theepochtimes.com

Reduce Risk of Blood Clots After COVID-19 or Vaccination With 4 Habits

Dr. Jonathan LiuFollow Sindy LamFollow Nov 23 2022

13-17 minutes

Thrombosis, or blood clots that

block veins or arteries, is one of the complications of COVID-19. Research has found that the incidence rates of both arterial thrombosis and venous thrombosis increase significantly in COVID patients.

In addition, some people have rare side effects such as thrombosis with thrombocytopenia syndrome after they get vaccinated. This is when antibodies produced by the vaccine activate

platelets, resulting in low platelet count and blood clots.

Western medicine usually adopts anticoagulant (blood thinners) and thrombolytic therapy (drugs to break up blood clots) to tackle thrombosis. However, this also carries the risk of side effects such as bleeding and allergies.

Traditional Chinese medicine (TCM) has a long history of curing thrombosis effectively, even in cases of thrombosis

that are difficult to treat with anticoagulants. We aim to introduce an additional resource so you have more information at your disposal.

First, let's delve into what these blood clots are.

Incidence Rate of Thrombosis Increased Significantly

According to a research report released on the website of the

American Heart Association, COVID increases a patient's risk for thrombosis.

The health records of 48 million adults in England and Wales were investigated by medical experts. They found out that among nearly 1.44 million infected patients, the incidence rates of fatal arterial thrombosis and fatal venous thrombosis were 5.3 percent and 4.7 percent, respectively, and the non-fatal incidence

rates of these were 2.5 percent and 4.4 percent, respectively.

During the entire course of infection, the incidence rate of the formation of arterial thrombosis was significantly higher in the first few weeks of the diagnosis of COVID-19 and decreased rapidly over time, while the incidence rate of venous thrombosis decreased relatively more slowly.

In other words, venous thrombosis is a significant

complication in long COVID patients.

The research team recommended early detection and early treatment, encouraging patients to take lipid-lowering and antihypertensive drugs regularly to reduce the risk of thrombosis. These were patients who did not have hyperlipidemia, hypertension, or other chronic diseases clinically before. This indicates

the causes of thrombosis are complicated.

Causes of Formation of Thrombosis

Vascular thrombosis is common clinically, and the incidence rate is higher in men than in women.

In modern Western medicine, the formation of thrombosis is believed to be an unstructured mass formed by insoluble

fibrin, deposited platelets, accumulated white blood cells, and trapped red blood cells. The main conditions that contribute to the formation of thrombosis are damage to cardiovascular endothelium (the layer of cells that line the interior of blood vessels), changes in blood flow velocity and direction, and an increase in blood coagulation. Among them, damage to the endothelium and increased

blood coagulation are critical factors.

The mechanisms of the formation of arterial thrombosis and venous thrombosis are different because the physiological environments of arteries and veins are different. Arteries are the blood vessels that carry oxygenated blood away from the heart with the pulse of a heartbeat. Veins carry deoxygenated blood back to the heart.

Arterial thrombosis is usually formed on the basis of atherosclerotic plaque rupture. After these plaques on the artery walls rupture, their lipid-rich core and collagen are exposed and platelets in the blood flowing past start to adhere, activate, and aggregate, forming white thrombosis, which is rich in platelets.

Venous thrombosis, when not formed because of surgery or

injury, is mainly related to slow blood flow, poor drainage, and a hypercoagulable state.

COVID Vaccine Induces Thrombosis, Thrombocytopenia Syndrome

After severe pneumonia induced by COVID, arterial thrombosis risk is elevated because the acute inflammatory response caused

by severe infection or sepsis can affect the coagulation and fibrinolytic system that forms and prevents blood clots.

This happens through various channels, such as a decrease of circulating C-reactive protein and antithrombin-III levels, the increase of plasminogen activator inhibitor-1 levels, which eventually leads to the activation of the coagulation cascade mechanism and the inhibition of the fibrinolytic

process (which breaks down and prevents clots), thereby promoting the formation of thrombosis.

