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Edema

Definition

Edema is a condition of abnormally large fluid volume in the circulatory system or in tissues between the body's cells (interstitial spaces).

Description

Normally the body maintains a balance of fluid in tissues by ensuring that the same of amount of water entering the body also leaves it. The circulatory system transports fluid within the body via its network of blood vessels. The fluid, which contains oxygen and nutrients needed by the cells, moves from the walls of the blood vessels into the body's tissues. After its nutrients are used up, fluid moves back into the blood vessels and returns to the heart. The lymphatic system (a network of channels in the body that carry lymph, a colorless fluid containing white blood cells to fight infection) also absorbs and transports this fluid. In edema, either too much fluid moves from the blood vessels into the tissues, or not enough fluid moves from the tissues back into the blood vessels. This fluid imbalance can cause mild to severe swelling in one or more parts of the body.

Causes and symptoms

Many ordinary factors can upset the balance of fluid in the body to cause edema, including:

- Immobility. The leg muscles normally contract and compress blood vessels to promote blood flow with walking or running. When these muscles are not used, blood can collect in the veins, making it difficult for fluid to move from tissues back into the vessels.
Heat. Warm temperatures cause the blood vessels to expand, making it easier for fluid to cross into surrounding tissues. High humidity also aggravates this situation.
Medications. Certain drugs, such as steroids, hormone replacements, nonsteroidal anti-inflammatory drugs (NSAIDs), and some blood pressure medications may affect how fast fluid leaves blood vessels.
Intake of salty foods. The body needs a constant concentration of salt in its tissues. When excess salt is taken in, the body dilutes it by retaining fluid.
Menstruation and pregnancy. The changing levels of hormones affect the rate at which fluid enters and leaves the tissues.

Some medical conditions may also cause edema, including:

- Heart failure. When the heart is unable to maintain adequate blood flow throughout the circulatory system, the excess fluid pressure within the blood vessels can cause shifts into the interstitial spaces. Left-sided heart failure can cause pulmonary edema, as fluid shifts into the lungs. The patient may develop rapid, shallow respirations, shortness of breath, and a cough. Right-sided heart failure can cause pitting edema, a swelling in the tissue under the skin of the lower legs and feet. Pressing this tissue with a finger tip leads to a noticeable momentary indentation.
Kidney disease. The decrease in sodium and water excretion can result in fluid retention and overload.
Thyroid or liver disease. These conditions can change the concentration of protein in the blood, affecting fluid movement in and out of the tissues. In advanced liver disease, the liver is enlarged and

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fluid may build-up in the abdomen.

- Malnutrition. Protein levels are decreased in the blood, and in an effort to maintain a balance of concentrations, fluid shifts out of the vessels and causes edema in tissue spaces.

Some conditions that may cause swelling in just one leg include:

- [Blood clots](#). Clots can cause pooling of fluid and may be accompanied by discoloration and [pain](#). In some instances, clots may cause no pain.
- Weakened veins. [Varicose veins](#), or veins whose walls or valves are weak, can allow blood to pool in the legs. This is a common condition.
- Infection and inflammation. Infection in leg tissues can cause inflammation and increasing blood flow to the area. Inflammatory diseases, such as [gout](#) or arthritis, can also result in swelling.
- [Lymphedema](#). Blocked lymph channels may be caused by infection, scar tissue, or hereditary conditions. Lymph that can't drain properly results in edema. [Lymphedema](#) may also occur after [cancer](#) treatments, when the lymph system is impaired by surgery, radiation, or [chemotherapy](#).
- Tumor. Abnormal masses can compress leg vessels and lymph channels, affecting the rate of fluid movement.

Symptoms vary depending on the cause of edema. In general, weight gain, puffy eyelids, and swelling of the legs may occur as a result of excess fluid volume. Pulse rate and blood pressure may be elevated. Hand and neck veins may be observed as fuller.

Diagnosis

Edema is a sign of an underlying problem, rather than a disease unto itself. A diagnostic explanation should be sought. Patient history and presenting symptoms, along with laboratory blood studies, if indicated, assist the health professional in determining the cause of the edema.

