WINTER 2014

Rocky Mountain Hemophilia

& Bleeding Disorders Association

RMHBDA is a 501(c)(3)nonprofit organization founded in 2000 and is a chartered chapter of the National Hemophilia Foundation.

Our mission is to improve the quality of care and life for persons with inherited bleeding disorders, including hemophilia and von Willebrand Disease through education, peer support, resources, and referral.

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Rocky Mountain Hemophilia & Bleeding Disorders Association

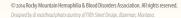
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www.rmhbda.org

Brad Benne, Executive Director brad@rmhbda.org



www.facebook.com/rmhbda



11th Annual Education Weekend

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February 27 – March 1, 2015

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Hilton Garden Inn, 2023 Commerce Way, Bozeman, MT

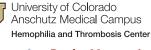
Hosted by Rocky Mountain Hemophilia & Bleeding Disorders Association & the University of Colorado Hemophilia & Thrombosis Center

It's time for the 11th **G** Annual Education Weekend for people affected by bleeding

disorders in Montana

and Wyoming! You and

your family are invited





ROCKY M

for a weekend of informative sessions, youth programming for all ages, and an opportunity to connect with others dealing with similar challenges. This education weekend and annual meeting of RMHBDA is designed to bring you education, up-to-date information about life with a bleeding disorder, and connect you with other families in our



With gratitude and appreciation, Brad Benne, Executive Director

two-state area. Check-in for the event will be Friday, February 27 from 4 to 6 pm, followed by a chapter welcome and Pizza Party and program at Old Chicago.

▶ Continued on page 2

Inhibitor Camp Experience

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This fall, my family was introduced to Victory Junction when we attended a family camp for kids with bleeding disorder inhibitors. When we applied for camp in late summer, I looked forward to watching the kids have the time of their life. What we got out of camp was SO much more.

A few words that come to mind when I think of the Inhibitor Camp experience are "rewarding," "amazing," and "empowering". Sure, it was super fun and awesome



RMHBDA Newsletter

to see such a unique and spectacular camp, but the interactions between the other families and the camp counselors (the counselors assigned to our family were the absolute BEST in the world — we were with them for every activity and meal and I can't speak highly enough of both of them) and seeing the kids support and learn from each other, all while they had a blast together was truly life-changing.

My son, Campbell, made his new best friend Charlie (they call each other "blood brothers") and made me prouder than ever when he inspired his new friend to infuse himself for the first time — before this year's camp, his friend wasn't even OK with the needle touching his skin, as he was used to getting factor through a port his whole life. Charlie's dad had

Continued on page 2

It's not too Late to Make a Donation to RMHBDA

Hello Friends,

It's hard to believe 2015 is upon us! We will be celebrating RMHBDA's 15th Anniversary this year. As I reflect on the six years our family has been involved, I feel deeply grateful for our extraordinary community and our enthusiasm and commitment to caring for our loved ones who are dealing with bleeding disorders in Montana and Wyoming.

We raised over \$55,000 and rallied over two hundred walkers for our 3rd Annual Walk for Bleeding Disorders in Billings. The walk also helped our chapter spread awareness about bleeding disorders in our communities. Hopefully, as the walk grows, we will continue to spread awareness and education to every corner of Montana and Wyoming.

As we look at 2015 with motivation and hope, we are excited about the possibilities to spread awareness and care to those affected by bleeding disorders in our communities. We plan on stay vigilant in ensuring access to healthcare and our chapter is here to empower you to make informed decisions about managing your bleeding disorder. We

will continue to provide compelling educational programs and services that help you connect with other families and support networks. Please feel free to share with me what we can improve. This is your chapter! I hope 2015 finds you and your loved ones happy, healthy, and active with RMHBDA. Your generosity and support of our work is greatly appreciated and we thank you for caring!



