

# Factor V Short and TFPI

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# Characterization of a novel autosomal dominant bleeding disorder in a large kindred from east Texas

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## ➤ Proband

- 35 year old male
- Bleeding diathesis since childhood
  - Bruising, epistaxis, bleeding from gums, significant bleeding after trauma (requiring transfusion)
  - No haemarthrosis or spontaneous haematoma
- Siblings presented with similar bleeding symptoms, sisters +menorrhagia
- Classified as a moderately severe bleeding disorder

Laboratory test	Proband data	
PT, seconds	18.4	} Prolonged
aPTT, seconds	48.7	
Fibrinogen, ( $\mu$ mol/L) (mg/dL)	6.1 (208)	} Normal
Factor II, %	94	
Factor V, %	111	
Factor VII, %	70	
Factor VIII, %	59	
Factor IX, %	74	
Factor X, %	81	
Factor XI, %	76	
Factor XII, %	82	
Thrombin time, seconds	20.1	
Antithrombin III function, %	90	
Antithrombin III antigen, mg/L (mg/dL)	260 (26)	
vWF, ristocetin cofactor	54	
Bleeding time, minutes	6.0	
Platelet number and aggregation	Normal	
RVVT, seconds	26.6	
Protein C, %	68	
Activated protein C resistance, ratio	2.8	

Control plasma, %	Patient plasma, %	aPTT (immediate), seconds	aPTT, (1 h), seconds
100	0	28.7	30.7
80	20	28.2	31.1
60	40	30.1	34.6
50	50	29.7	33.3
40	60	32.7	35.5
20	80	33.1	39.7
0	100	42.1	47.3

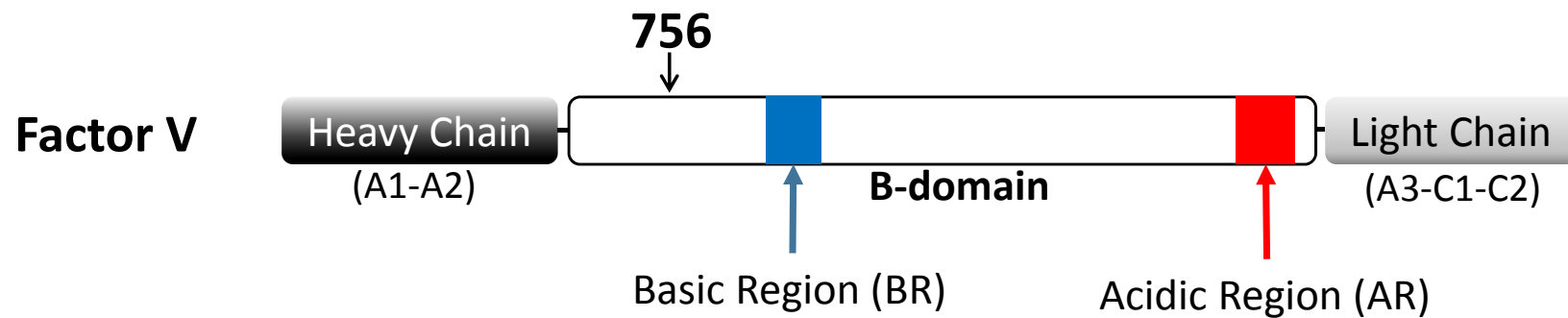
The presence of a novel slow-acting, soluble coagulation inhibitor was proposed

Genetic analysis revealed that all affected individuals had a novel *F5* mutation

