Deep vein thrombosis

This leaflet explains more about deep vein thrombosis (DVT) and how to treat it. If you have any further questions, please speak to the nurse or doctor caring for you.

What is deep vein thrombosis (DVT)?
A DVT is a blood clot that has formed in one of the deep blood vessels. It usually occurs in your leg, but can occur in any of the deep veins, such as those in your abdomen or arm.

What causes DVT?
Sometimes a reason cannot be found, but associated risk factors for blood clots include:
- previous blood clots or a family history of blood clots
- pregnancy
- oral contraceptive pill
- surgery or immobility
- long-haul flights (and other travel if more than four hours in duration)
- smoking
- being overweight
- increasing age
- cancer
- underlying ‘sticky blood’.

How is DVT treated?
If you have a DVT, your doctor will prescribe you an anticoagulant, which is a medicine that prevents the blood from clotting as quickly as normal. The anticoagulant will stop the blood clot getting any larger and will also prevent it from breaking off and travelling to your lung (pulmonary embolus).

When do I need to seek immediate medical attention?
Although the anticoagulant will help stop the clot from getting bigger and may help the symptoms of leg swelling, it will not get rid of the clot completely. You must therefore seek immediate medical attention if your symptoms worsen, or if you develop any new symptoms such as:
- chest pain or breathlessness
- coughing or vomiting blood
- increased leg swelling.

As with all medicines, you may experience side effects of the anticoagulant. In particular, it may cause bleeding, which may not be obvious. Please seek immediate medical attention if you have any of the following:
- prolonged or excessive bleeding
- exceptional weakness, tiredness, paleness, dizziness, headache, unexplained swelling, breathlessness, chest pain or angina.
If you experience any other side effects that you are concerned about, please contact your doctor. Further information on side effects can be found in the manufacturer’s patient information leaflet that comes with the medicine.

What do I need to remember after I go home?

Once you have been treated for DVT, there are a number of things that you should remember to ensure your continued safety:

- **Post-thrombotic syndrome:** This is a common complication of DVT. Symptoms include leg swelling, varicose veins and occasionally leg ulcers. These symptoms can be life-long. We recommend that you wear compression stockings for at least two years following a DVT to help minimise this.

- **Exercise and rest:** You may find that your physical activity is limited due to your symptoms. It is advisable to avoid prolonged periods of exercise in the first few weeks, and ensure you take enough rest.

- **Pain relief:** If you need a painkiller, paracetamol is safe to take with warfarin or rivaroxaban, which are the anticoagulants that we use in the treatment of DVT. **Aspirin and non-steroidal anti-inflammatory drugs, such as ibuprofen, should be avoided,** unless under the guidance of your GP. This is because they may interfere with your treatment.

- **Other medication:** Always check with your GP or pharmacist before taking any medication, including herbal or alternative treatments, to ensure they are safe to take with your treatment.

- **Diet:** It is advisable to eat a healthy, balanced diet, and to avoid excessive changes in your weight during your treatment. Alcohol can interfere with warfarin and it is recommended that you do not drink more than one to two units of alcohol per day if warfarin is prescribed for you.

- **Travel:** Long distance travel is not advisable for six weeks after your diagnosis.

Will I have a follow-up appointment?

Once you have been diagnosed with a DVT, you will be seen by a **thrombosis nurse specialist** in the Haemostasis and Thrombosis Centre at St Thomas’ Hospital. You will then see a **thrombosis consultant** for further assessment within a week of seeing the nurse specialist.

What if I investigation reveals that I do not have a DVT?

If we suspect a DVT but the first scan is negative, we will treat you with an anticoagulant and repeat the scan after one week. If the second scan is negative, we will advise you to stop taking the anticoagulants and return to A&E for completion of the investigation and management of your leg symptoms.

Useful sources of information

The following websites offer information and advice:

- **NHS Choices:** [www.nhs.uk/conditions/Deep-vein-thrombosis](http://www.nhs.uk/conditions/Deep-vein-thrombosis)
- **Lifeblood:** [www.thrombosis-charity.org](http://www.thrombosis-charity.org)
Contact us

If you have any questions or concerns, please feel free to contact:

Richard Glaves on 020 7188 8632 or 07824 473901
Johanna Young on 020 7188 8632 or 07825 522933

Out of hours, please call the hospital switchboard on 020 7188 7188 and ask for the haematology registrar on call.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
t: 020 7188 8748 9am to 5pm, Monday to Friday

Patient Advice and Liaison Service (PALS)
To make comments or raise concerns about the Trust’s services, please contact PALS. Ask a member of staff to direct you to the PALS office or:
t: 020 7188 8801 at St Thomas’  t: 020 7188 8803 at Guy’s  e: pals@gstt.nhs.uk

Language Support Services
If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.
t: 020 7188 8815  fax: 020 7188 5953

NHS 111
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.
t: 111

NHS Choices
Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.
w: www.nhs.uk