SOHC

SWISS ONCOLOGY & HEMATOLOGY CONGRESS

Presented at SOHC 2025 the 19th of November

Mitochondrial DNA Enhances Adrenaline-Induced Platelet Activation in Type-II Diabetes Mellitus

Cent university

Centre hospitalier universitaire vaudois

UNIL | Université de Lausanne

Abstract category: Hemostasis, transfusion medicine, vascular, laboratory medicine,

<u>Durre Shehwar</u>¹, Alessandro Aliotta¹ Madeeha Rasool², Samra Fatima², Saima Barki², Debora Bertaggia Calderara¹, Lucas Veuthey¹ Cindy Pereira Portela¹, Muhammad Rizwan Alam², Lorenzo Alberio¹

- 1. Division of Hematology and Central Hematology Laboratory, Lausanne University Hospital (CHUV) and University of Lausanne (UNIL), Lausanne, Switzerland
- 2. Department of Biochemistry, Quaid-i-Azam University, Islamabad, Pakistan

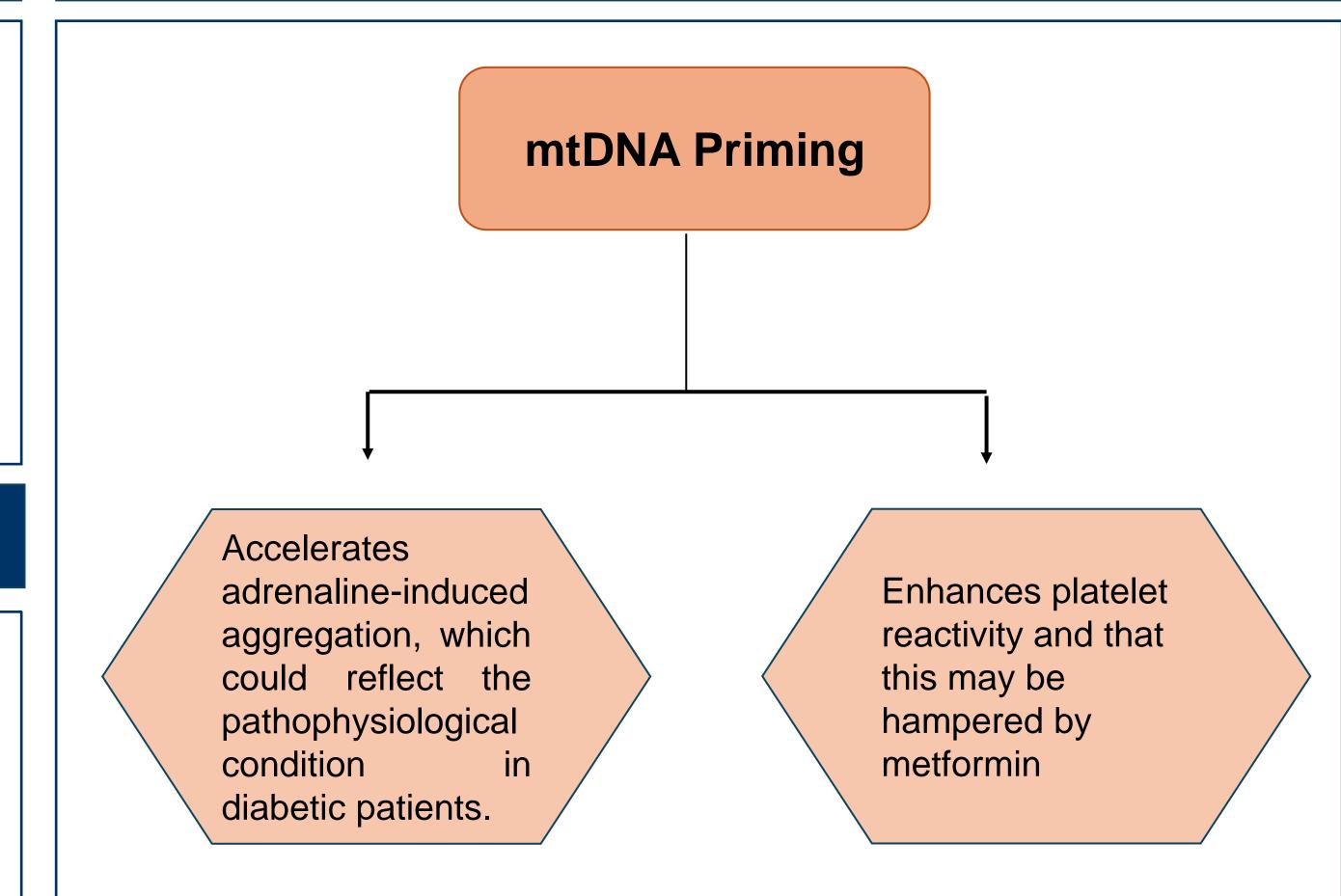
INTRODUCTION

Diabetes, a chronic metabolic disorder associated with number of complications, is one of the major cause of morbidity and mortality worldwide. Diabetic patients have hyperactive platelets, which are more prone to agonist-induced aggregation. It is known that oxidative stress in diabetic patients affects mitochondrial function, which releases mitochondrial DNA (mtDNA) and contributes to platelet activation. However, whether or not cell-free mtDNA, can prime the adrenaline-induced platelet aggregation remains incompletely explored.