- A→G at nucleotide 2440 (Exon 13)
- S→G at amino acid 756

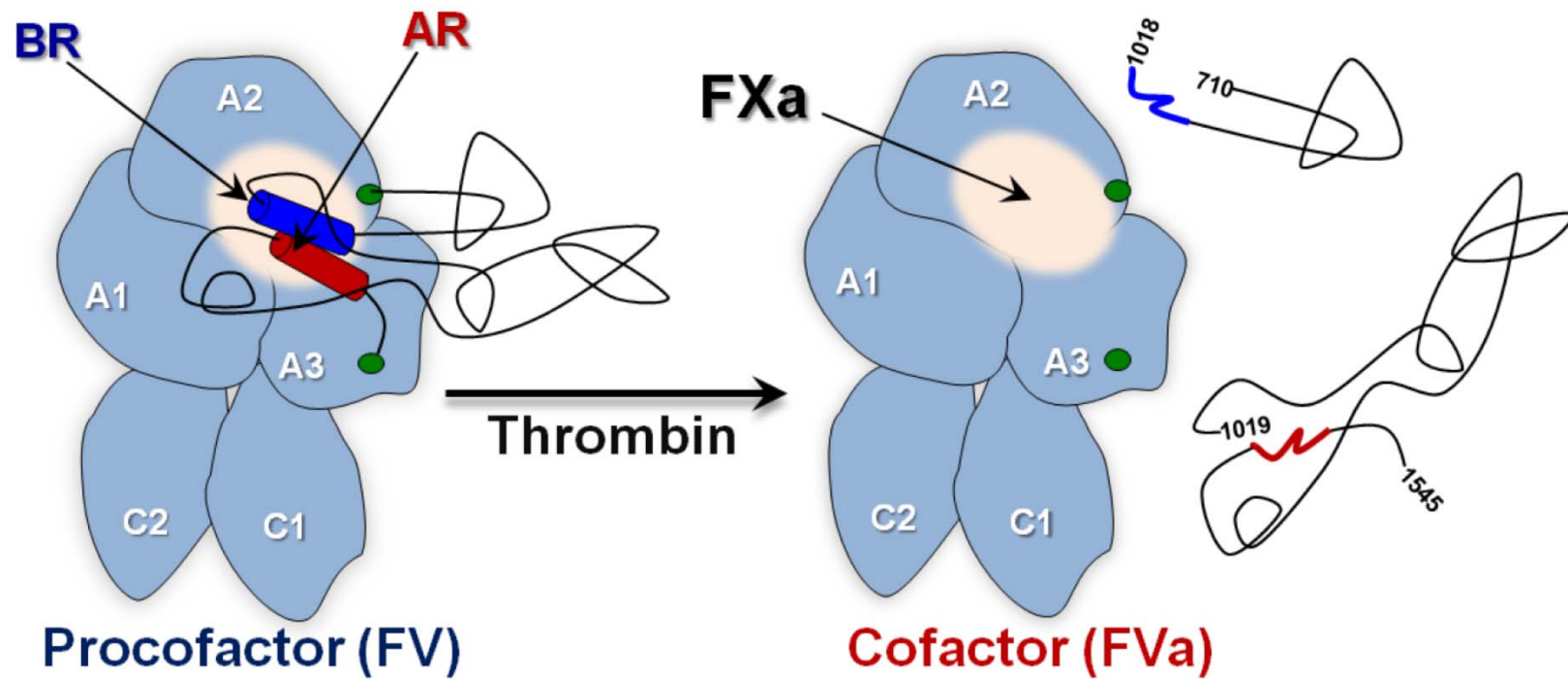
# Where is this mutation?

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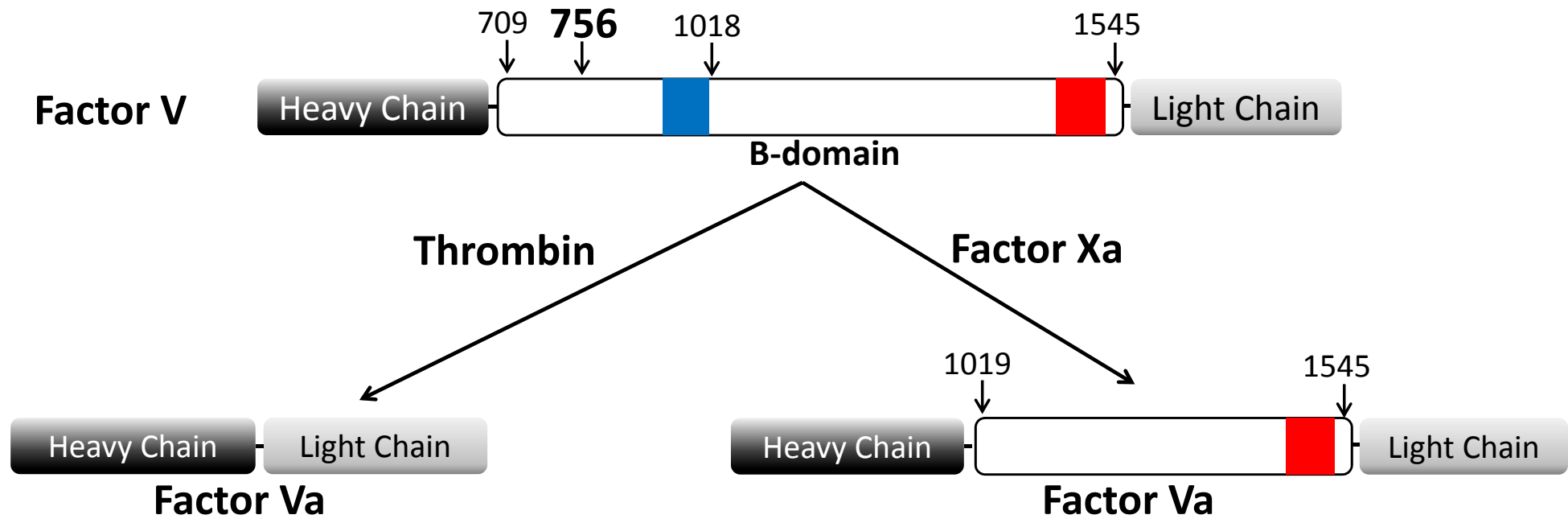


