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Soft tissue-mimicking hydrogel stiffness modulates polarisation of human monocyte-derived macrophages

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Minimising the foreign body response (FBR) to implants remains an unmet clinical challenge. The mechanical properties of biomaterials, particularly stiffness, have been shown to influence macrophage activation and FBR. However, current literature on the effects of material stiffness on macrophage activation presents conflicting results. These inconsistencies may stem from the use of cell lines or murine primary cells, which do not fully represent the behaviour of primary human monocyte-derived macrophages. Additionally, many previous studies have focused on stiffness values that fall outside the physiological range of soft tissues. In this study, we investigated how variations in stiffness affect the activation status of human monocyte-derived macrophages using alginate methacrylate (ALMA) hydrogels. The hydrogel stiffness was tuned within a physiologically relevant range (0.25–4.5 kPa) to mimic the mechanical properties of soft tissues. We found that increasing hydrogel stiffness consistently upregulated pro-inflammatory markers. Specifically, the stiffest hydrogel (ALMA 6% w/v) induced higher secretion of TNF- α and increased the calprotectin-to-mannose surface marker ratio, both hallmarks of inflammatory macrophages. Moreover, macrophages cultured on stiffer hydrogels exhibited a more elongated morphology and greater spreading. These findings provide new insight into how small changes in stiffness, within a soft tissue-relevant range, can modulate the inflammatory behaviour of human macrophages. Our results, together with findings from the literature, suggest that the contradictory data on the effects of stiffness on macrophages may be attributed to other factors, such as viscoelasticity, surface chemistry, and protein absorption, which warrant further investigation.

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Introduction

A recurrent adverse phenomenon following biomaterial implantation is the foreign body reaction (FBR), which often leads to the formation of a fibrous capsule surrounding the implant. This response can compromise implant functionality and therapeutic efficacy.^{1–4} Macrophages play a critical role in the development of FBR. Studies using immune cell knockouts in animal models have identified macrophages as the primary drivers of fibrous capsule formation.⁵ Macrophages are phagocytic cells⁶ that can be broadly classified as either tissue-resident or monocyte-derived. Tissue-resident macrophages are a heterogeneous population, such as Kupffer cells, Langerhans

cells, and microglia, that act as sentinels within their respective tissues.⁷ On the other hand, monocyte-derived macrophages differentiate locally following monocytes migration to sites of injury or infection. Although macrophages have traditionally been classified as either classically-activated (M1) or alternatively-activated (M2), it is now recognised that they exist along a continuum of activation states,⁸ with M1 and M2 representing the prototypical pro- and anti-inflammatory extremes of this spectrum.⁹ An important feature of macrophages is their plasticity, the ability to dynamically shift phenotypes in response to environmental cues.¹⁰

It is known that the mechanical properties of biomaterials, including stiffness, affect macrophage polarisation.^{11,12} Several studies have reported that stiffer substrates promote M1 polarisation. For example, in a study using RAW 264.7 cells, a mouse macrophage cell line, M1 polarisation was significantly reduced on the polyethylene glycol (PEG) hydrogel with a lower modulus (130 kPa), compared to stiffer hydrogels (240 kPa and 840 kPa). Additionally, when these gels were tested *in vivo*, the softest hydrogel resulted in the thinnest layer of macrophages at the implant site.¹³ Similarly, a study using polyacrylamide

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hydrogels showed that the stiff gel (323 kPa) drove THP-1-derived macrophages towards a pro-inflammatory phenotype with impaired phagocytosis, while soft (11 kPa) and medium (88 kPa) gels induced an anti-inflammatory and highly phagocytic phenotype.¹⁴ In another work, methacrylate gelatine (GelMA) hydrogels with different stiffnesses (2, 10 and 29 kPa) were tested using primary mouse bone marrow-derived macrophages. The stiffer hydrogel induced a pro-inflammatory phenotype, increased cell spreading and promoted a more severe *in vivo* inflammatory response.¹⁵ In contrast, the softer GelMA supported greater cell infiltration but resulted in thinner fibrotic capsule formation. Furthermore, another study examined the response of primary mouse bone marrow-derived macrophages on soft (0.3 kPa) and stiff (230 kPa) polyacrylamide hydrogels, showing that soft substrates induced less pro-inflammatory mediators than stiff ones.¹⁶

Conversely, other studies have reported opposite trends, highlighting the complexity of macrophage responses to substrate stiffness. One study on polyacrylamide gels, with stiffnesses ranging from 2.55 kPa to 63.53 kPa, showed that the low-stiffness gel promoted M1 polarisation in mouse bone marrow-derived macrophages, whereas the intermediate stiffness gel induced an anti-inflammatory phenotype.¹⁷ In another study using RGD-coated soft polyvinyl alcohol gels, the softest gel (0.56 kPa) induced a stronger inflammation compared to medium (13.42 kPa) and high stiffness (56.25 kPa) gels in both RAW264.7 cells and mouse bone marrow-derived macrophages. *In vivo* experiment in C57BL/6 mice further showed that softer gels produced a thicker fibrous capsule.¹⁸ Similarly, poly(D,L-lactide-co-caprolactone) scaffolds with low stiffness (<5 kPa) drove NR8383 cells, a semi-adherent rat alveolar macrophage cell line, towards M1 polarisation and chronic inflammation *in vivo*, whereas stiffer scaffolds (>40 kPa) induced M2 polarisation, tissue formation and remodelling in a rat subcutaneous model.¹⁹ Another study examining stiffness from 6 kPa (soft) to 16 kPa (stiff) showed that increasing matrix stiffness enhanced M2 macrophage polarisation in THP-1 cells.²⁰ Additional evidence includes a study using fibronectin-coated polyacrylamide gels (1, 20, and 150 kPa) with murine primary bone marrow-derived macrophages and RAW264.7 cells, which found a pro-inflammatory response on the softest gel.²¹ Similarly, collagen-coated polyacrylamide gels (1 and 10 kPa) in a mouse tumour model demonstrated that increased matrix stiffness led to the accumulation of M2-like macrophages.²²

Only a limited number of studies have investigated the effects of stiffness on human primary macrophages. One study showed that increasing the stiffness of collagen/alginate hydrogels (0.1–20 kPa) promoted M2-like polarisation.²³ Similarly, another work using RGD-modified PEG-based gels found that stiffer (10.3 kPa) substrates drove macrophages towards an anti-inflammatory phenotype.²⁴ In a separate study, human monocyte-derived macrophages cultured on fibronectin-coated polyacrylamide gels (1 to 280 kPa) exhibited greater cell spreading and enhanced formation of actin fibres with increasing stiffness, although their phagocytic capacity was not affected.

