

F

# APPENDIX F

Regulation of the Biological Activity of  
Fibroblast Growth Factor by  
Enoxaparin *in Vitro*

## Investigation Report

### Regulation of the Biological Activity of Fibroblast Growth Factor by Enoxaparin<sup>TM</sup> in Vitro

Investigator: Prof. Dr. Dr. B.-U. von Specht, Department of Surgery, University of Freiburg, Germany

#### Introduction

Acidic fibroblast growth factor (aFGF) and basic fibroblast growth factor (bFGF) are potent stimulators of both DNA synthesis and cellular division in a variety of normal diploid mammalian cells that are derived from mesoderm or neuroectoderm. These include endothelial cells, fibroblasts, smooth muscle cells, oligodendrocytes, astrocytes, and retinal epithelial cells. ( 7,14,23)

Formation of new capillaries by endothelial cells involves a variety of complex cellular activity, including destruction of the basement membrane, migration, division and the subsequent reconstitution of the capillary structures (7). FGF stimulates many of these processes both in cellular cultures and in vivo. Application of FGF to the rabbit cornea stimulates directed neoangiogenesis. These growth factors are naturally released by the mononuclear phagocytes following inflammation or hypoxia.(15).

Recent investigations have shown that the application of FGF to the hypoxic myocardium induces the growth of new functional capillaries in the experimental animal, (1,2,9,12,17,28) an observation which could be confirmed in patients with CHD (21). Crude extracts of heparin bind FGFs, which can be purified by heparin affinity chromatography (11). Both forms of FGF are protected from degradation and damage when associated with heparin or the heparin-like carbohydrates of heparin-sulfate proteoglycans(9). Glycosaminoglycans bind to FGFs with a high degree of specificity and induce interaction with the FGF receptors (25,26,27) thereby regulating the growth factor activity (6,18, 19, 24, 25, 26, 27.)

In vitro heparin potentiates the biological activity of aFGF, increasing its potency to that of bFGF (7). No additional activation of bFGF can be achieved by heparin (10). It is, however, interesting, that when heparin was added to endothelial cells in the absence of FGF, proliferation was inhibited (3). Growth was also inhibited by heparin in the presence of FGF if the heparin concentration was increased (10).

Heparin consists of a complex mixture of polysaccharides varying in size between 5000-30000 daltons. Sudhalter et al. studied the effects of size, sulfation, and anticoagulant activity on the potentiation of acidic fibroblast growth factor by heparin, and it was also found that a minimum chain length and degree of sulfation are required for potentiation (3). However, this issue remains controversial. Perhaps the safest conclusion at present is that neither the length of the heparin fragment nor the stoichiometry of FGF binding to heparin are the sole determinants of activity (6). This observation suggests a role for heparin fragments (apart from its anticoagulant activity) in regulating the growth of vascular endothelial cells by modulating the stability and activity of FGF in vivo.

It is, therefore, of great interest to test growth promoting effect of heparin fractions on aFGF induced cell proliferation in vitro, because from these tests conclusions concerning the activity of the fractions for the treatment of coronary heart disease can be drawn.

## Experimental design

### 1. Enoxaparin fractions

12 low molecular heparin fractions of different sizes and with different anticoagulant activity were tested.:

|                                   |                                   |
|-----------------------------------|-----------------------------------|
| 1. WSD 3093-Hexasaccharides       | 2. WSD 3093-Octasaccharides       |
| 3. WSD 3093-Decasaccharides       | 4. WSD 3093-Dodecasaccharides     |
| 5. WSD 3093-<Hexadecasaccharides  | 6. WSD 3093->Hexadecasaccharides  |
| 7. DIA 2844-Hexasaccharides       | 8. DIA 2844-Octasaccharides       |
| 9. DIA 2844-Decasaccharides       | 10. DIA 2844-Dodecasaccharides    |
| 11. DIA 2844-<Hexadecasaccharides | 12. DIA 2844->Hexadecasaccharides |

### 2. Materials and Methods

#### FGF

Recombinant human acidic fibroblast growth factors (aFGF Cat-No.PT 100-17A) was obtained from NatuTec, GmbH Frankfurt, FRG

#### BHK-21

The BHK-21 cell line (baby hamster kidney cells) was obtained from Cell Line Service, Heidelberg, FRG

#### - Growth medium

MEM (EAGLE) with Glutamax-I (Gibco, Cat.-No. 41090-028), to which 10% calf serum, supplement, and antibiotics have been added:

|                               |                       |
|-------------------------------|-----------------------|
| Penicillin / Streptomycin     | 100 IU/ml / 100 UG/ml |
| Sodium Bicarbonate            | 0.075%                |
| Sodium Pyruvate               | 1 mM                  |
| MEM non-essential amino-acids | 1x                    |
| HEPES                         | 10 mM                 |

#### - Starvation medium and stimulus medium

MEM (EAGLE) with Glutamax-I (Gibco, Cat.-No. 41090-028), to which supplement and antibiotics have been added:

|                               |                       |
|-------------------------------|-----------------------|
| Penicillin / Streptomycin     | 100 IU/ml / 100 UG/ml |
| Sodium Bicarbonate            | 0.075%                |
| Sodium Pyruvate               | 1 mM                  |
| MEM non-essential amino-acids | 1x                    |
| HEPES                         | 10 mM                 |

