



Reducing the risk of a blood clot for patients with a leg injury needing immobilisation

Information for patients from the Trust Thrombosis Group

When you have your leg held in a fixed position by a cast or appliance you are at a higher risk of developing a blood clot. This leaflet will help you to understand the treatment you may be given to help prevent a blood clot developing if you are unable to weight bear following a lower limb injury.

How does a blood clot form?

In the calf muscles of each of your legs there are many veins. As you walk, run, or move your feet, the muscles squeeze the veins and blood is moved towards your heart. This is known as the calf muscle pump.

If your leg is held in one position (immobilised) in a cast or appliance the calf muscle pump is less efficient. This can lead to blood collecting in the veins, which in turn can lead to a blood clot forming. This type of blood clot is also known as venous thromboembolism or VTE.

Is a blood clot life threatening?

A blood clot itself is not necessarily life threatening. However, if a part of it comes loose and travels to your lungs this is known as a pulmonary embolism (PE). This is a serious condition which can be fatal if not treated.



Am I at risk of a blood clot?

Having your leg immobilised in a cast or appliance can increase the risk of blood clots but some people are more likely to develop a blood clot than others. You are at increased risk if:

- you have a personal or family history of blood clots
- you have cancer or you are receiving cancer treatment
- you are taking the combined oral contraceptive pill or hormone replacement therapy (HRT)
- you are overweight (body mass index of 30 or more)
- you are pregnant
- you have had a baby within six weeks
- you have a disorder which makes your blood more likely to clot
- you have recently had an operation.

How can the risk be reduced?

A doctor or nurse will complete a simple assessment with you to work out your personal risk. If treatment is needed you will be offered an anticoagulant medication which helps to slow down clot formation. You will be given this either as a daily injection or tablet.

You will need to have this treatment for the entire time you have the cast or appliance on your leg or are non-weight bearing; you will be advised of this by the Fracture Clinic. You can be shown how to give yourself the injections, but if you have any difficulties, alternative arrangements will be made with your GP.

Whilst you are being treated you may also need to have some routine blood tests. You will be advised by the doctor or nurse assessing you when/if you will need these and may be given forms for you to make an appointment at your GP surgery.

Whether you have been prescribed injections or not, you should take the following precautions.

- Try to keep moving around as much as possible (unless you have been advised otherwise).
- Drink plenty of fluids to avoid dehydration.
- Take painkillers regularly, as needed.

Are there side effects to taking an anticoagulant?

As with all medicines, the anticoagulant injections can have side effects. The most common effect is that you may bruise and bleed more easily, and for longer if you get a cut. If you notice any bleeding or significant bruising you should contact your GP immediately. If you experience bleeding that does not stop after a few minutes you should contact 111.

Some patients develop redness/itching at site of their injection – if this happens to you, it may mean you have an allergy. For advice contact your GP.

What are the signs and symptoms of a blood clot?

- Pain or swelling in your legs.
- Change in colour of the skin on your legs (red, purple, blue) or feels hot.
- Shortness of breath.
- Pain in your chest, back, or ribs which is worse when you take a deep breath.
- Coughing up blood.

What should I do if I develop signs or symptoms of a blood clot?

You should contact your GP or 111 immediately. If you have severe shortness of breath or chest pain you should dial 999 for an ambulance.

Useful websites

- **NHS**
Web: www.nhs.uk
- **Preventing VTE**
Web: www.vte-prevention.co.uk

Useful contact numbers

• Fracture Clinics

- | | |
|--|---------------------------|
| - William Harvey Hospital, Ashford | Telephone: 01233 61 68 49 |
| - Kent and Canterbury Hospital, Canterbury | Telephone: 01227 86 63 54 |
| - Queen Elizabeth the Queen Mother Hospital, Margate | Telephone: 01843 23 50 56 |

• DVT Clinics

- | | |
|--|---------------------------|
| - William Harvey Hospital, Ashford | Telephone: 01233 65 18 41 |
| - Kent and Canterbury Hospital, Canterbury | Telephone: 01227 86 42 46 |
| - Queen Elizabeth the Queen Mother Hospital, Margate | Telephone: 01843 23 45 25 |

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhuft.nhs.uk/patientinformation