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## NOS-Based Biopolymers: Towards Novel Thromboresistant No-Release Materials

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## NOS-BASED BIOPOLYMERS; TOWARDS NOVEL THROMBORESISTANT NO-RELEASE MATERIALS

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#### **DEDICATION AND ACKNOWLEDGMENTS**

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I dedicate this thesis to my family; my wife Marcelle for all her support, my parents Hikmat and Mountaha Abou Diwan for believing in me.

## NOS-BASED BIOPOLYMERS; TOWARDS NOVEL THROMBORESISTANT NO-RELEASE MATERIALS

### **CHARBEL ABOU DIWAN**

#### ABSTRACT

Nitric Oxide releasing biopolymers have the potential to prolong vascular graft and stent potency without adverse systemic vasodilation. It was reported in literature that eNOS-overexpressing endothelial cell seeding of synthetic small diameter vascular grafts decreased human platelet aggregation by 46% and bovine aortic smooth muscle cell proliferation by 67.2% in vitro. We hypothesized that incorporating the enzyme nitric oxide synthase (NOS) in biocompatible polymeric matrix will provide a source of NO that utilizes endogenous compounds to maintain an unlimited supply of NO. To test this hypothesis, we have incorporated the enzyme nitric oxide synthase into a polyethyleneimine film using a layer-by-layer electrostatic deposition. This approach will provide a source of NO that utilizes endogenous compounds available in the blood matrix to maintain a constant supply of NO at the blood/device interface. When coated onto the surface of various blood-contacting implantable medical devices, it will provide NO

fluxes at levels equal or greater than the normal endothelial cells, and for extended time periods. This configuration will help solve the issues of both thrombosis and stenosis that occur as side effects for several types of biomedical implants.

Our results indicate a proof of principle of a new approach for making antithrombotic coatings for medical devices and implants based on NO release. We have demonstrated that NOS-based polymetric films successfully generate NO under physiologic conditions at small levels equal to and higher than those observed for endothelial cells. The level of NO release can be fine-tuned through varying the number of NOS layers in the film buildup. We have shown that NO fluxes from our NOS-based PEI films are sustained for prolonged periods of time, which has the potential of producing efficient, short and long-term, antithrombotic coatings for medical devices and blood-contacting tools such as stents and catheters. We also show that NO release from these coatings successfully decrease platelet adhesion at the surface by 60%. This, and other properties are key for the desired thromboresistivity needed for blood-contacting medical devices.

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### **CHAPTER I**

#### **INTRODUCTION**

## 1.1 BIOCOMPATIBILITY ISSUES OF IMPLANTABLE MEDICAL DEVICES

The thrombogenic nature of various polymeric materials utilized to prepare various blood-contacting and implantable medical devices such as vascular grafts, intravascular catheters and sensors, coronary artery and vascular stents, even if labeled as *biocompatible*, can cause serious complications in patients [2]. Upon introduction of a foreign material into the blood stream, key proteins of the coagulation cascade (fibrinogen, and von Willebrand's factor) adsorb to the surface, followed by platelet adhesion and activation, leading to fibrin and thrombus formation at the surface (Figure 1.1) [3].



**Figure 1.1:** Illustration showing thrombus formation at the surface of implantable medical devices. Upon exposure to blood, protein adsorption occurs, followed by platelet adhesion at the surface. Platelet activation leads to thrombus formation at the surface.

An anti-coagulation regiment, with the adverse effects associated with long term use, is typically required to clinically reduce the risk of thrombus formation [4]. Thrombus formation and generation involves two synergistic events; a cGMP-dependant mechanism that involves platelet activation, adhesion and aggregation [5], and fibrin formation resulting from the binding of bivalent fibrinogen to glycoprotein IIb/IIIa [6].

In addition to thrombus formation, certain medical devices, during the implantation process can damage the endothelium lining of blood vessels, leading to smooth muscle cell proliferation, and ultimately cause vascular stenosis via neointimal hyperplasia [7,8]. Further more, bacterial adhesion at the material surface of medical devices leads to deviceassociated infections [9]. Early bacterial adhesion is mediated by reversible bacteria-substrate interactions, followed by irreversible molecular bridging at longer times [10]. Upon adhesion, certain bacteria are capable of secreting an exopolysaccharide matrix forming a protective biofilm that retains nutrients and protects the bacteria from the host immune response. Biofilms provides bacterial resistance to traditional antibiotic therapies [11].

3

Implantation into subcutaneous tissues subjects implants to an inflammatory response involving the release of fluid and plasma proteins followed by the recruitment of leukocytes at the implant site. Neutrophils and monocytes migration and adhesion to the implant surface initiates phagocytosis. After the initial inflammatory response, a more chronic response involves a sustained inflammation at the implant site involving the recruitment of macrophages, monocytes, and lymphocytes. Eventually, a fibrous capsule composed mainly of macrophages and collagen is formed around the implanted device.

## **1.2 THE PROTECTIVE ROLE OF ENDOGENOUS NITRIC OXIDE (NO)**

Endogenous NO production at low concentrations (nanomolar) plays a critical role in the regulation of vascular hemostasis [12]. Endothelium derived NO production inhibits platelet adhesion [13], aggregation [14], and their further recruitment to the growing thrombus [15]. NOS inhibition is associated with the shortening of bleeding times in healthy volunteers [16], and platelet accumulation in the vasculature of animals [17]. *In vivo* studies involving production of high levels of NO

from iNOS showed the ability to prevent platelet adhesion [18]. NO, prostacyclin, and ecto-AD(T)Pase are potent inhibitors of platelet function that are produced by an intact endothelium [19]. Nitric oxide diffuses into platelets stimulating cGMP production by soluble guanylyl cyclase causing a decrease in cytosolic  $Ca^{2+}$  levels by directly inhibiting voltage-gated  $Ca^{2+}$  channels [20]. Calcium acts as an important second messenger with an intracellular concentration 50-100nM in resting platelets. Upon platelet activation, intracellular calcium concentrations can rise up to 1mM [21], triggering a cascade of events that leads to platelet aggregation.

The regulatory effect of NO on cGMP and cGMP-dependant protein kinases was reported by a significant increase in platelet aggregation in the presence of guanylyl cyclase inhibitors [22,23], and by the potentiation of anti-platelet effects in the presence of cGMP phosphodiesterase inhibitors [24]. Reduction in Ca<sup>2+</sup> levels via a cGMP dependant mechanism inhibits thrombin mediated activation of phosphoinositide 3-kinase (PI-3 kinase) [25,26] leading to a suppression of the conformational change of glycoprotein IIb/IIIa required for fibrinogen binding [27], which decreases the number and affinity of fibrinogen binding sites on the platelet surface [28]. cGMP is also involved in increasing intracellular cAMP indirectly by inhibiting the phosphodiesterase III (PDE III) dependant degradation of cAMP [29]. Increased levels of cAMP has been associated with decreased levels of intracellular Ca<sup>2+</sup> flux [30,31]. In addition cGMP down-regulates protein kinase C leading to regulation of the surface expression of  $\alpha$  granule protein P-selectin, a mediator of platelet adhesion [32].

There have been various reports indicating NO release from resting [33] and aggregating platelets [24,34]. NO levels from activated human platelets have been indirectly measured and is estimated at 11.2 pmol.min<sup>-1</sup>/10<sup>8</sup> cells [33]. NO temporarily inactivates platelets in the close proximity of the endothelium [35-37]. This inhibition is short-lived and NO is rapidly scavenged by oxygen and hemoglobin in plasma [38,39].

NO is produced by macrophages as part of the natural immune response to bacterial infections [40,41]. NO is shown to mediate the inhibition of a wide variety of Gram-negative and Gram-positive bacterial species [42], as well as reducing bacterial adhesion [43].

# **1.3 THE ROLE OF NO-RELEASING MATERIALS AS COATINGS FOR IMPLANTABLE MEDICAL DEVICES**

Considerable research is being focused on improving the surface chemistry of materials used as outer coatings of implantable medical devices [3]. NO releasing polymers have the potential to be effective in preventing platelet adhesion, activation, and aggregation onto the surfaces, therefore reducing the risk of thrombus formation at these surfaces. They have the potential to prolong vascular graft and stent potency without adverse systemic vasodilation [44]. NO exhibits a short half-life <1s in the presence of oxygen and hemoglobin, there is no systemic effects that can be caused by the NO-releasing coatings because any NO released will be rapidly consumed locally near the surface of the device [45]. Numerous approaches are currently being investigated in an attempt to develop polymeric materials that are more blood-compatible. In general, these approaches can be categorized into two main trends: first, methods that mimic endothelial cells anti-thrombogenic properties [46-50], and, second, methods that use modified chemical surfaces and added moieties that exhibit decreased protein and cell adhesion [1]. Prevention of protein adhesion *in vivo* is generally difficult to achieve, therefore the other approach, which aims at the development of NO- releasing surfaces akin to native endothelial cells, appears more promising. Nitric oxide, thrombomodulin, prostacyclin, and heparans contribute to the non-thrombogenic properties of the endothelial cells [2,51]. Polymers that possess chemical platforms with the ability of releasing NO have been shown to be more thromboresistant. A potential solution can be found in polymeric materials that are capable of releasing low levels of nitric oxide at the blood/polymer interface.

### **1.4 CLASSES OF NO-RELEASING MATERIALS**

Two classes of NO-releasing materials have been explored (Figure 1.2). N-diazeniumdiolate based NO-releasing polymers [52-56], and Nitrosothiol-based NO-releasing polymers [57-61].



**Figure 1.2:** Generic structure of (A) Diazeniumdiolates (I) zwitterionic, (II) cation stabilized. (B) S-Nitrosothiol. Adapted from [1]

#### **1.4.1 N-Diazeniumdiolates**

N-diazeniumdiolates are inorganic NO donors formed by the reaction of a secondary amine structure with 2 moles of NO gas under high pressure, creating a relatively stable adduct structure [62-64]. A countercation is required to fulfill electroneutrality of the negatively charged diazeniumdiolate adduct, leading to zwitterionic molecules [1]. Three general structural types of diazeniumdiolates have been outlined for preparing diazeniumdiolates based NO-releasing polymers: Dispersed non-covalently bound small molecules where the diazeniumdiolate group is attached to amines in low molecular weight compounds; covalently bound diazeniumdiolates group to polymeric side chains or to the polymeric backbone [56].

Since this initial work, additional methods for preparing NOreleasing polymers utilizing diazeniumdiolates as NO donors were described by both Pulfer et al. [55] and Zhang et al. [54] Pulfer and coworkers developed NO releasing PEI microspheres that were entrapped into vascular grafts pores [55]. Zhang and co workers prepared diazeniumdiolate nanoparticles by reacting NO with alkylamines tethered onto the surface of fumed silica particles (7-10nm diameter) [54].

