## COMPUTER AIDED DESIGN AND INITIAL TESTING OF A NOVEL STEM CELL BASED THERAPY FOR ABDOMINAL AORTIC ANEURYSMS

by

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University of Pittsburgh, 2017

Exsanguination from abdominal aortic aneurysm (AAA) rupture is frequently fatal and is currently the 13th leading cause of death in the United States of America. AAAs can take years to progress to the point where surgical intervention is recommended (> 5.5 cm diameter). Surgical intervention does not benefit small AAAs, and management of these patients is limited to "watchful waiting" (i.e., serial imaging of the AAA progression until the threshold for surgical treatment is met).

The goal of this dissertation is to develop a novel stem cell therapy for small AAAs. Approximately 90% of patients with AAA do not meet the size criterion for intervention and could benefit from this alternative therapy.

In short, our proposed strategy is delivery of adipose-derived mesenchymal stem cells to the external surface of the AAA. In this way autologous cells can be isolated from a patient, culture-expanded if necessary, mixed in a hydrogel, and injected around that same patient's aorta in a minimally invasive procedure. The work of this dissertation represents four foundational steps towards design and initial evaluation of the proposed therapy: evaluation of the potential of SMCs to produce elastin in vitro, assessment of the effects of elastin production in silico, demonstration of efficacy in a small animal model, and fabrication of a new self-mixing injector device for human use.

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## **1.0 INTRODUCTION**

The goal of this dissertation is to develop a computationally-guided, novel therapy for abdominal aortic aneurysms (AAAs). This novel therapy is being designed to service a population of AAA patients that have a clinically defined AAA but do not meet the surgical criterion for intervention. This population, which makes up 90% of those identified with a AAA, currently has no effective treatment options, and it has been hypothesized that an effective treatment must be one the replaces lost elastin<sup>2</sup>. In order to develop an effective AAA treatment for subcritical AAAs that addresses current barriers, one must first understand the disease, its current treatments, and methods of studying potential treatments while considering the clinical barriers to translation for the said treatment.

The AAA treatment being investigated within this study is an adipose derived mesenchymal stem cell (ADMSC) based treatment designed to be injected and entrapped around the AAA. In this way cells can be isolated from a patient, cultured expanded, mixed in a fibrin hydrogel, and injected around that same patient's aorta in a minimally invasive procedure. The current scope of this work is to apply this therapy to those AAA patients who have a subcritical sized AAAs. The work of this dissertation is specifically meant to lay the groundwork for the development of this novel AAA treatment within the laboratory of Dr. David Vorp working towards clinical translation by evaluating the potential of smooth muscle cells (SMCs) to

produce elastin in-vitro, assessing the effects of elastin production in-silico, showing efficacy in a small animal model, and creating a new cell delivery device for human use.

The introductory chapter of this dissertation will first provide a broad overview of aneurysm types and the anatomical differences in normal and aneurysmal arteries (Section 1.1). Next, an overview of current clinical treatments will be discussed in detail (Section 1.2). Following this, an overview of current preclinical models of the disease and treatment will be discussed (Section 1.3). Then, an introduction and discussion of preclinical AAA treatment approaches will be provided (Section 1.4). Next, previous AAA studies performed in the Vorp lab are reviewed (Section 1.5). Finally, the specific aims of this dissertation are provided (Section 1.6).

## 1.1 ABDOMINAL AORTIC ANEURYSM ANATOMY (AAA) AND ETIOLOGY

## 1.1.1 Aneurysm Types and Etiology

An aneurysm is defined as a 50% increase in the diameter of an artery<sup>3</sup>. Aneurysms are commonly found in the aorta, and are classified according to the section where it is contained<sup>4</sup>. These include thoracic aortic aneurysms which are subdivided into ascending and descending, and abdominal aortic aneurysms which are divided into suprarenal and infrarenal<sup>5</sup>. Aneurysms can also occur in other parts of the arterial tree, most notably in the brain, called cerebral aneurysms, and in peripheral arteries such as the brachial, femoral, popliteal, and carotid arteries<sup>4</sup>. Regardless of the aneurysm location, all are noted by their disrupted and diminished elastic fibers<sup>5,6</sup>.

Though the exact etiology of the disease is unknown, ultimately it is the force caused by blood pressure pushing against the walls of a mechanically compromised artery that leads to dilatation<sup>7</sup>. There are many factors that can cause an artery to become compromised including aging, smoking, high blood pressure, and atherosclerosis. Sex and race are also risk factors for AAA<sup>8,9</sup>.

A family history of aneurysm and certain genetic backgrounds are also risk factors for aortic aneurysms. Genetic conditions such as Marfan's syndrome<sup>10</sup>, Loeys-Dietz syndrome<sup>11</sup>, Ehlers-Danlos syndrome<sup>12</sup>, Turner syndrome<sup>13</sup>, and having a bicuspid aortic valve<sup>14</sup> are associated with a relatively high incidence with thoracic aortic aneurysms. These genetic conditions weaken the body's connective tissues ultimately compromising the aorta. People who have these genetic conditions tend to develop aneurysms at a younger age and are at a higher risk for rupture and dissection.

Infections may cause aortic aneurysms<sup>15</sup>. Additionally, aortic aneurysms also can occur as a result of diseases that inflammatory conditions such as vasculitis<sup>16,17</sup>. Lastly, trauma can also damage the walls of the aorta and lead to aneurysms<sup>18</sup>.

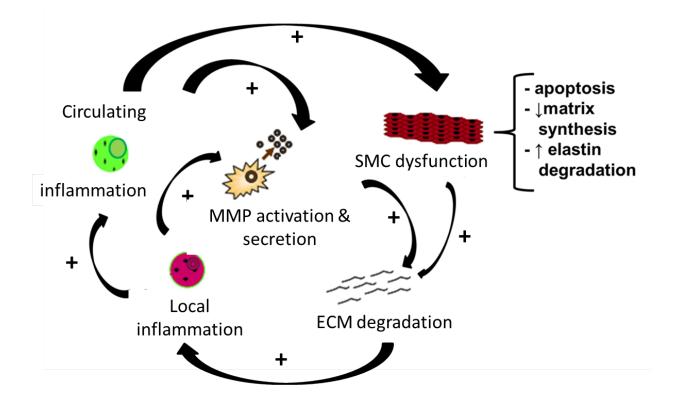
## 1.1.2 Smooth Muscle Cells in Normal vs. Aneurysmal Aortas

SMCs are, by far, the predominant cell type present within the medial layer of the normal vessel wall, and are responsible for the production of the structural proteins of the extracellular matrix (ECM) – mainly collagen and elastin<sup>19</sup>. The SMC also provides active stress giving the wall the ability to contract and dilate in response to blood flow demands and to regulate blood pressure<sup>19-21</sup>.

In the non-pathological condition, SMCs remain in a mostly quiescent, contractile phenotype, having produced most of it elastic fibers in early childhood and only being tasked with collagen maintenance<sup>22-25</sup>. However, SMCs are highly plastic, having the ability to switch phenotypes from contractile to synthetic, allowing the SMC to proliferate, migrate, and synthesize ECM in response to injury<sup>21</sup>. SMC plasticity has been implicated not only in aortic aneurysms<sup>26-29</sup> but also other vascular diseases such as hypertension<sup>21</sup>, atherosclerosis<sup>19,30-32</sup> and intimal hyperplasia<sup>30,33,34</sup>. A number of conditions exist within the aneurysmal state that can promote SMCs to switch from a contractile to a synthetic phenotype such as increased mechanical stress<sup>35,36</sup>, increased substrate stiffness<sup>37</sup>, and increased inflammation<sup>36</sup>.

An additional phenomena characteristic of AAAs compared to normal aortas is an increase in SMC apoptosis. Most of the human studies of SMC in aneurysm disease describe a decrease in the concentration of the cells within the media. In-vitro studies of SMC lines derived from aneurysmal tissue reveal increased SMC apoptosis and poor in vitro propagation<sup>38-41</sup>. It has therefore been hypothesized that the matrix reduction seen in AAA results in part from a reduction in the quantity or activity of SMC<sup>28,38,39,41,42</sup>.

SMCs in the diseased AAA also produce a plethora of factors that sustain the "cycle of destruction" which exacerbates the disease (**Figure 1**). For example, one study showed that matrix metalloproteinase-13 (MMP-13; other MMP activity is more fully discussed in *Section 1.1.6 Other Differences in Normal vs. Aneurysmal Aortas*) is localized to medial SMCs in AAA tissue and to human vascular SMC in culture, which also expressed MMP-13 mRNA thus contributing to the pathophysiologic progression of AAA<sup>43</sup>. Additionally, studies show that SMCs from AAA patients tend to secrete elastase<sup>44</sup>. Clearly, SMC contributes to the cycle of destruction in AAA.



**Figure 1. AAA "cycle of destruction".** AAAs present an active inflammatory environment with multiple positive feedback loops. Figure adapted from Boddy et al.<sup>1</sup>

## 1.1.3 Elastin in Normal vs. Aneurysmal Aortas

One of the main extracellular structural proteins within the vascular wall is elastin which largely occurs in the form of elastic fibers/lamellae. While elastin can provide cellular signals such as maintaining SMC cell senescence<sup>45</sup>, its primary role is to impart the biomechanical property of elasticity to the vascular wall<sup>46-48</sup>. This provides a direct contrast to collagen as its tensile strength is insignificant comparatively, but its elasticity is essential for arteries to recoil and recover the deformation they experience under the cyclic loading<sup>46,48,49</sup>. Additionally, the amount of elastic fibers present in a vessel are linearly proportional to the pressure they experience<sup>47</sup>.

Creation of new elastic fibers is an involved, complex process that rarely happens in adulthood due to downregulation of the genes coding for elastin and elastin-related proteins postnatally<sup>47,50</sup> and an inherently complex elastic fiber synthesis process<sup>51</sup>. The down regulation of elastin-related genes in adulthood is a conserved process occurring across a variety of species<sup>47,50</sup>.

Since adults do not normally produce elastin fibers, the loss of normal medial structure and, in particular, the near complete absence of a normal lamellar elastin is a striking feature of AAA histology compared to the non-aneurysmal aorta. The defatted dry weight of elastin is significantly lower in AAA compared to non-aneurysmal aortas<sup>52,53</sup>.

Aortic elastin is thought to be extremely durable, with a half-life approximating the lifetime of the individual<sup>54</sup>, thus the elastin loss characteristic of AAA is particularly remarkable. Studies of human AAA tissue demonstrate increased expression and/or activity of a variety of elastolytic matrix proteases, including MMPs<sup>55-66</sup>, cysteine proteases<sup>67,68</sup> and serine proteases<sup>69-71</sup>. These studies back up the inverse correlation of elastin content with the elastolytic activity in

the aorta<sup>53</sup>. Importantly, corresponding findings in murine models of AAA have also been seen<sup>72-77</sup>. Additionally, elastase has been shown to come from not only the resident SMCs as discussed above, but also from  $eukocytes^{53}$ .

Once elastic fibers are broken down by the aforementioned proteases, a bevy of proinflammatory signals present in the elastin degradation products (or sometimes called elastin derived peptides) are released which recruit inflammatory cells and propagate the vicious cycle of AAA destruction<sup>78</sup>. Additionally, during the process of elastin fragmentation soluble elastin products can result and act as cell signaling molecules inducing negative effects such as SMC hyper-proliferation<sup>45</sup>, inflammation<sup>1</sup>, and calcification<sup>79</sup>.

## 1.1.4 Collagen in Normal vs. Aneurysmal Aortas

Collagen is the most abundant class of proteins within the body<sup>80</sup> and is one of two main ECM components of the vascular wall along with elastin<sup>47</sup>. The primary function of collagen in the vascular wall is providing mechanical tensile strength<sup>47,48</sup>. The most important collagen types for the vasculature are collagens I, III, and IV<sup>47</sup>. Collagen types I and III are most abundant, residing in the medial and adventitial layers<sup>19,47</sup>. Collagen type IV is present in the basement membrane adjacent to endothelial cells and consists of a network-like structure rather than an elongated fiber like the other types<sup>19,47</sup>.

Most of the tensile strength in the wall is provided by the fibrillar collagen network consisting principally of types I and III collagen with the extensile, or stretching, characteristics being attributed to type III collagen<sup>81</sup>. Ultimately, it is the progressive aneurysmal dilatation along with progressive weakening of tensile strength that causes an aneurysm to rupture.

This progressive weakening is due to the degradation of collagen. Normally, structural collagens are highly resistant to proteolytic degradation, only able to be cleaved by collagenases of the MMP family (i.e., MMP-1, -8, and -13) and selected members of the cysteine protease family<sup>82</sup>. However, in the aneurysmal aorta, studies in human patients have shown reduced levels of cystatin C protein expression along with increased collagen degradation products suggesting that protease inhibitor deficiency may contribute to AAA rupture<sup>83</sup>.

While the late stages of AAA are characterized by an increase in collagen degradation, the earlier stages of the disease are quite different. There is an increase in the proportion of collagen in the aneurysmal aorta compared to non-diseased tissue (84% and 62%, respectively). In the aneurysms, collagen was increased and elastin was decreased<sup>84,85</sup>. Interestingly, while the ratio of type I to type III collagen remains the same in AAA and non-aneurysmal aortas<sup>81</sup>, the turnover of type III collagen is increased in in AAA compared to non-aneurysmal aortas.<sup>86</sup> Additionally, there is an increase of collagen cross-links in AAA which may be attributed to old collagen accumulating cross-links while the biosynthesis of new collagen somehow defective<sup>87</sup>.

While degradation of elastin is a hallmark of AAA and contributes to the cycle of destruction present within the disease, it is ultimately the degradation of collagen that produces the ever greater dilatation and eventual vessel rupture at the end stage of the disease<sup>88</sup>. To this end, collagen based interventions represent a treatment modality that may be better suited to preventing rupture of a large, critically-sized AAA, a contrast to elastin based interventions that may be more suitable for preventing the enlargement of the AAA.

#### 1.1.5 Mechanical Environment in Normal vs. Aneurysmal Aortas

A direct consequence of the loss of elastin and temporal changes in collagen is a corresponding temporal change in the mechanical properties and stresses in the AAA compared to the non-aneurysmal aorta. One may surmise that the loss of the protein that is responsible for the elastic recoil of an artery will lead to a stiffer, less distensible tissue in AAAs compared to non-aneurysmal aortas. This is exactly the case<sup>84,89,90</sup>.

While changes in general mechanical descriptors such as stiffness and distensibility are intuitive when one understands the function and properties of the main structural proteins, elastin and collagen, there is much more to be learned about the mechanics of AAA and the role they play in the disease. Groundbreaking studies in the Vascular Bioengineering Laboratory, headed by Dr. David Vorp, using patient specific geometries for finite element analyses (FEA) showed wall stress to be dependent on aneurysm shape and maximum diameter<sup>91</sup>. Subsequent studies initially built isotropic, uniaxially derived constitutive relations to perform FEA<sup>90</sup> before building more complex biaxial constitutive relations<sup>92</sup>.

Determining the stress on the AAA wall is only half of the equation when understanding the effects of the disease. Understanding the strength of the tissue is also required. Again, this research was pioneered by the Vascular Bioengineering Laboratory who determined that AAA rupture is associated with aortic wall weakening, but not with wall stiffening. This wall strength (which is weaker than non-aneurysmal aortic tissue) in large aneurysms is not related to the maximum transverse diameter<sup>93</sup>. Further research created a regression model for estimating a patient specific strength based on the patient's age, sex, smoking status, family history, and AAA size as well as significant local predictor variables such as intraluminal thrombus (ILT) thickness and local normalized transverse diameter<sup>94</sup>. Importantly, the presence of ILT can alter the wall stress distribution and reduces the peak wall stress in AAA providing a cushioning effect for the wall<sup>95</sup>; however, ILT has also been implicated with providing a hypoxic environment in the wall which could speed degradation of the wall<sup>96-98</sup>.

The culmination of the Vascular Bioengineering Laboratory's work in patient specific stress and strength analysis was the creation of a way to non-invasively assess a patient's susceptibility to rupture, the rupture potential index (RPI). RPI is defined at the stress divided by the strength at each point in the finite element model of a patient's AAA. The Vascular Bioengineering Laboratory has shown that RPI could more reliably show differences in rupture vs. non-ruptured AAA when compared to maximum diameter and peak wall stress measurements<sup>99</sup>.

While RPI may ultimately guide surgeons when determining a patient's need for interventional therapy, there is more that can be learned from the mechanics of AAA with respects to the mechanobiology of the disease. For example, mechanical and chemical cues influence the turnover rates of arterial constituents<sup>100-103</sup>. This is observation agrees with the theory of Y.C. Fung<sup>104</sup> who stated that the rate of volumetric growth is a function of a scalar measure of stress. Importantly, the ideas behind Fung's hypothesis can be traced back to at least the late 19<sup>th</sup> century<sup>105</sup>.

Not only does the magnitude of stress seem to alter the production of ECM, but the direction of principal stress seems to influence the direction at which the ECM deposited. Research suggests that synthetic cells, such as SMCs, seem to have favorable biological functions or behaviors by affecting local anisotropy<sup>106,107</sup>. These mechanobiology concepts have motivated the creation of in-silico growth and remodeling models to test hypotheses. Utilizing

these models may help researchers understand such phenomena as MMP activity co-localizing with peak stresses within the AAA wall<sup>56</sup> and ultimately guide interventional therapies for AAA.

#### 1.1.6 Other Differences in Normal vs. Aneurysmal Aortas

While the above sections cover the differences in the main constituents of the AAA and non-aneurysmal aortic walls, a few other differences are important enough to spell out explicitly. A particular noteworthy difference in all human abdominal aortas occurs in the number of lamellar units and the presence of vasa vasorum when compared to other mammals. The human abdominal aortic media has relatively fewer lamellar units with respect to its diameter than abdominal or thoracic aortas of other species. This elevates the mean tension per lamellar unit. Additionally, vasa vasorum are not as prevalent in human abdominal aortic media leading to avascular zones in the media<sup>108</sup>.

Though the vasa vasorum density is sparse in humans compared to other mammals, there are also differences in the vasa vasorum of AAAs and non-aneurysmal aortas. Both tissue inhibitor of metalloproteinases (TIMPs) and gelatinases are localized to the vasa vasorum suggesting an involvement of the vasa vasorum in the maintenance and possibly the genesis of AAAs<sup>64,65,109-111</sup>. AAAs also have a higher density of medial neovascularization compared to non-aneurysmal aortas localizing to areas of disruption and degradation of elastin and chronic inflammation in the outer aortic wall<sup>112</sup>.

This increase in medial neovascularization could be partially explained by the presence of the ILT which occurs in 75% of AAAs<sup>113</sup>. The ILT creates a physical barrier between the circulating blood and the wall, and an increase in the vasa vasorum would allow access to the wall from circulating cytokines and macrophages which are present in AAAs<sup>83</sup>. It's no wonder

that the process of aneurysmal enlargement is so complex, involving inflammatory cells, elastin and collagen degradation, smooth muscle apoptosis, and hypoxia mediated weakening<sup>114</sup>, all mentioned above. Additionally, studies of human AAA tissue demonstrate increased expression and/or activity of a variety of elastolytic matrix proteases, including MMPs<sup>55-66</sup>, cysteine proteases<sup>67,68</sup> and serine proteases<sup>69-71</sup> while lower or steady levels of TIMPs<sup>115</sup> when compared to non-aneurysmal aortas.

## 1.2 CURRENT CLINICAL TREATMENT OF AAA

The impact of AAA on the health of the nation is staggering. 7-10% of all males over the age of 55 are affected by this disease, resulting in about 1% of the annual deaths in this population<sup>116</sup>. Available treatments for AAA currently rely on the placement of a synthetic graft to physically exclude the aneurysmal segment of the aorta. A patient may need repair if the maximum diameter of the aneurysm surpasses 5 cm or if the growth rate of the aneurysm is greater than 0.5 cm per year, criterions that suggest the risk of rupture is greater than the risk associated with surgery. A patient may also need repair to relieve symptoms of the disease, restore blood flow, or to address emergency, life-threatening bleeding that is not due to rupture. Currently, repair is performed via two different methods, open and endovascular aneurysm repair (EVAR).

## 1.2.1 Surgical Options: Open Repair and EVAR

During open repair, surgeons make a large incision in the abdomen to expose the aorta. The aorta is cross clamped, and the aneurysm is cut open. A graft is sewn inside the aneurysmal portion of the aorta after removal of the ILT if present. Then, the wall is sewn back in place around the graft. Open repair is associated with a number of risks including but not limited to: heart attack, irregular heart rhythms, bleeding during or after surgery, injury to the bowel, blood clot, and infection of the graft. The 30 day mortality risk is higher with open repair, but long term problems are lower when compared to EVAR<sup>117</sup>.

EVAR is a minimally invasive option done without a large incision. Surgeons make a small incision in the groin where a catheter is feed through an artery to access the aneurysm. Once in the aneurysm is reached, a grafting stent is deployed that can stretch from above the renal arteries down through the iliac bifurcation. EVAR is associated with a number of risks including but not limited to: damage to surrounding blood vessels, organs, or other structures, kidney damage, groin wound infection and hematoma, and endoleaks – a continual leaking of blood out of the graft and into the aneurysm sac.

While both procedures accomplish the goal of physically excluding the AAA from blood flow thus lowering the risk of a fatal rupture, neither approach has shown a benefit in the treatment of small AAA (<5.5 cm maximal diameter) which have a very low risk of rupture<sup>118</sup>. Currently, there are no effective treatments to offer these patients, and management is limited to "watchful waiting" (i.e., serial imaging of the AAA until the threshold for surgical treatment is met). There is also a huge healthcare cost burden associated with AAA repair which is estimated at \$2.125 billion dollars per year (50,000 annual patients \* \$85,000 total 2 year costs<sup>119</sup>).

## 1.2.2 Systemic Anti-inflammatory Drugs

Given the problems with current AAA treatments mentioned above, researchers have sought to find alternative, interventional therapies for the disease. There is substantial preclinical work in aneurysm therapy which has been directed toward the inhibition of elastolytic processes with general or more specific anti-inflammatory or anti-protease agents<sup>76,120,121</sup>. Other studies utilizing anti-inflammatory molecules or MMP-inhibiting antibiotics (doxycycline and tetracycline) have been shown to prevent aneurysm formation or expansion in animal models of AAA<sup>122-125</sup>.

The work cited above has, in part, led to patients currently being enrolled in a clinical trial titled "Non-Invasive Treatment of Abdominal Aortic Aneurysm Clinical Trial" (N-TA(3)CT, NCT01756833). This study aims to determine whether doxycycline (100 mg bid) will inhibit (by at least 40%) the increase in greatest transverse diameter of small abdominal aortic aneurysms (3.5-5.0 cm in men, 3.5-4.5 cm in women) over a 2 year observation period in comparison to a placebo-treated control group.

At the time of this writing, 200 patients – 179 (90%) male and 21 (10%) female – have been randomized in the clinical trial. The average age was 70.9 (SD = 7.6) for those randomized into the trial. Among these randomized patients, the average maximum transverse diameter for men was 4.3 cm (SD = 0.4) and for women 4.0 cm (SD = 0.3)<sup>126</sup>.

#### **1.3 PRECLINICAL AAA MODELS**

Like many diseases, AAA has a number of different models that have been created in order to study disease. Large animal models are mainly used to develop novel methods to surgically treat AAAs. Small animal models are used to explore the mechanisms involved in AAA in an effort to develop new medical treatments. In-silico computational models are used to test our current understanding of the disease and also develop new hypotheses to test in the laboratory using in-vitro or in-vivo methods.

#### **1.3.1 Animal Models**

There are a number of different animals that have been used for AAA models. The most common large animal models include canine<sup>127,128</sup>, swine<sup>129-134</sup>, ovine<sup>135-137</sup>, and turkey<sup>138</sup> models. These models tend to be useful for surgical studies; however, the high cost makes these models impractical for mechanistic research. The most common small animal models include mouse<sup>76,139-141</sup>, rat<sup>121,123,142-144</sup>, and rabbit<sup>145-147</sup> models. These models are cheaper and allow for mechanistic studies of the disease and potential treatments. The downside to small animal models is the difficulty in handling the small sized arteries.

Animal models are created in number of different methods. Broadly speaking, the method of aneurysm induction is broken down into chemical induction, surgical induction, and genetic predisposition. The chemical induction method includes elastase perfusion<sup>140</sup>, calcium chloride application<sup>148</sup>, and angiotensin-II infusion<sup>149</sup>. Surgical induction methods include poststenotic dilatation models<sup>150</sup>, vein patches<sup>150</sup>, and xenografts<sup>151,152</sup>. Genetically predisposed models are currently limited to ApoE knockout mouse models<sup>153</sup>. All of the induction methods can be used

on all the animals mentioned expect the angiotensin-II infusion and the ApoE knockout models. These models are usually limited mice. These models are more thoroughly reviewed by Trollope et al.<sup>154</sup>.

The elastase perfusion (EP) model of AAA, the chosen model for the work of this dissertation, was first described in the early 1960s<sup>155,156</sup>. The experimental AAA is created by transient intraluminal perfusion of the abdominal aorta with pancreatic elastase. Specifically, the EP murine model was chosen because of its lower cost compared to larger animal models and its similarities to the clinical disease including the extensive loss of elastic fibers, fusiform dilatation and its anatomic localization, as well as its reproducibility<sup>69,76,139,157</sup>. Additionally, the EP model is preferred over the ApoE knockout/angiotensin II infusion murine AAA model due to the latter's unsustainable hallmarks of AAA<sup>158</sup>.

## 1.3.2 Computational Models of Growth and Remodeling

While the insights gained from the animal models discussed above are important to the field of AAA research, they do have drawbacks including high cost, extended time for results, and the inherent variability that exists in biological studies. Due to these limitations, researchers have been motivated to develop theories of arterial growth and remodeling (G&R) which has led to frameworks for modeling G&R of soft cardiovascular tissues<sup>159-163</sup>. These early models focused on the consequences of G&R rather than the mechanisms driving G&R.

The first framework that was introduced to investigate G&R's governing principles was the constrained mixture model put forth by Humphrey and Rajagopal in 2002<sup>164</sup>. This theoretical framework utilized computational studies to clarify the complex mechanisms of sophisticated experimental techniques by narrowing the parametric spaces. These models would in turn allow

researchers to focus their experimental studies allowing more detailed and complete empirical observations. Since mixture models were first introduced in 2002, this framework has tested hypotheses of arterial G&R computationally while guiding new experiments that may back up the computationally predicted trends<sup>22-25,96,165-181</sup>.

Other frameworks of arterial G&R have been postulated. Their mechanisms are similar to constrained mixture models in the sense that they are built on observed behaviors and that their predictions can be tested by experimentation. Many different arterial G&R hypothesis exist (see Watton et al.<sup>182</sup> for a detailed review); however, due to its particular strengths<sup>183</sup>, the constrained mixture model is used in the work of this dissertation to understand the effects of a proelastogenic therapy on AAA.

## 1.4 PRECLINICAL AAA TREATMENT APPROACHES

While the ongoing N-TA(3)CT clinical trial will help determine if systemic administration of oral antibiotics can slow the enlargement of AAAs in patients, researchers continue to seek out alternative therapies. Generally speaking, these therapies are designed to be interventional. The targets of these therapies are some of the highlighted differences AAA vs. non-aneurysmal aortas highlighted in the sections above. Importantly, the treatments tend to address the causes of the disease rather than solely prevent rupture which is the goal of current treatment methods.

## **1.4.1 Localized Treatments**

In clinical studies prior to the N-TA(3)CT clinical trial, doxycycline was found to be well tolerated by most patients with small AAAs; however, some patients developed dose-dependent side effects, such as cutaneous photosensitivity, dental discoloration, and gastrointestinal tract disturbances<sup>184</sup>. In response to these findings, researchers sought to localize (periaortic) administration of doxycycline in an attempt to inhibit the development of experimental AAAs as effectively as systemic treatment<sup>120</sup>. The results of this study by Bartoli et al. indicated that localized administration of doxycycline was a promising strategy to inhibit the progression of aortic aneurysms. The methods detailed in this study have also served as inspiration for the method of localizing the treatment described in this dissertation.

At least one other group of researchers, the Vyavahare Laboratory, has examined the localized delivery of therapeutic agents to the periadventitial wall of the aorta in AAA models. This group delivered an elastin binding polyphenol, pentagalloyl glucose (PGG), to the periadventitial wall of the aorta and found that a one-time periadventitial delivery of PGG inhibited elastin degeneration, attenuated aneurysmal expansion, and hindered AAA development in rats<sup>185</sup>. Local, periadventitial delivery of therapeutics shows promise in attenuating AAA progression in animal models while avoiding side effects of systemic delivery and avoiding the physical barrier presented by the ILT.

#### 1.4.2 MircoRNAs

MicroRNAs (miRNAs) are approximately 20-nucleotide, single-stranded RNA molecules that target mRNA through partial complement binding. These molecules regulate gene expression by inhibiting translation or degrading the transcript<sup>186</sup>. There is emerging evidence that miRNAs play a role in AAA pathogenesis. Unsurprisingly, a number of different miRNAs that are associated with the function of integral features of AAA disease have recently been explored.

miRNAs that affect SMC function have been explored as potential treatment options for AAA. Specifically, miRNA-21<sup>187</sup> and miRNA-26a<sup>188</sup> have been studied in the context of AAA disease because they are known to be key modulators of proliferation and apoptosis as well as differentiation, proliferation and migration, respectively. Given the deficiencies in aneurysmal SMCs noted in the sections above, it is not surprising that these miRNAs are being studied.

Other miRNAs have been shown to modulate gene expression of ECM proteins as well as MMPs and TIMPs. For example, miRNA-29b is a known target of elastin and collagen, and studies show that miRNA-29b can modulate gene expression in AAA models<sup>189,190</sup>. Additionally, miRNA-205 can modulate TIMP levels<sup>191</sup>, and miRNAs 1, 21, 29a, and 133a have been shown to modulate MMP-2 and MMP-9 expression<sup>192</sup>.

# 1.4.3 Mesenchymal Stem Cell (MSC) Treatment

While the aforementioned preclinical AAA therapies all have their benefits including localized treatment and treating some of the causes of the disease, none have as much potential to treat the disease as mesenchymal stem cells (MSCs). The processes that initiate and expand a AAA are heavily based on cellular activity; therefore AAAs represent an optimal target for regenerative MSC based therapy. MSCs have the ability to secrete growth factors<sup>193,194</sup> which suppress inflammation and MMP activity while stimulating elastin and collagen production. MSCs can also differentiate, thus providing a means to replace lost smooth muscle cells.

Furthermore, MSCs have already shown promise as a treatment for AAAs in animal models when delivered systemically which showed a reduction in the inflammatory response<sup>195</sup> and decreased MMP levels<sup>196</sup> suggesting a paracrine mechanism of action. MSCs have also shown promise when delivered by direct injection into the aortic wall which displayed MSC engraftment into the aneurysm wall allowing for the possibility of MSC differentiation<sup>133</sup>. Additionally, MSCs have also been delivered to the periadventitial of the experimental AAA using cell sheets<sup>197</sup>.

In the MSC treatment studies mentioned above, the experiments delivered treatment concurrent with or prior to model initiation and demonstrated prevention of AAA development. Yet clinical therapy for AAA is unlikely to be initiated prior to measurable dilatation of the aorta. By the time an aneurysm can be clinically detected, severe matrix degradation – including near complete loss of medial elastin – has already occurred, and inhibition of further matrix degeneration alone may be insufficient. With that in mind, the delivery of MSCs to an experimental AAA should be done after the aneurysm is actively expanding. The work detailed in this dissertation which has led to published results<sup>140</sup> was designed with this requirement in mind.

# **1.5 AAA STUDIES IN THE VASCULAR BIOENGINEERING LABORATORY**

The Vascular Bioengineering Laboratory has been a pioneer in AAA research, studying many different aspects of AAA biology<sup>98,198-206</sup>, modeling<sup>89,92-95,114,168,207-240</sup>, stress analysis<sup>90,91,95,203,230,234,236,241-243</sup>, mechanobiology<sup>206,233,244-246</sup>, and index modeling<sup>94,99,247,248</sup>. The Vascular Bioengineering Laboratory has also performed studies on thoracic aneurysms

including stress analysis<sup>201,217-221,230,249</sup> and microstructure analysis<sup>250-255</sup>. For most of the life of the laboratory, the Vascular Bioengineering Laboratory has sought out understanding of the disease. The work of this dissertation represents a step into the direction of an interventional therapy for AAA and has resulted in two peer reviewed publications<sup>140,256</sup> as well as funding from the National Institutes of Health (HL129066) and the University of Pittsburgh Center for Medical Innovation (F\_168-2016, PI: Blose).

# 1.6 HYPOTHESES AND SPECIFIC AIMS

The work of this dissertation will lay the groundwork for an interventional MSC based AAA therapy. The subsequent chapters will cover pre-clinical, experimental in-vitro, in-silico, and in-vivo work as well as pre-clinical, experimental product development work. This study includes the three following Specific Aims and Hypotheses:

**Specific Aim 1:** Establish the ability of SMCs to produce elastin when co-cultured with ADMSCs in-vitro and determine the utility of elastin production in in-silico models of AAA. We seek to establish a method of inducing adult, human, SMCs to produce mature, mechanically functional elastic fibers. We hypothesize adult, human, SMCs grown in 3-D fibrin gels will produce elastic fibers when co-cultured with ADMSCs. We anticipate that co-culture of SMCs with ADMSCs will have positive impact on elastin production showing elastin that is formed into fibers.

Not stopping at just this elastogenic proof of concept, we will also try to understand any potential benefits of elastin production in the context of AAA. We hypothesize that elastin production within computational models of AAA G&R will alter the mechanical state of AAA to

the point where growth of the maximum diameter slows. We expect the results of the computational study to show that elastin production in the computational model with have an inverse relation to the enlargement rate of the AAA.

**Specific Aim 2:** Demonstrate that a periadventitial cell therapy approach halts and/or reverses the progression of a AAA in a mouse model. We hypothesize that the periadventitial delivery of ADMSCs to an established, expanding murine AAA model will acutely halt the progression of the disease within the model. We will assess the effects of treatment on infrarenal aortic diameter, tensile properties, elastin architecture, and collagen architecture.

We expect a significant reduction in aortic dilation, the primary measure of success for this aim. Should elastin be produced in our therapeutic model, we would expect our treatment to lower the tangent modulus of the vessel.

**Specific Aim 3:** Development of a preclinical periadventitial cell therapy delivery system. Our proposed therapy for treating subcritical AAAs (<5.5 cm), is the localized delivery of therapeutic cells to the periadventitial wall encapsulated in a fibrin gel. The system for accomplishing the localized delivery consists of 4 parts: (1) iron nanoparticle loaded therapeutic cells; (2) a mixing and delivery apparatus that ensures proper mixing and dispensing of cells, fibrinogen, and thrombin; (3) ultrasonic needle guidance; and an (4) endoluminal magnetic catheter.

We expect that when combined, the resulting therapy will be capable of delivering therapeutic cells to the periadventitial surface of the AAA with a fibrin gel holding the cells in place.

This research project was designed to build an interventional, MSC based AAA therapy. Much of the preclinical work involved with this idea is contained in the following chapters. First,

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a novel method for testing soft materials is described (Chapter 2). This work is used in the evaluation of the elastogenic potential of MSCs when co-cultured with ADMSCs. The elastogenic potential of these SMCs is evaluated mechanically, histologically, and biochemically (Chapter 3). This analysis is followed by in-silico experiment determining the effect of elastin production in computational models of AAA G&R (Chapter 4). After exploring elastin production in the context of AAA, our ADMSC therapy is tested in-vivo using a murine elastase perfusion model of AAA (Chapter 5). Next, the development of a cellular delivery system for use in patients in detailed (Chapter 6). Finally, a summary of results and thoughts on future directions is provided (Chapter 7).

# 2.0 DESIGN AND VALIDATION OF A VACUUM ASSISTED ANCHORAGE FOR THE UNIAXIAL TENSILE TESTING OF SOFT MATERIALS

Due to the limitations of current uniaxial tensile testing methods, we sought to design an alternative gripping mechanism for soft materials such as the gels created in Section 3.2.3. Mechanically testing these gels will allow us to verify the production of mechanically functional elastin fibers and networks by SMCs within our 3D fibrin hydrogel culture system, an important step in showing proper elastogenesis. The gripping mechanism, a vacuum assisted anchor, is detailed and verified in this chapter and was published in Soft Materials<sup>256</sup>.

# 2.1 INTRODUCTION

Tensile testing systems are commonly used to impart mechanical load to materials in order to experimentally evaluate mechanical properties including stiffness and tensile strength. Current commercial tensile testing systems rely on spring-loaded or other compression-based grips to clamp tissues in place to avoid slipping during uniaxial extension. For robust and mature tissues or materials, the clamping force is typically not a problem. However, when attempting to clamp soft materials (which we define as tissue or materials with a tangent modulus ~15 kPA), the clamping force can cause catastrophic damage to the sample. This also poses a problem when studying the mechanobiology of soft materials when loading is desired.

For instance, cell-seeded fibrin gels are used to create tissue engineered constructs, such as vascular grafts<sup>257-259</sup> and heart valve leaflets<sup>260,261</sup>, and as three dimensional (3D) in-vitro culture systems<sup>262-264</sup>. Unless these gels are polymerized around a grippable post<sup>265</sup> or integrated into a stronger material<sup>266</sup>, they cannot be secured in conventional uniaxial tensile loading systems until significant remodeling has occurred. Attempts to mechanically test or load purely gel-based tissue constructs have been limited to ring tests on sections of tubular cell-seeded constructs<sup>267-269</sup>. While ring tests represent a valuable tool for determining mechanical properties, the method has inherent deficiencies including non-constant strain rates, compression at the pulling posts, and convoluting edge effects<sup>270</sup>. Using either ring tests or custom molds restricts the geometry and possibly the material of samples that can be used for testing. Performing uniaxial tensile tests mitigates the problems surrounding ring tests and will allow researchers to gather meaningful tensile data that might reveal the role of the mechanical environment during the initiation of tissue remodeling in these experimental systems.

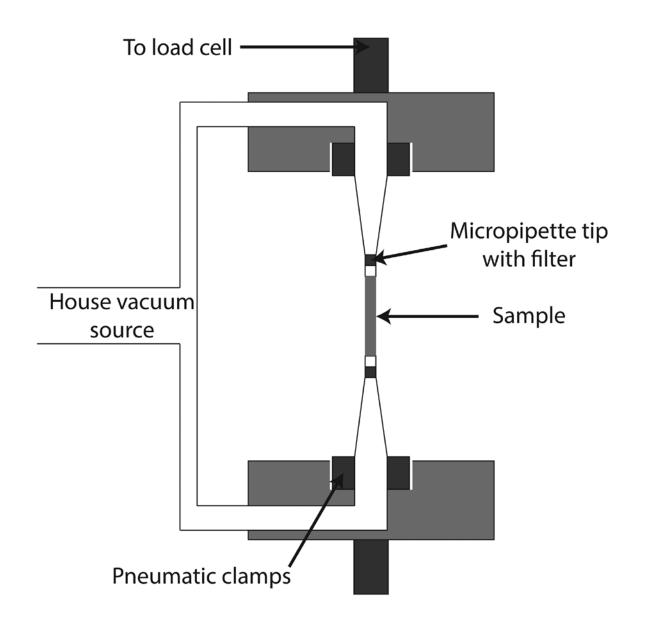
Drawing inspiration from micro-aspiration techniques that are used for membrane mechanics studies<sup>271</sup>, we designed a vacuum-based anchorage system to grip a soft material subjected to uniaxial tensile loading. Here we present our solution: a novel vacuum-assisted anchor (VAA). Our design was validated by using the VAA to grip and mechanically test two soft materials (fibrin gels) that were previously unable to withstand uniaxial tensile testing using conventional methods.

# 2.2 METHODS

#### 2.2.1 Design and Functional Principles of the VAA

The VAA design is shown in **Figure 2**. The prototype uses a typical house vacuum source (approximately 45 kPa gauge pressure) to secure a sample against an in-line filter via a 90 degree plastic elbow. The elbow (1/4" outer diameter) fits inside the pneumatic clamps of a commercial tensile testing system and can therefore be moved up and down. The open end of the elbow is connected to a truncated, aerosol-resistant micropipette tip, allowing the sample to be secured without being pulled into the vacuum line.

Our prototype was designed to be used within a specific commercial uniaxial tensile testing system (Instron, #5543a, Norwood, MA) although vacuum supply line sizes can also be altered to fit inside a wide variety of commercial testing systems. All components of the prototype VAA are readily available in most laboratory settings.



**Figure 2. VAA Design Concept.** Schematic of the VAA design is shown. A house vacuum source is directed to the testing sample and clamped by pneumatic grips

#### 2.2.2 Fibrin Gels as Testing Materials

Fibrin gel was used as a sample material to demonstrate proof-of-concept of the VAA for tensile testing. Two densities of fibrin gels were fabricated by mixing bovine fibrinogen type I at different concentrations (VAA Fib\_5 [5 mg/mL] and VAA Fib\_10 [10 mg/mL], Sigma-Aldrich, St. Louis MO) with bovine thrombin (1 NIHU/mL, Sigma-Aldrich, St. Louis, MO) within the troughs of Flexcell<sup>TM</sup> Tissue-Train<sup>TM</sup> plates (Flexcell Int., Hillsborough, NC). Gels were allowed to polymerize for at least 2 hours in incubator conditions (37<sup>o</sup> C, 5% CO<sub>2</sub>).

Additional gels were fabricated using the same concentrations of fibrinogen (Ver. Fib\_5 [5 mg/mL] and Ver. Fib\_10 [10 mg/mL]) and thrombin mentioned above, and these gels were formed between two strips of polyvinyl alcohol (PVA) sponge material that served as anchorage points for mechanical testing. These gels served to verify the VAA compared to alternative testing methods.

#### 2.2.3 Mechanical Testing

The VAA was clamped into an Instron uniaxial tensile testing system (Instron, #5543a, Norwood, MA,) and fibrin gels were gently placed next to the open ends of the VAA while the vacuum was turned on. Samples were stretched to initial, unloaded lengths by moving the crosshead until force readings were present. A constant crosshead speed of 0.1 mm/sec was used to pull on the samples, and the applied load and resulting displacement (d) were recorded continuously using the Instron-packaged software (Bluehill, Version 2, Instron, Norwood, MA). The axial component of the First Piola Kirchhoff Stress (the P<sub>11</sub> component of the full First Piola Kirchhoff Stress Tensor, **P**) was calculated using the force measurement (f) from a 25 N load cell

(MDB-25, Transducer Techniques, Temecula, CA) and the initial measured area ( $A_o$ , diameter measured from pictures of stress free samples held in VAA), as follows:

$$P_{11} = \frac{f}{A_0} \tag{2-1}$$

The fibrin gels that were formed between the PVA-sponge strips were tested in the same manner as described above. The PVA-sponge served as the anchor point for clamping.

# 2.2.4 Material Assumption and Mechanical Properties

We assumed that all fibrin gels displayed transverse isotropy for a rod-like material. A Poisson's Ratio (v) of 0.25 was assumed which was consistent with previously reported values for fibrin<sup>268</sup>. The deformation gradient tensor, F, is described as:

$$\boldsymbol{F} = \begin{bmatrix} \lambda_{a} & 0 & 0\\ 0 & \lambda_{t} & 0\\ 0 & 0 & \lambda_{t} \end{bmatrix}$$
(2-2)

The axial stretch  $(\lambda_a)$  is calculated from the initial length measurement  $(L_0)$  and the displacement (d) measured during testing as follows:

$$\lambda_{a} = \frac{L_{a} + d}{L_{a}}$$
(2-3)

The transverse stretch ( $\lambda_t$ ) was calculated from the exact relation for finite stretch values as follows<sup>272</sup>:

$$\lambda_{t} = \lambda_{a}^{-\nu}$$
(2-4)

The Cauchy stress is defined as:

$$\boldsymbol{\sigma} = \mathbf{J}^{-1} \mathbf{P} \mathbf{F}^{\mathrm{T}}$$
(2-5)

where the Jacobian, J, is defined as the determinant of  ${f F}$ 

$$J = det(F)$$

(2-6)

For uniaxial loading, we will consider the axial component of the Cauchy stress ( $\sigma_{11}$ ):

$$\sigma_{11} = P_{11} \lambda_a^{2\nu} \tag{2-7}$$

We defined the experimentally determined elastic limit as the stretch ratio where the second derivative of the axial component of Cauchy stress ( $\sigma_{11}$ ) with respect to  $\lambda_a$  is a maxima<sup>273</sup> (see **Figure 3**.) The "yield stress" was defined as the value of  $\sigma_{11}$  at the experimentally determined elastic limit; i.e. the "yield stretch." The tangent modulus is defined as the slope of the linear portion of the  $\sigma_{11}$  vs.  $\lambda_a$  curve. The ultimate tensile strength (UTS) is defined as the maximum value of the  $\sigma_{11}$  vs.  $\lambda_a$  curve, and the ultimate stretch is the value of  $\lambda_a$  where the UTS is defined. The ultimate properties were only calculated for samples that had a confirmed tensile failure. Any samples that demonstrated slipping behavior were corrected by analyzing the tangent modulus of the sample.

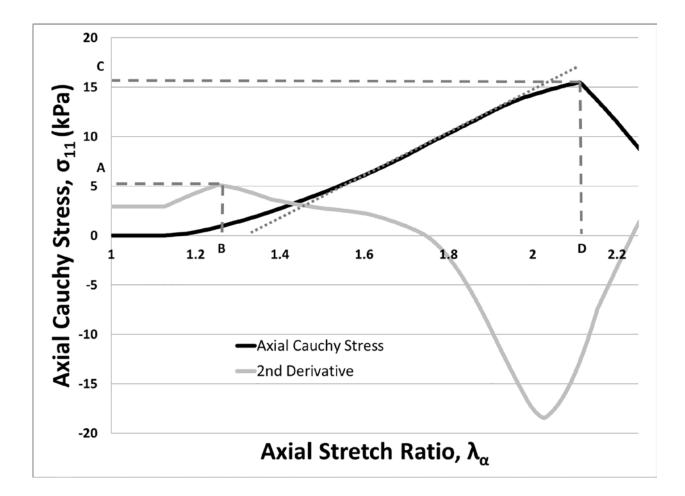


Figure 3. Features of Stress-Strain Behavior Captured by the VAA. The black curve shows  $\sigma_{11}$  vs.  $\lambda_{\alpha}$  from a sample test using 5 mg/mL fibrinogen. The gray curve is a scaled form of the second derivative of the  $\sigma_{11}$  with respect to  $\lambda_{\alpha}$ . Points A and B indicate the yield stress and yield stretch, respectively. The ultimate tensile strength (UTS) and ultimate stretch are noted by points C and D, respectively. The linear portion of the black stress-strain curve is estimated by a dotted gray line. The slope of this line is the tangent modulus.

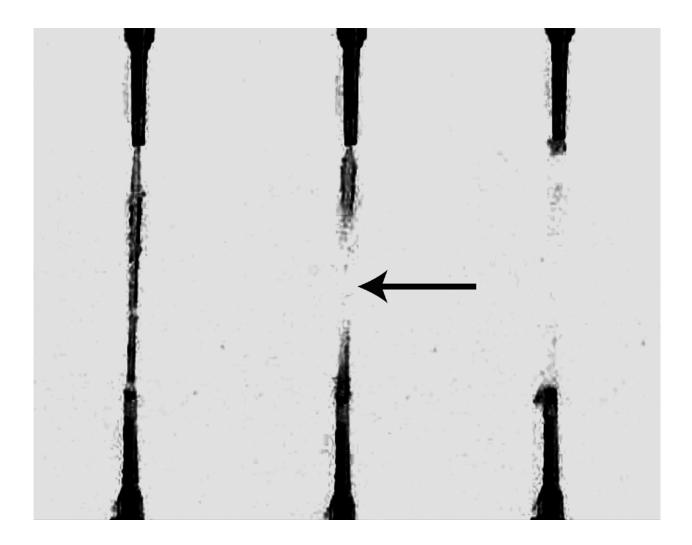
#### 2.2.5 Statistics

Student t-tests were used to compare mechanical properties (yield stretch, yield stress, tangent modulus, ultimate stretch, ultimate tensile strength) between material groups. Statistical significance was assigned to p-values < 0.05. Data given as mean  $\pm$  SD.