Surface markers or cytokine profiling were not quantified in their study.²⁵

Despite extensive research in this field, the effect of substrate stiffness on macrophages is still unclear as findings across studies have often been contradictory. Additionally, most studies have predominantly relied on cell lines or murine primary cells, with limited investigation using primary human monocyte-derived macrophages. These models have significant limitations due to both interspecies differences^{26–29} and the differences between primary cells and cell lines,^{30,31} potentially compromising the translatability of findings to human biology. Another limitation is the use of stiffness ranges that do not reflect the mechanical properties of native soft tissues, which are usually the intended targets in regenerative medicine applications involving hydrogels. Tissues such as the brain, fat, pancreas, kidneys, and liver typically exhibit a Young's modulus below 10 kPa.³² For example, the stiffness of different pancreatic regions ranges between 1.15 ± 0.17 kPa and 2.09 ± 0.33 .^{33,34} In pathological conditions, such as pancreatic ductal adenocarcinoma³⁵ and chronic pancreatitis,³⁶ the stiffness increases to approximately 2.89–4.3 kPa, reaching values as high as 5.8 kPa in long-term chronic pancreatitis.

To have a better understanding on how stiffness affects macrophage polarisation, we investigated the activation status of human monocyte-derived macrophages on methacrylate alginate (ALMA) hydrogels with mechanical properties mimicking soft tissues. Alginate-based hydrogels due to their low cost, low toxicity, abundance, and ease of chemical modification^{37–40} have been explored in the context of immunomodulatory biomaterials.⁴¹ Mechanical tuneability and chemical versatility make ALMA a valuable material for investigating macrophage responses in the context of FBR. However, despite extensive research, an alginate-based material that fully prevent FBR have yet to be achieved, representing a key barrier to a successful clinical translation.

The mechanical properties of the hydrogels were determined using rheological testing. Monocytes were isolated from healthy blood donors and cultured on ALMA hydrogels for 6 days. Macrophage phenotype was assessed using a combination of techniques, including morphological evaluation, surface marker expression and cytokine profiling. We observed that increasing hydrogel stiffness promoted a pro-inflammatory macrophage phenotype, as evidenced by elevated TNF- α secretion, an increased calprotectin-to-mannose receptor ratio, and a more elongated cell morphology.

Materials and methods

Materials

Alginate methacrylate (degree of methacrylation: 20%–40%), 2-hydroxy-4'-(2-hydroxyethoxy)-2-methylpropiophenone (Irgacure D-2959), 3-(trimethoxysilyl)propyl methacrylate, toluene, PBS, Tween20, RPMI-1640, fetal bovine serum (FBS), penicillin-streptomycin, L-glutamine, glycine, trypan blue solution, Macrophage Colony-Stimulating Factor (M-CSF), Granulocyte-Macrophage



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eV of pass energy, step size of 0.5 eV, and 1200 s of scan time. Parameters for high resolution scan acquisition were as follows: 20 eV of pass energy, step size of 0.1 eV, and 1200 s of scan time. Binding energies were measured over a range of 0–1300 eV. All spectra were analysed in CasaXPS constraining the Full Width at Half Maximum (FWHM) to the same value for all deconvoluted spectral peaks for the same element.

Monocyte isolation and differentiation

Buffy coats from healthy donors were obtained from the National Blood Service (Sheffield, UK). All experiments were conducted in compliance with the Declaration of Helsinki and the Human Tissue Act (2004), following ethics committee approval (2009/D055 Research Ethics Committee, Faculty of Medicine and Health Sciences, University of Nottingham). Informed consent was obtained from all donors prior to sample collection. Monocytes were isolated through positive selection (CD14 magnetic beads), using MACS magnetic cell separation system. Isolated monocytes were prepared to a cell density of 1×10^6 cell per mL in RPMI-1640 medium (10% FBS, 1% L-glutamine, 1% streptomycin and penicillin, 10 ng mL⁻¹ M-CSF) and seeded on ALMA hydrogel. To ensure cells were only seeded on the hydrogels, non-cultured-treated plates were used, and media was changed after 24 h to remove floating monocytes. Cells were incubated in a humidified incubator maintained at 37 °C and 5% CO₂ for 6 days (37 °C, 5% CO₂) until differentiation was completed; fresh media was added on day 3. Media was supplemented with M-CSF (10 ng mL⁻¹) on day 1 and 3 to induce the differentiation into naïve macrophages. As a reference, monocytes were also cultured on tissue culture plastic at the same cell density and conditions.⁴⁴

Live/dead viability assay

On day 6, media was removed, and macrophages were incubated with PBS containing a mixture of green-fluorescent calcein-AM (1:2000) and red-fluorescent ethidium homodimer-1 (1:500) for 30 minutes at 37 °C and 5% CO₂. Cells were imaged using an Olympus IX51 fluorescence microscope, with 10× objective.

Cytotoxicity measurement by using the ToxiLight assay

20 µL of culture supernatant was collected and added to a white assay plate. 100 µL of adenylate kinase detection reagent was added and incubated at room temperature (RT) for 5 minutes. Luminescence was read using a plate reader (Promega GloMax® explorer). A negative (M0 macrophages cultured on TCP) and positive (M0 macrophages cultured on TCP and lysed after 6 days of culture using the Toxilight™ 100% lysis reagent) were included.

Endotoxin quantification assay

ALMA 6% hydrogels were incubated with PBS (1.5 mL) in humidified incubator maintained at 37 °C and 5% CO₂ for 6 days (37 °C, 5% CO₂) to simulate cell culture conditions. Endotoxin standard solutions (0.1–0.01 EU per mL) and samples (50 µL) were added to 96-well plate and incubated

with amoebocyte lysate solution (50 µL) for 25 minutes at 37 °C. Chromogenic substrate solution (100 mL) was added and incubated for 6 minutes at 37 °C. Acetic acid 25% v/v (50 µL) was added as stop solution and absorbance was read at 405 nm using a plate reader (Promega GloMax® explorer). The endotoxin concentration in each condition was calculated using a 4-point standard curve.