Treatment

Treatment of edema is based on the cause. Simple steps to lessen fluid build-up may include:

- Reducing sodium intake. A high sodium level causes or aggravates fluid retention.
- Maintaining proper weight. Being overweight slows body fluid circulation and puts extra pressure on the veins.
- [Exercise](#). Regular exercise stimulates circulation.
- Elevation of the legs. Placing the legs at least 12 in (30.5 cm) above the level of the heart for 10-15 minutes, three to four times a day, stimulates excess fluid re-entry into the circulatory system.
- Use of support stocking. Elastic stockings, available at most medical supply or drug stores, will compress the leg vessels, promoting circulation and decreasing pooling of fluid due to gravity.
- Massage. Massaging the body part can help to stimulate the release of excess fluids, but should be avoided if the patient has blood clots in the veins.
- Travel breaks. Sitting for long periods will increase swelling in the feet and ankles. Standing and/or walking at least every hour or two will help stimulate blood flow.

The three "Ds"—diuretics, digitalis, and diet—are frequently prescribed for medical conditions that result in excess fluid volume. [Diuretics](#) are medications that promote urination of sodium and water. Digoxin is a digitalis preparation that is sometimes needed to decrease heart rate and increase the strength of the heart's contractions. Dietary recommendations include less sodium in order to decrease fluid retention. Consideration of adequate protein intake is also made.

For patients with lymphedema, a combination of therapies may prove effective. Combined decongestive therapy includes the use of manual lymph drainage (MLD), compression bandaging, garments and pumps, and physical therapy. MLD involves the use of light massage of the subcutaneous tissue where the lymph vessels predominate. Massage begins in an area of the body trunk where there is normal lymph function and proceeds to areas of lymphatic insufficiency, in an effort to stimulate new drainage tract development. (MLD should not be used for patients with active cancer, deep vein clots, congestive heart failure, or cellulitis.) MLD sessions are followed by application of compression garments or pumps. Physical therapy is aimed at strengthening the affected limb and increasing joint mobility.

Alternative treatment

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Dietary changes, in addition to cutting back the amount of sodium eaten, may also help reduce edema. Foods that worsen edema, such as alcohol, [caffeine](#), sugar, dairy products, soy sauce, animal protein, chocolate, olives, and pickles, should be avoided. Diuretic herbs can also help relieve edema. One of the best herbs for this purpose is dandelion (*Taraxacum mongolicum*), since, in addition to its diuretic action, it is a rich source of potassium. (Diuretics flush potassium from the body and it must be replaced to avoid potassium deficiency.) [Hydrotherapy](#) using daily contrast applications of hot and cold (either compresses or immersion) may also be helpful.

Key terms

Digitalis — A naturally occurring compound used in the preparation of the medication, digoxin, prescribed to increase the heart rate and strengthen the force of the heart's contractions.

Diuretics — Medications used in the treatment of fluid overload, to promote excretion of sodium and water.

Interstitial spaces — Areas of the body occurring outside the vessels or organs, between the cells.

Pitting edema — A swelling in the tissue under the skin, resulting from fluid accumulation, that is measured by the depth of indentation made by finger pressure over a bony prominence.

Resources

Organizations

Lymphedema and Wound Care Clinic of Austin. 5750 Balcones Dr., Ste. 110, Austin, TX 78731. (512) 453-1930.

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edema /ede·ma/ (ě-de´mah) an abnormal accumulation of fluid in intercellular spaces of the body.edem´atous

angioneurotic edema [angioedema](#).

cardiac edema a manifestation of congestive heart failure, due to increased venous and capillary pressures and often associated with renal sodium retention.

cytotoxic edema cerebral edema caused by hypoxic injury to brain tissue and decreased functioning of the cellular sodium pump so that the cellular elements accumulate fluid.

dependent edema edema in lower or dependent parts of the body.

edema neonato´rum a disease of premature and feeble infants resembling sclerema, marked by spreading edema with cold, livid skin.

pitting edema that in which pressure leaves a persistent depression in the tissues.

pulmonary edema diffuse edema in pulmonary tissues and air spaces due to changes in hydrostatic forces in capillaries or to increased capillary permeability, with intense dyspnea.

vasogenic edema cerebral edema in the area around tumors, often due to increased permeability of capillary endothelial cells.

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e·de·ma (ĭ-dē´mə)

n. pl. **e·de·mas** or **e·de·ma·ta** (-mə-tə)

An accumulation of an excessive amount of watery fluid in cells, tissues, or serous cavities.

