

Interrupting TGF- β 1/CCN2/integrin- α 5 β 1 signaling alleviates high mechanical-stress caused chondrocyte fibrosis

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Abstract. – **OBJECTIVE:** Mechanical-stress has been reported to trigger cartilage fibrosis, in which transforming growth factor (TGF- β) and connective tissue growth factor (CCN2) are involved. However, the function of integrin- α 5 β 1, a cytomembrane receptor, on mechanical-stress related fibrosis has not yet been elucidated. This study aims to reveal the interaction of TGF- β 1/CCN2/integrin- α 5 β 1 in the mechanical-stress induced chondrocyte (CH) fibrosis.

PATIENTS AND METHODS: We used different levels (5% and 10%) of cyclic tension simulation (CTS) to stretch CHs and observed the gene expression of TGF- β 1/CCN2/integrin- α 5 β 1 as well as the fibrous related genes containing collagen I/II/III, Runx2, MMP13, and ADAMTS-5 by real-time polymerase chain reaction (RT-PCR) or immunofluorescence. We used the siRNA or the corresponding antagonist of TGF- β 1, CCN2, integrin- α 5 β 1 during the CTS to clear the effect of them in the fibrosis progress. In addition, to verify the crosstalk between TGF- β 1, CCN2, and integrin- α 5 β 1, we used the recombinant human (rh)-TGF- β 1 and CCN2 to culture CHs without CST.

RESULTS: 24 hours-10% CTS was sufficient to induce a decrease of collagen II and increase the collagen I/III, Runx2, MMP13, and ADAMTS-5 gene expression. Under CTS, TGF- β 1 silencing resulted in a decline of CCN2, integrin- α 5 β 1, and alleviated the CHs fibrosis. Apart from this, blocking CCN2 or integrin- α 5 β 1 expression also contributed to the suppression of 10% CTS induced CHs fibrosis. Meanwhile, the exogenous protein supplement raised the cellular TGF- β 1 or CCN2 expression and increased the integrin- α 5 β 1 mRNA level. However, the downregulation of TGF- β 1 or CCN2 did not affect integrin- α 5 β 1 expression, whether the CTS existed or not.

CONCLUSIONS: High mechanical-stress induces CHs fibrosis via the activation of TGF- β 1/CCN2/integrin- α 5 β 1 signaling, and interrupting the TGF- β 1, CCN2, or integrin- α 5 β 1 expression can alleviate the fibrous process.

Key Words:

Mechanical stress, Chondrocyte fibrosis, TGF- β 1, CCN2, Integrin- α 5 β 1.

Introduction

Increased mechanical load, caused by obesity, joint instability, and biomechanical changes, are all common factors that trigger the degeneration of articular cartilage¹. Abnormal stress stimulation leads to a series of pathologies, like apoptosis of chondrocytes (CHs) and degradation of extracellular matrix (ECM). As a force-sensitive cell, CH receives stress stimulation and generates mechanical signals to regulate gene expression². Proper mechanical stimulation contributes to the maintenance of the physiological function of CHs. On the other hand, abnormal stress stimulation starts and aggravates the degeneration of CHs^{3,4}.

Integrin is a kind of transmembrane glycoproteins widely existing on the cell membrane, the level of which is closely related to the cellular viability, adhesion, and phenotype. As a mechanically sensitive receptor on the surface of articular cartilage, integrin acts as a converter from external mechanical signals to intracellular chemical signals, and it senses various mechanical stress stimuli and eventually changes the relevant cell phenotype^{5,6}. Different subtypes of integrins play different roles in the process of mechanochemical signal transduction. Among them, the β 1 subunit and all types of α subunits are highly expressed in osteoarthritis (OA) CHs and participate in the pathology of OA process⁷⁻⁹. CHs are highly differentiated cell types after maturity. However, CH gradually loses the chondrogenic morphology and dedifferentiates into the fibroblast-like cells during the OA process. Meanwhile, its metabolism significantly increased as one of the indicators,

among which growth factors such as transforming growth factor (TGF)- β and connective tissue growth factor (CCN2, also known as CTGF) highly express¹⁰.

The effect of TGF- β and CCN2 in cartilage metabolism is complex and dynamically changing. Although they can promote CH proliferation and ECM synthesis, they are also potential inducers of CH fibrosis. With the fibrous progress of CH, the cellular expression of type II collagen gradually decreased instead of type I and type III collagen. Whereas, most tissue fibrotic diseases based on the excessive deposition of type I and III collagen, such as liver fibrosis, systemic sclerosis, and scleroderma, are closely related to the overexpression of TGF- β and CCN2¹¹⁻¹³. Apart from this, due to containing GTCT and its complement AGAC motifs on the CCN2 promoter, TGF- β is considered to be an essential inducer of CCN2 expression¹⁴. Xu et al¹⁵ found TGF- β increases CCN2 expression and exerts a favorable effect on rabbit epidural scar-derived fibroblasts proliferation and transdifferentiation. Furumatsu et al¹⁶ also reported cyclic tensile strain (CTS) increases CCN2 expression by the activation of the TGF- β pathway in chondrocytic cells.