THE ROCKY MOUNTAIN

From page 1: Education Weekend

On Saturday morning, we will cover topics like healthcare reform, state advocacy efforts, Von Willebrand's disease, infusion education, children's programming, and men and women's programming.

For our youth, we will have a variety of programming available. Please pack your life-jackets for pool time in the afternoon.

Don't miss your chapter's annual meeting on Saturday for all members; important decisions will be made at this meeting and your input is needed! Lodging and meals will be provided to attending members, so don't hesitate to send your registration off today! Don't miss this opportunity with your Chapter, Industries, HTC Staff, Accredited Speakers, and your family. It will be a special and rewarding weekend for all.

Need assistance to attend Education Weekend?

RMHBDA will provide Patient Assistance applications in all registration packets, please save all gas, food, and travel expense receipts!

If you have any questions, please contact Brad Benne, Executive Director, at 406-586-4050.

RMHBDA Education Weekend Schedule (tentative) February 27 – March 1 2015

Friday, February 27

4:00 - 6:00 pm	Registration & exhibits
6:00 – 6:15 pm	Welcome
6:15 – 7:30 pm	Dinner and Program, sponsored by CSL Behring

Saturday, February 28

7:00 - 8:00 am	Breakfast
8:00-10:30 am	Sessions
10:30 – 12:00 pm	Exhibits/Break
12:00 - 1:00 pm	Lunch
1:00 – 3:00 pm	Annual Meeting/BOD Development
3:00 - 7:00 pm	Bowling/Free Time
6:00 pm	Dinner & Program, sponsored by Baxter Healthcare

Sunday, March 1

7:00 – 8:00 am	Breakfast (on your own)
10:30 am	Check out/Good Byes

Safe Travels! Thank you for coming!

From page 1: Inhibitor Camp Experience

said early on that their goal for camp this year was to get him to at least consider trying it — and I made it our mission to help them. I told Campbell the situation and that Charlie really needed some encouragement. Cam was willing and definitely able to help, so he gave a demonstration at the camp's self-infusion class. The nurses were so impressed with his presentation, it benefitted several other campers, and I am positive that Cam made all the difference in his friend's willingness to try. My daughter, Dylan, also encouraged our friend to watch Cam closely, by accompanying him up front and standing by his side — Charlie's granddad said to me later that it made a huge difference too. When Cam and I later saw his friend, walking on air with pride after successfully self-infusing and ecstatically sharing the news — well, that had quite an impact on all of us.

Cam really changed their lives and felt so proud of himself and empowered because of it. The huge amount of gratitude from Charlie's dad and grandfather made it even more rewarding — MY life was changed for the better by helping them.

We did so many fun things at camp over the course of the weekend — including a Halloween costume party, bowling, fishing, boating, horseback riding and stables, movie theater, crafts, stage night, real beauty parlor, amazing candy store, and the entire camp has a NASCAR theme with racing simulators and cars — with super cool cabins . . . and a "dance party" at every meal!

A truly amazing experience that our family will never forget.





BAYER HEALTHCARE AND THE HEMOPHILIA COMMUNITY

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For information on Bayer's Educational Patient and Community Resources, contact your Hematology Account Executive by calling **1-888-79-BAYER**.



