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Electrospun biodegradable nanofibers loaded with epigallocatechin gallate for guided bone regeneration

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ABSTRACT

Guided bone regeneration through biomaterial-based formulations can prevent soft tissue migration into the bone defect area through a barrier membrane. However, bone regeneration requires bioactive external interference. Here, we report a biodegradable electrospun poly-L-lactic acid/gelatin-based nanofibrous membrane encapsulating epigallocatechin gallate (EGCG) within the core, with a smooth profile, desirable physicochemical properties, biocompatibility, antibacterial effects, sufficient osteoinductive capability, and sustained EGCG release over one week. 70% of the defect area was repaired with the help of the EGCG-loaded membrane, approximately 1.5-fold improvement over the control group in 8 weeks. In conclusion, these membranes are promising candidates for guided bone regeneration.

1. Introduction

Bone loss or dysfunction resulting from trauma, injury, disease, or aging poses a significant threat to health and economics. Bone healing quality is adversely affected by multiple factors, including oxidative stress, inflammation, and fat deposition, which may inhibit the inductive signals required for osteoblastogenesis and progenitor cell recruitment [1–3]. In this regard, therapeutic biomaterials capable of guiding and signaling for efficient bone regeneration can certainly provide relief to the patient [4].

Guided bone regeneration (GBR) is considered the most desirable strategy for treating periodontal defects. It employs a barrier membrane capable of preventing fibroblast and epithelial cell influx, blocking the sites for periodontal tissue reconstruction into defect areas [5]. Although GBR-based therapeutic approaches have played a significant role in bone tissue regeneration, their lack of bioactivity presents several disadvantages [6]. In other words, these scaffolds usually act as physical barriers but lack regenerative signals and antibacterial potential [7]. Moreover, conventional membranes are composed of non-biodegradable materials, accompanied by the risk of secondary damage to newly formed tissue, usually requiring surgery for their removal from the defect area [8]. Therefore, a new therapeutic strategy in the form of a biodegradable active membrane capable of serving as both a barrier membrane and carrier containing the optimal bioactive agent is warranted.

Poly-L-lactic acid (PLLA) is a biodegradable polymer with excellent mechanical properties that can be exploited for the formulation of medical devices such as bone screws for bone tissue repair and regeneration [9,10]. However, its hydrophobic nature and degradability into lactic acid-like by-products may lead to inflammation [10]. To overcome

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this drawback, blending it with a natural polymer to improve its therapeutic potential has been proposed. Gelatin is a natural polymer with excellent biocompatibility and hydrophilicity. It has been widely used as a suitable candidate for blending with synthetic polymers to expand their medical utilization [11,12]. Hence, we propose blending gelatin with PLLA to fabricate nanofibers (NFs) to yield a composite with improved biocompatibility, rapid degradation, suitable mechanical properties, and hydrophilicity.

Micro- or nanosized fiber structures have shown great potential as scaffolds for bone regeneration and the repair of scar skin tissue defects [13–15]. Among the multiple fabrication methods, electrospinning has emerged as the simplest and most versatile strategy for fabricating NFs for tissue regeneration. The nanosized pores not only facilitate the exchange of gases but also act as a barrier to prevent the migration of fibroblast cells to the defect area [16]. Electrospinning provides multiple options for loading bioactive agents into the polymeric matrix, including homogeneous composites, separated hybrids, and their combinations within all kinds of complicated nanostructures such as core-shell [17-19], and tri-layer core-shell [20]. Among them the coaxial electrospinning and the related core-shell nanofibers are the most popular strategy for encapsulating all types of bioactive agents and ensuring the desired functional performances. Here, electrospun core-shell nanofibers are explored to encapsulate an active ingredient, and the structure-activity relationship for its sustained delivery and GBR application are studied.

Flavonoids derived from plants are a vast group of polyphenolic compounds with antioxidant, anti-cancer, anti-inflammatory, and osteoporotic properties [21]. Epigallocatechin gallate (EGCG) is the most abundant polyphenol present in green tea and is known for its positive effects on bone metabolism [22]. In addition, EGCG has been reported to induce osteogenic differentiation and inhibit adipogenesis, apoptosis, and osteoclastic differentiation of stem cells [23]. Despite its positive effects on bone regeneration, it is difficult to deliver EGCG to the target area in vivo [24]. Oral administration of EGCG reduces its therapeutic efficacy [25]. Sajeesh Kumar et al. coated EGCG on the surface of poly L-lactic acid-based NFs and examined its bone regeneration activity [26]; although the outcomes were promising, the chemical immobilization of EGCG on the surface of NFs can lead to burst release and lower stability [27]. We hypothesized that coaxial electrospinning can be exploited to fabricate a core-shell structure to encapsulate EGCG within the core for better stability and prolonged delivery.

