Nanonet force microscopy for measuring forces in single smooth muscle cells of the human aorta

Alexander Halla,b, Patrick Chanb, Kevin Sheetsb, Matthew Appersona, Christopher Delaughtera, Thomas G. Gleasonb,d, Julie A. Phillippib,d,* and Amrinder Naina,c,*

a Department of Mechanical Engineering and b Department of Biomedical Engineering and Sciences, Virginia Tech, Blacksburg, VA 24061; c Department of Cardiothoracic Surgery and d Department of Bioengineering and McGowan Institute for Regenerative Medicine, University of Pittsburgh, Pittsburgh, PA 15219

ABSTRACT A number of innovative methods exist to measure cell–matrix adhesive forces, but they have yet to accurately describe and quantify the intricate interplay of a cell and its fibrous extracellular matrix (ECM). In cardiovascular pathologies, such as aortic aneurysm, new knowledge on the involvement of cell–matrix forces could lead to elucidation of disease mechanisms. To better understand this dynamics, we measured primary human aortic single smooth muscle cell (SMC) forces using nanonet force microscopy in both inside-out (I-O intrinsic contractility) and outside-in (O-I external perturbation) modes. For SMC populations, we measured the I-O and O-I forces to be 12.9 ± 1.0 and 57.9 ± 2.5 nN, respectively. Exposure of cells to oxidative stress conditions caused a force decrease of 57 and 48% in I-O and O-I modes, respectively, and an increase in migration rate by 2.5-fold. Finally, in O-I mode, we cyclically perturbed cells at constant strain of varying duration to simulate in vivo conditions of the cardiac cycle and found that I-O forces decrease with increasing duration and O-I forces decreased by half at shorter cycle times. Thus our findings highlight the need to study forces exerted and felt by cells simultaneously to comprehensively understand force modulation in cardiovascular disease.

INTRODUCTION

Smooth muscle cells (SMCs) receive mechanical and chemical stimuli from the extracellular matrix (ECM) via integrin-mediated focal adhesions (Moiseeva, 2001). For a vascular SMC, this interaction plays an important role in modulating vascular resistance and tone, thereby affecting the resistance of a vessel. SMCs generate forces via actomyosin contractions, which impart a mechanical force on the surrounding ECM (Gunst and Zhang, 2008). This leads to vasoconstriction or dilatation of vessels, affecting overall systemic vascular resistance (Moiseeva, 2001). For a vascular SMC, this interaction causes the collagen and elastin microarchitecture to stretch, and the resulting stretch force is transmitted through the focal adhesions to the cytoskeletal network.

Establishing a contextually relevant fibrous platform to understand cell-generated (inside-out [I-O]) and ECM-generated (outside-in [O-I]) forces is integral to the study of disease states. At the tissue level, for example, characteristic histopathological features defining the pathophysiology of ascending thoracic aortic aneurysms include degeneration of the elastin matrix, noninflammatory loss of SMCs, and biomechanical weakening of the aortic wall (Nataatmadja et al., 2003). In this regard, our previous work revealed distinctions between the aneurysmal patient cohorts and nonaneurysmal, healthy aortic specimens at the cell, ECM, and tissue levels. Specifically, aneurysmal aortic specimens exhibited higher tensile strength, lower delamination strength, and anisotropically collagen and elastin fiber microarchitecture, and SMCs were more susceptible to oxidative stress than SMCs from degenerative aneurysm specimens and nonaneurysmal aortas (Phillippi et al., 2009, 2010, 2014; Pichamuthu et al., 2013; Tsamis et al., 2014).

At the single-cell level, SMCs aid in supporting the surrounding ECM by generating contractile forces, or I-O forces, and resisting...
RESULTS

