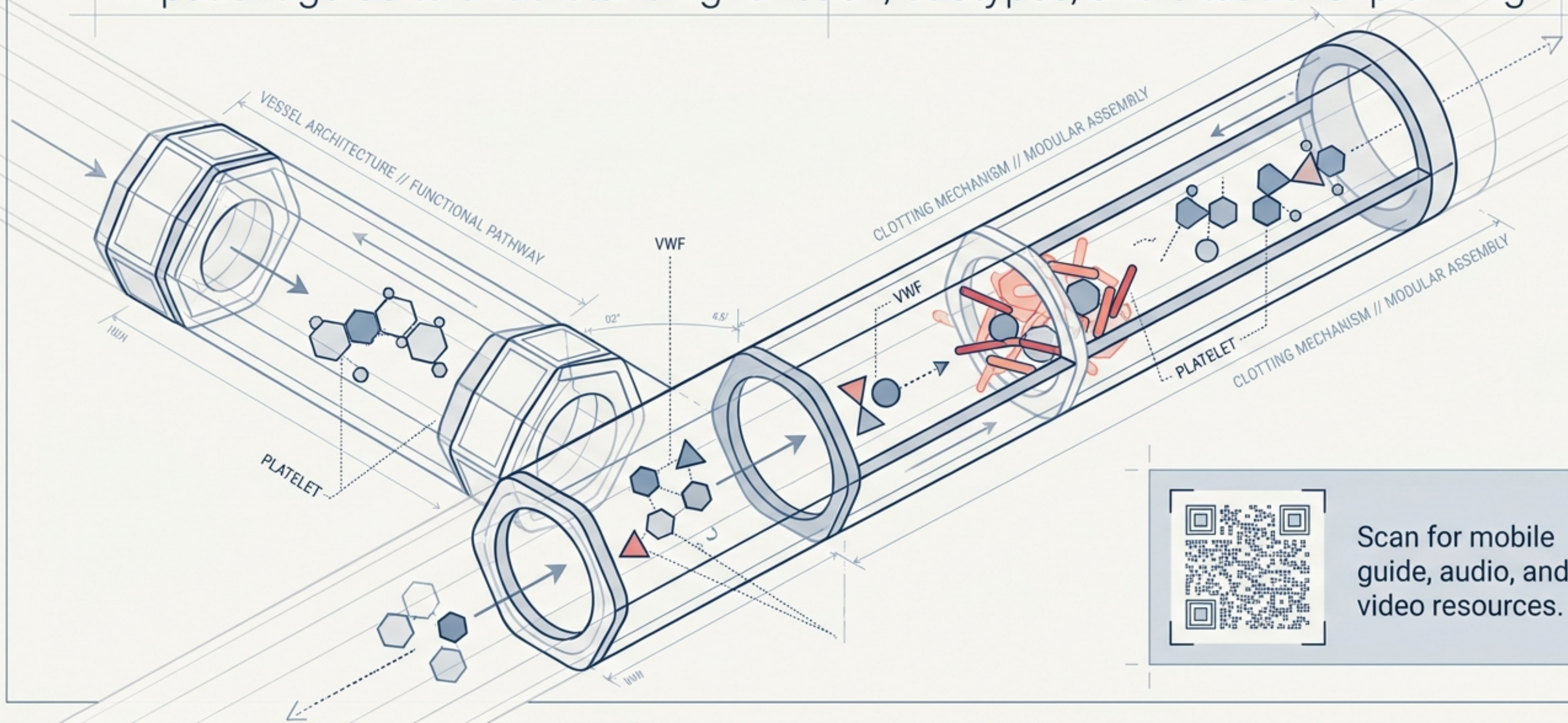


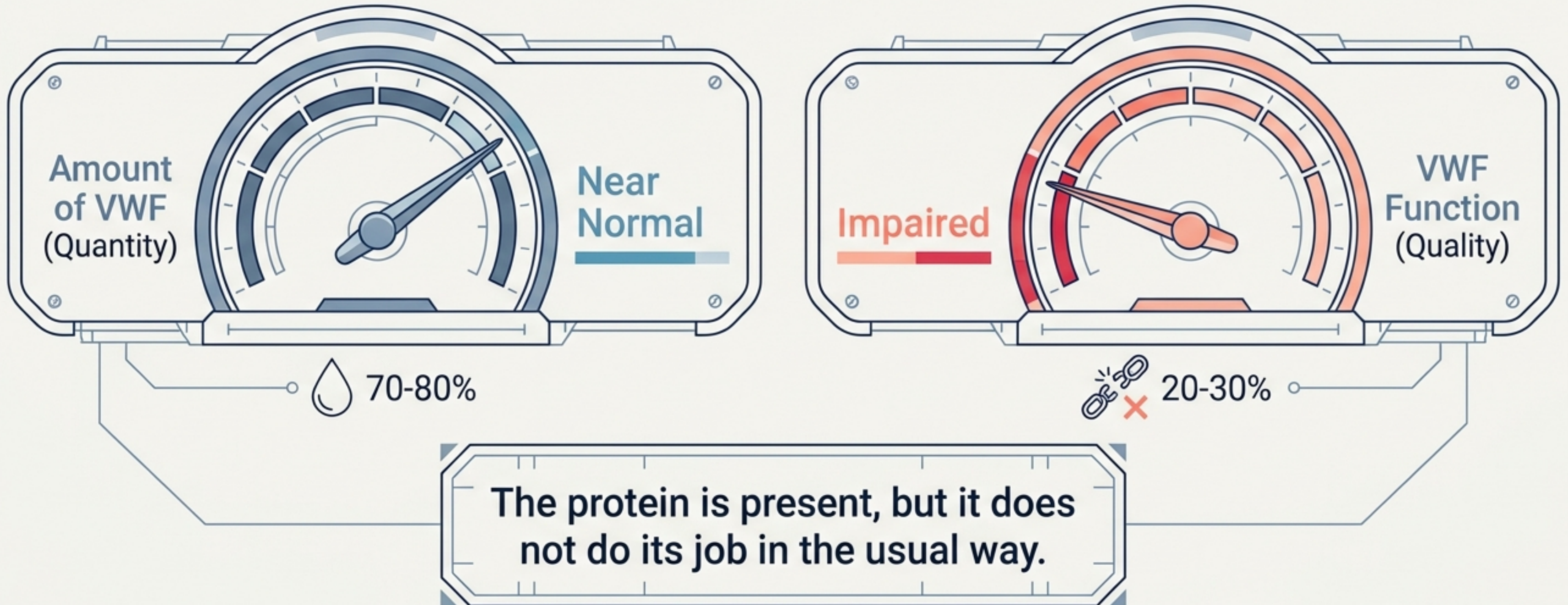
Navigating Type 2 Von Willebrand Disease

A patient guide to understanding function, subtypes, and situational planning.

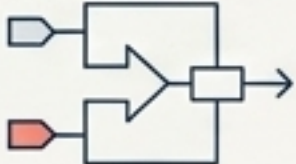


The core paradox of Type 2 VWD

Type 2 can feel confusing. You may be told your von Willebrand factor (VWF) level is not very low, yet you still experience bleeding symptoms. Type 2 is a problem of function, not simply a low number.