In this study, we fabricated a biodegradable electrospun core-shell NF membrane encapsulated with various concentrations of EGCG. The EGCG-encapsulated membrane exhibited good biocompatibility and antibacterial activity and accelerated bone regeneration.

2. Material and methods

2.1. Fabrication of NFs

The spinning solutions were prepared by separately dissolving 10% w/v of PLLA (Jinan Daigang Biomaterial, China) and 10% w/v of type A gelatin (Sigma Aldrich) into hexafluoro isopropanol (Aladdin Chemistry, USA) and stirring for 12 h to ensure complete dissolution. The two solutions were mixed at a 60:40 PLLA to gelatin ratio to achieve a 10% w/v final concentration. EGCG was dissolved in phosphate buffered saline (PBS) (Yuanxiang, China) at 5 mg/mL and 10 mg/mL concentrations as a core solution to fabricate PLLA/Gelatin/5 mg/mL EGCG (PG5E) and PLLA/Gelatin/10 mg/mL EGCG (PG10E), respectively.

To fabricate the PLLA/gelatin (PG) fabricate nanofiber membrane, approximately 10 mL of spinning solution was loaded into a syringe with a 21-gauge needle attached to a pump and a power supply. The flow rate was maintained at 1.2 mL/h and the voltage supply was approximately 10 kV. The distance between the collector and the needle was approximately 10 cm. On the other hand, the core–shell NFs were fabricated using a core–shell nozzle connected with two separate pumps. The flow

rate for the shell solution was maintained at 1.2 mL/h and that for the core solution was maintained at 0.2 mL/h. A schematic illustration of the core–shell NF fabrication set-up is shown in Fig. 1a. Three types of NFs, PG, PG5E, and PG10E, were fabricated (Fig. 1b).

2.2. Membrane characterization

2.2.1. Scanning electron microscopic (SEM) and transmission electron microscopic (TEM) analyses

The surface morphology of the NF membranes was observed using SEM. Dry samples were sputter-coated with gold for 45 s and observed via SEM using Phenom ProX (Phenom, Netherland) at an accelerating voltage of 10 kV. From the SEM images, 100 NFs were randomly selected, measured, and contrasted using ImageJ software (National Institute of Health, USA) to calculate the average NF diameter. To observe the core–shell structure, the samples were prepared by collecting NFs on carbon-coated grids and observed via TEM at a 200-kV accelerating voltage.

2.2.2. Fourier transform infrared (FTIR) detection

To confirm the loading of EGCG and assess the physicochemical interactions of the various components within the NF membranes, FTIR spectra of pure EGCG, gelatin, PLLA, and NF membranes, including PG, PG5E, and PG10E, were obtained at a voltage of 32 scans in the range of 500–3500 cm⁻¹ at 25 °C.

2.2.3. Mechanical properties

The mechanical properties of PG, PG5E, and PG10E were evaluated using a universal material testing machine (Instron 5567, USA) at an ambient temperature of 20 °C and humidity of approximately 65% [28]. The specimen was cut to a size of 50 mm \times 10 mm (n = 5) and tested with a 10 mm/min cross-head speed until breakage. A digital gauge meter was used to calculate the fiber thickness before the test.

2.2.4. Water contact angle test

The water contact angles of PG, PG5E, and PG10E were measured to assess the surface wettability of the membranes. A distilled water (reference liquid) droplet (n = 3) was automatically dropped on the membranes and the droplet image was visualized using an image analyzer for 5 s. The humidity and temperature were kept constant at 30% and 25 °C, respectively [29]. The water contact angle was calculated using the ImageJ software.

