

Top tips on how to care for a patient with von Willebrand disease



Acute care

In case of bleeding events or other conditions requiring acute medical care, **prepare for excessive bleeding and prioritise the bleeding.**

Ask the patient for their disease type, bleeding history and treatment of choice (or check the [guidelines](#)¹ if this is not possible).

! Consult a haematologist



Major surgery

Increased bleeding risk, so involve a haematologist early, as **careful planning is required.**

Ensure a **haemostasis care plan** is in place for the prevention and treatment of bleeding complications; prevention is preferred over treatment of bleeding when it occurs.



Minor elective surgery & invasive procedures

(e.g. endoscopy, fertility procedures)

The same considerations apply as for major surgery, although antifibrinolytic treatment may be sufficient to manage the bleeding risk.



Dental procedures

Dental procedures require **upfront risk assessment and careful planning.**

Dental cleaning, fillings, sealants and dental injections are usually not high-risk procedures and can be carried out under antifibrinolytic cover.

Higher-risk procedures (e.g., gum surgery or dental extractions) require local measures and/or systemic treatment, and post-operative instructions.



Pregnancy & delivery

Pregnant patients should be followed up in a **high-risk antenatal clinic.**

Pregnancy can increase VWF levels, but if the natural increase is insufficient, additional treatment is required for delivery.



Concomitant medication

Before starting any new medication, **check for a potential impact on clotting** and discuss the individual risk-benefit profile with a haematologist.

NSAIDs and aspirin are relatively contraindicated; paracetamol and COX-2 inhibitors can be used for pain relief.



Day-to-day care

Common symptoms like **nosebleeds and heavy menstrual bleeding are treatable.**

A multidisciplinary approach is required to improve patients' quality of life.



Go to HEMOSTASISCONNECT.COR2ED.COM for more information and resources on von Willebrand disease

¹ Connell NT, et al. Blood Adv 2021;5:301–25