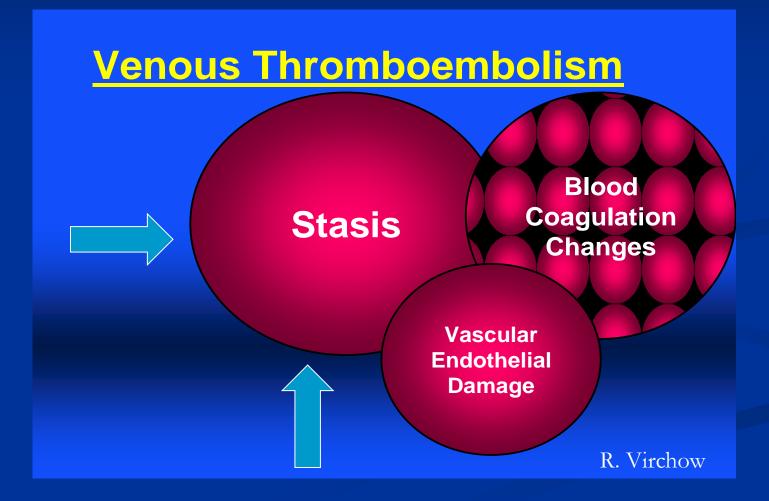
Place de la compression médicale dans la prévention et le traitement des thromboses veineuses profondes des membres inférieurs Hugo Partsch

JIFA, Paris, Feb 2013

Compression= Basis of mechanical prophylaxis



80 8.0 FFS 24 OSP /24

emuluuuuluuuuluuuuluuuuluuuul 5 cm

SUPINE POSITION Lower leg

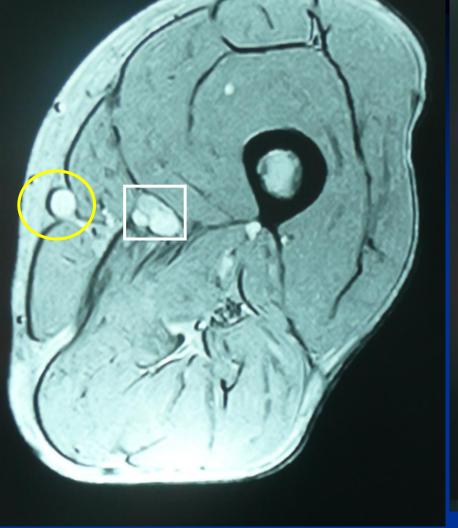
SG 550/21.0 FA:17 180 8.0 FFS k224 OSP 10/24

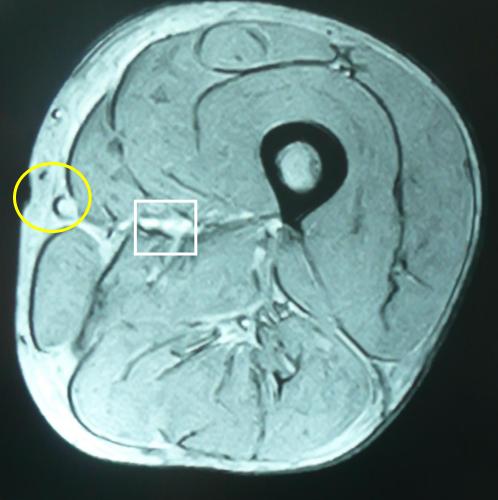
No compression



Partsch H et al. Int Angiol. 2010 Oct;29(5):408-10

Stocking 18 mm Hg





Struwa® thigh stocking, local pressure 6 mm Hg

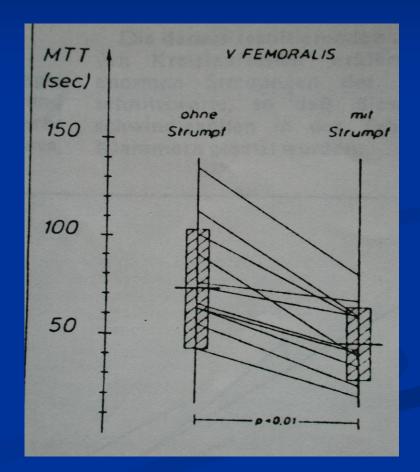
No compression

SUPINE POSITION Upper leg

Increase of venous flow velocity (Mean transit time)

 Thrombo-prophylaxis Stockings (15 mmHg), thigh-long

 Venous flow velocity x 1,5



Partsch H, Kahn P. Klinikarzt 1982;11.609-13

(n=11)

TPS stockings effective?