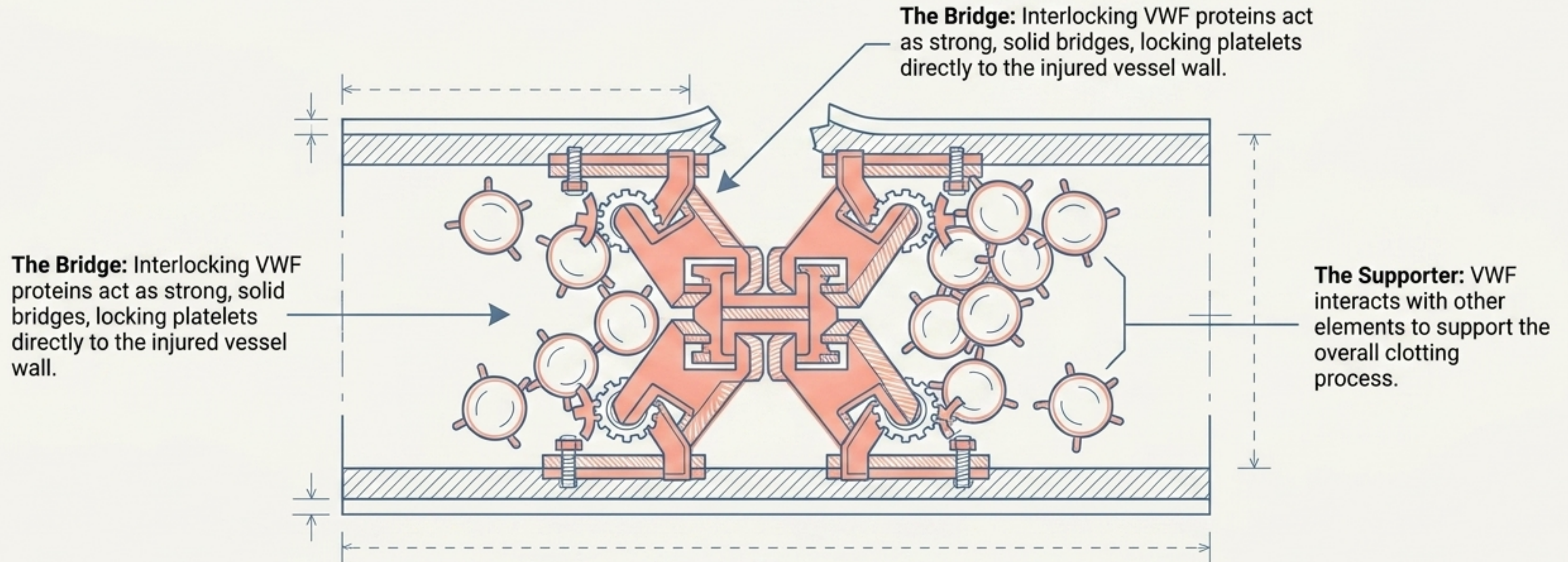
How Type 2 differs from Type 1

	Type 1 VWD	Type 2 VWD
The Core Issue	Missing pieces 	Broken pieces 
VWF Level (Quantity)	Usually less than normal 	Often near normal 
VWF Function	Reduced overall 	Impaired or defective 

In Type 2, the amount is often near normal, but the von Willebrand factor does not function normally. This is why standard testing can be deceptive.

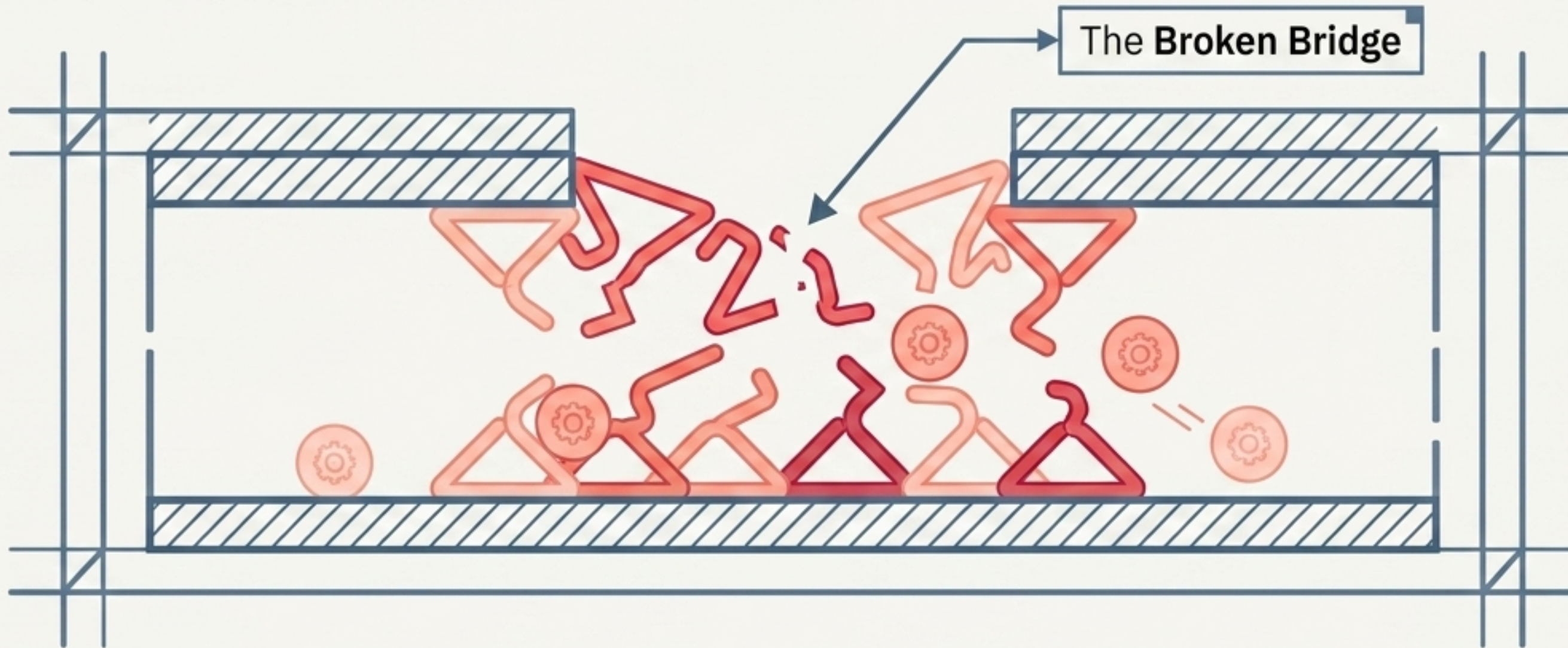
The normal role of Von Willebrand factor

To understand the problem, we must look at the blueprint of normal blood clotting. VWF has two primary jobs when a blood vessel is injured.



