Greenwich Hospital

What is Deep Vein Thrombosis

PATIENT/FAMILY INFORMATION SHEET

What is Deep Vein Thrombosis?

Deep Vein Thrombosis, or DVT, is a condition in which blood clots form in a vein deep in the body. A DVT usually forms in the veins in the legs, but this can also occur in other veins of the body. If a blood clot dislodges and travels in your blood stream, it may become stuck in one of your lungs, causing a pulmonary embolism; it may become stuck in a coronary artery in the heart, causing a heart attack; or it may become stuck in an artery in the brain, causing a stroke.

What are the risks for developing Deep Vein Thrombosis?

There are several factors that could increase the risk of developing DVT. Your risk increases if you have several of the risk factors at the same time. These risks include:

- Low blood flow in a deep vein due to surgery or injury.
- Other medical conditions, such as an underlying disease, varicose veins, or a past history of blood clots.
- Long periods of inactivity, such as bed rest or during travel on long trips.
- Pregnancy, especially the first 6 weeks after delivery of the baby.
- Being overweight.
- Taking birth control pills or hormone therapy.
- Having a central venous catheter in place.
- Being over age 60, although DVT can occur at any age.
- Smoking

What are the symptoms of Deep Vein Thrombosis?

- Swelling of the leg.
- Pain or tenderness in the leg, which is usually present in just one leg and may only be present when standing or walking.
- Feeling of increased warmth in the area of the leg that is swollen or painful.
- Red or discolored skin in the area of swelling or pain.

How do I know if I have a pulmonary embolism, heart attack, or stroke?

Some people may not find out that they have DVT until a clot dislodges (called an embolism) and travels to another part of the body, such as the lung, heart, or brain. An embolism is a serious condition and requires immediate medical attention. The symptoms include:

Pulmonary Embolism (Lung)	Heart Attack (Heart)	Stroke (Brain)
Chest pain, especially when taking in a deep breath.	 Pressure, squeezing, fullness in the chest Pain/discomfort in one or both arms, jaw, pock 	 Sudden numbness, weakness, paralysis of face, arm, leg Sudden blurred
Shortness of breath.A heart racing sensation.	or both arms, jaw, neck, back, or stomach • Shortness of breath	vision in one or both eyes Difficulty speaking or
• Fever	SweatingNausea/lightheadedness	understandingSudden severe headache

How is Deep Vein Thrombosis diagnosed?

Your doctor will obtain a medical history and will examine you to determine if DVT is present. To verify the diagnosis, your doctor may also order one or more of the following special tests:

- An Ultrasound: uses sound waves to evaluate the blood flow in the veins.
- A Venography: involves injecting a dye into a vein then taking x-rays of the area in question.
- Magnetic Resonance Imaging (MRI): uses radio waves to show pictures of organs and structures inside the body.
- A CAT Scan: used less frequently, this procedure will also provide pictures of the structures in the body.
- **D-Dimer:** A blood test used to determine if clotting is present.

How is Deep Vein Thrombosis treated?

There are several methods to treat DVT depending upon your severity. Some may require surgical intervention.

DVT is usually treated with a medication called an anticoagulant or blood thinner. This type of medication is used to stop clots from getting bigger and to prevent new clots from forming. The anticoagulants do not break up clots that have already formed. These clots will be broken down by your body's natural defenses. (For more information regarding the effects of anticoagulants, please see the "What are anticoagulants and antiplatelets agents?" education fact sheet.)

Your doctor may order one or a combination of the following anticoagulant medications depending upon your individual medical needs:

- Heparin, which is given intravenously.
- Lovenox, also known as enoxaparin (a form of heparin), which is given by injection.
- Coumadin, also known as warfarin, which is a pill.

Your doctor may also recommend bedrest and continuous warm soaks to the area as part of the treatment plan.

Once home, it is important to take your anticoagulant as ordered. Your doctor may order follow-up blood work to check the effectiveness of your anticoagulant medication. If ordered, it is essential to have this blood work drawn.

Your anticoagulant prescription is:	•
Source: National Heart, Lung, and Blood Institute, retrieved November 2004 from www.nhlbi.nih.gov	

For more Patient Education Fact Sheets, see the Greenwich Hospital web site at www.greenhosp.org and click on Patients & Visitors, then Patient Education.

11/04, Rev. 9/05