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2 **Large, long range tensile forces drive convergence during *Xenopus* blastopore closure and**  
3 **body axis elongation.**

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1 **ABSTRACT**

2 Indirect evidence suggests that blastopore closure during gastrulation of anamniotes, including  
3 amphibians such as *Xenopus laevis*, depends on circumblastoporal convergence forces generated  
4 by the marginal zone (MZ), but direct evidence is lacking. We show that explanted MZs generate  
5 tensile convergence forces up to 1.5  $\mu\text{N}$  during gastrulation and over 4  $\mu\text{N}$  thereafter. These  
6 forces are generated by convergent thickening (CT) until the midgastrula and increasingly by  
7 convergent extension (CE) thereafter. Explants from ventralized embryos, which lack tissues  
8 expressing CE but close their blastopores, produce up to 2  $\mu\text{N}$  of tensile force, showing that CT  
9 alone generates forces sufficient to close the blastopore. Uniaxial tensile stress relaxation assays  
10 show stiffening of mesodermal and ectodermal tissues around the onset of neurulation,  
11 potentially enhancing long-range transmission of convergence forces. These results illuminate  
12 the mechanobiology of early vertebrate morphogenic mechanisms, aid interpretation of  
13 phenotypes, and give insight into the evolution of blastopore closure mechanisms.

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16 **Keywords:** biomechanics, mechanobiology, force, gastrulation, convergent thickening,  
17 convergent extension, blastopore closure, *Xenopus*

18

## 1 INTRODUCTION

2 Major morphogenic (shape-generating) movements in the development of multicellular  
3 organisms occur by integration of local, force-generating activities and force-transmitting  
4 properties of individual cells into “morphogenic machines” that act across the tissue-level length  
5 scale. Understanding the physical aspects of tissue movements is essential for understanding  
6 how cells and gene products function in morphogenesis (Keller et al. 2003; Keller et al. 2008),  
7 and thus biomechanical measurements, mathematical modeling, and rigorous engineering  
8 standards play increasing roles in experimental analyses (see Jacobson and Gordon 1976;  
9 Hardin and Cheng 1986; Priess and Hirsh 1986; Hardin 1988; Hardin and Keller 1988; Koehl  
10 1990; Hutson et al. 2003; Keller et al. 2008; Rodriguez-Diaz et al. 2008; Toyama et al. 2008;  
11 Layton et al. 2009; Varner et al. 2010). Semi-quantitative biomechanical properties of embryonic  
12 cells and tissues have been inferred from responses to micro-dissection (Beloussov 1990;  
13 Fernandez-Gonzalez et al. 2009; Ma et al. 2009; Solon et al. 2009; Martin et al. 2010; Fouchard et  
14 al. 2011), and in other cases, direct quantitative measurements have been made (Adams et al.  
15 1990; Moore 1994; Davidson 1995; Davidson et al. 1995; Moore et al. 1995b; Davidson et al.  
16 1999; Zhou et al. 2009; Zhou et al. 2010; Luu et al. 2011; David et al. 2014; Feroze et al. 2015).  
17 Here we link the generation of tensile force around the blastopore by tissues within the  
18 Involuting Marginal Zone (IMZ) to specific morphogenic machines operating during gastrulation  
19 and neurulation and provide a basis for testing the role of specific molecular components of  
20 these machines in generating tissue level forces.

21 Amphibian blastopore closure is thought to result from tensile convergence forces generated  
22 largely by the IMZ, an annulus of presumptive mesodermal tissue surrounding the blastopore  
23 (see IMZ, Fig. 1A). In our working model, as gastrulation begins, Convergent Thickening (CT,

1 white arrows, Fig.1A-B ) of the IMZ decreases its circumference, which tends to push it toward  
2 and over the blastoporal lip, thereby contributing to involution of the mesodermal IMZ (black  
3 arrows, Fig. 1A, B). CT occurs in cultured giant sandwich explants over the same period (white  
4 arrows, Fig.1 C-D; Shook et al., in preparation). CT was originally defined in explants of the  
5 ventral IMZ of *Xenopus* as a convergence of tissue that drives radial (normal to the embryonic  
6 surface) thickening rather than the A-P extension that results from Convergent Extension (CE,  
7 see Keller and Danilchik 1988). As cells of the IMZ involute, they stop expressing CT and express  
8 *postinvolution behaviors*. The first cells to involute, those of the head, heart, lateroventral  
9 mesoderm (orange, Fig. 1A-B), migrate directionally across the blastocoel roof toward the  
10 animal pole (gray arrows, Fig. 1E). As cells of the later-involuting notochordal and somitic  
11 mesoderm (magenta and red, respectively, Fig. 1A) involute, they express mediolateral  
12 intercalation behavior (MIB), the polarized cell behavior that drives mediolateral cell  
13 intercalation, and thus CE (MIB- black, fusiform cells; CE- green and blue arrows, Fig. 1F). MIB  
14 (and thus CE) are expressed progressively, beginning anteriorly at the midgastrula (stage 10.5)  
15 with the formation of the Vegetal Alignment Zone (VAZ, Fig. 1E, E'). From this origin, MIB  
16 progresses posteriorly in embryos (Fig. F) and explants (Fig. G-H) (see Keller and Winklbauer  
17 1992; Shih and Keller 1992a; Shih and Keller 1992b). In explants, MIB-driven cell intercalation  
18 shortens arcs of cells that extend to the explant margins and pulls the margins medially during  
19 CE (asterisks, Fig. J-K). In contrast, in embryos the ends are anchored at their junction with the  
20 vegetal endoderm in the region of bottle cell formation (asterisks, Fig. 1E', F, F'), and their  
21 shortening forms a tensile hoop just inside and beyond the point of involution (Fig. F), which  
22 drives constriction of the dorsal blastopore (Fig. 1C) and further CE of the dorsal tissues of the  
23 gastrocoel roof (GR, Fig. 1F'). The presumptive pattern of the future, post-involution MIB

1 mapped on the to IMZ of the embryo and giant explant (Fig. 1I and J, K, respectively) illustrate  
2 how A-P progression of MIB driven arc-shortening drives CE. This pattern of MIB expression  
3 was determined from time-lapse imaging of the progress of MIB across open-faced explants  
4 (Shih and Keller 1992b; Domingo and Keller 1995; Keller et al. 2000b). Congruent with the post-  
5 involution CE of the mesoderm, the overlying posterior neural tissue (spinal cord/hindbrain)  
6 also undergoes CE (dark blue, Fig. 1B), a CE that also occurs in explants without underlying  
7 mesoderm (Fig. 1G-H) (Elul et al. 1997; Davidson and Keller 1999; Elul and Keller 2000; Ezin et  
8 al. 2003; Ezin et al. 2006; Rolo et al. 2009; Ossipova et al. 2014). MIB occurs in various forms in  
9 ascidians (Munro and Odell 2002), fish (Jessen et al. 2002; Glickman et al. 2003; Lin et al. 2005),  
10 and in the mesoderm (Yen et al. 2009) and neural tissue (Williams et al. 2014) of the mouse.

11 Ventralized *Xenopus* embryos lack notochordal, somitic, and neural tissues and therefore do  
12 not express CE but nevertheless involute their IMZ and close their blastopores (Scharf and  
13 Gerhart 1980), suggesting that CT alone can close the blastopore (see Keller and Shook 2004)  
14 (Fig. 1L, M). IMZ explants from ventralized embryos show a rapid, near uniform CT throughout  
15 the IMZ (Fig. 1N-O). Some amphibians, such as *Gastrotheca rhiobambe* (del Pino 1996; del Pino  
16 et al. 2007) and *Eleutherodactylus coqui* (Shook, D., unpublished observations) close their  
17 blastopores solely or largely by CT and then express CE during the neurula stages (Shook,  
18 unpublished observations and see Keller and Shook 2004).

19 The role of these convergence-producing morphogenic machines in blastopore closure was  
20 inferred from the fact that breaking the continuity of the IMZ transverse to the axis of  
21 convergence results in catastrophic failure of normal involution and blastopore closure  
22 (Schechtman 1942; Keller 1981; Keller 1984; reviewed in Keller et al. 2003). Also, the force-

1 producing extension of dorsal IMZ explants (Moore 1994; Zhou et al. 2015) and the autonomous  
2 CE of “giant sandwich explants” (Poznanski et al. 1997) implies an active, force-producing  
3 convergence. Finally, disrupting MIB, which is thought to underlie CE, by perturbation of the  
4 planar cell polarity (PCP) pathway, blocks blastopore closure in embryos and blocks CE in  
5 sandwich explants and embryos (Djiane et al. 2000; Tada and Smith 2000; Wallingford et al.  
6 2000; Habas et al. 2001; Goto and Keller 2002; Habas et al. 2003; Ewald et al. 2004). Zhou and  
7 others (2015) measured 'thickening' and extension force of dorsal isolates of the neurula,  
8 finding them nearly equal, and the blastopore lip of whole embryos can exert  $\sim 0.5 \mu\text{N}$  of force on  
9 cantilever probes (Feroze et al. 2015).

10 Here we use explants, including some or all of the IMZ, to assay the forces generated by  
11 tissues expressing the different morphogenic machines contributing to these forces, CT and CE,  
12 together or alone, using a mechanical measuring device (the “tractor pull” apparatus; See  
13 Methods) (Fig. 2). We show that the IMZ can generate and maintain large, constant, convergence  
14 forces and transmit them over long distances for long periods. We also use a uni-axial tensile  
15 stress-relaxation test (Wiebe and Brodland 2005; Benko and Brodland 2007) to show that the  
16 IMZ and animal cap stiffen around the onset of neurulation. We also demonstrate a previously  
17 unknown transition in which CT generates most or all of the force to midgastrulation, at which  
18 time the IMZ progressively involutes, expresses MIB and contributes progressively more force.  
19 These methods provide a quantitative approach for evaluating the cellular and molecular  
20 mechanisms of developing convergence (tissue shortening) forces and tensile stiffness.  
21 Quantification of tensile convergence force and tensile stiffness offers new insights into the  
22 causes of failure of blastopore closure, body axis extension, and neural tube closure. Failures of  
23 these processes produce common, often linked, but poorly understood phenotypes, which result

- 1 from genetic and molecular lesions, notably of the PCP pathway (Ewald et al. 2004), and are of
- 2 biomedical importance in neural tube defects.
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1 **RESULTS:**

2 ***Giant Sandwich explants recapitulate most of the in vivo convergence movements of the IMZ***

3 Time-lapse movies show that the mesodermal (IMZ) and neural (NIMZ) tissues in  
4 unencumbered (un-tensioned) giant sandwich explants undergo convergence similar to that  
5 seen in embryos, except that the rate peaked earlier in explants (Fig. S1A) and was only 57% of  
6 that in whole embryos during gastrulation (Table 1). Imaging explants as they were made  
7 revealed 600%/hr convergence in the first three minutes after cutting (Fig. S2), two orders of  
8 magnitude faster than that of post-construction explants or embryos (Table 1), suggesting that  
9 convergence against resisting tissues (e.g. the vegetal endoderm) resulted in stored elastic  
10 energy in the embryo, in line with prior findings (Beloussov et al. 1975; Beloussov 1990; Fung  
11 1993). Therefore rapid, unmeasured convergence of the IMZ occurred when freed of this  
12 resistance at explantation. Unencumbered giants and intact embryos reached a minimal rate of  
13 convergence by 9 hours after the onset of gastrulation (G+9h) (Fig. S1), when involution is  
14 complete and convergence occurs only as CE of the involuted mesodermal tissues and overlying  
15 neural tissue. The dorsal tissues in giant sandwiches converged and extended well (Fig. S3), and  
16 tissue differentiation, assayed by markers for notochord and somitic mesoderm, was as expected  
17 from previous work (Fig. S7) (see Keller and Danilchik 1988; Poznanski et al. 1997).

18 ***Giant sandwich explants generate a consistent pattern of force during blastopore closure***

19 Assays of standard giant sandwich explants (Fig. 2B), beginning between control stages  
20 10.25(G+1hr) and 11.5(G+3.5h), showed a consistent pattern of circumblastoporal  
21 (mediolateral) tensile force increasing with time, in two major phases (Fig. 3A, blue line). In the  
22 first phase, beginning when the explant pulled the cleat against the probe (Fig. 2I), usually



1 within the first 3 to 30 minutes of the assay, force increased steadily to over 1  $\mu\text{N}$  by the end of  
2 gastrulation in control embryos (stage 13, G+6h) and increased further by early neurulation  
3 (stage 14, G+7.5h) when it plateaued at about 2  $\mu\text{N}$  (Fig. 3A, blue line). A second phase of force  
4 increase began 3 hours later (late neurula stage 18, G+10.5h) with most samples exhibiting a  
5 second plateau at about 4 to 5  $\mu\text{N}$  by G+15 to 18 (Fig. 3A, blue line, S4AB). Probe #3  
6 measurements are similar but higher early than those of probe #4 (Fig. 3, green line, S4AB) due  
7 to measurements that began earlier. Animal cap sandwiches, which do not normally converge or  
8 extend, showed no convergence force (Fig. 3A, brown line), thus ruling out healing and other  
9 artifacts. Probe drift and friction were accounted for (see Supplementary Methods, Fig. S5).

10 Immunohistochemical staining showed normal differentiation of somitic and notochordal  
11 tissues undergoing CE in mechanically loaded (encumbered) sandwiches (Fig. S7A-D). As in  
12 unencumbered sandwiches, tissues in each half of the sandwich were fused with their  
13 counterpart in the other half (see Keller and Danilchik 1988; Poznanski et al. 1997). Notochords  
14 were sometimes split posteriorly (Fig. S7C), perhaps related to retarded convergence compared  
15 to that of unencumbered giants (Fig. S1B, S3). Also the NIMZ, especially the non-neural portion,  
16 converged very little (Fig. S1B, S3; Movie 2, 4).

### 17 ***Contributions of the changing expression of CT and CE to convergence force.***

#### 18 *CT GENERATES CONVERGENCE FORCE EARLY AND THROUGHOUT GASTRULATION.*

19 Giant explant tissues express CT alone in early gastrula stages, followed by progressive  
20 transition to MIB/CE-expressing tissues. The progressive transition from CT to CE allows using  
21 giant, dorsal, ventral, and ventralized explants to ferret out the contributions of each  
22 morphogenic machine. The IMZ of unencumbered giant explants converges equally across its

1 mediolateral extent, without anisotropic (dorsally-biased) extension through G+2h (stage 10.5)  
2 (Movie 4). Thus CT is expressed early, from the onset of gastrulation, and everywhere in the IMZ,  
3 rather than just ventrally and later, as previously thought (Keller and Danilchik 1988). To  
4 measure early forces, giant explants were made from late blastulae (the dorsal side identified by  
5 “tipping and marking”; see Methods), mounted in the apparatus and measured before  
6 gastrulation began and prior to expression of MIB/CE. Tension appeared as early as stage 10  
7 (Fig. 3A, light blue line), and rose to 0.3  $\mu$ N of force prior to the onset of MIB, which occurs at  
8 G+2h (Shih and Keller 1992b; Lane and Keller 1997), demonstrating that early forces are  
9 generated solely by CT. Ventral 180° sandwich explants (Fig. 2D-E), which do not form dorsal  
10 tissues or express CE but do show CT, and the entire marginal zone of UV ventralized embryos  
11 (Fig. 2F-G), which do not have dorsal, CE expressing tissues (see below) converge equally across  
12 their mediolateral extent, without isotropic extension until reaching an equilibrium state of  
13 convergence and thickening (Movie 3). These ventral sandwich explants showed initial force  
14 increase similar to standard giant explants, and plateaued at about 2  $\mu$ N, similar to standard  
15 giant explants, but neither exhibited the second phase of force production. These results show  
16 that forces equivalent to those generated by a combination of CE and CT in standard giants  
17 during gastrulation, can be generated by CT alone in ventral tissues and that CT continues to  
18 operate if not replaced by CE.

19 *EXPLANTS EXPRESSING CE OVER A LARGER PROPORTION OF THEIR MEDIOLATERAL ASPECT HAVE A REDUCED OR NO*  
20 *PLATEAU.*

21 Late giant explants, made as in Fig. 2A-C but at the midgastrula stage, and Dorsal 180  
22 explants (Fig. 2A-C) show a more continuous increase of tensile force, with a moderate or no

1 decline in the rate of force increase (Fig. 3C and D, purple and magenta lines, respectively)  
2 during the plateau of normal giants, and they show a final plateau of 3.5 to 4  $\mu\text{N}$  (G+14h; stage  
3 21-22), a little lower and earlier than normal giant explants.. The more continuous rise in force  
4 produced by these explants is correlated with absent or reduced intervening ventral and lateral  
5 (ventrolateral) regions, allowing a more direct attachment of MIB/CE expressing tissue to the  
6 attachment strips, which suggests that the presence of ventrolateral (presumptive posterior)  
7 tissues accounts for the plateau.

8 *THE PLATEAU IS LIKELY DUE TO STRAIN IN THE VENTROLATERAL TISSUES.*

9 We measured uniform convergence (= negative strain) rates along the mediolateral axis of  
10 unencumbered giants (data not shown; see movie 4), whereas encumbered giants show 70% of  
11 the convergence of encumbered giants in the dorsal sectors expressing CE, but none in more  
12 ventrolateral sectors not yet expressing CE during the first phase of force increase (Table 1).  
13 Comparison of the rate of shear of the explant with respect to the attachment strips (the rate of  
14 convergence of the edges of the widest part of the IMZ minus the convergence of the sled toward  
15 the anchor (Supplementary Materials: Morphometrics)), showed that shear accounted for  
16 substantially more of explant convergence than did sled movement (Table 1). During the  
17 plateau, overall IMZ convergence dropped by 1.6%/hr for probe 3 while shear dropped by  
18 1.2%/hr, such that it matched the remaining convergence of 2.5%/hr (Table 1). By region, the  
19 overall decline in convergence was explained by a 0.6%/hr increase in strain in ventrolateral  
20 tissues and a 0.2%/hr decline in convergence in dorsal tissues. Thus, the plateau is due  
21 primarily to the increased strain of the ventrolateral tissues; this could be explained either by a  
22 decline in stiffness, or by a decline or stall of force generation in this region. Also, the end of the  
23 plateau in giant explant assays is associated with significantly increased convergence of the

1 ventrolateral regions by 2.2%/hr and significantly decreased convergence by 1.5%/hr in dorsal  
2 regions (Table 1), suggesting an increase in stiffness or force generation in these regions.

3 ***Tension developed by explants represents a progressively increasing, instantaneous stall***  
4 ***force***

5 Forces generated by the cells within the tissue increase tension and drive convergence.  
6 Because the probe resists this convergence, tension across the explant increases over time.  
7 Tension increase is limited by the stall force of the motors involved (CT, CE) and by the yield  
8 strength of the tissues involved. We use “stall” here in the sense that cellular convergence can  
9 no longer proceed, e.g. because the tension across individual cells engaged in MIB is high enough  
10 that they can no longer pull themselves between each other; it is less clear what factor limits  
11 convergence by CT. Once the yield stress for a tissue (force/area) is reached, forces generated  
12 by CT and CE result in plastic deformation of that tissue, and convergence in one region is  
13 balanced by strain in another. Understanding the behavior of the explant requires an  
14 understanding of the biomechanically complex structure of the explant, and its dynamic changes  
15 over time. Also, it may be assumed that yield strength and stall force as they apply to the explant  
16 are not “all or nothing” effects; there are likely to be multiple structures with different rates of  
17 viscous flow leading to different rates of plastic deformation across a range of tensions. And  
18 because each cell is a motor, and is differently arranged within the tissue, they will reach their  
19 stall force at different over-all tensions across the explant.

