

- Avoid oestrogen containing contraceptives and HRT where possible; discuss alternatives with your doctor
- Ask your doctor about using anticoagulant drugs or compression stockings for high risk periods such as hospital admission, surgery, plaster cast use or pregnancy.

If you develop the symptoms explained above, and are worried you have had a further DVT or a PE, you should see your doctor or attend the Accident and Emergency department immediately.

## References

Antithrombotic Therapy and Prevention of Thrombosis, 9th ed: American College of Chest Physicians Evidence-Based Clinical Practice Guidelines. Chest. 2012 February; 141(2 Suppl).

## NHS website

- [www.nhs.uk/conditions/deep-vein-thrombosis-dvt/](http://www.nhs.uk/conditions/deep-vein-thrombosis-dvt/)

## Further information

## Thrombosis UK

- [www.thrombosisuk.org/](http://www.thrombosisuk.org/)

## NHS website

- [www.nhs.uk/conditions/deep-vein-thrombosis-dvt/](http://www.nhs.uk/conditions/deep-vein-thrombosis-dvt/)

## Contact details

### Haematology Department

**Telephone:** 01483 5271122 **ext** 4488

## PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

**Telephone:** 01483 402757

**Email:** [rsc-tr.pals@nhs.net](mailto:rsc-tr.pals@nhs.net)

**Opening hours:** 9.00am–3.00pm  
Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

Past review date: January 2019

Future review date: January 2022

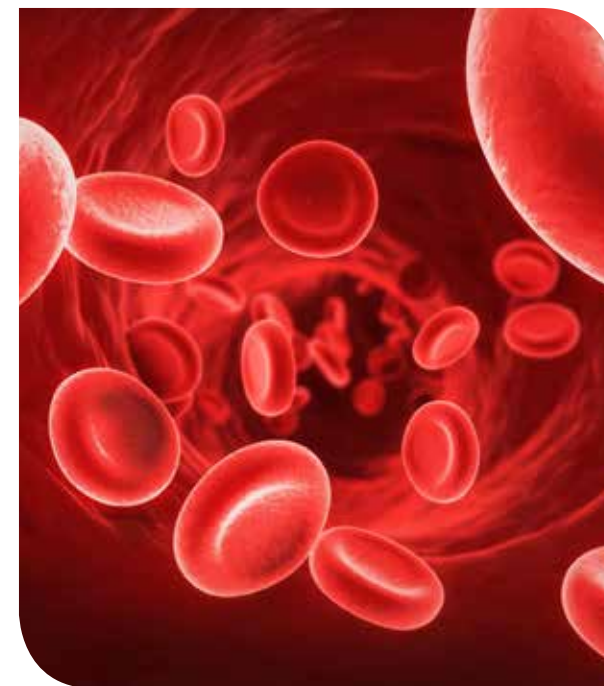
Author: Matthew Rogers

**PIN190124–1621**



# Deep Vein Thrombosis (DVT)

## Haematology Department



## Patient information leaflet

## What is a DVT?

---

Deep vein thrombosis, or DVT, is a blood clot that forms in a deep vein in the body, usually in the leg.

If a clot from your deep vein breaks off and travels through your bloodstream to an artery in your lungs it can partially or completely block blood flow. This is called pulmonary embolism, or PE.

## What are the symptoms?

---

When a DVT has formed the calf is usually painful and swollen and may be red or hot.

Symptoms that can suggest a pulmonary embolism include sudden onset shortness of breath, pain in the chest that catches you when you take a deep breath and coughing up blood.

## What causes a DVT?

---

About 1 in 1000 people have a DVT or PE every year. The risk is greater:

- As you get older
- If you have cancer
- If you are pregnant, on the oral contraceptive pill or on HRT
- If you have recently undergone surgery, been immobile in hospital or in a plaster cast
- If you smoke or are overweight
- If you have a family history of thrombosis or have a blood condition that increases the risk (thrombophilia).

## What is the treatment?

---

Once a DVT is diagnosed you will need to take drugs called anticoagulants, which stop the clot from getting bigger. The planned length of treatment will be explained; this will depend on the position of the clot, whether you have had clots before and whether there were any trigger factors for the clot.

Your anticoagulant treatment will be either tablets or daily injections. You will be seen in the anticoagulant clinic soon after starting your treatment. During this visit the nurse will discuss your anticoagulant treatment, make sure you are using it correctly and answer any questions you may have.

In most cases the pain and swelling will gradually settle over a few weeks or months. You should take regular pain killers (eg. paracetamol) if required. If it is getting worse consult your doctor.

## What are the complications?

---

If a DVT is not treated it can extend or break off into the bloodstream causing a pulmonary embolism (see above). This can be life threatening so it is important that you take your medication as instructed.

20–40% of patients with a DVT will continue to suffer recurrent pain and swelling of the affected leg. This is called the post-thrombotic syndrome (PTS) and is caused by damage to the vein. These symptoms can sometimes be alleviated by wearing compression stockings. You should check with your doctor that these

are suitable for you before using them. You need to be specially measured for these once the initial swelling has gone down. You can be referred to the hospital surgical appliances department, or can get them from larger local pharmacies via your GP.

If you have persistent symptoms you may benefit from assessment by a vascular surgeon. Your GP can arrange this.

## Exercise and rest – what I should or shouldn't do?

---

You should continue with gentle exercise to improve the circulation in the legs. This can reduce the chance of getting PTS. You should avoid vigorous exercise for four weeks after a DVT.

When you are sitting down you should raise your leg to improve swelling. You should avoid standing still for long periods of time.

You are advised to avoid flying for the first two weeks after a DVT, and until your symptoms are improving with treatment.

## How can I reduce the risk of getting another DVT or PE?

---

Having had a blood clot you are at risk of getting another. To reduce the risk:

- Lead a physically active life
- Avoid cigarette smoking
- Avoid becoming overweight
- Avoid prolonged immobility e.g. during long journeys