#### 2.3 **RESULTS**

## 2.3.1 Device Performance

The VAA was able to successfully grip soft, delicate fibrin gels subjected to uniaxial tensile testing leading to tensile failures (confirmed with frames from slow-motion video in **Figure 4**). By using regulated vacuum, the VAA does not damage the sample at the gripped location and creates a highly tunable method of delivering anchoring force to soft materials. The use of the VAA yielded true tensile breaks in 47% of all tests (compared to a 0% success rate we experienced in our lab using conventional gripping methods). A total of 59% of samples provided useful yielding data (i.e. stress-strain data through stretch ratios up to the yield stretch, see **Table 1**).



**Figure 4. Visual Confirmation of a Tensile Break.** Three frames (captured at 30 frames per second) from a video of uniaxial tensile test are shown. The left frame shows the gel just before its tensile failure. The middle frame confirms a tensile break in the center of the fibrin gel (arrow) with the two halves of the fibrin gel recoiling back to their respective VAA grips (right frame).

**Table 1. Breakdown of useful sample numbers by group.** Successful tensile tests illustrate the gripping efficiency of the VAA. By utilizing the VAA during uniaxial tensile loading, we were able to collect meaningful tensile and ultimate data from samples.

Group	Total Samples	Useful Yield Data	Useful Ultimate Data
VAA Fib_5	n=29	n=20 (69%)	n=18 (62%)
VAA Fib_10	n=29	n=14 (48%)	n=9 (31%)
VAA Total	n=58	n=34 (59%)	n=27 (47%)
Ver. Fib_5	n=10	n=7 (70%)	n=6 (60%)
Ver. Fib_10	n=10	n=7 (70%)	n=5 (50%)
Ver. Total	n=20	n=14 (70%)	n=11 (55%)

# 2.3.2 Device Validation and Verification

The VAA was validated by determining the mechanical properties of fibrin gels made from two different concentrations of fibrinogen that were previously unable to be evaluated using conventional methods for uniaxial tensile testing. A summary of the elastic mechanical properties of the fibrin gels made with two different concentrations of fibrinogen (VAA Fib\_5 = 5 mg/ml, or VAA Fib\_10 = 10 mg/ml) is provided in Table 2. The VAA Fib\_5 group had a higher yield stress (2.74±1.62 vs. 1.53±0.74 kPa;

p=0.014) and tangent modulus (12.94±4.85 vs. 9.64±3.77 kPa; p=0.033). A summary of the

ultimate mechanical properties is provided in

**Table** 3. The VAA Fib\_5 group also had a higher UTS ( $8.18\pm3.97$  vs.  $4.12\pm1.55$  kPa; p=0.001) and ultimate stretch ( $2.00\pm0.23$  vs.  $1.76\pm0.25$ ; p=0.031).

**Table 2. Fibrin gel elastic mechanical properties.** Significant differences (\*) in the elastic mechanical propertiesof the fibrin gel groups are revealed during tensile tests using the VAA. Yield stretch, yield stress, and tangentmodulus values are reported as mean  $\pm$  SD from each fibrin gel group. The VAA Fib\_5 group had higher yield stressand tangent modulus values.

Group	Yield Stretch	Yield Stress (kPa)	Tangent Modulus (kPa)
VAA Fib_5 (n=20)	$1.20 \pm 0.11$	2.74 ± 1.62	12.94 ± 4.85
VAA Fib_10 (n=14)	$1.24 \pm 0.12$	1.53 ± 0.74	9.64 ± 3.77
p-value	0.322	0.014 *	0.033 *

Table 3. Fibrin gel ultimate mechanical properties. Significant differences (\*) in the ultimate mechanical properties of the fibrin gel groups are revealed during tensile tests using the VAA. Ultimate stretch and ultimate tensile strength (UTS) are reported as mean  $\pm$  SD from each fibrin gel group. The VAA Fib\_5 group had higher ultimate stretch and UTS values.

Group	Ultimate Stretch	UTS (kPa)
VAA Fib_5 (n=18)	2.00 ± 0.23	8.18 ± 3.97
VAA Fib_10 (n=9)	$1.76 \pm 0.25$	4.12 ± 1.55
p-value	0.031 *	0.001 *

The VAA Fib\_5 group had a similar yield stress and tangent modulus when compared to the Ver. Fib\_5 group [yield stress:  $(2.74\pm1.62 \text{ vs. } 3.95\pm1.88 \text{ kPa}$ , respectively; p=0.20), tangent modulus:  $(12.94\pm4.85 \text{ vs. } 12.1\pm2.97 \text{ kPa}$ , respectively; p=0.72)]. The VAA Fib\_10 group also had a similar yield stress and tangent modulus when compared to the Ver. Fib\_10 group [yield stress:  $(1.53\pm0.74 \text{ vs. } 1.97\pm0.58 \text{ kPa}$ ; p=0.29), tangent modulus:  $(9.64\pm3.77 \text{ vs. } 10.40\pm1.69 \text{ kPa}$ ; p=0.69)].

#### 2.4 DISCUSSION

In this study, we developed a device for uniaxial tensile loading of soft materials such as gels. Previous attempts to do so using conventional mechanical grips consistently resulted in failures at the gripped location. We designed our vacuum-based gripping mechanism to provide a means to adequately grip the sample during tensile loading – even to true tensile failures – while avoiding the edge effects associated with ring tests. Our novel grip described here could be used to evaluate the uniaxial mechanical properties of a wide array of soft, gelatinous-like tissues and materials, both biological and non-biological. Further, it could be used to impart uniaxial loading on materials, such as cell-seeded gels for mechanobiology studies.

Analysis of our mechanical tests revealed differences in the mechanical properties between two groups of soft fibrin gel strips, which could not be achieved using other conventional testing systems. Our results are similar to a previously published study by Cummings et al.<sup>267</sup>, which performed ring tests of tubular fibrin constructs, and calculated a tangential modulus of 19 kPa for gels created with 4 mg/mL fibrinogen and 0.4 NIHU/mL thrombin. We calculated a mean tangent modulus of ~13 kPa for our VAA Fib\_5 group, which was a similar fibrinogen concentration (5 mg/mL) to the Cummings et al. study. The VAA was also verified through our own testing using alternative means.

The VAA will allow for uniaxial tensile testing of soft materials that were previously limited to other mechanical testing methods such as compressive testing and atomic force microscopy (AFM) to determine mechanical properties. For example, Kirchmajer et al.<sup>274</sup> have developed a degradable genipin cross-linked gelatin hydrogel to be used as a scaffold for tissue engineering purposes. The mechanical characterization of this soft material was limited to compression and rheological studies - sufficient for researchers looking to use this hydrogel scaffold for creating tissue engineered cartilage or other compressive load bearing tissues. However, the same hydrogel might also be useful for tissues bearing tensile loads (e.g. tendon, blood vessels, skin). Evaluation of soft material tensile properties with a device such as the VAA will be a critical step towards engineering new tensile load bearing tissue equivalents<sup>275-278</sup>.

AFM is a technique often used to investigate the mechanical properties of individual cells, fibers, or other materials that may be too delicate to undergo conventional uniaxial tensile testing where compressive grips are employed. Equipment cost considerations and availability can make using AFM impractical; however the desire to know tensile properties of cells, their substrates, and the effects of the substrate's mechanical properties has left researchers with no other options for very soft materials. For example, Solon et al.<sup>279</sup> used AFM to examine the functional effect of polyacrylamide gel stiffness on cultured fibroblasts, revealing important insights into how substrate stiffness can affect cell stiffness and f-actin organization. The VAA provides an alternative tool for performing uniaxial tensile tests on soft materials like polyacrylamide gels that is more affordable and readily available than AFM.

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The VAA is inherently limited by the strength of the vacuum source, the normal area of the sample in contact with the device, and the integrity of the seal between the sample and the device. A quality seal will ultimately lead to higher success rates during mechanical testing. This is demonstrated in the differences in the success rates between the VAA Fib\_5 and VAA Fib\_10 groups. The VAA Fib\_10 group will have more dense fibers <sup>280</sup> and less water in the sample. As the sample is pulled, water will be squeezed out, thus eventually compromising the quality of the seal. This phenomenon would partially explain the differences in success rates between the two testing groups. The theoretical maximum gripping force is limited to the product of atmospheric pressure and the normal area of the sample in contact with the VAA. A practical limit to maximum gripping force is dependent upon the strength of vacuum source (house source or commonly available vacuum pumps). In order to extend this technology to hydrated samples, improvements in the quality and repeatability of the seal would need to be made.

Our mechanical analysis has limitations inherent to the material fabrication and assumptions made regarding our test materials (fibrin gels). When fabricating our gels, we only varied the fibrinogen concentration. The amount of thrombin used was held constant. This meant that the ratio of fibrinogen to thrombin in each sample was also different and may have introduced convoluting effects such as changing relative fiber diameters, lengths and branchpoint densities<sup>280</sup>. Indeed, this work by Ryan et al. shows that decreasing ratios of fibrinogen to thrombin leads to increased fiber density and branchpoint density. The higher tensile and ultimate properties exhibited by the VAA Fib\_5 could be due to the lower ratio of fibrinogen to thrombin which leads to increased fiber density and branchpoint density. Additionally, we assumed a Poisson's Ratio of 0.25 for both groups based on previously published values<sup>268</sup> although the actual value is likely to change when changing the concentration of fibrinogen in

the sample groups. Lastly, we assumed a uniform strain across the length of the sample though this may not be the case. Future studies should determine any convoluting effects of nonconstant fibrinogen to thrombin ratios by testing additional samples where this ratio is kept constant. Future studies should also focus on measuring transverse stretch in order to calculate an experimental Poisson's Ratio and determining the axial strain distribution through video analysis and ink spattering of the samples. These analyses will also help determine if the VAA affects the strain conditions near the seal. These considerations were beyond the scope of the current study.

#### 2.5 CONCLUSION

Our VAA design was validated through the successful mechanical tests of two groups of fibrin gels made from two different concentrations of fibrinogen that were previously unable to withstand uniaxial tensile testing using conventional methods. This anchorage method will allow new studies into the uniaxial mechanics and/or mechanobiology of soft materials. Specifically, this tool will now allow mechanical testing of our SMC seeded fibrin gels that will ultimately allow us to determine the mechanical quality of any elastin produced in the experiments described in Chapter 3.

# 3.0 SPECIFIC AIM 1, PART 1: ELASTIN PRODUCTION OF SMOOTH MUSCLE CELLS WHEN CO CULUTRED WITH MSCS

The first part of Aim 1 is showing that elastin fibers can be produced by adult, human SMCs when co-cultured with ADMSCs. We employed 3D cell culture by utilizing fibrin gels. Our gels were then subjected to qualitative imaging, a quantitative biochemical assay, and mechanical tensile testing all chosen due to the experiments' ability to detect mature - fully assembled and cross-linked by lysyl oxidase (LOX) - elastic fibers.

# **3.1 INTRODUCTION**

Elastic recoil is a necessary quality of many tissues in the body, including skin, lung, ligaments, and large diameter arteries<sup>19</sup>. This recoil is provided primarily by elastic fibers made up of elastin and a supporting microfibrillar network. In the context of the abdominal aorta, most elastic fibers are created primarily during development<sup>281</sup> and then slowly degrade. The half-life for this process has been disputed as either  $\sim 40^{282}$  or  $\sim 80^{54}$  years.

The critical hallmark of AAA is a noted loss of elastic fibers in the medial layer of the vessel. This loss of elastic fibers is thought to lead to a host of downstream effects that exacerbate the disease, such as higher circumferential stretch and stress in the vessel wall, marked increase in the circulating inflammatory environment, and increased elastolytic activity

by resident SMCs among others. Notably, researchers hypothesize that in order to ever fully reverse the disease, production of new, mechanically functional elastic fibers will be necessary<sup>2</sup>.

The physiological process of cellular elastin synthesis and matrix assembly is a highly complex process involving coordinated intracellular and extracellular activities directed by SMCs (described in detail elsewhere<sup>283,284</sup>). The elastin production process begins when elastin protein is secreted by SMCs as a tropoelastin precursor molecule. This molecule is then moved into the extracellular space and binds to a chaperone elastin binding protein (EBP) which protects the tropoelastin from degradation<sup>283</sup>. Arrays of microfibrillar glycoproteins made up of fibrillins (particularly 1, 3 and 5), microfibril associated glycoproteins (MAGPs 1 and 2), and fibulins (1,2, and 5)<sup>45,46,285,286</sup> in the extracellular space reduce binding affinity of the EBP for tropoelastin and the cell membrane facilitating the release of bound tropoelastin and the dissociation of the EBP from the cell membrane. The tropoelastin collects on the microfibrillar scaffold as amorphous elastin and then undergoes crosslinking by oxidation of lysine amino acid side chains on the elastin molecules via  $LOX^{287}$ . This results in mature fibers (~300 nm-1 µm in diameter), containing a core of crosslinked, amorphous elastin, surrounded by microfibrils<sup>288,289</sup>. Mature fibers are then linked by desmosine and isodesmosine moieties providing the ability to stretch and recoil as a single unit thus providing a portion of a vessel's mechanical properties. The contributions of elastic fibers (compared to collagen fibers) to vessel mechanics have been quantified from the different regions of the stress-strain curve<sup>290</sup>.

Given that elastogenesis is a complex, multistep process, it isn't surprising that it has been the subject of research in the context of aneurysms and regenerative medicine. Broadly speaking, elastogenesis efforts can be classified into two groups: elastin synthesis inhibitors (e.g., ascorbic acid<sup>291</sup>, basic fibroblast growth factor<sup>292</sup>, cyclic AMP<sup>293</sup>, and monensin<sup>294</sup>) and elastin synthesis stimulators (e.g., cyclic  $\text{GMP}^{293}$ , fetal calf serum<sup>295</sup>, insulin-like growth factor 1 [IGF-1]<sup>296,297</sup>, and transforming growth factor  $\beta$ 1 [TGF- $\beta$ 1]<sup>298</sup>).

In this chapter, we too seek to establish a method of inducing adult, human, SMCs to produce mature, mechanically functional elastic fibers. We chose to seed SMCs in fibrin gels in various states of mechanical loading before stimulating the SMCs with ADMSC co-culture, TGF- $\beta$ 1 stimulation, or conditioned media (CM) collected from ADMSCs in an attempt to induce SMC elastogenesis.

## 3.2 METHODS

#### 3.2.1 Cell Culture

Commercially sourced ADMSCs (Thermo Fisher Scientific, #R7788110) were cultured in 75-cm<sup>2</sup> or 175-cm<sup>2</sup> tissue culture flasks (Corning) and grown under defined culture media [1:1 Dulbecco's modified Eagle's medium (DMEM; Gibco #11965) to DMEM/F12 (Gibco #113300) with 10% fetal bovine serum (Atlanta Biologics #S11550), antibiotics (1% Pen/Strep, 0.5% Fungizone, 0.1% Gentamycin), and 10  $\mu$ L of 10 mM dexamethasone] mixed with 25% Preadipocyte Growth Medium (#C-27410, #C-39425; PromoCell). Culture media was changed every 2-3 days and when ADMSCs were expanded to near confluence, they were passage expanded utilizing 0.25% trypsin-EDTA (#25200-056; Gibco) or utilized for subsequent experimentation.

To obtain conditioned media, culture media was replenished in near confluent flasks of ADMSCs (~80%) and cultured for an additional two days upon which it was collected. The

conditioned media was then centrifuged (#Sorvall Legend RT, 1200 rpm, 5 min) to remove any cellular material or debris. It was stored at -80°C until use.

Additionally, human aortic SMCs were purchased from ATCC (#PCS-100-012) and grown in a similar manner to ADMSCs but in their own culture media (Cell Applications, #311-500, #311-GS).

#### 3.2.2 Fibrin Gel Fabrication

SMC-seeded fibrin constructs were fabricated by mixing bovine fibrinogen type I (3 mg/mL, Sigma-Aldrich, St. Louis MO) with bovine thrombin (1 NIHU/mL, Sigma-Aldrich, St. Louis, MO) and SMC cell suspension (3x10<sup>5</sup> cells/gel). The gels were plated in the troughs of Flexcell(Flexcell Int.<sup>TM</sup> Tissue-Train<sup>TM</sup> plates, Hillsborough, NC) for the early time point studies and within 24-well plates (Corning) that had been imprinted with custom circular molds for the late time point studies. Gels were allowed to polymerize for at least 2 hours in incubator conditions (37°C, 5% CO2) before adding SMC culture media. The gels were allowed to compact for 2 days before being subjected to treatments.

ADMSC-seeded fibrin constructs were fabricated by mixing bovine fibrinogen type I (3 mg/mL, Sigma-Aldrich, St. Louis MO) with bovine thrombin (1 NIHU/mL, Sigma-Aldrich, St. Louis, MO) and ADMSC cell suspension  $(4.5 \times 10^6 \text{ cells/gel})$ . The gels were plated on top of SMC gels within the Flexcell<sup>TM</sup> Tissue-Train<sup>TM</sup> plates (Flexcell Int., Hillsborough, NC) for the early time point studies and on top of SMC gels within the 24-well plates (Corning) for the late time point studies. Gels were allowed to polymerize for at least 2 hours in incubator conditions (37°C, 5% CO2) before adding SMC culture media. The gels were then cultured in incubator conditions according to the treatment condition.

## 3.2.3 Treatment Description

The experimental groups are summarized in **Table 4**. The groups are broken down by treatment delivered to the SMC-seeded fibrin gel, the length of the treatment, and the loading condition imposed. In order to understand the final experimental groups, a note should be made about the ideas behind the formation of these groups.

Originally, we intended to only use the Flexcell Tissue-Train system in our studies due to its ability to mechanically stimulate our fibrin gels. This mechanical stimulation would mimic the conditions we imagined an MSC-seeded fibrin gel therapeutic and resident SMCs would experience when the therapeutic was delivered to the periadventitial surface of a AAA. However, after seeing some of the results that are shown in Section 3.3.1, we realized that our experimental design would need to be altered. We moved away from using the Flexcell Tissue-Train system due to the cost involved while troubleshooting the co-culture system. Ultimately, we found that extended culture of the co-culture system in the 24-well plates was sufficient for elastin production. It was this pivot in approach that led to using two different culture times and two different culture substrates and loading conditions.

The experimental groups and controls were as follows: A control group received normal SMC culture media in the early time point group (10 days) and normal SMC culture media along with 200  $\mu$ L of fibrin gel (fabricated in the same concentrations as the SMC gels) in the late time point group (28 days). Another control group received normal SMC culture media supplemented with 3ng/ml TGF- $\beta$ 1 in the early time point group (10 days) and normal SMC culture media culture media supplemented with 3ng/ml TGF- $\beta$ 1 in the early time point group (10 days) and normal SMC culture media the same concentrations as the SMC gels) in the late time point group (28 days). Another control group (20 days) and normal SMC culture media culture media supplemented with 3ng/ml TGF- $\beta$ 1 along with 200  $\mu$ L of fibrin gel (fabricated in the same concentrations as the SMC gels) in the late time point group (28 days). An

experimental ADMSC co-culture group received a 200  $\mu$ L fibrin gel containing 4.5x10<sup>6</sup> ADMSCs on top of the SMC-seeded fibrin gels. An experimental CM group received a mix of culture media containing 50% normal SMC culture media and 50% CM from 9.0x10<sup>6</sup> ADMSCs in the early time point group (10 days) and the same mixture of media along with 200  $\mu$ L of fibrin gel (fabricated in the same concentrations as the SMC gels) in the late time point group (28 days).

Treatments lasted for 10 and 28 days for the early and late time points, respectively. Lastly, the early time point gels were all cultured in of Flexcell<sup>TM</sup> Tissue-Train<sup>TM</sup> plates (Flexcell Int., Hillsborough, NC) and subjected to 10% stretch at 1 Hz in the stretched loading condition and static, uniaxial constrainment in the constrained loading condition. The constrained loading condition for the late time point consisted on static, radially constrained gels.

Table 4. Experimental group descriptions. Experimental groups are described by treatment, culture time, and loading condition. The number of samples for each group is shown for the ninhydrin assay.

Experimental Group #	Treatment Description	Culture Time	Loading Condition	
Group 1	No Treatment (n=3)	10 days	Constrained	
Group 2	No Treatment (n=3)	10 days	Stretched	
Group 3	TGFβ-1 (n=3) 10 days		Stretched	
Group 4	ADMSC Co-culture (n=8)	10 days	Stretched	
Group 5	CM (n=8)	10 days	Stretched	
Group 6	Fibrin Only (n=2)	10 days	Stretched	
Group 7	Rat Aorta (n=1)	N/A	N/A	
Group 8	ADMSC Co-culture (n=5)	28 days	Constrained	
Group 9	TGFβ-1 (n=5)	28 days	Constrained	
Group 10	CM (n=5)	28 days	Constrained	
Group 11	No Treatment (n=5)	28 days	Constrained	

## 3.2.4 Qualitative Elastin Fiber Imaging

After culture, the fibrin tissue constructs were prepared for imaging using three modalities. Tissue constructs were lifted from culture plates and put onto glass slides for multiphoton imaging. Additional samples from the late time point group were fixed in 4% paraformaldehyde for 30 minutes before being embedded in paraffin wax and sectioned (5µm) for Verhoeff's Van Gieson and immunofluorescence staining.

An Olympus multi-photon microscope (Model FV10, ASW software) was used to observe elastin. Elastin was automatically detected and visualized based on intrinsic fluorescence (excitation wavelength 780 nm, emission wavelength 525±25 nm).

Paraffin embedded sections were deparaffinized by 3 minute washes in xylene, xylene/ethanol mix, and ever decreasing dilutions of ethanol before being rinsed in tap water. Sections were then stained with Verhoeff's Van Gieson (VVG) stain. Additional sections were labeled for elastin using a standard immunofluorescence (IFC) protocol staining for BA4 (1:200, Sigma #E4013) and a Cy3 conjugated goat anti-mouse (GAM) secondary (1:1000, Sigma #AP124C) with counterstains for DAPI. All sectioned samples were imaged using NIS Elements software (version 4.0).

# 3.2.5 Quantitative Elastin Protein Detection

After multi-photon microscopy, tissue constructs were analyzed for elastin content using previously published protocols<sup>299,300</sup>. Briefly, basic hydrolysis (0.1 M NaOH, 1 hour at 98°C) and centrifugation will separate insoluble elastin from other tissue construct components. Each fraction will then be fully hydrolyzed in acidic conditions (6 M HCl, 24 hours at 110°C) and then

dried. Total protein and elastin content are determined by a ninhydrin assay compared to standards of known amounts of bovine serum albumen (BSA) and elastin.

#### **3.2.6** Tensile Testing

The VAA described in Chapter 2 and developed specifically for this purpose was clamped into an Instron uniaxial tensile testing system (Instron, #5543a, Norwood, MA,) and tissue constructs from the early time point gels were gently placed next to the open ends of the VAA while the vacuum was turned on. Samples were stretched to initial, unloaded lengths by moving the crosshead until force readings were present. A constant crosshead speed of 0.1 mm/sec was used to pull on the samples, and the applied load and resulting displacement were recorded continuously using the Instron-packaged software (Bluehill, Version 2, Instron, Norwood, MA). Stress, stretch, and other mechanical properties were calculated as described in Sections 2.2.3 and 2.2.4.

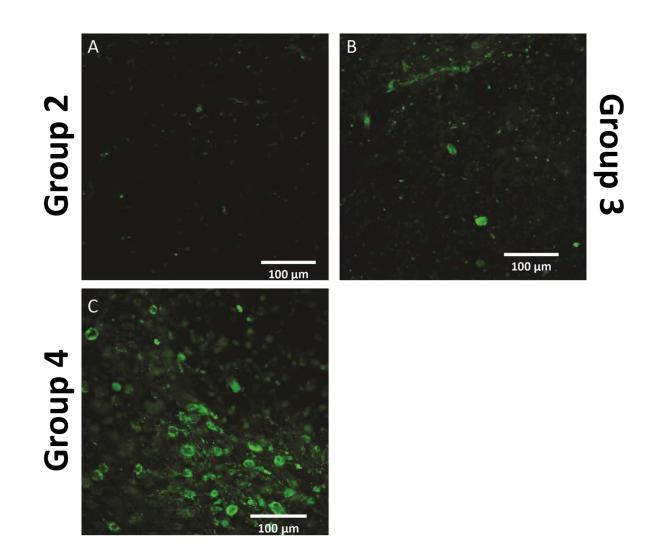
#### 3.2.7 Statistics

All statistical analysis was done utilizing Minitab software (version 16) to perform either t-tests or ANOVA. Statistical significance was accepted at p<0.05. All data were verified for parametric tests by confirming normality and homogeneity of variance (not shown). Appropriate post-hoc tests when using ANOVA analyses were performed (Fisher's LSD, Tukey).

# 3.3 **RESULTS**

# 3.3.1 Early Time Point Studies from Flexcell Culture Plates

To assess whether ADMSCs could induce adult, human SMCs to produce elastic fibers detectable using common imaging modalities, SMC-seeded fibrin gels were imaged via multiphoton imaging for early time point studies (**Figure 5**). While emission signal was detected at a higher level in Group 4 (**Figure 5**, **C**) when compared to Group 2 (**Figure 5**, **A**) and Group 3 (**Figure 5**, **B**) in the early time point group, the signal was localized to the cell bodies and lacked any fibers or network appearance.



**Figure 5.** There is little elastin autofluorescence in SMC seeded fibrin gels after 10 days in culture. Elastin autofluorescence images reveal low levels of emission signal in Group 2 (A), slightly higher levels of emission signal in Group 3 (B), and bright signal in Group 4 (C).

To assess whether ADMSCs could induce adult, human SMCs to produce mechanically functional elastic fibers, SMC-seeded fibrin gels from the early time point group were uniaxially tensile tested using the VAA described in Chapter 2. **Table 5** summarizes the results for yield stretch and tangent modulus for all tested groups. One-way ANOVA reveal statistically significant differences in the groups for both yield stretch (p=0.017) and tangent modulus (p=0.003). Subsequent Tukey tests, an ANOVA post-hoc analysis which finds means that are significantly different from each other, revealed that Group 1 had a higher yield stretch than Groups 3, 4, & 5. Tukey test also revealed that Group 1 had a higher tangent modulus than all other tested groups.

Table 5. Constrained gels showed a higher yield stretch than all groups expect the stretched group and a higher tangent modulus than all groups. Measurements for yield stretch and tangent modulus are given as mean  $\pm$  standard deviation. Tukey groupings identifiers "A" and "B" show which groups have significantly different means. The ADMSC group yielded useful data in 6 of 8 (75%) tests. All other groups yielded useful data in 2 of 3 (67%) of tests.

Experimental Group #	Yield Stretch	Tukey Groupings	Tangent Mod. (kPa)	Tukey Groupings
Group 1 (n=2)	2.2±0.5	А	135.5±51.2	А
Group 2 (n=2)	1.3±0.1	A B	24.1±5.8	В
Group 3 (n=2)	1.4±0.1	В	16.2±13.0	В
Group 4 (n=6)	1.4±0.2	В	25.1±19.7	В
Group 5 (n=2)	1.2±0.3	В	18.3±10.7	В
One way ANOVA	p=0.017		p=0.003	

To assess whether ADMSCs could induce adult, human SMCs to produce detectable amounts of insoluble elastic fibers, SMC-seeded fibrin gels were separated into soluble and insoluble components after NaOH boil. The resultant supernatant and pellet were further processed before being measured in a ninhydrin assay. The total amount of insoluble elastin measured in the early time points (**Figure 6**) was statistically different for Group 6 (ANOVA, p=0.023). The assay did show detectable amounts of elastin for all other groups. For a better comparison between the groups in the early time point, percentage of elastin was calculated with respect to total protein content (**Figure 7**). The only statistical differences noted were between Group 7 and Groups 1, 2, 4, 5, & 6 (ANOVA, p=0.042).

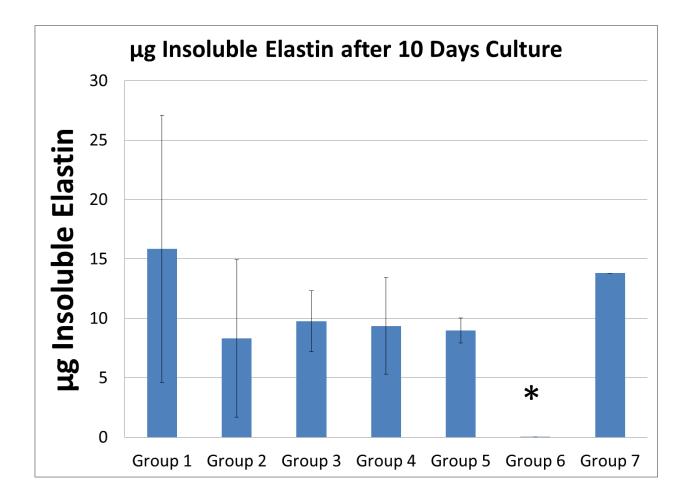


Figure 6. Ninhydrin assay reveals that all groups produced elastin after just 10 days in culture. Values shown as mean  $\pm$  standard deviation. \* indicates significant difference from all other groups.

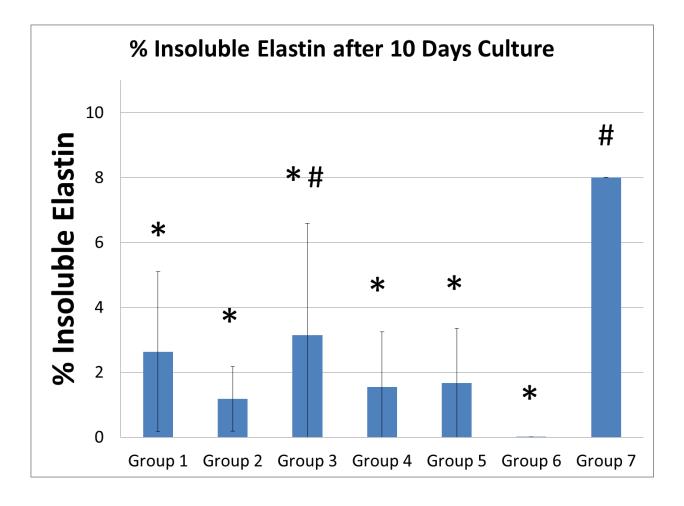
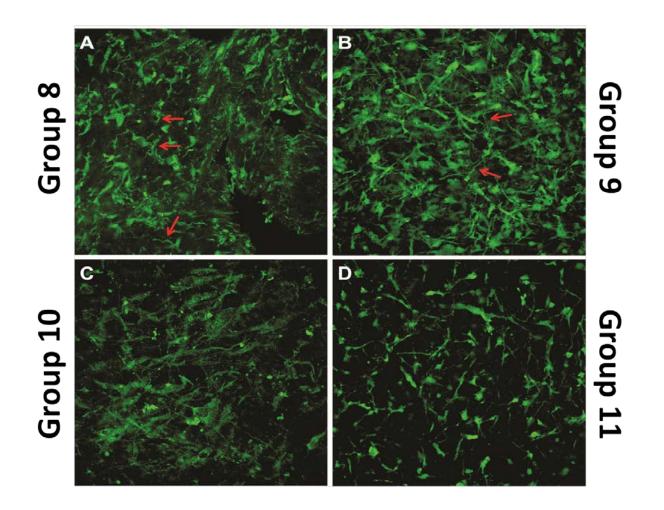


Figure 7. Ninhydrin assay reveals that all groups produced elastin after just 10 days in culture. Values shown as mean  $\pm$  standard deviation. Statistically different groups are indicated by \* and #.

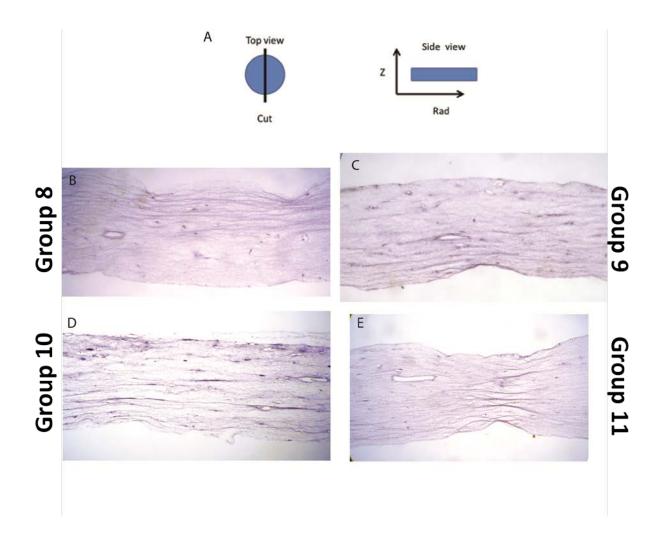
### **3.3.2** Late Time Point Studies in Tissue Culture Plates

To assess whether ADMSCs could induce adult, human SMCs to produce elastic fibers detectable using common imaging modalities, SMC-seeded fibrin gels were imaged via multiphoton imaging for late time points (**Figure 8**). There seems to be fibers located in Groups 8 & 9 (**Figure 8, A and B,** respectively). The network is far more developed when compared to Group 10 (**Figure 8, C**). Lastly, Group 11 (**Figure 8, D**) merely shows glowing cell bodies.

Additional samples from the late time point groups were stained with VVG (Figure 9) and via IFC (Figure 10) to reveal elastic fibers and networks. All groups showed faint VVG staining especially noticeable in parts of the gels that seems to have undergone fiber compaction. The IFC stain reveals a much more intense signal that is seen unbroken throughout the gels in Groups 8 & 9 (Figure 10, B and C, respectively). This unbroken signal reflects the results shown by the multiphoton imaging and is far more developed when compared to Groups 10 & 11 (Figure 10, D and E, respectively) though both groups show small amount of network development.



**Figure 8.** Elastin autofluorescence images reveal a developed elastin network in long term culture. Elastic fibers (red arrows) are seen in Group 8(A) and Group 9(B). A less developed network is seen in Group 10 (C), and no network is seen (merely glowing cell outlines) in Group 11 (D).



**Figure 9. VVG stained images reveal a faint staining in all groups around areas of dense fiber accumulation within the gels.** The orientation of the sections is shown at top (A). Group 8 is shown in (B.) Group 9 is shown in (C). Group 10 is shown in (D). Group 11 is shown in (E).

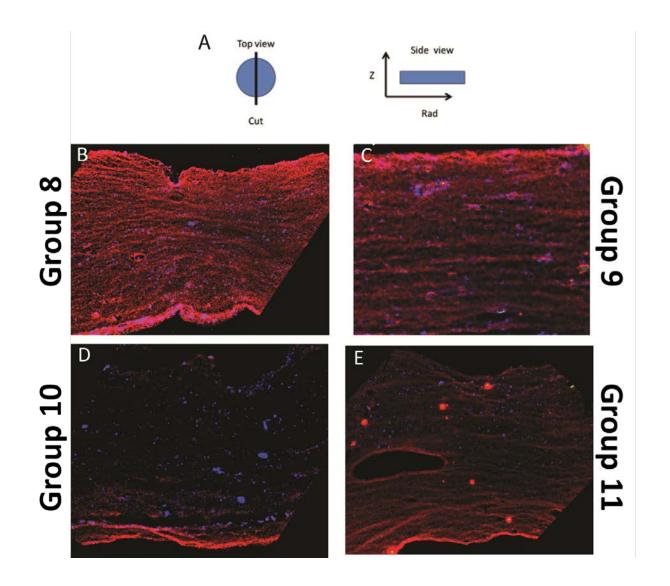


Figure 10. IFC stained images reveal a vivid network at various levels of signal intensity between the experimental groups. The orientation of the sections is shown at top (A). Group 8 is shown in (B.) Group 9 is shown in (C). Group 10 is shown in (D). Group 11 is shown in (E).

The same ninhydrin assay was carried out for the late time point groups. While no statistical difference was shown between any of the groups (ANOVA, p=0.472) when looking at the percent elastin of total protein (**Figure 11**), the assay did reveal that the samples were producing insoluble elastic fibers. The percentage of elastin was calculated with respect to total protein content (**Figure 12**). No statistical difference was shown between any of the groups (ANOVA, p=0.554).

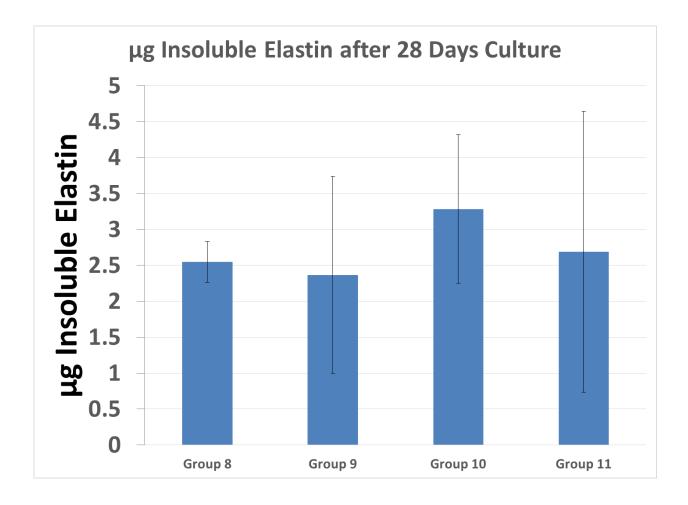


Figure 11. Ninhydrin assay reveals that all groups produced elastin after 28 days in culture. Values shown as mean  $\pm$  standard deviation.

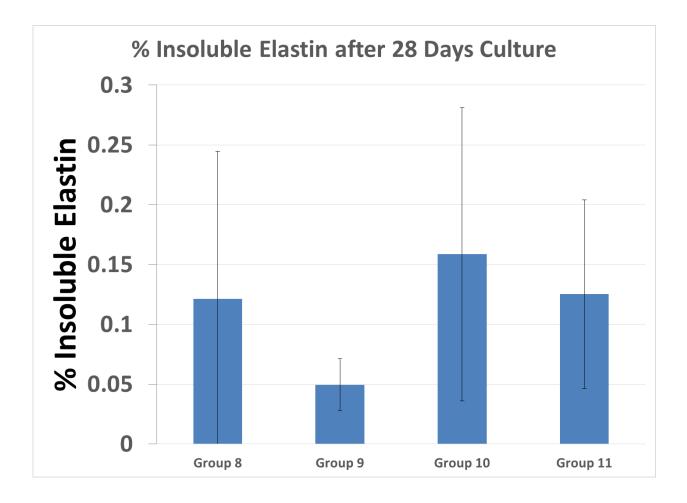


Figure 12. Ninhydrin as say reveals that all groups produced elastin after 28 days in culture. Values shown as mean  $\pm$  standard deviation.

### 3.4 DISCUSSION

The gradual breakdown of elastic fibers is seen in a wide variety of tissues such as skin, lung, and arteries. As elastic fibers break down, the resultant elastin degradation products have been shown to upregulate the inflammatory response<sup>78,301-303</sup> and inhibit the switch from M1 macrophages to M2 macrophages<sup>304</sup>. The damage done to adult elastic fiber rich tissue is often repaired with unorganized material that does not function properly<sup>281</sup>. Diseases such as atherosclerosis cause SMCs to deposit amorphous amyloid elastic fibers<sup>305</sup>; however, these easily degraded pseudo-fibers displaying limited crosslinking, are disorganized, and contribute to the pathology. AAAs present an even more complex prospect of regenerating elastic fibers and matrix within an active proteolytic environment featuring local production and activity of elastolytic enzymes by both recruited inflammatory cells and SMCs<sup>306</sup>.

Given the complexity of elastic matrix assembly described at the beginning of this chapter, one appreciates the challenges faced when trying to regenerate natural elastic matrix structures by adult SMCs<sup>307</sup> or even less elastogenic, diseased SMCs<sup>305,308,309</sup>. Particularly in the case of AAAs, the challenges described above ultimately reduce the net accumulation of new elastin deposits while disrupting new and pre-existing elastic matrix structures<sup>46</sup>. Knowledge and methods of promoting assembly of precursors into mature, structural, and functional elastic fibers<sup>310</sup> remains fleeting.

The ability of adult SMCs to produce mechanically functional elastic fibers is thought to be necessary for an interventional therapy to work for treating AAAs<sup>2</sup>. Though the resident SMCs within a AAA are synthetic<sup>311</sup> and producing elastin mRNA<sup>52</sup>, adults do not normally produce mechanically functional elastic fibers. In this aim we have induced elastic fiber production in adult SMCs as shown by biochemical (**Figure 6, Figure 7, Figure 11, & Figure** 

12) and imaging (Figure 8 & Figure 10) means which is in line with other published studies stimulating SMCs with TGF- $\beta 1^{312-314}$ . This study adds to the field showing that elastic fiber production is also possible by co-culturing SMCs with ADMSCs in a 3D fibrin gel (Figure 8A & Figure 10B), and the effect is present but somewhat subdued when treating the same SMCs with CM. This reduced effect is apparent in the multiphoton and IFC imaging of that group showing a less developed elastic network (Figure 8C & Figure 10D, respectively). This may be due to the inability of CM to increase LOX expression in SMCs as shown by Swamin et al.<sup>315</sup>.

Our working hypothesis is that the ADMSCs are acting in a paracrine manner, producing growth factors that are ultimately responsible for the SMC elastogenesis. The most studied elastogenic factors to date for SMCs are TGF- $\beta$ 1 and IGF-1, which have been shown to increase elastin synthesis both transcriptional and post-translational means. TGF- $\beta$ 1 improves matrix assembly via LOX mRNA expression upregulation and enzyme activity<sup>316</sup> while preventing proteolysis of existing matrix by tipping the balance of MMPs (2 and 9) and TIMPs (1,2,3) in favor of TIMPs<sup>317,318</sup>. Elastogenic effects are enhanced synergistically when TGF- $\beta$ 1 and IGF-1 were provided to healthy SMCs together with the hyaluronan oligomers<sup>319,320</sup>. Exogenous LOX supplemented to rat aortic SMC cultures improves tropoelastin crosslinking significantly, enhancing elastic matrix deposition above what is capable by endogenous LOX enzymes alone<sup>321</sup>. The extracellular transport of endogenous LOX and functional activity of endogenous and exogenous LOX can be further enhanced by copper ions which enable electron transfer from oxygen to facilitate oxidative deamination of lysyl groups in elastin and collagen<sup>287</sup>.

Additionally, elastin production has been shown in human vascular smooth muscle cells embedded in 3D scaffolds when stimulated with TGF- $\beta 1^{313}$ , and TGF- $\beta 1$  has a dose dependent

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effect on elastin production<sup>312,314</sup>. Clearly, the growth factors above have a profound elastogenic effect on adult, human SMCs.

Rather than using growth factors as therapeutic agents directly, MSCs could be used for paracrine effects as they secrete TGF- $\beta$ 1, IFG-1 and other growth factors<sup>194</sup>. This treatment modality could remove concerns about off target effects from treating with supraphysiological concentrations of growth factors, provide a renewable source of growth factors, and allow for synergic effects that could happen when different growth factors are combined<sup>312</sup>.

In fact, paracrine factors secreted by MSCs have been shown to evoke in vivo wound healing, tissue repair, and regeneration in different tissue types<sup>322,323</sup>. CM collected from in vitro MSC cultures in real time, or collected and then concentrated, has also been shown to improve cellular health in diseased cells in vitro<sup>324,325</sup>, restore tissue/organ state and function in vivo<sup>322,323</sup>, and stimulate SMC migration<sup>326,327</sup>. SMC migration is a feature of a synthetic phenotype<sup>21</sup>. Removing SMCs from their native environment likely switches the phenotype from contractile to synthetic, and our paracrine treatment is likely encouraging the cells to remain synthetic while in the 3D fibrin gel. In the context of aneurysm disease, Swamin et al.<sup>315</sup> investigated whether and how exposing diseased SMCs to trophic factors generated by co-cultured BMMSC-derived smooth muscle like cells impacts their matrix synthesis potential. These cultures displayed upregulation of elastin, fibrillin-1, and fibulin-5 expression thus providing the cells with the essential building blocks for elastic fiber and network synthesis.

In light of the published literature regarding elastogenesis, we explored using MSCs - specifically ADMSCs - as therapeutic agents in the treatment of AAA. We believe that these ADMSCs will act as growth factor factories, secreting TGF- $\beta$ 1 as well as other growth factors<sup>194</sup>. Using ADMSCs instead of the factors they produce allows for communication

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between the therapeutic cells and the target cells which could in turn produce a more desirable result. In the context of this chapter, the purpose of the ADMSCs is to stimulate the SMCs to produce mature elastic fibers; however, in the overall context of treating AAA, MSCs also attenuate the circulating inflammatory environment<sup>195,328</sup>.

While MSCs have been isolated from a variety of tissues and basically everywhere blood vessels are found<sup>329,330</sup>, adipose tissue makes for an attractive source of MSCs due to its growing abundance in the western population. ADMSCs express classic mesodermal markers used to classify MSCs (CD44, CD73, CD90, CD105<sup>331</sup>), but ADMSCs also express CD34<sup>332,333</sup>, a marked distinct from bone marrow MSCs<sup>334</sup>. Upon definition as a multipotent stem cell in 2001<sup>335</sup> and recent characterization of surface marker profile, genome, and composition<sup>336-340</sup>, ADMSC research has extended to fields ranging from regenerative medicine<sup>341-351</sup> to cancer<sup>352-354</sup>. Here we employ the ADMSC as a therapeutic cell to treat AAA with the ultimate goal of stimulating new elastic fiber production.

Since Group 10 (Figure 8C & Figure 10D) did not perform as well from a qualitative standpoint as Group 8 (Figure 8A & Figure 10B), the ADMSC co-culture may be producing different growth factors due to the culture environment (gel vs. stiff substrate) or in response to signals received from the SMCs. In this regard, the co-culture may be necessary to produce meaningful quantities of mature, fully crosslinked elastic fibers in the context of AAA. While we were unable to quantify differences in the amount of elastin produced from the ninhydrin assay (Figure 12), we were able to show that measurable amounts of mature, crosslinked elastin were present in our biochemical assay (Figure 11). It should be noted that while the ninhydrin assay is a standard method of detecting insoluble elastin, the method itself is a highly involved process which could explain the high variance seen in the data.

Additionally, during the elastic fiber assembly process, a number of naturally occurring fluorophores such as pyridolamine crosslinks<sup>355</sup> as well as desmosine and isodesmosine<sup>356</sup> elastin crosslinks are trapped within the fiber. Exciting these fluorophores using multiphoton microscopy allows researchers to visualize elastin with intrinsic confocal resolution with great depth penetration due to the use of near-infrared excitation wavelengths. This imaging modality can be used on fresh tissue without sectioning, staining or other preparation. Collagen can also be detected alongside elastin due to its second harmonic (SHG) signal<sup>357</sup>. This technique has been used to investigate the collagen and elastin fiber networks in arteries<sup>217,250,252-254,358,359</sup>, heart valves<sup>360,361</sup>, and changes in the collagen matrix of porcine cartilage<sup>362</sup>. The multiphoton images from the long term culture ADMSC and TGF- $\beta$ 1 experimental groups clearly show signal in the form of fibers.

Interestingly, the mechanical analysis shows a much higher yield stretch and tangent modulus for Group 1 when compared to the Groups 2-5 (**Table 5**). This means that the resultant gel was stiffer and more distensible which could be explained by an increase in the amount of collagen produced relative to the other groups. Collagen production by SMCs when cultured in fibrin gels has been shown before<sup>267,269,363</sup> and these conditions are somewhat similar to the constrained group. This mechanical analysis has limitations inherent to the material fabrication and assumptions made regarding fibrin gels. We assumed a Poisson's Ratio of 0.25 for all groups although the actual value is likely to change between each group and evolve as ECM is produced. Lastly, we assumed a uniform strain across the length of the sample though this may not be the case.

One of the requirements for a lasting, interventional AAA therapy is the replacement of lost elastic fibers in the aortic wall. While others have shown that MSC treatment can modulate

the circulating inflammatory AAA environment<sup>195,328</sup>, another important aspect of interventional AAA therapies, this study is the first to show that ADMSCs are capable of inducing SMCs to produce mature, elastic fibers in an in-vitro analog to our proposed in-vivo treatment.

## 3.5 CONCLUSION

In conclusion, when co-cultured with adult SMCs in a 3D fibrin gel, ADMSCs stimulate elastic fiber production. This novel finding lends credence to using ADMSCs as a proelastogenic therapy for treating AAAs.

### **3.6 FUTURE WORK**

The work presented in this chapter represents an exciting new finding, and will be constructed into a manuscript in combination with the results of Chapter 4. While this Aim makes clear progress in showing that ADMSCs can stimulate elastic fiber production in adult SMCs, future work needs to focus on understanding the mechanism of action as well as improving quantification efforts. Future studies should also focus on extended culture times as we have shown that elastic fiber production seems to take longer than 10 days and appears, qualitatively, by 28 days. Longer time points need to be investigated for this co-culture system in order to understand the time course of elastic fiber production. Lastly, the elastogenic ability of diseased SMCs needs to be compared to the healthy SMCs used in this study. Treating SMCs with elastase in culture could serve as an intermediate step to using SMCs harvested from aneurysmal tissue.

