1 **Title:** Point-of-care analyte quantification and digital readout via lysate-based cell-free
2 biosensors interfaced with personal glucose monitors
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Abstract:
Field-deployable diagnostics based on cell-free systems have advanced greatly, but on-
site quantification of target analytes remains a challenge. Here we demonstrate that *Escherichia*
coli lysate-based cell-free biosensors coupled to a personal glucose monitor (PGM) can enable
on-site analyte quantification, with the potential for straightforward reconfigurability to diverse
types of analytes. We show that analyte-responsive regulators of transcription and translation
can modulate production of the reporter enzyme β-galactosidase, which in turn converts lactose
into glucose for PGM quantification. Because glycolysis is active in the lysate and would readily
deplete converted glucose, we decoupled enzyme production and glucose conversion to
increase endpoint signal output. This lysate metabolism did, however, allow for one-pot removal
of glucose present in complex samples (like human serum) without confounding target
quantification. Taken together, we show that integrating lysate-based cell-free biosensors with
PGMs enables accessible target detection and quantification at the point of need.
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27 **Keywords:** *cell-free systems, biosensor, personal glucose monitor, analyte quantification,*
28 *human serum, diagnostics*

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Introduction:
Cell-free expression (CFE)-based biosensors hold great potential for onsite
measurement of target analytes. A freeze-dried pellet consisting of the core protein expression
machinery—as is the result from preparing bacterial lysates for cell-free expression—plus
plasmid DNA coding for biosensor and reporter output can be sufficient to let a worker in the
field perform sample analysis at the sampling site. This strategy avoids the complicated logistics
that are otherwise required to bring samples to appropriately equipped and staff laboratories.
The extremely low sample volume, operator, and infrastructure requirements for CFE-based
sensors make this platform particularly promising for development of low-cost and easy-to-use
diagnostic tools for applications ranging from healthcare screenings to environmental
surveillance[1].

Despite the fact that applications of CFE systems for biosensing have expanded in
recent years, rapid and reliable analyte quantification in CFE reactions at the point of care
remains a challenge. Most of the current on-site CFE detection strategies use enzymatic
reporters to generate visible color pigment for either a binary, yes-or-no result readout[2, 3] or a
semi-quantitative measurement of target concentration using transient color changes[4]. Others
have used custom-built, portable electronic devices in place of bulky plate readers for result
interpretation and quantification[2, 3, 5]. While these efforts represent promising strides toward
quantitative analyte measurement at the sampling site, few of these approaches or devices can
match the simplicity, quantification, and digital readout offered by a personal glucose monitor
(PGM).
Since the product's commercialization in the 1970s, personal glucose monitors have
been through decades of refinement and matured into a robust and easily accessible
technology that many patients use daily and almost anywhere[6]. As a result, there has been
significant research effort to engineer biosensors that can be read by a glucose monitor[7-15]
rather than trying to engineer entirely new quantification devices that match the PGM's
portability and reliability. Recent efforts have even successfully interfaced glucose monitors with
cell-free system-based biosensors, though they were subject to significant limitations. The first-
ever reported use of cell-free systems with a glucose monitor was limited to using reagent
complementation strategies[8], such that it was only used to measure analytes that were required
components of the cell-free reaction. A more recent report demonstrated detection of the
presence and absence of targets (nucleic acid sequences) but did not aim for analyte
quantification, used a purified enzyme strategy with high costs (almost $10 per sample)[7], and
required a separate, overnight enzymatic conversion step necessitating advance knowledge of
patient glucose levels and sample-specific variable volumes of reagents to be added to the
reaction by the user to clear native glucose from samples, which would not be viable for field-
deployable applications. While that report was a significant step forward, the use of a PGM for
qualitative, presence/absence diagnosis rather than quantitative measurement meant the
strategy did not fully exploit one of the most critical and impactful capabilities offered by PGMs.
Even more importantly, for most clinically relevant biomarkers for conditions other than
infectious disease, it is the biomarkers' concentration—not merely their presence or absence—
that is the criterion for diagnosis[4, 16-18]. For these target analytes, quantification at the point of
need is critical and digital readout enables straightforward result interpretation .
Here, we aim to expand the repertoire of glucose monitor-mediated analyte detection to
include quantification of diverse sets of analytes via lysate-based CFE systems. We first
showed that a genetic circuit constitutively expressing the enzyme β-galactosidase (LacZ) in the
CFE lysate reaction successfully allows LacZ conversion of lactose to glucose and yields
measurable PGM outputs. We then demonstrated analyte-modulated LacZ production and
glucose conversion via different biosensing circuits. We successfully used a zinc-responsive
transcription factor to generate dose-dependent expression of LacZ to identify zinc deficiency in
a human serum matrix at clinically relevant concentrations. We further showed that the same
detection strategy could be used to detect and quantify nucleic acid biomarkers from
pathogenic *E. coli* by merely substituting the zinc transcriptional control elements with RNA
regulatory elements (toehold switches). In developing these diagnostic sensors, we found that
the metabolic pathways active in lysate-based CFE systems[19-23] readily deplete glucose in
reactions. As a result, we decoupled LacZ production from glucose conversion and capitalized
on this lysate metabolism for one-pot removal of glucose that may be initially present in a
complex sample environment (like human serum or other biofluids) without customizing reagent
volumes to individual samples, thereby eliminating a separate processing step to remove
endogenous glucose required in current PGM-mediated analyte quantification methods[7, 14, 15].

