Thrombotic and Cardiovascular Events in People with Hemophilia. Experience of a Single Hemophilia Centre.

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WFH 2016 Congress, 24 -28 July Orlando, USA



Introduction

Historically, it was suggested that hemophilia had a protective effect against the occurrence of ischemic heart disease/ thrombotic events. Modern management has prolonged life expectancy of people with hemophilia (PWH) and consequently, an associated increase in incidence and prevalence of conditions that affect the general older population, such as cardiovascular disease and hypertension are expected. These clinical issues became a challenge for hemophilia treaters.

Aim

Our aim was to identify thrombotic and cardiovascular events in our PWH and point out the main risk factors.

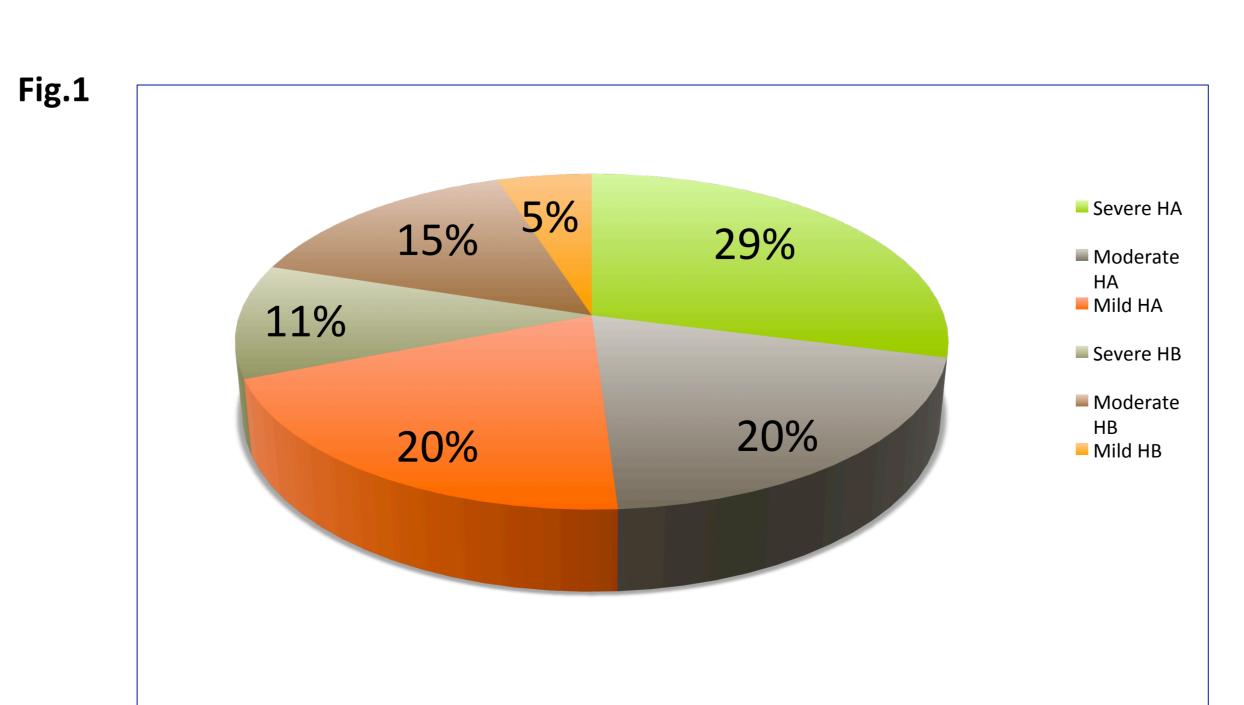
Population and Methods

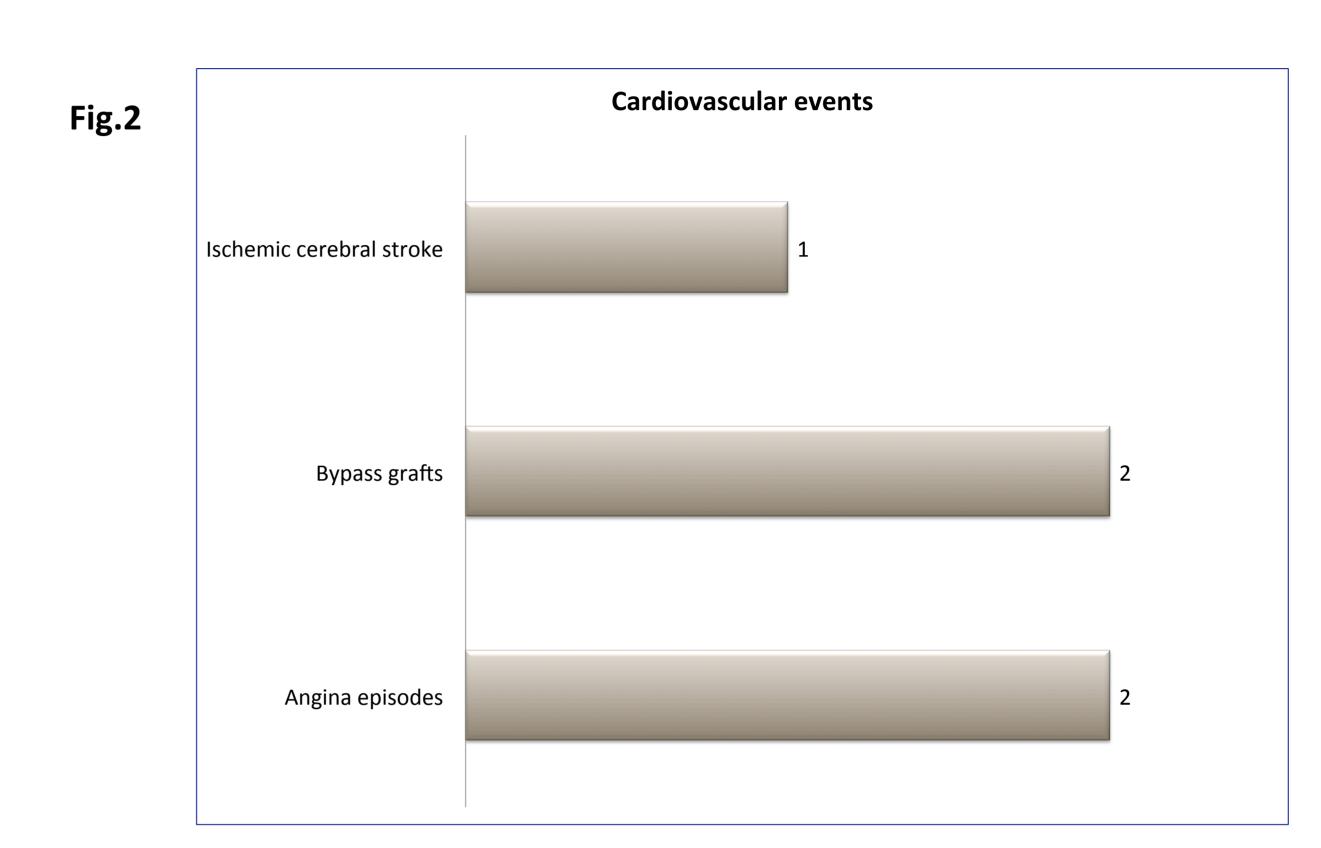
We analyzed retrospectively data of adult PWH who have been followed at our Centre. Data were extracted manually from the electronic medical records and paper charts. Age, type and severity of disease, medical history such as cardiovascular risk factors and thrombotic events were recorded.

Results

We analyzed 100 patients: 69 hemophilia A (HA) and 31 hemophilia B (HB) with a median age at enrolment of 40 (range 18-80). The majority of patients had non-severe hemophilia (25% mild, 35% moderate, 40% severe). Four patients (3 moderate: 2 HA, 1 HB and 1 severe HB) were identified with thrombotic events with a median age at event of 47 years (range 36-62).(Fig.1). Two patients (1 moderate and 1 severe) had angina episodes with coronary artery disease and were submitted to multiple coronary bypass grafts; the other 2 patients had transient ischemic stroke without disabling. Of those 2 patients submitted to bypass grafts, one (with severe HB) had an ischemic cerebral stroke on recovery with disabling and the other one had an acute myocardial infarction before bypass grafts.(Fig.2).

The main cardiovascular risk factors identified were hypertension, diabetes mellitus, heavy smoking, obesity and dyslipidemia. Prothrombotic screening study was carried out and all patients had negative test results.





Conclusions

Hemophilia does not seem to have a protective effect against thrombotic/cardiovascular events, mainly in coronary artery disease. The identification and correction of modifiable risk factors have a crucial role on prevention of possible thrombotic events. Optimal management of these patients, prevention or treatment, remains even today, an issue of debate.

References

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