Immunostaining of macrophages

Macrophages were fixed by incubation in paraformaldehyde 4% v/v (in PBS) for 15 min on day 1, day 3, and day 6. On day 1 and 3, cells were washed 3 times with 0.2% Tween-20 in PBS (0.2% v/v) followed by a blocking step with BSA (3% w/v) and glycine (1%) in PBS. Cells were washed 3 times with 0.2% Tween-20 in PBS and incubated with Phalloidin-iFluor 647 (1:1000) and DAPI (1:5000) in PBS (BSA 1% w/v) for 1 hour at RT. On day 6, cells were washed 3 times with 0.2% Tween-20 in PBS and two blocking steps were subsequently performed, firstly with BSA (3% w/v) and glycine (1%) in PBS, then with goat serum (5%) in PBS. Macrophages were washed 3 times with 0.2% Tween-20 in PBS and incubated with anti-human calprotectin mouse immunoglobulin G1 (IgG1) antibody (2 mg mL⁻¹) and anti-human CD206 (MR) rabbit IgG1 primary antibody (1 mg mL⁻¹) overnight at 4 °C. Cells were washed 3 times with 0.2% Tween-20 in PBS and incubated with AlexaFluor-488 goat anti-mouse IgG (8 mg mL⁻¹) and Rhodamine Red goat anti-rabbit IgG secondary antibody (8 mg mL⁻¹) for 1 hour at RT. Cells were further incubated with Phalloidin-iFluor 594 (1:1000) and DAPI (1:5000) in PBS (BSA 1% w/v) for 1 hour at RT. Cells were washed 3 times with PBS and imaged using a Leica TCS SPE confocal microscope.⁴⁵ Image analysis was performed using CellProfiler software (<https://www.cellprofiler.org/>) to quantify the cell number, the eccentricity, the cell area, and the fluorescent signal corresponding to calprotectin and mannose receptor markers.

Enzyme-linked immunosorbent assay (ELISA)

For TNF-α, IL-6, IL-10, and CCL18, 384-plates were coated with 25 µL capture antibody (TNF-α: 4 µg mL⁻¹, IL-6, IL-10, and CCL18: 2 µg mL⁻¹) overnight on a rocker at RT. ELISA plates were washed 3 times with PBS containing 0.05% tween-20 (100 µL) and blocked with 75 µL BSA 1% w/v for 1 hour at RT. Supernatant was thawed and brought to RT. Plates were washed 3 times with PBS containing 0.05% tween-20 (100 µL) and incubated with 25 µL supernatant and standard solutions (TNF-α: 1000–15.6 pg mL⁻¹, IL-6: 600–9.38 pg mL⁻¹, IL-10: 2000–31.2 pg mL⁻¹, and CCL18: 500–7.81 pg mL⁻¹) for 2 hours on a rocker at RT. Plates were washed 3 times with PBS containing 0.05% tween-20 (100 µL) and incubated with 25 µL detection antibody (TNF-α, IL-6, and IL-10: 50 ng mL⁻¹, CCL18: 100 ng mL⁻¹) for 2 hours on a rocker at RT. Plates were washed 3 times with PBS containing 0.05% tween-20 (100 µL) and incubated with 25 µL streptavidin-HRP conjugate (40-fold diluted) for 20 minutes while protected from light on a rocker at RT. Plates were washed 3 times with PBS containing 0.05% tween-20 (100 µL) and incubated with 25 µL TMB substrate for



Statistical analysis

Results & discussion

Protein adsorption and surface chemistry were assessed by XPS (Fig. 1E). Analysis of the integrated N 1s peaks, which

The mechanical properties of ALMA hydrogels were determined using rheological assessments after reaching equilibrium swelling. Frequency sweeps (Fig. 2A) were carried out within the LVE, previously determined through amplitude sweeps, to quantify the storage (G') and loss (G'') moduli (Fig. 2B), and the complex viscosities (Fig. 2C) of the ALMA hydrogels. While ALMA 2% and 4% did not show a significant difference in their G' (257.9 Pa and 1195.7 Pa, respectively) and G'' values (33.8 Pa and 35.2 Pa, respectively), the ALMA 6% hydrogel exhibited significantly higher moduli (G' value of 4426.6 Pa and G'' value of 175.3 Pa) compared to the two softer hydrogels. Together, these three compositions span stiffness values across the physiologically relevant range of soft tissues – from very soft tissues, such as the lens (0.2–0.8 kPa), to intermediate tissues, including the thyroid (1.3 kPa), pancreas (1.1 kPa), lung (1.5 kPa), adipose tissue (1.6 kPa), liver (2 kPa), and brain (1 kPa), and to relatively stiffer organs such as the kidney (4–5 kPa)³² – thus enabling investigation of cell responses across a representative mechanical spectrum. Stress relaxation was also investigated as many studies have shown the effect of viscoelasticity on cell responses.^{49–51} All three hydrogels showed similar stress relaxation profiles (Fig. 2D), confirming that observed differences in macrophage activation status were due to stiffness rather than viscoelasticity.

To provide an overview of the experimental strategy used to investigate macrophage responses to hydrogel stiffness, a schematic representation is shown in Fig. 3.

A live/dead assay (Fig. 4A) was performed to assess the toxicity of ALMA hydrogels. The data showed that macrophages remained viable after 6 days of culture across all hydrogels, suggesting comparable biocompatibility. The high cell viability was also supported by the ToxiLight assay which showed no significant differences in metabolic activity between macrophages cultured on the hydrogels and those cultured on TCP controls (Fig. 4B). Together, these results demonstrated the suitability of ALMA hydrogels as biocompatible substrates for macrophage differentiation and culture.