2.2.5. Degradation test

The in vitro degradation tests of the various NF membranes (n = 3) were carried out in PBS [30]. Briefly, the specimens were cut in a circle (20-mm diameter), weighed (W₀), poured in PBS (5 mL) in 12-well plates, and kept at 37 °C for 4 weeks. The solution was replaced with fresh solution every 2 d in week 1, followed by weekly replacements in the subsequent weeks. At various time points, the specimens were removed from the solutions, rinsed with deionized water, and lyophilized; the final weight (W_t) was then calculated. The remaining mass of the NF membranes at the various time points was calculated using the following equation:

Remaining mass (%) = $W_t/W_0 \times 100$.

2.2.6. EGCG release experiment

Three samples of PG, PG5E, and PG10E were weighed and placed in a 15-mL centrifuge tube and immersed in 4 mL PBS buffer. The centrifugal tubes were then placed in a 37 °C shaker at an oscillation rate of 100 rpm. At a predetermined time point, 4 mL of liquid was suctioned out and 4 mL of fresh PBS buffer was added. The absorbance of the supernatant was measured using an ultraviolet spectrophotometer (Thermo



Fig. 1. Schematic illustrations. (a) Schematic illustration of the fabrication set-up of the core-shell nanofiber (NF) and (b) the three types of fabricated NFs.

Scientific Evolution 201, USA) at a 206-nm wavelength, and the EGCG concentration was calculated according to the standard curve.

2.3. Bone regeneration in vivo

In vivo experiments were conducted following a previously reported procedure [31]. Male white New Zealand rabbits weighing 2500–3000 g, were provided by the Animal Experiment Center of Zhongshan Hospital, Fudan University, maintained at 21–23 °C with full access to standard dry food and water. The animals were assigned to two groups determined by two experimental time points (4 and 8 weeks). The experimental protocol was approved by the Animal Research Committee of Zhongshan Hospital, Fudan University, Shanghai, China (No. 2019–191).

The rabbits were fasted for 4 h before surgery and administered 2% Veto quinol (1 mg/kg body weight) for sedation before administering general anesthesia. Using a 6 mm trephine bur (Nobel, Sweden) and saline irrigation, four symmetrical and circular defects (6-mm diameter) were created in the calvaria of each rabbit. A coin toss was used to assign the faults. Three defects were coated with PG, PG5E, and PG10E, and the fourth defect was left exposed as the control (untreated).

Four or eight weeks after surgery, animals were sacrificed with excessive anesthetics. The harvested samples were scanned using microcomputed tomography (micro-CT) (SKYS-can 1176, Belgium). The software provided by the micro-Ct manufacturer was used for quantitative analyses such as bone mineral density (BMD) and bone volume/ tissue volume (BV/TV). Following micro-CT, the samples were decalcified using an Ethylene Diamine Tetraacetic Acid (EDTA) decalcifying solution (Boster AR1071, USA), dehydrated in gradient alcohol, and embedded in paraffin. To visualize tissue healing and bone development, the tissues were sectioned into 5-µm-thick samples and subjected to H&E, Masson and immunohistochemistry (IHC) staining. For IHC, the sections were stained overnight at 4 °C with the primary antibody of ALP (1:100, Abclonal) and OCN (1:100, Abclonal). The secondary antibody against mouse/rabbit IgG were obtained from an IHC kit, EnVision™ Detection Kit (GENE, USA). Diaminobenzidine (DAB) was used for coloration, and the color with dark brown was considered to be the strong positive staining.

Material and methods for biocompatibility, antibacterial activity and

2.4. Statistical analysis

information.

Data were statistically analyzed using GraphPad Prism software (version 8.0, USA). All quantitative data are expressed as mean \pm standard deviation. For continuous variables, data were presented as the means and standard deviations or as medians and interquartile ranges, and groups were compared using analysis of one-way ANOVA or the Kruskal-Wallis test, according to the presence or absence of a normal distribution, respectively. The count data were reported as percentages or ratios, and intergroup comparisons were conducted using the chi-square test. P < 0.05 indicated statistical significance. *P*-values for pairwise comparisons between three groups or more were corrected using Bonferroni.

osteogenic differentiation in vitro are provided in supplementary

3. Results

3.1. EGCG encapsulation

The external morphology of the electrospun NFs was characterized via SEM (Fig. 2a–c). All the NF membranes exhibited a web-like randomly oriented fiber structure. No agglomerate or bead formation occurred during the spinning process, confirming the optimum spinning conditions. Based on the average fiber diameter, PG exhibited an average fiber diameter up to 0.85 μ m, compared to 0.96 and 0.93 μ m for PG5E and PG10E, respectively, indicating that EGCG loading induced a slight increase in the fiber diameter. The core–shell structure that was obtained by loading EGCG into the PG matrix through coaxial electrospinning was confirmed via TEM (Fig. 2d), where a continuous core structure is seen.