Since integrin- $\alpha 5\beta 1$ accumulates when OA aggravates¹⁷ partly relating to the mechanical stress¹⁸, and it is a CCN-binding receptor that regulates CCN functions in CHs¹⁹. We wondered whether it existed crosstalk between TGF- β , CCN2, and integrin- $\alpha 5\beta 1$ in the mechanical-stress related CHs fibrosis. Therefore, we isolated the CHs from human knee cartilage and explored the TGF- β , CCN2, integrin- $\alpha 5\beta 1$, and type I/II/III collagen gene expression response to the, and further investigated the effect of TGF- β /CCN2/integrin- $\alpha 5\beta 1$ signaling on the mechanical-stress triggered CHs fibrosis.

Patients and Methods

CHs Source

This study was approved by the Ethics Committee of The Affiliated Zhangjiagang Hospital of Soochow University. We collected the human knee cartilage from five patients (every age 39 years) undergoing traumatic fracture for CHs isolation. We have evaluated the patient's knee joint to exclude who has arthritis and evident cartilage degeneration. Informed consent was obtained from the patient before the operation. We isolated the CHs from the cartilage as the following proto-

col. The surface layer of the cartilage was cut into small pieces and digested with the solution (0.2% dispase and 0.25% type I collagenase; Invitrogen, Carlsbad, CA, USA) overnight. The digested solution was filtered and centrifuged to get the CHs pellets. CHs were cultured in Dulbecco's modified Eagle medium/F12 (DMEM/F12) medium with 10% fetal bovine serum (FBS; Gibco, Dun Laoghaire, Co Dublin, Ireland) and 1% penicillin-streptomycin.

Drug Treatments

To regulate the TGF- $\beta 1$, CCN2, and integrin- $\alpha 5\beta 1$ expression in the cultured CHs. We used the recombinant human TGF- $\beta 1$ protein (rh-TGF- $\beta 1$, 50 $\mu\text{g}/\text{mL}$) (ab50036; Abcam, Cambridge, UK), recombinant human CCN2 protein (rh-CCN2, 50 $\mu\text{g}/\text{mL}$) (ab269222; Abcam, Cambridge, UK) to upregulated the TGF- $\beta 1$ and CCN2 expression, respectively. Pamrevlumab (FG-3019, 100 $\mu\text{g}/\text{mL}$) (FibroGen, San Francisco, CA, USA), a human monoclonal antibody interfering with CCN2, was used for blocking CCN2 expression as the previous description²⁰. Furthermore, ATN-161 (1 μM ; Selleck, Houston, TX, USA), a peptide antagonist of integrin- $\alpha 5\beta 1$, was used to suppress integrin- $\alpha 5\beta 1$ expression.

Cyclic Tension Simulation (CTS)

CHs were subjected to a CTS (5% or 10% linear stretch) at a frequency of 1 Hz using the Mechanical Cell Stretch System (Menicon Life Science, Nagoya, Aichi, Japan) as the previous description²¹. CHs with a density of 1.5×10^4 per ml were seeded on the stretch chamber and allowed to achieve 70 % confluence for one day culture. We set the strain stimulation up to 24 h and assessed the collagen I/II mRNA expression to determine the significantly optimized stretch time, thus resulting in virtually 10% 24 h stretch. The cells seeded on the stretch chamber without CTS were classified as control.

Immunofluorescence

We used immunofluorescence (IF) staining to determine the protein expression of collagen I/II visibly. After the appointed treatment, the cells were washed with PBS and fixed using 4% paraformaldehyde for 15 min, and then incubated with 0.1% Triton-X for membranes permeabilization. Following, CHs were produced with the anti-collagen II or anti-collagen I primary antibody (Abcam, Cambridge, UK) overnight at 4°C. After washing, the cells were incubated with Alexa

Fluor 488 conjugated secondary antibody (Invitrogen, Carlsbad, CA, USA) for 1 h in the dark at room temperature.

Real Time-Polymerase Chain Reaction (RT-PCR) Analysis

We determined the gene expression in the mRNA level by real-time PCR analysis (RT-PCR). Briefly, after the appointed treatment, we isolated the mRNA using TRIzol reagent (Invitrogen, Carlsbad, CA, USA) according to the manufacturer’s protocols. Then, the RNA was reverse-transcribed into complementary deoxyribose nucleic acid (cDNA) and applied to the RT-PCR analysis of TGF-β1, CCN2, integrin-α5β1, collagen I, collagen II, collagen III, Runx2, MMP13, and ADAMTS-5 expressions performed using SYBR Green Master (Boehringer, Mannheim, Germany). The primers are listed in Table I. The glyceraldehyde 3-phosphate dehydrogenase (GAPDH) mRNA level was used to normalize the relative gene expression according to the 2^{-ΔΔCt} method.

siRNA Transfection

We silenced the TGF-β1 expression *via* siRNA transfection. Briefly, after seeding on the stretch chamber until the density reached 70 %. Then, Opti-MEM (Sigma-Aldrich, St. Louis, MO, USA) and siRNA targeting TGF-β1 (Catalog #AM16708, Thermo Fisher Scientific, Waltham, MA, USA) were added to Lipo2000 reagent (Invitrogen, Carlsbad, CA, USA). CHs were transfected with the mixture of Lipo2000 and siRNA reagent for 24 h, and the cells could be used for subsequent experiments.

