

"SANTAL" A HEMOPHILIAC DATA BANK IN THE NETWORK CYCLADES - C. Bosser - J.P. Duport - D. Frommel - B. Noël - E. Saint Paul. Centre l'Espoir, Saint Alban Laysse, Savoie, FRANCE.

For the past two years a group of sixty hemophiliacs regularly treated by the same medical team has produced the data of "Santal". This data base is running in a real context on the network Cyclades (which is the precursary system of Transpac) and which enables clinicians and health economists of countries connected to the network to collaborate. The initial aim of this data base was to gain efficiency in the qualitative value and optimality of the therapeutics of hemophilia.

Santal seems to be an illustration on a large scale of a pool of knowledge and ability for the healing of chronic diseases requiring continuous or discontinuous treatments. By using informatics and some branches of mathematics in the medical field, this work has benefitted from R. Thom's theories in an interdisciplinary and qualitative approach to discontinuous phenomena.

EFFECTS OF SELF HYPNOSIS IN THE MANAGEMENT OF HEMOPHILIA IN CHILDREN. K.N. Olness and L.J. Singher. Children's Health Center, Minneapolis, Minnesota, U.S.A.

A group of families with hemophiliac children were given the opportunity to learn techniques of self hypnosis to alleviate anxiety, discomfort, pain, and, hopefully, to reduce their requirement for replacement therapy. These families have met on a monthly basis for twenty-four months. Initially, children and later their parents, were taught standard techniques for inducing self hypnosis. Children were specifically taught to control perceptions of pain and discomfort and were taught to give themselves suggestions to reduce bleeding. Parents were given suggestions for generalized relaxation.

Children, as young as three years, clearly demonstrated their ability to selectively turn off or reduce their perception of pain in designated extremities. Their unsolicited statements indicated increased comfort during procedures and their belief that they were able to reduce the number and/or duration of bleeding episodes.

We have concluded that this beneficial adjunct therapy in hemophilia is readily learned and followed through by hemophiliac children and their families.

EFFECTS OF PSYCHIATRIC INTERVENTION ON CONCENTRATE USAGE. L.L. Ackerman, M.E. Eyster, D. Charney and J. Haverstick. Penn State University College of Medicine, Hershey, Pennsylvania, U.S.A.

To investigate possible psychosocial causes for increased Factor VIII requirements, concentrate usage was assessed from records submitted monthly by a 16 year old boy with a Factor VIII level of < 1%. This patient was using almost 5 times more concentrate per year than our average home therapy patient.

Group, family and individual psychotherapy, as well as relaxation techniques were utilized with the psychiatrist unaware of the amount of concentrate used. Concentrate usage during the 15 month period immediately preceding therapy was 23,051 ± 3,441.44 Units/month for a total of 344,900 units. For the 15 month period following initiation of therapy, usage was 14,942 ± 3,204.81 units/month for a total of 221,595 units. This represented a 36% decrease in concentrate usage and a saving of approximately \$12,000 while the total cost of psychiatric therapy was \$1,115.

This case study illustrates that psychological factors may affect concentrate usage. The results also suggest that psychological dependencies and stress induced needs that develop in some patients on home therapy can be effectively treated by psychosocial intervention.