Stop the clot
Important facts about blood clots
Three important facts about blood clots

1. If you are in hospital you have a one in five chance of developing a blood clot.

2. Blood clots in your legs and lungs can cause permanent disability and can be life-threatening.

3. Preventative measures reduce the chances of getting a blood clot by 60%.

This leaflet is to help you understand the risks of you getting a blood clot and the treatment available to prevent them.

What you need to know about blood clots
Your body forms blood clots to stop you from bleeding. This can be disrupted and blood clots may form where they are not supposed to. This happens in the general population in about one in 1,000 people. You will have heard about DVT after long flights but you are more likely to get a DVT in hospital.

Deep Vein Thrombosis
If you are not very mobile, dehydrated or have damage to the blood vessels in your legs then you may form blood clots (deep vein thrombosis or DVT). This will block the blood flow and your leg will swell up and may become hot, painful and discoloured. This is not life-threatening but can cause permanent damage to your leg.

Pulmonary Embolus
If part of the clot breaks off it can travel to your lungs (pulmonary embolus or PE). If this happens you can’t get enough oxygen into the rest of your body. You may get chest pains and be out of breath. A small number of patients develop large clots which can sometimes be fatal.
Am I at risk?
Some factors make you more at risk of developing a blood clot:

- Age over 65.
- You or a family member has had a clot (DVT or PE) in the past.
- You are overweight.
- Long-standing heart or lung problems.
- Severe infection or inflammation.
- Cancer.
- Surgery especially hip or knee replacement.
- You are pregnant or have just given birth.
- Estrogen therapy including the oral contraceptive pill, hormone replacement therapy and tamoxifen.
- You are immobile or have broken bones.
- You have a blood disorder which makes your blood more likely to clot.
- Dehydration.
- Varicose veins with phlebitis.

What will we do?
1. Work out your risk for getting a blood clot.
2. Discuss preventative treatment with you.

There are two main ways of reducing the chance of blood clots:
- Compression stockings or calf pumps which stop blood pooling in your legs by increasing blood flow
- Heparin injections that thin your blood. If you are having the injections for more than a week you will need to have a blood test.

Possible side effects of heparin include bruising around the injection site. If you have bruising or bleeding you can’t explain you should go to the A&E department.

Not all treatments are suitable for everyone. Your doctor may consider extended treatment to reduce the risk of clots.

Situations where your doctor may consider extended VTE prophylaxis or ongoing treatment to reduce the risk of clots in legs or lungs on discharge are:

- Leg in plaster cast
- Cancer
- Restricted mobility
- Total hip and total knee replacement
What do you need to do?
- Ask the staff looking after you if you have had your risk worked out.
- Walk around as much as possible. If you are in bed keep moving your feet and legs.
- Drink plenty of fluids.
- Keep your compression stockings or Flowtron boots on.
- Make sure you get any tablets or injections that you have been prescribed.

What should I look out for?
The following symptoms may be a sign of a DVT or PE. If you get any of the following symptoms while you are in hospital please call a member of staff:
- Pain or swelling in your legs.
- Hot or discoloured skin on your legs.
- Pains in your chest, back or ribs worse on taking a deep breath.
- Difficulty breathing or you are out of breath.
- Coughing up blood.

If you are at home and develop any of the above symptoms call for help at once.

What should I do on Discharge?
- Drink plenty of fluids.
- Walk about as much as possible.
- If you develop symptoms of leg pain, shortness of breath or chest pain seek medical advice.
- If you feel that your mobility is going to be quite restricted on discharge and you did have Heparin injections in hospital please discuss with the medical team.
Further Information

Lifeblood, the thrombosis charity
www.thrombosis-charity.org.uk

Department of Health
www.dh.gov.uk

National Institute of Clinical Excellence:
Clinical Guideline number 46.
www.nice.org.uk/Guidance/CG46
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