

HEMOPHILIA PATHOCHART

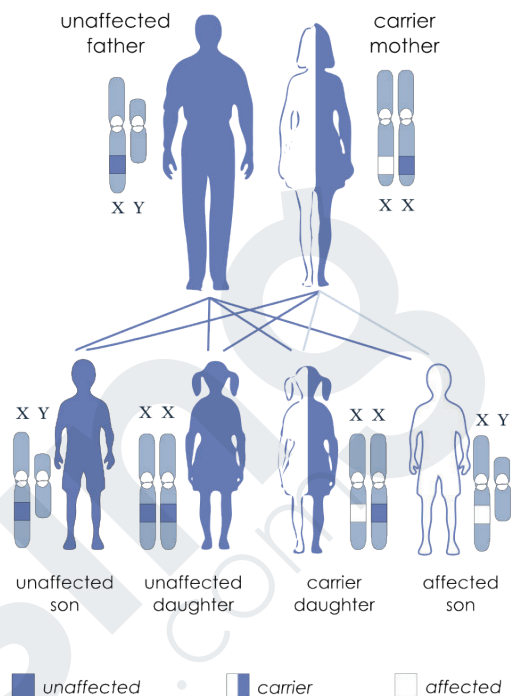
PATHOPHYSIOLOGY

Hemophilia is an X-linked recessive genetic bleeding disorder that is characterized by a deficiency of a clotting protein (Factor VIII). Patients with hemophilia experience longer bleeding time than others because their blood clots much slower. Complications of the disease include bleeding into the joints, hemorrhage into the central nervous system or vital organs, and aspiration from bleeding into the airways.

ASSESSMENT FINDINGS

- Pain or tightness in the joints
- Lethargy or irritability in infants
- Large or deep bruises
- Unexplained nosebleeds
- Blood in urine or stool
- Excessive bleeding from cuts or after dental work

X-linked recessive inheritance



DIAGNOSTICS

- PT, aPTT
- Clotting factor levels
- CT Scan
- Barium enema

NURSING PRIORITIES

- Manage bleeding risk
- Ensure adequate perfusion
- Prevent injury

THERAPEUTIC MANAGEMENT

- Replace clotting factors
- Blood transfusions
- Avoid Aspirin & Ibuprofen
- Bleeding precautions
 - Soft toothbrush
 - Electric razor

MEDICATION THERAPY

- Desmopressin (DDAVP)
- Factor VIII replacement
- Acetaminophen for pain relief