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1 **Title**

2 Effects of bacterial density on growth rate and characteristics of microbial-induced
3 CaCO₃ precipitates: a particle-scale experimental study

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5 **Abstract**

6 Microbial-Induced Carbonate Precipitation (MICP) has been explored for more than a
7 decade as a promising soil improvement technique. However, it is still challenging to
8 predict and control the growth rate and characteristics of CaCO₃ precipitates, which
9 directly affect the engineering performance of MICP-treated soils. In this study, we
10 employ a microfluidics-based pore scale model to observe the effect of bacterial density
11 on the growth rate and characteristics of CaCO₃ precipitates during MICP processes
12 occurring at the sand particle scale. Results show that the precipitation rate of CaCO₃
13 increases with bacterial density in the range between 0.6×10^8 and 5.2×10^8 cells/ml.
14 Bacterial density also affects both the size and number of CaCO₃ crystals. A low bacterial
15 density of 0.6×10^8 cells/ml produced 1.1×10^6 crystals/ml with an average crystal volume
16 of $8,000 \mu\text{m}^3$, whereas a high bacterial density of 5.2×10^8 cells/ml resulted in more

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17 crystals (2.0×10^7 crystals/ml) but with a smaller average crystal volume of $450 \mu\text{m}^3$. The
18 produced CaCO₃ crystals were stable when the bacterial density was 0.6×10^8 cells/ml.
19 When the bacterial density was 4-10 times higher, the crystals were first unstable and
20 then transformed into more stable CaCO₃ crystals. This suggests that bacterial density
21 should be an important consideration in the design of MICP protocols.

22

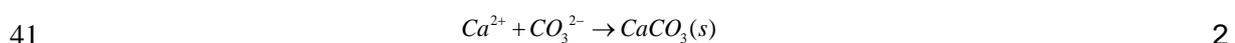
23 **Keywords**

24 Soil stabilization, ground improvement, particle-scale behaviour, microscopy, time
25 dependence, mineralogy, Microbial-Induced CaCO₃ Precipitation

26

27 **INTRODUCTION**

28 Microbial-Induced Calcium Carbonate Precipitation (MICP) has been extensively
29 investigated for applications such as ground improvement, soil liquefaction mitigation,
30 dam safety control, prevention of soil erosion, and slope stabilisation (van Paassen, 2009;
31 DeJong *et al.*, 2013; Martinez *et al.*, 2013; Montoya *et al.*, 2013; Jiang *et al.*, 2017). The
32 CaCO₃ precipitates fill soil pores and bond soil particles, which consequently increase
33 the strength and stiffness, and reduce the permeability of the soil matrix (Stocks-Fischer
34 *et al.*, 1999; DeJong *et al.*, 2006). Several types of bacterial activities including ureolysis,
35 denitrification and sulfate reduction can result in MICP (DeJong *et al.*, 2010), and among
36 those the ureolysis-based process has been most widely studied. Ureolysis-driven MICP
37 involves urea hydrolysis by the urease enzyme produced by active microorganisms
38 (Equation 1), resulting in the generation of calcium carbonate (CaCO₃) in the soil matrix
39 (Equation 2).



42

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43 Ureolysis and CaCO₃ precipitation are the two key processes involved in the ureolysis-
44 driven MICP process. Understanding the kinetics of these two processes is essential for
45 designing MICP protocols. The kinetics of ureolysis is normally assessed by the increase
46 in solution conductivity due to the hydrolysis of urea (Whiffin *et al.*, 2007; Lauchnor *et al.*,
47 2015). The kinetics of CaCO₃ precipitation can be assessed by the decrease in Ca²⁺
48 concentration (Stocks-Fischer *et al.*, 1999). Recently, the kinetics of CaCO₃ at the crystal
49 size level have also been studied by using optical microscopes to observe CaCO₃
50 crystals produced in liquid medium in petri dishes (Zhang *et al.*, 2018), on glass slides
51 (Wang *et al.* 2019b) or in microfluidic chips (Wang *et al.* 2019a,b; Kim *et al.*, 2020), as
52 well as crystals produced on solid agar pads (Zhang *et al.*, 2018). Crystals grew steadily
53 to diameters of 20 µm and 50 µm within 40 minutes when MICP occurred in a liquid
54 medium placed in a petri dish or on an agar pad containing Ca²⁺ urea, respectively
55 (Zhang *et al.*, 2018). In comparison, the use of a microfluidic-based porous model is
56 considered to be a more appropriate approach to study the kinetics of MICP as it more
57 closely mimics real MICP conditions occurring in the pore fluid of a porous soil matrix
58 where bacterial cells move freely and the cementation solution can be injected multiple
59 times (Wang *et al.*, 2019 a,b).

60

61 In addition to the CaCO₃ precipitation kinetics, the properties of CaCO₃ precipitates also
62 need to be considered in a MICP protocol design. Larger crystals that bond soil particles
63 more sufficiently may increase soil strength more effectively (Cheng *et al.*, 2017). By
64 conducting soil column experiments and by using a scanning electronic microscopy to
65 scan the samples after MICP treatment, it was found that the concentration of
66 cementation solution and ureolysis activity affected the size and number of CaCO₃
67 crystals after MICP treatment (Al Qabany & Soga, 2013; Cheng *et al.*, 2017). Al Qabany
68 & Soga (2013) found that when the total treatment duration and the total amount of
69 cementation solution were constant, the use of higher concentrations of cementation

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70 solution produced larger CaCO₃ crystals. Cheng *et al.* (2017) showed that higher
71 bacterial activities tend to produce smaller CaCO₃ crystals at the end of MICP treatment.

72

73 Because CaCO₃ crystals were only observed after MICP treatment by using a scanning
74 electronic microscopy (Al Qabany & Soga, 2013; Cheng *et al.*, 2017), the kinetics and
75 characteristics of microbial-induced CaCO₃ precipitation were not fully understood.

76 Wang *et al.* (2019a) designed and fabricated a microfluidic chip etched with porous
77 models and used it to observe the MICP process under conditions that resemble soil
78 assemblies. The advantage of this method is that the density of bacteria and the main
79 parameters of CaCO₃ crystals such as size, shape and number can be quantified during
80 the whole MICP process (Wang *et al.*, 2019 a,b). Wang *et al.* (2019b) found that when
81 the bacterial activity and concentration of cementation solution were the same, longer
82 injection intervals (23-25 hours compared to 3-5 hours) produced larger and fewer
83 CaCO₃ crystals. This was because when the interval was longer, the smaller and less
84 stable crystals dissolved while the larger and more stable crystals continued to grow
85 (Wang *et al.*, 2019b).

86

87 Therefore, it is essential to investigate the processes of MICP rather than only the MICP
88 properties after MICP treatment to have a better understanding of the kinetics and
89 properties of MICP. Due to the fact that bacterial density has a direct effect on the
90 ureolysis activity (Lauchnor *et al.*, 2015) and a large range of bacterial densities have
91 been used in MICP studies (Al Qabany *et al.*, 2012; Cheng *et al.*, 2017), it is essential to
92 know the quantity and activity of the bacteria injected into the soil to design robust MICP
93 treatment protocols. In this study, microfluidic experiments were conducted to observe
94 both the growth kinetics and characteristics of microbial-induced CaCO₃ crystals under
95 conditions where the bacterial densities varied. The test results were used to investigate

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96 the effects of bacterial density on the kinetics and characteristics of CaCO₃ precipitation
97 and to provide suggestions for MICP treatment protocols.

98

99 **MATERIALS AND METHODS**

100 **Microfluidic chip experimental setup and data acquisition**

101 The microfluidic chip used in this study was designed based on a cross-sectional image
102 of a solidified and sectioned 3D Ottawa 30–50 sandy soil specimen and the fabrication
103 of the microfluidic chip was conducted following the standard photolithography
104 techniques by using polydimethylsiloxane (PDMS) and glass. The design and fabrication
105 methods of the microfluidic chips were discussed in Wang *et al.* (2019a). The
106 experimental setup is shown in Figure 1.

107

108 During the experiments, all images were acquired with an Axio Observer Z1 research
109 microscope. The microscope is a phase-contrast microscope and is equipped with an
110 automated stage (Prior Scientific Instrument), a grayscale camera (Hamamatsu C11440-
111 22CU), and a light source connected to a computer and controlled by Zeiss AxioVision
112 image analysis software. Images were captured using phase field illumination and 10×
113 inverted objectives (with image resolutions of 0.65 μm/pixel). Under the phase-contrast
114 microscope, bacterial cells appeared as black dots, the CaCO₃ precipitates appeared as
115 white dots, and the microfluidic chip appeared as light to dark grey background (Wang
116 *et al.*, 2019b).

117

118 **Preparation of bacterial suspension and cementation solution**

119 *Sporosarcina pasteurii* (DSM 33), a ureolytic bacterial strain, was used in the
120 experiments. Bacterial cells from the glycerol stock (Wang *et al.*, 2019b) were grown in
121 ATCC 1376 NH₄-YE agar medium (20 g/L yeast extract, 10 g/L ammonium sulphate, 20
122 g/L agar, and 0.13 M Tris base) for 48 hours at 30°C. Subsequently, several colonies on

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123 the agar plate were transferred to a NH₄-YE liquid medium containing the same
124 components without agar and cultivated in a shaking incubator for 24 hours at 30°C and
125 at a shaking rate of 200 rotations per minute (rpm) to obtain a bacterial suspension with
126 an optical density measured at a wavelength of 600 nm (OD₆₀₀) of around 3.0. A more
127 detailed description of the preparation of the bacterial suspension can be found in Wang
128 *et al.* (2019b). The cementation solution contained 0.25 mol/L of CaCl₂, 0.375 mol/L of
129 urea and 3 g/L of nutrient broth.

