







History & Physical Examination of Cardiovascular system

Ankle swelling

History:

| 1- Chief Complaint: "Ankle Swelling" | |
|--|---|
| Questions | Indication |
| Duration: | |
| * When did it start? | |
| Site: | |
| * Has it affected one or both legs? " Unilateral or Bilateral" | • Unilateral → deep vein thrombosis. |
| | Bilateral → Heart Failure, lymphedema, Pregnancy. |
| Onset: | |
| * Is it sudden or gradually ? | Sudden → deep vein thrombosis. Gradual → renal, liver, heart failure. |
| * Is it continuous or intermittent ? | |
| * Does it get worse in the evening ? | If yes indicate to <u>Heart Failure.</u> |
| Extent "Level" | |
| * Where does the swelling extend to? | To the ankle? below the knee? To the middle of the thigh? To the abdomen? The sacrum in bedridden patient? |

| Progression: | | |
|---|------------------------------------|--|
| Does it change since the first time that you noticed it? Or it is constant? | | |
| Presence of pain, redness, itching, exudates: | | |
| * Is there any pain? | Painful → DVT. | |
| Is there any discoloration? | Skin erythema → DVT. | |
| * Is it itching? | | |
| * Is there any exudate? | | |
| Risk Factors: | | |
| Do you smoke? Have you had a shortness of breath? Have you had cardiac diseases? | For CHF. | |
| * Do you feel tired or have dry skin, coarse hair, or intolerance to cold? | For Hypothyroidism. | |
| * Have you noticed prominent veins on your legs? * Have you been in prolonged state of immobility? | For DVT. | |
| * Do you drink alcohol?* Have you had liver disease? | For liver Cirrhosis | |

* Do you take any medication? (e.g.: ACE inhibitor, Calcium channel blockers, steroids)

(ACE inhibitors and calcium channel blockers are vasodilators - Steroids lead to sodium and water retention)

DIFFERENTIAL DIAGNOSIS

Pitting bilateral lower limb oedema:

- Cardiac
 - Congestive heart failure
 - Right sided heart failure
- Hepatic
 - Cirrhosis
- Renal
 - · Renal failure
 - Nephrotic syndrome

Unilateral lower limb oedema:

- Deep venous thrombosis
- Lymphatic obstruction
- Cellulitis

Non-pitting lower limb oedema:

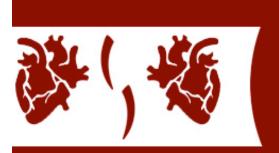
- Hypothyroidism
- Lymphedema

Management

Treat the underlying cause.

| In General | | |
|---|------------------------------------|--|
| Lifestyle modification | 2. Pharmacological therapy: | |
| Sodium restriction. | Diuretics | |
| Weight loss. | ACE inhibitors | |
| Smoking cessation and restrict alcohol use. | B blockers | |
| Exercise programme. | | |









Done By:

Fadah Al-Anazi Yazeed Al-Harbi Mohammed Al-Shehri Waleed Al-Rajban