

Clinical presentation of inhibitor development in nonsevere haemophilia A

Conclusion

- Half of the patients with nonsevere haemophilia A and inhibitors developed high titre inhibitors.
- More than half of the patients (57%) presented with bleeding complications; 46% had changed to a severe phenotype.
- These findings stress the importance of close follow-up after exposure to factor VIII concentrates in patients with nonsevere haemophila A.

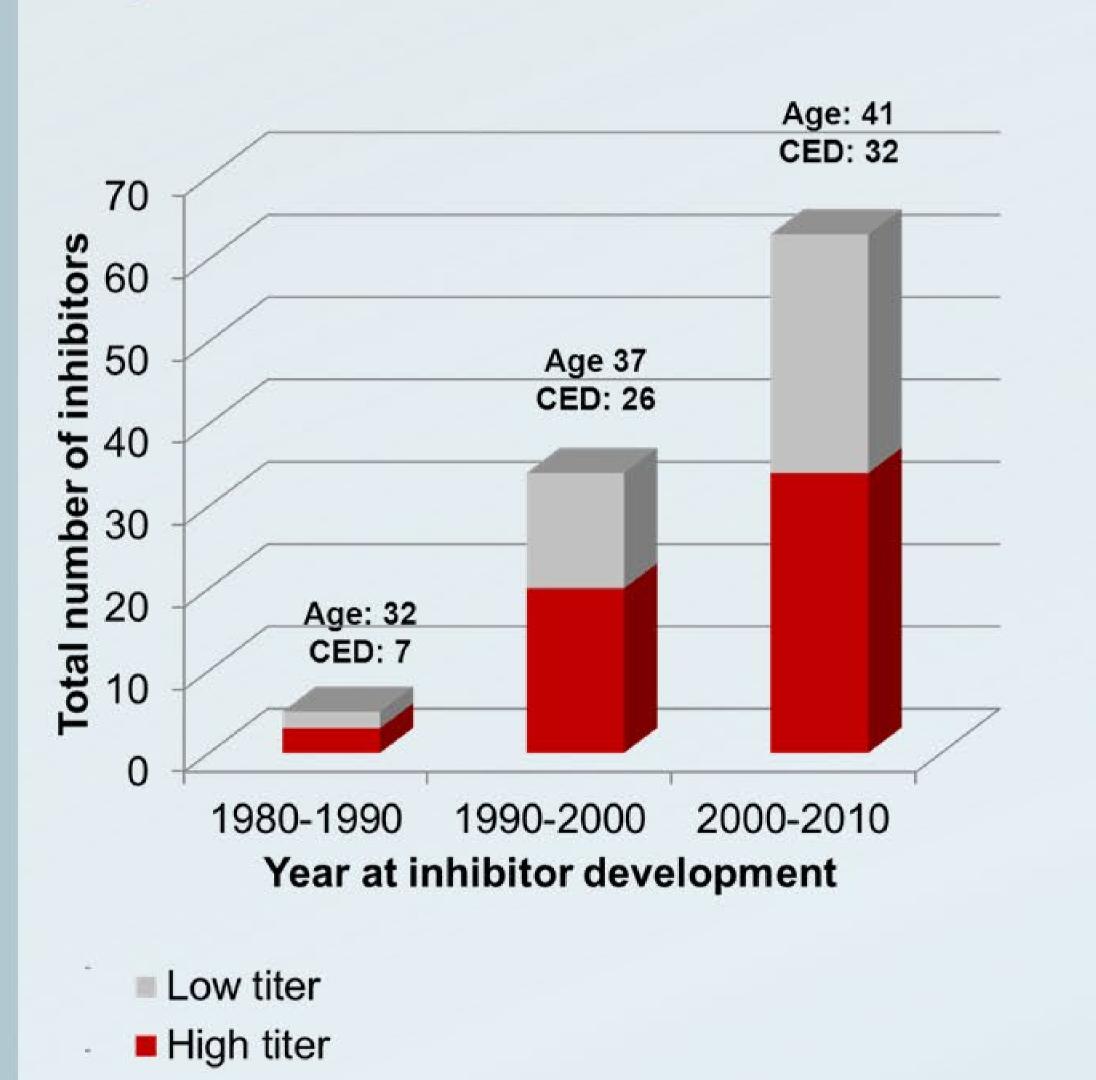
Objectives

- The aim of current study was to describe the presenting symptoms of inhibitor development in a large unselected cohort of nonsevere haemophilia A patients.
- Inhibitor development in nonsevere haemophilia A (FVIII:C, 2-40 IU/dL) has a heterogenous clinical phenotype, ranging from irrelevant transient inhibitors to high titre neutralizing antibodies with severe bleeding complications.
- Data on inhibitors in nonsevere patients are scarce and selected, favouring those with severe complications.