20 We propose that initially (first 20-30 minutes) convergence proceeds rapidly until the stall  
21 force of the machine(s) is reached. At this point, force increase slows, advancing only as  
22 additional cells are recruited, either by the progression of MIB into more posterior tissues, or as

1 shear allows convergence to proceed such that more MIB expressing cells are acting in parallel  
2 (see Fig. 1F-G), increasing the “instantaneous” stall force for the current extent of  
3 morphogenesis. It less clear what effect convergence allowed by shear would have on an  
4 increase of the overall stall force of CT, but results from ventralized explants (Fig. 3D) suggest  
5 that they too increase stall force with convergence. This slower rate of force advance continues  
6 until the plateau, at which point the level of tension across the explant reaches the yield stress  
7 for the LV region, which results in its observed slight increase in strain rate, while CE continues  
8 to drive convergence in more dorsal tissues.

9 Our model above, that encumbered explants are increasing tensile force as they recruit more  
10 cells into MIB, predicts that applying additional exogenous tension to an explant should prevent  
11 further force generation by the explant until shear has allowed enough convergence such that  
12 the instantaneous stall force rises above the current level of tension. To test this, we applied  
13 additional tension to explants at various stages through the end of the plateau, by increasing the  
14 strain on them (Fig. S8, C-E). Explants (n = 9) generally showed an immediate 0.5 to 0.6  $\mu\text{N}$   
15 increase in tension, which decayed quickly over the next 15 to 30 minutes, then remained static  
16 until the explants projected rise in force prior to being strained reached their new, current level  
17 of tension (e.g. Fig. S8 A,B). In no case did tensioned explants produce higher final amounts, or  
18 rates of increase, of force. These results demonstrate that increased tension stalls force increase,  
19 as predicted, and that while the explant can sustain greater tension, increased tension alone  
20 does not trigger increased force production.

21 If the force developed by the explant at a given time does represent an instantaneous stall  
22 force, we expect that decreasing tension by decreasing strain should allow more rapid  
23 convergence until the system maximum is reached again. Reducing strain by moving the anchor

1 toward the probe (Fig. S8 H,I) enough to decrease tension on the explant by 1.2 to 1.4  $\mu\text{N}$   
2 resulted in an immediate observed relaxation across the explant of from 0.6 to 1.2  $\mu\text{N}$ , with the  
3 remainder corresponding to the rapid recoil of elastic strain during anchor movement ( $< 1$   
4 second). After the initial, rapid elastic recoil, explants converged at a rate similar to  
5 unencumbered explants (about 10%/hr, see Table 1), until recovering their prior tension levels  
6 (e.g. Fig. S8 F,G). Recovery was consistently ( $n = 6$ ) rapid ( $< 15$  minutes) during the first phase  
7 of force increase, whereas it was consistently ( $n = 4$ ) slower (30 minutes or more) during the  
8 major plateau or during DBC re-expansion. After recovery during the first phase of force  
9 increase, explants converged at rates more typical of encumbered explants (about 4%/hr, Table  
10 1). This rapid recovery supports our model that explants under tension are at an instantaneous  
11 stall force, with consequently retarded convergence during all but their initial period of force  
12 increase. The slower recovery of the explants to normal levels of tension during the plateau is  
13 consistent with lower levels of stored elastic energy, across the explant as a whole at this time  
14 (Discussion).

15 We tested the idea that less force was being generated during the plateau phase, based on the  
16 premise that reduced force generation results in lower stored elastic energy, which is  
17 presumably continuously dissipated by long term viscous tissue flow, loss to heat, etc. While not  
18 quantitative, the immediate, rapid elastic recoil (tension released by anchor movement –  
19 observed tension drop; see Fig. S8 F-I), which occurs at a rate much higher than observed for  
20 normal explant convergence, suggesting it is not dependent on metabolic energy expenditure  
21 (Chen 1981), should provide a qualitative assessment of the relative amount of elastic energy  
22 stored. Both the fraction of tension released by anchor movement that was recovered during  
23 rapid recoil and the rate of that recoil were greater during the first phase of force increase

1 compared to the plateau phase. We compared the fraction of tension relaxation that was  
2 recovered within the first 5 seconds (fractional recoil = immediate elastic recoil/tension  
3 released by anchor movement; see Fig. S8 F-I), and the rate of recoil in the first 5 seconds (recoil  
4 rate = immediate recoil distance (as a percent of total mediolateral explant width)/time). We  
5 found that the fractional recoil was 41% (S.E. = +/- 5%, n = 6) during the first phase of force  
6 production, compared to 28% (S.E. = +/- 5%, n = 3) during the plateau. The recoil rate was  
7 670%/hr (S.E. = +/- 90%/hr; n = 7) during the first phase of force increase (similar to the recoil  
8 rate of 600%/hr seen in explants freshly cut from intact early gastrulae), compared to 390%/hr  
9 (S.E. = +/- 32 %/hr; n = 3) during the plateau. These results show that during a tractor pull,  
10 explants, like the intact embryo, store considerable elastic strain-energy, more of which is  
11 recoverable during the first phase of force increase than during the subsequent plateau. This is  
12 consistent with the idea that ventrolateral tissues have reduced force accumulation during the  
13 plateau (Discussion). Alternatively, the rate of dissipation may increase during the plateau, e.g.  
14 because the tissue has reached its yield stress and is deforming plastically.

15 ***Structural stiffness increases in all tissues around the end of gastrulation.***

16 Because we expect that variations of convergence and strain across CT-CE expressing tissue  
17 depend in part on the tissue's spring-like properties, we asked whether these properties vary. A  
18 true elastic modulus could not be measured because the tests are not isometric nor the tissue  
19 homogeneous (see Supplementary Materials). Instead we estimated tissue stiffness along the  
20 mediolateral axis of the explants with a uniaxial, tensile stress relaxation test (Fig. 4), and  
21 estimated sagittal sectional areas from fixed samples (Fig. 5A; see Supplementary Materials).  
22 Fixed samples of standard Giant and Dorsal 180° explants show similar increases in sagittal area

1 (Fig. 5A) due to progressive MIB-mediated intercalation (Figures 1E-F, G-H). Ventral 180°  
2 explants increase in sagittal area until about the time of the plateau, then remain stable,  
3 suggesting either that thickening has reached an equilibrium, or is developmentally  
4 programmed to stop.

5 From the time-dependent stress decay (Fig.4C, F), parameters for a network model of stress  
6 relaxation were estimated (Fig. 4E; see supplementary materials), including the residual  
7 structural stiffness and constant of spring stiffness for the explant at 180 seconds after strain  
8 application (Fig. 5), as well as instantaneous structural stiffness and viscosity (supplementary  
9 materials, Fig. S9). A standard 300  $\mu\text{m}$  displacement from the probe produced an average 12%  
10 (range = 8 to 14%) strain of the mesodermal region between the sleds by 180 seconds, in giant  
11 explants initially at rest. The modulus estimated from structural stiffness's along the  
12 mediolateral axis of giant explants rose significantly from 14 Pa (Pascals) at late gastrulation  
13 (G+4.8h) to 21 Pa by mid neurulation (G+8.7h) ( $p < 0.01$ , paired t-test,  $n = 6$  vs. 6) (Fig. 5B).  
14 After release from tension, explants recoil rapidly and typically returned to near their initial  
15 width within three minutes, with about 25% of the initially applied strain lost to permanent, or  
16 plastic, deformation, leaving them about 3% longer.

17 D180° and V180° sandwich explants also showed a trend of increasing stiffness from  
18 gastrula to neurula stages (Fig. 5B) with both showing an increase between stages 12 and 14  
19 (G+4.3 and 7.6h) but showed no significant differences from each other at any stage.  
20 Presumptive ectodermal (AC) sandwiches strained an average of 24% over 180 seconds showed  
21 increased structural stiffness ( $p < 0.01$ ,  $n = 5$  vs. 3) from gastrula to neurula stages (Fig. 5B), but  
22 their stiffness is not significantly different from that of standard giants at either stage. By late



1 neurulation AC explants also showed plastic deformations of 25% of total strain. AC explants  
2 were substantially more plastic during gastrulation however, with about 65% of the total strain  
3 remaining as plastic deformation, suggesting a lesser ability to store elastic strain energy than  
4 during neurulation.

5 The modulus estimated from the structural stiffness is a bulk property of the tissue as a  
6 whole, and depends on the mechanical properties of individual tissues, their organization, and  
7 overall geometry, where the sectional area transverse to the mediolateral axis may differ  
8 substantially in size or composition along that axis of the explant. To understand how  
9 differential strain of relates to blastopore closure we measured spring stiffness for each explant  
10 type over time. Standard giants, D180°, V180° and AC explants all showed a trend of increasing  
11 spring stiffness between gastrula and neurula stages (Fig. 5C). Standard giants did not differ  
12 significantly between gastrula stages but increased significantly from stage to stage thereafter ( $P$   
13  $< 0.01$ ,  $n$ 's = 6 vs. 6; 6 vs. 3), doubling between G+4.8 and G+8.7. AC sandwich explants also  
14 increased significantly ( $P < 0.05$ ,  $n = 3$  vs. 3) between gastrula and neurula stages. Standard  
15 giants had significantly higher spring stiffness than AC sandwich explants by 5 to 6 fold at all  
16 stages ( $p < 0.05$  during gastrulation,  $p < 0.01$  during neurulation;  $n$ 's = 3 vs. 3 to 6), indicating  
17 that ectodermal tissues contribute little to the ability of the IMZ to resist tension along the  
18 mediolateral axis during tractor pulls. D180° explants showed greater increases compared to  
19 V180° explants and standard giants, but were not significantly different at any stage. V180°  
20 explants were similar to standard giants until after mid-neurulation when their spring stiffness  
21 was moderately (37%) but significantly lower ( $p < 0.01$ ,  $n = 2$  vs. 3). The greater spring stiffness

1 of giants vs. ventral  $180^\circ$  explants by the end of neurulation is consistent with increased overall  
2 stiffness of giants as dorsal tissue differentiation progresses laterally.

3

4

## 1 **DISCUSSION**

### 2 ***The circumblastoporal tissues (IMZ/NIMZ) produce and maintain long-term, long range,*** 3 ***consistent patterns of convergence force throughout early development.***

4 Giant sandwich explants (IMZ+NIMZ) generate and maintain a consistent pattern of  
5 convergence force throughout gastrulation, neurulation, and into the tailbud stage. Correction  
6 for drift of the two probes of different stiffness's yielded similar force profiles, suggesting that  
7 our results are robust to different sources of error. Wound healing at the edges of the explants  
8 (Davidson et al. 2002) or a response to cell lysate from surgery (Joshi et al. 2010; Kim et al.  
9 2014) could generate force, but AC explants, which are also cut and heal, do not generate  
10 significant tensile force, making this unlikely.

### 11 ***CT generates preinvolution, circumblastoporal tension throughout gastrulation.***

12 Previously, post-involution CE was thought to generate the convergence force driving  
13 blastopore closure and the post-involution extension that elongates the body axis (Keller and  
14 Danilchik 1988; Moore et al. 1995b; Keller et al. 2000a). CT was described in the ventral sector  
15 of the *Xenopus* gastrula (Keller and Danilchik 1988) but its force contribution to gastrulation was  
16 unknown. Here, several results show that CT generates circumblastoporal tension early and  
17 throughout the IMZ. First, standard giant explants produce force early (Fig. 3A), before MIB and  
18 CE have begun (G+2h, stage10.5) (Shih and Keller 1992b; Lane and Keller 1997). Second,  
19 ventral 180° and ventralized giant explants that do not express CE also generate  
20 circumblastoporal force, which is likely due to their expression of CT. Third, unencumbered  
21 ventralized giants show uniform CT throughout the MZ (Supplementary Movie 3). Thus CT  
22 generates all the IMZ convergence prior to the onset of CE at the early midgastrula stage (stage

1 10.5, G+2h). Although force from ventral and ventralized explants levels off during the plateau  
2 period of standard giants, it persists and contributes to blastopore closure throughout  
3 gastrulation by decreasing the circumference of the IMZ and directing it to the point of  
4 involution. CT may continue into neurulation and function in the late involution of the ventrally  
5 located, posterior paraxial mesoderm (Keller and Tibbetts 1989; Wilson et al. 1989b). These  
6 findings explain how ventralized *Xenopus* embryos (Scharf and Gerhart 1980) and normal  
7 embryos of some amphibians such as *Gastrotheca riobambae* (del Pino 1996) close their  
8 blastopores in the absence of CE (Keller and Shook 2004; del Pino et al. 2007) and  
9 symmetrically, as are CT movements in normal *Xenopus* embryos. These results also establish CT  
10 as a morphogenic machine independent of CE, and raise the question of how widely it occurs and  
11 how it is integrated with other movements, in amphibians as well as other species, (see below).

### 12 ***The force profile reflects the transition from CT to CE.***

13 CT is a pre-involution process, and as the cells of the early involuting presumptive head, heart,  
14 and lateroventral mesoderm involute, they undergo a transition from CT to a well-characterized  
15 directed migration across the blastocoel roof (Winklbauer and Nagel 1991; Davidson et al. 2006)  
16 (Fig. 1E). As the late involuting presumptive notochordal and somitic tissues involute, they  
17 undergo a transition from pre-involution CT to post-involution CE with the onset of the MIB that  
18 drives CE (Fig. 1F). What we have learned about CT here, and what we know about the pattern of  
19 expression of CE in explants and in the embryo (Keller and Danilchik 1988; Keller et al. 1989;  
20 Keller and Tibbetts 1989; Wilson et al. 1989a; Wilson and Keller 1991; Shih and Keller 1992a; Shih  
21 and Keller 1992b; Domingo and Keller 1995; Domingo and Keller 2000) account for some of the

1 features of the mediolateral tensile force profiles of the several types of “linearized” giant explants  
2 and lead to a better understanding of forces acting in vivo during blastopore closure.

3 We represent the capacity of CT and CE to generate and transmit tensile force in the explants  
4 as a linear array of motors and springs (light ones representing CT, darker ones CE/MIB, Fig. 6).  
5 We assume that mechanical properties within the IMZ are uniform before CE begins, based on the  
6 mediolaterally uniform convergence during CT (Fig. 6A-B), and that CT pulls directly on the sled-  
7 anchor system without shearing with respect to the sled-anchor system, and thus accounts for all  
8 the measured force up to G+2.5h (Fig. 6B', gray arrow, E, blue line). The timing of CT in explants  
9 argues that this force occurs in the pre-involution IMZ of the embryo (grey arrow, Fig. 6F), and its  
10 uniform dorsoventral expression accounts for the relatively uniform convergence around the  
11 early, pre-CE blastoporal lip (Keller and Danilchik 1988). At stage 10.5, cells begin to undergo a  
12 transition from CT to MIB (CE) as they involute, beginning in the presumptive anterior somitic  
13 mesoderm with formation of the Vegetal Alignment Zone (VAZ), and progressing medially and  
14 posteriorly (Shih and Keller 1992b). At this point the explant is heterogeneous, with a  
15 presumptive anterior region of MIB (CE) located centrally and a presumptive posterior region of  
16 CT (Fig. 6C-C') spread across the remainder of the IMZ. The central MIB region is initially linked to  
17 the sled and anchor strips only via the lateral, CT expressing regions of the explant, and remains so  
18 until MIB spreads further laterally, a process that is retarded in explants under tension. In this  
19 period of constant force increase from mid-gastrulation to the beginning of the plateau (~G+7.5h),  
20 CT and CE (MIB) in the explants act in series, with increasing expression of MIB, increasing cell  
21 intercalation, and an increasing sagittal/parasagittal area of MIB expressing cells, which all pull in  
22 parallel along the mediolateral axis (Shih and Keller 1992a; Domingo and Keller 1995). During the  
23 plateau (G+7.5 to 10.5h) the central region of CE (MIB) continues positive convergence whereas

1 the lateral regions show increased strain (negative convergence), suggesting that in explants the  
2 MIB/CE motor/spring combination generates greater tension than that of CT and exceeds the  
3 yield strength of the CT regions, accounting for the plateau (Fig. 6C', gray/black arrow, E). As the  
4 progression of the transition from CT to CE (MIB) reaches the sled/anchor apparatus at the end of  
5 the plateau (G+10.5h), the weaker CT regions are replaced by MIB/CE regions, the weaker link is  
6 removed, and the force rises again (Fig. 6C-D, C'-D', black arrow, E, green line). This interpretation  
7 is supported by the fact that dorsal explants, which have MIB directly connected to the sleds, show  
8 no plateau, and older explants, which express MIB across a greater mediolateral span of the  
9 marginal zone, have reduced force increase during the plateau period (Fig. 6E, pink and magenta  
10 lines). In the embryo, however, the stronger MIB/CE region does not act in direct series with an  
11 intervening, weaker CT region; instead MIB originates at the lateral boundary of the somitic  
12 mesoderm at its junction with the vegetal endoderm, and is anchored there (asterisks, Fig. 6G, H).  
13 Thus in the embryo, from its initiation in the VAZ, through its progressive expression posteriorly,  
14 MIB and the resulting CE act alone to shorten the breadth of post-involution mesoderm between  
15 the lateral anchorages (Fig. 1E',F,F'). The influence of the post-involution expansion of MIB  
16 expression posteriorly from its onset in the VAZ is reflected in the progressively more anisotropic  
17 blastopore closure from stage 10.5 onward, and in the dorsal region of the IMZ dominating  
18 closure, something that cannot be accounted for by the isotropic convergence of pre-involution  
19 CT.

20 Unlike the case of CT, the total force generated by CE (MIB) is under-estimated by our  
21 measurements, because CE results in extension of many of the cells expressing MIB away from the  
22 zone directly between the sleds, and these cells therefore pull on the sled/anchor system at an  
23 increasing angle (Fig. 6D). However, the same is true in the embryo, as progressively more of the

1 population of MIB expressing cells lie far anterior of the posterior progress zone of MIB at  
2 blastoporal lip (Keller 1984; Keller et al. 1989; Keller and Tibbetts 1989; Wilson et al. 1989a)(Fig.  
3 6G, H), and thus the force measured with the giant explant may reasonably approximate that  
4 generated at the blastoporal lip through the end of gastrulation.

5 The convergence of the somitic mesoderm during late neurulation involves MIB but also  
6 columnarization (thickening) (see (Wilson et al. 1989a); (Keller et al. 1989)), which forms  
7 converging “somitic buttresses” that may contribute to folding neural plate (Schroeder 1971;  
8 Keller 1976). Our force measurements of convergence forces exerted by the intact embryo during  
9 this time are unquestionably a substantial underestimate (see also Estimates of Force/cell, below),  
10 both for the reasons listed above, and because embryos have assembled their mesoderm and  
11 neural tissues into laminar aligned structures that have undergone the full extent of normal  
12 convergence movements, in contrast to the retarded convergence of our explants.

