular orientation to mimic the anisotropy of natural tissues, including heart, nerve, tendon and blood vessels. For example, when human tendon progenitor cells were seeded on aligned poly (L-lactic acid) nanofibers that recapitulated parallel collagen fibers in tendon, these cells expressed higher level of tendon specific genes compared with cells grown on random fibers [34].

Nanocomposite structures are used widely, as they can enhance the mechanical strength of hybrid organic/inorganic composites, and thus influence cellular proliferation and differentiation. To mimic the organization of bone tissue that is composed of inorganic minerals and organic collagen matrix, silicate nanoparticles were incorporated into organic materials, enhancing mechanical properties (i.e., compressive strength, tensile strength and elastic modulus) and further promoting cellular proliferation [37,38,45]. In fact, stiffness is one of the key parameters for altering cell growth and differentiation [46,47]. Recently, Alakpa *et al.* fabricated supramolecular nanofiber hydrogels and controlled their stiffness to direct the differentiation of stem cells without any biochemical functionalization [47].



Nanopatterns play an important role in directing various cellular behaviors, due to their structural consistency with many vital components of native ECM, such as basement membrane and focal adhesion complexes, ranging from a few to a hundred nanometers [48,49]. Patterning techniques at the nanoscale allow for the mimicking of native ECM, thus modulating cell-matrix interactions [50]. Interestingly, nanoscale disorders can direct osteogenic differentiation of human MSCs in the absence of osteogenic supplements [40]. On the other hand, when the pattern contains absolute square lattice symmetry, nanoscale patterning can also promote the growth of stem cells and the retention of multipotency, indicating that

nanoscale surface topographies can determine cell fate and functions [41]. Likewise, since cell orientation strongly correlates with the direction of underneath patterns, nanoscale structural cues can further control the macroscopic function of tissue constructs. For example, nanotopographically controlled heart tissue constructs that mimic the ECM structure of myocardium have successfully demonstrated anisotropic action potential conduction and contractility characteristics of native cardiac tissue [39].

Nanopores/channels in natural tissues are also vital for maintaining the activity of cells, as they provide transport paths for oxygen and nutrients [51,52]. While it seems that the two concepts of permeability



and mechanical strength are contradictory, as they are directly or inversely correlated with the porosity of the structures, nanoporous/channel structures can simultaneously satisfy these properties due to their enhanced permeability compared with microporous/channel structures. In fact, the amount of nutrients that are delivered by nanochannels is known to be sufficient to sustain cellular vital activities. Nanopores/channels have been incorporated in vascularized cardiac or hepatic tissue constructs and bone scaffolds by using self-assembled and porogen methods to enhance permeability and permit cellular crosstalk, while maintaining mechanical properties [4,42].

# **Developing bioinspired nanotechnologies & functional nanomaterials**

The function of human tissue occurs based on the localized microenvironment where cells interact with specific types of ECM at the nanoscale. In this respect, nanoscale delivery systems and functional nanomaterials have been applied for directing cellular differentiation and tissue specific activities to restore function of damaged tissues.

In the past two decades, nanoscale delivery systems have attracted a great deal of attention by researchers in the field of regenerative medicine based on their unique features, such as high surface area and easiness of surface functionalization, which can promote the adsorption of growth factors and drugs [53,54]. For example, nanofibers are one of the most widely used nanoscale delivery platforms based on their similarity with the physical structure of ECM [55,56]. Hartgerink *et al.* developed an injectable, self-assembled peptide-based nanofibrous hydrogel that contains peptides for proangiogenic moieties which can rapidly form mature vascular networks and induce tissue integration after subcutaneous delivery *in vivo* via a syringe needle [56].

