Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Reducing the Risk of Venous Thromboembolism (VTE Blood Clots) v8

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Reducing the Risk of Venous Thromboembolism (Blood Clot)

Patient Information

VTE Department

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Introduction

This information leaflet is to help you to understand the care and treatment of people who are at risk of developing a Venous Thromboembolism (VTE) from surgery or during hospital admission as an inpatient. Your healthcare team will be happy to answer any questions you have.

Venous Thromboembolism

This is the medical term for a blood clot that forms within a vein. The two commonest sites affected are the legs, when it is called a Deep Vein Thrombosis (DVT), or in the lungs, when it is called a Pulmonary Embolism (PE).

A DVT can be painful and cause significant leg swelling, which can make walking difficult, they can also cause a PE to occur. A PE can cause chest pain, difficulty in breathing and they can be fatal.

Risk Factors

There is a nationally agreed set of risk-factors which all patients having surgery or being admitted to hospital are assessed for.

Example of some risk factors:

- Undergoing surgery

- You or a member of your family have had a blood clot in the past
- You have cancer
- You are taking oestrogen therapy
- You are overweight (body mass index greater than 30)
- You are unable to move around
- You are over 60 years old

If you have one or more of the risk-factors, then you will be considered for ways to reduce your risk of developing a VTE.

Reducing the risk of VTE

There are two main ways hospitals have of reducing your risk of developing a VTE:

- Using compression stockings
- Using medicine

Compression Stockings

Compression stockings are tight legwear specially designed to reduce the risk of a DVT. The stockings squeeze your feet, lower legs, and thighs, helping the blood to move around your body better. They are more commonly used for patients requiring surgery, rather than patients admitted to hospital for other reasons.

If you are offered compression stockings it is important to wear them as much as possible, until you are back to your usual level of activity.

Medicines

Depending on your risk factors, your healthcare professional may also offer you medicine during your hospital stay. The commonest medicine currently used in this Trust to prevent VTEs is called Dalteparin (brand name – Fragmin). It is an injection given once a day into your tummy or thighs. Some patients requiring surgery to their knees or hips may be offered a tablet instead of an injection.

The medicines used to prevent VTEs can increase the risk of bleeding. Therefore, everyone who is considered for one of these medicines will also be assessed for their risk of bleeding according to national guidance. If your risk of bleeding is felt to be higher than your risk of a VTE, your healthcare professional will discuss this with you in more detail.

Additional ways to reduce your risk

Your healthcare team will encourage you to move about or help you to undergo leg exercises. It is also important to drink plenty of fluids where possible to help reduce your chances of getting a blood clot. If you are struggling to drink, then your healthcare team may give your fluids through a drip into your vein.

After discharge from hospital

After being discharged from hospital some patients may still be at a high risk of developing a VTE. Therefore, some patients are continued on a medicine or advised to wear stocking for several more weeks. Your healthcare professional will explain this in more detail if this applies to you.

How to tell if you have a VTE

There are certain signs to look out for that could mean you have a VTE. You should tell your healthcare team or GP (if at home) immediately if you experience any of the following in the days or weeks after your inpatient admission or surgery:

- You have pain or swelling in your leg
- The skin on your leg is hot or discoloured (red, purple or blue)
- Your feet are numb or tingling
- The veins near the surface of your legs appear larger than normal
- You become short of breath
- You feel pain in your chest, back or ribs which gets worse when you breathe deeply
- You cough up blood

For further information please speak to a member of your healthcare team or GP.

Reference

Overview | Venous thromboembolism in over 16s: reducing the risk of hospital-acquired deep vein thrombosis or pulmonary embolism | Guidance | NICE



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