



Development of Women, Girls, and People Who Have or Had the Potential to Menstruate (WGPPM) questionnaire for PROBE study

A. KUCHER¹, M. W. SKINNER^{2,3}, E. CLEARFIELD², F. BRENNAN², D. ROTELLINI⁴, Y. COLLE^{5,6,7}, P. A. WILTON⁸

1 Patient Outcomes Research Group Ltd. (PORO), Washington DC, USA

2 Institute for Policy Advancement, Ltd, Washington DC, USA.

3 McMaster University, Hamilton, Canada

4 National Bleeding Disorders Foundation (NBDF), New York, USA

5 Association française des hémophiles, Paris, France

6 The European Haemophilia Consortium (EHC), Brussels, Belgium

7 The World Federation of Hemophilia (WFH), Montreal, Canada

8 Canadian Hemophilia Society, Montreal (CHS), Canada



INTRODUCTION

The Patient Reported Outcomes, Burdens, and Experiences (PROBE) survey was first developed in 2012. PROBE currently collects data from people with hemophilia A or B, including carriers, and people without a bleeding disorder (NoBD) who serve as a control group. To date, there has been limited global comparative patient reported data on health outcomes and quality of life (HRQoL) about WGPPM.



PARTICIPATE and LEAVE US YOUR FEEDBACK



RESULTS

The group identified von Willebrand Disease (VWD), platelet disorders, rare factor deficiencies, and other rare bleeding disorders for inclusion. New concepts include access to healthcare (including specialties); visits to emergency room; bleeding episodes unique to WGPPM (e.g., menstrual bleeding; gynecological problems), decision-making around having children, and impact on social and leisure life.



Updated bleeding disorders	Von Willebrand Disease (VWD), platelet disorder, rare factor deficiency
Additional treatments	factor concentrates, recombinant factor, platelet transfusions, iron treatments, and other
Diagnoses	age of diagnoses, abnormal bleeding episodes
Health care professionals	access to medical professionals, missing access to medical professionals, urgent care visits
Bleeding events	nosebleeds, easy bruising, heavy menstrual bleeding
Gynecological	menopause, changes in treatment/access to treatment, gynecological issues
Quality of Life	decision to have children, impact on social/leisure life

METHOD

The group identified von Willebrand Disease (VWD), platelet disorders, rare factor deficiencies, and other rare bleeding disorders for inclusion. New concepts:

- Access to healthcare (including specialties)
- Visits to emergency room
- Bleeding episodes unique to WGPPM (e.g., menstrual bleeding; gynecological problems)
- Decision-making around having children
- Impact on social and leisure life

CONCLUSIONS

To advance management and treatment for this underserved population it is crucial to collect and report comprehensive data on WGPPM health outcomes and quality of life. The WGPPM PROBE exploratory pilot is scheduled to initiate data collection in early 2025. Through this pilot we anticipate more accurate and comprehensive data will be available to support future advocacy, research, management and treatment. Insights from the pilot will be applied to future PROBE updates.

ACKNOWLEDGEMENT

The PROBE team wishes to thank organizations participated in this study:

- National Beeding Disorder Foundation (NBDF), New York, USA
- Association française des hémophiles, Paris, France
- The European Haemophilia Consortium (EHC), Brussels, Belgium
- The World Federation of Hemophilia (WFH), Montreal, Canada
- Canadian Hemophilia Society (CHS), Montreal, Canada
- McMaster University, Hamilton, Canada



REFERENCES

- 1 Arya S, Wilton P, Page D, Boma-Fischer L, Floros G, Winikoff R, Teitel J, Dainty K, Sholzberg M. "Everything was blood when it comes to me": Understanding the lived experiences of women with inherited bleeding disorders. J Thromb Haemost. 2020 Dec;18(12):3211-3221.
- 2 Byams VR, Baker JR, Bailey C, Connell NT, Creary MS, Curtis RG, Dinno A, Guelcher CJ, Kim M, Kulkarni R, Lattimore S, Norris KL, Ramirez L, Skinner MW, Symington S, Tobase P, Vázquez E, Warren BB, Wheat E, Buckner TW. Building the foundation for a community-generated national research blueprint for inherited bleeding disorders: research priorities in health services; diversity, equity, and inclusion; and implementation science. Expert Rev Hematol. 2023 Mar;16(sup1):87-106
- 3 Weyand AC, Sidonio RF Jr, Sholzberg M. Health issues in women and girls affected by haemophilia with a focus on nomenclature, heavy menstrual bleeding, and musculoskeletal issues. Haemophilia. 2022 May;28 Suppl 4(Suppl 4):18-25
- 4 Barr RD, Sek J, Horsman J, Furlong W, Saleh M, Pai M, Walker L. Health status and health-related quality of life associated with von Willebrand disease. Am J Hematol. 2003 Jun;73(2):108-14
- 5 Arya S, Wilton P, Page D, Boma-Fischer L, Floros G, Dainty K, Winikoff R, Sholzberg M. Healthcare provider perspectives on inequities in access to care for patients with inherited bleeding disorders. PLoS One. 2020 Feb 20;15(2):e0229099.
- 6 Gualtierotti R, Garagiola I, Mortarino M, Spena S, Romero-Lux O, Peyvandi F. n in hemophilia: need for healthcare, familial, and societal advocacy. Front Med (Lausanne). 2024 Apr 5;11:1345496.
- 7 van Galen K, Lavin M, Skouw-Rasmussen N, Fischer K, Noone D, Pollard D, Mauser-Bunschoten E, Khair K, Gomez K, van Loon E, Bagot CN, Eltvinge P, d'Oiron R, Abdul-Kadir R; European Haemophilia Consortium (EHC) and the European Association for Haemophilia and Allied Disorders (EAHAD). European principles of care for women and girls with inherited bleeding disorders. Haemophilia. 2021 Sep;27(5):837-847.

CONTACT INFORMATION

PROBE

www.PROBESStudy.org

info@probestudy.org

At our website you can learn about PROBE's worldwide reach, access our e-platform, find answers to frequently asked questions, and click through our published research to see the types of analyses that can be done using PROBE data.