FTIR was employed to assess the possible physical or chemical interactions among PLLA, gelatin, and EGCG as well as to confirm the successful EGCG loading through coaxial electrospinning (Fig. 2e). The most prominent representative peak for pure gelatin appeared at 1647 cm⁻¹, which can be attributed to C=O stretching in amide 1, highlighted by an orange arrow. The representative peaks for PLLA and gelatin can also be traced in the electrospun PG, PG5E, and PG10E



Fig. 2. NF membrane morphology. (a–c) Scanning electron microscopy images of the membranes. (d) Transmission electron microscopy image of the membrane with EGCG insertion. (e) Fourier transform infrared spectra of poly-1-lactic acid, gelatin, EGCG, and the PG, PG5E, and PG10E membranes.

spectra, confirming the successful blending of PLLA and gelatin, as highlighted by the respective colored arrows. Multiple peaks appeared for pure EGCG, but a more distinctive peak appeared in the 3200–3500 cm⁻¹ range, which can be attributed to the presence of the eight hydroxyl groups. A small peak also appeared in the composite membranes, such as PG5E and PG10E, in the 3200–3500 cm⁻¹ range, confirming the presence of EGCG.

3.2. Mechanical properties, hydrophilicity, and EGCG sustained-release ability

A typical stress-strain curve indicated that PG exhibited some obvious elasticity along with tensile strength. With EGCG addition, the PG elastic nature decreased (Fig. 3a). The ultimate PG5E tensile strength was higher than that of PG and PG10E (Fig. 3b). However, the strain



Fig. 3. NF membrane characteristics. Representative curves of (a) tensile stress-strain, (b) ultimate tensile strength, (c) strain at failure, and (d) Young's modulus. (e) Water contact angles and (f) degradation profiles in PBS, and (g) cumulative release percentage of EGCG from the membranes in PBS. Statistical analysis was performed by one-way ANOVA followed by Tukey's multiple comparison test, *P < 0.05; **P < 0.01.

remained significantly low (P < 0.01) for both PG5E and PG10E, indicating that EGCG addition and coaxial spinning had an obvious impact on NF elasticity (Fig. 3c). All the NF membranes had a Young's modulus of approximately 30 MPa, with insignificant differences (Fig. 3d).

Surface wettability analyses indicated that all NF membranes were hydrophilic, with a contact angle below 45° (Fig. 3e). Although a slight change in the contact angle was noted among all the membranes, it was statistically insignificant. Overall, EGCG addition did not affect membrane wettability.

The membrane degradation rate in PBS after 28 d (Fig. 3f) was the highest for PG, with a mass loss of approximately 77% (P < 0.01), as compared to approximately 65% for PG5E and PG10E.

The EGCG release from PG5E and PG10E was examined by UV spectrometry (Fig. 3g). An initial burst release was observed within the first 72 h. The burst release was more apparent for PG10E, with approximately 70% of the drug being released in the first 72 h. Subsequently, the release rate declined for both membranes, and approximately 90% of drug release was noted during the 168 h assessment. This was followed by the initiation of the sustained release phase, which continued for 360 h, with an estimated total drug release of approximately 99%. In conclusion, three phases of drug release were observed.

3.3. Cytotoxicity

The morphology of the co-cultured MC3T3-E1 cells was analyzed by phallacidin and 4',6-diamidino-2-phenylindole (DAPI) staining (Fig. 4a); the cell had a normal shape, with a well-established cyto-skeletal network. Moreover, the blue-stained round nuclei confirmed normal cell growth. Cell viability was further confirmed by live-dead staining (Fig. S1a); we could trace an enormous number of uniformly grown viable cells (green) but very few dead cells [32]. The adhesion of the MC3T3-E1 cells to the membrane surface was confirmed using SEM (Fig. 4b) on the third day, where the cells appear to form a dense tissue-like structure. Furthermore, it was concluded that the fabricated membranes were not cytotoxic, based on the cell viability analysis via the Cell Counting Kit-8 (CCK-8) assay (Fig. 4c).

