

# DEVELOPMENT OF A MICRO TOMOGRAPHY PROTOCOL FOR PTA-CONTRASTED HUMAN MENISCUS

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## Introduction

Contrast-enhanced micro tomography (CE- $\mu$ CT) aims at enhancing X-ray contrast of low-density materials, mainly of soft tissues, allowing to investigate their 3D structure comprehensively. To promote CE- $\mu$ CT as a standard technique complementary to immunohistomorphometry, several aspects should be optimized: sample preparation and imaging; contrast agent diffusion together with minimizing tissue shrinkage; tissue preservation to ensure a not biased structural analysis and the complementarity with other assays [1]. In this study, a CE- $\mu$ CT protocol on human knee meniscus with phosphotungstic acid (PTA) as contrast agent is under development by comparing it with chemical drying, a reference procedure to enhance contrast in biological samples, already experimented on human meniscus [2]. Indeed, PTA reveals preferentially collagenous structures [3], which are abundant in the meniscus, and it has been tested on animal models [4]. Nevertheless, replicating that protocol on human meniscal tissue highlighted only partial PTA diffusion, some tissue shrinkage and marked stiffening [5]. Therefore, an evolution of the protocol is under test.

## Methods

Portions from human menisci (ethical approval 952/2021/Sper/IOR) underwent the following CE- $\mu$ CT protocols. PTA concentration, originally at 1% (w/v) [4], was increased to 2% to improve diffusion; exposition to PTA lasted seven days. Water was compared to ethanol (EtOH) as solvent for PTA in terms of imaging. Samples were  $\mu$ CT scanned with source voltage 70 kV and current 250  $\mu$ A, without metal filter (Skyscan 1172, Bruker, Belgium). As regards reference procedure – i.e. chemical drying – samples were dehydrated in ascending EtOH concentrations, treated with hexamethyldisilazane (HMDS), air-dried in a fume hood and then  $\mu$ CT scanned (40 kV, 250  $\mu$ A; no filter) [2]. Sample dimensions before and after preparation for CE- $\mu$ CT were measured by a caliper looking for shrinkage.

## Results

Comparing sample contrasted by PTA in water respect to PTA in EtOH, meniscus radial section of reconstructed  $\mu$ CT images shows a major contrast, but a minor contrast agent diffusion; in both cases, signal appears highest on surface, corresponding to a major collagen density [2,4] (Fig. 1 A,B). HMDS drying resulted in minor image contrast (Fig. 1 C). Sample preparation caused tissue shrinkage in the case of

chemical drying (-22% in volume change), not evident in the case of PTA contrast.

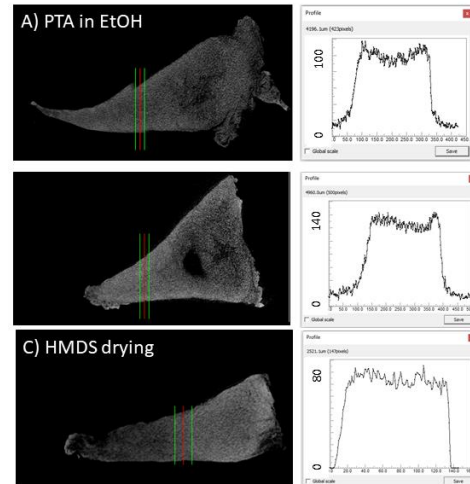


Figure 1: menisci CE- $\mu$ CT sections and grey levels contrast profiles along red lines

## Discussion

CE- $\mu$ CT can be particularly useful for investigating the physiopathology of the human meniscus, important in knee biomechanics, often degenerated and still difficult to repair. We are developing a meniscus CE- $\mu$ CT protocol based on PTA as contrast agent, investigating if it is possible to characterize collagen distribution and make indirect interpretations on the alignment of the extracellular matrix as for cartilage [6]. Validation is an important phase, often poorly described in relative literature: with this aim, histological and mechanical, i.e. functional, characterizations are ongoing [5], also testing rehydration/PTA washing strategies to favour the complementarity between those (and other) assays and CE- $\mu$ CT.

## References

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