

# Factor VIIa-Antithrombin complex levels and Factor Xa generation in CAD patients

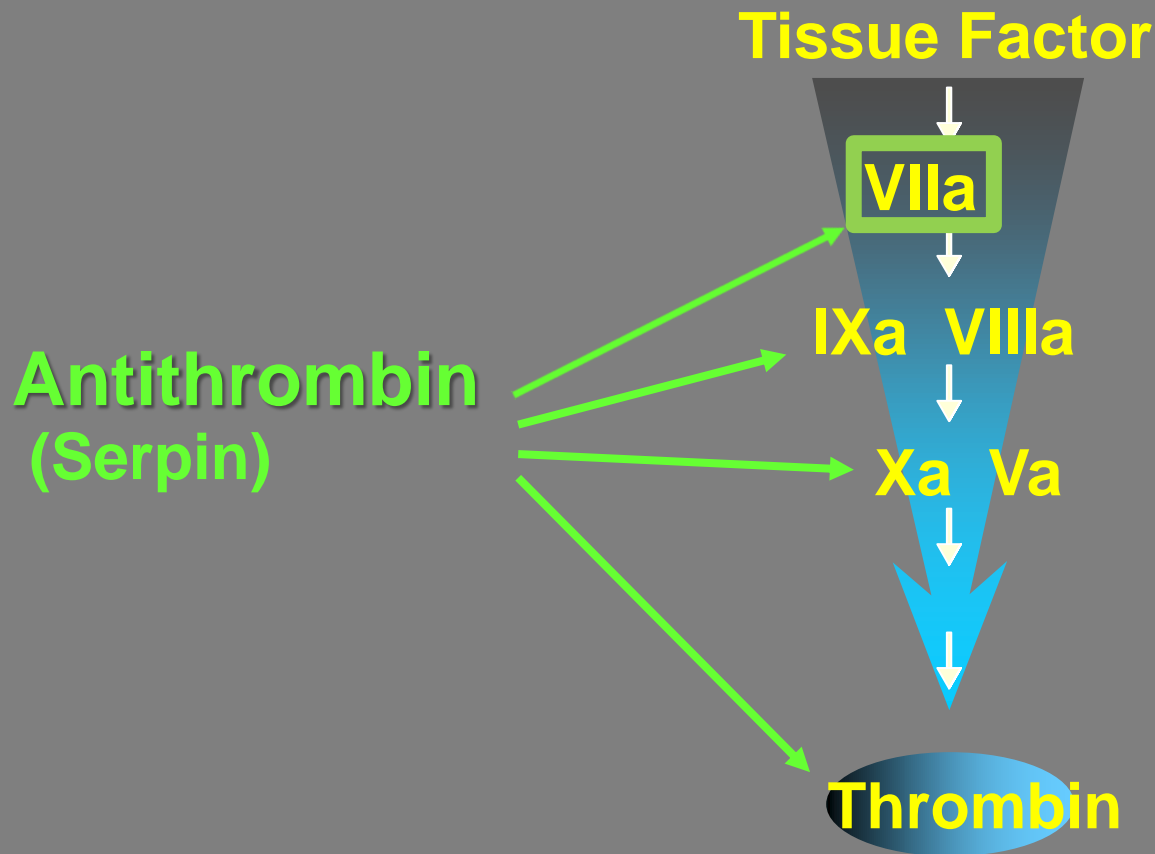
## Israel Society of Thrombosis and Hemostasis - Autumn Symposium

Ramot Hotel September 14-16, 2017

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University of Ferrara Italy



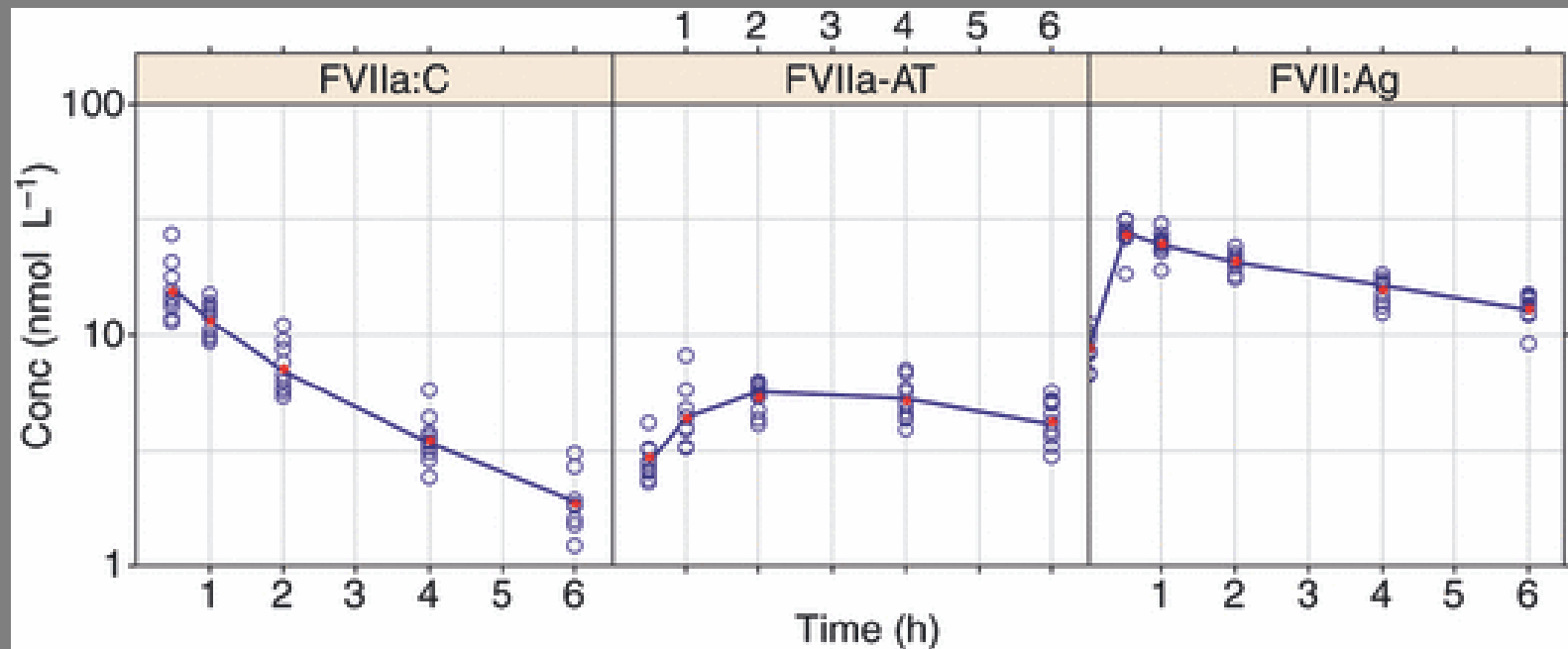
# Coagulation inhibition by Antithrombin