The basic and acidic regions bind to keep Factor V in an inactive state

# Factor V activation



# Factor V activation *in vivo*



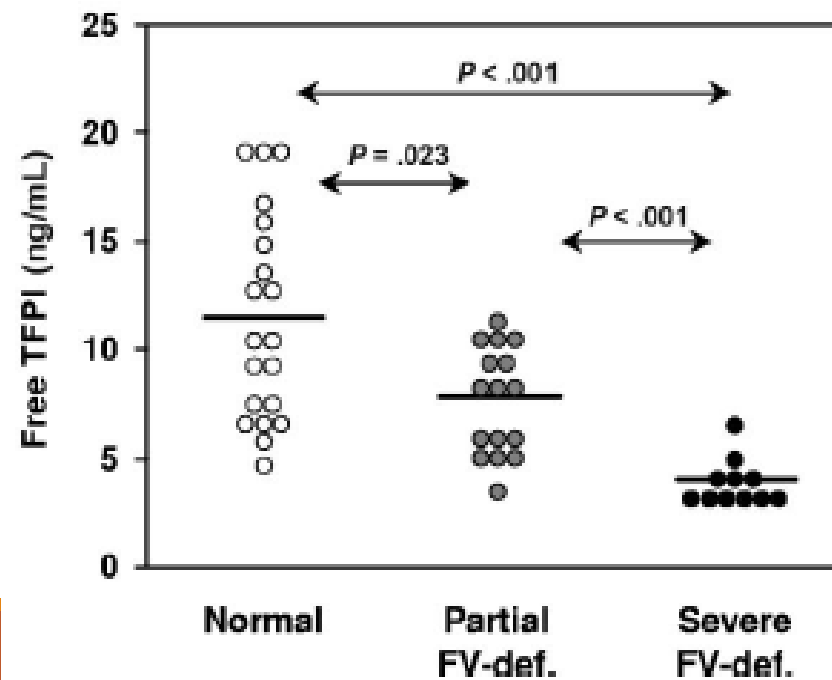
Both forms of fVa have equal co-factor activity