## Procedure

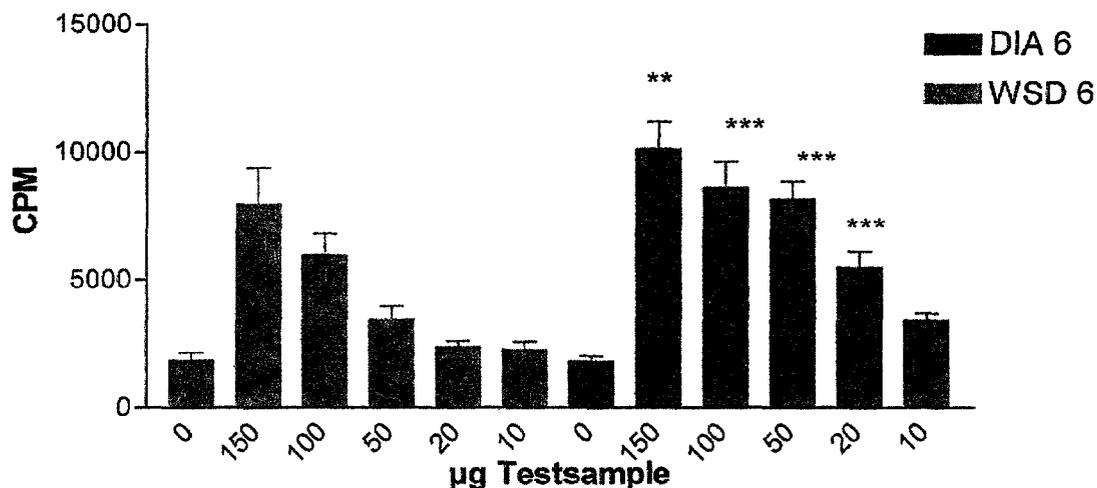
- . The cells are trypsinized as for regular subculturing.
- . The cell count is determined with a Neubauer chamber, and from the result the appropriate number of cells/ml mixed with the growth medium.
- . The concentration of cells to be seeded is adjusted by thinning out the cell suspension to the total volume necessary for distribution throughout the 96-well microtiter plate.
- . The cells are seeded into a 96-well microtiter plate with a flat under surface, using the previously determined concentration necessary to seed 200  $\mu$ l in each well. The cell suspension must be continuously swirled around to ensure that, by thorough mixing, the suspension achieves an identical concentration in each well.
- . The microtiter plate is placed in a CO<sub>2</sub> incubator at 37°C with a humid atmosphere and 5% CO<sub>2</sub>.
- . After a growth phase of 1 -2 days, the plate is removed from the incubator and the medium replaced by starvation medium:
  - The medium is completely removed from the wells and discarded.
  - 200  $\mu$ l fresh starvation medium is added to each well.
  - Culture is continued in the incubator for a further 24 hours.
- . After 24 hours the starvation medium is replaced by stimulus medium:
  - The medium is completely removed from the wells and discarded.
  - 200  $\mu$ l fresh stimulus medium is added to each well.
  - 20  $\mu$ l of concentrated solution in various dilutions is added to the medium as a test substance.
  - For the four-fold determination, the required test solutions at various concentrations are prepared by dilution with stimulus medium to which 1% FCS have been added. The number of dilution steps and the required volumes of the dilutions are obtained from the calibration plan of the microtiter plate. The schemes for pipetting and diluting (the concentration increases logarithmically) are added separately for each investigation.
- The microtiter plate with the test substances is replaced in the incubator for 24 hours.
- At the end of this time, the cells are marked over a period of 4 hours by addition of [methyl-<sup>3</sup>H] thymidine (Amersham, 5 mCi/5 ml, TRK 300) with a final concentration of 1  $\mu$ Ci per well.
  - The plate is replaced in the incubator for a further 4 hours.
- The marked medium is completely removed from the wells in the plate with FilterMate™ Cell Harvester through a UniFilter™ plate of 96 format with an integrated GF/C-Filter and discarded.
- 100 $\mu$ l 0.05% trypsin / 0.02% EDTA solution is pipetted into each well of the microtiter plate, and after 10 min. incubation at room temperature the cells of the 96

## Results

### 1. Comparison of WSD and DIA compounds at increasing doses

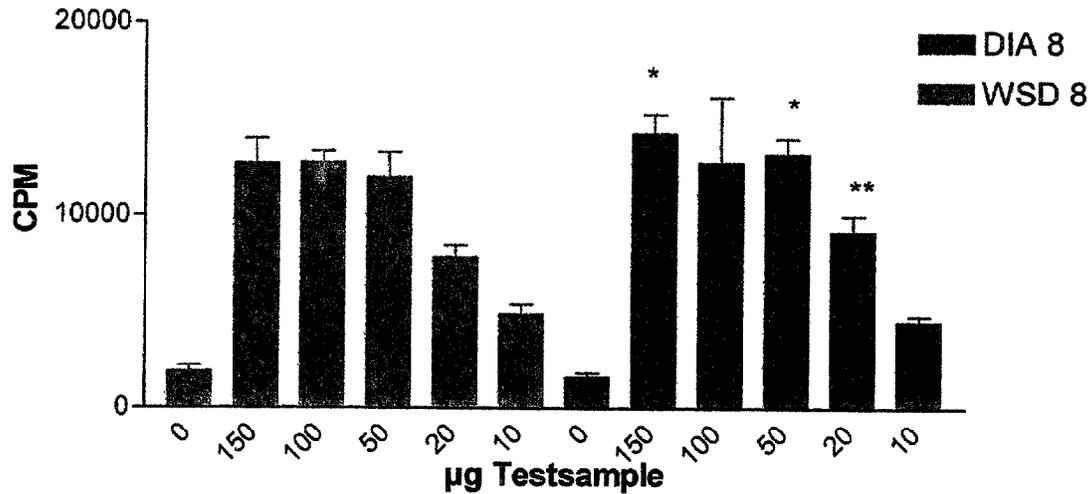
In the first series of experiments DIA and WSD compounds of the same chain length were compared in the range between 10 and 150  $\mu\text{g}$  of the test substance at a constant dose of 1ng aFGF on single plates. Because of the relative high standard deviations obtained in cell culture tests each concentration was analysed in 8 replicates. Mean values and standard deviations were calculated. The values of DIA and WSD samples at equal doses were compared by statistical analysis (t-Test).