The expression levels of calprotectin (pro-inflammation marker) and mannose receptor (anti-inflammatory markers) were quantified by immunofluorescent staining and image analysis, in line with our previous works⁵² (Fig. 5A). To ensure cross-sample comparisons, the number of imaged cells was quantified across the different hydrogels. No significant differ-

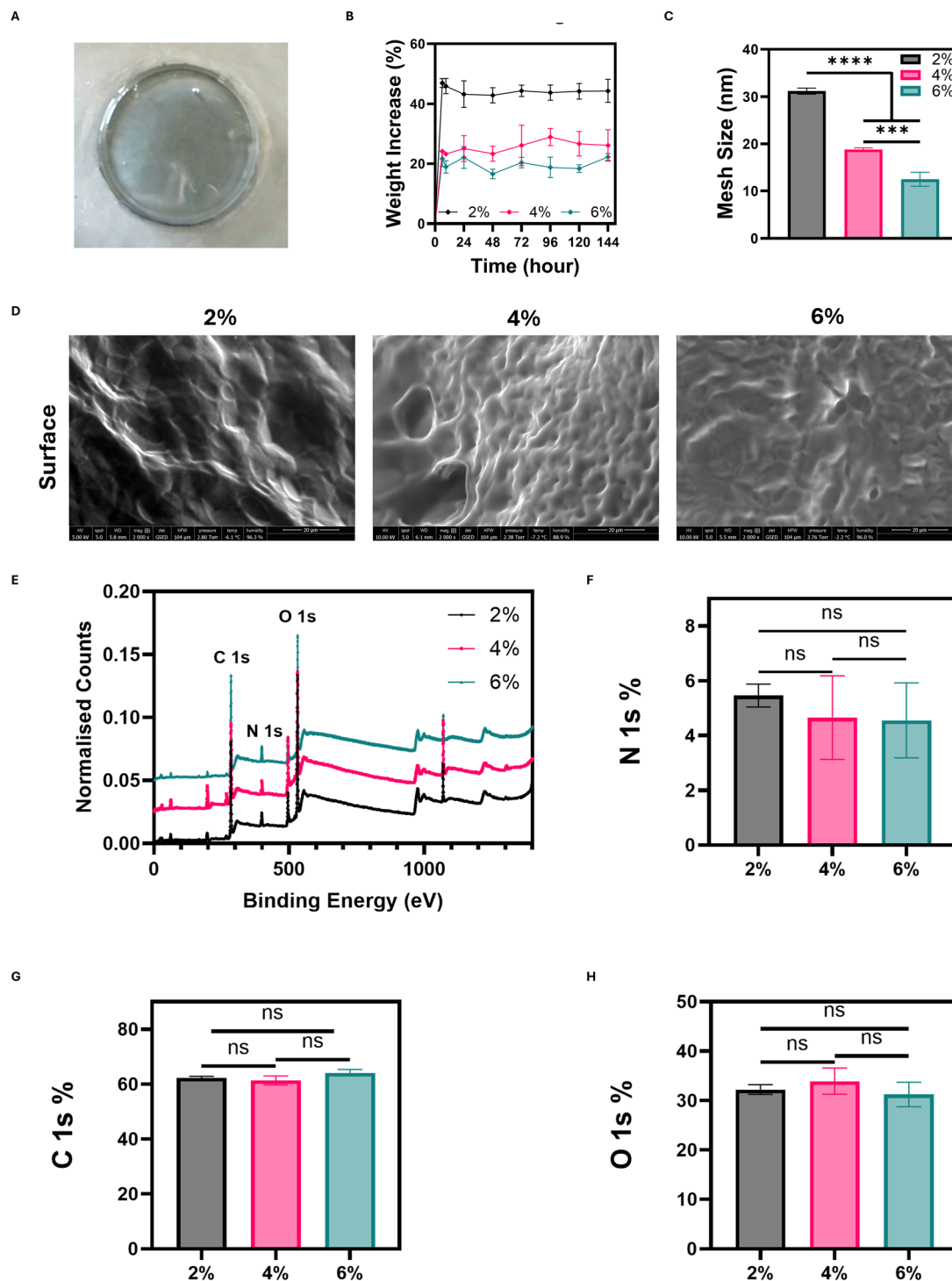


Fig. 1 Swelling, mesh size, surface morphology and surface adsorbed proteins. (A) Gross view of an ALMA hydrogel disc. (B) Swelling equilibrium and (C) mesh size of ALMA hydrogels at 2%, 4%, and 6% w/v calculated by using the rheological data and the rubber elasticity theory. (D) Representative environmental scanning electron microscopy (ESEM) images of the hydrogel surfaces. (E) XPS wide-scan spectra of ALMA hydrogels following 24-hour incubation in serum-containing culture medium. Quantification of (F) N 1s, (G) C 1s, and (H) O 1s peaks.

ences in cell number were detected (Fig. 5B). The calprotectin-to-mannose expression ratio was used as a surrogate for assessing the macrophage activation status (Fig. 5C). There was no significant difference in the calprotectin-to-MR ratio between

macrophages cultured on ALMA 2% and 4%. Macrophages cultured on 2% and 4% ALMA expressed more MR relative to calprotectin as the ratios were below one. In contrast, calprotectin was expressed significantly more (*ca.* 6-fold) in macrophages



