

AGEING AND QUALITY OF LIFE IN PERSONS WITH HEMOPHILIA

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INTRODUCTION

Currently, persons with hemophilia are living longer and the life expectancy is reaching almost that of general male population. However, having in mind that their health condition dramatically deteriorate with age (Dolan, 2010; Street *et al.*, 2006; Siboni *et al.*, 2009), we investigated how these changes affect their everyday-life, particularly the level of personal well-being and happiness.

RESULTS

The level of happiness and all domains of subjective well-being in relation to age showed a statistically significant negative correlation. However, the significance was reversed if the influence of disability level (PWI – $r=-0,075$; $p>0,05$, Happiness $r=-0,014$; $p>0,05$) and/or movement impairment (PWI – $r=-0,114$; $p>0,05$, Happiness $r=-0,140$; $p>0,05$) was excluded.

The most significant decrease in well-being and personal happiness level (lowest score in all analyzed domains) was observed among hemophiliacs in the third age group (41-50 years). The average educational and the employment levels in that group were significantly lower than in the previous group (31-40 years), but the level of movement impairment was significantly higher.

DISCUSSION AND CONCLUSION

These results suggest that aging per se is not a direct predictor of lower levels of personal well-being and happiness, unless it is accompanied by increased movement impairment and higher degree of disability, which in hemophiliacs often correlates with age.

Moreover, our results show that the third age group is the most vulnerable among hemophiliacs and requires special attention. In the subsequent analysis we revealed an objective cause for such finding, and our results clearly emphasize the importance of a prompt and an adequate treatment to prevent excessive bleeding that can result in musculoskeletal disorder and increased level of the disability.

At the same time, this is a clear indication of a strong need to encourage education among young persons with hemophilia and to orientate them towards professions in which a reduction of the body's motor functions would not significantly limit the performance that can lead to loss of the employment.

METHODS

We conducted an empirical survey among adults with hemophilia in Croatia (N=135). The sample was divided into four age groups: ≤ 30 years; 31-40 years, 41-50 years, ≥ 51 years. Subjective well-being was measured by using the *Personal Wellbeing Index – PWI* (Cummins, 2002), which measures satisfaction within life domains. The affective component of subjective well-being was examined by using the *Happiness measure* from the *Fordyce scale* (Fordyce, 1988).

Table 1: Clinical and demographic characteristics

Type of hemophilia	N	%
Hemophilia A	110	81,48
Hemophilia B	24	17,78
Level of hemophilia		
Severe	55	40,74
Moderate	21	15,56
Mild	30	22,22
Unknown	29	21,48
Inhibitors		
Yes	15	11,11
No	67	49,63
Unknown	53	39,26
Age		
≤ 30 years	43	31,85
31-40 years	35	25,93
41-50 years	24	17,78
≥ 51 years	31	22,96
Unknown	2	1,48