#### LMW Heparin induced FGF-1 activation Barcode Barcode 1375



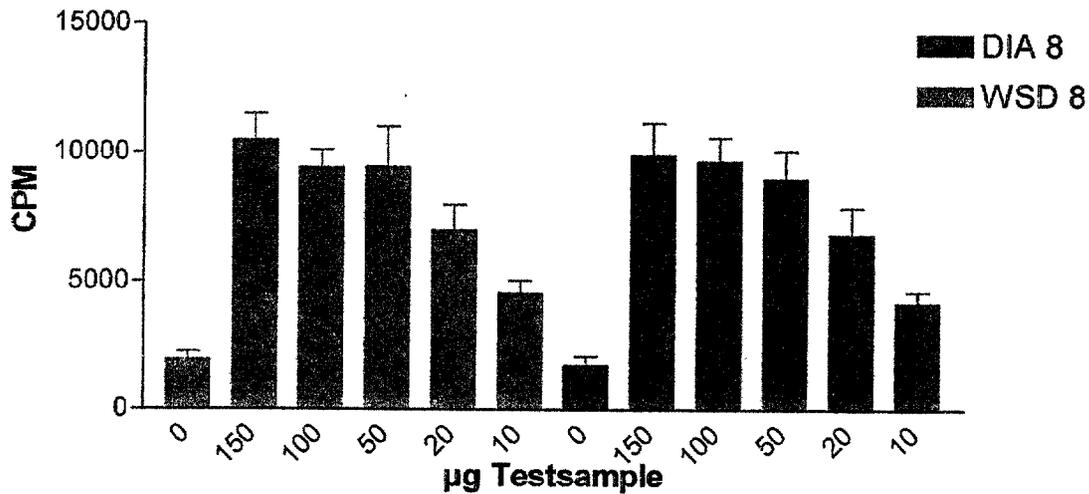
1a. WSD-6 versus DIA-6. The DIA compounds are significantly more active. However we obtained non significant differences in 4 other assays.

**LMW Heparin induced FGF-1 activation  
Barcode 1376**

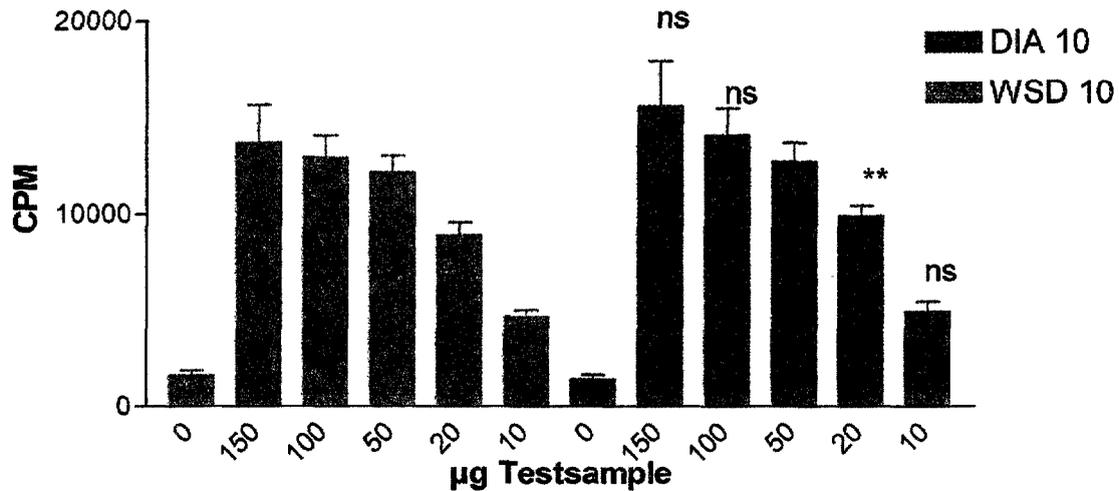


**1b WSD-8 versus DIA-8.** The DIA compounds are significantly more active. However the level of significance is lower compared to the differences measured with the hexasaccharides and could not be found in all assays performed.