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Mile High Colorado Camp Patient Assistance Programs **SAVE THE DATE!** July 12-17, 2015. Camp forms will be available in mid-March of 2015! Stay Tuned! The National Hemophilia Foundation Leadership Pre-Camp Retreat July 10-12, 2015 has organized a compendium of current When and Where? The Hemophilia and Thrombosis Center (HTC) is proud to once again sponsor the summer camp program at resources for patient assistance programs. Rocky Mountain Village from July 12 through 17, 2015. They are endeavoring to keep this updated regularly. We are making this available on our Who Should Attend? Children with hemophilia or other bleeding disorders website on the Services/Resources, Financial Siblings of the above groups Assistance page as the first item under Mile High Colorado Camp is for ages 7–18; we accept children age 6 on a case-by-case basis. Programming Healthcare Financial Resources. The direct link is determined by age. Check back with us soon to learn about the different programs we offer at camp! to the Adobe Acrobat file is: Why Attend Camp? The purpose of camp is to learn about bleeding disorders, develop skills and have fun! Campers will www.rmhbda.org/html/documents/forms/ have the opportunity to meet new friends and participate in a variety of traditional camp activities. As NHF PAP 2014.09.15.pdf always, we have included educational components with the goal of encouraging self-confidence and independence. Many campers have learned to perform self-infusion, experienced teamwork, and discovered new skills during the week of camp. Staff at the HTC and Rocky Mountain Village want this to be a wonderful experience that creates a wealth of fond memories for your camper. What does it cost? Each family is required to pay a non-refundable \$75 deposit. The remainder of the camp cost, approximately \$1000 per camper, is underwritten by other sources. Scholarship forms are available and are granted on an individual basis. If you have questions or need additional information, please call Brad Benne at 406.586.4050. Help send a child to camp! This summer make a dream come true. Your contribution will send a youth to Hemophilia summer camp at Mile High Camp in Colorado. Your support makes a lasting difference in the lives of children with a

bleeding disorder.

We Love Donations!

RMHBDA is a 501 (c)(3) nonprofit organization which means that contributions are tax deductible; check with your tax professional to determine how this specifically affects you. **Now three ways to donate!** We appreciate your consideration.

Rocky Mountain Hemophilia

& Bleeding Disorders Association

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WINTER 2014



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Getting in the Game 2014

Hi my name is John Benne, and this year I went to Arizona to play golf for our chapter. My Dad, Brad Benne got to share this really amazing opportunity with me. There is so much worth sharing about our great trip, but the one thing I want to share is that all the kids that participated had a bleeding disorder. On our trip, there was a lot of talk about how important sports are for health and fitness, and how to treat yourself if you are hurt or wounded.

Perry Parker was the professional golfer who guided us through golf instruction, and he really helped me get ready for the tournament the next day. On the Saturday of our trip, we had our tournament. I was very lucky on the tournament, because I got a really nice caddy who is a professional caddy on the Senior Tour!

I think he definitely helped me with technique and patience. I went along with two other kids on the golf course, and we each did very well! I shot a 56 on nine holes, I should have shot 54 but I hit one in the water and I missed a putt for par.

I want to thank our chapter and CSL Behring for sending me and my Dad to Arizona. This was a very special trip, and it helps me realize that no matter if I have a bleeding disorder, I can play and do anything I want.





Industry News

Pfizer

The U.S. Food and Drug Administration (FDA) has **updated the product label information for XYNTHA**, Antihemophilic Factor (Recombinant), to include new and additional data in previously treated pediatric patients with hemophilia A.

Adding to the growing body of evidence supporting the efficacy and safety profile of XYNTHA in a variety of patient ages (less than 65), the data show that a majority of bleeding episodes in children treated with XYNTHA are resolved with one or two infusions. The data are from several studies, including:

The completed open label study of XYNTHA, in which 17 patients less than 16 years of age with severe or moderately severe hemophilia A (FVIII:C<=2%), who were previously treated with at least 150 exposure days (EDs) to FVIII products, received at least one dose of XYNTHA (median dose per infusion was 47 IU/kg and median exposure days per subject was 6 days). Of the 17 patients, 10 patients had a total of 66 bleeding episodes that were treated with on-demand infusions of XYNTHA. The majority of the bleeding episodes (95.5 percent) resolved with 1 or 2 infusions and 57.6 percent were rated excellent or good in their response to initial treatment.

Based on these data, XYNTHA is indicated in adults and children with hemophilia A for control and prevention of bleeding episodes and for perioperative prophylaxis.

