



# 3D bioprinting: current status and trends—a guide to the literature and industrial practice

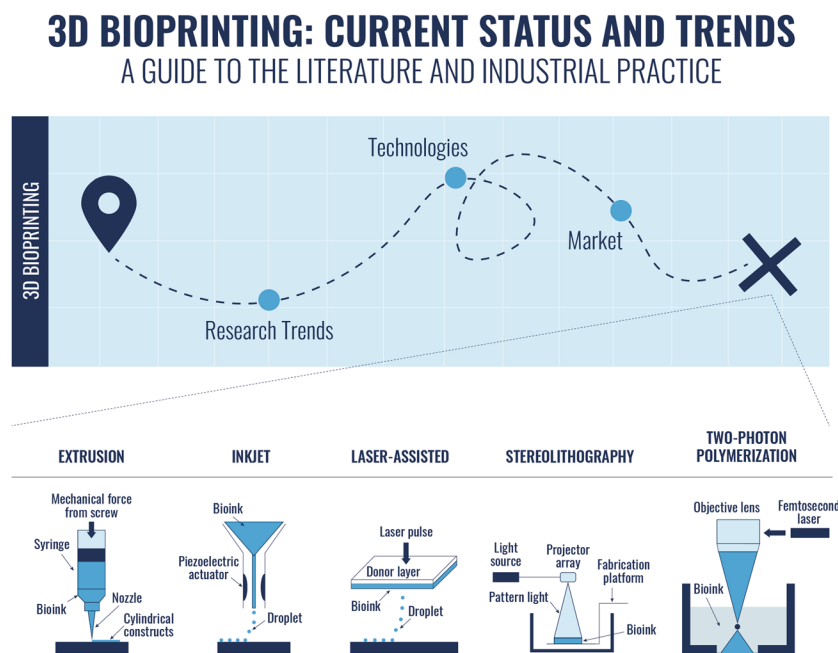
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## Abstract

The multidisciplinary research field of bioprinting combines additive manufacturing, biology and material sciences to create bioconstructs with three-dimensional architectures mimicking natural living tissues. The high interest in the possibility of reproducing biological tissues and organs is further boosted by the ever-increasing need for personalized medicine, thus allowing bioprinting to establish itself in the field of biomedical research, and attracting extensive research efforts from companies, universities, and research institutes alike. In this context, this paper proposes a scientometric analysis and critical review of the current literature and the industrial landscape of bioprinting to provide a clear overview of its fast-changing and complex position. The scientific literature and patenting results for 2000–2020 are reviewed and critically analyzed by retrieving 9314 scientific papers and 309 international patents in order to draw a picture of the scientific and industrial landscape in terms of top research countries, institutions, journals, authors and topics, and identifying the technology hubs worldwide. This review paper thus offers a guide to researchers interested in this field or to those who simply want to understand the emerging trends in additive manufacturing and 3D bioprinting.

## Graphic abstract



**Keywords** Additive manufacturing · 3D bioprinting · Biofabrication · Organ-on-a-chip · Tissue engineering

Extended author information available on the last page of the article

## Abbreviations

2D	Two-dimensional
3D	Three-dimensional
4D	Four-dimensional
ABS	Acrylonitrile butadiene styrene
AI	Artificial intelligence
AM	Additive manufacturing
CAD	Computer-aided design
CAGR	Compound annual growth rate
CNC	Computerized numerical control
DLP	Digital light processing
DOD	Drop-on-demand
ECM	Extracellular matrix
GelMA	Gelatin methacryloyl
hASCs	Human adipose stem cells
HD	High-definition
IBSC	Image-based single cell isolation
IF	Impact factor
iPSC	Induced pluripotent stem cell
ISS	International space station
PCL	Polycaprolactone
PLA	Poly(lactic acid)
PLGA	Poly(lactic-co-glycolic acid)
UK	United Kingdom
USA	United States
USD	United States Dollar
UV LED	Ultraviolet light emitting diode
WoS	Web of science

## Introduction

Bioprinting is a collection of additive manufacturing (AM) technologies, whose aim is to fabricate parts imitating real tissue and organ functionalities by combining both living and non-living materials in a specific three-dimensional (3D) spatial organization structure. As in traditional 3D printing or AM, the target is achieved through the use of computer-aided design (CAD) that represents the fundamental configuration of the target tissue or organ, in order to produce bioengineered structures that have various applications in regenerative medicine, tissue engineering, reconstructive surgery, drug discovery, pharmacokinetics, medical and basic cell-biology research [1]. Compared to traditional 3D printing or AM processes, bioprinting brings a main innovative feature, namely the printing of living cells within a specific medium called bioink, which adds many different challenges, such as how to avoid the deterioration of living cells while printing constructs that have a 3D volumetric shape similar to the ones of natural tissues and organs.

In light of the application of such manifolds and the growing interest towards personalized medicine, bioprinting methods have attracted increasing attention in recent years from both academia and industry, which has translated into extensive research efforts. During the last decade, many novel procedures and technologies related to biomanufacturing have emerged, ranging from dedicated 3D bioprinters [2] to specific “raw biomaterials” named bioinks [3, 4].

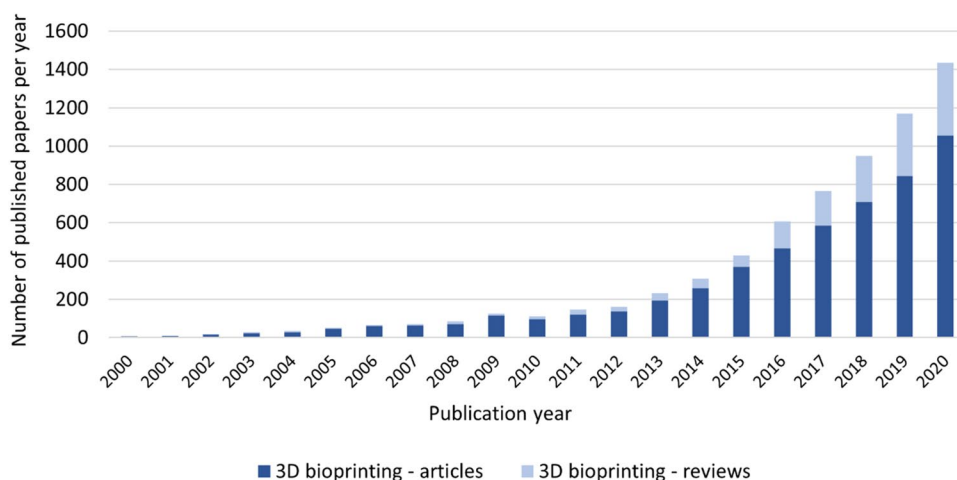
A bioprinter is a 3D printer that realizes biological tissue constructs by the layerwise deposition of living cells. To achieve this aim, bioprinters generally use bioinks, which are soft biomaterials loaded with living cells manipulated according to specific protocols to build biological constructs. The use of secondary dissolvable materials is an additional option to vertically support and protect cells during the printing process.

Although many bioprinting review papers focusing on describing techniques or bioink classifications have been published in recent years [3, 5–7], a systematic and quantitative investigation of the actual landscape has not been performed, including the analysis of papers, patents and companies with the aim of highlighting the actual distribution of key players in academia and industry, as well as the main topics currently under study. To the best of our knowledge, the first and only scientometric review on 3D bioprinting cannot be considered up-to-date including the latest scientific innovations in this area, as it was published in 2017 [8] based on data retrieved from 2000 to mid-2016. In fact, two-thirds of the total publications related to bioprinting to date have been published since 2016.

Given the rapid growth of this special field, the present work is aimed at stimulating the interest of scientists and experts already involved in traditional 3D printing or AM by highlighting the emerging trends and the most recent advancements [1, 9–12]. This review presents a *rational roadmap* to the scientific and patenting results produced to date, which can be especially useful for researchers new to the field, as they can quickly obtain the geographical distribution of laboratories and companies actively involved in 3D bioprinting combined with a critical analysis of their output in terms of publications, patents, new tools and manufacturing techniques.

The paper is organized as follows: the literature review results are presented and discussed in “[The academic research trends](#)” section with a detailed analysis of the most productive authors and active research networks worldwide. “[Market and patent landscape](#)” section describes the market and patent landscape to identify both emerging and established technology hubs. Finally, the main conclusions are drawn in “[Conclusions](#)” section.

**Fig. 1** 3D bioprinting publications by year: articles, blue; reviews, light blue



## The academic research trends

### Trends in the relevant scientific literature: critical data analysis and classification of applications and trends

Following previous scientometric studies and AM [8, 12], we based our literature analysis considering all research and review papers published in scientific journals included in Scopus (Elsevier) and Web of Science (WoS) in the past 20 years (from 2000 to 2020). We also used SciVal (<https://www.scival.com/>) as a supporting tool in our query. The latter was focused on bioprinting processes, materials and bioapplications according to the latest definition of bioprinting, and is a modified version of the one used by Rodríguez-Salvador et al. (details in the Supplementary Information). In order to better highlight the most recent trends, a detailed analysis was further performed with reference to scientific results published in the last four years, i.e., since 2016.

A total number of 13,111 papers (11,683 research articles and 2537 review papers) were initially collected using both the Scopus and WoS databases. An extensive cleaning and deduplication process was subsequently performed through EndNote (X9, Clarivate Analytics, Philadelphia, USA), leading to 9314 unique documents, consisting of 7574 research articles and 1740 review papers).

It is worth noting that 79% of these papers were published after 2014 and nearly 53% of total publications were published after 2017. Specifically, 61% (4620 out of 7574) of research articles and 74% (1288 out of 1740) of review papers have been published since 2016, showing an exponential growth of attention on this topic in the scientific literature. Figure 1 shows the total number of publications retrieved from Scopus for the last 20 years, where the steady rise during the past 10 years is clearly visible. This growing number of scientific papers led to a 143% increase in the number of review papers in a single year for 2016. Since

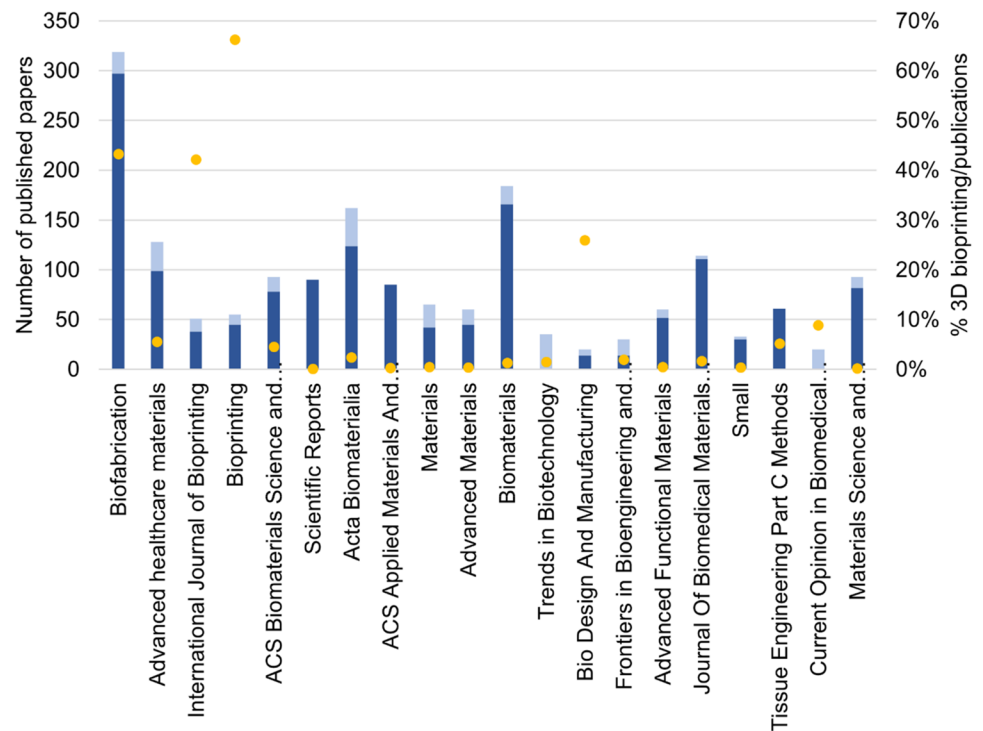
then, due to the continuous evolution and rapid innovation in this field, a constant annual growth rate of  $(28 \pm 9)\%$  in review papers has been reported.