Inspite of some experimental evidenceEvidence from clinical studies decreasing for stockings

CLOT I*: in stroke patients stockings are ineffective
CLOT II**: Thigh length better than knee length
CLOT III***: IPC still ongoing

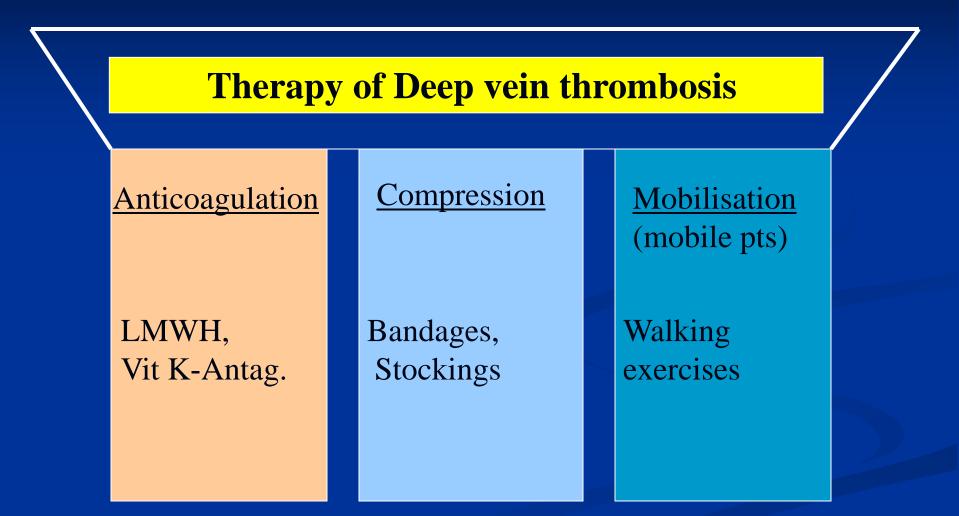
*Lancet. 2009; 373: 1958-1965 **Ann Intern Med. 2010; 153:553-562. ***Trials 2012, 13:26

ACCP, Chest 2012

In surgical high risk patients...

we suggest that mechanical prophylaxis with elastic stockings (ES) or IPC should be added to pharmacologic prophylaxis (Grade 2C).

in high risk for major bleeding complications we suggest use of mechanical prophylaxis, preferably with IPC, over no prophylaxis until the risk of bleeding diminishes and pharmacologic prophylaxis may be initiated (Grade 2C).



Compression + walking

In patients with acute symptomatic DVT of the leg, we suggest the use of compression stockings (Grade 2B).



Supplement

ANTITHROMBOTIC THERAPY AND PREVENTION OF THROMBOSIS, 9TH ED: ACCP GUIDELINES

Antithrombotic Therapy for VTE Disease

Antithrombotic Therapy and Prevention of Thrombosis, 9th ed: American College of Chest Physicians Evidence-Based Clinical Practice Guidelines

Clive Kearon, MD, PhD; Elie A. Akl, MD, MPH, PhD; Anthony J. Comerota, MD; Paolo Prandoni, MD, PhD; Henri Bounameaux, MD; Samuel Z. Goldhaber, MD, FCCP; Michael E. Nelson, MD, FCCP; Philip S. Wells, MD; Michael K. Gould, MD, FCCP; Francesco Dentali, MD; Mark Crowther, MD; and Susan R. Kahn, MD