130

131 **Staged injection procedure of cementation solution to produce CaCO₃ precipitates**

132 A staged injection procedure was applied to the MICP treatment process. After bacterial
133 injection into a microfluidic chip and the subsequent 2 hour bacterial settling period, 1.25
134 pore volumes (PV) of cementation solution was injected into the microfluidic chip at an
135 injection flow rate of 5.6 PV/hr. Subsequent injections of cementation solution were
136 conducted at 24-hour intervals after the previous injection. In total, 12 injections of
137 cementations solution were applied. The injection volume of cementation solution, the
138 flow rate, and the number of injections of cementation solution were chosen based on
139 findings presented in Wang *et al.* (2019a, b). Time-series images were captured at 15
140 minutes intervals after the completion of each of the cementation solution injections. The
141 main experimental parameters in these protocols are summarised in Table 1.

142

143 **Quantification of bacterial density and activity**

144 Bacterial suspensions with five different densities were prepared to correlate with
145 bacterial optical density. The OD₆₀₀ was measured to quantify the bacterial density before
146 the injection of 1.5 PV into each of five microfluidic chips at an injection flow rate of 56
147 PV/h. The bacterial suspensions were prepared by diluting the bacterial suspension with
148 OD₆₀₀ of 3.0 using autoclaved NH₄-YE liquid medium at volume proportions V_{bacterial}
149 suspension : V_{NH₄-YE liquid medium} of 1:14, 1:5, 1:2, 2:1 and 1:0. NH₄-YE liquid

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150 medium provides nutrients for bacterial activity. Therefore, to avoid bacterial starvation,
151 autoclaved NH₄-YE liquid medium instead of Deionized water was used to dilute the
152 bacterial suspension from OD₆₀₀ of 3.0 to prepare bacterial suspensions at lower
153 densities. It should be noted that due to the difference in dilution ratios, the amount of
154 nutrients provided to the bacterial cells varies when the bacterial densities are different,
155 and this difference was not considered in this study. Injecting 1.5 PV of bacterial
156 suspension at a flow rate of 56 PV/h resulted in a homogeneous distribution of bacteria
157 after injection (Wang *et al.*, 2019a). The bacterial density was quantified based on the
158 images taken at the centre of the microfluidic chips. Bacteria were given 10 mins to settle
159 to the bottom zone of the microfluidic chip before obtaining accurate microscope images
160 since the microscope focal length depth range was 17 µm, whereas the depth of the
161 microfluidic chip was 50 µm. The bacterial cells doubled in number in about 2 hours due
162 to *in situ* growth during bacterial settling (Wang *et al.*, 2019a). The effect of bacterial
163 growth on the bacterial density changed during the first 10 minutes, but this was
164 neglected due the short period. Because bacterial size affects the reading of OD₆₀₀ value
165 (Zapata & Ramirez-Arcos, 2015), the sizes of the bacteria were also measured to obtain
166 the average bacterial size.

167

168 To examine the effect of bacterial density on the rate of ureolysis, a series of batch tests
169 was conducted by varying the bacterial densities in bacteria-urea mixtures. The
170 hydrolysis rate was measured using the conductivity method described by Whiffin *et al.*
171 (2007). The urea concentration in the bacteria-urea mixtures was 1.0 M before the
172 hydrolysis of urea occurred. The bacterial densities in the bacteria-urea mixtures were
173 equivalent to OD₆₀₀ of 0.1, 0.25, 0.46, 0.75, 1.035, 1.38 and 1.73. The conductivity of
174 the mixed content was assessed by using a conductivity meter (FiveGo, Meter
175 Toledo) immediately after the mixing and five minutes after mixing. The ureolysis rate
176 was calculated using Equation 3 (Whiffin *et al.*, 2007). Measurements were

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177 performed in triplicates for each of the different media tested, with data presented as
178 mean \pm standard error.

$$179 \quad Ureolysis \text{ rate}(mM / h) = \frac{\Delta \text{Conductivity}(\mu S / cm)}{\Delta t(\text{min})} \times (10^{-3} \times 11.11)(mM / (\mu S / cm)) \times 60(\text{min} / h) \quad 3$$

180 **Quantification of crystal growth rate, size, and quantity**

181 Several methods were used to quantify CaCO₃ crystal characteristics. Mean intensity
182 values of the images were analysed using Zeiss Axio Vision image analysis software and
183 plotted against time to show how the relative areas occupied by the precipitates changed
184 with time. The image intensities could not represent the total crystal volume produced
185 because two-dimensional images cannot capture the entire information of the three-
186 dimensional crystals but could represent the change in crystal properties with time. In
187 addition, crystal diameter has previously been used to quantify the size of CaCO₃ crystals
188 (Zhang *et al.*, 2018). During the initial growth stage, most crystals were hemispheres and
189 grew on the surface of the microfluidic channel (Wang *et al.*, 2019; Kim *et al.*, 2020).
190 Therefore, in this study, the volumes of individual crystals were calculated based on their
191 measured diameters. In addition, numbers of crystals were also counted to quantify
192 crystal number.

193

194 **RESULTS AND DISCUSSION**

195 **Bacterial density and bacterial optical density**

196 The bacterial densities of five bacterial suspensions (cells/ml) were correlated with their
197 initial OD₆₀₀ values to quantify the bacterial density used. Microscope images were taken
198 at the centre of five microfluidic chips containing bacterial suspensions with the initial
199 OD₆₀₀ of 0.2, 0.5, 1.0, 2.0 and 3.0 at 10 minutes after the injection of bacterial
200 suspensions (shown in Figure 2a). Bacterial densities correlated with the initial OD₆₀₀
201 values of the bacterial suspensions and the results are shown in Figure 2b. A blank
202 sample with no bacterial cells in the bacterial nutrient liquid was used as a baseline

203 against which the OD₆₀₀ was defined as zero. The data shows that bacterial density and
204 OD₆₀₀ are linearly correlated as:

$$205 \quad \text{Bacterial density (cells per ml)} = OD_{600} \times 4 \times 10^8 \quad 4$$

206 The R^2 values of the all three linear regression lines in Figure 2b are higher than 0.99.

207

208 Because bacterial cell size affects the optical density of a bacterial suspension,
209 magnified images of the microfluidic chips containing bacterial suspensions in this study
210 and a previous study (Wang *et al.*, 2019a) are presented to show how the difference in
211 bacterial cell size would affect the optical density of the bacterial suspension (Figure 2c
212 and d). The sizes of bacterial cells in this study are about 3 μm , whereas the ones in
213 Wang *et al.* (2019a) are about 10 μm . Consequently, at the same optical density, the
214 bacterial density in this study is about 3 times higher of that in Wang *et al.* (2019a).
215 Because of the difference in bacterial size, the ureolysis rate may vary when the bacterial
216 optical densities are the same. Therefore, in this study, the bacterial cells were obtained
217 from one batch of bacterial suspension, where the sizes of bacterial cells were relatively
218 consistent, and the bacterial densities were modified to obtain a variety of bacterial
219 activities in terms of ureolysis rate.

220

221 **Bacterial density during MICP processes**

222 Three MICP processes using different bacterial densities were conducted in microfluidic
223 experiments. Optical densities of the bacterial suspensions were measured prior to the
224 injections of bacterial suspensions. Bacterial densities (in cells per ml) of the bacterial
225 suspensions were quantified (i) after injection of bacterial suspension, (ii) after 2 hours
226 of settling, and (iii) after injection of the cementation solution. The results are presented
227 in Table 2. The corresponding microscope images and results are presented in Figures
228 3a and 3b, respectively. When the initial bacterial densities were $(0.96 \pm 0.03) \times 10^8$,
229 $(3.92 \pm 0.29) \times 10^8$ and $(11.90 \pm 0.61) \times 10^8$ cells/ml, after 2 hours of settling the bacterial

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230 densities increased to $(1.92 \pm 0.13) \times 10^8$, $(6.09 \pm 0.34) \times 10^8$ and $(15.4 \pm 0.88) \times 10^8$ cells/ml,
231 respectively, due to bacterial growth *in situ* (Table 2 and Figure 3b). The highest growth
232 rate was obtained when the initial bacterial density was low (about 1×10^8 cells/ml); the
233 cell density became about 2 times higher than the initial density after 2 hours. When the
234 initial bacterial density was high (about 4×10^8 cells/ml), the bacteria growth rate was
235 about 1.5 times higher than the initial density. When the initial bacterial density was very
236 high (about 12×10^8 cells/ml), the growth rate was about 1.25 times higher than the initial
237 densities, which was the lowest among the three cases. The difference in bacterial
238 growth rate might be because the relative abundance of nutrients available to the
239 bacterial population varied depending on the initial bacterial density, with individual
240 bacteria in more concentrated bacterial suspensions being exposed to a smaller share
241 of the total nutrients available.

242

243 After the injection of cementation solution, about 30% of the bacteria (approximately
244 0.6×10^8 , 2.0×10^8 and 5.2×10^8 cells/ml for the three cases) remained attached to the inner
245 surface of the microfluidic chip compared to the number of bacteria present after bacterial
246 settling (Table 2 and Figure 3b). The actual bacterial density is expected to be higher
247 than these values since bacteria aggregation also occurred after the cementation
248 solution injection, especially when the bacterial density was high, and the number of
249 bacteria present in bacteria aggregates could not be counted. The percentage of bacteria
250 remaining (30%) is lower than that in Wang *et al.* (2019a), which was 45% after the first
251 injection of cementation solution. This might be because the bacterial settling time was
252 2 hours in this study, which is lower than the settling time used in Wang *et al.* (2019a),
253 which was 24 hours. In this study, the 2 hours bacterial settling time was used to study
254 the effect of bacterial density on the kinetics and characteristics of MICP.

