

UNIVERSIDADE DE SÃO PAULO  
FACULDADE DE ODONTOLOGIA DE BAURU

SUELEN PAINI

**F1 protein fraction obtained from latex incorporated into CaP-materials  
improve critical-size defect bone repair in a concentration-dependent  
manner**

BAURU

2018



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**A fração proteica F1 obtida do látex incorporado à biomateriais a base de CaP melhora o reparo defeitos ósseos de tamanho crítico de maneira dependente da concentração**

Dissertação constituída por artigo apresentada a Faculdade de Odontologia de Bauru da Universidade de São Paulo para obtenção do título de Mestre em Ciências no Programa de Ciências Odontológicas Aplicadas, na área de concentração Biologia Oral.

Orientador: Prof. Dr. Gerson Francisco de Assis.

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## DEDICATÓRIA

*Dedico essa dissertação...*

*Aos meus pais, Rosa e Roberto*

*Ao meu irmão Bruno*

*E aos mestres Dra. Tania, Dr. Gerson e Dr. Rumio.*

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Só os que não fazem nada nunca erram.

Teilhard de Chardin

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## ABSTRACT

One strategy for bone regenerative engineering is to use matrices associated to osteogenic and angiogenic molecules to increase bone formation. The aim of the present study was to evaluate the efficacy of treatment of extensive cranial bone defects with the F1 protein obtained from latex adsorbed at different concentrations (0,01%, 0,025%, 0,05% e 1%) to two different bone-substitutes biomaterials, deproteinized bovine bone (DBB) and biphasic calcium phosphate ceramics (pBCP) using a preclinical model in rats. Defects of 8-mm diameter were created in parietal bones of 72 rats filled with the pure biomaterial or carried with the different concentrations of F1 protein, in the microtomographic images a visual analysis of the microtomographic reconstructions of the skull through transverse, coronal and sagittal sections. Subsequently, the segmentation of the defect in the reconstructions will be done through an image processing algorithm to quantify the parameters. Analyzing, in the BP-G group, the total volume of bone (TV), in the CSBD-CG group, the total volume of new bone (TV-NB), and in the treated groups, the total volume of the grafted region (TV/GR), the total volume of new bone (TV-NB) and biomaterials (TV/DBB and TV/pBCP). In tissue sections stained with Hematoxylin and Eosin a descriptive histological analysis was performed to verify the tissue response to treatment with F1 protein and its association with osteoconductive biomaterial and correlate it with the histomorphometric determination to obtain percent values and volume of neoformed bone tissue, biomaterial, bone marrow and soft tissue. In the characterization of DBB and pBCP biomaterials, it was performed through the combined analytical methodology by SEM and SDD-EDS, to analyze external morphology and elemental chemical composition. All the results were compared between the groups by the ANOVA variance analysis and the Tukey tests at the 5% level of significance (Statistica v.5.1, StatSoft). After 12 weeks, defects treated with biomaterials without F1 presented greater bone formation in relation to the control group. The association of 0.025% and 0.05% of F1 plus DBB showed higher bone formation (32.6% and 25.1%, respectively) when compared to pBCP, being 19.3% and 15.1%, respectively. We conclude that the stimulation of angiogenesis and osteogenesis depends on its concentration of F1e and the physicochemical properties of the carrier material.