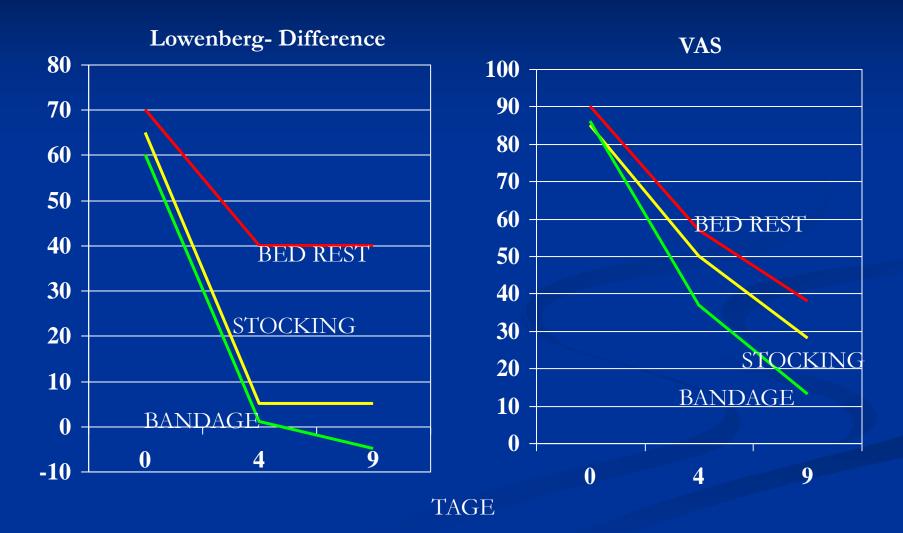
CHEST 2012; 141(2)(Suppl):e4195-e494S

Immediate compression+ walking in acute DVT

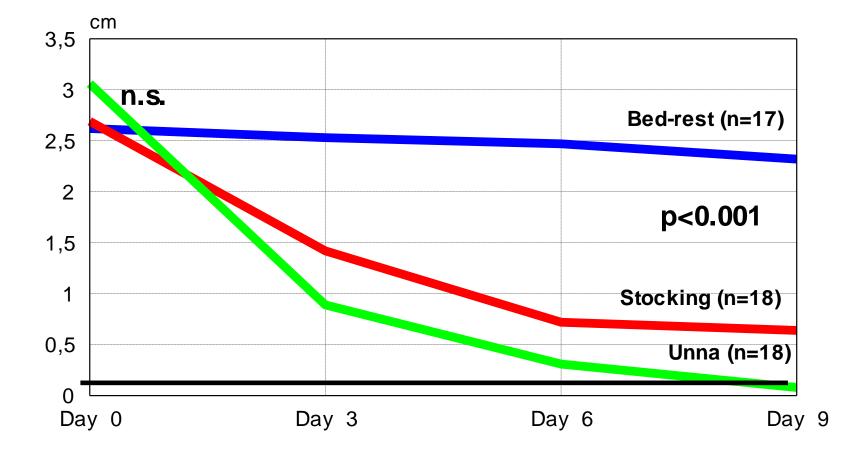
Faster reduction of pain
Faster reduction of swelling
Faster improvement of QOL

Blättler W, Partsch H. Int. Angiol. 2003;22:393-400

Faster pain-reduction



Difference of leg circumference (cm)



Why are mobile patients with DVT still put into bed?

FEAR OF PULMONARY EMBOLISM

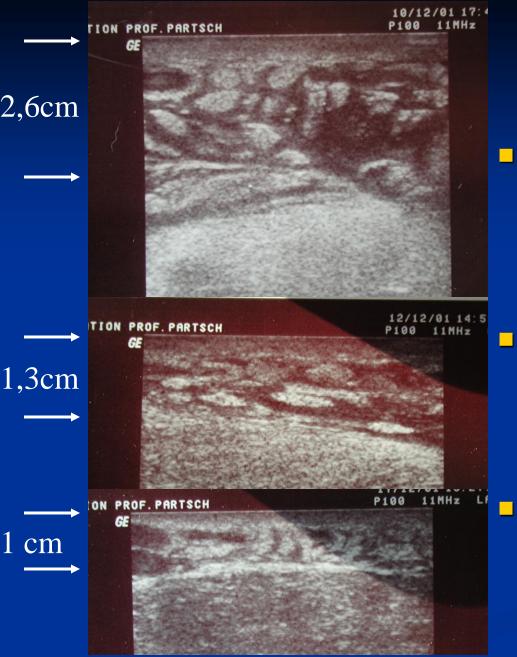
1289 consecutive patients with DVT (28 % pelvis, 53% thigh, 19% leg)