255

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256 Bacteria's attachment to and detachment from soil particles are affected by several
257 factors such as the surface properties of soil particles, the behaviour of bacteria and pore
258 fluidic composition (Dunne, 2002; Chen et al., 2010; Liu et al., 2011; Persat et al., 2015).
259 To simulate the surface properties of real sandy soils, the PDMS surface was treated to
260 be hydrophilic and negatively charged and the bacterial suspension was prepared in the
261 same condition as it could be applied in the field (Wang et al., 2019b). In addition,
262 upscaling experiments conducted by both microfluidic chip tests and soil column tests
263 also showed consistent results observed at both scales (Wang et al., 2020, Wang, 2019).
264 Deionised water was used to saturate the microfluidic chips in these studies, which is the
265 same as the conditions reported in many MICP papers, but they did not consider the
266 effects of parameters such as pH, chemicals, temperature and dissolved oxygen of the
267 pore fluid on the bacteria-soil interactions in real soils. The bacteria-soil interactions
268 under the conditions that simulate real MICP-treated subsurfaces and natural
269 environment by varying the composition of the pore fluid and environmental factors can
270 be considered in future studies. It should be noted that there are both live and dead
271 bacteria in the bacterial suspensions, and the current method presented in this study
272 cannot be used to distinguish between dead and live bacterial cells. Other experimental
273 methods are needed to investigate the effects of live and dead bacteria on the formation
274 of calcium carbonate precipitation.

275

276 **Ureolysis rate**

277 To examine the effect of bacterial density on the rate of ureolysis, a batch test was
278 conducted in which the bacterial densities in bacteria-urea mixtures were varied and the
279 hydrolysis rate was measured by using the conductivity method described by Whiffin *et*
280 *al.* (2007). The urea concentration in the bacteria-urea mixture was 1.0 M before the
281 hydrolysis of urea occurred (Figure 4). Bacterial density in the range of 0.5×10^8 to 4×10^8
282 cells/ml increased the ureolysis rate (Figure 4), while for bacterial densities exceeding

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283 around 4×10^8 cells/ml the ureolysis rate no longer increased with bacterial density. The
284 linear increase in ureolysis rate associated with bacterial densities in the range of 1×10^7
285 - 2×10^8 cells/ml is consistent with the results obtained by Lauchnor *et al.* (2015). The
286 highest previously reported ureolysis rate was measured when bacterial density was
287 2×10^8 cells/ml (Stocks-Fischer *et al.*, 1999; Lauchnor *et al.* 2015). However, the current
288 study shows that, when the bacterial density exceeds 5×10^8 cells/ml, the ureolysis rate
289 does not linearly increase with bacterial density, which might be because there could be
290 insufficient nutrients available to sustain bacterial growth at such high bacterial densities.

291

292 **Bulk precipitation rate of CaCO₃**

293 The precipitation of CaCO₃ with time in the three microfluidic experiments is shown in
294 the images taken at 0.5 hr, 1 hr, 3 hr and 24 hr after the cementation solution injection in
295 Figure 5a. Changes in image intensity with time in the three cases with varied bacterial
296 densities are shown in Figure 5b. The areas in the microfluidic chips occupied by CaCO₃
297 crystals were also different, where a higher bacterial density (e.g. 5.2×10^8 cells/ml)
298 resulted in crystals occupying a larger area, as shown by the difference in the image
299 intensities.

300

301 We hypothesized that the point when image intensity no longer increases indicated the
302 completion of the CaCO₃ precipitation process. The time at which the image intensity
303 stopped increasing in these three cases also varied. The time required for CaCO₃
304 precipitation to complete decreased from 15 hrs to 1.5 hrs when the bacterial densities
305 increased from 0.6×10^8 to 5.2×10^8 cells/ml. The correlation between precipitation rate
306 and bacterial density is shown in Figure 5b. Bacterial density positively affects the overall
307 CaCO₃ precipitation rate, and the average precipitation rate in the three cases are 0.016,
308 0.083 and 0.16 M/h when the corresponding bacterial densities were 0.6×10^8 , 2.0×10^8 ,
309 and 5.2×10^8 cells/ml, respectively.

310

311 **Precipitation rates and sizes of individual CaCO₃ crystals**

312 Individual CaCO₃ crystals are shown in the magnified images of one of the middle pores
313 inside the microfluidic chips at 0.5, 1, 1.5, 2, 6, 15 and 24 hours after the first cementation
314 injection in Figure 6a. The average crystal volumes calculated based on the measured
315 diameters at an interval of 15 minutes during the first 1.5 hours and over the 24 hours
316 are plotted against time in Figures 6b and 6c, respectively. The average crystal volume
317 data show that, unlike the effect of bacterial density on the overall precipitation rate of
318 CaCO₃, bacterial density has no effect on the growth rate of individual CaCO₃ crystals.
319 During the first 1.5 hours after the injection of cementation solution, the crystals grew
320 steadily at the same growth rate even though the bacterial density varied (Figure 6b).
321 The crystals grew to be about $380 \pm 40 \mu\text{m}^3$ by 1.5 hours for all the three bacterial density
322 cases (Figure 6b).

323

324 However, the time required for the crystals to finish growing and the final size varied in
325 the three cases. In the low bacterial density case (0.6×10^8 cells/ml case), crystal growth
326 continued over 15 hours, which was the longest among the three cases. The average
327 size of the crystals at the completion of crystal growth was about $8000 \mu\text{m}^3$, which was
328 the largest among the three cases. For the high bacterial density case (2.0×10^8 cells/ml
329 case), the overall precipitation rate indicated that the precipitation process completed by
330 around 3 hours (Figure 5b), while individual crystal precipitation rates shows that the
331 process completed by around 10 hours (Figure 6c). The growth of the crystals between
332 3 and 10 hours is largely due to the dilution of unstable crystals (circled in Figure 6a),
333 which contributed to the growth of larger crystals. This result is consistent with the
334 observation obtained in Wang *et al.* (2019b). The final average size of the crystals was
335 $1800 \mu\text{m}^3$ after 10 hours. For the very high bacterial density case (5.2×10^8 cells/ml),

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336 crystals stopped growing by 1.5 hours and the final average size of the crystals was
337 about 400 μm^3 after 1.5 hours (Figure 6a and 6b).

338

339 **Crystal quantity**

340 The quantity of crystals formed when the bacterial density was very high (5.2×10^8 cells/ml)
341 is compared to when the bacterial density was high (2.0×10^8 cells/ml) in Figure 5a and
342 6a. When the bacterial density was low (0.6×10^8 cells/ml), the number of crystals was
343 the lowest among the three cases (Figure 5a and 6a). To illustrate this, the number of
344 crystals in the three cases at each instance when imaging was taken within the first 24
345 hours were quantified (Figure 7). The CaCO₃ crystal concentration represents the
346 quantity of CaCO₃ crystals formed per unit volume (i.e. 1 ml). A higher bacterial density
347 resulted in a larger quantity of crystals. When bacterial density was 0.6×10^8 , 2×10^8 and
348 5.2×10^8 cells/ml, the concentration of crystals formed was about 1.5×10^6 , 7×10^6 , and
349 2.1×10^7 per ml, respectively, at 24 hours after the cementation solution injection.
350 Bacterial density positively correlated with the number of crystals and the overall crystal
351 growth rate.

352

353 The change in the number of crystals with time differed among the three cases. When
354 the bacterial density was 0.5×10^8 cells/ml, the number of crystals increased to around
355 2×10^6 per ml soon after the cementation solution injection. When the bacterial density
356 was 2.0×10^8 cells/ml, the number of crystals increased to around 14×10^6 per ml by 3
357 hours and then decreased to around 7×10^6 per ml by around 10 hours. The decrease in
358 crystal number was due to the dissolution of unstable crystal forms. When the bacterial
359 density was 5.2×10^8 cells/ml, the number of crystals increased to around 20×10^6 per ml
360 by around 3 hours after the cementation solution injection. Dissolution of crystals
361 occurred but was not as obvious compared to when the case when the bacterial density
362 was 2.0×10^8 cells/ml.

363

364 **Crystal type and dissolution**

365 It was found that less stable and smaller CaCO₃ crystals may dissolve at the expense of
366 growth of more stable and larger CaCO₃ crystals (Wang et al., 2019b). As shown in
367 Figures 6 and 7, crystal dissolution occurred in the cases when the bacterial density was
368 either 2×10^8 cells/ml or 5.2×10^8 cells/ml, but not when the bacterial density was 0.6×10^8
369 cells/ml. To investigate the effects of bacterial density on the dissolution of the crystals,
370 microscope images captured at different instances each of the 12 cementation solution
371 injections are shown in Figure 8. Figures 8a and 8b show the images taken between 0
372 and 24 hours after the first and the second injections of cementation solution,
373 respectively. Figure 8c shows the images taken at 24 hours after the 3rd, 6th, 9th and 12th
374 injections of cementation solution.

375

376 When the bacterial density was low (0.5×10^8 cells/ml in this study), the crystals that were
377 present 24 hours after the cementation solution injection were mainly prismatic,
378 suggesting that the crystals are calcite (Al Qabany *et al.*, 2012; Zhao *et al.*, 2014). These
379 crystals continued growing during the intervals between injections of cementation
380 solution. When the bacterial density was high (2×10^8 cells/ml), the crystals which formed
381 after injections of cementation solution were mainly spherical or prismatic. The spherical
382 crystals were relatively unstable and often dissolved, while the prismatic crystals stayed
383 stable. Both the shape and relative solubility of these crystals are consistent with those
384 of calcite and vaterite, respectively (Wang et al., 2019b). When the bacterial density was
385 very high (5.2×10^8 cells/ml), bacteria aggregates were observed after the first
386 cementation solution injection. Irregular-shaped crystals formed on top of them (Figure
387 8c). Spherical crystals were also observed. Although this form of CaCO₃ precipitates
388 remained present after several initial injections of cementation solution (Figures 8c), they
389 were eventually replaced by more stable forms of CaCO₃ crystals. This suggests that

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390 when bacterial density is high, the formation of CaCO₃ follows the ACC-vaterite-calcite
391 sequence as described in Wang *et al.* (2019b).

392

393 A supersaturated state is required for CaCO₃ precipitation to occur, meaning that the
394 solution has to contain more Ca²⁺ and CO₃²⁻ ions than could normally be dissolved by
395 the solvent. The supersaturation ratio *S* has been used to quantify the level at which
396 supersaturation induces CaCO₃ precipitation, which is defined as:

397
$$S = \frac{[Ca^{2+}] \times [CO_3^{2-}]}{K_{sp}} \quad 5$$

398 where [Ca²⁺] and [CO₃²⁻] are the concentrations of calcium and carbonate ions, and *K_{sp}*
399 is the equilibrium CaCO₃ solubility product for each experimental temperature (Stumm &
400 Morgan, 1996). A supersaturation ratio that is higher than 1 is required for precipitation
401 to occur.

