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Summary

PERIOPERATIVE MANAGEMENT FOR PATIENTS WITH HEMOPHILIA A UNDERGOING ENDOSCOPIC MUCOSAL RESECTION TO CONTROL POSTOPERATIVE DELAYED HEMORRHAGE

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Colorectal

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An observational study of six hemophilia A patients undergoing endoscopic mucosal resection found that maintaining Factor VIII concentration above 20% for seven days postoperatively prevented delayed bleeding, whereas one-day infusion resulted in delayed hemorrhage in all three initial patients.

KEY POINTS

- Six hemophilia A patients (2 gastric, 4 colorectal polyps) underwent EMR with Factor VIII monitoring and replacement; admission Factor VIII concentrations ranged from 0.4% to 26.2%.
- The first three patients received Factor VIII infusion for only one day postoperatively and all experienced delayed bleeding, with the longest interval from operation to hemorrhage being 15 days.
- The subsequent three patients received Factor VIII infusion for seven days postoperatively to maintain concentration over 20%, with total doses exceeding 1500U per patient, and none experienced delayed bleeding.
- The authors conclude that Factor VIII concentration should be increased to more than 20% preoperatively and maintained above 20% for at least seven days postoperatively in hemophilia A patients undergoing EMR.
- This observational report represents the first description of perioperative management for EMR in hemophilia A patients; the authors note that further research is needed to verify clinical benefits.

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