

PATIENT SERVICES DEPARTMENT

It is important that you speak to the department you have been referred to if you have any questions (for example, about medication) before your investigation or procedure.

If you are unhappy about the service you have received and would like to talk about it or make a formal complaint, please contact Patient Advice and Liaison Service on 0300 123 1732.

If you have a complaint and you want it to be investigated, you should write direct to the Chief Executive at Worcestershire Acute Hospitals NHS Trust, Charles Hastings Way, Worcester WR5 1DD or contact the Patient Services Department for advice.

If you would like this information in other formats or languages please call 01905 760453 or email: communications@worcsacute.nhs.uk.

www.worcsacute.nhs.uk

PREVENTING BLOOD CLOTS WHEN YOU ARE IN HOSPITAL

Deep Vein Thrombosis (DVT)

REMEMBER

Early mobilisation is one of the simplest methods of clot prevention, so keep exercising your legs, even if it is just in bed, this will help to keep your veins healthy.

Further Information

For further information please ask a member of the team caring for you or ask to speak to the DVT Nurse on 01905 733784.

The organisations below can provide more information and support for people in hospital who may be at risk of DVT.

Anticoagulation Europe
www.anticoagulationeurope.org

British Heart Foundation
Heart Helpline 0300 330 3311
www.bhf.org.uk

H.E.A.R.T. UK - The Cholesterol Charity
Helpline: 0845 450 5988
www.heartuk.org.uk

Lifeblood: The Thrombosis Charity
Tel: 0207 633 9937
www.thrombosis-charity.org.uk

Deep vein thrombosis (DVT)

Your blood has a mechanism that normally forms a 'plug' or clot to stop the bleeding when you are injured, for example when you have a cut to your skin. Sometimes the blood's clotting mechanism goes wrong and forms a blood clot when there has been no injury. When this happens inside a blood vessel, the blood clot is called a **thrombus**. When the blood clot is deep inside one of the veins in your body, most commonly in the leg, it is called **deep vein thrombosis (DVT)**. If the blood clot comes loose it can travel through your bloodstream to your lungs. This is called **pulmonary embolism** and it can be fatal. DVT and pulmonary embolism together are known as **venous thromboembolism**.

Why can a blood clot form?

DVT is more likely to happen when you are unwell and inactive or less active than usual. When you are unwell your blood may become temporarily 'sticky' and flow more slowly. If you are inactive or less active than usual it is more likely that a blood clot will form inside a vein.

People in hospital can be at risk of DVT because they may be unwell and inactive for long periods of time. DVT can happen at any time during a stay in hospital or in the weeks after leaving hospital.

What measures will be taken to help prevent blood clots in the leg (DVT)?

- Not all DVT can be prevented, but the risk of developing a clot can be significantly reduced.
- If you are considered to be at risk of developing a DVT a drug called Heparin will be given to you.
- Heparin is usually given as a small injection into your stomach once a day and helps prevent blood clots.

If you are coming into hospital for surgery

There are a number of steps your healthcare team can take to help reduce your risk of DVT during your stay in hospital. They should make sure you have enough fluids so that you do not become dehydrated. They should also encourage you to move around as soon as you are able.

If you are having an operation as a day patient and you are at risk, your healthcare team may decide to offer you treatment to help prevent DVT. They may ask you to continue the treatment at home after your operation.

It is important that you follow the instructions given to you by your healthcare professional to reduce the risk of blood clots. This might include wearing compression stockings or continuing your heparin medicine for a few weeks after your operation.

ANTI-EMBOLISM STOCKINGS

Anti-embolism stockings (also known as compression stockings) are tight stockings specially designed to reduce the risk of DVT. The stockings squeeze your feet, lower legs and thighs, helping your blood to circulate around your legs more quickly. Your healthcare team should measure your legs before fitting stockings to make sure you are given the right size. If your legs become swollen they should be measured again and new stockings fitted.

It is important to wear the stockings for as much of the time as possible, day and night, whether in hospital or afterwards at home, until you are back to your usual level of activity. Your healthcare team should show you how to use them. They should check regularly to make sure you are using them correctly and offer help so that you get the most benefit from them. If you have ulcers or wounds on your legs your healthcare team should take special care when using anti-embolism stockings.

What can I do to help myself?

There are some simple things that you can do to help yourself that can reduce your risk. One of the most important things you can do for yourself to reduce the risk of a blood clot is:

Mobility

- Make sure you get up and about as soon as possible. It is important that whenever possible you walk or exercise your legs e.g. walk to the toilet and back to your chair.
- Exercise your legs whilst in bed or sitting in a chair.
- Make sure you drink plenty, unless on a restriction, plain water is good for you.

How to tell if you might have DVT or pulmonary embolism

There are certain signs to look out for after your hospital treatment that may mean you have developed DVT or pulmonary embolism. You should seek help **immediately** if you experience any of the following in the days or weeks after your treatment.

- You have pain or swelling in your leg
- The skin on your leg feels hot or is discoloured (red, purple or blue) other than bruising around the area where you have had an operation.
- The veins near the surface of your legs appear larger than normal or you notice them more.
- You become short of breath.
- You feel pain in your chest or upper back.
- You cough up blood.