





Platelet Volume & Cardiovascular Disease

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Background

- Coronary artery disease is the most common cause of death worldwide
- It is the top three most common cause of death in our country
- Huge burden of health care cost each year

Risk factors of atherosclerosis

- Age
- Sex
- Family history
- Smoking
- Dyslipidaemia
- Hypertension
- Diabetes
- Obesity
- Stress
- Lack of exercise
- Inflammation





















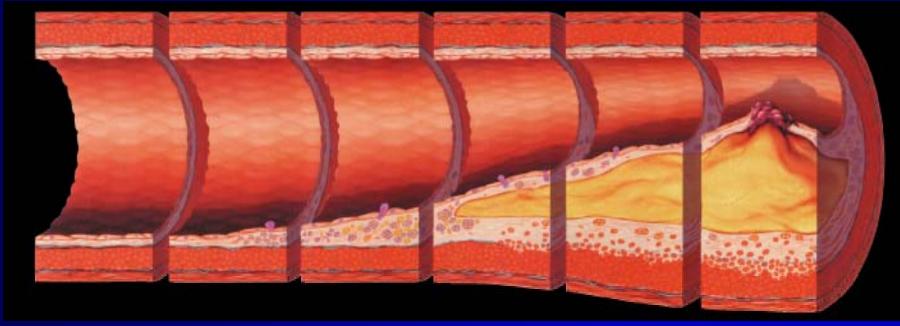
Despite no risk factors

 Many people still develop cardiovascular events

 Need of new prognostic markers for better risk stratification

Pathophysiology Atherosclerosis

Foam Cells Fatty Streak Intermediate Lesion Atheroma Fibrous Plaque Complicated Lesion/ Rupture



Endothelial Dysfunction

From First Decade

From Third Decade

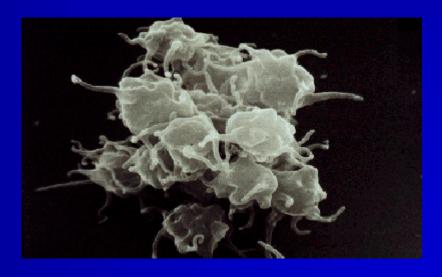
From Fourth Decade

Adapted from Pepine CJ. Am J Cardiol. 1998;82(suppl 104).



- Thrombocytes
- 2-3 microns
- Help in homeostasis





 Play an important role in pathophysiology of acute cardiovascular event

 May be associated with development and progression of atherosclerosis

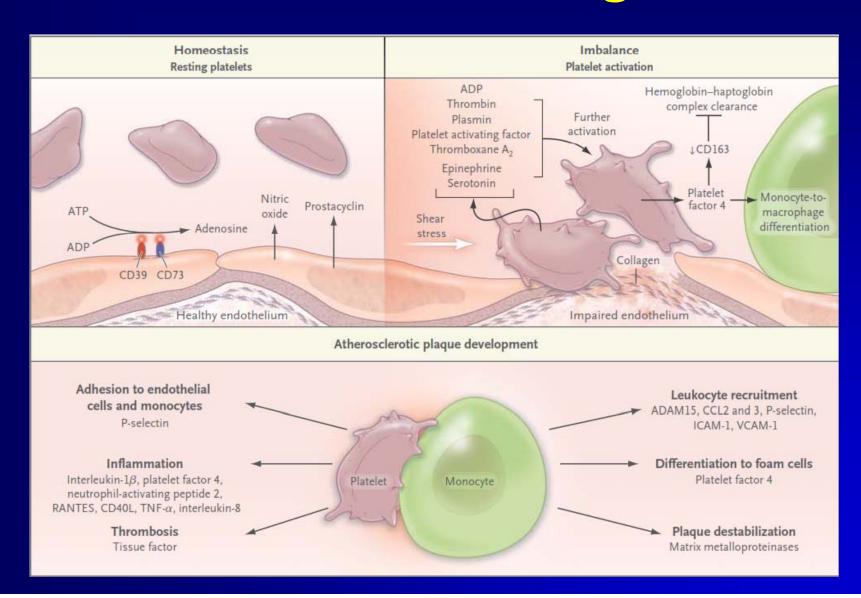
REVIEW ARTICLE

MECHANISMS OF DISEASE

The Hemostatic System as a Modulator of Atherosclerosis

Julian Ilcheff Borissoff, M.D., Henri M.H. Spronk, Ph.D., and Hugo ten Cate, M.D., Ph.D.

