**DIAGNOSIS**
- Prolonged aPPT, normal bleeding time
- Clinical picture, family history, and the factor VIII coagulant activity level

**TREATMENT**
- Cryoprecipitate
- Recombinant factor VIII
- DDAVP (desmopressin) for patients with mild hemophilia A

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**HEMOPHILIA B (CHRISTMAS DISEASE)**

**PATHOPHYSIOLOGY**
X-linked recessive disease that causes a deficiency of factor IX

**CLINICAL**
Identical to hemophilia A

**DIAGNOSIS**
Factor IX assay

**TREATMENT**
- Fresh frozen plasma (FFP)
- Recombinant factor IX

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**HEMATOLOGIC MALIGNANCES**

**ACUTE LEUKEMIA**

**TYPES**
- Acute lymphocytic leukemia (ALL)
- Acute myelogenous leukemia (AML)

**PATHOPHYSIOLOGY**
- Hematopoietic disorder in which progenitor cells have transformed into malignant cells
- These leukemic cells accumulate in the bone marrow to disrupt the differentiation of normal cells.
- Clinical manifestations occur because of the loss of normal bone marrow elements and by infiltration of the body's tissues by malignant cells.

**SIGNS AND SYMPTOMS**
- Anemia: Weakness, fatigue, pallor, cardiopulmonary compromise
- Neutropenia: Infections, fever

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**HIGH-YIELD FACTS**

Unlike in vWD, bleeding time in hemophilia A is unaffected because no abnormality with platelets is present.