In order to select the most relevant venues for 3D bioprinting papers, SciVal (<https://www.scival.com/>) was used to research on the topic *T.8060 (Bioprinting; Printability; Tissue Engineering)* together with InCites Journal Citation Reports to include information on Impact Factor, Article Citation Median and Review Citation Median focusing on 2018 and 2019 (details are also given in Table S1 of the Supplementary Information).

The number of papers published (usually referred to as ‘scholarly output’<sup>1</sup>) in the past five years was specifically used to select the twenty most productive journals in the bioprinting field. Figure 2 presents the main results of this ranking. As clearly seen in the figure, *Biofabrication* (with 319 publications, namely 297 articles and 22 review papers), *Biomaterials* (with 184 publications, namely 166 articles and 18 review papers), and *Acta Biomaterialia* (with 162 publications, consisting of 124 articles and 38 review papers) are the most prolific journals in this field. Moreover, the percentage of publications focusing on bioprinting with respect to the overall number of papers from 2000 to 2020 was used as an additional indicator of the level of attention to this topic (data retrieved from Scopus), and are shown as dots in Fig. 2. As expected, *Bioprinting* (66%), *Biofabrication* (43%), *International Journal of Bioprinting* (42%), and *Bio-Design and Manufacturing* (26%) are the top-focalized journals. Most of these are young journals (founded in 2009, 2015, 2016, and 2018, respectively) focusing on this novel field, with impact factors (IF) revealing their age and their specific field of focus (IF values ranging from 4.10 for *Bio-Design and Manufacturing* to 8.21 of *Biofabrication*,

<sup>1</sup> The Scholarly Output measures the number of research outputs [278].

**Fig. 2** The top twenty journals focusing on 3D bioprinting (SciVal-Scopus). The bars represent the number of publications (blue: articles, light blue: reviews) retrieved from Scopus, while the yellow dots represent the percentage of publications focusing on 3D bioprinting with regards to the total number of publications. The examined time interval is 2000–2020



compared with older and more generic journals such as *Advanced Materials* with IF equal to 27.4<sup>2</sup>).

With regard to review papers, a different classification can be outlined depending on the specific 3D bioprinting technology each paper refers to [13, 14]. As for traditional AM processes, different bioprinting techniques vary in the technique of layerwise deposition of biomaterial. Even if the bioprinting literature does not assume the proper terminology defined in the AM standards (ISO/ASTM 52900), AM technologies similar to the ones used for polymers are often adopted. The first class of technologies is based on nozzle-deposition [11, 15–19], which can have different printing resolutions and speed depending on the precision of the bioprinting head, the nozzle diameter size and the droplet formation mechanism (Fig. 3a). A second main class of technologies are optical-based, namely the vat photopolymerization (always referred to as stereolithography in the literature on bioprinting [11, 20, 21]) both in its traditional setting and the two-photon polymerization version.

Figure 3b shows that extrusion-based bioprinting is the most studied approach in the literature, potentially because it is the most affordable solution for an entry-level bioprinter, and the least expensive technology that allows the use of a wide range of printable biomaterials [2]. The second and third most widespread techniques are vat photopolymerization and inkjet bioprinting. The former is characterized

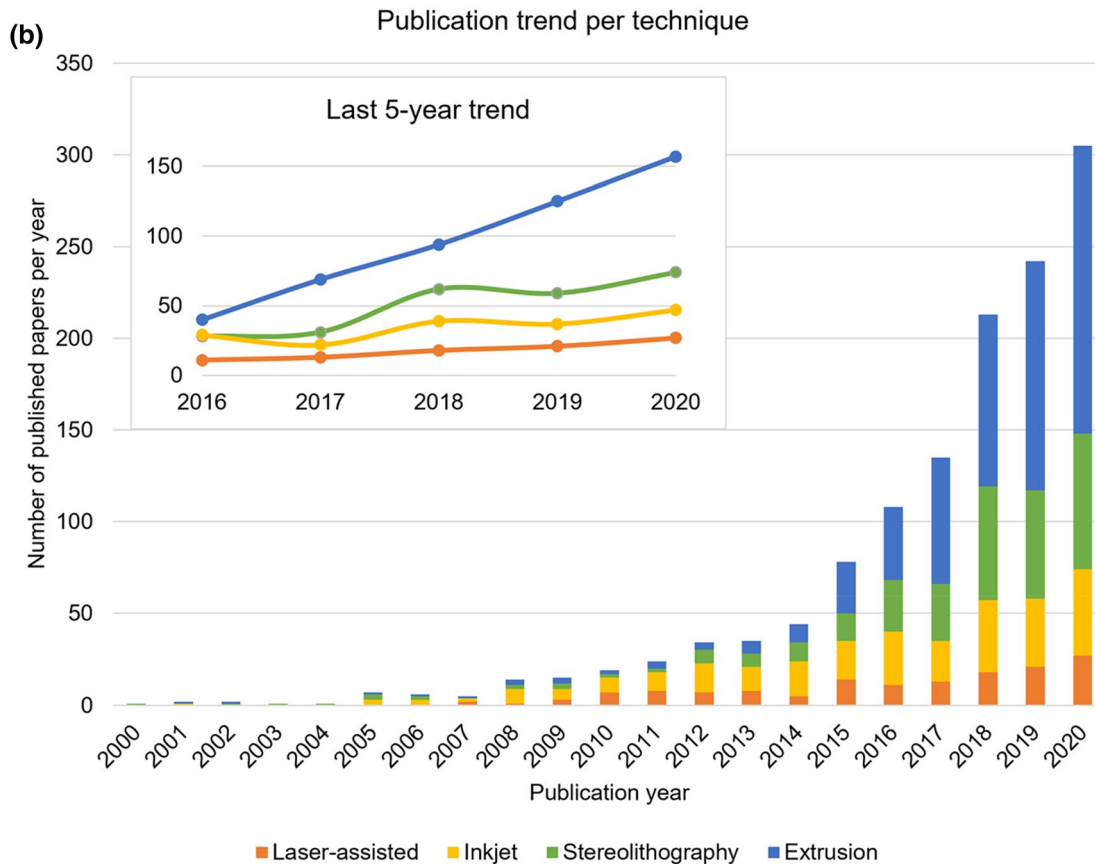
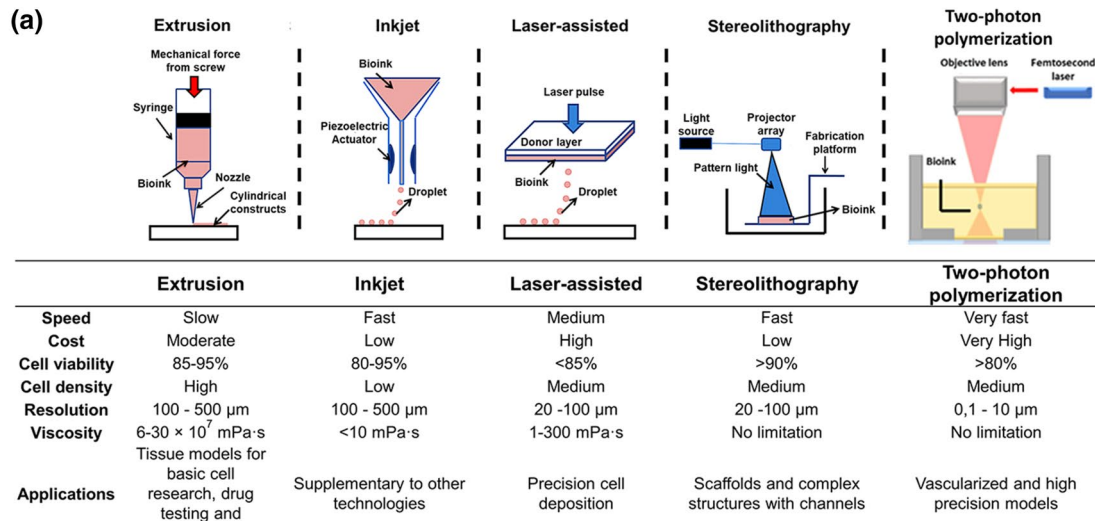
by many benefits, i.e., higher resolution, a wide variety of bioink viscosities and higher cell density [24, 25]. Eventually, thanks to the drop-on-demand (DOD) patterning method available in most bioprinters, jetting is often used for printing smaller features.

The extrusion-based technique is rapidly becoming popular likely because of the great number of entry-level bioprinters that have entered the market in recent years. Meanwhile, vat photopolymerization 3D bioprinting is emerging as a prominent bioprinting method for complex tissues.

### Bioprinting research landscape: main applications and emerging topics

The main utilities of 3D bioprinting are in basic medical/cell biology research, the production of pathology models, mini-tissue production for drug screening, and the field of regenerative medicine for the future replacement of tissues and organs [5]. Within this framework, the ideal workflow of bioprinting should start from retrieving patient-specific cells through biopsy, designing the morphology of the organ or tissue to be replaced, and going back to the patient at the end for the transplantation of a functional organ [26–31]. To the best of our knowledge, this ideal workflow cannot be yet completed from end to end, as different challenges [1, 32] need to be overcome. Among the most important ones, vascularization and multi-material printing are the most relevant. Vascularization consists of printing tiny vessels and capillaries that are specifically designed to enable the

<sup>2</sup> IF data refer to 2019.



