

# In-vitro viability of laser clad Fe-based metallic glass as a promising bioactive material for improved osseointegration of orthopedic implants

Mahmoud Z. Ibrahim<sup>a,b,\*</sup>, Ahmed Halilu<sup>c</sup>, Ahmed A.D. Sarhan<sup>d,e,\*\*</sup>, T.Y. Kuo<sup>f</sup>, Farazila Yusuf<sup>b</sup>, M.O. Shaikh<sup>g</sup>, M. Hamdi<sup>b,\*\*\*</sup>

<sup>a</sup> Department of Mechanical Engineering, Faculty of Engineering, Ain Shams University, Cairo, 11517, Egypt

<sup>b</sup> Advanced Manufacturing & Material Processing (AMMP) Research Centre, Department of Mechanical Engineering, Faculty of Engineering, University of Malaya, Kuala Lumpur, 50603, Malaysia

<sup>c</sup> Department of Chemical Engineering, Faculty of Engineering, University of Malaya, Kuala Lumpur, 50603, Malaysia

<sup>d</sup> Department of Mechanical Engineering, King Fahd University of Petroleum and Minerals, Dhahran, 31261, Saudi Arabia

<sup>e</sup> Interdisciplinary Research Center for Intelligent Manufacturing & Robotics, King Fahd University of Petroleum and Minerals, Dhahran 31261, Saudi Arabia

<sup>f</sup> Department of Mechanical Engineering, Southern Taiwan University of Science and Technology, Tainan 701, Taiwan, R.O.C

<sup>g</sup> Sustainability Science and Engineering Program, Tunghai University, Taichung 407, Taiwan, R.O.C

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## ABSTRACT

The commonly used metallic biomaterials fail to prove durability for orthopedics due to their lack of biocompatibility and poor bioactivity which weakens the bonding to bones. Metallic glasses (MGs) have attracted attention as an alternative biomaterial for orthopedics owing to their superior mechanical properties and acceptable biocompatibility. Nevertheless, their uses are limited due to geometrical constraints and brittleness. In this research, the in-vitro bioactivity of laser clad FeCrMoCB MG on nickel-free stainless-steel was investigated. The proposed MG coating exhibited a remarkable in-vitro bioactivity behavior without prior treatment after immersion in simulated body fluid which is a key factor for better osseointegration. The surface morphology showed that apatite nucleated from the first day and completely covered the surface after 21 days. The energy dispersive spectroscopy spectra showed an increase in the Ca/P ratio from 0.51 at 3 days to 1.61 at 21 days, thus approaching the stoichiometric ratio of bone apatite. The infra-red examination revealed the existence of  $\text{Ca}^{+2}$ ,  $\text{PO}_4^{-2}$  and  $\text{OH}^-$  indicating the nucleation of brushite and B-type apatite. Additionally, the X-ray diffraction examination revealed the existence of amorphous and nanocrystalline calcium phosphates. These results show the potential of FeCrMoCB MGs as a promising bioactive coating for excellent osseointegration of metallic implants with bone tissue.

## Abbreviations

MG	Metallic glass
SBF	Simulated body fluid
XRD	X-ray diffraction
SEM	Scanning electron microscope
EDS	Energy-dispersive spectroscopy
FTIR	Fourier-Transform infra-red
CL	Coating layer
DI	deionized

\* Corresponding author.

\*\* Corresponding author.

\*\*\* Corresponding author.

E-mail addresses: [mahmoud.zakaria@eng.asu.edu.eg](mailto:mahmoud.zakaria@eng.asu.edu.eg) (M.Z. Ibrahim), [ahsarhan@kfupm.edu.sa](mailto:ahsarhan@kfupm.edu.sa) (A.A.D. Sarhan), [hamdi@um.edu.my](mailto:hamdi@um.edu.my) (M. Hamdi).

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## 1. Introduction

Bioactivity describes the interaction of a biomaterial with bone-tissue upon exposure, i.e., the initiation and formation of apatite-like layer at the biomaterial-living tissue interface. It also describes the ability of the implant material to set up a chemical bonding with the host tissue. Thus, bioactivity can be a key property to promote the osseointegration which is vital for prolonging the durability of implanted device and reduce the possibility of implant separation [1–4].

