

Activation of haemostatic system in cyclooxygenase-2 knockout mice (COX-2KO)

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Deep vein thrombosis (DVT) is a major cause of pulmonary thromboembolism, a leading cause of death in individuals with DVT. Several lines of evidence indicate that inhibition of cyclooxygenase-2 (COX-2) activity favour thrombotic events (Barbieri SS, et al., *Circulation* 2012), but the role of COX-2 in DVT remain unclear.

In this study we have assessed the effects of deletion of COX-2 on the levels or activities of haemostatic factors in relation to experimentally-induced thrombosis.

To address this issue, data obtained from COX-2 knockout (COX-2KO) mice were compared to those obtained by wild-type (WT) mice. Citrated blood was immediately analyzed by thromboelastography (ROTEM[®]). Levels of fibrinogen, tissue plasminogen activator (tPA), plasminogen activator inhibitor-1 (PAI-1), and the activities of coagulation factors were measured in plasma. Tissue factor (TF) activity in plasma microparticles and in leukocytes was measured by one-stage plasma recalcification time assay (TF activity). Ligation of the inferior vena cava (IVC) to induce DVT in COX-2KO and WT mice was also carried out. 48 hours after thrombosis-induction mice were sacrificed and thrombi were measure, dissected and analysed by histology.

Recalcification tests carried out both in whole blood or in plasma of COX-2KO mice by thromboelastography (NATEM) showed a significant increase in clot firmness and a reduction in coagulation time compared to control mice. Activation of the extrinsic or intrinsic pathways (EXTEM or INTEM) suggests that COX-2KO mice have higher levels of fibrinogen and coagulation factors than WT mice. Indeed, COX-2KO mice have augmented levels of functional fibrinogen and factor VIII and of TF, but similar levels of factors IX, XI and XII compared to WT mice. In addition, PAI-1 activity and antigen were elevated in COX-2KO compared to WT mice, whereas tPA activity was similar in the two groups.

Thrombus size was substantially greater in COX2-KO mice than in WT mice. In addition, an increased leukocyte infiltration was detected in thrombi from COX2-KO mice compared to WT mice. Remarkably, the expression of Annexin II, a fibrinolytic receptor (Brownstein C et al., 2004), was greater in leukocytes within thrombi in COX-2KO mice. Additional *in vitro* experiments were performed to further investigate the effect of COX-2 deletion on Annexin II expression in a murine macrophage line (RAW264.7). In these experiments it emerged that the inhibition of COX-2 by NS398 or by specific siRNA markedly increased the expression of Annexin II compared to control cells. In particular, in control cells Annexin II immunoreactivity was localized mainly on membrane/periphery, whereas in COX-2 silenced cells Annexin II reactivity was diffused and localized in the cytoplasm, suggesting a reduced fibrinolytic capacity of these cells. In conclusion, the increased activation of haemostatic system observed in COX-2KO mice may partly explain the predisposition of this mouse model to thrombosis. In addition, the different expression/localization/activation of Annexin II in leukocytes from COX-2KO mice suggests an alternative mechanisms influencing the propensity to lysis of thrombi.

Barbieri SS et al. (2012) *Circulation* 126(11):1373-84

Brownstein C et al. (2004) *Blood* 103(1):317-24