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#### Scientific and Technological Research

## Pain in hemophilia patients: Assessment and management in a fourth level hospital. Case series<sup>☆</sup>

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#### ABSTRACT

**Introduction:** Up to 80% of hemophilia patients present acute and chronic pain, mostly secondary to joint involvement. In Colombia there are no studies on the topic.

**Objective:** To show the epidemiological profile, assessment and management of these patients in a referral hospital for the treatment of hemophilia.

**Methodology:** Observational descriptive study, based on case series. Patients older than 18 years with diagnosis of hemophilia who were evaluated between January 1st, 2013 and March 31st, 2016 were included. The qualitative variables were described with absolute frequencies and the quantitative variables with means.

**Results:** 196 hemophilia patients were registered in the trial; 87%, males and 13% females; the average age was 39 years. Hemophilia A 79%, hemophilia B 18%, carriers 3%. The causes for admission were 45% surgical, 37% medical and 17% trauma. The average hospital stay was 8 days (range 1–58) and 2 hospital admission per year (range 1–5). No pain evaluation scales were used in 71% of the cases and 29% were administered the Visual Analogue Scale. Opioids were prescribed in 58% of cases, acetaminophen in 67%, and pregabalin in 5.6%. Only 33 patients were treated by the pain clinic.

**Conclusions:** Notwithstanding the presence of pain and the frequency of functional sequelae among hemophilia patients, most of them were not assessed by the pain clinic and no pain evaluation scales were used. The pharmacological management was based on the prescription of opioids and acetaminophen.

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## Dolor en pacientes con hemofilia: evaluación y manejo en un centro hospitalario de cuarto nivel. Serie de casos

### R E S U M E N

#### Palabras clave:

Hemofilia B  
Hemofilia A  
Dolor  
Analgésicos opioides  
Dolor agudo

**Introducción:** Los pacientes con hemofilia presentan dolor agudo y crónico hasta en un 80% de los casos, secundario principalmente a compromiso articular. En Colombia no existen estudios referentes al tema.

**Objetivo:** Mostrar el perfil epidemiológico, evaluación y manejo en un centro hospitalario de referencia para manejo de hemofilia.

**Metodología:** Estudio observacional descriptivo tipo serie de casos. Se incluyeron pacientes mayores de 18 años con diagnóstico de hemofilia valorados entre el 1 de enero de 2013 y el 31 de marzo de 2016. Las variables cualitativas fueron descritas con frecuencias absolutas y relativas y las cuantitativas con medias.

**Resultados:** Se registraron 196 pacientes con hemofilia; género masculino 87%, femenino 13%; edad promedio 39 años; hemofilia A 79%, hemofilia B 18%, portadoras 3%. Las causas de ingreso fueron: quirúrgicas 45%, medicas 37% y traumáticas en 17%; estancia promedio de 8 días (rango 1-58) y 2 hospitalizaciones por año (rango 1-5). En el 71% no se utilizó ninguna escala de valoración del dolor, en el 29% se utilizó la Escala Visual Análoga. Se prescribieron opioides en el 58%, acetaminofén en el 67% y pregabalina en el 5,6%. Solo 33 pacientes fueron manejados por la clínica de dolor.

**Conclusiones:** A pesar de que la presencia de dolor y sus secuelas funcionales son frecuentes en pacientes con hemofilia, en su mayoría no fueron valorados por clínica de dolor, ni tampoco se utilizaron escalas para valoración del mismo. El manejo farmacológico se basó en la prescripción de opioides y acetaminofén.

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## Introduction

In 1979, the International Association for the Study of Pain (IASP) defined pain as an “unpleasant sensory and emotional experience, associated with real or potential tissue damage, or described in terms of such damage”.<sup>1</sup> Pain may be classified in terms of time as acute or chronic and it is considered a factor that impairs the quality of life of patients and may be potentially disabling. So currently, and in accordance with the World Health Organization (WHO), pain is considered the fifth vital sign and pain treatment and relief is a fundamental right of people who are in pain.<sup>2</sup>

Patients diagnosed with hemophilia present clinically with acute and chronic pain in up to 80%<sup>3</sup> of the cases, usually associated with repeated episodes of hemarthrosis,<sup>4-6</sup> with significant impact on quality of life; therefore, pain should be assessed and timely treated by a multidisciplinary team.<sup>3</sup> Most of the trials focusing on this issue are descriptive in nature and the clinical trials that assess pain in this group of patients are really few as compared to other chronic arthropathies such as rheumatoid arthritis<sup>7,8</sup> and specifically refer to non-pharmacological interventions such as acupuncture and hydrotherapy, although drug therapies have also been evaluated, including COX-2 inhibitors (celecoxib)<sup>9,10</sup> and opioids.<sup>3,11</sup>

In Colombia we have no studies describing or assessing pain management in hemophilia patients, thus we feel it is important to learn about the epidemiological profile of this

group of patients, the way pain is assessed, the treatment administered, and the clinical response to treatment at a national referral center specialized in the diagnosis and treatment of hemophilia.

## Methodology

### Design

A case series type of observational descriptive trial was performed.

### Population

Patients older than 18 years of age with a diagnosis of hemophilia, evaluated in-hospital or as outpatients at a fourth level hospital in Bogotá, from January 1st, 2013 through March 31st, 2016.

### Procedure

With the collaboration of the systems and statistics department, the charts of patients with a diagnosis of hemophilia and admitted to the hospital were obtained. The medical records were reviewed and the socio-demographic variables were established; age, sex, level of education, profession, social level, health care provider institution, and place of origin. Clinical variables were also considered including type of

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