Biomaterials can be metals, bioceramics, and biopolymers. Recently, metals and their alloys have been widely applied in biomedical implants

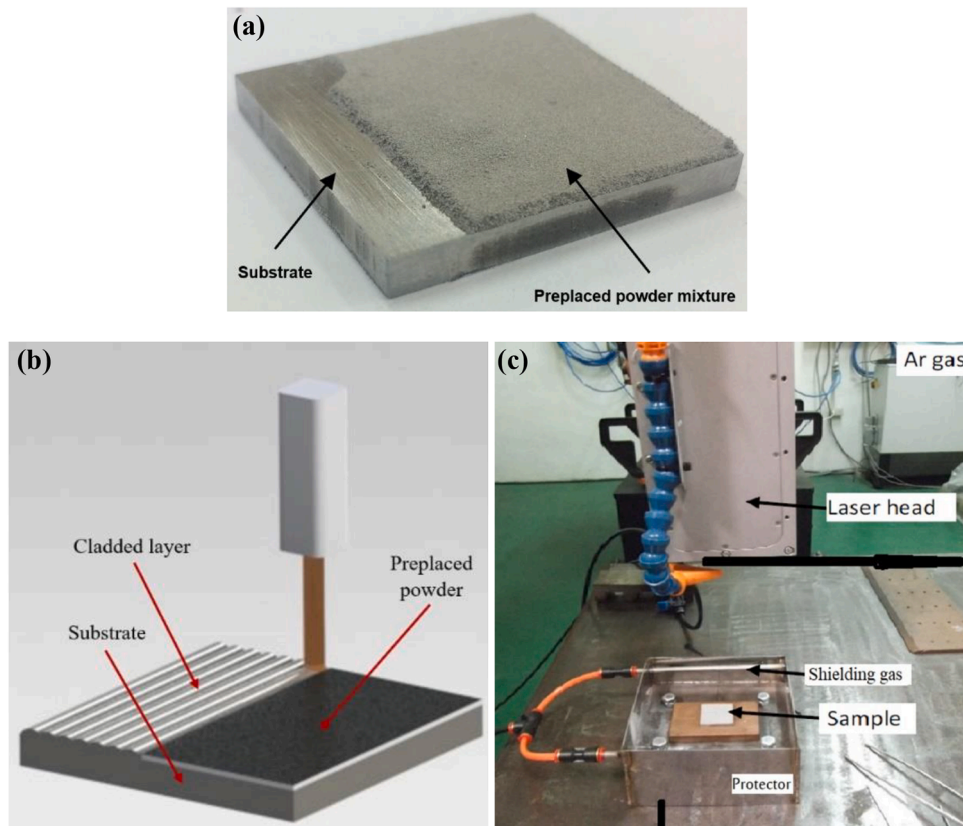


Fig. 1. (a) Preplaced powder on substrate, (b) Laser cladding process, (c) Laser cladding setup.

especially for load bearing implants and joint replacements [5,6]. Commonly used metallic biomaterials - 316 L stainless-steel, cobalt-chromium alloys and titanium-based alloys - demonstrate excellent fracture toughness and fatigue strength, improved corrosion resistance and acceptable cytocompatibility [7–9]. While there has been significant advancement in the properties of these alloys, metallic biomaterials have failed to provide good osseointegration with the bone which increases the possibility of implant loosening and separation [10,11].

Recently, researchers have focused on developing coating layers on metallic biomaterials to enhance their biocompatibility as well as bioactivity. Different coating materials and techniques have been introduced. Among these coating materials are hydroxyapatite and Bioglass which have been widely implemented for their excellent bioactivity and biocompatibility [12–14]. Nevertheless, the development of the coating layers is challenging. The difference in thermal expansion between the bioceramics and the metallic substrate causes cracking, problems in delamination and inadequate stability [15].

Metallic glasses (MGs) have recently gained more attention as coating layers on metallic substrates for biomedical applications because they show excellent wear and corrosion resistance, and acceptable biocompatibility [16,17]. Also, the similarity in elemental composition between the MGs and popular biomedical metallic alloys - Ti6V4Al, CoCrMo alloys and 316 L stainless-steel - leads to improved interfacial bonding and results in more stable coatings. Among the wide variety of researched MGs, Fe-based MG offer remarkable mechanical properties and excellent corrosion resistance - which are important properties for biomaterials - besides biocompatibility [18,19]. Moreover, based on our previous research, the Fe-based MG demonstrated excellent wear resistance in simulated body fluid better than Zr-based, Ti-based MGs and comparable to CoCr alloy which is known for excellent wear resistance [20]. In addition, Fe-based MG is inexpensive [21] making it a promising option as a coating layer for biomedical applications.

Various coating techniques were utilized to develop MG coatings

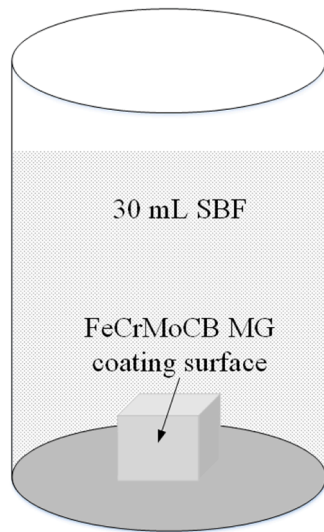
using laser cladding and thermal spraying techniques [22–26]. Thermal spraying techniques induces problems in coating layer such as weak bonding and cracking [20]. While, laser cladding offered high adhesion bond but, on the other side, it induces crystalline phases within the amorphous structure [27–29].

