

**ARIC Manuscript Proposal # 1254**

**PC Reviewed:**   5  /  8  /07

**Status:**   A  

**Priority:**   2  

**SC Reviewed:** \_\_\_\_\_

**Status:** \_\_\_\_\_

**Priority:** \_\_\_\_\_

**1.a. Full Title:** Tissue Factor Pathway Inhibitor (TFPI) and Venous Thromboembolism (VTE) in LITE

**b. Abbreviated Title (Length 26 characters):** TFPI and VTE in LITE

**2. Writing Group:**

Writing group members: Aaron Folsom, Mary Cushman, Susan Heckbert

I, the first author, confirm that all the coauthors have given their approval for this manuscript proposal.   x   **[please confirm with your initials electronically or in writing]**

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**3. Timeline:** start summer 2007

**4. Rationale:** Tissue factor is an initiator of thrombosis and is inhibited by TFPI (1). Animal models suggest TFPI reduces thrombosis risk. In humans, there is limited evidence that greater TFPI is associated with reduced risk of VTE. The Leiden Study, for example, found that low levels of TFPI antigen, free-antigen, and activity, were related to increased odds of VTE (2,3): the OR for the lowest

5%ile vs higher levels of TFPI antigen was 2.1 (95% CI 1.1-4.1). Other studies support these findings (4-7).

The LITE study is investigating VTE in the ARIC and CHS cohorts. As part of the nested case-control analyses, we have measured TFPI on VTE cases and controls in ARIC. We will examine the TFPI association with VTE in LITE, the first prospective study on this topic.

**5. Main Hypothesis/Study Questions:** Low levels of TFPI are associated independently with increased risk of VTE in LITE. The association also will be seen in various subgroups typically analyzed in LITE.

**6. Design and analysis (study design, inclusion/exclusion, outcome and other variables of interest with specific reference to the time of their collection, summary of data analysis, and any anticipated methodologic limitations or challenges if present).**

Inclusions: LITE nested VTE cases and controls

Exclusions: Warfarin use, missing lab variables

Dependent variable: case/control status. Also subdivided by ARIC/CHS, idiopathic/secondary.

Independent variable: TFPI measured in the UVT lab

Covariates: Age, race, sex, BMI, diabetes, fVIII, fV Leiden, D-dimer, and other analytes measured in the nested case-control sample

Analysis:

Odds ratios and 95% CIs of VTE for low TFPI (e.g., <10%ile) relative to higher TFPI will be calculated with adjustment for age and other covariates using logistic regression. Cubic spline graphs will be considered to further explore the shape of the association. Subgroup analyses will be conducted via stratification and interactions tested using cross product terms.

**7.a. Will the data be used for non-CVD analysis in this manuscript?**    \_\_\_ Yes  
  \_x\_\_\_ No

**b. If Yes, is the author aware that the file ICTDER02 must be used to exclude persons with a value RES\_OTH = "CVD Research" for non-DNA analysis, and for DNA analysis RES\_DNA = "CVD Research" would be used?**    \_\_\_  
  Yes    \_\_\_ No

(This file ICTDER02 has been distributed to ARIC PIs, and contains the responses to consent updates related to stored sample use for research.)

**8.a. Will the DNA data be used in this manuscript?**  Yes  
 No

**8.b. If yes, is the author aware that either DNA data distributed by the Coordinating Center must be used, or the file ICTDER02 must be used to exclude those with value RES\_DNA = "No use/storage DNA"?**  
 Yes  No

**9. The lead author of this manuscript proposal has reviewed the list of existing ARIC Study manuscript proposals and has found no overlap between this proposal and previously approved manuscript proposals either published or still in active status. ARIC Investigators have access to the publications lists under the Study Members Area of the web site at: <http://www.csc.unc.edu/ARIC/search.php>**

Yes  No

**10. What are the most related manuscript proposals in ARIC (authors are encouraged to contact lead authors of these proposals for comments on the new proposal or collaboration)?**

The most related proposals are from LITE. There are no overlapping manuscripts.