3.4. Osteogenesis-inducing capacity in vitro

Alkaline phosphate (ALP) activity acts as a biomarker for early-stage osteogenic differentiation. According to ALP staining on day 14 (Fig. 5a), a more intense purple color on the membranes was observed in the order PG < PG5E < PG10E. Similarly, a darker red color could be traced, in the same order, following Alizarin Red S (ARS) staining



Fig. 4. Membrane cytocompatibility evaluation. (a) Phalloidin/DAPI staining, (b) cell morphology results observed via scanning electron microscopy on day 3; (c) MC3T3-E1 cell proliferation on the membranes was measured using the CCK-8 assay. Statistical analysis was performed by one-way ANOVA followed by Tukey's multiple comparison test, *P < 0.05; **P < 0.01.

(Fig. 5a). Increased calcium deposition, indicated by dark red nodules, was observed on the various membranes. The quantitative analysis was also in line with the qualitative observations. The ALP activity was significantly different and increased in the same order as mentioned above (Fig. 5b). We also noted a significant difference in the mineral content among the various membranes (Fig. 5c). Both activities increased with increasing EGCG concentration.

3.5. Antibacterial activity

Microbial infection poses a serious hindrance to periodontal treatment owing to the complex oral environment. The broad-spectrum antibacterial potential of the EGCG-loaded membranes was assessed against *Escherichia coli* (*E. coli*) (Fig. 6a) and *S. aureus* (Fig. 6b) using the colony count method (Fig. 6c–d). Both PG5E- and PG10E-treated groups had fewer visible *E. coli* (Fig. 6a) and *S. aureus* (Fig. 6b) colonies than the PG group. Moreover, a strong correlation was observed between the number of colonies and the EGCG concentration.



Fig. 5. Membranes osteogenesis-inducing capacity. (a) Representative ALP staining and ARS staining on day 14, and determination of (b) ALP activity of MC3T3-E1 and (c) calcium deposition on the membranes. Statistical analysis was performed by one-way ANOVA followed by Tukey's multiple comparison test, *P < 0.05; **P < 0.01.

3.6. Bone regeneration capacity in vivo

We evaluated the PG, PG5E, and PG10E NF membranes for their bone defect recovery and guided bone regeneration potential. Four cranial bone defects were created (Fig. S2a), and three out of four defects were covered by the NF membrane, whereas one remained uncovered (control) (Fig. S2b). The 3D reconstructed micro-CT images were created at weeks 4 (Fig. 7a) and 8 (Fig. 7b) to show the defect recovery progression.

The PG5E- and PG10E-treated groups exhibited considerable progress after week 4. New bone formed from all sides to the center. The PG10E-treated group presented the highest bone formation levels. After week 8, clearer evidence of the healing activity of the various NF membranes was observed. A clear defect was still visible in the control group, whereas the PG-treated group showed a reduction in the defect. A slight defect was observed in the PG5E-treated group; in the PG10Etreated group, better recovery was noted.

Further quantitative analysis of the newly formed bone based on BMD (Fig. 7c) and Bone Volume/Tissue Volume (BV/TV) (Fig. 7d) was conducted. BMD progressed in each group over time, while there was no significant difference in BMD between the control and PG groups at weeks 4 and 8. The BMD level was significantly different (P < 0.05) between the PG5E- and PG10E-treated groups at week 4 and also differed from that of the control and PG groups. Therefore, the BMD level is EGCG concentration-dependent. A similar pattern was observed at week 8. The BV/TV quantification results revealed that after weeks 4

and 8, BV/TV levels in the control and NF membrane-treated groups in both weeks were significantly different in the order: control < PG < PG5E < PG10E. These results also imply that the change in BV/TV levels is EGCG concentration-dependent.

We further evaluated the bone defect regenerative activity by sacrificing the rabbits at weeks 4 and 8, followed by H&E and Masson's trichrome staining (Fig. 8a). The surgical margins squeezed the inner ward in the order: control < PG < PG5E < PG10E; this was in line with the observations from the 3D micro-CT reconstructed images. Further evaluation at week 4 showed a void cavity in the defect area filled with some bone marrow and bone cells in both the control and PG-treated groups.