The structural flaw in Type 2 VWD

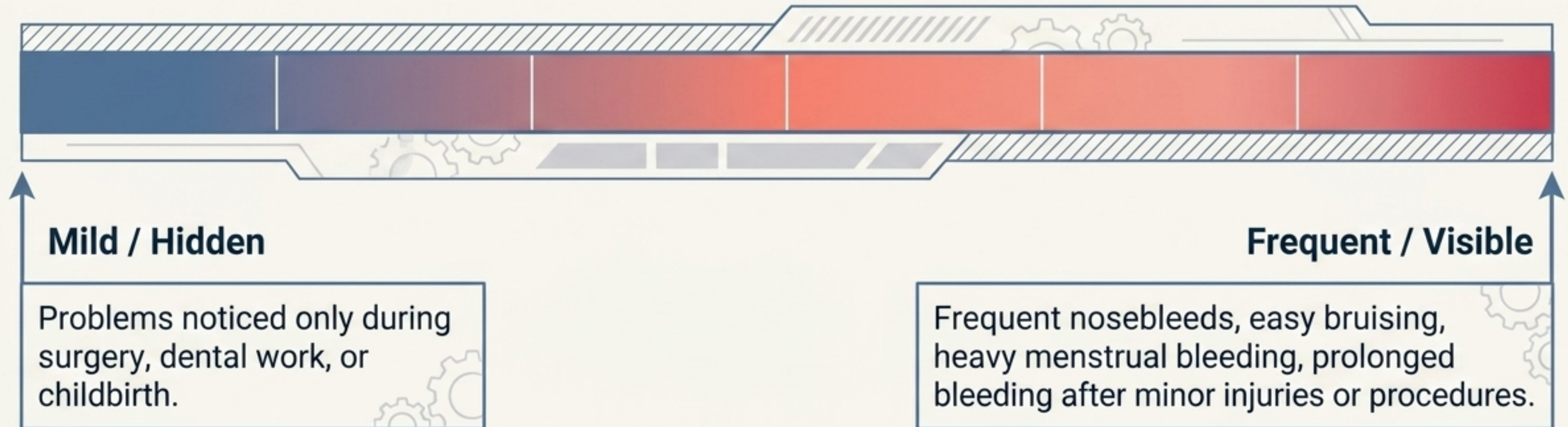
Type 2 is **inherited**—a family gene change affects the **structure** or **behavior** of the VWF protein.



The issue is how the protein interacts with platelets and blood vessels, rather than **how much of it is present**.

Identifying the symptoms

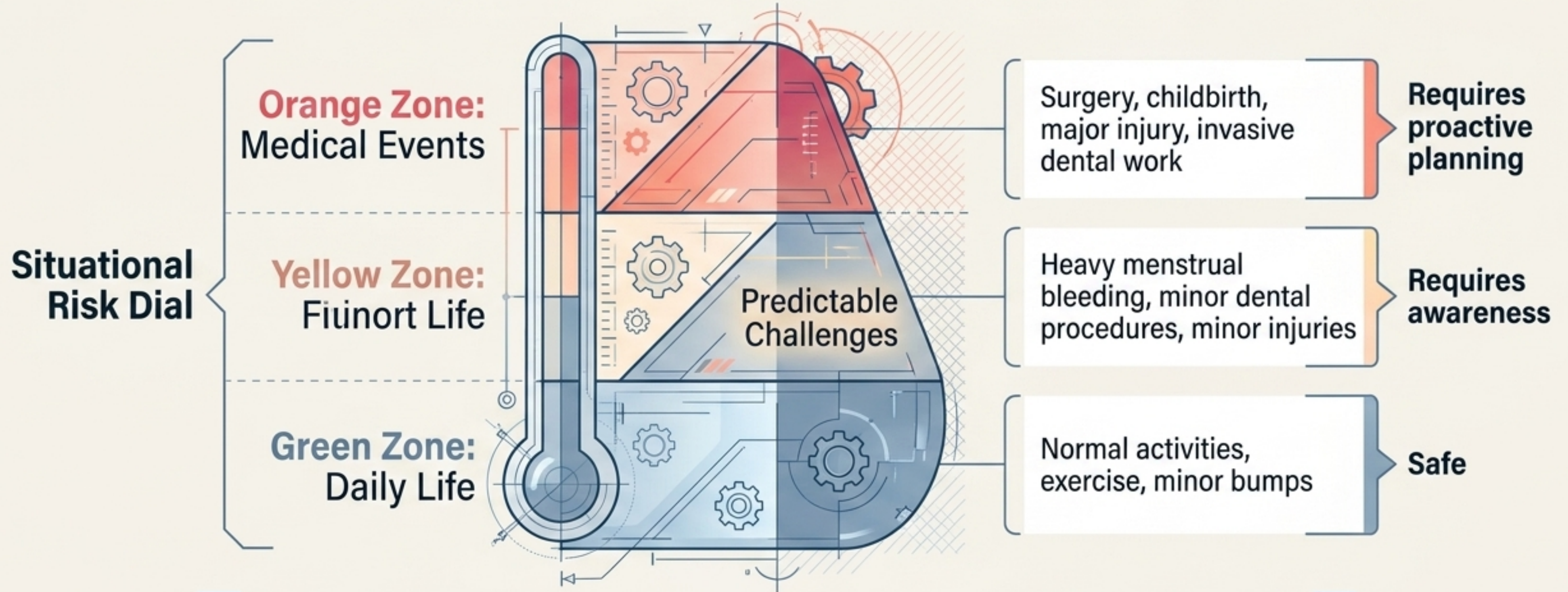
Symptoms vary widely among patients. Because symptoms and laboratory values do not always match in a simple way, doctors rely heavily on your specific bleeding history.



