

Health Tips

Your Good Health Information From eDocAmerica

with

Dr. D



Printer Friendly



Click Here!

...to email this Health Tip to a friend and invite them to enjoy a free subscription to...

eDocAmerica's weekly Health Tip!

eDocAmerica

Services Overview

Click HERE...

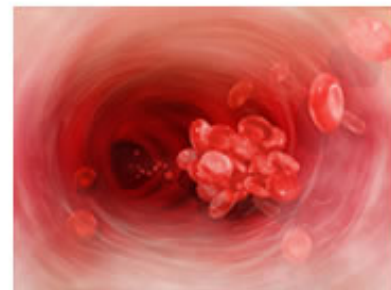
Unsubscribe



"Tip off" your friends and family - Due to widespread interest, eDocAmerica is pleased to be able to offer the weekly Health Tips to your friends and family. If you know someone who would enjoy reading Dr. D's column, click the link on the left side of the health tip and you will be able to invite them to join. The subscription is completely free and they will always have the ability to unsubscribe should they choose to no longer receive the tip.

Health Tip: All blood clots are not created equal Part 1- Blood clots in the lower leg

To most people, the possibility that they could have a blood clot is a terrifying thought. After all, can't blood clots go to the lungs or cause strokes? The short answer to this is, yes they can, but the most common type of blood clot occurs in the lower leg and, in most cases, does not cause any serious problems. This does not mean that they should be ignored, however, as it is important to recognize the problem as quickly as possible and provide appropriate treatment in order to avoid complications. This week we'll look at the blood clots that form deep within the veins of the lower extremities (deep venous thrombosis) and next week, I'll discuss the more serious types of blood clots that occur in the lungs (pulmonary embolus) and brain (ischemic stroke).



What causes a DVT? Deep venous thrombosis (DVT) primarily affects the veins in the calf region and thigh. A DVT develops for a number of reasons including prolonged sitting (such as on long plane or car trips), bedrest, or because of recent surgery (especially hip, knee, or female reproductive organ surgery). These events can impede the flow of blood through the veins, resulting in stagnation and clot formation. Certain medications can also predispose someone to having a DVT. For example, estrogen and birth control pills increase the body's ability to manufacture clotting factors. When this happens normal blood flow is impeded, and as in the case of a cut on the skin, clotting factors cause the flow of blood to stop.

How is a DVT diagnosed? As mentioned, it is very important to be able to

If you wish to [unsubscribe](#) from any eDocAmerica mailings, please click on the image above.

Register Now

If you have not yet used eDocAmerica to communicate with our physicians, we urge you to give it a try. Email us about this or any other topic or question you have!



Visit the
eDocBlog

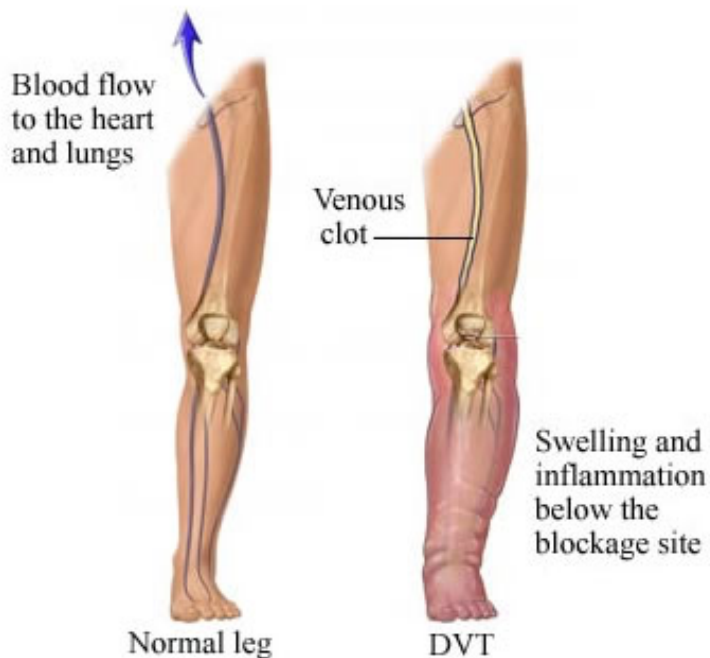


Forget your
Password?



Login
Here

We want to
hear from you!



recognize the signs and symptoms of an early blood clot and bring this to the attention of your doctor. These usually begin in the calf region of one leg and include pain, swelling, increased warmth, and changes in skin color (particularly redness). During examination, the doctor may measure the diameter of your calves to confirm the swelling. In some cases, a firm, linear

structure or "cord" representing the actual clot in the vein may be felt. In order to confirm the doctor's suspicion of a DVT, a number of tests may be performed. The doppler ultrasound is one of the most commonly performed tests, since it has a high degree of accuracy and is painless. In this test, sound waves are used to look for evidence of disrupted blood flow. In some instances, a D-dimer blood test may be given. A positive result tells your doctor that there has been significant clot (thrombus) formation in the body, although it does not tell the location or cause of the clot. Accordingly, when the D-dimer is positive, a more definitive test must be done to confirm the presence and location of the clot. Perhaps the "gold standard" for diagnosing DVTs is the venogram. In this test, contrast material is injected into one of the veins on the foot and the flow of this dye is observed with x-rays to try to detect an obstruction.

How is a DVT treated? Once the DVT is diagnosed, the goals of treatment are to keep it from getting any larger and to prevent it from breaking loose and travelling to other areas of the body. A pulmonary embolus, usually caused by a piece of a clot in the lower leg that breaks loose, is one of the most serious complications of the DVT. Initial treatment of DVTs involves the use of the anticoagulant (blood thinner), heparin. In the past, heparin could only be delivered through an intravenous line in the hospital setting. Over the past few years, a form of heparin (Lovenox) that can be injected into the muscle has been used with success, and appears to offer some advantages over the IV preparation. After the heparin treatment, a tablet form of an anticoagulant called warfarin (Coumadin), is typically required for several months, until the body has had an opportunity to dissolve the clot. Since warfarin can cause blood to become overanticoagulated ("too thin"), the time it takes blood to clot is monitored by the doctor. Fortunately, in most cases, treatment of the lower extremity blood clot is successful without serious complications or long-term problems. Soon, we'll look at more troublesome types of blood clots, the pulmonary embolus and ischemic stroke.

Have a topic that you'd like to see explored in Health Tips?

Submit suggestions through the "We want to hear from you!" button and we'll forward them to Dr. D. for consideration.

Have you ever used eDocAmerica?

To register, just [Click Here](#) and follow the simple directions. The entire process should take less than 5 minutes. You'll be glad you did.



11719 Hinson Road, Suite 130 Little Rock, Arkansas 72212

Toll Free 1-866-525-eDoc (3362) www.eDocAmerica.com

Copyright 1999-2008 eDocAmerica. All rights reserved. Patent Pending. [\[click here to unsubscribe\]](#)