



Medical studies department

Relation of Vascular Endothelial Growth Factor and Insulin Like Growth factor-1 to the Development of Retinopathy in Premature Infants

Thesis

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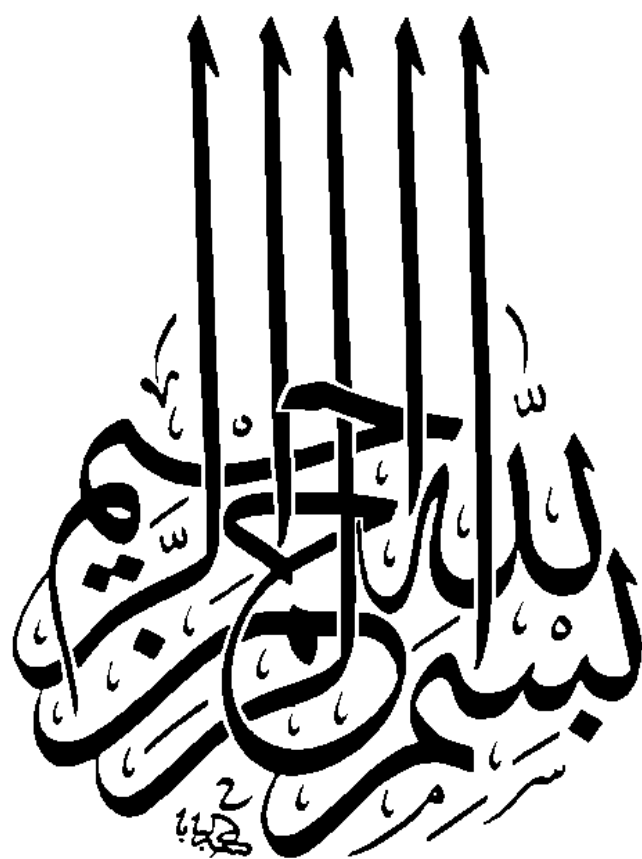
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LIST OF CONTENTS

	Page
ACKNOWLEDGEMENT	ii
LIST OF CONTENTS	iii
LIST OF TABLES.....	iv
LIST OF FIGURES	v
LIST OF ABBREVIATIONS	vii
ABSTRACT.....	1
INTRODUCTION	2
REVIEW OF LITERATURE	4
THE PREMATURE INFANT	4
THE EYE	13
RETINOPATHY OF PREMATURITY	21
INSULIN-LIKE GROWTH FACTORS (IGFS) (SOMATOMEDINS).....	44
INSULIN LIKE GROWTH FACTOR BINDING PROTEINS (IGF-BPS).....	49
VASCULAR ENDOTHELIAL GROWTH FACTOR.....	58
The VEGF Isoforms:.....	59
The VEGF Receptors:	60
Role of VEGF in Eye:	62
Role of VEGF in Retinopathy of Prematurity:	63
PATIENTS AND METHODS.....	68
RESULTS	74
DISCUSSION	91
SUMMARY	97
CONCLUSIONS.....	99
RECOMMENDATIONS	100
REFERENCES	101
APPENDIX 1 – NICU SHEET.....	124
APPENDIX 2 –MASTER SHEET	127
APPENDIX 3 – PATIENT SHEET FOR RETINOPATHY OF PREMATURITY	128
الملخص العربي	129

LIST OF TABLES

	Page
Table 1. High-risk infants	6
Table 2. Complications associated with preterm labor	10
Table 3. Neonatal problems associated with premature infants	11
Table 4. Anatomical and physiological particularities of premature eye	20
Table 5. Timing of first eye examination based on GA at birth	37
Table 6. ETROP classification	39
Table 7. Sex distribution of cases and controls	74
Table 8. Sex distribution of cases (Stage 1 and 2 versus stage 3 and 5)	75
Table 9. Comparison of neonatal anthropometric data between cases and controls	75
Table 10. Neonatal anthropometric data of cases (Stage 1 and 2 versus stage 3 and 5)	79
Table 11. Risk factors for ROP in cases and controls	80
Table 12. Comparison of some clinical data between cases and controls	81
Table 13. Clinical data of cases (Stage 1 and 2 versus stage 3 and 5)	82
Table 14. Comparison of cytokine serum levels between cases and controls	83
Table 15. Cytokine levels of cases (stage 1 & 2 versus stage 3 & 5)	84
Table 16. Multivariate logistic regression of the effects of the variables on ROP	85
Table 17. Sensitivity and specificity values for IGF-1 and VEGF.	85
Table 18. Correlations between IGF-1 and neonatal clinical data	86
Table 19. Correlations between IGF-1 and data concerning oxygen administration	88
Table 20. Correlations between VEGF and neonatal clinical data	88
Table 21. Correlation between VEGF and data concerning oxygen administration	88
Table 22. Correlation between IGF-1 and VEGF	89