In this research, the in-vitro bioactivity of laser cladded FeCrMoCB MG as a potentially superior wear-resistant coating for joint replacement implants [10, 30] was investigated. The proposed MG coating exhibited a remarkable in-vitro bioactivity behavior without prior treatment after immersion in simulated body fluid for 1, 3, 7, and 21 days. The apatite layer formed was confirmed via scanning electron microscopy, energy dispersive spectroscopy, Fourier-Transform infra-red spectroscopy and X-ray diffraction. The revealed behavior is expected to promote the osseointegration of the proposed biomaterial.

## 2. Materials and methods

### 2.1. Laser cladding of FeCrMoCB MG coating layer

Strips of nickel-free high nitrogen stainless-steel (3 mm thickness) - provided by Energiertechnik GmbH, Germany - were cut into square coupons of  $30 \times 30 \text{ mm}^2$  using an abrasive cutting machine. The coupons were polished using SiC sandpaper 240-grit and washed with deionized water (DI) and ethanol in an ultrasonic bath, respectively. The cladding material is FeCrMoCB amorphous powder - produced by LiquidMetal® Coatings - with a nominal particle size distribution of 20–80  $\mu\text{m}$ . The amorphous powder was preplaced evenly on the substrate, Fig. 1(a), to form a 400  $\mu\text{m}$  thick layer for laser cladding as described in our previous work [30]. The laser cladding process was performed by scanning the whole surface, Fig. 1(b), with a high-power diode laser machine (LDF 4000–60, LaserLine, Germany, 4.4 kW rated power and  $978\text{--}1025 \pm 10 \text{ nm}$  wavelength). The laser cladding parameters used in the current work are 2000 W laser power, 25 mm/s scanning speed,  $4 \times 6 \text{ mm}$  laser spot,



**Fig. 2.** In-vitro bioactivity setup showing the coating layer surface that is parallel to the direction of gravity.

and 25% overlap. These parameters have been selected based on our previous work [20,31,32] to ensure defect-free coating layer and best properties. A shielding Argon gas stream (10 L/min) was used to protect FeCrMoCB MG coating layer (CL) during the cladding process, Fig. 1(c).