# The FVIIa AT Complex: milestones

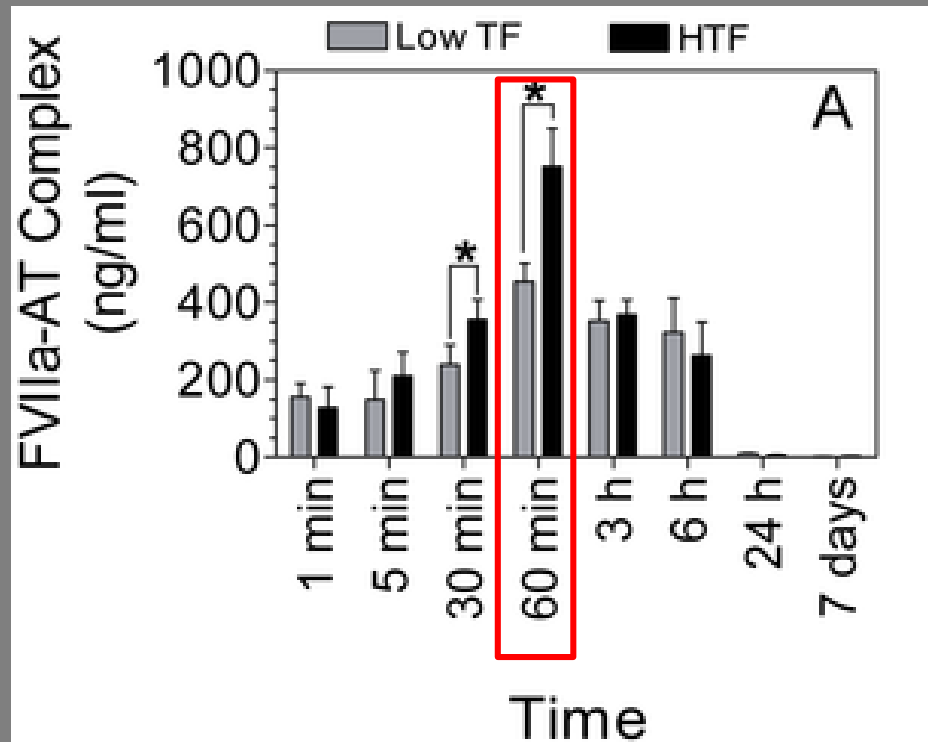
- Antithrombin III (AT) inhibits FVIIa when bound to TF and not as free FVIIa *Lawson et al JBC 1993 Rao et al Blood 1993*
- Compared to TFPI, AT is a poor inhibitor of FVIIa-TF *Broze et al 1993 Blood 1993 Rao et al Blood 1995*
- FVIIa-AT complex is relatively abundant in plasma (2% of plasma FVII antigen) *Smith et al. JTH 2007 (abst)*

# Recombinant human factor VIIa (rFVIIa) is cleared by antithrombin in hemophilia patients



The rFVIIa-AT complex formation was responsible for 65% of the rFVIIa clotting activity clearance after administration in HA patients

# Levels of FVIIa-AT generated in vivo in “High TF and low TF” mice following administration of rFVIIa



Modest effect of TF on FVIIa-AT levels?

LPS administration caused a 600% increase in TF (HTF) but only 25% increase in FVIIa-AT complex concentration