**Key words:** Bone Regeneration, Angiogenesis Inducers Agents, Biocompatible Materials, Rats.

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## RESUMO

Uma estratégia da engenharia regenerativa óssea é usar matrizes associadas a moléculas osteogênicas e angiogênicas para aumentar a formação óssea. O objetivo do presente estudo foi avaliar a eficácia do tratamento de defeitos ósseos cranianos extensos com a proteína F1 obtida do látex adsorvido em diferentes concentrações (0,01%, 0,025%, 0,05% e 1%) a dois diferentes biomateriais ósseo-substitutos, osso bovino desproteinizado (DBB) cerâmica de fosfato de cálcio bifásica (pBCP) utilizando um modelo pré-clínico em ratos. Defeitos de 8 mm de diâmetro foram criados nos ossos parietais de 72 ratos preenchidos com o biomaterial puro ou carregados com as diferentes concentrações da proteína F1, nas imagens microtomográficas uma análise visual das reconstruções microtomográficas do crânio através de cortes transversais, coronais e sagitais. Subsequentemente, foi feita segmentação do defeito nas reconstruções através de algoritmo de processamento de imagem para quantificação dos parâmetros. Analisando, no grupo BP-G, o volume total de osso (TV), no grupo CSBD-CG o volume total de osso novo (TV-NB), e nos grupos tratados, o volume total da região enxertada (TV-GR), volume total de osso novo (TV-NB) e biomaterial (TV-DBB e TV-pBCP). Nos cortes teciduais corados pela Hematoxilina e Eosina foi realizado uma análise histológica descritiva para verificar a resposta tecidual frente ao tratamento com a proteína F1 e a sua associação com biomaterial osteocondutor e correlaciona-la com a determinação histomorfométrica para a obtenção dos valores percentuais e de volume de tecido ósseo neoformado, biomaterial, medula óssea e tecido conjuntivo. Na caracterização dos biomateriais DBB e pBCP, foi realizado através da metodologia analítica combinada por SEM e SDD-EDS, para analisar morfologia externa e composição química elementar. Todos os resultados foram comparados entre os grupos pela análise de variância ANOVA e o teste de Tukey ao nível de significância de 5% (Statistica v.5.1, StatSoft). Após 12 semanas, defeitos tratados com biomateriais sem F1 apresentaram maior formação óssea em relação ao grupo controle. A associação de 0,025% e 0,05% de F1 mais DBB mostraram maior formação óssea (32,6% e 25,1%, respectivamente) quando comparados com pBCP, sendo 19,3% e 15,1%, respectivamente. Nós concluímos que, a estimulação da angiogênese e osteogênese depende de sua concentração de F1 e das propriedades físico-químicas do material carreador.

**Palavras-chave:** Regeneração Óssea, Indutores da Angiogênese, Materiais Biocompatíveis, Ratos.

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## LIST OF ABBREVIATIONS AND ACRONYMS

<b>β-TCP</b>	Beta-tricalcium phosphate
<b>μA</b>	Microampère
<b>μm</b>	Micrometer
<b>®</b>	Trademark
<b>2D</b>	Two-Dimensional
<b>3D</b>	Three-Dimensional
<b>°C</b>	Degrees Celsius
<b>™</b>	Trademark
<b>μA</b>	Microamp
<b>ANOVA</b>	Analisis of variance
<b>B</b>	Border
<b>BCP</b>	Biphasic calcium phosphate
<b>BMP</b>	Bone morphogenetic protein
<b>BMP-2</b>	Bone morphogenetic protein 2
<b>BP-G</b>	Bone-plug group
<b>BV</b>	Bone volume
<b>BV/TV</b>	Bone volume/Total Volume
<b>C</b>	Carbon
<b>Ca</b>	Calcium
<b>cc</b>	Cubic centimeter
<b>CEEPA</b>	Ethics Committee on Animal Education and Research at FOB-USP
<b>CEVAP</b>	Center for the study of venomous and venomous animals
<b>CG</b>	Control group
<b>cm</b>	Centimeter
<b>CSBD</b>	Critical size bone defects
<b>CT</b>	Connective tissue
<b>DBB</b>	Deproteinized bovine bone
<b>DEAE-cellulose</b>	Diethylaminoethyl cellulose
<b>EDS</b>	Energy dispersive spectroscopy
<b>EDTA</b>	Ethylenediamine tetraacetic acid

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<b>E.G.</b>	Example
<b>F1</b>	Fraction 1
<b>FBGCs</b>	Large multinucleated foreign body giant cells
<b>FGFs</b>	Fibroblast growth factors
<b>Fig.</b>	Figure
<b>FOB</b>	Bauru school of dentistry
<b>G</b>	Group
<b>GR</b>	Grafted region
<b>HA</b>	Hydroxyapatite
<b>HE</b>	Hematoxylin and eosin
<b>I.E.</b>	In other words
<b>IGFs</b>	Insulin-like growth factor
<b>IL-10</b>	Interleukin-10
<b>Inc.</b>	Incorporated
<b>kg</b>	Kilogram
<b>k</b>	Kilovolt
<b>LB</b>	Left border
<b>Ltda.</b>	Limited
<b>M</b>	Molar
<b>MB</b>	Marrow bone
<b>Mg</b>	Magnesium
<b>mg</b>	Milligram
<b>Micro-CT</b>	Microcomputed tomography
<b>Min</b>	Minutes
<b>mL</b>	Milliliter
<b>mm</b>	Millimeter
<b>mm<sup>3</sup></b>	Cubic millimeter
<b>n<sup>o</sup></b>	Number
<b>NaCl</b>	Sodium chloride
<b>NB</b>	New bone
<b>Nm</b>	Nanometers
<b>O</b>	Oxygen
<b>P</b>	Phosphorus