### 4.0 SPECIFIC AIM 1, PART 2:

## **IN-SILICO EFFECTS OF ELASTIN PRODUCTION IN THE CONTEXT OF AAA**

The second part of Aim 1 is understanding the potential effects, mechanics, and mechanobiology of elastin production in an expanding AAA. After seeing that elastic fibers are produced by SMCs when co-cultured with ADMSCs in the first part of Aim 1, we introduced elastin production in a constrained mixture model of AAA G&R<sup>25</sup>. By understanding the effects and potential benefits of a pro-elastogenic therapy within the context of a constrained mixture model of AAA G&R, we will be better prepared to carry out future experiments to refine and optimize a pro-elastogenic therapy.

# 4.1 INTRODUCTION

As discussed in the introduction to this dissertation (Section 1.2.5), models of soft tissue G&R have been around for some time. Specifically, the framework posed by Humphrey and Rajagopal<sup>164</sup> has been refined and proven useful for explaining the processes and trends associated with arterial G&R since its introduction<sup>22-25,96,165,169-171,174-176,178,179,181</sup>. The resulting numerical experiments have predicted trends and behaviors which were then compared to experimental observations. Though not the focus of this dissertation, it is important to

understand the three fundamental hypotheses on which these frameworks rely: constitutive turnover, depositional prestretches, and vasoactivity<sup>22</sup>.

The constitutive turnover hypothesis states that synthesizing cells, SMCs in the context of AAAs and relevant to this work, respond to their changing chemo-mechanical environment by turning over the extracellular matrix and via cell proliferation and apoptosis. This hypothesis is based upon experimental observations<sup>100-103</sup>, and Fung proposed a conceptual mathematical relation stating that the volumetric growth rate is a function of stress<sup>104</sup>. Fung arrived at this concept while trying to understand the function of residual stress residing in blood vessels. He saw a correlation between the arterial stresses and the change in residual strain. Fung's explanation for this relation was a biological law that related the rate of growth or resorption of tissue with the stress in the tissue. This implied that residual stresses are related to the remodeling of the blood vessel wall (i.e. blood vessels remodel when stresses change). Fung's insight provided a stress-growth relationship which has become a biomechanical foundation for tissue engineering and regenerative medicine. For its use in this chapter, this constitutive turnover hypothesis is governed by **Equation 4-1**:

$$\boldsymbol{m}^{\alpha}(\boldsymbol{s}) = \boldsymbol{m}_{0}^{\alpha} \left( \frac{\sigma^{\alpha}(\boldsymbol{s})}{\sigma^{\alpha}(\boldsymbol{0})} - 1 \right)$$
(4-1)

In Equation 4-1,  $m^{\alpha}(s)$  is the net mass production for the  $\alpha$  constituent (collagen and smooth muscle) at simulation time, s. The net mass production rate is dependent on  $m^{\alpha}_{0}$ , a defined

homeostatic mass production rate, and a scaling factor dependent upon the ratio of the Cauchy stress at time s,  $\sigma^{\alpha}(s)$ , and the initial homeostatic Cauchy stress,  $\sigma^{\alpha}(s)$ , for each constituent.

In addition to the stress-volumetric growth rate relation, the constitutive turnover hypothesis also governs the direction in which fibrillar proteins such as collagen are deposited. The local, principal stresses or stretches define the directions of fiber alignment for newly deposited material which affects local anisotropy<sup>106,107</sup>. These concepts can be tested in arterial G&R models by comparing predicted responses to evolved arteries.

Experimental observations<sup>47,364,365</sup> also reveal that cells achieve such G&R by actively manipulating structural proteins during and following deposition. The mechanical forces exerted by synthetic cells during deposition or reorganization are contributing to the mechanical properties exhibited by the extracellular matrix, which can lead to residual stresses in unloaded tissues and thus optimal states of stress in vivo<sup>366</sup>.

The next fundamental hypothesis, depositional prestretches, captures the mechanobiology of the cells and states that newly produced constituents are deposited under a state of prestretch. The experimental evidence suggests that synthetic cells are capable of depositing material in varying quantities, in different directions, and in a state of mechanical prestretch<sup>281,364</sup>. This hypothesis covers related phenomena, such as spatial variations in prestretches resulting from differential and cross-linking over specific temporal deposition intervals during development<sup>367,368</sup>. This hypothesis also suggests that constituents possess a potentially unique prestretch<sup>104,369,370</sup>. The depositional prestretch concept is closely related to the constitutive turnover hypothesis with interesting complementary effects. In this chapter, the depositional prestretches for collagen, elastin, and smooth muscle are 1.08, 1.3, and 1.2, respectively.

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The last fundamental hypothesis, vasoactivity, is related to smooth muscle contractility. Murray<sup>371</sup> first proposed, through deductive physiology, that the body minimizes metabolic costs by maintaining an optimal volume of blood. This conclusion implied luminal shear stresses must be maintained by arteries actively adjusting their diameter<sup>372,373</sup>. Two separate mechanisms governing smooth muscle activity have been identified<sup>374</sup>: actin–myosin fiber overlap<sup>375</sup> and chemical dosage-response (e.g. acetylcholine and endothelin-1). For example, when subjected to increased shear stresses arteries dilate in response to upregulation of nitric oxide by endothelial cells. Vasoactivity is coupled to matrix remodelling in two phases: acute changes in vascular tone followed by long-term entrenchment<sup>372</sup>.

Acutely, activated SMCs allow arteries to rapidly respond to changes in blood flow. Contractile SMCs minimize the metabolic costs associated with maintaining caliber while maintaining the ability to adapt to altered hemodynamic conditions<sup>375</sup>. Though SMCs can accommodate these acute effects (e.g. brief physical exertion), SMCs can also shift its vasoactive response under sustained hemodynamic changes<sup>376</sup> ultimately resetting the artery's caliber. The vasoactive hypothesis has since been demonstrated by numerous observations<sup>377</sup>. For its use in this chapter, this vasoactivity hypothesis is governed by **Equation 4-2**:

$$f_{act}(s) = \frac{\rho^m(s)}{\rho(s)} T_{max} \left( 1 - exp\left\{ \left[ C_b - C_s \left( \frac{\tau_w(s)}{\tau_w(0)} - 1 \right) \right]^2 \right\} \right)$$

$$(4-2)$$

----

where  $f_{act}(s)$  is the active stress generated by the smooth muscle at any simulation time, s. This stress is dependent upon the ratio of smooth muscle density,  $\rho^{m}(s)$ , to total density of the

constituents,  $\rho(s)$ , the maximum force capable of being generated by smooth muscle,  $T_{max}$ , the ratio of vasoconstrictors and vasodilators ( $C_b$  is the homeostatic ratio and  $C_s$  is a scaled factor based on the shear stress), and ratio of the shear stress at time s,  $\tau_w(s)$  and the initial homeostatic shear stress,  $\tau_w(0)$ .

In summary, constrained mixture models of AAA G&R are designed to account for biological features and processes that are essential to both tissue maintenance and adaptation: constitutive turnover, depositional prestretches, and vasoactivity. Moreover, said models are well suited for basic hypothesis generation and testing, such as the one under investigation here – if elastin is produced in a AAA, then the growth of the AAA will slow. The biological appropriateness of these fundamental hypotheses enables the implementation of the model to capture and predict relevant features of the complex time-varying changes in dilatation, composition, and biomechanics of the AAA.

# 4.2 METHODS

#### 4.2.1 FEA Stress Analysis

Generally speaking, FEA is numerical technique that discretizes and approximates boundary value problems or partial differential equations. As employed in this chapter, FEA is used to solve the solid mechanics problem posed in our study – a vessel experiencing loading on the lumen due to blood pressure. In order to utilize FEA, we must know some prescribed quantities such as displacements or tractions that occur at the boundary, or enclosing geometry. These prescribed quantities are called boundary conditions. The geometry of the object in question must also be discretized, or meshed, and mechanical properties must be prescribed to discretized element. The mechanical properties describe how each element will deform in response to a force, and the coordinates of each element, or nodes, determine where the linear approximations to the differential equations governing the body's movement will be made.

The implementation of the FEA utilized a two-layered model of AAA with separate mechanical properties for the medial (inner 2/3 of vessel) and adventitial (outer 1/3 of vessel) layers. These mechanical properties are updated based on the growth laws contained within the G&R model which have a time step of two weeks. Boundary conditions were employed such that only radial nodal displacements were permitted, and a pressure of 93 mmHg was prescribed over the lumen of the vessel defined by set of 2D surface elements. When utilizing these assumptions, the problem is reduced to a single-dimensional analysis of the inflation of a thick-walled tube with fixed axial length.

The finite element model was employed with user-specified material properties within FEAP<sup>378</sup> and using a Q1-P0 'mixed' element, based on the three-field variational approach described by Hu and Washizu<sup>379-381</sup>. This element uses linear shape functions for deformations and is appropriate for modeling incompressible materials. The eigenvectors and corresponding eigenvalues were computed using LAPACK<sup>382</sup>, and temporal integrations were performed using trapezoidal rule quadrature. All time constants were updated with a temporal resolution of 2 weeks per time step. Results were calculated at the element Gauss points. The mesh utilized 400 eight-noded hexahedral elements (820 nodes in total).

# 4.2.2 Elastin Production in Tissue Growth and Remodeling Models

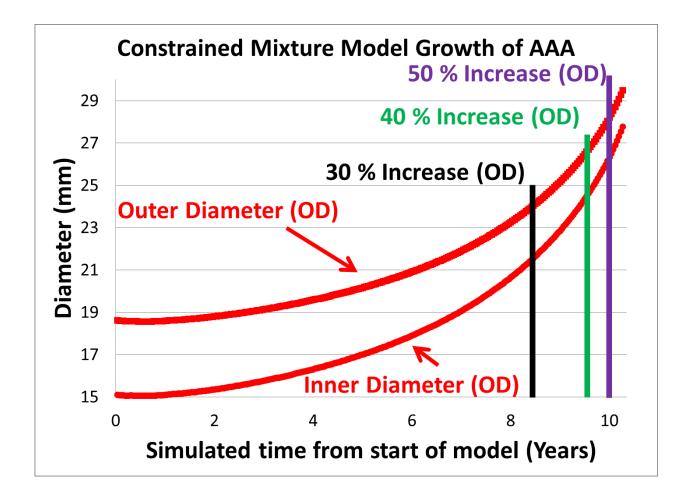
An existing constrained mixture model of  $G\&R^{25}$  was modified to allow for elastin production. The existing models do not allow for elastin production as adult cells do not normally produce elastin in its mechanically functional fiber form. The existing model<sup>25</sup> only allows for elastin degradation modeled as exponential decay with a half-life of 40 years which accounts for the only form of elastin degradation within the AAA model. To modify this model for studying an elastogenic therapy, the change in elastin mass parameter (which is negative in the baseline model) was modified to add new elastin to the remaining elastin (making it a net accumulation of elastin). We explored a range of elastin mass production rates (**Table 6**) within the growth and remodeling simulations at various points in the growth history of the AAA. The FEAP input model and custom material property codes can be found in Error! Bookmark not defined..

Table 6. A number of elastin production factors were explored by modifying constrained mixture models of AAA G&R. The values listed are in units of  $\mu$ g/mm<sup>3</sup>/2 weeks. The elastin production factors are multiples of the absolute value of the natural elastin degradation rate calculated at the end of the baseline model run<sup>25</sup>. These values are added to the existing elastin at each time step within the simulation after the elastogenic intervention.

Normal elastin degration rate	-0.675
Elastin Production Factor	
2x	1.350
3х	2.025
4x	2.700
8x	5.400
16x	10.800

### 4.2.3 Intervention Time Points

A constrained mixture model of G&R was run in order to establish a baseline model for AAA G&R. The implementation was similar to a previously published study by Valentin et al.<sup>25</sup>. The resulting output from this baseline model, the inner and outer diameters of the modeled AAA, is shown in **Figure 13**. The input that starts this model down the path of becoming a AAA is the loss of a predefined, critical amount of elastin (~65% of initial content) and a small amount of collagen and smooth muscle (~3.5% for each). As shown, the model captures characteristic features of AAA such as dilation (increase in both inner and outer diameters) and wall thinning (decrease in difference between outer and inner diameters, shown at least in some AAA cases<sup>383</sup>). Three "time points" are identified in the simulation: the time point when a 30% increase in outer diameter is reached, the time point when a 40% increase in outer diameter is reached, the latter representing the clinical definition of a AAA.



**Figure 13.** A constrained mixture model of AAA G&R is able to capture known qualities of AAA. The upper red curve represents the progression of the outer diameter of the model AAA while the lower red curve represents progression of the inner diameter of the model AAA. The vertical black, green, and blue lines reflect the time points that the outer diameter is increased by 30%, 40%, and 50%, respectively.

### 4.2.4 Monitoring Model Properties

In order to understand how elastin production within a constrained mixture model of AAA G&R affects the progression of the disease, the displacement and stress tensor were tracked within the output of the FEA, and the relative amount of collagen in the model was tracked within the custom material property codes. The enlargement rate of the AAA was also calculated for all 15 parameter combinations (5 elastin production factors and 3 intervention time points) at the end of the model run.

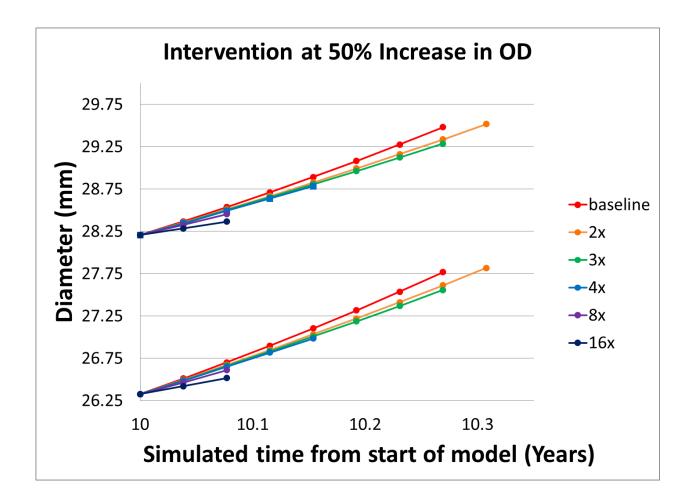
A full set of model outputs is provided in **Appendix B**. Here three models are employed: a model that recovers vessel homeostasis, a baseline model without elastogenic intervention, and a model with 2x elastin production at 30% increase in outer diameter. The aortic diameters and changes in collagen, elastin, smooth muscle, and smooth muscle active stress are shown.

### 4.3 RESULTS

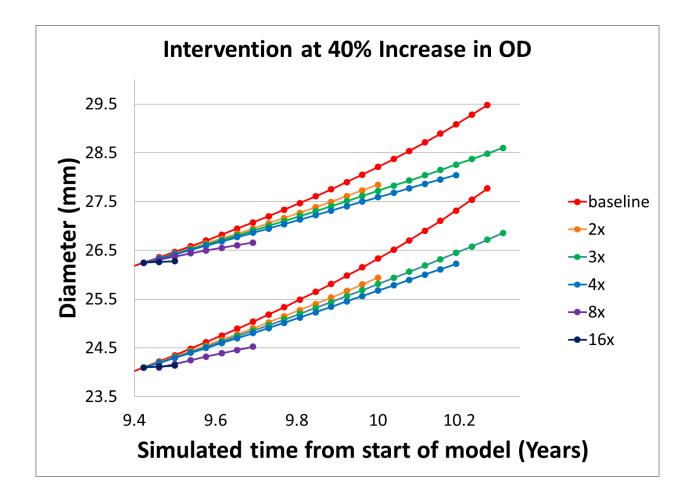
# 4.3.1 Changes in Diameter with Elastin Production

The inner and outer diameters from the constrained mixture models of AAA G&R featuring elastin production at 50% increase in outer diameter are shown in **Figure 14**. While elastin production does decrease the rate at which the diameter is expanding, the effects are small even at the greatest elastin production factors tested. In **Figure 15**, diameter vs. model simulation time is shown at the various elastin production factors tested for the 40% increase in outer diameter intervention time point. Elastin production slows the dilatation of the AAA more than

the 50% increase time point. In **Figure 16**, again, diameter vs. model simulation time is shown at the various elastin production factors tested but this time for the 30% increase in outer diameter intervention time point. Elastin production slows the dilatation of the AAA to a greater degree than both the 40% and 50% increase time points. The effect is so dramatic at the highest elastin production factors that the both the inner and outer diameter begin to decrease, signifying a contraction of the AAA within the model space. Lastly, **Table 7** shows the calculated rate of outer diameter increase at the end of simulation time for selected model intervention time points and elastin production factors. The rate of aneurysmal enlargement at the end of the baseline model run (~ 10 years simulation time) is 5.340 mm/year.



**Figure 14. Elastin production at 50% increase in outer diameter moderately slows enlargement.** Diameter in mm is shown on the y-axis. Model simulation time is shown on the x-axis. The outer diameters are the top curves, and the inner diameters are bottom curves.



**Figure 15. Elastin production at 40% increase in outer diameter slows enlargement to an appreciable extent.** Diameter in mm is shown on the y-axis. Model simulation time is shown on the x-axis. The outer diameters are the top curves, and the inner diameters are bottom curves.

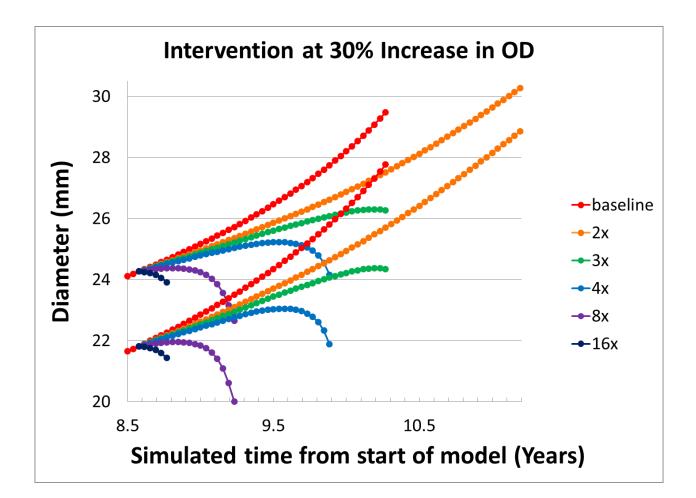


Figure 16. Elastin production at 30% increase in outer diameter greatly slows enlargement and even contracts the aneurysm at higher elastin production factors. Diameter in mm is shown on the y-axis. Model simulation time is shown on the x-axis. The outer diameters are the top curves, and the inner diameters are bottom curves.

**Table 7. Increasing elastin production and earlier intervention slows the rate of aneurysmal enlargement.** The rate of aneurysmal enlargement (outer diameter) at the end of the baseline model run (~ 10 years simulation time) is 5.340 mm/year. Intervention at 30% growth of the vessel caused the aneurysm to begin to contract at as high as 15.480 mm/year (i.e. residual tension begins to pull the artery back towards its original size) with most elastin production rates.

	-	Rate of Aneurysm growth (mm/year)			
		Poir	nt of Interven	of Intervention	
		30%	40%	50%	
Elastin Production Factor	2x	3.338	3.110	4.711	
	Зx	-0.692	3.172	4.274	
	4x	-13.302	2.356	3.791	
	8x	-15.480	1.352	3.302	
No Intervention		5.340			

### 4.3.2 Changes in Collagen Content with Elastin Production

Moving forward, all results shown are from the 30% increase time point featuring the 2x elastin production factor. This model was chosen because the model was able to complete the most time steps in the G&R simulation and thus would provide the most data to compare with the baseline G&R model run. **Figure 17** shows the changes in collagen content over simulated time from the constrained mixture models of AAA G&R featuring 2x elastin production with intervention at 30% increase in outer diameter and the baseline model for the adventitial (top curves) and medial (bottom curves) layers. In **Figure 18 & Figure 19**, we zoom in on the adventitia and media, respectively, to more easily see the differences in the collagen content. The trend for both layers is clear. When elastin is produced in the G&R models, there is an initial net reduction in collagen in both layers compared to the baseline model that returns to the baseline model amounts by the end of the model run.

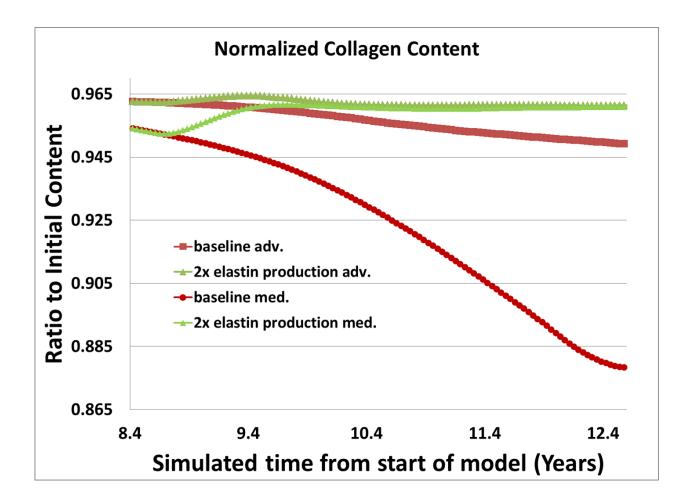


Figure 17. 2x elastin production at 30% increase in outer diameter lowers the amount of collagen in the adventitia and media in constrained mixture models of AAA G&R. The ratio of remaining collagen to initial collagen content is shown on the y-axis. Model simulation time is shown on the x-axis. Average collagen content through the adventitia is shown by the top curves, and average collagen content through the media are bottom curves. The baseline model values are shown in red. The 2x elastin production factors model is shown in green.

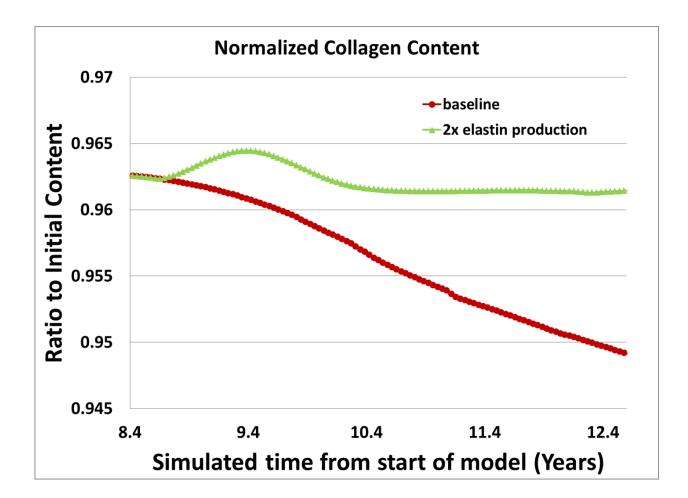


Figure 18. 2x elastin production at 30% increase in outer diameter lowers the amount of collagen in the adventitia in constrained mixture models of AAA G&R. The ratio of remaining collagen to initial collagen content is shown on the y-axis. Model simulation time is shown on the x-axis. The baseline model values are shown in red. The 2x elastin production factors model is shown in green.

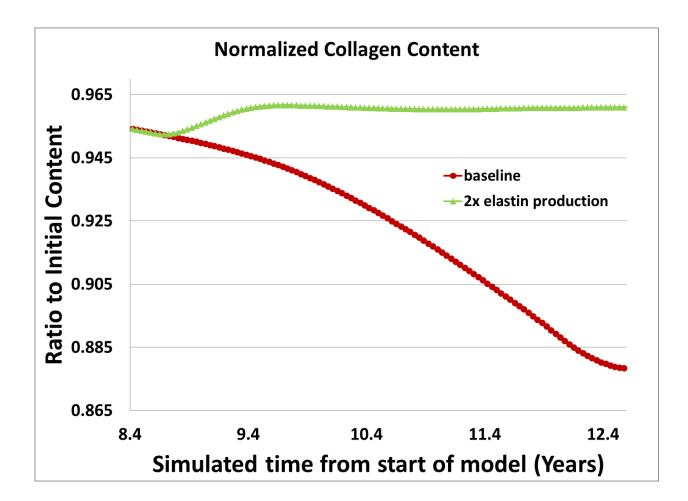
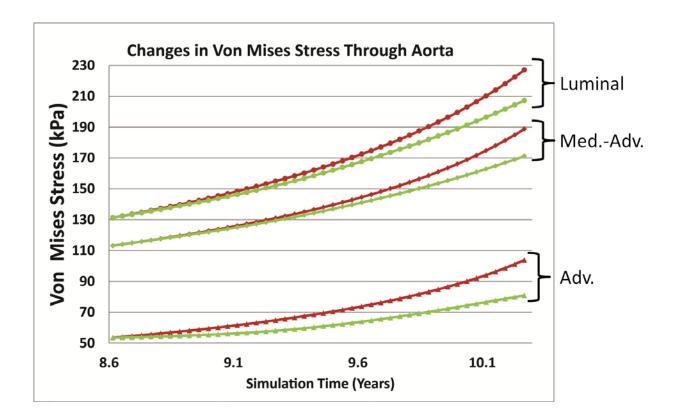


Figure 19. 2x elastin production at 30% increase in outer diameter lowers the amount of collagen in the media in constrained mixture models of AAA G&R. The ratio of remaining collagen to initial collagen content is shown on the y-axis. Model simulation time is shown on the x-axis. The baseline model values are shown in red. The 2x elastin production factors model is shown in green.

# 4.3.3 Changes in Stress with Elastin Production

Since stress based growth is a driver in the constrained mixture models of AAA G&R employed in this exercise, it is prudent to examine the changes in stress when elastin production is allowed. **Figure 20** shows the calculated von Mises stresses from the constrained mixture models of AAA G&R featuring elastin production at 30% increase in outer diameter and the baseline model for the luminal surface (top curves), the medial-adventitial interface (middle curves), and adventitial surface (bottom curves). The von Mises stress is reduced when elastin is produced in the G&R models through the thickness of the vessel.



**Figure 20. 2x elastin production at 30% increase in outer diameter lowers the amount of collagen in the media in constrained mixture models of AAA G&R.** The von Mises stress (kPA) is shown on the y-axis. Model simulation time is shown on the x-axis. The von Mises stresses on the luminal surface are the top curves, the von Mises stresses at the interface between the media and adventitia are the middle curves, and the von Mises stresses on the adventitial surface are the bottom curves. The baseline model values are shown in red. The 2x elastin production factors model is shown in green.

### 4.4 **DISCUSSION**

In this study, we modified an existing constrained mixture model of AAA G&R within a 3D finite element framework, a tool that utilizes constrained mixture models that account for chemical and stress based changes in masses and orientations of arterial constituents. Our FEA included physiologically relevant geometry and boundary conditions. Embedded within the custom material properties codes were the key G&R postulates: constitutive turnover, depositional prestretches, and vasoactivity.

The modification of the constrained mixture model of AAA G&R was to allow for elastin production in the material properties codes. This modification was done to mimic a proelastogenic therapy for the treatment of an existing and expanding AAA such as the ADMSC treatment explored in-vitro in Chapter 3 and explored in-vivo in Chapter 5. When elastin is allowed to be produced, we are able to capture and predict relevant features of the complex timevarying changes in dilatation, composition, and biomechanics of the AAA.

Some important distinctions should be made between the computational AAA G&R model and what is actually happening in physical AAAs. In the AAA G&R model, elastin is slowly degraded, but this degradation in the G&R model is a degradation of mechanically functional elastin. This would be analogous to breaks in the elastic fibers in a physical AAAs and less insoluble elastin in the tissue. Tissue from AAA patients has been shown to contain less insoluble elastin that non-aneurysmal tissue even though mRNA levels are similar<sup>52</sup>. The amount of insoluble elastin has also been shown to decrease with increasing AAA diameters<sup>384</sup> which is similar to what we see in the baseline AAA G&R models.

In all experimental cases examined, the rate of diameter enlargement of the AAA was slowed. We speculated that this would be the case due to the distensibility and recoil properties of elastin which is akin to adding stretched rubber bands around an inflated rubber tube. A question we sought to answer with respect to the dilatation of the AAA was how much newly produced elastin would be necessary to produce a desired result (i.e., a reduction of the enlargement rate by 50%). This figure was selected because it has been postulated that reducing the enlargement rate by 50% would remove the need for surgery by ten years<sup>385</sup>. A number of experimental cases met or came close to this desired result which can be seen in **Table 7**. Less elastin production is necessary the sooner the intervention is initiated.

After seeing that the 50% reduction in enlargement rate is obtainable, we turned our focus to the collagen composition of the artery. Focusing on the 30% intervention time point with the 2x elastin production factor, we examined the collagen content relative to the amount of collagen at the start of the simulation. Compared to the baseline AAA G&R model, the amount of collagen is lower in the adventitia and media when elastin is produced. In both layers, there is an initial net increase in collagen when the elastin production is turned on, but by the end of the simulation, the amount of collagen is largely unchanging. The adventitia is particularly interesting as seen in **Figure 18**. The amount of collagen in the elastin production model is increased initially and then starts to decrease before leveling off. There seems to be competing interests between the stress based collagen production and the vasoactivity which is being influenced by the changes in diameter due to elastin production. Smaller diameters are leading to less stretch on the existing SMCs thus allowing the SMCs to produce more active stress.

The overall lower reduction in relative amounts of collagen production in the elastin production model compared to the baseline model can partially be explained by the lower von Mises stress shown in **Figure 20**. The lower von Mises stress leads to less collagen production with the material properties codes which is one of the fundamental hypothesis built into the G&R models, stress based constitutive turnover. Additionally, part of the stress is being shifted to the newly produced elastin, and some is being shifted to SMCs that are able to produce more active stress when they are stretched less.

The chosen constrained mixture model of AAA G&R is an 'integral-based' approach where the total history of the arterial constituents is accounted for over a finite model simulation time. There are other G&R models such as the 'rate-based' approach introduced by Watton et al. <sup>386</sup> where physiologically determined remodelling rates for constituents are used to predicted dilations of the aneurysm. The integral approach can account for time-varying mass production and degradation rates while retaining their biological interpretations, an advantage over the ratebased approaches. However, an integral-based formulation is computationally demanding requiring mass amounts of memory. In contrast, the rate-based approach used by Watton above and others<sup>387,388</sup> is more computationally expedient.

There are other inherent limitations to the general framework of the constrained mixture model of AAA G&R used in this study. Due to the discretization of the results, error can arise in slight deviations from the desired loaded geometry which changes the initial conditions for the time-dependent G&R simulation. While these differences are initially small, these errors manifest as compounding errors in the kinetics modeling. Some of the accumulation of error can be reduced by variable temporal resolutions. Additionally, variable temporal resolutions may be necessary and useful to investigate some of the more peculiar observations such as the amount of collagen found in the adventitia in **Figure 18**.

Lastly, it should be noted that in this implementation, newly formed fibers are deposited in a constant direction. This is because our simplified case produces a first principal stresses in a constant, circumferential direction. However, the principal stress directions are not necessarily

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constant, and non-constant principal stresses will be seen in irregularly shaped aneurysms that are not captured in this implementation.

In the baseline AAA G&R models, the loss of elastin leads to luminal expansion and ineffective vasoactivity due to stretched SMCs, behaviors that are consistent with the physical manifestation of AAAs. One of the inherent compensation mechanisms on display in the model is the local stiffening of collagen shown in the increases von Mises stresses in the model. In contrast, when elastin production is allowed in our simulations, three things are clear: a decrease in diameter enlargement, a decrease in short term collagen deposition, and a decrease in von Mises stress.

#### 4.5 CONCLUSION

The results of this study show that elastin production within an aneurysm could relieve the maladaptive mechanical environment to an extent that slows aneurysmal enlargement. Early intervention can reduce the enlargement rate by more than 50%, potentially delaying the need for surgical intervention by 10 years<sup>385</sup>. These findings also confirm our thoughts that regeneration of functional elastic fibers in a AAA can help slow the progression of the disease.

#### 4.6 FUTURE WORK

These exciting results can be used to guide future experiments that study elastin production. They can also be used as a starting point for optimizing treatment protocols for AAA therapies such as MSC therapy. Additional work needs to be devoted towards addressing computational limitations through creative problem posing such as changing the temporal resolution of the time step, creative coding that optimizes the problem for parallel computing, and upgrades in computational hardware. Studies should also be devoted to some of the more interesting changes in collagen content that are displayed in **Figure 18**.

# 5.0 SPECIFIC AIM 2: PERIADVENTITIAL ADMSC THERAPY TO SLOW AND/OR REVERSE THE PROGRESSION OF AN ELASTASE PERFUSED AAA

In Aim 2 we tested an ADMSC based therapy in a mouse elastase perfusion model of AAA. We tested two ADMSC delivery methods: in saline suspension and within a fibrin gel. We then evaluated the treatment using physical measurements, histological characterization, and mechanical testing. The work presented in Aim 2 that utilized the saline suspension cell delivery has been previously published<sup>140</sup>.

#### 5.1 INTRODUCTION

AAA rupture was the cause of mortality in over 11,000 cases in 2008 in the US<sup>116</sup>. Large AAAs (>6.0 cm diameter) expand more rapidly than small AAAs (<4.0 cm diameter) with the former expanding 7 to 8 mm annually while the latter only expand 1 to 4 mm annually. As demonstrated by the slow growth rate of small AAAs, the disease can take years to reach a size when surgical intervention is recommended (> 5.5 cm diameter) which is the endovascular placement of a synthetic graft to physically exclude the aneurysmal aorta. Surgical intervention does not benefit small AAAs<sup>118</sup>, and management of these patients is limited to "watchful waiting" (i.e., serial imaging of the AAA progression until the threshold for surgical treatment is

met.) Additionally, the use of pharmaceutical treatment to alter the progression of small AAAs has been proven ineffective<sup>184,389,390</sup>.

The process of aneurysmal enlargement is complex, involving inflammatory cells, increased MMP activity leading to elastin and collagen degradation, smooth muscle apoptosis, and hypoxia mediated weakening<sup>114</sup>. These processes are heavily based on cellular activity, therefore AAAs represent an optimal target for regenerative MSC based therapy. MSCs have the ability to secrete growth factors<sup>193,194</sup> which could suppress inflammation and MMP activity while stimulating elastin and collagen production. MSCs can also differentiate, thus providing a potential means to replace lost smooth muscle cells. Furthermore, MSCs have already shown promise as a treatment for AAAs in animal models when delivered systemically<sup>195</sup> and by direct injection into the aortic wall<sup>133</sup> immediately after an elastase insult. Though the former study showed a reduction in the inflammatory response suggesting a paracrine mechanism of action, systemic delivery of cells may encounter physical barriers such as atherosclerotic plaques and ILT. The latter showed displayed MSC engraftment into the aneurysmal wall allowing for the possibility of MSC differentiation, but this delivery method which would require puncturing a weakened AAA wall could be troublesome to a vascular surgeon in a clinical setting.

These approaches have proven useful in evaluating the effects of MSCs on the diseased condition showing a proof of concept for the stem cell treatment of AAA. However, AAA is a complex disease that takes years to fully develop to the stage where medical intervention is necessary. In humans, the exact moment when sufficient elastin is lost and the disease is initiated is unknown. Therefore, any clinical stem cell based therapy would be delivered well into the disease progression. The lapse between disease onset and diagnosis presents the need for an alternate therapeutic model. The objective of this study was to explore an alternative therapeutic model using localized, delayed delivery of MSCs to an established and expanding aneurysm in an animal model.

#### 5.2 METHODS

### 5.2.1 Culture of MSCs

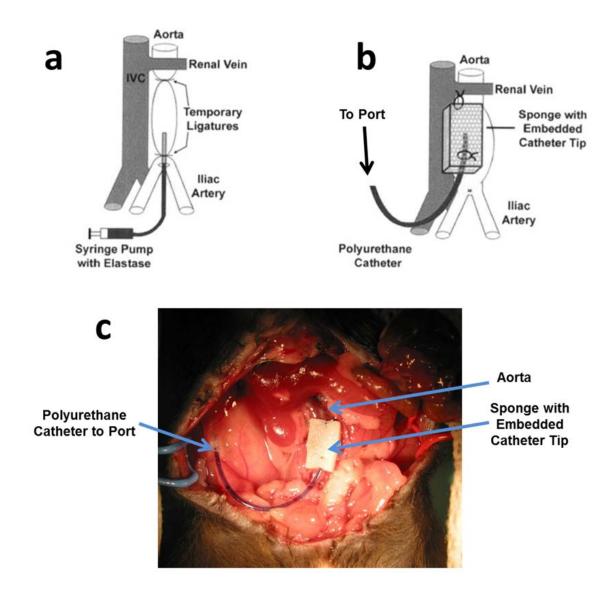
OriCell<sup>™</sup> C57BL/6 green fluorescent protein (GFP) labeled murine ADMSCs were purchased commercially (Cyagen Biosciences Inc., Santa Clara, CA.) The ADMSCs were cultured according to the manufacturer's protocols. Briefly, the ADMSCs were cultured at 37°C and 5.0% CO2 with OriCell<sup>™</sup> Adipose-derived Stem Cell Growth Medium (10% fetal bovine serum, 1% penicillin-streptomycin, 1% glutamine; Cyagen Biosciences Inc., Santa Clara, CA.) The ADMSCs were used between passages 6–10. Media changes were performed every 2-3 days. Once the ADMSCs were approximately 80-90% confluent, the ADMSCs were washed three times in phosphate-buffered saline and then incubated with Trypsin-EDTA (Gibco, Life Technologies, Grand Island, NY) solution for 5 min to remove them from the flasks. These cells were used in the saline suspension delivery method.

Commercially sourced human ADMSCs (Thermo Fisher Scientific, #R7788110) were cultured in 75-cm<sup>2</sup> or 175-cm<sup>2</sup> tissue culture flasks (Corning) and grown under defined culture media [1:1 Dulbecco's modified Eagle's medium (DMEM; Gibco #11965) to DMEM/F12 (Gibco #113300) with 10% fetal bovine serum (Atlanta Biologics #S11550), antibiotics (1% Pen/Strep, 0.5% Fungizone, 0.1% Gentamycin), and 10  $\mu$ L of 10 mM dexamethasone] mixed with 25% Preadipocyte Growth Medium (#C-27410, #C-39425; PromoCell). Culture media was

changed every 2-3 days and when ADMSCs were expanded to near confluence, they were passage expanded utilizing 0.25% trypsin-EDTA (#25200-056; Gibco) or utilized for subsequent experimentation. These cells were used in the fibrin gel delivery method.

#### 5.2.2 Elastase Perfusion

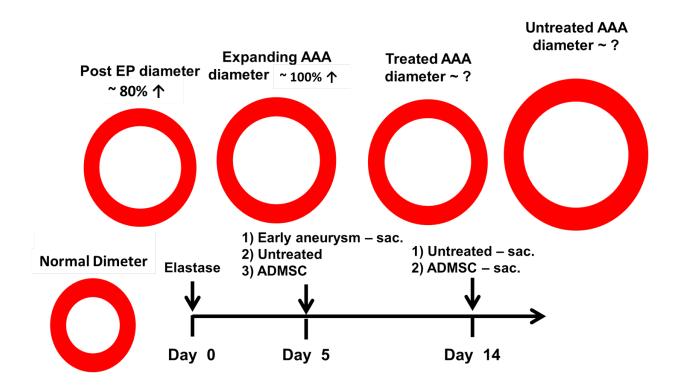
Adult male mice were subjected to transient elastase perfusion of the abdominal aorta as described previously<sup>69,76,139,157,391</sup>. Briefly, after sedation and sterile preparation, a midline laparotomy was made to expose the peritoneum. Once abdominal contents were displaced in moistened gauze, a small incision was made in the mouse's right retroperitoneal muscle. Forceps created a subcutaneous space, and then a subcutaneous microport (Instech, Plymouth Meeting, PA) connected to a polyurethane catheter tubing (Braintree Scientific, Braintree, MA) was attached and placed in the retroperitoneal space. The exposed tubing was set aside to proceed with dissection of the infrarenal aorta. The surrounding tissues were cleaned periaortically, and the diameter was measured under magnification with a micrometer. A segment of infrarenal aorta was isolated, and a 5-minute perfusion was performed through an arteriotomy at 100 mm Hg with a solution containing type I porcine pancreatic elastase (PPE, 0.16 U/mL; Sigma-Aldrich, St. Louis, MO). All of the experiments were performed with a single PPE preparation derived from the same commercial source and lot. Following aortic perfusion the arteriotomy was repaired, an Ivalon sponge (5mm x 8mm) was connected to the end of the set aside tubing, and the sponge was tacked in place over the aorta (for schematic see Figure 21). The incision was closed, and the animal was allowed to completely recover before returning to standard housing. The animals were maintained in standard housing with ad libitum access to standard food and water for 14 days.



**Figure 21. Elastase perfusion and localized adipose-derived mesenchymal stem cells treatment.** (A) Schematic representing elastase perfusion. (B) Schematic demonstrating our delayed, localized delivery system. (C) Photograph of delayed, localized delivery system in place after elastase perfusion. (A & B) adapted with permission from Bartoli et. al<sup>120</sup>.

# 5.2.3 ADMSC Delivery

For experimental consistency, all groups had the local delivery sponge in place, and the elastase perfusion surgery (denoting day 0) was performed on all groups. Two ADMSC delivery methods were tested: in saline suspension and within a fibrin gel. The saline suspension delivery method was the first method explored as a proof-of-concept study. The fibrin gel delivery method was added in an attempt to improve ADMSC retention. In the saline suspension delivery, the groups were as follows (**Figure 22**): 1) An early aneurysm group that was sacrificed on day 5 prior to any injection in order to demonstrate successful aneurysm induction (n=3.) 2) An untreated aneurysm group was given 400  $\mu$ l of saline via port injection on day 5. The mice were sacrificed on day 14 (n=6.) 3) A local ADMSC delivery group was given 1x10<sup>5</sup> ADMSCs suspended in 400  $\mu$ l of saline via port injection on day 5. The mice were sacrificed on day 14; cell concentration = 2.5x10<sup>5</sup> cells/mL.) All saline delivered ADMSC experiments were performed at Washington University in St. Louis in the laboratory of Dr. John Curci.



**Figure 22.** Experimental and control groups for saline delivery. Day 0 denotes elastase perfusion surgery and AAA induction. On day 5, post-elastase perfusion (D5 post-EP) animals were sacrificed in order to demonstrate successful aneurysminduction (n = 3, early aneurysm group). On D5 post-EP, treatment group animals were given stemcell therapy via port injection and were sacrificed on D14 post-EP (n = 9, seven animals survived to D14 post-EP, local ADMSCs treatment group). On D5 post-EP, untreated control group animals were given 400 µl of saline via port injection and were sacrificed on D14 post-EP (n = 6, untreated aneurysm group).

When using fibrin as a delivery vehicle for the ADMSCs to allow for the potential increase in ADMSC engraftment to the periadventitial AAA wall, the groups were as follows: 1) An untreated control group where saline was delivered via port injection on day 6. The mice were sacrificed on day 15 (n=4.) 2) A local ADMSC delivery group was given  $1 \times 10^5$  ADMSCs suspended in 250 µl of fibrin gel via port injection on day 6. The mice were sacrificed on day 15 (n=10; fibringen concentration = 3 mg/mL, thrombin concentration = 1 NIHU/mL, cellconcentration =  $4.0 \times 10^5$  cells/mL.). 3) A local, acellular fibrin delivery group was given 250 µl of fibrin gel via port injection on day 6. The mice were sacrificed on day 15 (n=23; fibrinogen concentration = 3 mg/mL, thrombin concentration = 1 NIHU/mL). ADMSC-seeded fibrin gels were mixed from constituent solutions as a single batch for delivery. Up to three mice at a time were injected for the cell based treatments. These mice were further grouped by the order in which they were injected from the single batch of ADMSC-seeded fibrin gel for diameter analysis. The group labeled "injection 1" consisted of animals that received the first injection from the single batch of ADMSC-seeded fibrin gel. The group labeled "injection 2 or 3" consisted of animals that received the second or third injection from the single batch of ADMSCseeded fibrin gel. It should be noted that the treatment delivery and harvest occurred at days 6 and 15, respectively. These values are each one day later than the saline delivery counterparts described in Section 5.2.3. All fibrin delivered ADMSC experiments were performed at Vanderbilt University in the laboratory of Dr. John Curci.

#### 5.2.4 Aorta Diameter Measurement

Two weeks following elastase perfusion, the mice were again anesthetized, and the laparotomy incision was reopened. Final aortic diameter was measured in vivo with an ocular grid prior to sacrifice. Animals were euthanized, and the entire perfused segment of aorta was harvested for further analysis. The diameter data are presented as a % increase in diameter defined as the difference in final and initial diameters divided by the initial diameter and multiplied by 100 to be expressed as a percentage.

#### 5.2.5 Histological Characterization of Aorta

Aortic specimens were formalin fixed for 24 hours before being preserved via paraffin embedding. Paraffin embedded tissue blocks were sectioned using a microtome at 5  $\mu$ m thickness. Before staining, sections were deparaffinized and rehydrated by consecutive washes in xylene, alcohol, and de-ionized water. Cross sections of the aortic wall were stained with Verhoeff-Van Gieson (VVG) stain for elastin as well as hematoxylin and eosin to identify cellular composition.

Rehydrated sections were blocked with 5% goat serum and incubated with primary mouse specific recombinant tropoelastin antibody (1:1000, generous gift from R.P. Mecham, Washington University in St. Louis<sup>392</sup>) overnight. Sections were then incubated with Alexa 647-conjugated goat anti-rabbit antibody (Molecular Probes, Life Technologies, Grand Island, NY) followed by counterstaining with 4',6-diamidino-2-phenylindole (DAPI) and imaged on a fluorescent microscope (Olympus, Provis 1, Center Valley, PA, Center for Biological Imaging, University of Pittsburgh).

Additional samples were also stained with a mouse F4/80 antibody (BioRad, MCA497A488) as pan macrophage marker in a similar manner as described above. A 1:50 dilution was used as well as a proteinase K antigen retrieval step. The antibody was preconjugated with Alexa 488.

Unstained specimens were imaged using a multi-photon microscope (Olympus, Model FV10, Center Valley, PA, Center for Biological Imaging, University of Pittsburgh) to observe elastin fiber arrangement. Samples were excited at 790 nm wavelength, and elastin was detected according to intrinsic fluorescence wavelength ( $525 \pm 25$  nm).

# 5.2.6 Mechanical Testing and Characterization of Aorta

Ring sections were cut from the murine aortas (shipped cold overnight from Vanderbilt University) at the midpoint between the renal arteries and the iliac-tail-aortic trifurcation. The rings were threaded with stiff metal wire which was clamped in an Instron tensile testing device described in Section 2.2.3. The mechanical analysis was performed in the same manner as described in Section 2.2.4 with the notable exception of using a Poisson's ratio of 0.5 which indicates an incompressible material.

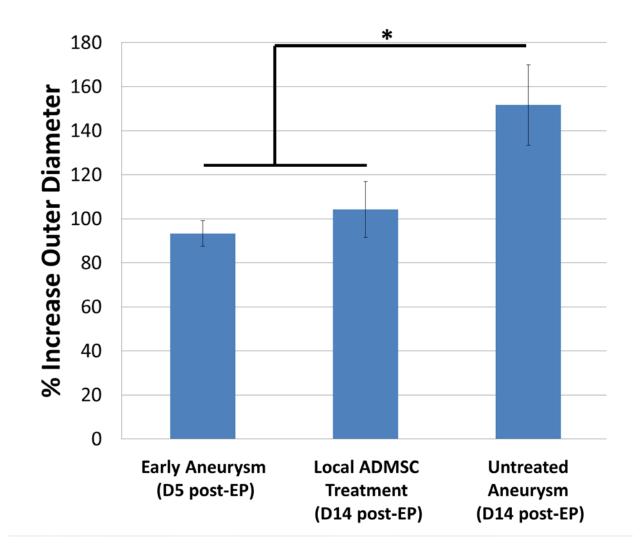
# 5.2.7 Statistics

All statistics were performed in a similar manner to Section 3.2.7 ("Statistics").

# 5.3 **RESULTS**

#### 5.3.1 Progression of AAA with Saline Delivered ADMSC Treatment

Five days after elastase perfusion, the artery dilated to approximately double the original diameter (**Figure 23**). At this point, when the aneurysm has already been established, either saline or ADMSCs were delivered through the treatment port. The untreated (saline) aneurysm group had a larger diameter than the early aneurysm group indicating that the untreated aneurysm continued to enlarge. By contrast, the group treated with ADMSCs demonstrated an aortic diameter equivalent to the early aneurysm group (and smaller than the untreated group) indicating that the expansion of the AAA had essentially been halted at the time of ADMSC treatment.