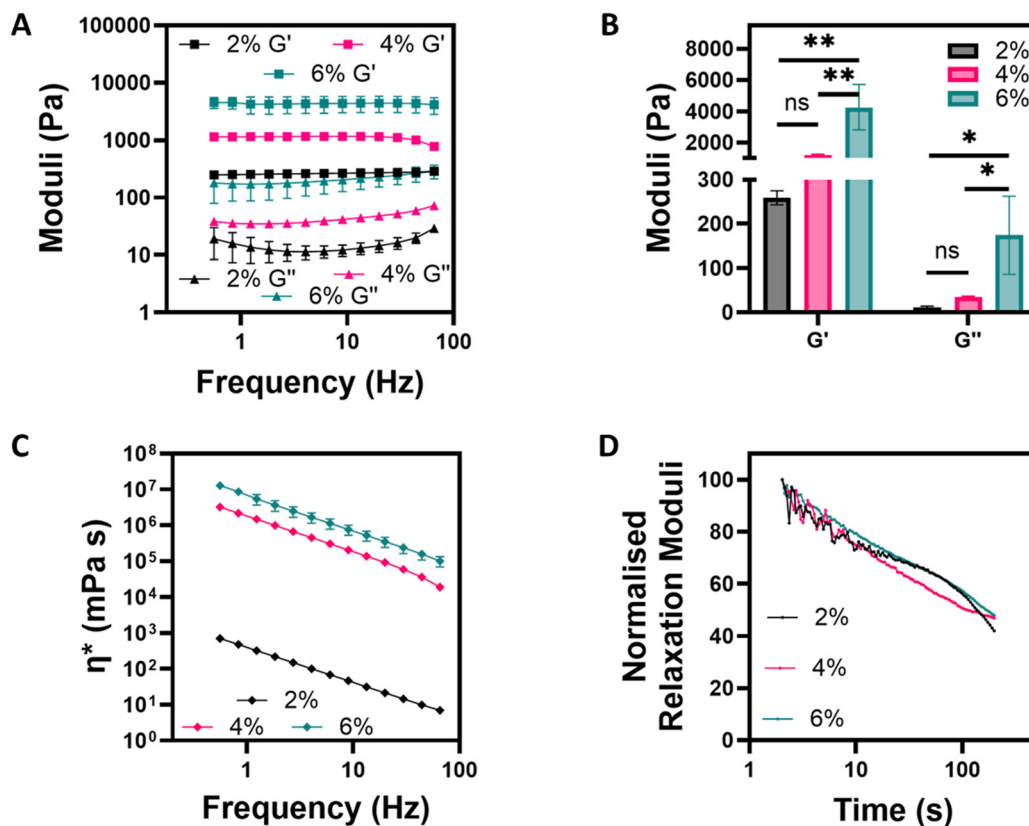


Fig. 2 Rheological characterisation of methacrylate alginate. (A) Frequency sweeps, (B) storage (G') and loss (G'') moduli, (C) complex viscosity, and (D) normalised stress relaxation of ALMA hydrogels. Frequency sweeps and stress relaxation were performed within LVE region (5% strain).

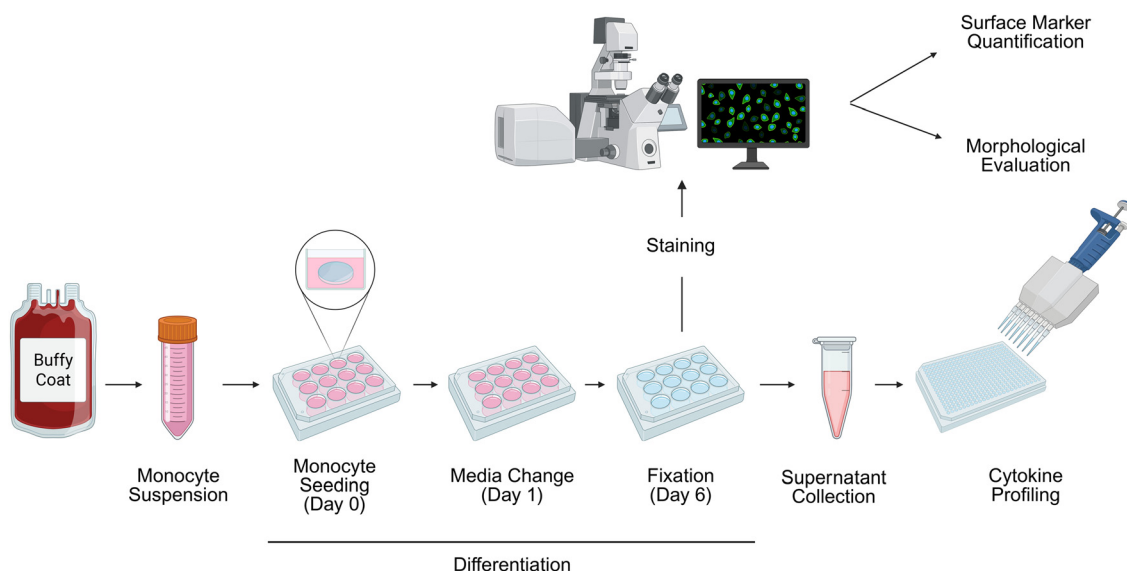


Fig. 3 Overview of the experimental workflow. Monocyte isolation from healthy blood donor, differentiation and characterisation of morphology, surface markers and cytokine profiling of macrophages.

that were cultured on ALMA 6%. This suggested that a significant increase in the storage modulus (G') promoted a shift towards a more pro-inflammatory, M1-like phenotype.

To further characterise macrophage activation in response to different stiffnesses, monocytes were stained for nuclei and F-actin to monitor their morphology over the 6-day culture