No two blueprints are identical. Your specific symptoms help guide your individual care.

Assessing your everyday safety

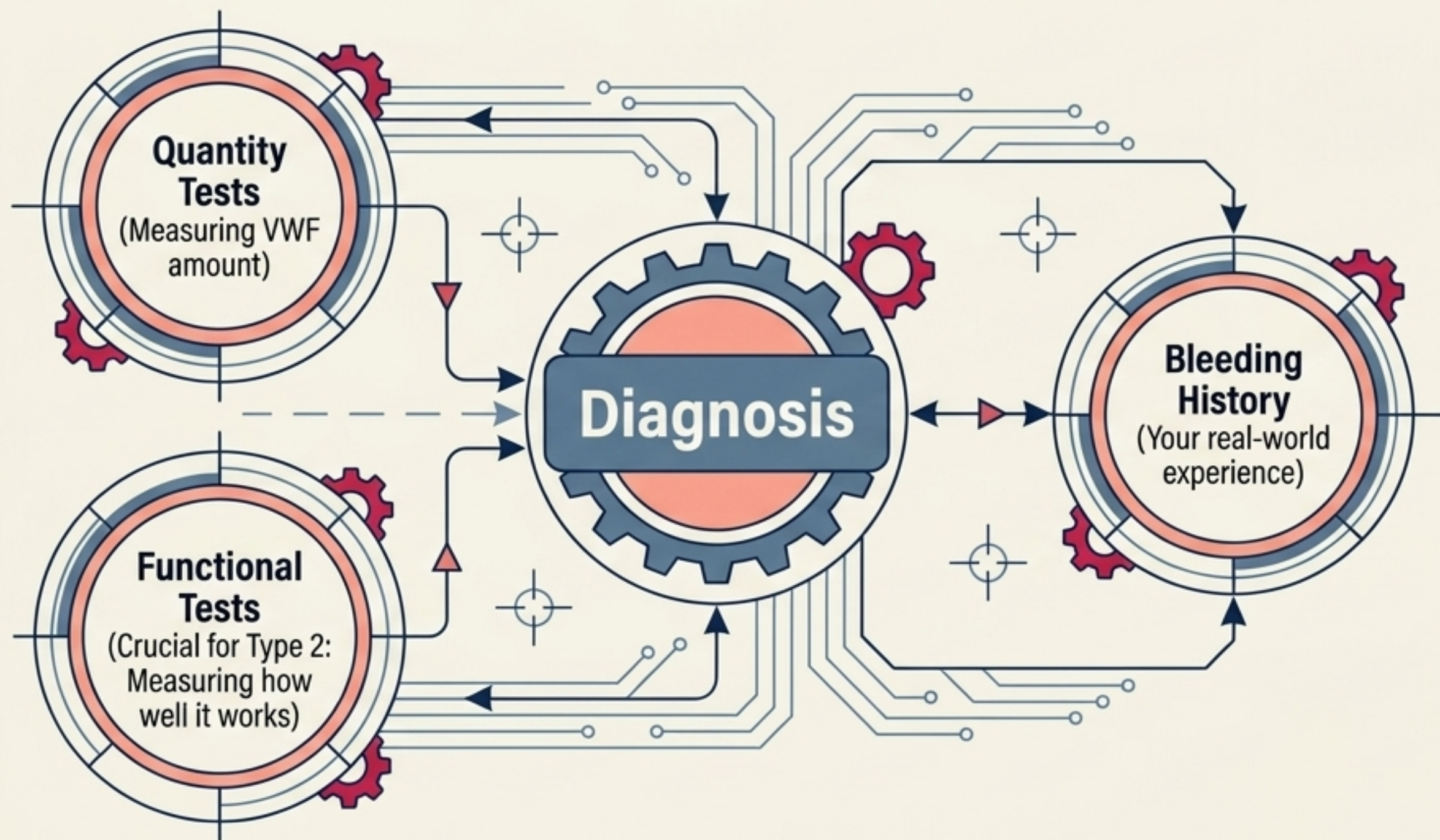
For most people, type 2 VWD does not shorten life expectancy.
More significant bleeding is uncommon in daily life.