Baxter

DEERFIELD, III.--(BUSINESS WIRE)--Baxter International Inc. (NYSE:BAX) today announced that the **United States Food and Drug Administration (FDA) has approved RIXUBIS** [Coagulation Factor IX (Recombinant)] for routine prophylactic treatment, control and prevention of bleeding episodes, and perioperative management in children with hemophilia B. RIXUBIS was the first recombinant factor IX (rFIX) approved for routine prophylaxis and control of bleeding episodes in the U.S. for adults living with this chronic condition.

The approval is based on the results of a clinical trial investigating the efficacy and safety of RIXUBIS among 23 previously-treated male patients less than 12 years of age with severe or moderately severe hemophilia B. The patients were treated with a twice-weekly RIXUBIS prophylaxis regimen (mean dose 56 IU/kg) for a mean treatment duration of six months and a mean of 54 exposure days (EDs). The median annualized bleeding rate (ABR) was 2.0 (o.o for spontaneous bleeds and joint bleeds). Nine patients in the study (39.1%) experienced no bleeds and 23 bleeding episodes (88.5%) were treated with 1-2 infusions. There were no reports of inhibitor development, no severe allergic reactions, and no thrombotic or treatment-related adverse events among the study participants. Common adverse reactions observed in >1% of subjects in clinical studies were dysgeusia, pain in extremity, and positive test for furin antibody. These data were presented during the 55th Annual Meeting of the American Society of Hematology (ASH) in New Orleans, LA.

Biogen Idec

1000 My Life Our Future Participants

FDA approves first combination pill to treat hepatitis C

FDA — October 10, 2014 — The U.S. Food and Drug Administration today approved Harvoni (ledipasvir and sofosbuvir) to treat chronic hepatitis C virus (HCV) genotype 1 infection.

Harvoni is the first combination pill approved to treat chronic HCV genotype 1 infection. It is also the first approved regimen that does not require administration with interferon or ribavirin, two FDA-approved drugs also used to treat HCV infection.

Both drugs in Harvoni interfere with the enzymes needed by HCV to multiply. Sofosbuvir is a previously approved HCV drug marketed under the brand name Sovaldi. Harvoni also contains a new drug called ledipasvir.

"With the development and approval of new treatments for hepatitis C virus, we are changing the treatment paradigm for Americans living with the disease," said Edward Cox, M.D., M.P.H., director of the Office of Antimicrobial Products in the FDA's Center for Drug Evaluation and Research. "Until last year, the only available treatments for hepatitis C virus required administration with interferon and ribavirin. Now, patients and health care professionals have multiple treatment options, including a combination pill to help simplify treatment regimens."

For more information visit www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm418365.htm?source=govdelivery&utm_medium=email&utm_source=govdelivery



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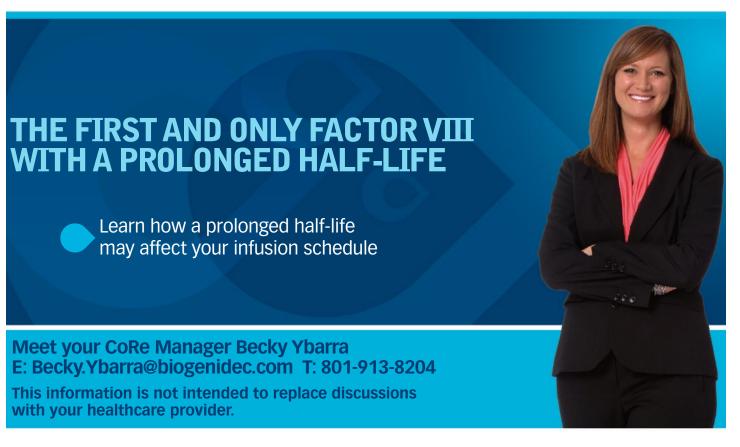
Personalized support

Baxter recognizes the importance of helping you meet the challenges that life presents. Visit us at www.nava.baxter.com for a variety of resources, assistance, and individual support for living with hemophilia.

