

# NEURO BATTLE AGAINST DEEP VEIN THROMBOSIS

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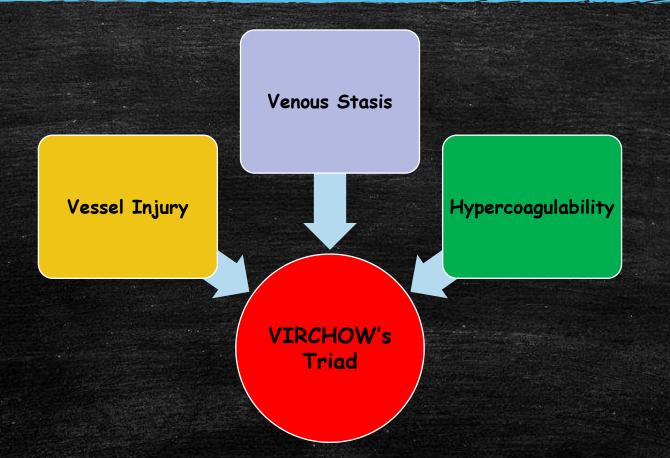
#### INTRODUCTION



Deep vein thrombosis (DVT) is the formation of clots in the deep venous system of the body and primarily affects the large veins in the lower leg, thighs, and can also occur in deep veins of the arms and pelvis. In this poster we speak about literature review and preventive measures as well as our hospital management protocol in preventing DVT.

#### **PATHOPHYSIOLOGY**





#### DVT IN NEUROSCIENCES



The incidence of DVT in neurosurgical cases vary significantly from 7.9% to 29%.

In Neurosurgery, the highest risk for DVT is in patients with brain tumors (28-43%), followed by patients undergoing craniotomy (25%), and those with head injury (20%).

Among brain tumors, patients with cerebral metastasis and glioma have the highest incidence of DVT especially in supratentorial and suprasellar locations.



#### Our study data and results

- ❖ Total no. cases till DEC 2021 after exclusion is 5430. Medical- 2000, surgical 3430.
- Among surgical, vascular cases 320, cranial tumor 1444, spinal cases 1285, shunted- 146, others 168. Well's score low risk 780, high risk 4650.
- D-dimer screening done in all medical cases on day of admission for medical cases and on
  first POD in surgical cases
- LMWH given in 5190 (given within 48 hrs of surgical cases exception in ICH), Pneumatic cuff pump 240 exclusive in ICH and 4110 in high risk and economical patients. Compression stocking in low risk and non economical patients 1320
- All patients mobilized on first POD in surgical patients and medical patients exception being hypotension, unstable spinal fractures, ventilator patients.
- Till date only 15 cases has been documented with DVT in our institute.





WELL'S SCORE	HIGH RISK/LOW RISK			
HISTORY TAKING	SMOKING/ALCOHOL/ORAL CONTRACEPTIVE PILLS			
CENTRAL LINE	YES/NO			
D-DIMER SCREENING	<2mg/L, >2mg/L/			
USG DOPPLER SCREENING ON DAY 1 ON THE EXIT OF ICU WEEKLY SCREENING ON EVERY SEVENTH DAY	YES /No			
CLINICAL EXAMINATION DURING THE STAY DAILY	SWELLING IN THE LIMB, WARMTH, TENDERNESS, HOMAN"SIGN			



## Cont....



DVT	COMPRESSION STOCKING	Y/N		
PROPHYLAXIS:	PNEUMATIC CUFF PUMP	Y/N		
	HEPARIN	y/N		
DVT DIET	YES/NO			
NO.OF DAYS STAY IN ICU	<3DAYS ,3-7DAYS, >7DAYS			
EARLY. MOBILIZATION OF PATIENT WITHIN THREE DAYS	YES/NO			
IF DVT, THEN MT	MEDICAL/SURGICAL			
AT TIME OF D/S, DVT	YES/NO			









Leaders in Neuro Care	7500 00 0	MONITORING CHART		2701	
Patient Name :			Age/S	ex:	
UHID :		IP NO :			
Dept :	Con	sultant Name:			
Date :	Diagnosis:				
AGE SPECIFIC GROUP		BUILD / BODY MASS	INDEX (BM	I) Wt(kg) / Ht(m	
Years	Score	Build	ВМІ	Score	
10-30	0	Underweight	16-18	0	
31-40	1	Average/ Desirable	20-25	1	
41-50	2	Overweight	26-30	2	
51-60	3	Obese	31-40	3	
61+	4	Very obese (morbid)	41+	4	
MOBILITY		SPECIAL RISK CATEGORY			
Score Item	Score	Oral Contraceptives:			
Ambulant	0				
Limited (uses aids, self)	1	Score Item		Score	
Very limited (needs helps)	2	20-35 years		1	
Chair bound	3	35+ years		2	
Complete bed rest	4	Pregnancy/ Puerperiun	n	3	
TRAUMA RISK CATEGORY Score item(s) only preoperatively.			SURGICAL INTERVENTION Score only one appropriate surgical intervention		
Score Item	Score	Score Item		Score	
Head injury	1	Minor surgery < 30 min	IS	1	
Chest injury	1	Planned major surgery		2	
Spinal injury	3	Emergency major surg	ery	3	
Pelvic injury	3	Thoracic		3	
Lower limb injury	4	Abdominal		3	
and description of the second		Urological		3	
		Neurosurgical		3	
		Orthopaedic (below wa	ist)	4	
HIGH RISK DISEASES:		ASSESSMENT PROT	OCOL		
Score the appropriate item(s)		Score Range	Risk	Categories	
Score Item	Score	≤ 6		No risk	
Ulcerative colitis	1	7 - 10		ow risk	
Anaemia: Sickle Cell	2	11 - 14	Mod	derate risk	
Haemolytic	2	≥5	+	ligh risk	
Polycythaemia	2				
Chronic heart disease	3	SCORING:			
Myocardial infarction	4	Identify appropriate items, add and record below:			
Malignancy	5 6				
Varicose veins					
Cerebrovascular accident	6 7				
Previous DVT	/	Assessor			
		Date			
		Score			

### CONCLUSIONS



Hereby we conclude that in neuroscience cases DVT incidences are high as reported in literature and we formatted a DVT protocol chart and follow these steps strictly, hence DVT in our centre is less than one percentage. We place this topic in this forum, to create awareness of neuro battle against DVT.