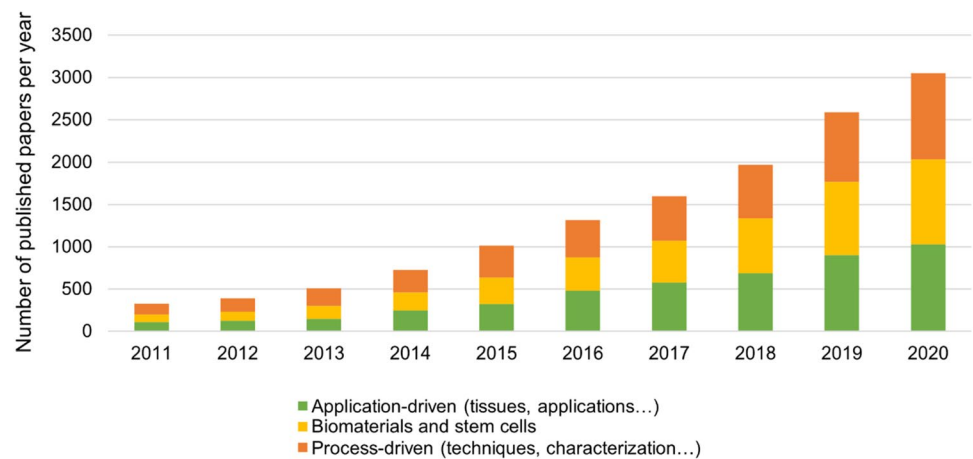
**Fig. 3** **a** Different procedures of 3D bioprinting, adapted from Derakhshanfar et al. and Loai et al. [22,23]. **b** Number of publications for each bioprinting technique (extrusion, stereolithography, laser-

assisted and inkjet) for publication years 2000 to 2020; inset: 5-year publication trend for 2016–2020

survival of living cells by the delivery of nutrients and oxygen. Multiple materials are needed to allow different types of cells and hydrogels to be combined in the 3D structure, as it occurs in real biological tissues.

Considering the long-term goals and driving factors, research on 3D bioprinting is now progressing in three major areas:

**Fig. 4** Trends of publication topics on 3D bioprinting over the years. The number of publications relative to each topic are shown over time. The graph was created by counting at most one keyword in each topic class for each publication while having an average of two topics of interest in each publication



1. Application-driven research focusing on specific utilities of 3D bioprinting, i.e., distinct tissues, pathology models or organ-on-a-chip for drug discovery.
2. Biomaterials research to develop novel bioink formulations that improve printability or support tissue differentiation and maturation, and allow the study of cells to be bioprinted in the construct.
3. Process-driven research focusing on the printing technology to improve the resolution and accuracy of 3D bioprinting while avoiding cell damage, support the design of complex shapes, reduce printing time and costs, and allow specific functionalities, i.e., multi-material printing.

In order to highlight the main trends in the literature, we clustered papers published since 2000 based on text analytics keywords. The number of articles related to each topic is shown together with its evolution over time in Fig. 4.

A considerable number of publications, especially review papers, are focused at the fundamental aspects of 3D bioprinting, and are included within the class of process-driven papers. For instance, a basic theme such as biomimicry shows steady growth from 2010, while there are newer ideas, including four-dimensional (4D) bioprinting that first appeared in 2016 and is already the subject of 28 papers [33–41]. Some publications show the bioprinting workflow [27–29] and areas [42], while the ethical aspects of bioprinting are still relatively underrepresented [43].

Regarding the applications of 3D bioprinting, about 40% of all publications refer to a specific tissue or organ starting with their title (as shown in Table 1 and the Supplementary Information). Many review papers are directed at the bone, cartilage (in particular, articular cartilage), vascularized tissue, cardiac tissues, liver, neural tissue, skin, pancreas, cornea, kidney and muscle, where the first classes mentioned are also the most frequently studied ones (see Fig. 5). On the other hand, some emerging topics have received increased

attention in the last few years, such as dental tissue, nerve regeneration, lung, intestine, thyroid gland [44], urethra [45], and encapsulated T-cells [46]. This trend might continue in the near future.

Among other applications, graft and implants, pathology models, and organs-on-a-chip are also addressed, with a relative role (i.e., percentage of reviews over the total number of publications) showing an upward trend for the past 10 years. In this area, we can observe studies on traditional topics, such as biogluers, grafts and implants, but also new solutions including the BioPen (which is a handheld device invented by Wallace and co-workers [72] for printing cartilage in vivo) or the application of bioprinting to cryopreservation.

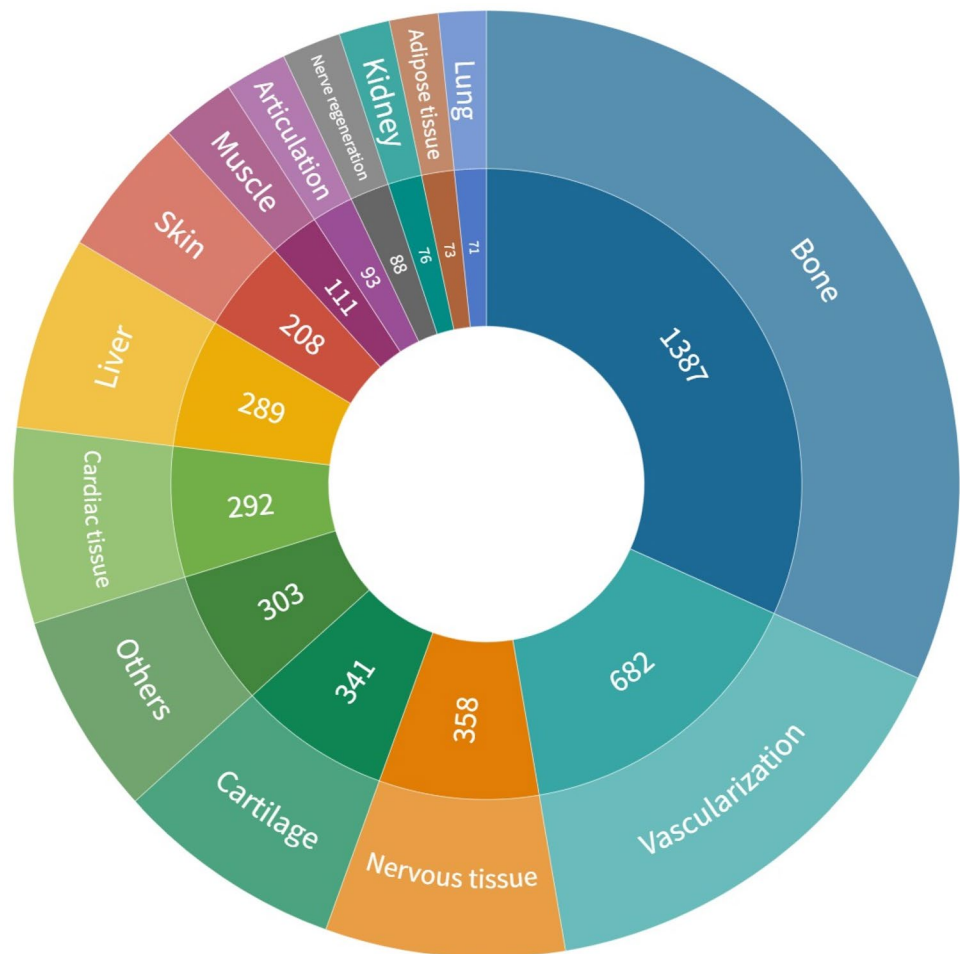
Since the beginning (the first papers date back to 2002), 3D bioprinting has also been subject to pathology models for in vitro studies of diseases. In particular, 3D-bioprinted cancer models have been described for breast cancer [115–121], mammary ductal carcinoma [115], appendiceal cancer [122], mesothelioma [123], glioblastoma and metastasis. Other types of diseases that have been modeled through bioprinting include epilepsy [124], diabetes [110, 125], degenerative diseases, immune-enhanced organoids for immunotherapy screening [126], and wound healing [127, 128]. In all these applications, 3D bioprinting has been utilized for drug discovery, drug screening, and pharmaceutical applications, especially after 2011. On the one hand, the production of pathological tissues and organs using cells from patients leads to a personalized approach on drug discovery [129]. On the other hand, the serial production of mini-tissues in a standardized manner can be highly useful for the high-throughput screening of large libraries of drugs already available on the market (drug screening [130, 131] or novel drug discovery [132]). In the future, the main target is to 3D print patient-specific models using the patient's own cells to test different chemotherapeutic drugs in vitro for selecting the most efficient patient-specific therapy. Translational

**Table 1** Details of publications on specialized topics based on the identified keywords

Tissues and organs	First occurrence	General reviews	Specific publications	Keyword families	Country
Bone	<2000	[1, 47–52]	[53–62]	Bone, osteochondral, osteogenic, osteoblast, osteoblasts, osteogenesis, skeletal, craniofacial, mandibular, cranial, head, calvarial, marrow, bone marrow stem cells	United States
Vascularized tissues	<2000		[63–66]	Vascular, aortic, endothelial cells, vascularized, vascularization, blood, cardiovascular, angiogenesis, ventricular, vessel, artery, coronary, microvascular, vessels	United States
Cartilage	2002	[1, 47–52]	[55, 59, 67–72]	Cartilage, chondrocytes, chondrogenic, chondrogenesis	Netherlands
Cardiac tissue	<2000	[1, 48–52]	[73–77]	Cardiac, heart, coronary, myocardial	United States
Liver	2001	[1, 48, 51, 52]	[78–80]	Liver, hepatocytes, hepatic	South Korea
Neural tissues	2003	[48, 50, 51]	[81–83]	Nerve, neural, brain, neuronal	United States
Skin	2005	[1, 47–49, 52]	[84–87]	Skin, epithelial cells, fibroblast, fibroblasts, dermal	United States
Muscle	2002	[50–52]	[88–91]	Muscle, musculoskeletal	United States
Articular cartilage	2002		[92–99]	Ligament, tendon, articular	Netherlands
Spinal cord and nerve regeneration	2005	[52]	[100]	Spinal, cord	-
Kidney	2005	[1, 52]	[101]	Kidney, renal	United States
Adipose tissue	2010	[51]		Adipose, adipose-derived, adipose stem cells	United States
Lung	2001	[1, 48, 52]	[102–104]	Lung, alveolar, pulmonary	China
Dental tissue	2010		[105]	Dental, periodontal, mandibular, pulp	South Korea
Trachea	2003		[106]	Tracheal, trachea	South Korea
Ear	2005		[107]	Auricular, ear	South Korea
Pancreas	2007	[48, 51, 108]	[109, 110]	Pancreatic	South Korea
Eye	2010 (cornea) 2014 (retina)	[1, 52] (cornea)	Cornea [111] Retina [112, 113]	Optical, corneal, eye	South Korea; Germany
Cardiac valve	2004	[51]	[114]	Valve, cardiac	–
Pathology models	2001	[48, 52]		Cancer, tumor	United States
Drug testing	2002	[48]		Drug, pharmaceutical	United States
Organ-on-a-chip and microfluidics	2002	[48]		Chip	United States

The table is arranged in the order of most to least studied fields, and includes information about the main applications (pathology models, drug testing, organ-on-a-chip and microfluidics)

**Fig. 5** Catalogue of all publications based on the automatic assignment of keywords extracted from the titles relative to the tissues and organs (others: articulation, nerve regeneration, kidney, adipose tissue, lung, dental, trachea, ear, pancreas, cornea, aortic valve, esophagus, retina, neural tissue, thyroid gland, urethra, intestine, eye, T-cells). The sum is not equivalent to the total number of publications, since each paper can focus on more than one tissue



medicine and the implications of 3D bioprinting in regenerative medicine, as well as the clinical translation of 3D bioprinted constructs [50, 133, 134], are certainly becoming hot topics in the near future.