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<b>p</b>	Statistical p-value; descriptive level
<b>pBCP70/30</b>	Biphasic calcium phosphate 70/30
<b>PDEM</b>	Probability density evolution method
<b>PDGF</b>	Platelet-derived growth factor
<b>pH</b>	Hydrogenation potential
<b>RB</b>	Right border
<b>rhBMP-2</b>	Recombinant human bone morphogenetic protein 2
<b>ROI</b>	Region of interest
<b>S</b>	Section
<b>SDD</b>	Silicon drift detector
<b>SEM</b>	Scanning Electron Microscopy
<b>SP</b>	São Paulo
<b>ST</b>	Soft tissue
<b>t</b>	Test
<b>TA</b>	Total area
<b>TAi</b>	Total area of each structure
<b>TC</b>	Connective tissue
<b>TCP</b>	Tricalcium phosphate
<b>TG</b>	Treatment group
<b>TV</b>	Total volume
<b>UNESP</b>	Paulista state university “Júlio Mesquita Filho”
<b>USA</b>	United States of America
<b>USP</b>	University of São Paulo
<b>V</b>	Vessel
<b>v</b>	Volume
<b>Vv</b>	Volume density
<b>v/v</b>	Volume/volume
<b>VEGF</b>	Vascular endothelial growth factor
<b>vs.</b>	Versus
<b>VT</b>	Total volume
<b>X</b>	Volume density belonging to a given constituent

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## SUMMARY

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# *1 INTRODUCTION*

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## 1 INTRODUCTION

The reconstruction of large bone defects or critical size bone defects caused by trauma, infection, fracture nonunion, bone tumor resection and spinal deformities are a major challenge in regenerative medicine, especially for oral and maxillofacial surgeons (Cancedda *et al.*, 2007).

The autogenous bone remains as the gold standard for grafting because it has the three classic properties for bone regeneration and engineering. Osteogenesis is the capacity of synthesizing new bone by its bone cells. Osteoinductivity occurs due to the morphogens contained in the bone matrix which are capable of inducing the pluripotent mesenchymal cells to differentiate into osteoblasts. Osteoconductiveness is possible by the 3D structure of bone, it serves as a scaffold for migration, adhesion, osteoblasts differentiation and bone matrix synthesis on the surface (Tadic and Epple, 2004). However, a second surgical intervention for graft harvesting is necessary and this results in an increased patient's morbidity in addition to the limited amount of disponible tissue in the donor site (Laurencin *et al.*, 2006). Consequently, to these limitations numerous bone substitutes have been or are being developed as an alternative to the autogenous graft (Campana *et al.*, 2014) and currently, has been associated with factors of growth and / or osteoinducers (Chin *et al.*, 2005; Liu *et al.*, 2009; Li *et al.*, 2011) in the intention to potentiate the repair.

Vascularization is extremely important during the bone repair process, which can provide a bone source (Zimmerer *et al.*, 2017), the blood vessels are responsible for the distribution of oxygen, in addition to the transport of nutrients, cells (osteoblasts and osteoclast precursors) growth factors and cytokines. Among the growth factors, we have VEGF that has a direct stimulating effect on angiogenesis and also on the differentiation of osteoblasts (Marenzana and Arnett, 2013; Liu *et al.*, 2017) highlighting a link between the two cell types (endothelial cells and osteoblasts) and morphogenetic protein (BMP) that is capable of recruiting and inducing differentiation of undifferentiated mesenchymal cells into osteoblasts (Santos *et al.*, 2005).

In Brazil, products obtained from the rubber tree *Hevea brasiliensis*, a tree native to the Amazon River basin, has shown positive effects in several clinical situations due to its biocompatibility and angiogenic activity accelerating the cicatricial process without producing hypersensitivity response (Mrue *et al.*, 2004). The latex membrane was used in humans in the

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reconstruction of tympani destroyed by chronic infections (Araujo *et al.*, 2012). Possessing bioactive and angiogenesis-inducing properties, the membrane was successfully used in treatment of chronic wounds in patients with diabetes. In all cases they presented a vigorous and healthy formation of new blood vessels, although healing has varied person to person according to age or other factors (Frade *et al.*, 2004).