Functional nanomaterials can actively support damaged tissues with functional loss, and thus can enhance their regeneration. For example, electroconductive





nanomaterials have been applied for the treatment of cardiac tissues to generate electrical function of these tissues. The incorporation of electrically conductive silicon nanowires in cardiac spheroids can provide an endogenous electrical microenvironment for cardiomyocytes, and synergize with exogenous electrical stimulation, enhancing cardiac microtissue development [57]. In addition, when carbon nanotubes are integrated into hydrogels and oriented in an aligned manner, the cardiac differentiation of embryoid bodies and their beating activities are enhanced. The incorporation of carbon nanotubes in a hydrogel scaffold has been reported to further enhance the mechanical properties of tissue constructs [58]. The functionalization of biomaterials by the internalization of biological motifs can also control cellular behavior; for instance, Gouveia *et al.* incorporated peptide amphiphile composed of the N-(fluorenyl-9-methoxycarbonyl) (Fmoc) molecule linked to the cell-adhesion Arg–Gly–Asp–Ser (RGDS) motif into biomimetic collagen gels. These functionalized hydrogels promoted attachment and proliferation of human corneal stromal fibroblasts [59].

In Table 3, we have listed representative examples of the current use of nanotechnologies and nanomaterials to enhance tissue regeneration.

# **FDA approved regenerative medicine products for tissue regeneration based on nanotechnologies**

In the 2014 Guidance for Industry entitled "Considering Whether an FDA-Regulated Product Involves the Application of Nanotechnology," the US FDA defined nanotechnology products as those which have at least one dimension between 1 and 100 nm in size [69]. The FDA also recognized materials that are as large as 1000 nm as nanomaterials if they can demonstrate similar 'properties or phenomena' as other nanotechnology-based products [69]. During the process of commercialization, a nanotechnology product moves through various developmental phases, starting with the basic concept product and culminating with clinical investigations and commercialization. The resulting nanotechnology products can belong to various FDA classifications, such as biologicals, devices, genetics, drugs and others [70].

Based on recent achievements in nanotechnologies for recreating the composition, structure and functions of tissues in a more precise way than ever before, the related nanotechnologies are starting to be applied in clinics to repair diseased/damaged tissues [2,70]. In Table 4, we have selectively listed nanotechnology based products for tissue regeneration that have obtained approval from FDA and are currently on the market.

#### **Conclusion & future perspective**

In this special issue, we selectively highlighted state-ofthe-art nanotechnologies that successfully mimic the composition and structure of different tissue types, as well as bio-inspired nanotechnologies and functional nanomaterials for tissue regeneration. Based on recent advances in nanotechnologies and tissue engineering, bioengineered tissues are becoming more similar to natural tissues, thus enabling the partial recovery of damaged/diseased tissues. However, there are still many biological components that are not fully understood or ignored in regenerative medicine due to the

#### Executive summary



• Functional nanomaterials have successfully generated similar or even better tissue functions to stimulate cells to repair tissues.

#### **US FDA approved clinical products for regenerative medicine based on nanotechnologies**

- • Recently, FDA approved nanotechnology based regenerative medicine products have started to be actively used in the clinic for tissue regeneration.
- • Most of the current nanotechnology based regenerative medicine products are made for bone tissue regeneration.
- • We anticipate that the recent achievements in the nanotechnology field will further lead to the development of regenerative medicine products for various tissue types in the near future.

difficulty in their fabrication. Moreover, although many nanomaterials can successfully promote cellular activities *in vitro*, there still exist safety concerns about the use of these nanomaterials, as they can cause systemic side effects by crossing cell barriers in nontargeted organs. In fact, most of the newly developed nanomaterials have not been assessed in large animal models. As a result, except for bone related materials, the majority of the newly developed nanomaterials have not been applied for tissue regeneration in the clinic. These issues can be addressed by thorough physicochemical characterization of nanomaterials and restriction of undesired uptake via functionalization with targeting moieties [82,83]. Based on the understanding of the effectiveness and safety of nanomaterials, proper *in vivo* studies should be continued with selective nanomaterials for the purpose of clinical translation. We envision that the development of

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nanotechnologies, which is becoming faster than ever before, will overcome current challenges in regenerative medicine to heal diseased/damaged tissues in the near future.

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