

RESEARCH ARTICLE

3D-bioprinted osteochondral model based on hierarchical polymeric microarchitectures for *in vitro* osteoarthritis drug screening

Supplementary file

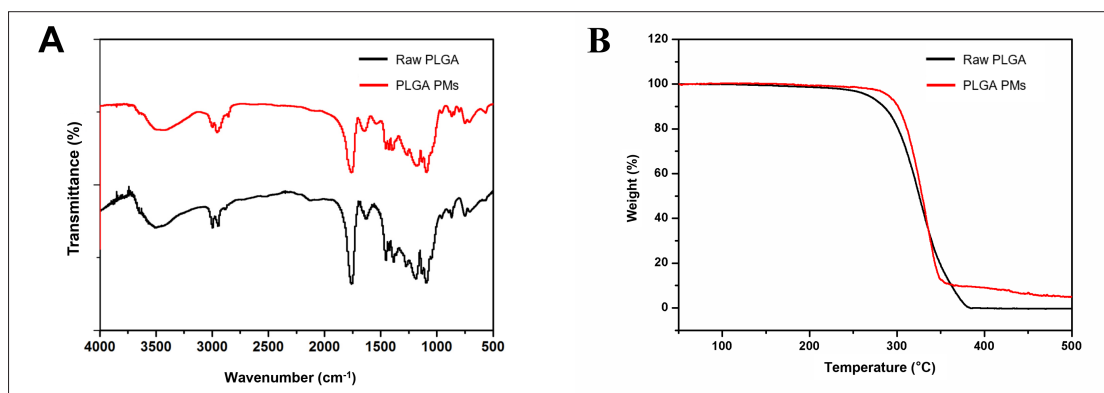


Figure S1. Characterization of the poly(lactic-co-glycolic acid) (PLGA)-based polymeric microarchitecture (PM). (A) Fourier transform infrared spectra. (B) Thermogravimetric analysis spectra.