Taken together, our work showcases a broadly applicable and modular strategy for rapid and
reliable quantification of target analytes at the point of need, expanding the repertoire of PGM-
mediated biomarker detection with biosensors expressed in lysate-based CFE systems.
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94 **Results and Discussion:**
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96 *Lysate-based CFE reaction producing LacZ enzyme can convert lactose to measurable glucose*
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The first step toward PGM-mediated analyte quantification using lysate-based CFE
reactions was to confirm that the CFE reagents are compatible with commercial PGMs. To
verify reagent compatibility and glucose stability, we incubated D-(+)-glucose (hereafter referred
to as glucose) at concentrations of 0-25 mM in CFE reactions to span the full PGM detection
range and tracked their respective value readouts over time. Compared to glucose standards
prepared in water, we observed a slight decrease in signal output for immediate measurement
of the same glucose concentration in the CFE matrix (**Figure 1A**). We also found significant
glucose consumption in CFE reactions over time (**Figure 1A**). This finding was perhaps
unsurprising, as previous reports have observed and characterized significant endogenous
glycolytic metabolic activity in CFE lysates[19-23]; we attributed the loss in signal output over time
to enzyme-catalyzed conversion of glucose to glucose-6-phosphate due to residual glycolytic
activity in the lysate.
Endogenous glycolytic activity in crude *E. coli* lysate could pose serious problems for
CFE-mediated analyte quantification using PGMs, since glucose molecules generated by the
reporter enzyme in the CFE reaction would be readily depleted, and thus desired signal would
be lost. To address this issue, we chose to decouple reporter enzyme production from enzyme-
catalyzed glucose production. To assess how fast glucose can be produced for detection by the
PGM, we added a plasmid for constitutive expression of the enzyme LacZ to the CFE reaction
for 30 to 60 minutes. Following this incubation, a mixture consisting of naproxen and lactose
was added to the CFE reaction to terminate transcription in the CFE system and slow down
lysate metabolism (via naproxen) and to start glucose production via LacZ conversion of lactose
to glucose. Different concentrations of plasmid that constitutively express LacZ were used as a
testbed model for our eventual goal of LacZ expression that increases based on the amount of
analyte present. After 15 minutes of incubation, we observed plasmid dose-modulated glucose
signal production on the PGM (**Figure 1B**). Naproxen was used here due to its effectiveness at
inhibiting CFE reactions without impairing LacZ activity[4] (**Figure S1A-D**). We anticipate that
other small molecule inhibitors added at high concentrations could also be capable of halting the
CFE reaction, but we chose naproxen here due to its minimal effects on LacZ-mediated glucose
production, its inhibition of endogenous glucose depletion (**Figure S1E**), and our previous
experience using naproxen with cell-free biosensors[4].
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Figure 1: Characterization of glucose production and depletion in CFE reactions. **(A)**
Verification of CFE compatibility with PGM and time-course measurement of glucose depletion
in reactions. A slight decrease in PGM output was observed for the same concentration of
glucose in the CFE matrix and no incubation time compared to glucose in a water solution
("Standards"). Rapid depletion of glucose signal was observed in all CFE reactions over time.
Error bars represent the standard deviation of cell-free reaction triplicates. Dashed gray line
represents PGM's lowest reading threshold, 20 mg/dL. **(B)** Decoupling enzyme production and
glucose conversion in CFE reactions enabled dose-dependent PGM signal output. CFE
reactions containing varying concentrations of plasmid constitutively expressing LacZ were
incubated for 30 to 60 minutes before each reaction was quenched by naproxen-lactose mix to
shift the reaction from enzyme production to glucose conversion. Plasmid concentration-
modulated glucose production was detected using the PGM after 15 minutes of incubation.
Error bars represent the standard deviation of cell-free reaction triplicates. Dashed gray line
represents PGM's lowest reading threshold, 20 mg/dL.