At dissertation of Mauricio (2006) evaluated by DEAE chromatography cellulose obtained 3 fractions of the latex which denominated F1, F2 and F3. The angiogenic activity of the isolated fractions was evaluated in the chorio-allantoic membrane of chicken eggs *Gallus domesticus*. The F1 also showed greater activity on vascular permeability during the repair of dermal ulcers performed on rabbit ears. In another study, was assessed whether the F1 was able to stimulate human umbilical vein endothelial cells. In this case, Although F1 did not directly stimulated endothelial cells from human umbilical cord, it acted in angiogenesis indirectly through stimulation of growth factors by monocytes / macrophages stimulated, or other mechanisms not yet clear-cut. Already, Lamounier (2004) evaluated the production of inflammatory cytokines *in vitro* in culture of peripheral blood mononuclear cells induced by Membrane. Cells did not proliferate in the presence of membrane due to changes during processing, total serum and F2 did not change in lymphoproliferative response and cytokine production, whereas F1 led to an increase in IL-10.

Regarding to concentration of the protein to be used, the F1 was incorporated in 4% carboxymethylcellulose gel (Bayer - São Paulo, SP) in 3 different concentrations: 0.01%, 0.1% and 1% and applied on the ulcers on the ears of rabbits, showing that the concentration 0.01% of F1 was the most efficient to stimulate the healing of the lesion in a shorter time (Mendonça, 2004 and Mendonça *et al.*, 2010). Recently, the company Boticario has proposed a new anti-aging gel containing F1, able of restoring collagen production and skin elasticity. In a preclinical study with 60 women aged approximately 50 years, the use of F1 gel for 1 month led to a reduction of 80% in eye wrinkles and also the wrinkles in the forehead region, a study later confirmed with a larger group of 300 women.

In relation the application of F1 to bone repair, few studies have evaluated its potential, a preclinical study using latex in rat alveolar bone repair has shown that the latex was biocompatible and able of leading to a progressive osseointegration stimulating angiogenesis and accelerating the process of new bone formation in the first days of alveolar bone repair (Balabanian *et al.*, 2006). In another study, compared the osseointegration of the dental implant

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(3.3 diameter x 10.0 mm length) in circumferential defects in dog jaws (5.0 diameter x 6.3 mm depth) treated with latex angiogenic proteins (2.5% collagen + 2.5% hyaluronic acid and 0.01% of the latex protein) versus autogenous bone, study did not show significant differences regarding bone formation and implant bone contact (Manfrin Arnez *et al.*, 2012).

Machado and collaborators, evaluated the repair of bone defects in the tibia of rats with fibrin sealant derived from snake venom (CEVAP) associated or not with BMP-2 and/or F1 at concentrations of 5 or 8µg, the results showed higher bone formation in the groups that used the BMP-2 and F1 in relation to the control (without treatment), being more favorable to BMP2. However, the use of fibrin showed better results in relation to defects without fibrin, but the association of fibrin with BMP-2 was the one that presented better results in the treatment of the tibial defect (Machado *et al.*, 2015). Was also evaluated the use of two different concentrations of BMP-2 (5µg/10µg) and (5µg/10µg) of F1 associated with or without the monoolein gel vehicle in the treatment of cranial bone defects of 6mm in diameter. After 4 weeks, they showed greater bone formation in the defects treated with the vehicle associated with higher protein concentration (10µg), being more favorable to BMP-2 (Issa *et al.*, 2012). In this sense, is important to emphasize that although rhBMP-2 is a potent growth factor for bone repair (Carreira *et al.*, 2014), has been reported to have collateral effects such as bloating, seroma and an increased risk of cancer when used at high dosages (Carragee *et al.*, 2013).

