

DVT Prevention

Why graduated compression stockings?

Your doctor may prescribe compression stockings because they provide a graduated pressure that is more firm at the bottom and becomes lesser at the top of the stocking or sock. This graduation aids in improved blood flow back to the heart because gravity and pressure make it difficult for the blood to flow in an upward direction.

Why SIGVARIS?

SIGVARIS is the world's leading manufacturer of ready-to-wear graduated compression stockings and socks. Our product was originally designed by a physician. SIGVARIS offers many natural fiber options and, all of SIGVARIS fibers are double wrapped providing you a durable stocking or sock that is also easier to apply and remove. SIGVARIS prides itself in providing a comfortable fit due to our Precise Fit Sizing™ system which takes into account specific circumference measurements, as well as specific lengths.



Remember, DVT's can be prevented and managed and when they are, the complications can be reduced or even eliminated!

The SIGVARIS Difference

- The SIGVARIS Medical Therapy Collection is designed according to our unique Precise Fit Sizing™ System to ensure correct fit and accurate compression, for optimum therapeutic results and user compliance
- The SIGVARIS Support Therapy Collection is designed with controlled graduated compression and can be purchased without a prescription
- The use of double-covered premium yarns provides superior wearing comfort, durability and easy donning
- Two-way stretch construction to facilitate application over the instep and the heel
- Fashionable styles to meet different lifestyle needs, including travelers and pregnant women



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For a certified SIGVARIS dealer near you, please visit
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Sources: ¹Brandjes DP. Et al. Lancet 1997, American Public Health Association White Paper: Deep Vein Thrombosis: Advancing Awareness to Protect Patient Lives, February 26, 2003, US Surgeon General Office: www.surgeongeneral.gov, American Venous Forum: www.venous-info.org, Venous Disease Coalition: www.venousdiseasecoalition.org, Vascular Disease Foundation: www.vdf.org.

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**Are You At Risk
for DVT?**

Are You At Risk for DVT?

DVT [deep vein thrombosis] is a blood clot that usually forms in the deep veins of the lower leg, or calf which can block the flow of blood. A DVT may cause leg pain or swelling, but can also present with no symptoms. DVT is not usually life threatening, but it can be if the blood clot breaks loose and goes into the lungs. This is known as a pulmonary embolism (PE).

Generally, a DVT is caused by a combination of two out of three underlying conditions:

1. slow or sluggish blood flow through a major vein,
2. a tendency for a person's blood to clot quickly, a condition that sometimes runs in families, and
3. irritation or inflammation of the lining surface of the vein.

You might be at high risk for DVT, or you may find yourself in a high risk situation, such as an injury to a vein, a long surgical procedure, a heart attack or stroke, prolonged periods of inactivity, or bleeding and shock. Other conditions that may play a role include a history of smoking, high blood pressure, congestive heart failure, obesity, chronic respiratory failure, some cancers, varicose veins, pregnancy, and estrogen treatment.

DVT risk factors:

- Prolonged sitting or restricted mobility such as long-distance travel
- Age over 40
- Surgery [especially orthopedic] or major injury
- Excessive weight
- Sedentary lifestyle
- Smoking
- Varicose veins
- High estrogen states, such as in pregnancy or when using birth control pills
- Cancer
- Prolonged bed rest or immobility

Did You Know?

- 74% of adults have little to no awareness of DVT
- More people die each year in the US from DVT complications than motor vehicle accidents, breast cancer and AIDS combined.
- A pregnant woman is 5-6 times more likely to develop DVT than a non-pregnant woman
- 40% of DVT patients will develop more blood clots within 1-2 years
- **Wearing compression stockings or socks reduces the risk of DVT or complications by 50% ¹**

DVT Diagnosis

Diagnosis of a DVT can be quickly made with a simple ultrasound scan that is painless and risk-free. A specific blood test may be performed to measure "D-dimer" which is a sign of recent clotting. Early diagnosis and treatment greatly reduces your risk of serious complications. There are other tests that your physician may recommend depending on your medical history.

The risk factors are cumulative – the more you have, the greater your risk. You and your doctor can work together in high risk situations to reduce the onset of DVT and PE.

DVT symptoms:

- Nearly 50% of all DVT cases have NO recognized symptoms
- Leg pain & tenderness
- Swelling in calf muscle, ankle, foot or thigh – especially in one leg
- Skin that is warm to the touch
- Redness



Complications of a DVT

About one-third of patients with DVT, develop a long-term complication known as post-thrombotic syndrome (PTS). This condition can show up as chronic pain, swelling and discoloration of the leg, as well as the development of open ulcers, caused by the damage that is done by the clot to valves in the veins. The likelihood of another clot forming is high once you have had a DVT. The effects of PTS are long lasting and can lessen one's quality of life.

Another complication from a DVT is the condition known as pulmonary embolism (PE) which is when the clot breaks loose and travels through the vessel to the arteries located in the lungs, which is a potentially fatal condition if it significantly blocks blood flow through the lungs.

You can prevent DVTs by:

- Exercising regularly, including stretching and leg movement when travelling
- Smoking cessation
- Maintaining a normal body weight
- Eating a healthy diet
- Wearing compression stockings or socks, which reduces the risk of DVT or complications by 50% ¹



Ask your doctor if you are at risk for a DVT