Platelets in atherogenesis



 Platelets and coagulation system are important determinants of atherogenesis and atherothrombosis from experimental data

 Lack of clinical evidence of a role for the hemostatic system in atherosclerosis progression

- Inflammation is closely linked to coagulation
- Bidirectional cross-talk between the two system has been established in atherosclerosis

 Platelets create interface betweeen hemostsis, innate immunity, inflammation, atherosclerosis

- Platelet function test
 - Associated with risk of future cardiovascular event in CAD
- Expensive, complicated, not widely available



The novel markers for CVD

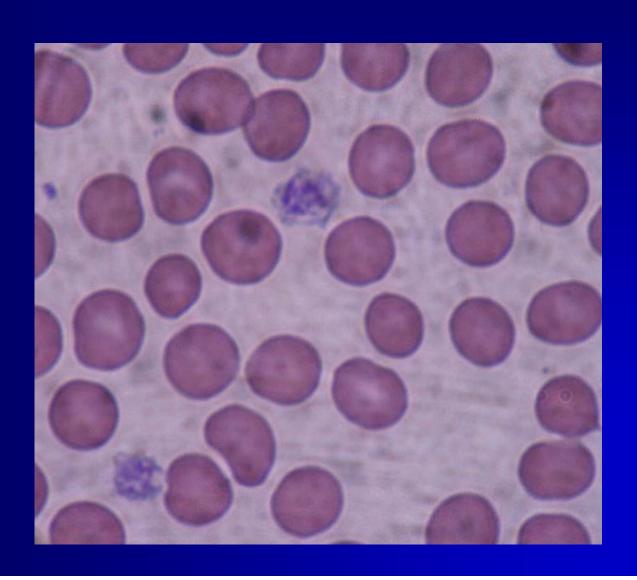


Platelet volume

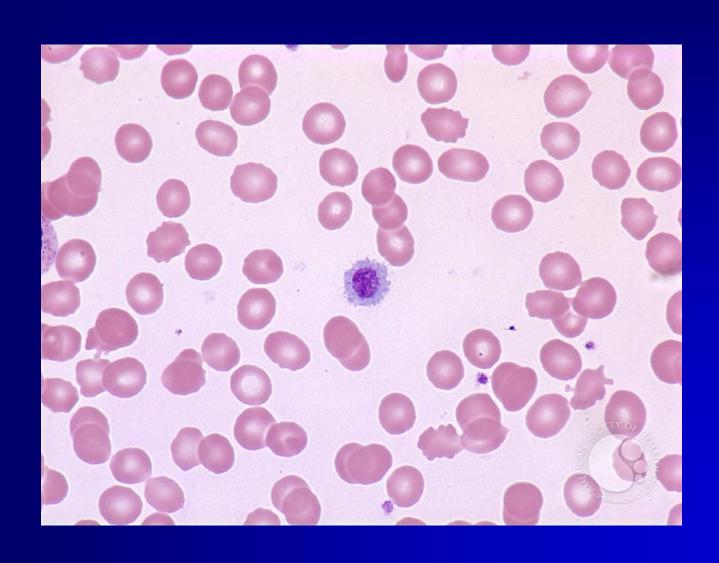
 The young platelets are larger and have higher homeostatic property.

