The Use Of Factor VIII Prophylaxis For The Prevention And Treatment Of Joint Bleeding In Patients With Severe Hemophilia A

1Roshyn SK, 1Yesotha T, 1L Azura, 2Jameela S, 1Felix LYS
1Department of Orthopaedic & Traumalogy, Hospital Ampang
2Department of Hematology, Hospital Ampang

INTRODUCTION:
Haemophilia is an inherited bleeding disorder caused by deficiency of factors VIII or IX (FVIII/IX). Severe deficiency is associated with recurrent spontaneous bleeding into the joints and results in haemophilic arthropathy, disability and reduced quality of life. Bleeding is treated with intravenous FVIII/IX concentrate, which majority will self-administer at home. Although initially FVIII/IX was administered on demand once bleeding started, increasingly, it is now being used prophylactically to prevent bleeding.

METHODOLOGY:
A Retrospective Study to assess the symptoms of joint bleeding in patients with Hemophilia A. Three patients who were recruited into BAXTER-855 study were selected and started on prophylaxis FVIII infusion. Data was collected based on symptoms at 0 days (onset of prophylaxis), post prophylaxis 1 year, 5 years and now. We documented the Frequency, Site, Type of Bleeding - either spontaneous or traumatic and absent days from work/school. We also interviewed the patients to look at their ambulatory status, physical activities and compared that with the acceptable level of activities of patients in similar age group.

RESULTS:
Demographic Data
Age when Prophylaxis FVIII was started Patient A (28 years), Patient B (25 years) and Patient C (23 years). All patients have been on Prophylaxis for 7 years.

SYMPTOMS | PATIENT
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**Bleeding Frequency**<br>0.5 times /week | 1 time /week | 0.3 times /week
**Type of Bleeding**<br>Spontaneous & Traumatic | Spontaneous |
**Site of Bleeding**<br>Right toe, Left knee Left shoulder | Left ankleLeft foot Right knee Left elbow Right elbow<br>Left ankle Left elbow<br>Left ankle Left elbow<br>Left ankle Left elbow<br>Left ankle Left elbow
**Absent Days**<br>NIL | 2 | 0

TABLE 1: ONSET OF PROPHYLAXIS

SYMPTOMS | PATIENT
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**Bleeding Frequency**<br>NIL | 0.17 times /week | 0.3 times /week
**Type of Bleeding**<br>NIL | Spontaneous |
**Site of Bleeding**<br>NIL | Left ankle |
**Absent Days**<br>NIL | 2 | 0

TABLE 2: 1 YEAR POST PROPHYLAXIS

The current results showed that pts no longer have symptoms of hemarthrosis and able to perform daily activities with no limitation.

DISCUSSIONS:
Prophylaxis with recombinant factor VIII was effective in preventing hemarthrosis and joint damage in patients with hemophilia A. In our study, prophylaxis was initiated in three pts with frequent joint bleeding. Results showed that the symptoms of joint bleeding are almost negligible after starting them on regular prophylaxis. They could perform daily activities without limitation.

CONCLUSION:
Although prophylaxis is now considered the gold standard for the treatment of severe haemophilia in childhood and adolescences, its use in adulthood is infrequent. Our study shows prophylaxis should be the gold standard in