

Bleeding Disorders

A bleeding disorder is a health problem that makes it difficult for a person to stop bleeding. Usually, bleeding disorders are inherited, passed down from parent to child. But bleeding disorders can also be caused by other health problems or certain medicines. As many as one in 10 women with heavy menstrual periods may have a bleeding disorder. The most common type of bleeding disorder in women is von Willebrand disease (VWD). If left untreated, bleeding disorders raise your risk for anemia and dangerous bleeding after childbirth.

Q: Does heavy bleeding during my menstrual period mean that I have a bleeding disorder?

A: It might. But other causes of heavy periods include:

- **Certain health problems.** Heavy bleeding can be a sign of thyroid problems or uterine fibroids.
- Reproductive problems. In a normal menstrual cycle, your body discards your uterine lining with each period. If your hormones get out of balance or if you do not ovulate, the uterine lining can build up too much. This can cause heavy bleeding as the lining is discarded during the next menstrual period.
- **Certain medicines.** Some anti-inflammatory medicines and blood thinners can lead to heavy or long periods.

Q: What are symptoms of bleeding disorders?

A: Some common symptoms of bleeding disorders include:

- Large bruises from a minor bump or injury
- Nosebleeds that are difficult to stop or happen often

- Heavy menstrual bleeding (soaking through a pad or tampon every hour or two, bleeding for more than 7 days in a row, and having menstrual clots larger than a quarter)
- Heavy vaginal bleeding from other conditions, such as endometriosis
- Blood in stool or urine
- Bleeding too much or for a long time after an injury, surgery, or dental work
- Anemia, which causes you to become pale or feel tired or weak
- Bleeding into joints, muscles, and organs

Q: How do bleeding disorders affect pregnancy?

A: Women with bleeding disorders are at risk of complications during and after pregnancy:

- Iron-deficiency anemia
- Bleeding during pregnancy
- Dangerous bleeding after childbirth (called postpartum hemorrhage)

If you have a bleeding disorder (or think you have one) and are thinking of becoming pregnant, talk to your doctor first. You may also want to find a doctor who specializes in high-risk pregnancies. Because bleeding disorders run in families, your baby may also have a bleeding disorder.



Q: How are bleeding disorders treated?

A: There is no cure for bleeding disorders, but for many people medicine can help control the symptoms.

Common treatments for bleeding disorders include:

- Birth control. Hormonal birth control methods, such as the pill, patch, shot, vaginal ring, and hormonal intrauterine device (IUD), increase the amount of some clotting factors in your blood. They may also control heavy periods in women with some bleeding disorders.
- Iron supplements. If you are anemic and don't have enough iron in your blood, you may need iron supplements to bring your red blood cell levels back up to normal.
- Hormones. Your doctor may give you a hormone called desmopressin acetate (DDAVP) if you have certain bleeding disorders, such as von Willebrand's disease or hemophilia. DDAVP helps your body release stored clotting factors into

- your blood. DDAVP can prevent heavy periods and nosebleeds. It is also used before surgery or to stop bleeding when it happens. You can get DDAVP as nasal spray.
- Antifibrinolytics. This medicine stops blood clots from breaking down too quickly before healing happens. This can be a problem in some bleeding disorders. If you have a bleeding disorder, your doctor may give you antifibrinolytics before dental work, to stop nosebleeds, or to control heavy periods. You can take antifibrinolytics as a pill or liquid.
- Clotting factor concentrates. You may need this medicine if your blood does not have enough blood proteins or clotting factors. Adding these proteins to the blood prevents or controls bleeding. This type of treatment is used for surgery, serious injury, or when other treatments do not work. Clotting factor concentrates must be given through an intravenous (IV) tube.



For more information...

For more information on bleeding disorders, call the OWH Helpline at 800-994-9662 or contact the following organizations:

Centers for Disease Control and Prevention (CDC), HHS

800-232-4636 • www.cdc.gov/ncbddd/blooddisorders/index.html

National Heart, Lung, and Blood Institute (NHLBI), NIH, HHS

301-592-8573 • www.nhlbi.nih.gov

American Society of Hematology 202-776-0544 • www.hematology.org

Hemophilia Federation of America 800-230-9797 • www.hemophiliafed.org

National Hemophilia Foundation 800-424-2634 • www.hemophilia.org

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