Results

- Two third of the inhibitors developed after the year 2000 (Fig. 1). Inhibitors developed after a median of 37 years and 28 exposure days (Fig. 2).
- Fifty-seven patients (56%) had developed high titre inhibitors (>5 BU/mL).
- More than half of the patients (n=61) had an increased bleeding tendency at presentation with inhibitor (Fig. 3).
- In 8o patients (8o%) endogenous FVIII:C was decreased to below 5 IU/dL (including 33/44 patients with low titer inhibitors), of whom FVIII:C fell below ≤ 0.01 IU/mL in 49 patients (46%).

Fig. 1 Year of inhibitor detection



CED, median cumulative number exposure days to factor VIII; Age, median age in years

Fig. 2 Age at inhibitor detection

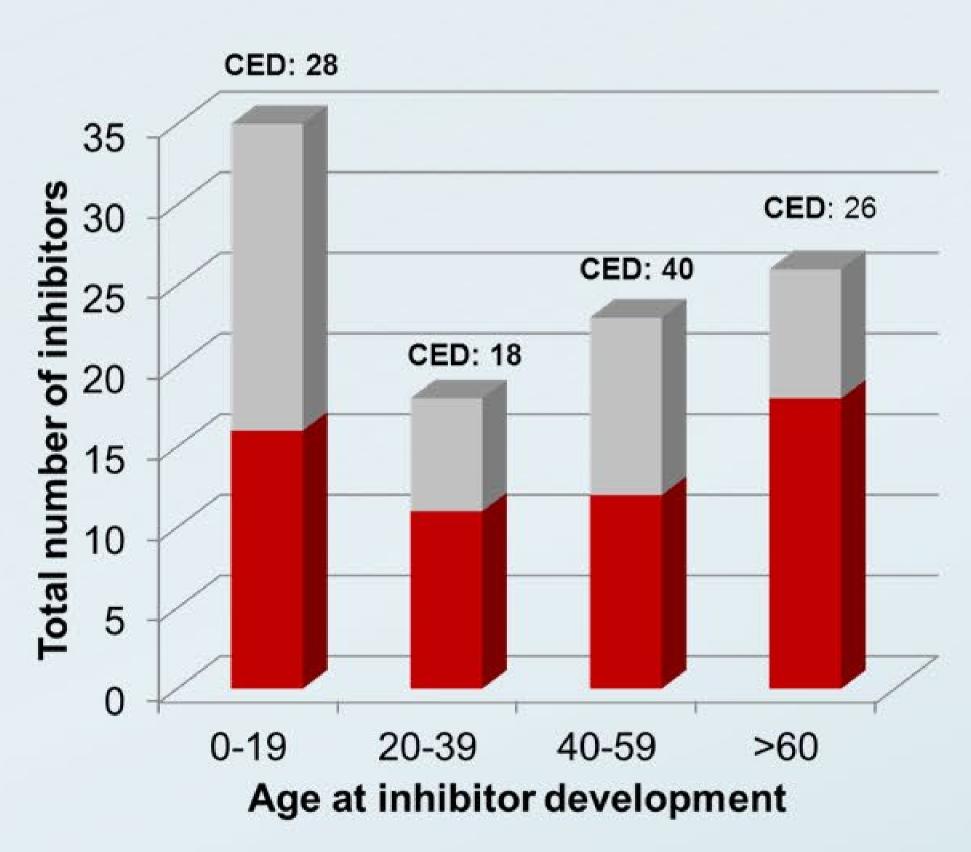
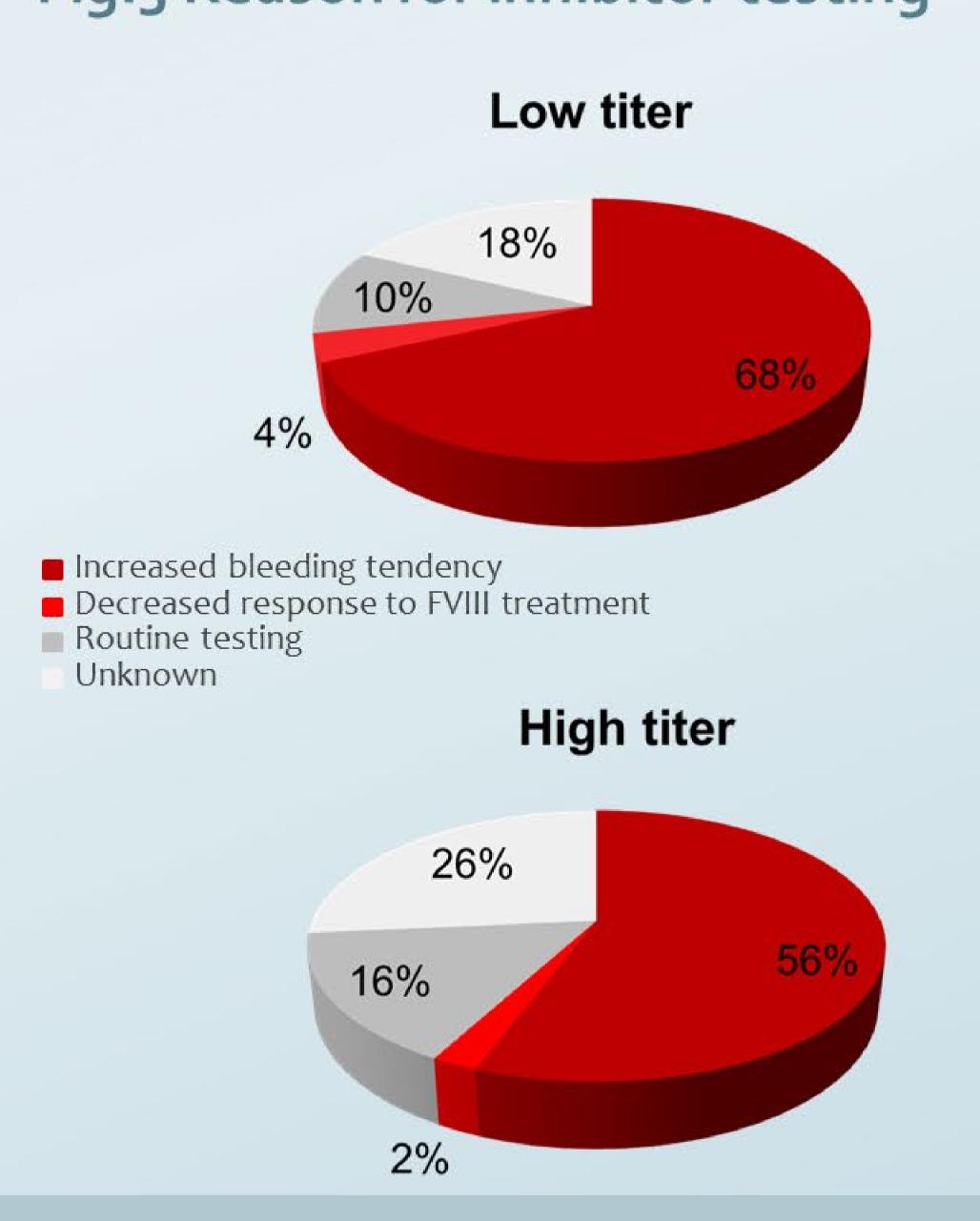