13 Finally, when we explant tissue it expends its stored elastic energy as it converges rapidly,  
14 and consequently its subsequent convergence is slower than intact embryos and the additional  
15 force is measured. Observed force is further reduced by friction, perhaps by 0.2  $\mu\text{N}$ , despite the  
16 slick agarose pad beneath the explant and by the glass beads beneath the sled. Therefore force  
17 measured here should moderately underestimate that generated at the instantaneous stall force  
18 or yield strength of the embryo, for a given extent of morphogenic progress.

### 19 ***Explant stiffness***

20 *Xenopus* embryonic tissues stiffen about 2 fold along their mediolateral axis around the  
21 end of gastrulation, regardless of the tissue type, suggesting a systemic mechanism. Such  
22 increases may have many causes, such as increased ECM deposition (Davidson et al. 2004;

1 Skoglund et al. 2006), increased cell-cell adhesion, or stiffness of cytoskeletal architecture  
2 (Zhou et al. 2009). The high plasticity after strain of the ectodermal tissue during gastrulation  
3 is consistent with its response to strain during epiboly, when its area is increased by about 2  
4 fold (Keller 1975; Chien et al. 2015). Whatever the causes, the increase in the stiffness of all  
5 the tissues at the end of gastrulation may cause decreased plasticity, as well as the resetting  
6 of pseudo-elasticity to a thinner epithelial set point (Luu et al. 2011). Previous estimates of  
7 AP compressive stiffness of dorsal isolates at stage 11.5 (about 14 Pascals, Moore et al. 1995a;  
8 Zhou et al. 2009), are very similar to ML tensile stiffness at stage 11.5 (G+3.5h) measured here  
9 (Fig. 3B), suggesting that the same mechanical elements may be resisting ML widening in  
10 both cases. In explants, the constant of spring stiffness for dorsal tissue continues to rise after  
11 early neurulation while that for ventral tissue does not (Fig. 5C), in part because the  
12 transverse sectional area of tissue between the attachment strips increases in the former but  
13 not in the later (Fig. 5A). More reliable measurements will be required to properly resolve  
14 the relative stiffness of ventrolateral or posterior tissues expressing CT compared to dorsal  
15 tissues expressing CE.

16

### 17 ***Accommodation to load and stall force***

18 Some evidence suggests that tissues modulate their force production in response to changes  
19 in load. The mechanical properties of embryonic tissues from different clutches vary (von  
20 Dassow and Davidson 2009), yet gastrulation proceeds at roughly the same rate, suggesting that  
21 force production accommodates to the tissue properties encountered. Explants of dorsal tissues  
22 embedded in gels of increasing stiffness respond by producing more force (Zhou et al. 2015).  
23 Time-lapse recordings of blastopore closure show occasional decreases in rate, including



1 temporarily stalling out and then recovering rapidly, as if transient overloads of resistance were  
2 being overcome by increased force production (personal observation). However, in our  
3 experiments increasing tension did not result in greater convergence force, and instead,  
4 temporarily stalled force increase until further morphogenesis had occurred. We suggest that  
5 this is because our explants are already at their instantaneous stall force (see below).

6 Our results suggest that explanted tissue builds tension relatively rapidly when initially  
7 encumbered, until it reaches its stall force. Further force increase is then limited by the rate at  
8 which the number of cells expressing MIB increases and by their rate of intercalation, such that  
9 more pull in parallel, rather than in series. Intercalation is in turn limited by the roughly 4%/hr  
10 rate of convergence allowed by explant shear off the attachment strips, lateral strain, and, to a  
11 much smaller extent, probe movement. We predict that allowing more rapid convergence should  
12 allow force to rise more rapidly. It is not clear how force generation by CT would be expected to  
13 change as tissue thickens, but the ventral/ventralized tractor pulls show that force increase  
14 correlates with thickening, until both cease once reaching the plateau.

15 Mesodermal tissues in normal embryos are probably rarely at their stall force, since  
16 convergence occurs more rapidly. When convergence is impeded, tension comparable to that  
17 generated in tractor pulls accumulates around the blastopore during gastrulation (Feroze et al.  
18 2015), suggesting these are also measures of force at their instantaneous stall force. A more  
19 accurate reflection of forces in the embryo might be obtained by looking at points along the  
20 force-velocity curve more closely resembling the situation in the embryo, e.g. by starting with  
21 about 0.2  $\mu\text{N}$  of tension and moving the anchor strip toward the probe at 1 or 2%/hr.

## 1 ***Estimation of forces generated per cell and tensional stress of convergence***

2 To estimate the force generated per engaged cell, we determined the average effective  
3 sagittal-sectional area (SSA) of the deep mesoderm, the cell population we expect is effective  
4 in bulk force production during the tractor pull (Table 2). We estimate that the mean  
5 mediolateral tensile force per cell rises during the first half of gastrulation and stabilizes by  
6 mid gastrulation at around 2.3 nN/cell, where it remains. These values assume negligible  
7 contribution from neural tissues and give equal weight to each cell within the effective SSA,  
8 although different proportions of cells may express CT, CE or no force generating behavior  
9 and may direct force mediolaterally more or less efficiently. We assume a constant cell size,  
10 although some cell division occurs in the somitic mesoderm during gastrulation and  
11 neurulation. The constant force per cell is consistent with the idea that increasing stage-  
12 specific maximal force generation is limited primarily by morphogenesis, as it increases the  
13 SSA. We also calculated tensional stress within the effective SSA (Table 2), which was  
14 roughly 4-fold lower than the mediolateral tensile stress estimated from extension forces  
15 exerted by dorsal tissues in a gel (Zhou et al. 2015), which is not surprising given that their  
16 measurements capture all of the force generated during late neurula stages in tissue that has  
17 undergone normal morphogenesis, compared to our which primarily capture forces generated  
18 around the blastopore, as described above.

## 19 ***CT to CE, a major morphogenic, regulatory, and evolutionary transition in the Amphibia***

20 The temporal, spatial parameters of the CT to CE transition, and its biomechanical  
21 implications, represent a major morphogenic and regulatory transition. The force traces show  
22 that CT-generated forces occur early and throughout the IMZ prior to its involution, whereas CE,  
23 and its underlying cell behavior, MIB, are expressed after involution and progressively, with

1 increasing numbers of cells acting in parallel with time (Shih and Keller 1992b). This  
2 progressive CT to CE transition at involution in *Xenopus* (Fig. 1, 6) explains the dominance of the  
3 symmetric circumblastoporal forces of CT in the pre-involution region of the early gastrula, and  
4 the dominance of the asymmetric, CE forces in the post-involution region of *Xenopus* embryos  
5 beginning from the midgastrula stage (Keller and Danilchik 1988). At the other end of the  
6 spectrum of CT-CE transition, *Gastrotheca riobambae* delays all CE until neurulation and has a  
7 completely symmetrical blastopore closure, both externally and internally (del Pino 1996).  
8 Others, such as the direct developing *Eleutherodactylus coqui* and *Epipedobates tricolor*, show  
9 intermediate CT-CE transitions (D. Shook, personal observations). In ongoing work, we are  
10 testing the idea that the deployment of CT and CE varies with the egg size and the amount and  
11 distribution of yolk and the mechanical challenges changes in these parameters present to the  
12 morphogenic machines of gastrulation.

### 13 **Conclusions**

14 Our findings illustrate that CT is one of the morphogenic machines that contribute to  
15 blastopore closure, along with CE and Vegetal Rotation (Winklbauer and Schuerfeld 1999) and  
16 that CT is capable of closing the blastopore on its own in the absence of CE patterning, as in  
17 ventralized embryos, although CT clearly can not reliably close the blastopore in the presence of  
18 patterned but non-functional CE (Djiane et al. 2000; Tada and Smith 2000; Wallingford et al.  
19 2000; Habas et al. 2001; Goto and Keller 2002; Habas et al. 2003; Ewald et al. 2004).  
20 Presumably, blocking CT while allowing CE to occur in an inappropriate context would also  
21 block blastopore closure. Normal blastopore closure is the result of the coordinated expression  
22 of this system of machines in an appropriately configured biomechanical context, and is thus a

1 problem in systems biology. Our demonstration of the role of CT in this system furthers our  
2 understanding and ability to study this system. Failure of amphibian blastopore closure is not a  
3 “non-specific phenotype”, but result from a failure of some part of this system, which as we have  
4 shown here, can be teased apart biomechanically.

5

## 1 **METHODS**

### 2 ***Embryo culture, manipulation and explant construction***

3 *X. laevis* embryos were obtained and cultured by standard methods (Kay and Peng 1991),  
4 staged according to Nieuwkoop and Faber (Nieuwkoop and Faber 1967), and cultured in 1/3X  
5 MBS (Modified Barth's Saline). For explants made before stage 10 the embryos were tipped and  
6 marked to identify the dorsal side (Sive et al. 2000). Standard "giant", Dorsal 180°, and Ventral  
7 180° sandwich explants were made at stage 10 to 10.25 as described previously (Shook et al.  
8 2004) (Fig. 2A-E; Fig. S2A) and cultured in Danilchik's for Amy (DFA) (Sater et al. 1993).  
9 Ventralized giant explants were made from ventralized embryos (see below) (Fig.2F-G) without  
10 reference to "dorsal" as these embryos are symmetrical about the blastopore (Scharf and  
11 Gerhart 1980)(supplementary Movie 1). "Unencumbered" explants were those without a load  
12 (e.g. unrestrained in the measuring apparatus, below). For explants made before bottle cells had  
13 formed, the vegetal endoderm was cut away from the circumblastoporal region just below the  
14 transition in cell size, above which most bottle cells will form (Keller 1981). Explants were  
15 staged by time elapsed from stage 10 control embryos, and when the dorsal bottle cells began to  
16 re-spread (stage 11) (Hardin and Keller 1988). Animal cap sandwiches were made from the  
17 ventral portion of the blastocoel roof of stage 10 embryos (not shown).

### 18 ***Ventralization of embryos.***

19 De-jellied embryos were placed in dishes made of 15 mm transverse sections of 60 mm  
20 diameter PVC pipe with Saran wrap stretched across the bottom, irradiated 6 or 7 minutes from  
21 below at about 35 minutes post fertilization on a UV trans-illuminator (analytical setting  
22 (Fotodyne Inc. Model 3-3500) and left undisturbed for at least an hour to avoid accidentally

1 rotating and thus dorsalizing them (Black and Gerhart 1986). Embryos were also ventralized by  
2 injecting  $\beta$ -catenin morpholino vegetally into the first two blastomeres (Heasman et al. 2000).  
3 Embryos forming bottle cells asymmetrically or earlier than the majority of ventralized embryos  
4 were discarded as being insufficiently ventralized. Control, ventralized embryos were cultured  
5 to control stage 35-38 and scored for their DAI (Kao and Elinson 1988) or to control stage 28  
6 and stained for dorsal markers (Supplementary Materials) to evaluate the effectiveness of  
7 ventralization.

### 8 ***Image analysis***

9 Explant morphometrics (described in Supplementary Materials) were done with NIH Image  
10 1.6 software (Wayne Rasband, National Institutes of Health; available at  
11 <http://rsb.info.nih.gov/nih-image/>), Object Image (Norbert Vischer, University of Amsterdam;  
12 available at <http://simon.bio.uva.nl/Object-Image/object-image.html>) or Image J  
13 (<http://rsb.info.nih.gov/ij/>).

### 14 ***“Tractor Pull” biomechanical measurement apparatus***

15 Explants were attached to two polyester shim stock strips (Small Parts, Inc. cat. # SHSP-010),  
16 ~~both~~ 25  $\mu$ m thick x 0.8 to 1.5 mm wide, and one, the “anchor, 4 to 8 mm long, and the other,  
17 “sled”, 3 to 5 mm long (Fig. 2H). A cleat of shim stock (Small Parts, Inc. cat# SHSP-200), 500  $\mu$ m  
18 thick x  $\sim$  500  $\mu$ m on a side, was glued to the sled with clear fingernail polish (Sally Hansen “Hard  
19 as Nails”) (Fig. 2H). The anchor and sled were coated with fibronectin (Roche cat # 11 080 938  
20 00, at 20  $\mu$ g/ml, in 1/3X MBS for 30-60 minutes at 37°C) and inserted 0.5 to 1.0 mm (15-30% of  
21 the mediolateral extent of the explant) between the inner faces of the lateral ends of the  
22 sandwich to allow attachment (30-60 minutes) (Fig. 2H). The explant was placed over a window

1 of cover glass (#1.5) in a 100 mm culture dish, and the anchor was attached to the window with  
2 high vacuum silicone grease (Dow Corning, Inc.) (Fig. 2I). Using the stage controls, the cleat on  
3 the sled was moved adjacent to a calibrated optical fiber probe (40-50 mm by 120  $\mu\text{m}$ , Mouser,  
4 Inc. stock 571-5020821) mounted on the end of an aluminum rod fixed to an XYZ  
5 micromanipulator attached to an IX70 Olympus inverted microscope. The spring constants of  
6 these cantilever probes were calibrated by measuring deflection upon hanging short lengths of  
7 wire of known length/mass on the probe. Tension on the explant was measured by probe  
8 deflection recorded in high-resolution movies from below the window (40x objective, Olympus  
9 IZ70) and its behavior recorded simultaneously by time-lapse imaging from above (Olympus  
10 stereoscope). Glass beads (106  $\mu\text{m}$  diameter, Sigma Cat#G-4649) between the sled and the  
11 window and a 200 to 300  $\mu\text{m}$  thick, 1% agarose bed between the explant and the window  
12 lowered friction (Fig. 2I). Probe drift and sled-substrate friction were characterized  
13 (Supplementary Materials).

#### 14 ***Force Measurement Test***

15 Mediolateral tensile force was measured as the explants pulled the cleat of the sled against  
16 the probe. In most cases, the probe was placed adjacent to the cleat such that both probe and  
17 explant were unloaded at the start of the experiment. In others, the explant was “pre-strained”  
18 about 25%, by moving the cleat against the probe, and then away from it, or the explant was left  
19 under a pre-tension. Measurements were made to tailbud stages (~20hr) when the probe  
20 deflection generally ceased to increase significantly. The cleat was then backed off from the  
21 probe to determine the resting position of the probe. Tension could be adjusted during a force

1 measurement by moving the anchor away from or toward the sled, to decrease or increase strain  
2 (as in Fig. 4 A-D).

3 Probe position was recorded every six minutes, and probe displacement was translated into  
4 force by the following:

$$5 \quad F_{(t)} = D_{(t)} \cdot M \cdot K_P \quad (1)$$

6 where D is displacement in pixels, M is the magnification scale in  $\mu\text{m}/\text{pixel}$  and  $K_P$  is the spring  
7 constant of the probe in  $\mu\text{N}/\mu\text{m}$ . Drift was determined from the unstressed position of the probe  
8 before and after the assay, the difference interpolated linearly over the duration of the test and  
9 subtracted from the probe movement. Means of force traces were plotted, with the mean of  
10 hourly intervals and the standard error of the hourly mean shown as error bars.

### 11 ***Structural Tensile Stiffness Measurement: Uniaxial Tensile Stress Relaxation Test***

12 For estimates of stiffness (Wiebe and Brodland 2005), anchor-explant-sled preparations  
13 were mounted as for force tests, and strain was applied along their mediolateral  
14 (circumblastoporal) axis by moving the stage  $300 \mu\text{m}$  (10-12% strain) over one to a few  
15 seconds. Relaxation was allowed for 5 minutes, the stage was withdrawn  $400 \mu\text{m}$  from the  
16 probe, and any further shape change were recorded (recovery). Probe positions were recorded  
17 every 0.5 to 30 seconds, and the anchor-explant-sled assembly was imaged every 1-10 seconds.  
18 The stage position was determined by a calibrated Metamorph image processor. The strain  
19 imposed on the explant was based on the relative position of two points in the explant that lay  
20 above the medial edges of the attachment strips. The explants were tested periodically during  
21 gastrulation and neurulation with unstressed periods ( $> 1$  hour) between tests.



1 We modeled the time (t) dependent structural stiffness (SS(t), Pascals) using the following  
2 viscoelastic spring and dashpot model (Findley et al. 1989; Moore et al. 1995b):

$$3 \quad SS(t) = S_{inf} + S_{sp} \cdot e^{(-t/\tau)} \quad (2)$$

4 where the parameters are  $S_{inf}$  or stiffness at infinite time (residual stiffness),  $S_{sp}$  or  
5 instantaneous stiffness, and  $\tau$ , the relaxation time constant, representing the half life of stress-  
6 relaxation.  $\varepsilon$ , the coefficient of viscosity, is related to  $\tau$  by:

$$7 \quad \varepsilon = \tau \cdot S_{inf}$$

8 The model assumes that instantaneous stiffness is reduced by viscous flow or remodeling of  
9 intra- or inter-cellular structures, until a residual stiffness, representing stable elastic elements  
10 of intra- or inter-cellular structure, is reached. SS(t) was calculated using the cross-sectional  
11 area of the tissue, force measurement, and observed strain over time, and two analytical  
12 techniques were used to generate the parameters  $S_{inf}$ ,  $S_{sp}$  and  $\tau$  (supplementary materials).  
13 Alternatively, an explant “spring stiffness” constant ( $K_E$ ) was also calculated (Supplementary  
14 Materials).

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## 17 **COMPETING INTERESTS**

18 None of the authors have competing interests.

19

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14

## 1 TABLES

	Average Rate of Convergence ( $\mu\text{m}/\text{min}$ ) (n)	Average Rate of Convergence (%/hr) (n) (SEM)	Strain of Dorsal tissue (%/hr) (n) (SEM)	Strain of LV tissue (%/hr) (n) (SEM)	Shear w.r.t. attachment strips (%/hr)
Intact embryo, LI, 2 to 7 hours	10 (2 to 7)	17.5 (2 to 7) (1.8)			
Giant explant, unencumbered, LI, 0 to 7 hours	5 (3 to 10)	10 (3 to 10) (1.5)			
Standard pull, probe 3 (2 to 7.5 h)		4.1 (4 to 5) (0.7)	-7.2 (6) (1.5)	1.1 (6) (1.5)	3.7
Standard pull, probe 3 (7.5 to 10.5 h)		2.5 (5) (0.8)	-7.0 (6) (2.1)	1.7 (6) (1.9)	2.5
Standard pull, probe 3 (10.5 to 15.5)		3.7 (5) (0.7)	-5.5 (6) (1.6)	-0.5 (6) (1.3)	3.2
Standard pull, probe 4 (2.5 to 7.5 h)		4.5 (2 to 4) (0.7)			3.1
Standard pull, probe 4 (7.5 to 10.5 h)		1.7 (4) (0.8)			1.7
Standard pull, probe 4 (10.5 to 16.5)		3.0 (4) (0.6)			2.1

2

3 Table 1. Convergence and strain. Negative strains indicate convergence

4

5

6

7



Time from onset of gastrulation (hours)	Force ( $\mu\text{N}$ (n, +/- SEM))	Effective SSA ( $\text{mm}^2$ (n, +/- SEM))	Estimated Force/cell (nN)	Force per effective SSA (Pascals)
1	0.25 (3, 0.08)	0.12 (1, n/a)	1.3	2.1
2.1	0.31 (3, 0.09)	0.11 (4, 0.014)	1.7	2.8
2.9	0.49 (4, 0.16)	0.13 (4, 0.018)	2.3	3.8
4.3	0.94 (4, 0.04)	0.27 (3, 0.024)	2.2	3.5
6.5	1.6 (5, 0.11)	0.41 (3, 0.020)	2.5	3.9
11.8	2.6 (6, 0.19)	0.68 (3, 0.051)	2.4	3.8

1 Table 2. Estimates of force per cell and tensional stress within effective sagittal section area  
2 (SSA) (deep mesoderm only). Based on a mean cell sectional area of  $625 \text{ nm}^2$ .