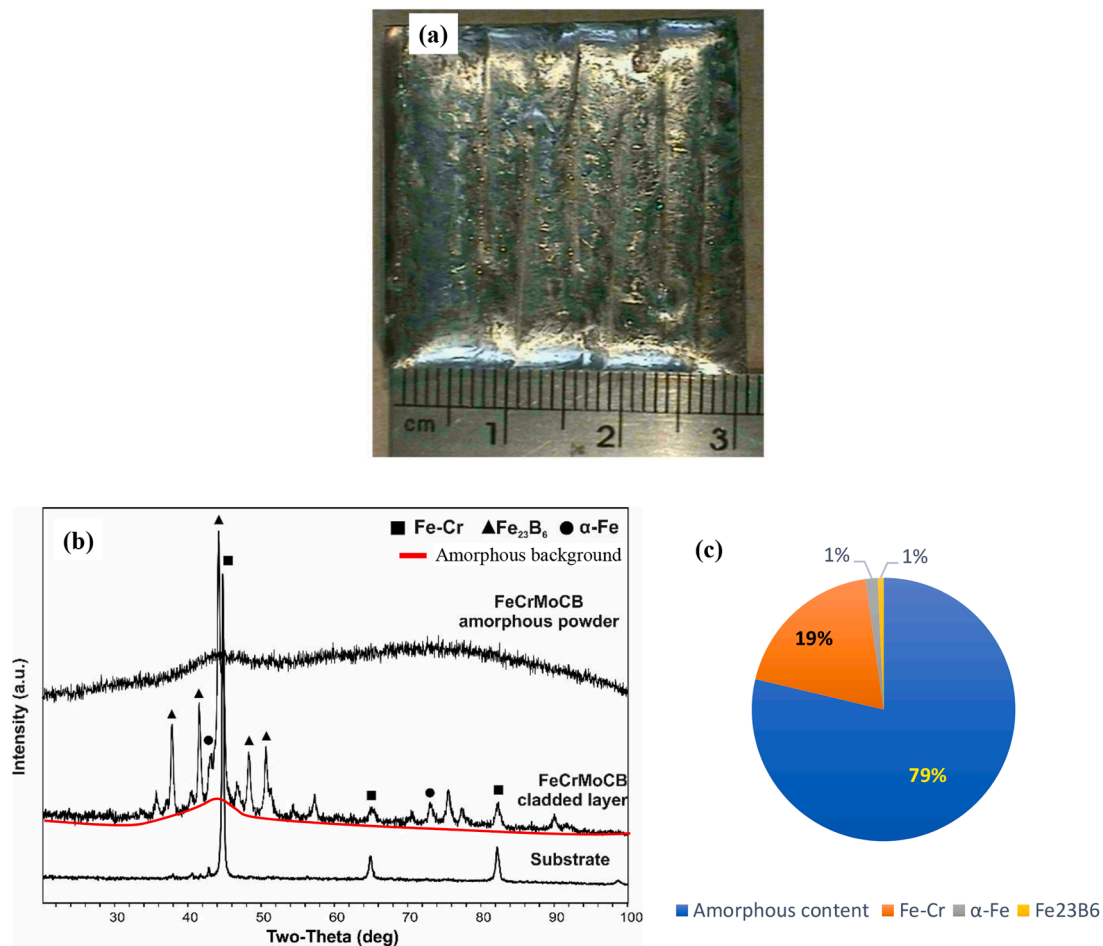
## 2.2. Material characterization

The fabricated FeCrMoCB MG CL and the substrate (a  $10 \times 10$  mm<sup>2</sup> coupons were cut, sanded by 240-grit SiC sandpaper, then cleaned using DI water and ethanol in ultrasonic bath for 5 min., respectively) as well as the amorphous powder were examined using X-ray diffraction (XRD, Bruker D2 Phaser) – from 20° to 100° 2θ at 3°/min scanning rate – and the obtained patterns were analyzed using X'Pert HighScore Plus suite (v3.0.3) [33]. To estimate the amorphous content and to quantify the phases, the constant background method – described in Eq. (1) [20] – and Rietveld's method [34] were used, respectively.

$$\text{Amorphous content\%} = \frac{\text{integral area of the background}}{\text{integral area of original diffraction}} \quad (\text{Eq. 1})$$

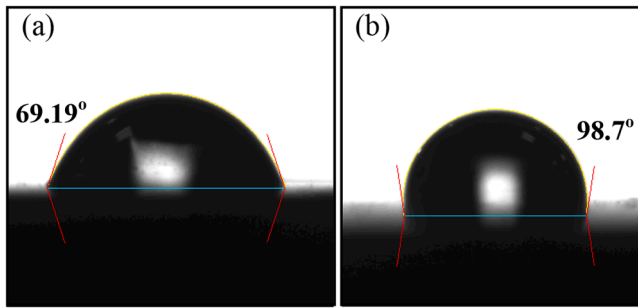
## 2.2. Surface wettability test

The surface wettability can be evaluated through the measurement of the contact angle developed between the simulated body fluid (SBF) droplet and the tested surface. A sessile water-drop test was performed using a CAM-PlusR Contact angle goniometer. The test samples were polished to mirror-like finish using SiC sandpaper under stream of water, then polished using cloth disk and 40 nm alumina suspended in ethanol. Then, a 3 μl SBF droplet was put on the polished side of cladded samples and uncoated substrate. The contact angle was measured using imaging provided by attached camera. The recorded angle is the average value of three readings taken on each.



**Fig. 3.** (a) Sample after laser cladding, (b) XRD pattern of a FeCrMoCB CL, substrate and FeCrMoCB amorphous powder, and (c) Quantification of phase content of the laser cladded layer.





**Fig. 4.** Contact angle of 3  $\mu$ l SBF drop on (a) FeCrMoCB MG CL and (b) nickel-free stainless-steel substrate.

### 2.3. The in-vitro bioactivity test of FeCrMoCB MG

The in-vitro bioactivity test was performed by immersion of samples in SBF. The SBF was prepared from lab-grade reagents according to a previous protocol proposed by Kokubo et al [3], with pH of 7.4 and ion concentrations almost the same of the human blood plasma. Coupons of  $9 \times 9$  mm<sup>2</sup> were cut from both the substrate and the laser cladded FeCrMoCB MG samples, and polished using sandpaper 240-grit and then immersed in 30 ml SBF, Fig. 2, to ensure apatite formation on the surface rather than precipitation due to gravity. The samples were retained at  $37 \pm 0.5$  °C for 1 day, 3 days, 7 days, and 21 days. Kokubo et al. suggested 12, 24 and 120 hrs. for the in-vitro bioactivity test [3] while other researchers have used 14 [35,36] and 21 days [37].

Every two days, the test coupons were rinsed gently with deionized (DI) water and the SBF was replaced with a fresh one. After each designated period, the coupons were washed gently with DI water and dried in a desiccator.