Diazeniumdiolated-dimethylhexyldiamine (DMHD/N<sub>2</sub>O<sub>2</sub>) were used to prepare NO-releasing polymers as coatings for oxygen sensors [65], and extracorporeal circuits [46]. In other studies, diethylenetriamine diazeniumdiolate (DETA/ N<sub>2</sub>O<sub>2</sub>) was embedded into ethylene-vinyl acetate [66,67]. In other work, diazeniumdiolate-spermine (SPER/N<sub>2</sub>O<sub>2</sub>) was incorporated into a biodegradable polymer used to construct jugular vascular grafts [68]. Although initial studies proved the worthiness of such materials, leaching of the water-soluble diazeniumdiolates was shown to form nirtosoamine, a well known class of carcinogens, due to the oxidation of local NO to an NO<sup>+</sup> intermediates that form RN-NO species upon reactions with amine compounds [69]. To counter this problem, more lipophilic discrete dialkyldiamine diazeniumdiolates such as dibutylhexyldiamine diazneniumdiolate (DHBD/N<sub>2</sub>O<sub>2</sub>) were prepared that have higher octanol/water partition coefficients and would be more likely to stay in polymer phase, even if nitrosoamine formation occurs [44]. The use of a diazeniumdiolate substrate that would be benign upon leaching was used as another method to avoid the buildup of carcinogenic species. The amino acid L-proline was used to prepare the anionic diazeniumdiolate of proline (PROLI/N<sub>2</sub>O<sub>2</sub>), and thus the nitrosamime form of proline is non- carcinogenic and would therefore be

[70]. The harmless to the patient covalent attachement of diazeniumdiolate moiety to the polymer backbone was used to prevent leaching of any potentially carcinogenic species. Diazeniumdiolated silicone rubbers were prepared by the use of diamino- and triaminoalkyltrimethoxysilanes hydroxyl cross-linkers with terminated polydimethylsiloxanes followed by reaction with NO [48]. Anionic diazenium diolated polymethacrylates were prepared by copolymerizing various secondary amine-containing monomers with methyl-methacrylate [71]. A protected diazeniumdiolated poly(vinyl chloride) was synthesized by using the O(2)-alkylated diazeniumdiolate of piperazine as a linker for incorporation of the diazenium diolate onto the polymeric backbone [72]. Alternative matrices for the incorporation and covalent attachement of diazeniumdiolates have been investigated and include sol-gels and dressings. diazeniumdiolates hydrogel Discrete  $(DETA/N_2O_2)$ , dipropylenetriamine diazeniumdiolates (DPTA/N<sub>2</sub>O<sub>2</sub>), and DPTA/N<sub>2</sub>O<sub>2</sub>g-dextran, were suspended in a hydrogel matrix [73]. The synthesis of sol gel materials by reaction of alkoxylsilanes with alkyltrimethoxysilanes followed by exposure to NO has been reported [74]. In addition, hydrogels as NO carriers were prepared by reacting polyethylene glycol N-hydroxysucinimide monoacrylate with poly L-lysine and then

dissolving the product in water followed by the exposure to NO [57], and by the reaction of NO with cross-linked poly(vinyl-acetate) modified with amine groups [75].

#### **1.4.2 S-Nitrosothiols**

The second class of NO donors are S-nitrosothiols; they are thought to serve as NO reservoirs and transporters within biological systems [76]. S-Nitroso-albumin and S-nitrosoglutathione are the most abundant naturally occurring S-nitrosothiols circulating in blood [77]. The cleavage of the S-NO bond releases NO by three known mechanisms [78]: copper mediated decomposition[79], the direct reaction of ascorbate [80], and photolytic decomposition [81]. S-nitrosothiols have been covalently linked to the polymer to prevent leaching of the donor or reaction byproducts. NO releasing hydrogels were prepared by linking cysteine to Polyethylene glycol (PEG) and reacting the resultant copolymers with sodium nitrite to form S-nitrosocysteine groups [57]. The S-nitrosothiol (GSNO) and S-nitroso-N-acetylcysteine (SNAC) were blended into poly(ethylene oxide) and poly(propylene oxide) copolymers or PEG for targeted deliver of NO in biomedical applications [58,59]. In addition, S-nitrosothiols can be tethered to the surface of polymer fillers. S-nitroso-N-acetylpenicillamine (SNAP) was tethered to the surface of 7-10nm diameter fumed silica particles [82].

The greatest limitation of these approaches is that they are a finite reservoir of NO, which will limit their potential use in more permanent types of implants, and the NO fluxes achieved so far are lower than NO released from endothelial cells [1]. Studies have shown that stimulated human endothelial cells continuously generate NO at a level of ca.  $4\times10^{-10}$  mol.cm<sup>-2</sup>.min<sup>-1</sup> [83].

### **1.5 NOS BASED NO-RELEASING MATERIALS**

The logical alternative is then to explore approaches that would lead to materials with the ability to sustain NO generation for longer durations. Some current developments include materials that utilize endogenous NO donors such as S-nitrosothiols and nitrite to generate NO [84-86]. Though these approaches display potential, with their current limitations, it is not likely to overcome the complexity of the biocompatibility issues of medical devices.

Developing a NO-releasing surface that closely resembles the endothelium is the key to achieving better thromboresistivity. The endothelial isoform of the enzyme Nitric Oxide Synthase, eNOS, is a key component of the endothelial cell lining. It was reported that eNOSoverexpressing endothelial cells seeding of synthetic small diameter vascular grafts decreases human platelet aggregation by 46% and bovine aortic smooth muscle cell proliferation by 67.2% in vitro [87]. NO releasing materials using Polyethyleneimine (PEI), a biocompatible polymer [88], has been reported in literature [55,89,90]. In our lab, NO was successfully generated from the enzyme Nitric Oxide Synthase embedded in bilayered cast film of didodecyldimethylammonium bromide surfactant [91]. We have incorporated the oxygenase domain of the enzyme Nitric Oxide Synthase (NOSoxy) in a Polyethyleneimine polymeric matrix by means of layer-by-layer electrostatic adsorption [92,93] to construct a multi-component protein film that mimics the NOgenerating behavior of the endothelial cell lining. We have demonstrated that our films provide a source of NO that utilizes endogenous compounds to maintain a continuous supply of NO at levels that are in the same range as that of endothelial cells [94].

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## **CHAPTER II**

## LAYER-BY-LAYER ASSEMBLY OF PROTEIN FILMS

## **2.1 INTRODUCTION**

The technique of ultrathin film assembly via alternate adsorption of oppositely charged polyions was developed a couple of decades ago. In 1991, the alternate adsorption of linear polycations and polyanions as a method for film assembly was first introduced by Decher and co-workers [1-9]. The basis of this method is the excessive adsorption at every stage of the polycation/polyanion assembly that leads to recharging of the outermost surface at during the film formation.

This methodology relies on the following principle: a negatively charged substrate surface is immersed in a cationic polyelectrolyte solution allowing the electrostatic adsorption of the polycationic layer. Since high concentrations of polyelectrolytes are utilized, a number of cationic groups remain exposed and thus the surface charge is effectively reversed. After rinsing with water, the substrate is immersed in an anionic polyelectrolyte solution restoring the original surface charge. By repeating both steps, alternating multilayer assemblies are obtained with repeatable layer thickness (scheme 2.1) [10].



**Figure 2.1:** Scheme of layer-by-layer film assembly on a solid substrate by alternate adsorption of linear polycations and polyanions/negatively charged proteins.

Electrostatic layer-by-layer self-assembly has been applied to thin film coatings [6,11-13]. It allows the assembly of multilayers of materials on two-dimensional (2D) supports and on three-dimensional (3D) nanotemplates [14]. A variety of charged materials have been used in these 2D and 3D nanoassembly processes; they include linear polyectrolytes (synthetic and natural), enzymes, antibodies, viruses, and inorganic nanoparticles [14]. The resulting film architecture can be designed to meet different requirements such as biocompatibility, stability, and thickness, typically on the order of tens to hundreds of nanometers [14,15]. Layer-by-layer organized film assembly based on the alternate adsorption of oppositely charged macromolecules paves the way for a molecular architecture in the direction perpendicular to the solid support allowing for the design of films with nanometer resolution. Ultrathin films can be designed with definite molecular composition and ordered architecture in the range of 5-1000 nm with a precision better than 1nm [16]. Layer-by-layer assembly allows the control of the chemical composition of the films, which translates into control of the biological activity in biomedical applications. Ultrathin film coatings of a surface can maintain its original mechanical properties and structure [17].

For enzyme-based thin films, electrostatic adsorption seems to be one of the simplest ways for enzyme immobilization [15]. Other available methods of enzyme immobilization include physical adsorption [18], encapsulation [19], or covalent attachment [20,21]. However, these methods have disadvantages in terms of stability and low active site accessibility/activity. Site-targeted immobilization is complex but can provide enhanced activity if the immobilization does not interfere with enzyme function [22-24].

## **2.2 GENERALITY OF THE ASSEMBLY PROCEDURE**

Layer-by-layer assembly of multilayered protein films has been performed by means of alternate electrostatic adsorption of either positively charged polyethyleneimine (PEI), poly(allylamine) (PAA), poly(dimethyldiallylammonium) (PDDA), or negatively charged poly(styrenesulfonate) (PSS), DNA, and heparin [8,10,25-38]. The pH of the protein component was set far from the isoelectric point in order to sufficient charge under experimental conditions. The ensure concentration range of aqueous proteins was 0.1 - 2 mg/ml or ~  $10^{-5}$ M. Examples of aqueous proteins used (table 2.1) were cytochrome c,

lysozyme, histone type YIII-S, myoglobin (Mb), pepsin, horseradish peroxidase (POD), hemoglobin, glycoamylase (GAM), concanavalin A (Con A), albumin [31], Glucose Oxidase [21,10,32], catalase, invertase, diaphorase [8,10], bacteriorhodopsin [37], and immunoglobulin (IgG) [33,39]. Protein stability can be affected by the surface structure of the solid support; therefore precursor films of alternate PEI/PSS were used as standard surfaces [8,10,29,40]. Solid surfaces are typically immersed in aqueous protein solutions or polyions for 20 minutes. Surfaces were then rinsed with water, and dried. To reach saturation of the adsorption process, the assembly process was carried out uninterrupted. A summary of the alternate adsorption of 18 water-soluble proteins in combination with oppositely charged polyions is listed in Table 2.1.

							Protein	Thickness of	
	Molecular	Isoelectric			Alternate	Saturation	monolayer mass	protein polyion	Protein globule
Protein	Weight	point	рН	Charge	with	time (min)	coverage (mg/m <sup>2</sup> )	bilayer [28]	dimensions[28]
Cytochrome c	12400	10.1	4.5	+	-SS4	12	3.6	2.4 + 1.6	2.5 x 2.5 x 3.7
Lyzozyme	14000	11	4	+	-SSd	16	3.5	2.3 + 1.9	3.0 x 3.0 x 4.5
Histone f3	15300	11	7	+	-SSd	15	3.3	2.2 + 2.0	diameter 3.4
Myoglobin	17800	7.0	4.5	+	DNA, PSS-	12	9	4.0 + 2.0	2.5 x 3.5 x 4.5
Bacteriorhodopsin[36]	26000	9	9.4	•	PDDA+	2	7.5	5.0 + 1.0	ca 5.0
Pepsin	35000	1	9	•	PDDA+	20	4.5	3.0 + 0.6	diameter 3.0
Peroxidase	42000	8.0	4.2	+	-SS4	15	5.3	bilayer 3.5	diameter 3.5
Hemoglobin	64000	6.8	4.5	+	-SSd	16	26	17.5 + 3.0	5.0 x 5.5 x 6.5
			9.2	ı	PEI+		27	bilayer 18.2	
Albumin[31]	68000	4.9	8	I	PDDA+	10	23	16.0 + 1.0	11.6 x 2.7 x 2.7
			3.9	+	Heparin-	20	30	20.0 + 1.0	
Glycoamylase	95000	4.2	6.8	ı	PDDA,	15	4	2.6 + 0.5	diameter 6.3
					PEI+				
Photosynt. RC	100000	5.5	8	I	PDDA+	15	13	9.0 + 1.0	13 x 7.0 x 4.0
Concanavalin	104000	5	7	•	PEI+	20	8.6	5.7 + 0.8	3.9 x 4.0 x 4.2
Alcohol dehydrogenase	141000	5.4	8.5		PDDA+	20	12.2	8.5 + 1.0	9.0 x 4.0 x 4.0
IgG[33]	150000	6.8	7.5	•	-SS4	60	15	10.0	14 x 10 x 5
Glucose Oxidase[32]	186000	4.1	6.8	I	PDDA+	15	12	bilayer 8.0	diameter 8
			9.2	ı	PEI+	15	16.6	11.7 + 0.8	
			6.5	ı	PEI+	15	51	34.4 + 0.8	
			6.5	ı	PAH+	15	12.6	bilayer 8.4	
Catalase	240000	5.5	9.2	ı	PEI+	20	9.6	6.4 + 0.8	diameter 9.0
Invertase	270000	3.8	7.0	ı	PDDA+	20	10.8	monolayer 7.3	diameter 8.6
Diaphorase	600000	5	8	I	PEI+	20	31	bilayer 21.0	diameter 11.5

 Table 2.1: Protein-Polyion Alternate Multilayer Assembly

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Unlimited cycling of proteins with oppositely charged polyions is reported. The mass changes were determined as a function of frequency shifts with Quartz Crystal Microbalance (QCM) measurments and was quite reproducible. An alternation with a polyion is required due to the unsuccessful attempts to grow protein films by the cyclic immersion of a substrate into a protein solution.

