

Benefits of treating hemophilia with factor concentrate

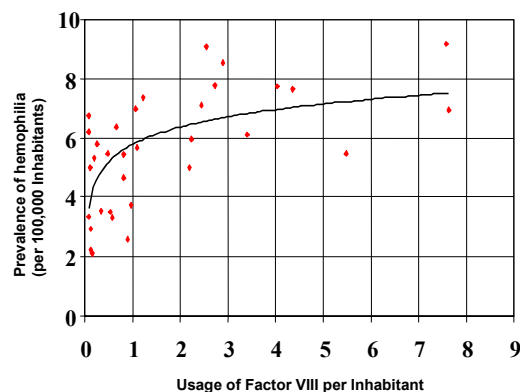
Treating people with hemophilia with safe, regulated plasma-derived factor concentrate is an investment that directly reduces the social and economic impact of this bleeding disorder on the patient. It also reduces the amount of long-term support required from family, community, and government.

It is within the economic reach of most countries, even those with limited resources, to provide safe treatment products before essential surgical procedures and during life- or limb-threatening emergencies.

Economic benefits to government & society

- A person with hemophilia will recover from a bleed within a few days if treated with factor concentrate. If untreated, recovery may take weeks, and may be incomplete. Joints may be permanently damaged. Other treatment products are less expensive but not as effective, and contribute to longer absences from work or school, and decreased ability to contribute to the family and community.
- Treatment with cryoprecipitate (a blood-based product) instead of factor concentrate carries safety risks, because there is no effective system for viral inactivation. A WFH study shows that a person treated with cryoprecipitate over a 20-year period in Venezuela has a 13 to 18 per cent risk of HIV infection. The risk of infection with hepatitis C is almost more than 80 per cent. In contrast, plasma-derived factor concentrate made today has an excellent safety record.
- If a person with hemophilia contracts HIV/AIDS or hepatitis through unsafe treatment products, there is a risk that the infection will be communicated, increasing the number of citizens eventually requiring treatment and financial support.
- Stigmatization and poor health from untreated hemophilia, HIV/AIDS or hepatitis weakens economic activity by reducing productivity through absenteeism, organizational disruption, and loss of skilled workers. Expenses increase when new staff must be recruited and trained even as temporary replacements. For example, by 2005, Botswana will have lost 17% of its workforce to AIDS, and by 2015, its economy will grow 2.5 % **less** than it would have without the impact of AIDS. Safe, regulated plasma-derived factor concentrate can reduce the chance of increasing the viral infection rate among people with hemophilia.

Effect of factor VIII concentrate on patient survival in relation to amount used



◆ = 1 of 34 countries in study

The curve represents the prevalence (survival) of people with hemophilia in relation to increased use of factor VIII concentrate. The sharp incline on the left illustrates the life-saving benefit of even a small quantity of factor concentrate (1 to 2 I.U.) per inhabitant.

For more information, consult the following resources.

1. World Federation of Hemophilia. 2004. [Report on the Annual Global Survey 2003](#). Montreal: World Federation of Hemophilia.
2. Evatt, BL, and L Robillard. 2000. Establishing haemophilia care in developing countries: using data to overcome the barrier of pessimism. [Haemophilia](#) 6: 131-134.