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Your Guide to Deep Vein Thrombosis

By Marcie Hoff

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About the Author

Marcie Hoff has written many stories from her imagination in the last few years but this is her first fact-based book.

Marcie wants this to help many people that, like her, thought that deep vein thrombosis was not something she needed to be concerned about – that it only affected “couch potatoes” and not reasonably active people like her.

But, a couple of close friends developed the illness and she realized that their lifestyle was very similar to her own.

When she saw the devastating effect on her friends and those closest to them, Marcie decided to put together this plain-speaking guide for the benefit of people that could be at risk – that’s almost everyone!

She was surprised to find how much misinformation there was about D.V.T., the simple measures which could reduce the risks and the importance of taking those precautions.

Marcie says that she has been as thorough as she could, but emphasizes that research is increasing, so people need to ask their own doctor who has the latest available information.

She believes that her guide will help people to ask the right questions of their doctor, sort good information from bad and better manage the risk and effects of a very serious disease, deep vein thrombosis.

What is Deep Vein Thrombosis?

D.V.T., or **Deep Vein Thrombosis** is the formation of blood clots on the walls of the deep veins in the lower body and legs. The blood, when it clots, can look a bit like a mass of jelly.

The word thrombosis means "formation of a blood clot".

Deep vein thrombosis is not always dangerous. Some small deep vein thromboses are fixed by our body's natural defenses, without us being aware of it.

However, there is a serious risk when the clot breaks off the vein wall and it is large enough to hinder one of your body's large veins, particularly the veins that carry blood from the heart to the lungs.

D.V.T. is when clots form on the walls of these veins. Although symptoms may not be apparent or seem significant, the potential risk of pulmonary embolism, where a clot breaks away and is transported through the body to the lungs or heart, causing death, means that every precaution must be taken.

The blood clots mostly occur in the thigh or calf. However, in rare cases deep vein thrombosis may occur in the collar bone, the armpit, the abdomen, the upper arm or pelvic region.

Some Facts about Deep Vein Thrombosis

- In the U.S.A., deep vein thrombosis has been reported as the second most frequent vascular (vein-related) problem.
- Around 600,000 people are affected by deep vein thrombosis every year in the U.S.A..
- It mostly occurs in people over the age of sixty, but it can affect anyone of any age.
- Early detection of deep vein thrombosis can prevent it escalating to pulmonary embolism.

Causes of Deep Vein Thrombosis

Deep Vein Thrombosis is due to the clotting of the blood in the deep vein.

The veins are blood vessels spread throughout the body and carry blood in them. At times, the blood in these vessels clot.

The Risk Factors for Deep Vein Thrombosis?

The main risk factors for D.V.T. include:

Inheritance of a blood clotting disorder: Some people inherit a rare genetic condition, which can lead to deep vein thrombosis (D.V.T.). **Factor V Leiden** is a genetic disorder that is responsible for abnormal blood clotting in the human body.

Prolonged bed rest: Any condition that involves a long bed rest; for example, paralysis or a stay in the hospital after surgery, may lead to D.V.T.

Vein Damage: If your vein has a damaged inner lining then the chances of your getting D.V.T. is higher. Inflammation of your vein wall (vasculitis) and certain medications increase the chances of deep vein thrombosis, for example chemotherapy.

Previous D.V.T. episode: A deep vein thrombosis (D.V.T.) damages the inner lining of the veins and, as a result, it increases the chances of you having another deep vein thrombosis in the future.

Surgery: Some medical procedures may increase the chances of developing deep vein thrombosis (D.V.T.).

For example:

- General anesthesia given to patients during surgery may dilate the veins and raise the chances of the blood pooling and then clotting.
- Surgeries that reduce the flow of blood to a certain part of the body may increase the chances of developing deep vein thrombosis (D.V.T.).
- Surgeries of the knee, leg, hip, calf, chest or abdomen.

- Orthopedic surgeries, for example hip replacement.

Surgery can increase the chances of deep vein thrombosis because there are chances of proteins, fats, and tissue debris moving into the veins. Often, prolonged bed rest is required after surgery. Surgery that takes longer than thirty minutes may have a higher risk of D.V.T. occurring.

Therefore, some patients who are to undergo surgery may be injected with heparin to lessen the chances of deep vein thrombosis.

Lack of Movement: This increases the chance of deep vein thrombosis because the flow of blood in the vein is slowed when one is immobile. So, the prospect of blood clotting increases.

The lack of movement also occurs in long flights or trains where the seats have lesser leg space. This is known as Economy Class Syndrome but all passengers have some risk where your legs are immobile and your feet may not be on the floor or supported. In this situation, the calf muscles cannot contract and this often results in the formation of clots.

It is advisable that passengers on long journeys walk up and down the aisle at least once each hour.

A person that routinely has a long period of sitting in front of a computer, for instance, is also running some risk of this condition.

Cancer: Certain forms of cancer increase the chances of blood clotting in the body, and there are some types of cancer treatments that may raise the chances of blood clotting in the body.

Of course, doctors are well aware of these potential risks and that's one reason that you should keep your doctor and any specialists that are treating you, fully informed about other treatments or conditions and your full medical history.

Using hormone replacement therapy or contraceptive pills: These both contain Estrogen, the female hormone which causes blood to clot easily. So, if you are using either, your chance of developing deep vein thrombosis may increase.