Another essential factor that determines success or failure during inductive bone grafts is the competence of the carrier material. A good carrier material must be biodegradable, biocompatible, and the measure that carrier is absorbed, there must be replacement with new bone tissue without allowing the bone site to be exceeded (Toriumi and Robertson, 1993). Several carriers are being used, they are made from metals, ceramics, polymers and composites. Natural or synthetic ceramics based on calcium phosphate have been used in various medical applications due to their mechanical resistance, biocompatibility, but with low biodegradability (Agrawal and Sinha, 2016) and should have also properties of osteointegration, osteoinduction (Moore *et al.*, 2001). In a recent study, biphasic ceramics of porous calcium phosphate in the ratio HA/TCPp 7:30, showed high osteoinduction power and osteoconduction in the bone repair process, promoting bone neoformation similar to autogenous bone (Santos *et al.*, 2018). In addition to the inorganic bone, studies show that they promote osteoconduction and have a slower resorption, being an alternative in bone repair therapy in the craniomaxillofacial region (Cestari *et al.*, 2009).

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The products proposed in this project have as objective to evaluate and demonstrate the level of safety and efficacy of medical products for health, clarifying the type of interaction that different materials may present in front of the association with a protein of vegetable origin with potential osteo stimulating activity, becoming more an alternative to bone substitutes in current use in procedures to fill bone defects caused by trauma or pathologies.

## *2 PROPOSITION*

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## **2 PROPOSITION**

The objective of this study was to evaluate whether F1 protein obtained from natural latex interferes positively or negatively in the vascularization and bone formation of critical-size bone defects and, if positive, the best concentrations of F1 and the type of carrier biomaterial have potential for future clinical applications.





*3 ARTICLE*

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### 3 ARTICLE

J Biomed Mater Res B Appl Biomater..

#### **F1 protein fraction obtained from latex incorporated into CaP-materials improve critical-size defect bone repair in a concentration-dependent manner**

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**Keywords:** Bone Regeneration, Angiogenesis Inducers, Biocompatible Materials, Rats

Running title: biphasic ceramic

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**ABSTRACT**

One strategy of bone regenerative engineering is to use matrices associated to osteogenic and angiogenic molecules to increase bone formation. This study evaluated the bone formation in the rat critical-size defects (CSBD) treated with deproteinized bovine bone (DBB-TG) and biphasic calcium-phosphate (pBCP-TG) incorporated with different concentrations of the angiogenic F1 protein fraction obtained of *Hevea brasiliensis* latex (without, 0.01%, 0.025%, 0.05% and 0.1%) after 12 weeks. The defects of control group (CSBD-CG) did not received treatment. 2D and 3D  $\mu$ CT analyses were used to quantify the density and total volume of new bone, biomaterial and soft tissue. 2D-histomorphometric analysis was performed for qualitative and quantitative analysis. All treatments of DBB-TG and pBCP without F1 and with 0.01% and 0.025% of F1 showed higher new bone volume compared to CSBD-CG. In DBB-TG new bone volume was significantly higher when incorporate with 0.025% and 0.05% of F1 than others concentration and pBCP with and without F1. In pBCP-TG the incorporation of the F1 did not promote bone tissue gain compared to pBCP without F1 ( $p>0.05$ ) and a significant bone reduction was observed with 0.1% of F1. Overall, the F1 incorporated to DBB significantly improve the bone regeneration dependent on its concentration in a standardized rat CSBD model.

**KEYWORDS**

Bone Regeneration, Angiogenesis Inducers, Biocompatible Materials, Rats

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## *4 DISCUSSION*

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## 4 DISCUSSION

Bone regeneration is a complex and dynamic biological process involving cellular and molecular elements during the new bone formation (Ai-Aql *et al.*, 2008). However, large bone defects remain a clinical challenge, pathological situations or trauma, may compromise the healing process of the repair (Gómez-Barrena *et al.*, 2015; Panteli *et al.*, 2015). Another crucial factor for a good healing is that the damaged bone location needs to be highly vascularized (Portal-Núñez *et al.*, 2012; Hu and Olsen, 2016; 2017). Additionally, current strategies for tissue engineering developed therapies with growth factors associated to bone grafts attempting to induce new vessels formation then they could be good alternatives because they can provide oxygen, nutrients, and promote direct migration to bone defects (Gorustovich *et al.*, 2010). In this context angiogenesis is closely linked to a better bone formation and we studied latex F1 protein performance versus 2 different bone biomaterials. Recently, the experimental model most commonly used to evaluate bone replacement strategies has been in calvaria of rats (Vajgel *et al.*, 2014), based on the critical size defect (Cooper *et al.*, 2010). Schmitz & Hollinger (1986), gave rise to the term "Critical Size Defect" (CSBD), defined as a defect that lacks the natural repair capability during the life of the animal. In our study, was performed in calvaria of the rat a creating a unilateral defect of 8-mm of diameter. A other pilot study carried out in our laboratory showed spontaneous healing of a 5-mm bone defect in adult rats leading to closed of defect ( $47.5 \pm 9.8\%$  at 12 weeks and  $83.3 \pm 13.1\%$  at 24 weeks, data not included) considered as a subcritical size defect that can heal without intervention. Other study, also showed that bilateral defects of 5mm in association with the application of factors of growth, the control site may be contaminated due to defects being near (Vajgel *et al.*, 2014).

