

Serious complication of post-thrombotic syndrome often causes lengthy disability

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Suresh Vedantham, M.D., FSIR, is an interventional radiologist who treats deep vein thrombosis (DVT). During March's DVT Awareness Month, he discusses the long term affects of a deep vein thrombosis diagnosis. Credit: Society of Interventional Radiology



Deep vein thrombosis (DVT) often brings with it the risk of postthrombotic syndrome (PTS), an under-recognized but serious complication that often causes long-term disability for patients. During March's DVT Awareness Month, the Society of Interventional Radiology wants to help patients and family members to better understand the longterm risks of DVT.

DVT, the formation of a blood clot in a deep leg vein, is a grave condition for which doctors have historically focused on its short-term risks. "For years, if someone developed <u>deep vein thrombosis</u>, his or her care was focused on reducing immediate harm using blood-thinning drugs; however, the prevention of post-thrombotic syndrome, which is actually the primary determinant of a DVT patient's long-term quality of life, had been neglected," said Suresh Vedantham, M.D., FSIR, an interventional radiologist and SIR service line officer. "The evidence is mounting that interventional radiologists may soon transform the way we treat DVT in a way that improves patients' quality of life and prevents the debilitating consequences of post-thrombotic syndrome," said Vedantham, who is professor of radiology and surgery at Washington University School of Medicine in St. Louis, Mo.

Anticoagulants do not actively dissolve a blood clot; they just prevent new clots from forming, he explained. The body will sometimes eventually dissolve a clot, but often the vein becomes damaged. A significant proportion of DVT patients develop irreversible damage in the affected leg veins and their valves, resulting in abnormal pooling of blood in the leg, chronic leg pain, fatigue, swelling, and, in extreme cases, severe skin ulcers.

"For a long time, doctors have believed that the use of compression stockings can prevent PTS; however, a rigorous study of compression stockings, published recently, shows that this is not the case," said Vedantham. On the other hand, a randomized trial evaluating the use of



clot removal with interventional catheter-directed thrombolysis—a treatment performed by interventional radiologists who guide a catheter or specialized device into a leg vein and thread it into the vein containing the clot and a "clot-busting" drug is infused directly into the clot—found a significant reduction in PTS. Since catheter-directed thrombolysis is most effective when performed within 14 days after DVT symptoms begin, he recommends that a second opinion from an interventional radiologist be sought if <u>leg pain</u> and swelling continue beyond seven days after treatment is started. "Individuals who received these treatments experienced fewer long-term symptoms and significantly less time lost from work," said Vedantham, who is also the principal investigator for the National Institutes of Health-sponsored ATTRACT Trial, the most rigorous U.S.-based study of these new treatments.

Provided by Society of Interventional Radiology

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