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INTRODUCTION

Warfarin is a widely prescribed drug for anticoagulation and exerts its effect by inhibiting vitamin K recycling in the coagulation cascade. It has a narrow therapeutic index and as such, much care is needed in deciding a suitable dose for patients. Warfarin is mainly metabolised by the CYP2C9 enzyme in the liver and the drug metabolite is subsequently excreted from the body. CYP2C9 exhibits genetic polymorphism; mutations in the CYP2C9 gene lead to the expression of variant forms of the enzyme with reduced catalytic activity.

This study aimed to establish the relationship between CYP2C9 genotype and daily warfarin dose requirement in paediatric patients on anticoagulation therapy.

METHOD

- 120 children on chronic therapy with warfarin took part in this study
- A venous blood sample (5ml) was taken for later genotyping (for CYP2C9) and plasma warfarin concentration determination (by HPLC).
- Data obtained were subjected to statistical tests for association between genotypes and plasma concentrations

REFERENCES

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RESULTS

- Log (S-warfarin clearance) and (R-warfarin clearance) gave a normal distribution.
- The number of CYP2C9 *2 and CYP2C9*3 are both significant for loge(S clearance) explaining 16.6% of the variability, with the number of *3 having twice as large effect as the number of *2.

CONCLUSION

- The study successfully showed an association between CYP2C9 genotype and S-warfarin clearance.
- This therefore emphasises the need for clinicians to prescribe warfarin in accordance with the CYP2C9 genotype the patient possesses.

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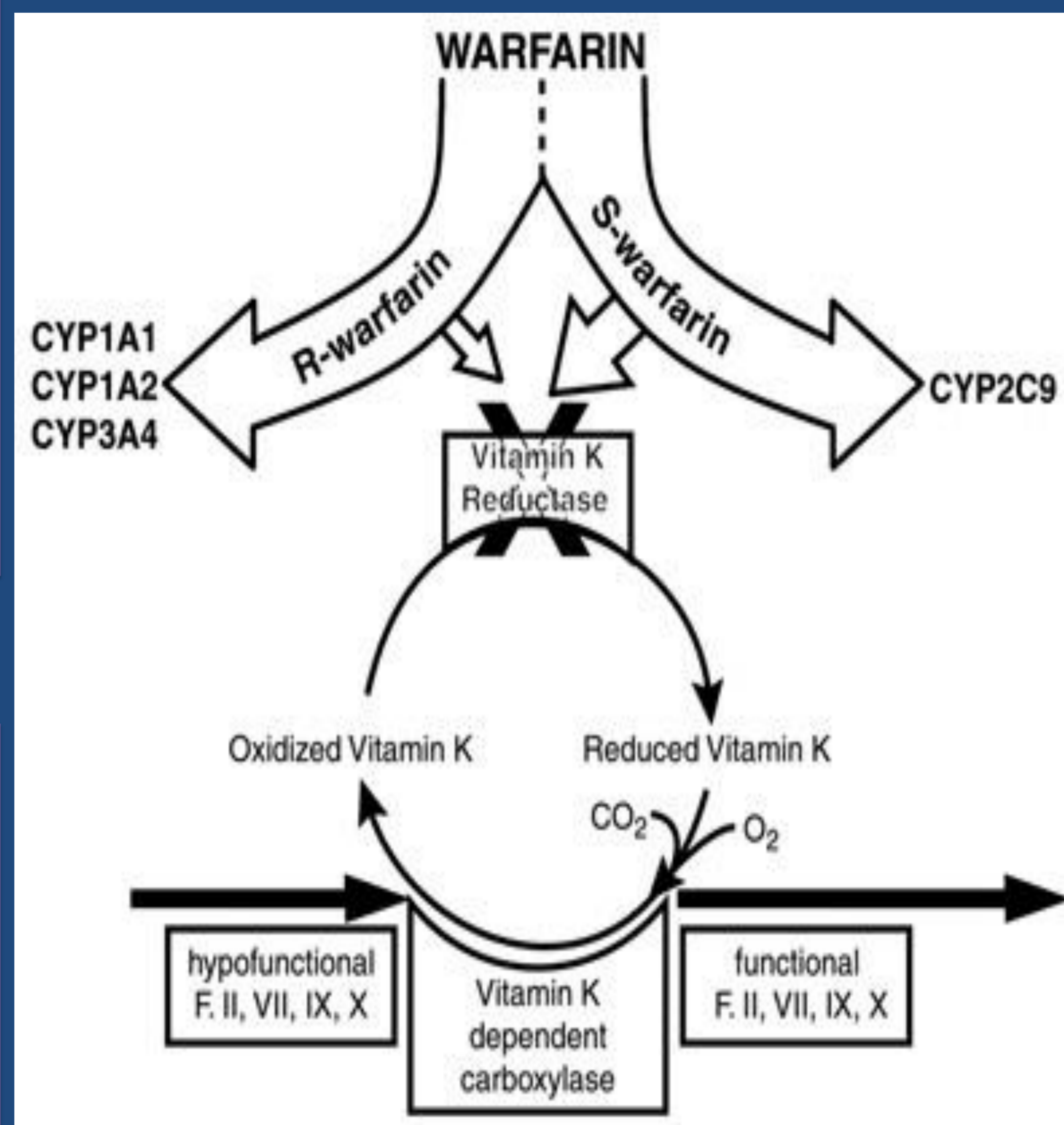


Figure 1. Metabolic pathway of warfarin enantiomers.
 (Source: American Association for Clinical Chemistry)