An investigation of large-scale surveys in England and Ireland found that many patients did not develop venous thrombosis during the acute infection, but during long COVID.

There were also cases of rare side effects of thrombosis with thrombocytopenia syndrome after being vaccinated with

AstraZeneca Vaxzevria vaccines and Johnson & Johnson vaccines in Europe and the United States.

From the research on patients with venous thrombosis, high levels of PF4 antibodies were detected in the serum of nearly all patients. This antibody is highly related to the formation of thrombosis.

Modern Antithrombotic Therapy Is Limited

Treatments available include anticoagulant therapy, antiplatelet therapy, thrombolytic therapy, and fibrinogen-lowering therapy. However, these therapies have side effects such as bleeding and allergies, while some cases have contraindications. For some complex cases, modern medical therapy is not ideal.

For example, powerful anticoagulants may still carry

risks of bleeding. To prevent this, patients usually undergo regular blood tests. And if one has local skin ulcers, the drug may not have an effect.

Modern medicine also proposes that if thrombosis is detected at an early stage, thrombolytic therapy can be used, but it must be implemented within 48 hours. After 48 hours, scarring begins to form inside the thrombosis, making the blood clot difficult to

dissolve. Thrombolytic drugs also carry a high risk of bleeding complications.

8-Month Vein Thrombosis Case Treated in 20 Days

I treated a “typical” case of deep vein thrombosis on a patient’s lower left extremity. The 26-year-old said this area had been swollen and in pain for eight months; his skin was

covered in purplish-black ulcers.

He had been diagnosed by his family doctor eight months prior and was prescribed medication which he took for six months without effect. Over that period of time, the ulcers—a sign of aggravated ischemia (restricted blood flow)—appeared.

This was an active young man who loved sports and playing basketball, who hadn't been able to play for more than a

year because of his illness. At the prompting of others, he came to consult me, (Dr. Jonathan Liu), a traditional Chinese medicine (TCM) practitioner.

I asked about his diet, quality of sleep, urine, and stool, and all were basically normal. Therefore, according to TCM theory, this was a typical case of qi deficiency and blood stasis.

The concept of “qi” in TCM can

be understood as the “energy” or “vitality” that constitutes life in the body. This energy flows throughout the body to maintain life activities. TCM theory holds that qi is the most basic and important substance that constitutes the human body and life activities.

Various phenomena in the human body are representations of energy, such as the heartbeat, lungs assisting breathing, muscle

contraction, blood circulation, the conduction of nerve signals, and so on. The different forms of energy are summarized in TCM as qi. The general operation of every organ, such as the heart, liver, spleen, lung, and kidney, is driven by energy. Without energy, the organs fail.

You can think of qi as the substance that fills the total energy requirement of the body. It comes mainly from the

air we breathe and the food we eat.

Qi (energy) in TCM involves blood circulation, heart function, blood coagulation mechanism, the balance of the anti-coagulation mechanism, and so on.

The expression of qi deficiency and blood stasis is that blood flows slowly, blood easily coagulates and forms thrombosis, and so on.

Western medicine also has

similar findings.

However, in TCM, this condition can be detected before thrombosis symptoms actually occur. One can experience stagnated qi and blood stasis for quite some time before thrombosis forms and causes symptoms and complications, and the TCM system recognizes many signs of the underlying stagnated qi and blood stasis problem, meaning it can be treated early.

I adopt the treatment of invigorating qi and activating blood. That is, curing qi deficiency and blood stasis with TCM prescriptions that can supplement the energy constituting life, improving blood circulation, and other functions.

For instance, the treatment of rejuvenation soup from Dr. Men Chunde, a famous TCM practitioner from Hebei Province, China, is very

effective in curing this disease.

This prescription includes Astragalus, a genus of herb used in Chinese medicine which invigorates qi and has curing effects, as well as Angelica, Caulis spatholobus, and Salvia siltiorrhiza, and insect medicines such as earthworm, ground beetle, leech herbs, and so on, which are effective in promoting blood circulation and expanding vessels. These are materials

that should be prescribed by an experienced and trusted TCM doctor.