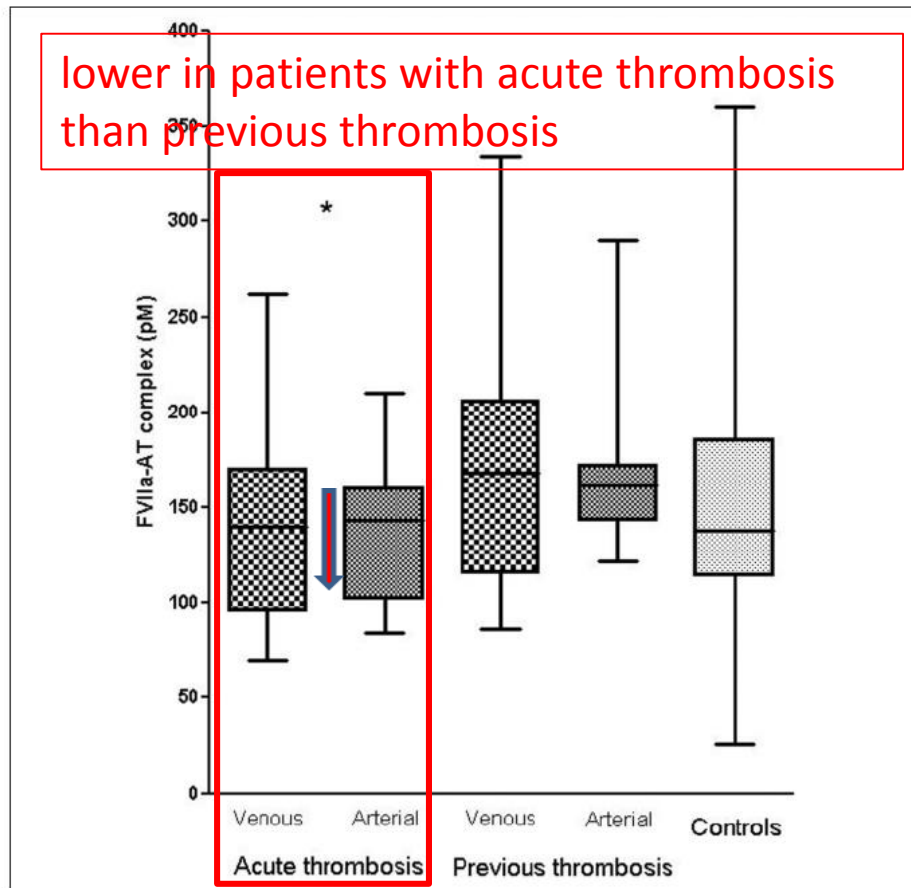
# The FVIIa AT Complex: open questions

TF, either circulating or intravascular, or some other factors in blood, are responsible for a relatively rapid inactivation of FVIIa by AT in vivo.

- ☐ Could AT be a significant regulator of FVIIa function and turnover?
- ☐ Which is the physiological significance of this inhibition?
- ☐ Is the circulating levels of FVIIa-AT complex an indirect indicator of intravascular TF exposure in vivo?

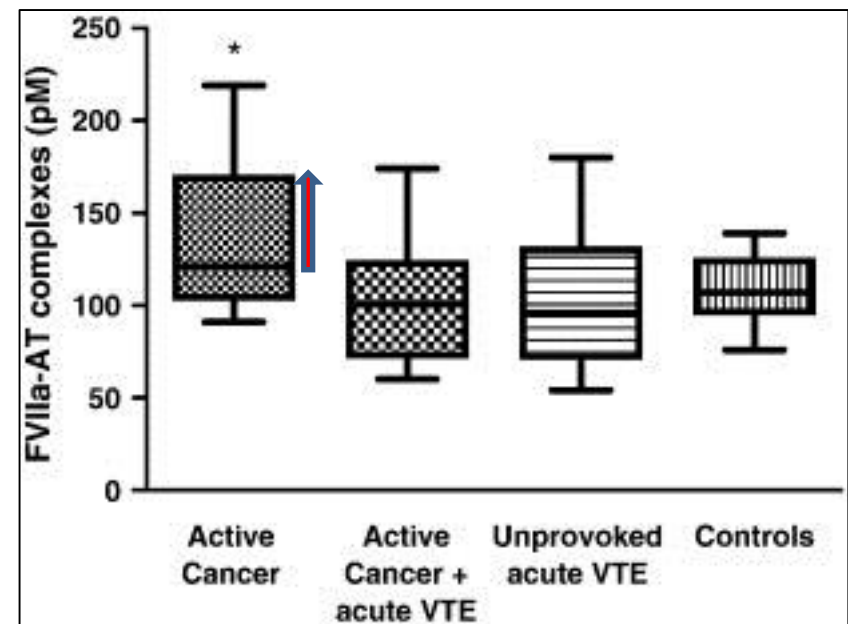
## Factor VIIa-antithrombin complexes in patients with arterial and venous thrombosis

*Spiezia et al TH 2010*



## Factor VIIa-antithrombin complexes plasma levels in cancer patients with and without thrombosis

*Spiezia et al Thr Res 2012*



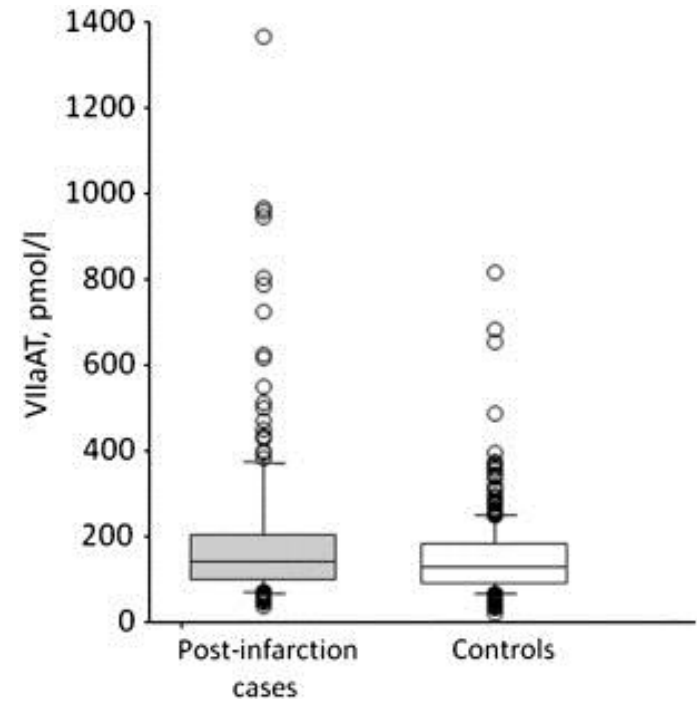
higher in patients with active cancer

# Relationships of plasma factor VIIa-antithrombin complexes to manifest and future cardiovascular disease

Silveira et al Thrombosis Research 2012

“Slightly increased plasma VIIaAT concentrations observed after MI may reflect processes that occur in connection with the acute event...”