Statistical Analysis

All the values were expressed as mean ± standard deviation (SD) by analysis using the Statisti-

cal Product and Service Solutions (SPSS) Version 21.0 (IBM Corp, Armonk, NY, USA). Differences between two groups were analyzed by using the Student’s *t*-test. A comparison between multiple groups was made using a one-way ANOVA test followed by Post-Hoc Test (Least Significant Difference). *p*<0.05 indicated a significant difference.

Results

High Level of CTS Disorders Collagen Components of CHs

To clear how CTS affects the fibrosis process of CHs, we stressed CHs with two degrees of axial tension (5% and 10%) at a frequency of 1 Hz from 12 h to 24 h. The cells seeded on the same stretch chamber were grouped as control. After 12 h CTS, a 5% tensile rate increased the collagen mRNA expression, and a 10% tensile rate increased the collagen I expression. However, 24 h later, 5% tension kept the CHs a higher level of collagen II mRNA expression compared to the control, and the collagen I mRNA expression was not significantly changed. On the contrary, 10% tension decreased the collagen II mRNA expression and further increased the collagen I level after 24 h CTS (Figure 1A and 1B). To our knowledge, the CHs undergo fibrous dedifferentiation accompanying by collagen components remodeling by collagen I accumulation and collagen II reduction. Therefore, we treated CHs with 10% CTS for 24 h to induce fibrosis in the following experiments.

Silencing TGF-β1 Expression Weakens CTS Induced CHs Fibrosis

After 24 h of 10%-CTS, we found the mRNA expression of TGF-β1, CCN2, and integrin-α5β1 was significantly increased (Figure 2A). Therefore, we silenced the TGF-β1 gene expression

Table I. Primer sequences for RT-PCR.

Gene name	Forward (5'>3')	Reverse (5'>3')
Collagen I	GAGGCGCAAGACGAAGACATC	CAGATCACGTCATCGCACAAAC
Collagen II	TGGACGATCAGGCGAAACC	GCTGCGGATGCTCTCAATCT
Collagen III	ATGTTGTGCAGTTTGCCAC	TCGTCCGGGTCTACCTGATT
Runx-2	TGGTFACTGTCATGGCGGGTA	TCTCAGATCGTTGAACCTTGCTA
MMP-13	ACTGAGAGGCTCCGAGAAATG	GAACCCCGCATCTTGGCTT
ADAMTS-5	GAACATCGACCAACTCTACTCCG	CAATGCCACCGAACCATCT
TGF-β1	GGCCAGATCCTGTCCAAGC	GTGGGTTTCCACCATTAGCAC
CCN2	CAGCATGGACGTTTCGTCTG	AACCACGGTTTGGTCCTTGG
Integrin-α5β1	GGCTTCAACTTAGACGCGGAG	TGGCTGGTATTAGCCTTGGGT
GAPDH	ACAACCTTGGTATCGTGGAAGG	GCCATCACGCCACAGTTTC