 It might be useful as a predictor of future cardiovascular disease/events

Large platelet



Large platelet



Mean platelet volume

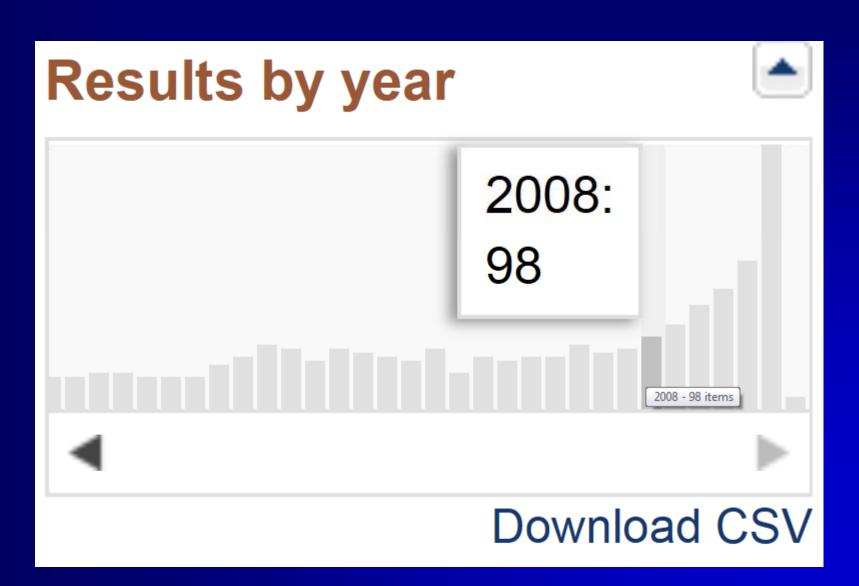
- Parameter of platelet size
- Correlate with platelet function

Simple, cheap, widely available

CBC report

Test Name	Accession	Specimen	Physician	Collected	Received	PL
CBC with Differential	H073240390	Blood	ABEL, DAVID E	11/20/2007 16:39	11/20/2007 16:	40 RO
	Result			Units	Reference	
White Blood Cell	4.50			10E3/u	L 4.00-11.00	
Count						
Red Blood Cell	4.25			10E6/v	L 3.80-5.20	
Count						
Hemoglobin	11.3 L			g/dL	11.6-15.5	
Hematocrit	33.9 L			8	35.0-46.0	
MCV	79.0 L			fL	80.0~100.0	
MCH	26.0 L			pg	27.0-34.0	
MCHC	31.8 L			g/dL	32.0-35.5	
Platelet Count	110 L			1083/0	L 150-400	
RDW CV	12.0			*	11.0-16.0	
Mean Platelet	7.9 L			fL	8.0-13.0	
Volume						