Baxter and We've got you covered are trademarks of Baxter International Inc. September 2014 USBS/MG155/14-0044







Indications

ELOCTATE [Antihemophilic Factor (Recombinant), Fc Fusion Protein] is a recombinant DNA derived, antihemophilic factor indicated in adults and children with Hemophilia A (congenital Factor VIII deficiency) for: control and prevention of bleeding episodes, perioperative management (surgical prophylaxis), and routine prophylaxis to prevent or reduce the frequency of bleeding episodes. ELOCTATE is not indicated for the treatment of von Willebrand disease.

Important Safety Information

Do not use ELOCTATE if you have had an allergic reaction to it in the past.

Tell your healthcare provider if you have or have had any medical problems, take any medicines, including prescription and non-prescription medicines, supplements, or herbal medicines, have any allergies, are breastfeeding, are pregnant or planning to become pregnant, or have been told you have inhibitors (antibodies) to Factor VIII.

Allergic reactions may occur with ELOCTATE. Call your healthcare provider or get emergency treatment right away if you have any of the following symptoms: difficulty breathing, chest tightness, swelling of the face, rash, or hives.

Your body can also make antibodies called, "inhibitors," against ELOCTATE, which may stop ELOCTATE from working properly.

Common side effects of ELOCTATE are joint pain and general discomfort. These are not all the possible side effects of ELOCTATE. Talk to your healthcare provider right away about any side effect that bothers you or that does not go away, and if bleeding is not controlled after using ELOCTATE.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see Brief Summary of full Prescribing Information on the next page.

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FDA-Approved Patient Labeling

Patient Information

ELOCTATE™ /el' ok' tate/

[Antihemophilic Factor (Recombinant), Fc Fusion Protein]

Please read this Patient Information carefully before using ELOCTATE and each time you get a refill, as there may be new information. This Patient Information does not take the place of talking with your healthcare provider about your medical condition or your treatment.

What is ELOCTATE?

ELOCTATE is an injectable medicine that is used to help control and prevent bleeding in people with Hemophilia A (congenital Factor VIII deficiency).

Your healthcare provider may give you ELOCTATE when you have surgery.

Who should not use ELOCTATE?

You should not use ELOCTATE if you had an allergic reaction to it in the past.

What should I tell my healthcare provider before using ELOCTATE? Talk to your healthcare provider about:

- Any medical problems that you have or had.
- All prescription and non-prescription medicines that you take, including over-the-counter medicines, supplements or herbal medicines.
- Pregnancy or if you are planning to become pregnant. It is not known if ELOCTATE may harm your unborn baby.
- Breastfeeding. It is not known if ELOCTATE passes into the milk and if it can harm your baby.

How should I use ELOCTATE?

You get ELOCTATE as an infusion into your vein. Your healthcare provider will instruct you on how to do infusions on your own, and may watch you give yourself the first dose of ELOCTATE.

Contact your healthcare provider right away if bleeding is not controlled after using ELOCTATE.

What are the possible side effects of ELOCTATE?

Common side effects of ELOCTATE are joint pain and general discomfort.

Allergic reactions may occur. Call your healthcare provider or emergency department right away if you have any of the following symptoms: difficulty breathing, chest tightness, swelling of the face, rash or hives.

Your body can also make antibodies called, "inhibitors," against ELOCTATE, which may stop ELOCTATE from working properly. Your healthcare provider may give you blood tests to check for inhibitors.

How should I store ELOCTATE?

- Keep ELOCTATE in its original package.
- Protect it from light.
- Do not freeze.
- Store refrigerated (2°C to 8°C or 36°F to 46°F) or at room temperature [not to exceed 30°C (86°F)], for up to six months.
- When storing at room temperature:
 - Note on the carton the date on which the product is removed from refrigeration.
 - $\circ\,$ Use the product before the end of this 6 month period or discard it.
 - Do not return the product to the refrigerator.