The methods used to verify bone repair in these experimental models include histological and histomorphometric evaluations (Park *et al.*, 2009), because this technique is considered gold standard (Vidal *et al.*, 2012) and allows to evaluate elements present in the tissue samples by means of two-dimensional cuts, qualitatively and quantitatively. Therefore, it is not possible to evaluate the sample volume, requiring three-dimensional samples (Li *et al.*, 2010). In order to complement the method of histological quantification, we associate to the morphometric method the computerized microtomography, allowing the obtaining of the three-dimensional samples (Efeoglu *et al.*, 2007; Parkinson *et al.*, 2008), being a new technique with many advantages, among them: the ability to evaluate several parameters depending on the

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software and hardware it has, does not damage the sample, ensuring the integrity of the sample for other techniques used later (Ho and Hutmacher, 2006) and considered the safest method in quantitative analysis (Gundersen *et al.*, 1988). Although, it has the disadvantage of the microtomographic analysis of bone tissue, the program makes it impossible to change the gray levels during quantification of bone volume (Parkinson *et al.*, 2008). Many studies have used two techniques and have done compared microtomographic and histomofometric data (Yeom *et al.*, 2008; Particelli *et al.*, 2012).

In the present study, some difficulties were found during quantifications correlation between 2D-micro-CT morphometry and histomorphometry measures. The values obtained were discordant between both analyzes and similar difficulties are also found in the work of Chappard *et al.*, (2005). Most of the methodologies only evaluate a single region of the graft, in this regard, taking into account that the bone repair does not occur simultaneously in the whole defect, we had the idea of creating a new methodology of stratified analysis considering the whole region and also performing comparisons between similar micro-CT and histological cuts. Since there are no studies that use these methodology thresholds were standardized and after segmentation we had the following analyzes: volume of density (Vv), new bone (Vv-NB), biomaterials (Vv-DBB e Vv-pBCP), bone marrow (Vv-MB) and soft tissue (Vv -ST) in the CTAn program for the microCT samples, and in the AxionVision program, in the histological samples.

The findings showed that, there was no statistical difference between the mean values of volumetric density of the bone tissue, biomaterial and soft tissue, obtained in micro-CT and histological images (Figs. 5D2 e 6D2) e DBB (Fig. 6D1). Regarding histomorphometry the CSBD group, a small bone formation occurred, being  $20.7 \pm 8.2\%$ , considered a critical-size defect. Regarding the treatment groups, the implanted volume remained stable over the period of 120 days in both groups. However, a volume loss of the pBCP (Table of the Fig. 8B), associated with the appearance of multinucleate foreign body giant cells (FBGCs, see Fig. 8A) at concentrations of 0.05% and 0.1% F1. Recent studies have shown that the presence of FBGCs found on the surface of calcium phosphate ceramics is correlated with increased vascularity in tissue repair, considering important the vascular endothelial growth factor (VEGF) during bone formation (Ghanaati *et al.*, 2010) (Yang *et al.*, 2012). However, in our work the presence of FBGCs was associated with the presence of anomalous microspheres, verified in concentrations above 0.05% F1. Experimental data have shown that the application of excessive amounts of growth

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factors causes irregular blood vessels to appear (Zisch *et al.*, 2003; Davies *et al.*, 2008). Moreover, pathologies of angiogenesis may occur (Moldovan and Moldovan, 2002), as seen, the dosage of VEGF should be strictly controlled (Davies *et al.*, 2008). Considering the importance of the dosage of these growth factors when associated with biomaterials in tissue engineering, other studies have investigated the release of these drugs (Liu *et al.*, 2013; Li *et al.*, 2015).