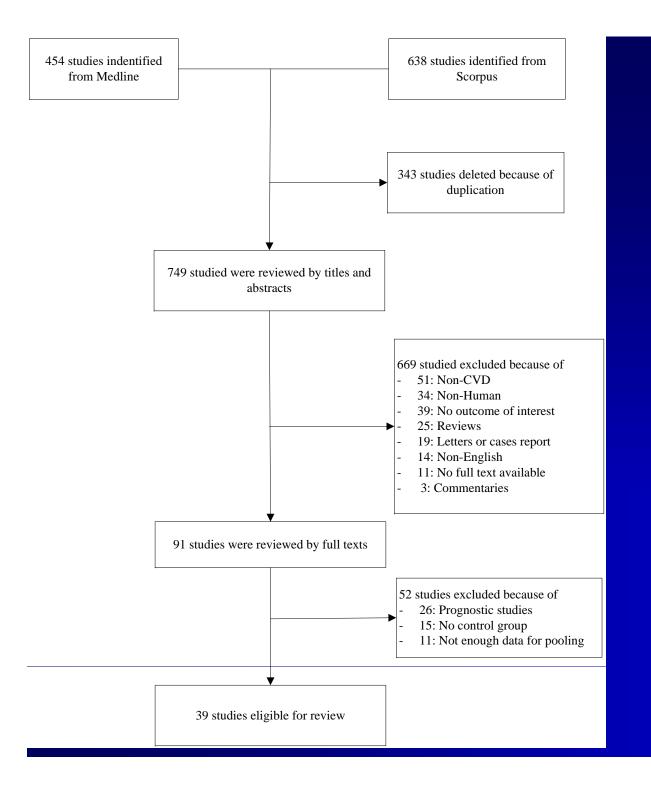
Review of literature: MPV



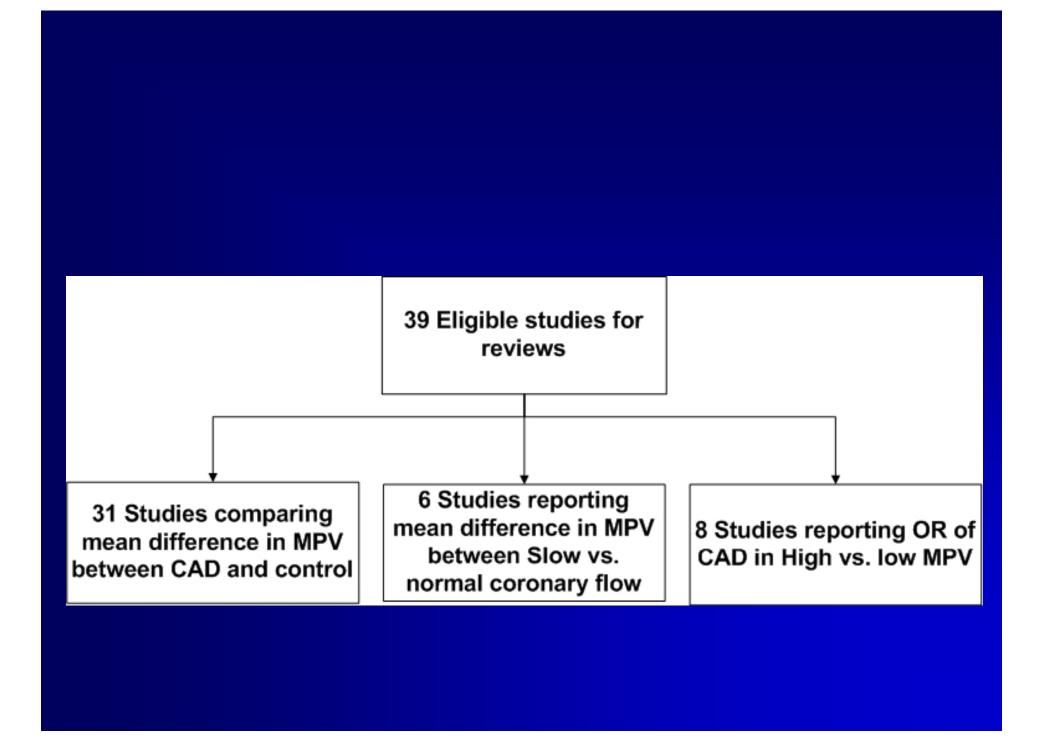
Systematic review and meta-analysis

Search terms

MEDLINE		SCOPUS (titile-Abs-Key)				
"platelet volume"	1,402	"platelet volume"	2,976			
"Cardiovascular Diseases"[Mesh]	1,764,187					
"cardiovascular disease"	1,830,086	"cardiovascular disease"	497,520			
cardiovascular disease	1,830,086	cardiovascular disease*	1,131,751			
"Myocardial Infarction" [Mesh]	138,981					
"myocardial infarction"	179,269	"myocardial infarction"	456,982			
"Coronary Restenosis"[Mesh]	5,807					
restenos*	18,900	restenos*	55,618			
re-stenos*	475	re-stenos*	960			
"Death"[Mesh]	109,208					
death	541,539	death	1,636,919			
mortality	777,169	mortality	1,579,506			
"Heart Failure"[Mesh]	79,883	"heart failure"	342,228			
"Ventricular Function, Left"[Mesh]	24,752	"left ventricular function"	65,638			
"ejection fraction"	38,461	"ejection fraction"	83,616			
"coronary flow"	8,260	"coronary flow"	21,749			
-"coronary blood flow"	6,098	"coronary blood flow"	18,090			
(((((((((((((((#29) OR #28) OR #27) OR #26)	454	("platelet volume") AND ((("cardiovascular	638			
OR #25) OR #24) OR #23) OR #22) OR #21)		disease") OR (cardiovascular disease*) OR				
OR #20) OR #18) OR #15) OR #12) OR #9)		("myocardial infarction") OR (restenos*) OR (re-				
OR #7) OR #4) AND #2		stenos*) OR (death)) OR ((mortality) OR ("heart				
		failure") OR ("left ventricular function") OR				
		("ejection fraction") OR ("coronary flow") OR				
		("coronary blood flow")))				
Number as searched on 12 March 2013						