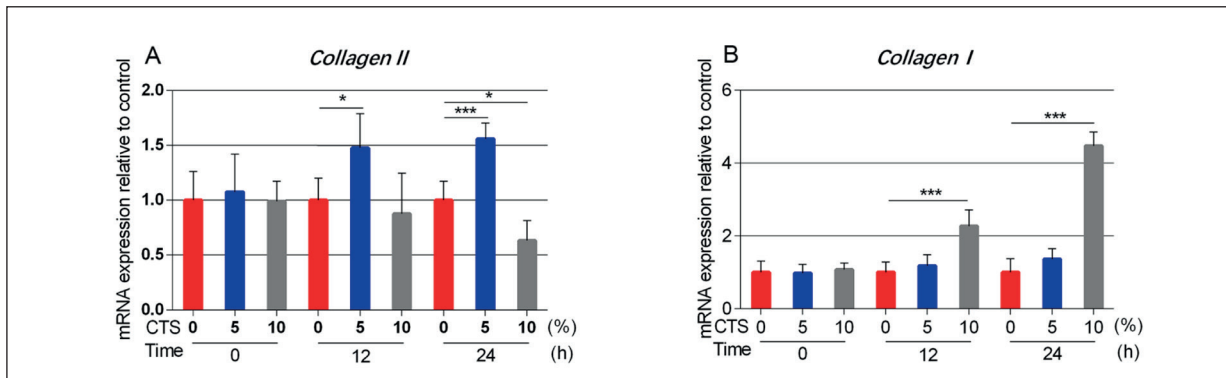


Figure 1. High level of CTS disorders CHs collagen II and I components. CHs were grouped into non-CTS, 5%, and 10% tension groups, and each group was sub-classified into 0 h, 12 h-CTS, and 24 h-CTS subgroups. RT-PCR analysis for the mRNA expression level of (A) collagen II and (B) collagen I from CHs normalized to GAPDH expression. Results are expressed as mean \pm SD. (* $p < 0.05$, *** $p < 0.001$).

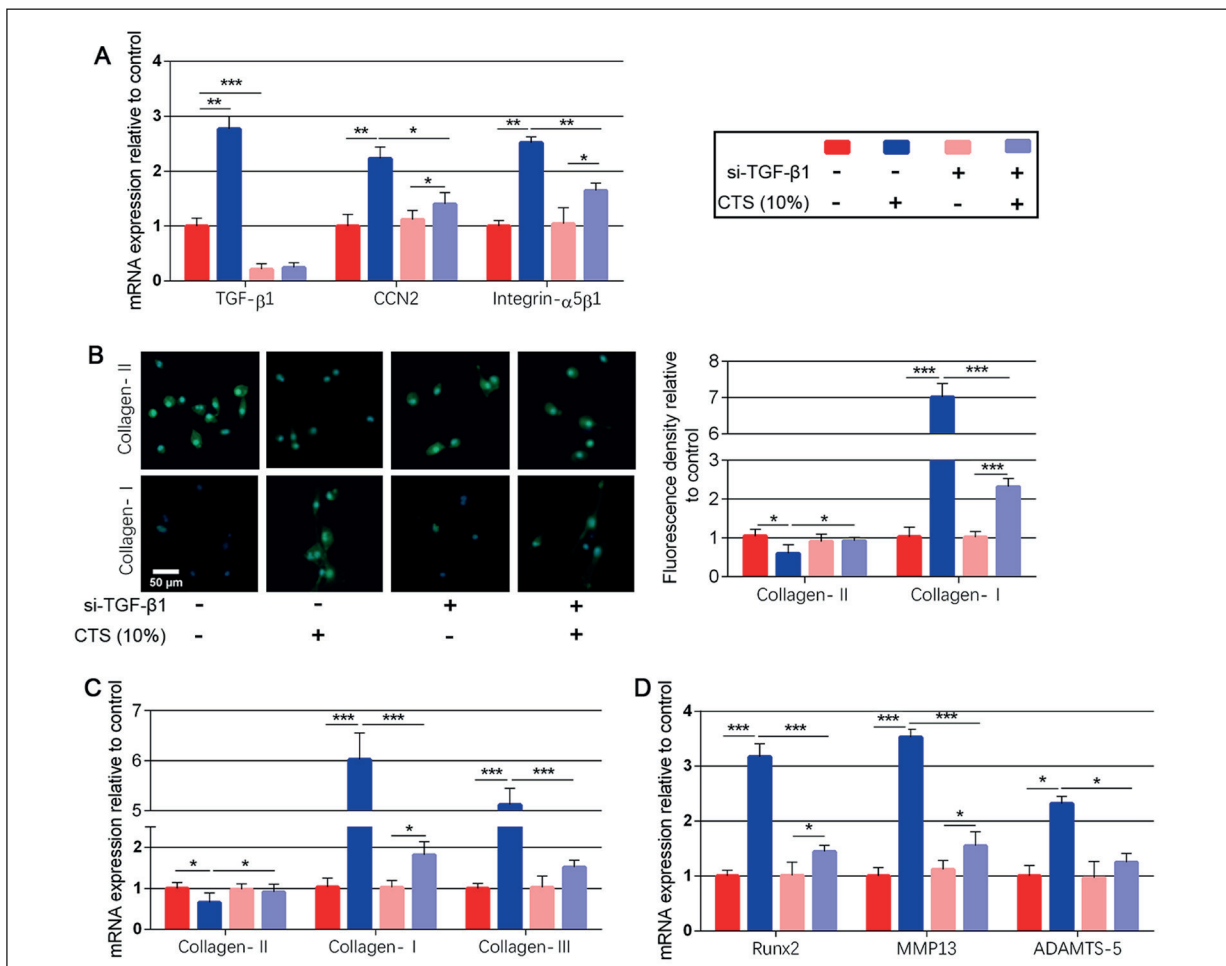


Figure 2. Silencing of the TGF- β 1 gene alleviates CTS induced CHs fibrosis. Normal CHs or TGF- β 1-silenced CHs were subjected to 10%-CTS for 24 h. The cells without CTS and siRNA transfection were set as control. **A**, RT-PCR analysis for the mRNA expression level of TGF- β 1, CCN2, and integrin- α 5 β 1. **B**, IF analysis for the protein expression of collagen II and collagen I, and its quantification measured by Image J software, (magnification: 200 \times). **C**, RT-PCR analysis for the mRNA expression level of collagen II, collagen I, collagen III. **D**, Runx2, MMP13, ADAMTS-5 normalized to GAPDH expression. Results are expressed as mean \pm SD. (* $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$).

