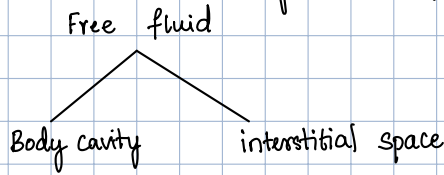


# Edema

**Definition:** abnormal & excessive accumulation of "free fluid" in the interstitial tissue spaces & serous cavities.

**Ex:** Ascites  
Pleural effusion  
Hydropericardium



**Types:**

a) Localised - lymphatic edema  
b) Generalised - renal edema ] LOCATION

a) Transudate - filtrate of blood plasma without changes in endothelial permeability  
b) Exudate - edema of inflamed tissue associated with increased vascular permeability. ] FLUID COMPOSITION.

**Pathogenesis:**

1. **Decreased plasma Oncotic Pressure**

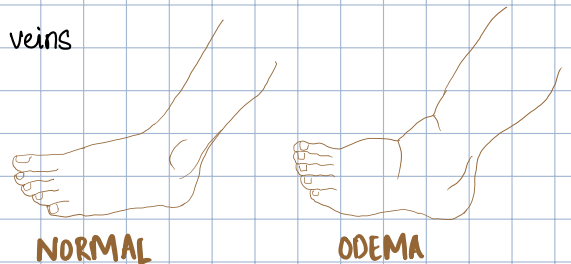
↓ plasma protein → outward movement of fluid from capillary wall → interstitial edema  
Ex: renal edema - nephrotic syndrome, Acute GN.  
ascites - cirrhosis of liver.  
hypoproteinaemia.

2. **Increased capillary hydrostatic pressure**

>12mmHg → no reabsorption of fluid → edema  
Ex: Cardiac edema  
Ascites  
Passive congestion - thrombosis, varicose veins

3. **Lymphatic Obstruction**

- removal of lymph nodes
- filariasis
- lymphoma
- Milroy's disease



4. **Tissue factors:**

- 2 forces in interstitial space
  - oncotic pressure - increased → ↑ vascular permeability
  - tissue tension - decreased → loose subcutaneous tissue of eyelids & ext. genitalia

## 5. Increased Capillary permeability.

- injured endothelium → gaps → leakage of plasma proteins → interstitial fluid → reduced oncotic pressure → oedema.

Ex: Generalised - poison, drugs, anoxia

Localised - inflammatory oedema - infections, allergic reactions, insect bite.

## 6. Sodium and Water Retention.

Na → absorbed → PCT → kidney.

Intrinsic renal mechanism - hypovolaemia → baroreceptors in carotid sinus → vasomotor center → renal ischaemia → ↓ GFR → ↓ Na in urine → retention of Na.

Extrinsic renal mechanism - Aldosterone - renin-angiotensin mechanism.

↳ increases reabsorption of sodium → ↑ in blood pressure.

ADH Mechanism - ↑ ADH → highly concentrated urine.

Ex: Cardiac oedema - congestive cardiac failure

ascites of liver disease

nephrotic syndrome, acute glomerulonephritis.

## Difference between Transudate and Exudate Oedema.

Feature	Transudate	Exudate
1. Definition	Filtrate of blood plasma without changes in endothelial permeability	Oedema of inflamed tissue associated with increased vascular permeability
2. Character	Non-inflammatory oedema	Inflammatory oedema
3. Protein content	Low (less than 1 gm/dl); mainly albumin, low fibrinogen; hence no tendency to coagulate	High (2.5-3.5 gm/dl), readily coagulates due to high content of fibrinogen and other coagulation factors
4. Glucose content	Same as in plasma	Low (less than 60 mg/dl)
5. Specific gravity	Low (less than 1.015)	High (more than 1.018)
6. pH	> 7.3	< 7.3
7. LDH	Low	High
8. Effusion LDH/ Serum LDH ratio	< 0.6	> 0.6
9. Cells	Few cells, mainly mesothelial cells and cellular debris	Many cells, inflammatory as well as parenchymal
10. Examples	Oedema in congestive cardiac failure	Purulent exudate such as pus