# A link between Factor V and TFPI.....

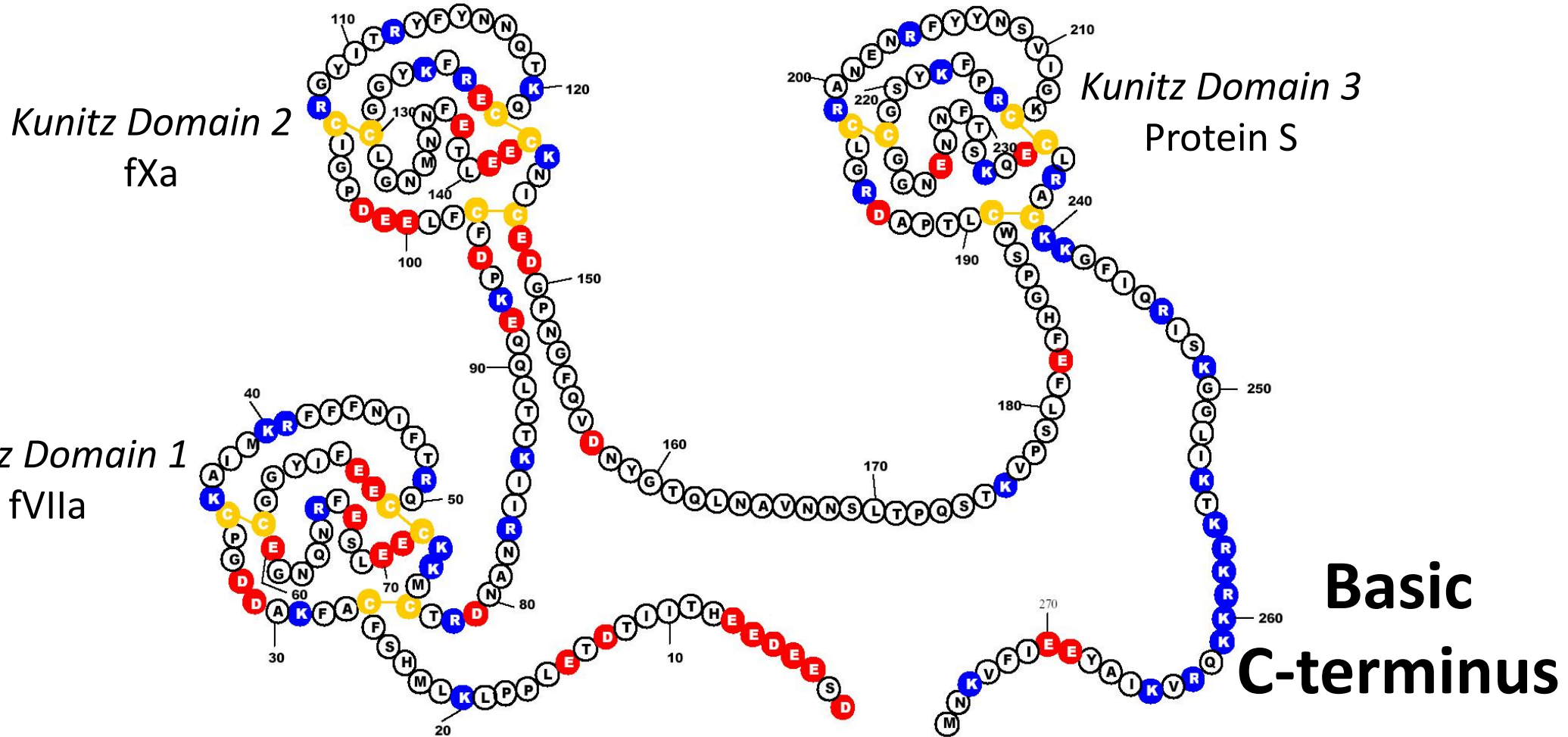
Low plasma levels of tissue factor pathway inhibitor in patients with congenital factor V deficiency

Connie Duckers,<sup>1</sup> Paolo Simioni,<sup>2</sup> Luca Spiezia,<sup>2</sup> Claudia Radu,<sup>2</sup> Sabrina Gavasso,<sup>2</sup> Jan Rosing,<sup>1</sup> and Elisabetta Castoldi<sup>1</sup>  
BLOOD, 1 NOVEMBER 2008 • VOLUME 112, NUMBER 9

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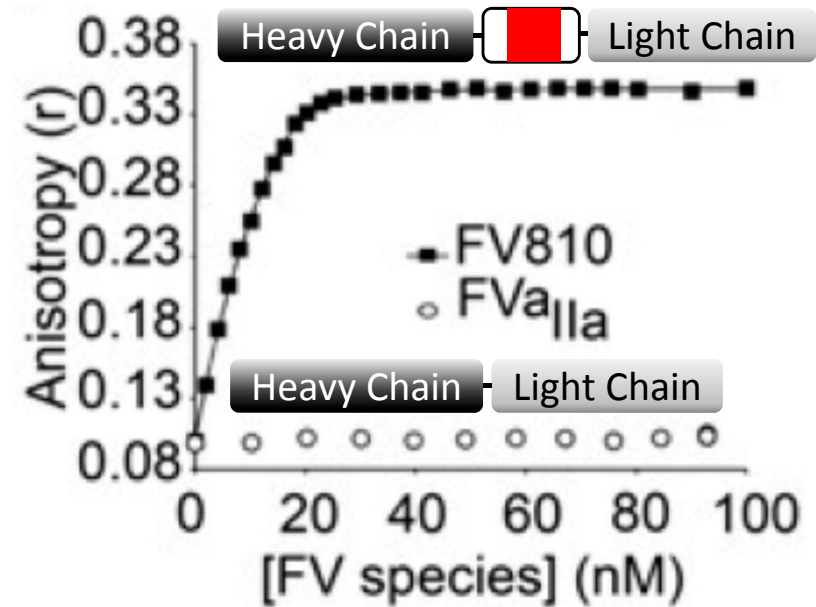
# Tissue Factor Pathway Inhibitor alpha (TFPI $\alpha$ )





