

Tests of Global coagulation
Thromboelastometry
Thromboelastography
Thrombin generation

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Tissue Factor Concentration

- **Prothrombin time –**
 - Tissue factor at around 2000pm
 - Sensitive to ‘extrinsic coagulation pathway’

- **Thrombin Generation Tests –**
 - Tissue factor is often used at 1 to 5pm
 - Sensitive to all coagulation factors but (?XII) and XIII

Thrombin Generation Tests: Triggering Coagulation

- Low level tissue factor is often the trigger of choice
 - TF-VIIa activates factor IX to IXa
- IXa can be used as trigger of thrombin generation
- Other triggers: e.g. contact factor activators

Value of Thrombin Generation Tests

- May be sensitive to:
 - All clotting factor levels apart from XIII
 - Natural anticoagulants (including TFPI)
 - Pharmacological anticoagulants (e.g. LMWH)
 - Hypercoagulability – predict who will thrombose?
 - Hypocoagulability - prediction of who will bleed?

Thrombin Generation: Pre analytical variable

- Anticoagulant and concentration (+/-CTI)
- Material tested (PPP, PRP, frozen PRP)
- Platelet contamination (including microparticles)
- Contact activation
- Sample quality etc etc

Thrombin Generation Tests: a family of tests that detect thrombin formation

TG assays vary:

- **Trigger** e.g. IXa, TF
- **Phospholipid**
- **Sub sampling or continuous monitoring** to detect thrombin
- **Fibrinogen, chromogenic or fluorogenic** substrate
- **Units to recorded** (e.g. AU, total thrombin, peak thrombin)
- **Calibration system** may be used to measure the thrombin
- **Material tested** (e.g. defibrinated plasma or plasma or PRP)

α 2-macroglobulin bound thrombin

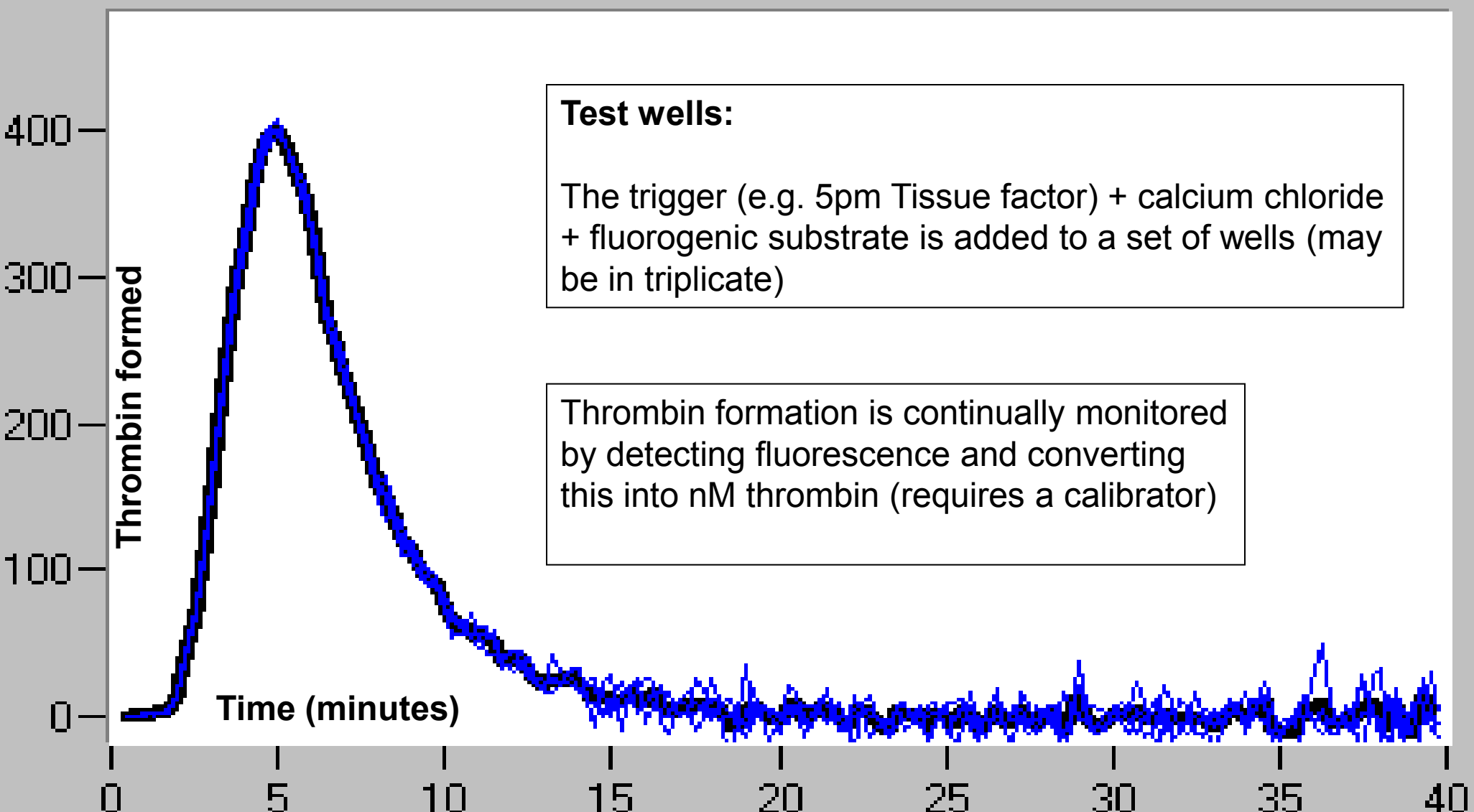
- α 2- macroglobulin-thrombin does not cut natural substrates
- But does cleave small chromogenic and fluorogenic substrates

