Structure, composition & biomechanics of articular cartilage

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Cartilage functions

Tissue with special **biomechanical** and **biochemical** characteristics

1. Distributes joint loads over a wide area, decreasing the stresses sustained by the contacting joint surfaces

2. Allows relative movement of the opposing joint surfaces with minimal friction and wear

3. Minimizes peak stresses on subchondral bone

4. Provides a friction-reducing, weight-bearing surface with a friction coefficient of 0.0025

5. Functions within a contact pressure range of 2-11 MPa
Cartilage components

- Chondrocytes (<10%)
- Collagen (10-30%) (Type II)
- Proteoglycans (monomer & aggregates (3-10%))
- Water + ions (60-87%)
Components are arranged in a way that is maximally adapted for biomechanical functions.
Perichondrium

- Dense irregularly arranged connective tissue (type I collagen)
- Ensheaths the cartilage
- Houses the blood vessels that nourish chondrocytes
Chondroblast

- Progenitor of chondrocytes
- Lines border between perichondrium and matrix
- Secretes type II collagen and other extracellular matrix components
Chondrocyte

• highly specialized, active cell
• reside in a space called the lacuna
• limited potential for replication
• respond to a variety of stimuli, including growth factors, mechanical loads, piezoelectric forces, and hydrostatic pressures
Chondrocyte

• Each chondrocyte establishes a specialized microenvironment and is responsible for the turnover of the ECM in its immediate vicinity.

• This microenvironment essentially traps the chondrocyte within its own matrix and so prevents any migration to adjacent areas of cartilage.
**Extracellular matrix**

- Provides the rigidity, elasticity, & resilience

- **FIBERS**
  - Collagenous and elastic

- **GROUND SUBSTANCE**
  - Glycosaminoglycans (chondroitin sulfates, keratin sulfate, hyaluronic acid)
  - Proteoglycans: GAGs + core protein
  - Water
Collagen

Creates a framework that houses the other components of cartilage

Majority is Type II collagen (90-95%)

Minor collagens (I, IV, V, VI, IX, and XI) help to form and stabilize the type II collagen fibril network.

Provides cartilage with its tensile strength
Collagen

Collagen fiber arrangement
Proteoglycans

heavily glycosolated protein monomers

aggrecan, decorin, biglycan, and fibromodulin

Each subunit consists of a combination of protein and sugar:
Long protein chain
Sugars units attached densely in parallel
Aggrecan is characterized by its ability to interact with hyaluronan (HA) to form large proteoglycan aggregates via link proteins.

Aggrecan occupies the interfibrillar space of the cartilage ECM and provides cartilage with its **osmotic properties**, which are critical to its ability to resist compressive loads.
Non-aggregating proteoglycans

- interact with collagen.

- differ in glycosaminoglycan composition and function

- Decorin and fibromodulin interact with type II collagen fibrils in the matrix and play a role in fibrillogenesis and interfibril interactions

- Biglycan is mainly found in the immediate surrounding of the chondrocytes, where they may interact with collagen VI
Proteoglycans

Each sugar has one or two negative charges, so collectively there is an enormous repulsive force within each subunit and between neighboring subunits. This causes the molecule to extend stiffly out in space.

This gives articular cartilage its resiliency to compression.

The negative charges make the molecules extremely hydrophilic and cause water to be trapped within. It is used during biomechanical or lubricant activity. This water functions as "shock absorbers", lubricates and nourishes the cartilage.
Cartilage zones

- (10-20%) CF packed tightly & aligned parallel.
  High number of flattened chondrocytes

- (40%-60%) thicker CF organized obliquely.
  The chondrocytes are spherical and at low density

- (30%) CF in a radial disposition.
  Chondrocytes in columnar orientation

- The calcified layer secures the cartilage to bone
Cartilage zones - biomechanics

**Tangential:** most of the tensile properties of cartilage, which enable it to resist the sheer, tensile, and compressive forces imposed by articulation

**Transitional:** is the first line of resistance to compressive forces

**Deep zone:** providing the greatest resistance to compressive forces, given that collagen fibrils are arranged perpendicular to the articular surface
Regions of pericellular matrix

**Pericellular matrix:** mainly proteoglycans, glycoproteins & other noncollagenous proteins
- initiate **signal transduction** within cartilage with load bearing

**Territorial matrix:** mostly fine collagen fibrils, forming a basketlike network.
- may protect the cartilage cells against mechanical stresses and may contribute to its ability to withstand substantial loads.

**Interterritorial matrix:** is the largest with randomly oriented bundles of large collagen fibrils.
- contributes most to the biomechanical properties of articular cartilage
Water proportion

Note that articular (hyaline) cartilage has the highest proportion of water and also the highest proteoglycan content.