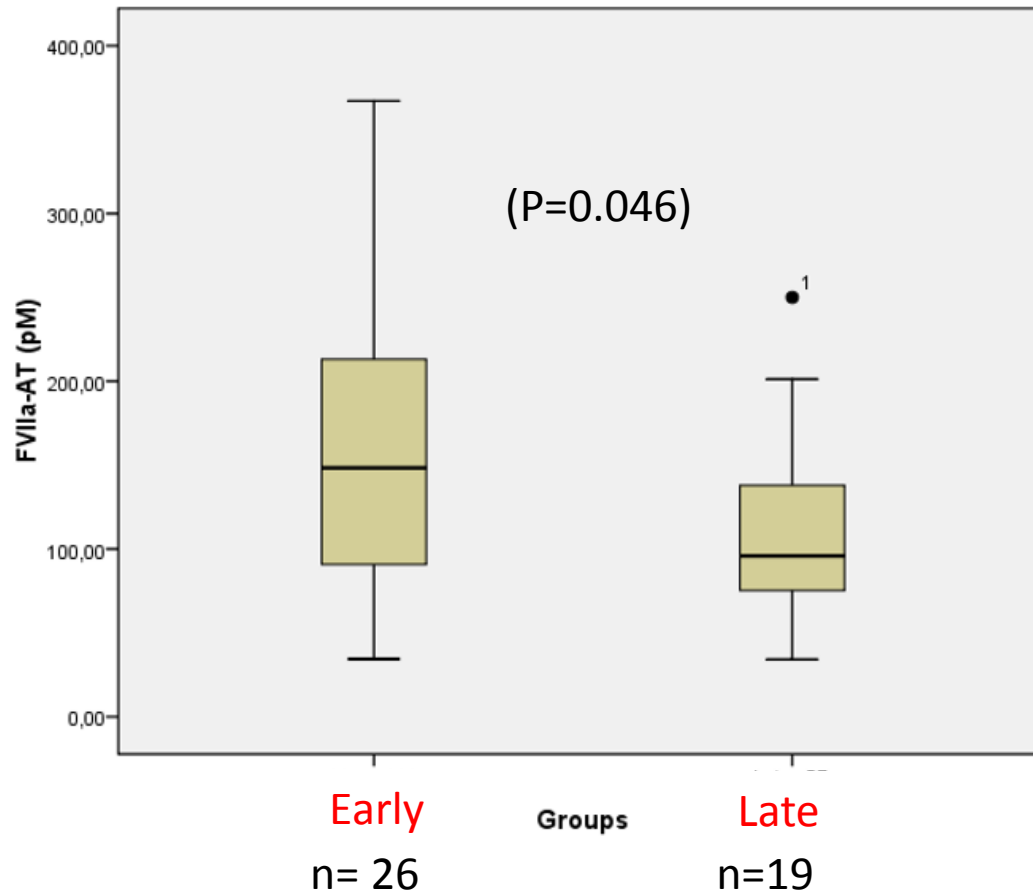
“Plasma VIIaAT concentration had no predictive value for future CVD in our study population”