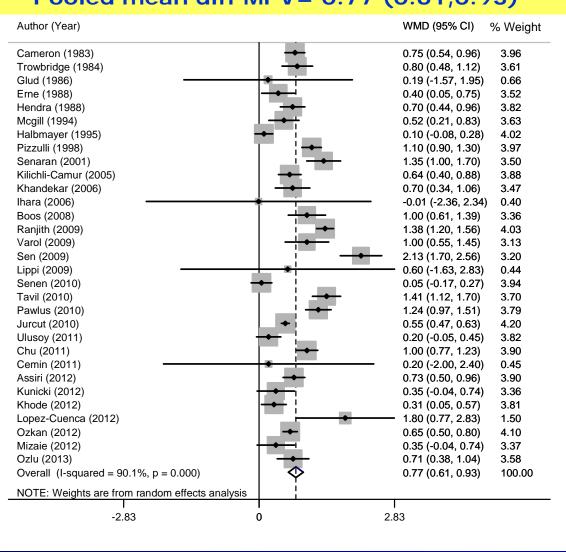


Metaanalysis



CAD vs. control (31 studies)

Pooled mean diff MPV= 0.77 (0.61,0.93)

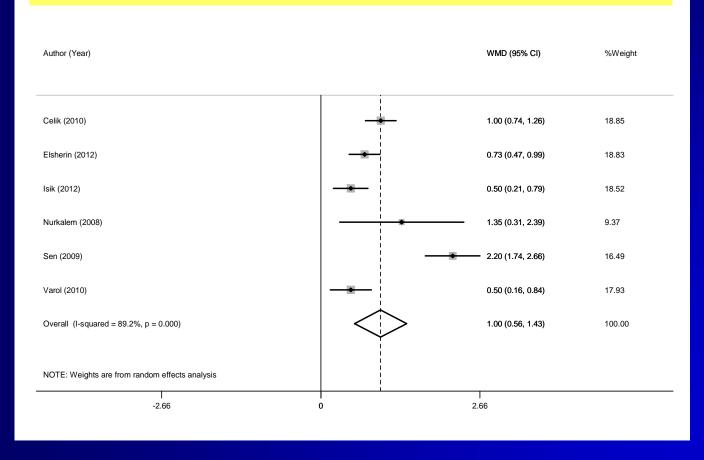


Subgroup analysis

	Number of study	Number of case	Number of control	Mean difference in MPV	95% CI
CSA	6	851	816	0.46	(0.11, 0.81)
CS	9	1,238	703	0.68	(0.33, 1.03)
CSA+CS	15	2,089	1,519	0.59	(0.35,0.82)
MI	18	1,783	3,541	0.89	(0.71, 1.06)
NSTEMI	4	526	227	0.829	(-0.014,1.671)
UA	8	476	523	0.92	(0.57, 1.27)
ACS	24	3,147	6,386	0.91	(0.71, 1.12)
CAD	31	5,236	7,049	0.77	0.61,0.93
Slow flow	6	336	297	0.998	0.564,1.431

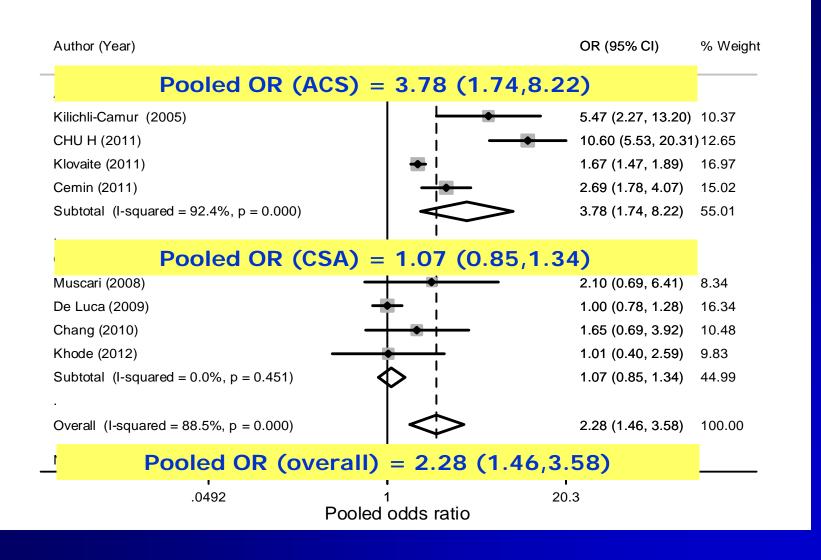
Slow coronary flow vs. normal coronary flow





