



HOLY FAMILY  
PARISH

## PARISH NURSE MINISTRY NEWSLETTER

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### Blood Clots That Kill

*Here's How to Lower Your Risk and recognize the symptoms*

Blood clots – jellylike masses of protein, blood cells, and platelets – can be life-saving when they stop bleeding caused by an injury. But they can be deadly if they form where they aren't needed. A clot in a vein close to the skin's surface causes a burning or itching sensation yet typically doesn't lead to serious problems. But a clot that develops in a vein deep in the lower abdomen and legs can interfere with blood flow, often causing swelling and inflammation. Called deep-vein thrombosis (DVT), it can also break up and form emboli (clots that travel through the bloodstream) that can lodge in the lungs. Those pulmonary emboli can lead to severe organ damage and death. Up to 100,000 People die each year in the U.S. from a pulmonary embolism, according to the Centers for Disease Control and Prevention. The good news is that most blood clots are preventable and can usually be treated if discovered early.

**The Danger.** Every year, as many as 600,000 people in the U.S. experience DVTs and clots in the lungs. DVT refers to clots that occur in the lower leg, thigh, or pelvis. When clots occur in the arms or other areas, they're usually referred to simply as venous thrombi. The biggest danger is that portions of DVTs can break off and travel through the bloodstream. If the traveling clots, or emboli, lodge in the lungs they can block flow and cause pulmonary infarction (tissue death) – serious condition that can severely compromise lung function. Untreated pulmonary emboli lead to death in about 30 percent of cases, so it's urgent to seek prompt medical care.

**Who's at Risk?** A number of situations can increase your risk. They include: sitting for longer than 6 to 8 hours, limited mobility due to a medical issue, surgery, or paralysis, having an injured vein from a bone fracture, severe muscle injury, trauma, or major surgery (especially involving the abdomen, pelvis, hip, or legs). Having a tube placed in a vein for medication or other treatment, such as a central venous catheter. Having heart failure or cancer in the abdomen. Having previously suffered a clot or having a family history of blood clots. Being pregnant, taking birth-control pills, or taking prescription hormones for menopause symptoms. Being older than 60, being overweight or obese, having high blood pressure, or being a smoker. Having certain genetic disorders, such as Factor V Leiden.

**Recognizing Symptoms.** See your doctor promptly if you have unexplained swelling, pain, tenderness, or redness in an arm or leg as they could be signs of a dangerous clot. A clot in the lungs is more serious because it can quickly become deadly. Signs include difficulty breathing, a rapid or irregular heartbeat, chest pain or discomfort, coughing up blood, and feeling faint. If you have any of those symptoms, go to an emergency room or call 911. Since most people who die from a lung clot succumb within a few hours after symptoms surface, prompt treatment is essential. It can be tricky to determine deep-vein thrombosis or pulmonary embolism because other conditions can cause similar symptoms, like muscle strains and tendon tears in the calf of the leg and the symptoms indicating pulmonary embolism can also be due to a heart attack or pneumonia. Your doctor will need to run special tests, a blood test known as D-dimer and ultrasound to assess the flow of blood in the veins, computerized tomography (CT) scan, and a pulmonary angiogram. If you are allergic to the dye used in an angiogram, a nuclear lung perfusion scan can be done instead.

**Treatment.** If you have deep-vein thrombosis, your doctor will probably prescribe an intravenous anticoagulant (clot-preventing) medication lasting a few days. Then, you may be changed to self-injections of heparin and warfarin, which takes two or three days to work, but once it becomes effective your doctor may stop heparin and have you continue warfarin for several months or longer. Your doctor can try suction to remove the clot or deliver thrombolytic medication through the catheter to dissolve it. Compression stockings may also be used to prevent further blood clots after suffering a DVT, and after surgery that might require bed rest. For more information go to [www.bloodclots.com](http://www.bloodclots.com).

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**To contact Holy Family Parish Nurse call 330-688-6412 ext. 462. or for other articles go to [www.holyfamilystow.org/Parish Nurse](http://www.holyfamilystow.org/Parish Nurse), or visit Holy Family Lower Church Hall Parish Nurse Bulletin Board for other updated and new health information.**