α 2-macroglobulin bound thrombin

- **The Thrombinoscope assay uses an algorithm to discount this influence, but not all systems do**
- **The Thrombinoscope assay uses α 2-macroglobulin-thrombin as reference material to standardise the assay**

Thrombinoscope TG assay Is carried out on a Fluorometer





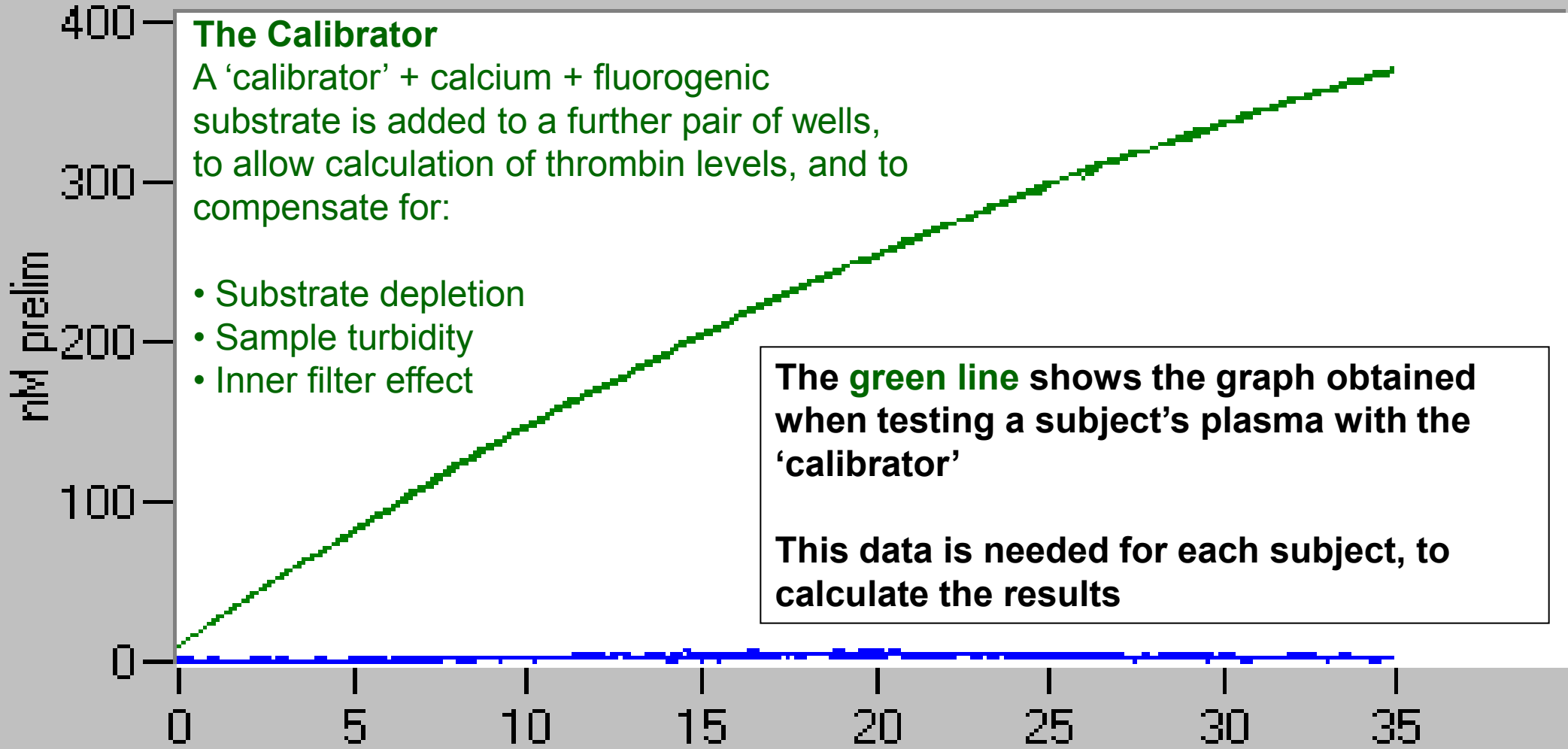
Test wells:
The trigger (e.g. 5pm Tissue factor) + calcium chloride + fluorogenic substrate is added to a set of wells (may be in triplicate)