Fig. 3 Reason for inhibitor testing



Methods

- Clinical data were collected of 107 inhibitor patients derived from a source population of 2,709 nonsevere haemophilia A patients that were treated between 1980 and 2011 in 34 European and Australian centers.
- Patients were subdivided according to age and calendar period at time of inhibitor development (10-year groups), aiming to search for age-related trends and trends over time.



Corien L. Eckhardt, Alice 5, van Velzen, Marjolein Peters, Jan Astermark, Paul P. Brons, Giancarlo Castaman, Marjon H. Cnossen, Natasja Dors, Carmen Escuriola-Ettingshausen, Karly Hamulyak, Daniel P. Hart, Charles R.M. Hay, Saturnino Haya, Waander L. van Heerde, Cedric Hermans, Margareta Holmström, Victor Jimenez-Yuste, Russell D. Keenan, Robert Klamroth, Britta A.P. Laros-van Gorkom, Nijziel,26 Johannes Oldenburg,27 Kathelijne Peerlinck,28 Pia Petrini,19 Helena Platokouki,29 Sylvia E. Reitter-Pfoertner,19 Elena Santagostino,30 Piercarla Schinco,31 Frans J. Smiers,32 Berthold Siegmund,33 Annarita

us University Medical Center, Rotterdam, the Netherlands; 6Catharina Hospital, Eindhoven, the Netherlands; 7JW Goethe University Hospital, Frankfurt, Germany; 8Maastricht University Medical ¹⁹Aghia Sofia Children's Hospital, Athens, Greece; ³⁰Ospedale Maggiore Policlinico, Fondazione IRCCS Ca' Granda, Milan, Italy; ³San Giovanni Battista "Molinette" Hospital, Turin, Italy; ३²Leiden University



Poster

