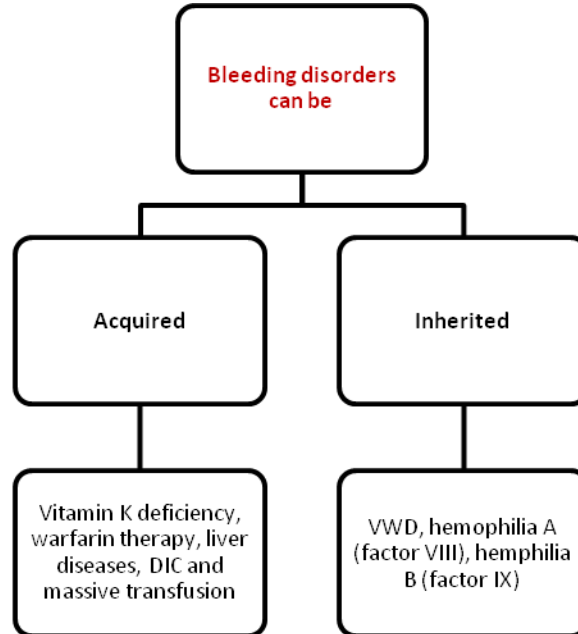




- **Classification of bleeding disorders can be:**

- Vascular components/ platelet disorders.
- Coagulation abnormalities.



- **Genetic factors:**

- Mutations in single gene: causing loss of function.
- Variant in genes: causing alteration of function.
- Chromosomal imbalance: causes alteration in gene dosage.

Note: disorders can be dominant (one copy affected) or recessive (two copies affected) or X-linked (one copy affected on X-chromosome).

- **The contribution of genetic and environmental factors:**

- Duchenne muscular dystrophy is pure genetic.
- Spina bifida: balanced between genetic and environmental factors.

- **Genetics of VWD:**

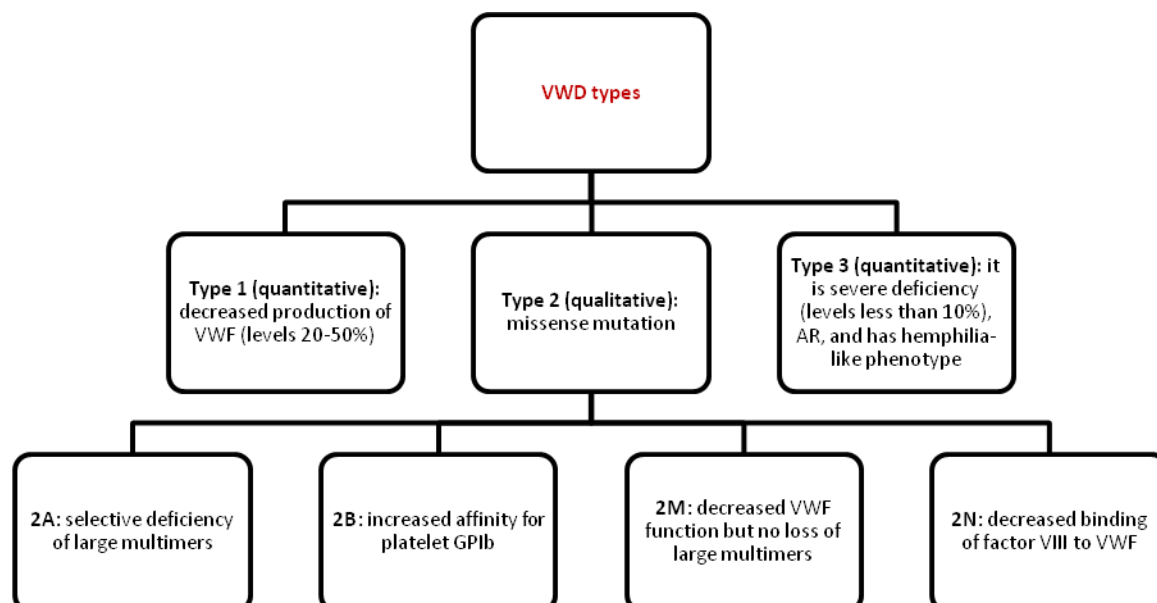
- VWD is a common inherited bleeding disorder (autosomal dominant).
- VWF gene is located on chromosome 12 containing 52 exons.
- More than 500 mutations are defined in this gene. Partial lack of VWF causes mild to moderate bleeding disorder.

- **Common bleeding in VWD:**

- Gyn/Obs 60% →menorrhagia has a good sensitivity but low specificity. Abnormal menstruation is characterized by:
 - ✓ 80 ml/month
 - ✓ Clots greater than 1 inch in diameter.
 - ✓ Low serum ferritin.
 - ✓ Changing the pad every one hour.
- Nose 60% (common in children).
- Teeth 50%
- Ecchymosis 50% (easy bruising)

- **Lab investigations:**

- ↑bleeding time, defective PFA-100, ↑PTT, ↓factor VIII, ↓ristocetin.



- **Inherited hemophilia A & B:**

- Sex-linked (exclusively in men).
- **There are two types:**
 - ✓ Deficiency in factor VIII → hemophilia A
 - ✓ Deficiency in factor IX → hemophilia B
- **Factor level and severity:**
 - ✓ <1% : sever, bleeding after minimal injury.
 - ✓ 1%-5%: moderate, bleeding after mild injury.
 - ✓ 5%: mild, bleeding after significant trauma or surgery.
- **Most hemophilia A cases are due to inversion mutation in intron 1 or 22:**
 - ✓ Stop mutation: preventing factor production.
 - ✓ Missense mutation: affecting factor activity no production.
- **Treatment of hemophilia A:**
 - ✓ Doses of recombinant factor VIII, but with prolonged therapy antibodies will be produced against the factor so what we will do is:
 - * Bypassing the factor to effect hemostasis with factor VIIa.

- **Other inherited factor deficiencies:**

- **Factor XI:** mostly in Ashkenazi Jews. Bleeding is usually mild except after surgery or significant injury.