The main safety goal is to plan ahead so that bleeding is prevented rather than treated after it occurs.

Diagnosing through patterns, not single numbers

Because the sheer amount of VWF is often normal, a single lab value cannot tell the whole story. Doctors must assemble a constellation of data.

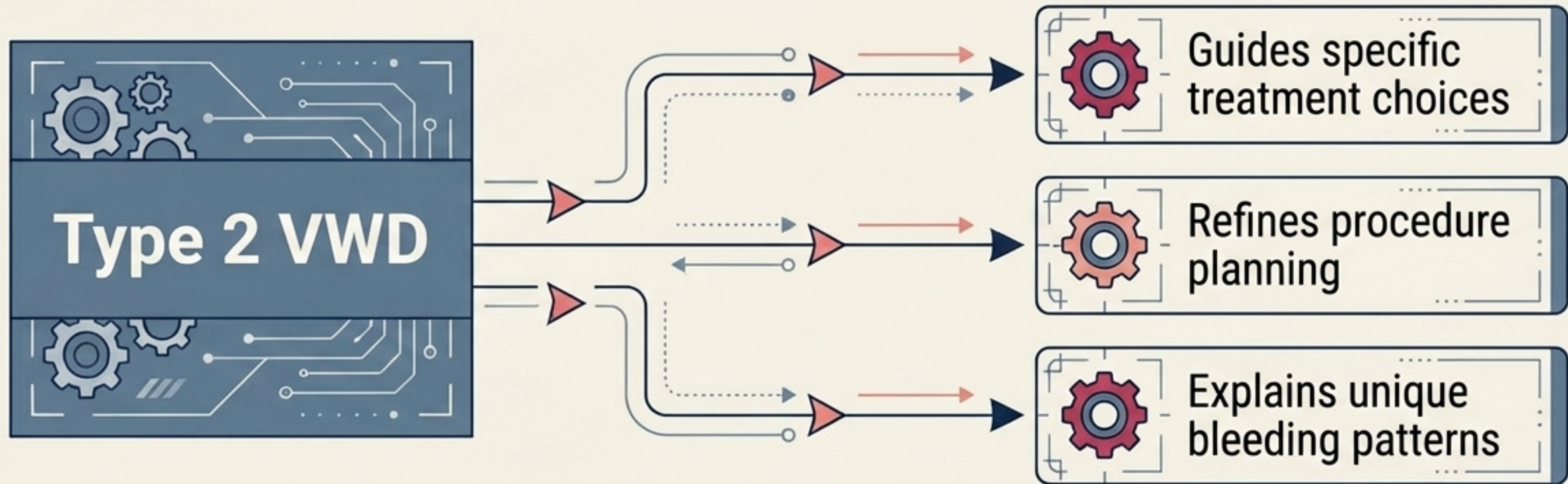


Why do I need repeat testing?

Test results fluctuate. Stress, illness, hormones, pregnancy, and inflammation can all influence lab values over time.

