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Preventing Blood Clots

A Guide for Patients to Extended DVT Prophylaxis

What is deep vein thrombosis (DVT)?

Whenever we cut ourselves our blood hardens and a scab forms. This process is called blood clotting or coagulation.

Sometimes a clot of blood can occur within a vein, forming a 'plug', which can interrupt the normal flow of blood. When a clot forms in a vein in the leg this is called deep vein thrombosis (DVT for short).

Orthopaedic patients are at particular risk of DVT, especially after hip and knee replacement. This increased risk is not just confined to the period spent in hospital, but continues for a number of weeks after an operation. For this reason, a program of preventative therapy will be used after your operation, which will include continuing your medication at home after discharge (extended DVT prophylaxis).

How will I know if I have a blood clot in my leg?

A blood clot in your leg can sometimes cause pain, redness, tenderness and swelling in your leg.

However, the great majority of blood clots which develop are 'silent', which means they are not evident on examination. Blood clots can even develop occasionally while taking anti-clot medication.

For this reason, you will have a scan taken of your legs (Venous Duplex Scan) shortly before discharge.

Is it serious?

If a blood clot becomes dislodged from the vein in your leg it can travel through the veins of your body and get stuck in the blood system in your lungs. This condition is known as a pulmonary embolism or PE and can be very serious. People who have a PE may experience sharp pains in their chest and be short of breath. If you experience these symptoms call the doctor immediately.

How do we prevent blood clots?

A number of precautions will be taken:

- In recovery after your operation, inflatable leggings will be applied which will gently inflate and deflate several times each minute, compressing your legs and helping to push along the circulation. (You can help by wiggling your feet and ankles frequently when lying in bed).

- You will be given a pair of tight white stockings to compress the veins in your legs and to limit swelling.
- The physiotherapists will start bed exercises and get you out of bed the very next day.
- You will be given a medication called an 'anticoagulant'. This helps to prevent your body from developing blood clots. This medication also prevents any existing blood clots from getting bigger.

How does this medication work?

Anticoagulants are also known as 'blood thinners'. They work by modifying the body's natural system to prevent blood clots. They will not dissolve blood clots that have already formed, but will allow your body to do this naturally over a period of a few weeks.

What type of medication am I taking?

Clexane® (enoxaparin sodium) is given as a simple once daily injection into the skin in your stomach area. You will be instructed how to give yourself this medication by self-injection while in hospital (just like diabetics do) so that you can continue the medication after you leave the hospital.

You will be given a kit to take home including everything you need to continue the medication.





Are there any side effects?

If you follow the advice given by your doctor, nurse and pharmacist about how to take your medication, it is unlikely that you will experience any problems. However, you should seek medical attention immediately if:

- You feel chest pains or develop shortness of breath.
- You injure yourself – particularly your head, eyes or joints.
- You cut yourself and bleed heavily.
- You have nose bleeds or your gums bleed heavily.
- You have a very 'heavy' period.
- You notice unexpected bruises such as brown or black spots on the skin.
- You vomit blood or material that looks like coffee grounds.
- You pass red urine or black stools.
- You develop a sudden change in your general health e.g. vomiting, diarrhoea, fever etc.

Do I need regular blood tests?

Unlike the most popular oral anticoagulant, Warfarin, a standard dose of Clexane produces a fairly uniform anti-clot effect in the blood. Therefore, monitoring the level of clexane in the blood with regular blood tests is not necessary.

What if I cut myself?

You should apply a clean cloth and press down on the wound for at least 5 minutes. The bleeding should then stop. If it continues, you should contact your doctor straight away.

Sensible precautions

- a) Tell your doctor if you are taking any other medicines. They may interact with the clexane and stop working properly. Ask your doctor, nurse or pharmacist for advice. Always tell your doctor, nurse, and dentist that you are taking an anticoagulant.
- b) Try to take your medicine regularly as instructed. At the same time each day to gain maximum benefit. If you miss a dose, tell your doctor or pharmacist.
- c) If possible, avoid trips to the dentist during your treatment. If you need to go, you are on your medication. If you need to go urgently, inform the dentist that you are taking an anticoagulant.

Avoiding injury. Don't be a clumsy

While on the medication:

- a) Exercise according to your doctor's instructions.
- b) Take care when brushing your teeth and shaving. Use a soft toothbrush and electric shaver rather than razors.
- c) Avoid insect bites where possible. Use an insect repellent on your legs.
- d) Always wear shoes or slippers. Wear strong gloves for gardening.

**DO NOT START YOUR
ANTI-INFLAMMATORY
MEDICATIONS OR ASPIRIN UNTIL
INSTRUCTED TO BY ME**



**For any enquiries regarding this
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