Compared to other applications, publications on translational medicine occurred fairly lately (starting in 2009), adding up to 117 publications with more than 60% classified as review papers. In fact, the application of 3D-bioprinted tissues in medicine is still being implemented; to the best of our knowledge, no tissues or organs produced by 3D bioprinting have been implanted in vivo in real patients. However, the 3D printing of biomaterials [135–137] is increasingly common in medicine, especially for the production of bone and dental implants and grafts, but also in surgery for the production of patient-specific 3D models on which surgeons can train before the actual procedure.

Microfluidics and organs-on-a-chip are some of the latest areas in 3D bioprinting, and, even though the first occurrence dates back to 2004, most of the relevant publications have been published after 2010. At present, only about 100 publications refer to this topic by the title. Publications on organ-on-a-chip models focus either on modeling healthy or

pathologic organs [138], where bioprinting can be useful for studying gene expression and cell differentiation in different healthy conditions by controlling the microfluidics and the microenvironment, or can be used to realize in vitro models for drug screening in pathology studies.

Concerning biomaterials, one of the most exciting field of research relates to bioinks, with about 25% of the whole number of publications on bioprinting focusing on the development of novel bioinks to obtain specific biological, mechanical, and chemical characteristics. This stream of research is fairly new, as research on bioinks was rather limited before the rise of 3D bioprinting. Nowadays, the number of reviews on bioprinting is growing together with the rising need of information to standardize tests on 3D cultures. On this subtopic, the literature focuses on imaging (73 publications), biological characterization (726 publications), resolution (49 publications) and printability (32 publications), with an increasing interest in rheology (21 publications) and structural integrity (9 articles).

Most of the recent papers on bioinks outline the need to find the best compromise between printability and specialization for the specific cell or tissue under study [139, 140].



In fact, each cell type requires highly specific conditions in addition to a number of standard requirements (e.g., aqueous environment, sufficient oxygen and nutrient diffusion, appropriate pH, physiological osmolarity of key vitamins and minerals). For example, certain cell types require appropriate sites for attachment, specific substrate properties and space in order to proliferate and produce their extracellular matrix (ECM) [141]. Bioinks can be classified depending on their origin (natural or synthetic), the type of 3D printing process they can be used in (e.g., bioinks for material extrusion, jetting or photopolymerization differ in their rheological characteristics, shape fidelity and printability features) or the gelation kinetics: ionic, stereocomplex, thermal, photocrosslinking, enzymatic and click chemistry [142].

Overall, about 15% of all publications focus on innovative cell types in 3D bioprinting, such as stem cells, spheroids, and organoids. This rate is yet to increase mostly because innovative cell types are still under investigation in biology with the aim to overcome open challenges concerning differentiation and maturation. With reference to stem cells in 3D bioprinting [143, 144], Skeldon et al. outlined that the main types of stem cells used in this context are mesenchymal stem cells, neural stem cells, and human induced Pluripotent Stem Cells (iPSCs) [143]. However, our search found that general multipotent human Adipose Stem Cells (hASCs), as well as nasal and bone marrow stem cells, have also been used. Spheroids have been used in 3D bioprinting since 2003, mostly as the living components of bioinks. Finally, organoids have become one of the latest cell sources used in 3D bioprinting since their first occurrence in 2017 [145].

Surprisingly, the characterization or development of new process technologies for 3D bioprinting has received rather limited attention in the literature. The rate of publications on this topic decreased from around 30% in 2010 to 15% in 2019. This can be mainly ascribed to the increasing focus on biology, medicine, or material science rather than engineering driving the increase of attention to bioprinting. Secondly, most of the processes used in this field are those borrowed from the traditional 3D printing of polymers with modifications to achieve the desired results. However, a lot of research is lacking, especially for most of the complex technologies. This is clearly visible in the literature, where most of the studied techniques are the laser-based ones (144 articles and 14 reviews) and stereolithography (83 articles and 18 reviews). Inkjet was introduced in 2006 and is among the oldest techniques, while extrusion 3D bioprinting first appeared in 2001, but expanded especially after 2015 with the entry of commercial bioprinters to the market.

Moreover, the application categories include printing techniques that simply exploit existing printing technologies and processes in innovative ways to meet the needs of a specific application (e.g., creating channels to form vascularized tissue). Such is the case of bioprinting in a suspension bath,

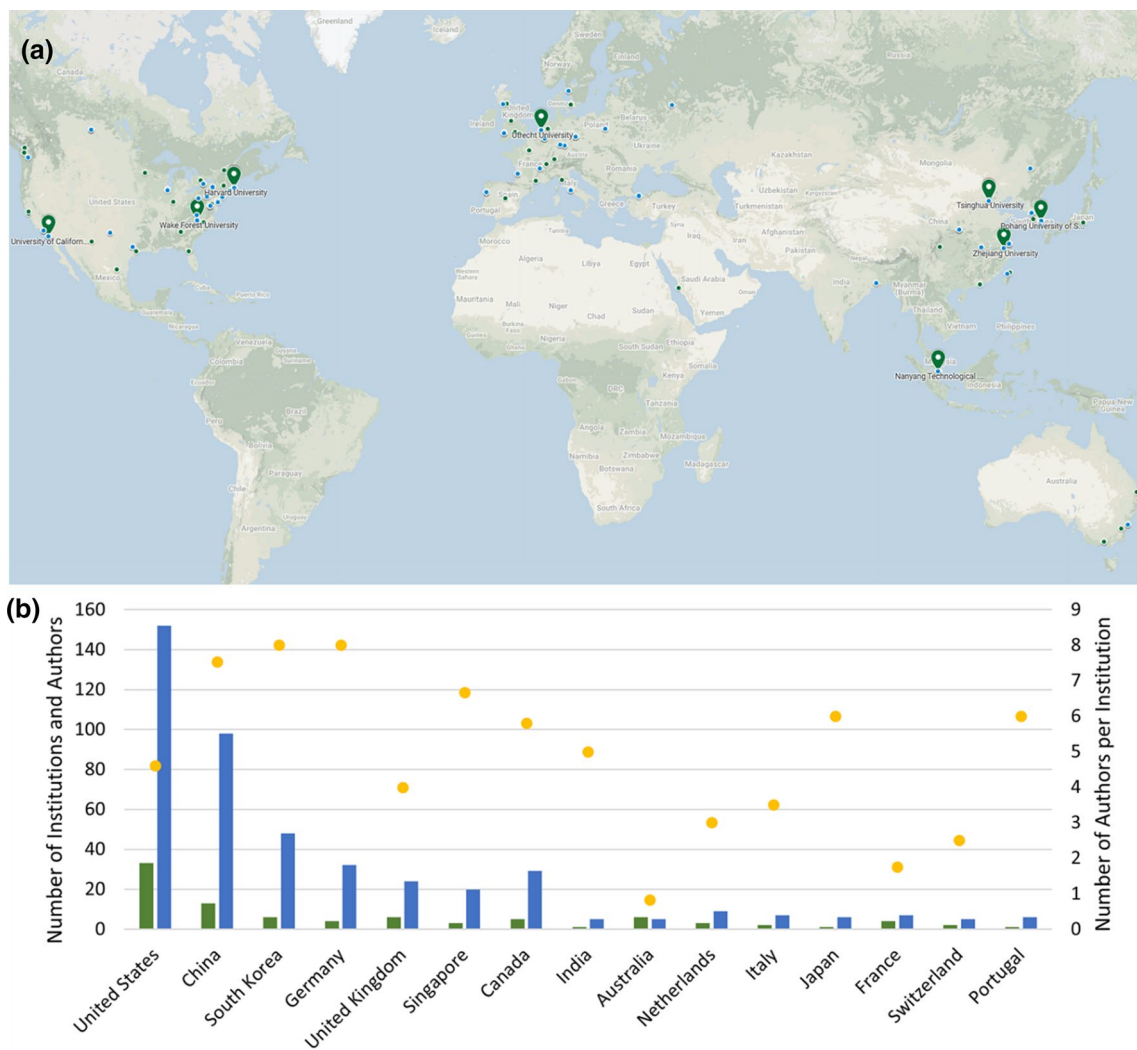
primarily developed to create vascularized tissues. Among others, one of the most recent techniques is called freeform reversible embedding of suspended hydrogels (FRESH), which has now progressed to its second version and consists of extruding a bioink in a dissolvable suspension bath usually made of a gelatin microparticle slurry, which enables the 3D bioprinting of constructs with higher resolution and is useful for the production of vessels of very small diameters (5 to 10  $\mu\text{m}$ ) [146]. This technique has been used very recently for the 3D bioprinting of a full-size human heart [147]. An alternative utility of this type of technique is sacrificial writing in functional tissues (SWIFT), which enables the production of small vessels and vascularization through extrusion bioprinting directly inside a functional and vital tissue, which simultaneously acts as a suspension bath [63].

Moreover, a further highly innovative branch of applications is the magnetic levitation approach, introduced in 2020 by Mironov et al. (also affiliated to the company 3D Bioprinting Solutions [148]). However, the first experiments with magnetic-based bioprinters showed a limitation that the bioinks have to withstand the pull of Earth's gravity. Regarding this aspect, space agencies like ESA or NASA are also investigating the idea of using microgravity to improve the 3D printing of soft human tissues, such as blood vessels and muscles. This means using a scaffold-free, nozzle-free and label-free approach (i.e., without magnetic nanoparticles). Enabling in-space bioprinting may not only help improve bioprinting research to face organ shortage on Earth but would also have repercussions in long-term/long-distance human space missions (including Moon and Mars programs). The increased risk of injuries in such distant missions impose the need to develop the ability to print replacement tissues or organs for astronauts in emergency situations. In this context, 3D bioprinting could be considered as a mission enabler for such kinds of projects (i.e., space exploration and planet colonization) [149].

### Worldwide distribution of the most prolific academic institutions

In order to highlight countries and institutions currently involved in 3D bioprinting research, the geographical distribution of affiliations declared in the publications were analyzed. A preliminary analysis was performed on the aggregated data retrieved from SciVal. The United States (USA), China, South Korea, Germany, United Kingdom (UK), and Canada scored as the most relevant countries where research on 3D bioprinting is currently ongoing. Similar results were obtained by ranking the countries depending on the authors' affiliations (see Fig. 6a<sup>3</sup> for further details).

<sup>3</sup> Data from SciVal, map created using Google MyMaps.



**Fig. 6** **a** Geographic localization of the current affiliation of the 100 most relevant authors (blue), and the most relevant affiliations (green) according to SciVal based on the Scholarly output. The ten most relevant universities are highlighted. The interactive map can be viewed at <https://ggle.io/3kuZ>. Map data ©2021 Google. **b** Number of the most prolific universities (retrieved by considering the affiliations in papers) and top authors per country. The number of the most relevant authors, in blue, and the number of the most relevant institu-

tions per country, in green, were retrieved from SciVal on the topic *T.8060 (Bioprinting; Printability; Tissue Engineering)*. The countries are listed following the SciVal ranking based on the Scholarly output. China, South Korea, and Germany have the highest number of authors per affiliation. The fraction of authors over the number of institutions per country is represented in yellow, and the data are shown on the secondary y axis on the right

As seen in Fig. 6b, the US has an obvious leading role in terms of absolute performance (number of authors and institutions involved in bioprinting research), which shows a more diffused attention to this topic (with an average of 4.6 top authors in each of the leading institutions). Meanwhile, China has a second leading position but is characterized by a more focused profile, where only a handful of institutions are currently hosting the most prolific authors on 3D bioprinting (with 7.5 authors on average in each of the top institutions).