Thrombin formation is continually monitored by detecting fluorescence and converting this into nM thrombin (requires a calibrator)

The Calibrator

A 'calibrator' + calcium + fluorogenic substrate is added to a further pair of wells, to allow calculation of thrombin levels, and to compensate for:

- Substrate depletion
- Sample turbidity
- Inner filter effect



The **green line** shows the graph obtained when testing a subject's plasma with the 'calibrator'

This data is needed for each subject, to calculate the results

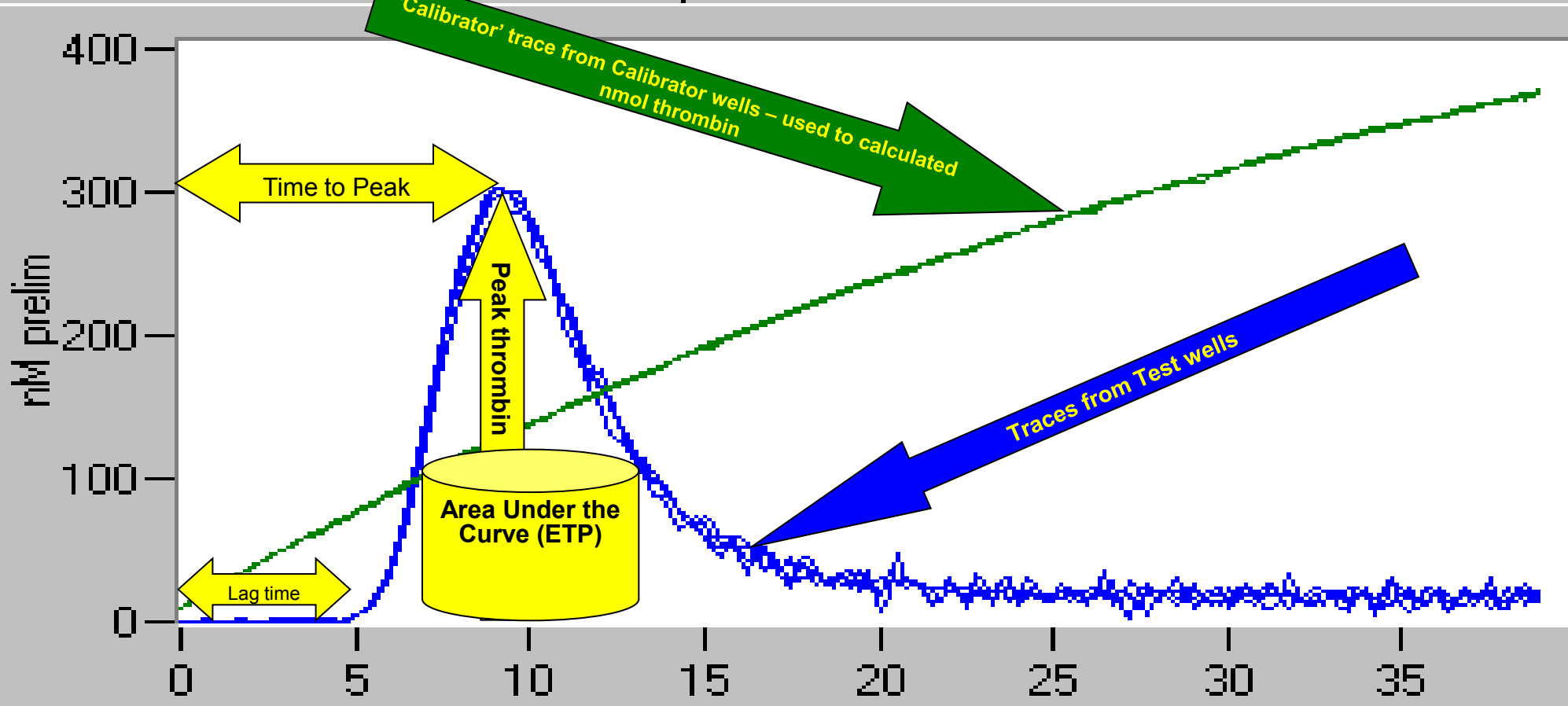
Thrombin Generation Test Curve Parameters (Thrombogram)