QCM, x-ray reflectivity, scanning electron microscopy, and surface plasmon resonance were the tools used to estimate protein layer thicknesses. These estimates correspond to known molecular dimensions of proteins obtained from crystallographic data and suggest the formation of relatively uniform monolayers. Parameters such as orientation, packing density, and hydration of proteins within the layer, might have significant influence on the thickness of the protein monolayer.

The multilayer formation as indicated in Figure 2.1 is quite general. The physical separation of the individual layers in the films is assumed on the basis of the regular, stepwise mass increase during the assembly. However, the layer separation between the proteins and the oppositely charged polyions may not be as definite, and the linear polyions would cover the protein surface and act as bridging molecules, to enhance protein stability.

Altering the pH around the isoelectric point allows the protein to be assembled with polyanions and polycations. The protein can be used at a pH above the isoelectric point (i.e. negatively charged) to assemble with polycations and at a pH below the isoelectric point (i.e. positively charged). Examples of both hemoglogbin/PEI<sup>+</sup>, cases are hemoglobin/PSS<sup>-</sup>, and albumin/PDDA, or heparin<sup>-</sup> multilayers (table 2.1). The layer-by-layer immobilization of proteins onto solid substrates with strong polyions (such as PSS, PEI, PDDA) renders it insoluble in a buffer for a pH range between 3 and 10. Immobilization of proteins with weak polyions renders it partially soluble in buffers with pH close to the isoelectric point of one of the components.

Lvov and co-workers demonstrate the dependence of QCM frequency shift on cycles of alternate Myoglobin (Mb)/Polystyrenesulfonate (PSS) adsorption. QCM shifts were proportional to the adsorbed mass at the surface of quartz crystals, and correspond to protein monolayer formation at every step of the film formation process [8,10]. Figure 2.2 represent the typical UV/vis spectra for a Mb/PSS film at consecutive steps of the assembly, with a linear increase in the Soret band absorbance (407nm) with the number of myoglobin layers in the film.



**Figure 2.2:** UV/vis spectra of Mb/PSS assembly. The lowest spectrum corresponds to a precursor film. The following spectra correspond to the stages after adsorption of 2,4,6,8,10, and 12 alternate MB/PSS layers. Adapted from [10]

The assembly of glucose oxidase films (GOD/PEI) was reported by Lvov and co-workers [10]. The adsorption kinetics of this process yielded GOD adsorption saturation in 15 minutes. Linear film mass increases were observed up to at least 21 molecular layers. The layer thickness for GOD was 34.4nm and 0.8nm for PEI. In addition, with increasing numbers of GOD layers, a linear increase of the UV/Vis absorbance was observed [10].

The alternate assembly of glucose oxidase with PDDA was also reported [10,32]. Layer thicknesses observed with each adsorption cycle of GOD (8nm with PDDA; 11.7nm with PEI at pH 7; 8.4nm with PAA) correspond to the diameter of the GOD molecule, suggesting a monolayer formation [10,32].

Atomic Force Microscopy (AFM) has been used to study surface morphology of multilayered films at every step of the adsorption process [41]. Surface roughness corresponded to the sequence of protein/polyion adsorption. With the protein layer, the surface roughness was larger and corresponded to the diameter of the globular protein used. The surface roughness decreased upon the deposition of the polyion layer.

# 2.3 BIOLOGICAL ACTIVITY AND ENHANCED STABILITY OF PROTEINS IN FILMS

Proteins assembled with polyions by the layer-by-layer methodology tend to not denature [10,26,27,30,32,33,38]. The retention of enzymatic activities within the multilayered films was seen with glucose isomerase, glucoamylase, glucose oxidase, and peroxidase. Specific reactions was seen between immunoglobulins (IgG) and antibodies in the multilayered films [33]. The Soret band absorbance of myoglobin and hemoglobin was used to confirm their native conformations within the films [8,10,35]. Redox potentials of myoglobin and cytochrome P450 within those multilayered films corresponded to the redox potentials of these proteins immobilized onto electrode surfaces by other methods [35, 37].

Layer-by-layer immobilization of proteins with linear polyions enhanced their enzymatic stability, and preserved them from microbial attacks. GOD/PEI multilayered films retained 90% of enzymatic activity after incubation at 5°C for 3 months. In addition, GOD/PEI multilayered films show enhanced temperature stability and were active up to 67°C in comparison to 50°C for GOD in solution. Glucose oxidase retains its activity within the multi-layered films up to pH 10 while it drops to a minimum at pH 9 in solution [32].

The enzymatic activity within the multilayered films increases linearly with the number of enzyme layers as seen with the GOD/PEI films up to 10 protein layers; when the activity of the film reaches saturation [32]. Saturation in bioactivity is probably due to diffusion limitations of the substrate in penetrating the film. The extent of accessibility of the substrate to the proteins within the film depends greatly on the nature of the film component, due to the transport of the substrate through the multilayer, and thus puts restrictions on the number of enzyme layers within the multilayered films.

## 2.4 PROBLEMS OF THE ASSEMBLY

## 2.4.1 NONLINEAR GROWTH

Nonlinear film growth with adsorption cycles was seen in some cases, and it was possible to overcome it in order to reach protein monolayer formation at every adsorption step by the following methods:

- Decreasing of protein concentrations, such as in the case of pepsin/PDDA, or alcohol dehydrogenase/PDDA films, from 1mg/ml to 0.1mg/ml or less. IgG was also used for assemble at low concentrations (0.1mg/ml) [33].
- Altering the pH of the protein solution in order to modulate the surface charge, as in the case of the GOD/PEI assembly from pH 6.5 to 9.2 [32].
- Altering the types of polyions used in the layer-by-layer assembly procedure. In the case of GOD, monolayer formation was achieved via the change from branched PEI to linear PDDA [10], or PAA [32].

### 2.4.2 CHARGED GROUPS ON A PROTEIN GLOBULE SURFACE

# Density and location of the charge

The density and location of the charge on the protein surface can be critical to the assembly process. The electrostatic attraction of proteins with linear polyions is straightforward, however, the situation is different with large ions with specific three-dimensional shapes and charge distribution. As an example, the direct assembly of oppositely charged protein molecules was difficult due to the fact that electrostatic attractions cannot be maximized with globular proteins. Polyion anchoring appears to be favored by the "patched" nature of the surface charge of proteins [42]. Flexible linear polyions can produce optimized electrostatic attractions and hence may penetrate in between protein molecules acting as an electrostatic "glue".

# The pH dependance

The number of excess charges on protein surfaces is directly dependant on the pH. Typically, the number of elemental charges seen with proteins used in the assembly process ranges from 10 to 60. For example, an albumin globule gave an elemental charge of +35 at pH 4 [31].

# Dependence on the thickness of the underlying polyion layer

The amount of adsorbed proteins was found to depend on the thickness of the underlying linear polyion layer. Proteins deposited in alternation with polyions prepared from high ionic strength solutions

(thickness of polyion layer: 3-4nm) were thicker than the protein layers deposited in alternation with polyions prepared from water (thickness of polyion layer 1nm). In multilayers composed of myoglobin/PSS in 0.2M NaCl, the thickness of the myoglobin layer was of the order of 7nm, which is double the thickness of the 4nm myoglobin monolayer deposited in alternation with PSS from water [35]. The amount of immunoglobulins was found to be double in IgG/PSS in 0.1M NaCl multilayers when compared to a multilayer with PSS from water [33]. The thicker polyion layer provides a matrix with a greater area available for protein deposition, and hence requires more protein to achieve the charge compensation and reversal. Therefore, the variation in the ionic strength of the polyion solution may be used as a fine-tune properties of the protein surface in film buildup.

### **2.4.3 RELIEF OF SOLID SUPPORT**

The stability of the multilayer assembly can be affected by the surface structure of the solid support. The assembly of hemoglobin, glucose oxidase, concanavalin, albumin, and myoglobin gave more stable films than those of cytochrome c and lysozyme. Multilayer assemblies onto QCM resonator was successful on all those proteins, while some difficulties occurred with the assembly onto quartz slides such as in the case of the alternate assembly of lysozyme onto PSS. Protein multilayers exhibit high stability when deposited onto silver or gold electrode surfaces, which have roughness in the tens of nanometers range.

## **2.4.4 OTHER PROBLEMS**

- pH in the bulk of the solution might differ from the pH at the charged polyion surface which could influence the conformation and activity of proteins in addition to the interaction with the polyion layer itself.
- The relative roughness of the polyion surface. Polymeric tails might protrude into the bulk solution causing protein aggregation during adsorption.
- 3) Drying of the polyion films might influence the structure.

# **2.5 CONCLUSIONS**

This chapter gives an overall view of fundamental approaches developed to design organized protein films with precise location of different protein monolayers. The multilayer film formation utilizing the layer-by-layer methodology may be applied to any water-soluble protein by choosing a solution pH apart from the protein isoelectric point to provide a surface charge. The films can be used in the following application areas:

- 1) Sensor layers. Multilayered films compromising enzymes layers provide a quick response to changes in its vicinity when combined with field-sensitive microelectronic elements. The efficiency of such sensor layers might be increased by the sequential deposition of the enzymatic layers that leads to enhanced electron transfer. Conductive polyions can be used to enhance electrical signaling processing as well. Protein/polyions multilayered films are insoluble in water and organic solvents and hence are perfectly suited for such uses.
- 2) Biocompatible coatings. Multilayered protein films may be used to coat surfaces of implants and surgical instruments. The use of functional proteins allows the preparation of biomimetic surfaces. In addition, polymer and polyion organic chemistry is extensive and hundreds of polyions may be used in the assembly with proteins. Mmultilayered films that result are molecularly thin and have

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desirable architecture and composition. The multilayered protein films may cover any type of surfaces that carries a sufficient surface charge.

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## **CHAPTER III**

## NITRIC OXIDE SYNTHASE OXYGENASE BASED NITRIC OXIDE RELEASE POLYETHYLENEIMINE THIN FILMS

## **3.1 INTRODUCTION**

Graft thrombosis is the cause of 80% of vascular access dysfunction, a problem with an associated health-care cost of over \$1 billion/year [1]. The number of revascularization procedures have increased dramatically, and is estimated at 15% after initial coronary revascularization, and approximately 50% after lower extremity bypass [2, 3]. Stent restenosis occurs at 30% of implant sites as a result of initial vascular thrombosis followed by cell proliferation, requiring a repeat angioplasty procedure within 1 year [4].

The thrombogenic nature of various polymeric materials utilized to prepare blood-contacting and implantable medical devices such as vascular grafts, intravascular catheters, sensors, coronary artery and vascular stents, and a host of other medical tools, even if labeled as biocompatible, can cause serious complications in patients. Thrombus formation at the surface of implantable medical devices is the major cause of vascular access dysfunction requiring secondary vascular procedures. Upon introduction of a foreign material into the blood stream, key proteins of the coagulation cascade (fibrinogen, and von Willebrand's factor) adsorb on the surface, followed by platelet adhesion and activation, leading to fibrin and thrombus formation at the surface (Figure 3.1).



**Figure 3.1:** Illustration showing thrombus formation at the surface of implantable medical devices. Upon exposure to blood, protein adsorption occurs, followed by platelet adhesion at the surface. Platelet activation leads to thrombus formation at the surface.

An anti-coagulation regiment, with the adverse effects associated with long term use, is typically required to clinically reduce the risk of thrombus formation [5]. Thrombus formation involves two synergistic events; a cGMP-dependant mechanism that involves platelet activation, adhesion and aggregation [6], and fibrin formation resulting from the binding of bivalent fibrinogen to glycoprotein IIb/IIIa [7].

