



Short Communication

Silent Streams, Sudden Storms: Reframing Deep Vein Thrombosis as a Systemic Vascular Signal

\* **Zalikha R, Diosdado M, Mortarino T, Bossuyt U, Pronovost R**

Goldman Medical School, Faculty of Health Sciences, Israel

\* **Corresponding Author:** Mortarino T, Goldman Medical School, Faculty of Health Sciences, Israel

**Citation:** Mortarino T, Silent Streams, Sudden Storms: Reframing Deep Vein Thrombosis as a Systemic Vascular Signal V1(2), 2025

**Copyright:** ©2025 Mortarino T, this is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited..

**Received date:** October 21, 2025; **Accepted date:** October 26, 2025; **Published date:** October 31, 2025

**Keywords:** immuno-thrombosis, chronic inflammation, metabolic syndromes, inflammatory cytokines, post-thrombotic syndrome

Abstract

Deep Vein Thrombosis (DVT), traditionally perceived as a localized vascular condition, is increasingly recognized as a complex, systemic disorder reflecting broader dysregulation in hemostasis, inflammation, and endothelial health. This article presents a novel perspective that reframes DVT not merely as an isolated clotting event, but as a “vascular warning signal” indicative of underlying pathophysiological networks. By integrating emerging insights from immuno-thrombosis, endothelial biology, and personalized medicine, this review explores how DVT intersects with chronic inflammation, metabolic syndromes, and lifestyle patterns. It also highlights the evolving role of predictive analytics, wearable health technologies, and precision therapeutics in transforming early detection and prevention. Recognizing DVT as a dynamic and systemic process may open new avenues for holistic management and redefine strategies for reducing morbidity and mortality

Introduction

Deep Vein Thrombosis (DVT) is classically defined as the formation of a blood clot in the deep veins, most commonly in the lower extremities. While its acute complications—particularly pulmonary embolism—are well documented, the broader implications of DVT often remain underexplored

Traditionally explained through Virchow’s triad (venous stasis, endothelial injury, and hypercoagulability), DVT has long been viewed

through a reductionist lens. However, recent advances suggest that this perspective may be too narrow

This article proposes a paradigm shift: understanding DVT as a systemic vascular phenomenon rather than an isolated event

Beyond Virchow’s Triad: A Network Perspective

Virchow’s triad remains foundational, yet it does not fully capture the complexity of thrombus formation in modern contexts. Emerging research introduces the concept of immuno-thrombosis, where the immune system and coagulation pathways interact dynamically. In this framework:

- Inflammation acts as both a trigger and amplifier of clot formation
- Endothelial cells serve as active regulators rather than passive barriers
- Platelets function as immune modulators in addition to clotting agents

Thus, DVT becomes a manifestation of systemic imbalance involving vascular, immune, and metabolic systems

DVT as a Marker of Systemic Health

Rather than being a standalone diagnosis, DVT may reflect underlying systemic disturbances such as:

Chronic Inflammatory States

## Journal of Innovations in Medical Research and Clinical case Reports (JIMRCR)

Conditions like obesity, autoimmune disorders, and infections can predispose individuals to thrombosis by sustaining low-grade inflammation.

### Metabolic Dysregulation

Insulin resistance, dyslipidemia, and oxidative stress alter endothelial function, increasing thrombotic risk.

### Sedentary Lifestyles in the Digital Age

Prolonged immobility—now exacerbated by remote work and screen-based routines—creates a modern variant of “behavioral stasis,” contributing significantly to DVT incidence.

## Therapeutic Evolution: Toward Precision Medicine

### Individualized Anticoagulation

The future of DVT treatment lies in tailoring anticoagulant therapy based on:

- Genetic metabolism profiles
- Bleeding risk assessment
- Comorbid conditions

### Targeting Inflammation and Endothelium

New therapies aim to modulate the inflammatory cascade and restore endothelial integrity, moving beyond simple clot prevention.

### Lifestyle as Medicine

Structured mobility programs, hydration strategies, and ergonomic interventions are gaining recognition as essential components of DVT prevention

## Post-Thrombotic Syndrome: The Chronic Aftermath

A significant proportion of DVT patients develop post-thrombotic syndrome (PTS), characterized by chronic pain, swelling, and skin changes. Viewing DVT as a systemic disorder underscores the need for long-term management strategies that address vascular remodeling and inflammation.

## Conclusion

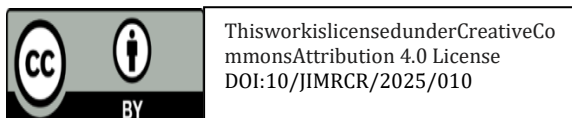
Deep Vein Thrombosis should no longer be viewed solely as a localized vascular obstruction. Instead, it represents a complex, systemic signal—a convergence point of inflammation, endothelial dysfunction, and lifestyle factors. By embracing this broader perspective, clinicians and researchers can move

toward more holistic, predictive, and personalized approaches to care Reframing DVT in this way not only enhances our understanding of its pathogenesis but also transforms prevention and treatment into a proactive, system-wide strategy rather than a reactive response to an acute event.

## References

1. Bali, R.K.; Sharma, P.; Gaba, S.; Kaur, A.; Ghanghas, P. A review of complications of odontogenic infections. *Natl. J. Maxillofac. Surg.* 2015, 6, 136–143.
2. Colletti, G.; Biglioli, F.; Poli, T.; Dessy, M.; Cucurullo, M.; Petrillo, et al Vascular malformations of the orbit (lymphatic, venous, arteriovenous): Diagnosis, management and results. *J. Cranio-Maxillofac. Surg.* 2019, 47, 726–740.
3. Ziyadeh, F.N.; Musallam, K.M.; Mallat, N.S.; Mallat, S.; Jaber, F.; Mohamed, A.A.; Koussa, S.; Taher, A.T. Glomerular hyperfiltration and proteinuria in transfusion-independent patients with  $\beta$ -thalassemia intermedia. *Nephron Clin. Pract.* 2013, 121, c136–c143.
4. Kaja, S.; van de Ven, R.C.; van Dijk, J.G.; Verschuuren, J.J.; Arahata, K.; Frants, R.R et al Severely impaired neuromuscular synaptic transmission causes muscle weakness in the *Cacna1a*-mutant mouse rolling Nagoya. *Eur. J. Neurosci.* 2007, 25, 2009–2020
5. Kamisawa, T.; Kaneko, K.; Itoi, T.; Ando, H. Pancreaticobiliary maljunction and congenital biliary dilatation. *Lancet Gastroenterol. Hepatol.* 2017, 2, 610–618.
6. Bjørk, M.-H.; Zoega, H.; Leinonen, M.K.; Cohen, J.M.; Dreier, J.W.; Furu, et al Association of prenatal exposure to antiseizure medication with risk of autism and intellectual disability. *JAMA Neurol.* 2022, 79, 672–681.

## Journal of Innovations in Medical Research and Clinical case Reports (JIMRCR)



This work is licensed under Creative Commons Attribution 4.0 License  
DOI:10/JIMRCR/2025/010

**Your next submission with****Olites Publishers will reach you the below assets**

- We follow principles of publication by the Committee on Publication Ethics (COPE).
- Double-blind peer review process which is just as well as constructive.
- Permanent archiving of your article on our website
- Quality Editorial service
- Manuscript accessibility in different formats (PDF, Full Text)
- authors retain copyrights
- unique DOI for all articles
- immediate, unrestricted online access

Learn more: [Journal of Innovations in Medical Research and Clinical case Reports Olites Publishers \(olitespublishing.org\)](https://olitespublishing.org/)