

Hemophilia in Afghanistan

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OUTLINE

Afghanistan

- > Geographical
- > Culture
- ➤ Language
- > Ethnic

Congenital bleeding disorders in Afghanistan

- > Past
- > Current
- > Achievements

Recommendations

Geographics and Population

A mountainous landlocked country in southern Central Asia.

Borders

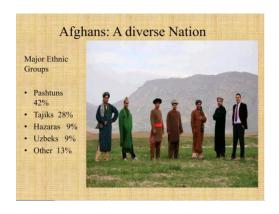
North

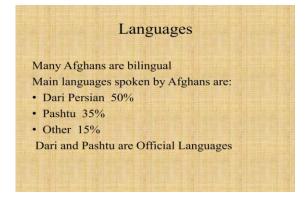
West

East and south



Population **41,470,699** (25.4 % urban)





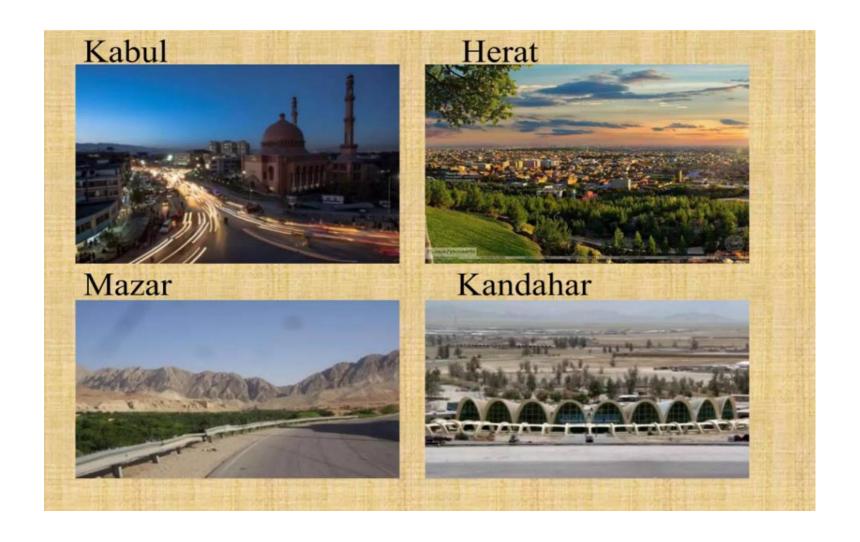
Geopolitics

- > Crossroads on ancient trade routes
- > Buffer between different religions
- Buffer between major powers





Metropolises



Festivals

- > Nowruz
- ➤ Eid al-Fitr (end of Ramadan)
- ➤ Eid al-Adha



https://www.khaama.com/afghanistan-celebrates-nowruz-new-year-9946/





Types of production

- > Fresh fruits
- > Dried fruits
- > Handicrafts



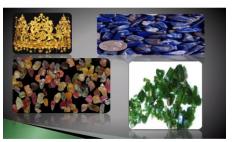












Traditional clothing in Afghanistan







Food and beverage traditions



















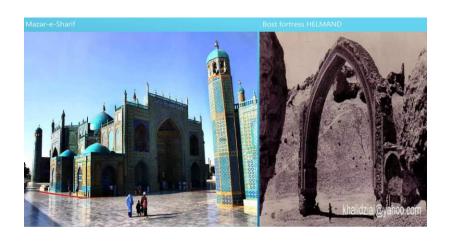
Diverse climate across different regions of Afghanistan



National Parks & Touristic Attractions









Natural Resources

Afghanistan is believed to hold more than \$1 trillion worth of mineral resources and metals but faces many challenges in tapping them

Years of **foreign invasions in Afghanistan** have hindered the country's ability to **achieve economic stability**, resulting in its dependency on resource-rich nations

Afghanistan does sit atop huge deposits of copper, iron, marble, talc, coal, lithium, chromite, cobalt, gold, lapis lazuli, gemstones, and more—making Afghanistan one of the world's most resource-rich countries on paper.



Afghanistan before Taliban Invasion



Afghanistan before coming Taliban 2020



Taliban Invasion

The Taliban, extremist or radical militants

Disregard for human rights and engage in acts of violence resulting in loss of thousands of lives.

Took control of Afghanistan After the evacuation of American and NATO forces in August 2021

Is not recognized by any country.

Criticized for restricting human rights in Afghanistan, especially for women and girls



The image portrays the fleeing of frightened civilians in response to the Taliban's invasion in Afghanistan







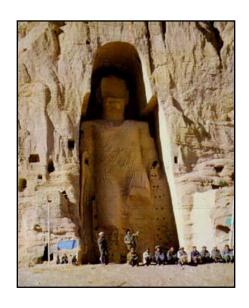
Taliban's stance on women

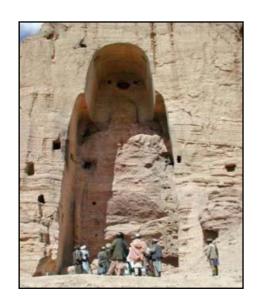


- Exclusion of women from the workforce, resulting in their banishment.
- Closure of schools for girls and women, denying them access to education.
- Expulsion of women from universities, limiting their opportunities for **higher education**.
- Imposition of restrictions on women's mobility, prohibiting them from leaving their homes.
- Mandating the wearing of the burqa, a garment that covers the entire body and allows only a small mesh-covered opening for vision.
- Prohibition of women and girls from being examined by male physicians, limiting their access to medical care.
- Simultaneously, imposing restrictions on female doctors and nurses, preventing them from practicing their profession.