3

4

5

1 **FIGURE LEGENDS**

2

3 **Figure 1. Current view of morphogenic machines in the embryo and explants.**

4 Diagrams show the onset and progress of expression of convergent thickening (CT,  
5 white arrows) and convergent extension (CE, green/blue arrows) in embryos (A-F) and in  
6 explants (C-H). Expression of CT begins throughout the pre-involution region of the  
7 involuting marginal zone (IMZ) at the onset of gastrulation (A), which results in its  
8 decreased circumference, thereby pushing the IMZ toward involution (black arrows, A); CT  
9 continues throughout gastrulation and is thought to drive blastopore closure (B). In  
10 explants, CT of the IMZ begins immediately on release from constraints of explantation (C-  
11 D). At the midgastrula stage (stage 10.5), mediolateral intercalation behavior (MIB) begins  
12 in the post-involution anterior mesoderm (E, surface view; E' enlarged cutaway of pre-  
13 involution IMZ). MIB originates laterally, in the region of the epithelial bottle cells (BCs,  
14 asterisks) and progresses medially to form an arc of intercalating cells, called the Vegetal  
15 Alignment Zone (VAZ, E'); MIB is expressed in the same pattern in explants (G). From this  
16 point on, MIB expression progresses posteriorly, generating CE, which constricts the  
17 blastopore and narrows the post-involution notochordal and somitic mesoderm (F) and the  
18 gastrocoel roof (GR, F') along the length of the axis in embryos. In explants MIB/CE pulls  
19 the unanchored lateral margin of the somitic mesoderm medially while extending and  
20 narrowing the somitic and notochordal mesoderm (G, H). CT feeds cells into the A-P  
21 progressive expression of MIB (H). The presumptive pattern of expression of MIB is shown  
22 mapped on to the IMZ of the embryo (I) and its progression mapped on to the explant (J-K).

1 In contrast, ventralized embryos lacking presumptive somitic, notochordal and neural  
2 tissue, and thus CE/MIB, express only CT, which closes the blastopore symmetrically (L-  
3 vegetal view; M-sectional view), and explants from such embryos show only CT (N-O).  
4 Presumptive tissues are indicated (orange- head, heart, lateroventral mesoderm; magenta-  
5 notochord; red- somitic mesoderm ; dark blue-posterior neural, hindbrain, spinal cord;  
6 light blue-forebrain; grey-epidermis; yellow- vegetal endoderm). Shading from dark to  
7 light, where used, indicates progressively more anterior (A) to posterior (P) position,  
8 respectively.

9

## 10 **Figure. 2. Explant construction.**

11 Giant sandwich explants are made by cutting early gastrula stage embryos mid-ventrally, then  
12 vegetally just below the lower edge of the IMZ, such that the bottle cells are included, then  
13 animally roughly 30° above the equator (dashed lines, A; see also Fig. S2). Two such explants  
14 are then recombined, inner face to inner face, to make a Giant Sandwich explant (B, H). Giant  
15 explants contain presumptive notochordal mesoderm (magenta), somitic mesoderm (red),  
16 posterior neural tissue (hindbrain-spinal cord), as well as presumptive brain (light blue),  
17 epidermis (grey), and migratory leading edge mesoderm (orange). Dorsal 180° explants are  
18 made the same way as standard giant explants, with the right and left quarters are cut off (C).  
19 Ventral 180° sandwich explants are similarly, except the IMZ is cut dorsally rather than ventrally  
20 (dashed lines, D). Ventralized giant explants are made from UV irradiated embryos, and thus  
21 they form no or very limited dorsal tissues (F, G). For mechanical measurements with the  
22 tractor-pull apparatus, the two halves of the sandwich are apposed with their inner, deep

1 surfaces next to one another, with fibronectin coated plastic strips, one bearing a raised cleat,  
2 inserted at each end (H). The explant is allowed to heal and attach to the strips, and then  
3 positioned above a cover slip window in a culture chamber (I). The stationary “anchor” strip is  
4 attached to the window with silicone high vacuum grease (magenta), and the explant is placed  
5 over an agarose pad (green). The moveable “sled” strip rests on glass beads resting on a cover  
6 slip filler layer (blue). An XYZ positioner is used to move a calibrated optical fiber probe,  
7 mounted on an aluminum bar, near the cleat, and the imaging chamber, which rests on a  
8 motorized stage, is then moved such that the cleat is as close to the probe tip as possible without  
9 deflecting the probe.

10

### 11 **Figure 3. Force vs. time traces for tractor pulls.**

12 Mean force production over time is indicated (A-D; solid lines). Time is measured from the onset  
13 of gastrulation at stage 10, and the correspondence with developmental stage is shown (E).  
14 Hourly means are shown as symbols, with standard errors of the hourly means indicated. The  
15 onset of individual traces represents the time at which the sled was initially pulled against the  
16 probe, with the exception of the Animal Cap explants. All pulls were against probe #3, except  
17 “Standard Giants, probe #4” (green, A and D) and the “Ventralized Giants” and “Ventral 180s”  
18 (orange and yellow respectively, D). The force trace for Standard Giant explants vs. probe #3  
19 (blue) is included for all graphs except where only probe #4 was used (D). Gaps in force traces  
20 represent points at which different numbers of explants are included in the mean force trace.  
21 Controls (A) included Standard Giant sandwich explants (vs. probe #3, dark blue, n = 2 up to 2  
22 hours, n = 4 through 15 hours; vs. probe #4, green, n = 6 through 12 hours, n = 5 through 18

1 hours), Animal Cap sandwich explants (purple, n = 4 from 5 to 17 hours, 2 to 3 otherwise). Early  
2 and Late tractor pulls (B) include Early Giant explants (from stage 10; light blue, n = 3) and Late  
3 Giant explants (from stage 12.5 ; purple, n = 5). Dorsal tractor pulls (C) include Dorsal 180°  
4 explants (pink, n = 3). Ventral tractor pulls (D) include UV ventralized explants (orange, n = 3 at  
5 4 hours, 4 from 5 to 7 hours, 5 from 8 to 9 hours and 4 from 10 to 20 hours), ventral 180°  
6 explants (yellow, n = 3 at 3 hours, 4 from 4 to 20 hours) and are compared to Standard Giant  
7 explants vs. probe #4.

8

9 **Figure 4. Schema of movements and measures involved in stress-relaxation test.**

10 Start position, with cleat adjacent to probe. Stage is moved 300 microns (A, red arrow) against  
11 probe, to impose stress, with resulting probe deflection (A, black arrow). The explant shows an  
12 instantaneous strain (B, green arrow), then exhibits viscoelastic decay, or “relaxation” over time  
13 (C, green arrows), reducing the deflection of the probe (B, black arrow), until tension equals  
14 residual stiffness (in practice, E<sub>180</sub>). Finally, the stage is moved back 400 microns (C, red  
15 arrow), which de-stresses the explant and allows the probe to return to its starting position (C,  
16 black arrow). The explant shows elastic recovery (D, green arrows). (E) A model of the explant  
17 as a viscoelastic material, with springs representing instantaneous (E<sub>SP</sub>) and residual (E<sub>180</sub>)  
18 stiffness, and a dashpot representing the viscosity, with relaxation time (half-time of decay), tau  
19 ( $\tau$ ). In an example of a stress-relaxation test (F), the stage to which the fixed strip is anchored is  
20 moved (F, light blue line) to impose a stress, by pulling the cleat against the probe (as in A, B).  
21 This imposes a strain (F, yellow line) on the explant, and deflects the probe (F, dark blue line).

1 The movement of the sled (magenta) initially parallels that of the probe, until the stage is moved  
2 away from the probe (as in C, D) at about 300 seconds, at which point the explant shows elastic  
3 recovery of the imposed strain, pulling the sled with it.

4 In order to estimate  $E_{sp}$  and  $\tau$  we used non-linear regression curve fitting of the stress relaxation  
5 phase (C).

6

### 7 **Figure 5. Stress-relaxation tests.**

8 The sagittal sectional area (SSA) for different kinds of unencumbered explants was determined  
9 at points throughout gastrulation and neurulation from confocal z-series of RDA labeled explants  
10 (A, inset; scale bar = 1 mm in intact giant, 0.5 mm for sagittal cross section (at yellow line in  
11 giant)). Standard giant (magenta squares) and Dorsal 180° sandwich explants (blue diamonds)  
12 show similar progressions of SSA; a regression on both (violet dashed regression line,  $0.085$   
13  $\text{mm}^2/\text{hour} * (\text{hours after G0}) + 0.24 \text{ mm}^2$ ) was used to estimate stage specific SSA for both kinds  
14 of explants in stress-relaxation tests. The increase in SSA for V180° explants tended to plateau  
15 by about 8 to 10 hours, so a first order polynomial regression (green dashed line,  $-0.0042$   
16  $\text{mm}^2/\text{hour}^2 * (\text{hours after G0})^2 + 0.085 \text{ mm}^2/\text{hour} * (\text{hours after G0}) + 0.25 \text{ mm}^2$ , or  $0.68 \text{ mm}^2$  at  
17 10 hours or later) was used to estimate the stage specific SSA for V180° explants in stress-  
18 relaxation tests. The SSA of animal cap explant sandwiches was a consistent  $0.16 \text{ mm}^2$ .  
19 Estimated SSA, measured force on the probe at 180 seconds, and measured proportional strain  
20 on the explant at 180 seconds were used to determine the stiffness ( $E_{180}$ ) at several times during  
21 gastrulation and neurulation (B). Standard giant sandwich explants (dark green line), as well as

1 Dorsal 180° (light blue) and Ventral 180° (orange) sandwich explants and animal cap sandwich  
2 explants (Yellow) were tested. In order to compare the force-bearing capacity of different  
3 tissues, a bulk spring stiffness (Force at 180 s / Strain at 180 s) was plotted (C). Error bars =  
4 standard error of the mean, n's = 3 to 6, except where no error bar is shown, where n =1.

5

6 **Figure 6. Model of how the convergence forces measured in the tractor pull are related to**  
7 **modules of cell behavior in explants and embryos.**

8 Early convergence forces are generated largely by the CT machine (CT symbols, B-D). The CT  
9 symbol implies ML tensile force, represented by the inward pointing arrows, and radial  
10 compressive force, represented by the dot and indicating force directed in and out along the  
11 radial axis of the embryo (see 3D representation). As CE begins, MIB (fusiform, black cells)  
12 progressively replaces the CT machine from presumptive anterior to posterior (CE symbol:  
13 green convergence, blue extension arrows, C, D) while CT continues in more posterior tissues  
14 (CT symbol, C, D). At or shortly after the onset of mesodermal MIB, MIB and CE begins in the  
15 posterior neural tissue (blue tissue, CE symbols, C, D).

16 Thus the IMZ tissues express a changing combination of CT and CE as development progresses.  
17 We represent CT and CE as modules, expressing distinctive spring constants (grey or black coils)  
18 and motor strengths (red and grey or black symbols), with the lighter spring and motor  
19 indicating CT and the darker CE (B'-C'). Initially, up to about G+2hr, the entire IMZ is comprised  
20 of CT-modules (B'), which represents the situation and generates the forces seen in the first two  
21 hours of early pulls (follow grey arrow from B' to E, blue line). These forces likely approximate  
22 force generated in the preinvolution (uninvoluted) IMZ of the whole embryo (follow the gray

1 arrow to F, CT symbols). As MIB begins, a CE module lies centrally, flanked by CT-modules in  
2 series (C') with lateral edges attached to the strips (C), which represents the situation and  
3 generates the forces measured from G+2 to 10.5h, including the period during the plateau in  
4 standard pulls (follow black/gray dashed arrows to E, green line), but with an increasing  
5 contribution from CE vs. CT modules after G+2h. As more cells express MIB, the number pulling  
6 in parallel increases, increasing the spring constant and motor strength of the CE module.

7 Because the VAZ forms as an arc it does not initially pull directly on the attachment strips (C;  
8 green arrows at edge) but on the intervening CT modules. The nascent CE module is initially  
9 small and weaker than the adjacent CT modules, but becomes larger over time, resulting in both  
10 increasing spring constant and motor strength. This eventually overpowers the shrinking CT  
11 modules, such that their convergence is reduced (C', more open coils), which dissipates some of  
12 the tension generated by the CE module, and thereby contributing to the plateau. In contrast, in  
13 the embryo, the CE (MIB) module is, from the beginning, always anchored to the endoderm at  
14 both ends, with only an indirect connection to CT modules in the lateral and ventral portion of  
15 the MZ (not shown in F; see H, G). Thus CT acts as a continuous but diminishing ring of  
16 converging tissue outside the blastopore, while CE-expressing tissue inside the blastopore,  
17 primarily in series with the relatively inert endodermal tissue, acts in parallel with this ring.

18 The transient decline rather than plateau in the rate of force increase during late pulls (E,  
19 magenta line) can be explained by a larger domain comprised of CE modules and smaller  
20 domains comprised of CT modules, compared to standard control pulls at the onset of the  
21 plateau, such that not all force generated by the CE domain was absorbed by reduced  
22 convergence in the CT domain. Once MIB progresses laterally to points of attachment with the



1 strips (D, D'), the decline ends; this represents the situation during the second phase of force  
2 increase (follow black arrow to E, magenta line and to H, G). At this point, all the force generated  
3 by CE and MIB in posterior tissues are transmitted to the attachment strips, while, with the  
4 progression of MIB posteriorly, force from more anterior tissues is transmitted progressively  
5 more indirectly, at an angle (green arrows; D). Dorsal pulls (E, pink line) show no plateau,  
6 because they contain little or no tissue comprised of CT modules (D') by the onset of the plateau  
7 (follow solid black arrow to E, pink line).

8

## 1 **SUPPLEMENTARY MATERIALS**

### 2 ***Supplementary methods, results and discussion:***

#### 3 ***Drift test:***

4 Probes were placed in distilled water and imaged every 3 minutes. Force equivalents  
5 for the observed drift were calculated, for purposes of comparing different probes and the  
6 effect of drift on force measurements. Probe #3 showed minimal drift, within +/- 0.5 $\mu$ N  
7 over 6 hours (Fig. S5a). In most cases the most rapid drift occurred within the first 60  
8 minutes. Probe #4 shows much more dramatic drift (Fig. S5b), especially when recorded  
9 from shortly after the dry probe was immersed (Fig. S5C). However, in nearly all cases,  
10 within 30 minutes of immersion probe #4 showed drift that was near linear over the range  
11 of forces we consider. When probe #4 was allowed to soak overnight, it had reduced probe  
12 drift (turquoise line that reaches 0.5 $\mu$ N, Fig. S5B). Drift for probe #4 may have to do with  
13 hydration and/or temperature equilibration of some element of the probe-holder  
14 assembly. By soaking the probes for 60 minutes prior to use and correcting for any  
15 remaining drift (as measured at the end of the tractor pull, upon the release of the explant  
16 from the probe) by interpolating over the period of force measurement, we minimized the  
17 error contributed by drift.

18

#### 19 ***Friction test:***

20 To evaluate the friction between the sled and the under-laying substrate, we moved the  
21 stage holding the tractor pull chamber such that the cleat on an unattached sled was

1 pushed against a stationary probe, recorded the probe position every 100-200 seconds and  
2 calculated the force exerted on the probe at each time for 2-6 hours. We compared the  
3 friction of the sled with the substrate, 1) on bare glass, 2) with an agarose pad of roughly  
4 50-100% larger area under the sled and 3) with a sparse layer of 100 $\mu$ m glass beads under  
5 the sled. Tests were done in DFA, which contains 0.1% BSA. A representative example of  
6 test runs on different substrates is shown (Fig. S6). Treatment of the glass beforehand (e.g.  
7 by acid-ethanol wash and/or coating with BSA) appeared to have minimal effect. For glass,  
8 agarose and beads (n's = 4, 5 and 7), the average median forces were 0.41, 0.48 and 0.25  $\mu$ N  
9 respectively. The average minimum forces were 0.27, 0.36 and 0.00  $\mu$ N. The average  
10 standard deviation was 0.10, 0.07 and 0.14  $\mu$ N. The force on the probe was below 0.32,  
11 0.40, and 0.09  $\mu$ N 10% of the time. And the fraction of the time forces were below 0.25  $\mu$ N  
12 was 12, 23 and 64%. Although the 1.5 to 2-fold differences in the median friction force was  
13 only a moderate improvement, the difference in the time the friction force was at or near 0  
14  $\mu$ N on beads was dramatic. Rather than experiencing a fairly steady approximately 0.4 to  
15 0.5  $\mu$ N of friction in the case of glass or agarose, sleds over beads experienced lower  
16 friction much more frequently. For this reason, we used a sparse layer of beads in all force  
17 measurement and stress-relaxation tests. We assume that force measurements are  
18 approximately 0.2  $\mu$ N below the force explants could produce at a given time.

19

## 20 **Immunohistochemistry & Effectiveness of Ventralization.**

21 For immunohistochemistry, embryos and explants were fixed at stage 26-28 in MEMFA  
22 (Kay and Peng 1991) overnight at 4°C and transferred to methanol for storage at -20°C.

1 Fluorescent staining for notochord with Tor-70 (Kushner 1984) and for somitic mesoderm  
2 with 12/101 (Kintner and Brockes 1984) was done as previously described (Bolce et al.  
3 1992). Notochord and somites in giants from tractor pulls were generally elongated  
4 orthogonal to the mediolateral axis, although to a lesser extent than in an unencumbered  
5 giant. In standard giant or D180° sandwich explants from tractor pulls, the posterior ends  
6 of the two notochords frequently did not fuse, and in some cases most of the notochords  
7 were separate, but co-linear (Fig. S7 A-H). The two files of somites do fuse (Fig. S7 A-H). In  
8 tractor pull explants where an additional strain was imposed, both posterior notochord  
9 and somites often did not fuse, and sometimes elongate non-orthogonally to the axis of pull  
10 (Fig. S7 I-L); in a few cases, the two sets of notochords and somites remained largely  
11 independent, which tended to be coupled with generally aberrant morphogenesis.