In Table 2, the number in the parentheses after the research institute refers to the relative position of the institution/author in the worldwide ranking obtained by

considering the number of published products (called ‘scholarly output’ in SciVal). In particular, products are associated to the institution depending on the affiliation of the authors of each product.

The table lists the top ten affiliations; it can be observed that the University of California at San Diego (1) and Harvard University (2) in the USA, and Nanyang Technological University (3) in Singapore are the three leading institutions in this field (see also Table S2 for a complete list of top affiliations and authors per country). A similar geographical distribution is shown for the most prolific authors (shown in blue in Fig. 6b).

**Table 2** Ranking of the most prolific countries and institutions publishing on 3D bioprinting

Country	Institution	Author
United States (1)	University of California at San Diego (1)	Chen, Shaochen
	Harvard University (2)	Zhang, Yu Shrike Shin, Suryon
	Wake Forest University (4)	Atala, Anthony Yoo, James Lee, Sangjin Shafiee, Ashkan Aleman, Julio
	Massachusetts Institute of Technology (6)	Yue, Kan
China (2)	Zhejiang University (5)	Fu, Jianzhong He, Yong Gao, Qing Sun, Wei
	Tsinghua University (8) Chinese Academy of Sciences (9)	
South Korea (3)	Pohang University of Science and Technology (7)	Cho, Dongwoo Jang, Jinah Kim, Byoung-soo Gao, Ge
Singapore (6)	Nanyang Technological University (3)	Yeong, Waiyee Ng, Weilong An, Jia Lee, Jiamin
Netherlands (10)	Utrecht University (10)	Malda, Jos Levato, Riccardo

The numbers in the brackets refer to the relative position in the overall ranking based on the number of products available on Scopus (usually referred to as ‘scholarly output’ in SciVal). Only the first ten most productive institutions and their corresponding countries are reported. In the last column, the most prolific authors currently affiliated to that institution are also shown. A complete version of the table is available in Table S2 (Supplementary Information), while the number of publications retrieved per country are shown in Fig. S3

A more complete analysis of the top-leading laboratories and scientists is presented in Table 3, with specific attention to the investigated topics. For the most inclusive analysis possible, these authors were selected as the 20 researchers with the highest scholarly output and/or citation count within the topic of 3D bioprinting according to SciVal. Moreover, the network of collaborations between universities defined by considering co-authorships is shown in Fig. 7, from which it can be inferred that, despite global collaborations, the highest number of publications in collaborations are also geographically clustered. The clusters identified from this graph are also discussed in Table 4.

Within the US, three clusters of collaborations can be recognized. The most relevant group in the USA per number of publications can be referred to as the “*Harvard cluster*” in which a strong collaboration between PIs affiliated to Harvard can be seen; the PIs involved are Khademhosseini, Ali, whose current first affiliation is Terasaki Institute for Biomedical Innovation, and Zhang, Yu Shrike, who is currently affiliated to Harvard Medical School. Considering authors’

multiple affiliations, this cluster also has a connection with Massachusetts Institute of Technology (6). Within this cluster, vascularization and heart [75, 150–153] are the types of tissue attracting the greatest interest. In the US, another group of collaborations can be identified as the “*Wake Forest cluster*”, in which a network of connections can be recognized within the university with the affiliations of Atala, Anthony, Yoo, James, and Lee, Sangjin. Within this cluster, the focus is mainly on process [154], cartilage [155] and articulations [156].

A further research facility worth mentioning is the UC San Diego (1), which is the leading university in the world on 3D bioprinting, to which Chen, Shaochen is affiliated. Publications by this university are mainly focused on the optimization of the bioprinting process, particularly inkjet [157–160], and the evaluation of printability [161, 162]; regarding the type of tissues, the recurrent topic is the creation of tubular structures and vasculature [163].

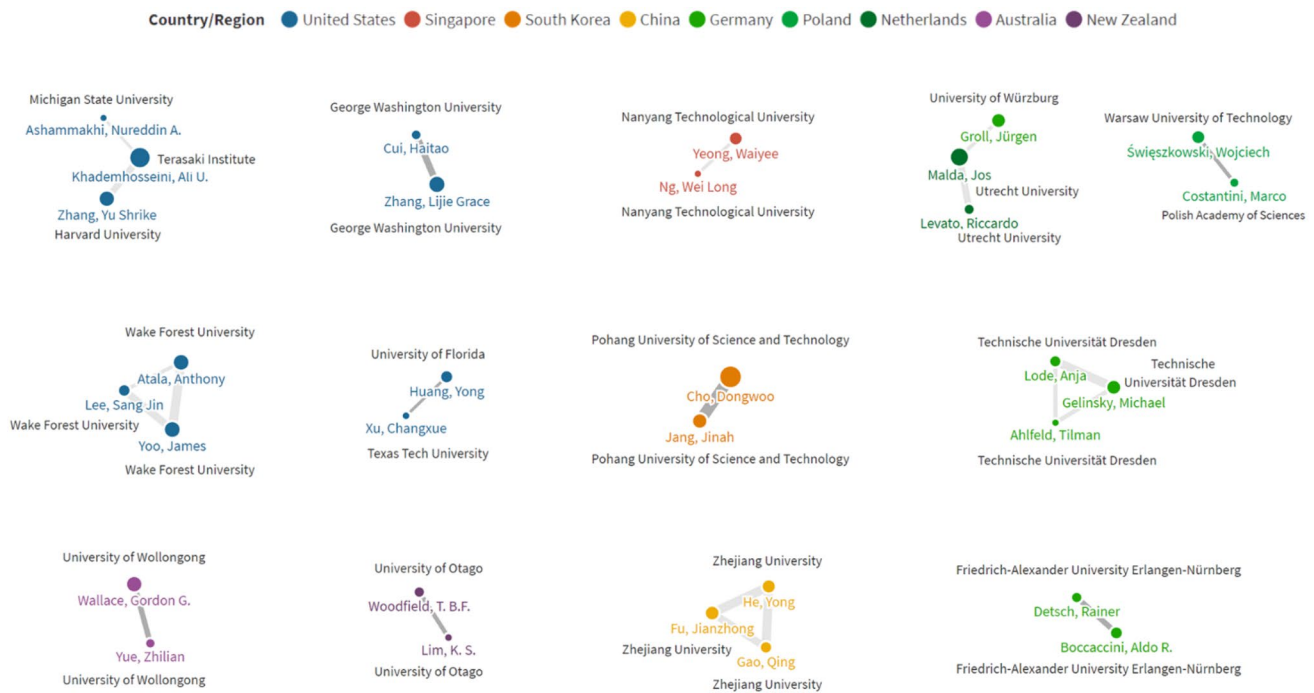
Within Asia, China is ranked second in terms of the number of publications (1036 papers), with leading institutions

**Table 3** The most prolific authors, their affiliations, and their most cited articles and reviews

Author	Affiliation	Country/region	Most cited article on 3D bioprinting	Most cited review on 3D bioprinting	Topics
Khademhosseini, Ali	Terasaki Institute for Biomedical Innovation, Los Angeles	United States	GelMA [203]	GelMA [204]	Vascularization, bone
Cho, Dongwoo	Pohang University of Science and Technology	South Korea	dECM [205]	Biofabrication, definition [200]	Cartilage, skin, liver, trachea, ear, vascularization, bone
Zhang, Yu Shrike	Harvard Medical School	United States	Vasculature [150]	Cartilage [59]	Vascularization
Ozbolat, Ibrahim Tarik	Pennsylvania State University	United States	Organ fabrication [206]	Bioprinting scale-up [207]	Vascularization, bone
Yeong, Waiyee	Nanyang Technological University	Singapore	Collagen [208]	Design and printing strategies [209]	Process
Huang, Yong	University of Florida	United States	Cellular tubes [210]	Pulsed laser methods [211]	Process
Chua, Chee Kai	Singapore University of Technology and Design	Singapore	SLS, polyetheretherketone-hydroxyapatite [212]	Thermoresponsive hydrogels [213]	Process
Chen, X. B	University of Saskatchewan	Canada	Biological characterization, collagen [214]	Modeling [215]	Cartilage, nervous
Fu, Jianzhong	Zhejiang University	China	Coaxial nozzle, microchannels [164]	Microfluidics [216]	Vascularization
Malda, Jos	Utrecht University	Netherlands	Cartilage [217]	Hydrogels [202]	Cartilage, vascularization
Atala, Anthony	Wake Forest University	United States	Structural integrity, human-scale tissues [218]	3D bioprinting [5]	Skin
Groll, Jürgen	University of Würzburg	Germany	Melt electrospinning writing [219]	Hydrogels [202]	Polymers
Jang, Jinah	Pohang University of Science and Technology	South Korea	dECM [205]	3D bioprinting [220]	Cartilage, vascularization, heart
Kim, Geunhyung	Sungkyunkwan University	South Korea	Rapid prototyping and electrospinning [221]	In vivo [222]	Intestine, muscle, bone
Mironov, Vladimir A	Sechenov First Moscow State Medical University	Russian Federation	Spheroids [223]	Biofabrication, definition [200]	Vascularization
Skardal, Aleksander	Virginia Polytechnic Institute and State University	United States	Wounds, stem cells [224]	Tumor organoids [225]	Stem cells
He, Yong	Zhejiang University	China	Coaxial nozzle, microchannels [164]	Microfluidics [216]	Vascularization
Yoo, James	Wake Forest University	United States	Structural integrity, human-scale tissues [218]	Biofabrication, definition [200]	Muscle
Zhang, Lijie Grace	George Washington University	United States	Smart release, vascularization [226]	Organ regeneration [227]	Nervous tissue
Wallace, Gordon G	University of Wollongong	Australia	Printability [228]	Biofabrication [229]	Cartilage, pancreas
Shin, Suryon	Harvard University	United States	Microfluidics [230]	4D bioprinting [39]	Biomaterials
Dokmeci, Mehmet Remzi	Terasaki Institute for Biomedical Innovation	United States	Vascularization [231]	Bioinks [139]	MEMS
Lee, Sangjin	Wake Forest University	United States	Bioink [232]	Process [233]	Biomaterials

**Table 3** (continued)

Author	Affiliation	Country/region	Most cited article on 3D bioprinting	Most cited review on 3D bioprinting	Topics
Kang, Hyun-wook	Ulsan National Institute of Science and Technology	South Korea	Structural integrity, human scale tissue [218]	Process [233]	Optics
Zhu, Wei	George Washington University/Company	United States	4D bioprinting [35]	4D bioprinting [234]	Process, 4D bioprinting
Kengla, Carlos	Wake Forest University	United States	Structural integrity, human scale tissue [218]	Process, physics of bioprinting [235]	Cartilage, bone, skin
Lewis, Jennifer A	Harvard University	United States	Vascularization [236]	–	Vascularization
Burdick, Jason A	University of Pennsylvania	United States	Self-Healing Hydrogels [237]	Biofabrication, definition [200]	Polymers
Chen, Shaochen	University of California at San Diego	United States	3D projection stereolithography [238]	Biomaterials [239]	Stem cells, biomaterials
Sun, Wei	Tsinghua University	China	Photocrosslinkable inks [240]	Biofabrication, definition [200]	Organs-on-chip
Yue, Kan	Massachusetts Institute of Technology	USA	Vascularization [150]	GelMA [204]	Polymers