Do not use ELOCTATE after the expiration date printed on the vial or, if you removed it from the refrigerator, after the date that was noted on the carton, whichever is earlier.

After reconstitution (mixing with the diluent):

- Do not use ELOCTATE if the reconstituted solution is not clear to slightly opalescent and colorless.
- Use reconstituted product as soon as possible
- You may store reconstituted solution at room temperature, not to exceed 30°C (86°F), for up to three hours. Protect the reconstituted product from direct sunlight. Discard any product not used within three hours.

What else should I know about ELOCTATE?

Medicines are sometimes prescribed for purposes other than those listed here. Do not use ELOCTATE for a condition for which it was not prescribed. Do not share ELOCTATE with other people, even if they have the same symptoms that you have.

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44279-01

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Issued June 2014

Help for Those with Hemophilia

by Jamie Besel. photos by Jana Graham Photography.

Bumps, bruises and scrapes are a part of every active child's life. For most kids, a tumble off a scooter or a skinned knee during a baseball game means a temporary bruise or healing scab. However, for kids with hemophilia, such normal injuries of childhood are cause for extra concern.

What Is Hemophilia?

Hemophilia is a bleeding disorder that impairs the body's ability to control blood clotting, meaning a person with the disorder bleeds longer than someone without hemophilia, explains Dr. Carrie Neuhardt, a Pediatric Hematologist and Oncologist with the St. Vincent Physician Network Children's Cancer & Blood Disorder Clinic. Our bodies have 12 clotting factors that work together



to help form a clot and stop bleeding when an injury occurs. Having too little of one of these factors (known as factor VIII or factor IX deficiency) is what causes hemophilia.

"The disorder is classified as mild, moderate or severe based on the amount of clotting factor in the person's blood," Dr. Neuhardt

specifies. The signs and symptoms of hemophilia vary, depending on the level of severity and location of a bleed. "A common type of bleeding in hemophilia involves the joints and muscles," says Dr. Neuhardt. "This leads to pain and swelling of the affected area. Recurrent bleeds can lead to long term joint complications, arthritis, and an impaired quality of life."

It is a hereditary genetic disorder, meaning it is the result of a change in genes that was either passed from parent to child or occurred during development in the womb as a result of a new or spontaneous gene mutation. "In most case, hemophilia is a sex-linked disorder, which means it comes from the mother's X-chromosome," explains Dr. Neuhardt. Because of this, hemophilia is more likely to occur in males than females; about 1 in every 5,000-10,000 male births has hemophilia with varying severities.

When Hemophilia Hits Home

Born with factory VIII deficiency, or classic hemophilia, Ty Graham is all too familiar with the added risks associated with all the activities an energetic 1st grader enjoys. As a result of injuries sustained typical for an active young boy, including a bike crash or two, 7 year old Ty has endured the uncomfortable, often painful, side effects commonly associated with the disorder. A tumble can translate to several days of rest, symptom management and elevation of the affected limb.

Ty's parents, Chris and Jana Graham remember the initial shock upon learning about the severity of their son's hemophilia diagnosis. "As parents new to hemophilia, we weren't sure what it would mean, we weren't well versed in what to do and how to treat it," shares Chris. "As Ty started getting older and more mobile, he started to get more bleeds. That's when we realized this was going to affect our lives so we needed to look into options."

Up until a year ago Ty's bleeding episodes, which at times occurred monthly, were treated following the injury, known as on demand treatment. Following a bike crash during a family camp, a hematologist from Denver spoke with the Graham's about the option of prophylactic treatment. "Ty spoke for himself that he wanted prophylactic," says Chris. This means that Ty receives an intravenous infusion of an exogenous factor, three times a week in order to reduce the chance of bleeds. "When Ty is treated in the morning, it means he can basically act as a normal kid without the worry of getting a bad bleed," says mom, Jana.