File View Settings Instrument



Plate in Plate out

0.5 pM TF Control 1



0.5 pM TF Hep 3

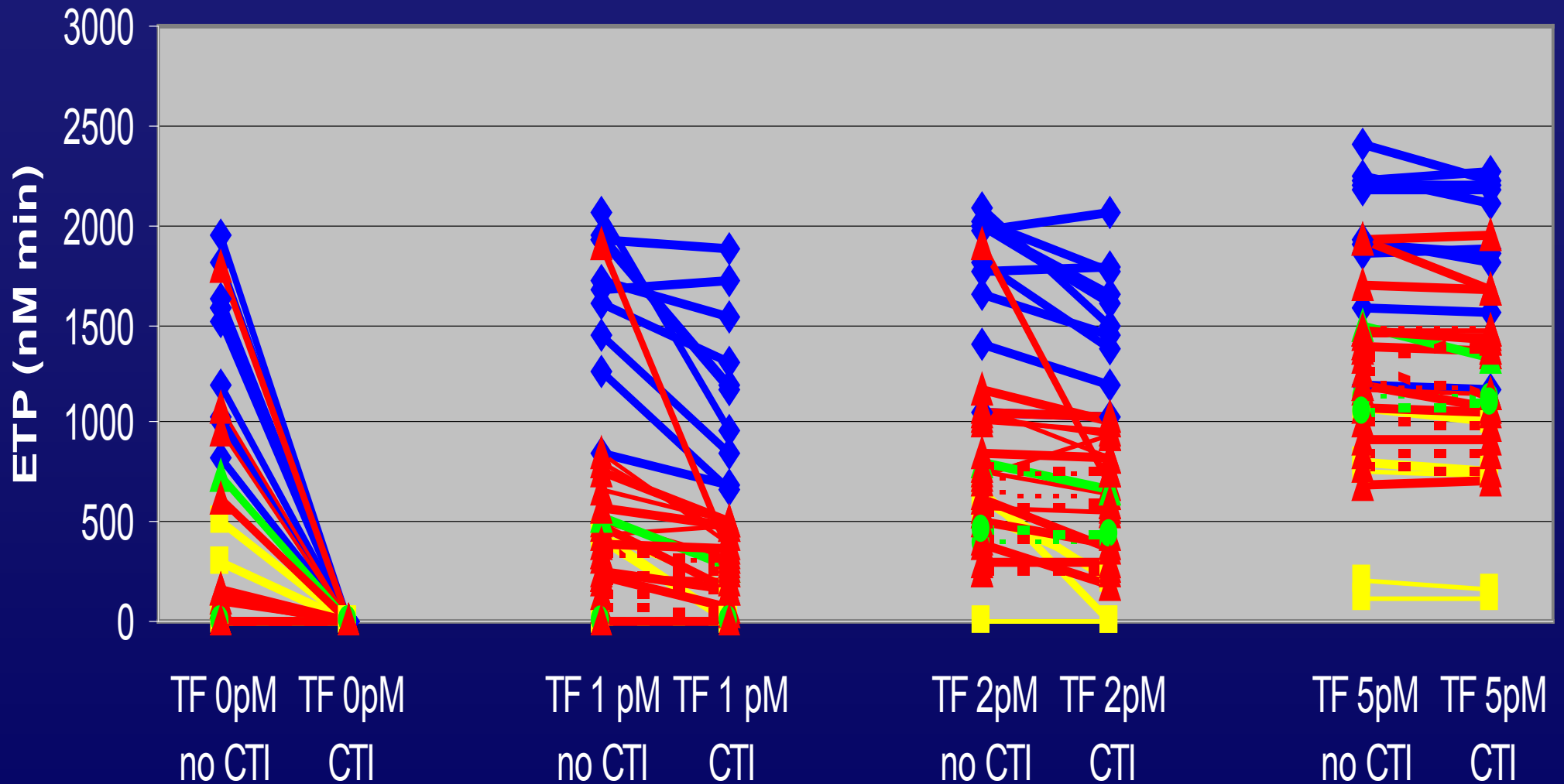
Thrombinoscope TG assay and the calibrator