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edema

[idē'mə]

Etymology: Gk, *oidema*, swelling

the abnormal accumulation of fluid in interstitial spaces of tissues, such as in the pericardial sac, intrapleural space, peritoneal cavity, or joint capsules. Edema may be caused by increased capillary fluid pressure; venous obstruction such as occurs in varicosities; thrombophlebitis; pressure from casts, tight bandages, or garters; congestive heart failure; overloading with parenteral fluids; renal failure; hepatic cirrhosis; hyperaldosteronism such as in Cushing's syndrome; corticosteroid therapy; and inflammatory reactions. Edema may also result from loss of serum protein in burns, draining wounds, fistulas, hemorrhage, nephrotic syndrome, or chronic diarrhea; in malnutrition, especially kwashiorkor; in allergic reactions; and in blockage of lymphatic vessels caused by malignant diseases, filariasis, or other disorders. Treatment of edema focuses on correcting the underlying cause. Potassium-sparing diuretics may be administered to promote excretion of sodium and water. Edematous parts of the body should be protected from prolonged pressure, injury, and temperature extremes. In the evaluation of tissue turgor, edema may be evaluated by position change, specific location, and response to pressure, as in pitting edema when pressing the fingers into the edematous area causes a temporary indentation. An ultrasound evaluation of the affected extremity is indicated to rule out thrombosis. When a limb is edematous as a result of venous stasis, elevating the extremity and applying an elastic stocking or sleeve facilitate venous return. Also spelled [oedema](#). See also [anasarca](#), [lymphedema](#). **edematose**, **edematous**, *adj.*

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C/C/E

An abbreviation—Cyanosis, Clubbing, Edema—used in physical examination of the extremities, which is a crude indicator of adequate oxygenation of blood

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edema [ēde'mah]

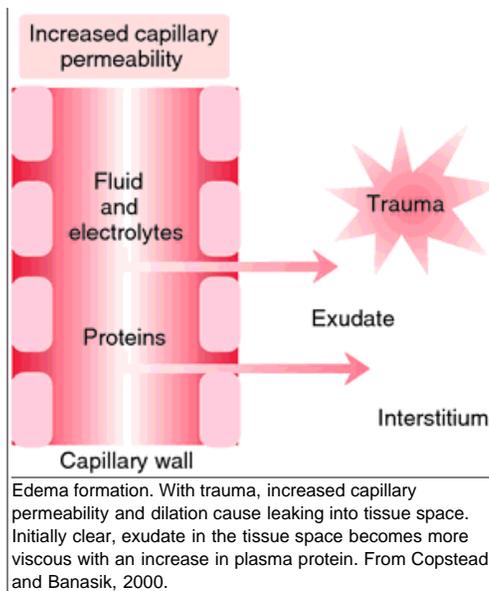
the accumulation of excess fluid in a fluid compartment. Formerly called [dropsy](#) and [hydrops](#). *adj.*, *adj edem'atous*. This accumulation can occur in the cells (*cellular edema*), in the intercellular spaces within tissues (*interstitial edema*), or in potential spaces within the body. Edema may also be classified by location, such as pulmonary edema or brain edema; types found in certain locations have specific names, such as [ASCITES](#) (peritoneal cavity), [HYDROTHORAX](#) (pleural cavity), or [HYDROPERICARDIUM](#) (pericardial sac). Massive generalized edema is called [ANASARCA](#). Classification by location does not indicate whether the edema is cellular or interstitial or occupies a potential space (for example, brain edema may be either cellular or interstitial). Edema can be caused by a variety of factors, including conditions that affect osmotic pressure, such as hypotonic fluid overload, which allows the movement of water into the intracellular space, or hypoproteinemia, which decreases the concentration of plasma proteins and permits the passage of fluid out of the blood vessels into the tissue spaces. Other factors include poor lymphatic drainage; conditions that cause increased capillary pressure, such as excessive retention of salt and water and heart failure; and conditions that increase capillary permeability, such as inflammation.

alveolar edema pulmonary edema in the alveoli, usually with hypoxemia and dyspnea.

brain edema [cerebral edema](#).

cardiac edema a manifestation of [congestive HEART FAILURE](#), due to increased venous and capillary pressures and often associated with renal sodium retention.

cellular edema edema caused by the entry of water into the cells, causing them to swell. This may occur because of decreased osmolality of the fluid surrounding the cells, as in hypotonic fluid overload, or increased osmolality of the intracellular fluid, as in conditions that decrease the activity of the sodium



pump of the cell membrane, allowing the concentration of sodium ions within the cell to increase.