### TFPI $\alpha$

Group	Species	Sequence
Primates	Human	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>R</b>
	Chimpanzee	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>R</b>
	Orangutan	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>R</b>
	Rhesus Monkey	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>R</b>
	Bushbaby	KGE <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>P</b>
	Tarsier	KGR <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>I</b> <b>K</b> <b>G</b> <b>K</b> <b>Q</b> <b>T</b>
	Gorilla	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>R</b>
Large Mammals	African Elephant	SKE <b>F</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>Q</b> <b>V</b>
	Giant Panda	KGE <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>T</b> <b>V</b>
	Cow	KEG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>M</b> <b>Q</b> <b>R</b>
	Yak	KEG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>••••</b>
	Horse	KEG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>
	Alpaca	KEG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>Q</b> <b>P</b>
	Pig	KDG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>
	Dog	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>T</b>
	Cat	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>K</b> <b>N</b> <b>K</b> <b>S</b> <b>Y</b> <b>I</b>
	Rodents	Mouse
Rat		SSK <b>R</b> <b>A</b> <b>K</b> <b>T</b> <b>Q</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>S</b> <b>F</b> <b>V</b>
Squirrel		KEG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>
Kangaroo Rat		KQG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>N</b> <b>Q</b> <b>P</b>
Mars.	Opossum	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>S</b>
	Tasmanian Devil	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>
Miscellaneous	Platypus	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>L</b> <b>P</b>
	Shrew	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>
	Rabbit	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>
	Ferret	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>R</b>
	Hedgehog	KGE <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>Q</b> <b>Q</b> <b>S</b>
	Dolphin	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>
	Armadillo	SKG <b>L</b> <b>I</b> <b>K</b> <b>N</b> <b>K</b> <b>K</b> <b>M</b> <b>M</b> <b>K</b> <b>Q</b> <b>P</b> <b>V</b>
	Two-Toed Sloth	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>K</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>R</b>
	Flying Fox	KGG <b>L</b> <b>I</b> <b>K</b> <b>T</b> <b>R</b> <b>R</b> <b>R</b> <b>R</b> <b>K</b> <b>K</b> <b>Q</b> <b>P</b>



