1206 DO ORAL ANTICOAGULANTS ENHANCE ANTI Xa ACTIVITY?

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In vivo studies showed(1)(2) in dogs and rabbits, that the antithrombotic protection is clearly related to AntiXa enhanced activity, than to a particular KCCT level (3).

Dicoumarins do not prevent experimental thrombous development as heparin (even bellow 5% of K dependent factors concentration and more than 95" KCCT). Anti Xa measurement was practiced on 20 humans and 20 dogs, both following anticoagulant (coumarin) treatments. (Biggs technique, 1970, but using unheated test plasmas, and not modifying AntiXa reactivity). It has been claimed that oral anticoagulants enhance AntiXa reactivity(4) Results showed no difference between normal humans and dogs plasmas, and anticoagulant treated groups, and this might be related to the different measurement techniques used.

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1207 (Programme alteration: please see Abstract no. 0765)

1208 HEPARINS AND OTHER MUCOPOLISACARIDS COMPARISON BETWEEN ANTITHROMBO-TIC AND ANTICOAGULANT EFFECTS

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Lung heparins, mucosal heparins, condroitin sulfate A, M945 (Syntex Arg) were studied in their anticoagulant activity measured in USP or KCCT, related to their AntiXa potentiating effect (antithrombotic)

Measurements were made using Biggs technique, and a personal modification using factor X defficitary plasmas (barium sulfate adsorbed plasmas), 0.15 ionic strength, and measuring residual Xa on VII-X defficitary plasma Wide differences were found between the different compounds, in their Anti Xa/KCCT ratios (or USP).

Different pools resulted in different changes in KCCT, so, the AntiXa/KCCT ratios, varied between pools.

The ratio grew particularly when some compounds (N945) were used in vivo

The ratio grew particularly when some compounds (1947), where with nearly no changes in KCCT, the AntiXa potency obtained was the corresponding to 0.2UI/ml of heparin in plasma