cerebral edema swelling of the brain caused by the accumulation of fluid in the brain substance. It may result from head injury, stroke, infection, hypoxia, brain tumors, obstructive hydrocephalus, and lead encephalopathy; it may also be caused by

disturbances in fluid and electrolyte balance that accompany hemodialysis and diabetic ketoacidosis. The most common type is *vasogenic edema*, which may result from increased capillary pressure or from increased capillary permeability caused by trauma to the capillary walls. *Cellular edema* may occur in ischemia or hypoxia of the brain. Because the brain is enclosed in the solid vault of the skull, edema compresses the blood vessels, decreasing the blood flow and causing ischemia and hypoxia, which in turn result in further edema. Unless measures are taken to reverse the edema, destruction of brain tissue and death will result.

dependent edema edema of the lowermost parts of the body relative to the heart; it is affected by gravity and position, so that the lower limbs are affected if the individual is standing, but the buttocks are affected if the individual is supine.

generalized edema edema that is caused by poor venous return; it is not localized by the effects of gravity, in contrast to dependent edema.

interstitial edema

1. edema caused by the accumulation of fluid in the extracellular spaces of a tissue.
2. pulmonary edema in the interstitial tissues; there is dyspnea but no hypoxemia.

edema neonatorum [sclerema neonatorum](#).

nonpitting edema edema in which pressure does not leave a depression in the tissues, such as in [cellular EDEMA](#). See also [pitting EDEMA](#).

pedal edema swelling of the feet and ankles.

peripheral edema edema affecting the extremities; seen in heart disease, Crohn's disease, and amyloidosis.

pitting edema edema in which external pressure leaves a persistent depression in the tissues (see [PITTING](#)); it occurs because the pressure pushes the excess fluid out of the intercellular spaces in the tissue. See also [nonpitting EDEMA](#).

pulmonary edema diffuse extravascular accumulation of fluid in the tissues and air spaces of the [LUNG](#) due to changes in hydrostatic forces in the capillaries or to increased capillary permeability. It is most often symptomatic of [left ventricular HEART FAILURE](#), but can also be a complication of [mitral STENOSIS](#), [aortic STENOSIS](#), [ALTITUDE SICKNESS](#), acute HYPERTENSION, volume overload during intravenous therapy, or reduced serum oncotic pressure, as in patients who have [NEPHROSIS](#), [CIRRHOSIS](#), or [HYPOALBUMINEMIA](#).

During the initial stage of pulmonary edema, patients may complain of restlessness and anxiety and the feeling that they are getting a [COMMON COLD](#). Other signs include a persistent cough, slight [DYSPNEA](#), and intolerance to exercise. On [AUSCULTATION](#), [RALES](#) can be heard over the dependent portion of the lung. As fluid continues to fill the pulmonary interstitial spaces the [dyspnea](#) becomes more acute, respirations increase in

rate, and there is audible wheezing. The cough becomes productive of frothy sputum tinged with blood, giving it a pinkish hue. Eventually, if the condition persists, the patient becomes less responsive to stimuli as levels of consciousness decrease. Ventricular arrhythmias develop and [breath SOUNDS](#) diminish. In some patients these phases are telescoped as the pulmonary edema develops rapidly and the final stages of respiratory insufficiency are evident in a very short period of time.

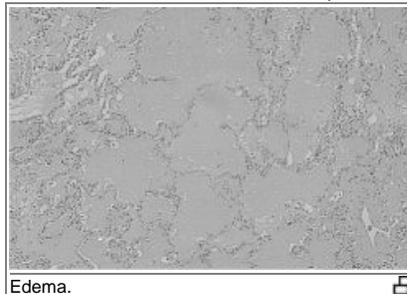
Treatment is aimed at enhancing gas exchange, reducing fluid overload, and strengthening and slowing the heart beat. To accomplish these goals the patient is often given oxygen by mask or through mechanically assisted ventilation. Drug therapy includes [DIURETICS](#) to remove excess alveolar fluid and [MORPHINE](#) to relieve anxiety and reduce the effort of breathing. Administration of other medications depends on the cause of the edema, as well as what other problems the patient may be having.

vasogenic edema that characterized by increased permeability of capillary endothelial cells; the most common form of [cerebral EDEMA](#).

Miller-Keane Encyclopedia and Dictionary of Medicine, Nursing, and Allied Health, Seventh Edition. © 2003 by Saunders, an imprint of Elsevier, Inc. All rights reserved.

edema,

n abnormally high fluid accumulation in the interstitial tissues; often an indication of other health problems.



Edema.