of CHs and then treated with 10%-CTS for 24 h to clear whether it changed CCN2 and integrin- α 5 β 1 expression and helped to weaken the fibrosis progress. The result indicated that TGF- β 1 deficiency alleviated the CCN2 and integrin- α 5 β 1 increase caused by CTS. Besides, the TGF- β 1 silenced CHs reserved the collagen II content after CTS, and the collagen I level was also inhibited under the 10% CTS, which was consistent in both protein and mRNA level (Figure 2B and 2C). Meanwhile, the collagen III mRNA was also increased after CTS, which was rejected by TGF- β 1 silencing compared to the control (Figure 2C). In addition, we also analyzed the fibrosis-related gene of CHs, such as Runt-related transcription factor 2 (Runx2), Matrix Metalloproteinase 13 (MMP13), and ADAMTS-5 (a disintegrin and metalloproteinase with thrombospondin motifs-5). CTS induced Runx2, MMP13, and ADAMTS-5 overexpression compared to the control, and TGF- β 1 silencing was efficient to suppress their expression (Figure 2D).

Blocking CCN2 or Integrin- α 5 β 1 Weakens CTS Induced CHs Fibrosis

Since CCN2 and integrin- α 5 β 1 were upregulated by CTS, we further used the FG-3190 (100 μ g/mL) and ATN-161 (1 μ M) in the culture medium while CTS to blocking CCN2 and integrin- α 5 β 1 expression, respectively. Interestingly, the inhibiting of CCN2 led to the downregulation of CCN2 and integrin- α 5 β 1, and TGF- β 1 also slightly reduced compared to the non-FG-3190 treated CTS CHs. Besides, the ATN-161 significantly decreased integrin- α 5 β 1 expression compared to the non-ATN-161 treated CTS CHs, and it did not affect the TGF- β 1 and CCN2 expression (Figure 3A). The protein and mRNA levels of collagen II were both increased after the supplement of FG-3190 or ATN-161. On the contrary, the collagen I level was suppressed due to the inhibition of CCN2 or TGF- β 1 (Figure 3B and 3C). In addition, the collagen III, Runx2, MMP13, and ADAMTS-5 expression were decreased after the blocking of CCN2 or integrin- α 5 β 1 compared to the non-drug treated CTS CHs (Figure 3D). Although the efficacy of stimulation of FG-3190 and ATN-161 was different in CHs, it seemed that it was more useful to inhibit integrin- α 5 β 1 than to inhibit CCN2 from delaying CHs fibrosis.

TGF- β 1 and CCN2 Overexpression Trigger Integrin- α 5 β 1 Expression of CHs

In these experiments, the high level of CTS triggered the TGF- β 1, CCN2, and integrin- α 5 β 1

gene expression. Besides, the suppression of TGF- β 1 resulted in the reduction of CCN2 and integrin- α 5 β 1. The data suggested crosstalk between TGF- β 1, CCN2, and integrin- α 5 β 1 in the mechanical stress condition. However, whether this crosstalk exists independent of CTS remains unclear. Instead of the CTS, we cultured the CHs with rh-TGF- β 1 or rh-CCN2 to upregulate the cellular TGF- β 1 or CCN2 expression. Additionally, we used the FG-3019 and ATN-161 to reveal the relation among TGF- β 1, CCN2, and integrin- α 5 β 1 without mechanical stress. As shown in Figure 4A, compared to the control, rh-TGF- β 1 stimulation contributed to the upregulation of TGF- β 1, CCN2, and integrin- α 5 β 1 mRNA expression; rh-CCN2 increased the CCN2 and integrin- α 5 β 1 mRNA expression; FG-3019 and ATN-161 only affected the CCN2 and integrin- α 5 β 1 expression, respectively. The data suggested that TGF- β 1 overexpression could increase CCN2 and integrin- α 5 β 1 mRNA content, and CCN2 overexpression also caused the upregulation of integrin- α 5 β 1. However, the blocking of CCN2 did not change the integrin- α 5 β 1 expression. Therefore, we concluded that TGF- β 1 and CCN2 overexpression trigger integrin- α 5 β 1 expression, but the suppression of CCN2 did not result in a decrease of integrin- α 5 β 1. In addition, we found TGF- β 1 overexpression promoted both collagen II and I protein production, and rh-CCN2 was only able to increase collagen I expression (Figure 4B). However, the blocking of CCN2 and integrin- α 5 β 1 made no difference in collagen II and I protein expression (Figure 4C and 4D).