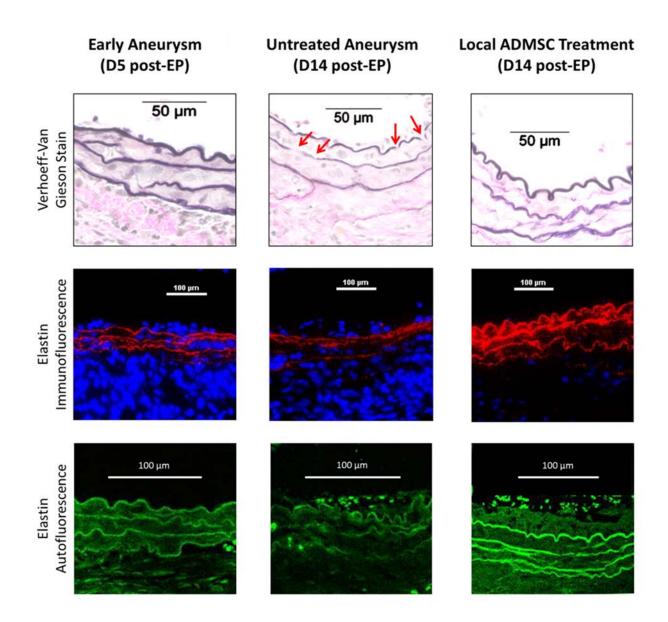


**Figure 23.** Progression of aneurysm is halted with local adipose-derived mesenchymal stem cells treatment. % increases in a ortic diameter measurements (mean ± standard deviation) for early aneurysm group ( $93.3 \pm 5.77$  %, n = 3), local ADMSCs treatment group ( $104.29 \pm 12.72$  %, n = 7), and untreated aneurysm group ( $151.67 \pm 18.35$  %, n = 6). A two-way analysis of variance revealed unequal means (\*, p < 0.001) between groups. Tukey tests revealed which groups differed.

#### 5.3.2 Histological Changes with Saline Delivered ADMSC Treatment

VVG, elastin autofluorescence, and immunofluorescent staining are shown in **Figure 24**. Qualitative examination of the imaged sections revealed less disruption of the elastic lamella in the local ADMSC treatment group when compared with the untreated aneurysm group. This is most apparent with VVG staining where elastin fiber breaks are highlighted by red arrows. The elastic fibers look similar between the early aneurysm group and the local ADMSC treatment group indicating that the delivery of ADSMCs is associated with preserved elastin integrity at the time of ADMSC treatment. Immunofluorescent staining (**Figure 24B**) and elastin autofluorescence (**Figure 24C**) confirmed the VVG results (**Figure 24A**).

Aneurysm progression in this model is mediated by inflammation – inflammatory cells are recruited by elastin degradation peptides and actively contribute to further matrix degradation<sup>393</sup>. In our study, moderately severe inflammation was apparent at day 5 (note the presence of mononuclear cells in **Figure 25**). At day 14, the presence of mononuclear cells decreased, but no significant difference was seen between treatment groups. Additionally, at day 14, there are no detectable macrophages in the local ADMSC treatment group compared to the early aneurysm and untreated aneurysm groups which display positive staining for macrophages (**Figure 26**).



**Figure 24. Qualitative examination of elastin**. Images from early aneurysm (left column), untreated aneurysm (middle column) and local ADMSC treatment (right column) groups are shown after Verhoeff–Van Gieson staining (top row), elastin immunofluorescence (middle row), and elastin autofluorescence (bottom row) (n = 2 all groups).

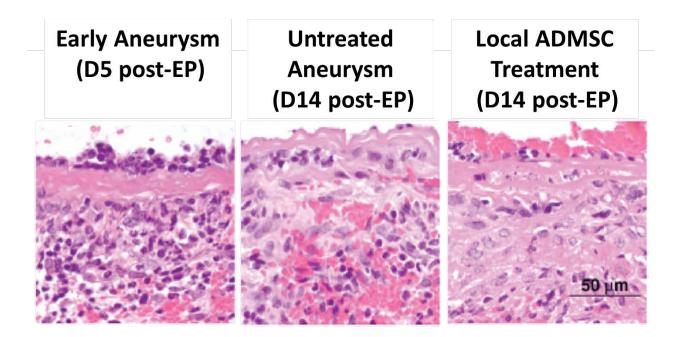
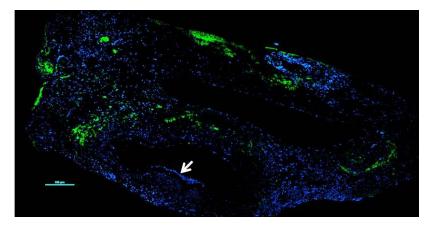
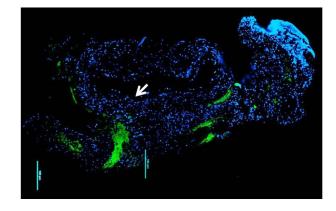


Figure 25. Monocyte infiltration of the abdominal aortic aneurysm is not significantly reduced with adipose derived mesenchymal stem cells delivery. Images from early aneurysm, untreated aneurysm and local ADMSC treatment groups are shown after staining with hematoxylin and eosin (n = 2 all groups).

Early Aneurysm (D5 post-EP)



Untreated Aneurysm (D14 post-EP)



Local ADMSC Treatment (D14 post-EP)

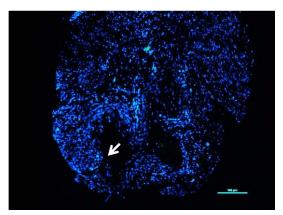


Figure 26. Local ADMSC treated aortas show no macrophages at day 14 post elastase perfusion. Images from early aneurysm(top), untreated aneurysm(middle) and local ADMSC treatment (bottom) groups are shown after macrophage immunofluorescence staining (green) (n = 1 all groups). All groups are counterstained with DAPI (blue).

#### Diameter Measurements with Fibrin Delivered ADMSC Treatment

Six days after elastase perfusion, saline (no ADMSCs), fibrin(no ADMSCs), or ADMSC seeded fibrin treatments were delivered through the treatment port. Upon harvest at day 15, there was no statistical differences in the % increase in outer aortic dimeter (p=0.308). **Figure 27** shows the mean and standard deviation for each group. The untreated saline controls harvested at day 15 were smaller than the equivalent untreated saline controls harvested at day 14 shown in **Figure 23** (p=0.0004).

The ADMSC seeded fibrin delivery group was further broken down according to the timing of the injections. Since there is a temporal aspect to fibrin gelling, mice that were injected at a later gelation time were separated from mice that received the first injection from the batch mixing of fibrin. This breakdown is shown in **Figure 28**. The groups are not statistically different when including this further breakdown (p=0.239).

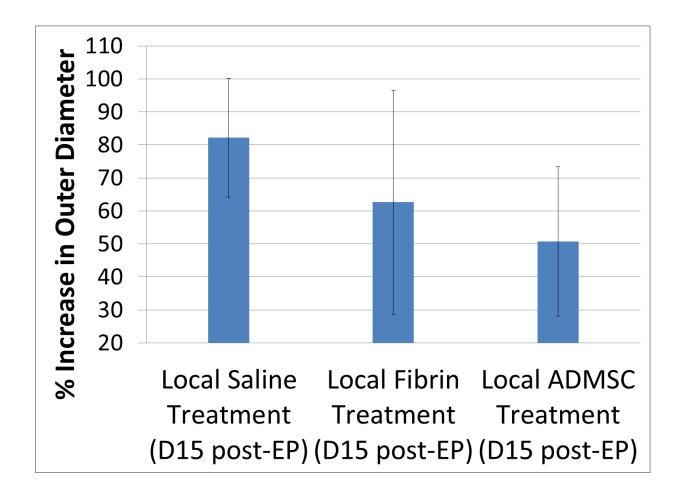


Figure 27. Aneurysm growth is unchanged with local adipose-derived mesenchymal stem cells treatment delivered via fibrin (p=0.308). % increases in a ortic diameter measurements (mean  $\pm$  standard deviation) for local saline (no ADMSC) treatment group (82.14  $\pm$  17.98 %, n = 4), local fibrin (no ADMSC) treatment group (62.60  $\pm$  33.92 %, n = 23), and local ADMSC treatment group in fibrin (50.71  $\pm$  22.64 %, n = 10).

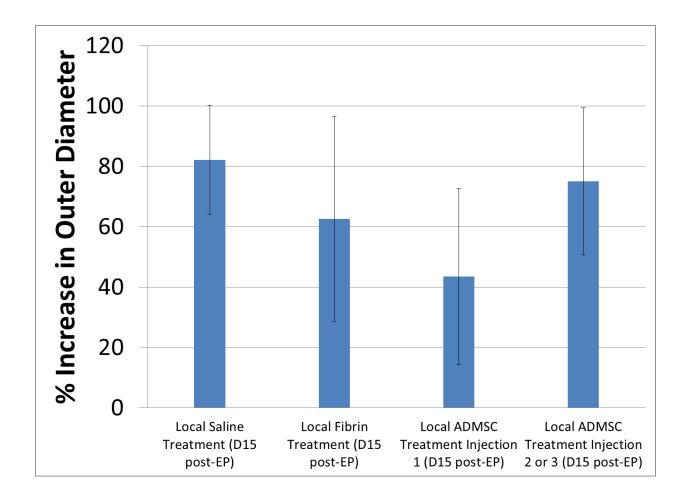
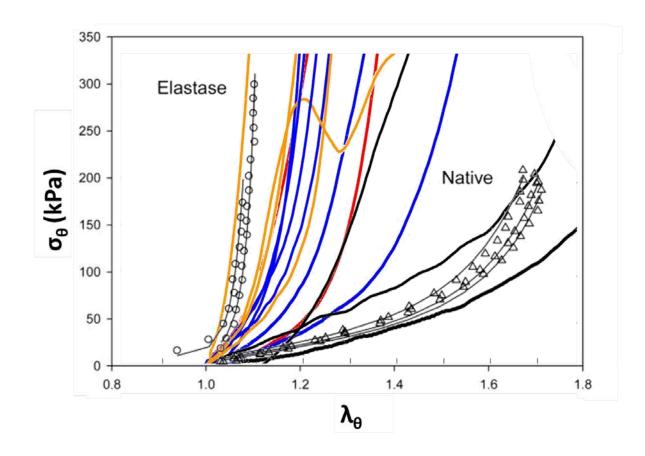


Figure 28. Aneurysm growth is unchanged with local adipose-derived mesenchymal stem cells treatment delivered via fibrin even when accounting for injection order (p=0.239). % increases in aortic diameter measurements compared to per elastase perfusion measurements (mean  $\pm$  standard deviation) for local saline (no ADMSC) treatment group (82.14  $\pm$  17.98 %, n = 4), local fibrin (no ADMSC) treatment group (62.60  $\pm$  33.92 %, n = 23), local ADMSC treatment injection 1 group (43.45  $\pm$  29.14 %, n = 6), and local ADMSC second treatment injection 2 or 3 group (75.00  $\pm$  24.40 %, n = 4). The first two bars from left to right are the same as the first two bars from left to right in Figure 27.

# 5.3.4 Aorta Mechanical Properties with Fibrin Delivered ADMSC Treatment

In order to determine the tangent modulus of the aortas, the circumferential Cauchy stress was calculated and plotted against the circumferential stretch ratio is shown in **Figure 29** (along with similar data from Collins et al.<sup>167</sup>). One-way ANOVA reveals differences in the tangent modulus, seen visually as the higher slope of the second linear portions of the curves in **Figure 29**, between the groups (p=0.014). Subsequent Tukey tests revealed that the native aortas have a lower tangent modulus than the acellular fibrin treated and ADMSC-seeded fibrin treated groups (**Table 8**).



**Figure 29. Elastase treatment leads to a stiffer aorta in mice.** Circumferential stretch ratio is shown on the x-axis. Circumferential Cauchy stress is shown on the y-axis. The solid lines are from the following groups: Black = native aorta, blue=fibrin only treatment, orange=ADMSC treatment, red =saline treatment. The black triangle data points are native mouse aortas from Collins et al<sup>167</sup>. The black circle data points are elastase treated mouse aortas from Collins et al<sup>167</sup>.

Table 8. Native aortas have a lower tangent modulus than all elastase treated groups. Measurements for tangent modulus are given as mean  $\pm$  standard deviation. Tukey groupings identifiers "A" and "B" show which groups have different means.

Group	Tangent Mod. (MPa)	Tukey Groupings
Native aorta (n=3)	0.6±0.3	А
Saline (n=2)	2.9±0.3	A B
Fibrin Only (n=6)	3.3±1.4	В
ADMSC (n=4)	4.2±1.2	В
One way ANOVA	p=0.014	

# 5.4 **DISCUSSION**

Local ADMSC treatment delivered by saline suspension halted aortic diameter enlargement at the time of cell delivery (**Figure 23**). It has been estimated that if enlargement rates of small aneurysms (<4.0 cm diameter in humans) could be reduced by even 50%, the need for surgical intervention could be delayed by 10 years, thus preventing the need for intervention in many patients<sup>385</sup>. From a qualitative perspective, ADMSC treatment preserved the structure of elastic lamellae at levels comparable to the time of cell delivery, although quantitative analysis has not been performed. This could indicate a role for ADMSC in preventing elastin degradation and/or promoting elastic fiber production. Elastin degradation is both a hallmark of a developed AAA and an active recruiter of inflammatory cells<sup>394</sup> that continues the AAA destructive cycle. Preserving elastin integrity, and thus decreasing inflammation, could halt AAA progression. In our study, we cannot conclusively state that ADMSC diminished the inflammatory response, but they could theoretically have offset any monocyte-derived elastase activity. Our study also showed a decrease in the presence of macrophages when treated locally with ADMSCs (**Figure 25**).

Alternately, and not exclusive, to preventing degradation, therapeutic cells could stimulate elastin production. Elastic fibers can be produced by human vascular SMCs in vitro when stimulated with TGF- $\beta 1^{313}$  which is secreted by ADMSCs<sup>194</sup>. Therefore, ADMSCs could stimulate repair by native vascular SMCs.

When considering the increase in aortic diameter and elastin structure, our periadventitial stem cell delivery method produced results similar to those shown by Sharma et al.<sup>195</sup> where the

systemic delivery of MSCs reduced the rate of AAA progression and preserved elastin lamella integrity in elastase-perfused mice. Our study extends the work of Sharma et al. by demonstrating that the macroscopic benefits of stem cell therapy are accessible to established and expanding aneurysms and not limited to attenuating the inflammation response immediately following elastase perfusion. Our study also shows that periadventitial delivery of a stem cell therapy is effective and may avoid potential problems of systemic delivery such as unintended stem cell migration and engraftment. It also focuses the cells on the anatomically defined segment of the aorta affected by the disease and circumvents the physical barriers presented by endothelium, atherosclerotic plaque and/or ILT. This an important finding in the development of treatments for patients with an identified AAA, of which 90% are smaller than the size recommended for surgical repair (5.5 cm)<sup>395</sup>.

Although this study yielded exciting results, it does have limitations. This proof-ofconcept study was designed to be a short-term study. While the murine elastase-perfused aneurysm does not expand after our chosen end point of 14 days<sup>120</sup>, the human aneurysm expands progressively. Longer studies will need to be completed in order to understand the long term effects of our treatment. Additionally, future studies will investigate the progression of the disease in real-time by sacrificing animals at more frequent intervals and utilizing noninvasive imaging, such as ultrasound or micro-CT/micro-MRI.

In this study of local ADMSC treatment delivered via saline suspension, we had sought to develop and show proof-of-concept for an alternative therapeutic model for AAAs. A localized, periadventitial route of stem cell therapy administration avoids the drawbacks of both systemic delivery (e.g., uncertain destination of cells and presence of ILT) and local delivery via direct injection into a weakened aneurysmal wall. The placement of the port, catheter, and

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sponge (**Figure 21**) allows for initiation of therapy at any point in the development of the model aneurysm. A final advantage of our approach is the use of MSCs sourced from adipose tissue. ADMSCs are a very attractive clinical source of stem cells due to the ease of obtaining adipose tissue from donors seeking liposuction treatment and the high yield of MSCs from adipose tissue<sup>351,396</sup>. Our study revealed how ADMSCs can alter the progression of an already established and expanding aneurysm while others have shown the ADMSCs have immunomodulatory properties<sup>397</sup>.

In contrast to the results when ADMSCs were delivered with saline, ADMSCs delivered via a fibrin hydrogel had no significant effect on aneurysm in terms of % increase in outer diameter and tangent modulus of the vessel. There are a number of confounding factors that could be influencing our results. First, the size of the aneurysm in terms of % increase in outer diameter is smaller when comparing the untreated aneurysm controls between the saline suspension delivery experiments performed at Washington University in St. Louis and the fibrin gel delivery experiments performed at Vanderbilt University. Though following the same protocols, the change in location has also meant a change in animal technician performing the surgeries, different lots of elastase, and potential differences in food and water given to the animals. Since the aneurysm we were treating is small overall, the ADMSC therapy may not be able to have a large enough effect to be seen in a macroscopic measurement such as diameter.

Another confounding factor could be the timing of the delivery using fibrin gels as a delivery vehicle. Once the constituents of the fibrin gel are mixed, gelation begins. Should gelation proceed too rapidly, the cells may not be able to get close enough to the aorta to have a positive effect. This is partially shown in the trend of lower diameters for the aortas treated with the first injection from the fibrin-cell mixture compared to the second and third injections from

the fibrin-cell mixture which are highlighted in **Figure 28**. Gelation may have been nearing completion by the time the second and third injections from the fibrin-cell mixture were delivered to the animals thus inhibiting the cells from reaching the periadventitial AAA wall.

### 5.5 CONCLUSION

We have developed an animal model for delayed, periadventitial delivery of ADMSCs to ameliorate elastase-induced AAA. Delayed, periadventitial delivery of ADMSCs halted two aspects of aneurysm progression – expansion of the aortic diameter and fragmentation of the elastic lamella. This work represents an important step towards developing clinically realistic stem cell therapies for AAA patients.

### 5.6 FUTURE WORK

Future work should concentrate on generating larger aneurysms in the fibrin based delivery of ADMSCs experiments. Once this technique is refined, work needs to be dedicated to improving ADMSC delivery to the periadventitial surface of the aorta. Once improved and shown to be effective, the ADMSC's mechanisms of action need to be determined to fully understand why the therapy is effective. Lastly, these studies need to be extended to longer time points in order to determine the lasting effect of the treatment.

#### 6.0 SPECIFIC AIM 3: DEVELOP CLINICAL MSC DELIVERY SYSTEM

The third Specific Aim of this dissertation is the early developmental work towards creating a clinical delivery system for our MSC therapy (which is thoroughly described in Section 6.1.1). Critical aspects of this clinical delivery system were evaluated four ways: 1) we evaluated the loading efficiency of iron nanoparticles into ADMSCs, 2) we determined cell viability with respect to fibrin gelling parameters and iron nanoparticle size, 3) we examined whether a magnetic force between the iron nanoparticles and an external magnet could induced movement of ADMSCs through a fibrin gel, and 4) we created and evaluated a cell delivery prototype. But, before detailing the experimental methods, it is important to understand the motivation and design criteria of our MSC delivery system as well as an overall description of the system.

# 6.1 DESIGN DESCRIPTION, MOTIVATION, AND CRITERIA

# 6.1.1 Clinical MSC Delivery System Description

We wish to deliver our proposed MSC therapy to the periadventitial surface of a AAA in a minimally invasive manner. This will be accomplished by gaining access to the peri-aortic space through the use of image-guided needles or retroperitoneoscopic techniques, and directing the transmural migration of MSCs by incorporating iron nanoparticles within the MSCs along with the placement of an intra-aortic magnet. The iron nanoparticle loaded MSCs will be delivered along with a fibrin gel which will entrap the cells on the periadventitial surface of the AAA. Local delivery of therapeutic agents should overcome noted inefficiencies of systemic delivery (i.e., poor homing<sup>398</sup>, compromised vasa<sup>64,65,109-111</sup>, and physical barriers like the ILT<sup>113</sup>). Our approach also has the potential intrinsic benefit of reduced systemic effects/toxicities.

When combined, the resulting therapy is the delivery of therapeutic cells to the periadventitial surface of the AAA with a fibrin gel holding the cells in place. The practical implementation of this system will occur as follows: (1) the endoluminal magnetic probe will be placed in the AAA lumen through femoral artery catheterization, and placement will be confirmed via ultrasound, (2) prescribed volumes of iron nanoparticle loaded therapeutic cells, fibrinogen, and thrombin solutions will be loaded into syringes and attached to a mixing and dispensing device that is designed to ensure that the solutions are mixed at the exact ratio and only upon injection, and (3) up to two translumbar injections can be made on either side of the spine to the periadventitial side of the AAA, and the solutions of iron nanoparticle loaded therapeutic loaded therapeutic cells, fibrinogen, and thrombin will be dispensed and mixed simultaneously.

This system is designed to ensure delivery of the therapeutic cells to the periadventitial surface of the AAA. The magnetic force between the iron nanoparticles and the endoluminal magnetic probe pull the therapeutic cells to the periadventitial surface of the AAA. The fibrin gel forms around the cells, restricting cell movement after withdrawal of the endoluminal magnetic probe. The mixing and dispensing system is designed to ensure the iron nanoparticle loaded therapeutic cells, fibrinogen, and thrombin solutions do not begin mixing until the time of dispensing and are mixed in the appropriate ratios. While novel technology is being developed for this therapeutic cellular delivery system, the parts are designed to leverage existing technologies such as syringes, surgical needles, and ultrasonic probing systems. In our small animal studies, described in Chapter 5, we have been successful at delivering a fibrin gel to the area immediately surrounding the aorta in an elastase perfused AAA mouse model<sup>140</sup>. The insights gained from our small animal studies combined with the development and testing of the proposed system will ensure a quality and effective end product. It is important to note that some of the work detailed below has been put into a successfully funded development grant through the University of Pittsburgh Center for Medical Innovation (F\_168-2016, PI: Blose) and is the subject of an invention disclosure submitted to the University's Office of Technology Management (Disclosure #03490).

# 6.1.2 Minimally Invasive Delivery of MSCs

We sought to make our therapeutic delivery of MSCs as minimally invasive as possible for two reasons. First, the advanced age of most patients makes open surgery a risky proposition with respect to mortality and extends hospital stays. Both problems are currently manifested with open repair of AAA. Secondly, the cost of an invasive surgery would be higher requiring more skilled healthcare providers, sterile rooms, and longer in-hospital recovery times. We have designed the delivery system to distribute a chosen therapeutic, MSC-seeded fibrin gels, to the periadventitial surface of the AAA. This will be accomplished through an ultrasonic guided translumbar injection.

### 6.1.3 Directed Homing of MSCs

Upon injection, the MSC-seeded fibrin gel is still a cell suspension in a viscous liquid. Gelation takes some time to complete and is tunable<sup>280</sup>. During the interval of time between injection and gelation, there is an opportunity, and possibly a necessity, to direct the injected cells to the periadventitial surface. Should the therapeutic MSCs become locked in the fibrin gel, any potential paracrine mechanism of action, which is demonstrated in Chapters 3 and 5, could be hindered if the MSCs are too far from the AAA wall.

Our proposed solution to this problem was to use magnetic attraction to concentrate the cells in a desired location. We borrowed a technique pioneered in imaging modalities using iron nanoparticles<sup>399-401</sup>. Loading cells with iron nanoparticles has since been used in the magnetic guidance of stem cells for preclinical testing of therapies for myocardial infarction<sup>402</sup> and retinal degeneration<sup>403</sup>, and we will adapt this approach for AAAs by loading iron nanoparticles inside our therapeutic cells. A magnetic probe can be introduced into the lumen of the AAA via femoral artery access. The magnetic attraction force between the magnetic probe and the iron nanoparticles will pull the iron nanoparticle loaded cells through the fibrin hydrogel to the periadventitial surface of the AAA.

# 6.1.4 Magnetic Probe Placement Considerations

The endoluminal magnetic probe needs adequate femoral access which is influenced by aortic and iliac tortuosity posing a challenge to accessing the AAA<sup>404</sup> The concept of tortuosity, an estimate of the arc to chord ratio, is often left to qualitative and subjective characterizations. Historically, there was no consensus on the best method of quantifying tortuosity and therefore

was not commonly done. Advances in computerized measurement techniques have led to an adoption of femoral artery tortuosity measurements which have demonstrated an increased rate of asymptomatic femoral dissections in more tortuous arteries<sup>405-408</sup>.

Though tortuosity measurements are helpful in determining the best course of therapy for a AAA patient<sup>409</sup>, the tortuosity of the femoral artery is often mitigated for EVAR patients by using an extra stiff guide wire, a "pull down" maneuver, and occasional implantation of a temporary graft sutured to the common iliac artery via a retroperitoneal approach. The "pull down" maneuver consists of dissecting the common femoral and external iliac arteries and pulling these arteries inferiorly to straighten the tortuosity<sup>410</sup>. Once straightened, a sheath (15-18 Fr [3Fr = 1mm]) is inserted to allow the graft probe to reach the desired location. We will borrow this technique and size our probe to fit inside a 15-18 Fr sheath.

The magnetic probe was designed to fit within an 18 Fr sheath in order to utilize the "pull down" technique when necessary. Additionally, the magnetic probe was designed such that it can be visualized using ultrasonic imaging by using solid metallic magnets. A prototype of the magnetic probe is shown in **Figure 30**.

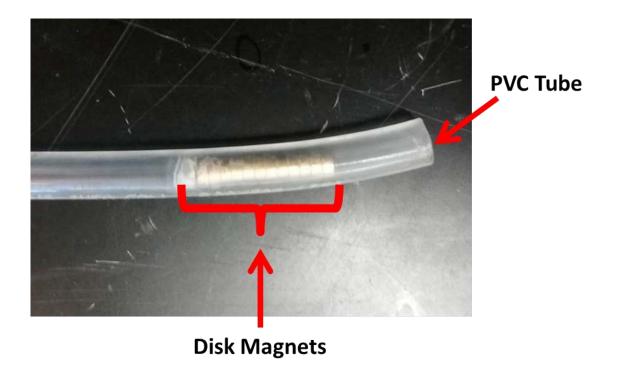


Figure 30. Magnetic probe designed to fit within an 18 Fr sheath. Disk magnets (1.5 mm height x 3 mm diameter) were glued to the inside of a clear PVC 5 mm outer diameter tube.

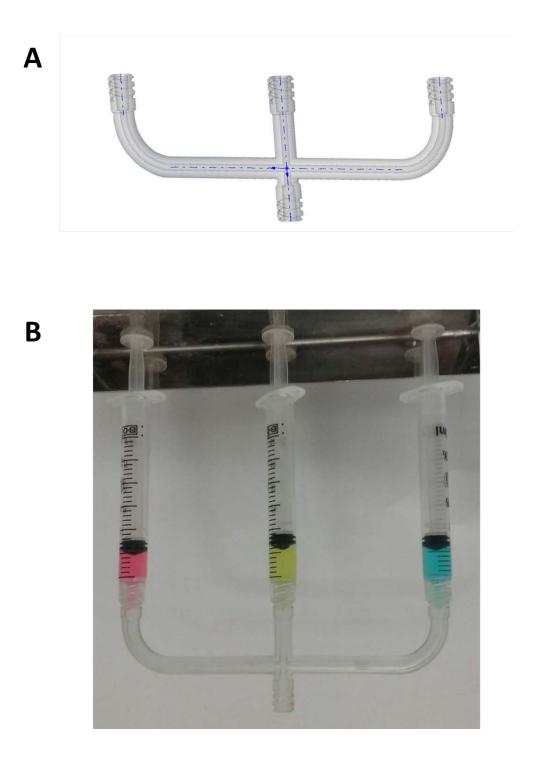
# 6.1.5 Cell Delivery Vehicle Material Considerations

We chose fibrin as our vehicle for cell delivery due to its ease of gelation and extensive track record of cell compatibility<sup>299,411-414</sup>. The use of a hydrogel will restrict the cells to the local aneurysmal aorta (providing a decreased risk of cells ending up in remote tissue beds compared to systemic delivery). Also, because of its temporal and thermal gelation properties, fibrin can be injected while still a liquid and gel inside the body at our desired location. Fibrin has already been approved by the Food and Drug Administration (FDA) in a number of applications under the tradenames TISSEEL, EVARREST, etc. However, it is important to note that the FDA does not broadly approve a specific material; rather they approve a material for a specific application.

The gelling nature of the fibrin requires that the constituents of the gel be mixed as close to injection as possible. Once mixed, the fibrin begins to gel, and the cells will have a harder time localizing to the periadventitial surface of the AAA as the gelation process proceeds even in the presence of a magnetic attraction force. In order to delay the gelation as long as possible and to remove any user error with respect to gelation, a delivery device needed to be designed such that the prescribed volumes of iron nanoparticle loaded therapeutic cells, fibrinogen, and thrombin solutions can only be mixed as the injection is occurring.

A cell delivery mixer was designed to accommodate three separate "Luer-Lok" syringes as inputs and a single "Luer-Lok" as output. The diameters of the tubes from each input "Luer-Lok" were also designed to ensure that the volumetric flow rate is constant for all three inputs. A 3D rendering of the cell delivery mixer is shown in **Figure 31**.

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**Figure 31. Cell delivery mixer designed to ensure gels are mixed only while injecting**. A) The three inputs (top) were designed to accommodate a "Luer-Lok" syringe. Equal volumes of the fibrinogen, thrombin, and iron nanoparticle loaded ADMSCs will be loaded into three separate syringes and dispensed at the same time through the single output (bottom). B) Fibrin gel constituent components loaded into a syringe and locked in the fibrin gel mixer. From left to right, the constituents are fibrinogen solution (pink), cell suspension (yellow), and thrombin solution (blue).

# 6.1.6 FDA Regulatory Considerations

The practical application of our MSC based AAA therapeutic would fall under the FDA category "combination product" designation. A combination product is defined by the FDA as "a product comprised of any combination of a drug and a device, a biological product and a device, a drug and a biological product, or a drug, device, and a biological product."<sup>415</sup> The FDA classifies these products differently as a precautionary measure due to interactions of the products being combined that may not be readily apparent. In our specific application, the delivery of our therapeutic is to a new location. The delivery location may make it "necessary to develop new methods to determine the effect of such localized/targeted delivery, particularly when it results in higher exposure to that target than when the drug is systemically administered."<sup>415</sup>

Additionally, the FDA would consider our product a cellular therapy (CT) which is grouped with gene therapy (GT) products and referred to collectively as CGT. The FDA is rightfully worried about the risks of CGT products. A previous trial showed tumors in the brain and spinal cord when a patient was treated with intrathecal allogeneic stem cells for ataxia telangiectasia<sup>416</sup>. This tragic outcome highlights the risky nature of CGT products.

It is their very nature that we are trying to harness for a therapeutic that makes CT products a unique, dynamic, and complex problem to address. The ADMSCs used in our therapy produce a number of beneficial growth factors such as TGF- $\beta 1^{194}$  in the context of treating AAA, but the ADSMC may also produce other undesirable growth factors that negatively affect the patient such as interluekin- $6^{417}$ , a pro-inflammatory cytokine. Additionally, the therapeutic cells, such as the ADMSCs used or our studies or MSCs in general, could also develop undesired functions such as a CT that was delivered to the heart which produced cardiomyocytes that were

beating out of sync<sup>418</sup>. Clearly, the FDA understands the risks associated with CT, and our AAA therapy will need to address those concerns.

#### 6.2 METHODS

#### 6.2.1 Cell Culture

For all cell-based experiments, commercially sourced human ADMSCs (Thermo Fisher Scientific, #R7788110) were cultured in 75-cm<sup>2</sup> or 175-cm<sup>2</sup> tissue culture flasks (Corning) and grown under defined culture media [1:1 Dulbecco's modified Eagle's medium (DMEM; Gibco #11965) to DMEM/F12 (Gibco #113300) with 10% fetal bovine serum (Atlanta Biologics #S11550), antibiotics (1% Pen/Strep, 0.5% Fungizone, 0.1% Gentamycin), and 10  $\mu$ L of 10 mM dexamethasone] mixed with 25% Preadipocyte Growth Medium (#C-27410, #C-39425; PromoCell). Culture media was changed every 2-3 days, and when ADMSCs were expanded to near confluence, they were passage expanded utilizing 0.25% trypsin-EDTA (#25200-056; Gibco) or utilized for subsequent experimentation. Cells were used between passages 6-10.

# 6.2.2 Iron Nanoparticle Loading Efficiency

Cell loading with iron nanoparticles (fluidMAG-D, Chemicell) was performed according to published protocols<sup>419,420</sup>. Briefly, ADMSCs were incubated overnight with 0.5 mg/mL nanoparticles (100 or 200 nm diameter) in growth medium. Cells were also loaded with a 0.25 mg/mL and 1.00 mg/mL iron nanoparticles, and loading efficiency was calculated as the total

number of cells containing iron nanoparticles (identified by staining described in Section 6.2.8) per view divided by the total number of cells per view (n=3 per group, 3 images per n).

#### 6.2.3 Fibrin Gel Fabrication

All experiments using ADMSC-seeded fibrin constructs were fabricated by mixing bovine fibrinogen type I (3 mg/mL or 10 mg/mL, Sigma-Aldrich, St. Louis MO) with bovine thrombin (1 NIHU/mL, Sigma-Aldrich, St. Louis, MO) and ADMSC cell suspension  $(5.0 \times 10^4 \text{ cells/gel}, 1.0 \times 10^5 \text{ cells/gel}, and 2.0 \times 10^5 \text{ cells/gel})$ . The gels were plated within 24-well plates (Corning). Gels were either allowed to polymerize for at least 2 hours in incubator conditions (37°C, 5% CO2) or handled immediately before adding ADMSC culture media for the viability (Section 6.2.4) and migration assays (Section 6.2.5), respectively. The gels were then cultured in incubator conditions according to the treatment condition.

#### 6.2.4 Cell Viability

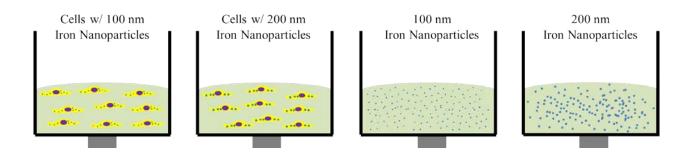
In order to determine the optimal fibrin gelation parameters for ADMSC viability, the ADMSC viability of ADMSC-seeded fibrin constructs was evaluated using an MTT assay. After 5 days in culture, 200 mL of serum-free  $\alpha$ -MEM and 20 mL of Thyazolyl Blue Tetrazolium Bromide (Sigma–Aldrich, St. Louis, MO) was added to each sample. Samples were then incubated at 37°C for four hours to allow crystal formation. The supernatant volume was then carefully removed and 200 µL of 0.04N HCl in 2-propanol solution was added to dissolve the crystals. Samples were kept in the dark at 4°C for 24 hours. Lastly, absorbance readings were taken for 100 µL of the solution for each condition at 550 nm wavelength using a microplate

reader (BioTek, Winooski, VT). The final number of cells was calculated using a standard curve generated for known cell concentrations.

#### 6.2.5 Magnetic Migration

In order to determine the localization effects of short term magnetic stimulation, ADMSCs were loaded with iron nanoparticles (100 and 200 nm diameter) and seeded in a fibrin gel. Fibrin gels were also formed with iron nanoparticles only (100 and 200 nm diameter). The gels were plated in a 24-well plate. A magnet (0.3T) was placed under the 24-well plate in the center of each well. In order to determine the temporal effects of magnetic stimulation of an actively gelling construct, a magnet was put in place at three different time points: at the beginning of gelation (prior to gel plating), mid gelation (20 seconds after gel plating), and after complete gelation (10 minutes after gel plating). Gels were also plated without magnet placement as a control. A side view schematic of the experimental groups is shown in **Figure 32**. The gels were cultured in incubator conditions (37 C, 5% CO2) for 24 hours. The gels were then imaged from above to qualitatively assess the localization of the iron nanoparticles.

In order to determine the localization effects of long term magnetic stimulation, gels made from cells loaded with 200 nm iron nanoparticles and magnet placement at mid gelation were cultured for 5 days. We added an additional magnet size to the longer term culture experiments. The larger magnet had a greater pull strength (12 lbs. vs. 4 oz.), but the same magnetic field surface strength (0.3 T).



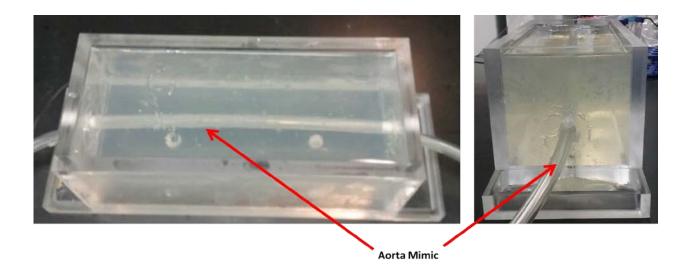
**Figure 32. Fibrin gel schematic and groups**. Fibrin gels are shown in green. Cells are yellow with purple nucleus. Iron nanoparticles are shown in blue. Experimental groups from left to right are: cells with 100 nm iron nanoparticles, cells with 200 nm iron nanoparticles, 100 nm iron nanoparticles alone, 200 nm iron nanoparticles alone.

#### 6.2.6 Fibrin Gel Mixer Performance

In order to determine how effectively our fibrin gel mixer was able to create a uniform distribution of cells within an ADMSC-seeded fibrin construct, ADMSC-seeded fibrin constructs were made by utilizing the fibrin gel mixer described in Section 6.1.5. Equal volumes of a fibrinogen solution (9 mg/mL), thrombin solution (3 NIHU/mL), and ADMSC cell suspension (7.5x10<sup>5</sup> cells/mL), were loaded into separate 3mL syringes and attached to the fibrin gel mixer. 400 µL gels were plated in 24-well plates using the fibrin gel mixer. Three groups of gels were made by rotating the fibrin gel component solutions (fibringen, thrombin, and cell suspension) syringes through the three fibrin gel mixer inputs. The three groups (n=3 per group) were named as follows: 1) Left - cell suspension in the left input, fibringen solution in the center input, and thrombin solution in the right input, 2) Center - cell suspension in the center input, fibrinogen solution in the right input, and thrombin solution in the left input, and 3) Right - cell suspension in the right input, fibrinogen solution in the left input, and thrombin solution in the center input. A control group was also made by mixing the components thoroughly by manual pipetting before plating. Samples were allowed to gel for 2 hours before being processed for nuclei imaging as described in Section 6.2.8. Three random square views (~thickness of gel x thickness of gel) of each gel were processed in ImageJ by fitting ellipses to nuclei. The average distance from each nucleus to all other nuclei is each image was calculated for each group. An additional qualitative mixing experiment is described and results are shown in 231.

# 6.2.7 Magnetic Probe Ultrasound Identification

In order to show that the magnetic probe portion of the cell delivery system described in Section 6.1.4 is visible by ultrasonic imaging, the magnetic probe prototype was imaged within a tissue mimic using a 21 MHz ultrasound linear probe (MS 250) connected to a high frequency imaging system (Vevo2100, Visualsonics, Canada) in B-scan mode. The tissue mimic, shown in **Figure 33**, was made from a 2% gelatin solution contained within a Plexiglas chamber with a clear PVC tube running the length of the chamber to serve as an aorta mimic. The tube was approximately 3 inches from the top of the tissue mimic. Ultrasound images of the aorta mimic were captured with and without the magnetic probe in place and processed to highlight the magnetic probe.



**Figure 33. Tissue mimic used for ultrasonic identification of magnetic probe.** A Plexiglas chamber houses a 2% gelatin gel and a clear PVC tube to serve as tissue and aorta mimics, respectively.

# 6.2.8 Histology and Imaging

All samples collected for imaging were fixed in 4% paraformaldehyde, frozen, and sectioned. Sections were stained with Prussian Blue stain for iron and DAPI to show nuclei. Images of sections were taken looking at the z-radial plane and taken from the middle of the gel. All sectioned samples were imaged using NIS Elements software (version 4.0).

# 6.2.9 Statistics

A linear regression model was used to determine significant predictors for the cell viability experiments. All other statistics were performed in a similar manner to Section 3.2.7 ("Statistics").

# 6.3 **RESULTS**

#### 6.3.1 Optimal Iron Nanoparticle and Fibrin Gel Parameters

When preforming the iron nanoparticle loading efficiency experiments, we found that  $\sim$ 52% of cells had iron nanoparticles (**Figure 34**), and a one-way ANOVA revealed that the tested concentrations of iron nanoparticles had no effect on loading efficiency (p=0.495). A linear egression revealed that fibrinogen concentration (p<0.001), starting cell number (p<0.001), and a mixed effect term of fibrinogen concentration and starting cell number

(p=0.006) to be significant predictors of the ratio of viable cells to initial cells plated. These results are shown in **Figure 35**. Lower fibrinogen and plated cell concentrations lead to higher ratios of viable cells to initial cells plated. However, only fibrinogen concentration is a significant predictor (p<0.001) of total number of cells after 5 days in culture (**Figure 36**).

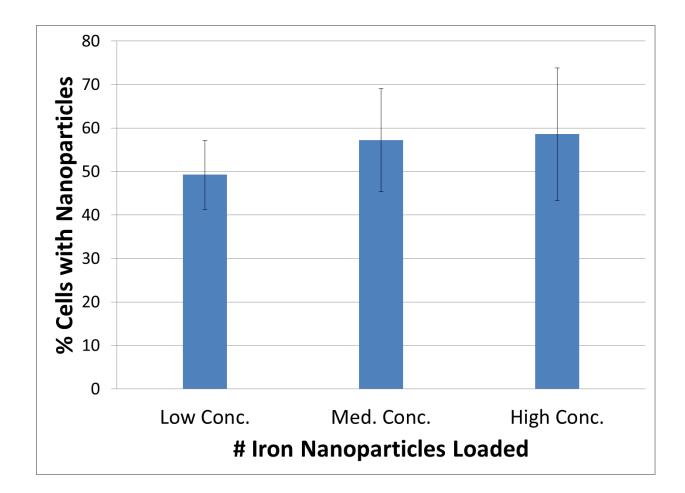


Figure 34. Iron nanoparticles load at the same efficiency at all tested iron nanoparticle concentrations. The percentage of cells staining positive for iron nanoparticles was  $49.3\pm7.9$ ,  $57.2\pm11.9$ ,  $58.6\pm15.2$  (mean $\pm$ SD) for the low (0.25 mg/mL), medium (0.50 mg/mL), and high (1.00 mg/mL) concentration of iron nanoparticles, respectively. The percentage of cells with positive staining for iron nanoparticles is shown on the y-axis. The iron nanoparticle concentration groups are labeled on the x-axis.

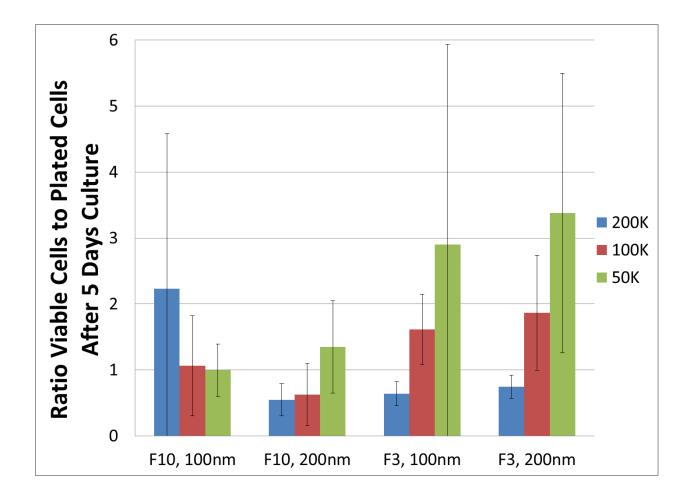
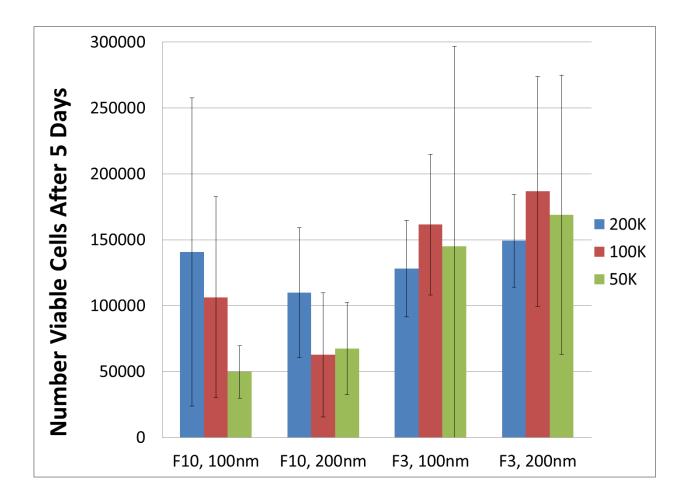


Figure 35. Fibrinogen concentration, starting cell number and a mixed effect term of fibrinogen concentration and starting cell number are significant predictors of ratio of viable cells to plated cells after 5 days in culture. The ratio of viable cells to plated cells after 5 days in culture is shown on the y-axis. The fibrinogen concentration (F3 = 3mg/mL, F10 = 10 mg/mL) and iron nanoparticle size groups are labeled on the x-axis. The starting cell number is labeled with blue ( $2.0x10^5$ ), red ( $1.0x10^5$ ) and green ( $5.0x10^4$ ).



**Figure 36. Fibrinogen concentration is a significant predictor of number of viable cells after 5 days in culture.** The number of viable cells after 5 days in culture is shown on the y-axis. The fibrinogen concentration (F3 = 3mg/mL, F10 = 10 mg/mL) and iron nanoparticle size groups are labeled on the x-axis. The starting cell number is labeled with blue ( $2.0x10^5$ ), red ( $1.0x10^5$ ) and green ( $5.0x10^4$ ).

#### 6.3.2 In-vitro Magnetic Force Induced Cell Localization

We assessed the ability of magnetic attractive forces between a magnet and iron nanoparticles to move cells through a fibrin hydrogel. This ability was tested in short and long term studies. The results of the short term study are shown in **Figure 37**. We found that cells loaded with iron nanoparticles were unable to be pulled through a fibrin hydrogel when the localizing magnetic field was introduced 20 seconds after plating the gel. This was not the case in the experimental group that did not include cells as iron nanoparticles were still able to localize over the magnet at the 20 second time point but were unable to localize at the 10 minute time point. Though the pictures shown in **Figure 37** were taken one day after plating the gels, all groups looked the same shortly after placement of the magnet.

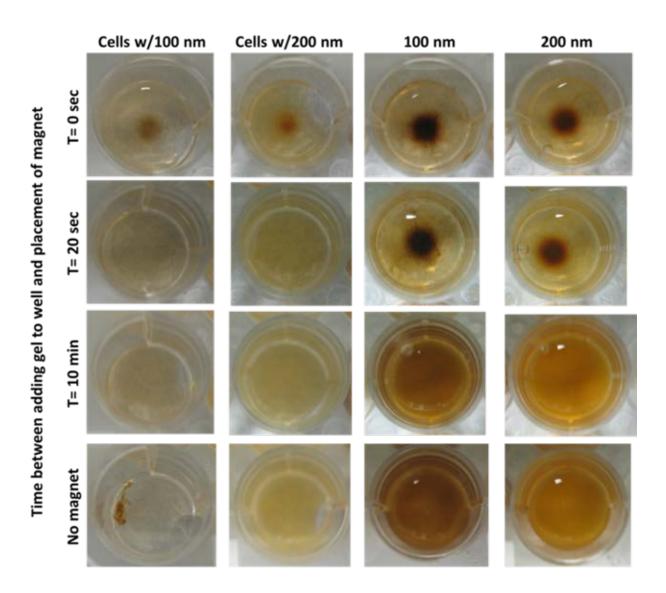
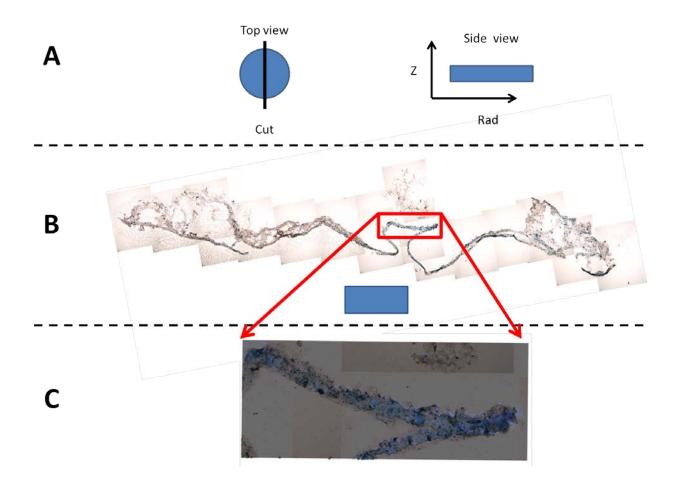


Figure 37. The attractive force between iron nanoparticle and magnets can move cells and iron nanoparticles through a fibrin gel before gelation is complete. Iron nanoparticles appear brown within a fibrin gel 24 hours after plating. Columns are labeled with experimental group. Rows are labeled with time of magnet placement with respect to plating.

