

Preventing venous thromboembolism (VTE)

Information for patients

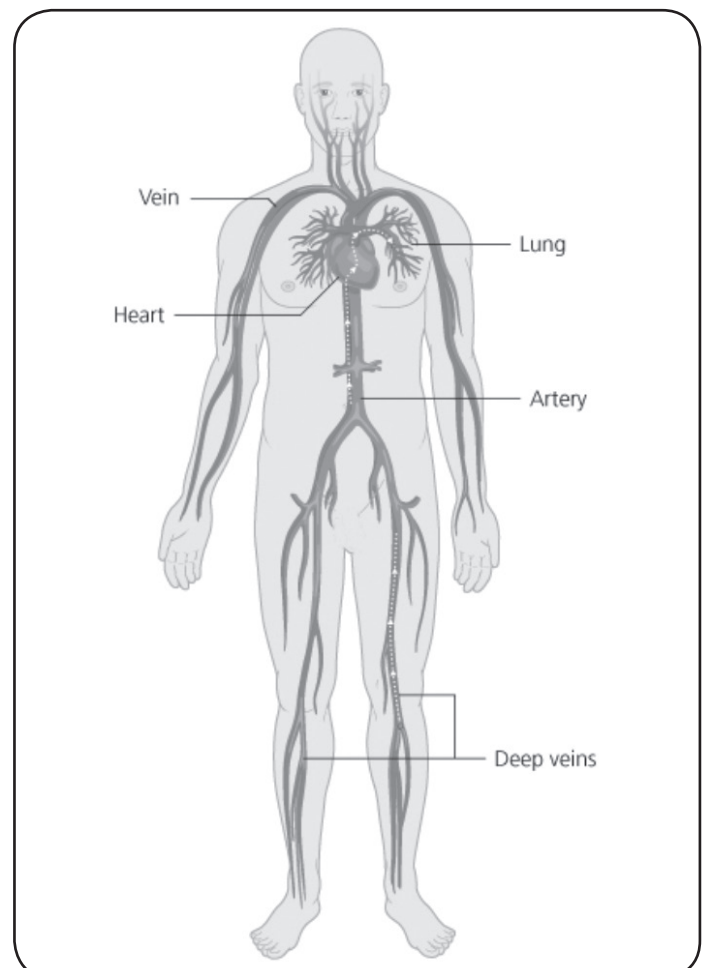
This guide is for patients who are being admitted to hospital in the near future. It explains venous blood clots (venous thromboembolism or VTE for short), which can form in your body after illness or surgery, and how to avoid them. After reading this guide, you can discuss VTE with your doctor and ask about the best way to lower your risk.

What is VTE?

VTE is the name given to a deep-vein thrombosis (called DVT for short) or a pulmonary embolism (called PE for short). A DVT is a thrombus (blood clot) that forms in a deep vein, most commonly in your leg or pelvis and can cause swelling and pain. In the longer term, DVT can cause painful, long-term swelling and ulcers. If a clot becomes dislodged and passes through your circulation and reaches your lungs, this is called a PE and can cause coughing (with blood stained phlegm), chest pain and breathlessness. It can be fatal. VTE diagnosis requires immediate treatment. If you develop any of these symptoms either in hospital or after discharge, please seek medical advice immediately.

Is VTE common?

VTE occurs in the general population in about one in 500 people. You will have heard in the news about DVT in people flying for long periods and suffering from 'economy class syndrome', but you are actually much more likely to get VTE if you are going into hospital because of illness or for surgery.



Who is at risk of VTE?

In addition to admission to hospital, there are other factors which place you at greater risk of VTE. These include a previous VTE, a recent diagnosis of cancer, and certain blood conditions such as clotting disorders. In addition, pregnancy, and certain contraceptive and hormone replacement tablets can increase your risk.

Will my risk of VTE be assessed?

The Government recognises VTE is an important problem in hospitals and has advised doctors and nurses that everyone being admitted to hospital should have a risk assessment completed. Your individual risk for VTE will be assessed by your clinical team. If you are at risk, your doctor or nurse will discuss with you what can be done to reduce your risk and will follow national guidelines and offer you protection against VTE.

What can I do to reduce my risk of VTE?

If your hospital admission has been planned several weeks in advance, there are some precautions which you can take to reduce your risk of VTE:

- Talk to your doctor about your contraceptive or hormone replacement tablets. Your doctor may consider stopping them in the weeks before your operation.
- Avoid travelling for more than three hours in the month before your operation if possible.
- Keep a healthy weight.

When in hospital:

- Keep moving or walking; leg exercises are valuable. You can ask to see a physiotherapist if you would like to learn some leg exercises.
- Ask your doctor or nurse: 'What is being done to reduce my risk of VTE?'
- Drink plenty of fluid to keep hydrated.

What will be done to reduce my risk of VTE in hospital?

If you are having an operation, ask your anaesthetist to consider which type of anaesthesia is most appropriate for you.

Anti-embolism stockings – if considered appropriate by your doctor, you will be measured and fitted with thigh-length stockings depending on your leg measurements. You should be shown how to wear them and advised to report any new symptoms in your feet or legs when wearing them to a doctor. These will reduce your risk of VTE.

The clinical team may ask you to wear a special inflatable sleeve or cuff around your legs while you are in bed. This will inflate automatically and provide pressure at regular intervals, increasing blood flow out of your legs. If they have been removed for more than three hours they should not be reapplied, unless agreed by a doctor.

Finally, your doctor might consider that you should take an anticoagulant injection or tablet, which reduces the chance of your blood clotting and stop DVT from forming. The drug normally prescribed at the Trust is heparin, which is given by injection.



Heparin is derived from pigs, so if you have any concerns about using animal products, please tell your doctor and they will discuss other options with you. There are new drugs becoming available in tablet form, which may be offered to you.

To be effective, these methods of prevention must be fitted, used and administered correctly, so if you have any questions or concerns, please ask your doctor for advice.

What happens after I have been discharged from hospital?

Anti-embolism stockings should be worn from admission until you return to your usual level of mobility. If you have been advised to continue anticoagulation medicine at home and you need help with administration of injections or tablets, please ask your nurse before discharge. If you do require injections after discharge, you will be given a 'sharps bin' so that you can safely dispose of them after use. Once your treatment is complete, close the lid on the sharps-bin until sealed and you can return it to King's. Some GP surgeries or local councils may agree to dispose of these also. Please remember that it is illegal to dispose of injections or sharps bins in your household waste. If you develop any signs or symptoms of VTE at home, then seek medical advice immediately, either from your GP (home doctor) or your nearest hospital emergency department.

Where can I find out more?

Please ask your doctor or nurse for more information. Alternatively, the NHS Choices website provides patient information on VTE. www.nhs.uk

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS

Tel: **020 3299 3601**

Email: kch-tr.pals@nhs.net

You can also contact us by using our online form at www.kch.nhs.uk/contact/pals

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND

Tel: **01689 863252**

Email: kch-tr.palskent@nhs.net

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.

Corporate Comms: 0341

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