Discussion

Articular cartilage is under endogenous and exogenous mechanical stimulation, and appropriate mechanical stimulation is significant for maintaining the steady-state of articular cartilage²². However, excessive mechanical stimulation can cause articular cartilage damage and even OA. Articular cartilage is composed of CHs and ECM, and CHs are responsible for the production and maintenance of ECM stability. Typically, the mechanical stimuli to which CHs subjects are mainly pressured, but tension and shear forces are also fundamental in some areas²³. Kelly et al²⁴ found that tension occurs mostly around the compressed area of articular cartilage and is also at the boundary between articular cartilage and subchondral bone. CTS is closer to the physiolo-

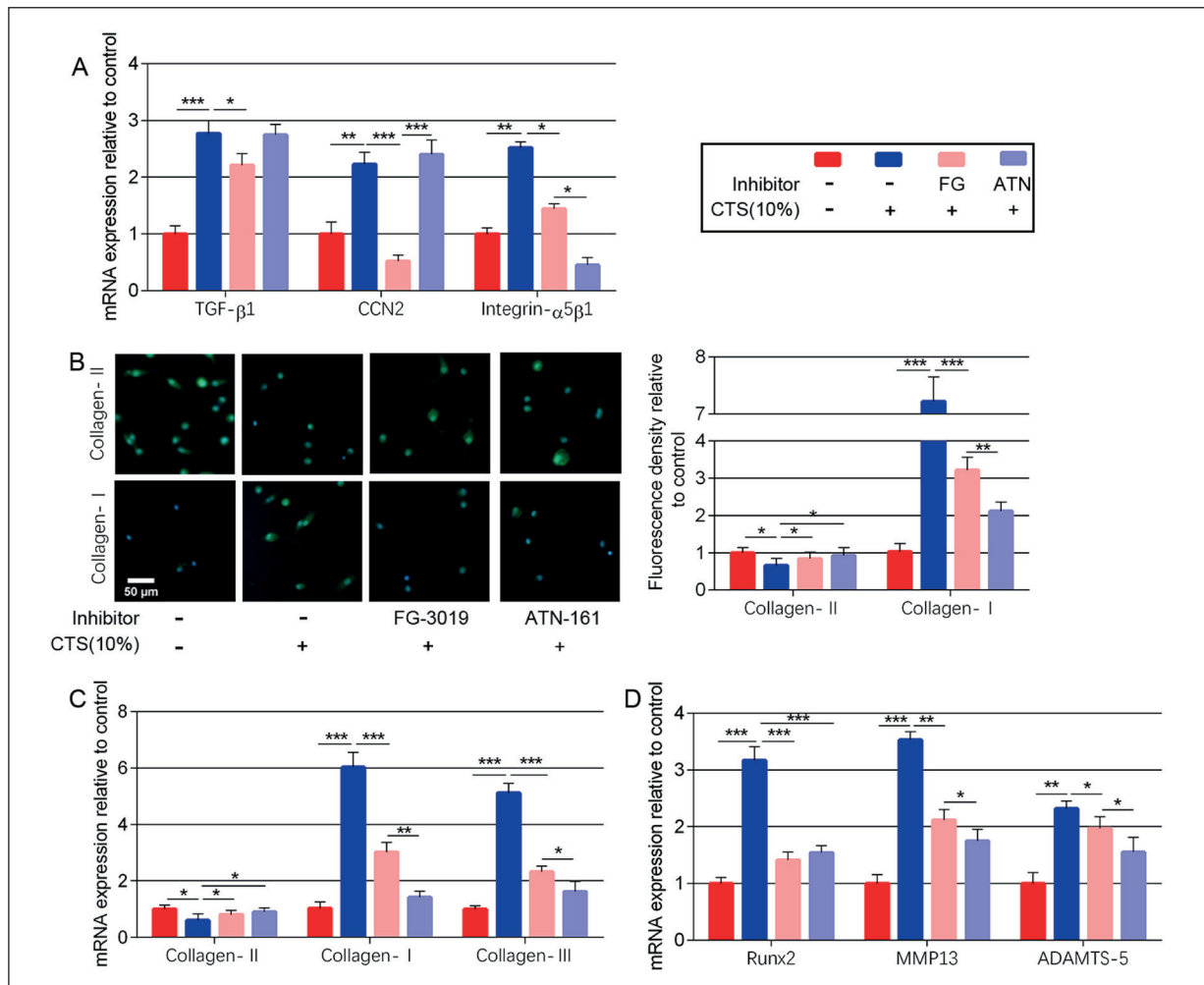


Figure 3. Blocking CCN2 or integrin- α 5 β 1 weakens CTS induced CHs fibrosis. Normal CHs were subjected to 10%-CTS for 24 h. Two groups of them were cultured in the FG-3019, or ATN-161 contained medium while CTS. The cells without CTS in the normal medium were set as control. **A**, RT-PCR analysis for the mRNA expression level of TGF- β 1, CCN2, and integrin- α 5 β 1. **B**, IF analysis for the protein expression of collagen II and collagen I, and its quantification measured by Image J software, (magnification: 200 \times). **C**, RT-PCR analysis for the mRNA expression level of collagen II, collagen I, collagen III. **D**, Runx2, MMP13, ADAMTS-5 normalized to GAPDH expression. Results are expressed as mean \pm SD. (* p < 0.05, ** p < 0.01, *** p < 0.001).