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149 *Repurposing a PGM to quantify micronutrients in human serum*
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After successfully verifying plasmid dose-dependent glucose production in CFE systems,
we tested whether small molecule inducers could modulate dose-dependent glucose readings
on PGMs. We chose zinc as our target analyte for PGM-mediated quantification due to its global
health relevance (zinc deficiency is responsible for the deaths of 100,000 children under the age
of five worldwide every year)[24, 25] and our group's previous experience in developing a semi-
quantitative zinc biosensor[4]. The zinc sensor used here constitutively expresses (from the
promoter P_{T7}) a transcription factor ZntR, which in turn controls the expression of LacZ based on

the concentration of zinc. Zinc binding activates ZntR, which turns on expression from its
cognate promoter P$_{zntA}$ for LacZ production (**Figure 2A**).
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Figure 2: Application of PGM-mediated quantification of zinc in CFE reactions. **(A)** Schematic of
zinc-modulated glucose production and PGM-mediated target quantification in CFE reaction.
Zinc modulates LacZ production by binding to the constitutively expressed transcription factor
ZntR, thereby activating transcription from the ZntR-responsive promoter P$_{zntA}$. Following 45 min
of LacZ production, a mixture of the naproxen-lactose solution was added to quench the CFE
reaction and to start lactose conversion for 15 min. The converted glucose was then read on the
PGM for target analyte quantification. **(B)** Dose-dependent glucose production in CFE reaction
with zinc in a water matrix. The same experiment was replicated on different days to verify
consistency in glucose output. Replicates (Rep) represent independently assembled reactions
and error bars represent the standard deviation of cell-free reaction triplicates in each replicate.
Dashed gray line represents PGM's lowest reading threshold, 20 mg/dL. **(C)** Dose-dependent
glucose production in CFE reaction with zinc in 25% pooled human serum. The same
experiment was replicated on different days and with an independently assembled reaction to
verify consistency in glucose output. Error bars represent the standard deviation of cell-free
reaction triplicates in each replicate. Dashed gray line represents PGM's lowest reading
threshold, 20 mg/dL.
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Because the human physiologically relevant zinc concentration spans from 2 to 20 μM[4,
24], we first tested for zinc-modulated glucose production in a water matrix across this range
(**Figure 2B**). Using the same strategy to decouple analyte detection from glucose conversion,
we incubated CFE reactions for 45 minutes for LacZ production before quenching reactions with
naproxen-lactose mix and incubating for another 15 minutes for glucose production. In just 1

