

**Patient
Information**

Deep Vein Thrombosis (DVT)

Introduction

You have been given this leaflet because it is suspected that you have a Deep Vein Thrombosis (DVT).

What is a DVT?

A DVT is a blood clot in one of the deep veins in the body. When you injure yourself, your body forms blood clots as a way of protecting you from losing blood. Sometimes this can go wrong, resulting in blood clots forming inside your veins, which interrupts the normal flow of blood.

Potential causes of a DVT

The most common risk factors are:

- Being over the age of 65 years.
- Periods of reduced activity, for example recently having had a long car journey.
- Taking oral contraception (the pill), having HRT (Hormone Replacement Therapy) or being pregnant.
- Having some medical conditions such as cancer or having chemotherapy.
- A family history of DVT or Pulmonary Embolism (PE).
- If you have had a previous DVT or PE.

Symptoms of a DVT

- Pain, swelling and tenderness in one of your limbs (usually your calf).
- Skin feeling warm in the area of the clot.
- Redness (where the pain is).

Treatment

It is important that a DVT is treated to prevent any of the clots moving through the veins in your body and getting lodged in the blood system in your lungs. This is called a Pulmonary Embolism (PE) and can be very serious.

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Symptoms of a PE

- Chest pain that is sharp and worsens when you take a deep breath in.
- Unexplained shortness of breath.
- Upper back pain.
- Coughing or coughing up blood.
- Fainting.
- Feeling as though you have an irregular heartbeat.

If you have any of these symptoms you must seek urgent medical attention.

Contact the Emergency Services, telephone 999 immediately and ask for an ambulance.

How do you find out if I have a DVT?

D Dimer - this is a blood test that measures how sticky your blood is. If it is within a normal range, it is unlikely you will have a DVT. If the test shows a higher level of stickiness, you will be referred for an ultrasound scan of your leg.

Ultrasound - the sonographer will scan from the top of your leg (the groin), along the inside of your thigh, behind your knee and into your calf.

If we are trying to rule out an upper limb DVT the sonographer will scan your neck, upper chest and whole arm on the affected side.

After the scan the clinician will discuss the results with you and advise you about the next steps.

Treatment

If your scan is positive (shows a DVT), you will be assessed as to which method of treatment you need.

There are 3 different types of anticoagulants (blood thinners) available which include a daily injection or tablets.

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Side effects

As with all medicines, you may have side effects from the anticoagulant. This may cause bleeding. Simple cuts or bruises can bleed excessively. You should seek immediate medical attention if you have any of the following:

- Continued or heavy bleeding
- Tiredness
- Dizziness
- Severe headache

If at any time you develop pains in your chest, become short of breath or cough up blood, you should contact the Emergency Services, telephone 999 and inform them that you are being treated for a DVT.

Your safety

- You should avoid taking any other medicines unless prescribed by a doctor who knows that you are taking anticoagulants.
- Always tell your GP, nurse, dentist or pharmacist that you are taking anticoagulants.
- Let your GP and hospital staff know immediately if you think that you are pregnant or are planning to become pregnant.

Exercise

Gentle exercise such as walking or swimming is good for you.

Try to avoid contact sports such as rugby and any other sports which may cause injury or bruising while you are taking anticoagulants.

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If you have any questions or concerns about your treatment, please do not hesitate to contact one of the following:

Same Day Emergency Care Unit (SDEC)

Gloucestershire Royal Hospital

Tel: 0300 422 6677 or 6676

Monday to Friday, 8:00am to 11:00pm

Bank holidays and weekends, 8:00am to 9:00pm

Ambulatory Emergency Care

Cheltenham General Hospital

Tel: 0300 422 3618

Monday to Friday, 8:00 am to 8:00 pm

If you have any concerns after you have been discharged, please contact your GP or NHS 111 for advice.

NHS 111

Tel: 111

Further information

The following websites offer information and advice:

NHS Choices

Website: <https://www.nhs.uk/conditions/deep-vein-thrombosis-dvt/>

Thrombosis UK

Website: www.thrombosisuk.org

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>