Masson's and H&E staining performed at week 8 further revealed that both EGCG-loaded membranes successfully mediated bone regeneration. Moreover, the regenerative activity happened from the margin to the center in both the PG5E- and PG10E-treated groups (Fig. 8a), whereas the control and PG-treated groups could not form enough bone tissue even after week 8. Masson's staining also indicated that the new bone area (%) in the bone defect measured at 4 weeks (Fig. 8b) was not significantly different for the control and PG groups, with only a slight improvement in the PG-treated group. Comparatively, approximately 40% and 49% of defect areas were covered in the PG5E- and PG10E-treated group. After 8 weeks (Fig. 8c), the total bone area covered by the control group remained at 42%, compared to 52% in the PG-treated group, while PG5E and PG10E could cover a total of 68% and 78%, respectively. These estimates indicate that new bone formation was



Fig. 6. Membrane antibacterial capacity against *E. coli* and *S. aureus*. Digital pictures of agar plates with (a) *E. coli* and (b) *S. aureus* colony-forming units. (c, d) Quantitative bacterial survival rate calculated from the corresponding colony-forming units. Statistical analysis was performed by one-way ANOVA followed by Tukey's multiple comparison test, *P < 0.05; **P < 0.01.

highly influenced by EGCG content within the NF membranes, in addition to the general benefits of the electrospun NF membrane in regenerative activity.

We selected ALP and Osteocalcin (OCN) as markers for immunohistochemical staining of the sections. At four and eight weeks after surgery, according to the intensity and area of the positive signal, the expression of ALP and OCN in PG10E group was the most obvious, followed by PG5E group, PG group and control group (Fig. S3).

4. Discussion

Electrospinning has been broadly demonstrated to be a useful method for encapsulating unstable compounds, and coaxial electrospinning has showed it superiority other processes in term of facile preparation, long-term sustained release, and stability [33–36]. This is particularly advantageous considering the time required for bone regeneration. Thus, we fabricated core–shell membranes with EGCG as the core and PLLA-gelatin NF membranes as the shell.

EGCG could be successfully incorporated into the core without affecting NF surface morphology. Both PG and EGCG-loaded NF membranes showed a smooth surface and continuous fiber structure and no bead formation. This shows that the polymer selection was suitable for our purpose. Smooth and bead-free fiber structures are important for sustained drug release, as beads may interrupt the release process.

Sufficient mechanical strength is a periodontal membrane prerequisite for clinical applicability [36,37]. Appropriate mechanical properties enable the periodontal membrane to maintain its structural integrity during the surgical process and withstand the pressure exerted by newly formed tissues and routine oral activities [38]. The EGCG incorporation within the NF core slightly increased the tensile strength but drastically reduced the strain at failure. However, the impact on Young's modulus remained statistically insignificant. The slight increase in mechanical strength can be correlated to the coaxial fiber structure in which EGCG within the core acted as a reinforcer for the polymeric matrix. The coaxial PLLA/gelatin-based NF mechanical strength superiority is in agreement with a previous report [39]. However, the drastic decrease in the strain at failure indicates that EGCG addition decreased polymer ductility.

Biodegradability is a critical factor in determining regenerative scaffold effectiveness [40,41]. The biodegradation period coordinated with an approximate regenerative time of relevant tissue enhances scaffold clinical applicability. A scaffold that aims to regenerate bone tissue is expected to function between 4 and 6 weeks post-implantation [42]. A fast degradation rate may lead to the membrane structural integrity collapse, whereas very slow degradation may cause failed or inferior regeneration. Despite the excellent PLLA mechanical properties, its biodegradability is slow and incompatible with bone regeneration [43,44]. Gelatine is selected to functionalize PLLA, as it can improve the degradation behavior, the hydrophilicity, and the flexibility [45]. Zhao et al. carried out in vitro degradation of pure PLLA in PBS, found about 4% weight loss in 28 days [46]. Here, all the NF membranes exhibited a mass loss in the 40-50% range after 4 weeks. We also noted an impact of EGCG incorporation and coaxial spinning on the degradation rate, which was statistically significant compared to the impact of neat PG.