12 UV ventralization for 5 to 7 minutes gave an average DAI of 1.8 (n = 318). Embryos of  
13 DAI score 0 to 3 generally manifested little or no evidence of CE prior to the end of  
14 neurulation, indicating that we had effectively eliminated CE in our embryos during the  
15 period of force measurement. Ventralized sandwich explants in some cases contain small  
16 amounts of somitic tissue, but rarely show any notochordal tissue (Fig. S7 M-P). Among  
17 unselected embryos, some notochord appeared infrequently (4%, n = 56) while some  
18 somite appeared more frequently (40%, n = 54). When ventralized giant sandwich explants  
19 did have some dorsal tissue, it generally didn't manifest (show any sign of CE) until after  
20 the plateau had been reached, and generally detracted rather than added to the force.

21

22 **Morphometrics.**

1 The sagittal sectional area of unconstrained giants sandwiches was determined from  
2 RDA-labeled explants (50 ng/embryo), cultured to control stages 10.5 to 19, fixed in  
3 MEMFA and imaged in the laser scanning confocal. Minimal changes in explant dimensions  
4 were seen after fixation (< 5%, n = 6). The Z-step distance of the confocal was calibrated  
5 using a coverslip fragment of known thickness immersed in a solution of RDA. En face  
6 confocal images for the entire explant were obtained, re-sliced to show the mid-sagittal  
7 sectional plane, and the area of these plotted against stage. A regression was plotted on the  
8 sagittal sectional area (SSA) of several explants, and this was used to estimate the sagittal  
9 sectional area of the explants used in the stress-relaxation test. To estimate the effective  
10 SSA, explants were sliced parasagittally and parasagittal confocal images were collected,  
11 from which the area of the deep mesoderm was estimated, constrained by cell size and  
12 distance from the bottle cells.

13 Proportional convergence or strain along the mediolateral axis for defined regions of  
14 explants was calculated by measuring the distance (L) between specific cells or  
15 distinctively pigmented regions within the explant initially ( $L_{(i)}$ ) and at time t ( $L_{(t)}$ ), to give  
16 time specific strain:

$$17 \quad S_{(t)} = (L_{(t)} - L_{(i)}) / L_{(i)}$$

18 Rates were then  $S_{(t)} / \Delta t$ . Convergence is expressed as strain \* -1.

19 Convergence in giant sandwiches were with respect to the mediolateral extent of the  
20 limit of involution at the onset of time-lapse recording ( $L_{(i)}$ ) and thereafter. Rates of

1 convergence during giant construction were instead with respect to the initial  
2 circumference in the intact embryo.

3 Shear rate of explant with respect to attachment strips for a given time period was  
4 calculated as:

$$5 \text{ Shear rate} = (\Delta W - \Delta D) / W(i) / \Delta t * 100\%$$

6 where  $W(i)$  is the initial width of the widest part of the mesendoderm at the onset of the  
7 assay,  $\Delta W$  is the change in width during the time period,  $\Delta D$  is the displacement of the sled  
8 strip toward the anchor strip during the time period and  $\Delta t$  is the elapsed time.

9

#### 10 **Estimation of parameters for Spring and Dashpot Model:**

11 Two alternative methods were used to determine parameters for the spring and  
12 dashpot model

$$13 \text{ SS}(t) = \text{SS}_{\text{INF}} + \text{SS}_{\text{SP}} * e^{(-t/\tau)} \quad (2, \text{ from main text})$$

14 based on the observed time ( $t$ , in seconds) dependent structural stiffness ( $SS$ ), calculated  
15 as:

$$16 \text{ SS}(t) = F(t) / (\text{SSA} \cdot S(t)) \quad (3)$$

17 where time specific force ( $F(t)$ ) was as calculated in eq. 1 (main text),  $\text{SSA}$  was the  
18 estimated stage specific sagittal sectional area (see Morphometrics, above), and  $S(t)$  the

1 time specific strain (see Morphometrics, above) was measured from the mediolateral  
2 extent of the mesodermal component of the explant spanning the gap between the strips to  
3 which they were attached.

4 In the first method (“log transform”),  $SS_{INF}$  is assumed to be  $0.97 * SS(180)$  because  
5 stress decay has stabilized by 180 seconds, and active convergence is likely to overwhelm  
6 further relaxation. Given eq. 2, a linear regression on

$$7 \quad y(t) = \ln(SS(t) - SS_{INF})$$

8 then yields the line

$$9 \quad y(t) = (-1/\tau) * t + \ln(SS_{SP})$$

10 and  $SS_{INF} / SS(180) = \sim 0.97$

11

12 In the second method, a curve-fitting program (NLREG, available at  
13 <http://www.nlreg.com>, Sherrod 1995) was used to generate the parameters  $SS_{INF}$ ,  $SS_{SP}$   
14 and  $\tau$ . In both cases, viscosity ( $\eta$ ) is determined as:

$$15 \quad \eta = SS_{SP} * \tau$$

16 Viscosity and instantaneous stiffness derived using the log transform method both  
17 show a significant increase between late gastrulation and mid-neurulation (Fig. S9 A,B,  
18 green), whereas using NLREG, they show no significant difference (Fig. S9 A,B, orange).

1 These viscosity estimates are roughly an order of magnitude lower than those measured by  
2 David et al. (David et al. 2014) on deep tissue alone. The major difference in the current  
3 study is that explants are deep tissue enclosed in superficial epithelium, which should  
4 lower the tissue surface tension.

5 The log transform method tends to match the later part of the stress-relaxation curve,  
6 giving a lower instantaneous stiffness and higher viscosity, whereas the reverse is true of  
7 the NLREG method (Fig. S10). The two methods highlight the fact that viscosity appears to  
8 be much lower during the first 10-15 seconds of stress relaxations than thereafter. This  
9 may reflect a change in the cellular elements that are viscously flowing over time, with very  
10 low viscosity elements flowing first, followed by successively higher viscosity elements.  
11 Because tissues in the embryo are already tension bearing, the viscosity derived from log  
12 regression more accurately reflects the relevant mechanical properties over developmental  
13 time scales.

14 An explant “spring stiffness” constant ( $K_E$ ) was also calculated:

15 
$$K_E = F(180) / (L(180) - L(0))$$

16 with  $F(t)$  and  $L(t)$  as described above.

17

### 18 **Caveats to stiffness measures of explants.**

19 Our stiffness measurements represent an approximation of composite structural  
20 stiffness, rather than the true stiffness of a uniform material. Giant sandwich explants are



1 not homogeneous in any dimension, and after stage 10.5 (G+2h), the shape of the sagittal  
2 sectional area (SSA) begins to vary along the mediolateral extent of giant sandwich  
3 explants (Fig. S3; Movie 2). As a consequence, stiffness measures are biased toward the  
4 least stiff region along the mediolateral axis. In D180 and V180 explants at later stages, the  
5 mesodermal tissue rounded up to some extent, with a relatively circular cross section  
6 across the AP axis, with the attachment strips inserted part way into the circle. Stretch  
7 resulted in both over-all strain of the mesodermal tissue, but also flattening of the circular  
8 cross section. Probably as a consequence, later stiffness measurements from D180°  
9 explants in particular are more variable (Fig. 5C). We found that straining these rounded  
10 tissues 600 rather than 300 microns gave more consistent results for stiffness  
11 measurements, and so those results are reported.

## 12 **Supplementary Discussion:**

13 The nature of convergence by MIB may offer an alternative or complementary explanation  
14 as to why an increase in compressive load results in increased force whereas an increase in  
15 tensile load does not. The cell intercalation process is self-reinforcing in that it increases  
16 the number of units in the parallel, pulling array, but depends on the generation of  
17 additional tension in order for cells to pull themselves in between one-another. Thus some  
18 threshold of unresolved tensile load may retard further convergence via intercalation and  
19 thus limit additional force production, whereas an increased compressive load driving  
20 extension, the output of convergence, may activate compression-sensitive accommodation  
21 mechanisms while not immediately limiting the progress of intercalation. The differences  
22 in responses to compressive and tensile loads should be evaluated further.

1 **SUPPLEMENTARY FIGURES**

2

3 **Figure S1. Comparison of convergence along the limit of involution (LI).**

4 (A) The rates of convergence along the circumference or mediolateral extent of the LI in  
5 whole embryos, unencumbered giants and giants in tractor pulls under probe #3 or 4. (B)  
6 The extent of convergence at the limit of involution by G+7.5h of giant sandwich explants is  
7 retarded in the tractor pull (right), compared to an unencumbered giant (left). Red lines  
8 indicate the position of the strips.

9

10 **Figure S2. Convergence during explant construction.**

11 Embryos rapidly contract along their circumferential axis upon being cut. An example is  
12 shown (A), tracing the length of the equatorial (yellow) and sub-equatorial (cyan)  
13 circumference of the embryo, corresponding roughly to the limit of involution and the  
14 middle of the marginal zone. Stills are shown immediately before (0') and one minute after  
15 the embryo is initially cut (1', arrow head), after the removal of further vegetal endoderm  
16 at two minutes (2') and after flattening (3'), in preparation to construct a giant sandwich.  
17 Scale bar = 1mm. Comparing the circumferential lengths to that immediately prior to  
18 cutting (B) shows a rapid contraction along the mediolateral (former circumferential) axis.  
19 The explant in A was combined with another such explant to make a giant sandwich and  
20 gently pressed together under a coverglass to heal.

21

1 **Figure S3. Comparison of morphogenesis in embryos, giants and tractor pulls.**

2 Intact embryos (top) are compared to unencumbered giants (middle) and standard giants  
3 in tractor pulls (bottom). Time of controls are as indicated at bottom. Scale for embryos =  
4 250  $\mu\text{m}$ , for giants and tractor pulls = 1 mm.

5

6 **Figure S4. Plots of all the individual force traces.**

7 For each tractor pull condition, the force traces of each pull are plotted (thin lines), as well  
8 as the mean of the pulls (thick line), with error bars representing standard error. The  
9 accuracy of the plots along the time axis is approximately +/- 30 minutes. For Late Giants,  
10 UV Giant Pulls and Ventral 180° pulls, plots using both 3 and 4 are shown, as no significant  
11 difference was seen between the two probes for these conditions.

12

13 **Figure S5. Probe drift tests.**

14 Probe drift over time was assayed with the probe immersed in culture media or water.  
15 Probe movement was translated into force equivalents, to determine how much it would  
16 influence tractor pull and stress-relaxation test measurements. Representative plots with  
17 probe #3 (A) showed substantially less tendency to drift than with probe #4 (B, C). Drift  
18 was greatest immediately after immersion (C).

19

20

1 **Figure S6. Sled friction tests.**

2 Representative force plots for sled friction on three different substrates: cover glass in a  
3 0.1% solution of BSA, a 1% agarose pad, or 100  $\mu\text{m}$  glass beads.

4

5 **Figure S7. Notochordal and somitic tissue in tractor pull explants.**

6 Sandwich explants used in tractor pulls were fixed after the force measurement assay was  
7 finished (stage 25-30) (A, E, I, M) and stained for somitic tissue with the 12/101 antibody  
8 (B, F, J, N) and for notochordal tissue with the Tor70 antibody (C, G, K, O). The two staining  
9 patterns are also shown juxtaposed D, H, L, P). In a standard giant explant (A-D), a dorsal  
10  $180^\circ$  explant (E-H) and a standard giant explant that had additional tension imposed on it  
11 ( $0.6\mu\text{N}$ , at G+5h) (I-L), both somitic and notochordal staining are evident. In a ventral  $180^\circ$   
12 explant, (D-F) a small amount of somitic tissue at the lateral edge of the explant is  
13 observed, but no notochordal tissue. Tor70 signal in O is typical of that seen in the  
14 remnant of the blastocoel cavity of ventralized embryos with no axial tissues, and does not  
15 correspond to notochordal tissue. Scale bars = 1mm.

16

17 **Figure S8. Response of explants in tractor pull after tension increase or relaxation.**

18 The anchor strip was moved 50  $\mu\text{m}$  away from the probe to increase tension on the explant  
19 by 0.5 to 0.6  $\mu\text{N}$  (A, B). Two examples (green and red in A, B) are compared to mean control  
20 values (blue in A, B).

1 The anchor strip was moved 100  $\mu\text{m}$  toward the probe to relax tension on the explant by  
2 0.7  $\mu\text{N}$  (F,G). In all cases, the point of maximum deflection is indicated by \*. Two examples  
3 (blue and red in F, G) are compared to mean control values (green in F, G). Close-ups of the  
4 time period around the tension adjustment are shown in B, G.

5 Tension increase via anchor movement (red arrow; C), resulted in an immediate increase in  
6 the deflection of the probe (black arrow; C); as the explant underwent stress-relaxation  
7 (double headed green arrow; D), tension was reduced (green arrow; D). Eventually,  
8 continued convergence (double headed blue arrow; E) added additional tension to the  
9 system (blue arrow; E).

10 Tension reduction via anchor movement (red arrow; H), resulted in an immediate decrease  
11 in the deflection of the probe (red arrow; I); rapid elastic recoil (< 5 seconds) of the explant  
12 as stored elastic energy was released resulted in convergence of the explant (double  
13 headed blue arrow; I), and increased deflection of the probe (blue arrow, I). Further  
14 morphogenic convergence of the explant occurred subsequently (as in E).

15

16 **Figure S9. Instantaneous Structural Stiffness and Viscosity of standard giant**  
17 **sandwich explants.** Parameters for the spring and dashpot model (Fig. 4E), calculated  
18 using two different methods (NLREG or Log Transform).

19

20

21

1 **Figure S10. Comparison of methods for estimating parameters.**

2 (A) Example of estimation of parameters from linear regression on log transform of time-  
3 dependent stiffness data. Magenta: plot of  $\ln(SS(t) - SS(180) * 0.97)$ . Black: linear  
4 regression plot on log transformed data. Blue: plot of  $\ln(SS(sp) * e^{-t/\tau})$ , with  
5 parameter as estimated by NLREG.

6 (B) Comparison of Model vs. Measured Stiffness for the case in A, above. Blue: measured  
7 time dependent structural stiffness. Magenta: plot of  $E(180) + SS(sp) * e^{-t/\tau}$ , with the  
8 later two parameters based on linear regression on log transform, as in A, above. Green:  
9 plot with all parameters from NLREG.

10

11 **SUPPLEMENTARY MOVIES:**

12

13 Supplementary Movie 1. Movie comparing regular (left) to ventralized (right) BP closure.

14

15 Supplementary Movie 2. Movie showing standard giant in tractor pull apparatus.

16

17 Supplementary Movie 3. Movie showing ventralized giant sandwich explant

18

19 Supplementary Movie 4. Movie showing unencumbered giant sandwich explant.

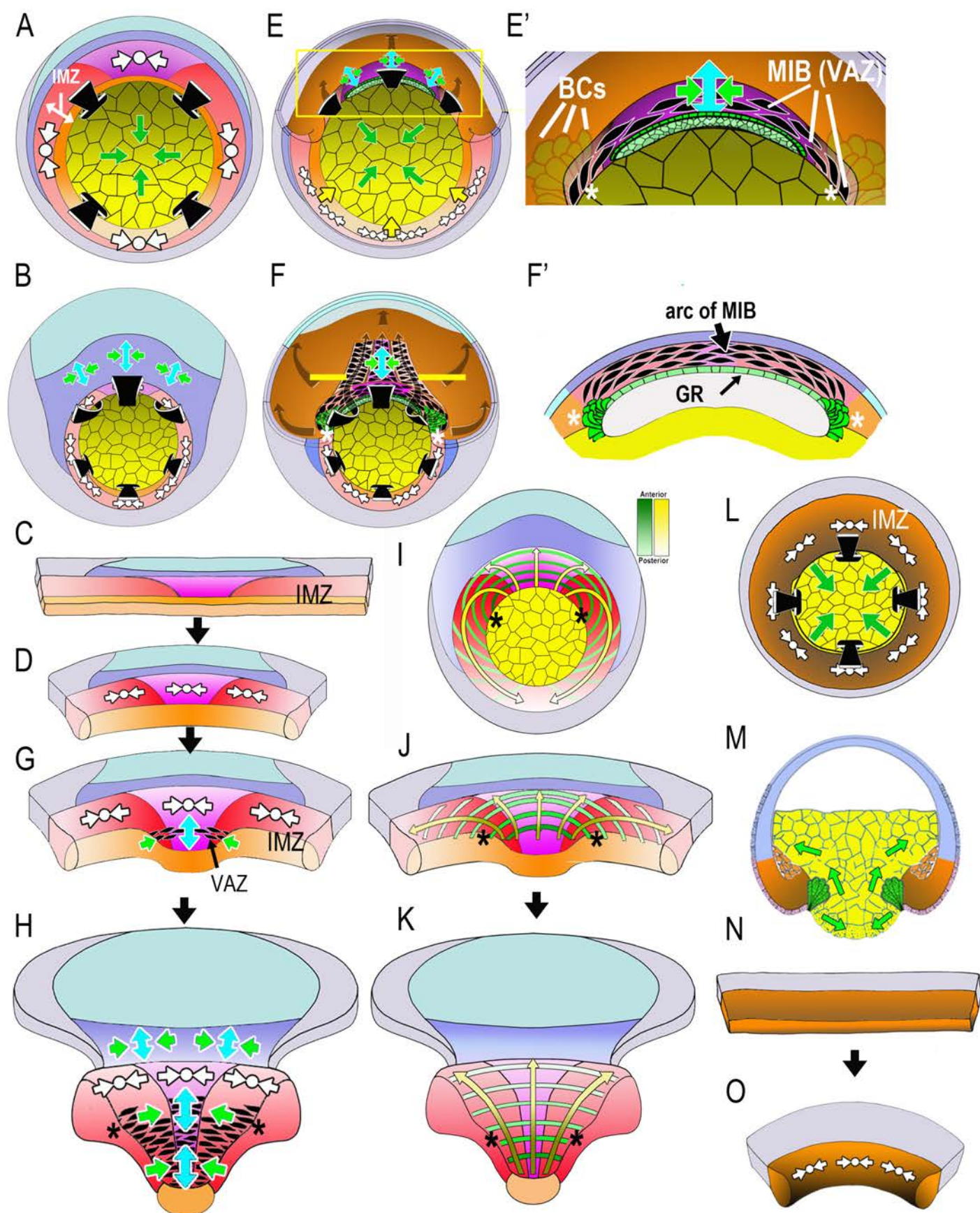


Figure 1 Shook et al.

