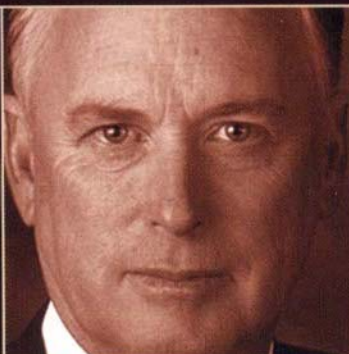


ROCK STAR.
POLITICIAN.
FBI PROFILER.

What do they have in common?

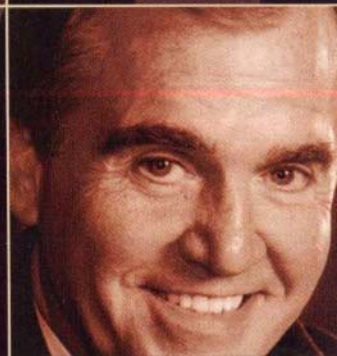
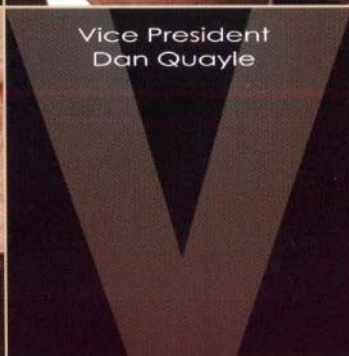
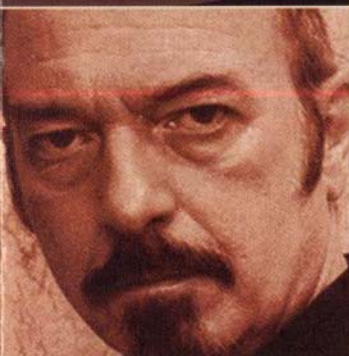
D

Ian Anderson
of Jethro Tull



Vice President
Dan Quayle

Former FBI Agent
John Douglas



A mutual desire to defeat...

Deep Vein
Thrombosis

Three DVT Survivors Take Action

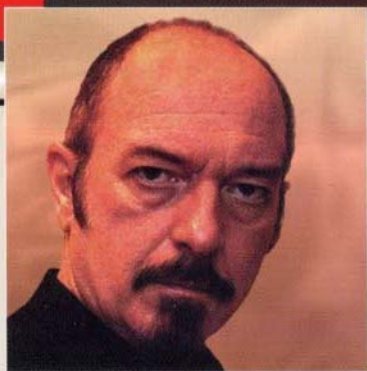
These well-known men may have led very different lives, but Jethro Tull's **Ian Anderson**, Vice President **Dan Quayle**, and former FBI Agent **John Douglas** have all come face-to-face with a killer: deep vein thrombosis (DVT). You may not have heard of it—in fact, neither had they. That's why these survivors have joined together to educate other unsuspecting victims about DVT, a potentially life-threatening condition that occurs in approximately 2 million Americans each year.

What is DVT?

Deep vein thrombosis (DVT) is the formation of a blood clot in a deep vein, usually in the leg or pelvis. Invisible to the eye, these veins lie near the bone, surrounded by muscle.

Depending on its size, the semi-solid blood clot may restrict blood flow through the vein, causing an array of leg symptoms such as pain, swelling, warmth and discoloration. But in many cases, there are no symptoms at all.

Then there's the potential complication—pulmonary embolism. Should a fragment of the clot detach, the circulating blood will carry it to the lungs where it can obstruct one of the narrow arteries that carry blood through the lungs for oxygenation.



IAN ANDERSON

ROCKING ON AFTER DVT

Ian Anderson has been the flamboyant frontman of British rock group Jethro Tull for over 30 years. But ask him about the best year of his life, and you might be surprised at the answer. "1996," he says. "The year I didn't die from deep vein thrombosis." After surgery to repair his knee, Anderson had a strange feeling

that something else was wrong with his leg. An ultrasound revealed a massive blood clot extending from his ankle to just below the thigh—he had DVT. Fortunately, prompt treatment kept it from spreading to his lungs and becoming a pulmonary embolism. Today Anderson hopes to turn up awareness of this condition so that others may benefit from early recognition of the signs and symptoms.

In this critical situation, some patients may experience distressing respiratory symptoms. Others feel nothing until the pulmonary embolism threatens their lives.

"I didn't know I had DVT because I had no leg symptoms," Dan Quayle says of his life-threatening experience. "So the first indication for me was the pulmonary embolism, which almost took my life."

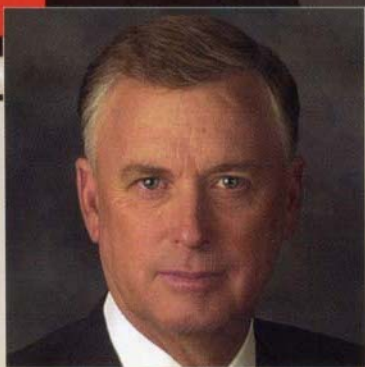
Signs and Symptoms of Deep Vein Thrombosis include:

- Swelling
- Localized pain (including a dull aching)
- Tenderness
- Skin discoloration
- Skin that's warm to the touch
- Calf discomfort upon flexing foot upwards
- Enlarged veins near skin's surface (e.g. varicose veins)

Signs and Symptoms of Pulmonary Embolism include:

- Shortness of breath
- Chest pain—often sharp—that worsens with deep breathing
- Rapid heart rate and/or fluttering sensation in chest
- New onset of wheezing
- Sweating
- Fainting
- Back, shoulder, or upper abdominal pain
- Feeling of apprehension and anxiety

DVT symptoms are generally present in one leg only. Talk to your doctor as soon as possible if you have symptoms of DVT. Seek immediate medical attention if you experience symptoms of a pulmonary embolism.