It is the combination of the frictional resistance to water flow and the pressurization of water within the matrix that forms the 2 basic mechanisms by which articular cartilage derives its ability to withstand significant loads.
Cartilage growth

Appositional
Increasing in **width**
chondroblasts deposit matrix on surface of pre-existing cartilage

Interstitial
Increasing in **length**
chondrocytes divide and secrete matrix from w/in lacunae
Types of cartilage

Hyaloid

Elastic

Fibrous
Types of cartilage

Hyaloid

Elastic

Fibrous
Hyaline cartilage

• FUNCTION
  • Support tissue and organs
  • Model for bone development

• MATRIX
  • **Type II collagen** (thin fibrils)
  • Chondroitin sulfate, keratin sulfate, hyaluronic acid
  • Water

• LOCATION
  • Tracheal rings, nasal septum, larynx, articular surfaces of joints
Elastic cartilage

• FUNCTION
  • Support with **flexibility**

• MATRIX
  • Normal components of hyaline matrix plus **elastic** fibers

• LOCATION
  • External ear, external auditory canal, epiglottis
Fibrous cartilage

• FUNCTION
  • Support with great tensile strength

• MATRIX
  • Type I collagen - Oriented parallel to stress plane

• LOCATION
  • Intervertebral disks, pubic symphysis
Basic biomechanics of cartilage

Biomechanical **definition**: porous, viscoelastic material with 2 principal phases:
- solid phase: collagen (mainly type II)
- fluid phase: water, normally 80% by wet weight)
  (ion phase: Na+, Ca++, Cl-, 1% by wet weight))

**Functions**

wear resistance,

load bearing,

shock absorption

compressive stresses are as high as 20 MPa in the hip, which is approximately 3000 lb per square inch
Basic biomechanics of cartilage

Viscoelastic, nonlinear, inhomogeneous, anisotropic
Problems in cartilage models

Complex material behavior

Structure and composition vary with depth

Material properties also vary with depth

Material behavior varies within the same joint, and spatially within each joint within each part
Viscoelasticity

Time-dependent behavior when subjected to a constant load or deformation. Two types of mechanisms are responsible for viscoelasticity:

**flow dependent (biphasic):** the frictional drag force of interstitial fluid flow through the porous solid matrix (water is forced out of the tissue like a sponge = volume changes)

**flow independent:** is caused by macromolecular motion—specifically, the intrinsic viscoelastic behavior of the collagen-proteoglycan matrix. As a result, the fluid pressure provides a significant component of total load support (No volume changes)
Fluid flow and biphasic theory

Volumetric change under compression

Flow or extrusion of the interstitial fluid

The fluid passing through the porous solid matrix generates very high frictional resistance

The low permeability of articular cartilage prevents fluid from being quickly squeezed out of the matrix
Permeability

Articular cartilage shows **nonlinear strain dependence** and **pressure dependence**

The decrease of permeability with compression acts to **retard rapid loss** of interstitial fluid during high joint loadings
Compression force

Confined compression test

Copious exudation of fluid at start but the rate of exudation decreases over time from points A to B to C
Creep behavior & stress-relaxation

In a stress-relaxation test, a displacement is applied on the tissue at a constant rate until a desired level of compression is reached. This displacement results in a force rise followed by a period of stress relaxation until an equilibrium force value is reached.

B, In a creep test, a step force is suddenly applied (stepwise) onto cartilage results in a transient increase in deformation (i.e., creep).
Tensile Force

✓ **Toe region**: collagen fibrils straighten out and un- “crimp”

✓ **Linear region** that parallels the tensile strength of collagen fibrils: collagen aligns with axis of tension

✓ **Failure region**
Tensile strength of cartilage

As the tensile loading stress increases, fewer cycles of loading are needed to cause failure.

Cartilage from older individuals fails at a lower stress than that from younger people.
The component parallel to the cut is a shear force that gives rise to a shear stress on the inclined surface.
Under impulsive compressive loads, the cartilage experiences a relatively large lateral displacement due to its high Poisson’s ratio.

This expansion is restrained by the much stiffer subchondral bone, causing a high shear stress at the cartilage bone interface.
Articular cartilage provides an efficient load-bearing surface for synovial joints.

The mechanical behavior of this tissue depends on the interaction of its fluid and solid components.

Each phase (the charged solid matrix, water and ions) of the cartilage contributes to its compressive, tensile and transport behaviors.

The biphasic mixture theory has been successfully used to describe the flow-dependent and flow-independent viscoelastic behavior.
Multiscale Mechanics of Articular Cartilage: Potentials and Challenges of Coupling Musculoskeletal, Joint, and Microscale Computational Models


A macro-scale joint-tissue
effective cartilage strain
change in chondrocyte aspect ratio

B micro-scale tissue-cell

C spatial scale relationship

effective cartilage strain (macro-scale)