gical state of articular cartilage stress than static tension, and its effect on CHs is more evident²⁵. Many studies have proved that different tensile strengths have different effects on the synthesis of ECM. Fukuda et al²⁶ indicated the 5% CTS loaded on CHs promotes proteoglycan synthesis, and 17% magnitude CTS suppresses its synthesis. Besides, Connelly et al²⁷ declared that 5% CTS of 1 Hz had no effect on the proteoglycan synthesis of CHs, but 10% and 20% significantly interrupted its integration. However, whether CTS affects CHs fibrosis is not fully understood.

CH fibrosis is characterized by dysregulation of ECM metabolism, manifested by changes

in collagen composition, increased expressions of matrix catabolic genes, such as MMP13 and ADAMTS-5, and overexpression of the hypertrophic transcription factor Runx2^{28,29}. As the previous studies, our research has demonstrated that 5% of CTS promoted collagen II expression. Differently, 10% CTS decreased the collagen II and was capable of triggering the collagen I and III formation, which was associated with the upregulation of TGF- β 1, CCN2, and integrin- α 5 β 1. TGF- β 1 overexpression is the inducer of the onset of tissue fibrosis³⁰, which usually causes the upregulation of type I and type III collagen³¹. Additionally, the exogenic stimulation of TGF- β 1 or