**Fig. 7** Network graph showing collaborations between the most prolific authors; the authors' names and relative affiliations are presented in color and black, respectively. The size of the node (circle) is directly proportional to the number of publications on 3D bioprinting retrieved from that author, while the color indicates the country of affiliation. The links between the nodes denote the number of

collaborations (only collaborations on at least 10 publications are shown); the thickness of a link is proportional to the number of articles produced in collaboration between the two authors. Twelve clusters of collaborations can be identified from this graph, in which 5 are prominent in terms of the number of publications of authors and the number of collaborations

such as Zhejiang University (5), Tsinghua University (8) and the Chinese Academy of Sciences (9). Notably, while the USA has mainly academic players, among the 14 top

institutions in China, two are government-run and one is a medical institution (see Fig. S1 in the Supplementary

**Table 4** The most prolific clusters of collaborations between the affiliations extracted from the graph in Fig. 7 based on the number of co-authored publications

Harvard University cluster	Wake Forest University cluster	Zhejiang University cluster	Pohang University cluster	Utrecht University cluster
USA	USA	China	South Korea	Netherlands—Germany
Khademhosseini, Ali (Terasaki Institute)	Atala, Anthony, Yoo, James, Lee, Sang Jin	Fu, Jianzhong, He, Yong, and Gao, Qing (Zhejiang University—China)	Cho, Dongwoo and Jang, Jinah (Pohang University of Science and Technology—South Korea)	Malda, Jos and Levato, Riccardo (Utrecht University—Netherlands)
Ashammakhi, Nureddin A. (Michigan State University)	(Wake Forest University North Carolina—USA)			Groll, Jürgen (University of Würzburg—Germany)
Zhang, Yu Shrike (Harvard Medical School)				
Vascularization and heart [75, 150–153];	3D bioprinting workflow [28] and road map for tissue engineering [29];	GelMA [169, 171] characterization and protocols [178];	dECM [205, 253]	General aspects of 3D bioprinting [14, 31, 200–202]
Bone and cartilage [59];	Skin [86, 128, 225];	Spheroids and organoids [176, 181];	Liver [192, 193]	Cardiac tissue engineering [256]
Liver [241];	Cartilage [155] and articulations [156];	Vascularization [164–183]	Cardiac repair [194, 195]	Chondrogenesis [257]
Microfluidic devices and organ-on-a-chip [151, 152, 242–245] (heart-on-a-chip [75], liver-on-a-chip [241])	Heart [73] and vascularization [28];	Nutrient networks in large 3D bioprinted tissues [164, 183];	Cartilage [196] (augmentative rhinoplasty [68]);	Mechanical properties of printed bioinks [258, 259]
	Kidney [246]	Bone [172];	Vascular models produced through coaxial cell printing [197, 198];	
	Wound healing [224, 247]	Hard tissues [173];	Tumor-on-a-chip models of glioblastoma [255];	
	Tumor-on-chip model of metastasis [248]	Reviews on in vitro drug screening and microfluidics [216]	Bioinks for cornea [111, 199]	
	Bioink [249, 250] and construct [45, 218, 232, 251] characterization	With Huang, Yong (6): Inkjet for tubular structures [157, 158, 163] Tunable light processing [252]		

Information for further details). Interestingly, most of the collaborations in Asia occur within universities.

Within Zhejiang University (5), a strong collaboration can be noticed between Fu, Jianzhong, He, Yong, and Gao, Qing, with the main focus of publications on vascularization [164–183]. Other universities worth mentioning are Tsinghua University and the Ministry of Education, where Sun, Wei and Li, Xinda are the most prolific authors, respectively. The focus of these collaborations is on topics such as the inkjet process [184, 185], biomaterials [186], with targeted efforts on tumor model preparation [187], especially regarding glioma [188] and lung cancer [189], the use of stem cells [190], and the formation of vasculature [191].

South Korea is ranked third in terms of published products (scholarly output from SciVal). The main academic institutions here are Pohang University of Science and Technology (7), Konkuk University (15), and Sungkyunkwan University (14). The Pohang University of Science and Technology (7) can be considered as the center of a relative cluster to which the Korea Polytechnic University also belongs. To the first affiliation, Cho, Dongwoo and Jang, Jinah are active and mainly focused on the liver [192, 193], cardiac repair [194, 195], cartilage [196], vascularization [197, 198], and cornea [111, 199].

Within Asia, further notable institutions are located in Singapore (6), which is globally ranked the sixth in terms of number of publications, with the main participating institutions of Agency for Science, Technology and Research (40), to which Naing, May Win is affiliated, and the Singapore University of Technology and Design, to which Chua, Chee Kai is affiliated. Moreover, the most prolific institution in Russia is the Sechenov First Moscow State Medical University, to which Mironov, Vladimir A. is affiliated.

In Europe, Germany (4) and the UK (5) are the two leading countries in terms of publications, number of top authors and top institutions. However, the most productive institution on bioprinting in Europe is Utrecht University in the Netherlands (10). Four clusters of collaborations can be identified within Europe, one being the “*Utrecht University cluster*”, which primarily links Malda, Jos and Levato, Riccardo from Utrecht University (10), and Groll, Jürgen from University of Würzburg in Germany (4), with a main focus on the general aspects of 3D bioprinting [14, 31, 200–202]. Two additional clusters of collaborations can be identified in Germany within the Technische Universität Dresden with researchers Lode, Anja and Ahlfeld, Tilman, and Friedrich-Alexander University Erlangen-Nürnberg to which Boccacini, Aldo R. and Detsch, Rainer are affiliated. In addition, a cluster of collaboration can be identified in Poland with a collaboration between the Warsaw University of Technology (Świąszkowski, Wojciech) and the Polish Academy of Sciences (Costantini, Marco).

Finally, it is worth noting that some leading universities are also located in Oceania; the University of Wollongong in Australia, to which Wallace, Gordon G. and Yue, Zhilian are affiliated, and the University of Otago in New Zealand, to which Woodfield, T. B.F. and Lim, K. S. are affiliated.

## Market and patent landscape

In recent years, interest in 3D bioprinting has been gathering momentum not only in academia, but also in the industry. Between 2014 and 2015, numerous 3D bioprinting companies have entered the market, and new start-ups, spin-offs and subsidiaries continue to emerge. Bioprinting could become a new standard for the biofabrication of tissues in the field of regenerative medicine; many bioprinter manufacturers have started to commercialize their proposals and services in research or other professional fields. Most of these companies sell materials (bioinks and cells), bioprinters and consulting services.

According to the latest market research by Mordor Intelligence [260], the global bioprinting industry was valued at USD 586.13 million in 2019 and is expected to reach USD 1,949.94 million by 2025, which is equivalent to a compound annual growth rate (CAGR) of 21.91% for the period of 2020–2025 [261]. These values were confirmed by another report, in which the value of 3D bioprinting market was projected to reach USD 1,647.4 million by 2024 at a CAGR of 20.4% for 2019–2024.

The growth of the 3D bioprinting industry, which is mainly driven by technological improvements on biomaterials and 3D bioprinters, has pushed business players to develop and enhance their existing manufacturing and distribution capabilities.

To review and analyze the companies and start-ups currently on the market, we used commercial magazines, newsletters and specialized blogs to retrieve 70 legally claimed bioprinting companies (latest update in July 2020). The analysis excluded 3D printing or biotechnology companies which announced their entrance into the market with no actual 3D bioprinting-related commercial products or services offered. The list of these companies, together with the available basic information regarding their business and their bioprinter models are reported in Table S3.

Based on the analysis, the business models of such companies could be classified as follows: (a) those selling commercial bioprinters and/or bioinks (63% of the whole market), (b) those providing bioprinting services (such as CAD modelling, specific tissue or cell culture constructs, scaffolds, grafts, or only consulting) with their own proprietary technology or commercially unavailable bioprinters (37% of the industry) and/or starting custom tissue partnership with clients (usually cosmetics or pharmaceuticals industries) that

**Table 5** Business models of companies: commercialized products, green; commercialized services, blue

Business	Count	Share (%)
Commercial 3D bioprinters & bioinks	23	33
Commercial 3D bioprinters only	14	20
Bioinks only	7	10
3D Bioprinting services	17	24
Proprietary 3D bioprinters only	5	7
Proprietary 3D bioprinters & bioinks	1	1
Cell culture products	2	3
Bioprinting product development	1	1

**Table 6** Bioprinter market composition by technique

Technique	Count	Share (%)
Extrusion	27	39
Inkjet	12	17
Stereolithography	5	7
Laser-assisted	3	4
Other (Magnetic)	1	1
n.d	22	31

have specific requests, as well as granting technology access partnerships (Table 5).

Around 80% of the market is composed of established companies, while 20% are start-ups with strong economic growth, mainly stemming from university spin-offs.

Table 6 reports the bioprinter market composition classified by technique, based only on the available information from manufacturer's websites. Once again, it is possible to see that extrusion-based models are the most widespread ones, as their popularity is guaranteed by the lower cost and ease of use. Inkjet-based bioprinters consist the second most common technology. Nowadays, the inkjet technology is included in most of the extrusion-based bioprinters commercially available as an additional printing head. Despite the fact that stereolithography was the first technology in AM, stereolithography-based bioprinters are a new addition to the bioprinting industry, some of which only appeared at the time of writing of this paper or have yet to be announced. Laser-assisted bioprinters are among the most expensive bioprinters, which are usually part of more sophisticated systems. These are among devices capable of reaching the highest resolutions on the market. Only two-photon stereolithography has even better resolution, but it is not always categorized as a pure bioprinter, as this system is mainly useful for printing scaffolds for cells to attach to rather than printing cells and using bioink at the same time.

Based on the previous analysis, the industry is obviously growing at a fast rate not only in terms of quantity, but also

in terms of diversification of the technologies developed and offered. Even though there are some polarizing countries, the companies that develop and commercialize bioprinting technologies are relatively dispersed across nearly all continents (Fig. 8a).

Mapping the companies making up this industry is essential to find potential technology hubs.

Considering single countries, the retrieved data suggests that USA remains the most significant player with 39% of all companies, exceeding all the other countries by one order of magnitude, whose percentages vary between 7 and 1%. In terms of continents, apart from the 40% share of North America, consisting basically of USA and Canada, Europe harbors 36% of all companies, with countries like Germany, UK and France representing nearly half of all European companies. The continents that follow are Asia (14%), Latin America (8%) and Oceania (1%) (Fig. 8b).

As far as we are concerned, there is a multitude of university start-ups, especially in China and in Latin America, that prefer to use their own custom-designed bioprinting technologies.

