



Joint bleeds and pain related treatment - comparison of data between 2017 and 2019 according to electronic diary smart medication

K. Holstein, H. Eichler, C. Escuriola-Ettinghausen, R. Fischer, C. Hart, B. Kemkes-Matthes, R. Klamroth, B. Krammer-Steiner, W. Mondorf, A. Nimitz-Talaska, H. Richter, K. Severin, C. Wermes

Background and Objective

Joint bleeds in patients with hemophilia A/B may cause severe pain leading to immediate or delayed factor treatment, as well as different dosing in home settings.

Methods

Result from 391 patients from 14 hemophilia centers during 2019 were analyzed according to electronic data from smart medication and compared to results of the prior year (277 patients, 9 centers). Severity of pain (SP) on a scale of 1 (very mild) to 10 (very severe) was related to the respective initial treatment dose as well as time gap between joint bleed (JB) and treatment.

Results

The annual rate of JBs (AJBR) was 2,20 in 2017 and 1,68 in 2019. The initial treatment dose (IU/kg BW) following JBs was 23.54 – 62.55 (2017) and 25.45 – 34.29 (2019). Severe pain (SP 8-10) was followed by treatment doses of 23.54- 27,94 (2017) and 33.11 - 34,29 (2019). The time between bleeding symptom and treatment ranged from <1 hour in 36% (2017) and 21% (2019) to >4 hours 13% (2017) and 12% (2019).

Conclusion

In 2019 a lower AJBR and slightly higher dosing following severe pain compared to 2017 was seen. Initial treatment following bleeding was slightly later in 2019 compared to 2017.

