

Pharmacokinetic: APTT; FVIII, FIX level. Is the Prophylaxis effective?

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OBJECTIVES

Prevention is the therapy recommended for the control of bleeding in hemophilia, providing quality of life and preservation especially of the musculoskeletal system. The Efficacy of prophylaxis can be measured by laboratory evaluation indices of coagulation: APTT and factor VIII / IX, pharmacokinetic level. After the dose prophylaxis according to body weight, blood samples were evaluated after 2, 24, 48 hours for hemophilia A and adding assessment for 72 hours for hemophilia B.

METHODS

We evaluated patients with hemophilia A and B in a single Brazilian HEMOPHILIA treatment center (HTC) submitted to the primary, secondary and tertiary prophylaxis. Laboratory tests APTT and factor VIII / FIX were evaluated by the coagulometric method 2, 24, 48 and 72 hours. The prophylaxis Malmo Protocol was used as references doses.

RESULTS

82 patients were analyzed blood samples from 0- ≥45 years. Hemophilia A patients 81%, hemophilia B 19%. Level of severity 94% severe 6% moderate. Prophylaxis regime: 30% primary Prophylaxis 30%; secondary 61% and tertiary 8%. The average dose of prophylaxis is 36.43 IU / Kg / dose to hemophilia A and Hemophilia B is 43.34 IU / dose. The periodicity is 3- 4 times a week. Blood samples were collected after prophylaxis dose 2, 24, 48 h for hemophilia A added 72 hours for hemophilia B. Pharmacokinetics results: 2 hours: Hemophilia A : APTT/ NORMAL, FVIII LEVEL (65%) NORMAL. 2 hours Hemophilia B: APTT 1.4 (normal ≤ 1.3), FIX 32% (50 -150). 24 hours: Hemophilia A: APTT 1.8; Factor VIII 11%. 24 hours Hemophilia B: APTT 1.6; Factor IX 14%. 48 hours: Hemophilia A: 2.3 APTT, Factor VIII 4%; 48 hours: Hemophilia B: APTT 1.7; Factor IX 13%, 72 hours haemophilia B: 1.8 APTT factor IX 11%.

CONCLUSIONS

The laboratory results show that currently prophylaxis offers a partial effectiveness in the predisposition of bleeding in more technological advances are necessary to reduce the risk of bleeding in HEMOPHILIA patients.

REFERENCES

Prophylaxis in Children with hemophilia: Evidence-Based Achievements, Old and New Challenges; Copolla et al.



Poster Presented at:

DOI: 10.32527/psa.v1i1.FH2016.2016

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