### 2.4. The apatite layers characterization

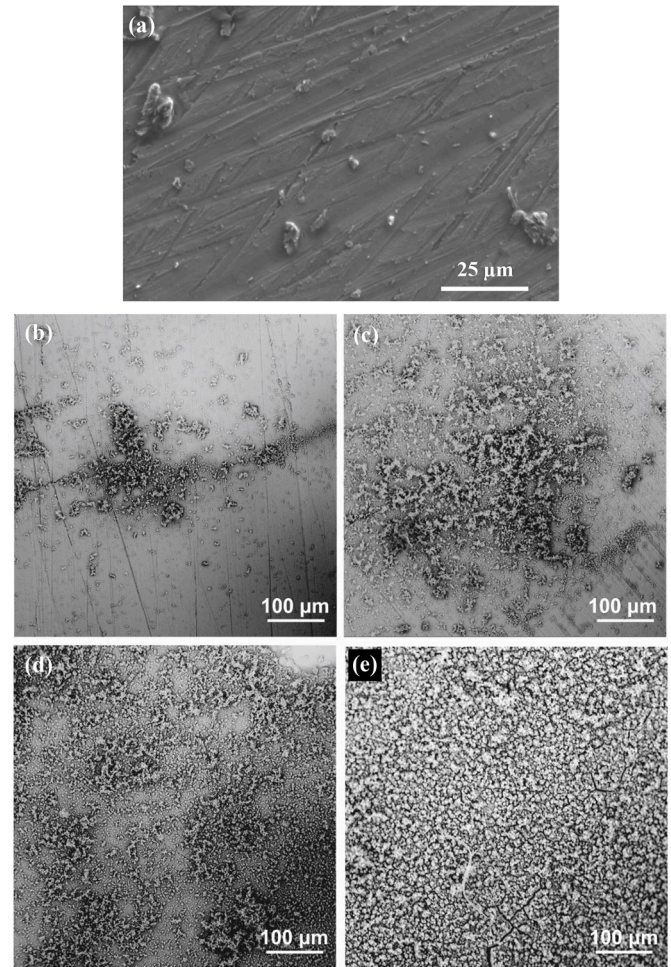
To characterize the apatite layers, the coupons were initially coated with a conductive layer using ion sputter, then the morphology of the formed layer was examined by scanning electron microscopy (SEM, S-3000 N Hitachi, Japan). Then, elemental composition of the formed layer was checked using energy-dispersive spectroscopy (EDS, Falcon 60 EDS). Infrared light spectroscopy (FTIR-Spectrum 400, Perkin Elmer) was used to check the apatite layer formed on the samples. The IR spectra ( $4000$ – $400$  cm<sup>-1</sup>) were recorded on a Fourier Transform spectrometer at a resolution of 2 cm<sup>-1</sup>.

Furthermore, the apatite layer was gently scraped, put on a Si low background holder, and examined by XRD using 2° /min scanning rate in a range 0 to 50° of 2 $\theta$ . Then, the obtained patterns were matched with the standard PDF2–2004 ICCD in X'Pert HighScore Plus Suite (v3.0.3) [33].

## 3. Results and discussion

### 3.1. Characterization of FeCrMoCB MG coating layer

Fig. 3(a) shows the sample after laser cladding. The sample presented successful cladding and the as cladded coating exhibited an almost homogeneous surface Fig. 3(b) shows the XRD patterns of CL, substrate, and amorphous powder, while Fig. 3(c) shows the quantification of phase content of the laser cladded layer using the constant background method [38] and Rietveld's method [34]. As can be seen in Fig. 3(b), the XRD patterns showed a fully amorphous FeCrMoCB powder, while the substrate has typical crystalline structure. The laser cladded layer has a crystalline-amorphous composite structure with a high amorphous content (78.76%) as shown in Fig. 3(c). Fe-Cr and  $\alpha$ -Fe (about 20%) were recognized as metallic crystalline phases and Fe<sub>23</sub>B<sub>6</sub> as an inter-metallic phase (less than 2%). Thus, the properties of the coating layer



**Fig. 5.** SEM imaging of (a) Substrate (nickel-free stainless steel) morphology after 7 days of in-vitro bioactivity test and the apatite layer on the FeCrMoCB MG CL after (b) 1 day, (c) 3 days, (d) 7 days, and (e) 21 days.

are mostly affected by the amorphous structure and the metallic phases. The amorphous structure is recognized by the broad peak at 40–46°. Moreover, nanocrystalline phases were recognized in the coating layer which was demonstrated and discussed in our previous work [32].

### 3.2. The surface wettability test

Fig. 4 shows the contact angle of 3  $\mu$ l SBF drop on (a) FeCrMoCB MG cladded layer and (b) nickel-free stainless-steel substrate. The wettability test showed that FeCrMoCB MG exhibited a contact angle of  $69.19^\circ \pm 2.1^\circ$  while the uncoated substrate recorded a contact angle of  $98.7^\circ \pm 2.3^\circ$ . This result confirms the higher hydrophilicity of FeCrMoCB MG surface as compared to the uncoated substrate, which in turn results in a higher surface energy [39] and consequently promotes the formation and growth of apatite on the coated surface [40–42]. Thus, FeCrMoCB MG shows better bioactivity behavior as compared to the uncoated substrate. Shen et al. also supported this finding and demonstrated that the crystallization of amorphous structure deteriorated the wettability which is regarded to higher surface energy of amorphous structure compared to crystalline one. If the surface has a high interfacial energy, roughness promotes wetting, and the liquid will spread within the corrugation (surface wicking). But for a low energy surface, roughness promotes repulsion; the liquid does not follow the surface corrugations but achieves its minimum at a position on top of the corrugation [43]. This explains the better wettability of FeCrMoCB MG CL compared to the substrate.