Nitric oxide (NO), a molecule generated by the enzyme Nitric Oxide Synthase [8], using L-arginine as a substrate, was recently identified as a potent antiplatelet agent. This small molecule orchestrates a myriad of vital physiological functions. For instance, the endotheliumderived NO production at low concentrations (nanomolar) plays a critical role in the regulation of vascular hemostasis [9], and inhibits platelet adhesion [10], and aggregation [11], as well as their further recruitment to the growing thrombus [12]. There have been numerous reports indicating NO release from resting [13] and aggregating platelets [14]. NO flux from activated human platelets have been indirectly measured and is estimated at ~1.2 pmol.min<sup>-1</sup>/10<sup>8</sup> cells [13]. NO temporarily inactivates platelets in the close proximity of the endothelium [15]. This inhibition is short-lived and NO is rapidly scavenged by oxygen and hemoglobin in plasma [16]. To maintain this vital function and

counteract thrombus formation, stimulated human endothelial cells continuously generate NO at a level of ca.  $4x10^{-10}$  mol.cm<sup>-2</sup> min<sup>-1</sup> [17]. In this regard, NO-releasing bio-polymers are targeted as effective anti-thrombotic coatings in an attempt to enhance thromboresistivity of blood-contacting medical devices and implants.

Numerous approaches are investigated in an attempt to develop polymeric materials that are more blood-compatible. In general, these approaches can be categorized into two main trends: first, methods that mimic the anti-thrombogenic properties of endothelial cells [18], and, second, methods that use modified chemical surfaces and added moieties that limit protein and cell adhesion [19]. Prevention of protein adhesion *in vivo* is generally difficult to achieve, therefore the other approach, which aims at the development of surfaces mimicking properties of native endothelial cells, appears more promising. Nitric oxide, thrombomodulin, prostacyclin, and heparans contribute to the nonthrombogenic properties of the endothelial cells [20]. A potential solution can be found in polymeric coating materials that are capable of releasing low levels of nitric oxide at the blood/coating interface. Considerable efforts in this research area are focused on improving the NO-release chemistry of materials used as outer coatings for implantable medical

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devices. Polymers that possess chemical platforms with the ability of releasing NO have been shown to exhibit varying levels of thromboresistivity. In fact, akin to nitric oxide-releasing endothelial cells, NO-releasing polymers as functional coatings have the potential to be effective in preventing platelet adhesion, activation, and aggregation onto surfaces. These coatings have the potential of reducing the risk of thrombus formation at the exterior of blood-contacting devices and implants. They also have the potential to prolong vascular graft and stent potency without adverse systemic effects [21].

Two classes of NO-releasing materials have been explored. Ndiazeniumdiolate based NO-releasing polymers [22], and Nitrosothiolbased NO-releasing polymers [23]. N-diazeniumdiolates are inorganic NO donors formed by the reaction of a secondary amine structure with 2 equivalents of NO gas under high pressure, creating a relatively stable adduct structure [24]. The general structural types of diazeniumdiolates used for NO-releasing polymers include dispersed non covalently bound small molecules where the diazeniumdiolate group is attached to amines molecular weight in low compounds, and covalently bound diazeniumdiolates group to polymeric side chains or to the polymeric backbone [22].

The second class of proposed NO donors are S-nitrosothiols [25]; they mimic biological systems that are thought to serve as a NO reservoirs and transporters, such as S-nitroso-albumin and S-nitrosoglutathione, which are the most abundant naturally occurring S-nitrosothiols circulating in blood [26].

While films made of NO-donors incorporated into polymeric matrices did show the functional worthiness of NO-releasing coatings, this approach naturally results in only finite NO reservoirs, and thus the corresponding coatings are limited in their ability to sustain antithrombotic function over prolonged periods of time. The finite NO reservoir approach will also limit the potential use in more permanent types of implants. In addition, the NO fluxes achieved so far are lower than NO released from endothelial cells [19]. The logical alternative is then to explore approaches that would lead to materials with the ability to sustain NO generation for longer durations and at levels comparable to stimulated human endothelial cells (*ca.*  $4x10^{-10}$  molcm<sup>-2</sup>min<sup>-1</sup>) [17] and/or potentially tunable levels.

Developing NO-releasing surfaces that closely resembles the endothelium is critical to achieving better thromboresistivity. The endothelial isoform of the enzyme nitric oxide synthase, eNOS, is a key

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component of the endothelial cell lining. It was reported that eNOSoverexpressing endothelial cells seeding of synthetic small diameter vascular grafts decreased human platelet aggregation by 46%, and bovine aortic smooth muscle cell proliferation by 67.2% *in vitro* [27]. NOreleasing materials using polyethyeleneimine (PEI), a biocompatible polymer [28], has been reported in literature [29]. In our lab, NO was successfully generated from the enzyme nitric oxide synthase embedded in bilayered cast surfactant films [30].

In this work, we incorporated the enzyme nitric oxide synthase in the PEI polymeric matrix by means of layer-by-layer electrostatic adsorption [8], to construct a multicomponent protein film that mimics the NO-generating behavior of the endothelial cell lining. We demonstrate in this paper that our films provide a viable source of NO that utilizes endogenous compounds to maintain a continuous supply of nitric oxide. This study is the first account of successful NO release from the enzyme nitric oxide synthase incorporated into a bio-polymeric matrix using a LBL assembly technique. Our NO-releasing biopolymer coating is successfully formed by alternate deposition of polyethyleneimine and NO-generating NOS enzymes.

#### **3.2 RESULTS AND DISCUSSION**

# 3.2.1 EXPRESSION AND PURIFICATION OF iNOSoxy VIA RECOMBINANT PLASMID DNA

Many proteins and enzymes can be purchased through chemical catalogs with moderate expense making them best procured through those sources. NOS is not one of them. Because of the small biological quantities found in animal tissue, preparation and purification from biological sources would be prohibitively expensive. Making the procurement even more prohibitive is the fact that we need to specifically target the oxygenase domain of the enzyme, which could be obtained separate from the reductase domain by limited proteolysis of the fulllength strand. However, to use NOS enzyme in the quantities required for the completion of the current study requires an unbroken, relatively inexpensive source of enzyme without the tedious extra steps involved with enzyme proteolysis. This is accomplished through in-house protein expression and purification of the oxygenase domain via recombinant plasmid DNA.

The pCWori vector, a generous gift from the laboratory of Dennis Stuehr at the Lerner Research Institute, is inserted into plasmid DNA and transformed into BL21 (DE3) ampicillin-resistant *E. coli* as detailed by the Stuehr group [31]. This glycerol stock is then inoculated into 2 x 2 ml LB medium with 100  $\mu$ g/ml added ampicillin and allowed to grow overnight at 37°C.

Each aliquot of overnight culture is added to 500 ml autoclaved TB solution and allowed to grow under agitation at 37°C for about 3 hours or until 0.1  $OD_{600}$  is reached. Temperature is dropped to 25°C until  $0.3 - 0.8 \text{ OD}_{600}$  is reached, at which time IPTG and  $\delta$ -aminolevulinic acid are added to induce iNOSoxy protein production and to provide a heme precursor for the metalloprotein. The induced culture is left again overnight to produce maximum quantities of protein. Cells are harvested by centrifugation at 4,000 rpm at 4°C for 30 minutes, drained of supernate, and resuspended in a minimum of pH 7.6 lysis buffer buffer, lysozyme, phenylmethanesulfonylfluoride containing base (PMSF), Protease Inhibitor III (4-(2-Aminoethyl) benzenesulfonyl fluoride hydrochloride, aprotinin, leupetin, pepstatin A, bestatin, and L-3trans-Carboxyoxiran-2-carbonyl)-L-leucyl-agmatin), DNase, and MgCl<sub>2</sub>. Cells are lysed by sonication at 15-second on, 45-second off intervals for

a period of twenty minutes. The sonicated suspension is centrifugated at 12,000 g at 4°C for 30 minutes to precipitate cellular debris. The debris pellet is discarded and the crude supernatant lysate is collected. Protein precipitation is induced by gradual addition of 0.300 g (NH<sub>4</sub>)<sub>2</sub>SO<sub>4</sub>/ml of solution over a period of 1 hour followed by centrifugation at 10,000 rpm to collect the protein pellet. The pellet is again resuspended in base buffer, PMSF, and Protease Inhibitor III and filtered through a 0.45 micron PES syringe filter. A 4 ml dead volume Ni-NTA Agarose column is prepared for use by charging with 50 mM NiSO<sub>4</sub>, followed by addition of a binding tris buffer before loading the filtered protein sample onto the column. The column is equilibrated with tris binding buffer and washed with a dilute (40 mM) imidazole wash buffer prior to elution with c. 200 mM imidazole elution buffer. The protein was collected off the column and dialyzed in 500 ml base buffer with 200  $\mu$ l  $\beta$ mercaptoethanol, changing dialysis solution twice during the overnight process. The dialyzed protein is further concentrated by centrifugation at 5000 rpm at 4°C using 30,000 MW cut-off Amicon filters until the desired concentration (usually 0.45 mM) is reached. Aliquots of the protein are stored at -80°C for future use. Protein concentration is determined by Bradford Assay and by UV-Vis analysis of the Soret band

at 421 nm. SDS-PAGE further confirms the presence of iNOSoxy by marker comparison to molecular weight standards.

### **3.2.2 PREPARATION OF PEI/NOSoxy FILM**

We report here a proof of principle with the NOS oxygenase domain. The tetrahydrobiopterin-free oxygenase domain of inducible nitric oxide synthase (iNOSoxy) was expressed in house as reported in literature [32], and was used to explore the viability of nitric oxide synthase-containing films as potential sources of nitric oxide release. Although other surfaces can be used for film formation, we describe here the example of conductive pyrolytic graphite as a surface in order to perform, in parallel, the electrochemical characterization of nitric oxide synthase enzyme embedded in the polymetric film, as will be described later. The pyrolytic graphite surface is initially chemically oxidized as described in the literature to obtain a uniform negative charge at the surface [33]. The negatively-charge surface is then alternatively dipcoated in polyethyleneimine (1.5 mg/ml) solution and iNOSoxy (20 mg/ml) solution for 20 minutes, respectively, to achieve the desired film composition of 3 layers of iNOSoxy embedded in 4 alternate layers of PEI unless stated otherwise. The surface is thoroughly washed with deionized water and air-dried after each dip-coating step. The films were stored overnight at 4°C. (Figure 3.2)



**Figure 3.2:** Assembly of PEI/NOSoxy film using layer-by-layer electrostatic deposition.

### **3.2.3 FT-IR SPECTROSCOPIC CHARACTERIZATION**

We first performed IR characterization of the iNOSoxy in PEI films. Figure 3.3 shows the IR spectrum of iNOSoxy sandwished in layers of PEI. The spectrum is focused in the amide-1 and amide-2 IR region, which is often used to probe structural changes in globular proteins. Figure 1 shows that the overall shapes and positions of the two amide-bands are conserved in PEI films compared to native iNOSoxy in the absence of PEI. This result shows that the iNOSoxy conserves its major globular structure features in the PEI thin film.



**Figure 3.3:** Infrared spectrum in the amide I and amide II IR region showing that these bands, as spectroscopic probes of the NOSoxy structure in the PEI film, are conserved.

#### **3.2.4 ELECTROCHEMICAL CHARACTERIZATION**

To characterize the functional integrity of iNOSoxy embedded in the PEI film, we examined the electrochemical reduction of NO by iNOSoxy in film at the surface of pyrolytic graphite electrodes. The experiments for the characterization of NOS functional integrity using NO are carried out in the absence of oxygen. For these experiments only, the buffer is typically purged with purified nitrogen for at least 30 min prior to the experiments. A nitrogen blanket was then kept over the solution throughout the experiments. A fresh solution of 2mM NO was prepared, and required aliquots are added to the solution to make the desired concentration increments. NO stock-solutions are made by bubbling pure NO gas through degassed water [34]. NOSoxy enzymes, like other heme proteins and P-450 enzymes, can catalyze the electrochemical reduction of the nitric oxide as a substrate [35, 36]. We used this known property to characterize the presence and function of iNOSoxy enzymes embedded between the PEI layers in our thin films. Cyclic voltammetry of PEI/iNOSoxy film at the surface of PG electrodes (Figure 3.4) illustrates an irreversible catalytic wave at -0.9V/s, a

response typical to the catalytic reduction of NO by a heme protein such as iNOSoxy [35, 36].