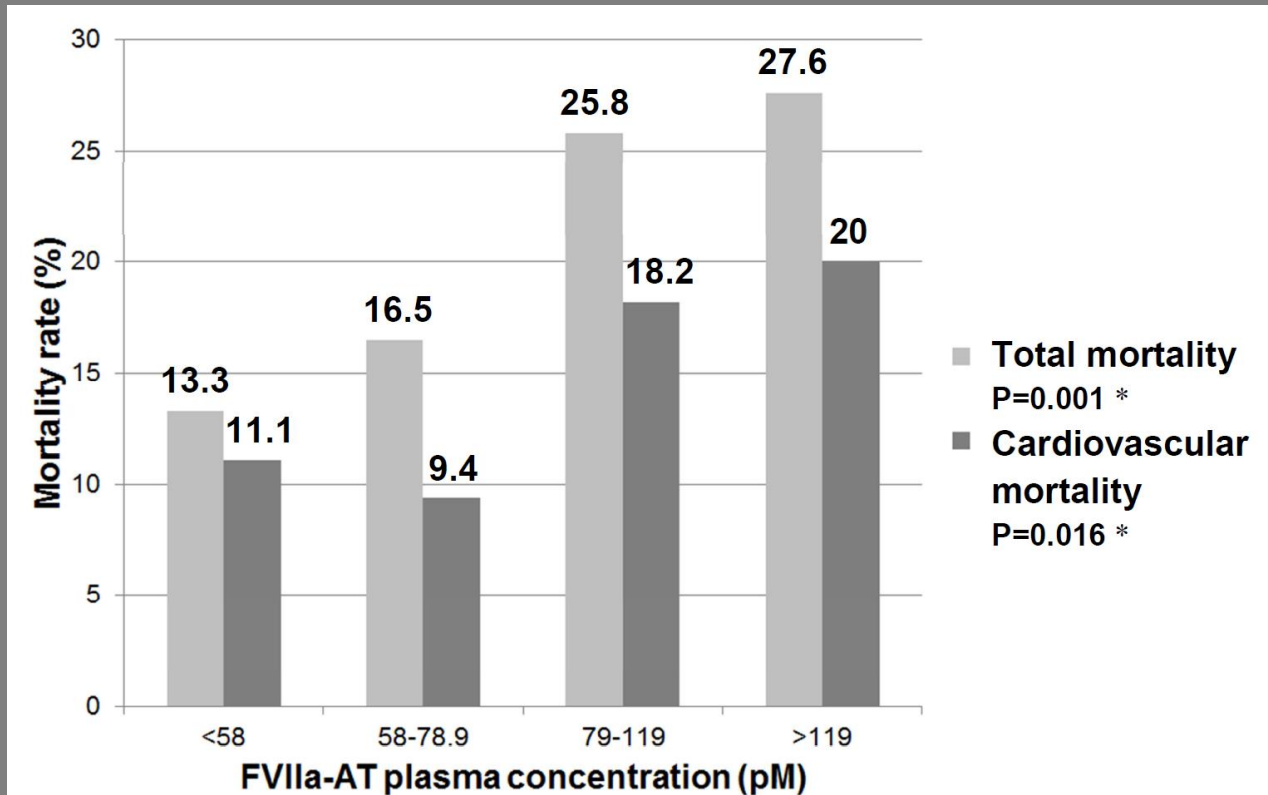


# FVIIa-AT plasma levels in early and late severe preeclampsia

Luci Maria Sant Ana Dusse et Al Clinica Chimica Acta June 2017



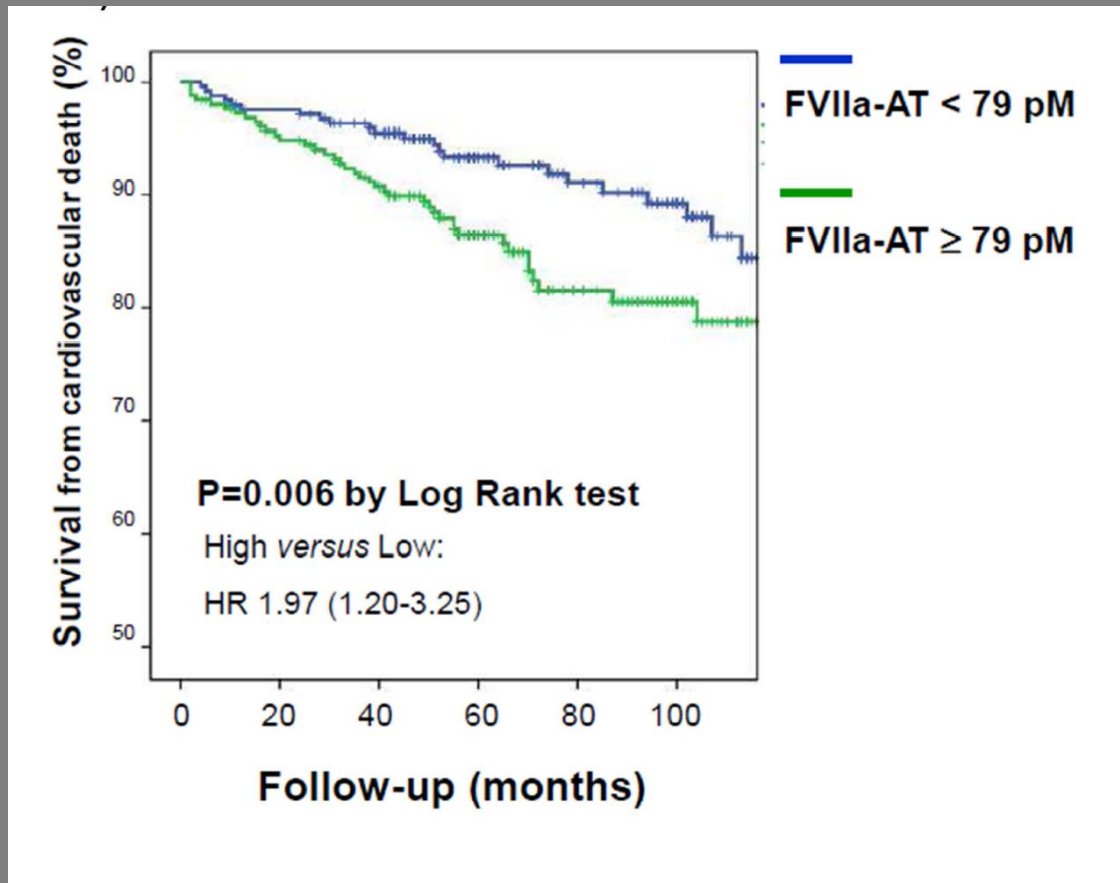
# The Factor VIIa - antithrombin complex concentration in plasma predicts mortality in patients with coronary atherosclerosis



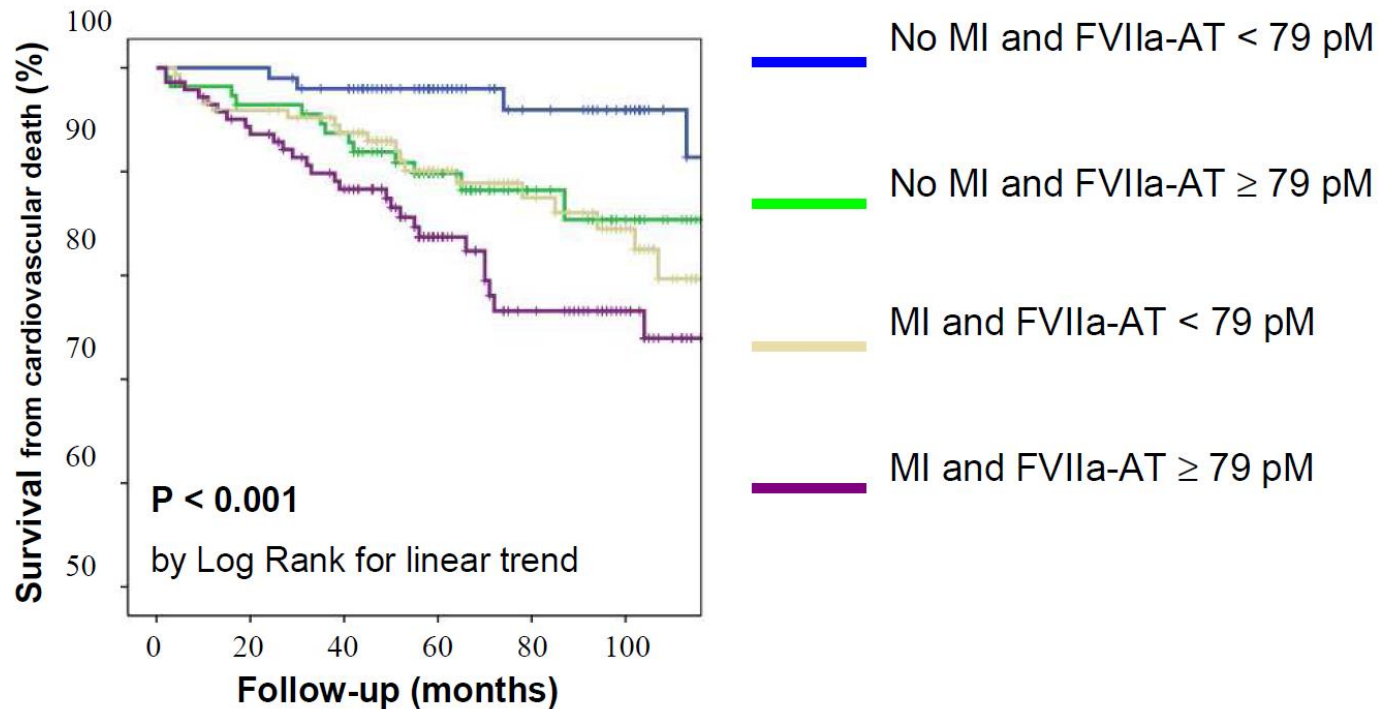
\* : by  $\chi^2$  for linear trend.