# Back to the East Texas bleeding disorder

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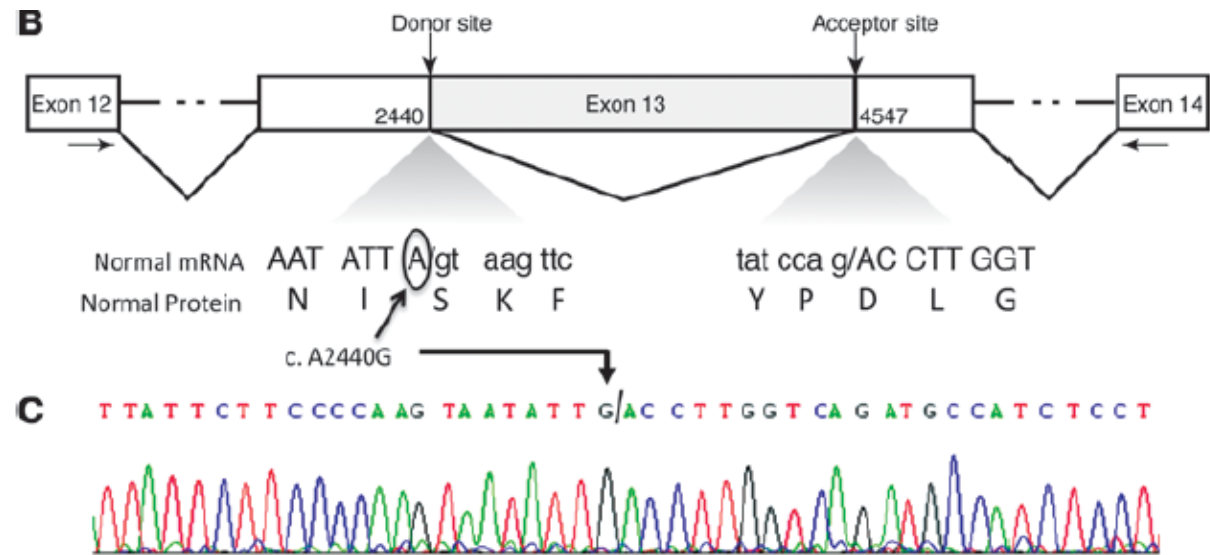
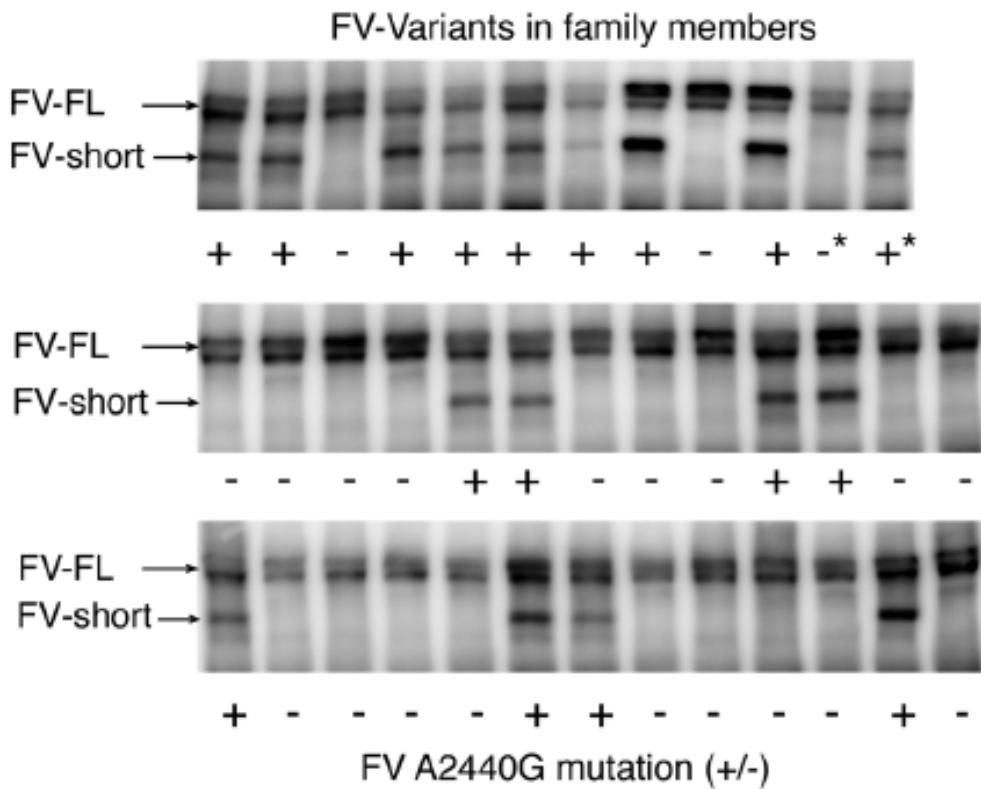
## Coagulation factor $V^{A2440G}$ causes east Texas bleeding disorder via TFPI $\alpha$

Lisa M. Vincent,<sup>1</sup> Sinh Tran,<sup>2</sup> Ruzica Livaja,<sup>2</sup> Tracy A. Benseid,<sup>1</sup>  
Dianna M. Milewicz,<sup>1</sup> and Björn Dahlbäck<sup>2</sup>

<sup>1</sup>Department of Internal Medicine, Division of Medical Genetics, University of Texas Health Science Center at Houston, Houston, Texas, USA.

