Stress-strain measurements by strip extensiometry

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Biomechanical properties can be determined by applying a force and measuring the response to it (deformation).

Biomechanical properties are:
- Young’s modulus or modulus of elasticity $E$
- shear modulus $G$,
- compression modulus,
- cohesive strength

Stiffness is not a poor biomechanical property

- **Tensile stiffness** $E \cdot A$
- **Compressive stiffness** $-E \cdot A$
- **Bending stiffness** $E \cdot I$
- **Shear stiffness** $G \cdot A$

**Stiffness:** Resistance of a body against deformation by force.
Strip extensiometry and whole globe experiments

**Strips**

- Extension tests
- **Stress** = \( \frac{F}{A} \)
- **Strain** = \( \frac{\Delta l}{l_0} \)

**Hook's Law**

\[ \sigma = E \cdot \varepsilon \]

**Shell model or membrane model**

- Inflation tests
- **Laplace's rule**
  \[ \sigma = \frac{p \cdot R}{2t} \]
  - \( R = \) Radius
  - \( t = \) Thickness

- Indentation tests
- Bending
- Stretching
- Compression

**Hyperelasticity**

Hook's law is valid for linear elastic materials or for small strains.

Biological tissues are nonlinear elastic and show a high strain. "hyperelastic"
Hyperelastic behaviour can be described by *strain energy density function*. The energy stored in a body due to deformation is called the *strain energy*. The strain energy per unit volume is called the strain energy density and is the area below the stress-strain curve up to the point of deformation.

**Uniaxial strip extensiometers (vertical version)**

Uniaxial strip extensiometers (horizontal version)


**Planar biaxial Testing**
What can be investigated by strip extensiometry?

**Stress-strain measurements**

Young’s modulus is the slope of the stress-strain curve.

In biological materials the relationship between stress and strain is nonlinear, thus a series of Young’s modulus approximation must be made for different stress levels (tangent modulus, secant modulus)

(1N/m² = 1Pa (Pascal))

The stress-strain values can be fitted by the equation: $\sigma = A \exp(B\varepsilon) - 1$ and the Young’s modulus can be derived from $E = A \cdot B \cdot \exp(B\varepsilon)$
What can we read from a stress-strain curve?

There is an initial plateau region where the sample has not been straightened. After it is straightened, the mechanical resistance of the sample consistently increases because of the continuous recruitment of collagen fibers.

Toe modulus and heel modulus

Nonlinear behavior is due to waviness and sliding of collagenous fibers.

The stress-strain relationship can be divided into two distinctive phases:
1. A matrix regulated phase with low stiffness also called the toe or toe/heel region. In this phase the collagen fibril layers remain loose and are unable to contribute much to the stress. The collagen undulates carrying load like an uncoiling spring. No stretching at the micro-fibril level is observed.
2. A collagen regulated phase with much higher stiffness. The fibril layers become taut.


Liu: A mechanical model of the cornea considering the crimping morphology of collagen. IOVS 2014)

**Viscoelastic properties**

Length is held constant and the force required to maintain this length is measured over time.
Applying a constant stress (force) and measuring the extension over time.

Preparing the samples
- Cut the samples from the same location, same orientation
- Choose the same geometrical parameters (length, width)
- For very thin samples (lens capsule, amniotic membrane, choroid, retina, pericard) use a carrier (cigarette paper)
- Use the same preload (prestress)
- Use the same strain rate

**Influence of strain rate**

![Graph showing stress vs. strain at different strain rates.](image)
Orientation of the tissue

Stromal fibrils have a preferential orientation in the superior-inferior and temporal-nasal direction.
Elsheikh: Experimental assessment of corneal anisotropy. JRS 2008

Location of the tissue

The peripheral cornea (in circular direction) is stiffer than the central one.
Circumferentially running fibers form a circular ligament (Meek)


Same width and same length: because some load bearing fibers are cut due to preparation.
Assuming an equal distribution of the collagen fibers the number of oblique load-bearing fibers can be estimated. \( d \) = diameter of the cornea

**Depth-dependance of Young’s modulus**

![Graph showing stress versus strain for different types of corneal flaps](image)
Influence of hydration

Water is enriched with GAGs and causes collagenous fiber bundle swelling, separation, and promotes fibril sliding. These factors affect the mechanical properties.
Hennighausen: Anterior—posterior strain variation in normally hydrated and swollen rabbit cornea. IOVS 1998

Compensation of hydration effect

\[ E = E_0 \exp(t/to) \]
Hatami-Marbini, H. Hydration dependent biomechanical properties of the corneal stroma.

Experimental Eye Research 116 (2013) 47-54

For comparison of stress-strain values or Young’s modulus, the corneas should have the same hydration. That will be realized by incubation of the samples in 15% dextran solution before biomechanical measurement.

**Cohesive tensile strength**

The cohesive tensile strength of interlamellar adhesion is measured by the tearing force to separate the stroma along an interlamellar plane.

Interlamellar cohesive strength characterizes the molecular binding of proteoglycans and the interwoven collagen lamellae.
Interlamellar cohesive strength varies with location in the human cornea.

Smolek: Interlamellar cohesive strength in the vertical meridian of human eye bank corneas, IOVS, 1993

**Depth-dependent cohesive tensile strength**

The anterior 40% of the corneal stroma has significantly higher cohesive tensile strength than the posterior 60%.
Randleman: Depth-dependent cohesive tensile strength in human donor corneas. JRS, 2008

Cohesive tensile strength and CXL

- 400 µm thick flaps of porcine cornea
- the splitting plane was created at 50% depth (200µm)
- after digestion of proteoglycans intralamellar cohesive force is lower
- In 200µm depth the CXL effect is low regarding interlamellar cohesion

Limitations of strip extensiometry
- Flattening of the initial curved form of the specimen
- Damage of structure due to cuts
- Orientation of strips is important
- Mean value of the entire sample
- Measuring local differences is not possible
- Methods with intact corneal samples provide more physiological data

**Advantages of strip extensiometry**
- Easy preparation and measurement
- Investigation of influencing factors like
  * age, glucose, hydration, collagenase,
  * drugs (prostaglandins, steroids)
  * crosslinking (ribo+UV, genipin, nitroalcohol),
  * hormones (estrogen, cortisol)
  * collagen orientation, several layers
  * pathologies (diabetes, keratoconus)
  * surgical techniques (Lasik, PRK, SMILE)
  * comparison of different species (rabbit, porcine, human)

**Summary**

Strip-extensiometry is suitable for comparison, for testing influencing factors

It should be used as first line method

Defined conditions should be used to measure only the biomechanical changes.