I-O forces during migration and contractile state of SMC adhesion strength

Fused-fiber nanonets were fabricated using the nonelectrospinning STEP technique. Owing to the absence of an electric source in the fiber-spinning process, STEP enables precise control of fiber diameter, spacing, and orientation (Nain and Wang, 2013; Wang and Nain, 2014). Using STEP, we developed nanonets at ~15- to 20-μm spacing, to which cells attached in parallel morphologies with focal adhesions clustered predominantly at the poles (Sheets et al., 2013). Cells use their focal adhesions to exert force on their substrate to spread or migrate. To calculate the vertical forces exerted by cells on fibers, the adhesion cluster lengths are modeled as point loads (Sheets et al., 2016). We observed that cells stretched between parallel fibers migrated by forming protrusions synchronously or asynchronously in an oscillatory manner on either fiber (Figure 3 and Supplemental Movie S3). This behavior was maintained among all three patient samples, thus suggesting an overall conserved behavior in cell migration on fibers. Next, to determine the contractile state of the cell, we averaged the total vertical force over 1 h for each cell and then averaged the forces for at least 11 cells per patient sample group. The average forces of the SMCs were found to be similar: 12.4 ± 2.4, 14.5 ± 1.4, and 12.9 ± 0.8 nN (p = 0.30, Figure 3C). Thus the average I-O force (12.9 ± 1.0 nN) for the three cell populations established the baseline contractile force for SMCs.

O-I force provides SMC–fiber adhesion strength

Using the same parallel-cell morphology, we measured the vertical O-I force by uniformly stretching the cell using custom dual probes positioned on either side of the cell. The probes were moved at a constant stretch rate of 2 μm/s, thus creating an active and passive fiber system (Figure 2B and Supplemental Movie S2). To measure the cell–fiber adhesion strength, we stretched cells until they detached from either of the two fibers. By using the two-point load model for the deflection of the passive fiber, we were thus able to calculate the maximum adhesion (O-I) force at detachment. A representative force–time plot in O-I perturbation shows an increase in the force, whereas adhesion integrity is maintained, followed by a sharp decrease, indicating cell–fiber adhesion failure (Figure 4A). O-I forces were calculated for the three cell lines with sample sizes of ≥7 cells/population to evaluate consistency across patients and develop a baseline SMC–fiber adhesion strength metric (Figure 4B). The mean O-I forces of the three populations were not statistically different (p = 0.32). Therefore we combined the O-I forces from the three populations to find an average maximum SMC O-I force of 57.9 ± 2.5 nN. Although the O-I forces were similar, during the experiments, we visually observed variations in cell sizes and that larger cells tended to produce higher forces.
The cells were exposed to a cyclic, subfailure contractile and cell–fiber adhesion strength modulation (Supplemental Movie S4). The effect of peroxide on O-I forces was reduced by similar amounts at 1- and 5-min cycles (6.8 ± 2.6 and 10.4 ± 2.8%; p = 0.378) but decreased significantly over long cycles (24.8 ± 4.2 and 64.8 ± 0.7% for 10 and 20 min, respectively; p < 0.02). However, of interest, the decrease in O-I forces occurred even at short intervals. Because cells tend to form focal adhesions at their poles on fibers, our data suggest that cyclic perturbations cause an active rearrangement of adhesions early, leading to reduced cell–fiber adhesion forces even at short cyclic times.

DISCUSSION

The platform presented here, to the best of our knowledge, is the first to measure human SMC single-cell–fiber forces in both passive and perturbed states. With our nanonet force platform, we established a baseline SMC contractile vertical force of 12.9 ± 1.0 nN across populations isolated from multiple patients. In the arterial system, particularly the aorta, tissue must also be able to withstand high O-I stretch forces that result from pulsatile contractions. By perturbing the cells, we established a reference vertical force of 57.9 ± 2.5 nN for healthy, nonaneurysmal SMCs. These passive and perturbed force calibrations could provide new insights in understanding, diagnosing, and developing preventive strategies for patients with cardiovascular disease.

SMCs bind to and interact with elastin and collagen fibers of the vascular ECM by exerting I-O contractile forces through actin–myosin contractions. The cells’ ability to maintain these forces is necessary to preserve structural integrity and homeostasis of the tissue. For example, specimens of human aneurysm were shown to exhibit unique anisotropic ECM microarchitecture (Phillippi et al., 2013), consistent with marked increases in unaxial tensile strength compared to normal, healthy specimens (Pichamuthu et al., 2014). However, perturbation of cell–matrix interactions could have a major effect on public health, as 1–2% of the United States general population have BAV (Ward, 2000; Gleason, 2005), which carries a heightened risk of developing an aneurysm and is likely incited by different effector molecules than those causing degenerative aneurysm. In turn, presence of aneurysm places the...
patient at risk for aortic catastrophe in the form of dissection and rupture, requiring immediate surgical intervention.