Since we determined that acute magnetic exposure was unable to localize the cells within the fibrin hydrogel, we wanted to determine whether long term magnetic exposure could accomplish the task. When exposed to a magnetic field for five days in culture, cells loaded with iron nanoparticles localized over the source of the magnetic field. **Figure 38B** shows a cross section of a fibrin gel exposed to a small diameter magnet for five days that has been stained with Prussian Blue and DAPI. There is compression of the fibrin gel in the area directly over the magnet. **Figure 38C** shows a blowup of the red rectangle in **Figure 38B** for the Prussian Blue stain, DAPI and merged channels from top to bottom respectively.

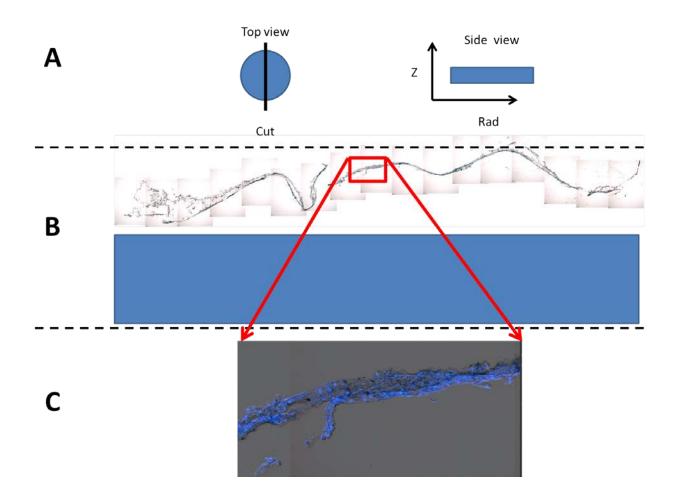


#### Figure 38. ADMSCs loaded with iron nanoparticles localize towards a small magnet after five days in culture.

A) Schematic of how circular gels were sectioned and imaged. The circular gel was cut in half, and then sections were made across the z-radial plane. B) The gel has been stained with Prussian Blue dye to identify iron nanoparticles. The lower blue rectangle represents the relative position and size of the magnet to the gel during culture. The red boxis the area that is magnified in panel C which shows the DAPI and Prussian Blue stain merged.

Figure 39B shows a cross section of a fibrin gel exposed to a large diameter magnet for five days that has been stained with Prussian Blue and DAPI. There is a compression of the fibrin gel over nearly the entire gel which is approximately the same size as the large magnet. Figure 39C shows a blowup of the red rectangle in Figure 39B for the merged Prussian Blue and DAPI channels.

**Figure 40** shows a Prussian Blue and DAPI stain of an ADMSC seeded gel loaded with iron nanoparticles that was cultured for 5 days without any magnet in place. There is a small accumulation of cells along the bottom of the gel, but the gel remains thicker than the counterparts shown in **Figure 38 & Figure 39**. **Figure 41** shows a DAPI stain of an ADMSC seeded gel that had not been loaded with iron nanoparticles. The gel was cultured for 5 days with the large magnet in place. The gel is thicker and less dense in appearance compared to the iron nanoparticle loaded counterpart in **Figure 39**.



**Figure 39. ADMSCs loaded with iron nanoparticles localize towards a large magnet after five days in culture**. A) Schematic of how circular gels were sectioned and imaged. The circular gel was cut in half, and then sections were made across the z-radial plane. B) The gel has been stained with Prussian Blue dye to identify iron nanoparticles. The lower blue rectangle represents the relative position of the magnet to the gel during culture. The red box is the area that is magnified in panel C which shows the DAPI and Prussian Blue stain merged.

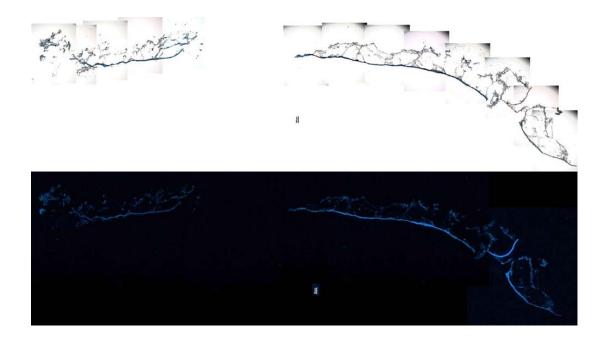


Figure 40. ADMSCs loaded with iron nanoparticles accumulate at the bottom of the wells after five days in culture. Prussian Blue and DAPI are shown in top and bottom pictures, respectively for the ADMSC iron nanoparticle loaded gel cultured without a magnet in place.

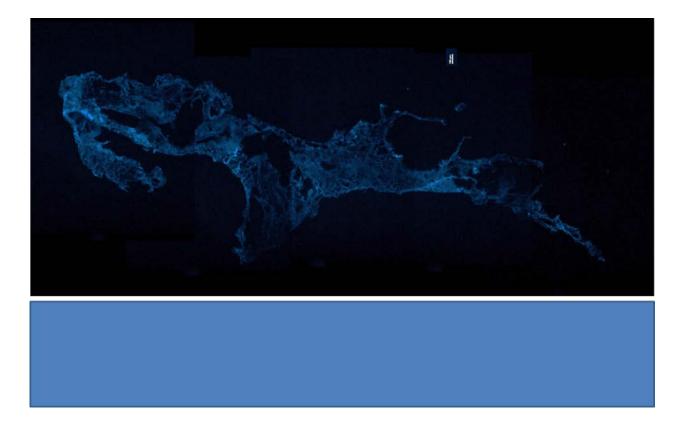
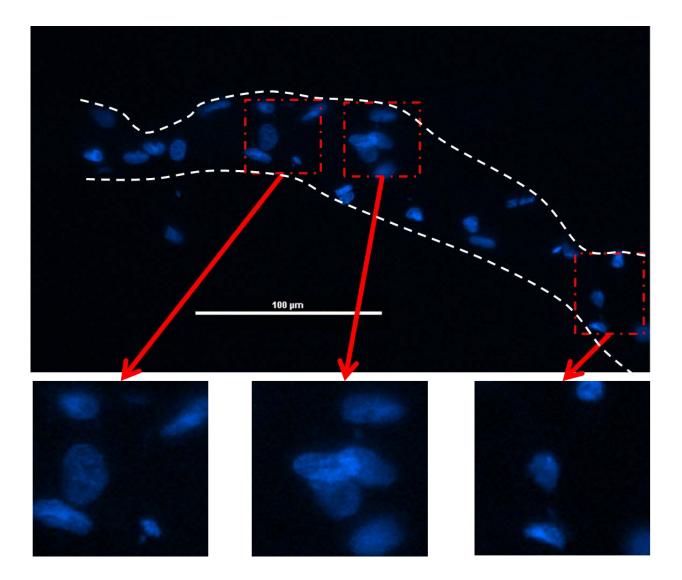


Figure 41. ADMSCs without iron nanoparticles remain dispersed throughout the gel after five days in culture. DAPI stain for ADMSCs without iron nanoparticles when cultured for five days with a large magnet in place. The lower blue rectangle represents the relative position and size of the magnet to the gel during culture.

# 6.3.3 Cell Delivery Mixer Performance

A one-way ANOVA revealed that there was no statistical difference (p=0.587) between any of the tested groups (**Table 9**). The fibrin gel mixer was able to produce fibrin gels that had a similar cell distribution throughout the gel compared to gels that were thoroughly mixed by manual pipetting. Also, the cell distribution was not dependent upon which input (Left, Center, or Right) that the cell suspension was attached to. A sample image of the DAPI stained nuclei from the control group is shown in **Figure 42**.



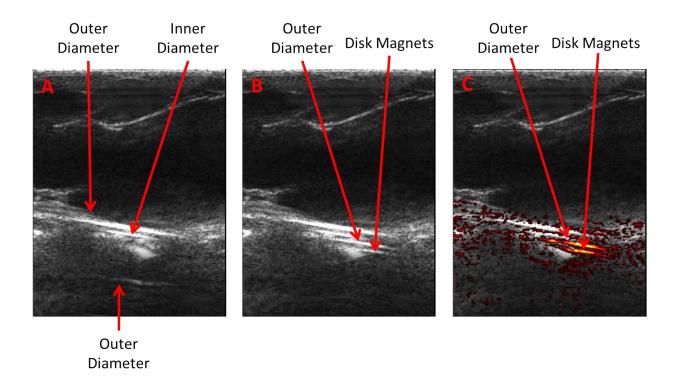
**Figure 42. ADMSC nuclei are distributed evenly throughout the fibrin gel.** The dashed white line in the top image indicates the outline of the fibrin gel. The red dashed boxes were randomly chosen for ImageJ ellipse fitting and distance measurement analysis of the blue, DAPI stained ADMSC nuclei.

**Table 9. All groups show a similar average distance between nuclei.** When fit with an ellipse, the average distance between centroid of each nucleus was  $52.4\pm4.5$  pixels for the control group,  $49.1\pm12.7$  pixels for the Left group,  $45.2\pm5.7$  pixels for the Center group, and  $53.0\pm3.5$  pixels for the Right group.

	Distance Between Nuclei ( mean ±SD, pixels)	
Control	52.4±4.5	
Left	49.1±12.7	
Center	45.2±5.7	
Right	53.0±3.5	
	p=0.587	

# 6.3.4 Magnetic Probe Ultrasound Identification

The ultrasonic images of the magnetic probe are shown in **Figure 43**. In **Figure 43A** the image was captured without the magnetic probe in place, and the anterior aortic mimic outer and inner diameters can be seen in the image. The posterior outer diameter can also be seen. In **Figure 43B**, the magnetic probe was brought into the field of view, and the anterior portion of the catheter and the magnets can be seen. The magnetic probe is highlighted in **Figure 43C** in red.



**Figure 43. The magnetic probe is visible within tissue and aorta mimics using ultrasonic imaging.** A) An ultrasonic image shows the aorta mimic within the tissue mimic. B) An ultrasonic image shows the magnetic probe within the aorta mimic. C) The same ultrasonic image from panel B is shown with the changes from panel A highlighted in red.

# 6.4 **DISCUSSION**

We saw no statistical difference in iron nanoparticle loading efficiency amongst the tested concentrations. This result was not so surprising considering the manufacturer's recommended concentration is a general value to be used for all cell types, and conversations with the manufacturer revealed that loading efficiency will be dependent on cell type. While the lowest concentration tested may seem to be the best choice from a cost perspective, the middle concentration was chosen for all remaining experiments due to other groups maintaining good viability and differentiation potential using a similar concentration<sup>403,419,420</sup>.

Our own viability studies of cells within fibrin gels after five days in culture showed that total cell number and ratio of cells after five days in culture to plated cells were not dependent on the size of iron nanoparticle used which is in agreement with other published studies<sup>403,419-421</sup>. Our viability experiments did show fibrinogen concentration to be a significant predictor of both total cell number and ratio of cells after five days in culture to plated cells, and our total cell numbers are consistent with other published studies<sup>267,269,411</sup>. Starting cell concentration and a cross talk term between starting cell concentration and fibrinogen concentration were also significant predictors of ratio of cells after five days in culture to plated cells. When taken together, the increases in cell number are largely dependent on the amount of free space within the fibrin gels. This can partially explain the difference in starting cell concentration being a significant predictor of the ratio of cells after five days in culture to plated cells but not of the total cell number. This knowledge can also be used to manipulate a potential cell therapy. The fibrinogen concentration should be kept high if cell division is undesired. Conversely, if cell division is desired, then fibrinogen and starting cell concentration should be kept low. In our application, cell division is undesirable since we want the ADMSCs producing the growth factor

profile shown at confluence<sup>194</sup>. However, we also desire a lower fibrinogen concentration so that the cells can more easily move towards the magnet. A compromise for our application would be using a high cell concentration with a low fibrinogen concentration.

Using the combination of fibrin gels and iron nanoparticles seem to have no negative effects on our therapeutic ADMSCs in terms of viability. However, we still needed to determine if using the fibrin and iron nanoparticles would allow for the migration or movement of the therapeutic ADMSCs through the fibrin gel to the periadventitial surface of the AAA. Our short term experiments show that ADMSCs loaded with iron nanoparticles contained in a fibrin gel will move through the fibrin gel solution to a magnetic field source if the fibrin has not completely gelled. It is important to note that forming fibrin gels in the presence of an external magnetic field will produce an anisotropic gel that is aligned in the direction of the magnetic field<sup>422-424</sup>. This effect may be partially responsible for the increased localization of cells and iron nanoparticles near the magnet in the gels which were plated in the presence of a magnetic field.

Our long term experiments show that ADMSCs loaded with iron nanoparticles contained in a fibrin gel will move to a magnetic field source even after the fibrin has gelled to an appreciable amount. The movement in the long term experiments seems to be due to compression of the fibrin gel rather than movement of the cells through the gel. This is apparent in **Figure 38 & Figure 39** which shows compacted gels directly over the external magnet while **Figure 41** shows that ADMSCs without iron nanoparticles within a fibrin gel do not compact over an external magnet. The gel remains "fluffy" in this case. Others have had success when using externally applied magnetic fields in attempts to localize cells or drugs that have incorporated iron nanoparticles<sup>402,403</sup>. The hardware elements of the cell delivery system, the fibrin gel mixer and the magnetic probe, achieve the design criteria goals. The fibrin gel mixer was able to produce fibrin gels with a uniform ADMSC distribution as shown in **Table 9**. The magnetic probe prototype was successfully imaged through tissue and aorta mimics using ultrasonic imaging.

While we largely saw movement of iron nanoparticle loaded ADMSCs toward our magnet, we must evaluate our product through the lens of the FDA, and there are important questions the FDA raises when considering CTs. For example, the FDA has explicitly expressed concerns<sup>425</sup> about cell migration. When delivered systemically, CTs could end up in a variety of tissues. This has been seen even when cells delivered to a specific tissue or organ eventually migrate to unintended locations<sup>426</sup>. Our system has been designed to localize our CT and keep it in place. The FDA also highlights that concerns about autologous vs. allogeneic cells. We also share this concern. While using autologous cells is certainly possible in our therapy, we have concerns about the efficacy of cells derived from older patients<sup>326,327,427</sup>.

The FDA also highlights concerns regarding combination products<sup>415</sup> recommending that researchers consider the scientific and technical issues raised by the combination product and its constituents. Once considered, the study design to address these concerns should be performed using proper statistical consideration to evaluate the combination product without duplication or redundancy so that development is streamlined. Careful attention should be paid when constituents are mixed and produced as a single entity because there could now be a broader range of potential, unintended interactions. The FDA has additional concerns that particularly apply to our system. "A new device used to deliver a drug/biologic to a new area of the body that was previously inaccessible might make it necessary to develop new methods to determine the effect of such localized/targeted delivery, particularly when it results in higher exposure to that

target than when the drug is systemically administered. Likewise, innovative technologies such as nanotechnology or live cellular products may lead to the development of new manufacturing methodologies or unique safety issues not associated with products manufactured in other ways."<sup>415</sup> The nature of our system, a combination product and CT, does present additional hurdles to clear before gaining FDA approval. However, the current design and subsequent design iterations are made with the FDA guidelines in mind.

Utilizing our therapeutic cell delivery system, patients could avoid the mortality risks associated with open AAA repair and avoid the secondary complications associated with endovascular repair. Our therapy may lower the total number of MRI or CT scans that surgeons use to monitor the growth rate and size of AAAs.

Treating the disease early may also have other intangible quality-of-life benefits. When patients are diagnosed with the disease and told how the disease progresses, they (as well as their families) can feel stressed about having a "ticking time bomb" in their abdomen. Providing a viable therapy shortly after diagnosis should alleviate anxiety over the disease.

In addition to these non-tangible benefits, we have provided a pro forma cost analysis of our proposed therapy in **Table 10** that highlights the potential cost savings benefits. Our therapy will attempt to carve out a space in the huge healthcare cost burden that is AAA repair. The burden is over \$2.125 billion dollars per year (50,000 annual patients \* \$85,000 total 2 year costs<sup>119</sup>). If only a third of patients gained enough therapeutic benefit through our treatment to avoid the need for surgical repair, \$458 million dollars could be removed from the US healthcare burden each year (\$2.125 billion /3 – 50,000 patients \* \$5,000 per patient for our therapy).

Table 10. Proforma cost of proposed interventional stem cell treatment for AAA. The projected costs of our proposed therapy are broken down by the device and the administration of the treatment.

Proposed Production Costs Cell Delivery System		
Cells	\$1,000	
Licensed fibrin product (EVARREST)	\$500	
Syringes	\$10	
Solution mixer & dispenser	\$20	
Delivery needle	\$40	
Magnetic catheter	\$100	
Nanoparticles	\$30	
Subtotal	\$1,700	
Location and Administration Costs		
Hospital room	\$2,500	
Medical technician (catheter)	\$400	
Ultrasound technician	\$400	
Subtotal	\$3,300	
Total	\$5 <i>,</i> 000	

# 6.5 CONCLUSION

Individual aspects of the cell delivery system were tested with respect to their promise for the future clinical translation of the technology. Iron nanoparticle loading efficiency in ADMSCs was approximately 52% when loading the manufacturer recommended amount of iron nanoparticles and ±50% of manufacturer recommended amount of iron nanoparticles. Fibrinogen concentration was a significant predictor of cell viability in iron nanoparticle loaded, ADMSCseeded, fibrin gels. Acute magnetic mediated movement of iron nanoparticle loaded cells only happened before complete gelation of fibrin gels. Longer term exposure to a magnetic field source. The fibrin gel mixer was able to produce gels with uniformly distributed ADMSCs. The magnetic probe was able to be detected using ultrasonic imaging.

#### 6.6 FUTURE WORK

Iterative prototyping of the cell delivery mixer and bench side testing of the device needs to be performed and is currently underway. These experiments will precede large animal studies testing the efficacy of the system.

The FDA pathway for approval of this system will likely be either an Investigational New Drug (IND) or an Investigational Device Exemption (IDE). Trial design, sample size, statistical methods, clinical endpoints, appropriate number of clinical studies, and appropriate indications/claims will all need to be determined. Since our system has a device constituent part, we will need to evaluate the human factors of device use on the safety and effectiveness of the combination product. These studies will help us understand how users operate the system in realistic, stressful conditions. Lastly, manufacturing, scale-up, and quality management need to be considered and studied with respect to both premarket development and postmarket regulation.

#### 7.0 STUDY SUMMARY

The following sections will summarize the key findings presented within this dissertation, discuss the future directions of each Aim, and present my scientific accomplishments achieved through this work.

# 7.1 SUMMARY OF RESULTS

# 7.1.1 Specific Aim 1

In Aim 1, we sought to prove that adult, human SMCs could produce elastin fibers when co-cultured with ADMSCs and that elastin production was able to slow the expansion of a AAA in a computational model. In Aim 1-1 we showed that ADMSCs in co-culture in with adult SMCs stimulate elastic fiber production in a 3D fibrin gels. This novel finding lends credence to using ADMSCs as a pro-elastogenic therapy for treating AAAs.

In Aim 1-2 we showed that elastin production within an aneurysm could relieve the maladaptive mechanical environment to an extent that slows aneurysmal enlargement within a computational model of AAA G&R. Early intervention can reduce the enlargement rate by more than 50%, delaying delay the need for surgical intervention by 10 years<sup>385</sup>. These findings also

confirm our thoughts that regeneration of functional elastic fibers in a AAA could help slow the progression of the disease.

#### 7.1.2 Specific Aim 2

In Aim 2, we sought to prove that periadventitial ADMSC treatment to an established, expanding, murine elastase perfused AAA could halt dilation of the artery. Indeed, we have developed an animal model for delayed, periadventitial delivery of ADMSCs to ameliorate elastase-induced AAA. Delayed, periadventitial delivery of ADMSCs halted two aspects of aneurysm progression – expansion of the aortic diameter and fragmentation of the elastic lamella. This work represents an important step towards developing clinically realistic stem cell therapies for AAA patients.

#### 7.1.3 Specific Aim 3

In Aim 3 we sought to design and test key aspects of a cell delivery system for treating AAAs. We utilized iron nanoparticles, magnets, and fibrin hydrogel to localize the delivery of therapeutic cells to a desired location. We found the following: 1) Iron nanoparticle loading efficiency in ADMSCs is approximately 52% when loading the manufacturer recommended amount of iron nanoparticles and  $\pm$ 50% of manufacturer recommended amount of iron nanoparticles. 2) Fibrinogen concentration is a significant predictor of cell viability in iron nanoparticle loaded, ADMSC seeded, fibrin gels. 3) Acute magnetic mediated movement of iron nanoparticle loaded cells only happens before complete gelation of fibrin gels. 4) Longer term

exposure to a magnet will cause the iron nanoparticle loaded ADMSCs to compress fibrin gels locally over a magnetic field source. 5) Our fibrin gel mixer was able to make gels with a uniform distribution of ADMSCs. 6) Our magnetic probe was able to be imaged through tissue and aorta mimics via ultrasound.

### 7.2 SUMMARY OF ACCOMPLISHMENTS

The work of this dissertation has led to the generation of the following scientific manuscripts:

- 1. **Blose KJ**, Pichamuthu JE, Weinbaum JS, Vorp DA. "Design and validation of a vacuum assisted anchorage for the uniaxial tensile testing of soft materials." Soft Materials 14.2 (2016)
- 2. **Blose KJ**, Ennis TL, Arif B, Weinbaum JS, Curci JA, Vorp DA. "Periadventitial adipose-derived stem cell treatment halts elastase-induced abdominal aortic aneurysm progression." Regenerative medicine 9.6 (2014)
- 3. **Blose KJ**, Weinbaum JS, Robertson AM, Vorp DA. "Stem Cell-Induced Elastin Production by Smooth Cells: In-Vitro Assessment and In-Silico Implications for Abdominal Aortic Aneurysm." [in preparation]

Additionally, a book chapter was written pertaining to the background material utilized in

this dissertation:

1. **Blose KJ**, Krawiec JT, Weinbaum JS, Vorp DA. "Chapter 15: Bioreactors for Tissue Engineering Purposes," *Regenerative Medicine Applications in Organ Transplantation, 1st Edition*. Giuseppe Orlando, ed. Academic Press, 2013.

Finally, multiple individual fellowships or grants were obtained by the author of this

dissertation or by undergraduates who were mentored by the author:

 F\_168-2016, "Minimally invasive delivery of therapeutic cells to abdominal aortic aneurysm" University of Pittsburgh Center for Medical Innovation Early-Stage Medical Technology Research and Development 2016 Pilot Funding Program [PI: Kory Blose]

- 2. NIH T32 EB000392, "Computationally Guided Development of Therapies for Abdominal Aortic Aneurysms", 9/2014-8/2016 [Training fellowship to Kory Blose]
- 3. NIH T32 HL076124, "Computational Simulation Model for Biomechanically-Guided Growth and Differentiation of Tissue Engineered Vascular Grafts", 2/2012-1/2014 [Training fellowship to Kory Blose]
- 4. Undergraduate Summer Research Internship Scholarship, Swanson School of Engineering (SSOE), University of Pittsburgh, 6/2011-8/2011 [Summer Fellowship to Huong Tran]

#### 7.3 FUTURE WORK

The future directions of this dissertation are discussed within each Aim due to the independent nature of those projects. For the discussion of future directions in Aim 1-1 see **Section 3.6**, for Aim 1-2 see **Section 4.5**, for Aim 2 see **Section 5.6**, and for Aim 3 see **Section 6.6**.

## **APPENDIX** A

## FEAP IMPLEMENTATION OF CONSTRAINED MIXTURE MODEL OF AAA G&R

FEAP Implementation:

! Parenthetical citations refer to a page number within the FEAP version 8.2 User Manual.

! batch mode.

! Control data (pg 24)

! All FEAP input files must begin with "FEAP" in either upper or lower case (here in lower case).

! The remaining characters are used for the problem title in the output file.

! The second record contains problem size information:

! (a) NUMNP number of nodal point

! (b) NUMEL number of elements

! (c) NUMMAP number of material property sets

! (d) NDM space dimension of mesh

! (e) NDF maximum number of unknowns per node

! (f) NEN maximum number of nodes per element

! NOTE that for the first 3 items are specified as ZERO (0) since FEAP can determine appropriate values

! from the data provided below (pg 25).

feap \*\* aortic aging

0 0 0 3 3 8

! We define the material as an elastic solid with a neo-Hookean strain energy function
! NOTE that this is not an incompressible material
material 1
! 1st material (adventitia)

solid	! Solid material			
finite	!,volume,2			
mixed	! Use Q1-P0 element			
uconst adve 1.0e8 1.	.25e5			
augment off				

```
material 2
                            ! 2nd material (media)
 solid
                            ! Solid material
 finite
                    !,volume,2
 mixed
                            ! Use Q1-P0 element
 uconst medi 1.0e8 1.25e5
 augment off
material 3
                            ! 3rd material (luminal surface)
 pressure
                            ! "pressure" elements
                            ! Loaded by parameter pr
 load,pr
 follower
                            ! Load pr "follows" the moving lumen
 finite
 augment off
! Set a parameter pr. This is the transmural pressure (Pa).
PARAmeter
pr = -1.239898026e4
! parameter for % baseline elastin degradation
pe = 7.5e-1
! Set parameter d. This is a displacement.
!d = 0.0
! Nodal coordinates in the global coordinate system (pg 26)
! N NG X_N Y_N Z_N
! N number of nodal point
! NG generation increment to next node
! when no coordinate generation is required, set to ZERO (0) (pg 28)
! X N value of x 1 coordinate
! Y_N value of x_2 coordinate
! Z_N value of x_3 coordinate
COORdinates
      0
             0.00000E+00 7.50000E-03 -3.00000E-02
1
2
      0
             0.000000E+00 7.700000E-03 -3.000000E-02
3
      0
             0.00000E+00 7.90000E-03 -3.00000E-02
4
      0
             0.000000E+00 8.100000E-03 -3.000000E-02
5
      0
             0.00000E+00 8.30000E-03 -3.00000E-02
6
      0
             0.000000E+00 8.500000E-03 -3.000000E-02
7
      0
             0.00000E+00 8.70000E-03 -3.00000E-02
8
      0
             0.00000E+00 8.90000E-03 -3.00000E-02
9
      0
             0.00000E+00 9.10000E-03 -3.00000E-02
10
      0
             0.00000E+00 9.30000E-03 -3.00000E-02
11
      0
             0.00000E+00 7.50000E-03 -2.623803E-02
12
      0
             0.000000E+00 7.700000E-03 -2.623803E-02
             0.00000E+00 7.90000E-03 -2.623803E-02
13
      0
14
      0
             0.000000E+00 8.100000E-03 -2.623803E-02
```

15	0	0.000000E+00 8.300000E-03 -2.623803E-02
15 16	0 0	0.000000E+00 8.300000E-03 -2.623803E-02 0.000000E+00 8.500000E-03 -2.623803E-02
10	0	0.000000E+00 8.300000E-03 -2.623803E-02 0.000000E+00 8.700000E-03 -2.623803E-02
	-	
18	0	0.000000E+00 8.900000E-03 -2.623803E-02
19 20	0	0.000000E+00 9.100000E-03 -2.623803E-02
20	0	0.000000E+00 9.300000E-03 -2.623803E-02
21	0	0.000000E+00 7.500000E-03 -2.268899E-02
22	0	0.000000E+00 7.700000E-03 -2.268899E-02
23	0	0.000000E+00 7.900000E-03 -2.268899E-02
24	0	0.000000E+00 8.100000E-03 -2.268899E-02
25	0	0.000000E+00 8.300000E-03 -2.268899E-02
26	0	0.000000E+00 8.500000E-03 -2.268899E-02
27	0	0.000000E+00 8.700000E-03 -2.268899E-02
28	0	0.000000E+00 8.900000E-03 -2.268899E-02
29	0	0.000000E+00 9.100000E-03 -2.268899E-02
30	0	0.000000E+00 9.300000E-03 -2.268899E-02
31	0	0.000000E+00 7.500000E-03 -1.934085E-02
32	0	0.000000E+00 7.700000E-03 -1.934085E-02
33	0	0.000000E+00 7.900000E-03 -1.934085E-02
34	0	0.000000E+00 8.100000E-03 -1.934085E-02
35	0	0.000000E+00 8.300000E-03 -1.934085E-02
36	0	0.000000E+00 8.500000E-03 -1.934085E-02
37	0	0.000000E+00 8.700000E-03 -1.934085E-02
38	0	0.000000E+00 8.900000E-03 -1.934085E-02
39	0	0.000000E+00 9.100000E-03 -1.934085E-02
40	0	0.000000E+00 9.300000E-03 -1.934085E-02
41	0	0.000000E+00 7.500000E-03 -1.618223E-02
42	0	0.000000E+00 7.700000E-03 -1.618223E-02
43	0	0.000000E+00 7.900000E-03 -1.618223E-02
44	0	0.000000E+00 8.100000E-03 -1.618223E-02
45	0	0.000000E+00 8.300000E-03 -1.618223E-02
46	0	0.000000E+00 8.500000E-03 -1.618223E-02
47	Ő	0.000000E+00 8.700000E-03 -1.618223E-02
48	0	0.000000E+00 8.900000E-03 -1.618223E-02
49	Ő	0.000000E+00 9.100000E-03 -1.618223E-02
50	0	0.000000E+00 9.300000E-03 -1.618223E-02
50 51	0	0.000000E+00 7.500000E-03 -1.320239E-02
52	0	0.000000E+00 7.700000E-03 -1.320239E-02
53	0	0.000000E+00 7.900000E-03 -1.320239E-02 0.000000E+00 7.900000E-03 -1.320239E-02
55 54	0	0.000000E+00 8.100000E-03 -1.320239E-02 0.000000E+00 8.100000E-03 -1.320239E-02
55	0	0.000000E+00 8.100000E+03 -1.320239E+02 0.000000E+00 8.300000E-03 -1.320239E-02
55 56	0	0.000000E+00 8.500000E-03 -1.320239E-02 0.000000E+00 8.500000E-03 -1.320239E-02
50 57	0	0.000000E+00 8.300000E-03 -1.320239E-02 0.000000E+00 8.700000E-03 -1.320239E-02
58	0	0.000000E+00 8.900000E-03 -1.320239E-02 0.000000E+00 0.100000E-03 -1.220230E-02
59	0	0.000000E+00 9.100000E-03 -1.320239E-02
60	0	0.000000E+00 9.300000E-03 -1.320239E-02

<i>c</i> 1	0		~
61	0	0.000000E+00 7.500000E-03 -1.039122E-02	
62	0	0.000000E+00 7.700000E-03 -1.039122E-02	
63	0	0.000000E+00 7.900000E-03 -1.039122E-02	
64	0	0.000000E+00 8.100000E-03 -1.039122E-02	2
65	0	0.000000E+00 8.300000E-03 -1.039122E-02	2
66	0	0.000000E+00 8.500000E-03 -1.039122E-02	2
67	0	0.000000E+00 8.700000E-03 -1.039122E-02	2
68	0	0.000000E+00 8.900000E-03 -1.039122E-02	2
69	0	0.000000E+00 9.100000E-03 -1.039122E-02	2
70	0	0.000000E+00 9.300000E-03 -1.039122E-02	2
71	0	0.000000E+00 7.500000E-03 -7.739181E-03	3
72	0	0.000000E+00 7.700000E-03 -7.739181E-03	3
73	Ő	0.000000E+00 7.900000E-03 -7.739181E-03	-
74	0	0.000000E+00 8.100000E-03 -7.739181E-03	
75	0	0.000000E+00 8.300000E-03 -7.739181E-03	-
76	0	0.000000E+00 8.500000E-03 -7.739181E-03	
70	0	0.000000E+00 8.700000E-03 -7.739181E-03 0.000000E+00 8.700000E-03 -7.739181E-03	-
	-		-
78 70	0		-
79	0	0.000000E+00 9.100000E-03 -7.739181E-03	
80	0	0.000000E+00 9.300000E-03 -7.739181E-03	-
81	0	0.000000E+00 7.500000E-03 -5.237254E-03	
82	0	0.000000E+00 7.700000E-03 -5.237254E-03	-
83	0	0.000000E+00 7.900000E-03 -5.237254E-03	
84	0	0.000000E+00 8.100000E-03 -5.237254E-03	3
85	0	0.000000E+00 8.300000E-03 -5.237254E-03	3
86	0	0.000000E+00 8.500000E-03 -5.237254E-03	3
87	0	0.000000E+00 8.700000E-03 -5.237254E-03	3
88	0	0.000000E+00 8.900000E-03 -5.237254E-03	3
89	0	0.000000E+00 9.100000E-03 -5.237254E-03	3
90	0	0.000000E+00 9.300000E-03 -5.237254E-03	3
91	0	0.000000E+00 7.500000E-03 -2.876945E-03	3
92	0	0.000000E+00 7.700000E-03 -2.876945E-03	3
93	0	0.000000E+00 7.900000E-03 -2.876945E-03	-
94	0	0.000000E+00 8.100000E-03 -2.876945E-03	
95	0 0	0.000000E+00 8.300000E-03 -2.876945E-03	
96	0	0.000000E+00 8.500000E-03 -2.876945E-03	
97	0	0.000000E+00 8.700000E-03 -2.876945E-03 0.000000E+00 8.700000E-03 -2.876945E-03	
98	0	0.000000E+00 8.900000E-03 -2.876945E-03	
99	0	0.000000E+00 9.100000E-03 -2.876945E-03 0.000000E+00 9.100000E-03 -2.876945E-03	
		0.000000E+00 9.100000E-03 -2.876945E-03 0.000000E+00 9.300000E-03 -2.876945E-03	
100	0		
101	0	0.000000E+00 7.500000E-03 -6.502386E-04	
102	0	0.000000E+00 7.700000E-03 -6.502386E-04	
103	0	0.000000E+00 7.900000E-03 -6.502386E-04	
104	0	0.000000E+00 8.100000E-03 -6.502386E-04	
105	0	0.000000E+00 8.300000E-03 -6.502386E-04	
106	0	0.000000E+00 8.500000E-03 -6.502386E-04	4

107	0	0.000000E+00 8.700000E-03	-6.502386E-04
108	0	0.000000E+00 8.900000E-03	-6.502386E-04
109	0	0.000000E+00 9.100000E-03	-6.502386E-04
110	0	0.000000E+00 9.300000E-03	-6.502386E-04
111	0	0.000000E+00 7.500000E-03	1.450428E-03
112	0	0.000000E+00 7.700000E-03	1.450428E-03
113	0	0.000000E+00 7.900000E-03	1.450428E-03
114	0	0.000000E+00 8.100000E-03	1.450428E-03
115	0	0.000000E+00 8.30000E-03	1.450428E-03
115	0	0.000000E+00 8.50000E-03	1.450428E-03
117	0	0.000000E+00 8.70000E-03	1.450428E-03
	-		
118	0	0.000000E+00 8.900000E-03	1.450428E-03
119	0	0.000000E+00 9.100000E-03	1.450428E-03
120	0	0.000000E+00 9.300000E-03	1.450428E-03
121	0	0.000000E+00 7.500000E-03	3.432189E-03
122	0	0.000000E+00 7.700000E-03	3.432189E-03
123	0	0.000000E+00 7.900000E-03	3.432189E-03
124	0	0.000000E+00 8.100000E-03	3.432189E-03
125	0	0.000000E+00 8.300000E-03	3.432189E-03
126	0	0.000000E+00 8.500000E-03	3.432189E-03
127	0	0.000000E+00 8.700000E-03	3.432189E-03
128	0	0.000000E+00 8.900000E-03	3.432189E-03
129	0	0.000000E+00 9.100000E-03	3.432189E-03
130	0	0.000000E+00 9.300000E-03	3.432189E-03
131	0	0.000000E+00 7.500000E-03	5.301774E-03
132	0	0.000000E+00 7.700000E-03	5.301774E-03
132	0	0.000000E+00 7.900000E-03	5.301774E-03
133	0	0.000000E+00 8.100000E-03	5.301774E-03
134	0	0.000000E+00 8.10000E-03	5.301774E-03
135	0	0.000000E+00 8.50000E-03	5.301774E-03
	-		
137	0	0.000000E+00 8.700000E-03	5.301774E-03
138	0	0.000000E+00 8.900000E-03	5.301774E-03
139	0		5.301774E-03
140	0	0.000000E+00 9.300000E-03	5.301774E-03
141	0	0.000000E+00 7.500000E-03	7.065534E-03
142	0	0.000000E+00 7.700000E-03	7.065534E-03
143	0	0.000000E+00 7.900000E-03	7.065534E-03
144	0	0.000000E+00 8.100000E-03	7.065534E-03
145	0	0.000000E+00 8.300000E-03	7.065534E-03
146	0	0.000000E+00 8.500000E-03	7.065534E-03
147	0	0.000000E+00 8.700000E-03	7.065534E-03
148	0	0.000000E+00 8.900000E-03	7.065534E-03
149	0	0.000000E+00 9.100000E-03	7.065534E-03
150	0	0.000000E+00 9.300000E-03	7.065534E-03
151	0	0.000000E+00 7.500000E-03	8.729459E-03
152	0	0.000000E+00 7.700000E-03	8.729459E-03
104	0		

153	0	0.000000E+00 7.900000E-03 8.729459E-03	
154	0	0.000000E+00 8.100000E-03 8.729459E-03	
155	0	0.000000E+00 8.300000E-03 8.729459E-03	
156	0	0.000000E+00 8.500000E-03 8.729459E-03	
157	0	0.000000E+00 8.700000E-03 8.729459E-03	
158	0	0.000000E+00 8.900000E-03 8.729459E-03	
159	Ő	0.000000E+00 9.100000E-03 8.729459E-03	
160	0	0.000000E+00 9.300000E-03 8.729459E-03	
161	0	0.000000E+00 7.500000E-03 8.727457E-03 0.000000E+00 7.500000E-03 1.029920E-02	
161	0	0.000000E+00 7.700000E-03 1.029920E-02 0.000000E+00 7.700000E-03 1.029920E-02	
-	-	0.000000E+00 7.90000E-03 1.029920E-02 0.000000E+00 7.900000E-03 1.029920E-02	
163	0		
164	0	0.000000E+00 8.100000E-03 1.029920E-02	
165	0	0.000000E+00 8.300000E-03 1.029920E-02	
166	0	0.000000E+00 8.500000E-03 1.029920E-02	
167	0	0.000000E+00 8.700000E-03 1.029920E-02	
168	0	0.000000E+00 8.900000E-03 1.029920E-02	
169	0	0.000000E+00 9.100000E-03 1.029920E-02	
170	0	0.000000E+00 9.300000E-03 1.029920E-02	
171	0	0.000000E+00 7.500000E-03 1.178009E-02	
172	0	0.000000E+00 7.700000E-03 1.178009E-02	
173	0	0.000000E+00 7.900000E-03 1.178009E-02	
174	Ő	0.000000E+00 8.100000E-03 1.178009E-02	
175	0	0.000000E+00 8.300000E-03 1.178009E-02	
176	0	0.000000E+00 8.500000E-03 1.178009E-02	
170	0	0.000000E+00 8.700000E-03 1.178009E-02 0.000000E+00 8.700000E-03 1.178009E-02	
177	0	0.000000E+00 8.700000E-03 1.178009E-02 0.000000E+00 8.900000E-03 1.178009E-02	
178	-		
	0	0.000000E+00 9.100000E-03 1.178009E-02	
180	0	0.000000E+00 9.300000E-03 1.178009E-02	
181	0	0.000000E+00 7.500000E-03 1.317715E-02	
182	0	0.000000E+00 7.700000E-03 1.317715E-02	
183	0	0.000000E+00 7.900000E-03 1.317715E-02	
184	0	0.000000E+00 8.100000E-03 1.317715E-02	
185	0	0.000000E+00 8.300000E-03 1.317715E-02	
186	0	0.000000E+00 8.500000E-03 1.317715E-02	
187	0	0.000000E+00 8.700000E-03 1.317715E-02	
188	0	0.000000E+00 8.900000E-03 1.317715E-02	
189	0	0.000000E+00 9.100000E-03 1.317715E-02	
190	0	0.000000E+00 9.300000E-03 1.317715E-02	
191	0	0.000000E+00 7.500000E-03 1.449513E-02	
192	0	0.000000E+00 7.700000E-03 1.449513E-02	
193	0	0.000000E+00 7.900000E-03 1.449513E-02	
194	0	0.000000E+00 8.100000E-03 1.449513E-02	
195	0	0.000000E+00 8.300000E-03 1.449513E-02 0.000000E+00 8.300000E-03 1.449513E-02	
196	0	0.000000E+00 8.500000E-03 1.449513E-02 0.000000E+00 8.500000E-03 1.449513E-02	
190 197	0	0.000000E+00 8.300000E-03 1.449513E-02 0.000000E+00 8.700000E-03 1.449513E-02	
197 198	0	0.000000E+00 8.700000E-03 1.449513E-02 0.000000E+00 8.900000E-03 1.449513E-02	
170	U	0.000000ET00 0.900000E-05 1.449315E-02	

199	0	0.000000E+00 9.100000E-03 1.449513E-02
200	0	0.000000E+00 9.300000E-03 1.449513E-02
201	0	0.000000E+00 7.500000E-03 1.573851E-02
202	0	0.000000E+00 7.700000E-03 1.573851E-02
203	0	0.000000E+00 7.900000E-03 1.573851E-02
204	0	0.000000E+00 8.100000E-03 1.573851E-02
205	0	0.000000E+00 8.300000E-03 1.573851E-02
206	0	0.000000E+00 8.500000E-03 1.573851E-02
207	0	0.000000E+00 8.700000E-03 1.573851E-02
208	0	0.000000E+00 8.900000E-03 1.573851E-02
209	0	0.000000E+00 9.100000E-03 1.573851E-02
210	0	0.000000E+00 9.300000E-03 1.573851E-02
211	Õ	0.000000E+00 7.500000E-03 1.691152E-02
212	Õ	0.000000E+00 7.700000E-03 1.691152E-02
213	Ő	0.000000E+00 7.900000E-03 1.691152E-02
213	0	0.000000E+00 8.100000E-03 1.691152E-02
214	0	0.000000E+00 8.300000E-03 1.691152E-02
215	0	0.000000E+00 8.500000E-03 1.691152E-02
210	0	0.000000E+00 8.700000E-03 1.691152E-02
217	0	0.000000E+00 8.70000E-03 1.691152E-02 0.000000E+00 8.900000E-03 1.691152E-02
-	-	
219	0	0.000000E+00 9.100000E-03 1.691152E-02
220	0	0.000000E+00 9.300000E-03 1.691152E-02
221	0	0.000000E+00 7.500000E-03 1.801812E-02
222	0	0.000000E+00 7.700000E-03 1.801812E-02
223	0	0.000000E+00 7.900000E-03 1.801812E-02
224	0	0.000000E+00 8.100000E-03 1.801812E-02
225	0	0.000000E+00 8.300000E-03 1.801812E-02
226	0	0.000000E+00 8.500000E-03 1.801812E-02
227	0	0.000000E+00 8.700000E-03 1.801812E-02
228	0	0.000000E+00 8.900000E-03 1.801812E-02
229	0	0.000000E+00 9.100000E-03 1.801812E-02
230	0	0.000000E+00 9.300000E-03 1.801812E-02
231	0	0.000000E+00 7.500000E-03 1.906209E-02
232	0	0.000000E+00 7.700000E-03 1.906209E-02
233	0	0.000000E+00 7.900000E-03 1.906209E-02
234	0	0.000000E+00 8.100000E-03 1.906209E-02
235	0	0.000000E+00 8.300000E-03 1.906209E-02
236	0	0.000000E+00 8.500000E-03 1.906209E-02
237	0	0.000000E+00 8.700000E-03 1.906209E-02
238	0	0.000000E+00 8.900000E-03 1.906209E-02
239	0	0.000000E+00 9.100000E-03 1.906209E-02
240	Õ	0.000000E+00 9.300000E-03 1.906209E-02
241	0	0.000000E+00 7.500000E-03 2.004696E-02
242	0	0.000000E+00 7.700000E-03 2.004696E-02
243	0	0.000000E+00 7.700000E-03 2.004096E-02 0.000000E+00 7.900000E-03 2.004696E-02
2 <del>4</del> 3 244	0	0.000000E+00 7.90000E-03 2.004096E-02 0.000000E+00 8.100000E-03 2.004696E-02
<u>∠</u> +++	U	0.000001100 0.1000001-03 2.0040701-02

245	0	0.000000E+00 8.300000E-03 2.004696E-02
243 246	0	0.000000E+00 8.500000E-03 2.004090E-02 0.000000E+00 8.500000E-03 2.004696E-02
240 247	0	0.000000E+00 8.300000E-03 2.004090E-02 0.000000E+00 8.700000E-03 2.004696E-02
248	0	0.000000E+00 8.700000E-03 2.004090E-02 0.000000E+00 8.900000E-03 2.004696E-02
248 249	0	0.000000E+00 8.900000E-03 2.004696E-02 0.000000E+00 9.100000E-03 2.004696E-02
249 250	0	0.000000E+00 9.100000E-03 2.004696E-02 0.000000E+00 9.300000E-03 2.004696E-02
250 251	-	
-	0	
252	0	0.000000E+00 7.700000E-03 2.097609E-02
253	0	0.000000E+00 7.900000E-03 2.097609E-02
254	0	0.000000E+00 8.100000E-03 2.097609E-02
255	0	0.000000E+00 8.300000E-03 2.097609E-02
256	0	0.000000E+00 8.500000E-03 2.097609E-02
257	0	0.000000E+00 8.700000E-03 2.097609E-02
258	0	0.000000E+00 8.900000E-03 2.097609E-02
259	0	0.000000E+00 9.100000E-03 2.097609E-02
260	0	0.000000E+00 9.300000E-03 2.097609E-02
261	0	0.000000E+00 7.500000E-03 2.185262E-02
262	0	0.000000E+00 7.700000E-03 2.185262E-02
263	0	0.000000E+00 7.900000E-03 2.185262E-02
264	0	0.000000E+00 8.100000E-03 2.185262E-02
265	0	0.000000E+00 8.300000E-03 2.185262E-02
266	0	0.000000E+00 8.500000E-03 2.185262E-02
267	0	0.000000E+00 8.700000E-03 2.185262E-02
268	0	0.000000E+00 8.900000E-03 2.185262E-02
269	0	0.000000E+00 9.100000E-03 2.185262E-02
270	0	0.000000E+00 9.300000E-03 2.185262E-02
271	0	0.000000E+00 7.500000E-03 2.267954E-02
272	0	0.000000E+00 7.700000E-03 2.267954E-02
273	0	0.000000E+00 7.900000E-03 2.267954E-02
274	0	0.000000E+00 8.100000E-03 2.267954E-02
275	0	0.000000E+00 8.300000E-03 2.267954E-02
276	0	0.000000E+00 8.500000E-03 2.267954E-02
277	0	0.000000E+00 8.700000E-03 2.267954E-02
278	0	0.000000E+00 8.900000E-03 2.267954E-02
279	0	0.000000E+00 9.100000E-03 2.267954E-02
280	0	0.000000E+00 9.300000E-03 2.267954E-02
281	ů	0.000000E+00 7.500000E-03 2.345966E-02
282	ů 0	0.000000E+00 7.700000E-03 2.345966E-02
283	0	0.000000E+00 7.900000E-03 2.345966E-02
284	0	0.000000E+00 8.100000E-03 2.345966E-02
285	0	0.000000E+00 8.300000E-03 2.345966E-02
285	0	0.000000E+00 8.500000E-03 2.345966E-02
280 287	0	0.000000E+00 8.700000E-03 2.345966E-02
287	0	0.000000E+00 8.700000E-03 2.345966E-02
280 289	0	0.000000E+00 8.90000E-03 2.343900E-02 0.000000E+00 9.100000E-03 2.345966E-02
289 290	0	0.000000E+00 9.100000E-03 2.345966E-02 0.000000E+00 9.300000E-03 2.345966E-02
290	U	0.000000E+00 9.300000E-03 2.343900E-02