A negative control experiment (PEI film devoid of iNOSoxy), does not show a catalytic current at -0.9V/s at the same NO concentrations (Figure 3.5). The increase in catalytic currents at -0.9V/supon incremental additions of NO is a clear indication of iNOSoxy catalytic mediation, and further confirms that its structural integrity and catalytic function are preserved in the in our PEI films. The native structure and integrity of embedded NOS enzyme and related enzymatic function are critical to the successful fabrication of our targeted NOSbased NO-releasing films.



**Figure 3.4:** Cyclic voltammograms of catalytic reductions of NO by PEI/NOS films at the surface of a PG electrode in pH 7.0 for different NO concentrations. The film on the electrode was formed by the alternate deposition of 5 layers of NOS enzyme sandwiched between PEI layers.



**Figure 3.5:** Negative control showing no catalytic reduction of NO on PEI films devoid of iNOSoxy protein

#### **3.2.5 ATOMIC FORCE MICROSCOPY**

To investigate the success of our methodology in producing polymeric film coatings with the desired coverage and surface morphology, we further characterized our LBL deposition of film components using atomic force microscopy (AFM) imaging. Figure 3.6 illustrates the AFM image of the layer-by-layer iNOSoxy/PEI film buildup. Figure 3.6A shows the 3D AFM image of the deposition of a layer of iNOSoxy over a layer of the polymer PEI at the surface of the HOPG slide. The figure shows a uniform distribution of the enzyme over the surface. Closer analysis of the features that result upon exposure to iNOSoxy solution confirms that the observed dimensions are close to the crystallographic dimension of iNOSoxy [37]. The overall surface height is of the order of 70 Å. Figure 3.6B shows the AFM image of the same HOPG slide after the sequential deposition of PEI over a layer of iNOSoxy resulting in the PEI/iNOSoxy/PEI coating. This image shows that the layer of iNOSoxy is still present but is now embedded in between two alternate PEI layers. The biocompatible polymeric coat now brings the average surface height to the order of 80 Å, which is consistent

with the cumulative surface heights measured for the PEI layers an the layer of iNOSoxy.

Our step-by-step AFM characterization shows that the functional component of our films, i.e. the iNOSoxy enzyme, is successfully trapped in between layers of the PEI polymer. In addition, AFM imaging shows that our LBL methodology yields a thin film with uniform coverage of the surface. A uniform coverage of the surface is key for efficiently prohibiting seed contacts at the blood/device interface, which will help improve the thromboresistivity of the device.



**Figure 3.6:** Atomic force microscopy images at the surface of highly oriented pyrolytic graphite (HOPG) depicting typical PEI/NOS film composition. (A) is a  $2\mu mx 2\mu m$  3D scan of a layer of NOS enzyme deposited over a layer of PEI polymer. (B) is  $\mu mx 2\mu m$  3D scan of the final layer of PEI polymer deposited after the deposition of a NOS enzyme layer.

# 3.2.6 QUARTZ CRYSTAL MICROBALANCE (QCM) CHARACTERIZATION

Quartz Crystal Microbalance (QCM) was used as a tool to investigate mass changes upon the alternate deposition of PEI and the NOSoxy enzyme. QCM analysis was carried out at the surface of a thin oscillating quartz crystal sandwiched between two gold electrodes. The measurement of the resonant frequency changes at the surface of a modified quartz crystal with the alternate deposition of PEI and iNOSoxy at the surface of a quartz crystal indicates a decrease in frequency that correlates with mass increase at the surface. Figure 3.7A indicates a typical QCM plot of the frequency change  $\Delta F_0$  upon the alternate deposition of PEI and the NOS enzyme on a quartz crystal. The average change in frequency per layer deposited is  $\Delta F_0$ = 120 Hz as indicated by Figure 3.7A.



**Figure 3.7:** A- Monitoring of the PEI/NOS multilayer film building through the layer-by-layer methodology using quartz crystal microbalance. B- Proposed model based on measured changes in crystal frequency showing that iNOSoxy in a monolayer of double-stack (vertical) dimers in each layer of iNOSoxy in the LBL process.

The change in frequency can be converted to mass changes by the Sauerbrey equation [38]. The mass change obtained in addition to the known dimensions of the iNOSoxy enzyme (60x50x40 Å), and the molecular weight of the iNOSoxy (60kDa) allows the determination of a model of the enzyme orientation within the PEI film. A monolayer of double-stacked iNOSoxy dimers (as seen in Figure 3.7B) corresponds to a theoretical  $\Delta F_0$ = 118 Hz which is of the same magnitude as the  $\Delta F_0$  seen experimentally. iNOSoxy is catalytically active in the dimeric form hence indicating that the charge-dependant orientation of the enzyme within the PEI matrix is such to retain its function.

### **3.2.7 NITRIC OXIDE FLUX MEASUREMENTS**

Successful NO release was achieved from our PEI/NOS films and at fluxes higher than what have been reported in the literature for other inorganic NO-releasing systems [19]. Typical substrates prepared as described above are utilized to investigate the NO production capability from the trapped iNOSoxy enzymes. For the flux measurement of NO released from the NOS/PEI films, we used a reaction cocktail composed of the intermediate N-hydroxy-L-arginine (NHA; 100µM) [39], tethrahydrobiopterin (H<sub>4</sub>B; 10 $\mu$ M), Dithiothreitol (DTT; 400 $\mu$ M) in phosphate buffer (100mM; pH=7.4). Hydrogen peroxide (H<sub>2</sub>O<sub>2</sub>) was used as a source of reducing equivalents in the known NOS peroxide shunt reaction. The enzymatic reaction was run at 37°C for the desired time period. The enzymatic activity of the PEI/NOS film was quantified by measuring NO released using the Griess assay [40] which tracks the accumulation of nitrite as the decomposition product of NO generated by iNOSoxy in the film. Figure 3.8 reveals total NO release from films composed of 3 consecutive layers of PEI/NOS. An increase in NO released is achieved with increasing time.



**Figure 3.8:** Total surface NO flux from PEI/NOS preparation as determined by the Griess assay. The PEI/NOS film is composed of 3 layers of NOS enzyme sandwiched between alternate PEI polymer layers. n=6



**Figure 3.9:** NO surface flux vs time from PEI/NOS preparation as determined by the Griess assay. The PEI/NOS film is composed of 3 layers of NOS enzyme sandwiched between alternate PEI polymer layers. n=6

Figure 3.9 shows the cumulative NO production by the (PEI/iNOSoxy) coating in terms of normalized NO surface flux. The figure shows that an initial burst of NO occurs at  $\sim 2$  hours (6.377x10<sup>-10</sup> moles NO.min<sup>-1</sup>.cm<sup>-2</sup>  $\pm$  0.523; n=6), 4 hours (3.611x10<sup>-10</sup> moles NO.min<sup>-1</sup>  $^{1}$ .cm<sup>-2</sup> ± 0.177; n=6), 8 hours (1.913x10<sup>-10</sup> moles NO.min<sup>-1</sup>.cm<sup>-2</sup> ± 0.148; n=6), followed by a sustained release at 24 hours  $(0.707 \times 10^{-10} \text{ moles})$ NO.min<sup>-1</sup>.cm<sup>-2</sup>  $\pm$  0.08; n=6), and 48 hours (0.511x10<sup>-10</sup> moles NO.min<sup>-1</sup>  $^{1}$ .cm<sup>-2</sup>  $\pm$  0.088; n=6). Successful NO release was achieved from our PEI/NOS films and at fluxes higher than what have been reported in the inorganic NO-releasing systems.<sup>[19</sup>] for other Our literature PEI/iNOSoxy film sustained catalytic production of NO for long periods of time and in conditions that mimic physiologic settings. This proof of concept based on using NOS oxygenase domain shows that the enzyme, although trapped in the polymeric matrix, is still accessible by the Nhydroxy-L-arginine as a substrate surrogate and hydrogen peroxide as a source of electrons in solution. Nitric oxide is produced as a result of the NOSoxy-mediated catalytic oxidation of N-hydroxy-L-arginine. Our enzyme-based NO production approach in the biocompatible PEI film closely mimics the behavior of endothelial cells and essentially overcomes the shortcoming of other approaches that result in only finite

NO-reservoirs. Sustained NO fluxes were observed for a period of 72 hours. NO fluxes at 2 hours (6.377x10<sup>-10</sup> molesNO.min<sup>-1</sup>.cm<sup>-2</sup>) are 150 fold higher than fluxes from stimulated human endothelial cells  $(4x10^{-10})$ mol.min<sup>-1</sup>.cm<sup>-2</sup>).[<sup>17</sup>] This initial burst eventually settles down at longer periods. For instance, the average NO flux at 48 hours is around only (0.511x10<sup>-10</sup> molesNO.min<sup>-1</sup>.cm<sup>-2</sup>), a value that is still ten-fold higher than NO fluxes from stimulated human endothelial cells. In addition, they are over 1000-fold higher than NO released from platelets.<sup>[13</sup>] NO release from PEI films shows 2-phase kinetics: an initial burst of NO, followed by a sustained release over a longer period of time. This 2phase kinetics of NO release is in line with previously published studies.[41] The initial burst can be useful to counter early prosthetic graft occlusion that occurs in 18% of synthetic vascular access conduits for dialysis [42], and 25% of infrapoliteal synthetic grafts.[3] The PEI/NOS film has the ability to function as a thromboresistant scaffold that imitates the endothelial cell lining response through the biphasic NO release exhibited.

To monitor the effects of film thickness on NO fluxes we investigated NO release from films with varying numbers of iNOSoxy layers. Figure 3.10 shows increased NO fluxes from a film composed of 5 layers of PEI/NOS relative to a film preparation of 3 layers of PEI/NOS, indicating that higher NO fluxes can be achieved by increasing the thickness, i.e. enzyme loading, of the polymeric coatings. The rate of NO release is crucial, and the optimum NO levels for coatings to be applied on medical devices and blood-contacting implants are yet to be determined. Therefore, the ability to control NO fluxes is of utmost importance. Our layer-by-layer approach provides the ability to control NO fluxes from films by varying the number of NOS enzyme layers in the polymeric matrix. In addition to producing nanometer-thick coatings, the layer-by-layer electrostatic self-assembly method has the built-in ability to tweak the film architecture to meet the requirements of thickness and composition.



**Figure 3.10:** NO fluxes from PEI/NOS films with various thicknesses as determined by the Griess assay. The PEI/NOS film is composed of 3 and 5 layers of NOS enzyme sandwiched between alternate PEI polymer layers; time= 2hrs & 4hrs

Our results with 3 and 5 PEI/NOSoxy layers show that fluxes of NO release correlate with the number of enzyme layers present in the film. Increasing the number of iNOSoxy layers deposited within the PEI film yields higher NO fluxes, indicating the ability of our approach to fine-tune NO fluxes to meet requirements of optimum release for varying applications. This work shows a proof of principle strategy to use NOS enzymes in biocompatible films to release NO. These functional films would thus counteract thrombosis on blood-contacting devices. A similar work using the full length NOS with its reductase and oxygenase domains will be presented in the next chapter and show that NO can be similarly produced using the substrate arginine and the native NADPH as a source of electrons.

#### **3.3 CONCLUSIONS**

We have presented a proof of principle of a new approach for making antithrombotic coatings for medical devices and implants based on NO release. Our alternative approach is based on using nitric oxide synthase enzyme as the functional unit in a polymeric film for catalytic production of NO. The approach can use endogenous compounds for continuous NO release from biocompatible films under physiologic conditions. We have demonstrated that NOS-based polymetric films successfully generate NO under physiologic condition at levels higher than those observed for endothelial cells. The level of NO release can be tuned through varying the number of NOS layers in the film buildup. We have shown that NO fluxes from our NOS-based PEI films are sustained for prolonged periods of time, which has the potential of producing efficient, long-term, antithrombotic coatings for medical devices and blood-contacting tools such as stents and catheters.