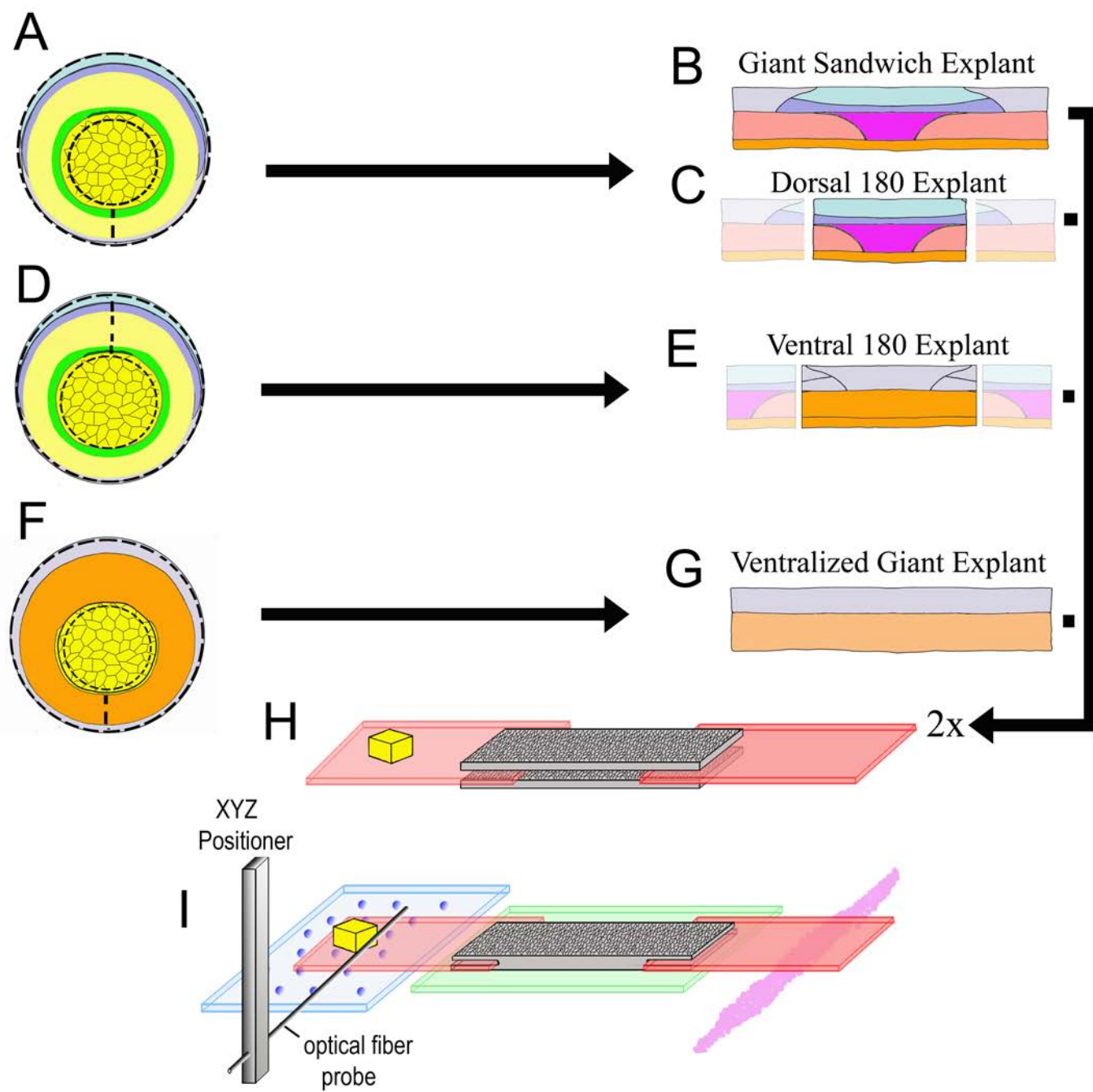


Figure 2



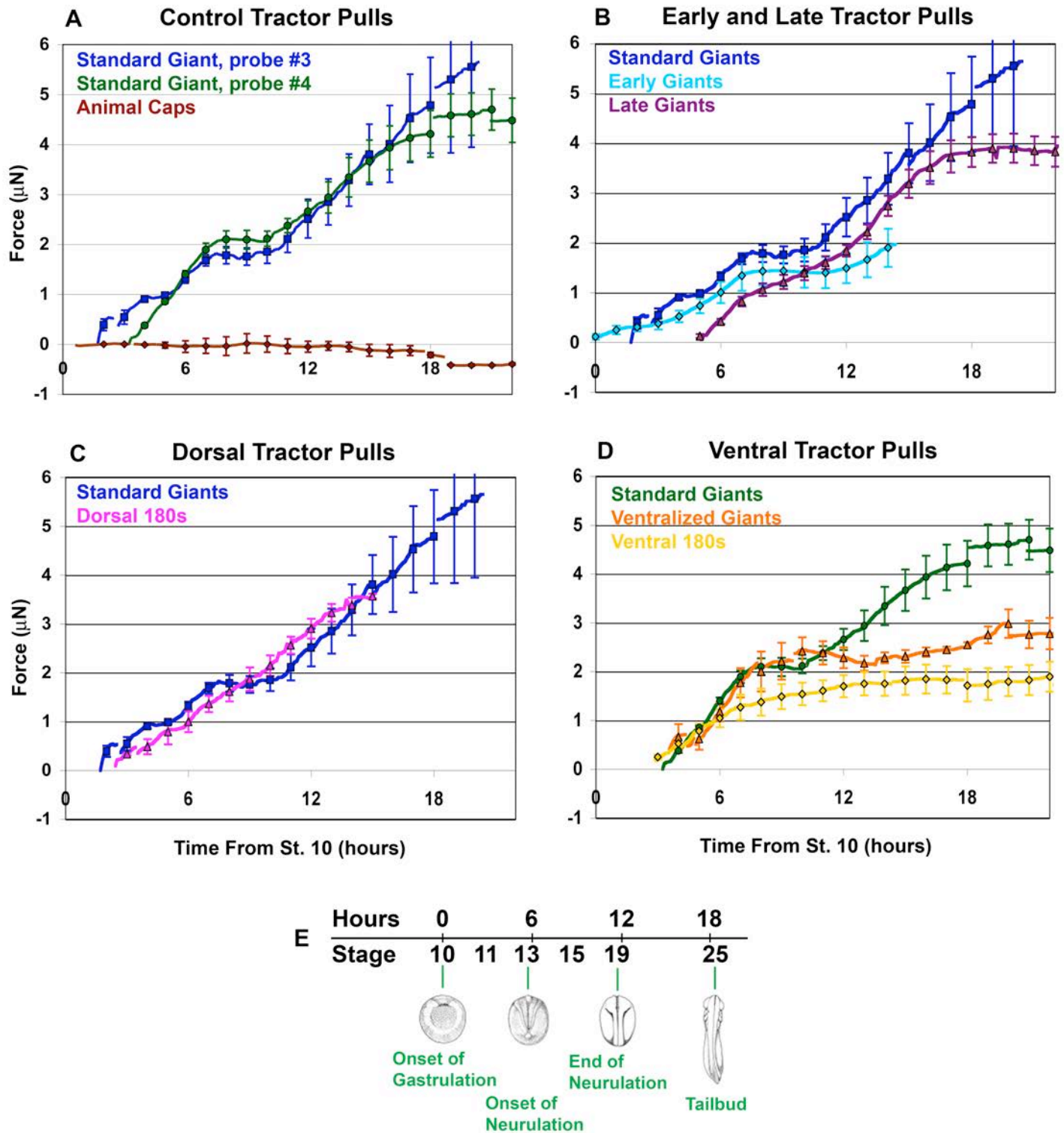


Figure 3

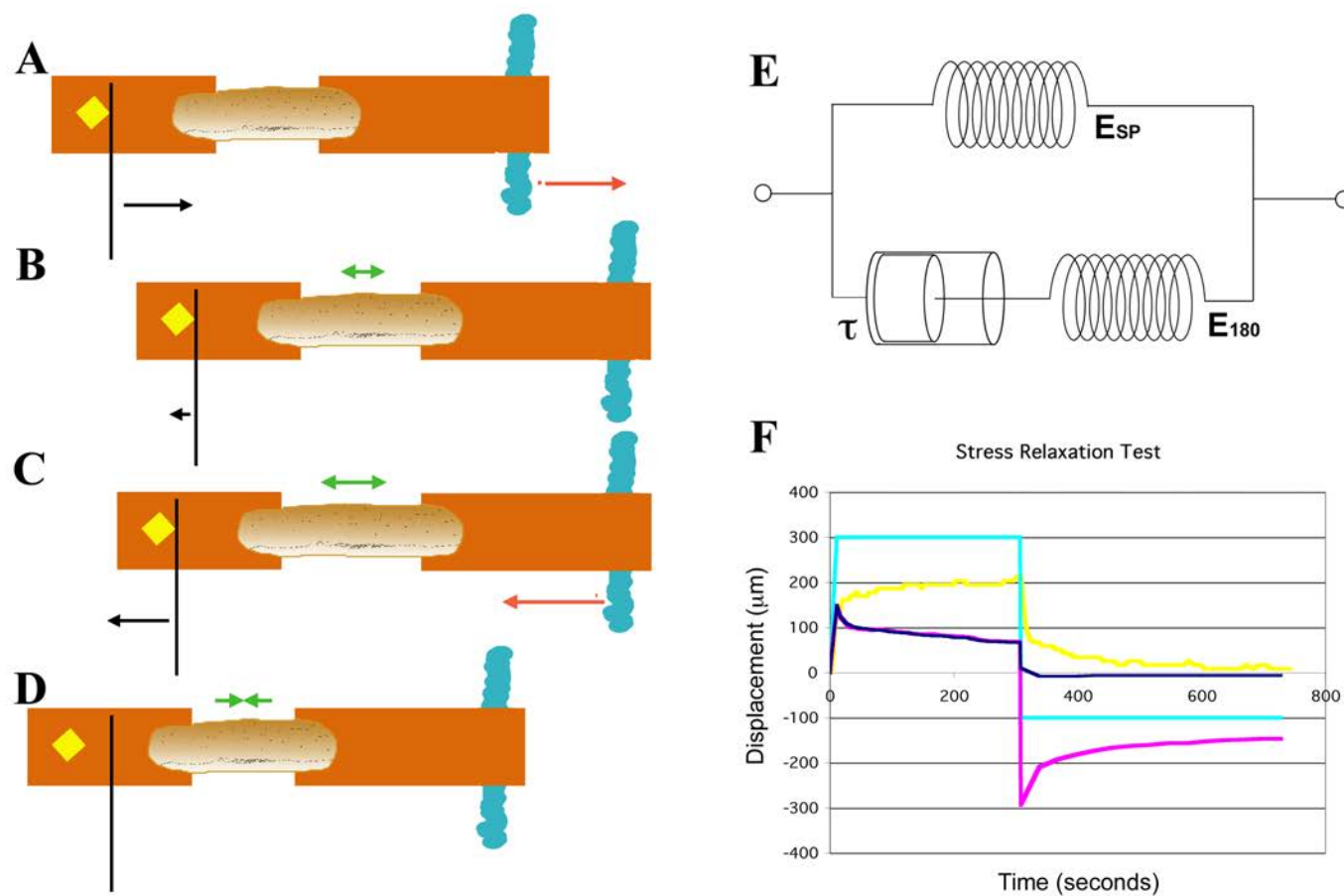


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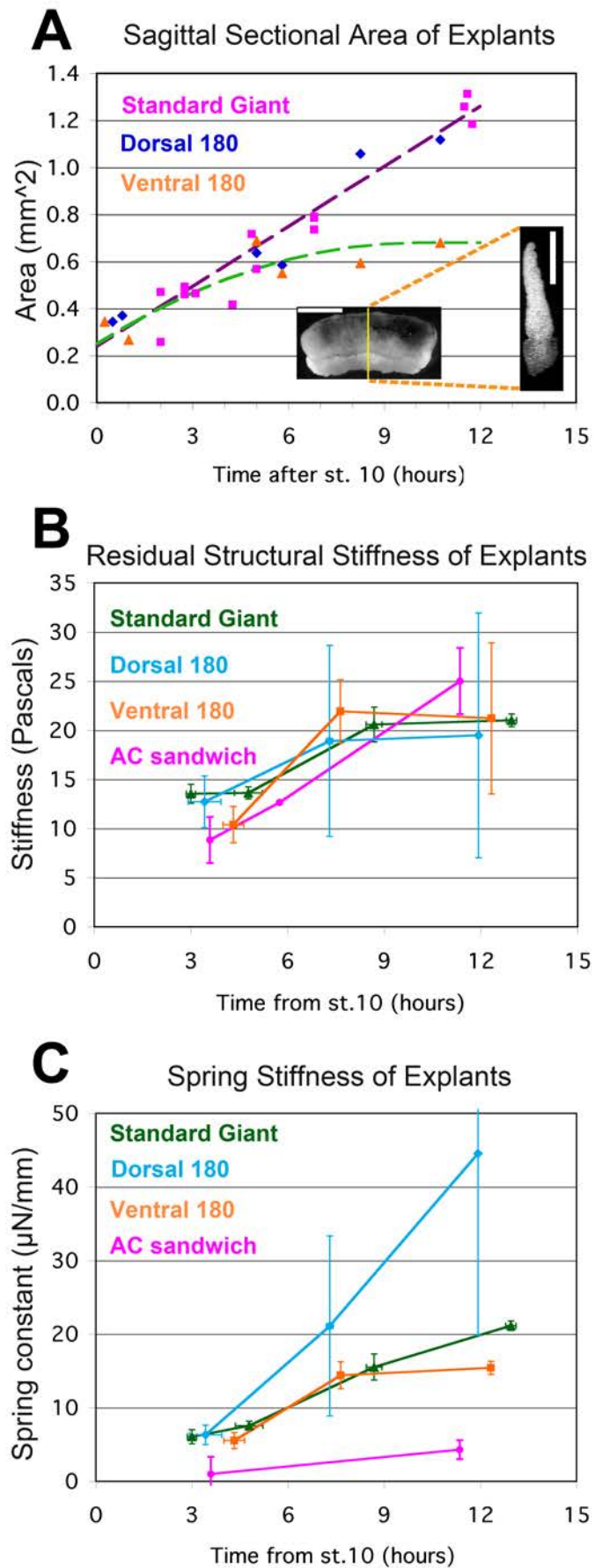