The critical role of identifying your subtype

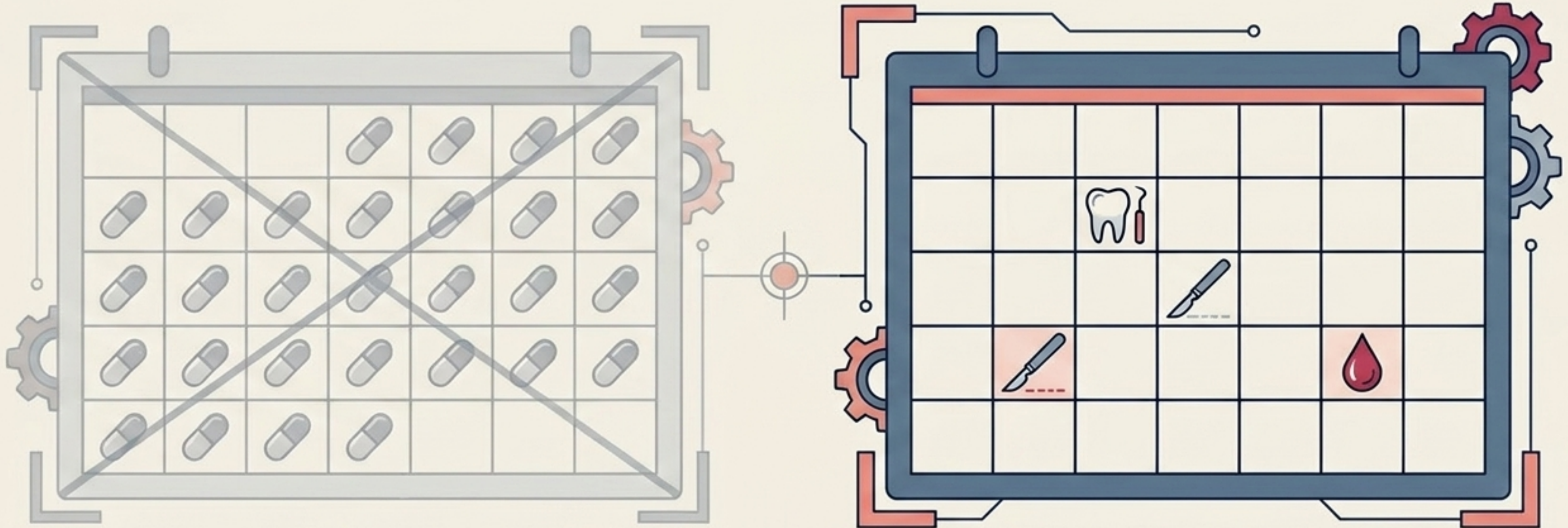
Type 2 includes several distinct subtypes. Identifying your exact subtype is a major priority for your medical team.



Even when the exact subtype is uncertain, good care is still possible. Your **bleeding history** and response to treatment will guide decisions in the meantime.

Treatment is situational, not daily

Many people do not need daily treatment. The choice is based on what works best for your subtype and the specific situation—not on how “severe” you seem day to day.



Constant Therapy
(Not typical)

Targeted Readiness
(Typical)

Medical options for specific situations

When treatment is required for procedures, dental work, injuries, or heavy menstruation, your doctor will select options tailored to your subtype.

Clotting Support Medications



Pills or nasal sprays designed to help support the body's natural clotting mechanisms.

Clotting Protein Infusions



Intravenous delivery of functional VWF and other clotting proteins to directly bypass the structural flaw.

The correct tool depends entirely on your specific subtype.

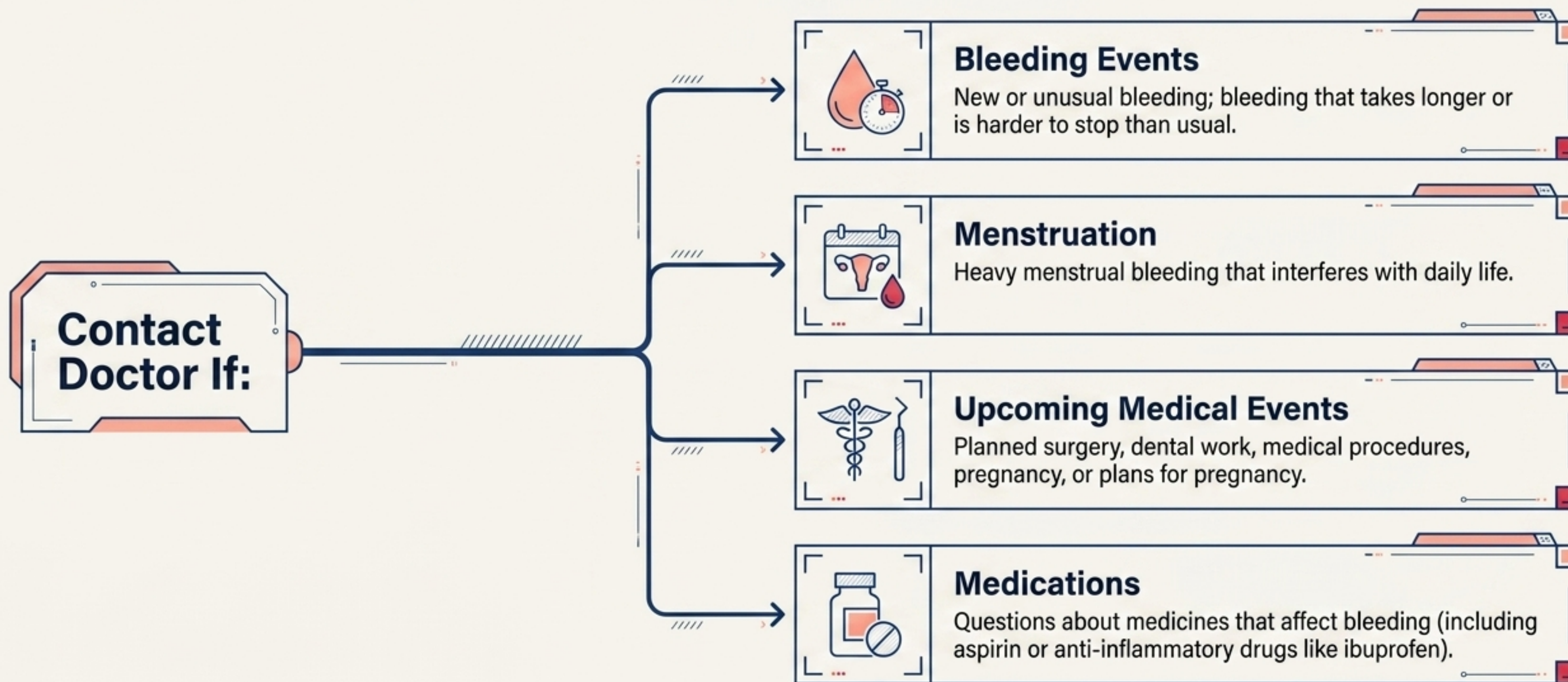
Managing daily life without unnecessary restrictions