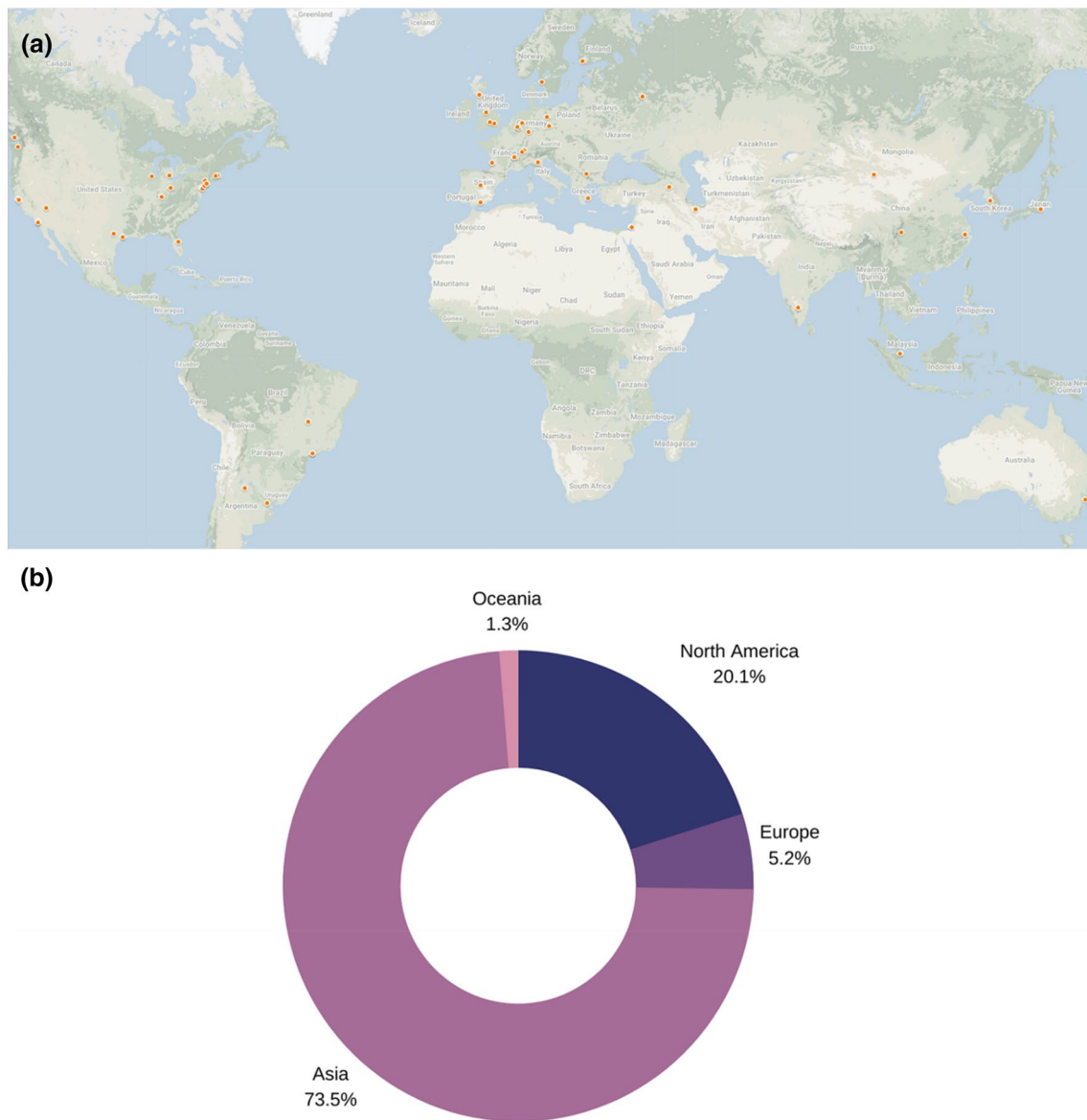
## Emerging technological trends

The fact that several 3D bioprinting companies across the globe currently manufacture commercially available 3D bioprinters is a clear indication that the field of AM and the bioengineering industry are evolving at a rapid pace. Along with the number of companies, the abundance of technological innovations associated with bioprinters and bioinks is also growing rapidly. In fact, the main leading bioprinting companies are trying to break into the market with increasingly peculiar technologies.

Most of the companies try to produce all-in-one extrusion-based bioprinting platforms with support for multi-materials (viscous pastes, gels and hydrogels, ABS/PLA and other filaments or polymer powders, liquids, ceramics and foods), multi-tools (laser system for ultra-high-precision cutting and engraving, CNC milling machine, photo-crosslinking UV LED, microscope, HD cameras for monitoring, auto-calibration tools, 3D electronics printer, built-in incubator) and custom-made software (e.g. AI powered automatic organ and tissue segmentation software), often available in different versions according to customer requirements [153, 220, 244, 245, 262–265].

This panorama also includes firms that invest their resources in developing more refined solutions that aim to solve specific problems. A possible starting trend is to develop methods capable of using tissue spheroids and managing them, for example, through magnetic bioprinting such as the Organ.Aut, a magnetic bioprinter from the Russian company 3D Bioprinting Solutions [266], also delivered to the ISS on board the Soyuz MS-11 spacecraft. Furthermore,





**Fig. 8** **a** Worldwide distribution of 3D bioprinting companies. The interactive map can be viewed at <https://ggle.io/3kuZ>. Map data ©2021 Google. **b** 3D bioprinting market composition by continent

the Japanese company Cyfuse Biomedical [267] developed a platform that allows to create scaffold-free tissues using the Kenzan bioprinting method to manipulate spheroids. In this method, the production of 3D constructs is achieved by placing cellular spheroids in a temporary array of needles through a cell-dispensing robotic mechanism. On the other hand, there are companies, such as the Germany-based Cellbricks, that prefer to produce complex 3D-printed cell culture structures with a proprietary non-commercial stereolithography-based bioprinting platform [268].

Moreover, some enterprises try to propose bioprinters with more degrees of freedom to increase system flexibility and the range of printable features, like the American

company Advanced Solutions [269], which patented a six-axis robotic extrusion-based bioprinter arm capable of loading up to ten independent biomaterials during a single print run. Other companies decided to focus on unusual features of their 3D bioprinters, such as the Rollovesselar™ module of the Chinese company Revotek for printing scaffold-free 3D cylindrical structures with a proprietary bio-ink to create vessels. This company claimed to have successfully replaced a short segment of the abdominal artery in 30 rhesus monkeys [270].

The bioprinting industry is not only driven by extrusion-based platforms. Other technologies to achieve the single cell deposition accuracy are under development, such as the

Image Based Single Cell Isolation (IBSCI) developed by the French company Cellenion [271], which is a high-resolution-based technology consisting of automated image acquisition, processing and advanced algorithms to automatically isolate single cells from a cell suspension. Another French company, Poietis [272] focuses on laser-assisted bioprinting combined with extrusion-based and inkjet technologies supported via a proprietary PIA™ software to reconstitute the 3D representation of an entire tissue, layer after layer. Yet other companies, such as the Canada-based Aspect Biosystems, attempt to achieve improved accuracy in the development of microfluidic platforms equipped with an on-printhead crosslinking system that is able to print bioinks with a coaxial shell.

Some new business entities aim to increase their market share by widening the offer, producing affordable systems and collaborating with other entities. This is the case of CELLINK [273] that provides a wide range of solutions, both in terms of affordable bioprinters (extrusion-based and DLP-based) and various specific bioinks. In connection with Prellis Biologics, they have just released one of the first systems using two-photon stereolithography to the market, named the Holograph X™, with a special solution to increase the 3D printing speed by using a parallel set of photons, i.e., a multiphoton technology, in order to simultaneously cure millions of points in the bioink, and in turn achieve bioprinting speeds of up to 250,000 voxels per second.

Pioneering bioprinting companies like Organovo [274] instead prefer to provide services or products (like liver and kidney tissue models histologically and functionally similar to the native ones [241, 275]) along with their proprietary technology.

It is also worth mentioning BIOLIFE4D, an upcoming biotech firm founded in 2015, with headquarters in Illinois (USA). The company is dedicated to produce a patient-specific, fully functioning heart through 3D bioprinting and with a patient's own cells. In 2018, BIOLIFE4D successfully constructed a 3D-bioprinted vascularized and contractile cardiac patch made of iPSC. In 2019, they claimed that their next milestone would be to produce a human mini-heart, which would constitute the 3D-bioprinted mini version of a full-sized heart [276].

## Evolution of patent trends

The industrial interest toward 3D bioprinting can be quantified in terms of number of deposited patents, which reflects the propensity of a company to protect its ideas and solutions. In this work, the Espacenet website [277] was used to identify the patents submitted in this field.

A new version of the global query matching the syntax and other specifications of this different database was made.

A patent search was conducted in July 2020, and a total of 309 patent abstracts were found since the year of 2000. The abstracts of all patent records were carefully reviewed and grouped into the following categories: “bioprinting method”, “bioink”, “scaffold”, “bioprinter technology”, and “marginal involvement of 3D printing”.

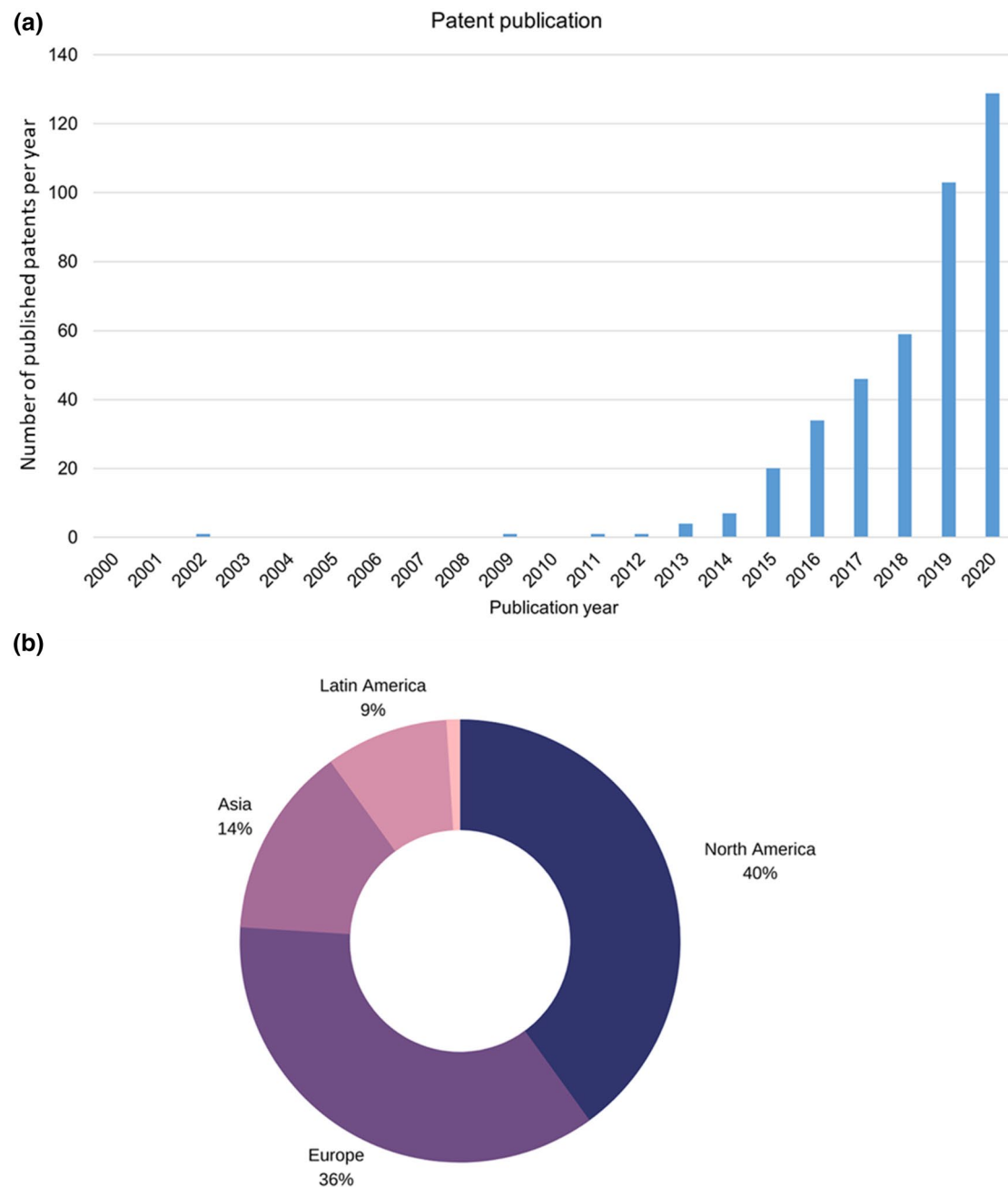
At first glance, it is apparent that the number of patents published shows exponential growth, just as the number of scientific publications. Two-thirds of all patents found were published in the last 3 years (Fig. 9a). This further confirms the growing number of companies and researchers entering this market.

