

Preventing Deep Vein Thrombosis (DVT) and Pulmonary Embolism (PE)

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After I go home

If you are prescribed anticoagulant this may be stopped when you are discharged, or you may need to continue with it for a while at home.

If you have had stockings fitted you should continue to wear these until you are fully mobile.

Try not to become dehydrated (drink plenty of fluids) and keep as active as you can.

What are the possible symptoms of VTE and what should I do if I have them?

If you have:

- Unexplained pain and swelling in your legs
- Chest pain when you take a breath
- Breathlessness
- Coughing up blood

**Seek medical advice straightaway
either from your GP or hospital.**

If you develop DVT or PE anticoagulant medication is very effective at treating the problem.

Who can I contact form more information?

If you have any questions or would like any more information, please just ask your doctor, nurse or pharmacist: or contact the Trust VTE Nurse Specialists.

VTE Nurse Specialists
Quality & Risk Department
Lower Ground 1
Nightingale House
Tel: 0151 430 2693

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

Introduction

The risk of developing a thrombosis may be increased during a hospital stay for various reasons. It can cause pain, discomfort and lead to long term problems in the limbs and lungs. It may even be fatal.

We have written this leaflet to explain how the risk of developing venous thromboembolism (see below) can be reduced.

It does not replace explanations and information given to you by our staff but we hope it is a helpful guide to us before, during and after your stay in hospital. If you have any questions or need further information, please ask a member of staff.

What is thrombosis?

When we cut ourselves, we bleed. To stop us from bleeding too much the body triggers a protective blood clotting mechanism and a scab forms on our skin.

Sometimes a clot can occur inside a blood vessel in the body rather than on the skin. When this happens it can slow down the flow of blood in that part of the body.

What is venous thromboembolism?

Venous Thromboembolism (VTE) can be a deep vein thrombosis or a pulmonary embolism. **Deep Vein Thrombosis (DVT)**. Typically these clots form inside the veins of the leg, blocking blood flow and making the leg swollen and painful.

Sometimes clots break off and become lodged in one of the arteries of the lung. This is a potentially serious condition called a **Pulmonary Embolism (PE)**. It can cause pain and breathlessness and lack of oxygen in the blood.

There are many risks of developing a VTE. Nearly everyone coming into hospital is at an increased risk, especially if you are having an operation or are unwell that you are confined to a bed. Many other factors may increase your risk. Examples include a previous history of DVT or PE either yourself or in the family. Conditions such as cancer, heart failure, respiratory disease and some medications e.g. certain contraceptive pills, HRT etc can increase risk.

Please ask your hospital doctor or nurse if you wish to discuss your own personal risk factors.

What can do to reduce the risk of developing DVT and PE?

Before coming to hospital:

- **Keep mobile** - move around as much as possible in the weeks leading up to your surgery.
- **Talk to your doctor if you are taking the contraceptive pill or hormone replacement therapy (HRT)** - these medications may increase your risk of DVT and so your doctor may advise you to stop taking them in the weeks leading up to your surgery.

When you come into hospital

Your clinical team will assess your risk of DVT and consider what can be done to reduce this.

Measures to reduce the risk include:

- **Moving around** as soon as possible after surgery is important and in many cases will be the only measure you need to take to reduce your risk of DVT.
- **Special stockings** have been shown to reduce the risk of DVT. These are called anti-embolism or graduated compression stockings. If your team think stockings would be helpful you will be fitted with a pair.
- **Medication** - if we think you are at fairly high risk of a VTE, then we may give you some medication which stops the blood from clotting too quickly. The drug normally prescribed is given by an injection under the skin once or twice a day. If you are already taking anticoagulant medications such as Warfarin, Rivaroxaban or Apixaban we will only prescribe these other drugs if you have to stop taking your anticoagulant for any reason.

Please remember to tell your doctor if you are already taking an anticoagulation medication.