Most people with type 2 VWD live normal, active lives. Awareness and communication are far more important than ongoing therapy.



When to contact your medical team

Most bleeding symptoms are not emergencies, but you should check in with your doctor if you experience any of the following triggers.



Structuring your long-term care plan

Your ongoing care is usually focused on planning for predictable, higher-risk situations rather than daily monitoring.

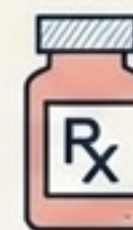


The Dual Goals of Follow-up

1. Making sure your exact subtype is correctly identified.

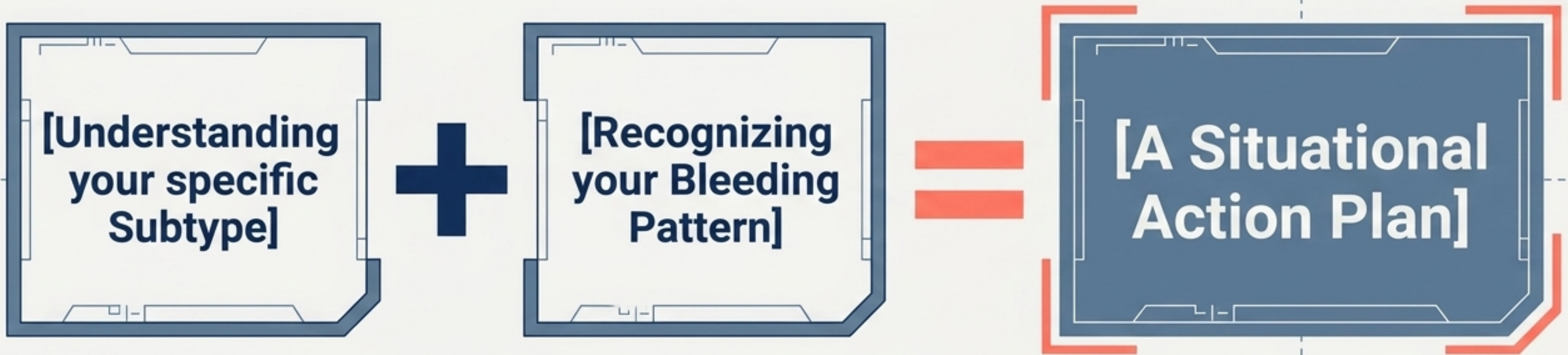


2. Building a clear, actionable plan for procedures, pregnancy, and treatment.



Bringing it all together: Targeted readiness

Type 2 VWD is a function problem. The key to living fully is not daily worry, but combining medical knowledge with proactive planning.



Key Takeaways

Function over Quantity:
Levels may look normal;
the flaw is in the structure.



Subtypes Guide Care:
Exact identification
unlocks precise treatment.



Usually Manageable:
Success comes from situational
treatment and good planning.