- Each sample is normally measured in triplicate and the calibrator is tested in duplicate
- The thrombin calibrator (thrombin- α 2-M complex) allows calculation of thrombin levels in the sample
- The calibrator compensates for: sample turbidity, the inner filter effect, and substrate depletion

Thrombinoscope TG assay and contact activation (Luddington and Baglin, JTH, 2004)

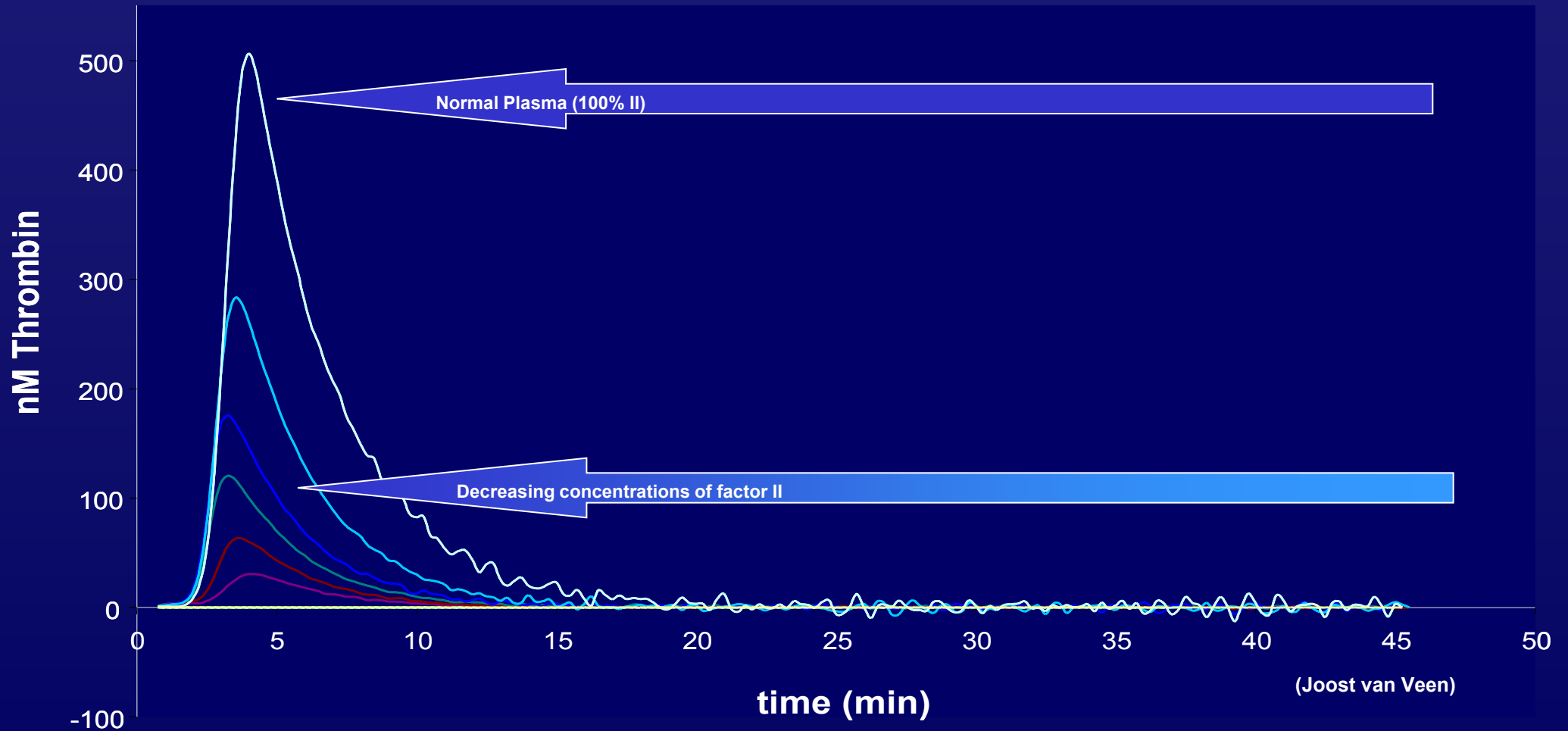
- Contact activation may influence thrombin generation at low TF concentration (≤ 2 pmol)
- Contact activation of XII can occur during venepuncture or sample storage
- Contact activation reduces sensitivity of assay when ≤ 2 pm TF is used