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## **CHAPTER IV**

# NO-RELEASE NITRIC OXIDE SYNTHASE-BASED BIOPOLYMERS

## **4.1 INTRODUCTION**

Graft thrombosis is the cause of 80% of vascular access dysfunction, a problem with an associated health-care cost of over \$1 billion/year [1]. The number of revascularization procedures have increased dramatically, and is estimated at 15% after initial coronary revascularization, and approximately 50% after lower extremity bypass [2,3]. Stent restenosis occurs at 30% of implant sites as a result of initial vascular thrombosis followed by cell proliferation, requiring a repeat angioplasty procedure within 1 year [4].

The thrombogenic nature of various polymeric materials utilized to prepare blood-contacting and implantable medical devices such as vascular grafts, intravascular catheters, sensors, coronary artery and vascular stents, and a host of other medical tools, even if labeled as biocompatible, can cause serious complications in patients. Thrombus formation at the surface of implantable medical devices is the major cause of vascular access dysfunction requiring secondary vascular procedures. Upon introduction of a foreign material into the blood stream, key proteins of the coagulation cascade (fibrinogen, and von Willebrand's factor) adsorb on the surface, followed by platelet adhesion and activation, leading to fibrin and thrombus formation at the surface (Figure 4.1).



**Figure 4.1:** Illustration showing thrombus formation at the surface of implantable medical devices. Upon exposure to blood, protein adsorption occurs, followed by platelet adhesion at the surface. Platelet activation leads to thrombus formation at the surface.

An anti-coagulation regiment, with the adverse effects associated with long term use, is typically required to clinically reduce the risk of thrombus formation [5]. Thrombus formation involves two synergistic events; a cGMP-dependant mechanism that involves platelet activation, adhesion and aggregation [6], and fibrin formation resulting from the binding of bivalent fibrinogen to glycoprotein IIb/IIIa [7].

Nitric oxide (NO), a molecule generated by the enzyme Nitric Oxide Synthase (NOS) using L-arginine as a substrate, was recently identified as a potent antiplatelet agent. This small molecule orchestrates a myriad of vital physiological functions. For instance, the endotheliumderived NO production at low concentrations (nanomolar) plays a critical role in the regulation of vascular hemostasis [8], and inhibits platelet adhesion [9], and aggregation [10], as well as their further recruitment to the growing thrombus [11]. There have been numerous reports indicating NO release from resting [12], and aggregating platelets [13]. NO flux from activated human platelets have been indirectly measured and is estimated at ~1.2 pmol.min<sup>-1</sup>/10<sup>8</sup> cells [12]. NO temporarily inactivates platelets in the close proximity of the endothelium [14]. This inhibition is short-lived and NO is rapidly scavenged by oxygen and hemoglobin in plasma [15]. To maintain this vital function and counteract thrombus formation, stimulated human endothelial cells continuously generate NO at a level of *ca*.  $4x10^{-10}$  mol.cm<sup>-2</sup> min<sup>-1</sup> [16]. In this regard, NO-releasing bio-polymers are targeted as effective anti-thrombotic coatings in an attempt to enhance thromboresistivity of blood-contacting medical devices and implants.

Numerous approaches are investigated in an attempt to develop polymeric materials that are more blood-compatible. In general, these approaches can be categorized into two main trends: first, methods that mimic the anti-thrombogenic properties of endothelial cells [17], and, second, methods that use modified chemical surfaces and added moieties that limit protein and cell adhesion [18]. Prevention of protein adhesion *in vivo* is generally difficult to achieve, therefore the other approach, which aims at the development of surfaces mimicking properties of native endothelial cells, appears more promising. Nitric oxide, thrombomodulin, prostacyclin, and heparans contribute to the nonthrombogenic properties of the endothelial cells [19]. A potential solution can be found in polymeric coating materials that are capable of releasing low levels of nitric oxide at the blood/coating interface. Considerable efforts in this research area are focused on improving the NO-release chemistry of materials used as outer coatings for implantable medical

devices. Polymers that possess chemical platforms with the ability of releasing NO have been shown to exhibit varying levels of thromboresistivity. In fact, akin to nitric oxide-releasing endothelial cells, NO-releasing polymers as functional coatings have the potential to be effective in preventing platelet adhesion, activation, and aggregation onto surfaces. These coatings have the potential of reducing the risk of thrombus formation at the exterior of blood-contacting devices and implants. They also have the potential to prolong vascular graft and stent potency without adverse systemic effects [20]

Two classes of NO-releasing materials have been explored. Ndiazeniumdiolate based NO-releasing polymers [21], and Nitrosothiolbased NO-releasing polymers [22]. N-diazeniumdiolates are inorganic NO donors formed by the reaction of a secondary amine structure with 2 equivalents of NO gas under high pressure, creating a relatively stable adduct structure [23]. The general structural types of diazeniumdiolates used for NO-releasing polymers include dispersed non covalently bound small molecules where the diazeniumdiolate group is attached to amines weight in low molecular compounds, and covalently bound diazeniumdiolates group to polymeric side chains or to the polymeric backbone [21].

The second class of proposed NO donors are S-nitrosothiols [24]; they mimic biological systems that are thought to serve as a NO reservoirs and transporters, such as S-nitroso-albumin and S-nitrosoglutathione, which are the most abundant naturally occurring S-nitrosothiols circulating in blood [25].

While films made of NO-donors incorporated into polymeric matrices did show the functional worthiness of NO-releasing coatings, this approach naturally results in only finite NO reservoirs, and thus the corresponding coatings are limited in their ability to sustain antithrombotic function over prolonged periods of time. The finite NO reservoir approach will also limit the potential use in more permanent types of implants. In addition, the NO fluxes achieved so far are lower than NO released from endothelial cells [18]. The logical alternative is then to explore approaches that would lead to materials with the ability to sustain NO generation for longer durations and at levels comparable to stimulated human endothelial cells (*ca.*  $4x10^{-10}$  molcm<sup>-2</sup>min<sup>-1</sup>) [16], and/or potentially tunable levels.

Developing NO-releasing surfaces that closely resembles the endothelium is critical to achieving better thromboresistivity. The endothelial isoform of the enzyme nitric oxide synthase, eNOS, is a key component of the endothelial cell lining. It was reported that eNOSoverexpressing endothelial cells seeding of synthetic small diameter vascular grafts decreased human platelet aggregation by 46%, and bovine aortic smooth muscle cell proliferation by 67.2% *in vitro* [26]. NOreleasing materials using polyethyeleneimine (PEI), a biocompatible polymer [27], has been reported in literature [28]. In our lab, NO was successfully generated from the enzyme nitric oxide synthase embedded in bilayered cast surfactant films [29].

NO releasing materials using Polyethyeleneimine (PEI), a biocompatible polymer [27], has been reported in literature [28,30,31]. In our lab, NO was successfully generated nitric oxide from the oxygenase domain of the enzyme Nitric Oxide Synthase (NOSoxy) embedded in polymeric matrix by means of layer-by-layer electrostatic adsorption [32,33]. In this work, we incorporated the enzyme nitric oxide synthase in the PEI polymeric matrix by means of layer-by-layer electrostatic adsorption [33], to construct a multicomponent protein film that mimics the NO-generating behavior of the endothelial cell lining. We demonstrate in this paper that our films provide a viable source of NO that utilizes endogenous compounds to maintain a continuous supply of nitric oxide.

#### **4.2 MATERIALS AND METHODS**

# 4.2.1 EXPRESSION AND PURIFICATION OF INOS VIA RECOMBINANT PLASMID DNA

Many proteins and enzymes can be purchased through chemical catalogs with moderate expense making them best procured through those sources. NOS is not one of them. Because of the small biological quantities found in animal tissue, preparation and purification from biological sources would be prohibitively expensive. Making the procurement even more prohibitive is the fact that we need to specifically target the oxygenase domain of the enzyme, which could be obtained separate from the reductase domain by limited proteolysis of the fulllength strand. However, to use NOS enzyme in the quantities required for the completion of the current study requires an unbroken, relatively inexpensive source of enzyme without the tedious extra steps involved with enzyme proteolysis. This is accomplished through in-house protein expression and purification of the full-length enzyme via recombinant plasmid DNA.

The pCWori vector, a generous gift from the laboratory of Dennis Stuehr at the Lerner Research Institute, is inserted into plasmid DNA and transformed into BL21 (DE3) ampicillin-resistant *E. coli* as detailed by the Stuehr group [34]. This glycerol stock is then inoculated into 2 x 2 ml LB medium with 100  $\mu$ g/ml added ampicillin and chloramphenicol, and allowed to grow overnight at 37°C.

Each aliquot of overnight culture is added to 500 ml autoclaved TB solution and allowed to grow under agitation at 37°C for about 3 hours or until 0.1  $OD_{600}$  is reached. Temperature is dropped to 25°C until  $0.3 - 0.8 \text{ OD}_{600}$  is reached, at which time IPTG and  $\delta$ -aminolevulinic acid are added to induce iNOS protein production and to provide a heme precursor for the metalloprotein. The induced culture is left again overnight to produce maximum quantities of protein. Cells are harvested by centrifugation at 4,000 rpm at 4°C for 30 minutes, drained of supernate, and resuspended in a minimum of pH 7.6 lysis buffer buffer, lysozyme, phenylmethanesulfonylfluoride containing base (PMSF), Protease Inhibitor III (4-(2-Aminoethyl) benzenesulfonyl fluoride hydrochloride, aprotinin, leupetin, pepstatin A, bestatin, and L-3trans-Carboxyoxiran-2-carbonyl)-L-leucyl-agmatin), DNase, and MgCl<sub>2</sub>. Cells are lysed by sonication at 15-second on, 45-second off intervals for

a period of twenty minutes. The sonicated suspension is centrifugated at 12,000 g at 4°C for 30 minutes to precipitate cellular debris. The debris pellet is discarded and the crude supernatant lysate is collected. Protein precipitation is induced by gradual addition of 0.300 g (NH<sub>4</sub>)<sub>2</sub>SO<sub>4</sub>/ml over a period of 1 hour followed by centrifugation at 10,000 rpm to collect the protein pellet. The pellet is again resuspended in base buffer, PMSF, and Protease Inhibitor III and filtered through a 0.45 micron PES syringe filter. A 4 ml dead volume Ni-NTA Agarose column is prepared for use by charging with 50 mM NiSO<sub>4</sub>, followed by addition of a binding tris buffer before loading the filtered protein sample onto the column. The column is equilibrated with tris binding buffer and washed with a dilute (40 mM) imidazole wash buffer prior to elution with c. 200 mM imidazole elution buffer. The protein was collected off the column and dialyzed in 500 ml base buffer with 200  $\mu$ l  $\beta$ -mercaptoethanol, changing dialysis solution twice during the overnight process. The dialyzed protein is further concentrated by centrifugation at 5000 rpm at 4°C using 30,000 MW cut-off Amicon filters until the desired concentration (usually 0.45 mM) is reached. Aliquots of the protein are stored at -80°C for future use. Protein concentration is determined by Bradford assay and by UV-Vis analysis of the Soret band at 421 nm. SDS-PAGE further confirms the presence of iNOS by marker comparison to molecular weight standards.