We selected coaxial electrospinning to load EGCG within the NF core and demonstrated an around 70% EGCG release within the first 72 h. This rate was better than that reported in a previous study, in which EGCG-loaded liposomes were immobilized on the NF membrane surface, with EGCG released in the same proportion in the first 24 h [47]. The EGCG release can be divided into three distinct phases, which are induced by fiber degradation over time. In phase 1, burst release was predominant owing to the diffusion effect. Because of the NF membrane hydrophilicity, the entry of water prompted the opening of the channels, facilitating EGCG diffusion into the release media. Subsequently, a steady rate was witnessed, followed by a sustained release. These results indicate that coaxial electrospinning facilitates EGCG release with new bone regeneration. Additionally, the initial burst release was significant in balancing the reactive oxygen species level and minimizing bacterial invasion due to the initial inflammatory phase.

A regenerative scaffold must come in direct contact with body tissues, warranting cytotoxicity tests prior to clinical use. Generally, PLLA is considered biologically inert owing to the lack of any bio-functional groups; however, adding gelatin improved cytocompatibility [48]and confirmed to be non-toxic, for gelatin has properties similar to natural collagen [49]. Compared with pure PLLA nanofibrous scaffold, PLLA/gelatine nanofibrous scaffold enhanced hydrophilicity and significantly



Fig. 7. Micro-CT analysis of NF membranes bone repair in vivo. (a–b) Reconstructed three-dimensional micro-CT images at weeks 4 and 8 after EGCG membrane implantation showed the capability of repairing the defect. The bone defect area is indicated by the red circle. Bone tissue parameter analysis of (c) bone mineral density (BMD) and (d) the ratio of bone volume to tissue volume (BV/TV) at weeks 4 and 8. (*P < 0.05; **P < 0.01, compared to the control group and PG10E compared to PG5E). (For interpretation of the references to color in this figure legend, the reader is referred to the Web version of this article.)

promoted the adhesion, elongation, and proliferation of human chondrocytes [50] bone marrow mesenchymal stem cells [51], epithelial cells and smooth muscle cells [45]. In this study, we observed increased viable cell proliferation on the surface of the EGCG-incorporated membranes. This may be attributed to a more supportive surface for cell adhesion as a result of the presence of many bio-functional groups, such as the favorable interaction of serum proteins with catechol present in the EGCG structure [52]. SEM analysis also confirmed the improved cell adhesion. studies have confirmed that EGCG or EGCG-incorporated materials have a positive impact on osteogenic activity [23,26,53]. We demonstrated the in vitro osteopromotive activity of the EGCG-based NF membrane by measuring ALP and ARS activity. ALP is a product of osteoblasts and is involved in the breakdown of inorganic pyrophosphate, providing local phosphate and pyrophosphate for bone mineralization [54]. ALP activity can be correlated with osteogenic differentiation. Both ALP and ARS activities were significantly improved by EGCG treatment in a dose-dependent manner.

In addition to improving cell attachment and proliferation, many

Although electrospun NFs are advantageous for regenerative activity



Fig. 8. Histological images of newly formed bone tissue. (a) Masson's and H&E staining of decalcified bone tissue at 4 and 8 weeks. (b, c) Analysis of the new bone area at 4 and 8 weeks, respectively. Surgical margins, bone marrow, regenerated bone, periosteal, and endosteal are marked as red, yellow, black, green, and blue arrows, respectively. (*P < 0.05; **P < 0.01, compared to the control group and PG10E compared to PG5E). (For interpretation of the references to color in this figure legend, the reader is referred to the Web version of this article.)

in multiple ways, biologically inert membranes can increase the risk of bacterial infection due to the surface availability for bacterial attachment, which can further establish biofilm protection from antibacterial drugs [55]. Therefore, a scaffold meant to regenerate body tissues should exhibit antibacterial activity to prevent early-stage infection following membrane implantation [55–57]. The NF membranes containing EGCG were antibacterial and effective against both the gram-negative and gram-positive model strains. Moreover, the antibacterial effect of the membranes increased with increasing EGCG content. The antibacterial activity of EGCG against gram-positive, gram-negative, and multidrug-resistant bacteria had already been established [58–60]. The major mechanism governing the EGCG antibacterial activity is the binding of the negatively charged EGCG with a positively charged bacterial lipid polysaccharide membrane, resulting in reactive oxygen species generation and cell wall destruction [61,62].

