

Considerations of Hemophilia A Treatments: Factor and Non-Factor Therapy

There are many treatment options available for hemophilia A. Knowing the basics about different treatments can help you talk to your doctor about which option is right for you.

Use this helpful guide to learn more about factor replacement therapy and non-factor therapy, and be sure to download it to help with your discussions with your doctor.

	Factor Replacement Therapy	Non-factor Therapy
What is it?	A medicine that enables the blood to clot by replacing the missing factor (factor VIII for hemophilia A). ^{1,2}	A medicine that enables the blood to clot without replacing the missing factor ³
How long has it been used?	The first factor VIII replacement was approved in 1966. ⁴	The first non-factor therapy was approved for patients with inhibitors in 2017 and patients without inhibitors in 2018. ^{3,5}
What are its approved uses?	Prophylaxis , bleed management for surgery, on-demand use. ⁶	Prophylaxis ⁷
Who is it used for?	Adults and children with hemophilia A (factor VIII deficiency) ⁸	Adults and children with hemophilia A (factor VIII deficiency with and without inhibitors) ⁷
How is it given?	Intravenous injection ⁵	Subcutaneous injection ³
How often is it administered for prophylaxis?	This depends on clinical response and product half-life (standard vs extended). Dose and frequency can be adjusted according to individual patient needs. ⁹ Dosing schedules, for example, may include ^{9,10} : <ul style="list-style-type: none"> • Every other day • Twice a week • Once every 4 to 5 days 	After an initial loading dose period, schedules may include ^{3,7} : <ul style="list-style-type: none"> • Weekly • Every 2 weeks • Every 4 weeks

Chart continued on following page.

Key Terms:

Prophylaxis – The infusion of a treatment on a routine basis to prevent or reduce the frequency of bleeding episodes.

Intravenous Injection – Medication that is delivered through the vein. May be delivered via a port, butterfly, or injection.

Subcutaneous Injection – Medication that is delivered under the skin.

Product Half-life – A measurement for how long it takes for your body to clear half of the medication from your body. The half-life indicates how long your treatment will stay active in your system.

Loading Dose – The initial dosing period during which the medicine is administered more frequently and/or at a higher dose compared with the long-term dose of the medication. The loading dose quickly raises the concentration of the medication in the body.

Maintenance Dose – A more consistent dosing schedule that is taken after the loading dose period.

This resource is for patients with hemophilia A without inhibitors. For patients with hemophilia A and inhibitors, please talk to your doctor for considerations and recommendations.

Factor Replacement Therapy

Non-factor Therapy

What are some important health considerations to keep in mind?

Activity:

Talk to your doctor about which activities are appropriate and if dosing adjustments are necessary to meet your individual needs. Certain activities, work, and lifestyles may need higher factor levels.

Breakthrough bleeds:

If spontaneous or injury-related (trauma) bleeding occurs, you can infuse factor VIII based on your provider's recommendation. It could be the same factor you are using for prophylaxis.¹¹

Life-threatening events:

Seek emergency care immediately, because delays in treatment can be critical. Factor replacement therapy should be given before any diagnostic tests (X-rays, CAT scans, etc.).¹¹

Additionally, contact your HTC for support.

Surgery:

Before your procedure, talk to your doctor about making a surgical plan. This plan should include guidance for dosing factor replacement before, during, and after surgery.¹¹

Laboratory methods are available to estimate factor VIII levels in your body.⁸

Activity:

Talk to your doctor about which activities are appropriate while taking non-factor therapy. Certain activities and lifestyles may require special consideration.

Breakthrough bleeds:

If spontaneous or injury-related (trauma) bleeding occurs, the medicine alone may or may not be sufficient to stop the bleed. Follow your doctor's instructions regarding the recommended dose and schedule and when to use factor VIII to treat the breakthrough bleed.⁷

Life-threatening events:

Significant and serious life-threatening bleeding should be treated promptly. Factor VIII concentrates may be used for breakthrough bleeding events. Talk to your doctor or HTC for further guidance on an appropriate emergency action plan.⁷

Surgery:

Non-factor therapy is not indicated for use in surgery. Talk to your doctor about creating a surgical plan that includes bleed control, before, during, and after surgery.⁷

Laboratory methods are available to estimate medicine levels in your body.

There may be situations when you need to know your factor VIII levels, including when your risk of bleeding is higher. The tests needed to measure your factor VIII levels while you are using a non-factor treatment for prophylaxis may differ from the tests needed for those receiving factor replacement.⁷

Talk to your doctor regarding the availability of these tests.

How are medicine levels in the body monitored?

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