Pooled OR

A. Pooled odds ratio according to types of case



MPV and CVD: Filling the gap (of knowledge)



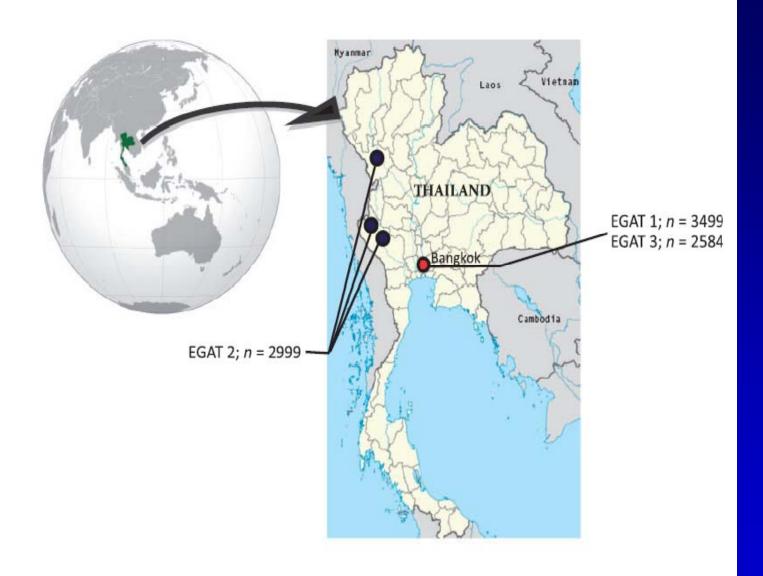


Figure 1 Map showing study sites and number of participants in EGAT cohorts

Study design

Use data from prospective cohort of EGAT

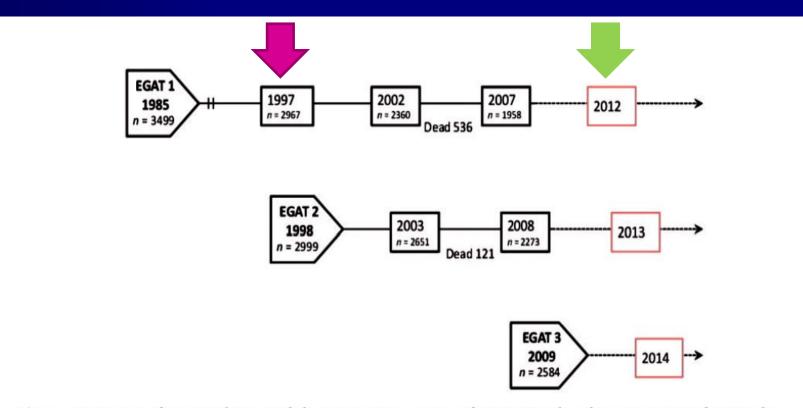


Figure 2 Overview of EGAT cohorts. Each box represents a survey of an EGAT cohort between 1985 and 2009, plus the current projections. Deaths are up to the last resurvey for EGAT 1 and EGAT 2. *n* is the number of people who were surveyed at each time

Strength: good prospective cohort

- Decent number of subjects
- Detailed and thorough measurement of co-morbidities and other biomarkers
- High rate of follow up
- Long duration of follow up
- Prospective and pre-specified outcomes measurements

Primary endpoints

 Composite endpoints of death, MI, stroke, heart failure, PCI, CABG, hospitalization from CVD

Secondary endpoints

- Each component of primary endpoint
 - Total mortality
 - CV death
 - -MI
 - Stroke
 - CHF
 - Revascularization

Statistical Analysis

Time to event analysis

Outcome ascertainment

- EGAT network connection
- National Statistical Office
- Ministry of Interior

 Telephone interview and review of all medical records for patients with hospital admission

Thank you