hour of total assay time, we observed a linear increase in glucose readout over a range
spanning 0-10 μM zinc, above which glucose output starts to plateau. Further, we observed
consistent glucose production across different reactions assembled on different days,
demonstrating that PGM-mediated analyte quantification could be a reliable method for daily
monitoring of micronutrient status.
We then focused on the linear response range of zinc concentrations, re-optimized
plasmid concentrations, and tested the compatibility of our approach with human serum
samples (**Figure 2C**). Because zinc is endogenously present in serum and the samples were
from otherwise healthy volunteers, the baseline level of zinc in the pooled serum sample would
prevent us from assessing the assay's ability to detect deficient zinc levels. To address this
issue, we first removed endogenous zinc from the pooled serum samples via chelation (see
Supplemental Method and **Figure S2D**) and then spiked different concentrations of zinc back
into the serum. In CFE reactions containing 25% pooled human serum, we observed a
consistent dose-dependent glucose signal readout over a range spanning 0-10 μM zinc across
different days (**Figure 2C**), reflecting 0-40 μM zinc in non-diluted human serum and thus
spanning a broad range of clinically relevant concentrations to detect zinc deficiency and
toxicity. The common clinical reference range for zinc deficiency is between 8.5-11.5 μM (or 2.1-
2.9 μM in 25% serum)[4, 24]. Since our assay can accurately measure zinc in this range, our
approach can be easily deployed for a quantitative micronutrient monitoring test at home or in
resource-limited environments.
We further highlight that endogenous glucose present in human serum did not interfere
with our PGM readout since the metabolic reactions active in cell-free lysate readily removed
serum glucose without impacting protein production (**Figure S2A-C**). Previous efforts using
PGMs for sensing in serum matrices have required additional steps to remove the confounder of
serum glucose from reporter measurements[14, 15], since serum glucose would be expected to
vary from patient to patient—the very reason the PGM exists—and thus interfere with
quantitative interpretation of the biosensor readout. Some of the previously reported approaches
to solving this problem would be infeasible for practical field application. With our approach, the
glucose consumption that was initially a potential obstacle in the use of lysate-based CFE has
been repurposed as a distinct advantage that allows quantification across highly variable patient
sample matrices.
Furthermore, our strategy of using a transcription factor-based, small molecule inducible
genetic circuit is modular and easily generalizable to detect other small molecule targets. To
develop a quantitative assay for another target molecule, one simply needs to replace the
transcription factor and promoter and adjust the CFE reaction time and/or lactose conversion
time to achieve the desired output level. The quantification workflow stays unchanged and
remains robust to complex samples.
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225   *Extending PGM applications to the detection of bacterial infections*
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We next tested if PGM-mediated analyte quantification could be extended to quantify
targets other than small molecules, as well as if the approach could use genetic circuits based
on regulators other than transcription factors. We chose to use toehold switches recognizing
RNA sequences of Shiga toxins 1 and 2 (Stx1 and Stx2) to detect pathogenic *E. coli* due to the
clinical relevance of the problem[26] and our previous work in developing these switches[27].
Toehold switches work by RNA-RNA strand hybridization and displacement[28] for sensitive and
fairly specific detection of target sequences. The addition of a trigger sequence complementary
to the toehold and partial stem region of the switch unwinds the inhibitory switch hairpin that
would otherwise block translation, thereby allowing reporter enzyme expression (**Figure 3A**).

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Figure 3: Application of PGM-mediated quantification of nucleic acids in CFE reactions. **(A)**
Schematic of toehold switch-modulated LacZ production and LacZ-catalyzed lactose conversion
to glucose output. Following 45 min of LacZ production caused by RNA trigger activating a
toehold switch to allow translation of LacZ, a mixture of the naproxen-lactose solution was
added to quench the CFE reaction and to start lactose conversion for 15 min. The converted
glucose was then read on the PGM for target analyte quantification. **(B)** Activation of Stx1
toehold switch and glucose output by RNA Stx1 trigger. Linear glucose response was observed
with a logarithmic increment of RNA triggers from 20 to 2000 nM. The same experiment was
replicated on different days to verify consistency in glucose output. Replicates (Rep) represent
independently assembled reactions and error bars represent the standard deviation of cell-free
reaction triplicates in each replicate. Dashed gray line represents PGM's lowest reading
threshold, 20 mg/dL. **(C)** Activation of Stx2 toehold switch and glucose output by linear DNA
coding for Stx2 trigger, which can transcribe Stx2 RNA trigger in CFE reaction. Linear glucose
response was observed with linear increments of DNA Stx2 trigger from 5 to 40 nM. Replicates
(Rep) represent independently assembled reactions and error bars represent the standard

deviation of cell-free reaction triplicates in each replicate. Dashed gray line represents PGM's
lowest reading threshold, 20 mg/dL.

