

World Federation of Hemophilia Steps for Developing National Hemophilia Care Programs

Government Support	Care Delivery	Medical Expertise	Treatment Products	Patient Organization	Data Collection and Outcomes Research
Objectives					
To obtain government support for national hemophilia care program within the health system	 To set up a national hemophilia care program (national plan defined with key treaters and NMO). To make the organization of hemophilia treatment more efficient. 	To provide accurate diagnosis and appropriate treatment.	 To obtain the best quality blood products in sufficient quantity at an affordable cost. Develop and improve regulatory knowledge 	To develop a strong patient organization for advocacy and education.	 To set good and efficient data collection system within health services with contribution of all key players To develop the ability to track and report patient health outcomes through surveillance, enhanced data collection and outcome analysis To conduct basic descriptive studies on bleeding disorders
Development Steps					
 No government support or interest in hemophilia care. Government recognition of main HTC as a reference centre. Some level of government involvement in hemophilia care (e.g. hemophilia committee or task force). Limited central or regional government resources allocated for hemophilia care. Official government commitment to hemophilia care. Government contributes substantial financial support for hemophilia care. Hemophilia is a line item in a country's annual healthcare budget. Government is a key partner in sustainable national hemophilia care program. 	 Isolated doctor in major city works with no resources. Basic treatment is possible in hospital(s) in major city Regular hematology outpatient clinic with follow-up offered Creation of a core team within hospital that forms the basis of a full hemophilia treatment centre (HTC) Core team within hospital (HTC) has a medical patient registry & treatment guidelines/ protocols Additional hemophilia treatment centres with core teams for children and/or adults in major cities. Coordinated network of designated HTCs with national treatment protocols. Full comprehensive hemophilia care team is formed in the major HTC(s) Basic teams formed in other areas/regions Established sustainable national hemophilia care program. 	Laboratory Diagnosis 1. Basic laboratory diagnostic ability 2. Basic screening tests (bleeding time, platelet count, coagulation test) a. PT b. APTT c. TT 3. Internal Quality Control 4. Factor Assays 5. Participation in EQAS 6. VWD Assays and Inhibitor detection 7. Molecular genetic detection/DNA mutation detection and carrier detection/prenatal diagnosis 7. Home care available for patients 8. Specialized comprehensive care team (social worker, dentist, psychologist, infectious diseases specialist, genetic community.	of cryo and/or FFP and some purchase of plasma-derived factor concentrates: a. Less than .2 IU per capita of concentrates b. Between .2 and .5 IU c. Between .5 and 1 IU d. Between 1 and 2 IU 3. Proper national tender system in place 4. Examine feasibility of contract fractionation of plasma-derived concentrates	Organization formed by a nucleus of patients Organization structured, recognized/registered with a constitution. Organization holds regular meetings with a core group of volunteers and educates patients and families in major city. NMO patient registry. Organizes activities including:	 No demographic data on people with bleeding disorders Data collected by doctors at some hospitals and/or patient organizations Basic registry of all patients with hemophilia in hospitals or patient organization Basic registry of all patients with bleeding disorders in hospitals or patient organization Registry of all identified patients with bleeding disorders based on accurate diagnosis and detailed medical information Ministry of Health central registry with mandatory reporting and realtime data entry Collate and analyze information on Quality of Life (QoL) for people with bleeding disorders Design and conduct observational studies on bleeding disorders Participate in multi-national / multicenter comparative research on people with bleeding disorders

^{*} Development steps do not necessarily denote chronological order. Situations may vary.