

# A novel rapid fibrinogen assay based on thrombin generation and turbidity

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## INTRODUCTION

- A rapid point-of-care test to measure fibrinogen levels is crucial to adequately treat patients with major blood loss.
- Obtaining fibrinogen test results, such as the Clauss assay or alternatives, are often costly and too time consuming in emergency situations.
- Here, we used a mathematical model using on thrombin generation- and turbidity curves as inputs derive the fibrinogen levels in patient samples.

## AIM

To compare the predicted fibrinogen levels from our mathematical model to measured fibrinogen levels (Clauss assay) in diagnostically challenging patients

## CONCLUSION

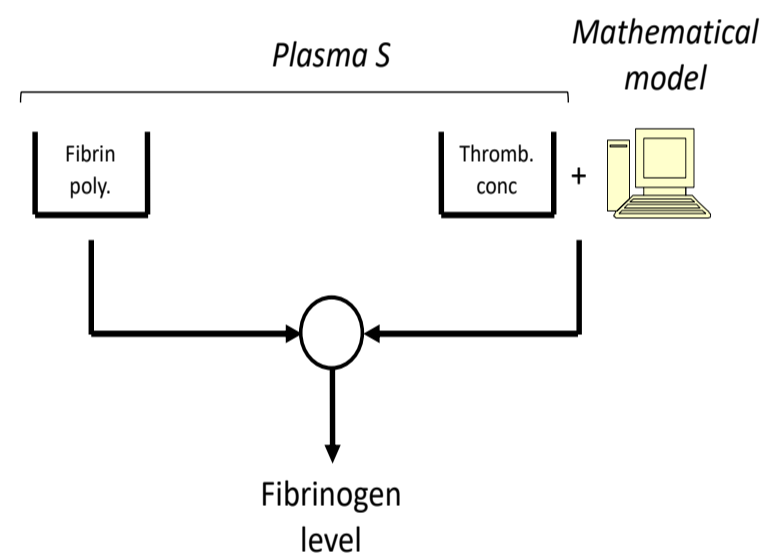
- Our method can determine the fibrinogen concentration very well.
- Fibrinogen levels in plasma samples with strongly abnormal thrombin generation or clotting curves (e.g., due to high levels of anticoagulants) could not be determined.

## WORK IN PROGRESS

- Further training of the model with additional measurements will improve the accuracy and speed of the fibrinogen concentration determination
- Change the assay (e.g. with Heparinase) to obtain normal clotting curves in a wider range of patients
- Further develop the model into a complete point-of-care test for on-site application in the clinic.

## METHODS

- Collected 44 citrated plasma samples
  - Fibrinogen levels: 1.1 – 16.6 g/L
  - Part of the samples contain anticoagulants (table 1)
  - Retrospectively collected the prothrombin time, D-dimer levels, anti-Xa levels and the INR if available
- Turbidity- and the thrombin generation curves were measured simultaneously and used as input for the model to predict the fibrinogen level of the sample.
- Fibrinogen levels were measured with the Clauss assay (observed fibrinogen levels).
- Comparison between predicted and observed fibrinogen levels using a correlation.



**Figure 1.** Schematic overview of the model which uses fibrin polymerization (turbidity curves) and the activated thrombin concentration (thrombin generation curve) to predict the fibrin level in plasma.

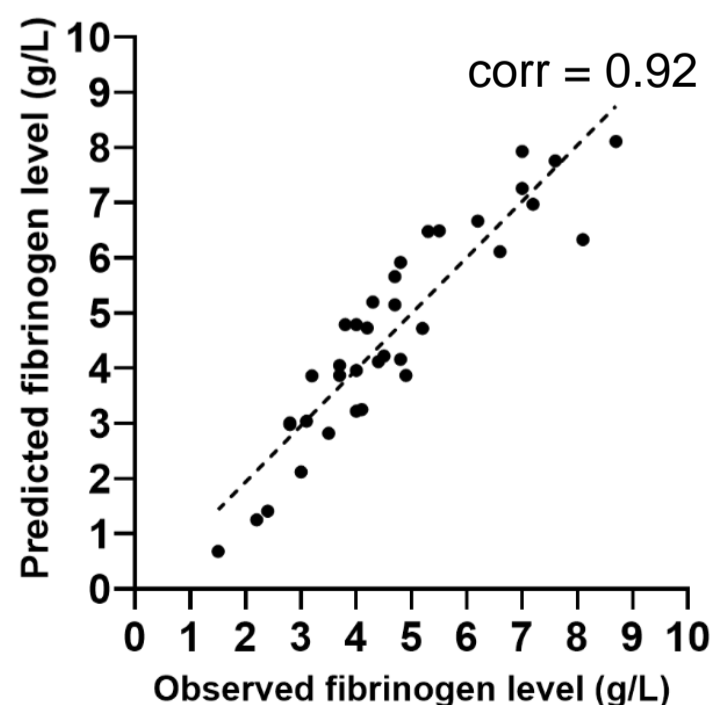
## RESULTS

### Patient characteristics

**Table 1.** Patient sample characteristics

| Characteristic                                   | Measured in number of patients | (%)    | Median [IQR]       |
|--|--------------------------------|--------|--------------------|
| Prothrombin time                                 | 44                             | (100%) | 13.6 [11.7 - 17.9] |
| D-dimer  | 18                             | (41%)  | 2.8 [0.8 - 4.8]    |
| Anti-Xa  | 14                             | (32%)  | 0.16 [0.08 - 0.21] |
| INR  | 26                             | (59%)  | 1.3 [1.0 - 2.3]    |
| Observed fibrinogen levels (Clauss)              | 44                             | (100%) | 4.4 [3.3 - 6.3]    |
| Predicted fibrinogen levels (Mathematical model) | 36                             | (82%)  | 4.2 [3.2 - 6.0]    |
| Anticoagulant medication                         |                                |        |                    |
| Heparin  | 22                             | (50%)  |                    |
| Vitamin K antagonist                             | 5                              | (11%)  |                    |
| Aspirin  | 2                              | (5%)   |                    |
| DOAC   | 2                              | (5%)   |                    |

### Performance predicted fibrinogen levels



**Figure 2.** Plotted correlation between the predicted- the observed fibrinogen levels, measured with the Clauss assay.