

## Surgical flight syndrome: Here's how to reduce the risks of thrombosis

Doctors and their patients should exercise caution and, in some instances, take special measures to prevent serious medical problems that could result from airline travel in the period preceding or following a surgical procedure, says an editorial in the current issue of *Aesthetic Surgery Journal*, the peer-reviewed publication of the American Society for Aesthetic Plastic Surgery (ASAPS).

Deep vein thrombosis/pulmonary embolism (DVT/PE) is commonly referred to as "economy class syndrome" because the condition has been associated with cramped airline seating. (DVT occurs when blood clots develop within veins; PE occurs when blood clots within veins break off and are trapped in the lungs.)

The precise cause of the condition is unknown, because there are numerous risk factors. The most common risk factors include: prolonged immobilization or bed rest, obesity, oral contraceptives, varicose veins,

an underlying malignancy and surgery.

Airline travel also increases the risk of DVT/PE due to factors such as limited leg room and long periods of inactivity, dehydration from low humidity in the cabin, and the effects of high altitude which can decrease oxygen absorption into the blood.

Women are generally more vulnerable to DVT/PE than men. The more risk factors, the more susceptible one is to an occurrence of DVT/PE.

"Airline travel and surgery can potentially act synergistically to increase the risk of DVT/PE," says Dr. Alan Matarasso, senior scientific editor of *Aesthetic Surgery Journal* and author of the editorial.

Nevertheless, patients often may travel in conjunction with undergoing surgical procedures. Basic guidelines that can help prevent problems associated with airplane travel include:

- Drink plenty of water. It is recommended that 8 ounces of

water be consumed for each hour of airplane travel.

- Avoid dehydrating agents such as caffeine and alcohol.

- Perform in-seat exercises. Get up and walk around the cabin as frequently as possible.

- Wear loose-fitting clothes and avoid surgical compression binders.

- Inform your physician and surgeon of any planned extended airline travel. In some cases, physicians may recommend additional measures to further reduce risks.

Taking proper precautions with airline travel before and after surgery can help to ensure patient safety.

*The American Society for Aesthetic Plastic Surgery (ASAPS) is the leading organization of plastic surgeons certified by the American Board of Plastic Surgery (ABPS) who specialize in cosmetic surgery of the face and the entire body. Toll-free referral line: 1-888-272-7711. Web site: www.surgery.org.*



WE'RE GOING TO PROVE NEWTON'S THEORY WRONG. ONE WOMAN AT A TIME.

Women now have an ally in the ongoing battle against gravity. At the University of Michigan Health System Center for Facial Cosmetic Surgery, and on Thursday, September 26th at Hotel Baronette in Novi, Dr. Shan Baker and Dr. Charles Boyd will be hosting an open house from 7:00-9:00 p.m. to provide information and answer questions you may have about all of the benefits of facial cosmetic surgery. So join us, and get all the facts. And maybe then, you'll find that defying the laws of gravity isn't as impossible as you may think.

## Bionic eye may help restore sight

ALBUQUERQUE (AP) — Sandia National Laboratories scientists are building what amounts to a bionic eye, which could help restore sight to the blind.

Kurt Wessendorf and colleagues from around the country hope to replace failed light receptors in the eye with an electronic device.

The device would be attached to the retina to stimulate a person's retinal nerves, bypassing failed light receptors and communicating directly with the brain. A tiny camera would be mounted on eyeglasses to feed images to the device.

The bionic eye parts would not function as well as a human eye, but they could

The device would be attached to the retina to stimulate a person's retinal nerves.

read large type, distinguish between objects in a room and recognize faces.

The images will come a little slowly and appear yellow. But people who are blind will see," he said.

The scientists must build 1,000 electrodes tiny enough

to be implanted in the eye. They are using "microelectronic systems," which are microscopic machines built with the same techniques used to make computer chips.

The implants would help people with macular degeneration, which affects about 200,000 primarily elderly people nationally, and retinitis pigmentosa, in which retinal cells are gradually destroyed leading to vision loss. The latter disease affects one baby in 4,000.

The project was launched by Mark Humayun, a pioneering eye researcher who recently moved from Johns Hopkins University to the University of Southern California.

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