C8. THE RELATIONSHIP BETWEEN FACTOR V LEIDEN, PROTHROMBIN G20210A AND MTHFR MUTATIONS AND THE FIRST MAJOR THROMBOTIC EPISODE IN POLYCYTHEMIA VERA AND ESSENTIAL THROMBOCYTHEMIA.

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Background/aim

Arterial and venous thrombosis are the most frequent complications in patients with polycythemia vera and essential thrombocythemia. We sought to demonstrate a possible contribution of the Factor V Leiden, Prothrombin G20210A, and MTHFR 677 C>T and 1298 A>C mutations to the thrombotic risk in patients with polycythemia vera and essential thrombocythemia, along with other biological features of these patients.

Material and methods

We included 86 patients with polycythemia vera, of which 34 (39.5%) had major thrombosis, and 95 patients with essential thrombocythemia, of which 22 (23.1%) had major thrombosis. Factor V Leiden, Prothrombin G20210A, and MTHFR 677 C>T and 1298 A>C mutations were genotyped by PCR-RFLP and AS-PCR techniques.

Results

In the whole cohort of patients, only the Factor V Leiden mutation was significantly associated with both arterial and venous thrombosis, in univariate and multivariate analysis (OR = 4.3; 95% CI = 1.5 - 12.5; p=0.008 and OR = 4.3; 95% CI = 1.2 - 15.9; p=0.02, respectively). Other factors significantly associated with thrombosis in both univariate and multivariate analysis were: male sex (OR = 2.8; 95% CI = 1.4 - 5.4; p=0.002 and OR = 3.5; 95% CI = 1.6 - 7.6; p=0.002, respectively) and the *JAK2* V617F mutation (OR = 5.5; 95% CI = 2.1 - 15; p=0.0001 and OR = 6.9; 95% CI = 2.2 - 21.2; p=0.001, respectively).

Conclusions

In conclusion, among the four mutations analyzed (Factor V Leiden, Prothrombin G20210A, and *MTHFR* 677 C>T and 1298 A>C), only Factor V Leiden is a major contributor to thrombosis in polycythemia vera and essential thrombocythemia.