291	0	0.000000E+00 7.500000E-03	2.419561E-02
292	0	0.000000E+00 7.700000E-03	2.419561E-02
293	0	0.000000E+00 7.900000E-03	2.419561E-02
294	0	0.000000E+00 8.100000E-03	2.419561E-02
295	0	0.000000E+00 8.300000E-03	2.419561E-02
296	0	0.000000E+00 8.500000E-03	2.419561E-02
297	0	0.000000E+00 8.700000E-03	2.419561E-02
298	0	0.000000E+00 8.900000E-03	2.419561E-02
299	Õ	0.000000E+00 9.100000E-03	2.419561E-02
300	0	0.000000E+00 9.300000E-03	2.419561E-02
301	Ő	0.000000E+00 7.500000E-03	2.488991E-02
302	0	0.000000E+00 7.700000E-03	2.488991E-02
302	0	0.000000E+00 7.90000E-03	2.488991E-02
303 304	0	0.000000E+00 7.90000E-03	2.488991E-02 2.488991E-02
	-		2.488991E-02 2.488991E-02
305	0		
306	0	0.000000E+00 8.500000E-03	2.488991E-02
307	0	0.000000E+00 8.700000E-03	2.488991E-02
308	0	0.000000E+00 8.900000E-03	2.488991E-02
309	0	0.000000E+00 9.100000E-03	2.488991E-02
310	0	0.000000E+00 9.300000E-03	2.488991E-02
311	0	0.000000E+00 7.500000E-03	2.554491E-02
312	0	0.000000E+00 7.700000E-03	2.554491E-02
313	0	0.000000E+00 7.900000E-03	2.554491E-02
314	0	0.000000E+00 8.100000E-03	2.554491E-02
315	0	0.000000E+00 8.300000E-03	2.554491E-02
316	0	0.000000E+00 8.500000E-03	2.554491E-02
317	0	0.000000E+00 8.700000E-03	2.554491E-02
318	0	0.000000E+00 8.900000E-03	2.554491E-02
319	0	0.000000E+00 9.100000E-03	2.554491E-02
320	0	0.000000E+00 9.300000E-03	2.554491E-02
321	0	0.000000E+00 7.500000E-03	2.616283E-02
322	0	0.000000E+00 7.700000E-03	2.616283E-02
323	0	0.000000E+00 7.900000E-03	2.616283E-02
324	0	0.000000E+00 8.100000E-03	2.616283E-02
325	Ő	0.000000E+00 8.300000E-03	2.616283E-02
326	0	0.000000E+00 8.500000E-03	2.616283E-02
320	0	0.000000E+00 8.700000E-03	2.616283E-02
328	0	0.000000E+00 8.90000E-03	2.616283E-02
328	0	0.000000E+00 9.100000E-03	2.616283E-02
		0.000000E+00 9.100000E-03 0.000000E+00 9.300000E-03	
330	0		2.616283E-02
331	0	0.00000E+00 7.50000E-03	2.674577E-02
332	0	0.000000E+00 7.700000E-03	2.674577E-02
333	0	0.000000E+00 7.900000E-03	2.674577E-02
334	0	0.000000E+00 8.100000E-03	2.674577E-02
335	0	0.000000E+00 8.300000E-03	2.674577E-02
336	0	0.000000E+00 8.500000E-03	2.674577E-02

227	0	
337	0	0.000000E+00 8.700000E-03 2.674577E-02
338	0	0.000000E+00 8.900000E-03 2.674577E-02
339	0	0.000000E+00 9.100000E-03 2.674577E-02
340	0	0.000000E+00 9.300000E-03 2.674577E-02
341	0	0.000000E+00 7.500000E-03 2.729572E-02
342	0	0.000000E+00 7.700000E-03 2.729572E-02
343	0	0.000000E+00 7.900000E-03 2.729572E-02
344	0	0.000000E+00 8.100000E-03 2.729572E-02
345	0	0.000000E+00 8.300000E-03 2.729572E-02
346	0	0.000000E+00 8.500000E-03 2.729572E-02
347	0	0.000000E+00 8.700000E-03 2.729572E-02
348	0	0.000000E+00 8.900000E-03 2.729572E-02
349	0	0.000000E+00 9.100000E-03 2.729572E-02
350	0	0.000000E+00 9.300000E-03 2.729572E-02
351	0	0.000000E+00 7.500000E-03 2.781454E-02
352	0	0.000000E+00 7.700000E-03 2.781454E-02
353	0	0.000000E+00 7.900000E-03 2.781454E-02
354	0	0.000000E+00 8.100000E-03 2.781454E-02
355	0	0.000000E+00 8.300000E-03 2.781454E-02
356	0	0.000000E+00 8.500000E-03 2.781454E-02
357	0	0.000000E+00 8.700000E-03 2.781454E-02
358	0	0.000000E+00 8.900000E-03 2.781454E-02
359	0	0.000000E+00 9.100000E-03 2.781454E-02
360	0	0.000000E+00 9.300000E-03 2.781454E-02
361	0	0.000000E+00 7.500000E-03 2.830400E-02
362	0	0.000000E+00 7.700000E-03 2.830400E-02
363	0	0.000000E+00 7.900000E-03 2.830400E-02
364	0	0.000000E+00 8.100000E-03 2.830400E-02
365	0	0.000000E+00 8.300000E-03 2.830400E-02
366	0	0.000000E+00 8.500000E-03 2.830400E-02
367	0	0.000000E+00 8.700000E-03 2.830400E-02
368	0	0.000000E+00 8.900000E-03 2.830400E-02
369	0	0.000000E+00 9.100000E-03 2.830400E-02
370	0	0.000000E+00 9.300000E-03 2.830400E-02
371	0	0.000000E+00 7.500000E-03 2.876574E-02
372	0	0.000000E+00 7.700000E-03 2.876574E-02
373	0	0.000000E+00 7.900000E-03 2.876574E-02
374	0	0.000000E+00 8.100000E-03 2.876574E-02
375	0	0.000000E+00 8.300000E-03 2.876574E-02
376	0	0.000000E+00 8.500000E-03 2.876574E-02
377	0	0.000000E+00 8.700000E-03 2.876574E-02
378	0	0.000000E+00 8.900000E-03 2.876574E-02
379	0	0.000000E+00 9.100000E-03 2.876574E-02
380	0	0.000000E+00 9.300000E-03 2.876574E-02
380 381	0	0.000000E+00 9.500000E-03 2.870574E-02 0.000000E+00 7.500000E-03 2.920135E-02
382	0	0.000000E+00 7.300000E-03 2.920135E-02 0.000000E+00 7.700000E-03 2.920135E-02
302	U	0.000000ET00 7.700000E-03 2.920133E-02

383	0	0.000000E+00		2.920135E-02
384	0	0.000000E+00		2.920135E-02
385	0	0.000000E+00	8.30000E-03	2.920135E-02
386	0	0.000000E+00	8.50000E-03	2.920135E-02
387	0	0.000000E+00	8.70000E-03	2.920135E-02
388	0	0.000000E+00	8.90000E-03	2.920135E-02
389	0	0.000000E+00	9.10000E-03	2.920135E-02
390	0	0.000000E+00	9.30000E-03	2.920135E-02
391	0	0.000000E+00 ´	7.50000E-03	2.961231E-02
392	0	0.000000E+00 ´	7.70000E-03	2.961231E-02
393	0	0.000000E+00 ´	7.90000E-03	2.961231E-02
394	0	0.000000E+00	8.10000E-03	2.961231E-02
395	0	0.000000E+00	8.30000E-03	2.961231E-02
396	0	0.000000E+00	8.50000E-03	2.961231E-02
397	0	0.000000E+00		2.961231E-02
398	0	0.000000E+00	8.90000E-03	2.961231E-02
399	0	0.000000E+00	9.10000E-03	2.961231E-02
400	0	0.000000E+00		2.961231E-02
401	Ő	0.000000E+00		3.000000E-02
402	0	0.000000E+00 /		3.000000E-02
403	0	0.000000E+00		3.000000E-02
404	0	0.000000E+00		3.000000E-02
405	0	0.000000E+00		3.000000E-02
406	0	0.000000E+00		3.000000E-02
407	0	0.000000E+00		3.000000E-02
408	0	0.000000E+00		3.000000E-02
409	0	0.000000E+00		3.000000E-02
410	0		9.30000E-03	3.000000E-02
410	0		7.485200E-03	-3.00000E-02
411	0		7.684806E-03	-3.00000E-02
412	0		7.884411E-03	-3.00000E-02
413	0		8.084017E-03	-3.00000E-02
414 415	•		8.084017E-03 8.283622E-03	-3.00000E-02
-	0		8.483227E-03	-3.00000E-02
416	0			
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419	0		9.079975E-03	-3.00000E-02
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422	0		7.684806E-03	-2.623803E-02
423	0		7.884411E-03	-2.623803E-02
424	0		8.084017E-03	-2.623803E-02
425	0		8.283622E-03	-2.623803E-02
426	0		8.483227E-03	-2.623803E-02
427	0		8.682833E-03	-2.623803E-02
428	0	5.588356E-04	8.882438E-03	-2.623803E-02

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430	0	5.839518E-04	9.281649E-03	-2.623803E-02
431	0	4.709289E-04	7.485200E-03	-2.268899E-02
432	0	4.834870E-04	7.684806E-03	-2.268899E-02
433	0	4.960451E-04	7.884411E-03	-2.268899E-02
434	0	5.086032E-04	8.084017E-03	-2.268899E-02
435	0	5.211613E-04	8.283622E-03	-2.268899E-02
436	0	5.337194E-04	8.483227E-03	-2.268899E-02
437	0	5.462775E-04	8.682833E-03	-2.268899E-02
438	0	5.588356E-04	8.882438E-03	-2.268899E-02
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440	0	5.839518E-04	9.281649E-03	-2.268899E-02
441	0	4.709289E-04	7.485200E-03	-1.934085E-02
442	0	4.834870E-04	7.684806E-03	-1.934085E-02
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444	0	5.086032E-04	8.084017E-03	-1.934085E-02
445	0	5.211613E-04	8.283622E-03	-1.934085E-02
446	0	5.337194E-04	8.483227E-03	-1.934085E-02
447	Ő	5.462775E-04	8.682833E-03	-1.934085E-02
448	0	5.588356E-04	8.882438E-03	-1.934085E-02
449	Ő	5.713937E-04	9.082043E-03	-1.934085E-02
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456	0	5.337194E-04	8.483227E-03	-1.618223E-02
450 457	0	5.462775E-04	8.682833E-03	-1.618223E-02
458	0	5.588356E-04	8.882438E-03	-1.618223E-02
459	0	5.713937E-04	9.082043E-03	-1.618223E-02
	0	5.839518E-04	9.082043E-03 9.281649E-03	-1.618223E-02
460	-			
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		4.960431E-04 5.086032E-04		
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466	0	5.337194E-04	8.483227E-03	-1.320239E-02
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468	0	5.588356E-04	8.882438E-03	-1.320239E-02
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528	0	5.588356E-04	8.882438E-03	1.450428E-03
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548	0	5.588356E-04	8.882438E-03	5.301774E-03
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554	0	5.086032E-04	8.084017E-03	7.065534E-03
555	0	5.211613E-04	8.283622E-03	7.065534E-03
556	0	5.337194E-04	8.483227E-03	7.065534E-03
557	0	5.462775E-04	8.682833E-03	7.065534E-03
558	0	5.588356E-04	8.882438E-03	7.065534E-03
559	0	5.713937E-04	9.082043E-03	7.065534E-03
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561	0	4.709289E-04	7.485200E-03	8.729459E-03
562	0	4.834870E-04	7.684806E-03	8.729459E-03
563	0	4.960451E-04	7.884411E-03	8.729459E-03
564	0	5.086032E-04	8.084017E-03	8.729459E-03
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500	U	J.JJ/174E-04	0.40 <i>322</i> 7E-05	0.7274371-03

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589	Ő	5.713937E-04	9.082043E-03	1.178009E-02
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597	0	5.462775E-04	8.682833E-03	1.317715E-02
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606	0	5.337194E-04	8.483227E-03	1.449513E-02
607	0	5.462775E-04	8.682833E-03	1.449513E-02
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628	0	5.588356E-04	8.882438E-03	1.691152E-02
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630	0	5.839518E-04	9.281649E-03	1.691152E-02
631	0	4.709289E-04	7.485200E-03	1.801812E-02
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636	0	5.337194E-04	8.483227E-03	1.801812E-02
637	0	5.462775E-04	8.682833E-03	1.801812E-02
638	0 0	5.588356E-04	8.882438E-03	1.801812E-02
639	0	5.713937E-04	9.082043E-03	1.801812E-02
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668	0	5.588356E-04	8.882438E-03	2.097609E-02
669	0	5.713937E-04	9.082043E-03	2.097609E-02
670	0	5.839518E-04	9.281649E-03	2.097609E-02
671	0	4.709289E-04	7.485200E-03	2.185262E-02
672	0	4.834870E-04	7.684806E-03	2.185262E-02
673	0	4.960451E-04	7.884411E-03	2.185262E-02
674	0	5.086032E-04	8.084017E-03	2.185262E-02
675	0	5.211613E-04	8.283622E-03	2.185262E-02
676	0	5.337194E-04	8.483227E-03	2.185262E-02
677	0	5.462775E-04	8.682833E-03	2.185262E-02
678	0	5.588356E-04	8.882438E-03	2.185262E-02
679	0	5.713937E-04	9.082043E-03	2.185262E-02
680	Ő	5.839518E-04	9.281649E-03	2.185262E-02
681	Ő	4.709289E-04	7.485200E-03	2.267954E-02
682	0	4.834870E-04	7.684806E-03	2.267954E-02
683	0 0	4.960451E-04	7.884411E-03	2.267954E-02
684	0 0	5.086032E-04	8.084017E-03	2.267954E-02
685	Ő	5.211613E-04	8.283622E-03	2.267954E-02
686	0	5.337194E-04	8.483227E-03	2.267954E-02
687	0	5.462775E-04	8.682833E-03	2.267954E-02
688	0 0	5.588356E-04	8.882438E-03	2.267954E-02
689	0 0	5.713937E-04	9.082043E-03	2.267954E-02
690	0	5.839518E-04	9.281649E-03	2.267954E-02
691	0	4.709289E-04	7.485200E-03	
692	0	4.834870E-04	7.684806E-03	2.345966E-02
693	0	4.960451E-04	7.884411E-03	2.345966E-02
694	0	5.086032E-04	8.084017E-03	2.345966E-02
695	0	5.211613E-04	8.283622E-03	2.345966E-02
696	0	5.337194E-04	8.483227E-03	2.345966E-02
697	0	5.462775E-04	8.682833E-03	2.345966E-02
698	0	5.588356E-04	8.882438E-03	2.345966E-02
699	0	5.713937E-04	9.082043E-03	2.345966E-02
700	0	5.839518E-04	9.281649E-03	2.345966E-02
700	0	4.709289E-04	9.281049E-03 7.485200E-03	2.343900E-02 2.419561E-02
701	0	4.834870E-04	7.483200E-03	2.419561E-02 2.419561E-02
702 703	0	4.854870E-04 4.960451E-04	7.884411E-03	2.419561E-02 2.419561E-02
703 704	0	4.960431E-04 5.086032E-04	7.884411E-03 8.084017E-03	2.419561E-02 2.419561E-02
704	U	J.0000J2E-04	0.00 <del>4</del> 01/E-03	2.419JUIE-02

705	0	5.211613E-04	8.283622E-03	2.419561E-02
706	0	5.337194E-04	8.483227E-03	2.419561E-02
707	0	5.462775E-04	8.682833E-03	2.419561E-02
708	0	5.588356E-04	8.882438E-03	2.419561E-02
709	0	5.713937E-04	9.082043E-03	2.419561E-02
710	0	5.839518E-04	9.281649E-03	2.419561E-02
711	0	4.709289E-04	7.485200E-03	2.488991E-02
712	0	4.834870E-04	7.684806E-03	2.488991E-02
713	0	4.960451E-04	7.884411E-03	2.488991E-02
714	0	5.086032E-04	8.084017E-03	2.488991E-02
715	0	5.211613E-04	8.283622E-03	2.488991E-02
716	0	5.337194E-04	8.483227E-03	2.488991E-02
717	0	5.462775E-04	8.682833E-03	2.488991E-02
718	0	5.588356E-04	8.882438E-03	2.488991E-02
719	0	5.713937E-04	9.082043E-03	2.488991E-02
720	0	5.839518E-04	9.281649E-03	2.488991E-02
720	0	4.709289E-04	7.485200E-03	2.488991E-02 2.554491E-02
721	0	4.834870E-04	7.684806E-03	2.554491E-02
722	0	4.960451E-04	7.884411E-03	2.554491E-02 2.554491E-02
	-			
724	0	5.086032E-04	8.084017E-03	2.554491E-02
725	0	5.211613E-04	8.283622E-03	2.554491E-02
726	0	5.337194E-04	8.483227E-03	2.554491E-02
727	0	5.462775E-04	8.682833E-03	2.554491E-02
728	0	5.588356E-04	8.882438E-03	2.554491E-02
729	0	5.713937E-04	9.082043E-03	2.554491E-02
730	0	5.839518E-04	9.281649E-03	2.554491E-02
731	0	4.709289E-04	7.485200E-03	2.616283E-02
732	0	4.834870E-04	7.684806E-03	2.616283E-02
733	0	4.960451E-04	7.884411E-03	2.616283E-02
734	0	5.086032E-04	8.084017E-03	2.616283E-02
735	0	5.211613E-04	8.283622E-03	2.616283E-02
736	0	5.337194E-04	8.483227E-03	2.616283E-02
737	0	5.462775E-04	8.682833E-03	2.616283E-02
738	0	5.588356E-04	8.882438E-03	2.616283E-02
739	0	5.713937E-04	9.082043E-03	2.616283E-02
740	0	5.839518E-04	9.281649E-03	2.616283E-02
741	0	4.709289E-04	7.485200E-03	2.674577E-02
742	0	4.834870E-04	7.684806E-03	2.674577E-02
743	0	4.960451E-04	7.884411E-03	2.674577E-02
744	0	5.086032E-04	8.084017E-03	2.674577E-02
745	0	5.211613E-04	8.283622E-03	2.674577E-02
746	Ő	5.337194E-04	8.483227E-03	2.674577E-02
747	0	5.462775E-04	8.682833E-03	2.674577E-02
748	0	5.588356E-04	8.882438E-03	2.674577E-02
749	0	5.713937E-04	9.082043E-03	2.674577E-02
750	0	5.839518E-04	9.281649E-03	2.674577E-02
750	0	5.0575101-04	7.2010 <del>1</del> 712-03	2.017J11E-02

751	0	4.709289E-04	7.485200E-03	2.729572E-02
752	0	4.834870E-04	7.684806E-03	2.729572E-02
753	0	4.960451E-04	7.884411E-03	2.729572E-02
754	0	5.086032E-04	8.084017E-03	2.729572E-02
755	0	5.211613E-04	8.283622E-03	2.729572E-02
756	Ő	5.337194E-04	8.483227E-03	2.729572E-02
757	Ő	5.462775E-04	8.682833E-03	2.729572E-02
758	0	5.588356E-04	8.882438E-03	2.729572E-02
759	0	5.713937E-04	9.082043E-03	2.729572E-02 2.729572E-02
	0			
760	-	5.839518E-04	9.281649E-03	2.729572E-02
761	0	4.709289E-04	7.485200E-03	2.781454E-02
762	0	4.834870E-04	7.684806E-03	2.781454E-02
763	0	4.960451E-04	7.884411E-03	2.781454E-02
764	0	5.086032E-04	8.084017E-03	2.781454E-02
765	0	5.211613E-04	8.283622E-03	2.781454E-02
766	0	5.337194E-04	8.483227E-03	2.781454E-02
767	0	5.462775E-04	8.682833E-03	2.781454E-02
768	0	5.588356E-04	8.882438E-03	2.781454E-02
769	0	5.713937E-04	9.082043E-03	2.781454E-02
770	0	5.839518E-04	9.281649E-03	2.781454E-02
771	0	4.709289E-04	7.485200E-03	2.830400E-02
772	0	4.834870E-04	7.684806E-03	2.830400E-02
773	0	4.960451E-04	7.884411E-03	2.830400E-02
774	0	5.086032E-04	8.084017E-03	2.830400E-02 2.830400E-02
	-			
775	0	5.211613E-04	8.283622E-03	2.830400E-02
776	0	5.337194E-04	8.483227E-03	2.830400E-02
777	0	5.462775E-04	8.682833E-03	2.830400E-02
778	0	5.588356E-04	8.882438E-03	2.830400E-02
779	0	5.713937E-04	9.082043E-03	2.830400E-02
780	0	5.839518E-04	9.281649E-03	2.830400E-02
781	0	4.709289E-04	7.485200E-03	2.876574E-02
782	0	4.834870E-04	7.684806E-03	2.876574E-02
783	0	4.960451E-04	7.884411E-03	2.876574E-02
784	0	5.086032E-04	8.084017E-03	2.876574E-02
785	0	5.211613E-04	8.283622E-03	2.876574E-02
786	0	5.337194E-04	8.483227E-03	2.876574E-02
787	0	5.462775E-04	8.682833E-03	2.876574E-02
788	0	5.588356E-04	8.882438E-03	2.876574E-02
789	0	5.713937E-04	9.082043E-03	2.876574E-02
			9.281649E-03	2.876574E-02
790 701	0	5.839518E-04		
791	0	4.709289E-04	7.485200E-03	2.920135E-02
792	0	4.834870E-04	7.684806E-03	2.920135E-02
793	0	4.960451E-04	7.884411E-03	2.920135E-02
794	0	5.086032E-04	8.084017E-03	2.920135E-02
795	0	5.211613E-04	8.283622E-03	2.920135E-02
796	0	5.337194E-04	8.483227E-03	2.920135E-02

797	0	5.462775E-04 8.682833E-03 2.920135E-02
798	0	5.588356E-04 8.882438E-03 2.920135E-02
799	0	5.713937E-04 9.082043E-03 2.920135E-02
800	0	5.839518E-04 9.281649E-03 2.920135E-02
801	0	4.709289E-04 7.485200E-03 2.961231E-02
802	0	4.834870E-04 7.684806E-03 2.961231E-02
803	0	4.960451E-04 7.884411E-03 2.961231E-02
804	0	5.086032E-04 8.084017E-03 2.961231E-02
805	0	5.211613E-04 8.283622E-03 2.961231E-02
806	0	5.337194E-04 8.483227E-03 2.961231E-02
807	0	5.462775E-04 8.682833E-03 2.961231E-02
808	0	5.588356E-04 8.882438E-03 2.961231E-02
809	0	5.713937E-04 9.082043E-03 2.961231E-02
810	0	5.839518E-04 9.281649E-03 2.961231E-02
811	0	4.709289E-04 7.485200E-03 3.000000E-02
812	0	4.833365E-04 7.682414E-03 3.000000E-02
813	0	4.958265E-04 7.880940E-03 3.000000E-02
814	0	5.083553E-04 8.080080E-03 3.000000E-02
815	0	5.209021E-04 8.279507E-03 3.000000E-02
816	0	5.334576E-04 8.479070E-03 3.000000E-02
817	0	5.462775E-04 8.682833E-03 3.000000E-02
818	0	5.588356E-04 8.882438E-03 3.000000E-02
819	0	5.713937E-04 9.082043E-03 3.000000E-02
820	0	5.839518E-04 9.281649E-03 3.000000E-02

! List of nodes connected to an individual element (pg 28)

! For elements where the maximum number of nodes is less or equal to 13 (i.e.,

! the NEN parameter on the control record), the records following the command are given ! as:

! N number of element.

! NG generation increment for node numbers.

! MA material identifier associated with element.

! ND-i i-Node number defining element

ELEMents

	i i chies									
1	0	1	417	418	8	7	427	428	18	17
2	0	1	418	419	9	8	428	429	19	18
3	0	1	419	420	10	9	429	430	20	19
4	0	1	427	428	18	17	437	438	28	27
5	0	1	428	429	19	18	438	439	29	28
6	0	1	429	430	20	19	439	440	30	29
7	0	1	437	438	28	27	447	448	38	37
8	0	1	438	439	29	28	448	449	39	38
9	0	1	439	440	30	29	449	450	40	39

10	0	1	447	448	38	37	457	458	48	47
11	0	1	448	449	39	38	458	459	49	48
12	0	1	449	450	40	39	459	460	50	49
13	0	1	457	458	48	47	467	468	58	57
14	0	1	458	459	49	48	468	469	59	58
15	0	1	459	460	50	49	469	470	60	59
16	0	1	467	468	58	57	477	478	68	67
17	0	1	468	469	59	58	478	479	69	68
18	Ő	1	469	470	60	59	479	480	70	69
19	Ő	1	477	478	68	67	487	488	78	77
20	0	1	478	479	69	68	488	489	79	78
21	0	1	479	480	70	69	489	490	80	79
$\frac{21}{22}$	0	1	487	488	78	77	497	498	88	87
23	0	1	488	489	79	78	498	499	89	88
24	0	1	489	490	80	70 79	499	500	90	89
25	0	1	497	498	88	87	507	508	98	97
25 26	0	1	498	499	89	88	508	508 509	99	98
20 27	0	1	499	500	90	89	509	510	100	99
27	0	1	499 507	500 508	90 98	89 97	509 517	518	100	99 107
29 20	0	1	508	509	99 100	98 00	518 510	519 520	109	108
30	0	1	509	510	100	99 107	519 527	520 529	110	109
31	0	1	517	518	108	107	527 529	528	118	117
32	0	1	518	519	109	108	528	529	119	118
33	0	1	519	520	110	109	529	530	120	119
34	0	1	527	528	118	117	537	538	128	127
35	0	1	528	529	119	118	538	539	129	128
36	0	1	529	530	120	119	539	540	130	129
37	0	1	537	538	128	127	547	548	138	137
38	0	1	538	539	129	128	548	549	139	138
39	0	1	539	540	130	129	549	550	140	139
40	0	1	547	548	138	137	557	558	148	147
41	0	1	548	549	139	138	558	559	149	148
42	0	1	549	550	140	139	559	560	150	149
43	0	1	557	558	148	147	567	568	158	157
44	0	1	558	559	149	148	568	569	159	158
45	0	1	559	560	150	149	569	570	160	159
46	0	1	567	568	158	157	577	578	168	167
47	0	1	568	569	159	158	578	579	169	168
48	0	1	569	570	160	159	579	580	170	169
49	0	1	577	578	168	167	587	588	178	177
50	0	1	578	579	169	168	588	589	179	178
51	0	1	579	580	170	169	589	590	180	179
52	0	1	587	588	178	177	597	598	188	187
53	0	1	588	589	179	178	598	599	189	188
54	Ő	1	589	590	180	179	599	600	190	189
55	Ő	1	597	598	188	187	607	608	198	197
	-	-								

56	0	1	509	500	100	100	609	600	100	100
56 57	0	1 1	598 599	599 600	189 190	188 189	608 609	609 610	199 200	198 199
	0									
58	0	1	607	608	198	197 109	617	618	208	207
59	0	1	608	609	199	198	618	619	209	208
60	0	1	609	610	200	199	619	620	210	209
61	0	1	617	618	208	207	627	628	218	217
62	0	1	618	619	209	208	628	629	219	218
63	0	1	619	620	210	209	629	630	220	219
64	0	1	627	628	218	217	637	638	228	227
65	0	1	628	629	219	218	638	639	229	228
66	0	1	629	630	220	219	639	640	230	229
67	0	1	637	638	228	227	647	648	238	237
68	0	1	638	639	229	228	648	649	239	238
69	0	1	639	640	230	229	649	650	240	239
70	0	1	647	648	238	237	657	658	248	247
71	0	1	648	649	239	238	658	659	249	248
72	0	1	649	650	240	239	659	660	250	249
73	0	1	657	658	248	247	667	668	258	257
74	0	1	658	659	249	248	668	669	259	258
75	0	1	659	660	250	249	669	670	260	259
76	0	1	667	668	258	257	677	678	268	267
77	0	1	668	669	259	258	678	679	269	268
78	0	1	669	670	260	259	679	680	270	269
79	0	1	677	678	268	267	687	688	278	277
80	0	1	678	679	269	268	688	689	279	278
81	0	1	679	680	270	269	689	690	280	279
82	0	1	687	688	278	277	697	698	288	287
83	0	1	688	689	279	278	698	699	289	288
84	0	1	689	690	280	279	699	700	290	289
85	0	1	697	698	288	287	707	708	298	297
86	0	1	698	699	289	288	708	709	299	298
87	0	1	699	700	290	289	709	710	300	299
88	0	1	707	708	298	297	717	718	308	307
89	0	1	708	709	299	298	718	719	309	308
90	0	1	709	710	300	299	719	720	310	309
91	0	1	717	718	308	307	727	728	318	317
92	0	1	718	719	309	308	728	729	319	318
93	0	1	719	720	310	309	729	730	320	319
94	0	1	717	728	318	317	737	738	328	327
95	0	1	728	729	319	318	738	739	329	328
95 96	0	1	728	729	319	318	739	739 740	329	328 329
90 97	0	1	729	738	320	319	739	740 748	338	329
97 98	0	1	738	738 739	328 329	327	747	748 749	339	338
99 100	0	1	739 747	740 748	330	329 337	749 757	750 758	340 248	339 247
100	0	1	747 748	748 740	338		757 758	758 750	348 340	347 348
101	0	1	748	749	339	338	758	759	349	348

102	0	1	749	750	340	339	759	760	350	349
103	0	1	757	758	348	347	767	768	358	357
104	0	1	758	759	349	348	768	769	359	358
105	0	1	759	760	350	349	769	770	360	359
106	0	1	767	768	358	357	777	778	368	367
107	0	1	768	769	359	358	778	779	369	368
108	0	1	769	770	360	359	779	780	370	369
109	0	1	777	778	368	367	787	788	378	377
110	0	1	778	779	369	368	788	789	379	378
111	0	1	779	780	370	369	789	790	380	379
112	0	1	787	788	378	377	797	798	388	387
113	0	1	788	789	379	378	798	799	389	388
114	Õ	1	789	790	380	379	799	800	390	389
115	0	1	797	798	388	387	807	808	398	397
116	Ő	1	798	799	389	388	808	809	399	398
117	0	1	799	800	390	389	809	810	400	399
118	0	1	807	808	398	397	817	818	408	407
119	0	1	808	809	399	398	818	819	409	408
120	0	1	809	810	400	399	819	820	410	409
120	0	2	427	426	16	17	417	416	6	7
121	0	$\frac{2}{2}$	426	425	15	16	416	415	5	6
122	0	$\frac{2}{2}$	425	424	13	15	415	414	4	5
123	0	$\frac{2}{2}$	424	423	13	13	414	413	3	4
124	0	2	423	422	13	13	413	412	2	3
125	0	$\frac{2}{2}$	423	422	12	13	413	412	1	2
120	0	$\frac{2}{2}$	437	436	26	27	427	426	16	17
127	0	$\frac{2}{2}$	436	435	20 25	26	426	425	15	16
120	0	2	435	434	23 24	20 25	425	424	13	15
129	0	$\frac{2}{2}$	433 434	434	24	23 24	423 424	424	14	13
130	0	$\frac{2}{2}$	434	433	23 22	24	424	423	13	14
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135 134	0		447 446	446 445	30 35		437 436	430 435	26 25	
134 135	0	2 2	440 445	444	33 34	36 35	430 435	433 434	25 24	26 25
135 136	0	$\frac{2}{2}$	443 444	443	34 33	33 34	433 434	434 433	24 23	23 24
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138	0	2	442	441	31	32	432	431	21	22
139	0	2	457	456	46	47	447	446	36	37
140	0	2	456	455	45	46	446	445	35	36
141	0	2	455	454	44	45	445	444	34	35
142	0	2	454	453	43	44	444	443	33	34
143	0	2	453	452	42	43	443	442	32	33
144	0	2	452	451	41	42	442	441	31	32
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146	0	2	466	465	55	56	456	455	45	46
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192	0	$\frac{2}{2}$	532 547	546	136	137	537	536	126	127
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207	0	2	565	564	154	155	555	554	144	145
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210	0	2	562	561	151	152	552	551	141	142
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215	0	2	573	572	162	163	563	562	152	153
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									176 175	
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267	0	2	665	664	254	255	655	654	244	245
268	Ő	$\frac{1}{2}$	664	663	253	254	654	653	243	244
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271	0	$\frac{2}{2}$	676	675	265	266	666	665	250 255	256
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277	0	2	687	686	276	277	677	676	266	267
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295	0	$\frac{2}{2}$	717	716	306	307	707	706	296	202 297
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297	0	$\frac{1}{2}$	715	714	304	305	705	704	294	295
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301	0	$\frac{2}{2}$	727	726	316	317	717	716	306	307
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312	0	$\frac{2}{2}$	732	732	322 321		723	722	312 311	313
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319	0	2	757 756	756 755	346 245	347	747 746	746 745	336	337
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362	0	3	421	431	21	11				
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366	0	3	461	471	61	51				
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383	0	3	631	641	231	221
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385	0	3	651	661	251	241
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392	0	3	721	731	321	311
393	0	3	731	741	331	321
394	0	3	741	751	341	331
395	0	3	751	761	351	341
396	0	3	761	771	361	351
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### EDAT

# 360

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- 1.299301E+00 2.223517E-02
- 1.299301E+00 2.223613E-02
- 1.299301E+00 2.223676E-02

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38	2.825573E-04	8.991120E-03	4.366982E-03	1.299301E+00 2.223676E-02 5.924148E-01
39	2.888364E-04	9.190923E-03	4.366982E-03	1.299301E+00 2.223676E-02 5.924148E-01
40	2.762783E-04			1.299301E+00 2.223676E-02 5.924148E-01
41	2.825573E-04	8.991120E-03		1.299301E+00 2.223676E-02 5.924148E-01
42	2.888364E-04	9.190923E-03	6.183654E-03	1.299301E+00 2.223676E-02 5.924148E-01
43	2.762783E-04	8.791318E-03	7.897497E-03	1.299301E+00 2.223676E-02 5.924148E-01
44	2.825573E-04	8.991120E-03	7.897497E-03	1.299301E+00 2.223676E-02 5.924148E-01
45	2.888364E-04	9.190923E-03	7.897497E-03	1.299301E+00 2.223676E-02 5.924148E-01
46	2.762783E-04	8.791318E-03	9.514329E-03	1.299301E+00 2.223676E-02 5.924148E-01
47	2.825573E-04	8.991120E-03	9.514329E-03	1.299301E+00 2.223676E-02 5.924148E-01
48	2.888364E-04	9.190923E-03	9.514329E-03	1.299301E+00 2.223676E-02 5.924148E-01
49	2.762783E-04	8.791318E-03	1.103964E-02	1.299301E+00 2.223676E-02 5.924148E-01
50	2.825573E-04	8.991120E-03	1.103964E-02	1.299301E+00 2.223676E-02 5.924148E-01
51	2.888364E-04	9.190923E-03	1.103964E-02	1.299301E+00 2.223676E-02 5.924148E-01
52	2.762783E-04	8.791318E-03	1.247862E-02	1.299301E+00 2.223676E-02 5.924148E-01
53	2.825573E-04	8.991120E-03	1.247862E-02	1.299301E+00 2.223676E-02 5.924148E-01
54				1.299301E+00 2.223676E-02 5.924148E-01
55	2.762783E-04		1.383614E-02	1.299301E+00 2.223676E-02 5.924148E-01
56	2.825573E-04			1.299301E+00 2.223676E-02 5.924148E-01
50 57	2.888364E-04	9.190923E-03		1.299301E+00 2.223676E-02 5.924148E-01
58	2.762783E-04	8.791318E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
58 59	2.825573E-04	8.991120E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
60	2.888364E-04	9.190923E-03		1.299301E+00 2.223676E-02 5.924148E-01
61 62	2.762783E-04	8.791318E-03		1.299301E+00 2.223676E-02 5.924148E-01
62	2.825573E-04	8.991120E-03	1.632501E-02	1.299301E+00 2.223676E-02 5.924148E-01
63	2.888364E-04	9.190923E-03	1.632501E-02	1.299301E+00 2.223676E-02 5.924148E-01
64	2.762783E-04	8.791318E-03	1.746482E-02	1.299301E+00 2.223676E-02 5.924148E-01
65	2.825573E-04	8.991120E-03	1.746482E-02	1.299301E+00 2.223676E-02 5.924148E-01
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67	2.762783E-04	017710102 00		1.299301E+00 2.223676E-02 5.924148E-01
68		8.991120E-03		1.299301E+00 2.223676E-02 5.924148E-01
69				1.299301E+00 2.223676E-02 5.924148E-01
70				1.299301E+00 2.223676E-02 5.924148E-01
71				1.299301E+00 2.223676E-02 5.924148E-01
72	2.888364E-04	9.190923E-03	1.955452E-02	1.299301E+00 2.223676E-02 5.924148E-01
73	2.762783E-04	8.791318E-03	2.051152E-02	1.299301E+00 2.223676E-02 5.924148E-01
74	2.825573E-04	8.991120E-03	2.051152E-02	1.299301E+00 2.223676E-02 5.924148E-01
75	2.888364E-04	9.190923E-03	2.051152E-02	1.299301E+00 2.223676E-02 5.924148E-01
76	2.762783E-04	8.791318E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
77	2.825573E-04	8.991120E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
78	2.888364E-04	9.190923E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
79	2.762783E-04	8.791318E-03	2.226608E-02	1.299301E+00 2.223676E-02 5.924148E-01
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81				1.299301E+00 2.223676E-02 5.924148E-01
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83				1.299301E+00 2.223676E-02 5.924148E-01
84	2.888364E-04	9.190923E-03	2.306960E-02	1.299301E+00 2.223676E-02 5.924148E-01
85	2.762783E-04	8.791318E-03		1.299301E+00 2.223676E-02 5.924148E-01
86	2.825573E-04	8.991120E-03		1.299301E+00 2.223676E-02 5.924148E-01
87	2.888364E-04	9.190923E-03	2.382764E-02	1.299301E+00 2.223676E-02 5.924148E-01
88	2.762783E-04	8.791318E-03	2.454276E-02	1.299301E+00 2.223676E-02 5.924148E-01
89	2.825573E-04	8.991120E-03	2.454276E-02	1.299301E+00 2.223676E-02 5.924148E-01
90	2.888364E-04	9.190923E-03	2.454276E-02	1.299301E+00 2.223676E-02 5.924148E-01
91	2.762783E-04	8.791318E-03	2.521741E-02	1.299301E+00 2.223676E-02 5.924148E-01
92	2.825573E-04	8.991120E-03	2.521741E-02	1.299301E+00 2.223676E-02 5.924148E-01
93	2.888364E-04	9.190923E-03		1.299301E+00 2.223676E-02 5.924148E-01
94	2.762783E-04	8.791318E-03		1.299301E+00 2.223676E-02 5.924148E-01
95	2.825573E-04	8.991120E-03		1.299301E+00 2.223676E-02 5.924148E-01
96		9.190923E-03		1.299301E+00 2.223676E-02 5.924148E-01
97 00	2.762783E-04	8.791318E-03		1.299301E+00 2.223676E-02 5.924148E-01
98	2.825573E-04	8.991120E-03		1.299301E+00 2.223676E-02 5.924148E-01
99	2.888364E-04	9.190923E-03		1.299301E+00 2.223676E-02 5.924148E-01
100	2.762783E-04			1.299301E+00 2.223676E-02 5.924148E-01
101	2.825573E-04	8.991120E-03	2.702074E-02	1.299301E+00 2.223676E-02 5.924148E-01
102	2.888364E-04	9.190923E-03	2.702074E-02	1.299301E+00 2.223676E-02 5.924148E-01
103	2.762783E-04	8.791318E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
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105	2.888364E-04	9.190923E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
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107	2.825573E-04	8.991120E-03	2.805927E-02	1.299301E+00 2.223676E-02 5.924148E-01
108	2.888364E-04	9.190923E-03		1.299301E+00 2.223676E-02 5.924148E-01
109	2.762783E-04	8.791318E-03		1.299301E+00 2.223676E-02 5.924148E-01
110	2.825573E-04	8.991120E-03		1.299301E+00 2.223676E-02 5.924148E-01
111	2.888364E-04	9.190923E-03	2.853487E-02	1.299301E+00 2.223676E-02 5.924148E-01
112	2.762783E-04	8.791318E-03		1.299301E+00 2.223676E-02 5.924148E-01
112		8.991120E-03		1.299301E+00 2.223676E-02 5.924148E-01
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114				1.299301E+00 2.223676E-02 5.924148E-01
115				1.299301E+00 2.223676E-02 5.924148E-01
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117				1.299301E+00 2.223676E-02 5.924148E-01
118				1.299301E+00 2.223676E-02 5.924148E-01
119	2.825573E-04	8.991120E-03	2.980616E-02	1.299301E+00 2.223676E-02 5.924148E-01
120	2.888364E-04	9.190923E-03	2.980616E-02	1.299301E+00 2.223676E-02 5.924148E-01
121	2.699992E-04	8.591515E-03	-2.811902E-02	1.299301E+00 2.223676E-02
	5.924148E-01			
122	2.637202E-04	8.391712E-03	-2.811902E-02	1.299301E+00 2.223676E-02
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123		8.191910E-03	-2.811902E-02	1.299301E+00 2.223676E-02
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124		7 992107E_03	-2.811902E-02	1.299301E+00 2.223676E-02
124	5.924148E-01	1.77210712-03	2.0117021-02	1.2775012+00-2.225070E-02
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125	2.448830E-04 5.924148E-01	7.792304E-03	-2.811902E-02
126	2.386040E-04 5.924148E-01	7.592501E-03	-2.811902E-02
127	2.699992E-04 5.924148E-01	8.591515E-03	-2.446351E-02
128	2.637202E-04 5.924148E-01	8.391712E-03	-2.446351E-02
129	2.574411E-04 5.924148E-01	8.191910E-03	-2.446351E-02
130	2.511621E-04 5.924148E-01	7.992107E-03	-2.446351E-02
131	2.448830E-04 5.924148E-01	7.792304E-03	-2.446351E-02
132	2.386040E-04 5.924148E-01	7.592501E-03	-2.446351E-02
133	2.699992E-04 5.924148E-01	8.591515E-03	-2.101492E-02
134	2.637202E-04 5.924148E-01	8.391712E-03	-2.101492E-02
135	2.574411E-04 5.924148E-01	8.191910E-03	-2.101492E-02
136	2.511621E-04 5.924148E-01	7.992107E-03	-2.101492E-02
137	2.448830E-04 5.924148E-01	7.792304E-03	-2.101492E-02
138	2.386040E-04 5.924148E-01	7.592501E-03	-2.101492E-02
139	2.699992E-04 5.924148E-01	8.591515E-03	-1.776154E-02
140	2.637202E-04 5.924148E-01	8.391712E-03	-1.776154E-02
141		8.191910E-03	-1.776154E-02
142	2.511621E-04 5.924148E-01	7.992107E-03	-1.776154E-02
143		7.792304E-03	-1.776154E-02
144	2.386040E-04 5.924148E-01	7.592501E-03	-1.776154E-02
145	2.699992E-04 5.924148E-01	8.591515E-03	-1.469231E-02
146		8.391712E-03	-1.469231E-02
147		8.191910E-03	-1.469231E-02

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148	2.511621E-04 5.924148E-01	7.992107E-03	-1.469231E-02
149	2.448830E-04 5.924148E-01	7.792304E-03	-1.469231E-02
150	2.386040E-04 5.924148E-01	7.592501E-03	-1.469231E-02
151	2.699992E-04 5.924148E-01	8.591515E-03	-1.179680E-02
152	2.637202E-04 5.924148E-01	8.391712E-03	-1.179680E-02
153	2.574411E-04 5.924148E-01	8.191910E-03	-1.179680E-02
154	2.511621E-04 5.924148E-01	7.992107E-03	-1.179680E-02
155	2.448830E-04 5.924148E-01	7.792304E-03	-1.179680E-02
156	2.386040E-04 5.924148E-01	7.592501E-03	-1.179680E-02
157	2.699992E-04 5.924148E-01	8.591515E-03	-9.065200E-03
158	2.637202E-04 5.924148E-01	8.391712E-03	-9.065200E-03
159	2.574411E-04 5.924148E-01	8.191910E-03	-9.065200E-03
160	2.511621E-04 5.924148E-01	7.992107E-03	-9.065200E-03
161	2.448830E-04 5.924148E-01	7.792304E-03	-9.065200E-03
162	2.386040E-04 5.924148E-01	7.592501E-03	-9.065200E-03
163	2.699992E-04 5.924148E-01	8.591515E-03	-6.488217E-03
164		8.391712E-03	-6.488217E-03
165	2.574411E-04 5.924148E-01	8.191910E-03	-6.488217E-03
166		7.992107E-03	-6.488217E-03
167	2.448830E-04 5.924148E-01	7.792304E-03	-6.488217E-03
168	2.386040E-04 5.924148E-01	7.592501E-03	-6.488217E-03
169	2.699992E-04 5.924148E-01	8.591515E-03	-4.057099E-03
170	2.637202E-04 5.924148E-01	8.391712E-03	-4.057099E-03

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171	2.574411E-04 5.924148E-01	8.191910E-03	-4.057099E-03	1.299301E+00 2.223676E-02
172	2.511621E-04	7.992107E-03	-4.057099E-03	1.299301E+00 2.223676E-02
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174		7.592501E-03	-4.057099E-03	1.299301E+00 2.223676E-02
175		8.591515E-03	-1.763592E-03	1.299301E+00 2.223676E-02
176		8.391712E-03	-1.763592E-03	1.299301E+00 2.223676E-02
177		8.191910E-03	-1.763592E-03	1.299301E+00 2.223676E-02
178		7.992107E-03	-1.763592E-03	1.299301E+00 2.223676E-02
179		7.792304E-03	-1.763592E-03	1.299301E+00 2.223676E-02
180		7.592501E-03	-1.763592E-03	1.299301E+00 2.223676E-02
181	5.924148E-01 2.699992E-04	8 591515E-03	4 000947E-04	1.299301E+00 2.223676E-02 5.924148E-01
182				1.299301E+00 2.223676E-02 5.924148E-01
182				1.299301E+00 2.223676E-02 5.924148E-01
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180				1.299301E+00 2.223676E-02 5.924148E-01
				1.299301E+00 2.223676E-02 5.924148E-01
188				
189				1.299301E+00 2.223676E-02 5.924148E-01
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193				1.299301E+00 2.223676E-02 5.924148E-01
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201				1.299301E+00 2.223676E-02 5.924148E-01
202				1.299301E+00 2.223676E-02 5.924148E-01
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205				1.299301E+00 2.223676E-02 5.924148E-01
206	2.63/202E-04	8.391/12E-03	/.89/49/E-03	1.299301E+00 2.223676E-02 5.924148E-01

