UNDERSTANDING THROMBOPHILIA

What is thrombophilia?

Thrombophilia is a medical condition marked by an increased tendency for blood clotting. Thrombophilia can cause a deep vein thrombosis (DVT), or a blood clot in the deep veins of a person's leg or arm. A DVT can grow larger or break off and travel to the lungs, where it becomes a pulmonary embolism (PE).

Thrombophilia may be acquired or genetic.

Acquired thrombophilia is due to factors that are acquired or occur during life. These risk factors include:

- Surgery, hospitalization
- Pregnancy
- Estrogen-based contraception, hormonal therapies
- Prolonged immobility
- Obesity
- Certain medical conditions like cancer, diabetes, and some autoimmune disorders

Inherited thrombophilia involves genetic mutations that affect clotting factors and are inherited or passed from parents to their children.

About 5-8% of the U.S. population is affected by genetic thrombophilia.

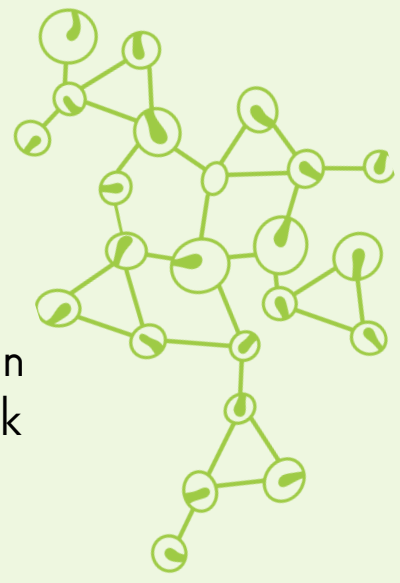
Some of the most common types of thrombophilia:

Factor V Leiden Mutation:

- Mutation in factor V gene
- Increases clotting risk 7-20 times
- Common in U.S. and European populations

Prothrombin Gene Mutation (G20210A):

- Elevated prothrombin levels
- More prevalent among Caucasians and Southern Europeans



Protein C and S Deficiencies:

- Proteins C and S crucial for clot regulation
- Deficiencies in either increase clotting risk

Antithrombin Deficiency:

- Rare but highest clotting risk
- No racial or ethnic patterns in prevalence

When individuals with a genetic clotting disorder also experience acquired risk factors, their clotting risks can increase dramatically. For example, if a woman has a genetic clotting disorder like factor V Leiden and also uses hormonal contraception her clotting risk is 35 times greater.

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