I prescribed medicine for the young man who came to see me, and he took 20 doses of TCM in 20 days. By the end of it, all the symptoms disappeared, the skin ulcers on his lower limbs healed, his skin color returned to normal, and he could run on the basketball court again.

“When the meridians are open,

the blood and qi can flow," is a quote found in the Yellow Emperor's Inner Canon, a seminal TCM classic written 2,500 years ago.

It means that blood circulation will be normal when the blood vessels are healthy.

The two main strategies of TCM treatment of thrombotic vascular diseases are: 1) the method of clearing heat, detoxifying, and activating blood in the acute phase, and

2) the method of nourishing qi and activating blood in the chronic phase.

4 Habits for Preventing Thrombosis

There are best practices that we can incorporate into our daily life to prevent thrombosis, and many of them are not so difficult.

1. Avoid Lengthy Sitting

An important strategy to

prevent thrombosis is to adopt a less sedentary lifestyle. Many jobs require long hours of sitting, but you can implement small fixes. After using the computer for an hour, stand up, stretch your arms and legs, and take a quick walk down the hall if you can. If you can't leave your desk, move your ankle joints, turning your toes inwards and then outwards. Stretch your calf muscles and hold for a few seconds.

Just by doing this, you promote blood circulation effectively, and reduce the chance of blood coagulation and blockage formation.

People who are bedridden for a long time are at high risk of lower extremity venous thrombosis. Bedridden patients should be encouraged to actively or passively move their lower extremities.

Patients who need long-term intravenous infusion should

avoid repeated punctures at the same place. Once the venous endothelium is damaged, thrombosis will easily form.

2. Eat Well and Avoid Smoking

Try to arrange your meals such that they are balanced and well-timed. Foods that prevent thrombosis include sardines, onions, garlic, celery, and black fungus, in appropriate amounts. These foods do not

increase blood viscosity, and prevent blood clotting.

Smoking damages blood vessels. Many patients with thromboangiitis have been smokers for a long time. Therefore, quitting smoking is an important way to prevent thrombotic diseases.

3. Drink Enough Water

Drink plenty of water. The average person should drink 50 to 70 ounces of water per day, while the elderly need to

drink more water because the blood of the elderly is relatively thick, sticky, coagulated, and aggregated.

Drinking more water can help dilute the blood. Drinking water when you get up and before going to bed can reduce blood viscosity and the formation of thrombosis.

4. Control Underlying Health Conditions

Obesity, diabetes, and high blood pressure are all risk

factors for thrombosis, and it is very important to actively treat, prevent, or control the development of these diseases.

Danshen Tea Can Reduce the Risk of Thrombosis

Modern pharmacology has discovered that many TCM blood-activating and stasis-removing herbal drugs have

antithrombotic functions, but this effect is different from that in chemical drugs.

This medicine works not by targeting a certain session where blood agglutinates, but through anti-inflammation and expanding blood vessels, reducing blood pressure, reducing blood viscosity and blood lipids, inhibiting platelet aggregation, and improving blood microcirculation, and other composite microscopic

functions to prevent and eliminate thrombosis.

The preferred TCM treatment for promoting blood circulation and removing blood stasis is danshen, also known as Salvia miltiorrhiza, or red sage.It can sometimes be obtained in health food stores. Better yet, ask for recommendations on where to find it from a trusted TCM practitioner. This is an herb used in TCM by professional practitioners, but

you can use it at home as well if done the right way.

People with high-risk factors for thrombosis can brew tea from 10 grams of danshen every day to prevent the occurrence of thrombosis.

Research experiments have confirmed that danshen and its extracts have multiple cardiovascular protective effects. It also has functions such as anti-oxidation, anti-inflammation, reducing blood

viscosity, improving microcirculation, and so on.

For sure, it is equally important to change yourself, get rid of bad habits, and maintain a healthy life. Because at the end of the day, health depends on ourselves!

Dr. Jonathan Liu

Follow

Dr. Jonathan Liu is a professor of Chinese Medicine at Georgian College in Canada.

Follow