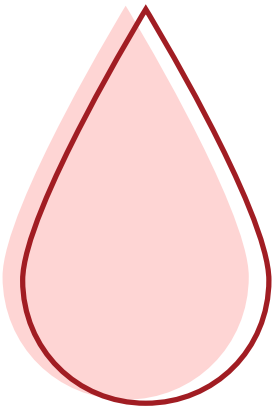
ASH ISTH NHF WFH Guideline Recommendations for Management of von Willebrand Disease (VWD)



What it covers

- Evidence-based recommendations for treatment of VWD in the setting of major and minor surgery, testing during invasive procedures, use of desmopressin, and use of von Willebrand factor (VWF) concentrate prophylaxis.

Why it matters

- VWD is the most common inherited bleeding disorder.
- There is currently wide variability in clinical practice for treatment of VWD due to a lack of high-certainty evidence to guide decision-making.
- There are multiple subtypes of VWD that require individualized treatment based on specific diagnosis, with a range of symptoms and multiple therapies available to treat them. It is in the best interests of the physician and patient to have guidance to match the condition with the appropriate treatment.

Who it affects

- **Hematologists, General Practitioners, Internists, OB/GYNs, Surgeons, Anesthesiologists, Dentists**

  The guidelines provide recommendations for shared decision-making that aim to increase access to quality care for individuals living with VWD.

- **Individuals with VWD**

  Because there are a wide array of symptoms and many different therapies for VWD, evidence-based recommendations are needed to improve access to appropriate treatments and facilitate individualized therapy.

What are the highlights

- The guidelines make key recommendations to address a wide array of VWD manifestations, and best-practices for management of VWD in medical or other settings, including:

  prophylaxis for frequent recurrent bleeding;

  desmopressin trials to determine therapy;

  use of antiplatelet agents and anticoagulant therapy;

  target VWF and factor VIII activity levels for major surgery;

  strategies to reduce bleeding during minor surgery or invasive procedures;

  management options for heavy menstrual bleeding;

  management of VWD in the context of epidurals during labor and delivery;

  management in the postpartum setting.

Total number of panel recommendations: 12

Reference: Connell NT, Flood VH, Brignardello-Petersen R, et al. ASH ISTH NHF WFH 2021 guidelines on the management of von Willebrand disease. Blood Adv. 2021;5(1):301-325.