**LMW Heparin induced FGF-1 activation  
Barcode 1394**

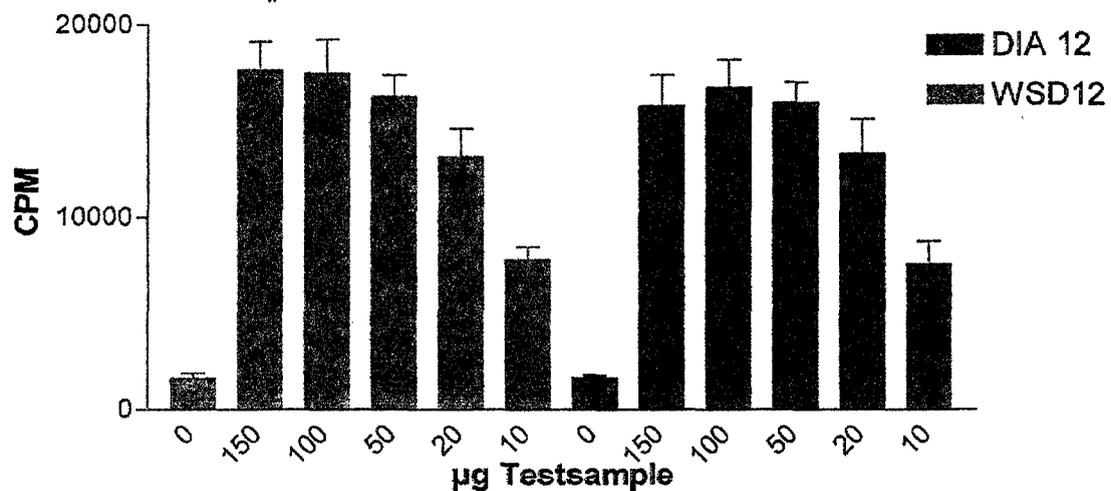


**LMW Heparin induced FGF-1 activation  
Barcode 1377**



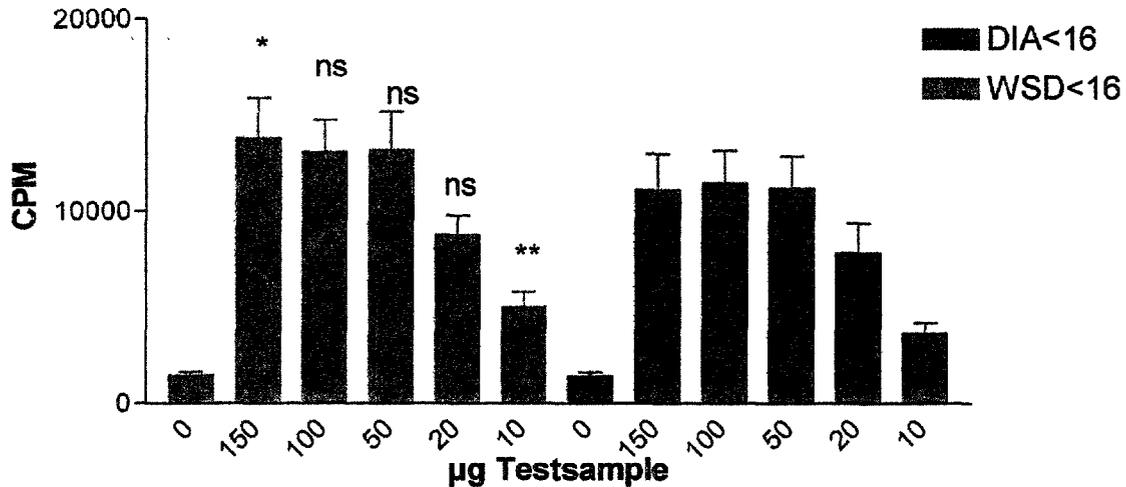
**1c. DIA 10 versus WSD 10** The DIA compounds are significantly more active. However the level of significance is lower compared to the differences measured with the hexasaccharides and could not be found in all assays performed

**LMW Heparin induced FGF-1 activation  
Barcode 1378**



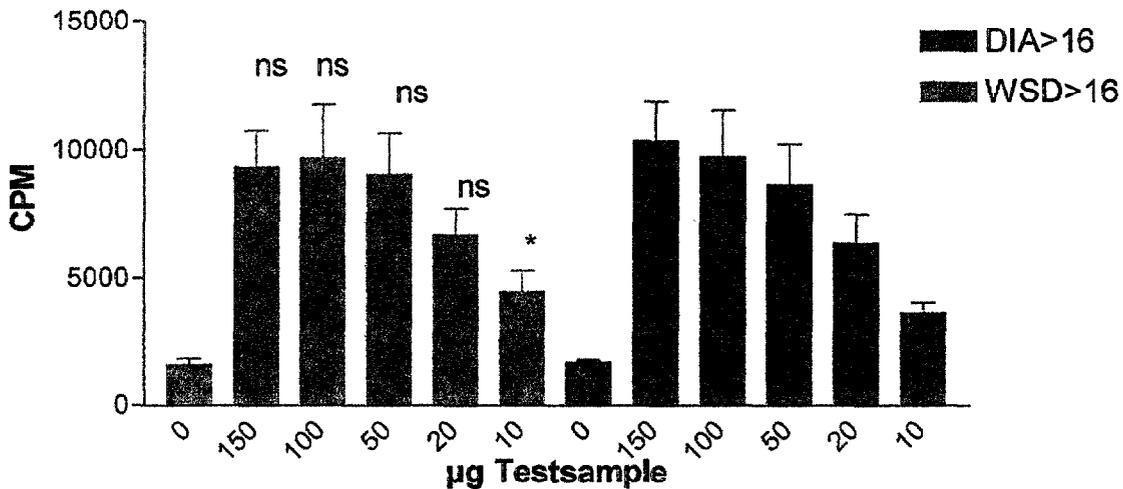
**1d. DIA12 versus WSD 12.** With this assay no difference could be measured. Although at the 150 µg dose of the WSD compound induced a higher cell proliferation. However the fact that with the DIA samples a plateau is reached at lower concentrations compared to the WSD samples can be explained that the DIA samples are more active.