DAN QUAYLE

CONFRONTING HIS TOUGHEST OPPONENT

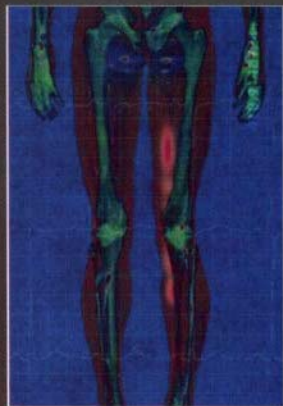
For Vice President Dan Quayle, public speaking is routine. So when he found himself so breathless that he could barely finish a speech in 1994, he knew something was wrong. At the emergency room, the chest x-rays were inconclusive and he was sent home. But the difficult breathing only got worse. When he returned to the hospital the following day,

doctors discovered he was actually suffering from a pulmonary embolism. "My lungs were filled with multiple blood clots that had broken off from an original clot in my leg—a clot I didn't even know I had," he says. He had a second pulmonary embolism in 1998. Quayle—who has learned he has an inherited predisposition to blood clotting—takes daily medication to ward off future episodes. He hopes to raise the awareness of the American public to keep their eyes open to this deadly condition, which affects people of all levels of health.

What causes blood clots?

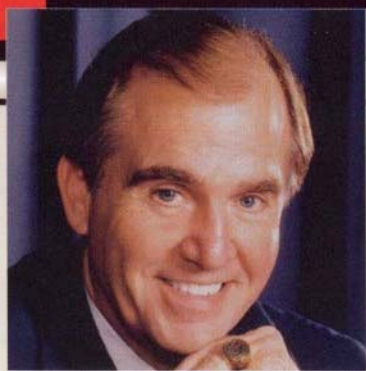
When you cut yourself, blood thickens to form a clot. This lifesaving response halts blood loss and allows the wound to heal. But in DVT, the blood clots unnecessarily. There are three major reasons—known as **Virchow's triad**—why this happens.

- **Endothelial damage:** Injury to the lining of the blood vessel wall.
- **Venous stasis:** Slow blood flow through the vein, often due to immobility.
- **Hypercoagulability:** An often inherited blood-clotting tendency.



Call **1-800-CLOTFREE**
for additional educational materials.

Visit www.spotlighthealth.com
to learn more about Ian Anderson, Dan Quayle,
and John Douglas, access in-depth medical
information, and join an online DVT support group.



JOHN DOUGLAS

PROFILING A KILLER

As the FBI's legendary profiler—fictionalized in the film *The Silence of the Lambs*—John Douglas spent his career studying the patterns of violent criminals. But the most dangerous killer he ever encountered was deep vein thrombosis (DVT). After contracting acute viral encephalitis, Douglas entered a week-long coma. Although he successfully

battled the infection, his prolonged immobility left him vulnerable to DVT. He noticed a troubling tightness and soreness in his leg and found himself short of breath. Eventually, his doctors diagnosed him with pulmonary embolism. Three episodes of DVT later, Douglas now knows the face of his stalker. To protect himself, he takes daily anticoagulant medication and is extremely vigilant in situations that increase his risk. "I would encourage everyone to take note of DVT's habits," he says. "Then you can recognize the pattern before it's too late."

Top Risk Factors and Triggering Events for DVT

Many different risk factors and triggering events may work in combination to form a blood clot—the more of these factors you have, the greater the risk of developing DVT.

"Within a matter of weeks, I tore a ligament in my knee, had surgery and took several long international flights," Ian Anderson recalls. "So in my case, the risk factors piled up."

1. Immobility/reduced mobility
2. History of DVT
3. Surgery (esp. hip or knee)
4. Medical illness such as heart failure, emphysema, pneumonia, lung disorders or infectious disease
5. Cancer
6. Paralysis, stroke or spinal injury
7. Trauma (e.g. broken bones)
8. Pregnancy
9. Obesity
10. Oral contraceptive use
11. Hormone replacement therapy (HRT)
12. 40 years of age or older
13. Heart attack
14. Lengthy travel in an airplane, car, bus, train
15. Indwelling catheter use

How can you prevent DVT?

Up to 200,000 people may die each year from pulmonary embolism, the lethal complication of DVT. That alone is reason for preventive treatment of at-risk patients such as those immobilized by medical conditions or surgery. But there are several other compelling motives as well.

After you develop a blood clot the first time, you become more prone to recurrent episodes of DVT. There's also the possibility of long-term effects due to insufficient blood flow through the veins, such as chronic aching in the calf or leg swelling. So it's better to prevent a DVT from forming in the first place than having to treat it and its complications.

"My story clearly illustrates why it's better to stop DVT before it starts," says John Douglas, who has battled DVT four times. "My first episode of DVT left me with permanent damage to the veins in my legs, so I face a higher risk of clotting."

To protect patients at risk for DVT, doctors prescribe anticoagulant drugs, or "blood thinners," to inhibit the blood from thickening into clots. These important medications—including low molecular weight heparin, heparin, and warfarin—provide the cornerstone of preventive treatment. In conjunction with medication, hospitalized patients may also be asked to wear compression stockings, perform leg exercises, and walk the hallway to improve circulation.

The best defense against DVT is knowledge.

Arm yourself by calling **1-800-CLOTFREE** for additional educational materials.

Or visit **www.spotlighthealth.com** to learn more about Ian Anderson, Dan Quayle, and John Douglas, access in-depth medical information, and join an online DVT support group.



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