402

403 CaCO₃ precipitates can exist as several polymorphs, each of which have different *K_{sp}*
404 values at different temperatures. At 25 °C, the *K_{sp}* values of the four main polymorphs of
405 CaCO₃ (calcite, aragonite, vaterite, and amorphous CaCO₃) are 10^{-8.48} M², 10^{-8.34} M², 10^{-7.91}
406 M² and 10^{-6.40} M², respectively (Plummer & Busenberg, 1982; Brečević & Nielsen,
407 1990). Therefore, when [Ca²⁺]×[CO₃²⁻] is below 10^{-8.48} M², no precipitation occurs in any
408 forms; when [Ca²⁺]×[CO₃²⁻] is between 10^{-8.48} M² and 10^{-8.34} M², only calcite precipitates;
409 when [Ca²⁺]×[CO₃²⁻] is higher than 10^{-6.40} M², all forms of CaCO₃ can precipitate. On the
410 other hand, after the generation of the different forms of CaCO₃, when [Ca²⁺]×[CO₃²⁻]
411 drops to below 10^{-6.40} M² but higher than 10^{-7.91} M², amorphous (ACC) dissolves whereas
412 the other forms of CaCO₃ can remain. When [Ca²⁺]× [CO₃²⁻] drops to between 10^{-8.48} M²
413 and 10^{-8.34} M², all forms of CaCO₃ dissolve while only calcite remains. When the relatively
414 less stable forms of CaCO₃ dissolve, the free Ca²⁺ and CO₃²⁻ can precipitate into the
415 other more stable forms of CaCO₃ as long as the supersaturation states are reached. In

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416 addition, when multiple forms of CaCO₃ can precipitate at the same time, the less stable
417 forms of CaCO₃ precipitate more quickly than the more stable forms of CaCO₃. Therefore,
418 the ACC-vaterite-aragonite-calcite transformation may occur.

419

420 During the MICP process, Ca²⁺ ions are normally present at concentrations in the range
421 of 0.1 M-1.5 M from the beginning of the CaCO₃ precipitation process, whereas the initial
422 concentration of CO₃²⁻ is zero (Whiffin *et al.*, 2007; van Paassen *et al.*, 2010; Al Qabany
423 & Soga, 2013; Cheng *et al.*, 2017). A diagram illustrating the relationship between phase
424 transformation and the initial supersaturation state is shown in Figure 9. The
425 concentration of Ca²⁺ was assumed to stay constant at 1.0 M. The supersaturation state
426 is dependent on both the hydrolysis of urea, which increases the concentration of CO₃²⁻,
427 and on the precipitation of CaCO₃, which decreases both the concentration of CO₃²⁻ and
428 Ca²⁺. Because bacterial density affects the bulk ureolysis rate, it also affects the
429 supersaturation state, which in turn influences the formation of different phases of CaCO₃.
430 When the bacterial density is low, the concentration of CO₃²⁻, which is hydrolysed from
431 urea, increases slowly up to the calcite forming line as shown in Figure 9, after which
432 calcite starts forming. When the concentration of CO₃²⁻ is balanced between the forming
433 lines of aragonite and calcite, only calcite can form. Similarly, depending on bacterial
434 density, the other forms of CaCO₃ can also either form or not form, depending on whether
435 the supersaturation state of that type of CaCO₃ is researched or not. When multiple forms
436 of CaCO₃ precipitate, ACC-vaterite-aragonite-calcite transformation may occur.

437

438 **Bacteria aggregation and crystal aggregation**

439 When the bacterial density is very high (5.2×10⁸ cells/ml in this study), bacteria
440 aggregates and crystal aggregates were observed after the first injection of cementation
441 solution (Figure 8). To observe the effect of bacteria aggregates on the formation of
442 CaCO₃ crystal aggregates, images of bacteria aggregates and crystal aggregates in the

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443 same spot of the microfluidic chip are shown in Figure 10. Bacteria aggregates observed
444 after the first injection of cementation solution are shown in Figure 10a. In the same spot,
445 crystal aggregates observed after the 12th injection of cementation solution are shown in
446 Figure 10b. To observe the effect of bacteria aggregates on the formation of CaCO₃
447 crystals in more detail, the magnified images of the squares in Figure 10a taken at 0, 20
448 min, 1 h and 1 day after the first injection of cementation solution are shown in Figure
449 10c, and the images taken 24 hours after the 2nd, 3rd, 5th and 7th injections of cementation
450 solution are shown in Figure 10d.

451

452 After the first injection of cementation solution, the bacteria aggregated and irregular-
453 shaped CaCO₃ crystals formed on the bacteria aggregates (Figure 10c, 0 min image).
454 The bacteria aggregation continued growing, which is shown by the increase in image
455 intensity at 20 min compared with 0 min (Figure 10c, 20 min image). At 20 mins, however,
456 spherical crystals formed on the bacteria aggregates (Figure 10c, 20 min image). The
457 spherical crystals continued growing in size during the first hour after injection (Figure
458 10c, 1 h image). In addition, more spherical crystals also formed, but not on the bacteria
459 aggregates (Figure 10c, 1 h image). The spherical crystals were not stable and some
460 dissolved by 24 hours after injection (Figure 10c, 1 d image). During the following
461 injections from the 2nd to the 7th, even though more unstable crystals appeared and
462 disappeared, the crystals that were formed on the bacteria aggregates continued
463 growing (Figure 10d). Because the crystals are so close to each other, they merged into
464 one large crystal aggregate as they grew (Figure 10d, 7th injection image).

465

466 Crystal aggregates have been observed in many MICP studies (van Paassen 2009;
467 Cheng et al., 2017). This experiment suggests that the crystal aggregates may have
468 formed due to crystal nucleation spots being close to each other. As the crystals grew,
469 they merged into one big aggregate. As the number of bacteria has an effect on the

470 number of nucleation sites, more crystals formed when more bacterial cells were present
471 in a given volume. Therefore, the crystals are more likely to be located closer to each
472 other. In addition, because bacteria aggregates contain a high density of bacterial cells,
473 the likelihood of crystals growing on or surrounding them may also be higher than the
474 likelihood for single bacterial cells. In this particular case, the crystal aggregates present
475 within the pores occurred at locations similar to the bacterial aggregates.

476

477 **Conclusions**

478 In this study, microfluidic chip experiments were conducted to investigate the effects of
479 bacterial density on both the kinetics and characteristics of CaCO₃ precipitation at the
480 particle scale. Three bacterial densities (0.6 (low), 2.0 (high) and 5.2×10⁸ (very high)
481 cells/ml counted after the first cementation solution injection) were applied in staged
482 injection MICP procedures. Apart from bacterial density, other experimental parameters
483 including the content and concentration of cementation solution, temperature, and
484 injection flow rate of bacterial suspension and cementation solution were kept constant.
485 Both the overall precipitation rate of CaCO₃ and the growth rate of individual CaCO₃
486 crystals were quantified. In addition, crystals characteristics in terms of size, number and
487 dissolution processes were analysed. The main findings of the study are summarised as
488 follows.

489

490 When bacterial density is a low (0.6×10⁸ cells/ml in this study), the crystals form more
491 slowly than in the higher bacterial density cases, but when sufficient time is given (15
492 hours in this case), the sizes of CaCO₃ crystals were the largest among the three cases.

493 The large crystals could be more efficient in bonding sand with larger particles and larger
494 pore sizes. However, the number of CaCO₃ crystals produced is low. Improvement in
495 terms of soil strength may require a certain amount of soil particles to be bonded by

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496 CaCO₃ crystals. In addition, the time required for CaCO₃ to complete the precipitation is
497 long, which implies a long MICP treatment process.

498

499 When bacterial density is high (2.0×10^8 cells/ml in this study), the size of CaCO₃ crystals
500 formed might be small and unstable, but over time may transform into larger crystals and
501 more stable forms. The crystals formed at the particle contacts should be big enough to
502 efficiently bond the soil particles, which in turn contributes to the strength and stiffness
503 of MICP treated soils. Therefore, when such a high bacterial density is used, the
504 engineering performance efficiency of MICP-treated soils might be better when a longer
505 treatment duration is applied so that the smaller crystals can reprecipitate into large ones.

506

507 When bacterial density is very large (5.2×10^8 cells/ml in this study), the rate of CaCO₃
508 precipitation is increased, but this may be due to the formation of large amounts of the
509 unstable form of CaCO₃, ACC. Time-dependent transformation of unstable forms of
510 CaCO₃ into more stable forms of CaCO₃ occurs. ACC has a lower density compared to
511 CaCO₃ crystals, and may transport with flow, or be trapped in soil pores. For soils that
512 have small pores, these unstable crystals may locally clog the soil flow paths and affect
513 the homogeneity of MICP treatment.

514

515 High bacterial density (5.2×10^8 cells/ml in this study) also contributes to the formation of
516 bacteria aggregates after the injection of cementation solution, which in turn affects the
517 formation of crystal aggregates. As bacteria aggregates are notably larger compared
518 with individual bacteria, bacteria aggregates might be less likely to become
519 homogeneously distributed within the soil matrix, especially when they are large enough
520 to clog the pores which prevents the transport of other bacteria and bacteria aggregates
521 with flow. As the formation of crystal aggregates is affected by bacteria aggregates, a
522 non-homogeneous distribution of bacteria within a soil matrix also results in a non-

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523 homogenous distribution of CaCO₃. Further work would be useful to investigate the effect
524 of bacterial density on the distribution of bacteria and the resulting effect this has on the
525 distribution of CaCO₃ content.

526

527 Based on solubility, calcite is the most stable form of CaCO₃ both physically and
528 chemically, and it has been suggested that the precipitation of calcite is preferred for a
529 permanent stable cementation (van Paassen, 2009). Therefore, when designing an
530 MICP treatment protocol, the effects of bacterial density on the phase transformation and
531 the time for crystals to become stable need to be considered. This study suggests that
532 low bacterial density contributes to the production of stable CaCO₃ from the beginning,
533 but the precipitation takes longer to complete. High bacterial density leads to precipitation
534 of less stable forms of CaCO₃ first, even though the precipitation occurs faster. A longer
535 treatment time is required for CaCO₃ to transform from less stable forms to more stable
536 forms.