### LMW Heparin induced FGF-1 activation Barcode 1379



1e DIA <16 versus WSD<16

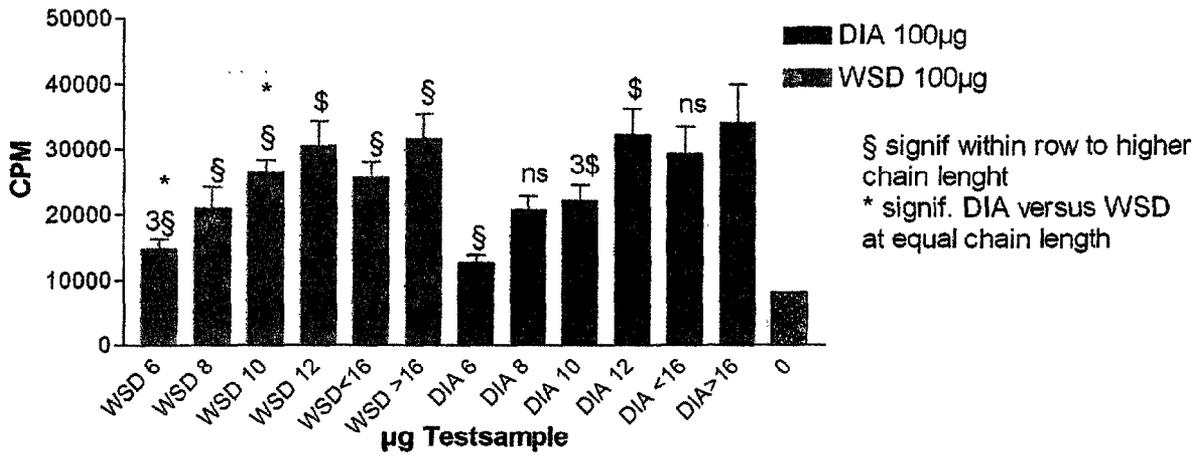
### LMW Heparin induced FGF-1 activation Barcode 1380



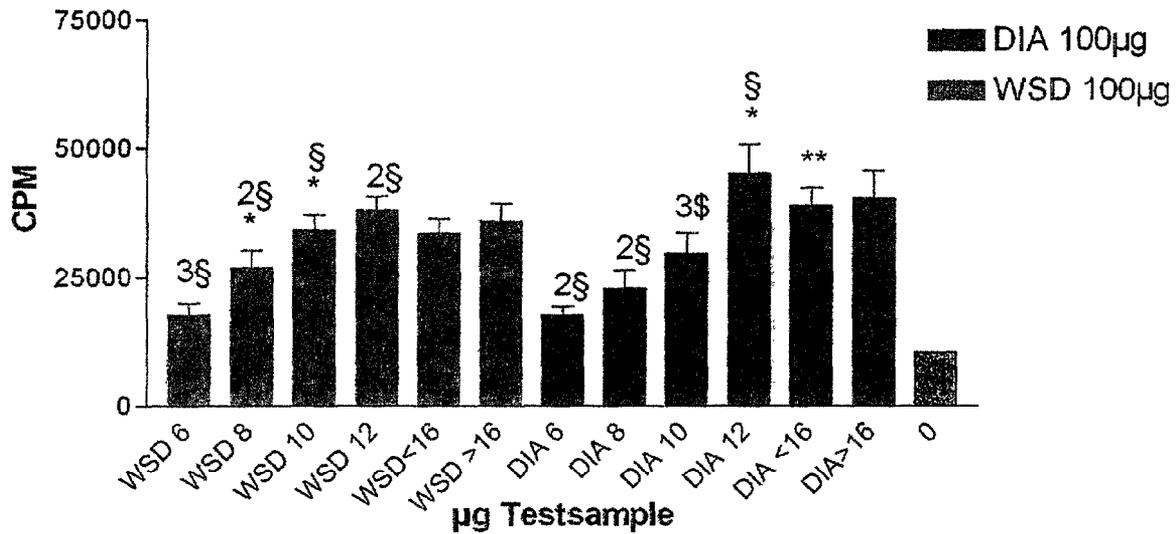
## 2. Comparison of all samples on one plate at a single dose

In order to get more information about the influence of the chain length on the activity we performed assays in which all samples were analysed at one concentration on one plate. Two different cell concentrations  $4 \times 10^4$ , (barcodes 1405-1409) and  $8 \times 10^4$ , (barcode 1410-1414) were tested. As shown in the graphs (barcodes 1404-1414) our previous results, showing a clear increase in activity towards higher chain length (6-12) of both DIA and WSD samples were confirmed. In addition we observed a decrease of thymidine incorporation with the <Hexadecasaccharides in comparison to the dodecasaccharides, with both the DIA and the WSD compound.

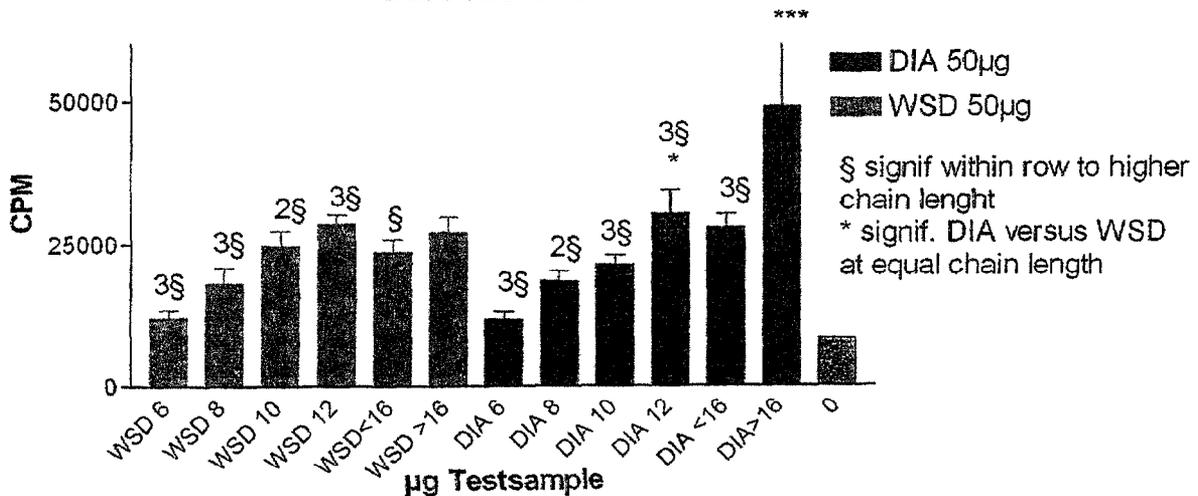
**LMW Heparin induced FGF-1 activation  
Barcode 1406**