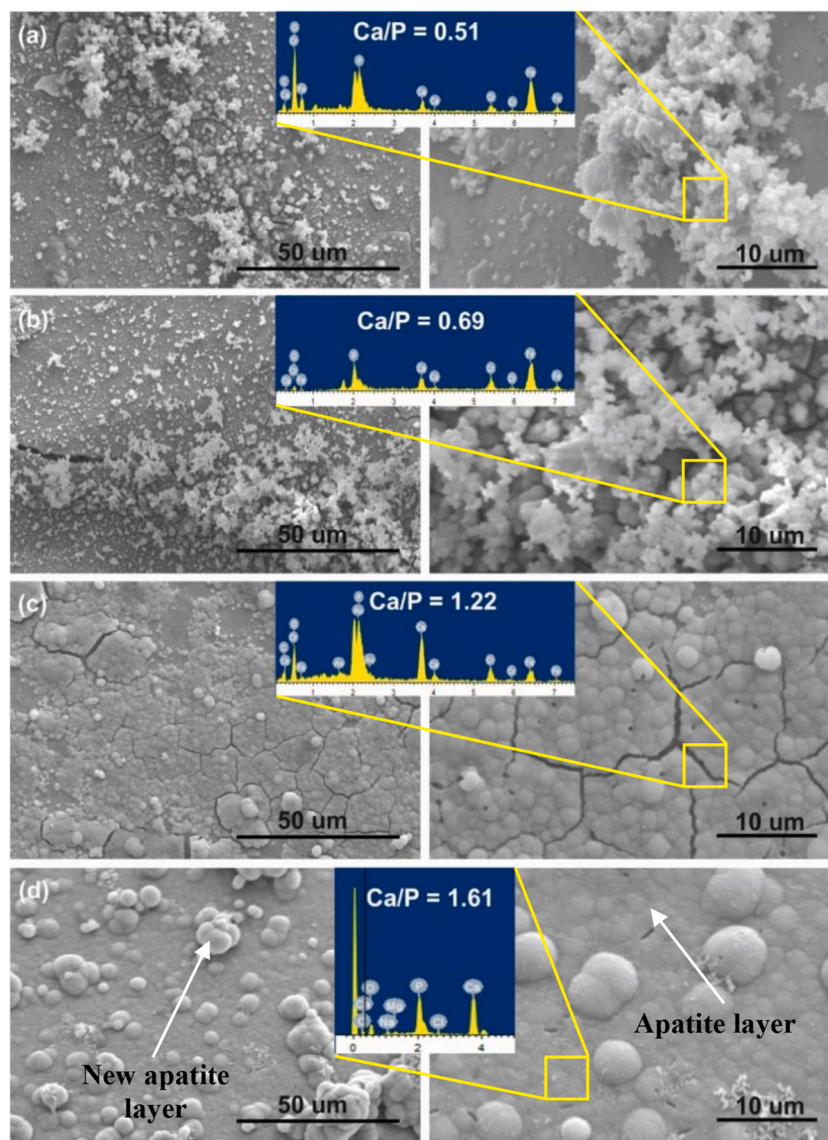


Fig. 6. Morphology and corresponding EDS spectra of apatite grown on FeCrMoCB MG CL after (a) 1 day, (b) 3 days, (c) 7 days, and (d) 21 days.