Corn Trypsin Inhibitor (CTI) and Tissue Factor concentration in the ETP assay

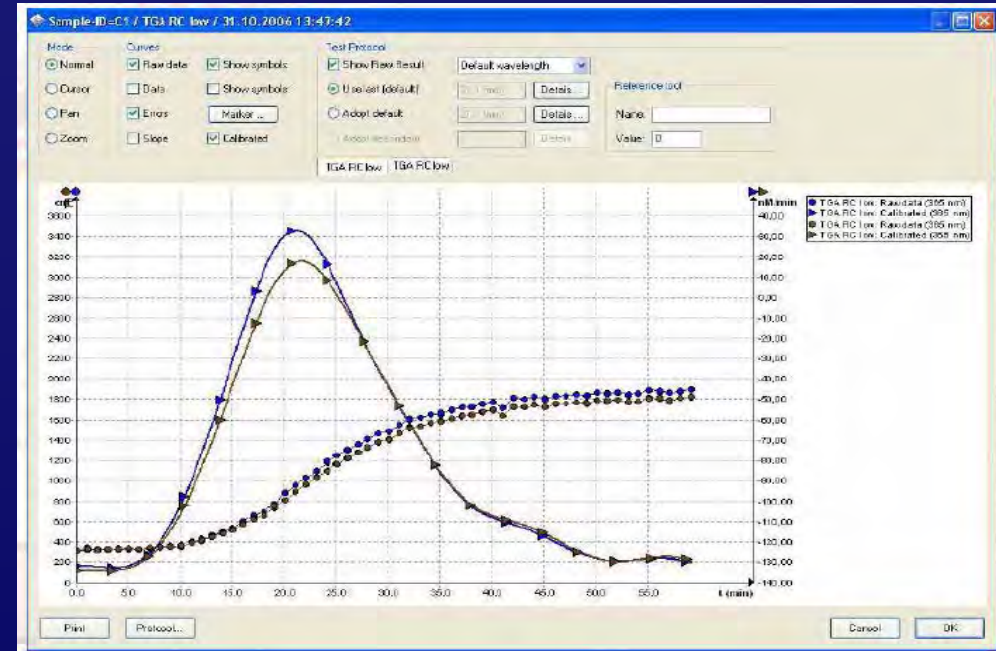


(Joost van Veen, 2005)