Jonas: Mosby's Dictionary of Complementary and Alternative Medicine. (c) 2005, Elsevier.

edema (edē'm),

n the accumulation of fluid in the tissues or in the peritoneal or pleural cavities. Primary factors favoring edema are increased capillary hydrostatic pressure (increased venous pressure), decreased osmotic pressure of plasma (hypoproteinemia), decreased tissue tension and lymphatic drainage, increased osmotic pressure of tissue fluids, and increased capillary permeability. Additional renal and hormonal factors are important. Clinical manifestations may consist of a steady weight gain or localized or generalized swelling.

edema, angioneurotic

(an'jēōnerto'ik),

n See angioedema.

edema, cardiac,

n an edema caused by venous congestion in association with congestive heart failure; tends to appear first in such dependent parts as the legs.

edema, dependent,

n an edema that changes its position with the posture of dependent parts (e.g., edema of the legs in progressive heart failure).

edema of glottis

(glot'is),

n an edema caused by fluid accumulation in the soft



tissues of the larynx. The condition, usually inflammatory, may result from an infection, injury, allergy, or inhalation of toxic substances.

Eczema.

edema, periorbital

(per'ēor'bit),

n an edema of the eyelids in association with local injury, allergic reactions, hypoproteinemia, trichinosis, and myxedema.

edema, pitting,

n a persistent indentation of the skin when pressure is applied to an edematous area.



Periorbital edema.

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edema

an abnormal accumulation of fluid in the cavities and intercellular spaces of the body.

Edema can be caused by a variety of factors, including hypoproteinemia, in which a lowered concentration of plasma proteins decreases the osmotic pressure, thereby permitting passage of abnormal amounts of fluid out of the blood vessels and into the tissue spaces. Some other causes are poor lymphatic drainage, increased capillary permeability (as in inflammation), and congestive [heart failure](#). See also [anasarca](#), [ascites](#), [hydrothorax](#), [hydropericardium](#) and anatomically located edemas, e.g. brain, corneal, pulmonary edema.

angioneurotic edema

see [angioedema](#).

cardiac edema

is part of the syndrome of congestive heart failure. It comprises 'bottle jaw', jugular vein engorgement, edema of the brisket and underline, and ascites, hydrothorax and hydropericardium. See also congestive [heart failure](#).

dependent edema

edema affecting most severely the lowermost parts of the body.

edema disease

1. in **pigs** a highly fatal disease of young pigs in the weaner and grower age groups characterized by incoordination, a hoarseness of voice, weakness, flaccid paralysis and blindness. Edema of the eyelids, face and ears is diagnostic but is seldom visible on clinical examination. The course is short, often less than 24 hours, and many pigs are just found dead. The disease is caused by the opportunistic proliferation of specific serotypes of *Escherichia coli* in an intestinal environment brought about by a change to a diet more dense in carbohydrates. These have pilus attachment antigens that allow attachment of the organism to the small intestines and produce a verotoxin (VT2e) which produces an increase in vascular permeability in the target vessels in the CNS with resultant neurological disease. Called also gut edema, bowel edema.

2. in **goats** a disease caused by *Mycoplasma* F38; a fatal cellulitis.

gravitational edema

see dependent edema (above).

gut edema

see edema disease (above).

hepatic edema

edema is a common accompaniment of hepatic disease because of the decline in production of plasma proteins and a fall in the blood's hydrostatic pressure. Ascites may occur independently because of portal hypertension when there is severe liver disease and obstruction to blood flow in the portal vein.

hypoproteinemic edema

caused by insufficient production of albumin or excess loss through a protein losing enteropathy. See hepatic edema (above), [John's disease](#), [proliferative](#) enteropathy, type II [ostertagiasis](#).

laryngeal edema

see [laryngeal](#) edema.

leg edema

a disease of market age turkeys of unknown cause and characterized by edema of the legs and focal muscle necrosis.

low-pressure edema

noncardiogenic pulmonary edema. See acute [respiratory](#) distress syndrome.

edema neonatorum

edema of the newborn. See [lymphatic vessel obstruction](#).

pitting edema

edema in which pressure by the clinician's finger leaves a persistent depression in the tissues.

subcutaneous edema

may be generalized and constitute [anasarca](#). Local areas of edema occur in such other conditions as [angioedema](#) and [urticaria](#), edematous plaques in dourine and infectious equine anemia, and in purpura hemorrhagica.

vasogenic edema

that characterized by increased permeability of capillary endothelial cells; the most common form of brain edema.

