

Editorial

Editorial

Cristina Duboscq^{1,2} and Joan C. Reverter^{3,4*}

¹Grupo Cooperativo Latinoamericano de Hemostasia y Trombosis (CLAHT), Montevideo, Uruguay; ²Hospital Británico de Buenos Aires, Buenos Aires, Argentina; ³Sociedad Española de Trombosis y Hemostasia (SETH), Madrid, España; ⁴Hospital Clínic, Barcelona, España

In this third issue of the journal, we continue our editorial commitment to offer rigorous, updated, and clinically relevant content in the field of haemostasis and thrombosis. The constant evolution of the discipline, with continuous therapeutic and technological innovation, leads us to the need for spaces for scientific reflection that allow us to share experiences, contrast results, and foster evidence-based healthcare improvement. This scientific reflection must be, due to the progressive complexity of the field, multidisciplinary and as broad as possible. Progress in haemostasis and thrombosis cannot be imagined without this transversality. In this regard, we want to highlight the publication in this issue of the first part of a multidisciplinary consensus document on viscoelastic tests, which, with their option of use as a point-of-care coagulation tool, have become an enormously useful instrument in the management of patients with acute bleeding. This consensus has been drafted with the participation of experts from three societies involved in the use and development of viscoelastic test applications: the Spanish Society of Anaesthesiology, Resuscitation and Pain Therapy (SEDAR), the Spanish Society of Laboratory Medicine (Semedlab), and the Spanish Society of Thrombosis and Haemostasis (SETH). The first part of the consensus, which is published in this issue, addresses the review of the technical foundations of available devices for viscoelastic tests, the clinical scenarios where their application is best established, analytical quality protocols, health care implementation models,

and the financial impact of their use in relation to the saving of blood products and shorter lengths of stay. The vision of these experts from the areas of anaesthesiology, haematology, and laboratory allows us to know first-hand the latest in this type of analyser.

Continuing in the field of the haemostasis laboratory, this issue presents a multicentre study conducted in 3 laboratories in the city of Buenos Aires (Argentina), which analyses the interference of lupus anticoagulant in the analytical measurement of the activity of factors VIII, IX, and XI. To resolve this interference, some methods have been proposed that unfortunately cannot be performed in most laboratories, and their use is limited to a few specialised centres. The work proposes the use of an activated partial thromboplastin time reagent that uses a silica-based activator, with a high concentration of phospholipids, which allows, in the presence of lupus anticoagulant, to obtain more reliable values of the factors than coagulative and chromogenic methods. The results show that the proposed method can avoid false diagnoses of factor deficiency, improving diagnostic precision in patients with acquired or autoimmune coagulopathies.

In the field of bleeding disorders, several contributions focused on congenital bleeding coagulopathies are presented. First, it is worth highlighting a very interesting review on the current treatment of Von Willebrand disease, focused on the value of performing prophylaxis with blood products. After analysing the available evidence, the authors conclude that prophylaxis in patients with a past medical history of severe and frequent

*Correspondence:

Joan C. Reverter
E-mail: reverter@clinic.cat

Date of reception: 01-07-2025

Date of acceptance: 10-07-2025

DOI: 10.24875/RHT.M25000048

Available online: 18-09-2025

Hemost Trombos (Eng). 2025;2(2):41-42

www.revistahemostasiaytrombosis.com

bleeding is superior to on-demand treatment, and that it should be applied regardless of the type of Von Willebrand disease, age, and sex.

Additionally, this issue includes 2 case reports, both focused on the treatment of haemophilia A with emicizumab. The first is a detailed clinical case of a young patient with severe haemophilia A without inhibitors, in whom the progressive decrease in the efficacy of extended half-life factor VIII led to a change of drug to achieve adequate disease control. Case report #2 refers

to 2 paediatric patients with haemophilia A on emicizumab who developed anti-drug antibodies, analysing the analytical evolution, the impact on plasma concentrations of emicizumab, and the measures adopted to maintain prophylaxis.

Overall, this issue of *Hemostasia y Trombosis – Revista Iberoamericana de Trombosis y Hemostasia* offers a diverse and updated overview of some important challenges and advances in the practice of clinical and laboratory haemostasis.