Preventing blood clots – a patient's guide

This leaflet explains more about blood clots, which can occur after illness and/or surgery.

A blood clot can occur in patients when they are in hospital, and up to 90 days after a hospital admission.

Deep vein thrombosis (DVT)

DVT is a blood clot (also known as a thrombosis) that forms in a deep vein, most commonly in your leg or pelvis. It may cause no symptoms at all or cause swelling, redness and pain.

Pulmonary embolism (PE)

If a clot becomes dislodged and passes through your blood vessels it can reach your lungs. This is called a PE. Symptoms include coughing (with blood-stained phlegm), chest pain and breathlessness. Health professionals use the term venous thromboembolism (VTE), to cover both DVT and PE.

Are blood clots common?

Blood clots occur in the general population in about one in 1,000 people every year. You may have heard about DVT in people who have been on a long flight, but you are much more likely to get a blood clot after going into hospital. In fact, about two-thirds of all blood clots occur during or after a stay in hospital. The Government recognises hospital-acquired blood clots are an important problem and has asked hospital doctors, nurses and pharmacists to assess each patient's risk. If you are at risk, your doctor or nurse will talk with you about what will be done to offer you protection against clots.

Who is at risk?

Any unwell adult admitted to hospital is at risk – that means most adults. Other factors that put people at greater risk include:

- A previous clot
- A recent diagnosis of cancer
- Certain "sticky blood" conditions such as antiphospholipid syndrome or factor V Leiden
- Being overweight
- Being immobile
- Oestrogen-containing contraceptives and hormone replacement
- Having an operation
- Lower limb surgery or injury requiring immobilisation
- Significant injury or trauma
- Pregnancy

What can be done to reduce my risk?

Stockings: In hospital, you might be measured and fitted with anti-embolism stockings for your legs. You should be shown how to wear them and told to report any new pain or discomfort in your feet or legs to a health professional. Your stockings will be removed for a short time every day so that you can have a wash and check for any skin problems.

Inflatable sleeves: the clinical team may ask you to wear calf or foot pumps. These are special inflatable sleeves around your legs or feet while you are in bed or sitting still in a chair. These will inflate automatically and provide pressure at regular intervals, increasing blood flow out of your legs.

Blood thinners: most patients at risk will be prescribed a small dose of an anticoagulant (blood thinner). These reduce the chance of having a blood clot by thinning your blood slightly. If you need to take these medicines when you leave hospital, you will be told how long to take them for. The blood thinner most often used is a type of heparin, which is given by injection. Blood thinning tablets are increasingly being used after orthopaedic surgery.

These methods of prevention must be used correctly to be effective. If you have any questions or concerns, please ask your doctor or nurse.

What can I do to help myself?

If possible, before coming into hospital:

- Talk to your doctor about contraceptive or hormone replacement therapy. Your doctor may consider stopping them in the weeks before an operation and will provide advice on temporary use of other methods if your usual contraceptive is stopped.
- Keep a healthy weight.
- Exercise regularly.

When in hospital:

- Keep moving or walking and get out of bed as soon as you can after an operation Ask your nurse or physiotherapist for more information.
- Ask your doctor or nurse: “What is being done to reduce my risk of clots?”
- Drink plenty of fluid to keep hydrated.

What happens when I go home?

Until you return to your usual level of activity, you may need to wear anti-embolism stockings after you go home. Your nurse will show you how to put them on. Your stockings should be removed for a short time every day so that you can have a wash and check for any skin problems. If you need to continue anticoagulation injections at home, your nursing team will teach you how to do this. If you have any concerns make sure you speak to a nurse before you leave.

If you develop any sign or symptoms of a blood clot at home, then seek medical advice immediately, either from your GP or your nearest hospital emergency department.

For more information

- The NHS Choices website contains patient information on blood clots. Visit www.nhs.uk
- NHS 111 service offers health information and advice from highly trained advisers, supported by healthcare professionals. NHS 111 is available 24 hours a day, 365 days a year and calls are free from landlines and mobile phones. Call 111.
- Patient Advice and Liaison Services (PALS) is based in the main entrance of the Whittington Hospital. They can be reached on 020 7288 5551 or email whh.tr-whitthealthpals@nhs.net
- Thrombosis charity, Thrombosis UK, also has more information. Visit www.thrombosisuk.org

Patient advice and liaison service (PALS)

If you have a question, compliment, comment or concern please contact our PALS team on 020 7288 5551 or whh-tr.whitthealthPALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3081. We will try our best to meet your needs.

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