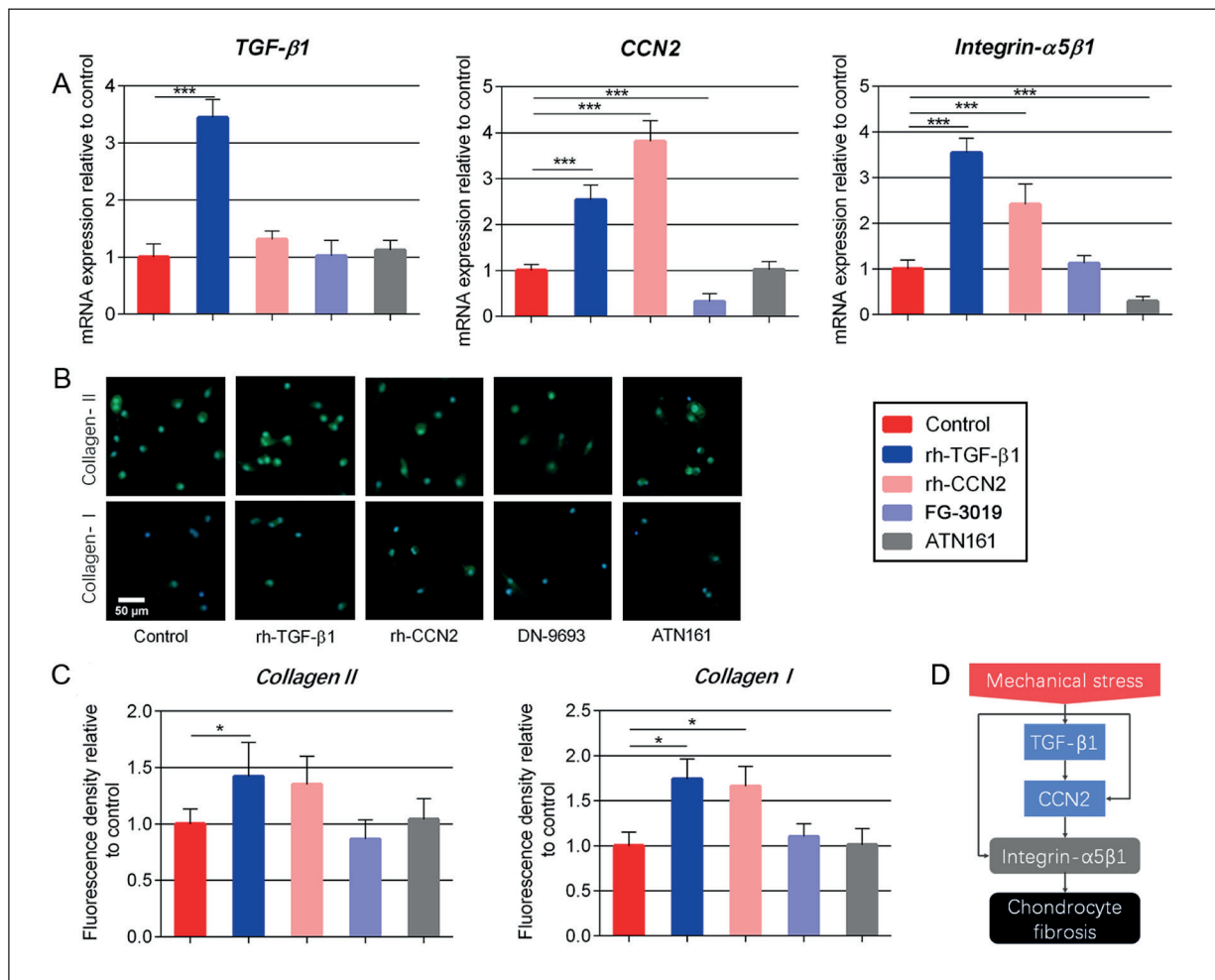


Figure 4. TGF- β 1 and CCN2 overexpression trigger integrin- α 5 β 1 expression of CHs. Normal CHs were stimulated in the medium containing rh-TGF- β 1, rh-CCN2, FG-3019, or ATN-161 for 24 h without CTS. **A**, RT-PCR analysis for the mRNA expression level of TGF- β 1, CCN2, and integrin- α 5 β 1 normalized to GAPDH expression. **B**, IF analysis for the protein expression of collagen II and collagen I, and **C** its quantification measured by Image J software, (magnification: 200 \times). **D**, Graphical abstract of this study. Results are expressed as mean \pm SD. (* p < 0.05, *** p < 0.001).

CCN2 has been used in the establishment of CHs fibrosis *in vitro*^{32,33}. Because mechanical stress can induce the generation of TGF- β 1³⁴ and also CCN gene expression in fibroblasts, endothelial cells, bone cells, and other cell types^{35,36}, therefore, the mechanism by which mechanical stretch induces the orientation of CHs fibrosis should be associated with the upregulation of TGF- β 1 and CCN2. In our study, the upregulation of TGF- β 1 did promote the CCN2 expression. However, CTS increased the CCN2 expression in the TGF- β 1 silenced CHs, which suggested CCN2 could be regulated directly by mechanical stress that independent of TGF- β 1. Even though we showed the upregulation of TGF- β 1 triggering the CCN2 expression in both CTS and relaxed condition. To

alleviate the CTS induced fibrous process of CHs, suppressing TGF- β 1 or CCN2 expression might be a feasible way.

Integrins are transmembrane receptors that mediate various biomechanical signal transductions inside and outside cells. Among the multiple subunits, integrin- α 5 β 1 is very sensitive to the extracellular mechanical signals. Kurakawa et al³⁷ concluded that mechanical-stress upregulates integrins, particularly the α 5 β 1 subtype, in nucleus pulposus and annulus fibrosus cells that lead to the intervertebral disc degeneration. Lucchinetti et al³⁸ elucidated integrin- α 5 β 1 acts as a mechanical signal transducer to modulate the cellular physiology between the CH and the ECM. Whereas, the effect of integrin- α 5 β 1 on the CHs

fibrosis and whether it interacts with TGF- β 1 and CCN2 has not been fully explained. From our findings, blocking the expression of integrin- α 5 β 1 alleviated the CTS induced collagen disorders and the Runx2, MMP13, and ADAMTS-5 excess production. Meanwhile, the TGF- β 1 and CCN2 expression were not interrupted. TGF- β 1 and CCN2 played the pro-fibrous role in the CHs metabolism via the mediation of integrin- α 5 β 1. Because integrin- α 5 β 1 is the cellular receptor of TGF- β 1³⁹ and CCN2¹⁹, our observation verified that TGF- β 1 and CCN2 regulate CHs fibrosis through the intervention of integrin- α 5 β 1. Notably, our results only proved the upregulation of TGF- β 1 and CCN2 could activate integrin- α 5 β 1, but no evidence was noticed that inactivation of TGF- β 1 or CCN2 inhibited the integrin- α 5 β 1 expression. Moreover, the expression of integrin could also be directly upregulated by the influence of high mechanical-stimulation, and this pathway is independent of TGF- β 1 and CCN2.

Conclusions

Our results show that a high level of mechanical-stress can induce CHs fibrosis by the mechanisms of TGF- β 1, CCN2, and integrin- α 5 β 1 activation, which is shown as a graphical abstract in Figure 4D. The novelty of this study underlies disrupting the crosstalk among TGF- β 1, CCN2, and integrin- α 5 β 1 plays a meaningful effect on delaying the formation of CHs fibrosis caused by mechanical-stress. Further, we propose to explore the axial compressive force on the process of CHs fibrosis and the potential mechanism related to TGF- β 1/CCN2/integrin- α 5 β 1 signaling, which would help us to understand the pathology and find the therapies of OA.

Conflict of Interest

The Authors declare that they have no conflict of interests.

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