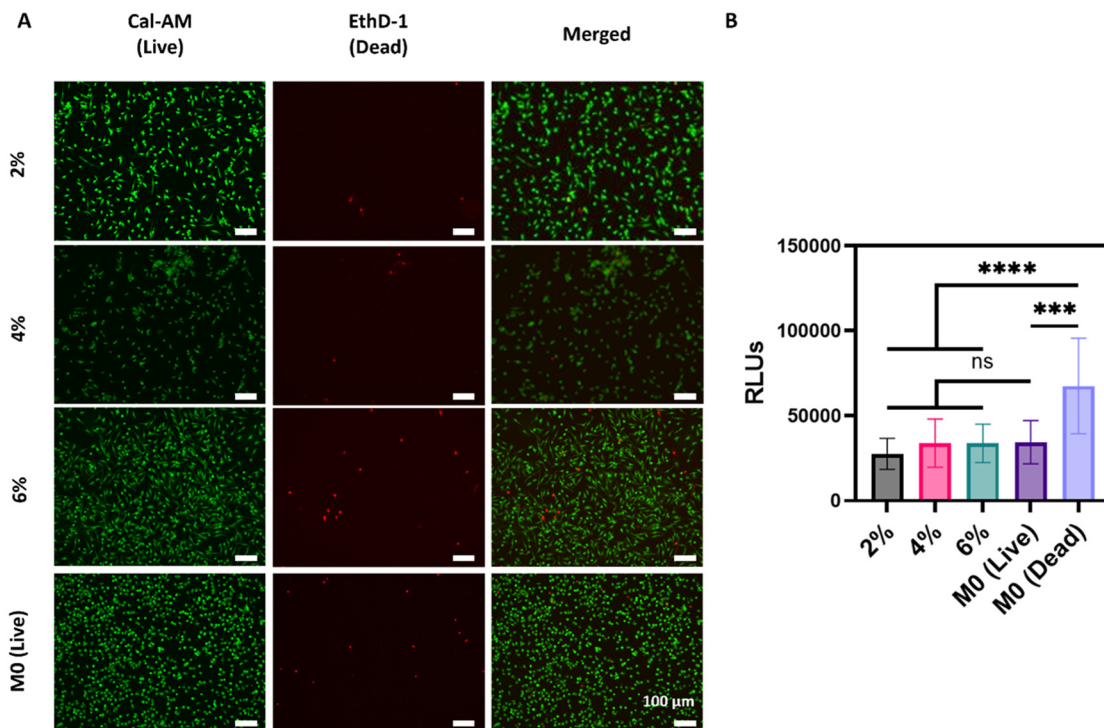


Fig. 4 Human primary macrophage viability on methacrylate alginate. (A) Fluorescent microscopy images of macrophages stained for calcein-AM (green – live cells) and ethidium homodimer-1 (red – dead cells) at day 6. Scale bar: 100 μm. (B) ToxiLight assay on macrophages cultured for 6 days on ALMA 2%, 4%, and 6%. Positive control (M0 (dead)) is purposely lysed macrophages. M0 macrophages cultured on tissue culture plastic (M0 (live)) were used as negative controls.

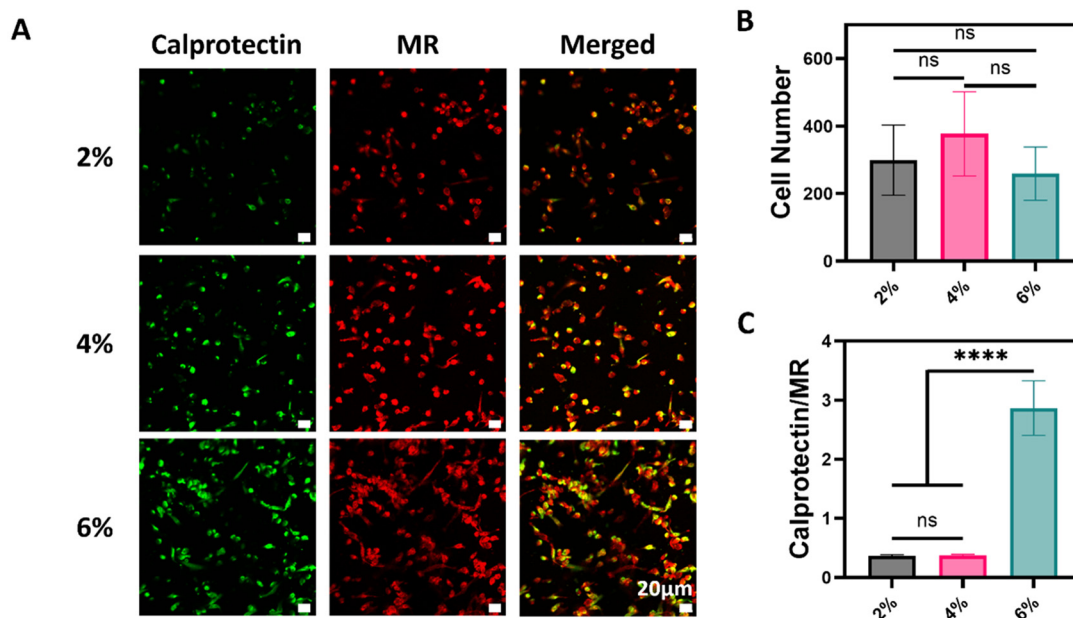
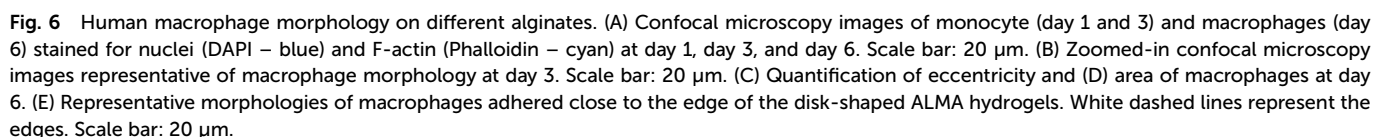


Fig. 5 Human macrophage polarisation characterised by surface markers on different ALMA hydrogels. (A) Confocal microscopy images of macrophages stained for pro- (calprotectin – green) and anti- (mannose receptor – red) inflammatory surface markers at day 6. Scale bar: 20 μm. (B) Quantification of cell numbers cultured on ALMA hydrogels at day 6. (C) Ratio between calprotectin and MR fluorescent signals.

period. As shown in Fig. 6A and B, cells cultured on ALMA 6% presented a more elongated morphology starting from day 3, in contrast to those on the softer hydrogels, which maintained

a rounder shape. To quantitatively compare cell morphologies, parameters including cell eccentricity and area were measured. Eccentricity was used to quantify cell elongation, where a value





To further determine the phenotype of macrophages on different ALMA hydrogels, pro- (TNF- α , IL-6) and anti- (IL-10, CCL18) inflammatory cytokines were quantified by using sandwich ELISA (Fig. 7). TNF- α secreted from macrophages cultured on ALMA 6% was significantly higher compared to cells on ALMA 2% and 4%, suggesting a shift towards a pro-inflammatory phenotype on the stiffer substrate. Although no significant difference was observed for IL-6, a trend of increasing secretion with increasing stiffness was observed. In terms of anti-inflammatory cytokines, IL-10 secretion was significantly higher from macrophages cultured on the softest ALMA 2%.

It is known that high endotoxin levels can induce pro-inflammatory polarisation in macrophages.⁵³ To exclude the possibility that changes in cell behaviour were a consequence of high endotoxin levels, ALMA 6% was prepared and incubated in PBS, simulating the cell culture conditions. After 6 days, endotoxins were quantified and data showed that their level was below the accepted limit of 0.1 EU per mL for *in vitro* immunogenicity assays, which excluded the possibility of the influence of endotoxins on macrophage activation status (Fig. S3).

