بسم الله الرحمن الرحيم





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Haemostasis

<u>At the end of this lecture student should</u> <u>be able to:</u>

- 1. Recognize different stages of hemostasis
- 2. Describe formation and development of platelet
- 3. Describe the role of platelets in hemostasis.
- 4. Recognize different clotting factors
- 5. Describe the cascade of clotting .

Haemostasis

- 5. Describe the cascade of intrinsic pathway.
- 6. Describe the cascade of extrinsic and common pathways.
- 7. Recognize the role of thrombin in coagulation
- 8. Recognize process of fibrinolysis and function of plasmin

Hemostatic Mechanisms:

Mechanisms:

- Vessel wall
- Platelet
- Blood coagulation
- Fibrinolytic system

Clotting Factors

Factors	Names	 	-Plasma
I	Fibrinogen		 White blood cell Platelets
II	Prothrombin		-Red blood cells
III	Thromboplastin	U	
IV	Calcium		
V	Labile factor	Circula	ate
VII	Stable factor	in plas	ma tive
VIII	Antihemophilic factor A	sate	
IX	Antihemophilic factor B		
×	Stuart-Power factor		
XI	Plasma thromboplastin antecedent		
	(PTA)		
XII	Hagman factor		
XIII	Fibrin stablizing factors		



The Intrinsic Pathway











Thrombin

- Thrombin changes fibrinogen to fibrin
- Activates factor V and factor XIII
- Thrombin is essential in platelet morphological changes to form primary plug
- Thrombin stimulates platelets to release ADP & thromboxane A2; both stimulate further platelets aggregation

Critical Role of Thrombin

Thrombin is the link between vascular injury, coagulation, and platelet activation



Coughlin SR. Nature. 2000;407:258-64; Monroe DM et al. ATVB 2002;22:1381-9.



(clot formation)

- A series of biochemical reactions leading to the formation of a blood clot
- This reaction leads to the activation of <u>thrombin</u> <u>enzyme</u> from inactive form prothrombin
- Thrombin will change fibrinogen (plasma protein) to fibrin (insoluble protein)
- Prothrombin (inactive thrombin) is activated by a long intrinsic or short extrinsic pathways

Intrinsic Pathway

- The trigger is the activation of factor XII by contact with foreign surface, injured blood vessel, and glass.
- Activate factor (XIIa) will activate XI
- Xla will activate IX
- IXa + VIII + platelet phospholipid + Ca activate X
- Following this step the pathway is common for both

Extrinsic pathway

- Triggered by material released from damaged tissues (tissue thromboplastin)
- tissue thromboplastin + VII + Ca \rightarrow activate X

Common pathway

- Xa + V +PF3 + Ca (prothrombin activator) it is a proteolytic enzyme activate prothrombin \rightarrow thrombin
- Thrombin act on fibrinogen \rightarrow insoluble thread like fibrin
- Factor XIII + Ca \rightarrow strong fibrin (strong clot)

Activation of Blood Coagulation

- Intrinsic Pathway: all clotting factors present in the blood
- Extrinsic Pathway: triggered by tissue factor

Common Pathway



P^{*} = phospholipid from platelets

The Intrinsic Pathway



REGULATION OF COAGULATION

Antithrombin:

inhibits thrombin and other enzymes

Protein C:

degrades activated factors V and VIII

Protein S:

cofactor for protein C

 <u>Tissue factor pathway inhibitor (TFPI)</u>: Inhibits the extrinsic system by inhibiting Factor VIIa

Deficiency of any of these proteins can increase risk of thrombosis

<u>Haemostasis</u>





Hemostasis:

the spontaneous arrest of bleeding from ruptured blood vessels

Mechanisms:

Vessel wall
 Platelet
 Blood coagulation
 Fibrinolytic system (Fibrinolysis)

Fibrinolysis

- Formed blood clot can either become fibrous or dissolve
- Fibrinolysis (dissolving) = Break down of fibrin by naturally occurring enzyme plasmin therefore prevent intravascular blocking



FDP*: Fibrin Degradation Products

Fibrinolysis



- Plasmin is present in the blood in inactive form plasminogen
- Plasmin is activated by tissue plasminogen activators (t-PA) in blood.
- Plasmin digest intra & extra vascular deposit of Fibrin \rightarrow fibrin degradation products (FDP)
- 25 · Unwanted effect of plasmin is the digestion of clotting factors



- Plasmin is controlled by:
 - Plasminogen Activator Inhibitor (PAI)
 - Antiplasmin from the liver
- Uses:
 - Tissue Plasminogen Activator (t-PA) used to activate plasminogen to dissolve coronary clots

Haemostatic Mechanisms:

- Vessel wall
- Platelet
- Blood coagulation
- Fibrinolytic system

Bleeding disorders



Bleeding Disorder

1) Bleeding starts



2) Vessels constrict



 Incomplete platelet plug, continued bleeding



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 Incomplete and/or delayed formation of fibrin clot, continued bleeding



- Bleeding can result from:
 - <u>Platelet defects</u>: deficiency in number (thrombocytopenia) or defect in function.

 <u>Coagulation factors</u> <u>defect:</u>
 Deficiency in coagulation factors (e.g. hemophilia).

- Vitamin K deficiency.

The Intrinsic Pathway



Bleeding disorders

- <u>Hemophilia</u>:
 - $-\uparrow$ bleeding tendency.
 - X-linked disease.
 - Affects males.
 - 85% due to FVIII deficiency (hemophilia A), and 15% due to FIX deficiency (hemophilia B).
- Vitamin K deficiency & liver disease:
 - Almost all coagulation factors are synthesized in the liver.
 - Prothrombin, FVII, FIX, & FX require vitamin K for their synthesis.



There is balance between clotting and fibrinolysis Excess clotting \rightarrow blocking of Blood Vessels Excess fibrinolysis \rightarrow tendency for bleeding



Haemostatic Mechanisms



38 giardino privato a cittã della pieve

THANK YOU