

- **Compression stockings such as TED hose.** These special stockings reduce “blood pooling” by compressing the veins in the leg.
- **Pneumatic air stocking (PAS) or sequential compression devices (SCD).** These stockings wrap around each leg and apply active intermittent compression—improving blood movement through the veins of the leg.
- **Anticoagulants or “blood-thinning” medications.** These medications alter the body’s normal blood-clotting process. They may be used short-term, however, for patients at high risk for DVT long-term, an oral anticoagulant may be needed.
- **Smoking cessation.** Smoking damages your blood vessel walls, making your heart work harder and increasing your blood pressure. By quitting smoking, you reduce your risk of DVT, heart attack and stroke. Ask your care provider for more information about smoking cessation.

What are the Long-term Effects?

Some patients may experience some long-term side effects of DVT, known as post-thrombotic syndrome. Effects can include:

- Chronic pain, swelling and discoloration of the leg
- Development of open sores or ulcers caused by damage to the valves in the veins
- Recurrent DVT and PE
- Chronic shortness of breath and exercise intolerance

These conditions are long lasting and can lessen one’s quality of life.



For more information about DVT, please ask your nurse, health care provider or visit <http://www.dvt.net>.

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How is DVT treated?

There are three main goals in treating DVT:

- Stop the clot from getting larger
- Reduce the risk of developing another clot
- Reduce the risk of the clot breaking off in your vein and moving to your lungs

If you develop DVT, your doctor will work with you to create an effective treatment plan based on your needs. Treatment may include:

- Anticoagulant, or “blood thinning” medication
- Thrombolytic agents—medicine used to dissolve blood clots
- A filter inserted into a vein to prevent blood clots from reaching the lungs
- Compression hose



Know the Risks For

Deep Vein Thrombosis (DVT)



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What is DVT?

Deep vein thrombosis (DVT) occurs when a blood clot forms inside a vein. This is a common, preventable and treatable condition. When blood circulation slows due to injury, illness or reduced movement, blood can gather or “pool” offering an ideal environment for clot formation and increasing your risk of DVT.

DVT usually develops in the leg and can block the flow of blood through the vein. When this clot travels to the lungs—called a pulmonary embolism (PE)—it can be life-threatening.

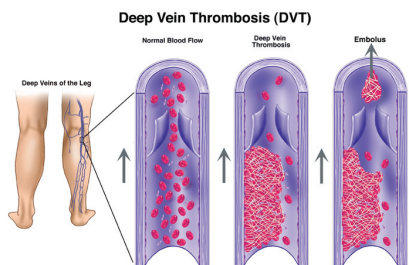
Why Should You be Concerned About DVT?

Nearly 2 million cases of DVT and 600,000 cases of PE occur each year. Complications of DVT kill more Americans than AIDS and breast cancer combined. Death can occur suddenly with little or no chance for treatment—many people die in the first hour.

Signs and Symptoms of DVT

Often there are no signs or symptoms and can be hard to detect. Signs may include:

- Rapid swelling of the extremity
- Extremity feels warm to the touch
- Redness or discoloration of the skin
- Unexplained pain or tenderness—usually only in one extremity—that may be present when standing or walking



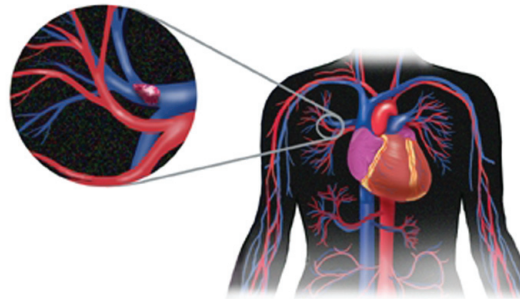
What is PE?

If left untreated, DVT can develop into a pulmonary embolism (PE). A PE occurs when a blood clot breaks loose and travels through the veins to the lungs. The clot is life-threatening and may be fatal.

Signs and Symptoms of PE

- Unexplained shortness of breath
- Chest pain or palpitations
- Anxiety and/or sweating
- Coughing up blood
- Fatigue and/or fainting

Site of Pulmonary Embolus



Contact your doctor for urgent evaluation or go the emergency room if you suspect you have DVT or PE.

Who is at risk for DVT?

DVT can occur in almost anyone, but certain people may be more at risk. Some factors that may increase your risk include:

- Age 40 years or older
- Surgery—especially hip, knee or abdominal surgery

- Restricted mobility due to a long illness or surgery
- Stroke
- Certain heart problems
- Cancer and its treatment
- Personal or family history of blood clots
- Being overweight
- Respiratory failure
- Varicose veins
- Pregnancy
- Birth control pills or hormone replacement therapy

Please talk with your doctor if you feel you are at risk for DVT.

How is DVT prevented?

The good news is that DVT may be prevented and can be treated. Mercy Medical Center-Des Moines proactively evaluates patients for risk of DVT and provides appropriate preventative measures for at-risk patients—preventing complications and ensuring a safe recovery.

Some of the preventative measures your doctor may prescribe are:

- **Walking.** Being up out of bed and walking helps move blood through the veins of the leg. Your physicians and nurses may encourage you to get up and walk as soon as possible during your hospital stay.