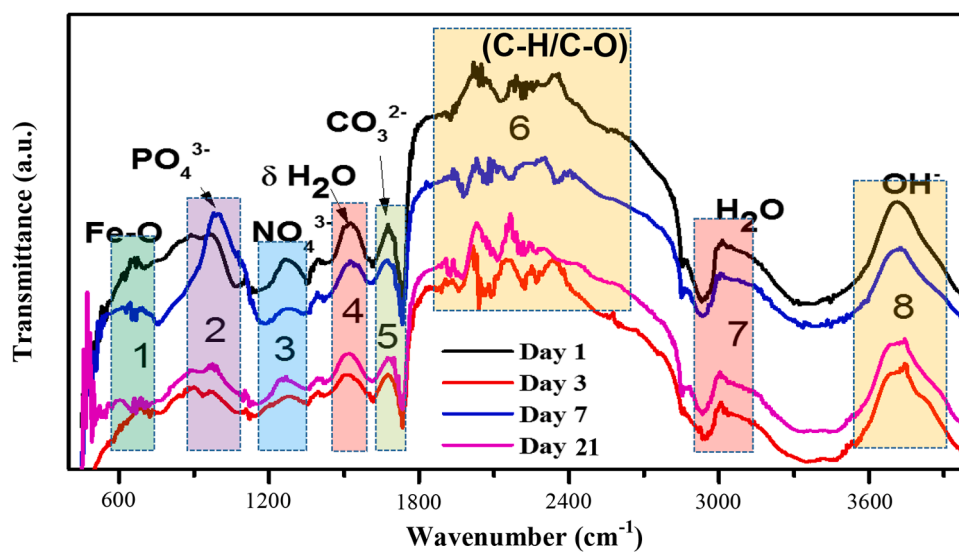


Fig. 7. FTIR spectra of apatite-like layer grown on the surface of FeCrMoCB amorphous MG samples monitored for 1-, 3-, 7- and 21-days period.

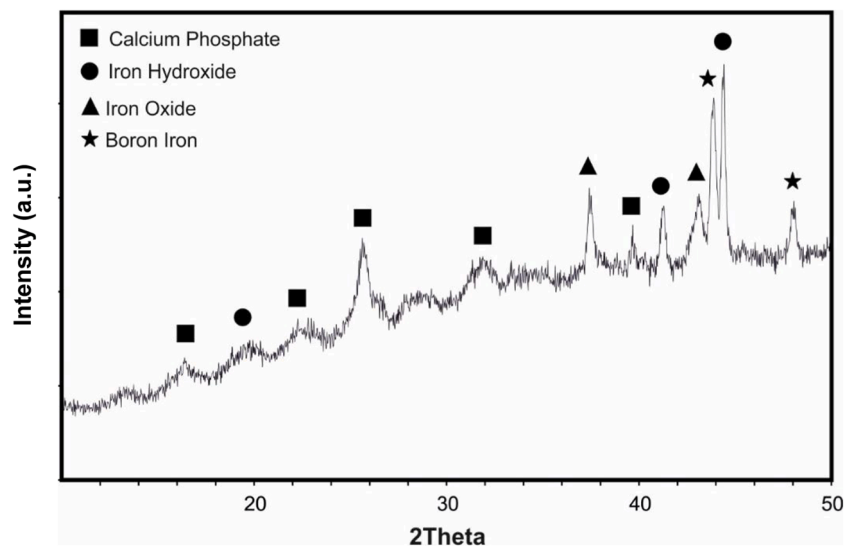


Fig. 8. XRD pattern of the apatite layer after 21 days of in-vitro bioactivity test.

### 3.3. The in-vitro bioactivity test

The SEM imaging of the surface morphology of the substrate and FeCrMoCB MG CL after the in-vitro bioactivity test is shown in Fig. 5. The substrate surface appeared to be clear with no evidence for apatite layer formation, Fig. 5(a). While the apatite layer nucleated from first day and grew rapidly to cover the whole surface of FeCrMoCB MG CL as appeared in Fig. 5 (b, c, d, and e) after in-vitro bioactivity test. The morphology and EDS spectra of apatite layer formed on FeCrMoCB MG CL after 1 day, 3 days, 7 days and 21 days is presented in Fig. 6. The EDS spectra showed that apatite-like layer is grown on the surface of the FeCrMoCB MG CL with existence of Ca and P, Fig. 6(a), (b), (c) and (d).

The EDS analysis showed that at 1 and 3 days of immersion, P and Ca are present, but the Ca/P ratio was below the stoichiometric ratio of bone apatite. However, after 7 days, Ca/P ratio increased to 1.25 and after 21 days became 1.61 approaching the stoichiometric ratio of bone apatite [39]. After 21 days, a new layer of apatite started to form on the top of the existed apatite layer. This could be described as a promising bioactive behavior. The FeCrMoCB MG exhibits bioactivity by forming Fe-OH groups which help the apatite formation and growth [44]. Moreover, boron enhances the bioactivity as it is known to be beneficial for healthy and growing bones [45,46].