The conflicting reports on macrophage responses to substrate stiffness, along with the relatively high stiffness ranges commonly investigated in the literature, prompted us to study human macrophages on soft hydrogels. We prepared hydrogels with different mechanical properties by varying ALMA concentrations from 2% to 6% w/v. Our results showed that even a modest increase (in absolute value) from ~ 0.25 kPa to ~ 4.5 kPa led to significant changes in human monocyte-derived macrophages. Our results demonstrated that cells cultured on the stiffest substrate (ALMA 6%, ~ 4.5 kPa) showed a more elongated morphology as early as day 3. This feature was also

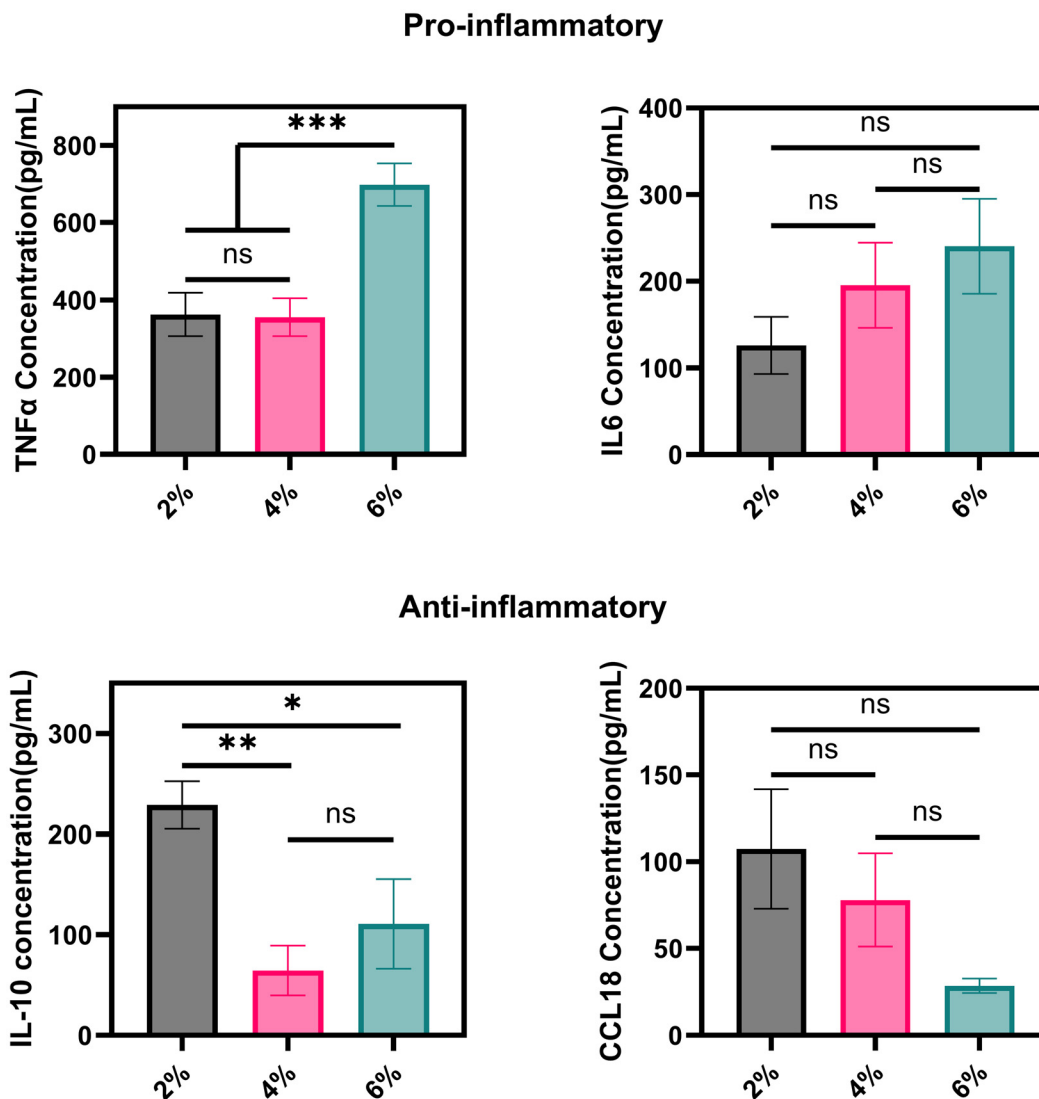


Fig. 7 Quantification of pro- (TNF- α , IL-6) and anti- (IL-10, CCL18) inflammatory cytokines secreted by macrophages at day 6.

associated with a higher calprotectin-to-mannose receptor expression ratio, and a significant increase in pro-inflammatory cytokine release, particularly TNF- α . A stiffness-dependent increase in IL-6 was also observed when moving from soft (ALMA 2%) to stiff (ALMA 6%) hydrogels.

The stiffness-dependent trend observed in our study aligns with several previous reports in which increased stiffness promoted a shift towards M1-like macrophage phenotype. Blakney *et al.* reported increased TNF- α , IL-1 β , and IL-6 expression in macrophages cultured on stiff PEG gels (840 kPa),¹³ while Sridharan *et al.* found greater cell spreading and upregulation of two pro-inflammatory chemokines, such as CXCL11 and CCL20, on stiff polyacrylamide gels (323 kPa).¹⁴ In both studies, softer gels (>11 kPa) promoted an anti-inflammatory phenotype. Similarly, Zhuang *et al.* showed that increasing GelMA stiffness (2–29 kPa) enhanced inflammatory signalling and M1 polarisation.¹⁵ Our findings are also consistent with

those of Previtera *et al.*, who showed reduced pro-inflammatory mediator release on soft gels (0.3 kPa) compared to stiff ones (230 kPa).¹⁶ Although these reported findings align with our data, it is important to note that most of the previously defined “soft” substrates are still 2–3 orders of magnitude stiffer than our ALMA 2% hydrogel (~0.25 kPa), with the exception of the soft gel used by Previtera *et al.* These reported soft hydrogels are even at least 2-fold stiffer than our stiffest gel (ALMA 6%, ~4.5 kPa). Notably, our findings extend and expand the existing knowledge by demonstrating that stiffness-driven M1 activation is not limited to high-stiffness substrates (>10 kPa) but can also arise within the low-kilopascal range. This is particularly relevant in the context of soft tissues, both in healthy and fibrotic conditions. For example, in the liver and brain, stiffness can increase from 0.3–1 kPa under healthy conditions to >25 kPa during fibrosis.^{54,55} These results highlight the need for comparative studies which focus on the low-



kPa range to elucidate how subtle changes in the mechanical properties of soft tissues influence macrophage behaviour.