**LMW Heparin induced FGF-1 activation  
Barcode 1411**



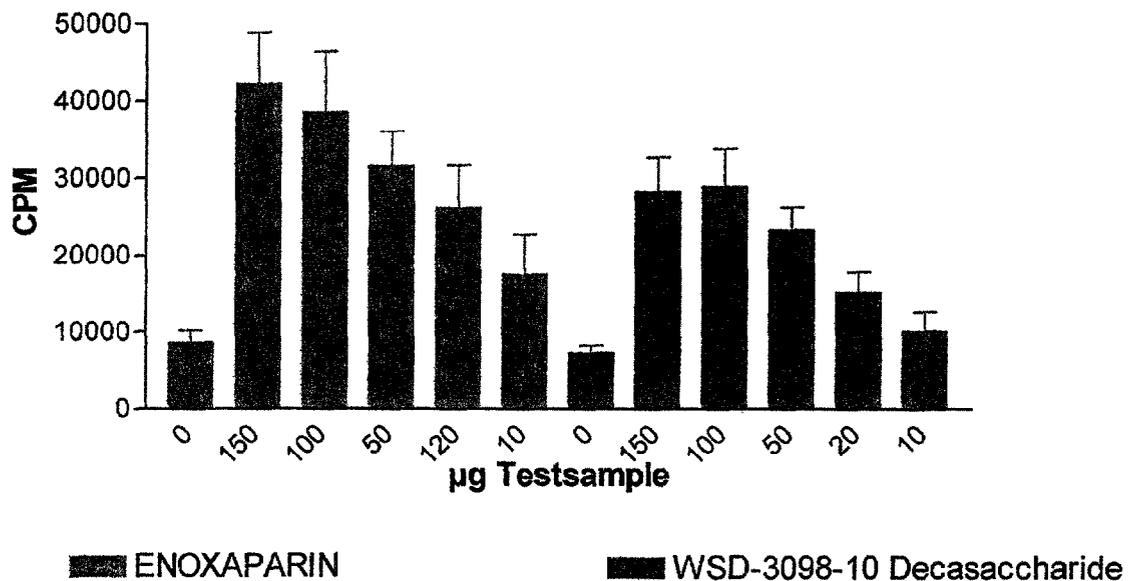
**LMW Heparin induced FGF-1 activation  
Barcode 1407**



### 3. Comparison of WSD samples with Enoxaparin:

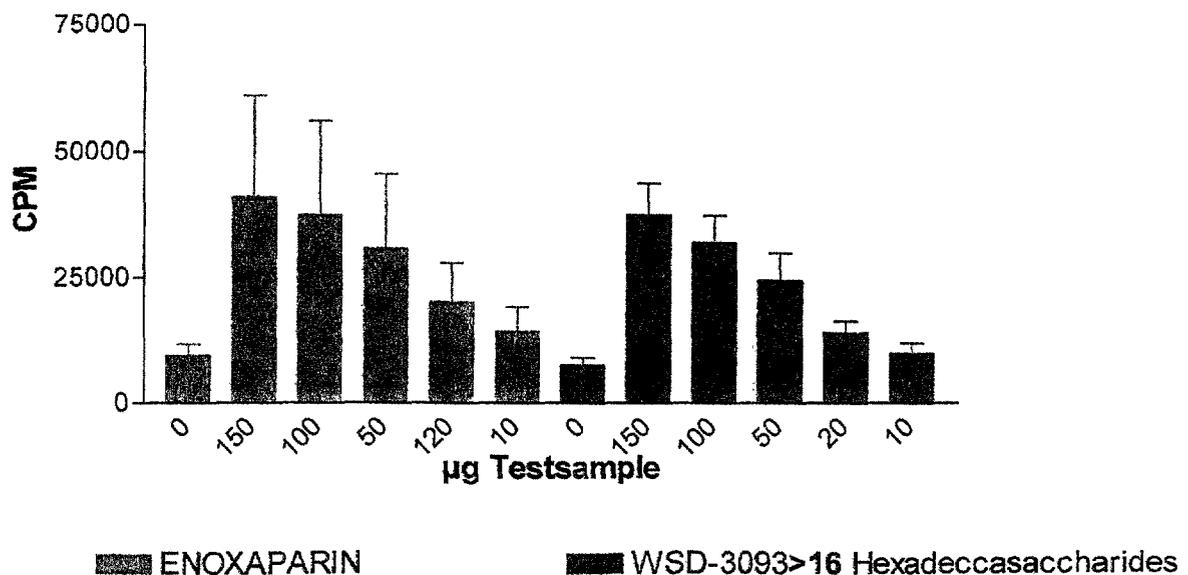
The WSD samples with shorter chain length: 6, 8, 10 and 12 are significantly less active compared to Enoxaparin (barcode 1296, 1297, 1298, 1299)

#### LMW Heparin induced FGF-1 activation Barcode1298



With higher chain length (<16, >16) no difference was observed (Barcode 1301)

#### LMW Heparin induced FGF-1 activation Barcode1301



### Discussion.

The growth of BHK cells is dependent on the presence of aFGF. The growth promoting activity of aFGF can be increased in a dose dependent manner by addition of heparins. Under hypoxic conditions an upregulation of FGF receptors on endothelial cells is observed, in addition infiltrating granulocytes secrete FGFs and various other growth factors thus promoting angiogenesis. Therefore one can assume that angiogenesis can be promoted by heparins. We have tested this assumption in previous investigations using the well established Chorion allantois membrane (CAM) assay. We have found that low molecular heparins can promote angiogenesis compared to unfractionated heparin in a superior way. In particular in contrast to unfractionated heparin the application of higher doses of LMH does not result in suppression of angiogenesis.

