IMMUNOLOGICAL ASPECT IN COAGULATION DISORDERS (ESSAY)

THESIS

Submitted for Partial Fulfilment of Master Degree in PEDIATRICS



By

EBTISAM MOHAMED MAHMOUD ABD ALLA
M. B., B. Ch.

18, a20019

Supervised by

Professor Dra OMAR HELMY

Professor and Head of Pediatric Department

Professor Dra FOUAD BADRAWYY

Professor of Pediatrics

20502

Faculty of Medicine

Ain Shams University

1984

بسير عشراً التقوال من الراب المنافعة

" قائلوا سيخانلك لا علم لئنا الا ما علمتنا انبك ألمنك الفليلم الحكيلم "

صدق اللحة العظــــم

سورة البقارة : آلــهٔ ۳۳



ACKNOWLEDGEMENT

I wish to express may deep thanks and gratitude to professor Dr. Omar Helmy, Professor of pediatrics, Faculty of Medicine, Ain Shams University, for giving me the privilege of working under his supervision, for his encouragement, potience and unfailing guidance throughout the whole work.

I also express may thanks and gratitude to professor Dr. Fouad Badreawy, Assistant professor of pediatrics, Faculty of Medicine, Ain Shams University, for his continuous encouragement, valuable supervision and great cooperation throughout the whole work.

×

To everyone who participated in some way or another, to let this work come to such a final picture, I owe my thanks and gratitude.

- .
- F.D. P = Fibrin degradation products.
- PTT = Partial thromboplastim time.
- VIII:C = Antihemophilic factor proceagulant activity
- TGT = Thromboplasten generation test.
- AIDS = Acquired immune deficiency syndrom
- FFP = Fresh frozen plasma.
- Cryo. = cryoprecipitate
- DDAUP = 1-deamino 8-d- arginine vasopressim
- FEIRA = Factor VIII inhibitor by passing activity
- APCCS = Activated prothrombin- complex concentrates
- DIC = Disseminated intravascular coagulation.
- PA. IgM= platelet associated IgM.
- PA.IgG = platelet associated IgG.
- ITP = Idiopathic thrombocytopenic purpura.
- VIIIR: Ag= Factor VIII related antigen
- HMW kininogen = High molocular weight kininogen.

CONTENTS

	Page
- Introduction	1
- Aim of the work	2
- Blood coagulation	3
- The immune system	13
- Classification of coagulation disorders	21
- Congenital plasma factor deficiencies	22
- The hemophilias	22
- Clinical presentation of hemophilia	27
- Laboratory diagnosis	35
- Complications	39
- Immunologic aspect of hemophilia	45
. Acquired inhibitors in hamophilia A	45
. Acquired inhibitors in hemophilia B	47
 Other specific inhibitors of coagulation 	48
. Acquired innune deficiency syndrom	52
- Managment	56
- Other congenital coagulation factors deficiency	5 9
- Acquired coagulation factor deficiencies	72
- Coagulation disorders due to platelet destruc	12
tion - ITP	
. Humoral and cell-mediated immunity in ITP	77

		rage		
	- Drug induced immune thrombocytopenia	83		
	- Post transfusion prupura	85		
	- Neonatal immune thrombocytopenia	86		
~	Bleeding disorders caused by vascular	88		
	abnormalities: Autoimmune vascular purpura			
	- Allergic purpura	88		
		••		
	Summary	90		
-	References	92		
_	Arabic summery.			

INTRODUCTION

Introduction

Coagulation disorders are classified into three groups: Coagulation disorders due to deficiency of the coagulation factors, due to platelet destruction or due the vascular abnormalitis. The immunological aspect in these disorders are helpful in the managment of such cases. In cases of hemophilia the detection of factor VIII inhibitors are helpful in managed such cases. The immunological study is helpful in diagnosis, management and prevention of different disease. In ITP detection of IgG and IgA are essential to know the type of ITP and for proper managment of such cases.

X

AIM OF THE WORK

Aim of the work

The aim of this review is to classify and discuss the different types of congulation disorders.

The study of the immunological aspect of the congulation disorders are helpful in proper diagnosis as in case of ITP and proper managment e.g. proper managment of hemophilic patients with inhibitors specific to factor VIII.

BLOOD COAGULATION

Blood coagulation

The hemostatic process has three major components:

- 1- Integrity of the vascular rall and reaction of the blood vessels to injury.
- 2- Platelet activity, and
- 3- Coagulation of the blood (Philip, 1980).

Nomenclature of blood coagulation factors:

The problems of nomenclature have been partially solved by the development of an international standard nomenclature (Macfarlane, 1976).

Table (1) gives this recommended nomenclature.

Coagulation mechanism devided into three phases:

phase I deals with the formation of prothrombin activators and can be further subdivided into the intrinsic
and extrinsic clotting systems. Phase 2involves the
cleavage of prothrombin into intermediates, one of
which is thrombin. During phase 3 fibrinogen is converted to fibrin, and the clot is stabilized.

Table (1) Nomenclature and Synonyms for Coagulation Factors

Roman Numeral	Preiorred Descriptive Name	Synonyms
!	Fibrinogen	
N	Prothrombin	
Ш	Tissue factor	Thromboplastin
IV	Calcium ions	
٧	Proacceleun	Labita factor, accelerator globulin (AcG), thrombogen
VH	Proconvertin	Stable factor, serum prothrombin conversion accelerator (SPCA)
VIII	Antihemophilic factor (AHF)	Antihemophiko globulin (AHG) antihemophilio factor A, platelet cofector 1, thromboplastinogen
IX	Plasma thromboplastin component (PTC)	Christmas factor antihemophilic factor B, autoprothrombin II, platelet cofactor 2
. ×	Stuart factor	Prower factor, autoprothrombin III, thrombokinase
Χŧ	Plasma thromboplastin antecedant (PTA)	Antihemophilic factor C
XII	Hageman factor	Glass factor, contact factor
XHI	Fibrin stabilizing lactor (FSF)	Laki-Lorand factor (LLF), fibrinase, plasma transglutammase, fibrinok ges
_	Prekallikrein	Fletcher factor
_	HMW Kininogen	High molecular weight kininogen, contact activation cofector, Fitzgerald factor, Williams factor, Flaujeac factor, Reid factor, Washington factor

(wintrobe at al., 1981)

- 5 -Jan

Phase I: Intrinsic clotting system

The intrinsic system is responsible for the formation of a clot in plasma from which all tissue juices are excluded and from which blood cells other than platelets are removed. It involves factors XII, XI, X, IX, VIII, and V, platelet factor 3 and calcium. Clotting via the intrinsic system begins when factor XII is activated by contact with a foreign surface (Wilner et al., 1968). Factor XII a functions to activate factor XI. Neither activation of XII nor activation of XI requires calcium (james, 1975).

The next step in the intrinsic system is the activation of factor IX by the enzyme XIa, this reaction requires calcium, and IXa is a potent coagulant. The next reaction is a complicated one involving factor IX a, factor VIII, calcium, and the phospholipid derived from platelets, platelet factor 3 (Davie et al., 1969). The IX a - VIII - phospholipid complex activates factor X which in turn participates in the conversion of prothrombin to thrombin (Borton et al., 1967). Factor X a is the enzyme that is responsible for the cleavage of prothrombin and factor V and phospholipid only accelerate this reaction (jobin and Esnouf, 1967).