Highlighting a link, the characteristics of the biomaterials to be proposed in therapy, such as pore sizes, chemical and physical properties as some studies have done, should be taken into account. (Klein *et al.*, 1984; Hamada *et al.*, 2010; Otsuka *et al.*, 2013; Ebrahimi and Botelho, 2017; Ebrahimi *et al.*, 2017). For this reason, we performed the characterization of the biomaterials carried to F1 (Fig. 2), verifying the properties of the ceramics pBCP and DBB. The analysis showed morphology, porosity of the different granules between one material and another. And there was a relationship between the Ca / P elements 1.66 and 1.67 in both materials. On the other hand, the solubility of the material may also interfere with the regeneration process. In this context, (Ghanaati *et al.*, 2012), used in its study pure HA and TCP granules and associated HA / TCP, in the proportion 60:40, analyzing action when used pure and associated, after the experiment period being of up to 30 days, the results showed that, when using pure ceramics, the TCP was absorbed faster to the connective tissue, presence of multinucleated giant cells and an intense vascularization, already HA, presented the opposite, a slow degradation, few multinucleated giant cell cells. That is, when used in conjunction, HA / TCP 60/30, the ceramic presents an equilibrium between the vascularization and the degradation of the material, being an excellent combination to restore the bone tissue. In relation to HA / TCP in the ratio 70:30, used in our work, in the study of (Lomelino *et al.*, 2012), showed that 70:30 biphasic pottery ceramics an increase in bone repair, and presented similar characteristics to the autogenous bone, such as bone tissue cells. These synthetic ceramics are largely research and studies show to be biocompatible, osteoconductive and allow the formation of a new bone on its surface (Damien and Parsons, 1991; Hak, 2007)

Concerning DBB ceramics, in our study pottery promoted good osseointegration of DBB as well as pBCP (Details in the Fig. 7B), the total volume of region grafted on DBB-TG and pBCP-TG (Table in the Fig. 9C) was 99,8% bigger (average of 85 mm<sup>3</sup>) than surgically removed, with an average of 42,6 mm<sup>3</sup>. It was also observed direct communication of the new bone and the surface of the material without interposition of soft tissue. In study of Cestari *et al* 2009, we can see the similarity to our results, study was carried out with the sintered bovine-derived anorganic bone material (sBDAB) as in form of block in the repair of a bone defect of

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critical size and observed that it promoted excellent osseointegration from the edges of the defects towards the center, bone volume was 3.8 times greater compared to surgically removed bone, whereas in the control group, filled only with the blood clot of the animal itself, bone formation was limited. They concluded that the DBB block possesses osteoconductive property, block providing osteoconductive, a slow reabsorption and osteoconductive. In the study of Rocha et al. (2011), evaluated the Gen-Ox®inorg associated with and without the platelet-rich plasma (PRP), after the 4-week experimental period, observed the presence of a small bone formation in edge region and in some defects was observed in central region, was seen the presence of giant cells in the group Gen-Ox®inorg without and with the PRP, where they concluded that in addition to being osteoinductive, it maintains the new bone volume.

Given the evidences found here, we can say that biomaterials are well accepted in the literature, and are closely linked to growth factors. In this way, the results presented in this study showed the potential of F1 carried to the biomaterials, being dose dependent and the choice of biomaterial can also be influenced. in addition, new methodologies proposed in this work using the combination 2D/3D micro-CT and histomorphometric analysis to evaluate bone regeneration could help future studies in a calvary model of critical size in rats.

## *5 CONCLUSIONS*

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Our study demonstrates that the potential of F1 in stimulating angiogenesis and osteogenesis is dependent on the concentration and carrier biomaterial. In the other hand, we present a new methodology standardized in this study using the combination 2D/3D micro-CT and histomorphometric analysis for future preclinical studies in critical size defect as an experimental model in rat calvaria, in bone regeneration.



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*APPENDIX*

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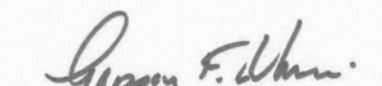


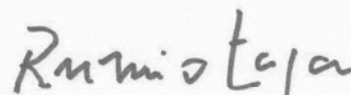
**DECLARATION OF EXCLUSIVE USE OF THE ARTICLE  
IN DISSERTATION**

We hereby declare that we are aware of the article "*F1 protein fraction obtained from latex incorporated into CaP-materials improve critical-size defect bone repair in a concentration-dependent manner*" will be included in Dissertation of the student **Suelen Pains** and can not be used in other works of the Graduate Programs of the Faculty of Dentistry of Bauru of the University of São Paulo.

