Deep vein thrombosis – online methods of patient education

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Abstract
The authors present some of the most important online patient information methods on all aspects of deep vein thrombosis of the lower limbs and, in particular, the diagnosis using Doppler ultrasound (easy-to-understand articles, brochures, guides, patient page, frequently asked questions, illustrations, forums, blogs).

Keywords: patient education; websites; deep vein thrombosis.

Rezumat
Autorii prezintă câteva dintre cele mai importante metode online de educaţie pentru sănătate a pacienţilor, referitoare la toate aspectele trombozei venoase profunde a membrelor inferioare şi, în special, la stabilirea diagnosticului cu ajutorul ultrasonografiei Doppler (articole uşor de înţeles, broşuri, ghiduri, pagina pacientului, întrebări frecvente, ilustraţii, forumuri, bloguri)

Cuvinte cheie: educaţia pacientului, internet, tromboză venoasă profundă

The presence of a thrombus within a deep vein of the calf or proximal leg is called deep venous thrombosis of the lower extremity (DVT). Some conditions are associated with an increased thrombotic risk (major surgery, fractures, immobilization, previous venous thromboembolism, thrombophilia, malignancy, chemotherapy, congestive heart failure, stroke, obesity, and increasing age). Because the clinical features are not specific, plasma D-dimer assays and compression ultrasonography are commonly used for diagnostic evaluation. The prevention of DVT consists of mechanical and pharmacologic modalities depending on the thrombotic risk (low, moderate, high, and very high). The treatment of the proximal and distal DVT uses, in fact, the same mechanical and pharmacologic methods: deambulation, bandages then graduated compression stockings, low-molecular weight heparin or pentasaccharides, followed by vitamin K antagonists [1,2].

All DVT patients must understand and manage their disease. There are many online methods providing easy-to-understand information about deep vein thrombosis (risk factors, screening for increased thrombotic risk, symptoms, laboratory testing, imaging techniques – compression ultrasonography, complications, prophylactic strategies, and treatment). Some websites offer information about Doppler examination technique and diagnostic criteria of DVT [3-6].

A possible classification of the main methods of patient education regarding DVT is the following: easy-to-read articles, handbooks, pamphlets, brochures, handouts, information sheets, information leaflets, patient guides, patient page, frequently asked questions, questions and answers, chat transcripts, quizzes, joining a clinical trial, video podcasts, slide shows, images, forums, blogs, and patient story. Some examples of each category are listed below.
Easy-to-read articles:

Handbooks:

Pamphlets:

Brochures:

Handouts:

Information Sheets/Information Leaflets:

Patient Guides:

Patient Page:
- http://circ.ahajournals.org Circulation > Search > Patient Page (or http://circ.ahajournals.org/cgi/search?journalcode=circulationaha&fulltext=patient+page) > Cardiology Patient Pages: Pulmonary Embolism and Deep Vein Thrombosis (Circula-
Deviating from the natural reading, the text pertains to "Deep vein thrombosis – online methods of patient education" and lists various resources such as JAMA (The Journal of the American Medical Association), Mayo Clinic, PreventDVT.org, JAMA, ClotCare.com, RealAge.com, WebMD, ClinicalTrials.gov, and Cleveland Clinic. It also includes links to educational materials, quizzes, chat transcripts, and video podcasts. The resources cover topics from symptoms and diagnosis to frequently asked questions, quizzes, and joining clinical trials. The document emphasizes the importance of online resources in patient education, particularly in the context of deep vein thrombosis.
As mentioned above, all these online resources provided by national institutes, scientific societies and associations, universities of medicine, health foundations, medical journals, magazines are very useful for all English speaking DVT patients.

**Conflict of interest:** none
References