537

538 The use of microfluidic experiments is useful to assess the ideal bacterial density for
539 various conditions in the field. MICP treatment parameters such as initial bacterial
540 density, bacterial settling time, and injection flow rate of cementation solution all affect
541 the delivered bacterial cell concentration in the soil matrix. Bacterial density directly
542 affects the size and number of CaCO₃ crystals formed, which affect the treatment
543 efficiency of MICP for strengthening soils. Correlations between bacterial density and the
544 properties of CaCO₃ crystals in terms of number and size from this study could be helpful
545 for the design of MICP treatment protocols for soils with different particle sizes.

546

547 **Data Availability Statement**

548 All data, models, and code generated or used during the study appear in the submitted
549 article.

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550

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561

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643 **Table 1** Summary of bacterial, chemical and injection parameters associated with the microfluidic
644 chip experiments

Condition	Dilution	Bacterial	Injection	Injection
No.	ratio	OD ₆₀₀	number	interval (day)
1	1:14	0.2	12	1
2	1:5	0.5	1	-
3	1:2	1.0	12	1
4	2:1	2.0	1	-
5	1:0	3.0	12	1

645

646 **Table 2** Summary of the changes in bacterial density during MICP treatment

OD ₆₀₀	After BS injection		After settling		After CS injection	
	Average	Derived	Average	Derived	Average	Derived
Before injection	(×10 ⁸ cells per ml)					
0.2	0.95867	0.03186	1.92	0.13	0.56933	0.09581
1.0	3.92333	0.28825	6.09	0.335	2.01333	0.16131
3.0	11.9	0.61644	15.4	0.875	5.212	0.78289

647 Note: BS-bacterial suspension; CS-cementation solution

648

649 **Table 3** Summary of the changes in bacterial density during MICP treatment and associated overall
650 precipitation times

OD ₆₀₀	Bacterial density			Overall Precipitation		Reference
	After BS injection	After settling	After CS injection	Time (h)	Rate (M/h)	
Before injection	(×10 ⁸ cells per ml)					
0.2	1	1.9	0.6	15	0.016	P1, this study
1.0	4	6.1	2.0	3	0.083	P3, this study
3.0	12	15.4	5.2	1.5	0.160	P5, this study
1.0	-	-	-	-	0.042	Al Qabany et al., 2012

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- 656 **Figure 1** Schematic of the microfluidic chip experiments (Wang et al., 2019a)
- 657 **Figure 2** (a) Microscope images of one pore at the centre of the microfluidic chip
658 taken at ten minutes after the injection of bacterial suspensions with initial OD₆₀₀
659 values of 0.2, 0.5, 1.0, 2.0 and 3.0; (b) correlations between the initial OD₆₀₀ of
660 the bacterial suspensions and bacterial density at ten minutes after bacterial
661 injection, cell concentration = $OD_{600} \times 4 \times 10^8$, data are presented as mean \pm
662 standard error, and each measurement was repeated three times; (c) image of
663 one pore at the centre of the microfluidic chip taken at 2 hours after the injection
664 of a bacterial suspension with initial OD₆₀₀ values of 0.8 showing bacterial size
665 being about 10 μm ; (d) magnified image of middle image of (a) showing bacterial
666 size being about 3 μm in this study
- 667 **Figure 3** (a) Microscope images of one pore at the centre of the microfluidic chip
668 containing bacterial suspensions with their initial bacterial OD₆₀₀ were 0.2, 1.0 and
669 3.0, taken at ten mins after bacterial injection, after two hours of settling and after
670 the first injection of cementation solution; (b) quantification of bacterial
671 concentration in the images
- 672 **Figure 4** Ureolysis rate and specific ureolysis rate plotted against bacterial
673 density
- 674 **Figure 5** (a) Microscope images taken at the centre of the microfluidic chip
675 containing bacterial suspensions at the densities of 0.5, 2.0 and 5.2×10^8 cell per
676 ml at 0.5, 1, 3 and 24 hours after the first injection of cementation solution; (b) the
677 mean intensity value of the pictures vs. time
- 678 **Figure 6** (a) Microscope images taken at the centre of the microfluidic chip
679 containing bacterial suspensions at the densities of 0.5, 2.0 and 5.2×10^8 cell per
680 ml taken at 0.5, 1, 1.5, 2.0, 6, 15 and 24 hours after the first injection of
681 cementation solution; (b) the average crystal volume vs. time in the 1.5 hours
682 plotted and their linear fit; (c) the average crystal volume vs. time in the 24 hours
683 after the first injection of cementation solution
- 684 **Figure 7** Scatter plot showing the change in the concentration of CaCO₃ crystals
685 with time
- 686 **Figure 8** Microscope images captured at (a) 3h, 6h, 12h, 24h after the first
687 injection of cementation solution, (b) 0h, 3h, 6h, 12h, 24h after the second
688 injection of cementation solution, and (c) 24 hours after the completion of the 3rd,
689 6th, 9th and 12th injection of cementation solution
- 690 **Figure 9** Scheme illustrating the precipitation-dissolution and phase
691 transformation, assuming the concentration of Ca²⁺ is constantly 1.0 M
- 692 **Figure 10** (a) Bacteria aggregates formed after the first injection of cementation
693 solution, (b) crystal aggregates aggregate formed 24 hours after the 12th injection
694 of cementation solution, (c) magnified images of the square in Figure 10(a) taken
695 at 0 min, 10 min, 20 min, 1h, 1 day after the 1st injection of cementation solution,
696 (d) magnified images of the square in Figure 10(a) taken at 24 hours after the 2nd,
697 3rd, 5th and 7th injections of cementation solution

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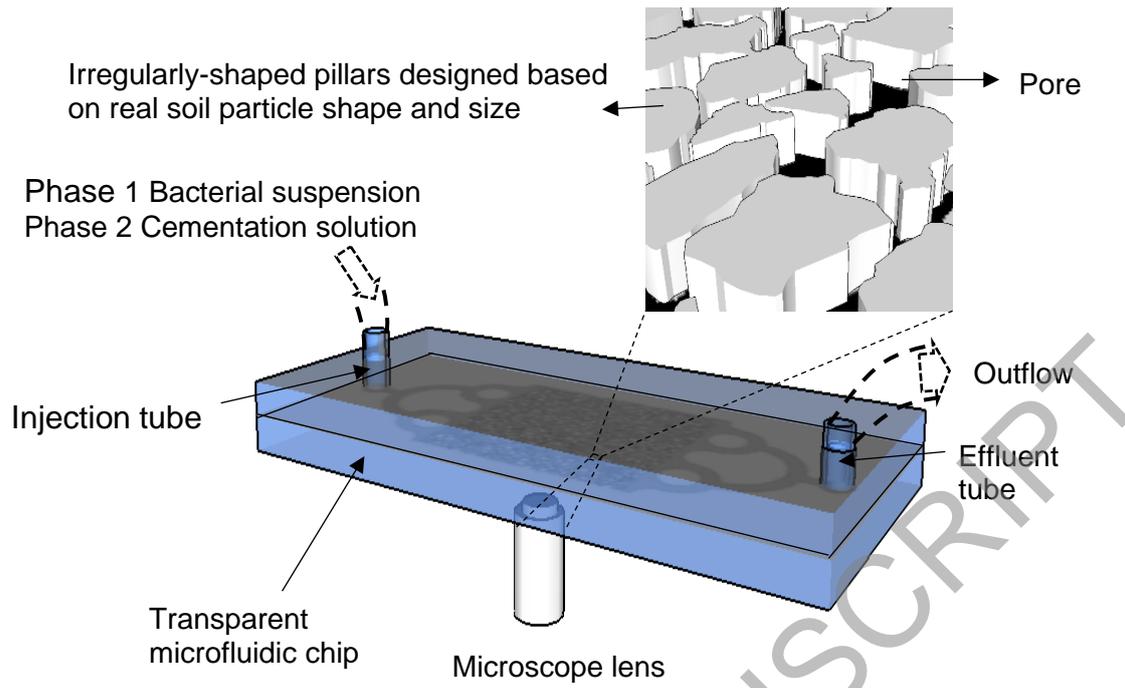
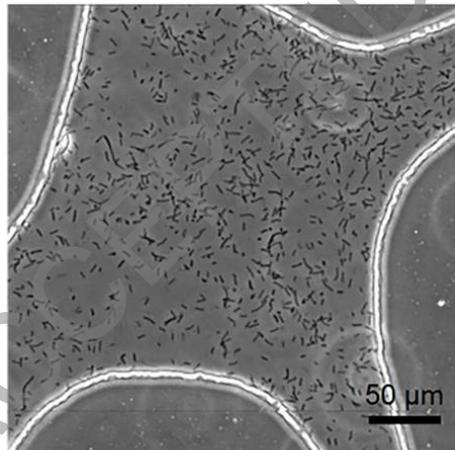
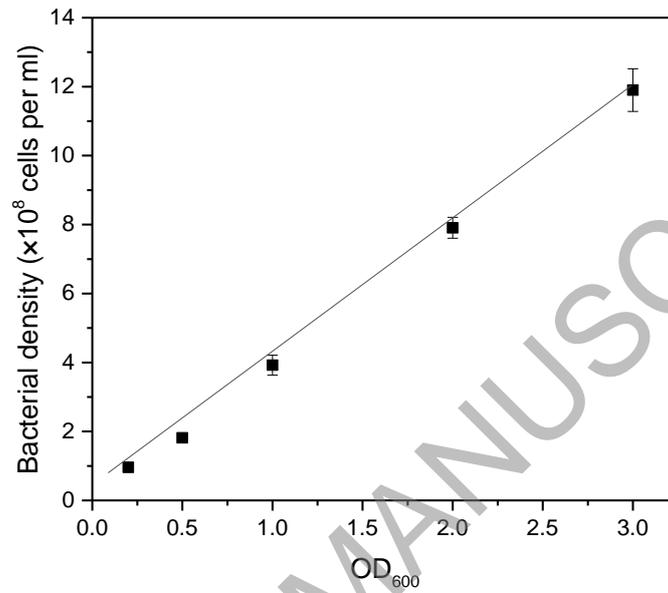
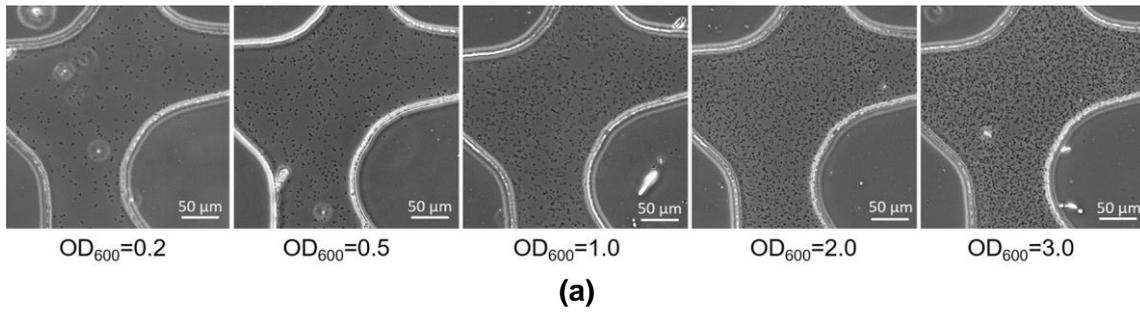