The aim of the present study was the comparison of DIA versus WSD compounds of different chain length in the stimulation assay on BHK cells. From the results obtained all samples show to activate FGF-1. As can be seen from the results obtained on single doses on one plate a clear correlation between chain length and activity could be found. The assay is influenced by two important factors. The cell number and the length of time used for stimulation before the radioactive thymidine is added. If the stimulating substance is very active the cells divide very fast and can reach a plateau before the thymidine is added. The same observation is obtained if the cell number is too high. In both cases the values obtained are too low. In addition the amount of drug in relation to the cell number is of importance. Too low concentrations will not sufficiently stimulate the cells. We have therefore performed the assay testing all compounds on one plate with two different cell concentrations  $4 \times 10^4$  and  $8 \times 10^4$ . As can be seen from the two assays at the  $150 \mu$  dose (barcode 1405 and 1410) the amount of radioactivity is increased at the higher cell numbers; therefore, at the lower cell number the concentration of the stimulating substance is still in the optimal range. From both assays comparable results have been obtained. In summary we conclude that a clear positive correlation between chain length and activity is present. At the lower chain length, 6-10, there is a tendency towards higher activity of the WSD compounds which is reversed towards the DIA compounds at higher chain length. The observation that a decrease of activity is seen with the <Hexadecasaccharides samples is difficult to explain. We can exclude any weight mistakes because the amount of substance per vial had been indicated by the sponsor.

## References

1. Baffour, R., J. Berman, J. L. Garb, S. W. Rhee, J. Kaufman, P. Friedmann  
Enhanced angiogenesis and growth of collaterals by in vivo administration of recombinant basic fibroblast growth factor in a rabbit model of acute lower limb ischemia: Dose-response effect of basic fibroblast growth factor.  
*Journal of Vascular Surgery* 16, 181-191 (1992)
2. Battler, A., M. Scheinowitz, A. Bor, D. Hasdai, Z. Vered, E. di Segni, N. Varda-Bloom, D. Nass, S. Engelberg, M. Eldar, M. Belkin, N. Savion  
Intracoronary Injection of Basic Fibroblast Growth Factor Enhances Angiogenesis in Infarcted Swine Myocardium.  
*JACC* 22, 2001-2006 (1993)
3. D'Amore, P.A.  
Heparin-Endothelial Cell Interactions.  
*Haemostasis* 20 (suppl.1), 159-165 (1990)
4. Dawes, J.  
Interactions of heparins in the vascular environment  
*Haemostasis* 23 (suppl.1), 212-219 (1993)
5. Di Gabriele, A.D., I. Lax, D.I. Chen, C.M. Svahn, M. Jaye, J. Schlessinger, W.A. Hendrickson  
Structure of a heparin-linked biologically-active dimer of fibroblast growth factor  
*Nature* 393, 812-817 (1998)
6. Faham, F., R.J. Linhardt, D.C. Rees  
Diversity does make a difference: fibroblast growth factor-heparin interactions.  
*Current opinion in structural biology* 8, 578-86 (1998)
7. Folkman J., Y. Shing  
Angiogenesis.  
*The Journal of Biological Chemistry* 267, 10931-10934 (1992)
8. Garfinkel, S., X. Hu, I.A. Prudovsky, G.A. McMahon, E.M. Kapnik, S.D. McDowell, T. Maciag  
FGF-1-dependent proliferative and migratory responses are impaired in senescent human umbilical vein endothelial cells and correlate with the inability to signal tyrosine phosphorylation of fibroblast growth factor receptor-1 substrates.  
*Journal of Cell Biology* 134, 783-91 (1996)
9. Giordano, F.G., P. Ping, M. D. McKirnan, S. Nozaki, A. N. de Maria, W. H. Dillmann, O. Mathieu-Costello, H. K. Hammond  
Intracoronary gene transfer of fibroblast growth factor-5 increases blood flow and contractile function in an ischemic region of the heart.  
*Nature Medicine* 2, 534-539 (1996)