Figure 1: Personal well-being and happiness in relation to age

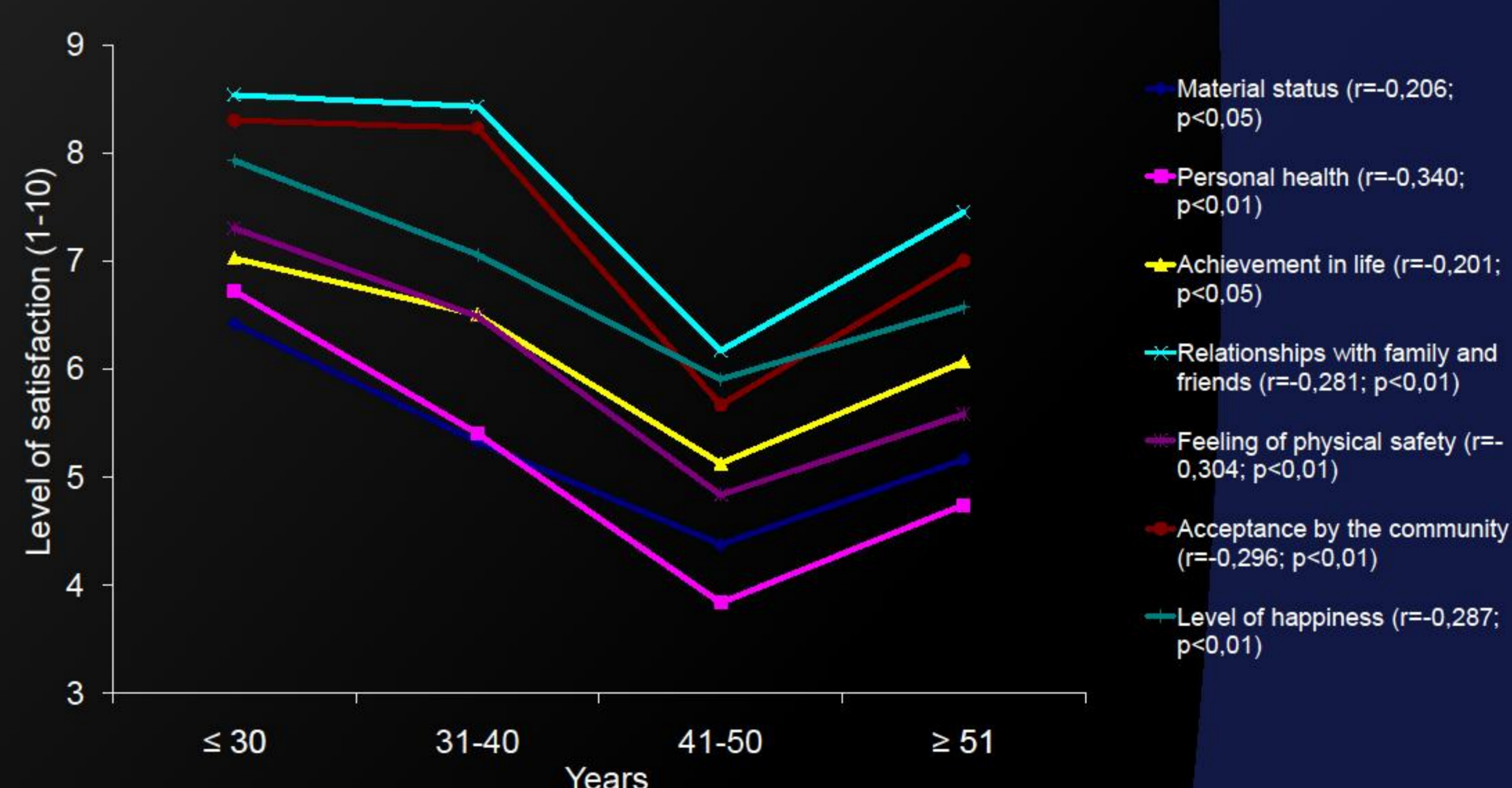


Figure 2: Educational level in relation to age

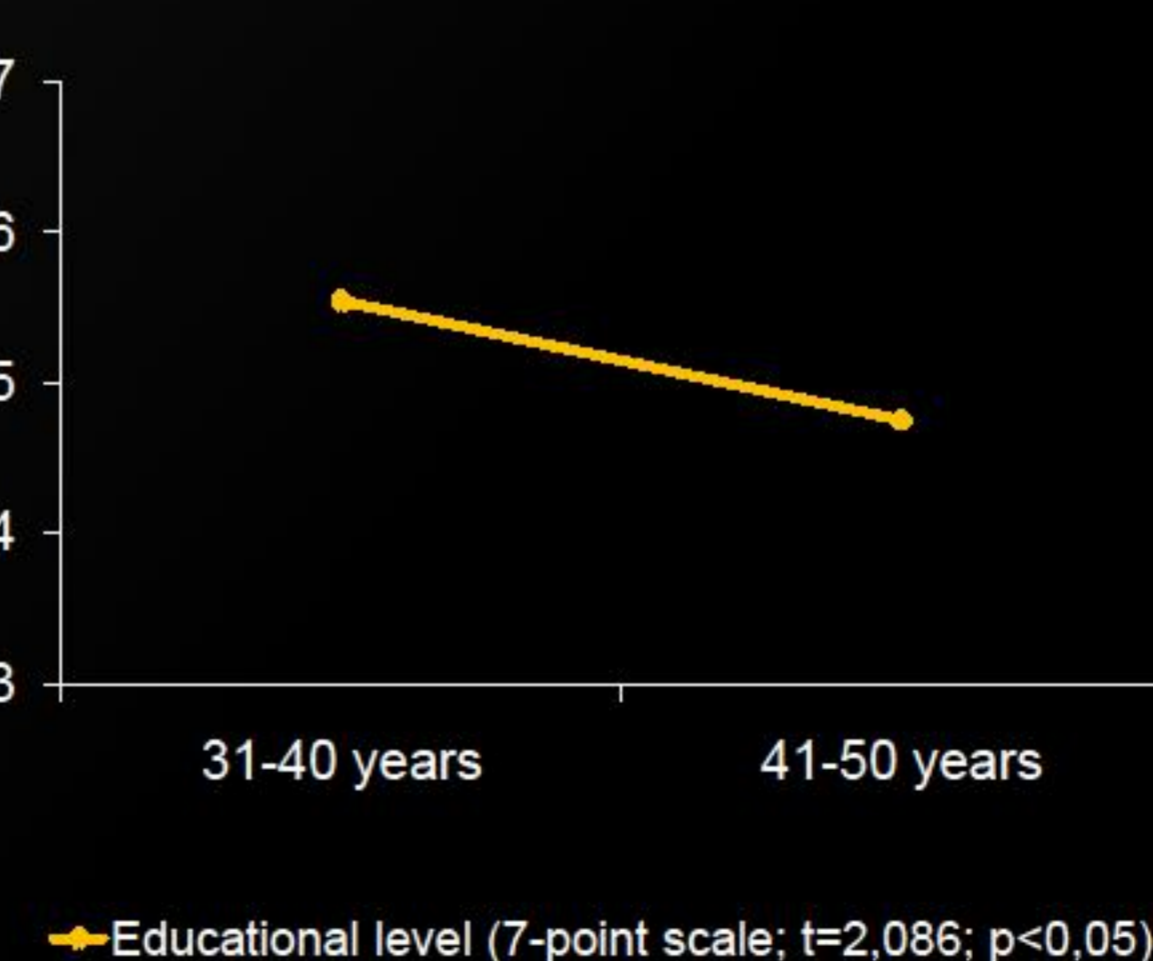