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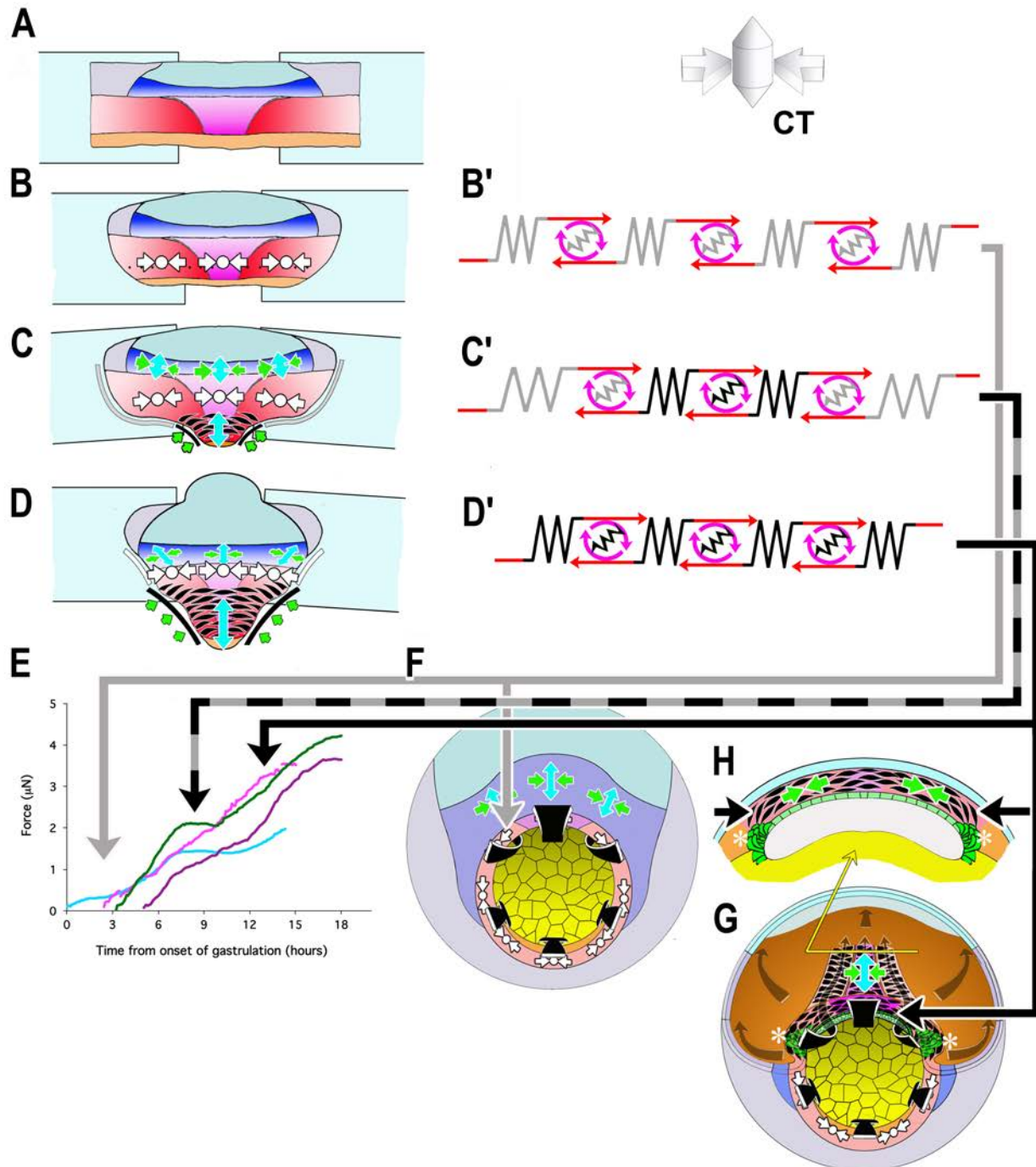
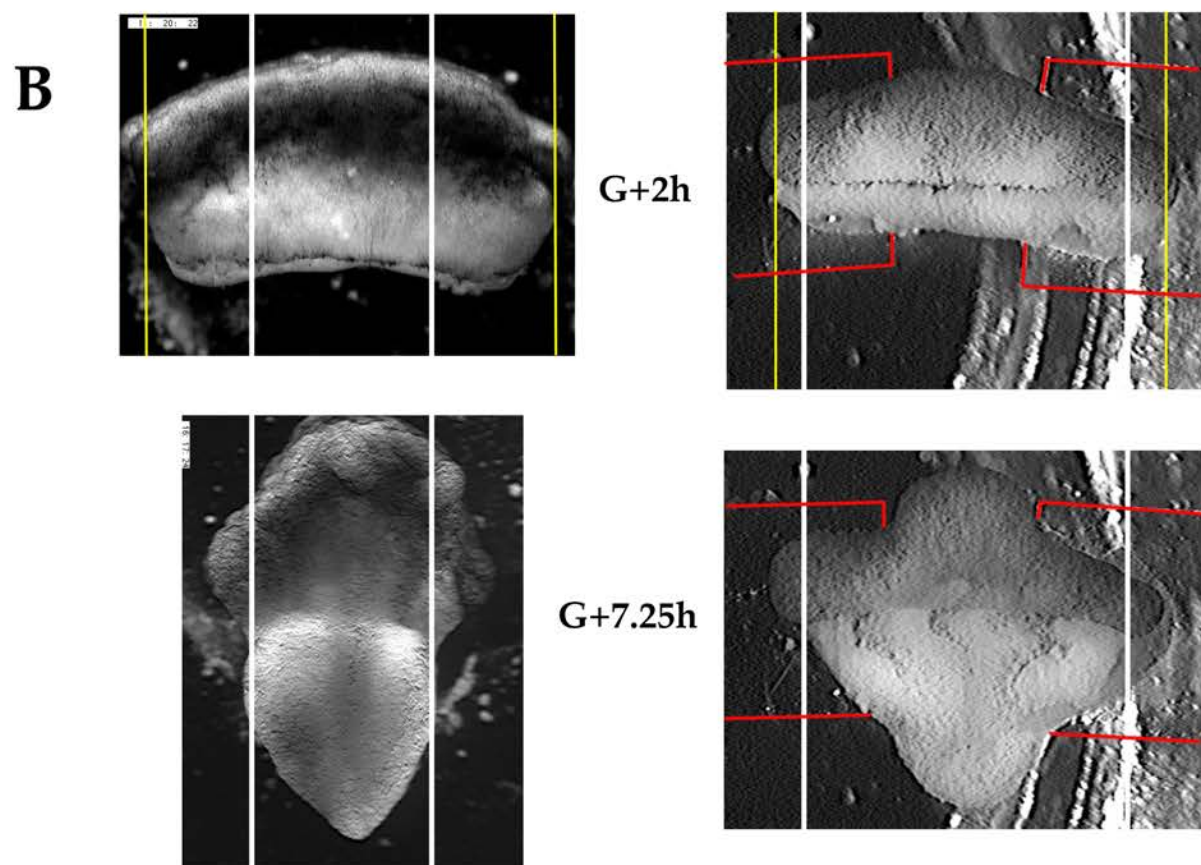
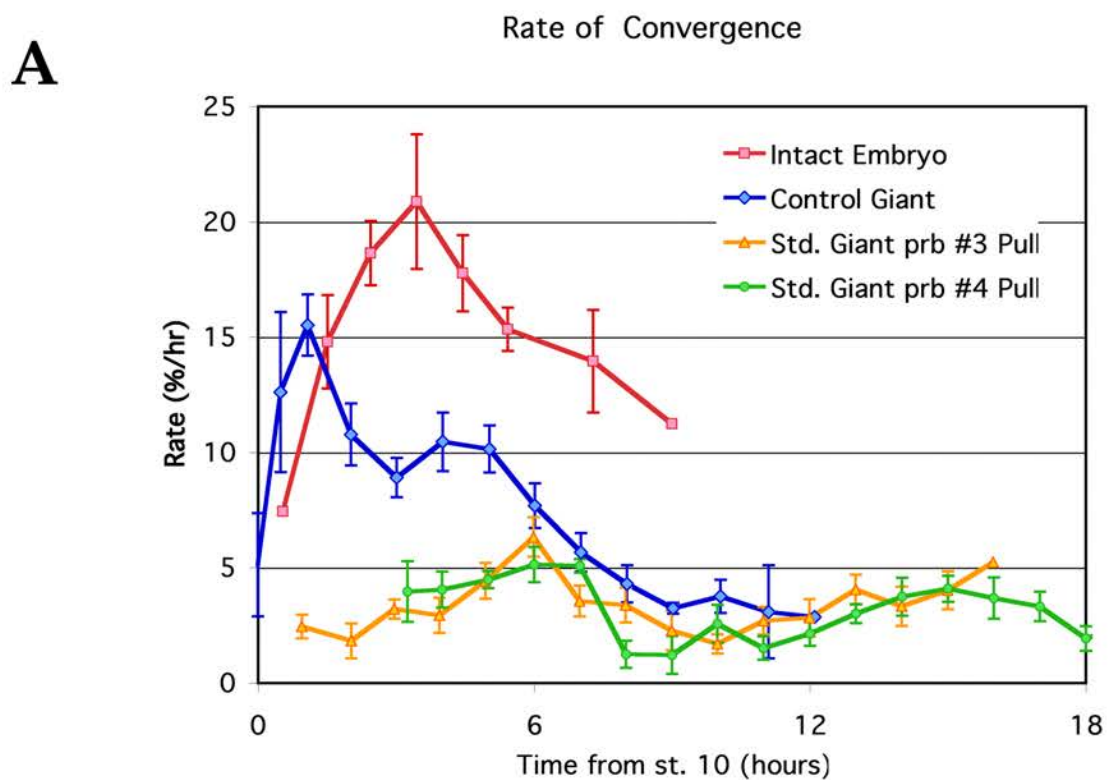
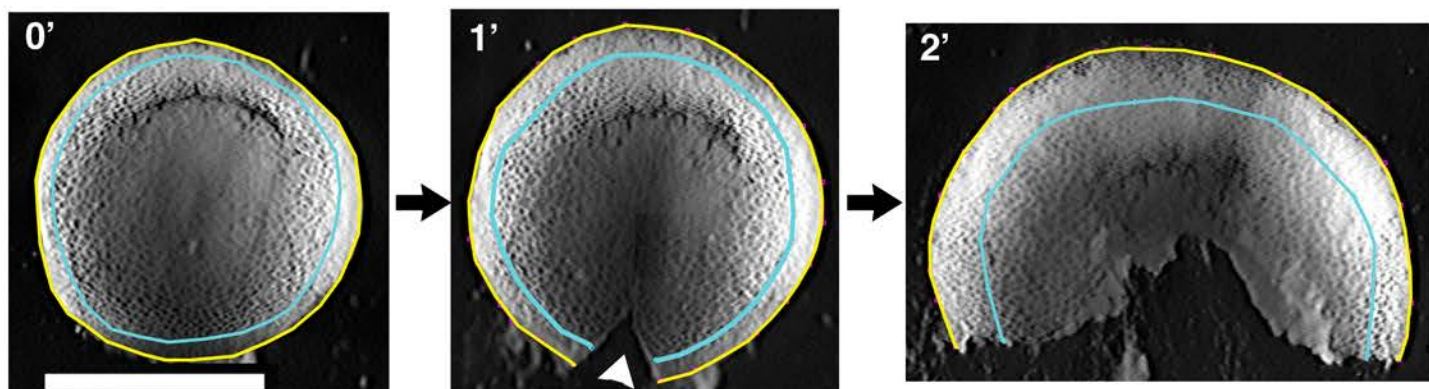


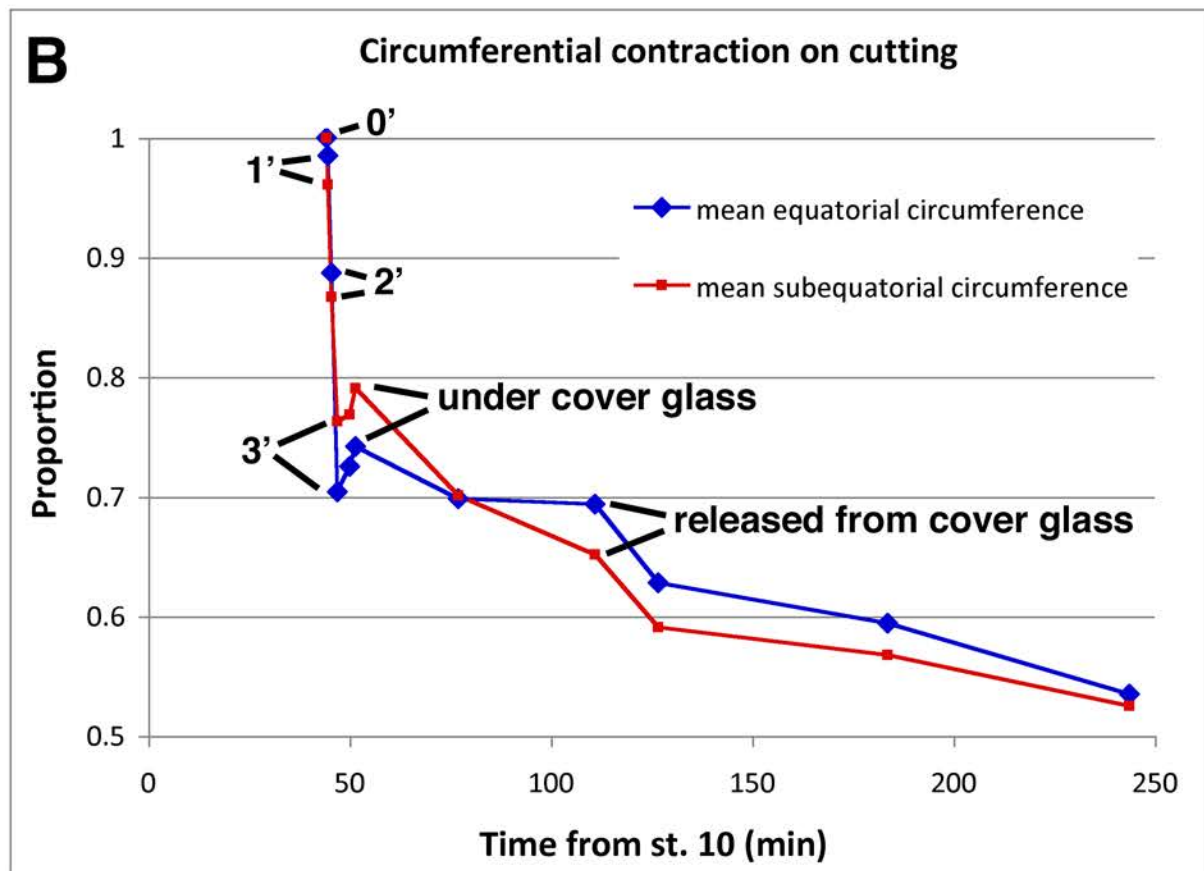
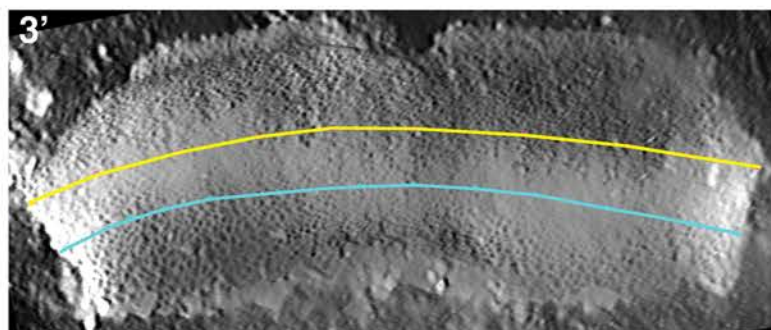
Figure 6 Shook et al.



Supplementary Figure 1



**A**



**Fig. S2**

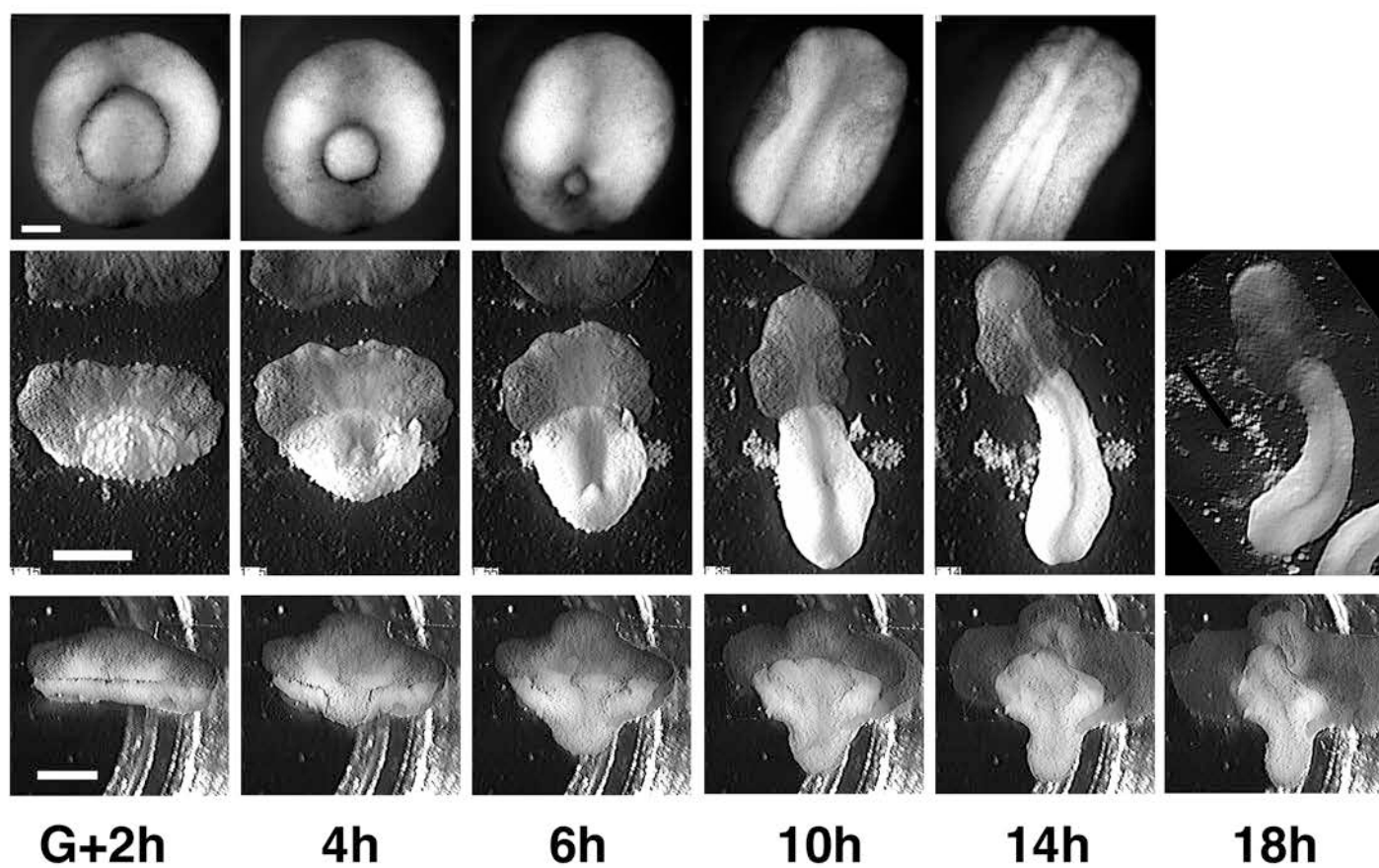


Figure S3

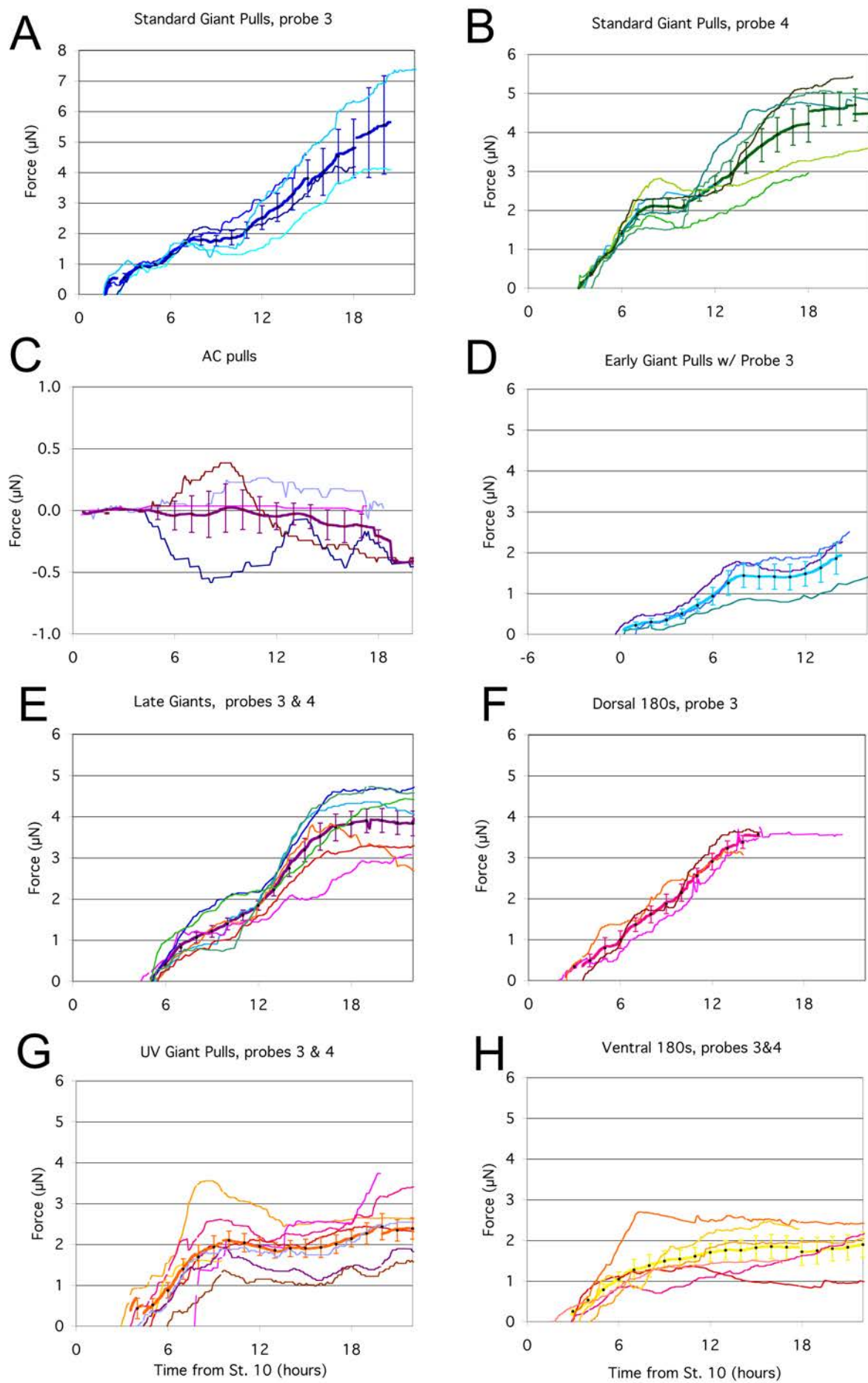
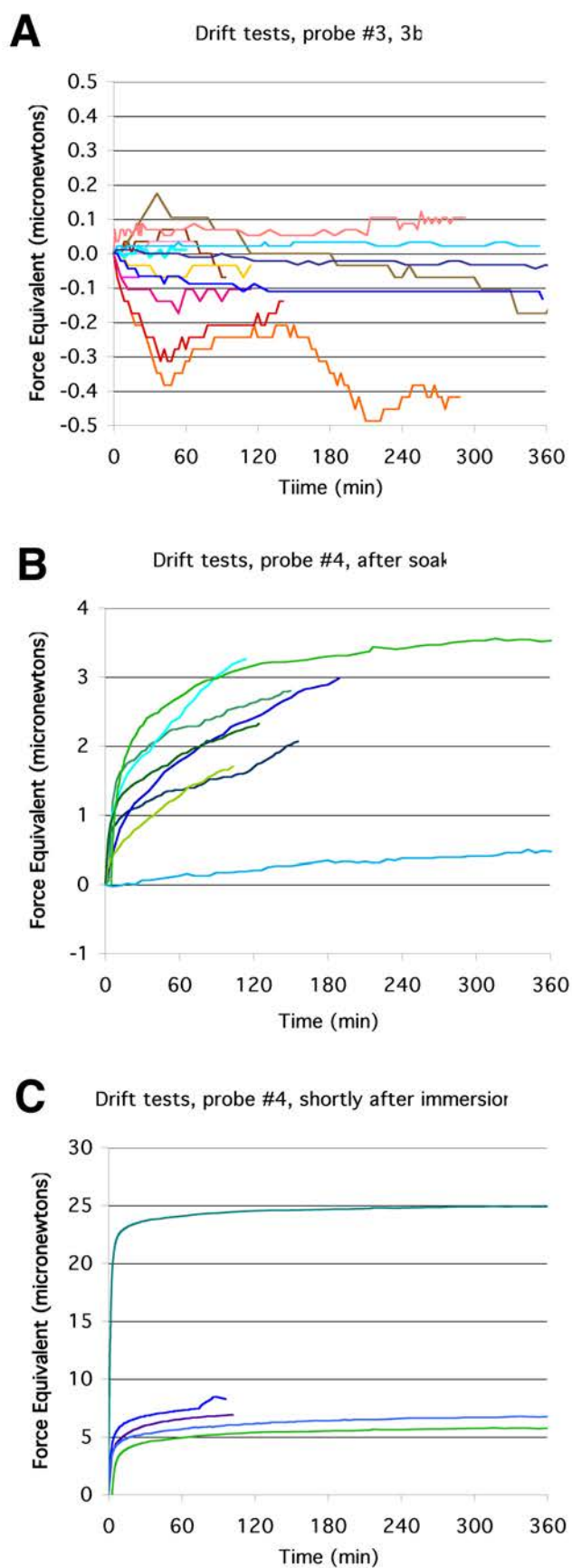
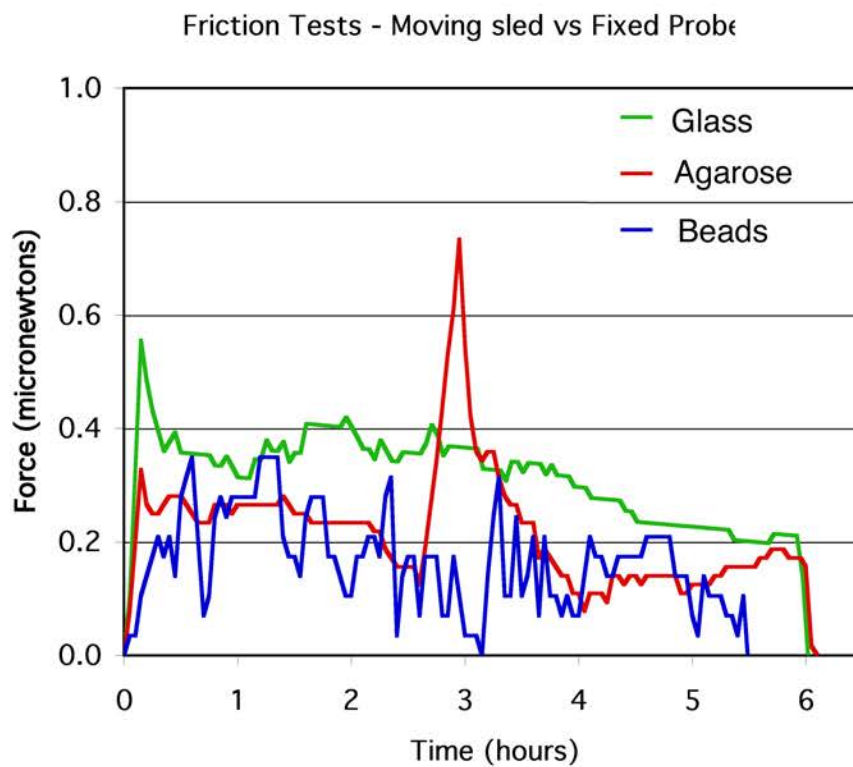