Despite the fact that, as the previous analysis has highlighted, nearly all of the main bioprinting-related companies are based in the USA and Europe, more than two-third of the patents originate from Asia (Fig. 9b). It is important to underline that most of these patents were published recently, which is a good sign that Asian companies are expected to soon break into the market. Among the Asian countries, China is leading the field of 3D bioprinting with 58% of all patents published so far (against 19% of USA), followed by South Korea (14%).

Another interesting aspect concerns the topic of patents (Table 7). Nearly half of them are about new bioprinting methods for specific functions (bone, vascular, trachea graft), for describing novel 3D bioprinting techniques, or to patent new bioprinter technologies. One-third is instead relative to biomaterials: novel bioink formulations rather than specific applications for specific bioink.

Intriguingly, patents regarding scaffold production or bioprinter technologies were more common in the early years, while those concerning bioinks or specific applications became more prevalent later. This is probably an indication that current technologies have been somewhat established, and new solutions in this area can more easily concern new material developments for organ- or tissue-specific customization.

Figure 10 demonstrates that over two-thirds of the considered patents came from universities or unaffiliated scientists. It is clear that, in recent years, the number of academic applicants (i.e., universities, hospitals and research centers) is growing much faster than those coming from the industrial sector, whose number stays fairly constant. A more in-depth analysis of the patent origin (Figs. 10, 11) indicates that about 56% of those in the academic field and 61% of those in the industry come from China, which means that research output on bioprinting in this country is still booming. It is thus possible to justify the huge discrepancy between the high number of Chinese patents and the low number of Chinese companies. The next few years will probably see the birth of a growing number of Chinese companies focused on bioprinting.



**Fig. 9** **a** 3D bioprinting patent publication by year; **b** 3D bioprinting patent landscape composition per continent

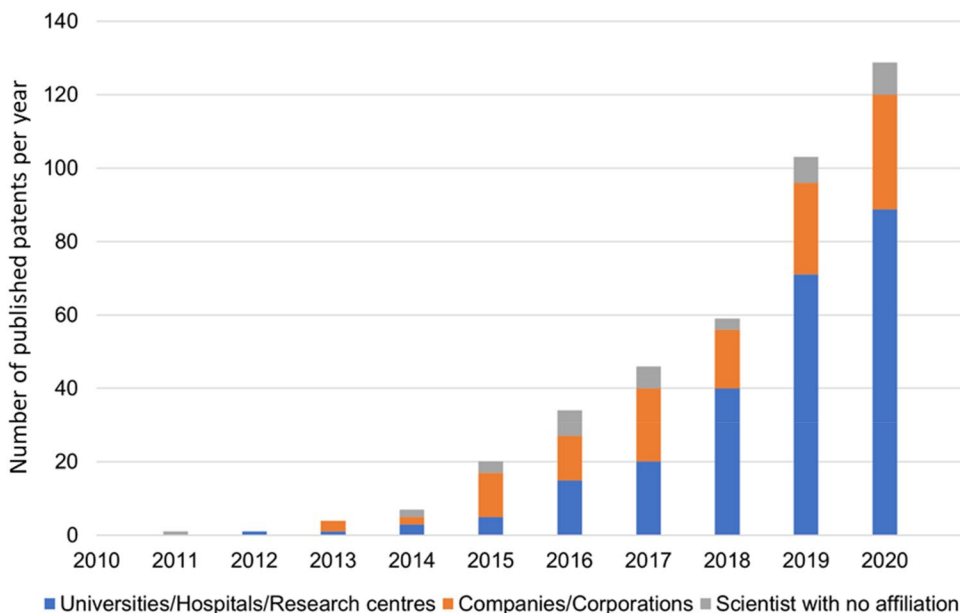
**Table 7** Patent categories

Category	Frequency	Share (%)
Bioprinting method	117	38
Bioink	85	28
Scaffold	53	17
Marginal involvement of 3D printing	28	9
Bioprinter technology	26	8

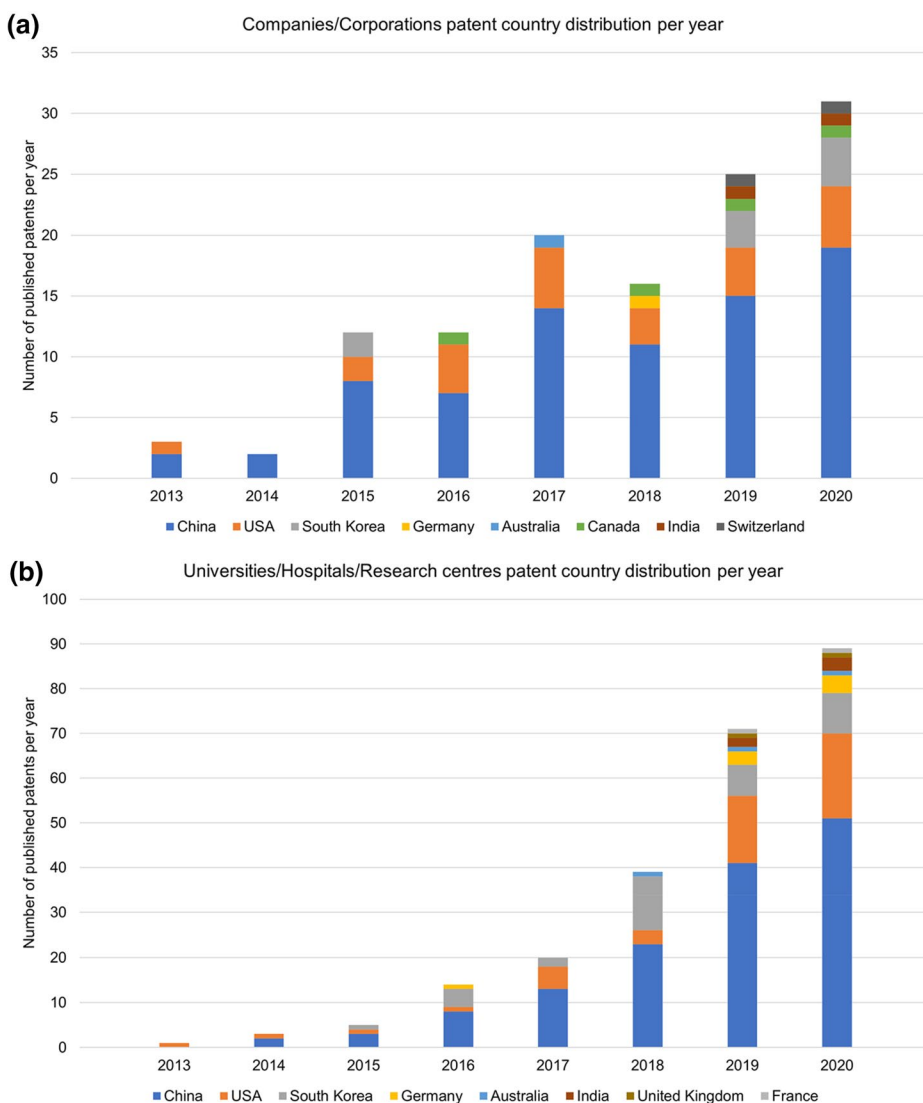
## Conclusions

The field of 3D bioprinting, which represents a novel area within AM technologies, shows a great potential for future expansion. In the last few years, this discipline has received an impressive level of interest in the scientific literature, attracting many innovators and creating new exciting markets. All these signals outline that we are possibly observing the expansion of a long-term research direction. Instead of

**Fig. 10** Distribution of patent applicants by year since 2011: Universities/Hospitals/Research centers, blue; Companies/Corporations, orange; Scientists with no affiliation, grey



**Fig. 11** Country distribution of patent applicants by year: **a** Universities/Hospitals/Research centers patent; **b** Companies/Corporations patent. Top countries: China, blue; USA, orange; South Korea, grey



preparing an additional review paper, the aim of this study was to provide the reader with a comprehensive overview of the academic and industry landscape of 3D bioprinting, in order that unfamiliar researchers have a compass to venture into exciting emerging technologies, and experienced academics are provided with an updated snapshot of the current status of this fast-changing field.

In the first part, a scientometric review of the literature was provided, with an analysis of all of the impressive literature (almost 10,000 papers, with most of them published in the last few years) to highlight the globally most relevant applications and key actors in terms of laboratories and research networks.

In the second part, the associated companies and emerging technologies were described to highlight the upcoming innovations and the most relevant players that consider the technology for new market developments.

It was confirmed that both paper and patent publications exhibited exponential growth in this sector, with the USA leading the level of scientific output while China showing an impressive growth in the whole number of patents, which clearly highlights its possible future position as a leading country in the bioprinting industry.

Many open challenges highlighted in this study call for new technological solutions that can be possibly borrowed from traditional AM research. The enhancement of printing resolution and speed, as well as cost reduction are common challenges to be faced in the near future. Remarkably though, bioprinting has certain unique features, such as the requirement of avoiding the mistreatment of cells during printing, and taking multi-material printing as a key asset for future technological developments.

To achieve this aim, multidisciplinary research should combine engineering expertise in AM, biological knowledge on cell growth and differentiation, material science for biomaterial developments, and expertise in biomedicine and pharmaceuticals to highlight and solve relevant research questions. With such a multidisciplinary approach, we might see a flourishing area that can have a relevant impact on successful future technologies aimed at the improvement of human wellbeing.

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## Declarations

**Conflict of interest** The authors declare that there is no conflict of interest.

**Ethical approval** This article does not contain any studies with human or animal subjects performed by any of the authors.

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