

Paediatric Haemophilia Service

Acute Bleed Advice

This leaflet explains what to do in the event of your child having an acute bleed. If you have any further questions, please speak to a staff member caring for your child.

Introduction

Prompt treatment of joint and muscle bleeds helps to prevent joint deformities and muscle wasting in later life. The aim of this information leaflet is to give you advice about what to do following a bleed into a joint or muscle, to reduce pain and swelling and prevent lasting damage. The aim of physiotherapy following a bleed is to return the joint or muscle to its pre-bleed status.

What to do if your child has a bleed

The first and most important thing to do following a bleed is to treat your child with adequate factor replacement therapy. You can contact the Haemophilia Centre and speak to the doctors and nurses if you need advice about how much treatment to give.

Then follow this simple regime in the first 72 hours.

P	Protection
R	Rest
I	Ice
C	Compression
E	Elevation

Protection

Protect the injured part from further aggravation and stop activities that make things worse. Your child may need to use crutches to take the weight off the injured leg – knee/ankle joint.

Rest

The injured area should rest in a comfortable position to allow the swelling to go down. If the bleed is in the leg, then crutches may be needed to keep the weight off. The injured area should not be forced into any position but should be rested in the position that is most comfortable, e.g. with the knee bent over a pillow.

Ice

This is a very good method of reducing the swelling and muscle spasm that produce pain. To make an ice pack at home, wrap a packet of frozen peas in a cold wet tea towel and place it over the area for 10 to 15 minutes. Repeat every two hours to be most effective.

Compression

This is another good way of reducing swelling, using tubular and elasticated bandages, covering eight inches either side. Make sure that the bandage is not too tight.

Elevation

Raising the injured area helps to reduce swelling by increasing the blood flow away from the bleed.

For best results the injured area should be raised above the level of the heart and the compression bandage should be removed. (This advice is based on guidelines by the Association of Chartered Physiotherapists in Sports Medicine (ACPSM 1998)

What to do when the bleeding has stopped

Bleeding usually stops after 24 to 48 hours if adequate factor replacement has been used. It is likely that the bleeding has stopped if your child has less pain, more movement and the joint or muscle feels less tense.

Once the bleeding has stopped then your child can start being more active:

- If the bleed is in the leg or hip, begin putting weight through it and increase this within your child's limits of pain.
- Wear an elasticated support initially if you have one.
- Start moving the joint or muscle gently, trying to increase the movement daily.
- Start to contract the muscles.

Important

Severe bleeds into muscles, particularly those in the forearm and calf, can lead to a swelling in the muscle compartment which presses on the nerves and blood vessels. This can cause permanent damage.

If your child has numbness or pins and needles in the affected limb you **must** contact the Haemophilia Centre immediately.

Useful sources of information

[The Haemophilia Society - Access to Physiotherapy](#) | [The Haemophilia Society](#)

Contact us

You can contact physiotherapy by contacting the Haemophilia team on their direct number 020 8725 0763 or via the clinical specialist nurse on 07771594704/07393249628 and bleep 5003 who will then contact the physiotherapist during working hours.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available:

Monday, Tuesday and Thursday between 10am and 4pm

Friday between 10am and 2pm.

Please contact PALS in advance to check if there are any changes to opening times.

The Walk-in and Advisory telephone services are closed on Wednesdays.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS UK

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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