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## Hemophilia A: Strategies for Improving Long-Term Holistic Management, Adherence, and Quality of Life

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**Media:** Certified journal article

### TARGET AUDIENCE

This educational activity is designed for advanced practitioners (nurse practitioners, pharmacists, physician assistants), as well as hematologists, surgeons, pathologists, orthopedic specialists, primary care, emergency medicine, and other health-care professionals who are part of the interprofessional team responsible for the therapeutic management of patients with hemophilia A.

### ACTIVITY OVERVIEW

Hemophilia A is an X-linked genetic disorder characterized by a deficiency in normal factor VIII, resulting in an increased risk of bleeding. Repeated bleeds, notably in the joints, lead to chronic pain and loss of function. Joint damage can be prevented, at least in part, with prophylactic factor VIII replacement. Although factor VIII can be replaced, its intravenous administration is burdensome, which may impair adherence. Furthermore, inhibitors (neutralizing alloantibodies to factor VIII) will develop in approximately 30% of patients treated with factor VIII—making factor VIII replacement ineffective. Although patients with inhibitors can be treated with bypassing agents, these agents are expensive and less predictable than factor VIII.

However, there is now another option for patients with and without inhibitors: bispecific antibody nonfactor replacement prophylaxis. It is important for the interprofessional care team to be aware of how this treatment compares with traditional prophylactic agents, its safety and efficacy data, and how to appropriately incorporate prophylaxis therapy based on the latest real-world clinical data.

This educational activity will review currently approved prophylaxis therapy in hemophilia A, the benefits of prophylaxis and adherence, and patient quality-of-life factors. Interprofessional perspectives from an expert faculty panel will be featured.

### LEARNING OBJECTIVES

At the conclusion of this activity, participants should be better able to:

- Evaluate currently available prophylactic therapies for hemophilia A to select the treatment best suited to the individual patient
- Analyze currently available safety and efficacy data from clinical trials and real-world studies on bispecific antibody nonfactor replacement therapy to make informed management decisions
- Incorporate quality-of-life and cost data into shared decision-making with patients to maximize treatment adherence

**This activity is supported by an educational grant from Genentech, a member of the Roche Group.**

## AUTHORS

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## ACCREDITED CONTINUING EDUCATION

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This activity was planned by and for the healthcare team, and learners will receive 0.5 Interprofessional Continuing Education (IPCE) credit for learning and change.

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### AXIS Contact Information

For information about the certification of this activity, please contact AXIS at [info@axismeded.com](mailto:info@axismeded.com)

### Fee Information

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To receive credit for this activity, participants must review the activity information including learning objectives and faculty/planner disclosures and actively participate in the educational activity. At the conclusion of your article participation, please visit <https://ok.cx/HEMA> Enter Access Code: 2505-HEMA

Upon successfully completing the post-test with a score of 75% or better and the post-activity evaluation, your certificate will be immediately available to you.

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Participants have an implied responsibility to use the newly acquired information to enhance patient outcomes and their own professional development. The information presented in this activity is not meant to serve as a guideline for patient management. Any procedures, medications, or other courses of diagnosis or treatment discussed or suggested in this activity should not be used by clinicians without evaluation of their patient's conditions and possible contraindications and/or dangers in use, review of any applicable manufacturer's product information, and comparison with recommendations of other authorities.

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