Heart problems: A person with a damaged heart has a higher risk of developing D.V.T., because their heart has a lower ability to handle any clots that travel from the lower parts of the body to it.

Catheter: When a pacemaker or flexible, thin tube (called a catheter) is placed in a central vein, blood vessels can be irritated and this may decrease blood flow and the body's ability to handle clots floating in the blood.

A history of D.V.T.: If you have had D.V.T. before, there is a greater chance of you suffering from the condition in the future.

Family history: If there is a family history of D.V.T., then you have a higher than average risk of developing the condition.

Obesity: Being obese or overweight increases the chances of deep vein thrombosis.

Smoking: Smoking increases the chances of blood clotting and this may increase the seriousness of a D.V.T. episode.

The Three Factors

Some studies report that there are 3 principal factors that influence the occurrence of deep vein thrombosis:

1. Venostasis, a condition where there is stagnant or reduced flow of blood in deep veins.
2. Injury to the walls of the blood vessel.
3. Hyper-coagulability, a condition where there is increased activity of the substance in the blood that controls the blood clotting mechanism.

Who is at Risk of Deep Vein Thrombosis?

D.V.T. may strike anyone of any age.

Some people have an increased chance of being affected by deep vein thrombosis:

- People with a history of deep vein thrombosis
- People with factors or disorders that make their blood thicken sooner than normal or people whose blood is thick.

There are certain inherited blood disorders, for example V Leiden factor, that clots the blood sooner than most other people.

- People that are undergoing hormone replacement therapy.
- People that are using contraceptive pills.
- People who have injured to a deep vein during surgery, or because of a fracture or other trauma.
- People who are immobile for a great length of time, whether it is bed rest after surgery, or because their movement is restricted while they travel a long-distance or for a long time.
- Pregnant women and those who are in the first six weeks after childbirth.
- People who are having, or recently had, treatment for cancer such as chemotherapy.
- People who have a central venous catheter, a tube that is placed in the vein during medical treatment for easy access to their bloodstream.
- People who are older than forty have an increased level of risk but, please remember, that D.V.T. may also occur at any age.
- People who use seats that keep their feet off the ground and below their hips when seated.
- People who are obese.
- People who smoke.

- Previous D.V.T. Episodes. If you have had D.V.T. before, there is a greater chance of developing it again if there are other causal factors.

Other Factors:

- Smokers are considered at a higher risk.
- If you are above the recommended weight, you are more likely to develop deep vein thrombosis.
- If you are traveling and your feet do not touch the ground while you are sitting.

Deep Vein Thrombosis in Children

Occurrence

Occurrence of deep vein thrombosis in the pediatric population is approximately 0.07/10,000 and 5.3/10,000 hospital admissions. Other studies and comparisons show a <1% deep vein thrombosis during childhood in cases after lower limb surgery and a relative absence of deep vein thrombosis in children having congenital thrombophilias.

Clinical Features

About 95% of deep vein thrombosis in children occurs as a signal of serious disease such as cancer, prematurity, surgery, trauma, or congenital heart disease. However, congenital prethrombotic disorders are found in <10% of deep vein thrombosis in children.

However, children are at the risk of developing deep vein thrombosis either at the age younger than one or in their teens. D.V.T. presents a similar clinical presentation in children as it does in adults.

Central Venous Lines

Forty percent of deep vein thrombosis in children and up to eighty percent in newborn babies occurs in the upper venous system. This is secondary to the use of central venous lines that are used for a short time or long-term supportive system in children who require total therapy for cancer. This needs anesthesia with each replacement and can be complicated because of pulmonary embolism. This may also cause the syndrome of superior vena cava and chylothorax. This condition can destroy the upper venous system and lead to a severe postthrombotic syndrome.

Deep Vein Thrombosis in Elderly People

Deep vein thrombosis is common in elderly people.

There is some evidence that people over forty years of age have a greater chance of getting D.V.T.

Why Aging Raises the Chances of D.V.T.:

- The blood of the human body tends to thicken as we become older.
- Elderly people tend to sit in a particular place for a long period. This increases their risk of developing deep vein thrombosis.

- Elderly people have a slower rate of healing - they do not heal as quickly after an injury and may require more rest.

Causes of D.V.T. in Elderly People

Surgery

When surgery is performed on people over forty, the possibility of clots forming is greater because their blood is starting to become thicker than it was in their earlier years. This surgery may reduce the blood flow to the part of the body that was operated on.

During surgery, there is some chance that proteins, fats, and debris move into the veins of an elderly person.

They may have to rest in bed for a significant period and, if suitable exercise is not done, this can also increase the risk of D.V.T.

Immobility or Lack of Movement

With age, some people become less active. This may increase the chance of D.V.T.

How is Deep Vein Thrombosis Diagnosed?

The diagnosis of deep vein thrombosis is based on your physical examination, the results from the tests that your doctor performed or ordered and your medical history. Your doctor will take account of your medical condition, history and symptoms, and then consider the risk factors and advise you what treatment, if any, he believes is best for you.

Physical Examination

During your physical examination, the doctor will look for signs and symptoms of deep vein thrombosis while considering the possibility of other conditions. He or she will carefully check your legs, your heart, lungs and your blood pressure.

Medical History

The doctor will ask you about:

- Your overall health
- Your past medical conditions
- If you are on any prescribed medicines at the time of the check up
- Any recent injury or surgeries you might have had
- Whether you have or have ever been treated for cancer

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