Our in vivo bone regeneration studies using a rabbit cranial bone defect model showed that the EGCG-incorporated NF membranes successfully repaired the defects after week 8 in a dose-dependent manner. The reconstructed bone in the PG5E- and PG10E-treated groups almost covered the defect site, although the thickness was lower than that of the pre-defected bone. Without EGCG, the defect area was mostly filled with connective tissue. EGCG and other plant-based polyphenols exhibit osteogenic activities [63,64]. The release of EGCG provided a conducive environment for osteoblast differentiation and progenitor cells. This inhibited fat deposition at the defect site. EGCG also possesses strong antioxidant activity [65], which is highly beneficial in mitigating oxidative stress during the early inflammatory phase of healing. The

EGCG bioactivity is highly promising for bone regeneration, and its prolonged and steady localized supply is aided by the electrospun NFs, an ideal delivery platform for EGCG. In addition, hydrophilic NFs are beneficial for absorbing wound exudates and maintaining a clean and conducive environment. Despite the detailed in vitro and in vivo characterization, the exact underlying bone formation mechanisms, especially in vivo anti-inflammatory and antioxidant activities and the related gene expression, remain to be explored.

ALP and OCN are important markers for evaluating new bone formation[66,67]. Therefore, we chose these two markers to evaluate the ability of PG10E, PG5E, PG in promoting new bone formation from protein level. We found that the protein expression levels of ALP and OCN in the EGCG loaded group were significantly higher than those in the EGCG free group at 4 and 8 weeks after surgery, and higher EGCG concentration group had a better bone formation, proving that EGCG loaded degradable fiber membrane has a better effect on promoting bone formation in the defect area.

5. Conclusions

In this study, we successfully fabricated a novel multifunctional biodegradable PLLA/gelatin-based NF membrane loaded with EGCG by employing coaxial electrospinning. Extensive physicochemical characterization revealed that the biocompatibility of PLLA can be improved by blending it with gelatin. Moreover, smooth NFs without beads were obtained. EGCG can be loaded within the core of the fiber through coaxial electrospinning without affecting the structure of the NFs. Moreover, prolonged localized delivery can be achieved. The fabricated membranes were found to be biocompatible and antibacterial and were capable of inducing osteogenic activity, as confirmed through in vitro evaluation. The in vivo trial also revealed that EGCG-incorporated membranes served as bioactive formulations for preventing the migration of fibroblasts into the defect area and aiding in bone regeneration. In conclusion, EGCG is a promising therapeutic agent for bone regeneration and its potential can be magnified by formulating a suitable NF-based delivery platform.

CRediT authorship contribution statement

Liang Song: Methodology, Software, Investigation, Formal analysis, Data curation, and, Writing – original draft. Xianrui Xie: Methodology, Investigation, Formal analysis, and, Writing – review & editing. Cuiting Lv: Methodology, Investigation, Formal analysis, and, Writing – review & editing. Atta ur Rehman Khan: Visualization, Formal analysis, and, Writing – original draft, preparation. Yang Sun: Investigation, Resources, and, Visualization. Ruixue Li: Investigation, Resources, and, Visualization. Juan Yao: Investigation, Resources, and, Visualization. Mohamed EL-Newehy: Software, and, Resources. Hany EL-Hamshary: Software, and, Resources. Yosry Morsi: Software, and, Resources. Xiumei Mo: Supervision, Project administration, and, Writing – review & editing. Youcheng Yu: Conceptualization, Funding acquisition, Project administrationProject administration, and, Supervision.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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Appendix A. Supplementary data

Supplementary data to this article can be found online at https://doi.org/10.1016/j.compositesb.2022.109920.

Abbreviations

GBR	guided bone regeneration
PLLA	poly-1-lactic acid
NFs	nanofibers
EGCG	epigallocatechin gallate
PG	PLLA/gelatin
PG5E	PLLA/Gelatin/5 mg/mL EGCG
PG10E	PLLA/Gelatin/10 mg/mL EGCG
SEM	scanning electron microscopy
TEM	transmission electron microscopy
FTIR	Fourier transform infrared

- DAPI 4',6-diamidino-2-phenylindole
- ALP alkaline phosphatase
- ARS alizarin red S
- micro-CT microcomputed tomography
- BMD bone mineral density
- BV/TV bone volume/tissue volume

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