

JOHN HEURUNG MEDICAL RECORD: A REVIEW AND SUMMARY

March 30, 1993

In late 1988, Mr. Heurung had a thrombo-embolic event which required hospitalization; it is the consensus of experts that this was precipitated by a long automobile trip from Florida to the Twin Cities and that this event was not work-related. However, this was not the usual case of deep vein thrombosis resulting in a pulmonary embolus requiring Heparin, then Coumadin, and a 4-7 day stay in the hospital, nor could the long automobile trip explain the increased complexity of this case.

The continuing embolic shower even in the face of adequate Heparinization, the prolonged hospitalization, and the requirement for placement of a Greenfield Filter were more likely related to his coagulopathy (an activated coagulation system), which is explained by a diagnosis of an autoimmune disease that is supported by evidence from the coagulation laboratory at the University of Minnesota.

In October, 1990, the fibrinogen values were slightly high, factor V and factor VIII assays were elevated; and these findings can be accepted as evidence for overcompensated intravascular coagulation. The patient also had a lupus inhibitor and a positive FANA.

In January, 1993, there is fairly marked evidence of accelerated platelet turnover in what appears to be an intravascular coagulation process. Other contributing factors are the high hemoglobin and the lupus inhibitor.

The activated coagulation system and the diagnosis of autoimmune disease, along with the contributing factors of a high hemoglobin and a lupus inhibitor, better explain the clinical course of this patient than does the single long automobile trip in late 1988. Because this patient has been observed to be both under anticoagulated and overanticoagulated while Coumadin doses remained the same, a search of the literature was undertaken to better understand these phenomena. Particular attention was paid to the role of stress because our observation suggested that it was also a contributing factor.

Sutherland tells us that a precise and universally accepted scientific definition of stress has not yet been developed¹. One definition of stress is a stimulating and observable event that influences a person in an undesirable or harmful way. Another definition is an internal or external demand which exceeds the coping abilities of a person. A third definition says that a stressor is stressful only if a person perceives it as such.

The field of psychoneuroimmunology attempts to explain the biology of stress. This field assumes that all disease is multifactorial,