In pathological conditions, SMCs can be exposed to environmental stress (e.g., oxidative stress, reactive oxygen species [ROS], etc.); thus it is important to understand how I-O and O-I forces change in response under such conditions. In addition to the intracellular response, in this study we showed that exposure to oxidative stress reduces both I-O and O-I forces by about half that of cells under normal culture conditions. When we exposed the nonaneurysmal SMCs to cyclic loading, we observed that transient cell forces (both I-O and O-I) decreased over longer time intervals as cell stretch increased. Of interest, we found that cyclic loads and oxidative stress reduced the O-I forces to a similar degree. These findings in primary SMC and the enabling techniques support and enable our ongoing investigations related to SMC force mechanisms in the setting of BAV-associated aortopathy.

Oxidative stress has been of increasing interest in cardiovascular disease, with ROS linked to hypertension, atherosclerosis, and atrial fibrillation (Sahoo et al., 2016). Our prior observations of human aortic specimens noted that medial SMCs isolated from specimens of BAV-associated aneurysm exhibited more oxidative stress–induced cell death than with normal aortic specimens and specimens of degenerative aneurysms (Phillippi et al., 2009, 2010). Furthermore, primary SMCs isolated from BAV patients also exhibited down-regulation of the antioxidant metallothionein compared with normal aortic SMCs, implicating a role for oxidative stress response in BAV-associated aneurysmal disease. In addition, Branchetti et al. (2013) found that increased wall stress results in ROS accumulation, causing vascular smooth muscle cells to change toward a synthetic phenotype. The force measurement method described here for primary human SMCs will help us to further understand how SMC vulnerability to ROS in BAV-associated aortopathy influences the cell–matrix biomechanics that contribute to biomechanical integrity of the aortic wall. In addition, our nanonet approach to measuring SMC force generation will allow for testing the effect of modulating various cellular and matrix-related mechanisms toward our long-term goal of preventing or abating aneurysmal formation.

In conclusion, our studies emphasize that a combinatorial strategy of measuring both I-O and O-I modes should be implemented to develop a comprehensive understanding of the role of forces in cardiovascular disease.
With our contextually relevant nanonet force platform, we demonstrated that oxidative stress conditions result in perturbed adhesion forces in healthy, nonaneurysmal SMCs in complex in vitro structures that mimic the ECM milieu. The capability to alter the in vitro fibrous dimensions and measure corresponding force generation in human SMCs will be invaluable in understanding aortic wall integrity via cell–matrix adhesion. To our knowledge, this approach has never been applied to understand mechanisms of aortic aneurysmal disease. In the future, we plan to incorporate this platform to expand our studies of cell–cell and cell–matrix interactions in aortic disease pathologies at the cell–cell junctions and focal adhesion level, respectively, to aid in the development of therapeutic strategies to prevent progression of aneurysm and rupture of aorta.

**MATERIALS AND METHODS**

**Nonelectrospinning STEP fused-fiber nanonets**

The previously reported nonelectrospinning STEP technique was used to fabricate suspended criss-cross polystyrene nanonets with fused-fiber interactions (Figure 1). Previous work from our group demonstrated that cells on suspended nanofibers tend to spread between two parallel fibers if the gap between them is <20 µm (Meehan and Nain, 2014). To increase the occurrence of this cell shape, the nanonets were configured such that strut-like, ∼1000-nm-diameter fibers spaced ∼300 µm apart were spun orthogonal to and on top of smaller, ∼250-nm-diameter fibers with tighter spacing (15–20 µm apart).

**Aortic tissue collection and SMC culture**

Human ascending aortic specimens were collected from patients presenting for surgery to the Division of Cardiac Surgery, University of Pittsburgh Medical Center, for heart transplantation and were collected under Institutional Review Board approval and with informed patient consent or from organ donors via the Center for Organ Recovery and Education. Aortic specimens were collected from one male and two female patients ranging in age from 41 to 62 yr. Primary medial SMCs were isolated as previously described (Phillipps et al., 2009). Three nonaneurysmal, cryopreserved SMC cell populations were reestablished in culture at passages 3–6 in 25-cm² flasks. The STEP scaffolds were fixated to the culture well of a glass-bottom flasks. To develop the contractile force of the cell–fiber system (Figure 2), cells were exposed to 125 µM hydrogen peroxide (Sigma-Aldrich) and 2 ml of SMC media had been added to the plate, and 20% CO₂ was provided to maintain the medium. The cells were imaged for 15–20 min before adding the H₂O₂ medium to visualize transient force modulation. Force data were analyzed using a custom MATLAB code and the software ImageJ (National Institutes of Health, Bethesda, MD).