Martinelli et al  
2016

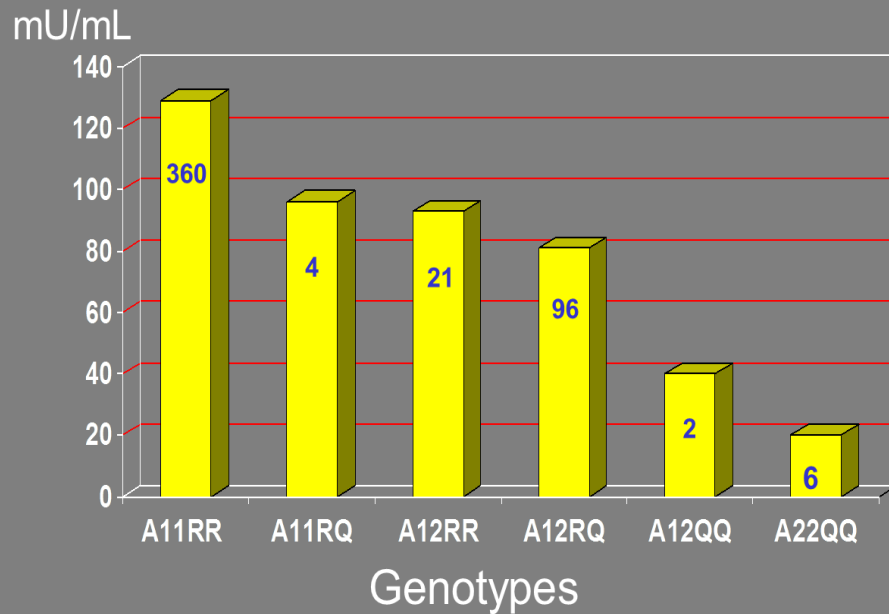
# The Factor VIIa - antithrombin complex concentration in plasma predicts mortality in CAD patients



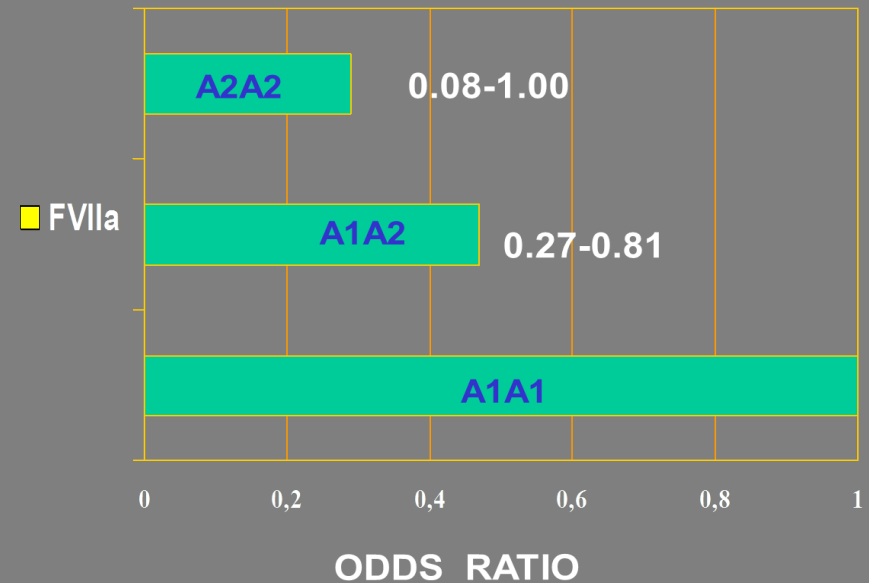
# The Factor VIIa - antithrombin complex concentration in plasma predicts mortality in CAD patients with history of previous Myocardial Infarction