1.Pulmonary emboli	53% proximal DVT
(V/Q-scan)	35% distal DVT
2. New emboli	6-7% proximal DVT
(asymptomatic, V/Q-scan)	3% distal DVT
3.Fatal events	17 (12 malignoma,
(all autopsy)	3 PE, 2 cardiac)
4. Malignant disease	24% iliac, 17% thigh,
	10% leg
	1/3 newly detected !
5. Major bleeding	1 %
HIT II	3 ‰ VASA 2001;30:195

1289 consecutive patients with DVT (28 % pelvis, 53% thigh, 19% leg)

1.Pulmonary emboli	53% proximal DVT
(V/Q-scan)	35% distal DVT
2. New emboli	6-7% proximal DVT
(asymptomatic, V/Q-scan)	3% distal DVT
3.Fatal events	1.3%
(all autopsy)	PE: 0,16%
4. Malignant disease	24% iliac, 17% thigh,
	10% leg
	1/3 newly detected !
5. Major bleeding	1 %
HIT II	3 % VASA 2001;30:19

How does compression work?



Oedema

Water filled clefts

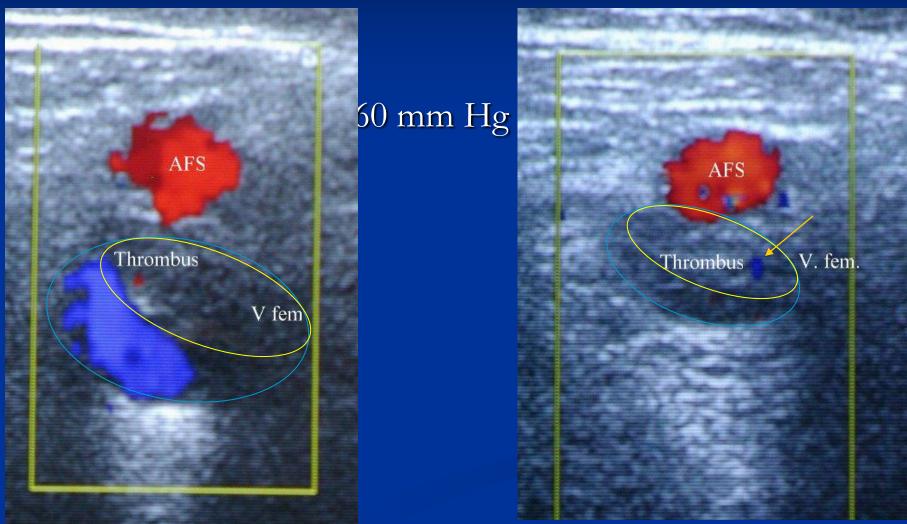
 After 2 days compression: (Reduction of calf circumference: 6,5 cm)

After 7 days compression (Reduction of calf circumference: 12 cm)

Thigh compression

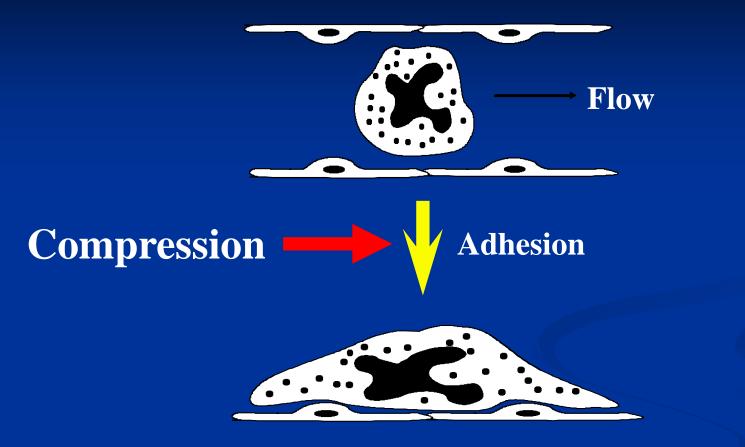


Thigh compression (thrombus in femoral vein)



Partsch H et al . J Vasc Surg 2002;36:948-52

How does compression work?



