DEEP VEIN THROMBOSIS (DVT)

What is DVT
- It is a clot that forms inside a vein, usually within your leg.
- About half a million Americans every year get one, or up to 100,000 die because of it.
- The danger is that part of the clot can break off and travel through your bloodstream.
- It could get stuck in your lungs, heart, brain and block blood flow, causing organ damage or death.
- DVT is the primary cause of fatal and nonfatal pulmonary embolism (PE).

ASSESSMENT FOR DVT
The most important assessment is to obtain a complete health history to include clinical at risk factors.
Patients considered to among the highest at risk of developing DVT are those who have:
- Previous history of venous thrombosis is considered to be one of the strongest indicators that a patient will develop DVT in the future, family history.
- Cancer.
- Have had surgery, orthopedic surgery, especially total hip replacement and total knee replacement.
- Are on extended bed rest.
- Are older.
- Smoke.
- Are overweight or obese.
- Sitting for long periods of time during travel or sedentary lifestyle.
- Taking hormonal therapy or birth control pills.
- Pregnancy postpartum.

SYMPTOMS OF DVT
- About half of the people with DVT get no warning signs.
- Swelling below the knee.
-Redness and tenderness or pain in the area of the clot.
-Soreness or pain when standing or walking, which is usually alleviated with rest and elevation of the leg.
-Ankle enlargement.
-Functional impairment.
-Difference in leg circumference bilaterally.

Homan’s sign test is a physical examination technique taught in many healthcare profession curriculums, typically as a component of lower extremity vascular assessment. Over time, the Homan’s sign has not proven to be a clinically significant physical assessment tool for DVT.

DIAGNOSIS OF DVT
-Ascending contrast venography is considered the most accurate diagnostic test for distal and proximal DVT, the test is invasive.
-Ultrasound is the most common way to confirm a diagnosis of obstruction of the popliteal and those veins proximal to it.
-Impedance Plethysmography measures the volume changes in the leg during temporary occlusion of the venous system, is noninvasive and accurate in detecting obstruction of the proximal veins.

TREATMENT FOR DVT
Treatment is aimed at preventing the clot from getting any bigger, as well as preventing the clot from breaking loose and causing a pulmonary embolism.
-Blood thinners or anticoagulants, they don’t really, thin the blood they just make it less sticky to prevent clots from forming.
-Clot busters- thrombolytics administered by IV to break up blood clots also can be administered directly into the clot.
-Filters may be inserted into the large vena cava in your abdomen to prevent clots from lodging in lungs.
-Compression stockings apply gentle pressure on your legs to keep the blood moving, reduce swelling and relieve discomfort.
PREVENTION OF DVT

- After surgery or prolonged bedrest, try to get moving as soon as possible.
- Keep feet elevated when sitting to make it easier for the blood in your veins to
  flow up toward your heart, also can lessen the swelling and discomfort.
- Exercise to use your muscles to promote blood flow.
- Avoid sitting still, do not cross legs.
- When sitting at your desk stand up and walk around every couple of hours.
- When traveling more than 4 hours avoid tight clothing, drink plenty of water, and
  get up and walk around every couple of hours.
- If up able to get up stretch and move your legs, clench and release your calves
  and thighs or lift and lower you heels with your toes on the floor.
- Lose weight.
- Quit smoking.

Just a few interesting facts I came across

The Homan’s sign has been found to be positive less than 50%.

Physical examination is only 30% accurate for DVT.

Large, extensive thrombi can develop rapidly within minutes.

The embolic risk is highest during the first few days after DVT formation