**Force measurement**

As cells attach and spread between parallel nanonet segments, the individual fibers deflect (Figure 2 and Supplemental Movie S1). In this configuration, cells form cell–fiber adhesion clusters on the periphery on each fiber (Meehan and Nain, 2014). Owing to these clusters, we assume that a cell applies two point loads on the fiber—one on each end of the cell–fiber interface (where the focal adhesions cluster)—which both contribute to overall fiber deflection (Sheets et al., 2016). Thus the experimentally measured deflections, δa and δb (Figure 2B), can be related to their associated vertical loads, Pa and Pb (Sheets et al., 2016):

\[
\delta_a = \left[ \frac{P_a \sinh[\lambda (L - a)]}{S \lambda \sinh[\lambda L]} \sinh[\lambda a] + \frac{P_a (L - a)}{S L} \right] \\
\delta_b = \left[ -\frac{P_b \sinh[\lambda (L - b)]}{S \lambda \sinh[\lambda L]} \sinh[\lambda b] + \frac{P_b (L - b)}{S L} \right] \\
\]

with the dependent variables defined in Table 1.

As cells migrate, they apply contractile forces on outer fibers, causing them to deflect (Figure 2A), from which I-O forces can be calculated. In the present study, we considered only cells attached to a two-fiber system. To develop the contractile force of the cell at any instant, we summed the individual fiber forces. To compare forces across different cells within and across SMC populations, we collected the I-O contractile forces and averaged them over 1 h of imaging. We compared these forces for three different human patients with a sample size of ≥11 cells/population.

**Imaging**

For I-O and O-I measurements, after the cells were allowed to attach to the STEP fibers and 2 ml of SMC media had been added to the six-well plate, the plate was placed into an incubating microscope with a digital three-axis stage (AxioObserver Z1; Carl Zeiss, Germany). Cells were visualized using 20× magnification with an Axiocam MRm camera (Carl Zeiss). In I-O experiments, time lapse was performed with images captured at 1-min intervals, and care was taken to image cells in the parallel shape and avoid imaging cells in contact with other cells.

O-I forces were measured by placing glass micropipette probes mounted on a MP-285 motorized manipulator (Sutter) on either side of a parallel cell. To capture O-I force measurements, time-lapse images were taken every 600 ms. As with I-O forces, images were taken under 20x magnification. In oxidative stress condition experiments, cells were imaged for 15–20 min before adding the H₂O₂ medium to visualize transient force modulation. Force data were analyzed using a custom MATLAB code and the software ImageJ (National Institutes of Health, Bethesda, MD).
stretched to induce an initial 20-nN force, resulting in a frequency of 3 cycles/min.

Statistical analysis
I-O and O-I forces of the three populations were tested for statistical significance with one-way analysis of variance tests for difference of means to p ≤ 0.05 (unless otherwise noted). The same test and p value were used to evaluate the effects of oxidative stress and cyclic loading to unstressed and nonloaded populations. Linear least-squares regression was also used to evaluate trends in cell area versus O-I force. Error bars represent standard error unless otherwise noted.

ACKNOWLEDGMENTS
T.G. and J.P. gratefully acknowledge Kristin Konopka and Julie Schreiber for assistance with IRB protocols and informed patient consent, Jennifer Hill and Tara Richards for smooth muscle cell isolation, and the Center for Organ Recovery and Education for assistance in obtaining donor tissues. T.G.G. acknowledges support by National Science Foundation (1553314) and the Department of Cardiothoracic Surgery at the University of Pittsburgh. A.S.N. acknowledges support by National Science Foundation Grants CMMI-1437101 and 1462916 and the Institute for Critical Technology and Applied Sciences at Virginia Tech.

REFERENCES


---

**TABLE 1: STEP Nanonet force microscopy model parameters.**
is decreased in ascending aortic aneurysms of bicuspid aortic valve patients. Circulation 119, 2498–2506.