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Hemophilia patients face therapy challenges due to COVID-19

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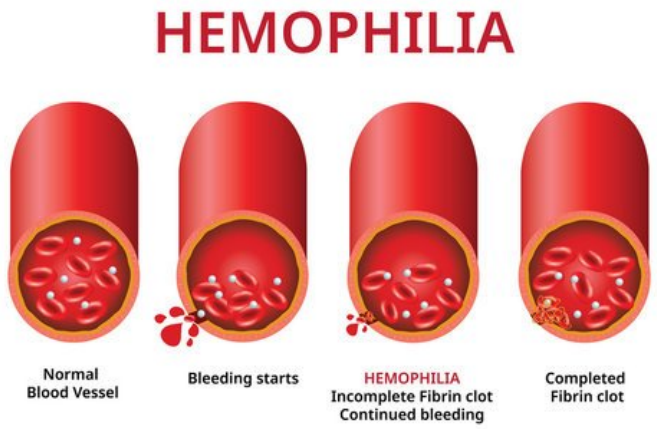
The critical need for early diagnosis, access to treatment, and physiotherapy is crucial for people with Hemophilia



The world is grappling with the challenges posed due to the ongoing pandemic. No country has been immune to the crisis, and so has been the case with India.The focus of healthcare professionals, resources, and infrastructure shifted quickly towards managing COVID-19 patients, resulting in less emphasis on non-covid patients such as Hemophilia patients. The low disease awareness amongst patients and lack of accessibility to specialists are critical factors that make the Haemophilia patients furthermore vulnerable.

Hemophilia is a hereditary genetic blood disorder that impairs the body's ability to control blood clotting. People with these diseases do not bleed any faster than normal but can bleed for a longer time.

Patients with Hemophilia are having a tough time accessing treatment as they are also in constant fear of contracting the coronavirus, being part of the vulnerable category. Though the factors required for the treatment are available at hospitals but due to the whole coronavirus situation, the patients fear going to the hospitals for their treatment. The critical need for early diagnosis, access to treatment, and physiotherapy is crucial for people with Hemophilia to lead a near-normal life.

With easy access to factor replacement therapy and physiotherapy, Hemophilia patients, especially children- can fight this life-threatening blood disorder. The risk of death from lack of basic knowledge and untreated Hemophilia is very high. They also laid strong emphasis on Government support to ensure availability of diagnosis facility, factor replacement therapy and physiotherapy at Government centres.

According to Dr Radhika Kanakaratna, Assistant Professor - Pathologist, Nizams Institute of Medical Services, Hyderabad, " The ongoing pandemic has brought some changes in our management of haemophiliacs. The number of Hemophilia patients visiting hospital has significantly reduced and only 5-6 patients visit each month. The diagnosis centre is operational, but the routine prophylaxis is temporarily withheld in view of shortage of factor support. The Haemophiliacs are at same risk of covid-19 as the general population so it is advisable that patients take all the precautions and be more cautious about sustaining injuries as they are at the risk of complications especially bleeding risk."