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Poster Board 0311 PLASMA &-THROMBOGLOBULIN AND PLATELET FACTOR 4 LEVELS IN CARDIAC VALVE PROSTHESIS P5-079

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King's Gollege hospital measure councer, _____ Thromboembolic complications occur frequently in patients who have undergone cardiac valves replacement and platelets are known to be actively involved in the pathogenesis of such ō thrombi. A method of in-vivo assessment of platelet function would be useful in the management of such patients. BTG and PF4 levels, the indicators of platelet release read tion in-vivo, were measured in 100 patients who had cardiac valve replacement at least size months previously; Group A-54 patients had porcine heterograft, Group B-32 patients had months previously; <u>Group A-54</u> patients had porcine heterograft, <u>Group B-32</u> patients had a disc values and <u>Group C-14</u> patients had double value replacement. Findings of these pati-ients were compared with 50 controls. In the control group, the mean &TG was 27.6mg/ml, and PF4 9.0 mg/ml. In each of the three groups of operated patients, both mean &TG and gr P 4 levels were significantly raised (p < 0.05). <u>Group A 61.5</u> mg/ml and 26.5 mg/ml, <u>Gases studied, 57</u> involved mitral, 29 aortic and 14 multiple valve replacement. No sign ificant differences were observed in &TG or PF4 plasma levels with the different type of valve involvement. The clinical implications of these results will be discussed. months previously; <u>Group A</u>-54 patients had porcine heterograft, <u>Group B</u>-32 patients had disc values and <u>Group C</u>-14 patients had double value replacement. Findings of these patients were compared with 50 controls. In the control group, the mean BTG was 27.6ng/ml, to and PE(9 0 ng/ml. In each of the three arrows of control group, the mean BTG was 27.6ng/ml, to and PE(9 0 ng/ml. In each of the three arrows of control group.

P5-031 0312 FACTOR IX IN THE HUMAN FETUS

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Factor IX activity and factor IX antigen were determined in plasma from five male fetuses of gestational age 17-22 weeks. The fetuses were obtained from women undergoing abortions for medico-social reasons. The level of factor IX activity was between 0.04 and 0.05 units/ml in all five fetuses. Factor IX antigen was determined by the electroimmunoassay technique of Laurell using a precipitating rabbit antiserum to factor IX. The lower limit of detectability of the electroimmunoassay was reduced from about 0.12 units/ml to 0.02 units/ml by incubating the agarose gels following the electrophoresis with a peroxidase conjugated swine antiserum to rabbit IgG immunoglobulins. The three eldest fetuses had levels of factor IX antigen between 0.06 and 0.08 units/ml, whereas factor IX antigen could not be detected in the two youngest fetuses (twins of gestational age 17 weeks). The results indicate that the determination of factor IX antigen in fetal plasma may become of value for prenatal diagnosis of hemophilia B-.

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