LIST OF FIGURES

	Page
Figure 1 The New Ballard Scoring system	8
Figure 2 The eye at different stages of development	14
Figure 3 Diagrams showing the development of the ciliary body and iris (A, B)	16
Figure 4 Schematic drawing of zones of ROP	24
Figure 5 Stage 1 ROP with demarcation line	25
Figure 6 Stage 2 ROP consisting of a ridge	25
Figure 7 Stage 3 ROP consisting of a ridge with extra retinal fibrovascular proliferation	26
Figure 8 Stage 4 ROP tractional retinal detachment	27
Figure 9 Plus disease in ROP	27
Figure 10 Rush Disease	28
Figure 11 Regressed ROP	29
Figure 12 Color fundus photograph showing post laser ablation of the avascular retina	41
Figure 13 Structure of long IGF-1 molecule	46
Figure 14 Domain structure and homology of Insulin receptor and IGF-I receptor	48
Figure 15 The Insulin-like growth factors, their receptors, and their binding proteins	49
Figure 16 Schematic representation of the distinct binding of the members of the VEGF family to the 3 VEGF receptors	59
Figure 17 Molecular structure of the VEGF receptors	60
Figure 18 VEGF model of pathophysiology of ROP	64
Figure 19 Retcam 2 device	70
Figure 20 Sex distribution of cases and controls	74
Figure 21 Mean gestational age of cases and controls	76
Figure 22 Mean birth weight of cases and controls	76
Figure 23 Mean weight of cases and controls	77
Figure 24 Mean length of cases and controls	77

List of Figures

Figure 25	Mean head circumference of cases and controls	78
Figure 26	Neonatal anthropometric data of cases (stage 1 and 2 versus stage 3 and 5)	79
Figure 27	Median duration of stay in NICU for cases and controls	80
Figure 28	Risk factors for ROP in cases and controls	81
Figure 29	Comparison of some clinical data between cases and controls	82
Figure 30	Percentage distribution of cases between stage 1, 2, 3, and 5	83
Figure 31	Comparison of cytokine serum levels between cases and controls	84
Figure 32	Correlation between IGF-1 and Weight at Examination	86
Figure 33	Correlation between IGF-1 and Length	87
Figure 34	Correlation between IGF-1 and Head Circumference	87
Figure 35	Wide angle digital fundus image of the left eye for one of the cases showing zone 1 posterior ROP with Plus Disease. Zone 1 Stage 3 ROP	89
Figure 36	Wide angle digital fundus image of the left eye for the same case focused on supero temporal fibro vascular frond with neovascularization and peripheral ischaemic retina	90
Figure 37	Wide angle digital fundus image of the left eye for the same case three days post avastin injection and laser to the retinal periphery showing less dilatation and tortuosity of retinal vessels	90

LIST OF ABBREVIATIONS

AGA	: Appropriate gestational age
ALS	: Acid labile subunit
AAP	: American academy of pediatrics
AP-ROP	: Aggressive posterior retinopathy of prematurity
bFGF	: Basic fibroblast growth factor
BP	: Blood pressure
BPD	: Broncho pulmonary dysplasia
BUN	: Blood urea nitrogen
BW	: Birth weight
CBC	: Complete blood count
ChBF	: Chroidal blood flow
CO ₂	: Carbon Dioxide
CRP	: C-reactive protein
Cryo ROP	: Cryotherapy for retinopathy of prematurity
CSF	: Cerebrospinal fluid
DOB	: Date of birth
EEG	: Electroencephalogram
EGF	: Epidermal growth factor
ELBW	: Extreme low birth weight
ESR	: Erythrocyte sedimentation rate
ETROP	: Early treatment retinopathy of prematurity
FDP	: Fibrin degradation products
FGF	: Fibroblast growth factor
FiO ₂	: Flow of inspired oxygen
Flt-1	: Fms-related tyrosine kinase-1
GA	: Gestational age
GH	: Growth hormone
GHD	: Growth hormone deficiency
HC	: Head circumference
HR	: Heart rate
hGH	: Human growth hormone
IGF	: Insulin like growth factor

Abbreviations

IGFBP	: Insulin like growth factor binding protein
IOP	: Intraocular pressure
IRBP	: Interstitial retinal binding protein
IUGR	: Intra uterine growth retardation
IVH	: Intraventricular hemorrhage
kDa	: Kilodaltons
KDR	: Kinase insert domain receptor
LBW	: Low birth weight
LOC	: Level of consciousness
MSA	: Multiplication stimulating factor
MW	: Molecular weight
NBS	: New Ballard Score
NCPAP	: Nasal continuous positive airway pressure
ng	: Nanogram
NICU	: Neonatal intensive care unit
NJ	: Neonatal jaundice
NS	: Neonatal sepsis
NSILA	: Non suppressible insulin like activity
PaCO ₂	: Partial arterial CO ₂ tension
PaO ₂	: Partial arterial oxygen tension
PDA	: Patent ductus arteriosus
PDGF	: Platelet derived growth factor
pg	: Picogram
PGE ₂	: Prostaglandin E ₂
PN	: Post natal
PT	: Prothrombin time
PTT	: Partial thromboplastin time
PUFAS	: Poly unsaturated fatty acid
RBF	: Retinal blood flow
RDS	: Respiratory distress syndrome
RLF	: Retrolental fibroplasias
ROP	: Retinopathy of prematurity
RPE	: Retinal pigment epithelium
RR	: Respiratory rate

