

Coach Class/Economy Class Syndrome

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It is widely accepted that deep vein thrombosis (blood clot formation) or DVT in the legs is a risk of long-distance (greater than 5,000km/3,000 miles) travel. The combination of immobility, dehydration, and seat pressure on veins at or below the knees increase the risk of blood clot formation. DVT is undiagnosed in 80% of cases. DVT may result in movement of the clot to the lungs (embolism) which accounts for 1 in 20 deaths in those older than 50. The incidence of DVT in the general (not hospitalized) population is unknown, but may be significant.

Risk factors for such clotting:

- Prior history of DVT/pulmonary embolism (PE)
- Obesity (>20% above ideal body weight)
- Varicose veins
- Recent surgery (with anaesthesia)
- Autoimmune disease
- Type A blood type
- Cancer/Chemotherapy
- Clotting disorders (hypercoagulability)
- Congestive heart failure
- Hyperlipidemia (elevated cholesterol)
- Inflammatory bowel disease (Crohn's/ulcerative colitis)
- OB/GYN: Oral estrogens, Pregnancy/Post-partum period
- Polycythemia/Elevated platelet counts

Although there are not sufficient data to routinely recommend preventive blood-thinning medications for air travel, graduated compression stockings have been shown to significantly reduce the chance of DVT, especially in those with risk factors for this problem.

Other highly advised recommendations:

1. Attention to activity during the flight. Any activity that periodically (hourly) contracts the leg muscles is beneficial in keeping blood moving.
2. Avoid dehydration by avoiding caffeine and alcohol, and by drinking liquids each hour.
3. Consider routinely wearing gradual compression stockings for all lengthy plane flights and car trips.

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