Fig 1

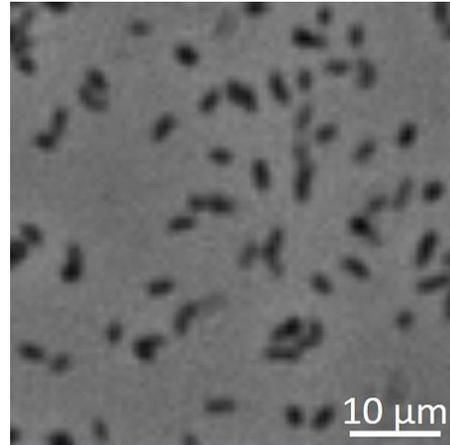
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from Wang et al., 2018



this study

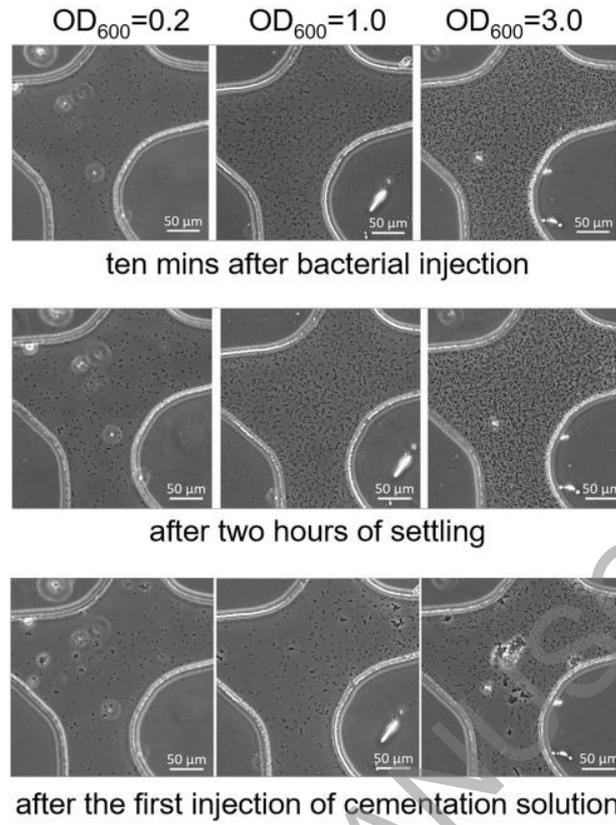
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(d)

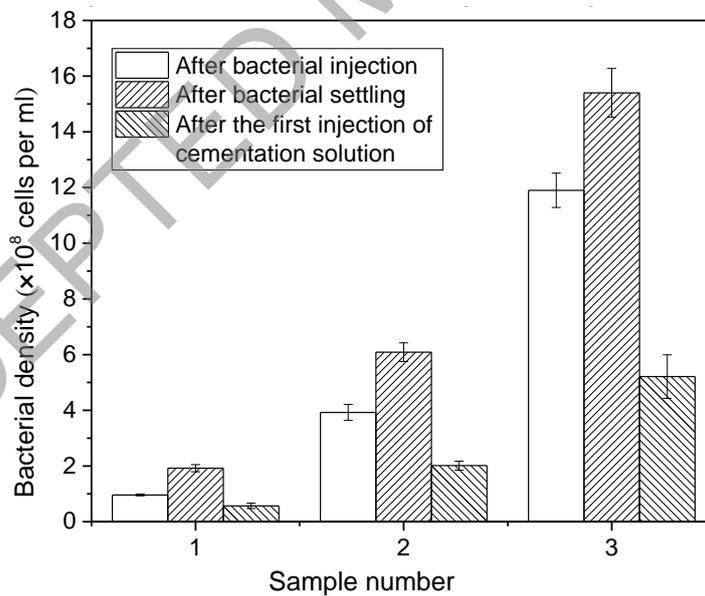
Fig 2

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(a)



(b)

Fig 3

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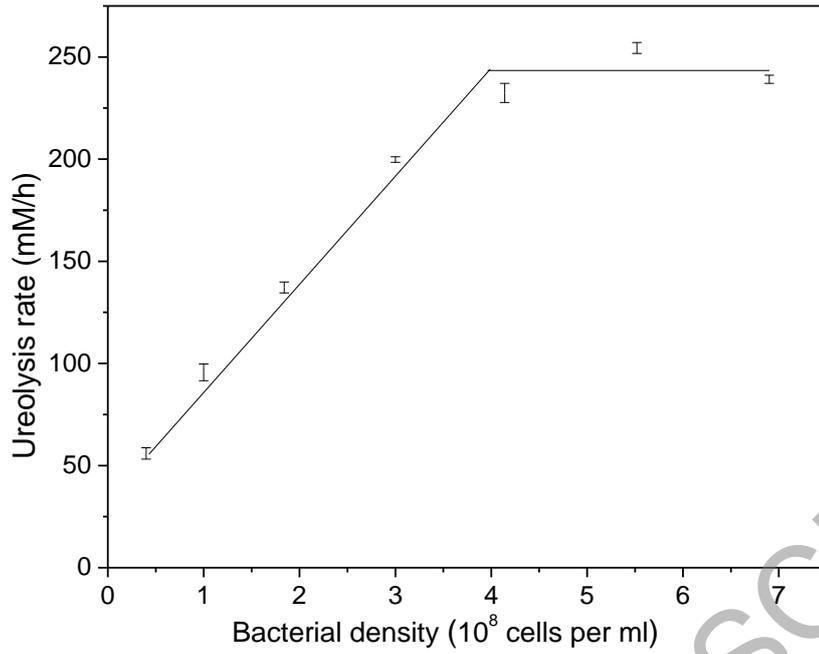
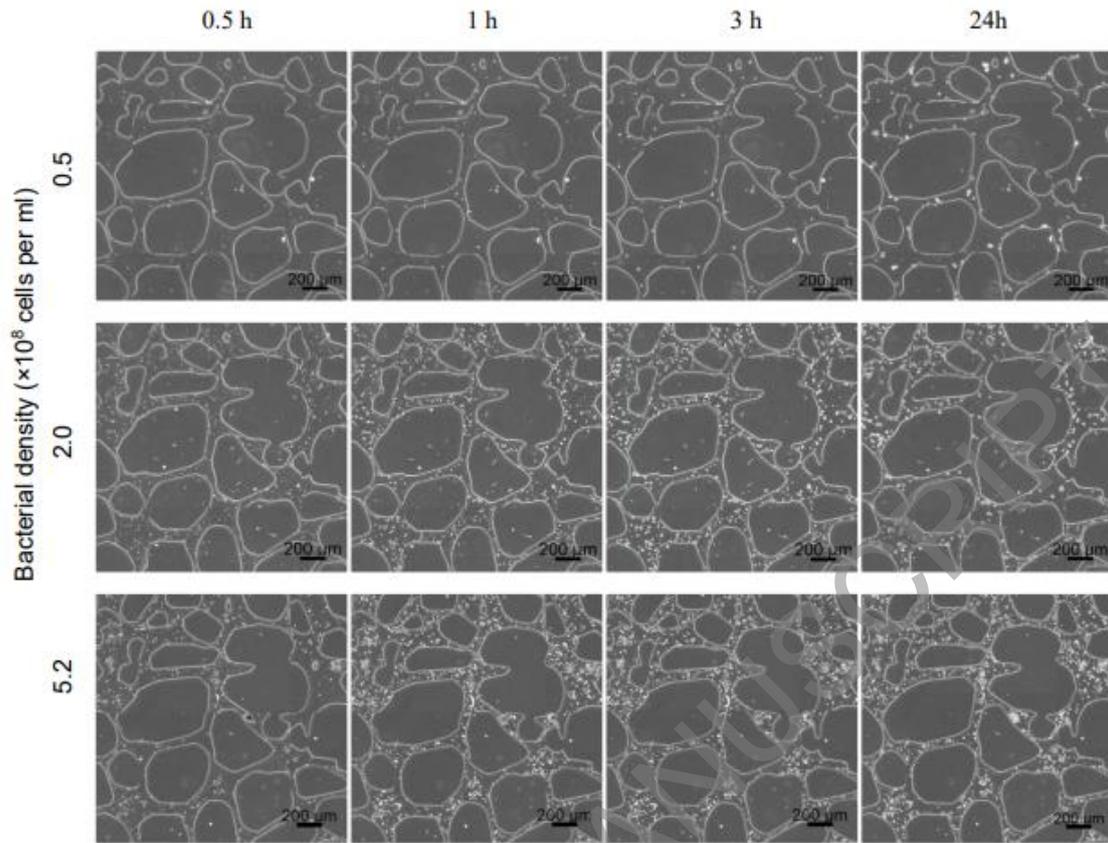


