Therapeutic Exercise Plan Individualized in Domicile and Bleeding Episodes in hemophiliac adults

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Introduction and aims: *Reports of the literature suggest that the periodic accomplishment of exercise diminishes the frequency of bleeding into joints and muscles, besides the fact that it improves the quality of life. Stablish an individual therapeutic exercise plan in domicile for phisical therapy, as a therapeutic strategy complementary to the pharmacological prevention and to assess the clinical response.*



Materials and methods: Four clinical histories about patients were checked on the age range from 17 to 34, two with Hemophilia A severe, one moderated and another one with Hemophilia B severe, those who get pharmacological tertiary prevention and attention for multidisciplinary equipment from the year 2012 to 2015 don't have inhibitors or another comorbidities.

They have a Therapeutic Exercise Plan Individualized in Domicile (TEPID) ajusted per year and supervised by physical therapist in sessions of an average hour of duration, that includes activities of stretching, strengthening and proprioception.

The following variables were defined: Meetings of the TEPID of beginning: 2012 (2 weekly sessions): 104, The second year 2013 (3 weekly sessions): 156, the third year 2014 (4 weekly sessions): 208 and fourth year 2015 (5 weekly sessions): 260. Was correlated by the frequency of presentation of bleeding episodes (BE) And established bleeding average episodes (BAE) For 4 years of follow-up.



Results: 1 fulfilled 88 % of the TEPID with BAE 4,5 and decrease of hemorrhagic Events (BE) in 62,5 %, 1 fulfilled 92 % of the TEPID with BAE of 3,75 and the decrease of 100 % of BE, 1 fulfilled 88 % of the TEPID with BAE of 1,75 and decrease of 75 % of BE, and 1 fulfilled 43 % of the TEPID with BAE 4 and I increase of 25 % of BE.

Conclusion:

To establish and execute a TEPID To hemophiliac patients diminishes significant form the BE. The breach of the TEPID predisposes new BE.

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