

How to tell if you have a blood clot

There are certain signs to look out for after your operation that could mean you have a blood clot:

- You have pain or swelling in your leg
- The skin on your leg is hot or discoloured (red, purple or blue) other than bruising around the operation site
- Your feet are numb or tingling
- The veins near the surface of your legs appear larger or you notice them more
- You become short of breath
- You feel pain in your chest, back or ribs which gets worse when you take a deep breath
- You cough up blood

If you experience any of these symptoms in the days or weeks after your operation **you should contact your GP or the hospital immediately.**

After an operation

You should move about as soon as possible after your operation, to reduce the risk of getting a blood clot. If you cannot get out of bed yet, you will be shown how to do some simple leg exercises.

You are still at risk of developing a blood clot in the days and weeks after your operation. This risk continues until you have recovered from your operation and you are back to your usual level of activity.

It is important that you follow the instructions given to you by your healthcare professionals to reduce the risk of getting a

blood clot. This might include wearing compression stockings until you are fully mobile again, or continuing to take your anticoagulant medicine for several weeks after your operation.

You should also avoid long periods of travel for 4 weeks after your operation to reduce your chances of developing a blood clot.

Further information

Anticoagulation Europe

☎ 020 8289 6875

🌐 www.anticoagulationeurope.org

British Heart Foundation

☎ 08450 708070

🌐 www.bhf.org.uk

Lifeblood: The Thrombosis Charity

☎ 01406 381017

🌐 www.thrombosis-charity.org.uk

NHS Direct

☎ 0845 4647

🌐 www.nhsdirect.nhs.uk

If you require this leaflet in any other format, eg, large print, please telephone 01935 384590

Reducing the risk of a blood clot

(Deep vein thrombosis and
pulmonary embolism)

Undergoing an operation or a stay in hospital where you are inactive for a period of time may increase your risk of developing a blood clot. This leaflet aims to explain how blood clots form, why you may be at risk and what can be done to reduce the chances of you developing a blood clot.

How does a blood clot form?

Blood normally flows quickly through veins and does not usually clot. However, when you are unable to move around as much as usual, eg, during and following an operation, blood flow slows down and can collect in the lower parts of your body, particularly the legs. Slow flowing blood can trigger the formation of a blood clot (also known as a thrombus).

When a clot forms in one of the 'deep veins' in your calf, thigh, pelvis or arm, it is known as a Deep Vein Thrombosis (DVT). Deep veins are ones which go through the muscles not the ones which you can see just below the skin surface.

Risk Factors

Sometimes a blood clot occurs for no apparent reason, but the following factors are known to increase the risk of having one:

- You or your family have a history of blood clots
- You have cancer
- You have a severe infection
- You have severe bowel inflammation, Colitis or Crohn's disease

- You have longstanding problems with your heart or lungs
- You are on the combined contraceptive pill* or are taking HRT
- You have inflamed varicose veins (phlebitis)
- You are overweight
- You are a smoker
- You are unable to move around
- You take a journey of more than 3 hours in the 4 weeks before or after your operation (for example, by air or train)
- You are over 60
- You have a condition that makes your blood more likely to clot

* You may be advised to stop taking the contraceptive pill a few weeks before an operation.

The healthcare professionals providing your care will assess if any of these risk factors apply to you.

When a blood clot forms in a vein it usually remains stuck to the vein wall. The symptoms tend to settle gradually. The clot itself is not life-threatening, but if it comes loose it can be carried in your blood to another part of your body where it can cause problems - this is called a Venous Thromboembolism (VTE).

If the clot travels to the lungs it is called a Pulmonary Embolus (PE) which can cause breathing problems and chest pain. A large pulmonary embolus can cause collapse and sudden death. Even if a blood clot does not come loose it can still cause long-term damage to your veins.

Reducing the risk

The main ways of reducing your chances of developing a blood clot are:

- Getting mobile again as soon as possible - following advice from your physiotherapist
- Keeping well hydrated - it is important to drink plenty of fluids
- The use of devices to help stop the blood collecting in your leg veins, ie, mechanical calf compression or compression stockings
- The use of medicines that reduce the risk of your blood clotting

Stopping the blood collecting in your leg veins

Compression stockings - are tight stockings specially designed to help reduce the risk of blood clots. The stockings squeeze your feet, lower legs and thighs, so that the blood cannot pool in your legs and keep it flowing quicker around your body. If you stay in hospital you may be offered compression stockings. You will be shown how to wear them correctly. It is important to wear the stockings as much as possible until you are back to your usual level of activity.

Medicines that reduce the risk of blood clots

Depending on your risk factors and type of operation, you may be offered Heparin - an 'anticoagulation' drug that helps prevent your blood forming clots.