



The Adolescent Hematology Clinic: A New Service from Nationwide Children's Hospital

When is a “heavy period” a possible sign of a bleeding disorder?

Unrecognized bleeding disorders are more common than many clinicians realize. Nationwide Children's Hospital now offers a new resource, the only one of its kind in Ohio, to help diagnose and treat menorrhagia. The Adolescent Hematology Clinic at the Dublin *Close To Home*SM Center offers both hematology and adolescent reproductive health expertise in a single clinic to assist you and your patient.

The Adolescent Hematology Clinic

The Adolescent Hematology Clinic at the Dublin *Close To Home*SM Center boasts a hematology and adolescent gynecology team with remarkable expertise, and a caring approach to adolescent girls with possible bleeding disorders. The only clinic of its kind in Ohio, it offers specialized diagnosis and treatment options for adolescents with excessive vaginal bleeding. As part of Nationwide Children's Hospital, it is linked to a comprehensive treatment center for bleeding disorders which is one of over 130 federally-designated Hemophilia Treatment Centers (HTCs). Backed by the state-of-the-art medical care, research and support of Nationwide Children's Hospital, the Adolescent Hematology Clinic takes place one day a month but takes calls at all times. It is located at 5675 Venture Drive, Dublin, Ohio 43017.

What inherited bleeding disorders can lead to menorrhagia?

- :: von Willebrand disease
- :: Platelet function defects
- :: Factor XI deficiency
- :: Hemophilia A or B carrier
- :: Rare factor deficiencies
- :: Collagen vascular diseases (Ehlers-Danlos syndrome)

PHYSICIAN TEAM



Sarah O'Brien, MD, MSc, is a physician in the Division of Hematology/Oncology/BMT at Nationwide Children's Hospital and an Assistant Professor of Pediatrics at The Ohio State University College of Medicine. Dr. O'Brien is also an investigator in the Center for Innovation in Pediatric Practice at The Research Institute at Nationwide Children's Hospital and a recipient of the American Society of Hematology Fellow Scholar Award. Her research involves the use of health services research techniques to improve decision making in the field of pediatric hematology. Current research projects involve the use of thromboprophylaxis in pediatric and adolescent trauma patients and the use of hormonal contraception in adolescent females at increased risk of blood clots.



Cynthia Holland-Hall, MD, MPH, is a physician in the Section of Adolescent Health at Nationwide Children's Hospital and an Associate Professor of Clinical Pediatrics at The Ohio State University College of Medicine. She was named among the "Best Doctors in America" in 2008 and is board-certified in pediatrics and adolescent medicine. Dr. Holland-Hall is an active member of the North American Society for Pediatric and Adolescent Gynecology, the Society for Adolescent Medicine and the American Academy of Pediatrics. She has co-authored two texts on adolescent medicine, has authored several review articles, and serves on the Editorial Board for the *Journal of Pediatric and Adolescent Gynecology*.

Menorrhagia: a Signal of a Bleeding Disorder?

Undiagnosed bleeding disorders can cause dangerous bleeding after accidents, injuries, childbirth, minor surgery or even dental work. Adverse outcomes of bleeding disorders can be prevented or controlled with treatment, significantly enhancing both the patient's safety and her quality of life, but the bleeding disorder must first be recognized.

As symptoms of several common bleeding disorders in girls are mild, menorrhagia may be the first or only clinical manifestation. Excessive vaginal bleeding can have several causes, including hormonal imbalances, infection, and the use of certain medications. The prevalence of bleeding disorders among women with menorrhagia is high, with estimates ranging from 5 to 20 percent. Remember that patients for whom heavy periods "run in the family" may perceive their menorrhagia as normal.



PRACTICE TOOL

THE ADOLESCENT HEMATOLOGY CLINIC AT NATIONWIDE CHILDREN'S HOSPITAL'S DUBLIN *CLOSE TO HOME*SM CENTER

Patient and Family History

A detailed patient and family history allows the physician to classify bleeding and can lead to a diagnosis. The use of specific questions that require quantification of bleeding symptoms is necessary. The bleeding history should include personal and familial inquiries about:

- Duration and extent of menstrual blood flow
- Location and frequency of bruising
- Whether joint or muscle bleeding has ever occurred
- Frequency and duration of nosebleeds or epistaxis
- Responses to hemostatic challenges such as traumas or surgeries
- Capacity for proper wound healing
- Degree of joint laxity
- Coexisting medical conditions and medication history

To make a referral or schedule a consultation at the Adolescent Hematology Clinic, call (614) 722-5867 any time:

:: Linda Grooms, RN
 :: Cynthia Holland-Hall, MD, MPH
 :: Sarah O'Brien, MD
 :: Michelle Walsh, PhD, CPNP

Dublin *Close To Home*SM Center
 Medical Office Building
 5675 Venture Drive
 Dublin, Ohio 43017



To make a referral or schedule a consultation, call (614) 722-5867 or schedule online at www.NationwideChildrens.org.

For urgent physician consults with an attending physician, call (614) 722-8231.

THE ADOLESCENT HEMATOLOGY CLINIC AT NATIONWIDE CHILDREN'S HOSPITAL'S DUBLIN *CLOSE TO HOME*SM CENTER

Diagnosing Menorrhagia

Consider a diagnosis of menorrhagia in your patients whose menstrual periods:

- :: Last more than seven days
- :: Soak through a pad or tampon in one hour, for two to three hours in a row
- :: Include the passage of blood clots larger than 1 inch in diameter ("about the size of a quarter")
- :: Make it difficult for her to attend school due to the challenges of menstrual hygiene
- :: Cause her to alter her social schedule or plan events according to her menstrual cycle
- :: Demonstrate "flooding," with unexpected onset of flow "like turning on a tap"
- :: Are associated with anemia

Possible Indicators of a Bleeding Disorder (Symptoms may vary with severity; some may not be present at all.)

- Heavy periods, particularly those starting at the time of menarche
- Easy bruising or large bruises from a minor bump or injury
- Excessive or prolonged bleeding
- Frequent or prolonged nosebleeds that are difficult to stop
- Mouth and gum bleeding
- Muscle bleeding and swelling
- Joint bleeding
- Continual bleeding at immunization sites
- Bleeding with minor dental procedures
- Heavy bleeding following injury, surgery, childbirth or dental work
- Heavy bleeding from reproductive disorders that cause bleeding, such as endometriosis
- Family history of bleeding disorders or several of the above symptoms

Hematology/Oncology & BMT

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Columbus, Ohio 43205
NationwideChildrens.org/Cancer

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