Risks of VTE

Some people are more at risk of developing VTE than others. The risk increases if you come into hospital and you:

- have undergone major surgery
- are aged over 60
- have long periods of immobility or a reduction in your usual level of mobility
- are taking certain medications, such as HRT, oral contraception, tamoxifen, raloxifene or chemotherapy
- are pregnant or have had a baby within the last six weeks
- have cancer or are undergoing cancer treatment
- have a body mass index greater than 30
- have had a previous venous thromboembolism
- are dehydrated
- have certain blood diseases
- have a family history of thrombosis
- have an inherited or acquired clotting problem
- are suffering from an acute medical illness
- have more than one medical condition such as heart disease, diabetes or a respiratory illness
- have inflammatory disease such as Crohns or rheumatoid arthritis

Contact information

Anticoagulation nurse specialist
University Hospital Southampton NHS Foundation Trust
Southampton General Hospital
Tremona Road
Southampton
SO16 6YD

Telephone: 023 8120 6269

More information is available from the following sources:

www.nice.org.uk www.thrombosis-charity.org.uk www.patient.co.uk/health/Deep-Vein-Thrombosis.htm

If you need a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone 023 8120 4688 for help.

www.uhs.nhs.uk



Preventing blood clots

Information for patients



About blood clots

Blood normally flows quickly and uninterrupted through our veins. Sometimes, however, clots can form that either reduce the blood flow or stop it completely.

A deep vein thrombosis (DVT) is a blood clot in a vein, usually in the leg or pelvis, and its most common cause is immobility.

A pulmonary embolism (PE) can occur if part of the blood clot breaks off and travels to the lung.

Venous thromboembolism (VTE) is a term that includes deep vein thrombosis and pulmonary embolism.

Preventing blood clots is a priority for our hospital staff. Our doctors, nurses, pharmacists and other members of staff all play an important role in keeping you safe.

From simple leg exercises to wearing special stockings, there are a number of measures that will help minimise your risks of suffering a hospital-acquired VTE.

Deep vein thrombosis

DVT is a blood clot in one of the deep veins in the body. Symptoms include swelling of the calf or thigh, usually accompanied by pain, hotness or redness, or difficulty in weight bearing.

Pulmonary embolism

PE occurs when a piece of blood clot breaks off into the bloodstream and blocks one of the blood vessels in the lungs.

Symptoms include difficulty in breathing or shortness of breath, coughing up bloodstained sputum or chest pain that is often worse on breathing in.

These can sometimes be accompanied by symptoms of DVT.

Prevention

On admission to hospital, each patient has their risk for VTE assessed and, if necessary, is then given preventative measures.

If it has not been discussed with you, please feel free to ask your doctor, nurse or pharmacist what is being done to reduce your risk of VTE.

You may be given one or more of these treatments:

Medication

Drugs used to prevent and treat blood clots are called anticoagulants. They are sometimes given in tablet form if they are going to be used for a prolonged period or by injection if a faster-acting drug is needed.

While in hospital, it is likely that the drug used will be an injection of heparin.

In some situations medication may need to be continued once you have been discharged from hospital. For some patients this may be an injection. If this is the case then you or a member of your family will be supported and shown how to give it.

Anti-embolism stockings

You may be measured and fitted with stockings, usually thigh length, and should be shown how to wear these correctly. The stockings work by reducing damage to the leg veins that expand when you are not mobile and help return blood to the heart. They should be worn day and night until you are back to your normal levels of mobility. It is important that you are shown how to put them on and care for them before you go home.

Compression devices

These are inflatable sleeves that are fitted around the leg or foot while you are immobile in your hospital bed. They inflate at regular intervals and the pressure increases the flow of blood back to the heart.

Keep moving

It is important to move around as soon as possible, especially after surgery. This is sometimes the only measure that needs to be taken.

Leg exercises

Point your toes down and bend the foot up at regular intervals as this helps to pump blood back to the heart. Rotate your ankles. Do this at least ten times an hour when you are inactive for long periods of time.

Drink plenty of fluid

Dehydration can also increase your risk of DVT, so make sure you drink enough water or other fluid.

Going home

When it is time for you to be discharged, it is important to continue any treatments that you have started until they have finished. If you have concerns about side effects, please discuss with your GP as soon as possible.

If you experience any VTE symptoms or bleeding once you are at home, you should seek urgent medical advice from your GP or nearest emergency department.