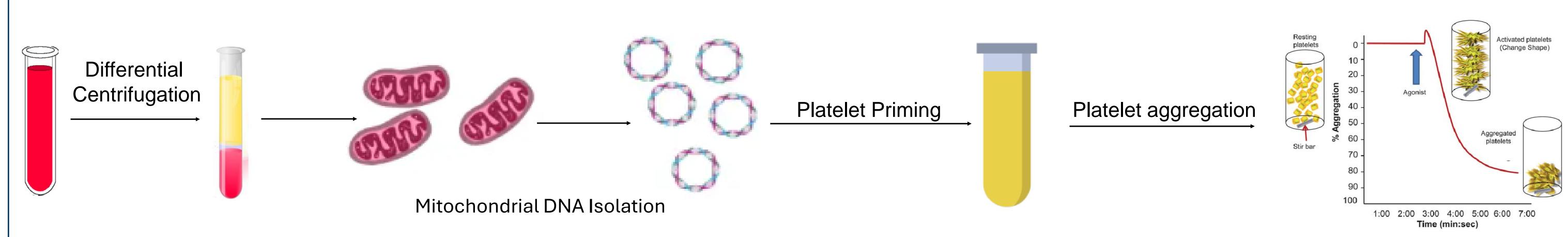
AIM

The aim of the study is to explore the priming effect of mtDNA on adrenaline-induced activation of platelets.

CONCLUSIONS







RESULTS

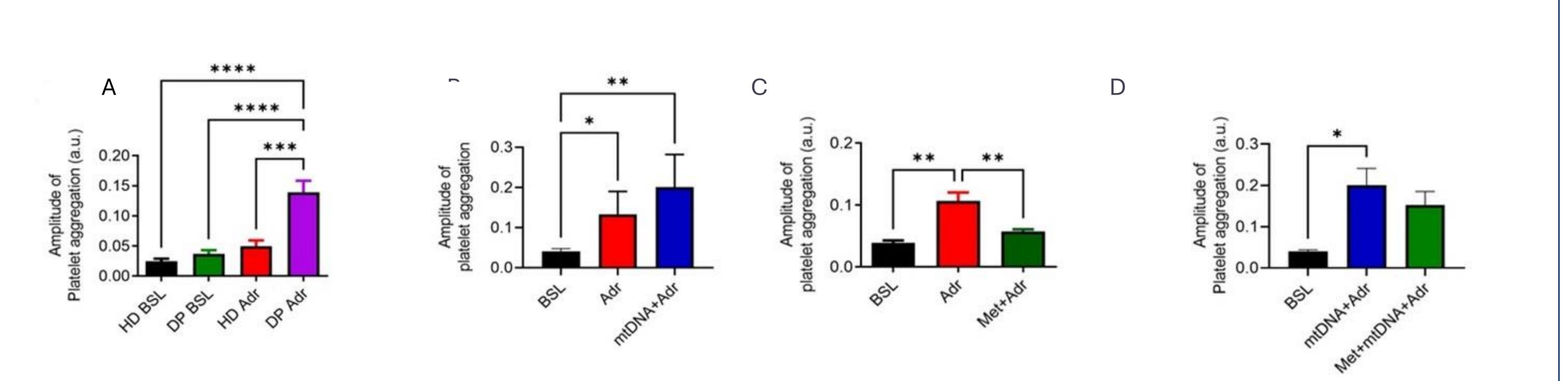


Figure 1. Mitochondrial DNA (mtDNA) enhances adrenalin-induced platelet aggregation. (A) Increased aggregation of platelets stimulated by adrenaline (Adr) in diabetic patients (DP) vs healthy donors (HD) and compared to unstimulated baseline (BSL). **(B)** mtDNA priming enhances adrenaline-induced aggregation in platelets from HD. **(C)** Metformin (Met) reduces adrenaline-induced aggregation in platelets from HD. **(D)** Met reduces the trend in mtDNA primed adrenaline-induced platelet aggregation in HD platelets. Data are mean ± SEM from n = 4.

REFERENCES

- 1. Li S, Wang J, Zhang B, Li X, Liu Y. Diabetes Mellitus and Cause-Specific Mortality: A Population-Based Study. *Diabetes Metab J*. 2019; **43**: 319-41. 10.4093/dmj.2018.0060.
- 2. Kitano D, Takayama T, Nagashima K, Akabane M, Okubo K, Hiro T, Hirayama A. A comparative study of time-specific oxidative stress after acute myocardial infarction in patients with and without diabetes mellitus. *Bmc Cardiovascular Disorders*. 2016; **16**: 1-6. ARTN 10210.1186/s12872-016-0259-6.
- 3. Randriamboavonjy V. Mechanisms involved in diabetes-associated platelet hyperactivation. *The Non-Thrombotic Role of Platelets in Health and Disease*: IntechOpen, 2015.
- 4. Kim JH, Bae HY, Kim SY. Clinical marker of platelet hyperreactivity in diabetes mellitus. *Diabetes Metab J.* 2013; **37**: 423-8. 10.4093/dmj.2013.37.6.423.
- 5. Sagar RC, Ajjan RA, Naseem KM. Non-Traditional Pathways for Platelet Pathophysiology in Diabetes: Implications for Future Therapeutic Targets. *Int J Mol Sci.* 2022; **23**: 4973.10.3390/ijms23094973.

CONTACT INFORMATION

Durre Shehwar: durre.shehwar@chuv.ch
Alessandro Aliotta: alessandro.aliotta@chuv.ch
Lorenzo Alberio: lorenzo.alberio@chuv.ch
Muhammad Rizwan Alam: mralam@qau.edu.pk