10. Gospodarowicz, D., and J. Cheng  
Heparin protects basic and acidic FGF from inactivation  
*J. of Cellular Physiology* 128, 475-484 (1986)
11. Gospodarowicz, D., J. Cheng, G.-M. Lui, A. Baird, P. Bühlent  
Isolation of brain fibroblast growth factor by heparin-Sepharose affinity chromatography: Identity with pituitary fibroblast growth factor.  
*Proc. Natl. Acad. Sci.* 81, 6963-6967 (1984)
12. Harada, K., W. Grossman, M. Friedman, E. R. Edelman, P. V. Prasad, C. S. Keighley, W. J. Manning, F. W. Sellke, M. Simons  
Basic Fibroblast Growth Factor Improves Myocardial Function in Chronically Ischemic Porcine Hearts.  
*J. Clin. Invest.* 94, 623-630 (1994)
13. Herr, A.B., D.M. Ornitz, R. Sasisekharan, G. Venkatamaran, G. Waksma  
Heparin-induced self-association of fibroblast growth factor-2. Evidence for two oligomerization processes.  
*J Biol Chem* 272, 16382-16389 (1997)
14. Klein, S., M. Roghani, D. B. Rifkin  
Fibroblast growth factors as angiogenesis factors: New insights into their mechanism of action.  
(1997) In: *Regulation of Angiogenesis*, pp. 159-192 (eds. I. D. Goldberg & E. M. Rosen), Birkhäuser Verlag Basel/Switzerland
15. Kuwabara, K., S. Ogawa, M. Matsumoto, S. Koga, M. Clauss, D.J. Pinsky, P. Lyn, J. Leavy, L. Witte, J. Joseph-Silverstein, M.B. Furie, G. Torcia, F. Cozzolino, T. Kamada, D.M. Stern  
Hypoxia-mediated induction of acidic/basic fibroblast growth factor and platelet-derived growth factor in mononuclear phagocytes stimulates growth of hypoxic endothelial cells  
*.Proc. Natl. Acad. Sci.* 92, 4606-4610 (1995)
16. Lazarous, D.F., M. Scheinowitz, M. Shou, E. Hodge, S. Rajanayagam, S. Hundsberger, W. G. Robison Jr., J. A. Stiber, R. Correa, St. E. Epstein, E. F. Unger  
Effects of Chronic Systemic Administration of Basic Fibroblast Growth Factor on Collateral Development in the Canine Heart.  
*Circulation* 91, 145-153 (1995)
17. Libersan, D., A. Khalil, P. Dagenais, E. Quan, F. Delorme, A. Uzan, J.G. Latour  
The low molecular weight heparin, Enoxaparin, limits infarct size at reperfusion in the dog.  
*Cardiovascular Research* 37, 656-666 (1998)
18. Mikhailov, D., R.J. Linhardt, K.H. Mayo  
NMR solution conformation of heparin-derived hexasaccharide  
*Biochem J* 328, 51-61 (1997)

19. Ogura, K., K. Nagata, H. Hatanaka, H. Habuchi, K. Kimata, S. Tate, M.W. Ravera, M. Jaye, J. Schlessinger, F. Inagaki  
Solution structure of human acidic fibroblast growth factor and interaction with heparin-derived hexasaccharide.  
*Journal of Biomolecular NMR* 13, 11-24 (1999)
20. Olwin BB, Hauschka SD  
*Journal of Cellular Biochemistry*. 39:443-54, 1989
21. Schumacher, B., P. Pecher, B.-U. von Specht, T. Stegmann  
Induction of neoangiogenesis in ischemic myocardium by human growth factors: first clinical results of a new treatment of coronary heart disease.  
*Circulation*. 97(7), 645-50 (1998)
22. Sharma, H.S., M. Wünsch, M. Schmidt, R. J. Schott, R. Kandolf, W. Schaper  
Expression of angiogenic growth factors in the collateralized swine myocardium.  
(1992) In: *Angiogenesis: Key Principles Science Technology Medicine*. pp 255-260  
(eds. R. Steiner, P. B. Weisz & R. Langer), Birkhäuser Verlag Basel/Switzerland
23. Slavin, J., *Fibroblast Growth Factors: At the Heart of Angiogenesis*. *Cell Biology International* 19, 431-439 (1995)
24. Spivak-Kroizman, T., M.A. Lemmon, I. Dikic, J.E. Ladbury, D. Pinchasi, J. Huang, M. Jaye, G. Crumley, J. Schlessinger, I. Lax  
Heparin-induced oligomerization of FGF molecules is responsible for FGF receptor dimerization, activation and cell proliferation.  
*Cell* 79, 1015-1024 (1994)
25. Venkataraman, G., R. Raman, V. Sasisekharan, R. Sasisekharan  
Molecular characteristics of fibroblast growth factor-fibroblast growth factor receptor-heparin-like glycosaminoglycan complex.  
*Proceedings of the National Academy of Sciences of the United States of America* 96:1358-3663 (1999)
26. Venkataraman, G., Z. Shriver, J.C. Davis, R. Sasisekharan  
Fibroblast growth factors 1 and 2 are distinct in oligomerization in the presence of heparin-like glycosaminoglycans.  
*Proceedings of the National Academy of Sciences of the United States of America* 96, 1892-1897 (1999)
27. Waksman, G., A.B. Herr  
New insights into heparin-induced FGF oligomerization.  
*Nat. Struct. Biol.* 5, 527-530 (1998)
28. Walker, A., J.E. Turnbull, J.T. Gallagher  
Specific heparin sulfate saccharides mediate the activity of basic fibroblast growth factor  
*J. Biol. Chem.* 269, 931-935 (1994)

29. Yanagisawa-Miwa, A., A., Y. Uchida, F. Nakamura, T. Tomaru, H. Kido, T. Kamijo, T. Sugimoto, K. Kaji, M. Utsuyama, Ch. Kurashima, H. Ito  
Salvage of Infarcted Myocardium by Angiogenic Action of Basic Fibroblast Growth Factor.  
Science 257, 1401-1407 (1992)

Young, E.,B. Cosmi, J. Weitz  
Comparison of the non specific binding of unfractionated heparin and low molecular weight heparin (Enoxaparin) to plasma proteins.  
Thrombosis and Haemostasis 70, 635-630 (1993)

I hereby certify that the experimental studies described and the analyses presented in this report were conducted by me and/or under my supervision.

Freiburg 2.2.04 B.U. Specht

---

PRINT NAME: Prof. Bernd-Ulrich von Specht, MD, PhD  
Department of Experimental Surgery; University of Freiburg; Germany

---