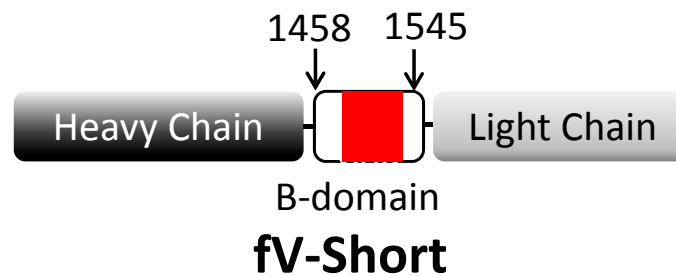
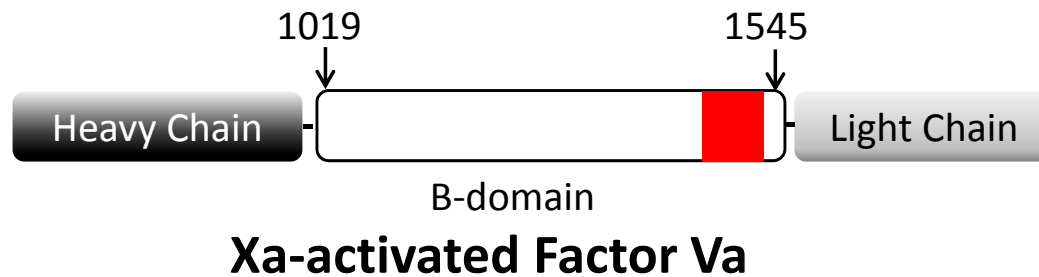
<sup>2</sup>Department of Laboratory Medicine, Clinical Chemistry, Lund University, University Hospital, Malmö, Sweden.

# Affected individuals produce FV-short

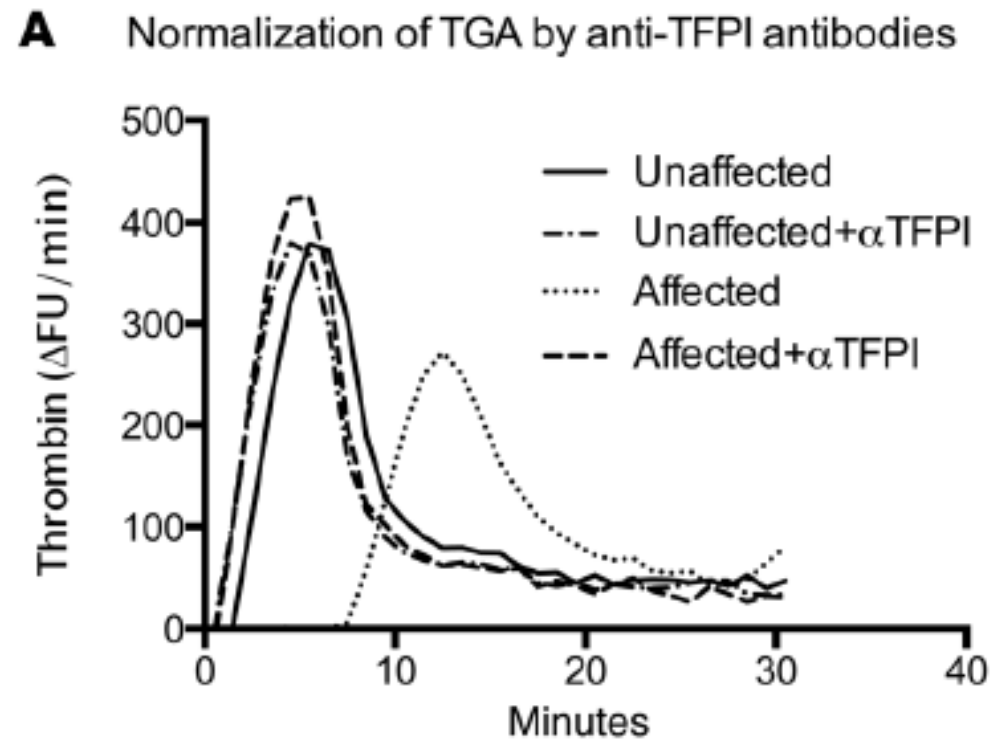
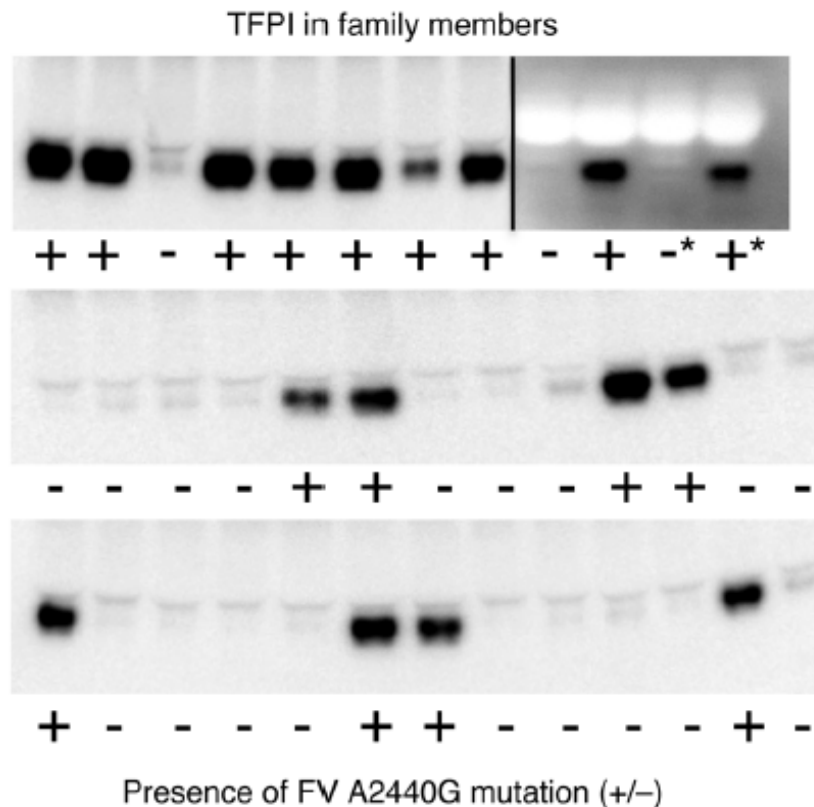