Treatment Options

As of now, there is no cure for hemophilia. New treatment options continue to emerge allowing for the successful management of the disorder with clotting factor replacement therapy-intravenous infusions of the deficient clotting factor into the patient's bloodstream, such as in Ty's case. Treatment is only available as an infusion, administered either at a clinic such as the Children's Cancer & Blood Disorder Clinic at St. Vincent Healthcare or at home after special training is received.

Chris and Jana feel fortunate to have access to specialized care right here in Billings. "Dr. Neuhardt is very knowledgeable and extremely accessible," Chris says. "She has been huge

with helping us with Ty's treatment." Before Dr. Neuhardt joined St. Vincent Physician Network two years ago, the closest hemophilia treatment center was Denver. As Dave Irion, St. Vincent Healthcare Foundation says, "Dr. Carrie Neuhardt's Cancer and Blood Disorders program is a unique mission in our region thanks to the collaboration of St. Vincent Healthcare and many generous donors. We all believe that even in rural America you should have the ability to access state of the art medical care for children."

Helping Hands

Those affected by hemophilia or other bleeding disorders and their families can feel scared, isolated, and unsure of where to go for help, especially those living in rural settings such as Montana and Wyoming. The Rocky Mountain Hemophilia & Bleeding Disorders Association

was founded in May 2000 to provide knowledgeable and caring support, education and to serve as a resource for patients and their families in Montana and Wyoming. Chris Graham, RMHBDA president says, "We are here to help families become acclimated to the disorder through education, to connect them



with the appropriate resources." Since the cost of treating hemophilia are high, RMHBDA helps to raise money and aid for those who feel the financial burden, including assisting with travel costs and medication coverage.

Sponsored in part by St. Vincent Healthcare, the 3rd annual Hemophilia Walk [was on] Saturday, September 6th at Zoo Montana. Money raised will help fund critical research to find better treatments and cures for bleeding disorders and help prevent complications through education and advocacy. Plan to join, as every step counts. sfm

RMHBDA 2015 Calendar

The following are the tentative 2015 RMHBDA events and programs.

January 2015

- Men's Retreat: January 9-11, West Yellowstone, MT
- NACCHO Camp Conference: January 22-25
- NHF National Walk Training: January 25-27

February 2015

NHF Washington DC Days: February 25-27

RMHBDA Education Weekend & Annual Meeting: February 27 – March 1, Bozeman, MT

March 2015

Hemophilia Awareness Month!HFA Annual Symposium: March 27-29

April 2015

World Hemophilia Day: April 17

May 2015

- Biogen Idec Education Series/Walk Kickoff: TBD
- Pfizer Education Series/Walk Kickoff: TBD

June 2015

RMHBDA Family Camp (Fairmont Hot Springs): June 19-21

July 2015

Mile High Summer Camp Leadership Pre-camp Retreat: July 10-12
Mile High Summer Camp (Rocky Mountain Village, Empire CO): July 12-17

August 2015

Baxter Facts First/Walk Call to Action Event: TBD

NHF Annual Meeting: August 13 - 16

September 2015

RMHBDA Walk for Hemophilia: Sept 12 (Billings)

October 2015

CSL Behring "Getting In the Game": TBD

November 2015

Women's Retreat: November 6-8, Chico Hot Springs

Rocky Mountain Hemophilia



WINTER 2014

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As the industry leader in coagulation therapies, CSL Behring offers the most extensive portfolio of coagulation products for patients with factor deficiencies, including FI, FVIII, FIX, FXIII, and von Willebrand factor. And we continue to broaden our efforts with a number of recombinant factor therapies in development, including rFVIII, rFVIIa, rFIX, and rVWF.

For more information about our factor products for hemophilia, von Willebrand disease, and other rare bleeding disorders, or to learn about our innovative patient programs, please visit www.cslbehring.com or call consumer affairs at 1-888-508-6978.