Thrombinoscope Thrombin Generation Assay: Factor II deficient plasma supplemented with normal plasma



Technoclon Ceveron ® alpha



Thrombin generation Assays

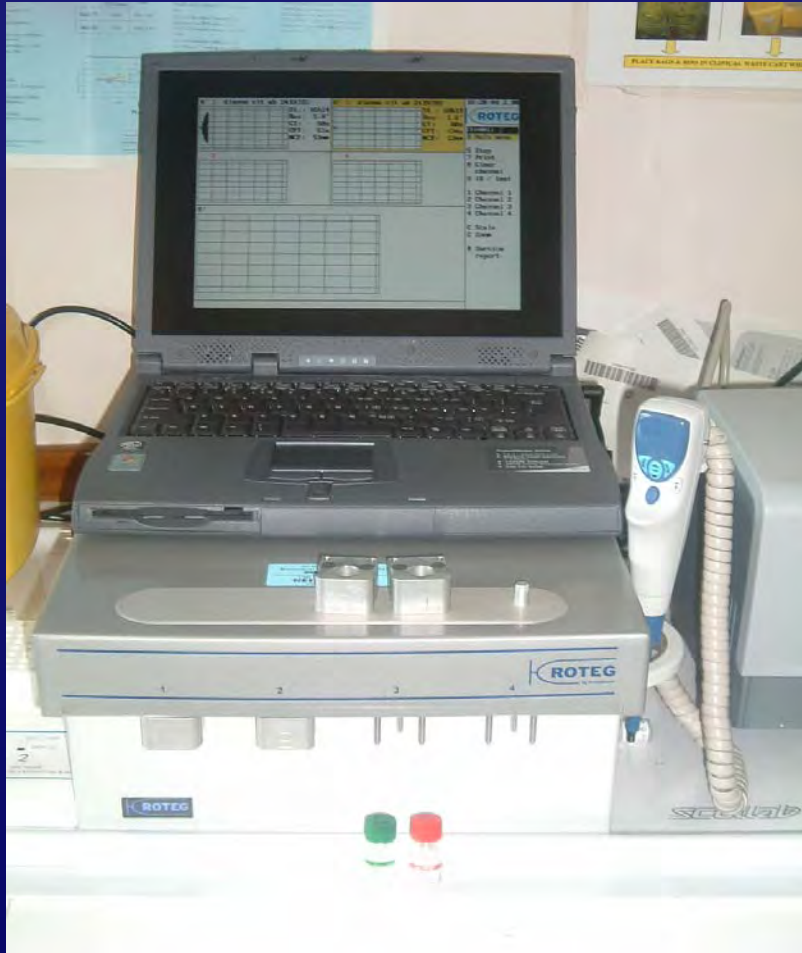
- Many assay principles
- Many assay formats
- A lot of publications with in-house assays
- A lot of publications with in-house/hybrid assays
- Not a lot of standardisation
- Is it time to standardise the assays?
 - Working group on thrombin generation