### **4.2.2 PREPARATION OF PEI/NOS FILM**

The full length inducible nitric oxide synthase (iNOS) was expressed in house as reported in literature [35]. A pyrolytic graphite surface (unless indicated otherwise) was initially modified utilizing our diazonium method as described in the literature to obtain a uniform negative charge at the surface [36]. Typically, the PG surface is dipped in a mixture of 50mM p-aminobenzoate and 50mM sodium nitrite at 4°C, in a 3 necked electrochemical cell. The potential is scanned between 0 and -0.6 V vs Ag/AgCl leading to the covalent attachment of diazonium group on the surface, with a free carboxylic group (COO<sup>-</sup>). The pyrolytic graphite surface was alternatively dipped coated in a polyethyleneimine (PEI; 1.5mg/ml) solution and iNOS solution for 10 minutes respectively to achieve the desired film composition. The surface was thoroughly washed with deionized and air-dried after each step. The films were stored overnight at 4°C. (Figure 4.2)



**Figure 4.2:** Assembly of PEI/NOS film using layer-by-layer electrostatic deposition.

# 4.2.3 QUARTZ CRYSTAL MICROBALANCE (QCM) CHARACTERIZATION

QCM analysis was carried out at the surface of a thin oscillating quartz crystal sandwiched between two gold electrodes. Prior to coating, the quartz crystal surface surface was cleaned by soaking in a piranha solution (30%H<sub>2</sub>O<sub>2</sub>; 70%H<sub>2</sub>SO<sub>4</sub>) for 5 minutes, followed by rinsing with deionized water, and dried under nitrogen. The surface of the quartz crystal was modified, prior to deposition, with our diazonium method as previously described. We measured the reduction in resonance frequency with each deposited layer and calculated the mass deposited using the Sauerbrey equation, which directly relates the decrease in frequency to mass change [37]. QCM analysis was performed on a CH Instrument electrochemical workstation using a QCM cell; the same cell was used for electrochemical experiments needed to modify the gold surface prior to LBL depositions.

### **4.2.4 ATOMIC FORCE MICROSCOPY**

Atomic Force Microscopy characterization was carried out at the surface of 1cmx1cm highly oriented pyrolytic graphite (HOPG) slides. Initially, the top layer on the slide was peeled to eliminate any interference from dust particles. The HOPG surface was modified with the diazonium method as previously described. The surface was modified as previously described and images were taken following each layer deposition using a Molecular Imaging pico-SPM using the MAC mode interfaced with a PicoScan controller (MICorp, Arizona).

#### **4.2.5 NO FLUX MEASUREMENTS**

The films were prepared as described above. We prepared reaction cocktail composed of the substrate L-arginine at physiological levels (100 $\mu$ M) [38], 1mM Calcium Chloride (CaCl<sub>2</sub>) in Phosphate buffer (100mM; pH=7.4). NADPH (150 $\mu$ M) was used as a source of reducing equivalents, which is widely used in the NOS community. The enzymatic reaction was run at 37°C for the desired time period. The enzymatic activity of the film at the pyrolytic graphite surface was quantified by measuring NO flux using the Griess assay [39,40]. Absorbance measurements were taken using an Agilent 8543 Spectrophotometer utilizing 1-cm path UV-visible cells.

### **4.2.6 PLATELET ADHESION STUDIES**

Whole blood from dog was drawn into blood collection tubes containing 60 units of sodium heparin as an anticoagulant. The heparinized whole blood was centrifuged at 110g for 15 min at 228C. platelet-rich plasma (PRP) was collected from the supernatant. To reestablish platelet activity, CaCl<sub>2</sub> was added to the PRP to raise [Ca<sup>2+</sup>] by 2 mM. Before PRP incubation, the Indium Tin Oxide (ITO) slides were modified by the method described previously. Then, the polymer coated ITO slides were incubated for 1 h at 37°C in 500 mL of recalcified PRP under static conditions. The PRP was then decanted and the wells were washed once with 200 mL PBS.

### 4.2.7 LACTATE DEHYDROGENASE ASSAY

Before PRP incubation, the poly-L-Lysine coated microtiter plate wells were modified by the method described previously. Then, 100 mL of recalcified PRP was added to each polymer-coated well and incubated for 1 h at 37°C under static conditions. The PRP was then decanted and the wells were washed once with 200 mL PBS. Adhered platelets were lysed using a lysing buffer which was 1% (w/v) Triton X-100. 150µL of lysing buffer was incubated in each well for 1 h at 37°C with occasional agitation to completely disrupt the platelet membranes. Then, 100 µL of each lysate solution was pipetted into wells of a 96-well polystyrene microtiter plate (Fisher) that contained 100 µL of reagent from an LDH assay kit (Roche Applied Sciences, Indianapolis, IN), and incubated for 30 min at 25°C. Then, 50 µL of stop solution is added and absorbance of each well at 490 nm was monitored by a Labsystems Multiskan RC microplate reader.

#### **4.3 RESULTS AND DISCUSSION**

# 4.3.1 QUARTZ CRYSTAL MICROBALANCE (QCM) CHARACTERIZATION

Quartz Crystal Microbalance (QCM) was used as a tool to investigate mass changes upon the alternate deposition of PEI and the iNOS enzyme. QCM analysis was carried out at the surface of a thin oscillating quartz crystal sandwiched between two gold electrodes. The measurement of the resonant frequency changes at the surface of a modified quartz crystal with the alternate deposition of PEI and iNOS at the surface of a quartz crystal indicates a decrease in frequency that correlates with mass increase at the surface. Figure 4.4 indicates a typical QCM plot of the frequency change  $\Delta F_0$  upon the alternate deposition of PEI and the NOS enzyme on a quartz crystal. The average change in frequency per layer deposited is  $\Delta F_0$ = 58 Hz as indicated by Figure 4.3.



**Figure 4.3:** A- Monitoring of the PEI/NOS multilayer film building through the layer-by-layer methodology using quartz crystal microbalance. B- Proposed model based on measured changes in crystal frequency showing that iNOSoxy in a monolayer of dimers in each layer of iNOSoxy in the LBL process.

The change in frequency can be converted to mass changes by the Sauerbrey equation [37]. The mass change obtained in addition to the known dimensions of the iNOS enzyme (120x80x60 Å), and the molecular weight of the iNOS (120kDa) allows the determination of a model of the enzyme orientation within the PEI film. A monolayer of iNOS dimers (as seen in Figure 4.3B) corresponds to a theoretical  $\Delta F_0$ = 60 Hz which is of the same magnitude as the  $\Delta F_0$  seen experimentally. iNOS is catalytically active in the dimeric form hence indicating that the charge-dependant orientation of the enzyme within the PEI matrix is such to retain its function.

### 4.3.2 ATOMIC FORCE MICROSCOPY CHARACTERIZATION

To investigate the success of our methodology in producing polymeric film coatings with the desired coverage and surface morphology, we further characterized our LBL deposition of film components using atomic force microscopy (AFM) imaging. Figure 4.4 illustrates the AFM image of the layer-by-layer iNOS/PEI film buildup. Figure 4.4A illustrates the 3D AFM image of the deposition of a layer of the polymer PEI at the surface of the HOPG slide. The figure shows a

uniform spread of the PEI polymer on the surface. The surface height is of the order of 2.0nm. Figure 4.4B shows the 3D AFM image of the deposition of a layer of iNOS over a layer of the polymer PEI at the surface of the HOPG slide. The figure shows a uniform distribution of the enzyme over the surface. Closer analysis of the features that result upon exposure to iNOS solution confirms that the observed dimensions are close to the crystallographic dimension of iNOS [42]. The overall surface height is of the order of 8.0nm. Figure 4.4C shows the AFM image of the same HOPG slide after the sequential deposition of PEI over a layer of iNOS resulting in the PEI/iNOS/PEI coating. This image shows that the layer of iNOS is still present but is now embedded in between two alternate PEI layers. The biocompatible polymeric coat now brings the average surface height to the order of 10.0nm, which is consistent with the cumulative surface heights measured for the PEI layers an the layer of iNOS.



**FIGURE 4.4:** Atomic force microscopy images at the surface of highly oriented pyrolytic graphite (HOPG) depicting typical PEI/NOS film composition. (A) is a 2µmx2µm 3D scan of the layer of PEI polymer deposited at the HOPG surface. (B) is a 2µmx2µm 3D scan of a layer of NOS enzyme deposited over a layer of PEI polymer. (C) is a 2µmx2µm 3D scan of the final layer of PEI polymer deposited after the deposition of a NOS enzyme layer.

Our step-by-step AFM characterization shows that the functional component of our films, i.e. the iNOS enzyme, is successfully trapped in between layers of the PEI polymer. In addition, AFM imaging shows that our LBL methodology yields a thin film with uniform coverage of the surface. A uniform coverage of the surface is instrumental in efficiently prohibiting seed contacts at the blood/device interface, which will help improve the thromboresistivity of the device.

### **4.3.3 NO FLUX MEASUREMENTS**

Successful NO release was achieved from our PEI/NOS films and at fluxes higher than what have been reported in the literature for other inorganic NO-releasing systems [18]. Typical substrates prepared as described above are utilized to investigate the NO production capability from the trapped iNOS enzymes. The enzymatic activity of the coatings at the pyrolytic graphite surface was quantified by measuring NO flux using the Griess assay [39, 40], which tracks the accumulation of nitrite as the decomposition product of NO generated by iNOS in the film. Figure 4.5 reveals total NO release from films composed of 5 consecutive layers of PEI/NOS. An increase in NO released is achieved with increasing time.



**Figure 4.5:** Total surface NO flux from PEI/NOS preparation as determined by the Griess assay. The PEI/NOS film is composed of 5 layers of NOS enzyme sandwiched between alternate PEI polymer layers. n=5

Figure 4.6 shows the cumulative NO production by the (PEI/iNOS) coating in terms of normalized NO surface flux. The figure shows that an initial burst of NO occurs at 24 hours (1.09nM NO.min<sup>-1</sup>.cm<sup>-2</sup>  $\pm$  0.45; n=5), 48 hours (0.88nM NO.min<sup>-1</sup>.cm<sup>-2</sup>  $\pm$  0.13; n=6), 72 hours (0.59nM NO.min<sup>-1</sup>.cm<sup>-2</sup>  $\pm$  0.08; n=5), followed by a sustained release at 96 hours (0.54nM NO.min<sup>-1</sup>.cm<sup>-2</sup>  $\pm$  0.12; n=5).



**Figure 4.6:** NO surface flux vs time from PEI/NOS preparation as determined by the Griess assay. The PEI/NOS film is composed of 3 layers of NOS enzyme sandwiched between alternate PEI polymer layers. n=5

Successful NO release was achieved from our PEI/NOS films and at fluxes higher than what have been reported in the literature for other inorganic NO-releasing systems [18]. Our PEI/iNOS film sustained catalytic production of NO for long periods of time and in conditions that mimic physiologic settings. Our enzyme-based NO production approach in the biocompatible PEI film closely mimics the behavior of endothelial cells and essentially overcomes the shortcoming of other approaches that result in only finite NO-reservoirs. Sustained NO fluxes were observed for a period of 96 hours. This initial burst eventually settles down at longer periods. NO release from PEI films shows 2-phase kinetics: an initial burst of NO, followed by a sustained release over a longer period of time. This 2-phase kinetics of NO release is in line with previously published studies [43]. The initial burst can be useful to counter early prosthetic graft occlusion that occurs in 18% of synthetic vascular access conduits for dialysis [44], and 25% of infrapoliteal synthetic grafts [3]. The PEI/NOS film has the ability to function as a thromboresistant scaffold that imitates the endothelial cell lining response through the biphasic NO release exhibited.

To monitor the effects of film thickness on NO fluxes we investigated NO release from films with varying numbers of iNOS layers. Figure 4.7 shows increased NO fluxes from a film composed of 5 layers of PEI/NOS relative to a film preparation of 3 layers, and 1 layer of PEI/NOS respectively, indicating that higher NO fluxes can be achieved by increasing the thickness, i.e. enzyme loading, of the polymeric coatings. The rate of NO release is crucial, and the optimum NO levels for coatings to be applied on medical devices and bloodcontacting implants are yet to be determined. Therefore, the ability to control NO fluxes is of utmost importance. Our layer-by-layer approach provides the ability to control NO fluxes from films by varying the number of NOS enzyme layers in the polymeric matrix. In addition to producing nanometer-thick coatings, the layer-by-layer electrostatic selfassembly method has the built-in ability to tweak the film architecture to meet the requirements of thickness and composition.



**Figure 4.7:** NO fluxes from PEI/NOS films with various thicknesses as determined by the Griess assay. The PEI/NOS film is composed of 1,3 and 5 layers of NOS enzyme sandwiched between alternate PEI polymer layers; time= 8hrs

Our results with 1, 3 and 5 PEI/NOS layers show that fluxes of NO release correlate with the number of enzyme layers present in the film. Increasing the number of iNOS layers deposited within the PEI film yields higher NO fluxes, indicating the ability of our approach to fine-tune NO fluxes to meet requirements of optimum release for varying applications.