Several studies reported an opposite trend to what we and others observed, showing a pro-inflammatory phenotype associated with softer gels.^{18–22} Such discrepancies might depend on other factors than stiffness alone. In fact, stiffness is not the only mechanical property of hydrogels. Viscoelasticity is another key feature⁵⁶ and changing the degree of crosslinking in a 3D polymer network can alter the viscoelastic properties of hydrogels.^{57–59} Viscoelasticity has been shown to modulate mechano-sensitive molecular pathways in various cell types,⁵¹ such as fibroblasts and cancer cells,⁵⁹ hepatocytes,⁶⁰ and human induced pluripotent stem cells.⁶¹ Kalashnikov N. *et al.* have directly addressed how viscoelastic cues modulate THP-1 macrophage morphology and functions, revealing that more viscous substrates induce a rounder morphology and a reduced phagocytic activity.⁴⁹ Despite this, studies examining the role of viscoelasticity in macrophage behaviour remain scarce. Further research is needed to elucidate how viscoelastic properties affect macrophages, particularly in the context of FBR.

Another factor that may explain the divergent results is the source of macrophages used in different studies.⁶² It is worth noting that most studies used murine bone marrow-derived macrophages, RAW264.7 cells¹⁸ or NR8383 rat alveolar macrophages,¹⁹ all of which may exhibit different sensitivities and responses to mechanical cues compared to human macrophages. Only a few studies have used primary monocyte-derived macrophages, and interestingly they showed trends opposite to ours. Guenther *et al.* showed that increased stiffness led to a M2-like phenotype, with macrophages on stiffer substrates expressing higher levels of CD206 and MMP13.²³ However, their study involved coculture with cancer cells, introducing additional variables such as tumour-macrophage crosstalk that can independently affect macrophage phenotype. Furthermore, the use of a 3D culture system in their study adds complexity, as dimensionality is also known to impact macrophage behaviour.⁶³ Similarly, Scott *et al.* reported that human macrophages cultured on stiffer RGD-modified-PEG-based gels (10.3 kPa) displayed a shift towards an anti-inflammatory phenotype.²⁴ Adlerz *et al.* also studied human monocyte-derived macrophages on fibronectin-coated polyacrylamide gels of varying stiffness.²⁵ While their findings addressed morphological changes, they did not include key phenotypic indicators such as surface marker expression or cytokine secretion, making it difficult to determine whether substrate stiffness promoted a pro- or anti-inflammatory state.

Surface chemistry plays a critical role in modulating cell-biomaterial interactions, primarily by influencing the adsorption of proteins from serum or culture media onto the substrate surface.⁶⁴ The amount, composition, and conformation of the adsorbed protein layer vary depending on the material's chemical properties, and this layer critically determines the presentation of adhesive motifs to cells. Hydrogels can also be functionalized with peptides, such as RGD-containing sequences,²⁴ or extracellular matrix proteins, such as fibronec-

tin or collagen,^{21,25} that favour cell attachment, promoting a stronger integrin engagement compared to unmodified hydrogels, which rely solely on non-specifically adsorbed proteins. These variations directly affect how integrins engage with the substrate, as integrin-based adhesion complexes serve as key mechano-transduction bridges between the extracellular environment and the cytoskeleton.⁶⁵ As a result, variations in protein adsorption and differences in surface densities of binding motifs can influence cell adhesion and mechano-transduction pathways, independently from the mechanical properties of the gels. Ultimately, these changes can affect gene expression and functional responses in cells, including macrophages, as demonstrated in previous studies.^{66–69} This may partly explain the divergent polarisation outcomes observed across different studies using hydrogels with comparable stiffness but different surface chemistries.

Other features, such as surface roughness and mesh size, can influence macrophage responses, as previously reported in the literature.^{70,71} However, our data indicate that their contribution is minimal in our system, with stiffness emerging as the dominant factor shaping cellular behaviour. For example, although ALMA 4% and 6% exhibited comparable roughness but different stiffnesses, macrophages cultured on ALMA 6% displayed significantly higher calprotectin/MR ratio, greater spreading, and increased TNF- α release. These effects can therefore be attributed primarily to stiffness, as topographical differences were negligible. Conversely, while ALMA 2% and 4% hydrogels differed significantly in both roughness and mesh sizes, their storage moduli (G') were not significantly different, and macrophage responses – including calprotectin/MR ratio, eccentricity, cell spreading, and TNF- α , IL-6, and CCL18 release – remained largely similar. Taken together, these findings suggest that nanoscale variations in roughness and mesh size exert little influence on macrophage behaviour in this system, whereas stiffness consistently acts as the key mechanical determinant of macrophage phenotype.

Conclusions

In this study, we show that the stiffness of ALMA hydrogels significantly influences the behaviour of human primary macrophages. Specifically, stiffer hydrogels (~4.5 kPa) promoted a pro-inflammatory phenotype. This was evidenced by the elongated morphology observed on the stiffest hydrogel (ALMA 6%) and a higher calprotectin-to-mannose receptor ratio, indicating a stiffness-dependent, mechano-sensitive shift in macrophage behaviour. These findings were further supported by cytokine profiling, which showed an elevated secretion of TNF- α and IL-6 on stiffer hydrogels compared to softer substrates (~258 Pa). Importantly, this pro-inflammatory response was observed even within the range of soft tissue-relevant stiffness, highlighting the sensitivity of macrophages to subtle mechanical variations. Future studies should explore additional material properties such as viscoelasticity, surface chemistry, and protein adsorption to further elucidate the



complex interactions between biomaterial mechanics and macrophage polarisation. A deeper understanding of how bio-mechanical properties interface with surface chemistry and protein presentation will guide the rational design of immunomodulatory biomaterials.

Author contributions

Conceptualisation: C. C., J. Y., A. M. G. Data collection: C. C. Writing and reviewing of manuscript: C. C., J. Y., A. M. G. All authors approved the final version of the manuscript.

Conflicts of interest

The authors declare no conflict of interest.

Data availability

Data for this article are available at Research Data Repository (University of Nottingham) at <https://rdmc.nottingham.ac.uk/handle/internal/12086>.

Supplementary information (SI), including amplitude sweeps (Fig. S1) and roughness (Fig. S2) of ALMA 2%, 4% and 6%, and endotoxin quantification (Fig. S3), is available at <https://doi.org/10.1039/d5bm01187f>.

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