What you need to know about DVT

It’s important to know the facts about DVT, so you can take steps to reduce your risk of this serious condition.

What is DVT?\(^1\,\,^2\)
Deep-vein thrombosis (DVT) is a common but serious medical condition that occurs when a blood clot forms in a deep vein, usually in the calf or thigh, and either partially or completely blocks the flow of blood in the vein. DVT affects approximately 2 million Americans each year.

In some cases, DVT leads to a pulmonary embolism (PE). This is when a fragment of the clot breaks loose from the wall of the vein and travels to the lungs, where it blocks an artery that carries blood from the heart to the lungs. PE causes approximately 300,000 deaths in the United States each year—more than breast cancer and AIDS combined.

When can you get DVT?\(^3\)
Blood clots can appear with no prior warning; however, certain conditions may increase your risk.

Top risk factors and triggering events for DVT:
- Increasing age
- Prolonged immobility
- Stroke
- Paralysis
- Previous VTE
- Cancer and its treatment
- Major surgery (particularly operations involving the abdomen, pelvis and lower extremities)
- Respiratory failure
- Trauma (especially fractures of the pelvis, hip or leg)
- Obesity
- Varicose veins
- Congestive heart failure and myocardial infarction
- Indwelling central venous catheters
- Inflammatory bowel disease
- Nephrotic syndrome
- Pregnancy, oral contraceptives or post-menopausal hormone replacement
- Inherited predisposition for clotting

What are the symptoms of DVT?\(^4\)
Your risk for DVT is increased if you are immobile for long periods of time, such as during hospital stays or when you have injuries or illnesses that restrict your movement.

It is important to become familiar with the symptoms of DVT, especially if you have limited or no mobility, as almost half of all cases of DVT have few symptoms or none at all.

If you notice any of the following, especially in the leg, consult your healthcare provider:
- Pain
- Swelling
- Warmth over affected area
- Changes in skin color such as turning pale, red or blue

If you develop signs or symptoms of a pulmonary embolism (PE) – a life-threatening complication of DVT – seek medical help immediately:
- Unexplained shortness of breath
- Chest pain
- Rapid pulse
- Lightheadedness or dizziness
- Coughing up blood
- Sweating
- A sense of anxiety or nervousness
One in 20 people will get DVT in a lifetime, but you can protect yourself and reduce your risk by being alert and aware.\(^5\)

**How can you reduce your risk?**\(^4\)

Work with all your healthcare providers to track your risk factors and adopt healthy and safe behaviors that can help you reduce them.

There are proactive steps you can take that can help you reduce your risk of DVT. Keeping active and maintaining a healthy diet can make you feel better overall, while also helping you reduce your risk. You can also reduce your risk by:

- Avoiding prolonged immobility such as sitting or lying down
- Losing weight
- Talking with your healthcare provider about leg and calf exercises you can perform before and after surgery
- Stopping or avoiding smoking
- Incorporating exercises and stretching into your long-distance travel routine
- Choosing looser, less restrictive clothing

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**Why should you be aware?**\(^4-5\)

Your healthcare provider can diagnose DVT by identifying any risk factors you may have and conducting a physical examination. It may be hard to diagnose DVT without specific tests, because a number of other conditions such as muscle strains and skin infections produce similar symptoms.

If you have DVT, getting treatment right away can help reduce the risk of complications such as PE. The main goals in treating DVT are to stop the blood clot from getting larger, reduce the chance of developing additional clots and reduce the risk of the clot breaking off and traveling to the lungs.
Patients who smoke have an increased risk of blood clots. Smoking affects blood clotting and circulation, which can increase risk of DVT.4

Approximately 5 to 8 percent of the U.S. population has one of several genetic risk factors, also known as inherited thrombophilias in which a genetic defect can be identified that increases the risk for thrombosis.9

Are you in a high-risk category?

Although DVT can occur in almost anyone, certain people may be at higher risk of developing a blood clot. If you fall into one of the following identified high-risk categories, talk to your healthcare provider about what you can do to protect yourself from DVT.

Up to 20 percent of all cases of DVT/PE occur in cancer patients.6 Cancer may cause clotting factors in the blood to increase. More specifically, surgical intervention or chemotherapy can injure vessel walls, thereby triggering blood clots. Tumors also release chemicals which trigger clotting.7

Obese patients are 2.5 times as likely to have DVT and 2.2 times as likely to have PE compared with people of healthy weight. Being overweight increases the pressure to the veins of the pelvis and legs.8

Patients who sit for extended periods of time, such as when driving or flying, or patients with prolonged immobility, such as during a long hospital stay or paralysis may have an increased risk for DVT. When legs remain still for long periods, calf muscles don’t contract to help blood circulate, which can lead to clotting.4

In elderly patients, being over the age of 60 increases the risk of DVT, though it can occur at any age.4

Women taking oral contraceptives or hormone replacement may be at increased risk of developing DVT.4

A history of DVT/PE. One-third (about 33 percent) of people with DVT/PE will have a recurrence within 10 years.9

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There are many places where you can find information about DVT. The Coalition to Prevent DVT’s website [www.preventdvt.org](http://www.preventdvt.org) has educational resources for healthcare professionals. In this section we have listed resources from Coalition members and supporters on specific topics.

### ADDITIONAL INFORMATION ON PATIENT EDUCATION

**Where can I find resources for patient education?**

**National Alliance for Thrombosis and Thrombophilia (NATT)**

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**Where can I learn more about improving patient care?**

**American Society of Health-System Pharmacists (ASHP)**

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**Where can I find information on patient and caregiver counseling?**

**American Academy of Home Care Physicians (AAHCP)**
Visit [http://www.aahcp.org/associations/11307/files/Patient%20or%20Caregiver%20Counseling%20for%20DVT.pdf](http://www.aahcp.org/associations/11307/files/Patient%20or%20Caregiver%20Counseling%20for%20DVT.pdf) to complete a counseling form to ensure that your patients and their caregivers are fully informed about their condition.

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**Where can I find guidelines for treating DVT?**

**American Venous Forum (AVF)**
Visit [http://veinforum.org/Patients/What-is-vein-disease/Deep-Vein-Thrombosis.aspx](http://veinforum.org/Patients/What-is-vein-disease/Deep-Vein-Thrombosis.aspx) to access information on guidelines for diagnosing and treating patients with acute or chronic venous disease, venous malformations, or chronic lymphedema.