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Using the same strategy and assay times, we first demonstrated RNA-modulated
glucose output over time using an Stx1 toehold switch with a LacZ reporter (**Figure 3B,** see
Supplemental Method for trigger preparation). DNA of Stx1 triggers was amplified from
genomic DNA of Shiga Toxin producing *E. coli* O157:H7 and served as a template for *in vitro*
transcription to produce RNA Stx1 triggers. A linear increase in glucose output was observed
over logarithmic increments of RNA Stx1 triggers ranging from 20 nM to 2 μM, behavior
consistent with RNA trigger-activated toehold switch output in previous reports[3, 4, 29]. Because
RNA could also be made from a linear DNA template coding for trigger transcription, we next
tested if adding linear DNA could modulate glucose production. We added linear DNA encoding
RNA Stx2 trigger amplified from genomic DNA of *E. coli* O157:H7 to activate an Stx2 toehold
switch with a LacZ reporter. We observed higher glucose conversion and a lower detection limit
than for Stx1 (**Figure 3C**). Compared to the zinc sensor, the toehold switches used here
exhibited higher background leakiness, as evidenced by the baseline (0 nM) readouts being
approximately 50 mg/dL instead of the PGM's minimum reading (20 mg/dL). This increased
background is due to the use of a dialyzed CFE lysate with enhanced transcriptional activity for
this application, as well as due to optimizing switch plasmid concentrations for improved fold-
change in glucose readings over the range of trigger concentrations tested, both intentional
design decisions for this sensor. Our results demonstrate that a lysate-based CFE reaction
coupled to PGM quantification is a highly generalizable platform compatible with multiple types
of analyte inputs and multiple types of genetic regulators.
Although our current nucleic acid sensors could not detect targets at physiologically
relevant concentrations (typically attomolar to femtomolar levels), an upstream amplification
step can be implemented to bring initial nucleic acid concentrations up to the detection limit[3, 7,]
[29]. Previous work has shown robust concentration-dependent toehold switch activation with
femto- to pico-molar of triggers amplified via isothermal amplification techniques[29]. Further, we
note that although for detection of infectious diseases (such as COVID-19, Zika, and Ebola
virus), a binary yes/no result may often be sufficient for diagnosis[2, 3, 30], there are many cases
where continuous monitoring and quantification of viral load is essential for assessing treatment
efficacy and determining disease prognosis[31]. Having a low-cost, portable, and reliable
quantification device can empower patients and healthcare workers to make faster and better
medical decisions at the point of need.

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291 **Conclusion:**

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Our work demonstrates that CFE lysate-based biosensors can be easily coupled to a
PGM for rapid and reliable analyte quantification at the point of need. The resulting platform is
highly generalizable, with demonstrated compatibility with different genetic regulators, analyte
types, and sample matrices. Previous efforts repurposing PGMs for small molecule
quantification have often used invertase-conjugated antibodies and DNA oligomers, or reagent
drop-out methods[8-13, 32], which have limitations in sensor sensitivity, specificity, and
generalizability toward the detection of other targets. Here we show that interfacing synthetic
circuits in CFE reactions adds an extensive library of developed biosensors to PGM sensor
design and allows users to fine-tune individual sensing reactions with genetic regulators and