207	2 574411E 04	8 101010E 03	7 807/07E 03	1.299301E+00 2.223676E-02 5.924148E-01
207	2.511621E-04	8.191910E-03 7.992107E-03	7.897497E-03	1.299301E+00 2.223676E-02 5.924148E-01
208	2.448830E-04	7.792304E-03	7.897497E-03	1.299301E+00 2.223676E-02 5.924148E-01
209	2.386040E-04	7.592501E-03		1.299301E+00 2.223676E-02 5.924148E-01
210	2.699992E-04	7.392301E-03 8.591515E-03	9.514329E-03	1.299301E+00 2.223676E-02 5.924148E-01
211		8.391313E-03 8.391712E-03		
212		8.191910E-03		1.299301E+00 2.223676E-02 5.924148E-01 1.299301E+00 2.223676E-02 5.924148E-01
214	2.511621E-04	7.992107E-03	9.514329E-03	1.299301E+00 2.223676E-02 5.924148E-01
215	2.448830E-04	7.792304E-03	9.514329E-03	1.299301E+00 2.223676E-02 5.924148E-01
216	2.386040E-04	7.592501E-03		1.299301E+00 2.223676E-02 5.924148E-01
217				1.299301E+00 2.223676E-02 5.924148E-01
218	2.637202E-04	8.391712E-03	1.103964E-02	1.299301E+00 2.223676E-02 5.924148E-01
219	2.574411E-04	8.191910E-03		1.299301E+00 2.223676E-02 5.924148E-01
220	2.511621E-04	7.992107E-03		1.299301E+00 2.223676E-02 5.924148E-01
221	2.448830E-04	7.792304E-03	1.103964E-02	1.299301E+00 2.223676E-02 5.924148E-01
222	2.386040E-04	7.592501E-03	1.103964E-02	1.299301E+00 2.223676E-02 5.924148E-01
223	2.699992E-04	8.591515E-03		1.299301E+00 2.223676E-02 5.924148E-01
224	2.637202E-04	8.391712E-03		1.299301E+00 2.223676E-02 5.924148E-01
225	2.574411E-04	8.191910E-03	1.247862E-02	1.299301E+00 2.223676E-02 5.924148E-01
226	2.511621E-04	7.992107E-03	1.247862E-02	1.299301E+00 2.223676E-02 5.924148E-01
227	2.448830E-04	7.792304E-03	1.247862E-02	1.299301E+00 2.223676E-02 5.924148E-01
228	2.386040E-04	7.592501E-03	1.247862E-02	1.299301E+00 2.223676E-02 5.924148E-01
229	2.699992E-04	8.591515E-03	1.383614E-02	1.299301E+00 2.223676E-02 5.924148E-01
230	2.637202E-04	8.391712E-03	1.383614E-02	1.299301E+00 2.223676E-02 5.924148E-01
231	2.574411E-04	8.191910E-03	1.383614E-02	1.299301E+00 2.223676E-02 5.924148E-01
232	2.511621E-04	7.992107E-03	1.383614E-02	1.299301E+00 2.223676E-02 5.924148E-01
233	2.448830E-04	7.792304E-03	1.383614E-02	1.299301E+00 2.223676E-02 5.924148E-01
234	2.386040E-04	7.592501E-03	1.383614E-02	1.299301E+00 2.223676E-02 5.924148E-01
235	2.699992E-04	8.591515E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
236	2.637202E-04	8.391712E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
237	2.574411E-04	8.191910E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
238	2.511621E-04	7.992107E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
239	2.448830E-04	7.792304E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
240	2.386040E-04	7.592501E-03	1.511682E-02	1.299301E+00 2.223676E-02 5.924148E-01
241				1.299301E+00 2.223676E-02 5.924148E-01
242				1.299301E+00 2.223676E-02 5.924148E-01
243				1.299301E+00 2.223676E-02 5.924148E-01
244				1.299301E+00 2.223676E-02 5.924148E-01
245				1.299301E+00 2.223676E-02 5.924148E-01
246				1.299301E+00 2.223676E-02 5.924148E-01
247				1.299301E+00 2.223676E-02 5.924148E-01
248				1.299301E+00 2.223676E-02 5.924148E-01
249 249				1.299301E+00 2.223676E-02 5.924148E-01
250				1.299301E+00 2.223676E-02 5.924148E-01
250 251				1.299301E+00 2.223676E-02 5.924148E-01
251				1.299301E+00 2.223676E-02 5.924148E-01
232	2.3000 <del>4</del> 0E-04	1.372301E-03	1.7+0+02E-02	1.277501ET00 2.225070E-02 5.524140E-01

052	2 (00002E 04	9 5015150 02	1 0540105 00	1 200201E 00 2 222777 02 5 024149E 01
253				1.299301E+00 2.223676E-02 5.924148E-01
254 255	2.637202E-04	8.391712E-03	1.854010E-02 1.854010E-02	1.299301E+00 2.223676E-02 5.924148E-01
	2.574411E-04	8.191910E-03		1.299301E+00 2.223676E-02 5.924148E-01
256	2.511621E-04	7.992107E-03		1.299301E+00 2.223676E-02 5.924148E-01
257	2.448830E-04	7.792304E-03	1.854010E-02	1.299301E+00 2.223676E-02 5.924148E-01
258	2.386040E-04	7.592501E-03	1.854010E-02	1.299301E+00 2.223676E-02 5.924148E-01
259	2.699992E-04	8.591515E-03	1.955452E-02	1.299301E+00 2.223676E-02 5.924148E-01
260	2.637202E-04	8.391712E-03	1.955452E-02	1.299301E+00 2.223676E-02 5.924148E-01
261	2.574411E-04	8.191910E-03	1.955452E-02	1.299301E+00 2.223676E-02 5.924148E-01
262	2.511621E-04	7.992107E-03	1.955452E-02	1.299301E+00 2.223676E-02 5.924148E-01
263	2.448830E-04	7.792304E-03		1.299301E+00 2.223676E-02 5.924148E-01
264	2.386040E-04	7.592501E-03	1.955452E-02	1.299301E+00 2.223676E-02 5.924148E-01
265	2.699992E-04	8.591515E-03		1.299301E+00 2.223676E-02 5.924148E-01
266	2.637202E-04	8.391712E-03		1.299301E+00 2.223676E-02 5.924148E-01
267	2.574411E-04	8.191910E-03	2.051152E-02	1.299301E+00 2.223676E-02 5.924148E-01
268	2.511621E-04	7.992107E-03	2.051152E-02	1.299301E+00 2.223676E-02 5.924148E-01
269	2.448830E-04	7.792304E-03		1.299301E+00 2.223676E-02 5.924148E-01
270	2.386040E-04	7.592501E-03		1.299301E+00 2.223676E-02 5.924148E-01
271	2.699992E-04	8.591515E-03		1.299301E+00 2.223676E-02 5.924148E-01
272	2.637202E-04	8.391712E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
273	2.574411E-04	8.191910E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
274	2.511621E-04	7.992107E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
275	2.448830E-04	7.792304E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
276	2.386040E-04	7.592501E-03	2.141435E-02	1.299301E+00 2.223676E-02 5.924148E-01
277	2.699992E-04	8.591515E-03	2.226608E-02	1.299301E+00 2.223676E-02 5.924148E-01
278	2.637202E-04	8.391712E-03	2.226608E-02	1.299301E+00 2.223676E-02 5.924148E-01
279	2.574411E-04	8.191910E-03	2.226608E-02	1.299301E+00 2.223676E-02 5.924148E-01
280	2.511621E-04	7.992107E-03	2.226608E-02	1.299301E+00 2.223676E-02 5.924148E-01
281	2.448830E-04	7.792304E-03	2.226608E-02	1.299301E+00 2.223676E-02 5.924148E-01
282	2.386040E-04	7.592501E-03	2.226608E-02	1.299301E+00 2.223676E-02 5.924148E-01
283	2.699992E-04	8.591515E-03	2.306960E-02	1.299301E+00 2.223676E-02 5.924148E-01
284	2.637202E-04	8.391712E-03	2.306960E-02	1.299301E+00 2.223676E-02 5.924148E-01
285	2.574411E-04	8.191910E-03	2.306960E-02	1.299301E+00 2.223676E-02 5.924148E-01
286	2.511621E-04	7.992107E-03	2.306960E-02	1.299301E+00 2.223676E-02 5.924148E-01
287	2.448830E-04	7.792304E-03	2.306960E-02	1.299301E+00 2.223676E-02 5.924148E-01
288	2.386040E-04	7.592501E-03	2.306960E-02	1.299301E+00 2.223676E-02 5.924148E-01
289				1.299301E+00 2.223676E-02 5.924148E-01
290	2.637202E-04	8.391712E-03	2.382763E-02	1.299301E+00 2.223676E-02 5.924148E-01
291	2.574411E-04	8.191910E-03	2.382763E-02	1.299301E+00 2.223676E-02 5.924148E-01
292				1.299301E+00 2.223676E-02 5.924148E-01
293	2.448830E-04	7.792304E-03	2.382763E-02	1.299301E+00 2.223676E-02 5.924148E-01
294				1.299301E+00 2.223676E-02 5.924148E-01
295				1.299301E+00 2.223676E-02 5.924148E-01
296				1.299301E+00 2.223676E-02 5.924148E-01
297				1.299301E+00 2.223676E-02 5.924148E-01
298				1.299301E+00 2.223676E-02 5.924148E-01

299	2 449920E 04	7 702204E 02	2 454276E 02	1.299301E+00 2.223676E-02 5.924148E-01
299 300	2.386040E-04	7.592501E-03	2.454276E-02 2.454276E-02	1.299301E+00 2.223676E-02 5.924148E-01
300 301	2.699992E-04			1.299301E+00 2.223676E-02 5.924148E-01
				1.299301E+00 2.223676E-02 5.924148E-01
302	2.637202E-04			
303	2.574411E-04	8.191910E-03		1.299301E+00 2.223676E-02 5.924148E-01
304	2.511621E-04	7.992107E-03		1.299301E+00 2.223676E-02 5.924148E-01
305	2.448830E-04	7.792304E-03		1.299301E+00 2.223676E-02 5.924148E-01
306	2.386040E-04	7.592501E-03	2.521741E-02	1.299301E+00 2.223676E-02 5.924148E-01
307	2.699992E-04	8.591515E-03	2.585387E-02	1.299301E+00 2.223676E-02 5.924148E-01
308	2.637202E-04	8.391712E-03	2.585387E-02	1.299301E+00 2.223676E-02 5.924148E-01
309				1.299301E+00 2.223676E-02 5.924148E-01
310	2.511621E-04	7.992107E-03	2.585387E-02	1.299301E+00 2.223676E-02 5.924148E-01
311	2.448830E-04			1.299301E+00 2.223676E-02 5.924148E-01
312	2.386040E-04	7.592501E-03		1.299301E+00 2.223676E-02 5.924148E-01
313	2.699992E-04	8.591515E-03	2.645430E-02	1.299301E+00 2.223676E-02 5.924148E-01
314	2.637202E-04	8.391712E-03	2.645430E-02	1.299301E+00 2.223676E-02 5.924148E-01
315	2.574411E-04	8.191910E-03		1.299301E+00 2.223676E-02 5.924148E-01
316	2.511621E-04	7.992107E-03		1.299301E+00 2.223676E-02 5.924148E-01
317	2.448830E-04	7.792304E-03	2.645430E-02	1.299301E+00 2.223676E-02 5.924148E-01
318	2.386040E-04	7.592501E-03	2.645430E-02	1.299301E+00 2.223676E-02 5.924148E-01
319	2.699992E-04	8.591515E-03	2.702075E-02	1.299301E+00 2.223676E-02 5.924148E-01
320	2.637202E-04	8.391712E-03	2.702075E-02	1.299301E+00 2.223676E-02 5.924148E-01
321	2.574411E-04	8.191910E-03	2.702075E-02	1.299301E+00 2.223676E-02 5.924148E-01
322	2.511621E-04	7.992107E-03	2.702075E-02	1.299301E+00 2.223676E-02 5.924148E-01
323	2.448830E-04	7.792304E-03	2.702075E-02	1.299301E+00 2.223676E-02 5.924148E-01
324	2.386040E-04	7.592501E-03	2.702075E-02	1.299301E+00 2.223676E-02 5.924148E-01
325	2.699992E-04	8.591515E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
326	2.637202E-04	8.391712E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
327	2.574411E-04	8.191910E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
328	2.511621E-04	7.992107E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
329	2.448830E-04	7.792304E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
330	2.386040E-04	7.592501E-03	2.755513E-02	1.299301E+00 2.223676E-02 5.924148E-01
331	2.699992E-04	8.591515E-03	2.805927E-02	1.299301E+00 2.223676E-02 5.924148E-01
332	2.637202E-04	8.391712E-03	2.805927E-02	1.299301E+00 2.223676E-02 5.924148E-01
333				1.299301E+00 2.223676E-02 5.924148E-01
334				1.299301E+00 2.223676E-02 5.924148E-01
335				1.299301E+00 2.223676E-02 5.924148E-01
336				1.299301E+00 2.223676E-02 5.924148E-01
337				1.299301E+00 2.223676E-02 5.924148E-01
338				1.299301E+00 2.223676E-02 5.924148E-01
339				1.299301E+00 2.223676E-02 5.924148E-01
340				1.299301E+00 2.223676E-02 5.924148E-01
341				1.299301E+00 2.223676E-02 5.924148E-01
342				1.299301E+00 2.223676E-02 5.924148E-01
342 343				1.299301E+00 2.223676E-02 5.924148E-01
343 344				1.299301E+00 2.223676E-02 5.924148E-01
J <del>44</del>	2.03/202E-04	0.571/12E-05	2.070334E-02	1.277501ET00 2.225070E-02 5.524140E-01

345	2.574411E-04	8.191910E-03	2.898354E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
346	2.511621E-04	7.992107E-03	2.898354E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
347	2.448830E-04	7.792304E-03	2.898354E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
348	2.386040E-04	7.592501E-03	2.898354E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
349	2.699992E-04	8.591515E-03	2.940683E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
350	2.637202E-04	8.391712E-03	2.940683E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
351	2.574411E-04	8.191910E-03	2.940683E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
352	2.511621E-04	7.992107E-03	2.940683E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
353	2.448830E-04	7.792304E-03	2.940683E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
354	2.386040E-04	7.592501E-03	2.940683E-02	1.299301E+00 2.	.223676E-02	5.924148E-01
355	2.699665E-04	8.590995E-03	2.980616E-02	1.299301E+00 2.	.223541E-02	5.924147E-01
356	2.636551E-04	8.390678E-03	2.980616E-02	1.299301E+00 2.	.223401E-02	5.924146E-01
357	2.573777E-04	8.190903E-03	2.980616E-02	1.299301E+00 2.	.223402E-02	5.924146E-01
358	2.511038E-04	7.991181E-03	2.980616E-02	1.299301E+00 2.	.223418E-02	5.924146E-01
359	2.448369E-04	7.791571E-03	2.980616E-02	1.299301E+00 2.	.223467E-02	5.924147E-01
360	2.385852E-04	7.592202E-03	2.980616E-02	1.299301E+00 2.	.223589E-02	5.924147E-01

- ! Perturbed elements
- PERTurbations
- 9

360

! Edge BOUndary conditions

! i-coord x\_i value, (ibc(j), j = 1...NDF) (pg. 257)

! example: 10 100

! means that if the x-value of the node is 0, restrain displacements in the x-direction EBOUndary

- ! 10.0 101
- ! 20.0 011
- ! 3-5.0E-05 001
- ! 3 5.0E-05 0 0 1

! Edge DISplacement conditions ! i-coord x\_i value, (d(j), j = 1...NDF) ! example: 1 10 d 0 0

means that if the x-value of the node is 10, displace by d units in the x-direction ! EDISplacement

- ! 10 000
- ! 110 d00
- 20 000 !
- ! 210 0d0
- ! 30 000

BOUNdary

! BOUNdary restraint conditions

! node1 ngen1 (id(i, node1), i = 1...NDF) (pg. 229)

! if id(i,node) = 0 a force will be an applied load to dof (default).

! if id(i,node) = 0 a displacement will be imposed to dof.

6500101110010 $66$ 00101120010 $67$ 00101130010 $69$ 00101150010 $69$ 00101150010 $70$ 0010116010 $71$ 00101180010 $73$ 00101200100 $74$ 00101220010 $75$ 00101230010 $77$ 00101240010 $78$ 00101270010 $80$ 0101280010 $81$ 0010133010 $84$ 0010133010 $84$ 0010133010 $84$ 0010133010 $91$ 0010133010 $92$ 0010 <th></th>										
6700101130010 $68$ 00101140010 $69$ 00101150010 $70$ 00101160010 $71$ 00101170010 $72$ 00101190010 $73$ 00101200101 $74$ 00101210010 $76$ 00101230010 $76$ 00101250010 $79$ 00101260100 $80$ 01012601001 $81$ 00101280100 $83$ 00101310100 $84$ 00101330100 $84$ 0101330100 $90$ 0101330100 $91$ 0010133010 $92$ <td>65</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td> <td>111</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td>	65	0	0	1	0	111	0	0	1	0
6800101140010 $69$ 00101150010 $70$ 00101170010 $71$ 00101170010 $72$ 00101170010 $74$ 0010120010 $74$ 00101210010 $75$ 00101230010 $77$ 00101240010 $78$ 00101250010 $81$ 0010128010 $81$ 0010130010 $84$ 0010131010 $85$ 0010133010 $89$ 0010133010 $91$ 0010133010 $92$ 0010133010 $94$ 0010144010 $92$ 00101440<	66	0	0	1	0	112	0	0	1	0
6900101150010700010116010107100101170010720010118001073001012000107400101210010750010122001076001012300107700101260107800101260108001012701081001013001083001013101084001013201085001013301086001013601090010136010910010137010920010140010930 <t< td=""><td>67</td><td>0</td><td>0</td><td>1</td><td>0</td><td>113</td><td>0</td><td>0</td><td>1</td><td>0</td></t<>	67	0	0	1	0	113	0	0	1	0
6900101150010700010116010107100101170010720010118001073001012000107400101210010750010122001076001012300107700101260107800101260108001012701081001013001083001013101084001013201085001013301086001013601090010136010910010137010920010140010930 <t< td=""><td>68</td><td>0</td><td>0</td><td>1</td><td>0</td><td>114</td><td>0</td><td>0</td><td>1</td><td>0</td></t<>	68	0	0	1	0	114	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	69	0	0	1	0	115	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	70	0	0	1	0	116	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
7400101200010 $75$ 00101210010 $76$ 00101220010 $77$ 00101230010 $78$ 00101240010 $79$ 00101250010 $80$ 00101270010 $81$ 00101280010 $82$ 0010130010 $83$ 0010131010 $84$ 00101320010 $86$ 0101330100 $87$ 0010135010 $99$ 0010136010 $91$ 0010137010 $92$ 0010144010 $92$ 0010143010 $94$ 0010143010 $94$ 00101440<										
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
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8100101270010 $82$ 00101280010 $83$ 00101290010 $84$ 00101300010 $84$ 00101310010 $85$ 00101320010 $86$ 00101330010 $87$ 00101350010 $88$ 0010136010 $90$ 0010137010 $91$ 0010139010 $92$ 0010140010 $93$ 0010141010 $94$ 0010141010 $96$ 0101430010 $98$ 0010144010 $99$ 0010144010 $101$ 010144010 $102$ 001015501										
8200101280010 $83$ 00101290010 $84$ 00101300010 $85$ 00101310010 $86$ 00101320010 $87$ 00101330010 $88$ 00101340010 $90$ 0010135010 $90$ 010137010 $91$ 0010138010 $92$ 0010140010 $93$ 0010140010 $94$ 0010141010 $96$ 0010143010 $98$ 0010144010 $100$ 010147010 $101$ 010148010 $102$ 010150010 $103$ 0101510010 $104$ 0 <td></td>										
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
840010130010 $85$ 0010131010 $86$ 00101320010 $87$ 00101330010 $87$ 00101330010 $88$ 00101340010 $90$ 00101350010 $90$ 00101370010 $91$ 0010138010 $92$ 0010139010 $93$ 0010140010 $94$ 0010141010 $96$ 0010142010 $97$ 0010143010 $98$ 0010144010 $99$ 0010147010 $100$ 010147010 $101$ 010149010 $102$ 0010150010 $103$										
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
8600101320010 $87$ 00101330010 $88$ 00101340010 $89$ 00101350010 $90$ 00101360010 $91$ 00101370010 $92$ 0010138010 $93$ 0010139010 $94$ 0010140010 $95$ 0010142010 $96$ 0010143010 $97$ 0010143010 $98$ 010144010 $100$ 010146010 $101$ 010148010 $102$ 010150010 $103$ 010151010 $104$ 010151010 $104$ 010151010 $104$ 0101510										
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
8800101340010 $89$ 00101350010 $90$ 00101360010 $91$ 00101370010 $92$ 00101380010 $93$ 00101390010 $94$ 0010140010 $94$ 0010141010 $95$ 00101420010 $96$ 0101430010 $97$ 0010145010 $98$ 0010144010 $100$ 010147010 $101$ 010147010 $102$ 0010150010 $103$ 0010151010 $104$ 0101510010 $104$ 0010151010 $104$ 0010153010										
8900101350010900010136001091001013700109200101380010930010139001094001014000109500101410010960010143001097001014401098001014501099001014601010100101470101020010149010103001015001010401015100101050010152001010601015300101080010154010										
900010136010 $91$ 00101370010 $92$ 00101380010 $93$ 00101390010 $94$ 00101400010 $95$ 00101410010 $96$ 00101430010 $97$ 0010144010 $98$ 0010145010 $99$ 0010146010 $100$ 0101470010 $101$ 010149010 $102$ 010149010 $103$ 010150010 $104$ 010151010 $105$ 0010153010 $106$ 010153010 $107$ 010154010 $109$ 0010155010				1			0		1	0
910010 $137$ 0010 $92$ 0010 $138$ 0010 $93$ 0010 $139$ 0010 $94$ 00101400010 $95$ 00101410010 $96$ 00101420010 $97$ 00101430010 $98$ 0010145010 $99$ 0010145010 $100$ 010147010 $101$ 0010148010 $102$ 010150010 $103$ 010151010 $104$ 010151010 $106$ 010153010 $107$ 010153010 $109$ 010155010							0			0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$		0	0	1	0		0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	91	0	0	1	0	137	0	0	1	0
9400101400010 $95$ 00101410010 $96$ 00101420010 $97$ 00101430010 $98$ 00101440010 $99$ 00101450010 $100$ 010146010010 $101$ 00101470010 $102$ 0010148010 $103$ 0010150010 $104$ 0010151010 $106$ 010153010 $107$ 010154010 $109$ 010155010	92	0	0	1	0	138	0	0	1	0
9500101410010 $96$ 00101420010 $97$ 00101430010 $98$ 00101440010 $98$ 00101440010 $99$ 00101450010 $100$ 0101460010 $101$ 0101470010 $102$ 0010148010 $103$ 0010150010 $104$ 0010151010 $105$ 0010152010 $106$ 010153010 $108$ 0010154010 $109$ 0010155010	93	0	0	1	0	139	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	94	0	0	1	0	140	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	95	0	0	1	0	141	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	96	0	0	1	0	142	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	97	0	0	1	0	143	0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	98	0	0	1	0		0	0	1	0
$\begin{array}{cccccccccccccccccccccccccccccccccccc$		0	0	1			0			
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
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$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
$\begin{array}{cccccccccccccccccccccccccccccccccccc$										
108       0       0       1       0       154       0       0       1       0         109       0       0       1       0       155       0       0       1       0										
109 0 0 1 0 155 0 0 1 0										
	110	U	0	1	U	156	0	0	1	0

157	0	0	1	0	203	0	0	1	0
158	0	0	1	0	204	0	0	1	0
159	0	0	1	0	205	0	0	1	0
160	0	0	1	0	206	0	0	1	0
161	0	0	1	0	207	0	0	1	0
162	0	ů 0	1	Ő	208	0	0	1	0
163	0	0	1	0	200	0	0	1	0
164	0	0		0	20)	0	0		
			1					1	0
165	0	0	1	0	211	0	0	1	0
166	0	0	1	0	212	0	0	1	0
167	0	0	1	0	213	0	0	1	0
168	0	0	1	0	214	0	0	1	0
169	0	0	1	0	215	0	0	1	0
170	0	0	1	0	216	0	0	1	0
171	0	0	1	0	217	0	0	1	0
172	0	0	1	0	218	0	0	1	0
173	0	0	1	0	219	0	0	1	0
174	0	0	1	0	220	0	0	1	0
175	0	ů 0	1	Ő	221	0	0	1	0
176	0	0	1	0	221	0	0	1	0
170	0	0	1	0	222	0	0	1	0
					223 224				
178	0	0	1	0		0	0	1	0
179	0	0	1	0	225	0	0	1	0
180	0	0	1	0	226	0	0	1	0
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184	0	0	1	0	230	0	0	1	0
185	0	0	1	0	231	0	0	1	0
186	0	0	1	0	232	0	0	1	0
187	0	0	1	0	233	0	0	1	0
188	0	0	1	0	234	0	0	1	0
189	0	0	1	0	235	0	0	1	0
190	0	ů 0	1	Ő	236	0	0	1	0
191	0	0	1	0	230	0	0	1	0
192	0	0	1	0	238	0	0	1	0
192	0	0	1	0	238	0			
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194	0	0	1	0	240	0	0	1	0
195	0	0	1	0	241	0	0	1	0
196	0	0	1	0	242	0	0	1	0
197	0	0	1	0	243	0	0	1	0
198	0	0	1	0	244	0	0	1	0
199	0	0	1	0	245	0	0	1	0
200	0	0	1	0	246	0	0	1	0
201	0	0	1	0	247	0	0	1	0
202	0	0	1	0	248	0	0	1	0

249	0	0	1	0	295	0	0	1	0
250	0	0	1	0	296	0	0	1	0
251	0	0	1	0	297	0	0	1	0
252	0	0	1	0	298	0	0	1	0
253	0	0	1	0	299	0	0	1	0
254	0	0	1	0	300	0	0	1	0
255	0	0	1	0	301	0	0	1	0
256	0	0	1	0	302	0	0	1	0
250 257	0	0	1	0	302	0	0	1	0
258	0	0	1	0	303 304	0	0	1	0
250 259	0	0	1	0	305	0	0	1	0
260	0	0	1	0	306	0	0	1	0
261	0	0	1	0	307	0	0	1	0
262	0	0	1	0	308	0	0	1	0
263	0	0	1	0	309	0	0	1	0
264	0	0	1	0	310	0	0	1	0
265	0	0	1	0	311	0	0	1	0
266	0	0	1	0	312	0	0	1	0
267	0	0	1	0	313	0	0	1	0
268	0	0	1	0	314	0	0	1	0
269	0	0	1	0	315	0	0	1	0
270	0	0	1	0	316	0	0	1	0
271	0	0	1	0	317	0	0	1	0
272	0	0	1	0	318	0	0	1	0
273	0	0	1	0	319	0	0	1	0
274	0	ů 0	1	Ő	320	Ő	0	1	0
275	0	ů 0	1	Ő	321	Ő	0	1	Ő
276	0	0	1	0	322	0	0	1	0
270	0	0	1	0	322	0	0	1	0
278	0	0	1	0	323	0	0	1	0
278	0	0	1	0	325	0	0	1	0
			1						
280	0	0		0	326	0	0	1	0
281	0	0	1	0	327	0	0	1	0
282	0	0	1	0	328	0	0	1	0
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284	0	0	1	0	330	0	0	1	0
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287	0	0	1	0	333	0	0	1	0
288	0	0	1	0	334	0	0	1	0
289	0	0	1	0	335	0	0	1	0
290	0	0	1	0	336	0	0	1	0
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292	0	0	1	0	338	0	0	1	0
293	0	0	1	0	339	0	0	1	0
294	0	0	1	0	340	0	0	1	0
	-	-	-	-		-	-	-	-

341	0	0	1	0	387	0	0	1	0
342	0	0	1	0	388	0	0	1	0
343	0	0	1	0	389	0	0	1	0
344	0	0	1	0	390	0	0	1	0
345	0	0	1	0	391	0	0	1	0
346	0	Ő	1	0	392	0	ů 0	1	0
347	0	0	1	0	393	0	0	1	0
348	0	0	1	0	394	0	0	1	0
349	0	0	1	0	394 395	0	0	1	0
349	0	0	1	0	395 396	0	0	1	0
351	0	0	1	0	397	0	0	1	0
352	0	0	1	0	398	0	0	1	0
353	0	0	1	0	399	0	0	1	0
354	0	0	1	0	400	0	0	1	0
355	0	0	1	0	401	0	0	1	1
356	0	0	1	0	402	0	0	1	1
357	0	0	1	0	403	0	0	1	1
358	0	0	1	0	404	0	0	1	1
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360	0	0	1	0	406	0	0	1	1
361	0	0	1	0	407	0	0	1	1
362	0	0	1	0	408	0	0	1	1
363	0	0	1	0	409	0	0	1	1
364	0	0	1	0	410	0	0	1	1
365	0	0	1	0	411	0	0	1	1
366	Ő	ů 0	1	0	412	0	0 0	1	1
367	Ő	ů 0	1	0	413	0	ů 0	1	1
368	0	0	1	0	414	0	0	1	1
369	0	0	1	0	415	0	0	1	1
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371	0	0	1	0	417	0	0	1	1
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372		0	1	0	418	0	0	1	1
373	0	0	1	0	419	0	0	1	1
374	0	0	1	0	420	0	0	1	1
375	0	0	1	0	421	0	0	1	0
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377	0	0	1	0	423	0	0	1	0
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379	0	0	1	0	425	0	0	1	0
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381	0	0	1	0	427	0	0	1	0
382	0	0	1	0	428	0	0	1	0
383	0	0	1	0	429	0	0	1	0
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386	0	0	1	0	432	0	0	1	0

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435	0	0	1	0	481	0	0	1	0
436	0	0	1	0	482	0	0	1	0
437	0	0	1	0	483	0	0	1	0
438	0	0	1	0	484	0	0	1	0
439	0	0	1	0	485	0	0	1	0
440	0	0	1	0	486	0	0	1	0
441	0	0	1	0	487	0	0	1	0
442	0	0	1	0	488	0	0	1	0
443	0	0	1	0	489	0	0	1	0
444	0	0	1	0	490	0	0	1	0
445	Õ	0 0	1	0	491	0	0	1	0
446	0	0	1	0	492	0	0	1	0
447	0	0 0	1	0	493	0	0	1	0
448	0	0	1	0	494	0	0	1	0
449	0	ů 0	1	ů 0	495	Ő	0 0	1	0
450	0	ů 0	1	0	496	0	0	1	0
451	0	0	1	0	497	0	0	1	0
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454	0	0	1	0	500	0	0	1	0
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456	0	0	1	0	502	0	0	1	0
457	0	0	1	0	502	0	0	1	0
458	0	0	1	0	503 504	0	0	1	0
459	0	0	1	0	505	0	0	1	0
460	0	0	1	0	506	0	0	1	0
461	0	0	1	0	500 507	0	0	1	0
462	0	0	1	0	508	0	0	1	0
463	0	0	1	0	509	0	0	1	0
464	0	0	1	0	510	0	0	1	0
465	0	0	1	0	511	0	0	1	0
466	0	0	1	0	512	0	0	1	0
467	0	0	1	0	512	0	0	1	0
468	0	0	1	0	514	0	0	1	0
469	0	0	1	0	515	0	0	1	0
470	0	0	1	0	516	0	0	1	0
471	0	0	1	0	517	0	0	1	0
472	0	0	1	0	518	0	0	1	0
473	0	0	1	0	519	0	0	1	0
474	0	0	1	0	520	0	0	1	0
474 475	0	0	1	0	520 521	0	0	1	0
476 477	$\begin{array}{c} 0\\ 0\end{array}$	0 0	1 1	0	522 523	0	0	1	0
477 478	0	0	1	0	523 524	0	0	1 1	0
4/0	U	U	1	0	324	0	0	1	0

525	0	0	1	0	571	0	0	1	0
526	0	0	1	0	572	0	0	1	0
527	0	0	1	0	573	0	0	1	0
528	0	0	1	0	574	0	0	1	0
529	0	0	1	0	575	0	0	1	0
530	0	Ő	1	0	576	0	0 0	1	0
531	0	0	1	0 0	577	0	0	1	0
532	0	0	1	0	578	0	0	1	0
533	0	0	1	0	578 579	0	0	1	0
535 534	0	0	1	0	580	0	0	1	0
535	0	0	1	0	581	0	0	1	0
536	0	0	1	0	582	0	0	1	0
537	0	0	1	0	583	0	0	1	0
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539	0	0	1	0	585	0	0	1	0
540	0	0	1	0	586	0	0	1	0
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544	0	0	1	0	590	0	0	1	0
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547	0	0	1	0	593	0	0	1	0
548	0	0	1	0	594	0	0	1	0
549	0	0	1	0	595	0	0	1	0
550	Ő	ů 0	1	Ő	596	Ő	0 0	1	0
551	0	Ő	1	Ő	597	Õ	0	1	0
552	0	0	1	0	598	0	0	1	0
553	0	0	1	0	599	0	0	1	0
555 554	0	0	1	0	600	0	0	1	0
555	0	0	1	0	601	0	0	1	0
	0				602				
556		0	1	0		0	0	1	0
557	0	0	1	0	603	0	0	1	0
558	0	0	1	0	604	0	0	1	0
559	0	0	1	0	605	0	0	1	0
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566	0	0	1	0	612	0	0	1	0
567	0	0	1	0	613	0	0	1	0
568	0	0	1	0	614	0	0	1	0
569	0	0	1	0	615	0	0	1	0
570	0	0	1	0	616	0	0	1	0

617	0	0	1	0	663	0	0	1	0
618	0	0	1	0	664	0	0	1	0
619	0	0	1	0	665	0	0	1	0
620	0	0	1	0	666	0	0	1	0
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622	0	0	1	0	668	0	0	1	0
623	0	0	1	0	669	0	0	1	0
624	0	0	1	0	670	0	0	1	0
625	0	ů 0	1	0	671	0	0 0	1	0
626	0	ů 0	1	0 0	672	0	0 0	1	0
627	0	ů 0	1	0	673	0	0	1	0
628	0	0	1	0	674	0	0	1	0
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631	0	0	1	0	677	0	0	1	0
632	0	0	1	0	678	0	0	1	0
633	0	0	1	0	679	0	0	1	0
					680				
634 635	0	0 0	1	0		0	0	1	0
635	0		1	0	681	0	0	1	0
636	0	0	1	0	682	0	0	1	0
637	0	0	1	0	683	0	0	1	0
638	0	0	1	0	684 685	0	0	1	0
639	0	0	1	0	685	0	0	1	0
640	0	0	1	0	686	0	0	1	0
641	0	0	1	0	687	0	0	1	0
642	0	0	1	0	688	0	0	1	0
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644	0	0	1	0	690	0	0	1	0
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646	0	0	1	0	692	0	0	1	0
647	0	0	1	0	693	0	0	1	0
648	0	0	1	0	694	0	0	1	0
649	0	0	1	0	695	0	0	1	0
650	0	0	1	0	696	0	0	1	0
651	0	0	1	0	697	0	0	1	0
652	0	0	1	0	698	0	0	1	0
653	0	0	1	0	699	0	0	1	0
654	0	0	1	0	700	0	0	1	0
655	0	0	1	0	701	0	0	1	0
656	0	0	1	0	702	0	0	1	0
657	0	0	1	0	703	0	0	1	0
658	0	0	1	0	704	0	0	1	0
659	0	0	1	0 0	705	0	ů 0	1	0
660	0	0	1	0	706	0	0	1	0
661	0	0	1	0	700	0	0	1	0
662	0	0	1	0	707	0	0	1	0
002	0	U	I	U	700	0	U	I	U

709	0	0	1	0	755	0	0	1	0
710	0	0	1	0	756	0	0	1	0
711	0	0	1	0	757	0	0	1	0
712	0	0	1	0	758	0	0	1	0
713	0	0	1	0	759	0	0	1	0
714	0	0	1	0	760	0	0	1	0
715	0	0	1	0	761	0	0	1	0
716	0	0	1	0	762	0	0	1	0
717	0	0	1	0	763	0	0	1	0
718	0	0	1	0	764	0	0	1	0
719	0	0	1	0	765	0	0	1	0
720	0	0	1	0	766	0	0	1	0
721	0	0	1	0	767	0	0	1	0
722	0	0	1	0	768	0	0	1	0
723	0	ů 0	1	0	769	0	0	1	0
724	0	0	1	0	770	0	0	1	0
725	0	ů 0	1	ů 0	771	Ő	0	1	Ő
726	0	ů 0	1	0	772	0	0	1	0
727	0	ů 0	1	0	773	Ő	0	1	0
728	0	0	1	0	774	0	0	1	0
729	0	0	1	0	775	0	0	1	0
730	0	0	1	0	776	0	0	1	0
731	0	0	1	0	777	0	0	1	0
732	0	0	1	0	778	0	0	1	0
733	0	0	1	0	779	0	0	1	0
734	0	0	1	0	780	0	0	1	0
735	0	0	1	0	781	0	0	1	0
736	0	0	1	0	782	0	0	1	0
737	0	0	1	0	782	0	0	1	0
738	0	0	1	0	783 784	0	0	1	0
739	0	0	1	0	785	0	0	1	0
740	0	0	1	0	785 786	0	0	1	0
741	0	0	1	0	787	0	0	1	0
742	0	0	1	0	788	0	0	1	0
743	0	0	1	0	789	0	0	1	0
744	0	0	1	0	790	0	0	1	0
745	0	0	1	0	791	0	0	1	0
746	0	0	1	0	791 792	0	0	1	0
747	0	0	1	0	793	0	0	1	0
748	0	0	1	0	794	0	0	1	0
749	0	0	1	0	795	0	0	1	0
750	0	0	1	0	795 796	0	0	1	0
750 751	0	0	1	0	790 797	0	0	1	0
752	0	0	1	0	797 798	0	0	1	
752 753	0	0	1	0	798 799	0			0 0
755 754	0	0	1	0	799 800	0	0 0	1 1	0
734	U	U	1	U	000	0	0	1	U

801	0	0	1	0	811	0	0	1	1
802	0	0	1	0	812	0	0	1	1
803	0	0	1	0	813	0	0	1	1
804	0	0	1	0	814	0	0	1	1
805	0	0	1	0	815	0	0	1	1
806	0	0	1	0	816	0	0	1	1
807	0	0	1	0	817	0	0	1	1
808	0	0	1	0	818	0	0	1	1
809	0	0	1	0	819	0	0	1	1
810	0	0	1	0	820	0	0	1	1

! DISPlacement nodal boundary displacements ! node1 ngen1 (d(i, node1), i = 1...NDF) (pg. 265) ! where d(j,node) Đ Value of displacement for j-dof DISPlacement

lacement		
10000	32 0 0 0 0	63 0 0 0 0
20000	33 0 0 0 0	64 0 0 0 0
30000	34 0 0 0 0	$65\ 0\ 0\ 0\ 0$
40000	35 0 0 0 0	66 0 0 0 0 0
50000	36 0 0 0 0	$67\ 0\ 0\ 0\ 0$
60000	37 0 0 0 0	$68\ 0\ 0\ 0\ 0$
70000	38 0 0 0 0	69 0 0 0 0
80000	39 0 0 0 0	$70\ 0\ 0\ 0\ 0$
90000	40 0 0 0 0 0	$71\ 0\ 0\ 0\ 0$
10 0 0 0 0	41 0 0 0 0	$72\ 0\ 0\ 0\ 0$
11 0 0 0 0	42 0 0 0 0	73 0 0 0 0
120000	43 0 0 0 0	$74\ 0\ 0\ 0\ 0$
13 0 0 0 0	44 0 0 0 0	$75\ 0\ 0\ 0\ 0$
$14\ 0\ 0\ 0\ 0$	45 0 0 0 0	$76\ 0\ 0\ 0\ 0$
15 0 0 0 0	46 0 0 0 0	$77\ 0\ 0\ 0\ 0$
160000	47 0 0 0 0	$78\ 0\ 0\ 0\ 0$
17 0 0 0 0	$48\ 0\ 0\ 0\ 0$	79 0 0 0 0
18 0 0 0 0	49 0 0 0 0	80 0 0 0 0
190000	50 0 0 0 0 0	81 0 0 0 0
20 0 0 0 0	51 0 0 0 0	82 0 0 0 0
21 0 0 0 0	52 0 0 0 0	83 0 0 0 0
22 0 0 0 0	53 0 0 0 0	84 0 0 0 0
23 0 0 0 0	$54\ 0\ 0\ 0\ 0$	85 0 0 0 0
24 0 0 0 0	55 0 0 0 0	86 0 0 0 0
25 0 0 0 0	56 0 0 0 0	87 0 0 0 0
26 0 0 0 0	57 0 0 0 0	88 0 0 0 0
27 0 0 0 0	58 0 0 0 0	89 0 0 0 0
28 0 0 0 0	59 0 0 0 0	90 0 0 0 0
29 0 0 0 0	60 0 0 0 0 0	91 0 0 0 0
30 0 0 0 0	61 0 0 0 0	92 0 0 0 0
31 0 0 0 0	62 0 0 0 0	93 0 0 0 0

94 0 0 0 0	140 0 0 0 0	186 0 0 0 0
95 0 0 0 0	141 0 0 0 0	187 0 0 0 0
96 0 0 0 0	142 0 0 0 0	$188\ 0\ 0\ 0\ 0$
97 0 0 0 0	143 0 0 0 0	189 0 0 0 0
98 0 0 0 0	144 0 0 0 0	190 0 0 0 0 0
99 0 0 0 0	145 0 0 0 0	191 0 0 0 0
100 0 0 0 0 0	146 0 0 0 0	192 0 0 0 0
101 0 0 0 0	147 0 0 0 0	193 0 0 0 0
102 0 0 0 0	148 0 0 0 0	194 0 0 0 0
103 0 0 0 0	149 0 0 0 0	195 0 0 0 0
104 0 0 0 0	150 0 0 0 0	196 0 0 0 0
105 0 0 0 0	151 0 0 0 0	197 0 0 0 0
106 0 0 0 0	152 0 0 0 0	198 0 0 0 0
107 0 0 0 0	153 0 0 0 0	199 0 0 0 0
108 0 0 0 0	154 0 0 0 0	200 0 0 0 0 0
109 0 0 0 0	155 0 0 0 0	201 0 0 0 0
110 0 0 0 0	156 0 0 0 0	202 0 0 0 0
111 0 0 0 0	157 0 0 0 0	203 0 0 0 0
112 0 0 0 0	158 0 0 0 0	204 0 0 0 0
113 0 0 0 0	159 0 0 0 0	205 0 0 0 0
114 0 0 0 0	160 0 0 0 0 0	206 0 0 0 0 0
115 0 0 0 0	161 0 0 0 0	207 0 0 0 0
116 0 0 0 0	162 0 0 0 0	208 0 0 0 0
117 0 0 0 0	163 0 0 0 0	209 0 0 0 0 0
118 0 0 0 0	164 0 0 0 0	210 0 0 0 0
119 0 0 0 0	165 0 0 0 0	211 0 0 0 0
120 0 0 0 0	166 0 0 0 0 0	212 0 0 0 0
121 0 0 0 0	167 0 0 0 0	213 0 0 0 0
122 0 0 0 0	168 0 0 0 0	214 0 0 0 0
123 0 0 0 0	169 0 0 0 0	215 0 0 0 0
124 0 0 0 0	170 0 0 0 0	216 0 0 0 0
125 0 0 0 0	171 0 0 0 0	217 0 0 0 0
126 0 0 0 0	172 0 0 0 0	218 0 0 0 0
127 0 0 0 0	173 0 0 0 0	219 0 0 0 0
128 0 0 0 0	174 0 0 0 0	220 0 0 0 0 0
129 0 0 0 0	175 0 0 0 0	221 0 0 0 0
130 0 0 0 0	176 0 0 0 0	222 0 0 0 0
131 0 0 0 0	177 0 0 0 0	223 0 0 0 0
132 0 0 0 0	178 0 0 0 0	224 0 0 0 0
133 0 0 0 0	179 0 0 0 0	225 0 0 0 0
134 0 0 0 0	180 0 0 0 0	226 0 0 0 0
135 0 0 0 0	181 0 0 0 0	227 0 0 0 0
136 0 0 0 0	182 0 0 0 0	228 0 0 0 0
137 0 0 0 0	183 0 0 0 0	229 0 0 0 0
138 0 0 0 0	184 0 0 0 0	230 0 0 0 0
139 0 0 0 0	185 0 0 0 0	231 0 0 0 0

232 0 0 0 0	$278\ 0\ 0\ 0\ 0$	324 0 0 0 0
233 0 0 0 0	279 0 0 0 0	325 0 0 0 0
234 0 0 0 0	280 0 0 0 0	326 0 0 0 0
235 0 0 0 0	281 0 0 0 0	320 0 0 0 0 0 327 0 0 0 0 0
236 0 0 0 0	282 0 0 0 0	328 0 0 0 0
237 0 0 0 0	283 0 0 0 0	329 0 0 0 0
238 0 0 0 0	284 0 0 0 0	330 0 0 0 0
239 0 0 0 0	$285\ 0\ 0\ 0\ 0$	331 0 0 0 0
$240\ 0\ 0\ 0\ 0$	286 0 0 0 0	332 0 0 0 0
241 0 0 0 0	287 0 0 0 0	333 0 0 0 0
242 0 0 0 0	$288\ 0\ 0\ 0\ 0$	334 0 0 0 0
243 0 0 0 0	289 0 0 0 0	335 0 0 0 0
244 0 0 0 0	290 0 0 0 0 0	336 0 0 0 0
245 0 0 0 0	291 0 0 0 0	337 0 0 0 0
246 0 0 0 0	292 0 0 0 0	338 0 0 0 0
247 0 0 0 0	293 0 0 0 0	339 0 0 0 0
248 0 0 0 0	294 0 0 0 0	340 0 0 0 0
249 0 0 0 0	295 0 0 0 0	341 0 0 0 0
250 0 0 0 0	296 0 0 0 0	342 0 0 0 0
	297 0 0 0 0	
251 0 0 0 0		343 0 0 0 0
252 0 0 0 0	298 0 0 0 0	344 0 0 0 0
253 0 0 0 0	299 0 0 0 0	345 0 0 0 0
254 0 0 0 0	300 0 0 0 0	346 0 0 0 0
255 0 0 0 0	301 0 0 0 0	347 0 0 0 0
256 0 0 0 0	302 0 0 0 0	348 0 0 0 0
257 0 0 0 0	303 0 0 0 0	349 0 0 0 0
258 0 0 0 0	304 0 0 0 0	350 0 0 0 0
259 0 0 0 0	305 0 0 0 0	351 0 0 0 0
260 0 0 0 0 0	306 0 0 0 0	352 0 0 0 0
261 0 0 0 0	307 0 0 0 0	353 0 0 0 0
262 0 0 0 0	308 0 0 0 0	354 0 0 0 0
263 0 0 0 0	309 0 0 0 0 0	355 0 0 0 0
264 0 0 0 0	310 0 0 0 0	356 0 0 0 0
265 0 0 0 0	311 0 0 0 0	357 0 0 0 0
266 0 0 0 0	312 0 0 0 0	358 0 0 0 0
267 0 0 0 0	313 0 0 0 0	359 0 0 0 0
268 0 0 0 0	313 0 0 0 0	360 0 0 0 0
269 0 0 0 0	315 0 0 0 0	361 0 0 0 0
270 0 0 0 0	316 0 0 0 0	362 0 0 0 0
271 0 0 0 0	317 0 0 0 0	363 0 0 0 0
272 0 0 0 0	318 0 0 0 0	364 0 0 0 0
273 0 0 0 0	319 0 0 0 0	365 0 0 0 0
274 0 0 0 0	320 0 0 0 0 0	366 0 0 0 0
275 0 0 0 0	321 0 0 0 0	367 0 0 0 0
276 0 0 0 0	322 0 0 0 0 0	368 0 0 0 0
277 0 0 0 0	323 0 0 0 0	369 0 0 0 0 0

370 0 0 0 0	416 0 0 0 0 0	462 0 0 0 0 0
371 0 0 0 0	417 0 0 0 0	463 0 0 0 0
372 0 0 0 0	418 0 0 0 0	464 0 0 0 0
373 0 0 0 0	419 0 0 0 0	465 0 0 0 0
374 0 0 0 0	420 0 0 0 0 0	466 0 0 0 0
375 0 0 0 0	421 0 0 0 0	467 0 0 0 0
376 0 0 0 0	422 0 0 0 0	468 0 0 0 0
377 0 0 0 0	423 0 0 0 0	469 0 0 0 0
378 0 0 0 0	424 0 0 0 0	400000
379 0 0 0 0	424 0 0 0 0 0 0 425 0 0 0 0 0	470 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
380 0 0 0 0	426 0 0 0 0	472 0 0 0 0
381 0 0 0 0	427 0 0 0 0	472 0 0 0 0
382 0 0 0 0	427 0 0 0 0 0 428 0 0 0 0 0	473 0 0 0 0
	429 0 0 0 0	
383 0 0 0 0		475 0 0 0 0
384 0 0 0 0	430 0 0 0 0	476 0 0 0 0
385 0 0 0 0	431 0 0 0 0	477 0 0 0 0
386 0 0 0 0	432 0 0 0 0	478 0 0 0 0
387 0 0 0 0	433 0 0 0 0	479 0 0 0 0
388 0 0 0 0	434 0 0 0 0	480 0 0 0 0
389 0 0 0 0	435 0 0 0 0	481 0 0 0 0
390 0 0 0 0	436 0 0 0 0	482 0 0 0 0
391 0 0 0 0	437 0 0 0 0	483 0 0 0 0
392 0 0 0 0	438 0 0 0 0	484 0 0 0 0
393 0 0 0 0	439 0 0 0 0	485 0 0 0 0
394 0 0 0 0	440 0 0 0 0 0	486 0 0 0 0
395 0 0 0 0	441 0 0 0 0	487 0 0 0 0
396 0 0 0 0 0	442 0 0 0 0 0	$488\ 0\ 0\ 0\ 0$
397 0 0 0 0	443 0 0 0 0	489 0 0 0 0
398 0 0 0 0	444 0 0 0 0 0	490 0 0 0 0 0
399 0 0 0 0	445 0 0 0 0 0	491 0 0 0 0
400 0 0 0 0 0	446 0 0 0 0	492 0 0 0 0
401 0 0 0 0	447 0 0 0 0	493 0 0 0 0
402 0 0 0 0 0	$448\ 0\ 0\ 0\ 0$	494 0 0 0 0
403 0 0 0 0 0	449 0 0 0 0 0	495 0 0 0 0
404 0 0 0 0 0	450 0 0 0 0 0	496 0 0 0 0
405 0 0 0 0 0	451 0 0 0 0	497 0 0 0 0
406 0 0 0 0 0	452 0 0 0 0 0	498 0 0 0 0
407 0 0 0 0 0	453 0 0 0 0 0	499 0 0 0 0 0
408 0 0 0 0 0	454 0 0 0 0 0	500 0 0 0 0 0
409 0 0 0 0 0	455 0 0 0 0 0	501 0 0 0 0
410 0 0 0 0 0	456 0 0 0 0 0	502 0 0 0 0 0
411 0 0 0 0	457 0 0 0 0 0	503 0 0 0 0
412 0 0 0 0	458 0 0 0 0	504 0 0 0 0
413 0 0 0 0	459 0 0 0 0 0	505 0 0 0 0
414 0 0 0 0	460 0 0 0 0 0	506 0 0 0 0
415 0 0 0 0	461 0 0 0 0	507 0 0 0 0

