Blood Vessel Mechanics

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Vasculature in our body



A. structure:

- 100,000 km of pipes!
- total surface area 800-1000 m²
- 60,000 miles of capillaries
- diameters from 10 μm to 2 cm
- double network connected at smallest scale (anastomosed)

B. function:

- provide nutrients, oxygen to tissues and remove waste
- self-regulation/homeostasis, tissue remodeling and healing
- cellular, molecular trafficking

C. mechanics:

- Pressure: 5 120 mmHg
- Flow: 0.03 40 cm/s

Development of the Vasculature



Chicken embryos

Yolk sac vessels just after the onset of perfusion.

Connected tube formed.

Embryo 26 hours later than in A

Hierarchical structure formed.

(le Noble, Development 2004)

Development of the Vasculature

Mouse embryos:

Normal



impaired heart function (impaired contractility *Mlc2a-/-*).

When heart function is impaired, hierarchical branching does not develop

Flow and hydraulic pressure control vascular structure

(Lucitti, Development 2007)

A Typical Artery and a Typical Vein



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Blood Vessel Structure





Pressure and blood flow

Poiseuille's relationship: $\Delta P = \frac{8\mu lQ}{\pi r^4}$

(steady, laminar, pipe flow)

Stenosis, 54%

MRI, velocity mapping in thoracic aorta



Stenosis, w/o

(Canstein , MRM, 2006, 2007)

Mechanics: vessel wall



Longitudinal stress:

Hoop stress:

$$\sigma_z = F/A$$

= Pd² / ((d+2t)² - d²)

$$\sigma_{\theta} = PD_m / 2t$$

Vessel Wall Associated Pathologies

1. Atherosclerosis

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Normal Arteriole







Vessel Wall Induced Pathologies

2. Hypertensive Vascular Disease



Vessel Wall Induced Pathologies

3. Aneurysms



What are the structural components?

ARTERY/VEIN	% H ₂ O	%	% ELASTIN	C:E RATIO
		COLLAGEN		
Aorta	70.4 ± 0.4	45.5 ± 1.7	30.1 ± 1.7	1.58 ± 0.15
Carotid	71.1 ± 0.1	50.7 ± 2.1	20.1 ± 1.0	2.55 ± 0.13
Coronary	63.2 ± 1.0	47.9 ± 2.6	15.6 ± 0.7	3.12 ± 0.12
Femoral	68.0 ± 0.3	44.5 ± 1.4	24.5 ± 1.6	1.89 ± 0.14
Mesentary	70.8 ± 0.5	38.1 ± 1.7	26.5 ± 1.7	1.51 ± 0.15
Renal	70.4 ± 0.7	42.6 ± 1.6	18.7 ± 1.8	2.46 ± 0.27
Vena cava		35.07 ± 2.1	21.0 ± 3.7	1.67 ± 0.18
Jugular vein		41.8 ± 2.8	47.1 ± 3.1	0.89 ± 0.09
Femoral vein		47.0 ± 4.7	45.3 ± 2.6	1.04 ± 0.11

(Fischer GM & Llaurado JG, 1966; Zocalo, ISRN Physiology, 2013)

Structure of aorta



Vessel wall composition – aortic elastin



Longitudinal section

Cross-sectional section

(Wolinsky, Cir Res, 1964)

Vessel wall composition – aortic elastin



Aortic wall composition - elastin

Longitudinal section



P=250 mmHg



(f)

(g)





Aortic wall composition – elastin

circumferential section



Aortic wall composition – collagen

Longitudinal section



Aortic wall composition -collagen

circumferential section



Vessel wall – Non-linear elasticity

Heterogeneity: Two-phase materials Collagen: $E = 10^9$ dynes/cm² Elastin: $E= 3x10^6$ dynes/cm²

> $\sigma = E\varepsilon$ σ Collagen alone Combined Elastin alone ε Collagen 🚽 Elastin



Vessel wall composition - Aging



Diminished windkessel effect, hardening of the artery (fragmentation and loss of elastin)

(Wagenseil and Mecham, Physiol Rev 2009)

Vessel wall function - disease

pulmonary arteries - rat smoking.



(Liu and Fung, J Biomechanics, 1992)

Vessel wall function - hypertension

Rat cerebral artery

3-order resistive vessel



(Dunn, Hypertension, 1997)

Vessel wall function - disease



Load-free extension

What causes the change of vessel structure and function?

Learn from the development: In 1893, Thomas :

Vessel lumen size depends on blood flow

Vessel length depends on longitudinal force on connective tissues

Vessel wall thickness depend on pressure

Changes by the cells

ECs:

short term -> secrete vasoconstrictor or vasodilator to constrict or relax the smooth muscle cells

long term -> generate basement membrane



SMCs:

short term -> change diameter of artery wall in response to flow change.

long term -> change of elastin/collagen content (aneurysm), SMC replication

Collagen: I, III, V \rightarrow fibril-forming, responsible for vessel strength

Mechanotransduction of ECs



Ion channels, integrins, receptor Tyr kinases, apical glycocalyx, primary cilia, heterotrimeric G proteins, PECAM1, VE cadherin

(Hahn and Schwartz, Nat Rev Mol Cell Biology, 2009)

Mechanotransduction of SMCs

What do they sense:

Transmural pressure (120/80mmHg in arteries, 30-40mmHg in capillaries)

Vascular wall strain by pulsative pressure (coronary artery, carotid artery)

Circumferential, axial wall tension; radial compression Passive or active mechanics, myogenic tone Shear stress from luminal flow



Mechanotransduction of SMCs

How do they sense:

Increased transmural pressure **VSM** membrane depolarization Activating calcium entry \longrightarrow Hyperpolarization, Vessel constriction Activation of K_{ca} channels

GCaMP2 Transgenic Mice, Ach stimulation



(Tallini, Circ Res, 2007)

Application and Vascular Engineering

Acute hypertension

Atherosclerosis – SMC proliferation, matrix calcification

Coronary bypass vein grafts – when veins becomes artery – VSM induced fibrosis (collagen deposition)

Engineered vessel grafts always lack of elastin



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