signaling cascades. Indicative of the modularity and generalizability of this approach, each of
the sensing circuits used here was originally developed in the context of different biosensors,
but could be directly integrated into a PGM-based readout with some basic assay optimization.
The modular utility of the transcription and translation reactions used to transduce signals in
CFE reactions means that diverse target analytes can be detected with high sensitivity and
specificity while providing critical quantification.
We further highlight that the CFE-based approach is an enabling platform for improved
test accessibility and use at the point of need. CFE biosensing reactions have been
demonstrated to retain their function after lyophilization[2-4, 27, 33, 34], so these tests can be stored
and shipped to testing sites without cold-chain requirements, significantly enabling their
deployment to the point of need. Moreover, the use of lysate-based CFE in this work rather than
purified enzymes can reduce the cost of CFE reagents by almost an order of magnitude[2, 7],
making such an approach more feasible for wide-scale deployment and accessible to the
developing world as well as to consumers in developed countries. We also show that CFE
metabolism can be exploited to remove endogenous glucose initially present in complex
samples (like human serum) in a one-pot format, thereby eliminating an upstream processing
step to remove endogenous glucose that would otherwise be a requirement of a PGM-based
method. At the point of use, the operator simply needs to rehydrate the freeze-dried test
reaction with sampled fluid to activate the sensing reaction, incubate the sample for a set
amount of time, and then add the naproxen-lactose solution to shift the reaction to glucose
production. A commercial PGM strip would be used to measure the glucose produced,
immediately generating a numerical output on the PGM for result interpretation.
It is worth noting that for successful field deployment of these PGM-based sensors,
additional investigation will be necessary. The sensitivity of assay results to small perturbations
in the time and temperature of either step (LacZ production or glucose production) must be
assessed. If sensitivity is high, one potential mitigating strategy would be to use a set of
standards that could be run in parallel with the test reaction for additional validation[4]. Another
possibility could be to engineer an automated chip for dispensing reagents and regulating
timing, though this would significantly increase the cost per assay and limit the impact and
accessibility of this approach as a low-cost diagnostic.
Nevertheless, our work provides an enabling advance toward inexpensive, point-of-care
sample quantification with simpler transportation and operator requirements and fast result
turnaround in 1 hr. We demonstrate that interfacing synthetic biology and CFE to PGM-
mediated analyte detection has the potential to enable accessible, affordable, and reliable
quantification of diverse analytes at the point of need.
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338   **Materials and Methods:**
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Bacterial Strains and Plasmid Preparation
E. coli strain DH10β was used for all cloning and plasmid preparations. *E. coli* strain
BL21 Star (DE3) Δ*lacIZYA* was created by lambda red recombination and used for in-house
cell-free lysate preparation. Genomic DNA from *E. coli* O157: H7 (ATCC 51657GFP) was used
as a template for Stx1 and Stx2 trigger amplification.
Supplementary **Table S1** contains sequences of all parts used in this study. Eurofins
Genomics synthesized DNA oligonucleotides for cloning and sequencing. Plasmid DNA used for
all CFE reactions was purified from EZNA midiprep columns (OMEGA Bio-Tek) followed by
isopropanol and ethanol precipitation. The purified DNA pellets were reconstituted in the elution
buffer, measured on a Nanodrop 2000 for concentration, and stored at -20 ˚C until use.
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Cell-Free Reactions
The cell-free reaction was assembled as previously described by Kwon and Jewett[35].
See **Supplemental Method** for details on the crude cell-free extract preparation. All CFE
reactions, except reactions expressing toehold switches or malachite green aptamers, used
crude lysate without post lysate processing steps such as run-off reactions and dialysis.
Dialyzed lysate was used for toehold switch and malachite green aptamer reactions due to its
enhanced transcriptional capacity[36]. **Table S2** tabulates the specified concentrations of
plasmids and reaction additives used in each figure. For reactions measured with a plate
reader, each cell-free reaction was 10 μL in volume and placed in a black-bottomed 384-well
plate (Greiner Bio-One) for fluorescence measurement or a clear-bottomed 384-well plate
(Greiner Bio-One) for absorbance measurement. Kinetic reads were performed in a plate reader
(Synergy4, BioTek) at 37 °C for 1 hr. The filter setting for GFP measurement was 485/510 nm
excitation/emission wavelengths, with the gain set at 70. The filter setting for malachite green
measurement was 615/650 nm excitation/emission wavelengths, with the gain set at 100. For
chlorophenol red-β-D-galactopyranoside (CPRG) measurement, sample absorbance was
measured at 580 nm. All plates were sealed with a transparent, adhesive film to prevent
evaporation.
For reactions read on a PGM, each assembled cell-free reaction was 9 μL in volume and
placed in a PCR tube with the cap on to prevent evaporation. Reactions were incubated at 37 °C
for the specified amount of time before glucose measurement. For reactions quenched with the
naproxen-lactose mix, 1 μL of the 10x quench mix (100 mM naproxen sodium and 400 mM
lactose) was added to each reaction after 45 minutes of incubation at 37 °C to start glucose
conversion. Quenched reactions were incubated at 37 °C for 15 minutes before measurement
on a PGM.
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PGM Quantification
A glucose oxidase-based PGM (OneTouch Ultra 2 Blood Glucose Monitoring System,
LifeScan Inc) and accompanying test strips (OneTouch Ultra Test Strips, LifeScan Inc) were
used for glucose measurement. Once the glucose-generating step of the reaction was
completed, 2 μL of each reaction was spotted on the test strip and measured with the PGM.
Because the PGM's readout range is from 20 to 600 mg/dL, values below or above the meter
threshold were assigned a value of 20 mg/dL or 600 mg/dL, respectively.
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392
393 **Author Contributions**
394 Conceptualization: YZ, MPS; Investigation: YZ, PLS, MWK; Formal Analysis: YZ, PLS, MWK;
395 Writing – Original Draft: YZ; Writing – Review & Editing: YZ, PLS, MWK, MPS; Visualization:
396 YZ; Supervision: MPS; Funding Acquisition: MPS.

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