Fig 4

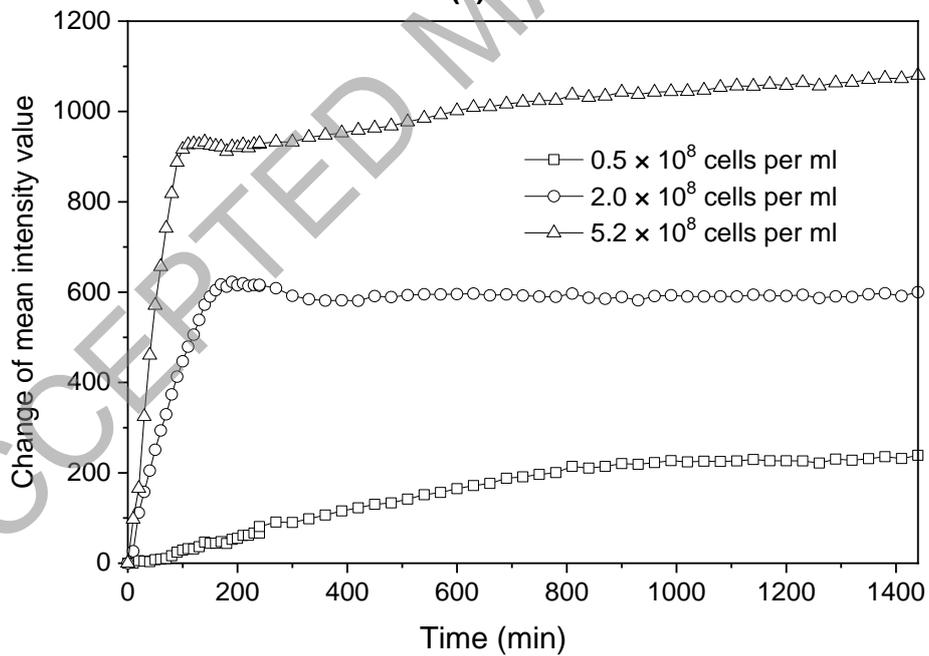
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(a)

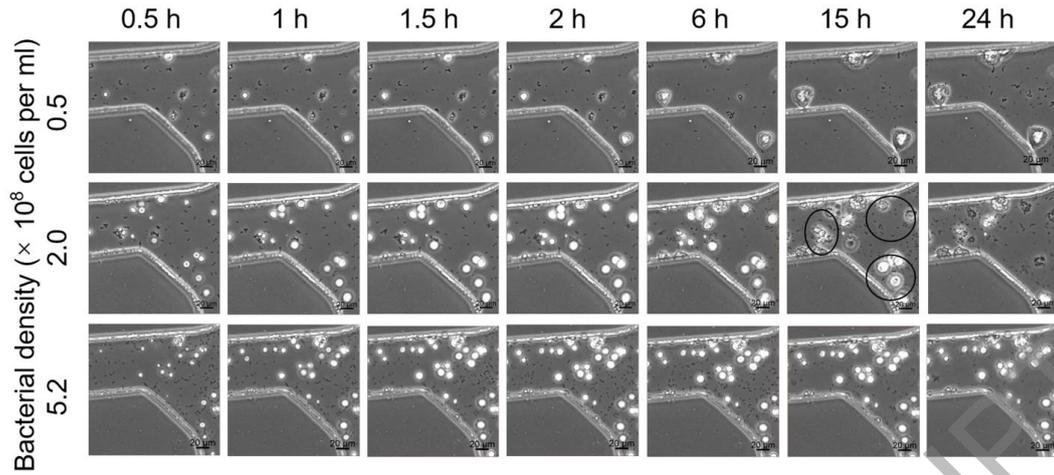


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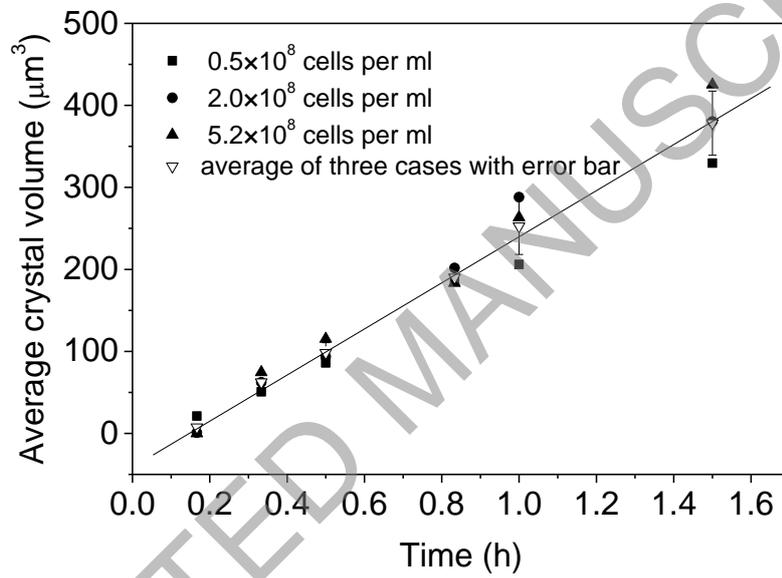
Fig 5

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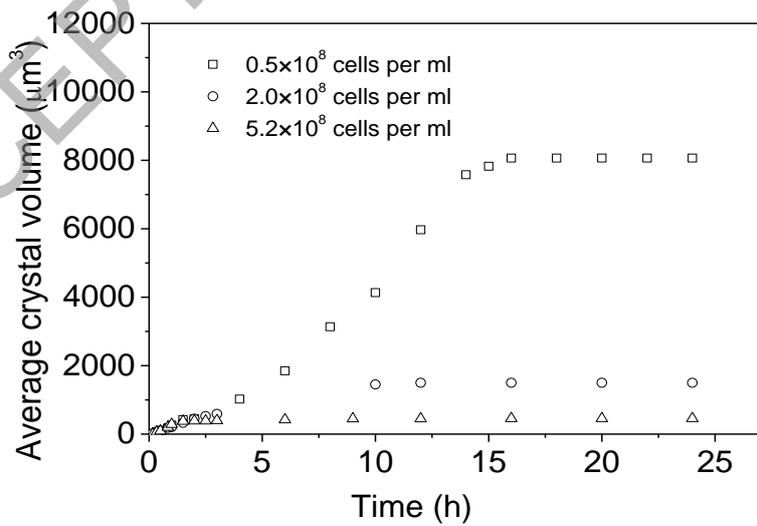
Yuze Wang, Kenichi Soga, Jason T. DeJong, Alexandre J. Kabla. Forthcoming. Effects of bacterial density on growth rate and characteristics of microbial-induced CaCO_3 precipitates: a particle-scale experimental study. ASCE Journal of Geotechnical and Geoenvironmental Engineering. [https://doi.org/10.1016/\(ASCE\)GT.1943-5606.0002509](https://doi.org/10.1016/(ASCE)GT.1943-5606.0002509)



(a)



(b)



(c)