**11. a. Is this manuscript proposal associated with any ARIC ancillary studies or use any ancillary study data?**  Yes  No

**11.b. If yes, is the proposal**  
 **A. primarily the result of an ancillary study (list number\* 1998.03)**  
 **B. primarily based on ARIC data with ancillary data playing a minor role (usually control variables; list number(s)\* \_\_\_\_\_ )**

\*ancillary studies are listed by number at <http://www.csc.unc.edu/aric/forms/>

**12. Manuscript preparation is expected to be completed in one to three years. If a manuscript is not submitted for ARIC review at the end of the 3-years from the date of the approval, the manuscript proposal will expire.**

#### References

1: Lindahl AK.

Tissue factor pathway inhibitor: a potent inhibitor of in-vitro coagulation and in-vivo thrombus formation.

Curr Opin Lipidol. 1994 Dec;5(6):434-9. Review.

PMID: 7712048 [PubMed - indexed for MEDLINE]

2: Dahm A, Van Hylckama Vlieg A, Bendz B, Rosendaal F, Bertina RM, Sandset PM.  
Low levels of tissue factor pathway inhibitor (TFPI) increase the risk of  
venous thrombosis.

Blood. 2003 Jun 1;101(11):4387-92. Epub 2003 Jan 30.

PMID: 12560220 [PubMed - indexed for MEDLINE]

1: Hoke M, Kyrle PA, Minar E, Bialonczyk C, Hirschl M, Schneider B, Kollars M,  
Weltermann A, Eichinger S.

Tissue factor pathway inhibitor and the risk of recurrent venous  
thromboembolism.

Thromb Haemost. 2005 Oct;94(4):787-90.

PMID: 16270631 [PubMed - indexed for MEDLINE]

2: Duering C, Kosch A, Langer C, Thedieck S, Nowak-Gottl U.

Total tissue factor pathway inhibitor is an independent risk factor for  
symptomatic paediatric venous thromboembolism and stroke.

Thromb Haemost. 2004 Oct;92(4):707-12.

PMID: 15467899 [PubMed - indexed for MEDLINE]

3: Dahm A, Rosendaal FR, Andersen TO, Sandset PM.

Tissue factor pathway inhibitor anticoagulant activity: risk for venous  
thrombosis and effect of hormonal state.

Br J Haematol. 2006 Feb;132(3):333-8.

PMID: 16409298 [PubMed - indexed for MEDLINE]

4: Bombeli T, Piccapietra B, Boersma J, Fehr J.

Decreased anticoagulant response to tissue factor pathway inhibitor in patients  
with venous thromboembolism and otherwise no evidence of hereditary or acquired  
thrombophilia.

Thromb Haemost. 2004 Jan;91(1):80-6.

PMID: 14691572 [PubMed - indexed for MEDLINE]

5: Tardy-Poncet B, Tardy B, Laporte S, Mismetti P, Amiral J, Piot M, Reynaud J,  
Campos L, Decousus H.

Poor anticoagulant response to tissue factor pathway inhibitor in patients with  
venous thrombosis.

J Thromb Haemost. 2003 Mar;1(3):507-10.

PMID: 12871458 [PubMed - indexed for MEDLINE]

6: Ameziane N, Seguin C, Borgel D, Fumeron F, Moatti D, Alhenc-Gelas M,  
Grandchamp B, Aiach M, Emmerich J, de Prost D.

The -33T->C polymorphism in intron 7 of the TFPI gene influences the risk of  
venous thromboembolism, independently of the factor V Leiden and prothrombin  
mutations.

Thromb Haemost. 2002 Aug;88(2):195-9.

PMID: 12195688 [PubMed - indexed for MEDLINE]

7: Amini-Nekoo A, Futers TS, Moia M, Mannucci PM, Grant PJ, Ariens RA.  
Analysis of the tissue factor pathway inhibitor gene and antigen levels in  
relation to venous thrombosis.

Br J Haematol. 2001 May;113(2):537-43.

PMID: 11380428 [PubMed - indexed for MEDLINE]