What AFib Patients Should Know About Deep Vein Thrombosis

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Preventing and Treating DVT

If you have a diagnosis of atrial fibrillation, you have an elevated risk of developing blood clots. In addition to taking medication that controls your heart rate and rhythm, it is likely that you currently take a medication designed to prevent blood clots from forming.

A blood clot may lodge in a superficial or deep vein. The technical term for a blood clot that develops in a vein that is located within the deep tissues of your legs or other body parts is deep vein thrombosis, or DVT.

Why Blood Clots Form

If you have atrial fibrillation, your heart doesn't not contract as rhythmically as it should. Blood may pool and clot. Certain medications, including corticosteroids, such as prednisone, for an inflammatory condition, you have a higher than normal risk of forming blood clots.

Many people who have atrial fibrillation have other cardiac problems. Conditions such as congestive heart failure and heart attack increase the likelihood of DVT formation. If you have problems with the valves within your heart, blood may pool and cause clots to develop.

Atrial fibrillation occurs most frequently as we grow older. With advanced age, or if atrial fibrillation makes you feel dizzy or lightheaded, you may not get enough exercise. Lack of exercise is a risk factor for clot formation. If you take long trips or sit with your legs crossed, your blood may pool in your legs. This can create clots.

Conditions which increase inflammation make the linings of your veins rough, rather than smooth. Small clots can lodge and grow easier than within healthy veins. If you have recently been hospitalized and required the use of intravenous medications, such as potassium, your chances of developing a blood clot may increase.

Several diseases can increase your risk of developing a DVT. Many people who have atrial fibrillation suffer from diabetes, and diabetics have a higher risk of DVT when compared with non-diabetics.

If you smoke or take hormonal medications, such as birth control pills or estrogen replacement therapy, your blood clots more readily than if you are a non-smoker or do not use hormonal medications. Additionally, certain types of blood disorders and cancer increase your chances of getting a clot.

And sometimes, the reason why blood clots form is never determined.

Next page: preventing blood clots and signs and symptoms of DVT.

Blood Clot Prevention

There are many strategies which you may implement to prevent DVT from occurring. They focus on three main factors which prevent clot formation. These include keeping blood flowing well, enhancing vein health, and keeping your blood healthy.

Here are some tips for staying healthy and preventing blood clots from forming:

- Learn the signs and symptoms of DVT (see below) so that you can seek diagnosis and treatment early, should one occur.
- Wear loose fitting clothing so that your blood may flow freely and your blood vessels are not damaged. Pay particular attention to wearing socks that fit properly, and avoid wearing girdles and other constrictive clothing.
- Do not cross your legs while sitting.
- Take frequent breaks when travelling. If you cannot get up and walk around, change your position frequently. Move your legs often and tighten and contract your muscles regularly.
- Get regular exercise. Consult with your health care provider for specific recommendations. If you are bed or wheel chair bound learn how to perform range of motion and other exercises.
- Lose weight if you are overweight in order to reduce pressure on your blood vessels and prevent the development of illnesses which predispose you to DVT formation.
- Consider the use of bioidentical hormone replacement therapies or herbal remedies to relieve menopausal symptoms instead of standard hormone replacement drugs.
- Consider non-hormonal types of birth control.
- If you have diabetes, keep your blood glucose levels tightly controlled.
- Do not smoke.
- Drink adequate amounts of fluids daily.

Signs and Symptoms of DVT

Signs and symptoms may vary depending upon the location of the clot. Clots often form within the valves of veins, particularly in legs.

The clot may become dislodged and travel to other body parts. If it travels to your brain, you may have a stroke. Clots in the lungs are serious. They are referred to as pulmonary emboli. A clot may lodge in your heart, causing a myocardial infarction, heart attack.

If you have a clot which lodges in your lungs, heart, or brain, you need immediate medical assistance. Call for emergency assistance immediately.

You may be eligible to receive a clot dissolving medication if you get help immediately. The medication restores circulation and limits damage caused by the clot.

Signs that indicate a need for emergency medical assistance include, but are not limited to:

- Difficulty breathing
- Chest pressure or pain
- Jaw pain
- Inability to speak
- Weakness on one side of your body
- Changes in consciousness
- Pink frothy sputum

Fortunately, most blood clots occur in the legs and do not cause life-threatening conditions. You may even have a blood clot and not realize it.

Next page: more signs and symptoms of DVT and how DVT is treated.

Signs and Symptoms of DVT

If the clot is in one of your legs, you may notice:

- Swelling of that extremity
- The leg may feel tender or heavy.
- The skin of your leg may feel tense, be reddened, and warm to the touch.
- You may run a fever.

If the clot is located behind your knee or in your calf, you may experience an increase in pain when you flex your foot upward.

Clots in other parts of your body may result in swelling and discoloration of both legs. If the clot is located in one of the large vessels of your upper body, you may experience swelling of your head, neck, back, and arms. Your complexion may be red, blue, purple, or pale.

Treatment of DVT

If you have a DVT, you need to be hospitalized. You require treatment in order to prevent the clot from growing or travelling to your vital organs. You need medications which prevent pain and reduce inflammation.

Medical professionals rely on several techniques to reach a diagnosis of DVT. Expect to be asked about your medical history. A complete physical examination is needed, blood and imaging tests are utilized, an EKG will be performed, and specialized vein studies may be needed.

You will initially be on bedrest. Warm, moist heat may be applied locally if the clot is located in a limb. You will wear a heart monitor and staff will frequently monitor your vital signs and pain level.

Measures will be taken to relieve your discomfort. You will be provided with compression stockings that are designed to enhance the return of blood from your legs.

Heparin will be administered continuously through an intravenous infusion. Blood tests will be conducted frequently so that your heparin can be given at the proper dosage.

Before you are discharged from the hospital, you will learn how to self-administer heparin by using a prefilled syringe with a small needle attached. After discharge, you will administer the medication under your skin, in your abdomen, for an extended period of time.

You will also receive ongoing education about nutrition and measures you need to take to prevent bleeding that may result from heparin therapy.

Eventually you will discontinue the use of heparin. At that point, you will be prescribed warfarin or another drug that prevents blood clots, if you are not already taking it. If you take warfarin, you will need frequent blood tests to ensure that you are receiving the proper dosage.

Other blood thinners, anticoagulants, which require less testing, are available. Your health care provider will select the drug which is best for your particular needs. Anticoagulant medications possess multiple risks and benefits. You will need to be on anticoagulant medication for the rest of your life.

Some people require surgical placement of a tiny filter within a large blood vessel in order to prevent clots from lodging in their lungs. It is a simple procedure, commonly performed without complications.