Taliban's destructive approach

The Taliban's destructive approach towards **historic Buddhist religious** art reflects their intolerance and disregard for cultural heritage





Befor Now

Congenital bleeding disorders in Afghanistan

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Recommendations

In 2009, an Afghan doctor and a laboratory technician underwent a 5-month training program in collaboration with the **Paracelso Foundation and the Milan Hemophilia Hospital**.

Additionally, the establishment of the laboratory was made possible with financial assistance from the **Sysmax UK** company, which provided a Sysmax device.





In late October **2011**, a team comprising Andrea Buzzi, the President of Paracelso Fondazione, and Dr. Flora Peyvandi, the Director of the Milan Hemophilia Centre, traveled to Kabul on **behalf of WFH** to ensure all preparations were in place



During the World Congress held in Paris from 8 to 12 July 2012, the recently established Afghan Hemophilia Association was officially accepted into the WFH



Hemophilia Prevalence and Challenges in Afghanistan

In 2012, a total of 87 individuals with hemophilia were detected, which subsequently escalated to 288 by the year 2016.

Hemophilia A constituted over 90% of these cases, while the remaining individuals were diagnosed with hemophilia B.

Regrettably, Afghanistan has **not** been able to **identify any other** rare bleeding disorders due to insufficient resources insecurity and a scarcity of specialists.

Gathering of experts and individuals with hemophilia for discussions and consultations by representatives of WFH







In the year 2017, blood and plasma samples were collected from a total of 361 individuals belonging to 63 distinct families affected by hemophilia







Most adult hemophiliacs have disability in the joints







Interactions with individuals experiencing bleeding disorders











AHPA - Afghanistan hemophilia Patient Association | Facebook

Organizing virtual workshops and online seminars to enhance community awareness













Organizing virtual workshops and online seminars to enhance community awareness









Introducing a specialized health publication titled "SMILE": Empowering the ones with poor conditions





World Hemophilia Day on April 17













Engagement in seminars and global conferences







- Absence of accurate statistics on the prevalence of congenital bleeding disorders in Afghanistan
- Estimated figures suggest that over 35,000 individuals in Afghanistan are affected by bleeding disorders
- Afghanistan Blood Bank reported over 600 cases of hemophilia A and around 30 cases of hemophilia B
- 1. Limited availability of specialists and medical facilities hampers the identification of other individuals with hemophilia, leading many to seek diagnosis in neighboring countries such as Iran and Pakistan.

Insufficient **number of experts** specializing in diagnosis, treatment, and education for bleeding disorders.

The absence of a dedicated hemophilia **treatment center** in Afghanistan.

Inadequate supply of **coagulation factors** required for treatment.

High risk of **viral infections transmission** through blood products like fresh frozen plasma (**FFP**).







Lack of active involvement of **individual**s with bleeding disorders.

Limited availability of **essential health services** such as physiotherapy and psycholog.

Patients facing challenges with the purchase of lowquality or expired drugs.

Unequal access to and distribution of coagulation factors among patients.

Insufficient provision of genetic counseling prior to marriage.

High occurrence of **consanguineous marriages**, contributing to the prevalence of hemophilia.





Inadequate facilities for prenatal diagnosis.

Lack of **government support** for individuals with bleeding disorders.

Limited knowledge among both the public and experts regarding hemophilia.

Socioeconomic factors such as poverty, unemployment, low literacy rates, and limited awareness exacerbate the challenges f



Recommendation

Encouraging the establishment of patient-managed organizations with government support to empower individuals with bleeding disorders and address their needs effectively.

Setting up hemophilia treatment centers in major cities across the country to ensure accessible and specialized care for patients.

Facilitating twinning collaborations with neighboring countries like Iran and Pakistan to promote knowledge sharing, scientific advancements, and social exchanges related to hemophilia.

Inviting experts from abroad and investing in the training of new specialists within Afghanistan to enhance the local expertise in hemophilia management.

Seeking accreditation and fostering trust-building relationships with international organizations such as WFH (World Federation of Hemophilia) to gain access to resources, expertise, and global support.

Recommendation

Seeking assistance from charitable foundations that actively provide medicine and support to individuals with bleeding disorders.

Organizing seminars and workshops specifically designed for hemophiliacs and their families to raise awareness about the condition, treatment options, and coping strategies.

Addressing the economic and social challenges faced by individuals with bleeding disorders to improve their overall well-being and quality of life.

Supporting the blood bank infrastructure to ensure the availability of safe and healthy blood products for individuals with bleeding disorders.

Research and Publications

Mousavi, Sayed H.a; Mesbah-Namin, Seyed A.a; Rezaie, Nematullahb; Jazebi, Mohammadc; Zeinali, Sirousd,e. Prevalence of factor VIII inhibitors among Afghan patients with hemophilia A: a first report. Blood Coagulation & Fibrinolysis 29(8):p 697-700, December 2018.

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- 12. First Report of Prevalence of Blood-Borne Viruses (HBV, HCV, HIV, HTLV-1 and Parvovirus B19) Among Hemophilia Patients in Afghanistan | Scientific Reports (nature.com)
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THANK YOU!