THAT "1-IN-A-MILLION" NEONATE IS DEPENDING ON YOU.

Neonates with hereditary factor X deficiency need urgent diagnosis and treatment to help prevent permanent impairment or mortality. For this rare disease, recognizing early symptoms and diagnostic indicators can help prepare you to mobilize a team to act quickly when needed.

10X10
Hereditary Factor X Deficiency
AWARENESS DAY

Hereditary Factor X Deficiency Awareness Day is 10/10/23

10 Fast Facts About Hereditary Factor X Deficiency in Neonates

1. **Hereditary factor X deficiency is a rare bleeding disorder** affecting about **1 in a million** people, with approximately 1 in 500 people being carriers[1,2]
2. Undiagnosed and untreated neonates can be at **high risk for severe, life-threatening bleeds**[1,3]
3. **Symptoms** can include **gastrointestinal or intracranial hemorrhage (ICH).** ICH occurs in >20% of severe, symptomatic factor X-deficient patients, **most commonly in neonates**[1,3,4]
4. ICH and GI bleeds are likely to occur early in life. In neonates with hereditary factor X deficiency, **ICH or GI bleeds presented at a median age of 9.7 days***[3,4]
5. ICH due to factor X deficiency can result in **permanent impairment or mortality** in neonates[3]
6. **Symptoms** can also include **abnormal bruising** or **bleeding,** or **bleeding that won't stop normally from the umbilical stump or post-circumcision**[1]
7. **Unexpected bleeding** may occur over a **broad range of factor X deficiency (0–40% of normal)**[5]
8. **Prolonged PT and aPTT** suggest that testing for factor X deficiency may be appropriate[1,2]
9. **Confirmatory testing for diagnosis is via a single blood test** (plasma coagulation factor X activity assay)[5]
10. **Prophylactic treatment is available to help prevent bleeds in patients** diagnosed with factor X deficiency[5]

*In a study of 102 adult and pediatric patients with hereditary factor X deficiency, 42 of whom were symptomatic.

PT = prothrombin time; aPTT = activated partial thromboplastin time

References: 1. Brown DL, et al. *Haemophilia.* 2008;14(6):1176-1182. **2.** Palla R, et al. *Blood.* 2015;125(13):2052-2061. **3.** Tarantino MD. *Haemophilia.* 2021;00:1-13. doi: 10.1111/hae.14223. **4.** Hermann FH, et al. *Haemophilia.* 2006;12:479-489. **5.** Peyvandi F, et al. *Blood Reviews.* 2021:50. doi: 10.1016/j.blre.2021.100833.

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