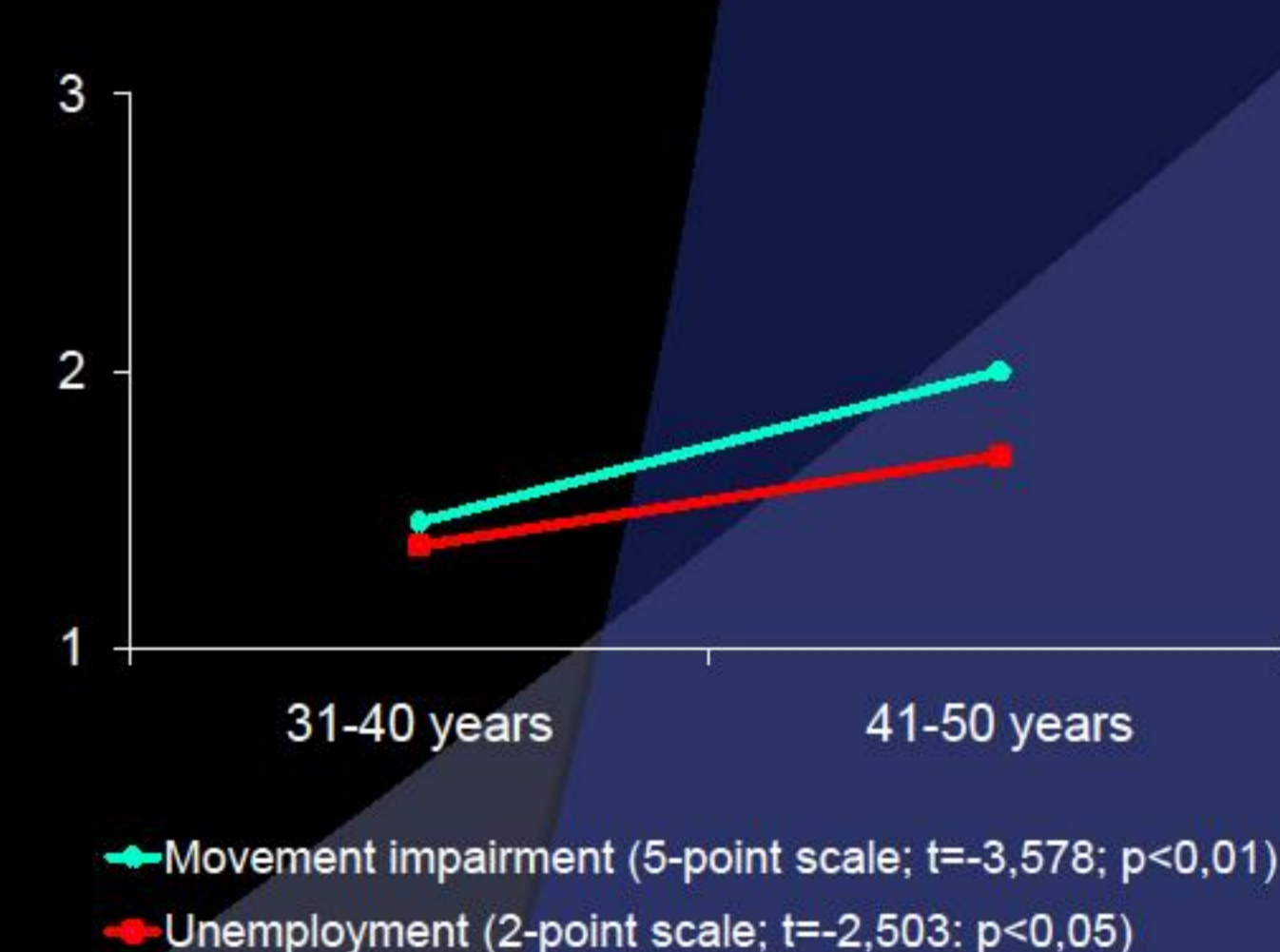


Figure 3: Movement impairment and unemployment in relation to age



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