#### **4.3.4 PLATELET ADHESION STUDIES**

To evaluate the thromboresistivity of the NOS based polymeric coatings *in vitro*, ITO slides, glass substrates that offer the advantage of being conductive, were coated with the NOS containing polymer (Figure 4.8B), as well as BSA containing polymer (Figure 4.8A) (negative control). Those slides were incubated with platelet rich plasma for 1 hour at 37°C, and then rinsed with PBS buffer. Phase contrast microscopy images of NO releasing NOS based polymers (Figure 4.8D) consistently showed almost no platelet adhesion at the surface when compared with a negative control (Figure 4.8C), indicating an overall enhancement of the thromboresistive properties of those coatings.


**Figure 4.8:** Phase contrast microscopy images pre-incubation of A) PEI/BSA film and B) PEI/NOS film, and post incubation with platelet rich plasma C) PEI/BSA film and D) PEI/NOS.

# 4.3.5 LACTATE DEHYDROGENASE ASSAY

LDH assay is useful in quantifying cell and platelet adhesion at the surface of the PEI/NOS coatings. LDH is an enzyme found in cells at levels proportional to its size [45], and is released following cell breakdown. *In vitro* determination of the degree of platelet adhesion to surfaces using LDH assay has been reported [45-47].

Figure 4.9 reveals the corresponding LDH level results of uncoated surface (bare)  $0.16\pm0.04$  (N=7), 5 layer coating (5 layers of NOS)  $0.11\pm0.01$  (N=7), and 10 layer coating (10 layers of NOS)  $0.06\pm0.01$  (N=7).



**Figure 4.9:** LDH assay of platelet adhesion on the surface of the PEI/NOS coatings.

In figure 4.10, the mean LDH activity at the bare surface was considered to correspond to 100% adhesion, and a decreased amount of adhered platelets was seen with the 5 layer coatings (69.8%) and with the 10 layer coatings (39.3%).



**Figure 4.10:** Percentage platelet adhesion on the surface of the PEI/NOS coatings.

As expected, the results presented reveals that the increasing number of NOS layers within the PEI/NOS coating corresponding to higher NO fluxes, reduced platelet adhesion *in vitro* up to 60.7%. The inhibition of platelet adhesion is a critical step in inhibiting thrombus formation at the surface of implantable medical devices. The enhanced thromboresistivity displayed by these coatings provide the basis of future endeavors in developing more biocompatible coatings for surface modifications of implantable medical devices.

## **4.4 CONCLUSIONS**

Thrombus formation at the surface of implantable medical devices is the major cause of vascular access dysfunction requiring secondary vascular procedures. NO releasing bio-polymers are being sought as an effective anti-thrombotic coatings in an attempt to enhance thromboresistivity of those devices. The approaches utilizing NO-donors incorporated into polymeric matrices suffer from being a finite NO reservoir, and thus they are limited in their ability to sustain NO fluxes over a prolonged period of time. We presented a logical alternative that explores approaches aiming at developing materials with the ability to sustain NO release for longer durations and at levels comparable to stimulated human endothelial cells  $(0.5-4x10^{-10} \text{ molcm}^{-2}\text{min}^{-1})$  [16].

NOS based polyethyleneimine coatings were successfully developed with the layer-by-layer methodology. NO was successfully generated from these coatings at levels comparable to stimulated human endothelial cells. NO release from these NOS-based coatings successfully decreased platelet adhesion at the surface by 60%, which potentially might lead to improved thromboresistivity of implantable devices when coated with those materials.

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## CHAPTER V

#### **CONCLUSIONS AND FUTURE DIRECTIONS**

#### **5.1 CONCLUSIONS**

During the past century, the use of implantable medical devices and other blood contacting biomedical devices have evolved from a mere dream to a widely adopted medical practice, including the use of stents, vascular grafts, sensors, pacemakers, heart valves, hemodialyzers, extracorporeal circuits, and membrane oxygenators [1, 2]. However, one of the major problems associated with these devices, is that the introduction of such devices leads to injury of the blood vessel walls. Clot formation or thrombosis also results at the injured site, causing stenosis or occlusion of the blood vessel. Moreover, if the medical device is left within the patient for an extended period of time, thrombus ultimately forms on the device itself, again causing stenosis or occlusion. The driving force behind these issues is the lack of hemocompatibility of materials used to prepare such the polymeric devices. The biocompatibility of an implantable medical device is defined as the ability of the device to perform its intended function, with the desired incorporation within the host, without eliciting any undesirable local or systemic effects in that host [3]. There exists a need for modification of medical devices. with materials capable of enhancing the biocompatibility of these devices from the first instance of blood and tissue contact to days or weeks following its first use. The best-known example of a completely non-thrombogenic surface is the vascular endothelium that lines the inner walls of all blood vessels. The biological responses underlining the biocompatibility of this lining are mediated by a number of active molecules that are either expressed at the surface such as heparan sulfate, and thrombomodulin [4], or are continuously being secreted such as prostacyclin, plasminogen, antithrombin III and Nitric Oxide (NO) [5].

NO releasing bio-polymers are being sought as effective antithrombotic coatings in an attempt to enhance thromboresistivity of those devices. The approaches utilizing NO-donors incorporated into polymeric matrices suffer from being a finite NO reservoir, and thus they are limited in their ability to sustain NO fluxes over a prolonged period of time. The alternative is then to explore approaches that would lead to materials with the ability to sustain NO generation for longer durations and at levels comparable to stimulated human endothelial cells ( $0.5 - 4x10^{-10}$  molcm<sup>-2</sup>min<sup>-1</sup>) [6]. NOS based polyethyleneimine coatings were successfully developed with the layer-by-layer methodology. NO was successfully generated from these coatings at levels comparable to stimulated human endothelial cells. NO release from these coatings successfully decreased platelet adhesion at the surface by 60%, which leads to improved thromboresistivity of implantable devices when coated with those materials.

#### **5.2 FUTURE DIRECTIONS**

Various efforts have been made to prepare more blood compatible surfaces that include NO-release (anti-platelet activity), heparin bound (anticoagulant activity) [7], or thrombomodulinimmobilized polymeric coatings [8]. The potency of such materials in preventing clot formation may be limited to the fact that these materials partially address the thromboresistivity issues. These materials possess partial thromboreisistivity (either anti-platelet or anticoagulant activity). The alternative could be the development of surfaces that integrates both anti-platelet and anticoagulant agents that will act synergistically to achieve higher thromboresistivity levels. The integration of a combination of the agents that possess anti-platelet and anticoagulant activity into a polymeric matrix in such a manner that they are either released or are immobilized on the surface should result in a 'truly' biomimetic coating that closely resembles the endothelial cell lining of the inner blood vessel wall.



**Figure 5.1:** A schematic illustration of liposome surface glycofunctionalization through the Staudinger ligation. Adapted from [9]

Polymeric materials that combine NO release with surfacebound heparin have been developed in an initial effort to towards the fabrication of polymeric coating that truly mimic the endothelial cell functionality [10]. Thrombomodulin, a 74 kDa transmembrane protein acts as a modulator of thrombin activity in vivo [4]. Once thrombin binds to thrombomodulin on the endothelial cell surface, thrombin's fibrinogen cleaving activity is inhibited. In addition, the protein C anti-coagulation pathway is activated by this binding leading to the change of thrombin from a procoagulant state to an anti-coagulant state [11]. Multifunctional bilayer polymeric coatings have been recently described with both controlled NO release and surface bound active thrombomodulin or combined thrombomodulin and heparin that mimic the highly thromboresistant endothelium layers [12]. In addition, liposomes have been presented as candidates to prepare biomimetic coatings intended to enhance the biocompatibility of implantable medical devices [13]. Pancreatic Islets with recombinant azido-thrombomdulin were prepared chemoselective conjugation of an azido-functionalized bv the thrombomodulin [14], to pancreatic islets by Staudinger ligation to a surface-bound bifunctional poly(ethylene glycol) linker (Figure 5.1). The presence of thrombomodulin on the surface was associated with a significant increase in the production of activated protein C with a reduction in the islet-mediated thrombogenicity [9].



**Figure 5.2:** Schematic illustration of Liposomes that are capable of releasing Nitric Oxide with surface bound recombinant truncated thrombomodulin and heparin

Liposomes that are capable of releasing Nitric Oxide with surface bound thrombomodulin and heparin (Figure 5.2) appear to be a potential target to prepare biomimetic coatings that can be applied to surfaces of implantable medical devices to enhance their thromboresistivity and biocompatibility.

We demonstrate in this chapter the preliminary work involving the sub-cloning of a methionine-deficient thrombomodulin construct, followed by the subsequent expression and purification of the recombinant truncated thrombomodulin containing an azidofunctionalized methionine analog as a C-terminal linker for site-specific functionalization using the Staudinger ligation [9].

## 5.2.1 Sub-cloning of Recombinant Truncated Thrombomodulin

encoding Α DNA fragment for the truncated human thrombomodulin, containing N-terminal BAMHI restriction site and a Cterminal linker Gly Gly Met, was obtained by Polymerase Chain Reaction, by using the wild type thrombomodulin plasmid DNA as a template and primers Forward: 5'-GGATCCGTACCCTAACTACGACCTGGTG-3', and Reverse: 5'-

TTACATTCCACCTATGAGCAAGCCCGAATG-3'. The TOPO TA vector kit was used for the sub-cloning of the PCR products and the subsequent analysis of positive clones by restriction digestion using the BAMH I restriction enzyme. Site-directed mutagenesis was performed using primers Forward: 5'-CAGGTGCCAGCTGTTTTGCAACC-3' and Reverse: 5'-GGTTGCAAAACAGCTGGCACCTG-3' to generate a leucine (Leu) substitution for methionine-407 (M407L). The final construct (recombinant truncated thrombomodulin) was then inserted using the BAMHI site of the expression plasmid pET-39b(+) (Figure 5.3). The expression plasmid pET-39b(+) containing the recombinant thrombomodulin insert was sequence-verified and subsequently transformed into the E.coli methionine auxotroph B834(DE3).



**Figure 5.3:** DNA gel electrophoresis depicting the size of the insert ligated with the pET-39b (+) plasmid.

### 5.2.2 Protein Expression and Purification

M9 minimal medium (500 mL), supplemented with 1 mM MgSO4, 0.4 wt % glucose, 1mg/L thiamine chloride, 0.1 mM CaCl<sub>2</sub>, kanamycin (30mg/L), and all proteinogenic amino acids (40 mg/L), was inoculated with 20 mL of an overnight culture of the transformed cells. When the turbidity of the culture reached an OD600 of 0.8, protein expression was induced by addition of isopropyl- $\hat{a}$ -D-thiogalactopyranoside (IPTG) to a final concentration of 0.5 mM. After 5 min, the medium was exchanged to remove methionine, cells were sedimented (4000g for 20 min), and the cell pellet was washed twice with 200 mL of 1X M9 salts. Cells were resuspended in 500 mL of the M9 minimal medium described above, without methionine but supplemented with 100 mg/L of azidofunctionalized methionine analogue. Cultures were grown for 4.5 h at 37 °C. The cells were first harvested by centrifugation at 4 °C at 10000g for 30 min and resuspended in 25mL of M9 buffer (1X M9 salts, 10%) glycerol, 1 mg/mL lysozyme, and 10  $\mu$ g/mL PMSF), and then the cells were lysed by sonication. The cell lysate was clarified by centrifugation at 10000g for 20 min. The supernatant was filtered through a 0.45µm syringe filters and then loaded onto a His-tag column. The presence of thrombomodulin as an end product was confirmed using SDS-PAGE and quantified using S TAG rapid assay. Lane 5, features a band that corresponds to 36kDa in size confirming the presence of the truncated recombinant thrombomodulin. The average yield is 9.24mg of protein per liter of cell culture.



**Figure 5.4:** SDS PAGE of purified methionine deficient truncated recombinant thrombomodulin

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