Acquired haemophilia A

Acquired haemophilia A is a very rare condition where a person's immune system (a system that protects your body from diseases) develops antibodies, also known as inhibitors, that mistakenly target the body's own clotting factors, most commonly factor VIII. It is not hereditary.

People with acquired haemophilia A would previously have been well with no history of bleeding and would have had normal blood clotting tests. In some cases, there is an underlying medical condition that can trigger acquired haemophilia A, for example, autoimmune conditions and certain cancers. In other cases, no cause of acquired haemophilia A is found.

There are several differences between acquired and hereditary forms of haemophilia. These include:

- How **severe the bleeding is** can be variable. Some people with acquired haemophilia A may have very little bleeding while others have significant life-threatening bleeding.
- The **pattern of bleeding** is different. In acquired haemophilia A it often includes skin, gastrointestinal and muscle bleeds rather than joint bleeds. However, bleeding can occur at any site in the body.
- The **age** when people with acquired haemophilia A first seek medical care for their condition is different to hereditary forms of haemophilia. Although acquired haemophilia A can occur at any age, it most often occurs in older people and in some women in late pregnancy or who have recently given birth.
- In acquired haemophilia A both males and females are affected equally.

Treatment for acquired haemophilia A is firstly to control the bleeding and then to remove the inhibitor and treat the underlying medical condition (if there is one). A small number of people do not respond to treatment or the inhibitor comes back. Getting rid of the inhibitor involves medications to suppress the immune system.

People with acquired haemophilia should be monitored by a Haemophilia Treatment Centre for specialist care.



Sources

Australian Bleeding Disorders Registry (ABDR) Annual Report 2020-2021. Canberra: National Blood Authority, 2021. Accessed 15 June 2023. Available from: https://www.blood.gov.au/data-analysis-reporting

NORD – National Organisation for Rare Disorders. Acquired Haemophilia. 2022. Accessed 15 June 2023.

Available from: https://rarediseases.org/rare-diseases/acquired-hemophilia/



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More information

For more information about haemophilia, talk to your doctor, your local Haemophilia Treatment Centre or contact Haemophilia Foundation Australia (HFA).

For up-to-date contact details on state/territory Haemophilia Foundations or your local specialist Haemophilia Treatment Centre:

- · see the HFA web site: www.haemophilia.org.au
- or phone HFA on 1800 807 173.

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Important note

This fact sheet was developed by Haemophilia Foundation Australia for education and information purposes only and does not replace advice from a treating health professional. Always see your health care provider for assessment and advice about your individual health before taking action or relying on published information.

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