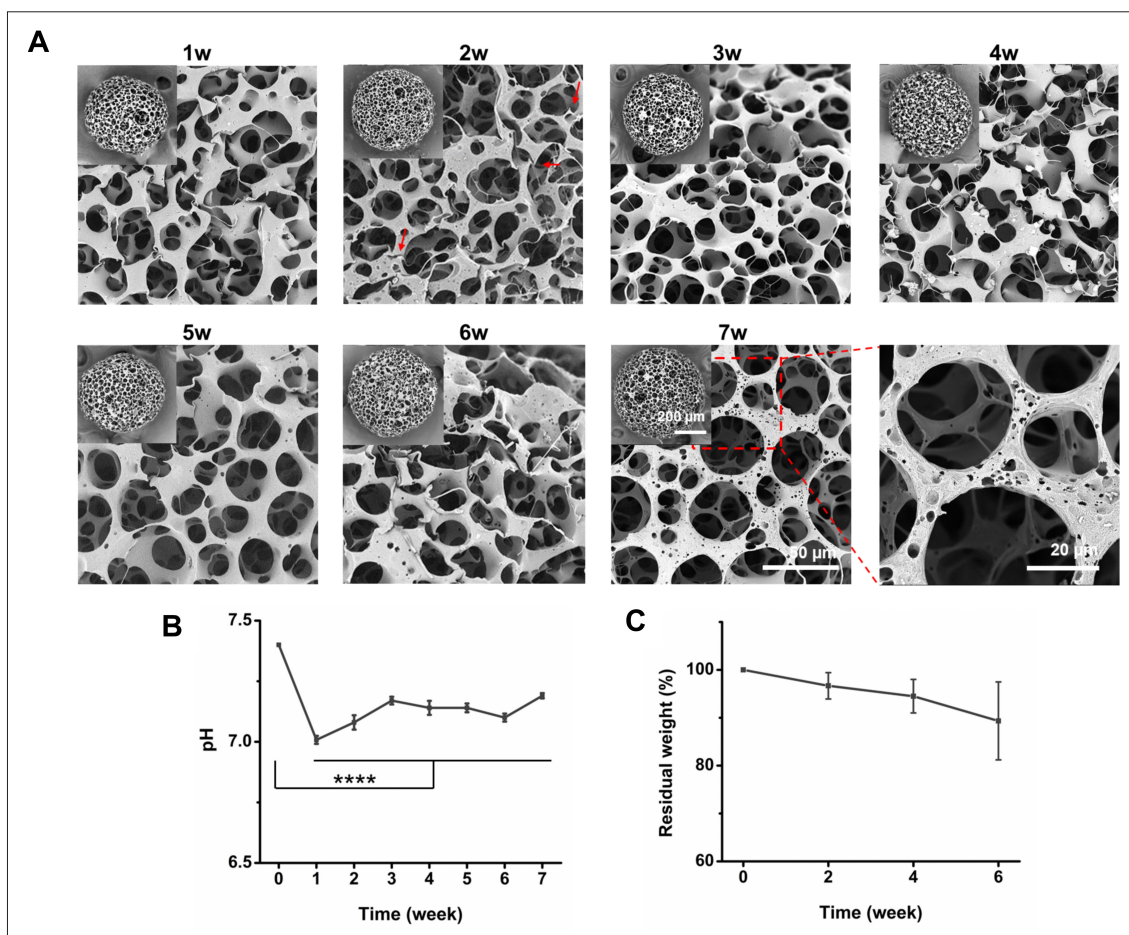


Figure S2. (A) Scanning electron microscopy images presenting the degradation of polymeric microarchitectures in phosphate-buffered saline (PBS; pH 7.4) *in vitro*. Scale bars: 200, 50, or 20 μm ; magnifications: 400 \times , 700 \times , 1000 \times . (B) The pH value of the PBS over time. (C) Weight loss ratio over time.

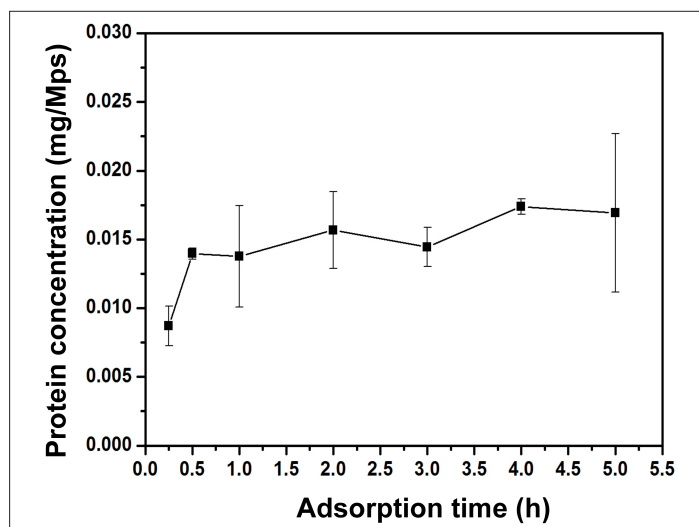


Figure S3. The kinetic curve of protein adsorbed on polymeric microarchitectures.

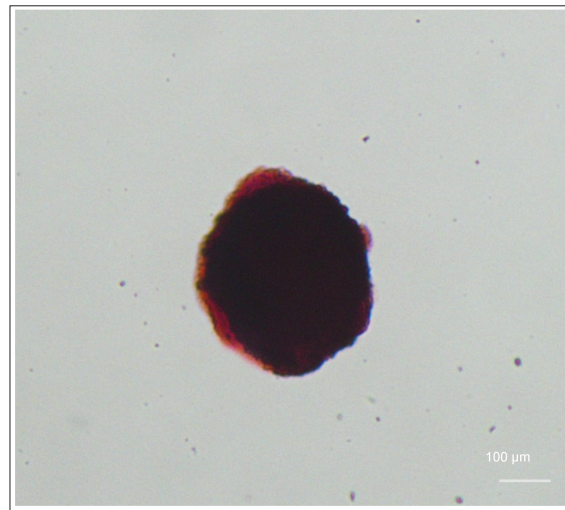


Figure S4. Alizarin Red S staining of endothelial osteoblastic microtissues at 14 days of osteogenic induction culture. Scale bar: 100 μm; magnification: 40×.

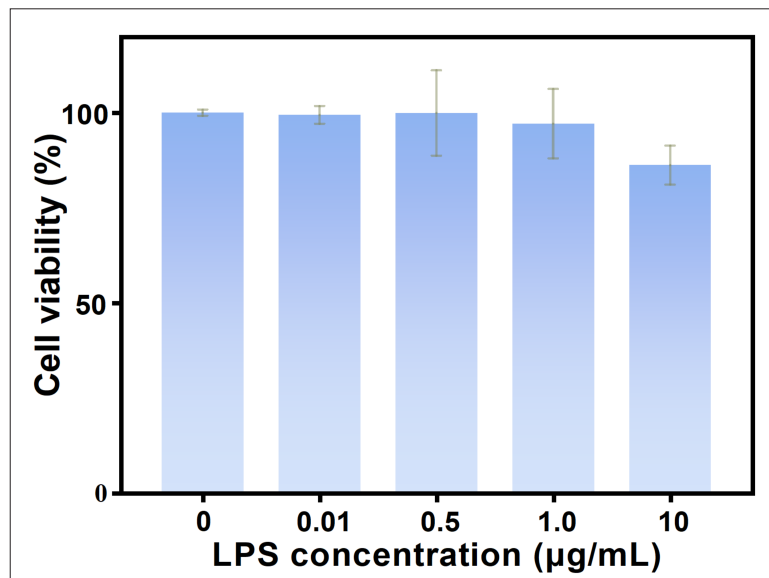


Figure S5. Viability of cells treated with different concentrations of lipopolysaccharide (LPS) over 48 h.