# Contribution of *F7* Genotypes to FVII levels and Risk of Myocardial Infarction

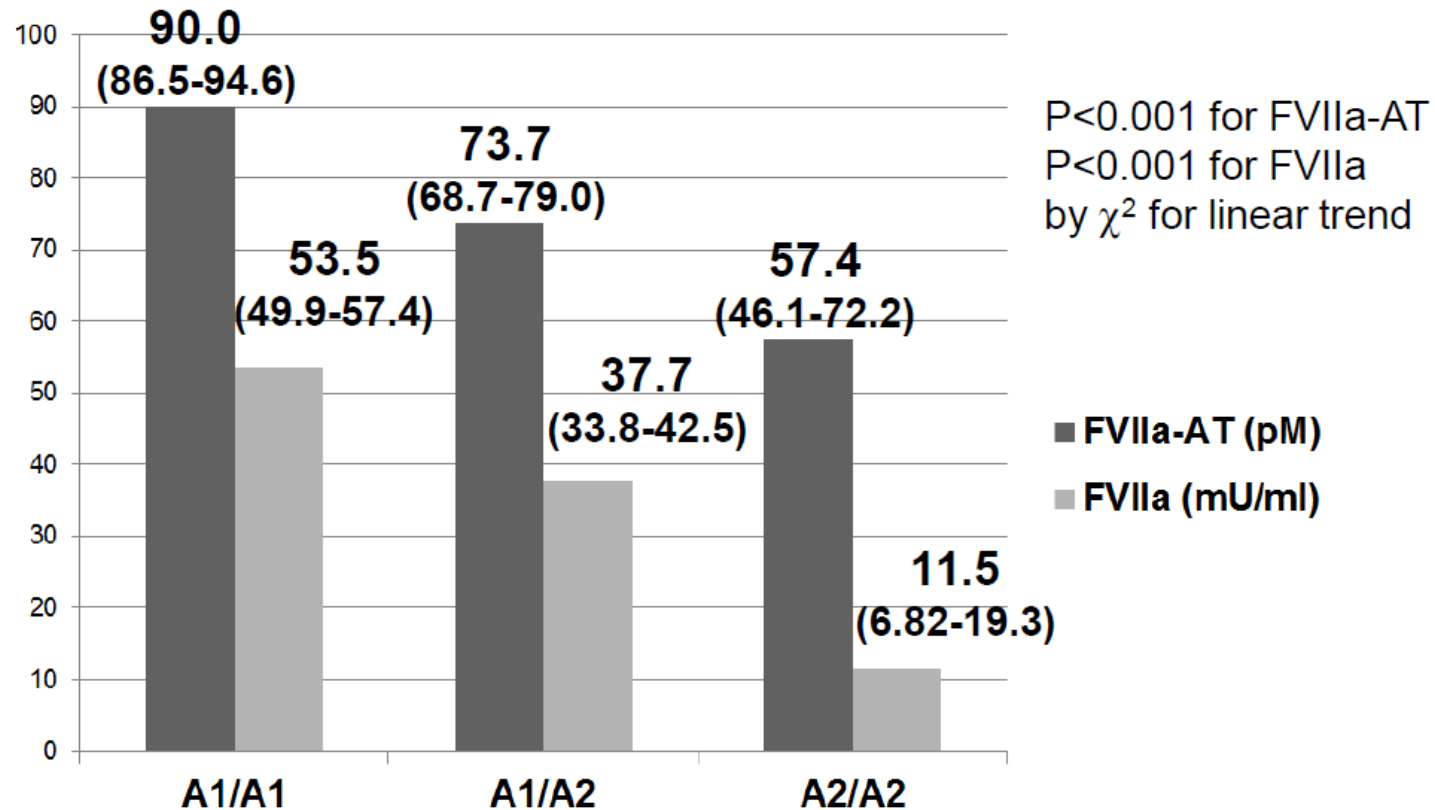


Bernardi et al ATVB, 1996



Girelli et al. N Engl J Med, 2000

# FVII genotypes predict FVIIa-AT complex levels



# TF genotypes predict FVIIa-AT complex levels

		n	FVIIa-AT	P *
Carrier <i>TF</i> -603A allele	Carrier A	483	86.2 (82.4-90.1)	0.013
	GG	161	77.0 (71.5-83.0)	



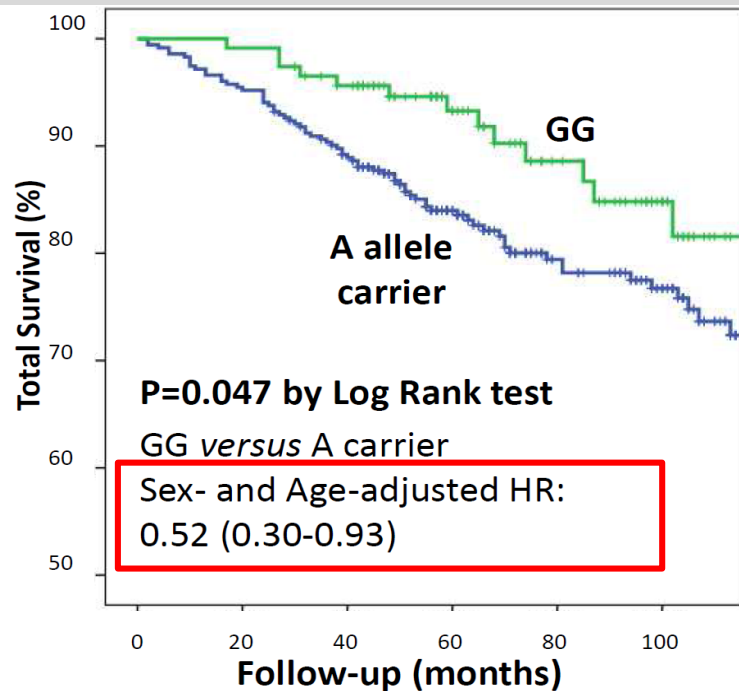
# GENETIC DETERMINANTS OF FVIIa-AT PLASMA LEVELS AND SURVIVAL

## TF

$\beta$ -coefficient -0.134 (-0.222 – -0.046)