Bauru, 7 de Agosto de 2018.

  
Suelen Pains

  
Gerson Francisco de Assis

  
Rumio Taga



*ANNEXS*

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## ANNEXS



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Faculdade de Odontologia de Bauru



## CERTIFICADO

CERTIFICAMOS que a proposta intitulada "*Biocompatibilidade e o potencial angiogênico e osteogênico da proteína angiogênica F1 purificada do látex natural e associada a diferentes carreadores*", registrada sob nº **CEEPA Proc. nº 027/2011**, sob a responsabilidade do Prof. Dr. Rumio Taga, que envolveu a utilização de animais pertencentes ao filo *Chordata*, subfilo *Vertebrata* (exceto humanos), para fins de pesquisa científica, encontra-se de acordo com os preceitos da Lei nº 11.794, de 8 de outubro de 2008, do Decreto nº 6.899, de 15 de julho de 2009, e com as normas editadas pelo Conselho Nacional de Controle de Experimentação Animal (CONCEA), e foi **aprovada** em reunião ordinária da Comissão de Ética no Ensino e Pesquisa em Animais (CEEPA), da Faculdade de Odontologia de Bauru-USP, realizada no dia 14 de março de 2017.

<b>Finalidade</b>	( ) Ensino (X) Pesquisa Científica
<b>Vigência da autorização</b>	Agosto/2011 a Agosto/2012
<b>Espécie/Linhagem</b>	<i>Rattus norvegicus</i> , Wistar
<b>Nº de animais</b>	N=180
<b>Peso/Idade</b>	60 animais com aproximadamente 200g 120 animais com aproximadamente 350g
<b>Sexo</b>	Machos
<b>Origem</b>	Biotério de Criação ANILAB/Paulínia, SP

21 de março de 2017.

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Data



Profª Drª Ana Paula Campanelli  
Presidente da Comissão de Ética no Ensino e Pesquisa em Animais



**CEEPA**  
Comissão de Ética no Ensino e Pesquisa em Animais



**Universidade de São Paulo  
Faculdade de Odontologia de Bauru**

**Comissão de Ética no Ensino e Pesquisa em  
Animais**

CEEPA-Proc. Nº 004/2017.

Bauru, 5 de maio de 2017.

Senhor Professor,

Informamos que Projeto de Pesquisa denominado *“Influência da concentração da proteína F1 purificada do látex natural (Heve brasiliensis) e do biomaterial carreador na vascularização e formação óssea em defeitos ósseos cranianos de tamanho crítico. Estudo microtomográfico, histomofométrico e imunistoquímico”* tendo Vossa Senhoria como Pesquisador Responsável, que envolve a utilização de animais (roedores), para fins de pesquisa científica, encontra-se de acordo com os preceitos da Lei nº 11.794, de 8 de outubro de 2008, do Decreto nº 6.899, de 15 de julho de 2009, e com as normas editadas pelo Conselho Nacional de Controle da Experimentação Animal (CONCEA), foi analisado e considerado APROVADO em reunião ordinária da Comissão de Ética no Ensino e Pesquisa em Animais (CEEPA), realizada nesta data.

Vigência do projeto:	<i>Maio/2017 a Abril/2019</i>
Espécie/Linhagem:	<i>Amostras biológicas (calvária de ratos incluídos em Histosec-Merck) provenientes do protocolo CEEPA 027/2011</i>
Nº de animais:	<i>Não se aplica</i>
Peso/Idade	<i>Não se aplica</i>
Sexo:	<i>Não se aplica</i>
Origem:	<i>Não se aplica</i>

Esta CEEPA solicita que ao final da pesquisa seja enviado um Relatório com os resultados obtidos para análise ética e emissão de parecer final, o qual poderá ser utilizado para fins de publicação científica.

Atenciosamente,

  
Profª Drª Ana Paula Campanelli

Presidente da Comissão de Ética no Ensino e Pesquisa em Animais

**Prof. Dr. Gerson Francisco de Assis**  
Docente do Departamento de Ciências Biológicas