Prevention of adhesion of neutrophils and monocytes

Ph Coleridge Smith

 DVT is not just a clot occluding a vein
 Inflammatory process in the vein wall and in the adventitia

Henke PK, Wakefield T. Thromb Res. 2009;123 Suppl 4:S72-8

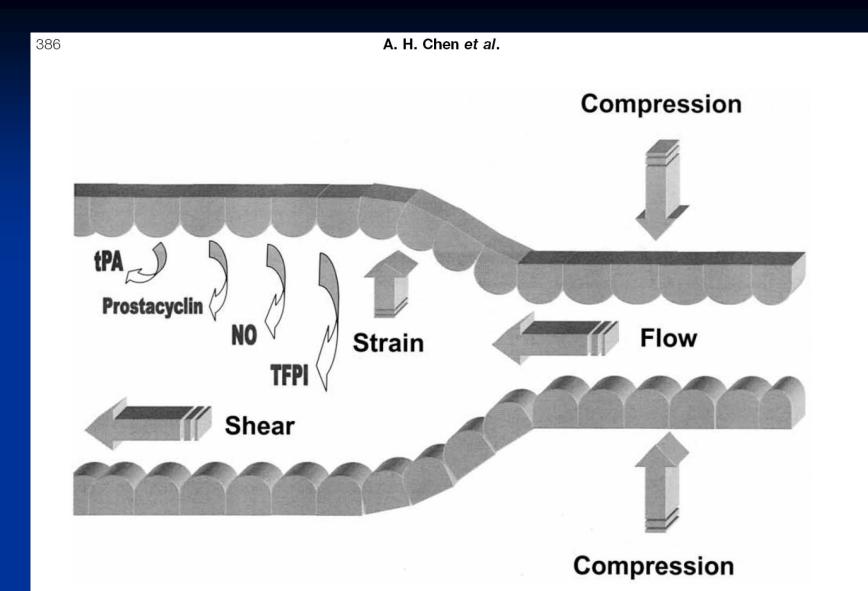


Fig. 1. Mechanical effects of pneumatic compression on a vein or artery. The pneumatic compression increases intravascular flow, shear and compressive strain on endothelial cells with the resulting release of biochemical mediators. tPA: tissue plasminogen activator; NO: nitric oxide; TFPI: tissue factor pathway inhibitor.

Eur J Vasc Endovasc Surg **21**, 383–392 (2001)

Stocking or bandage?

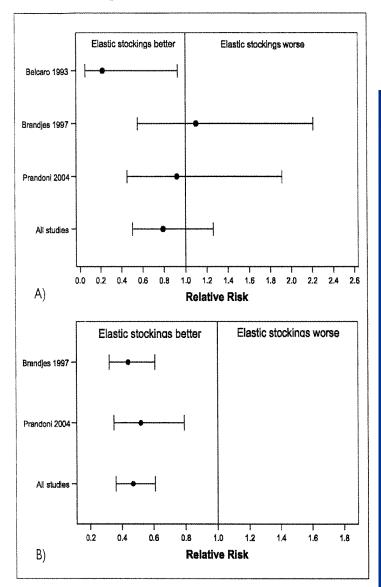
Short stretch bandage

- Pressure >60 mmHg
- Thigh -swelling
- Well tolerated during night
- But:
- Training needed

Compression stocking
Lower pressure
Effective against oedema
Unpleasant during night

Can be handeled also by non-experts

Review on the value of graduated elastic compression stockings after deep vein thrombosis



Kakkos S et al Thromb Haemost 2006;96:441

Recurrence of DVT is NOT reduced

Development of PTS is reduced

Conclusions Conservative therapy of acute DVT

- Compression in addition to exact anticoagulation
- Keep walking patients with DVT walking
- Compression stockings reduce pain and edema
- Continue stockings to prevent PTS, at least for 1-2 years

Medicine

Science

Anti-Coagulation



Surgery

Experience

Anti-Stasis

Don`t forget Virchow