with 95%CI

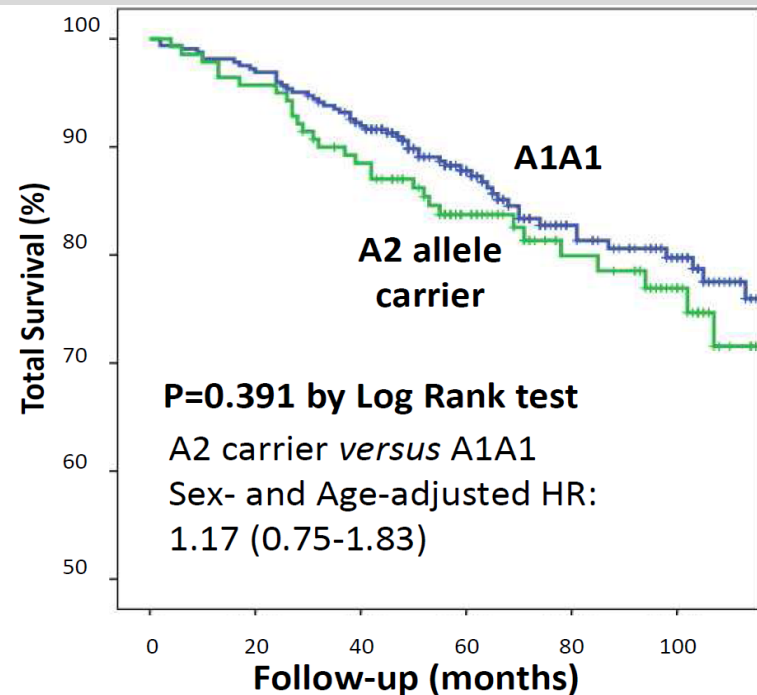
P=0.003



## FVII

-0.252 (-0.334 – -0.171)

P<0.001





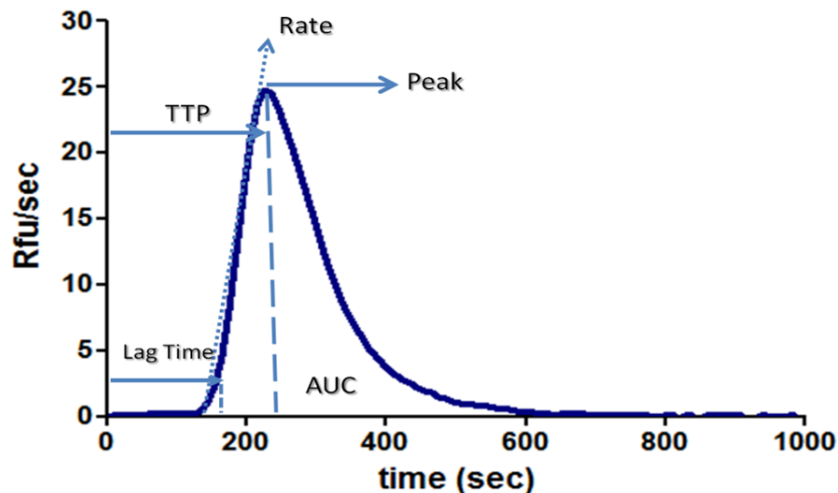
# What about function?



# Thrombin generation parameters and FVIIa-AT levels

	FVIIa-AT < 79 pmol L <sup>-1</sup> ( n = 122)	FVIIa-AT ≥ 79 pmol L <sup>-1</sup> ( n = 150)	p †
Lag time (s)	56.3 (54.1–58.0)	57.4 (55.7–59.2)	NS
Time to peak (s)	142.6 (139.8–146.9)	141.2 (138.4–144.0)	NS
Peak (Rfu/s)	6.36 (6.17–6.55)	6.82 (6.55–7.03)	0.009
ETP (Rfu)	854.1 (837.2–871.3)	906.9 (880.1–925.2)	0.001

The median level (79 pmol L<sup>-1</sup> ) was used as threshold value.



High plasma levels of FVIIa-AT are associated with an increased thrombin generation (Peak and ETP)

# FXa generation in CAD patients' plasma

Is FXa generation (at low TF concentration) able to reveal hypercoagulability features in relation to the FVIIa-AT concentration?

## Quartiles FVIIa -AT

First <59pM      Fourth >119pM



AUC (Rfu)

(P=0.007\*)

FXa generation is higher in patients with high FVIIa-AT complex levels in plasma

\*By ANOVA with polynomial contrasts for linear trend, confirmed after adjustment for traditional cardiovascular risk factors

# **FVIIa-AT complex levels, cardiovascular risk and hypercoagulability**

## **CONCLUSIONS(1)**

- ❑ High FVIIa-AT levels were associated with a greater risk of mortality in patients with stable CAD. A larger increase of FVIIa-AT levels was associated with non-fatal cardiovascular events during the follow-up**



**FVIIa-AT complex levels may predict long term outcomes  
in the setting of secondary prevention of CAD**

- ❑ High FVIIa-AT levels correlated  
with an increased thrombin generation  
with an increased FXa generation, particularly in the early phase**
- ❑ FVIIa-AT levels were strongly associated with the concentration of Apo C-III,  
a recognized risk factor for ischemic heart disease**

# **FVIIa- AT complex levels, genotypes and cardiovascular risk**

## **CONCLUSIONS(2)**

- ❑ F7 and TF Genotypes predict FVIIa-AT levels in plasma**
- ❑ Only TF Genotypes were associated with risk of mortality in patients with stable CAD**
- ❑ The chr 11 SNP rs964184 -tagging APOC3 locus and susceptibility to CVD- may influence FVIIa-AT levels (consistent with the effect on Apo C-III concentration)**



**Genetic and biochemical findings indicate FVIIa-AT complex levels as marker of hypercoagulability and cardiovascular risk mediated by TF and lipoprotein/lipid components**

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