Figure S4

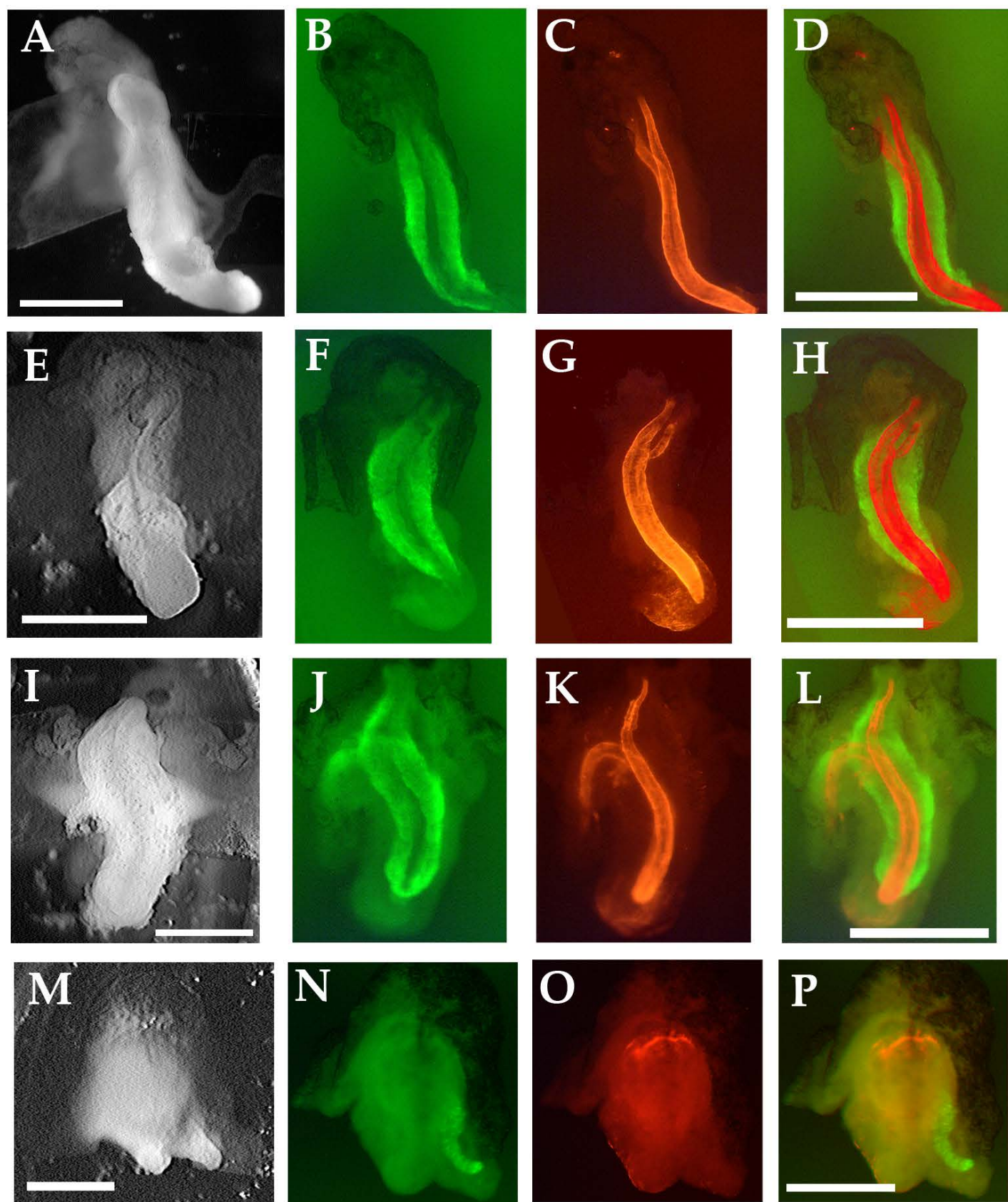




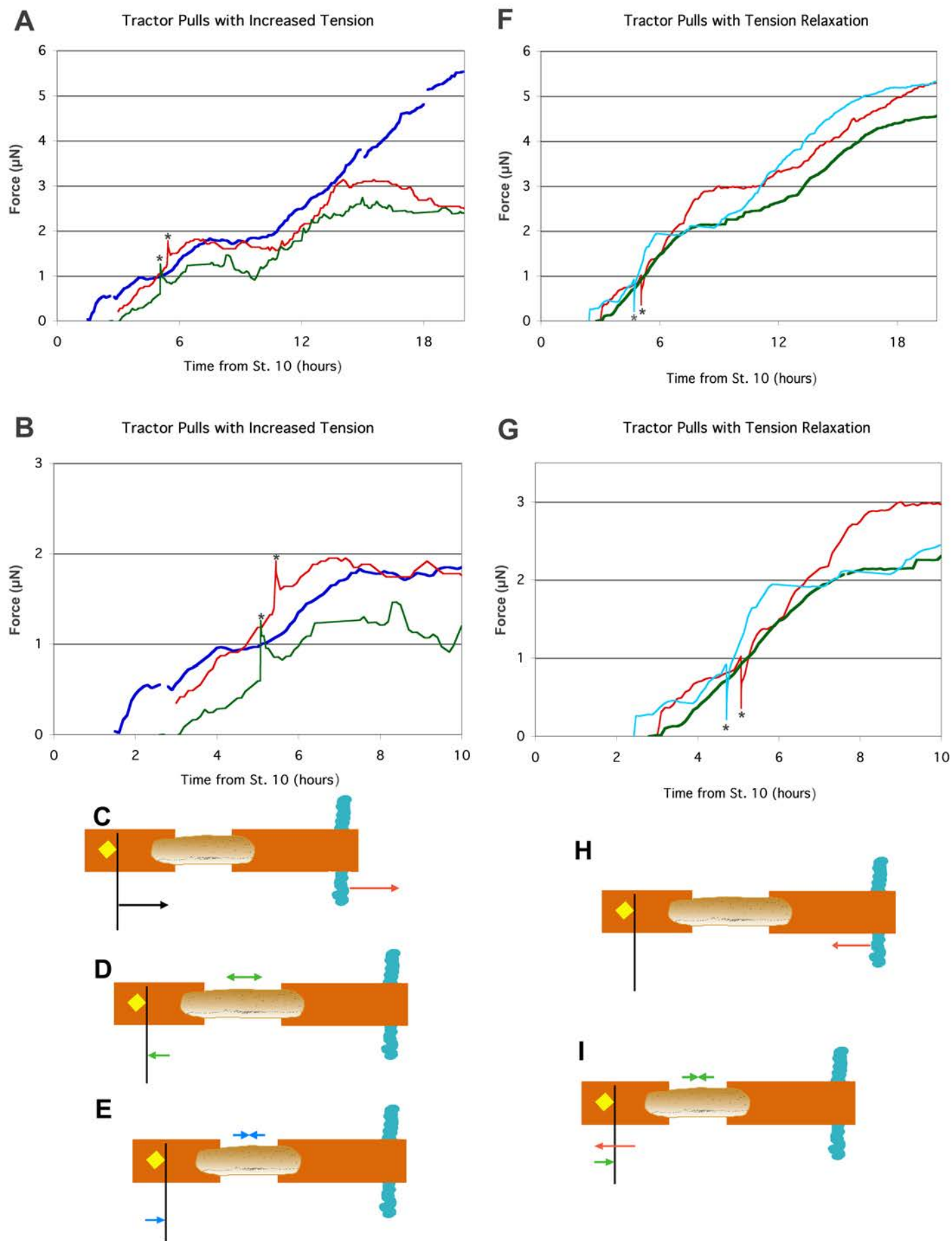
Supplementary Figure S5



Supplementary Figure S6



Supp. Figure S7



Supp. Figure S8

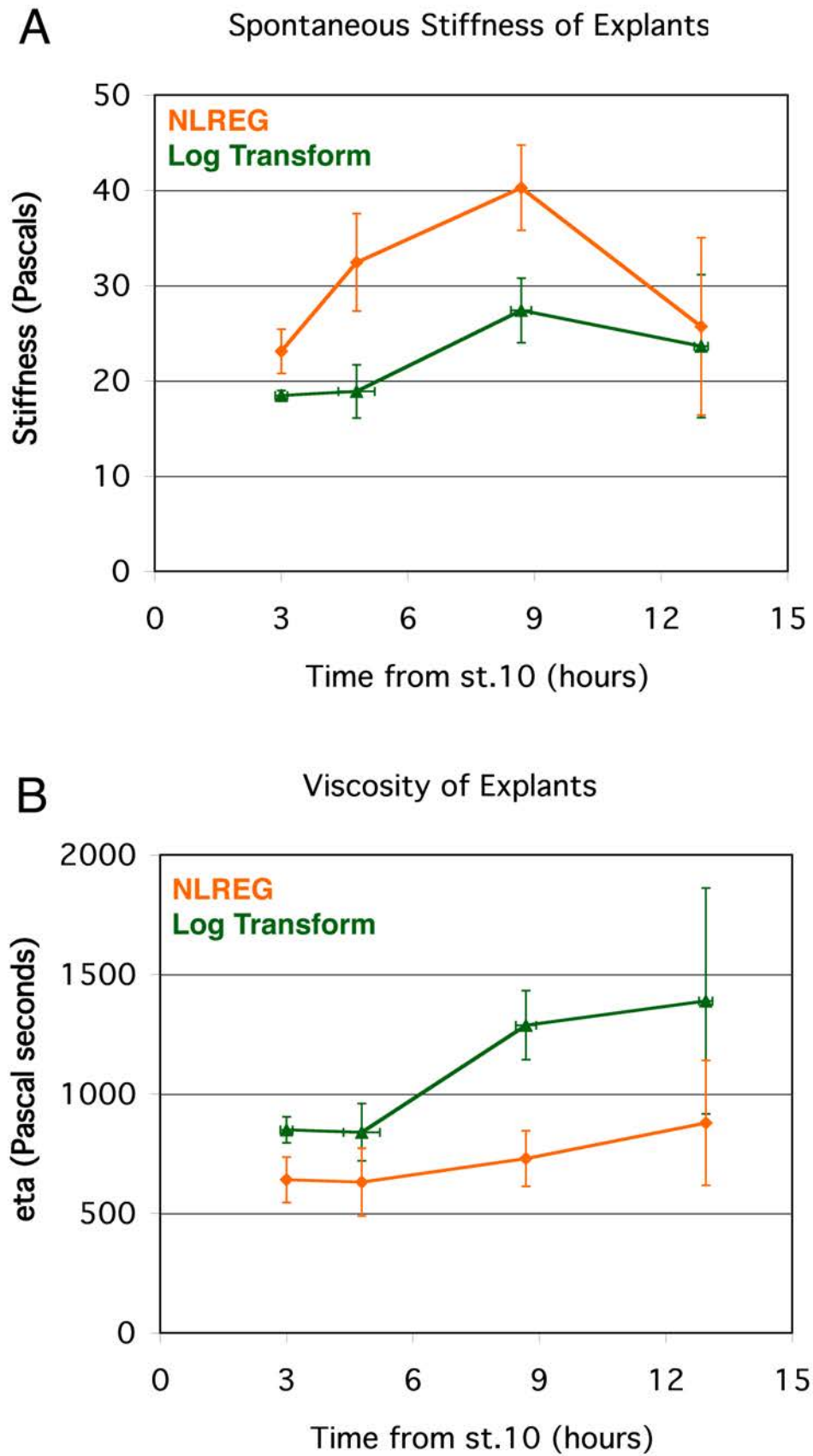


Fig. S9

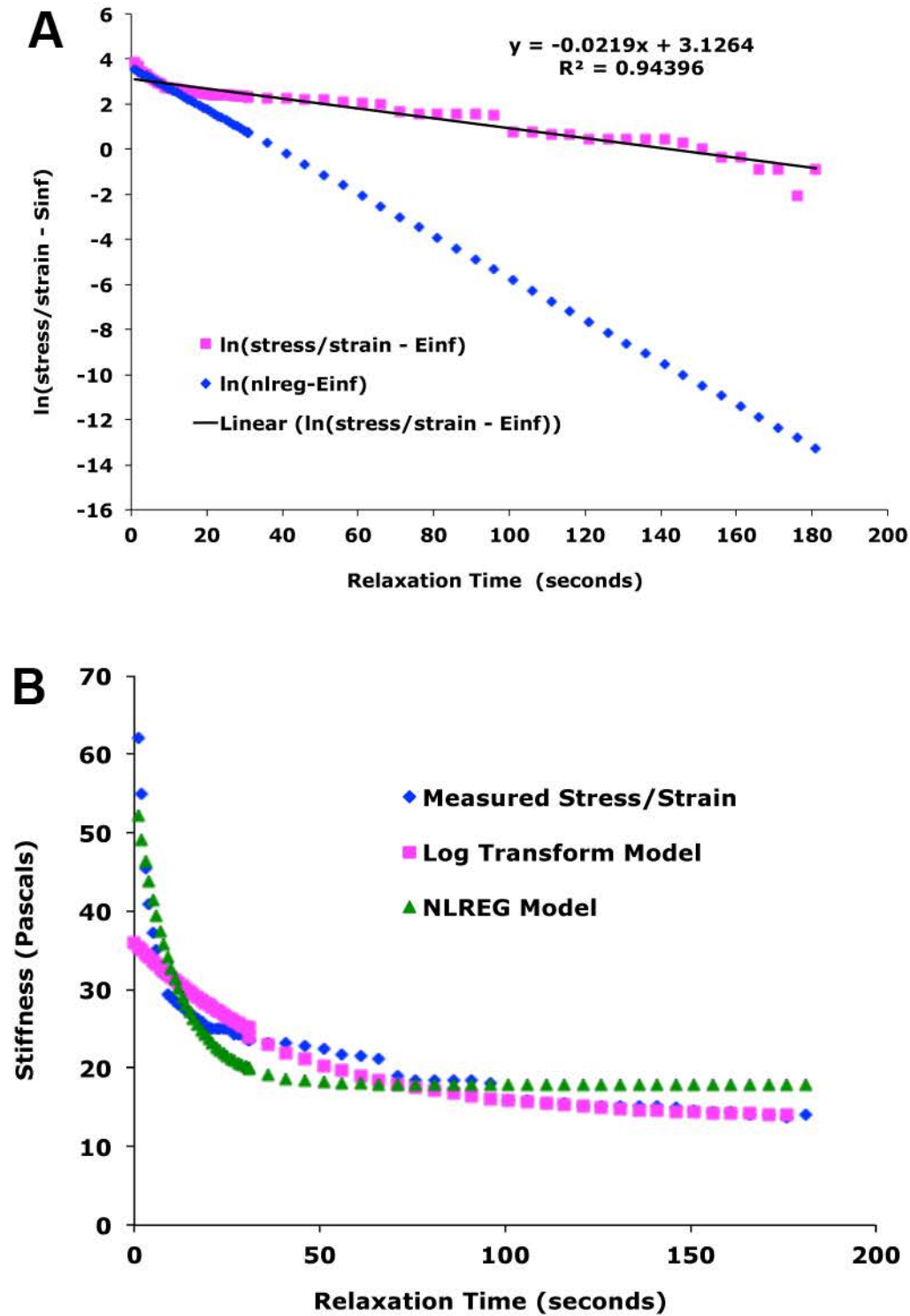


Figure S10