Fig 6

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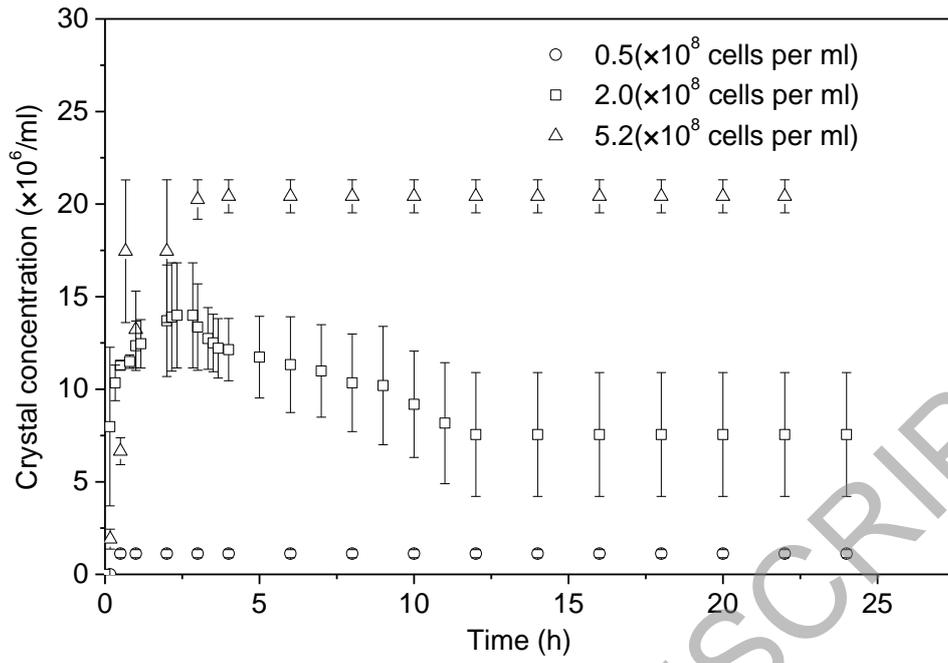
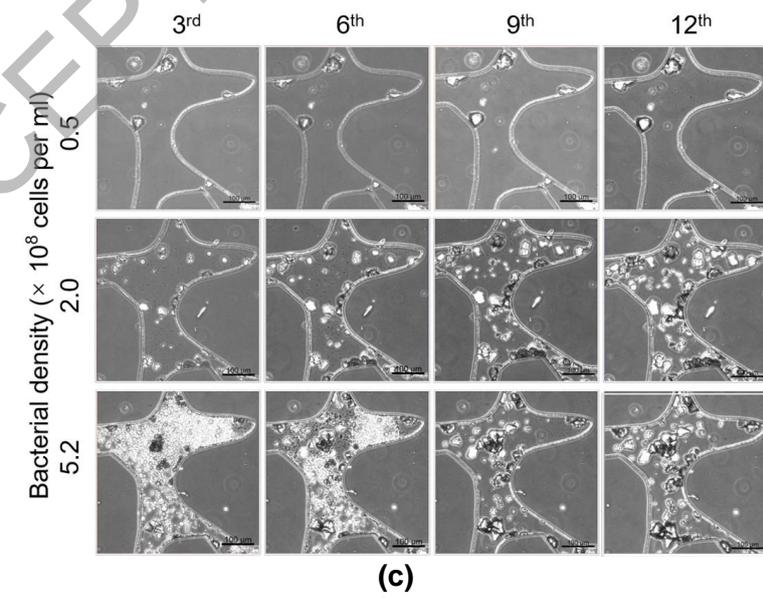
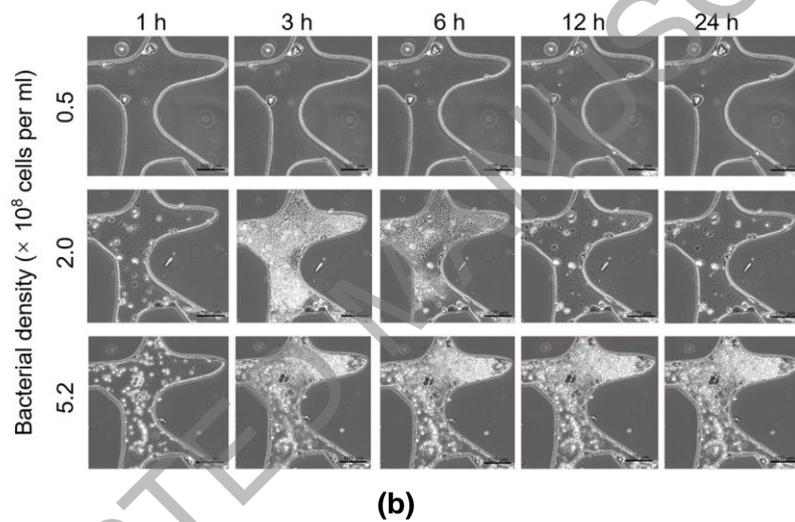
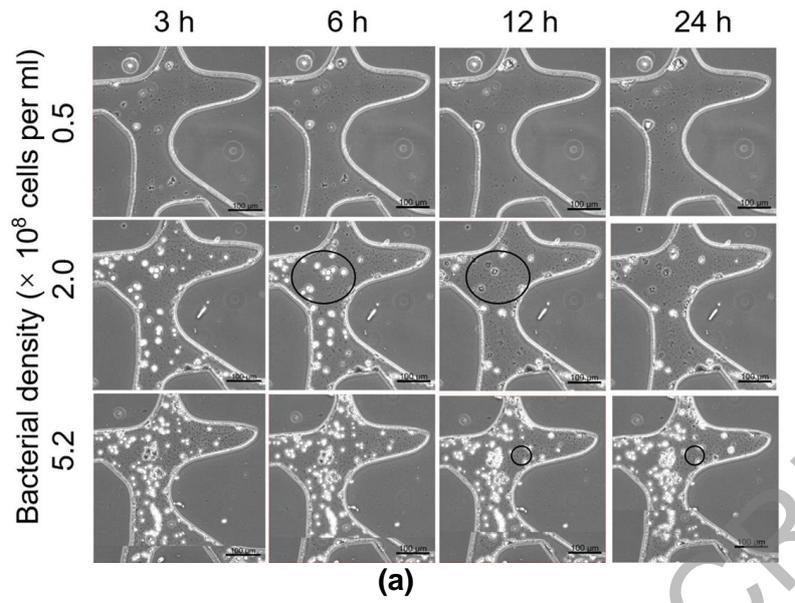


Fig 7

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(c)
Fig 8

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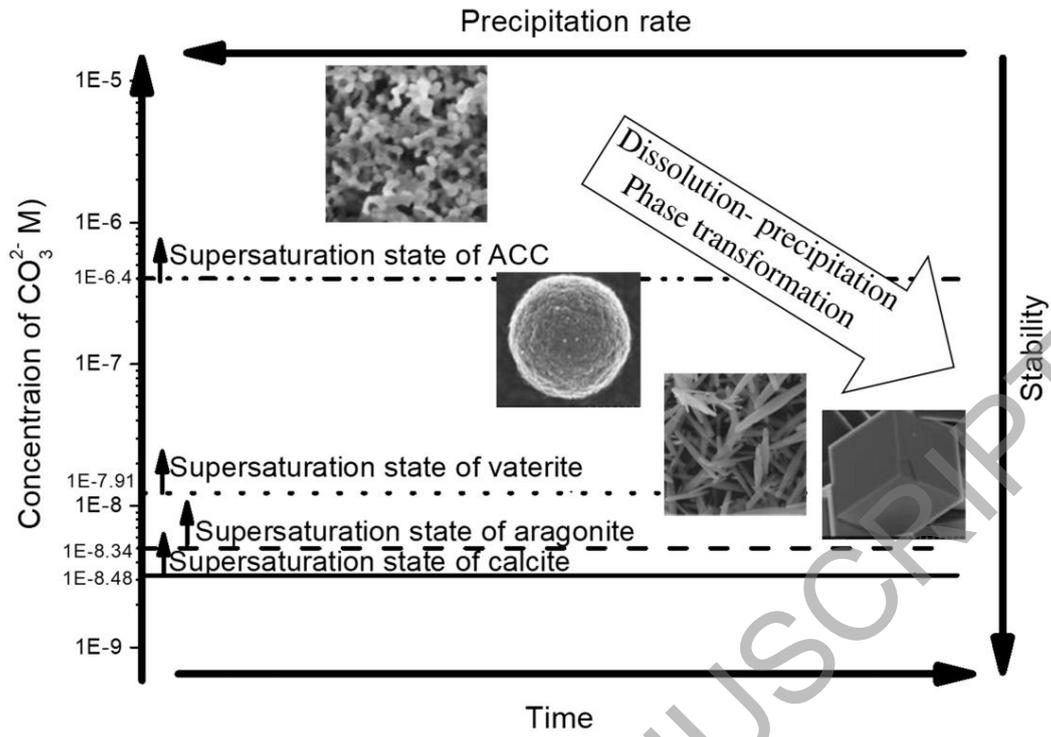


Fig 9

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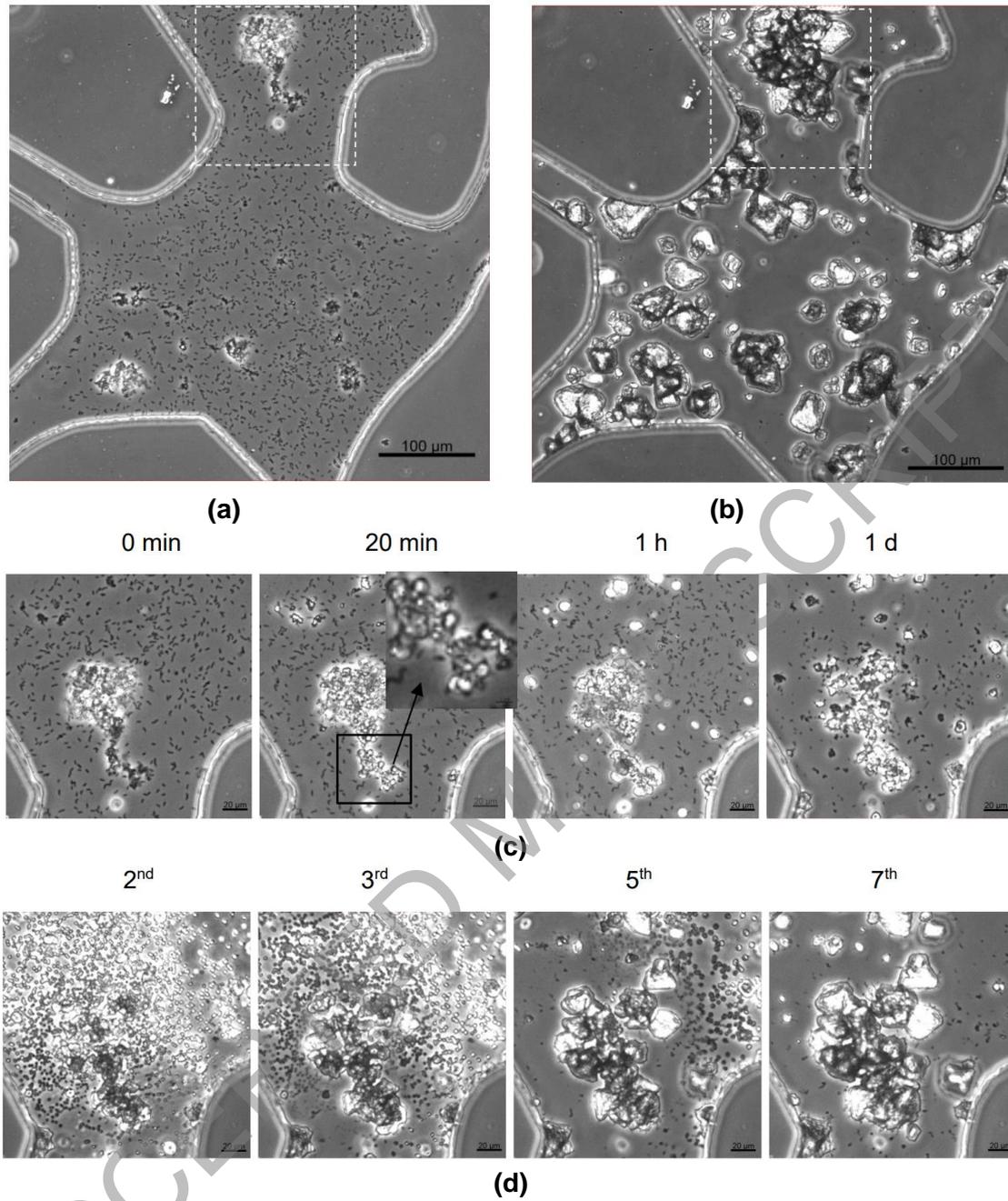


Fig 10