críticos baseados em evidências disponíveis nas principais bases de dados da literatura médica, alinhados às demandas da ABRAPHEM. A linguagem utilizada é adaptada conforme o público-alvo, abordando temas como conceitos fundamentais sobre hemofilia, opções terapêuticas atuais, novas abordagens em desenvolvimento, avaliação de desfechos clínicos, estratégias de estímulo à adesão ao tratamento e incentivo à prática de comportamentos saudáveis, dentre outros. A publicação dos conteúdos está condicionada à aprovação prévia da ABRAPHEM, que os divulga em suas mídias sociais e acompanha métricas específicas de desempenho em cada plataforma. **Resultados:** Desde maio/2025, foram produzidos quatro materiais educativos, todos divulgados pela ABRAPHEM. Abordaram-se os seguintes temas: suspeita e diagnóstico da hemofilia, cuidado interdisciplinar, urgência e emergência e manejo cirúrgico no contexto da hemofilia. Os materiais foram publicados nas redes sociais Linkedin e Instagram da ABRAPHEM, além de mala direta. As referências incluíram artigos científicos revisados por pares, documentos oficiais de instituições de saúde e informações publicadas nos sites da ABRAPHEM e da Federação Mundial de Hemofilia. As métricas serão avaliadas a partir do terceiro mês da divulgação. **Discussão e Conclusão:** A divulgação de informações baseadas em evidências nas mídias sociais busca aprimorar o atendimento prestado às PcH fora do contexto dos hemocentros. Dessa forma, espera-se que a iniciativa favoreça a redução de condutas inadequadas, fortaleça a articulação entre os diferentes níveis de atenção e promova mais segurança e equidade no manejo da hemofilia no sistema de saúde.

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PROPHYLAXIS FOR INHERITED FACTOR X DEFICIENCY: A SYSTEMATIC REVIEW

AF da Costa, VJP Ferreira, RP Souza, RM Camelo

Universidade Federal de Minas Gerais (UFMG), Belo Horizonte MG, Brazil

Introduction: Hereditary Factor X (FX) Deficiency (FXD) leads to bleeds. Therapy is based on treating (episodic) or avoiding (prophylaxis) bleeds with procoagulants. **Objectives:** We aimed to evaluate the efficacy/effectiveness and safety of prophylaxis against bleeds in people with FXD (PwFXD) compared to exclusive episodic treatment or prophylaxis with a different procoagulant. **Material and methods:** We performed a systematic review based on a database-specific strategic search. Two reviewers blindly selected the publications according to the research question. In addition, prophylaxis-referenced citations from all the included publications and from the excluded reviews published since 2014 were evaluated for eligibility. Efficiency was evaluated as bleeding-related outcomes. Quality and risk of bias were assessed using the Joanna Briggs Institute checklists. (CRD42024535021). **Results:** Sixteen publications involving 76 PwFXD on prophylaxis were included, comprising quasi-experimental (3 [19%]/35 PwFXD [46%]), cohort (2 [12%]/21 PwFXD [27%]), and case reports (11 [69%]/20 PwFXD [26%]). Interventional prophylactic procoagulants were prothrombin complex concentrate (9 publications), plasma-derived FX (6 publications), and plasma-derived factor IX (1 publication). Individual annualized bleeding rates (iABR) ranged from 0 to 2.2 (n=13 publications). Thirty PwFXD with zero bleed were reported. Among controls, all 16 publications reported bleeding, with iABR ranging from 2.4 to 136.8 (6 publications). Two PwFXD had zero bleed. Only 2 (18%) case reports met high-quality criteria; no cohort or quasi-experimental study had high-quality. **Discussion and Conclusion:** Most publications and authors formed a connected citation network, indicating collaborative efforts and shared research focus in FXD prophylaxis. Prophylaxis in PwFXD was described as more effective than episodic treatment. However, best designed studies based on well-defined outcomes are required to certify this evidence.

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PSYCHOSOCIAL AND FUNCTIONAL IMPACTS OF HEMOPHILIA: FINDINGS FROM A THEMATIC ANALYSIS OF PATIENT EXPERIENCES IN BRAZIL

J Balardin [a], GG Yamaguti-Hayakawa [b], CF Carvalho [a], V da Silva [a], TMO Pietrobelli [c], MR Alves [d], A Dantas [d], DV Pachito [d]

[a] *Oracle Life Sciences, São Paulo, SP, Brazil*
[b] *Universidade Estadual de Campinas (UNICAMP), São Paulo, SP, Brazil*
[c] *Federação Brasileira de Hemofilia (FBH), Caxias do Sul, RS, Brazil*
[d] *Pfizer, São Paulo, SP, Brazil*

Introduction: Although advances in hemophilia care have significantly improved clinical outcomes, people with hemophilia (PwH) in Brazil continue to experience substantial psychosocial challenges. These range from psychological distress to limitations in work, education, social participation, and family life. **Objectives:** To explore the lived experiences of Brazilian PwH with a focus on psychosocial and functional challenges that persist despite access to treatment. **Material and methods:** A targeted thematic analysis was conducted using qualitative data from semi- structured interviews with 23 participants recruited through a national hemophilia patient association (Federação Brasileira de Hemofilia). Interviews were audio-recorded, transcribed verbatim, and analyzed using a thematic framework approach. Participants also completed the EQ- 5D-5L questionnaire to assess self-reported health-related quality of life. **Results:** Most participants were working-age adults (52.2%) and had either severe hemophilia A (n = 16) or B (n = 7). An analysis of EQ-5D-5L responses showed extensive impairment among participants: 87% reported mobility limitations, and 65% experienced moderate to severe pain. Notably, only one individual (4.3%) indicated the highest level of impairment across all five domains, while another (4.3%) reported no impairment in any domain.