TEG[®] Analyser



Cup rotates pin is stationary

ROTEM[®] Device



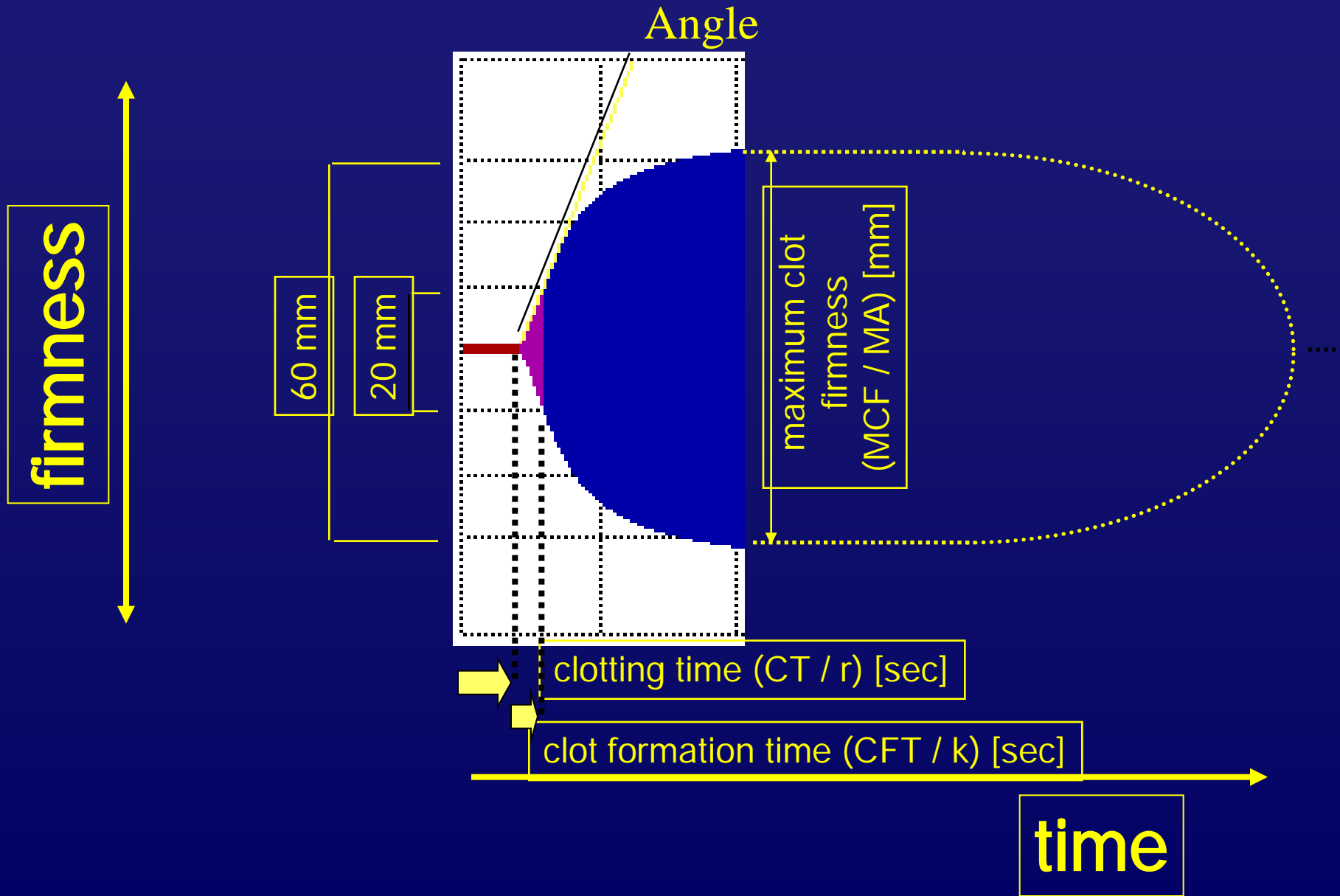
Pin rotates Cup is stationary



Parameters

	ROTEM	TEG
Time for clotting to begin	CT (sec)	R (min)
Time until clot is 20 mm	CFT (sec)	K (min)
Rate of clot growth	Angle (degrees)	Angle (degrees)
Clot firmness - trace width	MCF (mm)	MA (mm)

ROTEM / TEG analysis





NEQAS Survey data ROTEM[®] - Intem CT

(n= 7 -10)

Citrated Whole Blood Normal range 100 - 240 sec

	Median	Range	CV
Normal (1)	147 sec	117 - 161	10%
Normal (2)	145 sec	129 - 197	15%
FXI <1 U/dl	950 sec	596 - 1562	37%



NEQAS Survey data TEG[®] R

(n = 13 - 14)

	Median	Range	CV
Normal (1)	5.6 min	4.8 – 7.6	15%
Normal (2)	5.8 min	4.2 – 7.2	19%
FXI <1 U/dl	No clot	-	-



Agreement between results in different centres - Clot Firmness



	ROTEM (Extem) MCF (mm)		TEG MA (mm)	
	Range	CV	Range	CV
Normal (1)	36 -47	8 %	42-53	8%
Normal (2)	24-27	4.5%	16-61	33%
FXI <1 U/dl	30-36	6%	No clot	-

Fibrinogen in normal 2 2.5 g/l versus 5 g/l in normal 1