

## Am I at increased risk of blood clots?

If you have any of these risk factors, speak with your doctor or a member of your Healthcare Team immediately as they may affect your healthcare plan.

- ☐ A **trauma or injury**: particularly to your legs
- ☐ **Hospital stay/bed confinement/immobilization**: you have been confined to bed for at least 3 days, or are unable to walk without help, or spend a large part of the day in bed or in a chair
- ☐ **Surgery**: you are having any operation or surgery taking longer than 90 mins, or 60 mins if the operation is on your leg, hip or abdomen (including hip or knee replacement)
- ☐ **History of blood clots**: either you or a close relative have had a previous DVT
- ☐ **Cancer**: you are receiving treatment for cancer (chemotherapy or radiotherapy), OR you have cancer which is not in remission
- ☐ **Cancer remission**: you have cancer that is in remission
- ☐ **Age**: you are over the age of 60, particularly if your mobility is poor
- ☐ **Blood disorders**: you have a blood disorder that affects how your blood clots
- ☐ **Chronic medical condition**: you have any long-term medical condition such as diabetes, inflammatory conditions (e.g. rheumatoid arthritis), and heart or lung problems
- ☐ **Overweight**: your body mass index (BMI) is more than 30
- ☐ **Pregnancy**: you are pregnant
- ☐ You are currently using **oral contraception** or **hormone therapy** that contains estrogen

## Am I at increased risk of bleeding?

Anticoagulant medications are well tolerated. One of the common side effects is bleeding. If bleeding occurs, it can be managed by a physician.

If any of the following applies to you, please tell your doctor so it will be taken into account when choosing the best medication, or other option, for preventing a clot.

- ☐ You are taking **anticoagulant drugs** (e.g. Coumadin (warfarin), Pradax® or Xarelto®)
- ☐ You are taking **medication** that affects blood clotting, such as aspirin or clopidogrel (Plavix®), and some pain killers
- ☐ You have **haemophilia** or another **known bleeding disorder**
- ☐ You have a **low platelet count**
- ☐ You have a **past history** of major bleeding or a bleeding peptic ulcer
- ☐ A **family history** of major bleeding
- ☐ You have had a **stroke** recently
- ☐ You have very **high blood pressure**
- ☐ You have **severe liver or kidney disease**

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**Your health is your responsibility. Tell your doctor if you have any of these risks.**

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# Preventing Deep Vein Thrombosis (DVT) and Pulmonary Embolism (PE)

Information for patients, relatives and caregivers

VTE Prevention  
*Simplified*



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VTE Prevention  
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This leaflet will answer some of your questions and concerns about deep vein thrombosis (DVT) and pulmonary embolism (PE). For more information on how to prevent blood clots or how blood clots can be treated, please see the Patient Guide on the **Prevention and Treatment of Blood Clots**.

## What are blood clots?

Normally, blood flows easily through your blood vessels. However, if a blood vessel becomes damaged or if the flow slows down or stops, a clot can develop and form a 'plug'. Why does this happen? When an injury occurs, the body creates blood clots to prevent major bleeding, for example, in the case of a cut. Sometimes a blood clot forms even when there has been no injury. A clot can form in an artery or vein changing the speed of blood flow or even blocking the flow entirely.

When a blood clot forms deep inside a vein in your body, usually in the lower leg, it is called a **deep vein thrombosis or DVT** for short. Pain, redness, tenderness and swelling may occur around the site of the clot. However, some people have no symptoms at all.

If a blood clot comes loose from the walls of the vein, it can travel through your bloodstream to your lungs. This is called a **pulmonary embolism (PE)**. If this occurs, it can cause symptoms such as light-headedness, sharp chest pain and shortness of breath. If the clot is large enough, the consequences can be very severe, including death.

## How can my risk of blood clots be reduced?

Read the list on the back of this leaflet to learn about the risks for blood clots and tell your doctor or any member of your Healthcare Team if any of them apply to you. Your risk for a blood clot increases if you are having surgery (even day surgery) or will be in the hospital for any length of time. If you are taking birth control pills or hormone therapy (e.g. estrogen, "Premarin") your risk also increases.

## When you are at the hospital

There are a number of steps your Healthcare Team can take to help reduce your risk of DVT before, during, and after your surgery or stay in hospital. They will make sure you have enough fluids so that you do not become dehydrated. They will also encourage you to move around as soon as you are able.

If you are having an operation as a day patient and you are at risk, your Healthcare Team may discuss therapy to help prevent blood clots (prophylaxis). They may also ask you to continue the therapy at home after your operation.

### Depending on your risks you may be offered:

- A drug known as an anticoagulant that prevents blood clots from forming
- Anti-embolism stockings or an intermittent pneumatic compression device to help keep the blood in your legs circulating

You should speak with your physician or Healthcare Team about how to reduce your risk of blood clots.

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**Blood clot prevention starts with you. Know your risks for a blood clot and share them with your Healthcare Team.**

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## When you go home after your surgery or hospital stay

If your risk of blood clots is high, your Healthcare Team will give you a prescription for the anticoagulant/clot preventing drug to continue after you leave the hospital. However, for most patients, moving around and getting back to normal activities as soon as possible will be enough to reduce the risk of clots forming when discharged home.

## Are there any signs I should look out for?

**There are certain signs to look out for after your surgery or hospital stay that may mean you have a blood clot. You should seek help immediately if you experience any of the following in the days or weeks after your treatment, especially after being discharged from the hospital.**

### Symptoms of a DVT

- Pain or swelling in your leg or calf
- The skin on your leg feels warm or is discoloured (red, purple or blue)
- The veins near the surface of your legs appear larger than normal or you notice them more

### Symptoms of a PE

- Sudden breathlessness or shortness of breath that cannot be explained
- Sudden sharp pain in your chest or upper back
- Light-headedness or coughing up blood (does not always occur)