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oedema

The presence of an excessive amount of fluid in or around cells, tissues or serous cavities of the body. In the eye oedema can occur in the cornea, the conjunctiva, the uvea, the retina, the choroid, and the ciliary body. Corneal oedema usually accompanies eye diseases, or contact lens wear with low oxygen transmissibility. Corneal oedema is easily seen with a slit-lamp using retroillumination or sclerotic scatter illumination. Quantitatively, it can be assessed with the addition of a pachometer that measures corneal swelling. Beyond about 4% swelling, there appear **striae** (wispy greyish-white lines usually vertical) in the stroma. Beyond about 8% swelling, there appear **folds** (dark lines) believed to represent physical buckling of the posterior corneal layers. Corneal swelling of 15% or greater, which indicates a gross separation of the collagen fibres of the stroma, results in a hazy or cloudy appearance of the cornea. There is a physiological oedema occurring during sleep in every human cornea amounting to an increase in thickness of about 4%. Corneal oedema gives rise to the appearance of haloes around lights, photophobia, spectacle blur, losses in corneal transparency and sometimes stinging. Management depends on the cause and tissue involved. If due to contact lenses, refitting with daily wear lenses of higher oxygen transmissibility and reducing wearing time usually solves the problem. *Note:* also spelt edema. See [endothelial blebs](#); [central corneal clouding](#); [hypoxia](#); [silicone hydrogel lens](#); [oxygen permeability](#); [critical oxygen requirement](#); [pachometer](#); [overwear syndrome](#).

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edema

Fluid retention, water retention Physical exam An excess of fluid in cells or tissues due to disease or injury, quantified as 1+, 2+, 3+. See [Angioneurotic edema](#), [Brawny edema](#), [Cerebral edema](#), [Cyclic edema](#), Cytotoxic edema, Flash pulmonary edema, [Hereditary angioneurotic edema](#), [High-altitude cerebral edema](#), High-altitude pulmonary edema, [Leukoedema](#), [Macular edema](#), Malignant edema, [Pedal edema](#), Pseudopapillaedema, [Pulmonary edema](#).

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e-de-ma (e-dē'mă),

1. An accumulation of an excessive amount of watery fluid in cells or intercellular tissues.
2. At the gross level, used to describe the physical sign commonly likened to swelling or increased girth that often accompanies the accumulation of fluid in a body part, most often a limb.
[G. *oidēma*, a swelling]

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e-de-ma (ĕ-dē'mă)

- An accumulation of an excessive amount of watery fluid in cells, tissues, or serous cavities.
Synonym(s): oedema.
[G. *oidēma*, a swelling]

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e-de-ma (ĕ-dē'mă)

1. Excessive fluid in cells or intercellular tissues.
2. At the gross level, used to describe physical sign commonly likened to swelling or increased girth that often accompanies fluid accumulation in a limb.
[G. *oidēma*, a swelling]

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Patient discussion about Edema.

Q. does mosquito bites considered as an edema a bet with a friend- please help solve an issue an help me win a new I pod :)

A. (don't take the mini i-pod, it sucks). it's true-the mosquito has a number of proteins and materials in his saliva that works as anticoagulants and vasodilators (blood vessel broadening). these causes the bite area to start an immune reaction and one of the consequences is an edema-"an increase of interstitial fluid in any organ", that means fluids are exiting blood system. in this case- not too much...

Q. what is "pulmonary edema" and what are the risks? my Dr. told me I'm in a risk group for pulmonary edema, he tried to explain what it is but i didn't understand fully...if someone may give me a brief explanation- I'll appreciate it!

A. pulmonary edema occurs when, lets say, your heart left ventricle stops working properly and your right ventricle works fine. that means your lungs getting lets presume- 1 liter of blood -but your left ventricle can pump out of it only 990 ml. that means you have high blood pressure in your lungs and fluid comes out of blood vessels and fills your lungs, making it harder and harder breathing.

[Read more or ask a question about Edema](#)

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By definition, pulmonary **edema** is the accumulation of fluid in the lungs, particularly in the alveoli.
[Cardiogenic pulmonary edema](#) by *Wojciechowski, Bill / FOCUS: Journal for Respiratory Care & Sleep Medicine*

Introduction Remitting, seronegative, symmetric synovitis with pitting **edema** (RS3PE) is a syndrome with an acute onset, benign course characterized by rheumatoid factor seronegativity, **edema** on the dorsum of the hands and feet, symmetric distal synovitis, and flexor tendinitis on the fingers.
[Syndrome of remitting seronegative symmetrical synovitis with pitting ...](#) by *Paksoy, Fatma; Ulas, Turgay; Mazi, Emrah Erkan; Damar, Ayda Batuan; Borlu, Fatih / Turkish Journal of Rheumatology*

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