

Venous Thromboembolism Patient Education

Deep vein thrombosis (DVT) and Pulmonary embolism (PE)

What is deep vein thrombosis?

- Our body has many veins. Some are seen just under the skin but others are deep. These deep veins pass through the middle of the body, arms and legs. Blood flows back to the heart through these veins. A deep vein thrombosis (also called DVT) is a blood clot that forms in a deep vein.

Why is DVT dangerous?

- DVTs can be very serious. The body is able to break up small clots. A DVT can lead to blood clots in the lung called pulmonary emboli (also called PE). This happens when the clot moves through the deep veins to the heart where it gets stuck in the lungs. It is important to treat DVT, so that we can prevent clots going to the lungs.

How does DVT occur?

- DVT happens when a blood clot forms inside a vein. Blood usually flows smoothly through veins using muscles to push the blood back to the heart. If a clot has formed in a vein it can block some or all of the blood flow. Clots protect us from bleeding. A clot will form to stop the bleeding if we cut ourselves.

Who's at risk for DVT?

DVT may happen for no apparent reason. However, risk for DVT may increase in certain circumstances.

You are at higher risk for DVT if you:

- Keep still for any length of time while you are standing, sitting or sick in bed. The blood flow back to the heart will slow down. This slow down may cause the blood to stick together in the vein and make a clot.
- Have inherited conditions that may make the blood too thick or “sticky” or make the blood clot faster than usual.
- Are taking birth control pills or hormone therapy.
- Are overweight.
- Have more than one risk at the same time.

There are other factors as well that your doctor will consider when determining the best treatment for you.

Can DVT be prevented?

Even though there are no guarantees, there are some things that can help lower your chances of getting a DVT.

What your doctor should order:

- Medication (sometimes called “blood thinners”) to slow down the making of clots (may be a pill or an injection)
- Special elastic stockings if you are unable to take the medication above

What you can do:

- Drink plenty of fluid to keep well hydrated.
- Exercise the muscles in your legs by “ankle pumping” at least 10 times per hour).
- Move around as soon as you are able. This includes changing your position if you have to stay in bed.
- When you begin to get out of bed ensure that you do so as often as permitted.
- Wear loose fitting clothing.

What does a DVT feel like?

If you develop a DVT, chances are it will be in one of your legs. If this happens there may be swelling, redness, pain or tenderness. The pain may only “be there” or may get worse when you stand or walk.

If you develop any of these symptoms while you are in the hospital tell your nurse right away. If you have gone home tell your doctor right away or go to the Emergency Department

How will I feel if I have a PE?

- Remember that a PE is in your lungs. You may have sudden chest pain. You may feel like you are going to faint. You may feel like you can’t catch your breath. Sometimes when people can’t catch their breath they feel quite anxious and scared. You may cough up blood.

- Again if you have any of these symptoms while you are in the hospital tell your nurse right away. If you have gone home and develop these symptoms, go to the Emergency Department or call for an ambulance.

What treatment will I receive if I have a DVT or a PE?

- The doctor will do tests to make sure that the condition is actually a DVT or PE. Tests may include blood work, special x-rays or a CT scan.
- If you have a DVT or PE you will be ordered medication known as “blood thinners”. Blood thinners can be given by intravenous infusion, needle, pill or in combination (e.g. receive both needle and pill). If you are started on a blood thinning pill or infusion, you will have a blood test done. The test tells your doctor how thin your blood is and how much medication you will need. The test will need to be done frequently during your care.
- Most often you will be able to go home. Sometimes you will need to be admitted to hospital to start your blood thinners. Your doctor decides this after checking you and your test results. Your doctor will tell you how long you should stay on blood thinners.

Questions?

Ask your doctor or nurse.

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“It is recommended that patients consult with their physician for any other symptoms or concerns that may apply to their particular case”