The impact of psychosocial support on the knowledge and health related quality of life of parents of Indian children with hemophilia

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Introduction & Objective: There are few studies that measure the impact of psychosocial support on the quality of life of parents of children with hemophilia from low middle income countries. The purpose of this interventional study was to determine the health related quality of life (HRQOL) of parents of children with hemophilia, parent’s knowledge about hemophilia and its management and to determine whether psychosocial support intervention (PSS) can positively impact these outcomes.

Materials & Methods: 133 parents from across Maharashtra state India were provided PSS. Knowledge and practice of management of bleeding was measured using pre-tested structured questionnaires and HRQOL was measured using a validated Peds Quality of Life™ Family Impact Module (PedsQL™ FIM) tool. The impact of PSS on these parameters was measured as change occurring from baseline to six months and one year after intervention.

Results: There was a significant improvement in knowledge scores immediately after intervention, which remained significantly higher one year after intervention. HRQOL showed statistically significant improvement at six months but reduced to baseline levels one year after intervention. There was significant change in terms of practice of management of bleeding episodes at six months and one year after intervention.

Conclusion: PSS resulted in improvement of knowledge and practice of management of bleeding. However, a single psychosocial support intervention did not have any long term effect on the HRQOL of parents. The study suggests the need for introduction of regular PSS for parents of patients with hemophilia in India.

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Prognostic significance of DNMT3A mutations in Egyptian patients with acute myeloid leukemia

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Background: Acute myeloid leukemia (AML) represents a heterogeneous group of malignancies with great variability in clinical course and response to therapy. Several molecular markers have been described that help to classify AML patients into risk groups. Mutations in DNA methyltransferase 3A (DNMT3A) gene were recently demonstrated in AML. Approximately 20% patients with AML carry DNMT3A gene mutations and were associated with a poor clinical outcome but its clinical implications in Egyptian AML patients are largely unknown.

Aim: To study the incidence and prognostic impact of DNMT3A mutations in patients with de novo acute myeloid leukemia.

Patients & Methods: A total of 120 patients with de novo AML were examined for mutations in DNMT3A by sequencing.

Results: In the present study of 120 patients with de novo AML, DNMT3A mutations were identified in 34/120 (28%) of AML patients. 15 patients with M4, 14 patients with M5, 3 patient with M2 and 2 patient with M6. DNMT3A mutations were more frequently associated with older age, higher platelet counts and intermediate- risk. DNMT3A-mutated patients did not differ regarding complete remission (CR) and disease-free survival (DFS), but had shorter overall survival (OS; P=0.048) than DNMT3A-wild-type patients. Mutations in DNMT3A independently predicted a shorter OS (P=0.049, OR=3.530, 95% CI=0.706-5.328) by multivariate analysis.

Conclusion: We concluded that DNMT3A mutations are highly frequent in Egyptian patients with AML and are associated with an unfavorable prognosis.

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