ABSTRACT

INTRODUCTION

Deep vein thrombosis [DVT] is one of the most dreaded complications in post-operative patients as it is associated with considerable morbidity and mortality. The autopsy studies document that 50% of all patients dying in hospital have DVT. Around 10–30% of these patients have pulmonary embolism secondary to proximal DVT. Majority of patients with postoperative DVT are asymptomatic. Its complications like pulmonary embolism can be lethal.

AIM AND OBJECTIVES OF THE STUDY

To study about incidence and risk factors the deep vein thrombosis in asymptotic patients after prolonged surgery in our institution.

MATERIALS AND METHODS

This is a prospective study conducted in the department of General surgery, GOVERNMENT STANLEY MEDICAL COLLEGE FORM (NOV-2016 TO AUG 2017). All patients who underwent elective or emergency operations with duration more than 2 hours are included in the study. Sample size was 100.
EXCLUSION CRITERIA:

1. Patient who underwent cardiac or vascular operations.
2. Patients who have symptoms suggestive of DVT such as unilateral lower limb edema and calf muscle pain.
3. Patients who ever took anticoagulant such as warfarin, aspirin and clopidogrel during one week before hospital admission.
4. Patients who suffered from pre-operation DVT.
5. Uncorrectable coagulopathy.
6. Patient is on heparin.

RESULTS AND CONCLUSIONS

Out of 100 patients, incidence of asymptomatic DVT was found to be 2 percent. In both the cases duration of surgery was found to be more than three hours & patient was immobilized for three days. The risk factors were found to be prolonged duration of surgery and immobilization in both the cases.

Recommendations: For patients who undergo surgery for prolonged duration (especially > 3 hours) and prolonged immobilization (> 2 days), it is recommended to screen them with Doppler for incidence of DVT along with appropriate DVT prophylaxis in the post op period to avoid morbidity & mortality associated with unforeseen and asymptomatic deep vein thrombosis.

KEYWORDS

Asymptomatic DVT, Deep vein thrombosis, pulmonary embolism, low molecular weight heparin, prolonged surgery.