Abbreviations

SD	: Standard deviation
SGA	: Small gestational age
SGOT	: Serum glutamate oxaloacetate transaminase
SGPT	: Serum glutamate pyruvate transaminase
Sm	: Somatomedins
SpO ₂	: Oxygen saturation level
STOP-ROP	: Supplemental therapeutic oxygen for prethreshold Retinopathy of prematurity
TGF	: Tumor growth factor
TGF-B	: Tumor growth factor-beta
TNF	: Tumor necrosis factor
VEGF	: Vascular endothelial growth factor
VEGFR	: Vascular endothelial growth factor receptor
VLBW	: Very low birth weight
VPF	: Vascular permeability factor
Wt	: Weight
Wt at exam	: Weight at examination

ABSTRACT

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Relation of Vascular Endothelial Growth Factor and Insulin Like Growth Factor-1 to the Development of Retinopathy in Premature Infants

Background: Survival of premature infants in Egypt has been increased in the past few years due to advances in antenatal and neonatal care. This has resulted in a population of infants at high risk of developing retinopathy of prematurity (ROP).

Objective: To evaluate the role of cytokines (Insulin Like Growth Factor-1 “IGF-1” and Vascular Endothelial Growth Factor “VEGF”) in serum of premature infants as possible diagnostic markers for ROP and to assess the risk factors for the occurrence and severity of ROP such as birth weight, gestational age, oxygen therapy ...etc.

Methods: Eighty three premature neonates who were admitted to the neonatal intensive care unit (NICU) of Almaza charity neonatal care unit in Cairo were included in this study. They were classified into two groups: those developing ROP (n = 34) and those without ROP (n=49). The ROP group was subdivided to: mild cases (those with stages I and II ROP) and severe cases (those with stages III and V ROP). All babies were examined during their stay in the NICU by the attending staff and also ophthalmic examination was performed during incubation to detect ROP. We obtained serum from each infant at 4 to 6 weeks postnatal age for estimation of IGF-1 and VEGF levels.

Results: Analysis of various risk factors for development of ROP showed that small gestational age (GA), low birth weight, prolonged incubation duration, oxygen therapy, respiratory distress syndrome (RDS) and neonatal jaundice were significant risk factors for ROP, while regarding severity of ROP, neonates having respiratory distress syndrome and those with small head circumference were found to be at higher risk of developing severe ROP. Univariate statistical analysis revealed that low IGF-1 and high VEGF serum levels can be useful as indicators in ROP screening but as regards severity they were not predictive markers.

Conclusions: IGF-1 and VEGF serum levels in premature infants could be useful indicators in ROP screening. Elevated VEGF serum level helps to predict the probability of suffering from the illness.

Key words: IGF-1, VEGF, retinopathy of prematurity, risk factors.

INTRODUCTION

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Retinopathy of prematurity has been identified in 1984 by the Cryo-ROP cooperative group, as a retinal vasoproliferative condition that evolves into five stages. Alongside these stages, other destructive changes also occur inside the eye. The destructive activity is known as “plus disease”. The signs of plus disease include: engorgement and tortuosity of the posterior pole retinal vessels, iris vessels engorgement, pupil rigidity and vitreous haze (*Cryo-ROP, 2001*).

The blood vessels in the retina of premature and/or low birth weight infants are immature and underdeveloped. Following delivery, the blood vessels continue to grow and spread throughout the retina. These abnormal blood vessels are fragile and can leak scarring the retina and pulling it out of position leading to retinal detachment (*Stout and Stout, 2003*). Retinopathy of prematurity is an important cause of childhood blindness worldwide (*Brian and Neil, 2009*).

Various risk factors to which the neonates are exposed, i.e. oxygen therapy, apnea, anemia, etc... may aggravate the insult to which the under developed or premature eye is exposed to (*Kim et al., 2004*).

It has been proposed that vasculogenesis is the result of complex interactions between growth factors (cytokines like IGF-1 and VEGF) produced both locally and systemically which stimulate or inhibit differentiation, proliferation, migration, and maturation of endothelial cells. This process is incriminated in the development of ROP (*Villegas et al., 2006*).

IGF-I is critical to normal retinal vascular development, and its deficiency is associated with the lack of vascular growth that sets the stage for subsequent hypoxia-driven proliferative ROP. In addition, linking IGF-I and VEGF, it was found that IGF-I receptor activation controls maximum VEGF activation of the endothelial cell survival pathway. Low IGF-I might be used to predict later development of ROP (*Lofqvist et al., 2006*).

Findings indicate that VEGF, in addition to its function as an angiogenesis factor, may also act as a survival factor for newly formed capillaries in the developing retina and suggest an important role for VEGF in the pathogenesis of human ROP (*Smith, 2008*).

Aim of The Study:

1. We aimed to evaluate the role of cytokine levels (IGF-1 and VEGF) in serum of premature infants as possible diagnostic markers for ROP.
2. We also aimed to analyze other factors which may act as risk factors for occurrence and severity of ROP like birth weight and gestational age.