

Acquired hemophilia a associated with NSAID: a case report

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Abstrak

Acquired hemophilia A (AHA) is a blood clotting disorder caused by the presence of autoantibodies (inhibitors) against factor VIII. The typical symptom of this disorder is bleeding under the skin and soft tissue (rarely in the joints), with no family or personal previous history of bleeding. This case reports is tended to build up awareness for better diagnosis and therapy. Woman, 39 years old, bruises on both forearms are intermittent for 2 months with a history of long term drug consumption for headache treatment. Hemostatic test showed the elongation of activated partial thromboplastin test (APTT) to 87,1 (normal 24,4-44,4 seconds) and the decreament of factor VIII (FVIII) activity to 5% (normal 60-150%). Provision of recombinant factor VIII lowered factor VIII activity to 2%. Factor VIII inhibitor titer was 21,12 BU and diagnosis AHA was made. Inhibitor eradication by methylprednisolone tablet 3x16mg which was given for 2 months, improved the APPT to 46,7 seconds and factor VIII activity to 36%. Acquired Hemophilia A should be suspected in an adult bleeding patient with history of taking a long time non-steroidal anti-inflammatory drugs (NSAIDs). This case is a rare case in Indonesia and therefore the procedure for diagnosis needs to be improved in order to avoid errors in delivering a therapy which can cause the decreament of factor VIII activity.

.....Acquired hemophilia A (AHA) adalah sebuah kelainan pembekuan darah yang disebabkan adanya autoantibodi (inhibitor) terhadap faktor VIII. Gejala yang khas adalah perdarahan bawah kulit dan jaringan lunak (jarang pada sendi), tanpa ada riwayat keluarga maupun riwayat perdarahan sebelumnya. Wanita, 39 tahun, lebam di kedua lengan bawah hilang timbul selama 2 bulan tanpa riwayat trauma. Riwayat konsumsi obat nyeri kepala sejak SMP. Pemeriksaan faal hemostasis didapatkan pemanjangan activated partial tromboplastin test (APTT) 87,1 (24,4-44,4detik) dan rendahnya kadar faktor VIII 5%(60-150%). Pemberian rekombinan faktor VIII membuat kadar faktor VIII menjadi semakin turun (2%). Titer inhibitor faktor VIII 21,12 Bethesda unit sehingga pasien didiagnosis AHA. Penyebab AHA pada penderita ini kemungkinan adalah penggunaan non-steroid anti-inflammatory drug (NSAID) jangka lama. Kasus ini merupakan kasus yang masih jarang ditemukan di Indonesia sehingga tata cara diagnosis dan terapinya masih kurang. Terapi yang tidak tepat dapat menyebabkan kadar faktor VIII semakin menurun