

Post thrombotic syndrome

What treatments are available for PTS?

Overall, no drug has been shown to be of major benefit for treating PTS. The following measures may help:

- Leg elevation: elevating the leg above the level of the heart decreases pressure in the veins, and should be done for 30 minutes or longer at least 3 times per day.
- Weight reduction: increased weight puts more strain on the veins.
- Exercise (ankle flexion, walking): to increase calf muscle strength and promote venous blood return.
- Elastic Compression Stockings (ECS): improve blood flow from the leg back to the heart and decrease leg swelling and pain. If stockings are used, knee length and thigh length ECS have similar physiologic effects; knee length are easier to apply, more comfortable and less costly.
- Intermittent pneumatic compression devices: devices that put pressure on the leg improve blood flow. They are effective for moderate to severe symptoms of PTS.
- Skin care, moisturizers and, if needed, a mid-potency topical corticosteroid: help to treat dry skin, itching, and eczematous changes.
- Pain killers: pain medications that increase the risk for bleeding when taken regularly should not be used. Consult your treating practitioner.
- Surgical or endovascular treatments: have only been evaluated in small patient series at specialized centers and appear to be of limited value.

How do I know that it is PTS not a new clot?

It is often difficult to distinguish a new deep vein thrombosis from PTS, but if you experience a sudden onset of increased leg swelling and/or pain, you should seek urgent medical advice.

It is important to report any sudden changes in the leg affected by PTS so that a new DVT can be excluded by your doctor. Blood tests and an ultrasound scan can be done to rule out a new DVT.

If you have any further questions or concerns, please speak to the doctor, pharmacist or nurse looking after you.

For more information and assistance, feel free to contact the anticoagulation services staff at:



Patient and Family Education

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What is post thrombotic syndrome?

Post thrombotic syndrome (PTS) is a problem that can develop in nearly half of all patients who experience a deep vein thrombosis (blood clot) in the leg.



How do I know if I am at risk of developing PTS after having deep vein thrombosis?

It is not possible to predict who will develop PTS. Some patients will develop symptoms in the first six months following a DVT, in others it may take up to two years or longer. Some will not develop PTS.

Here are things that make it more likely for someone to have PTS

- Having an extensive deep vein thrombosis (blood clot above the knee) this term is usually referred to as proximal DVT, not extensive
- Having recurrent deep vein thrombosis (more than 1 blood clot in the same leg)
- Still having blood clot symptoms 1 month after being diagnosed with deep vein thrombosis
- Being obese
- Older age
- Having varicose veins
- Having trouble maintaining target blood thinner levels during the first 3 months of treatment

What are the signs and symptoms of PTS?

The signs and symptoms of PTS are individual to each person. They may be present in various combinations and may be persistent or intermittent. Typically, symptoms are aggravated by standing or walking and improve with resting; leg elevation and lying down.

Signs and symptoms of PTS include leg pain, cramps, swelling, heaviness, tingling (feeling of pins and needles) and itching. Other signs include varicose veins, redness, and dark discoloration (hyper-pigmentation). Skin ulceration may be seen in severe, untreated cases.

Can PTS be prevented?

The best way to prevent PTS is to prevent the blood clot from occurring in the first place.

Some patients have a higher risk of getting blood clots, especially patients in the hospital who have had recent surgery or are confined to bed. Such patients are usually prescribed medicine or compression devices to prevent blood clots while in the hospital and even after discharge. Ask your doctor if you need blood clot prevention if you are admitted to the hospital and your blood thinner is interrupted.

If you suffer a blood clot, preventing a recurrence by receiving a blood thinner of appropriate intensity and duration may help prevent PTS.