



# The HEMONLINE Project: preliminary results

G. Sottilotta, P. Arrigo, L. Drago, E. Mallamace,  
S. Martorano, E. Romeo and V. Trapani Lombardo

The Hemonline Project Staff - Reggio Calabria (Italy)

## Introduction

The Calabria regional health service does not offer a home care for hemophiliacs: patients resident far from the hospital and family members involved in treatment have often difficulties to reach the Hemophilia Centre, also because of the socio-economical costs due to workplace absences.

## Aims

Providing therapies, medical and nursing care, psychological and physiotherapeutic home assistance to patients. Reduction of economical and social costs subsequent to absence from workplace in case of haemorrhages. Decrease of costs related to hospitalizations, surgical or invasive procedures consequent to late treatment. Improvement of psycho-social quality of life in patients and relatives.

Figure 1: Geographical localization of enrolled patients



## Methods

The HEMONLINE project, winner of a grant promoted by Fondazione Paracelso (Milan, Italy), allowed the enrolment of 20 severe hemophiliacs (16 HA, 4 HB, age 2-73, mean 31,4; 8 children, 12 adults); the staff consists of one doctor, one nurse, one physiotherapist, one psychologist and one statistician. Study period: 2011 - 2014; three times per years, the staff will move to the patient's home residence where the doctor will carry out a complete medical check-up, the nurse will bring the replacement therapy, collect blood samples, and perform home therapy; the physiotherapist will suggest suitable hobbies and sports activities to paediatric patients and also implement in adults the training programme after bleeding or after orthopaedic surgery, as well as continue the rehabilitation exercises; the psychologist will evaluate the patients' mental condition through an interview and by filling out specific questionnaires for patients and parents; every patient received a notebook with webcam and internet connection to contact health professionals easily.

😊	A Hemophilia: 16 patients
😄	B Hemophilia: 4 patients

## Results

Three months after the startup, 75 % of patients have been visited once; nine patients with arthropathy started specific rehabilitation exercises, one continued his program. The psychological evaluation evidenced compromised physical conditions in adults, the difficulty to practice sports or social activities because of hemophilia, as well as difficulties in accepting the disease.

Table 1: Patients' times of percorrence from home to hospital

Patient's home	Distance to the Hemophilia Centre	Driving Distance to the Hospital
Acireale (CT)	99 km	2 h 30 min
Villafranca Tirrena (ME)	40 km	1 h 45 min
Marina di Gioiosa (RC)	101 km	1 h 32 min
Messina	18 km	1 h 30 min
Polistena (RC)	68 km	1 h 10 min
Varapodio (RC)	62 km	1 h
Delianuova (RC)	60 km	1 h
Bagnara (RC)	41 km	45 min
Rosali (RC)	14 km	20 min



## Conclusions

The project has just begun: we hope in a significant reduction of costs for local Health Service, but mostly in the improvement of the quality of life for patients and their families; this will be also achieved by the enhancement of the doctor-patient relationship through the use of the Internet

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