



What it covers



A lack of understanding of the difference between normal and abnormal bleeding symptoms.

specialized lab testing.

A lack of/limited availability and expertise for



Health care professionals who provide screening for patients to accurately diagnose VWD.

 Individuals who may be experiencing abnormal bleeding who should be evaluated for VWD

Symptoms can disproportionately affect women, who may experience menstrual and postpartum hemorrhage.



• Call to improve education around the value and use of bleeding assessment tools (BATs).

BATs are recommended as an initial screening tool for patients with a low probability of VWD (e.g., those seen in the primary care setting).

BATs are NOT recommended as a screening tool to decide whether to order specific blood testing for patients with intermediate/high probability of VWD (e.g., those referred to a hematologist or those with an affected first-degree relative).

- New recommendations suggest broadening the classification of VWD to be more inclusive of individuals who experience VWD-like bleeding but whose von Willebrand factor (VWF) levels used to confirm diagnosis of type 1 VWD do not meet the previously proposed diagnostic threshold of 30% or less.
- Suggestion to change the approach for a type 1 VWD patient with normalized VWF levels over time, specifically to reconsider diagnosis as opposed to removing diagnosis.
- Recommendations to use targeted genetic testing to diagnose type 2B VWD.

Total number of panel recommendations: 11