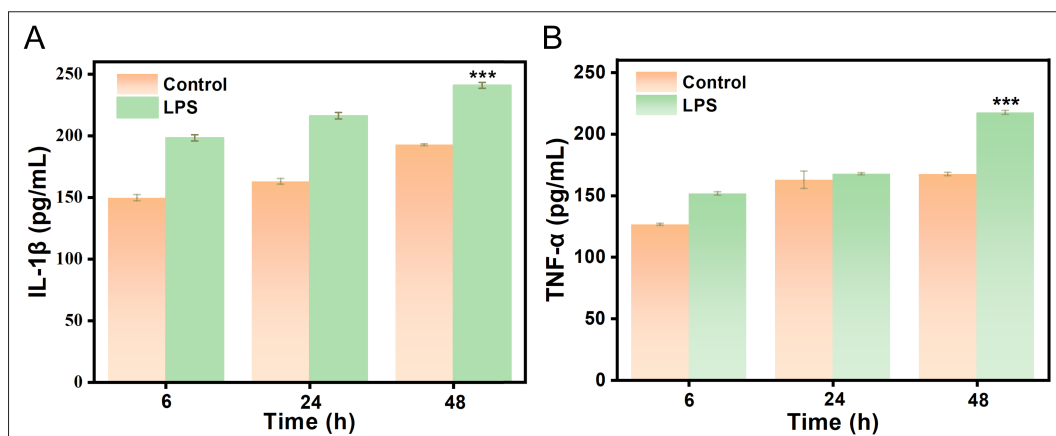


Figure S6. (A) Interleukin (IL)-1 β and (B) tumor necrosis factor-alpha (TNF- α) concentrations induced by lipopolysaccharide (LPS), measured at 6, 24, and 48 h post-induction in the osteoarthritis model ($n = 3$). Note: *** $p < 0.001$.

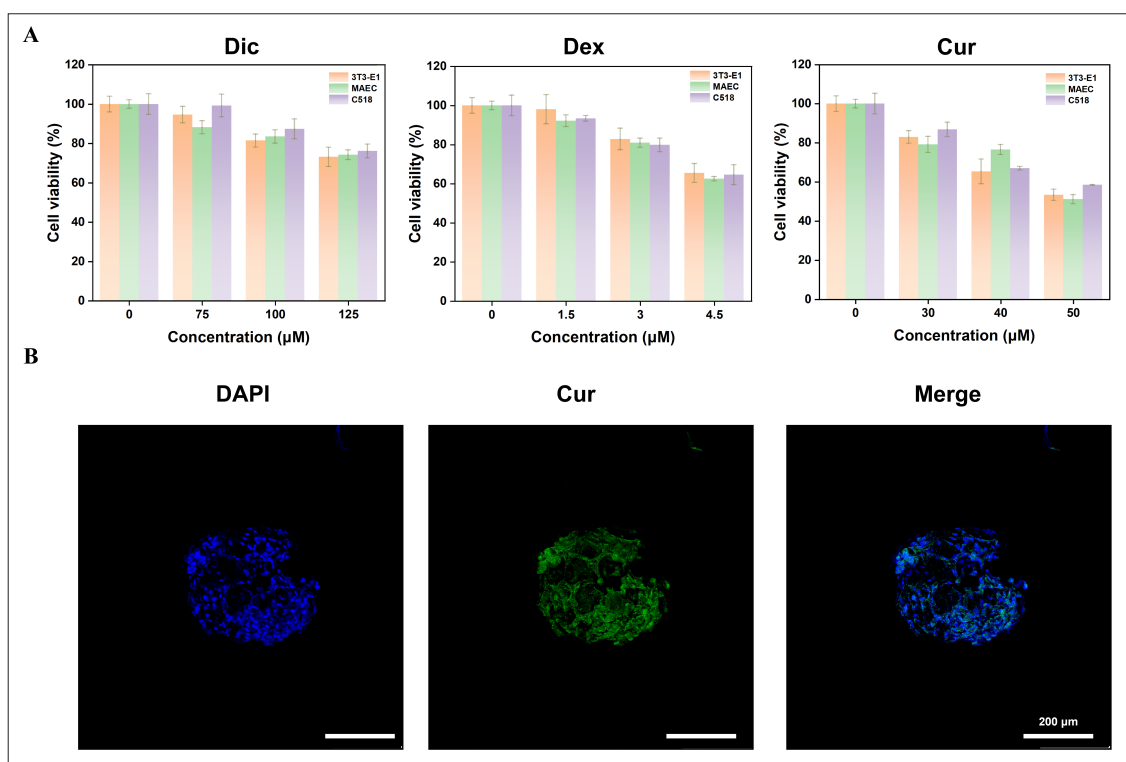


Figure S7. (A) Viability of cells treated with different concentrations of diclofenac (Dic), dexamethasone (Dex), or curcumin (Cur) for 48 h. (B) Cellular uptake in microtissues treated with Cur for 4 h. Scale bar: 200 μ m; magnification: 40 \times .