### 3.4. Experimental FTIR apatite layer characterization

Fig. 7 shows the FTIR spectra of apatite-like layer grown on FeCrMoCB MG CL after 1, 3, 7 and 21 days of in-vitro bioactivity test. Generally, there are eight regions on the FTIR spectra that shows specific harmonics corresponding to Fe-O (region 1),  $\text{PO}_4^{3-}$  (region 2),  $\text{NO}_4^{3-}$  (region 3),  $\delta\text{H}_2\text{O}$  (region 4),  $\text{CO}_3^{2-}$  (region 5), C-H/C-O (region 6),  $\text{H}_2\text{O}$  (region 7), and  $\text{OH}^-$  (region 8) moieties detected on FeCrMoCB MG CL surface. These moieties have IR vibration centering at 660.4, 995.72, 1284.6, 1525.9, 1667.9, 1766.5–2796.6, 3037.1 and 3716.2  $\text{cm}^{-1}$  respectively. The presence of  $\text{PO}_4^{3-}$ ,  $\text{NO}_4^{3-}$ , and  $\text{CO}_3^{2-}$  moieties proves that apatite layer was grown on FeCrMoCB MG CL similar to hydroxyapatite according to previous report [47]. The  $\nu\text{OH}$  from iron species or adsorbed water showed a broad band at 3716.2  $\text{cm}^{-1}$  [48]. The IR-absorption by  $\text{PO}_4^{3-}$  moiety after 7 days centered at 995.72  $\text{cm}^{-1}$  with redshift of  $\sim 26.22 \text{ cm}^{-1}$  from other days (1, 3 and 21) which occurred at 969.5  $\text{cm}^{-1}$ . The IR-absorption by  $\text{PO}_4^{3-}$  indicates the stretching vibration of the P-O bond influenced by the carbonate ( $\text{CO}_3^{2-}$ ) substitutions [49]. These carbonate substitutions ( $\text{CO}_3^{2-}$ ) can replace phosphate ions to form B-type apatite – a carbonated apatite –

which is the basic mineral found in the human bones [50]. The IR-absorption for  $\text{H}_2\text{O}$  which occurred at 3037.9  $\text{cm}^{-1}$  indicates the formation of brushite ( $\text{CaHPO}_4 \cdot 2\text{H}_2\text{O}$ ) [51]. This reveals a deficiency of calcium in the apatite layer and also shows non-stoichiometric apatite layer [52,53].

### 3.5. XRD of apatite layer formed on FeCrMoCB MG cladded layer

Fig. 8 shows the XRD pattern of the apatite particles - scraped from the FeCrMoCB MG CL - after 21 days of in-vitro bioactivity test. As can be seen in Fig. 8, the crystalline calcium phosphate is existed, besides iron hydroxide (Fe-OH) and iron oxide ( $\text{Fe}_2\text{O}_3$ ). However, the recognized calcium phosphate peaks are referred to be nanocrystalline apatite [51]. From the EDS spectra (Fig. 6), it can be concluded that the amorphous component is amorphous calcium phosphate with Ca/P 1.61. The Fe-OH phase serves as a nucleation site for growing apatite layer as illustrated by Qin et al [44].

It can be postulated that the change in phase of Fe from crystalline to amorphous improved bioactivity. Therefore, the amorphous phase exhibited Fe at short range of atomic order hence providing better wettability. Consequently, the surface energy is higher and completely isotropic there by promoting the formation of Fe-OH phase. The Fe-OH phase was confirmed by the Fe-O vibration which is found at 660.4  $\text{cm}^{-1}$ . Accordingly, Fe-OH serves as a nucleation sites for growth of  $\text{Ca}^{+2}$  and  $\text{PO}_4^{-2}$  into apatite. These results are significant in revealing the good bioactivity of the presented FeCrMoCB MG CL and also highlight its outstanding potential for bone-implant applications.

## 4. Conclusion

In this research work, the in-vitro bioactivity of laser cladded FeCrMoCB MG is investigated as potential material for excellent osseointegration in orthopedics. The laser cladded FeCrMoCB MG – having 78.76% amorphous phase – proved better wettability properties compared to uncoated nickel-free stainless-steel substrate. The cladded layer showed good in-vitro bioactivity in SBF and nucleation of apatite from first day without prior treatments. After 21 days, the apatite layer covered the whole surface with Ca/P 1.61 approaching the bone stoichiometric ratio of apatite. FTIR analysis showed existence of  $\text{OH}^-$ ,  $\text{PO}_4^{-2}$  and  $\text{Ca}^{+2}$  on the surface confirming the existence of apatite layer. The analysis revealed formation of B-type apatite and brushite which have deficiency of calcium in the bone-like apatite. The XRD examination revealed the formation of nanocrystalline and amorphous calcium

phosphate, besides the existence of Fe-OH phase. These results are indicating that FeCrMoCB MG has promising bioactivity behavior and can be a promising implant material for better osseointegration in orthopedic implants.

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## Declaration of Competing Interests

None declared

## Ethical approval

Work on human beings that is submitted to *Medical Engineering & Physics* should comply with the principles laid down in the Declaration of Helsinki; Recommendations guiding physicians in biomedical research involving human subjects. Adopted by the 18th World Medical Assembly, Helsinki, Finland, June 1964, amended by the 29th World Medical Assembly, Tokyo, Japan, October 1975, the 35th World Medical Assembly, Venice, Italy, October 1983, and the 41st World Medical Assembly, Hong Kong, September 1989. You should include information as to whether the work has been approved by the appropriate ethical committees related to the institution(s) in which it was performed and that subjects gave informed consent to the work.

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