508 0 0 0 0	554 0 0 0 0	600 0 0 0 0 0
509 0 0 0 0	555 0 0 0 0	601 0 0 0 0
510 0 0 0 0	556 0 0 0 0	602 0 0 0 0 0
511 0 0 0 0	557 0 0 0 0	603 0 0 0 0
512 0 0 0 0	558 0 0 0 0	604 0 0 0 0
513 0 0 0 0	559 0 0 0 0	605 0 0 0 0
514 0 0 0 0	560 0 0 0 0	606 0 0 0 0
515 0 0 0 0	561 0 0 0 0	607 0 0 0 0
516 0 0 0 0	562 0 0 0 0	608 0 0 0 0
517 0 0 0 0	563 0 0 0 0	609 0 0 0 0 0
	564 0 0 0 0	610 0 0 0 0 0
518 0 0 0 0		
519 0 0 0 0	565 0 0 0 0	611 0 0 0 0
520 0 0 0 0	566 0 0 0 0	612 0 0 0 0
521 0 0 0 0	567 0 0 0 0	613 0 0 0 0
522 0 0 0 0	568 0 0 0 0	614 0 0 0 0
523 0 0 0 0	569 0 0 0 0	615 0 0 0 0
524 0 0 0 0	570 0 0 0 0 0	616 0 0 0 0
525 0 0 0 0	571 0 0 0 0	617 0 0 0 0
526 0 0 0 0	572 0 0 0 0	618 0 0 0 0
527 0 0 0 0	573 0 0 0 0	619 0 0 0 0
528 0 0 0 0	574 0 0 0 0	620 0 0 0 0 0
529 0 0 0 0	575 0 0 0 0	621 0 0 0 0
530 0 0 0 0	576 0 0 0 0	622 0 0 0 0
531 0 0 0 0	577 0 0 0 0	623 0 0 0 0
532 0 0 0 0	578 0 0 0 0	624 0 0 0 0
533 0 0 0 0	579 0 0 0 0	625 0 0 0 0
534 0 0 0 0	580 0 0 0 0	626 0 0 0 0
535 0 0 0 0	581 0 0 0 0	627 0 0 0 0
536 0 0 0 0	582 0 0 0 0	628 0 0 0 0
537 0 0 0 0	583 0 0 0 0	629 0 0 0 0
538 0 0 0 0	584 0 0 0 0	630 0 0 0 0
539 0 0 0 0	585 0 0 0 0	631 0 0 0 0
540 0 0 0 0 0	586 0 0 0 0	632 0 0 0 0
541 0 0 0 0	587 0 0 0 0	633 0 0 0 0
542 0 0 0 0	588 0 0 0 0	634 0 0 0 0
543 0 0 0 0	589 0 0 0 0	635 0 0 0 0
544 0 0 0 0	590 0 0 0 0 0	636 0 0 0 0
545 0 0 0 0	591 0 0 0 0	637 0 0 0 0
546 0 0 0 0	592 0 0 0 0	638 0 0 0 0
547 0 0 0 0	593 0 0 0 0	639 0 0 0 0
548 0 0 0 0	594 0 0 0 0	640 0 0 0 0 0
549 0 0 0 0	595 0 0 0 0	641 0 0 0 0
550 0 0 0 0	596 0 0 0 0	642 0 0 0 0
551 0 0 0 0	597 0 0 0 0	643 0 0 0 0
552 0 0 0 0	598 0 0 0 0	644 0 0 0 0
553 0 0 0 0	599 0 0 0 0	645 0 0 0 0

646 0 0 0 0	692 0 0 0 0	738 0 0 0 0
647 0 0 0 0	693 0 0 0 0	739 0 0 0 0
648 0 0 0 0	694 0 0 0 0	740 0 0 0 0 0
649 0 0 0 0	695 0 0 0 0	741 0 0 0 0
650 0 0 0 0 0	696 0 0 0 0	742 0 0 0 0
651 0 0 0 0	697 0 0 0 0	743 0 0 0 0
652 0 0 0 0	698 0 0 0 0	744 0 0 0 0
653 0 0 0 0	699 0 0 0 0	745 0 0 0 0
654 0 0 0 0	700 0 0 0 0 0	7460000
655 0 0 0 0	701 0 0 0 0	747 0 0 0 0
656 0 0 0 0	702 0 0 0 0	748 0 0 0 0
657 0 0 0 0	703 0 0 0 0	749 0 0 0 0
658 0 0 0 0	704 0 0 0 0	7500000
659 0 0 0 0	705 0 0 0 0	751 0 0 0 0
660 0 0 0 0 0	706 0 0 0 0	7520000
661 0 0 0 0	707 0 0 0 0	753 0 0 0 0
662 0 0 0 0	708 0 0 0 0	754 0 0 0 0
663 0 0 0 0	709 0 0 0 0	755 0 0 0 0
664 0 0 0 0	710 0 0 0 0	7560000
665 0 0 0 0	711 0 0 0 0	757 0 0 0 0
666 0 0 0 0	712 0 0 0 0	758 0 0 0 0
667 0 0 0 0	713 0 0 0 0	7590000
668 0 0 0 0	714 0 0 0 0	760 0 0 0 0 0
669 0 0 0 0	715 0 0 0 0	761 0 0 0 0
670 0 0 0 0 0	716 0 0 0 0	762 0 0 0 0
671 0 0 0 0	717 0 0 0 0	763 0 0 0 0
672 0 0 0 0	718 0 0 0 0	764 0 0 0 0
673 0 0 0 0	719 0 0 0 0	765 0 0 0 0
674 0 0 0 0	720 0 0 0 0	766 0 0 0 0
675 0 0 0 0	721 0 0 0 0	767 0000
676 0 0 0 0 0	722 0 0 0 0	$768\ 0\ 0\ 0\ 0$
677 0 0 0 0	723 0 0 0 0	769 0 0 0 0
678 0 0 0 0	724 0 0 0 0	770 0 0 0 0 0
679 0 0 0 0 0	725 0 0 0 0	771 0 0 0 0
680 0 0 0 0 0	726 0 0 0 0	772 0 0 0 0
681 0 0 0 0	727 0 0 0 0	773 0 0 0 0
682 0 0 0 0	728 0 0 0 0	774 0 0 0 0
683 0 0 0 0	729 0 0 0 0	775 0 0 0 0
684 0 0 0 0	730 0 0 0 0	776 0 0 0 0
685 0 0 0 0	731 0 0 0 0	$777\ 0\ 0\ 0\ 0$
686 0 0 0 0 0	732 0 0 0 0	778 0 0 0 0
687 0 0 0 0	733 0 0 0 0	779 0 0 0 0
688 0 0 0 0	734 0 0 0 0	780 0 0 0 0
689 0 0 0 0 0	735 0 0 0 0	781 0 0 0 0
690 0 0 0 0 0	736 0 0 0 0	782 0 0 0 0
691 0 0 0 0	737 0 0 0 0	783 0 0 0 0

784 0 0 0 0 0	797 0 0 0 0	810 0 0 0 0
785 0 0 0 0	798 0 0 0 0	811 0 0 0 0
786 0 0 0 0 0	799 0 0 0 0	812 0 0 0 0
787 0 0 0 0	800 0 0 0 0 0	813 0 0 0 0
$788\ 0\ 0\ 0\ 0$	801 0 0 0 0	814 0 0 0 0
789 0 0 0 0	802 0 0 0 0	815 0 0 0 0
790 0 0 0 0 0	803 0 0 0 0	816 0 0 0 0
791 0 0 0 0	804 0 0 0 0	817 0 0 0 0
792 0 0 0 0 0	805 0 0 0 0	818 0 0 0 0
793 0 0 0 0	806 0 0 0 0	819 0 0 0 0
794 0 0 0 0	807 0 0 0 0	820 0 0 0 0 0
795 0 0 0 0	808 0 0 0 0	
796 0 0 0 0 0	809 0 0 0 0	

! ANGLe nodal boundary conditions.

! see pp 44, 213, 219. ANGLe

AINC								
1	0	9.00E+01	30	0	9.00E+01	59	0	9.00E+01
2	0	9.00E+01	31	0	9.00E+01	60	0	9.00E+01
3	0	9.00E+01	32	0	9.00E+01	61	0	9.00E+01
4	0	9.00E+01	33	0	9.00E+01	62	0	9.00E+01
5	0	9.00E+01	34	0	9.00E+01	63	0	9.00E+01
6	0	9.00E+01	35	0	9.00E+01	64	0	9.00E+01
7	0	9.00E+01	36	0	9.00E+01	65	0	9.00E+01
8	0	9.00E+01	37	0	9.00E+01	66	0	9.00E+01
9	0	9.00E+01	38	0	9.00E+01	67	0	9.00E+01
10	0	9.00E+01	39	0	9.00E+01	68	0	9.00E+01
11	0	9.00E+01	40	0	9.00E+01	69	0	9.00E+01
12	0	9.00E+01	41	0	9.00E+01	70	0	9.00E+01
13	0	9.00E+01	42	0	9.00E+01	71	0	9.00E+01
14	0	9.00E+01	43	0	9.00E+01	72	0	9.00E+01
15	0	9.00E+01	44	0	9.00E+01	73	0	9.00E+01
16	0	9.00E+01	45	0	9.00E+01	74	0	9.00E+01
17	0	9.00E+01	46	0	9.00E+01	75	0	9.00E+01
18	0	9.00E+01	47	0	9.00E+01	76	0	9.00E+01
19	0	9.00E+01	48	0	9.00E+01	77	0	9.00E+01
20	0	9.00E+01	49	0	9.00E+01	78	0	9.00E+01
21	0	9.00E+01	50	0	9.00E+01	79	0	9.00E+01
22	0	9.00E+01	51	0	9.00E+01	80	0	9.00E+01
23	0	9.00E+01	52	0	9.00E+01	81	0	9.00E+01
24	0	9.00E+01	53	0	9.00E+01	82	0	9.00E+01
25	0	9.00E+01	54	0	9.00E+01	83	0	9.00E+01
26	0	9.00E+01	55	0	9.00E+01	84	0	9.00E+01
27	0	9.00E+01	56	0	9.00E+01	85	0	9.00E+01
28	0	9.00E+01	57	0	9.00E+01	86	0	9.00E+01
29	0	9.00E+01	58	0	9.00E+01	87	0	9.00E+01

00	0	$0.00E \cdot 01$	134	0	$0.000 \pm 0.1$	100	0	$0.00E \cdot 01$
88	0	9.00E+01		0	9.00E+01	180	0	9.00E+01
89 90	0 0	9.00E+01	135 136	0	9.00E+01	181 182	0 0	9.00E+01 9.00E+01
		9.00E+01		0	9.00E+01			
91 02	0	9.00E+01	137	0	9.00E+01	183	0	9.00E+01
92	0	9.00E+01	138	0	9.00E+01	184	0	9.00E+01
93 04	0	9.00E+01	139	0	9.00E+01	185	0	9.00E+01
94 07	0	9.00E+01	140	0	9.00E+01	186	0	9.00E+01
95	0	9.00E+01	141	0	9.00E+01	187	0	9.00E+01
96	0	9.00E+01	142	0	9.00E+01	188	0	9.00E+01
97 00	0	9.00E+01	143	0	9.00E+01	189	0	9.00E+01
98	0	9.00E+01	144	0	9.00E+01	190	0	9.00E+01
99	0	9.00E+01	145	0	9.00E+01	191	0	9.00E+01
100	0	9.00E+01	146	0	9.00E+01	192	0	9.00E+01
101	0	9.00E+01	147	0	9.00E+01	193	0	9.00E+01
102	0	9.00E+01	148	0	9.00E+01	194	0	9.00E+01
103	0	9.00E+01	149	0	9.00E+01	195	0	9.00E+01
104	0	9.00E+01	150	0	9.00E+01	196	0	9.00E+01
105	0	9.00E+01	151	0	9.00E+01	197	0	9.00E+01
106	0	9.00E+01	152	0	9.00E+01	198	0	9.00E+01
107	0	9.00E+01	153	0	9.00E+01	199	0	9.00E+01
108	0	9.00E+01	154	0	9.00E+01	200	0	9.00E+01
109	0	9.00E+01	155	0	9.00E+01	201	0	9.00E+01
110	0	9.00E+01	156	0	9.00E+01	202	0	9.00E+01
111	0	9.00E+01	157	0	9.00E+01	203	0	9.00E+01
112	0	9.00E+01	158	0	9.00E+01	204	0	9.00E+01
113	0	9.00E+01	159	0	9.00E+01	205	0	9.00E+01
114	0	9.00E+01	160	0	9.00E+01	206	0	9.00E+01
115	0	9.00E+01	161	0	9.00E+01	207	0	9.00E+01
116	0	9.00E+01	162	0	9.00E+01	208	0	9.00E+01
117	0	9.00E+01	163	0	9.00E+01	209	0	9.00E+01
118	0	9.00E+01	164	0	9.00E+01	210	0	9.00E+01
119	0	9.00E+01	165	0	9.00E+01	211	0	9.00E+01
120	0	9.00E+01	166	0	9.00E+01	212	0	9.00E+01
121	0	9.00E+01	167	0	9.00E+01	213	0	9.00E+01
122	0	9.00E+01	168	0	9.00E+01	214	0	9.00E+01
123	0	9.00E+01	169	0	9.00E+01	215	0	9.00E+01
124	0	9.00E+01	170	0	9.00E+01	216	0	9.00E+01
125	0	9.00E+01	171	0	9.00E+01	217	0	9.00E+01
126	0	9.00E+01	172	0	9.00E+01	218	0	9.00E+01
127	0	9.00E+01	173	0	9.00E+01	219	0	9.00E+01
128	0	9.00E+01	174	0	9.00E+01	220	0	9.00E+01
129	0	9.00E+01	175	0	9.00E+01	221	0	9.00E+01
130	0	9.00E+01	176	0	9.00E+01	222	0	9.00E+01
131	0	9.00E+01	177	0	9.00E+01	223	0	9.00E+01
132	0	9.00E+01	178	0	9.00E+01	224	0	9.00E+01
133	0	9.00E+01	179	0	9.00E+01	225	0	9.00E+01

226	0	9.00E+01	272	0	9.00E+01	318	0	9.00E+01
220	0	9.00E+01	272	0	9.00E+01	319	0	9.00E+01
228	0	9.00E+01	273	0	9.00E+01	320	0	9.00E+01
220 229	0	9.00E+01	274	0	9.00E+01	320	0	9.00E+01
229	0	9.00E+01	275	0	9.00E+01	321	0	9.00E+01
230	0	9.00E+01	270	0	9.00E+01 9.00E+01	322	0	9.00E+01
231	0	9.00E+01	277	0	9.00E+01	323 324	0	9.00E+01
232	0	9.00E+01	278	0	9.00E+01	324 325	0	9.00E+01 9.00E+01
233 234	0	9.00E+01 9.00E+01	279	0	9.00E+01	323 326	0	9.00E+01 9.00E+01
234 235	0	9.00E+01 9.00E+01	280 281	0	9.00E+01	320	0	9.00E+01 9.00E+01
235 236	0	9.00E+01	281	0	9.00E+01	327	0	9.00E+01 9.00E+01
	0				9.00E+01	328 329	0	9.00E+01 9.00E+01
237 238	0	9.00E+01 9.00E+01	283 284	0	9.00E+01 9.00E+01	329 330	0	9.00E+01 9.00E+01
	-		284 285	0		330 331	0	
239	0	9.00E+01	283 286	0	9.00E+01			9.00E+01
240	0	9.00E+01		0	9.00E+01	332	0	9.00E+01
241	0	9.00E+01	287	0	9.00E+01	333	0	9.00E+01
242	0	9.00E+01	288	0	9.00E+01	334	0	9.00E+01
243	0	9.00E+01	289	0	9.00E+01	335	0	9.00E+01
244	0	9.00E+01	290	0	9.00E+01	336	0	9.00E+01
245	0	9.00E+01	291	0	9.00E+01	337	0	9.00E+01
246	0	9.00E+01	292	0	9.00E+01	338	0	9.00E+01
247	0	9.00E+01	293	0	9.00E+01	339	0	9.00E+01
248	0	9.00E+01	294	0	9.00E+01	340	0	9.00E+01
249	0	9.00E+01	295	0	9.00E+01	341	0	9.00E+01
250	0	9.00E+01	296	0	9.00E+01	342	0	9.00E+01
251	0	9.00E+01	297	0	9.00E+01	343	0	9.00E+01
252	0	9.00E+01	298	0	9.00E+01	344	0	9.00E+01
253	0	9.00E+01	299	0	9.00E+01	345	0	9.00E+01
254	0	9.00E+01	300	0	9.00E+01	346	0	9.00E+01
255	0	9.00E+01	301	0	9.00E+01	347	0	9.00E+01
256	0	9.00E+01	302	0	9.00E+01	348	0	9.00E+01
257	0	9.00E+01	303	0	9.00E+01	349	0	9.00E+01
258	0	9.00E+01	304	0	9.00E+01	350	0	9.00E+01
259	0	9.00E+01	305	0	9.00E+01	351	0	9.00E+01
260	0	9.00E+01	306	0	9.00E+01	352	0	9.00E+01
261	0	9.00E+01	307	0	9.00E+01	353	0	9.00E+01
262	0	9.00E+01	308	0	9.00E+01	354	0	9.00E+01
263	0	9.00E+01	309	0	9.00E+01	355	0	9.00E+01
264	0	9.00E+01	310	0	9.00E+01	356	0	9.00E+01
265	0	9.00E+01	311	0	9.00E+01	357	0	9.00E+01
266	0	9.00E+01	312	0	9.00E+01	358	0	9.00E+01
267	0	9.00E+01	313	0	9.00E+01	359	0	9.00E+01
268	0	9.00E+01	314	0	9.00E+01	360	0	9.00E+01
269	0	9.00E+01	315	0	9.00E+01	361	0	9.00E+01
270	0	9.00E+01	316	0	9.00E+01	362	0	9.00E+01
271	0	9.00E+01	317	0	9.00E+01	363	0	9.00E+01

364	0	9.00E+01	410	0	9.00E+01	456	0	8.64E+01
365	0	9.00E+01	411	0	8.64E+01	457	0	8.64E+01
366	0	9.00E+01	412	0	8.64E+01	458	0	8.64E+01
367	0	9.00E+01	413	0	8.64E+01	459	0	8.64E+01
368	0	9.00E+01	414	0	8.64E+01	460	0	8.64E+01
369	0	9.00E+01	415	0	8.64E+01	461	0	8.64E+01
370	0	9.00E+01	416	0	8.64E+01	462	0	8.64E+01
371	0	9.00E+01	417	0	8.64E+01	463	0	8.64E+01
372	0	9.00E+01	418	0	8.64E+01	464	0	8.64E+01
373	0	9.00E+01	419	0	8.64E+01	465	0	8.64E+01
374	0	9.00E+01	420	0	8.64E+01	466	0	8.64E+01
375	0	9.00E+01	421	0	8.64E+01	467	0	8.64E+01
376	0	9.00E+01	422	0	8.64E+01	468	0	8.64E+01
377	0	9.00E+01	423	0	8.64E+01	469	0	8.64E+01
378	0	9.00E+01	424	0	8.64E+01	470	0	8.64E+01
379	0	9.00E+01	425	0	8.64E+01	471	0	8.64E+01
380	0	9.00E+01	426	Ő	8.64E+01	472	0	8.64E+01
381	0	9.00E+01	427	Ő	8.64E+01	473	0	8.64E+01
382	0	9.00E+01	428	0	8.64E+01	474	0	8.64E+01
383	0	9.00E+01	429	0	8.64E+01	475	0	8.64E+01
384	0	9.00E+01	430	0	8.64E+01	476	0	8.64E+01
385	0	9.00E+01	431	0	8.64E+01	477	0	8.64E+01
386	0	9.00E+01	432	0	8.64E+01	478	0	8.64E+01
387	0	9.00E+01	433	0	8.64E+01	479	0	8.64E+01
388	0	9.00E+01	434	0	8.64E+01	480	0	8.64E+01
389	0	9.00E+01	435	0	8.64E+01	481	0	8.64E+01
390	0	9.00E+01	436	0	8.64E+01	482	0	8.64E+01
391	0	9.00E+01	437	0	8.64E+01	483	0	8.64E+01
392	0	9.00E+01	438	0	8.64E+01	484	0	8.64E+01
393	0	9.00E+01	439	0	8.64E+01	485	0	8.64E+01
394	0	9.00E+01	440	0	8.64E+01	486	0	8.64E+01
395	0	9.00E+01	441	0	8.64E+01	487	0	8.64E+01
396	0	9.00E+01	442	0	8.64E+01	488	0	8.64E+01
397	0	9.00E+01	443	0	8.64E+01	489	0	8.64E+01
398	0	9.00E+01	444	0	8.64E+01	490	0	8.64E+01
399	0	9.00E+01	445	0	8.64E+01	491	0	8.64E+01
400	0	9.00E+01	446	0	8.64E+01	492	0	8.64E+01
401	0	9.00E+01	447	0	8.64E+01	493	0	8.64E+01
402	0	9.00E+01	448	0	8.64E+01	494	0	8.64E+01
403	0	9.00E+01	449	0	8.64E+01	495	0	8.64E+01
403	0	9.00E+01	449	0	8.64E+01	495	0	8.64E+01
404	0	9.00E+01	450 451	0	8.64E+01	490 497	0	8.64E+01
403 406	0	9.00E+01 9.00E+01	431 452	0	8.64E+01	497 498	0	8.64E+01 8.64E+01
400 407	0	9.00E+01	4 <i>32</i> 453	0	8.64E+01	498 499	0	8.64E+01 8.64E+01
407 408	0	9.00E+01 9.00E+01	433 454	0	8.64E+01 8.64E+01	499 500	0	8.64E+01 8.64E+01
408 409	0	9.00E+01 9.00E+01	434 455	0	8.64E+01 8.64E+01	500 501	0	8.64E+01 8.64E+01
409	U	9.00L+01	433	U	0.0 <del>4</del> £+01	301	U	0.04E+01

502	0	8.64E+01	548	0	8.64E+01	594	0	8.64E+01
503	0	8.64E+01	549	0	8.64E+01	595	0	8.64E+01
504	0	8.64E+01	550	0	8.64E+01	596	0	8.64E+01
505	0	8.64E+01	551	0	8.64E+01	597	0	8.64E+01
506	0	8.64E+01	552	0	8.64E+01	598	0	8.64E+01
507	0	8.64E+01	553	0	8.64E+01	599	0	8.64E+01
508	0	8.64E+01	554	0	8.64E+01	600	0	8.64E+01
509	0	8.64E+01	555	0	8.64E+01	601	0	8.64E+01
510	0	8.64E+01	556	0	8.64E+01	602	0	8.64E+01
511	0	8.64E+01	557	0	8.64E+01	603	0	8.64E+01
512	0	8.64E+01	558	0	8.64E+01	604	0	8.64E+01
513	0	8.64E+01	559	0	8.64E+01	605	0	8.64E+01
514	0	8.64E+01	560	0	8.64E+01	606	0	8.64E+01
515	0	8.64E+01	561	0	8.64E+01	607	0	8.64E+01
516	0	8.64E+01	562	0	8.64E+01	608	0	8.64E+01
517	0	8.64E+01	563	0	8.64E+01	609	0	8.64E+01
518	0	8.64E+01	564	0	8.64E+01	610	0	8.64E+01
519	0	8.64E+01	565	0	8.64E+01	611	0	8.64E+01
520	0	8.64E+01	566	0	8.64E+01	612	0	8.64E+01
521	0	8.64E+01	567	0	8.64E+01	613	0	8.64E+01
522	0	8.64E+01	568	Õ	8.64E+01	614	0	8.64E+01
523	0	8.64E+01	569	Ő	8.64E+01	615	0	8.64E+01
524	0	8.64E+01	570	Ő	8.64E+01	616	0	8.64E+01
525	0	8.64E+01	571	0	8.64E+01	617	0	8.64E+01
526	0	8.64E+01	572	0	8.64E+01	618	0	8.64E+01
520 527	0	8.64E+01	573	0	8.64E+01	619	0	8.64E+01
528	0	8.64E+01	574	0	8.64E+01	620	0	8.64E+01
529	0	8.64E+01	575	0	8.64E+01	621	0	8.64E+01
530	0	8.64E+01	576	0	8.64E+01	622	0	8.64E+01
531	0	8.64E+01	577	0	8.64E+01	623	0	8.64E+01
532	0	8.64E+01	578	0	8.64E+01	624	0	8.64E+01
533	0	8.64E+01	579	0	8.64E+01	625	0	8.64E+01
534	0	8.64E+01	580	0	8.64E+01	626	0	8.64E+01 8.64E+01
535	0	8.64E+01	581	0	8.64E+01	627	0	8.64E+01
536	0	8.64E+01	582	0	8.64E+01	628	0	8.64E+01
530 537	0	8.64E+01	583	0	8.64E+01	629	0	8.64E+01
538	0	8.64E+01	583 584	0	8.64E+01	630	0	8.64E+01 8.64E+01
539	0	8.64E+01	585	0	8.64E+01	631	0	8.64E+01
539 540	0	8.64E+01	585 586	0	8.64E+01	632	0	8.64E+01
540 541	0	8.64E+01	580 587	0	8.64E+01	633	0	8.64E+01 8.64E+01
541 542	0	8.64E+01	588	0	8.64E+01	634	0	8.64E+01 8.64E+01
542 543	0	8.64E+01			8.64E+01	635		8.64E+01 8.64E+01
545 544	0	8.64E+01 8.64E+01	589 590	$\begin{array}{c} 0 \\ 0 \end{array}$	8.64E+01 8.64E+01	636	$\begin{array}{c} 0\\ 0\end{array}$	8.64E+01
544 545	0							
	-	8.64E+01	591 502	0	8.64E+01	637 638	0	8.64E+01
546 547	0	8.64E+01	592 503	0	8.64E+01	638 630	0	8.64E+01
547	0	8.64E+01	593	0	8.64E+01	639	0	8.64E+01

640	0	8.64E+01	686	0	8.64E+01	732	0	8.64E+01
641	0	8.64E+01	687	0	8.64E+01	733	0	8.64E+01
642	0	8.64E+01	688	0	8.64E+01	734	0	8.64E+01
643	0	8.64E+01	689	0	8.64E+01	735	0	8.64E+01
644	0	8.64E+01	690	0	8.64E+01	736	0	8.64E+01
645	0	8.64E+01	691	0	8.64E+01	737	0	8.64E+01
646	0	8.64E+01	692	0	8.64E+01	738	0	8.64E+01
647	0	8.64E+01	693	0	8.64E+01	739	0	8.64E+01
648	0	8.64E+01	694	0	8.64E+01	740	0	8.64E+01
649	0	8.64E+01	695	0	8.64E+01	741	0	8.64E+01
650	0	8.64E+01	696	0	8.64E+01	742	0	8.64E+01
651	0	8.64E+01	697	0	8.64E+01	743	0	8.64E+01
652	0	8.64E+01	698	0	8.64E+01	744	0	8.64E+01
653	0	8.64E+01	699	0	8.64E+01	745	0	8.64E+01
654	0	8.64E+01	700	0	8.64E+01	746	0	8.64E+01
655	0	8.64E+01	701	0	8.64E+01	747	0	8.64E+01
656	0	8.64E+01	702	0	8.64E+01	748	0	8.64E+01
657	0	8.64E+01	703	0	8.64E+01	749	0	8.64E+01
658	0	8.64E+01	704	0	8.64E+01	750	0	8.64E+01
659	0	8.64E+01	705	0	8.64E+01	751	0	8.64E+01
660	0	8.64E+01	706	0	8.64E+01	752	0	8.64E+01
661	0	8.64E+01	707	0	8.64E+01	753	0	8.64E+01
662	0	8.64E+01	708	0	8.64E+01	754	0	8.64E+01
663	0	8.64E+01	709	0	8.64E+01	755	0	8.64E+01
664	0	8.64E+01	710	0	8.64E+01	756	0	8.64E+01
665	0	8.64E+01	711	0	8.64E+01	757	0	8.64E+01
666	0	8.64E+01	712	0	8.64E+01	758	0	8.64E+01
667	0	8.64E+01	713	0	8.64E+01	759	0	8.64E+01
668	0	8.64E+01	714	0	8.64E+01	760	0	8.64E+01
669	0	8.64E+01	715	0	8.64E+01	761	0	8.64E+01
670	0	8.64E+01	716	0	8.64E+01	762	0	8.64E+01
671	0	8.64E+01	717	0	8.64E+01	763	0	8.64E+01
672	0	8.64E+01	718	0	8.64E+01	764	0	8.64E+01
673	0	8.64E+01	719	0	8.64E+01	765	0	8.64E+01
674	0	8.64E+01	720	0	8.64E+01	766	0	8.64E+01
675	0	8.64E+01	721	0	8.64E+01	767	0	8.64E+01
676	0	8.64E+01	722	Õ	8.64E+01	768	0	8.64E+01
677	0	8.64E+01	723	0	8.64E+01	769	0	8.64E+01
678	0	8.64E+01	724	0	8.64E+01	770	0	8.64E+01
679	0	8.64E+01	725	0	8.64E+01	771	0	8.64E+01
680	0	8.64E+01	726	Õ	8.64E+01	772	0	8.64E+01
681	0	8.64E+01	720	0	8.64E+01	773	0	8.64E+01
682	0	8.64E+01	728	0	8.64E+01	774	0	8.64E+01
683	0	8.64E+01	729	0	8.64E+01	775	0	8.64E+01
684	0	8.64E+01	730	0	8.64E+01	776	0	8.64E+01
685	0	8.64E+01	730	0	8.64E+01	777	0	8.64E+01
000	0	0.0.12.101	101	0	0.012101	,,,	0	0.012101

778	0	8.64E+01	793	0	8.64E+01	808	0	8.64E+01
779	0	8.64E+01	794	0	8.64E+01	809	0	8.64E+01
780	0	8.64E+01	795	0	8.64E+01	810	0	8.64E+01
781	0	8.64E+01	796	0	8.64E+01	811	0	8.64E+01
782	0	8.64E+01	797	0	8.64E+01	812	0	8.64E+01
783	0	8.64E+01	798	0	8.64E+01	813	0	8.64E+01
784	0	8.64E+01	799	0	8.64E+01	814	0	8.64E+01
785	0	8.64E+01	800	0	8.64E+01	815	0	8.64E+01
786	0	8.64E+01	801	0	8.64E+01	816	0	8.64E+01
787	0	8.64E+01	802	0	8.64E+01	817	0	8.64E+01
788	0	8.64E+01	803	0	8.64E+01	818	0	8.64E+01
789	0	8.64E+01	804	0	8.64E+01	819	0	8.64E+01
790	0	8.64E+01	805	0	8.64E+01	820	0	8.64E+01
791	0	8.64E+01	806	0	8.64E+01			
792	0	8.64E+01	807	0	8.64E+01			

end

# !INTER BATCh LIST,,1 END

1,10,401,410

# ! BATCh specify some solution steps (pg. 137) BATCh

- ! PLOT deformations in the  $x_i$  direction where i = 1.
- ! plot,defo,1
- !

1

- ! PLOT using 3D PERSpective view with inew = 1 for use of old parameters (pg. 496).
- ! plot,pers,1

! PROPortional load command (pg. 148)
! Input a proportional load with ramp loading.
! NOT BEING USED FOR ARTERY
!prop.,1

! The value for a time increment (pg. 141) dt,,1.0

! Perform check of mesh correctness (pg. 139) check

! Repeated execution of solution commands (pg. 144) !

loop time 600

!

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! We can have it continue to solve for as long as we want (pg. 154) time,,0.0 ! Set the convergence tolerace (pg. 155) tol,,1.0e-5 ! Use this many Newton-Raphson iterations loop newton 100 ! UTANgent matrix command (pg. 159) ! Permits a non-symmetric tanget array ! results in the computation of a tangent array utan,,1 ! Clear the PLOT screen (pg. 198) plot,wipe ! Hides interior surfaces (pg. 204) plot, hide **!** PLOT deformations plot,defo ! PLOT mesh plot,mesh ! Show filled plots plot,fill ! Show axes plot,axis ! Plot CONTours for dof 3 plot,cont,1 next newton ! Output all displacements and stresses. disp,LIST,1 !stre,all !stre,node,1,10660 !grdt next

! End the time loop

end ! End the batch job END

Stop

### **APPENDIX B**

# COMPARISON OF MODEL OUTPUTS FOR HOMEOSTATIC, BASELINE, AND 2X ELASTIN PRODUCTION MODELS

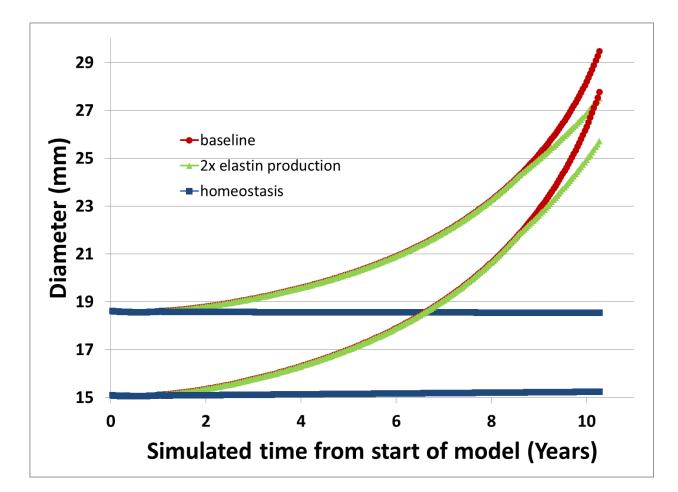
The following describes the changes in mass and mass production rates of the constituents of the AAA G&R models (elastin, collagen, and smooth muscle) used in **Figures 44-48**. All constituent and active stress time history plots are shown for the medial layer as the adventitial layer contains no smooth muscle and a small amount of elastin.

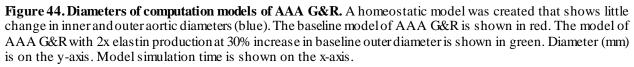
The amount of each constituent depends on the survival of the original and any subsequently produced material and how much material is produced. The decay constant for collagen and smooth muscle scales with deviations of tension with respect to the tension of the constituent at its depositional prestretch (i.e. the removal is faster at higher tensions and lower and slower at lower tensions). The production rate for collagen and smooth muscle scales with deviations from a homeostatic stress (i.e. larger stresses lead to a net production of material and smaller stresses lead to a net removal of material). Active stress scales with both the relative amount of smooth muscle compared to the total amount of material and the stretch of the smooth muscle (i.e. larger stresses). Elastin decays at a constant rate unless noted otherwise.

Homeostasis model: This model has no step loss in elastin, collagen, or smooth muscle. The net mass production rates for collagen and smooth muscle follow the stress based mass production rules. The net mass production for elastin is modeled by exponential decay with a 40 year half-life.

**Baseline model:** This model has a step loss in elastin (~65%), collagen (~3.5%), and smooth muscle (~3.5%) at the start of the model. After this step loss, the net mass production rates for collagen and smooth muscle follow the stress based mass production rules, and the net mass production for elastin is modeled by exponential decay with a 40 year half-life.

**2x elastin production model:** This model has a step loss in elastin (~65%), collagen (~3.5%), and smooth muscle (~3.5%) at the start of the model. After this step loss, the net mass production rates for collagen and smooth muscle follow the stress based mass production rules, and the net mass production for elastin is modeled by exponential decay with a 40 year half-life up until a 30% increase in the outer diameter of the vessel (~8.6 years simulation time). Up until this intervention point, this model is exactly the same as the baseline model. At the intervention time point, elastin decay goes to zero, and new elastin is added to the remaining elastin at a rate of  $1.350 \text{ µg/mm}^3/2$  weeks.



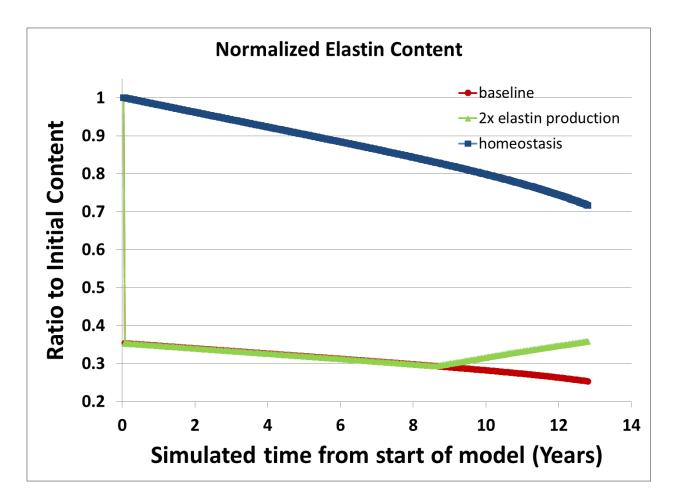


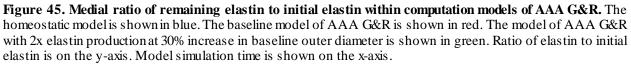
#### **Description of diameter plot (Figure 44):**

The homeostasis model (shown in blue) maintains the vessel geometry while experiencing the gradual loss in elastin. This is likely due to increases in the amount of collagen, smooth muscle, and the active generation of stress.

In the baseline (shown in red) and 2x elastin production (shown in green) models prior to the elastogenic intervention, the large decrease in elastin and small decreases in collagen and smooth muscle do not initially change the diameter. This can be attributed to the stiffness of the remaining collagen (in both the media and adventitia) and active stress generated by smooth muscle. The luminal expansion starts at approximately one year (after approximately 5 collagen half-lives when only about ~3% of the original collagen has survived from the start of the model) when the continued loss of highly prestretched elastin, coupled with continued small losses in collagen and smooth muscle have diminished the ability to actively maintain inner radius due to substantial increased circumferential passive stiffening. In the baseline model, the diameter continues to increase.

Once we introduce the elastogenic intervention, this addition of prestretched elastin immediately begins to change the rate of growth of the AAA in part because of the prestretch and in part due to the increases in mass in all of the wall constituents.



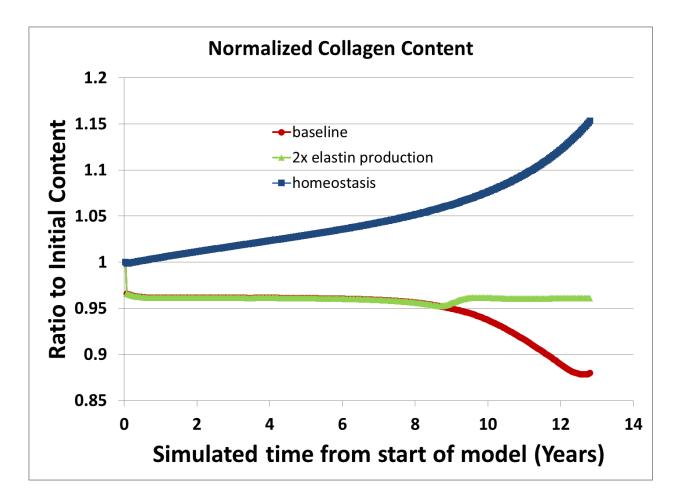


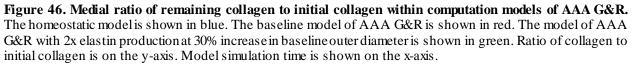
# **Description of elastin plot (Figure 45):**

The homeostasis model (shown in blue) loses elastin at a rate modeled by exponential decay with a 40 year half-life.

In the baseline (shown in red) and 2x elastin production (shown in green) models prior to the elastogenic intervention, there is a step loss of elastin at the beginning of the model of ~65%. After the initial step loss, the remaining elastin is lost at a rate modeled by exponential decay with a 40 year half-life).

In the 2x elastin production model at the intervention time point, elastin decay goes to zero and new elastin is added to the remaining elastin at a rate of  $1.350 \,\mu\text{g/mm}^3/2$  weeks.



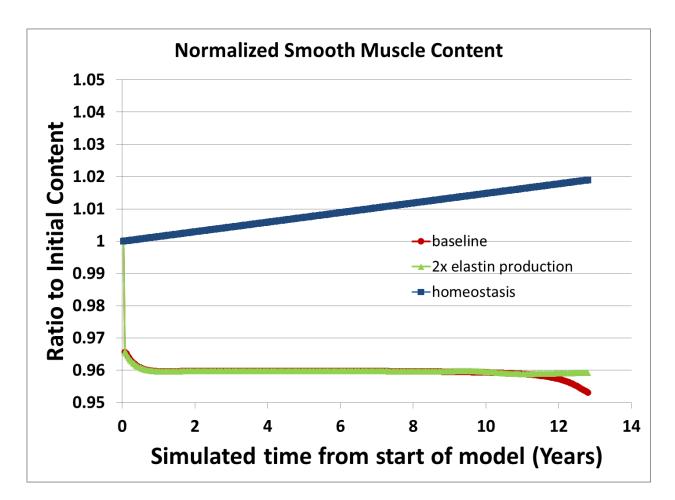


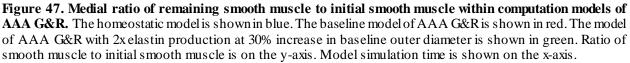
## **Description of collagen plot (Figure 46):**

The homeostasis model (shown in blue) slowly adds collagen as elastin is slowly degraded. This addition helps to maintain the vessel geometry.

In the baseline (shown in red) and 2x elastin production (shown in green) models prior to the elastogenic intervention, there is a small step loss of collagen at the beginning of the model of ~3.5%. After the initial step loss, collagen continues to decrease in the media (due to a shift of stress from the media to the adventitia) before maintaining a constant level until approximately 8 years simulation time where accelerated removal due to higher tensions is balancing higher production rates due to higher stresses. After this point in the baseline model the increase in tension has become so large that collagen production is unable to compensate, and the collagen is removed again until the end of the simulation.

In the 2x elastin production model at the intervention time point, increasing elastin is associated with an increase in the amount of collagen produced. This is due to the elastin lowering the tension on the collagen and thus reducing the collagen decay constant. The system then returns to a balance between the removal of old collagen and the production of new collagen.



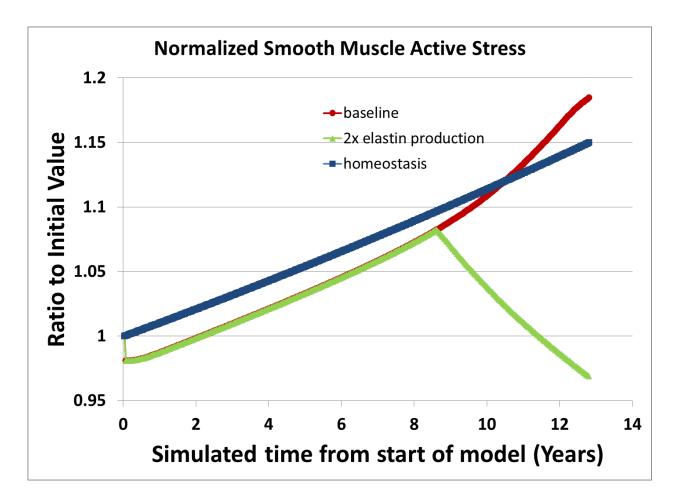


### **Description of smooth muscle plot (Figure 47):**

The homeostasis model (shown in blue) slowly adds smooth muscle as elastin is slowly degraded. This addition helps to maintain the vessel geometry.

In the baseline (shown in red) and 2x elastin production (shown in green) models prior to the elastogenic intervention, there is a small step loss of smooth muscle at the beginning of the model of ~3.5%. After the initial step loss, smooth muscle continues to decrease in the media (due to a shift of stress from the media to the adventitia) before maintaining a constant level until approximately 10 years simulation time where accelerated removal due to higher tensions is balancing higher production rates due to higher stresses. After this point in the baseline model the increase in tension has become so large that smooth muscle production is unable to compensate, and the smooth muscle is removed again until the end of the simulation.

In the 2x elastin production model at the intervention time point, increasing elastin is associated with maintenance of the amount of smooth muscle. This is due to the elastin lowering the tension on the smooth muscle and thus reducing the smooth muscle decay constant. The system then returns to a balance between the removal of old smooth muscle and the production of new smooth muscle.



**Figure 48.** Medial ratio of smooth muscle active stress to initial smooth muscle active stress within computation models of AAA G&R. The homeostatic model is shown in blue. The baseline model of AAA G&R is shown in red. The model of AAA G&R with 2x elastin production at 30% increase in baseline outer diameter is shown in green. Ratio of smooth muscle active stress to initial smooth muscle active is on the y-axis. Model simulation time is shown on the x-axis.

## **Description of active stress plot (Figure 48):**

The homeostasis model (shown in blue) shows slow increases in the level of active stress as elastin is slowly degraded, helping to maintain vessel geometry. The small loses of elastin at each time step within the model would normally result in a small increase in vessel diameter. Active stress is generated due to this small increase in vessel diameter which then works to decrease the diameter of the vessel. These small oscillations ultimately maintain that diameter for the model history.

In the baseline (shown in red) and 2x elastin production (shown in green) models prior to the elastogenic intervention, there is a small step loss in the level of active stress at the beginning of the model of which directly scales with the decrease in amount of smooth muscle. After the initial step loss, the level of active stress continues to slowly increase as elastin is slowly degraded. This increase is likely due to a shift in the relative proportion of smooth muscle in the system as the total elastin is decreasing in the system. In the later stages of the model, the active stress continues to rise as the diameter increases even though the amount of smooth muscle is decreasing.

In the 2x elastin production model at the intervention time point, increasing elastin is associated with a decrease in the amount of active stress. This decrease is due to the lower relative proportion of smooth muscle to the total amount of material in the system.

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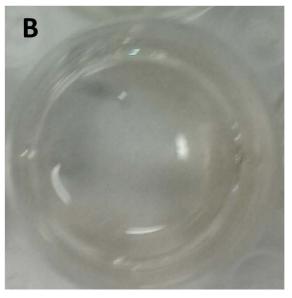
#### **Discussion:**

The G&R models represent a balance between competing biomechanical forces. Within the AAA G&R baseline model, we have the competition of accelerated removal of constituents due to higher tensions, the production of constituents due to the higher stresses, and the generation of active stress from smooth muscle. The loss of elastin initiates a complex G&R sequence, resulting in luminal expansion and wall thinning. This is due to the loss of highly prestretched elastin, coupled with a diminished ability to actively maintain inner radius. The accelerated constituent removal due to ever increasing tensions ultimately overcomes the constituent production due to higher stresses.

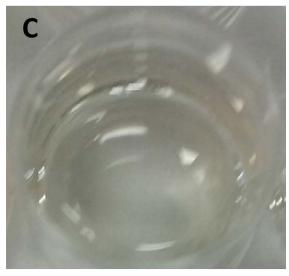
In the experimental 2x elastin production model, adding back highly prestretched elastin lowers the tension that the collagen and smooth muscle are under while also lowering the stress which increases the amount of both collagen and smooth muscle in the system while lowering the active stress generated by smooth muscle. The macroscopic result of introducing new elastin is a lower luminal expansion rate. APPENDIX C

# QUALITATIVE FIBRIN GEL MIXER ASSESMENT





Α



**Figure 49.** Mixing colored fibrin gel constituent solutions through the fibrin gel mixer produces gels that appear similar in color to a gel mixed by manual pipetting. A) Fibrin gel constituent components loaded into a syringe and locked in the fibrin gel mixer. From left to right, the constituents are fibrinogen solution (pink), cell suspension (yellow), and thrombin solution (blue). B) Photo of a gel mixed with manual pipetting. C) Photo of gel that came out of the fibrin gel mixer.

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