# The FV-Short protein resembles fXa-activated fV

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# Affected individuals have elevated plasma TFPI $\alpha$



# Potential mechanisms of bleeding

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- Binding of TFPI $\alpha$   $\rightarrow$  FV leads to  $\uparrow$  circulating half-life
- Elevated plasma TFPI $\alpha$  directly inhibits TF-fVIIa
- TFPI $\alpha$  protects aa 1545 in FV-Short from proteolytic cleavage
- fVa-bound TFPI $\alpha$  is an excellent inhibitor of “early” Prothrombinase

# Factor V Amsterdam $\approx$ Factor V East Texas

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## **A novel mutation in the *F5* gene (factor V Amsterdam) associated with bleeding independent of factor V procoagulant function**

Marisa L. R. Cunha,<sup>1,2</sup> Kamran Bakhtiari,<sup>1</sup> Jorge Peter,<sup>1</sup> J. Arnoud Marquart,<sup>1</sup> Joost C. M. Meijers,<sup>1,3</sup> and Saskia Middeldorp<sup>2</sup>

1822

BLOOD, 12 MARCH 2015 • VOLUME 125, NUMBER 11

### **Key Points**

- A novel gain-of-function mutation in factor V leading to increased levels of TFPI and bleeding was identified by whole exome sequencing.
- Factor V Amsterdam (*F5 C2588G*) resembles the mutation (*F5 A2350G*) leading to East Texas bleeding disorder.

# Summary

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- Factor V East Texas and Factor V Amsterdam
  - Moderately severe bleeding disorders
  - Prolonged PT and/or aPTT
  - Mutation in exon 13 produces a novel donor splice site, resulting in truncated *F5* mRNA
    - In-frame deletion of a large portion of the region encoding the fV B-domain
  - Produce fV-Short, in which the BR of the B-domain is deleted but the AR is retained
  - Binds TFPI $\alpha$  with high affinity, resulting in markedly elevated plasma TFPI $\alpha$
  - Indirect, gain-of-function mutations
  
- Investigations of the interactions between FV and TFPI $\alpha$  highlight a potential role of TFPI in thrombotic disease



# Acknowledgements

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- Mast Lab, Blood Research Institute, Blood Center of Wisconsin

