Functional impact of hemophilic arthropathy

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Hemophilia is a rare inherited bleeding disorder. Its incidence is one case per 10,000 births, its prevalence is between 1000 and 1500 cases in Algeria, or 4.28 per 100,000 according to the National Register of hemophiliacs and recommendations of the consensus conference in June 2002 in Algeria. Recurrent hemarthrosis is involved in the genesis of chronic synovitis, an hemophilic arthropathy component responsible for joint damage and the occurrence of muscle inhibition that will compromise the functional outcome and be a major source of disability (due to illness). Thus, we describe the clinical, epidemiological and functional consequences of hemophilia seen in physical medicine.

Materials and methods.– A prospective study was conducted from September 2010 to March 2011 and included 11 patients attending the consultations held in common with the department of hematology and the department of physical medicine at the Oran EHU. We noted epidemiological and clinical data: type and severity of hemophilia, patient age, age at diagnosis, existence of family members with hemophilia. Patient monitoring included an analytical assessment of sequelae and functional joints, and assessed the impact on educational or occupational activity.

Results.– Eight patients had hemophilia A, two type B, and one von Willebrand disease. Familial incidence of hemophilia is found in two families, one of which involved three children, the others two children with severe hemophilia A. Patient age was < 10 years (n = 2), 12–16 years (n = 5), age > 16 years (n = 5). The circumstances of discovery were: patients at walking age (n = 3), trauma (n = 5), systematic review (n = 3). The arthritis affected the shoulders (n = 4), elbow (n = 8), knee (n = 10), and ankle (n = 9). Deformations (n = 22) involved elbows, knees, ankles; joint instability (n = 32) involved elbows, knees, ankles; joint contractures (n = 36) involved shoulders, elbows, knees, ankles; stiffness (n = 20) occurred up to the elbows, knees, ankles; lameness/limitation of walking capacity required technical aids (n = 11).

Conclusion.– Stiffness appears subsequent to hemorrhagic stroke, synovectomy improves function in these young patients, emphasizing the importance of developing these therapeutic attitudes.