

Patient information

Venous Thromboembolism (VTE) Prophylaxis (Prevention) During your Inpatient Stay

Haematology Department

What is Venous Thromboembolism (VTE)?

There are two types of VTE:

A **Deep Vein Thrombosis (DVT)** is a clot, which has formed in the deep veins in the leg. It most commonly starts in the calf veins but can extend up into the thigh veins. It can also occur in the arms.

A **Pulmonary Embolism (PE)** happens when all or part of the DVT breaks free and passes through the blood vessels and travels to the lungs.

Signs and Symptoms of VTE

Symptoms of DVT include throbbing pain in one leg, usually in the calf or thigh, when walking or standing up, swelling in one leg (rarely two), warm skin around the painful area, red or darkened skin around the painful area (this may be harder to see on brown or black skin) and swollen veins that are hard or sore when touched.

Symptoms of a PE include shortness of breath, either sudden or gradual, chest pain, blood-stained phlegm, and collapse (as well as the symptoms of a DVT mentioned above).

If you develop any of these symptoms, please alert medical staff immediately.

Risk Factors for VTE

Some people are more at risk of VTE than others. The risk increases when you come into hospital, especially if you:

- Have history of VTEs
- Are overweight/obese
- Experienced long periods of reduced mobility or a reduction in your usual level of mobility
- Are suffering from an acute illness
- Take combined contraceptives (I.e., the pill, the contraceptive patch, or the vaginal ring) or hormone replacement therapy (HRT)

- Take tamoxifen, raloxifene or chemotherapy
- Had recent surgery especially on hips or knees
- Are aged over 60 years.
- Are pregnant or have given birth in the past six weeks.
- Are dehydrated.
- Are a current Smoker.
- Have varicose veins with phlebitis.
- Have inflammatory disease such as Crohn's disease or rheumatoid arthritis.
- Have a close relative who has had a VTE e.g., mother, father, brother, sister, child.
- Have an inherited or acquired clotting problem.
- Have certain blood diseases.
- Have undergone long distance travel of more than four hours within the last eight weeks.

You can reduce the risks associated with this condition by becoming aware of the signs and symptoms of VTE and communicating any concerns with the nursing/medical team during your inpatient stay.

How can I help to reduce my risk of developing a VTE?

You can help reduce the risk of developing a VTE by:

- Staying hydrated and drinking plenty of fluids (unless advised otherwise)
- Mobilising when able/safe to do so.
- Taking your medication as prescribed
- Wearing anti-embolism stockings or other devices if you are advised to (these will be provided)
- Doing leg exercises in bed (lying on your back or sitting, bend and straighten your ankles 10 times. Then, keep your knees straight during the exercise to stretch your calf muscles, try to do this exercise two or three times an hour)

How will hospital staff reduce my risk of VTE whilst I am in hospital?

Most DVTs and PEs can be prevented safely and effectively. Preventing blood clots is a priority for hospital staff. Our doctors, nurses, pharmacists, and other teams all play an important role in keeping you safe.

There are several different methods used to reduce your risk of developing a VTE in hospital. For all patients we reduce risk by:

- Encouraging you to remain as mobile as possible. This may include performing leg exercises.
- Encouraging you to stay hydrated, either by drinking plenty of fluids or by having intravenous fluids (a drip into your vein).
- Performing a VTE assessment during your admission to hospital and, if necessary, advising on preventative measures. We will also assess if any of the preventative measures may not be suitable for you.

Preventive measures include:

- Anti-embolism stockings may be offered to be worn on both legs (these are usually worn after surgery), they will be measured and fitted individually. These encourage blood flow through the legs and reduce the risk of VTEs. They may feel a little uncomfortable and tight at first but most people get used to them. It is important that you are shown how to put them on and care for them before you go home. If you are not sure, please ask a member of your healthcare team
- If you are in bed for a long time and/or have had a stroke, then you may be fitted with intermittent pneumatic pumping devices that are wrapped around each of your legs. They are very simple to use and feel like a blood pressure cuff. The device is inflated on your legs regularly for short periods to encourage blood flow.
- If blood thinning injections are deemed the most suitable, enoxaparin is the drug of choice, this belongs to a class of drugs called low molecular weight heparins (LMWH). It is a once or twice daily injection that is injected just under the skin into the fatty layer and is usually given in the stomach, thigh, or upper arm.
- The dose of LMWH used at LUHFT is based on your weight, this is different to what is recommended by the manufacturer but follows national best practice. This is called unlicensed dosing. If you would like more information about this, ask your doctor/nurse/pharmacist for an additional information leaflet.

Be aware that heparins are of animal origin i.e., porcine/pork derivatives and this may be of concern to some patients. If you have concerns about using animal products, please let the nurse or doctor responsible for your care know. Alternatives will be considered; their suitability, advantages, and disadvantages will be discussed with you by the medical team.

There is a risk of bleeding following the use of low molecular weight heparin injections, your bleeding risk will be assessed prior to these injections being given. Please let the nursing/medical team know if you develop any unexplained bruising or bleeding.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

Thrombosis UK is a charity that offers advice to patients about VTE on their website: www.thrombosisuk.org

Hospital LUHFT Hospital

Tel: 0151 706 2000 – ask to be directed to the ward you were discharged from

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