



Moving Beyond “One-Size-Fits-All” Personalized Care in Hemophilia

INTRODUCTION

Hemophilia treatment has come a long way. Gone are the days when everyone followed the same schedule and used the same factor. Today, there are **multiple options**—including factor replacement, non-factor therapies, and gene therapy—allowing care to be tailored to your unique needs, lifestyle, and goals. This FAQ answers common questions to help you understand how personalized care works.

1. Is hemophilia treatment the same for everyone?

Not anymore. Treatment used to be one standard schedule for all patients. Now, therapy can be adjusted based on **bleeding patterns, activity level, inhibitor status, and personal preferences**. The right plan for you may differ from someone else, and that’s expected.



2. Why does my friend with hemophilia have a different treatment plan than mine?

Every person with hemophilia is unique. Factors such as **how often you bleed, whether you have inhibitors, your age, lifestyle, and vein health** all affect treatment choices. Personalized plans ensure you get **protection that works for you**, not just a generic schedule.

3. What does “personalized prophylaxis” mean?

It means **preventive treatment that is tailored to you**. Your care team adjusts the **type, dose, and timing** of therapy to provide enough protection without unnecessary infusions or side effects. Some teams use **bleed logs, lab testing, or even digital monitoring** to fine-tune your plan.

4. Are newer non-factor therapies part of this personalized approach?

Yes. Therapies such as **emicizumab, concizumab, marstacimab, and fitusiran** allow for **different injection schedules and methods**, helping you maintain daily activities with fewer disruptions. These options expand your ability to choose a plan that fits **your life, not just your lab results**.

5. If I’m doing well on my current therapy, should I still ask about new options?

Yes. Even if your current plan works, newer therapies may offer **greater convenience, fewer infusions, or improved bleed protection**. Talking with your care team helps you weigh the benefits, risks, and lifestyle fit before making any changes.

6. How do I know if my treatment plan is “right” for me?

Signs that your plan is working:

- Few or no breakthrough bleeds
- Confidence in managing your treatment
- Ability to live your life without major limitations

If you are experiencing breakthrough bleeds, difficulty with dosing, or lifestyle disruptions, it may be time to **revisit your plan with your care team**.

7. What is shared decision-making?

Shared decision-making is a **collaborative approach** where you and your care team discuss your experiences, goals, and preferences alongside medical options and evidence. Together, you decide on the treatment approach that best fits **your health and lifestyle**.



8. Key Takeaway

The era of “one-size-fits-all” in hemophilia is over. Modern therapies allow care to be **as unique as you are**. Staying informed, asking questions, and working with your care team ensures your treatment plan matches **your goals, activities, and comfort level**.

9. Talk to Your Care Team

If you have questions about your current therapy, new treatment options, or how to make your prophylaxis plan fit your life, **reach out to your hematology care team**. They are your partners in finding the plan that works best for you.

